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Date: As of January 26th, 2018
To: Well Sealing State Cost-Share Applicant
From: Watonwan County Soil & Water Conservation District

Below are the steps to apply for the voluntary State Cost-Share program for well sealing.

1. **Before** the well is sealed the landowner:

A.) Contacts the Land Management/ SWCD office to verify there is cost-share available for a well sealing.

If Cost-Share is available and the landowner would like to apply they will need to bring the following items into the Land Mgt./ SWCD office:

1.) A copy of the cost estimate for sealing the well.

Date Completed: _____

2.) Identify on an aerial map the location of the well to be sealed.

Date Completed: _____

B.) With these items we can then move forward and fill out the cost-share contract!

If approved, well sealing Cost-Share is 50%, up to \$400.00 per well.

Remember you must have the cost-share contract signed and approved by the Land Management / SWCD office before your well is sealed to qualify for cost-share assistance.

Date Contract Approved: _____

Please See Reverse Side



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2. **After** a licensed well contractor has completed the sealing the landowner must submit to the office:

A.) Copy of the itemized bill with proof of payment in full.

Date Completed: _____

B.) Copy of the well sealing and boring record from the MN Department of Health.

Date Completed: _____

It is the landowner's responsibility to bring both items listed above to the Land Mgt./ SWCD office. When scheduling the well sealing with your contractor please keep in mind the install by date (#6) on your contract. Failure to comply with this date will result in loss of funds.

3. Once we have received the information above we will complete the Cost-Share payment voucher; which will require the landowner's signature.

Date Completed: _____

4. Your Cost-Share voucher will then be submitted to the Watonwan County Soil & Water Conservation District Board of Supervisors for final payment. The Board of Supervisors meets the third Monday of each month. Your check should be issued by the end of the month in which it was submitted and will be sent to the address you have provided.

Date Completed: _____

Thank you for participating in the Well Sealing Cost-Share program!