

# Cow Creek Groundwater Conservation District

216 Market Ave Ste 105  
Boerne, Texas 78006  
(830) 816-2504  
Fax (830) 816-2607

## ***Driller/Pump Installer Verification Form***

**District rule 5.5 (A)** Only persons who have a license issued by the Executive Director of the Texas Department of Licensing and Regulation pursuant to Texas Occupations Code Chapter 1091 and whose licenses are verified with the District are allowed to commercially drill wells within the District. Licenses must be verified with the District on forms provided by the District and be in accordance with and contain information called for in the form of verification. **(B)** Commercial Pump Installers are required to verify that they have a license issued by the Executive Director of the Texas Department of Licensing and Regulation pursuant to Texas Occupations Code Chapter 1902. License verification shall be on forms provided by the District and shall be in accordance with and contain the information called for in the form of verification.

Driller/Pump Installer Name: \_\_\_\_\_  
(Please Print)

Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

State License Number: \_\_\_\_\_ (Please attach a copy of current Driller/Pump Installer License.)

Company Affiliated With: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Company Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

I hereby certify and acknowledge that the information contained herein is true and correct to the best of my knowledge and belief. I further acknowledge that I have read, understand and agree to abide by the Rules and Regulations established by Cow Creek Groundwater Conservation District.

\_\_\_\_\_  
Driller/Pump Installer Printed Name

\_\_\_\_\_  
Driller/Pump Installer Signature

---

### (For District Use Only)

Copy of Cow Creek Groundwater Conservation District Rules

\_\_\_\_\_ Provided Driller/Pump Installer at time of Certification.

\_\_\_\_\_ Mailed/E-mailed to Driller/Pump Installer with request for Certification Form on \_\_\_\_\_  
(Date Mailed)

**District Verification Issued on this \_\_\_\_\_ day of \_\_\_\_\_,**

**District Verification issued by: \_\_\_\_\_**