



CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD
CENTRAL VALLEY REGION
Irrigated Lands Regulatory Program
Drinking Water Well Member Information

Complete entire form if you have a drinking water well on an enrolled Assessor's Parcel Number (APN) and submit it with your well samples to an ELAP laboratory for required data entry into the State's GeoTracker database.

1. Coalition Member Information
 (Personal information will not be available to the public, only APN and well sample data will be available to view through the GeoTracker database) **Note: fields marked with a * are required to be filled out.**

1a. Coalition Name: *	1e. Farm Name: *
1b. Coalition Member ID#: *	1f. Member's Phone: *
1c. Member's Name: *	1g. Member's Email: *
1d. Member's Mailing Address: *	1h. Property Address (if different from mailing address):

1i: Is the coalition member also the landowner? YES (If yes, skip boxes 2a-2d) NO

1j: Is the coalition member (including family) the only consumer of the drinking water? YES NO
 (If no, notification to all consumers and the Central Valley Water Board is required if nitrate exceedance is identified.)

2. Landowner Information (if coalition member is not the landowner)

2a. Landowner's Name:	2c. Landowner's Phone:
2b. Landowner's Mailing Address:	2d. Landowner's Email:

3. Drinking Well Water Information: List all drinking water wells on Irrigated Lands Regulatory Program enrolled parcel(s) below.
 (Note: If well was previously sampled and data is entered into GeoTracker, place an "X" in column to the left of the Well Name/Field Point Name.)

X	Well Name/ Field Point Name *	Latitude	Longitude	County *	Assesor Parcel Number *

4. CERTIFICATION
"I certify under penalty of law that to the best of my knowledge and belief, this document and any attachments submitted is, true, accurate, and complete and was prepared by me or under my direction or supervision. I am aware that there are significant penalties for knowingly submitting false information."

4a. Signature: *	4b. Date:
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INSTRUCTIONS FOR Drinking Water Well Member Information Form

1. Coalition Member Information

- 1a: Coalition Name: * The coalition that you are a member of. For example, East San Joaquin Water Quality Coalition.
- 1b: Coalition Member ID: * The number given to you by the coalition when you enrolled.
- 1c: Member Name: * The name of the person who is enrolled in the coalition.
- 1d: Member Mailing Address: * The mailing address of the enrolled member.
- 1e: Farm Name: * The name of the farm that is enrolled in the coalition.
- 1f: Member's Phone: * The working phone number of the enrolled member.
- 1g: Member's Email: * The valid email address of the enrolled member.
- 1h: Property Address: The address of the enrolled parcel if different from the mailing address.
- 1i: Is the coalition member also the owner?: If yes, skip boxes 2a-2d. If no, please provide landowner information.
- 1j: Is the coalition member (including family) the only consumer of the water?: In the event that the nitrate+nitrite as nitrogen exceedance: If yes, notify Central Valley Regional Board; if no, notification required to all users and the Central Valley Water Board within 10 days.

2. Landowner Information

- 2a: Landowner Name: The name of the landowner of enrolled parcel(s).
- 2b: Landowner Mailing Address: The mailing address for the landowner of the enrolled parcel(s).
- 2c: Landowner Phone: The working phone number of the landowner of the enrolled parcel(s).
- 2d: Landowner Email: The valid email address of the landowner of the enrolled parcel(s).

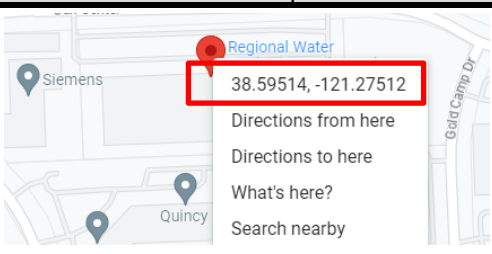
3. Drinking Water Well Information

Well Name/Field Point Name: * Provide a specific name for each well. The name should clearly identify well for future sampling events (NOT TO EXCEED 10 CHARACTERS). If water is collected after a treatment system provide TRT at beginning of Well Name (ie: TRT-SEwell).

An "X" should be placed in the column to the left of the Well Name/Field Point Name field if the well has previously been sampled. This column will be used for previously sampled wells (within the last 5 years) for data entry or during year 2 sampling to help the laboratory identify previously sampled wells.

Latitude and Longitude is found using a cell phone or computer. While using Google Maps, type in the address and

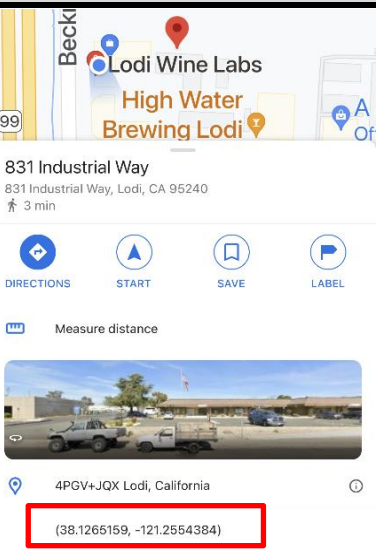
From a Computer



Once the address is displayed on the map, right click the red pin drop and the latitude and longitude will appear in the list.

In this case, the latitude is **38.59514** and the longitude is **-121.27512**.

From a Cell Phone



Using Google Maps, drop a red pin by placing finger on the map and hold in place where the well is located.

When the red pin box comes up at the bottom of the screen, scroll down to the pin symbol for latitude and longitude.

In this case, the latitude is **38.1265159** and the longitude is **-121.2554384**

County: * The county in which the parcel is located.

APN (Assessor's Parcel Number): * The assessor's parcel number is a unique number that is assigned to each tract of land in a county by the Tax Assessor. Please provide the APN of the enrolled parcel with the drinking water well.

*** FIELDS WITH A RED ASTERISK ARE THE MINIMUM DATA REQUIRED FOR GEOTRACKER ENTRY.**