



FOR IDWR OFFICE USE ONLY

Cardholder ID# _____

Idaho Department of Water Resources • PO Box 83720, Boise ID 83720 • www.idwr.idaho.gov • 208-287-4800

WELL DRILLER/OPERATOR COMPANY TRANSFER FORM

Well Drillers or Operators transferring employment from one Idaho well drilling company to another must complete this form (238-1B) and return it, along with their driller's or operator's card for their former company, to IDWR at the address below. A new card will be issued to the applicant and mailed to the company address listed on this form.

Send this completed form and the permit card for the former company to:

Idaho Department of Water Resources
Attn: Well Driller Licensing
PO Box 83720
Boise, ID 83720-0098

PART I: TRANSFERRING APPLICANT

APPLICANT INFORMATION				
Former Co. License #	Permit Card #	Last Name	First Name	MI
Mailing Address		City	ST	Zip
Contact Phone #	Phone type (select one): <input type="checkbox"/> mobile <input type="checkbox"/> home <input type="checkbox"/> work		Email Address	

X

Applicant Signature (as it will appear on Well Driller's Reports)

Date

PART II: NEW COMPANY AND PRINCIPAL DRILLER

COMPANY INFORMATION			
Drilling Company Employing Applicant			IDWR Co. License #
Company Mailing Address		City	ST Zip
Company or Principal Driller Phone #	Phone type (select one): <input type="checkbox"/> company <input type="checkbox"/> PD mobile <input type="checkbox"/> PD office		Company or Principal Driller Email Address

PRINCIPAL DRILLER SIGNATURE

By signing below, I CERTIFY THAT I and all other drillers and operators under my supervision will follow Idaho State Rules and Regulations (IDAPA). I certify that this application is true and correct to the best of my knowledge.

X

Principal Driller's Signature

Principal Driller Name (please print clearly)

Date