ADM-365
6/01

New Jersey Department of Environmental Protection
General Services
Examinations & Licensing Unit

OFFICE USE ONLY
App. Fee _____
RA _____
Date _____
Initial Lic. Fee _____
RA _____
Date _____

APPLICATION FOR
NEW JERSEY MONITORING WELL DRILLER LICENSING EXAMINATION

INSTRUCTION SHEET

Enclosed is an application and study material for the New Jersey Monitoring Well Driller Licensing Examination.

- **All applicants must circle the appropriate test month.**
- **All applicants must attach a copy of their high school diploma or GED certificate to the application.**
- **All applications and your two reference questionnaires, Form ADM-166B, must be completely filled out and notarized or your application will be rejected.**
- **In order to qualify for the New Jersey Monitoring Well Driller Licensing Examination you must have at least three years of well drilling experience as of the signature date on the application.**
- **All applicants must assure that the five Category 3 wells listed in Section B are included with the total of the wells listed on your reference questionnaires.**
- **Category 5 wells are not acceptable as well drilling experience.**
- **New Jersey Experienced Applicants Only: You must attach to your application, a legible copy of the State Well Permit and Well Record for each of the five (5) wells you list in Section B or your application will be rejected.**

A non-refundable $35.00 check made out to the **"Treasurer, State of New Jersey"** should be enclosed with the application and the completed package sent to the following address:

New Jersey Department of Environmental Protection
Examinations & Licensing Unit
PO Box 441
Trenton, New Jersey 08625-0441

Further notice will be sent to you after your application is reviewed and accepted, indicating the date, time and location for your scheduled examination. A location map for the testing center will be included with the notification.

NOTE: NO EXCEPTIONS FOR LATE APPLICATIONS
Applications must be postmarked by the appropriate closing date.

Regularly scheduled examinations will be held during the second or third week of each test month:

	TEST MONTH	APPLICATION CLOSING DATE
(Please circle the appropriate month ➡ you wish to be tested)	June	May 1
	December	November 1

ADM-365
6/01

APPLICATION FOR
NEW JERSEY MONITORING WELL DRILLER LICENSING EXAMINATION

under the provisions of N.J.S.A. 58:4A-4.1 et seq.

PLEASE TYPE OR PRINT

A. GENERAL INFORMATION

Name _____ Age _____

Address _____
Street, Town, State & Zip Code

Daytime/Work Phone No. (____) _____ *Social Security No. _____ - _____ - _____

The social security number is required of all individuals applying for any license in accordance with Child Support Act (N.J.S.A. 2A:17-56.44e). Failure to provide this information will result in an automatic rejection of your application.

Applicant is subject to examination before the New Jersey State Well Drillers and Pump Installers Examining and Advisory Board under the provisions of N.J.S.A. 58:4A-10.

Did you graduate from high school or possess a high school equivalency certificate? ☐ Yes ☐ No Year Graduated/GED obtained _____

A copy of your high school diploma or GED certificate must be attached to your application or it will be rejected.
List any colleges, universities, vocational and/or business schools attended

NAME & LOCATION OF SCHOOL	MAJOR AREA OF STUDY	DATES ATTENDED
		From To
		From To

B. WORK EXPERIENCE *(Attach additional sheets if necessary)*

Fill in your prior experience in well drilling. All applicants must indicate the month, day and year for each employment date listed.

NAME, ADDRESS & TELEPHONE # OF EMPLOYER	DESCRIBE YOUR DUTIES & RESPONSIBILITIES	DATE EMPLOYED
		From To
		From To
		From To

Do you possess any New Jersey Pump Installers, Soil Borers or Dewatering Well Licenses? ☐ Yes ☐ No If Yes, please list below

Type of N.J. License	N.J. Registration #	Date Issued	Expiration Date

Do you possess any out-of-state Well Driller License(s)? ☐ Yes ☐ No

If Yes, please list below and attach copy of your license.

State Issued	License Number	Date Issued	Expiration Date

NEW JERSEY WELL DRILLING EXPERIENCE: (To be completed by applicants with in-state experience only).

You must list a minimum of five Category 3 wells you have obtained experience with during the actual drilling within the last three years as of the signature date on the application. Two of the five wells listed as experience must have been constructed to depths of at least 25 feet using the oversize borehole method.

NOTE: •These five wells listed must correspond to your reference questionnaires as described in the instruction sheet.

•Category 5 wells **are not** acceptable as work experience.

N.J. WELL PERMIT NO.	N.J. WELL DRILLER WHO SUPERVISED YOUR WORK	N.J. WELL DRILLER REGISTRATION #	DATE OF DRILLING	DEPTH OF WELL	METHOD OF DRILLING
1					
2					
3					
4					
5					

OUT-OF-STATE WELL DRILLING EXPERIENCE: (To be completed by applicants with out-of-state experience only).

You must list a minimum of five Category 3 wells you have obtained experience with during the actual drilling within the last three years as of the signature date on the application. Two of the five wells listed as experience must have been constructed to depths of at least 25 feet using the oversize borehole method.

NOTE •These five wells listed must correspond to your reference questionnaires described in the instruction sheet.

•Category 5 wells **are not** acceptable as work experience.

TYPE OF WELL CONSTRUCTED	WELL DRILLER WHO SUPERVISED YOUR WORK	DATE OF DRILLING	DEPTH OF WELL	METHOD OF DRILLING
1				
2				
3				
4				
5				

The Board requires current National Ground Water Association Certification (NGWA) in the appropriate well drilling category(s) for all out-of-state experienced applicants. Please attach a copy of all of your NGWA Certification(s) and provide the following information:

NGWA Certification	Category(s)
_____	_____
_____	_____
_____	_____

C. VERIFICATION OF WORK EXPERIENCE

Please list the names and pertinent information of the two references who will verify your work experience on the wells listed above in Section B of this application. Each of these two references must complete and notarize a Reference Questionnaire or your application will be rejected.

[New Jersey Experienced Applicants Only: One of your two references must be a N.J. Licensed Master, Journeyman or Monitoring Well Driller. A Journeyman B licensed driller is NOT an acceptable reference for Category 3 wells. The well driller(s) of record whose name and N.J. Well Driller Registration number appear on the State well record forms submitted as per Section B above must be the well driller(s) who supervised your work and must also be the individual(s) listed as your reference(s).]

NAME	ADDRESS	PHONE NUMBER	N.J. WELL DRILLER REGISTRATION # *(if applicable)*
1		( )	
2		( )	

D. OATH OF APPLICANT

I, the undersigned applicant, certify under penalty of law that the information provided in this document is true, accurate and complete. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate or incomplete information, including fines and/or imprisonment.

_____ _____
Signature of Applicant Date

State of _____ County of _____

Sworn to and subscribed before me this _____ day of _____ 20_____

_____
Notary Public *(Official Seal)*

REMINDER:

•HAVE YOU INDICATED WHICH TEST MONTH YOU WISH TO TAKE YOUR EXAMINATION?

•HAVE YOU COMPLETED ALL APPROPRIATE SECTIONS OF YOUR APPLICATION AND ATTACHED LEGIBLE COPIES OF ALL PERTINENT INFORMATION?

•HAVE YOU ATTACHED YOUR TWO SIGNED AND NOTARIZED REFERENCE QUESTIONNAIRES, FORMS ADM-166B?

•HAVE YOU SIGNED AND NOTARIZED ALL APPROPRIATE PORTIONS OF YOUR APPLICATION?

•HAVE YOU ATTACHED YOUR NON-REFUNDABLE $35.00 APPLICATION FEE PAYABLE TO **"TREASURER, STATE OF NEW JERSEY"**?

ADM-166B
6/01

New Jersey Department of Environmental Protection
General Services
Examination & Licensing Unit
PO Box 441, Trenton, NJ 08625-0441

REFERENCE QUESTIONNAIRE AND VERIFICATION OF EXPERIENCE

PLEASE PRINT

Applicant's Name _____

I. EXPERIENCE QUESTIONNAIRE

1. How many years/months have you supervised the applicant in well drilling activities?

   FROM: Month _____ Year _____ **TO:** Month _____ Year _____

2. List the well drilling operations you have supervised the applicant with during the actual drilling of wells.

   Please list as follows:

Type of Well	Depth of Well	Drilling Method	Date Drilled	N.J. Well Permit # (if applicable)

II. NOTARIZED OATH OF REFERENCE

I hereby certify that the information provided in this questionnaire is true to the best of my knowledge and belief.

_____
Name of Reference (Please Print)

_____
Signature of Reference

N.J. Well Driller's Registration # _____
(if applicable)

Sworn to and subscribed
before me this _____ day

of _____ A.D. 20 _____

(Official Seal)

_____
Signature of Notary Public

ADM-166B
6/01

New Jersey Department of Environmental Protection
General Services
Examination & Licensing Unit
PO Box 441, Trenton, NJ 08625-0441

REFERENCE QUESTIONNAIRE AND VERIFICATION OF EXPERIENCE

PLEASE PRINT

Applicant's Name _____

I. EXPERIENCE QUESTIONNAIRE

1. How many years/months have you supervised the applicant in well drilling activities?

   FROM: Month _____ Year _____ **TO:** Month _____ Year _____

2. List the well drilling operations you have supervised the applicant with during the actual drilling of wells.

   Please list as follows:

Type of Well	Depth of Well	Drilling Method	Date Drilled	N.J. Well Permit # (if applicable)

II. NOTARIZED OATH OF REFERENCE

I hereby certify that the information provided in this questionnaire is true to the best of my knowledge and belief.

_____
Name of Reference (Please Print)

_____
Signature of Reference

N.J. Well Driller's Registration # _____
(if applicable)

Sworn to and subscribed
before me this _____ day

of _____ A.D. 20 _____

(Official Seal)

_____
Signature of Notary Public

October 2003

MONITORING WELL DRILLING

LIST OF SUGGESTED STUDY MATERIALS

"Groundwater and Wells", Driscoll (1986)
Smythe Companies of Austin
Att: Book Orders
508 10th Street N.E.
Austin, MN 55912
Phone: 800-397-6110

The ASTM Standards listed below are available from:
ASTM International
100 Barr Harbor Drive
West Conshohocken, PA 19428
Phone: 610-832-9585
Web Site: www.astm.org

ASTM Standard D1586-99, "Standard Test Method for Penetration Test and Split-Barrel Sampling of Soils"
ASTM Standard D1587-00, "Standard Practice for Thin-Walled Tube Sampling of Soils for Geotechnical Purposes"
ASTM Standard D5092-90(1995)e1, "Standard Practice for Design and Installation of Ground Water Monitoring Wells in Aquifers"
ASTM Standard F480-00, "Standard Specification for Thermoplastic Well Casing Pipe and Couplings Made in Standard Dimension Ratios (SDR), SCH 40 and SCH 80"

"NJDEP Field Sampling Procedures Manual", May 1992
Maps and Publications Sales Office
NJDEP
P.O. Box 438
Trenton, NJ 08625-0438
Phone: 609-777-1038
Web Site: www.state.nj/dep/njgs/

"NJ High Voltage Proximity Regulations"

"New Jersey Subsurface and Percolating Waters Act (N.J.S.A. 58:4A-4.1 et seq) and implementing regulations " (An applicant will be responsible for knowing those portions of the laws and regulations which pertain to the specific license category for which they have applied.)

The NGWA publications listed below are available from:
National Ground Water Association
601 Dempsey Road
Westerville, OH 43081
Phone: 800-551-7379
Fax: 614-898-7786
Web site: www.ngwa.org (the on-line store)

"Employee Safety Manual"

"Well Drilling Operations"

"Well Drilling Manual"