

Illinois State Water Survey Private Well Database Access Form

DATE: _____

NAME: _____

COMPANY NAME: _____

MAILING ADDRESS (Post Office boxes only are **NOT ACCEPTABLE**):

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: () _____ - _____

TYPE OF COMPANY

Drilling Contractor

Government Agency

News Media

Consultant

Industrial Facility

Municipality

Engineering Firm

Private Individual

Other (please specify) _____

PRIMARY DATABASE USAGE

Please briefly describe what you use these data for: (Example: DCCA grant application, etc.)

MAIL TO: Illinois State Water Survey
Center for Groundwater Science
PWDB Access Form
2204 Griffith Drive
Champaign, IL 61820

FAX TO: c/o Ken Hlinka
217-244-0777

EMAIL TO: gwinfo@sws.uiuc.edu

FOR OFFICE USE ONLY

User Name: _____	Date Issued: _____
Password: _____	Initials: _____

NOTE: This document will be sent back to you via **REGULAR MAIL**. No phone or email response will be available. Please plan accordingly.