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.