

CHARACTER AND EXPERIENCE REFERENCE QUESTIONNAIRE FOR:

TO: KS Dept. of Health & Environment \_\_\_\_\_  
 Bureau of Water - Geology (Applicant's Name)  
 1000 SW Jackson Street \_\_\_\_\_  
 Suite 420 (Address)  
 Topeka, KS 66612-1367 \_\_\_\_\_  
 Phone: (785) 296-5524 (City/State/Zip Code)

Answer each question accurately so that we may ascertain the applicant's qualifications for the Water Well Contractor's license.

1. I have known the applicant for \_\_\_\_\_ years.
2. Are you related to the applicant? No \_\_\_\_\_ Yes \_\_\_\_\_
3. What is the nature of your acquaintance, relationship, or association? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
4. From personal knowledge, I know that his business reputation is \_\_\_\_\_.
5. What is your opinion of the applicant's personal character, honesty, and reliability?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
6. Do you consider the applicant to be a qualified and experienced water well driller?  
 \_\_\_\_\_ Yes, \_\_\_\_\_ No. Please comment on the applicant's ability and qualifications  
 to construct water wells. \_\_\_\_\_  
 \_\_\_\_\_

I hereby certify that the above information is true to the best of my knowledge and belief.

\_\_\_\_\_  
(Signed)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Occupation)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip)