

CHARACTER AND EXPERIENCE REFERENCE QUESTIONNAIRE FOR:

TO: Kansas Department of Health
and Environment
Bureau of Water
Geology & Well Technology
1000 SW Jackson St., Ste. 420
Topeka, KS 66612-1367
Phone: (785) 296-5524

(Applicant's Name)

(Address)

(City, State, Zip)

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)