

Well Pump Installer License Renewal Instructions

South Dakota Water Law requires every well pump installer to have a well pump installers license before performing or contracting to perform for any well repair or pump installation work. Enclosed is an application form to renew your license. This form needs to be completed, signed by each license representative, and returned to this office with the fee postmarked on or before January 31 of the year for which you are renewing. The filing fee is based on the residency of the license representative(s) -- \$200.00 for South Dakota resident(s) and \$300.00 for nonresident(s). You are a resident if your primary residence is located in South Dakota and you have not claimed residency in any other state within ninety days of filing this application.

The application form must be returned and a license issued before doing any well repair or pump installation work during the year for which you are renewing. Renewals postmarked after January 31 of the year for which you wish to renew will be returned, and the applicant will have to comply with the requirements for new applications.

If your company needs to add a new licensed representative, please contact the Water Rights Program for the information and forms.

If you have questions, please contact the Water Rights Program at (605) 773-3352.

TYPE or PRINT in INK

For assistance call (605) 773-3352

APPLICATION for- **RENEWAL** of South Dakota Well Pump Installer License
to repair wells or install well pumps.Application must be postmarked on or
before **Jan. 31** of the license renewal year
and submitted with a *fee to:Water Rights Program
523 E Capitol
Pierre, SD 57501-3181

*Fee -- \$200.00 SD resident, \$300.00 nonresident

License No. _____

1. Name of Applicant _____ Phone _____
(Company)Mailing Address _____
(Street, RR, box) (City) (State) (Zip code)2. Each company must designate one License Representative responsible for work requiring a well pump installer's
license for or authorized on behalf of the company.

License Representative _____

SD resident? Yes ☐ No ☐3. Are you familiar with and agree to abide by the provisions of SDCL 46-6-9.1 to 46-6-9.5 inclusive, 46-6-14, 46-6-15,
46-6-18, 46-6-20, 46-6-21, and 46-6-27; and Water Management Board Rules Chapter 74:02:01 for Well Pump
Installer licensing; and Chapter 74:02:04 for well construction.Yes ☐ No ☐ If answer is No, please request copies of laws and/or rules before submitting application.4. Pursuant to ARSD 74:02:01:43.11 water well pump installer license representatives must successfully complete four
hours of continuing education activities annually. In the space below, provide details of continuing education activities
you participated in within the past year and attach copies of supporting documents. If your company has more than one
licensed representative, please clearly indicate which representative(s) attended which activities.

DATE	ACTIVITY/COURSE	SPONSOR	INSTRUCTOR	CONTACT HOURS

I (We), _____
(Print names of all license representatives)licensed representative(s) for _____
(Company)

certify that I (we) have read the foregoing application and that the matter therein stated is true.

Signed _____
License Representative_____
License RepresentativeSigned _____
License Representative_____
License Representative