



TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

www.tdlr.texas.gov

WELL DRILLER/PUMP INSTALLER EXPERIENCE VERIFICATION FORM

THIS FORM MUST BE COMPLETED BY A SUPERVISING LICENSEE TO VERIFY DRILLING/INSTALLING EXPERIENCE THAT THE DEPARTMENT MAY CONTACT TO VERIFY.

Applicant's Name:

_____ Last _____ First _____ Middle Name _____ Suffix (JR, SR, III)

Water Well Driller or Pump Installer Supervisor's Name

Phone Number

_____ Last _____ First _____ Phone Number

Company Name:

Your Driller/Installer License Information

_____ License Type (Driller/Installer) _____ License Number _____ Effective Date _____ Expiration Date

State, County, or Municipality Issuing License:

Period You Supervised Applicant:

_____ Start Date (Month/Day/Year) To _____ End Date (Month/Day/Year)

Indicate below the number of wells drilled and/or pumps installed by the applicant

Water Well	_____	Windmill, Hand Pumps and Pump Jacks	_____
Monitor Well	_____	Single Phase	_____
Closed Loop Geothermal Well	_____	Three Phase	_____
Dewatering Well	_____	Line Shaft Turbine Pumps	_____
Injection Well	_____		

Describe job duties performed:

STATEMENT OF SUPERVISOR

I have only verified actual experience that this applicant received while working under my direct supervision. I understand that I may be subject to disciplinary action if I verify experience other than that which was performed while the applicant was working under direct supervision. By signing this form, I certify all information submitted on this form is true and accurate.

_____ Signature of Supervising Driller/Installer

_____ Date Signed

SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:

Texas Department of Licensing and Regulation
P.O. Box 12157
Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application, all attachments, and your check or money order. Do not send cash.

For additional information and questions, please visit the [TDLR website](#) or reach Customer Service via [webform](#). The webform will allow you to submit your request for assistance and include attachments needed. Customer Service Representatives are available Monday through Friday (excluding holidays) at (800) 803-9202, (in state only) (512) 463-6599, or Relay Texas-TDD: (800) 735-2989.

TDLR PUBLIC INFORMATION ACT POLICY:

This document is subject to the Texas Public Information Act. With certain exceptions, information in this document may be made available to the public. For more information, view the TDLR [Public Information Act Policy](#).