



PO Box 2399  
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## Waitlist Information Sheet

Please fill out and return to the address listed above.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Home Address: \_\_\_\_\_ County: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Your Age: \_\_\_\_\_

Email: \_\_\_\_\_

**Mailing Address if different from above:** \_\_\_\_\_

Names and ages of others living in the household:

_____	_____
_____	_____
_____	_____

**PLEASE CHECK THOSE THAT APPLY TO YOU OR TO OTHERS IN YOUR HOUSEHOLD AND PROVIDE DETAILS:**

- Low income \_\_\_\_\_
- Elderly \_\_\_\_\_
- Child \_\_\_\_\_
- Minority \_\_\_\_\_
- Disabled \_\_\_\_\_
- Veteran \_\_\_\_\_

Where did you hear about the Water Well Trust?

- |  |  |
|--|--|
| <input type="checkbox"/> Google Search   | <input type="checkbox"/> Driller         |
| <input type="checkbox"/> Internet        | <input type="checkbox"/> Friend/Neighbor |
| <input type="checkbox"/> Social Services | <input type="checkbox"/> Other _____     |

**HOUSEHOLD CHARACTERISTICS**

1. Do you own your home and land/or have a mortgage?  Yes  No

If no, do you pay rent or have a rent to own agreement?  Yes  No

2. Did you inherit the home/land from your family?  Yes  No

3. Is this home your full time, primary residence?  Yes  No

4. How long have you lived in this house? \_\_\_\_\_

5. Is this a mobile home?  Yes  No

If yes, do you own the land also?  Yes  No

6. When was the house or mobile home built? (approximate year) \_\_\_\_\_

7. Does your house currently have a well?  Yes  No

8. If you do have a well but it is not functioning properly, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Where do you get your drinking water?

Bottles from a store

Neighbor

Sharing a well

Pond/Stream

Hauling

Family

Other: \_\_\_\_\_

10. Does your home have an approved, working septic system?  Yes  No

11. Do you have a privy or outhouse?  Yes  No

12. Do you have a plumbing to a toilet and hot and cold water to a tub/shower and sink?  Yes  No

13. Do you have plumbing with hot and cold water at your kitchen sink?  Yes  No

14. Do you have access to a public water supply?  Yes  No

15. Please check your all that apply. What do you use for power in your home?

Electric

Gas

Solar

Generator

***Thank you. We will notify you if you meet the requirements of the program and are ADDED TO OUR WAITLIST***