



# Oregon

Tina Kotek, Governor

**Water Resources Department**

725 Summer St NE, Suite A

Salem, OR 97301

(503) 986-0900

Fax (503) 986-0904

[www.Oregon.gov/OWRD](http://www.Oregon.gov/OWRD)

**Letter of Good Standing  
Well Constructor Licensing Program Temporary Authorization**

Dear Water Resources Department,

We are writing to verify that (Name): \_\_\_\_\_,

is currently licensed by (Organization) \_\_\_\_\_.

Their current well constructor license (Number) \_\_\_\_\_,

was issued on (Date) \_\_\_\_\_ and expires on (Date) \_\_\_\_\_.

At this time, there are not pending corrective actions against their license and this applicant is in good standing.

Thank you,

Name \_\_\_\_\_

Title \_\_\_\_\_

Email \_\_\_\_\_

Telephone \_\_\_\_\_

Date \_\_\_\_\_

Please return to:

Oregon Water Resources Department

Attn: Well Construction Section

725 Summer St NE, Suite A

Salem OR 97301