





CERTIFICATE OF WELL ABANDONMENT OR ACCEPTANCE OF BACKFLOW PREVENTION DEVICE

NAME	
PHYSICAL ADDRESS	
CITYCOUNTYTAX	PARCEL
(Choose one of the following):	
☐ I,, on (print name)	thisday of,
20, certify that I am the owner of the property named above	and agree to abandon the well
on the property using proper procedures according to all state	and local regulations and
ordinances.	
□ I,, on	thisday of,
(print name)	
20, certify that I am the owner of the property named above	and wish to continue to operate
the well on the property after connection to the Gainesville Reg	ional Utilities' water service. I
agree to have a backflow prevention device installed at my expe	ense according to their
specifications on the property. Once the device is installed I agr	ree to maintain the device in
working order according to GRU specifications or, if determined	d by a certified tester or GRU to
be needed, to replace the device with a device that is of a type a	and model specified by GRU. I
agree to be responsible for continued maintenance and/or repl	acement of the device and
associated costs. I agree to have the device tested annually by	a certified tester as required by
GRU and I agree to pay all costs associated with such testing.	
Owner Signature:	
Co-Owner (if any) Signature:	
Witness (signature): Witness (print name):	
Gainesville Regional Utilities Authorized Representative	Date: