



WATER RESOURCES ACT  
(Cap.72:03)  
WATER RESOURCES REGULATIONS, 2018  
**FORM B2**

APPLICATION FOR PERMISSION TO REHABILITATE DEFECTIVE BOREHOLES

*To be filled in triplicate*

**1. Names and addresses of client**

Name	
Address	
District	
Telephone	
Mobile Phone	
Email	

**2. Details of the borehole**

Licence number of the borehole: \_\_\_\_\_

Location of the borehole (Coordinates Village/Area, Traditional Authority, Water Resources Area, and District):

\_\_\_\_\_

Borehole depth (m): \_\_\_\_\_

Casing diameter (mm): \_\_\_\_\_

Static water level (m): \_\_\_\_\_

Amount and location of casing or sealing in the borehole: \_\_\_\_\_

Details of the strata

Depth (interval)	Description of the Strata (include issues of water quality if any)

### 3. Rehabilitation details

Describe the methods of rehabilitation of the borehole

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**Declaration of the Applicant**

I certify that the information provided in this form is correct to the best of my knowledge. I also agree that no decision will be made pursuant to this application until I receive a notification from the Authority of water development that I have provided all the necessary information.

Signature of Applicant: \_\_\_\_\_

Full names \_\_\_\_\_ Date \_\_\_\_\_

Note: When you have completed this form and the appropriate attachments, you must attach a copy of bank cash deposit slip or cheque for \_\_\_\_\_ Kwacha for processing the application and sent them to:

The Executive Director, National Water Resources Authority, Private Bag 363, Lilongwe 3, Telephone: +265 (0) 111 647 907 , Email: nwrsec@gmail.com

The Authority may require you to advertise this application at your cost in a way specified by the Authority. Attach a copy of the borehole completion report.

**For Official Use Only**

Date of receipt of the application: \_\_\_\_\_

Application number: \_\_\_\_\_

Borehole No: \_\_\_\_\_

WRA No.: \_\_\_\_\_

Name of the officer receiving the application: \_\_\_\_\_

Designation: \_\_\_\_\_

Signature: \_\_\_\_\_

Official stamp: \_\_\_\_\_