STATE OF CALIFORNIA DEPARTMENT OF HEALTH

Certified Copy of Resolution NO. 4638

(To accompany application on Form A1)

"Resolved by the City Council
(City council, board of trustees or other governing body)
of the City of Redlands
(City, town or county, etc.)
that pursuant and subject to all of the terms, conditions and provisions of Division 5, Part 1, Chapter 7, Section
4010 to 4035 of the California Health and Safety Code and all amendments thereto, relating to domestic water
supplies, application by this City be made to the State Department of Health, for a permit to
operate and maintain as a potable municipal water source the newly Applicant must state specifically what is being applied for—whether to construct new works, to use existing works, to make alterations or additions in
constructed Hog Canyon Well No. 2 (2S/2W10B). The major portion of works or sources and state nature of improvement in works. Enumerate definitely source or sources of supply, kind of works used or considered (if known)
the water produced by this facility will be used in the 2340, 2100,
and specify the locality to be served. Additional sheets may be attached. and 1900 foot pressure zones of the City of Redlands.
The state of the city of Redunds.
that the Mayor of said City Council (Title of chief executive officer) (City council, board of trustees or other governing body)
(Title of chief executive officer) (City council, board of trustees or other governing body)
be and he is hereby authorized and directed to cause the necessary data to be prepared, and investigations to be
made, and in the name of said City town or county, etc.) to sign and file such application with the
said State Department of Health.
Passed and adopted at a regular meeting of the City Council (Governing body)
of the City of Redlands on the 20th day of March 1990. (City, town or county, etc.)
AFFIX OFFICIAL SEAL HERE Clerk of said City of Redlands ATTEST: Some Payron
(City, town or county, etc.)

STATE OF CALIFORNIA

DEPARTMENT OF HEALTH SERVICES

Application from City of Redlands

To the Department of Health Services Sanitary Engineering Branch 714 P Street Sacramento, CA 95814		
bacramento, CA 95814		
Pursuant and subject to all of the	terms, c	onditions and provisions of
Division 5, Part 1, Chapter 7, Water	and Wate	r Systems of the California
Health and Safety Code and all amendm		
water supplies, application is hereby		
maintain as a potable municipal water	source th	e newly constructed was
Applicant must state specifically what is being applied for whe	ther to constr	ruct new works, to use existing works, to
Canyon Well No. 2 (2S/2W10B). The major	or portio	of the water must
make alterations or additions in works or sources. Note Section	n 4012, H&S Co	de regarding information to be submitted
by this facility will be used in the 23	2100	and 1000 c
with application. Additional sheets may be attached.		, and 1900 feet presure
zones of the City of Redlands.		
Dated March 20 , 19 90	e	
	Ву	
Affix	Title_	Seong (Sam) Kim Utilities Director
Official Seal	Address	City of Redlands Municipal Utilities Dept.
Here		PO Box 3005
1101.6	-	Redlands, CA 92373