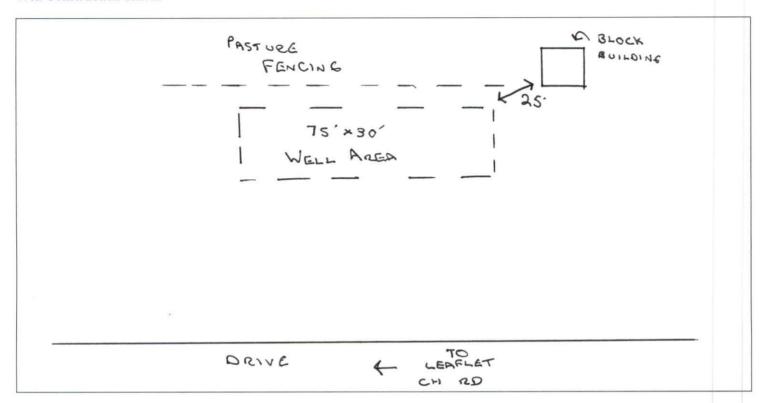
HARNETT DEPARTMENT OF PUBLIC HEALTH PERMIT TO CONSTRUCT A DRINKING WATER SUPPLY WELL

Address: 2635 Leaflet Church Rd Broadway, NC 27505 Type of Facility Served by Well: 2 SED (MH) Sewage System: Existing Conventional Permit Conditions: Orinking water supply well construction must meet 15A NCAC 02C.100 rules To permitted drinking water supply well shall be located in accordance with the SITE PLAN ANY ALTERATION of The site of the site (including location of structures and appurtenance) or modification in use of the well, may subject this Permit or grounds and the site (including location of structures and appurtenance) or modification in use of the well, may subject this Permit or grounds and the site (including location of structures and appurtenance) or modification in use of the well, may subject this Permit or grounds and provided?	PIN #: Parcel #:	Application #:BRES2003-0051	Subdivision: L	ot #:	
Sewage System: Existing Conventional Permit Conditions: General Permit Conditions: Diriking water supply well construction must meet 15A NCAC 02C.100 rules The permitted diribating water supply well shall be located in accordance with the SITE PLAN NANY ALTERATION of stac site of the site (including location of structures and appurtenance) or modification in use of the well, may subject this Permiture of the site (including location of structures and appurtenance) or modification in use of the well, may subject this Permiture of the well of the well, may subject this Permiture of the well of th	Applicant Name: Gilbert Muma Address: 2635 Leaflet Church Rd Broadway, NC 27505				
Permit Conditions: General Permit Conditions: Drinking water supply well construction must meet 15A NCAC 02C.100 rules The permitted drinking water supply well shall be located in accordance with the SITE PLAN The permitted drinking water supply well shall be located in accordance with the SITE PLAN ANY ALTERATION of Site, set to the site (including location of structures and appurtenance) or modification in use of the well, may subject this Pervication Authorized State Agent Grouting Inspection Witnessed Grouting Inspection Witnessed Grouting self-certified by driller Well Contractor: Applicant Name: Address: Use of Well: Date Drilled: Top of Casing is in. above surface. Well gpm at ft. Disinfection: Type Amount Material: Material: To lo Diameter: Material: Material: Material: Material: Method: From To Diameter: Material: Material: Method: From To Diameter: Material: Material: Method: Material: Method: Method: From To Diameter: Material: Method: From To Diameter: Material: Method: Metho	Type of Facility Served by	Well: 2 SFD (MH)			
General Permit Conditions: • Drinking water supply well construction must meet 15A NCAC 02C.100 rules • The permitted drinking water supply well shall be located in accordance with the SITE PLAN • ANY ALTERATION Or the site of the site (including location of structures and appurtenance) or modification in use of the well, may subject this Permit of the well, may subject this Permit of the well, may subject this Permit of the well o	Sewage System: Existing (Conventional			
Dirinking water supply well construction must meet 15A NCAC 02C_100 rules The permitted dirinking water supply well shall be located in accordance with the SITE PLAN ANY ALTERATION Or the site of the site (including location of structures and appurtenance) or modification in use of the well, may subject this Permit accordance Authorized State Agent Grouting Inspection Witnessed Grouting Inspection Witnessed Grouting self-certified by driller WELL CERTIFICATE OF COMPLETION Date: Application #: Well Contractor: Well Contractor: Use of Well: Use of Well: Use of Well: Date Drilled: Top of Casing is in above surface. Vield: gpm at ft. Disinfection: Type Amount Water Zone (depth) From To From To Diameter: Material: Material: Thickness: Material: Method: From To Diameter: Material: Thickness: Material: Method: From To Diameter: Material: Thickness: Material: Method: Material: Method: Method: Material: Method: Method: Material: Method: From To From To From To From To From To Hickness: Material: Method: Material: Method: Method: Method: Method: Material: Method: Method: Material: Method: Method: Material: Method: Material: Method: Material: Method: Method: Material: Method: Method: Material: Method:	Permit Conditions:				
Grouting Inspection Witnessed	Drinking water suppleThe permitted drinkANY ALTERATION	bly well construction must meet 15 sing water supply well shall be loca ON of the site of the site (including	ted in accordance with the SI		
Grouting self-certified by driller GW-1 provided?	Authorized State Agent_	1 6842	Date 10/23/2023	Expires 10/23/28	
Well Certificate of Completion Well Contractor:					
Applicant Name:	See attachment for construction sketch				
Well Head Information Casing Height: (above finished grade) Access Port: Vent Stack: Well ID Tag: Pump ID Tag: Sampling Tap: Backflow Preventer: Sample Taken? Yes No Well Head properly sealed: Remarks:	Applicant Name: Address: Directions to Site: Use of Well: Static Water Level: Disinfection: Type Water Zone (depth) From To From From To From To From To From _	Date Drilled: Total D Top of Casing is in Amount Casing From To Diameter: Materi From To Diameter: Materi From To Diameter: Materi From To Diameter: Materi	epth: Replacem n. above surface. Yield: al: Thickness: al: Thickness:	ent Well?	
Well Head Information Casing Height: (above finished grade) Access Port: Vent Stack: Well ID Tag: Pump ID Tag: Sampling Tap: Backflow Preventer: Sample Taken? Yes No Well Head properly sealed: Remarks:					
	Well Head Information Casing Height: (above the light of the lig	Pump ID Tag: Samplin Well Head prope	ng Tap:	ackflow Preventer:	

See Attachment for completion sketch

Well Construction Sketch



Well Completion Sketch