## **Harnett County Department of Public Health**

## **Well Construction Permit Application**

If the information in the application for a Well Construction Permit is falsified, changed, or the site is altered, then the Well Construction Permit shall become invalid. The Construction Authorization will expire within five years from the date of issue.

APPLICANT INFORMAT	<u>rion</u>	
Matthew Rafgel Munoz Applicant/Owner 745 Lizzie Jeter In, Cameron NC, 28326 Street Address, City, State, Zip Code	919 Phon	) 285-5038 e Number
The Applicant must submit a Site Plan. The Site Plan is a map/drawing of 1. existing and/or proposed property lines and easements with dimensions; 2. the location of the facility and appurtenance; 3. the location for the proposed well; 4. the location of existing or proposed sewer lines and/or sewage disposal syst 5. the location of any existing wells within 100 feet of the property; surface we 6. above ground and/or underground storage tanks; 7. and any other known sources of contamination within 100 feet of the propose 8. Are there any current/pending groundwater restrictions and variances pertain	ems withi ater bodie	n 100 feet or the proposed well; s;
The Applicant shall notify the Harnett County Health Director through or Division of Environmental Health if any of the following occur prior to we 1. there is a relocation of the proposed facility; 2. there is a change in the intended use of the facility; 3. there is a need for installing the waste water system in an area other than ind 4. there are landscape changed that affect site drainage.  Contact information: Environmental Health Division -  PROPERTY INFORMAT	icated on	the well permit; or
Proposed use of well Single-Family Multifamily Church □ Restaurant	□ Bus	
Parcel # Directions to the Site		
Directions to the Site  Abul 16 HWY I Right on Hay 27,  Dirt Coad lizzie Jeter Ln, travel 3/4 mile down	4.5 m	road type are there
I have thoroughly read and completed this Application and certify that the informat correct to the best of my knowledge and is give in good faith. Representatives of the state officials are granted right of entry to conduct necessary inspections to determine	Harnett C e complia	ounty Health Department and nee with applicable rules.
I understand that I am solely responsible for the proper identification and labeling of all p	property lin	es, underground utility lines, and

making the site accessible so that a will can be properly constructed according to the permit.

Property Owner's of Owner's Legal Representative Signature Required

## Harnett County Environmental Health

## SITE SKETCH

9546-90-8674

Permit Number Bres2403-0059

Matthew Munoz

Applicant's Name

Mark Osborne REHS // W LEI

**Authorized State Agent** 

Subdivision/Section/Lot Number

04-22-24

Date

System components represent approximate contours only. The contractor must flag the system prior to beginning the installation to ensure that the proper grade is maintained.

Scale = NTS

