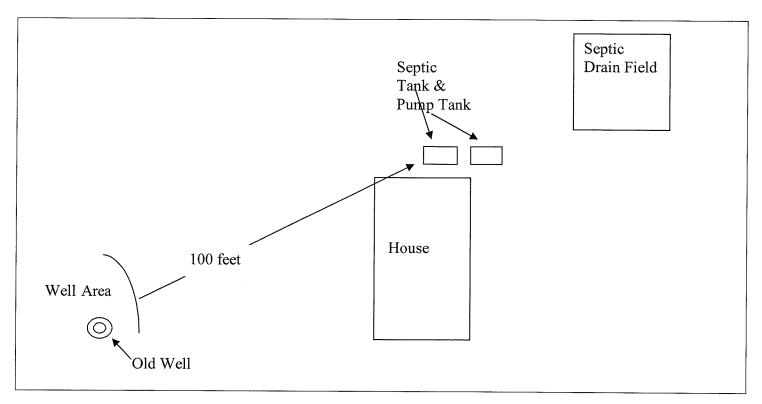
HARNETT DEPARTMENT OF PUBLIC HEALTH PERMIT TO CONSTRUCT A DRINKING WATER SUPPLY WELL

PIN #: 0577-54-8895.000	O Parcel #: 120577005902	Application #: 11-5-	26219 Subdiv	ision:	Lot #:
Applicant Name: <u>John G.</u> Address: <u>7091 Ross Road</u>					
Type of Facility Served by	y Well: <u>SFD</u>				
Sewage System: pump to	conventional				
Permit Conditions: Well 1	to be 100 feet from septic sy	stem			
The permitted drint ANY ALTERATION subject this Permit Authorized State Agent Grouting Inspection Wife	ply well construction must reking water supply well shall ON of the site of the site (into revocation the same of the site) and the same of the same o	be located in accordance cluding location of structures. **Details** **Details** **Details** **Date** **Date**	ce with the SITE PI ctures and appurtent	ance) or modification	on in use of the well, may
See attachment for constru					
	WEL	L CERTIFICATE OF	COMPLETION		
Disinfection: Type	Date Drilled: Top of Casing is _ Amount	ntractor: Total Depth: in. above surface	Replacement W . Yield: gp	ell?	No
Water Zone (depth) From To From To From To	From To	Material: Thic Thic Thic Thic	kness:	Grout From 0 To Material: From To Material: From To Material:	Method:
Inspector:	On Hold Date:	Release Date:			
Remarks:				×	
Well ID Tag:	oove finished grade) Pump ID Tag: S No Well Hea	Sampling Tap:	Backflo	ow Preventer:	_
Authorized State Agent		Dete			

See Attachment for completion sketch

Well Construction Sketch



Well Completion Sketch

г	
ĺ	
l	
ŀ	
l	
l	
L	