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.

APPLICANT INFORMATION

Kaven Wood	• •	(919	1414-6534
Applicant/Owner	4	Phone	Number
1005 TUHY FORMS Drive	Ralrigh	L NC	27603
Street Address, City, State, Zip Code	, -0,-		•
	•		
The Applicant <u>must submit a Site Plan</u> . The Site Plan 1. existing and/or proposed property lines and easements	n is a map/drawing	of the prop	erty and must show:
2. the location of the facility and appurtenance;	with dimensions;		
3. the location for the proposed well;			· · · · ·
4. the location of existing or proposed sewer lines and/or 5. the location of any existing wells within 100 feet of th	r sewage disposal sys	stems within	100 feet or the proposed well;
6. above ground and/or underground storage tanks;	ie property, surface v	valer boules	,
7. and any other known sources of contamination within	100 feet of the prope	osed well sit	te.
The Applicant shall notify the Harnett County Healt	h Director through	or by way	of the Harnett County
Division of Environmental Health if any of the follow			
 there is a relocation of the proposed facility; 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 ir	idicated on t	the well permit; or
4. there are landscape changed that affect site drainage.			· ·
<u>Contact information</u> : Environmental H	ealth Division	- 910-893	3-7547
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PROPERTY	INFURMA	LION	
.			
	ed use of well	. n	
Single-Family Multifamily Church	☐ Restaurant	: 🗆 Busi	iness □ Irrigation □
Street Address	Subdivis	ion/Lot d	u
Parcel # 64-0(073-012)		D(0(0)	7
1 arcti # 0 - t 0(0 t 5 - 0 t 2 t	111\ #_	UUU	2 -10-1120:00x
Direction	ns to the Site		
<u> </u>	IND CO CLIC DICO		
			4
I have thoroughly read and completed this Application and correct to the best of my knowledge and is give in good faith.	certify that the inform Representatives of the	aation provid he Harnett C	led herein is true, complete and
state officials are granted right of entry to conduct necessary	inspections to detern	ine complia	ace with applicable rules.
I understand that I am solely responsible for the proper identific	ration and labeling of a	Il proparty liv	nes underground utility lines, and
making the site accessible so that a will can be properly constru	cted according to the p	ermit.	co, unaci gi vana attity tines, and
			911110
Karen wood			0/1/10
Property Owner's of Owner's Legal Representative Signature Re	equired		Date

Harnett County Department of Public Health Site Sketch

ISSUED TO: Robin Cooper + Karen Wood SUBDIVISION Adams Farm 5/5 LOT # 38
Authorized State Agent:
ANDREW CURRIN
* D-Box on Contour Equal Distribution
* Future Rool shall be 15Ft min From final septic
Millwood Ln. Easement shall be marked at install including culde sac.
SHEET
TO EXT POND/LAKE
POOL MIETAL 31'
35% REDUCTION A SHOT
10 / 2 / 3 / 3 / 3 / 3 / 3 / 3 / 3 / 3 / 3
ANEA 3/3/3/3/3/3/5/ >
78'
proposed &
proposed in
TO
MILLWOOD LANE

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HARNETT COUNTY CASH RECEIPTS *** CUSTOMER RECEIPT ***

Oper: LLUCAS Type: CP Drawer: 1
Date: 2/01/18 53 Receipt no: 232782

B4 BP - ENV HEALTH FEES \$250.00 NEW WELL

IILW WELL

KAREN NOOD

Tender detail CK CHECK PAYMEN 1232 \$250.00 Total tendered \$250.00

Total payment \$250.00

Trans date: 2/01/18 Time: 8:31:22

THE STATE STATES

^{**} THANK YOU FOR YOUR PAYMENT **

SEE CHOLOMER SECETAL KEE HORRETT COOMITY CASH RECEIPTS

Date: 2/01/16 53 Peceipt no: 232782 Type: Ch Brauer: 1 FFECUE

67955 ANKRESTOND SERVINGS PIERS 90:5961

114 DI) - SWA WEBLIH LEES AMBIER, NC 27561

WEN BELL

KHREE MILLS

ISUNGL (GL31)

parajuda, rapoj : OK ONE ON BUARRIA

Total payaene

1575

\$520*****90 \$525°00

2529" 68

Trans date: 2/61/18 Time: 6:31:22

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