

Harnett County Health Department Water Sample Application

Most results are received within 7 business days.

*Some results may take 3 weeks or longer to be analyzed

ENVIRONMENTAL HEALTH SECTION
307 W. CORNELIUS HARNETT BLVD.
LILLINGTON, N.C. 27546
910-893-7547

Robert Giuliano
Wendy Williams Giuliano

910-261-0312 -Rob
214 683-2792-Wendy

NAME

AREA CODE & PHONE NUMBER

194 County Meadow Ln, Coats, Nc 27521

MAILING ADDRESS

194 County Meadow Ln, Coats, Nc 27521

PROPERTY ADDRESS

STATE ROAD

SUBDIVISION NAME AND LOT NUMBER

PURPOSE OF SAMPLE

Doctor Requested

Loan closing

Date of closing

Personal Information

Other Well passed initial inspection less than 6 months ago and

Types of Samples & Cost - Please make check payable to, Harnett County Health Department

\$50.00 - Bacteriological (coliform and fecal absent or present)

\$100.00 - Petroleum

\$100.00 - Inorganic now the

\$100.00 - Pesticides \$100.00 - Other

Type of Well: Drilled Bored Driven

Is there electricity? Yes No

How many outside spigots 3 Location of spigots Front of carport; end of front porch; at well pump

Please give complete directions from the Health Department to the location.

Home is located at the end of the cul de sac.

Follow gravel road and single story white & black house will be on the right.

Water is causing brown stains on dishwasher & toilets

In order for a sample to be taken the well should be made visible to the inspector. This may require the removal of lids over the well, or lids and/or locks of pump houses. We also inspect your well, and if it is unapproved we will not take a sample, but advise you how to protect the well. Once the well has met state requirements, re-apply and we will sample your water at that time. If further visits are necessary there will be an additional charge of \$25.00. You will be notified by mail once the results have been received from the State Lab.

By signing this application I am confirming that the information given is correct.

Wendy
Signature

5-24-19
Date

Office Use Only: Date of initial visit: _____ Return Visit _____ Date sample taken _____ Date re-sampled _____

Visible well construction: Yes No Approved _____ Unapproved _____