Harnett County Department of Public Health

Well Abandonment Permit Application

APPLICANT INFORMATION

Applicant/Owner 360 MARSHBANKS RD. LJ Street Address City State Tin Code	(910) 734-0910 Phone Number
360 MARS HBANKS RD. LI Street Address, City, State, Zip Code	CLING ton, NC
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PROPERTY INFORMATION	
Street Address 360 MARSH BANKS Subdivision/Lot#	
Parcel # PIN	#
Directions to the Site	
BUSES CREEK - 360 MARSHBAUX	-s RJ
*Please include a Site Plan of your property showing the location of the well. If the well is underground, it must be uncovered prior to the department's site visit.	
Please Complete the Following Information: Robert	TACKSON OF TACKSON WELLS
Date Well Was Constructed /940 Gro Above Ground © or Below Ground © Tota Well Type: Drilled © Bored © Hand dug © Dia	uted: Yes \(\subseteq \text{No } \subseteq \) al Depth of Well meter inches
I have thoroughly read and completed this Application and certify that the information provided herein is true, complete and correct to the best of my knowledge and is give in good faith. Representatives of the Harnett County Health Department and State Officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules.	
I understand that I am solely responsible for the proper identification and labeling of all property lines, 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 Requi	7/-/3-19

If you have any questions please contact Environmental Health Division at 910-893-7547