

Harnett County Department of Public Health

Well Abandonment Permit Application

APPLICANT INFORMATION

Russell Earp (919) 827-5438
Applicant/Owner Phone Number

4501 Graham Newton Rd Raleigh NC 27606
Street Address, City, State, Zip Code

PROPERTY INFORMATION

Street Address 40 Rock Crossing Dr Bunn NC 28334
Subdivision/Lot # _____

Parcel # 0013450 PIN # 1527-90-7659.000

Directions to the Site

I-95 south from benson, take exit 75, make sharp left onto jonesboro rd, Turn right onto rock crossing

Brief description of the well location (ex. front yard, behind out building, front yard, etc.)
Left rear of property behind playground

*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:

Date Well Was Constructed _____

Above Ground or Below Ground

Well Type: Drilled Bored Hand dug

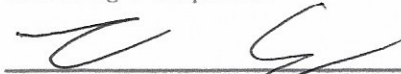
Grouted: Yes No

Total Depth of Well 359

Diameter 6 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 given 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 well can be properly constructed according to the permit.



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

8/18/21

Date