## **Harnett County Department of Public Health**

## Well Abandonment Permit Application

## APPLICANT INFORMATION

Charles Custer Applicant/Owner	(9/9) <u>215-5957</u> Phone Number
10/ E. Roosevelt St mebane, NC 27302 Street Address, City, State, Zip Code	
PROPERTY INFORMATION	
Street Address 630 Spencemil Rosubdivision/Lot#	
Parcel #	PIN #
Directions to the Site	
Take 4015 out of Lillington - About 7miles Ture (eft anto Spence mill Rc/ 1/2m pass Chalybeate Springs Rd - Drive 1/2 m Pass Chalybeate well will be on the right side  Brief description of the well location (ex. front yard, behind out building, front yard, etc.)	
*Please include a <u>Site Plan</u> 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 PA Above Ground I or Below Ground I Well Type: Drilled I Bored I Hand dug	Grouted: Yes $\supset$ No $\supset$ Total Depth of Well $\bigcirc$ 3 O Diameter $\bigcirc$ 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.	
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	Required Date
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If you have any questions please contact Environmental Health Division at 910-893-7547

