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

## Well Abandonment Permit Application

## **APPLICANT INFORMATION**

Doniel T. Beal (Bealwell)	+ Rump)	(919) 422-103	39
Applicant/Owner		Phone Number	
5929 Honey cutt Rd Hon Street Address, City, State, Zip C	Hyspoings No. 275 Code	40	
PROPE Street Address 3835 olivia 10	ERTY INFORMA Sonford, NC NC	TION 74	
Street Address 3835 Olivia 10	Subdivi	sion/Lot #	
Parcel #	PIN#		
<u>I</u>	Directions to the Site		
Off Olivia Rol Single wide treiter	Next to That	Store infront	of
*Please include a Site Plan of you well is underground, it must be u	ir property showing	the location of the wel	le wicle
Please Complete the Following In	nformation:		
Date Well Was Constructed	Ground I Tota and dug I Dian	nted: Yes No D  I Depth of Well 20  neter 24 inches	<i>K+</i> S
I have thoroughly read and completed herein is true, complete and correct to t Representatives of the Harnett County entry to conduct necessary inspections t	he best of my knowledge Health Department and S	and is give in good faith. State Officials are granted	
I understand that I am solely responsible y underground utility lines, and making the according to the permit.			
Aller		11/4/	24
Property Owner's of Owner's Legal Repre	esentative Signature Require	red Date	

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

