

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

NAME Lenora Murison AREA CODE & PHONE NUMBER 910-890-9063
MAILING ADDRESS 259 As Murison Rd
PROPERTY ADDRESS Lillington NC 27546 STATE ROAD _____
SUBDIVISION NAME AND LOT NUMBER Same

PURPOSE OF SAMPLE _____ Doctor Requested _____ Loan closing _____ Date of closing _____
☒ Personal Information _____ Other _____

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
_____ \$100.00 - Pesticides _____ \$100.00 - Other _____

Type of Well: ☒ Drilled _____ Bored _____ Driven _____

Is there electricity? ☒ Yes _____ No _____

How many outside spigots _____ Location of spigots at Barn at well -

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

Back of house at Bulb Barns -

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.

Signature Lenora Murison Date 6-25-25

Office Use Only: Date of initial visit: _____ Return Visit _____ Date sample taken _____ Date re-sampled _____
Visible well construction: _____ Yes _____ No _____ Approved _____ Unapproved _____