Harnett County Department of Public Health

Well Construction Permit Application

If the information in the application for a Well Construction Permit is falsified

changed, or the site is altered, then the Well Construction Permit shall become invalid.
APPLICANT INFORMATION Poy Mc Land (010) 893-3017 Applicant/Owner Phone Number Phone Number 28356 Street Address, City, State, Zip Code
The Applicant must submit a Site Plan. The Site Plan is a map/drawing of the property and must show: 1. existing and/or proposed property lines and easements with dimensions; 2. the location of the facility and appurtenance; 3. the location for the proposed well; 4. the location of existing or proposed sewer lines and/or sewage disposal systems within 100 feet or the proposed well; 5. the location of any existing wells within 100 feet of the property; surface water bodies; 6. above ground and/or underground storage tanks; 7. and any other known sources of contamination within 100 feet of the proposed well site.
The Applicant shall notify the Harnett County Health Director through or by way of the Harnett County Division of Environmental Health if any of the following occur prior to well construction: 1. there is a relocation of the proposed facility; 2. there is a change in the intended use of the facility; 3. there is a need for installing the waste water system in an area other than indicated on the well permit; or 4. there are landscape changed that affect site drainage. Contact information: Environmental Health Division - 910-893-7547
PROPERTY INFORMATION
Proposed use of well Single-Family Multifamily Church Restaurant Business Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irrigation Irri
Street Address MCARJUL La Subdivision/Lot # Parcel # 0 . 0544.0014.01 PIN # 0545.60.1216
<u>Directions to the Site</u>
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.
Row Mc Lamb 5-21-14
Property Owner's of Owner's Legal Representative Signature Required Date

Harnett County Department of Public Health

Well Abandonment Permit Application

APPLICANT INFORMATION

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Applicant/Owner		Phon	e Number
Street Address, City, State,	, Zip Code		
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<u>P</u> F	ROPERTY INF	ORMATION	
Street Address		/ _ Subdivision/Lot	# <u></u>
Parcel #		PIN #	
	Directions to	ė.	
	<u>Directions to</u>	the Bite	
	/		
			<u> </u>
Brief description of the well la	ocation (ex. front ya	rd, behind out build	ding, front yard, etc.
Please include a Site Plan o	of your property s	howing the location	on of the well. If th
Brief description of the well lo Please include a <u>Site Plan</u> ovell is underground, it must release Complete the Followi	of your property s t be uncovered pr	howing the location	on of the well. If th
Please include a <u>Site Plan</u> ovell is underground, it must be the Followin the Foll	of your property s t be uncovered pr ing Information:	howing the location to the department	on of the well. If the
Please include a <u>Site Plan</u> of vell is underground, it must be the Following that we will be the Following the Well Was Constructed bove Ground are Below (of your property set be uncovered pring Information: Ground	chowing the location to the department of the de	on of the well. If the sent's site visit.
Please include a <u>Site Plan</u> ovell is underground, it must	of your property set be uncovered pring Information: Ground	chowing the location to the department of the de	on of the well. If the nent's site visit. No Well
Please include a Site Plan of the list underground, it must be be been been been been been been be	of your property state to the uncovered pring Information: Ground	Grouted: Yes Total Depth of Diameter and certify that the nowledge and is give	on of the well. If the nent's site visit. No
Please include a Site Plan over the state of the Following of the Well Was Constructed bove Ground or Below (of your property st be uncovered pring Information: Ground	Grouted: Yes Total Depth of Diameter and certify that the nowledge and is give inent and State Officia mpliance with applica	on of the well. If the nent's site visit. No inches information provided in good faith. Its are granted right of the rules.

