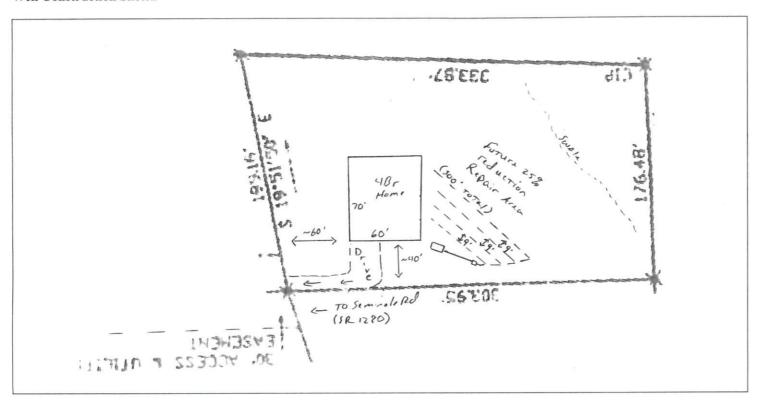
HARNETT DEPARTMENT OF PUBLIC HEALTH PERMIT TO CONSTRUCT A DRINKING WATER SUPPLY WELL

PIN #: P	Parcel #:	Application #: SFD2104-0079	Subdivision:	Lot #: <u>5</u>
Applicant Name: <u>I</u> Address: <u>Sem</u>				
Type of Facility Se	erved by Well: SI	FD		
Sewage System: 25	5% reduction			
Permit Conditions:				
The permitte ANY ALTE subject this Authorized State Grouting Inspecti	ter supply well come ded drinking water ERATION of the Permit to revocate Agent On Witnessed Certified by driller	GW-1 provided?	ccordance with the SITE PI n of structures and appurten Date 5 - //- 7 / Date	ance) or modification in use of the well, may
Applicant Name: Address: Directions to Site:	 Date Dri	Well Contractor: lled: Total Depth: _ Top of Casing is in. above	Replacement W	'ell? □ Yes □ No pm at ft.
Water Zone (dept From To _ From To _ From To _	<u>h)</u>	Casing From To Diameter: Material: From To Diameter: Material: From To Diameter: Material:	Thickness:	Grout From 0 To Material: Method: From To Material: Method: Material: Method:
Inspector:	On Hold	Date: Release Date:		
Mell Head Inform Casing Height: Well ID Tag: Sample Taken? Remarks:	(above finish Pump ID	ed grade) Access Port: _ Tag: Sampling Tap: Well Head properly seal	Backfl	ow Preventer:
Authorized State	Agent		Date	_

See Attachment for completion sketch

5	FD2104	1-	HarringTo	14		
Application #: 5	0079	Applicant Name	Properties	Subdivision: _	 Lot #:	-

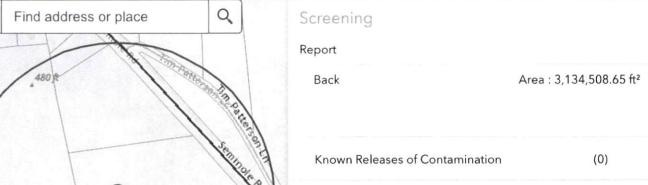
Well Construction Sketch



Well	Comp	letion	Sketch



Hov ... U





Upload shapefile to include in analysis

Upload