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

Red Door Homes (STEVEN)	(919) 630-1150
Applicant/Owner	Phone Number
12805 WC HUY 70 Clayren 27502	
Street Address, City, State, Zip Code	
The Applicant must submit a Site Plan. The Site Plan is a map/drawing of 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, the location of any existing wells within 100 feet of the property; surface we show above ground and/or underground storage tanks;	ems within 100 feet or the proposed well; ater bodies;
7. and any other known sources of contamination within 100 feet of the propos	sed well site.
The Applicant shall notify the Harnett County Health Director through of Division of Environmental Health if any of the following occur prior to we are in 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 included the table of the facility. 4. there are landscape changed that affect site drainage. Contact information: Environmental Health Division -	ell construction: dicated on the well permit; or
PROPERTY INFORMAT	ION
Single-Family Multifamily Church Restaurant Street Address Subdivisi	☐ Business ☐ Irrigation ☐ on/Lot #
Parcel # PIN #	
Right on norringto / mile left into d way back (1/2 mile) property on right	riveway, follow all the
have thoroughly read and completed this Application and certify that the inform correct to the best of my knowledge and is give in good faith. Representatives of the state officials are granted right of entry to conduct necessary inspections to determ	e Harnett County Health Department and
l understand that I am solely responsible for the proper identification and labeling of al making the site accessible so that a will can be properly constructed according to the pe	ermit.
	6-19-21
Property Owner's of Owner's Legal Representative Signature Required	
	Date