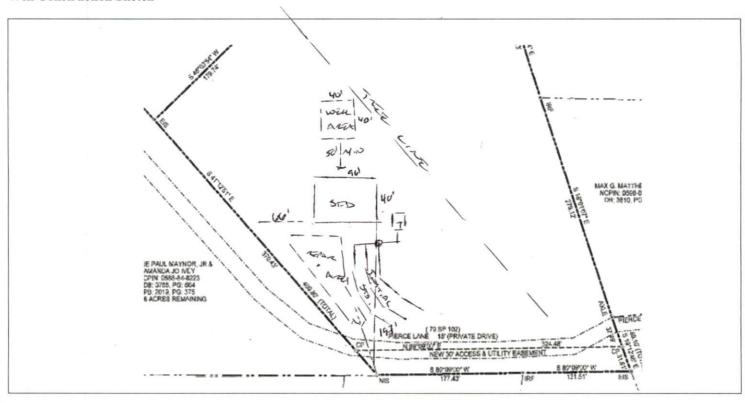
HARNETT DEPARTMENT OF PUBLIC HEALTH PERMIT TO CONSTRUCT A DRINKING WATER SUPPLY WELL

PIN #: 0588-94-3368.000 Parcel #: 07	0598 0088 Applie	cation #: SFD220	8-0052 Subdivis	sion: I	ot #:
Applicant Name: <u>Jonathan & Paula Da</u> Address: <u>2409 Kinfolk Rd Willow Spri</u>			¥		
Type of Facility Served by Well: <u>SFD</u>					
Sewage System: 25% Reduction Sys,		16			
Permit Conditions: <u>Location - Pierce I</u>	n. (US 421 S.)				
General Permit Conditions: • Drinking water supply well cons • The permitted drinking water su • ANY ALTERATION of the sit subject this Permit to revocation	pply well shall be locat	ed in accordance location of structu	with the SITE PLA	nce) or modification	in use of the well, mag
Authorized State Agent	W Comme		09/01/2022		
Grouting Inspection Witnessed Date Grouting self-certified by driller GW-1 provided? Yes No					
See attachment for construction sketch	*				
	WELL CER	TIFICATE OF C	COMPLETION		
Application #:SFD22 Applicant Name: Jonathan & Paula Da Address: 2409 Kinfolk Rd Willow Spr Directions to Site: Pierce Ln. (US 421 Use of Well: Date Drillec Static Water Level: To Disinfection: Type Amount _	ing, NC 27592 S.) Total Deport Casing is in	epth: above surface.	Replacement We Yield: gpi	ll?	Io
From To From From From To Diameter From From To From	sing m To meter: Materia m To meter: Materia m To meter: Materia m To meter: Materia	al: Thickn	ess:	Grout From 0 To Material: Ma	Method:
Inspector: On Hold Da	te: Release	Date:			
Remarks:					
Well Head Information Casing Height: (above finished Well ID Tag: Pump ID Tag Sample Taken? Yes No		Port: g Tap: rly sealed:	Backflo	w Preventer:	
Remarks:					
Authorized State Agent		Date			

See Attachment for completion sketch

Well Construction Sketch



Well Completion Sketch

