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*. The Construction Authorization will expire within five years from the date of issue.

APPLICANT INFORMATION

Applicant/Owne	r		· · ·	Phone Numbe	er
1903 N. HARRISON		ARY. NC 2751	13		
Street Address,					
The Applicant must so 1. existing and/or propor 2. the location of the proportion of the proportion of the location of existing the location of existing the location of any experiments of the location of any experiments of the location of any experiments of the location of the proportion of	sed property lines and cility and appurtenand roposed well; ag or proposed sewer xisting wells within 1 underground storage	d easements with ce; lines and/or sew 00 feet of the pro- tanks;	h dimensions; wage disposal system operty; surface water	s within 100 feet o	
7. and any other known8. Are there any curren					
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The Applicant shall n Division of Environm 1. there is a relocation of the state o	ental Health if any of the proposed facilithe intended use of the stalling the waste wath hanged that affect site tion: Environm PROP Multifamily Multifamily	f the following of y; e facility; er system in an acceptainage. mental Heal PERTY IN Proposed u Church	area other than indicate Ith Division - 92 IFORMATIC Ise of well Restaurant 546 Subdivision	ted on the well per section: 10-893-7547 DN Business Retreat	rmit; or Irrigation □ at North Main OP

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.

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.

- Marker.	BOD VO	
Property Owner's of Own	ner's Legal Representative Signature Required	

Minds Howling