

# Harnett County Department of Public Health

## Well Abandonment Permit Application

### APPLICANT INFORMATION

\_\_\_\_\_  
Applicant/Owner ( ) \_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Street Address, City, State, Zip Code

### PROPERTY INFORMATION

Street Address \_\_\_\_\_ Subdivision/Lot # \_\_\_\_\_

Parcel # \_\_\_\_\_ PIN # \_\_\_\_\_

#### Directions to the Site

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Brief description of the well location (ex. front yard, behind out building, front yard, etc.)

**\*Please include a Site Plan of your property showing the location of the well. If the well is underground, it must be uncovered prior to the department's site visit.**

#### Please Complete the Following Information:

Date Well Was Constructed \_\_\_\_\_ Grouted: Yes  No   
Above Ground  or Below Ground  Total Depth of Well \_\_\_\_\_  
Well Type: Drilled  Bored  Hand dug  Diameter \_\_\_\_\_ inches

**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.*

\_\_\_\_\_  
Property Owner's of Owner's Legal Representative Signature Required

\_\_\_\_\_  
Date

If you have any questions please contact Environmental Health Division at 910-893-7547