ONSLOW COUNTY HEALTH DEPARTMENT APPLICATION FOR WELL PERMIT

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 permit is valid for either 60 months or without expiration depending upon documentation submitted.

APPLICANT INFORMATION

_____ _____ _____
Applicant Address Home & Work Phone

_____ _____ _____
Property Owner Address Home & Work Phone

Email address:_____

PROPERTY INFORMATION

_____ _____ _____
Street Address Subdivision Name Section/Lot#

_____
Parcel #

Directions to Site:_____

_____

Well Permit Type: ☐ New ☐ Repair ☐ Abandonment ☐ Other _____

Intended Use of New Well:

_____ Residential – Serving one single family dwelling
_____ Residential – Serving more than one single family dwelling
_____ Other:_____
_____ Are there any existing wastewater systems (surface or subsurface) on this property?
_____ Are there any easements or right of ways on this property?
_____ Are there any existing wells, springs or water lines on this property?
_____ Are there any surface water bodies or designated wetlands on this property?
_____ Are there any below ground chemical or petroleum storage tanks on your lot or adjacent to your lot?
_____ Are there any known landfills, waste storage on your lot or adjacent to your lot?
_____ Is there any known underground contamination on your lot or adjacent to your lot?
_____ Are there any industrial, municipal sludge spreading or wastewater-irrigation sites on your lot or adjacent to your lot?

PLEASE ATTACH A SITE PLAN OF YOUR PROPERTY.

I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete field investigation can be performed.

_____ _____
Property owner's or owner's legal representative signature Date
(Must provide documentation to support claim as owner's legal representative)