



106 E Morgan St. Ste 105
Brevard, NC 28712
828-884-3139

WELL INSTALLATION OR WELL REPAIR PERMIT APPLICATION

Receipt No.: _____ \$ _____ (Office Use)

Intended Use: Single Family Well [] Shared Well [] Other Well _____

APPLICANT INFORMATION

_____	_____
Owner	Address
_____	_____
Phone	Email Address
_____	_____
Agent/Contractor/Buyer	Address (Buyer only)
_____	_____
Phone	Email Address

PROPERTY INFORMATION

_____	_____
Parcel I.D.	Street Address (if different from above)

Subdivision: _____ Section: _____ Lot No.: _____

Directions to property:

Does your property contain or is it located near any of the following: (check all that apply)

- | | | |
|---------------------------------|-------------------------|-----------------------------|
| Petroleum Storage Tank(s) _____ | Animal Barn(s) _____ | Easement(s) _____ |
| Chemical Storage Area(s) _____ | Animal Feedlot(s) _____ | Right(s) of Way _____ |
| Landfill(s) _____ | Grave Site(s) _____ | Designated Wetland(s) _____ |

Any Known Ground or Groundwater Contamination (list) _____

I certify the above to be correct to the best of my knowledge. Permission is hereby granted to perform a site evaluation for location of a new well or repair of an existing well on the property described above. If the information submitted in this application is falsified or changed, the permit shall become void. I understand that it is my responsibility as the applicant/agent/owner to comply with all applicable ordinances, laws, and rules from other agencies that may affect the development of this property.

Owner/Agent Signature: _____ Date: _____