~~#30~~

PERMIT # 172739 PIN # 4732038771

IREDELL COUNTY HEALTH DEPARTMENT – *Environmental Health Division*

Statesville Office 704-878-5305 Mooresville Office 704-660-3625

PRIVATE DRINKING WATER WELL PERMIT

Type of Permit (circle one) (New) Repair Abandonment

APPLICANT INFORMATION

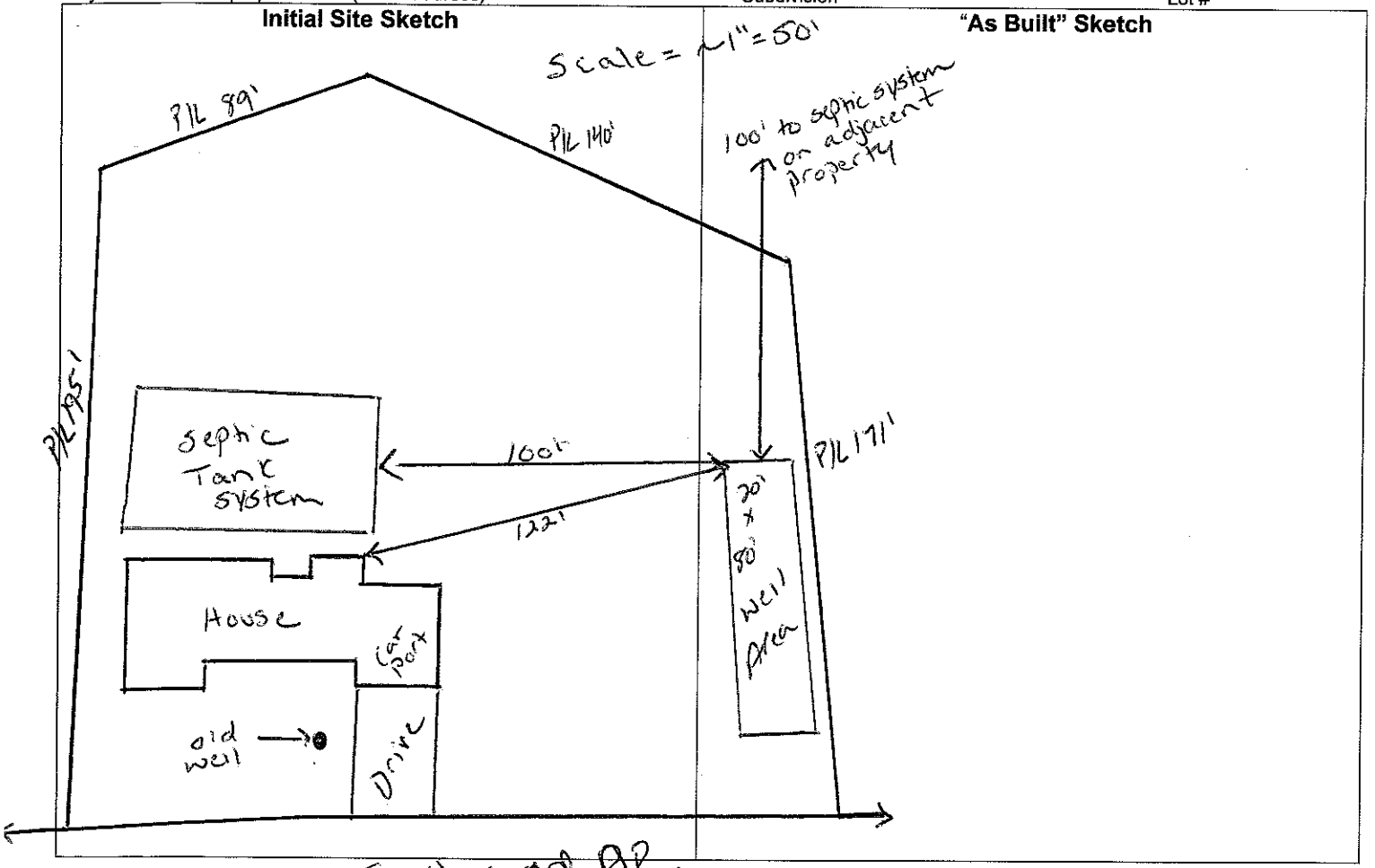
Kenneth McCoy	141 Southwood Dr. Statesville NC 28677	704-528-6199
Name	Full Address	Telephone #

PROPERTY INFORMATION

Old Mountain Rd, R. on Southwood Dr. Property on Left
Directions to Site

141 Southwood Dr. Statesville NC	Southwood	27
Physical location of proposed well (street address)	Subdivision	Lot #

Initial Site Sketch **"As Built" Sketch**



Permit Conditions/ Comments: - well area must be min. of 25' from any foundation
- Well area is a min of 100' away from all adjacent septic systems

Well Permit Issued By: Justin Mendoza **Date:** 5-30-12

(Permit is valid for 5 years from date issued. This permit may be revoked if it is determined there has been a material change in any fact or circumstance upon which the permit is issued. Actions of the employees of the Iredell County Health Department shall in no way be taken as a guarantee that this well will produce water of any particular quantity or quality or for any amount of time. Employees of the Iredell County Health Department assume no liability for any damages, either direct or consequential which may be caused by this well.)

Well GPS Coordinates Lat: _____ **Long:** _____ **Well Contractor** Air Drilling **Contractor Cert #** 3214

Grout Inspection By: _____ **Date:** 6-1-12 **or Certification for Grouting Not Witnessed**

by Dept _____ **Date:** _____ **Well Head Inspection** (check when completed) Grout to Ground Surface ☑

Well Contractor ID Plate ☑ Pump Installer ID Plate ☐ Sample Port ☑ Access Port / Vent ☑ Well Seal ☑ Well Head 12 inches / Pit less Adaptor 8 inches above grade ☑ **Well Head Inspection By:** _____ **Date:** 6-20-12

Certificate of Completion by: _____ **Date:** 6-20-12 **Water Samples By:** _____ **Date:** _____

Attachments: Form GW-1a (***required except for abandonment***) ☑ Form GW 30 ☐ Water Sample Results ☐ Plat ☐

Health Dept. Copy - White Applicant Certificate of Completion - Yellow Applicant Well Construction Permit - Pink