

1200 Spartanburg Highway, Suite 100 Hendersonville, NC 28792

Phone: (828) 694-6060 Fax: (828) 697-4523

www.hendersoncountync.gov/health

Application for Private Drinking Water/Well

APPLICANT INFORMATION

Applicant	Address		Contact Phone #
Owner	Address		Contact Phone #
PROPERTY INFORMATION			
Street Address	Subdivision Name		Section/Phase/Lot#
Directions to Site:	Lot Size		
Existing Water Supply □ Spring □ Single-		/ell □ Regulated Facility Well (.170	
☐ I am applying for a NEW Private Drin ☐ I am applying for a REPAIR of a Priv Well Type of well: Bored Drilled Dug Driven	C .	Please Select Type of Private ☐ Single Family PDW Well ☐ Shared PDW Well (servi) ☐ PDW for Regulated Faci 18A .1700 Rules) ☐ Irrigation Only:	Il (Serving One Home) ing more than 1 home) lity (i.e. Restaurant)(SA NCAC
N/A		# of Occupants	

NCDHHS/DPH/EHS/WP Revised May 2024



**Must provide documentation to support claim as owner's legal representative.

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PLEASE SELECT ALL THAT APPLY:

The Applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer to any question is "yes", applicant must attach supporting documentation and <u>INDICATE IT ON THE SITE</u> PLAN.

□Yes □No	Does the Site contain any existing wastewater systs the site subject to approval by any other public Are there any easements or right of ways on this Are there any known landfills within 500 feet or Are there any wells, springs, or water lines on this Is the site within a floodway or floodplain? Does this site contain any fertilizer, pesticide, here	agency? property? waste storage within 100 feet of t s 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 site evaluation can be performed.				
IF THE INFORMATION IN THE APPLICATION FOR A WELL IMPROVEMENTS PERMIT IS FALSIFIED, CHANGED OR THE SITE IS ALTERED, THEN THE WELL IMPROVEMENTS PERMIT SHALL BECOME INVALID.				
Note: Issuance of permit by Henderson County Environmental Health does not guarantee or imply approval of future permit applications by this or any other agency.				
Please provid	e a valid email address			
Property own	er's or owner's legal representative** signature (re	equired)	Date	

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