

# APPLICATION FOR WATER SAMPLES PRIVATE WATER SUPPLIES

PHONE: 919-245-2360  
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Environmental Health Division  
PO Box 8181, 131 W Margaret Ln Unit 100  
Hillsborough, NC 27278

DATE RECEIVED: \_\_\_\_\_ WELL PERMIT # \_\_\_\_\_ - \_\_\_\_\_ APD# WS \_\_\_\_\_ - \_\_\_\_\_ PIN \_\_\_\_\_

## APPLICATION

APPLICANT: \_\_\_\_\_ PROPERTY OWNER: \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Mailing Address \_\_\_\_\_  
Phone Number \_\_\_\_\_ Phone Number \_\_\_\_\_  
EMAIL \_\_\_\_\_ EMAIL \_\_\_\_\_

PROPERTY ADDRESS AND DIRECTIONS \_\_\_\_\_

## WELL INFORMATION (IF KNOWN):

TYPE OF WELL:     DRILLED (6" DIAMETER)                       BORED WELL                       HAND DUG WELL  
TYPE OF SAMPLE:     NEW SAMPLE     RE-SAMPLE (following previous positive results)  
TYPE OF FACILITY     RESIDENCE (Owner Occupied)                       RENTAL                                       BUSINESS  
WHEN WAS THE WELL LAST CHLORINATED? \_\_\_\_\_  
DESCRIBE ANY CURRENT PROBLEMS WITH YOUR WATER. \_\_\_\_\_  
WATER TREATMENT:     CHLORINATOR     ULTRA VIOLET (UV) DISINFECTION     PH NEUTRALIZER  
                                  WATER SOFTENER     SEDIMENT FILTER     IRON REMOVAL     OTHER \_\_\_\_\_

## TYPE OF SAMPLE REQUESTED:

- |  |  |
|--|--|
| <input type="checkbox"/> BACTERIOLOGIC SAMPLE <b>\$75.00</b>   | <input type="checkbox"/> NITRATE/NITRITE SAMPLE <b>\$75.00</b> |
| <input type="checkbox"/> INORGANIC SAMPLE (ALKALINITY, ARSENIC, CALCIUM, CHLORIDE, COPPER, FLOURIDE, HARDNESS, IRON, LEAD, MAGNESIUM, MANGANESE, pH, SODIUM, ZINC) | <b>\$110.00</b>  |
| <input type="checkbox"/> FULL SAMPLE SUITE (INCLUDES THE THREE SAMPLES ABOVE PLUS: BARIUM, CADMIUM, CHROMIUM, MERCURY, SELENIUM, SILVER)                           | <b>\$110.00</b>  |
| <input type="checkbox"/> VOC (PETROLEUM) SAMPLE <b>\$150.00</b>  | <input type="checkbox"/> PESTICIDE SAMPLE <b>\$150.00</b>      |
| <input type="checkbox"/> IRON BACTERIA SAMPLE <b>\$75.00</b>   | <input type="checkbox"/> SULFUR BACTERIA SAMPLE <b>\$75.00</b> |
| <input type="checkbox"/> HEXAVALENT CHROMIUM <b>\$100.00</b>   | <input type="checkbox"/> COAL ASH Panel <b>\$100.00</b>        |

WATER SAMPLES MUST BE REQUESTED BY THE OWNER OR TENANT OF THE PROPERTY WITH A SIGNATURE ON THIS FORM  
THE WELL HEAD AND SAMPLING SPIGOTS MUST BE EXPOSED AND MADE ACCESSIBLE TO THE OCHD.  
PLEASE DO NOT CHLORINATE THE WELL BEFORE SAMPLING UNLESS INSTRUCTED TO DO SO BY THE OCHD.

*I AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE REQUESTED.*

OWNER / TENANT: \_\_\_\_\_ DATE: \_\_\_\_\_

RETURN WITH PAYMENT TO:  
**ORANGE COUNTY ENVIRONMENTAL SERVICES**  
131 W MARGARET LN, UNIT 100, HILLSBOROUGH, NC 27278

Or call 9192452378 with payment by phone.  
Payment must be included with this application in order to complete the services

	Date	Notes
Chlorine Check	_____	_____
Samples collected	_____	_____
Samples collected	_____	_____
Well Head Protected?	_____	_____
Results e-mailed / mailed	_____	_____