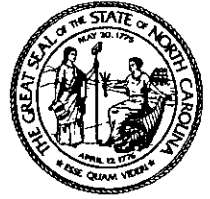




HOKE COUNTY
Department of Public Health

683 East Palmer Street
Raeford, North Carolina 28376



Helene Edwards, MS, RD, LDN
Interim Health Director

(910) 875-3717
FAX (910) 875-6351

APPLICATION FOR WATER SAMPLE

\$30.00 per sample

Date Received: _____

Owner: _____ Phone Numbers: _____

Owners Address: _____

Address of Occupant if different from Owner: _____

Directions to Property: _____

Analysis Desired: Bacteriological: _____ Inorganic: _____ Other: _____

Total Samples Requested: _____

WELL CONSTRUCTION INFORMATION

- 1) Age of Well _____.
- 2) Does the well have a concrete slab? **Yes/No**
- 3) Is the well casing extending above ground surface? **Yes/No** If so, how far? _____.
- 4) Does the well have concrete grout? **Yes/No**

Note: If the well is not properly constructed, a bacteriological sample will **not** be collected.

Application received by: _____

Applicant signature: _____

*** WATER SAMPLES WILL ONLY BE COLLECTED MONDAYS - WEDNESDAYS**