

NC Division of Water Resources (DWR) / NC Division of Public Health (DPH)

VARIANCE APPLICATION FOR WELL CONSTRUCTION STANDARDS:

WATER SUPPLY WELLS UNDER 15A NCAC 02C .0107

All water supply wells not considered "Private Drinking Water Wells" (e.g., irrigation, industrial and commercial wells, etc.)

WELLS OTHER THAN WATER SUPPLY UNDER 15A NCAC 02C .0108

Includes monitoring and recovery wells.

PRIVATE DRINKING WATER WELLS UNDER 15A NCAC 02C .0300 (administered by DPH)

Print clearly or type information. Illegible submittals will be returned as incomplete.

DATE: \_\_\_\_\_ 202\_\_

Existing Permit Number (if applicable): \_\_\_\_\_ Issued Date: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Permit No. for new projects (to be completed by DWR/DPH, if applicable) \_\_\_\_\_

A. WELL OWNER(S) – For single family residences, list all persons appearing on property deed. For all others, list name of the business/government agency and person and title with delegated signature authority:

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Day Tele No.: \_\_\_\_\_ Cell No.: \_\_\_\_\_

EMAIL Address: \_\_\_\_\_ Fax No.: \_\_\_\_\_

B. PHYSICAL LOCATION OF WELL SITE

(1) Parcel Identification Number (PIN) of well site: \_\_\_\_\_

County: \_\_\_\_\_

(2) Physical Address (if different than mailing address): \_\_\_\_\_

\_\_\_\_\_  
City: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

C. WELL DRILLER INFORMATION (if known)

Well Drilling Contractor's Name: \_\_\_\_\_

NC Well Drilling Contractor Certification No.: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Day Tele No.: \_\_\_\_\_ Cell No.: \_\_\_\_\_

EMAIL Address: \_\_\_\_\_ Fax No.: \_\_\_\_\_

**D. REASON FOR VARIANCE REQUEST** – Include type of well(s) to be constructed; rule for which the variance is being requested; description of how the alternate construction will not endanger human health and welfare and the environment; and reason why construction and/or operation in accordance with the standards is not technically feasible and/or provides equal or better protection of the groundwater (references to attached documents are acceptable).

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**E. ATTACHMENTS** – Provide the following information as attachments to this application:

- (1) A general location map showing property (including road names, NC State Route Number, distances, any key landmarks, etc.) sufficient for finding the well location.
- (2) Detailed site map with scale showing location of proposed well relevant/distance to septic system(s), building foundations, property lines, water bodies, potential sources of contamination, other wells, etc.
- (3) Submit a copy of the local well permit application and site evaluation map (if applicable).
- (4) Any other information relevant to the variance request such as a well construction diagram showing proposed well liner or atypical construction materials/methods.

**F. SIGNATURE(S)**

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**Signature(s) of Well/Property Owner(s)**

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**Print or Type Well/Property Owner(s) Name(s)**

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**Signature of Person Responsible for Well Construction  
(Typically, the well contractor)**

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**Print or Type Name of Person Responsible for Well Construction  
(Typically, the well contractor)**

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**Signature of County Environmental Health Specialist (for Private Drinking Water Wells only per 02C .300)**

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**Print or Type Full Name and Title of County Environmental Health Specialist (for Private Drinking Water Wells only per 02C .0300)**

*Per 15A NCAC 02C .0118 the Secretary of the Division of Water Resources or the Division of Public Health may require submittal of information deemed necessary to make a decision on the variance, may impose conditions as part of the decision, and shall respond in writing to the request within 30 days of receipt of the variance request. A variance applicant who is dissatisfied with the decision of the Director may commence a contested case by filing a petition as described in G.S. 150B-23 within 60 days after receipt of the decision.*

## G. SUBMITTAL INSTRUCTIONS

- (1) For the following types of water supply wells only:
- (a) Private Drinking Water Wells under 15A NCAC 02C .0300
  - (b) Irrigation Wells under 15A NCAC .02C .0107 with a designed capacity of less than 100,000 gallons per day and located on the same property as an on-site wastewater system permitted by a local health department.

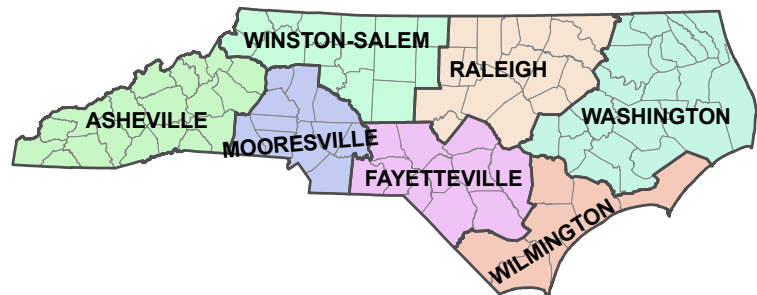
Prior to submittal of the variance for these types of wells, please contact your regional environmental health specialist by visiting: <http://ehs.ncpublichealth.com/contacts.htm>

Submit one copy of the completed variance application to:

**North Carolina Department of Health and Human Services  
Division of Public Health – Environmental Health Section  
On-Site Water Protection Branch  
1632 Mail Service Center  
Raleigh, North Carolina 27699-1632**

- (2) For the following types of wells only:
- (a) All Water Supply Wells under 15A NCAC 02C .0107 other than the ones listed under (1) above
  - (b) Wells Other than Water Supply under 15A NCAC 02C .0108. If these wells are to be constructed on property not owned by the well owner or applicant, please also attach and submit a completed Application to Construct a Monitoring or Recovery Well System (GW-22MR) found on our website at: <https://www.deq.nc.gov/about/divisions/water-resources/groundwater-resources/forms-permit-application-tracking>

Submit one copy of the completed variance application to the Division of Water Resources Regional Office serving the area in which the well will be located:



**Asheville Regional Office**  
2090 U.S. Highway 70  
Swannanoa, NC 28778  
Telephone: (828) 296-4500  
Fax: (828) 299-7043

**Raleigh Regional Office**  
1628 Mail Service Center  
Raleigh, NC 27699-1628  
Telephone: (919) 791-4200  
Fax: (919) 571-4718

**Wilmington Regional Office**  
127 Cardinal Drive Extension  
Wilmington, NC 28405  
Telephone: (910) 796-7215  
Fax: (910) 350-2004

**Fayetteville Regional Office**  
225 Green Street, Suite 714  
Fayetteville, NC 28301-5043  
Telephone: (910) 433-3300  
Fax: (910) 486-0707

**Washington Regional Office**  
943 Washington Square Mall  
Washington, NC 27889  
Telephone: (252) 946-6481  
Fax: (252) 975-3716

**Winston-Salem Regional Office**  
450 W. Hanes Mill Rd.  
Suite 300  
Winston-Salem, NC 27105  
Phone: (336) 776-9800  
Fax: (336) 776-9797

**Mooresville Regional Office**  
610 East Center Avenue,  
Suite 301  
Mooresville, NC 28115  
Telephone: (704) 663-1699  
Fax: (704) 663-6040