

**ALAMANCE COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION
209 N. GRAHAM-HOPEDALE RD.
BURLINGTON, NC 27217**
Fax: (336) 570-6362 Phone: (336) 570-6367
www.alamance-nc.com

THERE IS A THREE-DAY TURN AROUND TIME ON ALL REQUESTED INFORMATION.

Requestee's Name _____

Requestee's Mailing address: _____

Fax number _____ Phone number _____

1. Tax Map Number - Parcel ID Number- _____

2. Old Tax Map Number - _____

3. Subdivision Name _____ S/D Lot Number _____

4. Property Address _____

5. Directions to the property _____

6. Present Owner of the Property _____

7. List any names of past owners of the property that you know. _____

8. Date septic was installed _____

9. Date home was built _____

10. What specific information do you need?

- • Copy of well permit _____
- • Copy of septic permit _____
- • Copy of existing water sample results _____
- Copy of soil evaluation _____

Please fill in all you can of 1-9 above. It will help us get your information to you quicker.