HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive_ Sel 1st	
NAME David M Landner	Date /1/13/18 (9/9) 868-6932
MAILING ADDRESS 997 Matthews Mill Pord Rd P.O. BOX OR STREET	AREA CODE & PHONE NUMBER
NUMBER OF WELLS /	CHECK HERE IF COUNTY WATER
North and of 3 rd bldg LOCATION OF OUTSIDE SPIGOT(S)	UTSIDE SPIGOT? YES [] NO
COMMENTS	
LIST BELOW EACH 911 CAMP ADDRESS AND THE NUMBER OF	MIGRANTS PER HOUSING UNIT
235 Gardner Camp Path angier NC 255 Gardner Camp Path angier NC 275 Bardner Camp Path angier 1	NUMBER OF MICH AND 74
b Gardner Rol to Rt & go to Gardner path	number of migrants_ nton Matthews Mill Pond Rel go Camp Patte & go to end of
The top of the existing septic tank must be completely uncovered made. If a well is to be tested and has been unused for a while, plonce your well/septic is ready please let us know so we may proceed the subject to alter these days. Signature Array Array Chis certifies that all the above information is correct to the best of my knowled, the certification is subject to re-evaluation if the intended use or number of might	ease chlorinate before you call our office to confirm. ess. Water samples can be taken Monday - Wednesday
OFFICE USE ON	LY
PRIVY SEPTIC TANK WATER SUPPLY S' Ma la ATTICIPA PRIVY [] APPRO	OVED [] UNAPPROVED OVED [] UNAPPROVED OVED [] UNAPPROVED
Environmental Health Specialist, R.E.H.S. Date	-12-18

[Evaluation	
[] Re-evaluation	
	(number)

North Carolina Department of Environment and Natural Resources

Division of Environmental Health

PREOCCUPANCY EVALUATION REPORT OF DRINKING WATER SUPPLY AND

WASTEWA	ATER FACILITIES FOR MIGRANT HOUSING
On 11-26-18, as required in G.S. 95-22 (date)	25(c) and (d), an evaluation was conducted of the drinking water supply and
wastewater system serving a migrant housing site con	nposed of # of Mobile home units, # of House (s) and
	located at 275 GANDARY CAMP Pall
Auxieu N.C. 27501 an	
of 997 Matthews mill Porc	(name of person[s]/company) Dryler N.C. 27501
PLEASE SUBMITION	(mailing address) IEREPORT FOR EACH SEPTIC SYSTEM #500 1000
	A STATE OF THE PARTY OF THE PAR
This report describes well/spring and sewa (number) The findings of this evaluation are as follows:	age system (Use reverse for a drawing, if needed.) (number)
WATER SUPPLY Community or non-transient non-community	
(yes/no) Division of Environmental Health	nity water system under routine surveillance of Public Water Supply Section,
(yes/no) Private Water or Non-Community System	
At the time of inspection, there WAS NOT visual (was/was not)	l evidence of non-compliance with the "Protection of Water Supplies"
15A NCAC 18A .1700 (attach copy of bacteriological san	nple). List deficiencies which were identified:
*	(Use reverse if necessary)
WASTEWATER FACILITIES	×
System to approval under 15A (subject/not subject) Systems." Explain, if not subject to approval	NCAC 18A .1900, "Laws and Rules for Sewage Treatment and Disposal
[On-Site Septic Tank System [] Chemical Portable To	pilets [] Others [] Privy(ies)
At the time of inspection, there was por visit (was/was not)	ual evidence of non-compliance with 15A NCAC 18A .1900 (including
.1962) "Laws and Rules for Sewage Treatment and Dispo	sal System." List deficiencies which were identified:
	(Use reverse if necessary)
The wastewater system, to the best of my knowledge and	belief, is sized to serve 3 Zpeople.
S Marka to TENS	(maximum number)
Environmental Health Specialist	Harnett County Environmental Health Health Department
12-17-10	N = 3-200000
Date	307 W. Cornelius Harnett Blvd. Address
	, todi ogo
Forward copies to: Migrant Housing Operator Department of Labor	Lillington, NC 27546
Agriculture Safety & Health Bureau	910-893-7547
	Office Phone Number

DENR 3765 (Revised 2/2011) On-Site Wastewater Section (Review 12/2010)

[Evaluation	
[] Re-evaluation _	
		(number)

North Carolina Department of Environment and Natural Resources

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(date)
wastewater system serving a migrant housing site composed of # of Mobile home units, # of House (s) and
Other type of housing/describe: located at 255 GANDNER CAMP PAPE
(address or dissellers and the state of the
ANSIGN N.C. 7750) and operated by DANTA M GANDRON
of 997 Matthews Mill Pord RD Agree N.C. 27501
(mailing address)
* PLEASE SUBMITONE REPORT FOR EACH SEPTIC SYSTEM ***
This report describes well/spring and sewage system (Use reverse for a drawing, if needed.)
(number) (number)
The findings of this evaluation are as follows:
WATER SUPPLY
Community or non-transient-non-community water system under routine surveillance of Public Water Supply Section,
(yes/no) Division of Environmental Health YES Private Water or Non-Community System
(yeshio)
At the time of inspection, there WMS NOT visual evidence of non-compliance with the "Protection of Water Supplies"
(was/was not) 15A NCAC 18A .1700 (attach copy of bacteriological sample). List deficiencies which were identified:
(Use reverse if necessary)
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(subject/for subject) Systems." Explain, if not subject to approval
TOn-Site Septic Tank System [] Chemical Portable Toilets [] Others [] Privy(ies)
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(was/was not)
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(Use reverse if necessary)
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Environmental Health Specialist Health Department
17-12-18 307 W. Cornelius Harnett Blvd.
Date 307 W. Cornelius Harnett Blvd. Address
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Agriculture Safety & Health Bureau910-893-7547
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wastewater system serving a migrant housing site composed	d of # of Mobile home units, # of House (s) and
Other type of housing/describe:	located at 235 GANDER CAMP PATA
Augur N.C. 27501 and open	rated by Market (address or directions; use reverse if needed)
of 997 Matthews Mill Porch	RD Anxeen NC. 27501
PLEASE SUBMIT ONE R	(mailing address) 0 EPORT FOR EACH SEPTIC SYSTEM = 1000 Miles
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System Subject to approval under 15A NCAC	C 18A .1900, "Laws and Rules for Sewage Treatment and Disposal
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North Carolina State Laboratory of Public Health

Environmental Sciences

Microbiology **Certificate of Analysis**

4312 District Drive MSC 1918 Raleigh, NC 27699-1918

http://slph.ncpublichealth.com Phone: 919-733-7308 Fax: 919-715-8611

Angela Heybroek

FINAL REPORT

Report to: JAMES MANHART

HARNETT CO ENVIRONMENTAL HEALTH

307 CORNELIUS HARNETT BLVD

Lillington, NC 27546

Name of System:

David M Gardner

999 Matthews Mill Pond Rd

By:

Angier, NC 27501

08:41

Time Received:

Delivery: NC Courier EIN: 566000306EH **Harnett County**

StarLiMS ID: ES181127-0051 Date Collected: 11/26/2018 Time Collected: 11:00 James E Manhart III By: 11/27/2018

Sample Source: Well water Sampling Point: Outside spigot

Date Received:

Sample Type: GPS No.

Well Permit No. Treatment:

Comment:

Colilert Profile Method: SM 9223B

Analyte	Test Result	Unit	Conclusion	Date Tested
Total Coliform	Absent			11/27/2018
E. coli	Absent			11/27/2018

11/28/2018 Reported By: Susan Beasley Report Date:

Explanations of Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purpose. If coliform bacteria are Present, the water is considered unsafe for drinking purpose. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

North Carolina Division of Public Health Occupational and Environmental Epidemiology Branch, Epidemiology Section BIOLOGICAL ANALYSIS REPORT

Private well water information and recommendations

County: HAZNETT Name: DAVES MGARROY Sample ID Number: 16 5 /8/127-005
Location: 235 Ganglier Campiate Awgeen Reviewer Suran Boushy
Initial Sample Confirmation Sample
BIOLOGICAL ANALYSIS RESULTS AND RECOMMENDATIONS FOR USES OF YOUR PRIVATE WELL WATER (These recommendations are based on biological analysis only.) No coliform bacteria were found in your well water. Your water can be used for all
purposes including drinking, cooking, washing dishes, bathing and showering. Total coliform bacteria were detected in the sample which indicates that harmful bacteria
from human or animal waste could enter the well. Do not use the water for drinking or cooking unless it has been boiled for 3 minutes. You may use your water for all other purposes including washing dishes, bathing or showering.
Your well water needs to be re-tested to verify that the result is accurate.
Fecal coliform bacteria were detected in the sample. Do not use the water for drinking, cooking, washing dishes, bathing or showering.

If the re-test shows contamination by bacteria contact your local health department for assistance. There may be a problem with the construction of the well, the groundwater source, or operation of the well. The well needs to be inspected by the local health department or a local well contractor to determine the problem with the well and to give guidance on how to correct the problem.

Your well water was tested for biological contaminants (total coliform and fecal coliform bacteria). The results were evaluated using the federal drinking water standards.

Drinking water may contain substances that can occur naturally in water or can be introduced into water from man-made sources. Total coliform bacteria are found in soil and fecal coliform bacteria are found in animal and human waste. Total coliform or fecal coliform bacteria in well water indicate that the well may have structural problems or that the well was not properly disinfected.

If you have been drinking the well water and are pregnant, nursing, have a child in the household under 5 years of age, or immunocompromised (such as an individual with AIDS, cancer, hepatitis, dialysis or surgical procedures) inform your physician of these results at your next visit.

If the contamination continues, you should investigate the possibility of drilling a new well or installing a point-of-entry disinfection unit which can use chlorine, ultraviolet light, or ozone.

For further information please contact your county health department or the Occupational and Environmental Epidemiology Branch at 919-707-5900.