## HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

APPLICATION FOR MIGRANT HOUSING DATE NAME MAILING ADDRESS P.O. BOX OR STREET NUMBER OF WELLS CHECK HERE IF COUNTY WATER NUMBER OF SEPTIC SYSTEMS OUTSIDE SPIGOT? [/] YES [ ] NO COMMENTS LIST BELOW EACH 911 CAMP ADDRESS AND THE NUMBER OF MIGRANTS PER HOUSING UNIT NUMBER OF MIGRANTS NUMBER OF MIGRANTS NUMBER OF MIGRANTS NUMBER OF MIGRANTS DIRECTIONS FROM LILLINGTON TO THE CAMP The top of the existing septic tank must be completely uncovered. The lid must be loosened so a visual inspection can be made. If a well is to be tested and has been unused for a while, please chlorinate before you call our office to confirm. Once your well/septic is ready please let us know so we may process. Water samples can be taken Monday - Wednesday \*Holidays subject to alter these days. This certifies that all the above information is correct to the best of my knowledge and any false information will result in the denial of approval. The certification is subject to re-evaluation if the intended use or number of migrants changes. Signature ---- OFFICE USE ONLY -----PRIVY [] APPROVED [] UNAPPROVED SEPTIC TANK [] APPROVED [] UNAPPROVED WATER SUPPLY [] APPROVED [] UNAPPROVED ENVIRONMENTAL HEALTH SPECIALIST, R.E.H.S. DATE