

**HARNETT COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SECTION**

**APPLICATION FOR MIGRANT HOUSING**

Date Workers Arrive 3-22-18

Date 1-23-18

NAME John Britt (710) 890-3621  
 MAILING ADDRESS 183 Braxtonwood Dr. Angier N.C. AREA CODE & PHONE NUMBER  
P.O. BOX OR STREET CITY/TOWN ZIP CODE

NUMBER OF WELLS 2

CHECK HERE IF COUNTY WATER

NUMBER OF SEPTIC SYSTEMS 2

OUTSIDE SPIGOT?  YES  NO

LOCATION OF OUTSIDE SPIGOT(S) \_\_\_\_\_

COMMENTS

LIST BELOW EACH 911 CAMP ADDRESS AND THE NUMBER OF MIGRANTS PER HOUSING UNIT

2640 Mabry Rd. Angier N.C. NUMBER OF MIGRANTS 9

152 Royal Anne Ln. Angier N.C. NUMBER OF MIGRANTS 4

\_\_\_\_\_ NUMBER OF MIGRANTS \_\_\_\_\_

\_\_\_\_\_ NUMBER OF MIGRANTS \_\_\_\_\_

DIRECTIONS FROM LILLINGTON TO THE CAMP Highway 210 N. toward Angier. Turn right on Sheriff Johnson Rd. Go to second stop sign turn Left on Oak Grove Church Rd. Go to First path on Left Royal Anne. The last house on Rd white house. Spigot inside house backdoor open. Second house turn Left on Mabry Rd. First path on Left. Go into wood past greenhouse. To big white house spigot on pump house.

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.

Signature John Britt

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.

----- OFFICE USE ONLY -----

PRIVY	<input type="checkbox"/> APPROVED	<input type="checkbox"/> UNAPPROVED
SEPTIC TANK	<input type="checkbox"/> APPROVED	<input type="checkbox"/> UNAPPROVED
WATER SUPPLY	<input type="checkbox"/> APPROVED	<input type="checkbox"/> UNAPPROVED

Environmental Health Specialist, R.E.H.S.

Date \_\_\_\_\_