

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive _____

Date 2-12-18

NAME Joe Johnson

(910) 263-0749

MAILING ADDRESS 2044 Ashe Dunn N.C.
P.O. BOX OR STREET

AREA CODE & PHONE NUMBER

28334
ZIP CODE

NUMBER OF WELLS 0

CHECK HERE IF COUNTY WATER

NUMBER OF SEPTIC SYSTEMS 1

OUTSIDE SPIGOT? [] YES [] NO

LOCATION OF OUTSIDE SPIGOT(S) _____

COMMENTS _____

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

3119 Ashe Ave Dunn N.C.

NUMBER OF MIGRANTS 8

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.

Signature Joe Johnson

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
SEPTIC TANK
WATER SUPPLY

[] APPROVED [] UNAPPROVED
[] APPROVED [] UNAPPROVED
[] APPROVED [] UNAPPROVED

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

Date _____