

HARNETT COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SECTION

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive 4-15-20

Date 1-10-20

NAME Robert Currin (910) 891-8200

MAILING ADDRESS 883 Leaflet Ch. Rd Lillington AREA CODE & PHONE NUMBER NC 27546  
P.O. BOX OR STREET CITY/TOWN ZIP CODE

NUMBER OF WELLS \_\_\_\_\_

CHECK HERE IF COUNTY WATER

NUMBER OF SEPTIC SYSTEMS 2

OUTSIDE SPIGOT? [] YES [ ] NO

@ middle of both houses  
LOCATION OF OUTSIDE SPIGOT(S)

COMMENTS

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

<u>84 STANCI @ Currin LN Lillington</u>	NUMBER OF MIGRANTS <u>6</u>
<u>106 STANCI @ Currin LN Lillington</u>	NUMBER OF MIGRANTS <u>6</u>
_____	NUMBER OF MIGRANTS _____
_____	NUMBER OF MIGRANTS _____

DIRECTIONS FROM LILLINGTON TO THE CAMP TAKE Hwy 27 West go 9 miles  
turn right on Leaflet Ch. Rd go 3/4 mile turn right  
on STANCI @ Currin LN go 100 yds both houses  
on right

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 Robert Currin

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