[] Evaluation [] Re-evaluation

(number)

North Carolina Department of Environment and Natural Resources

Division of Environmental Health PREOCCUPANCY EVALUATION REPORT

TO THE OWN THE OWN
OF DRINKING WATER SUPPLY AND
WASTEWATER FACILITIES FOR MIGRANT HOUSING

WASTEWATER FACILITIES FOR MIGRANT HOUSING			
	c) and (d), an evaluation was conducted of the drinking water supply and used of # of Mobile home units, # of House (s) and		
Could type of nodsing/describe.	located at 1545 Fleming Road (address or directions; use reverse if needed) perated by Turling to 1 Forms		
Loads, MC 27321 and c	operated by Turling ton Forms		
of PO Box 1036 Conts, NC 2752) (name of person[s]/company) (mailing address)			
*** PLEASE SUBMIT ONE REPORT FOR EACH SEPTIC SYSTEM ***			
This report describes well/spring and sewage (number) The findings of this evaluation are as follows:	e system (Use reverse for a drawing, if needed.)		
WATER SUPPLY YES Community or non-transient-non-community (yes/no) Division of Environmental Health	water system under routine surveillance of Public Water Supply Section,		
(yes/no) Private Water or Non-Community System			
At the time of inspection, there visual e (was/was not) 15A NCAC 18A .1700 (attach copy of bacteriological sample)	evidence of non-compliance with the "Protection of Water Supplies" ole). List deficiencies which were identified:		
(Use reverse if necessary)		
System to approval under 15A NCAC 18A .1900, "Laws and Rules for Sewage Treatment and Disposal (subject/not subject) Systems." Explain, if not subject to approval			
At the time of inspection, there (was/was not) visual evidence of non-compliance with 15A NCAC 18A .1900 (including .1962) "Laws and Rules for Sewage Treatment and Disposal System." List deficiencies which were identified:			
(Use reverse if necessary)			
The wastewater system, to the best of my knowledge and b	elief, is sized to serve people. (maximum number) Harnett County Environmental Health Health Department		
Ca121/2020	307 W. Cornelius Harnett Blvd.		
Date	Address		
Forward copies to: Migrant Housing Operator Department of Labor Agriculture Safety & Health Bureau	Lillington, NC 27546		
	910-893-7547		
DENR 3765 (Revised 2/2011) On-Site Wastewater Section (Review 12/2010)	Office Phone Number		

HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

EH2002-0008

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive 4/10/20			
	Date2/10/20		
NAME Turlington Farms	(919) 669 7324		
MAILING ADDRESS P.O. BOX OR STREET	AREA CODE & PHONE NUMBER		
P.O. BOX OR STREET	CITY/TOWN ZIP CODE		
NUMBER OF WELLS	CHECK HERE IF COUNTY WATER 😝 🔽		
NUMBER OF SEPTIC SYSTEMS/_	OUTSIDE SPIGOT? [] YES [나] NO		
LOCATION OF OUTSIDE SPIGOT(S)			
COMMENTS			
≈ LIST BELOW EACH 911 CAMP ADDRESS AND THE NUMBER	R OF MIGRANTS PER HOUSING UNIT		
1545 Fleming RA Coats, NC 27521 NUMBER OF MIGRAN			
) ""1)			
	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 uncoverable. If a well is to be tested and has been unused for a while Once your well/septic is ready please let us know so we may *Holidays subject to alter these days.	e, please chlorinate before you call our office to confirm.		
Signature Lut Juliufe			
This certifies that all the above information is correct to the best of my kn. The certification is subject to re-evaluation if the intended use or number of	owledge and any false information will result in the denial of approval. of migrants changes.		
OFFICE USE ONLY			
SEPTIC TANK	PPROVED [] UNAPPROVED PPROVED [] UNAPPROVED PPROVED [] UNAPPROVED		
Environmental Health Specialist, R.E.H.S. Date			