

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

EH 2101-0029

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive 4-18-21

Date 1-20-21

NAME Robert Currin

703 891-8200

MAILING ADDRESS 883 Leaflet Ch. Rd.
P.O. BOX OR STREET

Lillington NC.
CITY/TOWN ZIP CODE

NUMBER OF WELLS _____

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

84 AND 106 STANCIL AND CURRIN LN.

NUMBER OF MIGRANTS RC 86

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NUMBER OF MIGRANTS _____

NUMBER OF MIGRANTS _____

DIRECTIONS FROM LILLINGTON TO THE CAMP Take Hwy 27 N go 9 miles turn Right on Leaflet Ch. Rd. go 1 mile turn Right on Stancil & Currin LN

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
SEPTIC TANK
WATER SUPPLY

APPROVED UNAPPROVED
 APPROVED UNAPPROVED
 APPROVED UNAPPROVED

Mph [Signature] R.E.H.S.
Environmental Health Specialist, R.E.H.S.

01-26-21
Date