

Evaluation
 Re-evaluation _____
(number)

North Carolina Department of Environment and Natural Resources
Division of Environmental Health
**PREOCCUPANCY EVALUATION REPORT
OF DRINKING WATER SUPPLY AND
WASTEWATER FACILITIES FOR MIGRANT HOUSING**

On 02/01/2021, as required in G.S. 95-225(c) and (d), an evaluation was conducted of the drinking water supply and wastewater system serving a migrant housing site composed of # of _____ Mobile home units, # of 1 House (s) and

Other type of housing/describe: _____ located at 1131 WEBB RD
(address or directions; use reverse if needed)

DUNN, NC 28334 and operated by GRAD BAREFOOT
(name of person[s]/company)

of 2896 FLORENCE RD NEWTON GROVE, NC 28366
(mailing address)

***** PLEASE SUBMIT ONE REPORT FOR EACH SEPTIC SYSTEM *****

This report describes well/spring 0 and sewage system 1. (Use reverse for a drawing, if needed.)
(number) (number)

The findings of this evaluation are as follows:

WATER SUPPLY

YES Community or non-transient-non-community water system under routine surveillance of Public Water Supply Section, Division of Environmental Health
(yes/no)

NO Private Water or Non-Community System
(yes/no)

At the time of inspection, there WAS NOT visual evidence of non-compliance with the "Protection of Water Supplies" (was/was not)

15A NCAC 18A .1700 (attach copy of bacteriological sample). List deficiencies which were identified:

(Use reverse if necessary)

WASTEWATER FACILITIES

System SUBJECT to approval under 15A NCAC 18A .1900, "Laws and Rules for Sewage Treatment and Disposal Systems." Explain, if not subject to approval _____
(subject/not subject)

On-Site Septic Tank System Chemical Portable Toilets Others _____ Privy(ies) _____

At the time of inspection, there WAS NOT visual evidence of non-compliance with 15A NCAC 18A .1900 (including (was/was not)
.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 belief, is sized to serve 28 people.
(maximum number)

[Signature]
Environmental Health Specialist

Harnett County Environmental Health
Health Department

02/01/2021
Date

307 W. Cornelius Harnett Blvd.
Address

Forward copies to: Migrant Housing Operator
Department of Labor
Agriculture Safety & Health Bureau

Lillington, NC 27546

910-893-7547

Office Phone Number

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive March 15

Date 11/21/21
919-207-8763 (Ronnie)
(919) 524-7134

NAME Brad Barefoot
MAILING ADDRESS 2896 Elderidge Rd
P.O. BOX OR STREET

Newton Grove N.C. 28366
CITY/TOWN ZIP CODE

NUMBER OF WELLS _____

CHECK HERE IF COUNTY WATER

NUMBER OF SEPTIC SYSTEMS _____

OUTSIDE SPIGOT? YES NO

LOCATION OF OUTSIDE SPIGOT(S) _____

COMMENTS

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

1131 Webb Rd NUMBER OF MIGRANTS 28

Dunn, N.C. 28334 NUMBER OF MIGRANTS _____

NUMBER OF MIGRANTS _____

NUMBER OF MIGRANTS _____

DIRECTIONS FROM LILLINGTON TO THE CAMP Take Jonesboro Rd out of Dunn. Cross I 95. Go about 2.5 miles Webb Rd on Left. 2nd buildings 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 Ronnie E. Wood

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

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

Date

02/01/2021