

**HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION**

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive 4-1-21 Date 2-1-21
 NAME Phillip Ryan Patterson (919) 499-8442
 MAILING ADDRESS 10712 US 421 N Bronxway, NC 27505
P.O. BOX OR STREET CITY/TOWN ZIP CODE
 NUMBER OF WELLS 1 CHECK HERE IF COUNTY WATER
 NUMBER OF SEPTIC SYSTEMS 2 OUTSIDE SPIGOT? YES [] NO
 LOCATION OF OUTSIDE SPIGOT(S) Back door of 620 Holly Springs Ch. Rd.

COMMENTS

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

<u>519 Holly Springs Ch. Rd. Bronxway, NC 27505</u>	NUMBER OF MIGRANTS <u>5</u>
<u>620 Holly Springs Ch. Rd. Bronxway, NC 27505</u>	NUMBER OF MIGRANTS <u>5</u>
_____	NUMBER OF MIGRANTS _____
_____	NUMBER OF MIGRANTS _____

DIRECTIONS FROM LILLINGTON TO THE CAMP TAKE 421 N From Lillington for 11 miles,
turn rt on Holly Springs Ch Rd. Houses are 0.5 mile on left
and 0.6 mile on rt.

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 Phillip Ryan Patterson

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