## HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

## APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive 3-2/-2/	Date 2-/8-2/
NAME W Robert Mangum  MAILING ADDRESS 983 Man ie Upc he P.O. BOX OR STREET	AREA CODE & PHONE NUMBER  LINGTON NO 275 YC  EET CITYTOWN ZIP CODE
NUMBER OF WELLS	CHECK HERE IF COUNTY WATER
NUMBER OF SEPTIC SYSTEMS	OUTSIDE SPIGOT? [X] YES [ ] NO
LOCATION OF OUTSIDE SPIGOT(S)	
COMMENTS	
LIST BELOW EACH 911 CAMP ADDRESS AND THE NUM	IBER OF MIGRANTS PER HOUSING UNIT
1063 Manie Upchurch Rd	NUMBER OF MIGRANTS
2 1078 Manie Uphusch Pel	NUMBER OF MIGRANTS_7
1087 Mamie Upchush Pel	NUMBER OF MIGRANTS
NUMBER OF MIGRANTS	
DIRECTIONS FROM LILLINGTON TO THE CAMP TAKE 210 Noy 210 4 42/ 12 tersection, got mile	
to Ke of on Old Costs Rd go 22 miles take lett on Nels (veek Rd	
go i mile takent on Mamie Upchurch go Imile 3 mobile homes on left	
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 W. Roll Mary.	
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
Environmental Health Specialist, R.E.H.S.	Date