

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 03/01/2021, 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 1 Mobile home units, # of — House (s) and

Other type of housing/describe: \_\_\_\_\_ located at 1078 MAMIE SPCHUACH RD  
(address or directions; use reverse if needed)  
LILLINGTON, NC 27546 and operated by W. ROBERT MANSON  
(name of person[s]/company)  
of 983 MAMIE SPCHUACH ROAD LILLINGTON, NC 27546  
(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,  
(yes/no) Division of Environmental Health  
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  
(subject/not subject)  
Systems." Explain, if not subject to approval \_\_\_\_\_

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 7 people.  
(maximum number)

[Signature] **Harnett County Environmental Health**  
Environmental Health Specialist Health Department

03/23/2021 307 W. Cornelius Harnett Blvd.  
Date Address

Forward copies to: Migrant Housing Operator Lillington, NC 27546  
Department of Labor 910-893-7547  
Agriculture Safety & Health Bureau Office Phone Number