

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive _____

Date 5/3/21

NAME David Etheridge

(910) 890-8002
AREA CODE & PHONE NUMBER

MAILING ADDRESS _____
P.O. BOX OR STREET CITY/TOWN ZIP CODE

NUMBER OF WELLS 1

CHECK HERE IF COUNTY WATER

NUMBER OF SEPTIC SYSTEMS 1

OUTSIDE SPIGOT? YES NO

LOCATION OF OUTSIDE SPIGOT(S) _____

COMMENTS _____

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

470 Fox Hunters Ln. Broadway, NC 27505 NUMBER OF MIGRANTS 16

NUMBER OF MIGRANTS _____

NUMBER OF MIGRANTS _____

NUMBER OF MIGRANTS _____

DIRECTIONS FROM LILLINGTON TO THE CAMP 421 N 10 miles L on Dean

R on old 421, Right on McArthur rd. Turn in at
4880 McArthur rd. follow fence path to camp

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 David B. Etheridge

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 APPROVED UNAPPROVED
SEPTIC TANK APPROVED UNAPPROVED
WATER SUPPLY APPROVED UNAPPROVED

Environmental Health Specialist, R.E.H.S.

Date _____