

**HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION**

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive Feb. 2nd

Date 12-3-01

NAME JOHN GRASS

(919) 499-7339

MAILING ADDRESS 1606 Pickett Rd.
P.O. BOX OR STREET

SANFORD 27332
CITY/TOWN ZIP CODE

NUMBER OF WELLS 1

CHECK HERE IF COUNTY WATER

NUMBER OF SEPTIC SYSTEMS 1

OUTSIDE SPIGOT? YES NO

Right Front
LOCATION OF OUTSIDE SPIGOT(S)

COMMENTS

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

8220 Cox mill Rd. SANFORD N.C. NUMBER OF MIGRANTS 11

27332 NUMBER OF MIGRANTS _____

PLEASE CALL OR text SO I CAN NUMBER OF MIGRANTS _____

winterize when finished pulling H₂O sample NUMBER OF MIGRANTS _____

cell# 919-499-7339
DIRECTIONS FROM LILLINGTON TO THE CAMP 421 N. to Broadway Rd.; take left then right on Cox mill Rd and house 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 [Handwritten Signature]

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