

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive 3-12-23

Date 2-14-23

NAME POWELL'S NURSERY, LLC

(919) 285-5498

MAILING ADDRESS 7036 ROUSE RD
P.O. BOX OR STREET

HOLLY SPRINGS CITY/TOWN
27540 ZIP CODE

NUMBER OF WELLS 0

CHECK HERE IF COUNTY WATER

NUMBER OF SEPTIC SYSTEMS 2

OUTSIDE SPIGOT? YES NO

LOCATION OF OUTSIDE SPIGOT(S) BACK CORNER OF HOUSE / FRONT L CORNER @ 451

COMMENTS

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

381 POWELLS NURSERY LN NUMBER OF MIGRANTS 6

451 " " " NUMBER OF MIGRANTS 6

~~451~~ ADDRESS JUST CHANGED 451 NUMBER OF MIGRANTS _____

STILL POSTED AS 710 OAKRIDGE RIVER RD NUMBER OF MIGRANTS _____

DIRECTIONS FROM LILLINGTON TO THE CAMP 401 N, L CHRISTIAN LIGHT RD, E

L CORESBURY RD, R OAKRIDGE RIVER RD, 0.8 MILES 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 [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