

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 12-28-23, as required in G.S. 95-225(c) and (d), an evaluation was conducted of the drinking water supply and
(date)

wastewater system serving a migrant housing site composed of # of 0 Mobile home units, # of 1 House (s) and

Other type of housing/describe: _____ located at 103 Byrds mi. 11 Rd
(address or directions; use reverse if needed)

Bunnlevel, NC 28323 and operated by Byrd Family Farms LLC
(name of person[s]/company)

of 8136 US 4018, Bunnlevel, NC 28323
(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: County water

WATER SUPPLY

_____ Community or non-transient-non-community water system under routine surveillance of Public Water Supply Section,
(yes/no) Division of Environmental Health

_____ 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 17 people.
(maximum number)

M. H. OETH Harnett County Environmental Health
Environmental Health Specialist Health Department

12-28-23 307 W. Cornelius Harnett Blvd.
Date Address

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