

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 2-14-24, 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 \_\_\_\_\_ Mobile home units, # of 1 House (s) and

Other type of housing/describe: \_\_\_\_\_ located at 497 JACOBSON RD  
(address or directions; use reverse if needed)  
F.V. N.C. 27526 and operated by Adam Gardner  
(name of person(s)/company)  
of 1543 James Norriss RD Angus N.C. 27501  
(mailing address)

**PLEASE SUBMIT ONE REPORT FOR EACH SEPTIC SYSTEM**

This report describes well/spring 1 and sewage system 1. (Use reverse for a drawing, if needed.)  
(number) (number)

The findings of this evaluation are as follows:

**WATER SUPPLY**

NO Community or non-transient-non-community water system under routine surveillance of Public Water Supply Section,  
(yes/no) Division of Environmental Health  
YES 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 10 people.  
(maximum number)

James E. Manhan PH 2845  
Environmental Health Specialist Harnett County Environmental Health  
Health Department

2-26-24  
Date

307 W. Cornelius Harnett Blvd.  
Address

Forward copies to: Migrant Housing Operator  
Department of Labor  
Agriculture Safety & Health Bureau

Lillington, NC 27546

910-893-7547

Office Phone Number



North Carolina Division of Public Health  
Occupational and Environmental Epidemiology Branch, Epidemiology Section  
BIOLOGICAL ANALYSIS REPORT

Private well water information and recommendations

County: HARNETT Name: Adam Gardner Sample ID Number: ES246220-0041  
Location: 497 Jackson RD F.V. N.C. 27526 Reviewer: JM/KP/tpm/ods

Initial Sample  Confirmation Sample

BIOLOGICAL ANALYSIS RESULTS AND RECOMMENDATIONS FOR USES OF YOUR PRIVATE WELL WATER (These recommendations are based on biological analysis only.)

No coliform bacteria were found in your well water. Your water can be used for all purposes including drinking, cooking, washing dishes, bathing and showering.

Total coliform bacteria were detected in your water sample. Total Coliform are a group of related bacteria that are (with few exceptions) not harmful to humans. A variety of bacteria, parasites, and viruses, known as pathogens, can potentially cause health problems if humans ingest them. EPA considers total coliforms a useful indicator of other pathogens for drinking water. Total coliforms are used to determine the adequacy of water treatment and the integrity of the distribution system.

Your well water needs to be re-tested to verify that the result is accurate.

Fecal coliform bacteria were detected in the sample. **Do not use the water for drinking, cooking, washing dishes, bathing or showering.**

If the re-test shows contamination by bacteria contact your local health department for assistance. There may be a problem with the construction of the well, the groundwater source, or operation of the well. The well needs to be inspected by the local health department or a local well contractor to determine the problem with the well and to give guidance on how to correct the problem.

Your well water was tested for biological contaminants (total coliform and fecal coliform bacteria). The results were evaluated using the federal drinking water standards.

Drinking water may contain substances that can occur naturally in water or can be introduced into water from man-made sources. Total coliform bacteria are found in soil and fecal coliform bacteria are found in animal and human waste. Total coliform or fecal coliform bacteria in well water indicate that the well may have structural problems or that the well was not properly disinfected.

If you have been drinking the well water and are pregnant, nursing, have a child in the household under 5 years of age, or immunocompromised (such as an individual with AIDS, cancer, hepatitis, dialysis or surgical procedures) inform your physician of these results at your next visit.

If the contamination continues, you should investigate the possibility of drilling a new well or installing a point-of-entry disinfection unit, which can use chlorine, ultraviolet light, or ozone.

For further information, please contact your county health department or the Occupational and Environmental Epidemiology Branch at 919-707-5900.