

**HARNETT COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SECTION**

**APPLICATION FOR MIGRANT HOUSING**

Date Workers Arrive 3-1-24

Date 12-12-24

NAME J. Kent Revels (919) 427-7267  
AREA CODE & PHONE NUMBER

MAILING ADDRESS 230 Revels Rd. Fuquay Varina, NC 27526  
P.O. BOX OR STREET CITY/TOWN ZIP CODE

NUMBER OF WELLS 0

CHECK HERE IF COUNTY WATER

NUMBER OF SEPTIC SYSTEMS 2

OUTSIDE SPIGOT?  YES  NO

Front corner  
LOCATION OF OUTSIDE SPIGOT(S)

COMMENTS

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

<u>6266 Christian Light Rd. Fuquay Varina, NC 27526</u>	NUMBER OF MIGRANTS <u>11</u>
<u>4937 Christian Light Rd. Fuquay Varina, NC 27526</u>	NUMBER OF MIGRANTS <u>9</u>
_____	NUMBER OF MIGRANTS _____
_____	NUMBER OF MIGRANTS _____

DIRECTIONS FROM LILLINGTON TO THE CAMP 401 N to Christian Light Rd. TL go approx. 5 miles house on left at intersection with Smith Prince Rd. (4937)  
401 N to Christian Light Rd. TL go approx. 6 miles to yellow black house on right just past Baptist Grove Church (6266)

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 J. Kent Revels - J. Kent Revels Farms

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

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

\_\_\_\_\_  
Date