

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 1-8-25, 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 7639 Christian Light Rd  
(address or directions; use reverse if needed)

F.V., NC, 27526 and operated by Richard Secors  
(name of person(s)/company)

of 2467 Oakridge River Rd, Fuquay Var. n c Rd, 27526.  
(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:

**WATER SUPPLY**

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

NO 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 15 people.  
(maximum number)

[Signature]  
Environmental Health Specialist

**Harnett County Environmental Health**

Health Department

1-8-25  
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

1-10-25

EH 2412-0016 - oak  
EH 2412-0017 - Christian

HARNETT COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SECTION

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive 5 - Feb. 2025

Date DEC 123 / DEC

NAME Richard SEARS

(919) 427-7333

MAILING ADDRESS 2467 Oakridge River Rd 27526 Fayetteville  
P.O. BOX OR STREET CITY/TOWN ZIP CODE

NUMBER OF WELLS 1

CHECK HERE IF COUNTY WATER  YES  NO

NUMBER OF SEPTIC SYSTEMS 1

OUTSIDE SPIGOT?  YES  NO

LOCATION OF OUTSIDE SPIGOT(S) Mobile Home Well (out side)

COMMENTS

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

<u>Mobile Home</u>	<u>5 MEN</u>	NUMBER OF MIGRANTS	<u>5</u>
<u>2467 Oakridge River Road</u>		NUMBER OF MIGRANTS	
<u>7639 Christian Light Road</u>		NUMBER OF MIGRANTS	<u>15</u>
		NUMBER OF MIGRANTS	

DIRECTIONS FROM LILLINGTON TO THE CAMP Christian Light Road 7639  
HOUSE START UP Christian Road Farm 401

County WATER on this

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 Richard SEARS

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  
SEPTIC TANK  
WATER SUPPLY

APPROVED  UNAPPROVED  
 APPROVED  UNAPPROVED  
 APPROVED  UNAPPROVED

[Signature]  
Environmental Health Specialist, R.E.H.S.

1-9-25  
Date