

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 1-27-25, 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 1 Mobile home units, # of 0 House (s) and

Other type of housing/describe: \_\_\_\_\_ located at 84 Stancil Curria Ln  
(address or directions; use reverse if needed)  
Lillington NC 27546 and operated by Robert Curria  
(name of person[s]/company)  
of 883 Leaflet Church Rd, Lillington NC 27546  
(mailing address)

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

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

The findings of this evaluation are as follows:

**WATER SUPPLY**

County Water

NO 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 6 people.  
(maximum number)

Moh Ali REHS **Harnett County Environmental Health**  
Environmental Health Specialist Health Department

1-27-25 307 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

EH 2501-17

HARNETT COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SECTION

APPLICATION FOR MIGRANT HOUSING

Date Workers Arrive 4-13-25

Date 1-14-25

NAME Robert Currin

(910) 891-8200

MAILING ADDRESS 883 Leaflet Ch. Rd. Lillington  
P.O. BOX OR STREET

AREA CODE & PHONE NUMBER  
27546  
CITY/TOWN ZIP CODE

NUMBER OF WELLS \_\_\_\_\_

CHECK HERE IF COUNTY WATER

NUMBER OF SEPTIC SYSTEMS 2

OUTSIDE SPIGOT? [ ] YES [ ] NO

LOCATION OF OUTSIDE SPIGOT(S)

COMMENTS

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

84 STANCIL & CURRIN LN Lillington NUMBER OF MIGRANTS 6

106 STANCIL & CURRIN LN Lillington NUMBER OF MIGRANTS 6

NUMBER OF MIGRANTS \_\_\_\_\_

NUMBER OF MIGRANTS \_\_\_\_\_

DIRECTIONS FROM LILLINGTON TO THE CAMP Hwy 27 W go 9 mile to leaflet Ch. Rd.  
go 3/4 mile to STANCIL & CURRIN LN ON RIGHT go 300yds 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 Robert Currin

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 [ ] APPROVED [ ] UNAPPROVED  
SEPTIC TANK  APPROVED [ ] UNAPPROVED  
WATER SUPPLY (County)  APPROVED [ ] UNAPPROVED

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

1-27-25  
Date