



**Chatham County Environmental Health
Migrant Labor Camp
Wastewater System Inspection Request
80 East Street/PO Box 130, Pittsboro NC 27312
Phone: 919-542-8208**

OFFICE USE ONLY	
Record Number: EH-	____ - ____
Initials	____ / ____
Date Rec'd:	_____
Ck#	Cash ____ CC ____
Amt. Rec'd	_____
R.E.H.S.	_____

APPLICANT INFORMATION

Operator Name: _____ Phone: _____
 Mailing Address: _____
 Email: _____
 Property Owner Name (if different from Operator): _____ Phone: _____

SITE DATA

Address of Camp: _____ Parcel ID: _____
 Directions to Camp from Pittsboro: _____

Is this a new Migrant Labor Camp or existing camp? New Existing If existing, was this camp utilized last year? Yes No

Type of Housing Unit:
 Mobile Home Barracks/Dormitories Duplexes Single Family Dwelling Multiple Family Dwelling
 Other (specify) _____

Number of Occupants: _____ Projected date of Occupancy: _____ Projected date of Departure: _____

Type of Water Supply:	Type of On-Site Sewage Disposal System:	
<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Septic System	<input type="checkbox"/> Municipal (Sewer)
<input type="checkbox"/> Private Well	<input type="checkbox"/> Chemical Portable Toilets	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Privy	

If Camp is utilizing a private well water source is the well available for inspection/collection of a water sample by the Environmental Health Specialist? Yes No Is this camp ready for inspection? Yes No

If No, what is the projected date this camp will be ready for inspection: _____

I certify that I have carefully read the questions on this request and have answered them completely and truthfully. By affixing my signature to this request, I grant permission for a Chatham County Environmental Health Specialist to perform a wastewater system inspection at the above cited Migrant Labor Camp. If it is determined at any time that I have provided misleading or false information on or in support of this request I understand that my request may be denied.

Please submit a site plan of the property including house location, existing septic system and well(s), and driveway.

 Owner/Operator Signature

 Date