Hand delivered 12/17/14
Karen Clark 12/17/14

IREDELL COUNTY HEALTH DEPARTMENT

JANE MURRAY, RN BSN MS
HEALTH DIRECTOR

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

Date **12/17/14**

Re: Application for improvement permit for **Lonnie Troutman,** property site **156 Adkins Ln,** Health Department file number **203055**

Dear **Troutman Family LTDP**

The **Iredell** County Health Department, Environmental Health Division on **6/25/14** evaluated the above referenced property at the site designated on the plat/site plan that accompanied your improvement permit application. According to your application the site is to serve a **3 bedroom residence** (describe facility – example: 3 bedroom residence, 10 employee office) with a design wastewater flow of **360** gallons per day. The evaluation was done in accordance with the laws and rules governing wastewater systems in North Carolina General Statute 130A-333 including related statutes and Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rule .1900 and related rules.

Based on the criteria set out in Title 15A, Subchapter 18A, of the North Carolina Administrative Code, Rule .1940 through .1948, the evaluation indicated that the site is UNSUITABLE for a ground absorption sewage system. Therefore, your request for an improvement permit is DENIED. A copy of the site evaluation is enclosed. The site is unsuitable based on the following:

_____ Unsuitable soil topography and/or landscape position (Rule .1940)
__X__ Unsuitable soil characteristics (structure or clay mineralogy) (Rule .1941)
__X__ Unsuitable soil wetness condition (Rule .1942)
__X__ Unsuitable soil depth (Rule .1943)
_____ Presence of restrictive horizon (Rule .1944)
_____ Insufficient space for septic system and repair area (Rule .1945)
_____ Unsuitable for meeting required setbacks (Rule .1950)
__X__ Other (Rule .1946) **Site is not deemed suitable for a conventional system/approved septic system due to the above reasons.**

These severe soil or site limitations could cause premature system failure, leading to the discharge of untreated sewage on the ground surface, into surface waters, directly to ground water or inside your structure.

The site evaluation included consideration of possible site modifications, and modified, innovative, or alternative systems. However, the Health Department has determined that none of the above options will overcome the severe conditions on this site. A possible option might be a system designed to dispose of sewage to another area of suitable soil or off-site to additional property.

For the reasons set out above, the property is currently classified UNSUITABLE, and no improvement permit shall be issued for this site in accordance with Rule .1948(c).

However, the site classified as UNSUITABLE may be classified as PROVISIONALLY SUITABLE if written documentation is provided that meets the requirements of Rule .1948(d). A copy of this rule is enclosed. You may hire a consultant to assist you if you wish to try to develop a plan under which your site could be reclassified as PROVISIONALLY SUITABLE.

You have a right to an information review of this decision. You may request an informal review by the soil scientist or environmental health supervisor at the local health department. You may also request an information review by the North Carolina Department of Health and Human Services regional soil scientist. A request for informal review must be made in writing to the local health department.

You also have a right to a formal appeal of this decision. To pursue a formal appeal, you must file a petition for a contested case hearing with the Office of Administrative Hearings, 6714 Mail Service Center, Raleigh, NC 27699-6714. To get a copy of a petition form, you may write the Office of Administrative Hearings or call the office at (919) 431-3000 or from the OAH web site at http://www.ncoah.com/forms.html . The petition for a contested case hearing must be filed in accordance with the provision of North Carolina General Statutes 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B. N.C. General Statute 130A-335 (g) provides that your hearing would be held in the county where your property is located.

Please note: If you wish to pursue a formal appeal, you must file the petition form with the Office of Administrative Hearings **WITHIN 30 DAYS OF THE DATE OF THIS LETTER.** The date of this letter is Dec. 17th, 2014. Meeting the 30 day deadline is critical to your formal appeal.

If you file a petition for a contested case hearing with the Office of Administrative Hearings, you are required by law (N.C. General Statute 150B-23) to serve a copy of your petition on the Office of General Counsel, N.C. Department of Health and Human Services, 2001 Mail Service Center, Raleigh, N.C. 27699-2001.

Do not serve the petition on your local health department. Sending a copy of your petition to the local health department will not satisfy the legal requirement in N.C. General Statute 150B-23 that you send a copy to the Office of General Counsel, N. C. Department of Health and Human Services.
You may call or write the local health department if you need any additional information or assistance.

Sincerely, Justin Rhodes

Signature of Authorized Agent – DHHS
Enclosures: (Enclose copy of site evaluation)
(Copy of Rule .1948)

abeescgdaol.

IREDELL COUNTY

PO Box 788
349 North Center St.
Statesville, NC 28677

APPLICATION NUMBER

203055

Issue Date: 04/28/2014

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4703476194.000	156 ADKINS LANE, STATESVILLE, NC 28677	STATESVILLE

Owner Information	Applicant Information
Owner: TROUTMAN FAMILY LTDP RLLLP	Applicant: ABEE'S CLEARING & GRAD
Address: ,	Address: 2381 US HIGHWAY 64 WEST MOCKSVILLE, NC 27028
Phone:	Phone: 704-239-3693

Use Requested	Zone Code
MODULAR 25X76	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.796	35.00	35.00	15.00	15.00	PACL	X

Remarks:

$ PAID EFT

Minimum size of main body is at least 22 feet by 40 feet; Must have standard residential shingles; Minimum of 3/12 roof pitch; Must have continuous masonry underpinning; Must have minimum roof eave and raker projections of 6 inches; Must have a 36 square foot deck or porch at all front and rear entrances; Exterior siding must consist of vinyl or aluminum lap siding, wood, or hardboard, comparable in composition, appearance and durability to residential siding; Must remove towing apparatus; Must face front property line and be no less than 20 degrees from parallel to the front property line. Original mobile home must be removed before Certificate of Occupancy can be approved.

The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant: _____ Date: _____

Permit Number	10589	TOTAL FEES:	$ 77.25 +510.00

B5177825

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:

( ) Septic Improvement Permit ( ) New Well Permit ( ) Authorization to Construct ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) Septic System Repair

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted:

Place an (X) beside whichever is submitted if applicable

( ) Survey Plat, scaled no more than 1 inch = 60 feet

( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information:

Applicant Name: L. Troutman **Address:** _____ **Phone:** _____

Owner Name: Troutman Family LTDP **Address:** 232 Dene Ave **Phone:** _____

Property Information:

Street Address: 156 Adkins Ln

Subdivision Name: Morrow Meadows **Section/Phase:** _____ **Lot Number:** 29

Driving Directions: _____

Site Development Information: ***(check or complete ALL that apply)***

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 5
( ) Swimming Pool
( ) Other Addition/Structure: _____

(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development:

Type of Business: _____
Square Footage of Building: _____
Maximum Number of Employee: _____
Maximum Number of Seats/Beds/Other: _____

Water Supply:

( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water (✓) Other Public Water

Desired Septic System Type: ***(you may rank in order of preference)***

( ) No Preference ( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

Year existing system installed: _____

Please answer the following to the best of your ability:

( ) Yes (✓) No **Does the site contain any jurisdictional wetlands?**
( ) Yes (✓) No **Is any non-domestic sewage (i.e. industrial) to be generated?**
( ) Yes (✓) No **Is the site subject to approval by any other public agency?**

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: _____

Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

_____
DATE

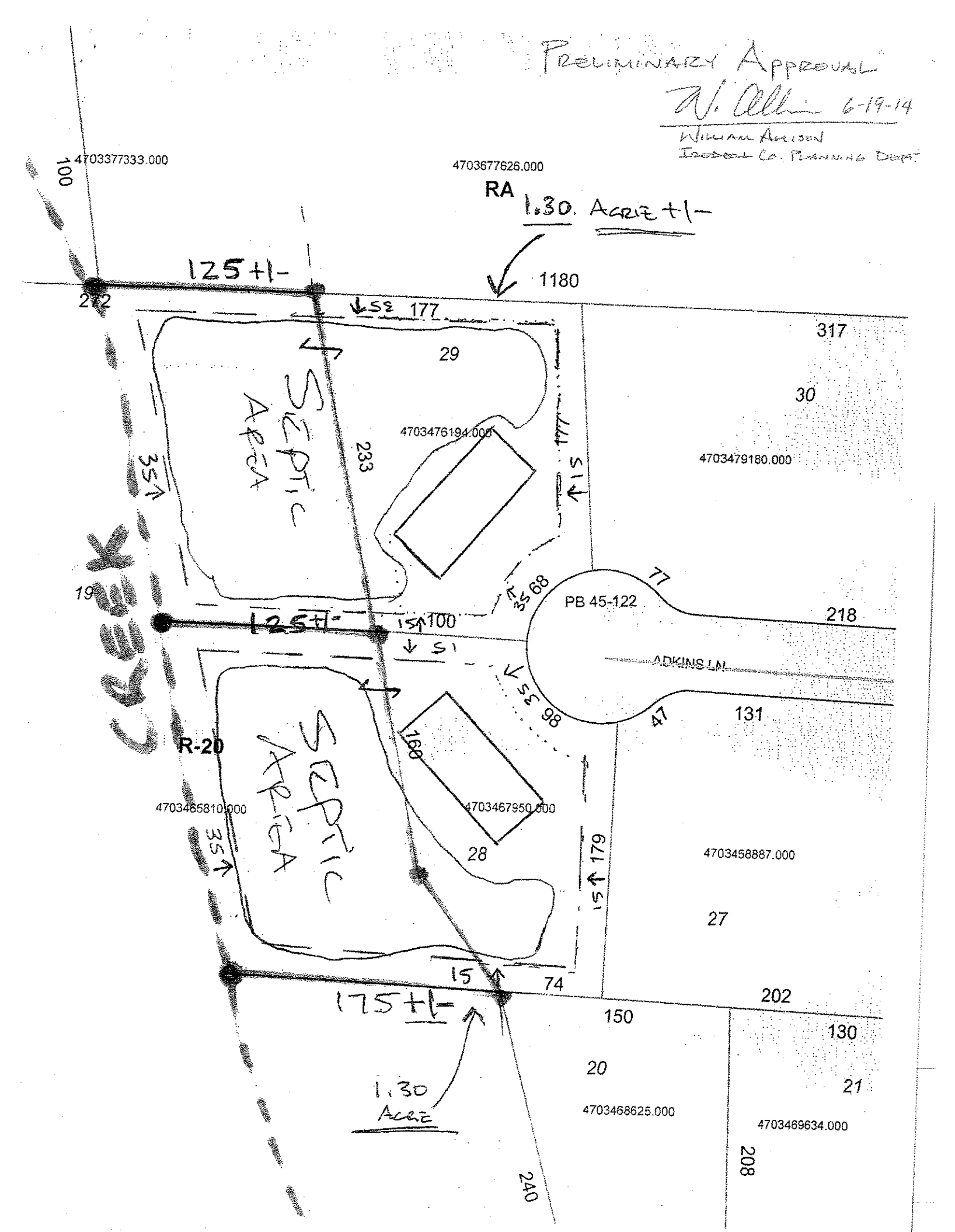
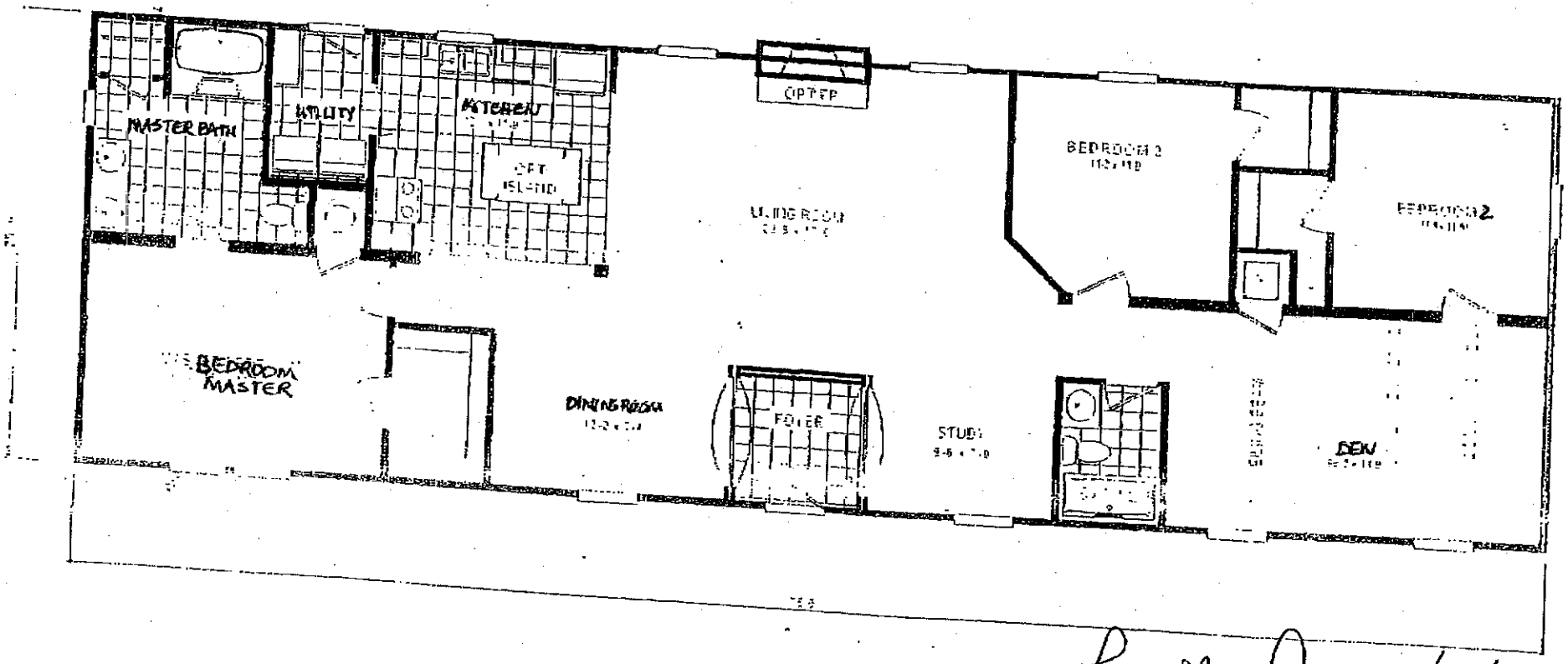
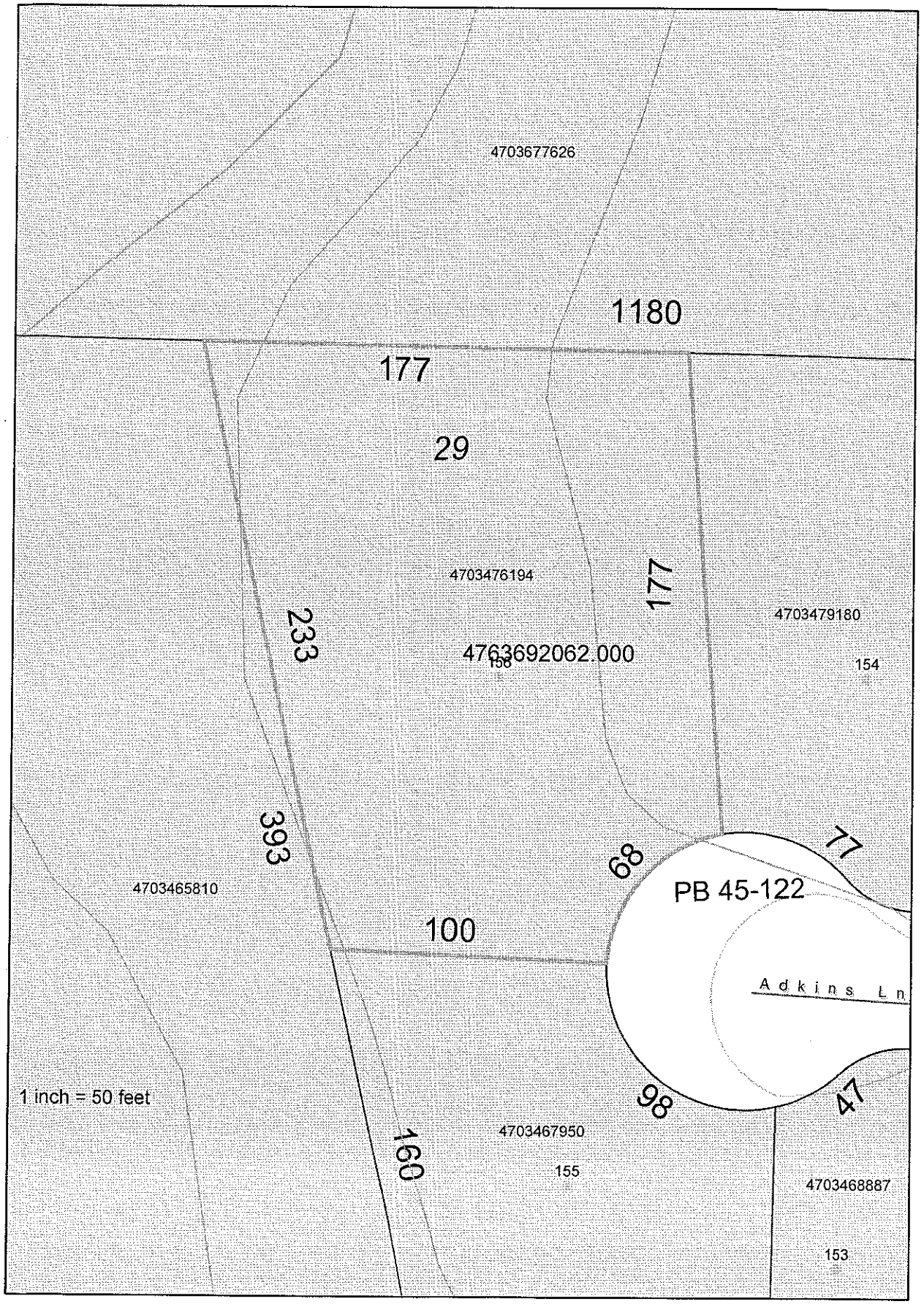

PRELIMINARY APPROVAL
W. Allison 6-19-14
WILLIAM ALLISON
IDAHO CO. PLANNING DEPT
4703377333.000
4703677626.000
RA
1.30 ACRE +/-
125+/-
1180
212
S 177
29
SEPTIC AREA
317
30
4703476194.000
233
4703479180.000
S 1
35
19
CREEK
S 68
PB 45-122
77
218
125+/-
15
100
S 1
ADKINS LN
S 98
47
131
R-20
168
4703465810.000
4703467950.000
35
28
179
15
4703458887.000
27
15
74
202
175+/-
150
130
1.30 ACRE
20
21
4703468625.000
4703469634.000
208
240

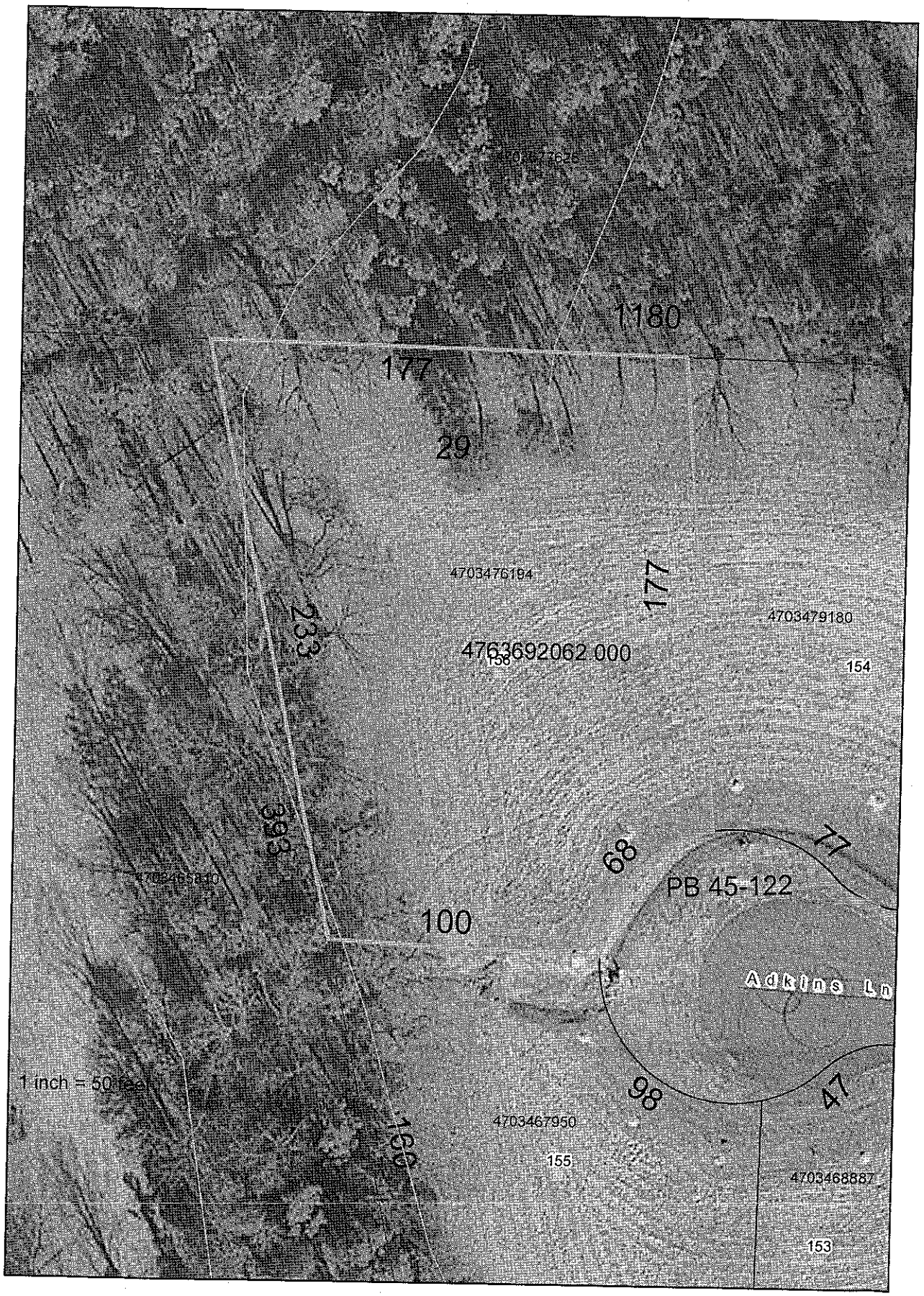
Exhibit A
4/21/14
All options as shown in display model home.
No furniture or decor
NO covered ft. porch

Deena Alee 4/24/14



Lee Nardi 4/21/14
John Nardi 4/21/14


4703677626
1180
177
29
4703476194
177
233
4763692062.000
158
4703479180
154
393
68
77
PB 45-122
4703465810
100
Adkins Ln
1 inch = 50 feet
98
47
160
4703467950
155
4703468887
153


1180
177
29
4703476184
177
4703479180
4763692062.000
154
233
68
PB 45-122
100
Adkins Ln
1 inch = 50 feet
4703467950
155
4703468887
153

DENR/DEH

ON-SITE WASTEWATER SECTION

(Pits on Existing Lot)

Lot #29

Sheet 1 of 2

PROPERTY ID #: 4703547914

COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Lonnie Trautman

ADDRESS: 732 Davie Ave.

APPLICATION DATE 4-28-14

PROPOSED FACILITY: SFD

PROPOSED DESIGN FLOW (.1949): 360 gpd

DATE EVALUATED: 6-25-14

LOCATION OF SITE: 156 Adkins Ln.

PROPERTY SIZE: .79 acres

WATER SUPPLY: • Private • (Public) • Well • Spring • Other

PROPERTY RECORDED: Yes

EVALUATION METHOD: • Auger Boring • (Pit) • Cut

TYPE OF WASTEWATER: • N/A • Sewage • Industrial Process • Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1		0-8	B SCL fr	Gr SE	20"	>48"	>48"	20"	PS 0.1 DrP
		8-28	C fi	ABK SE					
		28-48	C+Sap Li	MABK SE	10YR 7.5YR 8/2				
2		0-11	CL fr	SBK SE	23"	>54"	>54"	23"	PS 0.1 DrP
		11-23	C fi	ABK SE					
		23-54	BC fi	WABK SE	23"-54" 10YR 7/2				
3		0-26	SCL fr	ABK SE	48" Chroma 2" @ 48"	>48"	>48"	48"	PS 0.2
		25-38	C fi	ABK SE					
		38-48	BC fi/fr	ABK SE					
4		0-8	SCL fr	Gr SE	24" EXP 28" Chroma 2's	>48"	>48"	24"	PS 0.1 DrP
		8-28	C fi	ABK SE/E					
		28-48	BC fi/fr	ABK SE/E					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): N/A

SITE CLASSIFICATION (.1948):

EVALUATED BY: Justin Mendenhall

OTHER(S) PRESENT: Heath Snow, Adrian Pruett

COMMENTS: (PS) IP on Lot would be Limited to 1st DrP

8/14

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Pits on proposed expansion to Lot

PROPERTY ID #: 4703478194
COUNTY: ~~Iredell~~

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM**
(Complete all fields in full)

OWNER: Lonnie Trautman Lot 29. APPLICATION DATE 4-28-14
ADDRESS: 232 Davie Ave. DATE EVALUATED: 6-25-14
PROPOSED FACILITY: SFD PROPOSED DESIGN FLOW (.1949): 360 gpd PROPERTY SIZE: .79 acres
LOCATION OF SITE: 156 Adkins Ln PROPERTY RECORDED: Yes
WATER SUPPLY: ☐ Private ☐ ~~Public~~ ☐ Well ☐ Spring ☐ Other N/A
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☐ ~~Sewage~~ ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1		0-14 14-28	C Chroma 2 @ 14"		14"	44	28	14"	US
2		0-8 8-48	SL Gr Fr C Chroma 2 @ 20"		20"	20"	48"	20"	PS 0.1 Dr
3		6-16 16-44	SCL Gr C Chroma 2's @ 30"		30"	44"	44"	30"	PS 0.2
4		0-18 18-42	SC Gr Fr C SBK Chroma 2's @ 14"		14"	42"	42"	14"	US

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948):
EVALUATED BY: Justin Henderson
OTHER(S) PRESENT: Heath Snow

COMMENTS: