4703.57.1170

IREDELL COUNTY HEALTH DEPARTMENT

JANE MURRAY, RN BSN MS
HEALTH DIRECTOR

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

Date 08/07/2014

Re: Application for improvement permit for 140 Adkins Lane, Statesville, NC 28677 Iredell County Health Department file number 204422

Dear George S. Dulin,

The Iredell County Health Department, Environmental Health Division on (08/04/2014) 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 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:

__X__ Unsuitable soil topography and/or landscape position (Rule .1940)
_____ 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)
__X__ Insufficient space for septic system and repair area (Rule .1945)
_____ Unsuitable for meeting required setbacks (Rule .1950)
_____ Other (Rule .1946) _____

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 August 7th 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,

Robert H. Snow

Robert H. Snow

Enclosures:
(Copy of Rule .1948)

20422 7/25 863295 00.00

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application for IMPROVEMENT PERMIT , AUTHORIZATION TO CONSTRUCT, or EXISTING SYSTEM INSPECTION

$ PAID

(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)

1. APPLICATION FOR: ___ Improvement Permit ___ Authorization To Construct ✓ BOTH ___ Existing System Inspection

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application

The following optional attachments may also be submitted: *Place check ( ) 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

3. Applicant Information:

George S. Dulin	136 Mott Rd. Mooresville	704-787-9032	704-239-3693 (Deina)
Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Krautman Family LTDP RLLP	232 Davie Ave Statesville		
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. Property Information:

140 Adkins Ln.	Morrow Meadows	Lot 30
Street Address	Subdivision Name	Section/Phase and Lot Number

Driving Directions: (R) on G Bagnal - (L) on 70 W - (R) on N. Shady Rest Rd - (R) on Adkins Ln - property on (R)

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System
( ) Other ___

Maximum Number of Bedrooms 3
Maximum Number of Occupants 5
If Expansion, Current Number of Bedrooms ___

(✓) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non- Residential Site Development:
Type of Business ___
Square Footage of Building ___
Maximum Number of Employees ✓
Maximum Number of Seats ___

6. Proposed Water Supply:

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

7. Desired Septic System Type: *(You may rank in order of preference, if any)*

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other ___ (✓) No Preference

8. 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. industry) 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.

9. Signature: Deina Alee
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

7/1/14
DATE

IREDELL COUNTY HEATLH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- ✓ **Property Line measurements are clearly identified…**
- ✓ **All proposed structures are indicated…**
  SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
- ✓ **Front and side setbacks from property line…**
- ✓ **Preferred driveway location and configuration, preferred well location…**
- ✓ **Area you prefer your septic system to be placed…**
- ✓ **North arrow, or other sufficient indicator of direction…**

Circle N/A on the following if appropriate:

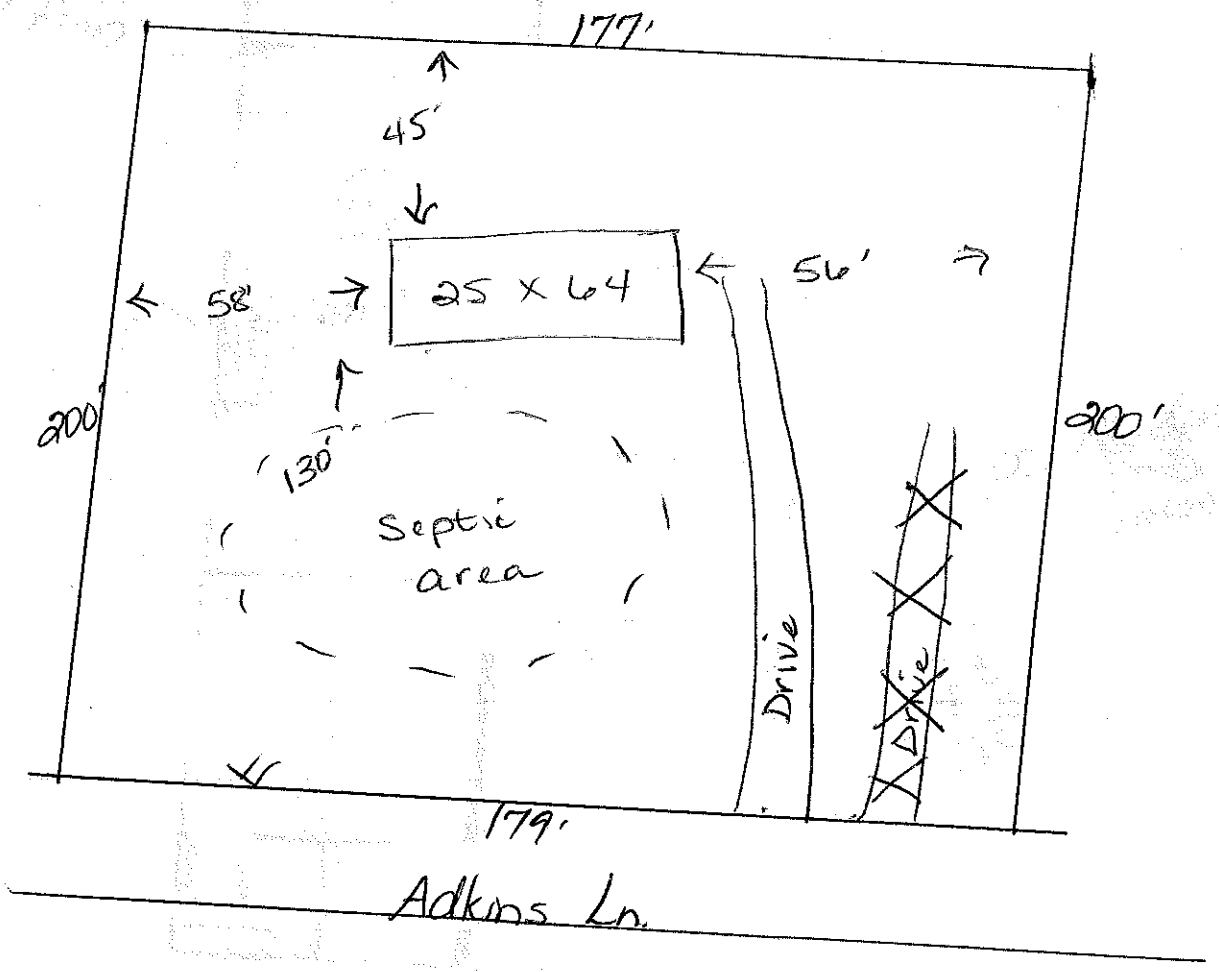
- ____ **Location of septic systems and wells within 100' of your property…** (N/A)
- ____ **Location of easements and rights of ways on your property…** (N/A)
- ____ **Location of any designated wetlands on the property…** (N/A)

Signature: Dena Abee

REQUIRED **property owner or owner's legal representative signature.**

7/1/14
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN



IREDELL COUNTY

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

APPLICATION NUMBER
204422
Issue Date: 07/01/2014

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4703571170.000	140 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 HOME	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.818	35.00	35.00	15.00	15.00	PACL	X

Remarks:

500.00 EH
77.25 ZO
577.25

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: Deena A Cree Date: 7/1/14

Permit Number	16436	TOTAL FEES:	$ 77.25

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

Lot 34

Sheet 1 of 2
PROPERTY ID #: 4705571174
COUNTY: Iredell

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

OWNER: George Dulin
ADDRESS: 1400 Adkins Ln
PROPOSED FACILITY: SFD
LOCATION OF SITE: 70 to Shady Rest to Adkins
APPLICATION DATE: 7/11/14
DATE EVALUATED: 08/04/14
PROPOSED DESIGN FLOW (.1949): 360
PROPERTY SIZE:
PROPERTY RECORDED:
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	HS 4%	0-30	Fill	—	N/A	N/A	N/A	N/A	UNS
		30-62	SC fi	SBK SE					
2	HS 4%	0-62	Fill	—	N/A	N/A	N/A	N/A	UNS
3	HS 12%	0-11	SCL fr	gr SE	Chroma 2's 43"	PS	N/A	N/A	PS .2
		11-30	C fi	SBK SE					
		30-60	BL fi/l	WABK SE					
			Chroma 2's 43"						
4	LSS 9%	0-8	SCL fr	gr SE	Chroma 2's 30"	PS	N/A	N/A	PS .2
		8-20	SC fi	SBK SE					
		20-65	BC fi/l	WABK SE					
			Chroma 2's 30"						

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

OTHER FACTORS (.1946): UNS
SITE CLASSIFICATION (.1948): UNS
EVALUATED BY: H. Snow
OTHER(S) PRESENT: J. Henderson

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

Lot 31

PROPERTY ID #: 4702571120
DATE OF EVALUATION: 08/04/14
COUNTY: Iredell

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
5	HS 14%	0-40	Fill	—	N/A	VNS	N/A	N/A	VNS
		40-65	BC fl/l	WABK SE					
6	HS 10%	0-13	BSCL SBK	Fr Mod SE	Chroma 2's @ 39"	+64"	+64"	39"	PS 0.2
		13-33	C SBK	Fr Mod SE					
		33-64	BCl YIB Mottled WABK	Fr Mod SE					
7	HS 9%	0-10	BSCL SBK	Fr Mod SE	Chroma 2's @ 24"	+64"	+64"	39"	PS Drip
		10-24	C ABK	Fr Mod SE					
		24-64	BCL WABK	Fr Mod					
			Chroma 2's 24-64"						

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
D (Drainage Way)						CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			**MOIST**	**WET**
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality. .

NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).

