4705.98.2681

IREDELL COUNTY HEALTH DEPARTMENT

JANE MURRAY, RN BSN MS
HEALTH DIRECTOR

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

Re: Application for improvement permit for **Clayton Homes,** property site **Village Point Subdivision Lots 42 &43,** Health Department file number **204120** 218 Village Point, Stat. Date **7/11/14**

Dear **Clayton Homes** (Owner or Owner's Agent)

The **Iredell** County Health Department, Environmental Health Division on **7/10/14** 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:

__X__ Unsuitable soil topography and/or landscape position (Rule .1940)
____ Unsuitable soil characteristics (structure or clay mineralogy) (Rule .1941)
____ Unsuitable soil wetness condition (Rule .1942)
____ 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 XXX XX, XXXX. 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 Henderson

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

IREDELL COUNTY

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

APPLICATION NUMBER
204120
Issue Date: 06/17/2014

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4705982681.000	218 VILLAGE POINT DRIVE, STATESVILLE, NC 28625	STATESVILLE

Owner Information	Applicant Information
Owner: HAYDAY INVESTMENTS LLC	Applicant: ABEE'S CLEARING & GRAD
Address: 161 WEST DODSON MILL RD PILOT MOUNTAIN, NC 27041	Address: 2381 US HIGHWAY 64 WEST MOCKSVILLE, NC 27028
Phone:	Phone: 704-239-3693

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.530					NOT	X

Remarks:

TRANSFERRED FROM PERMIT #181064
SWITCHING FROM LOT 10 TO LOT 42 & 43
MH

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	15106	TOTAL FEES:	$ 77.25

204120

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

(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: ___ Survey Plat, Scaled no more than 1 Inch = 60 Feet
Place check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Deena

Clayton Homes #12	2024 Northside Dr. Statesville		704-239-3693	
Applicant Name	Mailing Address		Home Phone #	Alternate Phone #
Holiday Investments LLC	1161 W Dodson Mill Rd Pilot Mtn.			
Owner Name	Mailing Address		Home Phone #	Alternate Phone #

4. Property Information:

143 & 208	Village Point	Lots 42 & 43 (Going to combine)
Street Address	Subdivision Name	Section/Phase and Lot Number

Driving Directions: 90, (L) on Village Point - properties on corner of Village Point & Heartwood 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:

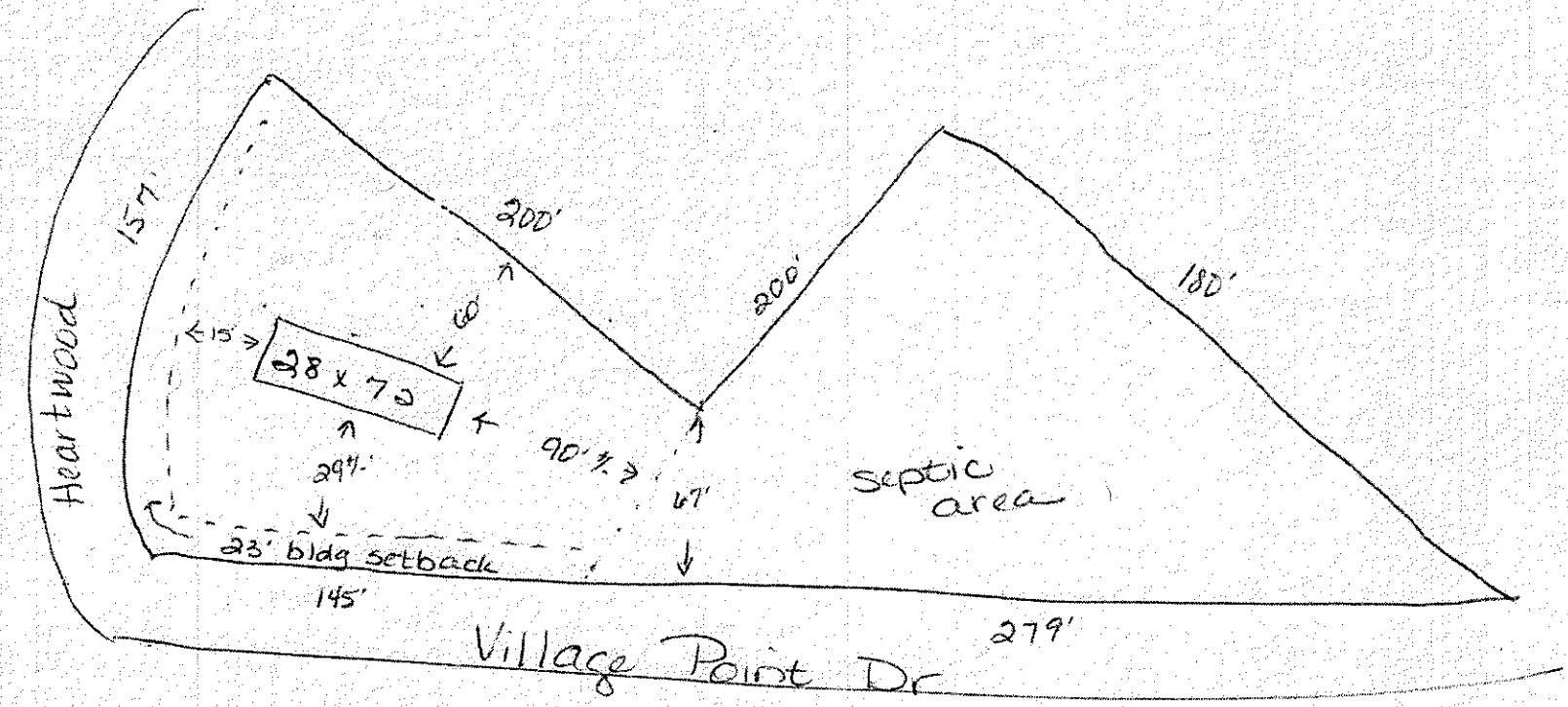
( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes (✓) No Is the site subject to approval by any other public agency?

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.

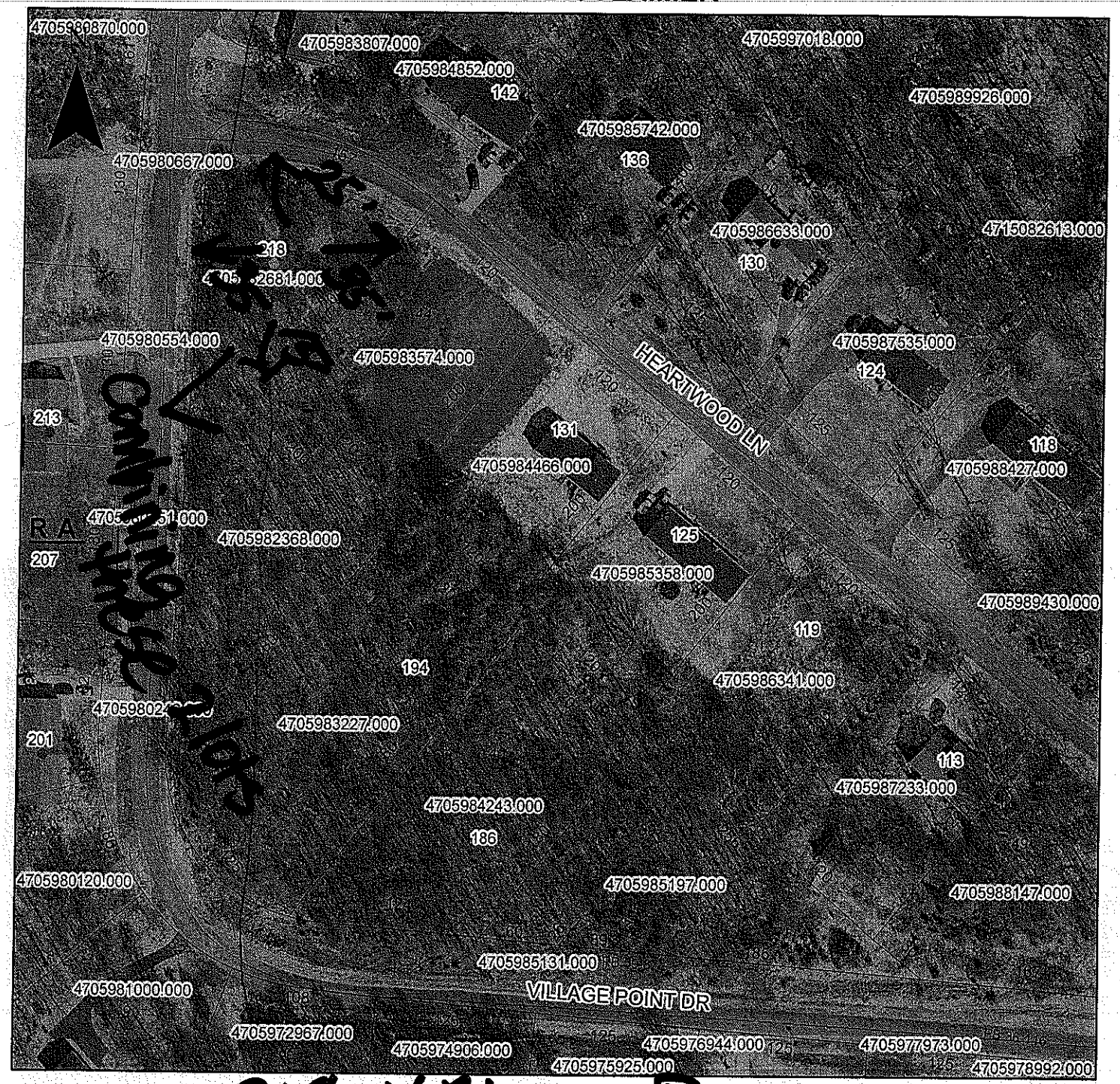
9. Signature: Deena Alves
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

6/11/14
DATE

Lots 42/43
Village Point New 7/8/14



ZONING DISCLAIMER



Property Address 218 Village Point

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. Applicant further acknowledges that the 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

06/17/2014 12:45 3364925104 ABEE'S GRADING #2527 P.008

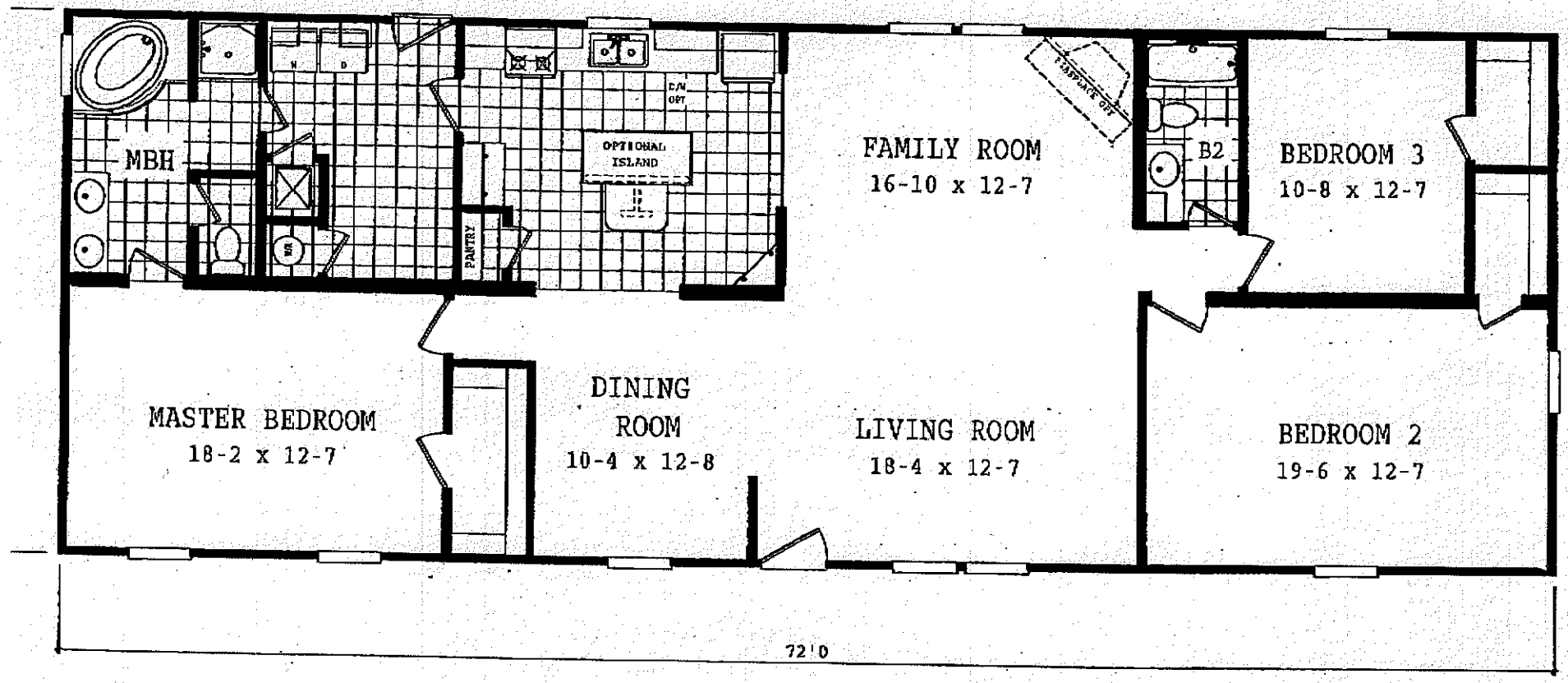
MODEL 1004 — 72x28 – 1920 SQ. FT. 3 BEDROOM – 2 BATH

This home also available as a modular # 2714

Acknowledgement Of Plans Submittal ONLY!

Date 4/11/14

Date



DENR/DEH

ON-SITE WASTEWATER SECTION

Sheet 1 of 1
PROPERTY ID #: 1765787681
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Clayton Homes
ADDRESS: 2626 Northside Dr.
PROPOSED FACILITY: 3 BR SFD
PROPOSED DESIGN FLOW (.1949): 360 gpd
LOCATION OF SITE: Lots 42 + 43 Village Point
WATER SUPPLY: • Private • Public • Well • Spring • Other N/A
EVALUATION METHOD: • Auger Boring • Pit • Cut
TYPE OF WASTEWATER: • Sewage • Industrial Process • Mixed

APPLICATION DATE 6-11-14
DATE EVALUATED: 7-10-14
PROPERTY SIZE: 0.53 acres
PROPERTY RECORDED: YES

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	4% slight NS	0-18	C SBK	F. SBK MoSE					PS 0.25
		18-48	CL wSBK	F. MoSE	48"	48"	48"	48"	
2	8% slight NS	0-11	CL SBK	F. MoSE					PS 0.25
		11-48	C SBK	F. SBK MoSE	48"	48"	48"	48"	
3	6% slight NS	0-21	C SBK	F. SBK MoSE					PS 0.25
		21-48	BC CL wSBK	F. MoSE	48"	48"	48"	48"	
4									

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

OTHER FACTORS (.1946): N/A
SITE CLASSIFICATION (.1948): US
EVALUATED BY: Kurt Henderson
OTHER(S) PRESENT: N/A

COMMENTS: No room for repair area due to topography + space.

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	NEXP (Non-expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
D (Drainage Way)					EXP (Expansive)	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)

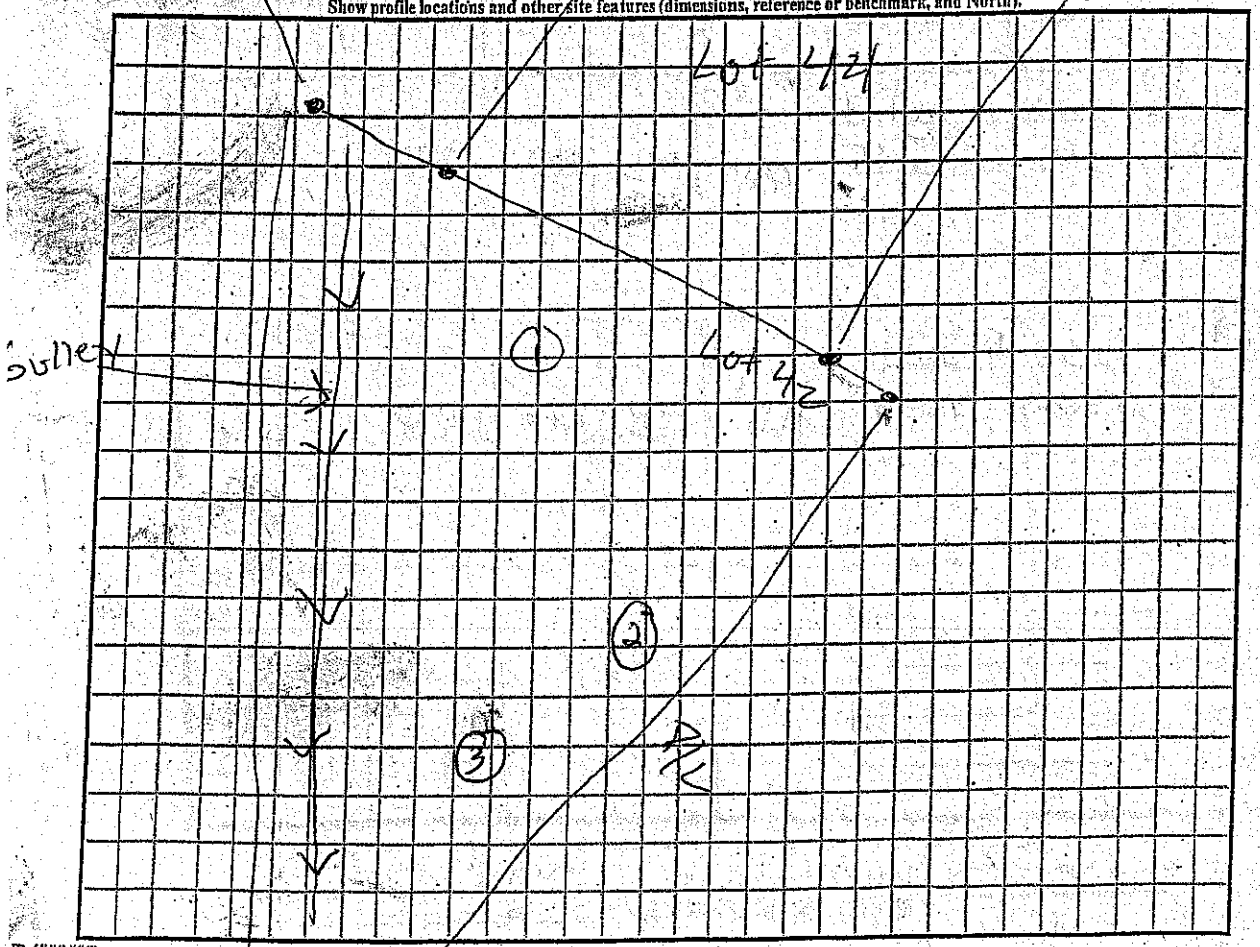
SOIL WETNESS Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation

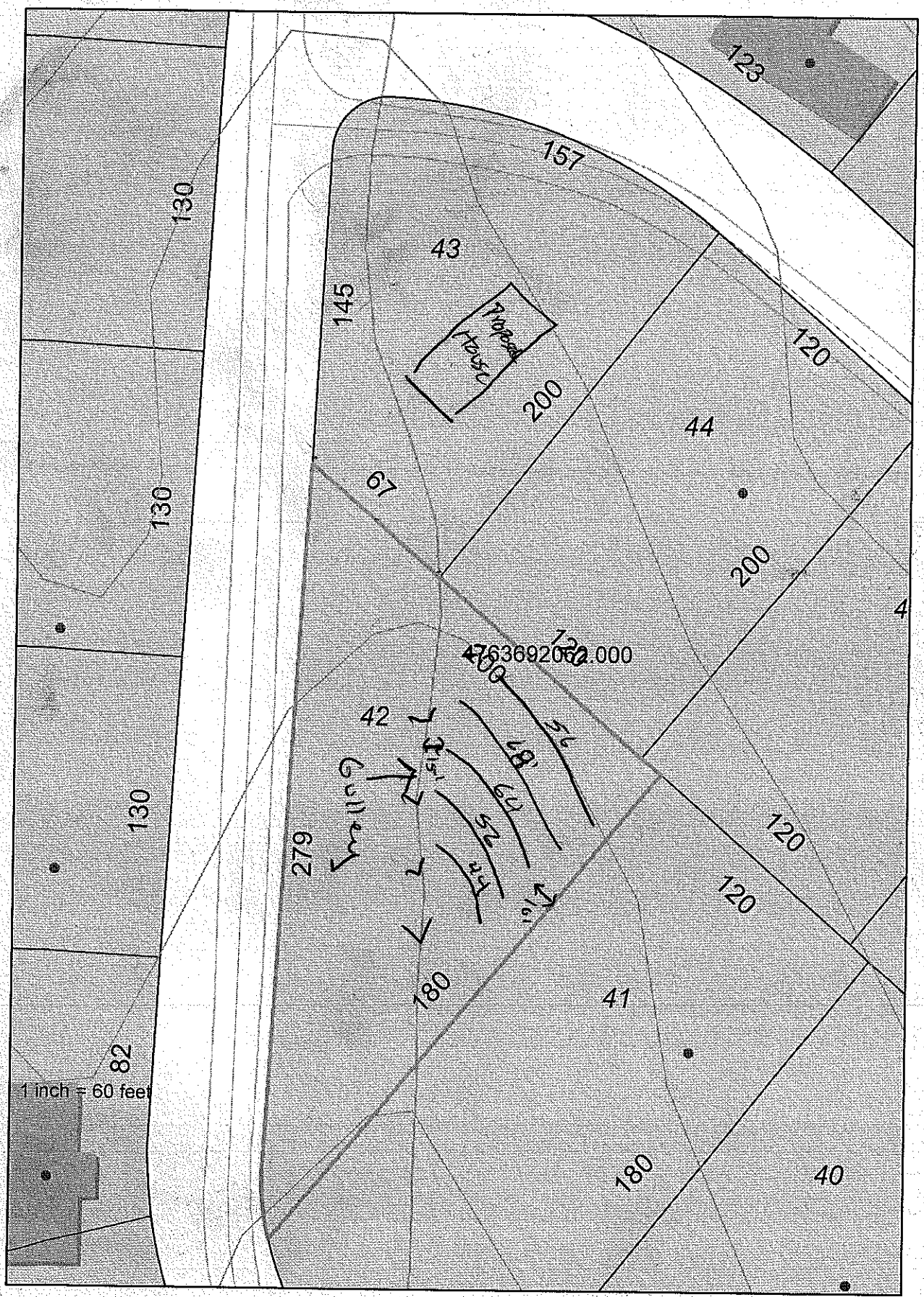
CLASSIFICATION S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft²

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




123
157
130
43
145
Proposed House
120
200
44
69
130
200
4
130
42
279
Existing Cabin
120
120
180
41
82
1 inch = 60 feet
180
40