NoV- 4722096421

IREDELL COUNTY HEALTH DEPARTMENT
BRADY FREEMAN, MPA REHS
HEALTH DIRECTOR

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

NOTICE OF VIOLATION
ONSITE WASTEWATER SYSTEM

☐ Certified Mail (Return Receipt) ☐ First Class Mail ☒ Email

Owner: Diane Elledge
Mailing Address: 1029 Old Mountain Rd Statesville, NC 28677
Phone Number: 704-880-1453 Email: N/A
Occupant: Owner
Location: 1029 Old Mountain Rd Statesville, NC 28677
☒ Residence ☐ Business ☐ Other

Dear Diane Elledge

You are hereby notified that you are violating the Rules adopted by the North Carolina Commission for Public Health and/or the Laws enacted at General Statutes 130A-333 to 345 by controlling a residence, place of business, or place of public assembly which is not provided with an approved onsite wastewater system. Your wastewater system is not in compliance with applicable laws and rules.

On 8/7/2025an inspection of the wastewater system by the Iredell County Health Department
Date
indicated the following violations:

Violation(s)	**Law or Rule Citation(s)**
Septic system crosses property line	15A NCAC 18E .0301(b)(4)

You are hereby ordered to bring your on-site wastewater system into compliance by completing the following:

☐ Install/repair wastewater system. You must obtain a repair permit from the local health department or private permitting professional, i.e., Authorized Onsite Wastewater Evaluator (AOWE) or Professional Engineer (PE), prior to repairing your system.
☐ Eliminate wastewater discharge and connect to an approved wastewater system.
☒ Other Repairs Obtain Septic Easement - system crosses property line.
☐ Perform Maintenance _____

If the wastewater violation is not brought into compliance by 9/15/2025 appropriate legal action may
Date
be taken. Failure to comply with the laws, rules, and this notice may subject you to the following legal remedies: Injunction Relief [G.S. 130A-18], Administrative Penalties [G.S. 130A-22(c)], Suspension or Revocation of Permits [G.S. 130A-23], and Criminal Penalties [G.S. 130A-25].

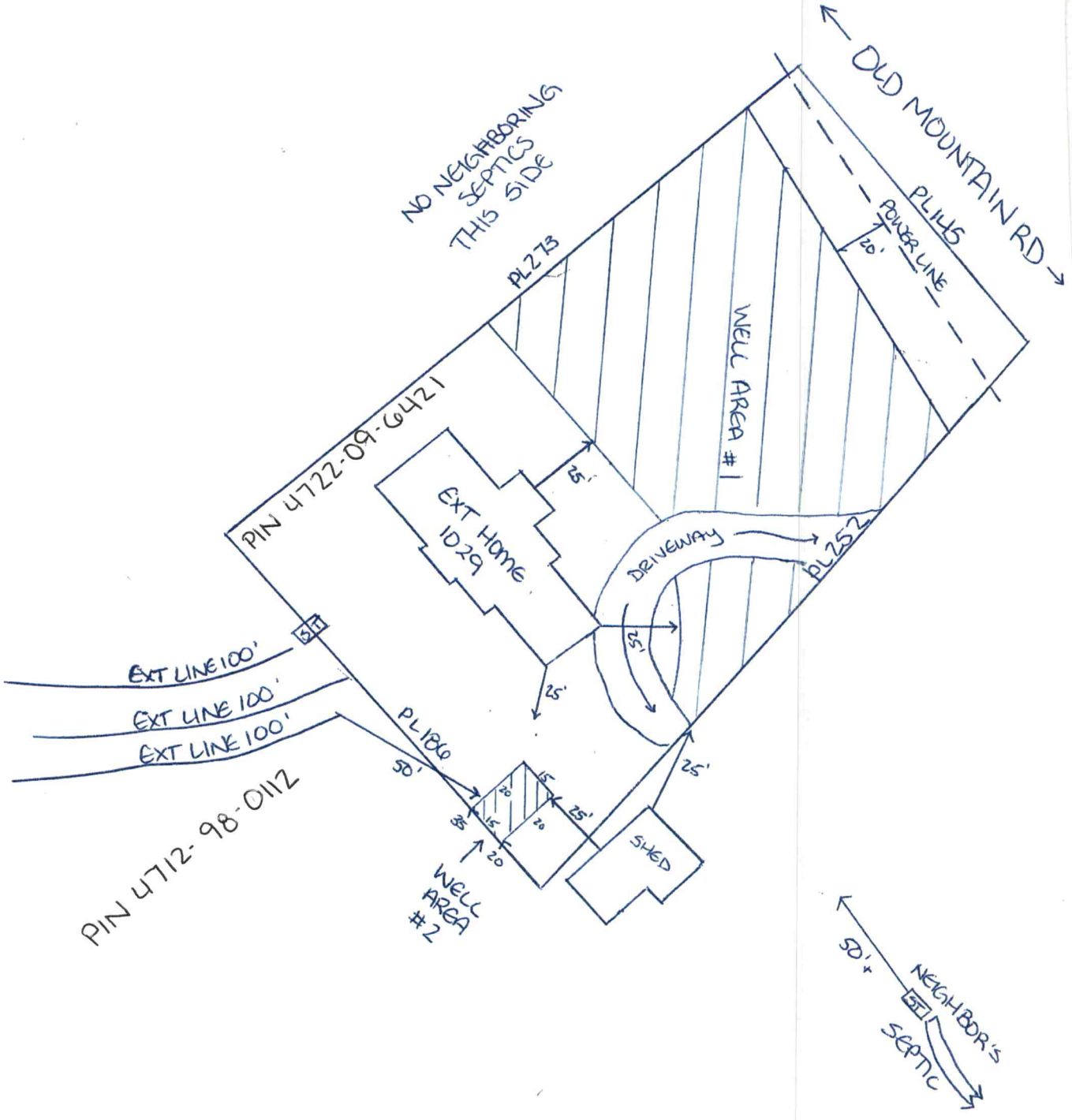
You may contact our office at 704-878-5305(phone) or sarah.williams@iredellcountync.gov(email).

Notice Issued 8/11/2025 Signed Sarah Williams
Date *Authorized Agent*

Compliance _____ Signed _____
Date *Authorized Agent*

1029 OLD MOUNTAIN RD

SCALE 1"=50'



SW
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IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
349 North Center Street

CERTIFIED MAIL®

9589 0710 5270 3112 4475 86

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- ☐ Adult Signature Required $ _____
- ☐ Adult Signature Restricted Delivery $ _____

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$ .78

Total Postage and Fees
$ 6.08

Postmark Here

nRd
3677

Sent To Diane Elledge
Street and Apt. No., or PO Box No. 1029 Old Mountain Road
City, State, ZIP+4® Statesville, NC 28677

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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