

TO: Glenn Hoppin
 FAX to 919-733-6592

PRINTED: 03/16/2015
 FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL011193	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 02/11/2015
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NAME OF PROVIDER OR SUPPLIER EVERGREEN LIVING HOME #1	STREET ADDRESS, CITY, STATE, ZIP CODE 101 COUNTRY TIME LANE LEICESTER, NC 28748
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
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(C 000) Initial Comments
 Report by Glenn Hoppin

A Biennial Follow-up Survey was conducted on February 11, 2015 starting at 9:00AM and ending at 9:45AM. Not all of the previously cited deficiencies were corrected. Therefore, further action is required.

The remaining deficiencies that were observed are as follows:

(C 115) Construction-Consult Local BI for Permits

SECTION .0300 - THE BUILDING
 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION

(l) The local code enforcement official shall be consulted before starting any construction or renovations for information on required permits and construction requirements.

This Rule is not met as evidenced by:
 On the rear of the facility an outside utility building has been converted into an assembly hall. The building is being heated with 3 kerosene heaters and 5 gallons of kerosene was being stored in the building. The building has no smoke detectors or fire extinguishers. Also several dropcords were observed in the facility to power lights and the sound system. The utility building is less than 8 feet from the facility. The entry ramps into the building do not meet family care home rules or the North Carolina State Building Code. Cease using the building immediately and consult with the local building official, the local fire official and the DHSR Construction section to determine what changes and improvements will be required to use the building as an assembly hall. Obtain all necessary permits and submit copies of all

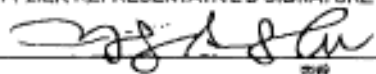
(C 000)

(C 115)

CONSTRUCTION SECTION
 MAR 30 2015
 RECEIVED

Building had permit as a storage building

3/17/15

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Administrator	(X6) DATE 3/27/15
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{C 115}	Continued From page 1 permits, approvals, invoices, and any other supporting documentation to the DHSR Construction Section. 02/11/2015-GH- At the time of our survey a walk thru was conducted through the utility building, at this time we discovered that the kerosene heaters and kerosene storage cannisters had been removed, the issue with supports; integrity of the electrical wiring wall and ceiling finishes and building classification are still in question, we are awaiting a ruling from the local Building Official that this dwelling meets the minimum requirements as an Assembly Occupancy as classified by the North Carolina State Building Code!	{C 115}		

DO NOT REMOVE FROM JOB SITE

B BLD 15 - 00793

BUNCOMBE COUNTY - INSPECTION REQUEST FORM

Form IR112461

Owner Name: LEE Phone Number:

Address of Inspection: 101 Country Time Ln

Contractor: MR LEE Phone Number: 776 1030

Directions:

Date Inspected: 03-17-15

Inspector: KRP

Inspection Type

- Footing
- Fireplace/ firebox
- Plumbing Under
- Gas Piping
- Saw Service
- Foundation
- Insulation
- Rough Plumbing
- Rough Mechanical
- Rough Electrical
- Concrete Slab
- Building Final
- Plumbing Final
- Mechanical Final
- Electrical Final
- Framing

Inspection Results: Approved Disapproved Is this a Reinspection? Yes No

Comments: The Building in question has been cleaned out of "junk" settings and in my opinion is now a storage building as permitted. I do recommend regular follow up steps to ensure this does not change.