BLDR-2025-83329

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 x3456 Mooresville Office (704) 660-3625

SEPTIC: IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM

PERMIT # OSWP 2025-83749

PIN # 3782 – 73 – 9046

APPLICANT/OWNER: Soil & Forestry Services LLC APPLICANT ADDRESS: 126 3rd Creek Rd, Statesville, NC 28677

SITE ADDRESS: 123 Pier Dr, Statesville, NC 28677 PHONE: ALT. PHONE:

SITE DIRECTIONS: S Sharon School Rd -> R 70E -> R Bluewater Dr -> L Pier Dr -> lot on R SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Riveroaks Landings SECTION: 1 LOT # 30 LOT AREA: 0.581 DESIGN FLOW: 360 gpd L.T.A.R.(Initial): 0.3 L.T.A.R (Repair): 0.1

Septic Tank 1000 (gal) STB Date

Pump Tank (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 4 Linear Ft: 200

Trench Width 24 *Max. Trench Depth(Initial) 42 *Max. Trench Depth(Repair) 32 Gravel Depth n/a

* Measured on the downhill side of the trench

☑ New System ☐ Repair ☐ Expansion System Type: I II ☒ III IV V VI

System Description: VPPBPS - IIIb

Repair System Description: LPHPPBPS - IVa

Maintenance Agreement Required: ☐ YES ☑ NO

☑ GRAVITY ☐ PRESSURE

Effluent Standard: ☑ DSE ☐ HSE ☐ TS-I ☐ TS-II ☐ RCW ☐ NSF/ANSI 40

Usable Depth to LC (Initial): 70

☑ Residence No. Bedrooms 3

☐ Business No. Persons 6

☐ Other No. Employees

☐ Slab ☑ Crawl Space

☐ Basement w/plumbing ☐ Basement w/o plumbing

Usable Depth to LC (Repair): 50 *Limiting Condition*

Water Supply

☐ Private

☑ Public

☐ Community

Comments / Conditions: Do not pave, grade, drive, park, or bury utilties in drainfield.
Divert all drainage from septic area.

INITIAL SITE SKETCH

Improvement permit issued pursuant to: G.S. 130A-335(a2), (a3) & (a4) using signed & sealed LLS/LG Evaluation attached, from:

Ashley Rollans

LSS# 1231

Construction authorization issued pursuant to: G.S. 130A-335(a2) & (a5)

AOWE# 10027E

Please note - edits made in Bluebeam may not be visible if viewed on a cellphone! Use computer to ensure all comments & notes can be seen.

AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

Lines 2 → GPS'd on layer
- SH 11/20/25
need to check speed - levelers

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

☐ **IMPROVEMENT PERMIT** ***with plat*** *valid without expiration.* ☑ **IMPROVEMENT PERMIT** ***with site plan*** *valid for 60 mos.* ☑ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Online Signature Date:

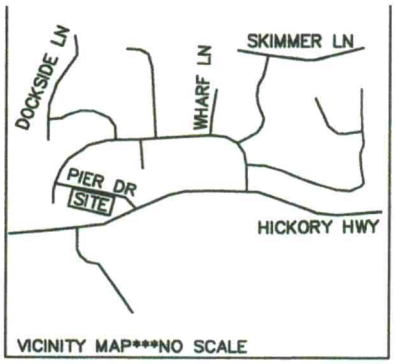
IMPROVEMENT PERMIT by: D. Wieberg Date: 9/25/25

AUTHORIZATION TO CONSTRUCT by: D. Wieberg Date: 9/25/25

Installed by: Chris Frye

OPERATION PERMIT by: Date: 11/25/25

Existing System Inspected by: Date:



PIN 3782726923
PROGRESO LLC
2154/1650

N76°20'33"W
110.00'

LOT 30
0.581 AC

35' REAR
63.14'
73.19
10 R 50'
9 B 50'
8 Y 50'
7 0 50'
P1
15' SIDE
15' SIDE
D-BOX
P3
IS
16'
28'
15'
P2
POOL
14'
10'
104.0'
230.00'
S13°39'27"W
230.00'
N13°39'27"E
23.0'
16.0'
102.0'
PROPOSED HOUSE
102.0'
P5
16.0'
P4
53.0'
59.0'
35' FRONT
1 R 27'
2 O 41'
3 Y 53'
4 B 32'
5 P 30'
6 R 25'
REPAIR AREA
R/W
110.00'
R/W
S76°20'33"E

LOT 29
CHARLES BLALOCK
2270/1697

PB.53 PG.35

LOT 31
ROBERT STAMBAUGH
2912/1408

CONC. CALC.
DRIVE = 1,420 SF.
WALK = 268 SF.

PIER DRIVE
(45' PRIVATE R/W)

R/W

LEGEND

- E.I.P. = EXISTING IRON FOUND
- I.P.S. = #4 REBAR SET
- C.P. = COMPUTED POINT
- R/W = RIGHT-OF-WAY
- = POWER POLE
- Ⓢ = MANHOLE RIM
- ☼ = LIGHT POLE

0' 20' 40' 100'

SCALE IN FEET

NOTES

1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
4) UNDERGROUND POWER
5) THIS PROPERTY LIES WITHIN FEMA FLOOD AREA "X"
6) SETBACKS SHOWN PER PLAT (PLAT BOOK 53 PAGE 35)
   VERIFY SETBACKS PRIOR TO ANY CONSTRUCTION
7) PROPERTY ZONED: IREDELL "RA"

Permit/File #: OSWP-2025-83749

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
MARK BENTON • Deputy Secretary for Health
SUSAN KANSAGRA • Assistant Secretary for Public Health
Division of Public Health

Submittal Includes; [X] (a2) Improvement Permit [X] (a2) Construction Authorization [ ] Fee $

IMPROVEMENT PERMIT FOR G.S. 130A-335(a2)

County: Iredell

PIN/Lot Identifier: 3782739046

Issued To: Not Just Arm Candy LLC

Property Location: 123 Pier Dr, Stateville NC 28677

Subdivision (if applicable): River Oaks Landings Lot#: 30 Block: Section:

LSS Report Provided: Yes [X] No [ ]

If yes, name and license number of LSS: Samuel Ashley Rollans #1231

New [X] Expansion [ ] System Relocation [ ] Change of Use [ ]

Facility Type: Residential

Number of bedrooms: 3 Number of Occupants: 6 Other:

Design Wastewater Strength: [X] Domestic [ ] High Strength [ ] Industrial Process Wastewater

Proposed Design Daily Flow: 360 GPD Proposed LTAR (Initial): 0.3 Proposed LTAR (Repair): 0.3

Proposed Wastewater System Type*: IIIe VPPBPS 6'-GRAVITY (Initial) Pump Required: [ ] Yes [X] No [ ] May be required

Proposed Wastewater System Type*: Iva HPPBPS 6'- LPP (Repair) Pump Required: [X] Yes [ ] No [ ] May be required

**Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII*

Effluent Standard: [X] DSE [ ] HSE [ ] NSF/ANSI 40 [ ] TS-I [ ] TS-II [ ] RCW

Saprolite System (Initial): [ ] Yes [X] No Saprolite System (Repair): [ ] Yes [X] No

Fill System (Initial): [ ] Yes [X] No If yes, specify: [ ] New [ ] Existing (when adding more than 6 inches of fill to system area provide a fill plan)

Fill System (Repair): [ ] Yes [X] No If yes, specify: [ ] New [ ] Existing (when adding more than 6 inches of fill to system area provide a fill plan)

Usable Depth to LC (Initial)*: 70 Usable Depth to LC (Repair)*: 50 ** Limiting Condition*

Max. Trench Depth (Initial)ǂ: 42 Max. Trench Depth (Repair)ǂ: 32 *ǂ Measured on the downhill side of the trench*

Artificial Drainage Required: [ ] Yes [X] No If yes, please specify details:

Type of Water Supply: [ ] Private well [ ] Public well [ ] Shared well [X] Municipal Supply [ ] Spring [ ] Other:

Drainfield location meets requirements of Rule .0508: Yes [X] No [ ] Drainfield location meets requirements of Rule .0601: Yes [X] No [ ]

Permit valid for: [X] Five years [site plan submitted pursuant to GS 130A-334(13a)] [ ] No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions:

Proposed septic areas are to remain undisturbed (no grading, no utilities installation)

Proposed septic areas should be fenced/protected from disturbance (vehicle traffic, debris, etc...)

See Design for any additional details

Licensed Soil Scientist Print Name: Samuel Ashley Rollans

Licensed Soil Scientist Signature: Samuel Ashley Rollans Date: 9/16/2025

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

See attached site sketch

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Public Health

Permit/File #: OSWP-2025-83749

This Section for Local Health Department Use Only

Initial submittal received: 9/24/25 *Date* by DW *Initials*

G.S. 130A-335(a3) states the following:

When an applicant for an Improvement Permit submits to a local health department an Improvement Permit application, the permit fee charged by the local health department, the common form developed by the Department, and a soil evaluation pursuant to subsection (a2) of this section, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Improvement Permit includes all of the required components. If the local health department determines that the Improvement Permit is incomplete, the local health department shall notify the applicant of the components needed to complete the Improvement Permit. The applicant may submit additional information to the local health department to cure the deficiencies in the Improvement Permit. The local health department shall make a final determination as to whether the Improvement Permit is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The Department shall develop a common form for use as the Improvement Permit.

The review for completeness of this Improvement Permit was conducted in accordance with G.S. 130A-335(a3). This Improvement Permit is determined to be:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing:

_____

_____

Copies of this were sent to the LSS and the Applicant on _____ *Date*

State Authorized Agent: _____ Date: _____

☒ Complete

State Authorized Agent: _____ Date: 9/25/25

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2) and (a3) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. *This permit is subject to revocation if the site plan, plat, or the intended use changes.* The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of 15A NCAC 18E and to the conditions of this permit.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 9/25/30

See attached site sketch

Permit/File #: OSWP-2025-83749

CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)

County: Iredell Pre-Construction Conference Required: [ ] Yes [X] No

PIN/Lot Identifier: 3782739046

Issued To: Not Just Arm Candy LLC

Property Location: 123 Pier Dr, Stateville NC 28677, Lot#30

AOWE/PE Plans/Evaluations Provided: Yes [X] No [ ] If yes, name and license number of AOWE/PE: Samuel A Rollans #10027E

Facility Type: Residential

Number of bedrooms: 3 Number of Occupants: 6 Other:

[X] New [ ] Expansion [ ] Repair [ ] System Relocation [ ] Change of Use

Basement? [ ] Yes [X] No Basement Fixtures? [ ] Yes [ ] No

Crawl Space? [X] Yes [ ] No Slab Foundation? [ ] Yes [X] No

Type of Wastewater System* IIIe VPPBPS 6'- GRAVITY (Initial) IVa HPPBPS 6'- LPP (Repair)

**Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII*

Design Daily Flow: 360 GPD Wastewater Strength: [X] Domestic [ ] High Strength [ ] Industrial Process WW

Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? [ ] Yes [X] No
(if yes, please provide engineering documentation)

Effluent Standard: [X] DSE [ ] HSE [ ] NSF/ANSI 40 [ ] TS-I [ ] TS-II [ ] RCW

Type of Water Supply: [ ] Private well [ ] Public well [ ] Shared well [X] Municipal Supply [ ] Spring [ ] Other:

Installation Requirements/Conditions

Septic Tank Size: 1000 gallons Total Trench/Bed Length: 200 feet Trench/Bed Spacing: 8 feet on center

Trench/Bed Width: 24 inches LTAR: 0.3 gpd/ft² Usable Depth to LC (Initial)*: 70 *Limiting condition

Soil Cover: 20 inches Slope Adjusted Maximum Trench/Bed Depth‡: 42 inches *‡Measured on the downhill side of the trench*

Pump Tank Size (if applicable): N/A gallons Requires more than 1 pump? [ ] Yes [X] No

Pump Requirements: N/A ft. TDH vs. N/A GPM Grease Trap Size (if applicable): gallons

Distribution Method: [ ] Serial [X] D-Box or Parallel [ ] Pressure manifold(s) [ ] LPP [ ] Other

Artificial Drainage Required: Yes [ ] No [X] If yes, please specify details:

Legal Agreements *(If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)*

Multi-party Agreement Required [.0204(g)]: [ ] Yes [X] No Declaration of Restrictive Covenants: [ ] Yes [X] No

Easement, Right-of-Way, or Encroachment Agreement Required [.0301(b)]: [ ] Yes [X] No

Management Entity Required: Yes [ ] No [X] Minimum O&M Requirements:

Permit conditions:

Proposed septic areas are to remain undisturbed (no grading, no utilities installation)

Proposed septic areas should be fenced/protected from disturbance (vehicle traffic, debris, etc...)

See Design for any additional details

The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached site sketch. *This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes.* The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of 15A NCAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.

AOWE/PE Print name: Samuel Ashley Rollans Expiration Date: 9/16/2030

AOWE/PE Signature: Samuel A Rollans Date: 9/16/2025

This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).

See attached site sketch

ONSITE WASTEWATER Certification Number 10027E EVALUATOR

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Public Health

Permit/File #: OSWP-2025-83749

This Section for Local Health Department Use Only

Initial submittal received: 9/24/25 (*Date*) by DW (*Initials*)

G.S. 130A-335(a5) states the following:

When an applicant for a Construction Authorization, or an Improvement Permit and Construction Authorization together, submits a Construction Authorization, or an Improvement Permit and Construction Authorization application together, the permit fee charged by the local health department, the common form developed by the Department, and any necessary signed and sealed plans or evaluations conducted by a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Construction Authorization or Improvement Permit and Construction Authorization includes all of the required components. If the local health department determines that the Construction Authorization or Improvement Permit and Construction Authorization is incomplete, the local health department shall notify the applicant of the components needed to complete the Construction Authorization or Improvement Permit and Construction Authorization. The applicant may submit additional information to the local health department to cure the deficiencies in the Construction Authorization or Improvement Permit and Construction Authorization. The local health department shall make a final determination as to whether the Construction Authorization or Improvement Permit and Construction Authorization is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The applicant may apply for the building permit for the project upon the decision of completeness of the Construction Authorization or Improvement Permit and Construction Authorization by the local health department or if the local health department fails to act within five business days. The Authorized On-Site Wastewater Evaluator or licensed engineer submitting the evaluation pursuant to this subsection may request that the local health department revoke or suspend the Construction Authorization or Improvement Permit and Construction Authorization for cause. Upon written request of the Authorized On-Site Wastewater Evaluator or licensed engineer, the local health department shall suspend or revoke the Construction Authorization or Improvement Permit and Construction Authorization pursuant to G.S. 130A-23. The Department shall develop a common form for use as the Construction Authorization.

The review for completeness of this Construction Authorization was conducted in accordance with G.S. 130A-335(a5). This Construction Authorization is determined to be:

☐ Incomplete (If box is checked, information in this section is required.)

- The following items are missing: _____

_____

- Copies of this were sent to the AOWE/PE and the Applicant on _____ (*Date*)

State Authorized Agent: _____ Date: _____

■ Complete

State Authorized Agent: _____ Date of Issuance: 9/25/25

This Construction Authorization is issued pursuant to G.S. 130A-335(a2) and (a5) using the signed and sealed plans or evaluations attached here. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to plans, evaluations, preconstruction conference findings, submittals, or actions from a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator in GS 130A-335(a2), (a5), and (a7). The Department, the Department's authorized agents, and the local health departments shall be responsible and bear liability for their actions and evaluations and other obligations under State law or rule, including the issuance of the operations permit pursuant to GS 130A-337.

Construction Authorization Expiration Date: 9/25/30

See attached site sketch

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Project#: 25-0065
September 12th,2025

Not Just Arm Candy LLC
Attn: *Jayson Waller*
Email: jaysonwaller1979@gmail.com

RE: Soil & Site Evaluation for a 3 Bedroom Residence at 123 Pier Dr, Statesville NC 28677, PIN # (3782739046), Iredell County.

Not Just Arm Candy LLC:

At your request Soil & Forestry Services of the Carolinas (S&FS) has performed soil/site evaluations on parcel noted above.The lot size is noted on the attached survey map & soil evaluation form. The purpose of our work was to identify soil areas with potential to support subsurface wastewater disposal systems and provide design details for Session Law submittal to Iredell County Health Department.

Site Conditions

At the time of our evaluation land cover on the property was partially wooded and then the lot was cleared.Topography within the evaluated area was gently slope near the house site and moderate slope near the proposed drainfield area. Property lines and corners were marked at the time of the evaluation by Don Allen & Associates. The client provided an Autocad File of the property with proposed house as a basemap. The proposed septic layout was located via measuring tape/GPS and used to produce the attached *Site Plan*. The proposed house envelope was staked on the lot by the surveyor. The proposed pool (water's edge) must be a minimum of 15 feet from the drainfield or septic tank. Some grading after clearing was done to remove rills behind the house.

Methodology

We evaluated soil areas through the use of excavator pits and auger borings.Soil morphological conditions including color, texture, structure, etc. were reviewed in the field with five pit locations and one auger boring in the proposed field flagged and located via GPS. Three of the five pits are located in or adjacent to the proposed primary septic layout. Soil suitability was determined by referencing 15A NCAC 18E "Wastewater Treatment & Dispersal Systems". *Soil & Site Evaluation Forms* were utilized to record the soil morphological data for each boring/pit. The house envelope was located by the surveyor. An on-ground layout of the primary system was performed using a laser level. Pin flag locations of the layout were also located by tape measure and GPS. Detailed system & repair information is summarized in the following paragraph for this Lot.

123 Pier Dr (*See Attached Design*)
The septic layout for this lot (8' centers primary & 6' center repair) yielded a total of 408 linear feet of line. The primary system is proposed as 200 linear feet of VPPBPS 8'(50% Reduction) drainfield with gravity distribution. Trench depth (Low Side) is specified at 42 inches. The repair system is proposed as 200 linear feet of VPPBPS 6' (50% Reduction) drainfield with low pressure distribution. Trench depth (Low Side) is specified at 32 inches. There is 208 linear feet available for repair.

Session Law Requirements

All information needed to issue the IP must be submitted with the application. The application shall include all information described in 15A NCAC 18E .0202 and be accompanied by a signed and dated statement from the applicant (owner or owner's legal representative) that reads as follows:

"The LSS/LG evaluation(s) attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3)."

Owner Date

Print Name ELIZABETH WALKER
Signature _____ 9/23/25

The LSS evaluation shall include a statement bearing the LSS seal and signature that reads as follows:

"The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2)."

Disclaimer
This report reflects the findings of S&FS, PA. *This LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2)."* Any site modifications that impact the proposed septic areas at 123 Pier Drive, Statesville NC 28677 may nullify this design. System design requirements and site requirements shall be adhered to for installation and Operations Permits to be issued by the local Health Department. Please contact S&FS if you have any questions regarding this report or the attached information. S&FS also offers septic system inspection, wetland delineation and forestry services.

Sincerely,

S. Ashley Rollans, LSS
Attachment: *Septic Design*

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

9/16/2025

Iredell County Environmental Health
Attn: Heath Snow
349 N Center Street
Statesville, NC 28677

Re: Improvement Permit & CA Submittal for 123 Pier Dr, Stateville NC 28677 (Lot #30)

Mr. Snow,

Attached please find sealed soil notes as well as site plans and design related data for a 3 bedroom house VPPBPS 8' system using GRAVITY distribution.

"The LSS evaluation attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3)."

"The plans or evaluations attached to this application are to be used to issue a Construction Authorization in accordance with G.S. 130A-335(a2), (a5) and (a6)."

Owner/Applicant: Not Just Arm Candy LLC

Signature: E Walker

Date: 9-23-25

"The LSS Evaluation is being submitted pursuant to and meets requirements of GS 130A-335(a2)." This Improvement Permit is issued pursuant to G.S. 130A-335(a2),(a3), and (a4) using the signed and sealed LSS evaluation attached here". "This AOWE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5)"

"This Construction Authorization is issued pursuant to G.S. 130A-335 (a2), and (a5) and (a6) using the signed and sealed plans or evaluations attached here."

S. Ashley Rollans

Signature:

Date: 9/16/2025 Seal:

NC ONSITE WASTEWATER EVALUATOR
10027E

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

☐ 1. * APPLICANT AND OWNER ARE THE SAME. * (Sign here) _____

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18E .0202). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship* In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:

Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18E .0202, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

2. I, Not Just Arm Candy LLC, am the legal owner(s) of the property

☒ located at 123 Pier Dr, Stateville NC 28677, Lot#30, identified as

PIN (Parcel Identification Number) 3782739046, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name)

Ashley Rollans, Soil & Forestry Services of the Carolinas, PA,

to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

X E Wall
Signature of Owner(s)

X 9-23-25
Date

Mooresville - Environmental Health
latasha.fleming@iredellcountync.gov

Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@iredellcountync.gov
debra.comeaux@iredellcountync.gov
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
MARK BENTON • Deputy Secretary for Health
SUSAN KANSAGRA • Assistant Secretary for Public Health
Division of Public Health

Application for Services

This application, in conjunction with the common form established in G.S. 130A-335(a3) and (a5), is optional for local health departments to be used for applications submited in accordance with G.S. 130A-335(a2), (a3), and (a5).
[hereinafter, G.S. 130A-335(a3) and (a5) permits referred to as (a2) Improvement Permit and (a2) Construction Authorization]

Applying for:

[X] (a2) Improvement Permit [X] (a2) Construction Authorization [ ] (a2) Repair/Construction Authorization

If applying for a Construction Authorization, please indicate desired system type(s):

[X] Accepted [ ] Conventional [ ] Innovative [ ] Other VPPBPS 8' - Gravity w/ D-Box [ ] Any

[X] New Construction [ ] Expansion [ ] System Relocation [ ] Change of Use [ ] Repair

[X] 5 Year Expiration Requested (site plan provided) [ ] Non-Expiring Permit Requested (plat provided, as defined in G.S. 130A-334(7a)

Requesting DHHS review? (systems >3000 GPD or IPWW) [ ] Yes [X] No

Applicant:	Not Just Arm Candy LLC
Mailing Address:	10130 Perimeter Pkwy Ste 420
City:	Charlotte
State:	NC Zip: 28216
Phone #:	704-654-8796
Email:	jaysonwaller1979@gmail.com

Owner:	Not Just Arm Candy LLC
Mailing Address:	10130 Perimeter Pkwy Ste 420
City:	Charlotte
State:	NC Zip: 28216
Phone #:	704-654-8796
Email:	jaysonwaller1979@gmail.com

If the answer to any of the following questions is "yes", applicant must attach supporting documentation.

[ ] Yes	[X] No	Does the site contain any jurisdictional wetlands?
[ ] Yes	[X] No	Is any wastewater going to be generated on the site other than domestic sewage?
[ ] Yes	[X] No	Is the site subject to approval by any other public agency?
[ ] Yes	[X] No	Are there any easements or right of ways on this property?

I understand that the documentation and fees, as required in G.S. 130A-335(a2), (a3), (a5), and (a6), attached to this application are to be used to issue an Improvement Permit and/or Construction Authorization pursuant to G.S. 130A-335(a2),(a3), and (a5). I understand that authorized county and state officials are granted right of entry to the property indicated on this application to conduct necessary inspections to determine compliance with applicable laws and rules. ***I understand that if the information in the application for an Improvements Permit and/or Construction Authorization is falsified, changed, or the site is altered, then the Improvement Permit and Construction Authorization shall become invalid.***

Applicant Signature: _____ Date: 9/16/2025

Owner's Signature: _____ Date: 9-23-25

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

P.O. Box 5872
Statesville NC 28687
980-223-8352
SoilAndForestryServices.com

Project# 25-0065

Septic System Design for a 3 bedroom house
VPPBPS 8' using GRAVITY distribution
Site location: 123 Pier Dr, Stateville NC 28677, Lot # 30

Contents	**Page**
Information for the Installer	1
Design Specifications	2
Layout Specifications	3
Site Plan	4
Calculations	5
Soil Descriptions	6
Floor Plans	7

Sep 2025
Design By: Ashley Rollans



VPPBPS 8' using GRAVITY distribution
Site location: 123 Pier Dr, Stateville NC 28677, Lot # 30

* **CALL 811 BEFORE DIGGING**
* The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.
* Tanks shall be approved by DHHS, and certification supplied by the that must be considered along with all other considerations.
* The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
* The supply trench shall be compacted to eliminate cavities left during initial fill placement.
* Installation of the system shall be during dry conditions in order to protect the soil
* All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
* Trenches shall be carefully excavated so the bottom is within 2" from the highest to the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
* All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
* All tanks shall be properly back filled and compacted to prevent slump at a later date.
* Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
* No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used.
* Elevations at pinflag locations should be checked by the installer prior to beginning
* Septic tank riser shall be a minimum of 6" above finished grade.

* **System specified as VPPBPS 8' type using GRAVITY distribution**
* **Repair specified as VPPBPS 6' type using LPP distribution**
* **System trench depth specified at 42"**
* **System trenches installed on 8' minimum; 24" wide trenches**
* **Installation does not require a soil cap**

VPPBPS 8' using GRAVITY distribution
Site location: 123 Pier Dr, Stateville NC 28677, Lot # 30

Business (if applicable):	N/A
Contact:	Not Just Arm Candy LLC
Phone:	704-654-8796
Email:	jaysonwaller1979@gmail.com
County:	Iredell
Location:	123 Pier Dr, Stateville NC 28677
Source of Wastewater Flow:	3 bedroom house
Estimated Daily Wastewater Production:	360 gpd
Drain field Size:	200 lf
Loading Rate:	0.3 $gpd/ft.^2$
Trench Depth:	42 in
Trench Width:	24 in
Soil Cap:	0 in
Septic Tank Size:	1000 gal

VPPBPS 8' using GRAVITY distribution
Site location: 123 Pier Dr, Stateville NC 28677, Lot # 30

Daily Flow (gpd) **360** **9/12/2025**

LINE #	FLAG COLOR	BS	HI	FS	ELEV	FLAGGED LENGTH	DESIGN LENGTH	END CAP LENGTH	TOTAL LENGTH
TBM		0.0			100.0				
INSTR. 1			100.0						
			SYSTEM						
7	Orange					50	50		50
8	Yellow					50	50		50
9	Blue					50	50		50
10	Red					50	50		50
			REPAIR						
1	Red					27	27		27
2	Orange					41	41		41
3	Yellow					53	53		53
4	Blue					32	32		32
5	Pink					30	30		30
6	Red					25	25		25

	LINE LENGTH	LTAR GPD/FT^2	SYSTEM TYPE	REDUCTION TYPE	DIST	TRENCH DEPTH	SOIL CAP
SYSTEM	200	0.300	VPPBPS 8'	50%	GRAVITY	42	0
REPAIR	208	0.300	HPPBPS 6'	50%	LPP	32	0

Notes:
**TBM is assumed to be 100'
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags
**BS and FS indicate rod readings

Page 4	SYSTEM FLOW	Project #25-0065

VPPBPS 8' using GRAVITY distribution
Site location: 123 Pier Dr, Stateville NC 28677, Lot # 30

Line #	Color	Elevation	Length	Hole Size	Flow/hole	Trench Area	Number of Panels
7	Orange	0.0	50	N/A	N/A	100	12
8	Yellow	0.0	50	N/A	N/A	100	12
9	Blue	0.0	50	N/A	N/A	100	12
10	Red	0.0	50	N/A	N/A	100	12
	total	**feet =**	**200**	**gal/min =**	**N/A**		**48**

Design Flow	**360**
Soil LTAR	**0.3**
Accepted LTAR	**0.6**

CALCULATIONS	Project #25-0065

VPPBPS 8' using GRAVITY distribution
Site location: 123 Pier Dr, Stateville NC 28677, Lot # 30

PROJECT INFO	Designer	Ashley Rollans
	Project #	25-0065
	Project MM YYYY	9/12/2025
	County	Iredell
	Project Location	123 Pier Dr, Stateville NC 28677
	Lot # (if applicable)	30
	Subdivision (if applicable)	River Oaks Landings
	Parcel #	3782739046
	Property is Recorded?	Yes
	Lot size (acres)	0.581
	Easement(s) on parcel?	No
	Business (if applicable)	N/A
	Current Owner (for AA)	Not Just Arm Candy LLC
	Electronic Signature OK?	N/A
	Name	Not Just Arm Candy LLC
	Mailing Address	10130 Perimeter Pkwy Ste 420
	City	Charlotte
	State	NC
	Zip	28216
	Phone	704-654-8796
	Email	jaysonwaller1979@gmail.com
	Facility Type	Residential
	Facility	House
	Bedroom	3
	Water Source	Public
	Foundation Type	Crawl Space
	Daily Flow (gallons)	360
	Soil Evaluation Method	Pits
	Soil Evaluation Date	04/17/2024
SYSTEM	System LTAR	0.3
	System Type	VPPBPS 8'
	System Distribution	GRAVITY
	System Type Text	IIIe
	System Trench Center Distance (feet)	8
	System Trench Width (inches)	24
	System Trench Depth (inches)	42
	Soil Cap (inches)	0
	Usable Soil Depth (inches)	70
	Media Height (inches)	22
	Tank Size (gallons)	1000
	Required Feet of Line (system)	200
	Designed Feet of Line (system)	200
	Saprolite system?	No
REPAIR	Repair LTAR	0.3
	Repair Type	VPPBPS 6'
	Repair Distribution	LPP
	Repair System Type Text	IVa
	Repair Trench Center Distance (feet)	6
	Repair Trench Width (inches)	24
	Repair Trench Depth (inches)	32
	Soil Cap (inches)	0
	Usable Soil Depth (inches)	50
	Tank Size (gallons)	1000
	Required Feet of Line (repair)	200
	Designed Feet of Line (repair)	208
	Saprolite system?	No

Sheet 1 of 1

PROPERTY ID #: 37872739046

COUNTY: Iredell

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

OWNER: Keep Going Investments LLC

ADDRESS: 710 Northeast Dr Ste 11 Davidson NC 28036

PROPOSED FACILITY & Design Flow(.0400): 3 Bedroom Residence - 360 GPD

LOCATION OF SITE: 123 Pier Dr Statesville NC 28677

DATE EVALUATED: 4/17/2024

PROPERTY SIZE: 0.581

PROPERTY RECORDED: Yes

Water supply setback: 10FT

WATER SUPPLY: ☑ Public ☐ Single Family Well ☐ Shared Well ☐ Spring ☐ Other

EVALUATION METHOD: ☑ Auger Boring ☑ Pit ☐ Cut TYPE OF WASTEWATER: ☑ Domestic ☐ High Strength ☐ IPWW

PROFILE #	.0502 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .0503 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .0503 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .0504 SOIL WETNESS/ COLOR	.0505 SOIL DEPTH	.0506 SAPR CLASS	.0507 RESTR HORIZ	.0509 PROFILE CLASS & LTAR	.0502(d) SLOPE CORRECTION
1	L/13%	0-5	BSCL WFSBK	FR SS SP	fSap	70			S 0.3	3.12"
		5-54	BRC WMSBK/ABK	FR SS SP						
		54-70	RBCL WFSBK	FR SS SP						
2	L/12%	0-5	RBCL WFSBK	FR SS SP	fSap	70			S 0.3	2.88"
		5-35	BRC WMSBK	FR SS SP						
		35-70	RBCL WFSBK	FR SS SP						
3	L/13%	0-3	BSCL WFSBK	FR SS SP	cSap	60	S		S 0.325	3.12"
		3-24	RBC WMSBK/ABK	FR SS SP						
		24-60	RBCL WFSBK	FR SS SP						
		60-70	VAR L MASS	FR SS SP						
4	L/6%	0-7	BSL GR	FR SS SP	fSap	58			S 0.3	1.44"
		7-32	RC WMSBK	FR SS SP						
		32-58	RBCL WFSBK	FR SS SP						
5	L/6%	0-5	BSCL WFSBK	FR SS SP	fSap	48			S 0.3	1.44"
		5-38	RC WMSBK	FR SS SP						
		38-48	RBCL WFSBK	FR SS SP						
B1	L/7%	0-10	RBCK WFSBK	FR SS SP		50			S 0.3	1.68"
		10-45	BRC WMSBK	FR SS SP						
		45-50	RBCL WFSBK	FR SS SP						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.508)	Suitable	Suitable
System Types(s)	VPPBPS 8'- Gravity	VPPBPS 6' - LPP
Site LTAR	0.3	0.3
Maximum Trench Depth	42"	32"

SITE CLASSIFICATION (.509): Suitable

EVALUATED BY: Ashley Rollans

OTHER(S) PRESENT: Chad Wagner

COMMENTS:

LICENSED SOIL SCIENTIST
SAMUEL A. ROLLANS
1231
STATE OF NORTH CAROLINA

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

☐ 1. * APPLICANT AND OWNER ARE THE SAME. * Sign here: _____

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18E .0202). If the owner does not sign the applications himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship*. In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:

Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18E .0202, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

☒ 2. I, Hot Just Arm Candy LLC, am the legal owner(s) of the property located at 123 Pier Dr, Statesville NC 28677, Lot/Tif: _____, identified as Pin (Parcel Identification Number) 3782719040, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name)

Ashley Rollans, Soil & Forestry Services of the Carolinas, PA

to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below:

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

x Elizabeth Waller 9-17-25
Signature of Owner(s) Date

Mooresville - Environmental Health
latasha.fleming@iredellcountync.gov
Fax: 704-663-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hall@iredellcountync.gov
debra.comeaux@iredellcountync.gov
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PLLC

9/16/2025

Iredell County Environmental Health
Attn: Heath Snow
349 N Center Street
Statesville, NC 28677

Re: Improvement Permit & CA Submittal for 123 Pier Dr, Statesville NC 28677 (Lot #30)

Mr. Snow,

Attached please find sealed soil notes as well as site plans and design related data for a 3 bedroom house VPPBPS ℄ system using GRAVITY distribution.

"The LSS evaluation attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3)."

"The plans or evaluations attached to this application are to be used to issue a Construction Authorization in accordance with G.S. 130A-335(a2), (a5) and (a6)."

Owner/Applicant: Not Just Arm Candy LLC

Signature: Elizabeth Waller

Date: 9-17-25

"The LSS Evaluation is being submitted pursuant to and meets requirements of GS 130A-335(a2)." This Improvement Permit is issued pursuant to G.S. 130A-335(a2),(a3), and (a4) using the signed and sealed LSS evaluation attached here". "This AOWE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5)"

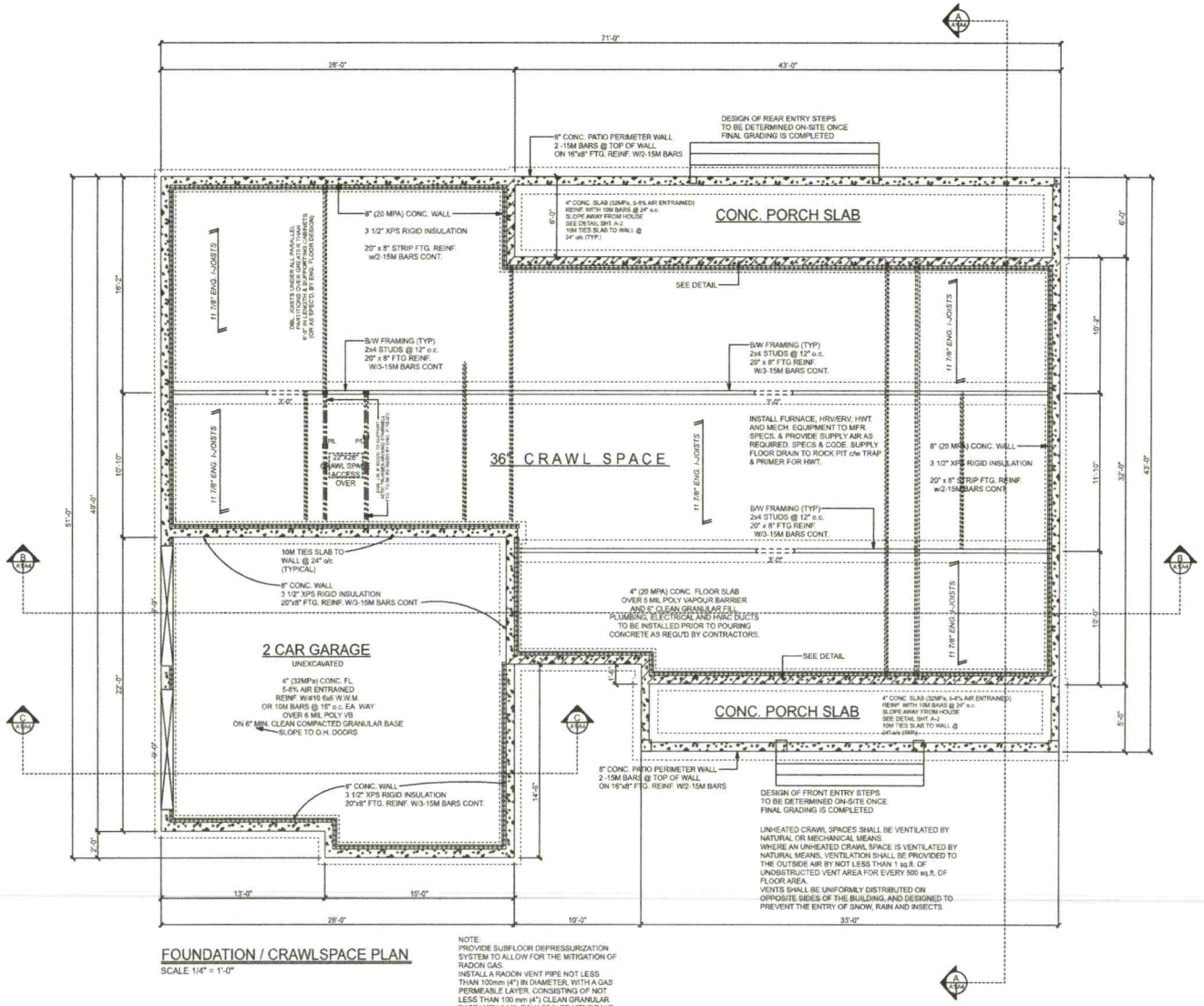
"This Construction Authorization is issued pursuant to G.S. 130A-335 (a2) and (a5) and (a6) using the signed and sealed plans or evaluations attached here."

S. Ashley Rollins

Signature:

Date: 9/16/2025 Seal:

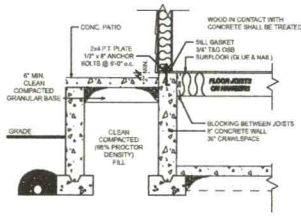




FOUNDATION / CRAWLSPACE PLAN

SCALE 1/4" = 1'-0"

NOTE:
PROVIDE SUBFLOOR DEPRESSURIZATION SYSTEM TO ALLOW FOR THE MITIGATION OF RADON GAS.
INSTALL A RADON VENT PIPE NOT LESS THAN 100mm (4") IN DIAMETER, WITH A GAS PERMEABLE LAYER, CONSISTING OF NOT LESS THAN 100 mm (4") CLEAN GRANULAR BASE WITH 6 MIL POLY SEALED MEMBRANE, INTERCONNECT ALL SUBFLOOR AREAS AND DUCT TO EXTERIOR.



PORCH OR PATIO SLAB DETAIL AGAINST CONC. WALL

(APPLIES TO SHADED WALLS)
SCALE: 1/2" = 1'-0"

PLEASE READ CAREFULLY BEFORE BEGINING PROJECT:

-ALL FRAMING MATERIAL OTHER THAN STUDS SHALL BE No. 1 & 2 S.P.F.
-STUDS SHALL CONFORM TO LATEST EDITION OF C.S.A. 086 SPEC.
-ALL WINDOWS DBL. G. AND OPENERS SCRND.
-ALL LINTELS 2 - 2x10 OR AS NOTED.
-FLASH OVER ALL OPENINGS AND BREAKS IN FINISH. ANKE PROVISION FOR MAIL DELIVERY
-ALL WORK IS TO BE DONE IN ACCORDANCE WITH THE NATIONAL BUILDING CODE,B.C.(I.)N.C. AND LOCAL CODES, BYLAWS AND REGULATIONS WHERE THESE TAKE PRECEDENCE. ALL WORK MUST BE DONE IN A WORKMANLIKE MANNER TO THE SATISFACTION OF THE LOCAL THIS IS APPLICABLE TO THE GENERAL CONTRACTOR AND ALL SUB-TRADES. THE INTENT IS TO CONSTRUCT A SOUND, ADEQUATE BUILDING
-ALL MATERIALS SHALL BE NEW AND THE BEST OF THEIR RESPECTIVE KIND UNLESS OTHERWISE SPECIFIED.
-ANYTHING NOT COVERED IN THE PLANS WILL BE OPEN FOR NEGOTIATION BETWEEN THE CONTRACTOR AND THE OWNER.
-WHILE EVERY ATTEMPT HAS BEEN MADE IN THE PREPARATION OF THESE PLANS TO AVOID MISTAKES, THE DESIGNER CANNOT GUARANTEE AGAINST HUMAN ERROR. THE CONTRACTOR OR BUILDER ON THE JOB MUST CHECK ALL DETAILS AND DIMENSIONS AND REPORT ANY DISCREPANCIES TO THE DESIGNER BEFORE ORDERING MATERIALS OR COMMENCING CONSTRUCTION.
-CONCRETE FOUNDATION TO SOLID BEARING (ORIGINAL UNDISTURBED SUBSOIL) AND BELOW LOCAL FROST LINE.
-CONCRETE TO ATTAIN 32 MPa STRENGTH IN 56 DAYS.
-JOISTS DOUBLED UNDER ALL PARALLEL PARTITIONS & WALLS CARRYING CABINETS & PLACED TO ACCOMODATE PLUMBING, HEATING, ETC.
-SOLID CORE, WEATHERPROOFED EXTERIOR DOORS
-ALL SITE DIMENSIONS AND MEASUREMENTS ARE TO BE GOVERNED AND APPROVED BY MUNICIPAL AUTHORITIES BEFORE STARTING CONSTRUCTION.

COPYRIGHTED DOCUMENTS
ILLEGAL TO REPRODUCE
THESE PLANS ARE THE COPYRIGHTED PROPERTY OF WESPLAN BUILDING DESIGN INC. AND HAVE BEEN LICENSED TO THE ORIGINAL PURCHASER FOR THE CONSTRUCTION OF ONE BUILDING. IT IS UNLAWFUL TO REPRODUCE THESE DOCUMENTS WITHOUT WRITTEN PERMISSION IN THE FORM OF A LICENSE AGREEMENT.

Crawl Space Foundation Plan

WP-3085-C_(20)3085-C]_Crawlspace

DESIGN BY: M.A.G. | DATE: 2025-05-19
DRAWN BY: M.A.G. | REVISED:

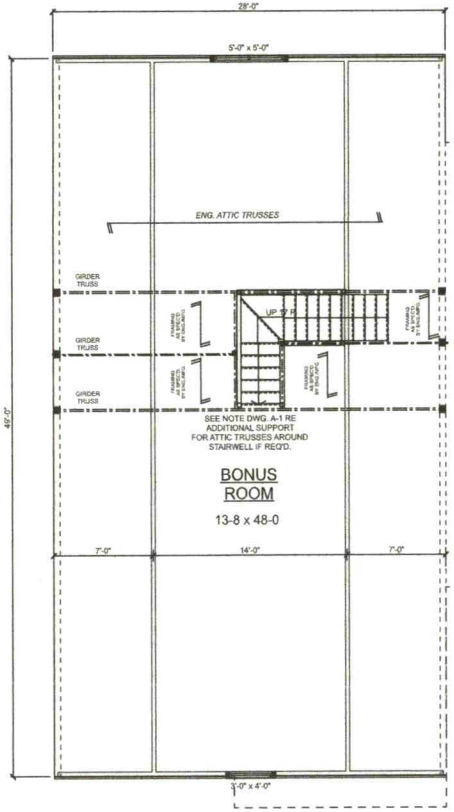
© Wesplan Building Design Inc. MMXXIII. All Rights Reserved
These plans are the property of Wesplan Building Design Inc. and the exclusive preservation of ownership rights is hereby claimed. No part of these plans may be reproduced, for any reason without prior written permission from Wesplan Building Design Inc. These plans are licensed for one, and only one, dwelling unit. The purchaser of additional sets of these drawings may not duplicate these plans for any purpose. Any unauthorized use of these drawings and entitles the buyer with license to construct more than one dwelling unit.

Due to local codes, regulations and building practices and/or inclusion of specific manufacturer's products, Wesplan Building Design Inc. cannot be responsible for the construction of a building to all locations. Consequently, these drawings are not to be used for construction purposes unless they have been reviewed locally, and until the drawings have been brought into conformity with all local requirements. Wesplan Building Design Inc. will not accept any liability for the assuming or overall integrity of these drawings in excess of their responsibility for the design of the components shown on these drawings and details. In these drawings and assume responsibility for the same.

Wesplan Building Design Inc.
Your Number One Source for Home Plans Since 1950
Telephone: 250.493.0942
e-mail: info@westhomeplanners.com
web: www.westhomeplanners.com

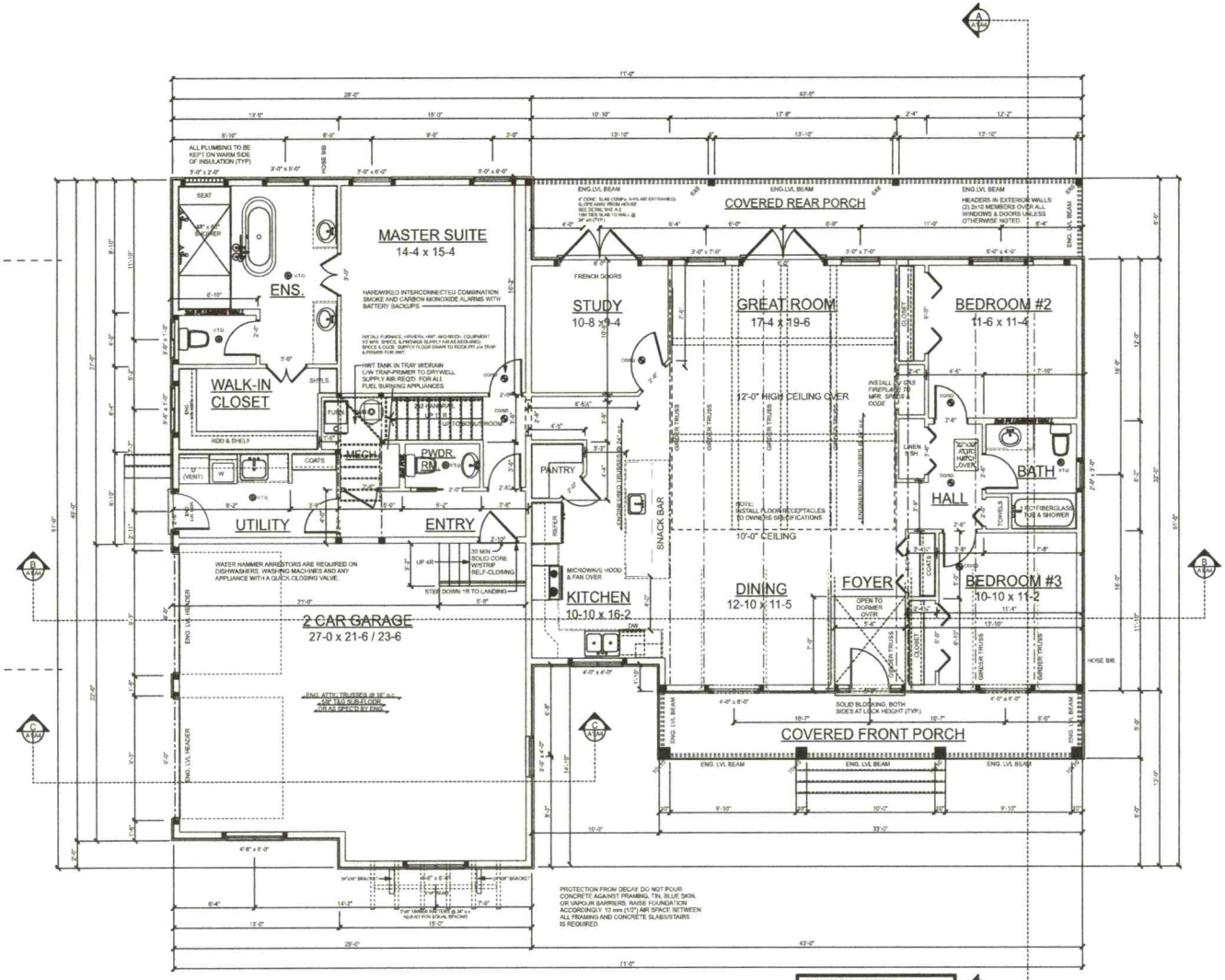
PLAN NO. WP-3085-C
SHEET NO. A1

www.westhomeplanners.com
www.houseplanhunters.com



BONUS ROOM AREA = 707 SQ. FT.

SCALE: 1/4" = 1'-0"



MAIN FLOOR PLAN AREA = 1842 SQ. FT.

SCALE 1/4" = 1'-0"

PLEASE READ CAREFULLY BEFORE BEGINING PROJECT:

- ALL FRAMING MATERIAL OTHER THAN STUDS SHALL BE No. 1 & 2 S.P.F.
- STUDS SHALL CONFORM TO LATEST EDITION OF N.G.B.C./N.B.C./A.N.C.
- ALL WINDOWS DB, O, AND OPENERS SCRNO.
- ALL LISTED 3 / - 2x10 OR AS NOTED.
- FLASH OVER ALL OPENINGS AND BREAKS IN FINISH.
- ARMS PROTECTION TO BE AS REQUIRED.
- ALL WORK SHALL BE DONE IN ACCORDANCE WITH THE NATIONAL BUILDING CODE/B.C.B.C./A.N.C. AND LOCAL CODES, BYLAWS AND REGULATIONS WHERE THESE TAKE PRECEDENCE. ALL WORK MUST BE DONE ACCORDING TO THE ACCEPTED PRACTICE OF THE DAY. THIS IS APPLICABLE TO THE GENERAL CONTRACTOR AND ALL SUB TRADES. THE INTENT IS TO CONSTRUCT A SOUND, ADEQUATE BUILDING.
- ALL MATERIALS SHALL BE NEW AND THE BEST OF THEIR RESPECTIVE KIND UNLESS OTHERWISE SPECIFIED.
- ANYTHING NOT COVERED IN THE PLANS WILL BE OPEN FOR NEGOTIATION BETWEEN THE CONTRACTOR AND THE OWNER.
- WHILE EVERY ATTEMPT HAS BEEN MADE IN THE PREPARATION OF THIS PLAN TO AVOID MISTAKES, THE DESIGNER CANNOT GUARANTEE AGAINST HUMAN ERROR. THE CONTRACTOR OR BUILDER ON THE JOB MUST CHECK ALL DETAILS AND DIMENSIONS AND REPORT ANY DISCREPANCIES TO THE DESIGNER BEFORE ORDERING MATERIALS OR COMMENCING WORK.
- CONCRETE FOUNDATION TO SOLID BEARING (ORIGINAL UNDISTURBED SUBSOIL) AND BELOW LOCAL FROST LINE.
- CONCRETE STRENGTH IS TO BE 3000 PSI @ 28 DAYS.
- JOISTS DOUBLED UNDER ALL PARALLEL PARTITIONS & WALLS CARRYING CABINETS & PLACED TO ACCOMODATE PLUMBING, HEATING ETC.
- SEALED CORE, HEAT-REINFORCED EXTERIOR DOORS.
- ALL WORK SHALL CONFORM TO LOCAL BYLAWS TO BE OBSERVED AND APPROVED BY MUNICIPAL AUTHORITIES BEFORE STARTING CONSTRUCTION.

COPYRIGHTED DOCUMENTS
ILLEGAL TO REPRODUCE
THESE PLANS ARE THE COPYRIGHTED PROPERTY OF WESPLAN BUILDING DESIGN INC. AND HAVE BEEN LICENSED TO THE ORIGINAL PURCHASER FOR THE CONSTRUCTION OF ONE BUILDING. IT IS UNLAWFUL TO REPRODUCE THESE DOCUMENTS WITHOUT WRITTEN PERMISSION IN THE FORM OF A LICENSE AGREEMENT.

Main Floor Plan

WP-3085-C_[D03085-C]_Crawlspace

DESIGN BY: M.A.G. DATE: 2025-08-19

DRAWN BY: M.A.G. REVISED:

© Wesplan Building Design Inc. MMXXIII All Rights Reserved
These plans are the property of Wesplan Building Design Inc. and/or preparation of alternative works thereof for any reason without prior written permission and without payment of the agreed upon fee. Ownership of these drawings is only transferred upon payment in full of the agreed upon fee. These drawings in no way transfers any copyright or other ownership interest in them. Reproduction of these drawings without the written consent of Wesplan Building Design Inc. is prohibited and any unauthorized use will be subject to legal action. These plans are for one single family dwelling unit. The purchaser of additional sets of these drawings is only permitted to build one single family dwelling unit from these plans. Purchase does not entitle the buyer to work in connection with more than one building.

Due to local codes, regulations and building practices and/or because of specific site conditions, it is the responsibility of the owner and/or builder to verify the construction of a building in all localities. Consequently, these drawings are not to be used for construction purposes until they have been reviewed by the local authority and until the drawings have been brought into conformity with all local requirements. Wesplan Building Design Inc. will not accept responsibility or any liability for the incorrect or overall integrity of these drawings in excess of their actual fee for preparation of these drawings. The builder is to check all dimensions and layouts, in these drawings and assume responsibility for the same.

Wesplan Building Design Inc.
Your Number One Source for Home Plans Since 1990
Licensed to the original purchaser for the construction of one building.
Telephone: 250.493.0942
e-mail: mag@westhomeplanners.com
Web: www.westhomeplanners.com

PLAN NO. WP-3085-C

SHEET NO. A2

www.westhomeplanners.com

www.houseplanhunters.com