ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP 323780

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

PIN # 3794 --70 --8391

APPLICANT/OWNER: Joshua Corbridge/Allison Abernathy APPLICANT ADDRESS: 172 Maristone Dr Statesville, NC

SITE ADDRESS: 174 Maristone Dr. Statesville NC 28625 PHONE: 764 743-7717 ALT. PHONE

SITE DIRECTIONS: I-40 Exit 141 TL Mock Mill Rd TL Goble TR Maristone Dr property on right/behind 172

SAP CONTROLLED: ☐ YES ☒ NO

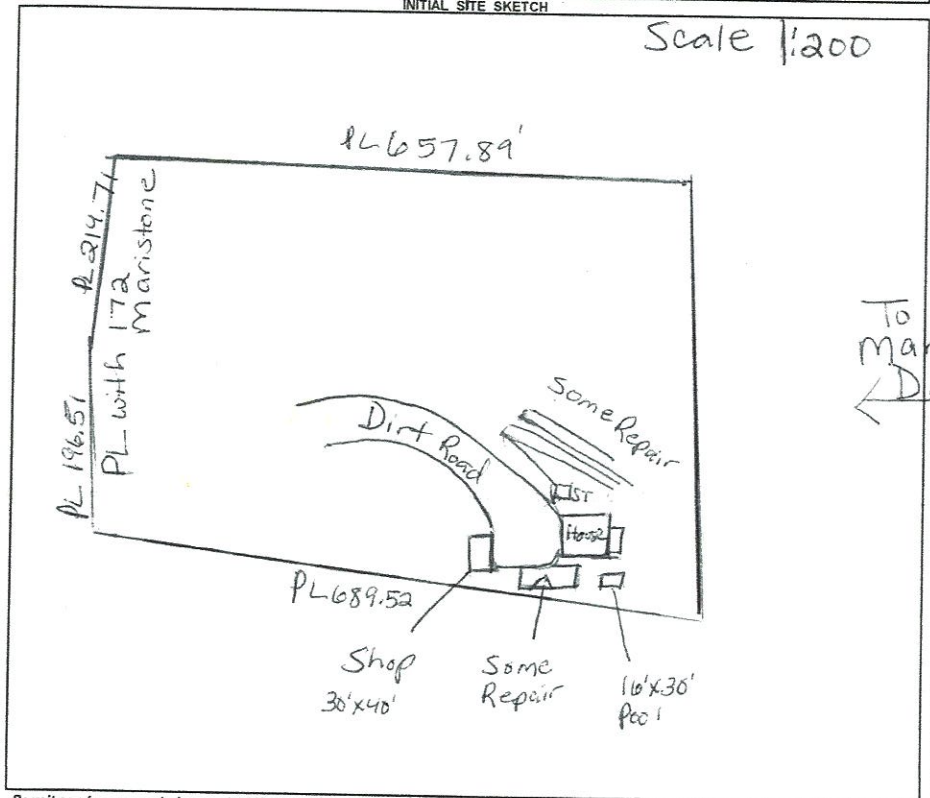
SUBDIVISION: SECTION: — LOT # — LOT AREA: 35.57 Acre DESIGN FLOW: 480 gpd L.T.A.R.: .25

Septic Tank	1000	(gal)	STB 1000	Date 2/15/22	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 4	Water Supply: ☒ Private
Pump Tank		(gal)	PT	Date	System Description: Gravity - 25% Reduction				☐ Business	No. Persons 8	☐ Public
Pump Make		Model		Serial #	Repair System Description: Drip				☐ Other	No. Employees	☐ Community
# Nitrification Fields	1	# Lines	4	Linear Ft 480	Maintenance Agreement Required:	☐ YES	☒ NO		☒ Slab	☐ Crawl Space	
Trench Width	36"	Trench Bottom Depth ~~(Low side)~~ Max	36"	Gravel Depth N/A		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing		☐ Basement w/o plumbing

Comments / Conditions: ★ Stub out plumbing high to maintain gravity flow to ST | No cuts 24" or greater within 15Ft of Septic

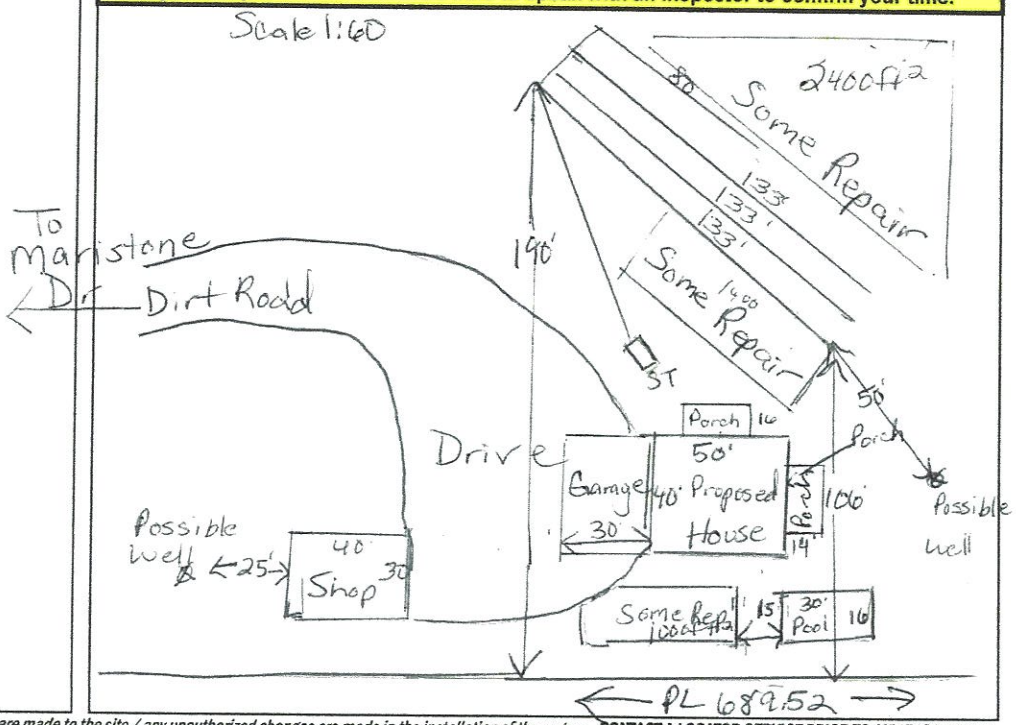
★ No Vehicular traffic over Septic

INITIAL SITE SKETCH



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.



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: AWT Date: 3/18/22 Installed by: ~~Robets~~ Revels Construction

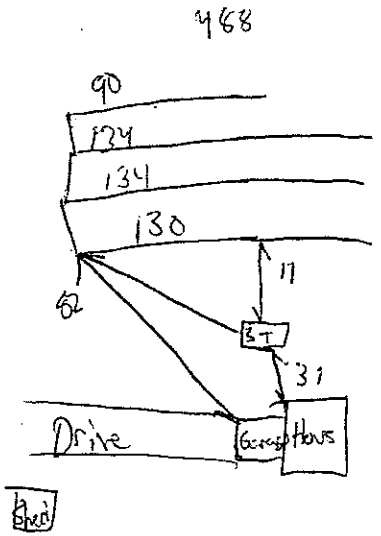
IMPROVEMENT PERMIT by: Maria Dotson Date: 3/12/22 OPERATION PERMIT by: D. Wieberg Date: 5/11/22

AUTHORIZATION TO CONSTRUCT by: Maria Dotson Date: 3/15/22 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

Item	Date	Initials
Drain Lines Checked inlet/ plumbing	5/11/22	DW
Tanks Checked	5/10/22	MW
Pressure Manifold or Valve Box Checked	—	
Pressure Head Set	—	
Electrical Checked	—	
Floats Set	—	
Alarm Checked	—	
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	



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

Sheet ___ of ___
PROPERTY ID #: 3794708
COUNTY: Iredell

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

OWNER: Joshua Corbridge — APPLICATION DATE: 12/9/2
ADDRESS: 172 Maristone Dr Statesville NC — DATE EVALUATED: 2/8/2
PROPOSED FACILITY: House — PROPOSED DESIGN FLOW (.1949): 480 — PROPERTY SIZE: 35.57 AC
LOCATION OF SITE: 174 Maristone Dr Statesville, NC — PROPERTY RECORDED: Y
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other
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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	4%	0-10	Rd/Brn C SL	SP, SExP, Fi	Mn-w SBK/ABK				.U
		10-18	Rd/Brn C SL	SP SExP	FI w SBK		Fi		@ 18"
		18-44	C/SC	w SBK SP, SExP	—	44"	—	18"	
			Chroma 2 @	18"	Chroma 2				
2	4%	0-18	Fill						
		18-28"	Rd/Rd/Brn w SBK	S, P, SExP, Fi					
		28-44"	LV Tiger di-ll RC/SC	w SBK w/ Brn Mottles					
			Chroma 2-5	P, SExP	Chroma 2	44"	—	28"	U @ 28"
3	5%	0-6	Brn SCL	w SBK SS, SP, SExP					PS .25
		6-25	RC m SBK/ABK	SS, SP, SExP, FI-FR					
		25-44	RC/CL w SBK/ABK	SS, SP, SExP, FR					
		44-50	RCL w SBK/ABK	SS, SP, SExP, FR wt few-to many					
			SAP	Incl	—	50"	—	—	
4	5%	0-9	Brn SCL	w SBK SS, SP, SExP					PS
		9-21	RC/CL w SBK	SS, SP, SExP, FR w/ Lithe. Inclus					
		21-49	RCL w SBK	SS, SP, SExP, FR w/ SAP Inclus					.275
		49-52	SAP massive	FR	—	49"	PS	—	

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	Drip
Site LTAR	.25	.1

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Mara Dotson
OTHER(S) PRESENT:

COMMENTS:

LEGEND

use the following standard abbreviations

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

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
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.

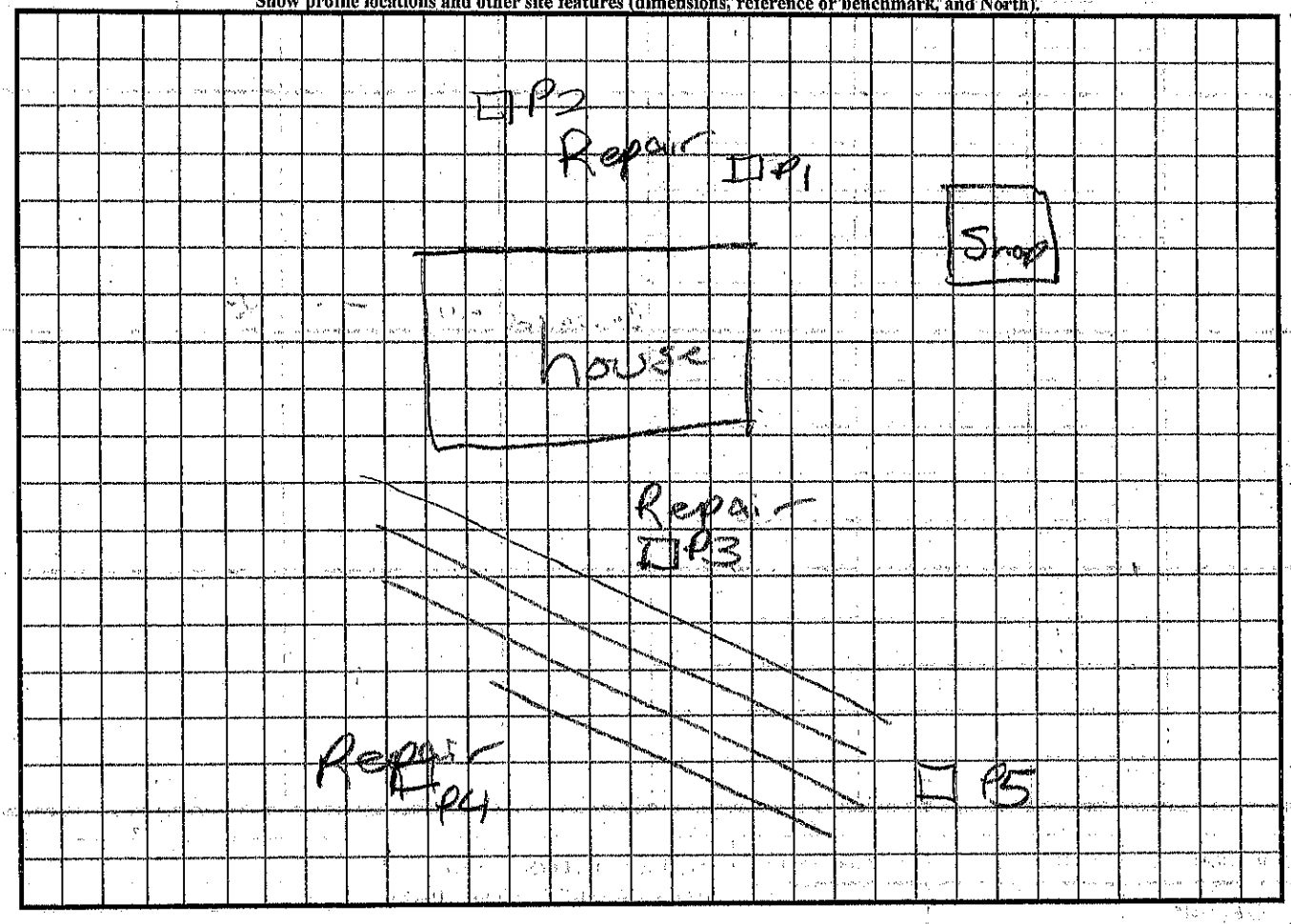
NOTES

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).



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

Sheet ___ of
PROPERTY ID #3704[illegible]
COUNTY: Iredell

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

OWNER: Joshua Corbridge
ADDRESS: 172 Maristone Ct
PROPOSED FACILITY: House
LOCATION OF SITE: 174 Maristone Statesville, NC
APPLICATION DATE: 2/9/2
DATE EVALUATED: 2/18/2
PROPERTY SIZE: 35.57
PROPERTY RECORDED: X
PROPOSED DESIGN FLOW (.1949): 480 gpd
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other
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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	5%	0-12	Brn scl w SBK to gr	NS, NP	NP	N Exp	PS		
		12-33	R C M-w SBK	SS, SP, Sexp,	FR	w few			
		—	Gel mottles						
5		33-50	R Cl w SBK	SS, SP, Sexp,	FR	w few			.275
			Many SAP		Fmn 25				
2									
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	Drip
Site LTAR	.25	.1

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Maria Detson
OTHER(S) PRESENT:

COMMENTS:

LEGEND

use the following standard abbreviations

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

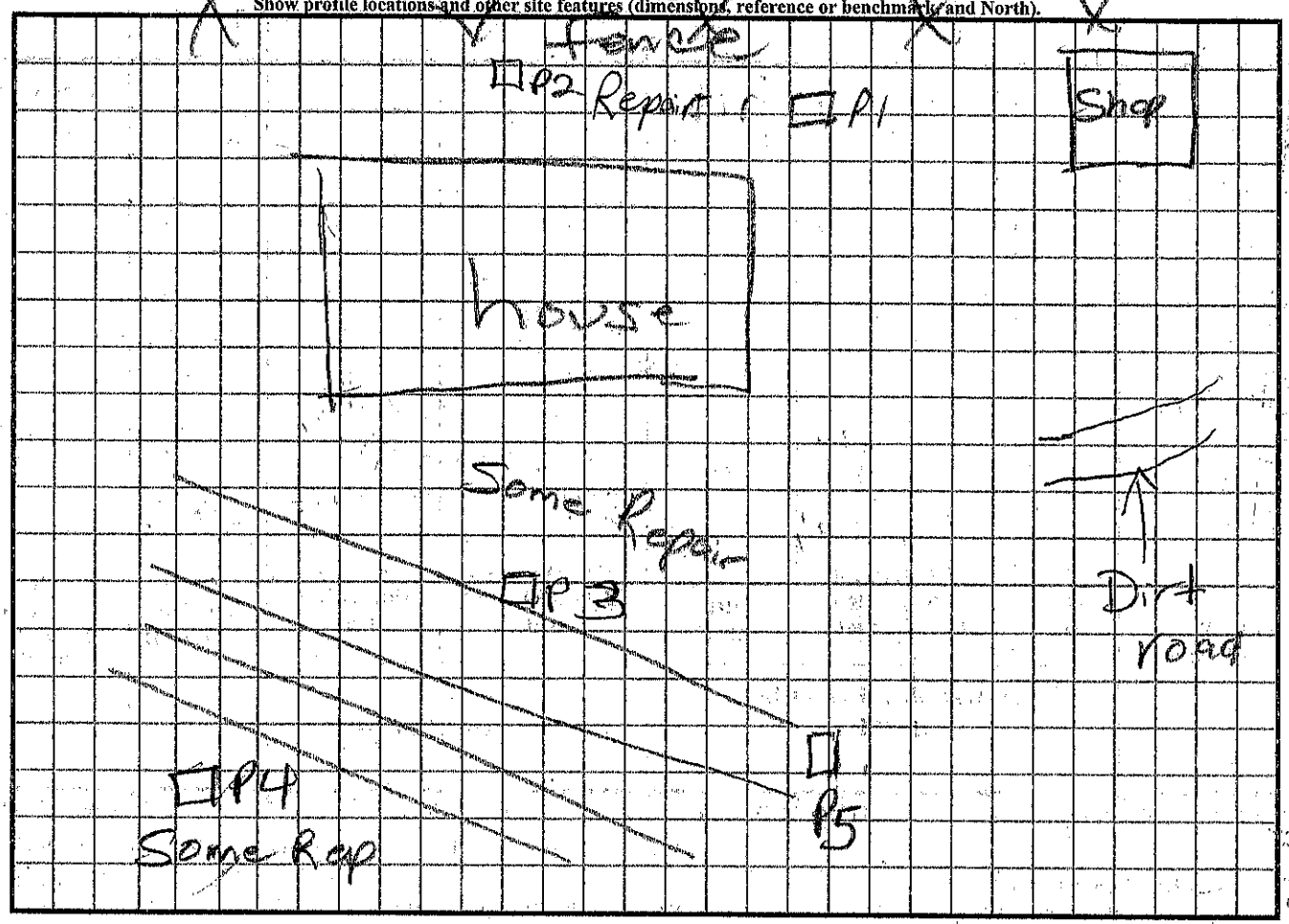
NOTES

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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).



1K
TR

Pits Wed 1/26/22

RECEIVED DEC 15 2021

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM* AP-323780 Paid: $500.00

Application For:
(✓) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (✓) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

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.

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: (X) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: JOSH CORBRIDGE Address: 172 MARISTONE DR., STATESVILLE, NC Zip: 28625
Applicant Email: joshcorbridge@yahoo.com Phone: 704-743-7717 Alt. Phone: 828-371-8143
Owner Name: JOSH CORBRIDGE Address: 172 MARISTONE DR, STATESVILLE, NC Zip: 28625
Owner Email: joshcorbridge@yahoo.com Phone: 704-743-7717 Alt. Phone: 828-371-8143

Property Information:

Street Address: 174 MARISTONE DRIVE, STATESVILLE, NC 28625
Subdivision Name: N/A Section/Phase: N/A Lot Number: N/A
Driving Directions: I40 EXIT 141, (L) MOCK MILL RD, (L) GOBLE RD, (R) MARISTONE DR. PROPERTY ON (R) OF ROAD

Site Development Information: ***(check or complete ALL that apply***

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 5
(✓) Swimming Pool
(✓) Other Addition/Structure: SHOP

CHECK FOUNDATION TYPE
( ) Crawl Space Foundation
(✓) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development: Type of Business:
Square Footage of Building: Max. Number of Employees: Max. Number of Seats/Beds/Other:

Water Supply: ( ) Replacement Well – Reason:
( ) Multi-connection Well Number of Houses: Number of Persons:
(✓) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: ***(you may rank in order of preference)*** Year existing system installed:
(✓) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other:

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. industrial) 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.

Signature: Josh Corbridge 12-09-21
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

323780

Chrystal Sloan

From:	Richard Hoffman
Sent:	Friday, December 10, 2021 9:55 AM
To:	allison15winn@gmail.com
Cc:	Chrystal Sloan
Subject:	174 Marlstone Drive | Applications
Attachments:	Survey.pdf

Hello Ms. Abernathy

I know we had a discussion about the 25' access easement to the property. I just want to clarify this discussion.

I see that 172 Meristone Dr shows the 25' easement to it. When you cut off the new lot it doesn't necessarily create access to 174 Meristone Dr.
I see that Tucker Boyce is the owner of both parcels and therefore could extend the access to the new 174 Meristone lot, but that is not how it looks today on our GIS map.

Yes, we can issue a permit to 174 Meristone due to the landlocked provision in our Ordinance, but I would recommend that you speak with your attorney to verify the access to 174 Meristone.

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*) Joan Connidge

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). 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 18A .1937, 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, _____, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

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

Joan Connidge
Signature of Owner(s)

12-09-21
Date

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

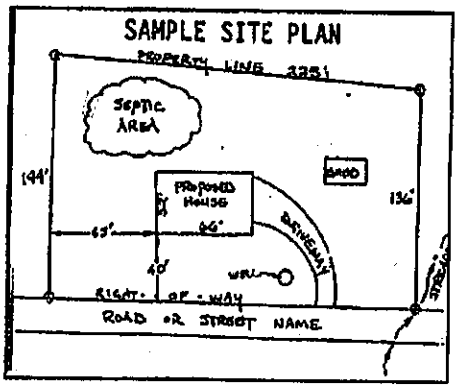
Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY HEALTH 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:

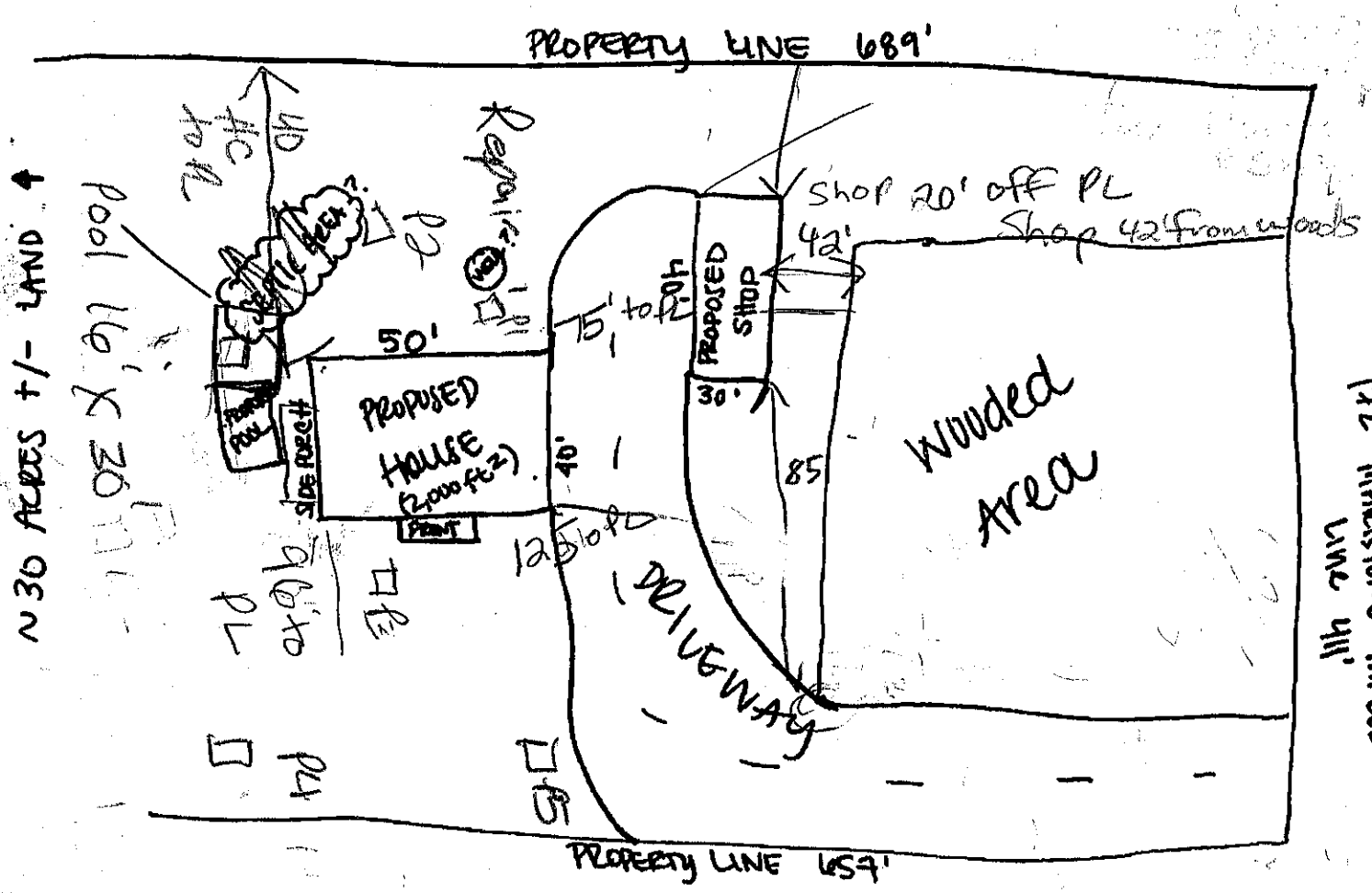
( ) Property Line measurements are clearly identified
( ) All proposed structures are indicated
( ) Front and side setbacks from property line
( ) Preferred driveway location and well location
( ) Area you prefer your septic system to be placed
( ) North arrow, or other sufficient indicator of direction

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

USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site



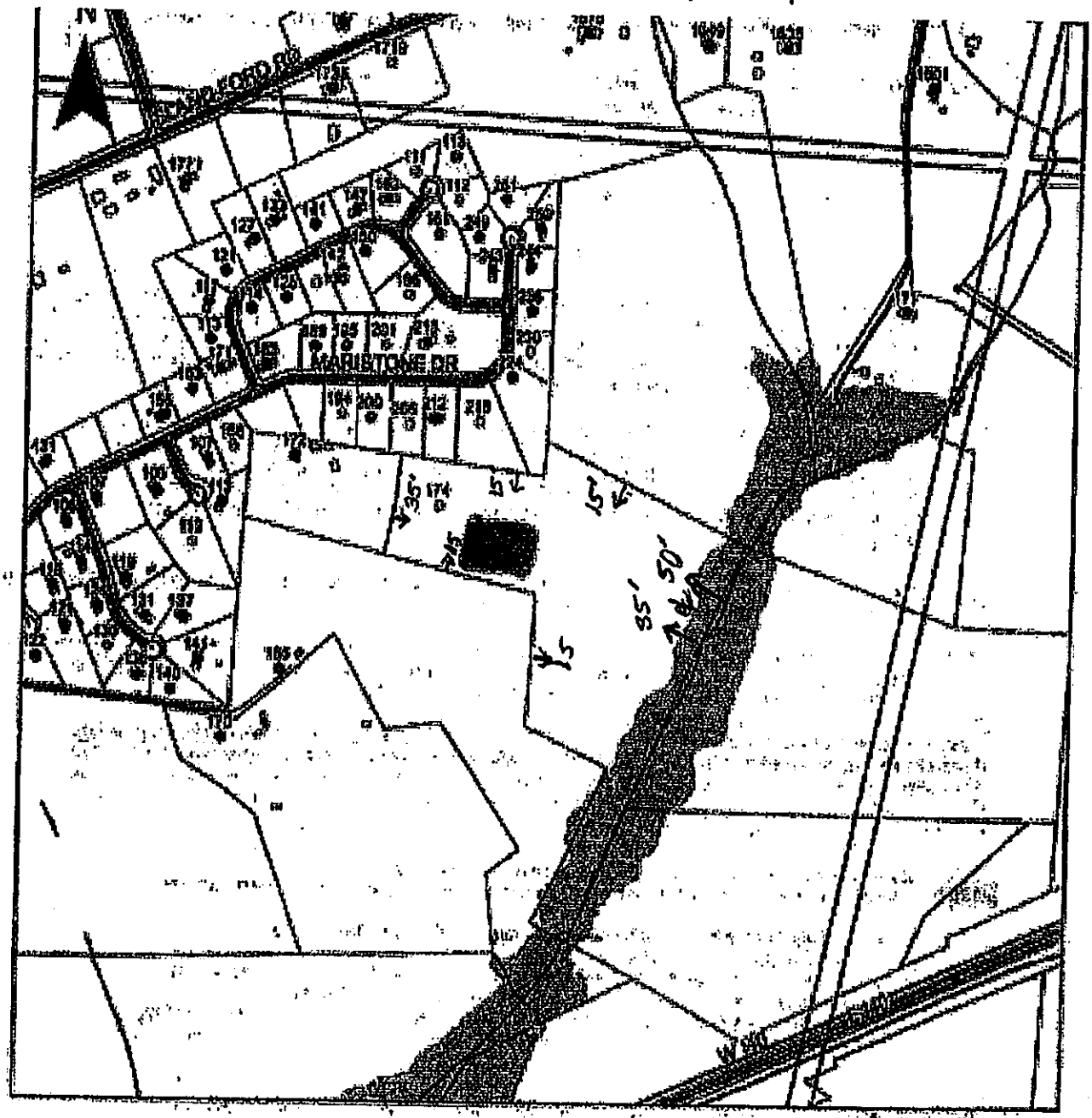
Signature: Todd Coverdale
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

12-09-21
DATE

323780 RU-R 29.74 Ac.

WS IV PA C/LN

FL-Y



scanned

Property Address 174 Marbstone Dr.

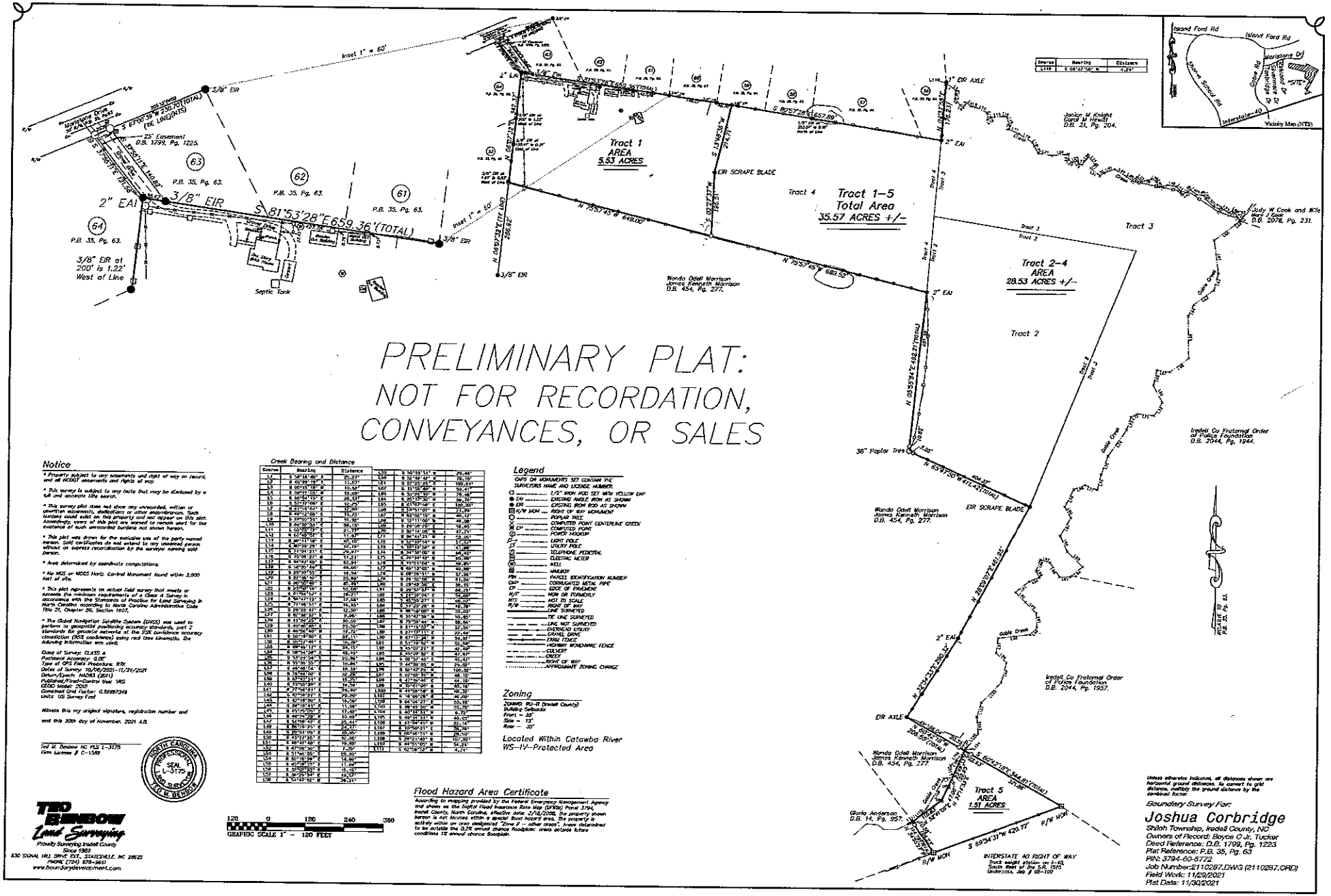
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. Applicant further acknowledges that the enforcement of deed restrictions, plat conditions, and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

Applicant

1/12/21

Date

1:200


Inset 1" = 60'
Tract 1
AREA
5.53 ACRES
Tract 1–5
Total Area
35.57 ACRES +/-
Tract 2–4
AREA
28.53 ACRES +/-
Tract 5
AREA
1.51 ACRES
Tract 2
Tract 3
Tract 4
S 81°53'28"E 659.36'(TOTAL)
N 67°07'32"E 286.92'
N 75°57'45"W 648.00'
N 75°57'45"W 683.52'
N 03°54'42"E 492.21'(TOTAL)
N 28°02'42"E 461.95'
N 23°42'12"E 290.32'
N 63°47'18"W 200.59'(TOTAL)
S 59°34'37"W 420.77'
S 68°42'12"E 344.87'(TOTAL)
N 83°17'58"W 411.42'(TOTAL)
S 87°09'38"W 250.70'(TOTAL)
S 81°53'28"E 140.84'
S 87°09'38"W 255.12'(TOTAL)
S 87°09'38"W 140.84'
S 81°53'28"E 657.89'
S 82°57'26"E 657.89'
N 08°12'32"E 266.92'
S 13°43'58"W 374.71'
S 07°43'58"W 374.71'
N 08°12'32"E 786.23'
S 07°43'58"W 786.23'
2" EAI
3/8" EIR
3/8" EIR at 200' is 1.22' West of Line
2" EAI
2" EAI
2" EAI
1" EIR AXLE
EIR AXLE
EIR SCRAPE BLADE
EIR SCRAPE BLADE
3/8" EIR
3/8" EIR
3/8" EIR

PRINTER NOTE: DRAWINGS PRINTED TO SCALE ON 36" w X 24" t PAPER SIZE

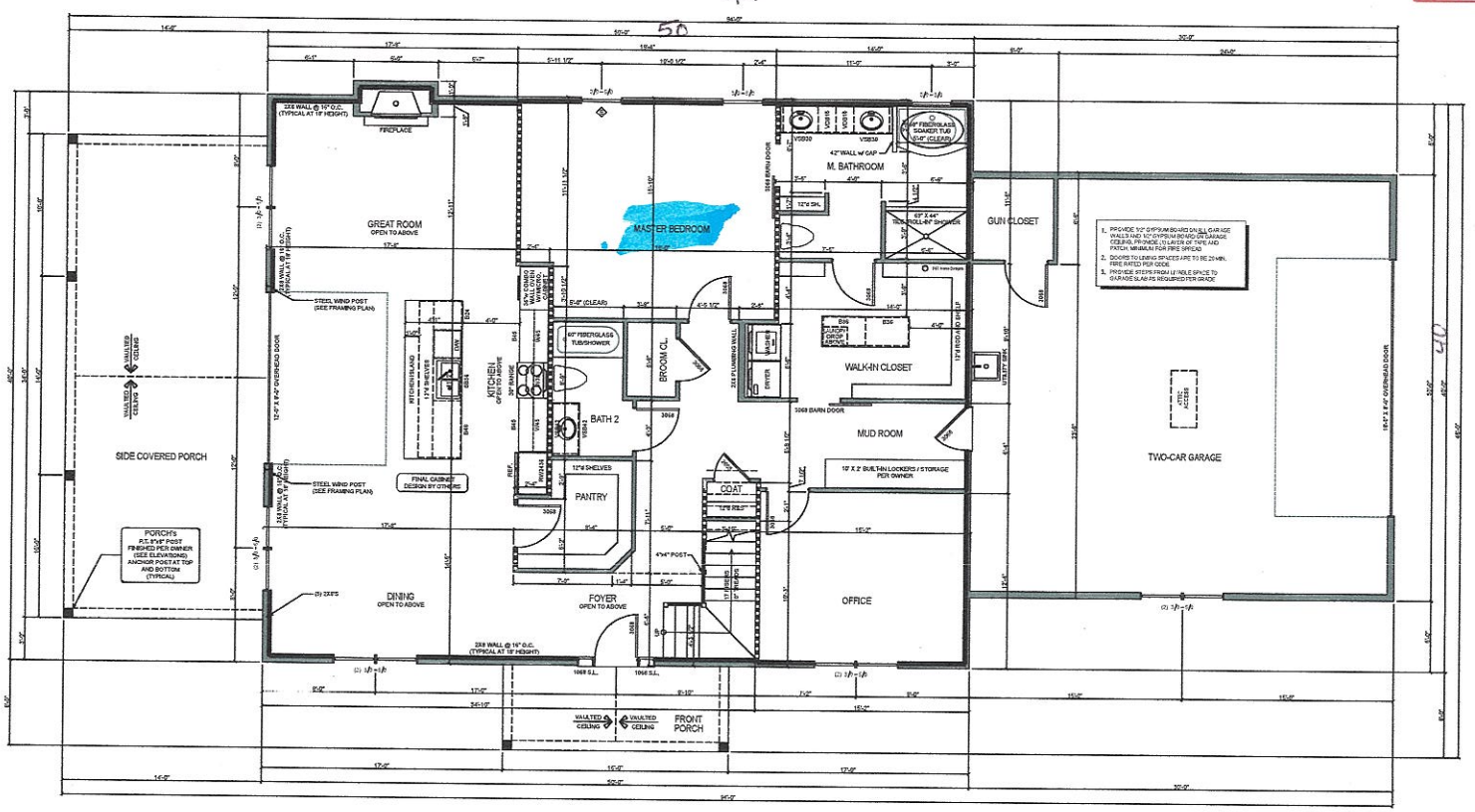
ISSUED FOR CONSTRUCTION

FLOOR PLAN NOTES

1. ALL DIMENSIONS & SITE CONDITIONS TO BE VERIFIED BY CONTRACTOR PRIOR TO CONSTRUCTION
2. ALL DIMENSIONS ARE TO OUTSIDE OF CONCRETE WALL, C.M.U. WALL, VENEER OF PIER & CURTAIN WALL OR OUTSIDE FACE OF STUD. NO WALL FINISHES, SIDINGS OR VENEERS ARE ASSUMED
3. CONTRACTOR TO ADAPT PLANS AS REQUIRED TO MEET ALL SITE CONDITIONS.
4. ALL SQUARE FOOTAGE MEASUREMENTS ARE APPROXIMATE AND MAY DIFFER FROM ACTUAL CONSTRUCTED RESIDENCE OR BUILDING.
5. VERIFY ALL FINISHES (INTERIOR & EXTERIOR) TO BE VERIFIED WITH OWNER PRIOR TO CONSTRUCTION.
6. VERIFY ALL DOOR AND WINDOW STYLES AND SIZES WITH OWNER PRIOR TO CONSTRUCTION, MANUFACTURER TO SUPPLY ALL ROUGH OPENING SIZES.
7. CONTRACTOR TO LOCATE HVAC UNITS AND WATER HEATER AT SITE
8. ANGLES IN WALLS TO BE ASSUMED 45°, TYP. U.N.O.
9. VERIFY LOCAL CODE FOR LOCATION OF TEMPERED GLAZING REQUIREMENTS
10. EXTERIOR WALLS ARE TO BE 2X6 @ 16" O.C., TYP. UNLESS NOTED OTHERWISE
11. INTERIOR WALLS ARE TO BE 2X4 @ 16" O.C., TYP. UNLESS NOTED OTHERWISE
12. DOUBLE HUNG WINDOW STYLE IS TO BE TYPICAL UNLESS NOTED OTHERWISE. COORDINATE COLORS AND SERIES TYPE WITH OWNER AND MANUFACTURER.

EGRESS NOTE

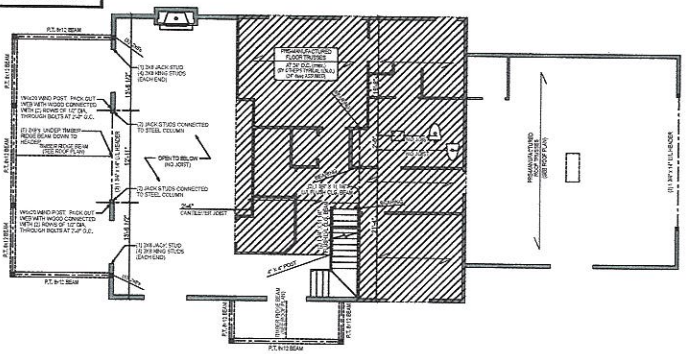
E SYMBOL INDICATES THAT THE WINDOW MUST MEET EMERGENCY EGRESS REQUIREMENTS PER LOCAL BUILDING CODES SEE WINDOW MANUFACTURERS DESIGN MANUAL FOR FURTHER DETAILS / INFORMATION. WINDOW SIZE MAY BE ADJUSTED IF SIZE SHOWN IS INADEQUATE TO MEET LOCAL REQUIREMENTS



MAIN LEVEL FLOOR PLAN

FRAMING NOTES

1. SEE GENERAL NOTES STRUCTURAL FOR INFORMATION NOT SHOWN ON THIS PLAN
2. (2) 2x TO BE SYP #2 OR BETTER (U.O.N.) UNLESS NOTED OTHERWISE
3. EXPOSED CONCENTRATED LOAD FROM ABOVE, PROVIDE SOLID BLOCKING UNDER GIRDER AT ALL LOCATIONS FOR LOAD TRANSFER
4. ALL LOAD BEARING HEADERS & BEAMS TO HAVE 3 MIN. SUPPORT OF (2) JACK STUDS & (2) KING STUDS UNLESS NOTED OTHERWISE (VERIFY ALL SUPPORT LOADS PER MANUF. DRAWINGS, TYPICAL)



MAIN LEVEL CEILING FRAMING PLAN

SCALE: 1/8" = 1'-0"

Acknowledgement Of Plans Submittal ONLY!

Maria Dotson Date 3/15/22

JACOB Date 3/15/22

3/18/22

WALL LEDGED

- NON-LOAD BEARING STUD WALL
- LOAD BEARING STUD WALL (INTERIOR)
- INSULATED STUD WALL (EXTERIOR WALLS ARE ASSUMED LOAD BEARING)

DOOR NOTES



1. PROVIDE WEATHER STRIPING ON ALL DOORS TO UNHEATED SPACE AND EXTERIOR DOORS
2. ALL GLAZING IN DOORS IS TO BE TEMPERED
3. COORDINATE DOOR PANEL STYLE WITH OWNER
4. COORDINATE HARDWARE STYLE WITH OWNER
5. SEE ELEVATIONS FOR ADDITIONAL DOOR INFORMATION

D&T HOME DESIGNS

DESIGNER
Phone: (704)-253-9092
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STRUCTURAL ENGINEER
Solid Rock Structural PLLC
NC Firm Number P-0320
71 Glenn Hill Lane
Hiddenite, NC 28636
Phone: (704) 813-6815
email: Scott@Solidrockstructural.com

SQUARE FOOTAGE

Heated - Main Level	2220 S.F.
Heated - Upper Level	1116 S.F.
Garage	900 S.F.
Front Porch	96 S.F.
Rear Porch	416 S.F.
Total Heated =	3336 S.F.
Total Under Roof =	4828 S.F.

REVISIONS

No.	Date	By	Description

Drawn By: DRG | Issue Date: 12.24.21

Customer Name: Corbridge

172 Metalone Drive
Statesville, North Carolina

Plan Design Number: R-2021-275
SRS 21-146

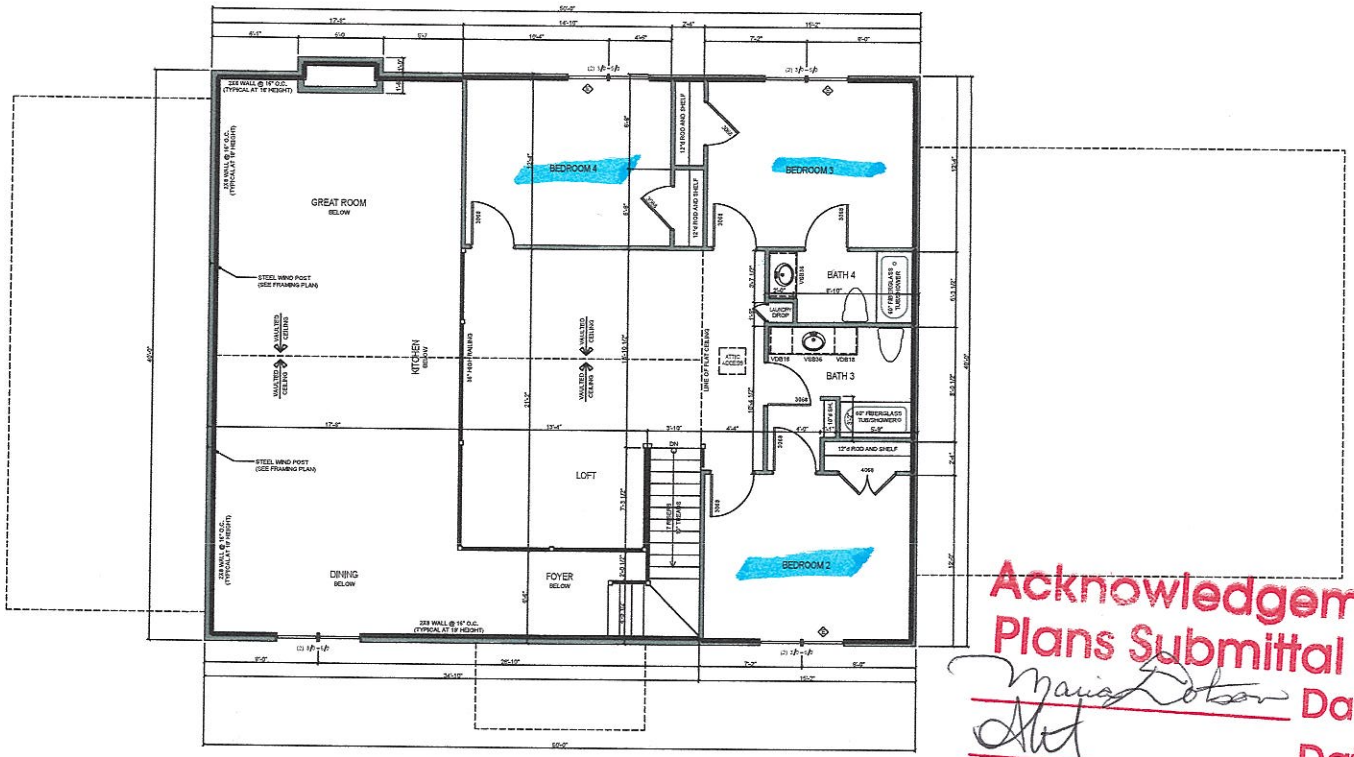
Sheet Title: MAIN LEVEL FLOOR PLAN

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

Sheet No.: B2.1

PRINTER NOTE: DRAWINGS PRINTED TO SCALE ON 36" w X 24" t PAPER SIZE

ISSUED FOR CONSTRUCTION



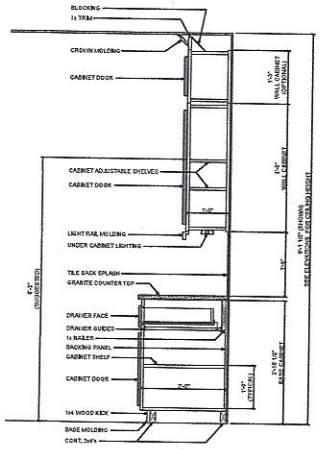
Acknowledgement Of Plans Submittal ONLY!

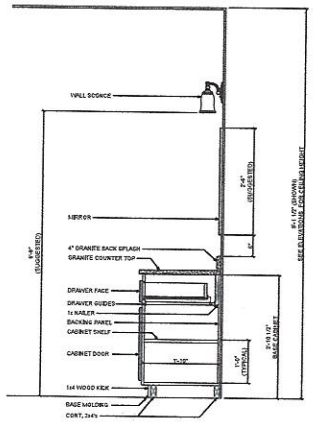
Maria Dotson Date 3/15/22

Art Date 3/18/22

NOTES

1. VERIFY ALL SHOWN CABINET ITEMS WITH OWNER
2. ALL CABINET FINISHES AND STYLES PER OWNER
3. COUNTERTOP MATERIAL AND COLORS PER OWNER
4. SEE PLAN FOR CABINET SIZES AND LAYOUT

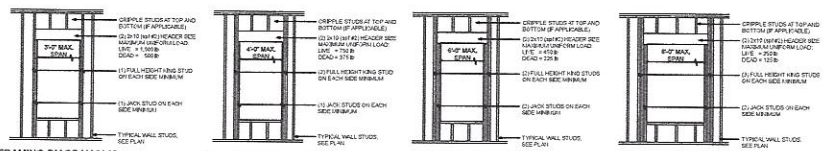




302 TYPICAL CABINET SECTION
SCALE: 3/4"=1'-0"

NOTES

1. SEE PLANS FOR SPECIFIC OPENING AND HEADER SIZING. IF HEADERS SHOWN ON FRAMING PLANS DO NOT MATCH HEADER CONDITIONS IN THIS DETAIL, THEN FRAMING PLANS SHALL TAKE PRECEDENCE. SEE PLANS OR ENGINEERED BEAM DRAWINGS OR BUILDING CODE FOR ADDITIONAL INFORMATION ABOUT MINIMUM SUPPORT STUDS.
2. SEE EXTERIOR ELEVATIONS FOR WALL HEIGHTS. HEADER CONDITIONS ASSUME A MAXIMUM WALL HEIGHT OF 10'-0"
3. (2) 2X4's INTERIOR NON-LOAD BEARING HEADERS, TYPICAL U.N.O.
4. NAIL HEADER PLIES AND SUPPORTING STUDS TOGETHER PER LOCAL CODES.
5. HEADERS SHOWN ALWAYS ASSUME A UNIFORM LOADING PATTERN, NO POINT LOADS.
6. THIS TYPICAL INFORMATION ASSUMES SINGLE FLOOR RESIDENCE WITH STUDS AT 16" ON CENTER. CONSULT BUILDING CODE FOR DIFFERING CONDITIONS



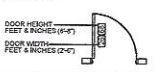
FRAMING DIAGRAM "AA" ELEVATION VIEW
FRAMING DIAGRAM "BB" ELEVATION VIEW
FRAMING DIAGRAM "CC" ELEVATION VIEW
FRAMING DIAGRAM "DD" ELEVATION VIEW

500 HEADER FRAMING CONDITIONS
SCALE: 1/4"=1'-0"

WALL LEDGED

- NON-LOAD BEARING STUD WALL
- LOAD BEARING STUD WALL (INTERIOR)
- INSULATED STUD WALL (EXTERIOR WALLS ARE ASSUMED LOAD BEARING)

DOOR NOTES



1. PROVIDE WEATHER STRIPPING ON ALL DOORS TO UNHEATED SPACE AND EXTERIOR DOORS
2. ALL GLAZING IN DOORS IS TO BE TEMPERED
3. COORDINATE DOOR PANEL STYLE WITH OWNER
4. COORDINATE HARDWARE STYLE WITH OWNER
5. SEE ELEVATIONS FOR ADDITIONAL DOOR INFORMATION

D&T HOME DESIGNS

DESIGNER
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SEAL 027444 NORTH CAROLINA PROFESSIONAL ENGINEER SCOTT D. SMITH 12-24-21

STRUCTURAL ENGINEER
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NC Firm Number P-0320
71 Glenn Mill Lane
Hiddenite, NC 28636
Phone: (704) 918-6415
email: Scott@Solidrockstructural.com

SQUARE FOOTAGE

Heated - Main Level	2050 S.F.
Heated - Upper Level	1156 S.F.
Garage	960 S.F.
Front Porch	56 S.F.
Rear Porch	474 S.F.
Total Heated -	3206 S.F.
Total Under Roof -	4636 S.F.

REVISIONS

No:	Date	By:	Description

Drawn By: DRG Issue Date: 12.24.21

Customer Name:
Corbridge

172 Mistletoe Drive
Statesville, North Carolina

Plan Design Number:
R-2021-275
SRS 21-146

Sheet Title:
UPPER LEVEL FLOOR PLAN

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

Sheet No.:
B2.2