ICHD–ENVIRONMENTAL HEALTH DIVISION

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

Upgrading Bedrooms

PERMIT # 240422

PIN # 4624277879

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

KW L. Dwaine Swink

APPLICANT/OWNER: Christopher Nicholson

APPLICANT ADDRESS: 125 Brockton Ln Mooresville, NC 28117

SITE ADDRESS: 125 Brockton Ln Mooresville, NC 28117

PHONE: 704654-0809

ALT. PHONE

SITE DIRECTIONS: Brawley School Rd TR 2nd Mansfield TL Brockton 2nd on left

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: The Point

SECTION: 9 LOT # 979 LOT AREA: 1.41 Acre

DESIGN FLOW: 720gpd L.T.A.R.: .25I / .2 Rep.

Septic Tank	1500 (gal)	STB	444	Date	8-1-19	☐ New System ☐ Repair ☒ Expansion	System Type: I II III IV V VI
Pump Tank	1500 (gal)	PT	477	Date	6-19-19	System Description:	Pump-PM-25% Reduction
Pump Make	Orenco	Model		Serial #		Repair System Description:	Hort. PPBPS w/2" cap
# Nitrification Fields	1	# Lines	10 (7 taps)	Linear Ft	730ft	Maintenance Agreement Required:	☐ YES ☒ NO
Trench Width	36"	Trench Bottom Depth(Low side)	24" MAX	Gravel Depth	N/A		☐ GRAVITY ☒ PRESSURE

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/ plumbing

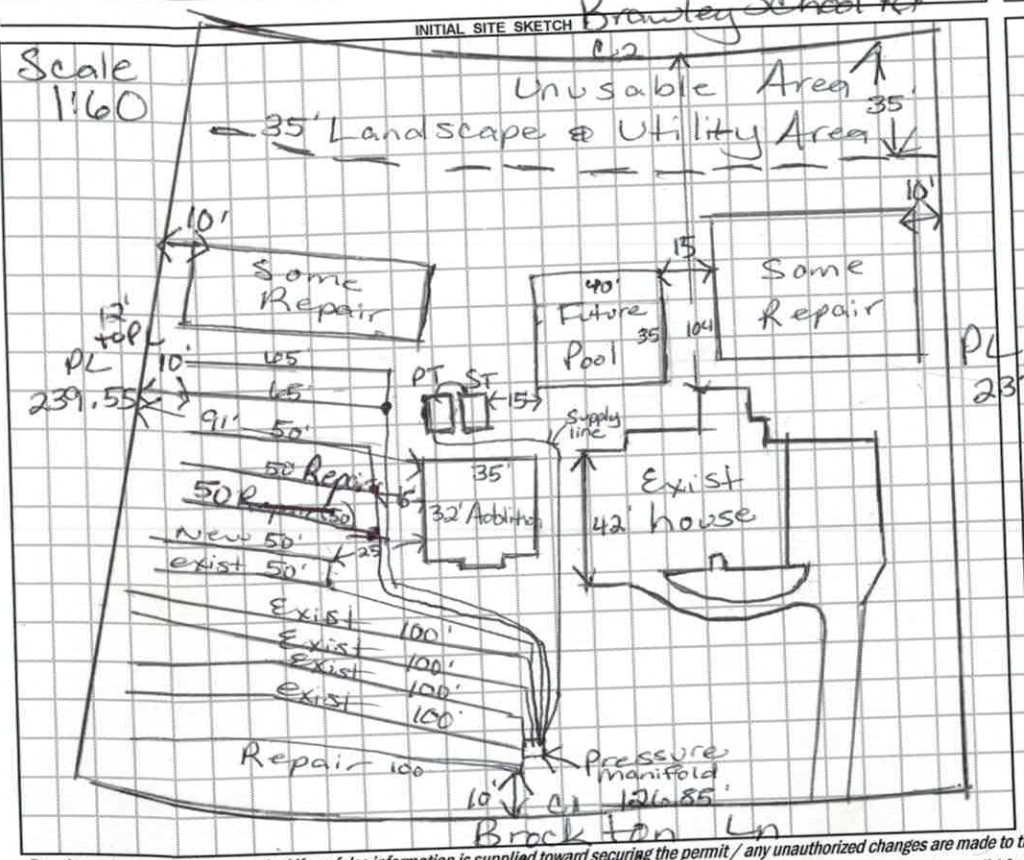
No. Bedrooms 6 | No. Persons 12 | No. Employees | ☒ Crawl Space | ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☒ Community

Comments / Conditions:

Abandon drainfield within 25ft (upgradient) of foundation drain & 15ft (side gradient). Install 50ft of drainfield to replace 50' abandoned. Add 2-50' lines & 2-65' lines

INITIAL SITE SKETCH



AS BUILT SKETCH

Use 1/2" Sch 80 tap for 100' lines &
1-1/2" Sch 80 tap per 2-50 lines
1-1/2" Sch 40 tap for 2-65' lines.
9/18/19 Checked tanks & lines & abandonment of part of drainlines

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: Date: 9/19/19

IMPROVEMENT PERMIT by: Date: 9/17/19

AUTHORIZATION TO CONSTRUCT by: Date: 9/17/19

Installed by: R&H

OPERATION PERMIT by: Patrick J Boyle III Date: 11/5/19

Existing System Inspected by: Date:

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

	Date	Initials
Drain Lines Checked	9/18/19	MD
Tanks Checked	9/18/19	MD
Pressure Manifold or Valve Box Checked	9/18/19	MD
Pressure Head Set	11/5/19	PJB
Electrical Checked	11/5/19	PJB
Floats Set	11/5/19	PJB
Alarm Checked	11/5/19	PJB
Maintenance Contract Y (N)	11/5/19	PJB

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

Sheet ___ of ___
PROPERTY ID #: 4624277874
COUNTY: Iredell

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

OWNER: Christopher Nicholson
ADDRESS: 125 Brockton Ln Mooresville
PROPOSED FACILITY: House PROPOSED DESIGN FLOW (.1949): 600 gpd
LOCATION OF SITE: 125 Brockton
APPLICATION DATE 11/13/18
DATE EVALUATED: 12/12/18
PROPERTY SIZE: 1.41 Acre
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1 A	4%	0-17	Brw SCL	SS, SP, SEXP, FR					PS .2-.25
		17-38	Yel/Brw C	S, P, SEXP	Fi-FR				
		38-60	Rd to Yel/Brw C	S, P, SEXP-EXP, Fi					
			4 Tiger Dirt		38"	38"			
2 B	5%	0-26	Brw SCL	SS, SP, SEXP, FR					PS .2 to 40"
		26-40	RC mw SBK	S, P, SEXP, Fi-FR					
		40-60	yel/Brw to RC	w SBK, S, P, EXP					
			4 Tiger Dirt		40"	40"			
3 C	7%	0-6	Compacted						PS .25
		6-21	Brw SCL	w SBK SS, SP, SEXP, FR					
		21-34	Rd/Brw C	m-w SBK SS, SP, SEXP, FR					
		34-60	Rd/Brw C	w some Yel/Brw Mottles	Indus				
			SS, SP, SEXP, FR			60"			
4 D	4%	0-21	Brw SCL	w SBK SS, SP, SEXP, FR					PS .25
		21-50	Brw CL	w SBK SS, SP, SEXP, FR					
			Few	Yel/Brw Mottles					
						50"			

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	PPBPS
Site LTAR	.25	.2

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Marie Dotson
OTHER(S) PRESENT: David Bean

COMMENTS:

LEGEND

use the following standard abbreviations

DSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive)	G (Single Grain)
Convex Slope)		LS (Loamy Sand)			SEXP (Slightly Expansive)	M (Massive)
ainage Way)					EXP (Expansive)	CR (Crumb)
ebris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
lood Plain)		L (Loam)				SBK (Subangular Blocky)
ot Slope)						ABK (Angular Blocky)
ad Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
ear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
e Slope)		CL (Clay Loam)				
ge)		SCL (Sandy Clay Loam)			MOIST	WET
ulder Slope)		SiL (Silt Loam)				
ace)					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)

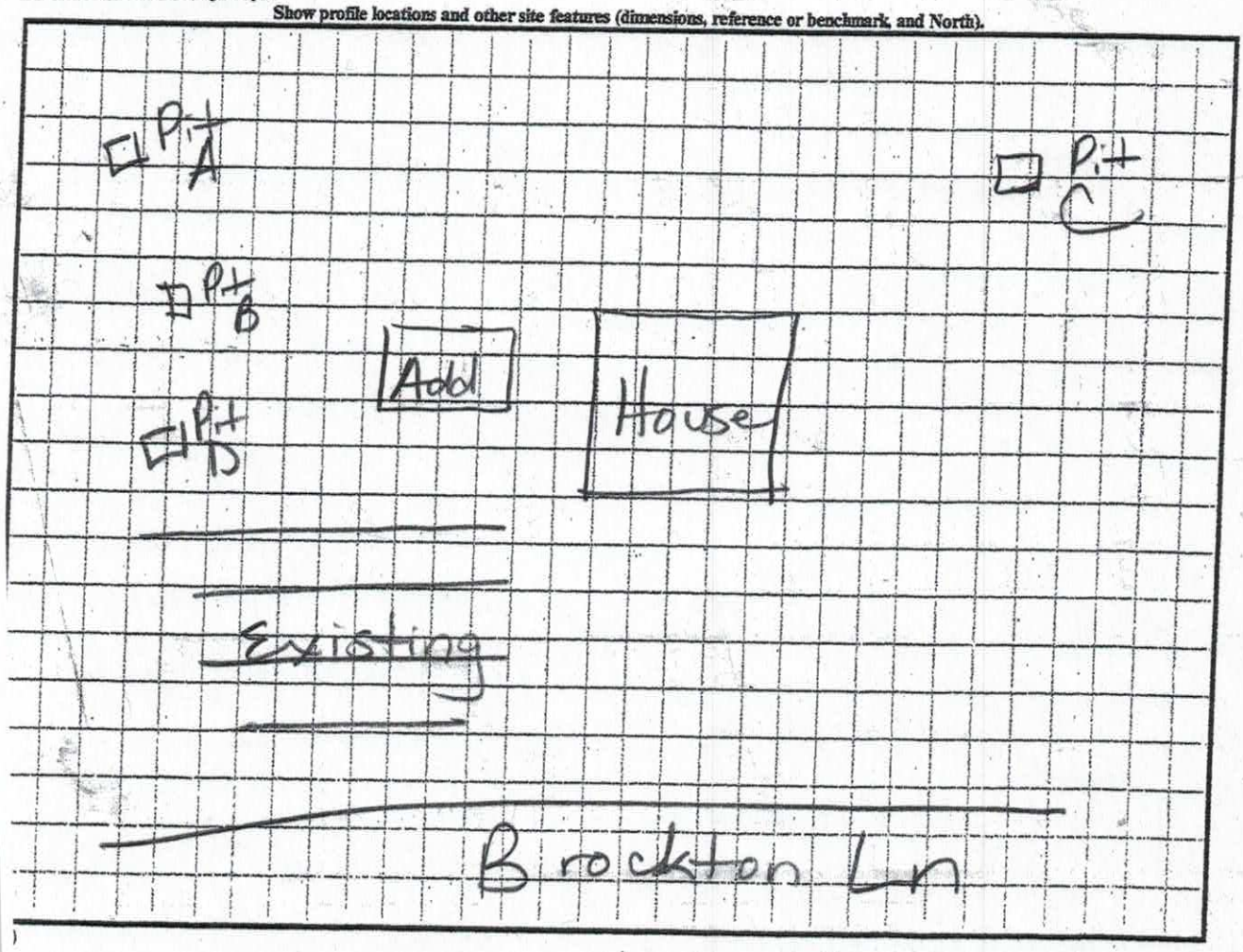
*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

ON DEPTH	In inches below natural soil surface
OF FILL	In inches from land surface
CTIVE HORIZON	Thickness and depth from land surface
ITE	S(suitable) or U(unsuitable)
TNESS	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
FICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

n of saprolite shall be by pits.

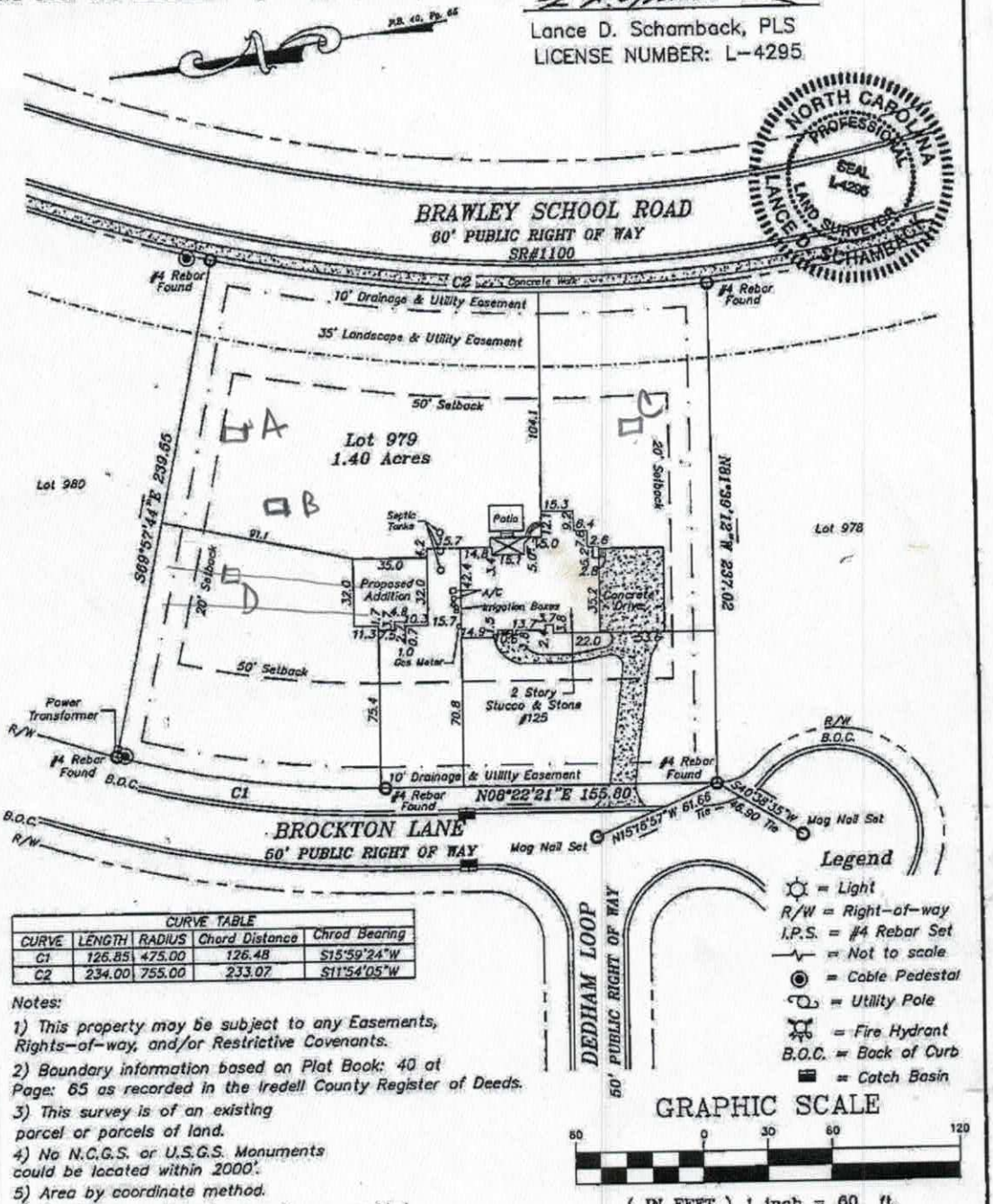
n Acceptance Rate (LTAR): gal/day/ft²

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



I Lance D. Schamback, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description and/or Map Book: 40, Page 65. That the boundaries not surveyed are clearly indicated as drawn from information as shown survey; that the ratio of precision as calculated is 1: 10,000+ that this plat was prepared in accordance with G.S. 89-C as amended. Witness my original signature, registration number and seal this 12 day of November, A.D. 2018.

Lance D. Schamback, PLS
LICENSE NUMBER: L-4295



CURVE TABLE				
CURVE	LENGTH	RADIUS	Chord Distance	Chrod Bearing
C1	126.85	475.00	126.48	S15°59'24"W
C2	234.00	755.00	233.07	S11°54'05"W

Notes:

1) This property may be subject to any Easements, Rights-of-way, and/or Restrictive Covenants.
2) Boundary information based on Plat Book: 40 at Page: 65 as recorded in the Iredell County Register of Deeds.
3) This survey is of an existing parcel or parcels of land.
4) No N.C.G.S. or U.S.G.S. Monuments could be located within 2000'.
5) Area by coordinate method.
6) No Title Commitment was review or provided

Legend

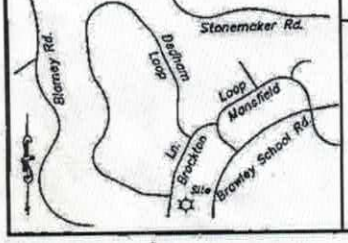
- ☼ = Light
- R/W = Right-of-way
- I.P.S. = #4 Rebar Set
- = Not to scale
- = Cable Pedestal
- = Utility Pole
- = Fire Hydrant
- B.O.C. = Back of Curb
- = Catch Basin

GRAPHIC SCALE

60 0 30 60 120

(IN FEET) 1 inch = 60 ft.

Vicinity Map
Not To Scale



Boundary Survey
FOR
Christopher G. Nicholson & Nicloe C. Nicholson

PROPERTY DESCRIPTION
Lot 979,
The Point on Norman,
Phase 9, Map 1
P.B. 40 at Pg. 65
Davidson Township, Iredell County, NC

SCALE: 1" = 60'
FIELD BOOK:
FILE: 2018-277
TAX PIN NO: 4624277879

Schamback Surveying, P.A.
Post Office Box 4143
Mooresville, NC 28117
(704) 622-9915
C-3218

Soil Pit Locations

11/30/18 Room for 1 drainline (probab repair due to land 15-16ft of low

Int. Redraw AP240422

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

$320

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

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: ( ) Survey Plat, scaled no more than 1 inch = 60 feet
( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Place an (X) beside whichever is submitted if applicable

Applicant Information: (PRINT CLEARLY)

Applicant Name: Christopher Nicholson Address: 125 Brockton Lane Zip: 28117
Applicant Email: bdswink@proximityarchitecture.com Phone: 704.654.0809 Alt. Phone: _____
Owner Name: Christopher Nicholson Address: 125 Brockton Lane Zip: 28117
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 125 Brockton Lane Mooresville, NC 28117
Subdivision Name: _____ Section/Phase: _____ Lot Number: _____
Driving Directions: Brawley School to point T/R to site

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: 6
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE

(X) 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 (X) 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 (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (X) 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: _____ 9.13.19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

12/6/18
Emailed Dwaine regarding Pits

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

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

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Place an (X) beside whichever is submitted if applicable ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Rob 704 728 564

Applicant Information: (PRINT CLEARLY)

Applicant Name: L. Dwaine Swink, AIA, NCARB Address: 862 Brawley School Rd., Ste 205 Zip: 28117
Applicant Email: ldswink@proximityarchitecture.com Phone: 980-444-0057 x 303 Alt. Phone:
Owner Name: Christopher G. Nicholson Address: 126 Brockton Lane Zip: 28117
Owner Email: chris@genesisrea.com Phone: 516-356-9828 Alt. Phone:

Property Information:

Street Address: 125 Brockton Lane, Mooresville, NC 28117
Subdivision Name: The Point on Norman Section/Phase: 9 Lot Number: 979
Driving Directions: Williamson Rd; T/R onto Brawley School Rd; T/R onto Mansfield Loop; T/L onto Brockton Ln

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

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

Maximum Number of Bedrooms: 5
Maximum Number of Occupants: 5
( ) Swimming Pool
(x) Other Addition/Structure:

CHECK FOUNDATION TYPE
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( ) 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:

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( ) Multi-connection Well Number of Houses: Number of Persons:
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Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: 2006
(x) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other:

Please answer the following to the best of your ability:
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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: L. Dwaine Swink 11/13/18 11.13.18.
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Add 125 ft + 40 ft = 165 ft
1st line 23' to Front
33
42
51
Addition 75' to Front

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 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, Chris G. Nicholson, am the legal owner(s) of the property located at 125 Borckton Ln, Mooresville, NC 28117, identified as PIN (Parcel Identification Number) 4624277879, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) L. Dwaine Swink, AIA, NCARB, Proximity Architecture, PC, 862 Brawley School Rd, Suite 205, 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.

SIGN HERE

Chris G. Nicholson — 1/13/17

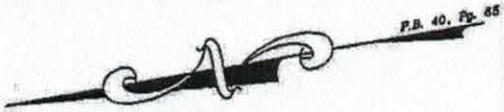
Signature of Owner(s) — Date

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

I Lance D. Schamback, certify that this plat was drawn under my supervision from an actual survey made under my supervision (deed description and/or Map Book: 40, Page 65. That the boundaries not surveyed are clearly indicated as drawn from information as shown survey; that the ratio of precision as calculated is 1: 10,000+ that this plat was prepared in accordance with G.S. 89-C as amended. Witness my original signature, registration number and seal this 12 day of November, A.D. 2018.

Lance D. Schamback, PLS
LICENSE NUMBER: L-4295





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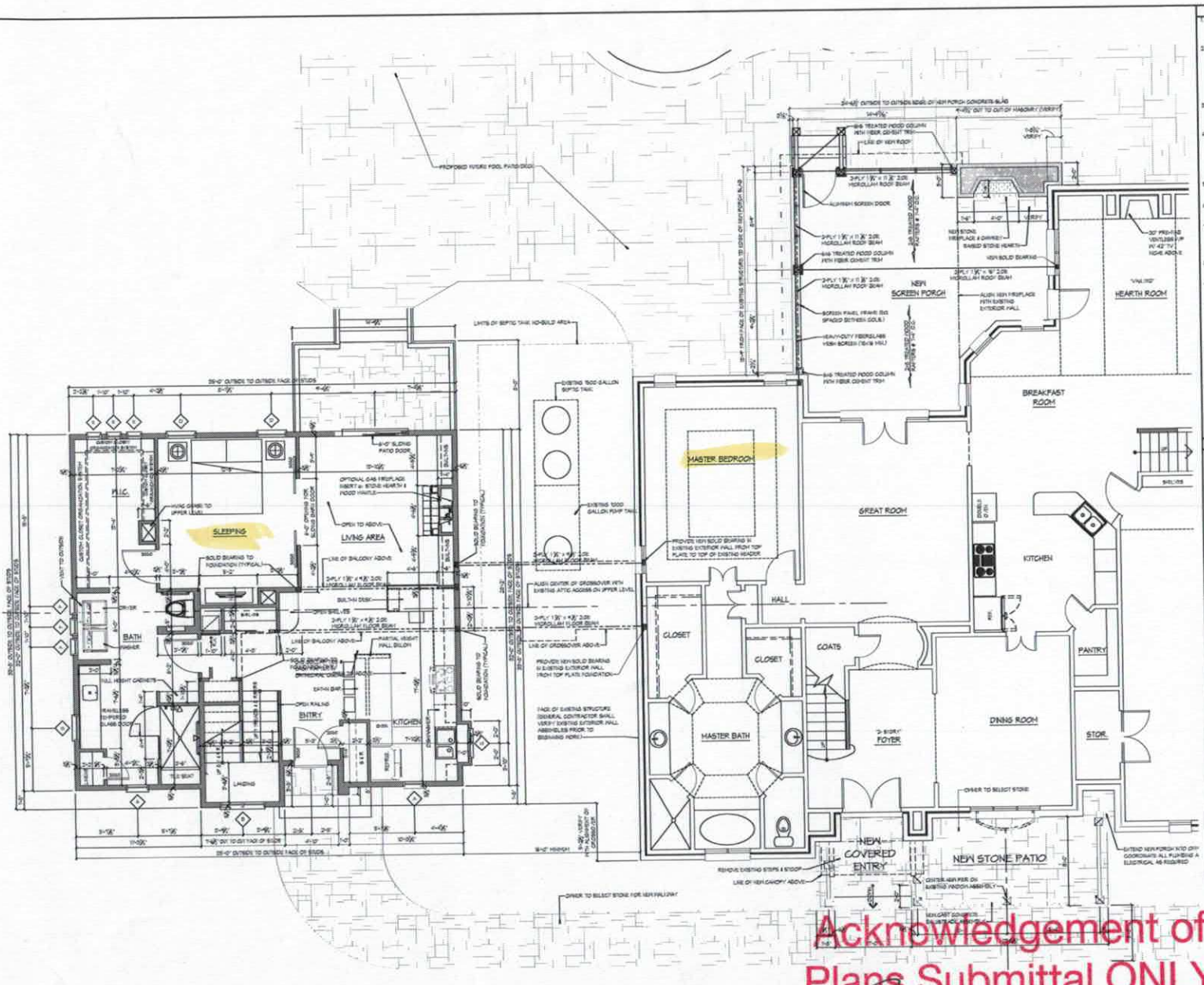
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- = Not to scale
- = Cable Pedestal
- = Utility Pole
- = Fire Hydrant
- B.O.C. = Back of Curb
- = Catch Basin

GRAPHIC SCALE

60 0 30 60 120

(IN FEET) 1 inch = 60 ft.



ADDITION AREA: 1121 S.F. HEATED

GENERAL NOTES

1. GENERAL CONTRACTOR IS RESPONSIBLE FOR INSPECTING THE SITE AND VERIFYING ALL EXISTING CONDITIONS. NO CLAIM FOR EXTRA OR ADDITIONAL WORK OR MATERIAL ARISING FROM LACK OF KNOWLEDGE OF SUCH CONDITIONS WILL BE ALLOWED.
2. THE CONTRACTOR SHALL VERIFY ALL GRADES, LEVELS, CONDITIONS AND DIMENSIONS AND SHALL HAVE ALL NECESSARY MEASUREMENTS AT THE SITE. NO EXTRA CHARGE OR CHANGE ORDER SHALL BE ALLOWED BECAUSE OF DIFFERENCES BETWEEN ACTUAL MEASUREMENTS AND THE DIMENSIONS INDICATED ON THE DRAWINGS. ANY DISCREPANCIES OR DIFFERENCES SHALL BE PROMPTLY REPORTED TO THE ARCHITECT OF RECORD IN WRITING PRIOR TO COMPLETING THE AFFECTED WORK.
3. GENERAL CONTRACTOR AND ALL SUBCONTRACTORS SHALL BE RESPONSIBLE FOR ERECTING, MAINTAINING, AND SUPERVISING ALL SAFETY PRECAUTIONS AND PROGRAMS IN CONNECTION WITH THE WORK AS PRUDENT OR REQUIRED BY LAW.
4. GENERAL CONTRACTOR SHALL ERECT AND MAINTAIN, AS REQUIRED BY EXISTING CONDITIONS AND PROGRESS OF THE WORK, ALL REASONABLE SAFEGUARDS FOR SAFETY AND PROTECTION, INCLUDING POSTING DANGER SIGNS AND OTHER WARNINGS AGAINST HAZARDS, PROMULGATING SAFETY REGULATIONS AND NOTIFYING OWNERS AND USERS OF ADJACENT UTILITIES.
5. GENERAL CONTRACTOR SHALL SUBMIT A CONSTRUCTION SCHEDULE TO OWNER FOR APPROVAL PRIOR TO COMMENCING DEMOLITION AND/OR CONSTRUCTION.
6. ITEMS SHOWN AS BEING REMOVED SHALL BE REMOVED WITH CAUTION. GENERAL CONTRACTOR SHALL NOTIFY ARCHITECT OF ANY DISCREPANCIES WITH DRAWINGS.
7. GENERAL CONTRACTOR IS RESPONSIBLE FOR ALL DEMOLITION REQUIRED TO ACHIEVE THE LAYOUTS AS SHOWN ON DRAWINGS. GENERAL CONTRACTOR SHALL COORDINATE INFORMATION ON DEMOLITION PLAN WITH GENERAL BUILDING DRAWINGS AND SHALL NOT RELY SOLELY ON DEMOLITION PLAN.
8. REPAIR ALL EXISTING WALLS WHERE DEMOLITION OF EXISTING MATERIALS ARE REMOVED. AT THESE OCCURRENCES PROVIDE SMOOTH SURFACES FOR APPLICATION OF NEW FINISHES.
9. PREPARE ALL EXISTING VERTICAL AND HORIZONTAL SURFACES FOR APPLICATION OF FINISHES. PROVIDE A FIRM, SMOOTH, UNIFORM SURFACE.
10. GENERAL CONTRACTOR SHALL PROTECT EXISTING UTILITIES AND NEW WORK TO MAINTAIN FULL OPERATION OF RESIDENCE DURING CONSTRUCTION. GENERAL CONTRACTOR SHALL SCHEDULE ANY INTERRUPTION OF UTILITIES WITH OWNER. GENERAL CONTRACTOR SHALL OBTAIN OWNERS WRITTEN APPROVAL PRIOR TO INTERRUPTION OR DISCONNECTION OF ANY UTILITIES.
11. PROVIDE TEMPORARY WEATHER PROTECTION DURING INTERVAL BETWEEN SELECTIVE DEMOLITION OF EXISTING CONSTRUCTION ON EXTERIOR SURFACES AND NEW CONSTRUCTION, TO PREVENT WATER LEAKAGE AND DAMAGE TO STRUCTURE AND INTERIOR AREAS.
12. PROTECT WALLS, CEILINGS, FLOORS, AND OTHER EXISTING FINISH WORK THAT ARE TO REMAIN OR THAT ARE EXPOSED DURING SELECTIVE DEMOLITION OPERATIONS.
13. COVER AND PROTECT FURNITURE, FURNISHINGS, AND EQUIPMENT THAT HAVE NOT BEEN REMOVED.

PLAN LEGEND

EXISTING PARTITION TO REMAIN

NEW WALLS

NO WORK IN THIS AREA (BONE HIGH). WORK MAY BE REQUIRED IN THESE AREAS FOR COMPLETE SYSTEM INSTALLATION

GENERAL PLAN NOTES

1. DIMENSIONS ARE FACE TO FACE OF FINISH MATERIAL UNLESS NOTED OTHERWISE. CONTRACTOR SHALL ADJUST DIMENSIONS AS REQUIRED TO REFLECT ACTUAL DEPTH OF WALL ASSEMBLIES.
2. NEW BRACED WALL PANEL NOTES:
   - 2.1. PROVIDE 7/16" OSB SHEATHING CONTINUOUS ON ALL NEW EXTERIOR WALLS.
   - 2.2. OSB SHALL BE ATTACHED TO WALL STUDS USING 8d NAILS @ 6" O.C. AT PANEL EDGES AND @ 12" O.C. IN PANEL FIELD (INTERMEDIATE SUPPORTS).
   - 2.3. INSTALL BLOCKING ALONG OSB WALL PANEL EDGES AT 3' O.C. AND 8' O.C. AT NITED PREVENTS FRAMING WHEN LESS THAN 50% BUT MORE THAN 25% OF WALL IS SHEATHED.
3. REMOVE EXISTING WALL SHEATHING ON PORTION OF EXISTING EXTERIOR WALL EXPOSED DURING DEMOLITION. INSTALL NEW 7/16" OSB TO AREA OF EXISTING EXTERIOR WALL. ATTACH AS OUTLINED IN ITEM 2 ABOVE. FINISH WITH ONE LAYER 5/8" GYPSUM BOARD AFTER NEW ADDITION IS ENCLOSED.
4. NEW INTERIOR WALLS SHALL BE A MINIMUM OF 2x4 SPF STUDS AT 1'-4" O.C. TYPICAL UNLESS NOTED OR DIMENSIONED OTHERWISE.
5. VERIFY ALL DIMENSIONS PRIOR TO INSTALLATION OF ANY WORK.
6. INSTALL MOISTURE RESISTANT GYPSUM BOARD IN ALL BATHROOMS AND WET AREA LOCATIONS.
7. PROVIDE NEW HVAC SYSTEM & DUCTWORK AS REQUIRED TO SERVE ALL NEW PARTITIONS, PLUMBING FIXTURES AND DOORS AS REQUIRED.
8. PROVIDE NEW ELECTRICAL WIRING, DEVICES & FIXTURES AS INDICATED (EXACT LOCATIONS & SELECTIONS WITH OWNER).
9. ALL NEW WALL SURFACES ADJOINING EXISTING WALL SURFACES SHALL BE FINISHED TO EXISTING FACE UNLESS NOTED OTHERWISE.
10. REMOVE AND REPLACE EXISTING ROOFING THAT MAY BE DISTURBED IN ONE DAY BY NEW ROOFING AND SO THAT BUILDING INTERIOR REMAINS WATERTIGHT AND WEATHERTIGHT.
11. PROVIDE TEMPORARY WEATHER PROTECTION DURING INTERVAL BETWEEN SELECTIVE DEMOLITION OF EXISTING CONSTRUCTION ON EXTERIOR SURFACES AND NEW CONSTRUCTION, TO PREVENT WATER LEAKAGE AND DAMAGE TO STRUCTURE AND INTERIOR AREAS.
12. PROTECT WALLS, CEILINGS, FLOORS, AND OTHER EXISTING FINISH WORK THAT ARE TO REMAIN OR THAT ARE EXPOSED DURING SELECTIVE DEMOLITION OPERATIONS.
13. COVER AND PROTECT FURNITURE, FURNISHINGS, AND EQUIPMENT THAT HAVE NOT BEEN REMOVED.

proximity
architecture, pc
mooresville, nc 28117
www.proximityarchitecture.com

REVISIONS

MARK	DATE	DESCRIPTION
1	12/17/18	UNDER ADJACENT DORMER

PRO-BID ISSUE POST-BID ISSUE

NEW ADDITION FOR:
MR. & MRS. CHRIS NICHOLSON
125 BROCKTON LANE
MOORESVILLE, NC 28117

OWNER
MR. & MRS. CHRIS NICHOLSON
125 BROCKTON LANE
MOORESVILLE, NC 28117

ISSUE DATES:

PROJECT NO.: 2018-0003
DRAWN BY: LSW
CHECKED BY:

LOWER LEVEL FLOOR PLAN & DETAILS

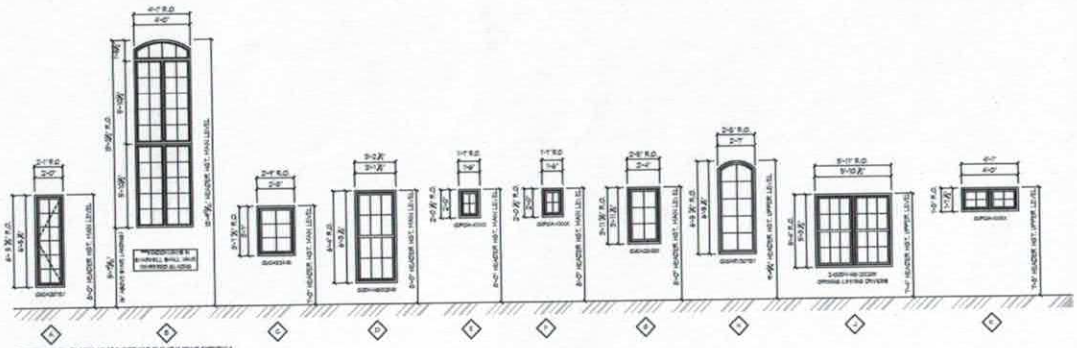
A-1
SHEET OF

NOT RELEASED FOR CONSTRUCTION

Acknowledgement of Plans Submittal ONLY!

Date 2/14/19

Date 1/9/19



1. HEADERS SHALL BE SIZED TO BE SUPPORTED OVER OPENINGS AS SHOWN ON THE DRAWINGS AND SHALL BE SUPPORTED ON EACH END BY A MINIMUM OF ONE 2" STUD.
2. ALL NEW WINDOWS SHALL HAVE A U-FACTOR OF 0.35 OR LESS AND A SHGC OF 0.30 OR LESS.
3. ALL GLAZING SHALL BE 1/4" THICK MINIMUM WHERE THE EXPOSED AREA OF AN INDIVIDUAL PANE IS GREATER THAN 9 SQUARE FEET, WHERE THE BOTTOM EDGE OF THE GLASS IS LESS THAN 18" ABOVE THE FLOOR, WHERE THE TOP EDGE OF THE GLASS IS MORE THAN 36" ABOVE THE FLOOR, WHERE GLASS IS WITHIN 24" OF A DOOR, AND WHERE GLASS IS WITHIN A 24" ARC OF THE VERTICAL EDGE OF A DOOR IN THE CLOSED POSITION AND WITHIN 60" OF THE FLOOR. ALL GLAZING SHALL BE TEMPERED GLAZING AS INDICATED AND PER APPLICABLE CODES.
4. DOOR SHALL BE 1-3/4" THICK, SOLID CORE WOOD WITH A 20 MINUTE FIRE RATING.
5. DOUBLE HUNG WINDOWS SHALL BE TILT-IN FOR EASY CLEANING AND SHALL BE EQUIPPED WITH A LOCKING DEVICE.
6. PROVIDE FULL WEATHER-STRIPPING AT ALL EXTERIOR DOORS.
7. PROVIDE OPENING LIMITING DEVICES ON WINDOWS INSTALLED IN ACCORDANCE WITH SECTION R612 OF THE 2012 NORTH CAROLINA RESIDENTIAL BUILDING CODE.

WINDOW SCHEDULE

2 / A-2 — 1/4" = 1'-0"

GENERAL NOTES

1. GENERAL CONTRACTOR IS RESPONSIBLE FOR INSPECTING THE SITE AND VERIFYING ALL EXISTING CONDITIONS. NO CLAIM FOR EXTRA OR ADDITIONAL WORK OR MATERIAL ARISING FROM LACK OF KNOWLEDGE OF SUCH CONDITIONS WILL BE ALLOWED.
2. THE CONTRACTOR SHALL VERIFY ALL GRADES, LEVELS, CONDITIONS AND DIMENSIONS AND SHALL MAKE ALL NECESSARY MEASUREMENTS AT THE SITE. NO EXTRA CHARGE OR CHANGE ORDER SHALL BE ALLOWED BECAUSE OF DIFFERENCES BETWEEN ACTUAL MEASUREMENTS AND THE DIMENSIONS INDICATED ON THE DRAWINGS. ANY DISCREPANCIES OR DIFFERENCES SHALL BE PROMPTLY REPORTED TO THE ARCHITECT OF RECORD IN WRITING PRIOR TO COMPLETING THE AFFECTED WORK.
3. GENERAL CONTRACTOR AND ALL SUBCONTRACTORS SHALL BE RESPONSIBLE FOR INITIATING, MAINTAINING, AND SUPERVISING ALL SAFETY PRECAUTIONS AND PROGRAMS IN CONNECTION WITH THE WORK AS PRUDENT OR REQUIRED BY LAW.
4. GENERAL CONTRACTOR SHALL ERECT AND MAINTAIN, AS REQUIRED BY EXISTING CONDITIONS AND PROGRESS OF THE WORK, ALL REASONABLE SAFEGUARDS FOR SAFETY AND PROTECTION, INCLUDING POSTING DANGER SIGNS AND OTHER WARNINGS AGAINST HAZARDS, PROMULGATING SAFETY REGULATIONS AND NOTIFYING OWNERS AND USERS OF ADJACENT UTILITIES.
5. GENERAL CONTRACTOR SHALL SUBMIT A CONSTRUCTION SCHEDULE TO OWNER FOR APPROVAL PRIOR TO COMMENCING DEMOLITION AND/OR CONSTRUCTION.
6. ITEMS SHOWN AS REMO-VED SHALL BE REMO-VED NEW CAUTION: GENERAL CONTRACTOR SHALL NOTIFY ARCHITECT OF ANY DISCREPANCIES WITH DRAWINGS.
7. GENERAL CONTRACTOR IS RESPONSIBLE FOR ALL DEMOLITION REQUIRED TO ADHERE TO THE LAYOUTS AS SHOWN ON DRAWINGS. GENERAL CONTRACTOR SHALL COORDINATE INFORMATION ON DEMOLITION PLAN WITH GENERAL BUILDING DRAWINGS AND SHALL NOT RELY SOLELY ON DEMOLITION PLAN.
8. REPAIR ALL EXISTING WALLS WHERE DEMOLITION OF EXISTING MATERIALS ARE REMOVED. AT THOSE OCCURRENCES PROVIDE SURFACE TO CHECK FOR APPROVAL PRIOR TO COMMENCING APPROPRIATE SURFACES FOR APPLICATION OF NEW FINISHES.
9. PREPARE ALL EXISTING VERTICAL AND HORIZONTAL SURFACES FOR APPLICATION OF FINISHES. PROVIDE A FIRM, SMOOTH UNIFORM SURFACE.
10. GENERAL CONTRACTOR SHALL PROTECT EXISTING UTILITIES AND WORK TO MAINTAIN FULL OPERATION OF REMAINING DURING CONSTRUCTION. GENERAL CONTRACTOR SHALL SCHEDULE ANY INTERRUPTION OF UTILITIES WITH OWNER. GENERAL CONTRACTOR SHALL OBTAIN OWNER'S WRITTEN APPROVAL PRIOR TO INTERRUPTION OR DISCONNECTION OF ANY UTILITIES.
11. PROVIDE TEMPORARY WEATHER PROTECTION, DURING INTERVAL BETWEEN SELECTIVE DEMOLITION OF EXISTING CONSTRUCTION ON EXTERIOR SURFACES AND NEW CONSTRUCTION, TO PREVENT WATER LEAKAGE AND DAMAGE TO STRUCTURE AND INTERIOR AREAS.
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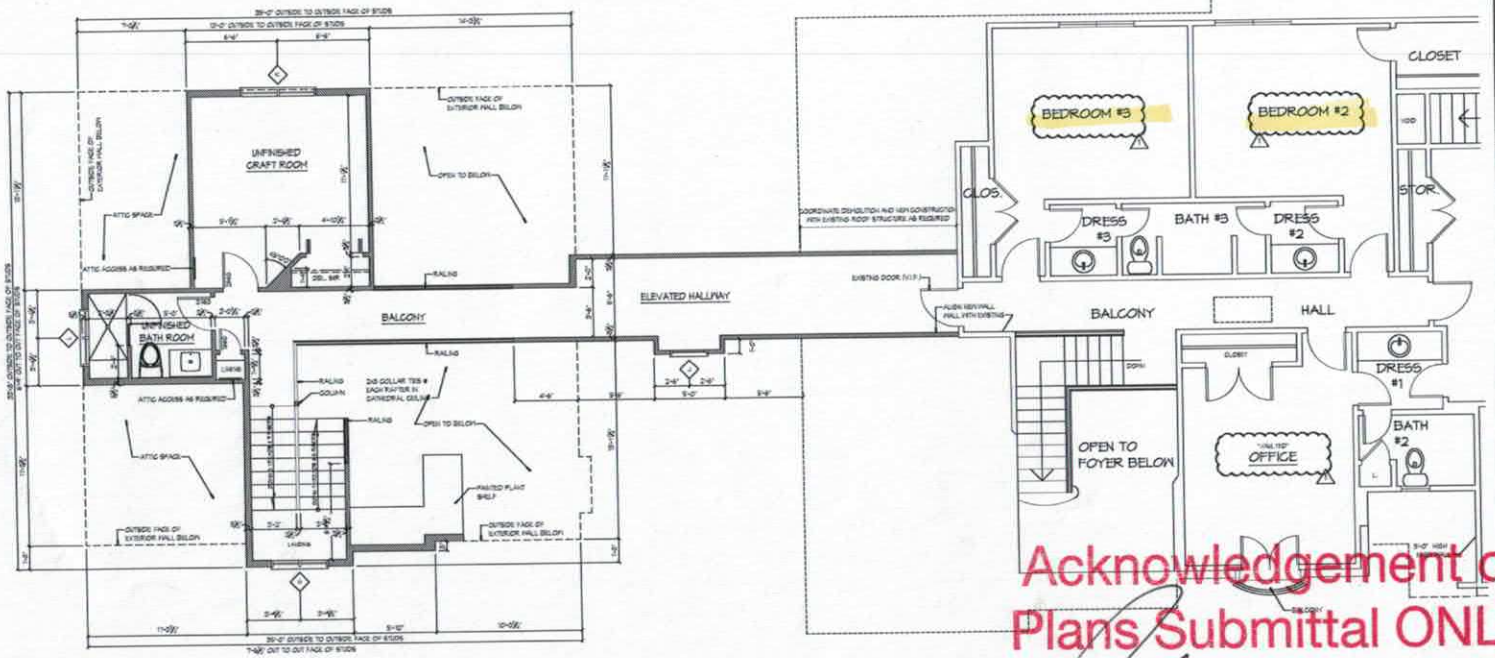
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UNFINISHED ADDITION AREA: 544 S.F. UNHEATED

1 / A-2 — UPPER LEVEL FLOOR PLAN — 1/4" = 1'-0"

Acknowledgement of Plans Submittal ONLY!

Date: 2/4/19

Date 1/9/19

proximity
architecture, pc

NEW ADDITION FOR:
MR. & MRS. CHRIS NICHOLSON
125 BROOKSTEN LANE
MOORESVILLE, NC 28117

OWNER
MR. & MRS. CHRIS NICHOLSON
125 BROOKSTEN LANE
MOORESVILLE, NC 28117

MARK	DATE	DESCRIPTION

PRE-BID ISSUE POST-BID ISSUE

ISSUE DATES:

PROJECT NO.: 2018-0001
DRAWN BY: LSS
CHECKED BY:

UPPER LEVEL FLOOR PLAN & DETAILS

A-2
SHEET OF

NOT RELEASED FOR CONSTRUCTION

IREDELL COUNTY

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

FILE COPY

APPLICATION NUMBER
240422
Issue Date: 11/19/2018

ZONING PERMIT

Parcel Number	Street Address	Jurisdiction
4624277879.000	125 BROCKTON LANE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: SAYRE DAVID+ANGELA	Applicant: PROXIMITY ARCHITECTURE
Address: 125 BROCKTON LANE	Address: 862 BRAWLEY SCH RD, STE 205
MOORESVILLE, NC 28117	MOORESVILLE, NC 28117
Phone:	Phone: 980-444-0057 x303

Use Requested	Zone Code
ADDING A BEDROOM AND GUEST SUITE	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.405	35.00	35.00	15.00	15.00	CACL	X

Remarks:

PAID
Credit
11-19-18

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: See Attached Date: _____

Permit Number	159466	TOTAL FEES:	$ 77.25