ICHD–ENVIRONMENTAL HEALTH DIVISION

KW

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

PERMIT # 230616

PIN # 4626447773

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

APPLICANT/OWNER: Rollans Soil & Env. Services / Nance — APPLICANT ADDRESS: P.O. Box 832 Mooresville, NC 28115

SITE ADDRESS: 109 Chatfield Cove M'ville / Crafton — PHONE: 704-746-5046 — ALT. PHONE

SITE DIRECTIONS: Brawley School Rd TR, South Fork, stay right onto Agnew TL Chatfield Cove on L — SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Chat — SECTION: 8 — LOT # 54 — LOT AREA: .96 Acre — DESIGN FLOW: 480 gpd — L.T.A.R.: .3

Septic Tank	1000	(gal)	STB	1012	Date	4-7-19	☒ New System	☐ Repair	☐ Expansion	System Type: I II III (IV) V VI	
Pump Tank	1000	(gal)	PT	17	Date	3-18-19	System Description:	LP PPBPS			
Pump Make			Model		Serial #		Repair System Description:	LP PPBPS			
# Nitrification Fields	1		# Lines	6	Linear Ft:	300	Maintenance Agreement Required:	☒ YES	☐ NO		
Trench Width	24"		Trench Bottom Depth(Low side)	30"	Gravel Depth	N/A		☐ GRAVITY	☒ PRESSURE		

☒ Residence — No. Bedrooms: 4
☐ Business — No. Persons: 8
☐ Other — No. Employees:
☐ Slab ☐ Crawl Space
☒ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: (Revised tank(s) location)

TANKS CHECKED 6-7-19
TANKS NEED RISERS 6-7-19
BCW

INITIAL SITE SKETCH

See attached, approved Site plan by Rollans Soil & Environmental Services, PA

AS BUILT SKETCH

	Date	Initials
Drain Lines Checked	07/26/19	PJB
Tanks Checked	6-7	BW
Pressure Manifold or Valve Box Checked	07/26/19	PJB
Pressure Head Set	07/26/19	PJB
Electrical Checked	07/26/19	PJB
Floats Set	07/26/19	PJB
Alarm Checked	07/26/19	PJB
Maintenance Contract (Y) / N	08/02/19	PJB

*retaining wall does NOT have footers or foundation drain

As Built on next page

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: [signature] — Date: 5/24/19 — Installed by: SteveT

IMPROVEMENT PERMIT by: Marian Stogner — Date: 5/24/19 — OPERATION PERMIT by: Patrick J Boyle III — Date: 08/02/19

AUTHORIZATION TO CONSTRUCT by: Marian Stogner — Date: 5/24/19 — 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.

ICHD–ENVIRONMENTAL HEALTH DIVISION

KW

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

PERMIT # 230616

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

PIN # 4626447773

APPLICANT/OWNER: Rollans Soil & Env. Services / Nancy

APPLICANT ADDRESS: P.O. Box 832 Mooresville, NC 28115

SITE ADDRESS: 109 Chatfield Cove M'ville / Crafton

PHONE: 704-746-5046 ALT. PHONE

SITE DIRECTIONS: Brawley School Rd TR Southfork, stay right onto Agnew TL Chatfield Cove on L

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: CL & T

SECTION: 8 LOT # 54 LOT AREA: .96 Acre

DESIGN FLOW: 480 gpd L.T.A.R.: .3

Septic Tank 1000 (gal) STB Date

Pump Tank 1000 (gal) PT Date

Pump Make Model Serial #

Nitrification Fields 1 # Lines 6 Linear Ft: 300

Trench Width 24" Trench Bottom Depth(Low side) 30" Gravel Depth N/A

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

System Description: LP PPBPS

Repair System Description: LP PPBPS

Maintenance Agreement Required: ☒ YES ☐ NO

☐ GRAVITY ☒ PRESSURE

☒ Residence No. Bedrooms 4

☐ Business No. Persons 8

☐ Other No. Employees

☐ Slab ☐ Crawl Space

☒ Basement w/plumbing ☐ Basement w/o plumbing

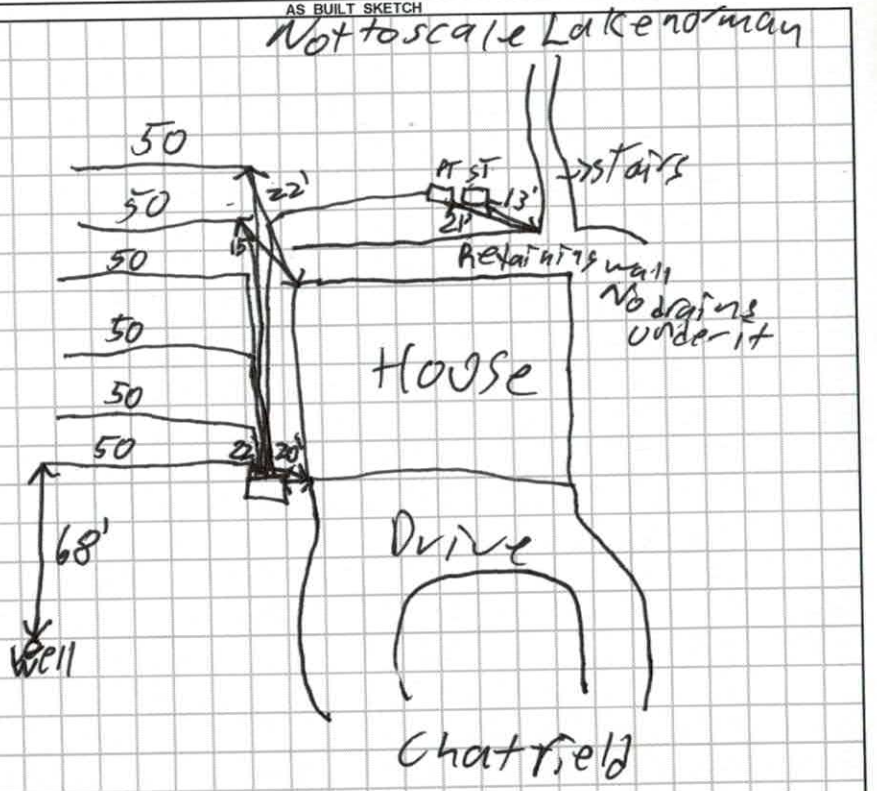
Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: (Revised tank(s) location)

INITIAL SITE SKETCH

See attached, approved Site plan by Rollans Soil & Environmental Services, PA

AS BUILT SKETCH



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: 5/24/19 Installed by:

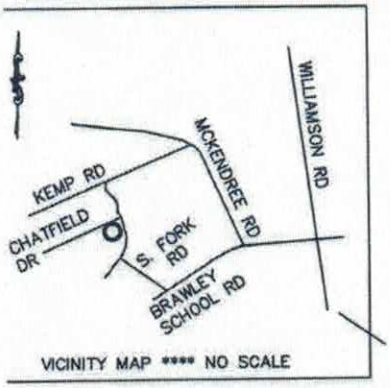
IMPROVEMENT PERMIT by: Maria Dotson Date: 5/24/19 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Maria Dotson Date: 5/24/19 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.

LINE	DIRECTION	DISTANCE
L1	S 42°32'00" W	44.62'
L2	S 01°05'00" E	39.01'
L3	S 25°01'00" E	31.38'
L4	S 10°50'00" W	48.15'
L5	S 16°05'00" W	41.00'
L6	S 41°40'10" W	46.50'
L7	N 50°50'20" W	61.32'
L8	N 27°23'15" E	11.80'
L9	N 61°56'46" W	60.02'
L10	N 40°27'08" W	64.47'
L11	N 27°23'15" E	11.92'

Approved
5/24/19
MD



760 CONTOUR FOLLOWS SEAWALL PER ACTUAL FIELD SURVEY

LAKE NORMAN

761 CONTOUR PER ACTUAL FIELD SURVEY

50' BUFFER FROM 760 CONTOUR

EXISTING 3/4" REBAR

EXISTING 3/4" REBAR

PLAT BK. 15 PG. 36

30' BUFFER FROM 760 CONTOUR

Supply line

LOT 54
0.96 ACRES

15' SIDE SETBACK

195.83'

N 40°27'08" W

S 55°46'00" E (BASE BEARING)

200.65'

Proposed House

LOT 53
BRIAN DEEGAN
2429\1741

LOT 55
THOMAS CARNAGGIO
2172\1616

15' SIDE

35' FRONT

PINK

TANK

ORANGE

DRIVE

EXISTING HOUSE TO BE ABANDONED/REMOVED

EXISTING WELL TO BE PROPERLY ABANDONED

E.C.M.

E.I.P.

L11

153.56

N27°23'15"E

R/W

PROPOSED WELL

EXISTING SEPTIC TANK & DRAINFIELDS TO BE PROPERLY ABANDONED

EXISTING PAVEMENT

CHATFIELD COVE DRIVE
60' R/W

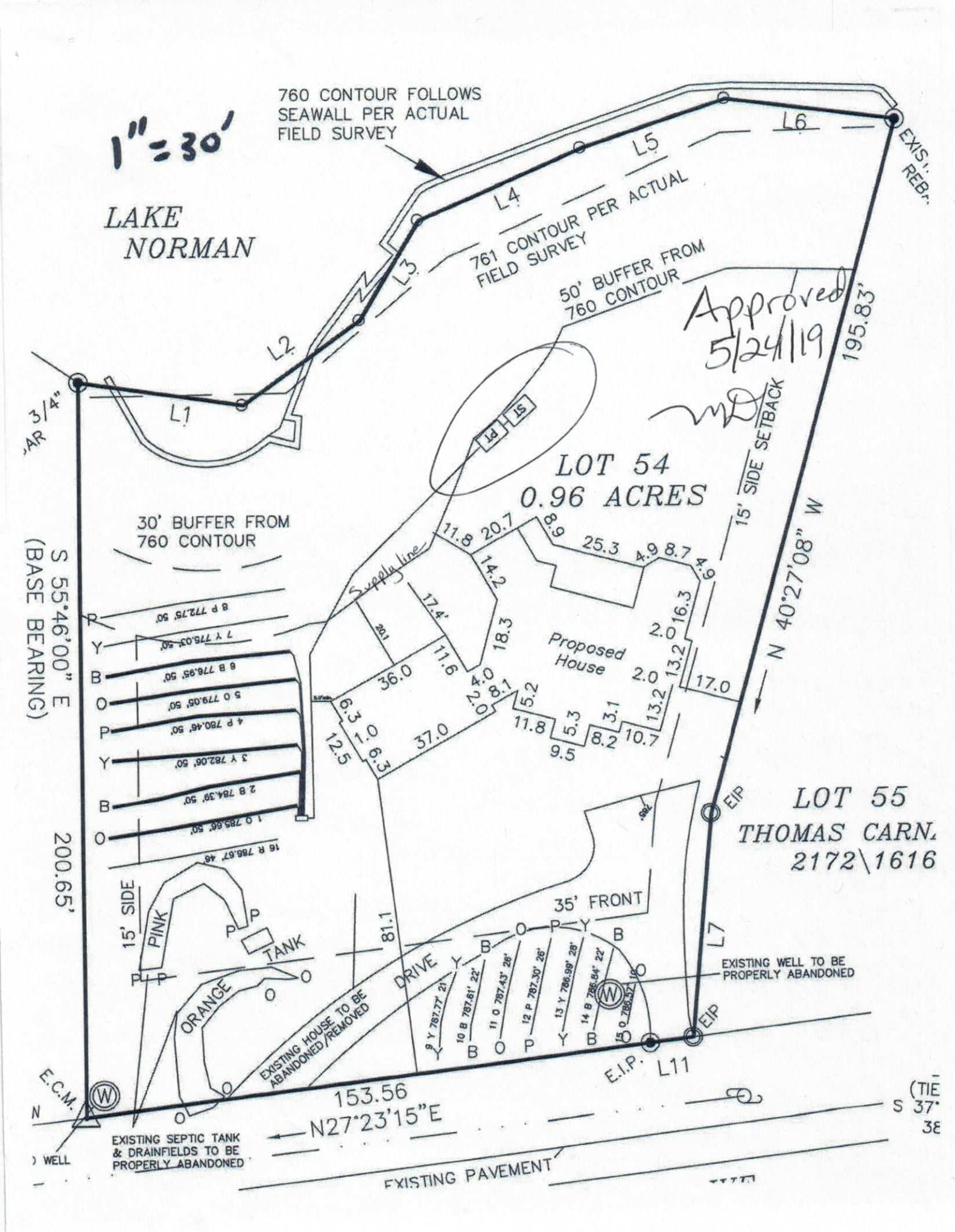
R/W

E.C.M.

(TIE ONLY)
S 37°52'22" W
384.43'

0' 25' 50' 100'

SCALE IN FEET


1"=30'
760 CONTOUR FOLLOWS SEAWALL PER ACTUAL FIELD SURVEY
LAKE NORMAN
761 CONTOUR PER ACTUAL FIELD SURVEY
50' BUFFER FROM 760 CONTOUR
Approved 5/24/19
30' BUFFER FROM 760 CONTOUR
LOT 54
0.96 ACRES
15' SIDE SETBACK
Proposed House
Supply line
LOT 55
THOMAS CARN.
2172\1616
S 55°46'00" E (BASE BEARING)
200.65'
N 40°27'08" W
195.83'
153.56
N27°23'15"E
35' FRONT
15' SIDE
PINK
TANK
ORANGE
DRIVE
81.1
EXISTING HOUSE TO BE ABANDONED/REMOVED
EXISTING WELL TO BE PROPERLY ABANDONED
EXISTING SEPTIC TANK & DRAINFIELDS TO BE PROPERLY ABANDONED
EXISTING PAVEMENT
E.C.M.
E.I.P.
EIP
L1
L2
L3
L4
L5
L6
L7
L11

LP PPBPS SYSTEM
FOR WASTEWATER TREATMENT

Approved
10/9/17

Owner/Applicant:	Nancy Crafton
Current Address:	1517 Barrington Way Court Winston Salem, NC 27106
Phone:	704.746.5046
County:	Iredell
Location:	CL&T Lot 54
Source of Wastewater Flow:	4 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	480 gpd
System Flow:	29.52 gpm

Design Specifications

Drainfield Size:	300
Loading Rate (gpd/ft.^{2}):	0.3
Depth of Gravel in Trench:	NA (PPBPS)
Gravel Size:	NA (PPBPS)
Trench Depth:	30 in., Repair 30 in. Trench Depth
Trench Width:	24 in.
Septic Tank Size:	1000
Pump Tank Size:	1000
Estimated Supply Line Length:	60
Supply Line Diameter:	2 in. SCH 40 PVC
Supply Line Volume:	10.44
Dosing Volume:	173.66
Supply Manifold:	N/A
Supply Manifold Length:	N/A
Supply Manifold Volume:	N/A
Recommended Float Controls:	SJE Sensor Float Control Switches as Required for Control Panel or County Approved Equivalents
Recommended Control Panel:	SJE-Rhombus Model 112 (NEMA 4x) Control Panel or County Approved Control Panel.
Pressure Head:	2 ft.
Friction Head:	1.07
Elevation Head:	14.00
Total Dynamic Head:	19.63
Threaded Union:	In Tank
Gate Valves:	1 in Tank 1 per lateral
Check Valves:	In Tank
Anti-Siphon Hole:	NA
Additional Comments:	Soil suitability was performed by Rollans Soil & Environmental Services

CL&T Lot 54

LP PPBPS

DESIGN FLOW (gpd):	480
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.3
TOTAL AREA TRENCH BOTTOM:	600
TOTAL LATERAL LENGTH:	300
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	266.6666667
SUPPLY LINE LENGTH:	60
TOTAL DYNAMIC HEAD:	19.63
MANIFOLD SIZE:	N/A
DOSING VOLUME:	173.66
PUMP TANK DRAW DOWN*:	8.3
SEPTIC TANK SIZE:	1000
PUMP TANK SIZE:	1000

Approved
10/9/17
MD

**Pump tank draw down based on a volume basis of 21 gallons per inch. Draw down may vary among pump tank manufacturers.*

Approved 10/9/17

109 Chatfield Drive (CL&T LOT 54)

Project #: 01-3407

LAYOUT FOR 4 BEDROOM HOME

9/28/2017

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1							
HOUSE CNR	(RIGHT FRONT)				785.00		
P. TANK					777.00		
	EXISTING	SYSTEM			ABANDON		
1	***ORANGE***				***785.66***	***50***	***50***
2	***BLUE***				***784.39***	***50***	***50***
3	***YELLOW***				***782.06***	***50***	***50***
4	***PINK***				***780.46***	***50***	***50***
5	***ORANGE***				***779.05***	***50***	***50***
6	***BLUE***				***776.95***	***50***	***50***
7	YELLOW				775.03	50	50
8	PINK				772.75	50	50
9	YELLOW				787.77	21	21
10	BLUE				787.61	22	22
11	ORANGE				787.43	26	26
12	PINK				787.30	26	26
13	YELLOW				786.99	28	28
14	BLUE				786.84	22	22
15	ORANGE				786.57	10	10
16	RED				786.67	46	46
					Total	**601**	**601**

	LINE LENGTH	LTAR GPD/FT^2	SYSTEM TYPE	SOIL LTAR GPD/FT^2	TRENCH SYSTEM	DISTRIBUTION
**** System***	***300***	***0.300***	***MOD.***	***0.300***	***PPBPS***	**LOW PRESSURE**
Repair	301	0.300	MOD.	***0.300***	PPBPS W/TSII PRETREATMENT	LOW PRESSURE

Notes:

****All lines and elevations located/established by Licensed Surveyor**
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags

Approved 10/9/17 MD

LP PPBPS TAPSHEET -CL&T Lot 54

SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/hole	Trench Area	Number of Panels
1	ORANGE	785.66	50	0.156	0.41	100	12
2	BLUE	784.39	50	0.156	0.41	100	12
3	YELLOW	782.06	50	0.156	0.41	100	12
4	PINK	780.46	50	0.156	0.41	100	12
5	ORANGE	779.05	50	0.156	0.41	100	12
6	BLUE	776.95	50	0.156	0.41	100	12
	total	feet =	300	gal/min =	29.52		72

Des. Flow	480
Pump Run=	5.88
soil LTAR	0.3
LTAR +5%	0.315
LTAR with mod.	0.6
LTAR with mod.. + 5%	0.63

.156 equals 5/32 inch hole

CALCULATIONS

Location 109 Chatfield Drive

Project Number	01-3407	
Lot No:	54	
No. of Bedrooms	4	
Design Flow	480	$^{gal}/_{day}$
LTAR	0.3	$^{gal}/_{ft^2\ day}$
PPBPS? (YES OR NO)	YES	
Supply Line Length	60	ft.
Supply Line Volume	10.44	gal.
Required Feet of Line	266.6667	ft.
Amount of Line from Layout	300	ft.
Gallons per Minute	29.52	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Pump Tank Capacity	1000	gal.
Panel Volume	3.6	gal.
# of Panels	72	
Dosing Volume	173.66	gal.

Note: Dosing Volume based on 67% of # of panels times 3.6 gal/panel

Tank Draw Down	8.3	*Generic Draw Down of 21 gal.per in.*
Pump Run Time	5.88	minutes
Elevation Head	14	ft.
Pressure Head	2	ft.
Friction Factor	1.78	ft./100 ft. *(From the interpolater.)*
Friction Head	1.07	ft.
Total Dynamic Head (+15%)	19.63	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

Sheet 1 of 2
PROPERTY ID #: 46 County
COUNTY: Forsyth

Approved 10/9/17 MD

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

OWNER: Nancy Crafton
ADDRESS: 1517 Barrington Way Ct. Winston Salem NC 27106
PROPOSED FACILITY: 4BR
PROPOSED DESIGN FLOW (.1949): 480 gpd
LOCATION OF SITE: 109 Chatfield Drive, Mocksville NC 27028
APPLICATION DATE: 10/2017
DATE EVALUATED: 9-15-17
PROPERTY SIZE: 0.93 acres
PROPERTY RECORDED: Yes

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
Pit 1	2-3%	0-8"	B Cl wk fi sbk	fr ss sp ssp	few saprolite inclusions	>52"	—	—	PS .3
		8-24"	B/RC mod fi sbk	fr ss sp ssp					
		24-52	R/B C wk med sbk	fr ss sp ssp					
Pit 2	15% L	0-22"	Fill			>84"	—	—	PS .3
		22-45"	RC mod med abk sbk	fr ss sp ssp					
		45-84"	RC wk med sbk	fr ss sp ssp					
Pit 3	20% L	0-7	B clay GR		few saprolite inclusions	76"	—	—	PS .3
		7-15	R B Cl wk med sbk	fr ss sp ssp					
		15-34	RC mod med sbk	fr ss sp ssp					
		34-60"	R/B C wk med	fr ss sp ssp					
4	20%	0-7"	B Cl wk med sbk	fr ss sp ssp	few saprolite inclusions	>60"	—	—	PS .3 .35
		7-18"	R/B C wk med sbk	fr ss sp ssp					
		18-34"	R C wk med sbk	fr ss sp ssp					
		34-64"	R/B Cl wk fi sbk	fr ss sp ssp					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	PPBPS	PPBPS w/ISII
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. Ashley Rollins
OTHER(S) PRESENT: A. Lane Cook

COMMENTS: * Some fill material ~22" must be removed around Pit #2 prior to installation of system.

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

[redacted]

PROPERTY ID #: 4616447771

DATE OF EVALUATION: 8-15-17

COUNTY: Iredell

109 Chatfield

Approved 10/9/17 mc

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
Pit 5	20% L	0-12"	B CL wk med sbk	fr ss sp se sp	few to common saprolite	>60"	—	—	PS .3 — .35
		12-32	R Clay wk med sbk	fr ss sp sap					
		32-62	R/B CL wk fi sbk	fr ss sp se sp					

#230616
$320.00
5-16-19

* Redraw for Moving TANK LOCATIONS

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 1: APPLICATION FORM

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

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

Applicant Information:

Applicant Name: Rollins Soil & Environmental Services **Address:** P.O. Box 832 Mooresville, NC 28115 **Phone:** 704-746-

Owner Name: Nancy Crafton **Address:** 1917 Barrington Way Ct Winston Salem NC 27106 **Phone:**

Property Information:

Street Address: 109 Chatfield Cove Mooresville, NC. 28117

Subdivision Name: Crescent Land + Timber Corp **Section/Phase:** 56 **Lot Number:** 54

Driving Directions:

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure:

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

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

Water Supply:

(✓) 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:** Unknown
( ) 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: [signature]
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

5/13/19
DATE

RECEIVED OCT -4 2017

IREDELL COUNTY HEALTH DEPARTMENT

Revised

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Paid $850.00 #230616

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

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

New L/o

The following optional attachments may also be submitted: (✓) 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:

Applicant Name: Collins Soil & Environmental services **Address:** P.O. BOX 832 Mooresville NC 28115 **Phone:** 704-746-

Owner Name: Nancy Crotton **Address:** 1517 Barrington Way Ct Winston Salem NC 27106 **Phone:**

Property Information:

Street Address: 109 Chatfield cove Mooresville NC 28117

Subdivision Name: Crescent Land + Timber Corp **Section/Phase:** 56 **Lot Number:** 54

Driving Directions:

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure:

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

Non-Residential Site Development:
Type of Business:
Square Footage of Building:
Maximum Number of Employee:
Maximum Number of Seats/Beds/Other:

Water Supply:

(✓) 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:** Unknown
( ) 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: Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

9/28/17
DATE

RECEIVED MAY 14 2018

IREDELL COUNTY HEALTH DEPARTMENT

Paid $75.00

230616

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:

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

Applicant Name: Collins Soil & Environmental services **Address:** P.O. BOX 832 Mooresville, NC 28115 **Phone:** 704-746-5

Owner Name: Nancy Crotton **Address:** 1517 Barrington Way Ct Winston Salem NC 27106 **Phone:**

Property Information:

Street Address: 109 Chatfield cove Mooresville NC, 28117

Subdivision Name: Crescent Land + Timber Corp **Section/Phase:** 56 **Lot Number:** 54

Driving Directions:

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure:

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

Non-Residential Site Development:

Type of Business:
Square Footage of Building:
Maximum Number of Employee:
Maximum Number of Seats/Beds/Other:

Water Supply:

(✓) 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:** Unknown

( ) 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: Nancy A Crotton

Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

5/14/18

DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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.

I, NANCY S CRAFTON, am the legal owner(s) of the property located at 109 CHATFIELD COVE DR MOORESVILLE, NC 28117, identified as PIN (Parcel Identification Number) 462 644 7723, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Samuel Ashley Rollans Rollans Soil & Environmental Services, 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.

Nancy S Crafton 8-26-17 — 8/26/17

Signature of Owner(s) Date Signature of Witness Date

Please return this signed form to the appropriate office:

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

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, _____, 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.

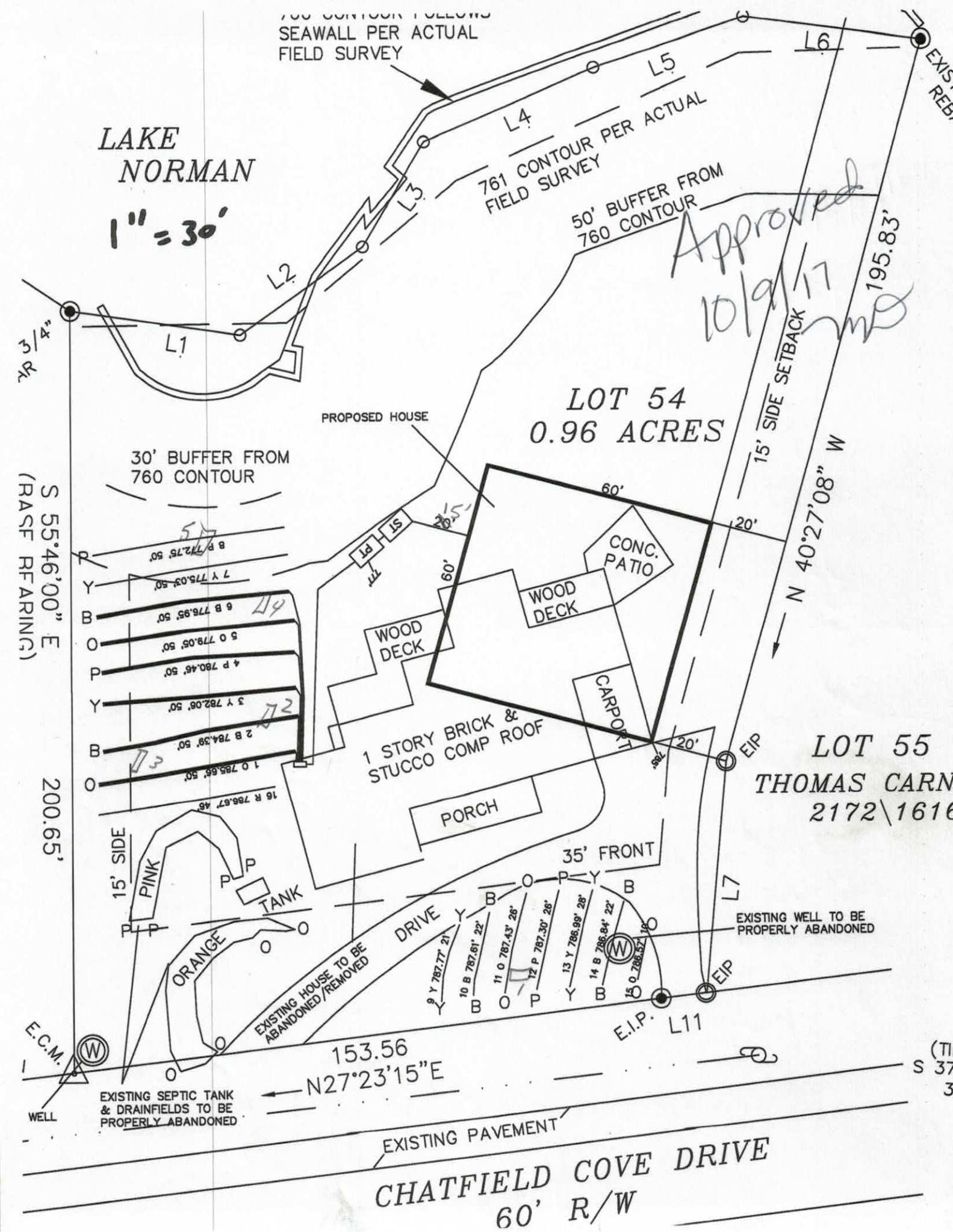
- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

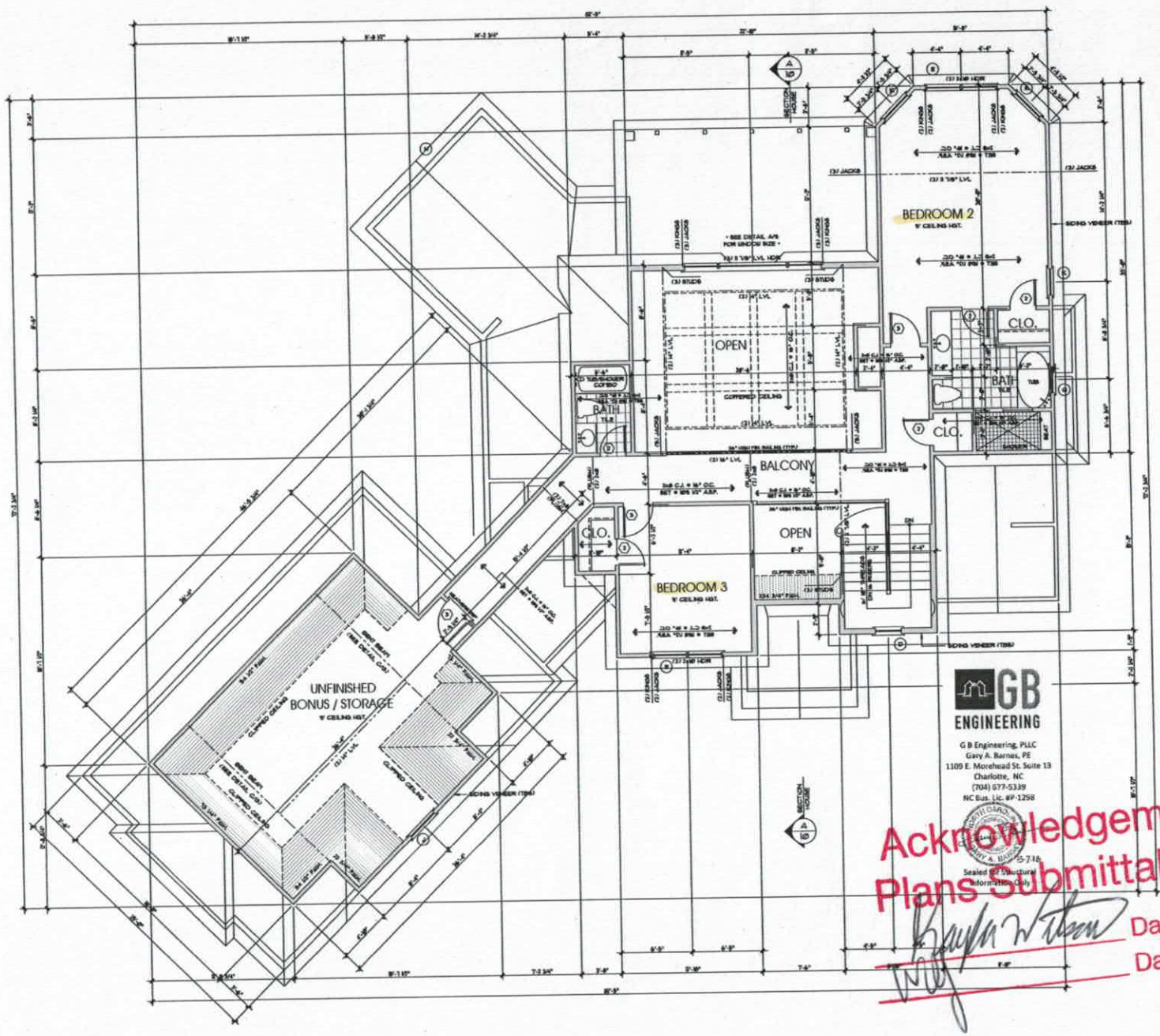
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

_____ _____
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


SEAWALL PER ACTUAL FIELD SURVEY
LAKE NORMAN
1" = 30'
761 CONTOUR PER ACTUAL FIELD SURVEY
50' BUFFER FROM 760 CONTOUR
Approved 10/9/17
L1
L2
L3
L4
L5
L6
L7
LOT 54
0.96 ACRES
PROPOSED HOUSE
30' BUFFER FROM 760 CONTOUR
15' SIDE SETBACK
N 40°27'08" W
195.83'
S 55°46'00" E (RASF RFARING)
200.65'
CONC. PATIO
WOOD DECK
WOOD DECK
CARPORT
1 STORY BRICK & STUCCO COMP ROOF
PORCH
LOT 55
THOMAS CARN
2172\1616
15' SIDE
35' FRONT
PINK
TANK
ORANGE
DRIVE
EXISTING HOUSE TO BE ABANDONED/REMOVED
EXISTING WELL TO BE PROPERLY ABANDONED
E.C.M.
WELL
153.56
N27°23'15"E
EXISTING SEPTIC TANK & DRAINFIELDS TO BE PROPERLY ABANDONED
EXISTING PAVEMENT
CHATFIELD COVE DRIVE
60' R/W
EIP
E.I.P.



DOOR SCHEDULE

	SIZE	DESCRIPTION
1	2'-3" x 8'-0"	ARCHED ENTRY
2	3'-0" x 8'-0"	SOLID PANEL
3	3'-0" x 6'-8"	SOLID PANEL
4	3'-0" x 8'-0"	SOLID PANEL
5	3'-0" x 8'-0"	SOLID PANEL
6	2'-0" x 8'-0"	20 MIN. FIRE RATED
7	2'-0" x 8'-0"	SOLID PANEL
8	2'-0" x 8'-0"	SOLID PANEL
9	2'-3" x 8'-0"	SOLID PANEL
10	2'-1" x 6'-8"	SOLID PANEL
A	3'-0" x 8'-0"	CASED OPENING
B	3'-0" x 8'-0"	CASED OPENING
D	5'-1" x 8'-0"	CASED OPENING
H	4'-3" x 8'-0"	EXTERIOR SLIDER
9	2'-3" x 6'-8"	20 MIN. FIRE RATED
10	3'-0" x 8'-0"	EXTERIOR FULL LITE

WINDOW SCHEDULE

	SIZE	DESCRIPTION
A	3'-3" x 6'-0"	CASEMENT
B	3'-0" x 3'-0"	CASEMENT
C	3'-0" x 3'-0"	CASEMENT
D	3'-0" x 6'-0"	CASEMENT
E	2'-3" x 5'-0"	CASEMENT
F	3'-0" x 3'-0"	CASEMENT
G	2'-3" x 6'-0"	CASEMENT
H	2'-3" x 6'-0"	CASEMENT
J	3'-0" x 4'-0"	CASEMENT
K	3'-0" x 5'-0"	CASEMENT
L	3'-0" x 6'-0"	CASEMENT
M	5'-0" x 6'-0"	CASEMENT
N	5'-0" x 6'-0"	TRIANGULAR
P	3'-0" x 1'-0"	DEPRESSED
Q	3'-0" x 2'-0"	CASEMENT
R	3'-0" x 6'-0"	CASEMENT

SQUARE FOOTAGE

LOWER LEVEL	1331 SQFT.
MAIN LEVEL	2,949 SQFT.
UPPER LEVEL	919 SQFT.
TOTAL HEATED	4,349 SQFT.
COVERED PORCH	80 SQFT.
BAR ROOF	76 SQFT.
SCREENED TERRACE	213 SQFT.
LOWER COVED TERRACE	350 SQFT.
THREE-CAR GARAGE	529 SQFT.
LAKE STORAGE	398 SQFT.
UNF. MECH/ STORAGE	535 SQFT.
UNF. BONUS ROOM	949 SQFT.
TOTAL UNDER ROOF	7343 SQFT.

NOTES:

- ALL ANGLED WALLS ARE 45° U.N.O.
- ⊕ INDICATES BLOCKING FOR ABOVE CONCENTRATED LOADS AND ROOF BRACING POINT LOADS U.N.O.
- SEE FRAMING NOTE ⑯ FOR HEADER SIZES UNLESS NOTED ON PLAN
- ALL DOORS ARE 6" FROM WALL UNLESS DIMENSIONED OTHERWISE
- WEATHERSTRIP ALL DOORS INTO ATTIC SPACE

EXTERIOR WALL HEIGHT ON	STUD SIZE/ SPACING
h ≤ 10'	2x6 @ 16" o/c
10' ≤ h ≤ 11'	3x4 @ 12" o/c
11' ≤ h ≤ 12'	3x6 @ 16" o/c
h ≥ 12'	CONSULT ENG.

GARAGE WALL TO BE 2x6 @ 16" O.C. IF EXCEEDING 10' IN HEIGHT

SECOND FLOOR CEILING PLAN STRUCTURAL NOTES:

1. ALL CEILING JOIST SHALL BE 2x8 @16" O.C. U.N.O.
2. ALL LVL BEAMS ARE 1.9E" NOTED.
3. ALL SECOND FLOOR INTERIOR WALLS SHALL BE (3) 2x4's FOR 2x4 WALLS & (3) 2x6's FOR ALL 2x6 WALLS U.N.O.
4. ALL WALL POINT LOADS OF (2) 2x4 STUDS UNDER ALL BEAMS, LVL, OR BUILT-UP BEAMS AT THE SECOND FLOOR U.N.O.
5. SEE GENERAL NOTES SHEET FOR ADDITIONAL INFO.
6. REFER TO ARCHITECTURAL DRAWINGS FOR ALL DIMENSIONS.

GB ENGINEERING

G B Engineering, PLLC
Gary A. Barnes, PE
1109 E. Morehead St. Suite 13
Charlotte, NC
(704) 577-5339
NC Bus. Lic. #P-1258

NORTH CAROLINA PROFESSIONAL ENGINEER SEAL 035718 GARY A. BARNES

Sealed for Structural Information Only

Acknowledgement of Plans Submittal Only

Date 5-17-18

Date 5-17-18

Rally DESIGNS
704.631.6031
www.rallydesignsbyrick.com

COBBLE CREEK CUSTOM HOMES
Blair Hall Homes

PLAN INFO.

A New Custom Residence
Crafton Residence
109 Chatfield Cove Drive, Mooresville, NC 28117

PLAN NO.

REVISIONS

SEAL

DRAWN BY: DR | CHECKED BY:

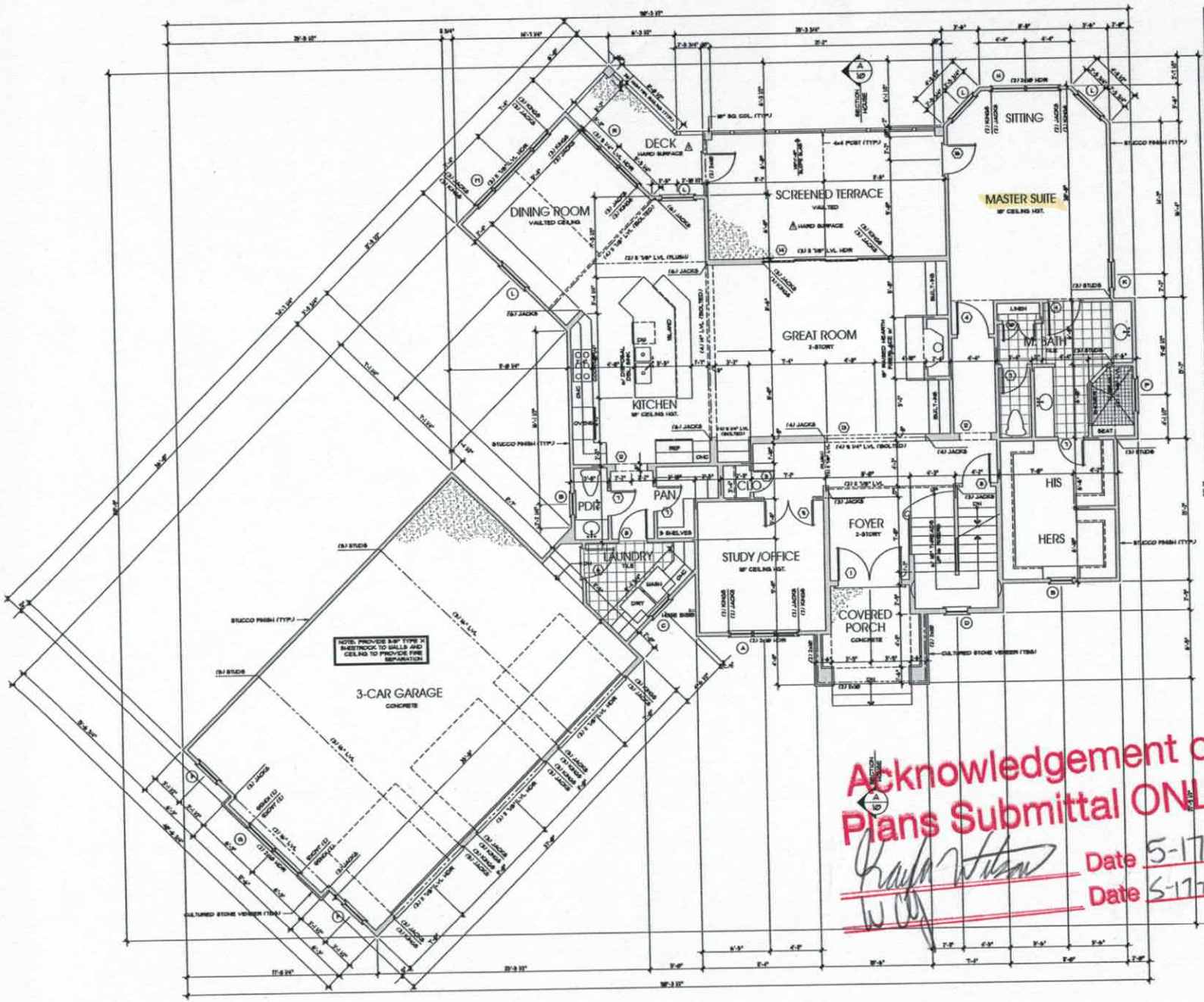
DATE: @3.2@18

DRAWING TITLE: UPPER LEVEL PLAN

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

SHEET NO: 4

OF 16 SHEETS



DOOR SCHEDULE

	SIZE	DESCRIPTION
1	3'-3" x 8'-0"	ARCHED ENTRY
2	3'-0" x 8'-0"	SOLID PANEL
3	3'-0" x 8'-0"	SOLID PANEL
4	3'-0" x 8'-0"	SOLID PANEL
5	3'-0" x 8'-0"	SOLID PANEL
6	3'-0" x 8'-0"	20 MIN. FIRE RATED
7	3'-0" x 8'-0"	SOLID PANEL
8	3'-0" x 8'-0"	SOLID PANEL
9	2'-0" x 8'-0"	SOLID PANEL
10	2'-0" x 8'-0"	SOLID PANEL
A	8'-0" x 8'-0"	CASED OPENING
B	3'-0" x 8'-0"	CASED OPENING
C	9'-0" x 8'-0"	CASED OPENING
H	4'-0" x 8'-0"	EXTERIOR SLIDER
P	2'-0" x 6'-8"	20 MIN. FIRE RATED
W	3'-0" x 8'-0"	EXTERIOR FULL LITE

WINDOW SCHEDULE

	SIZE	DESCRIPTION
A	3'-0" x 6'-0"	CASEMENT
B	3'-0" x 3'-0"	CASEMENT
C	2'-0" x 3'-0"	CASEMENT
D	2'-0" x 6'-0"	CASEMENT
E	2'-0" x 3'-0"	CASEMENT
F	2'-0" x 3'-0"	CASEMENT
G	3'-0" x 6'-0"	CASEMENT
H	2'-0" x 6'-0"	CASEMENT
J	3'-0" x 4'-0"	CASEMENT
K	3'-0" x 5'-0"	CASEMENT
L	3'-0" x 6'-0"	CASEMENT
M	5'-0" x 6'-0"	CASEMENT
N	6'-0" x 6'-0"	TRIANGULAR
P	3'-0" x 1'-0"	TRAPEZOID
Q	3'-0" x 2'-0"	CASEMENT
R	3'-0" x 6'-0"	CASEMENT

SQUARE FOOTAGE

LOWER LEVEL	1231 SQFT.
MAIN LEVEL	3,168 SQFT.
UPPER LEVEL	978 SQFT.
TOTAL HEATED	4,369 SQFT.
COVERED PORCH	88 SQFT.
BAPE ROOF	78 SQFT.
SCREENED TERRACE	713 SQFT.
LOWER COVED TERRACE	388 SQFT.
THREE-CAR GARAGE	925 SQFT.
LAKE STORAGE	298 SQFT.
UNF. MECH/ STORAGE	838 SQFT.
UNF. BONUS ROOM	946 SQFT.
TOTAL UNDER ROOF	7,863 SQFT.

GB ENGINEERING
G B Engineering, PLLC
Gary A. Barnes, PE
1105 E. Morehead St. Suite 13
Charlotte, NC
(704) 677-5339
NC Bus. Lic. #P-1298

5-7-18

Sealed for Structural Information Only

Acknowledgement of Plans Submittal ONLY!

Date 5-17-18

Date 5-17-18

NOTES:

*ALL ANGLED WALLS ARE 45° U.N.O.

*B INDICATES BLOCKING FOR ABOVE CONCENTRATED LOADS AND ROOF BRACING POINT LOADS U.N.O.

SEE FRAMING NOTE 14 FOR HEADER SIZES UNLESS NOTED ON PLAN

*ALL DOORS ARE 6" FROM WALL UNLESS DETERMINED OTHERWISE

EXTERIOR WALL HEIGHT (h)	STUD SIZE/ SPACING
h ≤ 10'	2x6 @ 16" OC
10' < h ≤ 12'	2x6 @ 12" OC
12' < h ≤ 16'	2x6 @ 16" OC
h > 16'	CONSULT ENG.

GARAGE WALL TO BE 2x6 @ 16" O.C. IF EXCEEDING 10' IN HEIGHT

Rollins Designs
704.631.6031
www.rollinsdesigndesigns.com

COBBLE CREEK CUSTOM HOMES

PLAN INFO.

A New Custom Residence

Crafton Residence

109 Chatfield Cove Drive, Mooresville, NC 28117

PLAN NO.

REVISIONS

SEAL

DRAWN BY: DJR

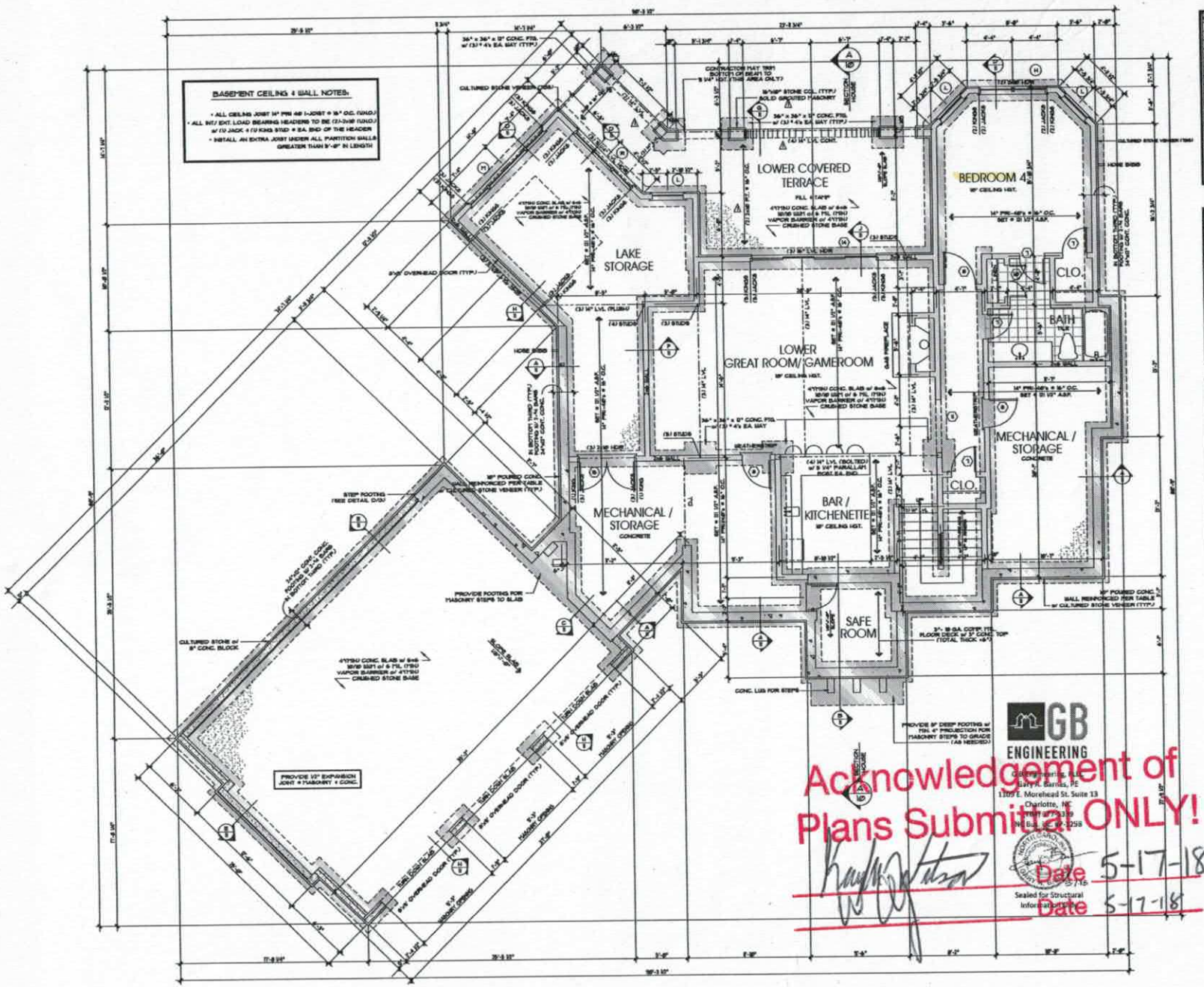
CHECKED BY:

DATE: 03.20.18

DRAWING TITLE: MAIN LEVEL PLAN

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

SHEET NO. 2 OF 16 SHEETS



DOOR SCHEDULE

	SIZE	DESCRIPTION
1	3'-3" x 8'-0"	ARCHED ENTRY
2	3'-0" x 8'-0"	SOLID PANEL
3	2'-8" x 8'-0"	SOLID PANEL
4	2'-8" x 8'-0"	SOLID PANEL
5	2'-6" x 8'-0"	SOLID PANEL
6	2'-6" x 8'-0"	20 MIN. FIRE RATED
7	2'-6" x 8'-0"	SOLID PANEL
8	2'-6" x 8'-0"	SOLID PANEL
9	2'-3" x 8'-0"	SOLID PANEL
10	2'-0" x 8'-0"	SOLID PANEL
11	5'-0" x 8'-0"	CASED OPENING
12	3'-0" x 8'-0"	CASED OPENING
13	3'-0" x 8'-0"	CASED OPENING
14	6'-0" x 8'-0"	EXTERIOR SLIDER
15	2'-8" x 6'-8"	20 MIN. FIRE RATED
16	2'-8" x 8'-0"	EXTERIOR FULL LITE
17		

WINDOW SCHEDULE

	SIZE	DESCRIPTION
A	3'-1" x 6'-0"	CASEMENT
B	2'-0" x 3'-0"	CASEMENT
C	3'-1" x 3'-0"	CASEMENT
D	2'-0" x 6'-0"	CASEMENT
E	2'-0" x 5'-0"	CASEMENT
F	2'-0" x 3'-0"	CASEMENT
G	2'-0" x 6'-0"	CASEMENT
H	2'-0" x 6'-0"	CASEMENT
J	3'-0" x 4'-0"	CASEMENT
K	3'-0" x 5'-0"	CASEMENT
L	3'-0" x 6'-0"	CASEMENT
M	3'-0" x 6'-0"	CASEMENT
N	3'-0" x 6'-0"	TRIANGULAR
P	3'-0" x 1'-0"	TEMPERED
Q	3'-0" x 2'-0"	CASEMENT
R	2'-0" x 6'-0"	CASEMENT

SQUARE FOOTAGE

LOWER LEVEL	1231 SQ.FT.
MAIN LEVEL	2340 SQ.FT.
UPPER LEVEL	519 SQ.FT.
TOTAL HEATED	4366 SQ.FT.
COVERED PORCH	89 SQ.FT.
BAR ROOF	78 SQ.FT.
SCREENED TERRACE	213 SQ.FT.
LOWER COVED TERRACE	399 SQ.FT.
THREE-CAR GARAGE	525 SQ.FT.
LAKE STORAGE	398 SQ.FT.
UNF. MECH/ STORAGE	836 SQ.FT.
UNF. BONUS ROOF	948 SQ.FT.
TOTAL UNDER ROOF	7,843 SQ.FT.

NOTES:

•TYPICAL BASEMENT SLAB TO BE 4" THICK CONCRETE W/ 6x6, 10x10 WELDED WIRE MESH OR FIBER MESH OVER VAPOR BARRIER OVER 4" COMPACTED GRAVEL BASE

•SEE FRAMING NOTE 1 ON COVER SHEET FOR TYPICAL HEADER INFORMATION UNLESS NOTED OTHERWISE

•FOUNDATION WALL TO BE 8" THICK POURED CONCRETE- SEE DETAIL 8/SHEET 9 FOR DETAILS ON REINFORCEMENT, ETC.

•TYPICAL EXTERIOR FOOTING TO BE 24"x8" THICK WITH 3-#4 BARS CONTINUOUS • BASEMENT CONDITIONS = 24"x10" THICK WITH 2-#4 BARS CONTINUOUS • GARAGE CONDITIONS

•SLAB INSULATION TO BE R-5 @ 7/SHEET 9 24" AT PERIMETER OF FOUNDATION WALL

•TERMITE CONTROL SHALL BE BY CHEMICAL SOIL TREATMENT OR OTHER METHODS APPROVED BY THE NORTH CAROLINA DEPARTMENT OF AGRICULTURE

•ALL EXTERIOR STUDS TO BE 2x6 @ 16" O.C. INTERIOR WALLS TO BE 2x4 @ 12" O.C. UNLESS BEARING. BEARING WALL TO BE 2x6 @ 16" O.C.

•ALL ANGLED WALLS ARE 45° U.N.O.

•B INDICATES BLOCKING FOR ABOVE CONCENTRATED LOADS AND ROOF BRACING POINT LOADS UNLESS NOTED OTHERWISE

•PROVIDE DRAIN AT ANY MECHANICAL LOCATION SLOPE CONCRETE TOWARDS DRAIN

•PROVIDE FOUNDATION DRAIN ON FILL SIDE OF WALL & DRAIN TO DAYLIGHT

•STUB IN PLUMBING FOR ALL FUTURE AREAS

•ALL DOORS ARE 6" FROM WALL UNLESS DIMENSIONED OTHERWISE

•PROVIDE BEAM POCKET IN POURED WALL IF REQUIRED FOR BEARING OF DROPPED BEAM

•TRANSFER ALL POINT LOADS FROM ABOVE THROUGH THE FIRST FLOOR FRAMING WITH AN EQUAL AMOUNT OF STUD MATERIALS (U.N.O.)

GB ENGINEERING
Gary R. Barnes, PE
1109 E. Morehead St. Suite 13
Charlotte, NC
Sealed for Structural Information Only

Randy Riggins Designs
704.631.6031
www.raffinedresidentialdesigns.com

Cobblecreek Custom Homes

PLAN INFO:
A New Custom Residence
Crafton Residence
109 Chatfield Cove Drive, Mooresville, NC 28117

PLAN NO:

REVISIONS
1 4-6-18

SEAL

DRAWN BY: D.R.
CHECKED BY:

DATE: 03.20.18

DRAWING TITLE:
LOWER LEVEL PLAN

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

SHEET NO: 1 OF 16 SHEETS

IREDELL COUNTY

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

APPLICATION NUMBER
230616
Issue Date: 10/02/2017

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4626447773.000	109 CHATFIELD COVE DRIVE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: DAVIS JEFF M+PAIGE T	Applicant: ROLLANS SOIL & ENVIRON
Address: 4324 SAILVIEW DRIVE DENVER, NC 28037	Address: 470 NORTH BROAD STREET SUITE D MOORESVILLE, NC 28115
Phone:	Phone: 704-658-1723

Use Requested	Zone Code
SFD	RR

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.930	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

Lots with frontage on the lake must meet both the 50 foot setback from the 760 contour line and the 35 foot setback from the rear property line for any structure.

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: Steven Rollans Date: 10/4/17

Permit Number	116651	TOTAL FEES:	$ 77.25

Allentin. Maria

Faxed 2/1/18

WELL ABANDONMENT RECORD

This form can be used for single or multiple wells

For Internal Use ONLY:

1. Well Contractor Information:

Alfred Kiesling Jr

Well Contractor Name (or well owner personally abandoning well on his/her property)

3266-A

NC Well Contractor Certification Number

B & K Well Drilling Inc.

Company Name

2. Well Construction Permit #: 230619

List all applicable well permits (i.e. County, State, Variance, Injection, etc.) if known

3. Well use (check well use):

Water Supply Well:
- ☐ Agricultural
- ☐ Geothermal (Heating/Cooling Supply)
- ☐ Industrial/Commercial
- ☐ Irrigation
- ☐ Municipal/Public
- ☒ Residential Water Supply (single)
- ☐ Residential Water Supply (shared)

Non-Water Supply Well:
- ☐ Monitoring
- ☐ Recovery

Injection Well:
- ☐ Aquifer Recharge
- ☐ Aquifer Storage and Recovery
- ☐ Aquifer Test
- ☐ Experimental Technology
- ☐ Geothermal (Closed Loop)
- ☐ Geothermal (Heating/Cooling Return)
- ☐ Groundwater Remediation
- ☐ Salinity Barrier
- ☐ Stormwater Drainage
- ☐ Subsidence Control
- ☐ Tracer
- ☐ Other (explain under 7g)

4. Date well(s) abandoned: 1/31/18

5a. Well location:

Cobble Ck Custom Hms

Facility/Owner Name

Facility ID# (if applicable)

109 Chatfield Cove Dr.

Physical Address, City, and Zip

Iredell

County

4626447773

Parcel Identification No. (PIN)

5b. Latitude and longitude in degrees/minutes/seconds or decimal degrees:
(if well field, one lat/long is sufficient)

_____ N _____ W

CONSTRUCTION DETAILS OF WELL(S) BEING ABANDONED

Attach well construction record(s) if available. For multiple injection or non-water supply wells ONLY with the same construction abandonment, you can submit one form.

6a. Well ID#: _____

6b. Total well depth: 54 (ft.)

6c. Borehole diameter: 2 (in.)

6d. Water level below ground surface: 30 (ft.)

6e. Outer casing length (if known): _____ (ft.)

6f. Inner casing/tubing length (if known): _____ (ft.)

6g. Screen length (if known): _____ (ft.)

WELL ABANDONMENT DETAILS

7a. Number of wells being abandoned: 1

For multiple injection or non-water supply wells ONLY with the same construction abandonment, you can submit one form.

7b. Approximate volume of water remaining in well(s): _____ (gal.)

FOR WATER SUPPLY WELLS ONLY:

7c. Type of disinfectant used: Ca. Chlora

7d. Amount of disinfectant used: 5oz

7e. Sealing materials used (check all that apply):
- ☒ Neat Cement Grout
- ☐ Sand Cement Grout
- ☐ Concrete Grout
- ☐ Specialty Grout
- ☐ Bentonite Slurry
- ☒ Bentonite Chips or Pellets
- ☐ Dry Clay
- ☐ Drill Cuttings
- ☐ Gravel
- ☐ Other (explain under 7g)

7f. For each material selected above, provide amount of materials used:

1 Yd Bags Hole Plug

1 Bag Portland Cement

7g. Provide a brief description of the abandonment procedure:

Poured + Hydrated

8. Certification:

Alfred J Kiesling Jr — 1-31-18

Signature of Certified Well Contractor or Well Owner — Date

By signing this form, I hereby certify that the well(s) was (were) abandoned in accordance with 15A NCAC 02C .0100 or 2C .0200 Well Construction Standards and that a copy of this record has been provided to the well owner.

9. Site diagram or additional well details:
You may use the back of this page to provide additional well site details or well abandonment details. You may also attach additional pages if necessary.

SUBMITTAL INSTRUCTIONS

10a. For All Wells: Submit this form within 30 days of completion of well abandonment to the following:

Division of Water Resources, Information Processing Unit,
1617 Mail Service Center, Raleigh, NC 27699-1617

10b. For Injection Wells: In addition to sending the form to the address in 10a above, also submit one copy of this form within 30 days of completion of well abandonment to the following:

Division of Water Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

10c. For Water Supply & Injection Wells: In addition to sending the form to the address(es) above, also submit one copy of this form within 30 days of completion of well abandonment to the county health department of the county where abandoned.