10:00

# ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP-315567

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

PIN # 4626 91 -84 -16

APPLICANT/OWNER: William Babilon | APPLICANT ADDRESS: 180 Atlantic Way Mooresville, NC 28117

SITE ADDRESS: 180 Atlantic Way Mooresville, NC 28117 | PHONE: 720 633 4682 | ALT. PHONE

SITE DIRECTIONS: Brawley School Rd TL Great Point TL Wild Harbor TL Atlantic Way

SUBDIVISION: The Point on Norman | SECTION: 3 | LOT # 329 | LOT AREA: .77Ac | SAP CONTROLLED: [X] YES [ ] NO | DESIGN FLOW: 480 gpd | L.T.A.R.: ~.25

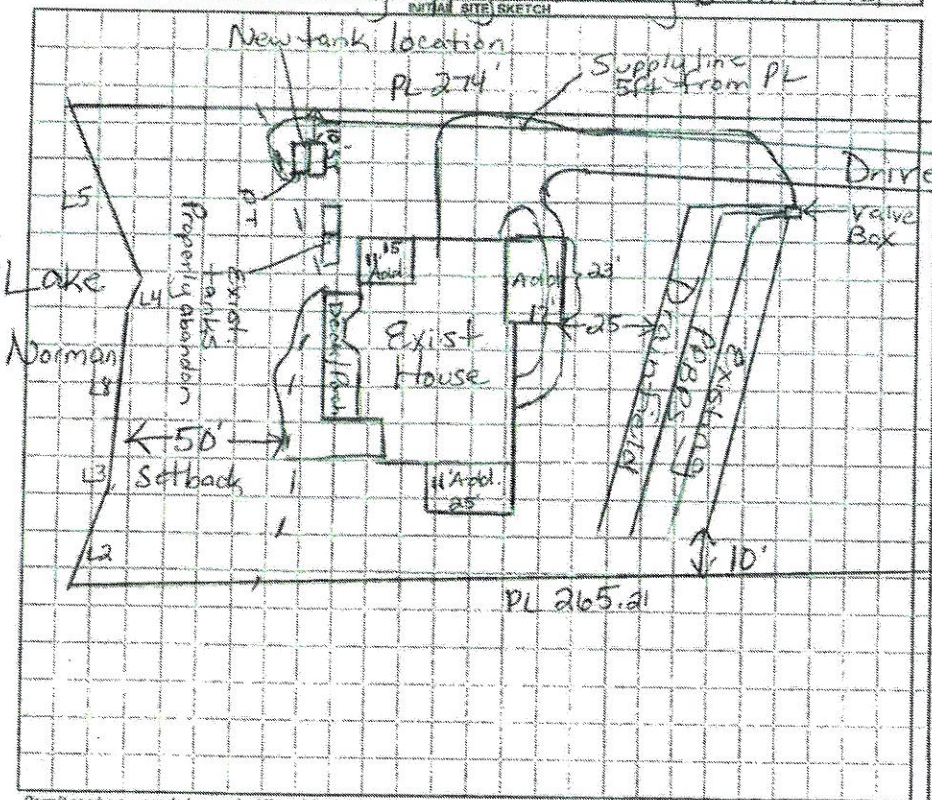
| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Septic Tank | Min 1000 (gal) | STB | 964 | Date | 7-13 | [X] New System [ ] Repair [ ] Expansion | System Type: I II III IV V VI |
| Pump Tank | Min 1000 (gal) | PT | 353 | Date | 7-13 | System Description: | New ST & PT only to Exist. |
| Pump Make | GOULDS | Model | WS05121M | Serial # | | Repair System Description: | L & PBPS (offsite) |
| # Nitrification Fields | | # Lines | EXISTING | Linear Ft | 360ft | Maintenance Agreement Required: | [X] YES [ ] NO |
| Trench Width | | Trench Bottom Depth(Low side) | | Gravel Depth | | [ ] GRAVITY [X] PRESSURE | |

[X] Residence | No. Bedrooms 4 | Water Supply: [ ] Private [ ] Public [X] Community
[ ] Business | No. Persons 8
[ ] Other | No. Employees
[ ] Slab [ ] Crawl Space
[X] Basement w/plumbing [ ] Basement w/o plumbing

Comments / Conditions: Relocate existing ST & PT to 10ft from Property line & minimum 50ft from lake. Hook onto existing Supply & Existing Drainfield.

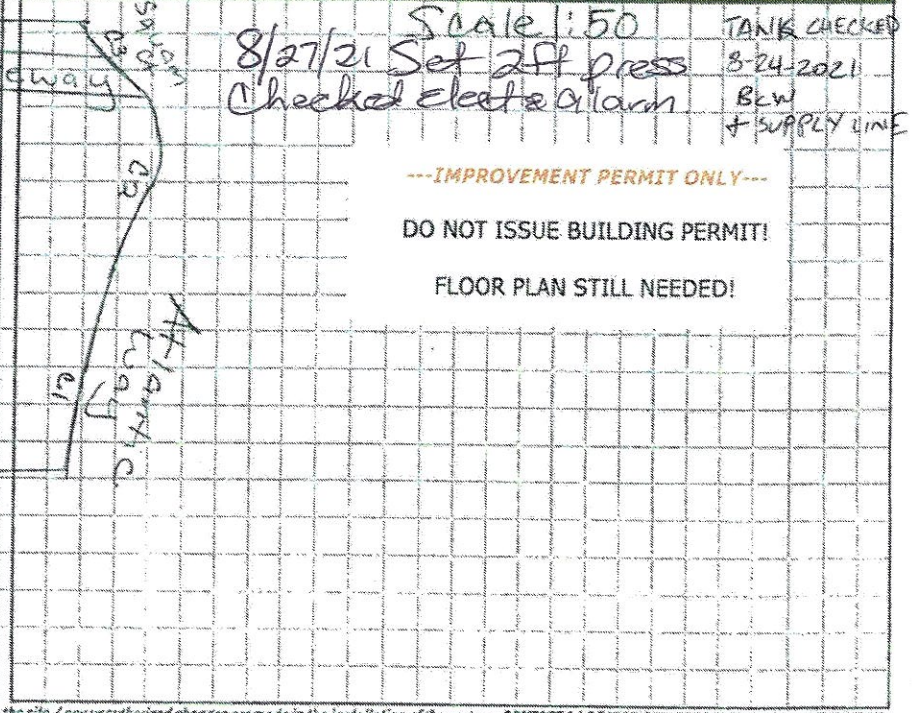
Must reset pressure after connection is complete.
Check HOA requirements for ST & PT Size
Note: 3 Additions, keep all additions, 10ft from tanks & 25ft from Drainfield

INITIAL SITE SKETCH




AS BUILT SKETCH

the day the inspection is needed. Be sure to speak with an inspector to confirm your time.




---IMPROVEMENT PERMIT ONLY---

DO NOT ISSUE BUILDING PERMIT!

FLOOR PLAN STILL NEEDED!

*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.* [X] 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: W Babilon | Date: 4/7/21 | Installed by: Lentz Wastewater

IMPROVEMENT PERMIT by: Maria Dotson | Date: 3/31/21 | OPERATION PERMIT by: Maria Dotson | Date: 8/27/21

AUTHORIZATION TO CONSTRUCT by: | Date: | Existing System Inspected by: | Date:

RECEIVED MAR C 8 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***

Relocation AP-315567 $500.00

**Application For:** ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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, 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: William Babilon Address: 180 Atlantic Way Zip: 28117
Applicant Email: Wjbabilon@gmail.com Phone: 720 633 9682 Alt. Phone: _____
Owner Name: William & Jane Babilon Address: 180 Atlantic Way Zip: 28117
Owner Email: Wjbabilon@gmail.com Phone: 720 633 4682 Alt. Phone: _____

**Property Information:**

Street Address: 180 Atlantic Way Mooresville NC 28117
Subdivision Name: The Point Section/Phase: _____ Lot Number: 329
Driving Directions: Brawley School Rd, Rt on Great Point, left on Wild Harbor, left on Atlantic Way

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

CHECK FOUNDATION TYPE

( ) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
(X) Repair to failing septic system _X_ Tank ___ Drain lines Describe Problem: Moving tanks
Maximum Number of Bedrooms: _____
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____
( ) Crawl Space Foundation
( ) Concrete Slab Foundation
(X) 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: 2000 approx
(X) 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:** W. J Babilon March 8, 2021
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

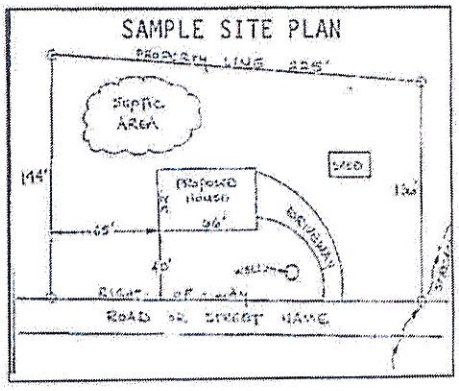
315567

# 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:

See attached

( ) 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:** W J. Balston
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

March 8, 2021
DATE

315567

Public Health

# IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public 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*) W J Babilon

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.

W.J Babilon
Signature of Owner(s)

March 8, 2021
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 · NC

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

| APPLICATION NUMBER |
|---|
| 315567<br>Issue Date: |

**Permit Type: ZONING**

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4626918416.000 | 180 ATLANTIC WAY | Iredell County |

| Owner Information | Applicant Information |
|---|---|
| Name: BABILON WILLIAM J+JANE G<br>Address:<br><br>Phone: | Name: BABILON WILLIAM J+JANE G<br>Address:<br><br>Phone: |

| Use Requested | Zone Code |
|---|---|
| Addition | R-20 CUD |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| 0.77 | 35 | 50 | 15 | 15 | WSIV-CA Catawba/Lake Norman | YES |

**Remarks**

11X15 ADDITION MOVE SEPTIC TANK

Lake Lots: 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.

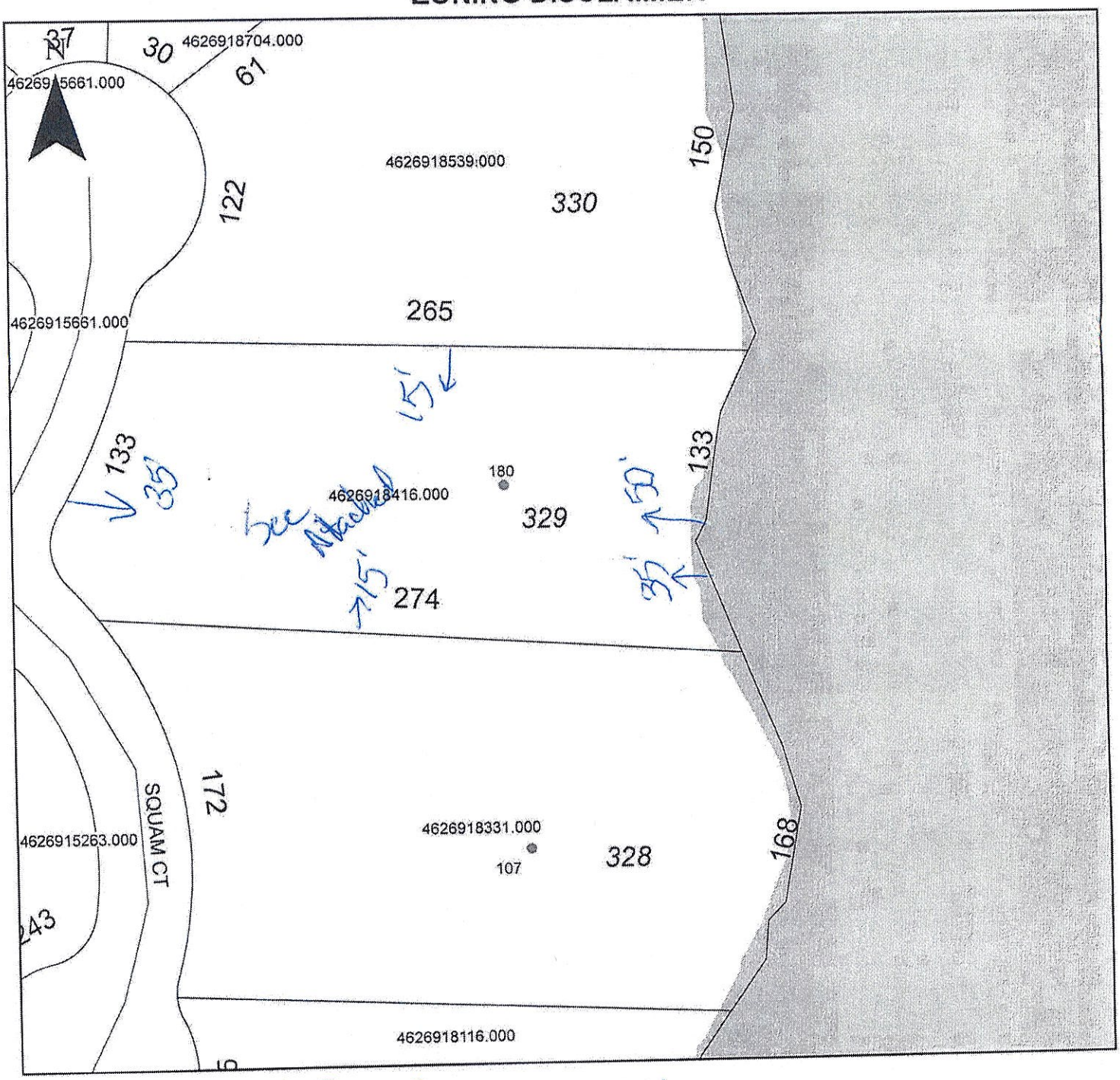
**Date:** 03/08/2021

Signature of Owner/Contractor

| Permit Number | 315567 | TOTAL FEES: | $77.25 |
|---|---|---|---|

315567

# ZONING DISCLAIMER




Property Address 180 Atlantic Way

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.

✓ W. J Baldon
Applicant

✓ March 8, 2021
Date

# IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

## IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 078629 PIN# 4625944684 (lot) 4626-91-8416 DATE May 10, 99

OWNER OR CONTRACTOR Crescent Resources since/ The Point for Nberman PHONE: Business 660-1165 Home

ADDRESS 2214 Brawley Sch Rd. Mooresville

LOCATION Brawley Sch Rd. TL Great Point Drive TL Wild Harbor Rd TL Atlantic Way on Right past Spanish Ct.

SUBDIVISION The Point BLOCK / SECTION III LOT 329 LOT AREA 33,543 sf SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. no 25

Septic Tank: 1000+ Gallons; STB 338 Date 5/13/60

Pump Tank: 1000 Gallons; PT 283 Date 3/24/60

Pump Make: MYERS Model ME-50S-2 Serial No. 5100

Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360

No Lines 4@90' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: LP Panel Block

Repair System Description: LP Panel Block on 329A

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

☑ Slab ☑ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

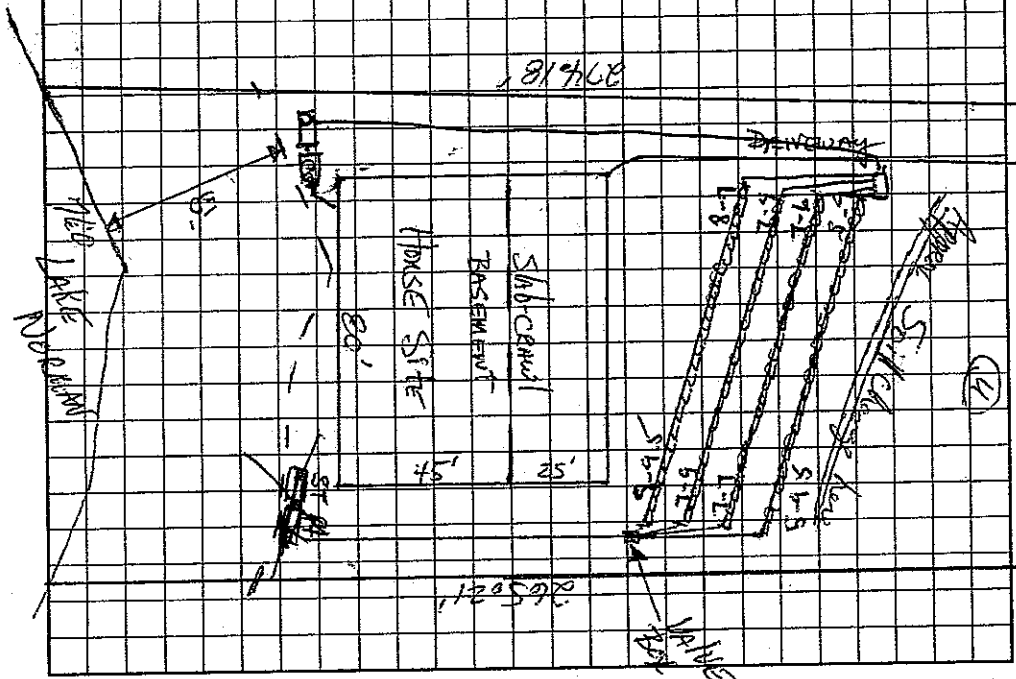
Water Supply: ☐ Individual ~~☐ Public~~ ~~☐ Community~~

Comments:/Conditions:

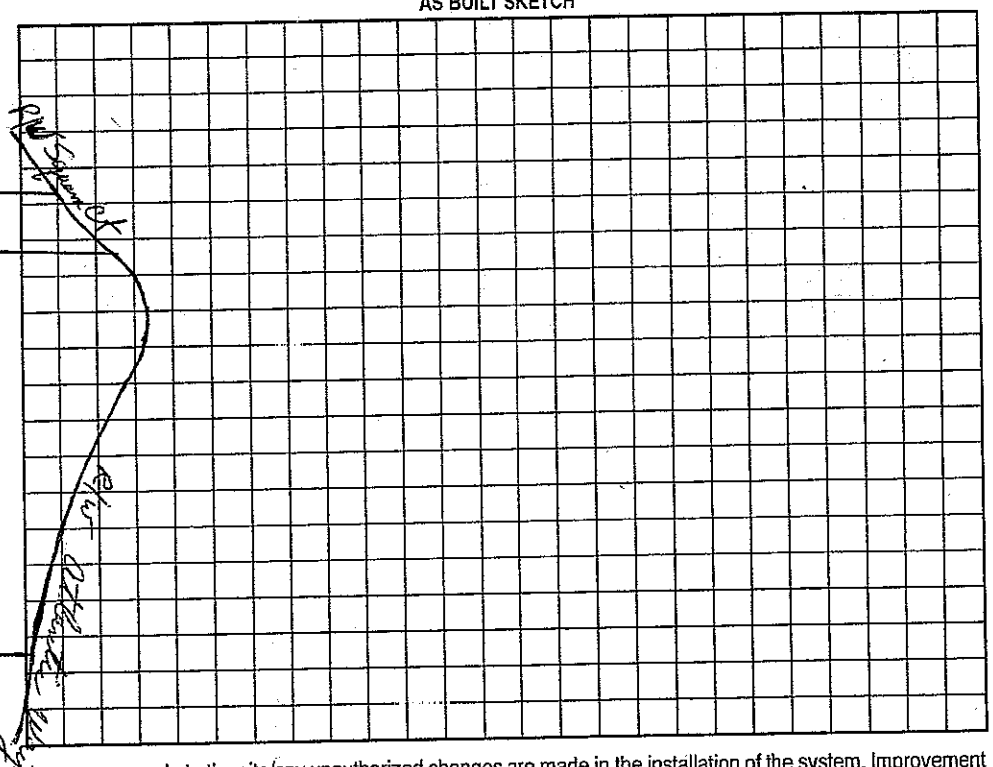
9-16-99 Reviewed house plan - appears in compliance w/ LP
Builder to locate house as shown. DRH

Comments:/Conditions: (final)

INITIAL SITE SKETCH 1"=50'




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. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: [signature] date 5-14-99 Installed by: Orbison Const.

Improvement Permit by: [signature] date 5-11-99 Operation Permit by: Wesley Sparks R.S. date 11/9/00

Authorization to Construct by: [signature] date 9-16-99 Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK

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## SEE FLOOR PLANS & ELEVATIONS FOR TAG SYMBOL LOCATION

EXTERIOR DOOR SCHEDULE

| Type Mark | COUNT | WIDTH | HEIGHT | DESCRIPTION | NOTES |
|---|---|---|---|---|---|
| 3068 | 1 | 6' - 0" | 6' - 8" | DOUBLE FULL GLASS DOOR W/ 2x3 GRILLS | |
| 3068 | 1 | 3' - 0" | 6' - 8" | SINGLE FULL GLASS DOOR | |
| 3068 | 1 | 3' - 0" | 6' - 8" | SINGLE HALF GLASS DOOR W/ 3x3 GRILLS | |
| 15080 OHD | 1 | 15' - 0" | 8' - 0" | OHDD | |
| 12080 | 1 | 12' - 0" | 8' - 0" | Triple Sliding Full Glass Door | |
| 18080 OHD | 1 | 18' - 0" | 8' - 0" | OHDD | |

INTERIOR DOOR SCHEDULE

| Symbol | COUNT | WIDTH | HEIGHT | DESCRIPTION | NOTES |
|---|---|---|---|---|---|
| 2868 | 1 | 2' - 8" | 6' - 8" | | |
| 5068 BP | 2 | 5' - 0" | 6' - 8" | | |
| 2868 | 1 | 2' - 8" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 2068 | 1 | 2' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 2468 | 2 | 2' - 4" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 2668 PKT | 2 | 2' - 6" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | POCKET DOOR |
| 2868 | 2 | 2' - 8" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 3068 | 12 | 3' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 4068 | 2 | 4' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | DOUBLE BIFOLD |
| 6068 | 2 | 6' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | DOUBLE BIFOLD |
| 3068 PKT | 2 | 3' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | POCKET DOOR |

**NOTE:** CONTRACTOR SHALL VERIFY ALL EXISTING DOOR SIZES PRIOR TO ORDERING REPLACEMENT DOORS

## SEE FLOOR PLANS & ELEVATIONS FOR TAG SYMBOL LOCATION

WINDOW SCHEDULE

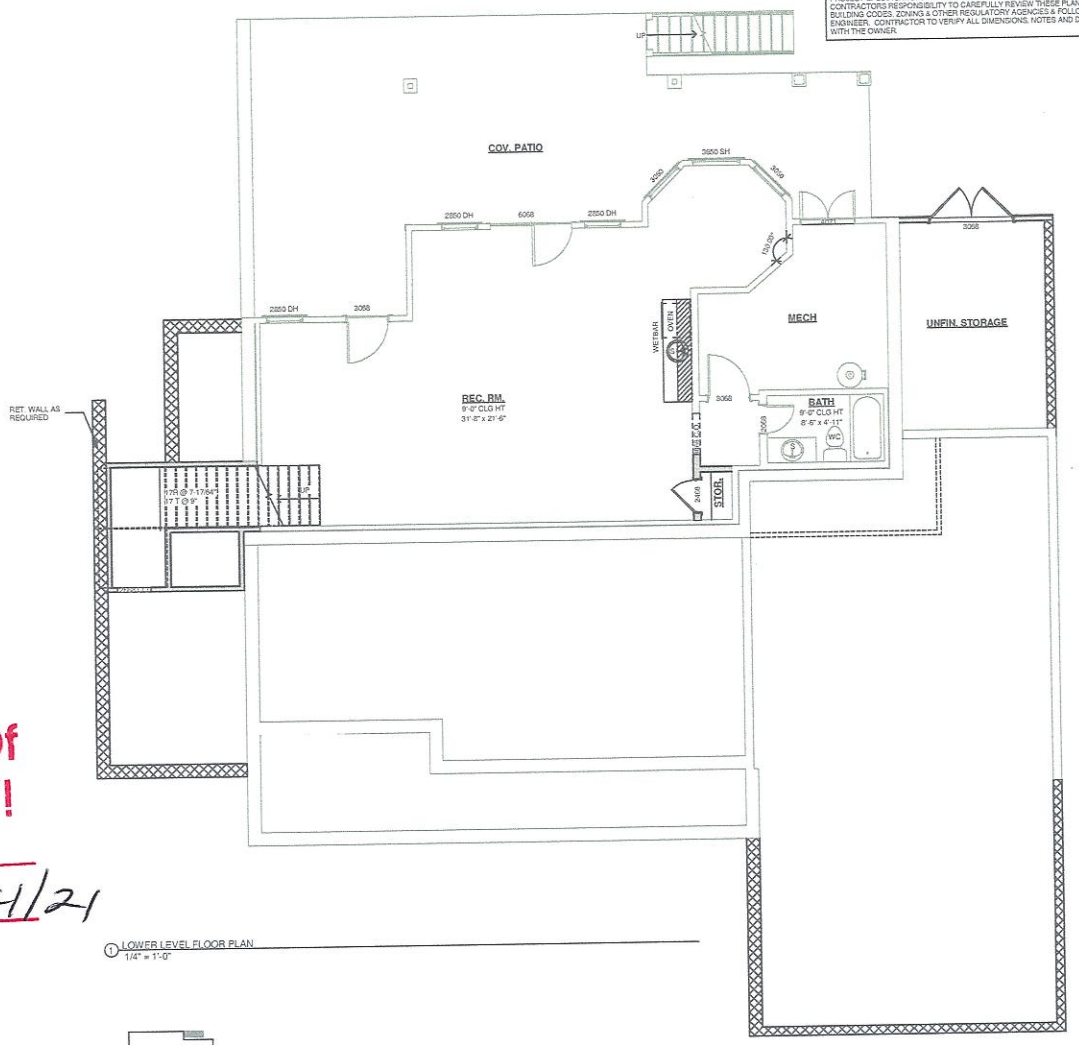
| Symbol | QTY | WIDTH | HEIGHT | DESCRIPTION | NOTES |
|---|---|---|---|---|---|
| 2044 DH | 1 | 2' - 0" | 4' - 4" | DOUBLE HUNG | |
| 2050 DH | 1 | 2' - 0" | 5' - 0" | DOUBLE HUNG | |
| 2838 DH | 2 | 2' - 8" | 3' - 8" | DOUBLE HUNG | |
| 2840 DH | 3 | 2' - 8" | 4' - 0" | | |
| 2844 DH | 14 | 2' - 8" | 4' - 4" | DOUBLE HUNG | |
| 2850 DH | 17 | 2' - 8" | 5' - 0" | DOUBLE HUNG | |
| 3040 DH | 1 | 3' - 0" | 4' - 0" | DOUBLE HUNG | |
| 3050 DH | 1 | 3' - 0" | 5' - 0" | DOUBLE HUNG | |
| 3054 DH | 1 | 3' - 0" | 5' - 4" | DOUBLE HUNG | |

**NOTE:** CONTRACTOR SHALL VERIFY ALL EXISTING WINDOW SIZES PRIOR TO ORDERING REPLACEMENT WINDOWS

Acknowledgement Of Plans Submittal ONLY!

Date _____

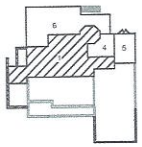
Date 9/24/21




1 LOWER LEVEL FLOOR PLAN
1/4" = 1'-0"

## ESTIMATED SQUARE FOOTAGES & DIAGRAM:

| Number | Name | Existing Area | New Area | Total Area |
|---|---|---|---|---|
| 1 | LOWER LEVEL LIVING AREA | 877 SF | 95 SF | 972 SF |
| 2 | MAIN LEVEL LIVING AREA | 1601 SF | 682 SF | 2283 SF |
| 3 | UPPER LEVEL LIVING AREA | 1965 SF | 838 SF | 2803 SF |
| TOTAL FINISHED LIVING: | | | | 6058 SF |
| 4 | MECH | 154 SF | 154 SF | 154 SF |
| 5 | UNFINISHED STORAGE | 0 SF | 182 SF | 182 SF |
| 6 | COVERED PATIO | 231 SF | -115 SF | 116 SF |
| 7 | GARAGE | 560 SF | 342 SF | 902 SF |
| TOTAL UNDER ROOF: | | | | 1353 SF |




NOTE: THESE PLANS NOT VALID FOR PERMITTING PURPOSES UNLESS THEY BEAR THE ORIGINAL SEAL OF JENNIFER PIPPIN, CPED AND ARD.

ALL EXISTING SITE CONDITIONS TO BE VERIFIED BY THE CONTRACTOR PRIOR TO CONSTRUCTION. NOTES AND DIMENSIONS ON ARCHITECTURAL PLANS SHALL BE VERIFIED WITH STRUCTURAL DRAWINGS, AND EXISTING SITE CONDITIONS. ANY DISCREPANCIES IN NOTES AND / OR DIMENSIONS SHALL BE BROUGHT TO THE ATTENTION OF THE DESIGNER IN A TIMELY MANNER. DESIGNER MAKES NO GUARANTEE OF THE ACTUAL SITE CONDITIONS AND MEASUREMENTS, AS NO DEMOLITION HAS BEEN UNDERTAKEN BY THE DESIGNER OR REPRESENTATIVES OF PIPPIN HOME DESIGNS, TO VERIFY EXISTING CONDITIONS.

ALL FEDERAL, STATE & LOCAL CODES, ORDINANCES, AND REGULATIONS, ETC. SHALL BE CONSIDERED AS PART OF THE SPECIFICATIONS OF THIS BUILDING, AND ARE TO BE ADHERED TO EVEN IF THEY ARE IN VARIANCE WITH THE PLAN.

DESIGNER ASSUMES NO RESPONSIBILITY OVER ANY PHASE OF CONSTRUCTION OR COMPLETED BUILDING.

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AWARD WINNING HOMES WITH A VIEW
Professional Member, AIBD
516-D RIVER HIGHWAY
PMB 174
MOORESVILLE, NC 28117
TEL 704-563-8637
www.pippinhomedesigns.com

Creating where people live

A RENOVATION FOR:
BILL & JANE BABILON
160 ATLANTIC WAY
MOORESVILLE, NC 28117
IREDELL COUNTY

| REVISIONS: | BY: |
|---|---|
| | |

PROJECT #: Project Number
DATE: 2/10/2021
DRAWN BY: MTEK
DESIGNED BY: JSP

SHEET NO. 6

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PIPPIN
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Professional Member, AIBD
516-C RIVER HIGHWAY
PMB 174
MOORESVILLE, NC 28117
TEL: 704-363-8637
www.pippinhomedesigns.com

## SEE FLOOR PLANS & ELEVATIONS FOR TAG SYMBOL LOCATION

EXTERIOR DOOR SCHEDULE

| Type Mark | COUNT | WIDTH | HEIGHT | DESCRIPTION | NOTES |
|---|---|---|---|---|---|
| 3068 | 1 | 6' - 0" | 6' - 8" | DOUBLE FULL GLASS DOOR W/ 2x3 GRILLS | |
| 3068 | 1 | 3' - 0" | 6' - 8" | SINGLE FULL GLASS DOOR | |
| 3068 | 1 | 3' - 0" | 6' - 8" | SINGLE HALF GLASS DOOR W/ 3x3 GRILLS | |
| 10080 OHD | 1 | 10' - 0" | 8' - 0" | OHGD | |
| 12080 | 1 | 12' - 0" | 8' - 0" | Triple Sliding Ful Glass Door | |
| 18080 OHD | 1 | 18' - 0" | 8' - 0" | OHGD | |

INTERIOR DOOR SCHEDULE

| Symbol | COUNT | WIDTH | HEIGHT | DESCRIPTION | NOTES |
|---|---|---|---|---|---|
| 2868 | 1 | 2' - 8" | 6' - 8" | | |
| 5068 BP | 2 | 5' - 0" | 6' - 8" | | |
| 2068 | 1 | 2' - 6" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 2068 | 1 | 2' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 2468 | 3 | 2' - 4" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 2668 PKT | 2 | 2' - 6" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | POCKET DOOR |
| 2868 | 2 | 2' - 8" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 3068 | 12 | 3' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 4068 | 2 | 4' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | DOUBLE BIFOLD |
| 6068 | 2 | 6' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | DOUBLE BIFOLD |
| 3068 PKT | 2 | 3' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | POCKET DOOR |

**NOTE: CONTRACTOR SHALL VERIFY ALL EXISTING DOOR SIZES PRIOR TO ORDERING REPLACEMENT DOORS**

## SEE FLOOR PLANS & ELEVATIONS FOR TAG SYMBOL LOCATION

WINDOW SCHEDULE

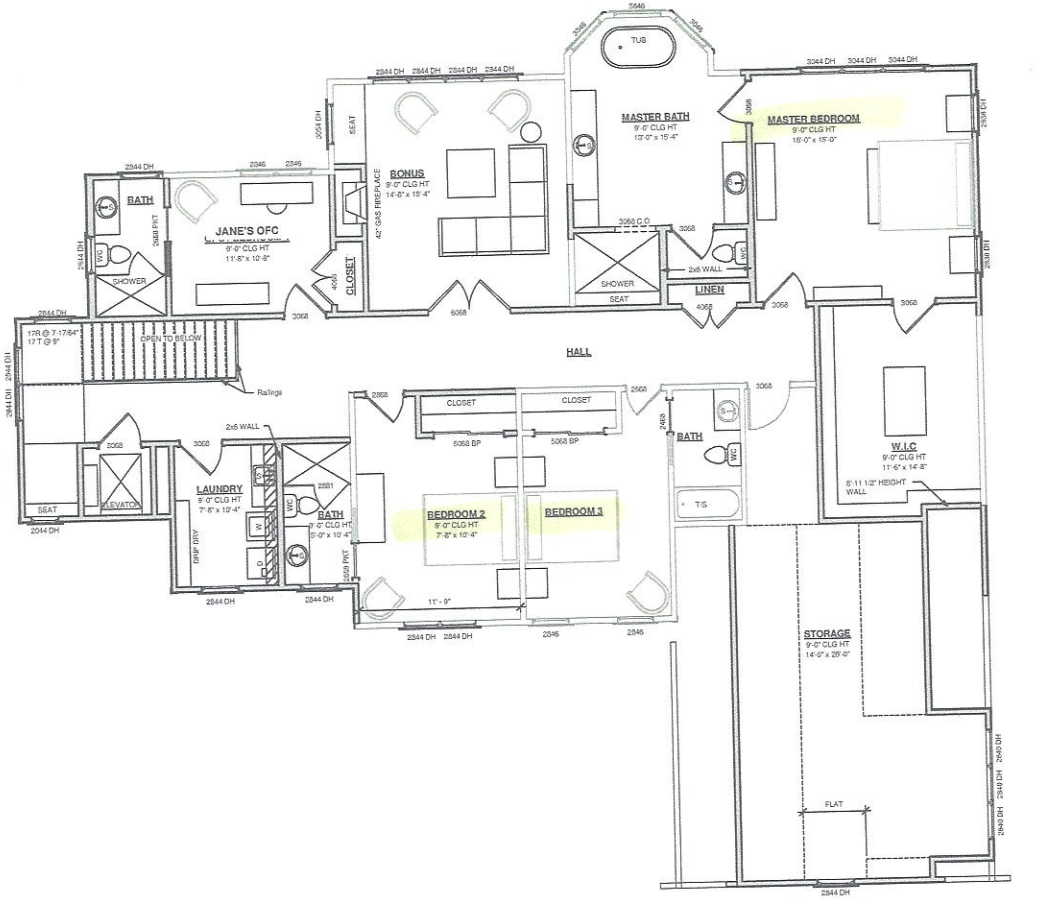
| Symbol | QTY | WIDTH | HEIGHT | DESCRIPTION | NOTES |
|---|---|---|---|---|---|
| 2044 DH | 1 | 2' - 0" | 4' - 4" | DOUBLE HUNG | |
| 2050 DH | 1 | 2' - 0" | 5' - 0" | DOUBLE HUNG | |
| 2838 DH | 2 | 2' - 8" | 3' - 8" | DOUBLE HUNG | |
| 2849 DH | 3 | 2' - 8" | 4' - 9" | | |
| 2844 DH | 14 | 2' - 8" | 4' - 4" | DOUBLE HUNG | |
| 2850 DH | 17 | 2' - 8" | 5' - 0" | DOUBLE HUNG | |
| 3040 DH | 1 | 3' - 0" | 4' - 0" | DOUBLE HUNG | |
| 3044 DH | | | | | |
| 3054 DH | | | | | |

**NOTE: CONTRACTOR SHALL VERIFY ALL EXISTING WINDOW SIZES PRIOR TO ORDERING REPLACEMENT WINDOWS**

Acknowledgement Of Plans Submittal ONLY!

_____ Date _____

_____ Date 8/24/21

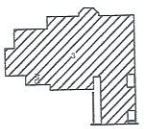



1 UPPER LEVEL FLOOR PLAN
1/4" = 1'-0"

## ESTIMATED SQUARE FOOTAGES & DIAGRAM:

| Number | Name | Existing Area | New Area | Total Area |
|---|---|---|---|---|
| 1 | LOWER LEVEL LIVING AREA | 877 SF | 95 SF | 972 SF |
| 2 | MAIN LEVEL LIVING AREA | 1601 SF | 682 SF | 2283 SF |
| 3 | UPPER LEVEL LIVING AREA | 1965 SF | 838 SF | 2803 SF |
| TOTAL FINISHED LIVING: | | | | 6058 SF |

| | | | | |
|---|---|---|---|---|
| 4 | MECH | 154 SF | 154 SF | 154 SF |
| 5 | UNFINISHED STORAGE | 0 SF | 182 SF | 182 SF |
| 6 | COVERED PATIO | 231 SF | -115 SF | 116 SF |
| 7 | GARAGE | 560 SF | 342 SF | 902 SF |
| TOTAL UNDER ROOF: | | | | 1353 SF |



ALL EXISTING SITE CONDITIONS TO BE VERIFIED BY THE CONTRACTOR PRIOR TO CONSTRUCTION. NOTES AND DIMENSIONS ON ARCHITECTURAL PLANS SHALL BE VERIFIED WITH STRUCTURAL DRAWINGS, AND EXISTING SITE CONDITIONS. ANY DISCREPANCIES IN NOTES AND / OR DIMENSIONS SHALL BE BROUGHT TO THE ATTENTION OF THE DESIGNER IN A TIMELY MANNER. DESIGNER MAKES NO GUARANTEE OF THE ACTUAL SITE CONDITIONS AND MEASUREMENTS AS NO DIMCULTION HAS BEEN UNDERTAKEN BY THE DESIGNER OR REPRESENTATIVES OF PIPPIN HOME DESIGNS, TO VERIFY EXISTING CONDITIONS.

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DESIGNER ASSUMES NO RESPONSIBILITY OVER ANY PHASE OF CONSTRUCTION OR COMPLETED BUILDING.

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Creating where people live

A RENOVATION FOR:
BILL & JANE BABILON
180 ATLANTIC WAY
MOORESVILLE, NC 28117
IREDELL COUNTY

| REVISIONS: | BY: |
|---|---|
| | |

PROJECT # Project Number
DATE: 2/10/2021
DRAWN BY: MTEK
DESIGNED BY: JSP

SHEET NO. 10

NOTE:
THESE PLANS ARE NOT VALID FOR PERMITTING PURPOSES UNLESS THEY BEAR THE SIGNATURE & SEAL OF JENNIFER B. PIPPIN, CPBD AND AIBD.

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## SEE FLOOR PLANS & ELEVATIONS FOR TAG SYMBOL LOCATION

EXTERIOR DOOR SCHEDULE

| Type Mark | COUNT | WIDTH | HEIGHT | DESCRIPTION | NOTES |
|---|---|---|---|---|---|
| 3068 | 1 | 5' - 0" | 6' - 8" | DOUBLE FULL GLASS DOOR W/ 2x3 GRILLS | |
| 3068 | 1 | 3' - 0" | 6' - 8" | SINGLE FULL GLASS DOOR | |
| 3068 | 1 | 3' - 0" | 6' - 8" | SINGLE HALF GLASS DOOR W/ 3x3 GRILLS | |
| 10080 OHD | 1 | 10' - 0" | 8' - 0" | OHGD | |
| 12080 | 1 | 12' - 0" | 8' - 0" | Triple Sliding Full Glass Door | |
| 18080 OHD | 1 | 18' - 0" | 8' - 0" | OHGD | |

INTERIOR DOOR SCHEDULE

| Symbol | COUNT | WIDTH | HEIGHT | DESCRIPTION | NOTES |
|---|---|---|---|---|---|
| 2868 | 1 | 2' - 8" | 6' - 8" | | |
| 5068 BP | 2 | 5' - 0" | 6' - 8" | | |
| 2868 | 1 | 2' - 8" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 2068 | 1 | 2' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 2468 | 2 | 2' - 4" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 2668 PKT | 2 | 2' - 6" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | POCKET DOOR |
| 2868 | 2 | 2' - 8" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 3068 | 12 | 3' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | |
| 4068 | 2 | 4' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | DOUBLE BIFOLD |
| 6068 | 2 | 6' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | DOUBLE BIFOLD |
| 3068 PKT | 2 | 5' - 0" | 6' - 8" | STAINED 3-PANEL DOUGLAS FIR DOOR | POCKET DOOR |

NOTE: CONTRACTOR SHALL VERIFY ALL EXISTING DOOR SIZES PRIOR TO ORDERING REPLACEMENT DOORS

## SEE FLOOR PLANS & ELEVATIONS FOR TAG SYMBOL LOCATION

WINDOW SCHEDULE

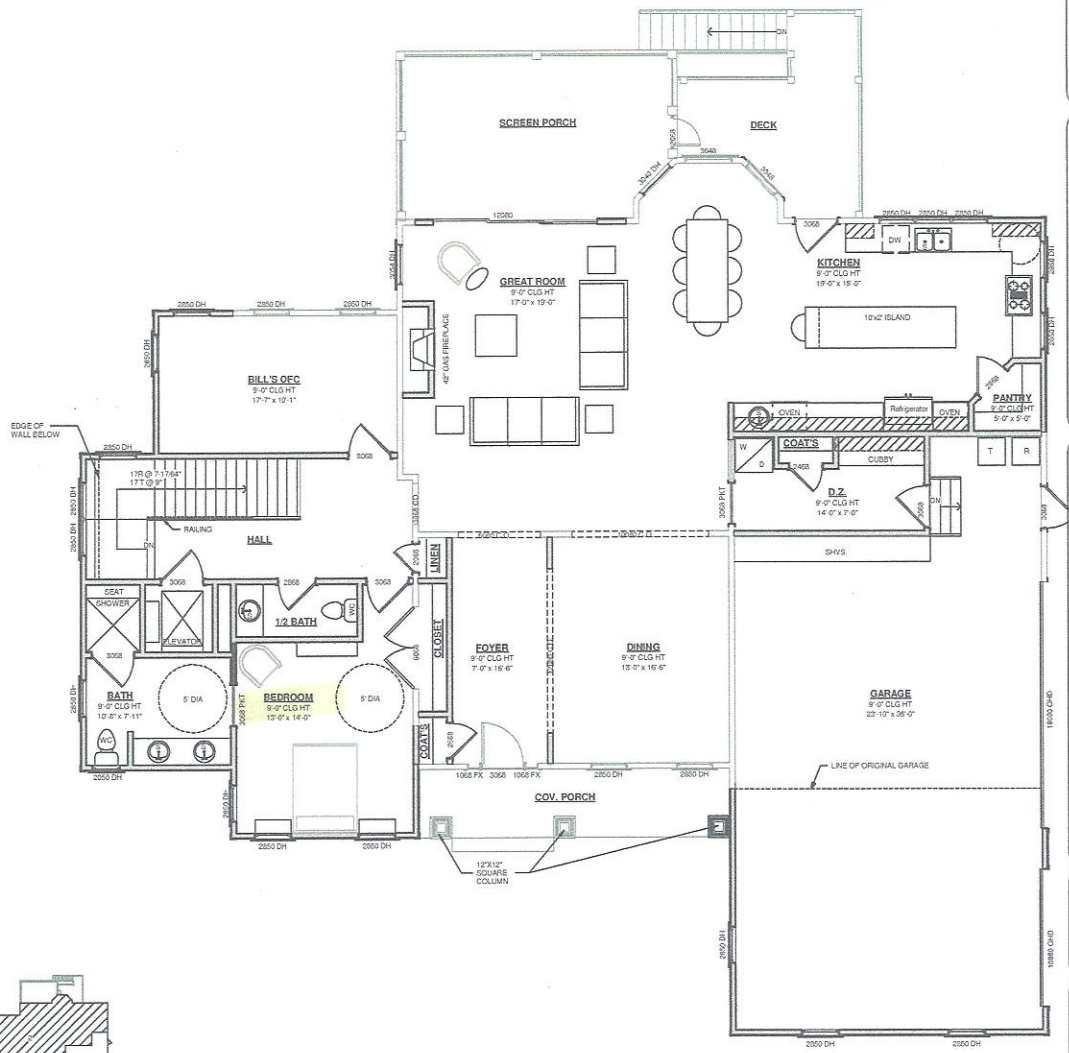
| Symbol | QTY | WIDTH | HEIGHT | DESCRIPTION | NOTES |
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| 2838 DH | 2 | 2' - 8" | 3' - 8" | DOUBLE HUNG | |
| 2840 DH | 3 | 2' - 8" | 4' - 0" | | |
| 2844 DH | 14 | 2' - 8" | 4' - 4" | DOUBLE HUNG | |
| 2850 DH | 17 | 2' - 8" | 5' - 0" | DOUBLE HUNG | |
| 3040 DH | 1 | 3' - 0" | 4' - 0" | DOUBLE HUNG | |
| 3044 DH | | | | | |
| 3054 DH | | | | | |

NOTE: CONTRACTOR SHALL VERIFY ALL EXISTING WINDOW SIZES PRIOR TO ORDERING REPLACEMENT WINDOWS

Acknowledgement Of Plans Submittal ONLY!

Date

Date 8/24/21

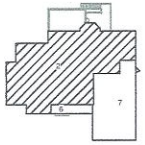



1 MAIN LEVEL FLOOR PLAN
1/4" = 1'-0"

## ESTIMATED SQUARE FOOTAGES & DIAGRAM:

| Number | Name | Existing Area | New Area | Total Area |
|---|---|---|---|---|
| 1 | LOWER LEVEL LIVING AREA | 877 SF | 95 SF | 972 SF |
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| | | | | |
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TEL 704-363-8037
www.pippinhomedesigns.com

Creating where people live

A RENOVATION FOR:
BILL & JANE BABILON
180 ATLANTIC WAY
MOORESVILLE, NC 28117

IREDELL COUNTY

| REVISIONS: | BY: |
|---|---|
| | |

PROJECT #: Project Number
DATE: 2/10/2021
DRAWN BY: MTEK
DESIGNED BY: JSP

SHEET NO. 8

3156407

"I certify that this map was drawn under my supervision from an actual survey made under my supervision, (deed description recorded in Book ____, page ____, or other reference source [IRE SURVEY]; that the boundaries not surveyed are indicated as drawn from information in Book ____, page ____, or other reference source [IRE SURVEY]; that the ratio of precision or positional accuracy is 1:10,000+; and that this map meets the requirements of The Standards of Practice for Land Surveying in North Carolina [21 NCAC 56. 1600]."

This 11 day of DECEMBER, 2019.

Seal
Professional Land Surveyor

NORTH CAROLINA SEAL L-3105 JACOB W. HELTON

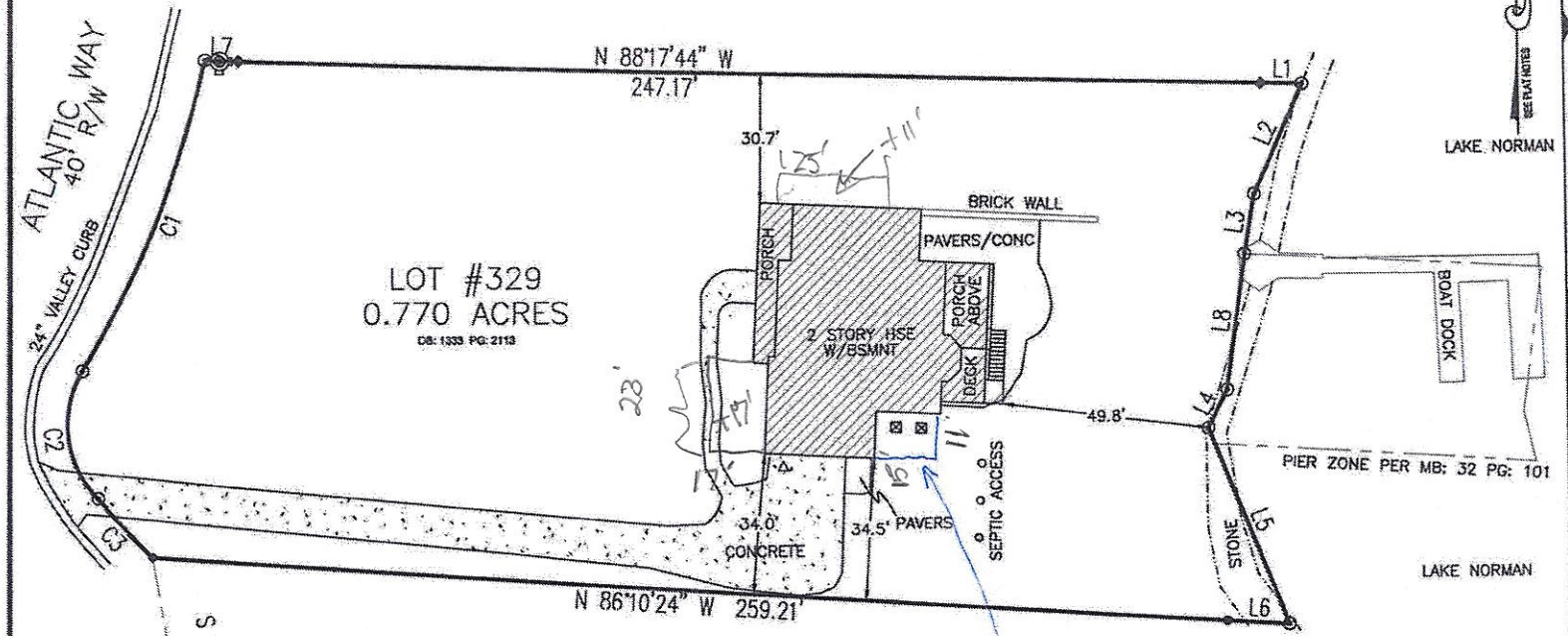
HOWELL
2478-2361

A
PHYSICAL SURVEY
of
*180 Atlantic Way*

DAVIDSON TOWNSHIP
IREDELL COUNTY, NC
DECEMBER 11, 2019

PROPERTY INFORMATION:
TAX ACCT #: 77418822

OWNER INFORMATION:
WILLIAM BARGER
114 STONEMARKER RD
MOORESVILLE, NC 28117




| LINE | BEARING | DISTANCE |
|---|---|---|
| L1 | N 88°23'46" W | 10.02' |
| L2 | N 24°39'02" E | 28.77' |
| L3 | S 09°46'28" W | 14.42' |
| L4 | N 27°11'56" E | 10.19' |
| L5 | S 21°40'45" E | 51.20' |
| L6 | S 86°10'24" E | 14.94' |
| L7 | N 88°09'24" W | 8.02' |
| L8 | N 07°54'00" E | 32.76' |

| CURVE | RADIUS | ARC LENGTH | CHORD LENGTH | CHORD BEARING | DELTA ANGLE |
|---|---|---|---|---|---|
| C1 | 245.00' | 80.19' | 79.84' | N 22°03'49" E | 18°45'15" |
| C2 | 25.00' | 33.49' | 31.04' | N 07°11'55" W | 76°45'41" |
| C3 | 170.00' | 19.27' | 19.26' | N 42°15'49" W | 6°29'35" |

SHADY
2592-984

Home addition
2 story
11 x 15' appox

LEGEND
RCP REINFORCED CONCRETE PIPE
HDPE HIGH DENSITY PLASTIC
CMP CORRUGATED METAL PIPE
DB PG DEED BOOK & PAGE
MB PG MAP/PLAT BOOK & PAGE
R/W RIGHT OF WAY
AC ACRES
C/L CENTERLINE
CONCRETE MONUMENT
MAGNETIC/PK NAIL
IRON PIPE
COMPUTED POINT
EMBANKED CORNER IN TREE
REBAR FOUND
BENCHMARK
GEODETIC MONUMENT
REBAR SET
SANITARY SEWER MANHOLE
UTILITY POLE
SIGN
WATER WELL
WATER VALVE
HYDRANT
BOUNDARY LINE (AS SURVEYED)
TIE LINE (NO SCALE)
WOODLINE
FENCE
EDGE OF GRAVEL
CURB & GUTTER
BOUNDARY LINE (BY REFERENCE)
RIGHT-OF-WAY LINE
EASEMENT LINE
TIE LINE
OVERHEAD POWER LINE
CENTERLINE OF BRANCH / CREEK
FEMA 100 YEAR FLOOD LINE

PLAT NOTES:
1.PLAT NORTH IS BASED ON PB:32-101
2.NO GEODETIC MONUMENTS WERE FOUND WITHIN 2000'
3.AREA COMPUTED USING COORDINATE METHOD
4.ALL DISTANCES ARE GROUND HORIZONTAL UNLESS OTHERWISE NOTED
5.ANY TRAVERSE ADJUSTMENTS WERE PERFORMED USING THE COMPASS RULE
6. PROPERTY MAY BE SUBJECT TO BURDENS OR BENEFITS NOT SHOWN


HELTON
SURVEYING & MAPPING PLLC
(704) 634-9354
JACOB@HELTON.BIZ
JACOB W. HELTON, PLS, CFS
3579 ANDERSON MOUNTAIN RD.
MAIDEN, NC 28650


DEED AND PLAT REFERENCES:
DB: 1333 PG: 2113
PB: 32 PG: 101

0 20 40
SCALE: 1" = 20'

| SURVEY: | DRAWN: | JOB: |
|---|---|---|
| JHH 12/2/19 | JHH 12/11/19 | 20234 |

VICINITY SKETCH: NO SCALE

