IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 21572

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

PIN # 4627310472

APPLICANT: LEO BELLER APPLICANT ADDRESS: 124 Yellow Bell Rd Mooresville NC

SITE ADDRESS: 238 LAKEVIEW SHORES LOOP - Mrsvl. PHONE: ALT. PHONE:

SITE DIRECTIONS: BSR - TR MCKENDREE - TR LAKEVIEW SHORES - ON RT

SUBDIVISION: CL&T SECTION: 8 LOT # 335 LOT AREA: 1.83 DESIGN FLOW: 480 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: 400
Trench Width 36" Max. Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI
System Description: Pump 25% Reduction
Repair System Description: TSEE DRIP
Maintenance Agreement Required: ☐ YES ☑ NO
☐ GRAVITY ☑ PRESSURE

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

Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions:

Time - Drainfield - Pressurized - Floats Set - 9/21/17 BB

INITIAL SITE SKETCH

See Michael Athanas & Associates Design.

AS BUILT SKETCH

	Date	Initials
Drain Lines Checked	8/21	BB
Tanks Checked	8/21	BB
Pressure Manifold or Valve Box Checked	8/21	BB
Pressure Head Set	8/21	BB
Electrical Checked	9-7-17	KW
Floats Set	8/21	BB.
Alarm Checked	9-7-17	KW
Maintenance Contract Y / (N)		
Comments:		

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: Leo L. Beller Date: 9/6/16

IMPROVEMENT PERMIT by: Date: 8/30/16

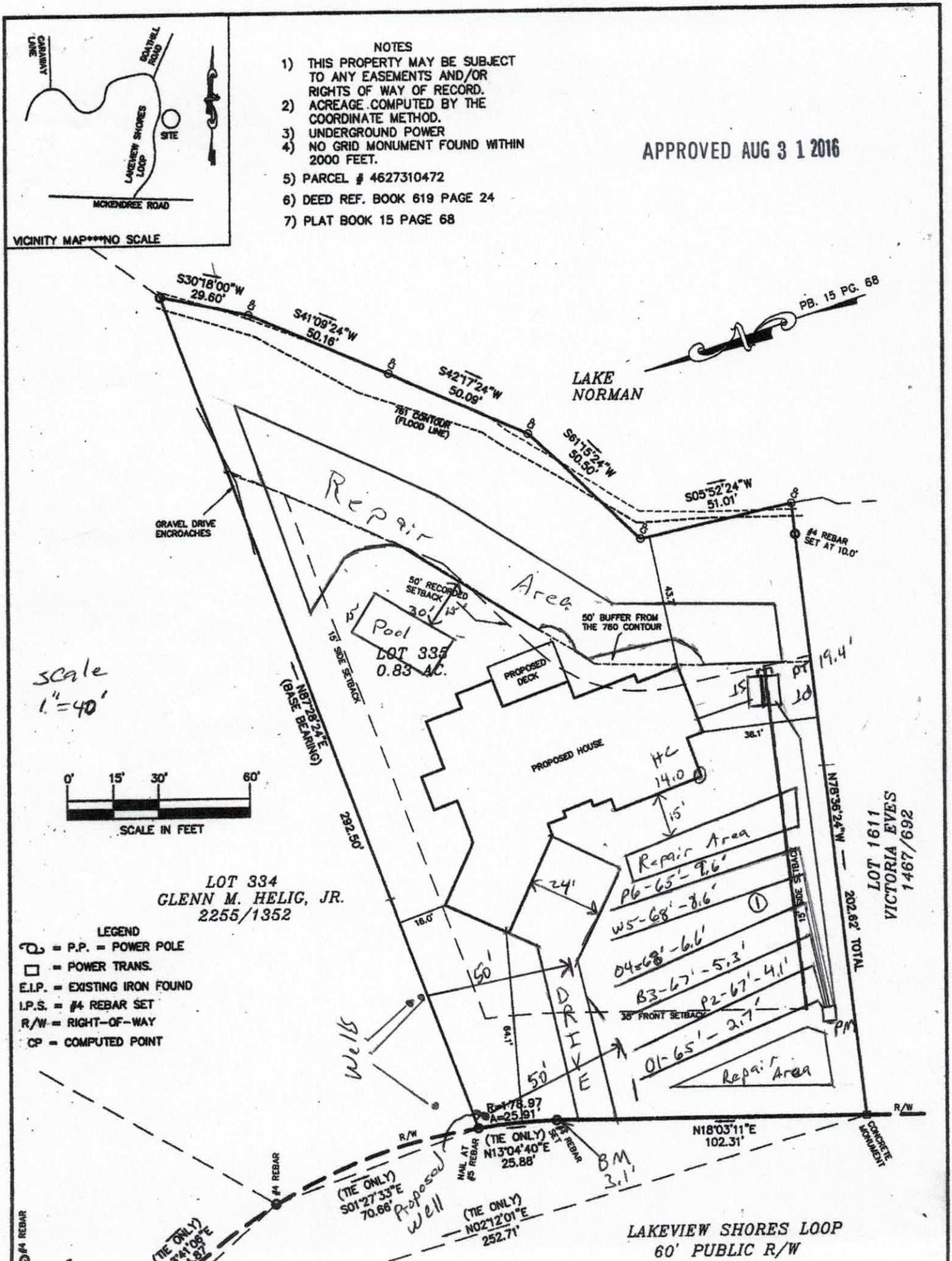
AUTHORIZATION TO CONSTRUCT by: Date: 9-13-16

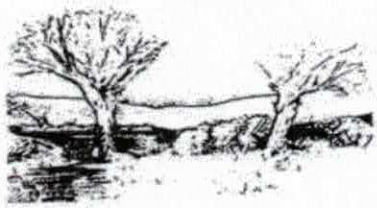
Installed by: Kevin w/ Rowan Septic

OPERATION PERMIT by: Date: 9-7-17

Existing System Inspected by: Date:

Health Dept. Copy - WHITE Applicant (Final Approval) - YELLOW Applicant (Conditional Approval) - PINK


VICINITY MAP***NO SCALE
CARAWAY LANE
BOATWELL ROAD
LAKEVIEW SHORES LOOP
SITE
MCKENDREE ROAD
NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
5) PARCEL # 4627310472
6) DEED REF. BOOK 619 PAGE 24
7) PLAT BOOK 15 PAGE 68
APPROVED AUG 3 1 2016
S30°18'00"W 29.60'
S41°09'24"W 50.16'
S42°17'24"W 50.09'
S61°15'24"W 50.50'
S05°52'24"W 51.01'
PB. 15 PG. 68
LAKE NORMAN
760 CONTOUR (FLOOD LINE)
GRAVEL DRIVE ENCROACHES
Repair Area
#4 REBAR SET AT 10.0'
50' RECORDED SETBACK
30'
15'
Pool
LOT 335
0.83 AC.
15' SIDE SETBACK
50' BUFFER FROM THE 760 CONTOUR
PROPOSED DECK
PROPOSED HOUSE
N87°28'24"E (BASE BEARING)
292.50'
Scale 1"=40'
0' 15' 30' 60'
SCALE IN FEET
HC 14.0
15'
Repair Area
P6-65'-9.6'
W5-68'-8.6'
04-68'-6.6'
B3-67'-5.3'
P2-67'-4.1'
01-65'-2.7'
Repair Area
24'
16.0'
64.1'
50'
DRIVE
Wells
38' FRONT SETBACK
15' SIDE SETBACK
N78°36'24"W 202.82' TOTAL
LOT 1611
VICTORIA EVES
1467/692
LOT 334
GLENN M. HELIG, JR.
2255/1352
LEGEND
P.P. = POWER POLE
POWER TRANS.
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
CP = COMPUTED POINT
R=178.97
A=25.91
(TIE ONLY) N13°04'40"E 25.88'
NAIL AT #5 REBAR
#5 REBAR SET
BM 3.1'
N18°03'11"E 102.31'
CONCRETE MONUMENT
R/W
#4 REBAR
(TIE ONLY) S01°27'33"E 70.66'
Proposed well
(TIE ONLY) N02°12'01"E 252.71'
LAKEVIEW SHORES LOOP
60' PUBLIC R/W



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet for 238 Lakeview Shores Lp, CL&T Sec 8, Lot 335
House Footprint: See attached plan
Building Setbacks: 35' front, 15' side, 50' lake
Water Source: Private well
Number of Bedrooms: 4/480 GPD
Proposed LTAR: 0.3 GPD/FT2 (initial), 0.125 GPD/FT2 (repair)
Proposed System Type: 25% Reduction
Proposed Repair System Type: TSII Pretreatment Drip
Distribution: Pressure Manifold
Flow per Tap: 5.48 GPM
Tap Size and Material: ½" SCH 80
System Flow: 32.9 GPM
Dosing Volume: 175 gallons
Pump Run Time: 5.3 minutes
Elevation Head: 21.7'
Friction Head: 3.5'
Pressure Head: 2'
Total Dynamic Head: 27.2'
Supply Line Length: 110' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 36"

APPROVED AUG 3 1 2016

Line	Design Length	Actual Length	Elevation
Orange 1	65'	65'	2.7'
Pink 2	67'	67'	4.1'
Blue 3	67'	68'	5.3'
Orange 4	68'	73'	6.6'
White 5	68'	72'	8.6'
Pink 6	65'	65'	9.6'

Initial System: 400' **Repair System:** 4400 FT2
Pump Tank: 19.4' **House Corner:** 14.0' **Benchmark:** 3.1'

Comments:
The purpose of this evaluation is to change the house lay out and to change the system type. The tanks are marked with yellow flags. The pool is marked with blue flags. The proposed well is marked 3' from the property corner. Red flags mark the 50' setback from the well. MA&A performed on soil observation to con firm soils. The system and repair are in previously approved soil areas.

Do not cut within 15' of the system area.
Fence off the initial septic area-Damage to the septic area may result in the use of the PPBPS system.



APPROVED AUG 3 1 2016

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ONSITE WATER PROTECTION BRANCH

PROPERTY ID #: 4627310472
COUNTY: Iredell

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

OWNER: Leo Beller
APPLICATION DATE
ADDRESS: 124 Yellow Bell Rd, Mooresville, NC 28117
DATE EVALUATED:
PROPOSED FACILITY: 4 bdrm
PROPOSED DESIGN FLOW (.1949): 480 GPD
PROPERTY SIZE: 0.83 AC
LOCATION OF SITE: 238 Lakeview Shores Lp. CL&T Sec 8, Lot 335
PROPERTY RECORDED: 10/5/1977
WATER SUPPLY: Ξ Private ☐ Public Ξ Well ☐ Spring ☐ Other
EVALUATION METHOD: Ξ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: Ξ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	LS 10%	0-3	FILL		N/A	48"	N/A	N/A	PS 0.3
		3-40	R C SBK	FR SS SP SEXP					
		40-48	R CL WSBK	FR SS SP SEXP					
2							APPROVED AUG 31 2016		
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1200 FT2	4400 FT2
System Type(s)	25% Reduction	DRIP
Site LTAR	0.3	0.125

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT:

COMMENTS:

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ONSITE WATER PROTECTION BRANCH

PROPERTY ID #: 4627310472
COUNTY: Iredell

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

OWNER: Kenneth Reid _____ APPLICATION DATE _____
ADDRESS: 8910 Mill Grove Rd. Indian Trail, NC 28079 _____ DATE EVALUATED: _____
PROPOSED FACILITY: 4 bdrm _____ PROPOSED DESIGN FLOW (.1949): 480 GPD _____ PROPERTY SIZE: 0.83 AC _____
LOCATION OF SITE: 238 Lakeview Shores Lp. CL&T Sec 8, Lot 335 _____ PROPERTY RECORDED: 10/5/1977

WATER SUPPLY: ☒ Private ☐ Public ☒ Well ☐ Spring ☐ Other _____

EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

Approved 1/13/16 MD

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	LS 10%	0-18	FILL		N/A	48"	N/A	N/A	PS 0.3
		18-28	R C SBK	FR SS SP SEXP					
		28-48	R CL WSBK	FR SS SP SEXP					
2	LS 10%	0-4	Br CL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		4-30	R C SBK	FR SS SP SEXP					
		30-48	R CL WSBK	FR SS SP SEXP					
3	LS 10%	0-8	Br CL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		8-46	R C SBK	FR SS SP SEXP					
		46-48	R CL WSBK	FR SS SP SEXP					
4	LS 10%	0-32	R C SBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		32-48	R CL WSBK	FR SS SP SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	810 FT2	4490 FT2
System Type(s)	PPBPS	DRIP
Site LTAR	0.3	0.125

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS _____
EVALUATED BY: MA&A _____
OTHER(S) PRESENT: _____

COMMENTS: _____

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

PROPERTY ID #: 4627310472
DATE OF EVALUATION: _____
COUNTY: IREDELL

Approved 1/13/16 MD

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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
5	LS 10%	0-8	Br CL WSBK	FR SS SP SEXP	Few YB	48"	N/A	N/A	PS 0.275 NOT IN SYSTEM AREA
		8-48	R C SBK	FR SS SP SEXP					
6	LS 12%	0-8	Br CL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		8-48	R C SBK	FR SS SP SEXP					
7	LS 12%	0-6	Br CL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		6-48	R C SBK	FR SS SP SEXP					
8	LS 12%	0-8	Br CL WSBK	FR SS SP SEXP	N/A	48"	N/A	N/A	PS 0.3
		8-36	R C SBK	FR SS SP SEXP					
		36-48	R CL WSBK	FR SS SP SEXP					

COMMENTS: _____

COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Leo Beller APPLICANT: _____

ADDRESS: 238 Lakeview Shores APPLICATION DATE: _____ DATE EVALUATED: 11/11/16

PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____

LOCATION OF SITE: _____ PROPERTY RECORDED: _____

WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____

EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut

TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS 0%-10%	0-10"	Fill						PS .3
		10"-30"	RC m-w SBK	FR, SS, SP, SE, P					
			w/ very few yellow brw mottles						
		30-48"	RCL	w SBK SS, SP, SE, FR					
2									
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	PPBPS	Drip
Site LTAR	.3	.125

OTHER FACTORS (.1946): _____

SITE CLASSIFICATION (.1948): _____

EVALUATED BY: Maria Dotson

OTHER(S) PRESENT: _____

RECEIVED AUG 2 3 2016

IREDELL COUNTY HEALTH DEPARTMENT

Paid $225.00

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Int. Relayout #215721

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, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

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

The following optional attachments may also be submitted: (X) Survey Plat, scaled no more than 1 inch = 60 feet

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

Applicant Information:

Applicant Name: Leo Beller **Address:** 124 Yellow Bell Rd Mooresville NC 28117 **Phone:** 704 664 8972

Owner Name: Same **Address:** _____ **Phone:** _____

Property Information:

Street Address: 238 Lakeview Shores Lp

Subdivision Name: CL+T **Section/Phase:** 8 **Lot Number:** 335

Driving Directions: BSR, TR McKendree, TR Lakeview Sh, on Rt

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

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

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

(X) 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:

(X) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

Desired Septic System Type: *(you may rank in order of preference)* **Year existing system installed:** _____

( ) No Preference ( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other: Accepted

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: _____ 8/23/2016

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **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, LEO L. BELLER & DELPHINE J. BELLER, am the legal owner(s) of the property located at 238 LAKEVIEW SHORES LOOP, identified as PIN (Parcel Identification Number) 4627310472, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) _____, MICHAEL ATHANAS & ASSOCIATES, 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.

Leo L. Beller 8/17/16
Signature of Owner(s) Date

Delphine J. Beller 8/17/16
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 HEALTH DEPARTMENT

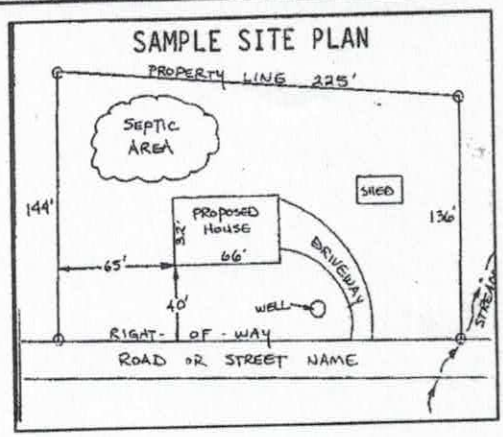
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

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



Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property	**N/A**
Location of easements and rights of ways on your property	**N/A**
Location of any designated wetlands on the property	**N/A**

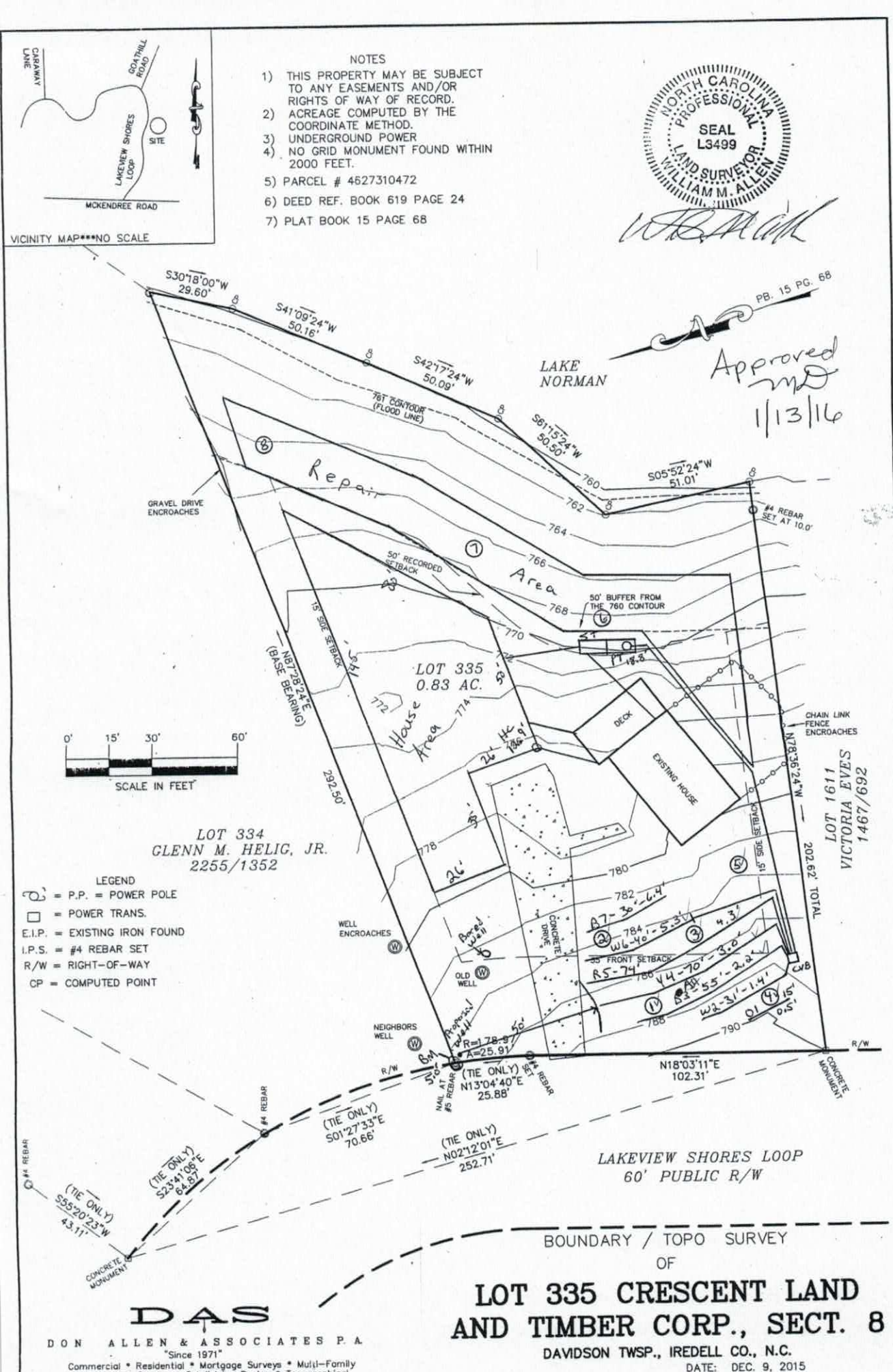
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

See Attached Plan

Signature: _____ 8/23/2016

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



DAS

DON ALLEN & ASSOCIATES P.A.

"Since 1971"

Commercial • Residential • Mortgage Surveys • Multi-Family
Construction Staking • Subdivision Design • Topographical

131 CROSSLAKE PARK DR. SUITE 102 • Mooresville, N.C. 28117
(704) 664-7029 (704) 664-8041 Fax

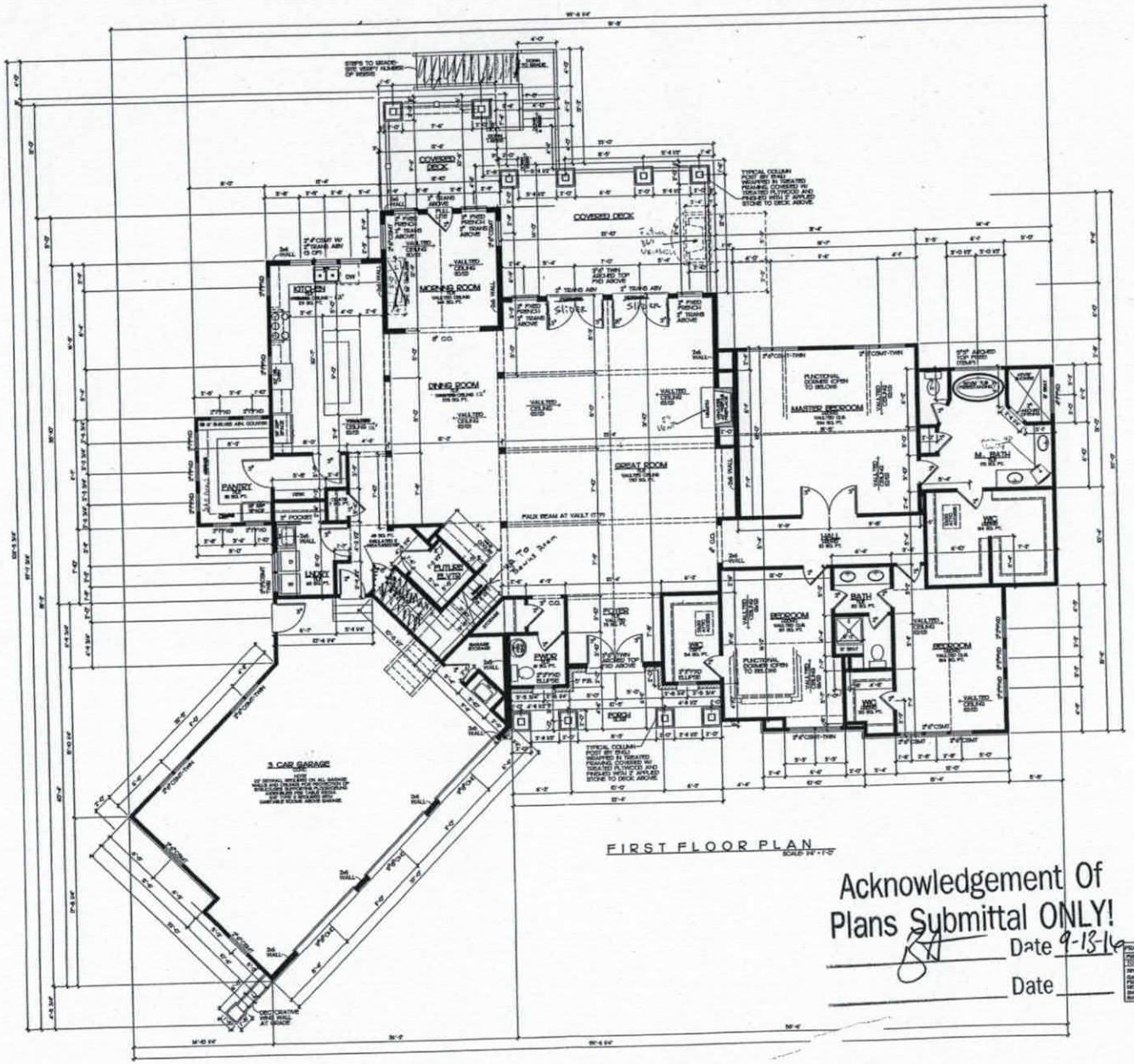
BOUNDARY / TOPO SURVEY
OF

LOT 335 CRESCENT LAND AND TIMBER CORP., SECT. 8

DAVIDSON TWSP., IREDELL CO., N.C.

DATE: DEC. 9, 2015

PURCHASER: LEO L. BELLER & DELPHINE J. BELLER



FIRST FLOOR PLAN

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

ELEVATION

EXTERIOR HANDRAIL DETAILS

NTS

ENGINEERING NOTES:

HANDRAIL NOTES

Acknowledgement Of
Plans Submittal ONLY!

Date 9-13-16

Date

FRAME SQUARE FOOTAGES	
FIRST FLOOR =	3,135 sq.ft.
TOTAL HEATED =	3,135 sq.ft.
SECOND FLOOR =	798 sq.ft.
GARAGE=	807 sq.ft.
FRONT PORCH=	72 sq.ft.
REAR DECK=	470 sq.ft.
BASEMENT=	3,135 sq.ft.
BASEMENT PATIO=	470 sq.ft.

6-1-16

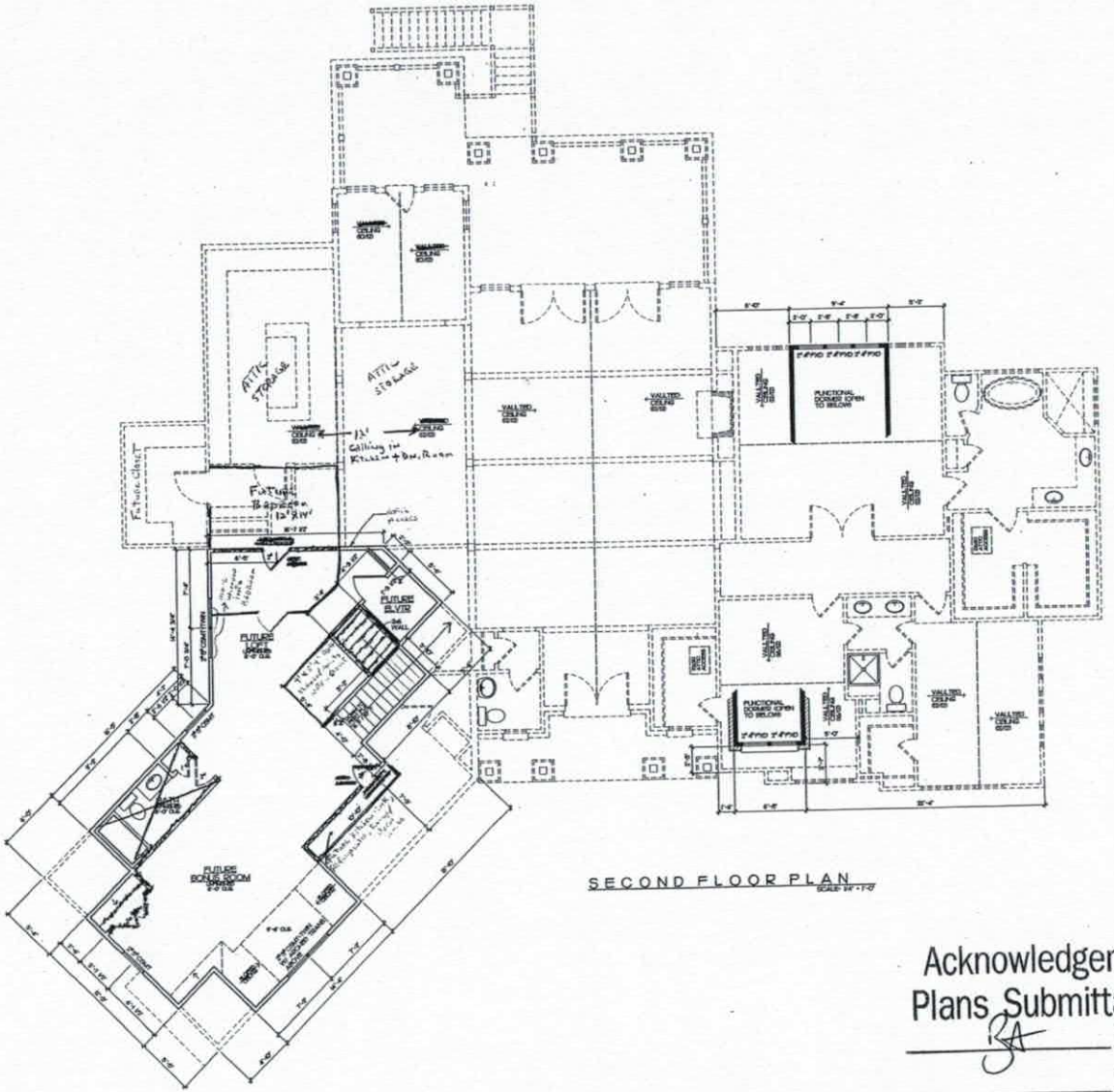
Drafting

Beller Family

FIRST FLOOR PLAN

Drawn By: J. BOEHNKE
Date: 6-2-16
REV: 6-7-16
8-19-16

Sheet 3



SECOND FLOOR PLAN



ELEVATION

EXTERIOR HANDRAIL DETAILS

N.T.S.

HANDRAIL NOTES

Acknowledgement Of Plans Submittal ONLY!

BA Date 9-13-16

Date

Drafting Plans Inc.

Beller Family

SECOND FLOOR PLAN

Drawn By: J. BOOKER

Date: 6-2-16

Rev: 6-15-16

Sht: 4

IREDELL COUNTY

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

APPLICATION NUMBER
215721
Issue Date: 12/30/2015

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4627310472.000	238 LAKEVIEW SHORES LOOP, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: REID KENNETH WAYNE	Applicant: MICHAEL ATHANAS & ASSO
Address: 8910 MILL GROVE RD MOORESVILLE, NC 28079	Address: 561 ENNIS RD WEDDINGTON, NC 28173
Phone:	Phone: 704-576-3887

Use Requested	Zone Code
SFD	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.830	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

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: _____ Date: _____

Permit Number	56952	TOTAL FEES:	$ 77.25