180209

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

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

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

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

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

Applicant Information:

Applicant Name: G & G Builders of Lake Norman LLC Address: 916 Fair Oak Dr. Sherrills Ford, NC 28673 Phone: 704-928-5200

Owner Name: Justin & Jessica Helms Address: 15824 Shaun Dale Dr. Davidson, NC 28036 Phone: 226-340-8230

Property Information:

Street Address: 316 Beaton Path Road Mooresville, NC 28115

Subdivision Name: _____ Section/Phase: _____ Lot Number: _____

Driving Directions: Brawley Road to (R) on Blume Road to (R) on Beaton Path
last on right

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: 3
Maximum Number of Occupants: 4
( ) 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: _____

(✓) 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: Casey McBrayer Manager
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

12/16/14
DATE

RECEIVED AUG 2 2 2014

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 Repair

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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: Jessica Helms **Address:** 15824 Sharon Dale Dr Davidson, NC 28036 **Phone:** 2763402285

Owner Name: Jessica & Justin Helms **Address:** same as above **Phone:** 2763408230

Property Information:

Street Address: 316 Beaten Path Rd Mooresville, Nc 28117

Subdivision Name: _____ **Section/Phase:** _____ **Lot Number:** _____

Driving Directions: I-77 - go west on Brawley School Rd (Exit 35) - Right on Biume Rd (right past McDonalds + Farm's market, Walgreens) left on Beaten Path Rd. Property on the right (316)

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: 3
Maximum Number of Occupants: _____
( ) 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:** _____

(✓) 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: Jessica Helms
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

8/22/14
DATE

IREDELL COUNTY HEALTH DEPARTMENT

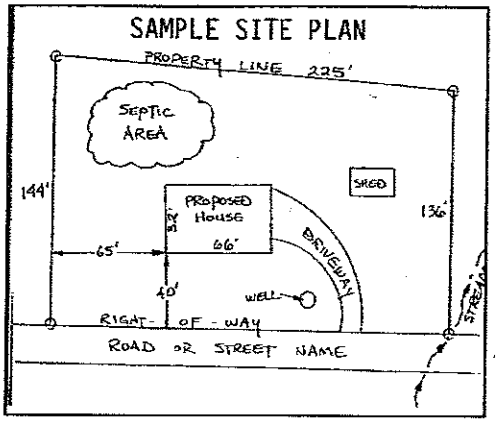
ENVIRONMENTAL HEALTH DIVISION

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**

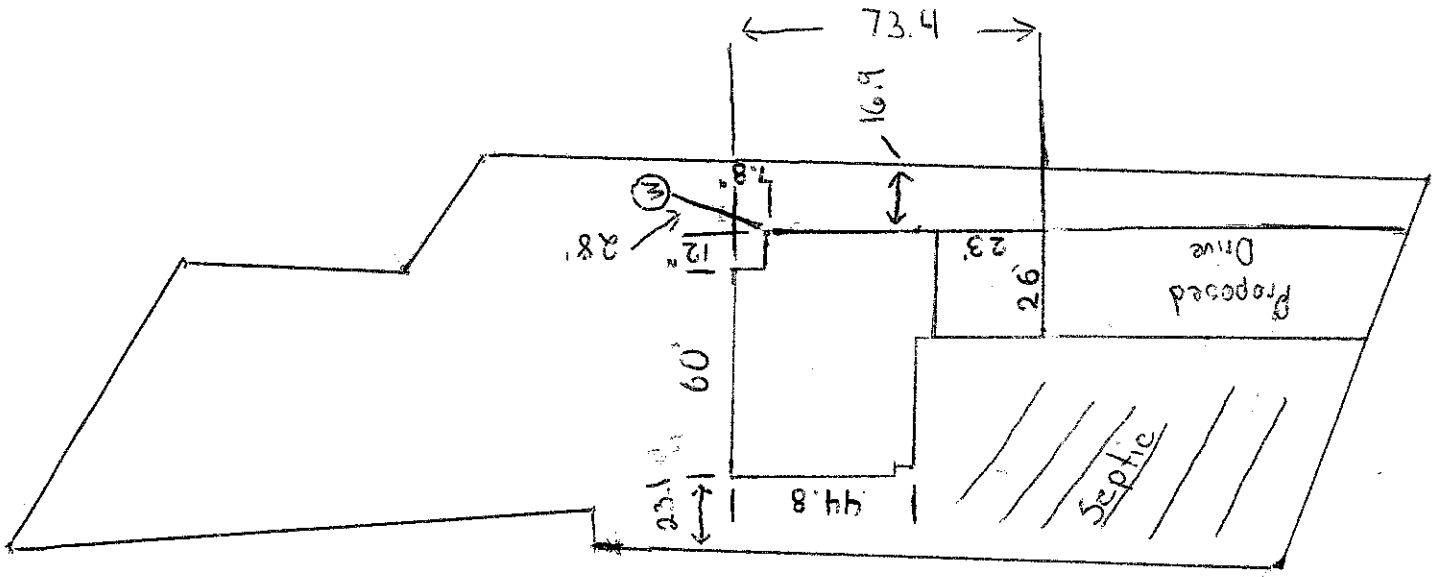


Circle N/A on the following if appropriate:

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



APPROVED SEP 02 2014

Signature: Jessica Hicks

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

8/22/14

DATE

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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Page 2: *Site Plan Worksheet* form MUST accompany this application Please provide a non expiring permit (cm)

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: Blue Harbor Bank **Address:** 106 Corporate Park Dr. Mooresville NC, 28117 **Phone:** 704-662-72

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

Property Information:

Street Address: 316 Beaten Path

Subdivision Name: _____ **Section/Phase:** _____ **Lot Number:** _____

Driving Directions: BSR, TR Blume, TL Beaten Path, 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: 3
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: _____
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:** _____

(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: _____ 9/13/2013
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Email Address: _____

IREDELL COUNTY HEATLH 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...
SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
____ Front and side setbacks from property line...
____ Preferred driveway location and configuration, preferred well location...
____ Area you prefer your septic system to be placed...
____ North arrow, or other sufficient indicator of direction...

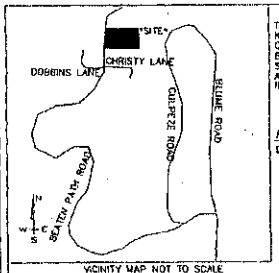
Circle N/A on the following if appropriate:

____ 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

Signature: _____ 9/13/2013
REQUIRED property owner or owner's legal representative signature. DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

See Attached Plan



THIS SUBDIVISION, TO THE BEST OF MY KNOWLEDGE, LIES WITHIN BOTH THE WS-IV CA OF THE LAKE NORMAN - CATAWBA RIVER BASIN AS DESIGNATED BY THE NORTH CAROLINA DIVISION OF ENVIRONMENTAL MANAGEMENT AND AS APPEARS ON WATERSHED PROTECTION MAP OF IREDELL COUNTY

11-14-06 DATE

Matthew D Todd SUBDIVISION ADMINISTRATOR

SITE DATA:
ACREAGE IN TOTAL TRACT TO BE SUBDIVIDED: ----1.378 AC.
ACREAGE IN ROAD R/W AND OTHER NONRESIDENTIAL USES: ----NONE
TOTAL NUMBER OF PARCELS CREATED: ----2 LOTS
ACREAGE IN SMALLEST LOT: ----0.689 acre (LOTS 1 & 2)
LINEAR FEET IN NEW STREETS: ----NONE

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

I, Matthew D Todd, REVIEW OFFICER OF IREDELL COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

Matthew D Todd REVIEW OFFICER

DATE: 11-14-06

I, GERALD V. GRANT, CERTIFY THAT THE SURVEY CREATES A SUBDIVISION OF LAND WITHIN THE AREA OF A COUNTY OR MUNICIPALITY THAT HAS AN ORDINANCE THAT REGULATES PARCELS OF LAND.

10-31-2006 DATE

Doc ID: 010092780091 Type: CRP
Recorded: 11/14/2006 at 02:31:33 PM
Fee Amt: $21.00 Page 1 of 1
Iredell County, NC
Brenda D. Bell Register of Deeds
BK 50 PG 111

LINE TABLE		
LINE	LENGTH	BEARING
L1	11.28'	S14°42'13"E
L2	35.08'	S35°51'33"W
L3	58.44'	S80°08'49"E
L4	32.77'	S08°38'49"E
L5	22.04'	S34°57'11"W
L6	6.80'	S34°57'11"W
L7	46.81'	S15°25'11"W
L8	38.43'	S18°22'11"W
L9	60.46'	S77°09'11"W
L10	34.08'	S11°52'11"W
L11	41.55'	N66°31'06"E
L12	58.51'	N81°31'02"E
L13	19.84'	S82°10'19"E

CURVE TABLE				
CURVE	ARC	RADIUS	CHORD BRG.	CHORD DIST.
C1	53.15	1010.32	S00°33'37"W	53.14'
C2	52.33	1010.32	S03°23'06"W	52.33'

OWNER/DEVELOPER:
ROBERT H. JOHNSEN &
DORA B. JOHNSEN
318 BEATEN PATH
MOORESVILLE, NC 28117
PHONE: 704-799-3688

MINOR SUBDIVISION OF
ALL OF LOT 104, SECTION 9, OF

CRESCENT LAND & TIMBER CORPORATION

AS RECORDED IN P.B. 14, PG. 101

DAVIDSON TOWNSHIP | IREDELL COUNTY | NORTH CAROLINA
PIN NO: 4627-93-9025 | SCALE: 1"=40' | DRAWN BY: SMS
DEED REF: 1093-11 | DATE OF SURVEY: 10-16-06 | DRAWING NO: K05106-2MSUB
DATE OF PLAT: 10-24-06

GRAPHIC SCALE
40 0 20 40 80 160
(IN FEET)
1 inch = 40 ft.

SETBACKS:
PROPERTY IS SUBJECT TO A 35' FRONT, 50' 760 CONTOUR, 35' REAR AND 15' SIDE MINIMUM BUILDING SETBACK LINE.

PROPERTY IS SUBJECT TO A 10' DRAINAGE & UTILITY EASEMENT AROUND INSIDE PERIMETER OF BOTH LOTS.

LEGEND:
SP - SERVICE POLE
PP - POWER POLE
● - WELL
⊛ - UNMARKED POINTS
EIP - EXISTING IRON PIN
IPS - IRON PIN SET
○ - MONUMENT
MBSL - MINIMUM BUILDING SETBACK LINE

NOTES (A):
1. THIS PROPERTY IS SUBJECT TO ANY EASEMENTS OR RIGHT OF WAYS OF RECORD WHICH MAY EXIST ACROSS SAID PROPERTY.
2. PROPERTY IS ZONED: R20.
3. SUBJECT PROPERTY & SURROUNDING PROPERTIES ARE ZONED: R20.
4. ALL OF OLD LOT 104, IS BEING DIVIDED INTO NEW LOTS 1 & 2.

REFERENCES:
BEING ALL OF LOT 104, SECTION 9, OF CRESCENT LAND & TIMBER CORPORATION LOTS, AS RECORDED IN P.B. 14, PG. 101

SURVEY FOR NORWOOD LEE TALTON, BY R.B. KESTLER, JR. DATED: 01-31-83

SURVEY FOR ROBERT H. JOHNSEN BY R.B. KESTLER, JR. DATED: 05-06-81

NOTES (B):
AS OF THE DATE OF THIS RECORDING, THE LOTS REPRESENTED ON THIS PLAT HAVE NOT BEEN INSPECTED OR APPROVED BY THE IREDELL COUNTY HEALTH DEPARTMENT. UNTIL INSPECTED, THERE IS NO ASSURANCE THAT A BUILDING PERMIT WILL BE ISSUED.

THERE IS A TEN FOOT DRAINAGE AND UTILITIES EASEMENT ACROSS THE FRONT, REAR, AND EACH SIDELINE OF EACH LOT.

A PORTION OF THE SURVEYED PROPERTY DOES LIE WITHIN A FLOOD HAZARD AREA AS DETERMINED BY FLOOD MAP 370313-0200C, EFFECTIVE DATE JUNE 22, 1998.

THE LOTS IN THIS SUBDIVISION ARE SUBJECT TO ANY EASEMENTS OR RIGHT OF WAYS OF RECORD WHICH MAY EXIST ACROSS SAID PROPERTY.

THE SURVEYED PROPERTY DOES NOT LIE WITHIN THE U.S. DEPARTMENTS OF INTERIOR'S NATIONAL REGISTER OF HISTORIC PLACES.

THE SURVEYED PROPERTY DOES NOT LIE WITHIN 2000 FEET OF A NORTH CAROLINA HORIZONTAL GRID MARKER.

I HEREBY CERTIFY THAT THE SUBDIVISION PLAT SHOWN HEREON HAS BEEN FOUND TO COMPLY WITH THE SUBDIVISION REGULATIONS OF THE COUNTY OF IREDELL, NORTH CAROLINA AND THAT SAID PLAT HAS BEEN APPROVED BY THE SUBDIVISION ADMINISTRATOR FOR RECORDING IN THE OFFICE OF THE REGISTER OF DEEDS OF IREDELL COUNTY.

Matthew D Todd
SUBDIVISION ADMINISTRATOR
IREDELL COUNTY, NORTH CAROLINA

11-14-06
DATE

KNOW ALL MEN BY THESE PRESENTS, THAT DORA B. JOHNSEN, HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY SHOWN ON THIS PLAT, THAT I HEREBY ACKNOWLEDGE THIS PLAT AND ALLOTMENT TO BE MY FREE ACT AND DO HEREBY DEDICATE TO PUBLIC USE ALL STREETS, ALLEYS, EASEMENTS AND OTHER PUBLIC AREAS SHOWN ON THIS PLAT. I FURTHER CERTIFY THAT GERALD V. GRANT ENVISIONED AND MADE THIS PLAT AT MY DIRECTION, AND THAT THE ENTIRE SUBDIVISION IS WITHIN THE BOUNDARIES OF A TRACT CONVEYED TO ME BY A DEED RECORDED

IN DEED BOOK 1093 PAGE 11

I FURTHER CERTIFY THAT:

A. THERE ARE NO DEED RESTRICTIONS WHICH WILL BE VIOLATED BY THE RECORDED SUBDIVISION AND

B. THERE ARE NO GOVERNMENTAL REGULATIONS OF ANY KIND, OTHER THAN THOSE FOR WHICH A VARIANCE HAS BEEN APPLIED FOR UNDER THE IREDELL COUNTY SUBDIVISION ORDINANCE REGULATIONS, WHICH WILL BE VIOLATED BY THE REGISTERED SUBDIVISION; AND

C. I UNDERSTAND THAT ENFORCEMENT OF DEED RESTRICTIONS AND ANY OTHER CONTRACTUAL AGREEMENTS IS NOT THE RESPONSIBILITY OF IREDELL COUNTY, WILL NOT BE UNDERTAKEN BY IREDELL COUNTY, AND IS THE SOLE RESPONSIBILITY OF THE PARTIES AFFECTED BY VIOLATION OF SUCH DEED RESTRICTIONS AND CONTRACTUAL AGREEMENTS.

Dora B. Johnsen
DORA B. JOHNSEN

NORTH CAROLINA, IREDELL COUNTY,
I, A NOTARY PUBLIC OF THE COUNTY AND STATE AFORESAID, CERTIFY THAT DORA B. JOHNSEN PERSONALLY APPEARED BEFORE ME THIS DAY AND ACKNOWLEDGED THE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL STAMP OR SEAL,
THIS 31 DAY OF OCT, 2006.

NOTARY PUBLIC Charles S. Kuntess

Charles S. Kuntess
Notary Public Iredell County
State of North Carolina
My Commission Expires 05-19-2011

STATE OF NORTH CAROLINA, IREDELL COUNTY,
I, GERALD V. GRANT, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION; THAT THE RATIO OF PRECISION IS 1: ; THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK , PAGE ; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH GS. 47-30 AS AMENDED.
WITNESS MY SIGNATURE, REGISTRATION NUMBER, AND SEAL.

THIS 31ST DAY OF OCTOBER
A.D. 20 06

SURVEYOR L-1593

SEAL L-1593 GERALD V. GRANT

KESTLER SURVEYING, INC.
P.O. BOX 1793
STATESVILLE, NC 28687
PHONE: (704) 872-0717

IREDELL COUNTY

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

APPLICATION NUMBER
180209
Issue Date: 12/11/2014

FILE COPY

ZONING PERMIT
Residential

Parcel Number	Street Address	Jurisdiction
4627939011.000	316 BEATEN PATH ROAD, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information		Applicant Information	
Owner:	BLUEHARBOR BANK	Applicant:	ATHANAS, MICHAEL
Address:	P O BOX 3546 MOORESVILLE, NC 28117	Address:	1999 CANDLEWICK DR FORT MILL, SC 29715
Phone:		Phone:	803-802-4402

Use Requested	Zone Code
NEW SINGLE FAMILY HOME	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.689	35.00	50.00	15.00	15.00	CACL	AE

Remarks:

$ PAID
CC
mB

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: 12/11/14

Permit Number	27760	TOTAL FEES:	$ 77.25

Iredell County
Planning & Enforcement
349 N. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

Zoning Permit

Permit Number: 180209ZO

Printed: 7/30/2013

Master #: 180209

Associated Permits:

180209ZO Zoning

Applicant

Name: Michael Athanas **Phone:** 803-802-4402

Address: 1999 Candlewick Dr
Fort Mills, SC 29715

Parcel

Parcel Number: 4627939011.000 **Zoning:** R20

Address: 316 BEATEN PATH RD **Township:** 1700
MOORESVILLE, NC 28117 **Area:** .689

Subdivision: **Lot(s):** 1

Directions to Parcel: Brawley School Rd, right Blume Rd, right Beaten Path Rd

Owners

Name: BLUE HARBOR BANK

Address:

Contractors

Contractor Type:

Name: Michael Athanas **Phone:** 803-802-4402

Address: 1999 Candlewick Dr
Fort Mills, SC 29715

Fees and Receipts:

Number	Description	Amount
FEE-292387-07	Zoning - Permit Application	$75.00
FEE-292388-07	Technology Fee - Planning	$2.25
FEE-292389-07	Environmental Health - Gravity - Fast Track	$350.00

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dongardner.com

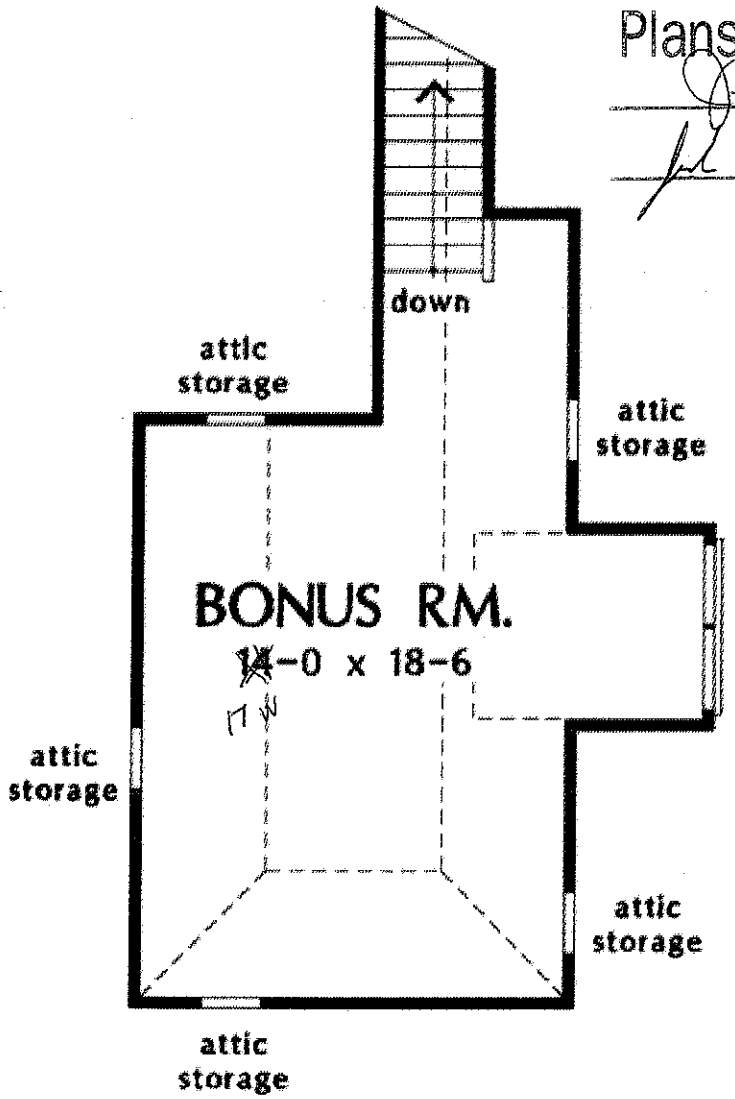
For more products and services visit DAG MarketPlace.

Ad Fe



Eldorado Stone

Acknowledgement Of
Plans Submittal ONLY!
Date 5/22/14
Date 5/22/14



mage

© 2004 Donald A. Gardner,



JELD-WEN Windows
with AuraLast® Wood
SEE THE TECHNOLOGY »

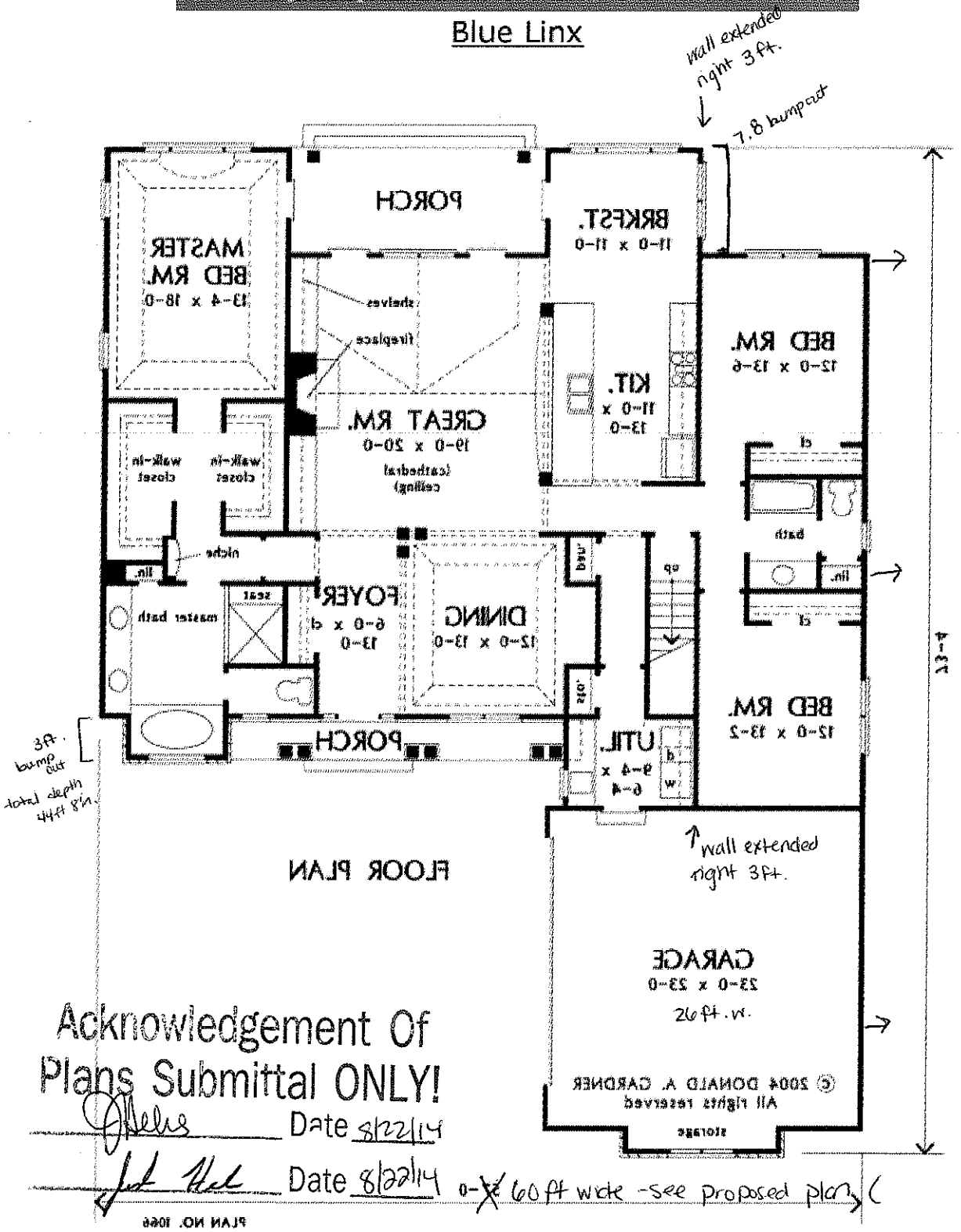
JELD-WEN WINDOWS & DOORS

Jeld-Wen Windows & Doors

●○○○○ Verizon 7:38 AM
dongardner.com

BlueLinx
America's Largest Building Products Distributor

Blue Linx



Acknowledgement Of
Plans Submittal ONLY!

Date 8/22/14

Date 8/22/14 0-X 60 ft wide -see proposed plan

erse this Image

© 2004 Donald A. Gardner,

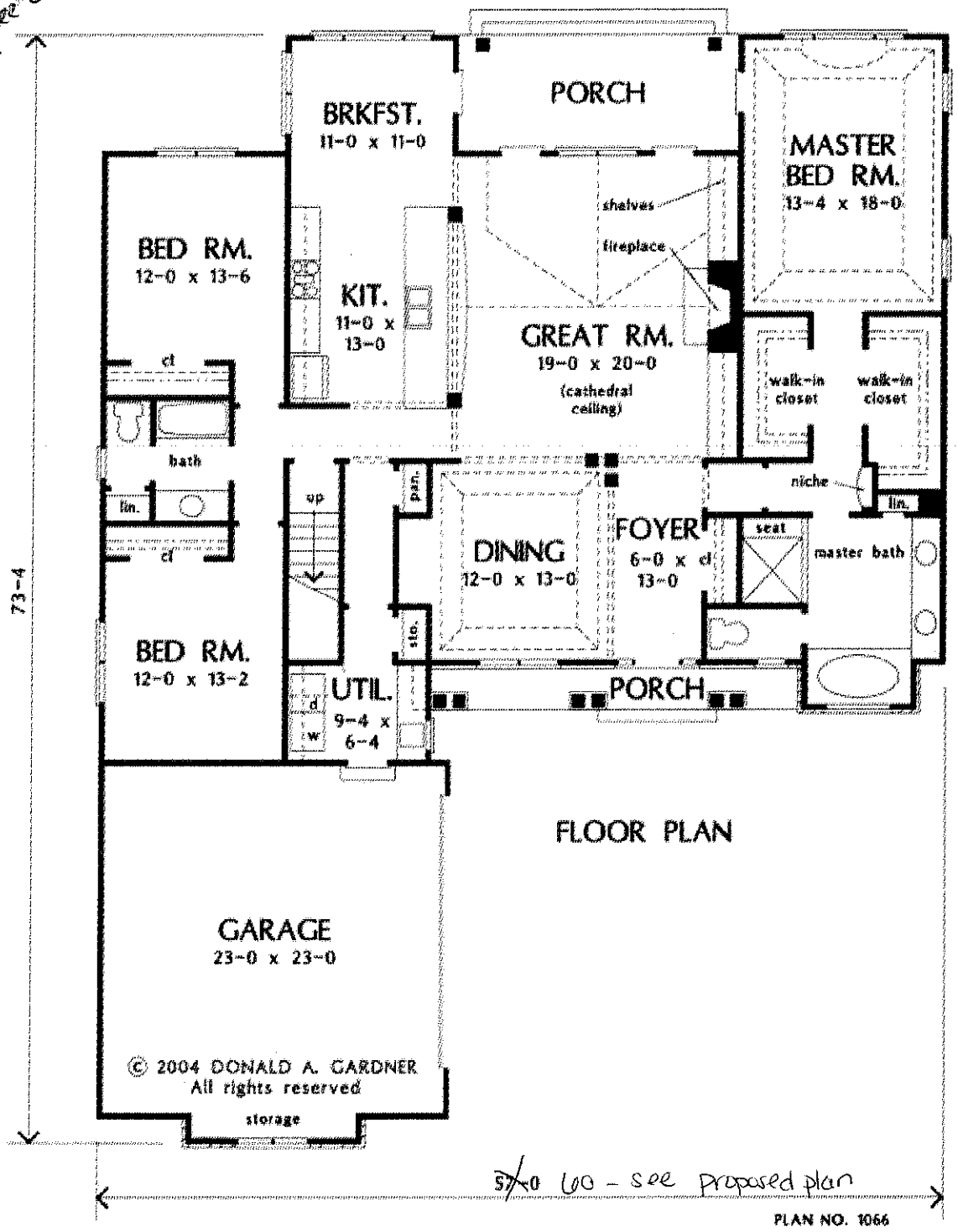


Yes, we care...

●○○○○ Verizon 7:37 AM
dongardner.com
OF MIND FROM A NAME YOU TRUST Tyvek

DuPont Tyvek

* house will be reversed - please see other Print out



verse this Image

© 2004 Donald A. Gardne

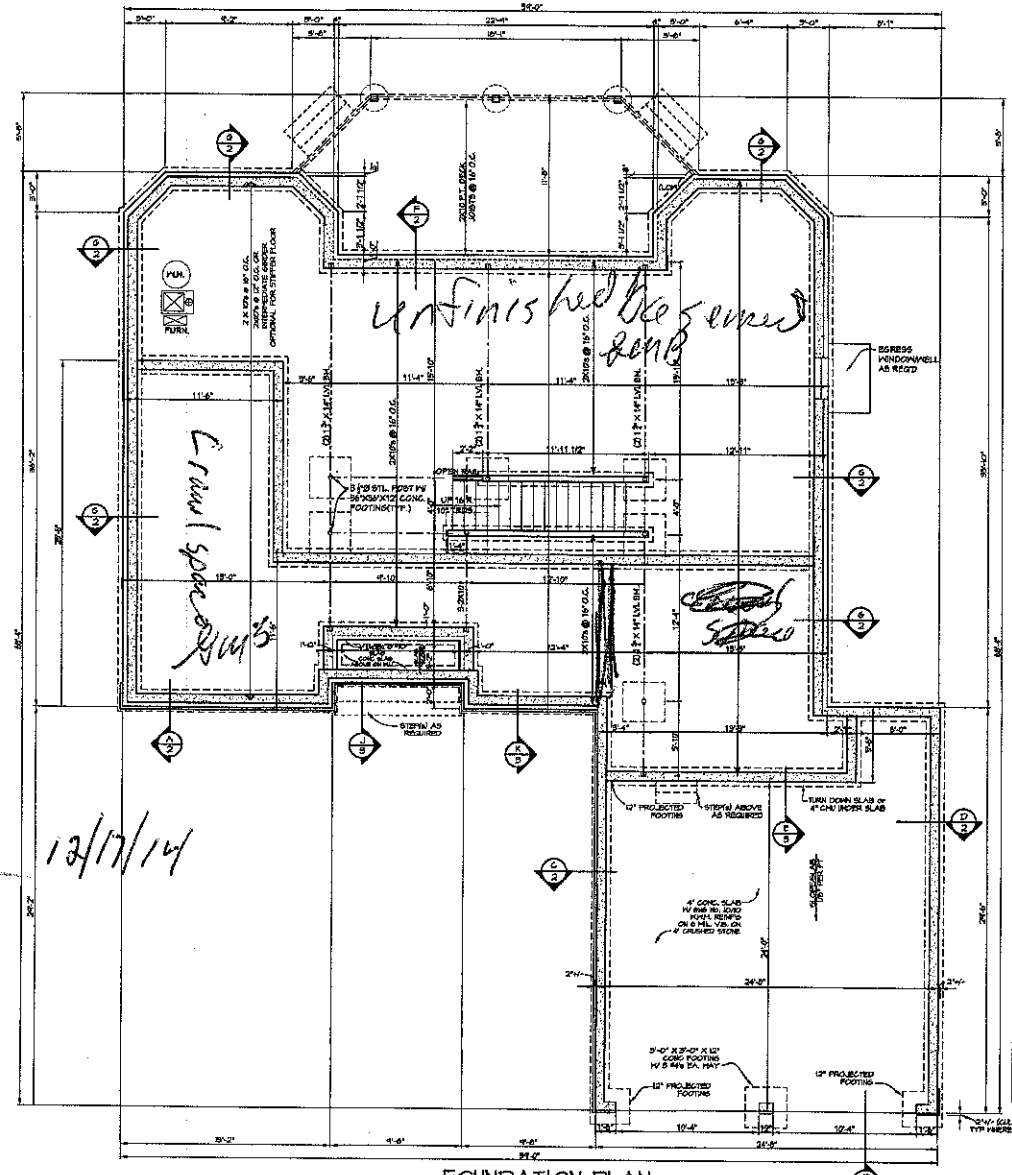
A great home plan meets the perfect design tool.
HomePlay BY ROYAL

RESIDENTIAL STANDARD NOTES

RESIDENTIAL FOUNDATIONS:

1. ALL FOOTINGS ARE 6'X 16" UNLESS NOTED OTHERWISE.
2. ALL INTERIOR PIERS ARE 8'X 8'X 24" CAP CENTERED WITH 4" OF SOLID MASONRY. (AT LATEST 16 BELOW GR. IF ON A STORY HOME OR 24" BELOW GR. IF ON A 2 STORY HOME) PIERS ARE TO BE SPACED AT 10'-0" O.C. MAX. AND UNDER EXTERIOR WALLS AT 8'-0" O.C. MAX. PLACE CENTER POINT AT 90° AND NOTED ON PLAN.
3. FOOTINGS FOR 8'X8'X24" PIERS ARE 3'-0" X 3'-0" X 16" UNLESS NOTED OTHERWISE.
4. DESIGN LOADS ARE ALL DEAD LOADS PLUS:
   A. ROOF LIVE LOAD = 30 LBS. PER SQ.
   B. MAIN FLOOR LIVE LOADS (EXCEPT FLOORS) = 40 LBS. PER SQ.
   C. ALL OTHER FLOORS = 30 LBS PER SQ.
   D. FOUNDATIONS ARE DESIGNED AT 2000 PSF SOLID GROUND IS 2000 LBS. PER SQ. AS SEE NOTED OTHERWISE.
   E. WIND LOAD IS 90 M.P.H. (BEARING 70 PSF LBS. PER SQ.
   F. EARTHQUAKE IS PER NORTH CAROLINA CODE.
   G. ATTIC LOAD (WHERE OVER 8 INCHES) 20 LBS.
   H. ALL BEAMS NOTED
   I. ALL DESIGNS ARE IN ACCORDANCE WITH NORTH CAROLINA AND SOUTH CAROLINA BUILDING CODES.
   J. ATTIC CEILING JOIST UNDER ROOF SLOPES 3 5/12 20 LBS. PER SQ.
   ATTIC CEILING JOIST UNDER ROOF SLOPES 5 5/12 10 LBS. PER SQ.
   K. SEISMIC LOAD IS PER CODE WHERE APPLICABLE.
5. MARKS E, M, AND MB ARE HELP-WEDGETOES BLANK WHERE NOTED ADDITIONAL MB ARE REQUIRED AT ALL CORNERS. FOR SUPPORT. SEE VERIFY WITH LOCAL CODE OFFICIALS. CONCRETE STILL IT SHRINKING AND DEVELOPS STRENGTH.
6. CONCRETE SHALL BE 2500 PSI IN 28 DAYS UNLESS NOTED OTHERWISE.
7. ALL REBAR SPLICES SHALL BE A MINIMUM OF 24"OF UNLESS NOTED OTHERWISE.
8. CARBON FOOTINGS ARE OF CLAMSHELL DRILLED CONCRETE UNDERGROUND TO A DEPTH INTO A MINIMUM OF 2 FEET PENETRATION INTO GOOD ORIGINAL UNDISTURBED EARTH OR DECLINE IN LISTING TO FT. DEPENDING TO HOOK NATURAL MORE THAN OF PIT DEPTH IS SUITABLE FOR A CARBON FOUNDATION. CARBON CANNOT BE MET IF WATER BEING ENCOUNTERED INTO DRILLED HOLES. PILES WILL HAVE TO BE USED IN THAT CASE.
9. 6" NON-CONFINED TREATED WOOD PILES WITH A MINIMUM DESIGN LOAD OF 5 TONS ARE USED FOR ALL PORCH SLABS INTO UNSUITABLE SOIL, EXCEPT THAN 18" OR 1/3 THICKNESS WHERE IS DRILLED ALREADY.
10. ALL PIER FOOTINGS FOR FOOTING CAPS OVER CARBON OR PILES SHALL BE AS NOTED ON PLANS.
11. CENTER FOOTINGS ARE 12" LARGER THAN FOOTINGS 8' UP THICK.
12. WALLS BACKFILLED WITH DIRT SUPPORTING FRAMING ABOVE
    A. FOR UNDER FILL OF 5'-0" OR LESS (UNDER HOME) = USE 8" CMU OR 8" CONCRETE WITH FOOTING DIMENSION OF 16"THICKNESS, 24" MINIMUM, FOOTING 8'-0" X 16" OR 9' X 24" AS NOTED ON PLAN.
    B. FOR UNDER FILL OF 5'-0" TO 8'-0" (UNDER HOME) = USE 8" CMU OR 8" CONCRETE WITH 8'-0" X 24" FOOTING MINIMUM TO FOOTING AND PROJECTION OF ABOVE FOOTING. FOR 12" CMU WALLS USE #4 X 16" VERTICAL BARS LOCATED 4" FROM HOOK END. FILL WALL UP ALL SPACES OF TWO CMU CORES WITH SOLID FILL REINFORCED EVERY 24" IN CMU FILL. FOR 8" CMU WALLS USE #4 X 16" VERTICAL BARS TO 8' OR 4' HOOKTAIL OR FILL WITH 2500 PSI CONCRETE. INSTALL ON REINFORCED HORIZONTAL REBAR AS SHALL AND ERECT ALL PIERS BEFORE BACKFILLING.
13. FOR RETAINING WALLS WITHOUT PIERS SEE SPECIAL DESIGNS OR DRAWINGS.

* ALL BASEMENT LEVELS FROM ROOF RAILING, JACK STUDS, KNEE BRACES + WINDOW HOOD OR STEEL + CONCRETE BEAM OR BEARING PLANE. IN GOING DIRECTLY OR BETTER THAN THE HOME LIVING ABOVE. WOOD MUST BE CHANGED THROUGH ALL CONSTRUCTION TO THE FOUNDATION.



FOUNDATION PLAN

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

Glenn W. Barnes 12/17/14

NOTICE:

LIVING CONCEPTS HOME PLANNING HAS TAKEN GREAT CARE IN THE PREPARATION OF THESE PLANS. HOWEVER, SINCE CODES ARE SUBJECT TO CHANGE AND INTERPRETATIONS VARY, WE DO NOT WARRANTEE COMPLIANCE WITH ANY SPECIFIC CODES OR ORDINANCES. PURCHASER OR BUILDER IS SOLELY RESPONSIBLE FOR VERIFYING COMPLIANCE WITH LOCAL BUILDING CODES AND ORDINANCES AND FOR ANY MODIFICATIONS TO THE PLANS THAT MAY NEED TO BE MADE IN ORDER TO COMPLY. BUILDER IS ALSO RESPONSIBLE FOR VERIFYING SITE AND SOIL CONDITIONS AS WELL AS ALL DIMENSIONS AND SQUARE FOOTAGE CALCULATIONS BEFORE BEGINNING CONSTRUCTION. THESE PLANS SHOULD BE REVIEWED BY A LOCAL ARCHITECT OR ENGINEER TO VERIFY ADAPTATION TO SITE AND LOCAL STRUCTURAL DESIGN REQUIREMENTS. LIVING CONCEPTS HOME PLANNING MAY NOT BE HELD RESPONSIBLE AND ASSUMES NO LIABILITY FOR ANY HOME CONSTRUCTED FROM THESE PLANS.

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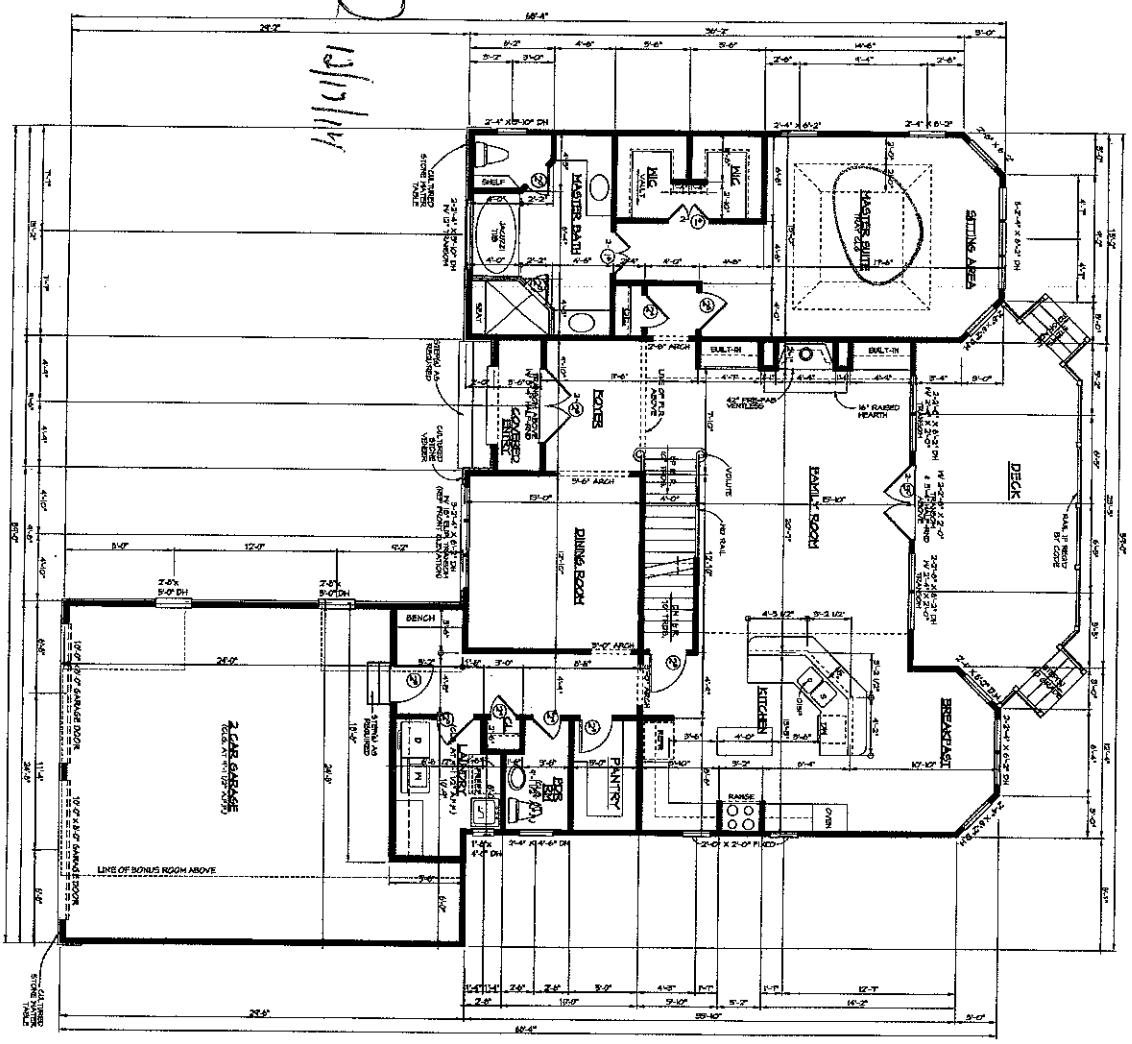
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FIRST FLOOR PLAN

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

AREA	(SQ.FT.)
1st FLOOR (HEATED)	1878 SQ. FT.
2nd FLOOR (HEATED)	655 SQ. FT.
BONUS ROOM	500 SQ. FT.
TOTAL HEATED	2660 SQ. FT.
GARAGE	484 SQ. FT.
COVERED PORCH	96 SQ. FT.
TOTAL UNDER ROOF	3729 SQ. FT.
TERRACE	240 SQ. FT.

CONTRACTOR TO PROVIDE MECHANICAL VENTILATION AS PER CODE

DOORS ON THIS FLOOR ARE 10' 8" (EIGHT FOOT UNLESS NOTED OTHERWISE)

NOTE: ALL HANDRAILS PLACED AT 34"-38"

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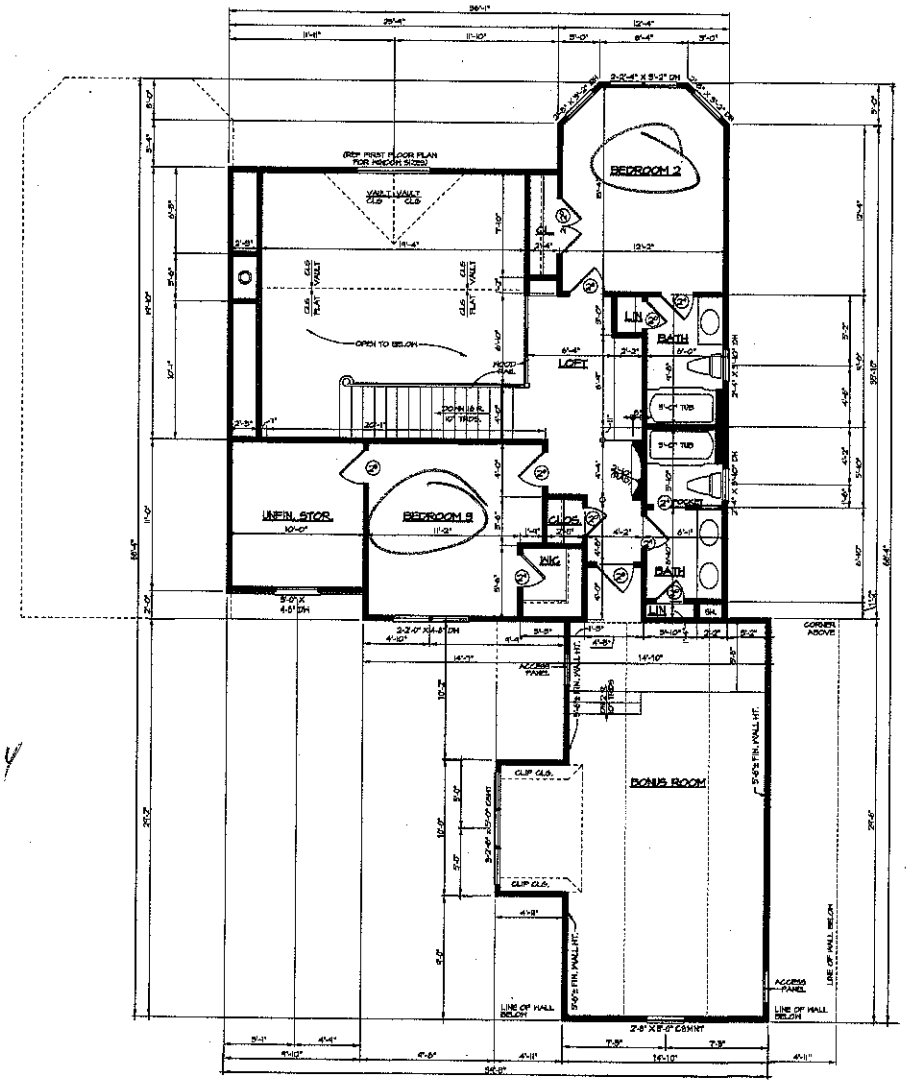
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Larry M. Bass 12/17/14



SECOND FLOOR PLAN

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

*NOTE: ALL ANGLED WALLS ARE AT 45°

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