ICHD–ENVIRONMENTAL HEALTH DIVISION

PJB

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

PERMIT # 232594

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

PIN # 4638222474 ✓

APPLICANT/OWNER: Niblock Homes LLC | APPLICANT ADDRESS: 759 Concord Parkway N. Concord, NC

SITE ADDRESS: 111 Hillside Cove Ct. Mooresville, NC ✓ | PHONE: 704-920-7104 | ALT. PHONE 704-788-4818

SITE DIRECTIONS: 150 W → R on Robinson Rd → R on Robinson Ridge → R on Hillside Cove → lt on L | SAP CONTROLLED: ☐ YES ☑ NO

SUBDIVISION: Robinson Ridge ✓ | SECTION: 1 ✓ | LOT # 15 ✓ | LOT AREA: .692ac | DESIGN FLOW: 360gpd | L.T.A.R.: .25

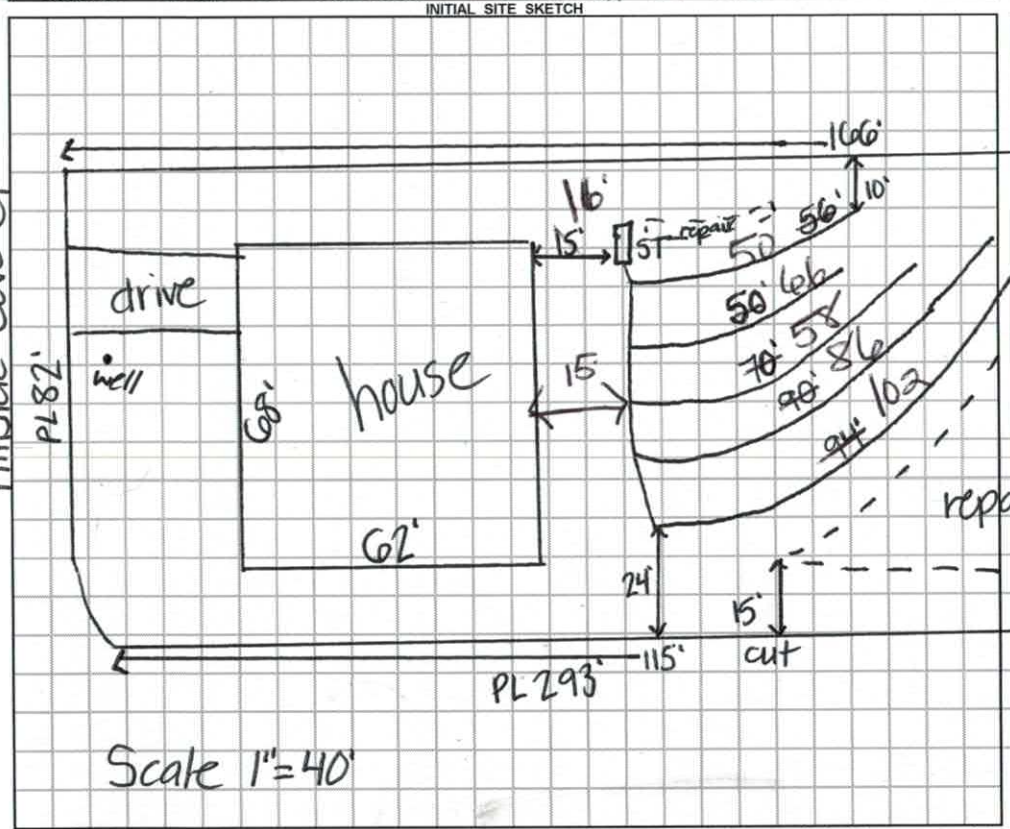
Septic Tank	1000	(gal)	STB	794	Date	9-10-19	☑ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☑ Residence	No. Bedrooms	3	Water Supply
Pump Tank		(gal)	PT		Date		System Description:	25% reduction	☐ Business	No. Persons	6	☑ Private
Pump Make		Model			Serial #	362	Repair System Description:	LP PPBPS	☐ Other	No. Employees		☐ Public
# Nitrification Fields	1	# Lines	5		Linear Ft	360	Maintenance Agreement Required:	☐ YES ☑ NO	☐ Slab	☑ Crawl Space		☐ Community
Trench Width	36"	Trench Bottom Depth (Low side) MAX		36"	Gravel Depth	—	☑ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing		

Comments / Conditions:

* Install 25% reduction with serial distribution and drain lines on contour. * Install at 36" *

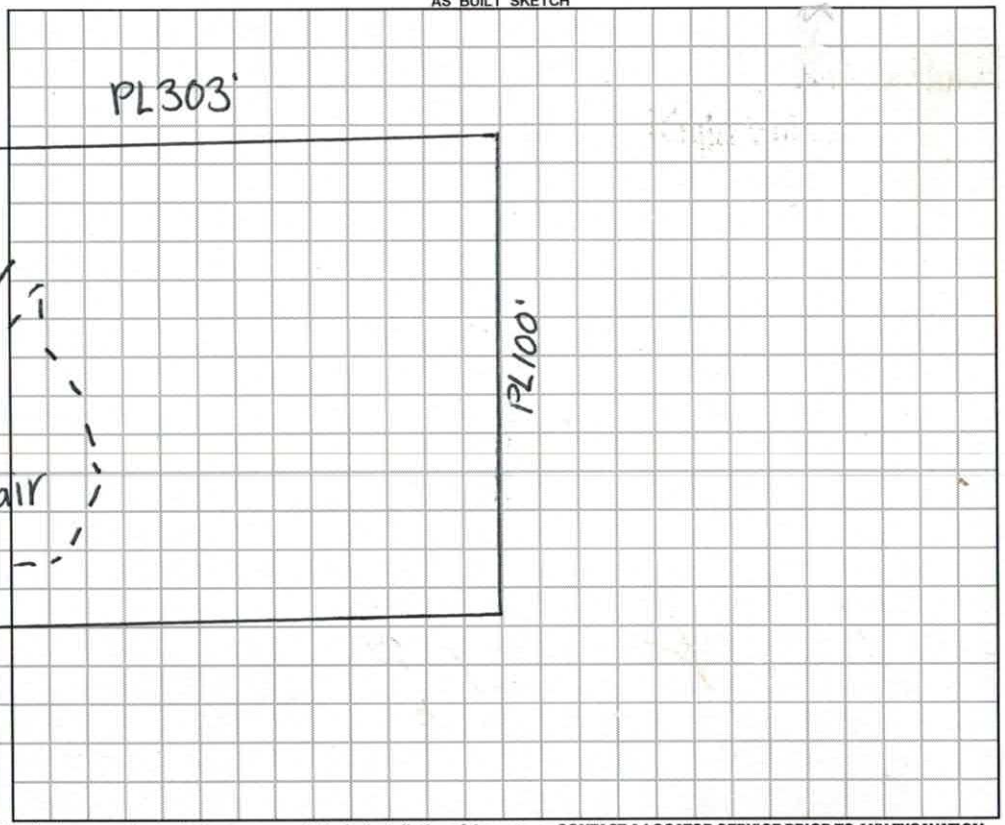
Used Quick Cpas Shown

INITIAL SITE SKETCH



Scale 1"=40'

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: [signature] Date: 7-3-19 | Installed by: Larry Henkle

IMPROVEMENT PERMIT by: Kayla Watson Date: 7-1-19 | OPERATION PERMIT by: [signature] Date: 10/11/19

AUTHORIZATION TO CONSTRUCT by: Kayla Watson Date: 7-1-19 | 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.

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

Sheet 1 of 1
PROPERTY ID #: 4163822
COUNTY: Iredell

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

Lot 15

OWNER: Kenny Owens
ADDRESS: 81 Hillside Cove Ct
PROPOSED FACILITY: SFD
PROPOSED DESIGN FLOW (.1949): 450
LOCATION OF SITE: 150 to Robinson to Robinson Ridge
APPLICATION DATE: 12/13/17
DATE EVALUATED: 1/24/18
PROPERTY SIZE: 1.692ac
PROPERTY RECORDED: NO
WATER SUPPLY: ☑ Private ☐ Public ☑ Well ☐ Spring ☐ Other N/A
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ 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	L 20%	0-7	GR SCL	fr SE	PS	PS	N/A	N/A	PS .25
		7-43	ABK C	fi SE					
		43-77	ABK BC	fi/fr SE					
2	L	0-5	GR SCL	fr SE	PS	PS	N/A	N/A	PS .3
		5-42	SBK C	fi SE					
		42-75	ABK BC	fi/fr SE					
3	L	0-5	GR SCL	fr SE	PS	PS	N/A	62"	PS .25
		5-17	SBK C	fi SE					
		17-32	WABK BC	fi/fr SE					
		32-62	Mass Sapl	fr N/A					
		62-72	Mass Ctz	vfi N/A					
4	L	0-6	GR SCL	fr SE	PS	PS	60"	N/A	PS .3
		6-32	SBK C	fi SE					
		32-60	WABK BC	fi/fr SE					
		60-77	Mass Sapl	fr N/A					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	IJ	IJ
Site LTAR	.25	.25

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: H. Snow
OTHER(S) PRESENT:

COMMENTS: #5 0-6 GR SCL fr SE
6-17 ABK C fi SE
#7-34 WABK BC fi/fr SE

#232594
$320.00
6-28-19

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Niblock Homes, LLC **Address:** 759 Concord Parkway N. Suite 20 Concord, NC **Zip:** 28027
Applicant Email: blivengood@niblockhomes.com **Phone:** 704-920-7104 **Alt. Phone:** 704-788-4818
Owner Name: (same) **Address:** _____ **Zip:** _____
Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 111 Hillside Cove Court
Subdivision Name: Robinson Ridge **Section/Phase:** 1 **Lot Number:** 15
Driving Directions: Hwy 150W, R- Robinson, R- Robinson Ridge, R- Hillside Cove Ct.

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

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines **Describe Problem:** _____
Non-Residential Site Development: **Type of Business:** _____
Square Footage of Building: 2420 ± **Max. Number of Employees:** _____ **Max. Number of Seats/Beds/Other:** _____

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well **Number of Houses:** 1 **Number of Persons:** _____
(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 (X) 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: Beth A Bluengood (agent) 6-27-2019
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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)

1. APPLICATION FOR: ___Improvement Permit X Authorization To Construct ___ Existing System Inspection

2. 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 check ( ) beside whichever is submitted if applicable X Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Niblock Homes, LLC	759 Concord Parkway N. Ste 20 Concord, NC 28027	704-920-7104	704-788-4818
(same)			
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

4. **Property Information:**

111 Hillside Cove Ct. Mooresville, NC 28117 — Robinson Ridge — Ph. 1 Lot # 15
Street Address — Subdivision Name — Section/Phase and Lot Number

Driving Directions: Hwy 150 W - (R) Robinson - (R) Robinson Ridge - (R) Hillside Cove Ct.

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)* 3-per convo w. Beth Livengood

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
(X) Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms ___
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms 3

( ) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non- Residential Site Development: Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

6. **Proposed Water Supply:**

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

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed _____ *Year*

(X) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____

8. Please Answer The Following ( ) Yes (X) No Does the site contain any jurisdictional wetlands?
To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) 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.

9. Signature: _____ 6-10-19
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

RECEIVED JAN 9 - 2018

Paid $ 500.00

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

#232594

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

Paid $70.00 2-1418

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

Applicant Information: (PRINT CLEARLY)

Applicant Name: KENNETH LEE OWENS Address: 3019 SPRING FANCY LANE Zip: 28079
Applicant Email: Septicenvsol@yahoo.com Phone: 704-502-5588 Alt. Phone: _____
Owner Name: RICHARD DENZLER Address: _____ Zip: _____
Owner Email: rdenzler06130@roadrunner.com Phone: 919-606-5852 Alt. Phone: _____

Property Information:

Street Address: 111 Hillside Cove Ct.
Subdivision Name: ROBINSON ~~Woods~~ Ridge Section/Phase: 1 Lot Number: 15
Driving Directions: Turn right off NC-150 W onto Robinson Road. Continue past Rustic Way Lane. Parcel # 4638-22-2379

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
Maximum Number of Bedrooms: 4
Maximum Number of Occupants: _____
( ) 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: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____
(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 ( ) 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: _____ 12/13/17
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

(Check and sign only ONE of the options below)

1. * APPLICANT AND OWNER ARE THE SAME. * (*Sign here*) Marc C. Nick

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 111 Hillside Cove Court, identified as

PIN (Parcel Identification Number) 4638-22-2474, 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.

_____ 6-27-19

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

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, RICHARD DENZLER, am the legal owner(s) of the property located at ROBINSON ROAD, identified as PIN (Parcel Identification Number) 4638-22-2379, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** MR KENNY OWENS, SEPTIC ENVIRONMENTAL SOLUTIONS, 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.

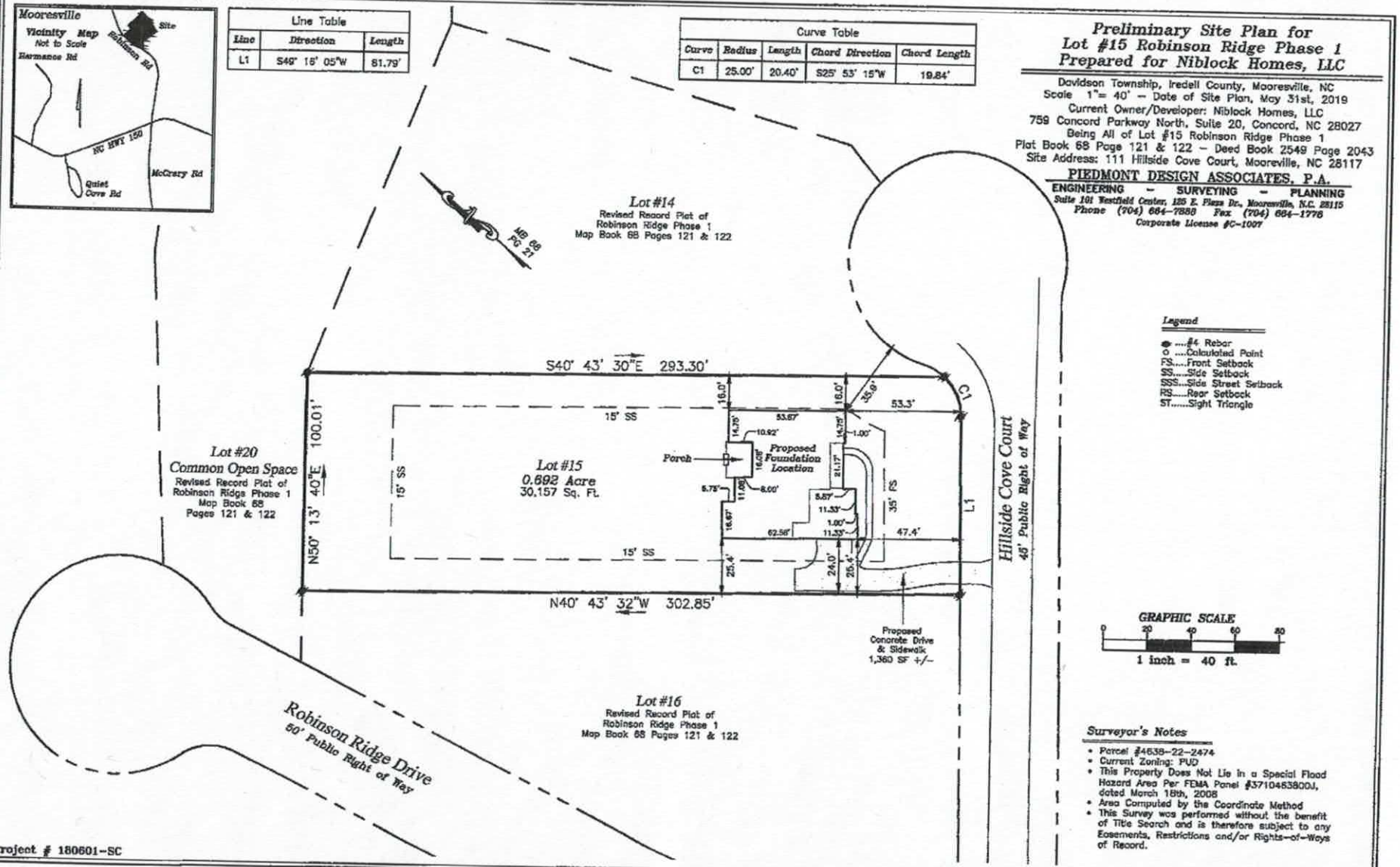
Signature of Owner(s) 12/13/17 Date

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

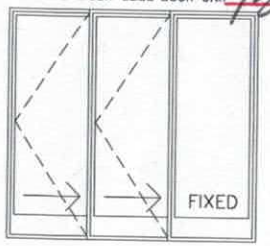

Mooresville
Vicinity Map
Not to Scale
Site
Robinson Rd
Harmanee Rd
NC HWY 150
McCrary Rd
Quiet Cove Rd
Line Table
Line | Direction | Length
L1 | S49° 15' 05"W | 81.79'
Curve Table
Curve | Radius | Length | Chord Direction | Chord Length
C1 | 25.00' | 20.40' | S25° 53' 15"W | 19.84'
Preliminary Site Plan for
Lot #15 Robinson Ridge Phase 1
Prepared for Niblock Homes, LLC
Davidson Township, Iredell County, Mooresville, NC
Scale 1"= 40' – Date of Site Plan, May 31st, 2019
Current Owner/Developer: Niblock Homes, LLC
759 Concord Parkway North, Suite 20, Concord, NC 28027
Being All of Lot #15 Robinson Ridge Phase 1
Plat Book 68 Page 121 & 122 – Deed Book 2549 Page 2043
Site Address: 111 Hillside Cove Court, Mooresville, NC 28117
PIEDMONT DESIGN ASSOCIATES, P.A.
ENGINEERING – SURVEYING – PLANNING
Suite 101 Westfield Center, 125 E. Plaza Dr., Mooresville, N.C. 28115
Phone (704) 664-7888 Fax (704) 664-1776
Corporate License #C-1007
Lot #14
Revised Record Plat of
Robinson Ridge Phase 1
Map Book 68 Pages 121 & 122
MB 68 PG 21
S40° 43' 30"E 293.30'
N40° 43' 32"W 302.85'
N50° 13' 40"E 100.01'
Lot #20
Common Open Space
Revised Record Plat of
Robinson Ridge Phase 1
Map Book 68
Pages 121 & 122
Lot #15
0.692 Acre
30,157 Sq. Ft.
Proposed
Foundation
Location
Porch
15' SS
35' FS
53.3'
47.4'
62.56'
L1
C1
Hillside Cove Court
45' Public Right of Way
Proposed
Concrete Drive
& Sidewalk
1,360 SF +/-
Lot #16
Revised Record Plat of
Robinson Ridge Phase 1
Map Book 68 Pages 121 & 122
Robinson Ridge Drive
50' Public Right of Way
Legend
●....#4 Rebar
○....Calculated Point
FS.....Front Setback
SS.....Side Setback
SSS....Side Street Setback
RS.....Rear Setback
ST.....Sight Triangle
GRAPHIC SCALE
0 20 40 60 80
1 inch = 40 ft.
Surveyor's Notes
• Parcel #4638-22-2474
• Current Zoning: PUD
• This Property Does Not Lie in a Special Flood Hazard Area Per FEMA Panel #3710463800J, dated March 18th, 2008
• Area Computed by the Coordinate Method
• This Survey was performed without the benefit of Title Search and is therefore subject to any Easements, Restrictions and/or Rights-of-Ways of Record.
Project # 180601-SC

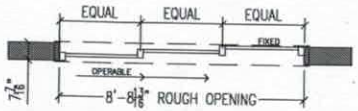
Acknowledgement of
Plans Submittal ONLY!

Date 7-1-19

Date 7-3-19

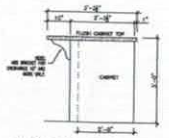
9' X 8' MULTI-SLIDE DOOR UNIT



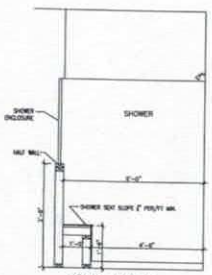


MULTI-SLIDE DOOR UNIT DETAIL

PER SUPPLIER:
* FRAME SIZE: 104 5/16" X 95 1/2"
* ROUGH OPENING: 104 3/16" X 96"

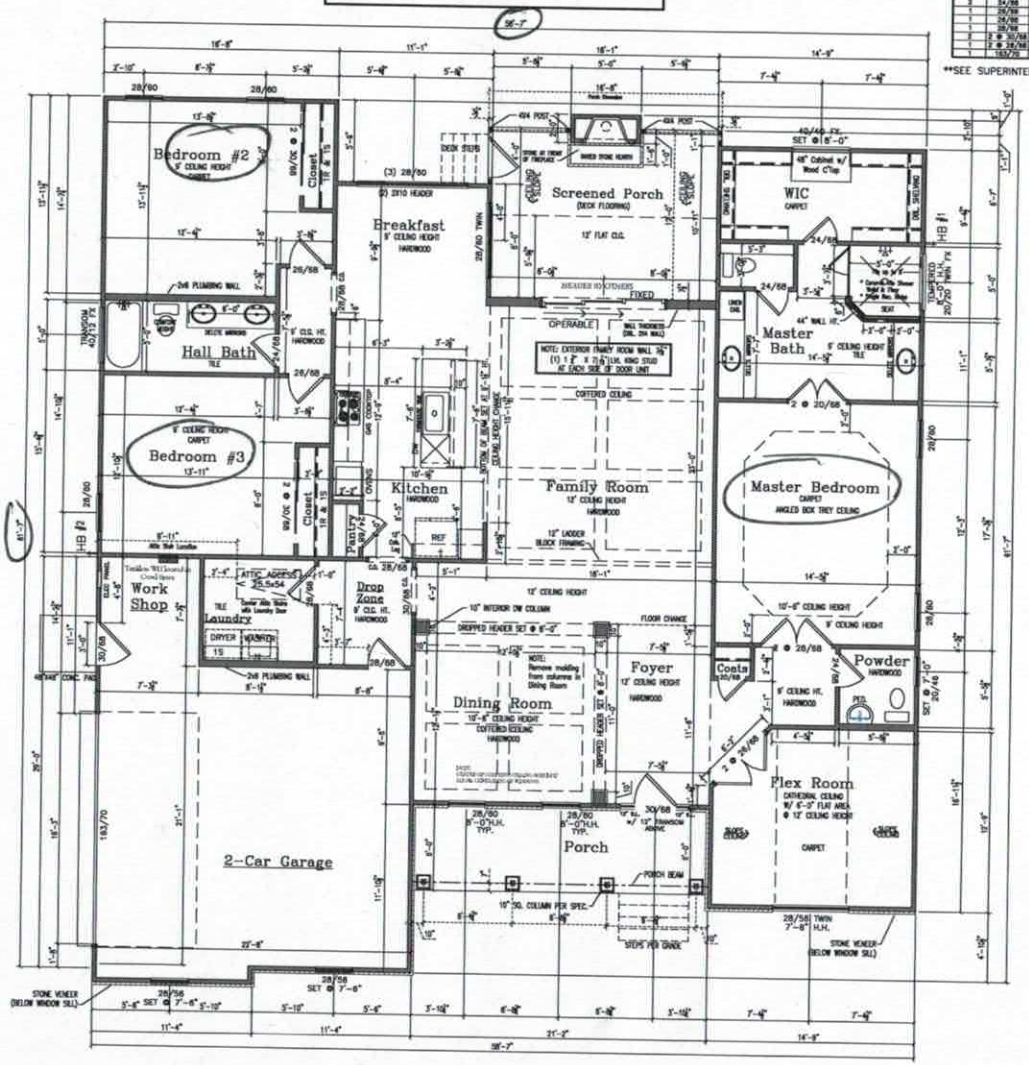


FLUSH BAR DETAIL-DUNHILL
SCALE: 1/2" = 1'-0"



42x42 SHOWER
W/ 12" SEAT DETAIL
SCALE: 1/2" = 1'-0"

NOTE:
CLOSET SHELVING TO BE TOTAL SLIDE



DOOR SCHEDULE

QUANTITY	MARK	DOOR SIZE WIDTH	TYPE	SWING	ROUGH OPENING
1	28/68	32 x 80			
1	30/68	36 x 80	CASED OPENING	NA	34" x 82 1/2"
1	2 @ 20/68	2 @ 36 x 80	CASED OPENING	NA	36" x 82 1/2"
1	2 @ 28/68	2 @ 30 x 80	Double-Hinged Doors	NA	48" x 80"
1	28/68	32 x 80	Double-Hinged Doors	NA	64" x 80"
1	28/68	32 x 80	EXTERIOR	Right	34" x 82 1/2"
1	30/68	36 x 80	EXTERIOR	Right	36" x 82 1/2"
1	30/68	36 x 80	INTERIOR	Left	36" x 82 1/2"
1	24/68	28 x 80	INTERIOR	Left	30" x 82 1/2"
1	24/68	28 x 80	INTERIOR	Right	30" x 82 1/2"
1	28/68	32 x 80	INTERIOR	Right	34" x 82 1/2"
1	28/68	32 x 80	INTERIOR	Left	34" x 82 1/2"
1	28/68	32 x 80	INTERIOR	Left	34" x 82 1/2"
2	2 @ 30/68	2 @ 36 x 80	INTERIOR - BYPASS	Right	72" x 81 1/2"
1	2 @ 28/68	2 @ 30 x 80	INTERIOR - PAIR	NA	62 1/2" x 82 1/2"
1	183/70	195 x 84	OVERHEAD	NA	195" x 84"

SEE SUPERINTENDENT FOR R.O. FRAMING ON POCKET DOORS

SQUARE FOOTAGES

	SQ. FT.
1ST FLOOR	2420
TOTAL LIVING	2420
GARAGE	547
FRONT PORCH	127
SCREEN PORCH	194

REVISION DATES:
5/9/19: c.o. #1,2
5/28/19: c.o. #3
6/24/19: FINAL

N
IBLOCK DEVELOPMENT CORPORATION
759 CONCORD PARKWAY NORTH
CONCORD, NC
(704) 788-4818 FAX (704) 784-3720

LOT #15
ROBINSON RIDGE
Lemmon Residence

FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0" (34X22)
SCALE: 1/8" = 1'-0" (17X11)

DATE: 4/29/2019
PLAN: DUNHILL-A
DRAWN BY: MB
ESTIMATED BY: AK
CHECKED BY: MN

IREDELL COUNTY

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

APPLICATION NUMBER
232594
Issue Date: 01/09/2018

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4638222491.000	111 HILLSIDE COVE COURT, MOORESVILLE, NC 28117	

Owner Information	Applicant Information
Owner: WILLIAMS RANDY P+KIMBERLY S	Applicant: ROBINSON WOODS DEVELOP
Address: 486 IREDELL CO, NC 28625	Address: PO BOX 4628 MOORESVILLE, NC 28117
Phone:	Phone: 919-606-5852

Use Requested	Zone Code
SFD	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
18.000	35.00	35.00	15.00	15.00	CA	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	125285	TOTAL FEES:	$ 77.25