IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 210749

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

PIN # 4639-36-2511

APPLICANT: Lewis Spivey APPLICANT ADDRESS: 850 Piccone Brook Ln Charlotte NC 28216

SITE ADDRESS: 297 Tennessee Circle, Mrsl. 28117 PHONE: 704-363-1401 ALT. PHONE:

SITE DIRECTIONS: Hwy 150 W, TR on Perth, TL on Fern Hill, TR on Tennessee Cir, TL on Tennessee Cir, Lot on R

SUBDIVISION: Tennessee Circle SECTION: — LOT # 14 LOT AREA: 0.76ac DESIGN FLOW: 480 gpd L.T.A.R.: 0.25 GPR

Septic Tank	1000	(gal)	STB		Date						
Pump Tank		(gal)	PT		Date						
Pump Make			Model		Serial #						
# Nitrification Fields	1		# Lines	7	Linear Ft:	322'					
Trench Width	24" min		Max. Trench Bottom Depth	30" *	Gravel Depth	N/A					

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

System Description: Gravity PPBPS

Repair System Description: LP PPBPS

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: * 30" Trench bottom per design
- If gravity can not be maintained a pump will be required *

10/23/15 Reviewed Floor plans, in compliance with Septic plan
Distribution box installed 12ft from Corner of house, 11ft from porch steps & 9½ ft straight out from house.

INITIAL SITE SKETCH

SEE DESIGN BY ROLLANS SOIL & ENVIRONMENTAL SERVICES

(Dated June 22,15, Approved 7-7-15) RLP

AS BUILT SKETCH

Installed as Drawn

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**

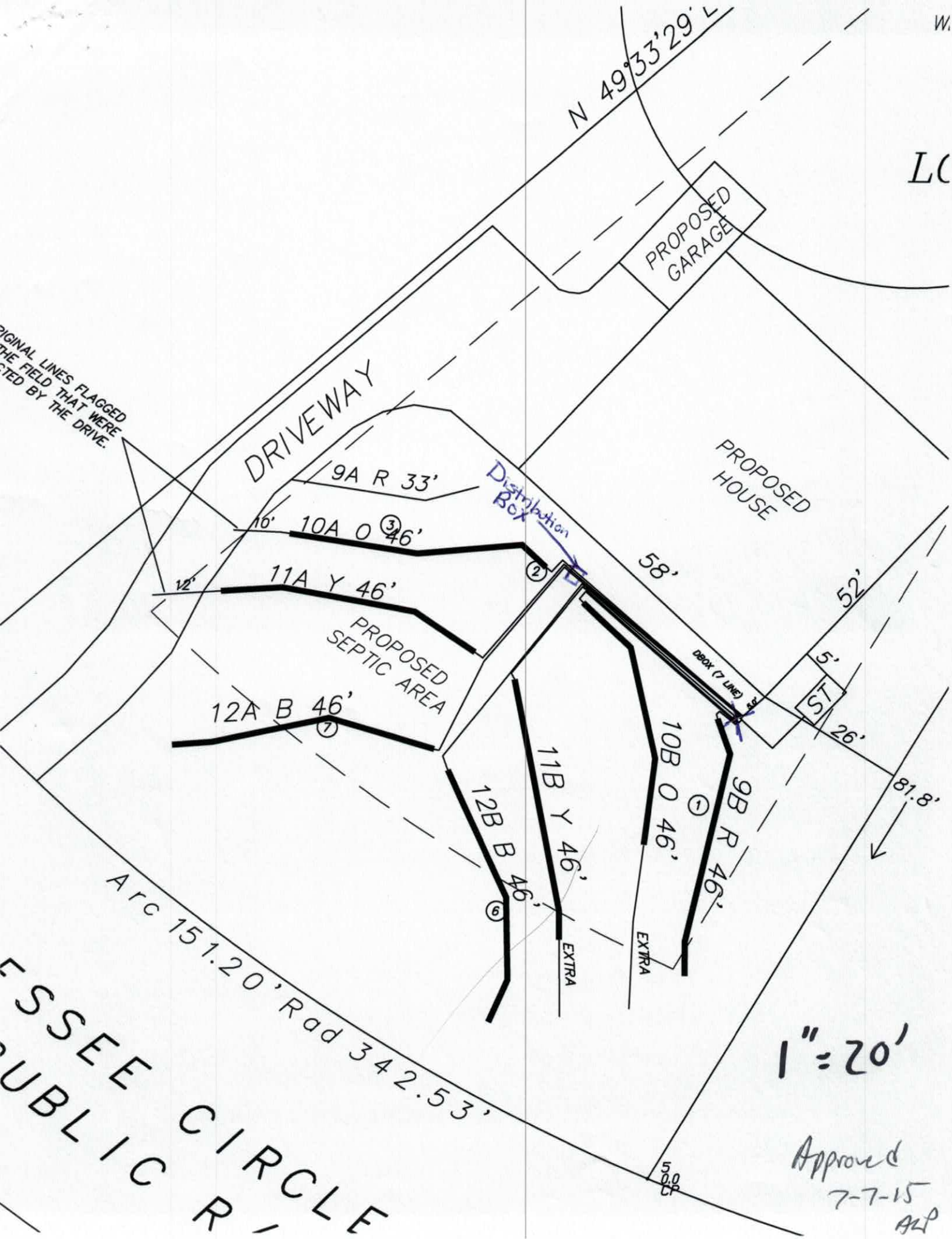
☐ **IMPROVEMENT PERMIT** *with plat* valid without expiration. ☒ **IMPROVEMENT PERMIT** *with site plan* valid for 60 mos. ☐ **AUTHORIZATION TO CONSTRUCT** valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: Lewis Spivey Date: 7-10-15 Installed by: Specialty Septic

IMPROVEMENT PERMIT by: RLP Date: 7-7-15 OPERATION PERMIT by: Maria H Dotson RS Date: 3/10/17

AUTHORIZATION TO CONSTRUCT by: Maria H Dotson RS Date: 10/23/15 Existing System Inspected by: ____ Date: ____

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


N 49°33'29" L
PROPOSED GARAGE
DRIVEWAY
PROPOSED HOUSE
9A R 33'
10A O 46'
11A Y 46'
12A B 46'
Distribution Box
PROPOSED SEPTIC AREA
58'
52'
5'
T
S
26'
DBOX (7 LINE)
10B O 46'
11B Y 46'
12B B 46'
9B R 46'
EXTRA
EXTRA
81.8'
Arc 151.20' Rad 342.53'
1" = 20'
Approved
7-7-15
ALP

RECEIVED JUN 2 4 2015

ROLLANS ***Soil & Environmental Services, PA.***

PO Box 832, Mooresville, NC 28115 Phone: (704) 746-5046 Fax: (704) 278-0989

Ashley Rollans, *NC Licensed Soil Scientist, Certified Septic Installer, Certified Wastewater Operator & Certified Septic Inspector* **Contacts**: *704.746.5046*
Email: *rollans.ashley@yahoo.com*

Attached is a proposed design for a PPBPS Septic System with gravity distribution for a 4 bedroom single family residence at 297 Tennessee Circle, Mooresville, NC 28117, Iredell County, North Carolina.

Contents:

	Page
Information for the Installer	1
Design Information	
Design Specifications	2-3
Layout Specifications	4
System Tapsheet	5
Site Plan/System Plan	6
Calculations	7
Profile Descriptions	8
Isometric Drawing of 16" T & J Panel System Gravity Drainfield	9

June 22, 2015
Project No.01-3021
Design By: Rollans Soil & Environmental Services, PA

Approved
7-7-15
AKP

INFORMATION FOR THE INSTALLER:

The permit should be read very carefully prior to bidding. The following are details that must be considered along with all other considerations.

- Tanks shall be approved by DENR, and certification supplied by the manufacturer.
- Tanks shall be water tested prior to installation.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom is within 2" from the highest to . the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches.
- Pumptank riser should be 6" above grade, control panel should be 12" above grade.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as a PPBPS installation with gravity distribution.
- Repair is specified as a PPBPS installation with low pressure distribution.
- Backfill 4 - 6" of material (County Approved) over panels, rake trench walls, lime side-walls, install trenches 24" wide to be level but have no more than 1/4" fall in 10 feet.

7-7-17

GRAVITY PPBPS SYSTEM
FOR WASTEWATER TREATMENT

Owner/Applicant: Lewis Spivey

Address: 8509 Piccone Brook Lane
Charlotte, NC 28216

Phone: 704.363.1401

County: Iredell

Location: 297 Tennessee Circle

Source of Wastewater Flow: 4 Bedroom Single Family Residence

Estimated Daily Wastewater Production: 480 gpd

System Flow: N/A

Design Specifications

Drainfield Size: 322

Loading Rate: 0.25

Depth of Gravel in Trench: NA (PPBPS)

Gravel Size: NA (PPBPS)

Trench Depth: 30 in.

Trench Width: 24 in.

Septic Tank Size: 1000

Pump Tank Size: N/A

Estimated Supply Line Length: 15

Supply Line Diameter: 3 in. SCH 40 PVC

Supply Line Volume: 5.70

Dosing Volume: N/A

Supply Manifold: N/A

Supply Manifold Length: N/A

Supply Manifold Volume: N/A

Recommended Float Controls: N/A

Recommended Control Panel: N/A

Pressure Head: N/A

Friction Head: N/A

Elevation Head: N/A

Total Dynamic Head: N/A

Threaded Union: N/A

Gate Valves: N/A

Check Valves: N/A

Anti-Siphon Hole: N/A

Additional Comments: Soil suitability was performed by Rollans Soil & Environmental Services

7-7-15

297 Tennessee Circle
GRAVITY PPBPS

DESIGN FLOW:	N/A
SOIL APPLICATION RATE:	0.25
TOTAL AREA TRENCH BOTTOM:	644
TOTAL LATERAL LENGTH:	322
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	320.00
SUPPLY LINE LENGTH:	15
TOTAL DYNAMIC HEAD:	N/A
MANIFOLD SIZE:	N/A
DOSING VOLUME:	N/A
PUMP TANK DRAW DOWN*:	N/A
SEPTIC TANK SIZE:	1000
PUMP TANK SIZE:	N/A

7-7-15

297 Tennessee Circle

Project #:01-3021

LAYOUT FOR 4 BEDROOM HOME

June 22, 2015

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1 HOUSE CNR P. TANK							
1	RED					25	25
2	ORANGE					28	28
3	YELLOW					33	33
4	BLUE					39	39
5	PINK					40	40
6	RED					48	48
7	ORANGE					50	50
8	YELLOW					53	53
9A	RED					33	33
9B	***RED***					***46***	***46***
10A	***ORANGE***					***46***	***46***
10B	***ORANGE***					***46***	***46***
11A	***YELLOW***					***46***	***46***
11B	***YELLOW***					***46***	***46***
12A	***BLUE***					***46***	***46***
12B	***BLUE***					***46***	***46***
					Total	625	625

	LINE LENGTH	LTAR GPD/FT2	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION
**** System***	***322***	***0.25***	***MOD.***	***0.250***	***PPBPS***	***GRAVITY***
Repair	349	0.3	MOD.	0.300	PPBPS	LOW PRESSURE

Notes: **All septic flags located via Licensed Surveyor.

**All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

7-7-15
ALP

GRAVITY PPBPS SPECIFICATIONS - 297 Tennessee Circle

SYSTEM

Line #	Color	Elevation	Length	Hole Size	Flow/hole	Trench Area	# of Panels
9B	*BLUE*	*N/A*	*46*	*N/A*	*N/A*	92	10
10A	*ORANGE*	*N/A*	*46*	*N/A*	*N/A*	92	10
10B	*ORANGE*	*N/A*	*46*	*N/A*	*N/A*	92	10
11A	*YELLOW*	*N/A*	*46*	*N/A*	*N/A*	92	10
11B	*YELLOW*	*N/A*	*46*	*N/A*	*N/A*	92	10
12A	*BLUE*	*N/A*	*46*	*N/A*	*N/A*	92	10
12B	*BLUE*	*N/A*	*46*	*N/A*	*N/A*	92	10
						644	70

total **feet =** **322** **gal/min =** **N/A**

Des. Flow	**480**
Pump Run=	**N/A**
soil LTAR	**0.25**
LTAR +5%	**0.2625**
LTAR with mod.	**0.5**
LTAR with mod.. + 5%	**0.525**

.156 equals 5/32 inch hole

7-7-15

CALCULATIONS

Location 297 Tennessee Circle

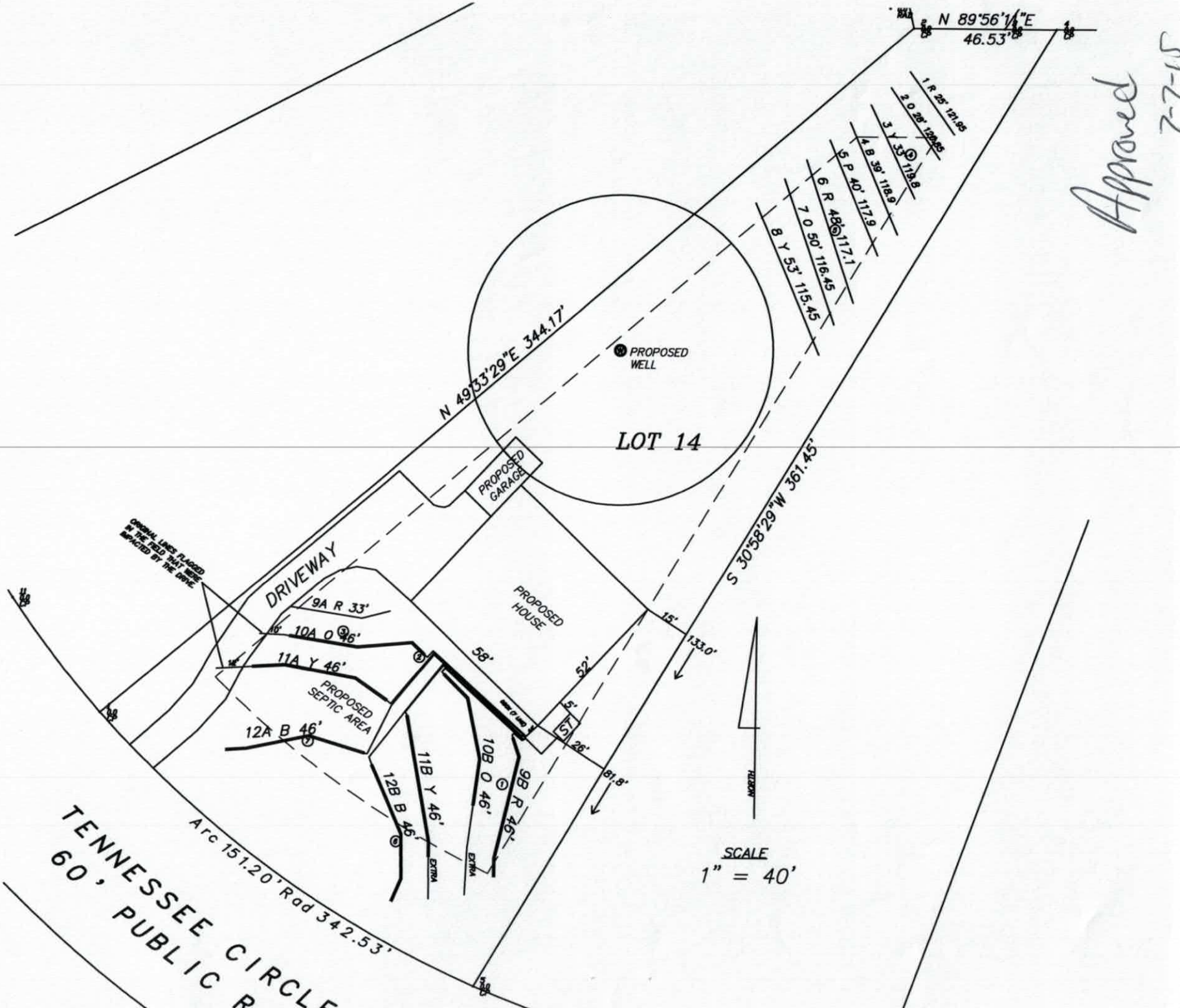
Project Number 01-3021

Lot No:	14	
No. of Bedrooms	4	
Design Flow	N/A	$^{gal}/_{day}$
LTAR	0.25	$^{gal}/_{ft^2\ day}$
PPBPS? (YES OR NO)	YES	
Supply Line Length	15	ft.
Supply Line Volume	5.7	gal.
Required Feet of Line	320.00	ft.
Amount of Line from Layout	322	ft.
Gallons per Minute	N/A	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Minimum Standard Tank Size	1000	
Panel Volume	3.6	gal.
# of Panels	70	
Dosing Volume	N/A	gal.
Tank Draw Down	N/A	
Pump Run Time	N/A	minutes
Elevation Head	N/A	ft.
Pressure Head	N/A	ft.
Friction Factor	N/A	ft./100 ft. *(From the interpolater.)*
Friction Head	N/A	ft.
Total Dynamic Head (+15%)	N/A	ft.

FRICTION FACTOR
INTERPOLATER
2" SCH 40 PVC

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

2-7-15


N 89°56'1/4"E
46.53'
1 R 25' 121.95
2 O 28' 120.95
3 Y 33' 119.8
4 B 39' 118.9
5 P 40' 117.9
6 R 48' 117.1
7 O 50' 116.45
8 Y 53' 115.45
N 49°33'29"E 344.17'
PROPOSED WELL
LOT 14
PROPOSED GARAGE
PROPOSED HOUSE
S 30°58'29"W 361.45'
DRIVEWAY
ORIGINAL LINES FLAGGED IN THE FIELD THAT WERE IMPACTED BY THE DRIVE.
9A R 33'
10A O 46'
11A Y 46'
PROPOSED SEPTIC AREA
12A B 46'
11B Y 46'
12B B 46'
10B O 46'
9B R 49'
EXTRA
EXTRA
58'
52'
15'
133.0'
5'
ST
26'
61.8'
NORTH
SCALE
1" = 40'
Arc 151.20' Rad 342.53'
TENNESSEE CIRCLE
60' PUBLIC R
Approved
7-7-15

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet 1 of 2
PROPERTY ID #: 4639262511
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Russell & Tonya Thompson / Applicant: Lewis Spivey
ADDRESS: 8509 Piccone Brook Ln. Charlotte NC 28216
APPLICATION DATE: 6/1/15
PROPOSED FACILITY: 4BR
PROPOSED DESIGN FLOW (.1949): 480 gpd
DATE EVALUATED: 4/30/15
LOCATION OF SITE: 297 Tennessee Circle, Mooresville
PROPERTY SIZE: 0.76ac
WATER SUPPLY: ☐ Private ☐ Public ☒ Well ☐ Spring ☐ Other
PROPERTY RECORDED:
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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	4/5%	0-9	BCL wfsbk	Fr SSSP SEKP		52	—	—	PS .3
		9-27	BRC wmsbk	Fr SSSP SEKP					
		27-52	RBC wmsbk	Fr SSSP-Few Sap Inclu. SEKP	48"				
2	4/6%	0-11	BRCL wmsbk	Fr SSSP SEKP		48	—	—	PS .3
		11-20	BRC wmsbk	Fr SSSP SEKP					
		20-39	RBC wmsbk	Fr SSSP SEKP					
		39-48	RBCL wmsbk	Fr SSSP-few SAP SEKP					
3	4/5%	0-7	BLGr wfsbk	Fr SSSP SEKP		48	—	—	PS .3
		7-12	RBCL wfsbk	Fr SSSP SEKP					
		12-48	RC mmsbk	Fr SS SP SEKP					
	4/9% ✓ Approved MP	0-12	BL Gr wfsbk	Fr SSSP SEKP		49	—	—	PS .3
		12-17	BRCL wfsbk	Fr SSSP SEKP					
		17-47	RC mmsbk	Fr SS SP SEKP					
		47-49	RCL wmsbk	Fr SS SP SEKP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
vailable Space (.1945)	PS	PS
ystem Type(s)	PPBPS	PPBPS
te LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. Ashley Rollins, Wanda Laverty
OTHER(S) PRESENT: Chad Wayne

MMENTS:

I do not agree with the soil descriptions, see my descriptions

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

Sheet 2 of 2

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

PROPERTY ID #: 4639360571
DATE OF EVALUATION: 4/30/15
COUNTY: Iredell

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
B S	4/9% ✓ Approved ALP	0-5	BL Gr wfsbk	Fr SS SP SE xP		48	-	-	PS .3
		5-9	BRCL wmsbk	Fr SSSP SE xP					
		9-48	RC mmsbk	Fr SSSP SE xP					
B G	4/5%	0-10	BCL wfsbk/gr	Fr SSSP SE xP		48	-	-	PS 0,3
		10-34	RBC mmsbk	" " " "					
		34-47	RCL mmsbk	" " " "					
		47-48	RB var lsap mass	" " " "					
B 7	4/8%	0-8	BL gr/wfsbk	Fr SSSP SE xP		48	-	-	PS 0,3
		8-20	RBCL wfsbk	" " " "					
		20-48	RC wmsbk	" " " "					
H 1	4-5%	0-9	B SCL Gr	Fr SSSP SE xP		48"	-	-	PS .275
		9-26	B C/SC WFSBK	Fr S SP SE xP	few Mn				
		26-38	YR CL WFSBK	Fr SS SP SE xP	few Mn				
		38-48	R CL WFSBK	Fr SS SP SE xP	few Mn				
H 2	4%	0-8	F; 11			48"	-	-	PS .25
		8-34	B C WFSBK	Fr S SP SE xP	few Mn, few organics				
		34-44	YR C WFSBK	Fr SS SP SE xP	few/com Mn staining				
		44-48	TR C WFSBK	Fr SS SP SE xP	few/com XB >48" 2.5YR 6/3 + 6/4 nodules, com Mn				

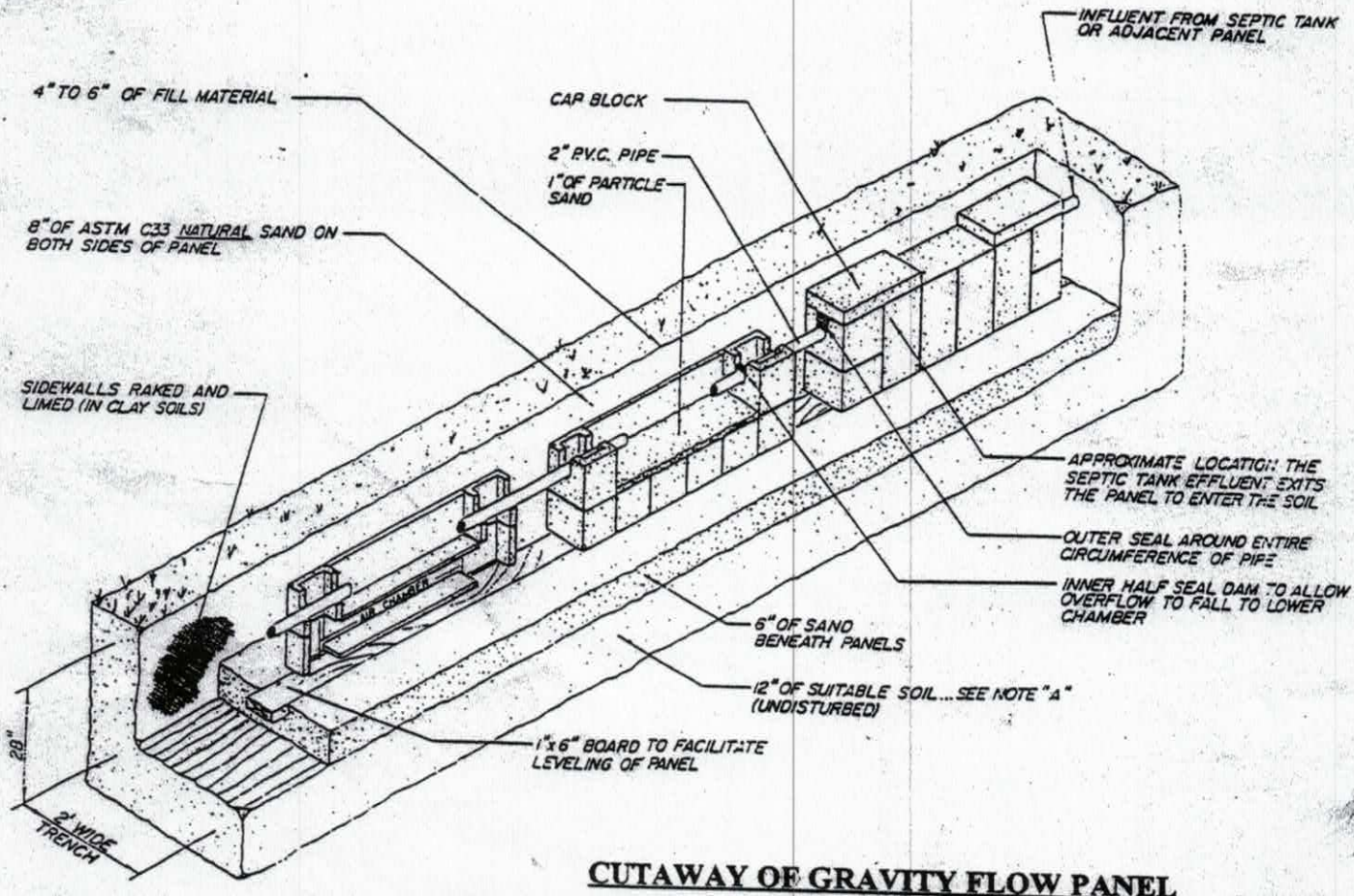
COMMENTS: AH3 0-8 B SCL Gr Fr SS SP SE xP .3
LSS 8-17 R C WFSBK Fr S P SE xP com quartz gravel
5% 17-28 R CL WFSBK Fr SS SP SE xP few SAP
28-48 YR C/L WFSBK Fr SS SP SE xP many SAP

The T & J Panel
Wastewater Treatment System

Patent # 4013559

269 Marble Road
Statesville, N.C. 28625
704-924-8600

ISOMETRIC DRAWING OF A SEGMENT OF 16" T & J PANEL SYSTEM DRAINFIELD



CUTAWAY OF GRAVITY FLOW PANEL

RECEIVED OCT 2 1 2015

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:
( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (X) 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: Lewis Spivey **Address:** 12743 Vantage Point Ln, Huntersville **Phone:** 704-363-1401

Owner Name: Shift Properties, LLC **Address:** PO Box 5476 Mooresville 28117 **Phone:** 704-363-1401

Property Information:

Street Address: 297 Tennessee Circle, Mooresville NC 28117

Subdivision Name: Tennessee Circle **Section/Phase:** _____ **Lot Number:** 14

Driving Directions: Hwy 150 W, Turn R Perth Rd, Turn L on Fern Hill, Turn R on Tennessee Cir
Turn L on Tennessee Cir, Lot on Right

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: 8
( ) 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 ( ) 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: _____ 10-20-2015
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

RECEIVED JUN 2 2015

IREDELL COUNTY HEALTH DEPARTMENT

Paid $350.00

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection

#210749

(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 ___Authorization To Construct ___BOTH ___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 ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone	Work Phone
Lewis Spivey	9509 Piccone Brook Ln Charlotte 28216		7043631401
Owner Name	**Mailing Address**	**Home Phone**	**Work Phone**
Russell & Johnna Thompson	330 Winding Stones Rd Troutman 28166		

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
297 Tennessee Circle Mooresville NC 28117	Tennessee Circle	Lot 74

Driving Directions: Perth, Left on Fern Hill, Rt on Tennessee Circle, Lot on Lt,

***

AUTHORIZATION TO ACT AS AGENT FOR OWNER

Any application/document/permit requiring a signature must be signed by the property owner or their authorized agent. This form shall be provided by the owner to allow specified individuals to act as agents for the owner. This form allows the specified individuals to sign or receive any application/document/permit on behalf of the owner. This form allows the authorized agent to make decisions on behalf of the owner pertaining to modifications of permits in the field. It is the responsibility of the owner to assure that any/all permit conditions specified on permits issued by this Division are followed.

I, Russell Thompson, am the legal owner of the property located at 297 Tennessee Circle, Mooresville NC, identified as PIN(Parcel Identification Number) 4639-36-2511.000, located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) Lewis D. Spivey, Shift Properties LLC, Ashley Kollans, _____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

1. Improvement Permit (IP)/ Authorization to Construct (AC).
2. Application for soil-site evaluation (new/repair).
3. Application/permit for water well/well abandonment.
4. Application for existing system.
5. Application for Improvement Permit (IP)/ Authorization to Construct (AC).

I agree to abide by any and all decisions and/or conditions between the agent acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division. This form must be fully executed before the individual's specified above will be recognized as the authorized agent.

Signature of Owner — Date: 6-2-15

Signature of Witness — Date: 6-2-15

GENERAL FRAMING NOTES

THE FOLLOWING NOTES ARE ASSOCIATED WORDING DESCRIBABLE ONLY DUE TO A VARIANCE IN CODE FOR SINGLE PLANS STATES AND COUNTY. WITH ALL YOUR LOCAL CODES CONSULT WITH LOCAL ENGINEER FOR ALL STRUCTURAL REQUIREMENTS.

1. ALL FRAMED WALL DIMENSIONS ARE BASED ON 2 x 4 STUDS UNLESS OTHERWISE NOTED.
2. ALL EXTERIOR WALLS SHEATHED WITH 1/2" EXTERIOR GRADE SHEATHING.
3. ALL SHEARING SHALL BE 7/16" OSB OR CDX WITH 1/8" EXPANSION.
4. PLACE METHODS COLLECTIVE SHEARWALL.
5. FRAMER TO INSTALL DOUBLE FLOOR JOISTS UNDER PARTITION WALL PARALLEL TO JOISTS.
6. ALL WALLS TO BE 8'-1" FROM TOP OF SOLE TO 9'-1" O.C. BLOCKING AT MID-SPAN.
7. ALL FLOOR JOISTS TO BE #1 SYP, DOUG. FIR, OR OTHER SPECIFICATION.
8. ALL EXTERIOR OPENINGS TO BE SELECTED FROM 24 X 12'-0" OR LESS. ALL DOORS AND ALL WINDOWS AT 7'-0" AT ALL DETERMINATION SPACE.
9. ALL EXTERIOR DOORS TO BE SET AT 8'-0" HIGH CEILING HEIGHT WITH SPAN CHARTER THAN 10'-0".
10. ALL WINDOWS TO BE SET WITH 1/2 OF VERTICAL DISTANCE BETWEEN HEADER BOARD AND FLOOR JOISTS AT 2'-1" ELEVATION.
11. ALL VALLEY RAFTERS AND HIGH BEAMS SHALL BE ONE "M" SIZE LARGER THAN RAFTERS.
12. ROOF SHEATHING TO BE 1/2 IN PLYWOOD, INTERIOR USE, EXTERIOR GLUE, APPLIED WITH 8d NAILS AT 6" O.C. AT ALL EDGES AND 12" O.C. AT ALL INTERMEDIATE SUPPORTS.
13. ROOF TILE OR HARDIE PLANK AND SHAKE SHINGLES ARE USED, THEIR MANUFACTURER'S INSTRUCTIONS SHALL SUPERCEDE THE ONES SPECIFIED UNLESS THEY ARE LESS THAN THOSE SPECIFIED. ROOF TILE SHALL BE INSTALLED ON 15# FELT PAPER OVER 1/2" PLYWOOD SHEATHING.
14. ALL BASEMENT WALLS, BEAMS, AND COLUMNS TO BE DESIGNED BY LOCAL STRUCTURAL ENGINEER AND MEET ALL LOCAL CODES.
15. ALL FLOOR FRAMING, STAIRWAYS AND DECKS, TO BE DESIGNED BY LOCAL STRUCTURAL ENGINEER AND MEET ALL LOCAL CODES.

GENERAL NOTES

1. ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH ALL APPLICABLE NATIONAL, STATE, AND LOCAL CODES, ORDINANCES, AND REGULATIONS.
2. CONTRACTOR SHALL VERIFY ALL NOTES, DIMENSIONS AND CONDITIONS AT SITE AND SHALL REPORT ANY DISCREPANCIES TO THE ARCHITECT BEFORE PROCEEDING WITH THE WORK. CONTRACTOR SHALL ASSUME RESPONSIBILITY FOR ALL CONSTRUCTION AND SHOP DRAWINGS.
3. ALL DIMENSIONS TO BE TAKEN FROM FACE OF STUD, CMU, OR CONCRETE UNLESS OTHERWISE NOTED. DO NOT SCALE DRAWINGS. VERIFY AND ADJUST ALL CONDITIONS AND DIMENSIONS AT JOB SITE AND BE RESPONSIBLE FOR SAME. CONFORM TO ALL APPLICABLE LOCAL CODES AND ORDINANCES.
4. CONSTRUCTION DRAWINGS ARE NOT TO BE SCALED FOR PRICING AND BIDDING PURPOSES. REFER TO DIMENSIONS ONLY.
5. ALL WORK SHALL BE PERFORMED IN A WORKMANLIKE MANNER ACCORDING TO THE STANDARDS OF THE TRADE.
6. ALL DIMENSIONS ARE TO FACE OF STUD, FACE OF CONCRETE OR CENTERLINE OF STEEL UNLESS NOTED OTHERWISE.
7. ALL FOUNDATION AND STRUCTURAL MEMBERS SHOWN ON DRAWINGS ARE DIAGRAMMATIC AND ARE TO BE ADJUSTED AS REQUIRED BY FIELD CONDITIONS AND OTHER TRADES. CONTRACTOR SHALL NOTIFY ARCHITECT OF ANY DISCREPANCIES BEFORE PROCEEDING WITH THE WORK.
8. ALL WOOD, CONCRETE AND STEEL STRUCTURAL MEMBERS SHALL BE OF A SIZE AND GRADE AS REQUIRED BY ALL NATIONAL, STATE AND LOCAL BUILDING CODES. REFER TO PLANS.
9. ALL COLUMNS OR WOOD FRAMING SHOULD BE ENGINEERED TO CARRY SOUND AND SAFELY LOADS. ALL LOADS SHALL BRACE AND TERMINATE AT THE BASEMENT FLOOR OR AT OTHER BEARING POINTS DESIGNED TO CARRY THE LOAD.

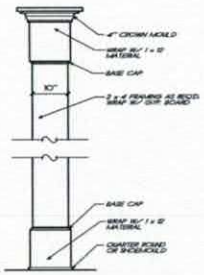
WARRANTY AND LIABILITY

THERE ARE NO WARRANTIES MADE BY FRANK BETZ ASSOCIATES, INC., EITHER EXPRESS OR IMPLIED, OTHER THAN A WARRANTY OF TITLE. FRANK BETZ ASSOCIATES, INC. DISCLAIMS ANY AND ALL WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR USE OR PURPOSE.

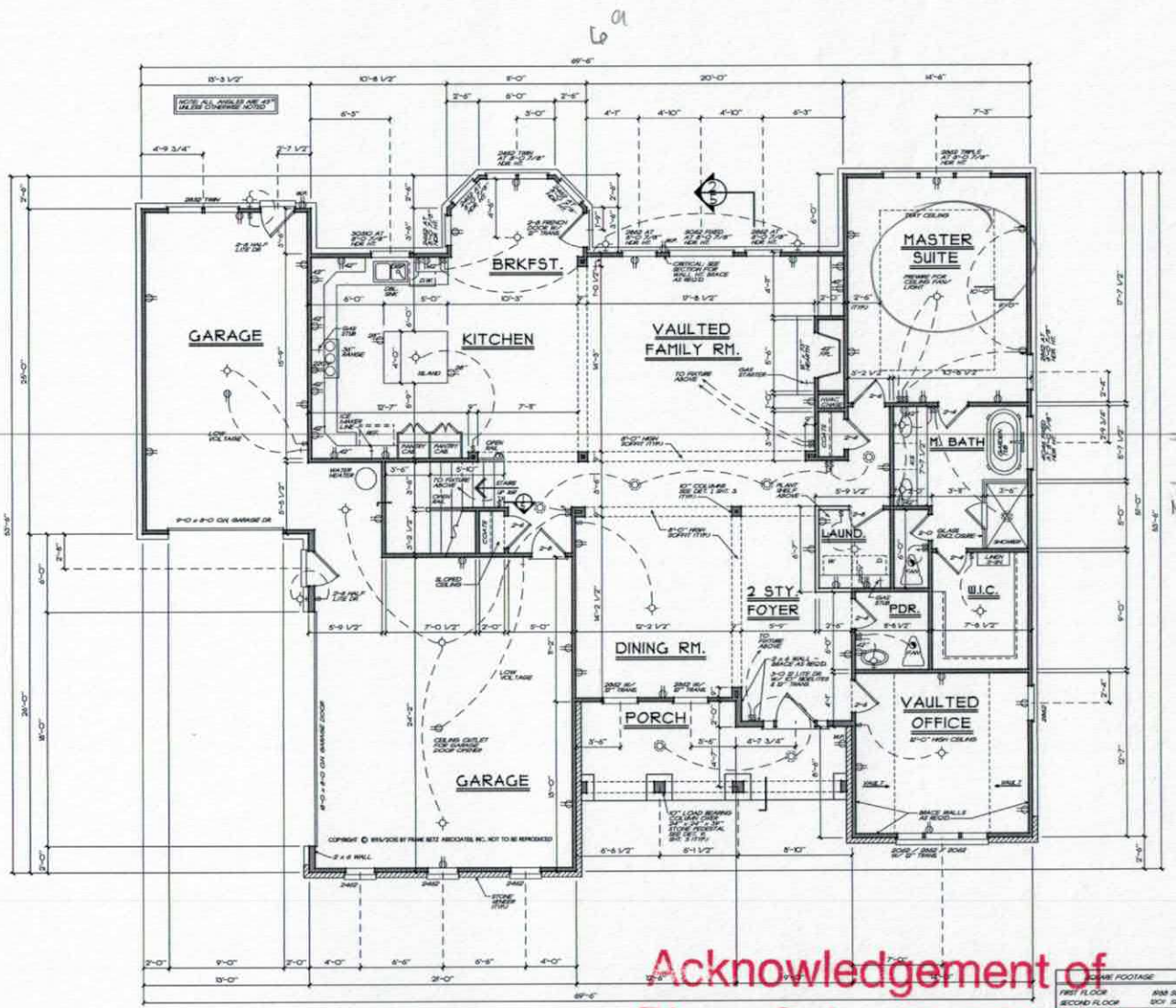
Limitation of Liability: Frank Betz Associates, Inc. shall carry out all liability to and incident costs to correct working drawings in the event an error or omission occurs in the working drawings, however, in no case shall be applied or any additional cost to the client. No claims shall be paid to the client for field modifications, corrections or any resulting from any incorrect work. Frank Betz Associates, Inc. upon modification will provide, without charge, such revised working drawings as may be required to correct such errors and omissions.

Indemnity: The client agrees to defend, indemnify, and hold harmless from any claims, suits, or actions cost or expense of any kind or nature whatsoever in any way related to the preparation of these plans and specifications provided by our company performance of services.

The plans and other information furnished by Frank Betz Associates, Inc. are instruments of service for the use solely with respect to this project and shall not be used by the owner or others on extensions of this project except by agreement in writing and with appropriate compensation to Frank Betz Associates, Inc. The reuse without the written verification or adaptation by Frank Betz Associates, Inc. for the specific purpose intended will be at the user's sole risk and without liability or legal exposure to Frank Betz Associates, Inc. All plans, specifications and data furnished by Frank Betz Associates, Inc. are subject to this restriction and shall be delivered to any other party. The client shall indemnify and hold harmless Frank Betz Associates, Inc. and its officers and employees from any claims, damages, losses, expenses, including attorney's fees arising out of or resulting therefrom. Any such verification or adaptation will entitle Frank Betz Associates, Inc. to further compensation at rates to be agreed upon by client and Frank Betz Associates, Inc.



1/3 INT. COLUMN DETAIL 3/4" = 1'-0"



FIRST FLOOR PLAN 1/4" = 1'-0"

SQUARE FOOTAGE	
FIRST FLOOR	1898 SQ. FT.
SECOND FLOOR	1001 SQ. FT.
TOTAL	3899 SQ. FT.
GARAGE	573 SQ. FT.
PORCH	146 SQ. FT.
TOTAL	4008 SQ. FT.

FRANK BETZ ASSOCIATES, INC. ASSUMES NO LIABILITY FOR ANY CHANGES OR MODIFICATIONS MADE TO THESE PLANS BY OTHERS.

Acknowledgement of Plans Submittal ONLY!

Maria Dobson Date 10/23/15

Lewis Spivey Date 10-20-15

REVISIONS	DATE	BY
PER SCHEME	8-28-15	JSC

Copyright Frank Betz Associates, Inc. All Rights Reserved. The Duplication, Reproduction, Copying, Sale, Rental, Licensing, or any other distribution or use of these drawings, any portion thereof, or the plans depicted herein is Strictly Prohibited unless expressly authorized in writing by FBA, Inc.

LEWIS SPIVEY
MOORESVILLE, NC

FIRST FLOOR PLAN

THE BALMORAL

FRANK BETZ ASSOCIATES, INC.
DESIGNERS OF CUSTOM AND STOCK HOMEPLANS
3550 GEORGE BUSBEE PARKWAY SUITE 190
KENNESAW, GEORGIA 30144
770-421-0666 888-717-3033

BY: CSV CSC CVL KSW JCH

DATE: 8-28-15 9-28-15

SHEET 3 OF: 5

X:\Modification Current Version\Balmoral\BALMORAL.dwg 8-28-2015 2:40 PM

WARRANTY AND LIABILITY

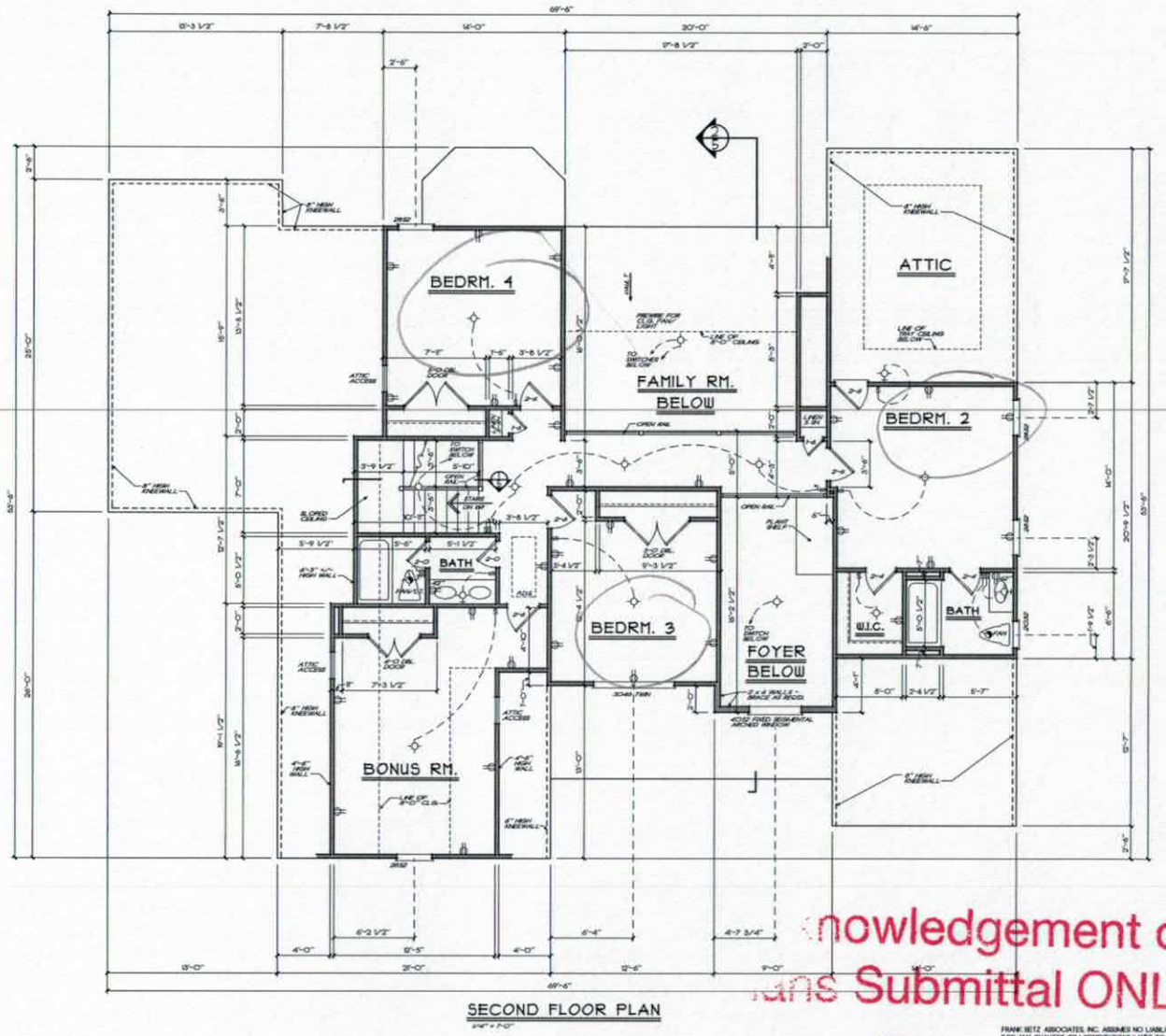
THERE ARE NO WARRANTIES MADE BY FRANK BETZ ASSOCIATES, INC. EITHER EXPRESS OR IMPLIED, OTHER THAN A WARRANTY OF TITLE. FRANK BETZ ASSOCIATES, INC. SPECIFICALLY DISCLAIMS ALL OTHER IMPLIED WARRANTIES, INCLUDING BUT NOT LIMITED TO, ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE.

Limitation of Liability: Frank Betz Associates, Inc. limits any and all liability to, all incurred costs to correct working drawings in the event an error or discrepancy occurs. The revised working drawings will be provided to the client for review. There will be no charge for costs to the client for field modifications, corrections etc. resulting from any alleged error. Frank Betz Associates, Inc. upon notification, will provide alternate solutions to problems/conditions that may arise from an alleged error at no additional expense to the client.

Indemnity: The client agrees to defend, indemnify and hold harmless from any claim, liability, or demand cost in excess of five $5 as stated above for injury or loss sustained by any party from exposure allegedly caused by our company performance of services.

The plans and other information provided by Frank Betz Associates, Inc. hereunder are intended solely for the use of the customer to which the proposal is addressed and may not be used in any way by any other person or entity. Any party or anyone other than the customer named above is at the user's risk.

NOTE: ALL FLOOR JOISTS AND RAFTER BRACING TO BEAR SOFT LOAD BEARING WALLS DESIGNED TO CARRY LOAD THRU ALL GIRDERS AND COMPLACE ST FOUNDATION WALLS AND SUPPORTED AT THE DESIGNED BEAM OR POINTING DESIGNED TO CARRY LOAD



SECOND FLOOR PLAN

nowledgement of
ans Submittal ONLY!

FRANK BETZ ASSOCIATES, INC. ASSUMES NO LIABILITY FOR ANY CHANGES OR MODIFICATIONS MADE TO THESE PLANS BY OTHERS.

Date 10/23/15

Date 10-20-15

REVISIONS	DATE	BY
WAY SCHEME	6-26-15	JCP

Copyright Frank Betz Associates, Inc. All Rights Reserved. The Duplication, Reproduction, Copying, Sale, Rental, Licensing, or any other distribution or use of these drawings, any portion thereof, or the plans depicted herein is Strictly Prohibited unless expressly authorized in writing by FBA, Inc.

LEWIS SPIVEY
MOORESVILLE, NC

SECOND FLOOR PLAN

THE BALMORAL

FRANK BETZ ASSOCIATES, INC.
DESIGNERS OF CUSTOM AND STOCK HOME PLANS
3350 GEORGE BUSBEE PARKWAY
SUITE 180
KENNESAW, GEORGIA 30144
770-431-0888 800-717-3003

BY: CK:

DATE:

SHEET
4
OF: 5

6/26/2015 8:57 PM A:\Lewis\Balmoral Location\Agency\Balmoral.dgn

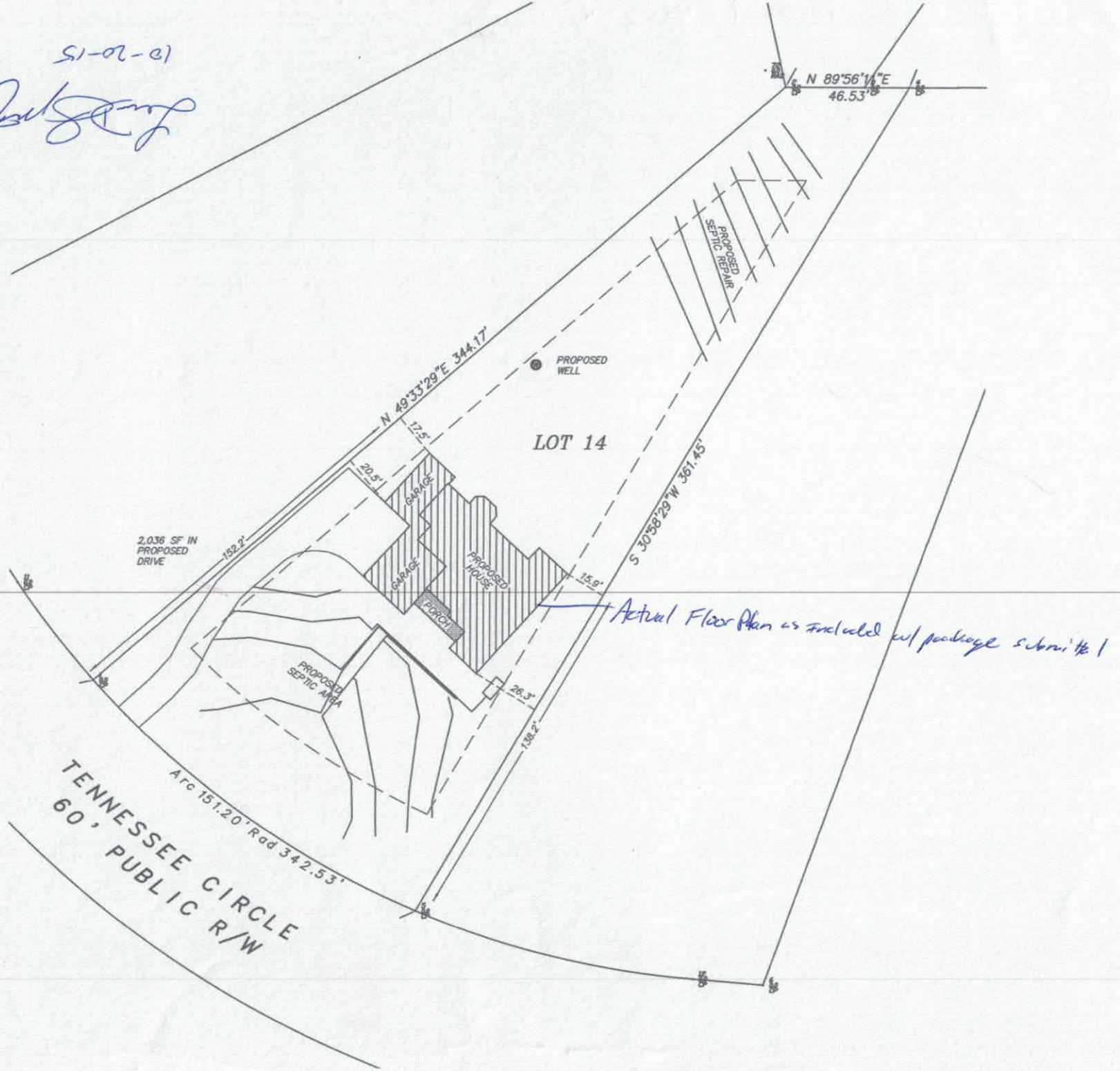
Acknowledgement of
Plans Submittal ONLY!

Date

Date

10-20-15

51-02-01



Actual Floor Plan as Included w/ package submitted

IREDELL COUNTY

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

APPLICATION NUMBER
210749
Issue Date: 05/26/2015

ZONING PERMIT

Open Space

FILE COPY

Parcel Number	Street Address	Jurisdiction
4639362511.000	297 TENNESSEE CIRCLE, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: THOMPSON RUSSELL B+JOHNNA	Applicant: SPIVEY, LEWIS
Address: 330 WINDING SHORES RD MOORESVILLE, NC 28166	Address: PO BOX 5476 MOORESVILLE, NC 28117
Phone:	Phone: 704-363-1401

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.760	35.00	35.00	15.00	15.00	CACL	X

Remarks:

$ PAID

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: Lewis D Spivey Date: 5/26/15

Permit Number	39131	TOTAL FEES:	$ 77.25