ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-309546

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

PIN # 4639 · 73 · 2714 ✓

APPLICANT/OWNER: KATRINA JONES APPLICANT ADDRESS: 348 SOUTH SAN AGUSTIN DRIVE, MOORESVILLE, N.C 28117

SITE ADDRESS: 348 SOUTH SAN AGUSTIN DRIVE, MOORESVILLE, N.C. 28117 ✓ PHONE: 704-547-4302 ALT. PHONE 704-658-8616

SITE DIRECTIONS: (L) ON 21, (R) ON PERTH, (R) ON BELL CROSSING, (L) ON SOUTH SAN AGUSTIN, LOT ON (R)

SUBDIVISION: BELLS CROSSING ✓ SECTION: PH LOT # 150 ✓ LOT AREA: 0.76 AC ✓

SAP CONTROLLED: ☐ YES ☑ NO

DESIGN FLOW: 480GPD L.T.A.R.: 0.3 (0.275) REPAIR

Septic Tank	1000 EXT (gal)	STB	794	Date	2-22-17	☐ New System ☐ Repair ☑ Expansion	System Type: I II III IV V VI	☑ Residence	No. Bedrooms	4	Water Supply
Pump Tank	— (gal)	PT	—	Date	—	System Description:	25% REDUCTION	☐ Business	No. Persons	8	☐ Private
Pump Make	—	Model	—	Serial #	—	Repair System Description:	50% REDUCTION	☐ Other	No. Employees	—	☑ Public
# Nitrification Fields	1	# Lines	EXT 5+2	Linear Ft	EXT 342+92	Maintenance Agreement Required:	☐ YES ☑ NO	☐ Slab	☐ Crawl Space		☐ Community
Trench Width	36IN	Trench Bottom Depth(Low side)	EXT/27IN	Gravel Depth	—	☑ GRAVITY	☐ PRESSURE	☐ Basement w/ plumbing		☐ Basement w/o plumbing	

Comments / Conditions: INSTALL ON CONTOUR, INSTALL ON 9FT CENTERS, PROPERLY ABANDON PORTION OF LINES EFFECTED BY POOL WITH EARTHEN DAM, DO NOT EXCEED A MAX TRENCH BOTTOM OF 36IN ON NEW LINES

INITIAL SITE SKETCH

SEE ATTACHED SITE PLAN BY: BENFIELD OUTDOOR SERVICES AND SOLUTIONS, LLC. MICHAEL BENFIELD

AS BUILT SKETCH

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inspector to confirm your time.

INSTALLED AS SHOWN

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: Katrina Jones Date: 10-1-20 Installed by: MICHAEL BENEFIELD

IMPROVEMENT PERMIT by: Bryant C. White Date: 9-29-2020 OPERATION PERMIT by: Bryant C. White Date: 10-8-2020

AUTHORIZATION TO CONSTRUCT by: Bryant C. White Date: 9-29-2020 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed

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

PROPERTY ID #: 4639732714
COUNTY: IREDELL

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

OWNER: AHMED ELNAGGAR & KATRINA JONES
ADDRESS: 348 SOUTH SAN AGUSTIN DRIVE, MOORESVILLE, N.C. 28117
PROPOSED FACILITY: 4BR
PROPOSED DESIGN FLOW (.1949): 480GPD
LOCATION OF SITE:
APPLICATION DATE 7-28-2020
DATE EVALUATED: 8-24-2020
PROPERTY SIZE: 0.76 AC
PROPERTY RECORDED: YES

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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1									
2				SEE PAGE 2					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25%	50%
Site LTAR	0.3	0.275

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Burkett C. White
OTHER(S) PRESENT:

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
D (Drainage Way)						CR (Crumb)
DS (Debris Slump)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3		GR (Granular)
FP (Flood Plain)		L (Loam)				SBK (Subangular Blocky)
FS (Foot Slope)						ABK (Angular Blocky)
H (Head Slope)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15		PL (Platy)
L (Linear Slope)		SiCL (Silty Clay Loam)				PR (Prismatic)
N (Nose Slope)		CL (Clay Loam)				
R (Ridge)		SCL (Sandy Clay Loam)			MOIST	WET
S (Shoulder Slope)		SiL (Silt Loam)				
T (Terrace)					VFR (Very Friable)	NS (Non-sticky)
	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05	FR (Friable)	SS (Slightly Sticky)
		SiC (Silty Clay)			FI (Firm)	S (Sticky)
		C (Clay)			VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic)
						SP (Slightly Plastic)
						P (Plastic)
						VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

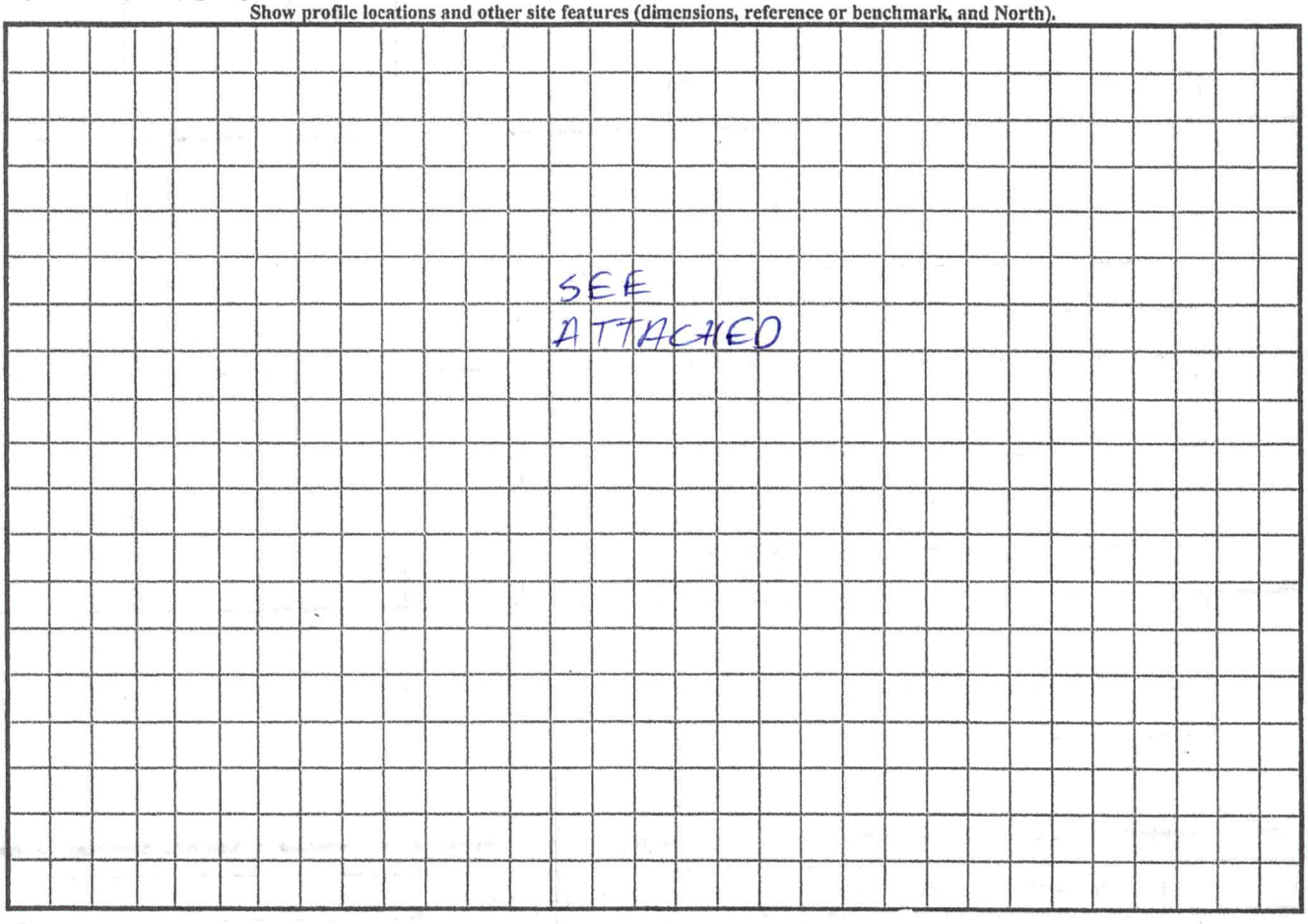
NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



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 #: 4639732714
DATE OF EVALUATION: 8-24-2020
COUNTY: IREDELL

348 SOUTH SAN AGUSTIN

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	~~LINEAR~~ HEAD 12%	0-10	FILL	FILL	Y/B MOTS 0-32 SAP INC THRU OUT	49"	NA	NA	PS .3
		10-29	C, SBK	FR, S, P, SEXP					
		29-49	CL, WSBK	FR, SS, SP, SEXP					
2	LINEAR SIDE 25%	0-7	SCL, SBK	FR, SS, SP, SEXP	SAP INC THRU OUT	52"+	NA	NA	PS .325
		7-23	C, SBK	FR, S, P, SEXP					
		23-43	CL, WSBK	FR, SS, SP, SEXP					
		43-52	CL, WSBK	VFR, SS, SP, SEXP					
3	LINEAR SIDE 25%	0-10	FILL	FILL	SAP INC 30"+ Y/B 0-26	52"+	NA	NA	PS .3
		10-16	SCL, SBK	FR, SS, SP, SEXP					
		16-40	C, SBK	FR, S, P, SEXP					
		40-52	CL, WABK	FI, SS, SP, SEXP					
4	SLIGHT HEAD 22%	0-8	FILL	FILL	Y/B MOTS 0-28 STUMP HOLE ON HOUSE SIDE OF PIT	49"+	NA	NA	PS .275
		8-12	~~FILL~~ SCL, SBK	FR, SS, SP, SEXP					
		12-40	C, SBK	FR, S, P, SEXP					
		40-49	CL, WABK	FI, SS, SP, SEXP					
5	NOSE 25%	0-22	FILL	FILL	Y/B MOTS CHROMA 3+4 22"+	48"+	NA	NA	PS .25
		22-48	C, SBK	FI, S, P, SEXP					

COMMENTS:

RECEIVED JUL 31 2020

AP- 304046
$600.00

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

Relocation

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: **(PRINT CLEARLY)**

Applicant Name: Bentfield Outdoors **Address:** 939 Brawley School Rd **Zip:** 28117

Applicant Email: _____ **Phone:** _____ **Alt. Phone:** _____

Owner Name: Matilda Jones **Address:** 348 S San Agustin **Zip:** 28117

Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 348 S San Agustin 348 S. San Agustin

Subdivision Name: Bells Crossing **Section/Phase:** 4 **Lot Number:** 152

Driving Directions: _____

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

(✓) 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: 9
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
( ) 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:** _____

( ) 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.

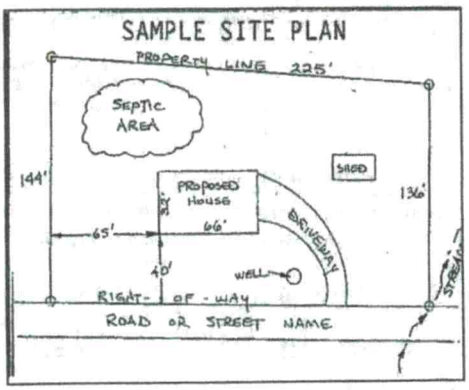
Signature: _____ 7-28-20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

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
- (X) 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

Signature: _____ 7-28-

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

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)	DESIGN LENGTH (FT)
1	RED	.6	16	16
2	PINK	2.2	62	30
3	YELLOW	3.5	84	40
4	GREEN	4.9	97	88
5	ORANGE	6.2	88	88
6	WHITE	8.7	95	88
7A	PINK	10.6	60	60
7B	PINK	10.6	35	
8	BLUE	12.9	100	0
9	ORANGE	14.9	84	0
10	BLUE	16.6	56	0
			TOTAL	TOTAL
			777	410

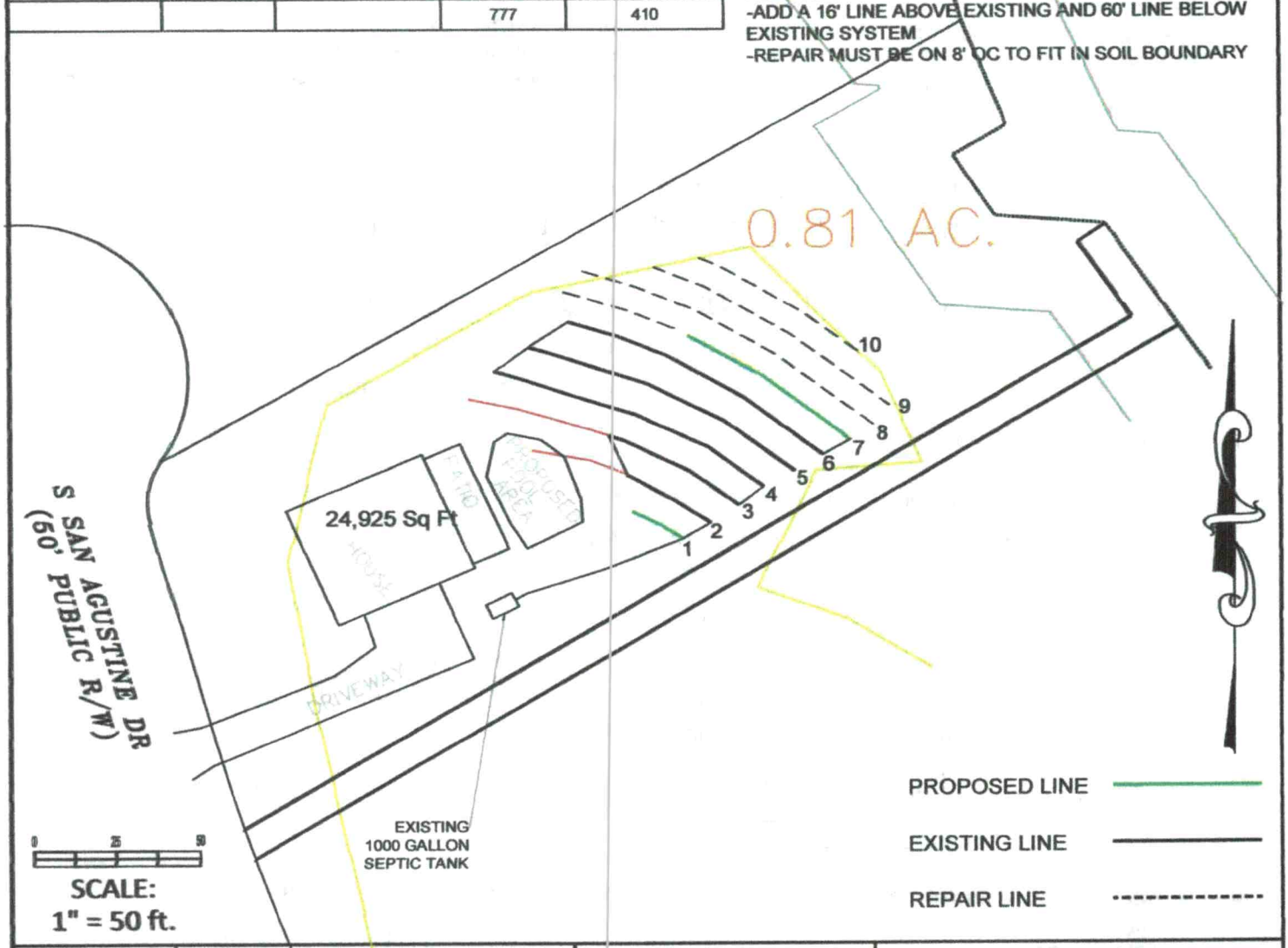
LOT 150 BELLS CROSSING, MOORESVILLE NC.

4-BEDROOM GRAVITY ACCEPTED SYSTEM
ADD LINES 1 & 7A TOTAL 76 LINEAR FT
EXISITNG 2-6 (USE 324') TOTALING 400 LINEAR FT
LTAR 0.3
25% REDUCTION 9' OC
24-30" TRENCH BOTTOM

4-BEDROOM LP PPBPS SYSTEM
TOTAL 276 LINEAR FEET
LTAR 0.3
50% REDUCTION 8' OC

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

Notes: SOIL INFORMATION PROVIDED PRIOR CONSULTANT
-TO MAINTAIN A 15' SETBACK FROM WATER'S EDGE REDUCE LINE #1 BY 32' AND LINE #2 BY 44'
-ADD A 16' LINE ABOVE EXISTING AND 60' LINE BELOW EXISTING SYSTEM
-REPAIR MUST BE ON 8' OC TO FIT IN SOIL BOUNDARY



BOSS

Benfield Outdoor Services & Solutions, LLC
939 Brawley School Rd, Mooresville, NC 28117 Ph:704-658-8616
Info@yardsbyboss.com

Katrina Jones

LOT 150
348 S San Agustine,
MOORESVILLE, NC
IREDELL COUNTY

DATE:7/21/20 DRAWN BY:MDB CHECKED BY:MDB

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)* _____

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, Katrina Jones/Ahmed Elnaggar, am the legal owner(s) of the property located at 348 S San Agustin Dr Mooresville NC 28117, identified as

PIN (Parcel Identification Number) Lot 150/Bells Crossing, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Michael Benfield, _____, 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.

Katrina Jones Ahmed Elnaggar
_____ 07/18/2020
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

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)	DESIGN LENGTH (FT)
1	BLUE	0.00	19	0
2	RED	.6	23	0
3	PINK	2.2	62	30
4	YELLOW	3.5	84	40
5	GREEN	4.9	88	88
6	ORANGE	6.2	88	88
7	WHITE	8.7	88	88
8A	PINK	10.6	56	56
8B	PINK	10.6	12	0
9	BLUE	12.9	100	34
10	ORANGE	14.9	63	0
11	BLUE	16.6	77	0
12	PINK	18.2	46	0
13	RED	20.2	30	
14	WHITE	23.4	17	0
			TOTAL	TOTAL
			760	424

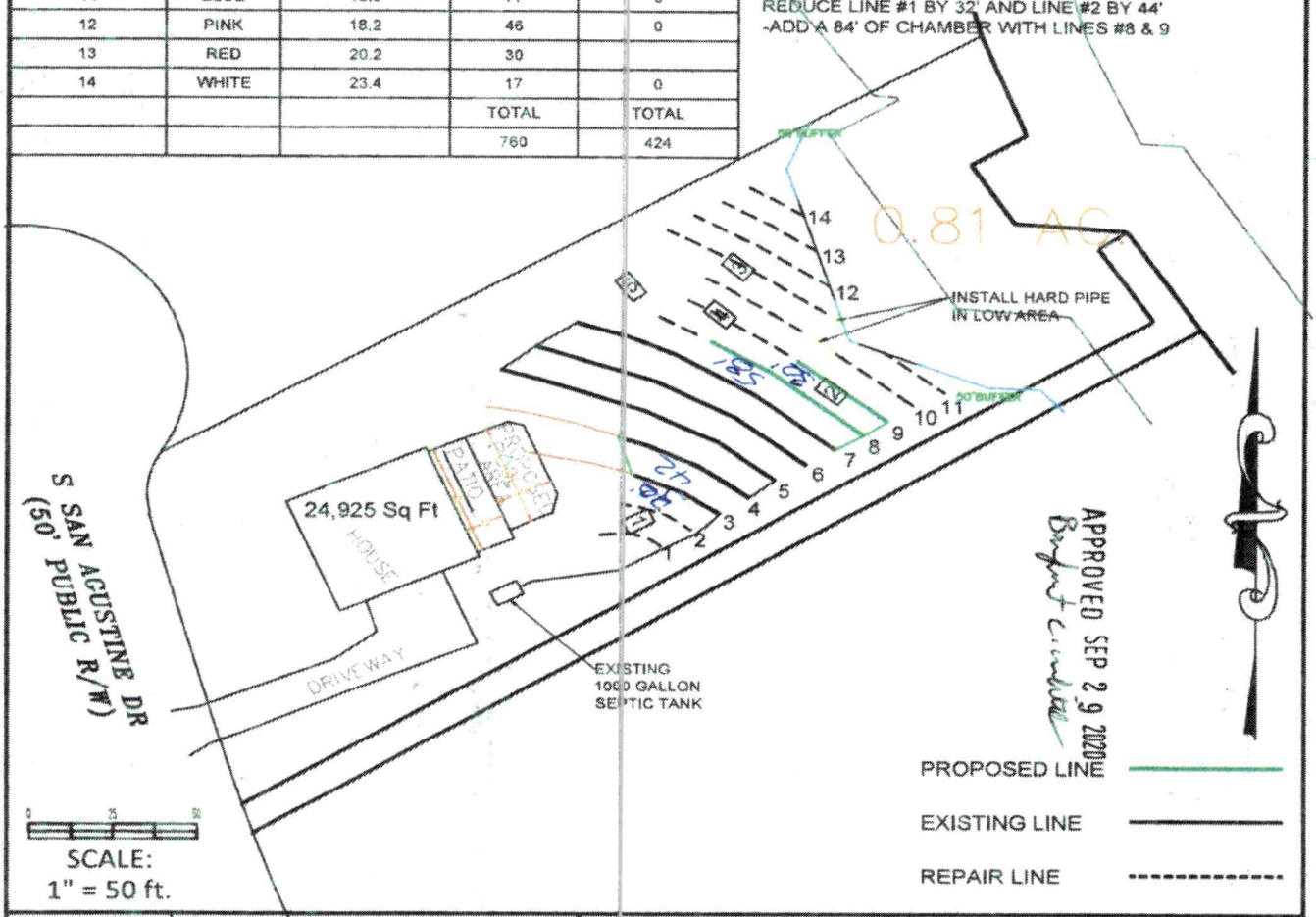
LOT 150 BELLS CROSSING, MOORESVILLE NC.

4-BEDROOM GRAVITY ACCEPTED SYSTEM
ADD LINES 8A & 9A TOTAL 82 LINEAR FT
EXISITNG 3-7 (USE 324') TOTALING 406 LINEAR FT
LTAR 0.3 LTAR OF NEW LINE IS .275
25% REDUCTION 9' OC
28-32" TRENCH BOTTOM

4-BEDROOM LP PPBPS SYSTEM
TOTAL 336 LINEAR FEET
LTAR 0.275
50% REDUCTION 8' OC

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

Notes: SOIL INFORMATION PROVIDED PRIOR CONSULTANT
-TO MAINTAIN A 15' SETBACK FROM WATER'S EDGE REDUCE LINE #1 BY 32' AND LINE #2 BY 44'
-ADD A 84' OF CHAMBER WITH LINES #8 & 9



BOSS

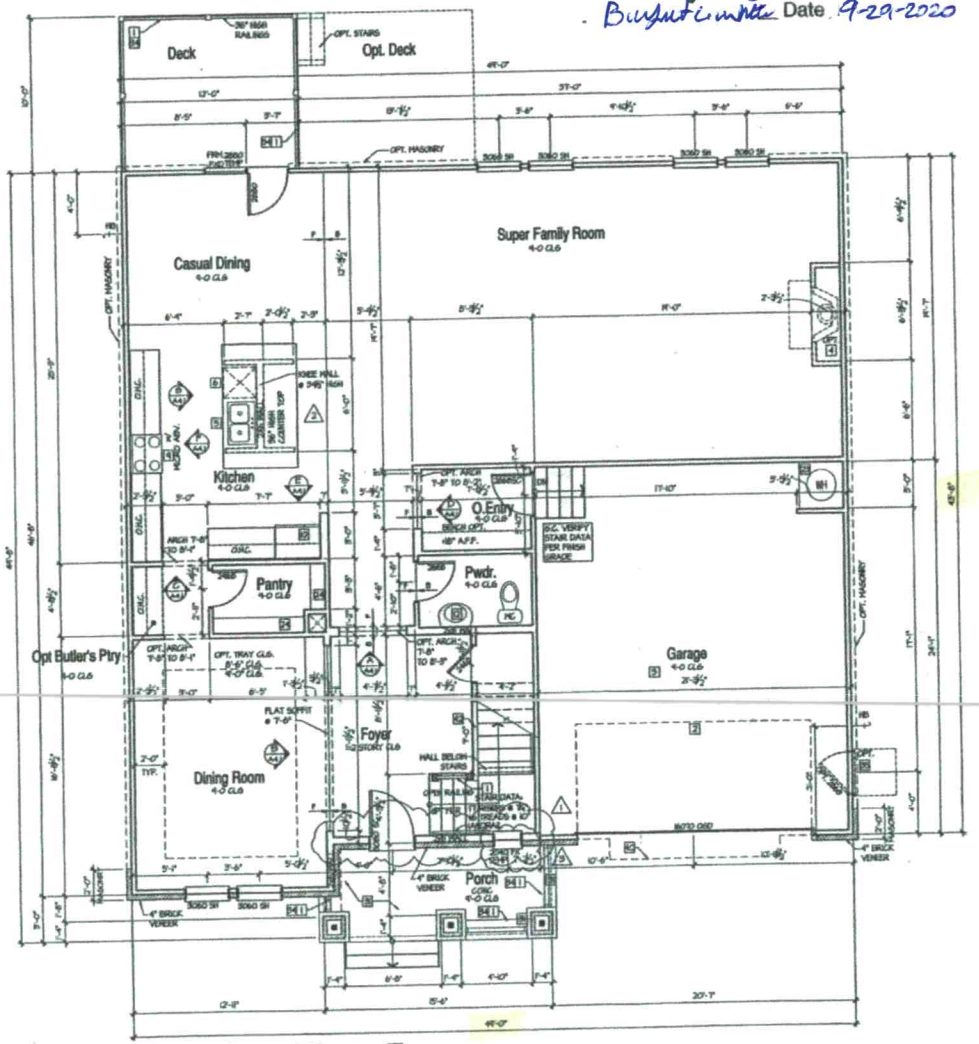
Benfield Outdoor Services & Solutions, LLC
938 Brawley School Rd Mooresville, NC 28117 Ph 704-658-8616
info@yardsbyboss.com

Katrina Jones

LOT 150
348 S San Agustine,
MOORESVILLE, NC
IREDELL COUNTY

DATE: 7/21/20 DRAWN BY: MDB CHECKED BY: MDB

Acknowledgement of
Plans Submittal ONLY!
Katrina Jones Date 10-01-2020
Burghardt Miller Date 9-29-2020



Main Floor Plan - E

0 2' 4' 8'

ASSEMBLIES:

A. TYPICAL ROOF CONSTRUCTION.
ASPHALT ROOF SHINGLES

B. TYPICAL FRAME FLOOR CONSTRUCTION.
FINISH FLOORING ON 3/4" TONGUE & GROOVE FLOOR SHEATHING ON FLOOR TRUSSES OR FLOOR JOISTS AS NOTED ON STRUCTURAL DRAWINGS.

C. SLAB ON GRADE FLOOR CONSTRUCTION.
4" CONCRETE SLAB, EXCEPT AS SPECIFIED BY SOIL REPORT, AND STRUCTURAL ENGINEER. INCLUDE VAPOR BARRIER PER SECTION IV, C, 3, a.

D. BRACING.
A. ALL BRACING SHALL COMPLY WITH MINIMUM STANDARDS OUTLINED IN APPLICABLE RES. CHECKS.
B. WINDOW SUPPLIER TO VERIFY AT LEAST ONE WINDOW IN ALL BEDROOMS TO HAVE A CLEAR EGRESS OPENING OF 5.7 SQ. FT. WITH MIN. DIMENSION OF 24" IN HEIGHT AND 20" IN WIDTH, SILL HEIGHT NOT GREATER THAN 44" ABOVE FLOOR.
C. TYPICAL WINDOW HEAD HEIGHT:
7'-0" A.F.F. @ 8'-1 1/8" PLATE HEIGHT (S.N.O.)
8'-0" A.F.F. @ 9'-1 1/8" PLATE HEIGHT (S.N.O.)

E. ELECTRICAL.
ALL ELECTRICAL AND MECHANICAL EQUIPMENT & METERS ARE SUBJECT TO RELOCATION DUE TO FIELD CONDITIONS, CONTRACTOR TO VERIFY.

F. HVAC.
PROVIDE BACK DRAFT DAMPERS @ DRYER VENT, HOOD VENT, & EXHAUST FANS.

G. STONE SILLS.
INSTALL PER LOCAL CODE.

H. DIMENSIONS ARE TO THE FACE OF STUD, S.N.O.

I. ALL EXTERIOR DIMENSIONS ARE TO FACE OF STUDS UNLESS OTHERWISE NOTED.

H. ALL ABLED PARTITIONS ARE 45 DEGREES UNLESS OTHERWISE NOTED.

K. BRICK SILLS.
INSTALL PER LOCAL CODE.

THE FOLLOWING KEYNOTES REFERENCE THE SYMBOLS AS SHOWN ON PLANS.

L. IF RAILING / GUARDRAIL IS PROVIDED, ALL RAILING / GUARDRAIL BALUSTERS TO BE SPACED SUCH THAT A 4" SPHERE CANNOT PASS BETWEEN BALUSTERS. RAILING/GUARDRAILS ARE TO BE AT A 34" MINIMUM TO 38" MAXIMUM HEIGHT A.F.F. FOR STAIRS AND 36" MINIMUM ON HORIZONTAL SURFACE GUARDS.

1. LINE OF OVERHEAD GARAGE DOOR IS OPEN POSITION.
2. SLOPE GARAGE FLOOR 1/8" PER FOOT TOWARD OVERHEAD GARAGE DOOR OPENING.
3. FIREPLACE, AS SPECIFIED BY BUILDER. INSTALL PER MANUFACTURERS SPECIFICATIONS. ALL FACTORY BUILT FIREPLACES SHALL COMPLY WITH LOCAL CODES
4. SINK W/ GARBAGE DISPOSAL
5. DISHWASHER
6. RANGE
7. COOK TOP
8. OVEN
9. REFRIGERATOR SPACE.
10. PANTRY
11. PEDESTAL SINK.
12. SHOWER SIZE AS NOTED/
13. W/A
14. 42" X 60" TUB
15. 60" X 60" CORNER TUB
16. W/A
17. 32" X 60" TUB/SHOWER
18. LINEN SHELVING PER BUILDER SPECS.)
19. HANGER SPACE
20. DRYER, VENT
21. OPTIONAL LAUNDRY SINK.
22. PROVIDE NON-COMBUSTIBLE PLATFORM ELEVATED 18" ABOVE GARAGE FLOOR FOR WATER HEATER.
23. 5 SHELVES
24. ROD AND SHELF PER BUILDER SPECS.
25. ATTIC ACCESS (22"x30" S.N.O.)
26. ATTIC ACCESS W/ STAIRS (25 1/2"x54 1/2").
27. GYPSUM BOARD OPENING @ 8'-0" AT MAIN FLOOR & 7'-0" AT UPPER FLOOR S.N.O.
28. GYPSUM BOARD ARCH @ 7'-2" TO 8'-0".
29. GYPSUM BOARD LOH WALL, 38" A.F.F. S.N.O.) W/ HDF CAP.
30. SOFFIT, REFER TO EXTERIOR ELEVATIONS FOR HEIGHTS & ARCHITECTURAL DETAILS FOR FINISH.
31. PLANT SHELF, SEE EXTERIOR ELEVATIONS.
32. HALF WALL W/ HDF CAP OR OPTIONAL LOH WALL WITH RAILING ABOVE.
33. PORCH RAIL, SEE ELEVATION.
34. 36"x36" CONCRETE STOOP.
35. 6x8 BEAM.
36. OPTIONAL UPPER CABINETS.
37. OPTIONAL CABINETS.
38. OPTIONAL COFFERED CEILING @ 8'-6" PER BUILDER SPEC.
39. LINE OF FRAMING ABOVE.
40. LINE OF FRAMING WALL BELOW.
41. 2x4 LOH WALL 42" A.F.F.
42. 2x6 LOH WALL 42" A.F.F.
43. ART NICHE
44. HORIZONTAL LANDRY CHUTE
45. LOH WALL 24" A.F.F.
46. GYPSUM BOARD ARCH @ 8'-0" TO 8'-6"
47. LOH WALL 32½" A.F.F.

SQUARE FOOTAGES

MAIN FLOOR	3645
UPPER FLOOR	3078
SUBTOTAL	3879
GARAGE	523
PORCH	81
DECK	120
TOTAL	4388
OPT 3-CAR GARAGE	423
OPT EXTENDED DECK	160
OPT SCREENED PORCH	420

ISSUE DATE: 01/17/2014
REVISIONS

5400 Trinity Road
Suite 107
Raleigh,
North Carolina 27607
919-322-2285 Phone

Meritage Homes

Meritage Homes

BSB DESIGN

www.bsbdesign.com
4901 Westown Parkway, Suite 200
West Des Moines, Iowa 50266
515.223.3020

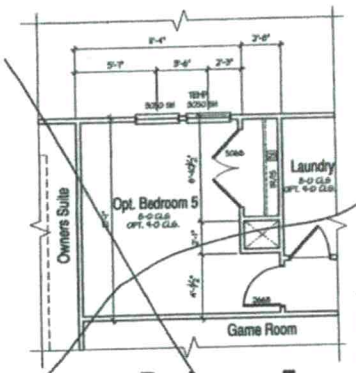
JOB NO: 03-0704 REV NO: P
DRAWN: ST CHECKED: P

MAIN FLOOR PLAN - E

PLAN 249 - 3711

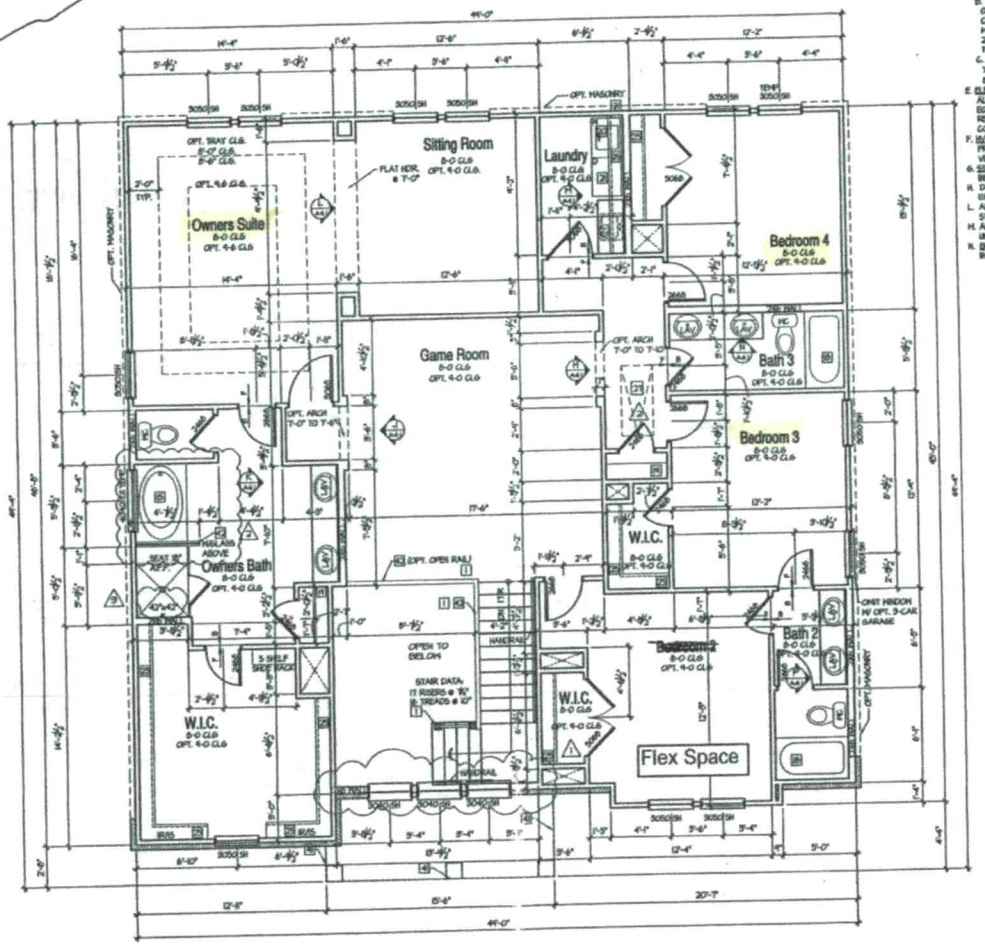
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Acknowledgement of
Plans Submittal ONLY!
Date 10-1-2020
Date 9-29-2020



Opt. Bedroom 5

0 2' 4' 8'



Upper Floor Plan - E

0 2' 4' 8'

ASSEMBLIES:

A. TYPICAL ROOF CONSTRUCTION.
ASPHALT ROOF SHINGLES

B. TYPICAL FRAME FLOOR CONSTRUCTION.
FINISH FLOORING ON 3/4" TONGUE & GROOVE FLOOR SHEATHING ON FLOOR TRUSSES OR FLOOR JOISTS AS NOTED ON STRUCTURAL DRAWINGS.

C. SLAB ON GRADE FLOOR CONSTRUCTION.
4" CONCRETE SLAB, EXCEPT AS SPECIFIED BY SOIL REPORT, AND STRUCTURAL ENGINEER. INCLUDE VAPOR BARRIER PER SECTION N, C, 5, a.

D. WINDOWS.
A. ALL WINDOWS SHALL COMPLY WITH MINIMUM STANDARDS OUTLINED IN APPLICABLE RES. CODES.
B. WINDOW SUPPLIER TO VERIFY AT LEAST ONE WINDOW IN ALL BEDROOMS TO HAVE A CLEAR EGRESS OPENING OF 5.7 SQ. FT. WITH MIN. DIMENSION OF 24" IN HEIGHT AND 20" IN WIDTH, SILL HEIGHT NOT GREATER THAN 44" ABOVE FLOOR.
C. TYPICAL WINDOW HEAD HEIGHT:
7'-0" A.F.F. @ 8'-1 1/8" PLATE HEIGHT (U.N.O.)
8'-0" A.F.F. @ 9'-1 1/8" PLATE HEIGHT (U.N.O.)

E. ELECTRICAL.
ALL ELECTRICAL AND MECHANICAL EQUIPMENT & METERS ARE SUBJECT TO RELOCATION DUE TO FIELD CONDITIONS, CONTRACTOR TO VERIFY.

F. HVAC.
PROVIDE BACK DRAFT DAMPERS @ DRYER VENT, HOOD VENT, & EXHAUST FANS.

G. STONE SILLS.
INSTALL PER LOCAL CODE.

H. DIMENSIONS ARE TO THE FACE OF STUD, U.N.O.

I. ALL EXTERIOR DIMENSIONS ARE TO FACE OF STUDS UNLESS OTHERWISE NOTED.

J. ALL ANGLED PARTITIONS ARE 45 DEGREES UNLESS OTHERWISE NOTED.

K. BRICK SILLS.
INSTALL PER LOCAL CODE.

[illegible]

THE FOLLOWING KEYNOTES REFERENCE THE SYMBOLS AS SHOWN ON PLANS.

1. IF RAILING / GUARDRAIL IS PROVIDED, ALL RAILING / GUARDRAIL BALUSTERS TO BE SPACED SUCH THAT A 4" SPHERE CANNOT PASS BETWEEN BALUSTERS. RAILING/GUARDRAILS ARE TO BE AT A 34" MINIMUM TO 38" MAXIMUM HEIGHT A.F.F. FOR STAIRS AND 36" MINIMUM ON HORIZONTAL SURFACE GUARDS.
2. LINE OF OVERHEAD GARAGE DOOR IN OPEN POSITION.
3. SLOPE GARAGE FLOOR 1/8" PER FOOT TOWARD OVERHEAD GARAGE DOOR OPENING.
4. FIREPLACE, AS SPECIFIED BY BUILDER. INSTALL PER MANUFACTURERS SPECIFICATIONS. ALL FACTORY BUILT FIREPLACES SHALL COMPLY WITH LOCAL CODES.
5. SINK W/ GARBAGE DISPOSAL
6. DISHWASHER
7. RANGE
8. COOK TOP
9. OVEN
10. REFRIGERATOR SPACE.
11. PANTRY
12. PEDESTAL SINK.
13. SHOWER (SIZE AS NOTED)
14. N/A
15. 42" X 60" TUB
16. 60" X 60" CORNER TUB
17. N/A
18. 32" X 60" WHIRLPOOL
19. LINEN SHELVING PER BUILDER SPECS.)
20. WASHER SPACE
21. DRYER, VENT
22. OPTIONAL LAUNDRY SINK.
23. PROVIDE NON-COMBUSTIBLE PLATFORM ELEVATED 18" ABOVE GARAGE FLOOR FOR WATER HEATER.
24. 5 SHELVES
25. ROD AND SHELF PER BUILDER SPECS.
26. ATTIC ACCESS (22"x30" U.N.O.)
27. ATTIC ACCESS W/ STAIRS (25 1/2"x54 1/2").
28. GYPSUM BOARD OPENING @ 8'-0" AT MAIN FLOOR & 7'-0" AT UPPER FLOOR U.N.O.
29. GYPSUM BOARD ARCH @ 7'-2" TO 8'-0".
30. GYPSUM BOARD LOW WALL 35" A.F.F. U.N.O.) W/ MOP CAP.
31. SOFFIT, REFER TO EXTERIOR ELEVATIONS FOR HEIGHTS & ARCHITECTURAL DETAILS FOR FINISH.
32. PLANT SHELF, SEE EXTERIOR ELEVATIONS.
33. HALF WALL W/ HOOD CAP OR OPTIONAL LOW WALL WITH RAILING ABOVE.
34. PORCH RAIL, SEE ELEVATION.
35. 26"x26" CONCRETE STOOP.
36. 6x6 BEAM.
37. OPTIONAL UPPER CABINETS.
38. OPTIONAL CABINETS.
39. OPTIONAL COFFERED CEILING @ 8'-0" PER BUILDER SPEC.
40. LINE OF FRAMING ABOVE.
41. LINE OF FRAMING WALL BELOW.
42. 2x4 LOW WALL 42" A.F.F.
43. 2x6 LOW WALL 42" A.F.F.
44. ANT NICHE
45. HORIZONTAL LAUNDRY CHUTE
46. LOW WALL +24" A.F.F.
47. GYPSUM BOARD ARCH @ 8'-0" TO 8'-6"
48. LOW WALL 32@ A.F.F.

SQUARE FOOTAGES

	E
MAIN FLOOR	1660
UPPER FLOOR	2618
SUBTOTAL	3678
GARAGE	522
PORCH	70
DECK	120
TOTAL	4390
OPT 3-CAR GARAGE	+228
OPT EXTENDED DECK	+250
OPT SCREENED PORCH	+220

ISSUE DATE: 01/17/2014
REVISIONS

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Raleigh,
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919-322-2285 Phone

Meritage Homes

Meritage Homes

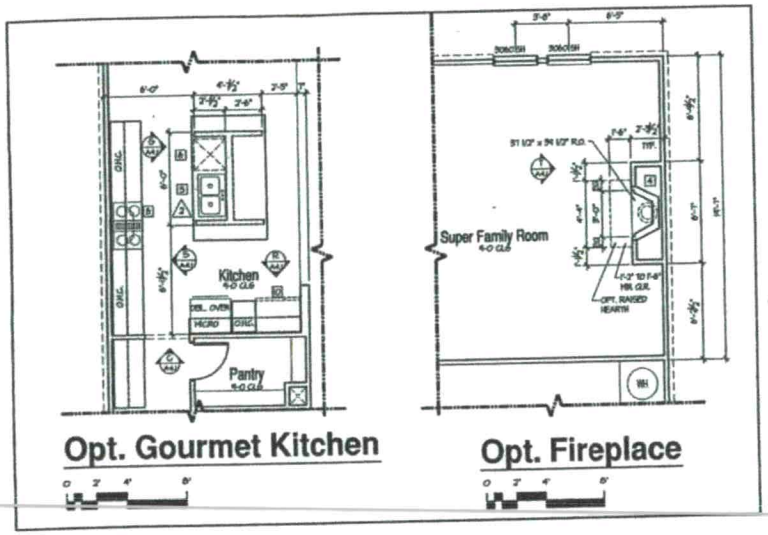
BSB DESIGN

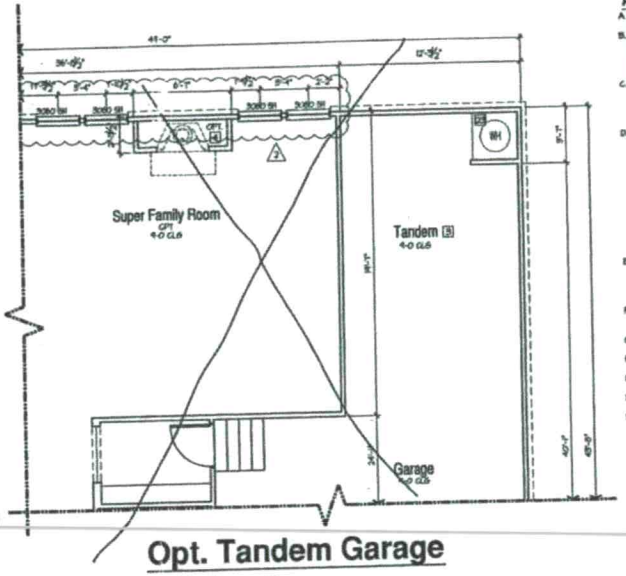
www.bsbdesign.com
4201 Wilson Parkway, Suite 20
West Des Moines, Iowa 50266
515 273 3000

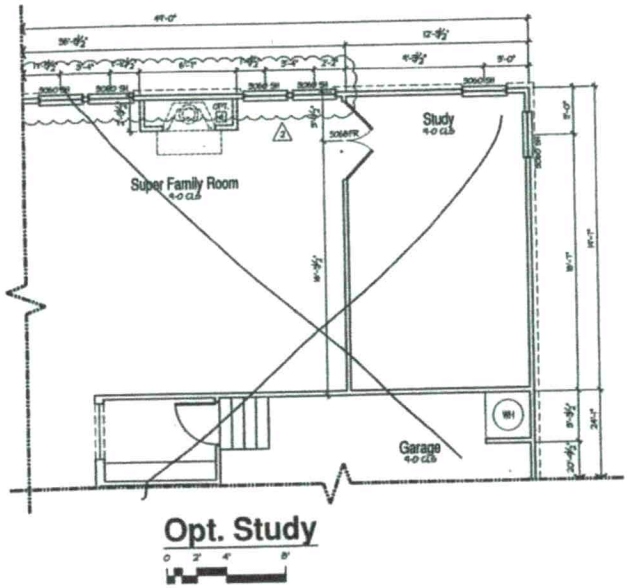
UPPER FLOOR PLAN - E

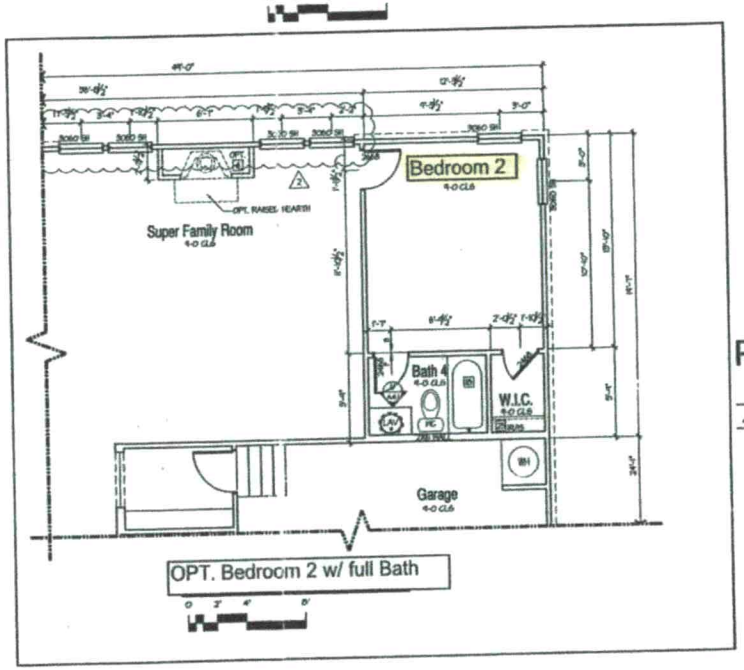
PLAN 249 - 3711

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TYPICAL CONSTRUCTION ASSEMBLIES:

A. TYPICAL ROOF CONSTRUCTION:
ASPHALT ROOF SHINGLES

B. TYPICAL FRAME FLOOR CONSTRUCTION:
FINISH FLOORING ON 3/4" TONGUE & GROOVE FLOOR SHEATHING ON FLOOR TRUSSES OR FLOOR JOISTS AS NOTED ON STRUCTURAL DRAWINGS.

C. SLAB OR GRADE FLOOR CONSTRUCTION:
4" CONCRETE SLAB, EXCEPT AS SPECIFIED BY SOIL REPORT, AND STRUCTURAL ENGINEER. INCLUDE VAPOR BARRIER PER SECTION N, C, 3, a.

D. WINDOWS:
A. ALL WINDOWS SHALL COMPLY WITH MINIMUM STANDARDS OUTLINED IN APPLICABLE RES. CODE(S).
B. WINDOW SUPPLIER TO VERIFY AT LEAST ONE WINDOW IN ALL BEDROOMS TO HAVE A CLEAR EGRESS OPENING OF 5.7 SQ. FT. WITH MIN. DIMENSION OF 24" IN HEIGHT AND 20" IN WIDTH. SILL HEIGHT NOT GREATER THAN 44" ABOVE FLOOR.
C. TYPICAL WINDOW HEIGHTS:
7'-0" A.F.F. @ 8'-1 1/8" PLATE HEIGHT (U.N.O.)
8'-0" A.F.F. @ 9'-1 1/8" PLATE HEIGHT (U.N.O.)

E. ELECTRICAL:
ALL ELECTRICAL AND MECHANICAL EQUIPMENT & METERS ARE SUBJECT TO RELOCATION DUE TO FIELD CONDITIONS. CONTRACTOR TO VERIFY.

F. VENTS:
PROVIDE BACK DRAFT DAMPERS @ DRYER VENT, HOOD VENT, & EXHAUST FANS.

G. STONE SILLS:
INSTALL PER LOCAL CODE.

H. DIMENSIONS ARE TO THE FACE OF STUD, U.N.O.

I. ALL EXTERIOR DIMENSIONS ARE TO FACE OF STUDS UNLESS OTHERWISE NOTED.

M. ALL ANGLED PARTITIONS ARE 45 DEGREES UNLESS OTHERWISE NOTED.

N. BRICK SILLS:
INSTALL PER LOCAL CODE.

FLOOR PLAN NOTES:

THE FOLLOWING KEYNOTES REFERENCE THE SYMBOLS AS SHOWN ON PLANS.

1. 9" RAILING / BANNERAIL IS PROVIDED, ALL RAILING / BANNERAIL BALUSTERS TO BE SPACED SUCH THAT A 4" SPHERE CANNOT PASS BETWEEN BALUSTERS. RAILS/BANNERAILS ARE TO BE AT A 34" MINIMUM TO 36" MAXIMUM HEIGHT A.F.F. FOR STAIRS AND 36" MINIMUM ON HORIZONTAL SURFACE GUARDS.
2. LINE OF OVERHEAD GARAGE DOOR IN OPEN POSITION.
3. SLOPE GARAGE FLOOR 1/8" PER FOOT TOWARD OVERHEAD GARAGE DOOR OPENING.
4. FIREPLACE, AS SPECIFIED BY BUILDER. INSTALL PER MANFACTURER'S SPECIFICATIONS. ALL FACTORY BUILT FIREPLACES SHALL COMPLY WITH LOCAL CODES.
5. SINK W/ GARBAGE DISPOSAL
6. DISHWASHER
7. RANGE
8. COOK TOP
9. OVEN
10. REFRIGERATOR SPACE.
11. PANTRY
12. PROFESSIONAL SINK
13. SHOWER BASE AS NOTED
14. N/A
15. 42" X 60" TUB
16. 60" X 60" CORNER TUB
17. N/A
18. 32" X 60" TUB/SHOWER
19. LINEN SHELVING PER BUILDER SPECS.)
20. WASHER SPACE
21. DRYER, VENT
22. OPTIONAL LAUNDRY SINK.
23. PROVIDE NON-COMBUSTIBLE PLATFORM ELEVATED 18" ABOVE GARAGE FLOOR FOR WATER HEATER.
24. 5 SHELVES
25. ROD AND SHELF PER BUILDER SPECS.
26. ATTIC ACCESS (22"x30" U.N.O.)
27. ATTIC ACCESS W/ STAIRS (25 1/2"x54 1/2").
28. GYPSUM BOARD SOFFITS @ 8'-0" AT MAIN FLOOR & 7'-0" AT UPPER FLOOR U.N.O.
29. GYPSUM BOARD ARCH @ 7'-2" TO 8'-0".
30. GYPSUM BOARD LOH WALL 39" A.F.F. (U.N.O.) W/ NOF CAP.
31. SOFFIT, REFER TO EXTERIOR ELEVATIONS FOR HEIGHTS & ARCHITECTURAL DETAILS FOR FINISH.
32. PLANT SHELF, SEE EXTERIOR ELEVATIONS.
33. [illegible] W/ WOOD CAP (OR OPTIONAL LOH WALL W/IR RAILING ABOVE.
34. PORCH RAIL, SEE ELEVATION.
35. 36"x36" CONCRETE STOOP.
36. 6x6 BEAM.
37. OPTIONAL UPPER CABINETS.
38. OPTIONAL CABINETS.
39. OPTIONAL COFFERED CEILING @ 8'-6" PER BUILDER SPEC.
40. LINE OF TRAVING ABOVE.
41. LINE OF TRAVING WALL BELOW.
42. 2X4 LOH WALL 42" A.F.F.
43. 2X6 LOH WALL 42" A.F.F.
44. ART NICHE
45. HORIZONTAL LAUNDRY CHUTE
46. LOH WALL 42" A.F.F.
47. GYPSUM BOARD ARCH @ 6'-0" TO 8'-6"
48. LOH WALL 52" A.F.F.

REFER TO MAIN PLANS FOR ALL TYPICAL NOTES AND DIMENSIONS NOT SHOWN.

Acknowledgement of Plans Submittal ONLY!

Katrina Jones Date 10-1-20

B. Wright Weiss Date 9-29-2020

ISSUE DATE: 01/17/2014

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515 273 3098

MAIN FLOOR OPTIONS

PLAN 249 - 3711

A2.3