RECEIVED MAR 2 3 2015

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

Application For:

( ) Septic Improvement Permit (✓) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment

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: Heritage Homes **Address:** 11605 N Community Rd #250 Charlotte NC 28217 **Phone:** 704

Owner Name: // **Address:** // **Phone:**

Property Information:

Street Address: 137 Abbeville Court

Subdivision Name: Bells Crossing **Section/Phase:** 3 **Lot Number:** 116

Driving Directions:

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: 5
Maximum Number of Occupants: 10
( ) 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: [signature] 3-23-15

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

IREDELL COUNTY HEALTH DEPARTMENT

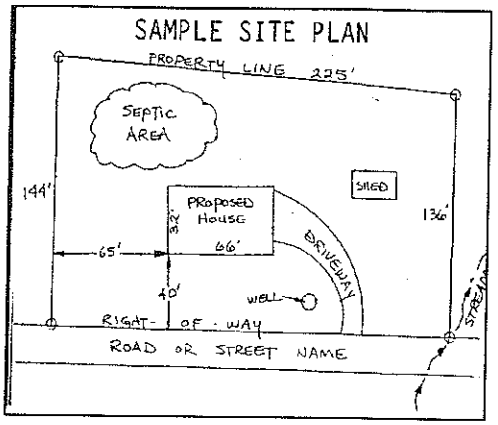
ENVIRONMENTAL HEALTH DIVISION

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:

(X) Property Line measurements are clearly identified
(X) All proposed structures are indicated
(X) Front and side setbacks from property line
(X) Preferred driveway location and well location
(X) 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: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

3-23-15
DATE

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, Robert Price (Meritage Homes), am the legal owner of the property located at Bells Crossing, identified as PIN(Parcel Identification Number) Lot 116 located in Iredell County, North Carolina.

I do hereby authorize (print authorized agent/company name) Bateman Civil Survey Company, Michael Benfield, Matt Burdette, _____, _____, 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: 3/10/15

Signature of Witness — Date: 3/10/15

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)
1	ORANGE	6.7	100
2	PINK	8.5	160
3	BLUE	10.2	160
4	ORANGE	12.2	159
5	YELLOW	14.2	84 NOT USED
6	PINK	17.3	83 NOT USED
7	RED	20.0	44 NOT USED

APPROVED FEB 12 2015

LOT 116 BELLS CROSSING SUBDIVISION

5-BEDROOM ACCEPTED STATUS GRAVITY SYSTEM
LINES 1-4 TOTAL 579 LINEAR FEET (USE 500FT)
EZFLOW OR CHAMBER
LTAR 0.3
25% REDUCTION
22" TRENCH DEPTH

5-BEDROOM DRIP IRRIGATION REPAIR
AREA REQUIRED 6000 SF
LTAR 0.1
6" TRENCH DEPTH

ABBEVILLE LANE

PROPOSED DRIVEWAY

C18

TEMPORARY SEDIMENT BASIN

120.1'

PROPOSED HOUSE

82.0'

60.0'

16.0'

35.9'

N71°34'14"W 456.44'

S73°06'49"W 421.16'

N52°12'20"E 173.06'

OLD FARM ROAD

ADDITIONAL REPAIR AREA

SOIL LINE

3
DRIP AREA
6000 SF

1 2 3 4 5 6 7

L43 L44 L45 L46 L47 L48 L49 L50 L51 L52 L53 L54

116
88,656 Sq Ft
2.04 Ac.

SCALE:
1" = 60 ft.

APPROVED MAR 26 2015

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

SOIL PROFILES AND ANALYSIS PROVIDED BY
PRICE ENVIRONMENTAL RESOURCE CONSULTING, PC

PRIMARY SYSTEM

REPAIR SYSTEM

REPAIR LINES (NOT USED)

PIT OR AUGER BORING A

Bateman Civil Survey Company
Engineers • Surveyors • Planners

Meritage Homes

LOT 116
BELLS CROSSING SUBDIVISION
MOORESVILLE, NC
IREDELL COUNTY

DATE: 10/7/14 DRAWN BY: MB CHECKED BY:TMB

4179C 4179C

RECEIVED FEB - 4 2015

IREDELL COUNTY HEALTH DEPARTMENT

Paid $350.00

#207292

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: Meritage Homes **Address:** 11605 N Community Rd st 250 Charlotte NC 28817 **Phone:** 7043096577

Owner Name: " **Address:** " **Phone:**

Property Information:

Street Address: 137 Abbeville Court

Subdivision Name: Bells Crossing **Section/Phase:** 3 **Lot Number:** 116

Driving Directions: 150 W, R onto Perth Rd, L into Bells Crossing, L onto San Agustine, R onto Abbeville 8th Lot on the left,

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: 6
Maximum Number of Occupants: 10
( ) 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: [signature] 2-4-15

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

IREDELL COUNTY HEALTH DEPARTMENT

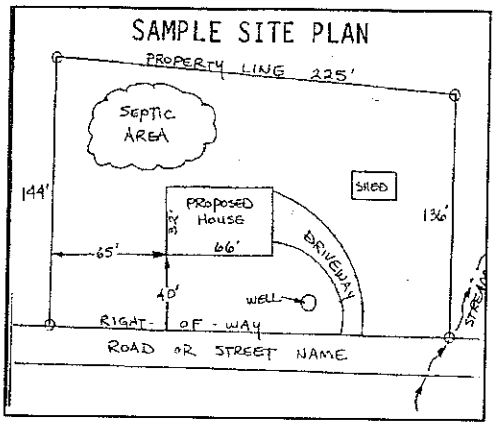
ENVIRONMENTAL HEALTH DIVISION

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
( ) 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: _____

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

2-4-15

DATE

IREDELL COUNTY

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

APPLICATION NUMBER
207292
Issue Date: 12/19/2014

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4639939448.000	137 ABBEVILLE LANE, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information	Applicant Information
Owner: MERITAGE HOMES OF NC INC	Applicant: MERITAGE HOMES
Address: 255 IREDELL CO, NC 28625	Address: 7761 BALLANTYNE COMMONS PKWY SUT CHARLOTTE, NC 28277
Phone:	Phone: 704-944-8903

Use Requested	Zone Code
SFD	

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
30.410	35.00	35.00	15.00	15.00	PA	X

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: _____

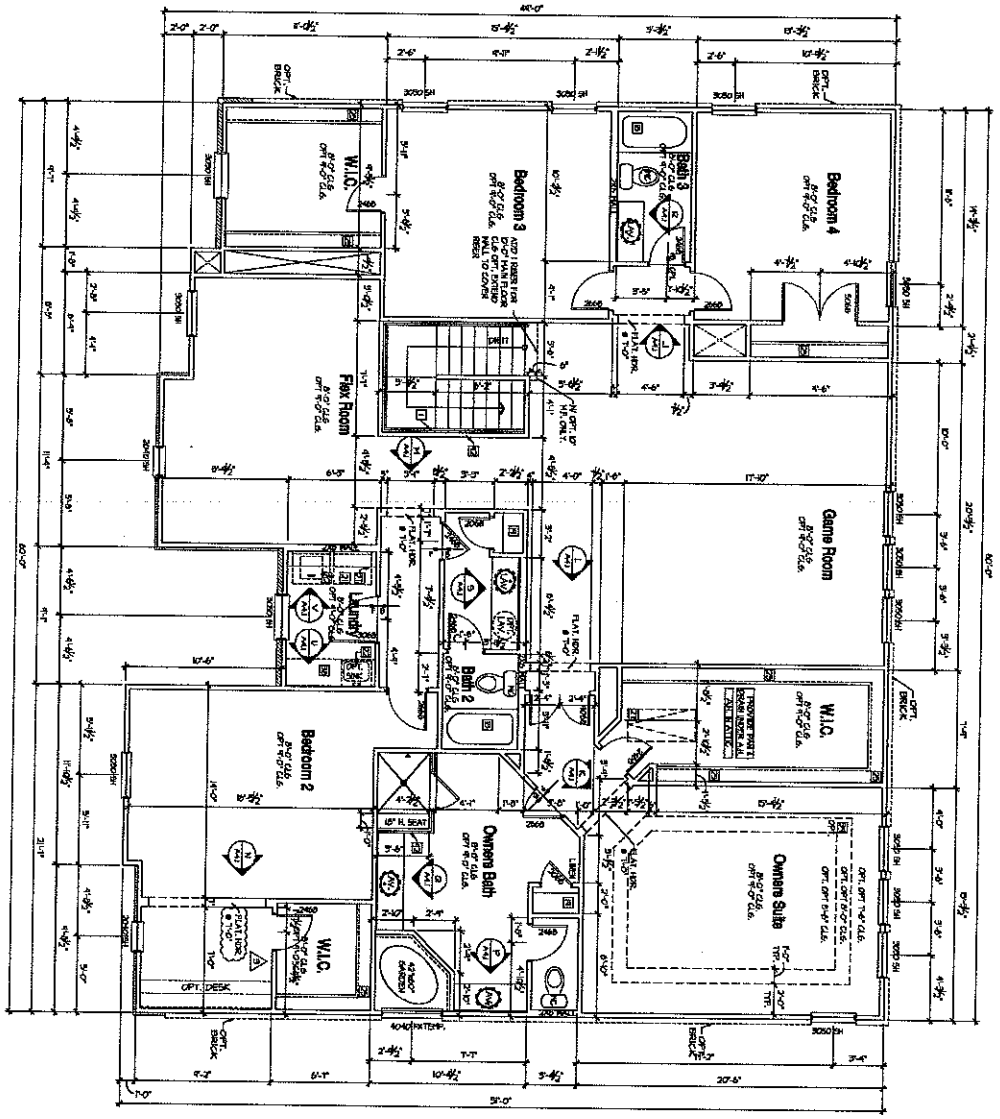
Permit Number	28279	TOTAL FEES:	$ 77.25

Acknowledgement Of Plans Submittal ONLY!

Date 3-23-15

APPROVED MAR 26 2015

Date



Upper Floor Plan - C

0 2 4 8

ALL EXTERIOR HOUSE WALLS MAY BE OPTIONAL 2X6 STUD WALLS - SEE STRUCTURAL PLANS FOR DETAILS.

TYPICAL CONSTRUCTION ASSEMBLIES:

FLOOR PLAN NOTES:

Meritage Homes

5400 Trinity Road
Suite 107
Raleigh,
North Carolina 27607
919-322-2265 Phone

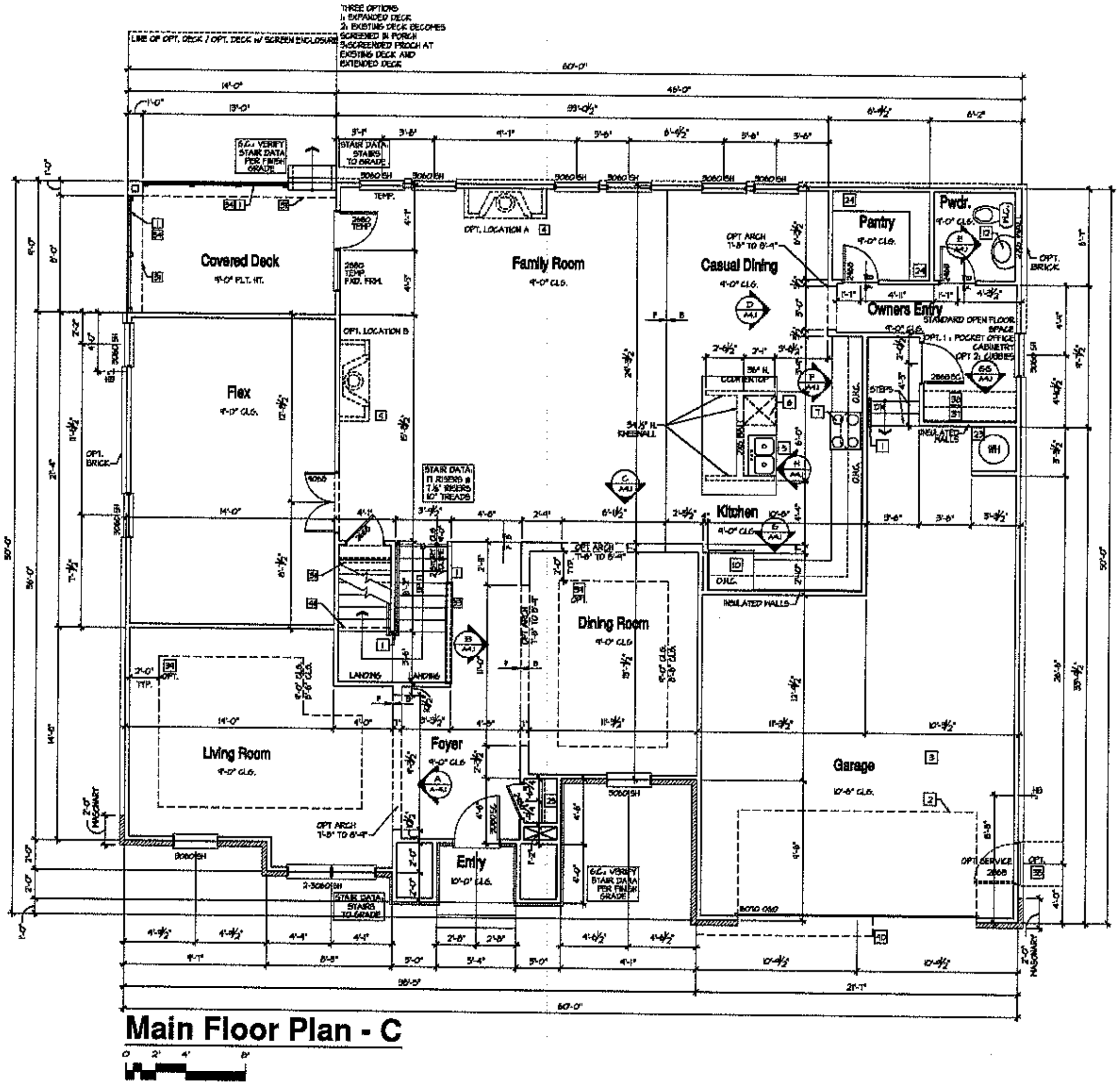
ISSUE DATE: 01/17/2014

REVISIONS

BSB DESIGN

Plan 4719
A2.2C

Acknowledgement Of
Plans Submittal ONLY!
Date 3-23-15
APPROVED MAR 2 6 2015
Date



Main Floor Plan - C

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 ON GRADE FLOOR CONSTRUCTION:
4" CONCRETE SLAB, EXCEPT AS SPECIFIED BY SOIL REPORT, AND STRUCTURAL ENGINEER. INCLUDE VAPOR BARRIER PER SECTION IV, C, 5, a.
D. WINDOWS:
A. ALL WINDOWS 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 (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. (5)
F. HVAC:
PROVIDE BACK DRAFT DAMPERS @ DRYER VENT, HOOD VENT, & EXHAUST FANS.
G. STONE SIDING:
INSTALL PER LOCAL CODE.
H. DIMENSIONS ARE TO THE FACE OF STUD, U.N.O.
L. ALL EXTERIOR DIMENSIONS ARE TO FACE OF STUDS UNLESS OTHERWISE NOTED.
M. ALL ANGLED PARTITIONS ARE 45 DEGREES UNLESS OTHERWISE NOTED.
N. BRICK SIDING:
INSTALL PER LOCAL CODE. (5)

FLOOR PLAN NOTES:

(NOTE_FLOOR)

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/HANDRAILS 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 21" TO TOP OF DECKING
16. 60" X 60" CORNER TUB
17. 30" X 60" TUB/SHOWER
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 PER BUILDER SPECS.
25. ROD AND SHELF PER BUILDER SPECS.
26. ATTIC ACCESS (22 1/2"x32" 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, 36" A.F.F. (U.N.O.) W/ MDF CAP.
31. SOFFIT, REFER TO EXTERIOR ELEVATIONS FOR HEIGHTS & ARCHITECTURAL DETAILS FOR FINISH.
32. PLANT SHELF, SEE EXTERIOR ELEVATIONS.
33. HALF WALL W/ WOOD CAP OR OPTIONAL LOW WALL WITH 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 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. ART NICHE
45. HORIZONTAL LAUNDRY CHUTE
46. LOW WALL +24" A.F.F.
47. GYPSUM BOARD ARCH @ 8'-0" TO 8'-6"
48. LOW WALL 32½" A.F.F.
49. NO HARD LATCH OR LOCKING KNOB

SQUARE FOOTAGES	
"C"	
MAIN FLOOR	2042
UPPER FLOOR	2113
SUBTOTAL	4155
FINISHED BASEMENT	1357
UNFINISHED BASEMENT	683
GARAGE	611
PORCH	45
BACK COVERED PORCH	126
TOTAL	[illegible]

ISSUE DATE: 01/17/2014

REVISIONS

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

Meritage Homes

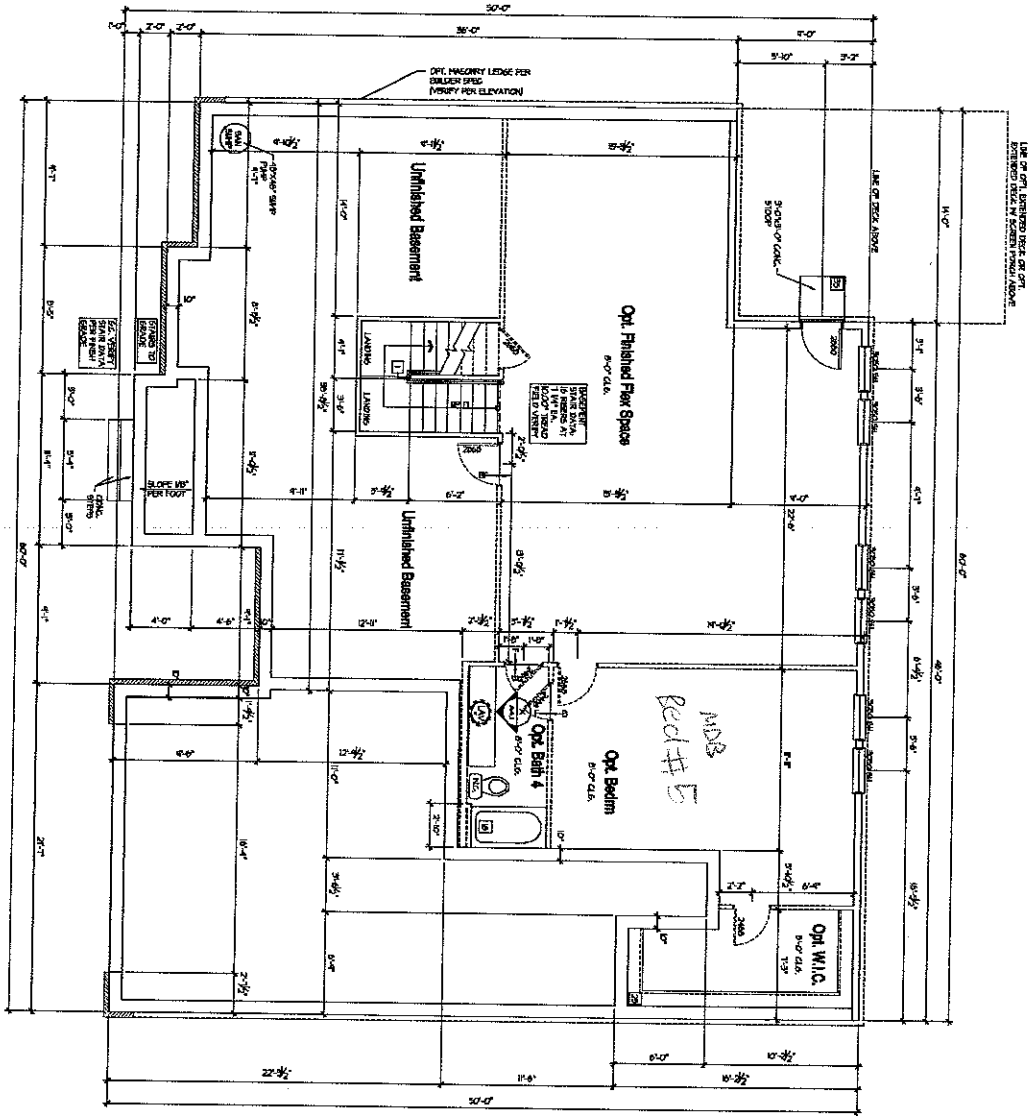
Meritage Homes

BSB DESIGN
www.bsbdesign.com
4601 Westown Parkway, Suite 200
West Des Moines, Iowa 50266
515 278 5620

MAIN FLOOR PLAN - C

Plan 4719
A2.1C

Acknowledgement Of
Plans Submittal ONLY!
Date 3-23-15
APPROVED MAR 26 2015



Optional Walkout Basement - C

0 2' 4' 8'

TYPICAL CONSTRUCTION ASSEMBLIES:

A. TYPICAL ROOF CONSTRUCTION
ASPHALT ROOF SHINGLES
ROOF SHEATHING
ROOF TRUSSES @ 24" O.C. (SEE ROOF FRAMING PLAN)
B. TYPICAL FLOOR CONSTRUCTION
FINISH FLOORING (SEE FLOOR PLAN)
¾" T&G SUBFLOOR (GLUED & SCREWED)
FLOOR TRUSSES OR I-JOISTS @ 16" O.C. (SEE FLOOR PLAN/FRAMING)
C. TYPICAL EXTERIOR WALL CONSTRUCTION
SIDING AS SPECIFIED BY BSB DESIGN
½" EXTERIOR GRADE SHEATHING
2"x6" STUDS @ 16" O.C.
R-19 BATT INSULATION
½" GYPSUM BOARD
VAPOR BARRIER
D. TYPICAL INTERIOR WALL CONSTRUCTION
½" GYPSUM BOARD
2"x4" STUDS @ 16" O.C.
½" GYPSUM BOARD
E. TYPICAL FOUNDATION CONSTRUCTION
CONCRETE FOOTING
CONCRETE FOUNDATION WALL
DAMPPROOFING
PERIMETER DRAINAGE

FLOOR PLAN NOTES:

REFER TO THE FOLLOWING KEYNOTES REFERENCED ON THE SYMBOLS AS SHOWN ON PLANS.

1. 9'-0" CEILING / GARAGE FLOOR 8'-1" PER FOOT
2. SLOPE GARAGE FLOOR 1/8" PER FOOT
3. 16'-0" WIDE GARAGE DOOR OPENING
4. INSTALL 2"x6" EXTERIOR WALL FOR SHOWER
5. INSTALL FIBERGLASS SHOWER
6. 42" X 60" TUB OR SHOWER
7. 60" X 60" SHOWER
8. 60" X 60" CORNER TUB
9. 60" X 60" SHOWER
10. LINEN SHELVING PER BUILDER SPECS
11. RANGE
12. OVEN
13. REFRIGERATOR SPACE
14. DISHWASHER
15. FUTURE SINK
16. SHOWER DOOR (AS NOTED)
17. 42" X 60" TUB OR SHOWER
18. 60" X 60" TUB OR SHOWER OR CHANGE TO 42" X 60" TUB OR SHOWER
19. 60" X 60" SHOWER
20. LINEN SHELVING PER BUILDER SPECS)
21. MIRROR TOP
22. OPTIONAL LAUNDRY SINK
23. PROVIDE NON-COMBUSTIBLE PLATFORM FOR WATER HEATER
24. 5 SHELVES PER BUILDER SPECS
25. 2 SHELVES PER BUILDER SPECS
26. ATTIC ACCESS (SEE FLOOR PLAN)
27. ATTIC ACCESS (2'0"x24" (12") OPENING)
28. 5/8" GYPSUM BOARD CEILING @ 9'-0" AT 1 STORY
29. 5/8" GYPSUM BOARD CEILING @ 8'-1" AT 1 STORY
30. 5/8" GYPSUM BOARD LOW WALL 36" A.F.F. (MAX)
31. NOTE: REFER TO EXTERIOR ELEVATIONS FOR HEIGHTS + ARCHITECTURAL DETAILS FOR
32. PLANT SHELF AT EXTERIOR ELEVATION
33. HALF WALL W WOOD CAP OR OPTIONAL LOW
34. PORCH RAIL (SEE ELEVATION)
35. 36"X36" CONCRETE STOOP
36. OPTIONAL UPPER CABINETS
37. OPTIONAL RECESSED CEILING @ 8'-0" FOR BUILDER SPECIFIED
38. LINE OF FRAMING ABOVE
39. 2X6 LOW WALL @ 42" A.F.F.
40. 2X6 LOW WALL @ 42" A.F.F.
41. 2X6 LOW WALL @ 42" A.F.F.
42. HORIZONTAL LAMINATE CASTE
43. LOW WALL CAP A.F.F.
44. LOW WALL CAP A.F.F.
45. LOW WALL 2'-0" A.F.F. @ 8'-0" TO 9'-0"
46. NO HARD LATCH OR LOCKING DOOR

Meritage Homes

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

BSB DESIGN

ISSUE DATE: 01/17/2014
REVISIONS

Plan 4719
A0.1C