RECEIVED JUL 1 1 2014
Paid $350.00 Statesville 10-22-13

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

#181588

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:
Place an (X) beside whichever is submitted if applicable
( ) Survey Plat, scaled no more than 1 inch = 60 feet
( ) 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 28217 Phone: 7043096577

Owner Name: " Address: " Phone: 7046588616

Property Information:

Street Address: 119 Leaning Tower Ln

Subdivision Name: Bells Crossing Section/Phase: 2 Lot Number: 46

Driving Directions: 150 W, R onto Perth Rd, L into Bells Crossing, R onto N San Agustine Dr, L onto Leaning Tower, 4th lot on 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: 4
Maximum Number of Occupants: 8
( ) 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: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

7-11-14
DATE

IREDELL COUNTY HEALTH DEPARTMENT

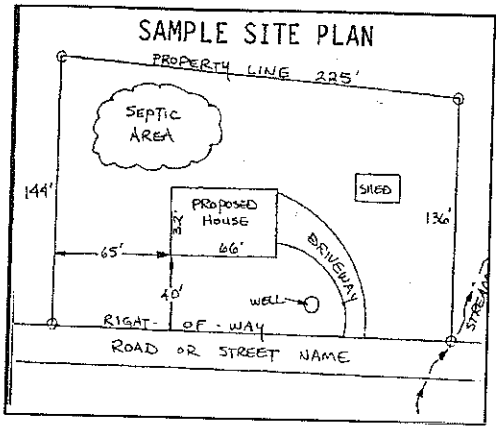
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. ***INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!***

Place an (X) beside each item as you complete the site plan:

- (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)

7-1-14

DATE

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)
1	YELLOW	2.3	31 ✓
2	BLUE	2.4	30
3	ORANGE	3.0	30 ✓
4	YELLOW	3.2	29 ✓
5	BLUE	3.7	29
6	RED	4.1	29 ✓
7	YELLOW	12.7	67 (NOT USED)
8	BLUE	13.0	68 (NOT USED)
9	ORANGE	14.2	69 ✓
10	PINK	16.3	68 ✓
11	RED	18.7	65
12	YELLOW	20.8	65 ✓
13	BLUE	22.5	62
14	ORANGE	24.1	54 ✓
15	PINK	26.2	53
16	YELLOW	28.1	47 ✓
17	BLUE	29.7	37
18	RED	31.4	34 ✓
19	ORANGE	33.5	32 (NOT USED)

REPAIR LPP/PPBES .3

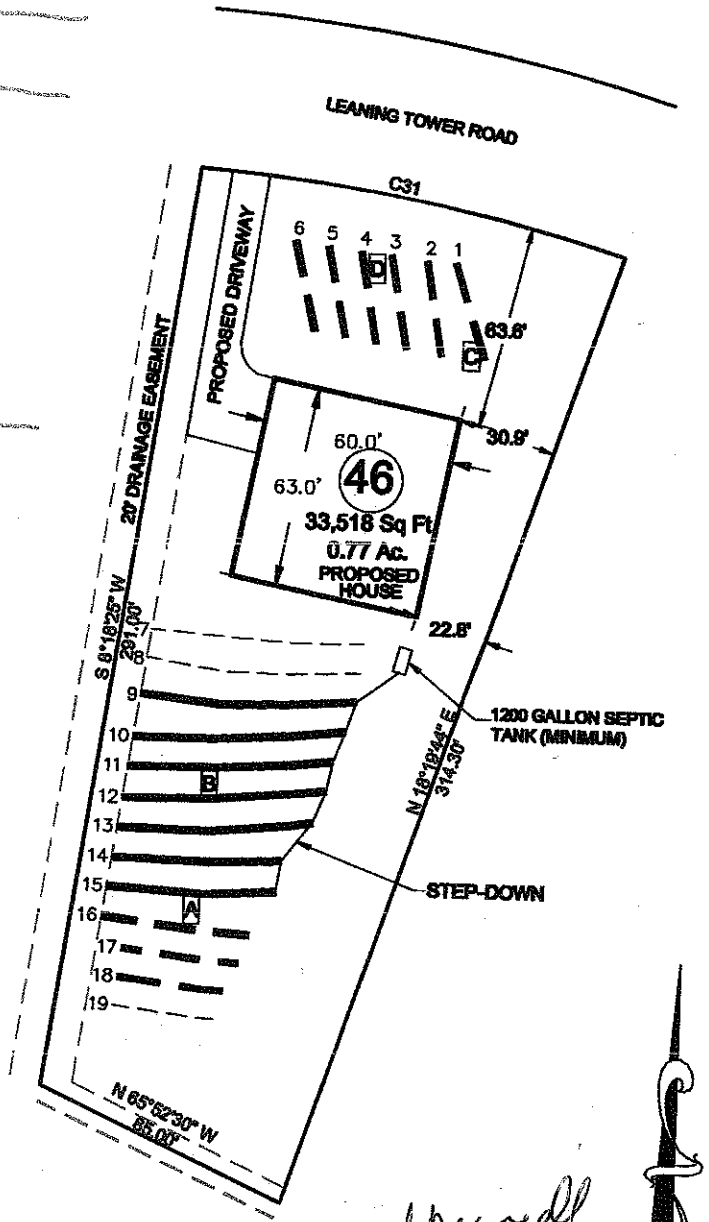
LOT 46 BELLS CROSSING SUBDIVISION

4-BEDROOM ACCEPTED STATUS GRAVITY SYSTEM
LINES 9-15 TOTAL 436 LINEAR FEET
EZFLOW OR CHAMBER
LTAR 0.3
25% REDUCTION
36" TRENCH DEPTH MAX

4-BEDROOM LPP FED PANEL BLOCK REPAIR
LINES 1-6 AND 16-18 296 TOTAL LINEAR FEET
LTAR 0.3
50% REDUCTION
36" TRENCH DEPTH MAX

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

SOIL PROFILES AND ANALYSIS PROVIDED BY
CENTRAL CAROLINA SOIL CONSULTING PLLC



PRIMARY SYSTEM ——————

REPAIR SYSTEM — — — —

REPAIR LINES (NOT USED) - - - - - -

PIT OR AUGER BORING 1

0 30 60

SCALE:
1" = 60 ft.

approved 7-23-14

Bateman Civil Survey Company
Engineers • Surveyors • Planners
300 N. Main Street, Holly Springs, NC 27540 Ph: 919.577.1080 Fax: 919.577.1091
www.batemancivilsurvey.com mb@batemancivilsurvey.com
NCBELS Firm No. C-3378

MeritageHomes

LOT 46
BELLS CROSSING SUBDIVISION
MOORESVILLE, NC
IREDELL COUNTY

DATE: 6/23/14 DRAWN BY: MB CHECKED BY: TMB

Sheet: 1 of 1
Property ID:
Lot #: 46
File #:
AppID:

CCSC SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Meritage Homes
Address: 11605 N. Community House Rd Charlotte NC 28277
Proposed Facility: Single Family Design Flow (.1949) 480 gpd
Location of Site: Bells Crossing
Applicant: Same
Date Evaluated: 8/14/2012
Property Size: 0.77 ac
Property Recorded: 2013
Water Supply: [x] Public [ ] Individual [ ] Well [ ] Spring [ ] Other
Evaluation Method: [ ] Auger Boring [x] Pit [ ] Cut
Type of Wastewater: [x] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon	Depth (IN.)	SOIL MORPHOLOGY .1941 Structure/ Texture	.1941 Consistence Mineralogy	.5 PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
A	TS 10%	AE	0-12"	Gr SL	VFR NS NP	7.5YR 4/4				
		BT1	12"-22"	SBK SCL	FR SS SD	7.5YR 4/6				
		BT2	22-46"	SBK Clay	FI SS SP	5YR 4/6				PS 0.33 S 0.3
B		AE	0-6"	Gr SL	VFR NS NP	7.5YR 4/4				
		BT	6-25"	SBK Clay	FI SS SP	10R 4/8				PS 0.3
		BC	25-46"	MIX SBK CL	FR SS SP	→5YR 5/8 10YR 4/8 10% 2.5YR 4/6 10%				PS 0.33
		C	46-56"	Mass Loam	VFR NS NP	→ 7.5YR 5/8		S		0.4
C	R 2%	A	0-2	Gr SL	VFR NS NP	10YR 3/2				
		BT1	2-40"	SBK Clay	FI SS SP	2.5YR 4/8				PS 0.3
		BT2	40-53"	SBK Clay	FI SS SP	→2.5YR 4/8 7.5YR 5/8 5%				S 0.3
D	R%	A	0-2"	Gr SL	VFR NS NP	10YR 3/2				
	✓	BT1	2-18"	SBK Clay	FR SS SP	5YR 4/6				
		BT2	18"-57"	SBK Clay	FI SS SP	2.5YR 4/8 7.5YR 5/8 10%				PS 0.3 PS 0.3

Description	Initial System	Repair System
Available Space (.1945)	Yes	Yes
System Type(s)	Accepted	Panel Block
Site LTAR	0.3	0.3

Other Factors (.1946):
Soil Evaluation By: J H, MB
Others Present:
Site Classification (.1948):
Site Evaluation By:
Others Present:

approved
7-23-14

LICENSED SOIL SCIENTIST
JASON M. HAL
1248
STATE OF NORTH CAROLINA

IREDELL COUNTY

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

APPLICATION NUMBER
181588
Issue Date: 11/13/2013

10f46

ZONING PERMIT

Residential

Parcel Number	Street Address	Jurisdiction
4639955462.000	119 LEANING TOWER DRIVE, MOORESVILLE, NC 28117	MOORESVILLE

Owner Information	Applicant Information
Owner: MERITAGE HOMES OF NC INC	Applicant: MERITAGE HOMES OF NC I
Address: 17851 N 85TH ST SCOTTSDALE, AZ 85255	Address: 17851 N 85TH ST SCOTTSDALE, AZ 85255
Phone:	Phone:

Use Requested	Zone Code
SINGLE FAMILY HOUSE	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
39.150	35.00	35.00	15.00	15.00	PACL	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	590	TOTAL FEES:	$

RECEIVED AUG - 7 2014

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM*

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

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 Nations Ford Rd Ste 250 Charlotte NC 28217 **Phone:** 7043096577

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

Property Information:

Street Address: 119 Leeshy Tower Ln

Subdivision Name: Bells Crossing **Section/Phase:** 2 **Lot Number:** 46

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: 4
Maximum Number of Occupants: 8
( ) 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: _____ 8-6-14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEALTH DEPARTMENT

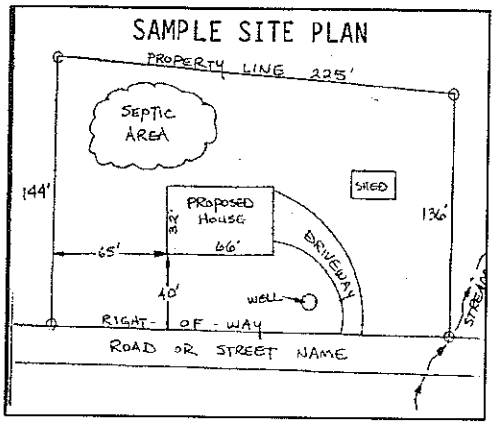
ENVIRONMENTAL HEALTH DIVISION

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: _____ 8-6-14

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

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH (FT)
1	YELLOW	2.3	31
2	BLUE	2.4	30
3	ORANGE	3.0	30
4	YELLOW	3.2	29
5	BLUE	3.7	29
6	RED	4.1	29
7	YELLOW	12.7	67 (NOT USED)
8	BLUE	13.0	68 (NOT USED)
9	ORANGE	14.2	69
10	PINK	16.3	68
11	RED	18.7	65
12	YELLOW	20.8	65
13	BLUE	22.5	62
14	ORANGE	24.1	54
15	PINK	26.2	53
16	YELLOW	28.1	47
17	BLUE	29.7	37
18	RED	31.4	34
19	ORANGE	33.5	32 (NOT USED)

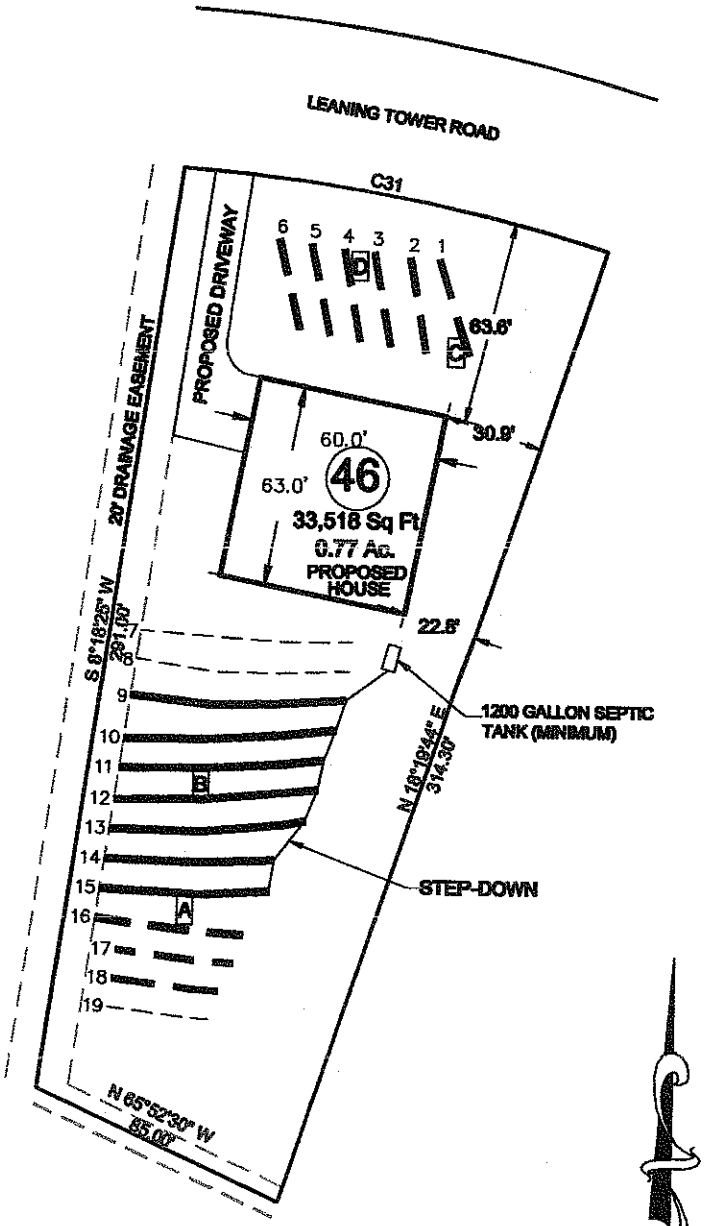
LOT 46 BELLS CROSSING SUBDIVISION

4-BEDROOM ACCEPTED STATUS GRAVITY SYSTEM
LINES 9-15 TOTAL 436 LINEAR FEET
EZFLOW OR CHAMBER
LTAR 0.3
25% REDUCTION
36" TRENCH DEPTH MAX

4-BEDROOM LPP FED PANEL BLOCK REPAIR
LINES 1-6 AND 16-18 296 TOTAL LINEAR FEET
LTAR 0.3
50% REDUCTION
36" TRENCH DEPTH MAX

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

SOIL PROFILES AND ANALYSIS PROVIDED BY
CENTRAL CAROLINA SOIL CONSULTING PLLC



PRIMARY SYSTEM ——————

REPAIR SYSTEM — — — —

REPAIR LINES (NOT USED) — — — — — —

PIT OR AUGER BORING 1

0 3 6

SCALE:
1" = 60 ft.

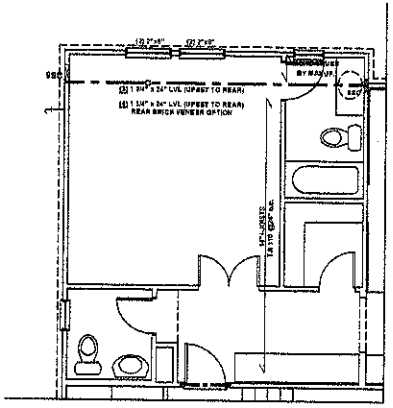
Bateman Civil Survey Company
Engineers • Surveyors • Planners
200 N. Main Street, Holly Springs, NC 27540 Ph: 919.577.9288 Fax: 919.577.1281
www.batemancivilsurvey.com bill@batemancivilsurvey.com
NCBELS Firm No. C-2259

Meritage Homes

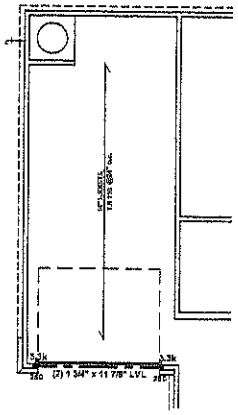
LOT 46
BELLS CROSSING SUBDIVISION
MOORESVILLE, NC
IREDELL COUNTY

DATE: 6/23/14 DRAWN BY MB CHECKED BY: TMB

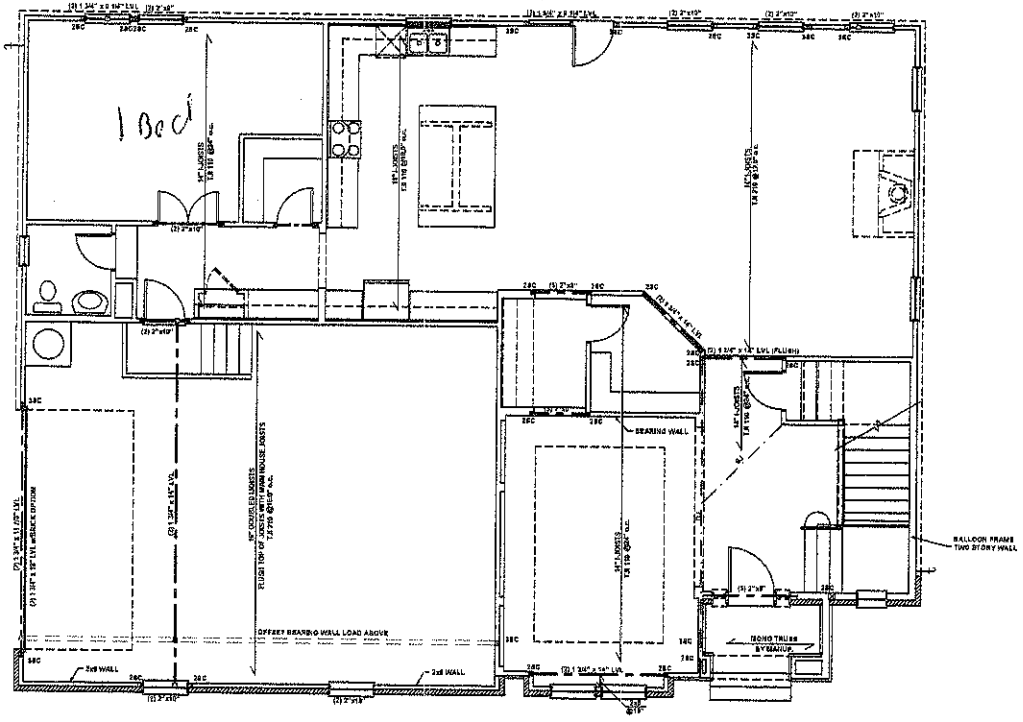
Acknowledgement Of
Plans Submittal ONLY!
[signature] Date 8-6-14
[signature] Date 8/8/14



OPTIONAL ~~BEDROOM 6~~
SCALE: 1/8" = 1'-0"



3rd CAR OPTION
SCALE: 1/8" = 1'-0"



MAIN FLOOR CEILING FRAMING PLAN - C - 2 CAR SIDE ENTRY
SCALE: 1/8" = 1'-0"

ISSUE DATE: 04-15-2014
REVISIONS

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

Meritage Homes

Meritage Homes

P-0561
JDS CONSULTING & DESIGN, PLLC
8609 "D" JERSEY CT
RALEIGH, NC 27617
919.868.1078
INFO@JDSDESIGNHOUSE.COM
WWW.JDSDESIGNHOUSE.COM
PROJECT #: WT3140092

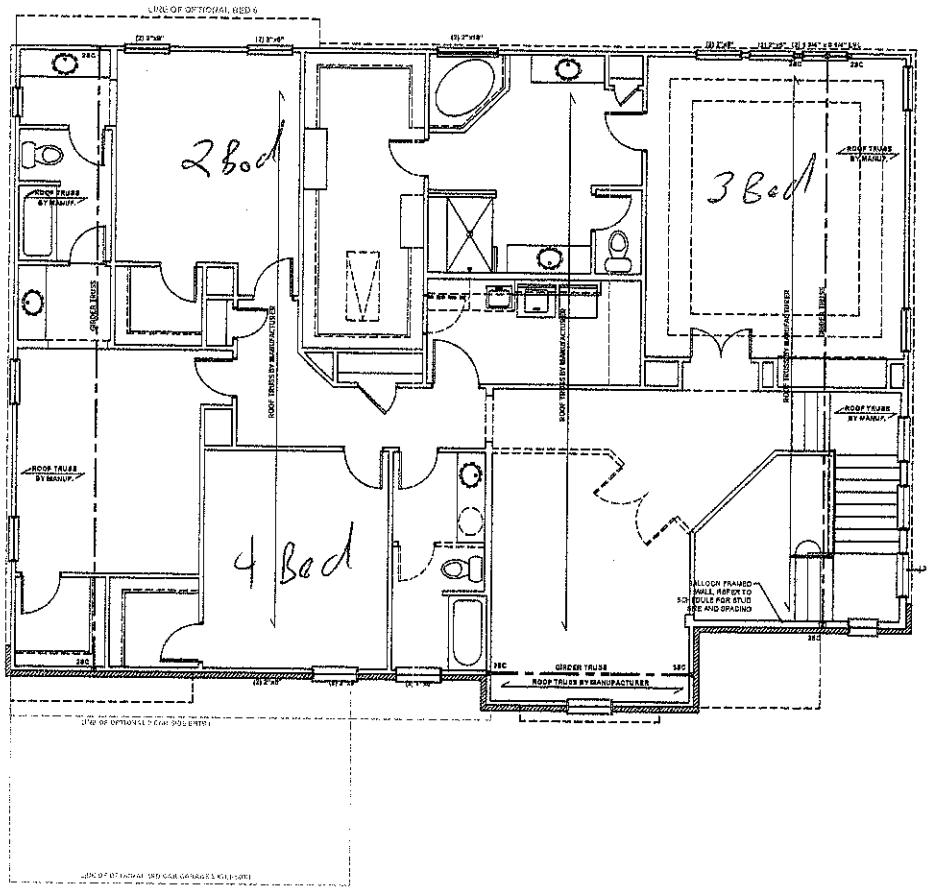
JOB NO: PROJ MGR:
DRAWN: CHECKED:
1S" FLR CEILING FRAMING - 2 CAR SIDE ELEVATION C

260 - 4062
S1.2C

Acknowledgement Of
Plans Submittal ONLY!

Maria Lotan Date 8/8/14

_____ Date _____



SECOND FLOOR CEILING FRAMING - C

SCALE: 1/8" = 1'-0"

ISSUE DATE: 08-10-2014
REVISIONS

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

Meritage Homes

Meritage Homes

P-0961

JDS CONSULTING & DESIGN, PLLC
5400 'D' TRINITY CT
RALEIGH, NC 27607
919.322.2285
INFO@JDSDESIGNONLINE.COM
WWW.JDSDESIGNONLINE.COM

PROJECT #: WTS140092

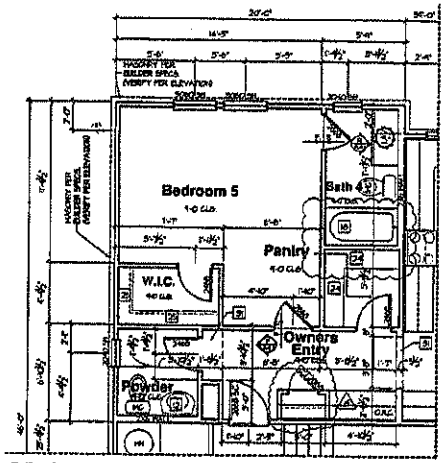
JOB NO. | PAGE NO.
DRAWN | CHECKED

2ND FLOOR CEILING FRAMING
ELEVATION C

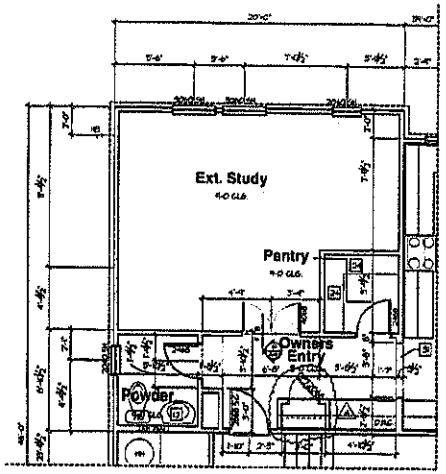
260 - 4062

S2.0C

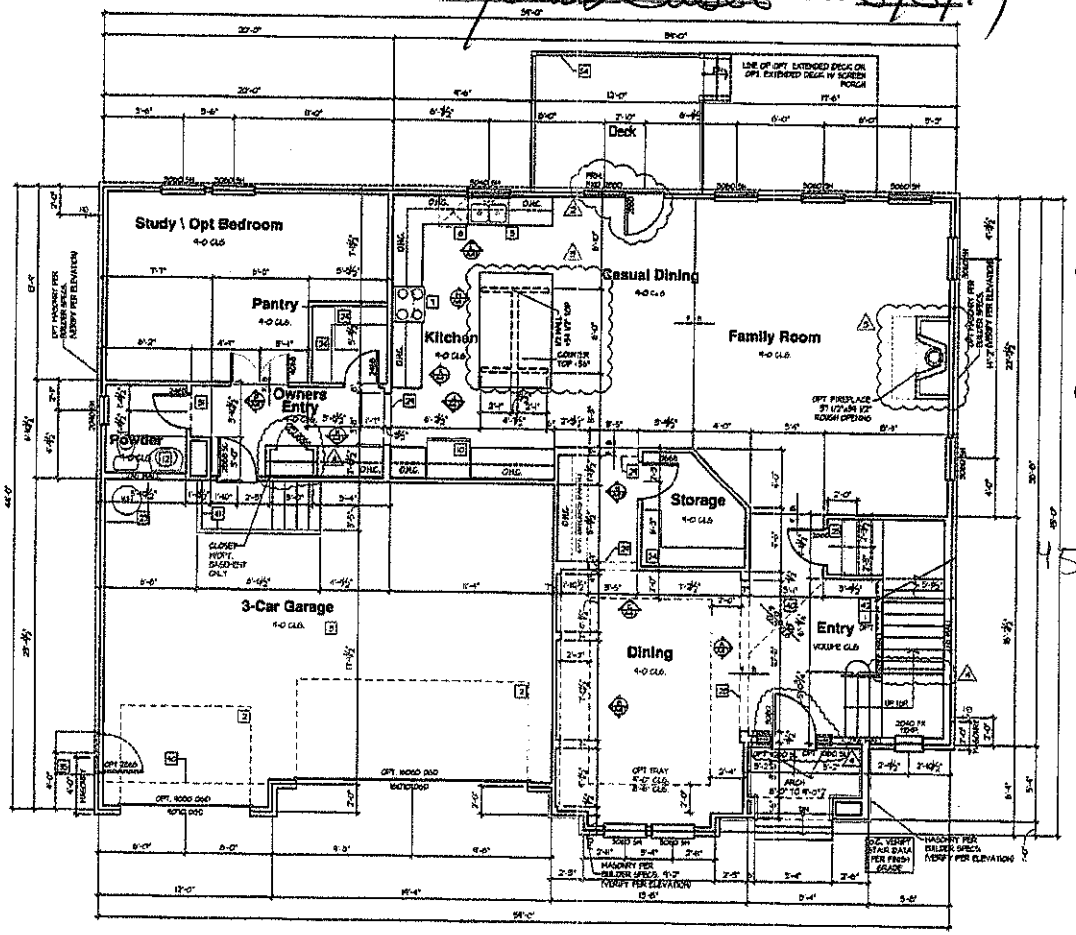
Acknowledgement Of
Plans Submittal ONLY!
Date 8-7-14
Date 8/8/14



Main Floor - Opt Bedroom 5



Main Floor - Opt. Ext. Study



Main Floor Plan - C

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

SQUARE FOOTAGES

MAIN FLOOR	1791
UPPER FLOOR	2776
PARTIAL	1010
BASEMENT	0
GARAGE	644
PORCH	44
COVERED PORCH	0
OPT SUNROOM	0
OPT COVERED PORCH	0
TOTAL	6265

FLOOR PLAN NOTES:

ARCHITECTURAL

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. TUB
15. 42" X 60" TUB 21" TO TOP OF DECKING
16. 60" X 60" SHOWER - TYP.
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 8" ABOVE GARAGE FLOOR FOR WATER HEATER
24. 3 SHELVES PER BUILDER SPECS.
25. LINEN SHELVING PER BUILDER SPECS.
26. ATTIC ACCESS (22 1/2"x22" R.O.)
27. ATTIC ACCESS W/ STAIRS (22 1/2"x54 1/2")
28. FURNACE ROOM (MIN. 30" WIDE) W/ SOLID WOOD DOOR & 5'-0" MIN. FLOOR 1 1/2" AT UPPER FLOOR R.O.
29. GYPSUM BOARD ARCH @ 1'-3" TO 5'-0"
30. 1/2" GYPSUM BOARD LOH HALL, 84" A.F.F. (SOLID) W/ DOOR CAP
31. SOFFIT, REFER TO EXTERIOR ELEVATIONS FOR FINISH.
32. REFER TO ARCHITECTURAL DETAILS FOR FINISH.
33. PLANT SHELF, SEE EXTERIOR ELEVATIONS.
34. HALF WALL W/ WOOD CAP OR OPTIONAL 1/2" WALL W/ RAILING ABOVE.
35. PORCH RAIL SEE ELEVATION.
36. 36 "LOW" CONCRETE STOOP.
37. 4x8 BEAM.
38. OPTIONAL UPPER CABINETS.
39. OPTIONAL CABINETS.
40. OPTIONAL COFFERED CEILING @ 8'-6" PER BUILDER SPEC.
41. LINE OF FRAMING ABOVE.
42. LINE OF FRAMING WALL BELOW.
43. 2X4 LOH WALL 42" A.F.F.
44. 2X6 LOH WALL 42" A.F.F.
45. ART NICHE
46. HORIZONTAL LAUNDRY CHUTE
47. LOH WALL +24" A.F.F.
48. GYPSUM BOARD ARCH @ 8'-0" TO 8'-6"
49. LOH WALL 30" A.F.F.
50. 90 HARD LATCH OR LOCKING KNOB

TYPICAL CONSTRUCTION ASSEMBLIES:

A. TYPICAL ROOF CONSTRUCTION:
ASPHALT ROOF SHINGLES

B. TYPICAL WOOD 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 R506.2.3.

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 SAWING OPENING OF 5.7 SQ. FT. WITH MIN. DIMENSION OF 24" IN WIDTH AND 20" IN WIDTH. SILL HEIGHT NOT GREATER THAN 44" ABOVE FLOOR.
C. TYPICAL WINDOW HEAD HEIGHT
7'-0" A.F.F. @ 8'-1 1/2" PLATE HEIGHT (LND.)
8'-0" A.F.F. @ 9'-1 1/2" PLATE HEIGHT (LND.)

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

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

G. STORM SEWER:
INSTALL PER LOCAL CODE.

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

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

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

N. FENCE NOTES:
INSTALL PER LOCAL CODE.

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 Windward Parkway, Suite 200
West Des Moines, Iowa 50266
515 223 3220

JOB NO: 259-4062
DRAWN: JF
CHECKED: JF

MAIN FLOOR PLAN - C

259-4062
A2.1C

County Environmental Health

applic# 181588

Merritage Homes

Checklist for Conventional Septic System Installation

Site Location: 119 Learning Tower Lane Bells Crown File # sect 2 lot 46

System Location

Initials RF ; Date 11/12/14

Required Setbacks Met:

Public Water Supply: 100' N/A
Private Well : 100' (50) N/A
Water Line: 10' >10

SA Waters: 100' MHWL N/A
Surface Waters: 50' N/A
Drainage Feature: 10', 15', 25' N/A

Property Lines: 5' or 10' 10'
House Foundation: 5' 9'
Other Septic System: 20' >20'

Located in Permitted Area Y ; Not in Driveway Area ; Repair Area Reserved

Tank Information

Initials RF ; Date 11/12/14

Tank Size: 1000 gallons ; Tank Date: 7/25/14; Tank Manufacturer # STB 760; Baffle ✓

Sanitary Tee Y; Filter ; Gas Vent Clear Y ; Visible Defects N; Risers if Needed
polylok

System Information

Initials RF ; Date 11/12/14

PVC Plumbing with Sufficient Grade (Tank- D-box Y D-box – drainlines)

Piping Materials Approved Y; Equal Distribution to All Drainlines no serial

No. Drainlines: 7 ; Length Each: ____ Ft ; Width Each: 3' Ft ; Proper Grade in Drainline yes

Proper Trench Separation Y; Trench Bottom Depth 24"-30" Met Y ; Rock Type Approved NA quick 4 chamber

Rock Depth of 12 inches NA Filter Fabric Used N/A 6 Inch Soil Cover Available Yes

Other Information Carolina Pipe Cleaning (Shakkins)

Special Conditions Required on Permit Met: Y/ N / Not Applicable

Comments: see "as built" sketch on back