IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 223997

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

PIN # 4639-96-5960

APPLICANT: Caleb Hill APPLICANT ADDRESS: 2004 Captains Way Denver, NC 28037

SITE ADDRESS: 129 Honeysuckle Creek Loop Mooresville, NC 28117 PHONE: 704-302-6676 ALT. PHONE:

SITE DIRECTIONS: Perth Rd N from Rt 150 → L on Honeysuckle Creek Loop (2nd Entrance) → Lot on left

SUBDIVISION: Honeysuckle Creek SECTION: LOT # 5 LOT AREA: 0.60 acres DESIGN FLOW: 360 GPD L.T.A.R.: 0.225

Septic Tank 1000 (gal) STB 8-3-16 Date 825
Pump Tank 1000 (gal) PT 7-14-16 Date 302
Pump Make Model Serial #
Nitrification Fields 1 # Lines 4 Linear Ft: 270
Trench Width 24" Max. Trench Bottom Depth 44"-47" [high side] Gravel Depth —

☒ New System ☐ Repair ☐ Expansion System Type: I II III (IV) V VI
System Description: LP-PPBPS (50% Reduction) w/venting
Repair System Description: LP-PPBPS (50% Reduction) w/venting
Maintenance Agreement Required: ☒ YES ☐ NO
☐ GRAVITY ☒ PRESSURE

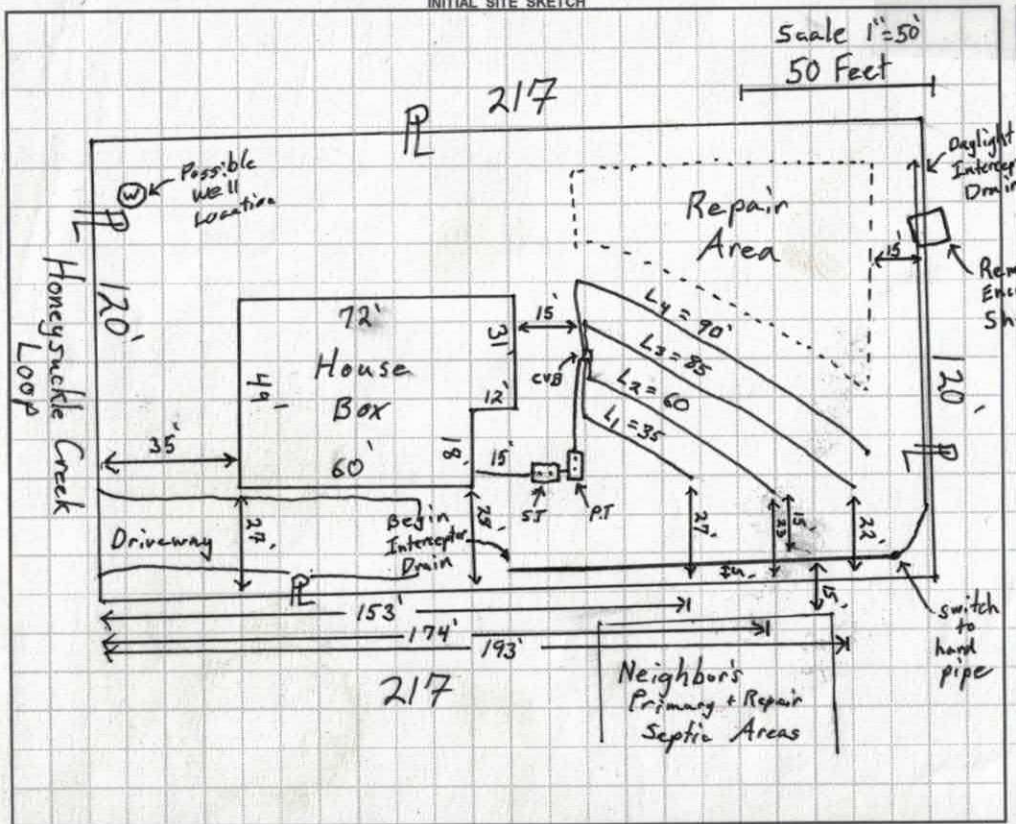
☒ Residence No. Bedrooms 3
☐ Business No. Persons 6
☐ Other No. Employees
☐ Slab ☒ Crawl Space
☐ Basement w/plumbing ☐ Basement w/o plumbing

Water Supply: ☒ Private ☐ Public ☐ Community

Comments / Conditions: Follow all N.C. septic rules. Interceptor drain to extend 40" deep from the ground surface. Deep installation (>36") of panel block requires venting with corresponding instructions from the manufacturer. (704-924-8600).

Strongly recommend setting pump floats/controlls to dose no more than 200 gallons/dose/day. [62 Panels total] Pumping downhill shall require an anti-siphon hole to be installed within the pump line.

INITIAL SITE SKETCH



AS BUILT SKETCH

Filter - Inline Installed B.B 7/12.
Installed w permit
Electrical + Maintenance still needed

10:30

	Date	Initials
Drain Lines Checked	1/12	BB.
Tanks Checked	1/12	BB
Pressure Manifold or Valve Box Checked	1/12	BB
Pressure Head Set	1/12	BB
Electrical Checked Needs Seal & Circuit Breakers Labeled		
Floats Set	1/12	BB.
Alarm Checked	9/18/17	MD
Maintenance Contract Y/N	9/18/17	MD
Comments:		

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: Hill Date: 2-16-17 Installed by: Rowan Septic

IMPROVEMENT PERMIT by: Tom Shuck Date: 2-15-17 OPERATION PERMIT by: Marian Dolan Date: 9/19/17

AUTHORIZATION TO CONSTRUCT by: Tom Shuck Date: 2-23-17 Existing System Inspected by: Date:

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

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

Sheet ___ of ___
PROPERTY ID #: ___
COUNTY: Iredell

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

Lively Lane Reddy

OWNER: Caleb Hill
APPLICATION DATE 12-18-16
ADDRESS: 2004 Captains Way Denver, NC
DATE EVALUATED: 2-2-17
PROPOSED FACILITY: 3 BR House
PROPOSED DESIGN FLOW (.1949): 360 GPD
PROPERTY SIZE: 0.6acre
LOCATION OF SITE: 129 Honeysuckle Creek Loop Mooresville
PROPERTY RECORDED: Yes
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

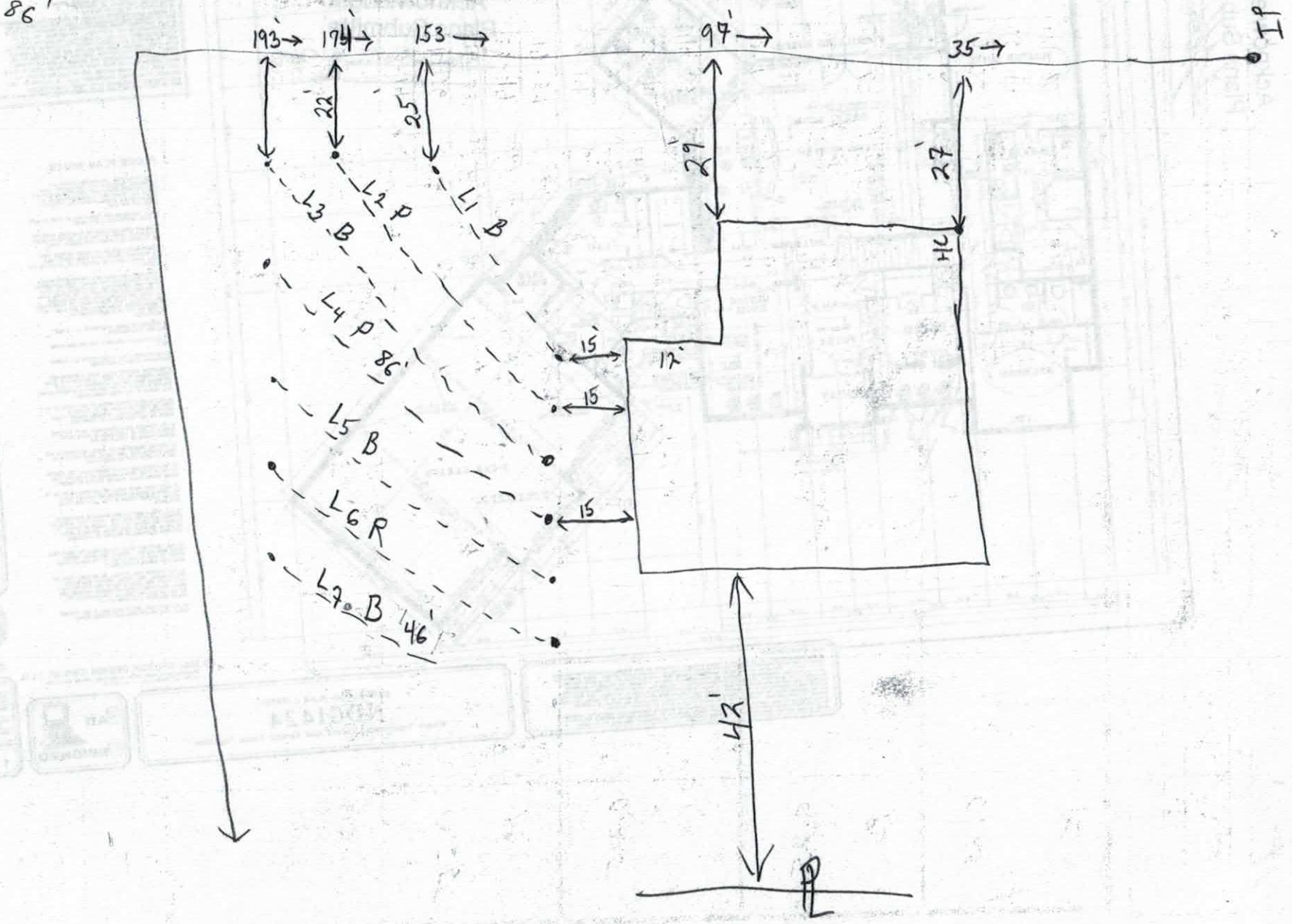
PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LSS 13%	0-14"	mixed loamy clay fill	—	—	54	—	—	0.25 PS
		14-26"	SCL w.w SBK	Sl. Firm, SS, Sp, Smp					
		26-33	Clay Strong ABK/SBK	Sl. Firm SS, Sp, Smp					
		33-47	Clay m+w SBK/ABK	Sl. Firm, SS, Sp, Smp					
		47-54	Clay Loam w. SBK Abundant Saprolite	Sl. Friable, SS, Sp, Smp					
2	LSS 12%	0-14	Mixed loamy/ clay Fill	—	Weak YB 28"-35" Lithochromatic	★TB @ 44"-47"★			0.225 PS
		14-25	SCL v.w. SBK	Sl. Firm, SS, Sp, Smp					
		25-44	Clay w. SBK	Sl. Firm, SS, Sp, Smp					
		44-63	Clay Loam w some Saprolite w. SBK	Sl. Friable, SS, Sp, Smp					
3	U/S → LSS → 12% Repair	0-9	SCL w. SBK	Sl. Friable, SS, Sp Smp	Chroma 2 Gley 2.5Y 6/2 [light brownish gray] End @ 36"	50"+ TB on Repair			0.25 PS
		9-36	Clay w. SBK	Sl. Firm, SS, Sp, Smp					
		36-50	Clay m+w. SBK	Sl. Firm, SS, Sp, Smp					
		50-82"	Clay Loam W. SBK + Saprolite (Abundant)	Friable, SS, Sp, Smp					
4	LSS 12% Repair Distal	0-12	SCL w. SBK	Sl. Friable, SS, Sp, Smp	16-26" Y-B mottles				0.25 PS
		12-26	Clay w. SBK	Sl. Firm, SS, Sp, Smp					
		26-49	Clay w. SBK	Sl. Firm, SS, Sp, Smp					
		49-82"	Clay Loam w. SBK some Saprolite	Friable, SS, Sp, Smp					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	270+	270+
System Type(s)	50% reduction	50% reduction
Site LTAR	0.225	0.25

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Tom Shuck + Kayla Wilson
OTHER(S) PRESENT: ___
★ Interceptor needed + Venting of panels needed (Deep)

2440 1.f.
2440 1.f.

7 total lines



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

Sheet 1 of 2
PROPERTY ID #: 4639965960
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Darrell Seals
APPLICATION DATE: 12-18-16
ADDRESS: 129 Honeysuckle Creek Loop Mooresville, NC 28117
DATE EVALUATED: 12-29-16
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 360gpd
PROPERTY SIZE: .6 AC
LOCATION OF SITE: I-50W, R on Perth Rd, L on Honeysuckle Creek Loop, lot on L
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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	8% LS	0-9	SBK, C	Fr, SS, SP, SEXP	24-29" brown mottles	yellow	—		PS .25 pits needed
		9-20	WSBK CL	1/Fr, SS, SP, SEXP					
		20-29	WABK C	Fr, SS, SP, SEXP					
		29-43	SBK, C	Fr, SS, SP, SEXP					
		43-48	WSBK, CL	Fr, SS, SP, SEXP					
2	5% TS	0-11	SBK SC	Fr, SS, SP, SEXP	17-32 yellow mottles	many brown			PS .2 pits needed
		11-17	SBK C	Fr, SS, SP, SEXP					
		17-32	1SBK C	Fr, SS, SP, SEXP					
		32-48	WSBK^BC CL	Fr, SS, SP, SEXP					
3	7% TS	0-8	WSBK SCL	Fr, SS, SP, SEXP	8-29 yellow brown mottles				PS .2 pits needed
		8-29	SBK C	Fr, SS, SP, SEXP					
		29-48	WSBK^BC CL	Fr, SS, SP, SEXP					
4	LS	0-19	fill?						

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

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Kayla Wilson
OTHER(S) PRESENT:

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL 1955 LTAR*	LPP 1957 LTAR*
CC (Concave Slope)	I	S (Sand)	1.2 - 0.8	0.6 - 0.4
CV (Convex Slope)		LS (Loamy Sand)		
D (Drainage Way)	II	SL (Sandy Loam)	0.8 - 0.6	0.4 - 0.3
DS (Debris Slump)		L (Loam)		
FP (Flood Plain)	III	Si (Silt)	0.6 - 0.3	0.3 - 0.15
FS (Foot Slope)		SiCL (Silty Clay Loam)		
H (Head Slope)		CL (Clay Loam)		
L (Linear Slope)		SCL (Sandy Clay Loam)		
N (Nose Slope)		SiL (Silt Loam)		
R (Ridge)	IV	SC (Sandy Clay)	0.4 - 0.1	0.2 - 0.05
S (Shoulder Slope)		SiC (Silty Clay)		
T (Terrace)		C (Clay)		
		O (Organic)	None	None

MINERALOGY/ CONSISTENCE
NEXP (Non-expansive)
SEXP (Slightly Expansive)
EXP (Expansive)

STRUCTURE
G (Single Grain)
M (Massive)
CR (Crumb)
GR (Granular)
SBK (Subangular Blocky)
ABK (Angular Blocky)
PL (Platy)
PR (Prismatic)

MOIST
VFR (Very Friable)
FR (Friable)
FI (Firm)
VFI (Very Firm v. Very Sticky)
EFI (Extremely Firm)

WET
NS (Non-sticky)
SS (Slightly Sticky)
S (Sticky)
VS (Very Sticky)
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)

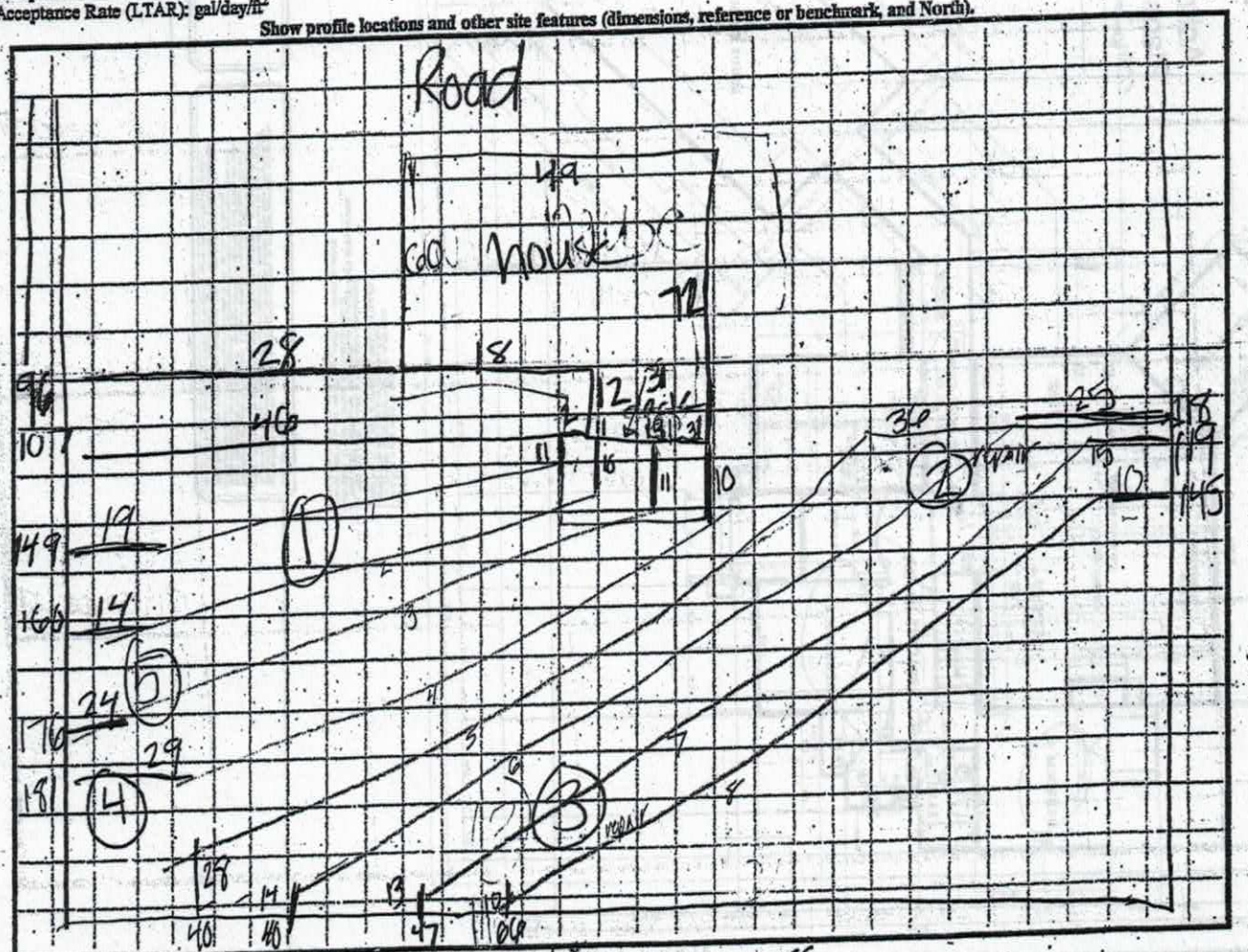
SOIL WETNESS — Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation

CLASSIFICATION — S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft²

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



ENR (######)
eview (#####)

L1: 40
L2: 60
L3: 71
L5: 80
L6: 97
L7: 99

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

Sheet 2 of 2
PROPERTY ID #: 4639965960
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

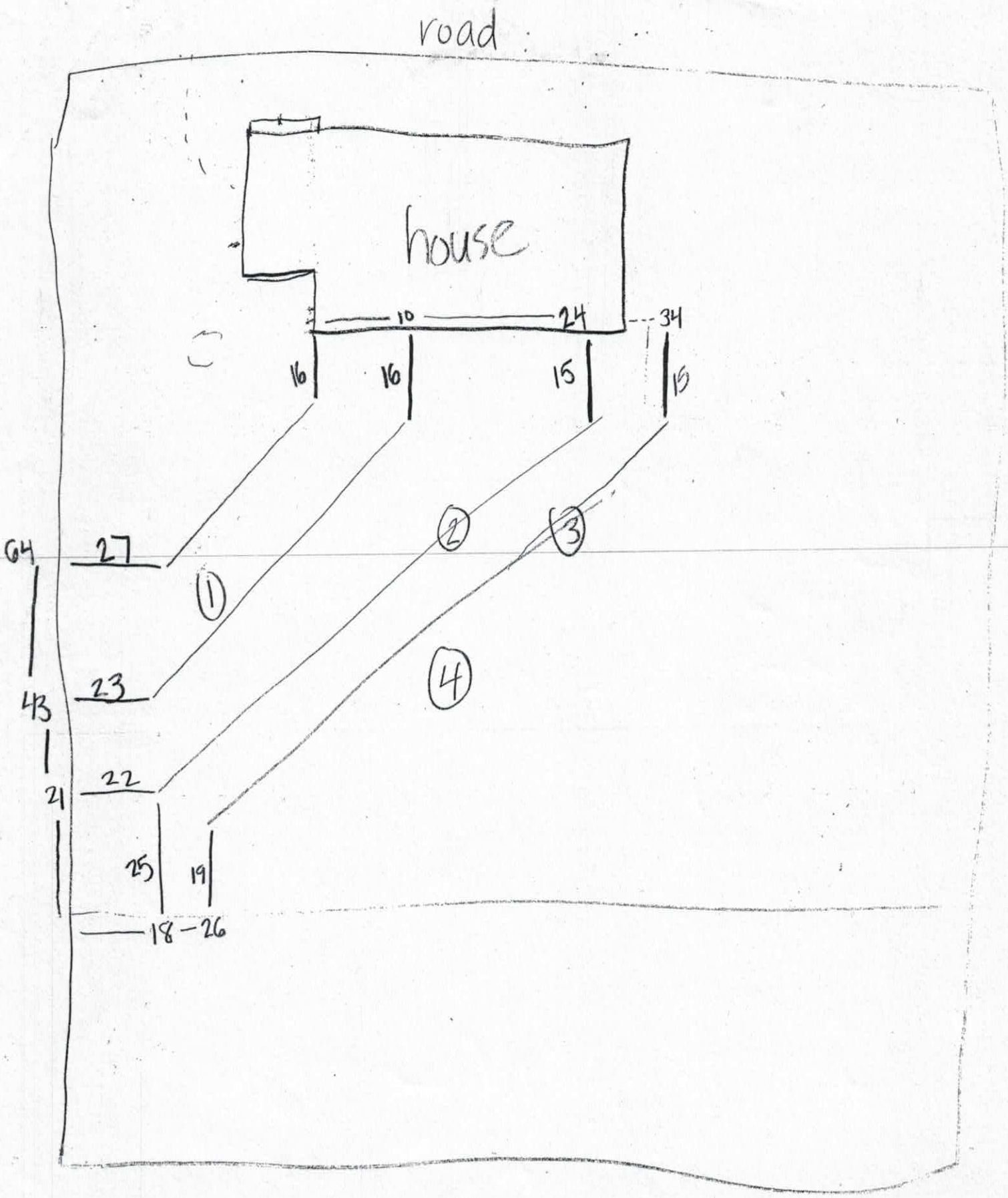
OWNER: _____ APPLICATION DATE _____
ADDRESS: _____ DATE EVALUATE _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: _____ PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☐ 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	11% SS	0-15	SL, GR	VFr, NS, NP, SE, SP					PS .25
		15-24	SCL, WSBK	Fr, SS, SP, SE, SP					
		24-42	SBK, C	Fr, SS, SP, SE, SP					
		42-48	WSBK RC CL	Fr, SS, SP, SE, SP					
2									
3									
4									

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____



L:35 L3.85

L2:60 L4:92

Rec'd 2/17/17

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED - APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS)

1. APPLICATION FOR: ✓ Improvement Permit ✓ Authorization To Construct ___ Existing System Inspection

****

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application

The following optional attachments may also be submitted: ___ Survey Plat, Scaled no more than 1 Inch = 60 Feet

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

****

3. Applicant Information:

CALEB HILL	2004 CAPTAINS WAY DENVER NC 28037	704.302.6676	
Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
DARRELL & CARLOTTA SEALS ~~ROBERT BOWLER~~	135 HONEYSUCKLE CREEK LP		
Owner Name	Mailing Address	Home Phone #	Alternate Phone #

****

4. Property Information:

129 HONEYSUCKLE CREEK LP	HONEYSUCKLE CREEK	LOT 5
Street Address	Subdivision Name	Section/Phase and Lot Number

Driving Directions: PERTH RD N FROM HWY 150 L ON HONEYSUCKLE CREEK LP (2ND ENTRANCE) LOT ON L

****

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

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

Maximum Number of Bedrooms 3
Maximum Number of Occupants 6
If Expansion, Current Number of Bedrooms ___

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

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

****

6. Proposed Water Supply:

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

****

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

( ) Alternative ( ) Conventional ( ) Innovative ( ) Modified Conventional (X) Other SEE SEPTIC PERMIT

8. Please Answer The Following ( ) Yes (X) No Does the site contain any jurisdictional wetlands?

To The Best of Your Ability: ( ) Yes (X) No Is any non-domestic sewage (i.e. industry) to be generated?

( ) Yes (X) No Is the site subject to approval by any other public agency?

****

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

9. Signature: ___ 2.16.17

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

DigiSign: DB1BC253-CC45-4AEF-AE96-933E29326410

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative:

Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship

In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:

Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form.

If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

I, Darrell & Carlotta Seals, am the legal owner(s) of the property located at: 129 Honeysuckle Creek Loop, identified as PIN (Parcel Identification Number) 4639-96-5960, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Jersey Development Corporation, 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.

Darrell Seals Carlotta Seals	12-19-2016	Maria Jacobs	12-19-16
Signature of Owner(s)	Date	Signature of Witness	Date

Please return this signed form to the appropriate office:

Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
adrienne.shea@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*:

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…**

SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

X **Front and side setbacks from property line…**

X **Area you prefer your septic system to be placed…**

X **Preferred driveway location and configuration, preferred well location…**

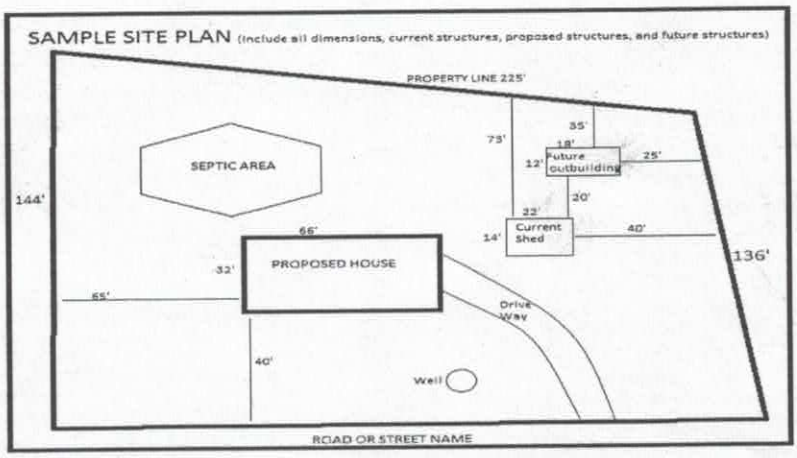
X **North arrow, or other sufficient indicator of direction…**

Circle N/A on the following if appropriate:

X **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

SEE SEPTIC PERMIT

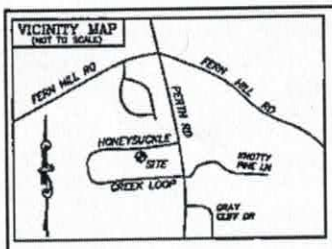
Signature: _____

REQUIRED **property owner or owner's legal representative signature.**

2.16.17

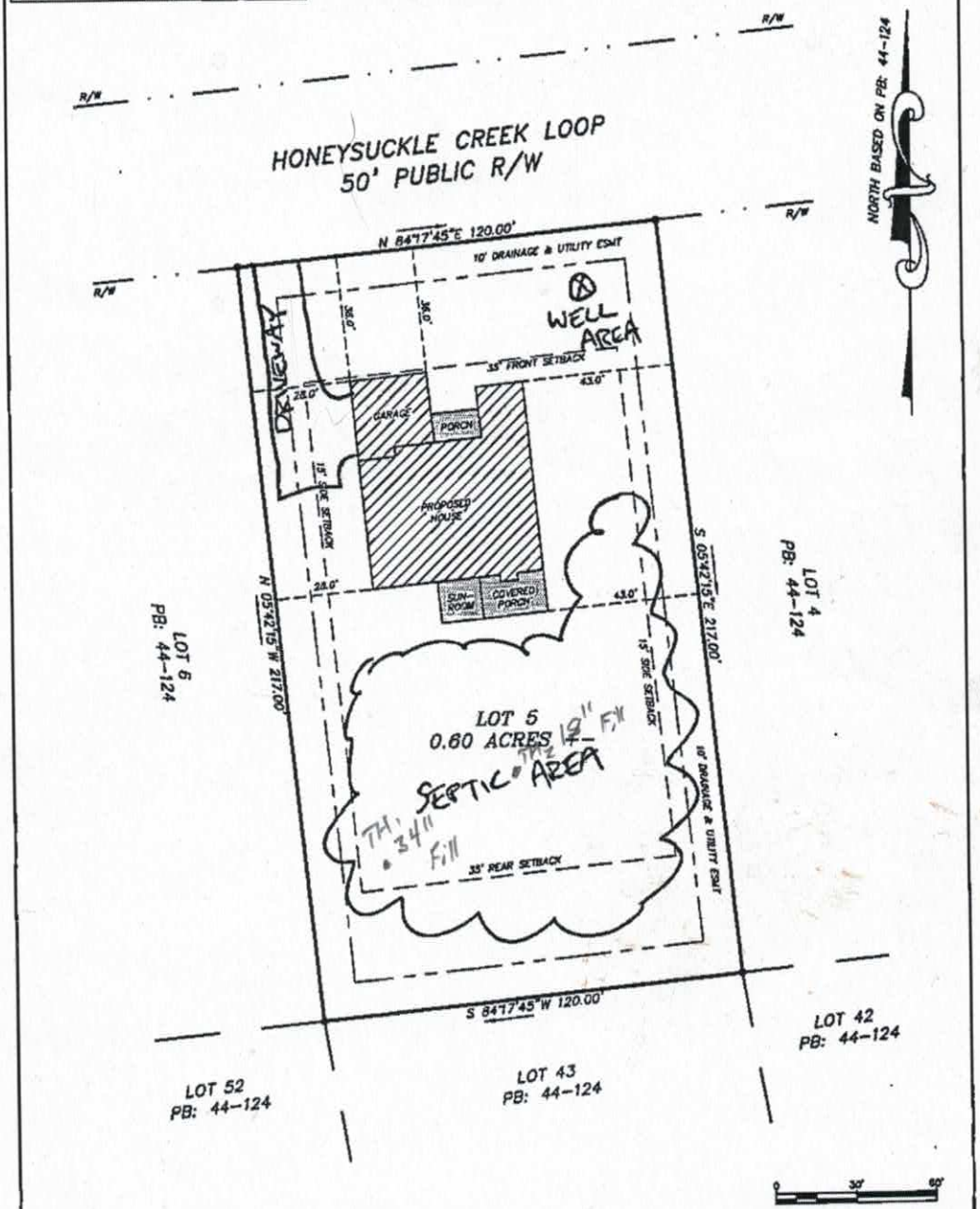
DATE

original



GENERAL NOTES:
1) PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED RIGHTS OF WAYS OR EASEMENTS NOT OBSERVED AND/OR RESTRICTIVE COVENANTS.
2) OWNER TO VERIFY ALL SETBACKS AND ZONING REGULATIONS PRIOR TO ANY PLANNING OR CONSTRUCTION.
3) ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES UNLESS OTHERWISE NOTED.
4) ALL AREAS SHOWN HEREON WERE DETERMINED BY COORDINATE COMPUTATION.
5) SETBACKS AS SHOWN ARE PER PB: AND MAY DIFFER FROM CURRENT ZONING ORDINANCES AND/OR RESTRICTIVE COVENENANTS.
6) THIS PROPERTY DOES NOT LIE WITHIN A SPECIAL FLOOD HAZARD AREA AS DETERMINED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY.

LEGEND:
- BOUNDARY LINE
- OVERHEAD UTILITIES
- FENCE (TYPE NOTED)
- CP = COMPUTED POINT (UNMARKED)
- R/W = RIGHT-OF-WAY
- EOP = EDGE OF PAVEMENT
- C/L = CENTERLINE
- = UTILITY POLE

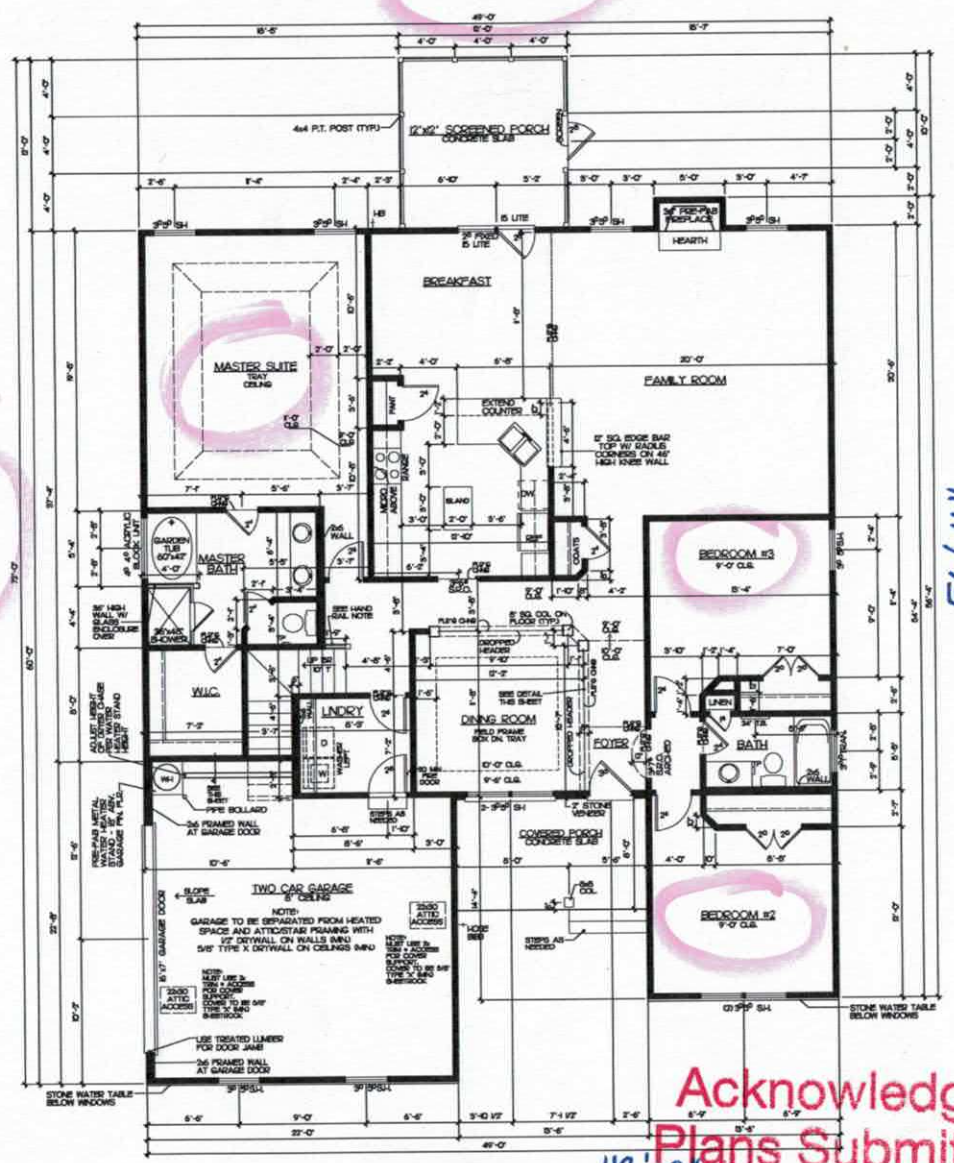


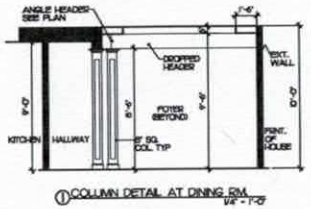
SEAL

DRAWN BY: PAH	
DRAWING FILE NAME: 16267.HCS	
PROJECT NO: 16267	
PROPERTY ADDRESS: 129 HONEYSUCKLE CREEK LP MOORESVILLE, NC 28117	
DATE: DECEMBER 19, 2016	
SCALE: 1"=30'	

HOUSE LOCATION PLAN
FOR
CALEB HILL
ALL OF LOT 5 OF HONEYSUCKLE CREEK SUBDIVISION
FALLSTOWN TOWNSHIP, IREDELL COUNTY, NC
REFERENCES: 2176-1711 & PB: 44-124

HARRIS LAND SURVEYING, PLLC
FIRM LICENSE #: P-1295
4080 DAVIS RD
MAIDEN, NC 28650
704-400-6800
phillipharris3@gmail.com





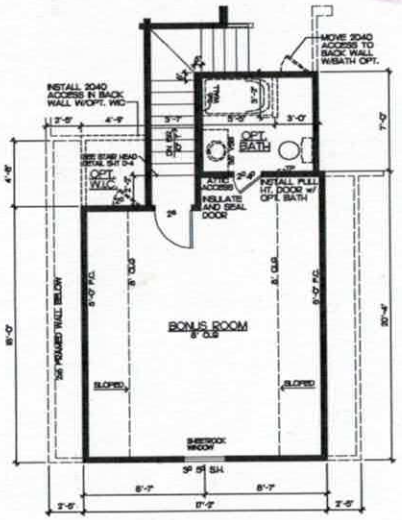
① COLUMN DETAIL AT DINING RM.

2x6 WRAPPED IN ½" BATT. ROCK

TYPICAL INTERIOR COLUMN IN PLAN



DRYER VENT CHASE



BONUS RM. PLAN

NOTES: -WINDOW SIZ. TO BE SAME AS WINDOW CALL OUT -SEE TRUSS LAYOUT FOR BEAM SIZES AND LOCATIONS -CASED OPENING AT ALL BI-FOLD DOORS

FIRST FLOOR PLAN

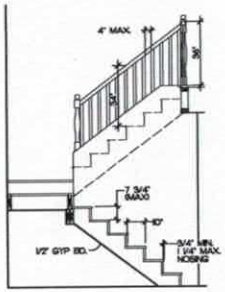
NOTES: -WINDOW SIZ. TO BE SAME AS WINDOW CALL OUT -SEE TRUSS LAYOUT FOR BEAM SIZES AND LOCATIONS -CASED OPENING AT ALL BI-FOLD DOORS -SEE DETAIL SHEET FOR ADDITIONAL DETAILS

Floor plan will be reversed

SQUARE FOOTAGE
FIRST FLOOR - 2,125
SECOND FLOOR - 338
TOTAL - 2,463
OPT. BATH - 61
OPT. WIC - 23
FRONT PORCH - 108
SCREEN PORCH - 144
2 CAR GARAGE - 468

HANDRAIL NOTE

HAND RAIL TO BE ESTABLISHED HALF WALL WITH WOOD CAP OR OPEN HANDRAIL WITH WOOD SPINDEL COORDINATE TYPE WITH BRIDGE SPACING FOR HALF WALL SEE DETAIL SHEET D-4, FOR OPEN TYPE HANDRAIL COORDINATE WITH STAIRCASE SUPPLIER.



TYPICAL STAIR DETAIL

STAIR CONFIG PER PLAN

NOTE: ALL WINDOWS TO BE LOW E GLASS

GENERAL NOTES:
1. ALL FRAMED WALLS THAT FORM THE THERMAL BARRIER OF A HOUSE SHALL HAVE INSULATION INSTALLED PERF FROM GAPS, VOIDS, OR COMPRESSION AND SHALL BE ENCLOSED ON ALL SIDES WITH A RIGID MATERIAL OR AN APPROVED AIR BARRIER MATERIAL. THESE AREAS SHALL INCLUDE BUT NOT LIMITED TO TUBS, SHOWERS, STAIRS, FIREPLACE UNITS, AND THE UNHEATED SIDE OF ALL KNEE WALLS.

2. ALL SILLS OF OPERABLE WINDOWS GREATER THAN 72" ABOVE GRADE OR WALKING SURFACE BELOW MUST HAVE A SILL HT. OF 3'-4" MINIMUM ABOVE THE FINISHED FLOOR OF THE ROOM IN WHICH THE WINDOW IS LOCATED. IF THE SILL HT. IS LESS THAN 3'-4" THE WINDOW MUST MEET THE REQUIREMENTS OF 2012 N.C.R.C. SECTION R612.3 OR R612.4.

Acknowledgement of Plans Submittal ONLY!

Tom Shuck Date 2-23-17
2.23.17
Date
Rec'd ↑

DESIGNED AND ENGINEERED TO COMPLY WITH THE 2012 N.C.R.C.

NOTE
Drafting & Design assumes no liability for any home owner's location from this plan. It is the responsibility of the owner or of the plan to have the builder/contractor verify all dimensions prior to the beginning of construction. The undersigned will verify correct lot size at load bearing.

Every attempt has been made to prevent errors. Any discrepancy found in this plan must be brought to our attention prior to construction.

Drafting & Design will not be liable for any framed error or for any change made to the plan.

Structural steel beams are to be sized by an engineer and is the responsibility of the builder/contractor.

Local, state and federal building codes take precedence over this plan.

Drafting, Inc.
Charlotte, NC
704-552-9558

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IQ CUSTOM CONSTRUCTION
840 Edmonton Rd Mt. Ulla, NC 28125 Ph. 704-660-5798

Project: The Shelburne
Sheet Title: FLOOR PLAN

Drawn By: J. BODNAR
Date: 09-31-10
REV: 7-19-11, 8-4-11, 4-16-12
Site:

2463FP
Sheet 3

IREDELL COUNTY

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

APPLICATION NUMBER
223997
Issue Date: 12/27/2016

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4639965960.000	129 HONEYSUCKLE CREEK LOOP, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: SEALS DARRELL+CARLOTTA	Applicant: HILL, CALEB ANDREW
Address: 135 HONEYSUCKLE CREEK LOOP MOORESVILLE, NC 28115	Address: 2004 CAPTAINS WAY DENVER, NC 28037
Phone:	Phone: 704-302-6676

Use Requested	Zone Code
SFD .	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.600	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	89140	TOTAL FEES:	$ 77.25

215 Little Creek Road
Mooresville, NC, 28115
Phone: (704) 663-7631
Fax: (704) 660-9612
Email: twaseptic@gmail.com
Website: www.ammonsseptic.com

Maintenance Contract Form

(Revision 3)

Maintenance Contract for the state of North Carolina, County of: Iredell

This agreement is made between: James W Barber and
T.W. Ammons Septic Service, Inc., on: 9.13.17

Customer's:
Phone number: 336-404-4847
Email: jwbarber775@gmail.com
To date, number of services: 0

T.W. Ammons Septic Service, Inc., will perform the above services at:
129 Honeysuckle Creek Loop, Mooresville, NC 28117

This contract is for twelve months. Renewal will be due within thirty days prior to the expiration of the contract.

T.W. Ammons Septic Service, Inc., will visit the property twice a year to perform routine maintenance as required on Type IV septic systems by the state of North Carolina. This contract is for routine maintenance only. It does not include the costs for any repairs if needed. In the case of a needed repair, you will be notified.

Tim Ammons
N.C Subsurface Operator #12272
T.W. Ammons Septic Service, Inc.

Owner or Representative