RECEIVED SEP 4 2014 DR

919-422-2827

IREDELL COUNTY HEALTH DEPARTMENT Paid $195.00

ENVIRONMENTAL HEALTH DIVISION

PAGE 1: *APPLICATION FORM* Paid $100 Site Revisit Fee 10-2-14 # 181352

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 28277 Phone: 704 319 6577

Owner Name: " Address: " Phone: 704 658 8616

Property Information:

Street Address: 118 N San Agustine Dr.

Subdivision Name: Bells Crossing Section/Phase: 2 Lot Number: 17

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: _____ 8-27-14
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEALTH DEPARTMENT

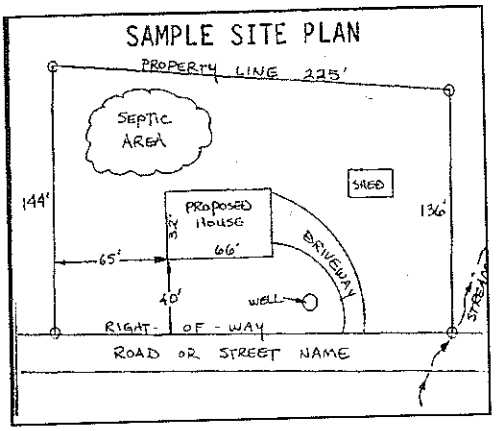
ENVIRONMENTAL HEALTH DIVISION

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 Re-draw App

Signature: _____ 8-27-14

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

Bells Crossing S/D Lot 17

Layout/Design Specifications

Facility Type:	Single Family Home	
# of Bedrooms:	4	
Daily Flow:	480	**gal/day**
L.T.A.R.:	0.30	**gal/day/sq.ft**
Trench Depth:	24	**in**
Trench Width:	36	**in**
Stone Depth:	chamber	**in**
Manifold Length:	42	**in**
Manifold Diameter:	4	**in sch 80pvc**
Supply Line Length:	75	**ft**
Supply Line Diameter:	2	**in sch 40pvc**
Supply Line Volume:	13.05	**gallons**
Friction Loss + Fitting Loss:	4.99	**ft(supply line length + 70' for fittings in pump tank)**
Design Head:	2	**ft**
Elevation Head:	10.50	**ft**
Total Head:	17.49	**ft**
Dose Volume:	223.48	**gals**
% of Pipe Vol.	.85	
Drawdown:	10.39	**in @ 21.5 gal/in**
Pump Run Time:	5.22	**minutes**
Control Panel:	SJE Rhombus Model112 control panel (or approved equivalent)	
Pump:	Zoeller M140 Flow-Mate (or approved equivalent)	
Septic Tank Effluent Filter:	Zoeller 170-0144 residential effluent filter (or approved equivalent)	
Septic Tank:	1200	**gallon**
Pump Tank:	1200	**gallon**

LINE SCHEDULE

LINE NUMBER	COLOR	FIELD ELEVATION	FIELD LENGTH (ft)	DESIGN LENGTH (FT)
1	RED	4.6	21	21
2	ORANGE	4.6	40	40
3	YELLOW	4.6	67	61
4	BLUE	5.1	94	94
5	PINK	5.3	94	94
6	ORANGE	5.5	94	94
7	RED	6.0	95	95
8	BLUE	7.0	88	88
9	YELLOW	7.5	53	53
10	ORANGE	8.3	37	37
11	PINK	8.8	20	20

LOT 17 BELLS CROSSING SUBDIVISION

4-BEDROOM ACCEPTED STATUS PRESSURE MANIFOLD SYSTEM
SERIAL DISTRIBUTION
LINES 1-6 TOTAL 404 LINEAR FEET
EZFLOW OR CHAMBER
LTAR 0.3
25%REDUCTION
24" TRENCH DEPTH

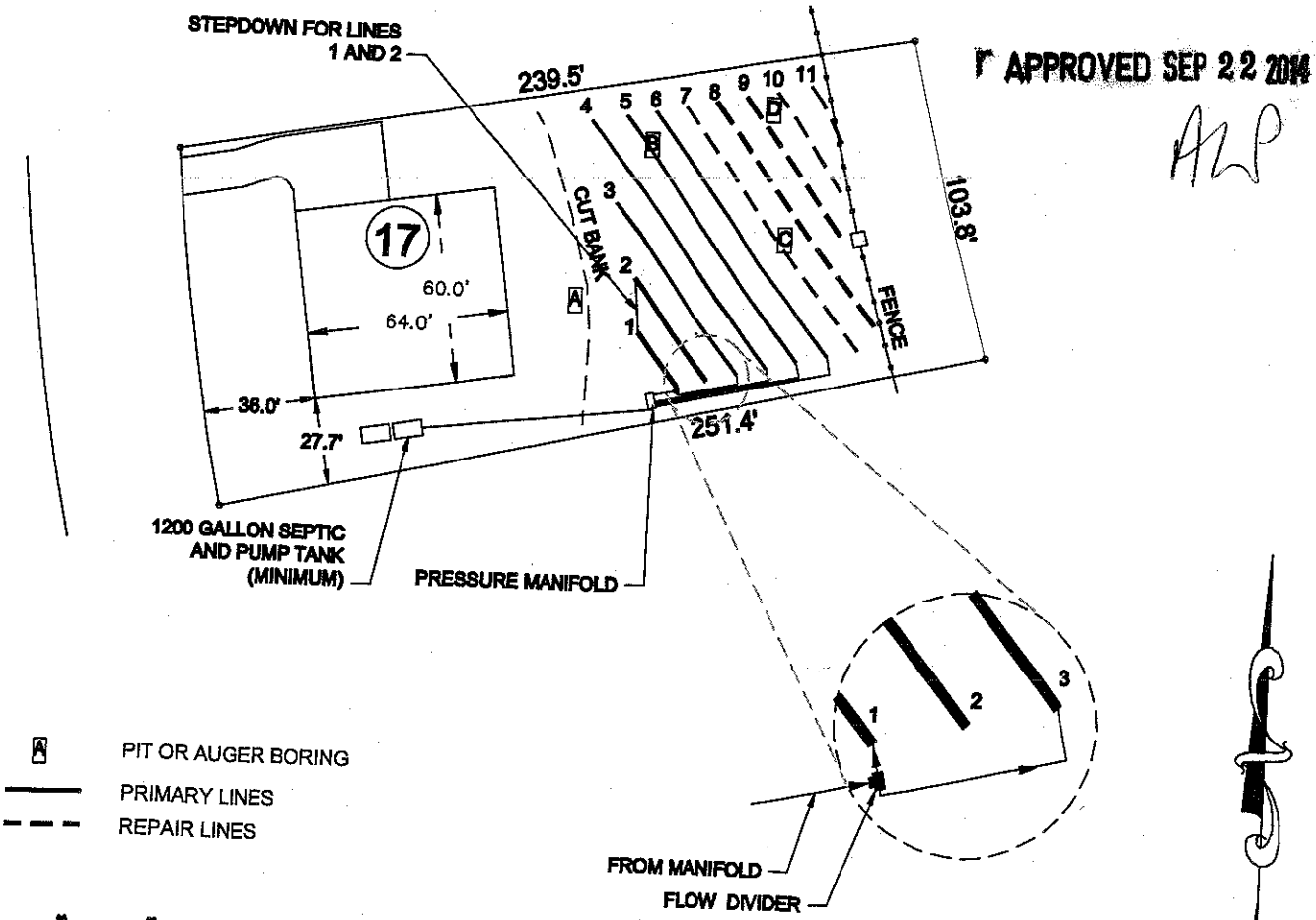
4-BEDROOM LPP FED PANEL BLOCK REPAIR
LINES 7-12 TOTAL 293 LINEAR FEET
LTAR 0.3
50% REDUCTION

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION

SOIL PROFILES AND ANALYSIS PROVIDED BY
CENTRAL CAROLINA SOIL CONSULTING PLLC

APPROVED SEP 22 2014

AZP



SCALE:
1" = 60 ft.

CONNECTION DETAIL
FOR LINES 1-3

Bateman Civil Survey Company
Engineers • Surveyors • Planners
200 N. Main Street, Holly Springs, NC 27540 Ph: 919.577.1080 Fax: 919.577.1081
www.batemancivilsurvey.com info@batemancivilsurvey.com
NCBELS Firm No. C-3378

MeritageHomes

LOT 17
BELLS CROSSING SUBDIVISION
MOORESVILLE, NC
IREDELL COUNTY
REVISED 09/17/14
DATE: 09/27/13 DRAWN BY AH CHECKED BY: TMB

Sheet:
Property ID:
Lot #:
File #:
AppID:

CCSC SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Meritage Homes
Address:
Proposed Facility:
Location of Site: Bells Crossing Lot 17
Design Flow (.1949) 480
Water Supply: [X] Public [ ] Individual [ ] Well
Evaluation Method: [ ] Auger Boring [X] Pit
Type of Wastewater: [X] Sewage [ ] Industrial Process

Applicant:
Date Evaluated: 8-14-2013
Property Size:
Property Recorded:
[ ] Spring [ ] Other
[ ] Cut
[ ] Mixed

PROFILE #	1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY 1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS 1942 Soil Wetness/ Color	1943 Soil Depth (IN.)	1956 Sapro Class	1944 Restr Horiz	Profile Class & LTAR
A	R, 2-3%	0-7"	Disturbed → Fill/ Gravel, Natural Soil						
	B+1	7-32"	SBK, Clay	FI, SS, SP	10R 4/8	PS			PS, 0.3
	B+2	32"-56	SBK, Clay	FI, SS, SP	10 R 4/8 7.5YR6/8, 10%	S			S, 0.3
B	A	0-2"	Gr, loam	VFR, NS, NP	10YR 3/2				
	B+1	2-8"	SBK, CL	FR, NS, SP	2.5YR5/4				
	B+2	8-29"	SBK, Clay	FI, SS, SP	10 R 4/8 7.5YR 6/8 10%	PS			PS, 0.3
	B+3	29-53	SBK, Clay	FI, SS, SP	10YR 4/8 2-3% Mica	S			S, 0.3
C	A	0-2"	Gr, Loam	VFR, NS, NP	10YR 3/2				
	BT1	2-18"	Clay	FI, SS, SP	~~10~~ 2.5YR 4/8				PS 0.3
	BT2	18-50"	Clay	FI, SS, SP	2.5YR 4/8 7.5YR 6/8 10%				S 0.3
D	A	0-2	Gr, Loam	VFR, SS, SP	10YR 3/2				
	BT1	2-5"	Clay loam	FI SS, SP	5YR 4/6				
	BT2	5-54"	Clay	FI, SS, SP	2.5YR 4/6 7.5YR 6/8 10%				S 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: JH, MB
Others Present:
Site Classification (.1948): S
Site Evaluation By:
Others Present:

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

Iredell County
Planning & Enforcement
349 N. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

Zoning Permit

Permit Number: 181352ZO

Printed: 10/4/2013

Master #: 181352

Associated Permits:
181352ZO Zoning

Applicant

Name: Meritage Homes of North Carolina, Inc. **Phone:**
Address: 7761 Ballantyne Commons Pkwy ste 103
Charlotte, NC 28277

Parcel

118

Parcel Number: 4639955462.017 **Zoning:** RA
Address: ~~000~~ SAN AGUSTIN Dr. N. **Township:** 1700
MOORESVILLE, NC 28117 **Area:** .82
Subdivision: Bells Crossing **Lot(s):** 17
Directions to Parcel: i77 to exit 42, left off ramp, left us21, left flower house lp, right carlyle rd, right fern hill rd, left perth, right bells crossing dr, right n san agustin dr,

Owners

Name: Meritage Homes of NC, INC **Phone:** 704-944-8900
Address: 7761 Ballantyne Commons Parkway Suite 1(**Fax:** 704-944-8910
Charlotte, NC 28277

Contractors

Contractor Type: Building
Name: Meritage Homes of North Carolina, Inc.
Address: 7761 Ballantyne Commons Pkwy ste 103
Charlotte, NC 28277

Fees and Receipts:

Number	Description	Amount
FEE-298623-07	Zoning - Permit Application	$75.00
FEE-298624-07	Technology Fee - Planning	$2.25
FEE-298625-07	Environmental Health - Gravity System	$500.00

RECEIVED JUN 4 2014

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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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**

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

Property Information:

Street Address: 118 North San Agustin Dr

Subdivision Name: Bells Crossing **Section/Phase:** 2 **Lot Number:** 17

Driving Directions: See Existing LP

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

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( ) Basement without Plumbing

Non-Residential Site Development:
Type of Business:
Square Footage of Building:
Maximum Number of Employee:
Maximum Number of Seats/Beds/Other:

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( ) 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:

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IREDELL COUNTY HEATLH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
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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 — Preferred driveway location and configuration, preferred 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:

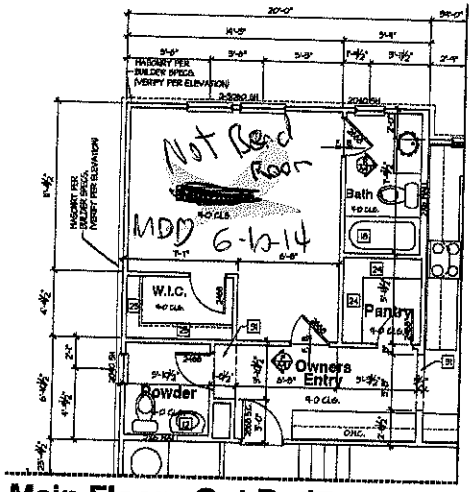
- ____ Location of septic systems and wells within 100' of your property... N/A
- ____ Location of easements and rights of ways on your property... N/A
- ____ Location of any designated wetlands on the property... N/A

Signature: [signature] _____ 6-4-14
REQUIRED property owner or owner's legal representative signature. DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

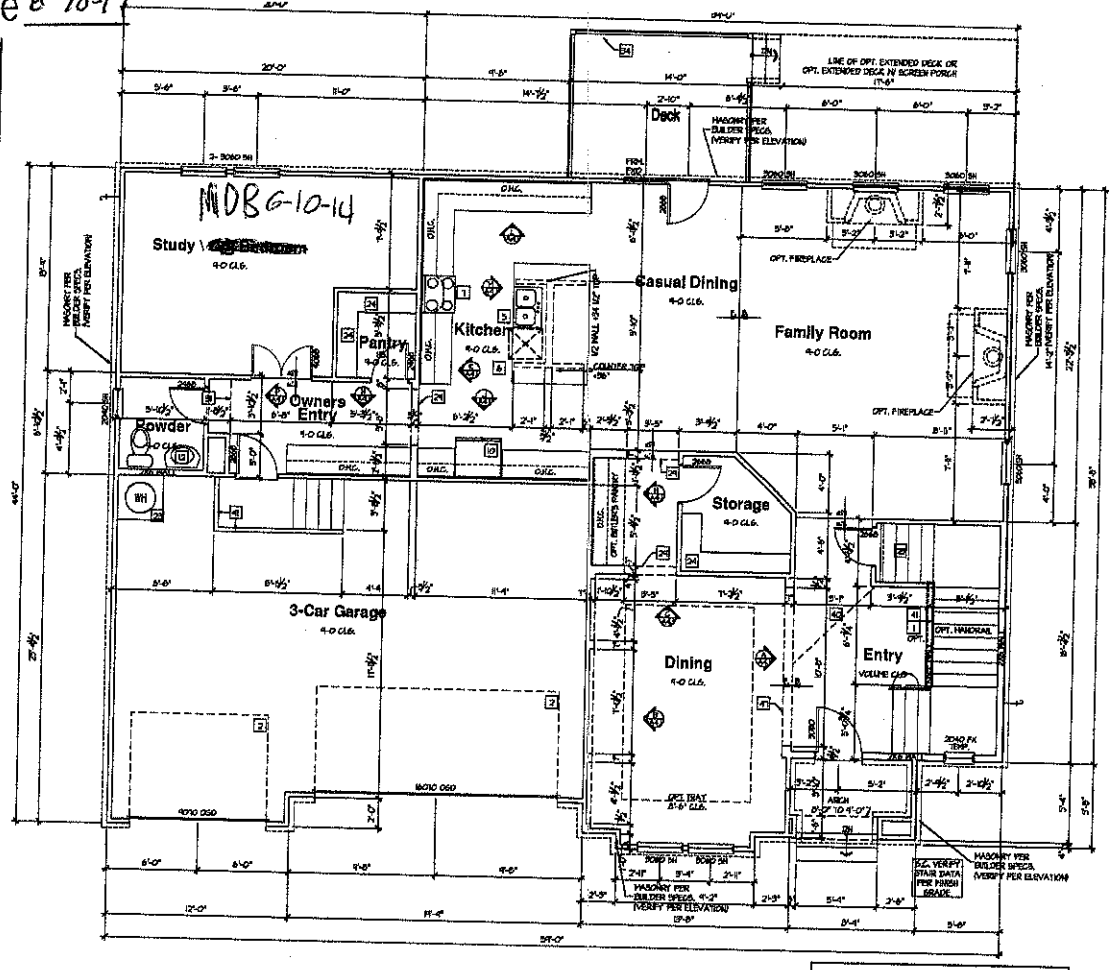
See Attached Please

Acknowledgement Of
Plans Submittal ONLY!
Will B Filed Date 6-4-14
Date 6-10-14



Main Floor - Opt ~~Bedroom 5~~

4 Bed only



Main Floor Plan - C

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

SQUARE FOOTAGES

MAIN FLOOR	1106
UPPER FLOOR	2210
SUBTOTAL	3316
GARAGE	644
PORCH	44
OPT. UTILITY ROOM	0
OPT. SCREENED PORCH	0
TOTAL	4004

FLOOR PLAN NOTES:

1. 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., MEASURED PER LOCAL CODE. RAILING AT GUARDRAIL LOCATIONS TO BE AT 42" MINIMUM A.F.F. OPT. RAILING.
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. 42" X 42" SHOWER
14. 42" X 60" SHOWER
15. 42" X 60" TUB
16. 60" X 60" CORNER TUB
17. 60" X 60" SEMI-CORNER
18. 32" X 60" SEMI-CORNER
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. 5 SHELVES PER BUILDER SPECS.
25. ROD AND SHELF PER BUILDER SPECS.
26. ATTIC ACCESS (22"x30" MIN.).
27. ATTIC ACCESS W/ STAIRS (22" X 72"x94" MIN.).
28. GYPSUM BOARD OPENING @ 8'-0" AT MAIN FLOOR / 7'-0" AT UPPER FLOOR U.N.O.
29. GYPSUM BOARD ARCH @ 7'-0" TO 8'-0".
30. GYPSUM BOARD LOW WALL 36" A.F.F. (U.N.O.) W/ HDF 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. 6x8 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. 2x8 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 9'-6"
48. LOW WALL 30" A.F.F.
49. CURVED WALL OPENING

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 N, C.S.a.

D. WINDOWS:
A. ALL WINDOWS SHALL COMPLY WITH MINIMUM STANDARDS OUTLINED IN APPLICABLE RES. CHECKS.
B. WINDOW SAFETY: 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.

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

N. DECK SCREWS:
INSTALL PER LOCAL CODE.

ISSUE DATE: 1-14-2005

REVISIONS	
ADDED BATH	1-25-2005
ADDED BATH	2-8-2005
REVISE UNIT	5-27-2005

5400 Trinity Road
Suite 107
Raleigh,
North Carolina 27607
919-322-2295 Phone

Meritage Homes

Meritage Homes

BSB DESIGN

www.bsbdesign.com
1001 Woodruff Parkway, Suite 810
West Des Moines, Iowa 50265
515.875.0200

MAIN FLOOR PLAN - C

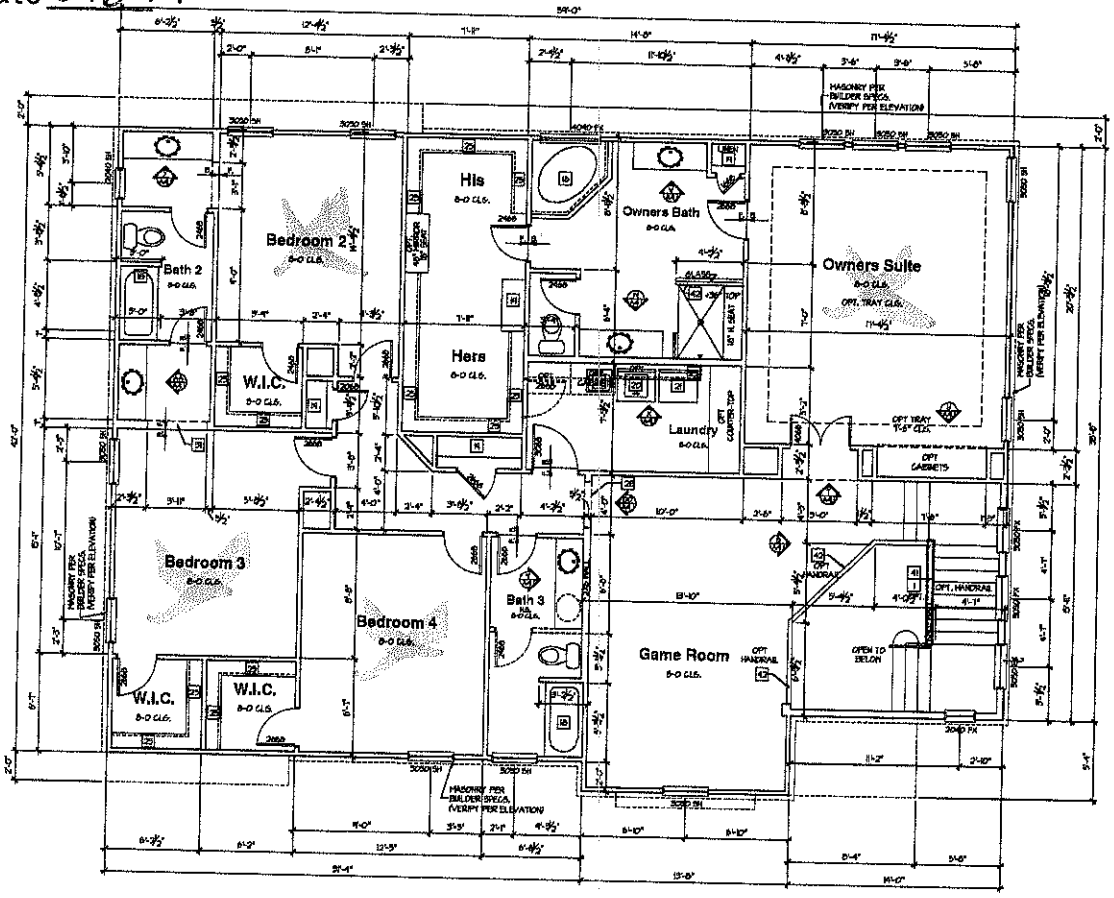
259-4061

A2.1C

Acknowledgement Of
Plans Submittal ONLY!

Date 6-4-14

Date 6-10-14



Upper Floor Plan - C

0' 2' 4' 8'

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

FLOOR PLAN NOTES:

(SECOND FLOOR)

1. THE FOLLOWING KEYNOTES REFERENCE THE SYMBOLS AS SHOWN ON PLANS.
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39. OPTIONAL SOFFERED CEILING @ 8'-6" PER BUILDER SPECS.
40. LINE OF FRAMING ABOVE.
41. LINE OF FRAMING WALL BELOW.
42. 2x6 LOW WALL 42" A.F.F.
43. 2x8 LOW WALL 42" A.F.F.
44. ART NICHE
45. HORIZONTAL LAUNDRY CHUTE
46. LOW WALL 12"H A.F.F.
47. GYPSUM BOARD ARCH @ 8'-0" TO 8'-8"
48. LOW WALL 30" A.F.F.

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 N, O, & Q.

D. WINDOWS.
A. ALL WINDOWS SHALL COMPLY WITH MINIMUM STANDARDS OUTLINED IN APPLICABLE RESIDENTIAL 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 STUD UNLESS OTHERWISE NOTED.

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

N. BRICK SILLS.
INSTALL PER LOCAL CODE.

ISSUE DATE: 1-31-2013

REVISIONS

OWNER'S INITIAL
PLANS PACKET
PRICING PACKET
CONSTRUCTION

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JOB NO. 259-4061
DRAWN BY: PROJECT MANAGER:

UPPER FLOOR PLAN - C

259-4061
A2.2C