# IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 222719

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

PIN # 4676508833

APPLICANT: IQ Custom Homes APPLICANT ADDRESS: PO Box 1703 Mooresville NC 28115

SITE ADDRESS: 931 Linwood Rd - Mrsvl. PHONE: ALT. PHONE: 704 202 5791

SITE DIRECTIONS: 152 (E) - TR Linwood - ON LEFT PAST Teeter Rd

SUBDIVISION: Brawley Woods SECTION: -1- LOT # 2 LOT AREA: 1.04Ac DESIGN FLOW: 480 L.T.A.R.: .275

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | Date 2-26-17 | ☑ 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: | GRAVITY 25% REDUCTION | ☐ Business | No. Persons | 8 | ☑ Private |
| Pump Make | Model | | Serial # | Repair System Description: | PUMP 25% REDUCTION | ☐ Other | No. Employees | | ☐ Public |
| # Nitrification Fields 1 | # Lines 7 | | Linear Ft. 438 | Maintenance Agreement Required: | ☐ YES ☑ NO | ☑ Slab | ☐ Crawl Space | | ☐ Community |
| Trench Width 36" | Max. Trench Bottom Depth (33") | | Gravel Depth N/A | ☑ GRAVITY | ☐ PRESSURE | ☐ Basement w/plumbing | | ☐ Basement w/o plumbing | |

Comments / Conditions:

INITIAL SITE SKETCH

See Carolina Soil + Septic Consulting's Design.

AS BUILT SKETCH

Used Quick 4, installed as Drawn

*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: Date: 11/22/16 Installed by: Kowan Septic

IMPROVEMENT PERMIT by: Date: 11/4/16 OPERATION PERMIT by: Maria Dobson Date: 4/17/17

AUTHORIZATION TO CONSTRUCT by: Date: 11/6/16 Existing System Inspected by: Date:

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

NORTH BASED ON PB:
0
40'
80'
DIVERT DRAINAGE TO HERE
S 25°43'17"E 146.10'
LOT 7
18 O 34'
18 O 30'
17 B 90'
16 P 106'
35' REAR SETBACK
15 Y 110'
DRAINAGE TO BE FILLED AND DIVERTED
ST
12 Y 34'
13 B 34'
14 P 34'
N 42°35'53"E 330.76'
15' SIDE SETBACK
LOT 2
1.04 ACRES +-
17.79'
20'
40'
OLD ROAD BED TO BE FILLED
COV'D PORCH
POOL
39.8'
15'
11 P 19'
10 B 25'
9 Y 32'
15' SIDE SETBACK
PROPOSED HOUSE
6 B 25'
5 Y 25'
R/W
50'
Driveway
GARAGE
40.0'
WELL
FILL SMALL DEPRESSION
96.7'
NOT USED
8 P 43'
NOT USED
7 B 46'
5 Y 81'
4 O 75'
3 P 71'
2 B 71'
1 Y 60'
35' FRONT SETBACK
S 42°35'53"W 334.95'
LOT 5
N 24°12'42"W 147.70'
LINWOOD RD
SR # 1150
60' R/W
R/W

# Carolina Soil & Septic Consulting, PLLC

P.O. Box 1703, Mooresville, NC 28115

Phone: (704) 202-5791 Email: adrianpruett@yahoo.com

NC Licensed Soil Scientist, SC Professional Soil Classifier,
Certified Septic System Operator, Licensed Septic Installer,
Certified Septic Inspector

**Proposed Design for a 25% Reduction Septic System
using Gravity distribution for a 4 bedroom single family residence
on Lot 2 of Brawley Woods Subdivision, in
Mooresville, Iredell County, North Carolina.**

**Contents:** **Page**

Information for the Installer---------- 1

Design Information
Design Specifications---------- 2
Layout Specifications---------- 3

Site Plan/System Plan---------- 4

Dosing Calculations---------- 5

Soil Profile Descriptions---------- 6-7

**REVISED**
**November 14, 2016**
**Job #: 2016-068**
**Design By: Adrian L. Pruett**



# INFORMATION FOR INSTALLER:

- The permit should be read very carefully prior to submitting bid. The following are details that must be considered along with all other considerations.
- Tanks shall be approved by NC DHHS, and certification supplied by the manufacturer.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- The installer is responsible for final grades and returning that grade to original, with exception of added structural features.
- The supply trench shall be compacted to eliminate any cavities left during initial fill placement.
- Installation of the system shall be during dry conditions in order to protect the soil structure.
- All fittings shall be pressure rated fittings.
- All joints shall be cleaned with PVC pipe cleaner and a heavy bodied glue applied to weld all joints.
- Where required by the county health department, post installation inspections by the designer must be scheduled 5 week days in advance.
- Trenches shall be carefully excavated so the bottom has no more than 1/4"fall in 10 feet with no high or low areas within. If high or low areas do exist after trench excavation, high areas should be removed rather than filling in low areas. Do not over excavate trenches! Any fine grading should be completed by hand with a rake and shovel, leaving no loose material.
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral to prevent unwanted lateral water movement.
- Elevations at pin flag locations should be checked by the installer prior to beginning trenches to insure accuracy.
- If septic tank risers are used they should be a minimum of 6" above finished grade or within 6" of final grade if buried.
- Design precludes use of foundation drains on the residence.
- System is specified as an Accepted 25% Reduction Gravity installation.
- Repair is specified as Pressure Manifold 25% reduction installation.
- Trench width is specified as 36" wide, rake and lime all trench sidewalls
- **If grading for slab foundation is utilized do not grade/create greater than 2 ft of elevation difference within 15 ft of any component of the septic or repair. If back filling do not backfill over any initial or repair septic line.**

## OWNER INFORMATION

| | |
|---|---|
| **Owner:** | Brawley Woods LLC |
| **Address:** | 114 Morlake Dr., Suite 103<br>Mooresville, NC 28117 |
| **Client:** | IQ Custom Construction |
| **Address:** | 840 Edmiston Rd<br>Mt. Ulla, NC 28125 |
| **Contact:** | Bobby Robinson |
| **Phone:** | 980-297-2329 |
| **County:** | Iredell |
| **Location:** | BRAWLEY WOODS SUBDIVISION, LOT 2 |
| **Source of Wastewater Flow:** | 4 Bedroom Single Family Residence |
| **Estimated Gallons Per Day Flow:** | 480 |
| **System Flow:** | NA |

## 25% GRAVITY DESIGN INFORMATION

| | | |
|---|---|---|
| **Drainfield Design Flow (gpd):** | 438 | |
| **Loading/Soil Application Rate (gpd/ft.$^2$):** | 0.275 | |
| **Depth of Gravel in Trench:** | NA (25% reduction ) | |
| **Gravel Size:** | NA (25% reduction ) | |
| **Total Lateral Length From Layout:** | 438 | |
| **Total Lateral Length Required:** | 436.36 | |
| **Trench Depth:** | 33 in. | Lowside |
| **Trench Width:** | 36 in. | |
| **TOTAL AREA TRENCH BOTTOM:** | 1314 | |
| **Trench Spacing on Center:** | 9 ft. | |
| **Repair Trench Width:** | 8 ft. | |
| **Repair Trench Depth:** | 34 in. | Lowside |
| **Septic Tank Size:** | 1000 | gal. |
| **Estimated Supply Line Length:** | 4 | |
| **Supply Line Diameter:** | 3 in. SCH 40 PVC | |
| **Supply Line Volume:** | 1.44 | |
| **Dosing Volume:** | NA | |
| **Supply Manifold:** | SERIAL DISTRIBUTION | |
| **Additional Comments:** | Soil suitability was performed by CS&SC | |

# BRAWLEY WOODS SUBDIVISION, LOT 2
## FIELD LAYOUT SPECIFICATIONS

LAYOUT FOR 4 BEDROOM RESIDENCE

November 14, 2016

| LINE # | FLAG COLOR | FS | ELEVATION | FLAGGED LINE LENGTH | DESIGN LINE LENGTH |
|---|---|---|---|---|---|
| TBM | | | NA | | |
| HOUSE CRN | | NA | NA | | |
| P. TANK | | NA | NA | | |
| 1 | YELLOW | NA | NA | 60 | 60 |
| 2 | BLUE | NA | NA | 71 | 71 |
| 3 | PINK | NA | NA | 71 | 71 |
| 4 | ORANGE | NA | NA | 75 | 75 |
| 5 | YELLOW | NA | NA | 80 | 80 |
| 5 | YELLOW | NA | NA | 25 | 25 |
| 6 | BLUE | NA | NA | 25 | 25 |
| 7 | BLUE | NA | NA | 48 | NOT USED |
| 8 | PINK | NA | NA | 48 | NOT USED |
| 9 | YELLOW | NA | NA | 32 | 32 |
| 10 | BLUE | NA | NA | 25 | 25 |
| 11 | PINK | NA | NA | 19 | 19 |
| ***12*** | ***YELLOW*** | ***NA*** | ***NA*** | ***39*** | ***34*** |
| ***13*** | ***BLUE*** | ***NA*** | ***NA*** | ***38*** | ***34*** |
| ***14*** | ***PINK*** | ***NA*** | ***NA*** | ***36*** | ***34*** |
| ***15*** | ***YELLOW*** | ***NA*** | ***NA*** | ***110*** | ***110*** |
| ***16*** | ***PINK*** | ***NA*** | ***NA*** | ***108*** | ***106*** |
| ***17*** | ***BLUE*** | ***NA*** | ***NA*** | ***92*** | ***90*** |
| ***18*** | ***ORANGE*** | ***NA*** | ***NA*** | ***30*** | ***30*** |
| 18 | ORANGE | NA | NA | 34 | 34 |
| | | | **Total** | **1066** | **955** |

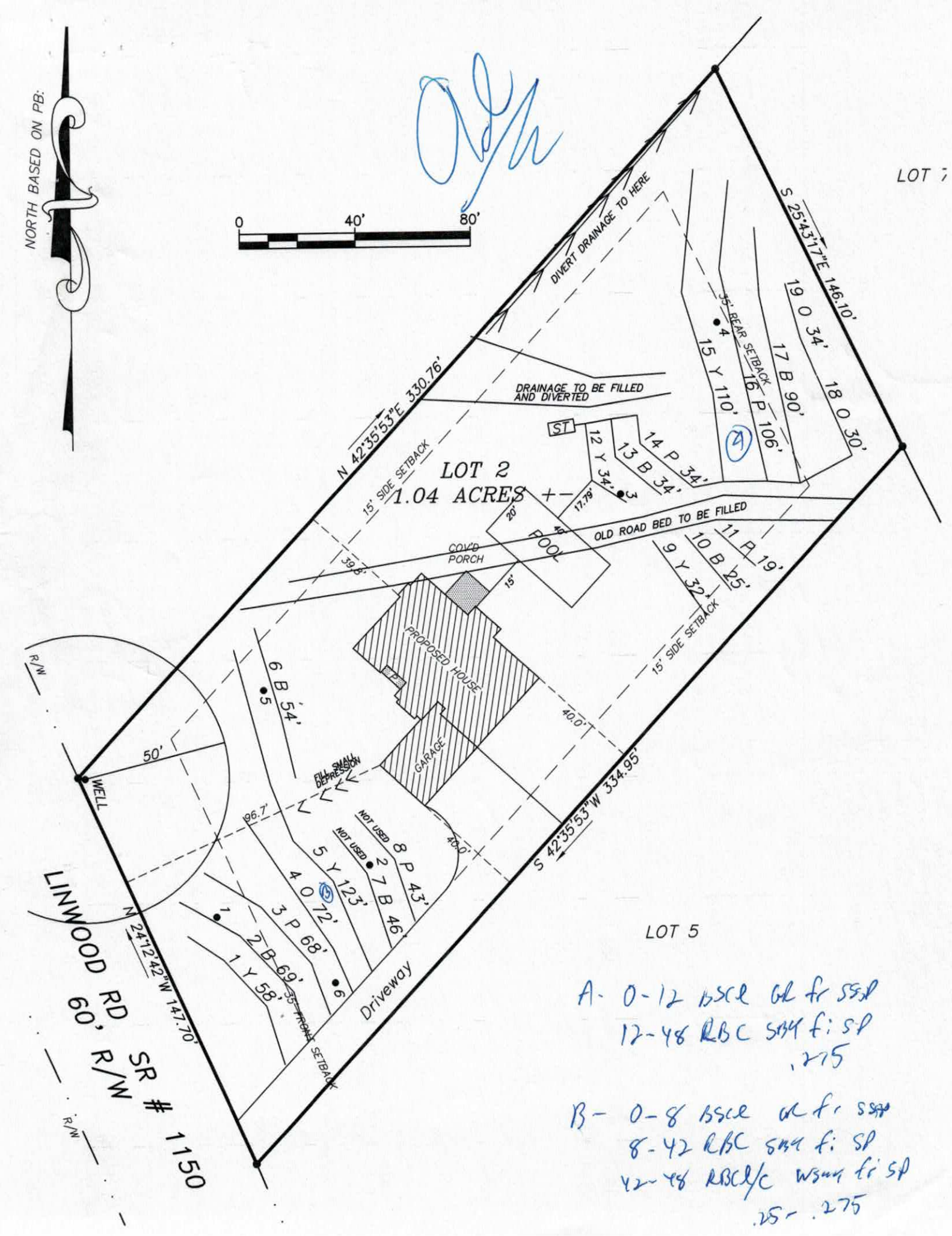
| | LINE LENGTH | SYSTEM TYPE | SOIL LTAR GPD/FT$^2$ | TRENCH SYSTEM | DISTRIBUTION |
|---|---|---|---|---|---|
| ***System*** | ***438*** | ***ACCEPT.*** | ***0.275*** | ***25% RED.*** | ***GRAVITY*** |
| Repair | 517 | *MOD.* | 0.250 | PPBPS | LOW PRESSURE |

**Notes:** ** TBM Is Not Required.
**All measures in feet
**Nitrification lines are demonstrated on contour via colored pin flags

Comments: **Small depression to be filled in front of house, old road bed and drainage feature to be fill and will clay near drainfield area, see site plan.**
**Drainage to be diverted to property line as indicated on site plan.**
**Maintain 10' off septic with water line.**
**Proposed house staked in orange pin flags and pool staked in blue pin flags. Wooden stakes a relevant as house has moved.**
**Iredell County has CS&SC's permission to change septic tank location and distribution type**

## DOSING CALCULATIONS

| | |
|---|---|
| Location | BRAWLEY WOODS |
| Lot No: | 2 |
| Address: | |
| No. of Bedrooms | 4 |
| Design Flow | 480 $^{gal}/_{day}$ |
| LTAR | 0.275 $^{gal}/_{ft^2\ day}$ |
| 25% RED. Expansion? (YES OR NO) | YES |
| Supply Line Length | 4 ft. |
| Supply Line Volume | 1.44 gal. |
| Required Feet of 25% RED. Line | 436.36364 ft. |
| Amount of Line from Layout | 438 ft. |
| Gallons per Minute | NA $^{gal}/_{min}$ |
| Septic Tank Capacity | 1000 gal. |
| Minimum Septic Tank Capacity | 1000 gal. |
| Lateral Line Volume | 286.014 gal. |




A- 0-12 BSCL OK fr SSH
12-48 RBC SMH fr SP
.275

B- 0-8 BSCL OK fr SSH
8-42 RBC SMH fr SP
42-48 RBCL/C WSMH fr SP
.25-.275

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

Sheet 1 of 2
PROPERTY ID #: 4676508833
COUNTY: Iredell

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

OWNER: Brawley Woods LLC
ADDRESS: 114 Norlake Dr Suite 103 Mooresville NC 28117
PROPOSED FACILITY: 4 Bdrm
PROPOSED DESIGN FLOW (.1949): 480gpd
LOCATION OF SITE: Brawley Woods Lot 2

APPLICATION DATE 10-25-16
DATE EVALUATED: 10/2016
PROPERTY SIZE: 1.04ac
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) | | OTHER PROFILE FACTORS | | | | PROFILE CLASS & LTAR |
|---|---|---|---|---|---|---|---|---|---|
| | | | .1941 STRUCTURE/ TEXTURE | .1941 CONSISTENCE/ MINERALOGY | .1942 SOIL WETNESS/ COLOR | .1943 SOIL DEPTH | .1956 SAPRO CLASS | .1944 RESTR HORIZ | |
| B 1 | LSS 5% | 0-5 | R SCL WFSBk | Fr SS SP SExP | N/A few YB 20-28" few Sap | 48" | N/A | N/A | PS 0.25 gpd/sqft |
| | | 5-28 | RC WFSBk | Fr SS SP SExP | | | | | |
| | | 28-48 | RC MFSBk | Fr SS SP SExP | | | | | |
| B 2 | LSS 5% | 0-6 | BR SCL WFSBk | Fr SS SP SExP | 2.5Y 8/3 14-23" Chr 2 24-25" few Sap 36-48" | 48" | N/A | N/A | PS .1 dr.p 0-23" 0.3 gpd/sqft 26-48" |
| | | 6-16 | RC WFSBk | Fr SS SP SExP | | | | | |
| | | 16-25 | RC WFSBk | Fr SS SP SExP | | | | | |
| | | 25-48 | RC MFSBk | Fr SS SP SExP | | | | | |
| B 3 | LSS 8% | 0-16 | BCL WFSBk | Fr SS SP SExP | N/A Con Mn few Sap | 48" | N/A | N/A | PS 0.275 gpd/sqft |
| | | 16-37 | BRC WFSBk | Fr SS SP SExP | | | | | |
| | | 34-48 | RC MFSBk | Fr SS SP SExP | | | | | |
| B 4 | LSS 8% | 0-12 | B SCL VWFSBk | Fr SS SP SExP | N/A Con Mn | 48" | N/A | N/A | PS 0.275 gpd/sqft |
| | | 12-38 | RB CL WFSBk | Fr SS SP SExP | | | | | |
| | | 38-48 | RC MFSBk | Fr SS SP SExP | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | PS | PS |
| System Type(s) | Gravity 25% | PM 25% |
| Site LTAR | 0.275 | 0.25 |

OTHER FACTORS (.1946): None
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: SC
OTHER(S) PRESENT: None

COMMENTS:

# 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 #: 4676508837
DATE OF EVALUATION: 10/2016
COUNTY: Iredell

| 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 |
|---|---|---|---|---|---|---|---|---|---|
| B5 | LSS 5% | 0-8 | B SCL WFSBK | Fr SS SP SExP | N/A | 48" | N/A | N/A | PS |
| | | 8-31 | RC WFSBK | Fr SS SP SExP | few YB | | | | 0.25 gpd/sq ft |
| | | 31-48 | RC MFSBK | Fr SS SP SExP | | | | | |
| B6 | LSS 5% | 0-8 | B SCL Gr | Fr SS SP SExP | N/A | 48" | N/A | N/A | PS |
| | | 8-30 | RC WFSBK | Fr SS SP SExP | few YB | | | | 0.25 gpd/sq ft |
| | | 30-43 | RC MFSBK | Fr SS SP SExP | few Sap | | | | |
| | | 43-48 | RCL WFSBK | Fr SS SP SExP | few Sap | | | | |

COMMENTS:

RECEIVED OCT 25 2016

# 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)*

Paid $350.00

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

**********

#222719

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:**

| | | | |
|---|---|---|---|
| I&O Custom Const./ES&SC | PO Box 1703, Mooresville NC 28115 | 704-202-5791 | |
| **Applicant Name** | **Mailing Address** | **Home Phone #** | **Alternate Phone #** |
| Brawley Woods LLC | 164 Barkley Dr, Suite 103, Mooresville NC 28117 | | |
| **Owner Name** | **Mailing Address** | **Home Phone #** | **Alternate Phone #** |

**********

4. **Property Information:**

| | | |
|---|---|---|
| 931 Linwood | Brawley Woods | 2 |
| **Street Address** | **Subdivision Name** | **Section/Phase and Lot Number** |

**Driving Directions:** Hwy 152/main St, TR on Linwood, past Teeter, Lot on L

**********

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

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

**Maximum Number of Bedrooms** 4
**Maximum Number of Occupants** 8
**If Expansion, Current Number of Bedrooms** ___

( ) **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:**

(✓) **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** ( ) **Other** _____

8. **Please Answer The Following** ( ) Yes (✓) No **Does the site contain any jurisdictional wetlands?**
   **To The Best of Your Ability:** ( ) Yes (✓) No **Is any non-domestic sewage (i.e. industry) 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.**

9. **Signature:** _____ 10-25-16
**Property owner or owner's legal representative signature (SIGNATURE REQUIRED)** **DATE**

# 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, IQ Custom Construction, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**), Jason Slagle, IQ Custom Construction, 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.

Jason B Slagle — 10-24-16 — D-M.J- — 10/24/16

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:**

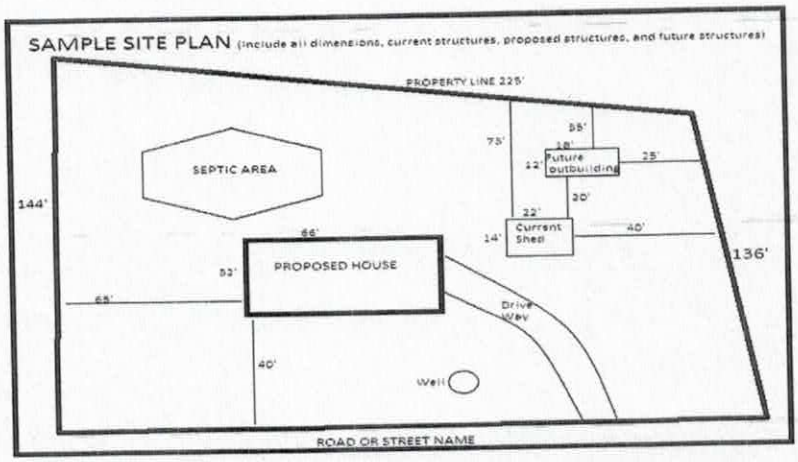
- ✓ **Property Line measurements are clearly identified…**
- ✓ **All proposed structures are indicated…**

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

- ✓ **Front and side setbacks from property line…**
- ✓ **Area you prefer your septic system to be placed…**
- ✓ **Preferred driveway location and configuration, preferred well location…**
- ✓ **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**

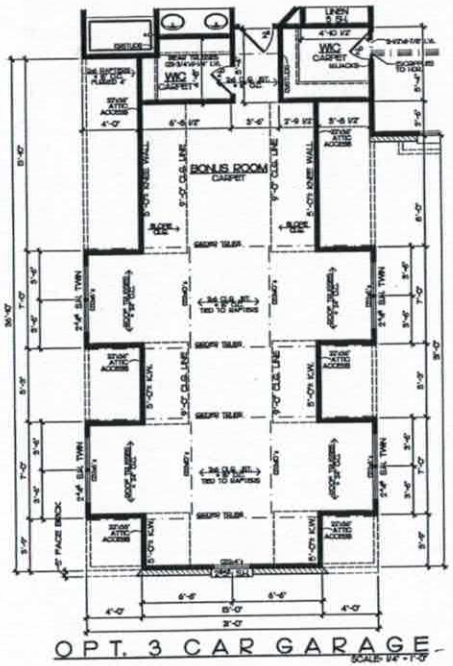
See Site Plan

**Signature:** _____

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

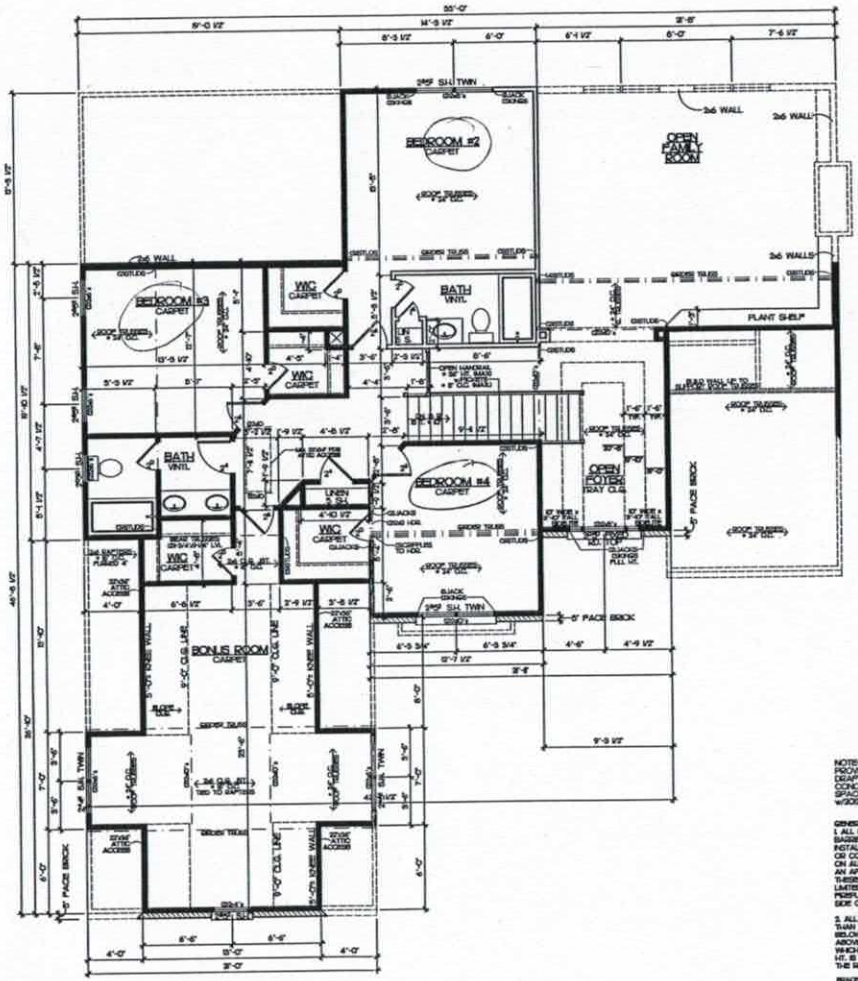
10-25-16

**DATE**




OPT. 3 CAR GARAGE

SCALE: 1/4" = 1'-0"




SECOND FLOOR PLAN

SCALE: 1/4" = 1'-0"

NOTE: ALL WINDOWS TO BE LOW 'E' GLASS
NOTE: DESIGNED AND ENGINEERED FOR THE 2012 NCRC

Acknowledgement of
Plans Submittal ONLY!

Date 12/14/16

Date 12/22/16

NOTE:
PROVIDE FIRE BLOCKING AND DRAFTSTOPPING AT ALL CONCEALED FLOOR & WALL SPACES TO COMPLY w/2012 NCRC, R302.8 & R302.11

GENERAL NOTES:
1. ALL FRAMED WALLS THAT FORM THE THERMAL BARRIER OF A HOUSE SHALL HAVE INSULATION INSTALLED (NOT 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 UN-HEATED 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 24" MINIMUM ABOVE THE FINISHED FLOOR OF THE ROOM IN WHICH THE WINDOW IS LOCATED. IF THE SILL HT. IS LESS THAN 24" THE WINDOW MUST MEET THE REQUIREMENTS OF SECTION R613 OR R604.

BRACED WALL SHEATHING NOTES:
1. THE LATERAL BRACING REQUIREMENTS FOR BRACED WALLS OF THIS PLAN HAVE BEEN DESIGNED PER SECTION R602.10 IMPLEMENTATION #2 OF THE 2012 NCRC AS AN ALTERNATIVE METHOD.

2. ALL PERIMETER WALLS ARE TO BE FULLY SHEATED WITH A MINIMUM 7/16" OSB, AND ATTACHED TO THE WALL FRAMING BELOW WITH 8d COMMON NAILS AT 6" O.C. SPACING AT PANEL EDGES AND 12" O.C. AT INTERMEDIATE SUPPORTS.

3. INSTALL BLOCKING ALONG OSB PANEL EDGES PASTEN PANEL EDGES TO BLOCKING AT 3" O.C. AND 4" O.C. AT INTERMEDIATE FRAMING WHEN LESS THAN 3/8 BUT GREATER THAN 2/8 OF WALL IS SHEATHED.

4. SHEATH ALL GABLE END WALLS WITH 7/16" OSB.

5. FOR GARAGE WALL CLAD WITH LAP SIDING, NAILING PER R602.3.4 AS SHOWN IN FIGURE R602.3.4.


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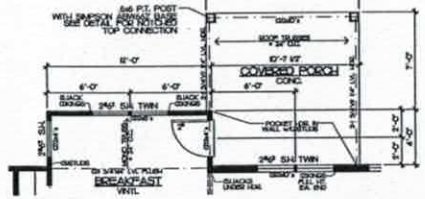

I.Q. CUSTOM CONSTRUCTION
840 Edmiston Rd.
Mt. Ulla, NC 28125 Ph. 704-660-5708

Project: THE BURNSIDE HOUSE PLAN

Sheet Title: SECOND FLOOR PLAN

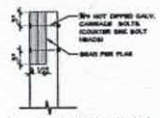
| | |
|---|---|
| Drawn By | JR |
| Date | 9-02-05 |
| REV: | 06-04-16<br>06-09-16 |
| Site | |

Sheet 4



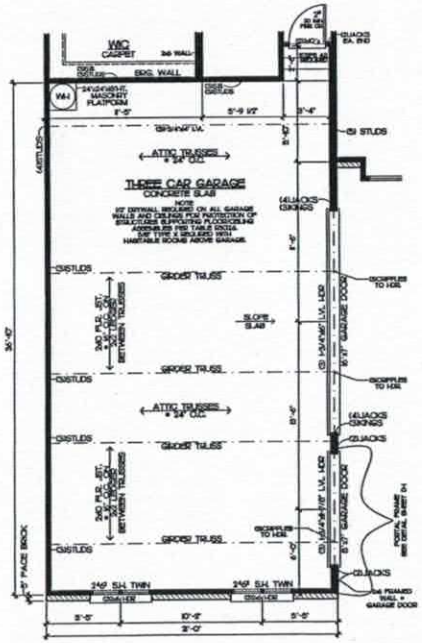

OPT. COVERED PORCH

SCALE: 1/4" = 1'-0"



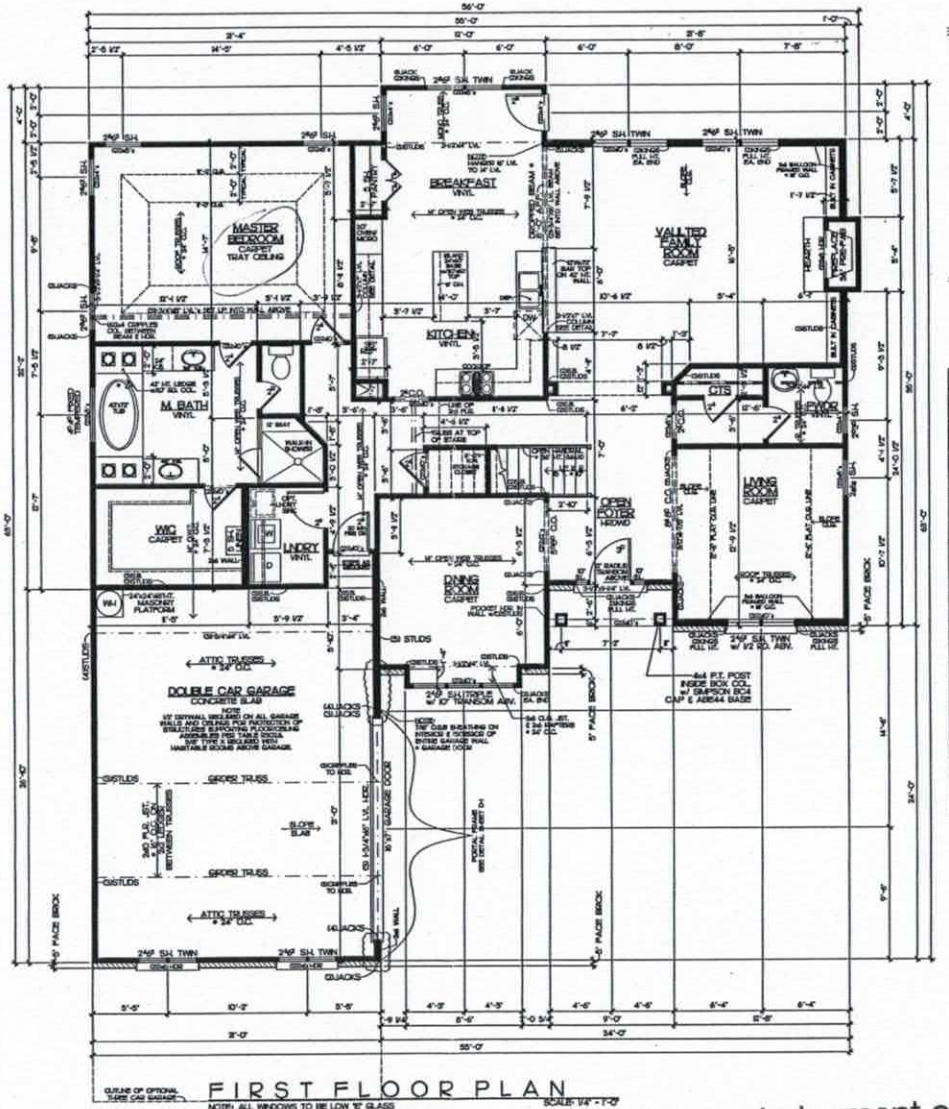
6x6 COLUMN

SCALE: 1" = 1'-0"




OPT. 3 CAR GARAGE

SCALE: 1/4" = 1'-0"




FIRST FLOOR PLAN

SCALE: 1/4" = 1'-0"

NOTE: ALL WINDOWS TO BE LOW "E" GLASS

NOTE: DESIGNED AND ENGINEERED FOR THE 2012 N.C.R.C.

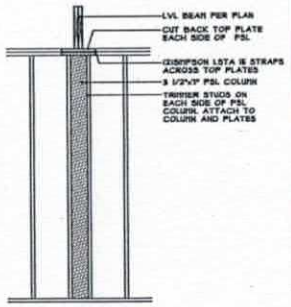
WALL BRACING NOTES:

1. THE LATERAL BRACING REQUIREMENTS FOR THIS PLAN HAVE BEEN ACCOUNTED FOR UTILIZING AN ENGINEERED DESIGN AS PERMITTED IN SECTION 4 OF THE 2012 NORTH CAROLINA RESIDENTIAL CODE WITH SEPTEMBER 1, 2013 AMENDMENTS.

2. ALL PERIMETER WALLS ARE TO BE FULLY SHEATED WITH A MINIMUM 7/16" O.S.B. AND ATTACHED TO THE WALL FRAMING STUDS WITH 8d (2.5"x0.131") NAILS AT 6" O.C. SPACING AT PANEL EDGES AND 12" O.C. AT INTERMEDIATE SUPPORTS.

3. INSTALL BLOCKING ALONG O.S.B. PANEL EDGES. FASTEN PANEL EDGES TO BLOCKING AT 3" O.C. AND 8" O.C. AT INTERMEDIATE FRAMING WHEN LESS THAN 24IN BUT GREATER THAN 22IN OF THE WALL IS SHEATHED.

4. SHEATH ALL GABLE END WALLS WITH 7/16" O.S.B.




TYPICAL PSL COLUMN DETAIL

SCALE: 1/2" = 1'-0"

| HANGER SCHEDULE FOR JOISTS AND BEAMS | |
|---|---|
| MEMBER (NUMBER OF PLY'S) | HANGER |
| 2X8 | LUS28 |
| 2X10 | LUS210 |
| 2X12 | LUS210 |
| 2-2X8 | HUS28-2 |
| 2-2X10 | HUS210-2 |
| 2-2X12 | HUS212-2 |
| 3-2X8 | LUS28-3 |
| 3-2X10 | LUS210-3 |
| 3-2X12 | HUS212-3 YIN |
| 2-1 3/4" x 9 1/4" LVL | HGUS410 |
| 2-1 3/4" x 11 7/8" LVL | HGUS412 |
| 2-1 3/4" x 14" LVL | HGUS414 |
| 2-1 3/4" x 16" LVL | HGUS414 |
| 2-1 3/4" x 18" LVL | HGUS414 |
| 3-1 3/4" x 9 1/4" LVL | HGUS56.50/10 |
| 3-1 3/4" x 11 7/8" LVL | HGUS56.50/12 |
| 3-1 3/4" x 14" LVL | HGUS56.50/14 |
| 3-1 3/4" x 16" LVL | HGUS56.50/14 |
| 3-1 3/4" x 18" LVL | HGUS56.50/14 |
| 4-1 3/4" x 9 1/4" LVL | HGUS1.28/10 |
| 4-1 3/4" x 11 7/8" LVL | HGUS1.28/12 |
| 4-1 3/4" x 14" LVL | HGUS1.28/14 |
| 4-1 3/4" x 16" LVL | HGUS1.28/14 |
| 4-1 3/4" x 18" LVL | HGUS1.28/14 |

NOTE:
PROVIDE FIRE BLOCKING AND DRAFTSTOPPING AT ALL CONCEALED FLOOR & WALL SPACES TO COMPLY w/2012 N.C.R.C. R302.8 & R302.12

GENERAL NOTES:

1. ALL FRAMED WALLS THAT FORM THE THERMAL BARRIER OF A HOUSE SHALL HAVE INSULATION INSTALLED FREE 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, PIERS, FACE 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 24" MINIMUM ABOVE THE FINISHED FLOOR OF THE ROOM IN WHICH THE WINDOW IS LOCATED. IF THE SILL HT. IS LESS THAN 24" THE WINDOW MUST MEET THE REQUIREMENTS OF SECTION R303.5 OF R.N.C.

Acknowledgement of Plans Submittal ONLY!

Date 11/16/16

Date 11/23/16

| SQUARE FOOTAGE | |
|---|---|
| HEATED | |
| FIRST FLOOR: | 1933 SF |
| SECOND FLOOR: | 2042 SF |
| TOTAL HEATED: | 3975 SF |
| 2 CAR BONUS RM: | 563 SF |
| OPT. 3 CAR BONUS RM: | 547 SF |
| 2 CAR GARAGE: | 570 SF |
| 3 CAR GARAGE: | 779 SF |


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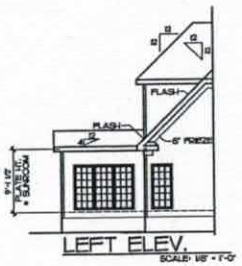

I.Q. CUSTOM CONSTRUCTION
840 Edminston Rd.
Mt. Ulla, NC 28125 Ph. 704-660-5788

Project: THE BURNSIDE HOUSE PLAN

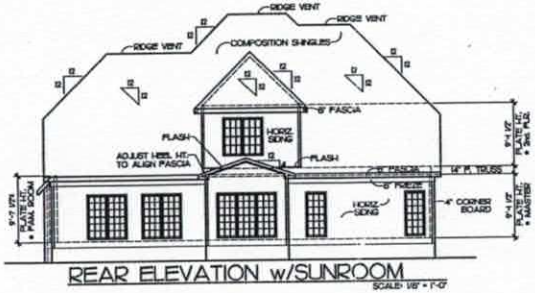
Sheet Title: FIRST FLOOR PLAN

Drawn By: JR
Date: 03-21-16
REVI: 09-01-16
Title:

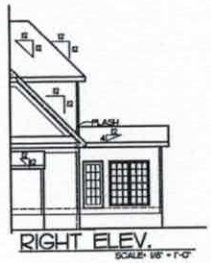
Sheet: 3




LEFT ELEV.
SCALE: 1/8" = 1'-0"

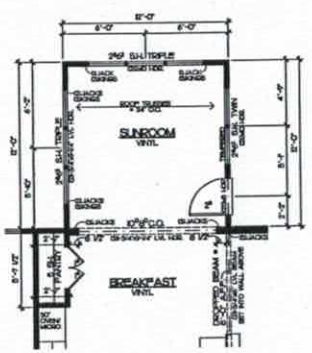



REAR ELEVATION w/SUNROOM
SCALE: 1/8" = 1'-0"

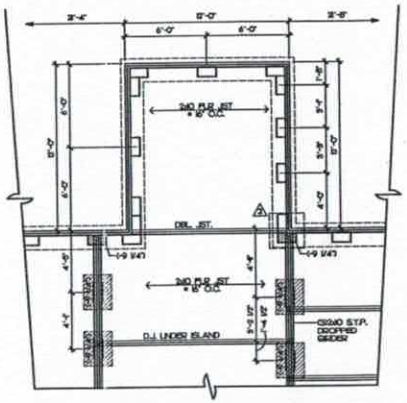



RIGHT ELEV.
SCALE: 1/8" = 1'-0"

| HANGER SCHEDULE FOR JOISTS AND BEAMS | |
|---|---|
| MEMBER (NUMBER OF PLY'S) | HANGER |
| 2X8 | LUS28 |
| 2X10 | LUS210 |
| 2X12 | LUS310 |
| 3-2X8 | HUS28-3 |
| 3-2X10 | HUS210-3 |
| 3-2X12 | HUS312-3 |
| 3-2X8 | LUS28-3 |
| 3-2X10 | LUS210-3 |
| 3-2X12 | HUS212-3 ISN |
| 3-1 3/4" x 9 1/4" LVL | HGUS410 |
| 3-1 3/4" x 11 7/8" LVL | HGUS412 |
| 3-1 3/4" x 14" LVL | HGUS414 |
| 3-1 3/4" x 16" LVL | HGUS414 |
| 3-1 3/4" x 18" LVL | HGUS414 |
| 3-1 3/4" x 9 1/4" LVL | HGUS5.50/10 |
| 3-1 3/4" x 11 7/8" LVL | HGUS5.50/12 |
| 3-1 3/4" x 14" LVL | HGUS5.50/14 |
| 3-1 3/4" x 16" LVL | HGUS5.50/14 |
| 3-1 3/4" x 18" LVL | HGUS5.50/14 |
| 4-1 3/4" x 9 1/4" LVL | HGUS7.38/10 |
| 4-1 3/4" x 11 7/8" LVL | HGUS7.38/12 |
| 4-1 3/4" x 14" LVL | HGUS7.38/14 |
| 4-1 3/4" x 16" LVL | HGUS7.38/14 |
| 4-1 3/4" x 18" LVL | HGUS7.38/14 |




OPT. SUNROOM
SCALE: 1/4" = 1'-0"




OPT. SUNROOM
SCALE: 1/4" = 1'-0"

| FOOTING SCHEDULE |
|---|
| ⚠1 24"x24"x12"Dp. POURED CONC. FOOTING. |
| ⚠2 30"x30"x12"Dp. POURED CONC. FOOTING w/#4's @ 24" O.C. EA. WAY |
| ⚠3 36"x36"x12"Dp. POURED CONC. FOOTING w/#4's @ 24" O.C. EA. WAY |
| ⚠4 42"x42"x12"Dp. POURED CONC. FOOTING w/#5's @ 24" O.C. EA. WAY |

NOTE:
PROVIDE FIRE BLOCKING AND DRAFTSTOPPING AT ALL CONCEALED FLOOR & WALL SPACES TO COMPLY W/2012 N.C.R.C. R302.8 & R302.12

GENERAL NOTES:
1. ALL FRAMED WALLS THAT FORM THE THERMAL BARRIER OF A HOUSE SHALL HAVE INSULATION INSTALLED FREE 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 UN-HEATED SIDE OF ALL KNEE WALLS.

2. ALL SILLS OF OPERABLE WINDOWS GREATER THAN 72" ABOVE GRADE OR WALKING SURFACE BELOW MUST HAVE A SILL H.T. OF 24" MINIMUM ABOVE THE FINISHED FLOOR OF THE ROOM IN WHICH THE WINDOW IS LOCATED. IF THE SILL HT. IS LESS THAN 24" THE WINDOW MUST MEET THE REQUIREMENTS OF SECTION R612 OR R312.

| SQUARE FOOTAGE | |
|---|---|
| HEATED | |
| OPTIONAL SUNROOM | 96 SF |

Acknowledgement of Plans Submittal ONLY!

Date 11/16/16

Date 11/22/16

NOTE: ALL WINDOWS TO BE LOW 'E' GLASS
NOTE: DESIGNED AND ENGINEERED FOR THE 2012 N.C.R.C.

WALL BRACING NOTES:
1. THE STRUCTURAL BRACING REQUIREMENTS FOR THIS PLAN HAVE BEEN ACCOMPLISHED FOR UTILIZING AN ENGINEERED DESIGN AS PERMITTED IN SECTION 301.1 OF THE 2012 NORTH CAROLINA RESIDENTIAL CODE WITH REFERENCE TO ALL 2012 AMENDMENTS.

2. ALL PERIMETER WALLS ARE TO BE FULLY SHEATED WITH A MINIMUM 7/16" O.S.B. AND ATTACHED TO THE WALL FRAMING STUDS WITH 8d (2.5"x0.13") NAILS AT 6" O.C. SPACING AT PANEL EDGES AND 12" O.C. AT INTERMEDIATE SUPPORTS.

3. INSTALL BLOCKING ALONG O.S.B. PANEL EDGES. FASTEN PANEL EDGES TO BLOCKING AT 3" O.C. AND 6" O.C. AT INTERMEDIATE FRAMING SHOE LESS THAN 305 MUST BRACKEN THAN 25% OF THE WALL IS SHEATHED.

4. SHEATH ALL GABLE END WALLS WITH 7/16" O.S.B.


Southern Dynamic Engineering and Design, PLLC
P.O. Box 87
Waxhaw, NC 28173
NC Cert. of Licensure P-0713
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I.Q. CUSTOM CONSTRUCTION
840 Edmiston Rd.
MT. Ulla, NC 28125 Ph. 704-660-5738

Project: THE BURNSIDE HOUSE PLAN

Sheet Title: OPTIONAL SUNROOM

Drawn By: JR
Date: 09-9-16
REV: 09-09-16
09-09-16
Site:

IQBRNSIDE

Sheet: 3a

# IREDELL COUNTY

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

| APPLICATION NUMBER |
|---|
| 222719 |
| Issue Date: 10/25/2016 |

## ZONING PERMIT

Residential

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4676508833.000 | 931 LINWOOD ROAD, STATESVILLE, NC 28115 | |

| Owner Information | Applicant Information |
|---|---|
| Owner: BRAWLEY WOODS LLC | Applicant: CAROLINA SOIL SEPTIC C |
| Address: 114 MORLAKE DR STE 103<br>MOORESVILLE, NC 28117 | Address: 162 WEST B ST<br>KANNAPOLIS, NC 28081 |
| Phone: - - | Phone: 704-202-5791 |

| Use Requested | Zone Code |
|---|---|
| SFD | RA |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| | 35.00 | 35.00 | 15.00 | 15.00 | | 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 | 84013 | TOTAL FEES: | $ 77.25 |
|---|---|---|---|