IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # 2199986

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

PIN # 4676625819

APPLICANT/OWNER: Troy Hayes / Kent Shaw + Sons Const. APPLICANT ADDRESS: PO Box 1061 Troutman, NC

SITE ADDRESS: 111 Marston Ct. Mooresville, NC 28115 PHONE: 704-902-0086 ALT. PHONE 704-528-4494

SITE DIRECTIONS: NC 35 → L on Williford → R on Linwood → L on Teeter → R on Walden → R on Marston → lot at end SAP CONTROLLED: ☐ YES ☑ NO

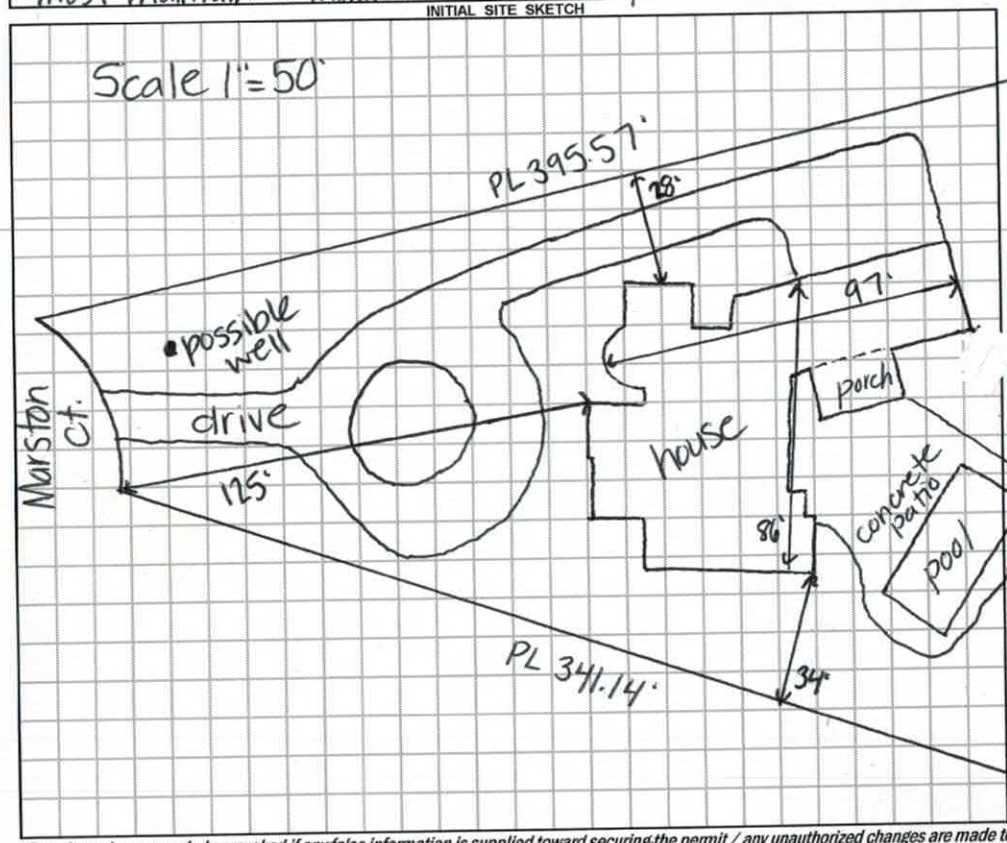
SUBDIVISION: Walden Ridge SECTION: — LOT # 9 LOT AREA: 1.52ac DESIGN FLOW: 600gpd L.T.A.R.: .3

Septic Tank	1500 (gal)	STB	964	Date	12-15-18	☑ New System ☐ Repair ☐ Expansion	System Type: I II III IV V VI	☑ Residence	No. Bedrooms 5
Pump Tank	(gal)	PT		Date		System Description:	25% reduction	☐ Business	No. Persons 10
Pump Make		Model		Serial #		Repair System Description:	PM 25% reduction	☐ Other	No. Employees
# Nitrification Fields	1	# Lines	5@100'	Linear Ft	500'	Maintenance Agreement Required:	☐ YES ☑ NO	☐ Slab	☑ Crawl Space
Trench Width	36"	Trench Bottom Depth(Low side)	36"/36" high side	Gravel Depth	—		☑ GRAVITY ☐ PRESSURE	☐ Basement w/plumbing	☐ Basement w/o plumbing

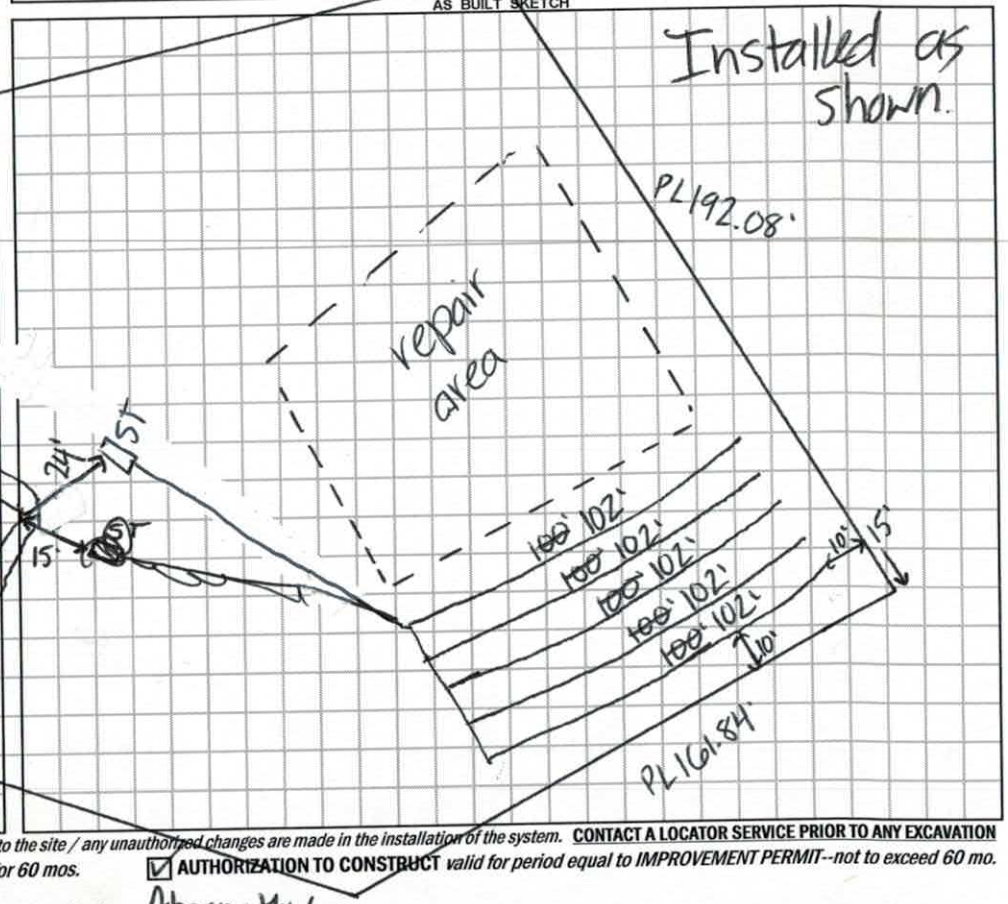
Water Supply: ☑ Private ☐ Public ☐ Community

Comments / Conditions: Install 25% reduction with serial distribution and drain lines on contour. Install at 36" highside. Supply line must maintain a minimum of 10' from pool. Pool area should be staked during time of install. Septic tank must maintain a minimum of 15' from pool.

INITIAL SITE SKETCH



AS BUILT SKETCH



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: 8-2-18 Installed by: Abernathy

IMPROVEMENT PERMIT by: Kayla Watson Date: 8-1-18 OPERATION PERMIT by: Kayla Watson Date: 4-25-19

AUTHORIZATION TO CONSTRUCT by: Kayla Watson Date: 8-1-18 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Sheet: 1 OF 1
PIN #: 4676-62-5819
Lot #: 9
Permit #: 219986
AppID:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Owner: THORNTON BROOKS
Address: 741 BIG INDIAN LOOP, MOORESVILLE, NC 28117
Proposed Facility: SFR Design Flow (.1949) 600
Location of Site: WALDEN RIDGE LOT 9
Water Supply: [ ] Public [X] Individual [X] Well [ ] Spring [ ] Other
Evaluation Method: [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

Applicant: THORNTON BROOKS
Date Evaluated: 7/29/2016
Property Size: 1.52 AC
Property Recorded: YES

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
AB 1	LINEAR 4%	0-31	RC,M,ABK	SS	NA	50"	NA	50"+	.3
		31-50	RCL,W,SBK	SS					
AB 2	LINEAR 4%	0-37	RC,M,ABK	SS	NA	50"	NA	50"+	.3
		37-50	RCL,W,SBK	SS					
AB 3	LINEAR 4%	0-30	RC,M,ABK	SS	NA	50"	NA	50"+	.3
		30-42	RC,M,SBK	SS					
		42-50	RCL,M,SBK	SS					
AB 4	LINEAR 4%	0-30	RC,M,ABK	SS	NA	51"	NA	51"+	.3
		30-43	RC,M,SBK	SS					
		43-51	RCL,W,SBK	SS					

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	G-25% RED	PM-25% RED
Site LTAR	.3	.3

Other Factors (.1946):
Soil Evaluation By: BEN ALDRIDGE
Others Present: NONE
Site Classification (.1948): PS
Site Evaluation By: BEN ALDRIDGE
Others Present: NONE

219986 pd $320

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

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

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

Page 2: *Site Plan Worksheet* form MUST accompany this application

The following optional attachments may also be submitted: (✓) Survey Plat, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Kent Shaw & Sons Const. Address: PO Box 1061 Troutman NC Zip: 28166
Applicant Email: chrisshaw72@gmail.com Phone: 7049020086 Alt. Phone: 7045284494
Owner Name: Troy Hayes Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 111 Marston Ct. Mooresville NC 28115
Subdivision Name: Walden Ridge Section/Phase: _____ Lot Number: 9
Driving Directions: Linwood, TL Teeter, TR Walden, TR Marston, End of L

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: 5
Maximum Number of Occupants: _____
(✓) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: _____ Number of Persons: _____

(✓) 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: _____ 7/17/18
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Public Health
Iredell County Health Department

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

Public Health
Iredell County Health Department

1. *** APPLICANT AND OWNER ARE THE SAME. *** *(Sign here)* _____

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.

2. I, Leslie Hayes, am the legal owner(s) of the property located at 111 Marston Ct. Mooresville NC 28115, identified as

PIN (Parcel Identification Number) 219986, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) Kent Shaw + Sons 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.

Leslie Hayes
Signature of Owner(s)

7-27-18
Date

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

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

GENERAL CONSTRUCTION NOTES

Scope of work: The construction of a single family residence to be built according to **2012 North Carolina Residential Code** (NCRC), local codes, and to best building practices.

The following construction notes do not reference all relevant code or construction issues. The intention of these construction notes is to clarify specific matters.

These plans should be studied and used in their entirety as information vital to each stage of construction will appear on more than one sheet. See structural drawings for additional information.

The architect makes every effort to use only products and techniques recognized at the time as appropriate for the applications shown. However, many items shown on these plans are in generic terms and are left to the owner's and/or contractor's discretion or are shown specifically as requested by the owner and/or contractor.

Dimensions on foundation plans are from face of masonry or concrete wall, as indicated.

Drawings shall not be scaled; use labeled dimensions only.

Details take precedence over plans & elevations. Larger scaled drawings take precedence over smaller scaled drawings.

Contractor shall procure all permits and inspections of the work.

Contractor must verify all local codes, HOA requirements, and site conditions (including location of on-site utilities and easements) prior to construction.

General contractor shall be held solely responsible for completion of all work shown or reasonably implied by these drawings and/or specifications. She/He shall confirm all dimensions and conditions at the site and shall immediately notify the architect in writing of any discrepancies.

If contractor discovers a construction deviation from the plans, it is contractor's responsibility to bring into compliance with the plans or contact the architect before proceeding. General contractor assumes liability for any deviation from the plan not approved by the architect.

Contractor shall verify dimensions.

All work shall be performed by qualified mechanics using new, first quality materials installed in accordance with best trade practices.

Job site shall be kept broom clean at all times.

Contractor shall install temporary barricades at any openings that may cause potential injury to anyone on job site.

CONCRETE

Concrete for footings and slabs shall be 3000 PSI, min.
All footings shall bear directly on undisturbed soil.

Refer to plans for reinforcing of concrete walls and concrete footings.

Coordinate with Electrical Contractor and Plumbing Contractor for the installation of all in slab piping and conduits prior to pouring of concrete slab.

Step footings, where site conditions dictate, shall be installed as allowed by code. Form and reinforce all step footings.

Install a continuous exterior foundation drainage system around perimeter of building and at all interior foundation walls. Pipe to outfall pipe, location to be determined in field.

TERMITE PROTECTION

All house foundations & slabs shall be pretreated for termites by a licensed exterminator.

FRAMING NOTES AND SPECIFICATIONS

Refer to framing plans for notes and framing member sizes and locations (Sheets S1 - S5).

Contractor shall verify dimensions and existing structural conditions (inc. footings, foundations, floor joists).

Install load transfer blocking under all load bearing partitions, and point loads above.

Refer to general notes and structural drawings & notes for additional information.

All floors shall be ¾" T & G sub-floor, glued and nailed/screwed to floor joists.

Double all floor joists under parallel partitions above.

Install all Fasteners (Joist Hangers, Column Caps, Bases, Holc-downs, etc.) according to manufacturer's specification.

Framing lumber shall be #2 SPF or better structural grade lumber (unless specified otherwise).

Framer shall visually inspect all lumber to be left exposed and painted such as rafter tails. Exposed lumber will be clean, free of excess knots, splits and checks.

All fasteners and connections to structural members within 18" of ground to be rated for use in P.Treated lumber, sub-floor, and sheathing.

WATER AND MOISTURE PROTECTION

Provide foundation waterproofing where exterior grade is above crawl space or basement slab and install 4" perforated plastic foundation drains and slope to on-site natural drainage courses. Use washed stone backfill and geo-technic fabric per code (2012 NCRC).

All building exterior surface penetrations with potential exposure to weather shall be flashed and/or caulked as per code and/or industry-recognized proper construction techniques. All roof shingle flashing against a vertical side wall shall use step flashing.

All flashing shall be turned out at lower edge to direct water out of structure.

All flashing shall be copper, aluminum or PVC, unless noted otherwise.

If any type of lap siding other than vinyl is used, provide a continuous, sealed weather barrier behind any vertical or sill trim with barrier turned out at first siding course below trim.

If any type of lap siding other than vinyl is used, wrap all corners w/ Weather Barrier extending 12" horizontally beyond vertical joints and turned out over cladding or flashing at bottom of joint.

Install roofing materials according to manufacturer's recommendation for the area and climate. Including but not limited to shingles, sise, felts, flashing and flashing devices.

Install all exterior finish materials per manufacturer's recommendations (i.e. control joints, attachment/anchoring devices, flashing, sealants, etc.)

For roof pitches over 4/12 (33% slope) use 30# felt underlayment. For roof pitches from 2/12 to 4/12 (17% to 33% slope) use self-adhering polymer modified bitumen sheet (Ice & Water shield) in lieu of 30# underlayment.

Roof sheathing: for rafters @ 16" o.c. use 1/2" plywood (unless noted otherwise). For rafters @ 24" o.c. use 5/8" plywood w/ 5/8" plywd. clips (unless noted otherwise).

ELECTRICAL
Contractor shall install ground fault interrupt outlets as per code.

Provide smoke and CO2 detectors as required by code.

Provide doorbells, transformer, and chime. Verify location with OWNER.

See ELECTRICAL PLANS for diagram of electric layout. Electrical contractor to install electrical system per NC code.

HVAC NOTES

Selection of new HVAC system shall be coordinated with Owner and HVAC Contractor. Design heating system to maintain 72 F inside at -5 F outside. Design cooling system to maintain 74 F inside at 94 F outside.

Use high efficiency AIR Source Heat Pump(s). Locate Heat Pumps on EAST side of house per SITE PLAN and mount on a precast concrete pad. Confirm location with OWNER.

USE 2 thermal zones: Main Level and Upper Level with Air Handling Units (A.H.U.) located in the Conditioned Crawl Space and Conditioned Attic, respectively.

In order to ensure adequate fresh air provide an insulated duct to draw in fresh air when Air Handling Unit(s) cycles on.

Provide OWNER the option of using high performance air filters (min. MERV 8).

All duct work shall be insulated.

Ceiling diffusers should direct the air directly down and not to the side or in multiple directions.

Locations of supply and return vents to be reviewed/approved by Architect or OWNER prior to installations.

Coordinate the location of interior wall-mounted programmable thermostats with Owner.

HVAC contractor shall coordinate with contractor the installation of duct work for bathroom or kitchen exhaust equipment.

Any through roof or through wall venting of HVAC equipment shall be done so as not to be seen at front side of residence. Coordinate locations with Architect prior to start of roughing.

Coordinate the location of exhaust fan for the kitchen cooktop. Mount fan so as not to be seen at front or lake side of residence. Provide make-up air as req'd by size of exhaust hoods (main and lower levels).

Provide gas line for outdoor grill (coordinate with owner).

PLUMBING NOTES

Plumbing work shall comply with all codes having jurisdiction over it.

Provide plumbing work as indicated on floor plans.

Fixtures to be selected by Owner. Coordinate.

Verify with OWNER if supply lines are to be copper or cross-linked polyethylene (PEX).

All waste lines to be PVC. Verify with OWNER regarding the upgrade to cast iron drops.

Locate hose bibs in field with Owner.

All work should be performed using first quality materials installed using best trade practices.

EXTERIOR MATERIALS

All wood used in construction of decks and steps shall be treated (unless specified otherwise). Fasteners for treated wood (nails, bolts, etc.) shall be galvanized.

All exterior wood trim and exposed detailing shall be back primed prior to installation.

Windows to be Jeld-Wen Premium Vinyl except where arch/top windows need to be constructed of clad Wood windows. Verify with Owner regarding the recommendation of using Low-E3 glass, tinted and low-UV glass on West and East elevations. ALL WINDOW TO HAVE GRILLES BETWEEN GLASS (GBG) CONFIRM PRAIRIE STYLE W OWNER & ARCHITECT.

Use tempered, safety glass in ALL locations required by building code.

INSULATION

The EXTERIOR envelope of the HOUSE to be insulated (Walls R-15 min., Roof/ceiling R-38 min., Floor R-24 min). Second Floor Roofs (including Attic) to be Unvented and insulated with Icynene foam.

INTERIOR NOTES

The interior doors and trim are to be selected by Owner. Unique interior trim and cubby details to be resolved with Owner, Architect, and Contractor prior to finish of framing in order for all blocking and dead wood to be installed prior to completion of rough framing work.

All drywall partitions shall be 1/2" drywall (unless noted otherwise), finished with taped joints, with a smooth finish on walls and smooth ceiling and painted as per specification. All drywall in wet areas shall be green board. Use cement board substrate (e.g. WonderBoard) in shower/bath tub space.

Refer to drawings for additional comments and specifications.

Flooring materials shall be as indicated on plans. Submit samples to owner prior to start of flooring work.

Carpet, to be selected by Owner, shall be installed on sub floor, thickness as needed to make flush with adjacent floor surfaces.

Ceramic tile flooring shall be as selected by Owner. Install all ceramic tile over cement board substrate (e.g. WonderBoard). Install tile in the shower over mud bed and membrane. Carry membrane up and over bench. Slope bench slightly to allow for water drainage. Slope floor to shower drain. Coordinate selection of shower door.

Paint colors and wall coverings to be selected by Owner. Use Low VOCs or Zero VOC paint (Coordinate with OWNER).

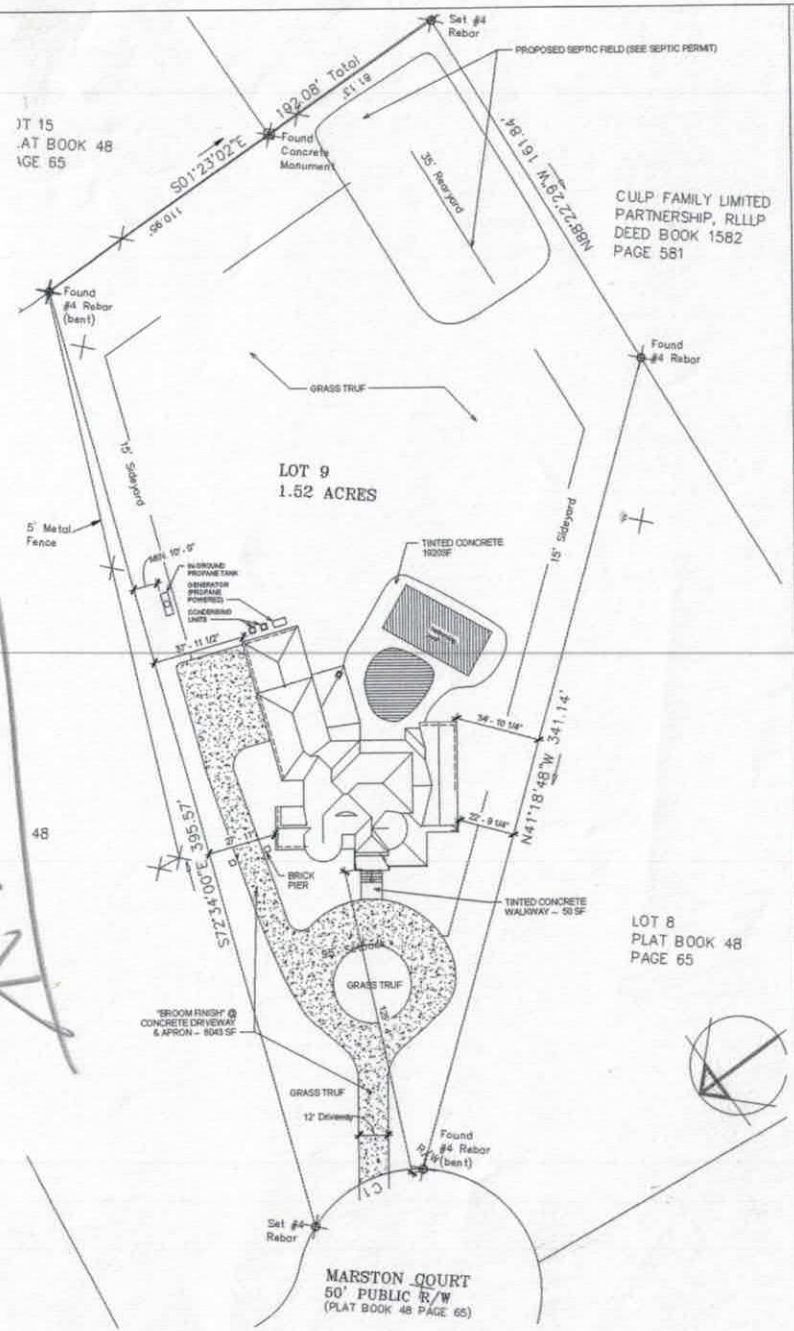
Any built-in work to be coordinated with Owner and Architect prior to fabrication.

AREAS

MAIN LEVEL	2818 SF
UPPER LEVEL	1714 SF
TOTAL HEATED	4532 SF
GARAGE	852 SF
FRONT PORCH	250 SF
SCREEN PORCH	391 SF
UNHEATED SPACES	1493 SF

DRAWING INDEX

A1	SITE PLAN
A2	FIRST FLOOR PLAN
A3	SECOND FLOOR PLAN
A4	NW & SE ELEVATIONS
A5	NE & SW ELEVATIONS
A6	DETAILS
S1	FOUNDATION
S2	MAIN FLOOR STRUCTURE
S3	PARTIAL ROOF/2ND FLOOR
S4	UPPER ROOF FRAMING



pbc ARCHITECT
PAUL B. CLARK, ARCHITECT PLLC
P.O. Box 1586
Davidson, NC 28036
704.650.4070
Paul@pbcARCHITECT.com

Leslie and Troy Hayes
111 Marston Court
Mooresville, NC

Project Num	Project Number
Date	11.28.2016
Drawn By	Author
Checked By	Checker

Notes
This drawing & design remain are the property of Paul B. Clark Architect PLLC. Any unauthorized use or reproduction is subject to legal action.

SITE PLAN

A1

12/7/2016 8:36:05 PM

IREDELL COUNTY HEALTH DEPARTMENT
JANE MURRAY, RN BSN MS
HEALTH DIRECTOR

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

Voluntary Relinquishment of Administrative Appeal Rights
(Completion of Form by Property Owner)

Aug 2, 2018 (Date)

Owner: TROY Hayes
Address: 113 Walnut Hill Ct.
Mooresville, NC 28115

Subject: Voluntary Relinquishment of Administrative Appeal Rights

(specify Permit ID/owner's name/property location/site legal description):
PIN 4676625819 Troy Hayes
111 Marston Ct Mooresville, NC

I, Troy Hayes (print full name), voluntarily relinquish my rights to pursue a formal appeal through the Office of Administrative Hearings pursuant to NC General Statute 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B for the above referenced permit in order for the authorized agent/local health department to issue the applicable permit (new IP and/or CA) for the site. I understand by completing this form the previous permit issued on 8-1-2016 (date) for a system 25% reduction (system name) for the site will be "revoked" immediately by the authorized agent/local health department.

Signature of Property Owner

Central Office
318 Turnersburg Hwy
Statesville, NC 28625
704 878-5300

Mooresville Office
610 E. Center Avenue
Mooresville, NC 28115
704 664-5281

Environmental Health
349 N. Center Street
Statesville, NC 28677
704 878-5358

http://www.co.iredell.nc.us/Departments/Health/

RECEIVED JUN 30 2016

219986
38676

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 ✓ Paid $500.00 #219986
   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:**

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Thornton Brooks Jr.	741 Big Indian Ln Mooresville NC 28117	704-664-6977	704-344-5944
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
Thornton Brooks Jr.	741 Big Indian Ln Mooresville NC 28117	704-664-6977	704-344-5944

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
111 Marston Court Mooresville NC 28117	Walden Ridge	#9

Driving Directions: From Mooresville's Main Street north, right on Linwood Rd, left on Treeter Rd, right on Walden Drive, right on Marston Ct, property on left in Cul de sac.

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

(✓) New, Single Family Residence — Maximum Number of Bedrooms 5 — (✓) Crawl Space Foundation?
( ) New, Multi-Family Residence — Maximum Number of Occupants 10 — ( ) Concrete Slab Foundation?
( ) Expansion of Existing Septic System — If Expansion, Current Number of Bedrooms ___ — ( ) Basement w/Plumbing?
( ) Repair To Failing Septic System due to ___ — ( ) Basement w/out Plumbing?
( ) Other ___

IF Non-Residential Site Development:

Type of Business	NA
Square Footage of Building	NA
Maximum Number of Employees	NA
Maximum Number of Seats	NA

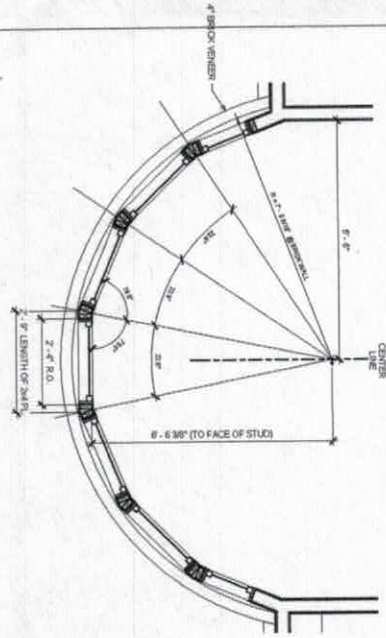
6. **Proposed Water Supply:**
(✓) New Well ( ) Existing Well ( ) Community Well ( ) City Water ( ) Other Public Water

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed NA (Year)
( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional (✓) Other 25% reduction

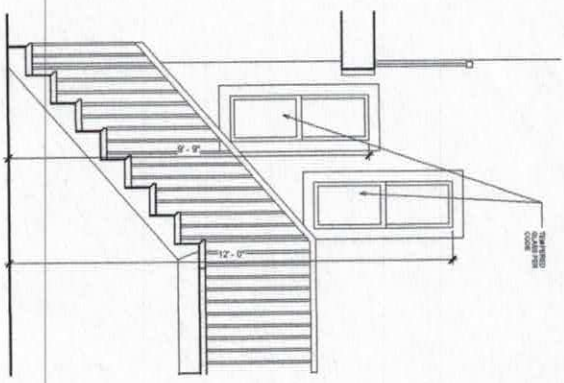
8. **Please Answer The Following To The Best of Your Ability:**
( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes (✓) No Is the site subject to approval by any other public agency?

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.

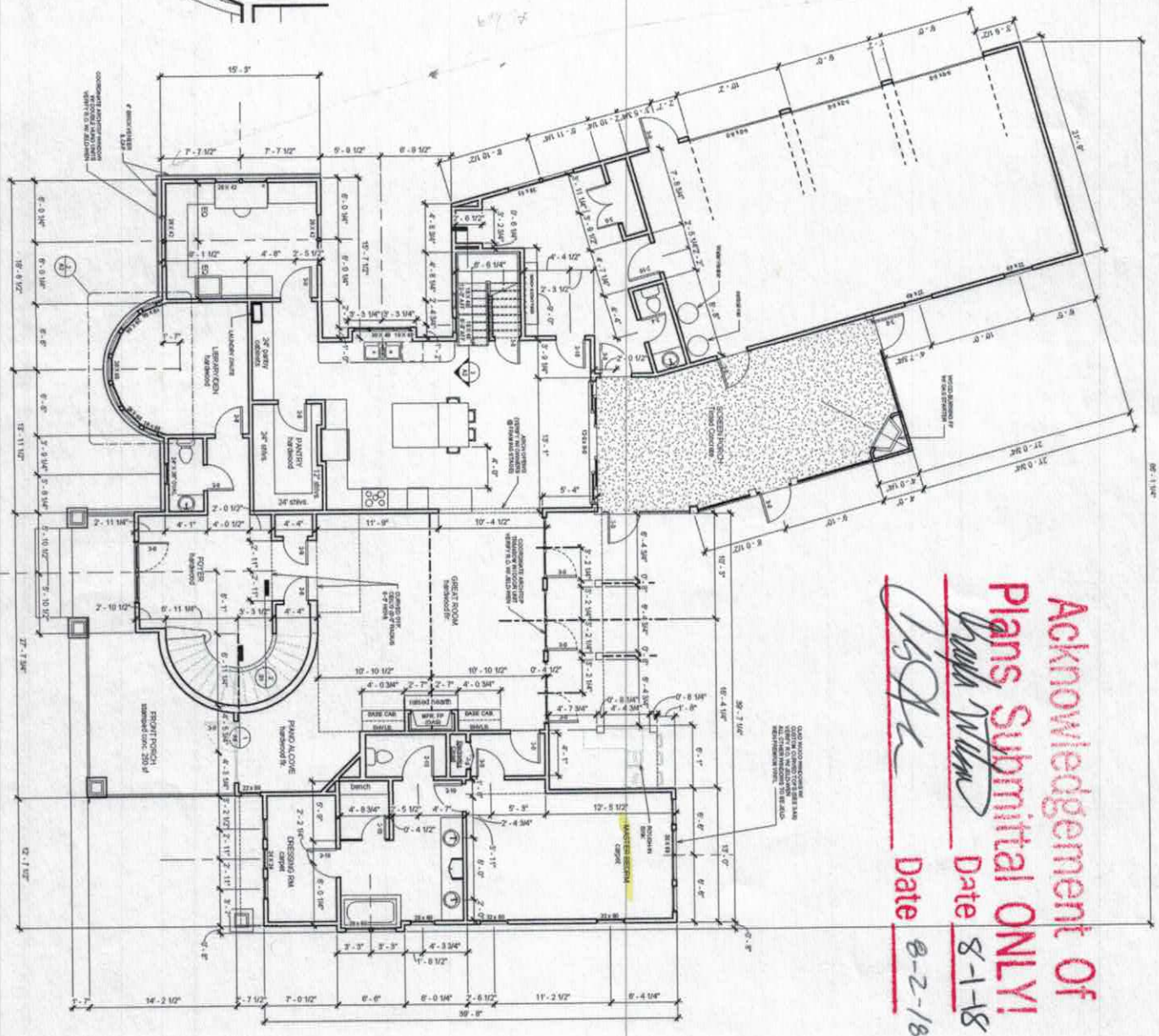
9. **Signature:** Thornton Brooks Jr. — 6/20/16
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE



③ PLAN DETAIL @ DEN LIBRARY
3/4" = 1'-0"



③ BACK STAIRS
3/4" = 1'-0"



Acknowledgement of Plans Submittal ONLY!

Date 8-1-18

Date 8-2-18

A2	MAIN FLOOR	Project Num/Project Number Date 11.26.2018 Drawn By Author Checked By Checker Mark This property is protected as an unpublished work under the applicable copyright laws.	Leslie and Troy Hayes 111 Marston Court Mooresville, NC		PAUL B CLARK ARCHITECT PLLC PO Box 1540 Davidson, NC 28036 704.450.4670 Paul@pbcARCHITECT.com

12/1/2018 6:38:08 PM

Acknowledgement Of Plans Submittal ONLY

Date 8-1-18

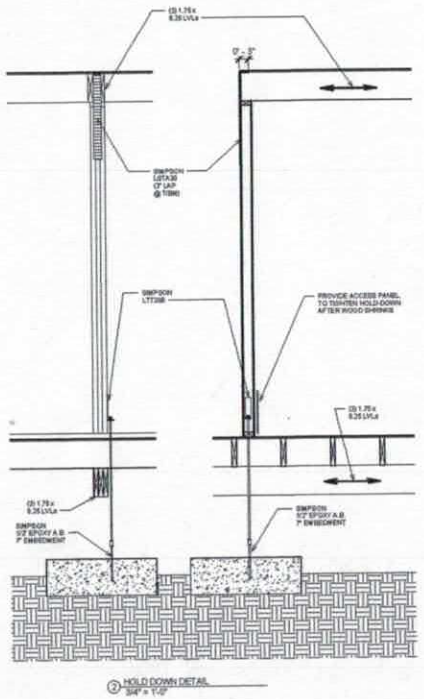
Date 8-2-18

A3	SECOND FLOOR	Leslie and Troy Hayes 111 Marston Court Mooresville, NC	PAUL B CLARK ARCHITECT PLLC PO Box 1560 Davidson, NC 28036 704.450.4570 Paul@pbcARCHITECT.com	Paul B. Clark, Architect, PLLC 52105 North Carolina	pbc ARCHITECT

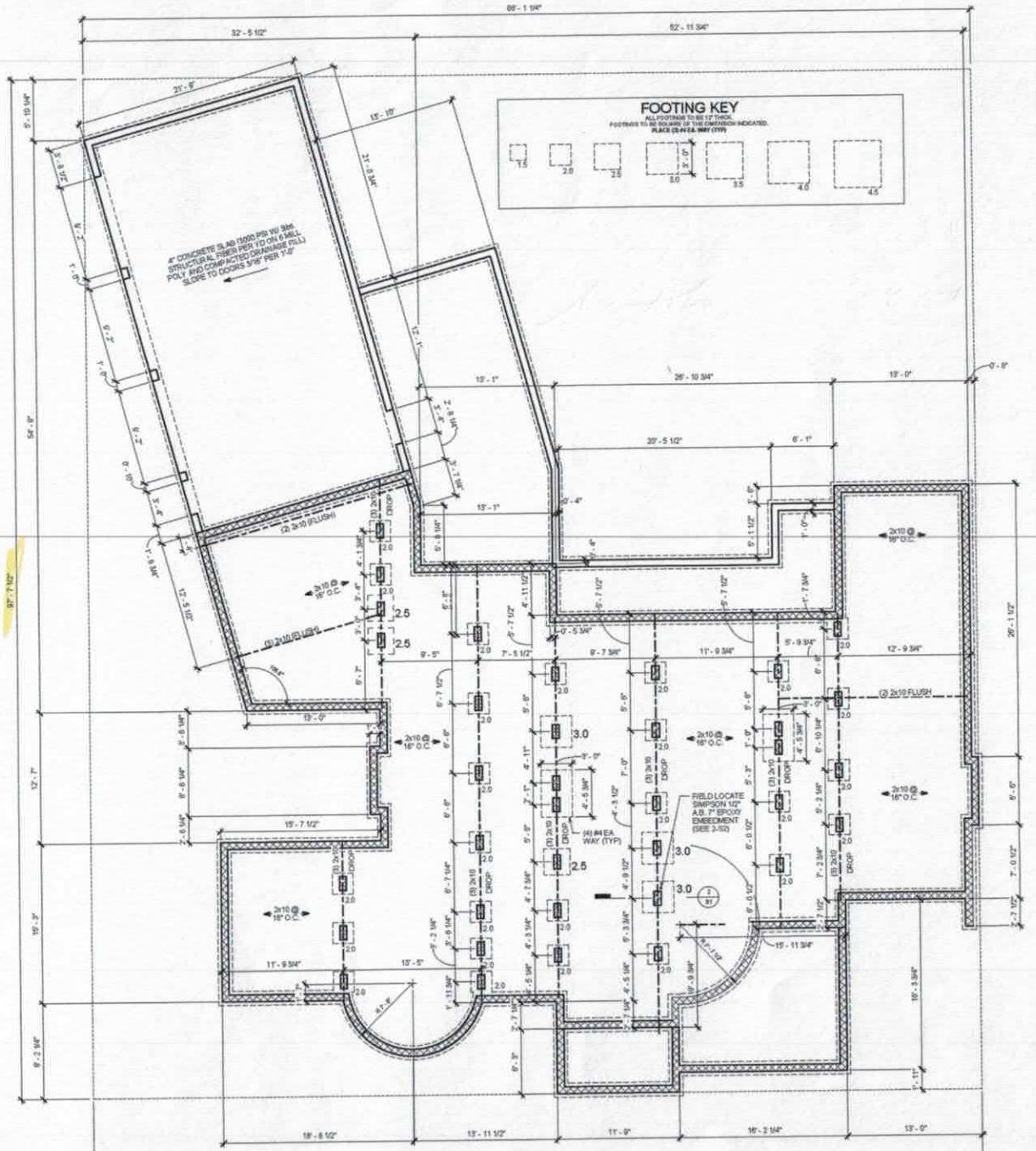
Project No/Project Number
Date 11.26.2018
Drawn By Author
Checked By Checker

12/1/2018 6:36:10 PM

Acknowledgement Of
Plans Submittal ONLY!
Date 8-1-18
Date 8-2-18



② HOLD DOWN DETAIL
3/4" = 1'-0"



① 1ST FOUNDATION - CRAWL SPACE
1/4" = 1'-0"

pbc ARCHITECT
Paul B. Clark Architect, PLLC
NC 28035
PAUL B. CLARK ARCHITECT PLLC
P.O. Box 1
Davidson, NC 28036
704.650.4870
PaulB@pbc-ARCHITECT.com

Leslie and Troy Hayes
111 Marston Court
Mooresville, NC

Project Nun	Project Number
Date	11.28.2016
Drawn By	Author
Checked By	Checker

Notes:

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FOUNDATION

S1

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IREDELL COUNTY

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

APPLICATION NUMBER
219986
Issue Date: 06/30/2016

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4676625819.000	111 MARSTON COURT, MOORESVILLE, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: BROOKS THORNTON N JR+DANETTE M	Applicant: BROOKS THORNTON N JR+D
Address: 741 BIG INDIAN LOOP MOORESVILLE, NC 28117	Address: 741 BIG INDIAN LOOP MOORESVILLE, NC 28117
Phone: 704-344-5944	Phone: 704-344-5944

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.520	35.00	35.00	15.00	15.00	BOWC	X

Remarks:

$ PAID

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: See Attached Date: _____

Permit Number	73212	TOTAL FEES:	$ 77.25