IREDELL COUNTY HEALTH DEPARTMENT KW

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 233351

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

PIN # 4679525575

APPLICANT/OWNER: TLC Family Homes APPLICANT ADDRESS: 201 Sassafras Rd Mooresville, NC 28115

SITE ADDRESS: 2350 Sloop Rd Mt. Vila, NC 28125 PHONE: 704-724-3111 ALT. PHONE

SITE DIRECTIONS: Hwy 801 N TR Sloop Rd property on right SAP CONTROLLED: ☐ YES ☒ NO

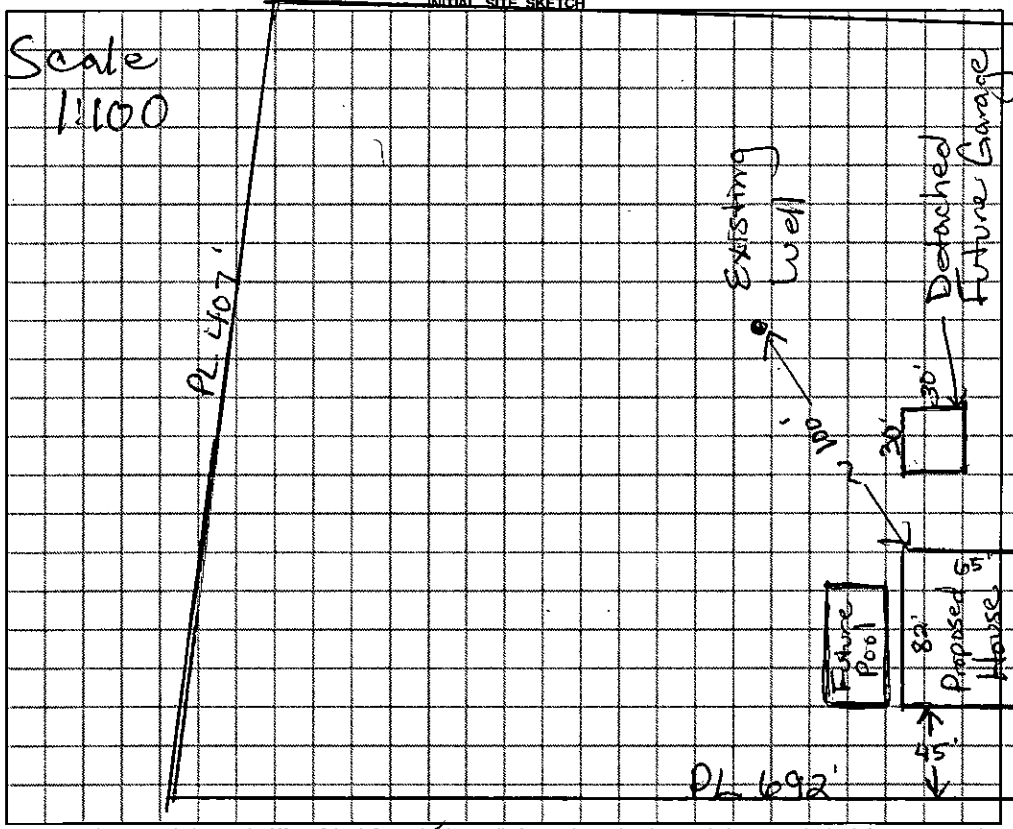
SUBDIVISION: SECTION: LOT # LOT AREA: 6.0 Acre DESIGN FLOW: 480gpd L.T.A.R.: .3

Septic Tank	1000	(gal)	STB		Date	☒ 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 Exist.
Pump Make			Model		Serial #	Repair System Description:	Same			☐ Other	No. Employees	☐ Public
# Nitrification Fields	1		# Lines	4	Linear Ft. 400'	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☐ Crawl Space	☐ Community
Trench Width	36"		Trench Bottom Depth(Low side)	36"	Gravel Depth N/A		☒ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing		☐ Basement w/o plumbing

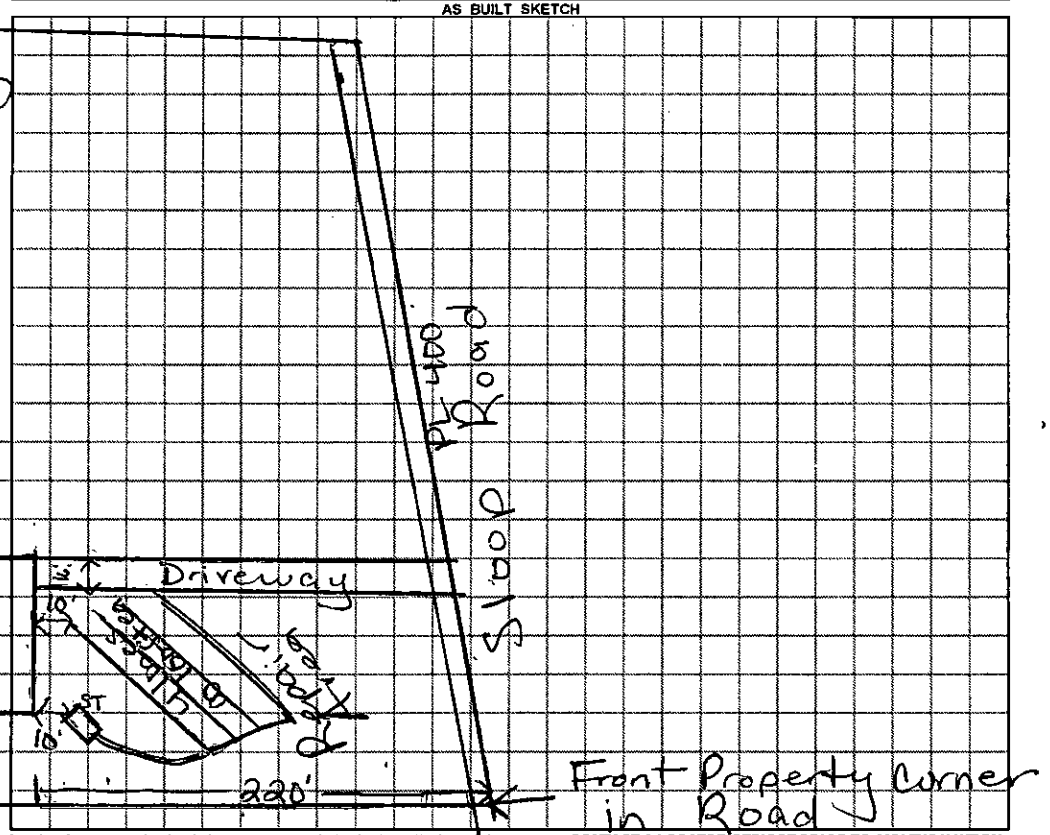
Comments / Conditions: Divert storm/surface water away from Septic. No Vehicular traffic over Drain field

See Attached

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**

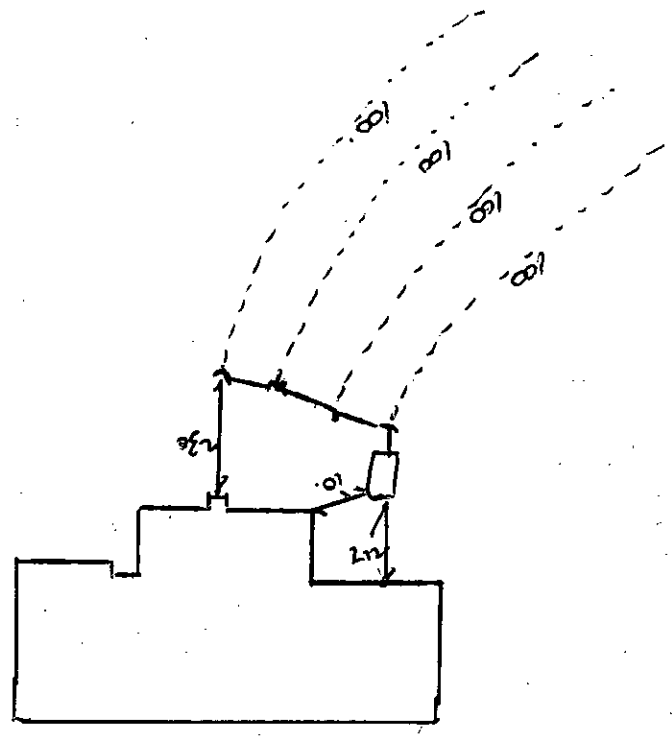
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Date: 4/3/18 Installed by: Bowen Septic

IMPROVEMENT PERMIT by: Date: 4/3/18 OPERATION PERMIT by: Date: 5/31/2018

AUTHORIZATION TO CONSTRUCT by: Date: 4/3/18 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.


100
100
100
100
2.3m
1.0
2.1m

2:30 2/23/18 talked to Builder to schedule pits

RECEIVED FEB 12 2018

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $500.00 #233351

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) Septic Improvement Permit (X) 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: TLC Family Homes LLC (Tim) Address: 201 Sassafras Rd Zip: 28115
Applicant Email: TLCfamilyhomes@yahoo.com Phone: 704-724-3111 Alt. Phone: —
Owner Name: Robert+Christine Beaudoin Address: 132 Scanlon Rd Zip: 28115
Owner Email: b.beaudoin1025@yahoo.com Phone: 704-754-0539 Alt. Phone: —

Property Information:

Street Address: 2350 Sloop Rd Mt Ulla, NC 28125
Subdivision Name: Null Section/Phase: Null Lot Number: Null
Driving Directions: Take 801 N, take right onto Sloop Rd, property on right

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

(X) New Single Family Residence
( ) New Multi-Family Residence
(X) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem:
Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 5
(X) Swimming Pool
( ) Other Addition/Structure:
Non-Residential Site Development: Type of Business:
Square Footage of Building: Max. Number of Employees: Max. Number of Seats/Beds/Other:

CHECK FOUNDATION TYPE

(X) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Water Supply: ( ) Replacement Well – Reason:
( ) Multi-connection Well Number of Houses: Number of Persons:
( ) New Well (X) 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 (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other:

Please answer the following to the best of your ability:
( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industrial) 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.

Signature: _____ 2-6-18
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, Robert Christine Beaudoin, am the legal owner(s) of the property located at 2350 Sloop Rd. Mooresville, NC 28125, identified as PIN (Parcel Identification Number) _____, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) TLC Family Homes, LLC, 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.

Christine L Beaudoin
Robert L Beaudoin — Signature of Owner(s)

2-3-18 — Date

Robert O. Eaton — Signature of Witness

2-3-18 — 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

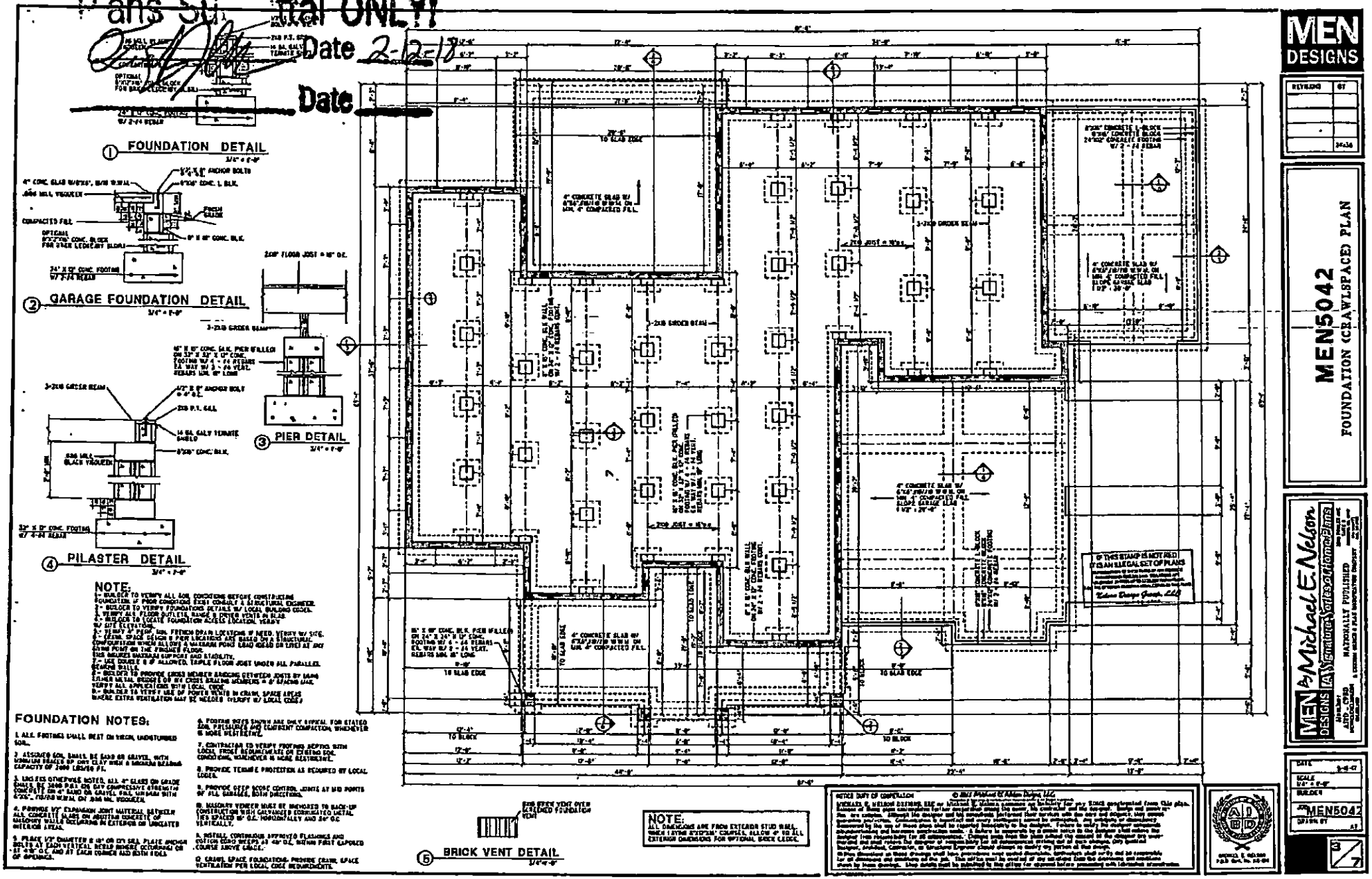
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Acknowledgement Of

Plans Submittal ONLY!!

Date 2-12-18

Date



NOTE:

1.- BUILDER TO VERIFY ALL SIZE CONDITIONS BEFORE CONSTRUCTION. FOUNDATION IF FIELD CONDITIONS EXIST CONSULT A STRUCTURAL ENGINEER.
2.- BUILDER TO VERIFY FOUNDATION DETAILS W/ LOCAL BUILDING CODES.
3.- VERIFY ALL FLOOR OUTLETS, RANGE & PAPER TOWEL IN BLDG.
4.- BUILDER TO LOCATE FOUNDATION ACCESS LOCATION, VERIFY W/ SITE ELEVATIONS.
5.- VERIFY IF FIELD INSTALL FRENCH DRAIN LOCATIONS IF NEED. VERIFY W/ SITE.
6.- CRAWL SPACE DEPTH & PIER LOCATIONS ARE BASED ON A STRUCTURAL CONFIGURATION WHICH ALLOWS A MAXIMUM POINT LOAD (DEAD OR LIVE) AT ANY GIVEN POINT ON THE FINISHED FLOOR.
THIS BALANCES MATERIAL USE POCKET AND STABILITY.
7.- USE DOUBLE 2 X 8 ALLOWED, TRIPLE FLOOR JOIST UNDER ALL PARALLEL BEARING WALLS.
8.- BUILDER TO PROVIDE CROSS MEMBER BRACING BETWEEN JOISTS BY SAME SIZE LUMBER METAL BRIDGE'S OR 1X4 CROSS BRACING MEMBERS @ 8' SPACING MAX. VERIFY ALL APPLICABLE WITH LOCAL CODE.
9.- BUILDER TO VERIFY USE OF POWER VENTS IN CRAWL SPACE AREAS WHERE EXTRA VENTILATION MAY BE NEEDED (VERIFY W/ LOCAL CODE)

FOUNDATION NOTES:

1. ALL FOOTINGS SHALL REST ON VIRGIN, UNDISTURBED SOIL.
2. ASSUMED SOIL SHALL BE SAND OR GRAVEL, WITH MINIMUM ENGLISH OF DRY CLAY WITH A MINIMUM BEARING CAPACITY OF 2000 LBS/SQ FT.
3. UNLESS OTHERWISE NOTED, ALL 4" SLABS ON GRADE SHALL BE 3000 P.S.I. 28 DAY COMPRESSIVE STRENGTH CONCRETE ON 4" SAND OR GRAVEL FILL W/ 6MIL WITH 6"x6"-10/10 WELDED WIRE MESH OR 3/8 INCH REINFORCING.
4. PROVIDE 1/2" EXPANSION JOINT MATERIAL BETWEEN ALL CONCRETE SLABS OR ADJUTTING CONCRETE OF MASONRY WALLS OR COLUMNS OCCURRING IN EXTERIOR OR UNHEATED INTERIOR AREAS.
5. PLACE 1/2" DIAMETER X 10" OR 12" SILL PLATE ANCHOR BOLTS AT EACH VERTICAL BOARD JOINT, EXTERIOR OR INTERIOR WALLS @ 6'-0" O.C. AND AT EACH CORNER AND BOTH SIDES OF OPENINGS.
6. FOOTING SIZES SHOWN ARE ONLY TYPICAL FOR STATED SOIL, PILASTERS AND CONTINENT COMPACTION, WHICHEVER IS MORE RESTRICTIVE.
7. CONTRACTOR TO VERIFY FOOTING DEPTHS WITH LOCAL FROST REQUIREMENTS OR EXISTING SOIL CONDITIONS, WHICHEVER IS MORE RESTRICTIVE.
8. PROVIDE TERMITE PROTECTION AS REQUIRED BY LOCAL CODES.
9. PROVIDE CONTROL JOINTS AT MID POINTS OF ALL GARAGES, BOTH DIRECTIONS.
10. MASONRY VENEER MUST BE ANCHORED TO BACK-UP CONSTRUCTION WITH CORROSION RESISTANT METAL TIES SPACED 16" O.C. HORIZONTALLY AND 24" O.C. VERTICALLY.
11. INSTALL CONTINUOUS APPROVED FLASHINGS AND CAP OVER WEEPS AT 48" O.C. WITHIN FIRST COURSE COURSE ABOVE GRADE.
12. CRAWL SPACE FOUNDATIONS: PROVIDE CRAWL SPACE VENTILATION PER LOCAL CODE REQUIREMENTS.

NOTE:
ALL DIMENSIONS ARE FROM EXTERIOR STUD WALL, UNLESS USING EXTERIOR COVERING, ALLOW 4" TO ALL EXTERIOR DIMENSIONS FOR OPTIONAL BRICK LEDGE.

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MICHAEL E. NELSON DESIGNS, LLC or Michael E. Nelson's consultant are the author of the plans, drawings and specifications for your project. Unless purchased from this plan, balance of these plans contemplate further completion during the course of the construction and the improvement. Changes and deviations from the plans are common. Although the designer and his consultants performed their services with due care and diligence, they cannot guarantee that there will be no errors and omissions. Communications is important and every participant cannot be responsible. Any ambiguity or discrepancy discovered by the use of these plans shall be reported immediately to the designer. Failure to notify the designer immediately of any discrepancy constitutes acceptance by the contractor, owner and their representatives of the ambiguity, error or omission as the intent of the designer and any costs and time required to correct the discrepancy shall be borne by the party failing to report the discrepancy. Contractor shall verify all dimensions, conditions, and report any discrepancy to the designer, Architect, Contractor, or Structural Engineer directly affected by it, prior to the commencement of the work. Written dimensions on these drawings shall have precedence over scaled measurements and drawings are not to be used for all dimensions and conditions on the job. This set is not to be used by any contractor, subcontractor, material supplier or manufacturer unless they have been provided a complete set of plans and specifications by Owner or Owner's Representative. Any deviations from these plans must be submitted to the designer for approval before proceeding with construction or fabrication.

MEN DESIGNS

REVISIONS	BY

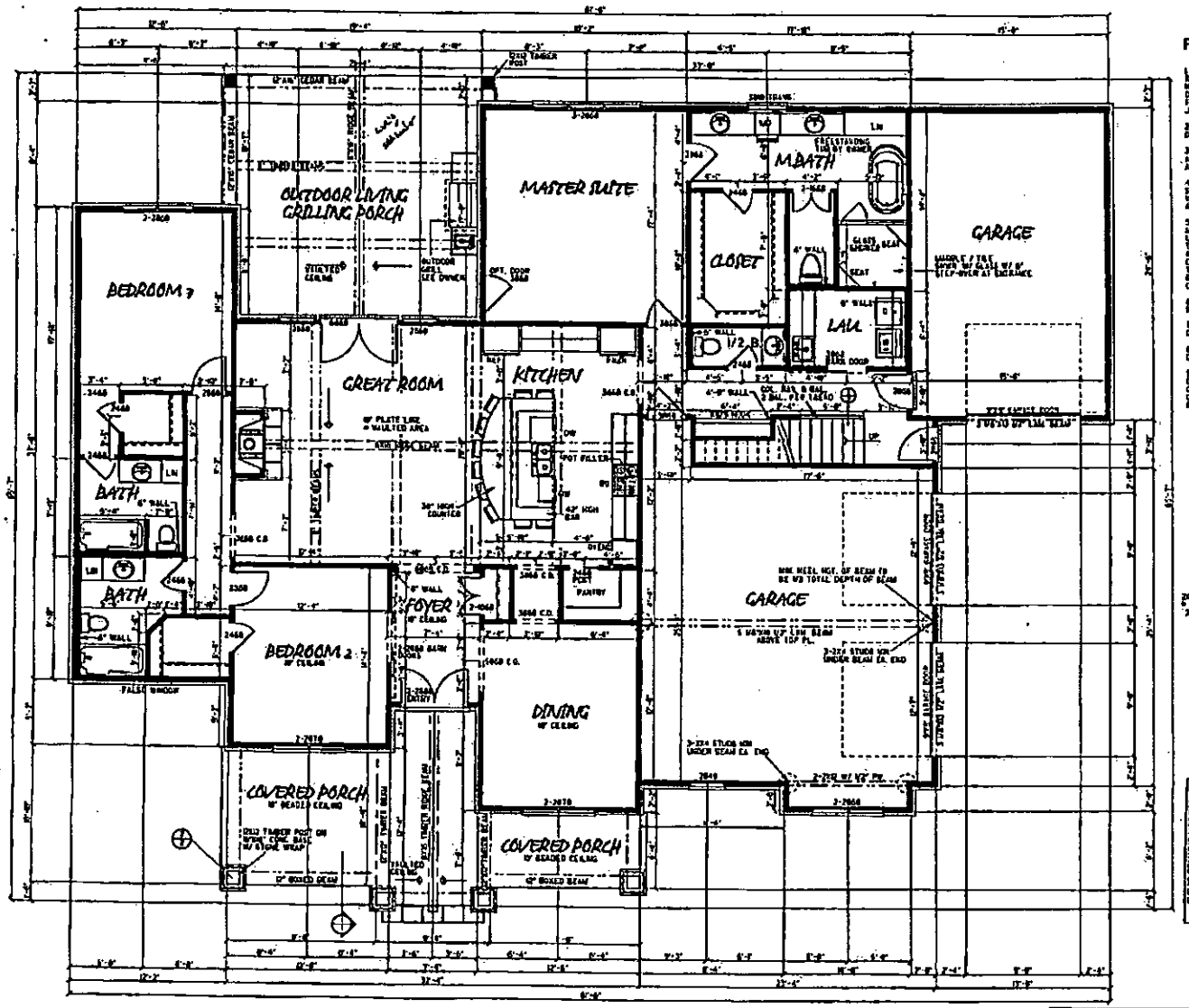
MEN5042
FOUNDATION (CRAWLSPACED) PLAN

MEN DESIGNS by Michael E. Nelson
Residential Design Solutions
NATIONALLY PUBLISHED

DATE 2-12-17
SCALE 1/4" = 1'-0"
BUILDER
JOB MEN5042
DRAWN BY
SHEET 1 OF 7

81'-6"

05'-7 11/16"



FLOOR PLAN NOTES:

1. ALL STRUCTURAL INFORMATION SHOWN FOR REFERENCE PURPOSES ONLY. CONTRACTOR SHALL HAVE LICENSED STRUCTURAL ENGINEER REVIEW AND DESIGN ALL STRUCTURAL ELEMENTS SUCH AS ALL FRAMING WALLS, BEAMS, CONNECTIONS, HEADERS, JOISTS AND RAFTERS.

2. ALL DIMENSIONS ARE FROM FACE OF STUD TO FACE OF STUD UNLESS NOTED OTHERWISE.

3. WINDOW SIZES INDICATED ON PLANS ARE NOTED BY APPROXIMATE ROUGH OPENING SIZE. REFER TO PLANS AND EXTERIOR ELEVATIONS FOR WINDOW TYPES.

4. COORDINATE LOCATION OF UTILITY METERS WITH SITE PLAN AND LOCATE AWAY FROM PUBLIC VIEW. VISUAL IMPACT SHALL BE MINIMIZED, I.E. MOUNT AS LOW AS POSSIBLE.

5. PREFABRICATED FIREPLACE CONSTRUCTION SHALL MEET OR EXCEED ALL APPLICABLE CODES REGARDING USE OF FIRE SEPARATIONS, CLEARANCES, ETC. IT IS THE CONTRACTOR'S RESPONSIBILITY TO ENSURE THAT ALL FLOOR AND CONSTRUCTION MEET OR EXCEED CODE. OVERALL FLUE HEIGHT SHALL BE CORRESPONDED TO MATCH HEIGHT SHOWN ON PLANS AND SHALL NOT EXCEED TWO TOP OF CHIMNEY CHASE AS CONSTRUCTED.

6. CONTRACTOR SHALL COORDINATE ALL CLOSET SHELVING REQUIREMENTS.

7. DO NOT SCALE DRAWINGS, FOLLOW DIMENSIONS ONLY.

8. CONTRACTOR SHALL FIELD VERIFY ALL CABINET DIMENSIONS BEFORE FABRICATION.

9. BEDROOM WINDOWS SHALL HAVE A MINIMUM NET CLEAR OPENING OF 5.7 SQ.FT., A MINIMUM NET CLEAR OPENABLE WIDTH OF 20", A MINIMUM NET CLEAR OPENABLE HEIGHT OF 24" AND HAVE A MAXIMUM FINISH SILL HEIGHT OF 44" FROM FINISH FLOOR.

10. ALL GLASS LOCATED WITHIN 24" OF FLOOR, 42" OF A DOOR OR LOCATED WITHIN 24" OF FLOOR AT BATHTUBES, WHIRLPOOLS, SHOWERS, SAUNAS, STEAM ROOMS OR HOT TUBS SHALL BE TEMPERED.

11. ALL EXPOSED INSULATION SHALL HAVE A FLAME SPREAD RATING OF LESS THAN 25 AND A SMOKE DENSITY RATING OF LESS THAN 450.

12. PROVIDE COMBUSTION AIR VENTS, WITH DAMPER AND BACK DUMPER, FOR FIREPLACE WOOD STOVES AND ANY APPLIANCE WITH AN OPEN FLAME.

13. BATHROOMS AND UTILITY ROOMS SHALL BE VENTED TO THE OUTSIDE WITH A MINIMUM OF 1 50 CFM FAN. GARAGE HOODS SHALL ALSO BE VENTED TO OUTSIDE.

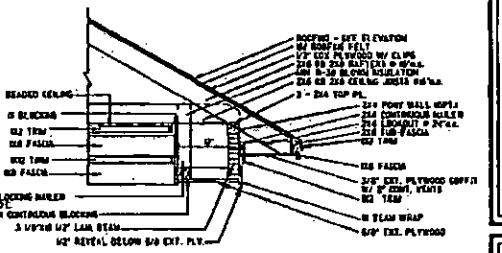
14. ATTIC VENT OPTS SHALL BE LOCATED WITHIN 3' OF ITS RESPECTIVE OPENING. BELOW AIR SHALLS SHALL NOT BE LOCATED WITHIN 10 FEET OF A GAS FIRED APPLIANCE.

15. ALL DOORS AND DOOR WALLS IN GARAGE AND GARAGE CABINETS ARE TO HAVE 5/8" TYPE-X GYP. BOARD W/ TAPED AND RATED JOINTS. ALL EXT. DOORS IN GARAGE TO BE METAL OR SOLID CORE. DOORS INCLUDING DOORS ENTERING HEATED/COOLED PORTION OF RESIDENCE.

16. ALL FIREPLACE CHASE WALLS SHALL BE INSULATED INSIDE AND OUTSIDE. PROVIDE HORIZONTAL "DRAFT STOPS" AT EACH FLOOR LEVEL BY PACKING 6" OF R-19 INSULATION BETWEEN 2X4 JOISTS.

17. ALL INTERIOR WALLS SHALL BE COVERED WITH 1/2" GYPSUM BOARD WITH METAL CORNER REINFORCING, TAPE FREE AND SAND, U.O.N. EXCEPT USE 5/8" GYPSUM BOARD ON CEILING WHEN SUPPORTING MEMBERS ARE 24" O.C. OR GREATER. USE 1/2" GYPSUM BOARD ON CEILING MEMBERS LESS THAN 24" O.C.

18. ALL BATH AND TOILET AREA WALLS AND CEILINGS SHALL HAVE WATER RESISTANT GYPSUM BOARD.



1 BOX LAM. BEAM SECTIONAL DETAIL
3/4" = 1'-0"

FLOOR PLAN SPECIFICATIONS

HEATED/COOLED MAIN FLOOR:	2408 SQ. FT.
HEATED/COOLED UPPER:	0 SQ. FT.
HEATED/COOLED TOTAL:	2408 SQ. FT.
GARAGE/ STORAGE:	0000 SQ. FT.
PORCHES:	0000 SQ. FT.
TOTAL:	0000 SQ. FT.
DECKS:	0000 SQ. FT.

NOTE:

1- MAIN FLOOR CEILINGS TO BE 9' UNLESS NOTED.
2- UPPER FLOOR CEILINGS TO BE 8' UNLESS NOTED.
3- BUILDER TO APPROVE & VERIFY ALL PLANS BEFORE CONSTRUCTION.
4- VERIFY ALL PLANS W/ LOCAL BUILDING CODES.
5- ATTIC ACCESS TO BE IN ATTIC UNLESS OTHERWISE NOTED
6- PROVIDE SHUT-OFF VALVE FOR ALL GAS APPLIANCES. REFERENCE IRC SECTION G2419
7- ALL GLASS LOCATED WITHIN 60" OF FLOOR, 24" OF A DOOR OR LOCATED WITHIN 60" OF FLOOR AT BATHTUBES, WHIRLPOOLS, SHOWERS, SAUNAS, STEAM ROOMS OR HOT TUBS SHALL BE TEMPERED TO COMPLY WITH IRC SECTION R308.4.5

IF THIS STAMP IS NOT FOUND IT IS AN ILLEGAL SET OF PLANS

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MICHAEL E. NELSON DESIGNS, LLC or Michael E. Nelson reserves and retains their own rights to their own original unpublished work from this plan, whether or not the plan is built. Other designers may not use these plans without the written consent of Michael E. Nelson Designs, LLC. Although the designer and his consultants have performed professional services to produce plans that are intended to be free from design defects, neither the designer nor his consultants warrant or guarantee that the plans are free from all design defects. The owner or builder agrees that his sole remedy for breach of contract, negligence, errors or omissions on the part of the designer or his consultants is limited to the amount of the fee paid to the designer for the plans. The owner or builder agrees to waive any claim for consequential damages that may exceed the fee paid to the designer. The owner or builder agrees that the designer shall not be responsible for any changes made in the plans by any other party. The owner or builder agrees to indemnify and hold the designer harmless from any claim or lawsuit brought against the designer by any third party for any reason, including attorney's fees, resulting from any changes made in the plans by any party other than the designer. The owner or builder agrees that all plans, details, and specifications are the property of the designer and may be used only for the specific building site for which they were prepared. They may not be used, loaned, copied or given to any other person or entity for any other purpose or for the completion of any other building without the written permission of the designer. Any unauthorized use of these plans shall be at the risk of the user and without liability to the designer. The user shall defend, indemnify and hold the designer harmless from any and all claims, damages, losses, and expenses including attorney's fees arising out of any unauthorized use of these plans. Any dispute between the owner or builder and the designer shall be governed by the laws of the State of Utah. Any dispute between the owner or builder and the designer shall be litigated in the State of Utah. The prevailing party in any dispute between the owner or builder and the designer shall be entitled to recover reasonable attorney's fees and costs. Any dispute between the owner or builder and the designer shall be litigated in the State of Utah. The prevailing party in any dispute between the owner or builder and the designer shall be entitled to recover reasonable attorney's fees and costs.

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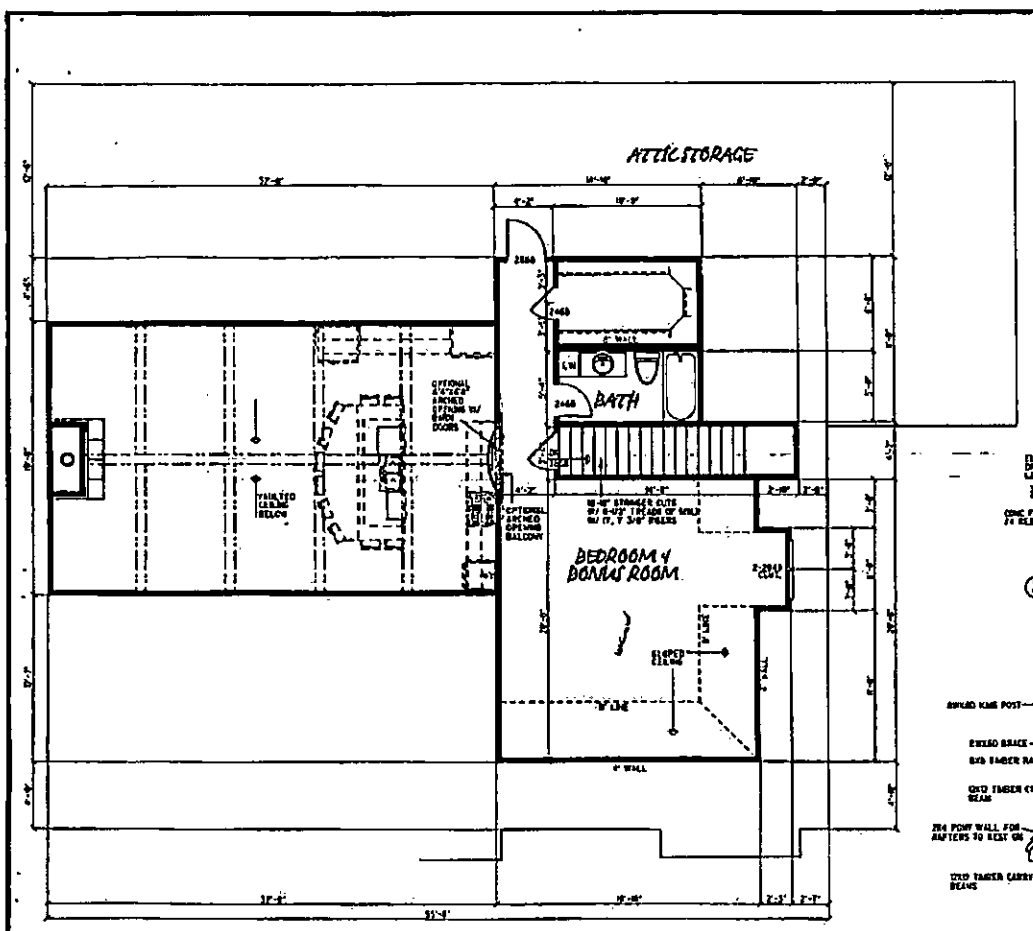
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MEN5042
MAIN FLOOR PLAN

MEN DESIGNS by Michael E. Nelson
Ventures Value Home Plans
NATIONALLY PUBLISHED

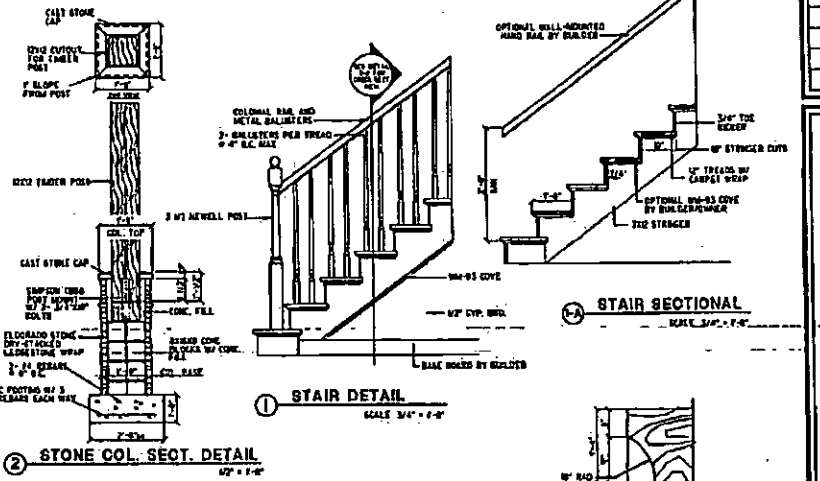
DATE 0-0-18
SCALE 1/4" = 1'-0"
BUILDER
JOB MEN5042
DRAWN BY

1 / 2



NOTE:
1.- WORK TO BE IN ATTIC VERIFY W/ BUILDER.
2.- UPPER FLOOR CEILING HEIGHTS TO BE 8'-0" UNLESS NOTED.
3.- UPPER FLOOR JOIST TO BE 12"@16" OMNI WEB FLOOR TRUSSES @ 16" O.C. W/ 3/4" ADVANTECH FLOOR GLUED & SCREWED SEE TRUSS MANUF. FOR FLOOR TRUSS LAYOUTS. ALL OPEN WEB FLOOR TRUSSES TO BE DESIGNED & ENGINEERED BY TRUSS MANUF. TRUSS MANUF. WILL PROVIDE TRUSS LAYOUT BASED ON ENGINEERING. TRUSS MANUF. TO SUPPLY TRUSSES W/ CHAMFERED END ON SELECTED WALLS TO ALLOW FOR EXT. WALL SUPPORT & RAFTER CLEARANCE.
4.- WALL & WAL TO BE 8' IN ATTIC UNLESS OTHERWISE NOTED

NOTE:
STAIR RISE HEIGHT AND RUN DISTANCE ARE NOT SPECIFIED ON THIS DETAIL AND SECTION. FOR RISE AND RUN SPECS. REFER TO FLOOR PLAN.

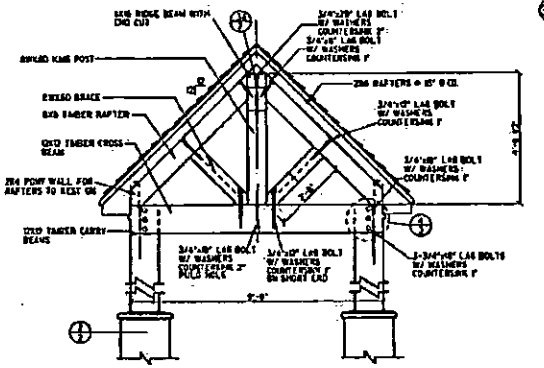


2 STONE COL. SECT. DETAIL
1/2" = 1'-0"

1 STAIR DETAIL
SCALE 3/4" = 1'-0"

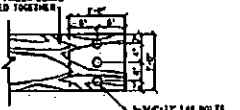
1-A STAIR SECTIONAL
SCALE 3/4" = 1'-0"

3A ENTRY TIMBER RIDGE OUT DETAIL
1" = 1'-0"



3 ENTRY TIMBER TRUSS DETAIL
1/2" = 1'-0"

NOTE:
1.- PLUG ALL HOLES AFTER BOLTS ARE SECURED



4 BEAM CONNECTION DETAIL
1" = 1'-0"

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MEN DESIGNS

REVISIONS	BY
6-8-17	AT
	24x36

MEN5042
UPPER FLOOR

MEN by Michael E. Nelson DESIGNS (A) Signature Series Home Plans
NATIONALLY PUBLISHED

DATE 12-1-16
SCALE 1/4" = 1'-0"
BUILDER
JOB MEN5042
DRAWN BY

IREDELL COUNTY

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

APPLICATION NUMBER
233351
Issue Date: 02/12/2018

FILE COPY

ZONING PERMIT
Open Space

Parcel Number	Street Address	Jurisdiction
4679525575.000	2350 SLOOP ROAD, MT ULLA, NC	IREDELL COUNTY

Owner Information	Applicant Information
Owner: GABRIEL JAMES C+WILLIE O GABRIEL	Applicant: TLC FAMILY HOMES LLC
Address: 153 OVERHEAD BRIDGE RD	Address: 201 SASSAFRAS RD
MOORESVILLE, NC 28115	MOORESVILLE, NC 28115
Phone:	Phone: 704-724-3111

Use Requested	Zone Code
SFD	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
6.000	35.00	35.00	15.00	15.00	BOWB	X

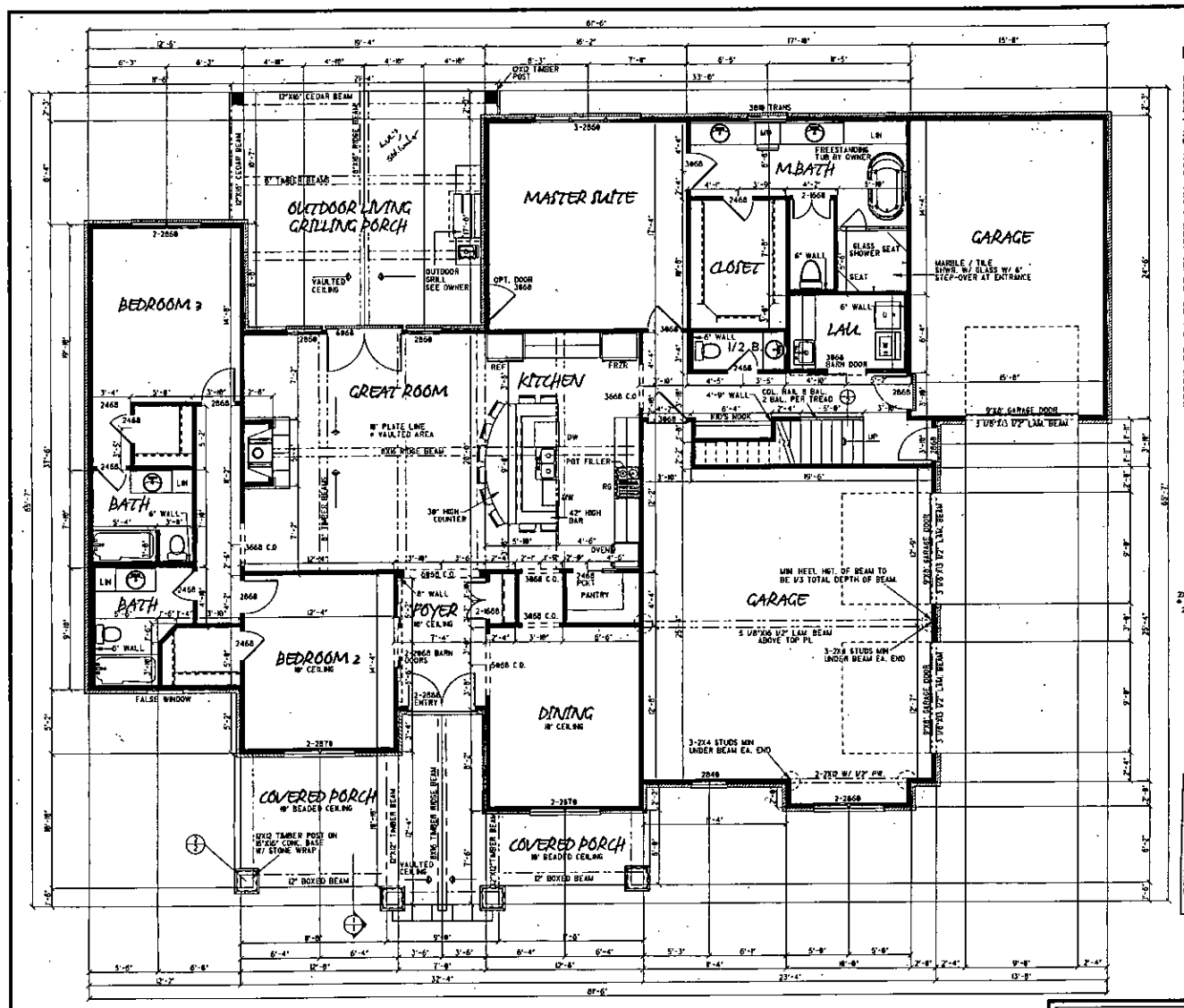
Remarks:

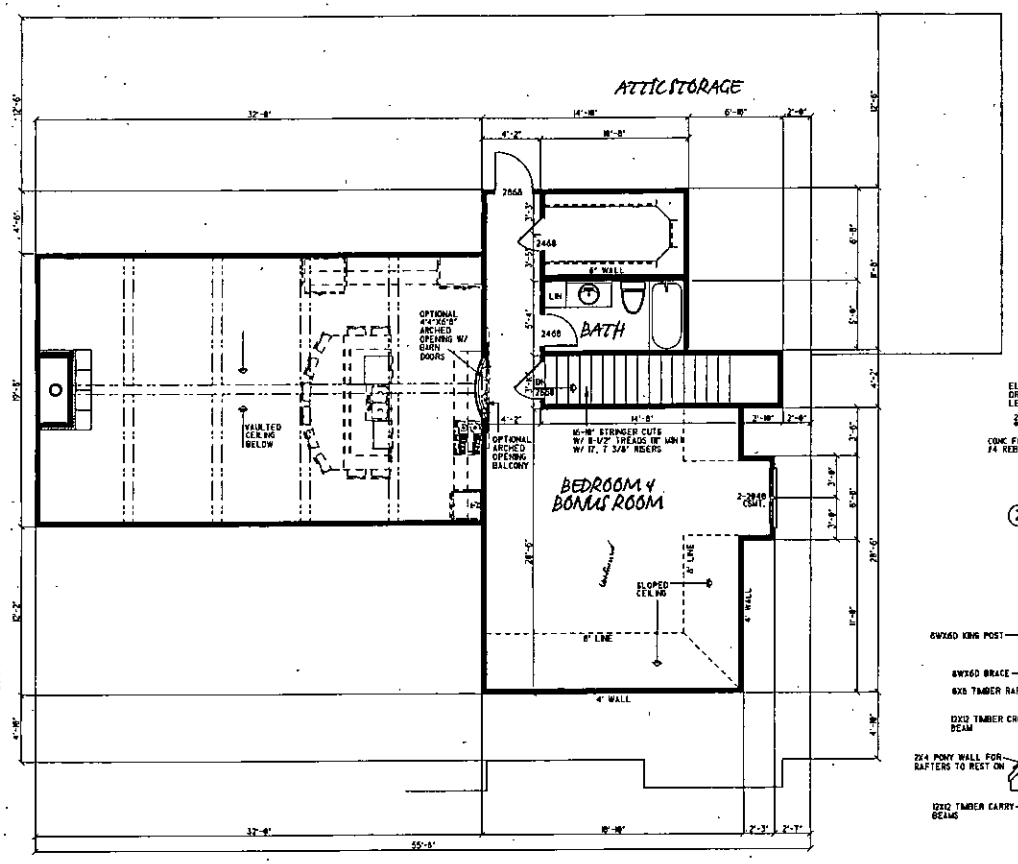
PAID

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: _____

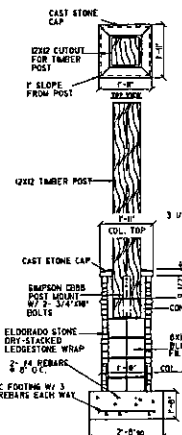
Permit Number	128396	TOTAL FEES:	$ 77.25


OUTDOOR LIVING GRILLING PORCH
MASTER SUITE
M.BATH
CLOSET
GARAGE
BEDROOM 3
GREAT ROOM
KITCHEN
BATH
BATH
BEDROOM 2
FOYER
DINING
GARAGE
COVERED PORCH
COVERED PORCH
LAU.
PANTRY
12"X6" CEDAR BEAM
8" TIMBER BEAM
VAULTED CEILING
OUTDOOR GRILL SEE OWNER
OPT. DOOR 3868
FREESTANDING TUB BY OWNER
MARBLE / TILE SHWR. W/ GLASS W/ 6" STEP-OVER AT ENTRANCE
GLASS SHOWER SEAT
6" WALL
1/2 B
3868 BARN DOOR
9'X8' GARAGE DOOR
5 1/8"X18 1/2" LAM. BEAM
KID'S NOOK
UP
REF
FRZR
DW
POT FILLER
RG
36" HIGH COUNTER
42" HIGH BAR
OVEN
3868 C.O.
2468 POST
PANTRY
6" WALL
9'-0" CEILING
2-2868 BARN DOORS
2-2868 ENTRY
FALSE WINDOW
WASH'R
DRY'R
LIN
WIN HEIGHT OF BEAM TO BE 1/3 TOTAL DEPTH OF BEAM.
5 1/8"X16 1/2" LAM. BEAM ABOVE TOP PL.
3-2X8 STUDS MIN UNDER BEAM EA. END
3-2X4 STUDS MIN UNDER BEAM EA. END
2-2X10 W/ 1/2" PW.
12" BOXED BEAM
6"X12" TIMBER BEAM
6"X6" TIMBER POST
6"X12" TIMBER POST
6"X6" TIMBER ROOF BEAM
6"X6" TIMBER FLOOR BEAM
6"X12" TIMBER ROOF BEAM
6"X12" TIMBER FLOOR BEAM
6"X10" TIMBER FLOOR BEAM
2X10 TIMBER POST ON 16"X16" CONC. BASE W/ STONE WRAP
2-2868
2-2878
2-2858
2-2848
2-2868
2-2858
2-2868
2-2868
2-2868

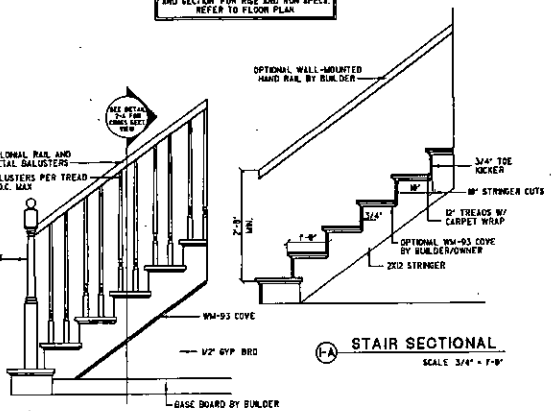


NOTE:
1.- HVAC TO BE IN ATTIC. VERIFY W/ BUILDER
2.- UPPER FLOOR CEILING HEIGHTS TO BE 8'-0" UNLESS NOTED.
3.- UPPER FLOOR JOIST TO BE 16-1/2" OPEN WEB FLOOR TRUSSES @ 16" O.C. W/ 3/4" ADVANTECH FLOOR GLUED & SCREWED. SEE TRUSS MANUF. FOR FLOOR TRUSS LAYOUTS
ALL OPEN WEB FLOOR TRUSSES TO BE DESIGNED & ENGINEERED BY TRUSS MANUF. TRUSS MANUF. WILL PROVIDE TRUSS LAYOUT BASED ON ENGINEERING. TRUSS MANUF. TO SUPPLY TRUSSES W/ CHAMFERED END ON SELECTED UNITS TO ALLOW FOR EXT. WALL SUPPORT & RAFTER CLEARENCE.
4.- HVAC & W.H. TO BE IN ATTIC UNLESS OTHERWISE NOTED

NOTE:
STAIR RISE HEIGHT AND RUN DISTANCE ARE NOT SPECIFIED ON THIS DETAIL AND SECTION FOR RISE AND RUN SPECS. REFER TO FLOOR PLAN

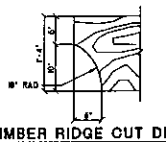


2 STONE COL. SECT. DETAIL
1/2" = 1'-0"

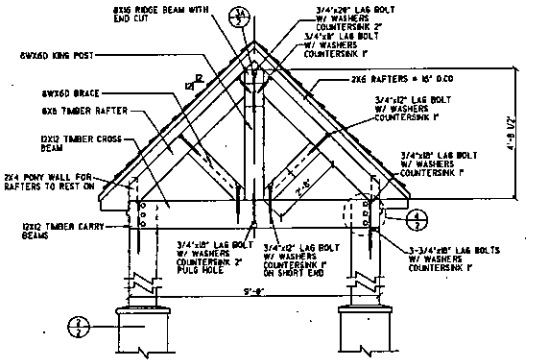


1 STAIR DETAIL
SCALE 3/4" = 1'-0"

1-A STAIR SECTIONAL
SCALE 3/4" = 1'-0"

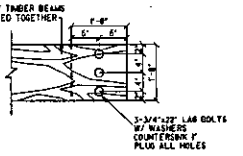


3A ENTRY TIMBER RIDGE CUT DETAIL
1" = 1'-0"



3 ENTRY TIMBER TRUSS DETAIL
1/2" = 1'-0"

NOTE:
1.- PLUG ALL HOLES AFTER BOLTS ARE SECURED



4 BEAM CONNECTION DETAIL
1" = 1'-0"

IF THIS STAMP IS NOT RED IT IS AN ILLEGAL SET OF PLANS
Nelson Design Group, LLC

Acknowledgement of Plans Submittal ONLY!
Date 4/3/18
Date 4/3/18

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Written dimensions on these drawings shall have precedence over scaled dimensions; contractors shall verify and be responsible for all dimensions and conditions on the job. This office must be notified of any variance from the dimensions and conditions shown by these drawings. Shop details must be submitted to this office for approval before proceeding with fabrication or construction.

MEN DESIGNS

REVISIONS	BY
5-9-17	AT
	24x36

MEN5042
UPPER FLOOR

MEN DESIGNS by Michael E. Nelson
Signature Series Custom Home Plans
Member AIBD · CBSD
NATIONALLY PUBLISHED
A CUSTOM DESIGN & PLAN SPECIFICATION COMPANY

DATE	12-1-16
SCALE	1/4" = 1'-0"
BUILDER	
JOB	MEN5042
DRAWN BY	

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: 4679525575
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Applicant
OWNER: TLC Family Homes
ADDRESS: 261 Sassafras Rd Mooresville NC
PROPOSED FACILITY: House PROPOSED DESIGN FLOW (.1949): 480 gpd
LOCATION OF SITE: 2350 Sloop Rd

APPLICATION DATE 2/6/18
DATE EVALUATED: 2/28/18
PROPERTY SIZE: 6 Acres
PROPERTY RECORDED: Yes

WATER SUPPLY: [X] Private [ ] Public [ ] Well [ ] Spring [ ] Other
EVALUATION METHOD: [ ] Auger Boring [X] Pit [ ] Cut TYPE OF WASTEWATER: [X] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .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	5%	0-10	Brw	SCL	SS, SP, SExP, FR				PS
		10-40	RC	mSBK	SS, SP, SExP, FR				.3
		40-56	RCL	wSBK	SS, SP, SExP, FR				
			w/ few to many			SAP	Inclus		
		56"-60	L	SAP	massive	FR			
2	5%	0-6	Brw	SCL	SS, SP, SExP, FR				PS
		6-20	RC	mSBK	SS, SP, SExP, FR				.3
		20-56	RCL/CL	wSBK	SS, SP, SExP, FR				
			w/ few to many			SAP	Inclus		
		56-60	L	SAP	massive	FR			
3	4%	0-4	Brw	SCL	SS, SP, SExP, FR				PS
		4-24	RC	mSBK	SS, SP, SExP, FR				.3
		24-50	RCL/CL	wSBK	SS, SP, SExP w/ few to many				
				SAP	Inclus				
		50-60	L	SAP					
4	4%	0-4	Brw	SCL	SS, SP, SExP, FR				PS
		4-20	RC	mSBK	SS, SP, SExP, FR				.3
		20-48	RCL/CL	wSBK					
			w/ few to many			SAP	Inclus		
		48-58	L	SAP	massive	FR			

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	25% Red
Site LTAR	.3	.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: Tim w/ TLC Family Homes

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	NEXP (Non-expansive) SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay) O (Organic)	0.4 - 0.1 None	0.2 - 0.05 None	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)

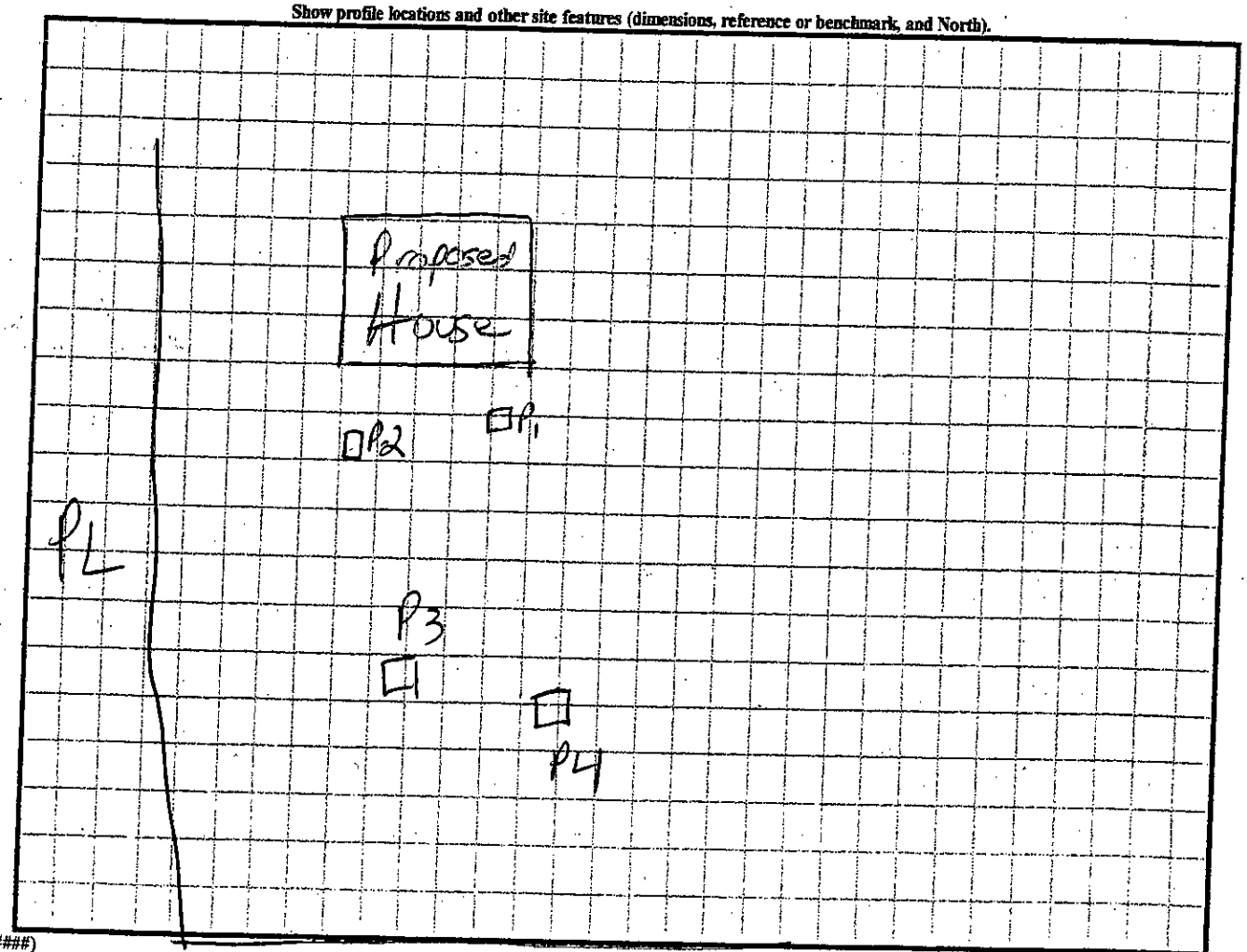
*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

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).



NR (######)
view (#####)

Sloop Rd