IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-311055

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

PIN # 4721319592

APPLICANT/OWNER: Nest Homes APPLICANT ADDRESS: 236 Raceway Dr. Suite 7 Mooresville NC 28117

SITE ADDRESS: 110 Spring View Lane Dr. Statesville NC 28677 PHONE: 704-202-1524 ALT. PHONE N/A

SITE DIRECTIONS: East Monbo Rd to Levi Ln, T/L Powder Springs Dr SAP CONTROLLED: ☐ YES ■ NO

SUBDIVISION: Powder Springs Creek SECTION: N/A LOT # 10 LOT AREA: 1.027ac DESIGN FLOW: 480 L.T.A.R.: 0.3

Septic Tank	1000	(gal)	STB 760	Date	4/8/23	■ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	■ Residence	No. Bedrooms 4
Pump Tank		(gal)	PT	Date		System Description:	25% Reduction			☐ Business	No. Persons 8
Pump Make		Model		Serial #		Repair System Description:	25% Reduction			☐ Other	No. Employees
# Nitrification Fields	1	# Lines	3	Linear Ft:	400'	Maintenance Agreement Required:	☐ YES	■ NO		☐ Slab	■ Crawl Space
Trench Width	36"	Max Trench Bottom Depth		30"	Gravel Depth	N/A	■ GRAVITY	☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing

Water Supply: ■ Private ☐ Public ☐ Community

Comments / Conditions: Per plan By Soil & Forestry Services of the Carolinas

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11.(c) of SL 2018-114 using the signed and sealed LSS Evaluation attached here.

See plan by:Soil & Forestry Services of the Carolinas

AS BUILT SKETCH

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**

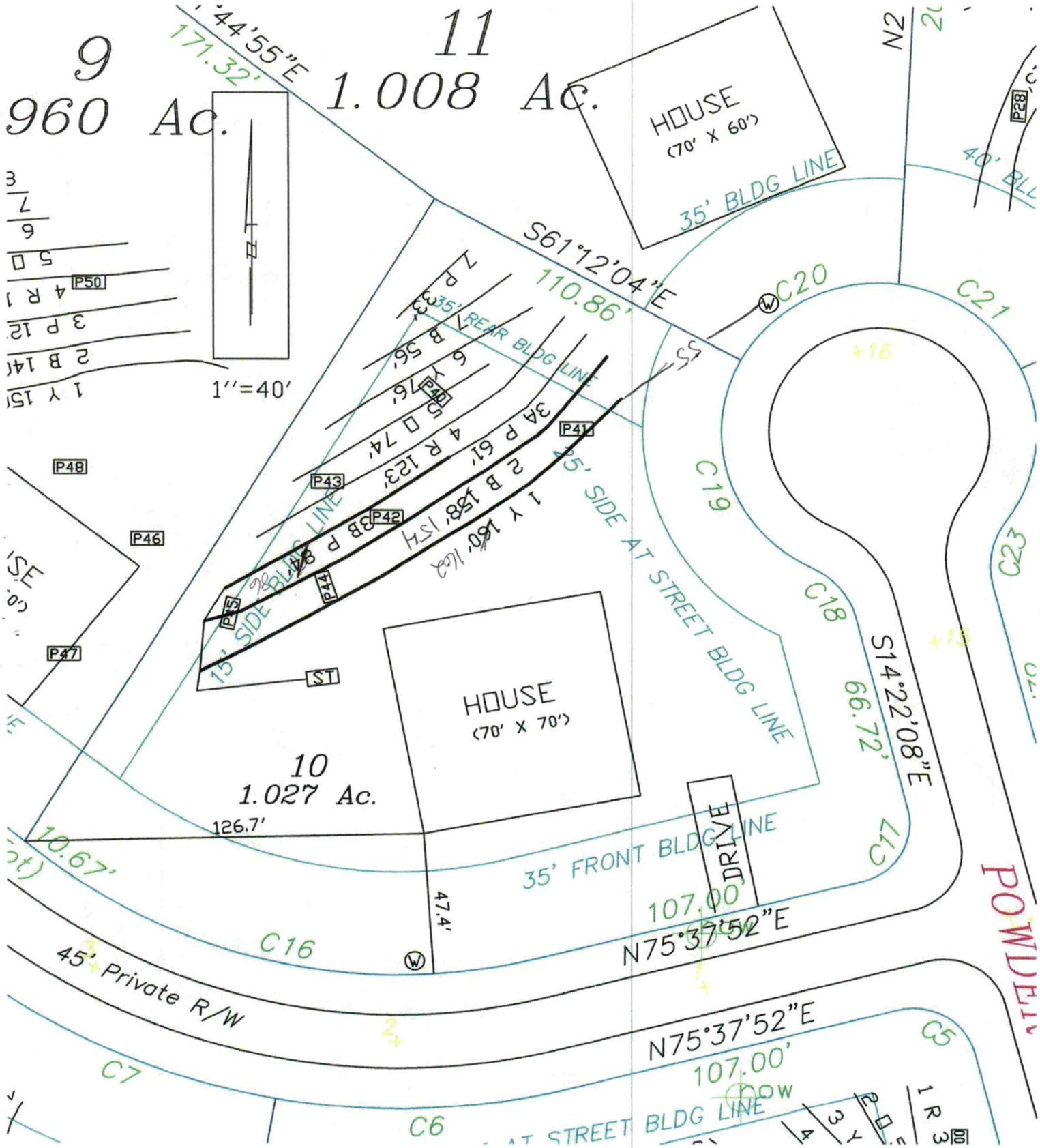
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ■ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 11/23/20 Installed by: Patriot Septic

IMPROVEMENT PERMIT by: [signature] Date: 11/18/20 OPERATION PERMIT by: [signature] Date: 5/24/23

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 3-11-2022 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.


9
960 Ac.
11
1.008 Ac.
10
1.027 Ac.
HOUSE
(70' X 60')
HOUSE
(70' X 70')
171.32'
S44°55"E
S61°12'04"E
110.86'
1"=40'
35' BLDG LINE
35' REAR BLDG LINE
15' SIDE BLDG LINE
25' SIDE AT STREET BLDG LINE
35' FRONT BLDG LINE
S14°22'08"E
66.72'
126.7'
10.67'
47.4'
107.00'
N75°37'52"E
45' Private R/W
DRIVE
POWELL
C5
C6
C7
C16
C17
C18
C19
C20
C21
C23
P28
P41
P42
P43
P46
P47
P48
P50
ST

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Project#: 20-0059
September 10th, 2020

NEST HOMES
Attn: *Michael Wetter*
Email: mwetter@nesthomes.com

RE: Soil & Site Evaluation for a 4 Bedroom Residence on Lot 10 Powder Spring Creek Subdivision,1.027ac Parcel, PIN# 4721412167, Powder Spring Drive, Statesville, NC 28677.

Mr. Wetter:

At your request Soil & Forestry Services of the Carolinas (S&FS) has performed soil/site evaluations on parcel noted above. The Lot size is noted on the attached survey map & soil evaluation form. The purpose of our work was to identify soil areas with potential to support subsurface wastewater disposal systems and provide design details for Session Law submittal to Iredell County Health Department.

Site Conditions

At the time of our evaluation land cover on the property was mostly mixed pine/hardwood. Topography within the evaluated area was gently slope near the house site and proposed drainfield area. Property lines and corners were marked at the time of the evaluation by Patterson Land Surveying. The client provided an Autocad File of a survey as a basemap. The proposed septic layout was located via Trimble Submeter GPS/tape measures and used to produce the attached *Site Plan*. The house envelope was located via Survey by Patterson Land Surveying.

Methodology

We evaluated soil areas through the use of backhoe pits. Soil morphological conditions including color, texture, structure, etc. were reviewed in the field with six pit locations on the property flagged and located via GPS. All of the backhoe pits are located in or adjacent to the proposed septic layout. Soil suitability was determined by referencing 15A NCAC 18A.1900 "Laws and Rules for Sewage Treatment and Disposal Systems". *Soil & Site Evaluation Forms* were utilized to record the soil morphological data for each pit. The house envelope was located via survey. An on-ground layout of system and repair was performed using a laser level. Pin flag locations of the layout were also located by GPS and tape measures. Detailed system & repair information is summarized in the following paragraph for this Lot.

Lot 10 (*See Attached Design*)
The septic layout for this lot (9' centers) yielded a total of 825 linear feet of line. The primary system is proposed as 400 linear feet of Accepted (25% Reduction) drainfield with gravity distribution. Trench depth is specified at 30 inches. The repair system is proposed as 400 linear feet of Accepted (25% Reduction) drainfield with gravity distribution. There is 423 linear feet available for repair. Trench depth is specified at 30 inches.

Session Law Requirements

An LSS Evaluation may be submitted in conjunction with a complete application to the LHD. The application shall include all information described in 15A NCAC 18A .1937(d) and be accompanied by a signed and dated statement from the applicant (owner or owner's legal representative) that reads as follows:

"The LSS Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11.(c).".

Owner Date

Print Name ERIC M. WOOD
Signature _____ 9/14/20

The LSS Evaluation shall include a statement bearing the LSS seal and signature that reads as follows:

"The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c)."

Disclaimer
This report reflects the findings of S&FS, PA. *This LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c).* Any site modifications that impact the proposed septic areas on Lot 10 of Powder Spring Creek Subdivision may nullify this design. System design requirements and site requirements shall be adhered to for installation and Operations Permits to be issued by the local Health Department. If you have questions regarding these requirements a Pre-Construction meeting should be scheduled to discuss. Please contact S&FS if you have any questions regarding this report or the attached information. S&FS also offers septic system inspection, wetland delineation and forestry services.

Sincerely,



S. Ashley Rollans, LSS
Attachment: *Septic Design*

SOIL & FORESTRY SERVICES
OF THE CAROLINAS, PA

www.soilandforestryservices.com

Attached is a proposed design for an Accepted Septic System with gravity dist. for a 4 bedroom single family residence on Lot 10 Powder Spring Creek Subdivision, Statesville 28677, Iredell County, NC. PIN#: 4721412167

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LICENSED SOIL SCIENTIST Samuel A. Rollins 1231 STATE OF NORTH CAROLINA

9/10/2020
Project #: 20-0059
Design By: Soil & Forestry Services of the Carolinas, PA

INFORMATION FOR THE INSTALLER:

The permit should be read very carefully prior to bidding. 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.
- Tanks shall be water tested prior to installation.
- The installer shall be responsible to the owner for placement of the tanks and to insure that final grades are returned to the original natural grade, with exception of added structural features.
- The supply trench shall be compacted to eliminate 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 is within 2" from the highest to . the lowest points of elevation within the trench. If the bottom elevation needs adjusting after it has been trenched, it will be done by removing high points rather than filling low points. It is extremely important to insure that trenches are not over excavated during initial trenching. All fine grading within the trench will be hand done with a shovel. No loose material will be left in the trench
- All pipe openings in the tanks shall be properly grouted. This also applies to the joints around the riser.
- All tanks shall be properly back filled and compacted to prevent slump at a later date.
- Earth dams, constructed of relatively impervious material, shall be installed at the beginning and end of each lateral.
- No heavy equipment shall be used on the field during or after installation. The use of a small loader (i.e. Bobcat) or a trencher (i.e. Ditch Witch 2300/2310) may be used for installation.
- Elevations at pinflag locations should be checked by the installer prior to beginning trenches.
- Septic tank riser shall be a minimum of 6" above finished grade.
- System is specified as a gravity 25% reduction (Accepted) installation.
- Repair is specified as a gravity 25% reduction (Accepted) installation .

GRAVITY ACCEPTED SYSTEM FOR WASTEWATER TREATMENT

Owner/Applicant:	Nest Homes
Address:	236 Raceway Drive (Suite 7) Mooresville, NC 28117
Phone:	704.202.1524
County:	Iredell
Location:	Powder Spring Drive Lot 10
Source of Wastewater Flow:	4 Bedroom Single Family Residence
Estimated Gallons Per Day Flow:	480
System Flow:	N/A

Design Specifications

Drainfield Size:	400	
Loading Rate (gpd/ft.^{2}):	0.3	
Depth of Gravel in Trench:	N/A	
Gravel Size:	N/A	
Max.Trench Depth:	30 in.	Repair Trench Bottom 30 in.
Trench Width:	36 in.	
Septic Tank Size:	1000	
Estimated Supply Line Length:	42	
Supply Line Diameter:	4 in. SCH 40 PVC	
Supply Line Volume:	27.43	
Dosing Volume:	N/A	
Supply Manifold:	N/A	
Supply Manifold Length:	N/A	
Supply Manifold Volume:	N/A	
Recommended Float Controls:	N/A	
Recommended Control Panel:	N/A	
Pressure Head:	N/A	
Friction Head:	N/A	
Elevation Head:	N/A	
Total Dynamic Head:	N/A	
Threaded Union:	N/A	
Gate Valves:	N/A	
Check Valves:	N/A	
Anti-Siphon Hole:	N/A	
Additional Comments:	Soil suitability was performed by Soil & Forestry Services of the Carolinas, PA	

Powder Spring Drive

ACCEPTED SYSTEM

DESIGN FLOW (gpd):	480
SOIL APPLICATION RATE (gpd/ft.^{2}):	0.3
TOTAL AREA TRENCH BOTTOM:	1200
TOTAL LATERAL LENGTH:	400
NUMBER OF FIELDS:	1
LATERAL LENGTH REQUIRED PER FIELD:	400
SUPPLY LINE LENGTH:	42
TOTAL DYNAMIC HEAD:	N/A
MANIFOLD SIZE:	N/A
DOSING VOLUME:	N/A
PUMP TANK DRAW DOWN*:	N/A
SEPTIC TANK SIZE:	1000

Layout Specifications - Powder Spring Creek - Lot 10

Project #: 20-0059

LAYOUT FOR 4 BEDROOM HOME

9/10/2020

LINE #	FLAG COLOR	BS	HI	FS	ELEVATION	FLAGGED LINE LENGTH	DESIGN LINE LENGTH
TBM							
INSTR. 1							
1	*YELLOW*					*160*	*160*
2	*BLUE*					*158*	*156*
3A	PINK					61	61
3B	*PINK*					*84*	*84*
5	RED					123	123
6	ORANGE					74	74
7	YELLOW					76	76
8	BLUE					56	56
9	PINK					33	33
					Total	825	823

	LINE LENGTH	LTAR GPD/FT2	SYSTEM TYPE	SOIL LTAR GPD/FT2	TRENCH SYSTEM	DISTRIBUTION	TRENCH DEPTH
** System*	*400*	*0.300*	*ACCEPT.*	*0.300*	*25% RED*	*GRAVITY*	30"
Repair	423	0.300	*ACCEPT.*	0.300	*25% RED*	GRAVITY	30"

Notes: **All measures in feet

**Nitrification lines are demonstrated on contour via colored pin flags

**Nitrification lines were located by GPS and tape measure.

**House Envelope, Property corners & lines located by survey (Patterson Land Surveyors)

CALCULATIONS

Location	Powder Spring Creek Subdivision Off Levi Lane	
Project Number	20-0059	
Lot No:	10	
No. of Bedrooms	4	
Design Flow	480	$^{gal}/_{day}$
LTAR	0.300	$^{gal}/_{ft^2\ day}$
PPBPS? (YES OR NO)	NO	
Supply Line Length	42	ft.
Supply Line Volume	27.426	gal.
Required Feet of Line	400	ft.
Amount of Line from Layout	400	ft.
Gallons per Minute	N/A	$^{gal}/_{min}$
Required Septic Tank Capacity	1000	gal.
Septic Tank Size	1000	gal.
Panel Volume	N/A	gal.
# of Panels	N/A	
Dosing Volume	N/A	gal.
Tank Draw Down	N/A	
Pump Run Time		
Elevation Head	N/A	ft.
Pressure Head	N/A	ft.
Friction Factor	N/A	ft./100 ft. *(From the interpolater.)*
Friction Head	N/A	ft.
Total Dynamic Head (+15%)	N/A	ft.

FRICTION FACTOR INTERPOLATER
2" SCH 40 PVC

GPM	*f*
20	0.84
	-0.88
25	1.27
	-1.28
30	1.78
	-1.76
35	2.37
	-2.25
40	3.03
43.07	3.48
45	3.77
48.14	4.28
50	4.58
57.11	5.89
60	6.42

RECEIVED SEP 1 8 2020

AP-311055

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

Paid $500.00

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 (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: (PRINT CLEARLY)

Applicant Name: Nest Homes **Address:** 236 Raceway Dr. Suite 7, Mooresville NC **Zip:** 28117
Applicant Email: mwetter@nesthomes.com **Phone:** 704.202.1524 **Alt. Phone:**
Owner Name: Nest Homes **Address:** 236 Raceway Dr. Suite 7, Mooresville NC **Zip:** 28117
Owner Email: mwetter@nesthomes.com **Phone:** 704.202.1524 **Alt. Phone:**

Property Information: 110 Spring View Lane – as of 2/15/22
Street Address: ~~173~~ Spring View Ln. Statesville NC 28677
Subdivision Name: Powder Spring Creek **Section/Phase:** **Lot Number:** 10
Driving Directions: East Monbo Rd to Levi Lane, Left

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

Maximum Number of Bedrooms: 4
Maximum Number of Occupants: 8
( ) Swimming Pool
( ) Other Addition/Structure:

CHECK FOUNDATION TYPE
(✓) 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 ( ) 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: Accepted

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: _____ 9/10/20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

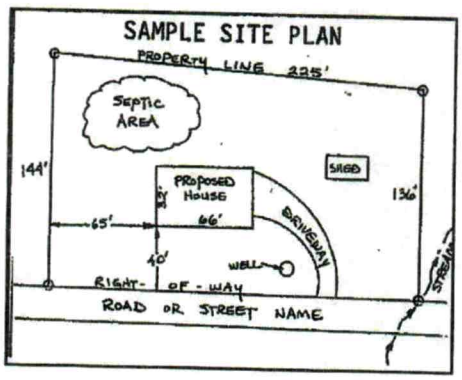
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- (X) **Property Line measurements are clearly identified**
- (X) **All proposed structures are indicated**
- (X) **Front and side setbacks from property line**
- (X) **Preferred driveway location**
- (X) **Preferred well location**
- (X) **Preferred septic system location**
- (X) **North arrow, or other sufficient indicator of direction**



Circle N/A on the following if appropriate:

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

USE THIS SPACE TO DRAW YOUR SITE PLAN

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

See Attached

Signature: Jennifer A Tollison

~~Property owner~~ or owner's legal representative signature **(SIGNATURE REQUIRED)**

9/10/20

DATE

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

Sheet 1 of 2
PROPERTY ID #: 4724121610
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Nest Homes (Buyer)
ADDRESS: 236 Raceway Dr. Suite 7, Mooresville NC 28117
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____
LOCATION OF SITE: Lot 10 Power Spring Creek Subdivision.
WATER SUPPLY: ☒ Private ☐ Public ☒ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut

APPLICATION DATE _____
DATE EVALUATED: 2020
PROPERTY SIZE: 1.027AC
PROPERTY RECORDED: _____
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
P40	L/8-12%	0-8	BSL Gr	Fr SS SP SEXP	-C. Gravel	65	PS	—	PS
		8-20	BRSC wfSBK/ABK	Fr SS SP SEXP					0.3
		20-51	RC wmSBK/ABK	Fr SS SP	-Few to C. Quartz Veins				
		51-65	RBSCL/CL wfSBK	Fr SS SP	-Few SAP Iron				
		65-70	VAR SL MASS	Fr SS SP					

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

PROPERTY ID #: 472141216

DATE OF EVALUATION: 2020

COUNTY: Iredell

Lot 10

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
P41	L/10-14%	0-16	BSL Gr	Fr SS SP SEXP	- C. Gravel	67	-	-	PS .3
		16-24	RBSCL wfsbk	"Fr SSSP SEXP"					
		24-58	RC wmsbk/Abk	"Fr SSSP SEXP"					
		58-67	RBSCL wmsbk	"Fr SS SP"	- Few saprolite				
P42	L/9-13%	0-8	BSL Gr	Fr SS SP SEXP	- Few Gravel	53	PS	-	PS .3
		8-16	RBSCL wfsbk/Abk	"Fr SS SP SEXP"					
		16-42	RC wmAbk/sbk	"Fr SS SP SEXP"	- Few Granite Incl ~10%				
		42-53	RBSCL wfsbk	"Fr SS SP"	- Few to C saprolite				
		53-60	WM SL MASS	"Fr SS SP"	- Few Rock Incl				
P43	L/8-12%	0-11	BSL Gr	Fr SS SP SEXP		62	-	-	PS .3
		11-24	RBSCL wfsbk/Abk	Fr SS SP SEXP					
		24-39	BRC wmsbk/Abk	Fr SS SP SEXP					
		39-62	RBCL wmsbk	"Fr SS SP"	- Few saprolite				
P44	L/8-12%	0-5	BSL Gr	Fr SS SP SEXP		70	-	-	PS .3
		5-18	RBSCL wfsbk/Abk	"Fr SS SP SEXP"					
		18-45	BRC wmsbk/Abk	Fr SS SP SEXP					
		45-70	RBSCL wfsbk	"Fr SS SP"	- C. saprolite				
P45	L/8-10%	0-6	BSL Gr	Fr SS SP SEXP		60	PS	-	PS .3
		6-13	RBCL wmsbk/Abk	Fr SS SP SEXP					
		13-36	RC wmsbk/Abk	Fr SS SP SEXP					
		36-60	RBCL/SCL wfsbk	"Fr SS SP					
		60-73	VFine SL MASS	"Fr SS SP					

COMMENTS:

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, * Eric M. Wood, am the legal owner(s) of the property located at *, identified as PIN (Parcel Identification Number) 4752141167 Lot 10, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Soil & Forestry, 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.

* Eric M. Wood — Signature of Owner(s)
* 9/14/20 — Date
Signature of Witness
9/14/20 — 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

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC and WELL PERMITS

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

***** Initial all lines below to indicate you have submitted each form and completed every site requirement *****

S.A.R. **Complete all Environmental Health forms:**
- ✓ Application
- ✓ Site Plan with dimensions of proposed structure, addition, pool etc.
- ✓ Documentation to Authorize Owner Agent (if the property owner is not the applicant)
- ✓ Copy of Zoning Permit when applicable
- ___ Sign this sheet after you have completed all items

S.A.R. **Lot must be cleared of heavy undergrowth.** In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with **50 feet of visibility** in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

S.A.R. **Clearly mark all property corners by locating existing iron or concrete markers.** Flag all property lines every 25 feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor & easily identified **prior to application submittal** (exception may apply for septic repair evaluations only). 'Mow lines' and/or fence lines do NOT constitute marked lines. **If the property lines are not properly marked when the lot is ready to be evaluated, then the application will be put on HOLD and a $100 site re-visit fee charged.**

S.A.R. **Stake or flag the footprint of the proposed structure, addition, pool etc. to match the site plan submitted.** The proposed structure, etc. **must be staked** out on the property as per the site plan.

S.A.R. If an **Authorization to Construct (AC) is desired**, submit a recorded copy of the plat for newly created or subdivided lot(s) and a LEGIBLE copy of the basic floor plan no larger than 8 ½" x 14" for each floor of the structure including decks, porches, etc. **The overall dimensions must be clearly noted & the rooms labeled.**

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee being charged and the request being placed on HOLD. This will delay the processing of the application.
Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

Backhoe pits are required for all applications that require a soils evaluation.
DO NOT DIG PITS UNTIL THE EH SPECIALIST HAS AUTHORIZED AND SCHEDULED YOUR EVALUATION TIME.
- **All utilities shall be marked before pits are dug. Call NC 811 for this service.**
- **The applicant/agent is responsible for securing these services**
- **Backhoe pits are to be dug at the locations and depths determined by the Environmental Health Specialist or a NC Licensed Soil Scientist. A minimum of four pits must be dug.**
- **The EH specialist will contact you when your application is ready to be processed for pit scheduling.**
- **Your backhoe operator must be on site during the EH Specialist's evaluation to prevent your operator from having to return to the property for additional work.**

By signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated AND I understand the backhoe pit requirement and will secure those services (if applicable).

Signature _____ **Date** 9/10/20

Questions? Contact the Environmental Health Offices below:

Statesville Office
349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625

Lot 10

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

APPLICATION NUMBER
311055 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4721412167.000	EAST MONBO RD	Iredell County

Owner Information		Applicant Information	
Name:	RH FUND XII LLC	Name:	SILLS SPRINGS DEVELOPMENT LLC
Address:	2250 NW FLANDERS ST STE G02	Address:	P.O. BOX 3965
	PORTLAND, OR 97210		MOORESVILLE, NC 28117
Phone:		Phone:	(704)208-4251

Use Requested	Zone Code
Single Family Dwelling	R-20 CUD

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0	35	35	25	15	WSIV-PA Catawba/Lake Norman	YES

Remarks
SFD - 173 POWDER SPRING - HOLD BU UNTIL PLAT HAS BEEN RECORD

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.

Date: 09/18/2020

Signature of Owner/Contractor

Permit Number	311055	TOTAL FEES:	$77.25

IREDELL COUNTY · NC

Cash Register Receipt

Iredell County

Receipt Number
R7468

DESCRIPTION	ACCOUNT	QTY	PAID
PermitTRAK			**$577.25**
AP-311055 Address: EAST MONBO RD APN: 4721412167.000			**$577.25**
EH NEW SYSTEM PERMITS			$500.00
GRAVITY SYSTEM	10492751-447004	0	$500.00
ZONING			$77.25
ZONING PERMIT	104563-472223	0	$75.00
TECH FEE ZONING	104563-460450	0	$2.25
TOTAL FEES PAID BY RECEIPT:R7468			**$577.25**

Date Paid: Friday, September 18, 2020

Paid By: NEST HOMES LLC

Cashier: SML

Pay Method: CHECK 8168

SUPERION

RECEIVED FEB 15 2022

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM AP-311055

Application For: (X) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) 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* (X) Custom Site Plan, scaled no more than 1 inch = 60 feet

Applicant Information: **(PRINT CLEARLY)**

Applicant Name: Nest Homes LLC **Address:** PO Box 3965 , Mooresville NC **Zip:** 28117

Applicant Email: hposton@nesthomes.com **Phone:** 980-500-1238 **Alt. Phone:** _____

Owner Name: Sills Springs Development LLC **Address:** PO Box 3965 , Mooresville NC **Zip:** 28117

Owner Email: hposton@nesthomes.com **Phone:** 980-500-1238 **Alt. Phone:** _____

Property Information:

Street Address: 110 Spring View Lane, Stateville NC 28677

Subdivision Name: Powder Spring Creek **Section/Phase:** _____ **Lot Number:** 10

Driving Directions: Hwy 21/ 115 - West on Old Mountian Rd, left on East Monbo Rd, Right on Levi Ln, Left on Powder Spring Dr; left on Spring View Ln- parcel is on right

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

CHECK FOUNDATION TYPE

(X) New Single Family Residence — Maximum Number of Bedrooms: 3 — (X) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: 6 — ( ) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____ — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
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: _____

(X) 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 (X) 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: Heather Poston — 02/14/2022

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

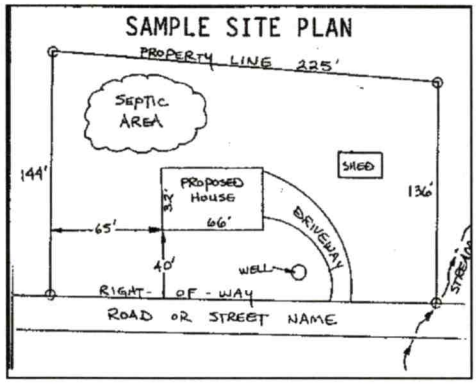
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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 OR WELL PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- **( ) Property Line measurements are clearly identified**
- **( ) All proposed structures are indicated**
- **( ) Front and side setbacks from property line**
- **( ) Preferred driveway location**
- **( ) Preferred well location**
- **( ) Preferred septic system 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

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

**** Please see attached plot plan ****

Signature: Heather Poston

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

02/14/2022

DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

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, Eric Wood, am the legal owner(s) of the property located at 110 Spring View Lane, Stateville NC 28677, identified as

PIN (Parcel Identification Number) 4721319592.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Heather Poston, Nest 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.

Eric Wood

Signature of Owner(s)

02/14/2022

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

The following items must be completed *PRIOR* to the *SUBMITTAL* of any Environmental Health Application. Incomplete applications will be returned to the applicant and cannot be processed or placed on the work list.

*** Initial all lines below to indicate you have submitted each form and completed every site requirement ****

HP **Complete all Environmental Health forms**:
- X Application
- X Site Plan with dimensions of proposed structure, addition, pool etc.
- X Documentation to Authorize Owner Agent (if the property owner is not the applicant)
- X Copy of Zoning Permit when applicable
- X Sign this sheet after you have completed all items

HP **Lot must be cleared of heavy undergrowth.** In order to evaluate the lot, the footprint of the proposed structure must be visible. Adequate area for the septic drain field and repair area must be sufficiently cleared of heavy undergrowth, with **50 feet of visibility** in all directions. Inspectors must be able to evaluate the property, shoot laser level elevations, layout the drain field, do soils work, etc. **If the lot is not cleared sufficiently, then a $100 site revisit fee will be charged and the evaluation will be put on HOLD until the requirement is met.**

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Signature Heather Poston **Date** 02/14/2022

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349 North Center Street (2nd Floor Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456

Mooresville Office
610 East Center Avenue (2nd Floor Govt. Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625

IREDELL COUNTY · NC

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

APPLICATION NUMBER
325722 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4721319592.000	110 SPRING VIEW DR	Iredell County

Owner Information	Applicant Information
Name: SILLS SPRINGS DEV LLC	Name: NEST HOMES LLC
Address:	Address: PO BOX 3965
,	MOORESVILLE, NC 28117
Phone:	Phone: (704)402-8594

Use Requested	Zone Code
	R-20/CUD

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.027	35	35	15	25	WSIV-CA Catawba/Lake Norman	NO

Remarks
sfd/need disc

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.

Signature of Owner/Contractor

Date: 02/15/2022

Permit Number	325722	TOTAL FEES:	$77.25

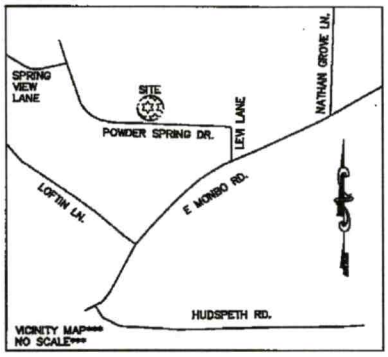
DAS DON ALLEN & ASSOCIATES, P. A.
"Since 1971"
Commercial * Residential * Mortgage Surveys * Multi-Family
Construction Staking * Subdivision Design * Topographical
131 Crosslake Park Drive – Suite 102 * Mooresville * NC * 28117
(704) 664-7029 (704) 664-8041 Fax

I, certify that this map was drawn under my supervision from an actual survey made under my supervision recorded in deed book 2788, page 1944, and/or plat book 72, page 108, that the ratio of precision is 1':10,000, that this map was prepared in accordance with the General Statutes of North Carolina Chapter 89C.

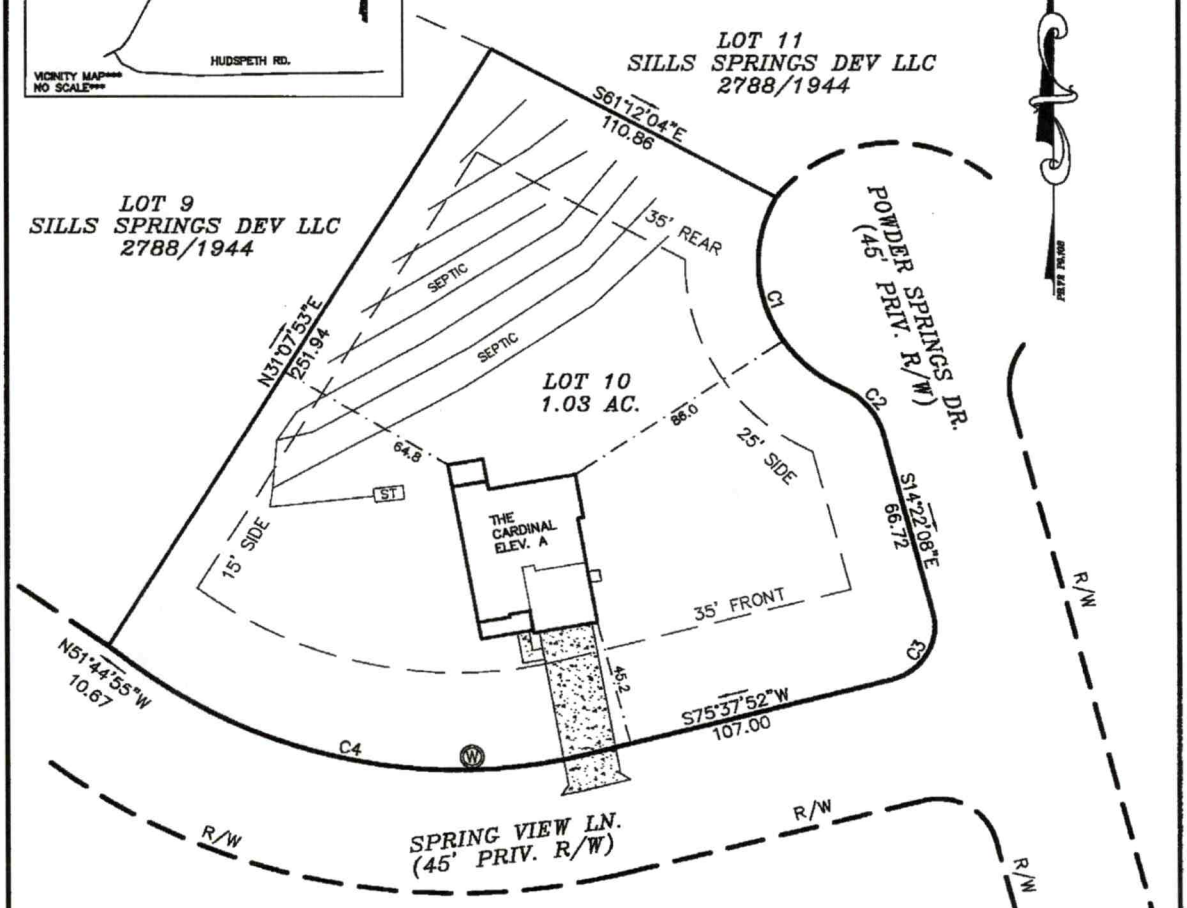
my hand and seal on the 8, day of FEBRUARY, A.D. 20 22.

WILLIAM M. ALLEN, PLS

NORTH CAROLINA PROFESSIONAL SEAL L-3499 LAND SURVEYOR WILLIAM M. ALLEN



CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	50.00'	81.92'	S 18°08'12" E	73.06'
C2	25.00'	22.12'	N 39°43'15" W	21.41'
C3	20.00'	31.41'	N 30°37'52" E	28.28'
C4	177.50'	163.02'	S 78°03'31" E	157.35'



LEGEND
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
CP = COMPUTED POINT
(W) = WELL

CONC. CALCULATION
DRIVEWAY = 1,079 SQ. FT.
SIDEWALK = 58 SQ. FT.

NOTES
1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENTS AND/OR RIGHTS OF WAY OF RECORD.
2) ACREAGE COMPUTED BY THE COORDINATE METHOD.
3) UNDERGROUND POWER
4) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
5) SETBACKS SHOWN PER PLAT (PB.72 PG.108)

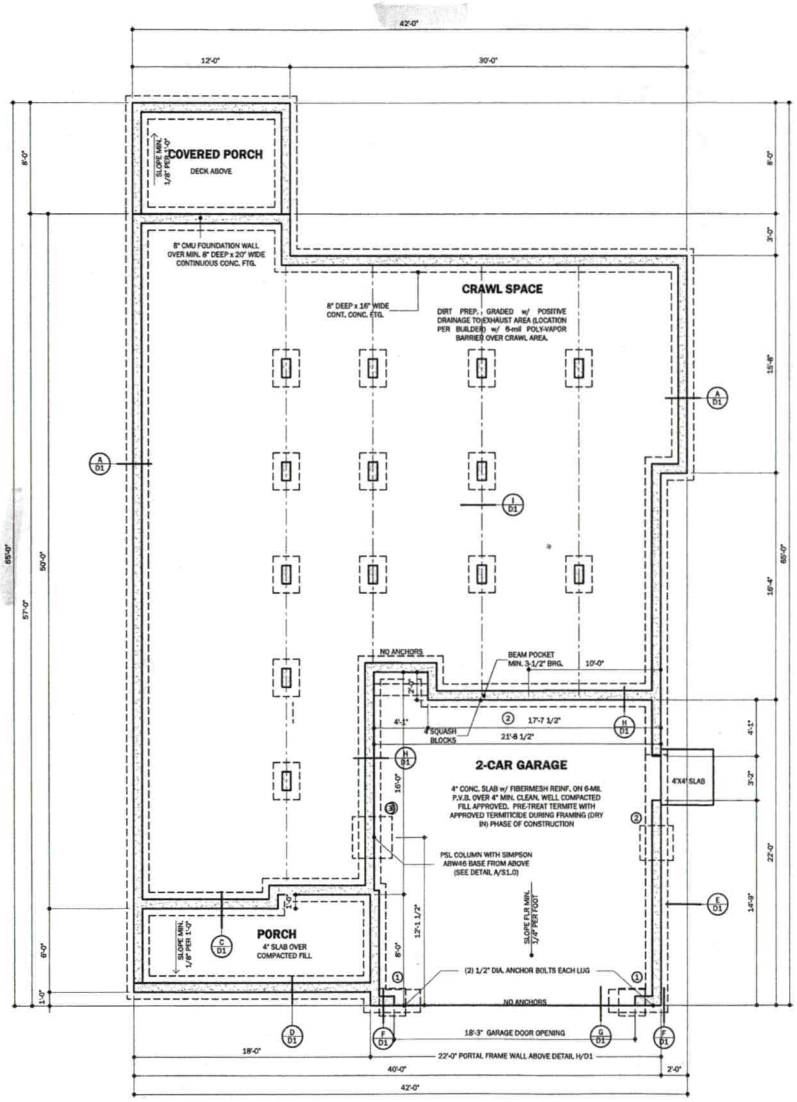
0' 25' 50' 100'
SCALE IN FEET

PLOT PLAN SURVEY

OF
173 POWDER SPRINGS DRIVE
LOT 10 POWDER SPRING CREEK

SCALE 1" = 50'
FALLSTOWN TWSP., IREDELL., N.C.
ACQUIRED BY: NEST HOMES LLC

FIELD BOOK:
FILE: POWDER SPRINGS CREEK 10
DC FILE:
TAX MAP NO: 4721319592.000



CRAWL SPACE FOUNDATION PLAN - ELEVATION A
SCALE: 1/4" = 1'-0"

Plot Scale: 22"x34" = 1/4"=1'-0" Plotted by:

FOOTING SCHEDULE

ID	FOOTING SIZE	REINFORCING
1	24" x 24" x12" DEEP	3 - #4's EACH DIRECTION
2	30" x 30" x12" DEEP	4 - #4's EACH DIRECTION
3	36" x 36" x12" DEEP	4 - #4's EACH DIRECTION
4	42" x 42" x12" DEEP	5 - #4's EACH DIRECTION
5	48" x 48" x12" DEEP	6 - #4's EACH DIRECTION

FOUNDATION NOTES:

1. ALL DIMENSIONS SHALL BE VERIFIED AGAINST ARCHITECTURAL FLOOR PLANS FOR ACCURACY BEFORE BEGINNING CONSTRUCTION OF HOME.
2. TRANSFER ALL POINT LOADS FROM FIRST AND SECOND FLOOR TO BEAM AND ROOF TRUSS BEARING ABOVE FOUNDATION WITH EQUAL AMOUNT OF STUDS
3. ALL CONCRETE TO BE A MIN. OF 3000 psi U.N.O
4. SOIL TO HAVE A MIN. OF 2000 psf BEARING CAPACITY

CRAWL SPACE NOTES

FOUNDATION NOTES FOR NEW FOUNDATION:

1. ALL NEW PERIMETER WALL FOOTINGS SHALL BE CONTINUOUS 16"x8" MINIMUM , 3000 PSI CONCRETE U.N.O.
2. ALL NEW INTERIOR PIERS ARE 8"X16" CMU WITH 24"X32"X8" FOOTINGS U.N.O. FULLY GROUT PIERS >32" TALL. UNLESS OTHERWISE NOTED.
3. "SLAB ON GRADE" SHALL CONSIST OF 4" THICK, 3000 PSI CONCRETE WITH FIBERMESH REINFORCEMENT OR 6X6 W1.4XW1.4 WWF, OVER 6 MIL VAPOR BARRIER, OVER 4" CLEAN STONE & OVER COMPACTED FILL. IN GARAGES AND DRIVEWAYS INSTALL TOOTHED CONTROL JOINTS NO GREATER THAN 13 FEET IN EACH DIRECTION.
4.
5. ALL SOILS AND FILL UNDER FLOORS WITHIN AND/OR UNDER BUILDINGS SHALL HAVE PRECONSTRUCTION SOIL TREATMENT FOR PROTECTION AGAINST TERMITES. CERTIFICATION OF COMPLIANCE SHALL BE ISSUED TO THE BUILDING DEPARTMENT BY A LICENSED PEST CONTROL COMPANY.
6. SHIMS USED BETWEEN MASONRY PIERS AND WOOD GIRDERS SHALL CONSIST OF EITHER SOLID WOOD OR MULTIPLE STEEL SHIMS EQUAL IN WIDTH TO THE GIRDER AND FULLY CONTACT AT LEAST 6" THE LENGTH OF THE PIER.
7. IF DOUBLE 2-2X10 RIM BAND IS USED THEN SQUASH BLOCKS ARE NOT REQUIRED ALONG PERIMETER WALLS.
8. ALL JOIST AND GIRDER FRAMING IS SPF#2

CRAWL FRAME NOTES

CRAWLSPACE FRAMING NOTES:

1. "DBL" INDICATES DOUBLE JOIST
2. RIM BOARDS OR BANDS PARALLEL TO FLOOR FRAMING ARE TO BE DOUBLED.
3. WHERE DIMENSIONS ARE NOT INDICATED, BEAMS THAT RUN PARALLEL TO FLOOR JOISTS ARE INTENDED TO ALIGN UNDER LOAD BEARING WALLS. SEE THE ARCHITECTURAL PLANS FOR DIMENSIONS TO WALLS.
4. WOOD BEAMS (2 OR MORE PLIES) SHALL BE SUPPORTED BY METAL HANGERS OF ADEQUATE CAPACITY WHERE FRAMING INTO BEAMS OR LEDGERS. THE FOLLOWING HANGER SCHEDULE MAY BE USED UNLESS NOTED OTHERWISE ON THE PLAN:

MEMBER SIZE	SIMPSON HANGERS
(2) 2X8	LUS 28-2
(2) 2X10	LUS 210-2
(2) 2X12	LUS 210-2
(2) 1¾" X 9¼" LVL	HUS 410
(2) 1¾" X 11⅞" LVL	HUS 412
(2) 1¾" X 14" LVL	HUS 412
ALL TRIPLE LVLs	HHUS 5.50/10

5. NOTE: FILL ALL OF THE HOLES IN HANGERS WITH 16d x 3½" COMMON NAILS (3½"x 0.162") OR 16d x 3" (3"x 0.162") NAILS UNLESS OTHERWISE SPECIFIED BY THE MANUFACTURER. DO NOT BEND OR MODIFY THE HANGER OR USE INAPPROPRIATE FASTENERS. DO NOT USE 10d x 1½" "HANGER NAILS" UNLESS OTHERWISE NOTED ON THE PLANS OR IN SITUATIONS WHERE ONLY 1½" OR LESS OF WOOD IS PROVIDED TO NAIL INTO.
6. "LVL" AND GLU-LAM BEAMS MUST HAVE ENOUGH STUDS TO SUPPORT ALL PLIES AT EACH END WITH A MINIMUM OF (3)-2X4 OR (2)-2X6 SQUASH BLOCKS UNDER EACH END UNLESS NOTED OTHERWISE.
7. ALL POINT LOADS FROM ROOF BRACES, JACK STUDS, BEAM SUPPORTS -WHETHER WOOD OR STEEL-CANNOT BEAR ON SHEATHING ALONE. BLOCKING EQUAL TO OR BETTER THAN THE POINT LOAD SUPPORTS ABOVE MUST BE CARRIED THROUGH ALL CONSTRUCTION TO THE FOUNDATION. INSTALL 2X4 SQUASH BLOCKS (S.B.) OF EQUAL NUMBER TO COLUMN ABOVE BETWEEN SUBFLOOR AND FOUNDATION WALL OR LOWER PLATE. RIM BOARDS AND I-JOIST BLOCKING SHALL NOT BE CONSIDERED AS AN ACCEPTABLE MEANS OF SUPPORT UNDER CONCENTRATE POINT LOADS FROM LVL AND STEEL BEAMS OR WHERE "S.B" IS INDICATED ON THE PLAN.
8. FRAMER SHOULD MAKE EVERY EFFORT TO STAGGER SEAMS OF PLYWOOD SUBFLOOR A MINIMUM OF 18" AWAY FROM JOIST SPLICES AT BEAM AND PROPPED LEDGERS IN AREAS WHERE I-JOIST FLOOR JOINT IS TO BE USED.

Acknowledgement
Plans Submittal ONLY
Health Dept Date 3/15/22
Buyer Initials Date 3-11-2022

HOMES

Township/County
IREDELL COUNTY
STATESVILLE, NC

Engineer

Stamp/seal

Project name/owner
THE CARDINAL
ELEVATION A
POWDER SPRINGS 10 SPEC

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Date
January 26, 2022

Drawn by
MCML

Reviewed by
INITIALS

Plan set scale
22x34= sheet
1/4" = 1'-0"
11x17 sheet
1/8" = 1'-0"

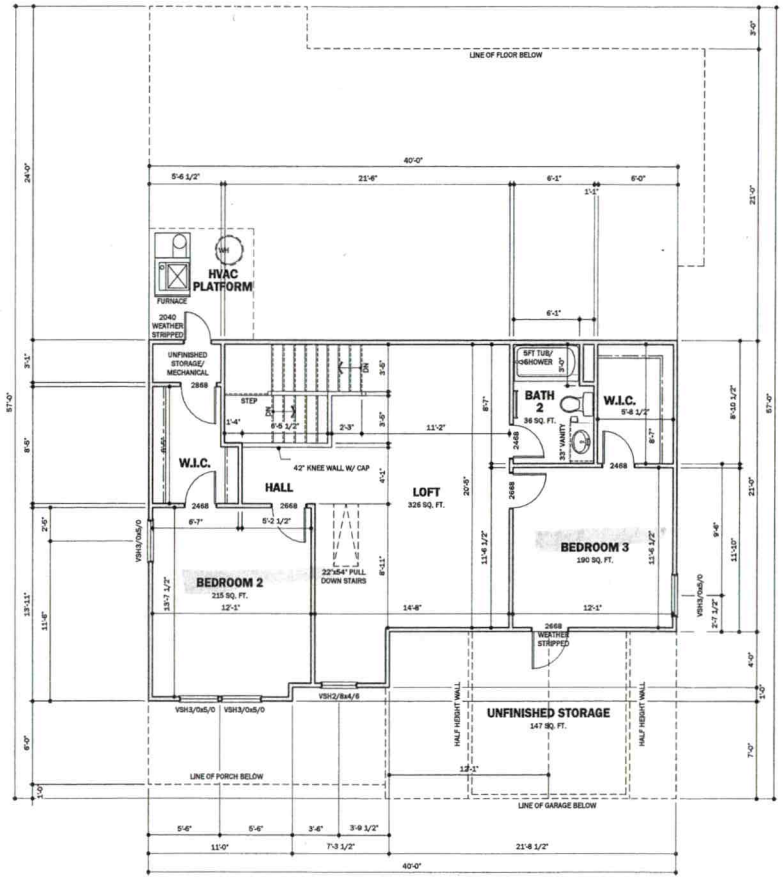
Project/plan code
—

Drawing set
FOR CONSTRUCTION

Sheet title/description
CRAWL SPACE FOUNDATION PLAN

Sheet no.
A2.2A

Master plan version
v1.0



SECOND FLOOR PLAN - ELEVATION A

SCALE: 1/4" = 1'-0"
8'-1 1/8" WALL HEIGHT
WINDOW HEADER @ 7'-0" A.F.F.

Plot Scale: 22"x34" = 1/4"=1'-0" Plotted by:

WALL STUD REQUIREMENTS	
EXT. WALL HEIGHT (h)	STUD SIZE AND SPACING
h < 10'-0"	2x4 @ 16" O.C.
10'-0" < h <11'-0"	2x4 @ 12" O.C.
11'-0" < h < 18'-0"	2x6 @ 16" O.C.
h > 18'-0"	CONSULT ENGINEER

I-JOIST NOTES

FRAMING CONSTRUCTION NOTES:

BRACED WALL LINE NOTE:
THIS STRUCTURE HAS BEEN ANALYZED FOR LATERAL LOADING USING CONTINUOUSLY SHEATHED ½" OSB WALL SHEATHING USING 8D NAILS AT 6" O.C. ALONG THE EDGE AND 12" O.C. AT INTERMEDIATE FRAMING. BLOCK AND NAIL ALL PANEL EDGES. ON FRONT ELEVATION ONLY, WHERE BRACED WALLS DO NOT MEET THE PRESCRIPTIVE REQUIREMENTS OF SECTION R602.10 OF THE CODE, IT HAS BEEN ANALYZED BY ENGINEERING ANALYSIS INCORPORATING ENGINEERED LATERAL BRACING ELEMENTS WHERE NEEDED TO MEET THE INTENT OF THE CODE. SEE PLANS FOR ALL NOTES AND DETAILS.

1. I-JOISTS ARE DESIGNED TO BE CONTINUOUS IN SOME AREAS. I-JOIST MANUFACTURER TO STOP AND START JOISTS WHERE SHOWN ON PLAN TO ALLOW FOR CONTINUOUS ACTION.
2. "DBL" INDICATES DOUBLE JOIST
3. RIM BOARDS AND BANDS PARALLEL TO FLOOR FRAMING TO BE DOUBLED.
4. ALL LOAD- BEARING HEADERS SHALL BE (2)2X8 SPF#2 UNLESS OTHERWISE NOTED ON THE PLAN.
5. WHERE DIMENSIONS ARE NOT INDICATED, BEAMS THAT RUN PARALLEL TO FLOOR JOISTS ARE INTENDED TO ALIGN UNDER LOAD BEARING WALLS. SEE THE ARCHITECTURAL PLANS FOR DIMENSIONS TO WALLS.
6. ALL WALLS UP TO 10 FT. TALL SHALL BE 2X4 SPF#2 @ 16" O.C. UNLESS NOTED OTHERWISE ON THE PLAN. TALLER WALLS SHALL COMPLY WITH TABLE R602.3(5) OF THE CODE OR AS NOTED ON THE PLAN.
7. WOOD BEAMS SHALL BE SUPPORTED BY METAL HANGERS OF ADEQUATE CAPACITY WHERE FRAMING INTO BEAMS OR LEDGERS. THE FOLLOWING HANGER SCHEDULE MAY BE USED UNLESS NOTED OTHERWISE ON THE PLAN:

MEMBER SIZE	SIMPSON HANGERS
(2) 2X8	LUS 28-2
(2) 2X10	LUS 210-2
(2) 2X12	LUS 210-2
(2) 1¾" X 9¼" LVL	HUS 410
(2) 1¾" X 11⅞" LVL	HUS 412
(2) 1¾" X 14" LVL	HUS 412
ALL TRIPLE LVLs	HHUS 5.50/10

8. NOTE: FILL ALL OF THE HOLES IN HANGERS WITH 16d x 3½" COMMON NAILS (3β"x 0.162") OR 16d x2½" (2β"x 0.162") NAILS UNLESS OTHERWISE SPECIFIED BY THE MANUFACTURER. DO NOT BEND OR MODIFY THE HANGER OR USE INAPPROPRIATE FASTENERS. DO NOT USE 10dX 1½" "HANGER NAILS" UNLESS OTHERWISE NOTED ON THE PLANS OR IN SITUATIONS WHERE ONLY 1β" OR LESS OF WOOD IS PROVIDED TO NAIL INTO.
9. STEEL BEAMS MUST HAVE (5)-2X4 OR (4)-2X6 STUDS UNDER EACH END SUPPORT UNLESS NOTED OTHERWISE.
10. "LVL" AND GLU-LAM BEAMS MUST HAVE ENOUGH STUDS TO SUPPORT ALL PLIES AT EACH END WITH A MINIMUM OF (3)-2X4 OR (2)-2X6 STUDS UNDER EACH END UNLESS NOTED OTHERWISE.

I-JOIST NOTES

FRAMING CONSTRUCTION NOTES:

11. ALL POINT LOADS FROM ROOF BRACES, JACK STUDS, BEAM SUPPORTS -WHETHER WOOD OR STEEL-CANNOT BEAR ON SHEATHING ALONE. BLOCKING EQUAL TO OR BETTER THAN THE POINT LOAD SUPPORTS ABOVE MUST BE CARRIED THROUGH ALL CONSTRUCTION TO THE FOUNDATION. INSTALL 2X4 SQUASH BLOCKS (S.B.) OF EQUAL NUMBER TO COLUMN ABOVE BETWEEN SUBFLOOR AND FOUNDATION WALL OR LOWER PLATE. RIM BOARDS AND I-JOIST BLOCKING SHALL NOT BE CONSIDERED AS AN ACCEPTABLE MEANS OF SUPPORT UNDER CONCENTRATE POINT LOADS FROM LVL AND STEEL BEAMS OR WHERE "S.B" IS INDICATED ON THE PLAN.
12. FASTEN ALL TRIPLE PLY LVLs TOGETHER WITH TWO ROWS OF 5" LONG TRUSSLOK OR SIMPSON SDS SCREWS @ 16" O.C. AND FOUR PLY LVLs WITH TWO ROWS OF 6½" TRUSSLOK SCREWS @ 16" O.C. UNLESS NOTED OTHERWISE ON THE PLANS. THE SCREWS SHALL BE LOCATED A MINIMUM OF 2" AND A MAXIMUM OF 3" FROM THE TOP OR BOTTOM OF THE BEAM.
13. FASTEN FIRST KING STUD TO LUMBER HEADER WITH AT LEAST THREE 16D (3β"X0.162") IN EACH PLY.
14. JACK AND KING STUD SCHEDULE AT WALL OPENINGS
TO BE INSTALLED AT EACH END OF OPENING UNLESS OTHERWISE NOTED AS "#/" OR "#K" ON PLAN)
SPANS UP TO 4'-0" .....1 JACK, 1 KING
SPANS >4'-0" TO 5'-6" .....1 JACK, 2 KINGS
SPANS >5'-6" TO 8'-0" .....2 JACK, 3 KINGS
SPANS >8'-0" .....SEE PLAN

Acknowledgement Of Plans Submittal ONLY!
Heather Porter Date 3/15/22
Bryant Cribbett Date 3-11-2022

NEST HOMES

Township/County
IREDELL COUNTY
STATESVILLE, NC

Engineer

Stamp/seal

Project name/owner
THE CARDINAL
ELEVATION A
POWDER SPRINGS 10 SPEC

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Date
January 26, 2022

Drawn by
MCML

Reviewed by
INITIALS

Plan set scale
22x34= sheet
1/4" = 1'-0"
11x17 sheet
1/8" = 1'-0"

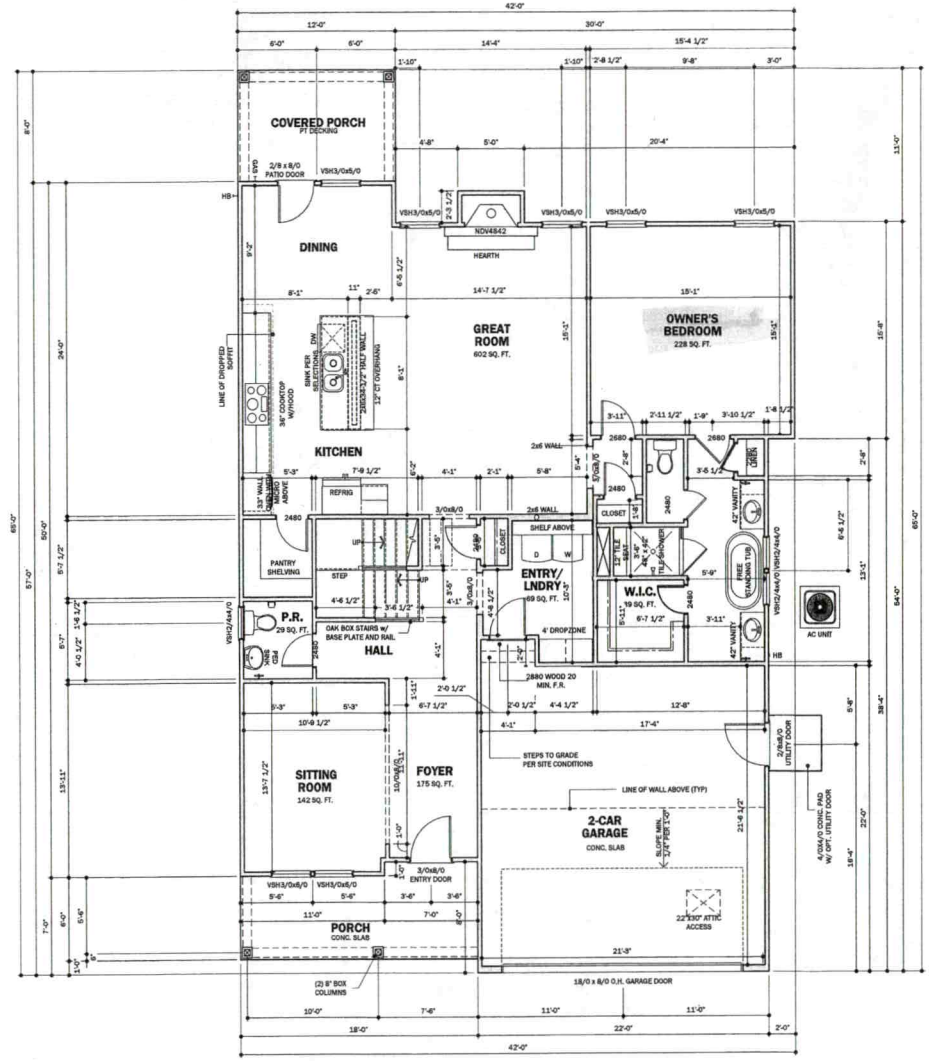
Project/plan code
—

Drawing set
FOR CONSTRUCTION

Sheet title/description
FIRST FLOOR PLAN
ELEVATION A

Sheet no.
A3.1A

Master plan version
v1.0



FIRST FLOOR PLAN - ELEVATION A

SCALE: 1/4" = 1'-0"
9'-1 1/8" WALL HEIGHT
WINDOW HEADER @ 8'-0" A.F.F.

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I-JOIST NOTES

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Bryant C. White Date 3-11-2022

HOMES

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THE CARDINAL
ELEVATION A
POWDER SPRINGS 10
SPEC

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