ICHD–ENVIRONMENTAL HEALTH DIVISION

PJB

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

PERMIT # AP 308505

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

PIN # 4730-30-1905

APPLICANT/OWNER: Joe & Lynda Elliott APPLICANT ADDRESS: 102 Clubhouse Dr. New London NC 28127

SITE ADDRESS: 295 Lockhard Circle Troutman, NC 28166 PHONE: 603 608-5953 ALT. PHONE 980 395-4288

SITE DIRECTIONS: Perth Rd N TL State Park Rd TL Lockhard Circle on right

SUBDIVISION: Allison Acres SECTION: -1- LOT # 22 LOT AREA: .913 Ac

SAP CONTROLLED: ☒ YES ☐ NO

DESIGN FLOW: 240 gpd L.T.A.R.: .3 Int / .25 Rep

Septic Tank	1000	(gal)	STB		Date		☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	
Pump Tank		(gal)	PT		Date		System Description:	Gravity -25% Reduction			
Pump Make			Model		Serial #		Repair System Description:	PDBPS			
# Nitrification Fields	1		# Lines	3	Linear Ft.	Min 200'	Maintenance Agreement Required:	☐ YES	☒ NO		
Trench Width	36"		Trench Bottom Depth(Low side)	32"	Gravel Depth	N/A	☒ GRAVITY	☐ PRESSURE			

☒ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/plumbing

No. Bedrooms 2 No. Persons 4 No. Employees ☒ Crawl Space

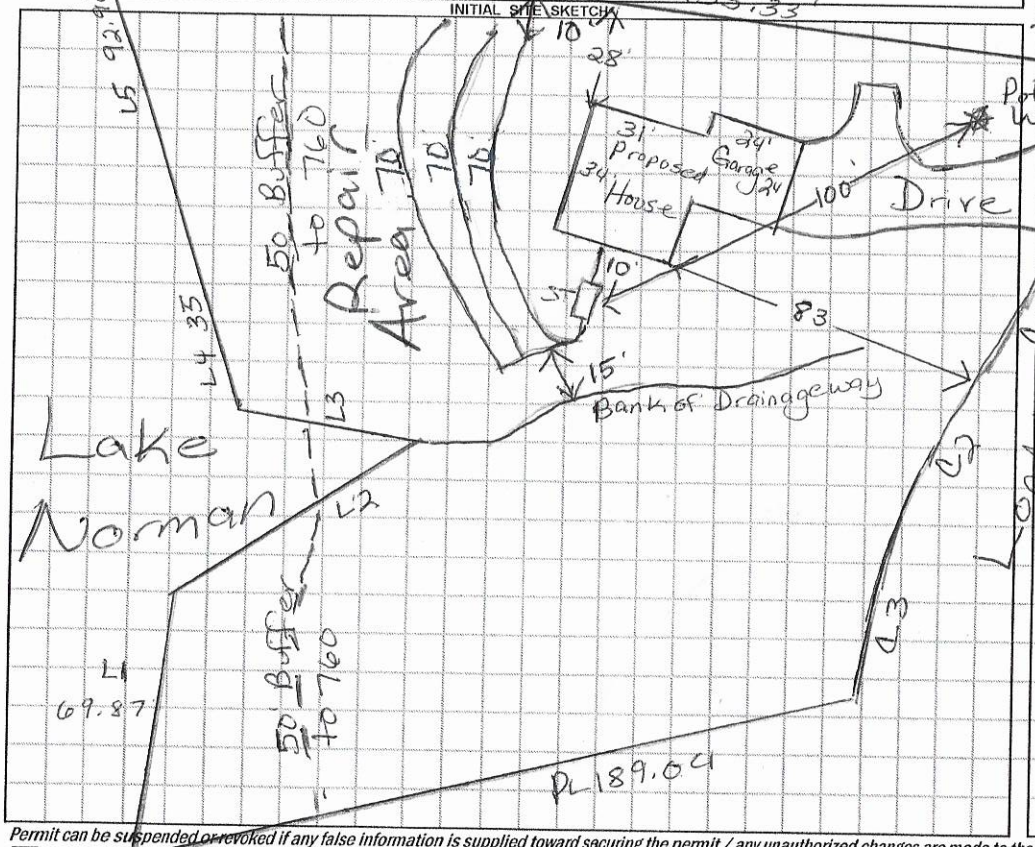
Water Supply: ☒ Private ☐ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions: * Divert Storm/Surface water away from Septic

Must keep well 100ft from Septic.

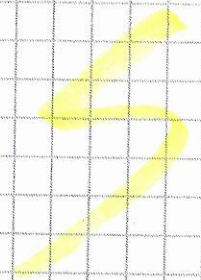
INITIAL SITE SKETCH



AS BUILT SKETCH

Scale 1:50

* Installed as permitted



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: Acceptance of Permit Read Date: 8.4.2020 Installed by: Groundbreakers

IMPROVEMENT PERMIT by: Maria Dotson Date: 8/3/2020 OPERATION PERMIT by: Benjamin A. Botkins Date: 10-23-2020

AUTHORIZATION TO CONSTRUCT by: Benjamin A. Botkins Date: 8/17/2020 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.

ON-SITE WASTEWATER SECTION

PROPERTY ID #: 9730301905
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Joe & Lynda Elliott
ADDRESS: 102 Clubhouse Dr NewLondon NC 28127 APPLICATION DATE
PROPOSED FACILITY: House PROPOSED DESIGN FLOW (.1949): 2400gpd DATE EVALUATED: 7/21/20
LOCATION OF SITE: 299 Lockhard Circle Statesville PROPERTY SIZE:
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other PROPERTY RECORDED:
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut 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
A	L 5%	0-16	Fill						PS .3
		16-23	Brw SCL w SBK	SS, SP, SExP, FR					
		23-38	R C/CL m-w SBK	SS, SP, SExP, FR					
			SAP Inclus						
		38-48	L SAP massive FR						
B	6%	0-9	Brw SCL w SBK	SS, SP, SExP, FR					PS .25
		9-27	RC m-w SBK	SS, SP, SExP, FR					
		27-46	RC w SBK	SS, SP, SExP, FR					
			w/ Red/Brw Inclus						
		46-52	RCL w SBK	SS, SP, SExP, FR w/ SAP Inclus					
C	5%	0-9	Brw SCL	SS, SP, SExP FR					PS .3
		9-23	Brw to R C/CL w SBK	SS SP, SExP, FR					
			w/ SAP Inclus						
		23-53	L/SCL SAP massive						
				FR					
D	7%	0-9	Brw SCL w SBK	SS, SP, SExP, FR					PS .3
		9-30	Red/Brw, C CL w SBK						
			w/ SAP Inclus & Quartz pieces						
		30-56	L SAP massive, FR						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	25% Red	50% Red
Site LTAR	.3	.25

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Maria Dotson
OTHER(S) PRESENT: Joe Elliott

COMMENTS:

LEGEND

use the following standard abbreviations

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

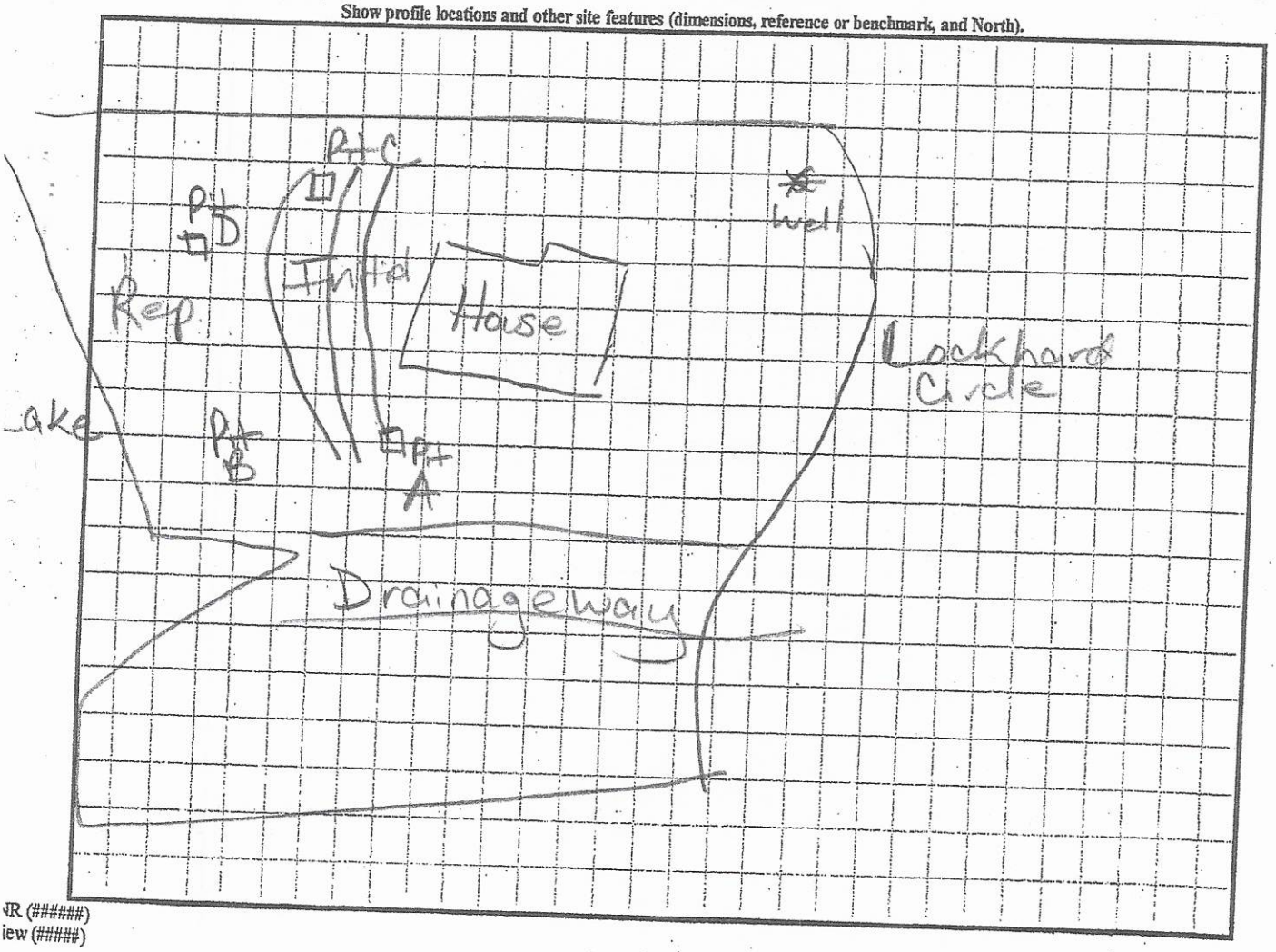
NOTES

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/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



NR (######)
iew (#####)

HLA - 964

House 34' x 31' attached garage 24' x 24'

PRELIMINARY FOR REVIEW ONLY

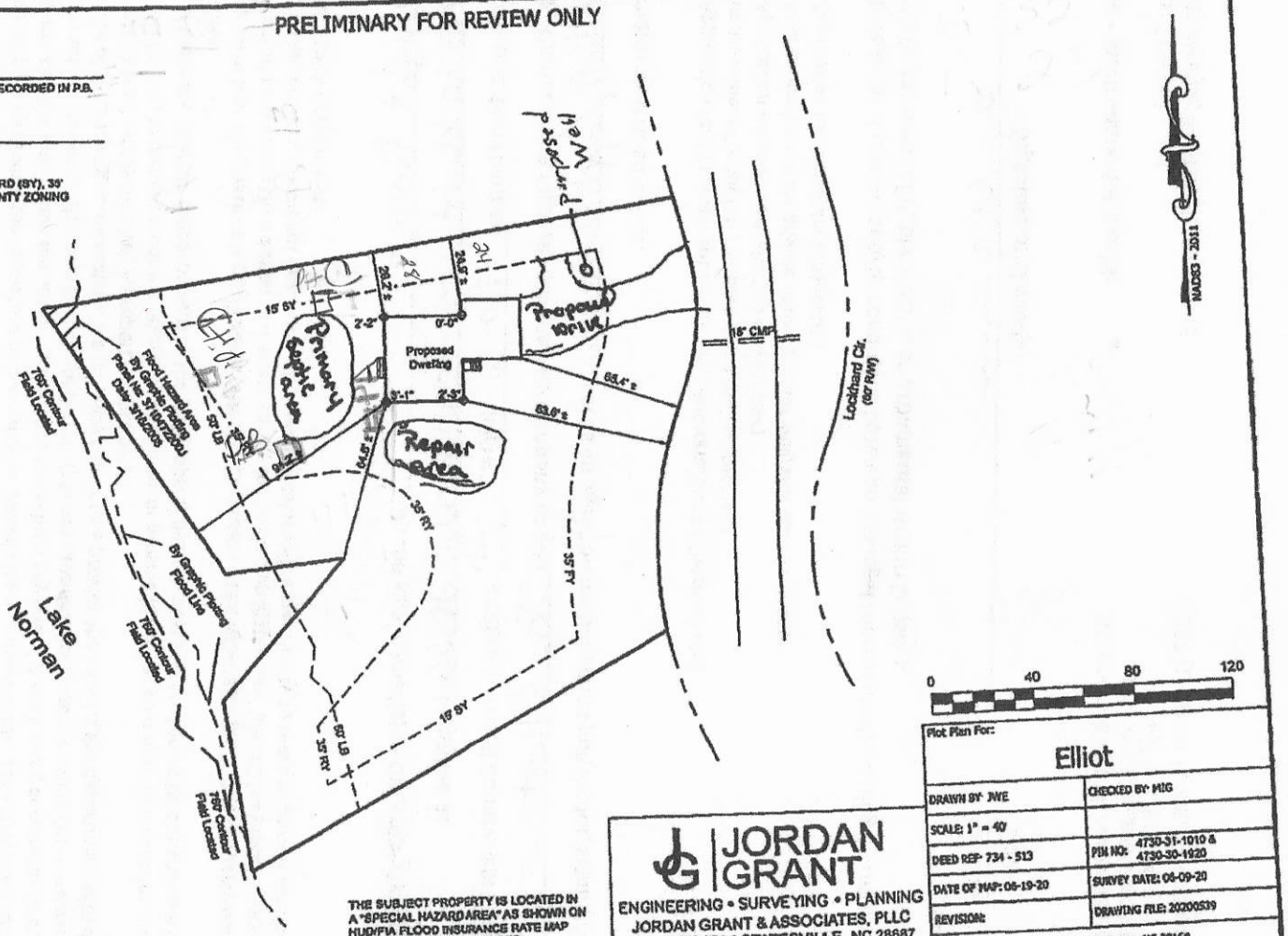
REFERENCE:

BEING ALL OF LOT(S) 22 & 23 - RECOMBINATION PLAT - AS RECORDED IN P.B. 72, PG. 24 - IREDELL COUNTY REGISTRY

SETBACKS:

PROPERTY IS ZONED: R-20 (IREDELL COUNTY)

PROPERTY SUBJECT TO A 35' FRONT YARD (FY), 15' SIDE YARD (SY), 35' REAR YARD (RY), & 50' LAKE BUFFER (LB) PER IREDELL COUNTY ZONING ORDINANCE



0 40 80 120

LEGEND	
FY	FRONT YARD SETBACK
LB	LAKE BUFFER
SY	SIDE YARD SETBACK
R/W	RIGHT OF WAY
P.B.	PLAT BOOK
PG.	PAGE
CMP	CORRUGATED METAL PIPE

THE SUBJECT PROPERTY IS LOCATED IN A "SPECIAL HAZARD AREA" AS SHOWN ON HUD/FIA FLOOD INSURANCE RATE MAP COMMUNITY PANNEL NUMBER 3710473000J EFFECTIVE DATE 3/16/2006.

JORDAN GRANT
ENGINEERING • SURVEYING • PLANNING
JORDAN GRANT & ASSOCIATES, PLLC
P.O BOX 151 * STATESVILLE, NC 28687
FIRM # P-1227

Plot Plan For:

Elliot

DRAWN BY: JWE	CHECKED BY: MIG
SCALE: 1" = 40'	
DEED REF: 734 - 513	PIN NO: 4730-31-1010 & 4730-30-1920
DATE OF MAP: 06-19-20	SURVEY DATE: 06-09-20
REVISION:	DRAWING FILE: 20200539

295 Lockhard Cir, Troutman, NC 28166.
Fallstown TWSP - Iredell County - North Carolina

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

Sheet 1 of 2

PROPERTY ID #:

DATE OF EVALUATION: Feb 2018

COUNTY: Iredell

Dwight Fraver c/o Jason Stevenson - Lots 22 & 23 Lockhard Circle

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
P1	4/8%	0-20	fill		few sap				PS .3 down side slope has 20" of fill (Remove)
		6-6.	BtG.	frSSSP					
		6-14	BCl wfsblk	frSSSP					
		14-41	RC MMsblk/clok	frSSSP					
		41-60	RBC l wfsblk	frSSSP					
P2	4/7%	0-10	BrslG		few sap				PS .275-.3 down slope side 12"fill (remove)
		10-14	RBC l wfsblk	frSSSP					
		14-45	RC wmsblk/vblk	frSSSP					
		45-48	RBC l w msblk	frSSSP					
P3	4/5%	0-3	BSl		few sap				PS .275-.3
		3-8	RBC l wfsblk	frSSSP					
		8-32	RC wmablk/sblk	frSSSP					
		32-54	RBC l wfsblk	frSSSP					
		54-60	varsl mass	frSSSP					
P4	4/5%	0-6	BSl G	frSSP	few mineral deposit				PS .28-.3
		6-10	BCl wfsblk	frSSSP					
		10-37	BRC wmsblk/blk	frSSSP					
		37-54	RBC l wmsblk	frSSSP					
P5	4/6%	0-5	BlG	frSSSP	few mineral/ com sap				PS .275-.3
		5-35	BRC wmsa/a	frSSP					
		35-60	RBC l wfsblk	frSSSP					

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

PROPERTY ID #:
DATE OF EVALUATION: Feb 2018
COUNTY: Iredell

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ.	PROFILE CLASS & LTAR
P 6	L/12%	0-11	BlG	frssSP					PS.3
		11-36	BRCwmsbk/gbk	frSSP					
		36-57	RBCl wmsbk	frSSSP	f scp				
P 7	L/6%	0-3	BlG						PS.3
		3-28	BRCwmsbk/gbk	frSSSP					
		28-52	RBCl wfsbk	frSSSP	com scp				
P 8	L/8%	0-6	BSl						0125 Drip
		6-28	RCwmsbk/gbk	frSSSP	26" comarfrag Litrochromic Chrom 2; Chromo2?				
		28-60	vcrsl mass	frSSP					
P 9	L/7%	0-9	BlG	frSSP					PS
		9-26	RCwmsbk/gbk	frSSSP					iS
		26-48	RBSCl vwfsbk	frSSSP	com scp				

COMMENTS:

RECEIVED JUN 26 2020 HY-308505
$500.00

MD

DocuSign Envelope ID: 72260E4B-AE27-4FB0-9B09-F3824E5F0E41

APPLICATION MUST BE FILLED OUT COMPLETELY & BE LEGIBLE OR IT WILL NOT BE PROCESSED

Iredell County Health Department – Environmental Health Division

PAGE 1: *APPLICATION FORM*

Application For: (X) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
(X) 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: Joe & Lynda Elliott Address: 102 Clubhouse Dr. New London Zip: 28127
Applicant Email: racing08jr@yahoo Phone: 603-608-5953 Alt. Phone: 980-395-4288
Owner Name: Dwight Fraver (Estate) Address: 2649 Amity Hill Rd. Statesville Zip: 28677
Owner Email: sfraver@gmail.com Phone: 704-880-1818 Alt. Phone: _____

Property Information:

299 [illegible]
Street Address: [illegible] Lockhard circle Troutman, NC 28166
Subdivision Name: Allison Acres Section/Phase: _____ Lot Number: 22
Driving Directions: Turn onto State park road, from Perth, turn left onto lockhard circle

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

(X) 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: 2
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____

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

Non-Residential Site Development: Type of Business: _____
Square Footage of Building: 1500 sq ft 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 (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.

DocuSigned by: Joey Elliott DocuSigned by: Lynda Elliott
Signature: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

6/24/2020 | 7:56 AM EDT 6/24/2020 | 7:54 AM
DATE

DocuSign Envelope ID: 72260E4B-AE27-4FB0-9B09-F3824E5F0E41

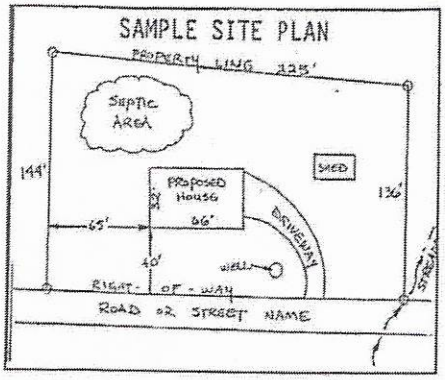
MacBook Air

IREDELL COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*



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

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

Circle N/A on the following if appropriate:

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

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 survey map

Signature: DocuSigned by: Jory Elliott FB402AB0C4D3440... DocuSigned by: Lynda Elliott 0378D27BE108483...

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

6/24/2020 | 6/24/2020 7:54 AM EDT

DATE

Revised #2

RECEIVED AUG 17 2020

PRELIMINARY FOR REVIEW ONLY

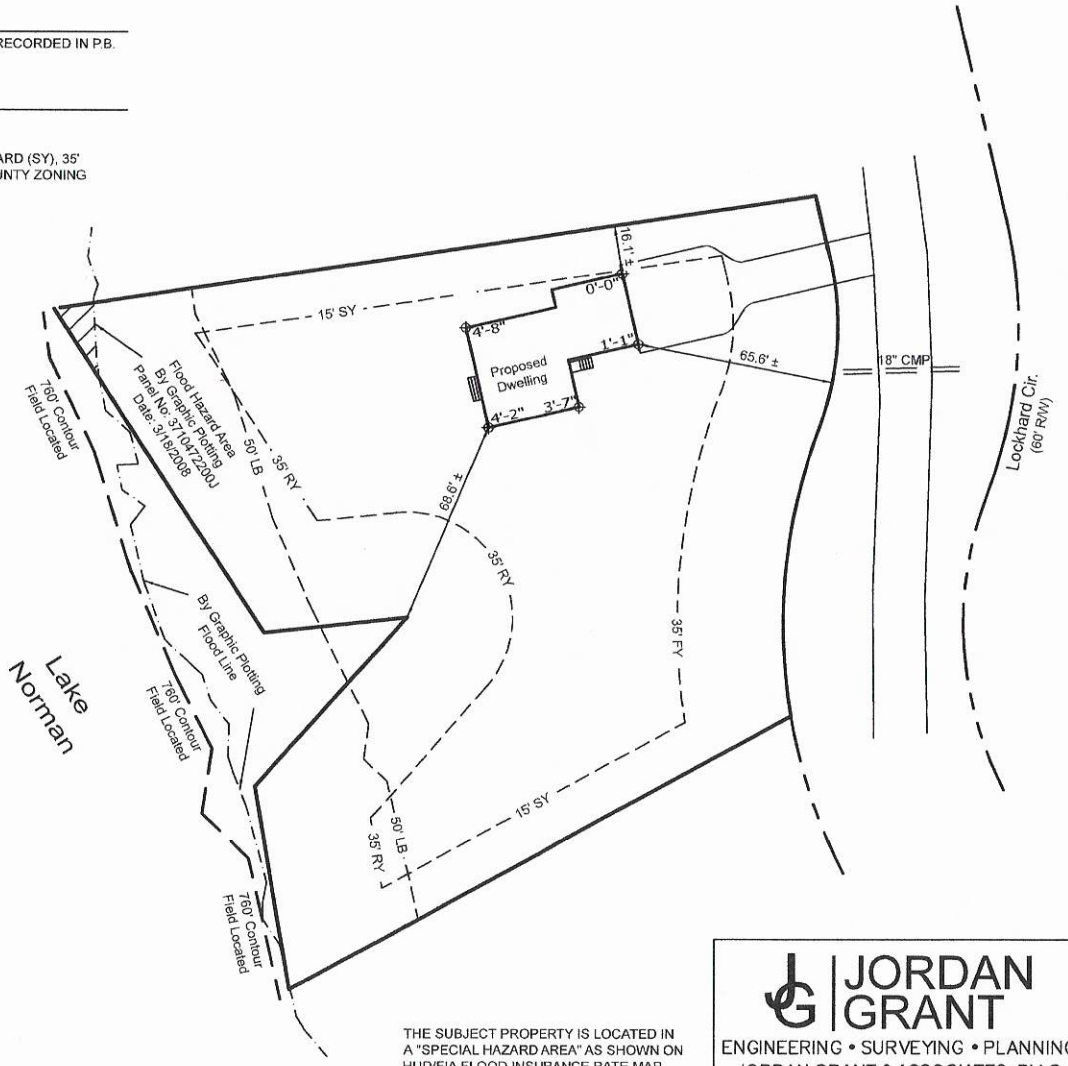
REFERENCE:

BEING ALL OF LOT(S) 22 & 23 - RECOMBINATION PLAT - AS RECORDED IN P.B. 72, PG. 24 - IREDELL COUNTY REGISTRY.

SETBACKS:

PROPERTY IS ZONED: R-20 (IREDELL COUNTY)

PROPERTY SUBJECT TO A 35' FRONT YARD (FY), 15' SIDE YARD (SY), 35' REAR YARD (RY), & 50' LAKE BUFFER (LB) PER IREDELL COUNTY ZONING ORDINANCE.







LEGEND	
FY	FRONT YARD SETBACK
LB	LAKE BUFFER
SY	SIDE YARD SETBACK
R/W	RIGHT OF WAY
P.B.	PLAT BOOK
PG.	PAGE
CMP	CORRUGATED METAL PIPE

THE SUBJECT PROPERTY IS LOCATED IN A "SPECIAL HAZARD AREA" AS SHOWN ON HUD/FIA FLOOD INSURANCE RATE MAP COMMUNITY PANNEL NUMBER 3710473000J EFFECTIVE DATE 3/18/2008.

JORDAN GRANT

ENGINEERING • SURVEYING • PLANNING

JORDAN GRANT & ASSOCIATES, PLLC

P.O. BOX 151 * STATESVILLE, NC 28687

FIRM # P-1227

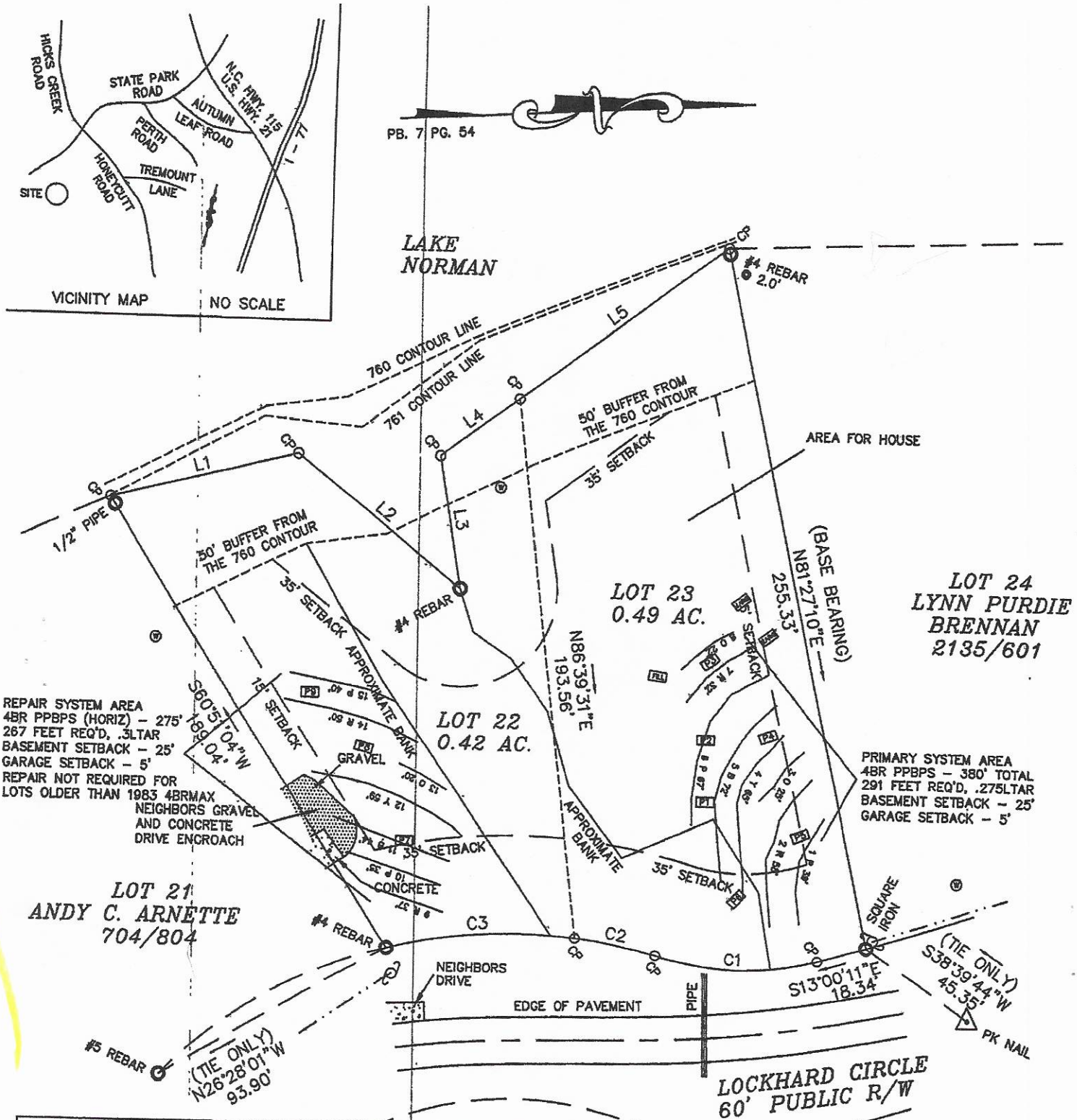
Plot Plan For:

Elliot

DRAWN BY: JWE	CHECKED BY: MIG
SCALE: 1" = 40'	
DEED REF: 734 - 513	PIN NO: 4730-31-1010 & 4730-30-1920
DATE OF MAP: 06-19-20	SURVEY DATE: 06-09-20
REVISION: 08-17-20	DRAWING FILE: 20200539

295 Lockhard Cir, Troutman, NC 28166

Fallstown TWSP - Iredell County - North Carolina



CURVE TABLE				
CURVE	RADIUS	LENGTH	BEARING	CHORD
C1	97.99'	59.04'	N 04°44'29" E	58.15'
C2	180.00'	29.72'	S 15°14'58" W	29.68'
C3	180.00'	68.70'	S 00°24'49" E	68.28'

LINE TABLE		
LINE	BEARING	LENGTH
L1	N 10°16'52" W	69.87'
L2	N 41°56'43" E	75.20'
L3	S 84°01'43" W	47.60'
L4	N 33°01'17" W	35.00'
L5	N 33°08'00" W	92.90'

NOTES

1) THIS PROPERTY MAY BE SUBJECT TO ANY EASEMENT AND/OR RIGHTS-OF-WAY OF RECORD.
2) AREA COMPUTED BY THE COORDINATE METHOD.
3) EXISTING 760' & 761' CONTOUR ELEVATION BASED ON LAKE NORMAN LAKE LEVEL AT COWAN'S FORD DAM (READING ON 2/5/18) ELEVATION: 757.2'
4) OVERHEAD POWER
5) NO GRID MONUMENT FOUND WITHIN 2000 FEET.
6) TAX PARCELS: 4730301920 & 4730311010

0' 25' 50' 100'

SCALE IN FEET

1:50

LEGEND

P.P. = POWER POLE
POWER TRANS.
E.I.P. = EXISTING IRON FOUND
I.P.S. = #4 REBAR SET
R/W = RIGHT-OF-WAY
W = WELL
PDE = PUBLIC DRAINAGE EASEMENT
CP = COMPUTED POINT

DigiSign Verified: B1BC7CB7-38FD-48C0-AD82-5EF8C1189098

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, Dwight Fraver, am the legal owner(s) of the property located at 295 Lockhart circle Troutman NC 28166, identified as PIN (Parcel Identification Number) 4730-30-1905, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) Joe Elliott Lynda Elliott/Applicants, 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.

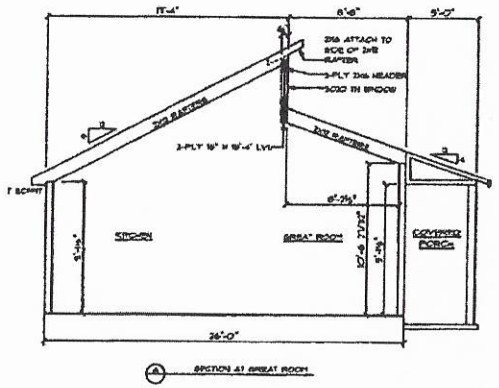
Dwight & Fraver
Signature of Owner(s)

06-24-2020
Date

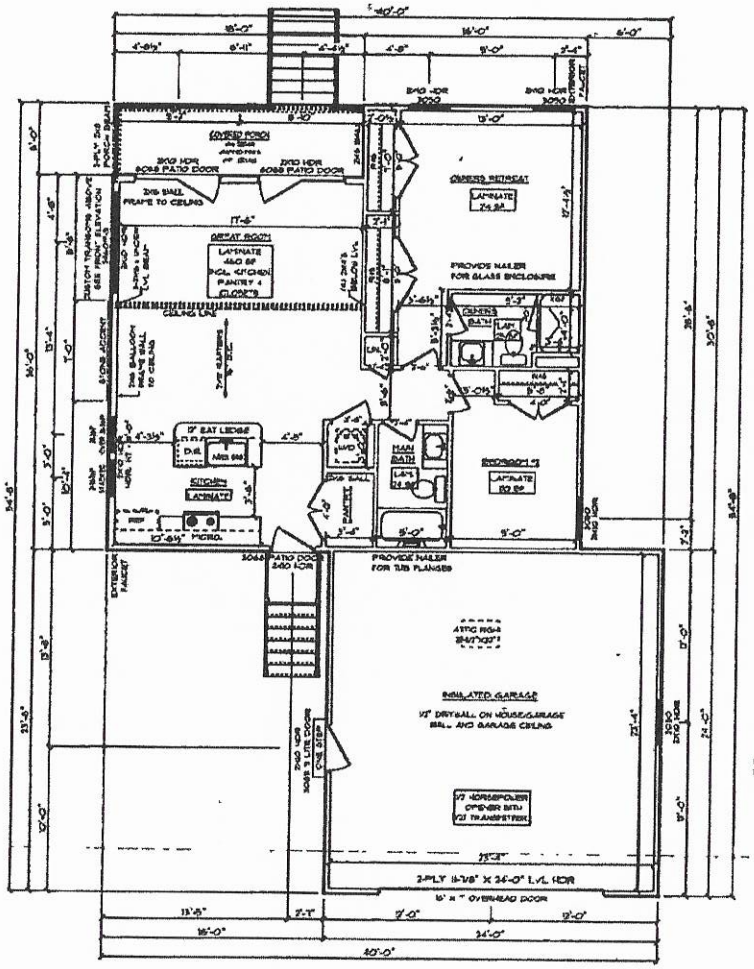
Mooresville - Environmental Health
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

FINAL DRAWINGS APPROVED: 00-00-00
REVISED: 00-00-00



A SECTION AT GREAT ROOM



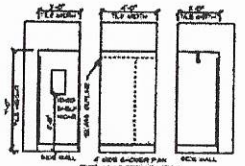
GENERAL FRAMING NOTES:
- DRYWALLED OPENINGS TO BE 6'-8" HEIGHT UNLESS OTHERWISE NOTED
- HEADERS TO BE 3-PLY 2X10 W (2) KING & (1) JACK STUDS UNLESS OTHERWISE NOTED
- ALL LVL'S AND CARRIER TRUSSES TO HAVE A MIN. OF (2) KING & (2) JACK STUDS, UNLESS NOTED OTHERWISE

PLAN NOTES:
- SMOOTH CEILINGS THROUGHOUT HOME
- PAINTED TRIM
- 5-1/4" BASEBOARDS
- 3-1/4" CASING ON INTERIOR DOORS AND WINDOWS HAVE DRYWALLED RETURNS
- 6-PANEL HOLLOW CORE MOLDED INTERIOR DOORS
- SILVERLINE, ENABLE HINGS, LOWE VINYL WINDOWS W/ ACLAR GLAZING

FLOORING NOTES:
- ALL FLOORING BREAKS OCCUR @ CENTER LINE OF DOOR OPENINGS UNLESS OTHERWISE NOTED
- FLOORING SQUARE FOOTAGES INCLUDE CLOSETS RELATIVE TO THE AREA UNLESS OTHERWISE NOTED
- SOME FLOORING SQUARE FOOTAGES MAY INCLUDE HALLS OR AREAS THAT CONNECT WITHOUT WALL SEPARATION IF THE SAME FINISH IS CONTINUED

WALL BRACING NOTES:

WALL BRACING IS UTILIZING AN ENGINEERED DESIGN AS FOLLOWS: ALL WALLS SHALL BE CONTINUOUSLY SHEATHED WITH MIN. 7/16" OSB FASTENED WITH 8d COMMON NAILS AT 6" O.C. ALONG EDGES AND 12" O.C. ALONG INTERMEDIATE FRAMING. ADD BLOCKING TO WALLS IF SHEATHING FALLS UP BETWEEN 2X4 AND 2X8 OF WALL AND REDUCE NAIL SPACING TO 3" O.C. ON EDGES AND 6" O.C. ON INTERMEDIATE FRAMING. PORTAL FRAME PER DETAIL SHALL BE CONSTRUCTED AT THE GARAGE DOOR OPENING.



4" TILED SHOWER DETAIL

COTTAGEWOOD MODERN / CUSTOM
MAIN FLOOR PLAN
9' CEILING HEIGHT

Acknowledgement Of Plans Submittal ONLY!

Date 8/17/2020

Date

Lynda Elliott 8.17.2020

8-17-2020

SCHUMACHER HOMES
Charlotte, NC
341 Alcove Road
Mooresville, NC 28117
(980) 267-3482
www.schumacherhomes.com

LYNDA & JOEY ELLIOTT
79 LOCKLAND CIRCLE
MOORESVILLE
IREDELL COUNTY

SQUARE FOOTAGE
MAIN FLOOR: 1841
GARAGE: 484
PORCH: 80

IREDELL COUNTY · NC

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

APPLICATION NUMBER
308505
Issue Date: 06/24/2020

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4730301905.000	299 LOCKHARD CIR	Iredell County

Owner Information	Applicant Information
Name: FRAVER RICHARD E LIV TR	Name: JOE AND LYNDA ELLIOTT
Address:	Address: 102 CLUBHOUSE DR.
	NEW LONDON, NC 28127
Phone:	Phone: (603)608-5953

Use Requested	Zone Code
Single Family Dwelling	R-20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.913	35	50	15	15	WSIV-CA Catawba/Lake Norman	YES

Remarks

SFD RICH IS CHANGING THE ADDRESS TO 295 LOCKHARD CIRCLE

Lake Lots: Must meet both the 50-foot setback from the 760' contour line and the 35-foot setback from the rear property line for any structure.

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.

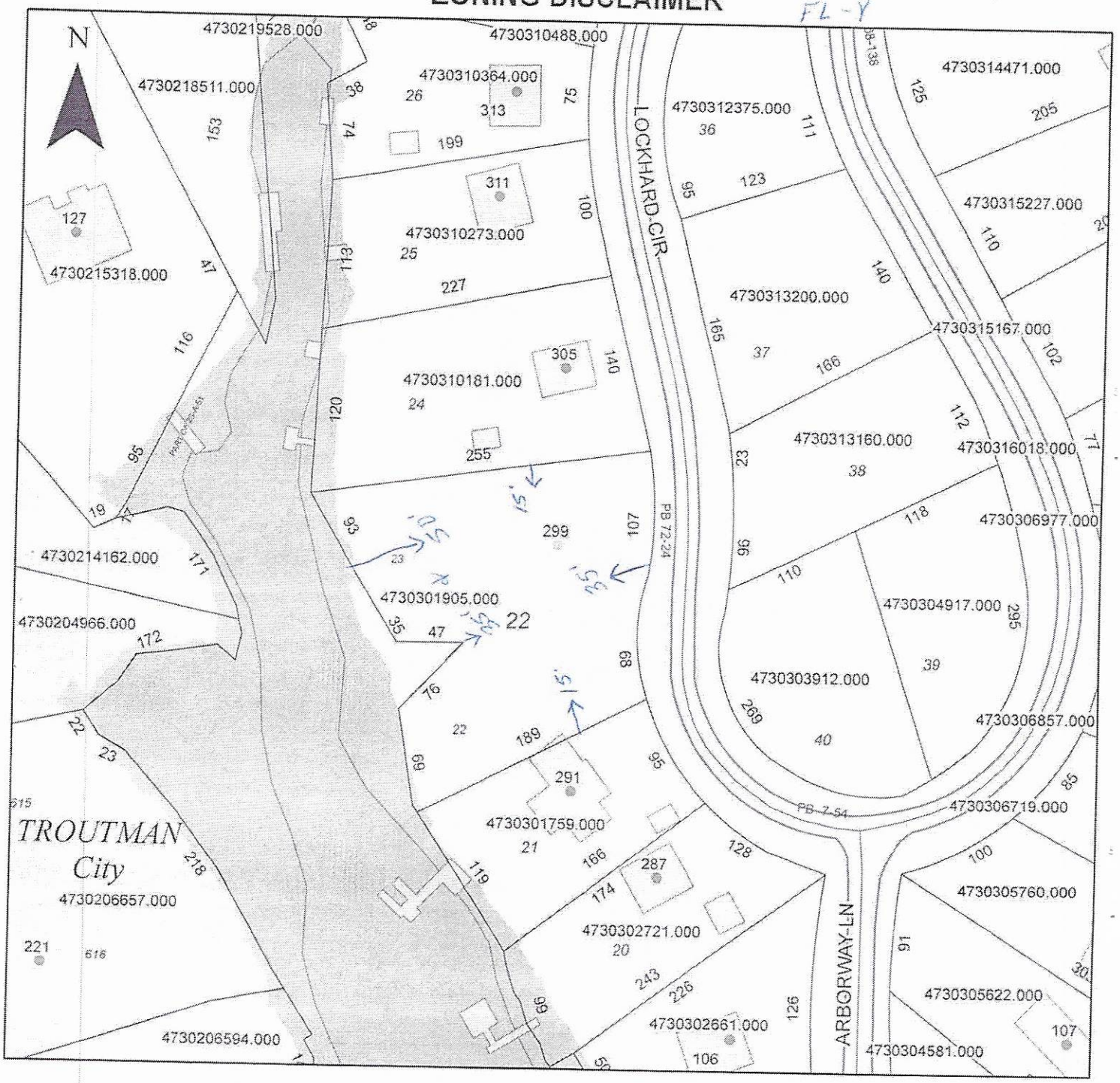
_____
Signature of Owner/Contractor

Date: 06/24/2020

Permit Number	308505	TOTAL FEES:	$77.25

K-20 .713AC 308303
WS IV CA C/LN
FL-Y

ZONING DISCLAIMER



Property Address 295 Lockhard Cir.

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. Applicant further acknowledges that the 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

6-24-2020
Date