ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 | Mooresville Office (704) 660-3625 | PERMIT # AP 326182

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

PIN # 4731 -- 11 -- 5132

APPLICANT/OWNER: Wesley Rash | APPLICANT ADDRESS: 177 Den Lon Ln, Troutman NC 28166

SITE ADDRESS: 177 Den Lon Lane, Troutman NC 28166 | PHONE: 704-929-5984 | ALT. PHONE 704-929-8293

SITE DIRECTIONS: (N) 21 → (L) Talley → (L) Lytton Farm → (R) Den Lon → lot at end | SAP CONTROLLED: ☐ YES ☒ NO

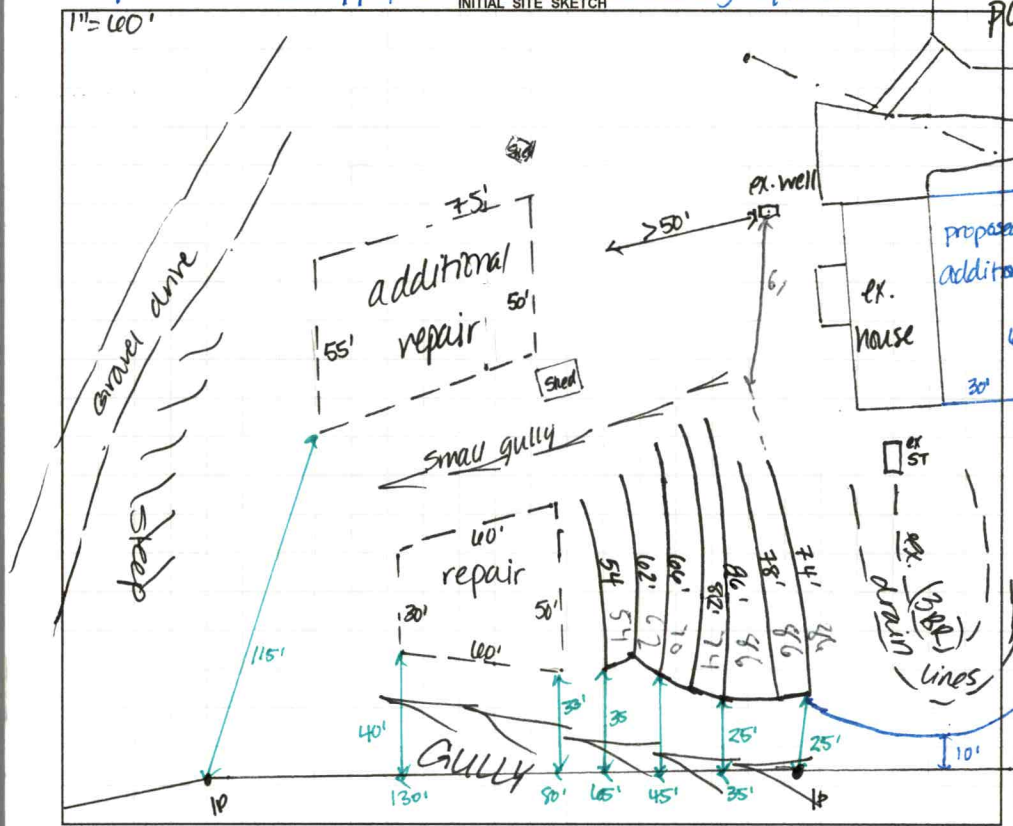
SUBDIVISION: — | SECTION: — | LOT # — | LOT AREA: 7.612 ac | DESIGN FLOW: 600 gpd | L.T.A.R.: 0.3

Septic Tank 1500 (gal)	STB I Infiltrator	Date	☒ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms 5	Water Supply
Pump Tank (gal)	PT	Date	System Description: 25% Reduction		☐ Business	No. Persons 10	☒ Private
Pump Make	Model	Serial #	Repair System Description: 50% Reduction		☐ Other	No. Employees	☐ Public
# Nitrification Fields 1	# Lines 7	Linear Ft 502'	Maintenance Agreement Required: ☐ YES ☒ NO		☒ Slab	☐ Crawl Space	☐ Community
Trench Width 36"	Trench Bottom Depth(Low side) 28"/36" MAX	Gravel Depth N/A	☒ GRAVITY ☐ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing	

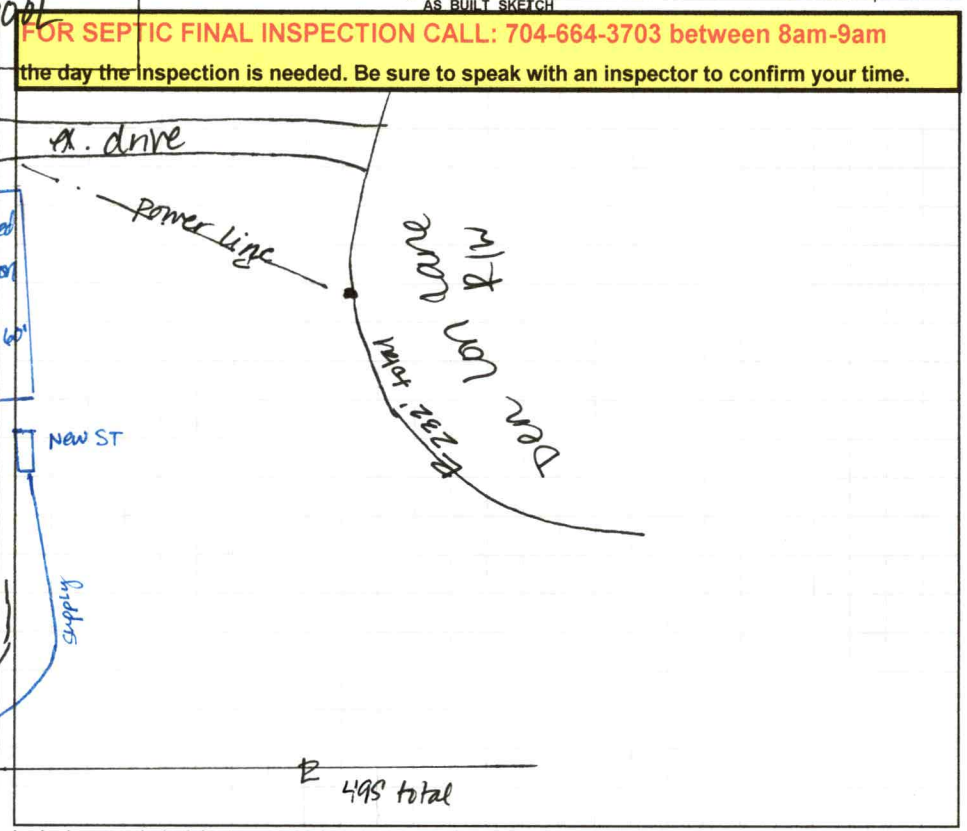
Comments / Conditions: Building a 5 bedroom addition to home, keeping existing 3BR separate system.
Keep new tank & supply line 6' min from existing system.

Fill small gully - stay 2' from filled area. Stay 15' from larger gully. Do not pave, grade, park, drive, or bury utilities in drainfield

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: [signature] Date: 5/4/22 Installed by: Ryan Byers

IMPROVEMENT PERMIT by: D. Mebane Date: 5/1/22 OPERATION PERMIT by: Matt Wilkie Date: 5/3/23

AUTHORIZATION TO CONSTRUCT by: D. Mebane Date: 5/1/22 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed.

Item	Date	Initials
Drain Lines Checked		
Tanks Checked		
Pressure Manifold or Valve Box Checked		
Pressure Head Set		
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Needed? Y / N		
Comments:		

Repairs Only	
	State Code
Failing System Code	
Type of Distribution	G or P
Type of Failure/Malfunction	
Primary Cause of Failure/Malfunction	
Age of System? _____	
Initial or Repair? _____	

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

Sheet 1 of 2
PROPERTY ID #: 473115732
COUNTY: Iredell

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

OWNER: Wesley Rash — APPLICATION DATE 3/16/22
ADDRESS: 177 Denlon Troutman NC 28166 — DATE EVALUATED: 3/29/22
PROPOSED FACILITY: 5BR addition — PROPOSED DESIGN FLOW (.1949): 1000 gpd — PROPERTY SIZE: 7.5/12
LOCATION OF SITE: 177 Denlon Troutman NC 28166 — PROPERTY RECORDED: not yet
WATER SUPPLY: ☐ Private ☐ Public ☒ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut — TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .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
1	LS 12%	0-6	SCL - WSBK	SSSP-FR-SELP	few Ltmo	52" incl 32"+	N/A	N/A	PS 0.3
		6-32	C - SBK	↓					
		32-52	CL - WSBK	↓					
2	LS 15%	0-6	SCL - WSBK	SSSP-FR SELP	sap incl	50" 24"+	N/A	N/A	PS 0.3
		6-24	C - SBK	↓					
		24-50	CL - WSBK	↓					
3	LS	0-6	SCL - WSBK	SSSP-FR SELP	Minor Ltmo incl	50"	N/A	N/A	PS 0.3
		6-34	C - SBK	↓					
		34-50	CL WSBK	↓			34"+		
4	LS 12%	0-5	SCL - SBK	SSSP-FR-SELP	sap incl	Common 28"+			PS 0.3
		5-28	C - SBK	↓					
		28-38	CL - WSBK	↓					
		38-52	CL - WSBK	↓					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	502	335'
System Type(s)	25%	50%
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: D. Wieberg
OTHER(S) PRESENT: W. Rash

COMMENTS: EXISTING 3BR for existing house, adding 5BR system for new addition. Wooded lot for addition

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	SEXP (Slightly Expansive)	G (Single Grain)
CV (Convex Slope)		LS (Loamy Sand)			EXP (Expansive)	M (Massive)
D (Drainage Way)						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.

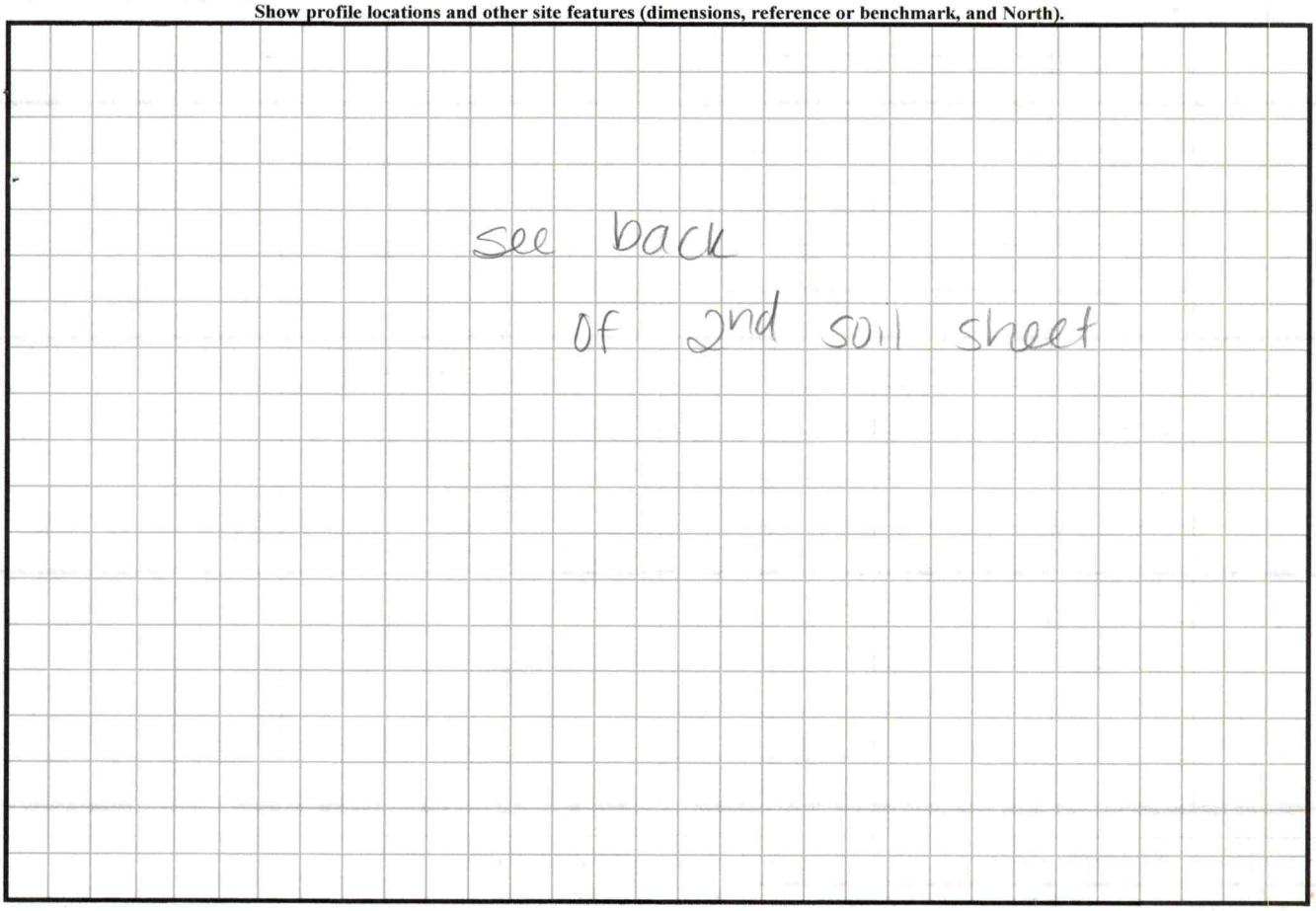
NOTES

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).



SOIL/SITE EVALUATION

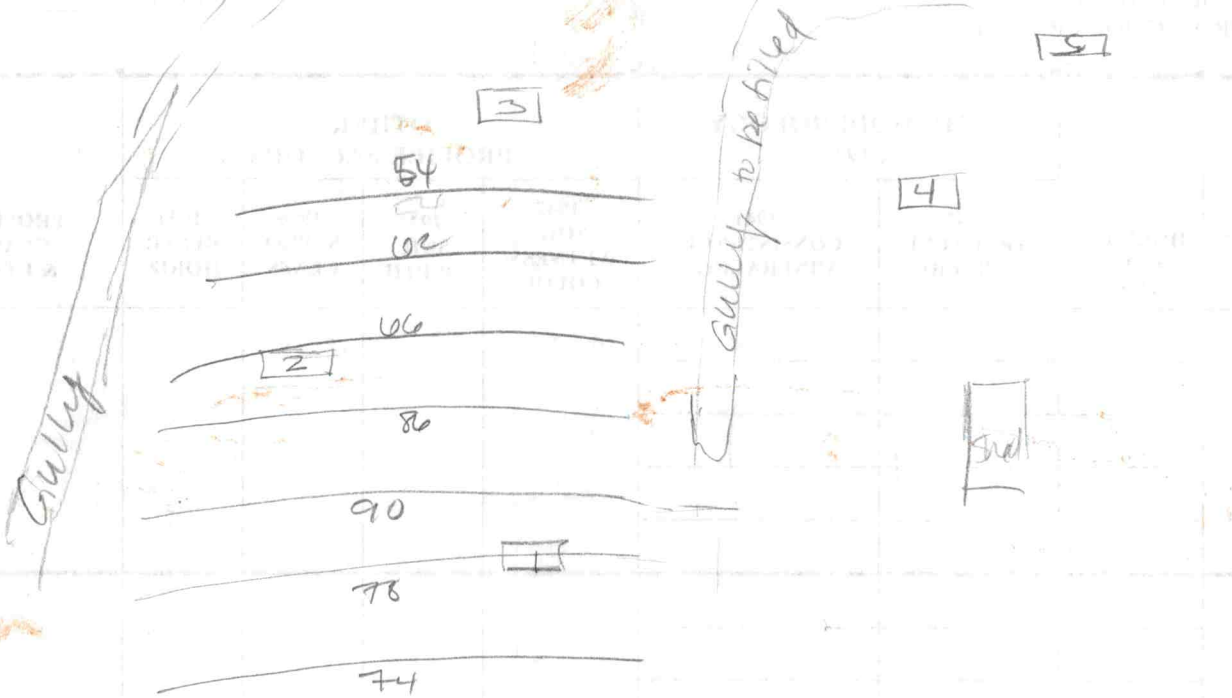
(Continuation Sheet-Complete all field in full)

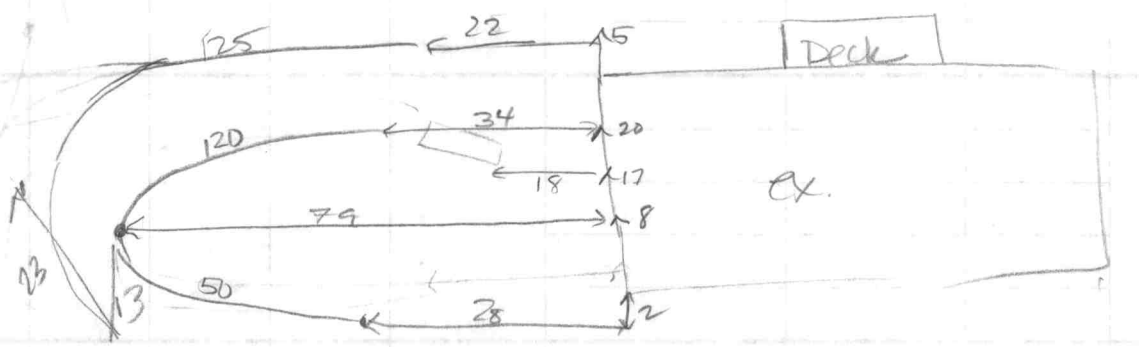
Sheet ____ of ____

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

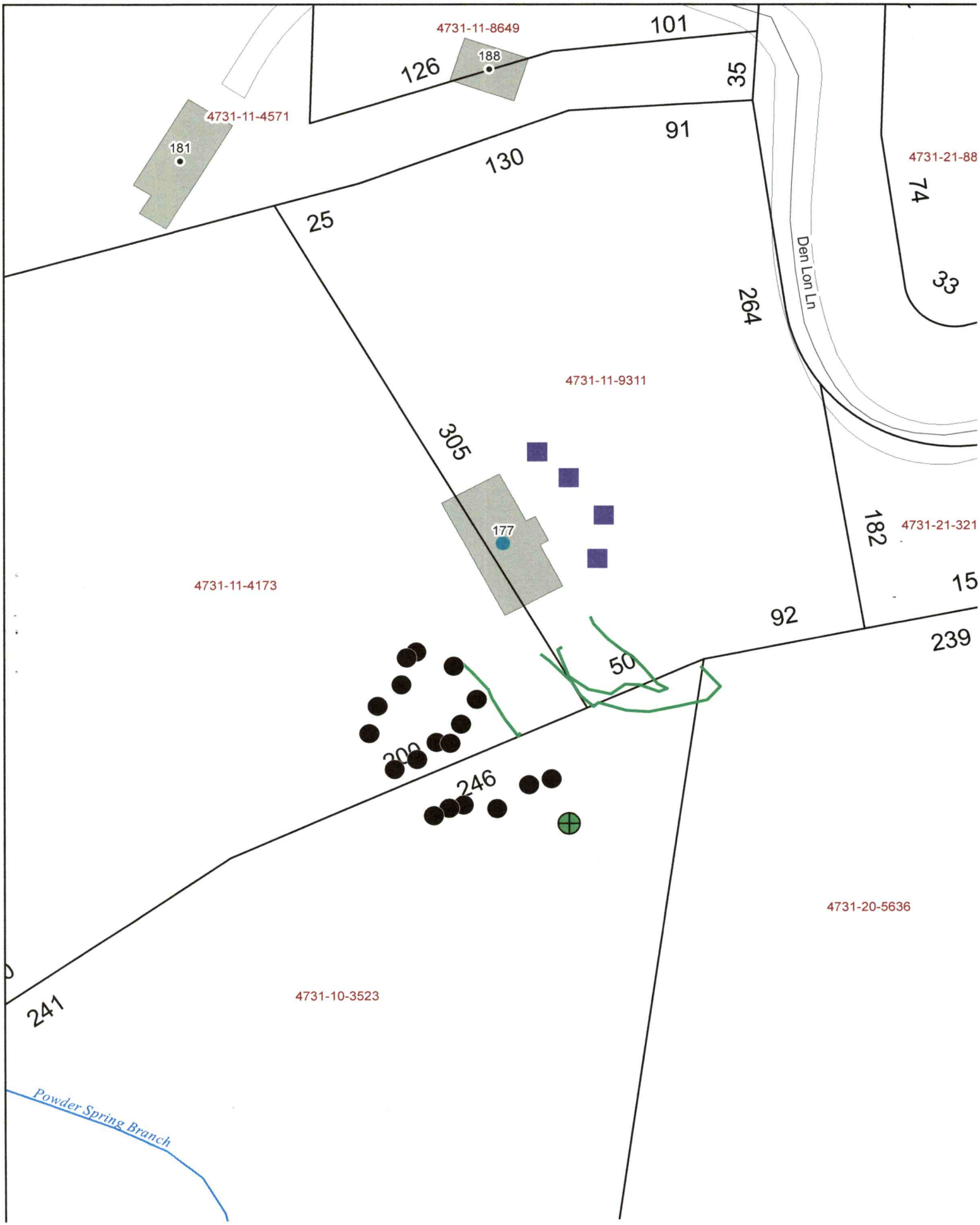
PROPERTY ID #: _____
DATE OF EVALUATION: _____
COUNTY: _____

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
5	LS 12%	0-5	SCL - WSBK	SSSP-FR-SE-LP		48"	N/A	N/A	PS
		5-25	C - SBK	↓					
		25-36	CL - WSBK						
		36-48	L - WSBK		Sap incl	common	25"+		0.3


Gully
3
54
62
66
2
86
90
1
78
74
Gully to be filled
5
4
Road


125
22
15
Deck
120
34
20
18
17
79
8
23
13
50
28
2
ex.

new


4731-11-8649
188
126
101
35
4731-11-4571
181
91
130
4731-21-88
74
25
Den Lon Ln
33
264
4731-11-9311
305
177
182
4731-21-321
4731-11-4173
15
92
239
50
200
246
4731-20-5636
241
4731-10-3523
Powder Spring Branch

RECEIVED MAR 1 6 2022

DW

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* AP- 326182 $500.00

Expansion

Application For: ( ) 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: Wesley Rash Address: 177 DENION LN, TROUTMAN, NC Zip: 28166
Applicant Email: twrash2@gmail.com Phone: 704-929-5984 Alt. Phone: 704-929-8293
Owner Name: Wesley Rash Address: 177 DENION LN, TROUTMAN Zip: 28166
Owner Email: twrash2@gmail.com Phone: 704-929-5984 Alt. Phone: 704-929-8293

Property Information:

Street Address: 177 DENION LN, TROUTMAN, NC 28166

Subdivision Name: N/A Section/Phase: _____ Lot Number: _____

Driving Directions: Take Talley St. to Lytton Farm Rd. Turn Right on Denion & go to end of the road (blue house)

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

CHECK FOUNDATION TYPE

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

Maximum Number of Bedrooms: 8
Maximum Number of Occupants: 7
(X) Swimming Pool
( ) Other Addition/Structure: _____

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

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

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

(X) 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: 1981
( ) No Preference (4) Alternative (1) Conventional (3) Innovative (2) 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: _____ 2-25-22
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

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

I do hereby authorize (**print legal representative/company name**) _____, _____, 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.

_____ 2-25-22
Signature of Owner(s) Date

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

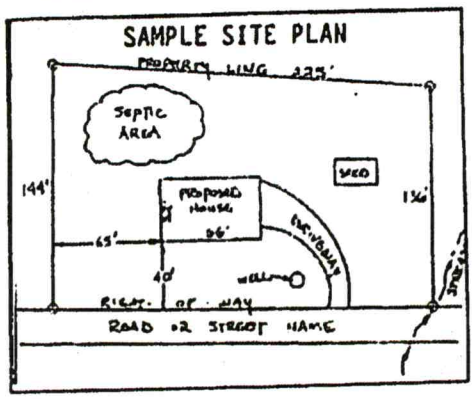
Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

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 as you complete the site plan:

House sits on aprox. 8 acres. All set backs are in excess of 25 ft.

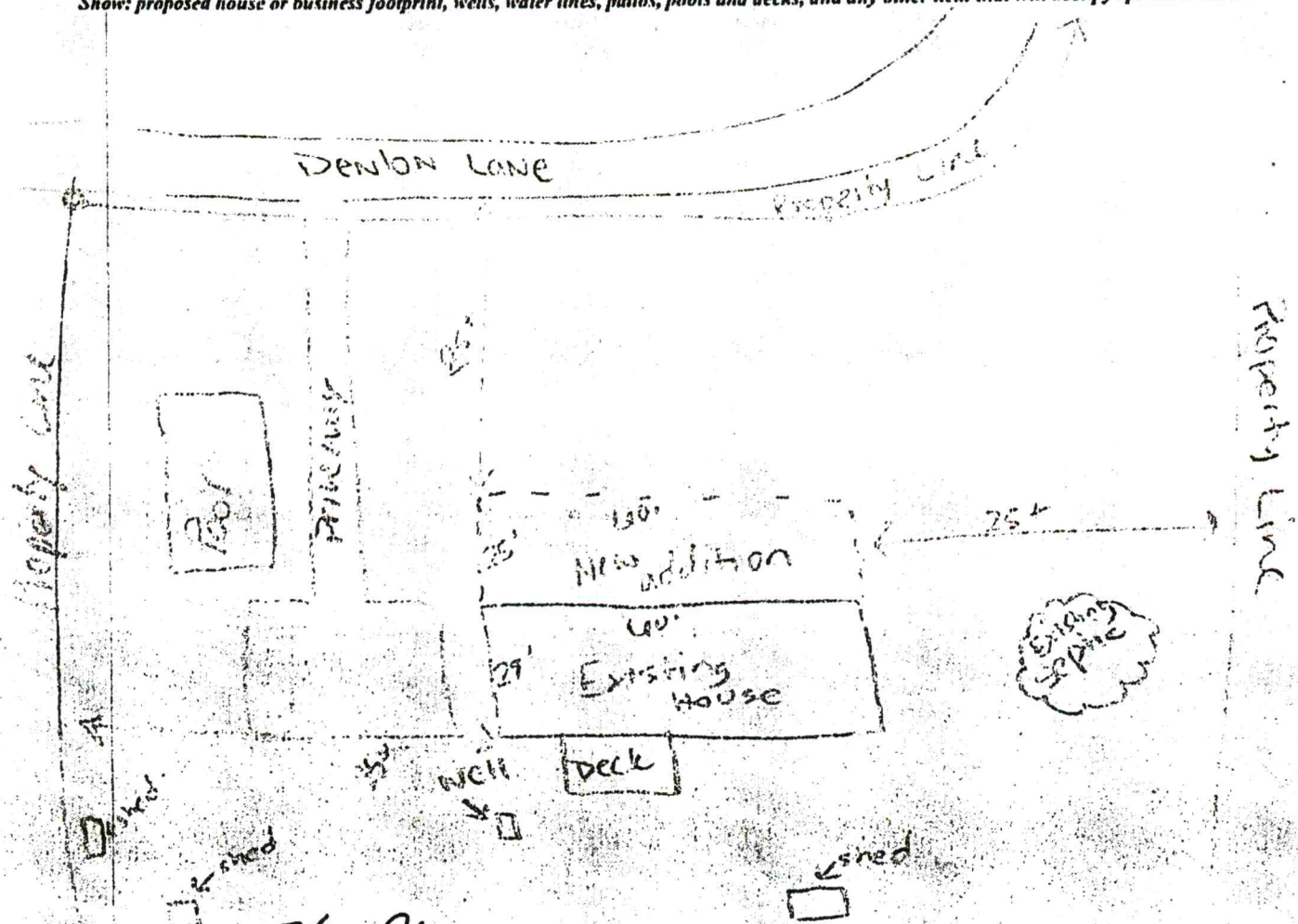
- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location and well location
- (X) Area you prefer your septic system to be placed
- (X) North arrow, or other sufficient indicator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

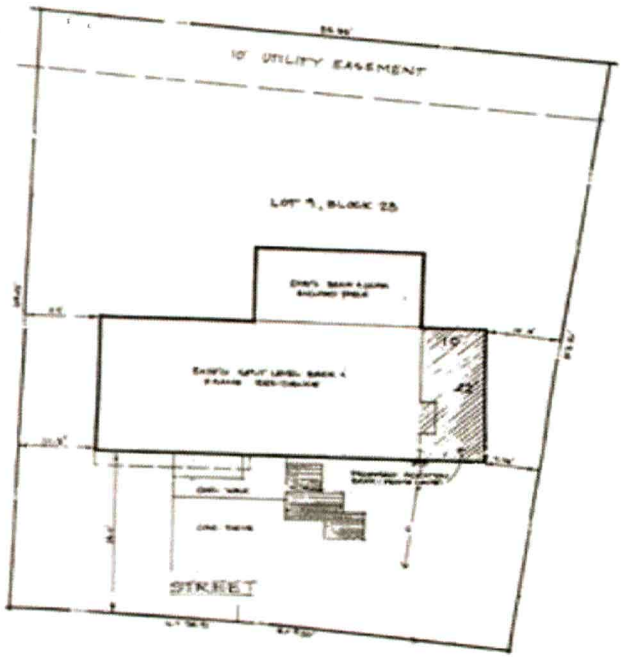


Signature: Tabitha R

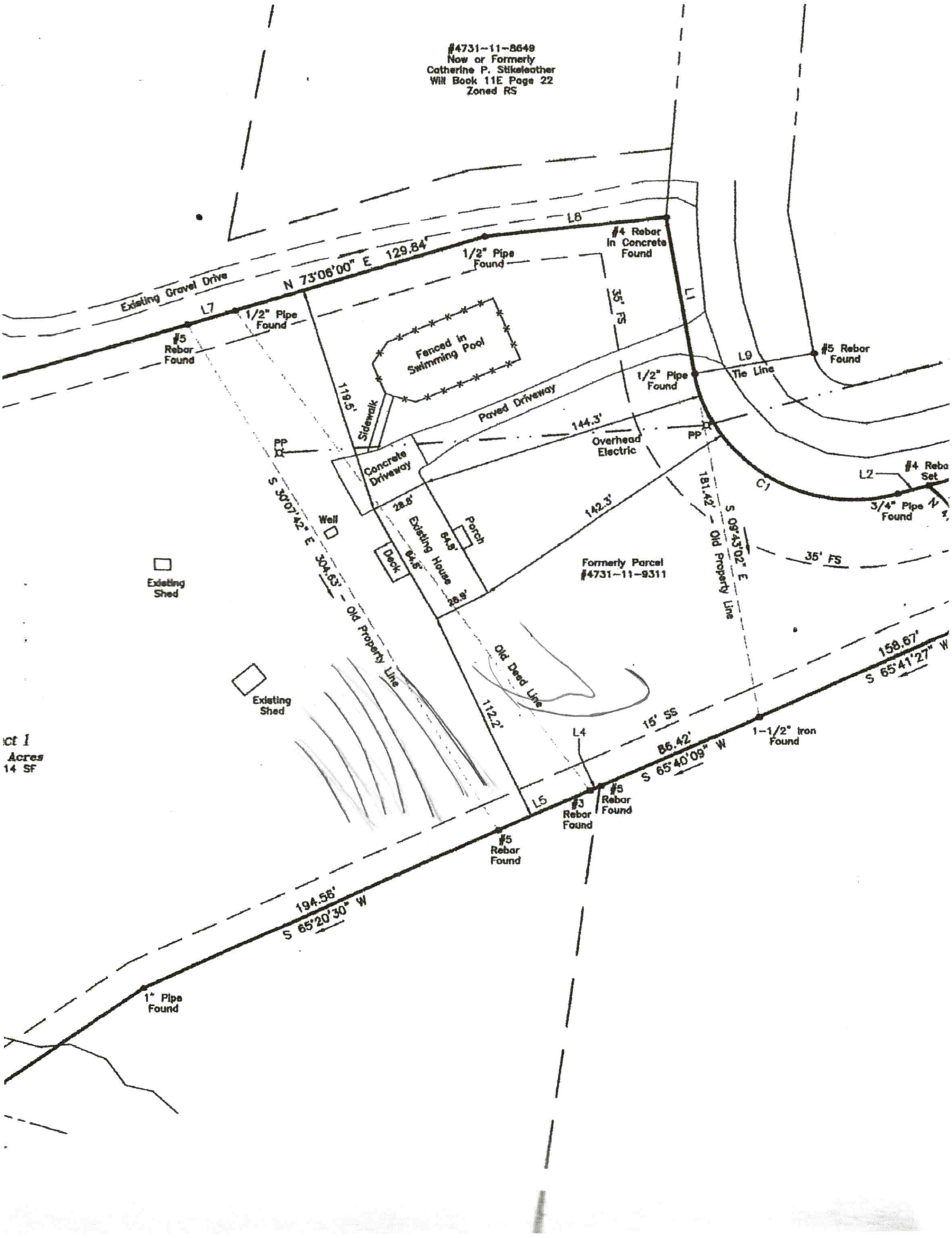
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

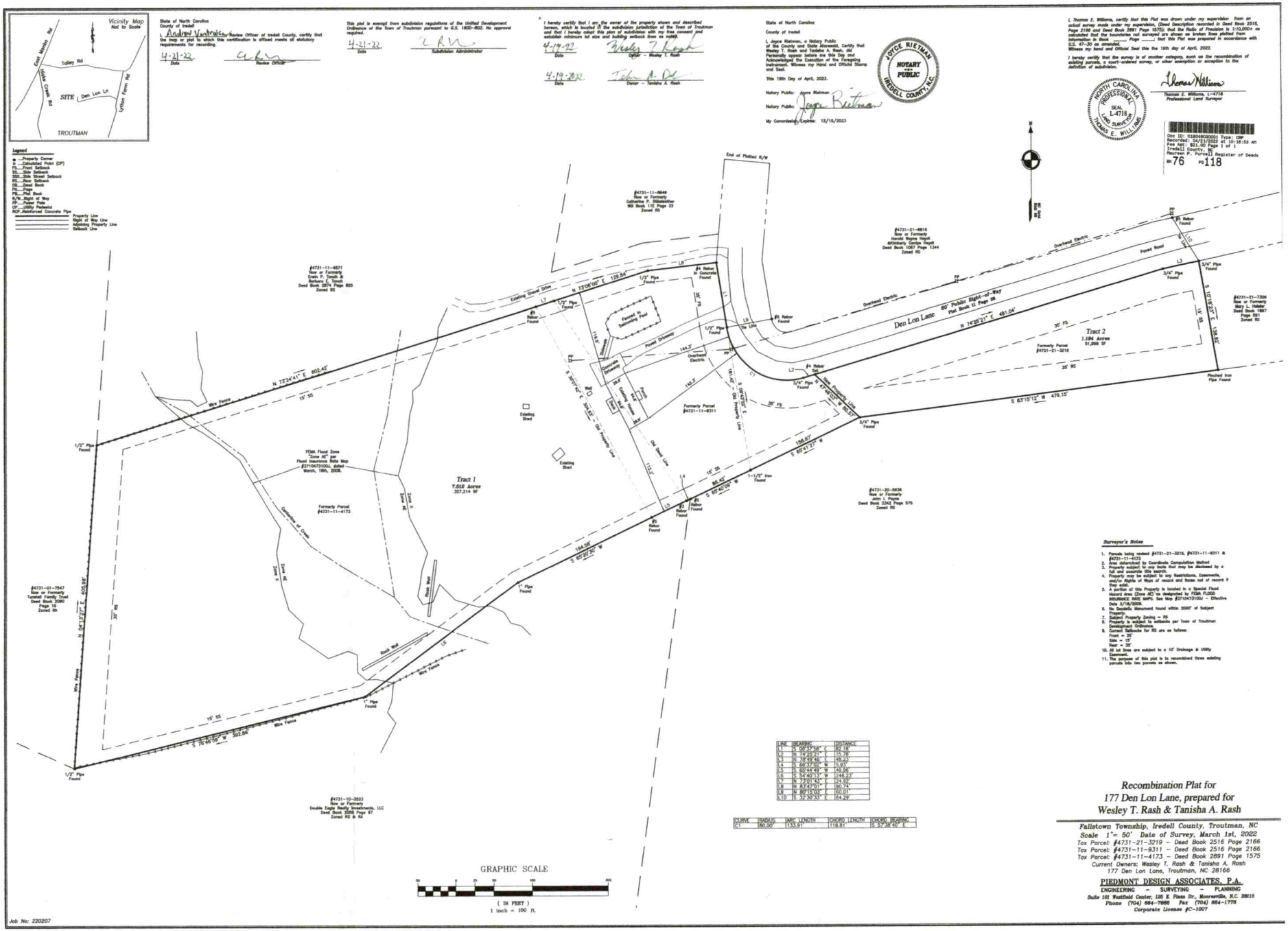
2-25-22

DATE



Please provide a drawing of your property in the space below (similar to drawing on the left) or attached in a separate document showing the layout of your home or business on the lot. If applicable, please clearing note expansions.


#4731-11-8648
Now or Formerly
Catherine P. Stikeleather
Will Book 11E Page 22
Zoned RS
Existing Gravel Drive
N 73°06'00" E 129.84'
1/2" Pipe Found
#4 Rebar in Concrete Found
L8
L7
L1
#5 Rebar Found
Fenced in Swimming Pool
35' FS
L9
Tie Line
#5 Rebar Found
1/2" Pipe Found
119.5'
Sidewalk
Paved Driveway
144.3'
Overhead Electric
PP
PP
Concrete Driveway
S 30°07'42" E 304.83'
Old Property Line
28.8'
64.8'
Existing House
64.8'
28.8'
Deck
Porch
Well
142.3'
181.42'
S 09°43'02" E
Old Property Line
L2
#4 Rebar Set
C1
3/4" Pipe Found
35' FS
Existing Shed
Formerly Parcel
#4731-11-9311
Existing Shed
Old Deed Line
112.2'
158.67'
S 65°41'27" W
15' SS
L4
86.42'
S 65°40'09" W
1-1/2" Iron Found
#5 Rebar Found
#3 Rebar Found
L5
#5 Rebar Found
194.58'
S 65°20'30" W
1" Pipe Found
ct 1
Acres
14 SF



State of North Carolina
County of Iredell

I, Andrea Ventrella, Review Officer of Iredell County, certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.

4-21-22
Date

Review Officer

This plat is exempt from subdivision regulations of the Unified Development Ordinance of the Town of Troutman pursuant to G.S. 160D-802. No approval required.

4-21-22
Date

Subdivision Administrator

I hereby certify that I am the owner of the property shown and described hereon, which is located in the subdivision jurisdiction of the Town of Troutman and that I hereby adopt this plan of subdivision with my free consent and establish minimum lot size and building setback lines as noted.

4-19-22
Date

Owner - Wesley T. Rash

4-19-2022
Date

Owner - Tanisha A. Rash

State of North Carolina

County of Iredell

I, Joyce Rietman, a Notary Public of the County and State Aforesaid, Certify that Wesley T. Rash and Tanisha A. Rash, did Personally appear before me this Day and Acknowledged the Execution of the Foregoing Instrument. Witness my Hand and Official Stamp and Seal.

This 19th Day of April, 2022.

Notary Public: Joyce Watman

Notary Public: Joyce Rietman

My Commission Expires: 12/15/2023

JOYCE RIETMAN NOTARY PUBLIC IREDELL COUNTY, N.C.

I, Thomas E. Williams, certify that this Plat was drawn under my supervision from an actual survey made under my supervision, (Deed Description recorded in Deed Book 2516, Page 2166 and Deed Book 2891 Page 1575); that the Ratio of Precision is 1:10,000+ as calculated; that the boundaries not surveyed are shown as broken lines plotted from information in Book ____, Page ____; that this Plat was prepared in accordance with G.S. 47-30 as amended.

Witness my hand and Official Seal this the 19th day of April, 2022.

I hereby certify that the survey is of another category, such as the recombination of existing parcels, a court-ordered survey, or other exemption or exception to the definition of subdivision.

Thomas E. Williams, L-4718
Professional Land Surveyor

NORTH CAROLINA PROFESSIONAL SEAL L-4718 LAND SURVEYOR THOMAS E. WILLIAMS

Doc ID: 018048030001 Type: CRP
Recorded: 04/21/2022 AT 10:18:53 AM
Fee Amt: $21.00 Page 1 of 1
Iredell County, NC
Maureen P. Pursell Register of Deeds
BK 76 PG 118

LINE	BEARING	DISTANCE
L1	S 09°27'58" E	82.18'
L2	N 74°59'21" E	15.76'
L3	N 28°49'46" E	45.43'
L4	S 66°37'07" W	14.93'
L5	S 65°44'49" W	49.86'
L6	S 54°40'13" W	148.23'
L7	N 73°01'43" W	14.99'
L8	N 83°14'43" W	90.75'
L9	N 89°13'03" W	60.01'
L10	S 32°30'33" E	64.29'

CURVE	RADIUS	ARC LENGTH	CHORD LENGTH	CHORD BEARING
C1	80.00'	133.91'	118.81	S 57°36'40" E

Surveyor's Notes

1. Parcels being revised #4731-21-3219, #4731-11-9311 & #4731-11-4173.
2. Area determined by Coordinate Computation Method.
3. Property subject to any facts that may be disclosed by a full and accurate title search.
4. Property may be subject to any Restrictions, Easements, and/or Rights of Ways of record and those not of record if they exist.
5. A portion of this Property is located in a Special Flood Hazard Area (Zone AE) as designated by FEMA FLOOD INSURANCE RATE MAPS; See Map #3710473100J — Effective Date 3/18/2008.
6. No Monumentation Monument found within 2000' of Subject Property.
7. Subject Property Zoning = RS
8. Property is subject to setbacks per Town of Troutman Development Ordinance.
   Current Setbacks for RS are as follows:
   Front = 35'
   Side = 15'
   Rear = 35'
10. All lot lines are subject to a 10' Drainage & Utility Easement.
11. The purpose of this plat is to recombined three existing parcels into two parcels as shown.

Recombination Plat for 177 Den Lon Lane, prepared for Wesley T. Rash & Tanisha A. Rash

Fallstown Township, Iredell County, Troutman, NC
Scale 1"= 50' Date of Survey, March 1st, 2022
Tax Parcel: #4731-21-3219 – Deed Book 2516 Page 2166
Tax Parcel: #4731-11-9311 – Deed Book 2516 Page 2166
Tax Parcel: #4731-11-4173 – Deed Book 2891 Page 1575
Current Owners: Wesley T. Rash & Tanisha A. Rash
177 Den Lon Lane, Troutman, NC 28166

PIEDMONT DESIGN ASSOCIATES, P.A.
ENGINEERING – SURVEYING – PLANNING
Suite 101 Westfield Center, 125 E. Plaza Dr., Mooresville, N.C. 28115
Phone (704) 664-7998 Fax (704) 664-1778
Corporate License #C-1007

Job No: 220207

FRAMING CONSTRUCTION NOTES:



Acknowledgement Of Plans Submittal ONLY!

3/29/2022 Date

4/28/22 Date

HEADER BEARING REQUIREMENTS

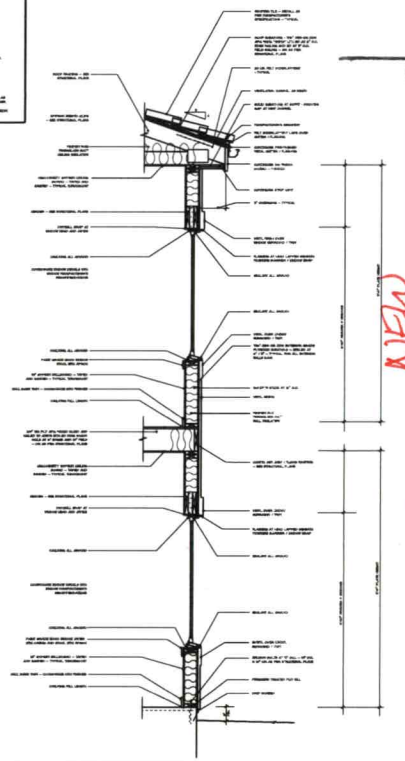
PER ENGINEER'S DESIGN

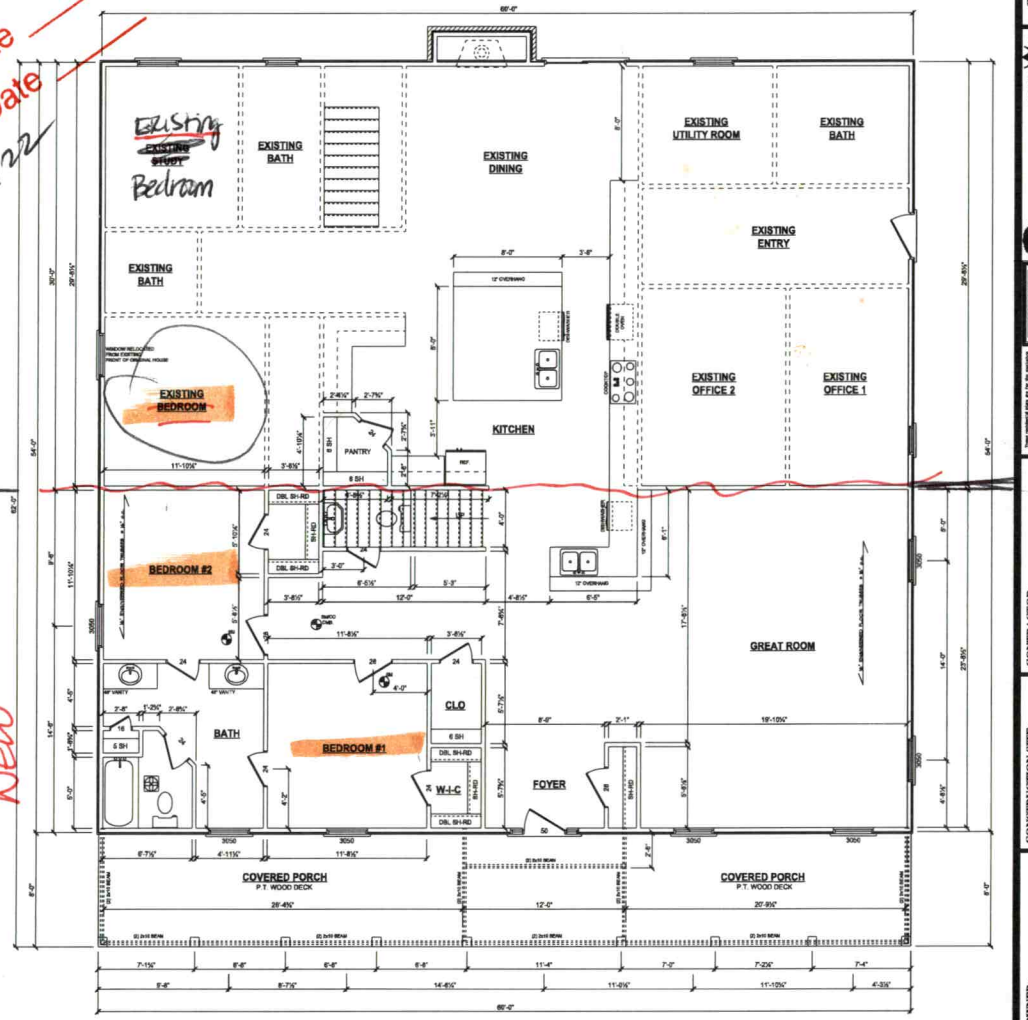
2x8 THRU 2x10	1 JACK STUD
2x12	2 JACK STUDS
LVL 9" THRU 12"	2 JACK STUDS
LVL 14" THRU 16"	3 JACK STUDS
LVL 18" & GREATER	4 JACK STUDS

STUDS SHALL BE 2 X 4'S SPACED 16" O.C. DOUBLE AT OPENINGS. FRAMED SOLID AT CORNERS AND ANGLES FOR DRYWALL. AT OPENINGS, THE INNER STUD SHALL BE CUT OUT TO RECEIVE THE HEADER OVER THE OPENING AND SHALL EXTEND IN ONE PIECE FROM HEADER TO BEARING. EXTERIOR WALLS TO BE 2x4 STUDS

MOISTURE
PROTECT EXTERIOR OF BELOW GRADE FOUNDATIONS WITH 2 COATS ASPHALT.
PERIMETER DRAINS TO BE 4" PERFORATED PVC AND PLACED BELOW ELEV. OF INTERIOR SLABS AND SLOPED TO STORM DRAINS OR OTHER APPROVED DISBURSEMENT AREAS.
PROVIDE APPROPRIATE CLEANOUTS.
ROOF AND SITE RUNOFF TO BE DISBURSED VIA SEPARATE PVC SYSTEM SIZED TO PREVENT BACKUP.
PROVIDE FLASHINGS OVER ALL EXPOSED WINDOWS AND DOORS
USE ONLY 60 MIN BUILDING PAPER FOR BUILDING WRAP AND APPLY WITH CARE ASSUMING SIDING WILL LEAK
PROVIDE BUILT IN GUTTERS AND ADEQUATE DOWNSPOUTS SIZED AND SLOPED TO PREVENT POOLING OR BACKUP.

1. BECAUSE SITE CONDITIONS MAY VARY, M & M HOME DESIGN CANNOT WARRANT THE SUITABILITY OF THESE PLANS FOR USE ON YOUR SPECIFIC SITE. CONSTRUCTION FROM THESE PLANS SHOULD NOT BE UNDERTAKEN WITHOUT THE ASSISTANCE OF A PROFESSIONAL CONTRACTOR.
2. ALL FEDERAL, STATE AND LOCAL CODES, ORDINANCES AND REGULATIONS SHALL BE CONSIDERED AS PART OF THESE DRAWINGS AND DETAILS FOR THIS BUILDING AND SHALL TAKE PREFERENCE OVER ANYTHING SHOWN, DESCRIBED OR IMPLIED WHERE VARIANCES OCCUR.
3. CONTRACTOR SHALL CHECK AND VERIFY ALL DIMENSIONS BEFORE BEGINNING CONSTRUCTION AND COORDINATE ANY CORRECTIONS OR REVISIONS WITH THE OWNER AND DESIGNER. M & M HOME DESIGN WILL ASSUME NO LIABILITY FOR DIMENSIONAL ERRORS ONCE CONSTRUCTION BEGINS.





FIRST FLOOR PLAN

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

NOTE:
M & M HOME DESIGN SHALL NOT BE RESPONSIBLE FOR THE ENGINEERING OF THESE PLANS. IT IS THE HOME OWNER'S RESPONSIBILITY THAT THE FRAMING BE IN COMPLIANCE WITH THE NORTH CAROLINA RESIDENTIAL BUILDING CODE.

SHEET A-2

SOUTHERN LIVING HOUSE PLANS
M&M HOME DESIGN
(864) 313-3364 · 111 VILLAGE VIEW DRIVE · SUITE 1 · PIEDMONT, SC 29673
Find us on: facebook.com/M & M Home Design

1984 – 2022 28 YEARS OF EXCELLENCE
2022 HOUSE PLAN COLLECTION
MOST POPULAR PLANS

Copyright Jan. 2022

CONTRACTOR:

CONSTRUCTION SITE:
NEW ADDITION @
LOT #
177 DEN LION LANE
TROUTMAN, NC
IREDELL COUNTY

HOMEOWNER:
TANECIA & WES RASH
177 DEN LION LANE
TROUTMAN, NC 28166
(704) 929-5984

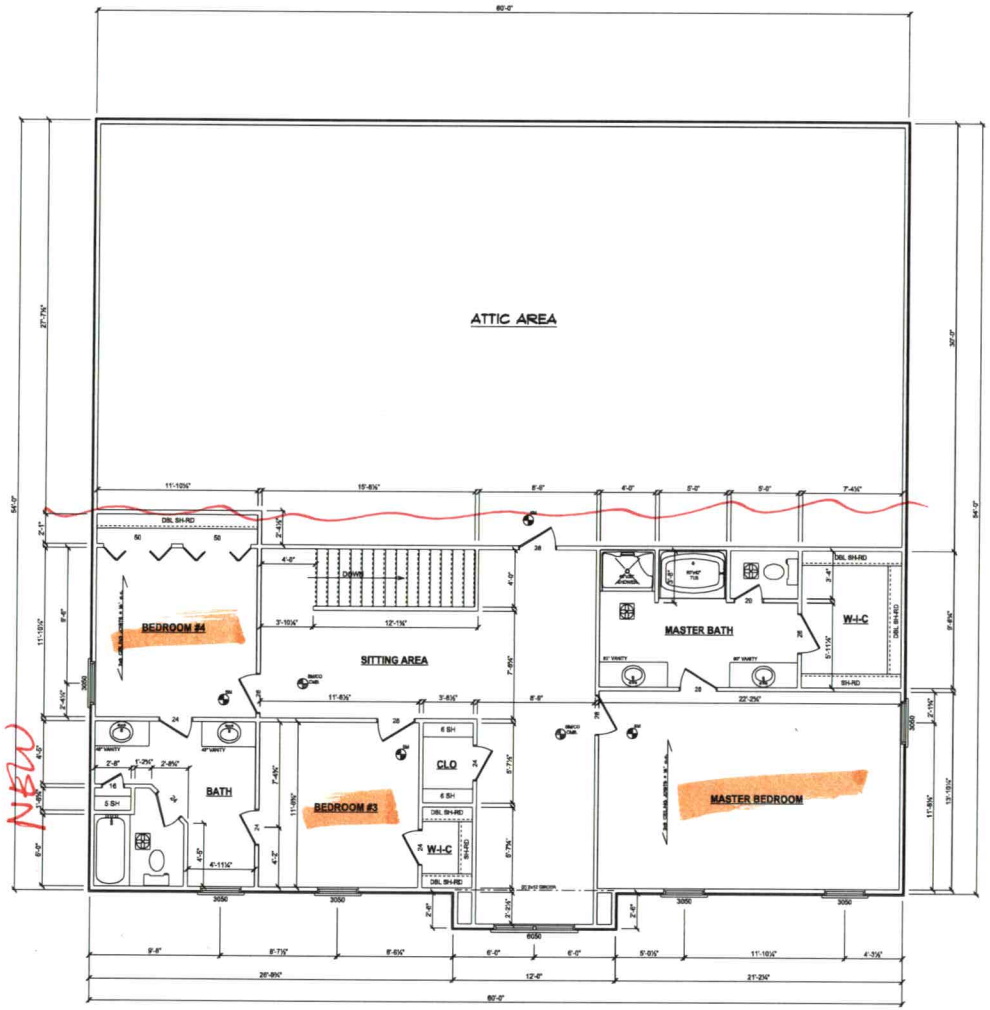
DRAWN BY: J. GENCHUR
DATE: JAN. 10, 2022
REVISIONS:

Acknowledgement Of Plans Submittal ONLY!

Date 4/28/22

Date

3/29/2022



SECOND FLOOR PLAN

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

HEADER BEARING REQUIREMENTS

PER ENGINEER'S DESIGN

2x8 THRU 2x10	1 JACK STUD
2x12	2 JACK STUDS
LVL 9" THRU 12"	2 JACK STUDS
LVL 14" THRU 16"	3 JACK STUDS
LVL 18" & GREATER	4 JACK STUDS

STUDS SHALL BE 2 X 4'S SPACED 16" O.C. DOUBLE AT OPENINGS. FRAMED SOLID AT CORNERS AND ANGLES FOR DRYWALL. AT OPENINGS, THE INNER STUD SHALL BE CUT OUT TO RECEIVE THE HEADER OVER THE OPENING AND SHALL EXTEND IN ONE PIECE FROM HEADER TO BEARING. EXTERIOR WALLS TO BE 2x4 STUDS

MOISTURE
PROTECT EXTERIOR OF BELOW GRADE FOUNDATIONS WITH 2 COATS ASPHALT.
PERIMETER DRAINS TO BE 4" PERFORATED PVC AND PLACED BELOW ELEV. OF INTERIOR SLABS AND SLOPED TO STORM DRAINS OR OTHER APPROVED DISBURSEMENT AREAS.
PROVIDE APPROPRIATE CLEANOUTS.
ROOF AND SITE RUNOFF TO BE DISBURSED VIA SEPARATE PVC SYSTEM SIZED TO PREVENT BACKUP.
PROVIDE FLASHINGS OVER ALL EXPOSED WINDOWS AND DOORS
USE ONLY 60 MIN BUILDING PAPER FOR BUILDING WRAP AND APPLY WITH CARE ASSUMING SIDING WILL LEAK
PROVIDE BUILT IN GUTTERS AND ADEQUATE DOWNSPOUTS SIZED AND SLOPED TO PREVENT POOLING OR BACKUP.

1. BECAUSE SITE CONDITIONS MAY VARY, M & M HOME DESIGN CANNOT WARRANT THE SUITABILITY OF THESE PLANS FOR USE ON YOUR SPECIFIC SITE. CONSTRUCTION FROM THESE PLANS SHOULD NOT BE UNDERTAKEN WITHOUT THE ASSISTANCE OF A PROFESSIONAL CONTRACTOR.
2. ALL FEDERAL, STATE AND LOCAL CODES, ORDINANCES AND REGULATIONS SHALL BE CONSIDERED AS PART OF THESE DRAWINGS AND DETAILS FOR THIS BUILDING AND SHALL TAKE PREFERENCE OVER ANYTHING SHOWN, DESCRIBED OR IMPLIED WHERE VARIANCES OCCUR.
3. CONTRACTOR SHALL CHECK AND VERIFY ALL DIMENSIONS BEFORE BEGINNING CONSTRUCTION AND COORDINATE ANY CORRECTIONS OR REVISIONS WITH THE OWNER AND DESIGNER. M & M HOME DESIGN WILL ASSUME NO LIABILITY FOR DIMENSIONAL ERRORS ONCE CONSTRUCTION BEGINS.

NOTE:
M & M HOME DESIGN SHALL NOT BE RESPONSIBLE FOR THE ENGINEERING OF THESE PLANS. IT IS THE HOME OWNER'S RESPONSIBILITY THAT THE FRAMING BE IN COMPLIANCE WITH THE NORTH CAROLINA RESIDENTIAL BUILDING CODE.

SHEET A-3

SOFTPLAN M&M HOME DESIGN
M&M HOME DESIGN
111 VALLEY STREET STATESVILLE, NC 28677
Find us on: facebook.com/M & M Home Design

28 YEARS OF EXPERIENCE

© Copyright Jan. 2020

CONTRACTOR:

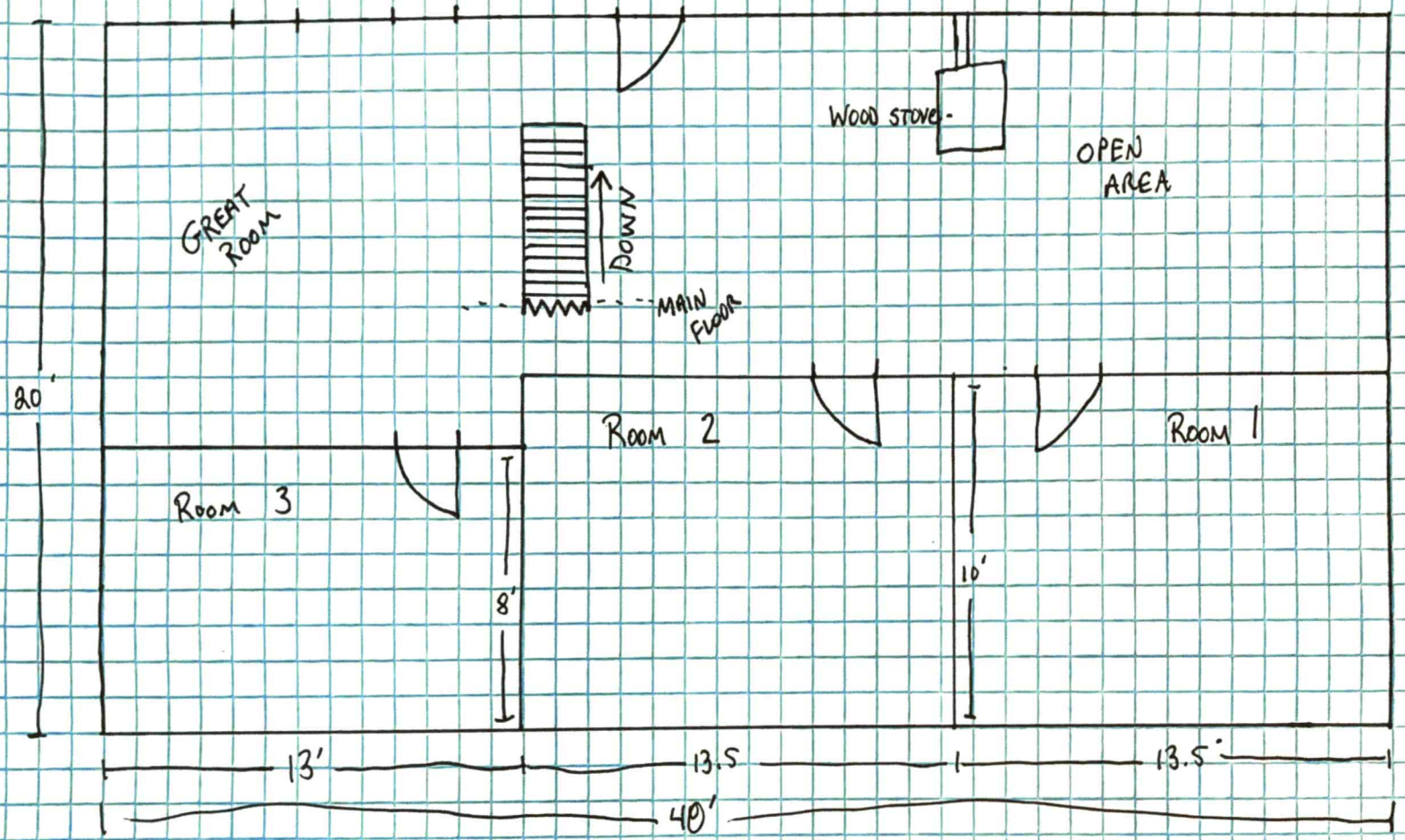
CONSTRUCTION SITE:
NEW ADDITION @
LOT #
177 DEN LON LANE
TROUTMAN, NC
IREDELL COUNTY

HOMEOWNER:
TANECIA & WES RASH
177 DEN LON LANE
TROUTMAN, NC 28166
(704) 929-5984

DRAWN BY: J. GENCEUR
DATE: JAN. 18, 2022
REVISIONS:

177 DEN LON LN

BASEMENT DRAWING



The additional rooms in the basement (Room 1, Room 2, Room 3) will not be used for occupancy once the addition is completed.

Acknowledgement Of Plans Submittal ONLY!

Date 4/28/22

Date 4-27-2022

Zoning Permit # 326182

Fee $226.60 **Code 104**

See reverse for new construction.

Zoning Permit

LOCATION	**Date (mm/dd/yy)**	03/01/22	**Tax Parcel #**	4731119311.000
	Business Name or Property Owner	RASH WESLEY T+TANISHA A		
	Street Address & Lot Number	177 DEN LON LN		
	Business Type and/or Project Description	Single-Family Home		
APPLICANT	**Applicant**	RASH WESLEY T+TANISHA A	**Preferred Phone**	
	Address City/State/Zip	,		
	E-Mail			
	Would you like your e-mail address added to: (check any of interest)	☐ The Whistle Stop (Town of Troutman newsletter) ☐ Troutman Business Council (Local Chamber of Commerce) ☐ Sunshine List (Agenda for Town Board Meetings)		

Following approval of this permit proceed to Iredell County Building Inspections (349 N Center St, Statesville, NC 28677). All Applicants, please note that final inspection by the Town is required prior to occupancy. Business Applicants, please note that proof of RPZ (backflow) inspection is required prior to occupancy (in addition, restaurants may be required to have a grease trap inspection).

Office Use Only					
	Zoning District(s)	RS	**TL: Troutman | ETJ: Troutman**	Plans Attached	
	Utilities			Floodplain	
	Permitted Use of Property	Single-Family Home			
	Minimum Setback Requirements	Front 25 , Rear 25 , Left Side 15 , Right Side 15 , *Setback measure from nearest projecting point of structure to Property Line.*			
	Comments:	25X60 addition to front of the home. Home is non-conforming to rear setback and can be added onto if non-conformity is not increased. A front addition does not increase the non-conformity			

I hereby certify that all of the information provided for this application is to the best of my knowledge, accurate and complete. I understand that this permit will expire and become invalid unless the work for which it was issued is started within six (6) months of the date of issue or is the work authorized is suspended or abandoned for a period of one (1) year.

Signature of Applicant

To the best of my knowledge, this application is deemed complete and approved based on the information provided to me and my knowledge of the Town of Troutman Unified Development Ordinance.

Signature of Zoning Adminstrator