# ICHD - ENVIRONMENTAL HEALTH DIVISION

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

PERMIT # AP324136 (BLDR-2023-5271)

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

PIN # 4854 -- 41 - 3743.

APPLICANT/OWNER: Audrey Edwards | APPLICANT ADDRESS: 127 Government Drive Stony Point, NC

SITE ADDRESS: 222 Tutterow Rd Union Grove, NC 28689 | PHONE: 704-924-8765 | ALT. PHONE 704-902-3916

SITE DIRECTIONS: Hwy 901 to Howards Bridge Rd to Tutterow turn left 0.2 to Tutterow | SAP CONTROLLED: ☐ YES ☒ NO

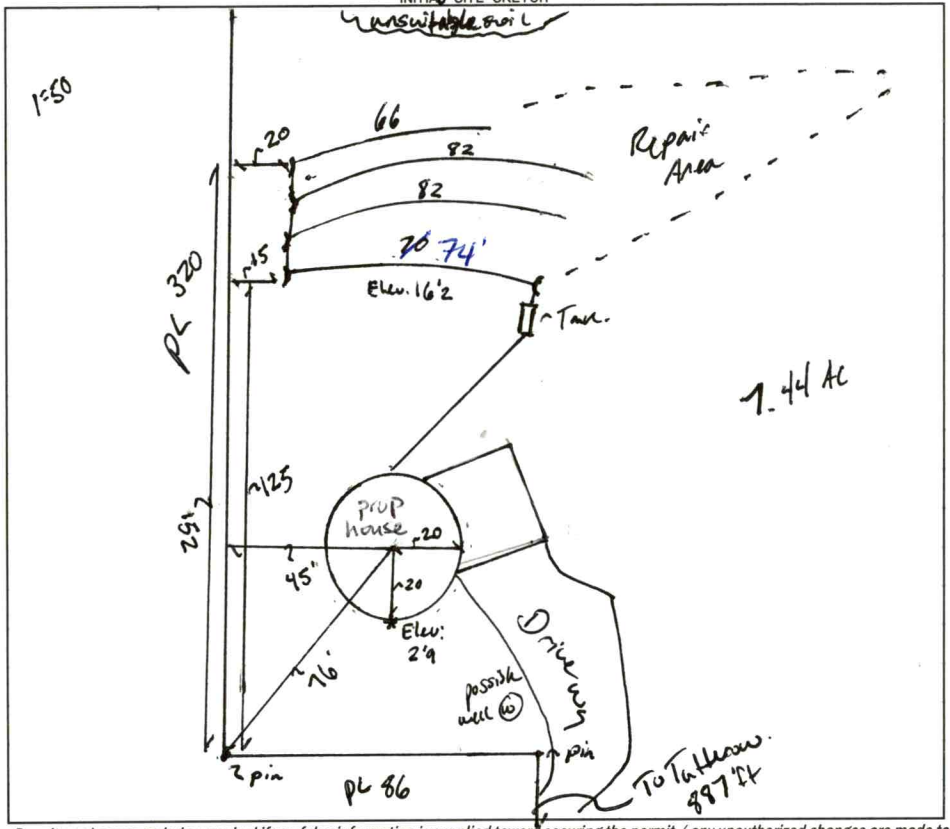
SUBDIVISION: | SECTION: - | LOT # - | LOT AREA: 7.44 Ac | DESIGN FLOW: 360 | L.T.A.R.: -30

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB | 7100 | Date | 9/21/23 | ☒ New System ☐ Repair ☐ Expansion | System Type: I II (III) IV V VI | ☒ Residence | No. Bedrooms 3 |
| Pump Tank | (gal) | PT | | Date | | System Description: Gravity - 25% Reduction | | ☐ Business | No. Persons 6 |
| Pump Make | | Model | | Serial # | | Repair System Description: 25% Reduction. | | ☐ Other | No. Employees |
| # Nitrification Fields | 1 | # Lines | 4 | Linear Ft | 300 | Maintenance Agreement Required: ☐ YES ☒ NO | | ☐ Slab | ☐ Crawl Space |
| Trench Width | 36in | Trench Bottom Depth | 36in max | Gravel Depth | - | ☒ GRAVITY ☐ PRESSURE | | ☒ Basement w/plumbing | ☐ Basement w/o plumbing |

**Water Supply:** ☒ Private ☐ Public ☐ Community

Comments / Conditions: * Pre-Construction Meeting Required * 9Ft basement accounted for. Install Septic Drainlines on the Contour of the land + utilize Serial distribution. Do not Drive, park, pave, garde or bury utilities in drainfield area.

INITIAL SITE SKETCH




AS BUILT SKETCH

**FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 between 8am-9am**

**the day the inspection is needed. Be sure to speak with an inspector to confirm your time.**

lines still flagged @ install - installed concrete shown

*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: Audrey L Edwards | Date: 01-28-22 | Installed by: Steve Jordan

IMPROVEMENT PERMIT by: Benjamin A Bolden | Date: 1/24/2022 | OPERATION PERMIT by: D. Webb | Date: 11/30/23

AUTHORIZATION TO CONSTRUCT by: Benjamin Bolden | Date: 9/12/2022 | 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
PROPERTY ID #: 485441374
COUNTY: Iredell

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

OWNER: Edwards
ADDRESS: 127 Grenmont Drive Statesville NC
PROPOSED FACILITY: 3 BR House
PROPOSED DESIGN FLOW (.1949): 360
LOCATION OF SITE: 222 Tuttrow Rd Union Grove NC
APPLICATION DATE: 12/23/21
DATE EVALUATED: 1/24/22
PROPERTY SIZE: 7.44 Ac
PROPERTY RECORDED: Yes

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 | 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 |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 2-7 Side slope | 0-9 | SCL GR-SBK | SS SP FR SEW | 2.5YR 4/6 | 53 | | Flow Plan @ 42 Inches | PS .30 |
| | | 9-37 | C ABK | SS SP FR | | | | | |
| | | 37-53 | CL WSBK | SS SP FR | | | | | |
| 2 | 2-7 Side slope | 0-7 | SCL GR SBK | SS SP FI SEW | 2.5YR 4/6 | 52 | | Some Rock Fragments 37+ Discontinuity | PS .30 |
| | | 7-37 | C SBK | SS SP FR SEW | | | | | |
| | | 37-52 | CL WSBK | SS SP FR SEW | | | | | |
| 3 | 2-7 Side slope | 0-18 | C | | | | | | PS / Drop |
| | | 18-40 | Rock Controlled | FM | | | | | |
| 4 | 2-7 Side slope | 0-11 | SCL GR/ABK | SS SP FR SEW | 2.5YR 4/6 | 36 | | Rock Controlled @ 36 | PS .30 Shallow |
| | | 11-36 | C SBK/ABK | SS SP FR SEW | | | | | |
| | | 36-52 | CL-RC | FM | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | 300 | 300 |
| System Type(s) | III 25% | III 25% |
| Site LTAR | .30 | .30 |

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Btwin
OTHER(S) PRESENT: ~~Owner~~ Applicant

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 | 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.

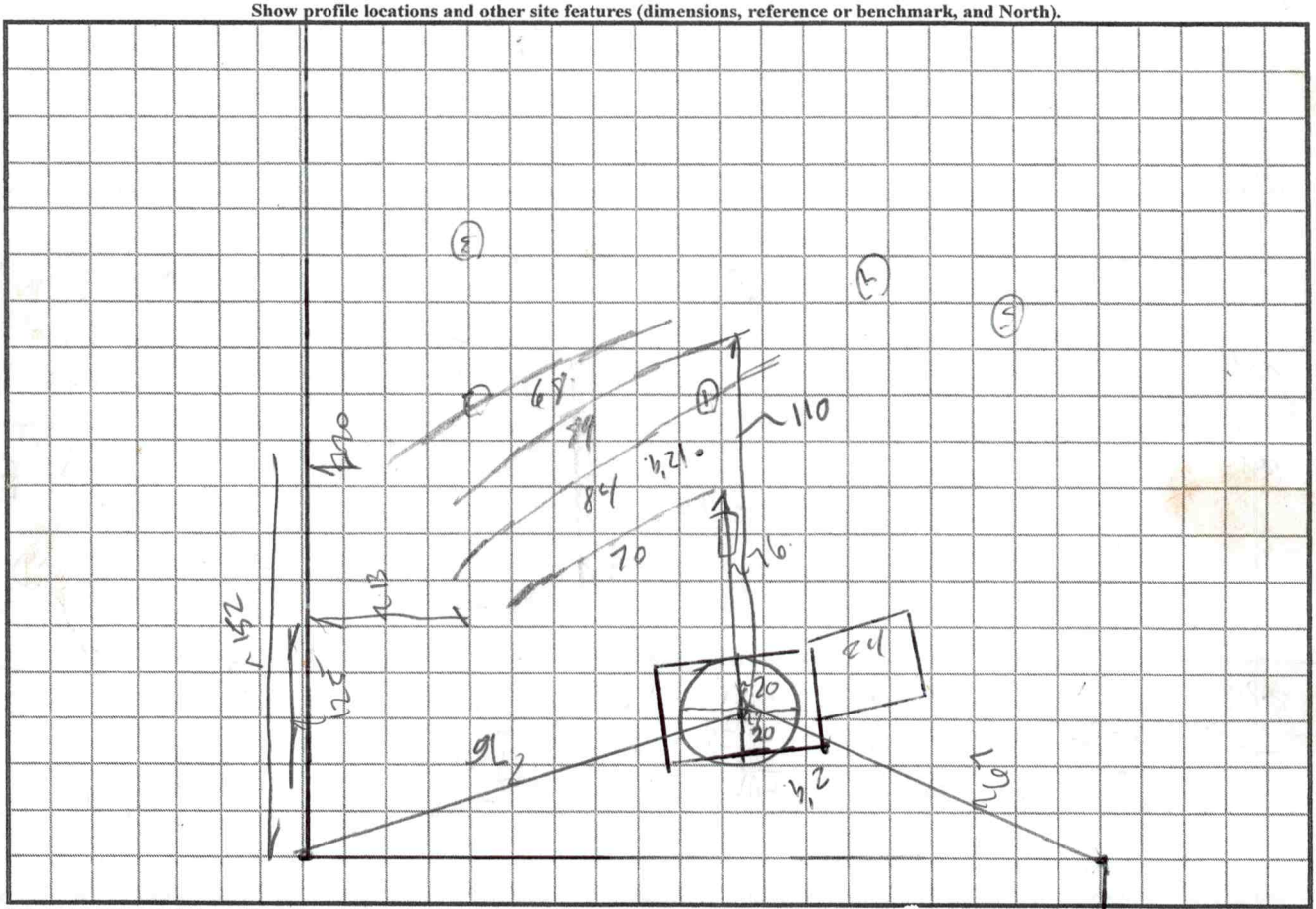
***NOTES***

| | |
|---|---|
| *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).**




Sil. 0-8 scl
8-34 c sbk/abk
34-48 cl wabk - fm

Discontinuous Rock 36+ some Manganese

PS. 30 In clay layer

## LEGEND

*use the following standard abbreviations*

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

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

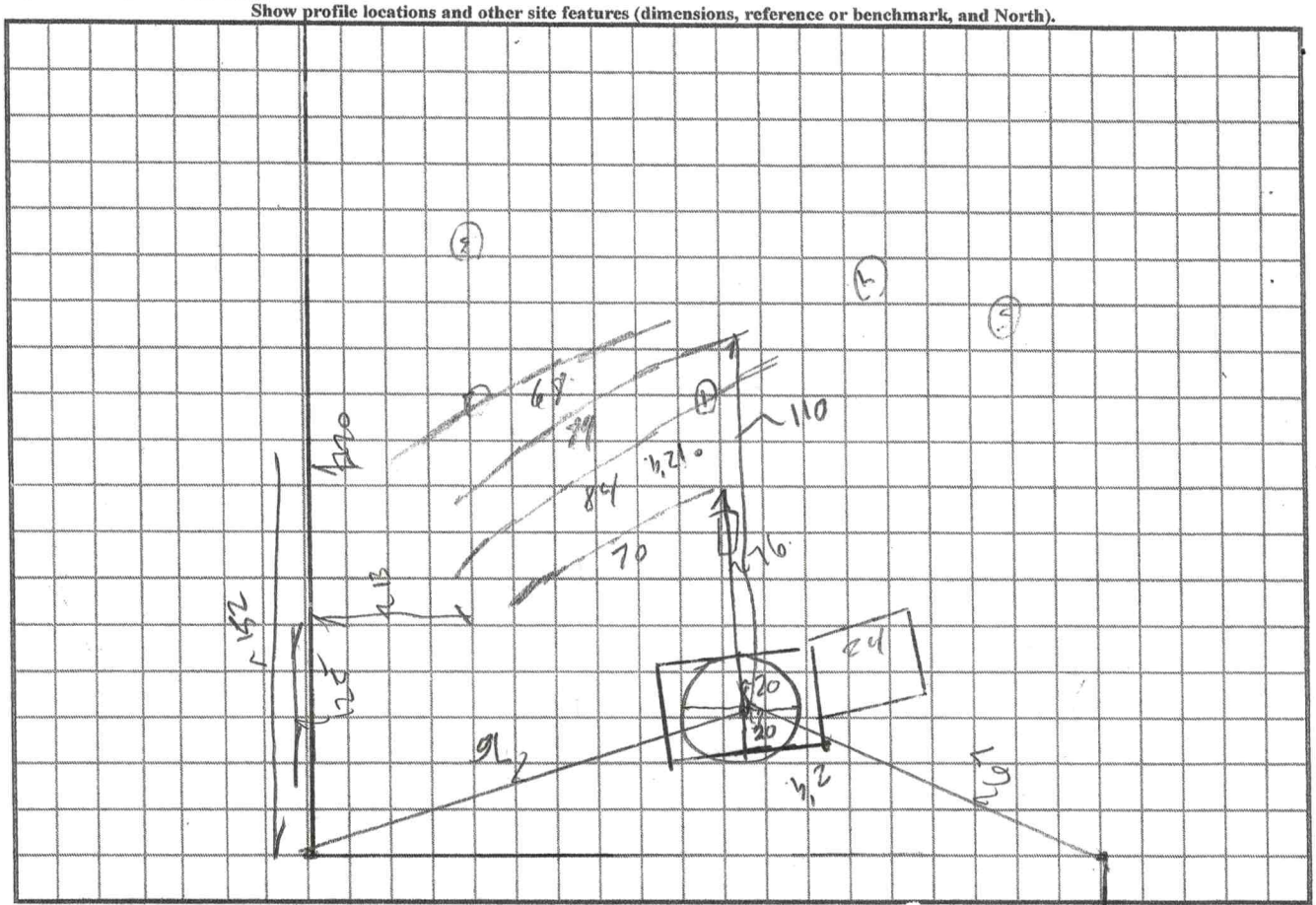
***NOTES***

| | |
|---|---|
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Evaluation of saprolite shall be by pits.

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




Silt. 0-8 scl
8-34 c sbk/abk
34-48 cl wabk - fm

Discontinuous Rock 36+ some manganese

PS. 30 In Clay Layer

BB

RECEIVED DEC 2 3 2021

**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-324136 $500.00

**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: Audrey Edwards Address: 127 Greenmont Dr Stony Point, NC Zip: 28678
Applicant Email: audreyledwards@yahoo.com Phone: 704-924-8763 Alt. Phone: 704-902-3916
Owner Name: Audrey Edwards Address: 127 Greenmont Dr Stony Point, NC Zip: 28678
Owner Email: audreyledwards@yahoo.com Phone: 704-924-8763 Alt. Phone: 704-902-3916

**Property Information:**

Street Address: 222 Tatterow Rd Union Grove, NC 28689
Subdivision Name: N/A Section/Phase: _____ Lot Number: _____
Driving Directions: _____

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

(✓) New Single Family Residence
( ) New Multi-Family Residence
(✓) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 4
( ) Swimming Pool
( ) Other Addition/Structure: _____
Non-Residential Site Development: Type of Business: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

**CHECK FOUNDATION TYPE**
( ) 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: _____

**Please answer the following to the best of your ability:**
( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (✓) No Is the site subject to approval by any other public agency?

*I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.*

**Signature:** Audrey Edwards 12-22-21
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*) Audrey Edwards

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.

_____ _____
Signature of Owner(s) Date

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

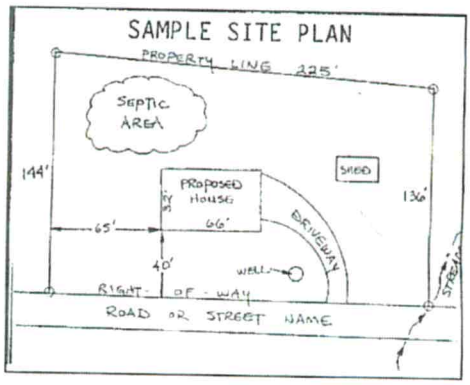
**Statesville - Environmental Health**
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

# 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:

- (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:** Ashley Edwards — 12-22-21

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

IREDELL COUNTY · NC

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

| APPLICATION NUMBER |
|---|
| 324136<br>Issue Date: |

**Permit Type: ZONING**

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4854413741.000 | 222 TUTTEROW RD | IREDELL COUNTY |

| Owner Information | Applicant Information |
|---|---|
| Name: EDWARDS AUDREY L<br>Address:<br><br>Phone: | Name: EDWARDS AUDREY L<br>Address:<br><br>Phone: |

| Use Requested | Zone Code |
|---|---|
| Modular | RA |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| 7.44 | 35 | 35 | 15 | 15 | WSII-BOW Hunting Creek | YES |

| Remarks |
|---|
| MODULAR |

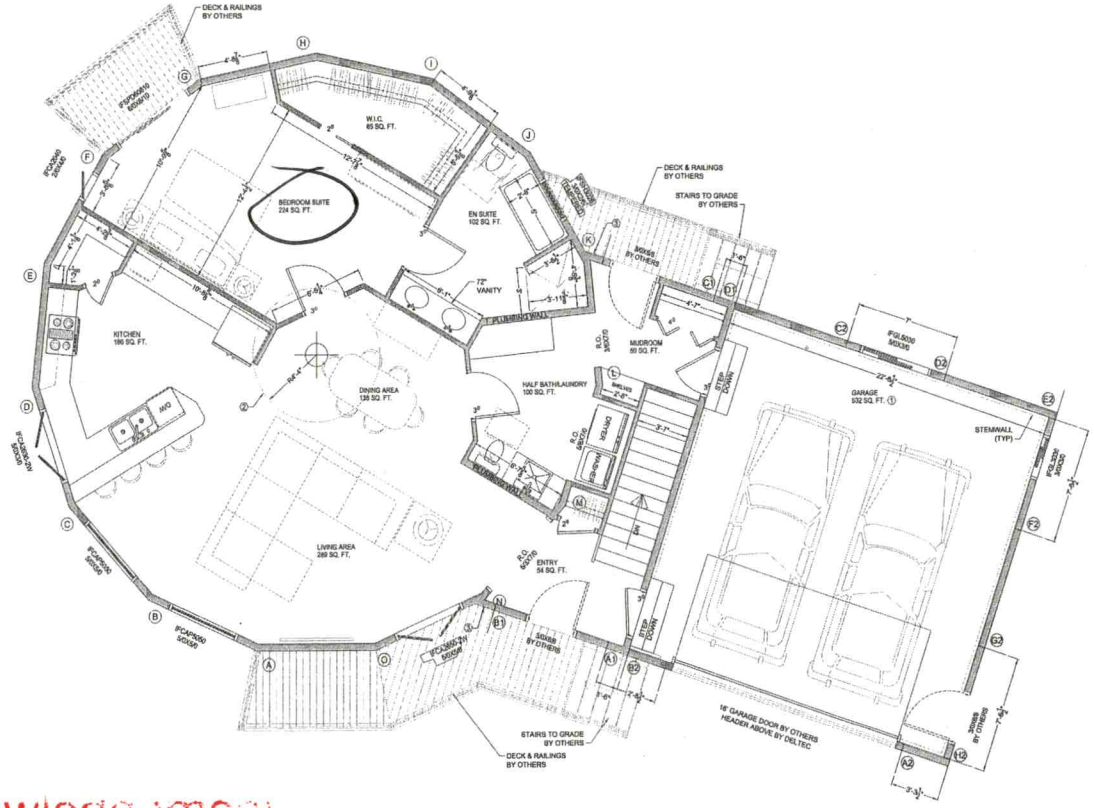
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions, plat conditions and other contractual agreements will not be undertaken by Iredell County and is the sole responsibility of the affected parties.

**Date:** 12/22/2021

Signature of Owner/Contractor

| Permit Number | 324136 | TOTAL FEES: | $77.25 |
|---|---|---|---|

| STRUCTURAL SPECIFICATIONS - SECOND LEVEL | | | |
|---|---|---|---|
| MODEL: | 1200 | 24X7 CONNECT | 24X23 WING |
| FOUNDATION TYPE: | BASEMENT | BASEMENT | SLAB |
| ROOF OVERHANG: | 2'-0" ENERGY SAVER | 2'-0" ENERGY SAVER (VAULTED) | 3'-0" ENERGY SAVER (VAULTED/GABLE) |
| ADDITIONAL STRUC. REQUIREMENTS: | NONE | NONE | NONE |
| ENGINEERING REQUIRED (Y/N): | NO | NO | NO |
| FLOOR SYSTEM DEPTH: | 16" WEB-TEC | 16" WEB-TEC | N/A |
| COLUMN HEIGHT: | N/A | N/A | N/A |
| WALL PANEL HEIGHT: | 7'-11" | 7'-11" | 7'-11" |
| WALL PANEL THICKNESS (NOM.): | 2X6 | 2X6 | 2X6 |
| EXTRA WALL OPTIONS: | ENERGY WALL 2.0 (AB+AF+IH) | ENERGY WALL 2.0 (AB+AF+IH) | NONE |
| SILL PLATE MATERIAL: | S.P.F. | S.P.F. | P.T.S.Y.P. |
| SKIRT LENGTH: | 19 INCHES | 19 INCHES | 1 INCH |
| FOAM (Y/N): | YES | YES | YES |
| ORDER OF WALL MATERIAL: | STUD-TAPE-CDX-FOAM-TYPAR DW-SIDING | STUD-TAPE-CDX-FOAM-TYPAR DW-SIDING | STUD-CDX-FOAM-TYPAR DW-SIDING |




Acknowledgement of
Plans Submittal ONLY!
A. L. Edwards 09/13-2022
B.A.B. Date 9-12-2022

## PLAN NOTES:

| | |
|---|---|
| ① | OWNER/CONTRACTOR RESPONSIBLE FOR FINISHED GARAGE MEETING ALL LOCAL CODES |
| ② | NO 4"Ø DRAIN PENETRATIONS WITHIN PLUMBING CIRCLE. WEB-TEC FLOOR TRUSSES CANNOT BE CUT OR MODIFIED IN ANY WAY OR THE DELTEC WARRANTY WILL BE VOID. |
| ③ | THIS PORTION OF WING/CONNECTOR TO BE BUILT ON SITE BY OTHERS TO ENSURE ACCURATE FIT OF DELTEC WING/CONNECTOR WALL PANELS. |
| ④ | REVIEW POSSIBLE CONFLICT W/DRAIN AND FLOOR TRUSS. TUB MAY HAVE TO BE ADJUSTED OR BUILT UP DEPENDING ON DRAIN LOCATION. |

| REV | BY |
|---|---|
| pre - NEW SKETCH - 05/16/2022 | KH |

PRINT LOG

ENGINEERING SEAL:

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

CUSTOMER NAME: AUDREY EDWARDS

PROJECT DESCRIPTION: 1 ST 1200 W/ 24X7 CONNECT ON BASEMENT TO 24X23 WING ON SLAB

DRAWING #: 2212-139

JOB #: 22002 | PM: CM

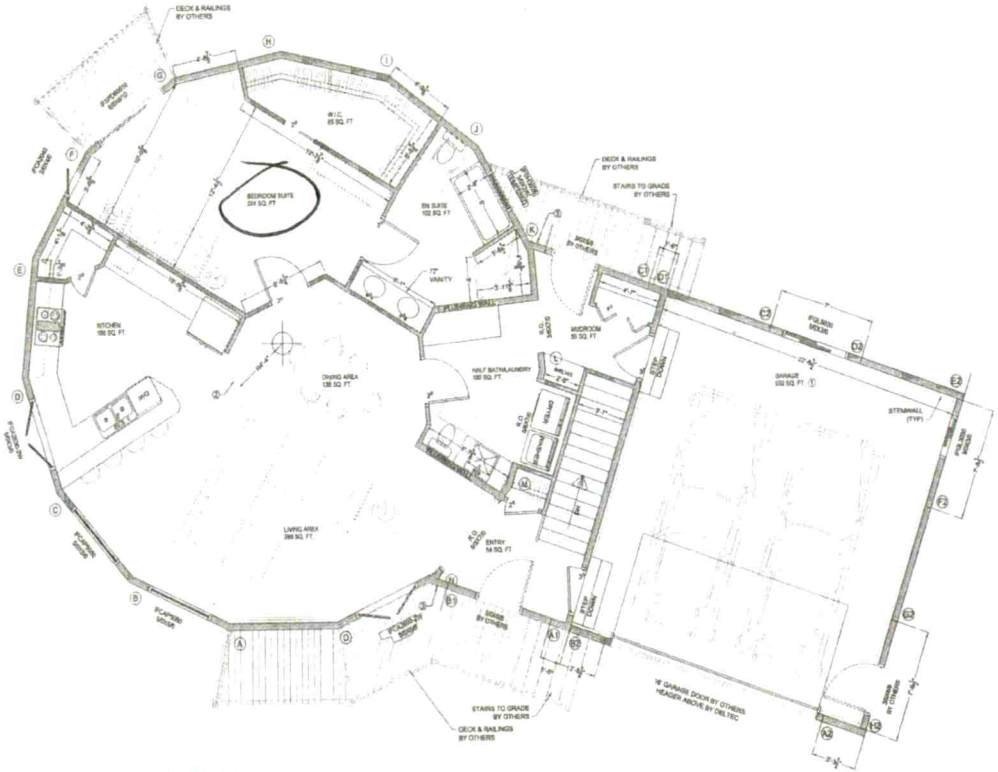
PAGE DESCRIPTION: SECOND LEVEL FLOOR PLAN

deltec homes

DH-102

222 Tutterow

| STRUCTURAL SPECIFICATIONS - SECOND LEVEL | | | |
|---|---|---|---|
| MODEL: | 1200 | 24X7 CONNECT | 24X23 WING |
| FOUNDATION TYPE: | BASEMENT | BASEMENT | SLAB |
| ROOF FRAMING: | 2'-0" ENERGY SAVER | 2'-0" ENERGY SAVER (VAULTED) | 2'-0" ENERGY SAVER (VAULTED/GABLE) |
| ADDITIONAL STRUC. REQUIREMENTS: | NONE | NONE | NONE |
| ENGINEERING REQUIRED (Y/N): | NO | NO | NO |
| FLOOR SYSTEM DEPTH: | 16" WEB-TEC | 16" WEB-TEC | N/A |
| COLUMN HEIGHT: | N/A | N/A | N/A |
| WALL PANEL HEIGHT: | 7'-11" | 7'-11" | 7'-11" |
| WALL PANEL THICKNESS (NOM.): | 2X6 | 2X6 | 2X6 |
| EXTRA WALL OPTIONS: | ENERGY WALL 2.0 (AB+AF+IH) | ENERGY WALL 2.0 (AB+AF+IH) | NONE |
| SILL PLATE MATERIAL: | S.P.F. | S.P.F. | P.T.S.Y.P. |
| SKIRT LENGTH: | 19 INCHES | 19 INCHES | 1 INCH |
| FOAM (Y/N): | YES | YES | YES |
| ORDER OF WALL MATERIAL: | STUD-TAPE-CDX-FOAM-TYPAR DW-SIDING | STUD-TAPE-CDX-FOAM-TYPAR DW-SIDING | STUD-CDX-FOAM-TYPAR DW-SIDING |




Acknowledgement of
Plans Submittal ONLY!

B.A.B. Date 9-12-2022

Audrey L Edwards

**PLAN NOTES:**

1. OWNER/CONTRACTOR RESPONSIBLE FOR FINISHED GARAGE MEETING ALL LOCAL CODES
2. NO 4"Ø DRAIN PENETRATIONS WITHIN PLUMBING CIRCLE. WEB-TEC FLOOR TRUSSES CANNOT BE CUT OR MODIFIED IN ANY WAY OR THE DELTEC WARRANTY WILL BE VOID.
3. THIS PORTION OF WING/CONNECTOR TO BE BUILT ON SITE BY OTHERS TO ENSURE ACCURATE FIT OF DELTEC WING/CONNECTOR WALL PANELS.
4. REVIEW POSSIBLE CONFLICT W/DRAIN AND FLOOR TRUSS. TUB MAY HAVE TO BE ADJUSTED OR BUILT UP DEPENDING ON DRAIN LOCATION.

| REV | BY |
|---|---|
| pre - NEW SKETCH - 05/16/2022 | CM |

PRINT LOG

ENGINEERING SEAL

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

CUSTOMER NAME: AUDREY EDWARDS

PROJECT DESCRIPTION: 1 ST 1200 W/ 24X7 CONNECT ON BASEMENT TO 24X23 WING ON SLAB

DRAWING #: 2212-139

JOB #: 22002 | PM: CM

PAGE DESCRIPTION: SECOND LEVEL FLOOR PLAN

deltec homes

DH-102