ICHD - ENVIRONMENTAL HEALTH DIVISION

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

CW

BLDR-2022-34983

PERMIT # AP-324264

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

PIN # 4871 -- 42 -- 0307

APPLICANT/OWNER: BUILD 4 VALUE, LLC.

APPLICANT ADDRESS: P.O. BOX 1764 CONCORD, N.C. 28026

SITE ADDRESS: 124 TRANQUILITY LANE, HARMONY, N.C. 28634

PHONE: 907-500-8904

ALT. PHONE: –

SITE DIRECTIONS: (N) ON 21, (L) ON LITTLE WILKSBORO, (R) ON RABBIT HIGHWAY, (L) ON TRANQUILITY, LOT ON (R)

SAP CONTROLLED: ☑ YES ☐ NO

SUBDIVISION: HARMONY COUNTRY ESTATES

SECTION: 2 LOT # 30 LOT AREA: 0.51 AC

DESIGN FLOW: 360GPD L.T.A.R.: 0.25

Septic Tank	1000 (gal)	STB	760	Date	9/30/2023	☑ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI
Pump Tank	– (gal)	PT	–	Date	–	System Description:	50% REDUCTION - PPBPS
Pump Make	–	Model	–	Serial #	–	Repair System Description:	50% REDUCTION - PPBS
# Nitrification Fields	1	# Lines	4	Linear Ft	240 FT	Maintenance Agreement Required:	☐ YES ☑ NO
Trench Width	24 IN	Trench Bottom Depth(Low side)	30 IN	Gravel Depth	–	☑ GRAVITY	☐ PRESSURE

☑ Residence ☐ Business ☐ Other ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing

No. Bedrooms: 3 | No. Persons: 6 | No. Employees: –

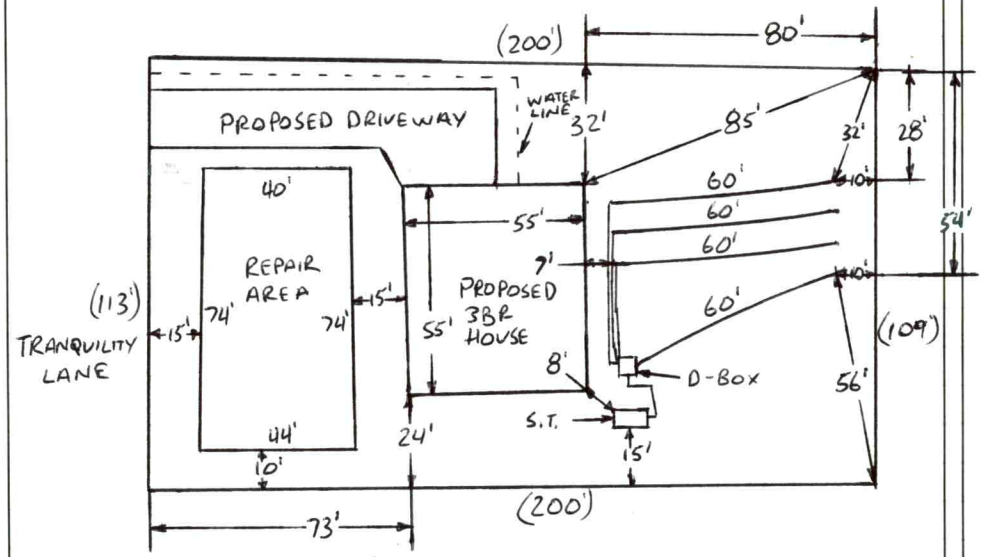
Water Supply: ☐ Private ☑ Public ☐ Community

☐ Basement w/o plumbing

Comments / Conditions: INSTALL ON CONTOUR, INSTALL ON 8 FT CENTERS, UTILIZE EQUAL DISTRIBUTION, DO NOT EXCEED A 36 IN MAX TRENCH DEPTH, DO NOT SHALLOW UP

* House must be built as shown *
* No Foundation drain installed around house *

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.

1 IN = 50 FT

S.T. = SEPTIC TANK

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: 9/19/22

IMPROVEMENT PERMIT by: Bryant E. White Date: 8-9-2022

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 9/12/23

Installed by: Commercial Services

OPERATION PERMIT by: Sarah Williams Date: 11/29/23

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 1
PROPERTY ID #: 4871-42-0307
COUNTY: IREDELL

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

OWNER: BUILD 4 VALUE, LLC.
ADDRESS: P.O. BOX 1764 CONCORD, N.C. 28026
PROPOSED FACILITY: 3BR
PROPOSED DESIGN FLOW (.1949): 360GPD
LOCATION OF SITE: 124 Tranquility LANE, HARMONY, N.C. 28634
APPLICATION DATE 6-8-2022
DATE EVALUATED: 7-27-2022
PROPERTY SIZE: 0.51 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	FS HEAD	0-8	SCL/GR		2.5Y 7/4	51	Sap inclusions begin at 40 BS II		PS .25
		8-32	C/SBK		at 28				
		32-51	CL/SBK		YB at 36				
		51-62	LSAP						
2	FS HEAD	0-12	SCL		FEW YIB MOTS THRU OUT	40	Sap inclusions begin at 30		PS .275
		12-28	C						
		28-40	CL						
		40-60	LSAP						
3	LS	0-12	SCL		Chas YB w/ LitB at 18-25 X/B THRU OUT	42	Sap inclusions begin at 32		PS .275 36" TRENCH
		12-30	C						
		30-46	CL						
		46-60	LSAP						
4	LS	0-12	SCL		C IS MIXED MINERAL BR MATRIX FEW Y/B THRU OUT	24			PS .3
		12-24	C						
		24-60	LSAP						
			Coming in						
			SAP						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	50%	50%
Site LTAR	0.25	0.25

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Bryant C. White
OTHER(S) PRESENT:

COMMENTS:

Updated February 2014

LEGEND

use the following standard abbreviations

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

MOIST	WET
VFR (Very Friable)	NS (Non-sticky)
FR (Friable)	SS (Slightly Sticky)
FI (Firm)	S (Sticky)
VFI (Very Firm v. Very Sticky)	VS (Very Sticky)
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.

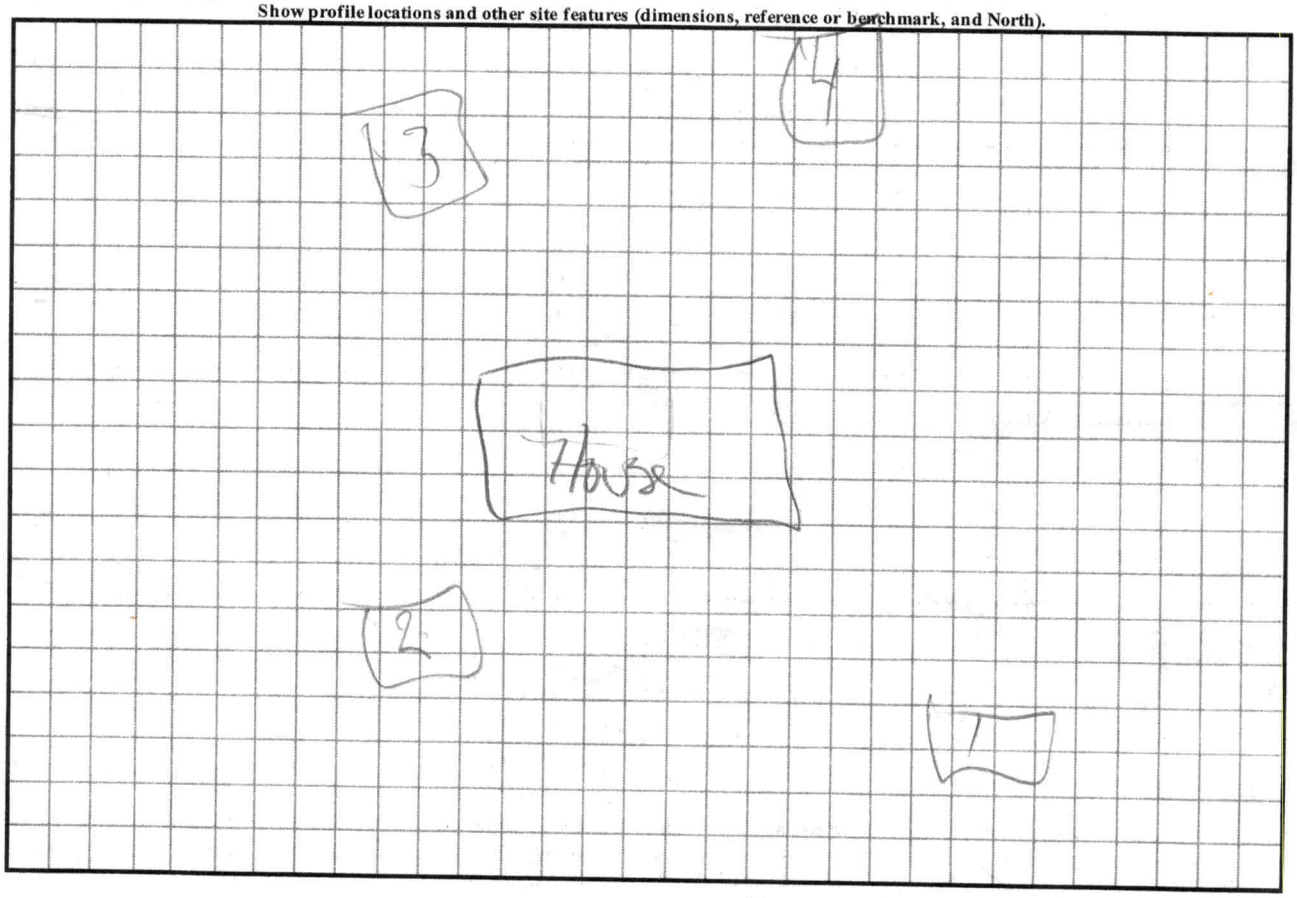
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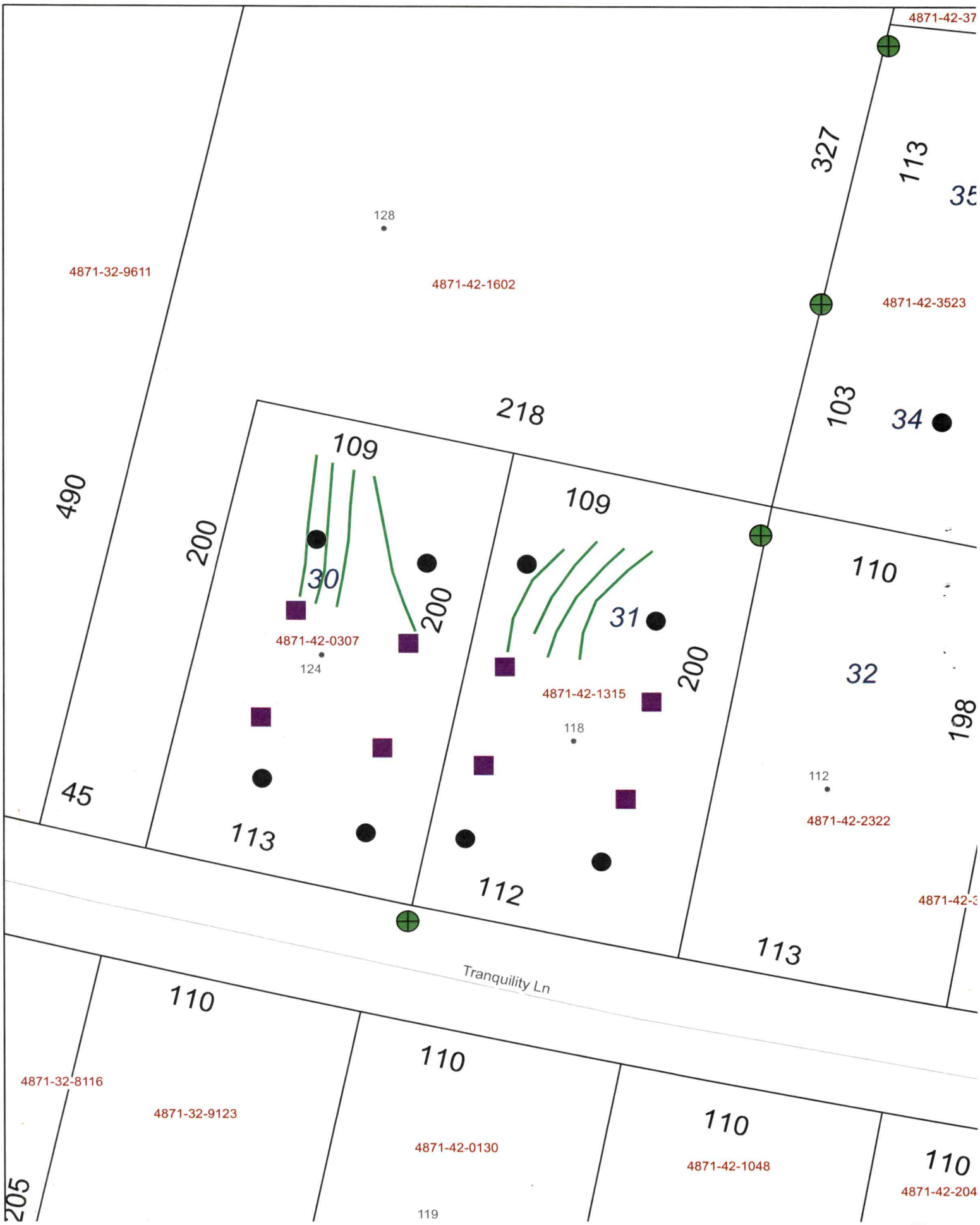
HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or 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).




4871-42-37
327
113
35
128
4871-32-9611
4871-42-1602
4871-42-3523
218
103
34
109
109
490
200
30
200
31
110
4871-42-0307
124
200
32
4871-42-1315
118
198
45
112
4871-42-2322
113
112
4871-42-
113
Tranquility Ln
110
110
4871-32-8116
4871-32-9123
4871-42-0130
110
4871-42-1048
110
4871-42-204
205
119

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RECEIVED JUN 8 - 2022

BW

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- 329264 $500.00

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: Build 4 Value LLC Address: PO Box 1764 Concord, NC 28026 Zip:
Applicant Email: biz@b4vinvestments.com Phone: 907-500-8904 Alt. Phone:
Owner Name: NuHomes Construction LLC Address: PO Box 40361 Pittsburgh, PA Zip: 15201
Owner Email: mgraves@nuhomesclt.com Phone: 815-791-5926 Alt. Phone:

Property Information:

Street Address: 124 Tranquility Ln Harmony NC 28634
Subdivision Name: Harmony Country Estates Section/Phase: Lot Number:
Driving Directions:

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: 3
Maximum Number of Occupants: 5
( ) 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:
(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:
Signature: Jared Keuffer 6/1/2022
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

DocuSign Envelope ID: 73166E6C-1C9C-4E13-9190-EE7B92578B28

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)* Build 4Value. LLC

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, Matt Graves NuHomes Construction, LLC, am the legal owner(s) of the property located at ~~148~~ 124 Tranquility Ln Harmony, NC 28634, identified as

PIN (Parcel Identification Number) 4871-24-1315, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Jared Reutter Build 4 Value 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.

Docusigned by: Matt Graves — 6/1/2022

Signature of Owner(s) — 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

DocuSign Envelope ID: 73166E6C-1C9C-4E13-9190-EE7B92578B28

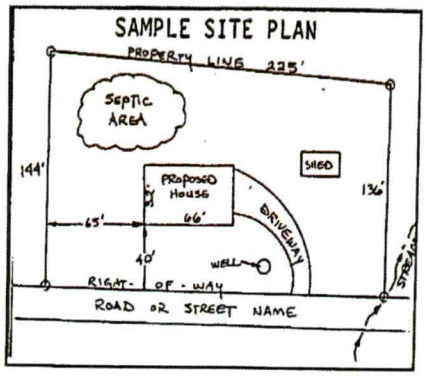
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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
- ( ) North arrow, or other sufficient indicator of direction

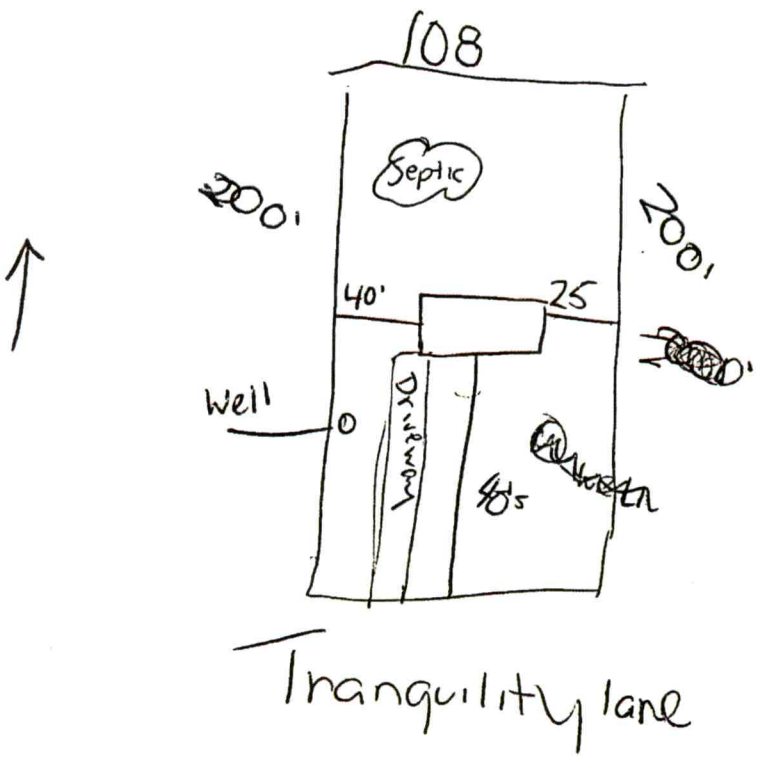


Circle N/A on the following if appropriate:

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: DocuSigned by: Mark J Keuller

6/1/2022

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
329264 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4871420307.000	124 TRANQUILITY LN	Harmony

Owner Information	Applicant Information
Name: NUHOMES CONSTRUCTION LLC	Name: BUILD 4 VALUE LLC
Address:	Address: P. O. BOX 1764
,	CONCORD, NC 28026
Phone:	Phone: (907)500-8904

Use Requested	Zone Code
Single Family Dwelling	R20

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.51	35	35	15	15	WSIII-BOW Hunting Creek	NO

Remarks
SFD need disclaimer

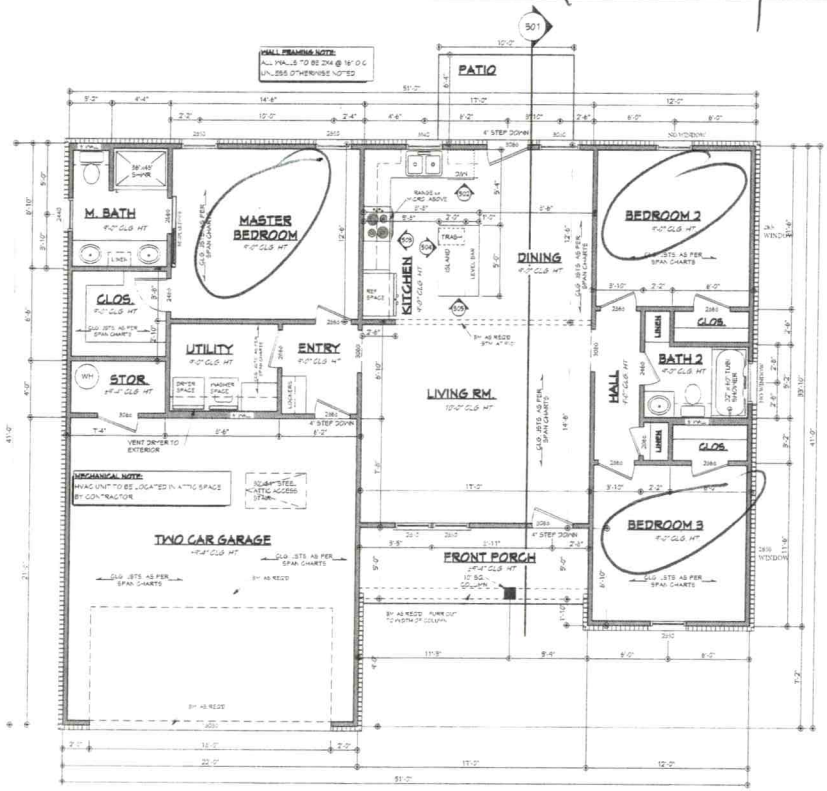
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions,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

Date: 05/31/2022

Signature of Owner/Contractor

Permit Number	329264	TOTAL FEES:	$77.25

124 tranquility



FLOOR PLAN

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

AREAS:	1264	S.F. HEATED WITHOUT MASONRY
	474	S.F. UNHEATED - GARAGE
	23	S.F. UNHEATED - STORAGE
	95	S.F. UNHEATED - FRONT PORCH
	592	S.F. UNHEATED TOTAL
	1852	S.F. TOTAL
		(NOT INCLUDING MASONRY)
	63	S.F. PATIO - NOT INCLUDED IN FOOTAGES ABOVE

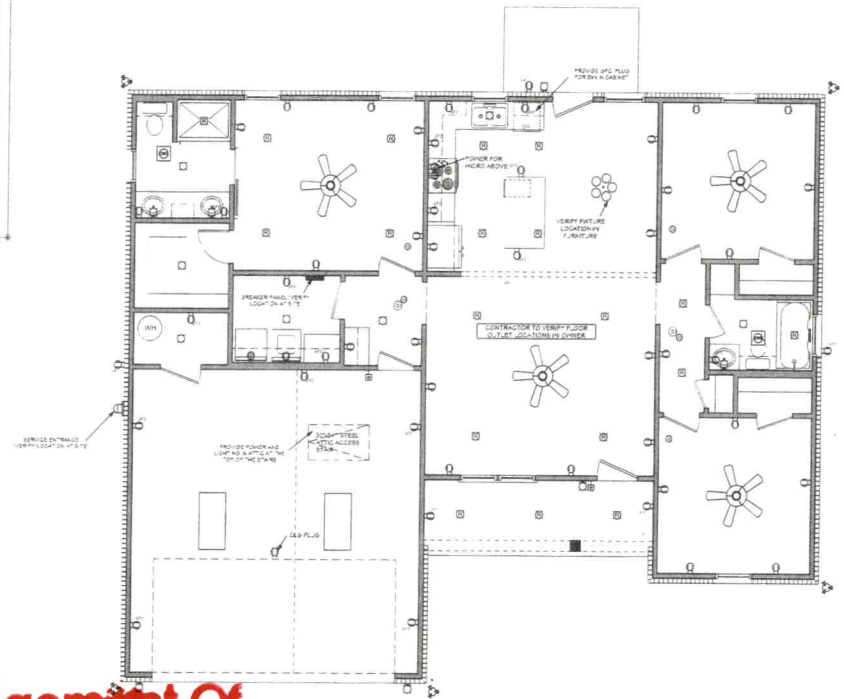
NOTES:

1. ALL DIMENSIONS & SITE CONDITIONS TO BE VERIFIED BY CONTRACTOR PRIOR TO CONSTRUCTION
2. ALL FINISHES (INTERIOR & EXTERIOR) TO BE VERIFIED WITH OWNER PRIOR TO CONSTRUCTION.
3. VERIFY ALL DOOR AND WINDOW STYLES AND SIZES WITH OWNER PRIOR TO CONSTRUCTION. MANUFACTURER TO SUPPLY ALL ROUGH OPENING SIZES
4. CONTRACTOR TO VERIFY ALL CLEARANCES OF ALL DOORS, WINDOWS AND OTHER ITEMS THAT ARE CRITICAL, PRIOR TO CONSTRUCTION.
5. CONTRACTOR TO ADAPT PLANS AS REQUIRED TO MEET ALL APPLICABLE CODES AT SITE
6. ALL BEAMS TO BE SIZED BY A LICENSED STRUCTURAL ENGINEER
7. PORCHES, BALCONIES OR RAISED FLOOR SURFACES LOCATED MORE THAN 30 INCHES ABOVE THE FLOOR OR GRADE BELOW AT ANY POINT WITHIN 36 INCHES HORIZONTALLY SHALL HAVE GUARDS NOT LESS THAN 36 INCHES IN HEIGHT. OPEN SIDES OF STAIRS WITH A TOTAL RISE OF MORE THAN 30 INCHES ABOVE THE FLOOR OR GRADE BELOW SHALL HAVE GUARDS NOT LESS THAN 34 INCHES IN HEIGHT MEASURED VERTICALLY FROM THE NOSING OF THE TREADS. INSECT SCREENING SHALL NOT BE CONSIDERED AS A GUARD. IRC 2018, R312.1.1 & R312.1.2
8. M1305.1.2 APPLIANCES IN ATTICS. ATTICS CONTAINING APPLIANCES SHALL BE PROVIDED WITH AN OPENING AND A CLEAR AND UNOBSTRUCTED PASSAGEWAY LARGE ENOUGH TO ALLOW REMOVAL OF THE LARGEST APPLIANCE, BUT NOT LESS THAN 30 INCHES HIGH AND 22 INCHES WIDE AND NOT MORE THAN 20 FEET LONG MEASURED ALONG THE CENTERLINE OF THE PASSAGEWAY FROM THE OPENING TO THE APPLIANCE. THE PASSAGEWAY SHALL HAVE CONTINUOUS SOLID FLOORING IN ACCORDANCE WITH CHAPTER 5 NOT LESS THAN 24 INCHES WIDE. A LEVEL SERVICE SPACE AT LEAST 30 INCHES DEEP AND 30 INCHES WIDE SHALL BE PRESENT ALONG ALL SIDES OF THE APPLIANCE WHERE ACCESS IS REQUIRED. THE CLEAR ACCESS OPENING DIMENSIONS SHALL BE A MINIMUM OF 20 INCHES BY 30 INCHES, AND LARGE ENOUGH TO ALLOW REMOVAL OF THE LARGEST APPLIANCE.
EXCEPTIONS:
a. THE PASSAGEWAY AND LEVEL SERVICE SPACE ARE NOT REQUIRED WHERE THE APPLIANCE CAN BE SERVICED AND REMOVED THROUGH THE REQUIRED OPENING.
b. WHERE THE PASSAGEWAY IS UNOBSTRUCTED AND NOT LESS THAN 6 FEET HIGH AND 22 INCHES WIDE FOR ITS ENTIRE LENGTH, THE PASSAGEWAY SHALL BE NOT MORE THAN 50 FEET LONG.
9. APPLIANCE ACCESS FOR INSPECTION SERVICE, REPAIR AND REPLACEMENT. APPLIANCES SHALL BE ACCESSIBLE FOR INSPECTION, SERVICE, REPAIR AND REPLACEMENT WITHOUT REMOVING PERMANENT CONSTRUCTION, OTHER APPLIANCES, OR ANY OTHER PIPING OR DUCTS NOT CONNECTED TO THE APPLIANCE BEING INSPECTED, SERVICED, REPAIRED OR REPLACED. A LEVEL WORKING SPACE AT LEAST 30 INCHES DEEP AND 30 INCHES WIDE SHALL BE PROVIDED IN FRONT OF THE CONTROL SIDE TO SERVICE AN APPLIANCE. M1305.1.1
10. EMERGENCY ESCAPE AND RESCUE OPENINGS SHALL BE OPERATIONAL FROM THE INSIDE OF THE ROOM WITHOUT THE USE OF SPECIAL KNOWLEDGE. WINDOW OPENING CONTROL DEVICES COMPLYING WITH ASTM F 2090 SHALL BE PERMITTED FOR USE ON EMERGENCY ESCAPE AND RESCUE OPENINGS. EMERGENCY ESCAPE AND RESCUE OPENING. ALL SLEEPING ROOMS TO HAVE AN EXTERIOR ACCESS THROUGH A DOOR OR WINDOW. MINIMUM 5 SQUARE FEET NET CLEAR OPENING AS PER IRC 2015 R310.2.1. EXCEPTION: GRADE FLOOR OR BELOW GRADE OPENINGS SHALL HAVE A MINIMUM NET CLEAR OPENING OF 5 SQUARE FEET. MAXIMUM SILL HEIGHT TO BE 44 INCHES. MINIMUM NET CLEAR OPENING HEIGHT TO BE 24 INCHES. MINIMUM NET CLEAR OPENING WIDTH TO BE 20 INCHES.
11. ALL RETURN AIR GRILLS ARE TO BE LOCATED TO COMPLY WITH SECTION M1602 OF THE IRC 2018.
12. ALL SQUARE FOOTAGE MEASUREMENTS ARE APPROXIMATE AND MAY DIFFER FROM ACTUAL CONSTRUCTED RESIDENCE. A LICENSED PROFESSIONAL SHALL VERIFY ALL AREA OF CONSTRUCTION.
13. FIRE SPRINKLER SYSTEM TO BE DESIGNED AND INSTALLED (IF REQUIRED BY LOCAL CODES) AS PER THE IRC 2018 AND NFPA 13D.
14. ALL BATHROOM EXHAUST VENTS SHALL BE VENTED DIRECTLY TO THE EXTERIOR OF THE HOME AND NOT INTO THE ATTIC. IRC 2018, M1505.2

ELECTRICAL SYMBOLS LEGEND

SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION
	110 VOLT OUTLET		TV SPEAKER
	GROUND FAULT PROTECTED OUTLET		RADIO SPEAKER
	WEATHERPROOF OUTLET		CEILING FAN ONLY, NO LIGHT KIT
	220 VOLT RECEPTACLE		CEILING FAN WITH LIGHT KIT
	FLOOR OUTLET (OWNER TO LOCATE)		TRACK LIGHTING (OWNER TO LOCATE)
	CEILING HUNG FIXTURE		WALL SCONCE (OWNER TO LOCATE)
	OVERHANG MOUNTED FLOODLIGHTS		CHANDELIER 1 (O.T.S.)
	WALL MOUNTED FLOODLIGHTS		CHANDELIER 2 (O.T.S.)
	RECESSED CEILING FIXTURE		
	FLUORESCENT LIGHT		
	CARBON MONOXIDE DETECTOR		
	SMOKE DETECTOR		
$	SWITCH (OWNER TO LOCATE)		
	WALL MOUNTED LIGHT		
	WEATHERPROOF OUTLET		
	CATS NETWORKING JACK (OWNER TO LOCATE)		
	TELEPHONE OUTLET (OWNER TO LOCATE)		
	TELEVISION OUTLET (OWNER TO LOCATE)		
	DOORBELL BUTTON (CONTRACTOR TO LOCATE)		
	THERMOSTAT (CONTRACTOR TO LOCATE)		
	CEILING EXHAUST FAN, VENT TO EXTERIOR		
	UNDER COUNTER LIGHTING		

ELECTRICAL NOTES:
1. ALL WORK SHALL COMPLY WITH ALL CODES APPLICABLE AT SITE.
2. SMOKE ALARMS SHALL BE INSTALLED IN THE FOLLOWING LOCATIONS: EACH SLEEPING ROOM, OUTSIDE EACH SEPARATE SLEEPING AREA IN THE IMMEDIATE VICINITY OF THE BEDROOMS, ON EACH ADDITIONAL STORY OF THE DWELLING, INCLUDING BASEMENTS AND HABITABLE ATTICS. WHEN MORE THAN ONE SMOKE ALARM IS REQUIRED TO BE INSTALLED WITHIN A DWELLING THE ALARM DEVICES SHALL BE INTERCONNECTED IN SUCH A MANNER THAT THE ACTUATION OF ONE ALARM WILL ACTIVATE ALL OF THE ALARMS IN THE UNIT. SMOKE ALARMS SHALL BE HARD WIRED WITH A BATTERY BACK UP.
3. CARBON MONOXIDE ALARMS SHALL BE INSTALLED OUTSIDE OF EACH SEPARATE SLEEPING AREA IN THE IMMEDIATE VICINITY OF THE BEDROOMS IN DWELLING UNITS WITHIN WHICH FUEL-FIRED APPLIANCES ARE INSTALLED AND IN DWELLING UNITS WITH ATTACHED GARAGES.
4. A 125 VOLT, SINGLE PHASE, 15-20 AMPERE RATED RECEPTACLE OUTLET SHALL BE INSTALLED AT AN ACCESSIBLE LOCATION FOR THE SERVICING OF HEATING, AIR CONDITIONING AND REFRIGERATION EQUIPMENT. THE RECEPTACLE SHALL BE LOCATED ON THE SAME LEVEL AND WITHIN 25 FEET OF THE EQUIPMENT. THE RECEPTACLE OUTLET SHALL NOT BE CONNECTED TO THE LOAD SIDE OF THE HVAC EQUIPMENT DISCONNECTING MEANS



ELECTRICAL PLAN

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

NOTE: SWITCHES AND ELECTRICAL CONNECTIONS NOT SHOWN. OWNER TO LOCATE THESE ITEMS DURING ELECTRICAL WALK-THROUGH WITH ELECTRICAL CONTRACTOR.

Acknowledgement Of Plans Submittal ONLY!

Date 9/19/22

Date 9/19/22

HOUSE PLAN ZONE
Designing Homes Building Relationships

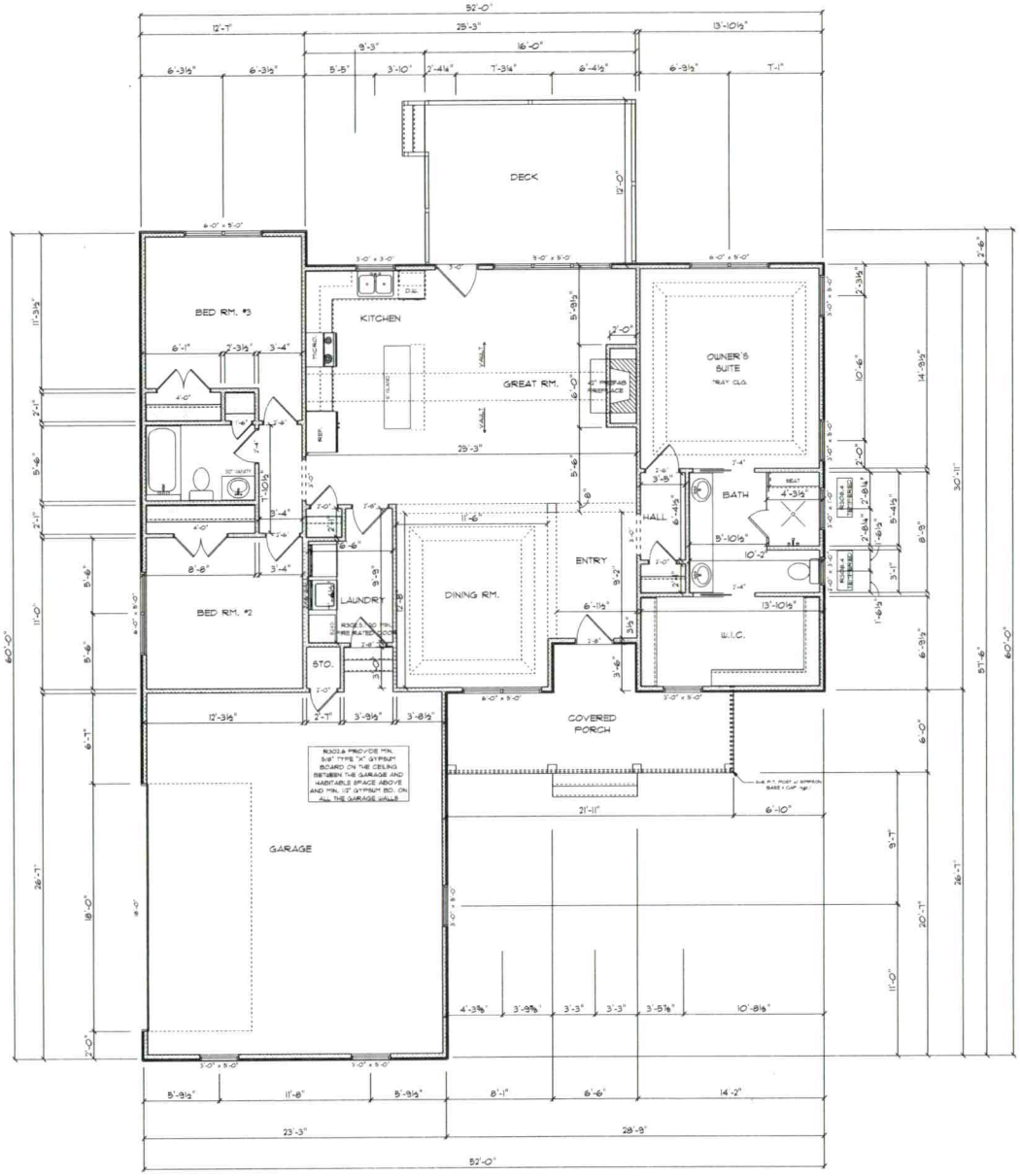
Website: www.HPZplans.com
Email: sales@hpzplans.com
Phone: 601.936.3254
Fax: 1.800.574.1387

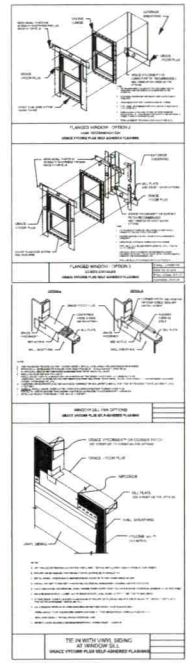
N·C·B·D·C NATIONAL COUNCIL OF BUILDING DESIGNERS CERTIFICATION
JONATHAN L. BOONE
CERTIFICATION NO. 25-137

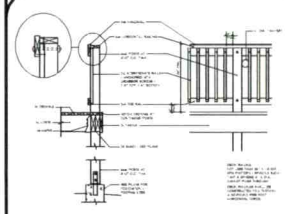
Pre-Drawn Plan ID: 1264A

House Plan Zone, LLC has exercised great care in the development of these plans and the completion of these construction documents. However, due to the great distance in relation to the construction site, House Plan Zone, LLC has no control over the quality of workmanship or materials used in the construction of any structure based on these plans. House Plan Zone, LLC shall not be liable for any losses, claims, damages or deficiencies in the design, construction, workmanship or materials used in the construction of any structure based on these plans. House Plan Zone, LLC hereby disclaims any and all liability for any losses, claims, damages or deficiencies in the design, construction, workmanship or materials used in the construction of any structure based on these plans. House Plan Zone, LLC shall not be liable for any losses, claims, damages or deficiencies in the design, construction, workmanship or materials used in the construction of any structure based on these plans. House Plan Zone, LLC hereby disclaims any and all liability

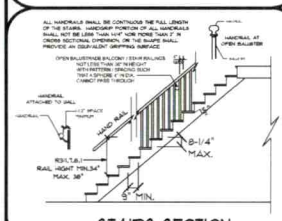
124 Tranquility



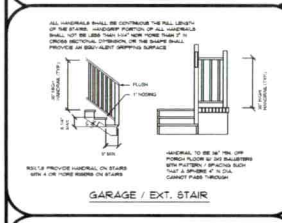




DECK AND RAILING OPT.



STAIRS SECTION



GARAGE / EXT. STAIR

NOTE:
1. ALL EXTERIOR HDRS. ARE (2) 2x10 SPF#2 WITH (1) 2x4 JACK (EACH SIDE) UNLESS OTHERWISE NOTED
2. ALL INTERIOR LOAD BEARINGHDRS. ARE (2) 2x10 SPF#2 WITH (1) 2x4 JACK (EACH SIDE) UNLESS OTHERWISE NOTED
3. HATCHED AREAS INDICATE DROPPED CEILINGS
4. ALL CASED OPENINGS @ 7'-11" H

SQUAREFOOTAGE :
1ST. FLOOR 1603 SQFT.
TOTAL HEATED 1603 SQFT.
GARAGE 562 SQFT FRONT PORCH 152 SQFT.
TOTAL UNDER ROOF 2317 SQFT.

ATTENTION
1 - ALL WORK SHALL MEET ALL LOCAL, STATE, AND NATIONAL BUILDING CODES THAT APPLY
2 - THE CONTRACTOR SHALL VERIFY ALL DIMENSIONS BEFORE STARTING CONSTRUCTION.
3 - ALL DIMENSIONS SHOULD BE READ OR CALCULATED, NOT SCALED.
4 - NOT RESPONSIBLE FOR ERRORS DISCOVERED AFTER CONSTRUCTION HAS STARTED.

1ST FLOOR PLAN
SCALE: 1/4" = 1'-0"

These plans have been made in the preparation of the plans to avoid errors. However, it is the responsibility of the Owner and Contractor to check all plans. Owner shall verify all dimensions and conditions prior to beginning construction. Owner shall notify all constructors and contractors of any discrepancies before beginning construction. The Contractor and/or Owner shall assume responsibility for any errors not reported.

The Designer accepts no responsibility, liability or cost of any wage action related to these plans and specifications. The Owner and/or Contractor shall indemnify and hold the Designer harmless from any and all claims arising from the modification of these plans by the Owner and/or Contractor or the use of these plans on any other project without the written authorization of the Designer. Any unauthorized use of these plans and specifications will be considered a violation of the Designer's rights and will be prosecuted to the full extent of the law. The Contractor shall not allow any unauthorized use of these plans and specifications. Reproduction of these plans without the written approval from any copyright owner(s) is/are in violation of copyright law(s).

DAVID KNOWLES
LOT #4

REVISIONS: 08-22-2023
DATE DRAWN 11-07-2020

A-4