ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP311283

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

PIN # 3792 - 28 - 8463

APPLICANT/OWNER: Cornerstone Properties APPLICANT ADDRESS: 118 East Kingsley Ave Clt 28203

SITE ADDRESS: 196 Sharon School Road Statesville 28677 PHONE: 704-301-3229 ALT. PHONE -

SITE DIRECTIONS: Hicks Hwy West R on Sharon School Site on R SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Abernathy Farm SECTION: - LOT # Pt 26 LOT AREA: 24 Acre DESIGN FLOW: 240 gpd L.T.A.R.: .375

Septic Tank	1000	(gal)	STB	760	Date	7.2.21	☒ New System	☐ Repair	☐ Expansion	System Type: I II III (V) VI	
Pump Tank	1000	(gal)	PT	363	Date	8-21-21	System Description:	LP PPBBS			
Pump Make	Goulds	Model	MEGII HHU		Serial #		Repair System Description:	LP PPPBPS			
# Nitrification Fields	1	# Lines	6		Linear Ft:	220'	Maintenance Agreement Required:	☒ YES	☐ NO		
Trench Width	24"	Trench Bottom Depth(~~Low side~~)	Max 36		Gravel Depth	-		☐ GRAVITY	☒ PRESSURE		

☒ Residence	No. Bedrooms	2	Water Supply
☐ Business	No. Persons	4	☐ Private
☐ Other	No. Employees		☒ Public
☒ Slab	☐ Crawl Space		☐ Community
☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Install Drainline on Center of land, use Central Valve box for distribution.

Well must be Abandon Prior to the ✓ 4-21-21

INITIAL SITE SKETCH

See attached from Michael Anthanas + Associates

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.

SYSTEM 1 LEFT AS START UP SYSTEM BCW 10-20-201

BOTTOM 2 LINES CHECKED

PRESSURE HEAD - CHECKED

ALARM CHECKED -

10-20-21 BCW

	Date	Initials
Drain Lines Checked (Bottom 2 Top 4)	10-19-21	JB
Tanks Checked	10-19-21	JB
Pressure Manifold or Valve Box Checked	10-19-21	JB
Pressure Head Set	10-20-2021	BCW
Electrical Checked + 12/17/21 DW +	10-20-21	BCW
Floats Set	10-19-21	JB
Alarm Checked	10 20 21	BCW
Maintenance Contract Y / N	12-22-21	DW
Comments: Pump 10 ~~21~~ 19-21 JB		

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**

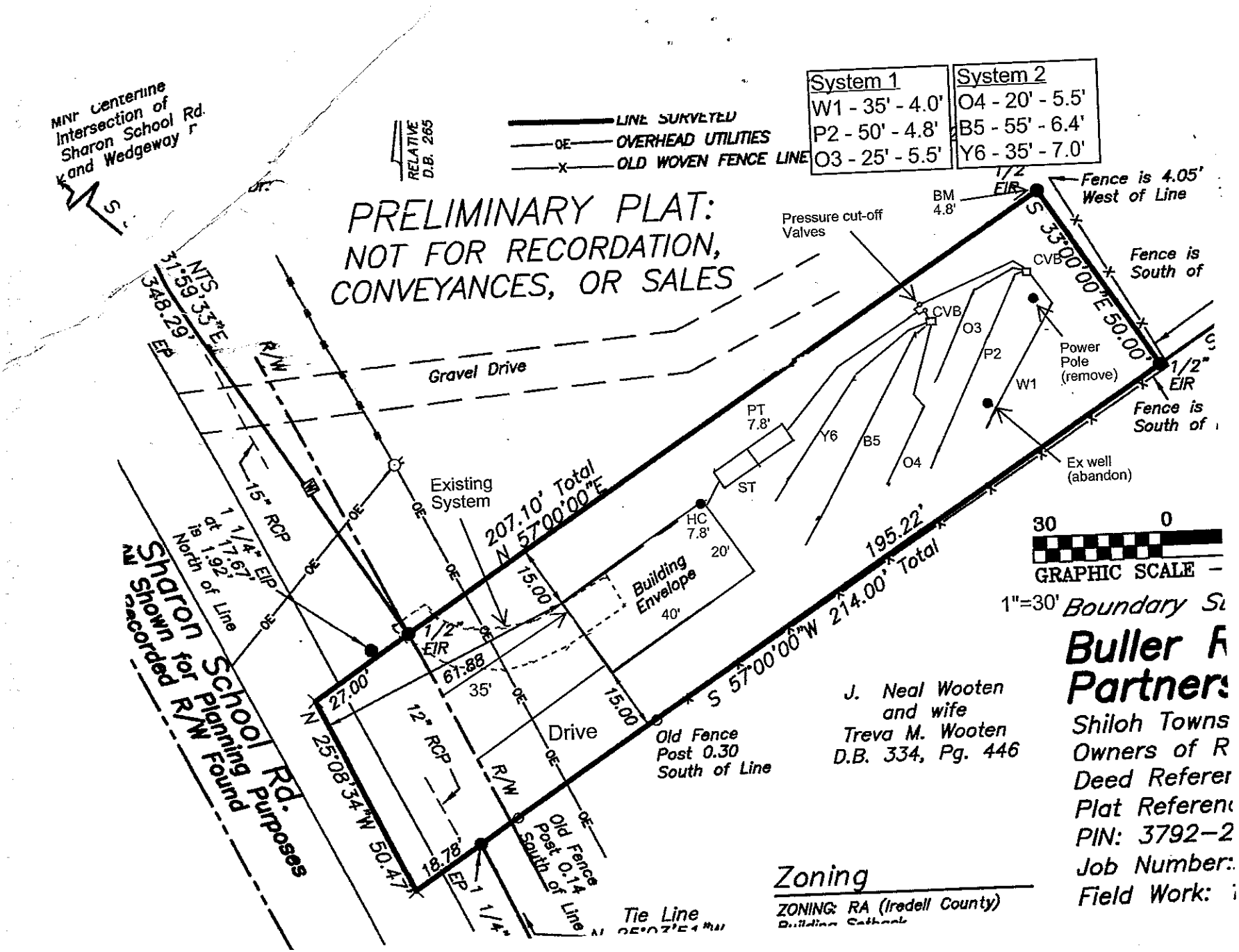
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☑ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☑ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Stan Pruitt Date: 3/25/21 Installed by: Lentz Construction

IMPROVEMENT PERMIT by: Date: 3-25-2021 OPERATION PERMIT by: Bryant White @ Date: 10-20-21

AUTHORIZATION TO CONSTRUCT by: Date: 5-3-2021 Existing System Inspected by: Date:

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


MNr Centerline Intersection of Sharon School Rd. and Wedgeway
RELATIVE D.B. 265
LINE SURVEYED
OE OVERHEAD UTILITIES
X OLD WOVEN FENCE LINE
System 1
W1 - 35' - 4.0'
P2 - 50' - 4.8'
O3 - 25' - 5.5'
System 2
O4 - 20' - 5.5'
B5 - 55' - 6.4'
Y6 - 35' - 7.0'
PRELIMINARY PLAT:
NOT FOR RECORDATION,
CONVEYANCES, OR SALES
BM 4.8'
1/2" EIR
Fence is 4.05' West of Line
Pressure cut-off Valves
CVB
S 33°00'00"E 50.00'
Fence is South of
Gravel Drive
O3
P2
Power Pole (remove)
W1
1/2" EIR
Fence is South of
PT 7.8'
Y6
B5
O4
Ex well (abandon)
ST
HC 7.8'
Existing System
207.10' Total N 57°00'00"E
15.00
Building Envelope
40'
20'
195.22'
S 57°00'00"W 214.00' Total
30 0
GRAPHIC SCALE
1"=30' Boundary Su
NTS 31°59'33"E 348.29'
EP
R/W
15" RCP
1 1/4" EIP at 17.67', is 1.92' North of Line
Sharon School Rd. Purposes
As Shown for Planning R/W Found
Recorded
1/2" EIR
61.88
35'
27.00'
N 25°08'34"W 50.47'
12" RCP
Drive
15.00
Old Fence Post 0.30 South of Line
Old Fence Post 0.14 South of Line
18.78'
EP 1 1/4"
Tie Line
J. Neal Wooten and wife Treva M. Wooten
D.B. 334, Pg. 446
Buller F
Partners
Shiloh Towns
Owners of R
Deed Referer
Plat Referen
PIN: 3792-2
Job Number:
Field Work:
Zoning
ZONING: RA (Iredell County)

RECEIVED MAR 11 2021



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
556 Walden Trail
Weddington, NC 28173
(704) 576-3887
3/10/2021

Reference: Data Sheet for 196 Sharon School Rd
House Footprint: 20' x 40'
Building Setbacks: 35' front/rear, 15' side
Water Source: County water
Number of Bedrooms/Daily Flow: 2/240 GPD
Proposed LTAR: 0.275 GPD/FT^2 (ICHD)
Proposed System Type: PPBPS
Proposed Repair System Type: PPBPS
Distribution: Low Pressure-CVB
Flow per Orifice: 0.59 GPM
Orifice Size: 3/16"
System Flow: 15.34 GPM / 15.34 GPM
Dosing Volume: 93.6 / 93.6 gallons
Pump Run Time: 6.1 minutes / 6.1 minutes
Elevation Head: 8.8' / 7.3'
Friction Head: 0.4' / 0.3'
Pressure Head: 2' / 2'
Total Dynamic Head: 11.2' / 9.6'
Supply Line Length: 70' of 2" PVC / 45' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 36" maximum
Proposed Trench Width: 24" (8' on center)

System 1

Line	Design Length	# of Panels	Actual Length	Elevation
White 1	35'	8	35'	4.0'
Pink 2	50'	12	50'	4.8'
Orange 3	25'	6	25'	5.5'

System 2

Line	Design Length	# of Panels	Actual Length	Elevation
Orange 4	20'	5	20'	5.5'
Blue 5	55'	13	57'	6.4'
Yellow 6	35'	8	37'	7.0'

System 1: 110'
Pump Tank: 7.8'
Benchmark: 4.8'

System 2: 110'
House Corner: 7.8'

Comments:
Dual alternating fields will be used.
Two bedroom PPBPS system @ 0.275 GPD/FT^2 = 146' of line X 75% = 110'

PLEASE NOTE:
THE SEPTIC AREA SHOULD BE FENCED OFF DURING CONSTRUCTION.
DISTURBANCE TO THIS AREA COULD CAUSE THE PERMIT TO BE VOIDED.

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

Sheet 1 of 1
PROPERTY ID #: 379-288463
COUNTY: Iredell

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

OWNER: Cornerstone Properties
ADDRESS: 116 East Keystone Ave
PROPOSED FACILITY: 2BR
PROPOSED DESIGN FLOW (.1949): 240 gpd
LOCATION OF SITE: 116 Shamrock School Rock
APPLICATION DATE: 12-7-2021
DATE EVALUATED:
PROPERTY SIZE: .24 Acre
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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	SS 4-5%	0-26 26-42 42-48	SBK GCL SBK C SBK CL	FR SSSPS mg	N/A	48+	N/A	N/A	PS .3
2	SS 4-5%	0-21 21-41 41-48	SBK GCL SBK C SBK CL		4/8 mottles @ 27"	48+	N/A	N/A	PS .275
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	110 -	110 -
System Type(s)	50%	50%
Site LTAR	.275	.275

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Bryan
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		
					MOIST	WET
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay) O (Organic)	0.4 - 0.1 None	0.2 - 0.05 None	VFR (Very Friable) FR (Friable) FI (Firm) VFI (Very Firm v. Very Sticky) EFI (Extremely Firm)	NS (Non-sticky) SS (Slightly Sticky) S (Sticky) VS (Very Sticky) 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)

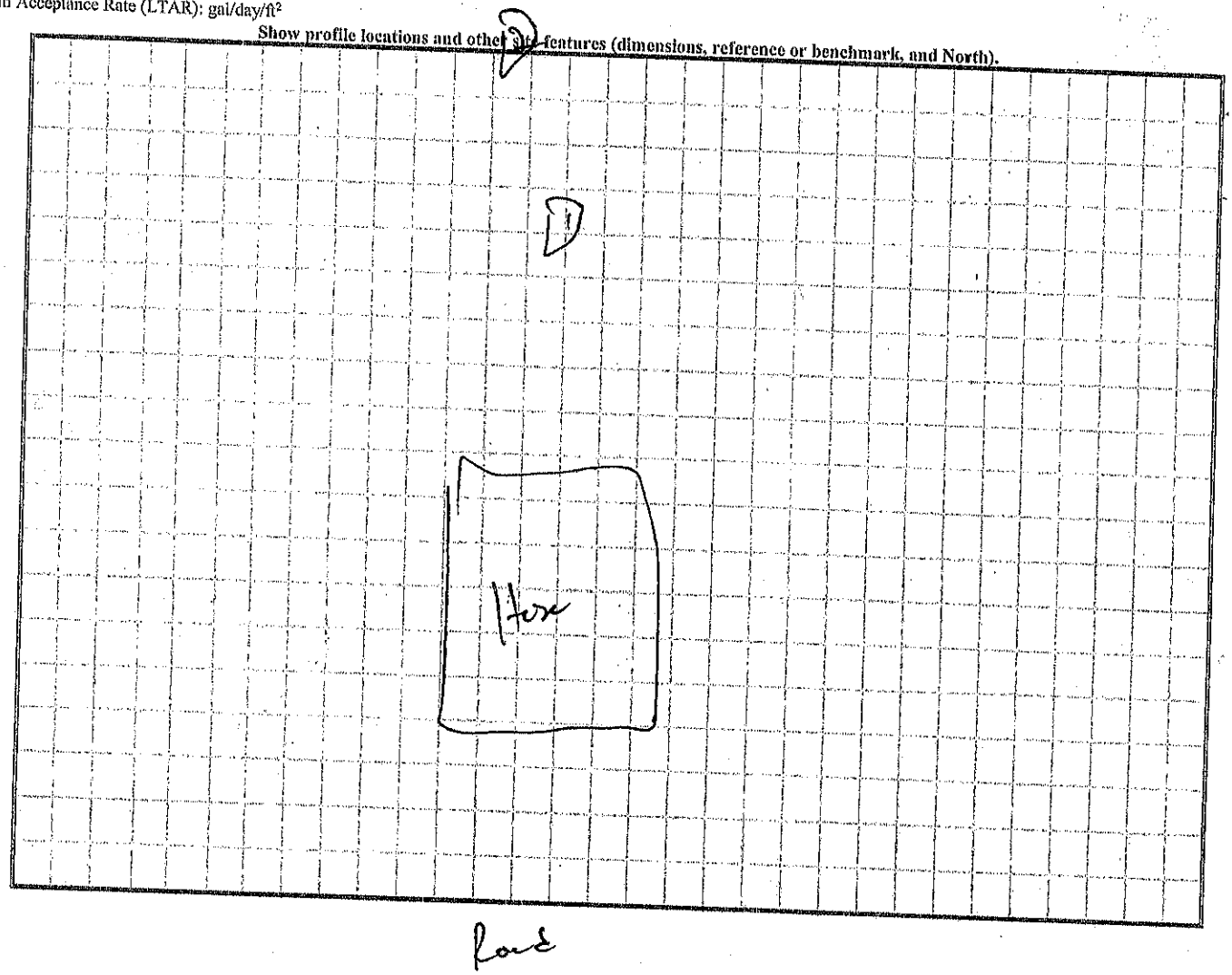
SOIL WETNESS — Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation

CLASSIFICATION — S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

Long-term Acceptance Rate (LTAR): gal/day/ft²

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



RECEIVED DEC 2 1 2020

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

Iredell County Health Department – Environmental Health Division

SEPTIC PAGE 1: *APPLICATION FORM* Paid $500.00

Application For: ( ) New Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (✓) Authorization to Construct ( ) Existing System Inspection ( ) Septic System Repair

THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED. APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS.

Page 2: *Site Plan Worksheet* form MUST accompany this application AP 311283

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: CORNERSTONE III PROPERTIES Address: 118 EAST KINGSTON AVE, CLT. Zip: 28203
Applicant Email: STAN@CORNERSTONEIIIP.COM Phone: 704 301 3229 Alt. Phone: X
Owner Name: BOILER RIVER DEVELP. Address: 725 CHERRY RD. Rock Hill, SC Zip: 29732
Owner Email: N/A Phone: N/A Alt. Phone: N/A

Property Information:

Street Address: 196 SHARON SCHOOL ROAD PIN# 3792-28-8463
Subdivision Name: N/A Section/Phase: _____ Lot Number: _____
Driving Directions: HICKORY HWY WEST / RT ONTO SHARON SCHOOL RD / SITE ON RIGHT

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: 6
( ) Swimming Pool
( ) Other Addition/Structure: _____

SWP 3/25/21

CHECK FOUNDATION TYPE
( ) Crawl Space Foundation
(✓) Concrete Slab Foundation
( ) Basement with Plumbing
( ) 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: 1 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?

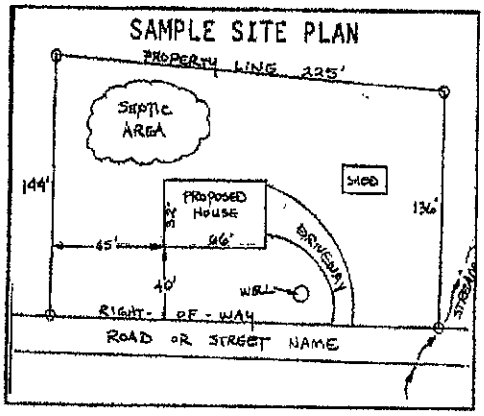
I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible 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: Stan Cowley 9/24/20
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE
12/7

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

SITE PLAN WORKSHEET

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



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

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

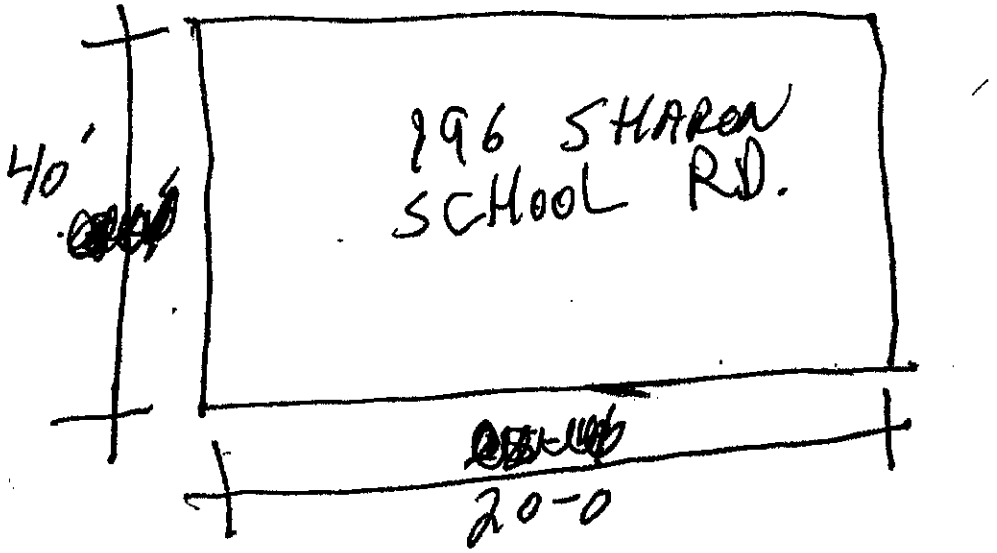
Circle N/A on the following if appropriate:

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

USE THIS SPACE TO DRAW YOUR SITE PLAN

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

(SEE ATTACHED SURVEY)



Signature: Stan Crawley

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

9/24/20

DATE 12/7/20

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

CURVE TABLE

CURVE	LENGTH	RADIUS	DELTA	CHORD	BEARING	DELTA

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, PAM HARDING/BULLER RIVER, am the legal owner(s) of the property located at 196 SHARON SCHOOL ROAD, identified as

PIN (Parcel Identification Number) 3792-28-8463 located in Iredell County, North Carolina.

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

Pam Harding/Buller River Dairy Farm
Signature of Owner(s)

12/7/20
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

Notice

* Property subject to any easements and right of way on record, and all NCDOT easements and rights of way.

* This survey is subject to any facts that may be disclosed by a full and accurate title search.

* This survey plat does not show any unrecorded, written or unwritten easements, dedications or other encumbrances. Such burdens could exist on this property and not appear on this plat. Accordingly, users of this plat are warned to remain alert for the existence of such unrecorded burdens not shown hereon.

* This plat was drawn for the exclusive use of the party named hereon. Said certificates do not extend to any unnamed person without an express recertification by the surveyor naming said person.

* This plat represents an actual field survey that meets or exceeds the minimum requirements of a Class C Survey in accordance with the Standards of Practice for Land Surveying in North Carolina according to North Carolina Administrative Code Title 21, Chapter 56, Section 1600.

* The ratio of precision before any adjustments is 1:29,445.

* Area determined by coordinate computations.

* No NGS or NCGS Horiz. Control Monument found within 2,000 feet of the site.

Witness this my original signature, registration number and seal this 21 day of OCT 2020 A.D.

Ted M. Benbow NC PLS L-3175
Firm License # C-1588

NORTH CAROLINA PROFESSIONAL SEAL L-3175 LAND SURVEYOR TED M. BENBOW

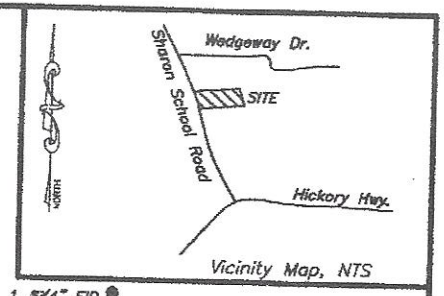
TED BENBOW Land Surveying
Proudly Surveying Iredell County Since 1989
630 SIGNAL HILL DRIVE EXT., STATESVILLE, NC 28625
PHONE (704) 878-9661
www.boundarydevelopment.com

Legend

CAPS ON MONUMENTS SET CONTAIN THE SURVEYORS NAME AND LICENSE NUMBER.

- EIP ..... EXISTING IRON PIPE AS SHOWN
- EIR ..... EXISTING IRON ROD AS SHOWN
- CP ..... COMPUTED POINT
- IRS ..... 1/2" IRON ROD SET WITH YELLOW CAP
- MNF ..... MAG NAIL FOUND
- ..... WATER METER
- ..... UTILITY POLE
- ..... ELECTRIC METER
- ..... LIGHT POLE
- EP ..... EDGE OF PAVEMENT
- R/W ..... RIGHT OF WAY
- PIN ..... PARCEL IDENTIFICATION NUMBER
- NTS ..... NOT TO SCALE
- ---- LINE NOT SURVEYED
- ——— LINE SURVEYED
- ——OE—— OVERHEAD UTILITIES
- ——x—— OLD WOVEN FENCE LINE

RELATIVE TO D.B. 2651, Pg. 2026



MNF Centerline Intersection of Sharon School Rd. and Wedgeway Dr.

S 31°59'33"E NTS 348.29' EP

Alberta B. Turner D.B. 832, Pg. 807

1 1/4" EIP

S 33°08'20"E 156.07' NTS

1/2" EIR

Fence is 4.05' West of Line

Fence is 1.45' South of Line

1 1/4" EIP

S 57°00'00"W 64.74'

N 32°41'41"W 151.02' NTS

1/2" EIR

Fence is 1.53' South of Line

1 1/4" EIP

Area 0.24 Acre

198 Sharon School Road

95

Gravel Drive

R/W

EP

OE

15" RCP

1 1/4" EIP is 1.92' North of Line

207.10' Total N 57°00'00"E

15.00

50.00 Building Envelope 50.00

20.00

195.22'

214.00' Total S 57°00'00"W

1/2" EIR

27.00

61.88

12" CMP

N 25°08'43"W 50.47'

18.78'

1 1/4" EIP

Old Fence Post 0.14 South of Line

Old Fence Post 0.30 South of Line

Tie Line N 25°03'51"W 150.91' NTS

2" EIP

60' R/W Sharon School Rd. No Recorded R/W Shown for Planning Purposes Found

196

J. Neal Wooten and wife Treva M. Wooten D.B. 334, Pg. 446

30 0 30 60 90

GRAPHIC SCALE – FEET 1" = 30'

Zoning

ZONING: RA (Iredell County)
Building Setback
Front – 35'
Side – 15'
Rear – 35'

Boundary Survey For:

Buller River Development Partners, LP

Shiloh Township, Iredell County, NC
Owners of Record: SECU*RE, Inc.
Deed Reference: D.B. 2670, Pg. 555
Plat Reference: P.B. 3, Pg. 127
PIN: 3792-28-8463
Job Number:2009149B.DWG (200110.CRD)
Field Work: 10-15-2020
Plat Date: 09-04-2020
Revised Plat Date: 10-21-2020 to Show Building Envelope

WELL ABANDONMENT RECORD

For Internal Use ONLY: Abernathy Farm PT 26

1. Well Contractor Information:

NEILL PARDUE

Well Contractor Name (or well owner personally abandoning well on his/her property)

2609A

NC Well Contractor Certification Number

AIR DRILLING INC

Company Name

2. Well Construction Permit #: 311283

List all applicable well construction permits (i.e. UIC, County, State, Variance, etc.) if known

3. Well use (check well use):

Water Supply Well:	
☐Agricultural	☐Municipal/Public
☐Geothermal (Heating/Cooling Supply)	■Residential Water Supply (single)
☐Industrial/Commercial	☐Residential Water Supply (shared)
☐Irrigation	
Non-Water Supply Well:	
☐Monitoring	☐Recovery
Injection Well:	
☐Aquifer Recharge	☐Groundwater Remediation
☐Aquifer Storage and Recovery	☐Salinity Barrier
☐Aquifer Test	☐Stormwater Drainage
☐Experimental Technology	☐Subsidence Control
☑Geothermal (Closed Loop)	☐Tracer
☐Geothermal (Heating/Cooling Return)	☐Other (explain under 7g)

4. Date well(s) abandoned: 4-21-2021

5a. Well location:

CORNERSTONE 3 PROPERTIES

Facility/Owner Name

Facility ID# (if applicable)

196 SHARON SCHOOL RD,STATESVILLE,N.C. 28677

Physical Address, City, and Zip

IREDELL

County

3792286463

Parcel Identification No. (PIN)

5b. Latitude and longitude in degrees/minutes/seconds or decimal degrees:
(if well field, one lat/long is sufficient)

35° 44.366 N 81° 24.478 W

CONSTRUCTION DETAILS OF WELL(S) BEING ABANDONED

Attach well construction record(s) if available. For multiple injection or non-water supply wells ONLY with the same construction/abandonment, you can submit one form.

6a. Well ID#: 311283

6b. Total well depth: 19 (ft.)

6c. Borehole diameter: 24 (in.)

6d. Water level below ground surface: _____ (ft.)

6e. Outer casing length (if known): _____ (ft.)

6f. Inner casing/tubing length (if known): _____ (ft.)

6g. Screen length (if known): _____ (ft.)

WELL ABANDONMENT DETAILS

7a. For Geoprobe/DPT or Closed-Loop Geothermal Wells having the same well construction/depth, only 1 GW-30 is needed. Indicate TOTAL NUMBER of wells abandoned: _____

7b. Approximate volume of water remaining in well(s): _____ (gal.)

FOR WATER SUPPLY WELLS ONLY:

7c. Type of disinfectant used: _____

7d. Amount of disinfectant used: _____

7e. Sealing materials used (check all that apply):

☐ Neat Cement Grout	☐ Bentonite Chips or Pellets
☐ Sand Cement Grout	☐ Dry Clay
■ Concrete Grout	☐ Drill Cuttings
☐ Specialty Grout	☐ Gravel
☐ Bentonite Slurry	☐ Other (explain under 7g)

7f. For each material selected above, provide amount of materials used:

2 YARDS CONCRETE GROUT

7g. Provide a brief description of the abandonment procedure:

2 YARDS CONCRETE GROUT

8. Certification:

Neill Pardue 4-21-21

Signature of Certified Well Contractor or Well Owner Date

By signing this form, I hereby certify that the well(s) was (were) abandoned in accordance with 15A NCAC 02C .0100 or 2C .0200 Well Construction Standards and that a copy of this record has been provided to the well owner.

9. Site diagram or additional well details:
You may use the back of this page to provide additional well site details or well abandonment details. You may also attach additional pages if necessary.

SUBMITTAL INSTRUCTIONS

10a. For All Wells: Submit this form within 30 days of completion of well abandonment to the following:

Division of Water Resources, Information Processing Unit,
1617 Mail Service Center, Raleigh, NC 27699-1617

10b. For Injection Wells: In addition to sending the form to the address in 10a above, also submit one copy of this form within 30 days of completion of well abandonment to the following:

Division of Water Resources, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

10c. For Water Supply & Injection Wells: In addition to sending the form to the address(es) above, also submit one copy of this form within 30 days of completion of well abandonment to the county health department of the county where abandoned.

* 196 SHARON SCHOOL RD. N

FIRST FLOOR NOTES:

- FULL 4" OR 6" EXTERIOR WALL WERE USED IN DETERMINING DIMENSIONS ON PLANS.
- FRAMERS SHALL START ALL WALL LAYOUTS FROM THE REAR OF THE HOUSE
- ALL ANGLED WALL ARE 45 DEGREES OR 90 DEGREES UNLESS NOTED OTHERWISE)
- ALL OVERALL DIMENSIONS SHALL BE FROM OUT TO OUT OF FRAMING. INTERIOR DIMENSIONS SHALL BE FROM ONE SIDE OF STUD
- ALL INTERIOR DOORS ARE 4" FROM WALL UNLESS NOTED OTHERWISE
- WHEN HOUSE IS REVERSED, WASHER AND DRYER HOOKUPS TO REMAIN ORIENTED WITH WASHER ON LEFT AND DRYER ON RIGHT
- MASTER MOUNTS SHALL BE PLACED ON ALL EXTERIOR LIGHTS AND HOSE BIBBS.
- FRAMED CAVITY WALLS (E. TUBS, SHOWERS, STAIRS & FIREPLACES) SHALL BE INSULATED WITH AIR BARRIER PER ENERGY CODE
- ANY WINDOW W/ A SILL 18" LESS THAN 24" AFF OR EQUAL TO OR GREATER THAN 72" BFF. MUST HAVE WOOD & MAY BE SUBJECT TO FALL PROTECT RULE.
- ALL SHEETROCK OPENING SHALL BE 12" BELOW CEILING TYP, U.N.O.
- ALL PANTRY/LINEN SHALL HAVE (5) 12" SHELVES TYP, U.N.O.

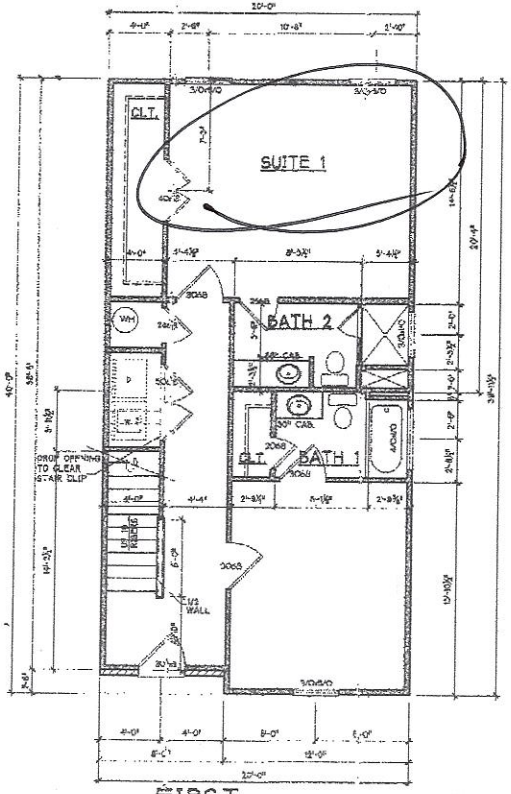
SECOND FLOOR NOTES:

- FULL 4" OR 6" EXTERIOR WALL WERE USED IN DETERMINING DIMENSIONS ON PLANS.
- FRAMERS SHALL START ALL WALL LAYOUTS FROM THE REAR OF THE HOUSE
- ALL ANGLED WALL ARE 45 DEGREES OR 90 DEGREES UNLESS NOTED OTHERWISE)
- ALL INTERIOR DOORS ARE 4" FROM WALL UNLESS NOTED OTHERWISE)
- ALL WINDOW HEADER HEIGHTS ARE TO BE RAISED TO 7'-0" WITH A BOARDED ROOF 1" STEP UP.
- PROVIDE ATTIC ACCESS TO ALL ATTIC SPACES ACCORDING TO CODE.
- ALL OVERALL DIMENSIONS & ALL BE FROM OUT TO OUT OF FRAMING, INTERIOR DIMENSIONS SHALL BE FROM ONE SIDE OF STUD
- WHEN HOUSE IS REVERSED, WASHER AND DRYER HOOKUPS TO REMAIN ORIENTED WITH WASHER ON LEFT AND DRYER ON RIGHT
- FRAMED CAVITY WALLS (E. TUBS, SHOWERS, STAIRS & FIREPLACES) SHALL BE INSULATED WITH AIR BARRIER PER ENERGY CODE

ANY WINDOW W/ A SILL OF LESS THAN 24" AFF. MUST HAVE WOOD & MAY BE SUBJECT TO FALL PROTECT RULE.

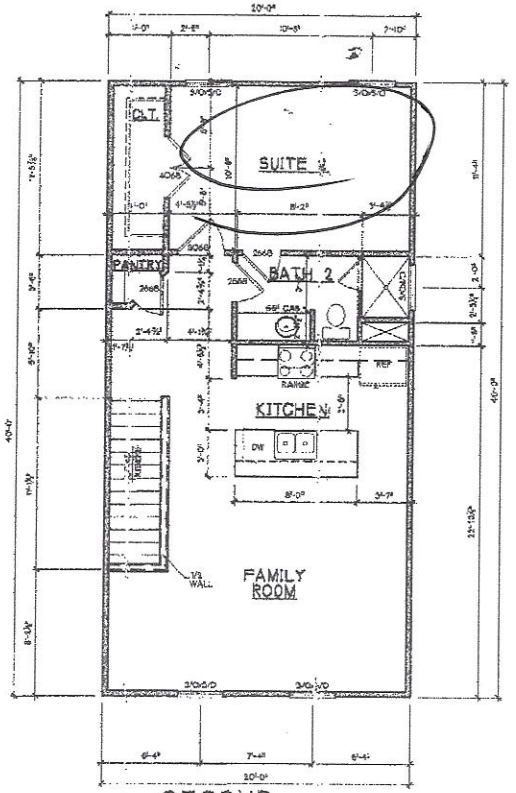
SQUARE FOOTAGE:

1ST FLR:	791 SQ FT
2ND FLR	760 SQ FT
TOTAL HEATED:	1551 SQ FT
TOTAL UNDER ROOF:	1551 SQ FT



1/4.0 FIRST FLOOR PLAN

20'



40'

2/4.0 SECOND FLOOR PLAN

Acknowledgement Of Plans Submittal ONLY!

Date 3.25.2020

Date 3/25/20

CORNERSTONE III PROPERTIES
4509 FAITH CHURCH RD
INDIAN TRAIL, NC 28079
(704) 577 - 4002

PROJECT TITLE
GREENLEAF PLAN

PROJECT NUMBER
ISSUE DATE

DRAWING DATA
DRAWN BY: CORNERSTONE III
CHECKED BY: STAN PRESLEY
FILE NUMBER:

SHEET TITLE
1ST & 2ND FLOOR PLAN

SHEET NUMBER
4.0A

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

APPLICATION NUMBER
311283 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
3792288463.000	196 SHARON SCHOOL RD	Iredell County

Owner Information	Applicant Information
Name: BULLER RIVER DEV PARTNERS LP	Name: CORNERSTONE III PROPERTIES
Address:	Address: 118 E KINGSTON AVE
	CHARLOTTE, NC 28203
Phone:	Phone: (704)301-3229

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.0.24	35	35	15	15	WSIV-PA Catawba/Lake Norman	NO

Remarks
SFD SEE NOTES

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: 09/25/2020

Permit Number	311283

TOTAL FEES:	$77.25