ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP322684

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

PIN # 4705 -- 85 -- 8885

APPLICANT/OWNER: Cornerstone III Properties APPLICANT ADDRESS: 234 Kinsley Park

SITE ADDRESS: 111 Peridot Drive; Statesville 28625 PHONE: 704-301-3229 ALT. PHONE

SITE DIRECTIONS: Clifford Farm Rd North Rt on 21 Green SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Stone Edge SECTION: - LOT # 35 LOT AREA: .823 Ac DESIGN FLOW: 360 L.T.A.R.: .30

Septic Tank 1000 (gal)	STB 760	Date 9-15-2024	☒ New System ☐ Repair ☐ Expansion System Type: I II (III) IV V VI		☒ Residence	No. Bedrooms 3	**Water Supply**
Pump Tank 1000 (gal)	PT 363	Date 10-4-2024	System Description: Pump to Serial - High Capacity		☒ Business	No. Persons 6	☐ Private
Pump Make	Model	Serial #	Repair System Description: Pump to Serial - High Capacity		☐ Other	No. Employees	☒ Public
# Nitrification Fields 1	# Lines 5	Linear Ft 300	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☐ Crawl Space	☐ Community
Trench Width 36in	Trench Bottom Depth ~~(Lowside)~~ 36in	Gravel Depth	☐ GRAVITY ☒ PRESSURE		☐ Basement w/plumbing		☐ Basement w/o plumbing

Comments / Conditions: * NO Foundation Drain allowed in front of House.

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11 . (C) of S.L. 2018-114 using the signed and sealed LSS Evaluation by:

Dan Horizon

LSS # 1347 Dated 10/17/2024

updated floor plan & site plan approved 12/4/24 D.mebane

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.

NO PAVED SIDEWALK
- TANKS
- TOP 3 LINES
- SUPPLY LINE
- D-BOX
- Last 2 Lines - STH 1/16
- PH - Alarm } STH 2/11/25
- Floats

* Electrical did not pass 1/14/25 MW

* Needs electrical & landscape final for sidewalk - STH 2/11/25

2/24/25 Needs riser, verify tanks depth

2/25/25 Pump tank 36" deep, ST 25" DM

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: Date: 6-3-22 Installed by: GALLE EXCAVATION

IMPROVEMENT PERMIT by: Date: 10-16-24 OPERATION PERMIT by: D.mebane Date: 2/25/25

AUTHORIZATION TO CONSTRUCT by: 5-18-2022 System Inspected by: Date:

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

ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP322684

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

PIN # 4705 -- 85 -- 8885

APPLICANT/OWNER: Cornerstone III Properties APPLICANT ADDRESS: 234 Kingsley Park

SITE ADDRESS: 111 Peridot Drive; Statesville 28625 PHONE: 704-301-3229 ALT. PHONE

SITE DIRECTIONS: Clifford Farm Rd North Rt on 2nd on

SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Stone Edge SECTION: - LOT # 35 LOT AREA: .823 AC DESIGN FLOW: 360 L.T.A.R.: .30

Septic Tank	1000 (gal)	STB	760	Date	9-15-2021	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI
Pump Tank	1000 (gal)	PT	363	Date	10-4-2021	System Description:	Pump to Serial - High Capacity		
Pump Make		Model		Serial #		Repair System Description:	Pump to Serial - High Capacity		
# Nitrification Fields	1	# Lines	5	Linear Ft	300	Maintenance Agreement Required:	☐ YES	☒ NO	
Trench Width	36in	Trench Bottom Depth ~~(Lowest)~~	36in	Gravel Depth			☐ GRAVITY	☒ PRESSURE	

☒ Residence No. Bedrooms 3
☒ Business No. Persons 6
☐ Other No. Employees
☐ Slab ☐ Crawl Space
☐ Basement w/plumbing

Water Supply
☐ Private
☒ Public
☐ Community
☐ Basement w/o plumbing

Comments / Conditions: * No Foundation Drain allowed in front of House.

INITIAL SITE SKETCH

This permit is issued pursuant to Section 11 . (C) of S.L. 2018-114 using the signed and sealed LSS Evaluation by:

Dan Horizon

LSS # 1347 Dated 10/17/2021

updated floor plan & site plan approved 6/4/24 D. Mebay

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.

NO PAVED SIDEWALK
- TANKS
- TOP 3 LINES
- SUPPLY LINE
- D-BOX
- Last 2 Lines - SH 11/6
- PH - Alarm } SH 2/11/25
- Floats

* Electrical did not pass 1/14/25 MW

* Needs electrical & landscape final for sidewalk - SH 2/11/25

DW 2-24-2025 - ELECTRICAL GOOD
- NEEDS RISER
- VERIFY TANKS ARE LESS THAN 36" DEEP

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**

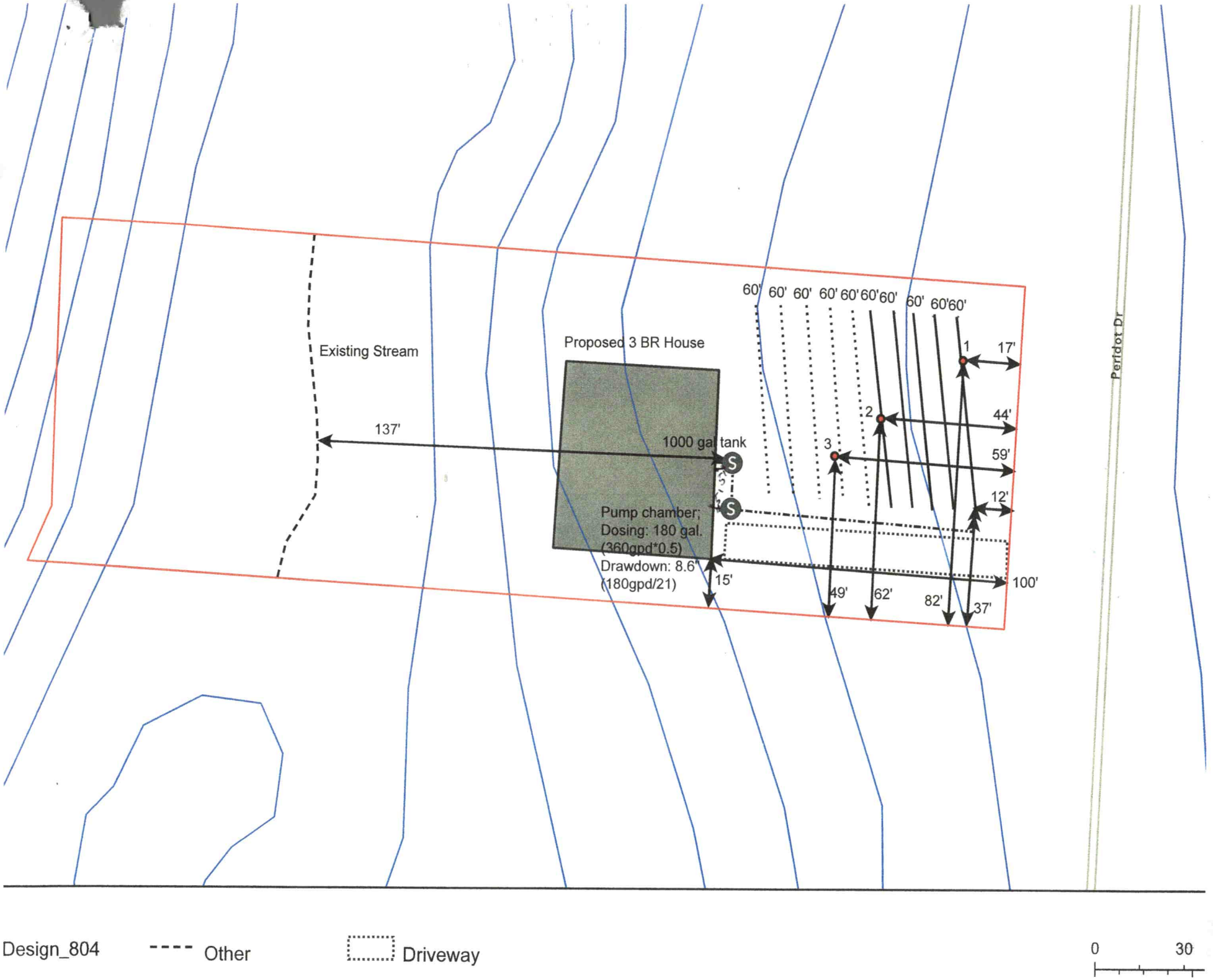
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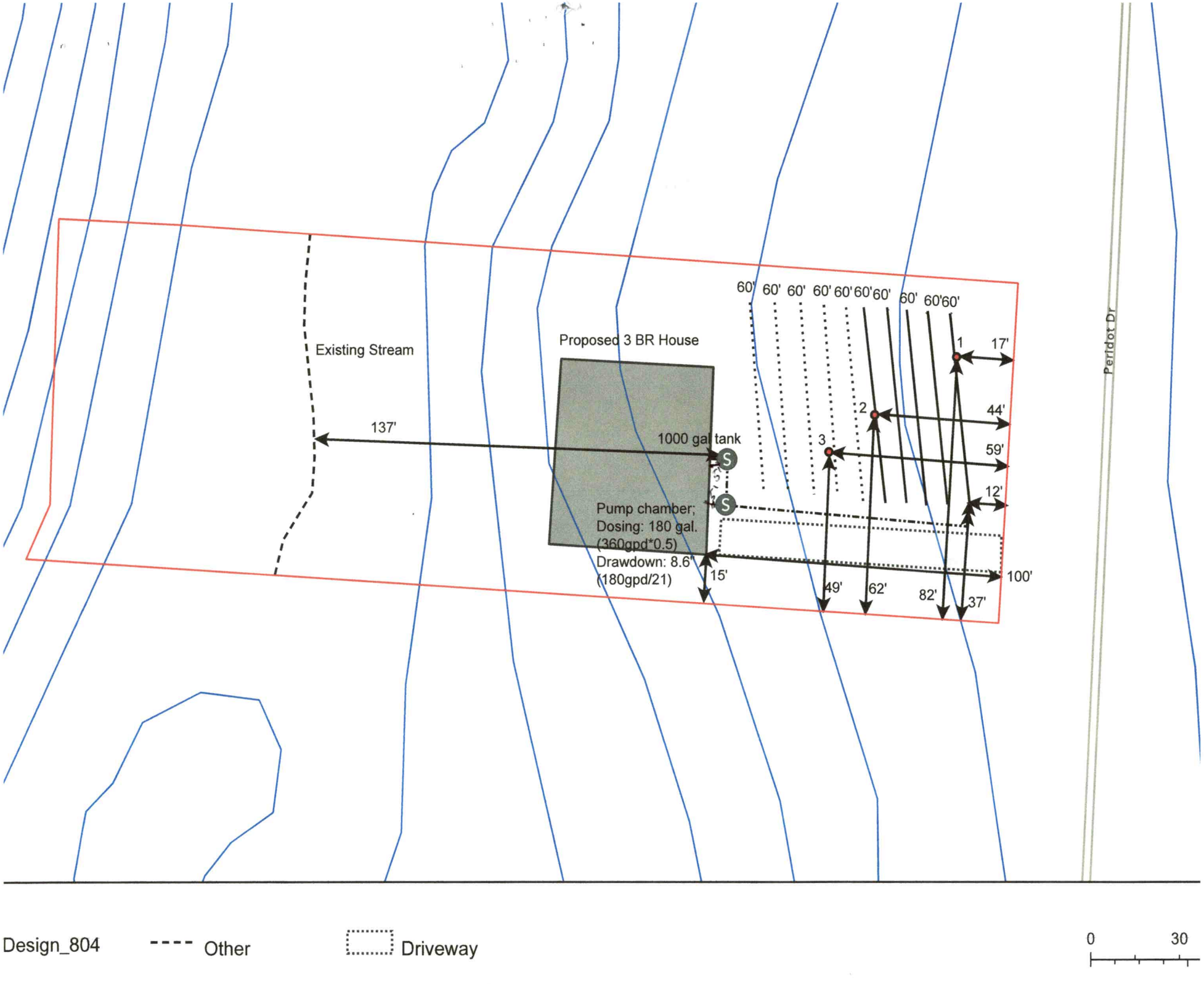
Owner / Applicant Signature: Date: 6-3-22 Installed by: GALLE EXCAVATION

IMPROVEMENT PERMIT by: Date: 10-16-21 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: 10-18-21 System Inspected by: Date:

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


Existing Stream
Proposed 3 BR House
137'
1000 gal tank
Pump chamber;
Dosing: 180 gal.
(360gpd*0.5)
Drawdown: 8.6"
(180gpd/21)
60' 60' 60' 60' 60' 60' 60' 60' 60' 60'
1
17'
2
44'
3
59'
12'
15'
49'
62'
82'
37'
100'
Peridot Dr
Design_804
Other
Driveway
0
30


Existing Stream
Proposed 3 BR House
137'
1000 gal tank
Pump chamber;
Dosing: 180 gal.
(360gpd*0.5)
Drawdown: 8.6"
(180gpd/21)
15'
60' 60' 60' 60' 60' 60' 60' 60' 60' 60'
1
17'
2
44'
3
59'
12'
100'
49'
62'
82'
37'
Peridot Dr
Design_804
Other
Driveway
0
30

Cornerstone III Properties

234 Kingsley Park
Suite 110
Fort Mill, SC 29715
704-301-3229
Stan@cornerstone3p.com

Date 10/17/21

Stone's Edge - 111 Peridot Drive, 124 Titanium Drive, 205 Titanium Drive

Please note: The LSS Evaluation attached to this application is to be used to produce design and construction features for permitting in accordance with SL 2018-114 Section 11(C)

Regards

Stan W. Pressley

Stan Pressley / Cornerstone III Properties

CORNERSTONE III
PROPERTIES



SOIL REPORT

Pressley - 111 Peridot Drive

October 17, 2021

Prepared By:
Tyler Sgro, L.P.S.C. #119, South Carolina
Davis Horizons
843-754-6307
tyler@davishorizons.com

LICENSED SOIL SCIENTIST
TYLER SGRO
1347
STATE OF NORTH CAROLINA

DAVIS HORIZONS
SOIL • ENVIRONMENTAL • GIS

Site Location and Characteristics

The project site is located at 111 Peridot Dr in Iredell County, North Carolina, identified by Tax ID number 4705858885.000. Data was recorded on October 11, 2021, utilizing a soil auger. Elevation data recorded at these locations shows elevations ranging no more than 36 inches between sample points.

Soil Sampling Methodology

In order to measure site elevations, a Trimble R10-2 external GNSS receiver was used to measure elevations at each soil boring location. Fixed real-time kinematic (RTK) positioning was obtained in order to maximize data accuracy. Elevation error was measured to not exceed 1 inch, based on data provided from the GNSS receiver. Orthometric elevation data was recorded at each data point and recorded on the subsequent data sheet. Elevation ranges between the soil borings were obtained by computing the difference between elevation points. In total, 3 data points were recorded for the purposes of finalizing the footprint of the proposed drainfield and associated repair area.

Applicable Regulations

Recorded soil documentation, included suitability considerations, were observed based on criteria found in the North Carolina Administrative Code, Subchapter 18A, Section 1900, titled "Sewage Treatment and Disposal Systems." Soil conditions such as soil texture, soil structure, soil consistency, soil mineralogy, soil color, soil wetness, observed soil depth, saprolite class, restrictive horizon presence, and subsequent loading rates were identified in accordance with this Section.

This report and subsequent design are being submitted for review under North Carolina Session Law 2018-114 (HB374). As such, the following required statement is included to meet the requirement of the law: **"The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c)."**

Design Criteria and Recommendations

Soil wetness conditions were observed at a depth of >50 inches. No restrictive horizon was observed in the soil profile. A minimum of a twelve inch separation between soil wetness/restrictive horizons and trench bottoms must be maintained. Horizons with more than trace amounts of organic carbon content existed to maximum depths of 4 inches. The aforementioned soil horizons with more than trace amounts of soil organic carbon do not need to be removed. However, the root mat should be removed prior to adding fill material if required.

A long-term acceptance rate (LTAR) of 0.3 gallons per day (GPD)/square foot (SF) will be utilized for the loading rate[2]. At the completion of the construction of the drain field/disposal area, the fill material over this area will be immediately seeded and protected with straw or mulch or sodded to establish a permanent vegetative cover. Any concerns regarding surface water flow and/or improvement of subsurface drainage conditions should be taken into account by the installer prior to system installation. If questions regarding the final drainage plan arise, this office should be notified for consultation prior to the initiation of work.

Based on the observed soil conditions and applicable regulations, it was determined that a IIIb. Septic System with a Single Effluent Pump would be applicable for this site. Based on an expected flow rate of 360 gpd, the minimum linear footage required for the system is 400 total linear feet. However, the proposed design intends to incorporate the usage of alternative aggregate product. As such, the aforementioned required total linear footage will be reduced by 25%. Lastly it will be required that a licensed septic installer authorized by Infiltrator complete the installation of this system.

The proposed system will utilize 3-foot wide trenches will utilize 14-inch Infiltrator High Capacity chambers. The system should be installed at a maximum depth of 36 inches for each drainline using serial distribution. The system should be installed level and along the contour lines, as referenced in the associated site plan included with this report. For the repair area, any future repairs would constitute a system design comprised of 14-inch Infiltrator High Capacity chambers. In addition, maximum installation depth would not exceed 36 inches, as referenced by soil data at DP-5. Repair lines would be installed level and along contour lines, as referenced in the associated site plan included with this report. Serial distribution would be utilized for any future repair. The total linear footage needed for a future repair would be equal to the length of the proposed drainfield.

Soil Classification & Site Suitability

The soils in this area formed from metamorphic rock typical of the Piedmont and in relation to the site's geomorphic position on the landscape. Thus, the soil conditions reflect drainage characteristics typical of soils of the mapped series below. This soil classification was based on the observed soil morphology in the excavated soil profile. Descriptions to further depths are not necessary to make interpretations for onsite wastewater disposal systems. The soil observations provided in this report and the below classification are derived by soil conditions in the observed sampled locations/area only. It should be noted that the below classification does not take into account any inclusions that might exist with the sampled area. Based on the recorded soil data, related soil classification below, and applicable suitability parameters listed in Section .1900, it is recommended that this site be considered **Provisionally Suitable (PS)** for the placement of the engineered designed septic system.

Similar to soils of the Fairview series: Fine, Kaolinitic, Mesic Typic Kanhapludults

Other Considerations



Adherence to Report:

The depth to the soil wetness conditions, restrictive horizon(s), trench bottom separation, LTAR, and the land preparation prescriptions outlined in this report are site condition minimums that must be adhered to in the design and installation of an onsite wastewater disposal system. Any expenses incurred due to deviations from the soil prescriptions outlined in this report that result in system malfunctions or repairs will be the liability of the responsible party completing the onsite installation and/or grading work.



Notification Regarding Wetlands:

It is the responsibility of the landowner and/or equipment operators to avoid regulated impacts to waters of the United States (WOTUS), including wetlands. Should any part of the proposed onsite wastewater system be located in WOTUS, including wetlands, approval from the appropriate State and/or Federal agency [i.e., US Army Corps of Engineers, NC Div. of Coastal Management, etc.] must accompany the application for an engineered onsite wastewater system. It is recommended that the landowner and/or equipment operators contact the applicable State and/or Federal agencies prior to initiating site work in order to avoid regulated impacts to WOTUS, including wetlands.



Footnotes:

1. Fill material must be inspected and approved by Tyler Sgro prior to placement of material and system installation, if required.

2. Long-term acceptance rates (LTAR) are **estimated** using calculations provided in Rules .1901 - .1968 of Title 15A Subchapter 18A of the North Carolina Administrative Code (T15A.18A .1901 - .1968). The long-term acceptance rate is based on the most hydraulically limiting naturally occurring soil texture from the ground surface to 12 inches below the bottom of the proposed absorption trenches/disposal tubing. Estimates on the acceptance rates are based on soil texture and other applicable soil morphology.

DAVIS HORIZONS

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

PROPERTY ID #: 4705858885.000
PROJECT NAME: Pressley - 111 Peridot Drive
COUNTY: Iredell

OWNER: Stone Edge Inc
ADDRESS: 111 Peridot Dr
PROPOSED FACILITY: Dwelling
SITE LOCATION: 111 Peridot Dr
WATER SUPPLY: ☐ Private ☑ Public ☐ Well ☐ Spring ☐ Other:
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut

PROPOSED DESIGN FLOW (.1949): 360 gpd

APPLICATION DATE:
DATE EVALUATED: October 11, 2021
PROPERTY SIZE (in acres): 0.825
PROPERTY RECORDED:
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %/MEASURED ELEVATIONS (in ft.)	SOIL HORIZONATION	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS					
				.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL COLOR	.1942 SOIL WETNESS (CONCENTRATIONS) (DEPLETIONS)	.1943 SOIL DEPTH	.1956 SAPROLITE CLASS	.1944 RESTRICTIVE HORIZON	PROFILE CLASS & LTAR
1	Convex Slope / 5-10% / 899.621560324193 ft.	A	0-4	GR / SL	FR / SEXP	5yr 5/4		50"+	/	/	0.3 / PS
1	Convex Slope / 5-10% / 899.621560324193 ft.	Bt1	4-12	SBK / SCL	FR / SEXP	5yr 5/8		50"+	/	/	0.3 / PS
1	Convex Slope / 5-10% / 899.621560324193 ft.	Bt2	12-24	SBK / SC	FI / SEXP	5yr 5/8		50"+	/	/	0.3 / PS
1	Convex Slope / 5-10% / 899.621560324193 ft.	BC	24-50	SBK / SCL	FI / SEXP	5yr 5/8, 7.5yr 6/8		50"+	/	/	0.3 / PS
2	Convex Slope / 5-10% / 897.961458657543 ft.	A	0-3	GR / SL	FR / SEXP	5yr 4/4		50"+	/	/	0.3 / PS
2	Convex Slope / 5-10% / 897.961458657543 ft.	Bt1	3-8	GR / SCL	FR / SEXP	5yr 5/8		50"+	/	/	0.3 / PS
2	Convex Slope / 5-10% / 897.961458657543 ft.	Bt2	8-23	GR / SC	FI / SEXP	5yr 5/8		50"+	/	/	0.3 / PS
2	Convex Slope / 5-10% / 897.961458657543 ft.	BC	23-50	SBK / SCL	FI / SEXP	5yr 5/8		50"+	/	/	0.3 / PS
3	Convex Slope / 5-10% / 896.619597824224 ft.	A	0-4	GR / SL	FR / SEXP	5yr 5/4		18"	18 / PS	/	0.3 / PS
3	Convex Slope / 5-10% / 896.619597824224 ft.	Bt	4-18	SBK / SCL	FI / SEXP	5yr 5/8		18"	18 / PS	/	0.3 / PS
3	Convex Slope / 5-10% / 896.619597824224 ft.	C	18-50	GR / SL	FR / SEXP	5yr 5/8, 6/8		18"	18 / PS	/	0.3 / PS

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM	Other Factors (.1946):	
Available Space (.1945)	yes	yes	Site Classification (.1948):	Provisionally Suitable (PS)
System Type(s)	IIIb. Septic System with a Single Effluent Pump	IIIb. Septic System with a Single Effluent Pump	Evaluated By:	Tyler Sgro, LSS # 1347
Site LTAR	0.3	0.3	Others Present:	
Comments: site densely vegetated				

NOTICE

- ☐ ALL DISTANCES ARE HORIZONTAL GROUND IN U.S. SURVEY FEET UNLESS OTHERWISE SHOWN.
- ☐ BEARINGS BASED ON NAD83/11, VERTICAL ELEVATIONS BASED NAVD88.
- ☐ REFERENCES: PB 38 PG 126
- ☐ SURVEYOR HAS MADE NO INVESTIGATION OR INDEPENDENT SEARCH FOR EASEMENTS OF RECORD, ENCUMBRANCES, RESTRICTIVE COVENANTS, OWNERSHIP, TITLE EVIDENCE, OR ANY OTHER FACTS THAT AN ACCURATE AND CURRENT TITLE SEARCH MAY DISCLOSE.
- ☐ UNDERGROUND UTILITIES ARE SHOWN ONLY WHERE ABOVEGROUND SERVICES WERE VISIBLE.
- ☐ SUBSURFACE AND ENVIRONMENTAL CONDITIONS WERE NOT EXAMINED OR CONSIDERED AS A PART OF THIS SURVEY. NO STATEMENT IS MADE CONCERNING THE EXISTENCE OF UNDERGROUND OR OVERHEAD CONTAINERS OR FACILITIES THAT MAY AFFECT THE USE OR DEVELOPMENT OF THIS TRACT.
- ☐ THE EXISTENCE OR NONEXISTENCE OF WETLANDS ON SUBJECT PROPERTY HAS NOT BEEN DETERMINED BY THIS SURVEY.
- ☐ SUBJECT TO ALL EASEMENTS, RIGHT OF WAYS, AND OR ENCUMBRANCES THAT MAY EFFECT THIS PROPERTY.
- ☐ THIS PLAT WAS DRAWN FOR THE EXCLUSIVE USE OF PARTY NAMED HEREON. SAID CERTIFICATES DO NOT EXTEND TO ANY UNNAMED PERSON WITHOUT AN EXPRESS REFORTIFICATION 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.

I CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION (DEED DESCRIPTION RECORDED IN DEED BOOK AS SHOWN); THAT THE BOUNDARIES NOT SURVEYED ARE INDICATED AS DASHED LINES; THAT THE RATIO OF PRECISION OR POSITIONAL ACCURACY IS 1:10,000; AND THAT THIS MAP MEETS THE REQUIREMENTS OF THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA (21 NCAC 56.1600).

THIS 23RD DAY OF SEPTEMBER, 2021

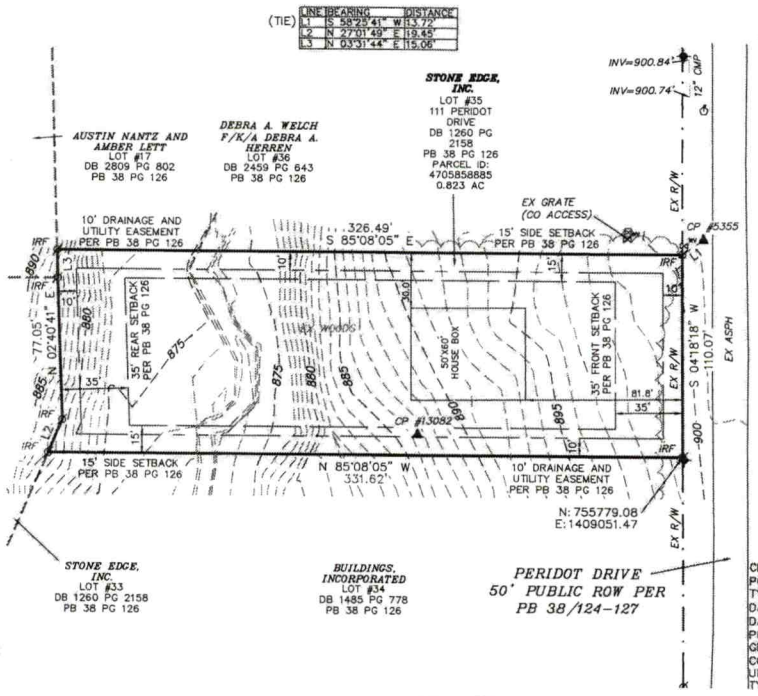
Tim Vangelder

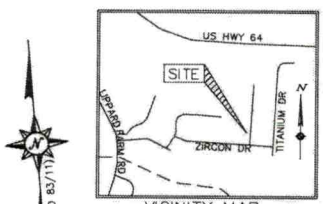
TIM VAN GELDER L-3660
PROFESSIONAL LAND SURVEYOR

NORTH CAROLINA PROFESSIONAL SEAL L-3660 LAND SURVEYOR TIM VAN GELDER

CONTROL POINT #5355
NORTH CAROLINA 3200 (NAD83/11)
N: 755,896.02
E: 1,409,071.42
ELEV: 901.21' (NAVD88)

CONTROL POINT #13082
NORTH CAROLINA 3200 (NAD83/11)
N: 755,802.20
E: 1,408,914.37
ELEV: 886.81' (NAVD88)





VICINITY MAP
NOT TO SCALE

NC GRID (NAD 83/11)

LEGEND

- IRON ROD FND
- IRON ROD SET
- NAIL SET
- MAILBOX
- CLEAN OUT
- WATER VALVE
- POWER POLE
- BOUNDARY LINE
- ADJOINER LINE
- EASEMENT
- SETBACK
- RIGHT-OF-WAY
- EDGE OF PAVEMENT
- STORM PIPE
- EX WOODED AREA

CLASS OF SURVEY: AA
POSITIONAL ACCURACY: 0.1'(HORIZONTAL), 0.1'(VERTICAL)
TYPE OF GPS FIELD PROCEDURE: VRS
DATES OF SURVEY: 06/15/21
DATUM/EPOCH: NAD83/2011 NORTH CAROLINA 3200
PUBLISHED/FIXED CONTROL USE: FIXED CONTROL
GEOID MODEL: GEOID 12B
COMBINED GRID FACTOR: 0.999882003 (CP #5355)
UNITS: US SURVEY FEET
TYPE AND MODEL OF GPS RECEIVER USED: TRIMBLE R8

50 0 50 100
GRAPHIC SCALE (IN FEET)
1 inch = 50 ft.

LOT SURVEY FOR: **BULLER RIVER DEVELOPMENT PARTNERS, LP**

STONES EDGE
LOT #35
CONCORD TOWNSHIP IREDELL COUNTY, NC

SCALE: 1" = 50' DATE: 09/23/2021
PLS TVG
TECH ACG
CHKED WEH

McKIM&CREED
8030 TOWER POINT DRIVE
CHARLOTTE, NORTH CAROLINA 28227
TELEPHONE: (704) 841-2588
FAX: (704) 841-2567
NORTH CAROLINA FIRM LICENSE NUMBER: F-1222

JOB NO. 083450001
SHEET NO. 1 OF 1

9

ALL

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

BB

(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)

S.L w/ac

1. APPLICATION FOR: ___Improvement Permit **✓** Authorization To Construct ___ Existing System Inspection

AP-322684 $500.00

2. 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 check ( ) beside whichever is submitted if applicable ___Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Cornerstone III Properties	234 Kingsley Park Suite 110	X	704 301 3229
Applicant Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**
Stone Edge Inc	234 Kingsley Park	X	704 301 3229
Owner Name	**Mailing Address**	**Home Phone #**	**Alternate Phone #**

4. Property Information:

111 Peridot Drive	Stone Edge		
Street Address	**Subdivision Name**		**Section/Phase and Lot Number**

Driving Directions: Lippard Farm Rd. North / Rt on Zircon Drive

turn left on Peridot Drive; lot on left

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System due to _____
( ) Other _____

Maximum Number of Bedrooms 3
Maximum Number of Occupants 3
If Expansion, Current Number of Bedrooms ___

(✓) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development: X

Type of Business
Square Footage of Building
Maximum Number of Employees
Maximum Number of Seats

6. Proposed Water Supply:

( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water (✓) Other Public Water County

7. Desired Septic System Type: *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed ____ Year

(✓) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other_____

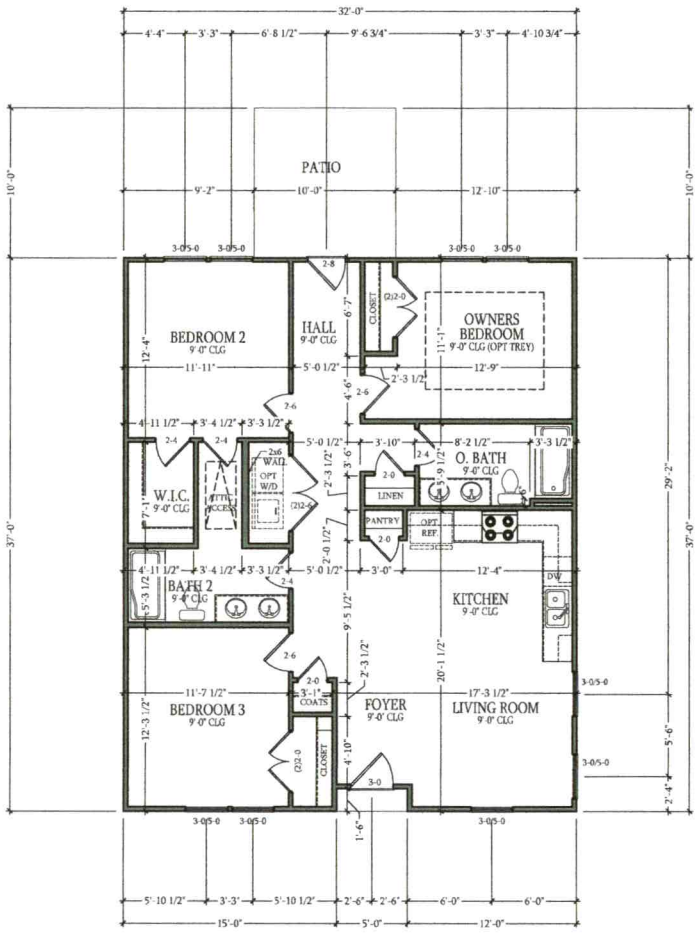
8. Please Answer The Following To The Best of Your Ability: ( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes ( ) No Is the site subject to approval by any other public agency?

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.

9. Signature: Stan W. Pruitt
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

9/7/21
DATE

APPROVED JUN 05 2024



FIRST FLOOR
PLAN

SCALE: 1/4"=1'-0" ON 22x34 AND 1/8"=1'-0" ON 11x17

CORNERSTONE BUILDERS GROUP
DESIGN-BUILD-RENOVATE
PO Box 5322
Clover, SC. 29710
P. 919-630-6919 P. 704-201-8489
www.CornerstoneCarolina.com

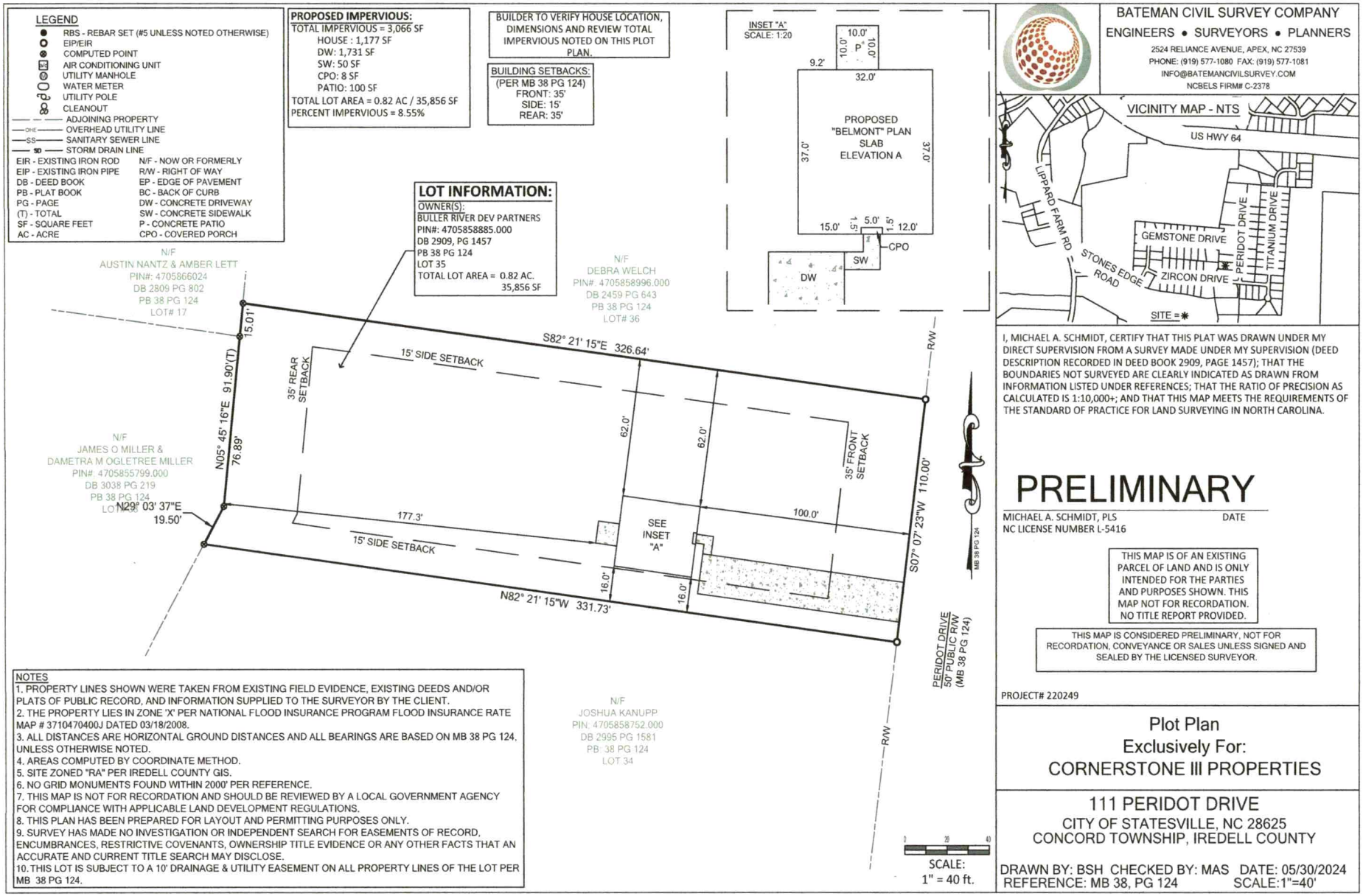
CornerStone PROPERTIES

Belmont
Elevation-A
FIRST FLOOR PLAN

REVISIONS:

DATE:	DRAWN BY:

DESIGNED BY: CBG
DRAWN BY: CBG
DATE: 04-03-23
JOB #: 23-084
SHEET #:
5.10



BATEMAN CIVIL SURVEY COMPANY
ENGINEERS • SURVEYORS • PLANNERS
2524 RELIANCE AVENUE, APEX, NC 27539
PHONE: (919) 577-1080 FAX: (919) 577-1081
INFO@BATEMANCIVILSURVEY.COM
NCBELS FIRM# C-2378

I, MICHAEL A. SCHMIDT, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY DIRECT SUPERVISION FROM A SURVEY MADE UNDER MY SUPERVISION (DEED DESCRIPTION RECORDED IN DEED BOOK 2909, PAGE 1457); THAT THE BOUNDARIES NOT SURVEYED ARE CLEARLY INDICATED AS DRAWN FROM INFORMATION LISTED UNDER REFERENCES; THAT THE RATIO OF PRECISION AS CALCULATED IS 1:10,000+; AND THAT THIS MAP MEETS THE REQUIREMENTS OF THE STANDARD OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA.

PRELIMINARY

MICHAEL A. SCHMIDT, PLS — DATE
NC LICENSE NUMBER L-5416

THIS MAP IS OF AN EXISTING PARCEL OF LAND AND IS ONLY INTENDED FOR THE PARTIES AND PURPOSES SHOWN. THIS MAP NOT FOR RECORDATION. NO TITLE REPORT PROVIDED.

THIS MAP IS CONSIDERED PRELIMINARY, NOT FOR RECORDATION, CONVEYANCE OR SALES UNLESS SIGNED AND SEALED BY THE LICENSED SURVEYOR.

PROJECT# 220249

Plot Plan
Exclusively For:
CORNERSTONE III PROPERTIES

111 PERIDOT DRIVE
CITY OF STATESVILLE, NC 28625
CONCORD TOWNSHIP, IREDELL COUNTY

DRAWN BY: BSH CHECKED BY: MAS DATE: 05/30/2024
REFERENCE: MB 38, PG 124 SCALE:1"=40'

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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.

I, Pam Harding / Stone Edge Inc, am the legal owner(s) of the property located at 111 Peridot Drive, identified as PIN (Parcel Identification Number) 4705858885.000, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) TYLER SGRO / DAVIS HORIZONS, 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 _____ Stan Prunty 9/7/21

Signature of Owner(s) Date Signature of Witness Date

Please return this signed form to the appropriate office:

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

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION:*

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...**

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

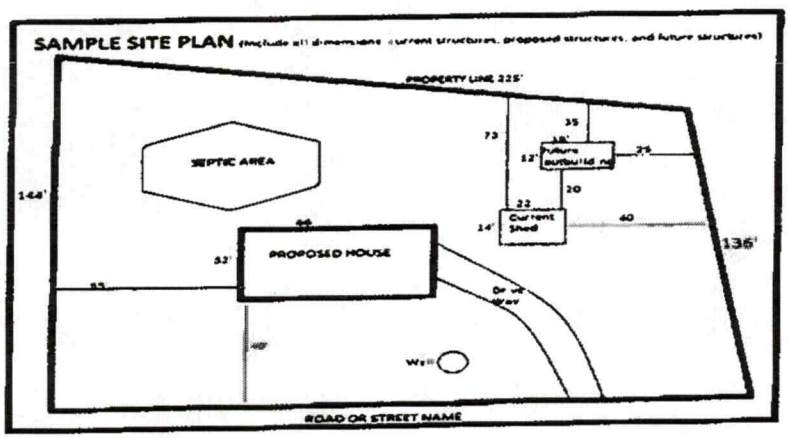
_X_ Front and side setbacks from property line... **_X_ Preferred driveway location and configuration, preferred well location...**

_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

See attached **LSS** designed site plan

Signature: Stan Prentiss

***REQUIRED* property owner or owner's legal representative signature.**

9/7/21

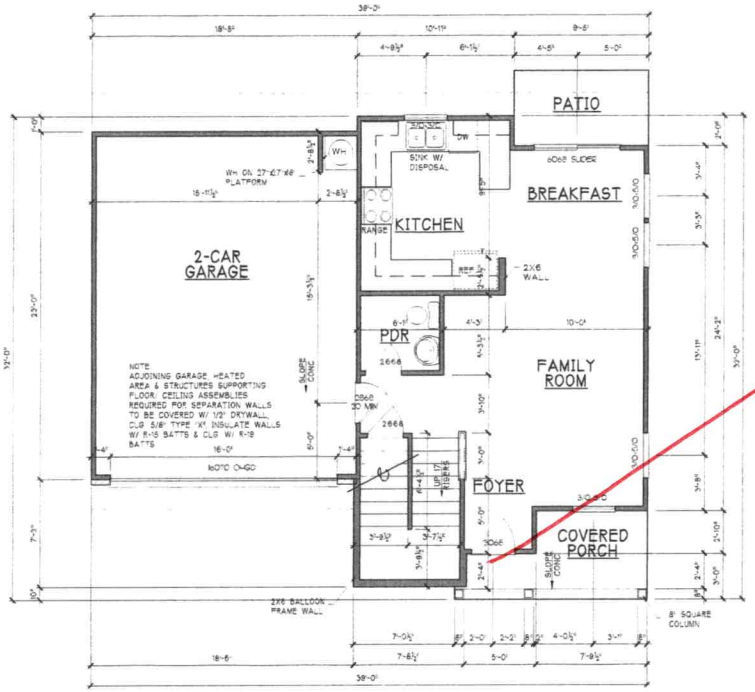
DATE

Acknowledgement Of Plans Submittal ONLY!

Date

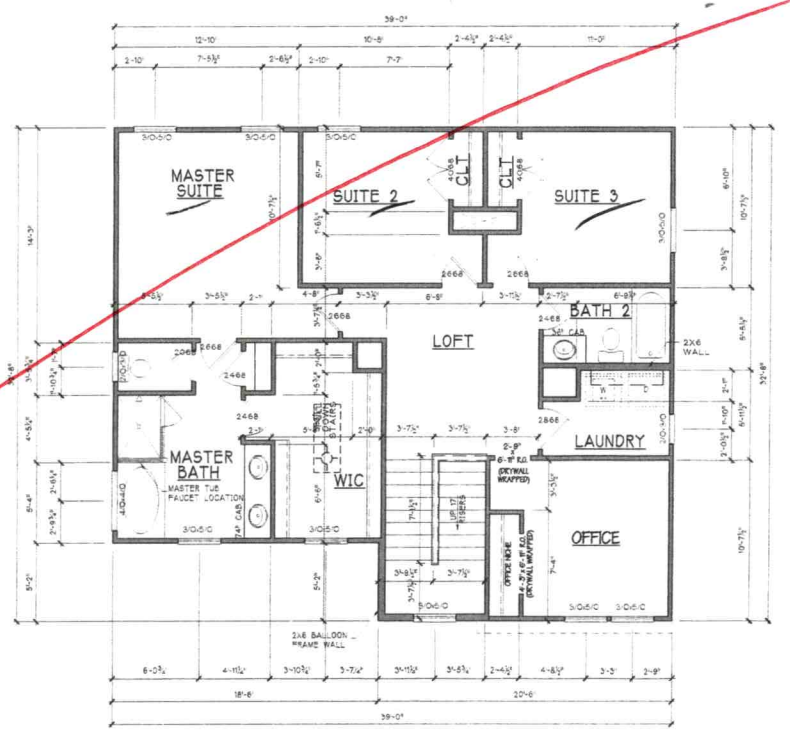
Date 12/27/21

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 OF LESS THAN 24" AFF OR EQUAL TO OR GREATER THAN 72" SAF 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.



1 / 4.0C ELEV. "C" FIRST FLOOR PLAN

SCALE 1/8"=1'-0" (11"X17" SHEET SIZE)
SCALE 1/4"=1'-0" (22"X36" SHEET SIZE)



2 / 4.0C ELEV. "C" SECOND FLOOR PLAN

SCALE 1/8"=1'-0" (11"X17" SHEET SIZE)
SCALE 1/4"=1'-0" (22"X36" SHEET SIZE)

SQUARE FOOTAGE

1ST FLR	567 SQ FT
2ND FLR	1178 SQ FT
TOTAL HEATED	1745 SQ FT
FRONT PORCH	52 SQ FT
REAR PATIO	47 SQ FT
2-CAR GARAGE	429 SQ FT
TOTAL UNHEATED	528 SQ FT
TOTAL UNDER ROOF	2273 SQ FT

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

PROJECT TITLE
BEDFORD PLAN

PROJECT NUMBER
ISSUE DATE

DRAWING DATA
DRAWN BY:
CHECKED BY:
FILE NUMBER:

SHEET TITLE
FLOOR PLAN

SHEET NUMBER
4.0C

C:\2021 PROJECTS\21-18 BEDFORD B HOUSE - Cornerstone III\Sheets Floor Electrical.dwg, 8/9/2021 10:41:46 AM, AutoCAD PDF (General Documentation).pc3

111 Peridot

RECEIVED MAR 4 - 2022

~~RE~~ APPLYING, SMALLER PLAN ~~*~~

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION*

(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)

1. **APPLICATION FOR:** ___ Improvement Permit ✓ Authorization To Construct ___ Existing System Inspection

2. **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 ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet
   Please check ( ) beside whichever is submitted if applicable

3. **Applicant Information:**
   Cornerstone III Properties — 234 Kingsley Park Suite 110 — X — 704 301 3229
   Applicant Name — **Mailing Address** — **Home Phone #** — **Alternate Phone #**
   Stone Edge Inc — 234 Kingsley Park — X — 704 301 3229
   Owner Name — **Mailing Address** — **Home Phone #** — **Alternate Phone #**

4. **Property Information:**
   111 Peridot Drive — Stone Edge — 35
   Street Address — **Subdivision Name** — **Section/Phase and Lot Number**
   Driving Directions: Lippard Farm Rd. North / Rt on Zircon Drive
   turn left on Peridot Drive; lot on left

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*
   (✓) New, Single Family Residence
   ( ) New, Multi-Family Residence
   ( ) Expansion of Existing Septic System
   ( ) Repair To Failing Septic System due to _____
   ( ) Other _____
   Maximum Number of Bedrooms 3
   Maximum Number of Occupants 5
   If Expansion, Current Number of Bedrooms ___
   (✓) Crawl Space Foundation?
   ( ) Concrete Slab Foundation?
   ( ) Basement w/Plumbing?
   ( ) Basement w/out Plumbing?
   IF Non-Residential Site Development: ~~X~~
   Type of Business
   Square Footage of Building
   Maximum Number of Employees
   Maximum Number of Seats

6. **Proposed Water Supply:**
   ( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water (✓) Other Public Water County

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)* ( ) EXISTING SYSTEM installed ____ Year
   (✓) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other _____

8. **Please Answer The Following** ( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
   To The Best of Your Ability: ( ) Yes (✓) No Is any **non-domestic** sewage (i.e. industry) 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.

9. **Signature:** Tom W. Punky
   Property owner or owner's legal representative/agent (SIGNATURE REQUIRED)
   3/3/22
   DATE

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION:*

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...

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

_X_ Front and side setbacks from property line...

_X_ Area you prefer your septic system to be placed...

_X_ Preferred driveway location and configuration, preferred well location...

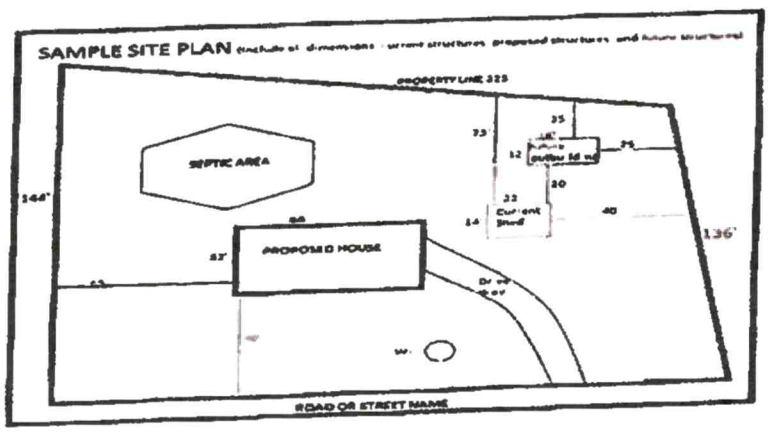
_X_ North arrow, or other sufficient indicator of direction...

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

"PREVIOUS"

See attached **LSS** designed site plan

111 PERIDOT DRIVE

"SMALLER"

NEW RIVERSIDE PLAN

45-10

31'

Signature: Stan Crump — owner/agent/legal representative signature.

3/3/22

DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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.

I, Pam Harding / Stone Edge Inc, am the legal owner(s) of the property located at 111 Peridot Drive, identified as PIN (Parcel Identification Number) 4705858885.000, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) TYLER SGRO / DAVIS HORIZONS, 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 _____

Signature of Witness _____ Date 3/3/22

Please return this signed form to the appropriate office:

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

ENVIRONMENTAL HEALTH REQUIREMENTS for SEPTIC PERMITS

The following items must be completed PRIOR to the SUBMITTAL of the Improvement Permit (IP) Authorization to Construct (AC) / Existing System application packet.

*** Initial each statement to indicate you have read and agree. ***

SWP ___ **Complete all Environmental Health forms:** septic system application, site plan, new well water application (if applicable), and **sign this green sheet** after you have completed all items. Include a copy of the site Zoning Permit. NOTE: *A Zoning Permit is not required for septic system repairs or expansion where no addition is being made to an existing structure.* All applications requiring zoning must submit completed paperwork and applicable fees to *CENTRAL PERMITTING* before any name will be placed on the service request (appointment) list. Applications not requiring zoning may be submitted and paid for at Central Permitting in Statesville OR the Mooresville office of Environmental Health. Only properly completed applications will be placed on the service request list on a first come, first serve basis. **Incomplete applications will be returned to the applicant.**

SWP ___ **Lots must be cleared** to allow access and provide good visibility. Structure footprint must be visible and adequate area for septic drain field and repair area must be cleared sufficiently to provide staff room to move about freely, shoot laser level elevations as well as test soil with hand auger, etc. **If they cannot access the lot, you will incur a $100 revisit fee AFTER clearing the lot before Environmental Health will return to the site.**

SWP ___ Clearly **mark all property corners by locating existing iron or concrete markers.** Flag all property lines every twenty-five feet if adjacent corners are not visible when standing on any given corner. Property lines must be flagged by a licensed NC surveyor and easily identified. 'Mow lines' and/or fence lines do NOT constitute marked lines.

SWP ___ **Stake or flag the footprint of the proposed building structure or addition to match site plan application.** Without a footprint Environmental Health cannot determine the location and size of a proposed septic system.

SWP ___ Where an **Authorization to Construct (AC) is desired,** submit a recorded copy of the plat for the subdivision lot and include a legible copy of the basic floor plan not larger than 11" x 17" for each floor in the structure. Be sure to include any decks, porches, etc.

SWP ___ In the event that backhoe pits are required for soil evaluation (which cannot be determined until Environmental Health staff arrive to test soil) understand that **you are responsible for securing these services.** This may delay the permitting process, but will not result in the application being returned to the bottom of the work list. You must coordinate with the Environmental Health Specialist when test pits are to be dug. The application will be worked back into the schedule as quickly as possible.

Any site not meeting the above requirements when staff arrives for the evaluation will result in a $100 site revisit fee and the request being returned to the bottom of the service request list. Once work by Environmental Health staff begins, the up-front fees paid toward securing any health department permit are non-refundable. Refunds for work not started, due to a customer changing their mind or plans, are subject to an administrative fee of $50 to defray a portion of the costs of processing the refund.

By signing below I am acknowledging the above specifications have been met and the site is READY to be evaluated.

Signature Stan Purdy **Date** 3/3/22

Questions? Call between 8:00-9:00a.m., to speak with a Registered Environmental Health Specialist.

Statesville Office
349 North Center Street
(2nd Floor-Building Standards)
Statesville, NC 28677-4063
Phone: (704)878-5305 ext. 3456
This office closes for lunch 1:00 – 2:00 daily.

Mooresville Office
610 East Center Avenue
(2nd Floor Government Center South)
Mooresville, NC 28115-2548
Phone: (704)660-3625
This office closes for lunch 12-1:00 daily.

Ronda Hart

From: Stan Pressley <stan@cornerstone3p.com>
Sent: Friday, March 4, 2022 9:35 AM
To: Ronda Hart; Benjamin Botkins
Subject: Re-Application 111 Peridot Drive
Attachments: Re-Application Septic 111 Peridot.pdf; 2022-02-03 Riverside-C (sealed) (1).pdf

Ben here is one of the 8 for the Stone Edge community I spoke to you about on 1/22. This Riverside plan is much smaller so we should be fine. We are doing the 3Bd/ Office option so the number of beds is staying the same as previously applied for.
Tks

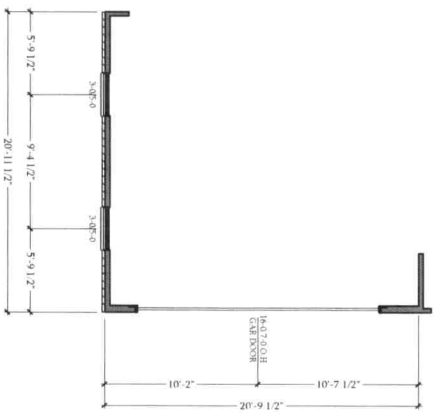
Stan W Pressley
Vice President - Cornerstone III Properties
Cornerstone III Properties
704-301-3229
Stan@cornerstone3p.com

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report suspicious emails by clicking the "Report Phish" button.

Acknowledgement Of
Plans Submittal ONLY!

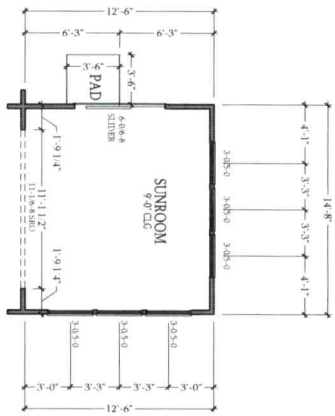
BAB Date 3/7/22

Date



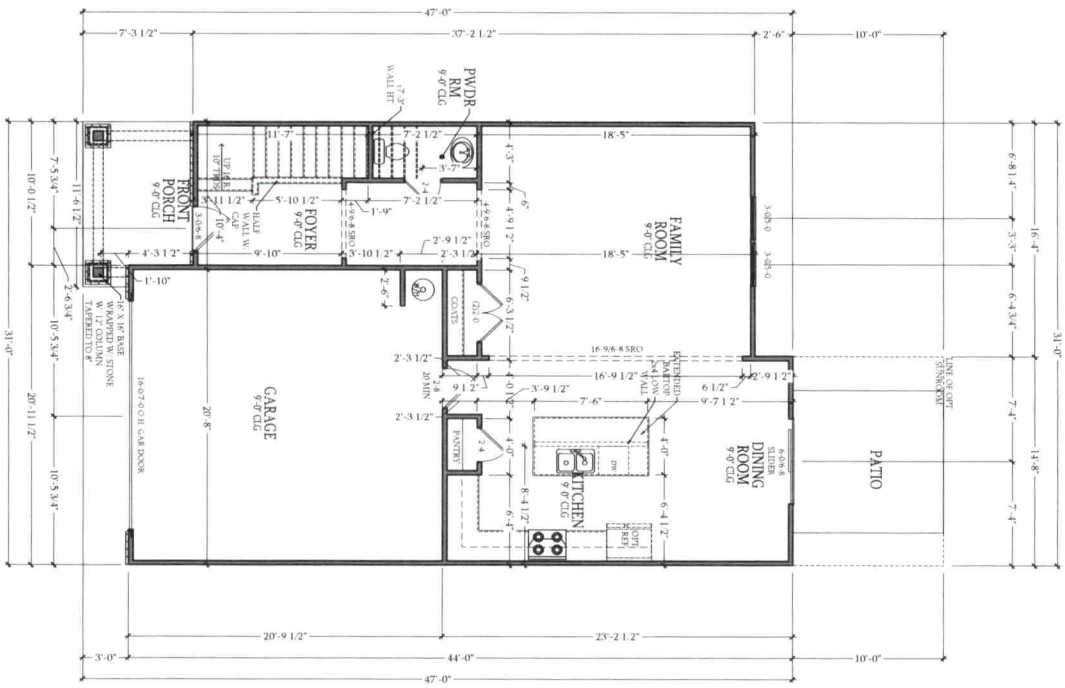
OPT SIDE LOAD GARAGE
FLOOR PLAN

SCALE: 1/4"=1'-0" ON 22x34 AND 1/8"=1'-0" ON 11x17



OPT SUNROOM
FLOOR PLAN

SCALE: 1/4"=1'-0" ON 22x34 AND 1/8"=1'-0" ON 11x17



FIRST FLOOR PLAN

SCALE: 1/4"=1'-0" ON 22x34 AND 1/8"=1'-0" ON 11x17

SHEET #:	5.10
JOB #:	21-702
DATE:	XX-XX-XX
DRAWN BY:	CBC
DESIGNED BY:	CBC

REVISIONS	
DATE	DRAWN BY

RIVERSIDE

Elevation-C

FIRST FLOOR PLAN

CornerStone PROPERTIES

CORNERSTONE BUILDERS GROUP
www.CornerstoneCarolina.com
PO Box 5322
Clover, SC. 29710
803-866-2724
www.CornerstoneCarolina.com

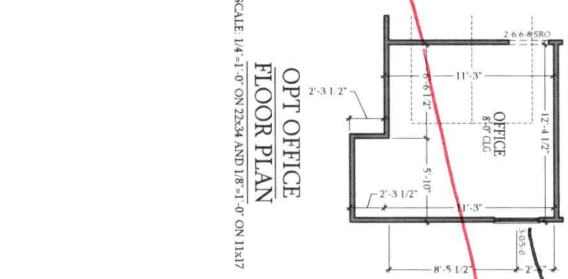
Acknowledgement Of
Plans Submittal ONLY!

BAB Date 3/7/22

Date

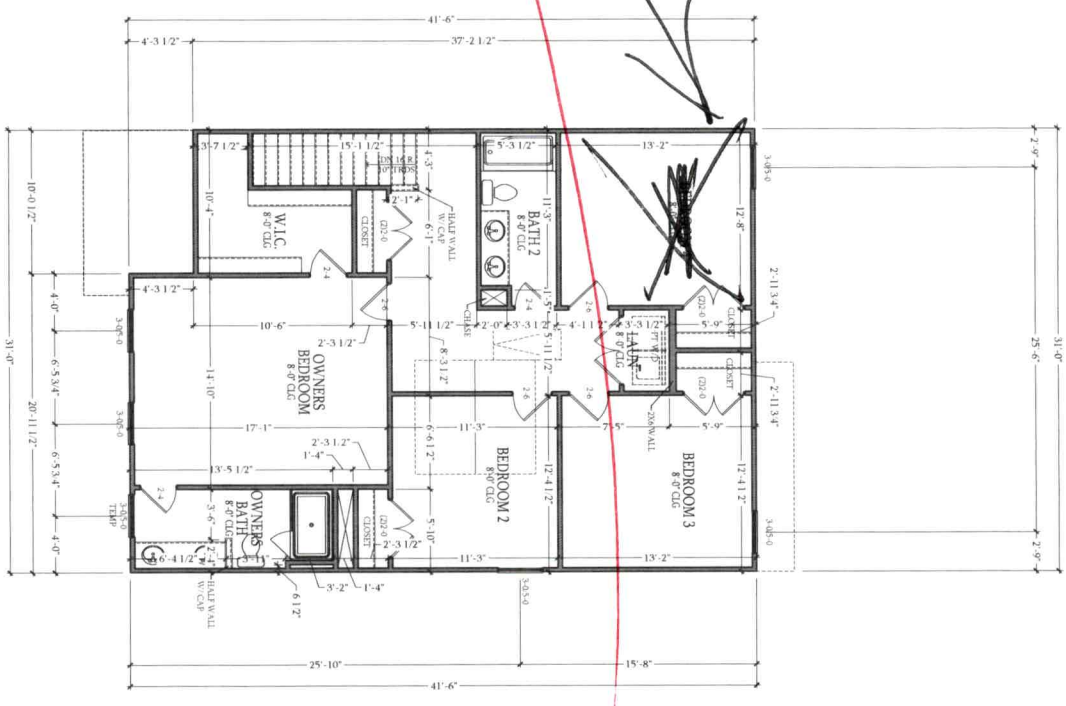
OPT OFFICE
FLOOR PLAN

SCALE 1/4"=1'-0" ON 22x34 AND 1/8"=1'-0" ON 11x17



SECOND FLOOR PLAN

SCALE 1/4"=1'-0" ON 22x34 AND 1/8"=1'-0" ON 11x17



| | | |

RECEIVED APR 5 - 2022

*RE APPLYING, SMALLER PLAN *

IREDELL COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION

(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 .1939 FOR DETAILS)

1. **APPLICATION FOR:** ___ Improvement Permit ✓ Authorization To Construct ___ Existing System Inspection

2. **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 ___ Custom Site Plan, Scaled no more than 1 inch = 60 Feet
Please check ( ) beside whichever is submitted if applicable

3. **Applicant Information:**
Cornerstone III Properties — 234 Kingsley Park Suite 110 — X — 704 301 3229
Applicant Name — Mailing Address — Home Phone # — Alternate Phone #

Stone Edge Inc — 234 Kingsley Park — X — 704 301 3229
Owner Name — Mailing Address — Home Phone # — Alternate Phone #

4. **Property Information:**
111 Peridot Drive — Stone Edge — ___
Street Address — Subdivision Name — Section/Phase and Lot Number

Driving Directions: Lippard Farm Rd. North / Rt on Iron Drive
turn left on Peridot Drive; lot on left

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

(✓) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System due to ___
( ) Other ___

Maximum Number of Bedrooms 3
Maximum Number of Occupants 5
If Expansion, Current Number of Bedrooms ___

(✓) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development: X
Type of Business
Square Footage of Building
Maximum Number of Employees
Maximum Number of Seats

6. **Proposed Water Supply:**
( ) New Well ( ) Existing Well ( ) Community Well ( ) City Water (✓) Other Public Water County

( ) EXISTING SYSTEM installed ___ Year

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)*
(✓) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other ___

8. **Please Answer The Following** ( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
To The Best of Your Ability: ( ) Yes (✓) No Is any non-domestic sewage (i.e. industry) 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.

9. **Signature:** Tom W. Punky — 3/30/22
Property owner or owner's legal representative (SIGNATURE REQUIRED) — DATE

IREDELL COUNTY HEALTH DEPARTMENT *ENVIRONMENTAL HEALTH DIVISION:*

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...

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

_X_ Front and side setbacks from property line...

_X_ Area you prefer your septic system to be placed...

_X_ Preferred driveway location and configuration, preferred well location...

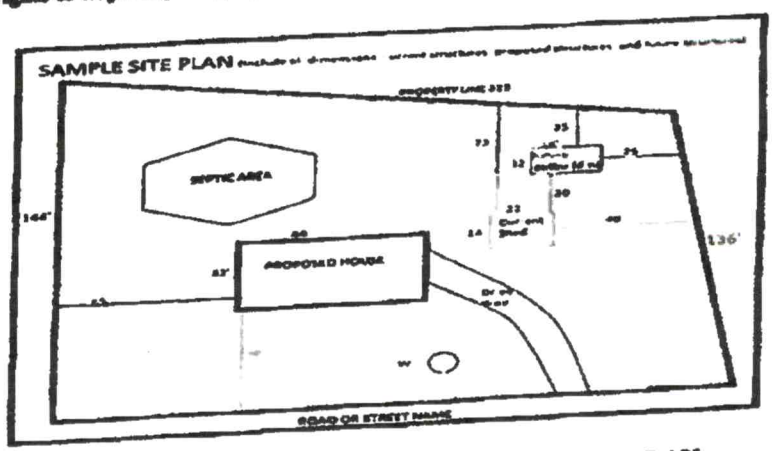
_X_ North arrow, or other sufficient indicator of direction...

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

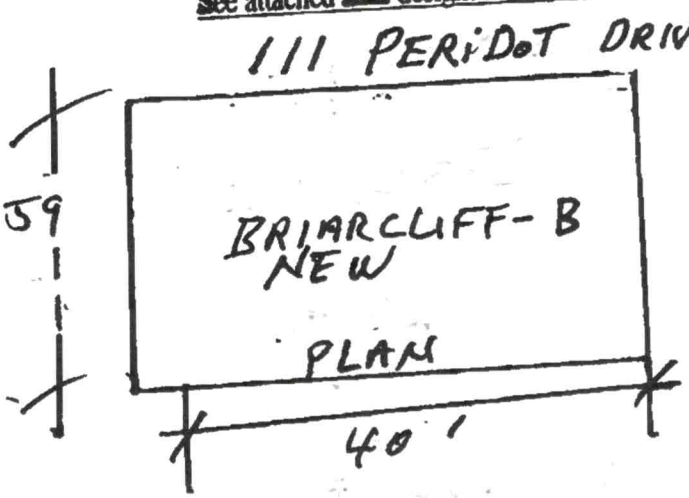
_____ Location of any designated wetlands on the property... N/A



USE THIS SPACE TO DRAW YOUR SITE PLAN

"PREVIOUS"

See attached LSS designed site plan



Stan Prentice _____ 3/30/22

DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

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.

I, Pam Harding / Stone Edge Inc, am the legal owner(s) of the property located at 111 Peridot Drive, identified as PIN (Parcel Identification Number) 4705858885.000, located in Iredell County, North Carolina.

I do hereby authorize (print legal representative/company name) TYLER SGRO / DAVIS Horizons, 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 — Signature of Owner(s) — Date

Stan Pauly — Signature of Witness — 3/3/22 — Date

Please return this signed form to the appropriate office:

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

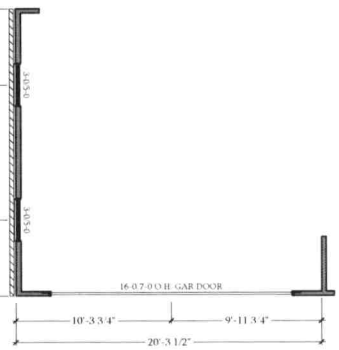
Acknowledgement Of
Plans Submittal ONLY!

Date 5-19-2022

Date 6-3-22

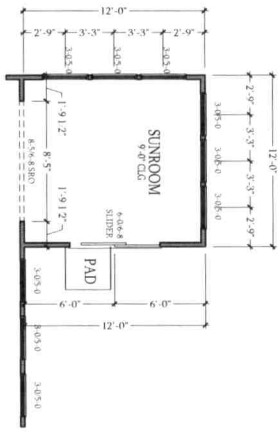
OPT SIDE LOAD GARAGE

SCALE 1/4"=1'-0" ON 22x34 AND 1/8"=1'-0" ON 11x17



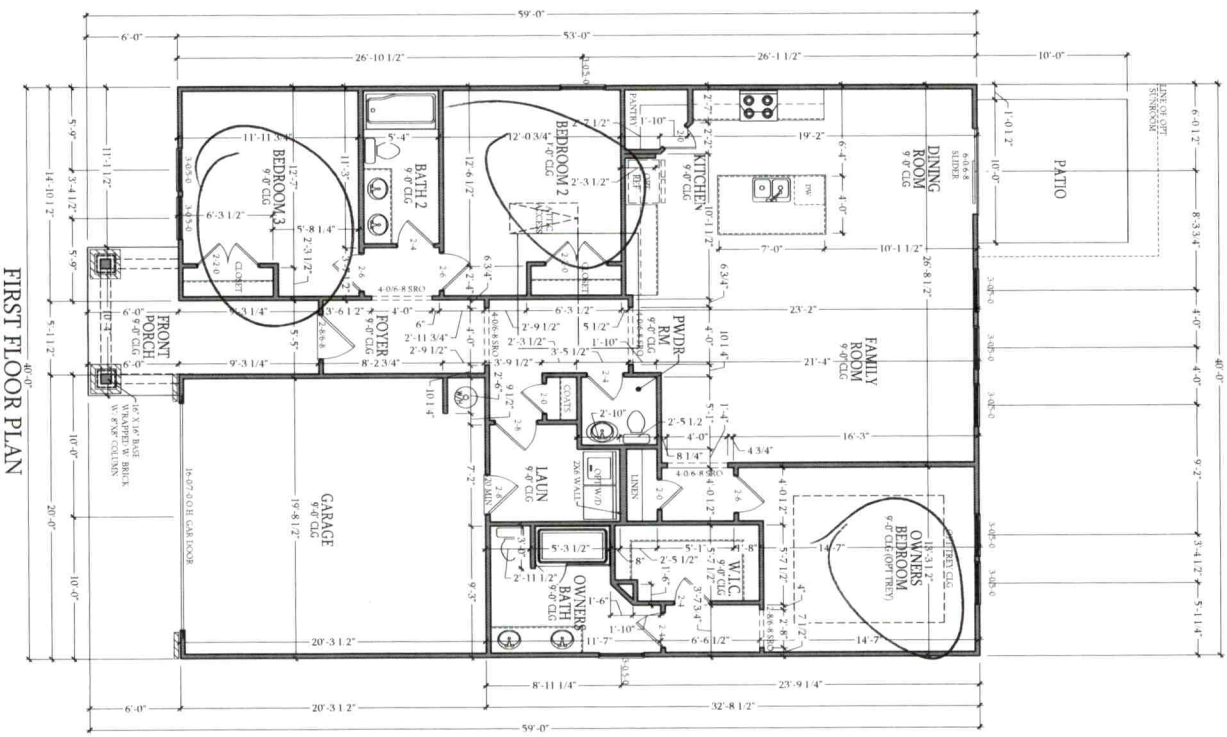
OPT SUNROOM

SCALE 1/4"=1'-0" ON 22x34 AND 1/8"=1'-0" ON 11x17



FIRST FLOOR PLAN

SCALE 1/4"=1'-0" ON 22x34 AND 1/8"=1'-0" ON 11x17



BRIARCLIFF

Elevation-B

FIRST FLOOR PLAN

CornerStone PROPERTIES

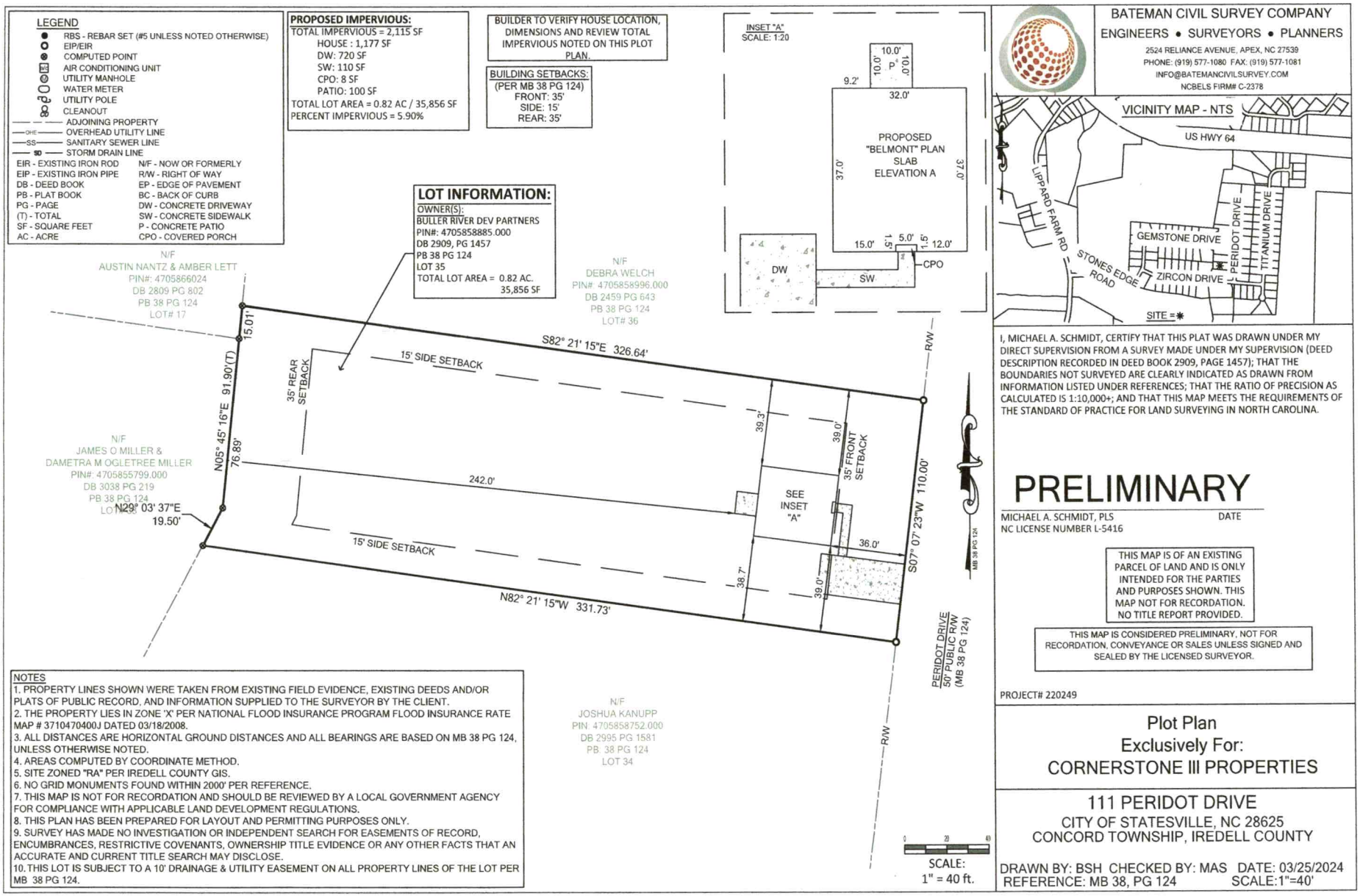
CORNERSTONE BUILDERS GROUP
www.CornerstoneCarolina.com

PO Box 5322
Clover, SC. 29710
803 866 2724
www.CornerstoneCarolina.com

SHEET #:	5.10
SCALE:	1/4"=1'-0"
DATE:	XX/XX/XX
DRAWN BY:	CBG
DESIGNED BY:	CBG

REVISIONS	
DATE	DRAWN BY

Denied 5/24/24



NOTES
1. PROPERTY LINES SHOWN WERE TAKEN FROM EXISTING FIELD EVIDENCE, EXISTING DEEDS AND/OR PLATS OF PUBLIC RECORD, AND INFORMATION SUPPLIED TO THE SURVEYOR BY THE CLIENT.
2. THE PROPERTY LIES IN ZONE 'X' PER NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP # 3710470400J DATED 03/18/2008.
3. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES AND ALL BEARINGS ARE BASED ON MB 38 PG 124, UNLESS OTHERWISE NOTED.
4. AREAS COMPUTED BY COORDINATE METHOD.
5. SITE ZONED "RA" PER IREDELL COUNTY GIS.
6. NO GRID MONUMENTS FOUND WITHIN 2000' PER REFERENCE.
7. THIS MAP IS NOT FOR RECORDATION AND SHOULD BE REVIEWED BY A LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH APPLICABLE LAND DEVELOPMENT REGULATIONS.
8. THIS PLAN HAS BEEN PREPARED FOR LAYOUT AND PERMITTING PURPOSES ONLY.
9. SURVEY HAS MADE NO INVESTIGATION OR INDEPENDENT SEARCH FOR EASEMENTS OF RECORD, ENCUMBRANCES, RESTRICTIVE COVENANTS, OWNERSHIP TITLE EVIDENCE OR ANY OTHER FACTS THAT AN ACCURATE AND CURRENT TITLE SEARCH MAY DISCLOSE.
10. THIS LOT IS SUBJECT TO A 10' DRAINAGE & UTILITY EASEMENT ON ALL PROPERTY LINES OF THE LOT PER MB 38 PG 124.

P:\2021 Projects\STONES EDGE PLOT PLANS\DWG\STONES EDGE LOTS COMBINED\AS EDITS\.dwg, 3/28/2024 8:41:20 AM, 1:1

52