ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 311996

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

PIN # 4722 -- 57 -- 8232

APPLICANT/OWNER: Corner Stone III Properties APPLICANT ADDRESS: 118 East Kingston Ave CLT 28203.

SITE ADDRESS: 120 Lippard Springs Circle Statesville NC 28677 PHONE: 704-301-3229 ALT. PHONE

SITE DIRECTIONS: Old NC 90 Rd to Rumple Hill to Lippard Springs Circle.

SUBDIVISION: Lippard Springs SECTION: - LOT # 137 LOT AREA: .61 AC

SAP CONTROLLED: ☐ YES ☒ NO

DESIGN FLOW: 360 L.T.A.R.: .40

Septic Tank 1000 (gal)	STB STOAF 7120	Date 3/10/22	☑ New System ☐ Repair ☐ Expansion	System Type: I II (III) IV V VI	☑ Residence ☐ Business ☐ Other ☐ Slab ☐ Basement w/ plumbing
Pump Tank - (gal)	PT -	Date -	System Description: Gravity - 25% Reduction		No. Bedrooms 3
Pump Make -	Model -	Serial # -	Repair System Description: Aerobic Drip Irrigation		No. Persons 6
# Nitrification Fields 1	# Lines 3	Linear Ft 225	Maintenance Agreement Required: ☐ YES ☒ NO		No. Employees
Trench Width 36 in.	Trench Bottom Depth 30 in	Gravel Depth -	☑ GRAVITY ☐ PRESSURE		☒ Crawl Space ☐ Basement w/o plumbing

Water Supply: ☐ Private ☐ Public ☐ Community

Comments / Conditions: No foundation Drain along Rear of House. Drainlines can be no closer than 5ft to House foundation * Install system prior to Site Construction per LSS *

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:

Alternative Septic Services LLC

LSS # 1254 Dated May 12, 2021.

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.

As Built Attached

NTS

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: 3-4-22 Installed by: Galle Grading

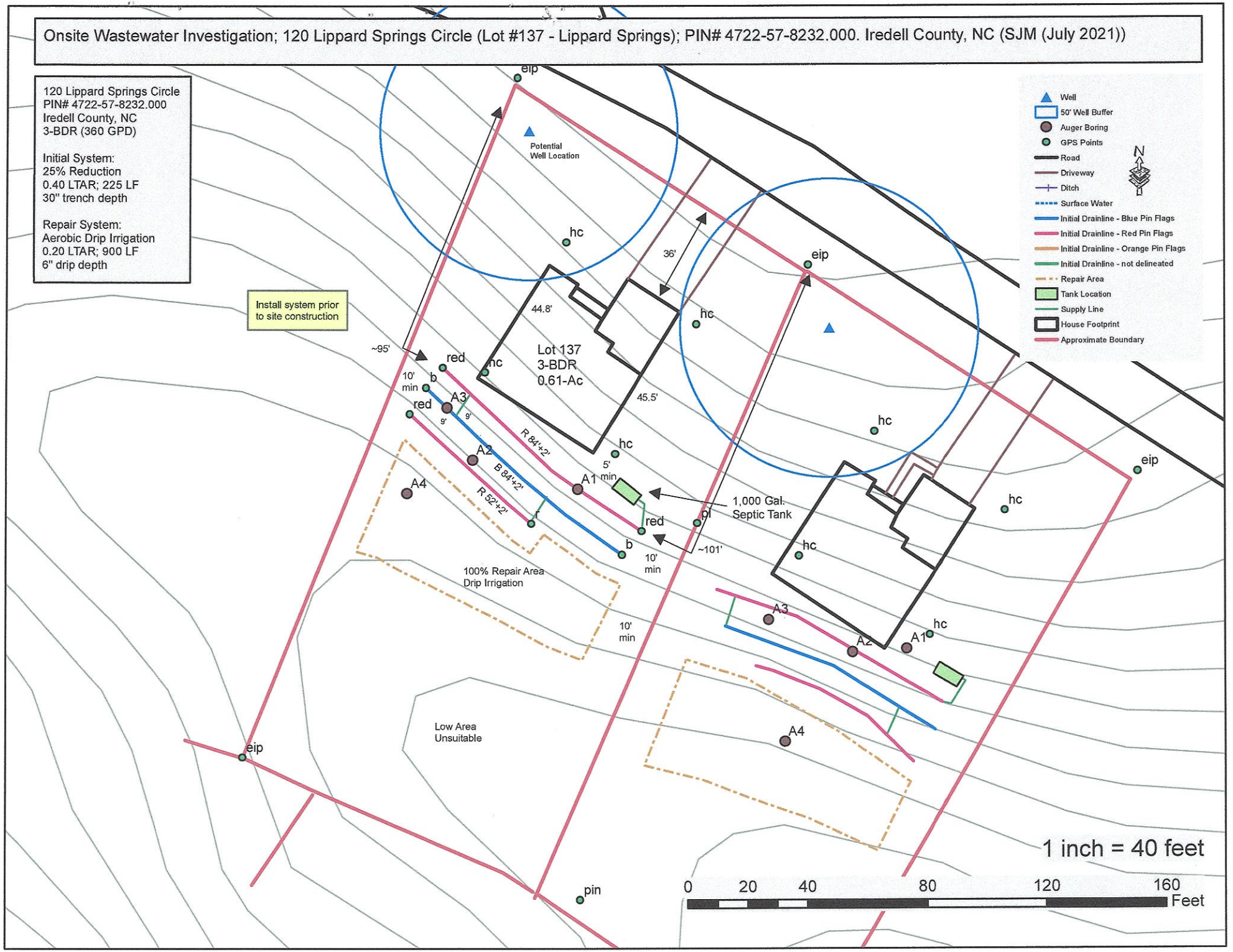
IMPROVEMENT PERMIT by: Date: 6/15/2021 OPERATION PERMIT by: ICHD Date: 4/24/22

AUTHORIZATION TO CONSTRUCT by: Date: 2/25/22 Existing System Inspected by: Date:

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

Item	Date	Initials
Drain Lines Checked	4/14/22	DW
Tanks Checked	4/14/22	DW
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? _____	


Onsite Wastewater Investigation; 120 Lippard Springs Circle (Lot #137 - Lippard Springs); PIN# 4722-57-8232.000. Iredell County, NC (SJM (July 2021))
120 Lippard Springs Circle
PIN# 4722-57-8232.000
Iredell County, NC
3-BDR (360 GPD)
Initial System:
25% Reduction
0.40 LTAR; 225 LF
30" trench depth
Repair System:
Aerobic Drip Irrigation
0.20 LTAR; 900 LF
6" drip depth
Install system prior to site construction
Well
50' Well Buffer
Auger Boring
GPS Points
Road
Driveway
Ditch
Surface Water
Initial Drainline - Blue Pin Flags
Initial Drainline - Red Pin Flags
Initial Drainline - Orange Pin Flags
Initial Drainline - not delineated
Repair Area
Tank Location
Supply Line
House Footprint
Approximate Boundary
N
Potential Well Location
Lot 137
3-BDR
0.61-Ac
44.8'
45.5'
36'
~95'
~101'
10' min
5' min
9'
R 84'+2'
B 84'+2'
R 52'+2'
1,000 Gal. Septic Tank
100% Repair Area
Drip Irrigation
Low Area
Unsuitable
eip
hc
pi
pin
red
b
A1
A2
A3
A4
1 inch = 40 feet
0
20
40
80
120
160
Feet

Alternative Septic Services, LLC

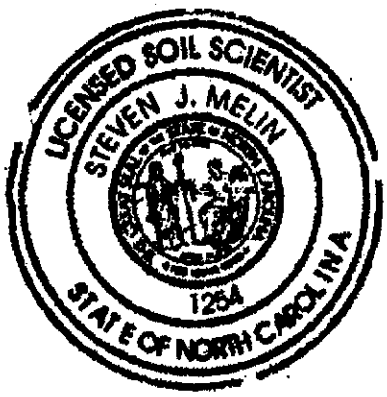
15 LONE COYOTE RIDGE, FLETCHER, NC 28732
EMAIL: SJMELIN@GMAIL.COM CELL: (828) 551-9903

ON-SITE SOIL AND SITE EVALUATION

120 Lippard Springs Circle
Lot #137 – Lippard Springs Subdivision
Session Law Permitting
Iredell County, North Carolina
Parcel ID# 4722-57-8232.000
3-Bedroom (360 GPD)

Prepared for:

Prepared by:
Alterative Septic Services



Steven J. Melin #1254

Steven J. Melin, LSS

May 12, 2021

Alternative Septic Services, LLC

15 LONE COYOTE RIDGE FLETCHER, NC 28732
EMAIL: SJMELIN@GMAIL.COM CELL: (828) 551-9903

120 Lippard Springs Circle (Lot #137 – Lippard Springs) **05-12-2021**
PIN# 4722-57-8232.000 (Iredell County, NC)
Saprolite System: No

Onsite Wastewater Septic System Overview:

The following report has been prepared by Alternative Septic Services (Steve Melin, LSS #1254) for a 0.61-acre lot at 120 Lippard Springs Circle in Statesville (Iredell County), NC. Please note that a 3-bedroom house is proposed (360 GPD). Please note that the following report prepared is intended to be permitted under Session Law 2018-Section 11.c. **The LSS Evaluation is being submitted pursuant to and meets the requirements of SL 2018-114 Section 11.(c).**

Application Type:	Session Law (2018) (3-BDR)					
Number of Bedrooms:	Proposed Septic System	**GPD**	**Soil Group**	**Soil Texture**	**LTAR**	**Linear Feet Required Calculation (in Square and Linear Feet)**
Initial Septic System:	25% Reduction	360	III	Clay Loam	0.40	360 gpd / 0.40 gpd/ft^2 = 900 ft^2 900 ft^2/4. ft trench eq. = 225 ft (See calculations below)
Repair Septic System:	Aerobic Drip Irrigation	360	III	Clay Loam	0.20 drip LTAR	360 gpd / 0.20 gpd/ft^2 = 1,800 ft^2 or 900 linear feet of drip tubing 2' off center (See calculations below)
Easement Required:	No					

Alternative Septic Services, LLC

15 Lone Coyote Ridge; Fletcher, NC 28732
Email: sjmelin@gmail.com Cell: (828) 551-9903

May 12, 2021

To: Owner – 120 Lippard Springs Circle (Lot #137)

Re: **Site/Soil Investigation(s) for 120 Lippard Springs Circle (Lot #137) in Statesville (Iredell County, North Carolina).**

I, Pam Buell, **acknowledge that "The LSS Evaluation attached is this application is to be used to produce, design and construction features for permitting in accordance with SL 2018-114 Section 11.(c)."**

Sincerely,

Steve Melin, LSS
Soil Scientist
Alternative Septic Services, LLC

Client:

Accepted: Buffalo River Development / Pam Buell

Date: 5/13/21

Alternative Septic Services, LLC
15 LONE COYOTE RIDGE, FLETCHER, NC 28732
EMAIL: SJMELIN@GMAIL.COM CELL: (828) 551-9903

Onsite Wastewater Septic System Configuration and Recommendations:

The following recommendations are proposed a 0.61-acre lot at 120 Lippard Springs Circle in Statesville (Iredell County), NC. The proposed system design/layout is for a three-bedroom house. The septic area has been evaluated and determined to contain Group III soils (the most restrictive texture being clay loam). A long-term acceptance rate (LTAR) of 0.40 has been assigned to these soils for the initial system area (0.20 for the repair aerobic drip irrigation LTAR) (*See attached soil descriptions).*

It is recommended to utilize a 25% Reduction type system for the septic drainfield. The (initial) septic system will require 225 linear feet of material to accommodate the 3-bedroom septic system. The recommended trench depth is 30-inches (on contour). It is anticipated that gravity flow can be maintained from the septic tank to drainfield. The square and linear footage required for installation of this system is illustrated below.

3 bedrooms x 120 gallon/day/bedroom = 360 gallons per day (gpd)
Group III, Clay Loam, 0.40 gallons per square foot per day (LTAR)
Square Footage required: 360 gpd / 0.40 LTAR = 900 square feet
900 ft²/4.0' trench equivalency= 225 Linear Feet
NOTE: Not a Saprolite System

It is recommended to utilize an aerobic drip irrigation type system for the repair septic drainfield. The (repair) septic system will require 900 linear feet of drip tubing to accommodate the 3-bedroom septic system. The recommended drip tubing depth is 6 inches (on contour). The square and linear footage required for installation of this system is illustrated below.

3 bedroom home x 120 gallon per bedroom per day = 360 gallons per day (gpd)
Group III, Clay Loam, 0.40 gallons per square foot per day (0.20 Drip LTAR)
Square Footage required: 360 gpd / 0.20 LTAR = 1,800 square feet or 900 linear feet 2' o/c
Note: Not a Saprolite System

Alternative Septic Services, LLC
15 LONE COYOTE RIDGE; FLETCHER, NC 28732
EMAIL: SJMELIN@GMAIL.COM CELL: (828) 551-9903

The proposed septic system area has been delineated on the attached map. It is recommended/required to utilize 225 linear feet of material for the septic drainfield. *(See attached site plan for detail.)* It is also required to delineate the system again prior to installation.

Onsite Wastewater Septic System Setbacks (Buffers) and Site Recommendations:

The following items are recommended to preserve the integrity of the proposed site and surrounding area.

1. It is recommended to encase all septic system supply lines where they cross roads, drives and/or power lines (*pursuant to Laws and Rules for Sewage Treatment, and Disposal Systems 15A NCAC 18A .12,000*)

2. It is recommended to divert all stormwater runoff away from all proposed septic areas.

3. A minimum 1,000 gallon septic tank is recommended / required. The septic tank is proposed to feed two-hundred twenty five feet (225') of drainline by serial distribution.

4. Please notify us if there are any changes to the site plan.

5. The proposed septic system designs/layouts are based on dodging large trees or other obstacles that may hinder the installation or operation of the septic system.

6. The proposed onsite wastewater system is based off of theoretical calculations based on data obtained at the site. Actual system performance is not guaranteed.

7. The proposed initial septic system and repair system must maintain a setback (Buffer), specified by North Carolina Department of Environment and Natural Resources (NCDENR), including: 5' horizontal from the house and all foundations, 50' horizontal from any surface water, 100' horizontal minimum from all wells (can be reduced to 50' under circumstances), 5' horizontal from all property lines and water lines, 10' horizontal from any other septic system (except repair) and 8' horizontal from cut banks (unless filled and compacted, 5' horizontal setback).

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 ownership, edges of possession, encroachments or other occurrences that surface and on the property and are visible on the plat. Encroachments noted on this plat are limited to those seen by the evidence of such conditions existing and shown thereon.

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

* This plat represents an actual field survey that meets or exceeds the minimum requirements of a Class A 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 1:10,000.

* Area determined by coordinate computations.

* The NAD or NGVD North Control Monument found within 2,000 feet of the site.

* There is a 10' Drainage and Utility Easement along each side of all lot lines.

Witness my original signature, registration number and seal this 1st day of October, 2020 A.D.

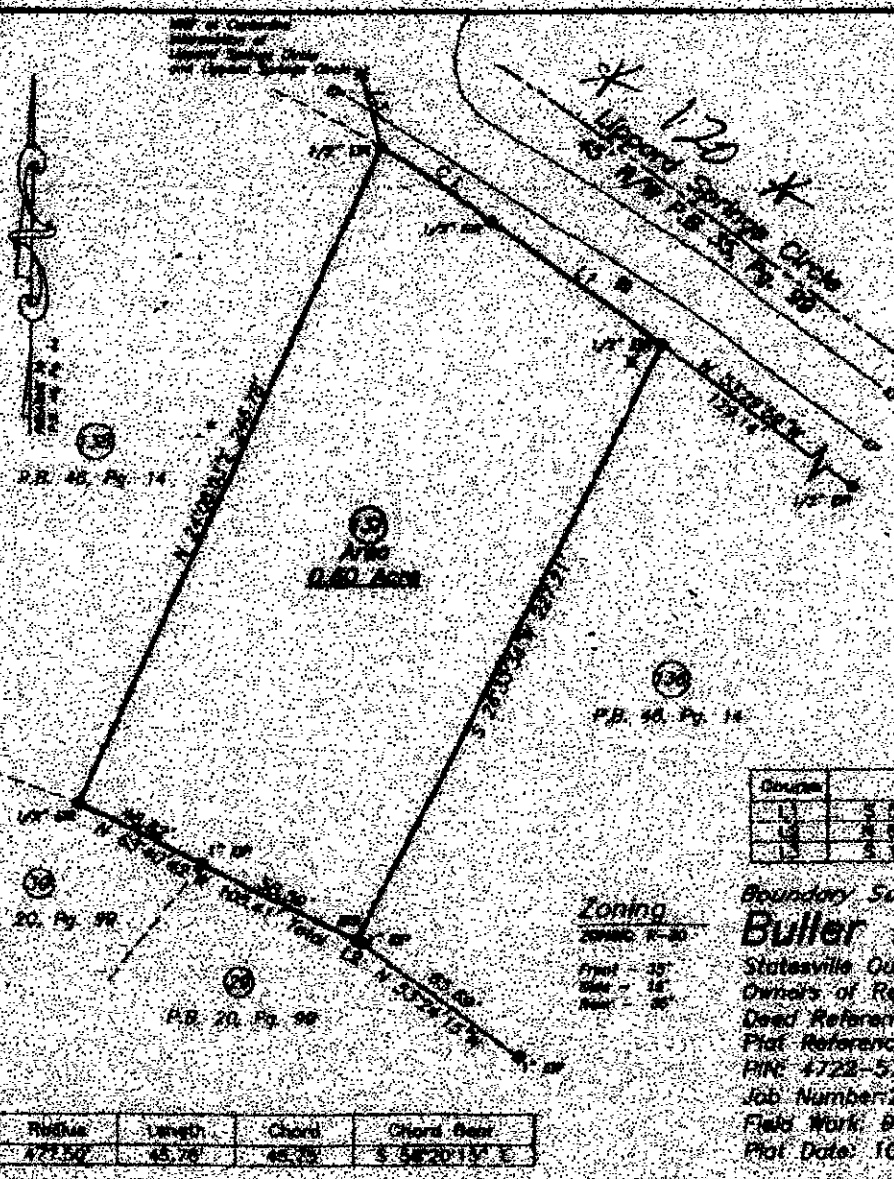
Ted M. Simpson PLS L-3175
Firm License # C-1588

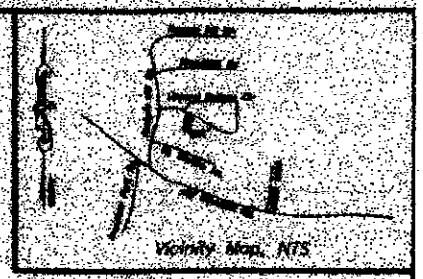
SEAL L-3175



GRAPHIC SCALE - 1" = 40'

TED SIMPSON
Land Surveying
Proudly Surveying Iredell County
since 1995
630 SIGNAL HILL DRIVE EXT. STATESVILLE, NC 28625
PHONE (704) 872-8541
www.tedsimpsonsurveying.com





Legend

CIPS OR MONUMENTS SET CONTAIN THE SURVEYORS NAME AND LICENSE NUMBER.

● EIP	EXISTING IRON PIPE AS SHOWN
● EIR	EXISTING IRON ROD AS SHOWN
○ IPS	1/2" IRON ROD SET WITH YELLOW CAP
⊗ MP	MAG NAIL FOUND
■	ELECTRIC HOOKUP
■	MAILBOX
⊙	EDGE OF PAVEMENT
W/V	POINT OF USE
PIN	PARCEL IDENTIFICATION NUMBER
NTS	NOT TO SCALE
	LINE NOT SURVEYED
	LINE SURVEYED
	SURVEYED LINE NOT TO SCALE

Curve	Radius	Length	Chord	Chord Bear.
C1	477.50'	45.78'	45.76'	S 58°20'13" E

Course	Bearing	Distance
L1	S 42°33'48" E	71.47'
L2	N 59°40'48" W	1.36'
L3	S 18°00'00" E	25.87'

Zoning

ZONING: R-20

Front - 35'
Side - 15'
Rear - 30'

Boundary Survey For:

Buller River Development

Statesville Outside Township, Iredell County, NC
Owners of Record: Danny M. Ervin
Deed Reference: D.B. 2487, Pg. 2210
Plat Reference: P.B. 46, Pg. 14
PIN#: 4722-57-8232
Job Number: 2009171.DWG (2009165.CRD)
Field Work: 9-30-2020
Plat Date: 10-1-2020

Alternative Septic Services, LLC

15 Lone Coyote Ridge
Fletcher, NC 28732

120 Lippard Springs Circle (Lot #137)
PIN# 4722-57-8232.000 (Iredell County)
3-BDR (360 GPD)
Saprolite System: No

5/12/2021

Septic System Calculation Worksheet

Initial System = 25% Reduction
Recommended Trench Depth: 30"

Gal / Day	Trench Width (Inches)	Trench Equivalency (Feet)	Soil Depth on 0% Slope
[illegible]	[illegible]	[illegible]	[illegible]

Slope	Auger#	Suitable Soil Depth (in.)	Total Suitable Depth/ Sap. Depth (in.)	Soil Needed (slope adjusted) (in.)	[1] Total Depth of Saprolite Required (2:1 ratio) factoring Soil Depth (in.)	Fill Material Required (in.)	Morphological Based Field LTAR
18%	A1	50	50	48.5	N/A	0	0.45
22%	A2	54	54	49.9	N/A	0	0.45
18%	A3	54	54	48.5	N/A	0	0.4
					LTAR Utilized		[illegible]
					Linear Feet Required		[illegible]

Repair System = Aerobic Drip Irrigation
Recommended Drip Tubing Depth: 6"

Gal / Day	Trench Width (Inches)	Trench Equivalency (Feet)	Soil Depth on 0% Slope
[illegible]	[illegible]	[illegible]	[illegible]

Slope	Auger#	Suitable Soil Depth (in.)	Total Suitable Depth/ Sap. Depth (in.)	Soil Needed (slope adjusted) (in.)	[1] Total Depth of Saprolite Required (2:1 ratio) factoring Soil Depth (in.)	Fill Material Required (in.)	Morphological Based Field LTAR
18%	A1	50	50	18.0	N/A	0	0.45
22%	A2	54	54	18.0	N/A	0	0.45
18%	A3	54	54	18.0	N/A	0	0.4
8%	A4	20	20	18.0	N/A	0	0.4
					LTAR Utilized		[illegible]
					Linear Feet Required		[illegible]

[illegible]

4722-57-8252.000 0.61 Ac
Lot 5 Pt 137 120 B2

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

SOIL/SITE EVALUATION
(Continuation Sheet)

Lippard Circle

LICENSED SOIL SCIENTIST STEVEN J. MELLIN

Sheet ___ of ___

PROPERTY ID #:
DATE OF EVALUATION: 5-6-21
COUNTY: Iredell

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	Loss Bt 18+ Bt2	0-18 18-50+	2 msbk /cL 1f msbk /cL	FR (SS SP) FR	5YR 5/4 5YR 6/6	150			III 0.45
2	Loss Bt 22+ Bt2	0-17 17-23 23-5	fill 1 msbk /scL 1 fsbk /sL 100'	FR (SS SP) FR (SS SP)	7.5YR 4/4 " 5/8	154"	-	-	IV 0.45
3	Loss Bt 18+ Bt2	0-17 17-28 28-54	fill 2 msbk /cL 1 msbk /scL	FR (SS SP) FR (SS SP)	10YR 5/4	154"			III 0.40
4	TS AB Bt 8+	0-8 8-70	1 msbk /sL 2 msbk /cL Top Repair (or both)	FR FR	7.5YR 5/4 5YR 4/6	120"			IV 0.4+

COMMENTS: 30 lbs/ft

RECEIVED FEB 16 2022

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*

X SEPTIC X

Application For:
( ) ~~New~~ Well Permit ( ) Well Repair Permit ( ) Well Abandonment
( ) Septic Improvement Permit (X) ~~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: 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: BUTLER 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: 120 LIPPARD SPRINGS CIRCLE
Subdivision Name: LIPPARD SPRINGS Section/Phase: _____ Lot Number: 137
Driving Directions: OLD MOUNTAIN RD NORTH / RT. ONTO RUMPLE HILL DR. RT. ONTO LIPPARD SPRINGS CIRCLE

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: 3
( ) Swimming Pool
( ) Other Addition/Structure: _____

CHECK FOUNDATION TYPE
(X) 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 (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.

Signature: Stan Cowley 2/9/22
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

1. *** APPLICANT AND OWNER ARE THE SAME. *** (Sign here) _____

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship* In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:
Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.
By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

2. I, PAM HARDING / BUTLER RIVER, am the legal owner(s) of the property located at 120 LIPPAN SPRINGS CIRCLE, identified as

PIN (Parcel Identification Number) 4722-57-8232, 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 / Butler River Development — 2/9/12

Signature of Owner(s) — Date

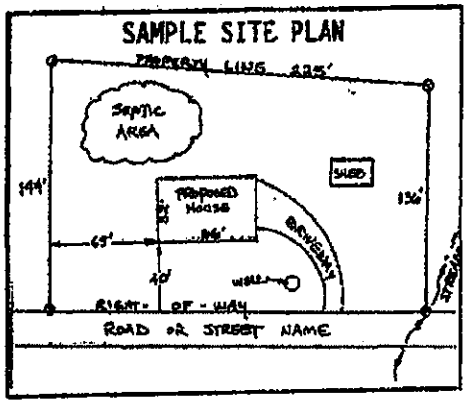
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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

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:

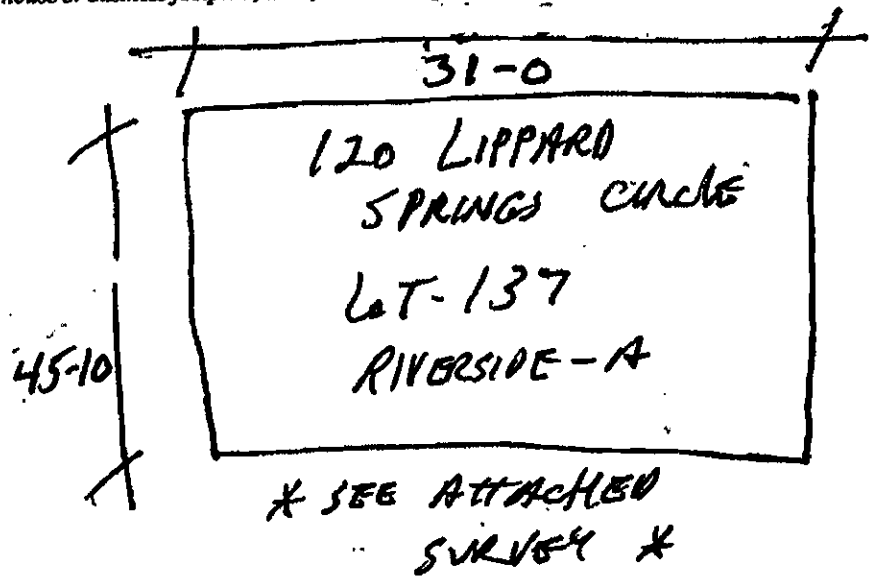
- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location
- (X) Preferred well location
- (X) Preferred septic system location
- (X) North arrow, or other sufficient indicator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



Signature: Stan Crowley

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

DATE 2/9/22

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, declarations or other encumbrances. Such burdens could exist on the property and not appear on this plat. Accordingly, users of this plat are warned to rely on their for the existence of such unrecorded burdens not shown hereon.

* This plat was drawn for the exclusive use of the party named hereon. Said certification 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 1:10,270.

* Area determined by coordinate computations.

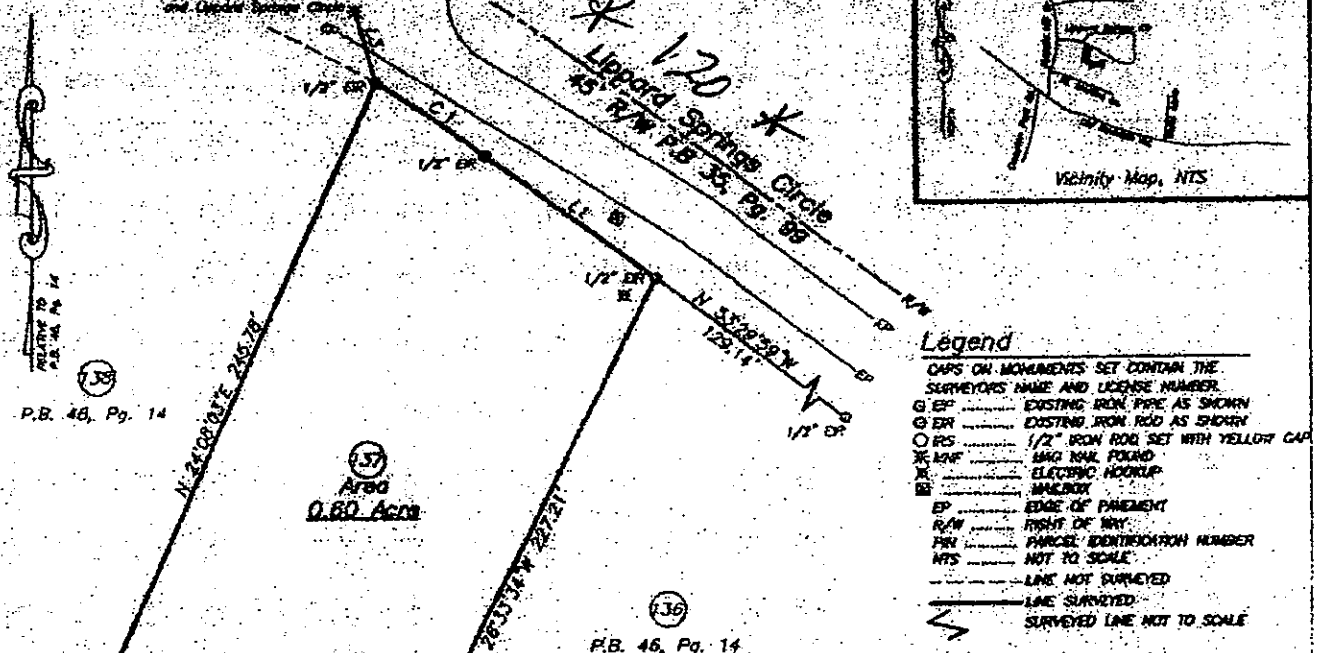
* No NCS or NCGS Horiz Control Monument found within 2,000 feet of the site.

* There is a 10' Drainage and Utility Easement along each side of all lot lines.

Witness this my original signature, registration number and seal this 1 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



Legend

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

- EIP ..... EXISTING IRON PIPE AS SHOWN
- EIR ..... EXISTING IRON ROD AS SHOWN
- RS ..... 1/2" IRON ROD SET WITH YELLOW CAP
- MNF ..... MAG NAIL FOUND
- ..... ELECTRIC HOOKUP
- ..... MAILBOX
- EP ..... EDGE OF PAVEMENT
- R/W ..... RIGHT OF WAY
- PIN ..... PARCEL IDENTIFICATION NUMBER
- NTS ..... NOT TO SCALE
- ..... LINE NOT SURVEYED
- ..... LINE SURVEYED
- ..... SURVEYED LINE NOT TO SCALE

Course	Bearing	Distance
L1	S 53°33'43" E	71.47'
L2	N 63°40'42" W	1.52'
L3	S 16°03'00" E	25.87'

Curve	Radius	Length	Chord	Chord Bear.
C1	477.50'	45.76'	45.75'	S 56°20'15" E

40 0 40 80 120
GRAPHIC SCALE - FEET 1" = 40'

Zoning

ZONING: R-20

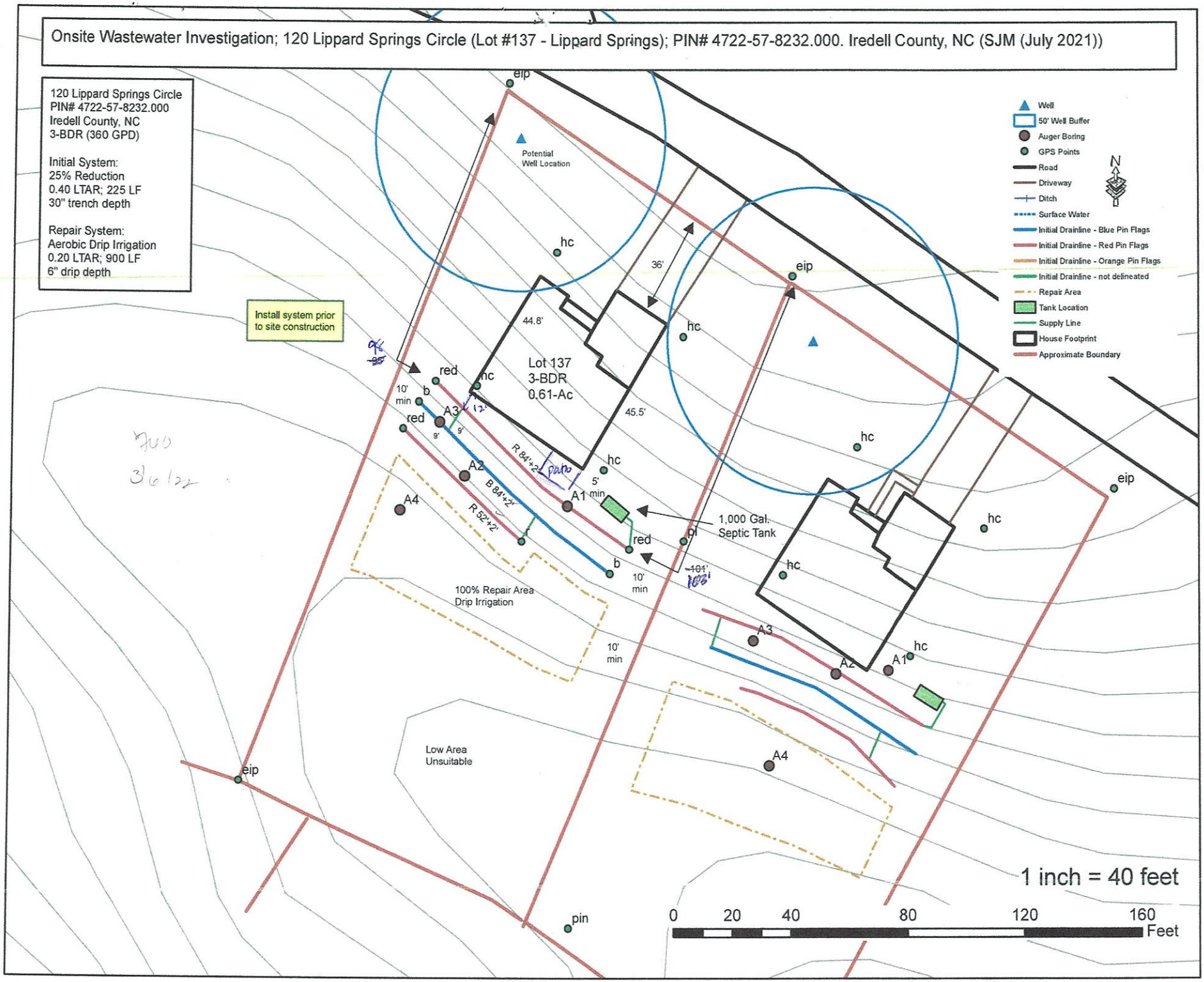
Front - 35'
Side - 15'
Rear - 35'

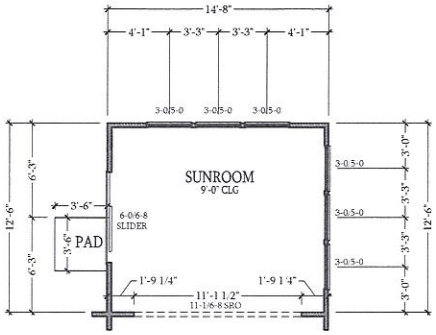
TED BENBOW Land Surveying
Proudly Surveying Iredell County Since 1989
630 SIGNAL HILL DRIVE EXT., STATESVILLE, NC 28625
Phone: (704) 878-9681
www.boundarydevelopment.com

Boundary Survey For:

Buller River Development

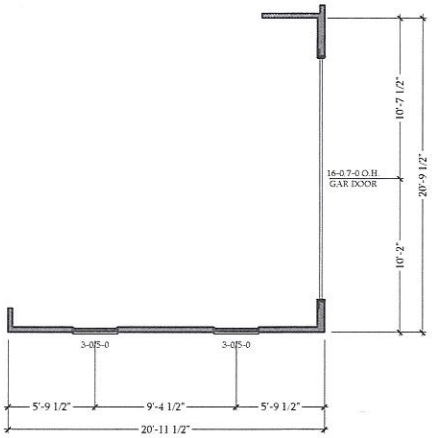
Statesville Outside Township, Iredell County, NC
Owners of Record: Danny M. Ervin
Deed Reference: D.B. 2457, Pg. 2210
Plat Reference: P.B. 46, Pg. 14
PIN: 4722-57-8232
Job Number: 2009171.DWG (2009165.CRD)
Field Work: 9-30-2020
Plat Date: 10-1-2020


Onsite Wastewater Investigation; 120 Lippard Springs Circle (Lot #137 - Lippard Springs); PIN# 4722-57-8232.000. Iredell County, NC (SJM (July 2021))
120 Lippard Springs Circle
PIN# 4722-57-8232.000
Iredell County, NC
3-BDR (360 GPD)
Initial System:
25% Reduction
0.40 LTAR; 225 LF
30" trench depth
Repair System:
Aerobic Drip Irrigation
0.20 LTAR; 900 LF
6" drip depth
Install system prior to site construction
Potential Well Location
Lot 137
3-BDR
0.61-Ac
44.8'
45.5'
36'
1,000 Gal. Septic Tank
100% Repair Area
Drip Irrigation
Low Area
Unsuitable
10' min
5' min
A1
A2
A3
A4
R 84'+2'
B 84'+2'
R 52'+2'
eip
hc
red
b
pi
pin
Well
50' Well Buffer
Auger Boring
GPS Points
Road
Driveway
Ditch
Surface Water
Initial Drainline - Blue Pin Flags
Initial Drainline - Red Pin Flags
Initial Drainline - Orange Pin Flags
Initial Drainline - not delineated
Repair Area
Tank Location
Supply Line
House Footprint
Approximate Boundary
N
1 inch = 40 feet
0 20 40 80 120 160
Feet



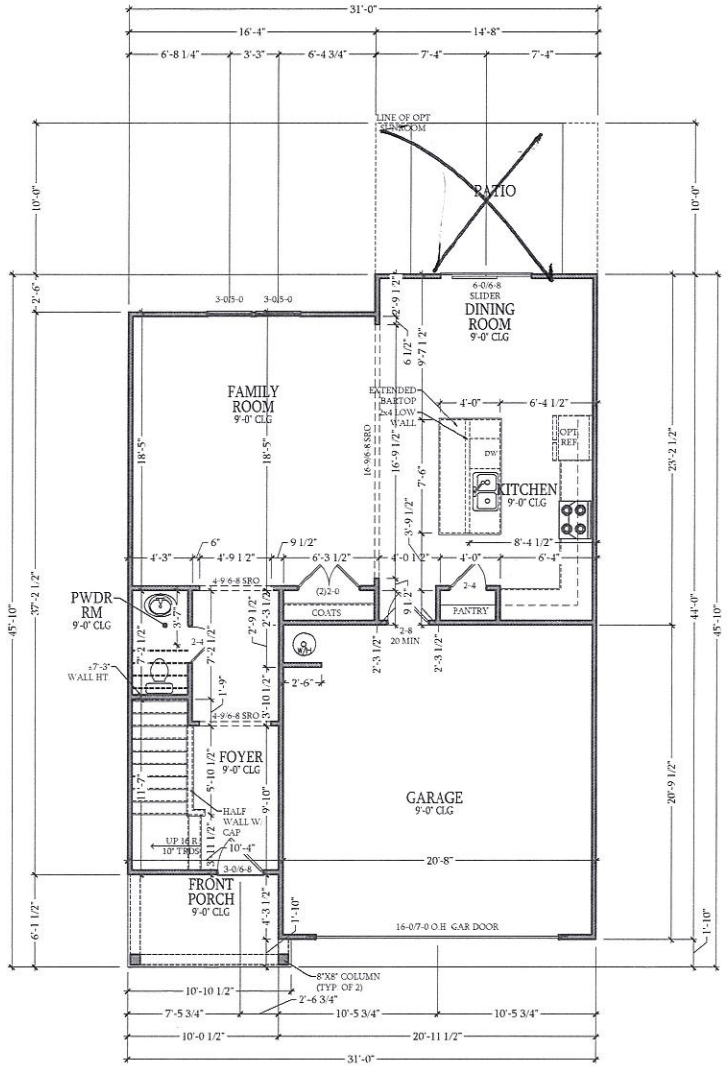
OPT SUNROOM
FLOOR PLAN

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



OPT SIDE LOAD GARAGE
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

Acknowledgement Of
Plans Submittal ONLY!
Date 3-15-22
Date 3/15/22

CORNERSTONE BUILDERS GROUP
www.CornerstoneCarolina.com
PO Box 5322
Clover, SC 29710
803 886 2724
www.CornerstoneCarolina.com

CornerStone PROPERTIES

RIVERSIDE
Elevation-A
FIRST FLOOR PLAN

REVISIONS:

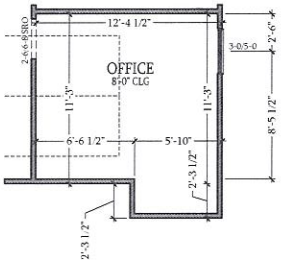
DATE	DRAWN BY

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

Acknowledgement Of
Plans Submittal ONLY!

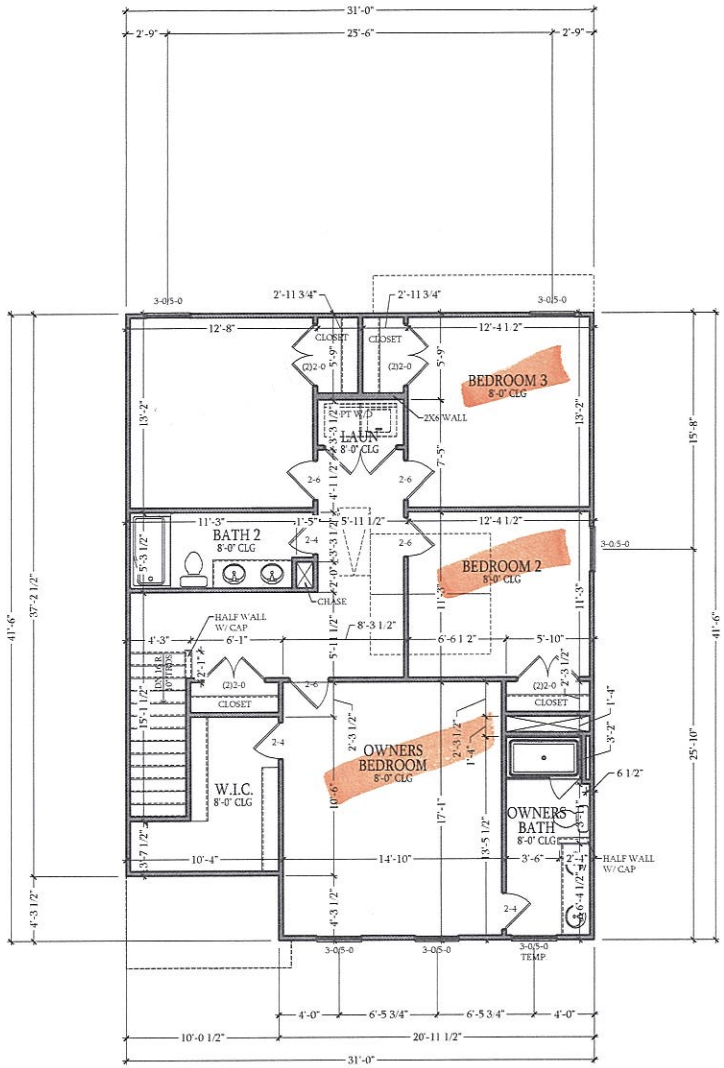
Date 3-4-22

Date 2/25/22



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

CORNERSTONE BUILDERS GROUP
www.CornerstoneCarolina.com
PO Box 5322
Clover, SC 29710
803 .866.2724
www.CornerstoneCarolina.com

CornerStone PROPERTIES

RIVERSIDE
Elevation-A
SECOND FLOOR PLAN

REVISIONS:

DATE	DRAWN BY

DESIGNED BY: CBG
DRAWN BY: CBG
DATE: XX-XX-XX
JOB #: 21-702
SHEET #:
5.20

IREDELL COUNTY · NC

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

APPLICATION NUMBER
311996 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4722578232.000	120 LIPPARD SPRINGS CIR	Iredell County

Owner Information	Applicant Information
Name: ERVIN DANNY M	Name: CORNERSTONE III PROPERTIES
Address: PO BOX 476	Address: 118 E KINGSTON AVE
TROUTMAN, NC 28166	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
0.6	35	35	15	15	N/A	NO

Remarks
SFD NEED DISCLAIMER

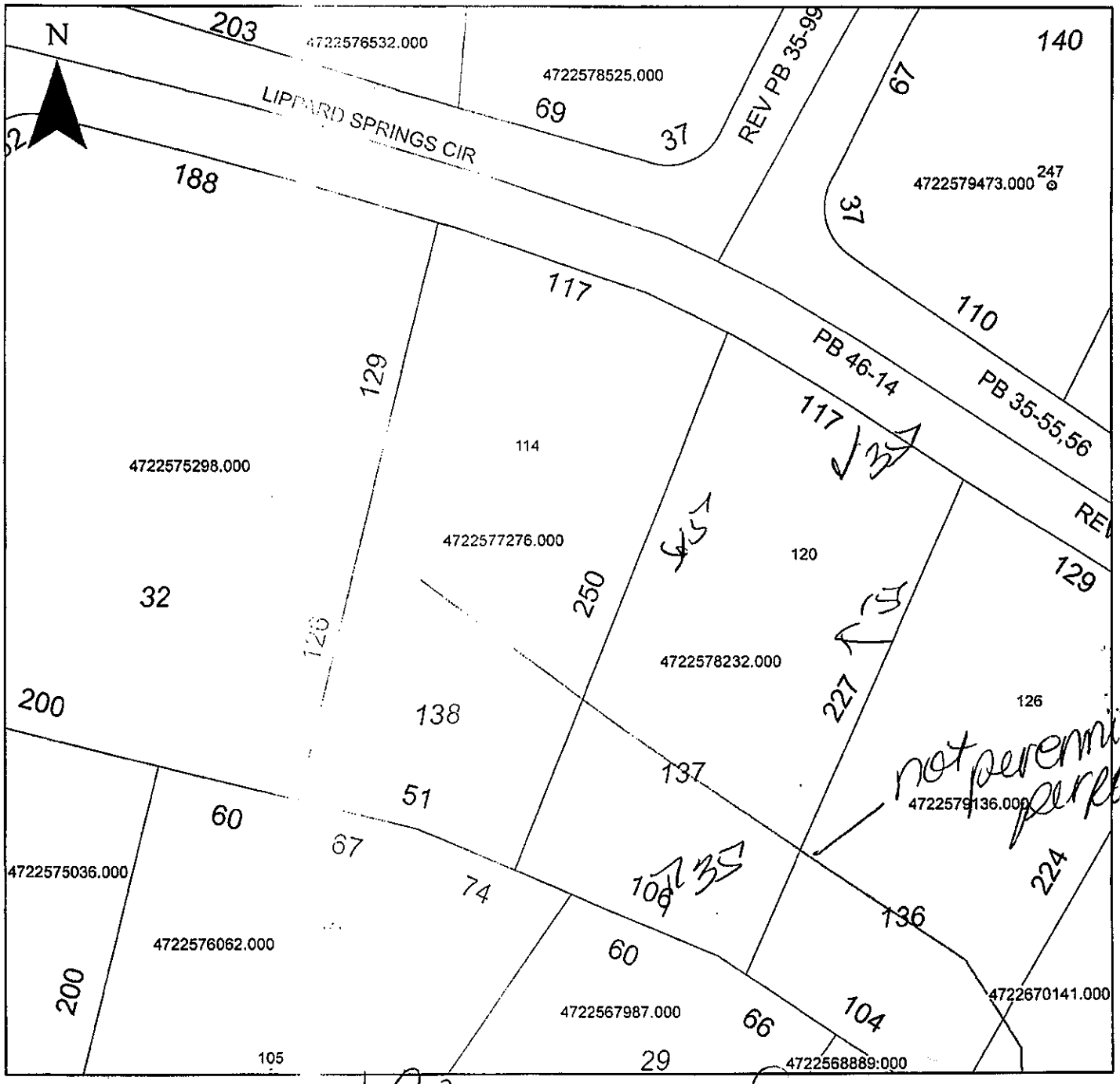
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions,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

Date: 10/21/2020

Signature of Owner/Contractor

Permit Number	311996	TOTAL FEES:	$77.25

ZONING DISCLAIMER



Property Address 120 Lippard Springs

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. Applicant further acknowledges that the 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.

Applicant

Date