ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP311980

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

PIN # 4722 --66 -- 5718

APPLICANT/OWNER: Cornerstone Properties APPLICANT ADDRESS: 118 East Kingston Ave CLT 28203

SITE ADDRESS: 158 Lippard Springs Circle, STV 28677 PHONE: 704-301 3229 ALT. PHONE —

SITE DIRECTIONS: Old MTN Rd Temple Hill Rd Lippard Springs Circle SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Lippard Springs SECTION: — LOT # 131 LOT AREA: 1.22 Ac DESIGN FLOW: 360 L.T.A.R.: 40

Septic Tank	1000	(gal)	STB	1100	Date	2-25-22	☒ New System	☐ Repair	☐ Expansion	System Type: I II (III) IV V VI	☒ Residence	No. Bedrooms	3	Water Supply	
Pump Tank		(gal)	PT		Date		System Description:	Gravity - 25% (NO Reduction)			☐ Business	No. Persons	6	☒ Private	
Pump Make		Model			Serial #		Repair System Description:	Aerobic Drip			☐ Other	No. Employees		☐ Public	
# Nitrification Fields	1	# Lines	6		Linear Ft:	300	Maintenance Agreement Required:	☐ YES	☒ NO		☐ Slab	☒ Crawl Space		☐ Community	
Trench Width	36	Trench Bottom Depth ~~(from Grade)~~		42in	Gravel Depth	—	☒ GRAVITY	☐ PRESSURE			☐ Basement w/ plumbing			☐ Basement w/o plumbing	

Comments / Conditions: NO Foundation Drains along Rear of House. Downlines can be no closer than 5ft to House Foundation. *Install System prior to Site Construction per LSS*

Installed as permitted

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 June 18, 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.

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. **CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION**

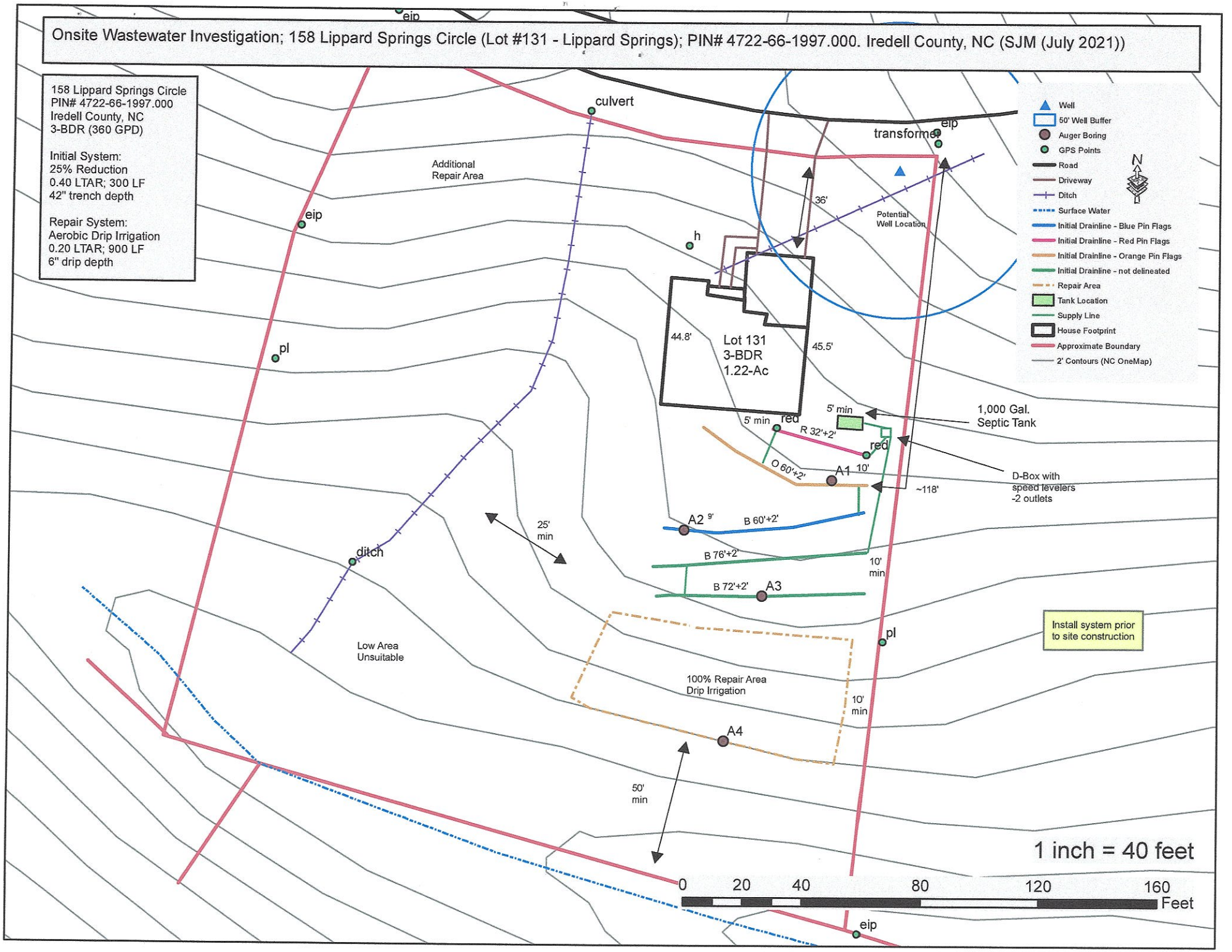
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☒ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date 3-4-22 Installed by: GALLE Excavating

IMPROVEMENT PERMIT by: [signature] Date: 6/21/2021 OPERATION PERMIT by: [signature] Date: 4/27/22

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 2/25/22 sting System Inspected by: Date:

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


Onsite Wastewater Investigation; 158 Lippard Springs Circle (Lot #131 - Lippard Springs); PIN# 4722-66-1997.000. Iredell County, NC (SJM (July 2021))
158 Lippard Springs Circle
PIN# 4722-66-1997.000
Iredell County, NC
3-BDR (360 GPD)
Initial System:
25% Reduction
0.40 LTAR; 300 LF
42" trench depth
Repair System:
Aerobic Drip Irrigation
0.20 LTAR; 900 LF
6" drip depth
culvert
eip
transformer
Additional Repair Area
36'
Potential Well Location
h
pl
44.8'
Lot 131
3-BDR
1.22-Ac
45.5'
5' min
red
R 32'+2'
O 60'+2'
A1
10'
1,000 Gal. Septic Tank
D-Box with speed levelers -2 outlets
~118'
A2
9'
B 60'+2'
25' min
ditch
B 76'+2'
10' min
B 72'+2'
A3
Low Area Unsuitable
100% Repair Area Drip Irrigation
A4
50' min
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
2' Contours (NC OneMap)
N
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

May 12, 2021

To: Owner – 158 Lippard Springs Circle (Lot #131)

Re: **Site/Soil Investigation(s) for 158 Lippard Springs Circle (Lot #131) in Statesville (Iredell County, North Carolina).**

I, Dan Bunnell, **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: Biller River Development / Dan Bunnell

Date: 5/13/21

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

158 Lippard Springs Circle
Lot #131 – Lippard Springs Subdivision
Session Law Permitting
Iredell County, North Carolina
Parcel ID# 4722-66-1997.000
3-Bedroom (360 GPD)

Prepared for:

Prepared by:
Alterative Septic Services



Steven J. Melin #1254

Steven J. Melin, LSS

June 18, 2021

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 1.22-acre lot at 158 Lippard Springs Circle in Statesville (Iredell County), NC. The proposed system design/layout is for a four-bedroom house. The septic area has been evaluated and determined to contain Group III soils at the proposed 42" trench depth. A long-term acceptance rate (LTAR) of 0.40 has been assigned to these soils for the initial system area (at a 42" depth) (0.20 for the repair aerobic drip irrigation LTAR) (*See attached soil descriptions).*

It is recommended to utilize a 25% Reduction type system (no reduction provided) for the septic drainfield. The (initial) septic system will require 300 linear feet of material to accommodate the 3-bedroom septic system. The recommended trench depth is 42-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 ft^2/3.0' trench equivalency= 300 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

158 Lippard Springs Circle (Lot #131)
PIN# 4722-66-1997.000 (Iredell County)
3-BDR (360 GPD)
Saprolite System: No

6/18/2021

Septic System Calculation Worksheet

Initial System = 25% Reduction (no reduction provided (>36" depth))
Recommended Trench Depth: 42"

Gal / Day	Trench Width (Inches)	Trench Equivalency (Feet)	Soil Depth on 0% Slope
360	36	3	54

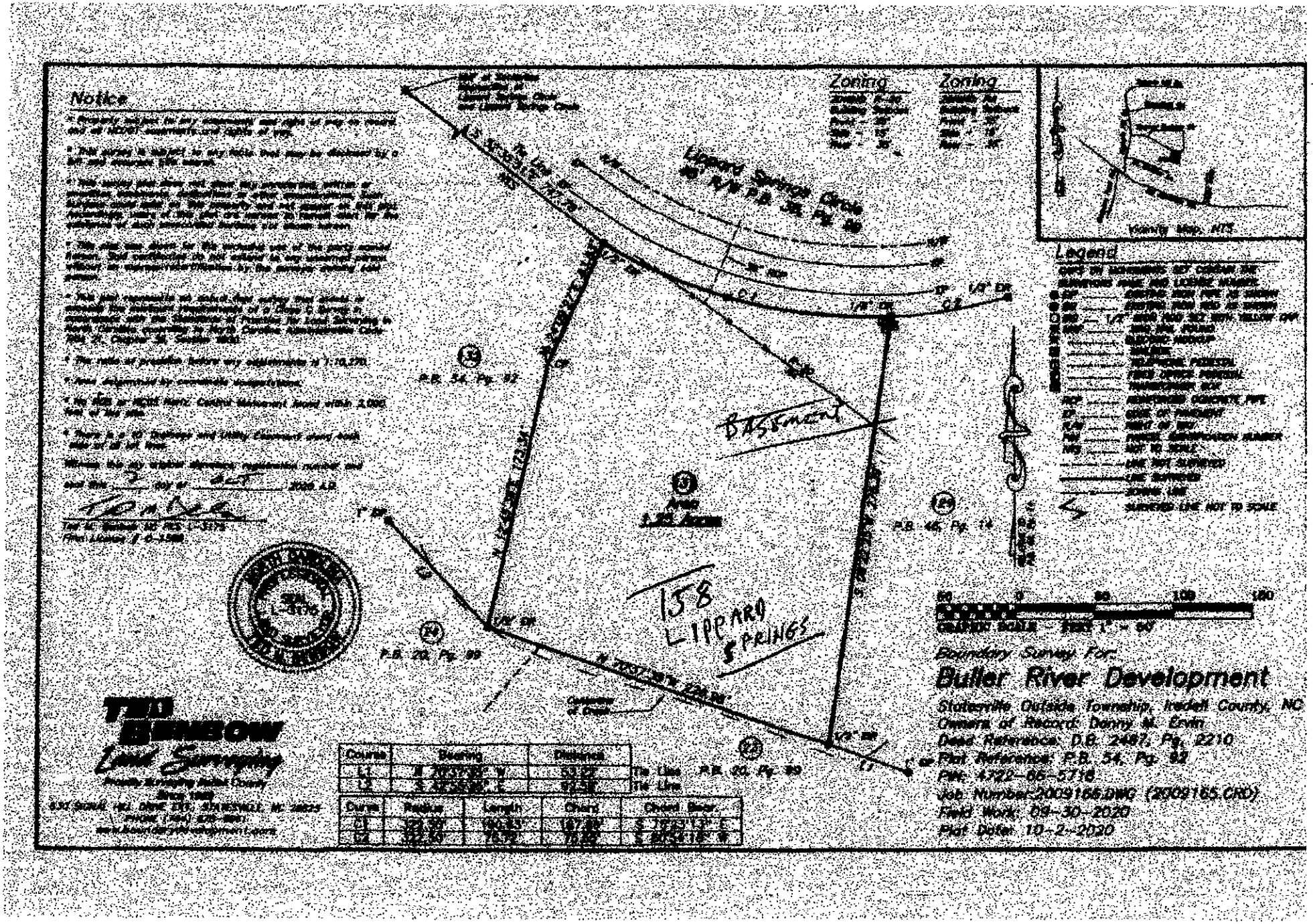
Slope	Auger#	Suitable Soil Depth (in.)	Total Suitable Depth/ Sap. Depth (in.)	Soil Needed (slope adjusted) (in.)	[1] Total Depth of Saprolite Required (2:1 ratio) factoring Soil Depth (in.)	Fill Material Required (in.)	Morphological Based Field LTAR
12%	A1	59	59	58.3	N/A	0	0.4
10%	A2	64	64	57.6	N/A	0	0.4
10%	A3	58	58	57.6	N/A	0	0.4
					LTAR Utilized		**0.40**
					Linear Feet Required		**300**

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

Gal / Day	Trench Width (Inches)	Trench Equivalency (Feet)	Soil Depth on 0% Slope
360			18

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
12%	A1	59	59	18.0	N/A	0	0.4
10%	A2	64	64	18.0	N/A	0	0.4
10%	A3	58	58	18.0	N/A	0	0.4
6%	A4	20	20	18.0	N/A	0	0.4
					LTAR Utilized		**0.20**
					Linear Feet Required		**900**

[1] [(soil depth needed-soil depth) x 2] + Soil depth = sap. Depth needed.
Above equation only to be used if the difference in soil depth needed and actual soil depth present = 12" or less


Notice
Zoning
Zoning
Legend
Vicinity Map, NTS
Lippard Springs Circle
P.B. 54, Pg. 92
P.B. 46, Pg. 14
P.B. 22, Pg. 99
P.B. 60, Pg. 99
BASEMENT
158
LIPPARD SPRINGS
Boundary Survey For:
Butler River Development
Statesville Outside Township, Iredell County, NC
Owners of Record: Danny M. Ervin
Deed Reference: D.B. 2497, Pg. 2210
Plat Reference: P.B. 54, Pg. 92
PIN: 4722-06-5718
Job Number: 2009166.DWG (2009165.CRD)
Field Work: 09-30-2020
Plat Date: 10-2-2020
Tim Brown Land Surveying
Course
Bearing
Distance
Curve
Radius
Length
Chord
Chord Bear.

4722-66-1997-00 Lot # 131

1.22-Ac

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

SOIL/SITE EVALUATION

(Continuation Sheet) 158

Sheet ___ of ___

LICENSED SOIL SCIENTIST STEVEN J. [illegible]

PROPERTY OWNER #:

DATE OF EVALUATION: 5-6-21

COUNTY: Iredell

Lipan Springs Circle

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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	Linear Bt 12% BL	0-24	f. sl						~~IV~~
		24-35	2 mod sbk / cl	fr	25 Ym 5/4				
		35-59	2 msbk cl		5Y 6/2	59"			0.4
			42" Restrictive Layer						
2	Linear/ Cut 10%	Ap 0-8	1 mgr / L	fr	5Y 3/2				~~III~~
		Bt 8-38	2 msbk / CL	fr (ss, ps)	5Y 4/4				0.4
		Bt 38-64	1 msbk / scl	fr	7.5Y 4/2 +m	64"			
3	Linear Cut 10%	Ap 0-12	1 mgr / sl	fr					~~III~~ IV
		Bt 12-37	2 msbk / cl c	fr (ss, ps)	5Y 5/6				0.3 - 0.4
		Bt 37-58	1 msbk / scl	fr	2.5Y 5/6 +m	58"			
4	Linear Cut 10%	Ap 0-7	1 mgr / sl	fr	10Y 3/2				~~III~~
		Bt 7-20	2 msbk / CL	fr (ss, ps)	5Y 4/4	20"			0.4
			Restrictive clear at		for more continuous (thin chert)				

COMMENTS:

38" 60" 42" Restrictive Layer

15 NP 15 72 b 44 Restrictive Layer

RECEIVED FEB 17 2021

X ALREADY PERMITTED, CHANGED PLAN X

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

Iredell County Health Department – Environmental Health Division

X SEPTIC X

PAGE 1: *APPLICATION FORM*

Application For:
( ) Septic Improvement Permit ( ) New Well Permit (✓) Authorization to Construct ( ) Well Repair Permit ( ) Existing System Inspection ( ) Well Abandonment ( ) 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 ( ) Custom Site Plan, scaled no more than 1 inch = 60 feet
Place an (X) beside whichever is submitted if applicable

Applicant Information: (PRINT CLEARLY)
Applicant Name: CORNERSTONE III PROPERTIES Address: 118 EAST KINGSTON AVE, CLT. Zip: 28203
Applicant Email: STAN@CORNERSTONESP.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: 158 LIPPARD SPRINGS CIRCLE
Subdivision Name: LIPPARD SPRINGS Section/Phase: _____ Lot Number: 131
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*

(✓) 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
(✓) Crawl Space Foundation
( ) Concrete Slab Foundation
( ) Basement with Plumbing
( ) Basement without Plumbing

Non-Residential Site Development: Type of Business: _____ Max. Number of Seats/Beds/Other: _____
Square Footage of Building: _____ Max. Number of Employees: _____

Water Supply: ( ) Replacement Well – Reason: _____ Number of Houses: 1 Number of Persons: _____
( ) Multi-connection Well
( ) 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 (or legal representative signature (SIGNATURE REQUIRED)) 2/9/22 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 158 LIPPARD SPRINGS CIRCLE, identified as PIN (Parcel Identification Number) 4722-66-1992, 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 — 2/9/22

Signature of Owner(s) — Date

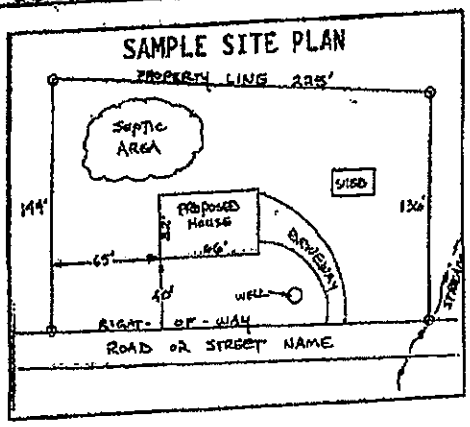
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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:

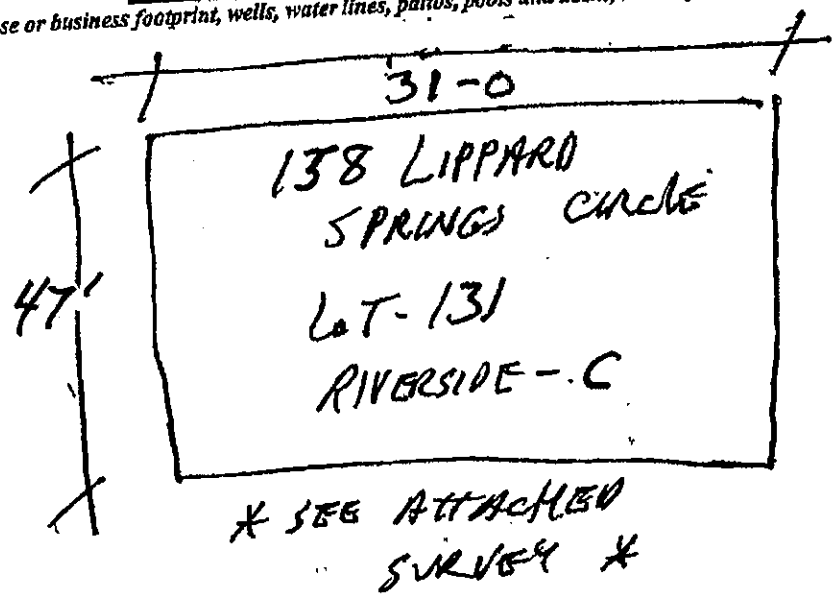
- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location
- (X) Preferred well location
- (X) Preferred septic system location
- (X) North arrow, or other sufficient indicator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

2/9/22

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

Notice

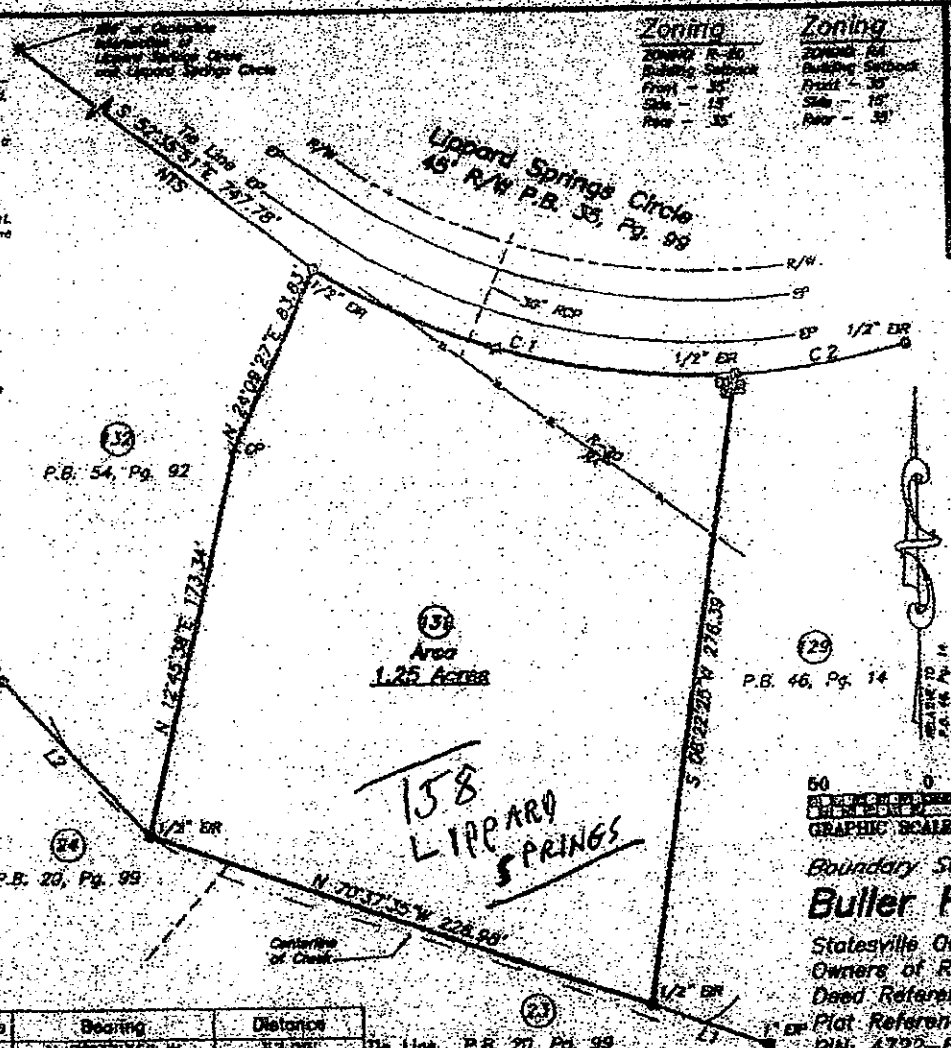
- Property subject to any easements and right of way on record and all NCDOT easements and rights of way.
- This survey is subject to any facts that may be disclosed by a full and accurate title search.
- This survey plat does not show any unrecorded, written or unwritten easements, dedications or other encumbrances. Such burdens could exist on this property and not appear on this plat. Accordingly, users of the 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 1:10,270.
- Area determined by coordinate computations.
- No NGS 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.

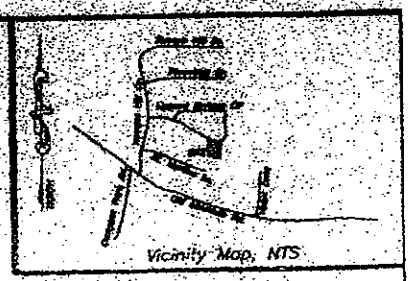
Witness my original signature, registration number and seal this 2 day of Oct 2020 A.D.

Ted M. Benbow

Ted M. Benbow PLS L-3175
Firm License # C-1582

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
- IRS ..... 1/2" IRON ROD SET WITH YELLOW CAP
- LNF ..... LEAD NAIL FOUND
- ..... ELECTRIC HOOKUP
- ..... MAILBOX
- ..... TELEPHONE PEDESTAL
- ..... FIBER OPTICS PEDESTAL
- ..... TRANSFORMER BOX
- RCP ..... REINFORCED CONCRETE PIPE
- EP ..... EDGE OF PAVEMENT
- R/W ..... RIGHT OF WAY
- PIN ..... PARCEL IDENTIFICATION NUMBER
- NTS ..... NOT TO SCALE
- ..... LINE NOT SURVEYED
- ..... LINE SURVEYED
- ..... ZONING LINE
- SURVEYED LINE NOT TO SCALE

50 0 50 100 150
GRAPHIC SCALE - FEET 1" = 50'

Course	Bearing	Distance	
L1	N 70°37'35" W	53.27'	Tie Line P.B. 20, Pg. 99
L2	S 47°55'55" E	82.58'	Tie Line

Curve	Radius	Length	Chord	Chord Bear.
C1	322.50'	190.63'	187.88'	S 79°23'13" E
C2	322.50'	75.72'	75.53'	S 60°54'18" W

TED BENBOW Land Surveying
Proudly Surveying Iredell County Since 1983
532 SCALE HILL DRIVE EXT. STATESVILLE, NC 28625
PHONE (704) 878-3651
www.brandonjdevelopment.com

Boundary Survey For:

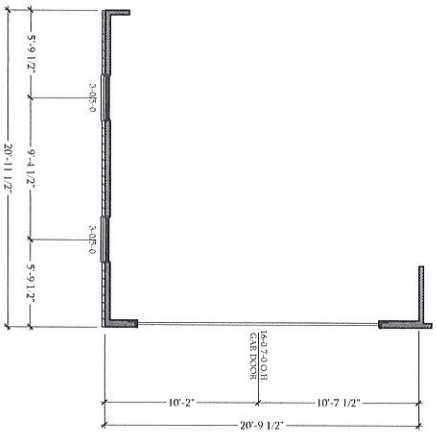
Buller River Development

Statesville Outside Township, Iredell County, NC
Owners of Record: Danny M. Eryin
Deed Reference: D.B. 2467, Pg. 2210
Plat Reference: P.B. 54, Pg. 92
PIN: 4722-66-5718
Job Number 2009166.DWG (2009165.CRD)
Field Work: 09-30-2020
Plat Date: 10-2-2020

Acknowledgement Of
Plans Submittal ONLY!

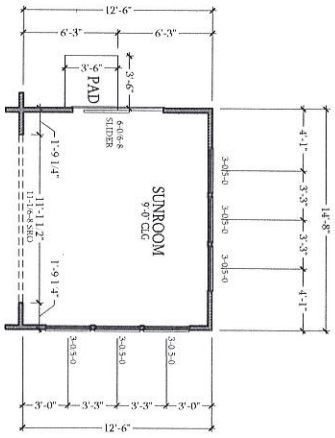
Date 2-25-22.

Date 3-4-22



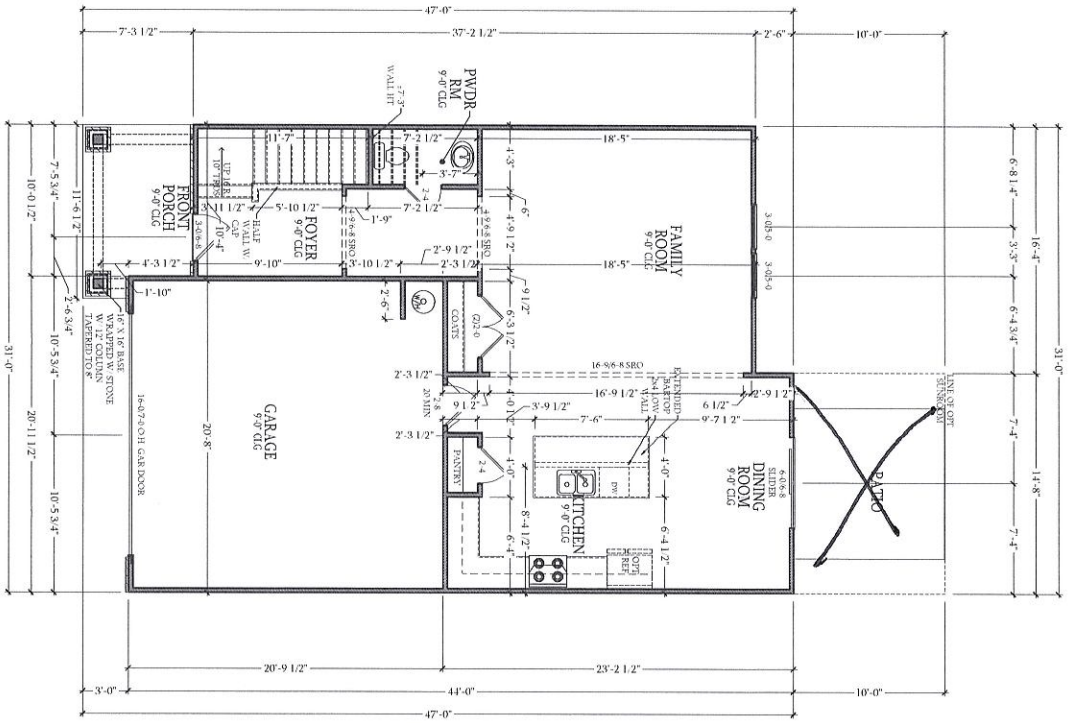
OPT SIDE LOAD GARAGE
FLOOR PLAN

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

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

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

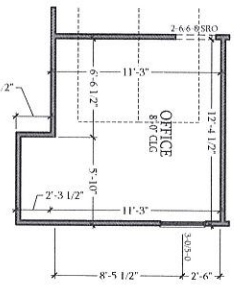
Acknowledgement Of
Plans Submittal ONLY!

Date 3-4-22

Date 3-4-22

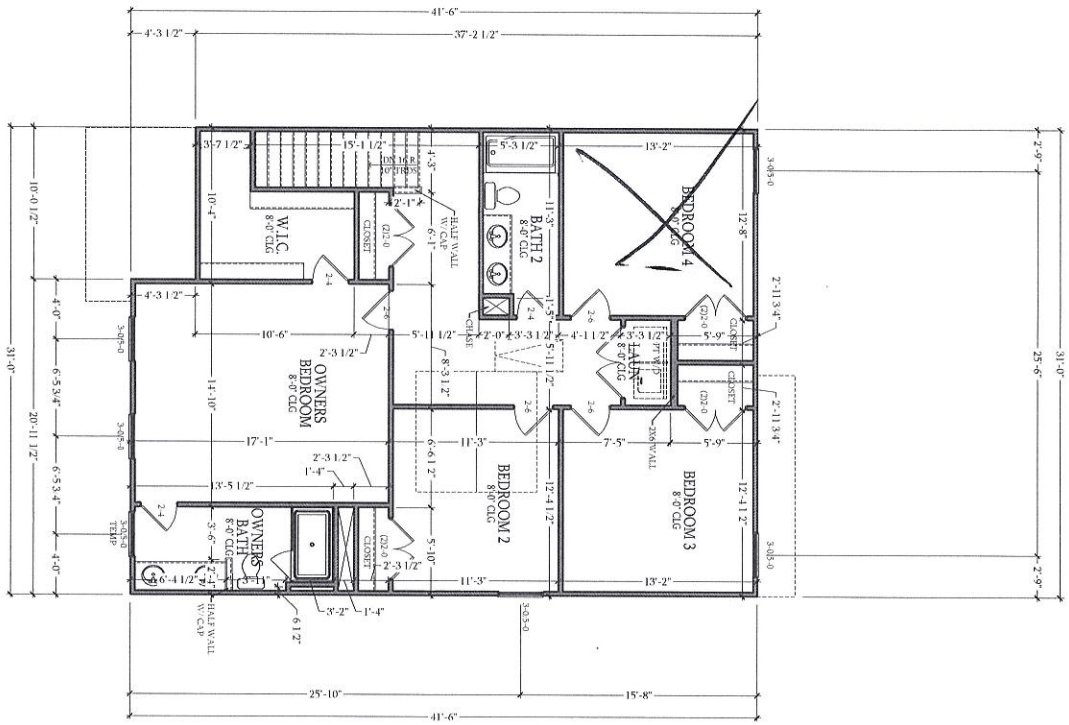
OPT OFFICE
FLOOR PLAN

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



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

RIVERSIDE

Elevation-C

SECOND FLOOR PLAN

CornerStone PROPERTIES

CORNERSTONE BUILDERS GROUP
www.CornerstoneCarolina.com

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

IREDELL COUNTY · NC

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

APPLICATION NUMBER
311980 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4722665718.000	158 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	R20,RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.25	35	35	15	15	N/A	NO

Remarks
SFD NEED DISCLAIMER

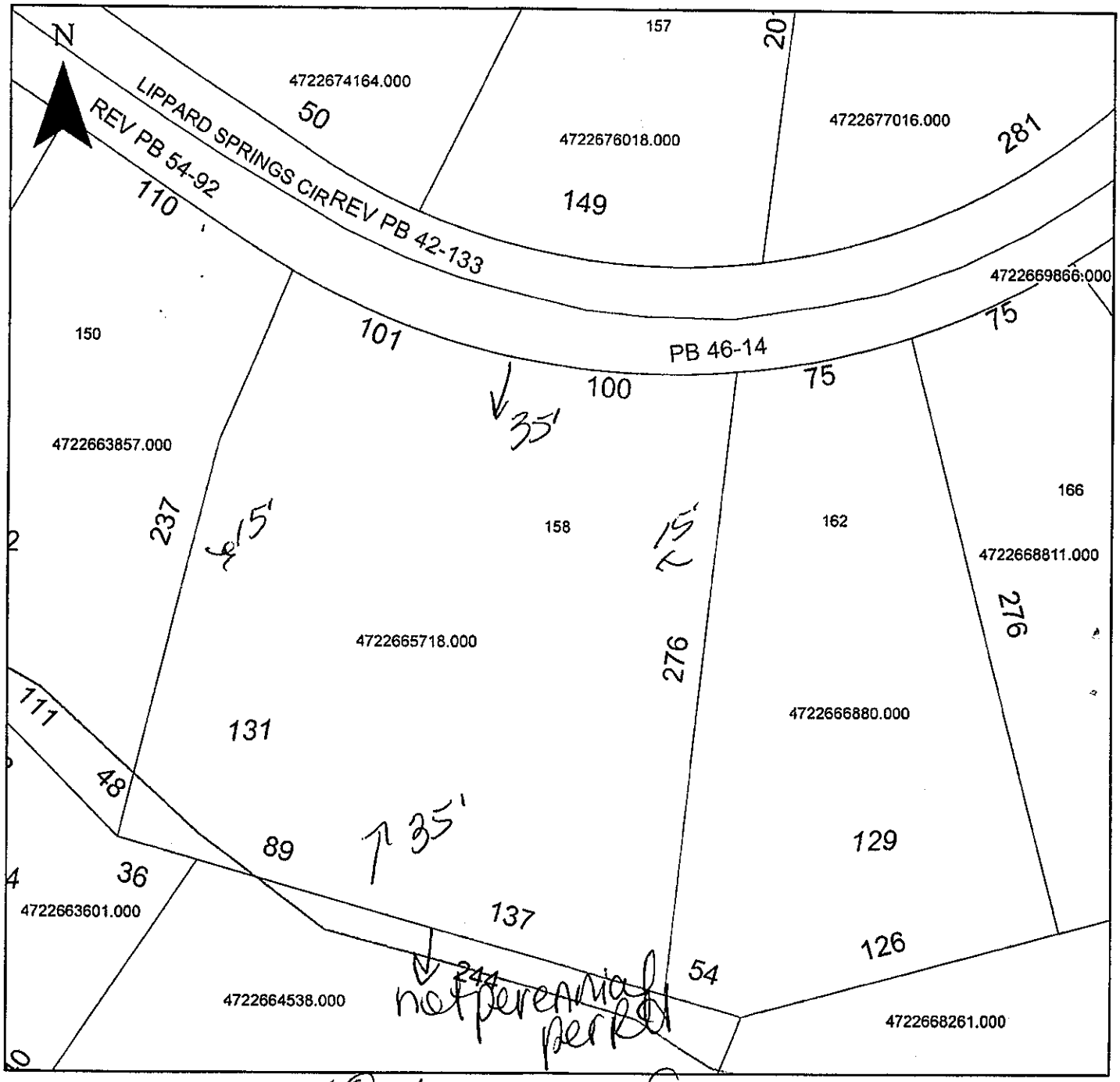
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions,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

Signature of Owner/Contractor

Date: 10/21/2020

Permit Number	311980	TOTAL FEES:	$77.25

ZONING DISCLAIMER



Property Address 158 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