ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP 318813

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

PIN # 4749 -64 -7633

APPLICANT/OWNER: Cornerstone III Properties APPLICANT ADDRESS: 259 Textile Way Ft Mill SC 29715

SITE ADDRESS: 144 Bradford Lane Statesville NC 28625 PHONE: 704-301-3229 ALT. PHONE -

SITE DIRECTIONS: Jennings Rd @ on Friendship @ on Bradford Loton Right

SUBDIVISION: Bradford Acres SECTION: - LOT # 6 LOT AREA: SAP CONTROLLED: ☐ YES ☒ NO

DESIGN FLOW: 360 L.T.A.R.: .30

Septic Tank 1000 (gal)	STB 760	Date 3/16/22	☐ 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 3/18/22	System Description: PM-25% Reduction	☐ Business	No. Persons 6	☐ Private
Pump Make Goulds	Model WE0512HH1	Serial #	Repair System Description: PM-25% Reduction	☐ Other	No. Employees	☒ Public
# Nitrification Fields #1	# Lines 3	Linear Ft 300.	Maintenance Agreement Required: ☐ YES ☒ NO	☐ Slab	☒ Crawl Space	☐ Community
Trench Width 36	Trench Bottom Depth(Low side) 24	Gravel Depth -	☐ GRAVITY ☒ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing

Comments / Conditions: 5/9/22 Checked drainlines, supplines & set pressure, MA

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:

Three Oaks Engineering

LSS # 1218/1340 Dated Nov 23, 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.

*Installed Chm 36 as drawn

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

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

Owner / Applicant Signature: Tom W Date: 12/2/21 Installed by: Lentz Wastewater

IMPROVEMENT PERMIT by: Benjamin A Beck Date: 11/24/2021 OPERATION PERMIT by: Cory Wilt Date: 6/27/22

AUTHORIZATION TO CONSTRUCT by: Benjamin A Beck Date: 11/24/2021 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	5/9/22	MD
Tanks Checked	5/5/22	MW
Pressure Manifold or Valve Box Checked	5/9/22	MD
Pressure Head Set	5/9/22	MD
Electrical Checked	6/27/22	CW
Floats Set	5/9/22	MD
Alarm Checked	5/9/22	MD
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? _____	

Notice

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

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

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

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

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

* The ratio of precision before any adjustments is 1:6,841.

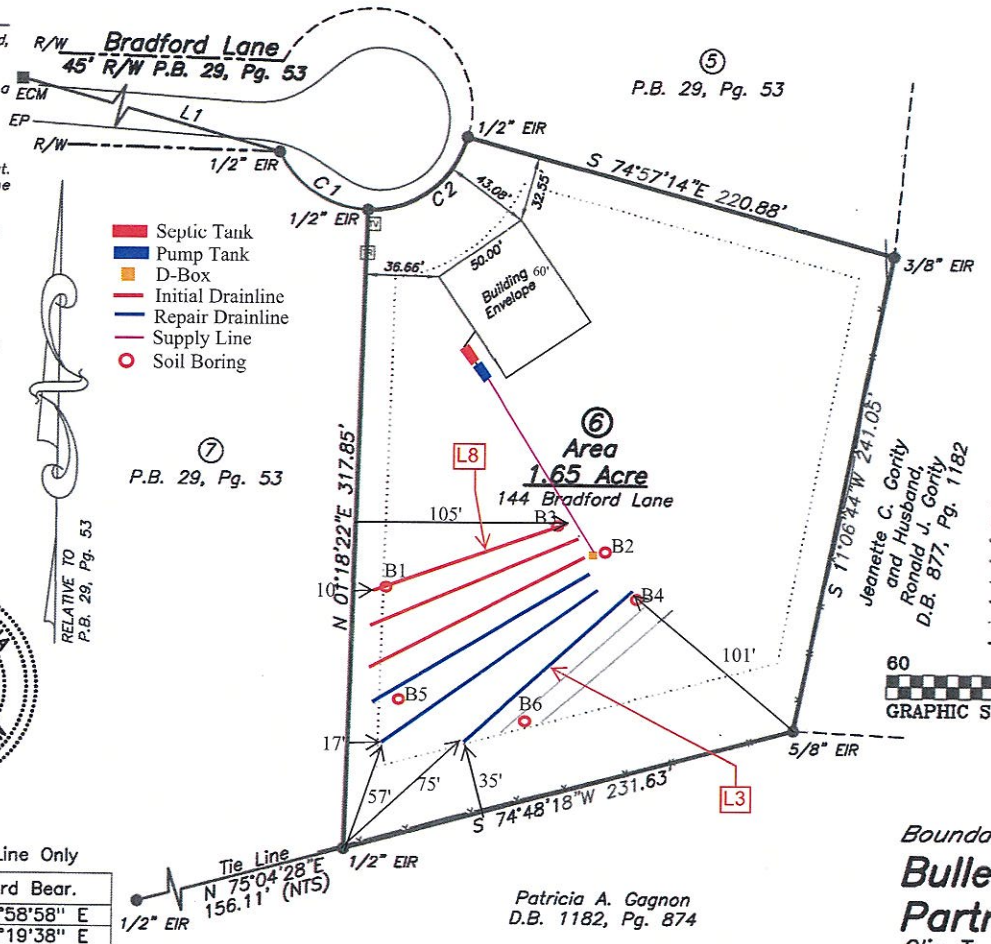
* Area determined by coordinate computations.

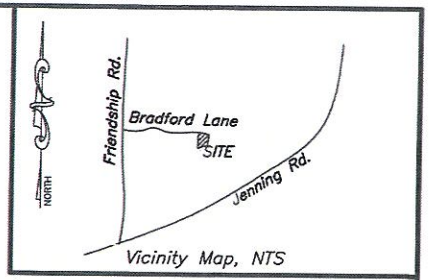
* No NGS or NCGS Horiz. Control Monument found within 2,000 feet of the site.

Witness this my original signature, registration number and seal this 13th day of May, 2021 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.

- IRS ..... 1/2" IRON ROD SET WITH YELLOW CAP
- EIP ..... EXISTING IRON PIPE AS SHOWN
- EIR ..... EXISTING IRON ROD AS SHOWN
- ECM ..... EXISTING CONCRETE MONUMENT
- TR ..... TRANSFORMER
- TV ..... CATV PEDESTAL
- PIN ..... PARCEL IDENTIFICATION NUMBER
- EP ..... EDGE OF PAVEMENT
- R/W ..... RIGHT OF WAY
- NTS ..... NOT TO SCALE
- LINE SURVEYED
- TIE LINE SURVEYED
- LINE NOT SURVEYED
- RIGHT-OF-WAY LINE
- SETBACK LINE
- FENCE

60 0 60 120 180
GRAPHIC SCALE – FEET 1" = 60'

Course	Bearing	Distance
L1	S 74°44'04" E	186.12'

Tie Line Only

Curve	Radius	Length	Chord	Chord Bear.
C1	50.00'	55.14'	52.39'	S 56°58'58" E
C2	50.00'	66.41'	61.64'	N 53°19'38" E

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

Zoning

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

Flood Hazard Area Certificate

According to mapping provided by the Federal Emergency Management Agency and shown on the Digital Flood Insurance Rate Map (DFIRM) Panel 4749, Iredell County, North Carolina, effective date: 3/18/2008, the property shown hereon is not located within a special flood hazard area. The property is entirely within an area designated "Zone X – other areas". Areas determined to be outside the 0.2% annual chance floodplain: areas outside future conditions 1% annual chance floodplain.

Boundary Survey For:

Buller River Development Partners, LP

Olin Township, Iredell County, NC
Owners of Record: Louis Perugini and Pamela Perugini
Deed Reference: D.B. 1905, Pg. 1221
Plat Reference: P.B. 29, Pg. 53
PIN: 4749-64-5640
Job Number:2105123.DWG (2105124.CRD)
Field Work: 5-12-2021
Plat Date:5-13-2021

Initial & Repair Systems - 144 Bradford Lane								
Field Line #	Color	Initial/Repair	Field Length	System Length	Setup #1	Setup #2	Setup #3	Relative Elevation
3	B	Repair	110	110	5.07			118.06
4	W	Repair	130	110	6.05			117.08
5	Y	Repair	124	100	7.64			115.49
6	R	Initial	120	100	8.92			114.21
7	B	Initial	109	100	10.1			113.03
8	W	Initial	100	100	11.27	4.94		111.86
				Concrete Pad		14.85	5.72	101.95
				Pump Tank/HC			5.08	102.59
				EIP			7.67	100

F. Proper Operation Check

1. After all components of the wastewater disposal system have been installed and connected, the system shall be checked for proper operation.

G. Final Landscaping

1. The drainfield shall be shaped to shed rainwater and be free from low spots.
2. The entire area of the drainfield should be planted with grass as soon as possible to prevent erosion. The soil should be properly tilled, limed (if necessary) and fertilized prior to planting. After applying grass seed, the area should be heavily mulched with straw or other suitable material.

H. Utility/Drive Conflicts

1. The builder and property owner must take special care in planning for utilities (water, power, gas, telephone, cable lines, etc.). All utilities shall be kept clear of the septic system and its proposed repair area. Improper planning for underground utilities can negatively impact the installation and, in some cases, cause irreparable damage and permit revocation.
2. Water lines must be kept at least ten (10) feet from any portion of the septic system.
3. Irrigation systems should not be placed in the drain field area.

Maintenance

I. Operation and Maintenance

The designed system is classified as a Type III-B/G wastewater treatment and disposal system and does not require ongoing maintenance via a person certified (Certified Subsurface System Operator) by the North Carolina Department of Environment and Natural Resources to operate subsurface wastewater systems (Section .1961 Maintenance of Sewage Systems). However, the following maintenance should be considered by the owner.

1. The septic tank shall be pumped out when the solids within the septic tank reach an elevation that is equivalent to 25% of the volume of the tank. In some situations, the tanks may need to be pumped more frequently; for example, if you are using a garbage disposal, it is recommended that the septic and pump tanks be cleaned out annually.

Repair System Design Specifics

Effluent Loading Rate:	0.300 GPD per sq. ft.
Drainfield Type:	Accepted System (25% Reduction)
Maximum Trench Depth:	13 Inches, on the low side
Minimum Outside Cover:	5 Inches
Supply Size:	2 Inch
Supply Line Length:	Approximately 140 feet
Number of Drainlines:	3
**Drain Lines:	(3) 3' Wide x 100' Long
**Drainline Spacing:	9 Foot on Centers
Total Trench Length:	300 Linear Feet
Distribution Method:	4" SCH80 Pressure Manifold
Number of Taps:	3x 1/2in SCH40
Dosing Volume:	127 Gallons
Pump Run Time:	5.94 Minutes
Pressure Head:	2 Feet
Elevation/Friction Head	23.8 Feet
*Pump Requirements:	21.33 GPM at 25.8 Feet TDH
Recommended Pump:	Zoeller 130 Series or equiv.
Additional Soil Cover:	3 inches

* Total Dynamic Head (TDH) for system is estimated based upon existing elevations, approximate pump off elevation, design pressure head and supply line length. Total Dynamic Head should be reconfirmed by septic contractor at the time of system installation based upon actual tank depth and pressure manifold height.
** See drainfield layout for site locations and more details.

Initial System Design Specifics

Effluent Loading Rate:	0.300 GPD per sq. ft.
Drainfield Type:	Accepted System (25% Reduction)
Maximum Trench Depth:	24 Inches, on the low side
Supply Size:	2 Inch
Supply Line Length:	Approximately 110 feet
Number of Drainlines:	3
**Drain Lines:	(3) 3' Wide x 100' Long
**Drainline Spacing:	9 Foot on Centers
Total Trench Length:	300 Linear Feet
Distribution Method:	4" SCH80 Pressure Manifold
Number of Taps:	3x 1/2in SCH40
Dosing Volume:	127 Gallons
Pump Run Time:	5.94 Minutes
Pressure Head:	2 Feet
Elevation/Friction Head	19.62 Feet
*Pump Requirements:	21.33 GPM at 21.62 Feet TDH
Recommended Pump:	Zoeller 130 Series or equiv.

* Total Dynamic Head (TDH) for system is estimated based upon existing elevations, approximate pump off elevation, design pressure head and supply line length. Total Dynamic Head should be reconfirmed by septic contractor at the time of system installation based upon actual tank depth and pressure manifold height.
** See drainfield layout for site locations and more details.

Michael G. Wood, LSS
620 Lee Fox Lane
Hillsborough, NC 27278

PROPERTY ID #: 4749-64-7633
COUNTY: IREDELL

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM**

OWNER: BUTLER RIVER DEVELOPMENT PARTNERS
ADDRESS: 118 E. KENGSTON AVE., UNIT 16, CHARLOTTE, NC 28203
PROPOSED FACILITY: RES PROPOSED DESIGN FLOW (.1949): 480
LOCATION OF SITE: 144 BRADFORD LN, STATESVILLE, NC
WATER SUPPLY: ☐ Private ☑ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut

DATE EVALUATED: 5/23/21
PROPERTY SIZE: 1.65 ACRE
PROPERTY RECORDED:

TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L-T / 4	0-15	GR SBK / sl	VFR / N	–	>38	–	–	PS 0.4
		15-38+	SBK / cl	FR / S					
2	L / 11	0-5	GR / sl	VFR / N	–	26	26	–	PS 0.275
		5-17	SBK / C	FI / S					
		17-26	SBK / cl	FR / S					
		26+	M / l	FR / N					
3	L-T / 4	0-16	GR SBK / sl	VFR / N	–	>39	–	–	PS 0.4
		16-39+	SBK / scl	FR / S					
4	L / 11	0-7	GR / sl	VFR / N	–	29	29	–	PS 0.3
		7-25	SBK / scl	FR / N					
		25-29	SBK / C	FI / S					
		29+	M / l	FR / S					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	III-B 25% Red	III-B 25% Red
Site LTAR	0.30	0.30

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PROV. SUITABLE
EVALUATED BY: M. WOOD, E. MORGAN
OTHER(S) PRESENT:

COMMENTS:

LICENSED SOIL SCIENTIST MICHAEL G. WOOD 1219 STATE OF NORTH CAROLINA

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

PROPERTY ID #: 4749-64-7633

DATE OF EVALUATION: 5-23-21

COUNTY: IREDELL

144 BRADFORD

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
5	L/7	0-9	GR/sl	VFR/N	–	38	38	–	PS 0.3
		9-21	SBK/C	FR/S					
		21-38	SBK/cl	FR/S					
		38	M/Q	FR/S					
6	L/6	0-15	GR-SBK/sl	VFR/N	–	27	27	–	PS 0.3
		15-27	SBK/scl	FR/N					
		27	M/R	FR/N					

COMMENTS:

Michael G. Wood

LICENSED SOIL SCIENTIST MICHAEL G. WOOD 1219 STATE OF NORTH CAROLINA

SL-2018-114 LSS Evaluation

144 Bradford Lane

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).

Owner's Signature — Date 6/24/21

Owner's Legal Representative Signature — Date 6/24/21

LSS Signature — Date 6/21/21

LICENSED SOIL SCIENTIST MICHAEL G. WOOD 1219 STATE OF NORTH CAROLINA

Residential Subsurface Wastewater Treatment and Disposal System Proposal

for

144 Bradford Lane
Olin Township, Iredell County, NC

PIN # 4749-64-7633
November 23, 2021

Prepared for:

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



Prepared by:

Michael G. Wood, LSS
Evan T. Morgan, LSS
Three Oaks Engineering
324 Blackwell Street, Suite 1200
Durham, NC 27701



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).

ST. CHARLES "C"
RECEIVED NOV 16 2021

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

AP- 318813

Iredell County Health Department – Environmental Health Division

SEPTIC

PAGE 1: *APPLICATION FORM*

Paid $500.00

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

FP W/EXISTING Permit

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 II PROPERTIES Address: 259 TEXTILE WAY FT. MILL SC Zip: 29715
Applicant Email: STAN@CORNERSTONEII.COM Phone: 704 301 3229 Alt. Phone: X
Owner Name: ROLLER RIVER DEVELP. Address: 259 TEXTILE WAY FT. MILL, SC Zip: 29715
Owner Email: N/A Phone: N/A Alt. Phone: N/A

Property Information:

Street Address: 144 BRADFORD LANE PIN# 4749-64-5640
Subdivision Name: BRADFORD ACRES Section/Phase: _____ Lot Number: 7
Driving Directions: JENNINGS RD. SOUTH / RT. ON FRIENDSHIP RD / RT. ON BRADFORD LN. / LOT ON RIGHT

Site Development Information: *(check or complete ALL that apply)*

(✓) New Single Family Residence
( ) New Multi-Family Residence
( ) Accessory Building
( ) Bedroom(s) Addition
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____

Maximum Number of Bedrooms: 3
Maximum Number of Occupants: 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: _____
Square Footage of Building: _____ Max. Number of Employees: _____ Max. Number of Seats/Beds/Other: _____

Water Supply: ( ) Replacement Well – Reason: _____
( ) Multi-connection Well Number of Houses: 1 Number of Persons: _____

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

Desired Septic System Type: *(you may rank in order of preference)* Year existing system installed: _____
( ) No Preference ( ) Alternative (✓) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other: _____

Please answer the following to the best of your ability:

( ) Yes (✓) No Does the site contain any jurisdictional wetlands?
( ) Yes (✓) No Is any non-domestic sewage (i.e. industrial) to be generated?
( ) Yes (✓) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: Stan Conley 6/11/21
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 144 BRADFORD LANE, identified as

PIN (Parcel Identification Number) 4749-64-5640 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 — 6/11/21

Signature of Owner(s) — Date

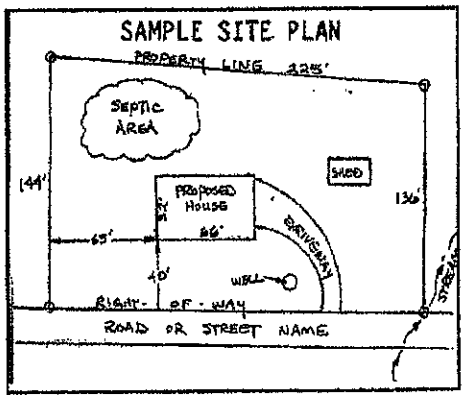
Mooresville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

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:

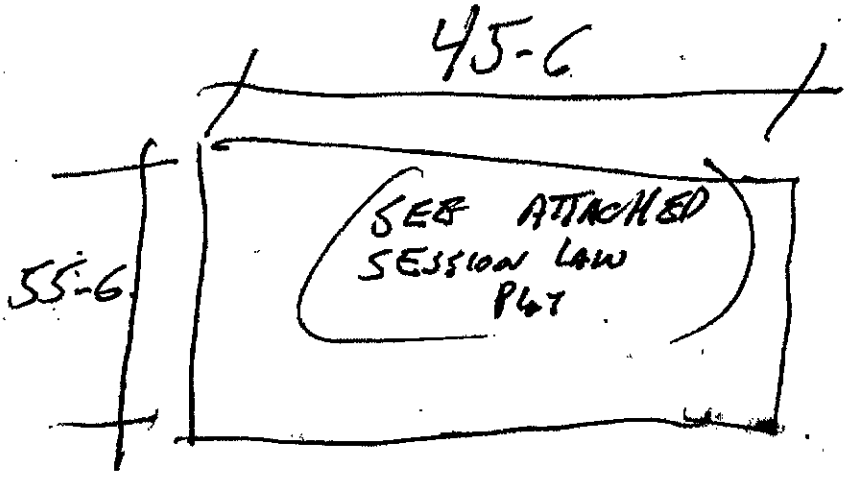
- (X) Property Line measurements are clearly identified
- (X) All proposed structures are indicated
- (X) Front and side setbacks from property line
- (X) Preferred driveway location
- (X) Preferred well location
- (X) Preferred septic system location
- (X) North arrow, or other sufficient indicator 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 Pressley **6/11/21**

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

Notice

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

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

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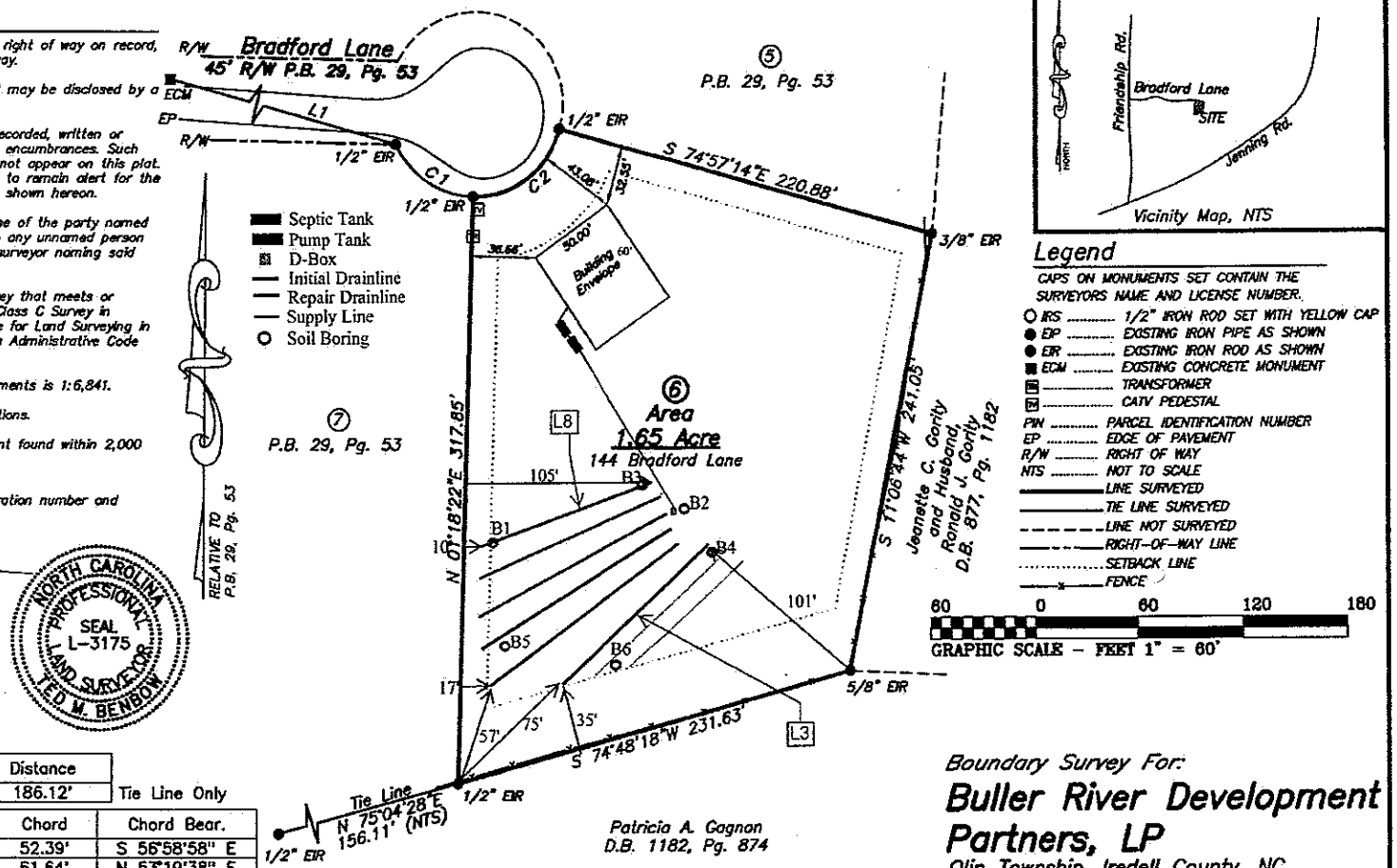
* Area determined by coordinate computations.

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

Witness this my original signature, registration number and seal this 13th day of May, 2021 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.

- IRS ..... 1/2" IRON ROD SET WITH YELLOW CAP
- EIP ..... EXISTING IRON PIPE AS SHOWN
- EIR ..... EXISTING IRON ROD AS SHOWN
- ECM ..... EXISTING CONCRETE MONUMENT
- TF ..... TRANSFORMER
- CM ..... CATV PEDESTAL
- PIN ..... PARCEL IDENTIFICATION NUMBER
- EP ..... EDGE OF PAVEMENT
- R/W ..... RIGHT OF WAY
- NTS ..... NOT TO SCALE
- LINE SURVEYED
- TIE LINE SURVEYED
- LINE NOT SURVEYED
- RIGHT-OF-WAY LINE
- SETBACK LINE
- FENCE

60 0 60 120 180

GRAPHIC SCALE - FEET 1" = 60'

Course	Bearing	Distance	
L1	S 74°44'04" E	186.12'	Tie Line Only

Curve	Radius	Length	Chord	Chord Bear.
C1	50.00'	55.14'	52.39'	S 56°58'58" E
C2	50.00'	66.41'	61.64'	N 53°19'38" E

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

Zoning

ZONING: RA(Iredell County)
Building Setbacks
Front - 35'
Side - 15'
Rear - 35'

Flood Hazard Area Certificate

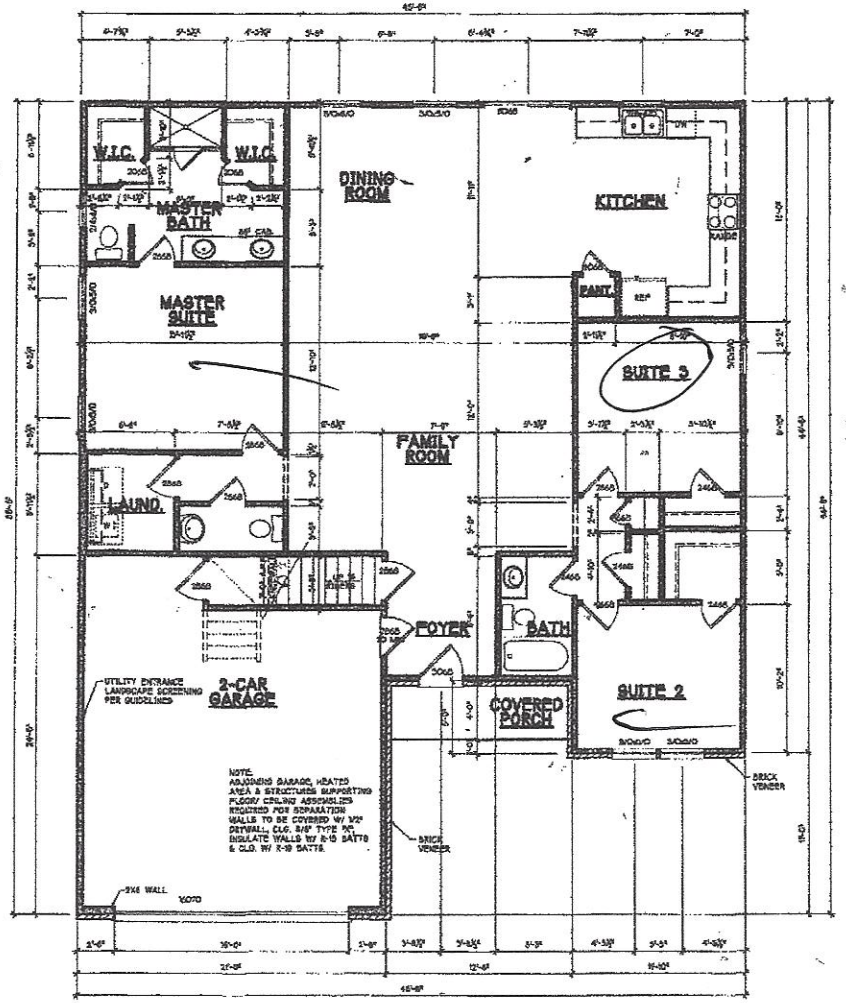
According to mapping provided by the Federal Emergency Management Agency and shown on the Digital Flood Insurance Rate Map (DFIRM) Panel 4749, Iredell County, North Carolina, effective date: 3/18/2008, the property shown hereon is not located within a special flood hazard area. The property is entirely within an area designated "Zone X - other areas". Areas determined to be outside the 0.2% annual chance floodplain: areas outside future conditions 1% annual chance floodplain.

Boundary Survey For:

Buller River Development Partners, LP

Olin Township, Iredell County, NC
Owners of Record: Louis Perugini and Pamela Perugini
Deed Reference: D.B. 1905, Pg. 1221
Plat Reference: P.B. 29, Pg. 53
PIN: 4749-64-5640
Job Number:2105123.DWG (2105124.CRD)
Field Work: 5-12-2021
Plat Date:5-13-2021

45-6



55-6

55-6

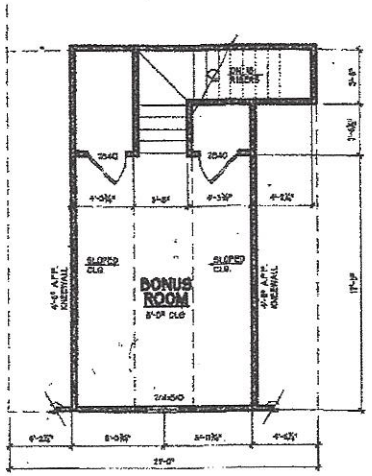
1 / 4.0 ELEVATION "C" FIRST FLOOR PLAN

SCALE: 1/4"=1'-0" (24"x36" SHEET SIZE)
SCALE: 1/8"=1'-0" (12"x18" SHEET SIZE)

45-6

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 IN 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" 5'0". MUST HAVE WOOD & MAT 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.



2 / 4.0 SECOND FLOOR PLAN

SCALE: 1/4"=1'-0" (24"x36" SHEET SIZE)
SCALE: 1/8"=1'-0" (12"x18" SHEET SIZE)

Acknowledgement Of Plans Submittal ONLY!
Date 12/21/21
Date 12/29/2021

SQUARE FOOTAGE:

TOTAL HEATED:	2184 SQ. FT.
FRONT PORCH:	44 SQ. FT.
TOTAL UNHEATED:	44 SQ. FT.
2-CAR GAR.	484 SQ. FT.
TOTAL HOUSE ROOF:	2707 SQ. FT.

CORNERSTONE III PROPERTIES
4508 FAITH CHURCH RD
INDIAN TRAIL, NC 28079
(704) 577 - 4002

PROJECT TITLE
ST. CHARLES RESIDENCE

ISSUE DATE

DRAWING DATA
DRAWN BY: CORNERSTONE III
CHECKED BY: STAN PORSLEY
FILE NUMBER: 20-2507ACHARLES

SHEET TITLE
ELEV. "C" FLOOR PLAN

SHEET NUMBER
4.0C

IREDELL COUNTY · NC

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

APPLICATION NUMBER
318813 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4749647633.000	144 BRADFORD LN	Iredell County

Owner Information	Applicant Information
Name: PERUGINI LOUIS+PAMELA	Name: CORNERSTONE III PROPERTIES INCc
Address:	Address: 4509 FAITH CHURCH
	INDAIN TRAIL, 28 28203
Phone:	Phone: (704)906-6212

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
1.65	35	35	15	15	N/A	NO

Remarks
sfd

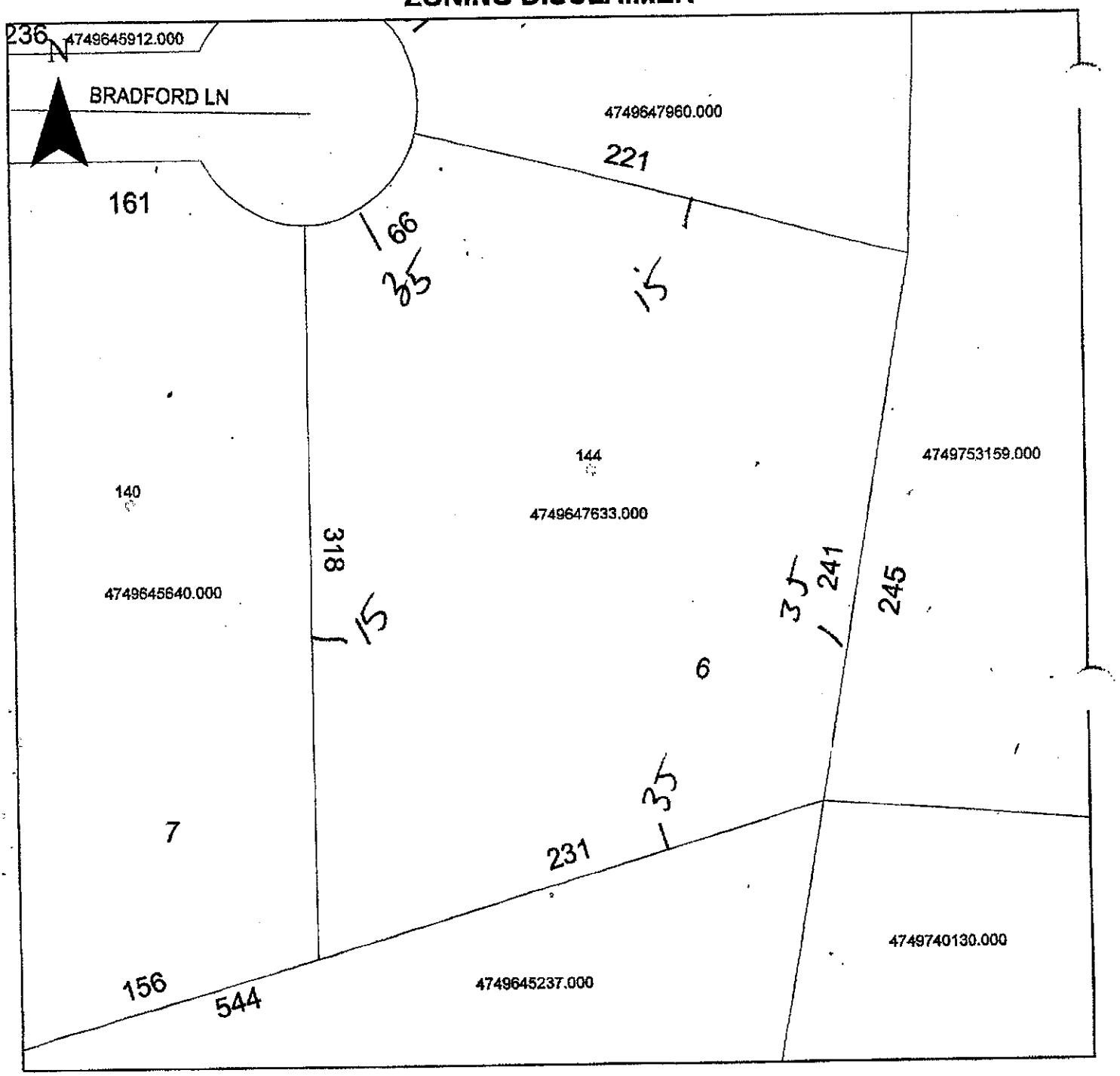
The applicant certifies that there are no deed restrictions, contractual agreements or governmental regulations of any kind that interfere with or prohibit the use of the property or the use for which this permit is requested. The applicant further acknowledges that enforcement of deed restrictions,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

Date: 06/15/2021

Signature of Owner/Contractor

Permit Number	318813	TOTAL FEES:	$77.25

ZONING DISCLAIMER



Property Address 144 Bradford Ln

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

6/15/21
Date