IREDELL COUNTY HEALTH DEPARTMENT

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 224732.

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

PIN # 4751209830 25-0983

APPLICANT/OWNER: Pilch Acres Holding LLC APPLICANT ADDRESS: 15 Frowein Rd STE G2 Center Moriches NY 11934.

SITE ADDRESS: 113 Windstone Drive Troutman NC PHONE: ~ ALT. PHONE Gary McNeely 704-310-1882

SITE DIRECTIONS: Hwy 115 N TR Ostwalt Amity TR Pilch Straight to Windstone Drive SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Windstone Crossing SECTION: — LOT # 3 LOT AREA: .63 Acres DESIGN FLOW: 360 L.T.A.R.: .30

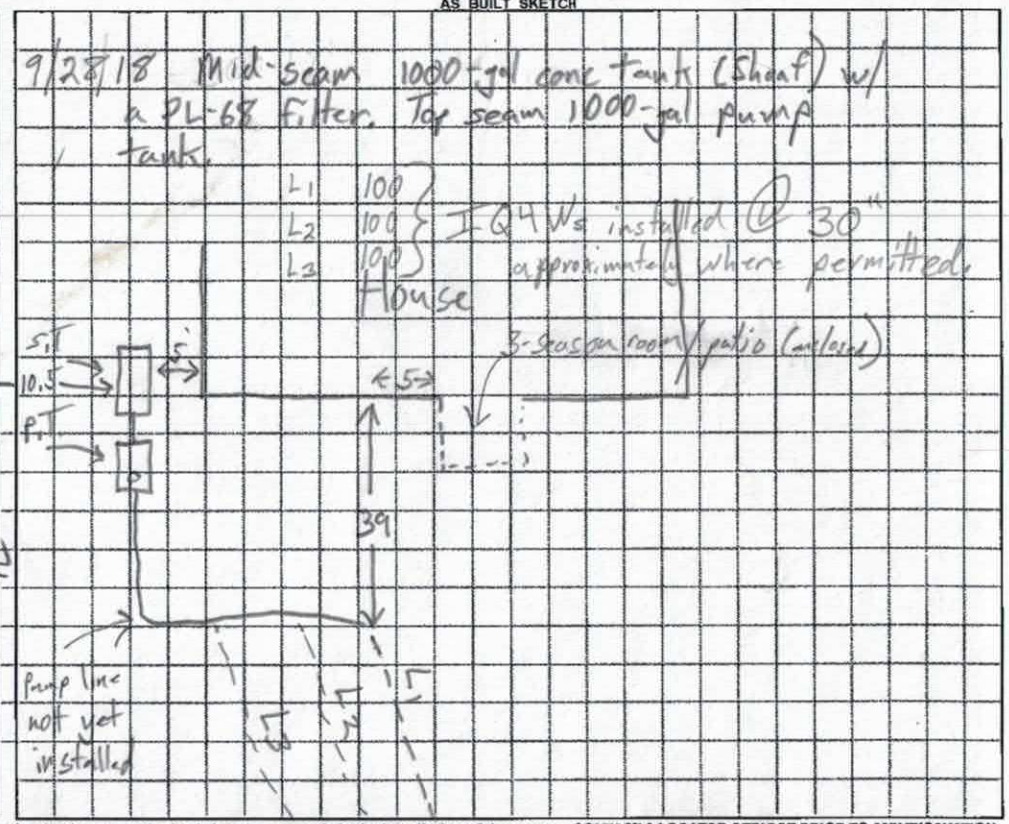
Septic Tank	1000 (gal)	STB	760	Date	7/31/18	☒ New System	☐ Repair	☐ Expansion	System Type: I II III IV V VI	☒ Residence	No. Bedrooms 3	Water Supply
Pump Tank	1000. (gal)	PT	263	Date	7/31/18	System Description: Pressure Manifold - 25% Reduction				☐ Business	No. Persons 6	☐ Private
Pump Make		Model		Serial #		Repair System Description: PP BPS				☐ 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)	24-36	Gravel Depth	~		☐ GRAVITY	☒ PRESSURE		☐ Basement w/plumbing	☐ Basement w/o plumbing	

Comments / Conditions: See attached Site plan and Spec Sheet

INITIAL SITE SKETCH

See Site Plan and Spec Sheet From Michael A Thomas & Assoc. Licensed Soil Scientist Lic # 1252.

AS BUILT SKETCH



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: 8-9-18 Installed by: Gunter Grading

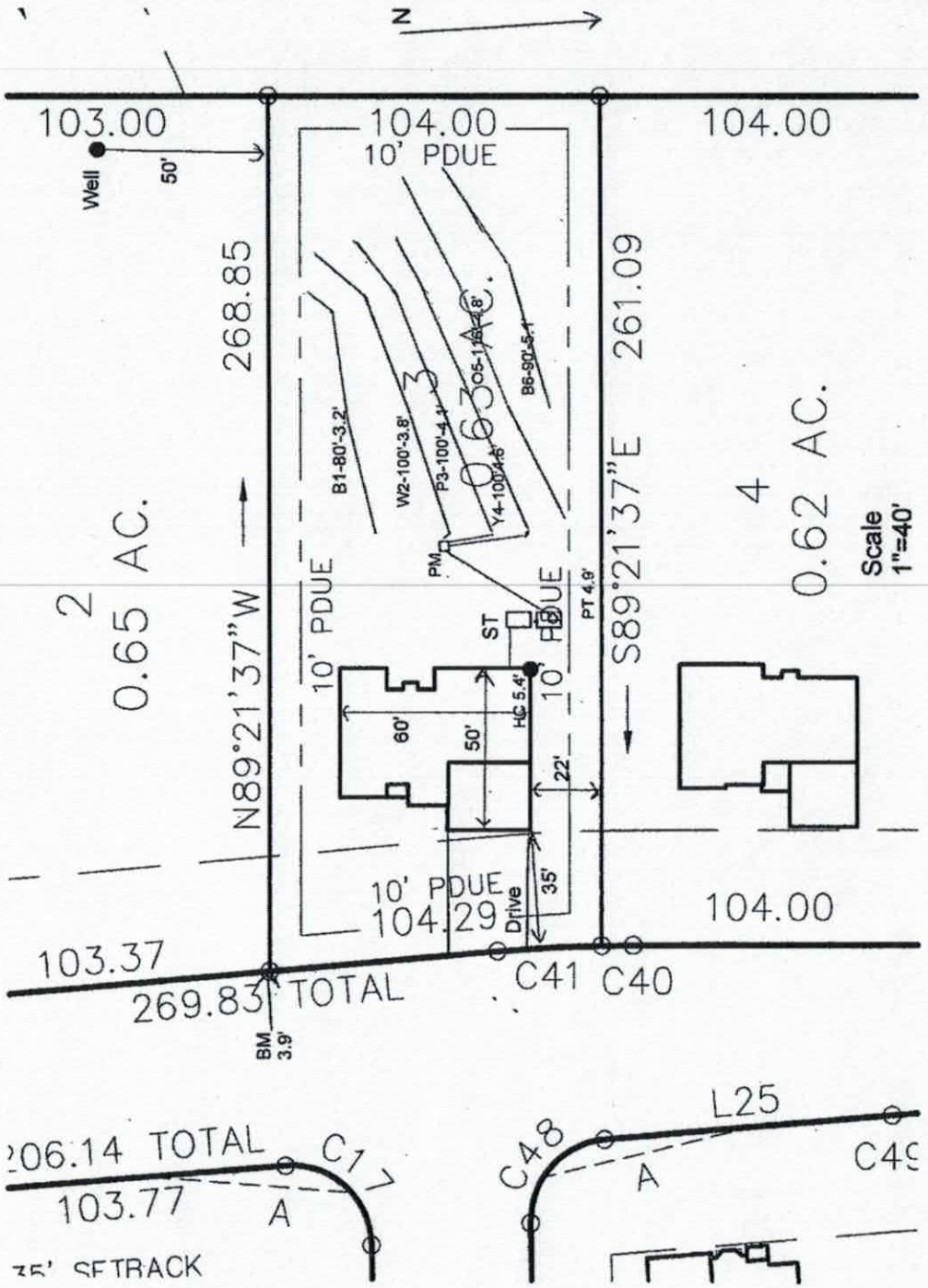
IMPROVEMENT PERMIT by: Benjamin A Bottoms Date: 8/7/2018 OPERATION PERMIT by: Kayla Wilson Date: 1-11-19

AUTHORIZATION TO CONSTRUCT by: Benjamin A Bottoms Date: 8/7/2018 Existing System Inspected by: Date:

FOR SEPTIC FINAL INSPECTION: CALL 704-664-3703 between 8am-9am the day the inspection is needed. Be sure to speak with an inpsector to confirm your inspection time.

pump line checked 10/1 CC

	Date	Initials
Drain Lines Checked Pump line not installed yet	9/28/18	SF
Tanks Checked	9/28/18	SF
Pressure Manifold or Valve Box Checked	1-11-19	KW
Pressure Head Set	↓	↓
Electrical Checked		
Floats Set		
Alarm Checked		
Maintenance Contract Y (N) not required		
Comments:		


N
103.00
104.00
104.00
10' PDUE
Well
50'
268.85
261.09
2
0.65 AC.
3
0.63 AC.
4
0.62 AC.
N89°21'37"W
S89°21'37"E
B1-80'-3.2'
W2-100'-3.8'
P3-100'-4.1'
Y4-100'-4.8'
B5-100'-4.8'
B6-90'-5.1'
PM
ST
PT 4.9'
10' PDUE
10' PDUE
HC 5.4'
60'
50'
22'
35'
Drive
10' PDUE
104.29
104.00
103.37
269.83 TOTAL
C41
C40
BM
3.9'
Scale
1"=40'
206.14 TOTAL
C1
103.77
A
35' SETBACK
C48
L25
A
C49



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet for 113 Windstone Dr, Windstone Crossing Lot 3
House Footprint: See attached plan
Building Setbacks: 35' front/rear, 15' side
Water Source: Community well
Number of Bedrooms/Daily Flow: 3/360 GPD
Predetermined LTAR: 0.3 GPD/FT^2
Proposed System Type: 25% Reduction
Proposed Repair System Type: PPBPS
Distribution: Pressure Manifold
Flow per Tap: 7.11 GPM
Tap Size and Material: ½" SCH 40
System Flow: 21.33 GPM
Dosing Volume: 131.3 gallons
Pump Run Time: 6.2 minutes
Elevation Head: 6.1'
Friction Head: 0.5'
Pressure Head: 2'
Total Dynamic Head: 8.6'
Supply Line Length: 40' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 24-36"



Line	Design Length	Actual Length	Elevation
Blue 1		80'	3.2'
White 2	**100'**	**103'**	**3.8'**
Pink 3	**100'**	**118'**	**4.1'**
Yellow 4	**100'**	**116'**	**4.6'**
Orange 5		118'	4.8'
Blue 6		90'	5.1'

Initial System: 300' **Repair System:** 288'
Pump Tank: 4.9' **House Corner:** 5.4' **Benchmark:** 3.9'

Comments:



APPROVED MAR 15 2017

BA

MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

Reference: Data Sheet for Lot 3 Woodstone Crossing ; Woodstone Drive; Parcel ID#: 4751250983.000 Iredell Co., NC

House Footprint: 60'x 60'; Crawl Space.
Building Setback: 35' Front, 10' Side, 10' Rear
Water Source: Public Well
Number of Bedrooms: 4/480 GPD
Proposed LTAR: 0.3 gpd/ft2
Suggested System Type: 25% Reduction
Suggested Repair System Type: PPBPS
Distribution: Gravity with endcaps
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 30"

Line	Design Length	Actual Length
White 1	**85'**	**85'**
Pink 2	**100'**	**109'**
Blue 3	**100'**	**108'**
White 4	**115'**	**137'**
Pink 5		145'
Blue 6		140'
White 7		100'

Initial System: 400' 25% Reduction **Repair System:** 385' ~~25% Reduction~~ PANEL BLOCK

Comments:

- The purpose of this re-evaluation is to re-permit the property for a 4-bedroom residence. The site has been previously permitted by the Iredell County Health Department, but the permit has expired.
- The proposed house site has been marked using pink pin flags and the tank location is marked with blue pin flags.

DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: Lot 3 Windstone Crossing; PID# 4751250983.000
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

BA
APPROVED MAR 15 2017

OWNER: Pilch Acres Holding, LLC
ADDRESS: 15 Frowein Rd Bldg G2 Center Moriche, NY 11934
PROPOSED FACILITY: 4 Bedroom PROPOSED DESIGN FLOW (.1949): 480GPD
LOCATION OF SITE: Lot 3; Windstone Crossing; Windstone Drive

APPLICATION DATE_____
DATE EVALUATED: 12/2016
PROPERTY SIZE: 0.63 Acres
PROPERTY RECORDED: 12/15/2008

WATER SUPPLY: ☐Private ☒Public ☐ Well ☐ Spring ☐ Other _____

EVALUATION METHOD: ☒ Auger Boring ☒ Pit ☐ Cut

TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
AB 1	L 2-3%	0"-36"	R C SBK	SS SP FR SEXP		48"	Few to common saprolite inclusions 36"-48"	None	0.3
		36"-48"	R CL WSBK	SS SP FR SEXP					
AB 2	L 2-3%	0"-48"	R C SBK	SS SP FR SEXP	Few lithochromic colors at 40"+	48"		None	0.3
AB 3	LS 3%	0-22	R C SBK	FR SS SP SEXP	N/A	48"	F-C SAP	N/A	0.3
		22-48	R CL WSBK	FR SS SP SEXP					
AB 4	LS 3%	0-26	R C SBK	FR SS SP SEXP	N/A	48"	N/A	N/A	0.3
		26-48	R CL WSBK	FR SS SP SEXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1200 FT2	1155 FT2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____PS_____

EVALUATED BY: Michael Athanas and Associates
OTHER(S) PRESENT: _____

SOIL/SITE EVALUATION

(Continuation Sheet-Complete all field in full)

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

APPROVED MAR 15 2017
JA

PROPERTY ID #: WINDSTONE CROSSING 3
DATE OF EVALUATION: _____
COUNTY: IREDELL

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
AB 5	LS 3%	0-30	R C SBK	FR SS SP SEXP	N/A	48"	Few SAP	N/A	PS 0.3
		30-48	R CL WSBK	FR SS SP SEXP					
AB 6	LS 3%	0-38	RC ~~B~~ ABK	SS	—	48	FEW INC	—	.3
		38-48	RCL MSBK	SS					

COMMENTS: _____

DIVISION OF ENVIRONMENTAL HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

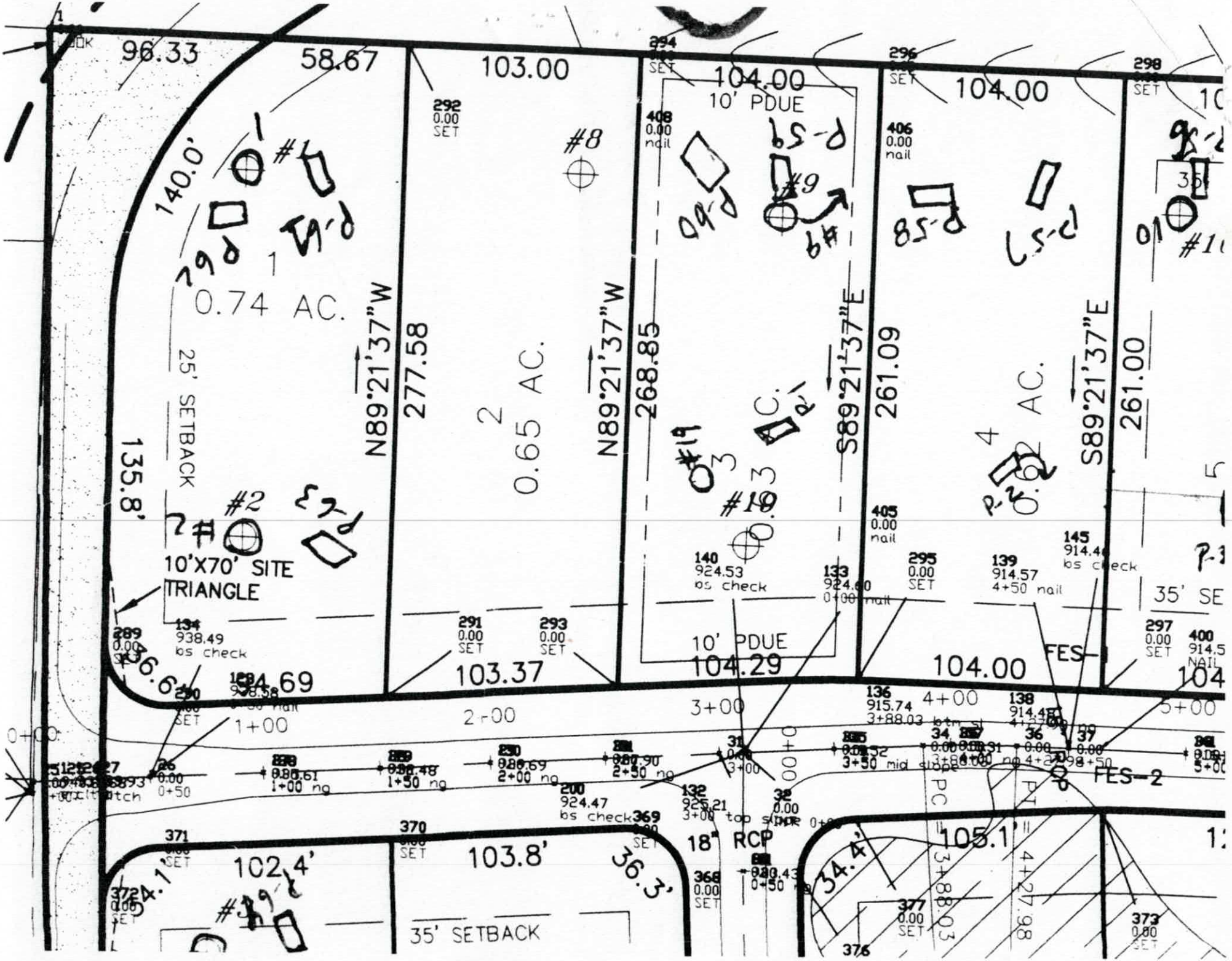
SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Paramount Homes APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: 4 bedroom PROPOSED DESIGN FLOW (.1949): 480 gpd PROPERTY SIZE: 0.65 AC
LOCATION OF SITE: Paramount Woods #3 PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☒ Public ☒ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LAND-SCAPE POSITION/ SLOPE %	HORI-ZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS 3%	0-8	Rb sd w sbk	Fr ss sp	—	48"	Few Inc Sap	—	PS 0.3
		8-36	Rc sbk	Fr ss sp					
		36-48	Rcl sbk	Fr ss sp					
2	LS 0-2%	0-42	Rc sbk	Fr ss sp	—	54"	Few Inc Sap / Band of Sap.	OK .3 gm 1-28-08	PS 0.3
		42-54	Rcl w sbk	Fr ss sp					
3	LS 2%	0-30	Rc sbk	Fr ss sp	—	48"	—	OK .3 gm 1-28-08	PS 0.3
		30-48	Rcl w sbk	F-Fr ss sp					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: MA + Assoc.
OTHER(S) PRESENT: _____


96.33
58.67
103.00
104.00
10' PDUE
104.00
104.00
140.0'
1
0.74 AC.
25' SETBACK
135.8'
N89°21'37"W
277.58
2
0.65 AC.
N89°21'37"W
268.85
S89°21'37"E
261.09
4
0.6 AC.
S89°21'37"E
261.00
10'X70' SITE TRIANGLE
10' PDUE
104.29
104.00
103.37
103.8'
102.4'
35' SETBACK
18" RCP
105.1'
34.4'
36.3'
FES-2
35' SE
PC
PI
#1
#2
#8
#9
#10
#19
0+00
1+00
2+00
3+00
4+00
5+00

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet
PROPERTY ID #:
COUNTY:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

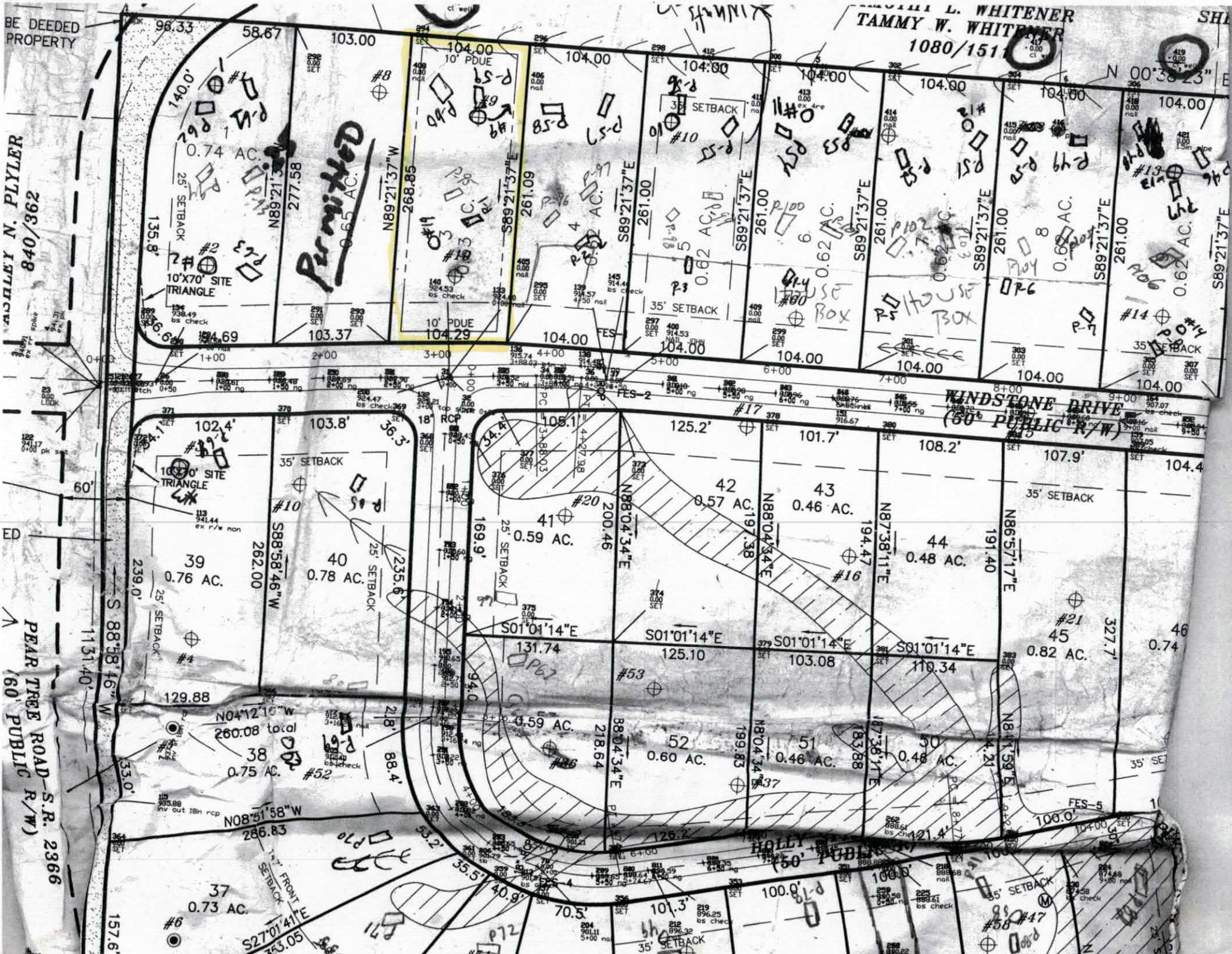
Lot 3

OWNER: PARAMOUNT Pilch Rd
ADDRESS:
APPLICANT:
PROPOSED FACILITY:
APPLICATION DATE:
DATE EVALUATED:
LOCATION OF SITE:
PROPOSED DESIGN FLOW (.1949):
PROPERTY SIZE:
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other
PROPERTY RECORDED:
EVALUATION METHOD: ☐ Auger Boring ☑ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFIL CLASS & LTAI
#93 1 Lot 1	LS 0-2%	0-13	Br. scl w SBK	Fri SS/SP SOR	Few Y-B's	52"		-	PS .7
		13-34	R cly ABK	Fri SS/SP. SOR					
		34-52	R cly WSBK	Fri SS/SP SOR					
#94 2 Lot 1	LS 0-2%	0-30	R Cly MSBK	Fri SS/R SOR	—	48"	-	-	PS 3
		30-48	R CLay WSBK	Fri SS/SP					
#95 3 Lot 3	LS 0-2% 5%	0-30	R cly M SBK	Fri SS/SP	—	48"	Few SAP Incl	OK -3 gm 26-08	PS 3
		30-48	R CLay WSBK	Fri SS/SP					
#96 4 Lot 4	LS 0-2%	0-41	R cly M SBK	Fri SS/SP	-	52	Few SAP Incl	-	PS 3
		41-52	R Clay WSBK	Fri SS/SP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
e LTAR		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY:
OTHER(S) PRESENT:


BE DEEDED PROPERTY
TAMMY W. WHITENER
1080/151
N 00°38'23" E
PLYLER N. 840/362
Permitted
0.74 AC.
0.65 AC.
0.62 AC.
10' PDUE
35' SETBACK
25' SETBACK
10'X70' SITE TRIANGLE
WINDSTONE DRIVE (60' PUBLIC R/W)
HOLLY (50' PUBLIC R/W)
PEAR TREE ROAD-S.R. 2366 (60' PUBLIC R/W)
S 88°58'46" W
1131.40'
N04°12'10"W 260.08 total
N08°51'58"W 286.83
S27°01'41"E
N89°21'37"W
S89°21'37"E
N88°04'34"E
S01°01'14"E
N87°38'11"E
N86°57'17"E
N84°41'59"E
18" RCP
FES-2
FES-5
39 0.76 AC.
40 0.78 AC.
41 0.59 AC.
42 0.57 AC.
43 0.46 AC.
44 0.48 AC.
45 0.82 AC.
38 0.75 AC.
37 0.73 AC.
52 0.60 AC.
51 0.46 AC.
50 0.46 AC.

#224732 Int. Redraw $225.00

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

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

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

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

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: Pilch Acres Holding LLC **Address:** 15 Frowein Rd, STE G2, Center Moriches, NY **Zip:** 11934

Applicant Email: edbcbhomes@aol.com **Phone:** _____ **Alt. Phone:** _____

Owner Name: Same **Address:** _____ **Zip:** _____

Owner Email: _____ **Phone:** _____ **Alt. Phone:** _____

Property Information:

Street Address: 113 Windstone Dr

Subdivision Name: Windstone Crossing **Section/Phase:** _____ **Lot Number:** 3

Driving Directions: _____

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

CHECK FOUNDATION TYPE

(✓) New Single Family Residence — Maximum Number of Bedrooms: 3 — ( ) Crawl Space Foundation
( ) New Multi-Family Residence — Maximum Number of Occupants: _____ — (✓) Concrete Slab Foundation
( ) Accessory Building — ( ) Swimming Pool — ( ) Basement with Plumbing
( ) Bedroom(s) Addition — ( ) Other Addition/Structure: _____ — ( ) Basement without Plumbing
( ) Repair to failing septic system ___ Tank ___ Drain lines Describe Problem: _____
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: _____ 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: Accepted

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: _____ 8/1/2018
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

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, Edward Belanger, am the legal owner(s) of the property located at 113 Windstone Dr, Windstone Crossing Lot 3, identified as PIN (Parcel Identification Number) 4751261535, located in Iredell County, North Carolina.

I do hereby authorize **(print legal representative/company name)** Michael Athanas & Associates, _____, 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

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

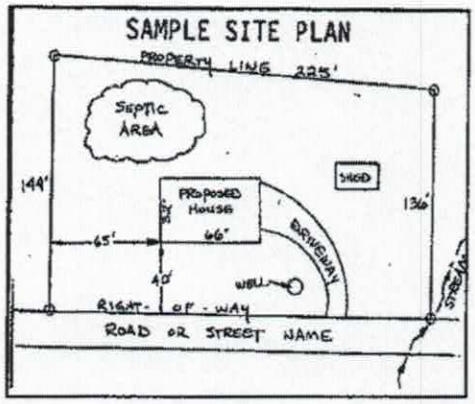
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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:

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



Circle N/A on the following if appropriate:

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

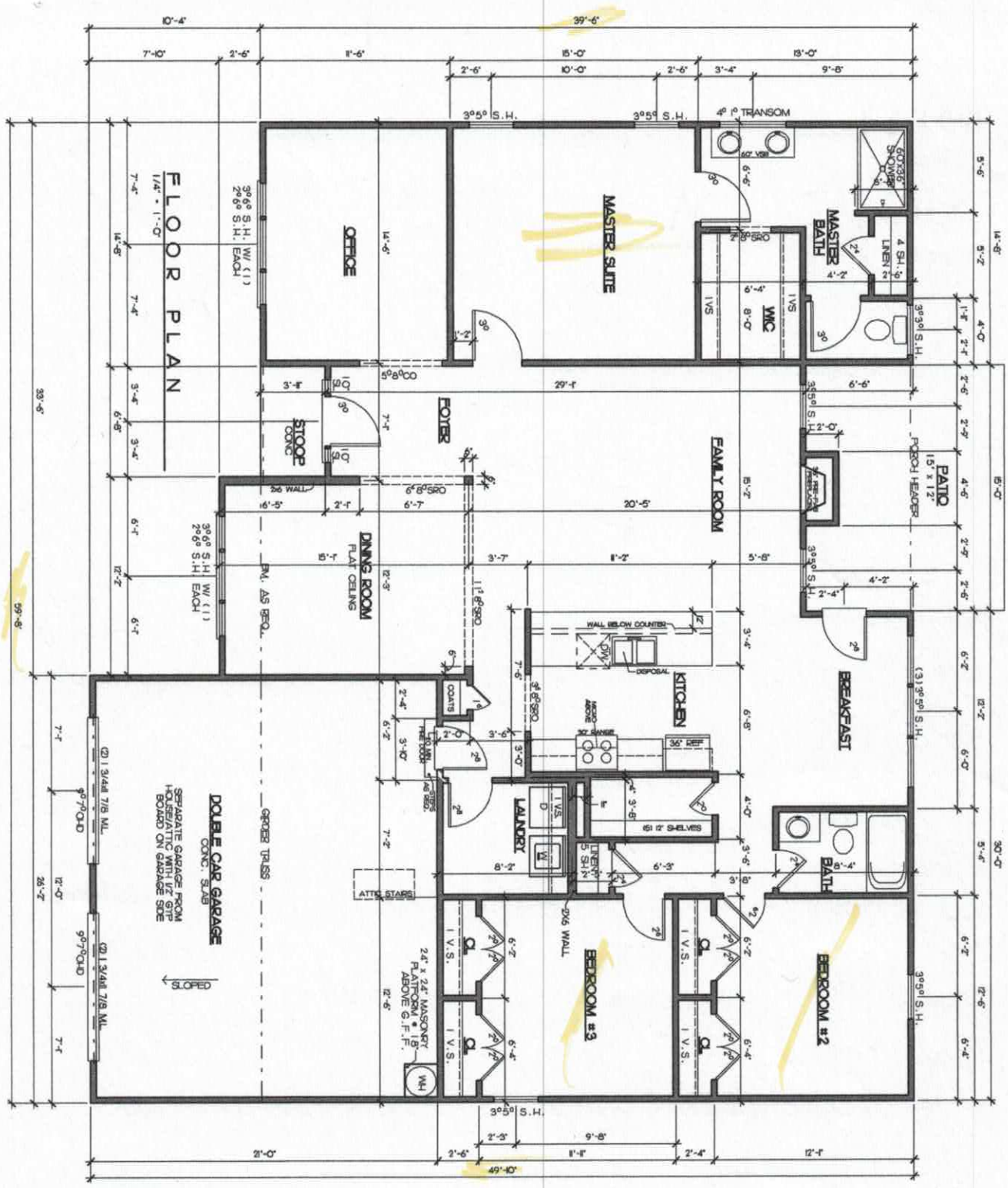
USE THIS SPACE TO DRAW YOUR SITE PLAN

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

See attached plan

Signature: _____ 8/1/2018

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



Acknowledgement Of
Plans Submittal ONLY!

Date 7.3.18

Date 8/7/18

GARAGE RIGHT

NOTE:
ALL CEILINGS ARE 9'-0"
UNLESS OTHERWISE SPECIFIED.

SQUARE FOOTAGES	
FLOOR PLAN=	1,998 SQ. FT.
GARAGE=	580 SQ. FT.
REAR PORCH=	88 SQ. FT.
FRONT PORCH=	26 SQ. FT.
TOTAL I/F=	2692 SQ. FT.

Sheet	3
	MEADOW-FP_1REV
Dr. By	BRIAN G.
Date	04-06-03
Rev.	02-22-18 02-26-18 03-07-18 03-30-18
Project	THE MEADOW
Sheet Title	FIRST FLOOR PLAN

WINDSTONE ESTATES

Drafting Unlimited, Inc.
DAYTON, INC.
937-562-8888

IREDELL COUNTY

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

APPLICATION NUMBER
224732
Issue Date: 02/02/2017

ZONING PERMIT

Open Space

Parcel Number	Street Address	Jurisdiction
4751250983.000	115 WINDSTONE DRIVE, TROUTMAN, NC 28116	

Owner Information	Applicant Information
Owner: PILCH ACRES HOLDING LLC	Applicant: PITCH ACRES HOLDINGS L
Address: 423 IREDELL CO, NC 28625	Address: 15 FROWEIN RD BLDG G2 CENTER MORICHES, NY 11934
Phone:	Phone:

Use Requested	Zone Code

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
.630	35.00	35.00	15.00	15.00	NO	X

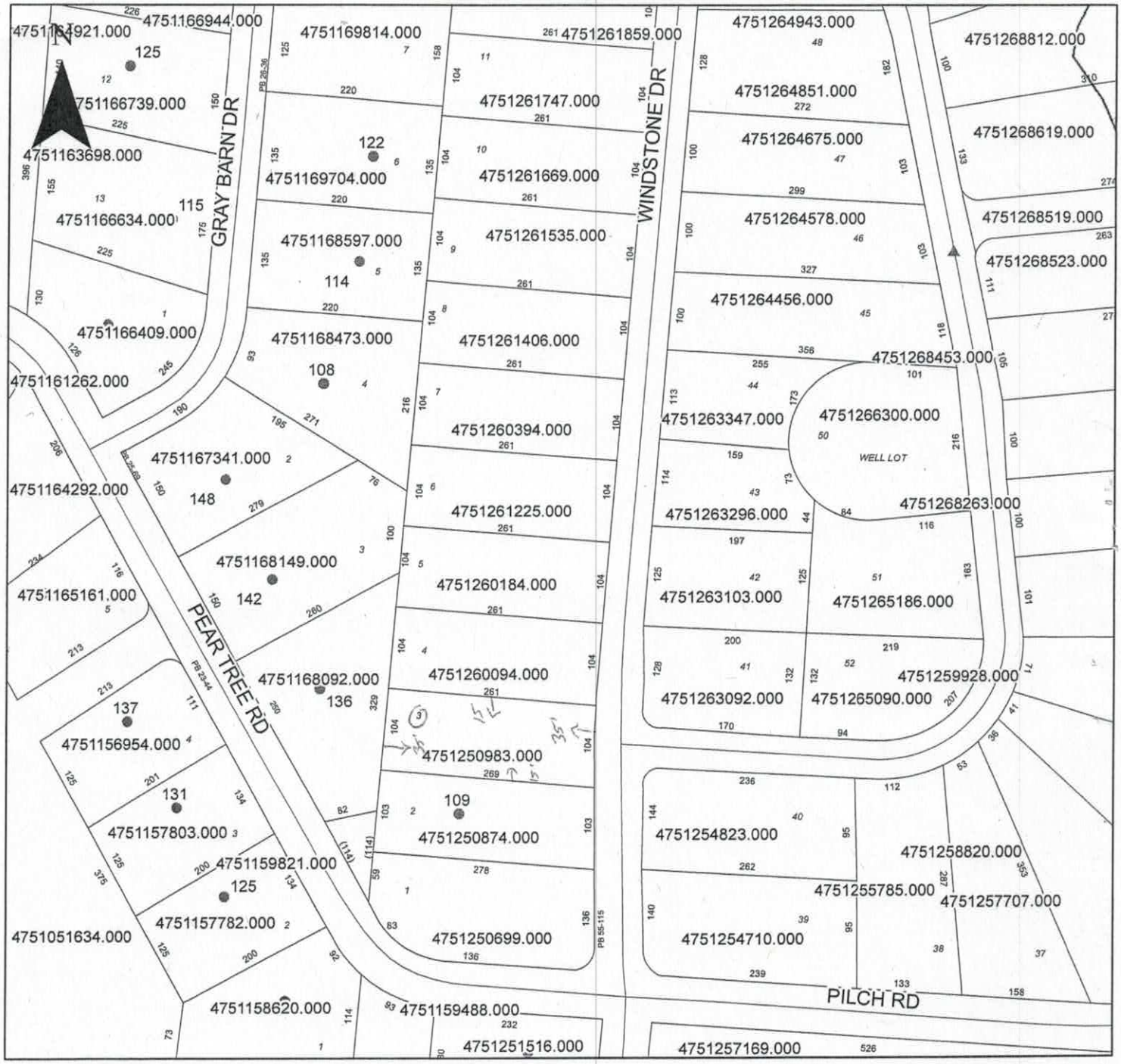
Remarks:

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.

Applicant: _____ Date: _____

Permit Number	92223	TOTAL FEES:	$ 77.25

ZONING DISCLAIMER



Property Address 115 Windston Dr.

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Applicant

2/2/2017
Date