ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # AP-303435

CLN

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

PIN # 4751264943

APPLICANT/OWNER: PILCH ACRES HOLDING LLC APPLICANT ADDRESS: 15 FROWEIN ROAD, SUITE G2, CENTER MORICHES, N.Y. 11934

SITE ADDRESS: 156 WINDSTONE DRIVE, TROUTMAN, N.C. 28166 PHONE: 980-722-7370 ALT. PHONE 704-576-3887

SITE DIRECTIONS: (S) ON 77, (L) ON AMITY HILL, (R) ON PILCH, (R) ON WINDSTONE, LOT ON (R) SAP CONTROLLED: [x] YES [ ] NO

SUBDIVISION: WINDSTONE CROSSING SECTION: — LOT # 49 LOT AREA: 0.84 AC DESIGN FLOW: 480 GPD L.T.A.R.: 0.325 (REPAIR 0.125)

Septic Tank 1000 (gal) STB SHOAF-700 Date 9/8/2020
Pump Tank 1000 (gal) PT 363. Date 11-5-2020
Pump Make — Model — Serial # —
Nitrification Fields 1 # Lines 4 Linear Ft: 248ft
Trench Width 24 IN Trench Bottom Depth([redacted]) MAX 36 IN Gravel Depth —

[x] New System [ ] Repair [ ] Expansion System Type: I II [III] IV V VI
System Description: P.M.-PPBPS
Repair System Description: DRIP
Maintenance Agreement Required: [ ] YES [x] NO
[ ] GRAVITY [x] PRESSURE

[x] Residence No. Bedrooms 4
[ ] Business No. Persons 8
[ ] Other No. Employees —
[ ] Slab [ ] Crawl Space
[x] Basement w/plumbing [ ] Basement w/o plumbing

Water Supply
[ ] Private
[ ] Public
[x] Community

Comments / Conditions: INSTALL ON CONTOUR, INSTALL ON 3FT CENTERS UTILIZE PRESSURE MANIFOLD DISTRIBUTION, SITE PLAN MUST REMAIN ATTACHED WITH PERMIT AT ALL TIMES OR PERMIT IS INVALID

INITIAL SITE SKETCH

PLEASE SEE ATTACHED SITE PLAN BY: MICHAEL ATHANAS AND ASSOCIATES, LSS

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 as planned.

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.* [x] **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* [x] **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: [signature] Date: 6-19-2020 Installed by: Guntis Grading

IMPROVEMENT PERMIT by: Benjamin C. White Date: 6-11-2020 OPERATION PERMIT by: Danielle Kiteley Date: 5-4-21

AUTHORIZATION TO CONSTRUCT by: Benjamin C. White Date: 6-15-2020 Existing System Inspected by: Date:

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

B Bottles 11-6-2020

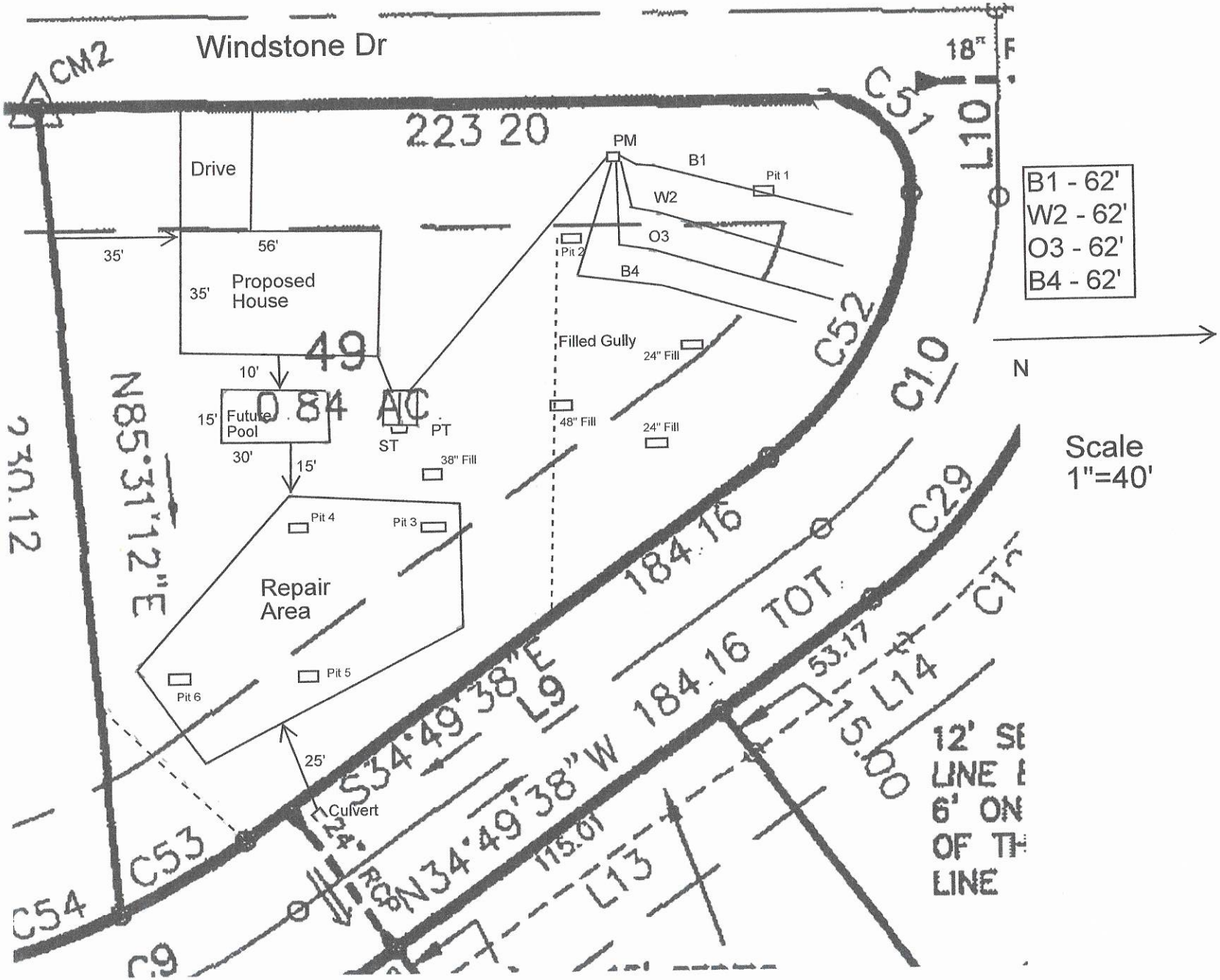
- lines checked
- tanks checked
- manifold checked
  - 1/2" SCH 80 instead

CHECKED 11-10-2020 BCH of 1/2" SCH 40 installed

- Seal Pumpline & Pump Tank.
- [illegible] on Pump tank

4/30/2021: Pressure set

APPROVED JUN 12 2020



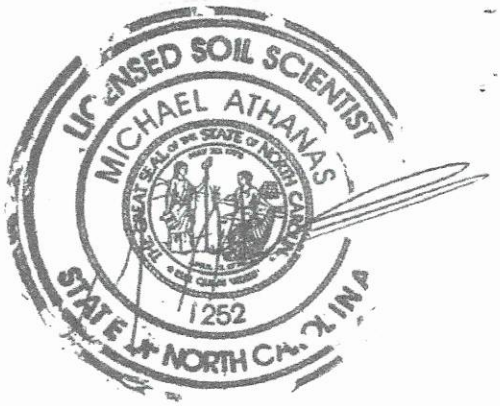


MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887

APPROVED JUN 12 2020

12/13/19

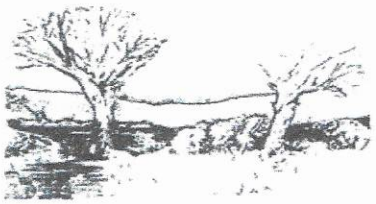
Reference: Data Sheet for 156 Windstone Dr, Windstone Crossing Lot 49
House Footprint: 56' x 35'
Building Setbacks: 35' front/rear, 15' side
Water Source: Community Well
Number of Bedrooms/Daily Flow: 4/480 GPD
Proposed LTAR: 0.325 GPD/FT^2 (initial), 0.125 GPD/FT^2 (repair)
Proposed System Type: PPBPS
Proposed Repair System Type: Drip Dispersal
Distribution: Pressure Manifold
Flow per Tap: 7.11 GPM
Tap Size and Material: ½" SCH 40
System Flow: 28.44 GPM
Dosing Volume: 201.6 gallons
Pump Run Time: 7.1 minutes
Elevation Head: TBD
Friction Head: 0.3'
Pressure Head: 2'
Total Dynamic Head: TBD
Supply Line Length: 85' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 36"



Line	Design Length	# of Panels	Actual Length	Elevation
Blue 1	62'	14'	86'	T
White 2	62'	14'	81'	B
Orange 3	62'	14'	76'	D
Blue 4	62'	14'	62'	

Initial System: 248' **Repair System:** 4500 FT^2

Comments:



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12/13/19

APPROVED JUN 12 2020

Reference: Data Sheet for 156 Windstone Dr, Windstone Crossing Lot 49
House Footprint: 56' x 35'
Building Setbacks: 35' front/rear, 15' side
Water Source: Community Well
Number of Bedrooms/Daily Flow: 4/480 GPD
Proposed LTAR: 0.325 GPD/FT^2 (initial), 0.125 GPD/FT^2 (repair)
Proposed System Type: PPBPS
Proposed Repair System Type: Drip Dispersal
Distribution: Pressure Manifold
Flow per Tap: 7.11 GPM
Tap Size and Material: ½" SCH 40
System Flow: 28.44 GPM
Dosing Volume: 201.6 gallons
Pump Run Time: 7.1 minutes
Elevation Head: TBD
Friction Head: 0.3'
Pressure Head: 2'
Total Dynamic Head: TBD
Supply Line Length: 85' of 2" PVC
Septic/Pump Tank Size: 1000/1000 gallons
Proposed Trench Bottom: 36"



Line	Design Length	# of Panels	Actual Length	Elevation
Blue 1	62'	14'	86'	T
White 2	62'	14'	81'	B
Orange 3	62'	14'	76'	D
Blue 4	62'	14'	62'	

Initial System: 248' **Repair System:** 4500 FT^2

Comments:

PROPERTY ID #: 4751264943
COUNTY: Iredell

APPROVED JUN 1 ? 2020

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

OWNER: Pilch Acres Holdings LLC
ADDRESS: 15 Frowein Rd, BLDG G2, Center Moriches, NY 11934
PROPOSED FACILITY: 4 BDRM PROPOSED DESIGN FLOW (.1949): 480 GPD
LOCATION OF SITE: 156 Windstone Dr, Windstone Crossings Lot 49
APPLICATION DATE
DATE EVALUATED: 12/2019
PROPERTY SIZE: 0.84 AC
PROPERTY RECORDED:
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	
PIT 1	LS 6%	0-20	R C SBK	FR SS SP SXP	N/A	63"	F-C SAP PS	N/A	PS 0.35
		20-47	R CL WSBK	FR SS SP SXP					
		47-63	VER L SAP M	VFR SS SP SXP					
PIT 2	LS 6%	0-8	FILL		N/A	62"	F-C SAP PS	N/A	PS 0.35
		8-25	R C SBK	FR SS SP SXP					
		25-36	R CL WSBK	FR SS SP SXP					
		36-62	VER L SAP M	VFR SS SP SXP					
PIT 3	LS 6%	0-6	Br SCL WSBK	FR SS SP SXP	YB CHR 2 @ 24"	24"	N/A	N/A	DRIP 0.125
		6-42	R C SBK	FR SS SP SXP					
		42-60	R C ABK	FR SS SP SXP					
PIT 4	LS 6%	0-7	Br SCL WSBK	FR SS SP SXP	YB CHR 2 @ 22"	22"	N/A	N/A	DRIP 0.125
		7-55	R C SBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	744 FT^2	4500 FT^2
System Type(s)	PPBPS	DRIP
Site LTAR	0.25	0.125

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT:

COMMENTS:

PROPERTY ID #: 4751264943
COUNTY: Iredell

APPROVED JUN 12 2020

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Pilch Acres Holdings LLC APPLICATION DATE
ADDRESS: 15 Frowein Rd, BLDG G2, Center Moriches, NY 11934 DATE EVALUATED: 12/2019
PROPOSED FACILITY: 3 BDRM PROPOSED DESIGN FLOW (.1949): 360 GPD PROPERTY SIZE: 0.84 AC
LOCATION OF SITE: 156 Windstone Dr, Windstone Crossings Lot 49 PROPERTY RECORDED:
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	
PIT 1	LS 12%	0-22	R C SBK/ABK	FR SS SP SXP	N/A	53"	Few SAP	N/A	PS 0.3
		22-53	R CL WSBK	FR SS SP SXP					
PIT 2	LS 12%	0-3	Br SCL WSBK	FR SS SP SXP	YB	55"	N/A	N/A	PS 0.25
		3-32	R C SBK/ABK	FR SS SP SXP					
		32-55	R CL WSBK	FR SS SP SXP	No YB				
PIT 3	LS 12%	0-8	FILL		YB	58"	N/A	N/A	PS 0.25
		8-34	R C SBK/ABK	FR SS SP SXP					
		34-58	R CL WSBK	FR SS SP SXP	No YB				
PIT 4	LS 12%	0-12	FILL			60"	N/A	N/A	PS 0.25
		12-18	COMPACTED						
		18-43	R C SBK/ABK	FR SS SP SXP	YB				
		43-60	R CL WSBK	FR SS SP SXP	No YB				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1080 FT^2	753 FT^2
System Type(s)	25% Reduction	PPBPS
Site LTAR	0.25	0.25

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: MA&A
OTHER(S) PRESENT:

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

APPROVED JUN 12 2020

PROPERTY ID #: 4751264943
DATE OF EVALUATION:
COUNTY: IREDELL

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	LS 12%	0-20	R C SBK	FR SS SP SXP	N/A	48"	N/A	N/A	PS 0.3
		20-48	R CL WSBK	FR SS SP SXP					
AB 2	LS 12 %	0-8	FILL		YB	48"	N/A	N/A	PS 0.25
		8-28	R C SBK	FR SS SP SXP					
		28-48	R CL WSBK	FR SS SP SXP	No YB				
AB 3	LS 12%	0-8	Br SCL WSBK	FR SS SP SXP	YB	48"	N/A	N/A	PS 0.25
		8-36	R C SBK	FR SS SP SXP					
		36-48	R CL WSBK	FR SS SP SXP	No YB				

COMMENTS:

SOIL/SITE EVALUATION

(Continuation Sheet)

PROPERTY ID #: _4751264943_____
DATE OF EVALUATION: _____
COUNTY: ___IREDELL___

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	
PIT 5	LS 6%	0-6	Br CL WSBK	FR SS SP SXP	YB CHR 2 @ 24"	24"	N/A	N/A	DRIP 0.125
		6-50	R C SBK	FR SS SP SXP					
PIT 6	LS 6 %	0-12	Br SCL WSBK	FR SS SP SXP	YB	53"	Few SAP Incl	N/A	PS 0.25
		12-34	R C WSBK	FR SS SP SXP					
		34-53	R CL WSBK	FR SS SP SXP					

COMMENTS: _____

$350.00
AP-303435

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(j) 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: _____ Phone: Mike 980-722-7370 Alt. Phone: _____
Owner Name: Same Address: _____ Zip: _____
Owner Email: _____ Phone: _____ Alt. Phone: _____

Property Information:

Street Address: 156 Windstone Dr
Subdivision Name: Windstone Crossing Section/Phase: _____ Lot Number: 49
Driving Directions: _____

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

CHECK FOUNDATION TYPE

(✓) 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: 4
Maximum Number of Occupants: _____
( ) Swimming Pool
( ) Other Addition/Structure: _____

( ) 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: _____ 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: _____ 5/19/2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

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 156 Windstone Dr Windstone Crossing Lot 49, identified as PIN (Parcel Identification Number) _____, 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.

	12/13/2019		
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

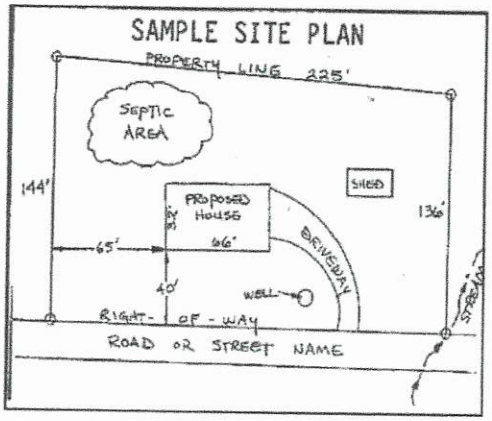
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

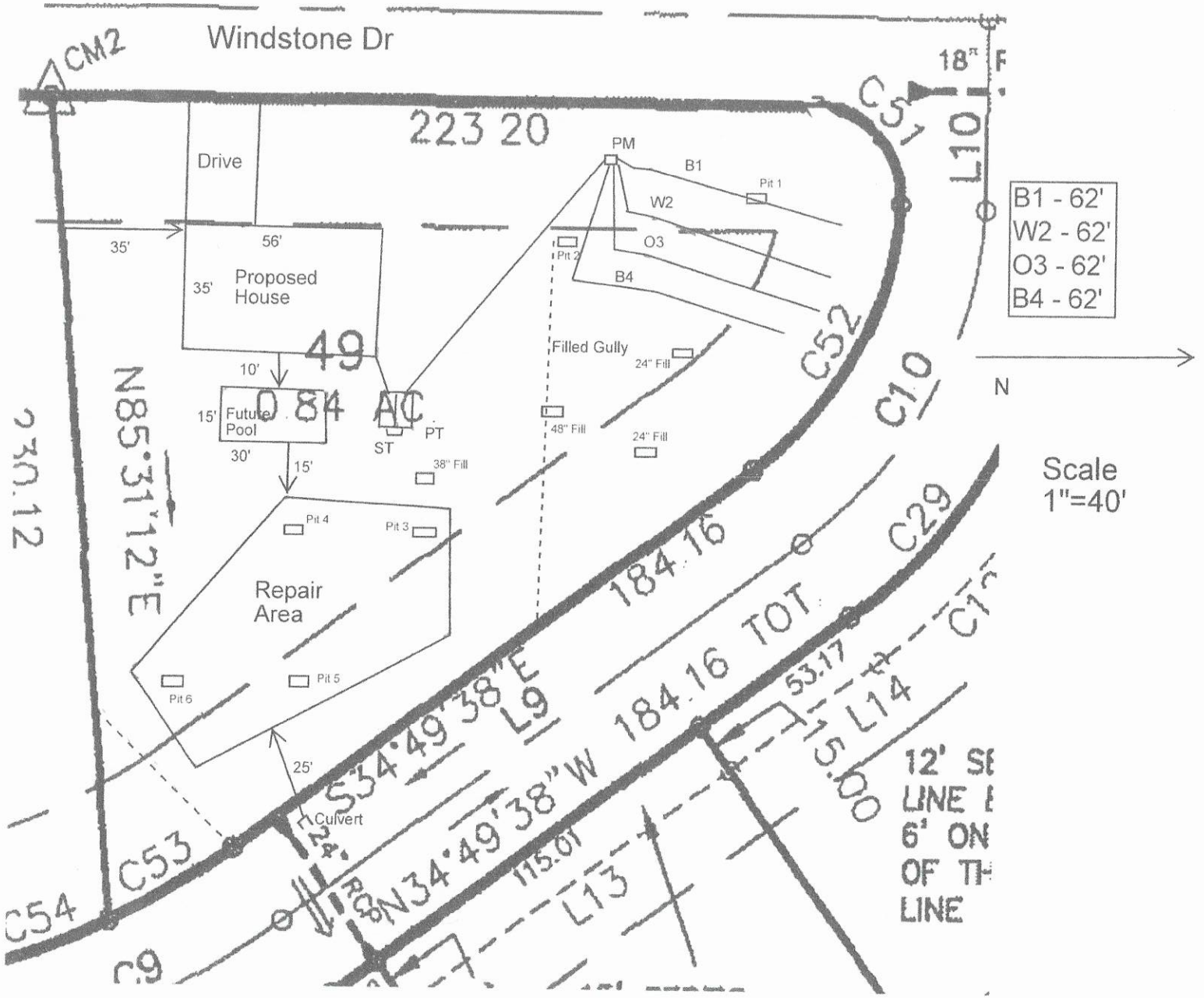
Signature: _____

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

12/13/2019

DATE

APPROVED JUN 12 2020



the handrail height, including treads and landings, shall not be less than 31.5 inches (787 mm) where a id 27 inches (648 mm) where handrails are provided on both sides.

ways shall be in accordance with Section R311.5.6.

of the stairway shall not be less than 6 feet 8 inches (2036 mm) measured vertically from the sloped r from the floor surface of the landing or platform.

sers

3/4 inches (209 mm). The riser shall be measured vertically between leading edges of the adjacent within any flight of stairs shall not exceed the smallest by more than 3/8 inch (9.5 mm).

l inches (229 mm). The tread depth shall be measured horizontally between the vertical planes of the treads and at a right angle to the tread's leading edge. The greatest tread depth within any flight of st by more than 3/8 inch (9.5 mm). Winder treads shall have a minimum tread depth of 10 inches (254 mm) nches (305) mm from the side where the treads are narrower. Winder treads shall have a minimum tread point. Within any flight of stairs, the greatest winder tread depth at the 12 inch (305 mm) walk line shall not 3/8 inch (9.5 mm).

sing edge of the tread shall be no greater than 4/16 inch (14.3 mm). A nosing not less than 3/4 inch (19 mm) shall be provided on stairways with solid risers. The greatest nosing projection shall not exceed tions than 3/8 inch (9.5 mm) between two stories, including the nosing at the level of floors and landings. d 1/2 inch (12.7 mm). Risers shall be vertical or sloped from the underside of the leading edge of the than 30 (0.51 rad) degrees from the vertical. Open risers are permitted, provided that the opening e passage of a 4-inch diameter (102 mm) sphere.

required where the tread depth is a minimum of 11 inches (279 mm). tween adjacent treads is not limited on stairs with a total rise of 30 inches (762 mm) or less.

ngs

e the top and bottom of each stairway.

required at the top of an interior flight of stairs, provided a door does not swing over the stairs.

e a vertical rise greater than 12 feet (3658 mm) between floor levels or landings.

ll not be less than the stairway served. Every landing shall have a minimum dimension of 36 inches (914 mm) l.

rface

landings of stairways shall be sloped no steeper than one unit vertical in 48 inches horizontal

least one side of each continuous run of treads or flight with four or more risers.

y from the sloped plane adjoining the tread nosing, or finish surface of ramp slope, shall be not less one than 38 inches (965 mm).

ntinuous for the full length of the flight, from a point directly above the top riser of the flight to a point flight. Handrail ends shall be returned or shall terminate in newel posts or safety terminals. Handrails ace of not less than 1 1/2 inch (38 mm) between the wall and the handrails.

be permitted to be interrupted by a newel post at the turn. olute, turnout, starting easing or starting newel shall be allowed over the lowest tread.

one of the following types or provide equivalent graspability.

ross section shall have an outside diameter of at least 1 1/4 inches (32 mm) and not greater than 2 inches or it shall have a perimeter dimension of at least 4 inches (102 mm) and not greater than 6 1/4 inches (160 n dimension of 2 1/4 inches(57 mm).

er greater than 6 1/4 inches (160 mm) shall provide a graspable finger recess area on both sides of the gin within a distance of 3/4 inch (19 mm) measured vertically from the tallest portion of the profile and ch (6 mm) within 7/8 inch (22 mm) below the widest portion of the profile. This required depth shall m) to a level that is not less than 1 3/4 inches (45 mm) below the tallest portion of the profile. The the recess shall be 11/4 inches (32 mm) to a maximum of 2 3/4 inches (70 mm). Edges shall have a minimum

umination in accordance with Section R303.6.

r surfaces located more than 30 inches (762 mm) above the floor or grade below shall have guards not ght. Open sides of stairs with a total rise of more than 30 inches (762 mm) above the floor or grade than 34 inches (864 mm) in height measured vertically from the nosing of the treads.

losed with insect screening shall be provided with guards where the walking surface is located more than or or grade below.

rches

r stairways, raised floor areas, balconies and porches shall have intermediate rails or ornamental closures sphere 4 inches (102mm) or more in diameter.

formed by the riser, tread and bottom rail of a guard at the open side of a stairway are permitted to be here 6 inches (152 mm) cannot pass through. guards on the sides of stair treads shall not allow a sphere 4 3/8 inches (107 mm) to pass through.

TION

s

ler spaces formed where ceilings are applied directly to the underside of roof rafters shall have cross ce by ventilating openings protected against the entrance of rain or snow. Ventilating openings shall be wire mesh, with 1/8 inch (3.2 mm) minimum to 1/4 inch (6.4 mm) maximum openings.

a shall not be less than 1 to 150 of the area of the space ventilated except that the total area is 300, provided at least 50 percent and not more than 50 percent of the required ventilating area is the upper portion of the space to be ventilated at least 3 feet (914 mm) above eave or cornice vents ventilation provided by eave or cornice vents. As an alternative, the net free cross-ventilation area may apor barrier having a transmission rate not exceeding 1 perm (57.4 ng/s · m2 · Pa) is installed on the warm

installed, insulation shall not block the free flow of air. A minimum of a 1-inch (25.4 mm) space shall be nd the roof sheathing at the location of the vent.

or roof construction, an attic access opening shall be provided to attic areas that exceed 30 square height of 30 inches (762 mm) or greater.

t be less than 22 inches by 30 inches (559 mm by 762 mm) and shall be located in a hallway or other inch (762 mm) minimum unobstructed headroom in the attic space shall be provided at some point above the R31.3 for access requirements where mechanical equipment is located in attics.

T CHIMNEYS

sted and labeled and shall be installed and terminated in accordance with the manufacturer's installation

ces

Installed at the termination of factory-built chimneys except where such shrouds are listed and labeled for chimney system and installed in accordance with the manufacturer's installation instructions.

nces

d solid fuel-burning appliances shall comply with the Type HT requirements of UL 103.

ace stoves listed only to UL 737 shall comply with the requirements of UL 103.

places

ll fireplaces shall comply with the requirements of UL 127.

supported by structural members, such as joists and rafters, such members shall be designed to support the

llances

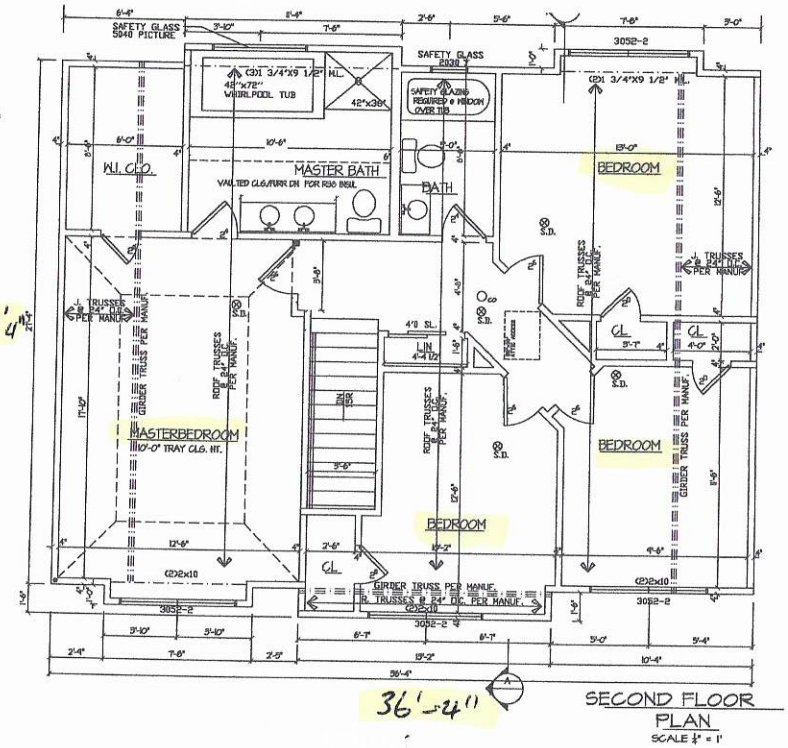
l-heat appliances producing flue gases having a temperature above 1,000°F (538°C), measured at the mply with UL 1484.

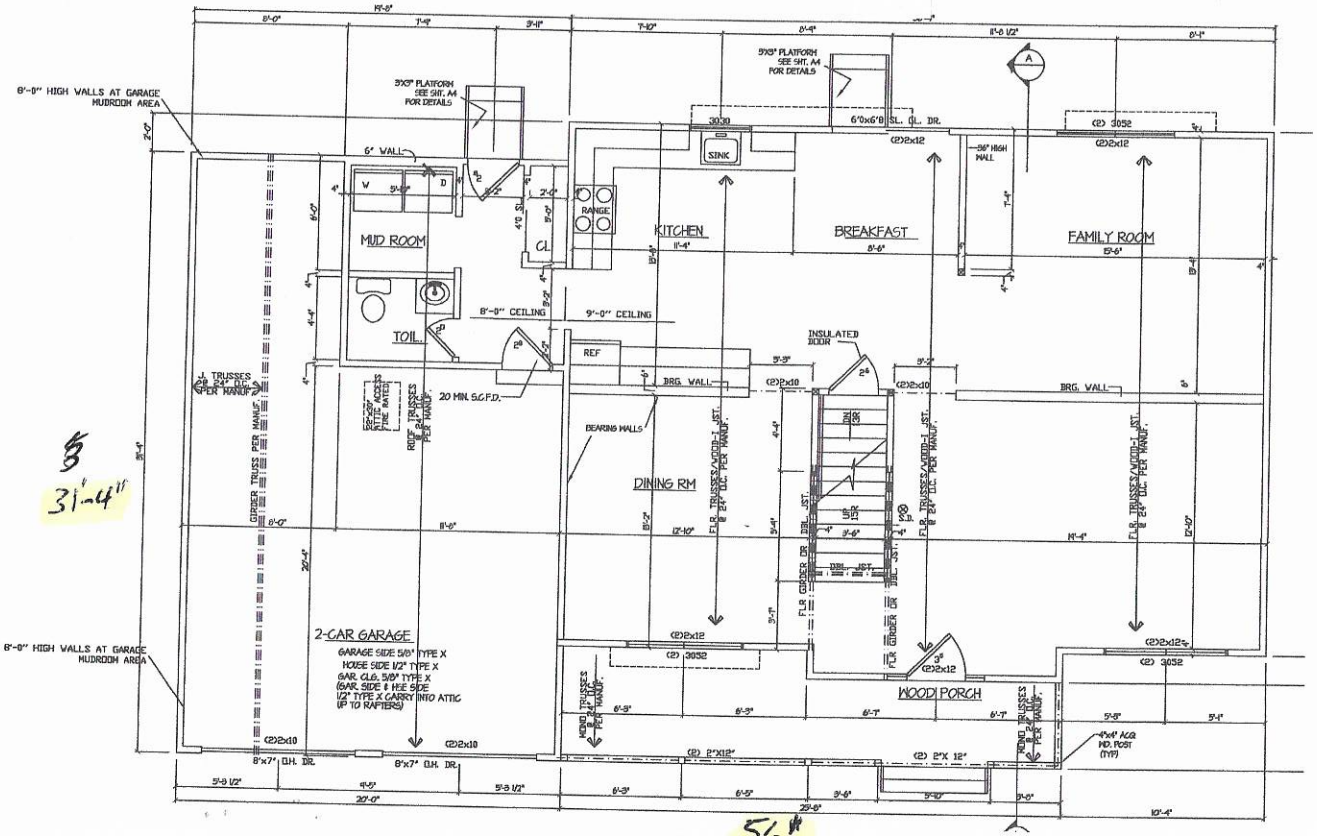
Acknowledgement Of Plans Submittal ONLY!

Buyers Initial 6-15-2020

Date

Date





IREDELL COUNTY · NC

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

APPLICATION NUMBER
303435 Issue Date:

Permit Type: ZONING

Parcel Number	Street Address	Jurisdiction
4751264943.000	156 WINDSTONE DR	Iredell County

Owner Information	Applicant Information
Name: PILCH ACRES HOLDINGS LLC	Name: MICHAEL ATHANAS & ASSOCIATES
Address:	Address: 561 ENNIS RD
	WEDDINGTON, NC 28173
Phone:	Phone: (704)576-3887

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.84	35	35	25	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: 12/13/2019

Signature of Owner/Contractor

Permit Number	303435	TOTAL FEES:	$77.25