ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625 PERMIT # 302269

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

PIN # 4751271571.000

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

SITE ADDRESS: 171 Windstone Drive Troutman NC 28166 PHONE: — ALT. PHONE Eddie 631-831 1461

SITE DIRECTIONS: Hwy 21 to Ostwalt Amity Rd to Pilch Rd. SAP CONTROLLED: ☐ YES ☒ NO

SUBDIVISION: Windstone SECTION: — LOT # 18 LOT AREA: .73 Acres. DESIGN FLOW: 360 L.T.A.R.: .225

Septic Tank	1000	(gal)	STB 760	Date	3-13-2020	☐ 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% w/ 6in Cover	☐ Business	No. Persons		☐ Private
Pump Make		Model		Serial #		Repair System Description:	Drip (.125 LTAR).	☐ Other	No. Employees		☒ Public
# Nitrification Fields	1	# Lines	4	Linear Ft	400	Maintenance Agreement Required:	☐ YES ☐ NO	☒ Slab	☐ Crawl Space		☐ Community
Trench Width	36	Trench Bottom Depth(Low side)	14+16 high	Gravel Depth	—	☒ GRAVITY	☐ PRESSURE	☐ Basement w/plumbing		☐ Basement w/o plumbing	

Comments / Conditions: Bring in 6inches of Group III Comly Approved Cover. Do not exceed max of 16 inches high side. Install on the Contour of the Land. Do not Drive, park, pave, grade or bury utilities on drainfield Area.

* Floor plans from Nov. 2019 w/ addition of unheated Bonus Room ok

INITIAL SITE SKETCH

See the attached Site plan and Spec sheet by: Michael Athanas + Associates LSS

AS BUILT SKETCH

Lines Installed 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: Acknowledgement of Acceptance Received Date: 4-29-2020 Installed by: Center Grading

IMPROVEMENT PERMIT by: Benjamin A. Bost Date: 4-24-2020 OPERATION PERMIT by: [signature] Date: 6-3-2020

AUTHORIZATION TO CONSTRUCT by: Benjamin Bost Date: 5-6-2020 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.

IREDELL COUNTY HEALTH DEPARTMENT
JANE HINSON, RN BSN MS
HEALTH DIRECTOR

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

ACKNOWLEDGEMENT OF ACCEPTANCE OF PERMIT DESIGN AND CONDITIONS

Any permit requiring a signature must have this form signed by the property owner or their authorized agent. Once this form is signed and returned to Environmental Health an official copy of the permit will be emailed to the email that you provide.

I, Edward Belanger, am the legal owner or the agent of the property located at 171 Windstone Dr Troutman, NC, identified as PIN(Parcel Identification Number) 4751271571.000, located in Iredell County, North Carolina.
Permit # 302269.

I do hereby agree to the permit design and the conditions of this permit.

Signature of Owner/Authorized Agent — Date: 4/27/2020

Signature of Witness — Date: 4/27/2020

edbcbhomes@aol.com
email

Central Office (Health Dept.)
348 Turnersburg Hwy
Statesville, NC 28625
704 878-5300

Mooresville – Environmental Health
610 E. Center Avenue
Mooresville, NC 28115
704 660-3625

Statesville - Environmental Health
349 N. Center Street
Statesville, NC 28677
704 878-5305 x3456

http://www.co.iredell.nc.us/Departments/Health/

Windstone Dr
C37
C37
264.67
N21°32'34"W
129' FRONT SETBACK
102' FRONT SETBACK
Drive
50'
Proposed House
60'
0.81 AC
19
318.26
N52°34'50"W
236.70
B1 - 70'
P2 - 140'
W3 - 120'
O4 - 85'
Fill Area
ST
Pit 2
0.73 AC
Pit 1
18
B1
P2
O4
W3
Repair Area
Pit 4
Pit 3
221.37
Scale
1"=40'
N



MICHAEL ATHANAS & ASSOCIATES
LICENSED SOIL SCIENTIST
561 Ennis Rd.
Weddington, NC 28173
(704) 576-3887
2/20/2020

Reference: Data Sheet for 171 Windstone Dr, Windstone Crossing 18
House Footprint: See attached plan
Building Setbacks: 102' front, 15' side, 35' rear
Water Source: Community Well
Number of Bedrooms/Daily Flow: 3/360 GPD
Proposed LTAR: 0.225 GPD/FT^2 (initial), 0.125 GPD/FT^2 (repair)
Proposed System Type: 25% Reduction
Proposed Repair System Type: Drip Dispersal
Distribution: Gravity-End cap/Drop boxes
Septic Tank Size: 1000 gallons
Proposed Trench Bottom: 14" (need 6" of cover)

Line	Design Length	Actual Length
Blue 1	70'	70'
Pink 2	140'	144'
White 3	120'	121'
Orange 4	85'	87'

Initial System: 415' **Repair System:** 3000+ FT^2

Comments:

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

Sheet 1 of
PROPERTY ID #: 475127157
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
(Complete all fields in full)

OWNER: Pitch Acres Holding LLC
ADDRESS: 15 Frawein Rd Ste 62 Center Moriches NY 11934
PROPOSED FACILITY: New single family PROPOSED DESIGN FLOW (.1949): 360GPD
LOCATION OF SITE: 171 Windstone Dr
APPLICATION DATE 3/19/202
DATE EVALUATED: 4/3/2020
PROPERTY SIZE: 0.73 acres
PROPERTY RECORDED: Yes

WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☒ Other Community
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	SOIL MORPHOLOGY (.1941) .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	5S	0-8	SCL WSBK	Fr SSSPSHXP	Chroma 1's at 22" 25Y5/4 YB Mottling Throughout	57"	Litho Inclusions	Chroma 1's at 22"	Vat 22
		8-33	C ABK stng	Fir SSSPSHXP					
		33-55	CL ABK	Fr SSSPSHXP					
2	5S	0-9	SCL WSBK	Fr SSSPSHXP	Chroma 2's at 29" 5Y8/1 YB Mottling Throughout	58"	Litho Inclusions	Chroma 2's at 29"	Vat 29
		9-39	C SBK/ABK	Fr SSSPSHXP					
		39-58	CL SBK/ABK	Fr SSSPSHXP					
3	5S	0-20	SCL WSBK	Fr SSSPSHXP	YB Mottling Throughout Chroma 4's at Bottom	50"	Litho Inclusions	—	Ps.275
		20-40	C SBK	Fr SSSPSHXP					
		40-50	CL SBK	Fr SSSPSHXP					
4	5S	0-15	SC WSBK	Fr SSSPSHXP	Chroma 2's at 27" 5Y8/1 Chroma 3's at 45 Throughout	48"	—	Chroma 2's at 27"	Ps.25 Vat 27"
		15-35	C SBK/ABK	Fr SSSPSHXP					
		35-48	CL SBK	Fr SSSPSHXP					

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

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY: Patrick B
OTHER(S) PRESENT: Heather Bonbaugh Gary M

COMMENTS: Sunny

Updated February 2014

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay) O (Organic)	0.4 - 0.1 None	0.2 - 0.05 None	**MOIST** VFR (Very Friable) FR (Friable) FI (Firm) VFI (Very Firm v. Very Sticky) EFI (Extremely Firm)	**WET** NS (Non-sticky) SS (Slightly Sticky) S (Sticky) VS (Very Sticky) NP (Non-plastic) SP (Slightly Plastic) P (Plastic) VP (Very Plastic)

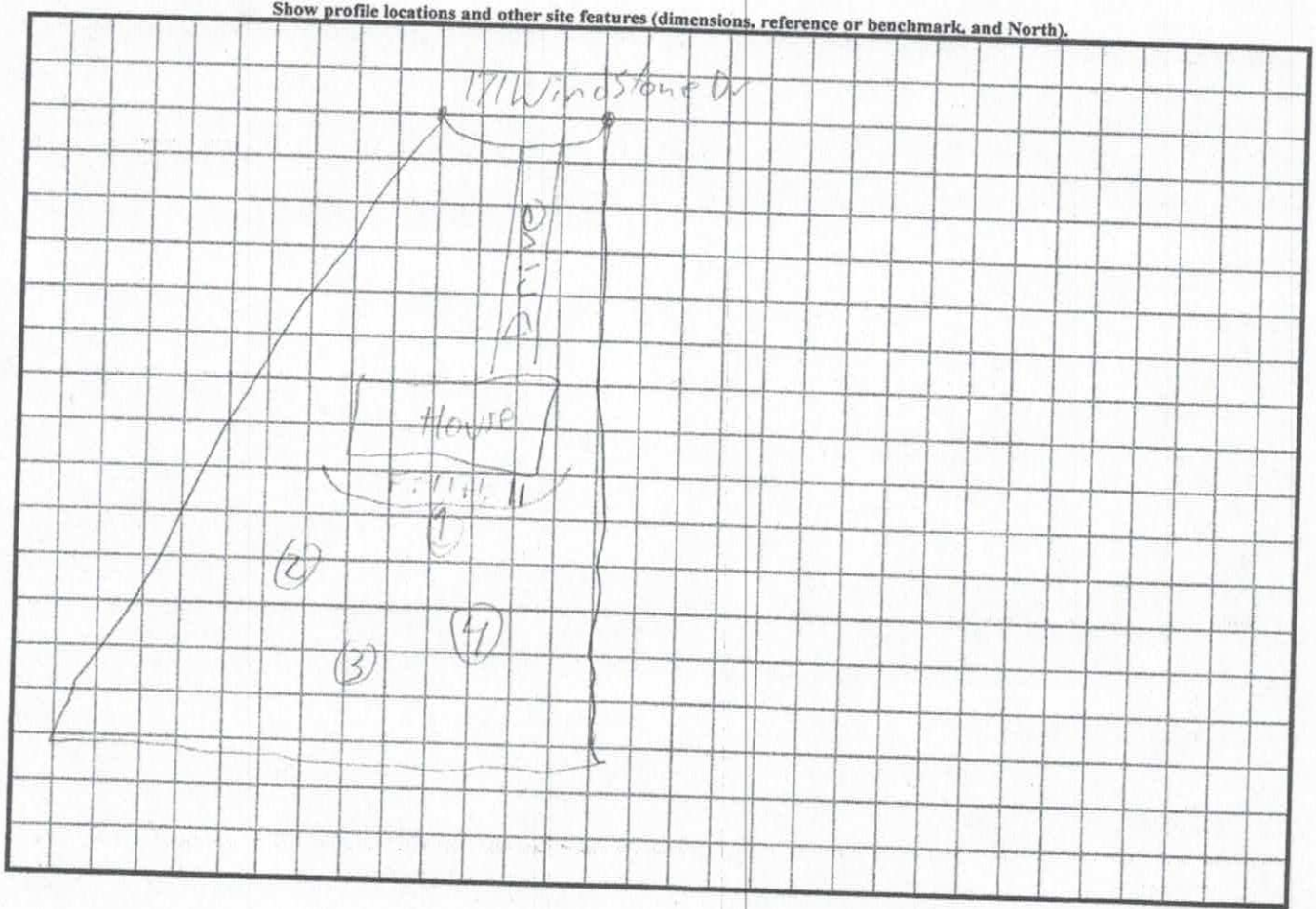
*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

NOTES

HORIZON DEPTH — In inches below natural soil surface
DEPTH OF FILL — In inches from land surface
RESTRICTIVE HORIZON — Thickness and depth from land surface
SAPROLITE — S(suitable) or U(unsuitable)
SOIL WETNESS — Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION — S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.
Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).



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

PROPERTY ID #: 475127157
DATE OF EVALUATION: 4-21-2020
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
1	5%	0-6	SC GR-WSBK	SS SP FR SEXP	2.5YR4/6 matrix	c/8	—	24-30 Interface slow w/ Redox Colors.	PS .225 possible Deep.
		6-24	C SBK/ABK	SS SP FR					
		24-30	CL WSBK/WABK	SS SP FR	10YR6/4 10YR6/6 10YR6/3 @ 24-30				
		30-48	CL WSBK.	SS SP FR					
2	5%	0-5	SC GR WSBK	SS SP FR SEXP	10YR6/2 10YR6/4 @ 36	36.	—	Redox Band from 30-44 Inch thick above	PS .225 Shallow
		5-29	C SBK/ABK	SS SP FR					
		29-44	CL WSBK/WABK	SS SP FR					
		44-60	CL WSBK.	SS SP FR					

COMMENTS: Shallow Install. Drip Replace 14 in low side. .225 LTAR. .125 LTAR 16 in high side. * Rain in Cover *

PROPERTY ID #: 4751271571
COUNTY: Iredell

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM**
(Complete all fields in full)

OWNER: Pilch Acres Holding LLC
ADDRESS: 15 Frowein Rd, Bldg G2, Center Moriche, NY 11934
PROPOSED FACILITY: 3 BDRM PROPOSED DESIGN FLOW (.1949): 360 GPD
LOCATION OF SITE: 171 Windstone Dr, Windstone Crossing Lot 18
APPLICATION DATE
DATE EVALUATED: 4/2020
PROPERTY SIZE: 0.73 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 5%	0-4	Br CL WSBK	FR SS SP SXP	Com YB @ 24"-30"	48"	N/A	N/A	PS 0.25-0.225
		4-48	R C ABK	FR SS SP SXP					
PIT 2	LS 5%	0-7	Br CL WSBK	FR SS SP SXP	Com YB @ 32" CHR 2 @ 36"	36"	N/A	N/A	PS 0.25-0.225
		8-56	R C ABK	FR SS SP SXP					
PIT 3	LS 5%	0-6	Br CL SBK	FR SS SP SXP	F-C YB @ 20" CHR 2 @ 32 "	32"	N/A	N/A	PS 0.25-0.225 ✓ ICHD 4-21-2020
		6-50	R C ABK	FR SS SP SXP					
PIT 4	LS 4%	0-16	Br CL WSBK	FR SS SP SXP	Few Mn Few YB	50"	N/A	N/A	PS 0.25 ✓ ICHD 4-21-2020
		16-50	R C SBK	FR SS SP SXP					

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1245 FT2	3000 FT2
System Type(s)	25% Reduction	DRIP
Site LTAR	0.225	0.125

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

COMMENTS:

RECEIVED MAR 2 0 2020

IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

APPLICATION FORM

AP 302269 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

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: _____ **Phone:** Eddie-631-831-1461 **Alt. Phone:** _____

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

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

Property Information:

Street Address: 171 Windstone Dr

Subdivision Name: Windstone Crossing **Section/Phase:** _____ **Lot Number:** 18

Driving Directions: _____

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: _____
( ) 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: _____ 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: _____ 3/19/2020
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

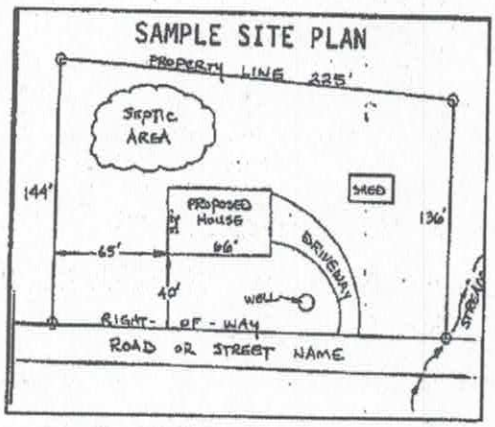
IREDELL COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH

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

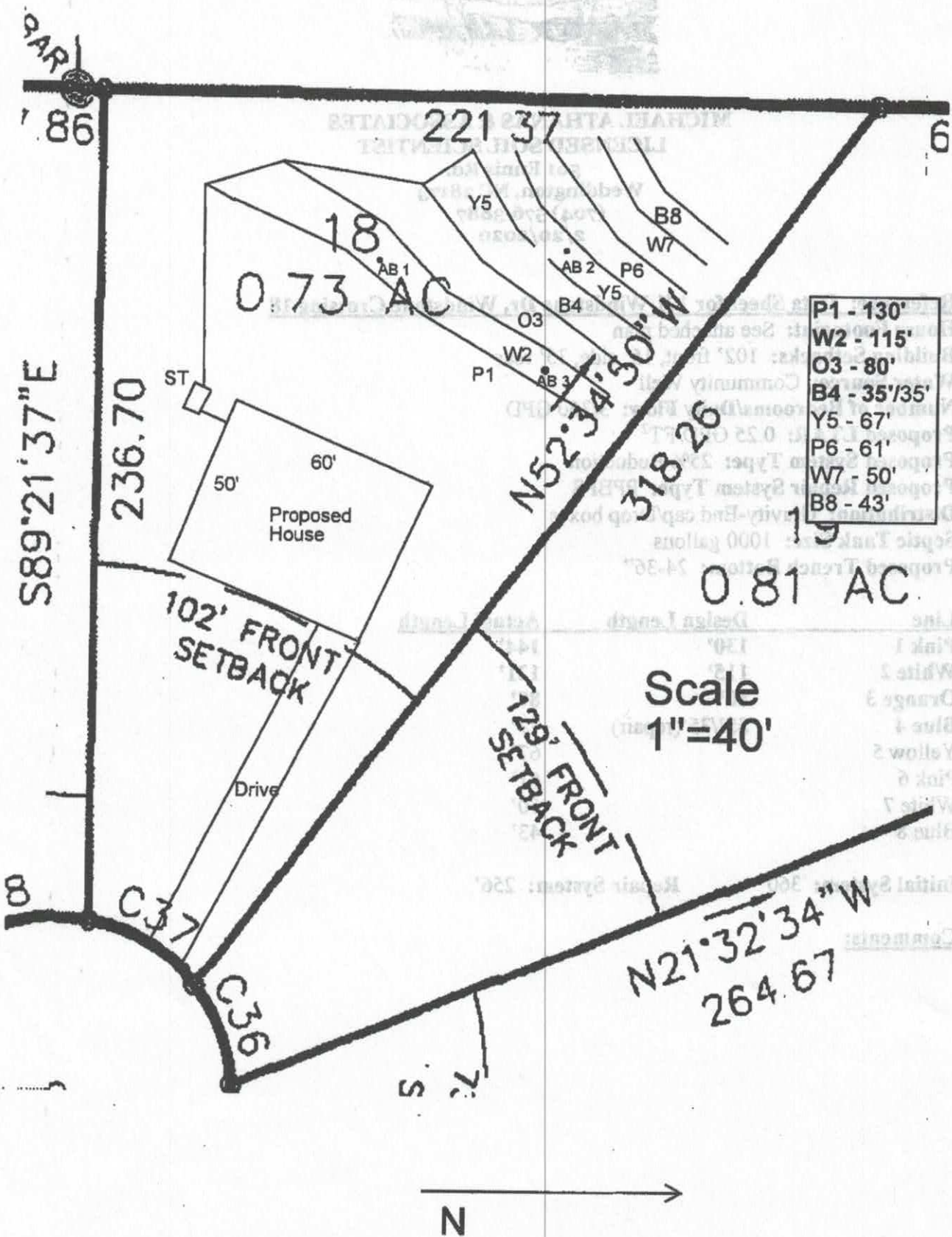
USE THIS SPACE TO DRAW YOUR SITE PLAN

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: _____ 3/19/2020

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


221.37
Y5
B8
W7
18
AB 1
0.73 AC
AB 2
P6
Y5
B4
O3
W2
P1
AB 3
P1 - 130'
W2 - 115'
O3 - 80'
B4 - 35'/35'
Y5 - 67'
P6 - 61'
W7 - 50'
B8 - 43'
ST
S89°21'37"E
236.70
60'
50'
Proposed House
N52°34'30"W
318.26
0.81 AC
102' FRONT SETBACK
Scale
1"=40'
129' FRONT SETBACK
Drive
C37
C36
N21°32'34"W
264.67
N

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 171 Windstone Dr Windstone Crossing Lot 18, identified as PIN (Parcel Identification Number) 4751271571, 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

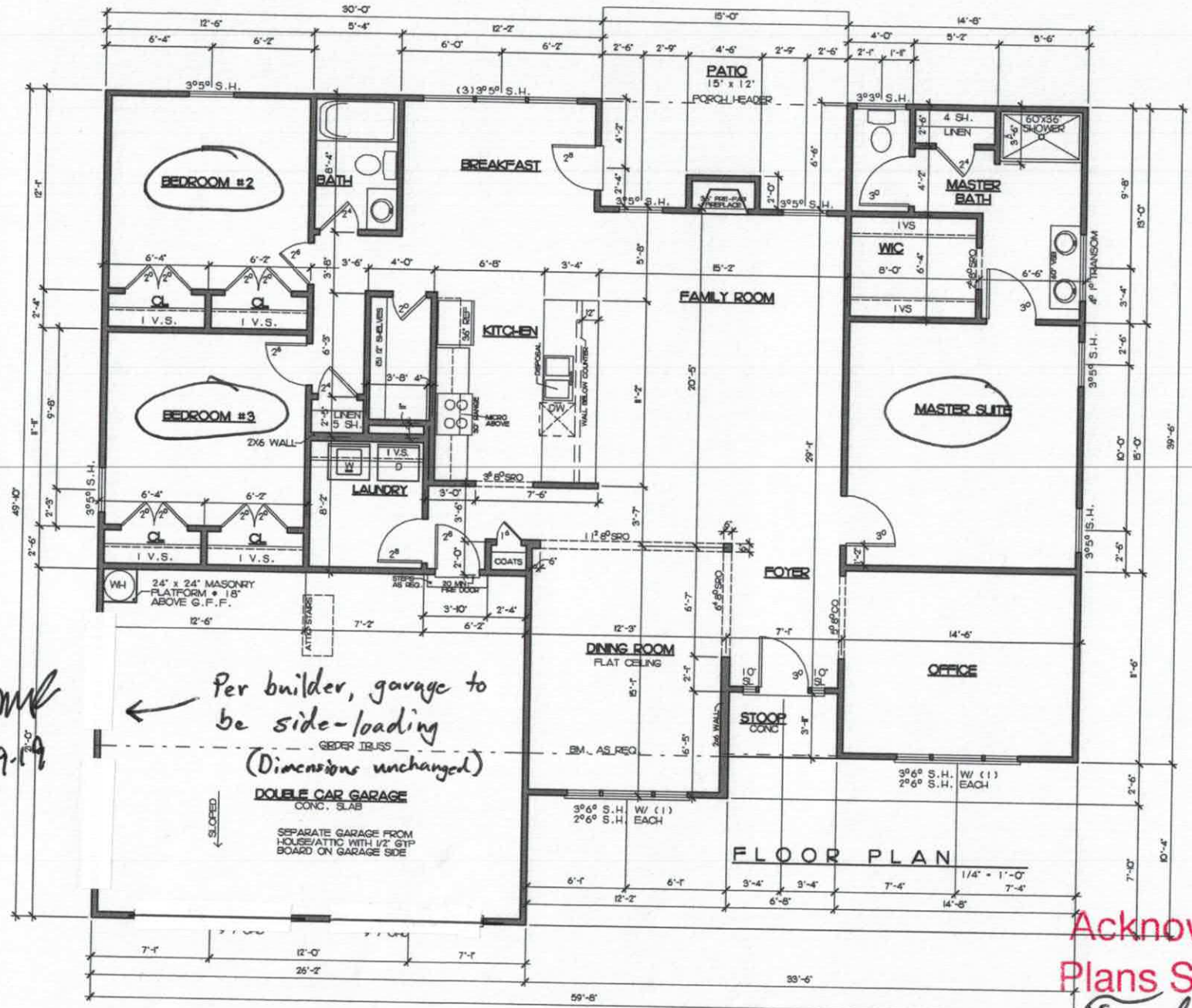
I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

Signature of Owner(s)	Date	Signature of Witness	Date
	3/19/2020		

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



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=	2682 sq ft

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

Per builder, garage to be side-loading
(Dimensions unchanged)
WMF 11-19-19

WINDSTONE ESTATES

THE MEADOW — FIRST FLOOR PLAN

DR. BY: BRIAN G.
Date: 05-06-08
REV: 02-22-18, 02-26-18, 03-20-18

MEADOW-FP2

Acknowledgement Of Plans Submittal ONLY!

Tom Shuck Date 11/12/19

WM Falkler 10-31-19 Date

IREDELL COUNTY

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

APPLICATION NUMBER
302269
Issue Date: 10/31/2019

Permit Type: ZONING RESIDENTIAL

Parcel Number	Street Address	Jurisdiction
4751271571.000	171 WINDSTONE DR	IREDELL COUNTY

Owner Information	Applicant Information
Name: PILCH ACRES HOLDINGS LLC Address: Phone:	Name: WINDSTONE CROSSING INC Address: 15 FROWEIN RD STE G-2 CENTER MORICHES, NY 11934 Phone: (704)528-8450

Use Requested	Zone Code
Single Family Dwelling	RA

Lot Acreage	F Setback	B Setback	L Setback	R Setback	Watershed	Flood Zone
0.73	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.

_____

Signature of Owner/Contractor

Date: 10/31/2019

Permit Number	000700

TOTAL FEES:	$77.25