# ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 / Mooresville Office (704) 660-3625

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

PERMIT # AP 31125

PIN # 4776-82-1381

APPLICANT/OWNER: Cornerstone III Properties — APPLICANT ADDRESS: 118 E. Kingston Ave. Charlotte NC 28203

SITE ADDRESS: 127 Poplar Leaf Ln, Statesville NC 28625 — PHONE: 704-301-3229 — ALT. PHONE

SITE DIRECTIONS: NC 64 → (L) Swann Rd → (R) Poplar Leaf → lot on (L)

SUBDIVISION: Fifth Creek Estates — SECTION: 2 — LOT # 5 — LOT AREA: 0.614 ac — SAP CONTROLLED: ☐ YES ☒ NO — DESIGN FLOW: 480 gpd — L.T.A.R.: 0.3 (I+R)

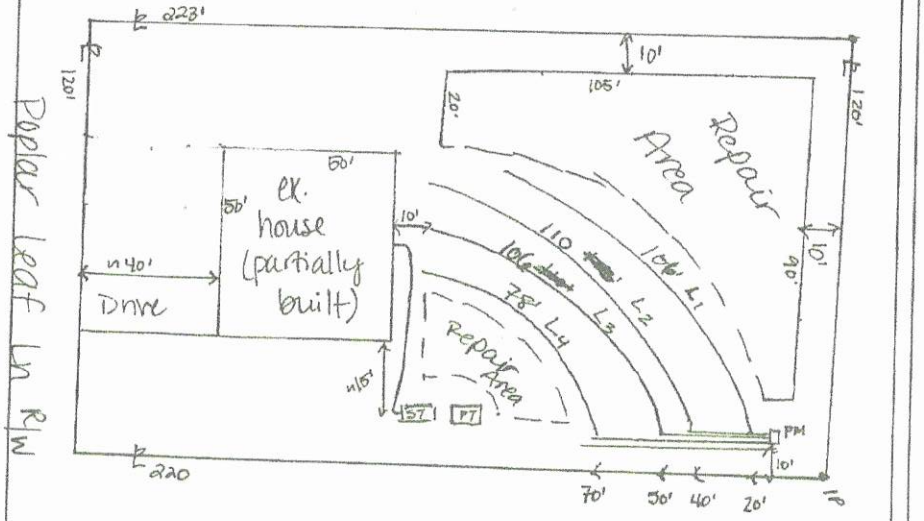
| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 (gal) | STB 760 | Date 6-12 | ☒ New System ☐ Repair ☐ Expansion | System Type: I II III IV V VI | ☒ Residence | No. Bedrooms | 4 | Water Supply |
| Pump Tank | 1000 (gal) | PT 283 | Date 6-15 | System Description: | 25% Reduction - PM | ☐ Business | No. Persons | 8 | ☐ Private |
| Pump Make | Zoeller | Model Myth WE0511H | Serial # B214805 | Repair System Description: | 50% Reduction | ☐ 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 (from scale) | 36" max | Gravel Depth | N/A | ☐ GRAVITY ☒ PRESSURE | ☐ Basement w/plumbing | | ☐ Basement w/o plumbing |

Comments / Conditions: Do not drive, park, pave, grade, or bury utilities in drainfield. Install on contour of land use pressure manifold distribution. Divert all drainage from drainfield.

Pressure Manifold: 2" Supply Line, 2' pressure head
L1, L2, L3 = 1½ SCH 40 each tap L4 = 1½ SCH 80 Drawn Down = 8.67"
Dose = 182 g Flow = 26.81 gpm Run Time = 6.79 min

### INITIAL SITE SKETCH

1" = 50'




### 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.

Set 2ft pressure head 8/19/21 DW
Alarm checked 8/19/21 & Set floats

7/30 ✓ Tank / Lines / PM checked

Electrical checked 8/25/21

*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: Stan Lowe — Date: 7/19/2021 — Installed by: Gulle Excavating

IMPROVEMENT PERMIT by: D. Weberg — Date: 7/1/21 — OPERATION PERMIT by: D. Weberg — Date: 8/25/21

AUTHORIZATION TO CONSTRUCT by: D. Weberg — Date: 7/11/21 — Existing System Inspected by: — Date:

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

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

Sheet 1 of 1
PROPERTY ID #: 0176 92139
COUNTY: Durham

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

OWNER: Carolina Star Properties C+S
ADDRESS: 118 East Knowlton Ave Charlotte NC
PROPOSED FACILITY: 4/BR House
PROPOSED DESIGN FLOW (.1949): 480 gpd.
LOCATION OF SITE: 127 Poplar Leaf Lane (5th Creek Estates Lot 5)
APPLICATION DATE 9/24/2020
DATE EVALUATED: 10/20/2020
PROPERTY SIZE: .6 AC
PROPERTY RECORDED: Y
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) .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 | 4 side 12% | 0-3 | SCL | SS SP FR SEXP | 48. | 52 | – | FM Cyn Athens Rock-32-40 | PS .30 |
| | | 3-24 | C SBK/ABK | SS S FR | | | | | |
| | | 24-52 | CL WSBK | SS P FR | | | | | |
| 2 | 5 side 15% | 0-9 | SCL | SS SP FR SEXP | 12 | 48 | – | Cyn Thought | PS .30 |
| | | 9-29 | C SBK/ABK | SS SP FR | | | | | |
| | | 29-48 | CL WSBK | SS SP FR | | | | | |
| 3 | Side 15% | 0-12 | SCL | SS SP FR SEXP | PS. | 52 | – | – | PS .30 |
| | | 12-35 | C SBK/ABK | SS S FR | | | | | |
| | | 35-52 | CL WSBK | SS SP FR | | | | | |
| 4 | Side 15% | 0-12 | SCL | SS SP FR SEXP | PS | | | | PS. 30 Mark ED. |
| | | 12-32 | C SBK | SS SP FR | | | | | |
| | | 32-52 | CL – Ftrans Sap – Rock @ 52 | | | 52 | | – | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM |
|---|---|---|
| Available Space (.1945) | 400 C.A. | 400 C.A. |
| System Type(s) | III 25% @ III 25% PM | |
| Site LTAR | .30 | .30 |

OTHER FACTORS (.1946): NA Gully in Front
SITE CLASSIFICATION (.1948): PS.
EVALUATED BY: Botkin
OTHER(S) PRESENT: D. Wilbar

COMMENTS: Crawl. Water

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)<br>CV (Convex Slope)<br>D (Drainage Way)<br>DS (Debris Slump)<br>FP (Flood Plain)<br>FS (Foot Slope)<br>H (Head Slope)<br>L (Linear Slope)<br>N (Nose Slope)<br>R (Ridge)<br>S (Shoulder Slope)<br>T (Terrace) | I | S (Sand)<br>LS (Loamy Sand) | 1.2 - 0.8 | 0.6 - 0.4 | SEXP (Slightly Expansive)<br>EXP (Expansive) | G (Single Grain)<br>M (Massive)<br>CR (Crumb)<br>GR (Granular)<br>SBK (Subangular Blocky)<br>ABK (Angular Blocky)<br>PL (Platy)<br>PR (Prismatic) |
| | II | SL (Sandy Loam)<br>L (Loam) | 0.8 - 0.6 | 0.4 - 0.3 | | |
| | III | Si (Silt)<br>SiCL (Silty Clay Loam)<br>CL (Clay Loam)<br>SCL (Sandy Clay Loam)<br>SiL (Silt Loam) | 0.6 - 0.3 | 0.3 - 0.15 | | |
| | IV | SC (Sandy Clay)<br>SiC (Silty Clay)<br>C (Clay)<br>O (Organic) | 0.4 - 0.1<br>None | 0.2 - 0.05<br>None | | |

| MOIST | WET |
|---|---|
| VFR (Very Friable)<br>FR (Friable)<br>FI (Firm)<br>VFI (Very Firm v. Very Sticky)<br>EFI (Extremely Firm) | NS (Non-sticky)<br>SS (Slightly Sticky)<br>S (Sticky)<br>VS (Very Sticky)<br>NP (Non-plastic)<br>SP (Slightly Plastic)<br>P (Plastic)<br>VP (Very Plastic) |

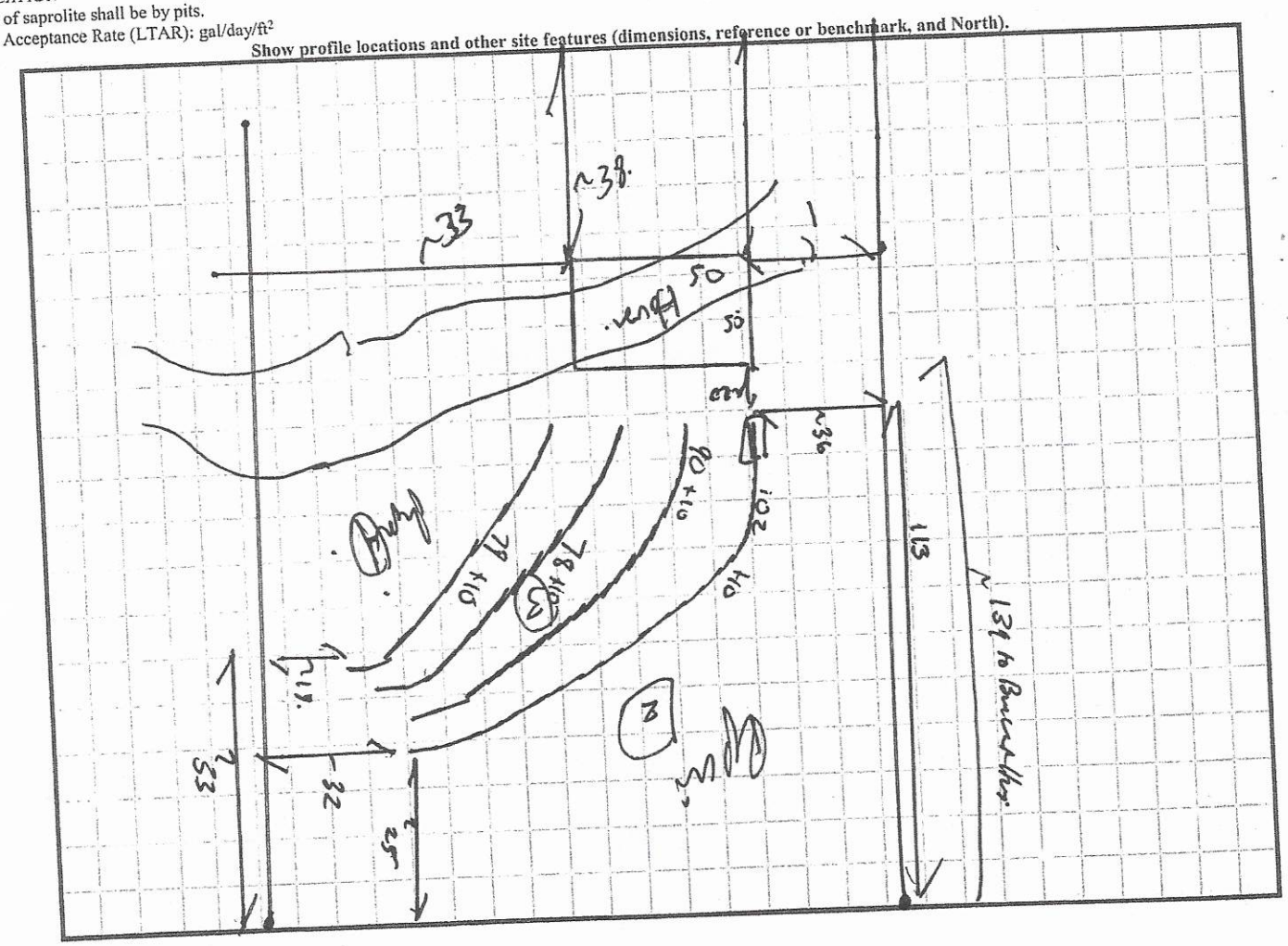
*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

***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/ft²

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




Canal. 4BR

Updated February 2014

*RE LAYOUT*

RECEIVED JUN 2 1 2021

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

AP 311125

**Iredell County Health Department – Environmental Health Division**

*SEPTIC*

PAGE 1: *APPLICATION FORM*

Paid $320.00

**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: CORNERSTONE III PROPERTIES Address: 118 EAST KINGSTON AVE, CLT. Zip: 28203
Applicant Email: STAN@CORNERSTONE3P.COM Phone: 704 301 3229 Alt. Phone: X
Owner Name: BUTLER RIVER DEVELP. Address: 725 CHERRY RD. Rock Hill, SC Zip: 29732
Owner Email: N/A Phone: N/A Alt. Phone: N/A

**Property Information:**

Street Address: 127 Poplar Leaf Lane PIN# 4776-82-1381
Subdivision Name: FIFTH CREEK ESTATES Section/Phase: _____ Lot Number: 5
Driving Directions: HWY 64 NORTH / LEFT ONTO SWANN ROAD / RIGHT ONTO POPLAR LEAF

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

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

**CHECK FOUNDATION TYPE**

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

**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 Cowley 6/16/21
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/BUFFER RIVER, am the legal owner(s) of the property located at 127 POPLAR LEAF LANE, identified as

PIN (Parcel Identification Number) 4776-82-1381, 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/Buffer River Dev Dept
Signature of Owner(s)

6/16/21
Date

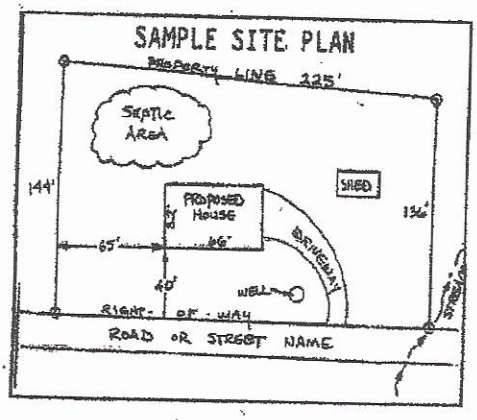
**Mooresville - Environmental Health**
ronda.hart@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

**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

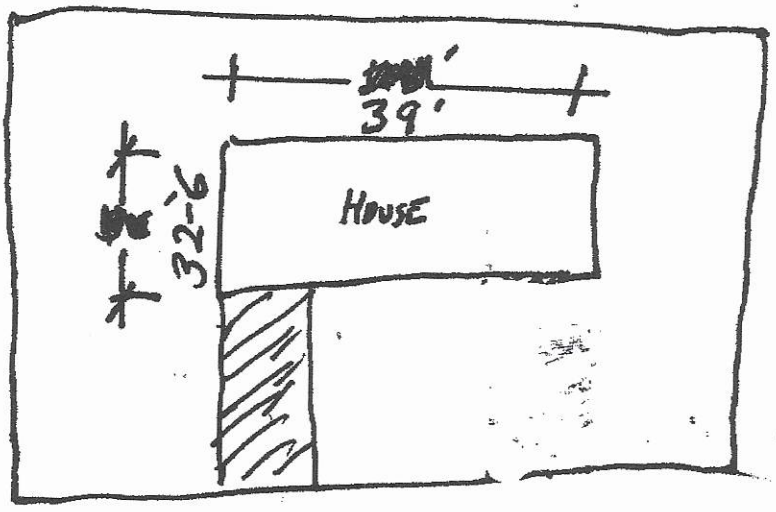
**Circle N/A on the following if appropriate:**

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***

* SEE ATTACHED SURVEY *




**Signature:** Stan Crosby **6/16/21**

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

# ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) [redacted] Mooresville Office (704) 660-3625

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

PERMIT # 21115. PIN # 4776 -82 -1381

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

SITE ADDRESS: 127 Poplar Leaf Lane, Statesville, NC 28625 PHONE: 704-301-3229 ALT. PHONE —

SITE DIRECTIONS: Hwy 64 W to Swann Road R onto Poplar Leaf SAP CONTROLLED: ☐ YES ☒ NO

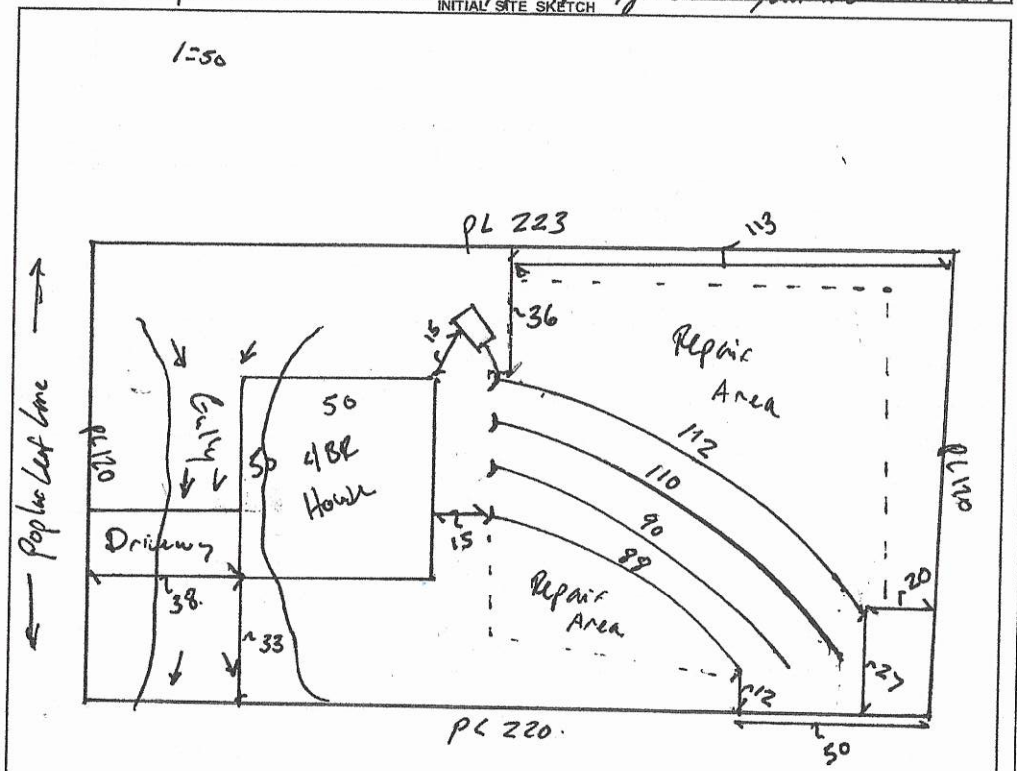
SUBDIVISION: Fifth Creek Estates SECTION: — LOT # 5 LOT AREA: .614 Acres DESIGN FLOW: 480 L.T.A.R.: .30

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | 1000 | (gal) | STB | | Date | | ☒ New System | ☐ Repair | ☐ Expansion | System Type: I II III IV V VI | ☒ Residence | No. Bedrooms | 4 |
| Pump Tank | - | (gal) | PT | - | Date | - | System Description: | Gravity - 25% Reduction | | | ☐ Business | No. Persons | 8 |
| Pump Make | - | Model | | - | Serial # | - | Repair System Description: | PM - 25% Reduction | | | ☐ Other | No. Employees | |
| # Nitrification Fields | 1 | # Lines | 4 | | Linear Ft: | 400 | Maintenance Agreement Required: | | ☐ YES | ☒ NO | ☐ Slab | ☒ Crawl Space | |
| Trench Width | 36 | Trench Bottom Depth | [redacted] | | 36 max | | Gravel Depth | — | ☒ GRAVITY | ☐ PRESSURE | ☐ Basement w/ plumbing | ☐ Basement w/o plumbing | |

**Water Supply**: ☐ Private ☐ Public ☐ Community

Comments / Conditions: Install Septic Drainlines on the contour of the land and utilize Serial distribution. Maintain 15ft from house foundation if drain is used. Do not exceed max depth of 36 inches. Do not Drive, park, pave, grade or bury utilities in drainfield.

INITIAL SITE SKETCH




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.

Resolved

*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**

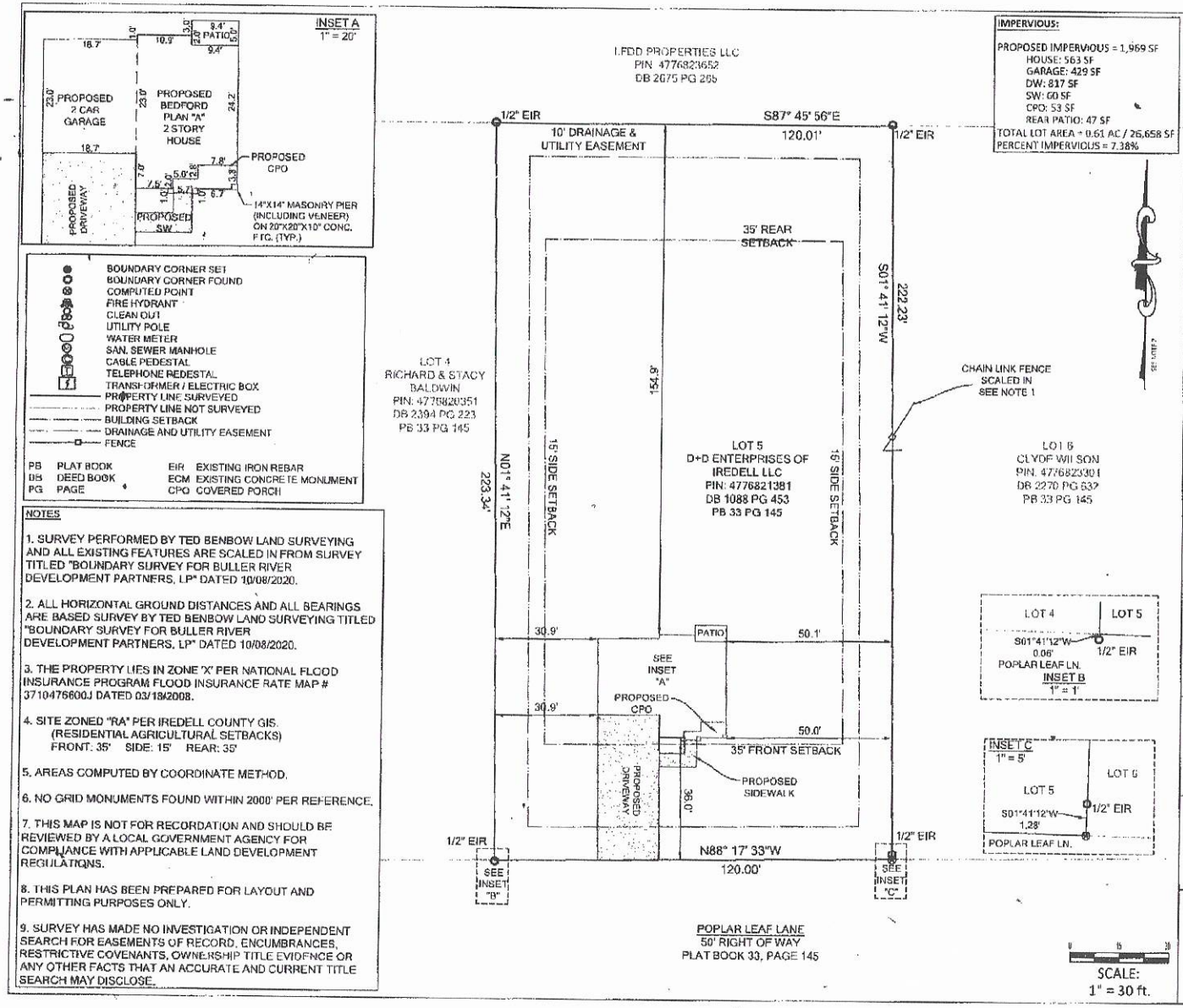
☐ **IMPROVEMENT PERMIT** *with plat valid without expiration.* ☒ **IMPROVEMENT PERMIT** *with site plan valid for 60 mos.* ☐ **AUTHORIZATION TO CONSTRUCT** *valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.*

Owner / Applicant Signature: Stan Pruitt Date: 6/13/22 Installed by:

IMPROVEMENT PERMIT by: Benjamin D. Butler Date: 10/26/2020 OPERATION PERMIT by: Date:

AUTHORIZATION TO CONSTRUCT by: Benjamin D. Butler Date: 10/28/22 Existing System Inspected by: Date:

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




NOTES

1. SURVEY PERFORMED BY TED BENBOW LAND SURVEYING AND ALL EXISTING FEATURES ARE SCALED IN FROM SURVEY TITLED "BOUNDARY SURVEY FOR BULLER RIVER DEVELOPMENT PARTNERS, LP" DATED 10/08/2020.

2. ALL HORIZONTAL GROUND DISTANCES AND ALL BEARINGS ARE BASED SURVEY BY TED BENBOW LAND SURVEYING TITLED "BOUNDARY SURVEY FOR BULLER RIVER DEVELOPMENT PARTNERS, LP" DATED 10/08/2020.

3. THE PROPERTY LIES IN ZONE 'X' PER NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP # 3710476600J DATED 03/18/2008.

4. SITE ZONED "RA" PER IREDELL COUNTY GIS.
(RESIDENTIAL AGRICULTURAL SETBACKS)
FRONT: 35' SIDE: 15' REAR: 35'

5. AREAS COMPUTED BY COORDINATE METHOD.

6. NO GRID MONUMENTS FOUND WITHIN 2000' PER REFERENCE.

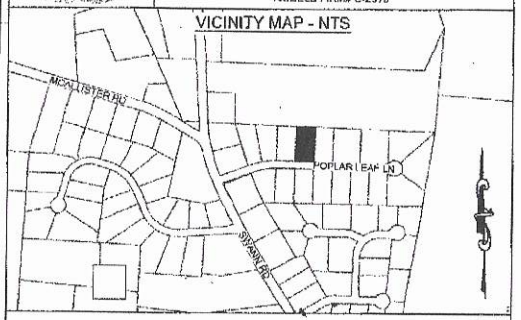
7. THIS MAP IS NOT FOR RECORDATION AND SHOULD BE REVIEWED BY A LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH APPLICABLE LAND DEVELOPMENT REGULATIONS.

8. THIS PLAN HAS BEEN PREPARED FOR LAYOUT AND PERMITTING PURPOSES ONLY.

9. SURVEY HAS MADE NO INVESTIGATION OR INDEPENDENT SEARCH FOR EASEMENTS OF RECORD, ENCUMBRANCES, RESTRICTIVE COVENANTS, OWNERSHIP TITLE EVIDENCE OR ANY OTHER FACTS THAT AN ACCURATE AND CURRENT TITLE SEARCH MAY DISCLOSE.


BATEMAN CIVIL SURVEY COMPANY
ENGINEERS • SURVEYORS • PLANNERS
2524 RELIANCE AVENUE, APEX, NC 27539
PHONE: (919) 577-1080 FAX: (919) 577-1081
INFO@BATEMANCIVILSURVEY.COM
NCBELS FIRM# C-2378


VICINITY MAP - NTS




I, JEFFERY W. BAKER, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY DIRECT SUPERVISION FROM A SURVEY MADE UNDER MY SUPERVISION (PLAT BOOK REFERENCED IN TITLE BLOCK); THAT THE BOUNDARIES NOT SURVEYED ARE CLEARLY INDICATED AS DRAWN FROM INFORMATION LISTED UNDER REFERENCES; THAT THE RATIO OF PRECISION AS CALCULATED IS 1:10,000+; AND THAT THIS MAP MEETS THE REQUIREMENTS OF THE STANDARD OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA. L-4412.
DATED:

PRELIMINARY

This map is of an existing parcel of land and is only intended for the parties and purposes shown. This map not for recordation. No title report provided.

THIS MAP IS CONSIDERED PRELIMINARY, NOT FOR RECORDATION, CONVEYANCE OR SALES UNLESS SIGNED AND SEALED BY THE LICENSED SURVEYOR.

# SURVEY PLOT PLAN

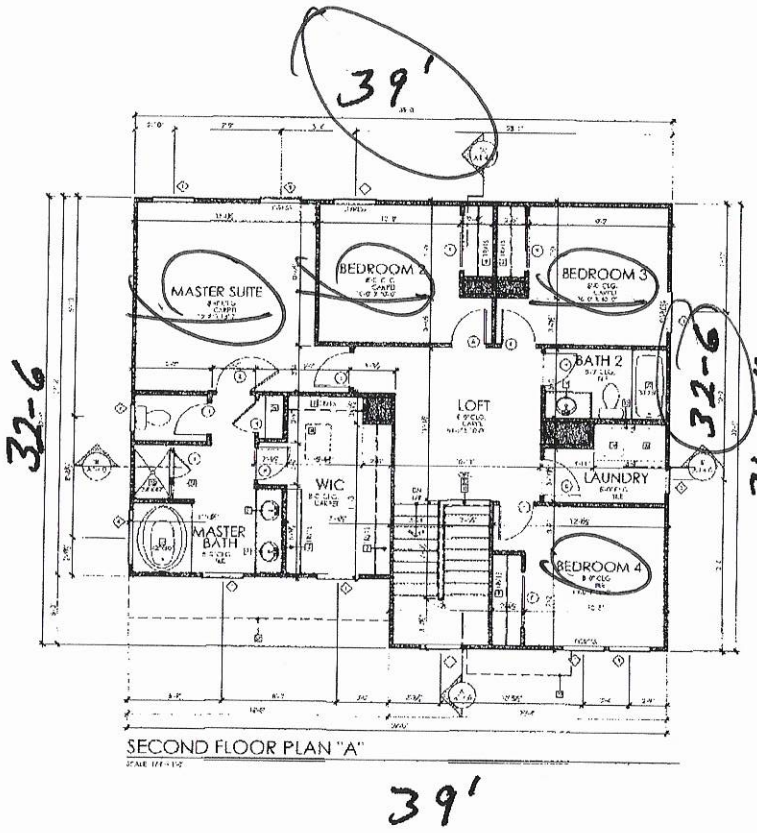
EXCLUSIVELY FOR

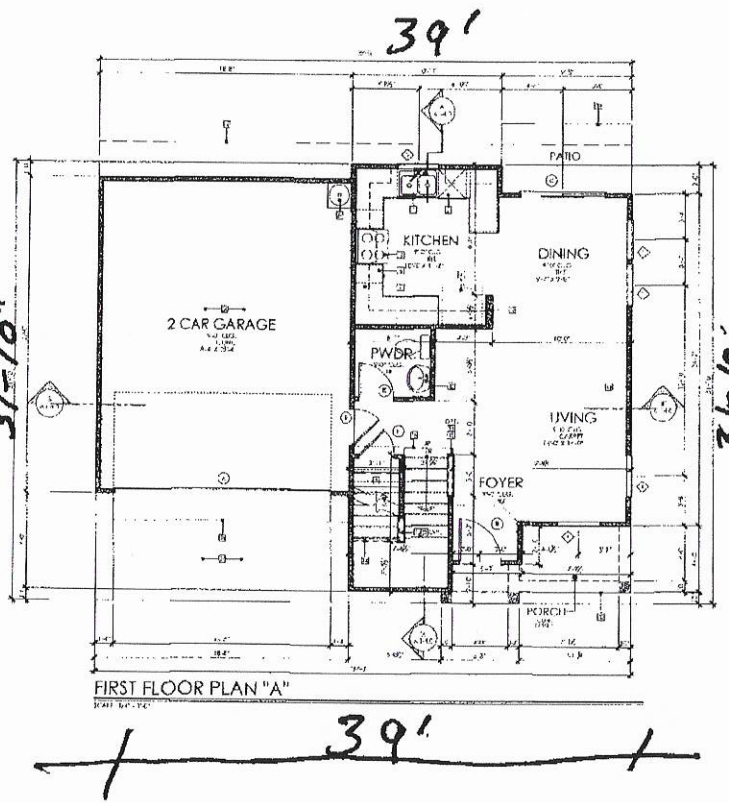
BULLER RIVER DEVELOPMENT PARTNERS, LP

FIFTH CREEK ESTATES - PHASE 2 - LOT 5
127 POPLAR LEAF LN, STATESVILLE, NC
COOL SPRINGS TOWNSHIP, IREDELL COUNTY

DATE: 11/23/20 DRAWN BY: GCS CHECKED BY: JWB

REFERENCE: SEE NOTE 2 BCS# 200687 SCALE: 1" = 30'




## FLOOR PLAN NOTES

| | |
|---|---|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| A | |
| B | |
| C | |
| D | |
| E | |
| F | |
| G | |
| H | |
| I | |
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| P | |
| Q | |
| R | |
| S | |
| T | |
| U | |
| V | |
| W | |
| X | |
| Y | |
| Z | |

## DOOR SCHEDULE

| MARK | SIZE | WIDTH | QUANTITY | REMARKS |
|---|---|---|---|---|
| | | | | |
| A | | | | |
| B | | | | |
| C | | | | |
| D | | | | |
| E | | | | |
| F | | | | |
| G | | | | |
| H | | | | |
| I | | | | |
| J | | | | |
| K | | | | |

## WINDOW SCHEDULE

| MARK | WIDTH | HEIGHT | QUANTITY | REMARKS |
|---|---|---|---|---|
| | | | | |
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |

## AREA CALCULATION

| | |
|---|---|
| FIRST FLOOR (GROSS) | |
| SECOND FLOOR (GROSS) | |
| TOTAL GROSS LIVING AREA | 2502?3 |
| | |
| | |

Acknowledgement Of Plans Submittal ONLY!
Date 10/26/2020

REVISIONS

CHARLOTTE, NC

FLOOR PLANS
-
BEDFORD
ELEVATION 'A'

**CORNERSTONE III** *PROPERTIES*
4509 Faith Church Road
Indian Trail, NC 28079

SHEET NO.
A1-1.0

PLOTTED: Nov 19, 2019 / Cara / BEDFORD CO 65 11 17.DWG

IREDELL COUNTY · NC

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

| APPLICATION NUMBER |
|---|
| 311125<br>Issue Date: |

**Permit Type: ZONING**

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4776821381.000 | 127 POPLAR LEAF LN | Iredell County |

| Owner Information | Applicant Information |
|---|---|
| Name: D+D ENTERPRISES OF IREDELL LLC<br>Address:<br><br>Phone: | Name: CORNERSTONE III PROPERTIES<br>Address: 118 E KINGSTON AVE<br><br>CHARLOTTE, NC 28203<br>Phone: (704)301-3229 |

| Use Requested | Zone Code |
|---|---|
| Single Family Dwelling | RA |

| Lot Acreage | F Setback | B Setback | L Setback | R Setback | Watershed | Flood Zone |
|---|---|---|---|---|---|---|
| 0.614 | 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:** 09/22/2020

| Permit Number | 311125 | TOTAL FEES: | |
|---|---|---|---|

# ZONING DISCLAIMER




Property Address 127 Poplar Leaf

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

Applicant

Date