SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

☑ NEW SEPTIC ☐ REPAIR ☐ USE EXISTING ☐ MODIFIED PLOT PLAN ☐ ALTERATION

File Number: 18756

Assigned Inspector: Patrick - Bryan

☑ IP $250.00: 1/31/25 SM Initial/Date

☐ IP Commercial $450.00: _____ Initial/Date

☐ CA & OP $400.00: _____ Initial/Date

☐ Alteration Fees $300: _____ Initial/Date

☐ Modified Plot Plan Fees $100.00: _____ Initial/Date

☐ Use Existing Fees $100.00: _____ Initial/Date

☐ Use Existing Approved ☐ Use Existing Denied

☐ Send IP permit for signature: _____ ☐ Signature received: _____

☐ Floor plans reviewed

☐ Generate CA ☐ Approve as Noted in Winchester

☐ This site is served by septic and well. Verify each is complete before final hold is released

☐ This septic system requires a certified operation contract before final hold is released

☐ Certified operator contract is on file: _____

☐ Septic file complete: _____

☐ Release final hold in Winchester: _____

Comments:

Refund Requested - 2/18/25

18756

MECKLENBURG COUNTY
HEALTH DEPARTMENT

#15237

APPLICATION FOR A RESIDENTIAL SITE IMPROVEMENT PERMIT/ CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER SYSTEM, NEW WELL INSTALLATION, OR REPAIR OF EXISTING WELL

1. **SEPTIC / TYPE APPLICATION:** ○ N/A ⊗ NEW SYSTEM ○ ALTERATION ○ REPAIR ○ MODIFIED PLOT PLAN

2. **WELL / TYPE APPLICATION:** ⊗ N/A ○ NEW WELL ○ MAJOR REPAIR ○ ABANDONMENT

3. **JOB LOCATION INFORMATION:**

TAX PARCEL NUMBER: 22709317
STREET ADDRESS: 3905 Lakeside Dr
CITY: Charlotte
STATE: NC ZIP: 28270
SUBDIVISION NAME: [redacted]
LOT #: _____ LOT SIZE (acres): 0.8

TOWNSHIP:
○ MECKLENBURG ○ CORNELIUS ○ HUNTERSVILLE
○ DAVIDSON ⊗ CHARLOTTE ○ PINEVILLE
○ MATTHEWS ○ MINT HILL

4. **BUILDING INFORMATION:**

BUILDING TYPE:
○ SINGLE MOBILE HOME ○ MODULAR HOME
○ DOUBLE WIDE ○ MULTIPLE FAMILY
⊗ HOUSE ○ OTHER _____

HEATED SQUARE FOOTAGE: 3,500
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 4

FOUNDATION TYPE:
○ CONCRETE SLAB ○ BASEMENT WITH PLUMBING
⊗ CRAWL SPACE ○ BASEMENT WITH NO PLUMBING

5. **IF PLANNING TO EXPAND OR ALTER THE EXISTING SEPTIC SYSTEM PLEASE COMPLETE THE FOLLOWING SECTION:** ☒ N/A

NUMBER OF BEDROOMS TO BE ADDED: _____ NUMBER OF ADDITIONAL OCCUPANTS IN THE RESIDENCE: _____

6. **WATER SUPPLY:** ⊗ MUNICIPAL ○ PRIVATE WELL ○ PUBLIC WELL ○ SHARED WELL ○ OTHER _____

7. **PROPOSED USE OF WELL:** ⊗ N/A ○ IRRIGATION ○ POTABLE (DRINKING WATER) ○ OTHER _____

8. **PLEASE INDICATE AND RANK DESIRED SEPTIC SYSTEM TYPE(S) IN ORDER OF PREFERENCE** *(1-MOST DESIRED 5-LEAST DESIRED)*:

☐ N/A ☒ ANY TYPE ☐ CONVENTIONAL ☐ ACCEPTED ☐ INNOVATIVE ☐ ALTERNATIVE ☐ OTHER _____

8A. **RANK:** ____ ____ ____ ____ ____

9. **DO ANY OF THE FOLLOWING APPLY TO THE PROPERTY IN QUESTION? IF "YES" PLEASE ATTACH SUPPORTING DOCUMENTATION.**

BURIED CABLES, LANDFILLS, STUMPHOLES	○ YES ⊗ NO	GRADING/SOIL REMOVAL PERFORMED	○ YES ⊗ NO
EXISTING WASTEWATER (SEPTIC) SYSTEMS	○ YES ⊗ NO	JURISDICTIONAL WETLANDS	○ YES ⊗ NO
WELLS, SPRINGS, OR WATER LINES	○ YES ⊗ NO	APPROVAL REQUIRED BY ANY OTHER PUBLIC AGENCY	○ YES ⊗ NO
EASEMENTS OR RIGHT-OF-WAYS	○ YES ○ NO	WASTEWATER OTHER THAN DOMESTIC SEWAGE	○ YES ⊗ NO
CHEMICAL/PETROLEUM STORAGE TANKS	○ YES ⊗ NO	KNOWN UNDERGROUND CONTAMINATION	○ YES ⊗ NO
WASTE STORAGE	○ YES ⊗ NO	GROUNDWATER USE RESTRICTIONS/VARIANCES	○ YES ⊗ NO

10. **WHAT DATE WAS THE PROPERTY ORIGINALLY DEEDED AND RECORDED?** _____ ☒ UNKNOWN

11. **WHAT IS THE ANTICIPATED CLOSING DATE FOR THIS PROPERTY?** _____ ☒ N/A

12. **PROPERTY OWNER:**

NAME: Tudor Calin Bagarean
ADDRESS: 3905 Lakeside Dr
CITY: Charlotte
STATE: NC ZIP: 28270
WORK PHONE: _____
MOBILE PHONE: (980) 722-4369
FAX: _____
E-MAIL: tudor_bagarean@yahoo.com

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**

NAME: _____
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
WORK PHONE: _____
MOBILE PHONE: _____
FAX: _____
E-MAIL: _____

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17

14. SEPTIC SYSTEM PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Improvement Permit and Authorization to Construct shall become invalid. 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. The permit is valid for either sixty (60) months or is non-expiring depending upon the documentation submitted: complete site plan = 60 months, complete plat = non-expiring.

TB (Initial here for septic system applications)

15. WELL PERMIT APPLICATION:

If the information in this application is falsified, changed, or the site is altered, then the Well Permit shall become invalid. 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. The permit is valid for a period of twelve (12) months from the date of issuance.

_____ (Initial here for well applications)

16. APPLICATION SIGNATURE SECTION:

ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. A proper signature is required in order to process your application. Please review the application carefully and sign in the space provided below. A PROPOSED PLOT PLAN is required to be submitted with each application.

_____ 1-31-2025

Property Owner's or Owner's Legal Representative Signature — Date

---

OFFICE USE ONLY

○ SURVEY PLAT TO SCALE SUBMITTED ○ SCALED SITE PLAN SUBMITTED ○ UN-SCALED SITE PLAN SUBMITTED

SEPTIC APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

WELL APPLICATION FEE RECEIVED: $ _____ DATE FEE RECEIVED: _____

APPLICATION PROCESSED BY: _____

GWS FILE NUMBER ASSIGNED: _____

APPLICATION ID NUMBER ASSIGNED: _____

COMMENTS:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17

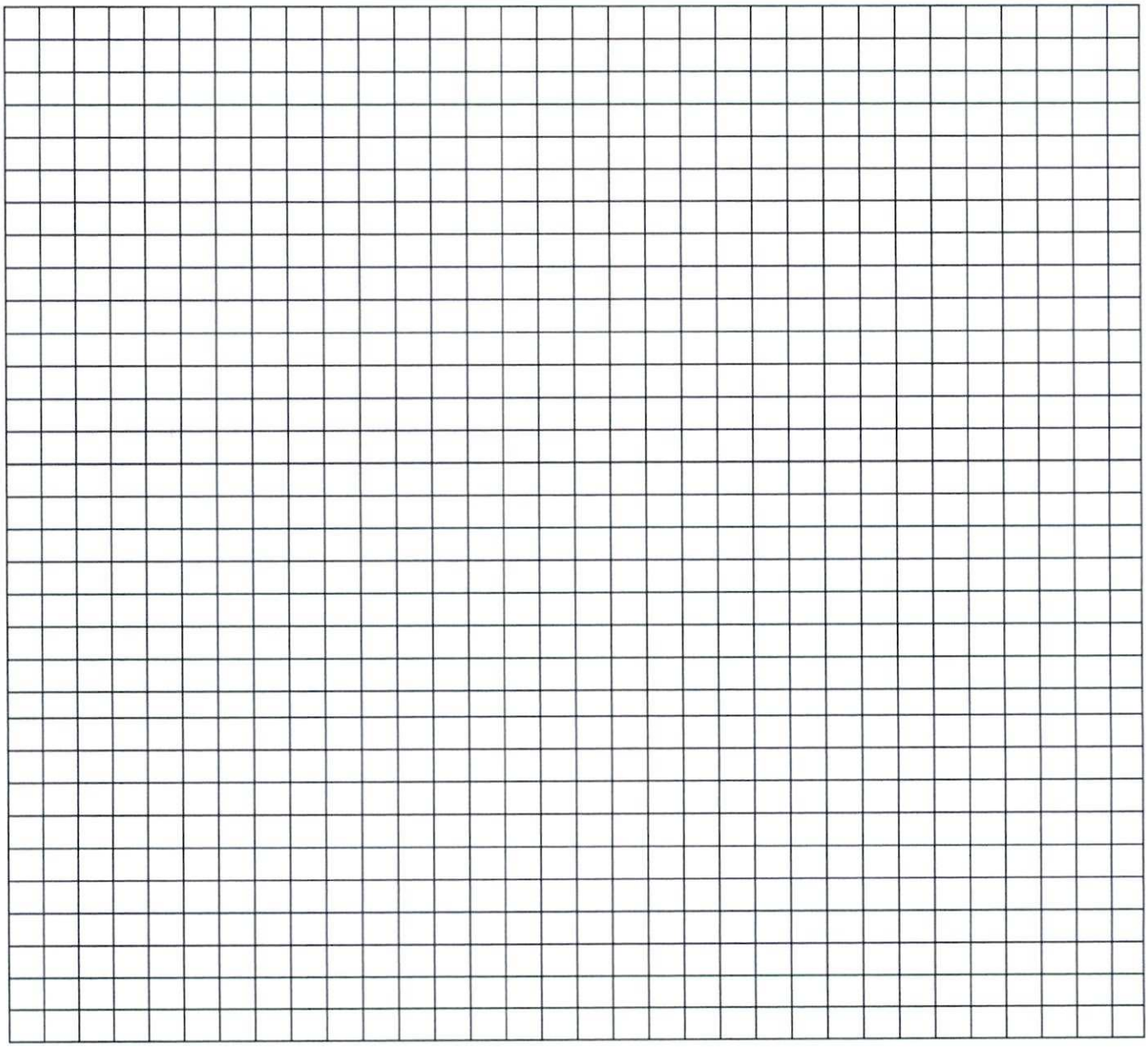
File #: _____

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: _____ Tax Parcel #: _____

Subdivision Name: _____ Lot #: _____

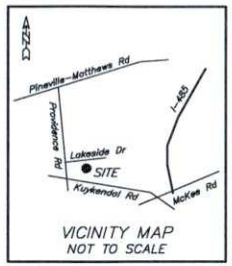


_____ _____

Property Owner's or Owner's Legal Representative Signature Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 980-314-1680, FAX: 704-336-6894
Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17



VICINITY MAP
NOT TO SCALE

NORTH PER MB 7/71

LAKESIDE DRIVE
VARIABLE WIDTH PUBLIC RIGHT OF WAY
(MB 6/739)
(MB 25/210)
(MB 29/249)

THIS MAY NOT BE A CERTIFIED SURVEY AND HAS NOT BEEN REVIEWED BY A LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH ANY APPLICABLE LAND REDEVELOPMENT REGULATIONS & HAS NOT BEEN REVIEWED FOR COMPLIANCE WITH RECORDING REQUIREMENTS FOR MAPS

REVISIONS	DATE
AREA	1/9/25

SCALE: 1" = 30'
PROJECT: 24-0436
DRAWN BY: RD
FIELD WORK: GH, SH
DATE: 1/8/2025
DWG: 2024 (BAT) Lakeside Dr #3905
COGO: 2024 \L Lakeside Dr #3905

Preliminary Plat
Not for recordation, conveyances, or sales

CAROLINA SURVEYORS, INC.
P.O. BOX 267 PINEVILLE, N.C. 28134 - 0267
THOMAS E. WHITE, NCPLS & SCPLS 704-889-7601
TEW@CAROLINAS1.COM
CERTIFICATE OF AUTHORIZATION NO: C-1545 SC: 689

LEGEND:

EIP = EXISTING IRON PIN
OIP = OLD IRON PIPE
SIP = SET IRON PIN
R/W = RIGHT OF WAY
AC = AIR CONDITIONING UNIT
PMR = POWER PAD
PM = POWER METER
PP = POWER POLE
LP = LIGHT POLE
GM = GAS METER
TELE = TELEPHONE PEDESTAL
CATV = CABLE TELEVISION
FOB = FIBER OPTIC BOX
TSB = TRAFFIC SIGNAL BOX
WM = WATER METER
FES = FLARED END SECTION
RCP = REINFORCED CONCRETE PIPE
CMP = CORRUGATED METAL PIPE
CPP = CORRUGATED PLASTIC PIPE
PVC = POLYVINYL CHLORIDE PIPE
DU = DESTINATION UNKNOWN
SDE = STORM DRAINAGE EASEMENT
SDMH = STORM DRAIN MANHOLE
CB = CATCH BASIN
YI = YARD INLET
DI = DROP INLET
SSE = SANITARY SEWER EASEMENT
SSMH = SANITARY SEWER MANHOLE
CO = SEWER CLEAN OUT
BC = BACK OF CURB
(T) = TOTAL DISTANCE
P.O.B. = POINT OF BEGINNING

LINETYPE LEGEND:

BOUNDARY LINE
TIE LINE
RIGHT OF WAY
APPROXIMATE RIGHT OF WAY (NOT SURVEYED)
ADJOINING LINE (NOT SURVEYED)
FENCE
STORM DRAIN PIPE
OVERHEAD ELECTRIC
SANITARY SEWER PIPE

NOTES:

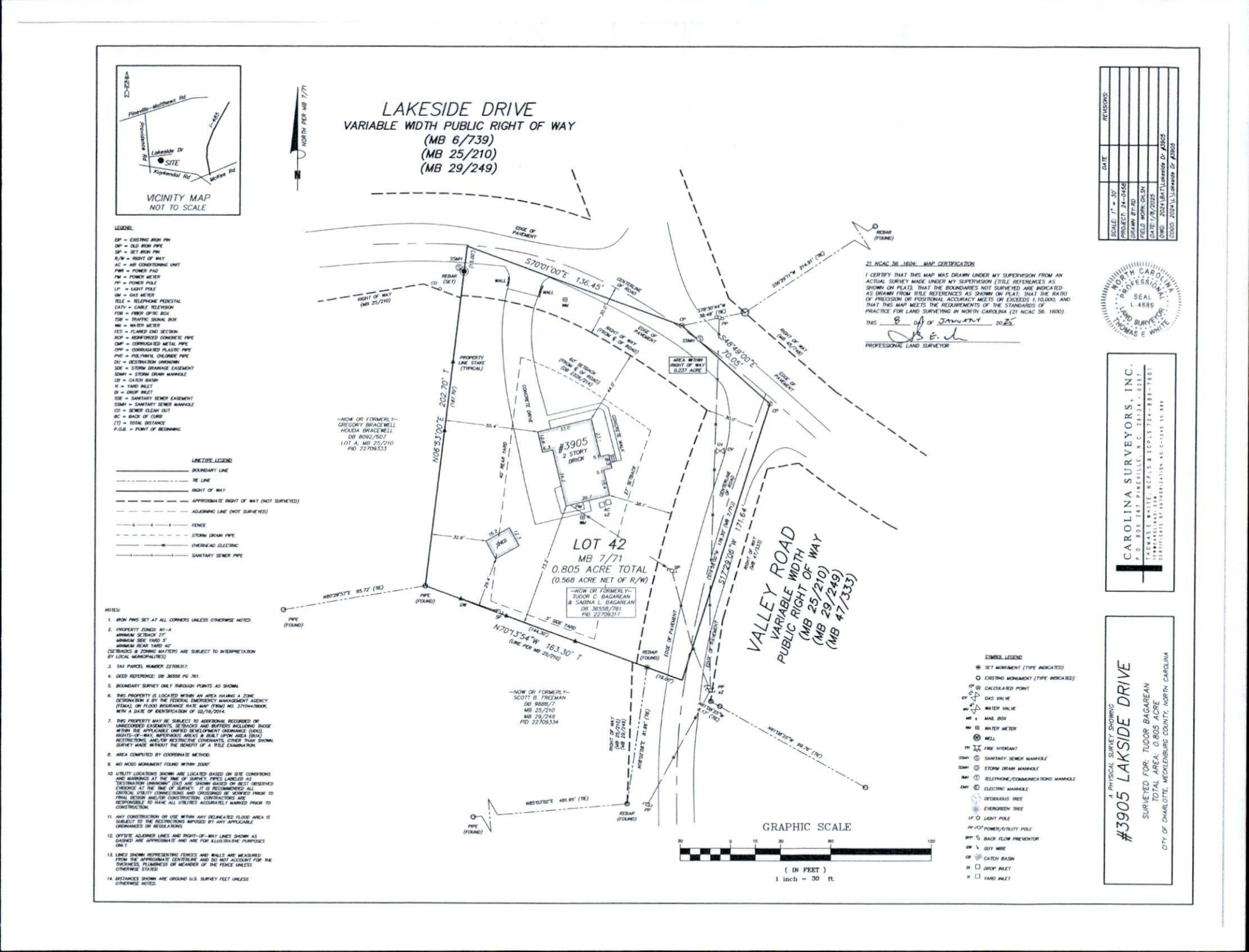
1. IRON PINS SET AT ALL CORNERS UNLESS OTHERWISE NOTED.
2. PROPERTY ZONED: NI-A
MINIMUM SETBACK 27'
MINIMUM SIDE YARD 5'
MINIMUM REAR YARD 40'
(SETBACKS & ZONING MATTERS ARE SUBJECT TO INTERPRETATION BY LOCAL MUNICIPALITIES)
3. TAX PARCEL NUMBER 22709317.
4. DEED REFERENCE: DB 36558 PG 781.
5. BOUNDARY SURVEY ONLY THROUGH POINTS AS SHOWN.
6. THIS PROPERTY IS LOCATED WITHIN AN AREA HAVING A ZONE DESIGNATION X BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA), ON FLOOD INSURANCE RATE MAP (FIRM) NO. 3710447800K, WITH A DATE OF IDENTIFICATION OF 02/19/2014.
7. THIS PROPERTY MAY BE SUBJECT TO ADDITIONAL RECORDED OR UNRECORDED EASEMENTS, SETBACKS AND BUFFERS INCLUDING THOSE WITHIN THE APPLICABLE UNIFIED DEVELOPMENT ORDINANCE (UDO). RIGHTS-OF-WAY, IMPERVIOUS AREAS & BUILT UPON AREA (BUA), RESTRICTIONS, AND/OR RESTRICTIVE COVENANTS, OTHER THAN SHOWN, SURVEY MADE WITHOUT THE BENEFIT OF A TITLE EXAMINATION.
8. AREA COMPUTED BY COORDINATE METHOD.
9. NO NGS MONUMENT FOUND WITHIN 2000'.
10. UTILITY LOCATIONS SHOWN ARE LOCATED BASED ON SITE CONDITIONS AND MARKINGS AT THE TIME OF SURVEY. PIPES LABELED AS "DESTINATION UNKNOWN" (DU) ARE SHOWN BASED ON BEST OBSERVED EVIDENCE AT THE TIME OF SURVEY. IT IS RECOMMENDED ALL CRITICAL UTILITY CONNECTIONS AND CROSSINGS BE VERIFIED PRIOR TO FINAL DESIGN AND/OR CONSTRUCTION. CONTRACTORS ARE RESPONSIBLE TO HAVE ALL UTILITIES ACCURATELY MARKED PRIOR TO CONSTRUCTION.
11. ANY CONSTRUCTION OR USE WITHIN ANY DELINEATED FLOOD AREA IS SUBJECT TO THE RESTRICTIONS IMPOSED BY ANY APPLICABLE ORDINANCES OR REGULATIONS.
12. OFFSITE ADJOINER LINES AND RIGHT-OF-WAY LINES SHOWN AS DASHED ARE APPROXIMATE AND ARE FOR ILLUSTRATIVE PURPOSES ONLY.
13. LINES SHOWN REPRESENTING FENCES AND WALLS ARE MEASURED FROM THE APPROXIMATE CENTERLINE AND DO NOT ACCOUNT FOR THE THICKNESS, PLUMBNESS OR MEANDER OF THE FENCE UNLESS OTHERWISE STATED.
14. DISTANCES SHOWN ARE GROUND U.S. SURVEY FEET UNLESS OTHERWISE NOTED.

SYMBOL LEGEND

SET MONUMENT (TYPE INDICATED)
EXISTING MONUMENT (TYPE INDICATED)
CP CALCULATED POINT
GV GAS VALVE
WV WATER VALVE
MB MAIL BOX
WM WATER METER
W WELL
FH FIRE HYDRANT
SSMH SANITARY SEWER MANHOLE
SDMH STORM DRAIN MANHOLE
TMH TELEPHONE/COMMUNICATIONS MANHOLE
EMH ELECTRIC MANHOLE
DECIDUOUS TREE
EVERGREEN TREE
LP LIGHT POLE
PP POWER/UTILITY POLE
BFP BACK FLOW PREVENTOR
GW GUY WIRE
CB CATCH BASIN
DI DROP INLET
YI YARD INLET

GRAPHIC SCALE
30 0 15 30 60 120
(IN FEET)
1 inch = 30 ft.

A PROPERTY LINE ADJUSTMENT & HOUSE SITE PLAN SHOWING
#3905 LAKSIDE DRIVE
SURVEYED FOR: TUDOR BAGAREAN
TOTAL AREA: 0.883 ACRE
CITY OF CHARLOTTE, MECKLENBURG COUNTY, NORTH CAROLINA


LAKESIDE DRIVE
VARIABLE WIDTH PUBLIC RIGHT OF WAY
(MB 6/739)
(MB 25/210)
(MB 29/249)
VICINITY MAP
NOT TO SCALE
Pineville-Matthews Rd
Providence Rd
I-485
Lakeside Dr
SITE
Kuykendal Rd
McKee Rd
NORTH PER MB 7/71
LEGEND:
EIP = EXISTING IRON PIN
OIP = OLD IRON PIPE
SIP = SET IRON PIN
R/W = RIGHT OF WAY
AC = AIR CONDITIONING UNIT
PMP = POWER PAD
PM = POWER METER
PP = POWER POLE
LP = LIGHT POLE
GM = GAS METER
TELE = TELEPHONE PEDESTAL
CATV = CABLE TELEVISION
FOB = FIBER OPTIC BOX
TSB = TRAFFIC SIGNAL BOX
WM = WATER METER
FES = FLARED END SECTION
RCP = REINFORCED CONCRETE PIPE
CMP = CORRUGATED METAL PIPE
CPP = CORRUGATED PLASTIC PIPE
PVC = POLYVINYL CHLORIDE PIPE
DU = DESTINATION UNKNOWN
SDE = STORM DRAINAGE EASEMENT
SDMH = STORM DRAIN MANHOLE
CB = CATCH BASIN
YI = YARD INLET
DI = DROP INLET
SSE = SANITARY SEWER EASEMENT
SSMH = SANITARY SEWER MANHOLE
CO = SEWER CLEAN OUT
BC = BACK OF CURB
(T) = TOTAL DISTANCE
P.O.B. = POINT OF BEGINNING
LINETYPE LEGEND:
BOUNDARY LINE
TIE LINE
RIGHT OF WAY
APPROXIMATE RIGHT OF WAY (NOT SURVEYED)
ADJOINING LINE (NOT SURVEYED)
FENCE
STORM DRAIN PIPE
OVERHEAD ELECTRIC
SANITARY SEWER PIPE
EDGE OF PAVEMENT
S70°01'00"E 136.45'
REBAR (SET)
SSMH
RIGHT OF WAY (MB 25/210)
CENTERLINE ROAD
WALL
PROPERTY LINE STAKE (TYPICAL)
S48°49'00"E 70.05'
AREA WITHIN RIGHT OF WAY 0.237 ACRE
40' SETBACK (FROM R/W OF ROAD) (DB 5206/214)
CONCRETE DRIVE
#3905
2 STORY
BRICK
27' BRICK
SHED
40' REAR YARD
5' SIDE YARD
--NOW OR FORMERLY--
GREGORY BRACEWELL
HOUDA BRACEWELL
DB 8092/607
LOT A, MB 25/210
PID 22709333
N08°53'00"E 202.70' T
(183.39')
LOT 42
MB 7/71
0.805 ACRE TOTAL
(0.568 ACRE NET OF R/W)
--NOW OR FORMERLY--
TUDOR C. BAGAREAN
& SABINA L. BAGAREAN
DB 36558/761
PID 22709317
N70°13'54"W 163.30' T
(144.30')
(LINE PER MB 25/210)
N80°29'57"E 85.72' (TIE)
PIPE (FOUND)
REBAR (FOUND)
--NOW OR FORMERLY--
SCOTT B. FREEMAN
DB 9688/7
MB 25/210
MB 29/249
PID 22709334
N08°53'00"E 481.95' (TIE)
N08°53'00"E 41.86' (TIE)
N61°18'32"W 98.76' (TIE)
S17°29'06"W 171.64'
(S17°34'45"W 171.64' (MB 7/71))
VALLEY ROAD
VARIABLE WIDTH
PUBLIC RIGHT OF WAY
(MB 25/210)
(MB 29/249)
(MB 47/333)
S78°30'44"W 38.48' (TIE)
S56°29'17"W 214.01' (TIE)
REBAR (FOUND)
21 NCAC 56 .1604: MAP CERTIFICATION
I CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION (TITLE REFERENCES AS SHOWN ON PLAT); THAT THE BOUNDARIES NOT SURVEYED ARE INDICATED AS DRAWN FROM TITLE REFERENCES AS SHOWN ON PLAT; THAT THE RATIO OF PRECISION OR POSITIONAL ACCURACY MEETS OR EXCEEDS 1:10,000; AND THAT THIS MAP MEETS THE REQUIREMENTS OF THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA (21 NCAC 56 .1600).
THIS 8 DAY OF JANUARY 2025
PROFESSIONAL LAND SURVEYOR
NOTES:
1. IRON PINS SET AT ALL CORNERS UNLESS OTHERWISE NOTED.
2. PROPERTY ZONED: N1-A
MINIMUM SETBACK 27'
MINIMUM SIDE YARD 5'
MINIMUM REAR YARD 40'
(SETBACKS & ZONING MATTERS ARE SUBJECT TO INTERPRETATION BY LOCAL MUNICIPALITIES)
3. TAX PARCEL NUMBER 22709317.
4. DEED REFERENCE: DB 36558 PG 761.
5. BOUNDARY SURVEY ONLY THROUGH POINTS AS SHOWN.
6. THIS PROPERTY IS LOCATED WITHIN AN AREA HAVING A ZONE DESIGNATION X BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA), ON FLOOD INSURANCE RATE MAP (FIRM) NO. 3710447800K, WITH A DATE OF IDENTIFICATION OF 02/19/2014.
7. THIS PROPERTY MAY BE SUBJECT TO ADDITIONAL RECORDED OR UNRECORDED EASEMENTS, SETBACKS AND BUFFERS INCLUDING THOSE WITHIN THE APPLICABLE UNIFIED DEVELOPMENT ORDINANCE (UDO); RIGHTS-OF-WAY, IMPERVIOUS AREAS & BUILT UPON AREA (BUA); RESTRICTIONS, AND/OR RESTRICTIVE COVENANTS, OTHER THAN SHOWN, SURVEY MADE WITHOUT THE BENEFIT OF A TITLE EXAMINATION.
8. AREA COMPUTED BY COORDINATE METHOD.
9. NO NGS MONUMENT FOUND WITHIN 2000'.
10. UTILITY LOCATIONS SHOWN ARE LOCATED BASED ON SITE CONDITIONS AND MARKINGS AT THE TIME OF SURVEY. PIPES LABELED AS "DESTINATION UNKNOWN" (DU) ARE SHOWN BASED ON BEST OBSERVED EVIDENCE AT THE TIME OF SURVEY. IT IS RECOMMENDED ALL CRITICAL UTILITY CONNECTIONS AND CROSSINGS BE VERIFIED PRIOR TO FINAL DESIGN AND/OR CONSTRUCTION. CONTRACTORS ARE RESPONSIBLE TO HAVE ALL UTILITIES ACCURATELY MARKED PRIOR TO CONSTRUCTION.
11. ANY CONSTRUCTION OR USE WITHIN ANY DELINEATED FLOOD AREA IS SUBJECT TO THE RESTRICTIONS IMPOSED BY ANY APPLICABLE ORDINANCES OR REGULATIONS.
12. OFFSITE ADJOINER LINES AND RIGHT-OF-WAY LINES SHOWN AS DASHED ARE APPROXIMATE AND ARE FOR ILLUSTRATIVE PURPOSES ONLY.
13. LINES SHOWN REPRESENTING FENCES AND WALLS ARE MEASURED FROM THE APPROXIMATE CENTERLINE AND DO NOT ACCOUNT FOR THE THICKNESS, PLUMBNESS OR MEANDER OF THE FENCE UNLESS OTHERWISE STATED.
14. DISTANCES SHOWN ARE GROUND U.S. SURVEY FEET UNLESS OTHERWISE NOTED.
SYMBOL LEGEND:
SET MONUMENT (TYPE INDICATED)
EXISTING MONUMENT (TYPE INDICATED)
CP CALCULATED POINT
GV GAS VALVE
WV WATER VALVE
MB MAIL BOX
WM WATER METER
W WELL
FH FIRE HYDRANT
SSMH SANITARY SEWER MANHOLE
SDMH STORM DRAIN MANHOLE
TMH TELEPHONE/COMMUNICATIONS MANHOLE
EMH ELECTRIC MANHOLE
DECIDUOUS TREE
EVERGREEN TREE
LP LIGHT POLE
PP/UP POWER/UTILITY POLE
BFP BACK FLOW PREVENTOR
GW GUY WIRE
CB CATCH BASIN
DI DROP INLET
YI YARD INLET
GRAPHIC SCALE
30 0 15 30 60 120
(IN FEET)
1 inch = 30 ft.
REVISIONS:
DATE
SCALE: 1" = 30'
PROJECT: 24-0436
DRAWN BY: RD
FIELD WORK: GH, SH
DATE: 1/8/2025
DWG: 2024\BAT\Lakeside Dr #3905
COGO: 2024\L\Lakeside Dr #3905
NORTH CAROLINA PROFESSIONAL SEAL L-4689 LAND SURVEYOR THOMAS E. WHITE
CAROLINA SURVEYORS, INC.
P.O. BOX 267 PINEVILLE, N.C. 28134 - 0267
THOMAS E. WHITE, NCPLS & SCPLS 704-889-7601
CERTIFICATE OF AUTHORIZATION NO. C-1242 SC #68
A PHYSICAL SURVEY SHOWING
#3905 LAKSIDE DRIVE
SURVEYED FOR: TUDOR BAGAREAN
TOTAL AREA: 0.805 ACRE
CITY OF CHARLOTTE, MECKLENBURG COUNTY, NORTH CAROLINA

MECKLENBURG COUNTY
Health Department

Gibbie Harris, MSPH, BSN
Director

(980) 314-9020

Addendum to Application for
New Well or Septic System Installation
Abandonment or Repair of Existing Well or Septic System

Your signature below confirms the following:

1. The information on the application is true, complete and accurate.
2. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliances with applicable laws and rules.
3. I acknowledge that _____ is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

22709317 _____.
Number Street Town
(Or Parcel Number)

Tudor Colin Bagarean
Property Owner (print name)

_____
Property Owner (signature)

1-31-2025
Date

Mecklenburg County

Environmental Health

Groundwater & Wastewater Services

How to Prepare Your Property for an Improvement Permit:

The following items must be done before a Mecklenburg County Health Department representative can visit your site:

- Identity and mark all property corners
    - **Note: For tracts larger than 2 acres contact this department for specific instructions relating to identifying property lines.**
- All property lines should be marked every 50 feet.
- You are responsible for marking all structures to be built on site.
- Clearing excessive underbrush (i.e., thick briars, pine thickets, broom sage bushes, kudzu, honeysuckle, weeds, etc.) is required to allow thorough inspection for soil and wastewater system layout.
    - **Note: Absolutely no grading, filling, or cutting shall occur on site prior to evaluation for permit issuance.**
- When lot is clearly marked as above instructions require, give our office a call at 980-314-1680. We will then connect you with the inspector who will complete the soil test.

Note: Failure to follow these instructions properly can result in a 2-week delay in processing your application. If the lot is improperly marked and results in an additional trip a $100 extra trip fee may apply.

By signing below, I acknowledge that I have fully read and understand this document.

_____ 1-31-2025

Property Owner's or Owner's Legal Representative Signature — Date

3205 Freedom Dr. Suite 8000 J, Charlotte NC • 28208 • (980) 314-1680 • Fax (704) 336-6894

Last Modified: 8/7/23

Mecklenburg County Public Health
Environmental Health Division

CUSTOMER REFUND AUTHORIZATION FORM

Please refund Tudor Bagarean for a request received on
Customer Name

2118125, for the following reason:
Date of request

[ ] Overpayment

[X] Unable to obtain a permit

[ ] Other *(Please give a detailed explanation)*: _____

Refund the amount listed from the following accounting line:

Department: HLT
Fund: 0001
Unit: 3620
Revenue Code: 3122
Activity: 6038
Function: SC4340
Amount: $ 250

Mail refund to: 4200 Stewart Ridge St
Charlotte NC 28277

Employee Processing Request — Date: 2/18/25

Managers Approval — Date: 2-18-2025

Attachments: *Copy of client request*
Original payment receipt

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 01/31/25
Receipt #: 152727
Check / Auth #: VISA 03732D
Received By: MOORES

Amount: 250.00
Tendered: 250.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: TUDOR BAGAREAN
Attn:
Address:
Address:
City/State/Zip: ,

Item	Description	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 3905 LAKESIDE	1	250.00	250.00

Permit#

----------Outstanding Balances----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
	507.50		580.00	2,737.50	

Mecklenburg County Public Health
Environmental Health Division

CUSTOMER REFUND REQUEST FORM

Please fill out this form and e-mail to EnvHealth@MeckNC.gov, fax to 704-336-6894, or mail to 3205 Freedom Drive, Suite 8000, Charlotte NC 28208.

CONTACT INFORMATION	
NAME	Tudor Bagarean
MAILING ADDRESS	4200 Stewart Ridge St, Charlotte, NC 28277
PHONE NUMBER	(980) 722-4369
EMAIL ADDRESS	tudor_bagarean@yahoo.com
REFUND AMOUNT	$250.00

PLEASE GIVE A DETAILED EXPLANATION OF THE REASON(S) WHY YOU ARE REQUESTING A REFUND.

The soil test at 3905 Lakeside Dr was not conducted due to lot size constraints

Tudor Bagarean 2/18/

Signature Date