SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

NEW SEPTIC ☒ NEW WELL ☐ USE EXISTING ☐ MODIFIED PLOT PLAN ☐

New Septic Fees Paid

IP ($250.00) 2/13/2020 LE Initial/Date

CA ($200.00) 5/26/21 LE Initial/Date

OP ($200.00) 5/26/21 LE Initial/Date

(CA and OP fees need to be paid before a building permit can be issued)

New Well Fees Paid: $550.00 _____ Initial/Date

Use Existing Fees Paid: $100.00 _____Initial/Date

Alteration Fees Paid: $300 Total $200 _____Initial/Date (If use existing was part of payment)

Modified Plot Plan Fees Paid: $100.00 _____Initial/Date

Generate CA / Approve As Noted

Floor plans need to be submitted and reviewed before CA can be issued ☒ Review ☒ Approved date 5/27/21

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

Septic file complete ☒ 8/10/22 Well complete ☐ _____

Send permit for signature ☒ sent 4/2 Signature received ☒ 4/3

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

Certified operator contract is on file ☐ _____

Please release Occupancy Hold

Groundwater & Wastewater Services: Septic Project File & D

Edit Response | Delete Response | Manage Permissions | Workflows | Alert Me

GWS File #:	5665B
WASPS App #:	11060
Primary ES assigned to project:	Jeremy Michael
Secondary ES assigned to project:	
Project Type:	New System
Site Evaluation Information: .1939(a)(1) - Topography and Landscape Position Recorded?	Yes
Site Evaluation Information: .1940(a-g) - Slope % Recorded?	Yes
Site Evaluation Information: .1939(a)(2) - Texture Class Recorded?	Yes
Site Evaluation Information: .1939(a)(2) - Structure Type Recorded?	Yes
Site Evaluation Information: .1939 (a)(2) - Consistence Recorded?	Yes
Site Evaluation Information: .1939(a)(2) - Mineralogy Recorded?	Yes
Site Evaluation Information: .1939(a)(3) - Soil Wetness Condition Recorded?	Yes
Site Evaluation Information: .1939(a)(4) - Soil Depth to Rock or Parent Material Recorded when Encountered?	Yes
Site Evaluation Information: .1939(a)(5) - Depth to Restrictive Horizons Recorded when Encountered?	Yes
Site Evaluation Information: .1939(a)(6) - Sufficient Available Space Recorded?	Yes
Site Evaluation Information: .1937(m) - Are the Profile Locations Shown?	Yes
Site Evaluation Information: .1939(a) - Are the S/PS Profiles in system & in repair area?	Yes
Site Evaluation Information: .1939(d), .1955, .1956, .1957 - LTAR	Yes
Improvement Permit/Construction Authorization: .1937(g), 130A-336(a) - Proposed System Type stated - Initial	Yes
Improvement Permit/Construction Authorization: .1945(b) - Proposed System Type stated - Repair	Yes
Improvement Permit/Construction Authorization: 130A-336(a)(3) - System location identifiable by setbacks - Initial	Yes
Improvement Permit/Construction Authorization: .1937(g), .1945(b) - System components shown - Initial	Yes
Information Permit/Construction Authorization: .1945(b) - Repair area shown	Yes
Improvement Permit/Construction Authorization: .1937(f)(g) - Does System design match facility, flow & WW characteristics?	Yes
Improvement Permit/Construction Authorization: .1937(f)(g) - Is System design consistent with soil/site conditions?	Yes
Improvement Permit/Construction Authorization: .1937(f)(g) - Is the System located in the approved area?	Yes
Improvement Permit/Construction Authorization: 130A-336(a) - Number of Bedrooms, employees, seats, etc. indicated?	Yes
Improvement Permit/Construction Authorization: .1937 (g) - Trench depth correct?	Yes
Improvement Permit/Construction Authorization: .1937(g) - Trench width correct?	Yes
Improvement Permit/Construction Authorization: .19379(g) - Trench length correct?	Yes
Improvement Permit/Construction Authorization: 130A-336(a)(1) - Proposed/existing well shown?	N/A

Improvement Permit/Construction Authorization: 130A-336(a)(1) - Property line lengths shown?	Yes
Improvement Permit/Construction Authorization: 130A-336(a) - Facility/appurtenance setbacks shown from fixed points?	Yes
Corrections/modifications needed?	No
Comments:	
IA issued date:	
OP Issued date:	
Review performed by:	Jeremy Michelone
Date performed:	4/1/2020

Created at 4/1/2020 10:04 AM by Michelone, Jeremy
Last modified at 4/1/2020 10:04 AM by Michelone, Jeremy

Close

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	05/26/21	**Amount:**	200.00
Receipt #:	128984	**Tendered:**	200.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: X52407
Contractor: SAMOCRAINI VEACESLAV
Attn:
Address: 7217 MCWHIRTER RD
Address:
City/State/Zip: MINT HILL, NC 28227

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Septic Construction Authorizat 2720 FOX HOLLOW RD		1	200.00	200.00

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
400.00			1,467.94		

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	05/26/21	**Amount:**	200.00
Receipt #:	128983	**Tendered:**	200.00
Check / Auth #:	CHARGE	**Returned:**	0.00
Received By:	ELLISLW		

Account Information

Account #: X52407
Contractor: SAMOCRAINI VEACESLAV
Attn:
Address: 7217 MCWHIRTER RD
Address:
City/State/Zip: MINT HILL, NC 28227

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Septic Operational Permit 2720 FOX HOLLOW RD		1	200.00	200.00

----------**Outstanding Balances**----------

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
200.00			1,467.94		

X52407

5665B
#11060

14 FEB '20 AM 10:44

MECKLENBURG COUNTY HEALTH DEPARTMENT

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: 19702172
STREET ADDRESS: 2720 Fox Hollow Rd
CITY: Mint Hill
STATE: NC ZIP: 28227
SUBDIVISION NAME: Davis Run
LOT #: 9 LOT SIZE (acres): .69
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: 3,600
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 5
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?** Owned ☐ N/A

12. **PROPERTY OWNER:**
NAME: Yuriy Chubachuk
ADDRESS: 8021 Woodway Oaks Cr Apt 214
CITY: Matthews
STATE: NC ZIP: 28104
WORK PHONE: _____
MOBILE PHONE: 704 771-4193
FAX: _____
E-MAIL: Yurich11@Hotmail.com

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**
NAME: Max Solo
ADDRESS: 6409 Providence Farm Ln 7416
CITY: Charlotte
STATE: NC ZIP: 28277
WORK PHONE: _____
MOBILE PHONE: _____
FAX: _____
E-MAIL: Max3u.17llc@gmail.com

Amodern touch 2007@yahoo.com.

704-273-6152 (sam)

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.

MB (Initial here for septic system applications)

15. WELL PERMIT APPLICATION:

N/A

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.

Max Shu
Property Owner's or Owner's Legal Representative Signature

2-12-2020
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
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208 OFFICE: (980) 314-1680, FAX: 704-336-6894

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: 2720 Fox Hollow Rd Tax Parcel #: 19702172

Subdivision Name: Davis Run Lot #: 9



Max Soldyan Kin
Property Owner's or Owner's Legal Representative Signature

2-12-2020
Date

MECKLENBURG COUNTY
Public Health

Gibbie Harris, MSPH, BSN
Health Director

(704) 336-4700

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 Max Solodyankin is acting as my legal representative (agent) in the submittal of the application for a water supply well or septic permit located at

9702172
Number Street Town
(Or parcel Number)

Yuriy Chubachuk
Property Owner (print name)

Yu Ch
Property Owner (signature)

02-14-2020
Date

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 02/13/20
Receipt #: 120793
Check / Auth #: MC 01372G
Received By: ELLISLW

Amount: 250.00
Tendered: 250.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: SOLO, MAX
Attn:
Address: 16409 PROVIDENCE FARM LN #7416
Address:
City/State/Zip: CHARLOTTE, NC 27277

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 2720 FOX HOLLOW ROAD		1	250.00	250.00

Environmental Health
3205 Freedom Drive
Charlotte, NC, 28208
Phone: (980) 314-1651
02/13/20 16:18

Sale

Merchant ID: 153629
Sequence #: 003
Card Type : MASTERCARD
Auth. Code: 01372G
Acct. No: **********1509

Amount : 250.00

APPROVED

OP

Signature

I agree to pay the above total amount according to the card issuer agreement (Merchant agreement if credit voucher)

We appreciate your payment!
Thank You Very Much!

Merchant Copy

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance

Control Point, Inc.
PO Box 481936
6130 Harris Technology Blvd.
Charlotte, N.C. 28269
Phone: (704)599-1010
Fax: (704)599-1120

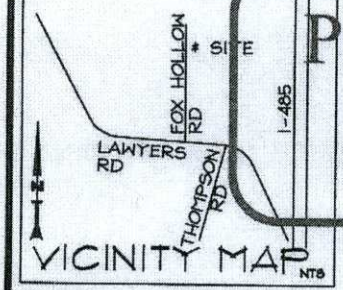
NC: C-2725
SC: COA 3459

NO FIELD WORK HAS BEEN PERFORMED BY CONTROL POINT, INC. AT THIS TIME. THIS PLOT PLAN IS A CONCEPTUAL DRAWING AND CONTENTS SHOWN HEREON ARE SUBJECT TO VARIATION UPON FINAL CONSTRUCTION.

Wesley R. Huneycutt L-4435

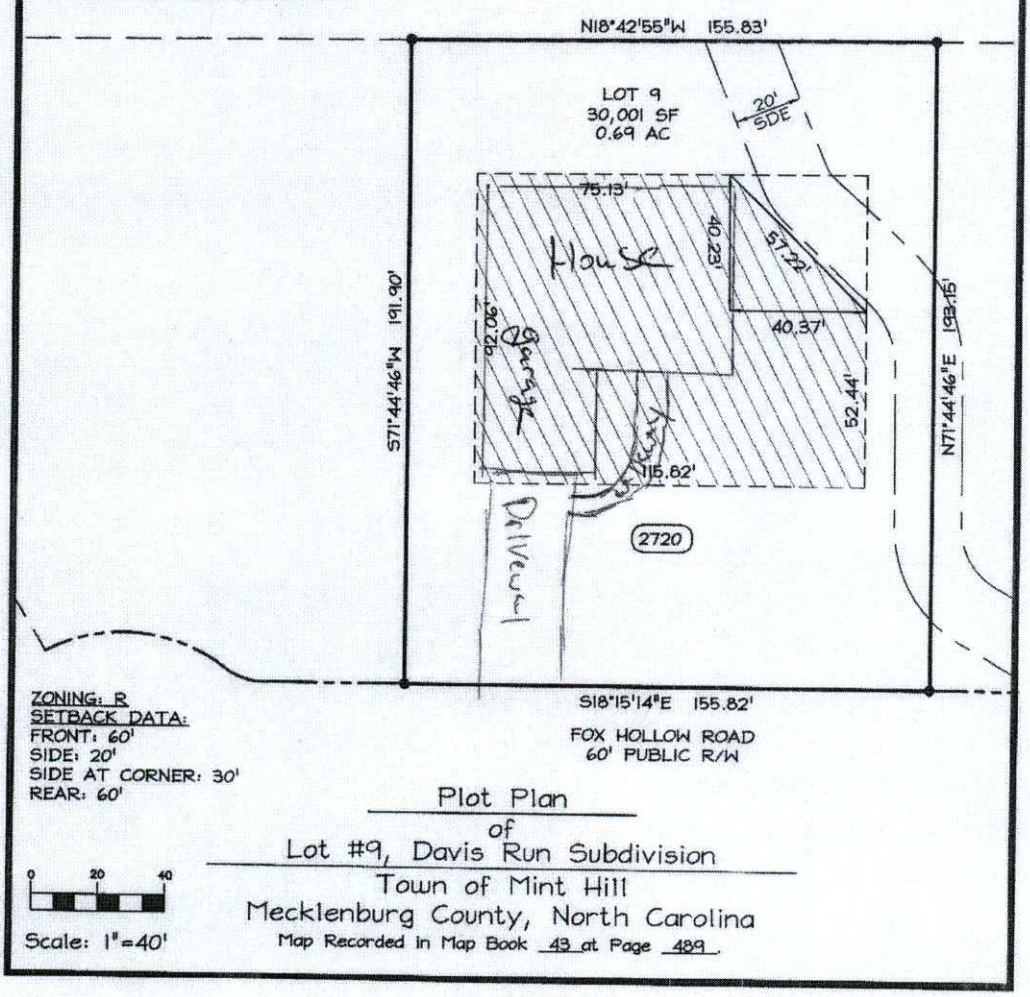
PRELIMINARY PLAT

NOT FOR RECORDATION, CONVEYANCES OR SALES.



MB 43 PG 489

PROPERTY LINE	
R/W	
ADJOINER	
SETBACK	
ADDRESS	(XX)
SDE STORM DRAINAGE EASEMENT	



ZONING: R
SETBACK DATA:
FRONT: 60'
SIDE: 20'
SIDE AT CORNER: 30'
REAR: 60'

0 20 40

Scale: 1"=40'

Plot Plan
of
Lot #9, Davis Run Subdivision
Town of Mint Hill
Mecklenburg County, North Carolina
Map Recorded in Map Book 43 at Page 489.

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr., Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30011060** GWS File #: **5665B** Tax Parcel #: **197-021-72**

- This IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be **NO** grading, filling, or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 3/31/2025

Type of Installation: Residential - New System Lot Number: 9

Structure Type: HOUSE Size (ft^2): 3600 # Bedrooms: 4 Max. Occup.: 8

Building Foundation: Crawl Space Water Supply: Municipal

II. Initial System Type: Approved **System Classification:** IIIg

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.275	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1309	Total Trench Length (ft):	436
Maximum Trench Depth (in):	36	Depth of Media (in):	12	Distribution Device:	Distribution Box		

III. Repair System Type: PPBPS (pressurized) **System Classification:** IVa

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.275	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	873	Total Trench Length (ft):	291
Maximum Trench Depth (in):	36	Depth of Media (in):	N/A	Distribution Device:	Manifold (LPP Distri		

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Jeremy Michael Owner/Legal Agent: _____
Print Name

Signature: Jeremy Michael Signature: _____

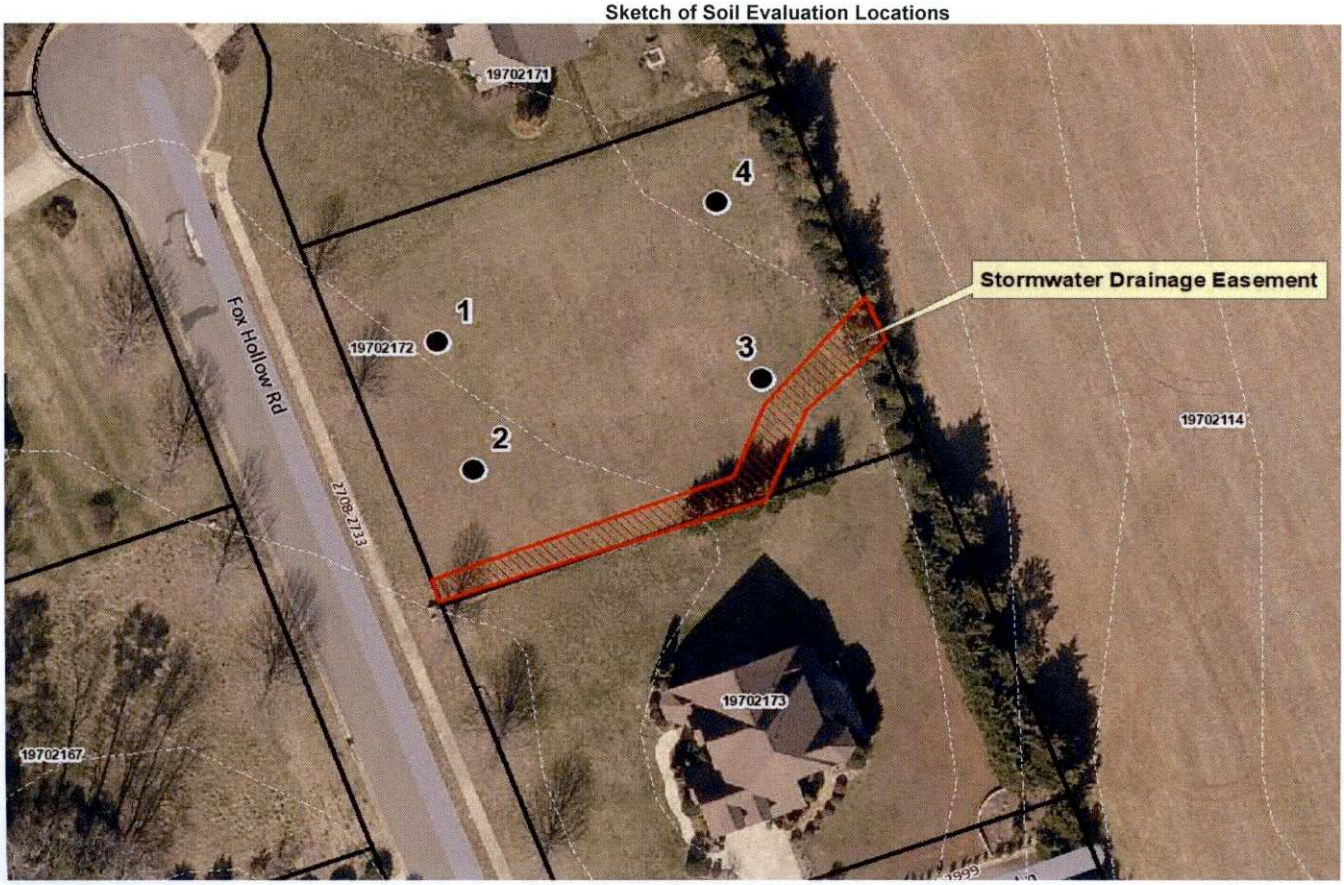
Date Issued: 3/31/2020

COMMENTS:

Landscape Position	Group	Texture	.1955 LTAR	Structure
R-Ridge	I	S-Sand	1.2 - 0.8	sg-Single Grain
SS-Shoulder Slope		LS-Loamy Sand		mass-Massive
LS-Linear Slope				cr-Crumb
FS-Foot Slope	II	SL-Sandy Loam	0.8 - 0.6	gr-Granular
NS-Nose Slope		L-Loam		sbk-Subangular Blocky
HS-Head Slope				abk-Angular Blocky
CC-Concave Slope	III	Si-Silt	0.6 - 0.3	pl-Platy
CV-Convex Slope		SiCL-Silty Clay Loam		pr-Prismatic
T-Terrace				Sap-Saprolite
FP-Flood Plain		CL-Clay Loam		**Structure Prefixes**
D-Drainage Way		SCL-Sandy Clay Loam		w-weak
		SiL-Silt Loam		m-moderate
				s-strong
				f-fine
	IV	SC-Sandy Clay	0.4 - 0.1	m-medium
		SiC-Silty Clay		c-coarse
		C-Clay		

Consistence Moist	Consistence Wet	Mineralogy
VFR-Very Friable	SS-Slightly Sticky	SEXP-Slightly Expansive
FR-Friable	S-Sticky	EXP-Expansive
FI-Firm	VS-Very Sticky	
VFI-Very Firm	NP-Non-Plastic	**Classification**
EFI-Extremely Firm	SP-Slightly Plastic	US-Unsuitable
	P-Plastic	PS-Provisionally Suitable
	VP-Very Plastic	S-Suitable
		NA-Not Applicable

Sketch of Soil Evaluation Locations



FEE: 200.00
DATE: 5/28/2021

CONSTRUCTION AUTHORIZATION FOR AN ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

MECKLENBURG COUNTY
GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 5665B

PERMIT NUMBER: 30011060

PARCEL NUMBER: 19702172

JOB LOCATION INFORMATION

ADDRESS: 2720 FOX HOLLOW RD

CITY: CHARLOTTE **STATE: NC** **ZIP:** 28227

ISSUED TO: YURIY CHUBACHUK

CONSTRUCTION AUTHORIZATION ISSUANCE DATE: 5/27/2021

CONSTRUCTION AUTHORIZATION CONDITIONS

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30011060, AND THE ATTACHED SITE PLAN WITH SYSTEM DETAILS. CONSTRUCTION AND INSTALLATION MUST ALSO MEET ALL REQUIREMENTS SET FORTH IN THE RULES GOVERNING SANITARY SEWAGE COLLECTION, TREATMENT, AND DISPOSAL AND ANY OTHER APPLICABLE RULES AND LAWS.

2. A PRE-CONSTRUCTION MEETING MUST BE SECURED PRIOR TO INSTALLATION OF THE SEPTIC TANK SYSTEM. THE INSTALLER OF THE SYSTEM SHALL BE A LICENSED SEPTIC TANK CONTRACTOR WITH THE NORTH CAROLINA ONSITE WASTEWATER CONTRACTOR INSPECTOR CERTIFICATION BOARD.

3. ANY ALTERATION IN SITE OR SOIL CONDITIONS (INCLUDING LOCATION OF STRUCTURES AND APPURTENANCES) OR MODIFICATION IN USE, DESIGN WASTEWATER FLOW, OR WASTEWATER CHARACTERISTICS AS SPECIFIED IN THE ASSOCIATED IMPROVEMENT PERMIT AND APPLICATION, MAY SUBJECT THIS CONSTRUCTION AUTHORIZATION AND ASSOCIATED PERMIT(S) TO REVOCATION.

4. THIS CONSTRUCTION AUTHORIZATION AS PROVIDED IN G.S. 130A-335(f) AND G.S. 130A-336(b) SHALL BE VALID FOR A PERIOD EQUAL TO THE VALIDITY OF THE IMPROVEMENT PERMIT, AND MAY BE ISSUED AT THE SAME TIME THE IMPROVEMENT PERMIT IS ISSUED.

Authorized Agent Signature Bryan Daugherty

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr., Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: 30011060 GWS File #: 5665B Tax Parcel #: 197-021-72

- This IMPROVEMENT PERMIT is subject to revocation if site plans or the intended use change. There is to be NO grading, filling, or disturbance of the soil in the area of the septic tank system or repair area.
- CONSTRUCTION AUTHORIZATION must be obtained prior to receiving a Building Permit. Do not clear, grade, fill or disturb soil prior to obtaining a Construction Authorization.
- Domestic-type wastewater only. No industrial process wastewater may be discharged into the system.

I. This Improvement Permit Shall: Expire in Five (5) Years **Expiration Date (If Applicable):** 3/31/2025

Type of Installation: Residential - New System Lot Number: 9

Structure Type: HOUSE Size (ft^2): 3600 # Bedrooms: 4 Max. Occup.: 8

Building Foundation: Crawl Space Water Supply: Municipal

II. Initial System Type: Approved **System Classification:** IIIg

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.275	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	N/A
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1309	Total Trench Length (ft):	436
Maximum Trench Depth (in):	36	Depth of Media (in):	12	Distribution Device:	Distribution Box		

III. Repair System Type: PPBPS (pressurized) **System Classification:** IVa

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	0.275	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	873	Total Trench Length (ft):	291
Maximum Trench Depth (in):	36	Depth of Media (in):	N/A	Distribution Device:	Manifold (LPP Distri		

IV. Permit Conditions/Comments:

(Please See the Following Page for Permit Conditions.)

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment, and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Jeremy Michael

Signature: Jeremy Michael

Date Issued: 3/31/2020

Owner/Legal Agent: Max Solodyankin
Print Name

Signature:

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr., Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30011060** GWS File #: **5665B**

IV. Permit Conditions/Comments:

- This type of repair system requires the installation of a pump tank and all associated components. This type of system will require routine inspections by our office. The system owner is responsible for all fees associated with these inspections.
- This type of repair system requires the property owner to obtain a contract with a Certified Operator to perform routine inspections and maintenance on the system.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- Keep drainfield and septic tank outside of the stormwater drainage easement shown on the plot plan.

The undersigned, an authorized agent of the STATE OF NORTH CAROLINA, certifies that the Department is issuing an IMPROVEMENT PERMIT for the above referenced property. This permit is being issued in accordance with the *Laws and Rules For Sewage Treatment and Disposal Systems* and is subject to the following provisions:

- No work shall be conducted on the septic system until a Pre-Construction meeting has been completed by the Department.
- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Jeremy Michael

Signature: Jeremy Michael

Date Issued: 3/31/2020

Owner/Legal Agent: Max Solodyankin
Print Name

Signature:

Control Point, Inc.
PO Box 481936
6130 Harris Technology Blvd.
Charlotte, N.C. 28269
Phone: (704)599-1010
Fax: (704)599-1120

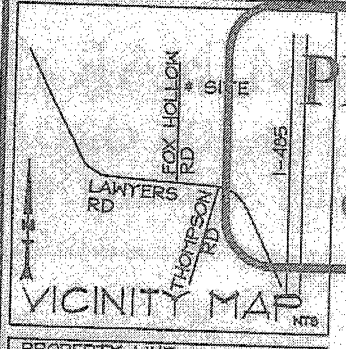
NC: C-2725
SC: COA 3459

NO FIELD WORK HAS BEEN PERFORMED BY CONTROL POINT, INC. AT THIS TIME. THIS PLOT PLAN IS A CONCEPTUAL DRAWING AND CONTENTS SHOWN HEREON ARE SUBJECT TO VARIATION UPON FINAL CONSTRUCTION.

Wesley R. Huneycutt L-4435

PRELIMINARY PLAT

NOT FOR RECORDATION, CONVEYANCES OR SALES.



MB 49 PG 499

PROPERTY LINE	
R/W	
ADJOINER	
SETBACK	
ADDRESS	XX
SDE	
STORM DRAINAGE EASEMENT	

4 Bedroom
480 GPD
25% Reduction
Install (6) lines at 73ft
Use D-Box to feed lines equal.

There may be 18 inches of rise or fall from one end of the line to the other. Adjust trench depth accordingly with a Max trench depth no more than 36 inches.
*Note: Walkway from driveway to front of house needs to hug the garage so drainlines can fit.

N18°42'55"W 155.83'

Panel Repair Area

LOT 9
30,001 SF
0.69 AC

20' SDE

75.13'
40.23'
57.22'
40.37'
S71°44'46"W 191.90'
N71°44'46"E 138.15'
52.44'
10'
3'x73'
3'x73'
3'x73'
3'x73'
3'x73'
2720
Flow
Additional Repair
S18°15'14"E 155.82'

ZONING: R
SETBACK DATA:
FRONT: 60'
SIDE: 20'
SIDE AT CORNER: 30'
REAR: 60'

FOX HOLLOW ROAD
60' PUBLIC R/W

Plot Plan
of
Lot #9, Davis Run Subdivision
Town of Mint Hill
Mecklenburg County, North Carolina
Map Recorded in Map Book 49 at Page 499

0 20 40
Scale 1" = 50'

SIGNATURE

Control Point, Inc.
PO Box 481986
6130 Harris Technology Blvd.
Charlotte, N.C. 28269
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Fax: (704)599-1120

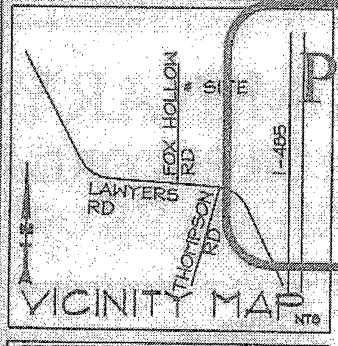
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Wesley R. Huneycutt L-4435

PRELIMINARY PLA

NOT FOR RECORDATION,
CONVEYANCES OR SALES



PROPERTY LINE	
R/W	
ADJOINER	
SETBACK	
ADDRESS	(XX)
SDE STORM DRAINAGE EASEMENT	

MB 43 PG 489

N18°42'55"W 155.63'

LOT 9
30,001 SF
0.69 AC

20' SDE

75.13'

40.23'

37.22'

40.37'

House

Garage

52.44'

116.82'

Driveway

2720

S71°44'46"W 191.90'

S18°15'14"E 155.82'

FOX HOLLOW ROAD
60' PUBLIC R/W

ZONING: R
SETBACK DATA:
FRONT: 60'
SIDE: 20'
SIDE AT CORNER: 30'
REAR: 60'

0 20 40

Scale: 1"=40'

Plot Plan
of
Lot #9, Davis Run Subdivision
Town of Mint Hill
Mecklenburg County, North Carolina
Map Recorded in Map Book 43 at Page 489

Department of Environment, Health, and Natural Resources
Division of Environmental Health
On-site Wastewater Section

Property ID: 197-021-72
Lot #: 9
File #: 5665B
AppID: 11060

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Property Owner: Yuriy Chubachuk
Applicant: Max Solo
Address: 8021 Woodway Oaks Cr, Matthews, NC 28104
Date Evaluated: 3/6/2020
Proposed Facility: 4 Bedroom House
Design Flow (.1949): 480 GPD
Property Size: 0.69 ac
Location of Site: 2720 Fox Hollow, Mint Hill, NC 28227
Property Recorded: Unknown
Water Supply: [ ] Public [ ] Individual [ ] Well [ ] Spring [X] Municipal
Evaluation Method: [X] Auger Boring [ ] Pit [ ] Cut
Type of Wastewater: [X] Sewage [ ] Industrial Process [ ] Mixed

PROFILE #	.1940 Landscape Position/ Slope%	Horizon Depth (IN.)	SOIL MORPHOLOGY .1941 .1941 Structure/ Texture	.1941 Consistence Mineralogy	b PROFILE FACTORS .1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	General Comments	Profile Class & LTAR	Maximum Trench Bottom Depth for 3' Wide Conventional Trench
Boring #1	LS 4%	0 - 4	sbk CL	SS SP FR SEXP	>49"	49	NA	NA	manganese throughout	PS IV 0.275	36"
		4 - 49	sbk C	S P FR SEXP							
Boring #2	LS 4%	0 - 9	sbk CL	SS SP FR SEXP	>49"	49	NA	NA		PS IV 0.275	36"
		9 - 49	sbk C	S P FR SEXP							
Boring #3	LS 4%	0 - 8	sbk CL	SS SP FR SEXP	>49"	49	NA	NA		PS IV 0.275	36"
		8 - 40	sbk C	S P FR SEXP							
		40 - 49	sbk C	S P FI SEXP							
Boring #4	LS 3%	0 - 8	sbk CL	SS SP FR SEXP	>49"	49	NA	NA		PS IV 0.275	36"
		8 - 49	sbk C	S P FI SEXP							

Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	IIIy	IVa
Site LTAR (gpd/sq ft)	**0.275**	**0.275**

Other Factors (.1946):
Soil Evaluation By: Jacob Presley, REHS, LSS
Others Present:
Site Classification (.1948): PS
Site Evaluation By: Jeremy Mitchell
Others Present:

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr., Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

IMPROVEMENT PERMIT for a RESIDENTIAL ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

Permit #: **30011060** GWS File #: **5665B**

IV. Permit Conditions/Comments:

- This type of repair system requires the installation of a pump tank and all associated components. This type of system will require routine inspections by our office. The system owner is responsible for all fees associated with these inspections.
- This type of repair system requires the property owner to obtain a contract with a Certified Operator to perform routine inspections and maintenance on the system.
- All components of the septic system must be installed in accordance with the required setbacks listed on the corresponding plot plan.
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- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
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- The septic system installer shall be a licensed septic contractor with the North Carolina Wastewater Contractor Inspector Certification Board.
- The permitted system shall be installed in accordance with the included PLOT PLAN.
- This IMPROVEMENT PERMIT is transferable.

Authorized Agent: Jeremy Michael

Signature: Jeremy Michael

Date Issued: 3/31/2020

Owner/Legal Agent: _____
Print Name

Signature: _____

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PO Box 481936
6130 Harris Technology Blvd.
Charlotte, N.C. 28269
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Fax: (704)599-1120

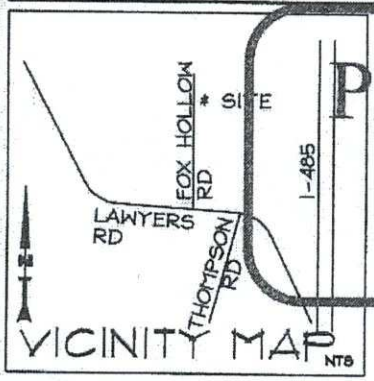
NC: C-2725
SC: COA 3459

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Wesley R. Huneycutt L-4435

PRELIMINARY PLAT

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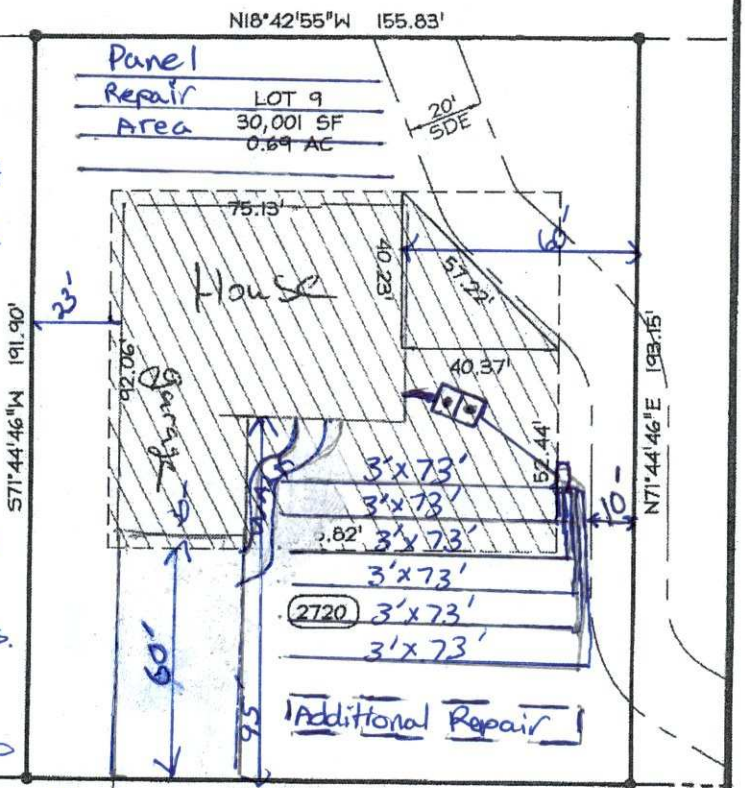


MB 43 PG 489

PROPERTY LINE	
R/W	
ADJOINER	
SETBACK	
ADDRESS	(XX)
SDE STORM DRAINAGE EASEMENT	

4 Bedroom
480 GPD
25% Reduction
Install (6) lines of 73ft
Use D-Box to feed lines equal.

There may be 18 inches of rise or fall from one end of the line to the other. Adjust trench depth accordingly with a Max trench depth No more than 36 inches.
*Note: Walkway from driveway to front of house needs to hug the garage so drainlines can fit.



ZONING: R
SETBACK DATA:
FRONT: 60'
SIDE: 20'
SIDE AT CORNER: 30'
REAR: 60'

Jeremy Mintod REHS

Plot Plan
of
Lot #9, Davis Run Subdivision
Town of Mint Hill
Mecklenburg County, North Carolina
Map Recorded in Map Book 43 at Page 489

SIGNATURE

0 20 40

Scale 1" = 50'

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Phone: (704)599-1010
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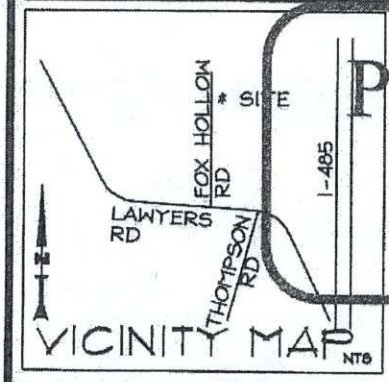
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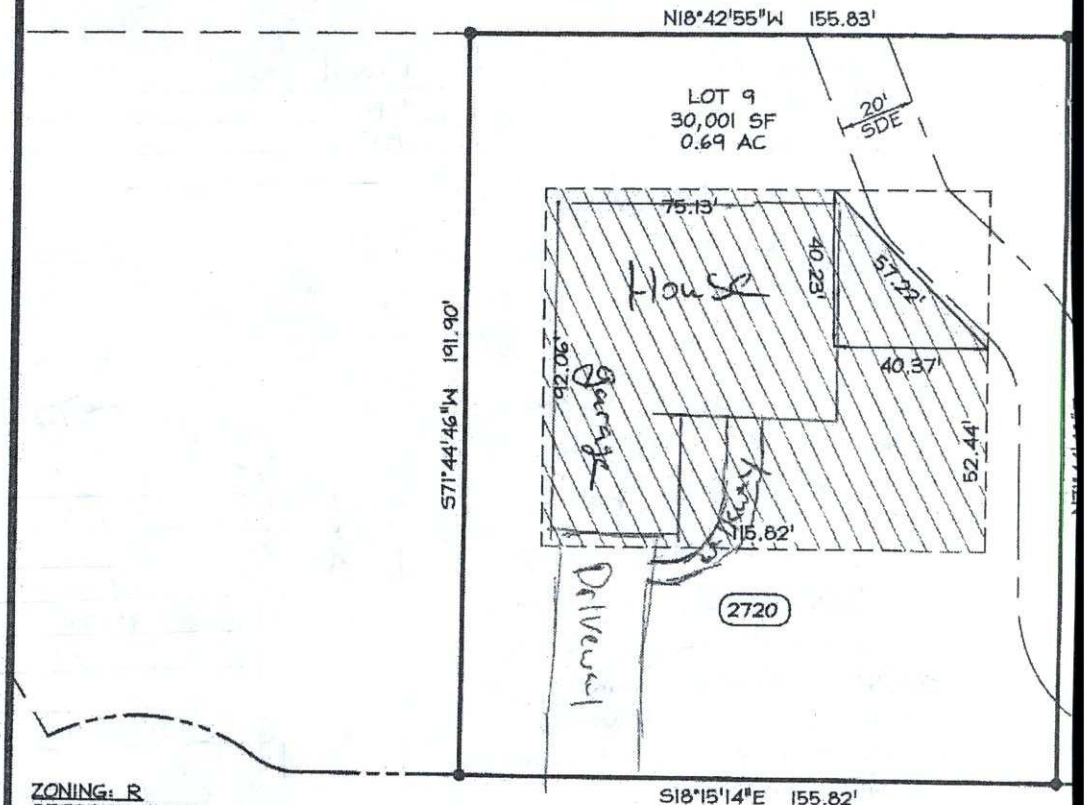
PRELIMINARY PLA

NOT FOR RECORDATION,
CONVEYANCES OR SALES



MB 43 PG 489

PROPERTY LINE	
R/W	
ADJOINER	
SETBACK	
ADDRESS	XX
SDE STORM DRAINAGE EASEMENT	



ZONING: R
SETBACK DATA:
FRONT: 60'
SIDE: 20'
SIDE AT CORNER: 30'
REAR: 60'

0 20 40

Scale: 1"=40'

Plot Plan
of
Lot #9, Davis Run Subdivision
Town of Mint Hill
Mecklenburg County, North Carolina
Map Recorded in Map Book 43 at Page 489

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000 Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

Septic System Pre-Construction Meeting Checklist

File # 5665B App# 11060 Tax Parcel# 197-021-72

Property Owner: Yuriy Chubochuk

Job Location Address: 2720 Fox Hollow Rd.

City: Charlotte State: NC Zip Code: 28227

1. **Does System design match facility, flow & wastewater characteristics?**

   ☑ YES ☐ NO

   Comments:

2. **Is there sufficient available space for the septic systems initial and repair areas?**

   ☐ YES ☒ NO

   Comments:

3. **Can the septic system be installed per the permit conditions and drawing on file?**

   ☐ YES ☒ NO

   Comments: Gas line trenched through drain field area. Gas Line will need to be moved. Move water Line out of drainfield area as well.

*If "NO" is checked for any of the above the existing permit may need to be revoked.

Permission is hereby given to ☐ install ☐ alter ☐ repair an on-site wastewater treatment & and disposal system, with subsurface soil absorption and effluent discharge meeting all of the construction requirements of 15A NCAC 18A .1900 which are in effect on the date of granting this approval. System shall not be installed while soils are in wet condition.

Braedon Shelton — **Authorized Agent**

7/18/22 — **Date**

Sid Gaskins — **Others Present**

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 5665 B Permit #: 11060 Tax Parcel #: 197-021-72

Property Owner: Yuriy Chubachuk

Job Location Address: 2720 Fox Hollow rd.

City: Charlotte State: NC Zip Code: 28227

Operation Permit Issuance Date: 8/9/22 Contractor Name: Sid Gaskins

Permitted Design Flow: 480 GPD Liquid Capacity of Dosing Tank: \ gallons

Liquid Capacity of Septic Tank: 1000 gallons Tank Manufacture Shoaf 6-19-22 Effluent Pump Model: \

Drainfield Installation ☐ N/A

Trench Depth: 36 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 440 feet

# of Lines: 6 @ Varies feet (78, 74, 74, 74, 78, 62)

Depth of Media: 12 inches (Type) Infiltrator Quick-4

Depth of Cover: ≥ 6 inches

Distribution Device: Serial

Inspection Dates

Tank(s) Inspected: 8/3/22

Excavation Inspected: 8/3/22

Pump & Controls Inspected: —

Bed Installation *(For Repair Installations ONLY.)* ☒ N/A

Bed Depth: _____ inches

Bed Width: _____ feet

Total line length: _____ feet

# of Lines: _____ @ _____ feet

Depth of Media: _____ inches (Type) _____

Depth of Cover: _____ inches

Distribution Device: _____

Water Supply Source

☒ Municipal ☐ Private Well ☐ Community Well

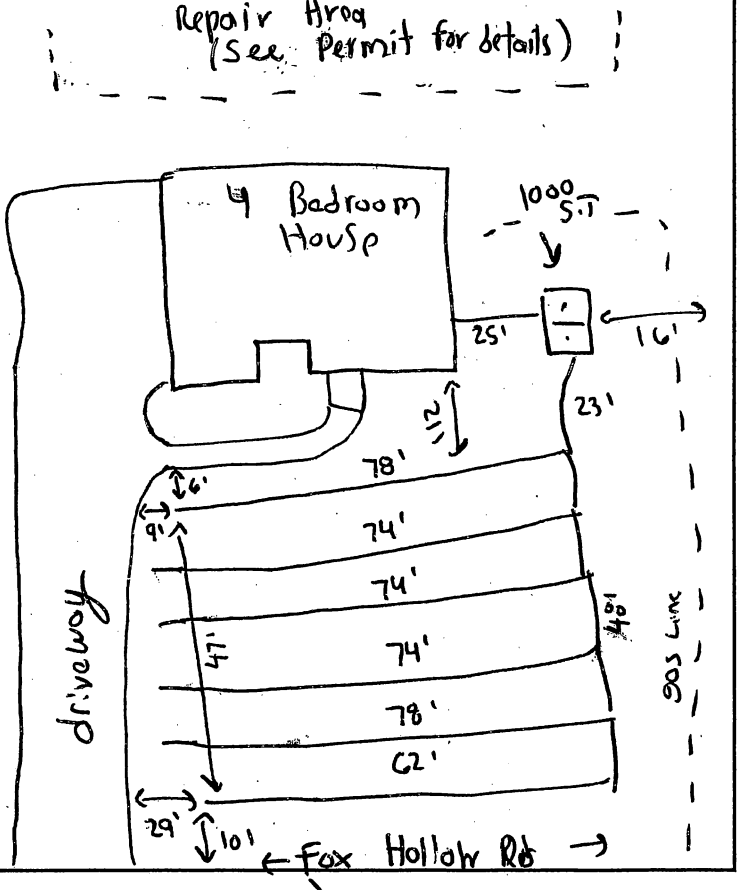
☐ Other _____

System Installation Setbacks

Distance from Building Foundation: ≥ 21 feet

Distance from Property Line: ≥ 10 feet

Distance from Water Supply Source: ≥ 10 feet Water Line



The undersigned has inspected the Septic Tank System described above, and certifies it has been ☒ installed ☐ altered ☐ repaired ☒ as detailed in the plot above ☒ in accordance with the permit issued and meets the provisions of 15A NCAC 18A. 1900, "Laws and Rules for Sewage Treatment and Disposal Systems" in effect on the date of issuance of the permit. The issuance of this Operation Permit does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This document is issued subject to those restrictions and conditions shown on the permit(s) and the provisions of 15A NCAC 18A. 1900 in addition to those listed below under "Comments." This document shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

Notice: Disturbance of the designated repair area may result in the Suspension or Revocation of this permit.

Comments: System Classification & Type: III a, CHM-36 4-Bedroom 25% reduction accepted system. 440 ft of drain field. (Gas Line was moved outside of drain field)

DENR Authorized Agent: Braedon Shelton Signature: Braedon Shelton

Mecklenburg County Groundwater & Wastewater Services
3205 Freedom Dr. Suite 8000, Charlotte, NC 28208
Phone: (980) 314-1680 Fax: (704) 336-6894

NC DHHS
Division of Environmental Health
On-Site Wastewater Section

OPERATION PERMIT for an
ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM

File #: 5665B Permit #: 11060 Tax Parcel #: 197021 72

Property Owner: Yuriy Chubachuk

Job Location Address: _____

City: Charlotte State: NC Zip Code: 28227

OPERATION PERMIT CONDITIONS:

I. Performance: System shall perform in accordance with 15A NCAC 18A .1961.

II. Monitoring: System shall be monitored as required by 15A NCAC 18A .1961.

III. Maintenance: Ground absorption sewage treatment and disposal systems shall be checked, and the contents of the septic tank removed, periodically from all compartments, to ensure proper operation of the system. The contents shall be pumped whenever the solids level is found to be more than 1/3 of the liquid depth in any compartment.

IV. Operation: System shall be operated in accordance with 15A NCAC 18A .1961.

System Classification: III9

*Operation Permits for Type V and VI systems expire five (5) years from the date of issuance (in accordance with Table V(a)). The system owner must contact GWS six (6) months prior to expiration for permit renewal.

Subsurface system operator required: Yes ☐ No ☒

☐ This type of system requires the system owner to maintain a contract with a certified operator to perform system inspection, maintenance, and reporting as required in 15A NCAC 18A .1961. and Table V(a). The system owner is responsible for all fees associated with these services.

☒ System does not require inspection by GWS on a routine frequency.

☐ System requires inspection by GWS once every five (5) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every three (3) years. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every twelve (12) months. The system owner is responsible for all fees associated with the inspection.

☐ System requires inspection by GWS once every six (6) months. The system owner is responsible for all fees associated with the inspection.

V. Other: 4-Bedroom (480 gallon per day) CHM-36

DENR Authorized Agent: Braedon Shelton Date: 8/9/22

Signature: Braedon Shelton