SUPERVISOR/ADMINISTRATIVE PROFESSIONAL CHECKLIST

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

New Septic Fees Paid

IP ($250.00) 11/12/2020 LE Initial/Date

CA ($200.00) 10/14/21 LE Initial/Date

OP ($200.00) 10/14/21 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

Please generate CA / Approve As Noted

Floor plans need to be submitted and reviewed before CA can be issued ☒ Review ☒ 10/19/21

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 ☒ Signature received ☒ _____

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

GWS File #:	10806B
WASPS App #:	11742
Primary ES assigned to project:	Braedon
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:	Michelone
Date performed:	12/15/2020

Created at 12/15/2020 2:43 PM by Michelone, Jeremy
Last modified at 12/15/2020 2:43 PM by Michelone, Jeremy

Close

MECKLENBURG COUNTY
HEALTH DEPARTMENT

10806B #

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

12 NOV '20 PM12:32

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: 137-112-~~57~~-66
STREET ADDRESS: 8911 Blair Rd
CITY: Charlotte
STATE: NC ZIP: 28227
SUBDIVISION NAME:
LOT #: 4 LOT SIZE (acres): 1.390
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: 4000
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 3
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?** June 26 2020 ☐ UNKNOWN

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

12. **PROPERTY OWNER:**
NAME: Elena Ganchenko
ADDRESS: 13449 Edgetree Dr
CITY: Pineville
STATE: NC ZIP: 28134
WORK PHONE:
MOBILE PHONE: 704-258-8943
FAX:
E-MAIL: elenasam2000@yahoo.com

13. **OWNER'S LEGAL REPRESENTATIVE, IF APPLICABLE:**
NAME:
ADDRESS:
CITY:
STATE: ZIP:
WORK PHONE:
MOBILE PHONE:
FAX:
E-MAIL:

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.

EK (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.

Elena Sanchez — Property Owner's or Owner's Legal Representative Signature

Nov 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

Revised on: 03/27/19

File #: _____

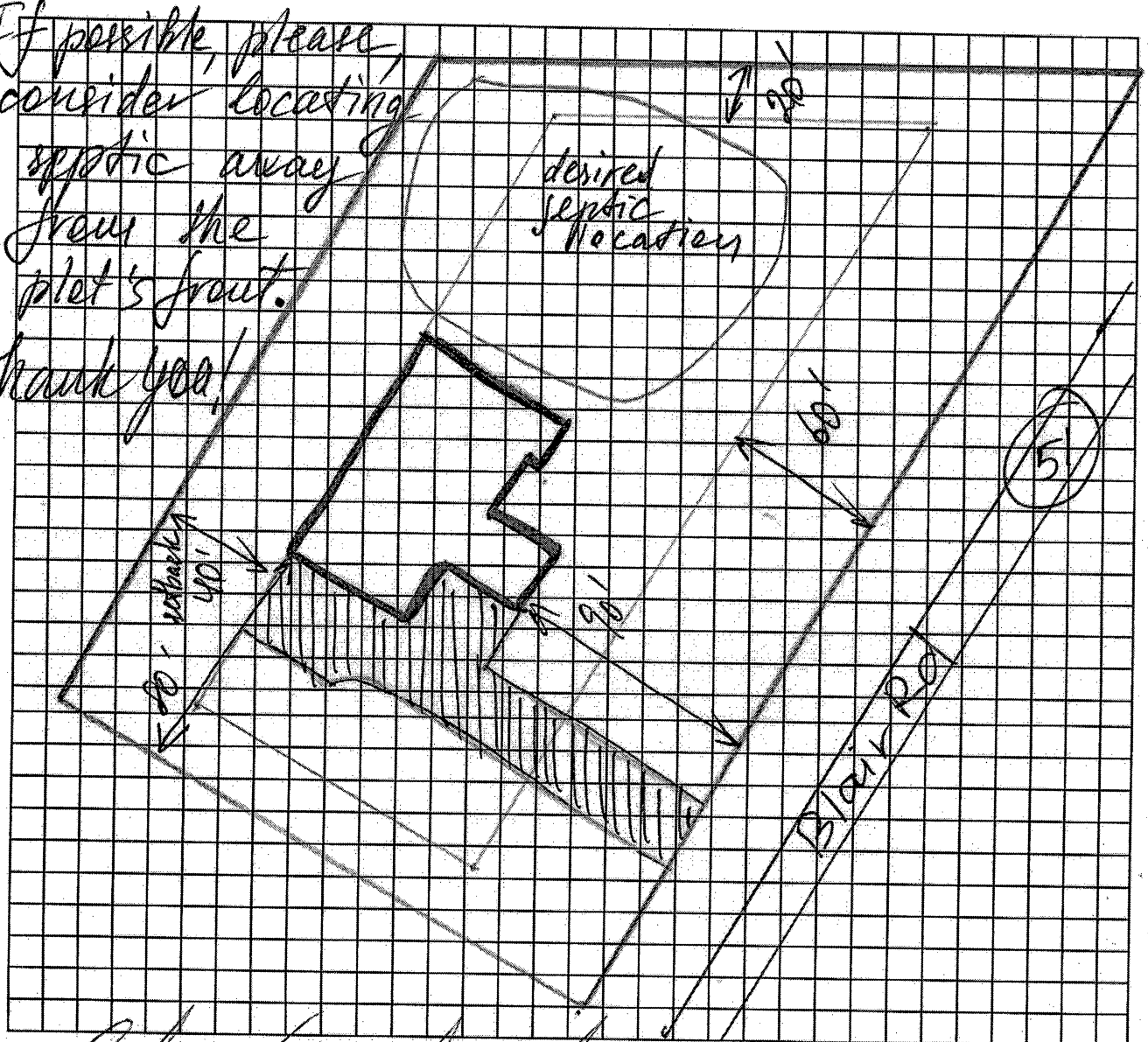
PROPOSED PLOT PLAN

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: 8911 Blair Rd Charlotte NC 28227 Tax Parcel #: 137 112 66

Subdivision Name: _____ Lot #: 4

If possible, please consider locating septic away from the plot's front. Thank you!



Property Owner's or Owner's Legal Representative Signature

Nov 12, 2020
Date

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

Sheet: 1 of 3
Property ID: 137-112-66
Lot #: 4
File #1080B
AppID: 11742

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Property Owner: Elena Ganchecnko
Address: 13449 Edpetree Dr.
Facility: 4 Bedroom
Location of Site: 8911 Blair Rd
Water Supply: [x] Public [] Individual [] Well
Evaluation Method: [x] Auger Boring [X] Pit
Type of Wastewater: [X] Sewage [ ] Industrial Process

Design Flow (.1949): : 480 gpd

Applicant: owner
Date Evaluated: 12/7/2020
Property Size: 1.390
Property Recorded:
[ ] Spring [ ] Municipal
[ ] Cut
[ ] 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
Auger #1	L 3%	0-42"	wblk, C	fi,s,p,SEXP	NA	48"+	NA	NA	BC horizon/saprolite began mixing in at 42" Weak structure	IV 0.275	34"
		42-48"+	wblk,BC/CL	fr,s,p, SEXP							
Auger #2	L 3%	0-36"+	wblk, C	fi,s,p, SEXP	NA	48"+	NA	NA		IV 0.3	34"
		36-48"+	wblk, BC/CL	fr,s,p, SEXP							
Auger #3	L 3%	0-43"	wblk, C	fi,s,p,SEXP	NA	48"+	NA	NA	BC horizon began 43" (saprolite mixing)	IV 0.3	35"
		43-48"+	wblk, BC/CL	Fr,s,p,SEXP							
Auger #4	L 2%	0-48"+	wblk, C	fi,s,p.SEXP	NA	48"+	NA	NA	No saprolite Intrusions	IV 0.3	35"
Auger #5	L 3%	0-42	wblk, C	fi,s,p,SEXP	NA	48"+	NA	NA	BC horizon began at 42" (saprolite mixing)	IV 0.3	34"
		42-48"+	wblk, BC/CL	Fr,s,p,SEXP							

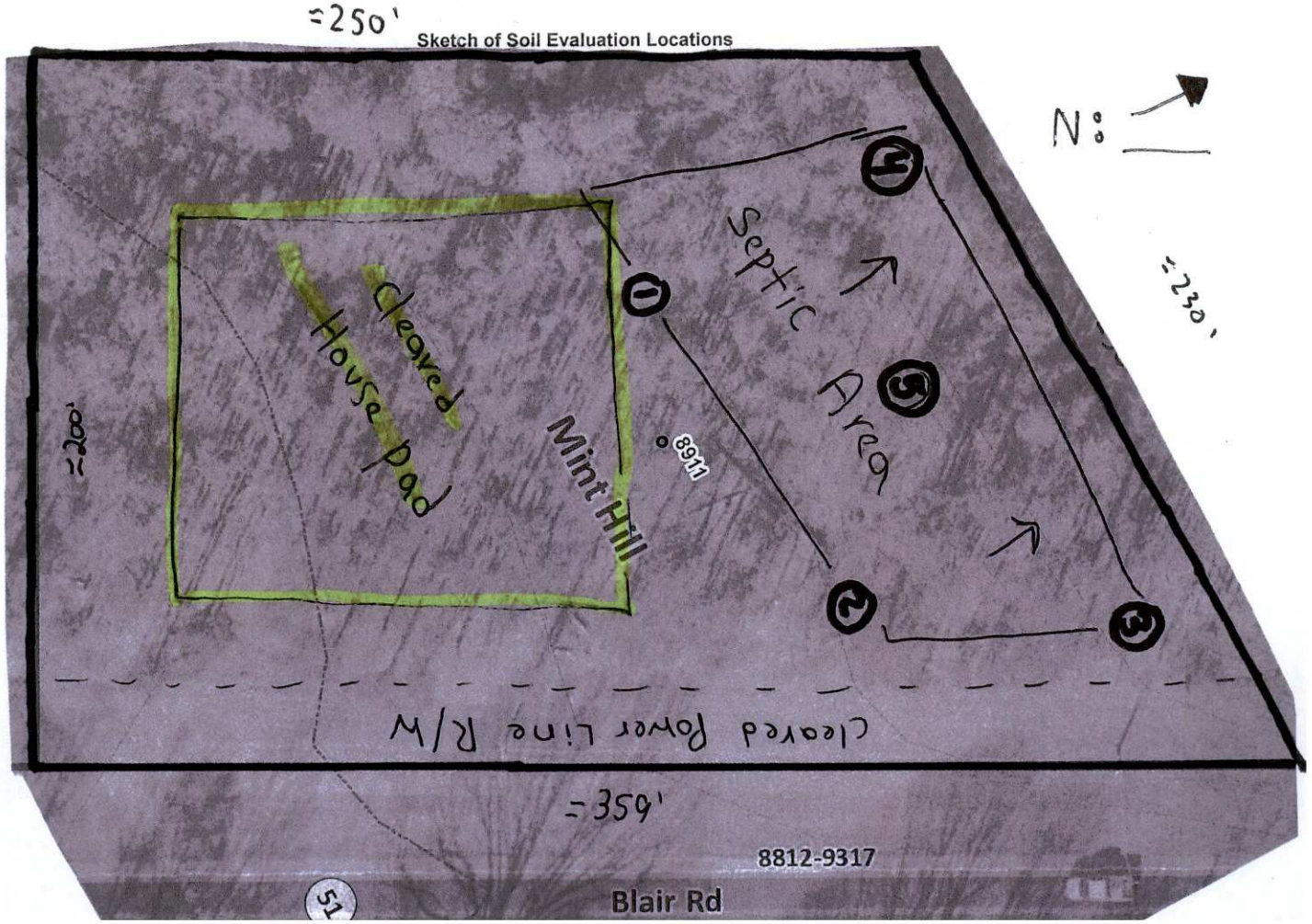
Description	Initial System	Repair System
Available Space (.1945)	PS	PS
System Type(s)	III 9	III b
Site LTAR (gpd/sq ft)	.275	.275

Other Factors (.1946):
Soil Evaluation By: Braden Shutton 2661
Others Present:
Site Classification (.1948):
Site Evaluation By: Braden Shutton 2661
Others Present:

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
				m-moderate
		SiL-Silt Loam		s-strong
				f-fine
	IV	SC-Sandy Clay	0.4 - 0.1	m-medium
		SiC-Silty Clay		c-coarse
		C-Clay		

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

Sketch of Soil Evaluation Locations



FEE: 200.00

DATE: 10/19/2021

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

MECKLENBURG COUNTY

GROUNDWATER & WASTEWATER SERVICES

FILE NUMBER: 10806B

PERMIT NUMBER: 30011742

PARCEL NUMBER: 13711266

JOB LOCATION INFORMATION

ADDRESS: 8911 BLAIR RD

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

ISSUED TO: ELENA GANCHENKO

CONSTRUCTION AU **E:** 10/19/2021

Braidan

CONSTR **NDITIONS**

1. WASTEWATER SYSTEM CONSTRUCTION AND INSTALLATION MUST MEET ALL CONDITIONS AND SPECIFICATIONS AS SET FORTH IN IMPROVEMENT PERMIT NUMBER 30011742, 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 Braidan Shelton 2661

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 #: **30011742** GWS File #: **10806B** Tax Parcel #: **137-112-66**

- 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):** 12/10/2025

Type of Installation: Residential - New System Lot Number: 4

Structure Type: HOUSE Size (ft^2): 4000 # Bedrooms: 4 Max. Occup.: 8

Building Foundation: Crawl Space Water Supply: Municipal

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

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	.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):	34	Depth of Media (in):	12	Distribution Device:	Serial		

III. Repair System Type: Pump to Accepted **System Classification:** IIIb

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	.275	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1309	Total Trench Length (ft):	436
Maximum Trench Depth (in):	34	Depth of Media (in):	12	Distribution Device:	Pressure Manifold		

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: Braedon Shelton

Signature: Braedon Shelton 2661

Date Issued: 12/10/2020

Owner/Legal Agent: Elena Savchenko
Print Name

Signature: Elena Savchenko

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 #: **30011742** GWS File #: **10806B**

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 periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system
- The invert of the sewer pipe exiting the structrue should be kept as high as possible in order to achieve gravity flow to the drain field. A dosing tank will be required if gravity flow to the drain field can not be achieved.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- IF GRAVITY FLOW CANNOT BE ACHIEVED, PUMP TANK MAY BE NEEDED. DO NOT GRADE OR ALTER THE SEPTIC AREA

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: Braedon Shelton

Signature: Braedon Shelton 2021

Date Issued: 12/10/2020

Owner/Legal Agent: Elena Savchenko
Print Name

Signature: Elena Savchenko

On-site Wastewater Improvement Permit Diagram



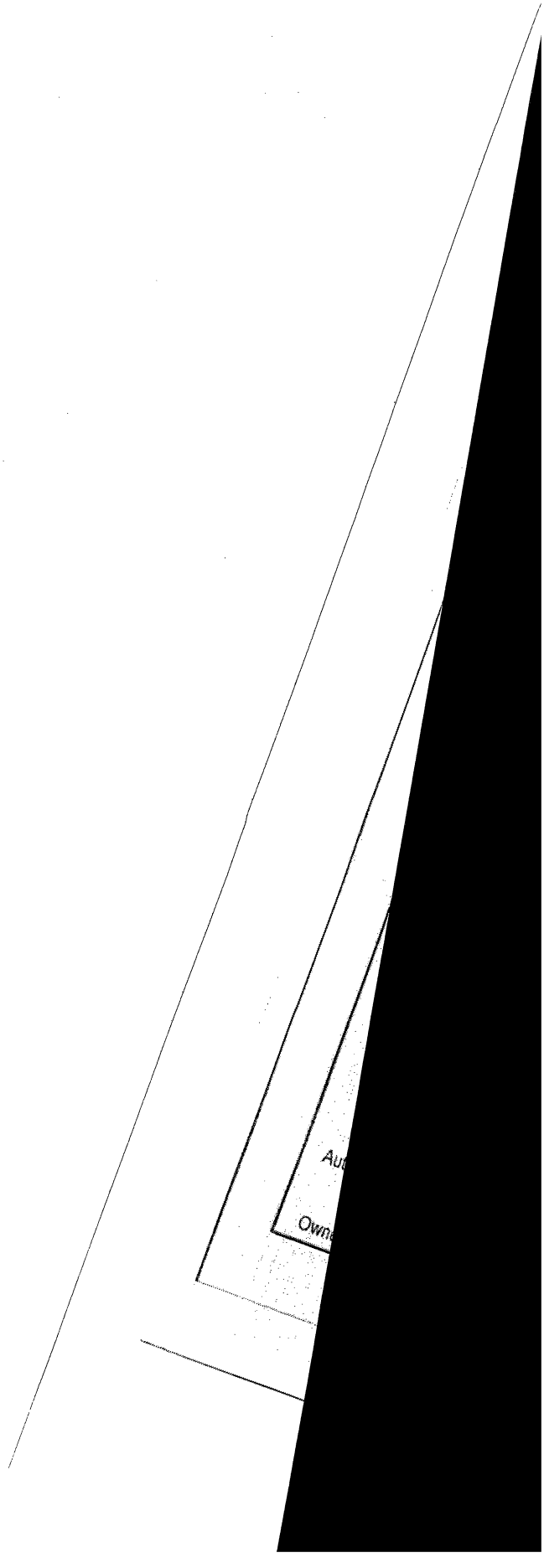
Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #11742
PID #:137-112-66
File #10806B:

horized Agent: Brandon Dutton 2661 Date: 12/10/20

er/ Legal Agent: Elena Savchenko Date: Dec 18 20

1 inch = 50 feet



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 #: **30011742** GWS File #: **10806B** Tax Parcel #: **137-112-66**

- 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):** 12/10/2025

Type of Installation: Residential - New System Lot Number: 4

Structure Type: HOUSE Size (ft^2): 4000 # Bedrooms: 4 Max. Occup.: 8

Building Foundation: Crawl Space Water Supply: Municipal

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

Initial System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	.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):	34	Depth of Media (in):	12	Distribution Device:	Serial				

III. Repair System Type: Pump to Accepted **System Classification:** IIIb

Repair System Specifications:

Design Flow (gpd):	480	LTAR (gpd/ft^2):	.275	Septic Tank Size (gal):	1000	Pump Tank Size (gal):	1000		
Trench Width (ft):	3	Trench Spacing (ft):	9	Absorption Area (ft^2):	1309	Total Trench Length (ft):	436		
Maximum Trench Depth (in):	34	Depth of Media (in):	12	Distribution Device:	Pressure Manifold				

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: Braedon Shelton Owner/Legal Agent: _____
Print Name

Signature: Braedon Shelton 2661 Signature: _____

Date Issued: 12/10/2020

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 #: **30011742** GWS File #: **10806B**

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 periodic inspections by our office. The system owner is responsible for any fees, as determined by the Mecklenburg County Board of Commissioners, associated with this inspection.
- All waterlines must be located a minimum of 10 ft. from any part of the septic system.
- The invert of the sewer pipe exiting the structrue should be kept as high as possible in order to achieve gravity flow to the drain field. A dosing tank will be required if gravity flow to the drain field can not be achieved.
- Flow from all gutters and downspouts shall be directed not to discharge water onto or across any part of the septic system.
- IF GRAVITY FLOW CANNOT BE ACHIEVED, PUMP TANK MAY BE NEEDED. DO NOT GRADE OR ALTER THE SEPTIC AREA.

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: Braedon Shelton

Signature: Braedon Shelton 2661

Date Issued: 12/10/2020

Owner/Legal Agent:_____
Print Name

Signature:_____

Page 2 of 2

On-site Wastewater Improvement Permit Diagram



Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #11742
PID #:137-112-66
File #10806B:

Authorized Agent: Brandon Shelton 2661 Date: 12/10/20

Owner/ Legal Agent: _____ Date: _____

1 inch = 50 feet

Shelton, Braedon P

From: Shelton, Braedon P
Sent: Tuesday, December 8, 2020 10:24 AM
To: 'Elena Ganchecnko'
Subject: RE: [External]Re: soil/septic evaluation for 8911 Blair rd.

Morning,
I was able to evaluate the lot located at 8911 Blair rd. on 12/7/20. I designed a four bedroom septic system to the right of the house. In the wooded section. I put out specific septic flags that indicate where the septic drain field will be installed. These flags are very important do not remove them. The area also needs to be protected. The septic permit can be revoked if the septic area is altered or graded. I recommend putting up some caution tape around my flags. This will alleviate any potential headaches down the road. I have had several new constructions sites in the area, that have altered the septic area, causing the septic permit to be revoked. Costing the applicant more money, and time. So please protect the septic area. I just want to make sure your building process is as smooth as possible in regards to the septic system.

The top drain line for the septic system is located right where the pile of trees is located (three yellow flags) Before the Construction application is approved the logs need to be removed from the septic area. Make sure the soil is not disturbed when the pile is removed. The construction authorization permit, is the final septic permit before the building permit is released. The CA is when you turn in your official house plans.
Having said all this, I will work on your Improvement permit this week. You should get an email later this week once it has been approved and processed into our filing system. The Improvement permit will give details on the type of system that will be installed. It will also include a sketch of the septic layout. If you have any questions please feel free to contact me.

Braedon Shelton, REHS

Environmental Health Specialist

Mecklenburg County Public Health Department

Environmental Health Division

Cell: 980-297-3719

Email: Braedon.Shelton@mecknc.gov

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From: Elena Ganchecnko <elenasam2000@yahoo.com>
Sent: Thursday, December 3, 2020 1:37 PM
To: Shelton, Braedon P <Braedon.Shelton@mecklenburgcountync.gov>
Subject: [External]Re: soil/septic evaluation for 8911 Blair rd.

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good afternoon,

The corners of the plat have been marked as well as the house. The lot is ready for your evaluation. Please, let me know if you need anything else.

Elena Ganchenko
704-258-8943
On Tuesday, December 1, 2020, 04:25:08 PM EST, Shelton, Braedon P <braedon.shelton@mecklenburgcountync.gov> wrote:

Afternoon,

my name is Braedon and I am with Mecklenburg County Environmental Health. I will be evaluating the property located at 8911 Blair rd. to locate a septic system according to state regulations.

I have attached a few documents in this email in regards to what is needed prior for me coming out to the property. I need the property lines marked accurately, the proposed house corners marked, and any other proposed buildings or structures marked. This will ensure that I can accurately design the best septic system for the property. Please let me know once this has been completed. Any questions please feel free to contact me. Thanks.

Braedon Shelton, REHS

Environmental Health Specialist

Mecklenburg County Public Health Department

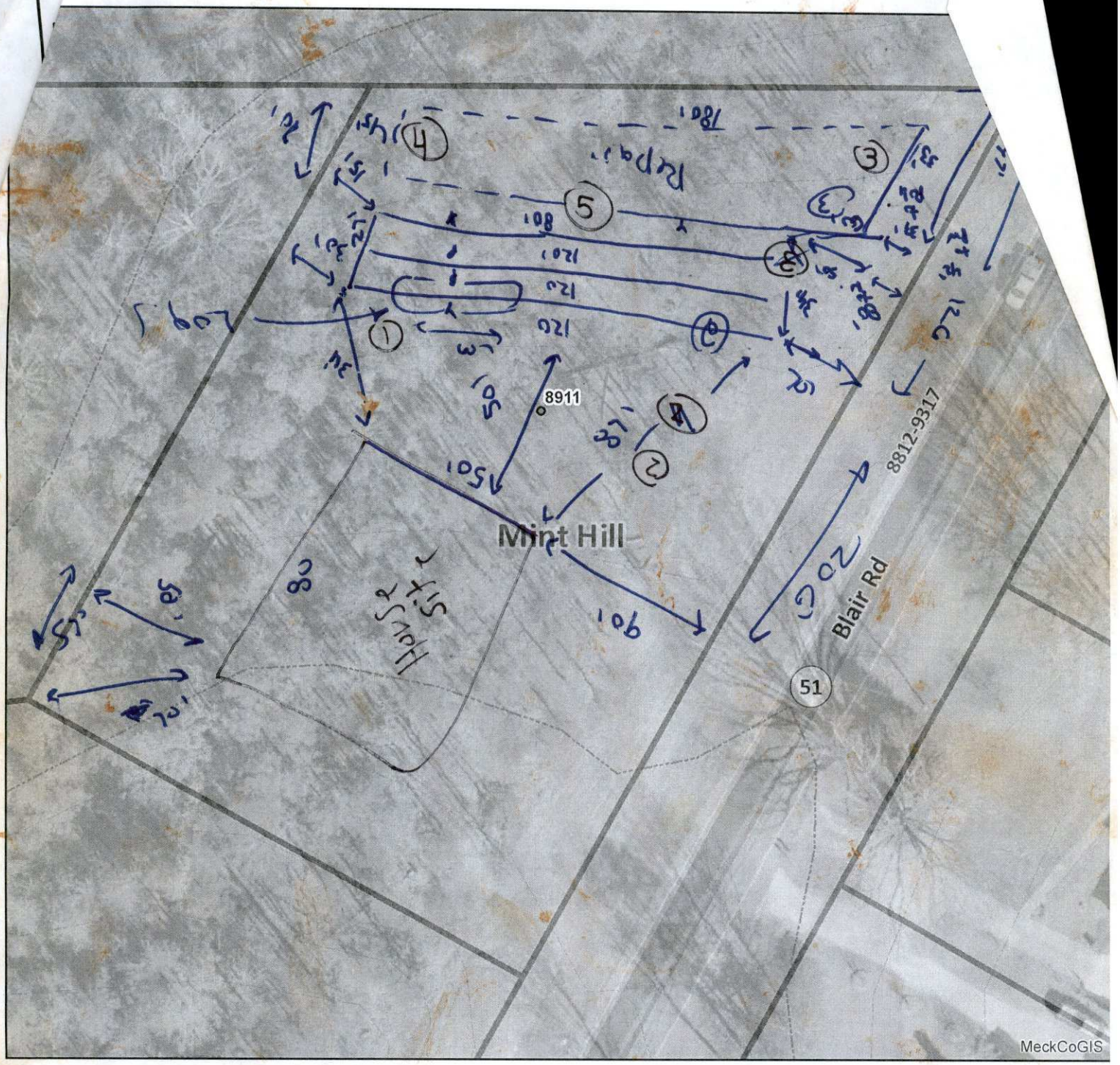
Environmental Health Division

Cell: 980-297-3719

Email: Braedon.Shelton@mecknc.gov

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On-site Wastewater Improvement Permit Diagram



Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #
PID #:
File #:

Authorized Agent: _____ Date: _____

Owner/ Legal Agent: _____ Date: _____

1 inch = 50 fee

12/7/20

1	2	3	4	5
2%	3%	2%	2%	2%
L	L	L	L	L
0-~~48~~ 36"	0-36"	0-43"	0-48"+	0-42"
0-42"	C	C	C	C
C	fi,si,p			
fi,si,p	wbly			
wblh	SE			
48"+	36-48"+	43-48"+		42-48"+
42-48"+	BC/cl	BC/cl		BC/cl
cl/BC				
.3	.275	.3		.3

436' Initial

.275 LTAR weak structure
Hole 2 BC at 36"

Prior to CO
need logs removed
do not burn or alter
septic

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 11/12/20
Receipt #: 124643
Check / Auth #: VISA 012354
Received By: ELLISLW

Amount: 250.00
Tendered: 250.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: GANCHENKO, ELENA
Attn:
Address: 13449 EDGETREE DR
Address:
City/State/Zip: PINEVILLE, NC 28134

Item	Description	Permit#	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 8911 BLAIR ROAD		1	250.00	250.00

Outstanding Balances

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

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 10/14/21
Receipt #: 131081
Check / Auth #: VISA 014764
Received By: ELLISLW

Amount: 200.00
Tendered: 200.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: GANCHENKO, ELENA
Attn:
Address:
Address:
City/State/Zip: ,

Item	Description	Permit#	Quantity	Unit Price	Total Price
0703	Septic Operational Permit 8911 BLAIR ROAD		1	200.00	200.00

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

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

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 10/14/21
Receipt #: 131082
Check / Auth #: VISA 014764
Received By: ELLISLW

Amount: 200.00
Tendered: 200.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: GANCHENKO, ELENA
Attn:
Address:
Address:
City/State/Zip: ,

Item	Description	Permit#	Quantity	Unit Price	Total Price
0734	Septic Construction Authorizat 8911 BLAIR ROAD		1	200.00	200.00

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

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

On-site Wastewater Improvement Permit Diagram



Mecklenburg County Health Department
Environmental Health - Groundwater and Wastewater Services

Permit #11742
PID #:137-112-66
File #10806B:

Authorized Agent: Brandon Shelton 2661 Date: 12/10/20

Owner/ Legal Agent: _____ Date: _____

1 inch = 50 feet

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 # 10806B App# 11266 Tax Parcel# 137 11266

Property Owner: Elena anchenko

Job Location Address: 8911 Blair 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: _____

*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.

Brad Shute — **Authorized Agent**

7/19/22 — **Date**

Sid Gaskins (crew) — **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 #: 10806B Permit #: 11266 Tax Parcel #: 137-112-66

Property Owner: Elena Anchenko

Job Location Address: 8911 Blair Rd.

City: Charlotte State: NC Zip Code: 28227

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

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

Liquid Capacity of Septic Tank: 1000 gallons Tank Manufacture Shoaf 5-23-22 Effluent Pump Model: \

Drainfield Installation ☐ N/A

Trench Depth: 34 inches

Trench Width: 3 feet

Line Spacing: 9 feet (O.C.)

Total line length: 440 feet (118', 122', 122', 78')

# of Lines: 4 @ Varies feet

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

Depth of Cover: ≥6 inches

Distribution Device: Serial

Inspection Dates

Tank(s) Inspected: 7/26/22

Excavation Inspected: 7/26/22

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

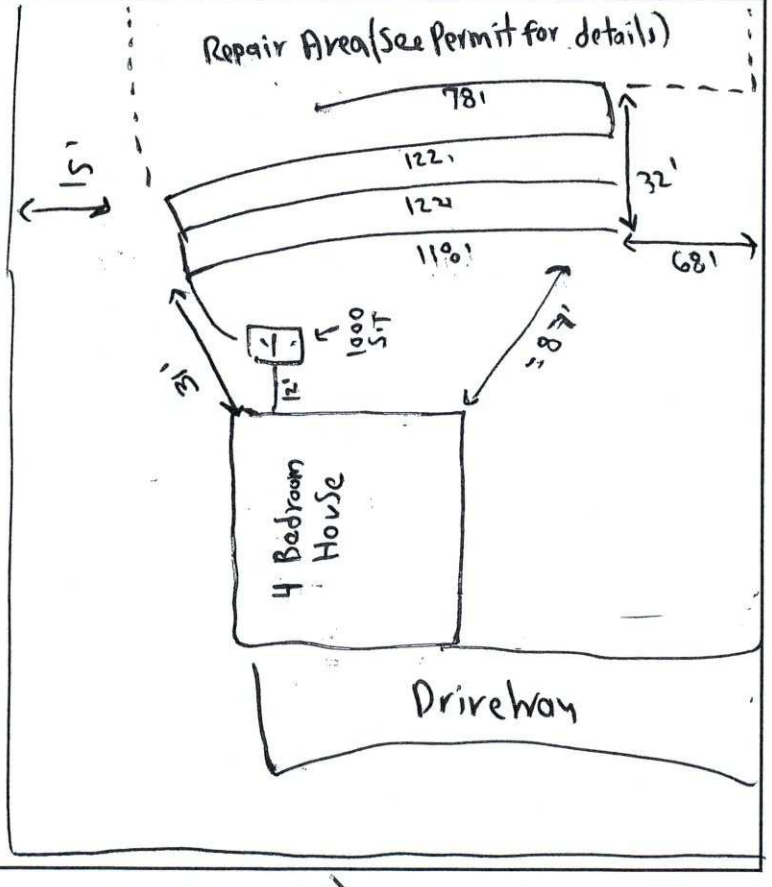
☐ Other _____

System Installation Setbacks

Distance from Building Foundation: ≥ feet

Distance from Property Line: _____ feet

Distance from Water Supply Source: _____ feet



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: IIIg, CHM-36 4 Badroom-25% Reduction Accepted System. (IIIg/6/CHM36/NA/NA)

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 #: 10806B Permit #: 11266 Tax Parcel #: 137-112-66

Property Owner: Elena Anchenko

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: IIIg

*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: IIIg, CHM-36 480 gallons per day

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

Signature: Braedon Shelton