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	Tatyana Livarchuk
MAILING ADDRESS	4912 Woodhaven Ln, Indian Trail NC 28079
PHONE NUMBER	704-292-5644
EMAIL ADDRESS	stefoglotanya@gmail.com
REFUND AMOUNT	$800.00

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

Reciept# 148902 and # 148904

Previous county records for the same property exist and we will not be purchasing the property due to soil findings revealing no septic will work at the property.

Tatyana Livarchuk 5.21.24

Signature Date

Mecklenburg County Public Health
Environmental Health Division

CUSTOMER REFUND AUTHORIZATION FORM

Please refund Tatyana Livarchuk for a request received on
Customer Name

5/21/24, for the following reason:
Date of request

[ ] Overpayment

[ ] Unable to obtain a permit

[X] Other *(Please give a detailed explanation)*: Decided not to purchase the land.

Refund the amount listed from the following accounting line:

Department:	HLT
Fund:	0001
Unit:	3620
Revenue Code:	3122
Activity:	6038
Function:	SC4340
Amount:	$ 250.00

Mail refund to: 4912 Woodhaven Lane
Indian Trail, NC 28079

Employee Processing Request — 5/21/24 Date

Managers Approval — 5-21-2024 Date

Attachments: *Copy of client request*
Original payment receipt

99358/14658

14 MAY '24 AM 9:47

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: 13921113
STREET ADDRESS: 9710 KERR RD
CITY: CHARLOTTE
STATE: NC **ZIP:** 28227
SUBDIVISION NAME: _____
LOT #: _____ **LOT SIZE (acres):** _____

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 N/A

HEATED SQUARE FOOTAGE: _____
NUMBER OF BEDROOMS: _____
NUMBER OF OCCUPANTS: _____

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: 1 ____ ____ ____ ____

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?** 6/30/20 ☐ N/A

12. **PROPERTY OWNER:**

NAME: ANDREY LIVARCHUK
ADDRESS: 4912 WOODHAVEN LN
CITY: INDIAN TRAIL
STATE: NC ZIP: 28079
WORK PHONE: (704) 292-5644
MOBILE PHONE: _____
FAX: _____
E-MAIL: mrandrosha@gmail.com

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

Owner's Authorization form is required if legal representative is submitting application

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

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
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.

AL (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.

AL (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.

Property Owner's or Owner's Legal Representative Signature

5/8/24
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 Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894 Email: Wellreg@MecklenburgCountyNC.gov

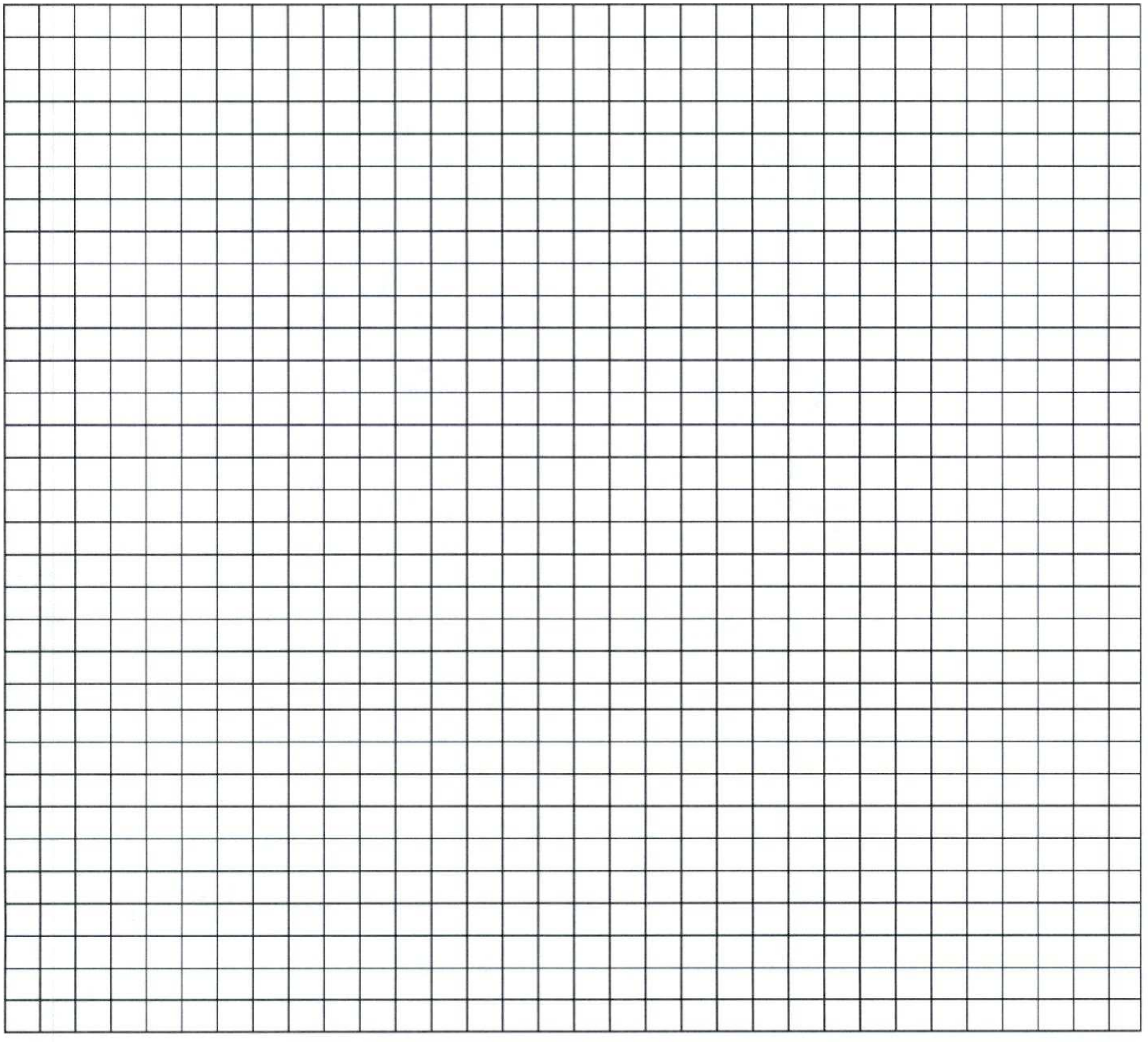
File #: _____

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 #: _____

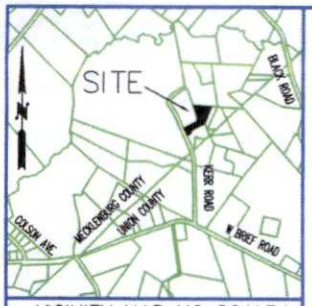


_____ _____

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

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
3205 Freedom Drive, Suite 8000, Charlotte, NC 28208
OFFICE: 980-314-1680, FAX: 704-336-6894 Email: Wellreg@MecklenburgCountyNC.gov

Revised on: 4/20/17



VICINITY MAP NO SCALE

LINE TABLE		
LINE	BEARING	LENGTH
L1	N65°54'34"E	30.33
L2	N65°54'34"E	2.27
L3	N06°39'50"E	58.84
L4	S28°07'02"W	75.52
L5	S65°54'34"W	60.19

NOTES:

- AREA DETERMINED BY COORDINATE GEOMETRY METHOD.
- APPARENT SOURCE OF TITLE RECORDED IN DEED BOOK 33767 PAGE 589.
- THIS SURVEY WAS COMPLETED WITHOUT THE BENEFIT OF A TITLE REPORT.
- THIS PROPERTY MAY BE SUBJECT TO RECORDED OR UNRECORDED EASEMENTS, RIGHT OF WAYS, SETBACKS, AND/OR RESTRICTIVE COVENANTS, NOT SHOWN HEREON.
- ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES IN US SURVEY FEET.
- THIS PROPERTY DOES NOT LIE IN A FEMA DESIGNATED 100 YEAR FLOOD ZONE, (FLOOD INSURANCE RATE MAP NO. 3710553300N, EFFECTIVE AS OF 11/16/2018).
- SETBACKS, EASEMENTS, AND RIGHT OF WAYS, AS DEPICTED HEREON, TAKEN FROM MAP BOOK 40 PAGE 991, UNLESS OTHERWISE ANNOTATED.
- TOWN OF MINT HILL ETJ ZONING: R, PRINCIPAL STRUCTURE SETBACKS AS SHOWN HEREON, BUILDER/OWNER TO VERIFY ALL SETBACKS BEFORE ANY CONSTRUTION BEGINS.

PID: 13921108
ROGER FATE THOMAS &
LISA BROWN THOMAS
DEED BOOK 19853 PAGE 869

Iron Found
S 86°12'06" E 353.07'
Iron Found

50' REARYARD
N 19°19'12" W 279.27'
20' SIDEYARD
PROPOSED HOUSE PAD
90X100
20' SIDEYARD
S 20°00'42" W 359.81'

PID: 13921112
VIKTOR GULA &
RAKHILIA GULA
DEED BOOK 38681 PAGE 450

NAD83 (2011) NC GRID

PID: 13921113
MARLIS TURCIOS
LOT 4
MAP BOOK 40 PAGE 991
DEED BOOK 33767 PAGE 589

112,174 square feet
2.58 Acres

PIN: 08243004E
MICHAEL WARREN SMITH
& WENDY BROCK SMITH
DEED BOOK 7629 PAGE 156
LOT 3
PLAT CABINET H FILE 937

Iron Found
L3
Iron Found
N 65°54'34" E 250.97'
20' SIDEYARD
Iron Found
20' SIDEYARD
S 65°54'34" W 245.45'
15' EXCLUSIVE EASEMENT FOR LOT 3 (MB 40 PG 991)
Iron Found
L2
L1
Nail Found
Iron Set
WATER METER
60' FRONTYARD
N 24°20'23" W 140.95'
L4
Iron Set
L5
Iron Set
PAVED ROAD
FENCE

PID: 3921114
GLORIA JEAN KERR THOMAS
BDEED BOOK 16877 PAGE 53
LOT 1
MAP BOOK 40 PAGE 991

KERR ROAD
60' PUBLIC RIGHT OF WAY
MAP BOOK 40 PAGE 991

60 0 30 60
GRAPHIC SCALE
1 inch = 60 feet

BOUNDARY AND PHYSICAL SURVEY OF:

9710 KERR ROAD – 2.58 ACRES
PROPERTY OF: MARLIS TURCIOS
DEED BOOK 33767 PAGE 589
MAP BOOK 40 PAGE 991
TOWN OF MINT HILL ETJ, MECKLENBURG COUNTY, NORTH CAROLINA

PREPARED FOR: ANDREY LIVARCHUK

MCMURRAY LAND SURVEYING INC., C-3906
MICHAEL P. MCMURRAY, NCPLS L-4880
318 E. OLD HIGHWAY 74
MONROE, N.C.
704-254-2736

I hereby certify that this map was drawn under my supervision from an actual survey made under my supervision; that the ratio of precision or positional accuracy is 1:10,000+; that the boundaries not surveyed are shown as broken lines plotted from information found in (references as shown), and that this map meets the requirements of the Standards of Practice for Land Surveying in North Carolina (21 NCAC 56. 1600). Witness my original signature, license number, and seal, this 6th day of May, 2024.

Professional Land Surveyor

L-4880
License Number

This survey is of an existing parcel of land.

NORTH CAROLINA PROFESSIONAL SEAL L-4880 LAND SURVEYOR MICHAEL P. MCMURRAY

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date:	05/10/24	**Amount:**	250.00
Receipt #:	148902	**Tendered:**	250.00
Check / Auth #:	VISA 06048D	**Returned:**	0.00
Received By:	ALVARJS		

Account Information

Account #: 200000
Contractor: TATYANA LIVARCHUK
Attn:
Address:
Address:
City/State/Zip: ,

Item	Description	Quantity	Unit Price	Total Price
0701	Improvment Permit App-Residen 9710 KERR RD	1	250.00	250.00

Permit#

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

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance
550.00	3,667.50	897.50		555.00	