

Extended SMITS AX20N Service Contract For the State of Oregon

Parties:
(Service Provider)

NAME
ADDRESS
CITY, STATE, ZIP CODE
TELEPHONE
E-MAIL

A&B SEPTIC SERVICE
PO BOX 444
ALBANY, OR 97321
844-571-2836
att.oandm@gmail.com

Renewal

And:
(Customer)

NAME
ADDRESS
CITY, STATE, ZIP CODE
TELEPHONE
E-MAIL

JOHN & SHARON MEEK
80624 HWY 101
TOLOVANA PARK, OR 97102
503-830-5434
SHARON-MEEK@COMCAST.NET

186-21-000031

4-10-7CC-400

Date: May 2, 2023

NOW, THEREFORE, in consideration of the terms, provisions, covenants, and conditions contained herein, the Parties hereto agree as follows:

1.0 Performance of Services

The local AdvanTex® Treatment System Dealer, or an Authorized Service Provider, shall perform the following marked services:

Annual Maintenance	<u>X</u>
Alarm Response	<u>X</u>
Telemetry Monitoring	<u>X</u>
Reporting	<u>X</u>

See Schedule "A" for a detailed explanation of the Service. The Service Provider will affix a "For Service, Call 844-571-2836" label near the control panel's alarm signal.

System Testing and Servicing at:

6-month intervals _____ 12-month intervals X Other intervals _____

The following additional optional services will also be provided:

Monitoring X Reporting X Alarm Response X

The Service Provider shall notify the owner in writing if any improper system operation cannot be remedied at the time of servicing. During system servicing the Service Provider shall make provisions for any needed effluent quality analyses such as color, turbidity, scum, and odor. The Authorized Service Provider shall be responsible for submitting the Annual Report and Annual Evaluation Fee to the appropriate Regulatory Agency as required. **The Annual Fee set by Regulatory Agency shall be paid to A & B SEPTIC SERVICE within 10 days of receiving the Invoice for said fee. Should this Annual Fee not be paid in full to A & B Septic within the aforementioned period of time, the Annual Report will not be sent to the Regulatory Agency placing the homeowner out of compliance with the Regulatory Agency.**

2.0 Term of Agreement

This Agreement shall begin on **May 2, 2023**, and will remain in effect until otherwise terminated by either party in writing as provided herein.

3.0 Charges

The charges which the Customer shall pay AdvanTex® Service Provider for the performance of Services shall be as described in Schedule A. Service Provider may increase all or any of the charges for those Services described in Schedule A by giving the Customer written notice at least thirty (30) days before each yearly anniversary of the Effective Date of this Agreement.

4.0 Warranty

AdvanTex® Service Provider warrants that all Services shall be performed in a good and workmanlike manner and that Service Provider will correct any System errors, malfunctions, or defects directly caused by Service Provider's failure to perform the Services and Additional Services in such manner.

5.0 Limitation of Liability

The sole liability of AdvanTex® Service Provider under this agreement shall be to correct any errors, malfunctions or defects in the system directly caused by AdvanTex® Service Provider's failure to perform any services in a good and workmanlike manner pursuant to Section 4 above; provided, however, in no event shall AdvanTex® Service Provider's liability to the Customer hereunder exceed the total of the amounts paid to AdvanTex® Service Provider hereunder by the Customer. In no event shall AdvanTex® Service Provider be liable to the Customer or any third-party claimant for any indirect, special, punitive, consequential or incidental damages or lost profits arising out of or related to this Agreement or the performance or breach thereof, whether based upon a claim or action of contract, warranty, negligence or strict liability or other tort, breach of any statutory duty, indemnity, or contribution or otherwise, even if Service Provider has been advised of the possibility of such damages.

6.0 Termination/Cancellation

This Agreement may be terminated or canceled upon:

- Written notice by one Party effective as of the effective date thereof if the other Party is in default of any provision of this Agreement and such default is not cured by the defaulting Party within fifteen (15) days after the effective date of said notice from the non-defaulting Party or by the mutual written agreement of both Parties.

7.0 Miscellaneous Provisions

This Agreement is personal in nature and may not be delegated, assigned or transferred by either Party without the prior written consent of the other Party.

The laws of the State of Oregon shall govern this Agreement.

Any notice or other communication required or permitted to be given under this Agreement shall be in writing and shall be mailed by certified mail, return receipt requested, postage prepaid, addressed to the Parties at the addresses shown on the first page of this Agreement. Any notice or other communication shall be deemed given at the expiration of the second day after the date of deposit in the United States mail. The addresses to which notices or other communications shall be mailed may be changed from time to time by giving written notice to the other Party as provided in this Section.

AdvanTex® Service Provider

Customer(s)

Name: A&B SEPTIC SERVICE

By: *Angela Dyer*

Sharon M. [Signature] 6-1-2023

Its: ATT ADMINISTRATOR

OWNER SIGNATURE

DATE

Schedule A: Charges

The annual fee for services listed under Section 1 of the Agreement is \$510.00, which shall be billed and payable within 30 days for each 12-month period of this agreement or anniversary thereof. Payment shall be made prior to performing the services specified within each 12-month period following the date the agreement is signed. See attached "Option Letter".



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FEB 02 2023

CLATSOP CO. PUBLIC HEALTH

PD CK# 29498

862-

Annual Operation and Maintenance Report Form

41007CC00400

General Information

Property Owner: JOHN & SHARON MEEK Phone #: 503-590-5805
Site Address: 80624 HWY 101 City: TOLOVANA PARK
County: CLATSOP Permit #: OS407620 Startup Date: 3/23/09
System Model #: AX20N System Serial #: 125572
Service Report Year: 2022

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
- ☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
- ☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
- ☐ ☒ Discharge of sewage to drain tiles or surface waters
- ☐ ☒ Sewage backup into plumbing fixtures
- ☐ ☐ If yes, was a repair permit obtained? If not, explain:

Approved by
Clatsop County
Public Health

Date Jan 4/14/23

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Maintenance Provider Name (please print): Magnum Miller - A & B Septic Service

Certification #: RM 174 Certification Expiration Date: 4/24/24

Signature: [Signature] Date: 12/31/22

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).



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✓ # 32332
#62-

Annual Operation and Maintenance Report Form

General Information

Property Owner: JOHN & SHARON MEEK Phone #: 503-590-5805
Site Address: 80624 HWY 101 City: TOLOVANA PARK
County: CLATSOP Permit #: OS407620 Startup Date: 3/23/09
System Model #: AX20N System Serial #: 125572
Service Report Year: 2021

#186-21-000031

4-10-Dec-400

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
- ☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
- ☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
- ☐ ☒ Discharge of sewage to drain tiles or surface waters
- ☐ ☒ Sewage backup into plumbing fixtures
- ☐ ☐ If yes, was a repair permit obtained? If not, explain:

Approved by
Clatsop County
Public Health

Date 3/23/22 [Signature]

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Maintenance Provider Name (please print): Magnum Miller - A & B Septic Service

Certification #: RM 174 Certification Expiration Date: 4/24/24

Signature: [Signature] Date: 12/31/21

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).



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JAN 20 2021
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Annual Operation and Maintenance Report Form

1860-21-000631-Serve

General Information

Property Owner: JOHN & SHARON MEEK Phone #: 503-590-5805
Site Address: 80624 HWY 101 City: TOLOVANA PARK
County: CLATSOP Permit #: OS407620 Startup Date: 3/23/09
System Model #: AX20N System Serial #: 125572
Service Report Year: 2020

41007CC00400

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
- ☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
- ☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
- ☐ ☒ Discharge of sewage to drain tiles or surface waters
- ☐ ☒ Sewage backup into plumbing fixtures
- ☐ ☐ If yes, was a repair permit obtained? If not, explain:

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Maintenance Provider Name (please print): Magnum Miller - A & B Septic Service

Certification #: M 336 Certification Expiration Date: 4/24/21

Signature: [Signature] Date: 12/31/20

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).

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CLATSOP CO. PUBLIC HEALTH

(Pd) OK # 27835

60-

2017 Annual Operation and Maintenance Report Form

#500123

4-10-NCC-400

General Information

Property Owner: JOHN & SHARON MEEK Phone #: 503-590-5805
Site Address: 80625 HWY 101 City: TOLOVANA PARK
County: CLATSOP Permit #: OS407620 Startup Date: 3/23/09
System Model #: AX20N System Serial #: 125572
Service Report Year: 2017

4 10 Q7CC 00400

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
☐ ☒ Discharge of sewage to drain tiles or surface waters
☐ ☒ Sewage backup into plumbing fixtures
☐ ☐ If yes, was a repair permit obtained? If not, explain:

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Maintenance Provider Name (please print): Kyle Pitts - A & B Septic Service

Certification #: M 204 Certification Expiration Date: 3/6/18

Signature: [Signature] Date: 12/31/17

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).

start 3/23/09



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(Pd) ck# 25960
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Annual Operation and Maintenance Report Form

General Information

Property Owner: JOHN & SHARON MEEK Phone #: 503-590-5805
Site Address: 80625 HWY 101 City: TOLOVANA PARK
County: CLATSOP Permit #: OS407620 Startup Date: 3/23/09
System Model #: AX20N System Serial #: 125572
Service Report Year: 2019

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
☐ ☒ Discharge of sewage to drain tiles or surface waters
☐ ☒ Sewage backup into plumbing fixtures
☐ ☐ If yes, was a repair permit obtained? If not, explain:

Approved by
Clatsop County
Public Health
Date 2/14/20

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Maintenance Provider Name (please print): Magnum Miller - A & B Septic Service

Certification #: M 336 Certification Expiration Date: 4/24/21

Signature: [Signature] Date: 12/31/19

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).

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JAN 28 2019



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Onsite Program

Annual Operation and Maintenance Report Form

500123

4-10-700-400

General Information

Property Owner: JOHN & SHARON MEEK Phone #: 503-590-5805
 Site Address: 80625 HWY 101 City: TOLOVANA PARK
 County: CLATSOP Permit #: OS407620 Startup Date: 3/23/09
 System Model #: AX20N System Serial #: 125572
 Service Report Year: 2018

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
☐ ☒ Discharge of sewage to drain tiles or surface waters
☐ ☒ Sewage backup into plumbing fixtures
☐ ☐ If yes, was a repair permit obtained? If not, explain:

Approved by
Clatsop County
Public Health

Date 4/18/19

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Maintenance Provider Name (please print): Seth Anderson - A & B Septic Service

Certification #: RM 110 Certification Expiration Date: 3/6/21

Signature: *Seth Anderson* Date: 12/31/18

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).



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CLATSOP CO. PUBLIC HEALTH

\$6000
P.D. # 26979

2016 Annual Operation and Maintenance Report Form

#500123 4-10-90-400

General Information

Property Owner: JOHN & SHARON MEEK Phone #: 503-590-5805
Site Address: 80625 HWY 101 City: TOLOVANA PARK
County: CLATSOP Permit #: OS407620 Startup Date: 3/23/09
System Model #: AX20N System Serial #: 125572
Service Report Year: 2016

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
- ☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
- ☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
- ☐ ☒ Discharge of sewage to drain tiles or surface waters
- ☐ ☒ Sewage backup into plumbing fixtures
- ☐ ☐ If yes, was a repair permit obtained? If not, explain:

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Maintenance Provider Name (please print): Kyle Pitts - A & B Septic Service

Certification #: M 204 Certification Expiration Date: 3/6/18

Signature: [Signature] Date: 12/31/16

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).



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CLATSOP CO. PUBLIC HEALTH

(PD) Uk# 25104
\$60-

2015 Annual Operation and Maintenance Report Form

4-10-9CC-400

General Information

Property Owner: JOHN & SHARON MEEK Phone #: 503-590-5805
Site Address: 80625 HWY 101 City: TOLOVANA PARK
County: CLATSOP Permit #: OS407620 Startup Date: 3/23/09
System Model #: AX20N System Serial #: 125572
Service Report Year: 2015

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
☐ ☒ Discharge of sewage to drain tiles or surface waters
☐ ☒ Sewage backup into plumbing fixtures
☐ ☐ If yes, was a repair permit obtained? If not, explain:

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

A & B SEPTIC SERVICE
P.O. BOX 444
ALBANY, OR 97321

Maintenance Provider Name (please print): Kyle Pitts

Certification #: M 204 Certification Expiration Date: 3/6/18

Signature: [Signature] Date: 12/31/15

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).

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State of Oregon
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Annual Operation and Maintenance Report Form

4-10-7CC 400

General Information

Property Owner: JOHN & SHARON MEEK Phone #: 503-590-5805
Site Address: 80625 HWY 101 City: TOLOVANA PARK
County: CLATSOP Permit #: OS407620 Startup Date: 3/23/09
System Model #: AX20N System Serial #: 125572
Service Report Year: 2014

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
☐ ☒ Discharge of sewage to drain tiles or surface waters
☐ ☒ Sewage backup into plumbing fixtures
☐ ☐ If yes, was a repair permit obtained? If not, explain:

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Maintenance Provider Name (please print): Chuck Brock

Certification #: M 126 Certification Expiration Date: 3/7/15

Signature: Chuck Brock Date: 12/31/14

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).



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FOR DEQ USE ONLY
DATE REC'D JAN 24 2014
AMT. REC'D 50/360
CHECK # 225081-6

Annual Operation and Maintenance Report Form

General Information

Property Owner: JOHN & SHARON MEEK Phone #: 503-590-5805
Site Address: 80625 HWY 101 City: TOLOVANA PARK
County: CLATSOP Permit #: OS407620 Startup Date: 3/23/09
System Model #: AX20N System Serial #: 125572
Service Report Year: 2013

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
- ☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
- ☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
- ☐ ☒ Discharge of sewage to drain tiles or surface waters
- ☐ ☒ Sewage backup into plumbing fixtures
- ☐ ☐ If yes, was a repair permit obtained? If not, explain:

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Maintenance Provider Name (please print): Chuck Brock

Certification #: M 126 Certification Expiration Date: 3/7/15

Signature: Chuck Brock Date: 12/31/13

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).

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State of Oregon
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Annual Operation and Maintenance Report Form

General Information

Property Owner: John & Sharon Meek Phone #: (503) 436-0391
Site Address: 80625 Hwy. 101 407630 City: Tolovana park
County: Clatsop Permit #: OS407620 Startup Date: 03/23/09
System Model #: (2) AdvanTex AX20 System Serial #: RTU125572
Service Report Year: 2012
CSL 5-18-2010 4n 10w 7cc, 400

Onsite wastewater treatment system status:

Yes No

- ☒ ☐ Was maintenance performed as required by septic system rules (OAR 340-071) and the manufacturer?
- ☒ ☐ Is the system operating in accordance with the agent-approved design specifications?
- ☒ ☐ Is the system currently under a service contract with a certified maintenance provider?

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
- ☐ ☒ Discharge of sewage to drain tiles or surface waters
- ☐ ☒ Sewage backup into plumbing fixtures
- ☐ ☒ If yes, was a repair permit obtained? If not, explain:

I certify that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Maintenance Provider Name (please print): John L. Smits, REHS

Certification #: RM20 Certification Expiration Date: 02/28/2015

Signature: John L. Smits Date: 12/19/2012

Note: Maintenance providers must maintain accurate records of their maintenance contracts, customers, performance data, and timelines for renewing the contracts. These records must be available for inspection upon request by the agent per OAR 340-071-0345(14).

46



AdvanTex® Field Maintenance Report

Semiannual Inspection

Smits & Associates, Inc.
(503) 699-2696

Property Owner/Tracking # John & Sharon Meek			Operator John A. Smits	
Site Address 80624 Hwy 101, Tolovana Park OR 97145			Contact Phone (503) 590-5805	
AX Site ID # AX-123963	County ID # OS407620	Pod # 409674 408321	RTU #/UL # RTU125572	Date of Last Inspection 05/23/2012

Retrieve O&M Info

Daily flow 29 GPD

Recirc ratio 48.7:1

Timer settings:

Timer On: 0.3" Off: 19.7"

Override On: 0.3" Off: 9.7"

Perform Field Sampling/Observations

NTU (15 ± NTUs)	pH (6-9)	DO (2-6)
2.12	7.7, 58°F	

Odor of Sample

Typical ☒ Musty ☐ Earthy ☐ Moldy

Non-typical ☐ Sulfide ☐ Cabbage ☐ Decay

Oily film in PVU ☐ Yes ☒ No

Foam in tank ☐ Yes ☒ No

Check Control Panel UV AMPS: 0.00

Recirc Amps	Discharge Amps
12.2	12.6

Audible and visual alarms ☒ OK

Dial tone (telemetry only) ☒ Yes ☐ No

Inspect/Clean Pump System

Inspect Clean

Riser/Lid ☒

Splice Box ☒

Float Cords ☒

Floats ☒

Pump ☒

Biotube® Filter ☒

Biotube Pump Vault ☒

Recirculating Splitter Valve ☒

Comments 53", 50" = 103
JET HEIGHT @ AX-20(2) = 54.58 GPM

H2O IN ALL SPLICE BOXES, NO AMPS SHOWN @ UV IN PANEL

Signature John A. Smits

Date 12/6/12

Measure Sludge/Scum

Sludge		Scum		
1st Compartment	Current	Previous	Current	Previous
SEPTIC	<1"	<1"	<1"	3"
2nd Compartment	Current	Previous	Current	Previous
PROCESS	<1"	<1"	<1"	<1"
FINAL	<1"	<1"	<1"	<1"

Inspect/Clean AdvanTex Filter

Odor: ☒ Normal ☐ Pungent
Biomat: ☐ Normal ☐ Excessive
Bridging/Ponding: ☐ None/Minor ☐ Excessive

Inspect Clean
Laterals/Orifices ☒
Pod Bottom ☒
Intake Vent ☒

Inspect/Clean Discharge Pump System

Inspect
Riser/Lid ☒
Splice Box ☒
Float cords ☒

Inspect Clean
Floats ☒
Pump ☒

Inspect/Service Other System Components

Inspect Clean
Disinfection Equipment ☒
Observations NO AMPS @ UV NO DRAINFIELD ISSUES

Additional Services Rendered

☐ Cleaned textile sheets? ☐ Replaced UV items?
☐ Replaced/Used other items?

Parts Used: W = Warranty, B = Billable (✓ appropriate selection)

W	B	Item Number	Description

Final/Safety Inspection

☒ RSV reinstalled ☒ Lids bolted on
☐ Manifold reconnected; flush valves closed ☒ Control panel reactivated

Summary/Recommendations

☐ System performing; no further action needed ☐ Tank needs pumping
☐ Call for service ☒ Other?



166 261

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AdvanTex® Field Maintenance Report**24 Month Inspection**Smits & Associates, Inc.
(503) 699-2696

Property Owner/Tracking # John & Sharon Meek			Operator John A. Smits	
Site Address 80624 Hwy 101, Tolovana Park OR 97145			Contact Phone (503) 590-5805	
AX Site ID # AX-123963	County ID # OS407620	Pod # 409674 408321	RTU #/UL # RTU121035	Date of Last Inspection 12/05/2011

Retrieve O&M InfoDaily flow 113 GPDRecirc ratio 13.5:1

Timer settings:

Timer On: 0.3' Off: 19.7'

Override On: 0.3' Off: 9.7'

Perform Field Sampling/Observations

NTU (15 ± NTUs)	pH (6-9)	DO (2-6)
<u>1.61</u>	<u>8.07, 55°F</u>	<u>7</u>

Odor of SampleTypical ☒ Musty ☐ Earthy ☐ MoldyNon-typical ☐ Sulfide ☐ Cabbage ☐ DecayOily film in PVU ☐ Yes ☒ NoFoam in tank ☐ Yes ☒ No**Check Control Panel**

Recirc Amps	Discharge Amps
<u>12.5</u>	<u>12.5</u>

Audible and visual alarms ☒ OKDial tone (telemetry only) ☒ Yes ☐ No**Inspect/Clean Pump System**

	Inspect	Clean
Riser/Lid	☒	☐
Splice Box	☒	☐
Float Cords	☒	☐
Floater	☒	☐
Pump	☒	☐
Biotube® Filter	☒	☐
Biotube Pump Vault	☒	☐
Recirculating Splitter Valve	☒	☐

Measure Sludge/Scum

	Sludge		Scum	
1st Compartment	Current	Previous	Current	Previous
<u>SEPTIC</u>	<u><1"</u>	<u><1"</u>	<u>3"</u>	<u>3"</u>
2nd Compartment	Current	Previous	Current	Previous
<u>PROCESS</u>	<u><1"</u>	<u><1"</u>	<u><1"</u>	<u><1"</u>
<u>FINAL</u>	<u><1"</u>	<u><1"</u>	<u><1"</u>	<u><1"</u>

Inspect/Clean AdvanTex Filter

	Inspect	Clean
Odor: ☒ Normal ☐ Pungent	☒	☐
Biomat: ☒ Normal ☐ Excessive	☒	☐
Bridging/Ponding: ☒ None/Minor ☐ Excessive	☒	☐
Laterals/Orifices	☒	☐
Pod Bottom	☒	☐
Intake Vent	☒	☐

Inspect/Clean Discharge Pump System

	Inspect	Clean
Riser/Lid	☒	☐
Splice Box	☒	☐
Float cords	☒	☐
Floater	☒	☐
Pump	☒	☐

Inspect/Service Other System Components

	Inspect	Clean
Disinfection Equipment	☐	☐
Dispersal Laterals/Orifices	☒	☐
Observations	<u>NO DRAINFIELD ISSUES</u>	

Additional Services Rendered

- ☐ Cleaned textile sheets? ☐ Replaced UV items?
☐ Replaced/Used other items?

Parts Used: W = Warranty, B = Billable (✓ appropriate selection)

W	B	Item Number	Description

Final/Safety Inspection

- ☒ RSV reinstalled ☒ Lids bolted on
☒ Manifold reconnected; flush valves closed ☒ Control panel reactivated

Summary/Recommendations

- ☒ System performing; no further action needed ☐ Tank needs pumping
☐ Call for service ☐ Other?

Comments SO. S NORTH 53 1/2 SOUTH. JET HEIGHT BY 1" CLEAR PVC STANDPIPE = 54.85 GPMSignature John A. SmitsDate 5/22/12

PUMP & FLOW OPERATION MONITORING
 John & Sharon Meek (Start-up ~ 5/20/10)
 79084 Cove Beach Road
 Arch Cape, OR 97102 Panel Phone: (503) 436-0734
 YEAR: 2012

DATE	Days Passed	Recirc CT	Recirc ETM	Gallons per Day	Recirc Rate	Disch CT	Disch ETM	Gallons per Day
								30-Day Ave
12/19/2012		13993	100.70			127	9.80	
Diff	30	1452	12.50	1473	39.0	15	1.00	38
11/19/2012		12541	88.20			112	8.80	
Diff	31	1432	12.50	1425	48.7	10	0.80	29
10/19/2012		11109	75.70			102	8.00	
Diff	30	1517	13.20	1555	137.1	4	0.30	11
9/19/2012		9592	62.50			98	7.70	
Diff	31	1446	12.50	1425	27.8	19	1.40	51
8/19/2012		8146	50.00			79	6.30	
Diff	31	1558	13.40	1528	38.0	13	1.10	40
7/19/2012		6588	36.60			66	5.20	
Diff	30	2015	13.30	1567	15.4	34	2.70	102
6/19/2012		4573	23.30			32	2.50	
Diff	28	1985	10.10	1275	22.5	18	1.40	57
5/22/2012		2588	13.20			14	1.10	
Diff	3	248	1.30	1531	13.5	4	0.30	113
5/19/2012		2340	11.90			10	0.80	
New VeriComm motherboard installed and new RTU number assigned.								
4/19/2012		184	0.90			0	0.00	
Diff	31	-2623	-5.70	-650	35.5	-69	-0.50	-18
3/19/2012		2807	6.60			69	0.50	
Diff	29	1191	6.10	743	38.0	6	0.50	20
2/19/2012		1616	0.50			63	0.00	
Diff	31	-2180	-18.80	-2143	32.5	-22	-1.80	-66
1/19/2012		3796	19.30			85	1.80	
Diff	31	1656	14.10	1607	27.5	19	1.60	59
12/19/2011		2140.0	5.20			66	0.20	

04/16/12 New Mother board installed.

05/22/12 Recirculation Pump Calibrated by Clear PVC Stand Pipe 50.5 & 53". Pumping Rate: 54.85 gpm = 3291 GPH

12/06/12 Recirculation Pump Calibrated by Clear PVC Stand Pipe 53 & 50". Pumping Rate: 54.58 gpm = 3274.8 GPH

12/06/12 Calibrated Final Dose Pump to Index Valve & Hydrosplitters. 14.8 gpm. 888 GPH



STATE OF OREGON
Department of Environmental Quality
Onsite Program, Water Quality Division
811 SW Sixth Avenue
Portland Oregon 97204-1390

6-5
2-28-12

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

Annual Operation and Maintenance Report Form

MAR 16 2012

NORTH COAST BRANCH OFFICE
WARRENTON

General Information

Dates of Service: 6/23/11 & 12/03/11 Time of Service: Daylight Hours
Property Owner(s): John & Sharon Meek Telephone: (503) 436-0391
Site Address: 80625 Hwy 101 City: Tolovana Park Zip: 97145
County: Clatsop System Ref #: RTU121035 Date System Constructed: 3/23/09
Company Name: Smits & Associates, Inc. Contract period from: 06/01/10 to 06/01/12
Maintenance Provider Name (please print): John L. Smits, REHS, DEQ #RM 20

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
☐ ☒ Discharge of sewage to drain tiles or surface waters
☐ ☒ Sewage backup into plumbing fixtures

Onsite wastewater treatment system status:

- ☐ Failing ☐ Maintenance Required ☐ Owner has applied for repair permit
☒ Not Failing ☒ Maintenance Performed

Maintenance: Reference relevant recommendations, corrections, replacements, and/or upgrades of the onsite wastewater treatment system for all identified components in inspection report.

Tech. on site 02/1/11 to download new program.

System operating properly following initial construction related problems.

No issues of saturation, ponding or odors noted in the drainfield area.

There have been phone line problems causing the VeriComm server to report inconsistently.

The system reports operations on the 19th of the month.

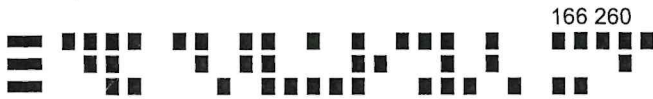
Field Maintenance Reports and limited flow values attached.

Cleaned System on 6/23/11 and 12/03/11 and also replaced the UV bulb in the final dose basin.

Individual inspections forms are required to be made available at the request of the agent.

I certify that I have performed O&M services in accordance with the requirements in OAR chapter 340, division 071, for the above reference property and that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Signature of maintenance provider (and cert. #): John L. Smits RM 20 Date: 12/30/11



166 260

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED
MAR 16 2012

AdvanTex® Field Maintenance Report

18 Month Inspection

NORTH COAST BRANCH OFFICE
WARRENTON
Smits & Associates, Inc.
(503) 699-2696

Property Owner/Tracking # John & Sharon Meek			Operator John L. Smits, REHS, RM20	
Site Address 80624 Hwy 101, Tolovana Park OR 97145			Contact Phone (503) 590-5805	
AX Site ID # AX-123963	County ID # OS407620	Pod # 409674 408321	RTU #/UL # RTU121035	Date of Last Inspection 06/24/2011

Retrieve O&M Info

Daily flow 33 GPDRecirc ratio 46.1:1

Timer settings:

OFF: 19.7' ON: 0.3'

OVR OFF 9.7' ON: 0.3'

Perform Field Sampling/Observations

NTU (15 ± NTUs)	pH (6-9)	DO (2-6)
0.90	7.73, 50°F	5

Odor of Sample

Typical ☒ Musty ☐ Earthy ☐ MoldyNon-typical ☐ Sulfide ☐ Cabbage ☐ DecayOily film in PVU ☐ Yes ☒ NoFoam in tank ☐ Yes ☒ No

Check Control Panel

Recirc Amps	Discharge Amps
12.4	12.6

Audible and visual alarms ☒ OKDial tone (telemetry only) ☒ Yes ☐ No

Inspect/Clean Pump System

	Inspect	Clean
Riser/Lid	☒	☐
Splice Box	☒	☐
Float Cords	☒	☐
Floats	☒	☐
Pump	☒	☐
Biotube® Filter	☒	☐
Biotube Pump Vault	☒	☐
Recirculating Splitter Valve	☒	☒

Measure Sludge/Scum

	Sludge		Scum	
1st Compartment	Current	Previous	Current	Previous
SEPTIC	<1"	3	3"	3
2nd Compartment	Current	Previous	Current	Previous
PROLESS	<1"	<1"	<1"	<1"
FINAL	<1"	<1"	<1"	<1"

Inspect/Clean AdvanTex Filter

Odor:	☒ Normal ☐ Pungent	Inspect	Clean
Biomat:	☒ Normal ☐ Excessive	Laterals/Orifices	☐ ☐
Bridging/Ponding:	☒ None/Minor ☐ Excessive	Pod Bottom	☐ ☐
		Intake Vent	☐ ☐

Inspect/Clean Discharge Pump System

	Inspect		Inspect	Clean
Riser/Lid	☒	Floats	☒	☐
Splice Box	☒	Pump	☒	☐
Float cords	☒			

Inspect/Service Other System Components

	Inspect	Clean		Inspect	Clean
Disinfection Equipment	☐	☐	Dispersal Laterals/Orifices	☒	☐
Observations					

Additional Services Rendered

- ☐ Cleaned textile sheets? ☒ Replaced UV items?
- ☐ Replaced/Used other items?

Parts Used: W = Warranty, B = Billable (✓ appropriate selection)

W	B	Item Number	Description
	☒	UV 0714	UV BULB

Final/Safety Inspection

- ☒ RSV reinstalled ☒ Lids bolted on
- ☒ Manifold reconnected; flush valves closed ☐ Control panel reactivated

Summary/Recommendations

- ☒ System performing; no further action needed ☐ Tank needs pumping
- ☐ Call for service ☐ Other?

Comments 53" JET HEIGHT BY 1" CLEAR PVC STAND PIPE = 27.6 GPMSignature John A. SittDate 12/3/11



166 259

DEPT. OF ENVIRONMENTAL QUALITY

RECEIVED

MAR 16 2012

AdvanTex® Field Maintenance Report

12 Month Inspection

NORTH COAST BRANCH OFFICE
WARRENTON
Smits & Associates, Inc.
(503) 699-2696

Property Owner/Tracking # John & Sharon Meek			Operator SMITS & ASSOCIATES, INC.	
Site Address 80624 Hwy 101, Tolovana Park OR 97145			Contact Phone (503) 590-5805	
AX Site ID # AX-123963	County ID # OS407620	Pod # 409674 408321	RTU #/UL # RTU121035	Date of Last Inspection 12/10/2010

Retrieve O&M Info

Daily flow 49 GPD
Recirc ratio 26.3:1
Timer settings:
Off: 19.7' On: 0.3'
Ovr Off: 9.7' On: 0.3'

Perform Field Sampling/Observations

NTU (15 ± NTUs) BASIN UV 1.22 / 0.81	pH (6-9) 7.81, 6.3F	DO (2-6) 5
--	------------------------	---------------

Odor of Sample

Typical ☒ Musty ☐ Earthy ☐ Moldy
Non-typical ☐ Sulfide ☐ Cabbage ☐ Decay
Oily film in PVU ☐ Yes ☒ No
Foam in tank ☐ Yes ☒ No

Check Control Panel

Recirc Amps 12.6	Discharge Amps 12.5
---------------------	------------------------

Audible and visual alarms ☒ OK
Dial tone (telemetry only) ☒ Yes ☐ No

Inspect/Clean Pump System

	Inspect	Clean
Riser/Lid	☒	☒
Splice Box	☒	☒
Float Cords	☒	☒
Floats	☒	☒
Pump	☒	☒
Biotube® Filter	☒	☒
Biotube Pump Vault	☒	☐
Recirculating Splitter Valve	☒	☒

Measure Sludge/Scum

Sludge			Scum	
1st Compartment 1500 SEPTIC	Current 3"	Previous 2"	Current QRSV 4"	Previous 1"
2nd Compartment 1500 PROCESS	Current 41"	Previous 41"	Current 41"	Previous 41"
PUMP BASIN	41"	41"	41"	41"

Inspect/Clean AdvanTex Filter

Odor:	☒ Normal ☐ Pungent	Laterals/Orifices	☒ Inspect ☐ Clean
Biomat:	☒ Normal ☐ Excessive	Pod Bottom	☒ Inspect ☐ Clean
Bridging/Ponding:	☒ None/Minor ☐ Excessive	Intake Vent	☒ Inspect ☐ Clean

Inspect/Clean Discharge Pump System

	Inspect		Inspect	Clean
Riser/Lid	☒	Floats	☒	☐
Splice Box	☒	Pump	☒	☐
Float cords	☒			

Inspect/Service Other System Components

	Inspect	Clean		Inspect	Clean
Disinfection Equipment	☒	☒	Dispersal Laterals/Orifices	☐	☐
Observations					

Additional Services Rendered

☐ Cleaned textile sheets? ☐ Replaced UV items?
☐ Replaced/Used other items?

Parts Used: W = Warranty, B = Billable (✓ appropriate selection)

W	B	Item Number	Description

Final/Safety Inspection

☒ RSV reinstalled ☐ Lids bolted on
☒ Manifold reconnected; flush valves closed ☒ Control panel reactivated

Summary/Recommendations

☒ System performing; no further action needed ☐ Tank needs pumping
☐ Call for service ☐ Other?

Comments 56" JET HEIGHT BY 1" CLEAR PVC STAND PIPE = 56.9 gpm

Signature

John A. SmitsDate 6/23/11



STATE OF OREGON
Department of Environmental Quality
Onsite Program, Water Quality Division
811 SW Sixth Avenue
Portland Oregon 97204-1390

Annual Operation and Maintenance Report Form

DEQ
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410-700-400

General Information

Dates of Service: 05/07/10 & 12/9/10 Time of Service: Daylight Hours
Property Owner(s): John & Sharon Meek Telephone: (503) 436-0391
Site Address: 80625 Hwy 101 City: Tolovana Park Zip: 97145
County: Clatsop System Ref #: RTU121035 Date System Constructed: 3/23/09
Company Name: Smits & Associates, Inc. Contract period from: 06/01/10 to 06/01/12
Maintenance Provider Name (please print): John L. Smits, REHS, DEQ #RM 20

Is the system failing?

- | | | |
|--------------------------|-------------------------------------|--|
| Yes | No | |
| ☐ | ☒ | Discharge of sewage to the ground surface |
| ☐ | ☒ | Discharge of sewage to drain tiles or surface waters |
| ☐ | ☒ | Sewage backup into plumbing fixtures |

Onsite wastewater treatment system status:

- | | | |
|---|---|--|
| ☐ Failing | ☐ Maintenance Required | ☐ Owner has applied for repair permit |
| ☒ Not Failing | ☒ Maintenance Performed | |

Maintenance: Reference relevant recommendations, corrections, replacements, and/or upgrades of the onsite wastewater treatment system for all identified components in inspection report.

System operating properly following initial construction related problems.
No issues of saturation, ponding or odors noted in the drainfield area.
There have been phone line problems causing the VeriComm server to report inconsistently.
The system reports operations on the 19th of the month. No call to the server since 11/19/10.
Field Maintenance Reports and limited flow values attached.

Individual inspections forms are required to be made available at the request of the agent.

I certify that I have performed O&M services in accordance with the requirements in OAR chapter 340, division 071, for the above reference property and that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

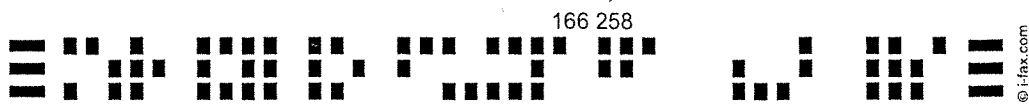
Signature of maintenance provider (and cert. #): John L. Smits DEQ #RM 20 Date: 01/11/11

[illegible]

5/31/10 to 10/31/10 system off line during corrections to construction.

05/07/10 Calibrated final dose pump to index valve & hydrosplitters. 18.9 gpm. 1134 GPH

05/07/10 recirculation pump calibrated by clear PVC stand Pipe 59 & 61". Pumping rate: 58.9 GPM = 3534 GPH



AdvanTex® Field Maintenance Report

6 Month Inspection

Smits & Associates, Inc.
(503) 699-2696

Property Owner/Tracking # John & Sharon Meek		Operator John L. Smits, REHS & DEQ RM20		
Site Address 80624 Hwy 101, Tolovana Park OR 97145				Contact Phone (503) 590-5805
AX Site ID # AX-123963	County ID # OS407620	Pod # 409674 408321	RTU #/UL # RTU121035	Date of Last Inspection 05/17/2010

Retrieve O&M Info

Daily flow 42900
Recirc ratio 30:1
Timer settings:
OFF: 19.7' ON: 0.3'
ON: 0.7' ON: 0.3'

Perform Field Sampling/Observations

NTU (15 ± NTUs)	pH (6-9)	DO (2-6)
1.04 .85	—	4

Odor of Sample

Typical ☒ Musty ☐ Earthy ☐ Moldy
Non-typical ☐ Sulfide ☐ Cabbage ☐ Decay
Oily film in PVU ☐ Yes ☒ No
Foam in tank ☐ Yes ☒ No

Check Control Panel

Recirc Amps	Discharge Amps
12.3	12.4

Audible and visual alarms ☒ OK
Dial tone (telemetry only) ☐ Yes ☒ No

Inspect/Clean Pump System

	Inspect	Clean
Riser/Lid	☒	☐
Splice Box	☒	☐
Float Cords	☒	☐
Floater	☒	☐
Pump	☒	☐
Biotube® Filter	☒	☐
Biotube Pump Vault	☒	☐
Recirculating Splitter Valve	☒	☐

Measure Sludge/Scum FIRST CHECK

	Sludge	NEW	Scum	
1st Compartment	Current	Previous	Current	Previous
1500 Septic	2"	—	<1"	—
2nd Compartment	Current	Previous	Current	Previous
1500 Process	<1"	—	<1"	—

PUMP BASIN
Inspect/Clean AdvanTex Filter

Odor:	☒ Normal ☐ Pungent	Inspect	Clean
Biomat:	☒ Normal ☐ Excessive	Laterals/Orifices	☒ ☐
Bridging/Ponding:	☐ None/Minor ☐ Excessive	Pod Bottom	☒ ☐
		Intake Vent	☒ ☐

Inspect/Clean Discharge Pump System

Inspect	Inspect	Clean	
Riser/Lid	☒	Floater	☒ ☐
Splice Box	☒	Pump	☒ ☐
Float cords	☒		

Inspect/Service Other System Components

Inspect	Clean	Inspect	Clean
Disinfection Equipment	☒ ☐	Dispersal Laterals/Orifices	☒ ☐
Observations	NO ISSUES AT DRAINFIELD		

Additional Services Rendered

☐ Cleaned textile sheets? ☐ Replaced UV items?
☐ Replaced/Used other items?

Parts Used: W = Warranty, B = Billable (✓ appropriate selection)

W	B	Item Number	Description

Final/Safety Inspection

☒ RSV reinstalled ☐ Lids bolted on
☐ Manifold reconnected; flush valves closed ☒ Control panel reactivated

Summary/Recommendations

☒ System performing; no further action needed ☐ Tank needs pumping
☐ Call for service ☐ Other?

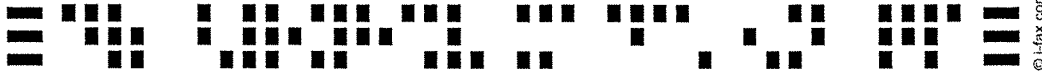
Comments

Signature

John A. Sils

Date

12.7.10



AdvanTex® Field Maintenance Report **Start-Up Summary Report**

Smits & Associates, Inc.
(503) 699-2696

Property Owner/Tracking # John & Sharon Meek		Operator John L. Smits, REHS, RM20		Installed Date 03/29/2010	
Site Address 80624 Hwy 101, Tolovana Park OR 97145					Start-Up Date 05/07/2010
Phone Number (503) 590-5805	Permit # OS407620	Mode Mode 3B	Bedrooms 4	Occupants 2nd Home	Occupancy Date 06/01/2010
Designer/Engineer Smits & Associates, inc.		Phone (503) 699-2696	Authorized Installer Bob McEwan Construction		Phone (503) 738-3569
AdvanTex Dealer HD Fowler Co		Phone (425) 746-8400	Electrician Quadrant Systems		Phone

Primary Treatment

If using a single Processing Tank, complete the following:

☐ Processing Tank

Septic Volume (_____ gal.) Recirc Volume (_____ gal.)

Construction ☐ Concrete ☐ Fiberglass ☐ Other

Manufacturer: _____

If using a separate Septic Tank and Recirc Tank, complete the following:

☒ Septic Tank (1500 gal.)

Construction ☐ Concrete ☒ Fiberglass ☐ Other

Manufacturer: ORENCO

☒ Recirc Tank (1500 gal.)

Construction ☐ Concrete ☒ Fiberglass ☐ Other

Manufacturer: ORENCO

☒ Pump Model: PF500511 [928-5005; 09K22]

☒ Floats set properly at 11 -in. 13 -in. 26 -in.

DYNAMIC Pump AMPS: 12.8 - 122 VAC

Secondary Treatment

☒ RSV setting: 15 -in.

☒ Residual head measurement: = 58.9 gpm

Pod #1 59 -in. Pod #2 61 -in. Pod #3 _____ -in.

☒ Discharge Tank/Basin (248 gal.) 84" x 30"

Construction ☐ Concrete ☐ Fiberglass ☒ PVC (Basin)

Manufacturer: ORENCO

☒ Pump Model: PF100511 [9285-1005; 07M22]

TO BE RESET NOW: FROM RIM

☒ Floats set properly at 46.5 -in. 48.5 -in. 60 -in.

DYN. AMPS: 12.8 @ 122 VAC

☒ Discharge pump flow rate (drawdown test): (18.9 gpm)

☒ Discharge pump dose volume: (34 gal./dose)

Control Panel

Panel ID (RTU or UL #) RTU121035	"On" Timer Setting 0.3	"Off" Timer Setting 19.7
-------------------------------------	---------------------------	-----------------------------

Filter Pods

Pod #1 Serial No. 408321	Pod #2 Serial No. 409674	Pod #3 Serial No.
-----------------------------	-----------------------------	-------------------

Other System Components

☒ Disinfection equipment (manufacturer):

SALCOR THRU ORENCO @ 0.31 Amps

☒ INSPECTED By Schrandt on 9/20/09

☒ Dispersal system (type of):

INDEX VALVE & 2 Hydrusplitters
TO 2-150' REDUNDANT CELLS of TRENDS

Declarations (Initial)

☒ Orenco's Start-Up Procedure was followed.

☒ All lids are secured.

☒ Circuit breakers are on and control panel is latched.

☒ "For Service Call" label with phone # was affixed to panel.

Homeowner Package was reviewed with:

☐ Builder on (date) _____

☐ Resident on (date) TO come with walk thru

The system is ready for use ☒ Yes ☐ No (explain)

* Home not yet occupied. Owner needs
to turn on Orenco Vericom Control
Panel Breakers when begin
occupancy.

Comments INSTALLER TO RAISE INLET TO Final Pump Basin & Extend RSV
stringer to seat BALL FLOAT 15" below tank top.

Signature John L. Smits REHS, Service No. RM 20 Date 5/7/10

Fax completed form to 1-866-384-7404

410-7cc-400

639
2-9-11
DEQ



STATE OF OREGON
Department of Environmental Quality
Onsite Program, Water Quality Division
811 SW Sixth Avenue
Portland Oregon 97204-1390

Annual Operation and Maintenance Report Form

DEPT. OF ENVIRONMENTAL QUALITY
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General Information

Dates of Service: 05/07/10 & 12/9/10 Time of Service: Daylight Hours
Property Owner(s): John & Sharon Meek Telephone: (503) 436-0391
Site Address: 80625 Hwy 101 City: Tolovana Park Zip: 97145
County: Clatsop System Ref #: RTU121035 Date System Constructed: 3/23/09
Company Name: Smits & Associates, Inc. Contract period from: 06/01/10 to 06/01/12
Maintenance Provider Name (please print): John L. Smits, REHS, DEQ #RM 20

Is the system failing?

Yes No

- ☐ ☒ Discharge of sewage to the ground surface
☐ ☒ Discharge of sewage to drain tiles or surface waters
☐ ☒ Sewage backup into plumbing fixtures

REC 145033
FOR DEQ USE ONLY
DATE REC'D JAN 18 2011
AMT. REC'D \$600/2400
CHECK # 2868-4

Onsite wastewater treatment system status:

- ☐ Failing ☐ Maintenance Required ☐ Owner has applied for repair permit
☒ Not Failing ☒ Maintenance Performed

Maintenance: Reference relevant recommendations, corrections, replacements, and/or upgrades of the onsite wastewater treatment system for all identified components in inspection report.

System operating properly following initial construction related problems.
No issues of saturation, ponding or odors noted in the drainfield area.
There have been phone line problems causing the VeriComm server to report inconsistently.
The system reports operations on the 19th of the month. No call to the server since 11/19/10.
Field Maintenance Reports and limited flow values attached.

Individual inspections forms are required to be made available at the request of the agent.

I certify that I have performed O&M services in accordance with the requirements in OAR chapter 340, division 071, for the above reference property and that this report is complete and accurate to the best of my knowledge. I understand that falsification of this report is grounds for revocation of my certification and/or civil penalties.

Signature of maintenance provider (and cert. #): John L. Smits DEQ #RM 20 Date: 01/11/11



AdvanTex® Field Maintenance Report

Start-Up Summary Report

Smiths & Associates, Inc.
(503) 699-2696

Property Owner/Tracking # John & Sharon Meek		Operator John L. Smiths, REHS, RM20		Installed Date 03/29/2010	
Site Address 80624 Hwy 101, Tolovana Park OR 97145					Start-Up Date 05/07/2010
Phone Number (503) 590-5805	Permit # OS407620	Mode Mode 3B	Bedrooms 4	Occupants 2nd Home	Occupancy Date 06/01/2010
Designer/Engineer Smiths & Associates, Inc.		Phone (503) 699-2696	Authorized Installer Bob McEwan Construction		Phone (503) 738-3569
AdvanTex Dealer HD Fowler Co		Phone (425) 746-8400	Electrician Quadrant Systems		Phone

Primary Treatment

If using a single Processing Tank, complete the following:

☐ Processing Tank

Septic Volume (_____ gal.) Recirc Volume (_____ gal.)

Construction ☐ Concrete ☐ Fiberglass ☐ Other

Manufacturer: _____

If using a separate Septic Tank and Recirc Tank, complete the following:

☒ Septic Tank (1500 gal.)

Construction ☐ Concrete ☒ Fiberglass ☐ Other

Manufacturer: ORENCO

☒ Recirc Tank (1500 gal.)

Construction ☐ Concrete ☒ Fiberglass ☐ Other

Manufacturer: ORENCO

☒ Pump Model: PF500511 [928-5005; 09K22]

☒ Floats set properly at 11 -in. 13 -in. 26 -in.
DYNAMIC PUMP AMPS: 12.8 - 122VAC

Secondary Treatment

☒ RSV setting: 15 -in.

☒ Residual head measurement: = 58.9 gpm

Pod #1 59 -in. Pod #2 61 -in. Pod #3 _____ -in.

☒ Discharge Tank/Basin (248 gal.) 84"x30"

Construction ☐ Concrete ☐ Fiberglass ☒ PVC (Basin)

Manufacturer: ORENCO

☒ Pump Model: PF100511 [9285-1005; 07M22]

TO BE RESET NOW: FROM RIM

☒ Floats set properly at 46.5 -in. 48.5 -in. 60 -in.

DYN. AMPS: 12.8 @ 122VAC

☒ Discharge pump flow rate (drawdown test): (18.9 gpm)

☒ Discharge pump dose volume: (34 gal./dose)

Control Panel

Panel ID (RTU or UL #) RTU121035	"On" Timer Setting 0.3	"Off" Timer Setting 19.7
-------------------------------------	---------------------------	-----------------------------

Filter Pods

Pod #1 Serial No. 408321	Pod #2 Serial No. 409674	Pod #3 Serial No.
-----------------------------	-----------------------------	-------------------

Other System Components

☒ Disinfection equipment (manufacturer):

SALCOR THRU ORENCO @ 0.31 AMPS

INSPECTED BY Schreidt on 9/20/09

☒ Dispersal system (type of):

INDEX VALVE & 2 Hydrosplitters
TO 2-150' REDUNDANT CELLS OF TRENDS

Declarations (Initial)

☒ Orenco's Start-Up Procedure was followed.

☒ All lids are secured.

☒ Circuit breakers are on and control panel is latched.

☒ "For Service Call" label with phone # was affixed to panel.

Homeowner Package was reviewed with:

☐ Builder on (date) _____

☐ Resident on (date) TO come with walk thru

The system is ready for use ☒ Yes ☐ No (explain)

* Home not yet occupied. Owner needs

to turn on Orenco Vericom Control

Panel Breakers when begin
occupancy.

Comments INSTALLER TO RAISE INLET TO Final Pump BASIN & Extend RSV
stringer to seat BALL FLOAT 15" below tank top.

Signature John L. Smiths REHS Service No. RM20 Date 5/7/10

Fax completed form to 1-866-384-7404

Certificate of Satisfactory Completion

Scan ID
408589

Installation of this onsite wastewater treatment system has been determined to comply with the applicable requirements in Oregon Administrative Rules Chapter 340, Divisions 071 and 073 and the conditions of Permit OS407630 as follows:

PROPERTY INFORMATION

Property Owner: John Meek And Sharon Meek Township 04N, Range 10W, Section 07 CC
Property Location: 80624 Hwy. 101, Tolovana Park Tax Lot 400
Facility Type: Single Family Dwelling Clatsop County
4 Bedrooms

SPECIFICATIONS AND REQUIREMENTS

System type: Alternative Treatment Technology

Design Flow:	450 gals/day	Drain Media Total Depth:	12 inches
Minimum Septic Tank Size:	1500 gals	Drain Media Below Pipe:	6 inches
Minimum Dosing Tank Size:	500 gals	Drain Media Above Pipe:	4 inches
Distribution Type:	Equal		
Total Trench Length:	150 Linear feet		
Trench Spacing:	6 feet*		
Media Type:	Unknown		
Maximum Trench Depth:	22 inches		
Minimum Trench Depth:	18 inches		

*Minimum undisturbed soil between trenches

ADDITIONAL CONDITIONS

- 1 In accordance with Oregon Revised Statute 454.665, this Certificate of Satisfactory Completion is issued as evidence of satisfactory completion of an onsite wastewater treatment system at the location identified above.
- 2 Issuance of this Certificate does not constitute a warranty or guarantee that this onsite wastewater treatment system will function indefinitely without failure. Conditions imposed as permit requirements continue for the life of the system.
- 3 The area of the initial and the identified replacement area must not be subjected to activity that is likely to adversely affect the soil or the functioning of the system. Such activities may include, but are not limited to, vehicular traffic, livestock, covering the area with asphalt or concrete, filling, cutting, or other soil modification activities.
- 4 This onsite wastewater treatment system must be connected to the facility referenced herein within 5 years of the issuance of this Certificate of Satisfactory Completion (CSC) or rules for authorization notices, alteration permits, or construction-installation permits as outlined in OAR 340-071-0160, 340-071-0205, or 340-071-0210 apply, including payment of an additional fee.

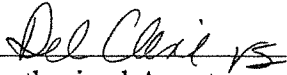
SCANNED
SEP 01 2010

5 This system must operate in compliance with OAR Chapter 340, Division 071 and must not create a public health hazard or pollute public waters.

6 Unless otherwise required by the agent, the system installer must backfill (cover) this system within 10 days after the issuance of this Certificate of Satisfactory Completion.

Installer Name: Bob McEwan Construction, Inc.

To be valid, this document must be signed by an "Agent" as defined in OAR 340-071-0100.

	Onsite Wastewater Specialist	5/18/2010
Authorized Agent:	Title	Date CSC Issued
Del Cline		

Department of Environmental Quality
Northwest Region - Warrenton Office
65 N Highway 101, Suite G
Warrenton, OR 97146
Phone: (503) 861-3280 X25
Fax: (503) 861-3259

For Official Use Only/Date Received.

Final Inspection Request and Notice - Onsite ID: 407630

Pursuant to the requirements within ORS 454.665, OAR 340-071-0170 and OAR 340-071-0175, the system installer and/or the permittee must notify the Department of Environmental Quality (or its authorized Agent) when the construction, alteration or repair of a system for which a permit was issued is completed and prior to backfilling or covering the installation. The Department (or Agent) has 7 days to perform an inspection of the completed construction/installation following the official notice date, unless the Department (or Agent) elects to waive the inspection and authorizes the system to be backfilled. Receipt and acceptance of this completed form by the Department (or Agent) establishes the official notice date of your request for the pre-cover inspection. Faxed copies are acceptable for inspection request purposes only. Originals must be received before a Certificate of Satisfactory Completion is issued. Please complete sections 1 through 4 on the form and return it to the office that issued the permit. Forms that are determined to be incomplete will be returned.

SECTION 1: Owner/Permittee Information:

Name: John Meek And Sharon Meek
Property 80624 Hwy. 101, Tolovana Park
Address:

Township 04N, Range 10W, Section 07 CC
Clatsop County TaxLot#: Tax Lot 400

SECTION 2: System Component Specifications:

System Type: Alternative Treatment Technology				Water tight verification*
A. Tanks/Pumps				
Tanks(1)	Volume: 1000	Compartments: 1	Manufacturer: ORENKO	Date: 3/4/13/10
Tanks(2)	Volume: 1000	Compartments: 1	Manufacturer: ORENKO	Date: 4/14/10
Pump(s)	HP: 1/2	Model/Manuf.: OSI 50 TO ATT	Float(s)Type(1): "A"	Model/Manuf.: ORENKO (3 EN)
			Float(s)Type(2):	Model/Manuf.:

B. Piping		PUMP		Discharge OSI 10	
Effluent Sewer (tank to drainfield)	Yes ☒ No ☒	Diameter: 1 1/2	ASTM#/Other: 2241	Length: 110'	
Pressure Transport Pipe	Yes ☒ No ☐	Diameter: 1 1/2	ASTM#/Other: 2241	Length: 110'	

C. Secondary Treatment Unit:

Sand Filter**	Yes ☐ No ☒	Type:	Container Dimensions:
Underdrain pipe	Diameter:	ASTM#/Other:	Length:
Manifold piping	Diameter:	ASTM#/Other:	Length:
Internal Pump	HP:	Model/Manufacturer:	
Floats(1)	Type:	Model/Manufacturer:	
Floats(2)	Type:	Model/Manufacturer:	
ATT	Yes ☒ No ☐	Model: AX 20N	
Certified Maint.	Provider Name: JOHN SMITS		
Operation and Maint.	Contract Received? Yes ☐ No ☐		

D. Drainfield Media

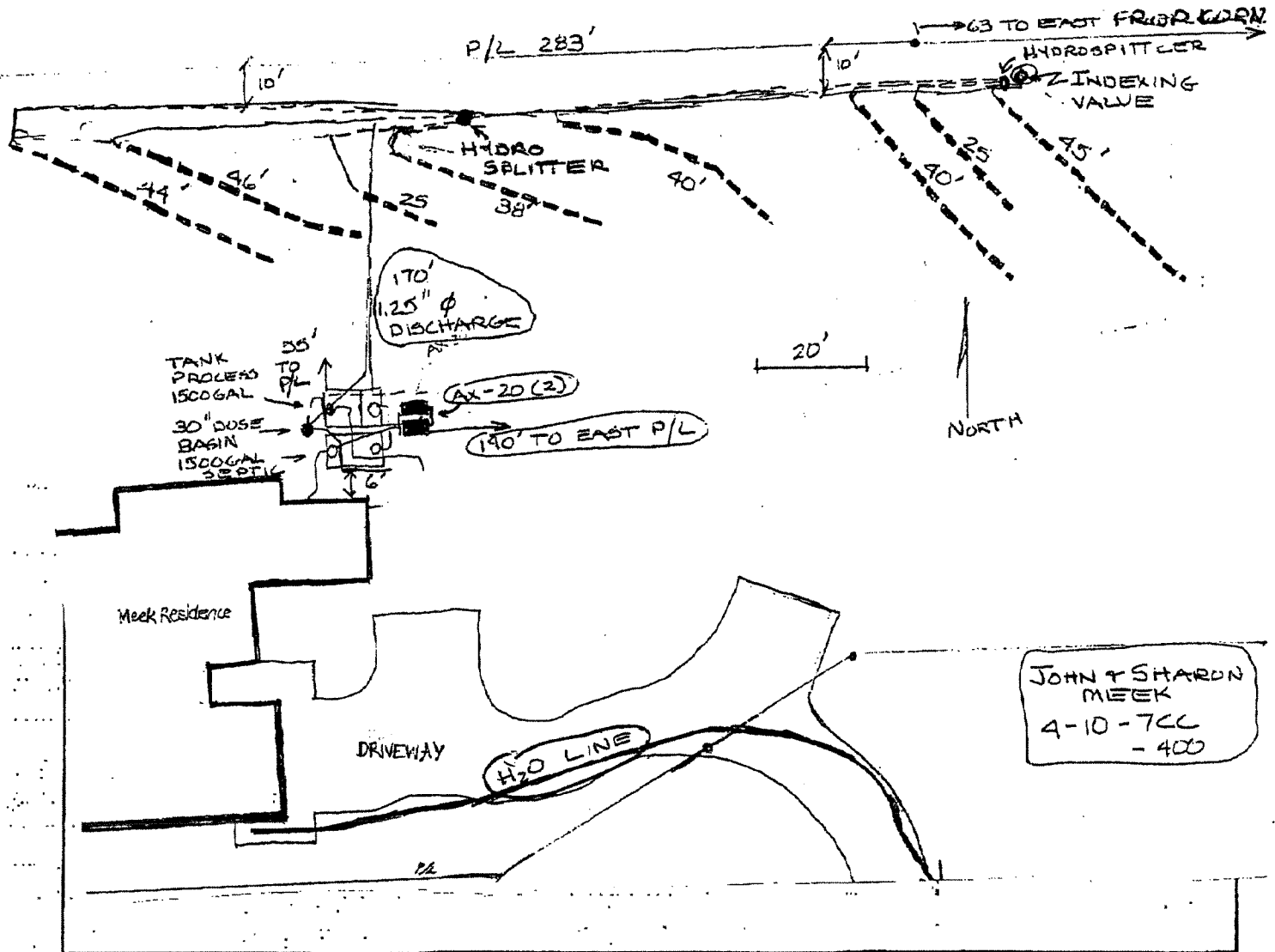
Type	(Gravel, Pipe or alternative?)	EZ-DRAIN
Distribution Box	Yes ☐ No ☒	
Drop Box	Yes ☐ No ☒	
Distribution Pipe	Yes ☐ No ☒	Diameter: ASTM#/Other: Length:

Comment: SEE DESIGNER DRAWING

*All Tanks(s) were tested for water-tightness after installation and passed in accordance with OAR 340-073-0025(3)
**Attach sieve analysis for Underdrain Media and Filter Sand

SECTION 3 - As Built Plan:

AS-BUILT PLAN OF THE CONSTRUCTED SYSTEM. Indicate the direction of NORTH. Show locations of all wells within 200 feet of the system. Show system setback distances from property lines, structures, wells, streams, etc.



SECTION 4 - Construction was performed by (Signature Required)

I certify that the information provided on both pages of this document is correct and that the construction of this system was in accordance with the permit and the rules regulating the construction of onsite wastewater treatment systems (OAR Chapter 340, Divisions 71 and 73).

Owner/Permittee or Certified Installer w/Certification#:		Print Name: MIKE MCEWAN	
Licensed Installer:	Yes ☒ No ☐	License#: 37079	Certification#: R1 83
Owner/Certified Installer:	Signature: Mike McEwan	Date: 5/17/10	Phone#: 503-440-0233

SECTION 5 - Office Use Only:

Notice Accepted	Yes ☐ No ☐	Date:	Installer/Owner (Permittee) Notified:	Yes ☐ No ☐	Date:
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If No, Reason for Non Acceptance: _____

Comment: _____

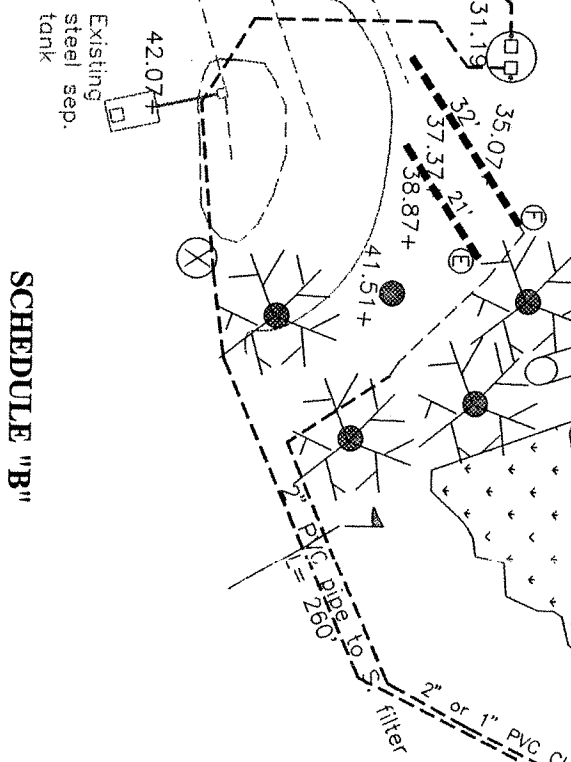
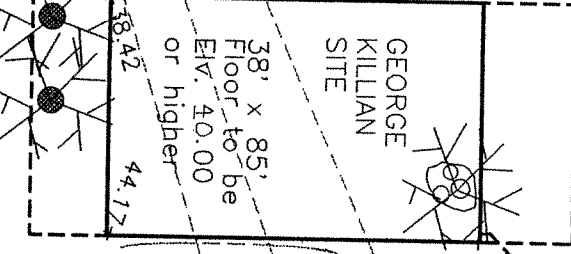
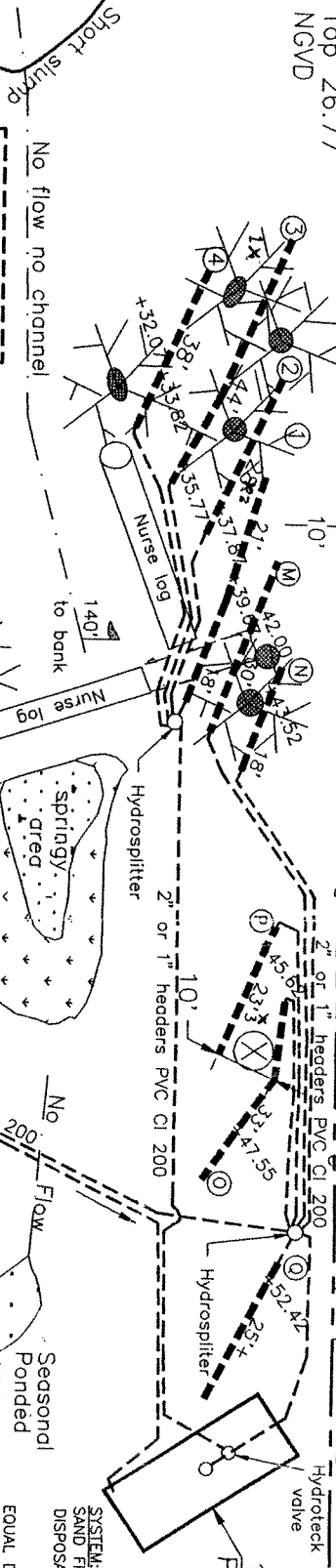
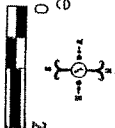
End IR
Top 26.77
NGVD

Property Line

265.00' WEST

IR w/cap +50.52

10' x 30' CSF
Possible SF site



SYSTEM FOR THE NORTH PARCEL
SAND FILTER: 360 sq. ft. (12 x 30)
DISPOSAL TRENCHES: 300 ft. Total
150 ft. auto
alternates to 2nd 150 ft.

EQUAL DISTRIBUTION
TRENCH DEPTH: 18" Min./Max.
TRENCH ELEVATION: INDICATED
SYSTEM NO. 1
SYSTEM NO. 2

ELEVATION KEY:
TOP SAND FILTER "BOX": Approx. 54.50
TOP SAND FILTER LATERALS: Not > 54.50
SAND FILTER BOX ABOVE GRND SURFACE
CONTRACTOR TO SELECT ELEV. WITH
LINER "BOX" TOP MIN. 6" HIGHER
THAN HIGHEST OF 4 CORNERS.

SAND FILTER CENTER PUMP BASE: 49.00
DOSING SEPTIC TANK: 1,100 GAL. TOTAL
TANK TOP: 29.50
TANK INLET INVERT: 28.50
PUMP BASE: 24.50

SCHEDULE "B"

VARIANCE REQUEST
GEORGE KILLIAN
TOWNSHIP 4 NORTH, RANGE 10 WEST,
SECTION 7CD,
NORTH PART OF TAX LOT 800,
CLATSOP COUNTY

JUNE 15, 1995

- ⊕ 1,100 gal. precast conc. dosing septic tank Michaels or equal.
- ⊗ TREE, typically large spruce +100.78 Ground spot elev. point
- ⊗ 1989 Hopkins/Paeth soil test pits
- ⊗ 1984 Dewey Darold soil pits

G. S. D. PROPERTIES
T.4N., R.10W., SEC. 7CD, North Part
TAX LOT 800
1.93 ACRES
CLATSOP COUNTY

Smits & Associates, Inc.
Environmental Consultants • Designers
14687 S.E. Kingston Ave.
Milwaukie, Oregon 97267-1943
Ph. (503) 659-5623

DATE: March 20, 1995 SHEET No. _____ OF _____

(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 18222

START CARD # 201320

(1) LAND OWNER		Owner Well I.D. _____
First Name <u>Tom</u>	Last Name <u>Stern</u>	
Company <u>C/O Pacific NW Properties</u>		
Address <u>6600 SW 105th Ave., Suite 175</u>		
City <u>Beaverton</u>	State <u>OR</u>	Zip <u>97008</u>

(2) TYPE OF WORK ☐ New Well ☐ Deepening ☐ Conversion
☐ Alteration (repair/recondition) ☒ Abandonment

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other

(4) **PROPOSED USE** ☒ Domestic ☐ Irrigation ☐ Community
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION Special Standard ☐ (Attach copy)
Depth of Completed Well 0 ft.

[illegible]

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Pumped into well bore
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: ☐ Yes Type _____ Amount _____

(6) CASING/LINER		Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Casing	Liner	6		0	80	250	☒	☐	☒	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐
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☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____
Temp casing ☐ Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS			
Perforations	Method	Drive Down	
Screens	Type	Material	Steel

[illegible]

(8) WELL TESTS: Minimum testing time is 1 hour

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian
 Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Temperature _____ °F Lab analysis ☐ Yes By _____
Water quality concerns? ☐ Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County CLATSOP Twp 4 N N/S Range 10 W E/W WM
Sec 7 SW 1/4 of the SW 1/4 Tax Lot 802
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
☒ Street address of well ☐ Nearest address

(10) STATIC WATER LEVEL		Date	SWL(psi)	+	SWL(ft)
Existing Well / Prodeepening	05-07-2009				47
Completed Well					
Flowing Artesian?		Dry Hole?			

[illegible][illegible]

Date Started 05-07-2009 Completed 05-07-2009

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number 1492 Date 05-12-2009
 Password : (if filing electronically) _____
 Signed Mie Brash

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1266 Date 05-12-2009
Password : (if filing electronically)
Signed _____
Contact Info (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK.

Form Version: 0.88

2-Year AX20N Service Contract

For the State of Oregon

Parties:

(Authorized AdvanTex® Service Provider)

NAME	Smits & Associates, Inc.
ADDRESS	16878 SW Gassner Lane
CITY, STATE, ZIP CODE	Lake Oswego, OR 97035
TELEPHONE	(503) 699-2696 Cell: (503) 804-0056
E-MAIL	jlsmits@aol.com

And:

(Customer)

NAME	John & Sharon Meek
ADDRESS	17855 SW Skyline Woods Lane
CITY, STATE, ZIP CODE	Beaverton, OR 97007-8577
TELEPHONE	503-590-5805
E-MAIL	sharon-meek@comcast.net

System Location:

ADDRESS	80624 Hwy. 101
CITY, STATE, ZIP CODE	Tolovana Park, OR 97145
LEGAL DESCRIPTION	T.4N.,R. 10W.,Sec.7CC Tax Lot 400

Agency Contact Information:

AGENCY	DEQ
ADDRESS	65 North Hwy. 101 Suite G
CITY, STATE, ZIP CODE	Warrenton, OR 97146
TELEPHONE	(503) 861-3280
E-MAIL	schrandt.connie@deq.state.or.us

Date:

May 11, 2009

NOW, THEREFORE, in consideration of the terms, provisions, covenants and conditions contained herein, the Parties hereto agree as follows:

MAY 11 2009

NORTH COAST BRANCH OFFICE
WARRANTS

1.0 Performance of Basic Services

The Authorized AdvanTex Service Provider, shall perform the System Inspection/Service Visits during the 24-month period after installation, as marked:

Inspection/Service Visits ¹	3-6 months	X
	6-12 months	X
	12-18 months	X
	18-24 months	X
Alarm Response	See Optional Services Sch. A	
Other Services ²	System Monitoring	X
	Reporting	X

¹As required by NSF, these services will be included as part of the initial purchase of the system.

²These services may be paid for during purchase or at a later date, when the work is performed.

These services shall be performed during normal business hours Monday through Friday (excluding national holidays) on a pre-scheduled basis and as the Authorized AdvanTex[®] Service Provider deems necessary or advisable.

At each service visit the System shall be inspected and serviced in accordance with the instructions in the Systems O&M Manual. Additionally, an effluent quality inspection consisting of a visual assessment of color, turbidity, and scum overflow and an olfactory assessment for odor shall be performed.

The Service Provider will affix a "For Service, Call _____" label near the control panel's alarm signal and fill in his or her phone number.

Performance of the 2-year Inspection/Service visits shall include notification of needed repair, replacement or addition of parts used in the system.

The Service Provider shall provide emergency service within 48 hours of a service request.

The Service Provider shall be responsible for submitting the annual report and annual evaluation fee to the appropriate regulatory agency as required in OAR-071-0345.

The Service Provider shall notify the owner in writing if any improper system operation cannot be remedied at the time of servicing. The written notification shall include an estimated date of correction.

2.0 Term of Agreement

This Agreement shall be for the period of 24 months from the date of System start-up, unless otherwise terminated or canceled by either party as provided herein.

3.0 Definitions

For purposes of this Agreement, the following definitions shall apply:

- 3.1 "System Monitoring" shall include the collecting and processing of data transmitted by telemetry, PDA, laptop computer or other for evaluating the operating parameters of the treatment system, including alarm notification. It shall also include all sampling and laboratory information.
- 3.2 "System" shall mean an AdvanTex[®] AXN NSF/ANSI Standard 40 certified wastewater treatment system.
- 3.3 "System Start-up Date" shall mean the date the System begins operating for its intended purpose.

4.0 Charges

The basic services, including service, inspection, effluent quality evaluation, and service, shall be included with the purchase of the System. Optional, additional services shall be provided at the agreed upon contract price and terms. The annual report and annual evaluation fee required by DEQ is not optional, and may or may not be included in the cost of

MAY 19 2009

basic services. Refer to Service Provider's fee schedule for an outline of the cost of basic services and optional services to be provided under this contract.

NORTH COAST BRANCH OFFICE
WARRENTON

All charges for optional services shall be due and payable within thirty (30) days of the Customer's receipt of Service Provider's invoice. The Customer shall pay Service Provider a late payment charge of 1.5% per month, or the maximum rate permitted by applicable law, whichever is less, on any unpaid amount for each calendar month or fraction thereof that any payment to Service Provider is in arrears.

5.0 Warranty

The AdvanTex® Service Provider warrants that all Services shall be performed in a good and workmanlike manner and that Service Provider will correct any System errors, malfunctions, or defects directly caused by Service Provider's failure to perform the Services and Additional Services in such manner.

6.0 Limitation of Liability

The sole liability of the AdvanTex® Service Provider under this agreement shall be to correct any errors, malfunctions or defects in the system directly caused by the AdvanTex® Service Provider's failure to perform any services in a good and workmanlike manner pursuant to Section 4 above. In no event shall the Service Provider's liability to the Customer hereunder exceed the total of the amounts paid to the Service Provider hereunder by the Customer. In no event shall the AdvanTex® Service Provider be liable to the Customer or any third-party claimant for any indirect, special, punitive, consequential or incidental damages or lost profits arising out of or related to this Agreement or the performance or breach thereof, whether based upon a claim or action of contract, warranty, negligence or strict liability or other tort, breach of any statutory duty, indemnity, or contribution or otherwise, even if the Service Provider has been advised of the possibility of such damages.

7.0 Termination/Cancellation

This Agreement may be terminated or canceled only upon:

- Written notice by one Party effective as of the effective date thereof if the other Party is in default of any provision of this Agreement and such default is not cured by the defaulting Party within fifteen (15) days after the effective date of said notice from the non-defaulting party, or by the mutual written agreement of both Parties.
- Copy of such written notice shall be forwarded to the regulatory agency.

8.0 Miscellaneous Provisions

This Agreement is personal in nature and may not be delegated, assigned or transferred by either Party without the prior written consent of the other Party.

The laws of the State of Oregon shall govern this Agreement.

The homeowner shall be responsible for complying with the AdvanTex Homeowner Manual and AXN Supplement provided to them with the purchase of the system.

Any notice or other communication required or permitted to be given under this Agreement shall be in writing and shall be mailed by certified mail, return receipt requested, postage prepaid, addressed to the Parties at the addresses shown on the first page of this Agreement. Any notice or other communication shall be deemed given at the expiration of the second day after the date of deposit in the United States mail. The addresses to which notices or other communications shall be mailed may be changed from time to time by giving written notice to the other Party as provided in this Section.

AdvanTex® Service Provider

Name: John L. Smits, REHS
Signature: John L. Smits 5/14/09
Title: Service Provider RM 20

Customer(s)

John Meek Sharon Meek
John Meek Sharon Meek 5/14/09

Smits & Associates, Inc.

16878 S. W. Gassner Lane
Lake Oswego, OR 97035-4524
(503) 699-2696 Fax (503) 699-2876
email: jlsmits@aol.com

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

MAY 11 2009

NORTH COAST BRANCH OFFICE
WARRENTON

AdvanTex AX20N
Two (2) Year Service Contract
Service Providers Fee Schedule

Re: John & Sharon Meek
T.4N.,R.10W.,Sec.7CC Tax Lot 400
80624 Hwy 101
Tolovana Park, Oregon 97145
Clatsop County

Date: May 11, 2009

Manufacturer/Dealer Requirements:

Initial System Startup: \$250.00

Basic Inspection/Services per System O & M Manual & NSF Requirements

3 – 6 months	\$220.00
6 – 12 months	\$220.00
12 – 18 Months	\$270.00
18 to 24 months	<u>\$220.00</u>
Total:	\$930.00

Optional Services (Required by DEQ Rule or offered by Service Provider)

Annual report to DEQ North Coast (Required) (\$110.00/year w/fee)	\$220.00
Inspection of the drainfield area and monitoring ports when present:	\$60.00
Flow monitoring first year for baseline via Web based VeriComm Panel:	\$90.00

Total fee to be paid to the service provider by the installer or directly by the customer upon signing of the service contract: **\$1,550.00**

Alarm response after the first at N/C, resolved without site visit (per response):	\$15.00
Alarm Response requiring field visit not related to AdvanTex components	
Such as faulty plumbing fixture: Travel: \$70.00/hour; On-site: \$85.00/hour	
Office support: \$65.00/hour. Minimum charge:	\$185.00
Field tests and observations are part of the basic service. Service provider	
May conclude that laboratory tests are needed. Samples will not be collected	
Without advising customer of the need and approximate cost of the testing.	

Optional services not paid in advance as part of contract Item 4.0 Charges, are due and payable as outlined under Item 4.0.

The manufacturers warranty on the AdvanTex system is 5 years. Keep the contract in force. You will be reminded of your opportunity to extend this contract prior to the end of the first two (2) years. DEQ rules require that a service contract be maintained for the useful life of the system and annual reports submitted to the local DEQ or contract county office.

MAY 19 2009

Acknowledgment of Understanding

NORTH COAST BRANCH OFFICE
WARRENTON

Owner Responsibility to Maintain/Convey AdvanTex® Service Contract(s)

I/we, as owners of an Orenco Systems®, Inc., AdvanTex Treatment System, understand that I/we have purchased from Orenco Dealer or Dealer's agent an onsite wastewater treatment system that uses proprietary advanced wastewater treatment technology. I/we agree to purchase and maintain a Service Contract for this system from our AdvanTex Dealer or from Dealer's agent for the entire period of the warranty.

I/we also understand that this Service Contract must be maintained. Failure to pay any renewal fees within 30 days of the due date shall result in termination of all Maintenance of our AdvanTex Treatment System.

I/we also understand that failure to pay any renewal fees within 30 days of the due date will void the AdvanTex Treatment System warranty and all Orenco warranties on any component of the AdvanTex Treatment System.

I/we also understand that I/we are obligated to disclose this information and this Service Contract requirement to subsequent property buyers. I/we also acknowledge that I/we have received a Homeowner's Manual (for preventive maintenance) and that I/we are obligated to pass this Homeowner's Manual on to subsequent property owners.

Site Address 80624 Hwy. 101 TOLOVANA PARK OR 97145
(Street/PO Box) (City) (State) (Zip Code)

John Meek
(Printed Name)

Sharon Meek
(Printed Name)

John Meek
(Signature)

Sharon Meek
(Signature)

5-14-09
(Date)

05-14-09
(Date)



State of Oregon
Department of
Environmental
Quality

Application for Onsite Sewage Treatment System

Department of Environmental Quality
65 N Highway 101, Suite G
Warrenton, OR 97146

Phone/TTY: (503) 861-3280

Fax: (503) 861-3259

Date Stamp: DEPT. OF ENVIRONMENTAL QUALITY RECEIVED MAY 11 2009 NORTH COAST BRANCH OFFICE WARRENTON	For DEQ Use Only:
	Date Received <u>5/11/09</u> Fee Paid <u>\$1010</u> Receipt Number <u>138459</u> Application Number <u>408589</u> Date of 1st Response _____ Date of 2nd Response _____ Date of Final Response _____ Date of Completion _____ Scanned _____ Data Entry _____

Scan ID
408589

A. Property Owner Information

John & Sharon Meek	17855 Skyline Woods Lane Beaverton, OR 97007	503-590-5805
Name	Mailing Address (Street or PO Box, City, State, Zip Code)	Phone Number

B. Legal Property Description

4 North	10 West	7CC	400	51102	1.04
Township	Range	Section	Tax Lot	Tax Account Number	Acreage or Lot Size
Clatsop		Partition Plat 1995-005		2	N/A
County		Subdivision Name		Lot	Block

Property Address: 80624 Hwy. 101	Tolovana Park	OR	97145
Address	City	State	Zip Code

Directions to Property: South of Arcadia Beach Wayside on the right hand side of the road.

C. Existing Facility / Proposed Facility / Water Information

Existing Facility:	Proposed Facility:	Water Supply:
☐ Single Family Residence	☒ Single Family Residence	☐ Public _____
Number of Bedrooms _____	4	Name _____
☐ Other _____	Number of Bedrooms _____	☒ Private <u>Shared Well</u>
	☐ Other _____	Well, Spring, Shared

D. Type of Application

☐ Site Evaluation	☐ Renewal Permit	☐ Authorization Notice for:
☒ Construction Permit	☐ Existing System Evaluation	☐ Connecting to an Existing System Not in Use
☐ Repair Permit	☐ Permit Transfer	☐ Replacing a Mobile Home or House with Another Mobile Home or House
☐ Major ☐ Minor	☐ Permit Reinstatement	☐ The Addition of One or More Bedrooms
☐ Alteration Permit		☐ Personal Hardship
☐ Major ☐ Minor		☐ Temporary Housing
		☐ Other - Please Specify _____

If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes.

By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and it's authorized agents permission to enter onto the above described property for the sole purpose of this application.

Signature	Date	
John & Sharon Meek	503-590-5805	sharon-meek@comcast.net
Applicant's Name - Please Print Legibly	Applicant's Phone Number	Applicant's E-mail Address

17855 SW Skyline Woods Lane Beaverton, OR 97007-8577
Applicant's Mailing Address

Applicant is the ☒ Owner ☐ Authorized Representative ☐ Licensed Septic Installer
☐ Authorization Attached

Mike McEwan (Bob McEwan Excavation)
Installer's Name

JUL 3 2008

SECTION 1 - TO BE FILLED OUT BY APPLICANT (may be filed in electronically using Tab key to move to each field)

NORTH COAST BRANCH OFFICE
WARRENTON

1. Applicant Name/Property Owner: John and Sharon Meek
Mailing Address: 16256 SW Skyline Woods Ln Telephone: 503-590-5805
City: Beaverton State: OR Zip: 97007
2. Property Information:
County: Clatsop Tax Lot Number: 400
Township: 4N Range: 10W Section: 7CC
Property Address: 80624 Highway 101, Cannon Beach, OR 97110
Block: _____ Lot: _____ Subdivision Name (if applicable): _____
3. This proposed facility is for:
☒ An individual, single-family dwelling.
☐ Other. Describe the type of development, business, or facility and the provided services or products:

4. Permit or approval being requested:
☒ On-site construction-installation permit for: ☒ New construction ☐ Repairs ☐ Alterations
☐ Non-water-carried facility requests (for example, pit privy/vault toilet for camp grounds).
☐ On-site Authorization Notices for: ☐ Replacement of dwelling ☐ Bedroom addition
☐ Other changes in land use involving potential sewer flow increases

SECTION 2 - TO BE FILLED OUT BY CITY OR COUNTY PLANNING OFFICIAL

5. The proposed facility is located: ☐ inside city limits ☐ inside UGB ☒ outside UGB
If inside the UGB, the proposed facility is subject to:
☐ City jurisdiction ☒ County jurisdiction ☐ Shared city/county jurisdiction
6. Property Zoning: CR Zoning Minimum Parcel Size: 20,000 sq ft
7. Is a public notice and hearing required? ☐ Yes ☒ No Hearing Date: _____
8. Does the proposed facility comply with all applicable local land use requirements: ☒ Yes ☐ No
Comments: _____
9. Planning Official Signature: Jennifer Bunch
Print Name: JENNIFER BUNCH Title: Planner
Telephone No.: 503-325-8611 Date: May 21, 2008
- * Planning Official Signature: _____
Print Name: _____ Title: _____
Telephone No.: _____ Date: _____

* Both city and county planning officials may need to sign if use is within a UGB.



Oregon Department of Environmental Quality
Warrenton Office
65 N Highway 101, Suite G
Warrenton, OR 97146

Receipt Number: 138459

MAY 11 2009

NORTH COAST BRANCH OFFICE
Date Received 5/11/2009

Received From **John Meek**
(Check Name): **17855 SW Skyline Woods**
Lane
Beaverton, OR 97007

For **T04N R10W S07 CC**
Property **TaxLot 400**
At: **Clatsop County**
80624 Hwy. 101
Tolovana Park, OR 97145
Lot 2,

Current Payment

Amount Paid	Payment Type	Check # Money Order # Purchase Order #	Bank Number	Amount Applied
1,010.00	Check	3481	24-7038	1,010.00

Total Amount Applied: \$1,010.00

Onsite Fees

Base Fee: **950.00**
Surcharge Fee: **60.00**
Plan Review Flow Fee:
Pump Evaluation Fee:
Flow Fee:
Reinspection Fee:
Total Fee: \$1,010.00

Payments

Previous Payments: **0.00**
Current Payment: **1,010.00**
Over Payment: **0.00**
Total Payments: \$1,010.00

Application Description

Application ID: **408589**
Application Type: **Construction-Installation Permit**
Single Family Dwelling

System Type: **Alternative Treatment Technology**
Pump Evaluation: **No**
Flow: **450** gallons/day

Receipt Amount: \$1,010.00

Receipted By:

Vicky Schiele

Date of Entry:

5/11/2009



Oregon

Theodore R. Kulongoski, Governor

Water Resources Department
North Mall Office Building
725 Summer Street NE, Suite A
Salem, OR 97301-1271
503-986-0900
FAX 503-986-0904

November 26, 2008

Copy

Mr. Roy N Jannsen, License # 1266
AM Jannsen Well Drilling Company
21075 SW Tualatin Valley Highway
Aloha, Oregon 97006

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED
FEB 18 2009
NORTH COAST BRANCH OFFICE
WARRENTON

Dear Mr. Jannsen:

Thank you for taking the time to meet with me, Kris Byrd, John Smits, Kent Mathiot and Christopher Almeidaat on the property located at 80646 Highway 101 Cannon Beach, Oregon. As we discussed at the site on November 20, 2008 the existing domestic water well, known as the Stern well, (Clat 50382 Well Identification number 18222), will have to be abandoned.

Oregon Administrative Rules Chapter 690, Division 220 sets forth the standards for the abandonment of water wells.

The Department requests that the well be abandoned within 30 days of the date of this letter. If you have any additional information or questions, please contact me. I may be reached by telephone at (503) 986-0895, or by mail at 725 Summer Street NE, Suite A, Salem, Oregon 97310-1271.

Sincerely,

Joel W. Jeffery
NW Region Well Inspector



Oregon

Theodore R. Kulongoski, Governor

Water Resources Department
North Mall Office Building
725 Summer Street NE, Suite A
Salem, OR 97301-1266
503-986-0900
FAX 503-986-0904

November 25, 2008

A M JANNSEN WELL DRILLING CO. INC.
ROY N JANNSEN
21075 SW TV HWY
ALOHA, OR 97006

FINAL ORDER

NORTH COAST BRANCH OFFICE
WARRENTON

Dear Roy:

The Special Standard request you submitted for owner: Ryan Finley c/o John Smits, Start Card number 198424, is hereby approved for the following: You may construct this well within 53 feet from the neighbor's (Steam's) existing septic drainfield due to limited site access (See OAR 690-210-0030). A condition of this Special Standard is that the well must be continuously cased and continuously sealed to a minimum depth of 106 feet bgs. All other standards must be adhered to. Your Special Standard request form is enclosed.

OAR 690-200-0021 requires the well constructor to request and receive approval prior to completion of the well. Please note, in the future, no special standards will be granted for after-the-fact requests.

The Well Construction Standards serve to protect ground water resources. By approving and issuing this special construction standard the Oregon Water Resources Department is not representing that a well constructed in accordance with this condition will maintain structural integrity or that it meets engineering standards. The well constructor/owner is responsible for ensuring that a well is constructed in a manner that protects ground water resources as required under Oregon Administrative Rules 690-200 through 690-240.

If you have any questions regarding this letter, I may be contacted at (503) 986-0852, or by e-mail at Juno.G.Pandian@wrdd.state.or.us.

Sincerely,

Juno Pandian, Manager
Well Construction and Compliance Section

enclosure

cc: Joel Jeffery, NW Region Well Inspector
Kristopher Byrd, Well Construction Program Coordinator

This is a final order in other than a contested case. This order is subject to judicial review under ORS 183.484. Any petition for judicial review must be filed within the 60 day time period specified by ORS 183.484(2). Pursuant to ORS 536.075 and OAR 137-004-0080 you may either petition for judicial review or petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied.

Page 1 of 3

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

FEB 18 2009

NORTH COAST BRANCH OFFICE
WARRENTON

Subj: RE: Meek - Finley - Stern
Date: 11/26/2008 9:32:40 AM Pacific Standard Time
From: byrdkr@wrд.state.or.us
To: JLSmits@aol.com

Attached is a copy of the Final Order issued to Roy Jannsen regarding the Finley well. In regards to the Stearn well, a letter will be sent out, if not today then within the next few days, giving Roy a timeframe to abandon the well. The letter will be coming from Joel Jeffery, the Regional Well Inspector. He can be reached at (503) 986-0895 or by e-mail at joel.w.jeffery@wrд.state.or.us. If you have any questions about the Finley well, please contact me. If you have questions about the Stearn well, Please contact Mr. Jeffery.

Regards,

Kristopher Byrd

Kristopher R. Byrd
Well Construction Program Coordinator
Well Construction and Compliance Sect.
Oregon Water Resources Department
Phone(503) 986-0851 Fax(503) 986-0902

From: JLSmits@aol.com [mailto:JLSmits@aol.com]
Sent: Friday, November 21, 2008 2:56 PM
To: Kris Byrd
Subject: Re: Meek - Finley - Stern

Thanks for that.

Is it possible to be copied on the Final Order?

In a message dated 11/21/2008 1:50:43 PM Pacific Standard Time, byrdkr@wrд.state.or.us writes:

I'm glad I was able to help resolve this matter in a reasonable way. Fortunately I was able to convince my manager that the groundwater resource and the landowners would be adequately protected with the Finley well where it now sits and how it was originally constructed. Now to answer your questions. A letter will be sent to Roy to abandon the Stern well because of it's proximity to the Stern drainfield. We can work with Roy on a time frame for the abandonment work. Also, once I receive a Special Standard Request Form from Roy for the placement of this well within 53 feet (as measured on site) from the Stern's drainfield then I will process and mail him a Final Order. Since the Department is issuing a Final Order to Roy for 53 feet from the Stern's drainfield I would also support DEQ approving the installation of the Meek's advance treatment drainfield within 53 feet from the Finley's well. Please keep in mind that DEQ approves septic placement. The Water Resources Department only has authority to regulate wells and well construction.

Regards,

Kristopher Byrd

Kristopher R. Byrd



Oregon

Theodore R. Kulongoski, Governor

Department of Environmental Quality

Northwest Region North Coast Branch Office

65 N Highway 101, Suite G

Warrenton, OR 97146

(503) 861-3280

FAX (503) 861-3259

July 17, 2008

John & Sharon Meek
17855 Skyline Woods Lane
Beaverton, OR 97007

RE: **Construction/Installation Permit Denial Notice - Application No. 407185**
Township/Range/Section: T4N, R10W, S7CC; Tax Lot No. 400, Clatsop County

Dear John & Sharon Meek:

Processing of your application for construction/installation of an onsite sewage treatment system located on the above-described property has been completed. Unfortunately, we are unable to issue the permit due to changes in site conditions, namely a well drilled less than 100 feet from the area approved for onsite sewage disposal in a variance request dated June 19, 1995. This determination is based upon current Department of Environmental Quality (DEQ) regulations governing onsite sewage disposal, Oregon Administrative Rules (OAR) Chapter 340, Divisions 71 and 73.

The plans submitted with your permit application, received on July 3, 2008, propose a total of 266 linear feet of seepage trench containing 12 inches of EZ Flow product with more than six inches of drain media below the distribution pipe. OAR 340-071-0290(3)(b) states that a construction permit for a conventional sand filter system with seepage trenches may be issued only on lots that were created before January 1, 1974. The subject lot was created as a 1.93-acre partition of a larger property after 1995 and therefore does not meet this rule requirement.

Based on the information described above and in accordance with OAR 340-071-0160(4)(c), the permit to construct this system is denied.

Request for Permit Denial Review or Request for Variance

If you believe that an error was made in the processing of your permit application, you may apply for a Permit Denial Review within 60 days of this notice. The current application fee for a permit denial review is \$280. If you would like to apply for a Variance from one or more of the Onsite Sewage Disposal rules, you may apply for a Variance at a cost of \$1360. If you are interested in either of these actions, please contact the undersigned for more details before you proceed.

If you have any questions about this report, please feel free to call me at (503) 861-3280.

Sincerely,

Connie M. Schrandt
Natural Resources Specialist

cc: Smits & Associates, Inc., 16878 SW Gassner Ln., Lake Oswego, OR 97035-4524



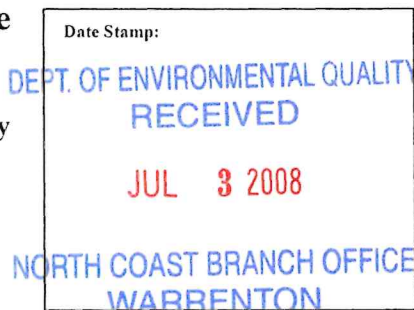
State of Oregon
Department of
Environmental
Quality

Application for Onsite Sewage Treatment System

Department of Environmental Quality
65 N Highway 101, Suite G
Warrenton, OR 97146

Phone/TTY: (503) 861-3280

Fax: (503) 861-3259



Scan ID: 408589

For DEQ Use Only:

Date Received 7/3/2008

Fee Paid \$ 1010.00

Receipt Number 134564

Application Number 407185

Date of 1st Response 7-9-08

Date of 2nd Response 7-10-08

Date of Final Response _____

Date of Completion _____

Scanned _____ Data Entry _____

A. Property Owner Information

John & Sharon Meek
Name

17855 Skyline Woods Lane Beaverton, OR 97007
Mailing Address (Street or PO Box, City, State, Zip Code)

503-590-5805
Phone Number

B. Legal Property Description

4 North Township Clatsop County	10 West Range	7CC Section Partition Plat 1995-005 Subdivision Name	400 Tax Lot	51102 Tax Account Number 2 Lot	1.04 Acreage or Lot Size N/A Block
--	------------------	---	----------------	---	---

Property Address: 80624 Hwy. 101
Address

Tolovana Park
City

OR
State

97145
Zip Code

Directions to Property: South of Arcadia Beach Wayside on the right hand side of the road.

C. Existing Facility / Proposed Facility / Water Information

Existing Facility:

- ☐ Single Family Residence
- Number of Bedrooms _____
- ☐ Other _____

Proposed Facility:

- ☒ Single Family Residence
- 4
Number of Bedrooms
- ☐ Other _____

Water Supply:

- ☐ Public _____
Name
- ☒ Private Shared Well
Well, Spring, Shared

D. Type of Application

- | | | |
|---|---|---|
| ☐ Site Evaluation | ☐ Renewal Permit | ☐ Authorization Notice for: |
| ☒ Construction Permit | ☐ Existing System Evaluation | ☐ Connecting to an Existing System Not in Use |
| ☐ Repair Permit | ☐ Permit Transfer | ☐ Replacing a Mobile Home or House with Another Mobile Home or House |
| ☐ Major ☐ Minor | ☐ Permit Reinstatement | ☐ The Addition of One or More Bedrooms |
| ☐ Alteration Permit | | ☐ Personal Hardship |
| ☐ Major ☐ Minor | | ☐ Temporary Housing |
| | | ☐ Other - Please Specify _____ |

If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes.

By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and it's authorized agents permission to enter onto the above described property for the sole purpose of this application.

Sharon Meek
Signature

7-2-08
Date

John & Sharon Meek
Applicant's Name - Please Print Legibly

503-590-5805
Applicant's Phone Number

sharon-meek@comcast.net
Applicant's E-mail Address

17855 SW Skyline Woods Lane Beaverton, OR 97007-8577
Applicant's Mailing Address

Applicant is the ☒ Owner ☐ Authorized Representative ☐ Licensed Septic Installer

☐ Authorization Attached

Mike McEwan (Bob McEwan Excavation)
Installer's Name

Smits & Associates, Inc.

16878 S. W. Gassner Lane
Lake Oswego, OR 97035-4524
(503) 699-2696 Fax (503) 699-2876
email: jlsmits@aol.com

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

JUL 3 2008

NORTH COAST BRANCH OFFICE
WARRENTON

Memorandum

To: Connie Schrandt ✓
Natural Resource Specialist

July 1, 2008

Cc: Gary Artman, DEQ Eugene
John & Sharon Meek

From:  John L. Smits, REHS
Smits & Associates, Inc.

Re: On-Site Sewage Disposal
John & Sharon Meek Property
T.4N., R.10W., Sec. 7CC Tax Lot 400
Clatsop County
Permit Application & Revised Plans

Dear Connie,

On Monday, June 23, 2008, the owners requested their permit application be withdrawn. Here is a new application, 2 sets of plans and an overlay of the proposed system that can be compared to the 1995 approved system. The Meeks will hand deliver the application and pay the new fee which I think will include the new \$60 surcharge rather than the previous \$40.

You agreed to provide the maximum assistance to resolve the problem created by the neighbor drilling a well less than 100 feet from the approved area, 2 years after Dennis Illingworth granted the variance. In an effort to move forward without re-entering the time consuming DEQ variance arena which will surely allow a second neighbor sufficient time to drill his planned well, which will likely render the parcel unbuildable, I offer the following as a way to meet the essentials of the variance(s) granted in 1995:

1) I have staked 266 feet of trench in the area previously approved, 100 feet from the neighbors well, and 50 feet from the top of the bluff at the west. The westernmost trench is the only trench farther west than the system approved by Dennis Illingworth. I've also staked 2 trenches and adjusted the location of 2 other trenches near the west radius of the 100 foot well setback. No trenches were planned there previously as nearby there was little vegetation and water was ponded there in past winters. The water regime and vegetation has changed significantly since 1995 as there is no evidence of seasonal ponding and the vegetation is very thick and 5 feet tall. There has never been any evidence of surface water flow anywhere along the swale. I walked the area completely to be sure that I had staked trenches meeting the setbacks approved by Illingworth. The trenches can be installed 6 feet between sidewalls as conditioned in the variance.

2) A four (4) bedroom dwelling was proposed and 300 feet of trench was approved by variance. Redundant consideration was requested, but 2 alternating equal distribution systems were approved. The trench depth was set by variance at not less than 18 inches nor more than 22 inches and Schedule A, Item 4 (c) requires a minimum of 12 inches depth of filter material. If we install 4 inches of drain media in the base of a 24" wide, 22 inch deep trench and place 2 bundles of the 12 inch EZ flow product (one bundle with the pipe and one bundle of aggregate) arranged as such, the absorptive surface will be equivalent to the required 309 feet of trench.

JUL 3 2008

3) Suggest the index valve be omitted and 2 hydrosplitters replaced with a single 8 outlet Hydrosplitter including orifice flow control to proportionately discharge to the full 266 feet of trench. This change will reduce the complexity of the distribution system. The application rate will be about 5/8" per day per sq. ft. based on trench basal area and 1/2" per day per sq. ft. based on trench sidewall.

4) The trenches will include water level monitoring ports. The trenches will be inspected twice per year as part of the AdvanTex system maintenance contract. The owners have signed the 2 year maintenance contract.

5) The treatment system will be controlled by a VeriComm control panel which reports the operation to the service provider every 30 days along with high level alarms or other abnormal events. Smits & Associates, Inc. as service provider will calibrate the final pump and we track flow monthly as standard procedure. The monitoring will be much more intensive than the approved sand filter system.

6) The AdvanTex treatment unit will include the UV disinfection module thereby meeting DEQ's highest wastewater treatment standard.

7) Smits & Associates, Inc. will work closely with Mike McEwan to manage and to the extent possible, control the construction of the trench system. Our work will augment Connie Schrandt's mandatory inspections.

The system will meet the essentials of the 1995 variance approval. Advances in treatment and monitoring technology will result in a system that is more protective of public health and the environment than the 1995 approved system.

Please give this and the transparency your immediate attention to review and comment on, as the neighbor is planning to drill a well in the very near future and we need to move ahead very quickly.

If you have any questions or wish to discuss the site, please feel free to contact me at (503) 699-2696.

GENERAL NOTES

THE MARCH 1, 2005 OREGON DEQ ONSITE WASTEWATER SYSTEM RULES OUR CHAPTER 340 DIV. 071 & 073 WILL BE CONSIDERED THE STANDARD SPECIFICATIONS, AS MODIFIED AND ADJUSTED BY VARIANCES GRANTED BY DEQ ON 6/19/1995.

THE OWNERS CONTRACTOR SHALL BE LICENSED BY THE OREGON DEQ AS A SEWAGE DISPOSAL SERVICE COMPANY AND BE BONDED. CONTRACTOR SHALL BE AN OREGON SYSTEMS INC. CERTIFIED ADVANTEX SYSTEM INSTALLER.

THE CONTRACTOR SHALL NOTIFY ALL AFFECTED UTILITIES FOR LOCATIONS OF MAINLINE AND SERVICE LINE LOCATIONS PRIOR TO DIGGING. UTILITIES WHICH ARE DAMAGED AND WERE MARKED PROPERLY WILL BE REPAIRED BY THE CONTRACTOR AT HIS COST. UTILITIES WHICH ARE DAMAGED BY THE CONTRACTOR AND WERE UNMARKED OR IMPROPERLY MARKED, WILL BE PAID FOR BY THE AFFECTED UTILITY COMPANY. CONTRACTOR SHALL CONTACT "ONE-CALL" AT LEAST 48 HOURS PRIOR TO CONSTRUCTION. 1-800-332-2344

CONTRACTOR TO POTHOLE ALL EXISTING UTILITIES PRIOR TO BEGINNING CONSTRUCTION TO INSURE CLEARANCE BETWEEN EXISTING UTILITIES PIPING. ANY CONFLICTS NOTED BY THE CONTRACTOR SHALL BE BROUGHT TO THE ATTENTION OF THE DESIGN ENGINEER OR HIS FILED REPRESENTATIVE TO REQUEST CLARIFICATION BEFORE ORDERING AFFECTED MATERIALS OR WORK.

LOCATIONS ARE APPROXIMATE. DISPOSAL TRENCHES HAVE BEEN STAKED IN THE FIELD BY THE DESIGNER. THE OWNER/CONTRACTOR TO GIVE AT LEAST THREE DAYS NOTICE TO THE DESIGNER/ENGINEER PRIOR TO CONSTRUCTION TO ADJUST OR CHANGE STAKING.

CONTRACTOR TO MAINTAIN MINIMUM 10 FT. HORIZONTAL SEPARATION (EDGE TO EDGE) BETWEEN THE WATER MAIN AND SEWER MAINS AND PRESSURE TRANSPORT PIPES.

AS-BUILT RECORDS ARE THE RESPONSIBILITY OF THE CONTRACTOR OR OWNER. ONE SET OF RED LINE NOTES ON A SET OF PLANS SHALL BE GIVEN TO THE DESIGNER OR OR COUNTY AGENT FOR INCORPORATION INTO THE FINAL AS-BUILT RECORD AND OPERATION AND MAINTENANCE MANUAL.

ALL MATERIALS SHALL BE OF THE MODEL, BRAND, TYPE ETC. LISTED FROM THE MANUFACTURER(S) SPECIFIED. UNLESS OTHERWISE AUTHORIZED IN WRITING BY THE DESIGNER OR ENGINEER AND THE REGULATORY JURISDICTION. SUBSTITUTION OF MATERIALS AND EQUIPMENT SHALL RECEIVE PREAUTHORIZATION AND THE CONTRACTOR WILL BE RESPONSIBLE TO PROVIDE PERFORMANCE AND OPERATING DATA FOR REVIEW.

CONSTRUCTION OF THIS SYSTEM IS WEATHER DEPENDENT. DON'T INSTALL DURING WET WEATHER. CONTRACTOR OR OWNER TO NOTIFY DESIGNER/ENGINEER DURING THE DIFFERENT STAGES OF CONSTRUCTION OF THE COLLECTION, TANK, ADVANTEX AND REDUNDANT "DRAINFIELD" SYSTEM, TO ALLOW OBSERVATION OF COMPLIANCE WITH THE APPROVED PLAN FOR CERTIFICATION TO CLATSOP COUNTY DEQ OFFICE IF REQUIRED.

DEQ STAFF WILL MAKE INSPECTIONS AND SERVICE PROVIDER WILL CONDUCT SYSTEM START-UP. INSPECTIONS THAT WILL BE MADE BY THE DESIGNER IF REQUESTED TO AUGMENT DEQ INSPECTIONS: PRECONSTRUCTION CONFERENCE INCLUDING DESIGNER, CONTRACTOR AND ELECTRICIAN.

1. DURING/AFTER TANK INSTALLATION TO OBSERVE & CONFIRM EXFILTRATION TESTS.
2. FOR REQUIRED INSPECTIONS OF THE ADVANTEX SYSTEM AND AT THE COMPLETION OF THE TRENCH UNITS TO OBSERVE THE TRENCHES PRIOR TO BACK FILL OF THE TRENCH SYSTEM.

3. FOLLOWING THE INSTALLATION OF THE EFFLUENT FILTER AND CONTROL OR ALARM PANELS. ELECTRICAL POWER TO BE AVAILABLE FOR THIS INSPECTION.
4. FOLLOWING THE BACKFILLING OF THE SYSTEM.

*ALL SEPTIC AND DOSING TANKS ARE TO BE WATER TESTED. THE TEST PROCEDURE IS LISTED ON THE PLAN AND DETAIL SHEETS.

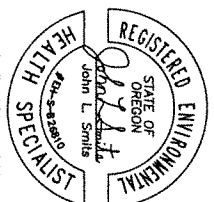
EXCEPT AS SPECIFICALLY SET FORTH BY THE LAWS AND COURTS OF THE STATE OF OREGON, THERE IS NO WARRANTY EXPRESSED OR IMPLIED, INCLUDING THE WARRANTY OF FITNESS FOR A PARTICULAR PURPOSE FOR THE EQUIPMENT AND MATERIALS SPECIFIED IN THESE PLANS. THE PURCHASER OR OWNER MAY HAVE CERTAIN RIGHTS AND RESPONSIBILITIES OF WARRANTY DIRECTLY WITH THE MANUFACTURER OF THE INDIVIDUAL COMPONENTS.

SYSTEM:

DEQ VARIANCE APPROVAL: SAND FILTER, REDUNDANT, EQUAL DISTRIBUTION BY DENNIS ILLINGWORTH, RS 6/19/1995
DEQ's Gary Artmon by email 2/12/08 agreed ATT meeting TS2 will satisfy the Sand Filter Variance Approval
Four (4) Bedroom, 5 Bath, 2 Adults, plus Guests.
1,500-GALLON WAITE, 2 COMPARTMENT SEPTIC TANK, 1500 GAL. AX20 PROCESSING TANK.
ATT TS2: ADVANTEX (2) MODEL: AX20N UV Mode 3, AND 500-GAL. FINAL PUMP TANK
DISPOSAL TRENCHES: 266 ft. 18" Min. 22" Max Deep "Seepage Trench", Equal Distribution, Via Hydrosplitter. This equates to 309 feet of standard trench by increased sidewall.

SHEET NO. DESCRIPTION

- 1 COVER/GENERAL SPECIFICATIONS
- 2 SITE PLAN @ 1" = 20'
- 3 ADVANTEX TANK PLAN
- 4 ADVANTEX DETAILS
- 5 DOSE TANK, FLOATS & PUMP CURVE
- 6 EIGHT (8) OUTLET HYDROSPITTER
- 7 VALVE & SPLITTER ENCLOSURES
- 8 DISPERSAL TRENCH
- 9 PARTS AND EQUIPMENT LIST
- 10,11,12 ELECTRICAL DETAILS



RENEWAL DATE
12/31/08

Smits & Associates, Inc.

Environmental Consultants • Designers
16878 S. W. Gassner Lane
Lake Oswego, OR 97035-4524

John L. Smith, PE, EHS
Ph. (503) 699-8898 ENVIRONMENTAL QUALITY
Fax (503) 699-8876
Email: jlsmits@aol.com

JUL 3 2008

COVER SHEET

John & Sharon Meek
80624 Hwy. 101
T.4N., R.10W., Sec.7CC TL 400
Clatsop County

SHEET

San 1

of 12

July 1, 2008

NORTH COAST BRANCH OFFICE
WARRENTON



State of Oregon
Department of
Environmental
Quality

Application for Onsite Sewage Treatment System

Department of Environmental Quality
65 N Highway 101, Suite G
Warrenton, OR 97146

Phone/TTY: (503) 861-3280

Fax: (503) 861-3259

Date Stamp:
DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

MAY 27 2008

NORTH COAST BRANCH OFFICE
WARRENTON

Scan ID

408589

For DEQ Use Only:

Date Received 5/27/08

Fee Paid 9902

Receipt Number 134548

Application Number 466943

Date of 1st Response

Date of 2nd Response

Date of Final Response

Date of Completion

Scanned Data Entry

A. Property Owner Information

John & Sharon Meek

Name

17855 Skyline Woods Lane Beaverton, OR 97007

Mailing Address (Street or PO Box, City, State, Zip Code)

503-590-5805

Phone Number

B. Legal Property Description

4 North

Township

Clatsop

County

10 West

Range

7CC

Section

Partition Plat 1995-005

Subdivision Name

400

Tax Lot

51102

Tax Account Number

2

Lot

1.04

Acreage or Lot Size

N/A

Block

Property Address: 80624 Hwy. 101

Address

Tolovana Park

City

OR

State

97145

Zip Code

Directions to Property: South of Arcadia Beach Wayside on the right hand side of the road.

C. Existing Facility / Proposed Facility / Water Information

Existing Facility:

☐ Single Family Residence

Number of Bedrooms

☐ Other

Proposed Facility:

☒ Single Family Residence

4

Number of Bedrooms

☐ Other

Water Supply:

☐ Public

Name

☒ Private Shared Well

Well, Spring, Shared

D. Type of Application

☐ Site Evaluation

☒ Construction Permit

☐ Repair Permit

☐ Major ☐ Minor

☐ Alteration Permit

☐ Major ☐ Minor

☐ Renewal Permit

☐ Existing System Evaluation

☐ Permit Transfer

☐ Permit Reinstatement

☐ Authorization Notice for:

☐ Connecting to an Existing System Not in Use

☐ Replacing a Mobile Home or House with Another Mobile Home or House

☐ The Addition of One or More Bedrooms

☐ Personal Hardship

☐ Temporary Housing

☐ Other - Please Specify

If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes.

By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and it's authorized agents permission to enter onto the above described property for the sole purpose of this application.

John Meek Sharon Meek

Signature

5-23-08

Date

John & Sharon Meek

Applicant's Name - Please Print Legibly

503-590-5805

Applicant's Phone Number

sharon-meek@comcast.net

Applicant's E-mail Address

17855 SW Skyline Woods Lane Beaverton, OR 97007-8577

Applicant's Mailing Address

Applicant is the ☒ Owner ☐ Authorized Representative

☐ Licensed Septic Installer

☐ Authorization Attached

Mike McEwan (Bob McEwan Excavation)

Installer's Name

GENERAL NOTES

THE MARCH 1, 2005 OREGON DEQ ONSITE WASTEWATER SYSTEM RULES OAR CHAPTER 340 DIV. 071 & 073 WILL BE CONSIDERED THE STANDARD SPECIFICATIONS, AS MODIFIED AND ADJUSTED BY VARIANCES GRANTED BY DEQ ON 6/19/1995.

THE OWNERS CONTRACTOR SHALL BE LICENSED BY THE OREGON DEQ AS A SEWAGE DISPOSAL SERVICE COMPANY AND BE BONDED. CONTRACTOR SHALL BE AN OREGON SYSTEMS INC. CERTIFIED ADVANTEX SYSTEM INSTALLER.

THE CONTRACTOR SHALL NOTIFY ALL AFFECTED UTILITIES FOR LOCATIONS OF MAINLINE AND SERVICE LINE LOCATIONS PRIOR TO DIGGING. UTILITIES WHICH ARE DAMAGED AND WERE MARKED PROPERLY WILL BE REPAIRED BY THE CONTRACTOR AT HIS COST. UTILITIES WHICH ARE DAMAGED BY THE CONTRACTOR AND WERE UNMARKED OR IMPROPERLY MARKED WILL BE PAID FOR BY THE AFFECTED UTILITY COMPANY. CONTRACTOR SHALL CONTACT "ONE-CALL" AT LEAST 48 HOURS PRIOR TO CONSTRUCTION. 1-800-332-2344

CONTRACTOR TO POthOLE ALL EXISTING UTILITIES PRIOR TO BEGINNING CROSSINGS TO INSURE CLEARANCE BETWEEN EXISTING UTILITIES PIPING. ANY CONFLICTS NOTED BY THE CONTRACTOR SHALL BE BROUGHT TO THE ATTENTION OF THE DESIGN ENGINEER OR HIS FILED REPRESENTATIVE TO REQUEST CLARIFICATION BEFORE ORDERING AFFECTED MATERIALS OR WORK.

LOCATIONS ARE APPROXIMATE. DISPOSAL TRENCHES HAVE BEEN STAKED IN THE FIELD BY THE DESIGNER. THE OWNER/CONTRACTOR TO GIVE AT LEAST THREE DAYS NOTICE TO THE DESIGNER/ENGINEER PRIOR TO CONSTRUCTION TO ADJUST OR CHANGE STAKING. CONTRACTOR TO MAINTAIN MINIMUM 10 FT. HORIZONTAL SEPARATION (EDGE TO EDGE) BETWEEN THE WATER MAIN AND SEWER MAINS AND PRESSURE TRANSPORT PIPES.

AS-BUILT RECORDS ARE THE RESPONSIBILITY OF THE CONTRACTOR OR OWNER. ONE SET OF RED LINE NOTES ON A SET OF PLANS SHALL BE GIVEN TO THE DESIGNER OR OR COUNTY AGENT FOR INCORPORATION INTO THE FINAL AS-BUILT RECORD AND OPERATION AND MAINTENANCE MANUAL.

ALL MATERIALS SHALL BE OF THE MODEL, BRAND, TYPE ETC. LISTED FROM THE MANUFACTURER(S) SPECIFIED. UNLESS OTHERWISE AUTHORIZED IN WRITING BY THE DESIGNER OR ENGINEER AND THE REGULATORY JURISDICTION. SUBSTITUTION OF MATERIALS AND EQUIPMENT SHALL RECEIVE PREAUTHORIZATION AND THE CONTRACTOR WILL BE RESPONSIBLE TO PROVIDE PERFORMANCE AND OPERATING DATA FOR REVIEW.

CONSTRUCTION OF THIS SYSTEM IS WEATHER DEPENDENT. DON'T INSTALL DURING WET WEATHER. CONTRACTOR OR OWNER TO NOTIFY DESIGNER/ENGINEER DURING THE DIFFERENT STAGES OF CONSTRUCTION OF THE COLLECTION, TANK, ADVANTEX AND REDUNDANT "DRAINFIELD" SYSTEM, TO ALLOW OBSERVATION OF COMPLIANCE WITH THE APPROVED PLAN FOR CERTIFICATION TO CLATSOP COUNTY DEQ OFFICE IF REQUIRED.

DEQ STAFF WILL MAKE INSPECTIONS AND SERVICE PROVIDER WILL CONDUCT SYSTEM START-UP. INSPECTIONS THAT WILL BE MADE BY THE DESIGNER IF REQUESTED TO AUGMENT DEQ INSPECTIONS:

PRECONSTRUCTION CONFERENCE INCLUDING DESIGNER, CONTRACTOR AND ELECTRICIAN.

1. DURING/AFTER TANK INSTALLATION TO OBSERVE & CONFIRM EXFILTRATION TESTS.
2. FOR REQUIRED INSPECTIONS OF THE ADVANTEX SYSTEM AND AT THE COMPLETION OF THE TRENCH UNITS TO OBSERVE THE TRENCHES PRIOR TO BACK FILL OF THE TRENCH SYSTEM.
3. FOLLOWING THE INSTALLATION OF THE EFFLUENT FILTER AND CONTROL OR ALARM PANELS. ELECTRICAL POWER TO BE AVAILABLE FOR THIS INSPECTION.
4. FOLLOWING THE BACKFILLING OF THE SYSTEM.

**ALL SEPTIC AND DOSING TANKS ARE TO BE WATER TESTED. THE TEST PROCEDURE IS LISTED ON THE PLAN AND DETAIL SHEETS.

EXCEPT AS SPECIFICALLY SET FORTH BY THE LAWS AND COURTS OF THE STATE OF OREGON, THERE IS NO WARRANTY EXPRESSED OR IMPLIED, INCLUDING THE WARRANTY OF FITNESS FOR A PARTICULAR PURPOSE FOR THE EQUIPMENT AND MATERIALS SPECIFIED IN THESE PLANS. THE PURCHASER OR OWNER MAY HAVE CERTAIN RIGHTS AND RESPONSIBILITIES OF WARRANTY DIRECTLY WITH THE MANUFACTURER OF THE INDIVIDUAL COMPONENTS.

SYSTEM:

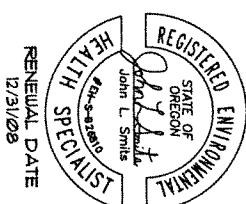
DEQ VARIANCE APPROVAL: SAND FILTER, REDUNDANT, EQUAL DISTRIBUTION BY Dennis Illingworth, RS 6/19/1995

DEQ's Gary Artman by email 2/12/08 agreed ATT meeting TS2 will satisfy the Sand Filter Variance Approval

Four (4) Bedrooms, 5 Bath, 2 Adults, plus Guests.
1,500-GALLON WASTE, 2 COMPARTMENT SEPTIC TANK, 1500 GAL. AX20 PROCESSING TANK, ATT TS2: ADVANTEX (2) MODEL: AX20N UV Mode 3, AND 500-GAL. FINAL PUMP TANK
DISPOSAL TRENCHES: Redundant: 2 - 150 ft. 18" Min. 22" Max Deep, Equal Distribution,
Via Hydrosplitter

SHEET NO. DESCRIPTION

- | SHEET NO. | DESCRIPTION |
|-----------|--------------------------------|
| 1 | COVER/GENERAL SPECIFICATIONS |
| 2 | SITE PLAN @ 1" = 20' |
| 3 | ADVANTEX TANK PLAN |
| 4 | ADVANTEX DETAILS |
| 5 | DOSE TANK, FLOATS & PUMP CURVE |
| 6 | INDEX VALVE & HYDROSPLITTERS |
| 7 | VALVE & SPLITTER ENCLOSURES |
| 8 | DISPERSAL TRENCH |
| 9 | PARTS AND EQUIPMENT LIST |
| 10,11,12 | ELECTRICAL DETAILS |



RENEWAL DATE
12/31/08

Smits & Associates, Inc.

Environmental Consultants • Designers
16878 S. W. Gassner Lane
Lake Oswego, OR 97035-4524
John L. Smits, REHS
Ph: (503) 699-2896
Fax: (503) 699-2876
Email: jlsmits@aol.com

COVER SHEET

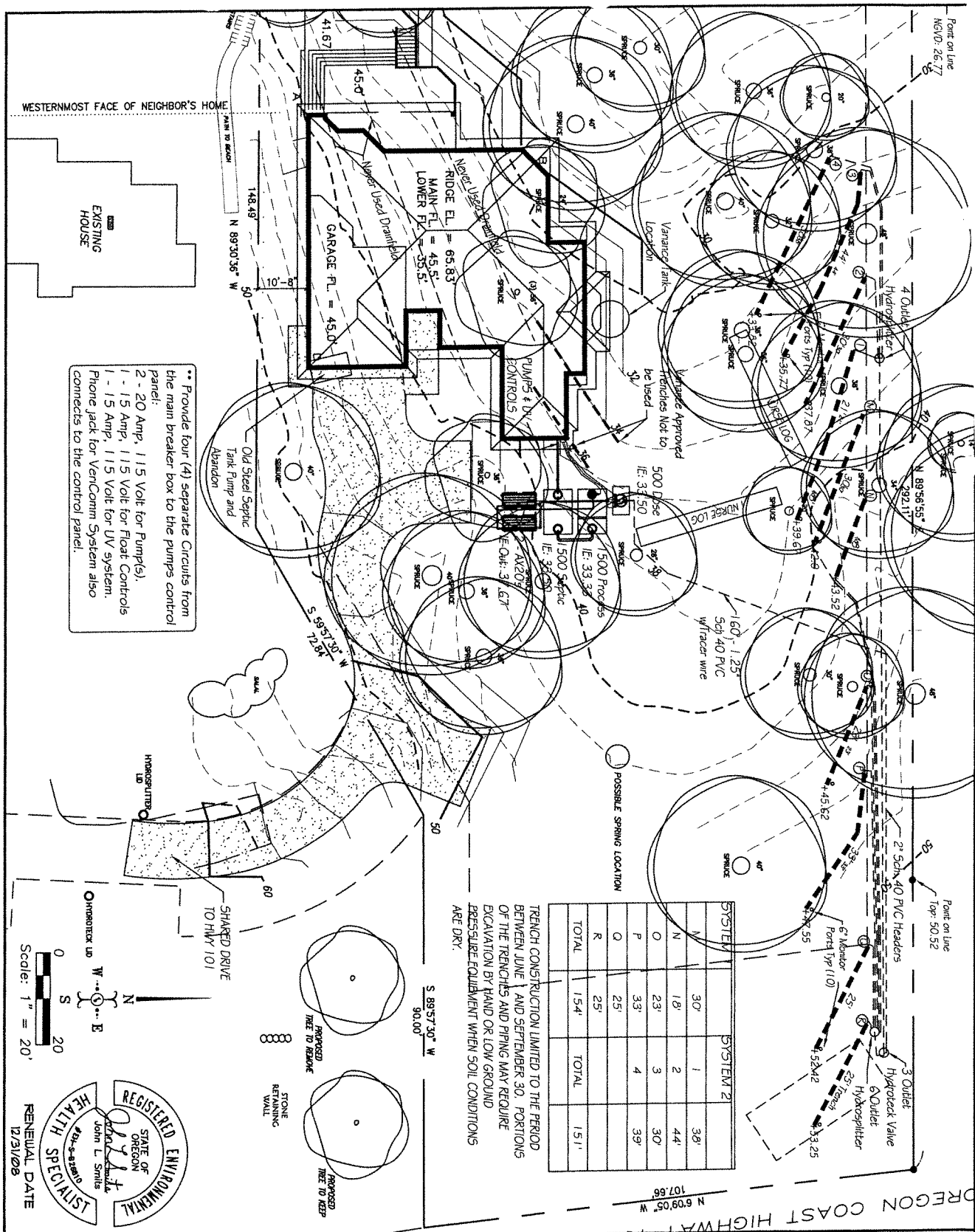
John & Sharon Meek
80624 Hwy. 101
T.4N.,R.10W.,Sec.7CC TL 400
Clatsop County

SHEET

San 1

of 12

May 22, 2008



SYSTEM 1		SYSTEM 2	
N	30'	1	38'
N	18'	2	44'
O	23'	3	30'
P	33'	4	39'
Q	25'		
R	25'		
TOTAL	154'	TOTAL	151'

RECEIVED

SECTION 1 - TO BE FILLED OUT BY APPLICANT (may be filled in electronically using Tab key to move to each field)

MAY 27 2008

1. Applicant Name/Property Owner: John and Sharon Meek
 Mailing Address: 16256 SW Skyline Woods Ln Telephone: 503-590-5805
 City: Beaverton State: OR Zip: 97007 NORTH COAST BRANCH OFFICE
 WARRENTON
2. Property Information:
 County: Clatsop Tax Lot Number: 400
 Township: 4N Range: 10W Section: 7CC
 Property Address: 80624 Highway 101, Cannon Beach, OR 97110
 Block: _____ Lot: _____ Subdivision Name (if applicable): _____
3. This proposed facility is for:
☒ An individual, single-family dwelling.
☐ Other. Describe the type of development, business, or facility and the provided services or products:

4. Permit or approval being requested:
☒ On-site construction-installation permit for: ☒ New construction ☐ Repairs ☐ Alterations
☐ Non-water-carried facility requests (for example, pit privy/vault toilet for camp grounds).
☐ On-site Authorization Notices for: ☐ Replacement of dwelling ☐ Bedroom addition
☐ Other changes in land use involving potential sewer flow increases

SECTION 2 - TO BE FILLED OUT BY CITY OR COUNTY PLANNING OFFICIAL

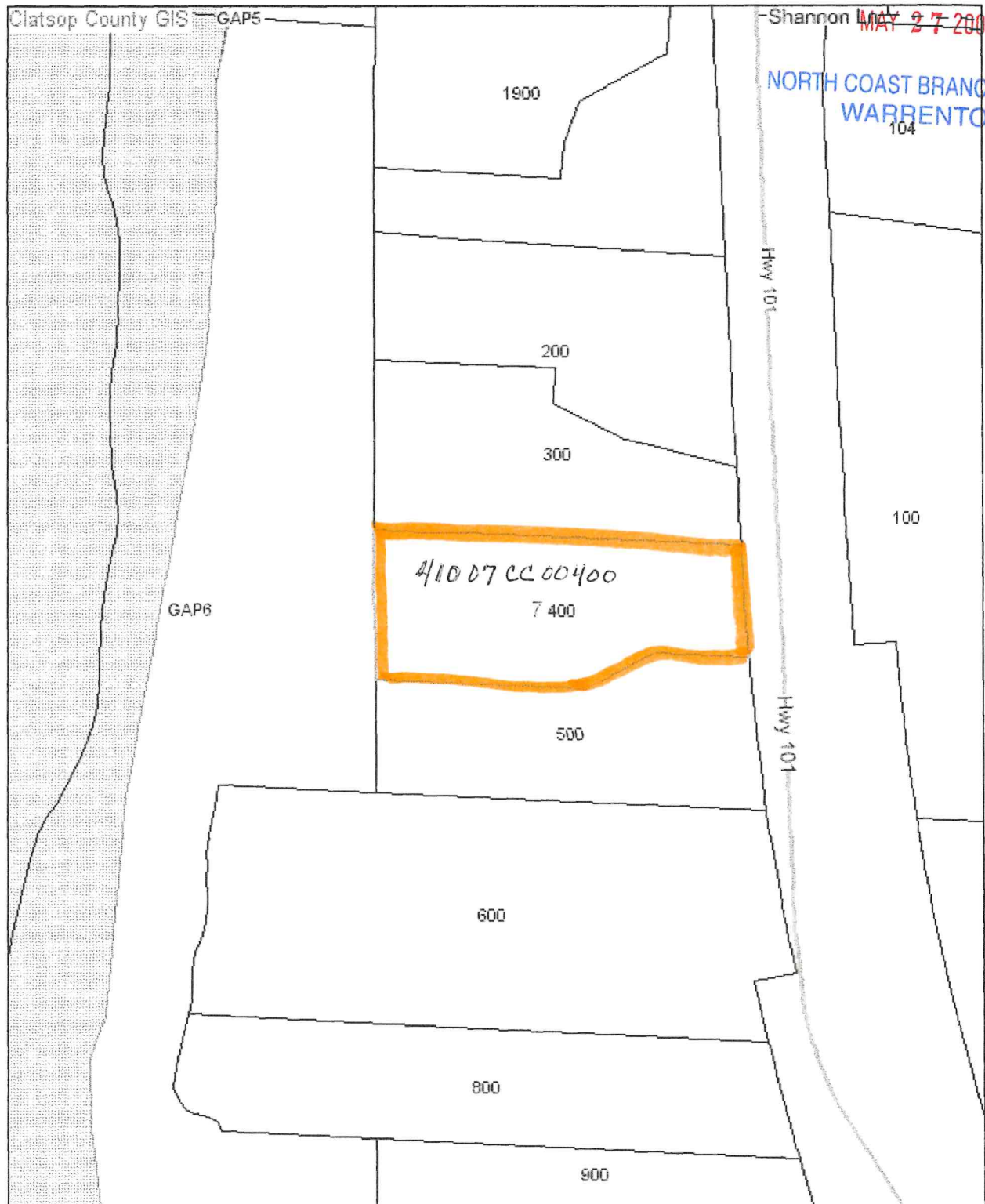
5. The proposed facility is located: ☐ inside city limits ☐ inside UGB ☒ outside UGB
 If inside the UGB, the proposed facility is subject to:
☐ City jurisdiction ☒ County jurisdiction ☐ Shared city/county jurisdiction
6. Property Zoning: CR Zoning Minimum Parcel Size: 20,000 sq ft
7. Is a public notice and hearing required? ☐ Yes Hearing Date: _____
☒ No
8. Does the proposed facility comply with all applicable local land use requirements: ☒ Yes ☐ No
 Comments: _____
9. Planning Official Signature: Jennifer Bunch
 Print Name: JENNIFER BUNCH Title: Planner
 Telephone No.: 503-325-8611 Date: May 21, 2008
- * Planning Official Signature: _____
 Print Name: _____ Title: _____
 Telephone No.: _____ Date: _____

* Both city and county planning officials may need to sign if use is within a UGB.

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

MAY 27 2008

NORTH COAST BRANCH OFFICE
WARRENTON



Receipt Number: 134548

MAY 27 2008

Oregon Department of Environmental Quality

Warrenton Office

65 N Highway 101, Suite G

Warrenton, OR 97146



NORTH COAST BRANCH OFFICE

Date Received 5/27/2008

Received From **Sharon Meek**
(Check Name): **17855 SW Skyline Woods**
Lane
Beaverton, OR 97007

For **T04N R10W S07 CC**
Property **TaxLot 400**
At: **Clatsop County**
80624 Hwy. 101
Tolovana Park, OR 97145
Lot 2,

Current Payment

Amount Paid	Payment Type	Check # Money Order # Purchase Order	Bank Number	Amount Applied
990.00	Check	3311	24-7038	990.00

Total Amount Applied \$990.00

Onsite Fees

Base Fee:	950.00
Surcharge Fee:	40.00
Plan Review Flow Fee:	
Pump Evaluation Fee:	
Flow Fee:	
Reinspection Fee:	
Total Fee	\$990.00

Payments

Previous Payments:	0.00
Current Payment:	990.00
Over Payment:	0.00
Total Payments:	\$990.00

Application Description

Application ID: **406943**
Application Type: **Construction-Installation Permit**
Single Family Dwelling

System Type: **Sand Filter: Conventional - Residential**
Pump Evaluation: **No**
Flow: **450** gallons/day

Receipt Amount: **\$990.00**

Receipted By:

Vicky Schiele

Date of Entry:

5/27/2008

North Coast Branch Office
WARRENTON

June 19, 1995

DEPT. OF ENVIRONMENTAL QUALITY
CERTIFIED MAIL RECEIVED

Oregon

GEORGE KILLIAN
820 SE 73RD AVE
VANCOUVER OR 98664

JUN 21 1995

NORTH COAST BRANCH OFFICE
WARRENTON

DEPARTMENT OF
ENVIRONMENTAL
QUALITY

Re: OSS:NWR: VARIANCE REQUEST:
CLATSOP COUNTY: TWN 4N, RNG 10W,
SEC 7CD, NORTH PART OF TAX LOT 800

NORTHWEST REGION

Dear Mr. Killian:

This correspondence verifies that a variance hearing, provided for under Oregon Administrative Rule (OAR) 340-71-430, was held at the above-described property on May 4, 1995. The purpose of the hearing was to provide a forum for the presentation of supportive facts to show that strict compliance with certain rules regulating sewage disposal system development are inappropriate, or that special physical conditions at the site render strict compliance to be unreasonable, burdensome, or impractical.

The approximately 0.95 acre property is located off Hwy 101, south of Cannon Beach in Clatsop County. This site is part of a 1.93 acre parcel that is proposed to be partitioned into two lots. This is the North part of this proposed partition. Hand dug pits were provided in the proposed disposal area. The soils consist of silt loams over silty clays. Past evaluations on this site have indicated soil depths to at least 50 inches. Indications of temporary water in the soils were evident at 22 inches. This water can be expected during winter and spring. The site slope has a Southwest aspect, with slopes varying from 10 to 20 percent. The topography of this site is highly variable, with many downed trees and large trees with massive root structures. There is a swale, or drainage area that runs from the east to the west through the approximate middle of this proposed lot. Although this swale does not appear to carry surface water, there is seasonal surface water that is evident in at least two areas in this swale. There is water that flows out of the escarpment where this swale terminates on the west side of the lot.

The proposal is to construct and install a dosing septic tank with an effluent pump with timed dosing to the sand filter; a contained sand filter with a center vault and pump; and two drainfields, each consisting of approximately 150 lineal feet. The proposal would use timed dosing to the drainfields. Each dose would be 9.5 gallons. There would be a total of 300 feet of disposal trench installed a minimum of 8 feet on centers, with the trenches a minimum of 18 inches deep. These drainfields would be designed to alternate with each dose, through the use of a Hydroteck valve. Each drainfield would have the effluent distributed equally to the trenches through hydrosplitters. Part of the drainfields would be closer than 50 feet to the center of the drainage area. Eighty (80) feet of the disposal area would be within 25 to 30 feet of the seasonal surface water area.

John A. Kitzhaber
Governor



2020 SW Fourth Avenue
Suite 400
Portland, OR 97201-4987
(503) 229-5263 Voice
TTY (503) 229-5471
DEQ-1

GEORGE KILLIAN

June 19, 1995

Page 2

The house location would be at the Southwest corner of the proposed partition. The construction of this house is proposed to use piers without the necessity of foundation drains. This would allow for disposal trenches to be placed 10 feet from the foundation. This proposal would require variance from the following administrative rules:

- 1) OAR Chap. 340-71-150 (4)(a)(A), which requires that all sites are to meet standard or alternative system rules. A system on this lot cannot meet setbacks to surface waters.
- 2) OAR Chap. 340-71-220 (1)(i), Table 1, which requires septic tanks and contained sand filters to be at least 50 feet from surface waters and springs. You are requesting the setback for the filter to be 25 feet from a seasonal wet area. Table 1 requires a drainfield to be setback 100 feet from a down gradient spring and 50 feet from surface waters. You are requesting a minimum 25 foot setback for a portion of the drainfield to the seasonal wet area.
- 3) OAR Chap. 340-71-220 (7)(a)(D), which requires eight (8) feet of undisturbed earth between disposal trenches. You are requesting to construct these trenches with six (6) feet of undisturbed earth sidewall to sidewall.
- 4) OAR Chap. 340-71-285 (1)(a), which allows only lots created before 1974 to utilize redundant system construction. You are proposing to install both the initial and replacement disposal systems and to have the effluent alternate between the systems.
- 5) OAR Chap 340-71-170 (1), which requires inspections by DEQ unless waived. You are requesting that your designer, Mr. John Smits, R.S., be allowed to conduct all precover inspections, control construction, and to certify to DEQ the construction to be in compliance with plans, specifications, appropriate rule requirements and variance conditions. You are requesting the DEQ to issue a Certificate of Satisfactory Completion based upon the designers inspection records and certification statements.

Based upon my review and evaluation of the variance record, a variance from the above-cited rule is granted. In my view, it would be unreasonably burdensome to prohibit this method of sewage treatment and disposal by strictly following the administrative rules. It is my opinion the system is not likely to present a health hazard risk if operated and maintained properly. It is not probable that the system will have an adverse impact on groundwater below the site or adjoining surface waters.

Specifications for the design and location of the system approved through this variance authorization are contained in the enclosed schedules. This variance has been granted on the condition that the requirements contained in the enclosed schedules are met. Failure to meet any of these conditions shall cause the variance approval to become null and void.

GEORGE KILLIAN

June 19, 1995

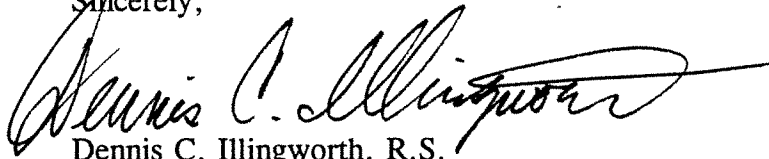
Page 3

Pursuant to OAR 340-71-440, my decision to approve your variance request may be appealed to the Environmental Quality Commission. Requests for appeal must be made by letter, and must clearly state the grounds for the appeal. The letter should be addressed to the Environmental Quality Commission in care of the Director, Department of Environmental Quality, 811 S.W. Sixth Avenue, Portland, Oregon 97204, and be received by the Department within twenty (20) days of the certified mailing of this letter.

The North Coast Branch Office of DEQ in Warrenton, is authorized to issue a construction-installation permit, subject to all of the conditions, upon their receipt of a complete application. The application must include a favorable land use compatibility statement from the Clatsop County Planning Department, detailed plans and specifications for the on-site system, and the appropriate application fee.

Please feel free to contact me if you have questions concerning this decision. My telephone number is (503) 229-6345.

Sincerely,

A handwritten signature in black ink, appearing to read "Dennis C. Illingworth", with a long horizontal flourish extending to the right.

Dennis C. Illingworth, R.S.
Environmental Specialist

DCI:dc

Enclosure

cc: NCBO, DEQ ✓
Smits and Associates
Gregory S. Hathaway; Davis Wright Tremaine, Lawyers

GEORGE KILLIAN

June 19, 1995

Page 4

SCHEDULE A

Special conditions and requirements for the on-site sewage disposal system to be placed on property described as: North part of Tax Lot 800; Section 7CD; Township 4 North; Range 10 West, W.M.; Clatsop County.

1. All work done on this on-site sewage disposal system shall be done by a person or business licensed through the Department of Environmental Quality (hereafter referred to as "Department") in accordance to Oregon Revised Statutes, Chapter 454.695.
2. This on-site sewage treatment and disposal system shall serve one (1) single family dwelling with no more than four (4) bedrooms. The design peak sewage flow shall not exceed four hundred fifty (450) gallons per day, and the average daily sewage flow must not exceed two hundred twenty five (225) gallons per day. It is recommended that low water-use plumbing fixtures and appliances be used within the dwelling where practical, and that the people residing in the home practice water conservation. Use of a garbage disposal is prohibited.
3. All construction of this system shall occur only under optimum soil moisture conditions. As these soils must be nearly dry and not frozen, construction is limited to the period from June 1 through September 30 unless otherwise authorized by the North Coast Branch Office of the Department of Environmental Quality, (hereafter referred to as "NCBO DEQ").
4. The system herein authorized shall require installation of all the following major components and associated materials:
 - a. 1,100 gallon non-metallic dosing septic tank, with pump (pump #1), alarm and controls. The tank shall have 2 full size (20 inch diameter, minimum) riser assemblies, extending at least 1 inch above finished grade. Riser covers shall be gasketed (for odor control) and be capable of being securely attached to the riser. The pump may utilize timed dosing to the sand filter. If this method of dosing is used, each dose shall not exceed 10 gallons. If dosing is achieved through float switches, each dose shall not exceed 45 gals.
 - b. 360 square foot conventional sand filter treatment unit placed within a water-tight containment liner, with a center vault and effluent pump (pump #2). The liner shall meet standards and be installed as per OAR 340-73-080. The liner shall be water tested as prescribed in OAR 340-73-085 (2)(e)(D)(viii)(I);
 - c. Two drainfield systems, each consisting of a minimum of 150 feet of shallow disposal trenches, utilizing pressurized distribution. A total of three hundred (300) feet of drainfield shall be installed. Trenches shall have a minimum of 12 inches of filter material.

GEORGE KILLIAN

June 19, 1995

Page 5

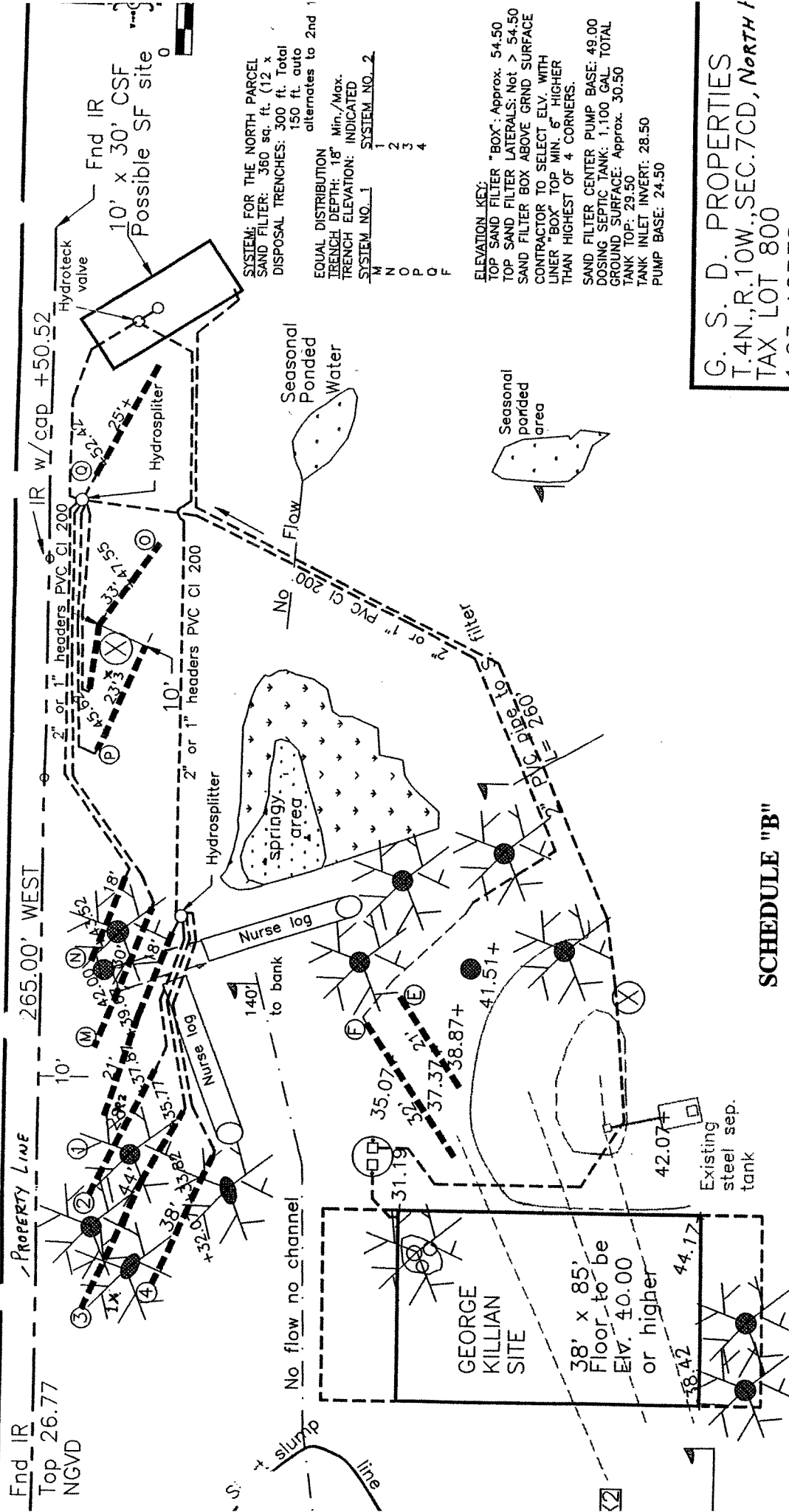
5. The conventional sand filter treatment unit shall be constructed pursuant to OAR 340-71-290(6) and OAR 340-71-295. The pump (pump #2) installed in the center vault of the filter shall be wired to the electrical control panel in a method that will not allow activation of the septic dosing tank pump (pump #1) if the high water alarm of pump #2 is triggered. The pump in the sand filter center vault (pump #2), is to be connected to a timer that will allow only 9.5 gallons of sand filter effluent to be dispersed to one of the drainfields in any one dose. The sand filter shall not be set closer than 25 feet from the surface water areas identified in **Schedule B**.
6. Two drainfield systems, each consisting of one hundred fifty (150) linear feet of disposal trench, shall be installed within the areas indicated in **Schedule B**. No disposal trench shall be closer than 25 feet from the bottom of the swale or surface waters as identified in **Schedule B**. Disposal trenches shall be kept as far from the bottom of the swale and surface water as possible. Each disposal trench shall be installed a minimum of eighteen inches deep, but not deeper than 22 inches into the natural soil profile. These systems are identified as system 1 and system 2 in **Schedule B**. Trenches shall be installed so there is a minimum of 6 feet of undisturbed earth between the sidewalls of the trenches. Each system will alternately be fed effluent equally through a Hydroteck valve. Each system will be designed to allow for equal distribution by utilizing hydrosplitters.
7. The area needed for drainfield construction shall not be altered in any manner that will be detrimental to the on-site sewage disposal system. The present trees and highly variable topography does not lend itself to heavy equipment utilization. Parts of the drainfield will need to be hand dug. Where the proposed drainfield is to be run under a "nurse log" the trench must be hand dug. Clearing the area where the disposal trenches are to be installed of vegetation, organic over-layers and any other material, shall be performed by hand. Modification to the site shall be minimal.
8. Electrically conductive tracer wire or tracer tape shall be placed above the pressure transport pipe (between the pump and the sand filter) and above the piping between the sand filter and the disposal trenches.
9. Rain drains from the home shall be piped away from the drainfields, to suitable areas. They **shall not** be discharged to the designated disposal trench areas.
10. As requested by your variance proposal, Mr. John Smits, R.S., your consultant and designer, shall manage the construction of the entire on-site sewage disposal system. Mr. Smits will make all necessary inspections, keep records of those inspections and certify that the construction follows all approved plans and specifications. The certification will include copies of the inspection reports, a detailed "as built" drawing, and a statement that includes the following; "This on-site sewage disposal system complies with all provisions of the approved plans, specifications and variance conditions and all applicable rules and requirements of OAR Chap 340, Division 71 and 73."

GEORGE KILLIAN

June 19, 1995

Page 6

11. The NCBO DEQ may inspect the installation of this system at various stages of construction. Employees of DEQ may enter the property and inspect the system construction as they consider necessary.
12. Except as specifically authorized, all requirements of the Oregon Administrative Rules, Chapter 340, Rules 71-100 through 71-600 shall be met.
13. The permittee shall comply with all local planning, zoning and building ordinances.
14. All activities which could compact the soils over the disposal system shall be prohibited. If livestock are allowed on the property, the disposal area (including the future repair/replacement area) shall be fenced to prevent damage.
15. **A Certificate of Satisfactory Completion shall be issued for the completed installation only if all conditions of this variance approval are met and the certification meeting the above requirements are received by the NCBO DEQ.**
16. If the on-site sewage treatment and disposal system authorized through this variance proceeding should fail, the NCBO DEQ staff may exercise professional discretion in effecting a repair, based upon an analysis of the possible causes of failure.



G. S. D. PROPERTIES
 T.4N., R.10W., SEC.7CD, North 1
 TAX LOT 800
 1.93 ACRES
 CLATSOP COUNTY

Smits & Associates, Inc.
 Environmental Consultants • Designers
 14687 S.E. Kingston Ave.
 Milwaukie, Oregon 97267-1943
 Ph. (503) 659-5623

DATE: March 20, 1995 SHEET No. 1 OF 1

SCHEDULE "B"

VARIANCE REQUEST
 GEORGE KILLIAN
 TOWNSHIP 4 NORTH, RANGE 10 WEST,
 SECTION 7CD,
 NORTH PART OF TAX LOT 800,
 CLATSOP COUNTY

JUNE 15, 1995

- ⊕ 1,100 gal. precast conc. dosing septic tank Michaels or equal.
- ⊗ TREE, typically large spruce
- +100.78 Ground shot elv. point
- ⊗ 1989 Hopkins/Paeth soil test pits
- ⊗ 1984 Dewey Darold soil pits

SYSTEM: FOR THE NORTH PARCEL
 SAND FILTER: 360 sq. ft. (12 x 30)
 DISPOSAL TRENCHES: 300 ft. Total
 150 ft. auto alternates to 2nd 1

EQUAL DISTRIBUTION
 TRENCH DEPTH: 18" Min./Max.
 TRENCH ELEVATION: INDICATED

SYSTEM NO. 1	SYSTEM NO. 2
M	1
N	2
O	3
P	4
Q	
F	

ELEVATION KEY:
 TOP SAND FILTER "BOX": Approx. 54.50
 TOP SAND FILTER LATERALS: Not > 54.50
 SAND FILTER BOX ABOVE GRND SURFACE
 CONTRACTOR TO SELECT ELV. WITH
 LINER "BOX" TOP MIN. 6" HIGHER
 THAN HIGHEST OF 4 CORNERS.
 SAND FILTER CENTER PUMP BASE: 49.00
 DOSING SEPTIC TANK: 1,100 GAL. TOTAL
 GROUND SURFACE: Approx. 30.50
 TANK TOP: 29.50
 TANK INLET INVERT: 28.50
 PUMP BASE: 24.50

DEPARTMENT OF ENVIRONMENTAL QUALITY

North Coast Branch Office
17 North Highway 101
Warrenton, OR 97146
Phone (503) 861-3280

DEPARTMENT OF
ENVIRONMENTAL
QUALITY

Date: August 9, 1994

G.S.D. Properties
811 NW 19th, Suite 102
Portland, OR 97209

Re: Site Evaluation Denial for On-Site Sewage Disposal
T4N, R10W, Section 7CD, Tax Lot 800, Clatsop County,
1.93 Acres.

Dear Sirs:

In response to the June 22, 1994 site evaluation denial issued on the property for two building sites, it may be possible for the property to support two separate single family dwellings. Initial results showed there to be insufficient area available for another building site due to site features requiring setbacks from the septic system.

Seacoast Nursery Construction, Inc., submitted another application for a site evaluation. In accordance with Oregon Administrative Rule (OAR) 340-71-140(1)(E), each fee paid for a site evaluation report entitles the applicant to as many site inspections on a single parcel or lot as are necessary to determine site suitability for a single system. The applicant may request additional site inspection within 90 days of the initial site evaluation at no extra cost.

If it can be demonstrated by way of a field stake-out that two complete individual on-site sewage disposal systems can be installed on the property and meet all construction and setback requirements, our office would be willing to review the property again within 90 days at no extra charge. The stake-out must be done by a professional qualified consultant, state licensed installer, or other persons experienced in design work relating to siting of septic systems. Please keep in mind that a field stake-out does not guarantee the site will be approved for another single family dwelling.



811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696
TDD (503) 229-6993
DEQ-1

G.S.D. Properties
August 9, 1994
Page 2

The property has already been issued one favorable site evaluation report. It was recently brought to our attention though that after the favorable site report was issued, an existing drainfield was discovered on the property. Part of the approved area for the disposal fields to serve the sand filter system is in the area where existing disposal trenches are located. I recommend that you do not use the existing disposal trenches as part of the field stake out. This way if it is found that the existing trenches cannot be used then you will have demonstrated there is enough area without using these trenches. You may want to hold off on the stake-out until our office has determined whether the existing drainfield can be approved. All new disposal trenches must meet a minimum 10 ft. setback to any portion of the existing trenches.

To pursue re-evaluation of this property use the enclosed plot plans prepared by myself and Smits & Associates for the approved areas. A setback sheet is enclosed. You should already have a copy. Do not use area where the drive way has been constructed.

The stake-out of the proposed systems is accomplished by setting color coded stakes on maximum 15 foot intervals (preferable 10 ft. minimum and maximum) marking the location, contour and length of each disposal trench of both the original and replacement system. The installation of a sand filter system on this property will necessitate 50 lineal feet of disposal trench per 150 gallons projected daily sewage flow, totalling 300 feet of trench per system for each proposed development. The disposal fields shall be designed in serial distribution with a maximum trench depth of 24 inches and a minimum trench depth of 24 inches from the natural ground surface. An engineer level or similar instrument must be utilized for the stakeout. When the site is ready, submit a detailed scale drawn plot plan of the proposed systems to this office and request a re-evaluation. The to-scale plan must show setbacks to all pertinent features including the four corners of both houses, sand filters, dosing tanks, well, drainage way, marine escarpment, property lines, water lines, building foundations, driveway, cutbanks, foundation perimeter drains, etc.

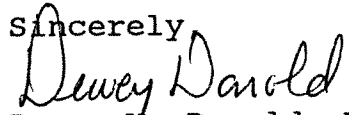
It was mentioned in the June 22, 1994 denial letter that the property appeared to be under the influence of an unstable landform and the installation of two complete on-site sewage disposal systems could be affected by this site condition.

G.S.D. Properties
August 9, 1994
Page 3

Please provide our office with any information you have relating to the potential impacts of installing two complete on-site sewage disposal systems on this property. Geologists report, etc.

If you have any questions regarding this report, please feel welcome to contact our office at (503) 861-3280.

Sincerely,



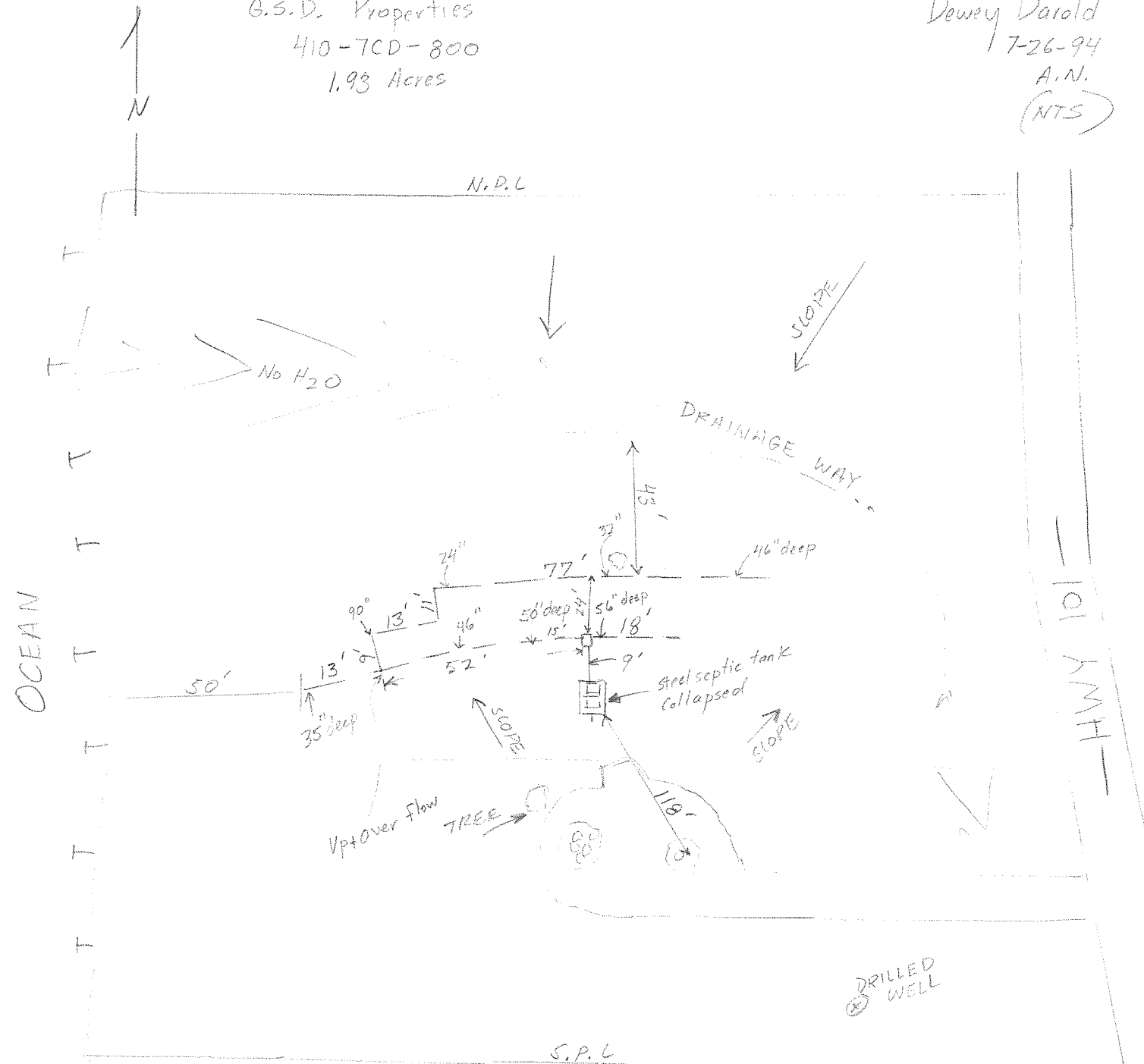
Dewey W. Darold, R.S.
Environmental Specialist
Northwest Region
Water Quality

cc: Seacoast Nursery Construction, Inc.

enc:

G.S.D. Properties
410-7CD-800
1.93 Acres

Dewey Darold
7-26-94
A.N.
(NTS)



- 1) $\frac{1}{2}$ - $\frac{3}{4}$ " drainrock - Filter fabric (R)
- 2) Overflow invert 2" - 3" above top pipe.
- 3) Concrete dist box. Two outlets. 3" H₂O inside box.
- 4) Pipe/gravel level

DEPARTMENT OF ENVIRONMENTAL QUALITY

North Coast Branch Office

17 North Highway 101

Warrenton, OR 97146

Phone (503) 861-3280

DEPARTMENT OF

ENVIRONMENTAL

QUALITY

Date: August 9, 1994

G.S.D. Properties
811 NW 19th, Suite 102
Portland, OR 97209

Re: OSS-Clatsop County
T4N,R10,S7CD,TL800
Authorization Notice Application

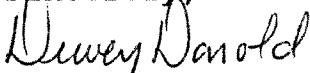
Dear Sirs:

Our office has received an application for an authorization notice for the purpose of connecting to an existing system not currently in use on the above described property. The application is being held pending the receipt of a land use compatibility statement approved by the Clatsop County Planning and Development Department.

Your application must be considered incomplete until the above requested information has been submitted to our office. Once the approved compatibility statement is received by our office, action can then be taken on the application.

If you should have any questions, please feel welcome to contact me at 861-3280.

Sincerely,



Dewey W. Darold, R.S.
Environmental Specialist
Northwest Region
Water Quality

cc: Clatsop County Department of Planning & Development
Seacoast Nursery Construction, Inc.



811 SW Sixth Avenue
Portland, OR 97204-1390
(503) 229-5696
TDD (503) 229-6993



STATE OF OREGON
DEPARTMENT OF ENVIRONMENTAL QUALITY
NORTH COAST OFFICE
749 Commercial, P.O. Box 869
Astoria, Oregon 97701
325-8660 or 1-800-452-4011

FOR OFFICE USE ONLY
Date Rec'd 7-20-94
Date Completed _____
Required Fee NONE/340-71-140 (1)(f)
Receipt No. NONE
Control No. _____

FOR APPLICANT'S USE - (PLEASE PRINT)

1.98
Lot Size (Acreage or Dimensions)

GSD Properties
(Property Owner's Name)

(Applicant's Name if Different from Owner)

Legal Description of Property 4N 10W 7CD 200 CLATSOP
(Township) (Range) (Section) (Tax Lot/Acct. No.) (County)

For Parcels in Platted Subdivisions, Indicate (Subdivision Name) (Lot Number) (Block Number)

Proposed Facility

Water Supply

☒ Single Family Residence 4
(Number of Bedrooms)
☐ Other _____
(Specify)

☐ Public (Community System)
☒ Private Well
(Indicate: Well, Spring, Etc.)

Existing Facility

☐ Single Family Residence _____
(Number of Bedrooms)
☐ Other _____
(Specify)

APPLICATION FOR:

☒ Site Evaluation Report
☐ Permit to Construct On-Site Sewage Disposal System
☐ Permit to Repair On-Site Sewage Disposal System
☐ Permit for Alteration of On-Site Sewage Disposal System
☐ Permit Renewal
☐ Existing System Report
☐ Plan Review
☐ Other (Specify) _____

☒ Authorization Notice
Purpose of Authorization Notice
☐ Connect to an existing system not currently in use
☐ Replace one mobile home with another or a house
☐ Replace or rebuild a house
☐ Addition of one or more bedroom
☐ Personal hardship
☐ Temporary housing
☐ Other (Specify) _____

This application will be returned if it is not filled out completely and accompanied by the appropriate fee and attachments required in the guidance packet. Your site must be prepared according to instructions in the guidance packet before action can be taken on this application.

By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agent permission to enter onto the above described property for the purpose of this application.

David Dalg
(Signature)

7-14-94
(Date)

☒ Authorized Representative
☐ Licensed Installer
License No. 33079-P

Owner's Mailing Address

Applicant's Mailing Address (if different)

GSD Properties
811 NW 19TH
PORTLAND OR 97209

SEACOAST NURSERY CONST INC.
3111 N HWY 101
SEASIDE OR 97138

Phone _____

Phone 738-6401

IW\WC8\WC8690 (7-19-91)

STATE OF OREGON
DEPARTMENT OF ENVIRONMENTAL QUALITY
NORTH COAST OFFICE
749 Commercial, P.O. Box 869
Astoria, Oregon 97701
325-8660 or 1-800-452-4011

FOR OFFICE USE ONLY
Date Rec'd 7-20-94
Date Completed _____
Required Fee 160.00
Receipt No. 63040
Control No. _____

3

OR APPLICANT'S USE (PLEASE PRINT)

1.98
Lot Size (Acreage or Dimensions)

GSD Properties
(Property Owner's Name)
Legal Description of Property 4 10 7CD 800 Clatsop
(Township) (Range) (Section) (Tax Lot/Acct. No.) (County)
For Parcels in Platted Subdivisions, Indicate (Subdivision Name) (Lot Number) (Block Number)

Proposed Facility Water Supply
☒ Single Family Residence 4 (Number of Bedrooms) ☐ Public (Community System)
☐ Other _____ (Specify) ☒ Private well (Indicate: Well Spring, Etc.)

Existing Facility
☐ Single Family Residence _____ (Number of Bedrooms)
☐ Other _____ (Specify)

APPLICATION FOR:

- | | |
|--|--|
| ☐ Site Evaluation Report | ☒ Authorization Notice |
| ☐ Permit to Construct On-Site Sewage Disposal System | ☒ Purpose of Authorization Notice |
| ☐ Permit to Repair On-Site Sewage Disposal System | ☒ Connect to an existing system not currently in use |
| ☐ Permit for Alteration of On-Site Sewage Disposal System | ☐ Replace one mobile home with another or a house |
| ☐ Permit Renewal | ☐ Replace or rebuild a house |
| ☐ Existing System Report | ☐ Addition of one or more bedroom |
| ☐ Plan Review | ☐ Personal hardship |
| ☐ Other (Specify) _____ | ☐ Temporary housing |
| | ☐ Other (Specify) _____ |

This application will be returned if it is not filled out completely and accompanied by the appropriate fee and attachments required in the guidance packet. Your site must be prepared according to instructions in the guidance packet before action can be taken on this application.
By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agent permission to enter onto the above described property for the purpose of this application.

David Duling
(Signature)

7-14-94 (Date) ☒ Authorized Representative
☐ Licensed Installer
License No. 33079-P

Owner's Mailing Address
GSD Properties
841 NW 19th Suite 102
Portland, Ore. 97209
Phone 250 600 1000

Applicant's Mailing Address (if different)
SEACREST NURSERY CONST INC
3111 N Hwy 101
SEASIDE OR 97138
Phone 738-6401 IW\WCB\WCB690 (7-19-91)

EXISTING SEWAGE DISPOSAL SYSTEM DESCRIPTION

Answer the following as best you can.

1. The existing sewage disposal system consists of (check):

☒ Septic Tank ☐ Disposal Trenches ☐ Unknown
☐ Seepage Bed ☐ Cesspool or Pit
☐ Other -- (Describe) _____

2. When was your sewage disposal system installed? 189 104R A60
(Year) (Permit No.)

3. Tank material:

☒ Steel ☐ Concrete ☐ Fiberglass
☐ Polyethylene ☐ Unknown

4. Volume of the septic tank in gallons. 1000'

5. When was the septic tank last pumped? NA (New) (Attach Receipt)

6. Number of disposal trenches. 3

7. Total length of disposal trenches (feet). 225'

8. Is your sewage disposal system currently in use? Yes ☐, No ☒
If no, how long has the system been out of use? 104R

9. If the sewage disposal system serves a dwelling, how many bedrooms in the dwelling? 10 How many people occupy the dwelling? _____

10. If the sewage disposal system serves a business, how many employees do you employ? NA Type of business. _____

11. Provide a plot plan on the reverse side of this form showing actual measurements that locates the existing septic tank and disposal field, property lines, easements, existing structures, driveways, wells and springs. Indicate North direction.

By my signature, I certify the plot plan on the reverse side and the above information is accurate and true to the best of my knowledge.

8-1-94

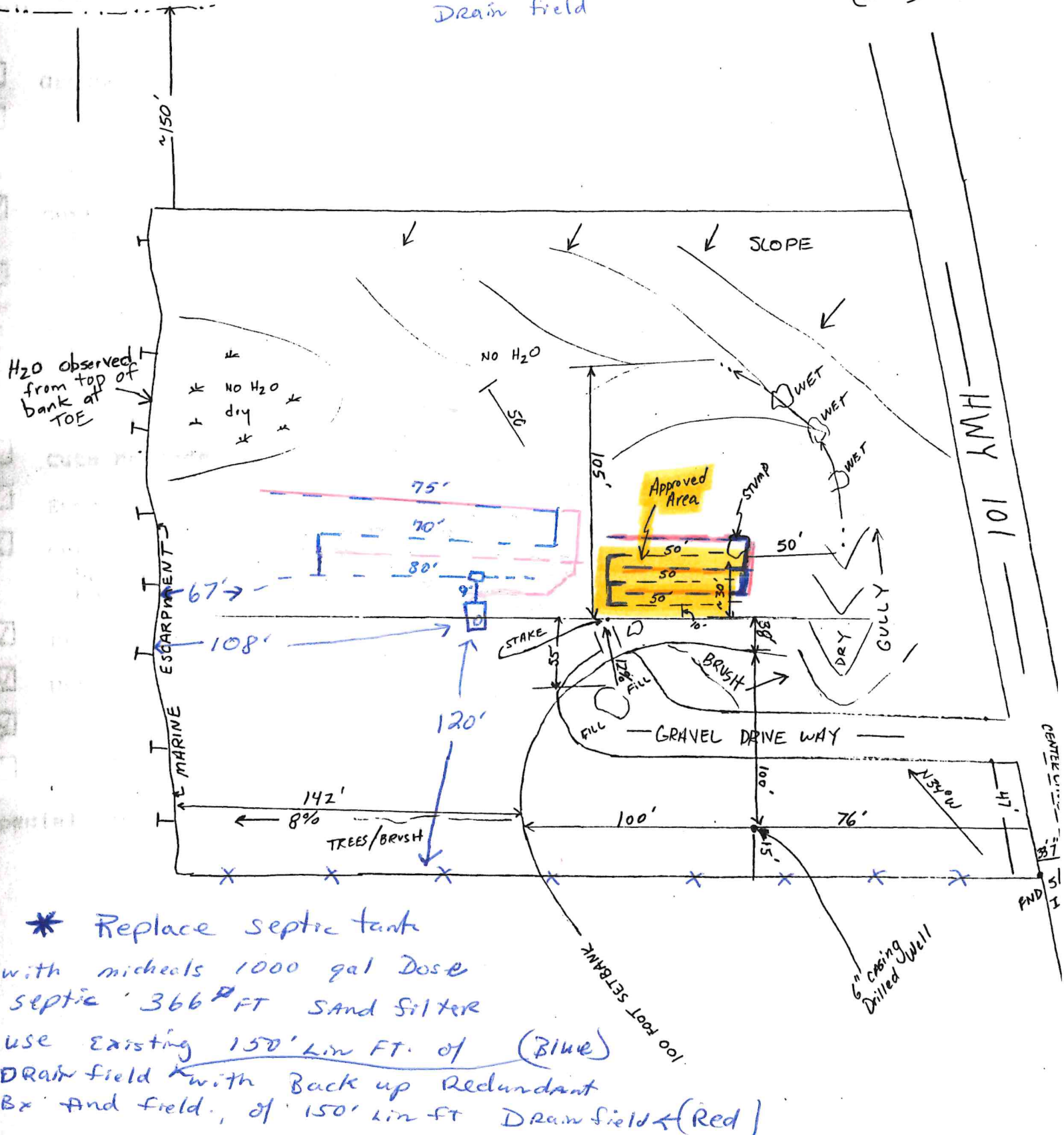
Date



Signature of Property Owner or
Legally Authorized Representative

Dewey Darold
6-6-94
S.E.
(NTS)

Approved area
for Redundant
system of 300 h₂ ft.
Drain field



DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

JUL 20 1994

NORTH OREGON HIGH OFFICE
WARRENTON

DEPARTMENT OF ENVIRONMENTAL QUALITY

North Coast Branch Office
17 North Highway 101
Warrenton, OR 97146
Phone (503) 861-3280

DEPARTMENT OF
ENVIRONMENTAL
QUALITY

Date: June 22, 1994

G.S.D. Properties
811 NW 19th, Suite 102
Portland, OR 97209

Re: Site Evaluation Denial for On-Site Sewage Disposal
T4N, R10W, Section 7CD, Tax Lot 800, Clatsop County,
1.93 Acres.

Dear Sirs:

Department personnel have conducted an evaluation of the above described property for a single family residential building site in the area proposed for on-site sewage disposal. Based upon the results of this study, neither standard or alternative methods of on-site sewage disposal appear feasible. The conditions on the site do not meet current minimum requirements of the State regulations governing on-site sewage disposal, Oregon Administrative Rules (OAR) Chapter 340, Division 71, Sections 100 through 600, including Tables 1 through 8. As a result your application request must be denied.

The principle reasons for the denial of this property are related to setbacks, lot size and topography. The following paragraphs outline the findings in comparison to rule requirements.

SETBACKS

With the proposed development of two single family dwellings on this 1.93 acre parcel, a complete on-site sewage disposal system (initial and replacement disposal fields) constructed adequate in capacity cannot meet all applicable setbacks. Setbacks to the house foundation, water lines, property lines, perimeter house drains, marine bluff, drainage swale, well, area encumbered with the gravel driveway provides insufficient acceptable area.



811 SW Sixth Avenue
Portland, OR 97204-139
(503) 229-5696
TDD (503) 229-6993
DEQ-1

G.S.D. Properties
June 22, 1994
Page 2

TOPOGRAPHY

The site conditions are described as follows:

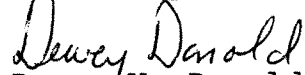
The slope averages about 20% to 22%.

this property appears to be located on the influence of an unstable land form (slump block, sloughing, landslide etc.) The installation of two complete on-site sewage disposal systems could be adversely affected by this site condition.

This site may be eligible for a variance through the Department's On-Site Sewage Disposal Program. The variance procedure allows for consideration where strict compliance with a rule or rules is inappropriate for cause or where special physical conditions render strict compliance unreasonable, burdensome or impractical. The burden of proof rests with the variance applicant. In this regard, many seek professional assistance. More information can be obtained by contacting this office.

If you have any questions regarding this report, please feel welcome to contact our office at (503) 861-3280. If after discussing this matter with us, you feel an error has been made or if you desire a review of the findings and determination, you may request an evaluation by the Department's Northwest Region. Such a review requires an application and fee of \$200.00. A report review request should be made to the Department of Environmental Quality, Northwest Region, 2020 SW 4th Avenue, Suite 400, Portland, OR 97201, telephone (503) 229-5552.

Sincerely,

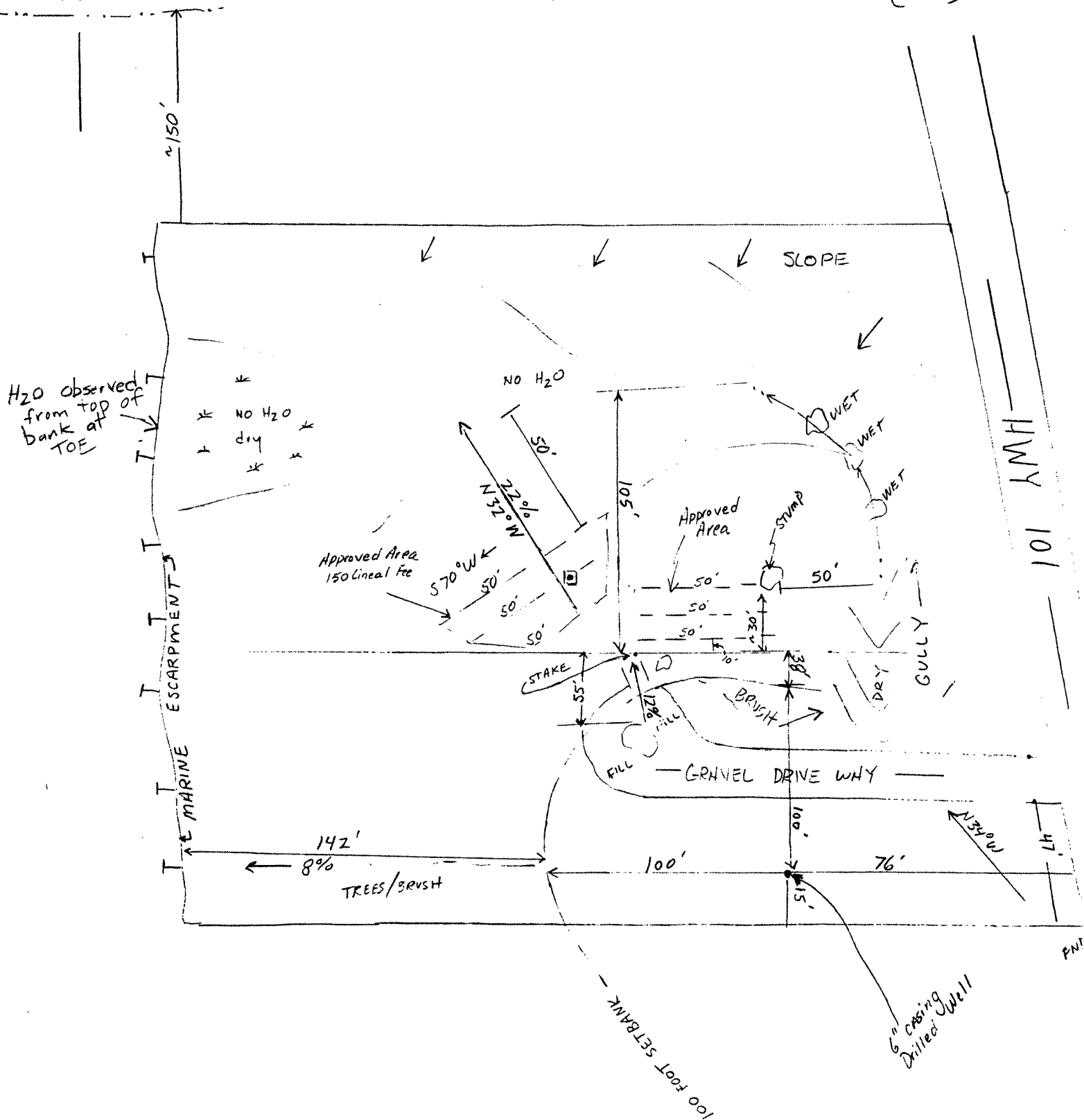


Dewey W. Darold, R.S.
Environmental Specialist
Northwest Region
Water Quality

cc: Richard Ballew

1
N

Dewey Darold
6-6-94
S.E.
(NTS)



MINIMUM SETBACK REQUIREMENTS

Date 6-22-94

Applicant G.S.D. Properties

Tax Lot 800 Section 7CD Twp 4 Rng 10 Acreage 1.9

SETBACK REQUIRED
(as marked)

DISPOSAL FIELD
OR AREA¹

TREATMENT AND
DISTRIBUTION UNITS

☒	Groundwater Supplies (wells) ³	100'	50'
☐	Springs		
	Upslope from system	50'	50'
	Downslope from system	100'	50'
☒	Surface Public Waters ⁴	100'	50'
	For Sand Filter System (only)	50'	50'
☒	Intermittent Streams ⁵	50'	50'
☒	Groundwater Interceptors ⁶		
	On a slope 3% or less	20'	20'
	On a slope greater than 3%		
	- Upslope from system	10'	10'
	- Downslope from system	50'	25'
☐	Cuts Manmade ⁷	<u>50'</u>	<u>25'</u>
☒	Escarpments ⁸	<u>50'</u>	<u>10'</u>
☒	Curtain Drains		
	Upslope from system	10'	10'
	Downslope from system	50'	25'
☒	Property Lines	10'	10'
☒	Water Lines	10'	10'
☒	Building Foundations (all)	10'	5'
☐	Other _____	_____	_____

Special Conditions: _____

¹ Includes all disposal trenches, "bottomless" sand filter, seepage beds and replacement area.

² Includes septic tank, effluent sewer, header pipes, drop boxes, distribution box, sand filter, dosing tank, pressure line, etc.

Means creeks, streams, rivers, lakes, bays, ponds, marshes, reservoirs, etc.; public
private, natural or man-made; setback measured from bar p-off or mean yearly high
mark.

Drainageway or groundwater interceptor that continuously flows water for a period of
greater than 2 months but not continuously for any year.

Any natural or artificial groundwater or surface water drainage system including foot
drains, agricultural drain tile, ditches, etc.

Land surface as a result of mechanical land shaping where the modified slope exceeds
percent, and the depth of the cut exceeds thirty (30) inches or the effective soil depth

Natural occurring slopes greater than 50% which extend vertically 6 feet or more
calculated from top to toe characterized by a cliff or steep hillside; setback is
measured from top of slope break.

Dewey Darold
Sanitarian, DEQ Astoria Branch Office

DEPARTMENT OF ENVIRONMENTAL QUALITY
North Coast Branch Office
17 North Highway 101
Warrenton, OR 97146
Phone (503) 861-3280

DATE: June 7, 1994

TO: G.S.D. Properties File
T4N,R10W,S7CD,TL800

FROM: Dewey W. Darold, R.S.
Environmental Specialist

SUBJECT: Field Visit

On June 6, 1994, I conducted a site visit to the above described property to evaluate site and soil conditions relating to an application made at our office for two site evaluations.

During the site visit, one old shallow test pit was able to be located on the property. The test pit had collapsed and did not provide sufficient depth for examination. I called Mr. Richard Balley and requested that additional test pits be dug in area which was shown on a plan I faxed to him.

This property had two favorable site evaluation reports already issued; one on March 14, 1990 (lot # 2 middle lot) for a sand filter system and the other on December 28, 1989 (lot # 3 south lot) for a standard serial distribution system. On January 18, 1993 a well was drilled on this property. Since conditions have changed on the subject property, the approved areas for both systems do not meet the 100 foot setback to the well. This is evident by the plan submit with the application showing the well location. As a result, the past site favorable site evaluation reports are now null and void. Furthermore, the approved area for the drainfield on lot # 3 has been filled with gravel to make way for a driveway.

STATE OF OREGON
DEPARTMENT OF ENVIRONMENTAL QUALITY
NORTH COAST OFFICE
17 N. Highway 101
Warrenton, OR 97146
(503) 861-3280

FOR OFFICE USE ONLY
Date Rec'd 5-12-94
Date Completed 6-22-94
Required Fee 490.00
Receipt No. 61536
Control No. _____

FOR APPLICANT'S USE - (PLEASE PRINT)

G. S. D. Properties
(Property Owner's Name)
Lot Size (Acreage or Dimensions) 1.93 A
RICHARD BALLEW
(Applicant's Name if Different from Owner)
Legal Description 4 N 10 W 7 CD 800 CLAT
of Property (Township) (Range) (Section) (Tax Lot/Acct. No.) (County)
For Parcels in Platted Subdivisions, Indicate (Subdivision Name) (Lot Number) (Block Number)

Proposed Facility

Water Supply

☒ Single Family Residence (2) 4BR
(Number of Bedrooms)
☐ Other _____
(Specify)

☐ Public (Community System)
☒ Private
(Indicate: Well, Spring, Etc)

Existing Facility

☐ Single Family Residence _____
(Number of Bedrooms)
☐ Other _____
(Specify)

APPLICATION FOR:

☒ Site Evaluation Report
☐ Permit to Construct On-Site Sewage Disposal System
☐ Permit to Repair On-Site Sewage Disposal System
☐ Permit for Alteration of On-Site Sewage Disposal System
☐ Permit Renewal
☐ Existing System Report
☐ Plan Review
☐ Other (Specify) _____

☐ Authorization Notice
Purpose of Authorization Notice
☐ Connect to an existing system not currently in use
☐ Replace one mobile home with another or a house
☐ Replace or rebuild a house
☐ Addition of one or more bedrooms
☐ Personal hardship
☐ Temporary housing
☐ Other (Specify) _____

This application will be returned if it is not filled out completely and accompanied by the appropriate fee and attachments required in the guidance packet. Your site must be prepared according to instructions in the guidance packet before action can be taken on this application. By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agent permission to enter onto the above described property for the purpose of this application.

Richard Ballew
(Signature)

5-12-94
(Date)

☒ Authorized Representative
☐ Licensed Installer
License No. _____

Owner's Mailing Address
616 PALO ALTO DRIVE
VANCOUVER WASH 98661

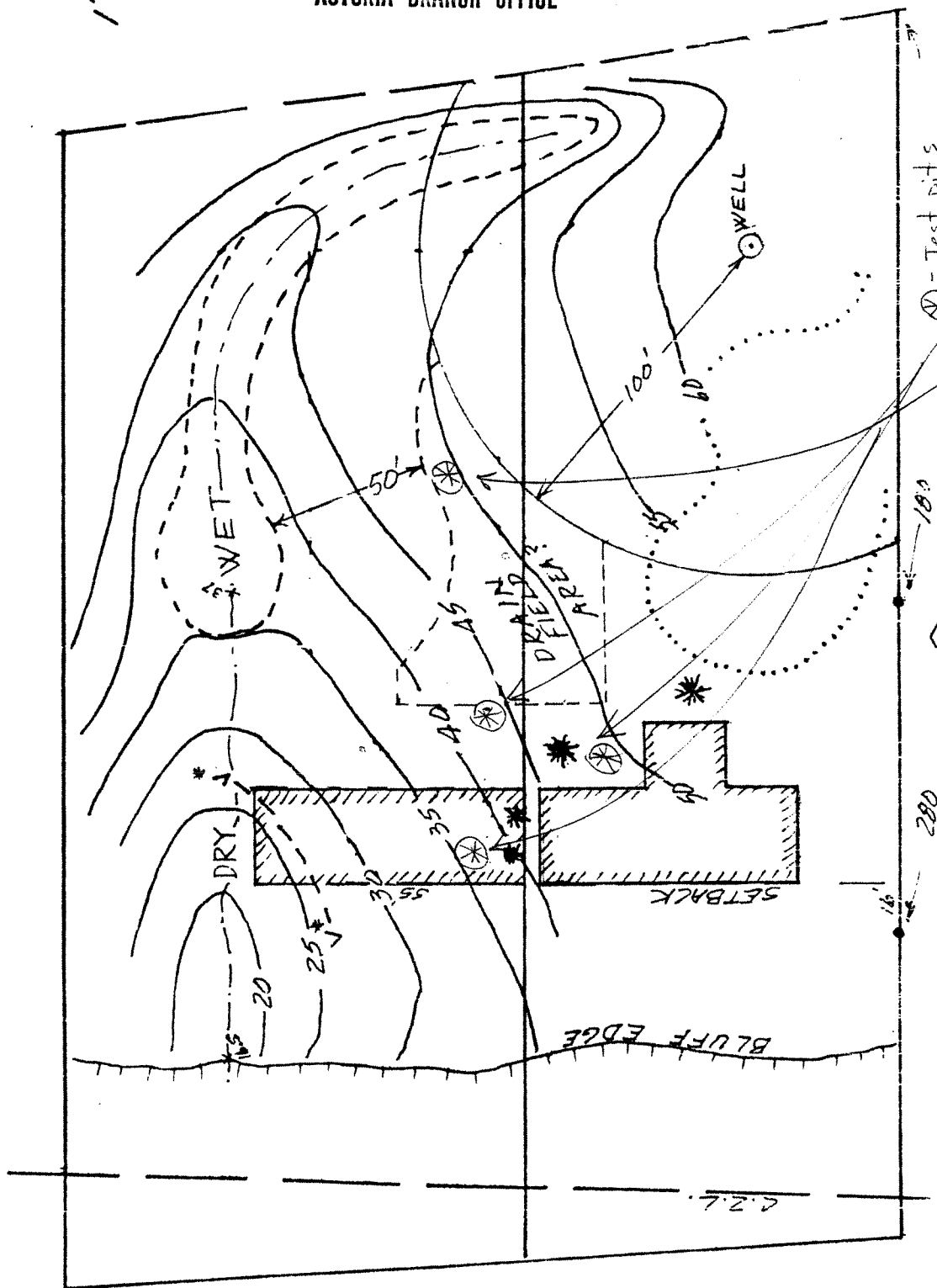
Applicant's Mailing Address (if different)
SAME

Phone 206-695-7091

Phone _____

IW\WC8\WC8690 (7-19-91)

MAY 12 1994

ASTORIA BRANCH OFFICE $1'' = 50'$ 

$\otimes = \text{Test pit}$

2' wide, 4' long 5' deep & easily accessible

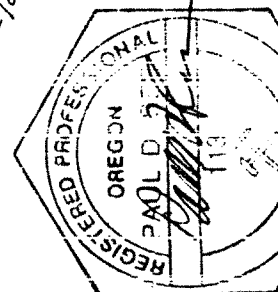
CONTOUR SKETCH, TAX LOT 800

T4N, R10W, Sec 7CD, Arcadia Bch.

W/ bluff edge, water well, and

marsh setbacks. Contours approx.

P. See 4/94 #3044



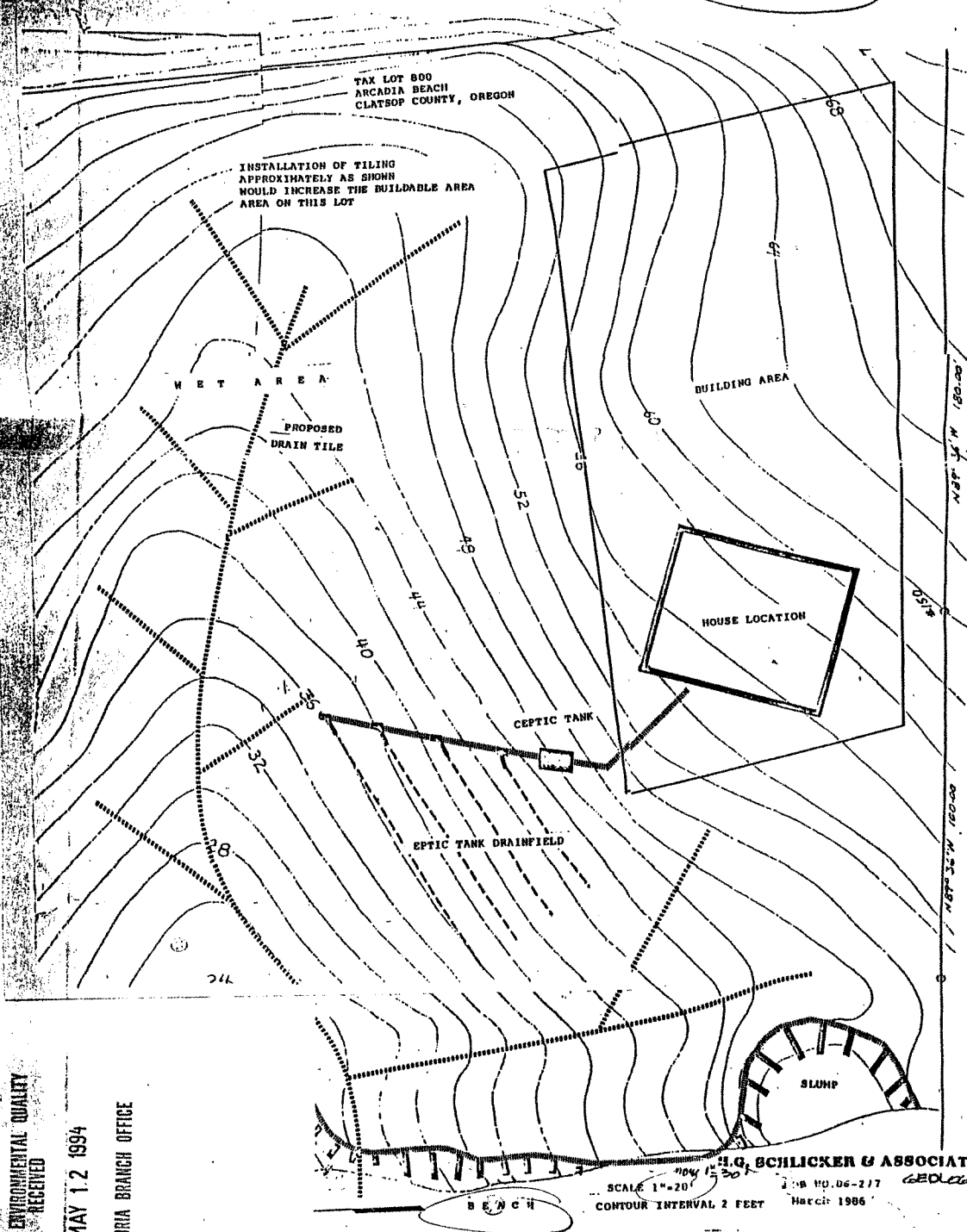
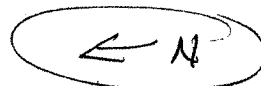
* Floor must be above 26' "V" Zone elevation

Sent 6-7-94 1-206-694-9578 FAX
Test pit locations
No test pits dug during 6-6-94
Site visit.

5-12-94

DICK - I SHRANK THE MAPS TO
THE SAME SCALE - 1/8"
SHOWS BUILDABLE AREA
100' FROM CLIFF.

Jam



405208

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

MAY 12 1994

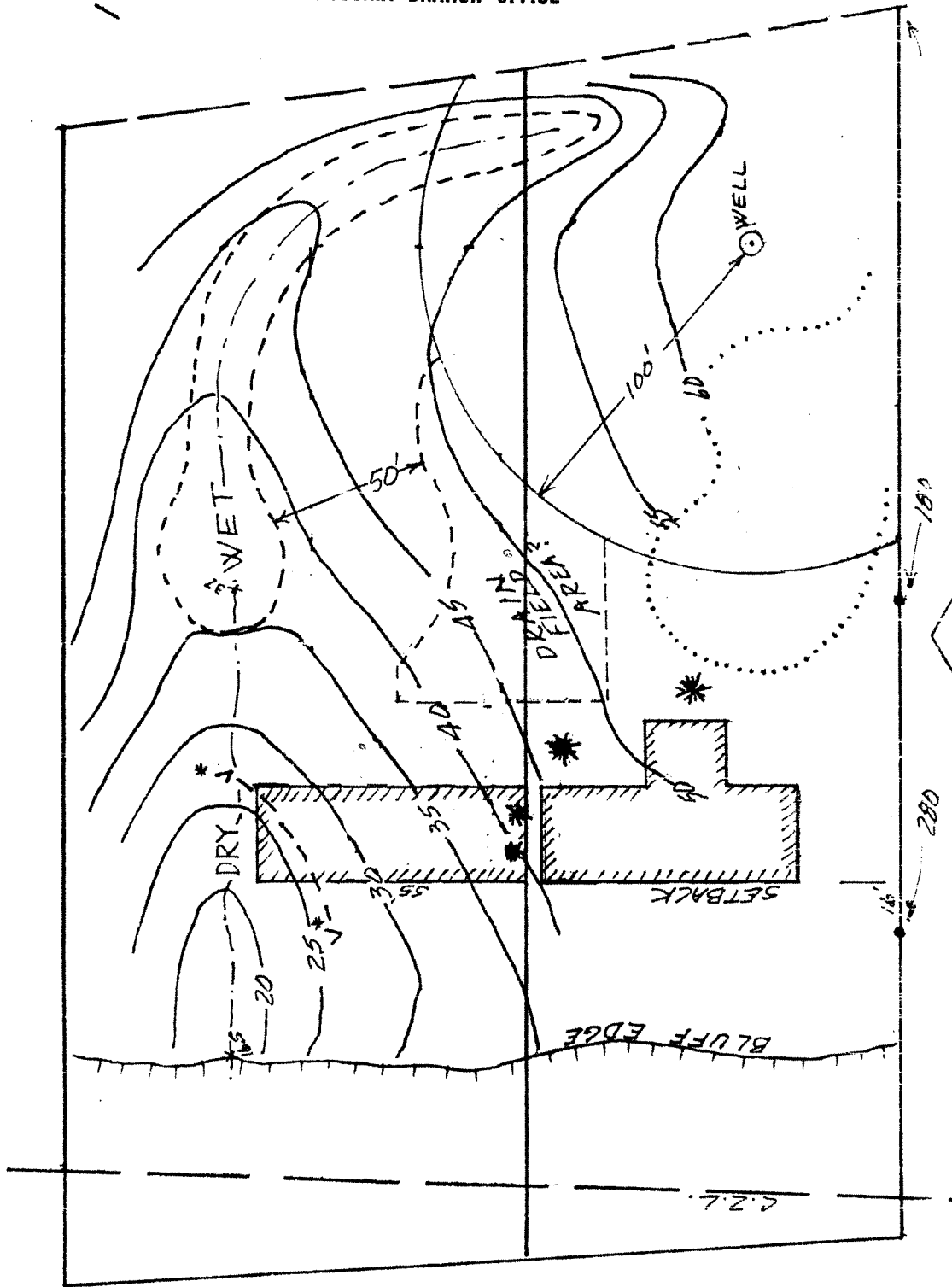
ASTORIA BRANCH OFFICE

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

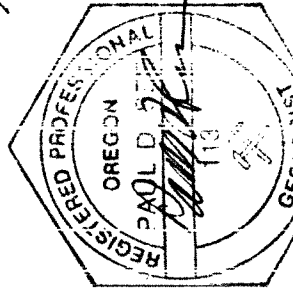
MAY 12 1994

ASTORIA BRANCH OFFICE

1" = 50'



CONTOUR SKETCH, TAX LOT 800
T4N, R10W, Sec 7CD, Arcadia Bch.
W/ bluff edge, water well, and
marsh setbacks. Contours approx.
P. See 4/94 #3044



* Floor must be above 26'
"1" Zone elevation

5-12-94

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

PAUL D. SEE AND ASSOCIATES, INC.

MAY 12 1994

300 SURF PINES ROAD
SEASIDE, OREGON 97138
738-5869

ASTORIA BRANCH OFFICE



January 21, 1993

#17013

George Killian
820 S. E. 73rd. Ave.
Vancouver, WA 98664

RE: Completion of domestic water well, Tax Lot 800, T4N, R10W, Sec
7CD, Arcadia Beach.

Dear George:

As per your request, I have overseen site preparation and drilling on the Arcadia parcel, and am pleased to confirm that a good producing aquifer was encountered at an initial depth of about 80 feet. Static water level rose to 58 feet, and the well was drilled 15+/- feet farther into the water-bearing unit for a total depth of 95 feet.

Because the shallower marine terrace material had caved repeatedly on the first day of drilling, the operator spent much of the second day redrilling through the sandy clay that filled the hole. Upon reaching a hard, basaltic conglomerate which initially yielded about seven GPM, he elected to set steel casing from the surface to that point. He then drilled on through the conglomerate into what appears to be massive basalt. After driving the casing another four feet to assure isolation from the overlying sandstone, he was able to draw a maximum of 30 GPM.

Because of the severe storm on Wednesday he was not able to reach the site via Highway 26, but retested the well today at different pumping levels. Following are the results of those tests, as relayed by the driller:

Yield, pumping from bottom of well: 30 GPM, with some sand.

Yield, pumping from 88 ft.: 18 GPM, clean, no sand. Iron: 2.5 ppm, (good)
Hardness: 10 grains (good), pH 7.0 (neutral). No salty taste.

The driller recommends that the well not be pumped at a rate greater than 18 GPM (25,920 GPD) to avoid bottom-hole velocities that would cause sand to migrate downward around the casing and into the well. He did, however, remark that the yield might be increased to maximum by redrilling and cementing around the casing into the top of the gravels. Doing so, however, is a risk in that we are not sure of the true producing thickness, and the cement could block all production if not strategically placed. Because it appears that the drill bottomed in hard, probably impermeable basalt, I would recommend caution in trying to improve on 18 GPM. With proper storage, that yield would supply over 50 houses at normal 450 GPD averages.

From a geologic perspective, I believe we encountered a very narrow N-S band

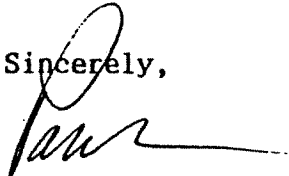
See/Killian
1/21/93

of gravels that represent an ancient beach at the contact between a basaltic seacliff of Tertiary age and the overlying Pleistocene terrace sediments. Quite likely this band of exceptionally clean and surf-rounded pebbles is not more than a few tens of feet in width, as we see such beach deposits today. I would like to brag that I selected the site on this premise, but I must concede that it was 99.9 percent pure luck. This is the only non-dune aquifer well that I am aware of between Silver Point and Nehalem capable of more than a couple of gallons per minute.

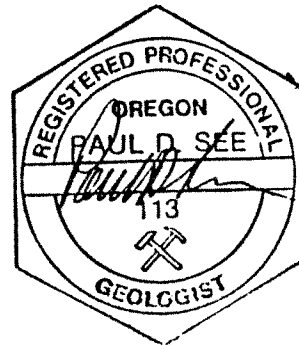
Note that steel casing was set rather than PVC at a difference in cost of \$2.00 per foot, as per the drilling proposal. Although PVC would be preferable under most circumstances, steel is more resistant to vandalism at a site such as this, until the property is occupied.

I believe you have all of the necessary information to date. I should point out, however, that we do not know the capacity of this aquifer other than the fact that the static level recovered almost immediately after pumping, which is a very good sign. It is remotely possible, though, that the yield could slowly diminish over time. That is a fact of life with any newly discovered aquifer, but with continued good luck you will have an abundant supply for decades to come. Thank you for the opportunity to be of service.

Sincerely,



Paul D. See



(START CARD) # 50498

Well Number.

WWC Number 1

FOR WATER RESOURCES DEPARTMENT USE ONLY	
Date Postmarked	W-50498
Date Hand-delivered	WRD Receipt
Watermaster Initials	Date Fee Received

CHECK NO. _____

START CARD

NOTICE OF BEGINNING OF WELL CONSTRUCTION

(as required by ORS 537.762)

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original mailed or delivered to the Water Resources Department, 3850 Portland Road NE, Salem, OR 97310, no later than the day construction, alteration, conversion or abandonment work begins. A **\$75 fee shall accompany all notices for new well construction or conversion of an existing hole not previously used as a water well** (make checks payable to the Water Resources Department). Notices meeting this requirement but received without the required fee will not be accepted as properly and timely filed. The Water Resources Commission has authority to impose civil penalties for failure to submit the required \$75 fee with the start card and for failure to submit cards prior to beginning any construction, alteration, conversion or abandonment work.

Owner's name and mailing address George K. Ilian
820 S.E. 73rd Ave
Vancouver Wash 98664

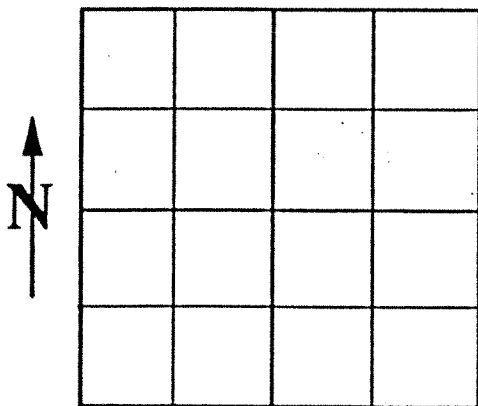
Check type of work: Fee Required ☐ New construction ☐ Conversion No Fee Required ☐ Repair ☐ Deepening ☐ Recondition ☐ Abandonment

Proposed Commencement Date 1/19/93 Existing or Proposed Well Depth 100 Diameter 6

Check Use: ☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation ☐ Monitoring ☐ Thermal ☐ Injection ☐ Other _____

Proposed Well Location: County Clatsop Owner's Well Id. No. _____

Township 4N (N or S) Range 10W (E or W) Section 7



1. SE 1/4 of SW 1/4 of above section

2. Street address of well location none

3. Tax lot number of well location 300

4. Attach map with location identified.
(See reverse of this form for approved maps)

5. Show well location within 1/4, 1/4 of section grid at left.

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks, septic drain fields and other hazards. (See #2 on back)

Owner's signature

Title

Home phone

Date

Work phone

[Signature]
Bonded Water / Monitor Well Constructor

License No. 1266

Company A.M. Janssen & Son, Inc.

NOTE: This is not a water right application. The owner is responsible for obtaining a water right through the Water Resources Department, if required.

PAUL D. SEE AND ASSOCIATES, INC.

MAY 12 1994

300 SURF PINES ROAD
SEASIDE, OREGON 97138
738-5869

ASTORIA BRANCH OFFICE



April 18, 1994

#3044

Dick Ballew
616 Palo Alto
Vancouver, WA 98661

RE: Geologic inspection, northern 125+/- feet of Tax Lot 800, T4N, R10W,
Section 7CD, Arcadia Beach.

Dear Mr. Ballew:

The following letter report documents my inspection of the above described parcel with you on April 6 to evaluate potential geologic hazards, and specifically to recommend a construction setback from the ocean bluff. I understand a dwelling is proposed on the northwesterly quarter of Tax Lot 800, and that the existing lot will be divided into approximately equal halves.

As you are aware, I initially walked the property with Elaine Killian in November of 1992, and prepared a very preliminary assessment of geologic hazards. Tom Bender, Architect, has supplied me with the 1985 report on this property by H. G. Schlicker*, and I am familiar with the 1978 regional hazard study by Marty Ross**. I also obtained a copy of the Handforth Larson and Barrett, Inc. topographic map of the southern portion of Tax Lot 800 to verify field measurements along the line common to the two parcels.

TOPOGRAPHY AND GEOLOGIC HISTORY OF THE AREA

This portion of Tax Lot 800 is inclined to the northwest at an average slope of 25 percent on the westernmost half. Slopes on the easternmost half are somewhat irregular and vary from 25 to 35 percent, influenced by a nearby intermittent stream gulley. Maximum elevation of the shoreline cliff on this portion of Tax Lot 800 lies at the southernmost point, measured at 25.5 feet above current beach level, or about 36 feet NGVD. The cliff edge drops northerly along this frontage to an elevation of 16.5+/- feet NGVD at the intermittent stream gulley 50+/- feet south of the northerly property line.

The local terrain consists of Pleistocene "terrace" sediments, deposited unconformably against the older Tertiary rocks above Highway 101. The terrace materials are deposited horizontally, and consist of very soft and plastic gray clays with layers of organic forest-floor debris and irregular deposits of sand and gravel. The clays are inherently saturated as evidenced by the numerous small springs and weep zones evident in the shoreline cliffs. While this unit is customarily described as a marine deposit, abundant local evidence strongly suggests a non-marine tidelands type accumulation, with numerous small streams leaving meandering channels of gravel.

Although Schlicker estimates the Pleistocene unit to be about 40 feet thick

See/Ballex
4/19/94

and resting directly on Tertiary sediment, results of drilling for water on this property reveal a total thickness of 85 or more feet, extending to 20+/- feet below sea level.

The Pleistocene is notorious for sloughing along the shoreline cliffs, as well described by Ross and Schlicker. Indeed, this entire frontage has undergone continuous erosion as well as segmental failure in the recent past, and will undoubtedly continue to do so until this entire terrace remnant is removed in the distant future. The rate of this regression then becomes a primary factor in determining a safe construction setback from the current terrace edge.

LOCAL HAZARD ASSESSMENT

Four factors are critical with respect to siting a dwelling on this portion of the property: 1) the rate of bluff erosion as noted above, 2) the ultimate floor grade elevation with respect to velocity flooding, 3) the very plastic and often saturated nature of the sediments at depth, and 4) reserving a sufficient acceptable area for a septic drainfield, including a backup system. These are discussed in order below.

1) We have calculated the overall rate of bluff retreat over the past 55 years, based on a 1939 US Corps of Engineers aerial photo, 1967, 1973 and 1978 ODOT Coastal Mosaic aerial photos, as well as personal measurements of the bluff edge along the southern 100 feet of Tax Lot 800, utilizing a small basaltic monolith on the beach as a fixed reference. Because the apparent bluff edge is misleading due to periodic sloughing over this time span, it is necessary to estimate the true amount of retreat by discounting the reversals caused by sloughing. Current on-site measurements result in an estimated six-foot local westerly encroachment of bluff materials onto the beach for a present 85-foot distance between the base of the cliff and the vertical western edge of the beach monolith. Adding six feet for sloughing, this would equate to a total of 91 feet to the true bluff edge beneath the slide blocks. Circumstances measured along the southern 100 feet are identical to those of this parcel, with the exception of the bluff height.

Quite surprisingly, the 1939 Corps of Engineers photo at 1"=920' appears to show a 82.8 (say 83) foot distance from the monolith, for a 1.8 (say 2) inch annual rate of retreat over the 55-year span, allowing for error in photo measurement and estimated width of the present slump blocks. The slight westerly bulge in the 1967 through current bluff base is not present in the Corps of Engineers photo, indicating that significant sloughing began occurring between 1939 and 1967. Quite likely, bluff collapse was accelerated during and shortly after the 1982-83 El Nino event in the Pacific, which is consistent with Schlicker's observations relative to a fresh escarpment near the southerly property line and the apparently subsequent failure along the entire frontage. (Schlicker's map dated 1985 erroneously indicates a deep bowl-shaped slump for which there is no evidence but rather a narrow sloughing along much of the subject frontage.)

This rate of retrogression, if consistent into the future, would result in a ten-foot lateral loss of terrace in the next 60 years. However, this should be considered an absolute minimum, and I would be much more comfortable in recommending an eight-inch per year factor, based on the several variables involved and their unpredictability. At eight inches per year, a foundation set 40 feet from the current edge would be at risk only after 60 years, ignoring the effects of a major Cascadia earthquake, as discussed below.

It should be noted that the conventional wisdom relative to erosion rates along this portion of the coastline has been somewhat more than two inches per year. Based on other nearby investigations, we have personally estimated rates of retreat in the order of four to six inches per year, and rates exceeded ten feet per year in identical materials south of Arch Cape during the El Nino event, causing considerable destruction and loss of dwellings. However, it has recently been determined through historical research that the 1982-83 El Nino was one of the most severe episodes in a 400+ year period.

2) The Federal Emergency Management Administration National Flood Insurance Rate Map # 410027-0050-A defines this segment of shoreline as V-15, elevation 26 feet. This translates as a 100-year statistical chance of velocity (storm wave) flooding to an elevation of 26 feet, NGVD. Most jurisdictions now require a floor grade four feet above the Velocity elevation, in this case 30 feet NGVD.

3) The relatively poor supporting strength of the Pleistocene clays due to their plasticity and inherent saturation call for carefully engineered foundation support to avoid long-term differential settlement. Gutter and perimeter drains should be carefully constructed and continuously maintained, with runoff conducted by flexible pipe to the base of the cliff or to the natural drainage immediately north of the building site. Depending on the degree of shallow saturation encountered during excavation, it may be advisable to construct an engineered curtain drain upslope from the dwelling.

4) The County Sanitarian will require space for a septic drainfield and a backup system. Assuming a common system is approved for the two parcels, it becomes imperative that this area be established first in order to determine a building site. The setbacks from a marshy area on this parcel and the well on the southern parcel leave a limited area for drainfields if the dwelling is located along the westerly half of the parcel. (see sketch)

In addition to the above, it is prudent to consider building elevation above potential tsunami impact. Oregon coastal property owners are advised that there is now abundant evidence for a series of geologically recent and severe regional earthquakes. Discoveries since 1987 confirm a history of as many as thirteen major events originating in the local Cascadia subduction zone during the past 7700+/- years. Based on the calculated intervals between such events, (approximately 600 years average, 340 years minimum), it follows that a major regional earthquake is indeed possible in the foreseeable future. The

See/Ballew
4/19/94

most recent event seems to have occurred about the year 1690. Newly revised projections estimate a 30 percent chance of a magnitude 8 or greater regional quake in the next 50 years. References for the above are available upon request.

The Alaska Tsunami Warning Center has recently modelled tsunami runup values for a number of points along the west coast. Locally the base runup is calculated at about 15.6 feet, to which several other factors are added to result in a maximum value of about 34 feet. This should be considered a worst-case circumstance, involving coincidental storm tides, two feet of coseismic subsidence, liquefaction of the clays at depth with irregular surface settlement, and a 40 percent margin of error.

Engineers are now recommending optional measures for increased reinforcement of structures against vibratory damage, beyond current code requirements.

Risks associated with great Cascadia earthquakes must naturally be considered in light of the long and varied intervals between events. While our understanding of Northwest seismicity is expanding rapidly, the timing or magnitude of future events can only be broadly estimated.

CONCLUSIONS, INCLUDING BLUFF-EDGE SETBACK

The attached sketch is based on extension of established elevation contours from the southern parcel, adjusted to NGVD values, and estimated by compass, clinometer and pace for this parcel. As such, considerable error may exist and you may wish to obtain more accurate contours for this parcel since the drainfields, Velocity flood and tsunami runup areas are all dependent on true elevations. (The HLB contour map utilizes an arbitrary 100-foot datum at highway level. This is about 22 feet above true NGVD value).

It is recommended that the bluff edge setback for this parcel be equivalent to that of the southern parcel, or a true N-S line 16 feet east of the 280-foot monument along the southerly line of Tax Lot 800.

While it may be possible to drain the marshy area on this parcel with properly laid-out curtain drains, I assume this is not being considered. It would therefore be necessary to recognize a 50-foot drainfield setback from the marsh, and to maintain a 100-foot drainfield setback from the well, as shown on the sketch. If the drainfield is common to both parcels and therefore of increased dimensions, some portion of the southern parcel will likely need to be utilized to obtain sufficient space.

Velocity flooding would impact the lower elevations on the parcel to a level of at least 26 feet. A structure close to the bluff edge setback would need to be elevated above this value, perhaps to as much as 30 feet. (see sketch)

Taking all of the above into account, we have established a potential construction limits outline on the sketch. It might become preferable to site

See/Ballew
4/19/94

the dwelling on the higher elevations, some 100 additional feet from the bluff, and utilize the western portion for drainfields. The advantages of such an arrangement are increased space availability from overcoming the well setback requirement, and avoiding the need to pump effluent to a higher elevation.

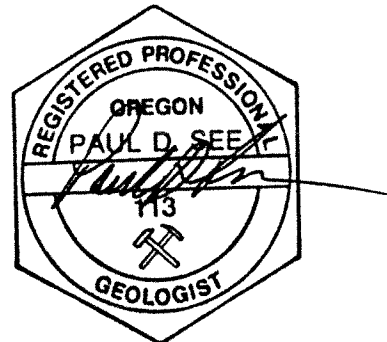
LIMITATIONS

Observations and conclusions incorporated in this letter report are the result of personal site inspection, the works of other specialists, and generally accepted principles of geologic investigation for a report of this nature. No warranties are expressed or implied. This report has been prepared for the timely use of the above addressee and parties to any pending development of the subject property, and does not extend to the activities of unidentified future owners or occupants for which the writer bears no responsibility.

Sincerely,



Paul D. See



References cited:

- * Schlicker, H. G., Geologic reports to Jerry C. Robinson dated March 31 and April 4, 1986.
- ** Ross, Martin, A Field Inventory of Geologic Hazards from Silver Point to Cove Beach, Clatsop County, OR., prepared for the County Dept. of Planning and Development, dated February, 1978.

PAUL D. SEE AND ASSOCIATES, INC.

300 SURF PINES ROAD
SEASIDE, OREGON 97138
738-5869



February 23, 1994

#1024

Dick Ballew
616 Palo Alto
Vancouver, WA 98661

RE: Geologic inspection, southern 100 feet of Tax Lot 800, T4N, R10W, Section 7CD, Arcadia Beach.

Dear Mr. Ballew:

At your request I recently reinspected the above described property to more accurately establish a recommended construction setback from the bluff edge. As you are aware, I initially walked the property with Elaine Killian in November of 1992, and prepared a very preliminary assessment of geologic hazards. Tom Bender, Architect, has supplied me with the 1985 report on this property by H. G. Schlicker*, and I am familiar with the 1978 regional hazard study by Marty Ross**. I understand you wish this report to address only the southernmost 100 feet of Tax Lot 800 at this time.

TOPOGRAPHY AND GEOLOGIC HISTORY OF THE AREA

This portion of Tax Lot 800 is inclined to the northwest at an average slope of 20 percent on the westernmost half. Slopes on the easternmost half are considerably more gentle. Maximum elevation of the shoreline cliff lies at the southern lot line, measured at 37.5 feet above current beach level, or about 48 feet NGVD. The cliff edge drops consistently along this 100 feet of frontage to an elevation of 36+/- feet NGVD at the northwest corner. A minor slope reversal exists east of the northwest corner, wherein the cliff edge lies slightly higher than a northerly inclined depression. The accompanying contour sketch depicts the local topography, based on inclinometer, range-finder and tape measurements as well as previous contouring by Schlicker.

The local terrain consists of Pleistocene "terrace" sediments, deposited unconformably against the older Tertiary rocks above Highway 101. The terrace materials are deposited horizontally, and consist of very soft and plastic gray clays with layers of organic forest-floor debris and irregular deposits of sand and gravel. The clays are inherently saturated as evidenced by the numerous small springs and weep zones evident in the shoreline cliffs. While this unit is customarily described as a marine deposit, abundant local evidence strongly suggests a non-marine tidelands type accumulation, with numerous small streams leaving meandering channels of gravel.

Although Schlicker estimates the Pleistocene unit to be about 40 feet thick and resting directly on Tertiary sediment, results of drilling for water on this property reveal a total thickness of 85 or more feet, extending to 20+/- feet below sea level.

The Pleistocene is notorious for sloughing along the shoreline cliffs, as well described by Ross and Schlicker. Indeed, this entire frontage has undergone

See/Ballem
2/23/94

continuous erosion as well as segmental failure in the recent past, and will undoubtedly continue to do so until this entire terrace remnant is removed in the distant future. The rate of this regression then becomes a primary factor in determining a safe construction setback from the current terrace edge.

LOCAL HAZARD ASSESSMENT

Two natural hazards are specific to this property. The relatively poor supporting strength of the Pleistocene clays due to their plasticity and inherent saturation call for carefully engineered foundation support to avoid long-term differential settlement. Gutter and perimeter drains should be carefully constructed and continuously maintained, with runoff conducted by flexible pipe to the base of the cliff or to the natural drainage along the northerly line of Tax Lot 800. Depending on the degree of shallow saturation encountered during excavation, it may be advisable to construct an engineered curtain drain upslope from the dwelling.

We have calculated the overall rate of bluff retreat over the past 55 years, based on a 1939 US Corps of Engineers aerial photo, 1967, 1973 and 1978 ODOT Coastal Mosaic aerial photos, as well as personal measurements of the bluff edge, utilizing a small basaltic monolith on the beach as a fixed reference. Because the apparent bluff edge is misleading due to periodic sloughing over this time span, it is necessary to estimate the true amount of bluff retreat by discounting the reversals caused by sloughing. Current on-site measurements result in an estimated six-foot local westerly encroachment of bluff materials onto the beach for a present 85-foot distance between the base of the cliff and the vertical western edge of the beach monolith. Adding six feet for sloughing, this would equate to a total of 91 feet to the true bluff edge beneath the slide blocks.

Quite surprisingly, the 1939 Corps of Engineers photo at 1"=920' appears to show a 82.8 (say 83) foot distance from the monolith, for a 1.8 (say 2) inch annual rate of retreat over the 55-year span, allowing for error in photo measurement and estimated width of the present slump blocks. The slight westerly bulge in the 1967 through current bluff base is not present in the Corps of Engineers photo, indicating that significant sloughing began occurring between 1939 and 1967. Quite likely, bluff collapse was accelerated during and shortly after the 1982-83 El Nino event in the Pacific, which is consistent with Schlicker's observations relative to the fresh escarpment near the southerly property line and the apparently subsequent failure along the entire frontage.

This rate of retrogression, if consistent into the future, would result in a ten-foot lateral loss of terrace in the next 60 years. However, this should be considered an absolute minimum, and I would be much more comfortable in recommending an eight-inch per year factor, based on the several variables involved and their unpredictability. At eight inches per year, a foundation set 40 feet from the current edge would be at risk only after 60 years, ignoring the effects of a major Cascadia earthquake, as discussed below.

It should be noted that the conventional wisdom relative to erosion rates along this portion of the coastline has been somewhat more than two inches per year. Based on other nearby investigations, we have personally estimated rates of retreat in the order of four to six inches per year, and rates exceeded ten feet per year in identical materials south of Arch Cape during the El Nino event, causing considerable destruction and loss of dwellings. One 40 foot E-W depth front lawn was reduced to about five feet in a three-year span. However, it has recently been determined through historical research that the 1982-83 El Nino was one of the most severe since the late 1500's, and unlikely to return with such severity in the foreseeable future.

REGIONAL HAZARD

Oregon coastal property owners are advised that there is now abundant evidence for a series of geologically recent and severe regional earthquakes. Discoveries since 1987 confirm a history of as many as thirteen major events originating in the local Cascadia subduction zone during the past 7700+/- years. Based on the calculated intervals between such events, (approximately 600 years average, 340 years minimum), it follows that a major regional earthquake is indeed possible in the foreseeable future. The most recent event seems to have occurred about the year 1690. Newly revised projections estimate a 30 percent chance of a magnitude 8 or greater regional quake in the next 50 years. References for the above are available upon request.

Strong seismic acceleration is expected to generate widespread landsliding in western Oregon, and no unconsolidated sedimentary slope, however gentle, can be considered immune from failure in worst-case circumstances. The unconsolidated terrace sediments are particularly prone to failure during strong seismic acceleration, and I would anticipate an abrupt loss of 15 or more feet of frontage. Several other factors are important here, as well. Coseismic subsidence (or abrupt dropping) of the local coastline has been estimated at about two feet by the Alaska Tsunami Warning Center, and saturated clays of this nature are prone to liquefaction during strong vibration, allowing differential settlement of foundations. While the elevation of the terrace is slightly above the estimated maximum tsunami wave height, severe erosion could occur during such a wave series. Local engineers are now recommending optional measures for increased reinforcement of structures against vibratory damage, beyond current code requirements.

Risks associated with great Cascadia earthquakes must naturally be considered in light of the long and varied intervals between events. While our understanding of Northwest seismicity is expanding rapidly, the timing or magnitude of future events can only be broadly estimated.

CONCLUSIONS AND SETBACK RECOMMENDATIONS

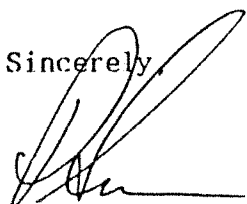
Based on the above measurements as well as similar local investigations and the very real potential for a severe Cascadia quake, I would recommend a minimum bluff-edge setback of 50 feet. This equates to a true N-S line beginning 16 feet east of the survey monument (LS-81) set at the 280-foot point on the south property line.

Other than the above recommended setback and the need to accommodate the less-than-ideal bearing capabilities of the generally saturated terrace clays, no other site-specific geologic hazards are recognized.

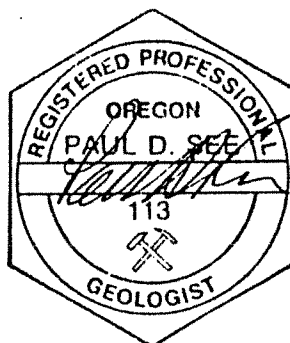
LIMITATIONS

Observations and conclusions incorporated in this letter report are the result of personal site inspection, the works of other specialists, and generally accepted principles of geologic investigation for a report of this nature. No warranties are expressed or implied. This report has been prepared for the timely use of the above addressee and parties to pending development of the subject property, and does not extend to the activities of unidentified future owners or occupants for which the writer bears no responsibility.

Sincerely,

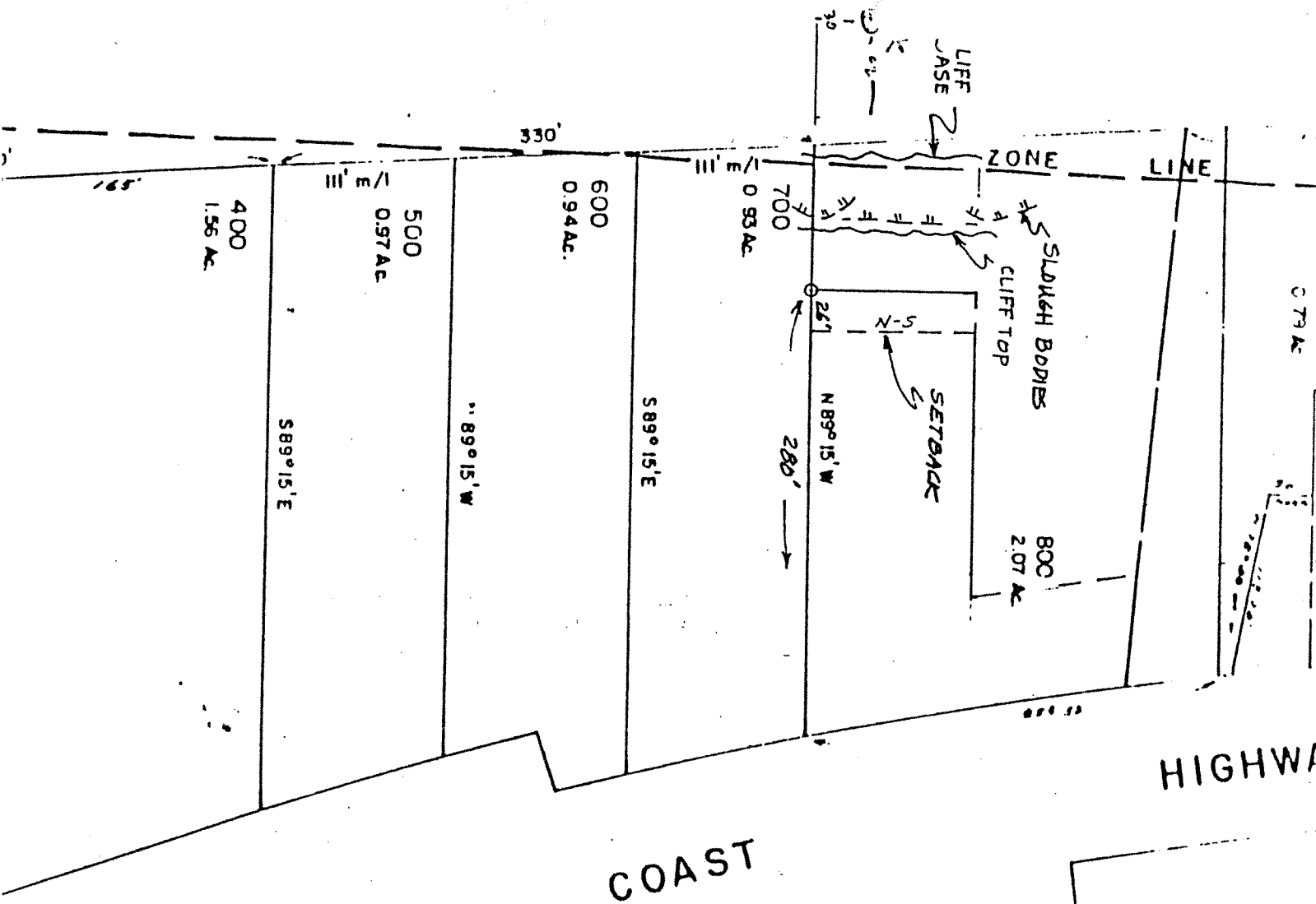


Paul D. See
cc: Tom Bender



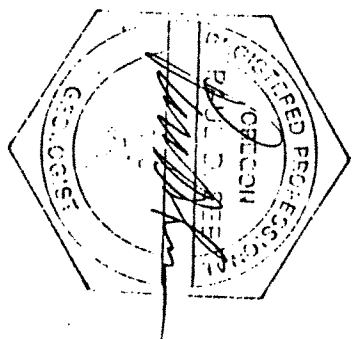
References cited:

- * Schlicker, H. G., Geologic reports to Jerry C. Robinson dated March 31 and April 4, 1986.
- ** Ross, Martin, A Field Inventory of Geologic Hazards from Silver Point to Cove Beach, Clatsop County, OR., prepared for the County Dept. of Planning and Development, dated February, 1978.



10-12

Gov. Lot 4



ASSESSOR'S PLAT, TAX LOT 800 AND VICINITY, T4N, R10W, SECTION 7CD, ARCADIA BEACH, with current bluff-edge and recommended setback added.

P. See 2/94 1" = 100' #1024

GON



STATE OF OREGON

DEQ/NCEO WARRENTON

DEPT.

861-3280

TELEPHONE

INTEROFFICE MEMO

TO: Dewey Darold

DATE: 3-4-94

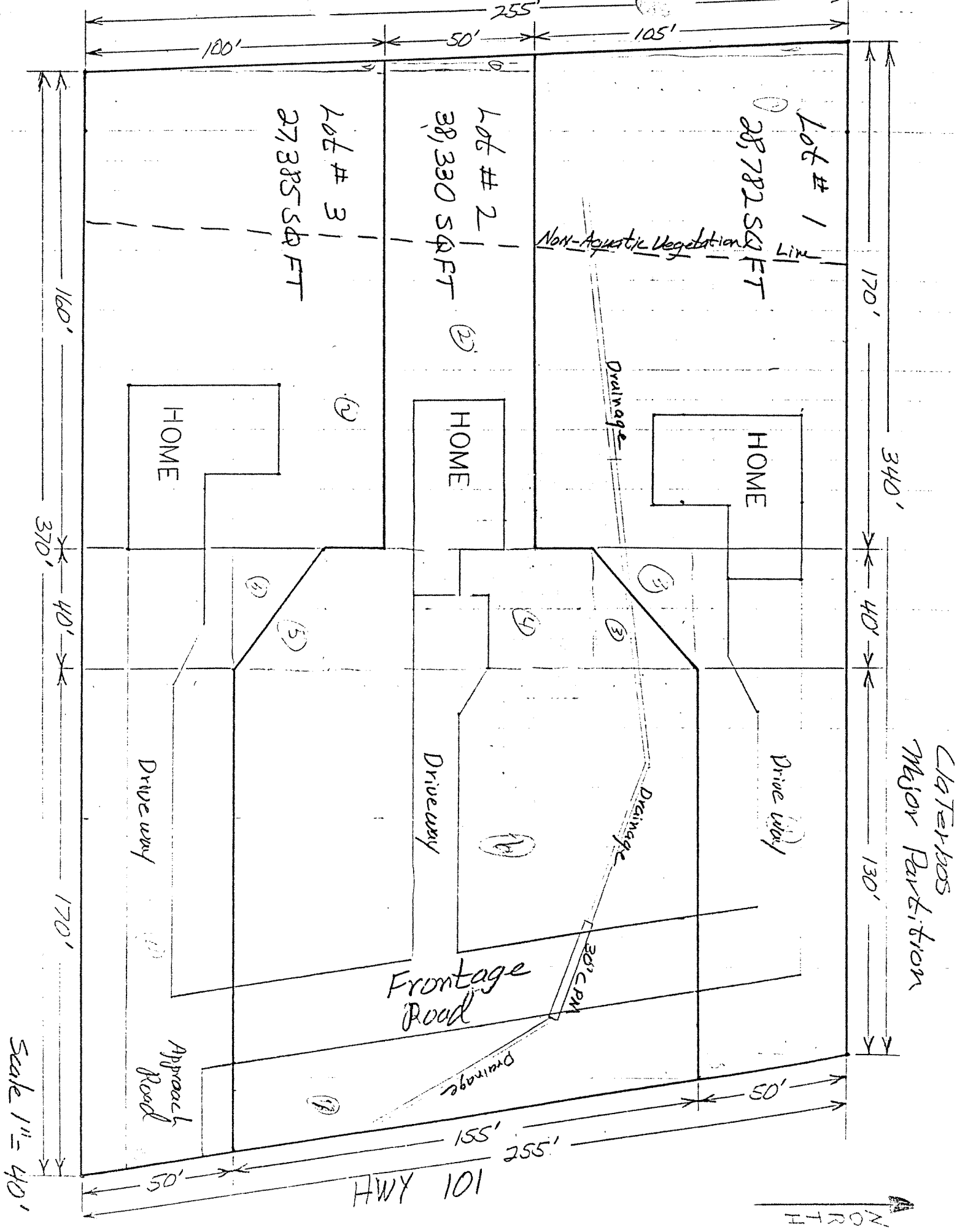
FROM: Dave Johns

SUBJECT: CLATERBOS FILE

1. The lots pertaining to subject file have expired. Partition will need to be refiled. This information obtained from Diana at Planning on 3-4-94 at 9:30 am.


Dave Johns

Pacific Ocean



TELEPHONE USE REPORT

CALL FROM/TO: JOHN SMITS

COMPANY/TITLE: SMITS & ASSOC.

PHONE NO.: 659-5623

DATE: 3-19-91

TOWN: RE: CLATSOP COUNTY OSS

TIME: P.M.

CLATERBOS

410-7CD-800/810 LOTS 1, 2, & 3

SUMMARY OF CALL:

Discrepancy between proposed subdivision lot
lines as submitted to DEQ and Clatsop
County Building Dept. Submit new plot
plan to DEQ showing lines as proposed to
Bldg. Dept. & DEQ may issue approval
on remaining lot.

Chuck Hopkins

Signature

SMITS & ASSOCIATES

Environmental Consultants · Designers

Chuck Hopkins, Environmental Specialist
DEQ Northwest Region
811 SW Sixth Avenue
Portland, OR 97204-1390

April 6, 1990

Re: WQ-SAS-Clatsop County
Clatrebos, T.L. 800 & 801 T.4N., R.10W., Sec. 7CD

Dept. of Environmental Quality
RECEIVED
APR 10 1990

NORTHWEST REGION

Dear Chuck,

Enclosed please find a revised plot plan of the proposed Clatrebos partition. The plan reflects the partial on-site stake out of the features of a sand filter and disposal trench system to serve lot # 3 (the north lot). Because your Dec. 28, 1989 letter approves lot #1 (the south lot) as a standard system, using 300 ft. initial and 300 ft. replacement, ie; 600 total feet, it follows that with proper easements, 2 sand filter to trench systems (each with 150 ft. initial and 150 ft. replacement ie; 600 total feet) could be approved if it was demonstrated that systems would fit the site meeting required setbacks.

10' x 40'

Therefore we are now seeking approval of the north lot # 3 which was denied Dec. 7, 1989. The dosing septic tank would be placed out of the drainageway possibly on the south side and the sand filter would have a 8' by 40 ft. dimension placed 10 ft. south of the north line built with a center pump vault to pump to a utility easement on the south lot. Since there is no flow through the drainageway at this point there is no specific setback required except as the agent determines is reasonable. A guide would be OAR 340-71-220 (2) (h) which requires placement of the soil absorption facility out of areas subject to excessive saturation.

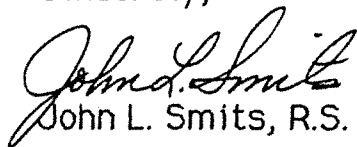
The enclosed details show this arrangement. At the site you will find some 460 ft. of trench staked. 150 ft. of that is new and the balance, (310 ft.) was staked when we were seeking approval of one system under a WPCF permit. You will remember those trenches are spaced less than 10 ft. apart in some cases as is sometimes allowed under the flexibility of the WPCF program. The current plan is drawn using that data and relocating trenches to the on-site program required 10 ft. spacing. I think you will see on site that there is sufficient area to build initial and future

relocating trenches to the on-site program required 10 ft. spacing. I think you will see on site that there is sufficient area to build initial and future repair systems. The lot lines will be adjusted as needed and the utility easement documents prepared as soon as approval is received.

If you would want to meet on site, to review this together, I would need about a weeks notice.

If you have any questions, please call me at 659-5623.

Sincerely,


John L. Smits, R.S.

encl:

cc: Nick Claterbos
John Claterbos

NORTH

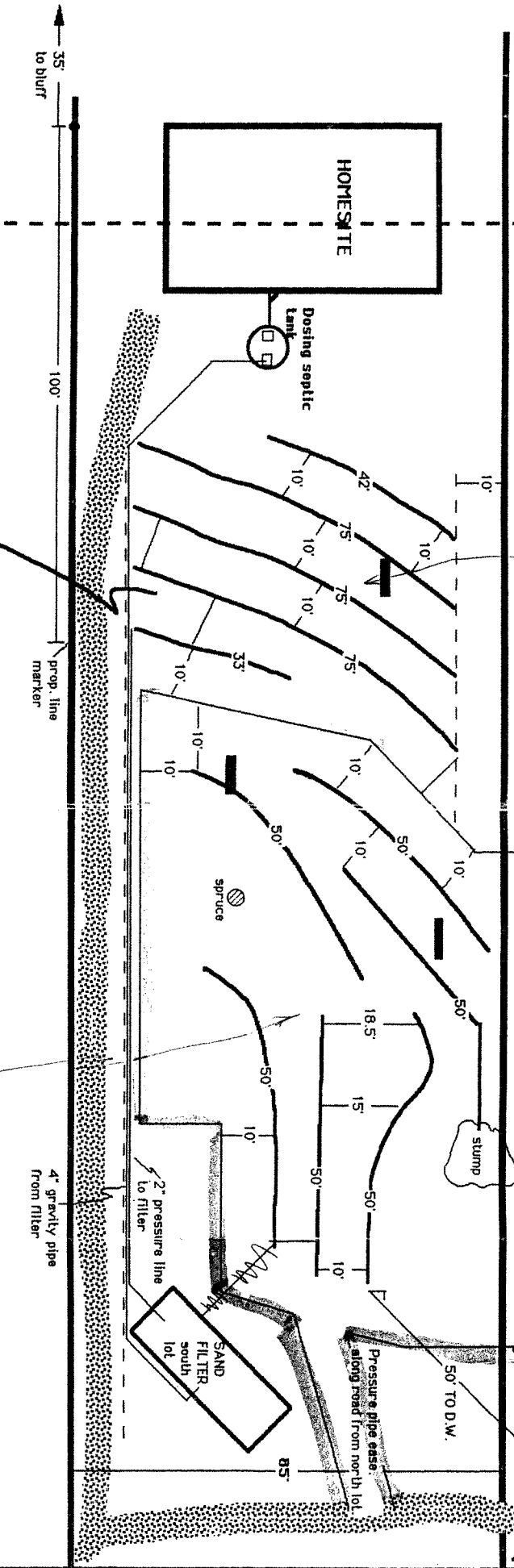
Drainage way
no surface flow
here

UTILITY EASEMENT
FOR NORTH LOT

50 FT. SETBACK
LINE UNSTABLE LAND
TO CLOSEST TRENCH

INITIAL SYSTEM (50' LOT)
REPLACEMENT SYSTEM (150' LOT)

EASEMENT FOR
LOT 3 SYSTEM

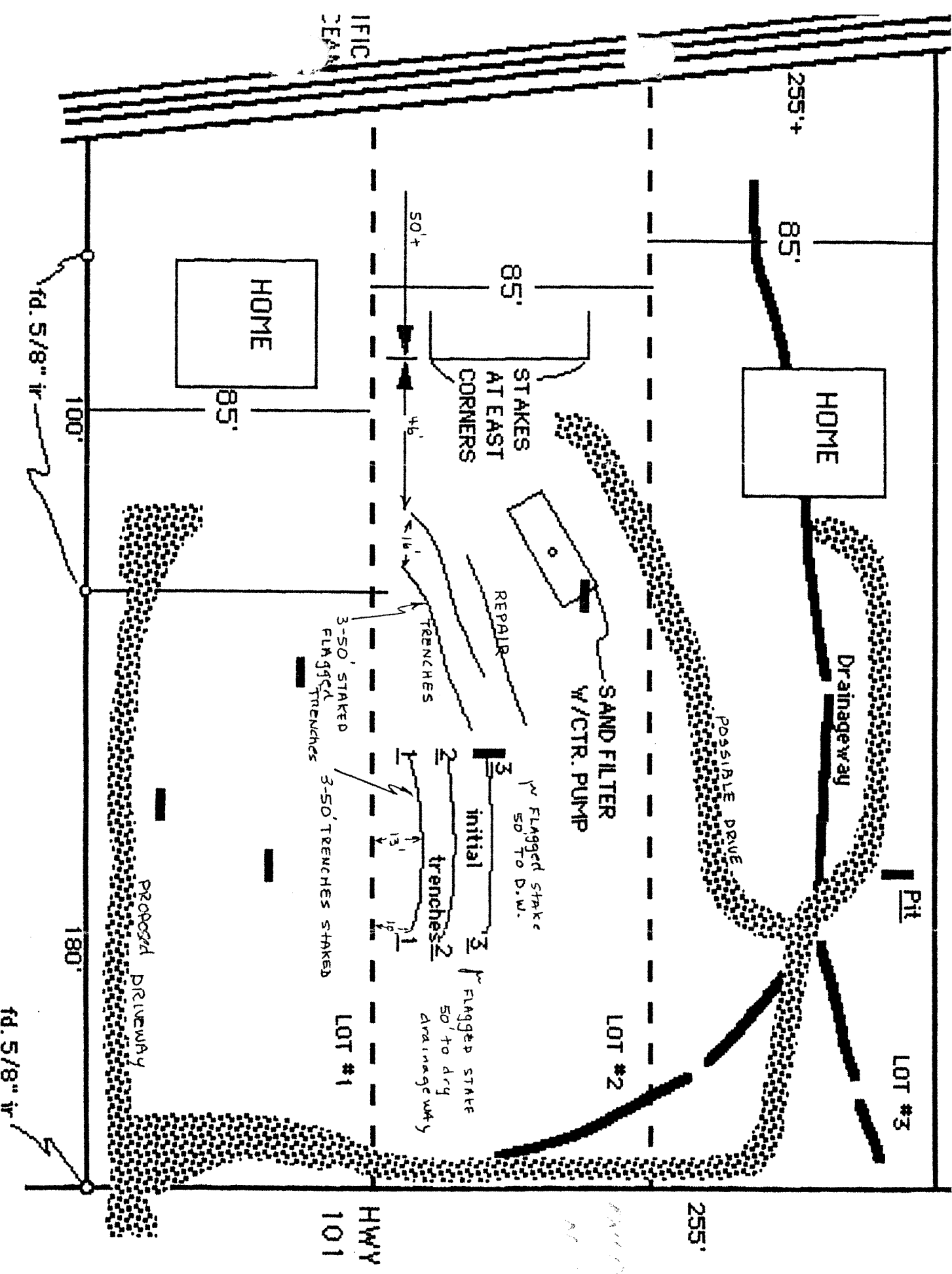


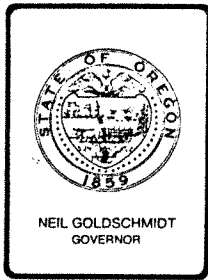
Initial and replacement trench
area available for 300 lineal feet

test pit

INITIAL SYSTEM (150') LOT 3
REPLACEMENT SYSTEM (150') LOT 3

Claterbos Lots
Arcadia Beach
Clatsop Co.
Plot Plan
Scale: 1"=20' 03/30/90
SMITS & ASSOCIATES
14687 SE KINGSTON AVE.
MILWAUKIE, OR 97267
(503) 659-5623





Department of Environmental Quality

811 SW SIXTH AVENUE, PORTLAND, OREGON 97204-1390 PHONE (503) 229-5696

Astoria Branch
P. O. Box 869
Astoria, Oregon 97103
Phone (503) 325-8660

March 14, 1990

Nick Claterbos
1036 6th St.
Astoria, OR 97103

Re: OSS-Clatsop County
Site Evaluation, Approved
T4N, R10W, Sec 7CD, TL 800 & 810 Lot #2

In response to your completed application of May 2, 1989, a field inspection was made on (see letter 1-22-90). Topographic and physical features of the site were checked. Soil information was collected by examining soil pit(s). The field worksheet is attached for your reference.

Based on the field work, the site complies with the rules of the Oregon Environmental Quality Commission. At least one specific area meets Oregon Administrative Rules Chapter 340, Division 71, governing on-site sewage disposal. The attached favorable report of evaluation for one lot shows approval of a standard or alternative sewage disposal system.

An approved report is not a permit to construct the system. However, it is a valuable document, similar to the title to an automobile. The approval runs with the land and is transferable. A permit will be issued to the owner of the land upon receipt of a complete application and fee; it will be good for one year and is renewable. Conditions on the approved site or adjacent land must not be altered in manner that would prohibit permit issuance. For example, topsoil is removed from the approved site, neighbor drills a well too close, an improper partition, etc. The Department intends to honor this approval unless something occurs that would adversely affect the approved site. Technical rule changes will not invalidate the approval; however, a different type system may be required which may cost more to build than this sewage disposal system.

If you have any questions regarding this letter, approval, or the conditions, it is very important that you call me at 325-8660 before any development of the site.

Sincerely,

Chuck Hopkins

Chuck Hopkins
Environmental Specialist
Astoria Branch

CH:
Enclosures

STATE OF OREGON
DEPARTMENT OF ENVIRONMENTAL QUALITY

For Office Use Only

REPORT OF EVALUATION FOR ONE LOT
ON-SITE SEWAGE SYSTEMS
(Technical Report — Not a Permit)

4N	10W	7CD	800 & 810 Lot #2	Clatsop
(Township)	(Range)	(Section)	(Tax Lot/Acct. No.)	(County)
(Subdivision Name)		(Lot No.)	(Block No.)	(Lot Size)

The Entire Property ☐ Has
☒ Has Not Been Evaluated

PLOT PLAN OF APPROVABLE AREA:

See file.

Any alteration of the natural conditions in the area approved for the on-site system or replacement area may void this approval.

This approval is given on the basis that the lot or parcel described above will not be further partitioned or subdivided and that conditions on subject or adjacent properties have not been altered in any manner which would prohibit issuance of a permit in accordance with O.R.S. 454.605 through 454.755 and Administrative Rules of the Environmental Quality Commission. Any such subdivision, partitioning or alteration may void this report.

The site has been found suitable for installation of the following kinds of on-site sewage disposal systems, with the limitations and additional requirements indicated:

Alternative Sand Filter (450 gpd) and disposal trenches-150 linear feet (150'/150 g.). Submi
detailed sand filter plans and specification with application for construction permit. Insta
in accordance with Smits and Associates plot plan and letter dated January 22, 1990. Maintai
standard setbacks and 100' from surface waters and wells, and 10' from driveway, utility
trenches, utilities and easements. System must be installed by property owner or DEQ
licensed installer.

WARNING: This document is a technical report for on-site sewage disposal only. It may be converted to a permit only if, at the time of application, the parcel has been found to be compatible with applicable LCDC-acknowledged local comprehensive land use plans and implementing measures or the Statewide Planning Goals. The Statement of Compatibility may be made on the attached form or its equivalent. Authorized Agent approval is required before a construction permit can be issued.

This report is valid until an on-site sewage system is installed pursuant to a construction permit obtained from The DEQ - Astoria, or until earlier cancellation, pursuant to Commission rules, with written notice thereof by the Department of Environmental Quality to the owners according to Department records or the County tax records. Subject to the foregoing, this report runs with the land and will automatically benefit subsequent owners.

Chuck Hopkins

(Signature of Authorized Agent)

Environmental Specialist

(Title)

March 14, 1990

(Date)

Astoria

(Office)

SMITS & ASSOCIATES

Environmental Consultants · Designers

Chuck Hopkins, Environmental Specialist
DEQ Northwest Region
811 SW Sixth Avenue
Portland, OR 97204-1390

Jan. 22, 1990

Dept. of Environmental Quality

RECEIVED
JAN 24 1990

Re: WQ-SAS-Clatsop County
Claterbos, T.L. 800 & 801 T.4N., R.10W., Sec. 7CD

NORTHWEST REGION

Dear Chuck,

Enclosed please find a revised plot plan of the proposed Claterbos partition. The plan reflects the on-site stake out of the features of a sand filter and disposal trench system to serve lot # 2 (the middle lot). Your letter of Dec. 7, 1989 suggested the lot could be approved if it was demonstrated that a system would fit the site meeting required setbacks.

The system is staked for your review. Please disregard the staking on lot #1. I have left that system staked because we have not given up the pursuit of one system to serve three homes. Our effort here is to secure two of the three approvals to keep all options open.

Please let me know if you have any questions otherwise, I look forward to receiving an approved site evaluation report for lot No. 2.

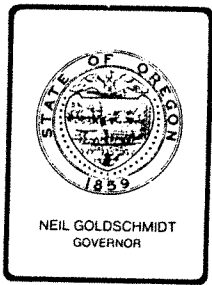
Sincerely,



John L. Smits, R.S.

encl:

cc: Nick Claterbos



Department of Environmental Quality

811 SW SIXTH AVENUE, PORTLAND, OREGON 97204-1390 PHONE (503) 229-5696

Astoria Branch
P. O. Box 869
Astoria, Oregon 97103
Phone (503) 325-8660

Dec. 28, 1989

Nick Claterbos
1036 6th St.
Astoria, OR 97103

Re: OSS-Clatsop County
Site Evaluation, Approved
T4N, R10W, Sec 7CD, TL 800 & 810,
Lot #1-South Lot

In response to your completed application of May 02, 1989, a field inspection was made on November 30, 1989. Topographic and physical features of the site were checked. Soil information was collected by examining soil pit(s). The field worksheet is attached for your reference.

Based on the field work, the site complies with the rules of the Oregon Environmental Quality Commission. At least one specific area meets Oregon Administrative Rules Chapter 340, Division 71, governing on-site sewage disposal. The attached favorable report of evaluation for one lot shows approval of a standard or alternative sewage disposal system.

An approved report is not a permit to construct the system. However, it is a valuable document, similar to the title to an automobile. The approval runs with the land and is transferable. A permit will be issued to the owner of the land upon receipt of a complete application and fee; it will be good for one year and is renewable. Conditions on the approved site or adjacent land must not be altered in manner that would prohibit permit issuance. For example, topsoil is removed from the approved site, neighbor drills a well too close, an improper partition, etc. The Department intends to honor this approval unless something occurs that would adversely affect the approved site. Technical rule changes will not invalidate the approval; however, a different type system may be required which may cost more to build than this sewage disposal system.

If you have any questions regarding this letter, approval, or the conditions, it is very important that you call me at 325-8660 before any development of the site.

Sincerely,

Chuck Hopkins
Environmental Specialist
Astoria Branch

CH:
Enclosures

STATE OF OREGON
DEPARTMENT OF ENVIRONMENTAL QUALITY

For Office Use Only

REPORT OF EVALUATION FOR ONE LOT
ON-SITE SEWAGE SYSTEMS
(Technical Report — Not a Permit)

4N 10W 7CD 800 & 810 Lot #1- Clatsop
(Township) (Range) (Section) (Tax Lot/Acct. No.) (County)
South Lot
(Subdivision Name) (Lot No.) (Block No.) Approx. 85' X 28'
(Lot Size)

The Entire Property ☐ Has
☒ Has Not Been Evaluated

PLOT PLAN OF APPROVABLE AREA:

See the illustration on the
Site Evaluation Field Worksheet

Any alteration of the natural conditions in the area approved for the on-site system or replacement area may void this approval.

This approval is given on the basis that the lot or parcel described above will not be further partitioned or subdivided and that conditions on subject or adjacent properties have not been altered in any manner which would prohibit issuance of a permit in accordance with O.R.S. 454.605 through 454.755 and Administrative Rules of the Environmental Quality Commission. Any such subdivision, partitioning or alteration may void this report.

The site has been found suitable for installation of the following kinds of on-site sewage disposal systems, with the limitations and additional requirements indicated:

Standard Serial Distribution (450 gpd) 300 linear feet (100'/150 g.). Maintain 100' setback
from wells and 50' from escarpment on west end of lot facing the ocean. Submit detailed plot
plan with application for construction permit. Maintain 10' setback ^{from} driveway, utility trenches
utilities and easements. System must be installed by property owner or DEQ licensed installer

WARNING: This document is a technical report for on-site sewage disposal only. It may be converted to a permit **only** if, at the time of application, the parcel has been found to be compatible with applicable LCDC-acknowledged local comprehensive land use plans and implementing measures or the Statewide Planning Goals. The Statement of Compatibility may be made on the attached form or its equivalent. Authorized Agent approval is required before a construction permit can be issued.

This report is valid until an on-site sewage system is installed pursuant to a construction permit obtained from Astoria DEQ, or until earlier cancellation, pursuant to Commission rules, with written notice thereof by the Department of Environmental Quality to the owners according to Department records or the County tax records. Subject to the foregoing, this report runs with the land and will automatically benefit subsequent owners.

Chuck Hopkins
(Signature of Authorized Agent)

Environmental Specialist Dec. 28, 1989
(Title) (Date)

Astoria
(Office)

SITE EVALUATION FIELD WORKSHEET

BOB PAETH

Tax Reference T4N, R10W, SEC. 7CD, TL 800 & 810 Evaluator CHUCK HOPKINS
 Applicant CLATERBOS, NICK Date 11-30-89 Parcel Size APX. 85' X 285'
 (LOT #1 - SOUTH LOT)

Depth Texture Soil Matrix Color and Mottling (Notation), % Coarse Fragments, Roots, Structure, Layer Limiting Effective Soil Depth, etc.

Pit 1 LOT 1 *	0-11"	SILT LOAM	(10YR 2/2) MANY MED. & FINE ROOTS
	11"-22"	HEAVY SIL	(10YR 4/3) COMMON TO FINE ROOTS
	22"-43"	SILT LOAM	(10YR 5/4) VERY FEW FINE ROOTS
	43"-51"	Si CL	(10YR 6/6) WITH MOTTLES (7.5YR 5/6) (2.5Y 6/4) IN PLANE Voids & PORES, MASSIVE
	51"-62"	Si CLAY	(10YR 6/8) WITH MOTTLES (5Y 6/2) MOTTLES, MASSIVE
*	62"-65"	Si CLAY	(5Y 7/1) WITH MOTTLES (10YR 5/8) IN PLANE Voids & PORES, MASSIVE
			* VARIGATED COLOR PATTERN INHERITED FROM OXIDATION OF IRON IN A GLEYED MARINE SEDIMENT THAT WAS UPLIFTED.

TEST PIT ON LOT 2

Pit 2 LOT 1 *	0-11"	SILT LOAM	(10YR 2/2) MANY MED. & FINE ROOTS
	11"-22"	SILT LOAM	(10YR 3/2) COMMON FINE ROOTS
	22"-31"	Si CLAY	(7.5Y 8/8) & (5Y 6/2) FEW FINE ROOTS
	31"-53"	Si CLAY	(5Y 7/1) WITH (7.5YR 6/8) MOTTLES IN PLANE Voids & PORES, MASSIVE

* VARIGATED COLOR PATTERN INHERITED FROM PARENT MATERIAL BY OXIDATION OF IRON OUT OF UPLIFTED, GLEYED MARINE SEDIMENT

LOT 1

Pit 3 LOT 1 *	0-8"	SILT LOAM	(10YR 2/2) MANY MED. & FINE ROOTS
	8"-18"	LOAM	(10YR 3/3) COMMON FINE ROOTS
	18"-41"	SILT LOAM	(10YR 5/4) FEW FINE ROOTS
	41"-53"		(5Y 7/1) WITH (7.5YR 6/8) MOTTLES IN PLANE Voids & PORES, MASSIVE

Landscape Notes _____

Slope _____ Aspect _____ Groundwater Type _____

Other Site Notes _____

LOT #1 (SOUTH LOT ONLY)

SYSTEM SPECIFICATIONS

Type System: STANDARD Design Flow 450 gpd Disposal Field Size 300 ~~Linear~~ Feet
 Initial SERIAL System Sizing 100' / 150 g. Max. Depth Absorption Facility (in) 36
 Replacement SAME System Sizing SAME / 150 g. Max. Depth Absorption Facility (in) 36

Special Conditions REQUIRES 300 LINEAR FEET DISPOSAL TRENCH (100'/150'



Scan ID
408589

Department of Environmental Quality

811 SW SIXTH AVENUE, PORTLAND, OREGON 97204-1390 PHONE (503) 9-5696

December 7, 1989

John Smits, R.S.
Smits & Associates
14687 S.E. Kingston Ave.
Milwaukie, OR 97267-1943

Re: OSS - Clatsop County
Site Evaluation
Nick Claterbos
T4N, R10W, Sec.7CD, TL 800 &
810 (lot # 2 - middle lot)

Dear Mr. Smits:

On November 30, 1989, Department personnel met with you at the above referenced parcel and evaluated the parcel for suitability for on-site sewage disposal. Topographic and physical features of the site were checked. Soil information was collected by examining soil pits. Copies of the field work sheets are attached for your review.

This parcel did not appear to have enough room for installation of an on-site sewage disposal system and meet required setbacks from the drainage way on lot number 3 to the north and property lines. This is not a denial. If you can demonstrate that there is enough room to meet setback requirements by staking the proposed system and buildings out on the property, an approval may be issued.

If you have any questions regarding this matter, please call me in Portland at 229-6053.

Sincerely,

Chuck Hopkins
Environmental Specialist
Northwest Region

CH

cc: Municipal Sewage Sect., DEQ
Astoria Office, DEQ
Clatsop County
Nick Claterbos
1036 6th St., Astoria

SITE EVALUATION FIELD WORKSHEET

Tax Reference _____ Evaluator _____
 Applicant _____ Date 11-30-89 Parcel Size _____
 (LOT # 2 - MIDDLE LOT)

Soil Matrix Color and Mottling (Notation), % Coarse Fragments, Roots, Structure, Layer Limiting Effective Soil Depth, etc.

Depth	Texture	
0" - 4"	LOAM	(10YR 3/3) MANY MEDIUM & FINE ROOTS
4" - 22"	SILT LOAM	(10YR 5/4) WITH (5YR 3/4) MOTTLES IN PLANE Voids & PORES
22" - 52"	Si CLAY	(5Y 7/1) & (7.5YR 6/8) FEW FINE ROOTS
52" - 72"	Si CLAY	(5Y 7/1) WITH (5YR 5/8) MOTTLES IN PLANE Voids, MASSIVE

* VARIGATED COLOR PATTERN DERIVED FROM OXIDATION OF IRON IN MARINE SEDIMENT

Pit 2		

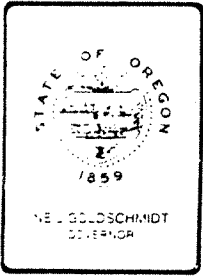
Pit 3		

Pit 4		

Landscape Notes _____
 Slope 26% TOWARD NW Aspect _____ Groundwater Type _____
 Other Site Notes _____

SYSTEM SPECIFICATIONS

Type System: _____ Design Flow _____ gpd Disposal Field Size _____ Linear Feet
 Initial _____ System Sizing _____ / 150 g. Max. Depth Absorption Facility (in) _____
 Replacement _____ System Sizing _____ / 150 g. Max. Depth Absorption Facility (in) _____
 Special Conditions _____



Department of Environmental Quality

811 SW SIXTH AVENUE, PORTLAND, OREGON 97204-1390 PHONE (503) 229-5696

December 7, 1989

John Smits, R.S.
Smits & Associates
14687 S.E. Kingston Ave.
Milwaukie, OR 97267-1943

Re: OSS - Clatsop County
Site Evaluation DENIAL
Nick Claterbos
T4N, R10W, Sec.7CD, TL 800 &
810 (lot # 3 - north lot)

Dear Mr. Smits:

On November 30, 1989, Department personnel met with you at the above referenced parcel and evaluated the parcel for suitability for on-site sewage disposal. Topographic and physical features of the site were checked. Soil information was collected by examining soil pits. Copies of the field work sheets are attached for your review.

The site is DENIED approval for on-site sewage disposal. This lot has a drainage way about 75 feet wide running through the center from highway 101 west to the ocean. There would not be enough room on this lot to install an on-site sewage disposal system and meet setback requirements from the drainage way.

You may request a review of this denial by completing and submitting an application for a Site Evaluation Report Review with payment of a \$100 fee within 30 days of the date of this denial. If you wish the review, please contact Mr. Charles Gray in Portland at 229-5288.

You may also apply for a formal variance to the on-site rules (c.f., OAR 340-71-415) by submitting an application with payment of a \$225 fee. Variances from any rule contained in OAR Chapter 340, Division 71, may be granted to applicants for permits by special variance officers appointed by the Director. If you wish to apply for a variance, please contact Mr. Sherman Olson in Portland at 229-6443.

If you have any questions regarding this matter, please call me in Portland at 229-6053.

Sincerely,

Chuck Hopkins
Environmental Specialist
Northwest Region

CH
cc: Municipal Sewage Sect., DEQ
Astoria Office, DEQ
Clatsop County
Nick Claterbos
1036 6th St., Astoria

SITE EVALUATION FIELD WORKSHEET

Tax Reference T4N, R10W, SEC. 7CD, TL 800 & 810 Evaluator BOB PAETH
 Applicant CLATERBOS, NICK Date 11-30-89 Parcel Size APX. 85' X 301'
 (LOT # 3 - NORTH LOT)

Soil Matrix Color and Mottling (Notation), % Coarse Fragments, Roots,
 Structure, Layer Limiting Effective Soil Depth, etc.

	Depth	Texture	
	0-12"	SILT LOAM	(10YR 2/2) MANY COARSE, MED. & FINE ROOTS
Pit 1	12"-26"	SILT LOAM	(10YR 4/3) COMMON COARSE, MED. & FINE ROOTS
*	26"-39"	SILT CLAY	(10YR 5/3) WITH (7.5Y 5/6) MOTTLES IN PLANEZ VOIDS & MEE3
*	39"-50"	SILTY CLAY	(5Y 7/1) WITH (7.5Y 5/8) MOTTLES IN PLANEZ VOIDS MASSIVE

* VARIATED COLOR INHERITED FROM OXIDATION OF IRON IN MARINE SEDIMENT PARENT MATERIAL

Pit 2		THIS LOT HAS A DRAINAGEWAY ABOUT 75' WIDE RUNNING THROUGH THE CENTER FROM HIGHWAY 701 WEST TO THE OCEAN. WESTWARD SLOPE OF DRAINAGEWAY - 15%

Pit 3		

Pit 4		

Landscape Notes _____

Slope 30% Aspect N. & S. Groundwater Type PERMANENT

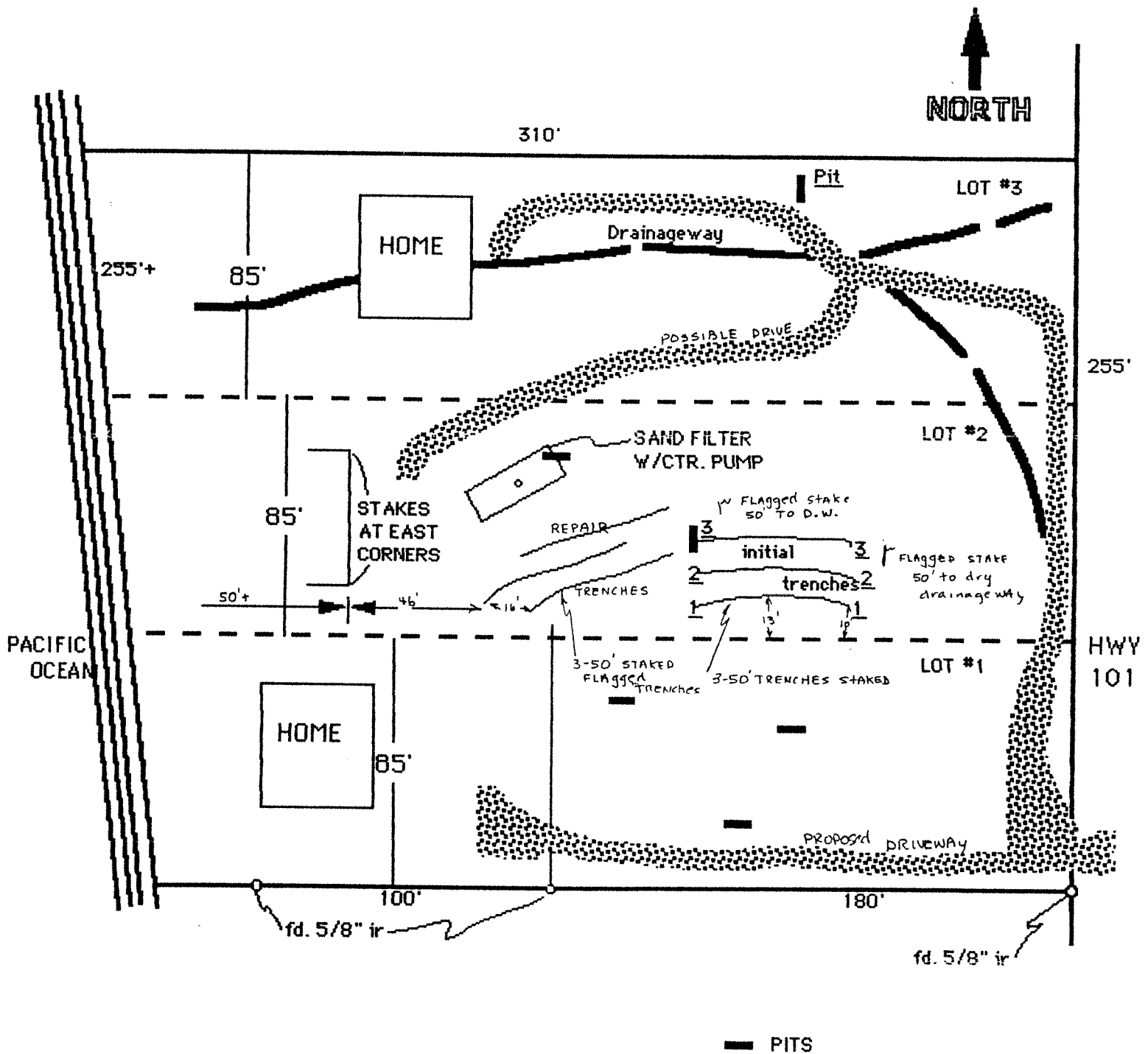
Other Site Notes NOT ENOUGH ROOM FOR ON-SITE SYSTEM - CAN'T MEET
 SETBACKS.

DENIED

SYSTEM SPECIFICATIONS

Type System: _____ Design Flow _____ gpd Disposal Field Size _____ Linear Feet
 Initial _____ System Sizing _____ /150 g. Max. Depth Absorption Facility (in) _____
 Replacement _____ System Sizing _____ /150 g. Max. Depth Absorption Facility (in) _____

Special Conditions _____



REV. 1/20/90

Claterbos Lots
Arcadia Beach
Clatsop Co.

Plot Plan

Scale: 1"=50' 11/01/89

SMITS & ASSOCIATES
14687 SE KINGSTON AVE.
MILWAUKIE, OR 97267
(503) 659-5623

TELEPHONE USE REPORT

CALL FROM/TO: John Smita
 COMPANY/TITLE: Smita & Assoc's.
 PHONE NO.: 659-5623

DATE: 11-6-89

TIME: 1600

CITY: Arcadia Beach COUNTY: Clatsop

(Circle for filing)

Claterbox Partition

AQ Asbestos

WQ

OSS

T4N, R 10W, Sec. 7CD, TL 800&810 SW

HW

General

Spill

SUMMARY OF CALL:

John will try to request Bob go alone. If
not possible, he'll call me back and
I'll schedule w/ Bob.

Chuck Hopkins

Signature

SMITS & ASSOCIATES

Environmental Consultants • Designers

John L. Smits, R.S.
Registered Sanitarian
Oregon - Washington

14687 S.E. Kingston Ave.
Milwaukie, OR 97267-1943
(503) 659-5623

Dept. of Environmental Quality

RECEIVED
NOV 6 1989

Nov. 2, 1989

Chuck Hopkins
Environmental Specialist
Northwest Region
Dept. of Environmental Quality
811 SW Sixth Ave.
Portland, OR 97204-1390

NORTHWEST REGION

Re: On-site sewage disposal, Clatsop County
Claterbos Partition
T.4N., R.10W., Sec. 7CD., T.L. 800 & 810

Dear Chuck,

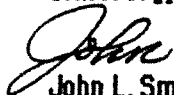
Enclosed please find an application for site evaluation of 3 proposed partition lots south of Arcadia Beach Wayside on Hwy. 101. I have included a plot plan, tax map and affirmative land use compatibility statement for the subject property. Lot #1 has 3 test pits and lot #2 has 2 pits. Lot 3 has no pits at this time, but 2 will be dug prior to the site check or we will have a backhoe available.

You may recall the property and your involvement earlier this year. I had looked at pits in July and determined that the only feasible way to provide on-site systems for 3 homes would be to develop one shared system under a WPCF permit. I was proceeding along that path.

Prior to the site visit relative to the WPCF application, the Sewage Disposal Section of the Water Quality Division determined Department staff must first make a finding that the lots will not support individual systems before considering a single system to serve the lots. A \$750 fee has been paid, and the Sewage Section has agreed that the 3 sites will be reviewed for on-site out of that fee. As I understand, if the WPCF process and shared system is found appropriate, the site evaluation information will be used to process that application with no additional fee required. To accomplish this in one step, it would help if Bob Paeth was involved in the review. I am copying Bob and ask that you and he please coordinate a mutually agreeable time for the 3 of us to check the site.

If you have any questions, please contact me at 659-5623.

Sincerely,



John L. Smits, R.S.
Registered Sanitarian

encl:

cc: Robert C. Paeth, DEQ
John Claterbos
Nick Claterbos

FOR OFFICE USE ONLY

Date Test Holes Ready
NOWSTATE OF OREGON
Department of Environmental Quality

FOR OFFICE USE ONLY

Date Rec'd 5-2-89
Date Completed 5-11-89
Required Fee \$465.00
Receipt No. _____
Control No. _____

APPLICATION FOR:

- 3 ☒ Site Evaluation Reports
☐ Permit to Construct On-Site Sewage Disposal System
☐ Permit to Repair On-Site Sewage Disposal System
☐ Permit for Alteration of On-Site Sewage Disposal System
☐ Permit Renewal
☐ Authorization Notice
☐ Other (Specify) _____

(Required fee and land use compatibility statement must accompany application)

FOR OFFICE USE ONLY:

PLOT PLAN REQUIRED	☒ YES	☐ NO	ATTACHED	☒ YES	☐ NO
VICINITY OR TAX LOT MAP REQUIRED	☒ YES	☐ NO	ATTACHED	☒ YES	☐ NO
TEST HOLES REQUIRED	☒ YES	☐ NO	ATTACHED	☒ YES	☐ NO
LAND USE COMPATIBILITY STATEMENT	☒ YES	☐ NO	ATTACHED	☒ YES	☐ NO

ADDITIONAL ITEM(S) REQUIRED

FOR APPLICANT'S USE — (Please Print)

John & Nick Claterbos
(Property Owner's Name)

<u>4 NORTH</u>	<u>10 West</u>	<u>7 CD</u>
(Township)	(Range)	(Section)

<u>PARTITION</u>	
(Subdivision Name)	(Lot No.)

(Public Water Supply)

<u>800 & 810</u>	<u>CLATSOP</u>
(Tax Lot/Acct. No.)	(County)
<u>OFF SITE SPRING</u>	<u>2.07 ACRES</u>
(Block No.)	(Lot Size)

(Private Water Supply, Specify Type)

☐ Single Family Residence _____
 (Number of Bedrooms)
 ☒ Other (3) 2 TO 4 BEDROOM RESIDENCES
 (Specify)
Directions to Property: HWY 101 SOUTH OF CANNON BEACH. APPROX. 1/3 mile south of ARCADIA BEACH STATE PARK ON OCEAN SIDE OF HIGHWAY.

By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agent permission to enter onto the above described property for the purpose of this application.


 (Signature)
NDU. 2, 1989
(Date)
☐ Owner
☒ Authorized Representative
☒ S.D.S. License No. 36663

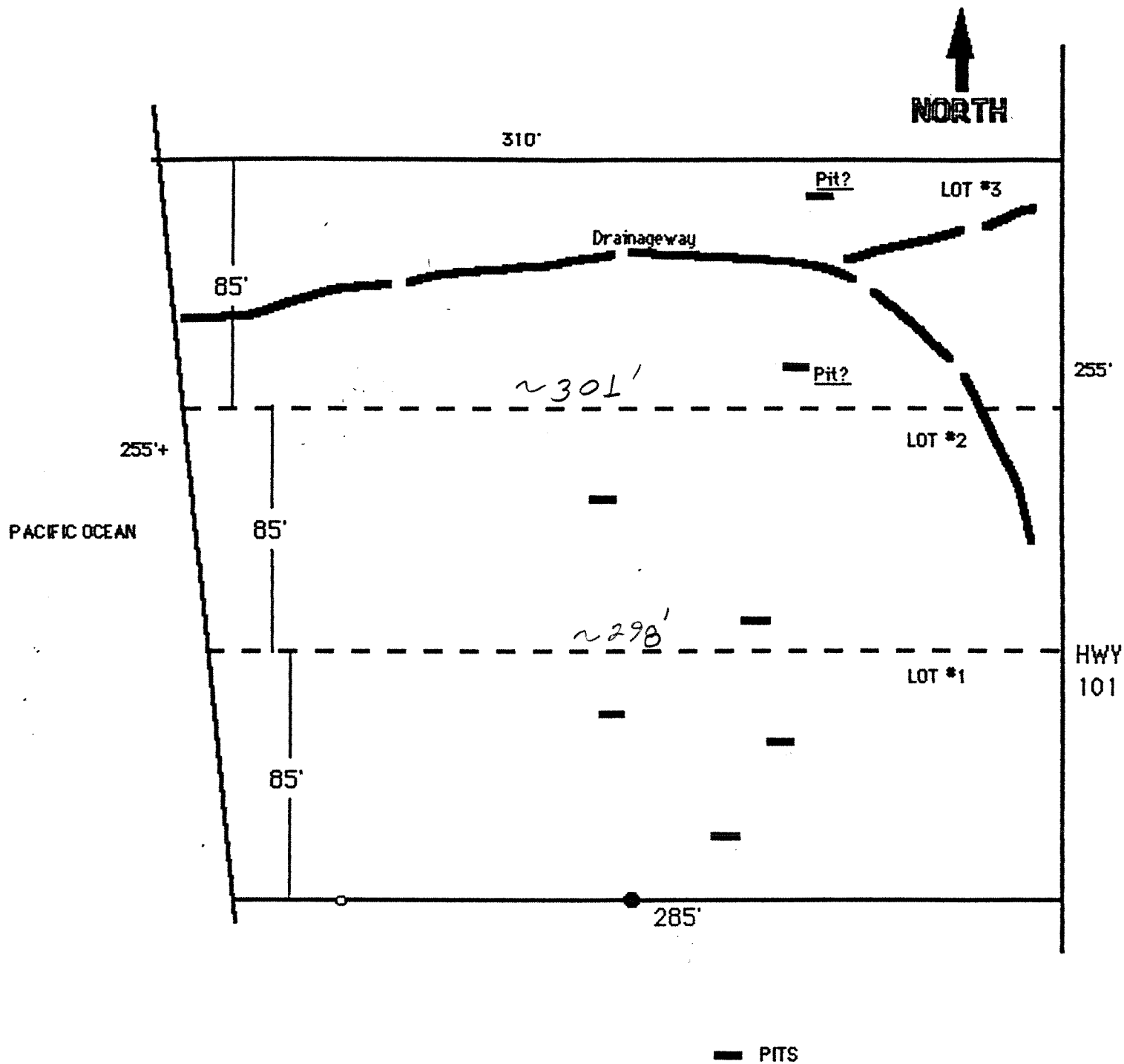
Owner's Mailing Address

NICK CLATERBOS
1036 6th STREET
ASTORIA, OR 97103

Applicant's Mailing Address (if different)

SMITS & ASSOCIATES
14687 S.E. KINGSTON AVE.
Milwaukie, OR 97267
Phone 325-2162Phone 659-5623

John Claterbos 861-1940



Claterbos Lots
Arcadia Beach
Clatsop Co.

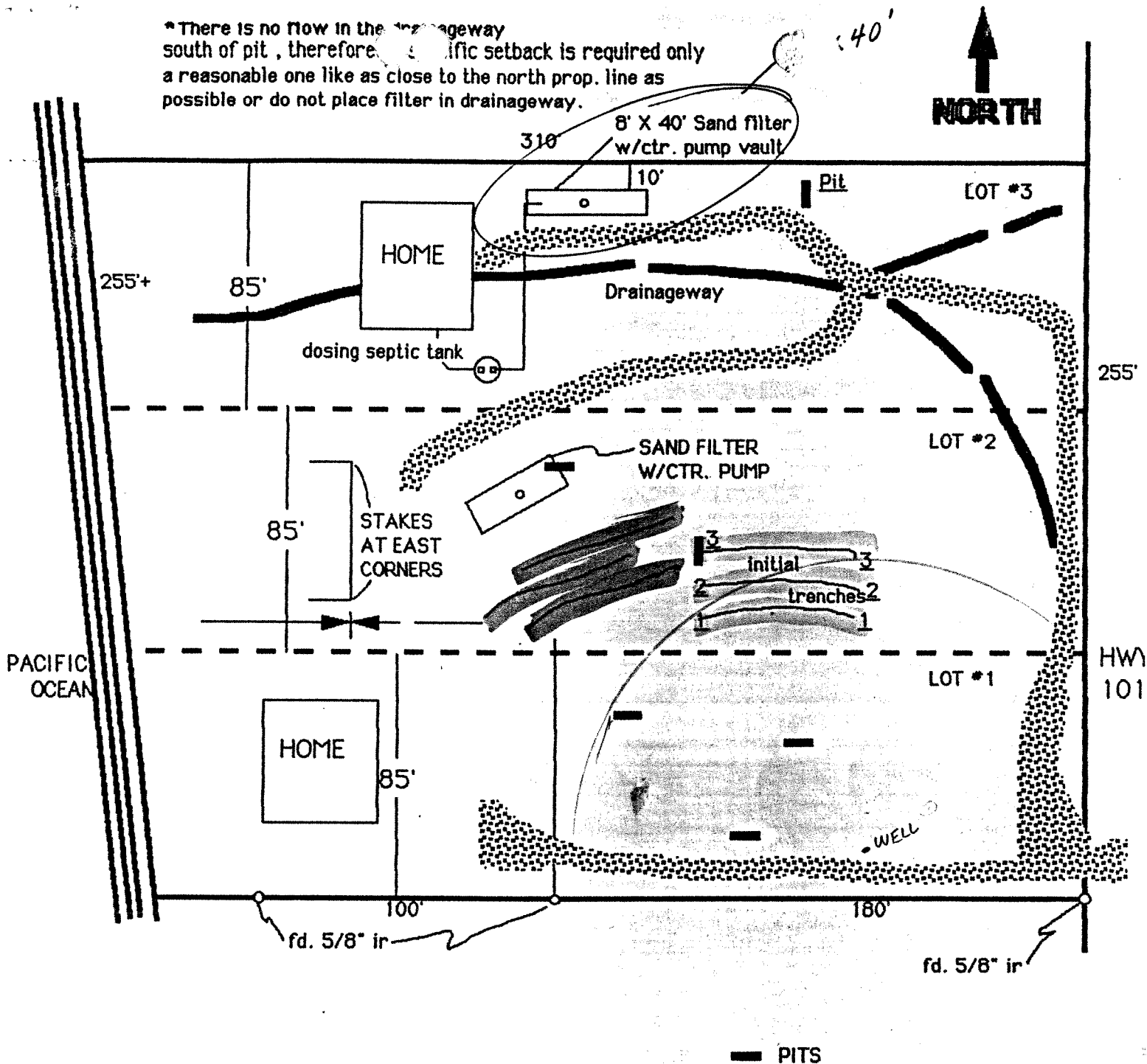
Plot Plan

Scale: 1"=50'

11/01/89

SMITS & ASSOCIATES
14687 SE KINGSTON AVE.
MILWAUKIE, OR 97267
(503) 659-5623

*There is no flow in the drainageway south of pit, therefore a specific setback is required only a reasonable one like as close to the north prop. line as possible or do not place filter in drainageway.



REV. 3/30/90

REV. 1/20/90

Claterbos Lots
Arcadia Beach
Clatsop Co.
Plot Plan

Scale: 1"=50' | 11/01/89

SMITS & ASSOCIATES
14687 SE KINGSTON AVE.
MILWAUKIE, OR 97267
(503) 659-5623

State of Oregon
Dept of Environmental Quality
811 SW Sixth Ave
Portland, OR 97204

DEQ Office Use Only

LAND USE COMPATIBILITY STATEMENT

Applicant John Claterbos	Address 240 S.W. CEDAR WARRENTON, OR	Phone 861-1840
------------------------------------	--	--------------------------

DESCRIBE THE NATURE AND LOCATION OF THE PROPOSED NEW OR EXPANDED FACILITY SITE (INCLUDE APPROPRIATE LEGAL DESCRIPTION AND ZONING DESIGNATION) **ON-SITE SEWAGE TREATMENT FACILITY TO SERVE 3 RESIDENCES SOUTH OF ARCADIA BEACH ON T.4N., R.10W., SEC. T.1. E. 800. SEPTIC TANK - COLLECTION LINE, PRESSURE LINE DILUTION TANK, Recirculating gravel filter and "drainfield". DESIGN, INSTALLATION, operation and maintenance in accord with DEQ WATER POLLUTION CONTROL FACILITIES PER**

FACILITY/SITE LOCATION (CHECK ONE)

☐ INSIDE CITY ☐ INSIDE URBAN GROWTH BOUNDARY ☒ OUTSIDE URBAN GROWTH BOUNDARY

STATEMENT OF COMPATIBILITY FROM APPROPRIATE LAND USE AUTHORITY
(An equivalent statement may be provided in lieu of this form)

IF THE COMPREHENSIVE PLAN is not ACKNOWLEDGED, CHECK ONE OF THE FOLLOWING:

☒ THE PROPOSAL IS CONSISTENT WITH THE STATEWIDE PLANNING GOALS

☐ THE PROPOSAL IS NOT CONSISTENT WITH STATEWIDE PLANNING GOALS

Attach additional findings which reference statewide planning goals and state how the proposed activity is compatible with them.

IF THE COMPREHENSIVE PLAN is ACKNOWLEDGED, CHECK ONE OR MORE OF THE FOLLOWING:

THE PROPOSED ACTIVITY:

☐ IS ALLOWED OUTRIGHT BY THE PLAN

☐ IS ALLOWED BY THE PLAN BUT IS SUBJECT TO FUTURE GOAL CONSIDERATION BY AN AGENCY

☒ IS ALLOWED BY THE PLAN BUT IS SUBJECT TO STANDARDS IN SITING, DESIGN, CONSTRUCTION AND/OR OPERATION

☐ IS NOT ADDRESSED OR CONTROLLED BY THE PLAN

☐ IS ALLOWED BY THE PLAN BUT SUBJECT TO FUTURE GOAL CONSIDERATION BY THE LOCAL JURISDICTION

☐ IS PROHIBITED BY THE PLAN

☐ DURING THE PERIODIC REVIEW THE PLAN WAS NOT FOUND TO BE IN COMPLIANCE WITH THE STATEWIDE PLANNING GOALS

Attach additional findings which reference the specific plan policies criteria or standards which are relied on and state why the compatibility finding is justified based on plan policies, criteria or standards and whether all necessary local approvals have been obtained. If the activity is not addressed by the plan, attach additional findings which reference statewide planning goals and state how the proposed activity is compatible with them.

LAND USE AUTHORITY Clatsop Co Dept. of Planning & Dev.		
SIGNED Shawn J. Haulner	TITLE Planner	DATE 9-14-89

USE THE FOLLOWING SIGNATURE BOX FOR CITY/COUNTY CONCURRENCE IF INSIDE URBAN GROWTH BOUNDARY AND OUTSIDE CITY LIMITS

LAND USE AUTHORITY		
SIGNED	TITLE	DATE

FACILITIES PERMIT

WPCF - N

SEP 26 1989

CK# 829

#125

SEP 26 1989
CK# 1050
#625

Appl. No. 44866

File
No. 104740

Received 9-29-89

Submit Application to:

DEPARTMENT OF ENVIRONMENTAL QUALITY
Business Office
811 SW Sixth Ave.
Portland, OR 97204

1. REFERENCE INFORMATION

1. John Claterbos Official Name of Applicant (Owner)	3. Plant location if different from official address: South of Arcadia Beach Wayside on Hwy. 10 T. 4N., R. 10W., Sec. 7CD T.L. 800 Tolovana
Division Identification	
2. 240 S.W. Cedar Address	
Warrenton, OR 97146 City, State, Zip	
4. John Claterbos Responsible Official	5. Nick Claterbos 325-2162 Alternate Responsible Official
Title	Title
1036 Sixth Street	1036 Sixth Street
Astoria, OR 97103	Astoria, OR 97103
Address or Location	Address or Location
Phone	Phone

2. GENERAL DESCRIPTION

Briefly summarize the proposed facility and primary method of waste treatment and disposal.
On-site sewage disposal system to serve three (3) homes located on the property listed above. The system will consist of a gravity sewer collection line to a common 1500 gal. concrete dosing septic tank, effluent lift pump, to pump effluent to a 1500 gal. concrete dilution tank, from there to a 400 sq. ft. recirculating gravel filter & 320 ft. disposal

3. REQUIRED EXHIBIT

As EXHIBIT A, attach two (2) copies of a Preliminary Engineering Report of Facility Plan Report which fully describes the proposed project, using written discussion, maps, diagrams, and any other necessary materials. Specific items contained in the report should include:

- | | |
|--|---|
| 1. A complete description of the proposal. | 5. Disposal of solid waste and sludges. |
| 2. The location of the project and adjacent facilities and waterways. | 6. Groundwater information. |
| 3. Schedule for development. | 7. Evaluation of groundwater and surface water impacts. |
| 4. Schematic diagrams of industrial processes, waste streams, and treatment and disposal facilities. | |

4. LAND USE APPROVAL	COMPATIBILITY STATEMENT	is attached ☒ is coming ☐ N/A ☐
5. OTHER PERMITS	ATTACH A LIST OF OTHER PERMITS ISSUED OR APPLIED FOR.	
6. FEES (Which must accompany this application)		

Filing Fee	\$ 50
Processing Fee	600
Inspection Fee	100
TOTAL	\$ 750

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

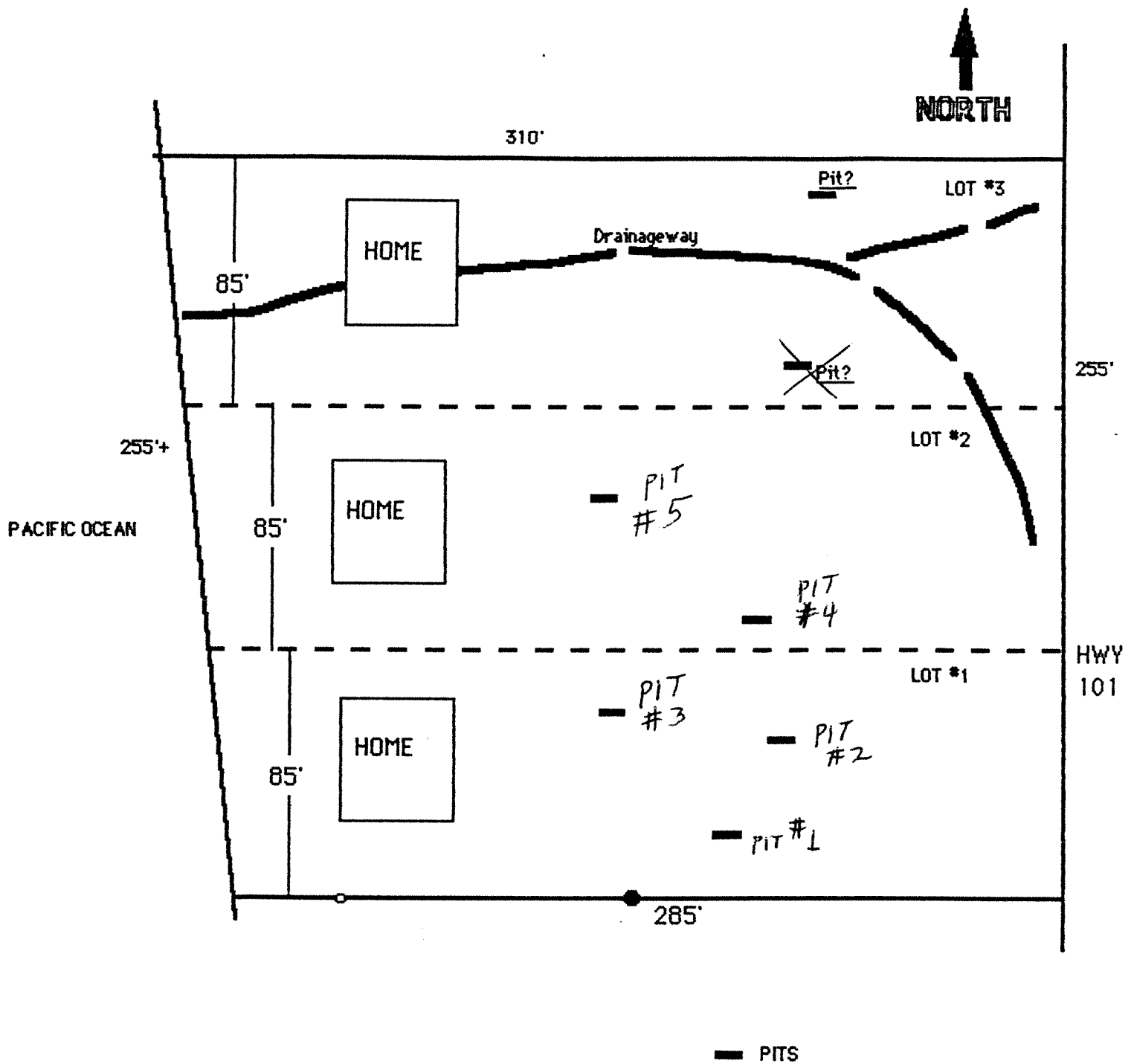
Signature of Owner
(Or legally authorized representative)

Title

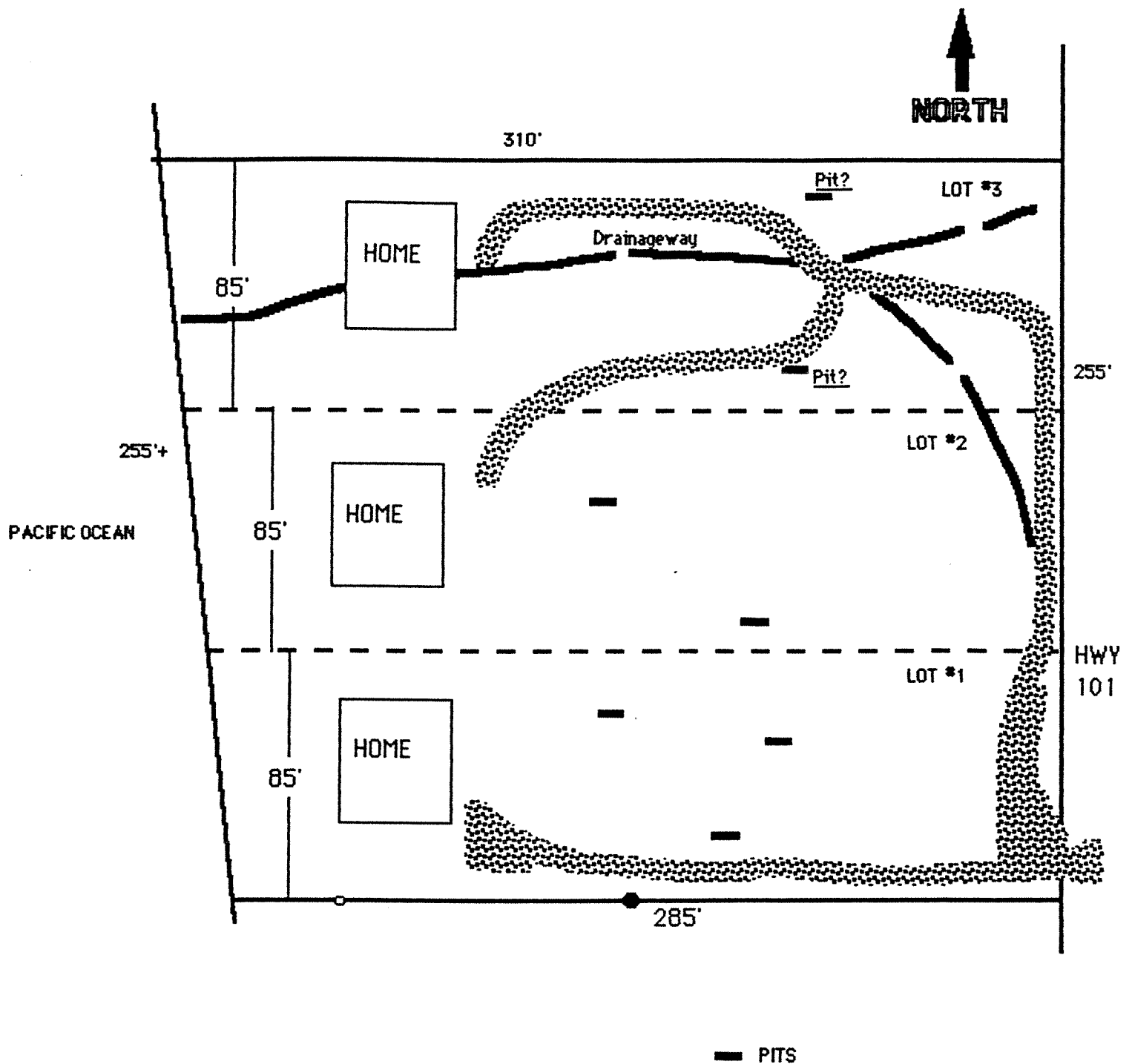
Date

Owner

9/14/89



Claterbos Lots	
Arcadia Beach	
Clatsop Co.	
Plot Plan	
Scale: 1"=50'	11/01/89
SMITS & ASSOCIATES	
14687 SE KINGSTON AVE.	
MILWAUKIE, OR 97267	
(503) 659-5623	



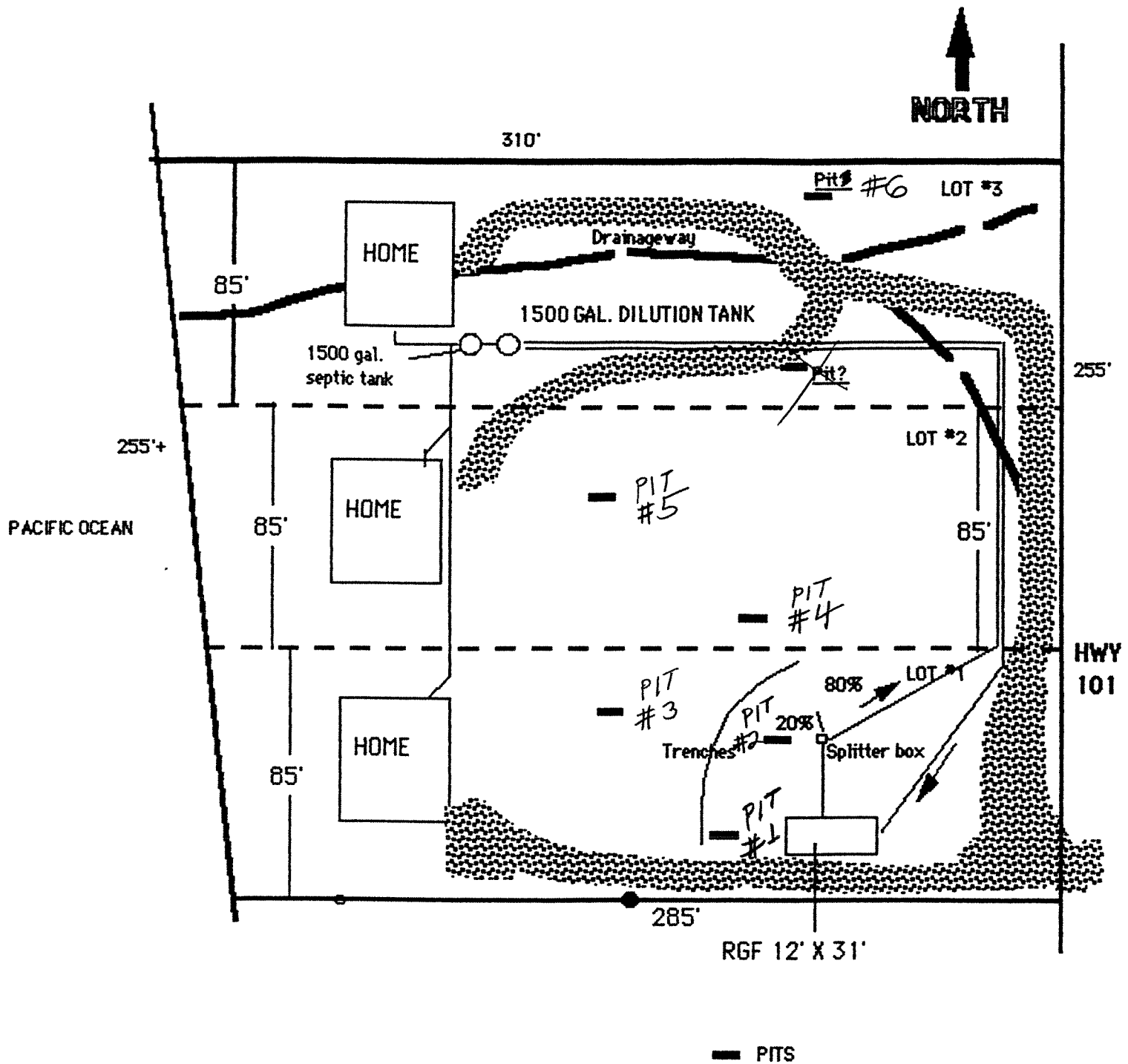
Claterbos Lots
Arcadia Beach
Clatsop Co.

Plot Plan

Scale: 1"=50'

11/01/89

SMITS & ASSOCIATES
14687 SE KINGSTON AVE.
MILWAUKIE, OR 97267
(503) 659-5623



Claterbos Lots

Arcadia Beach

Clatsop Co

Plot Plan

Scale: 1"=50'

11/01/89

SMITS & ASSOCIATES

14687 SE KINGSTON AVE.

MILWAUKIE, OR 97267

(503) 659-5623

October 5, 1989

To: ~~██████████~~ Ralph Funk

From: Darlene Hoge

Subject: John Claterbos; File No. 104740

Ralph: Attached is a copy of the new application for a WPCF Permit for the subject applicant. I logged it in yesterday, incomplete, with a notation in comments, "On hold. Site Evaluation scheduled (Bob Paeth & John Smits)".

Will either you or Bob be acknowledging? Possibly you will want to pass the application copy along to Bob to review before he goes with John. I'm holding the original in my pending file (in case you need to review it).

Files, etc. have been made and a copy of the application mailed to John Smits as he requested in his little note.

Thanks!

10-23-89

Mary Halliburton
re Astoria
~~1330 - 1400~~
Check w/ ~~CL~~ Charlie

May 15, 1989
Jerry Robinson
Nick Claterbos
1036 6th St.
Astoria

dh
Attachment

FACILITIES PERMIT

WPCF - N

SEP 26 1989

Appl. No. 47860

Submit Application to:

DEPARTMENT OF ENVIRONMENTAL QUALITY
Business Office
811 SW Sixth Ave.
Portland, OR 97204

SEP 26 1989

CK# 1050
\$625CK# 829
\$125File
No. 104740Received 4-29-89

REFERENCE INFORMATION

1. John Claterbos Official Name of Applicant (Owner)	3. Plant location if different from official address: South of Arcadia Beach Wayside on Hwy. 10 T. 4N., R. 10W., Sec. 7CD T.L. 800 <u>Tolovana, OR 97145</u>
Division Identification	
2. 240 S.W. Cedar Address	
Warrenton, OR 97146 City, State, Zip	
4. John Claterbos Responsible Official	5. Nick Claterbos 325-2162 Alternate Responsible Official
Title	Title
1036 Sixth Street, Astoria, OR 97103 Address or Location	325-2162 Phone
Phone <u>811-1240</u>	

Claterbos (4)

GENERAL DESCRIPTION

Briefly summarize the proposed facility and primary method of waste treatment and disposal.

On-site sewage disposal system to serve three (3) homes located on the property listed above. The system will consist of a gravity sewer collection line to a common 1500 gal. concrete dosing septic tank, effluent lift pump, to pump effluent to a 1500 gal. concrete dilution tank, from there to a 400 sq. ft. recirculating gravel filter & 320 ft. disposal

DOM-G

REQUIRED EXHIBIT

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1. A complete description of the proposal.
2. The location of the project and adjacent facilities and waterways.
3. Schedule for development.
4. Schematic diagrams of industrial processes, waste streams, and treatment and disposal facilities.
5. Disposal of solid waste and sludges.
6. Groundwater information.
7. Evaluation of groundwater and surface water impacts.

LAND USE APPROVAL	COMPATIBILITY STATEMENT	is attached ☒ is coming ☐ N/A ☐
OTHER PERMITS	ATTACH A LIST OF OTHER PERMITS ISSUED OR APPLIED FOR.	
FEES (Which must accompany this application)		

Filing Fee \$ 50
Processing Fee 600
Inspection Fee 100
TOTAL \$ 750

Logg & Associates, Inc. 11-1-89 JN

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signature of Owner
(Or legally authorized representative)
Title
Date

John Claterbos
Owner
9/14/89

98115/94

State of Oregon
Dept of Environmental Quality
811 SW Sixth Ave
Portland, OR 97204

DEQ Office Use Only

LAND USE COMPATIBILITY STATEMENT

Applicant John Claterbos	Address 240 S.W. CEDAR WARRENTON, OR	Phone 861-1840
------------------------------------	--	--------------------------

DESCRIBE THE NATURE AND LOCATION OF THE PROPOSED NEW OR EXPANDED FACILITY SITE
(INCLUDE APPROPRIATE LEGAL DESCRIPTION AND ZONING DESIGNATION) **ON-SITE SEWAGE TREATMENT FACILITY TO SERVE 3 RESIDENCES SOUTH OF ARCADIA BEACH ON T.4N., R.10W., SEC. 7, T.1. 800. SEPTIC TANK - COLLECTION LINE, PRESSURE LINE DILUTION TANK, Recirculating gravel filter and "drainfield". DESIGN, INSTALLATION, operation and maintenance in accord with DEQ WATER POLLUTION CONTROL FACILITIES PER FACILITY/SITE LOCATION (CHECK ONE)**

☐ INSIDE CITY ☐ INSIDE URBAN GROWTH BOUNDARY ☒ OUTSIDE URBAN GROWTH BOUNDARY

STATEMENT OF COMPATIBILITY FROM APPROPRIATE LAND USE AUTHORITY
(An equivalent statement may be provided in lieu of this form)

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☐ IS PROHIBITED BY THE PLAN

☐ DURING THE PERIODIC REVIEW THE PLAN WAS NOT FOUND TO BE IN COMPLIANCE WITH THE STATEWIDE PLANNING GOALS

Attach additional findings which reference the specific plan policies criteria or standards which are relied on and state why the compatibility finding is justified based on plan policies, criteria or standards and whether all necessary local approvals have been obtained. If the activity is not addressed by the plan, attach additional findings which reference statewide planning goals and state how the proposed activity is compatible with them.

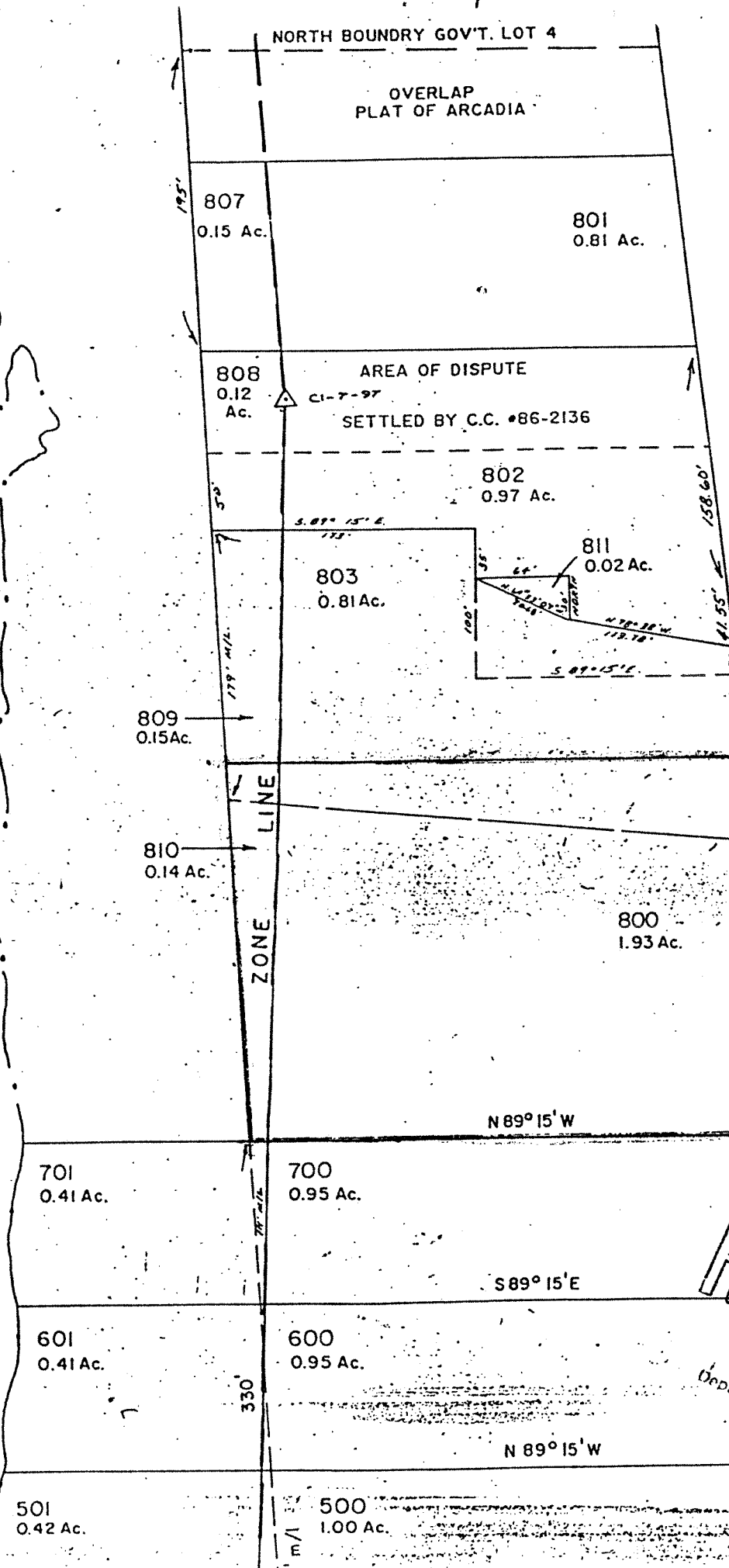
LAND USE AUTHORITY Clatsop Co. Dept. of Planning & Dev.	DATE 9-14-89
SIGNED Shawn. Hubner	TITLE Planner

USE THE FOLLOWING SIGNATURE BOX FOR CITY/COUNTY CONCURRENCE IF INSIDE URBAN GROWTH BOUNDARY AND OUTSIDE CITY LIMITS

LAND USE AUTHORITY		
SIGNED	TITLE	DATE

PACIFIC OCEAN

Elv. Line 5.7'



(SEE COUNTY)

OVERLAP
PLAT OF ARCADIA

100
14.83 Ac.

RECEIVED

SEP 20 1999

Water Quality Division
Dept. of Environmental Quality

CLATERBOS TENTATIVE PARTITION MAP

NORTH

U
S

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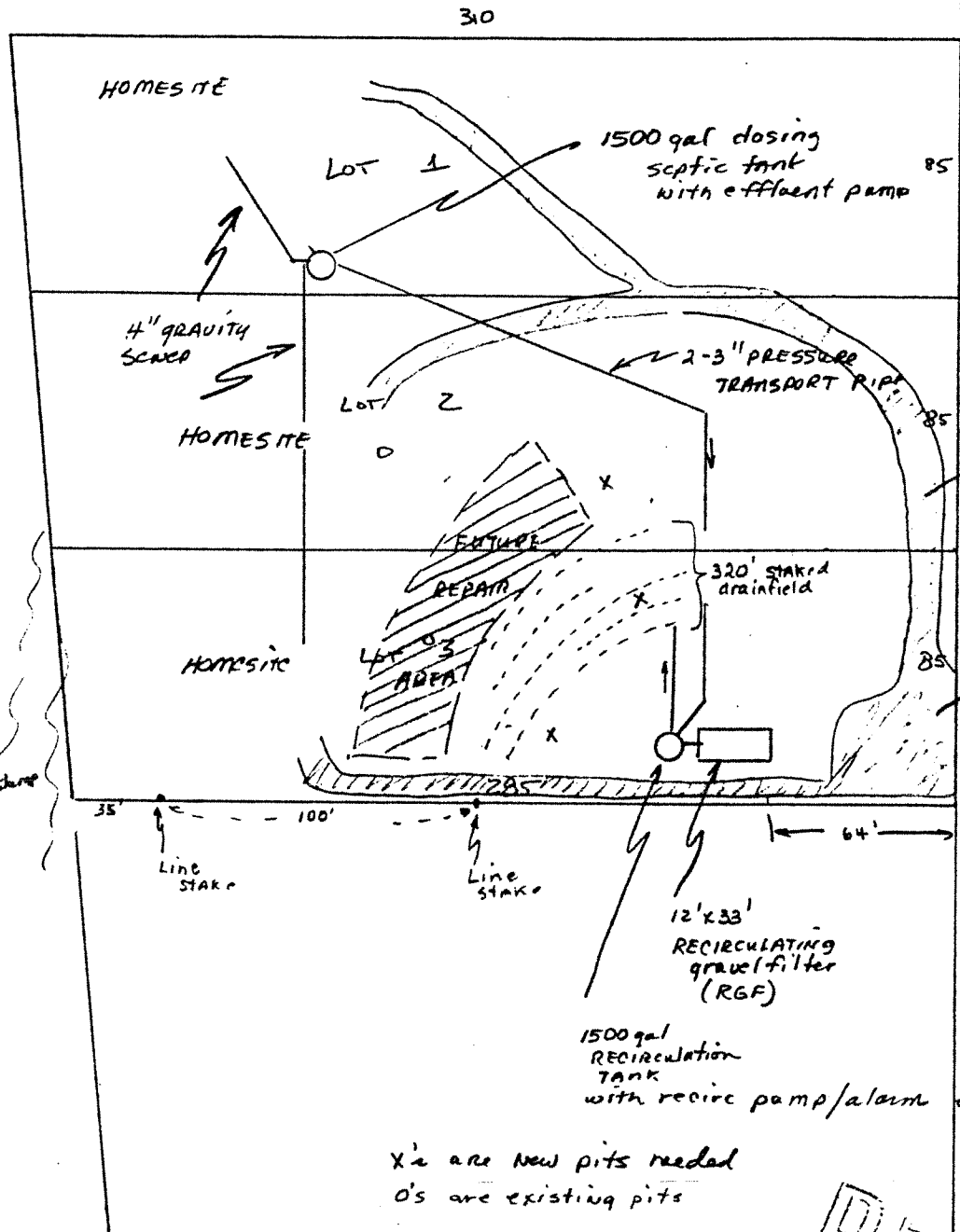
7

8

9

0

1



x's are new pits needed
o's are existing pits

RECEIVED
SEP 29 1999
Water Quality Unit
Dept. of Environmental Quality

Scale 1"=60'

7/31/99

Connie process...
in standard
way. Thanks!
Darlene

DARLENE,

I was told to give this to you
but you went to lunch before I could.
would you kindly route this or
whatever and mail me a copy since
it is an original.

The appl. is incomplete but I
mostly needed to pay the fee
and schedule a site visit with
Poeta - which I did.

Thanks
John Smith

~~OR 5000 ELEVATION~~

↑
TO CANNON BEACH

↑
NORTH

PACIFIC
OCEAN

Hwy 101

ARCADIA
BEACH
WAYSIDE

SEVERAL HOMES

→
NEVER
BLUE GRAY
HOME

DRIVE

~~WATERBURY - WPC~~

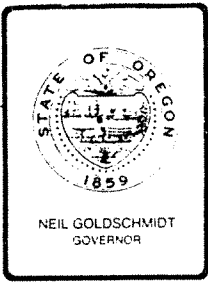
~~PERMIT SITE~~

MEET 10/5/89

240'

ROUGH DRIVE HARD TO SEE
MAY BE BEST TO GO PAST
and COME BACK

↓
TO ARCH
CAPE



Department of Environmental Quality

811 SW SIXTH AVENUE, PORTLAND, OREGON 97204-1390 PHONE (503) 229-5696

May 15, 1989

Nick Claterbos
1036 - 6th Street
Astoria, OR 97103

Re: OSS - Clatsop County
Jerry Robinson
Application for Site Evaluation
T4N, R10W, Sec.7CD, TL 800

Dear Mr. Claterbos:

This is in response to your April 28, 1989 letter and application for site evaluations on the above referenced parcel.

Your letter and check for \$465 were received in our Portland office. This caused delay in processing your application. In terms of the time required to process applications, it requires much less time to submit applications and required fees through our Astoria office.

We have been informed by the Clatsop County Planning Department that an application for partition of this parcel has not been received. In order for this application to be considered complete you must provide a plat map showing the proposed partitions and stake out the proposed partition property lines on the parcel. In addition, if the parcels are approved for on-site sewage disposal, you must provide verification of surveyed and platted parcels (partitions) at the time application is made for construction permits. This is to insure that setback requirements of approved areas have been met.

Please call me in Portland at 229-6053 if you have any questions regarding this matter.

Sincerely,

Chuck Hopkins
Environmental Specialist
Northwest Region

CH

cc: Sewage Disposal Section, DEQ
Astoria Office, DEQ

Fee 465.00
3 Equal Payments

STATE OF OREGON
DEPARTMENT OF ENVIRONMENTAL QUALITY
749 Commercial, P.O. Box 869
Astoria, Oregon 97103; 325-8660 or 1-800-452-4011

FOR OFFICE USE ONLY
Date Rec'd. _____
Date Completed _____
Required Fee \$465.00 (K#14)
Receipt No. _____
Control No. _____

FOR APPLICANT'S USE -- (PLEASE PRINT)

1.9 Acres
Lot Size (Acreage or Dimensions)

JERRY ROBINSON
(Property Owner's Name)

NICK CLATERBOSS
(Applicant's Name if Different from Owner)

Legal Description
of Property

4
(Township)

10
(Range)

7
(Section)

4-10-7CD # 800
(Tax Lot/Acct. No.)

CLATSOP
(County)

For Parcels in Platted
Subdivisions, Indicate

(Subdivision Name)

(Lot Number)

(Block Number)

Proposed Facility

[3] Single Family Residences 2 BDRMS EACH
(Number of Bedrooms)

[] Other _____
(Specify)

Existing Facility

[] Single Family Residence _____
(Number of Bedrooms)

[] Other _____
(Specify)

Water Supply

[] Public (Community System)

[X] Private SPRING
(Indicate: Well, Spring, Etc.)

APPLICATION FOR:

- [X] Site Evaluation Report
[] Permit to Construct On-Site Sewage Disposal System
[] Permit to Repair On-Site Sewage Disposal System
[] Permit for Alteration of On-Site Sewage Disposal System
[] Permit Renewal
[] Existing System Report
[] Plan Review
[] Other (Specify) _____

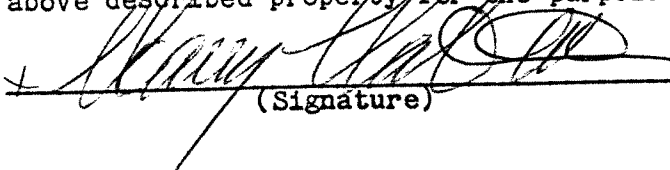
[] Authorization Notice

Purpose of Authorization Notice

- [] Connect to an existing system not currently in use
[] Replace one mobile home with another or a house
[] Replace or rebuild a house
[] Addition of one or more bedrooms
[] Personal hardship
[] Temporary housing
[] Other (Specify) _____

This application will be returned if it is not filled out completely and accompanied by the appropriate fee and attachments required in the guidance packet. Your site must be prepared according to instructions in the guidance packet before action can be taken on this application.

By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agent permission to enter onto the above described property for the purpose of this application.


(Signature)

4/29/89
(Date)

- [] Owner
[X] Authorized Representative
[] Licensed Installer
License No. _____

Owner's Mailing Address

JERRY ROBINSON

P.O. Box 23541

TIGARD, OR 97223

Phone 620-1210

Applicant's Mailing Address (if different)

NICK CLATERBOSS

1036 6th St

ASTORIA, OR 97103

Phone 325-2162

April 28, 1989

Mr. Chuck Hopkins
NW Region Environmental Specialist
Department of Environmental Quality
811 S.W. 6th Avenue
Portland, OR 97204

Dept. of Environmental Quality
RECEIVED
MAY 1 1989

NORTHWEST REGION

RE: Claterbos Septic Feasibility - Clatsop County

Dear Mr. Hopkins:

I have entered into an earnest money agreement with Jerry Robinson to purchase a 1.9 acre tract of land adjoining the Pacific Ocean about one mile south of Cannon Beach in Clatsop County. One of the contingencies of this purchase is a determination upon the septic feasibility of this site. I would like to know whether three septic systems could be located on this property.

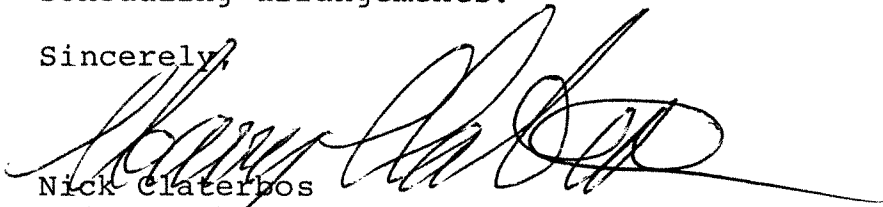
I have attached the following informational materials to this letter:

- (1) An Assessor's map of the subject property.
- (2) A tentative partition map.
- (3) A completed DEQ form.
- (4) A check in the amount of \$ 465⁰⁰.

I would like to make arrangements to meet with you on this property as soon as your schedule allows. I will have a small backhoe on site to excavate test holes as required for your inspection. I understand that you are normally in Clatsop County on Wednesday and I would like to schedule this work for Wednesday, May 3, 1989, if possible.

Please contact me at 325-2162 so we may make appropriate scheduling arrangements.

Sincerely,



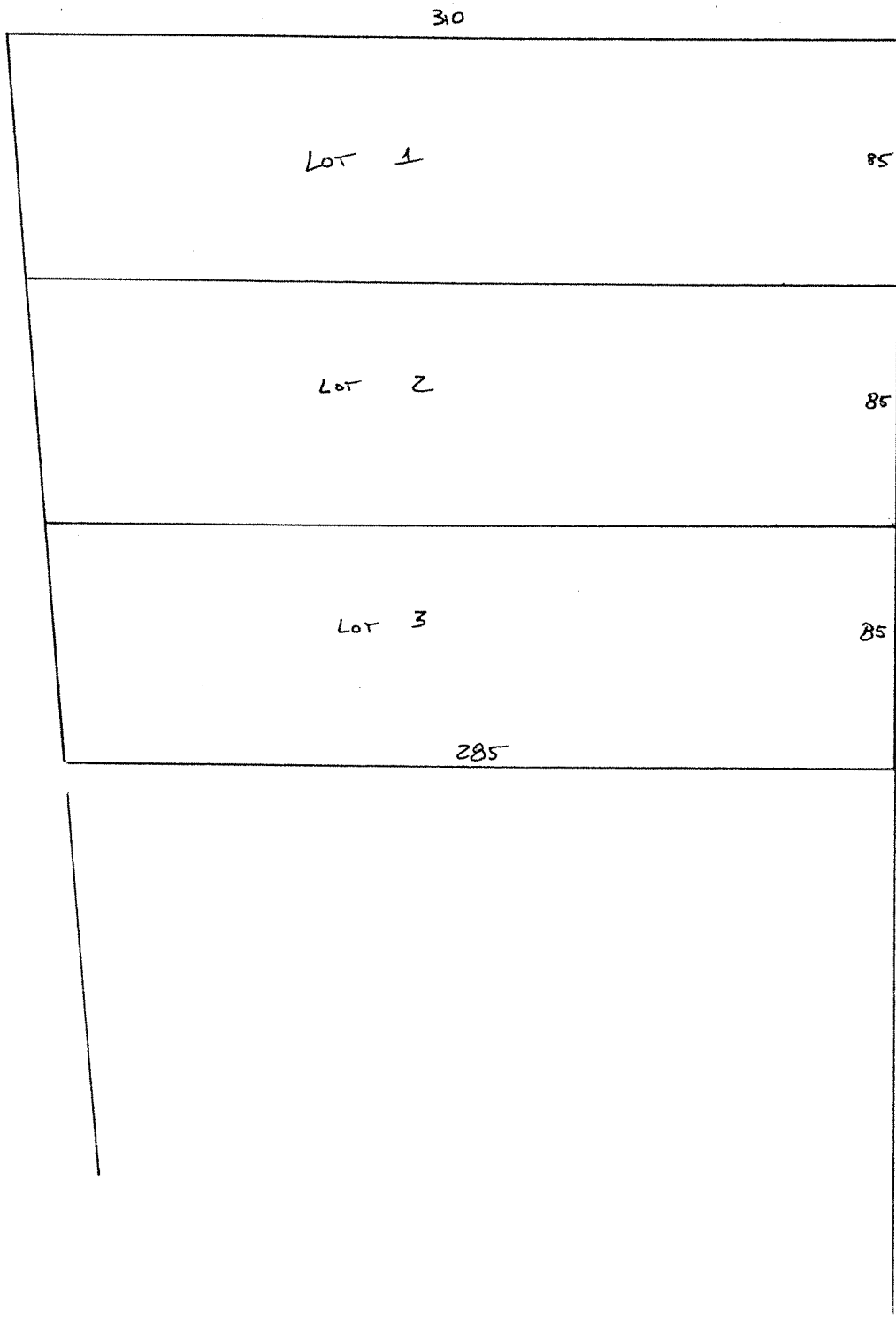
Nick Claterbos
1036 - 6th Street
Astoria, OR 97103

Attachments

CLATERBOS TENTATIVE PARTITION MAP

P
A
C
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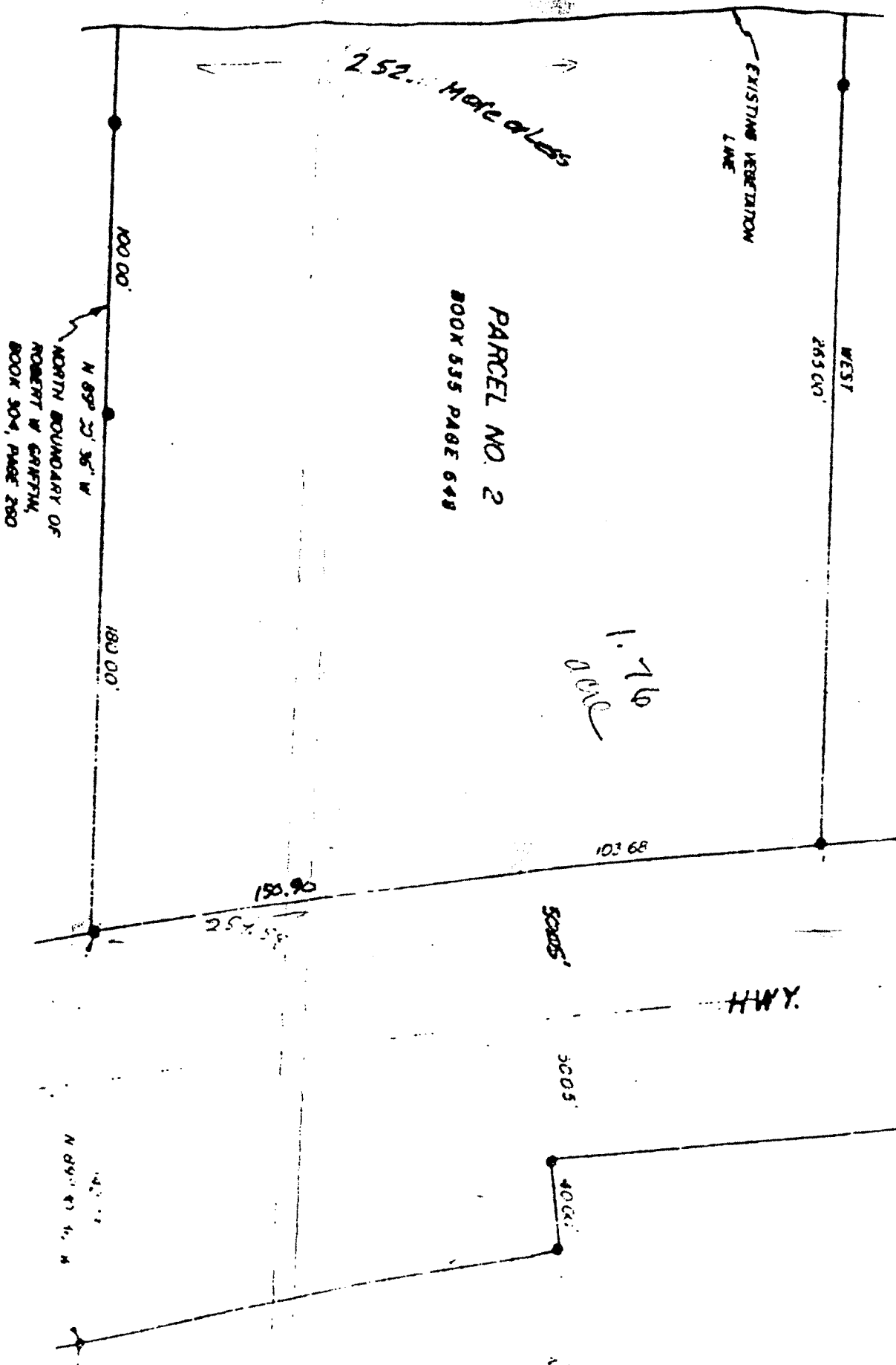
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C.A.# B-7429

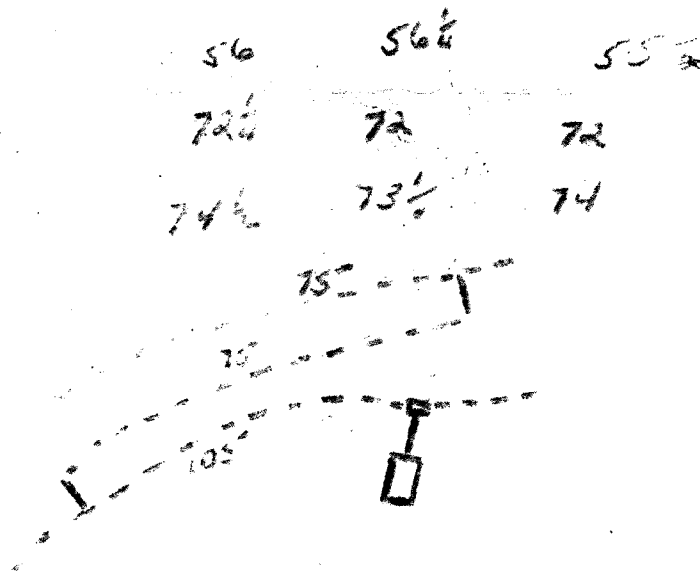


CLATSOP COUNTY HEALTH DEPT.
1857 COMMERCIAL STREET
ASTORIA, OR. 97103
TELEPHONE 325-7441 EXT. 35
SUBSURFACE SEWAGE DISPOSAL SYSTEM
FINAL INSPECTION

PERMIT NO. 77-40

OWNER'S NAME W. J. ... ADDRESS ...
PROPERTY ADDRESS 402 7th St INSTALLER ...
RESIDENTIAL ☒; COMMERCIAL ☐; NO. OF LIVING UNITS 1; NO. OF BEDROOMS 1
WATER SUPPLY: PUBLIC ☐, COMMUNITY ☒, PRIVATE ☐. TYPE OF WELL ...
DEPTH ... FT., ISOLATION DISTANCE ... FT.; SOIL CLASSIFICATION ...
SEPTIC TANK: STEEL ☒, CONCRETE ☐, CAPACITY 1000 GALLONS
STONE: SIZE 1/2, WASHED ☒, BELOW TILE 6 IN., ABOVE TILE ...
TRENCH WIDTH ... IN; TRENCH 10 FT. ON CENTER; TOTAL SQ. FT. 510 SQ. FT.
TILE: CONCRETE ☐, CLAY ☐, PLASTIC ☒; BUILDING SEWER: NOT YET INSTALLED MATERIAL ...

PLOT PLAN: This plot plan is not drawn to scale and is to be used only to give an approximate location and design of the system.



☒ APPROVED: Installation conforms to DEQ Requirements.
☐ DISAPPROVED: Installation does not conform to DEQ Regulations.
REMARKS: ...

DATE: 8/7/77

SANITARIAN Bruce W. ...

NOTE: This inspection was made to determine: The amount of stone, sizing of the system and general construction. It should be noted that this inspection does not necessarily include the final backfilling operation.

WILLIAM ROBINSON

12000 S.W. BULLITT RD STATE OF OREGON

TICKED Department of Environmental Quality

RE: 4 10 TCD 800

Permit No. 77-140

(PORTION THEREOF) Expiration Date 5-23-78

PERMIT

TO CONSTRUCT SUBSURFACE SEWAGE SYSTEM

All work to conform to requirements of Oregon administrative rules governing subsurface sewage disposal. All work shall be performed by property owner personally or by a licensed septic tank installer.

Tank Capacity 750 Gallons

Drain Field 500 Sq. Ft.

PERMITS NOT TRANSFERABLE

POST ON PREMISES UNTIL COMPLETED

PROPOSED SUBSURFACE SEWAGE DISPOSAL SYSTEM
 Installer: Complete top part of 1 to
 signature and submit both copies with
 application.

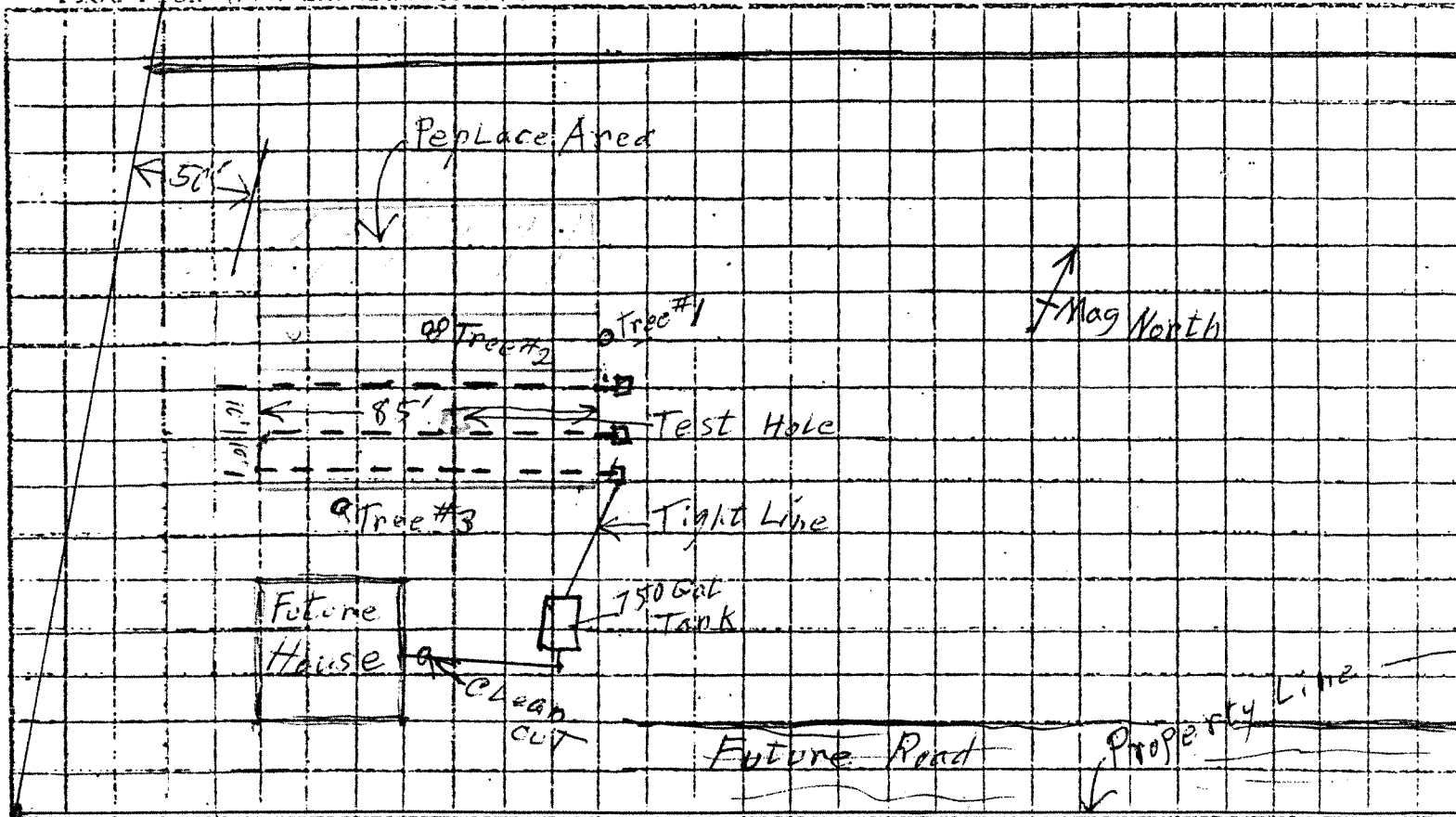
LIST
 OF S.F. INSTRUCTIONS

(Exhibit No. 1)

Permit No.

Installer's Name			Property Address		
No. Living Units 1	Bedrooms 2	Baths 2 1/2	Basement Yes No ☒	Water Supply Community ☒ Public Other	
Septic Tank: Ft. from well Steel ☒ Concrete No. Compartments Gal. Capacity 750					
Inside Dimensions: Ft. Length Width Diameter Depth			Tile Disposal Field: Distribution Box: Yes		
Applicant Name William Robinson			Other Distribution - Type		
Mailing Address 12000 S.W. Bull Mt. Rd. Tigard Ore 97223			Feet from Well Foundation 15		
Length of Lines - Ft. 85			Trench Width 24		
1. 2. 3. 4. 5. 6.			Total sq. ft. 500		
Ft. between lines 10			Filter Depth 2 in.		

Plot Plan (See instructions):



Date

Signature

William Robinson

For Sanitarian Use Only:

- ☒ Approved: System Installation Conforms to DEQ Rules for Subsurface Sewage Disposal
☐ Disapproved: Does not Conform to DEQ Rules for Subsurface Sewage Disposal

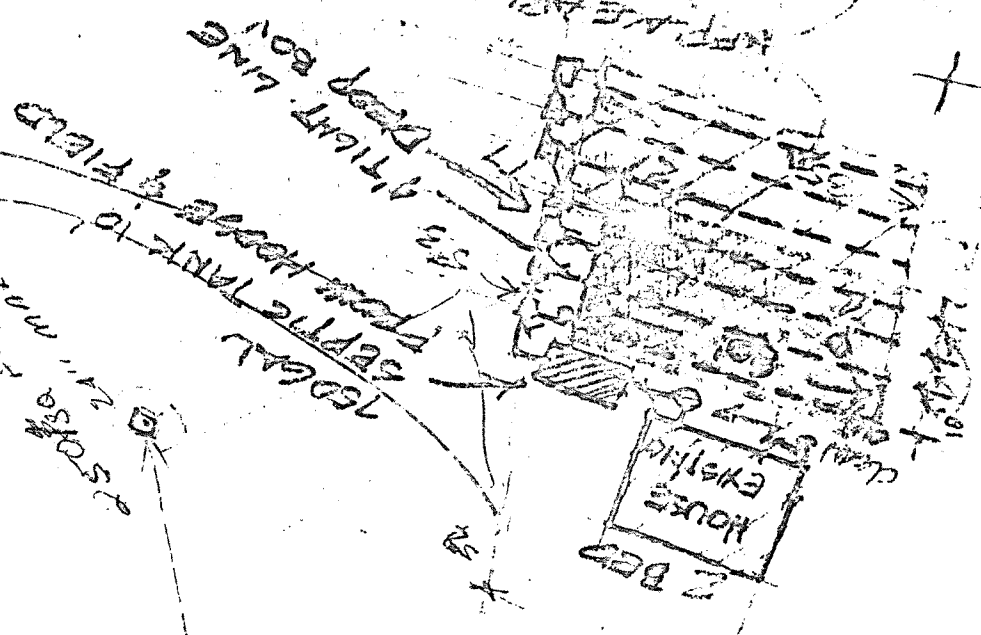
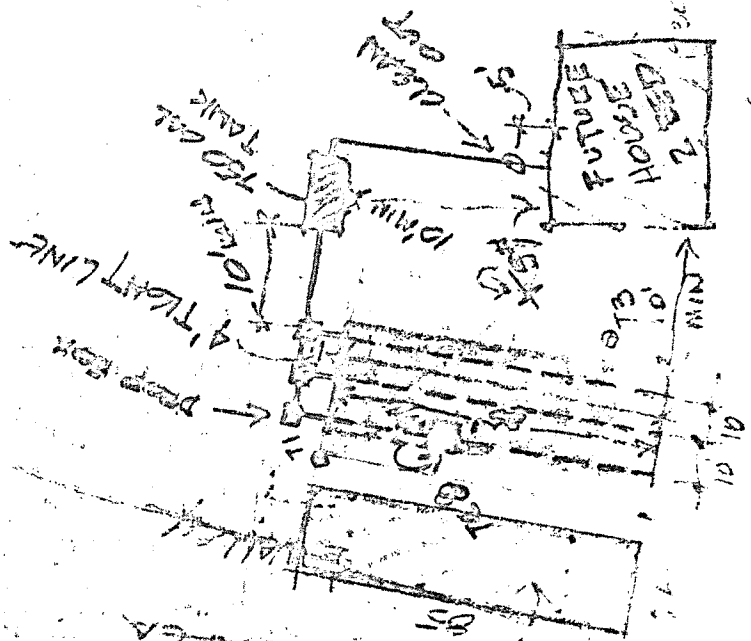
Remarks:

Date: 5/23/77

Sanitarian's Signature

PROPERTY LINE

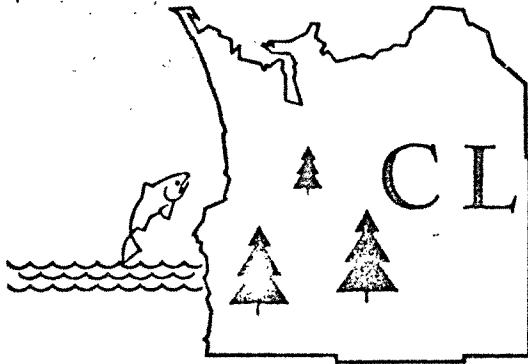
ROAD



CLIFF

Test holes

MAG. NORTH
S/S/T
VCG



CLATSOP COUNTY

CLATSOP COUNTY HEALTH DEPARTMENT

857 COMMERCIAL STREET

P. O. BOX 206, ASTORIA, OREGON 97103

TELEPHONE 325-7441 EXT. 30

May 5, 1977

Mr. William Robinson
12000 S.W. Bull Mountain Road
Tigard, Oregon 97223

Re: 410 - 7CD - 800

Dear Mr. Robinson:

On May 3, 1977, we performed an on site evaluation of the property identified above to determine whether a Subsurface Sewage Disposal Permit could be issued.

As a result of this evaluation, we have determined that the conditions on the site are in compliance with the Oregon Administrative Rules Pertaining to Standards for Subsurface and Alternative Sewage and Nonwater-Carried Waste Disposal. A permit will be granted when the required plot plan and fee are received by the Department.

A Subsurface Sewage Disposal Permit costs \$50.00. If you have already paid the initial \$25.00 site inspection fee, please bring in your receipt and this amount will be deducted from the permit fee. Make all checks payable to the Clatsop County Health Department.

Sincerely,

CLATSOP COUNTY HEALTH DEPARTMENT

Bruce L. Mason, R.S.
Clatsop County Sanitarian

BLM/wel

RESTRICTIONS

- 1) Provide an absorption area of 250 square feet per bedroom with a septic tank of at least 750 gallon capacity.
- 2) Maintain a 50 foot setback with drainfield from the cut bank to the west.
- 3) Place the drainfield in the area discussed with you.
- 4) This approval void if in conflict with any county planning or building regulations.
- 5) Alteration of the natural soil conditions in the area approved may void this approval.
- 6) Submit a detailed plot plan and obtain a sewage disposal permit through this office prior to any construction (application enclosed).

Encl: Receipt

lot evaluation application

State of Oregon
DEPARTMENT OF ENVIRONMENTAL QUALITY

CERTIFICATE
OF FAVORABLE SITE EVALUATION FOR
INDIVIDUAL SUBSURFACE SEWAGE DISPOSAL SYSTEM
(Not a permit for construction)

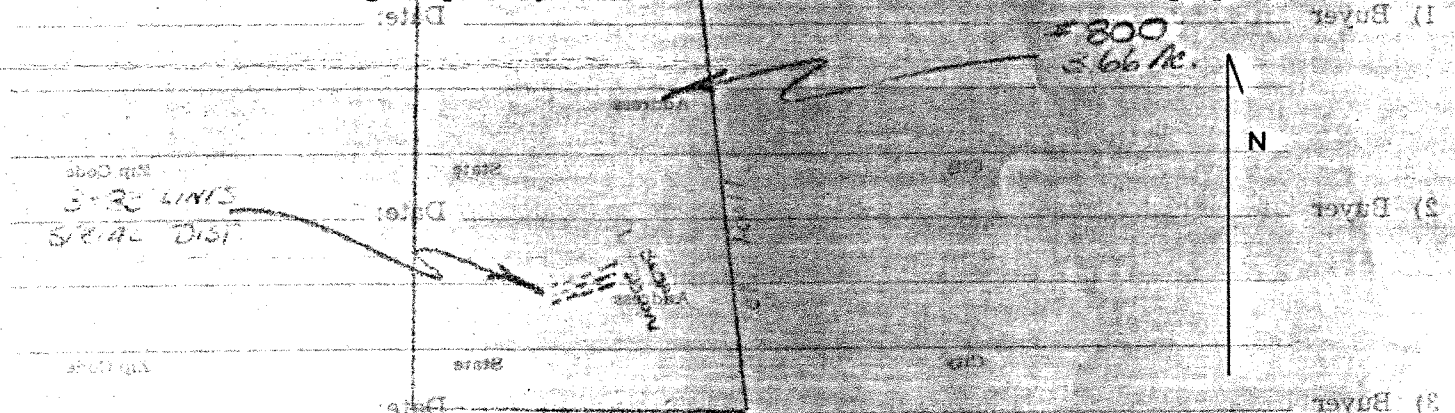
This is to certify that the following described property

T4N R10W SE 7CD LOT 808
CLATSOP COUNTY

has been evaluated on May 3, 1977 and found to be approvable for the installation of one subsurface sewage disposal system in accordance with ORS 454.605 through 454.755 and administrative rules of the Environmental Quality Commission promulgated thereunder.

This approval is given on the basis that the lot or parcel described above will not be further partitioned or subdivided and that conditions on subject or adjacent properties have not been altered in any manner which would prohibit issuance of a permit under the statutes and rules noted above. Any such subdivision, partitioning or alteration voids this certificate.

The subsurface sewage disposal system is to be located on the above-described property as follows:



A system to be located anywhere on the lot or parcel other than as described above will require an additional site evaluation along with an additional fee.

This certification is valid until a subsurface sewage disposal system is installed pursuant to a permit obtained from CLATSOP COUNTY HEALTH DEPT. or until earlier cancellation, pursuant to Commission rules, with written notice thereof by the Department of Environmental Quality to the then owners according to Department records or the county tax records, whichever are more current. Subject to the foregoing, this certification runs with the land and will automatically benefit subsequent owners of the land.

Issued: May 5, 1977
Date

To: M. W. ... BORINSON
Landowner

1000 ... BULL M. R.
Address

... 97223
City State Zip

By [Signature]
DEQ or Contract Agent

CLATSOP COUNTY DEPARTMENT OF PLANNING AND DEVELOPMENT

Tax Lot 800 Section 7CDTownship 4 Range 10Size of Lot 3.66 acreZone Designation R-1Lot Frontage on Public Road Yes ☒ No ☐Major Partition Required Yes ☐ No ☒Patricia A. Kubala
(Signature)4-5-77
(Date)CLATSOP COUNTY HEALTH DEPARTMENT
Sanitation Section

PERMIT # _____

Name and Address to which permit or inspection
should be mailed:Lot Evaluation Fee \$25.00
(paid) EnclosedWilliam R. Robinson

Permit Fee (paid) _____

12000 SW Bull Mt. Rd.Tigard, Ore 97223

Person to be contacted in regard to this application:

Name William RobinsonPhone No. 620-1210

Directions to property to be inspected:

South of Cannon beach past silver point at
35 Mi. per hr. post West side of highway 101TEST HOLES HAVE BEEN DUG
WILL CALL WHEN READYX

Department of Environmental Quality
1234 S. W. Morrison
Portland, Oregon 97205

Land Quality
County

Application to the Department of Environmental Quality
for a Permit to Construct a
New or Repair a Subsurface Sewage
Disposal System

Permit Fees: New \$50.00 Repair, Alteration \$15.00

A. REFERENCE INFORMATION

William Robinson Section 7 T 4 N R 10 W
Name of Applicant
12000 S.W. Bull Mt. Rd. Tax Lot or Account # 800
Address
Tigard Location South of Cannon Beach West of 101
City
Installers Name

B. GENERAL DESCRIPTION

New Construction X Repair _____
Installation will serve: House X Mobile Home _____ Mobile Home Park _____
Commercial Building _____ Other (Explain) _____
No. of Living Units 2 No. Bedrooms 2
Water Supply: Public _____ Community _____ Private X ^{off site} Garbage Disposal? NO

C. REQUIRED EXHIBITS

1. Proposed Subsurface Sewage Disposal System DEQ Interim Form #2
2. Planning Evaluation - Building Permit (Local Option) _____
3. Other (Local Option) _____

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and belief.

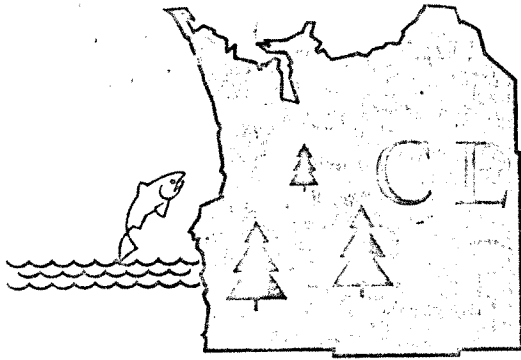
William R. Robinson
Signature (Owner/~~Installer~~)

Permit No. _____

Date _____

Issued _____

Date



CLATSOP COUNTY

CLATSOP COUNTY HEALTH DEPARTMENT

857 COMMERCIAL STREET

P. O. BOX 206, ASTORIA, OREGON 97103

TELEPHONE 325-7441 EXT. 30

May 23, 1977

Mr. William Robinson
12000 S.W. Bull Mt. Road
Tigard, Oregon 97223

RE: 410 - 7CD - 800 Portion thereof

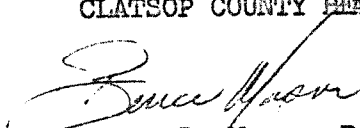
Dear Mr. Robinson:

Please find enclosed your subsurface sewage disposal permit and the requested information. Note the feasibility application is also enclosed; I neglected to have you sign it. Once you sign and return it to us, a written response will be sent regarding the property described above.

If you have further questions, feel free to contact me.

Sincerely,

CLATSOP COUNTY HEALTH DEPARTMENT


Bruce L. Mason, R.S.
Clatsop County Sanitarian

BLM/wel

Encl

See Map

100
14.83 Ac.

195

CI-7-97

8

ZONE _____ LINE _____

N 89° 15' W

700
0.93 Ac.

S 89° 15' E

600
0.94Ac.

N 89° 15' W

500
0.97 Ac.

HIGHWAY

COAST

200
6.38 Ac.

②

PACIFIC

OCEA

Elev. Line 5.7'

See Map 4 10 7CA

100
14.83Ac.

801
1.43Ac.

800
3.66Ac.

700
0.93Ac.

600
0.94Ac.

500
0.97Ac.

400
3.33Ac.

200
6.38Ac.

300
5.23Ac.

(EP 10-11)

10-07

Gox Lot 4

HIGHWAY

COAST

OREGON

ZONE LINE

④

③

⑥

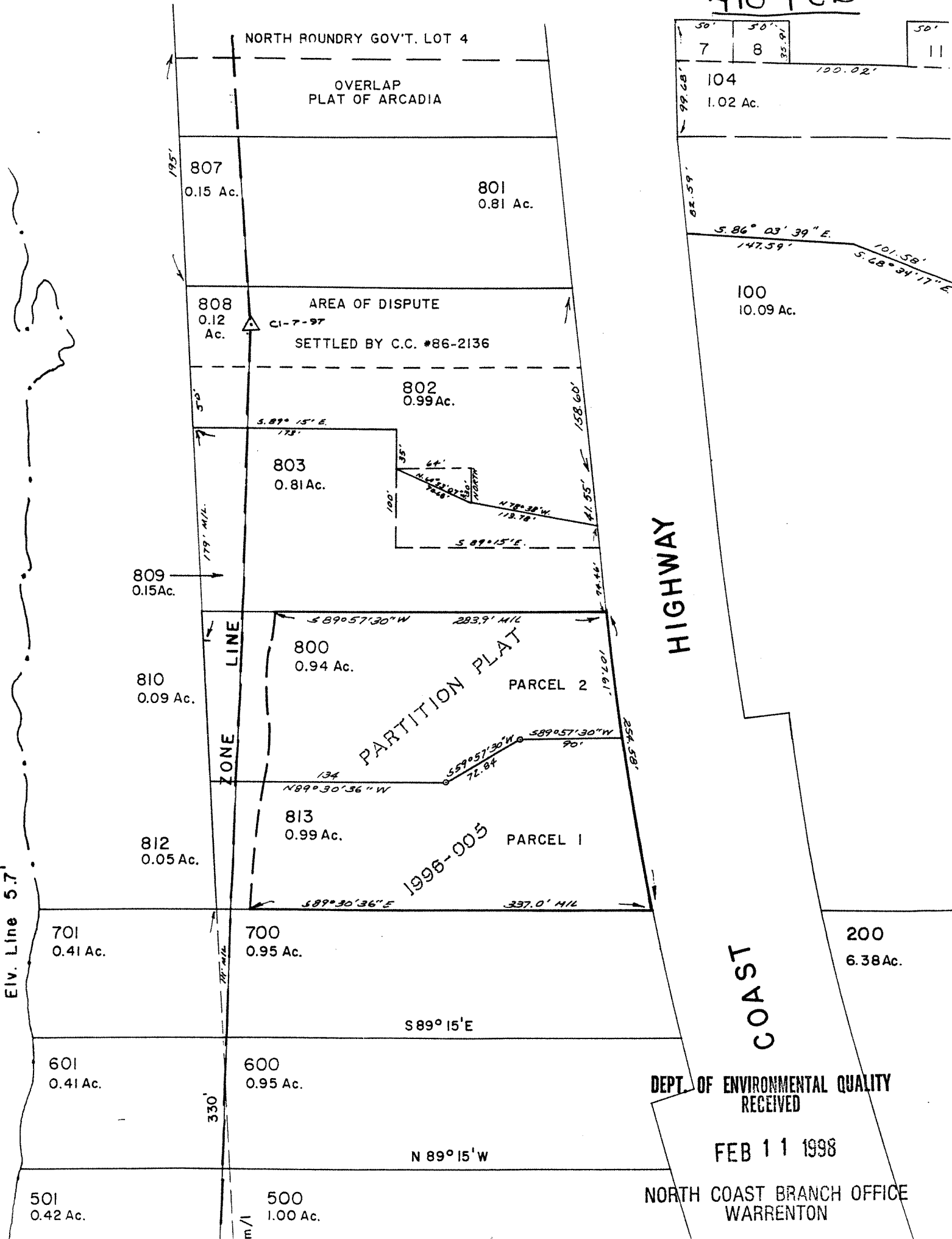
⑦

②

③

①

4107CD



DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

FEB 11 1998

NORTH COAST BRANCH OFFICE
WARRENTON

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

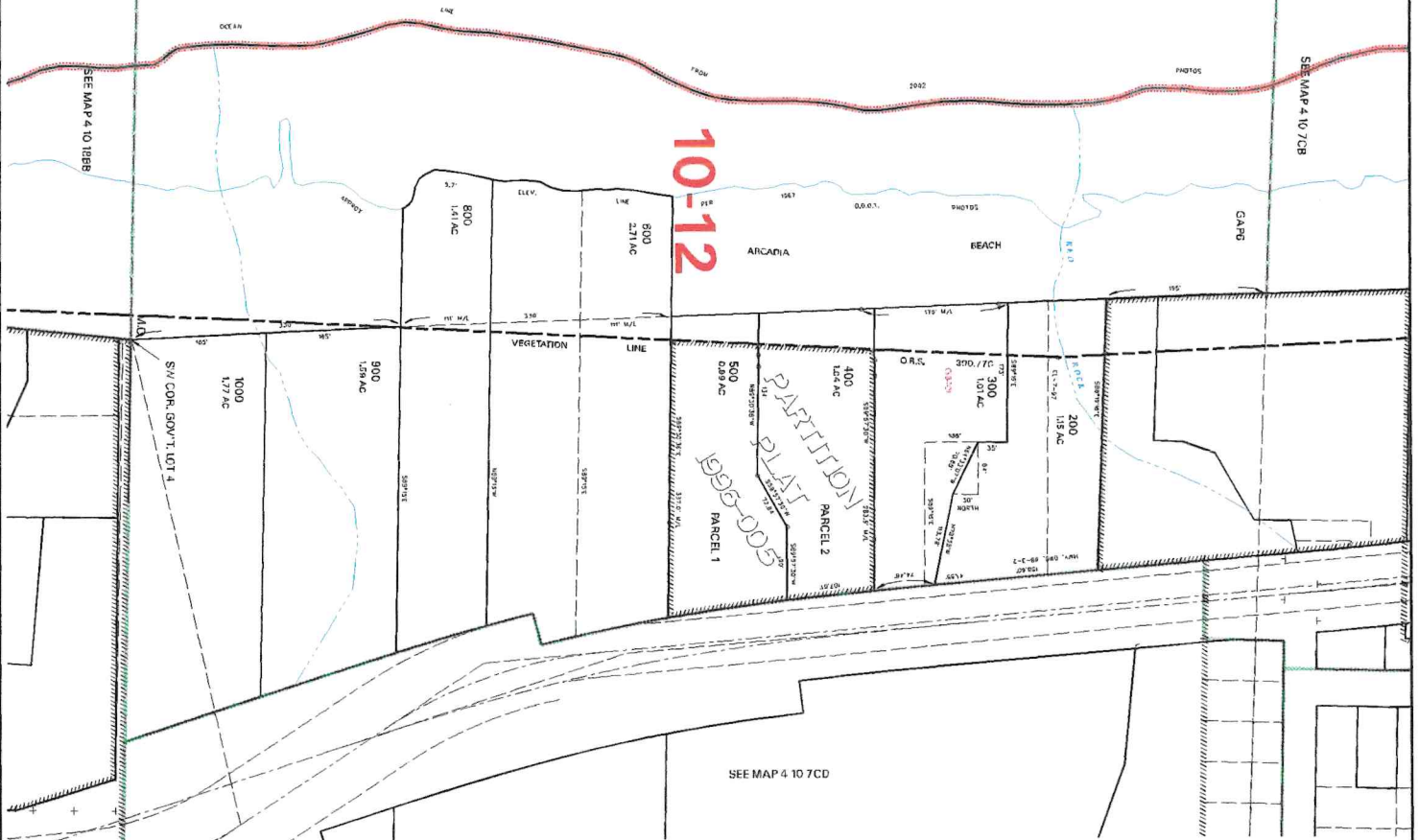
MAY 27 2008

NORTH COAST BRANCH OFFICE
WARRENTON

PACIFIC

OCEAN

10-12



T4N R10W SEC 7CC WM
CLATSOP COUNTY
Scale 1:1200

NAD 1983 UTM Zone 18N Spheroid Oregon State Plane 5001 Feet East

Clatsop
County

200
700
4001

32	33	34	35	36	37
6	5	4	3	2	1
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30
31	32	33	34	35	36
37	38	39	40	41	42



This map is not for sale. It is a courtesy map provided to the public by the Clatsop County Auditor. The map is not to be used for any purpose other than for information. The map is not to be used for any purpose other than for information.

March 13, 2008

4.10.7C