

49671

Control No.

STATE OF OREGON

PERMIT NO. 97-46

DEPARTMENT OF ENVIRONMENTAL QUALITY

\$ 490.00

Fee

New Construction

Repair

Other

Permit Issued To Gordon & Roberta Smith 5N 7W 28 508 Clatsop  
(Property Owner's Name) (Township) (Range) (Section) (Tax Lot / Acct. No.) (County)

Evergreen Acres Rd. Seaside (Elsie) Dewey Donald 4-11-97  
(Road Location) (City) (Issued by - Signature) (Date Issued)

**PERMITS ARE NOT TRANSFERABLE**

ALL WORK TO CONFORM TO OREGON ADMINISTRATIVE RULES, CHAPTER 340. WORK SHALL BE DONE BY PROPERTY OWNER OR BY LICENSED SEWAGE DISPOSAL SERVICE. (MAKE NO CHANGES IN LOCATION OR SPECIFICATIONS WITHOUT WRITTEN APPROVAL)

**SPECIFICATIONS**

EXPIRATION DATE April 11, 1998 TYPE OF SYSTEM Standard

Concrete Tank Volume 1000 Gallons Disposal Trenches  Seepage Bed(s)  450 Gallons/Day  
Maximum Depth 30 inches. Minimum Depth 24 inches. 300 Linear Feet  
Equal  Loop  Serial  Pressurized  Minimum Distance Between Trenches 10' on centers  
Total Rock Depth 12 inches. Below Pipe 6 inches. Above Pipe 2 inches.  Rake Sidewall

Install less than 18" and cap if necessary. Special Conditions (Follow Attached Plot Plan) Install in accordance with plans & specifications submitted. Septic tank to be set back a minimum of 10' to any water lines and 5' to any property lines or building foundation. 10' setback from any property lines, water lines or underground utilities from disposal field. 100' setback from disposal field to any wells. Install during dry soil conditions. Establish dense grass cover over drainfield once installed.

**CERTIFICATE OF SATISFACTORY COMPLETION**

As-Built Drawing with Reference Locations

Installer Gordon Smith Logging Inc.

See as-built plot plan submitted by installer.

Final Insp. Date 5-29-97

Inspected By Bruce W. Henderson

Issued by Operation of Law

Pre-cover inspection waived pursuant to OAR 340, Division 71

In accordance with Oregon Revised Statute 454.665, this Certificate is issued as evidence of satisfactory completion of an on-site sewage disposal system at the location identified above.

Issuance of this Certificate does not constitute a warranty or guarantee that this on-site disposal system will function indefinitely without failure.

Bruce W. Henderson  
(Authorized Signature)

Natural Resource Specialist  
(Title)

5-29-97  
(Date)

DEQ, NWR, Portland  
(Office)

STATE OF OREGON  
DEPARTMENT OF ENVIRONMENTAL QUALITY  
ON-SITE SEWAGE SYSTEM INSTALLATION

~~Inspection~~ **CORRECTION NOTICE**

An Inspection of this On-Site Sewage System has identified the following deficiencies:

- 1) Replace concrete riser lid on tank - install gasket for riser lid
- 2) Compact soil under Effluent line for firm support for minimum 2' downline from coupler coupling
- 3) Watch the cleanliness of your drainrock - its dirty in places
- 4) Add more drainrock & straw to the ends of lines

OK to cover system after completion of above items - exclude large debris (>6") from backfill - Reinspection NOT required

Under the provisions of the OREGON ADMINISTRATIVE RULES, all deficiencies listed above must be corrected within 30 days, and a CERTIFICATE OF SATISFACTORY COMPLETION must be issued prior to use of this system. When corrections have been completed, call for inspection.

PERMIT NO. 97-46 5N 7W 28 5008 Clatsop  
 Smith/Smith Township Range Section Tax Lot / Acct. No.

INSPECTION:

TIME 4:30 P.M.

DATE 5/29/97

CONTACT: NCBO - Warrenton

BY Bruce W. Remington  
(Signature) 503.229.5616

503.861.3280

**DO NOT REMOVE THIS NOTICE FROM SITE**

Post-it Fax No. \_\_\_\_\_  
 To: DEQ  
 Company \_\_\_\_\_  
 Location \_\_\_\_\_  
 Fax # 841-3259  
 Comments \_\_\_\_\_

No. of Pages 2 Today's Date 5/29/97 Time 8:00  
 From Gordon Smith  
 Company \_\_\_\_\_  
 Location \_\_\_\_\_  
 Fax # \_\_\_\_\_  
 Original Disposition  Destroy  Return  Call for pickup  
 Telephone # 1-800-877-1270

DEPT. OF ENVIRONMENTAL QUALITY RECEIVED

MAY 29 1997

NORTH COAST BRANCH OFFICE (Date Received) WARRENTON

**FINAL INSPECTION REQUEST AND NOTICE**

Pursuant to the requirements within ORS 434.665, OAR 340-71-170 and OAR 340-71-175, 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 (except for the backfilling or covering of the installation). The Department (or Agent) may choose to perform an inspection of the completed construction after the official notice date, unless the Department (or Agent) elects to waive the inspection and authorizes the system to be backfilled earlier. 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. Please complete all four sections of the form and return it to the office that issued the permit. Forms that are determined to be incomplete will be returned.

**SECTION 1: BASIC INFORMATION.**

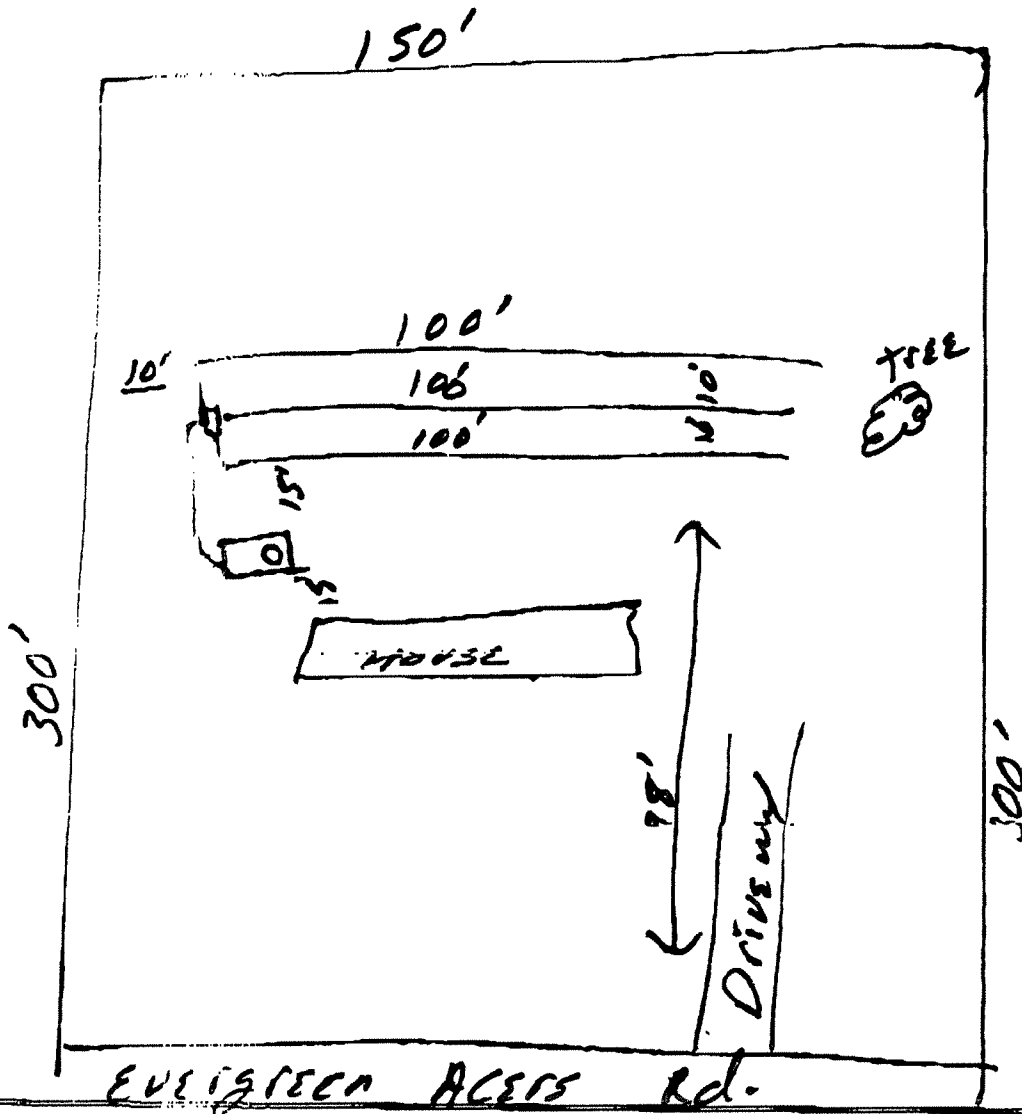
Property Owner SMITH Gordon Permit Number 97-46 County Clatsop  
 Township 5 Range 7; Section 28; Tax Lot 508; Tax Acct. # \_\_\_\_\_  
 JOB LOCATION 5150 S. OREGON AVE. S  
 Date System Construction Completed 5/28/97; Date Submitted to DEQ or Agent 5/28/97

**SECTION 2: MATERIALS LIST. Identify and list all materials used in the system's construction.**

- 1,000 gal Con Tank
- D+K CON OREGON APP.
- 300' 12" SEWER + DRAIN
- PERF 12" RISE
- 25' 4" SEWER + DRAIN
- solid
- Con DIST Box
- 2 4" elbows
- Drain Rock
- from Howard Johnsons
- Filter Fabric - Hay

Property Owner Gordon Smith Permit Number 97-46 County CLATSOP

**SECTION 3: AS-BUILT PLAN OF THE CONSTRUCTED SYSTEM.** Indicate the direction of NORTH and show the locations of all wells within 200 feet of the system.



**SECTION 4: CONSTRUCTION WAS PERFORMED BY:**

Property Owner (Committee)

Sewage Disposal Service Business: Gordon Smith Const.  
(Print Full Business Name) (License Number)

I certify the information provided in this notice is correct, and that the construction of this system was in accordance with the permit and the rules regulating the construction of on-site sewage disposal systems (OAR Chapter 340, Division 71 and 73).

Mark Smith  
(System Designer Signature)

\_\_\_\_\_  
(Title)

5/28/97  
(Date)



# CLATSOP COUNTY

"Striving To Be First In Quality Service"

DEPARTMENT OF PLANNING AND DEVELOPMENT  
800 EXCHANGE, SUITE 100 • ASTORIA, OREGON 97103 • (503) 325-8611 • FAX 325-8601

## AGENCY REVIEW & APPROVAL FORM (STRUCTURE AND MOBILE HOME PLACEMENT)

### JOB SITE INFORMATION:

Job Site Address: \_\_\_\_\_ City: \_\_\_\_\_

Owner: Gordon Smith Phone: 755-2433

Owners Address: HCR 100, Box 200, Seaside OR 97138

Proposed Development/Construction: single family res.

### STATE DEQ (DEPARTMENT OF ENVIRONMENTAL QUALITY)

Legal Description: T 5N R 7W SEC. 28 Tax Lot 508

Permit Needed - Yes (  ) No (  ) Site Approved - Yes (  ) No (  )

Signature: David Johns Date: 5-22-97

Remarks: PERMIT # 97-46

DEQ North Coast Branch Office, 19 North Highway 101, Warrenton, Oregon 97146

Phone: (503) 861-3280

### CLATSOP COUNTY PLANNING DEPARTMENT

Legal Description: T R SEC. Tax Lot

Zone: \_\_\_\_\_ Overlay District: \_\_\_\_\_

Development Permit - Yes (  ) No (  ) # \_\_\_\_\_

Flood Plain - Yes (  ) No (  ) Elevation Requirements: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_



TN RWG SEC  
S 7 28

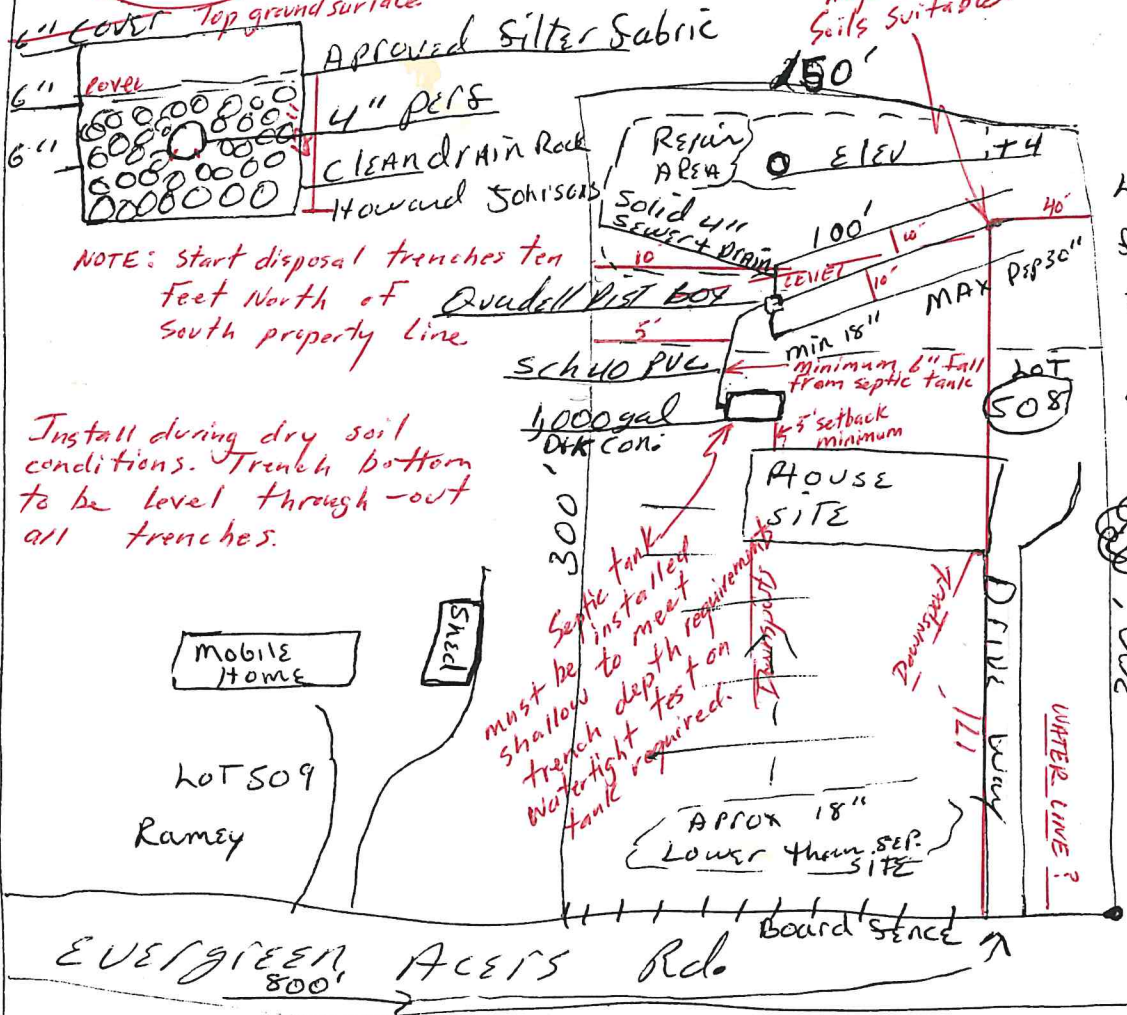
Gordon Smith  
LOT 508  
1.03 AC.

Do not exceed 30"

min 18" Ditch  
max 30" Pitch  
Try + keep trenches 18" to 24"  
if possible. Cap trenches if less  
than 18" deep.

Auger hole 4-3-97  
Soils suitable.

TEWELL HWY TO TEWELL



AREA in back  
LOT IS HIGHER T  
FRONT

Approved

Dewey Darold, R.S.  
4-11-97

DEPT. OF ENVIRONMENTAL QUALITY  
RECEIVED

MAR 17 1997

NORTH COAST BRANCH OFFICE  
WARRENTON

DL

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

DEPARTMENT OF  
ENVIRONMENTAL  
QUALITY

March 24, 1997

GORDON SMITH  
HCR 60, BOX 200  
SEASIDE, OR 97103

RE: OSS: Clatsop County,  
T5N, R7W, S28, TL 508,  
1.03 acres

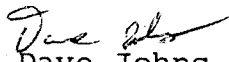
Dear Gordon:

Your recent permit to construct application is being returned because the following items are absent or incomplete. Until such time that the required items listed are submitted to our office your application is considered incomplete.

/	/	Site development plan
/	/	Land Use Compatibility Statement
/	/	Septic Tank Pumping Receipt
/	<b>XX</b>	Plot plan and specifications (Need revised plan)
/	/	Existing Sewage Disposal System Description Form

Please return the items that are checked above to:  
DEQ - North Coast Branch  
19 N. Highway 101  
Warrenton, OR 97146

If you have any questions, please call the North Coast Branch Office at 861-3280. Thank you.

  
Dave Johns  
DEQ, North Coast Branch  
Office Coordinator

cc: Elaine Sweeney



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



FOR APPLICANT'S USE - (PLEASE PRINT)

1.03 acres

Lot Size (Acreage or Dimensions)

Gordon Smith

(Property Owner's Name)

Elaine Sweeney

(Applicant's Name if Different from Owner)

Legal Description  
of Property

5 7

(Township) (Range)

28

(Section)

508

(Tax Lot/Acct. No.)

Clatsop

(County)

For Parcels in Platted  
Subdivisions, Indicate

(Subdivision Name)

(Lot Number)

(Block Number)

Proposed Facility

Water Supply

- Single Family Residence 3  
(Number of Bedrooms)
- Other \_\_\_\_\_  
(Specify)

- Public (Community System)
- Private well public  
(Indicate: Well, Spring, Etc.)

Existing Facility

- Single Family Residence 3  
(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.

Elaine Sweeney  
(Signature)

3-17-97  
(Date)

Authorized Representative  
 Licensed Installer  
License No. \_\_\_\_\_

Owner's Mailing Address

Applicant's Mailing Address (if different)

Gordon Smith  
HCR 60, Box 200  
Seaside, OR

Elaine Sweeney  
HCR 60 Box 195  
Seaside OR 97138

Phone 755-2433

Phone 755-2381

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



TN RING SEC  
SN 7W 28

Gordon Smith  
TAX LOT 508  
1.03 AC.

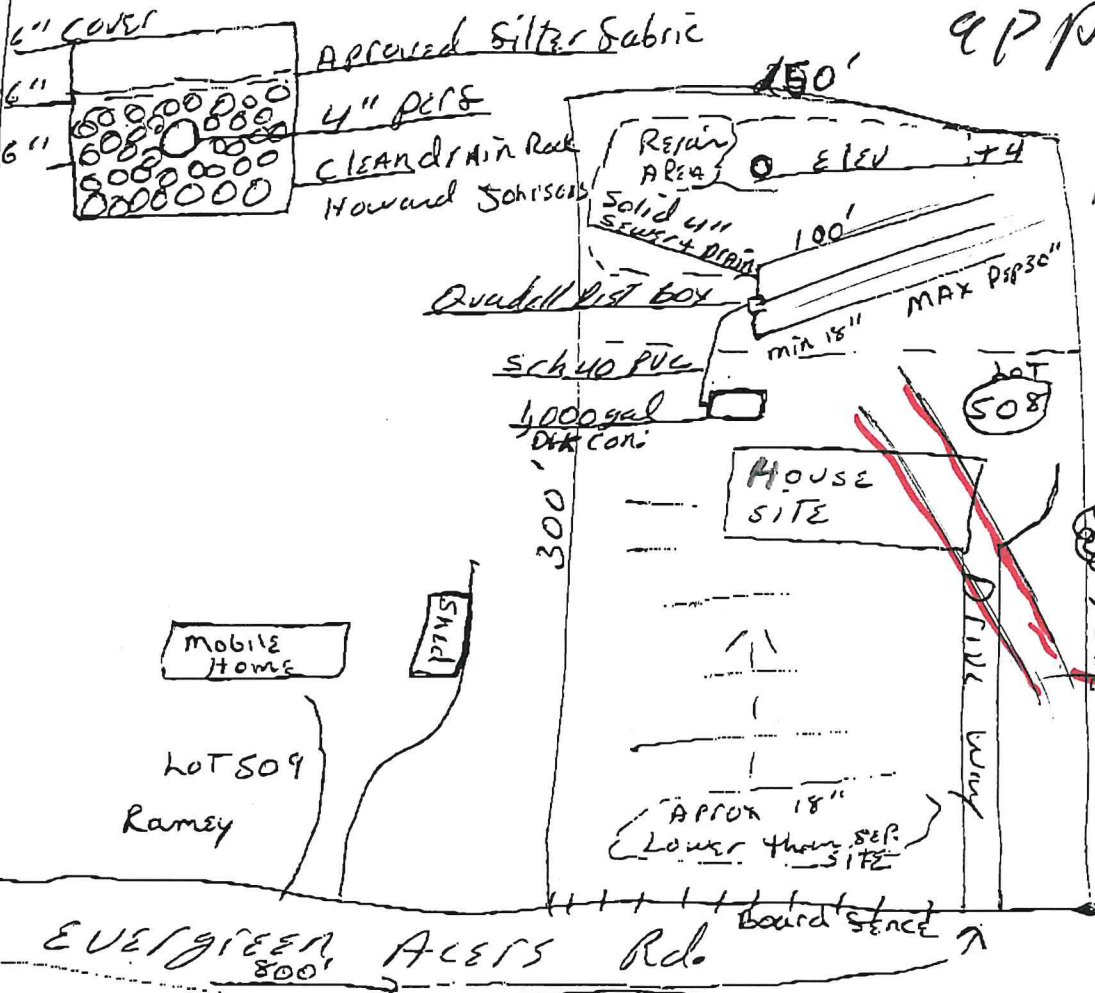
Does Not appear  
to be in  
approved area

AREA in back of  
LOT IS HIGHER THAN  
FRONT

Approved  
Area??

min 18" Ditch  
Max 30" Ditch

JEWELL  
MIST  
HWY  
TO  
JEWELL



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MAR 17 1997

NORTH COAST BRANCH OFFICE  
WARRENTON

*[Handwritten signature]*

FAX 861-3259

**LAND USE COMPATIBILITY STATEMENT  
FOR ON-SITE SEWAGE DISPOSAL SYSTEMS**

<b>APPLICANT'S NAME</b> Elaine Sweeney		<b>MAILING ADDRESS</b> HCR 160, Box 195 Seaside OR 97138 <hr/> CITY STATE ZIP		<b>PHONE</b> 755-2381 755-1818
---	--	--	--	--------------------------------------

P L O C A T I O N 	<b>TOWNSHIP</b> 5	<b>RANGE</b> 7	<b>SECTION</b> 28	<b>TAX LOT OR ACCT NO</b> 508
	<b>SUBDIVISION/PROJECT</b>	<b>LOT</b>	<b>BLOCK</b>	<b>COUNTY</b> Clatsop
	<input type="checkbox"/> PROPERTY IS A LOT OF RECORD CREATED BEFORE AUGUST 1, 1981.			

**PROPOSED LAND USE**

single family residence

**STATEMENT OF COMPATIBILITY FROM APPROPRIATE LAND USE AUTHORITY**  
(An equivalent statement may be provided in lieu of this form)

**PROPERTY'S ZONING DESIGNATION**

RA-1

**THE ABOVE PROPOSAL HAS BEEN REVIEWED AND FOUND TO BE:**

- COMPATIBLE WITH THE LCDC ACKNOWLEDGED COMPREHENSIVE PLAN
- NOT COMPATIBLE WITH THE LCDC ACKNOWLEDGED COMPREHENSIVE PLAN

OR

- CONSISTENT WITH THE STATEWIDE PLANNING GOALS
- NOT CONSISTENT WITH THE STATEWIDE PLANNING GOALS

**REASON FOR FINDING OF COMPATIBILITY / INCOMPATIBILITY**

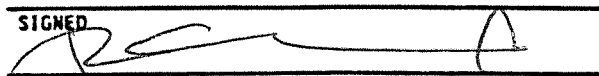
ALLOWED USE IN ZONE

**PROPERTY IS LOCATED: (check one)**

- INSIDE CITY
- INSIDE URBAN GROWTH BOUNDARY OUTSIDE CITY LIMITS
- OUTSIDE URBAN GROWTH BOUNDARY

**LAND USE AUTHORITY**

CLATSOP COUNTY

<b>SIGNED</b> 	<b>TITLE</b> PLANNER	<b>DATE</b> 3/17-97
---	-------------------------	------------------------

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- CITY/COUNTY CONCURRENCE IF INSIDE URBAN GROWTH BOUNDARY

<b>SIGNED</b>	<b>TITLE</b> MAR 17 1997	<b>DATE</b>
---------------	-----------------------------	-------------

NORTH COAST BRANCH OFFICE  
WARRENTON

JUN 14 1995

NORTH COAST BRANCH OFFICE  
WARRENTON

← ASTORIA 202 HIGHWAY

COW CREEK ROAD

VINE MAPLE CHOICE  
X

COW CREEK

EVERGREEN  
ACRES

151  
SITE

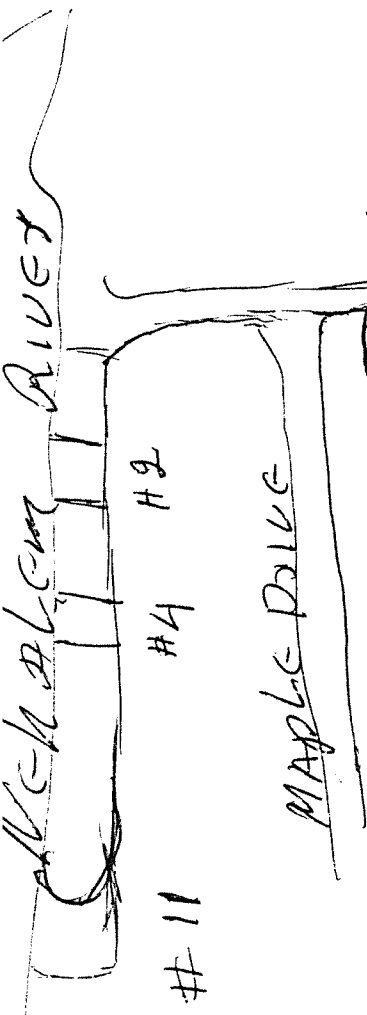
508

BAY ROAD

FISHAW HICK  
203

3 miles

THREE MILES OFF  
SUNSET HIGH TOWARDS  
JEWELL TURN TO LEFT  
BEFORE YOU CROSS COW  
CREEK. FLAGGED STAKE  
ALONG ROAD MARKING  
LOTS TO BE CHECKED.



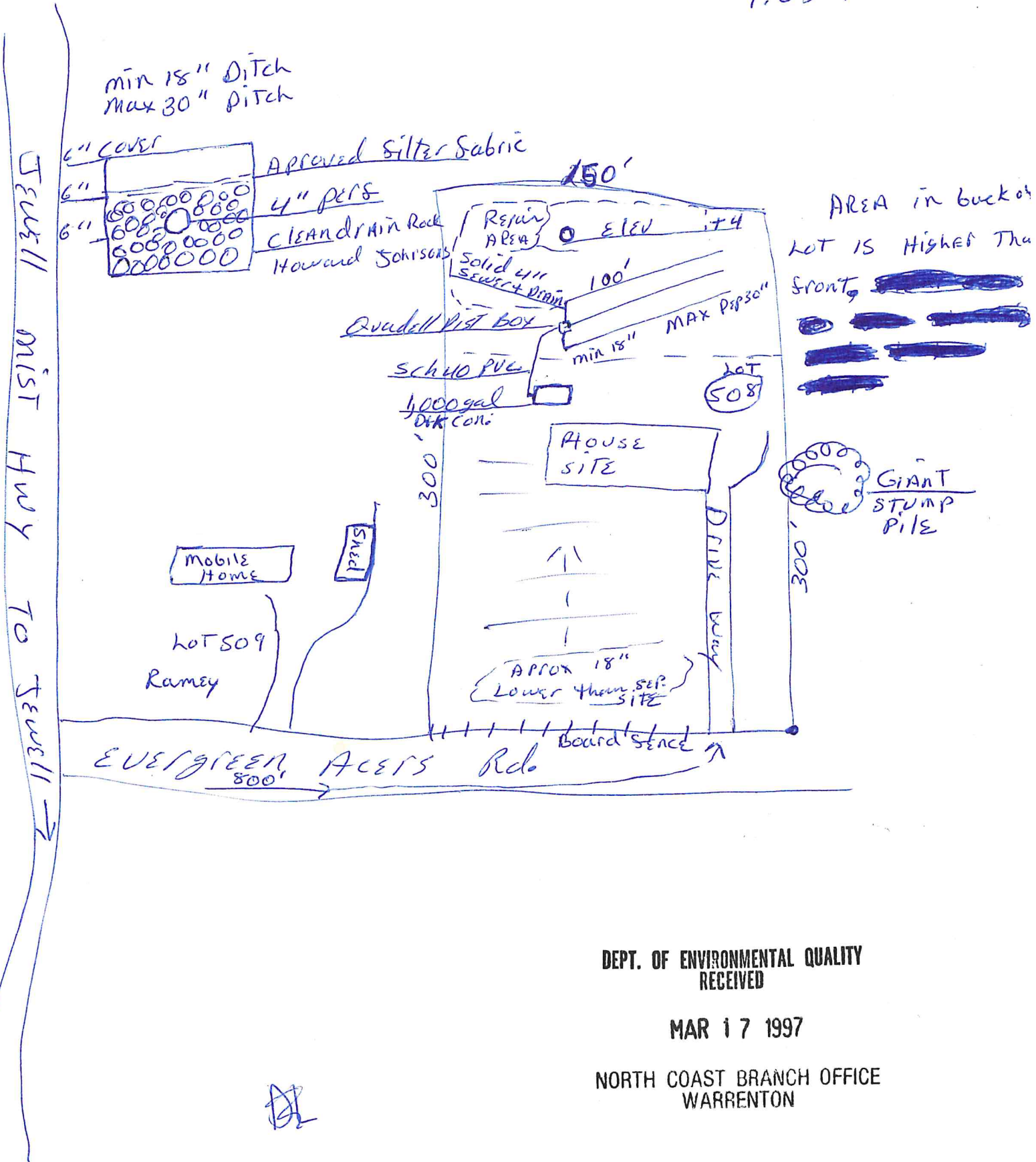
HIGHWAY 26

JEWELL MIST TURN OFF

Portland

TN RWG SEC  
5 7 28

Gordon Smith  
LOT 508  
1.03 AC.



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MAR 17 1997

NORTH COAST BRANCH OFFICE  
WARRENTON

*DL*



PRIOR APPROVAL

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 6-14-98  
Date Completed \_\_\_\_\_  
Required Fee 240.00  
Receipt No. \_\_\_\_\_  
Control No. \_\_\_\_\_

4

FOR APPLICANT'S USE - (PLEASE PRINT)

1.03 AC \*ASSESSORS 6-15-98

Gordon L. Smith  
(Property Owner's Name)

Jeffrey N. Crites 150' X 300'  
(Applicant's Name if Different from Owner)

Legal Description of Property T 5N R 7W 28 508 Clatsop  
(Township) (Range) (Section) (Tax Lot/Acct. No.) (County)

For Parcels in Platted Subdivisions, Indicate EVERGREEN ACRES 508 508  
(Subdivision Name) (Lot Number) (Block Number)

3 Bedroom Residence Proposed Facility Community Water Supply

Single Family Residence 3  
(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 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.

Gordon L. Smith  
(Signature)

6-14-98  
(Date)

Authorized Representative  
 Licensed Installer  
License No. \_\_\_\_\_

Owner's Mailing Address  
HCR 60 Box 200  
SEASIDE OREGON  
97138

Applicant's Mailing Address (if different)  
Jeffrey N. Crites  
51st RT Box 950  
SEASIDE OR 97138

Phone 755-2433

Phone 755-2367

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



State of Oregon  
DEPARTMENT OF ENVIRONMENTAL QUALITY

CERTIFICATE  
OF FAVORABLE SITE EVALUATION FOR  
INDIVIDUAL SUBSURFACE SEWAGE DISPOSAL SYSTEM  
(Not a permit for construction)

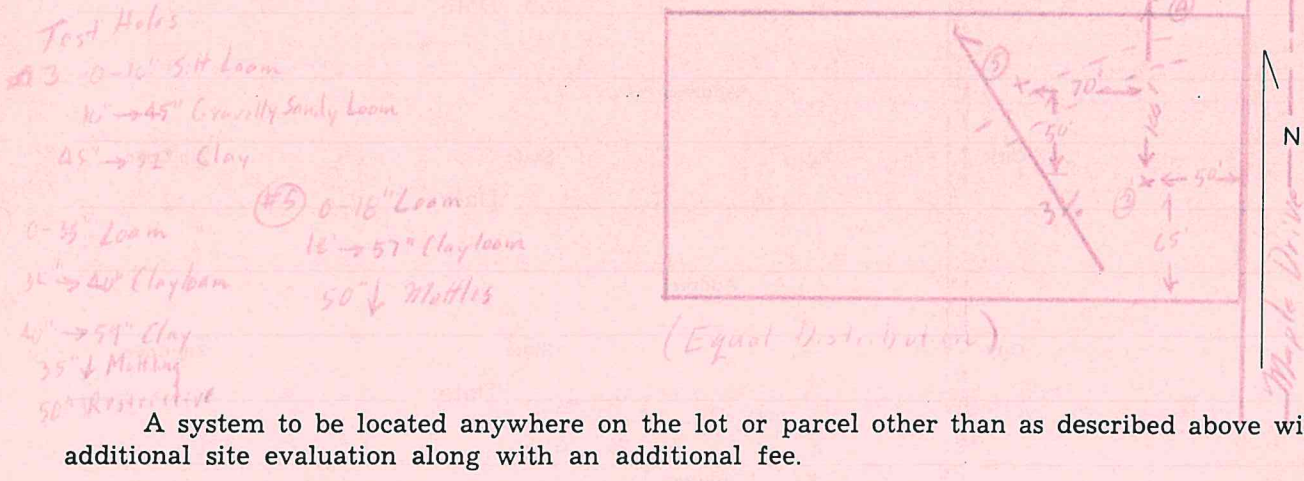
This is to certify that the following described property

507-28-503 - Parcel 2  
Clatsop County

has been evaluated on August 4, 1981 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 Department of Environmental Quality 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: August 5, 1981  
Date

To: Gordon L. Smith  
Landowner

Elsie Rt., Box 715  
Address

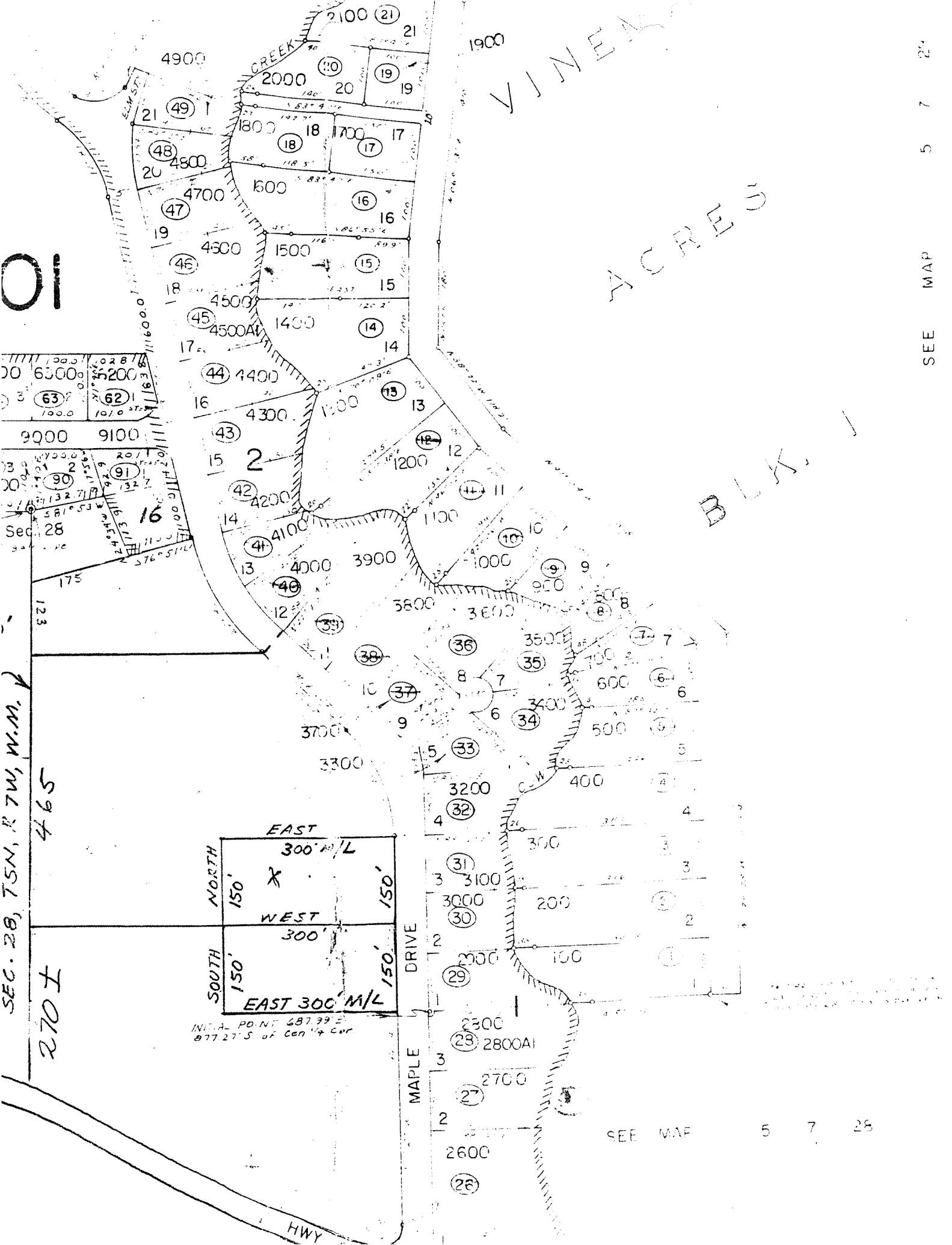
Seaside Oregon 97138  
City State Zip

By Donald R. Campbell  
DEQ or Contract Agent



01

SEC. 28, T5N, R7W, W.M. ↓  
465  
R70 I



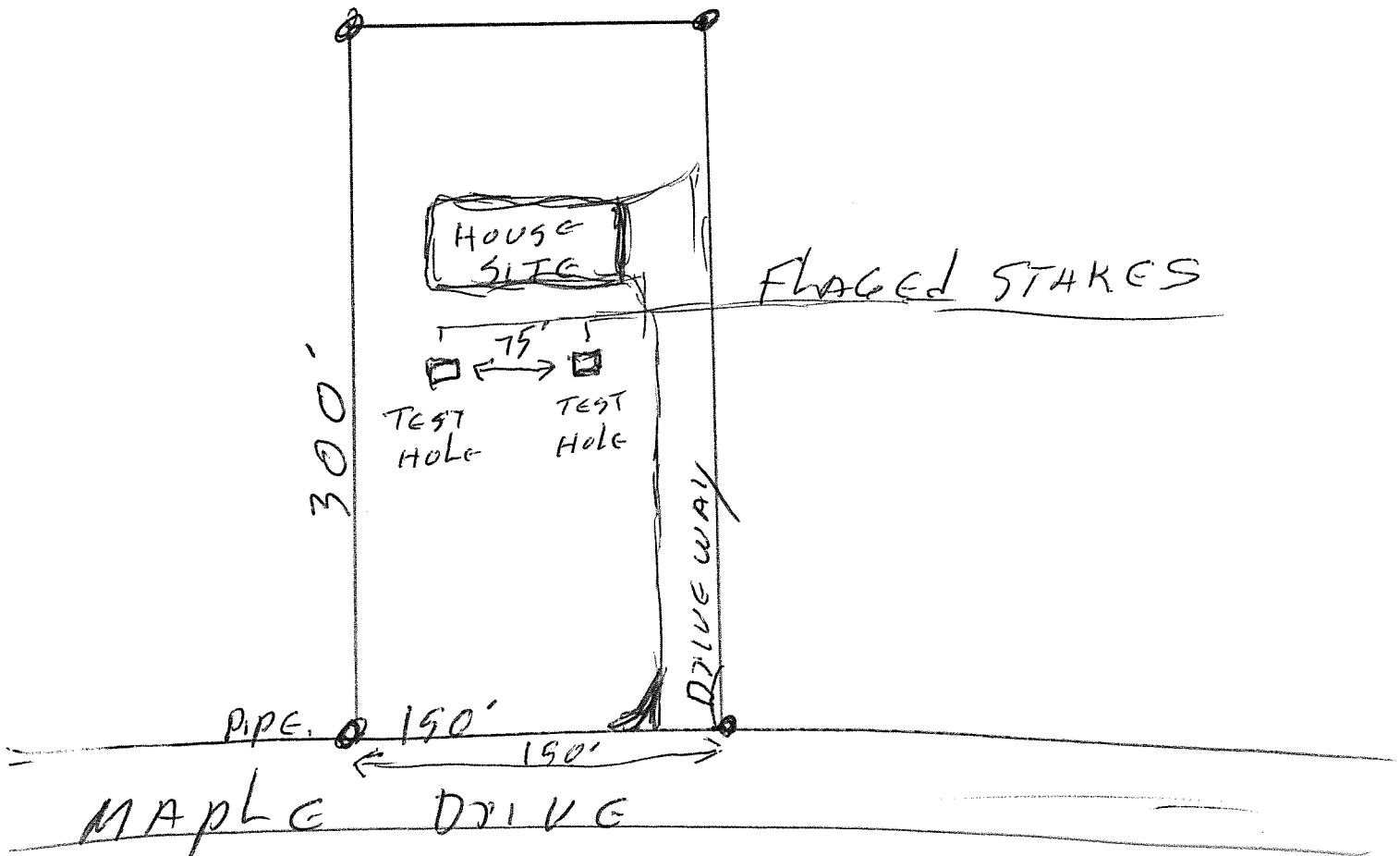
SEE MAP 5 7 28

SEE MAP 5 7 28

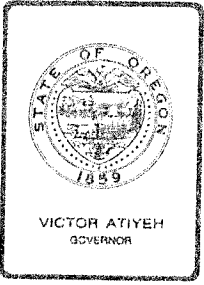
DEPT. OF ENVIRONMENTAL QUALITY  
RECEIVED

JUN 14 1995

NORTH COAST BRANCH OFFICE  
WARRENTON



507-28-503 508  
Parcel 2



## Department of Environmental Quality

522 S.W. 5th AVENUE, P.O. BOX 1760, PORTLAND, OREGON 97207 PHONE (503) 229-  
Astoria Branch - 857 Commercial, Astoria, Oregon (503) 325-8660

August 5, 1981

Gordon L. Smith  
Elsie Rt, Box 715  
Seaside, Oregon 97138

Re: 507-28-503 - Parcel 2  
Clatsop County

Dear Mr. Smith,

On August 4, 1981, I performed an on site evaluation of the property referenced above to determine whether a subsurface disposal permit could be issued.

As a result of this evaluation, I 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 non-water-carried waste disposal. An approved evaluation report shall remain in effect until issuance of a permit to construct, unless in the meantime conditions on subject or adjacent properties have been altered in any manner which would prohibit issuance of a permit in which case the evaluation report shall be considered null and void. A permit will be granted when the required plot plan and fee are received by the Department. Please note RESTRICTIONS LISTED BELOW:

Sincerely,

Gerald R. Campbell  
Waste Management Specialist

RESTRICTIONS:

1. Provide an absorption area of 600 square feet with a minimum septic tank capacity of 1000 gallons for the proposed 1-4 bedroom house.
2. Place the drainfield in the approved area.
3. Maximum trench depth is NOT to exceed 30 inches.
4. Any extreme alteration of the natural soil profile in the approved area could void this approval.
5. Submit a detailed plot plan and obtain a sewage disposal system construction permit prior to construction (application, plot plan form enclosed).
6. This approval void if in conflict with any local planning or building regulations.



Contains  
Recycled  
Materials

STATE OF OREGON  
DEPARTMENT OF ENVIRONMENTAL QUALITY

FOR DEQ USE ONLY

Date Rec'd 8-3-81 Amt. Rec'd \$ 275.00  
 Receipt No. 20590 Permit No. \_\_\_\_\_  
 Date Appl. Completed \_\_\_\_\_  
 Site Inspection Date Aug 4, 1981  
 Approved X Disapproved \_\_\_\_\_  
 Pre-Cover Inspection Date \_\_\_\_\_

APPLICATION FOR SUBSURFACE SEWAGE DISPOSAL SYSTEM

(NON-REFUNDABLE FEES MUST ACCOMPANY THIS APPLICATION)

1.  Site Evaluation Report for New System (~~\$75.00~~) \$150.00
2.  Permit to Construct New System (~~\$25.00~~) (Site Evaluation (No. 1) Required)
3.  Permit to Repair Malfunctioning System (\$25.00)
4.  Permit to Connect New or Altered Structure to Existing System (~~\$25.00~~)
5.  Permit to Connect Mobile/Modular Home to Existing System (~~\$25.00~~)
6.  Permit Renewal (~~\$25.00~~) \$50.00
7.  Existing System Evaluation \$50.00
8.  Other (Specify) \_\_\_\_\_

REFERENCE INFORMATION (Please Print)

NAME OF APPLICANT	<u>Gordon L Smith</u>
NAME OF PROPERTY OWNER	<u>Elsie Kt Box 715</u>
ADDRESS	<u>Seaside, Ore 97138</u>
CITY	<u>Seaside, Ore</u>
ZIP CODE	<u>97138</u>
PHONE	<u>755-2433</u>

PROPERTY DESCRIPTION

<u>5</u>	<u>7</u>	<u>28</u>	<u>Part of 503</u>	<u>Clatsop</u>
Township	Range	Section	Tax Lot/Account Number	County
Subdivision/Area	Tract	Block	Lot	Lot Size

→ PARCEL 2

PROPOSAL DESCRIPTION

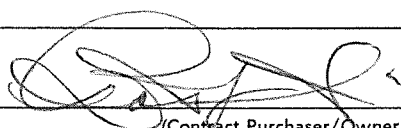
PLANNED USE: House \_\_\_\_\_ Mobile/Modular Home \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial \_\_\_\_\_ Other \_\_\_\_\_  
 No. of Bedrooms \_\_\_\_\_ Water Supply \_\_\_\_\_ (Describe)

APPLICANT MUST PROVIDE

1. Test Holes (For 1, \_\_\_\_\_). Date Ready \_\_\_\_\_
2. Zoning Approval (Except 1, 3, 6 and 7) you may attach a copy of your Zoning Permit or obtain the signature of the appropriate County, City or Indian Planning Commission.  
 Signature and Name of Zoning Agency Nicholas Chase OK. AS PER MINOR partition approval 7-20-81; Clatsop County Planning
3. Plot Plan. RA-1
4. Other \_\_\_\_\_

DIRECTIONS TO SITE: (A Map Would Help) TEST HOLES SHOULD BE FLAGGED!! (3' x 3' x 4' deep)

SIGNATURE \_\_\_\_\_



(Contract Purchaser/Owner/Installer)

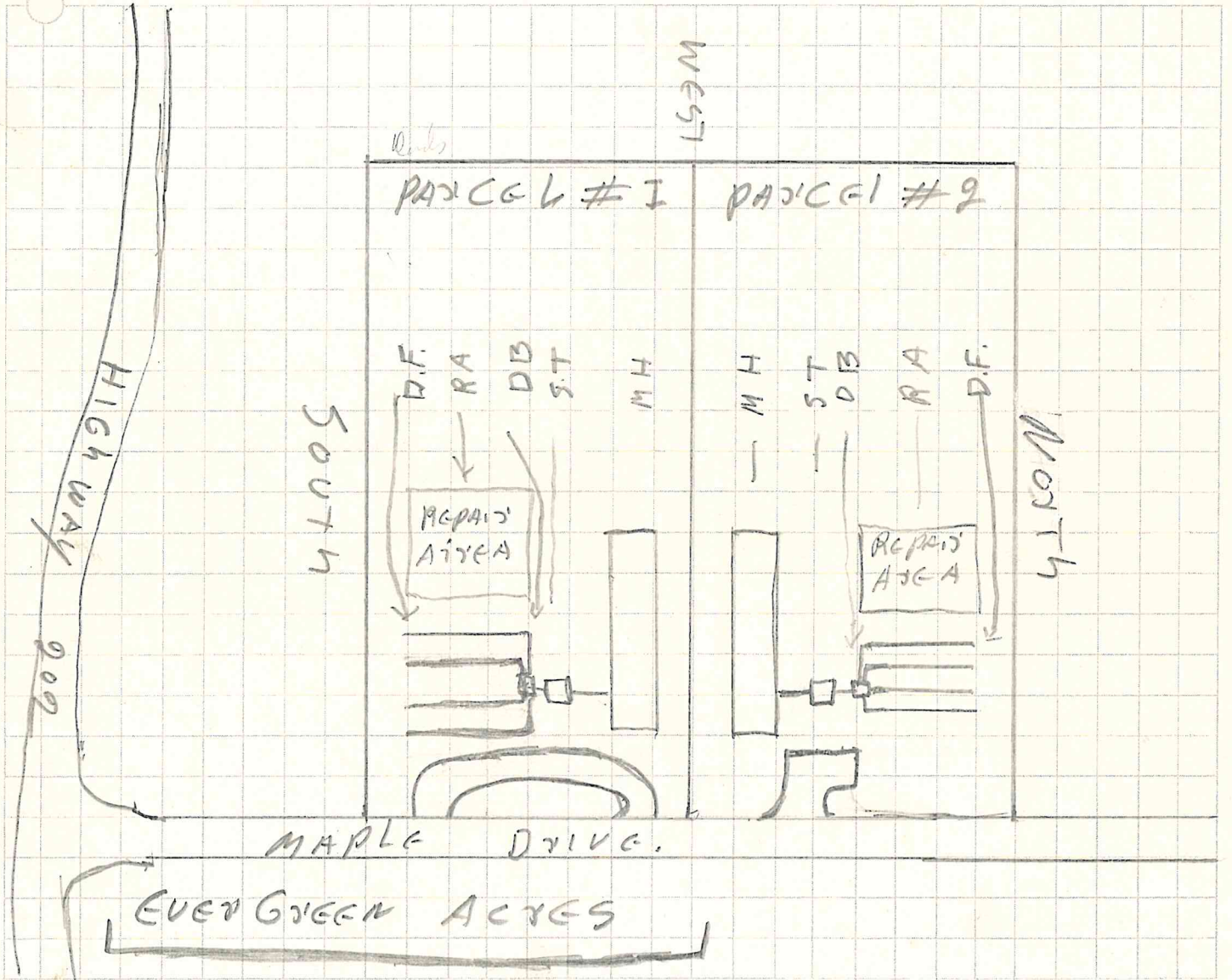
DATE \_\_\_\_\_

STATE OF OREGON  
 DEPARTMENT OF ENVIRONMENTAL QUALITY  
 PROPOSED SUBSURFACE SEWAGE DISPOSAL SYSTEM  
PLOT PLAN

Property Owner Gordon L. Smith Date \_\_\_\_\_

Location: T. \_\_\_\_\_ R. \_\_\_\_\_ Sec. \_\_\_\_\_ Tax Lot/Acct. No. \_\_\_\_\_

Indicate North in Circle



REMARKS: TWO LOTS 1 ACRE EACH.

FOR DEQ USE ONLY

Approved

Permit Number \_\_\_\_\_

Disapproved

By: \_\_\_\_\_

(SANITARIAN SIGNATURE)

(DATE)

8-01

LINE

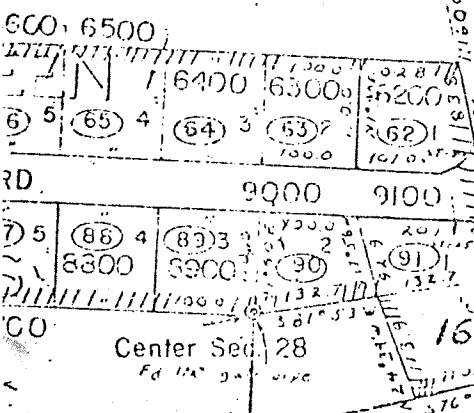
Minor Partition  
Clatsop County Department of  
Planning and Development

Approval-  
Conditions

Signed

Date

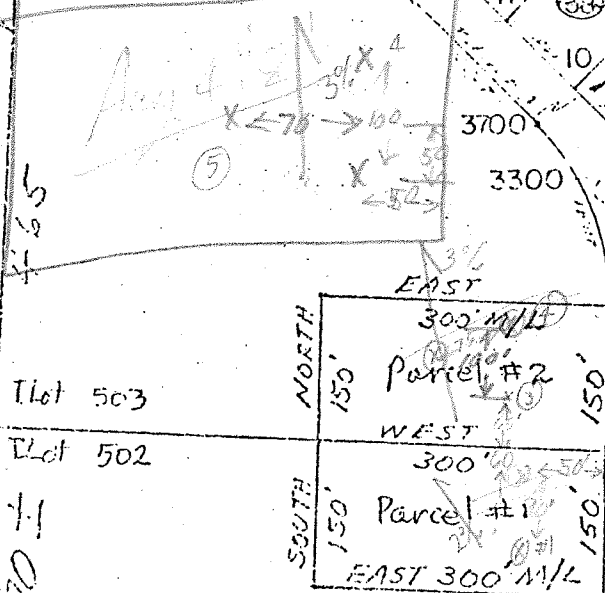
Yes  No   
*Curt Schneider*  
July 20, 1981



1"=200'

BLK.

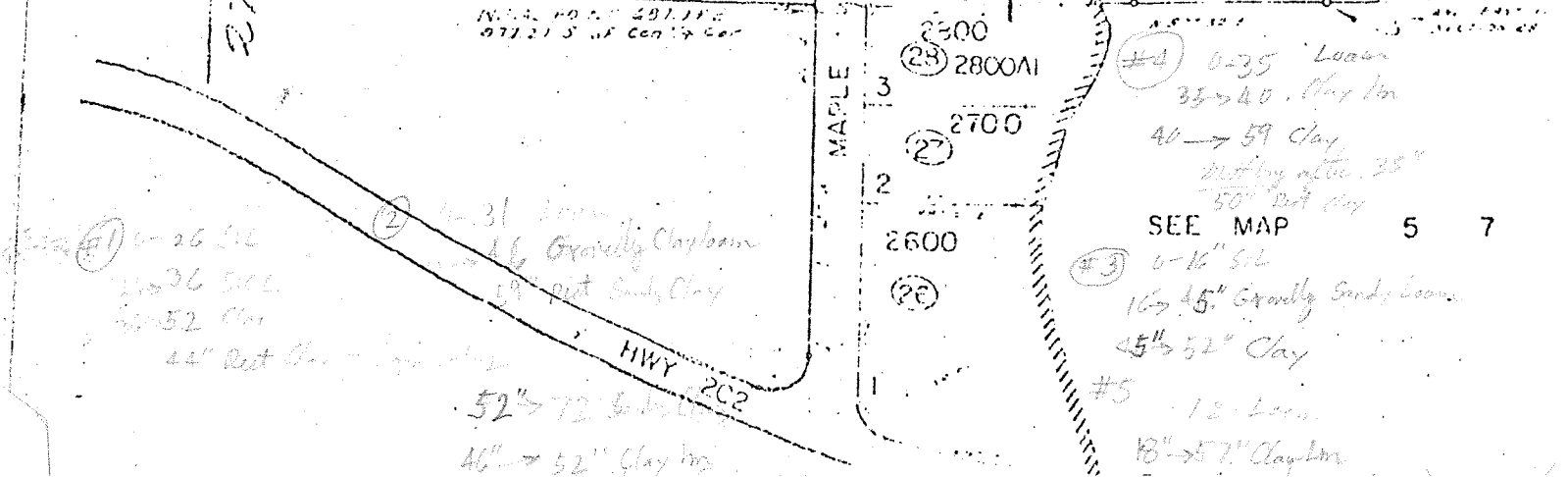
NORTH-SOUTH CENTER LINE  
SEC. 30, T5N, R 7W, W.M.



① 0-26' SIL  
2-36' SIL  
3-52' CLAY  
44" Rest Clay

② 1-31' Loam  
16 Gravelly Clay loam  
18" Rest Sandy Clay  
52" 72' SIL  
40" 52" Clay loam

③ 0-35' Loam  
35-40' Clay loam  
40-59' Clay  
21" by after 25"  
50" Rest Clay  
SEE MAP 5 7  
④ 0-16" SIL  
16-45" Gravelly Sandy Loam  
45" 52" Clay  
⑤ 12' Loam  
18" 57" Clay loam





5728

DEPT. OF ENVIRONMENTAL QUALITY  
RECEIVED

JUN 15 1995

NORTH COAST BRANCH OFFICE  
WARRENTON

