### **Property History**

### Account ID:59287

### Legal Description:

<u>Legal Type</u>	<u>Twnshp</u>	<u>Range</u>	$\underline{\operatorname{Sec}}$	$\underline{QSec}$	$\underline{QQSec}$	<u>TaxLot</u>	<u>TaxMapKey</u>
Metes and Bounds	6	10	3	В	D	03308	61003BD03308

### Additional Information:

'14 formerly part of TL 3301 mpdaf: A por of Tract B, Plat of Heritage Dunes as rec in Town Plat Book 15, Pgs 208 & 209, Inst# 200809669, CC,O, Clerk's Recs, mpdaf: Beg at the Sw cor of Tract B, Plat of Heritage Dunes, according to the plat therof; being the SW cor of the par herein desc; thence along the W li of sd Tract B N 01° 37' 53" E, a dist of 63.00' to a 5/8" rebar & plastic cap marked, "OTAK INC" being the NW cor of the par herein desc; thence S 88° 22' 30" E, a dist of 165.00'; to a 5/8" rebar & plastic cap marked, "OTAK INC" being the NE cor of the par herein desc; thence S 01° 375' 53" W a dist of 63.00' to a 5/8" rebar & plastic cap marked, "OTAK INC" on the S li of sd Tract B being the SE cor of the par herein desc; thence along the S li of sd Tract B, N 88° 22' 30" W, a dist of 165.00' to the POB (WFTLPO)

### Account History:

From Account Id	From TaxMapKey	To Account Id	To TaxMapKey	Year of Change
8083	61003BD05000	8055	61003BD03300	2009
8055	61003BD03300	57561	61003BD03301	2009
57561	61003BD03301	8055	61003BD03300	2014
8055	61003BD03300	57561	61003BD03301	2009
57561	61003BD03301	59287	61003BD03308	2014

### Owner(s):

Current Ownership:	Owner Name	Ownrshp %	<u>Type</u>
	Schulte Joseph		Owner
	Schulte Stephanie		Owner

### Ownership History:

User Id: JHARTILL

<u>Create Dte</u>	Effctive Dte	<u>Instrmnt ID</u>		
12/19/2013	10/08/2013	201308545	Schulte Stephanie	Owner
12/19/2013	10/08/2013		Schulte Stephanie	Owner
12/19/2013	10/08/2013		Schulte Joseph	Owner

### Voucher History:

Voucher 1 Source: Clerk	Effective Date: 10/02/2014	Map Key:
Document Type Code: Road Maint.	Agı Date Created: 12/02/2014	Instrument Id: 201406293
Operation: Posting Only	y Completed Date: 12/02/2014	Book:
Operation Type: Information	Voucher Type: Assessment	Page:
Completeness Status: Completed	Consideration:	Status: Active
Partition Flag: No	Remarks: Private Rd Ma	int. Agreement. Includes TL's

3300, 3302, 3303,3304,3305,3306,3307 & 3308.

12/19/2019 10:28:26 Page 1 of 2

State of Oregon

Department of Environmental Quality

Onsite Permit ID: OS412384

### Certificate of Satisfactory Completion

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 OS412384 as follows:

PROPERTY INFORMATION

Property Owner: Romine Construction LLC; Ray

Township 06N, Range 10W, Section 03 BD

Romine

Property Location: Dune Lane, Gearhart

Tax Lot 3301

(LotA)

Facility Type:

Single Family Dwelling

Clatsop County

3 Bedrooms

SPECIFICATIONS AND REQUIREMENTS

System type: Sand Filter: Bottomless - Residential

Design Flow:

450 gals/day

Minimum Septic Tank Size: 1000 gals

Minimum Dosing Tank Size: 500 gals

DistributionType:

Pressurized

Sand Filter:

360 SqFt

Maximum Trench Depth:

36 inches

Minimum Trench Depth:

6 inches

### ADDITIONAL CONDITIONS

- 1 Owner is responsible for the operation and maintenance of the Sand Filter system.
- 2 72 inch squirt
- 3 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.
- 4 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.
- 5 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.
- 6 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.

- 7 This system must operate in compliance with OAR Chapter 340, Division 071 and must not create a public health hazard or pollute public waters.
- 8 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.

### SYSTEM INSPECTIONS AND COMPLETION DATES

Pre-Cover - Correction Notice Issued by Bernie Duffy on 9/13/2013 Pre-Cover Inspection by Bernie Duffy on 9/24/2013

Installer Name: Hartman Construction Co.

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

Bernie Onsite Wastewater Specialist

Authorized Agent!

Title

Onsite Wastewater Specialist

Date CSC Issued

Bernie Duffy

Department of Environmental Quality Northwest Region - Warrenton Office

65 N Highway 101, Suite G

Warrenton, OR 97146 Phone: (503) 861-3280 Fax: (503) 861-3259



### Onsite Sewage System Installation Notice of Inspection

Department of Environmental Quality 700 SE Emigrant, Suite 330 Pendleton, OR 97801 14' x 26'= 364'59 -OK

Phone/TTY: (541) 276-4063 Fax: (541) 278-0168

An inspection of this onsite sewage disposal system has identified the following: 14 x 26 ft = 36 4 Sq. Ft. OK 10' Setback to garage - ok. 12 Orifices & 6 laterals = 72 orifices - OK Sand Filter - be sure there is 3" of rock below all laterals. Add rock to cover orifice shields install fabric, and 6 to 12 inches of sand Purp and abarm oK - 72" Squit. Submit new Final Insp. Request. \* Submit revised by drawlic calculations and manifold/lateral design with Orisice sporing (Reid 9/25/13) Property owner's name: Kay Romine Permit number: 05 412 384 Township: 6N Range: 10W Section: 3BO Tax lot: 330 Inspection date: 9/24/13 Inspection time:  $1:00P_3$ Inspector's signature: Bernie Laffy

	1
For Official Use Only/Date Received:	1
Tot Official Osc Only/Date Accessed.	1
The same of the sa	

Township 06N, Range 10W, Section 03 BD Clatera County Toyl att Toy Lat 2201

### Final Inspection Request and Notice - Onsite ID: 412384

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: Romine C	onstruction LLC;	Ray Rolline	Ciatso	p Count	ly TaxLUIH, Tax	LUL SSU	/ 1
Property Dune Lan Address:	ie, Gearhart				~~ 4	,	
Address:					72 "5	quet	
OF OFFICE AND ADDRESS OF THE PARTY OF THE PA							
SECTION 2: System							Water tight
A. Tanks/Pumps	Sys	tem Type: Sand	l Filter: Botton	niess -	Residential		verification*
Tanks(1) Volume:	1500 901 Com	npartments: Q	Manufacturer:	A-1 R	Ready Mi	X	Date: 8-13-13
Tanks(2) Volume:		npartments:	Manufacturer:				Date:
Pump(s) HP: 1/3	Nodel/Manuf. Fran	Klin 30 gp	Float(s)Type(1)			renco	
		3	Float(s)Type(2)	: 1	Model/Manuf.		
B. Piping							
Effluent Sewer (	tank to drainfield)	res No Dia	meter:	ASTM#/			Length:
Pressu	re Transport Pipe	Yes No Dia	meter:   1/4"	ASTM#/	Olher: Sch	10	Length: 교명'
C. Secondary Treatment	Unit:						
Sand Filter**	Yes No	Type: Botton	less		Container D	imensions:	14x26
Underdrain pipe	Diameter:	ASTM#/Other:					Length:
Manifold piping	Diameter: 3/4"	ASTM#/Other:	sch 40				Length:: 깇싞՝
Internal Pump	HP:	Model/Manufacture	Γ				
Floats(1)	Туре:	Model/Manufacture	r 				
Floats(2)	Type:	Model/Manufacture	r				
TTA	Yes No I	Model:					
Certified Maint.	Provider Name:						
Operation and Maint.	Contract Received?	Yes No	7				
D. Drainfield Media	(Gravel, Pipe or alter	malive?) () E A	5 - 5 \ 14	2" Dc	air Cald	DAG - A	FAULT
Type	Yes No	0.6.0	1. 2000 1.	of Di	ain tock,	Dee o	1 (((()))
Distribution Box	Vos. No.						
Drop Box Distribution Pipe		Diameter:	ASTM#/Other:		DEP	T. OF EILE	ength: Parat ALQUA
-					12/1=1	11 45 1	RECEIVED
Comment						^	D 0 1 0010
*All Tanks(s) were tested	t forwater liableses s	offer installation and	nassed in accordar	nce with C	DAR 340-073-0025		P 2 4 2013

Page 1 of 2 DEQ Rev: 4/8/2008

\*\*Attach sieve analysis for Underdrain Media and Filter Sand

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 selback distances from property lines, structures, wells, streams, etc.

	Scale: 1"=20'
Garage  Septiment 10  Colyx 86  Coly	The Committee of the Co
Reconstruction of Sand Filt	2~
DECTION 4 - Construction was performed by (Signature Required)  Revised Leaver	cation
regreed Installer Wice and New Wilson Williams Print Name: Dean Hart Man	
rensed Installer: Yes No License#: 38331 Certification#: R   32)	
tailer: Dentartman Date: 9-24-13 Phone#: 503 4:	10 209a
CTION 5 - Office Use Only:	
IV III	9/24/13
No, Reason for Non	HUNMENIAL QUAL
	- would talk
Comment: Squirt test oK - 9/24/13 - 18 JOHN NORTH COAS	2 4 2013
72 " +/- NORTH COAS	TEDANOLOFFIC

### Pump Selection for a Pressurized System - Single Family Residence Project

Dean Hartman / Gearhart Sept 2013

Parameters		
Discharge Assembly Size	1.25	inches
Transport Length	25	feet
Transport Pipe Class	40	
Transport Line Size	1.25	inches
Distributing Valve Model	None	
Max Elevation Lift	5	feet
Manifold Length	12.5	feet
Manifold Pipe Class	40	
Manifold Pipe Size	1.25	inches
Number of Laterals per Cell	6	
Lateral Length	24	feet
Lateral Pipe Class	40	
Lateral Pipe Size	0.75	inches
Orifice Size	1/8	inches
Orifice Spacing	2	feet
Residual Head	5	feet
Flow Meter	None	inches
'Add-on' Friction Lasses	0	feet
Calculations		
Minimum Flow Rate per Orifice	0.43	gpm
Number of Orifices per Zone	78	
Total Flow Rate per Zone	34.2	gpm
Number of Laterals per Zone	6	

Minimum Flow Rate per Orifice	0.43	gpm
Number of Orifices per Zone	78	
Total Flow Rate per Zone	34.2	gpm
Number of Laterals per Zone	6	
% Flow Differential 1st/Last Orifice	4.9	96
Transport Velocity	7.4	tps

### Frictional Head Losses

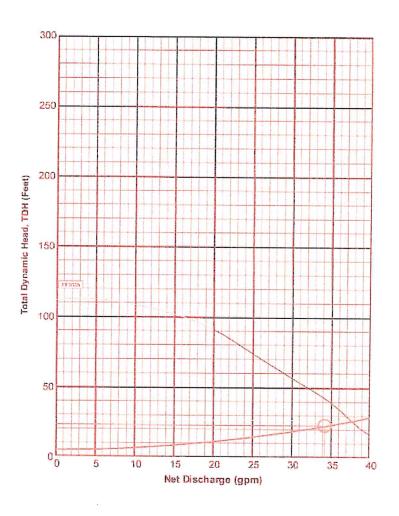
Loss through Discharge	8.2	feet
Loss in Transport	3.5	feet
Loss through Valve	0.0	feet
Loss in Manifold	0.5	feet
Loss in Laterals	0.6	feet
Lass through Flowmeter	0.0	feet
'Add-on' Friction Losses	0.0	feet

### Pipe Volumes

Vol of Transport Line	1.9	gals
Vol of Manifold	0.9	gals
Vol of Laterals per Zone	3,9	gals
Total Volume	6.9	gals

### Minimum Pump Requirements

Design Flow Rate	34.2	gom	
Total Dynamic Head	22.9	feet	

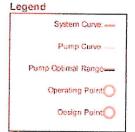


### PumpData

PF3005 High Head Effluent Pump 30 GPM, 1/2HP 11 5/230 V 10/ 60Hz, 20DV 30/6 DHz

05412384 Revised Plas

**APPROVED** 9/25/17



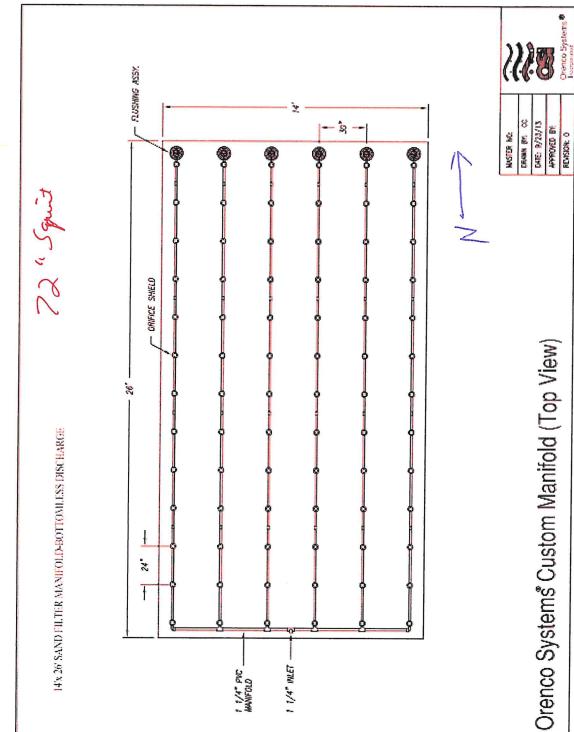


SEP 2 4 2013





054/238 OK-1830M



BECENSD DEbt of Environmental ourthy

SEP 2 € 2013

NORTH COAST BRANCH OFFICE MOTHERFROM

### State of Oregon

Department of Environmental Quality

Onsite ID: OS412384 Expiration Date: 1/17/2014

### Construction-Installation Permit

This Construction-Installation Permit OS412384 authorizes the property owner to construct an onsite wastewater system as follows:

### PROPERTY INFORMATION

Property Owner: Romine Construction LLC; Ray Romine Clatsop County

Property Location Dune Lane, Gearhart

Township 06N, Range 10W, Section 03 BD

Facility Type:

, Single Family Dwelling

Tax Lot 3301

3 Bedrooms

### SPECIFICATIONS AND REQUIREMENTS

System Type: Sand Filter: Bottomless - Residential

Design Flow:

450 gals/day

Minimum Septic Tank Size: 1000 gals

Minimum Dosing Tank Size: 500 gals

DistributionType:

Pressurized

Sand Filter:

360 SqFt

Maximum Trench Depth:

36 inches

Minimum Trench Depth:

6 inches

### ADDITIONAL CONDITIONS

- As Built drawing shall include location of pressure line.
- <sup>2</sup> Maintain 10 ft setback to water line from all septic components.
- <sup>3</sup> 36 inch deep installation ok per Chuck Costanzo
- <sup>4</sup> All roof drains must be directed away from the system.
- <sup>5</sup> An electrical permit and inspection from the Department of Consumer and Business Services, Building Codes Division or the municipality with jurisdiction is required for all pump wiring installation.
- <sup>6</sup> Meet all required setbacks.
- 7 The alarm and pump must be on separate circuits in the control panel.
- <sup>8</sup> Vehicular traffic and livestock must be restricted from the system area.
- <sup>9</sup> All work is to conform to Oregon Administrative Rules, Chapter 340, Divisions 071 and 073. Make no changes in system location or specifications without written approval from the permit issuing agent.

SCANNED JAN 2 2 2013

Page I of 2

### **INSPECTION REQUIREMENTS**

- <sup>1</sup> A final inspection is required after landscaping or other erosion control measures are established.
- <sup>2</sup> A final inspection request and notice form including a detailed and accurate as-built plan of the constructed system and a list of all materials used in the construction of the system must be completed and submitted prior to requesting a final inspection.
- <sup>3</sup> A squirt test inspection of the pressurized piping system is required.

For pre-cover inspection information, contact your agent below:

**Onsite Wastewater Specialist** 

1/17/2013

1/17/2014

Title

Date Issued Expiration Date

### Bernie Duffy

Department of Environmental Quality Northwest Region, Warrenton Office 65 N Highway 101, Suite G

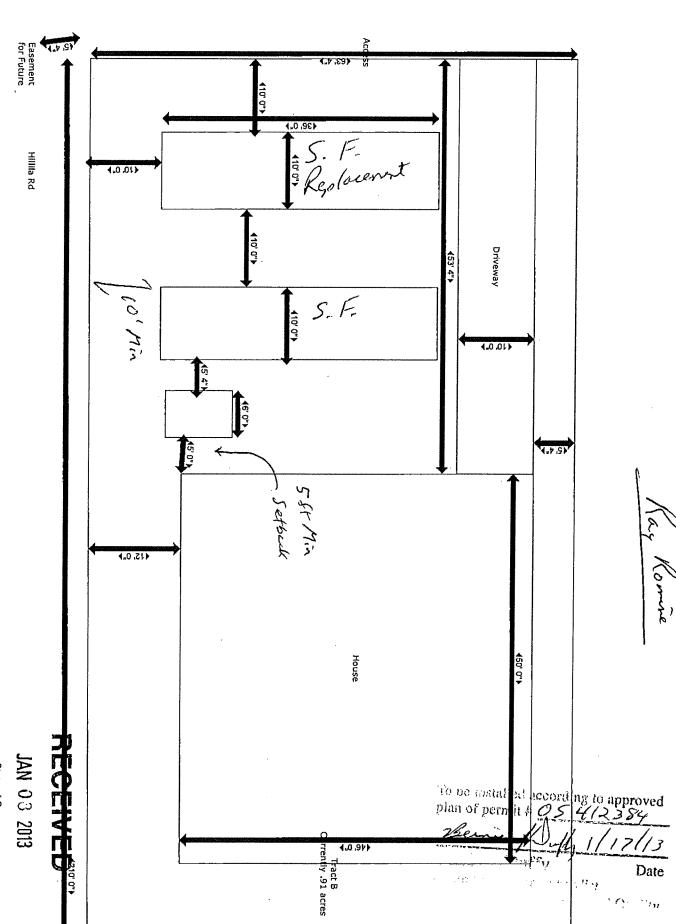
Warrenton, OR 97146 Phone: (503) 861-3280

Fax: (503) 861-3259

See the Attachment 1 for additional information about your permit.

to of the first to the MMMA JAN 142013 Proposed later line Location To be installed according to approved plan of permit # 05 412 384 Manural wocompe Spreidice Department of Environmental Quality

T.



State of Oregon
Dept. of Environmental Quality
Eastern Region - Pendleton

SE Notes

Ray Romine Site

Page 1 of 3

Th 330

### Ray Romine, Romine Construction LLC

14 (4. 4)

计可模拟

From:

"DUFFY Bernie" <DUFFY.Bernle@deq.state.or.us>

To:

"Ray Romine, Romine Construction LLC" <romine4@charter.net>

JAN 142013

Go:

"SCHIELE Vicky" <SCHIELE. Vicky@deq. state.or.us>

Sent: Subject: Wednesday, January 00, 2013 1:12 PM-RE: Sand-filter depth requirements.

Rav.

I Just got off the phone with Chuck Costanzo. He reviewed his soil and field notes. He agreed that 36 Inch max. depth / 6 Inch minimum depth will be acceptable for your Bottomless sand filter.

Please design your sand filter to Indicate your sand filter construction to meet these requirements. Forward this Information to Dean Hartman.

Vicky, please put a copy of this email in the file.

Thanks,

Bernie Duffy, DEQ

From: DUFFY Bernie

Sent: Wednesday, January 09, 2013 12:10 PM To: 'Ray Romine, Romine Construction LLC'

Cc: SCHIELE Vicky

Subject: FW: Gearhart Hillila & Dune Ln construction permit follow-up

Ray,

Also please show the location of the proposed water line. Minimum 10 ft setback to any portion of the septic system.

Thanks,

Bernie Duffy, DEQ

To be installed according to approved plan of permit #05 412 384

Bernie J. Buf

Date

Natural Resource Specialist

Department of Environmental Quality

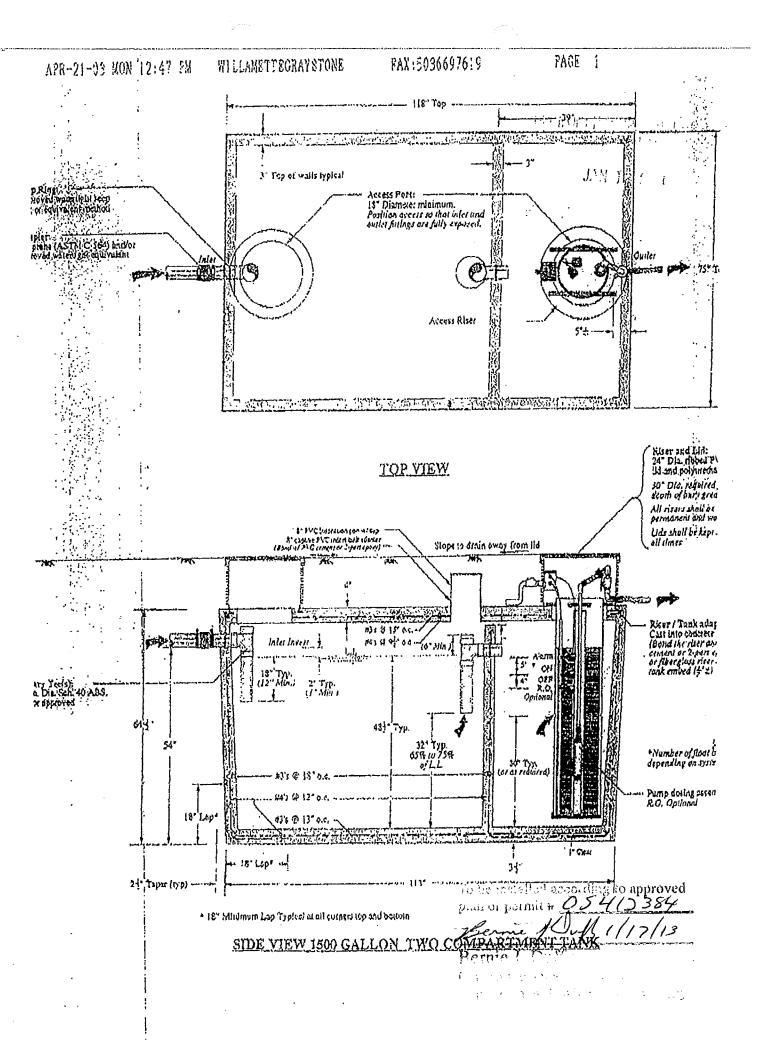
### Hartman Construction Material list

Pipe & Fittings	in the Martin of the second of the Salahan The Salahan
	· ·
4" 3034 pvc plpe	JEN 19 2013
4" 3034 fittings	
Tank	数1.45mm 3.45mm 2.5mm
Willamette Graystone 2 compartment 1500 gal dosing / septic	concrete
Willamette Graystone 500 gal dosing concrete	
Willamette Graystone 1000 septic concrete	
A-1 Ready mlx 1500 gal 2 compartment concreté	
Risers	
Orenco 24"	
Norwesco	
Michaels	
Pump Package	
Franklin PF 300511 30 gpm ½ hp	
Orenco Floats & Alarms	
Orenco Effluent Screen	
Orenco Control Panel	
Manifold Kit	
34" pvc sch 40	
1¼ " pvc sch 40	
Orenco orifice shields ¾"	
√ ¼" long sweep 90	
6" vavle box	
√ ¾" ball valve	•
Drain Media	
Naselle Sand & Gravel DEQ Sand	
Teevin 1 ½" Drain Rock	Kovicel
Mohler Pee – Gravel	reasy
Fabric	
Typar	
Drain Fleld	
Arch 18 Chambers	
Willamette Graystone Drop Box	
Willamette Graystone Serial D - Box	

To be installed according to approved plan of permit # 65412384

Bernie J. Duffy Date

Natural Resource Specialist
Department of Euvironmental Quality



TOP VIEW - 10'X36' GRAVITY DISCHARGE SAND FILTER

Note: See additional details on EDW-ISF-S-3

### 10'x36' Intermittent Sand Filter\* Bothowless 2013

\* Configured for loading rates up to 1.25~GPD/FT. Follow appropriate intermittent sand filter design enterial

24" End Cap 1-1/4" PVC Manifold From OSI Effluent Pumping System ဗွ ડુંં ij Orifice Shield 30 Mil PVC Liner -Flushing Valve Box

Air Coil System

No fice offices

To be installed according to approved plan of permit # 554/2384 -Flushing Valve Box -Air Coil System ETEMIORE: (541) 459-4449

Bernie J. Duffy

---- /2"

Natural Resource Specialist Department of Environmental Quality

FACSIMILE: (541) 450-2884

97479-9012 SUTHERLIN, OREGON 314 ALWAY AVENUE

Orenco Systems®

8///

EDW-ISF-1036L-1

Ray Romine

HORNEY CONTRACT

22 14:201

A The second

5F Cross-section

The second secon	Exsisting ground
36	
6" Pre-gravel	
24" DEQ sand	
8" 13 drain	rock
Backfill Wi	th 6"- 12" sand

To be installed according to approved plan of permit # 05 4/2384

Bernie J. Duffy

Date

Natural Resource Specialist

Department of Environmental Quality

Head Loss Through Flom Mele

Total Flow Rate 'Add an' Friction Losses

31,3

Haad Loos Through Dischauge

idoted Loss in Transport Pipe

Through Distributing Vahr

Hand Toss in Leteral

Head Cours in Manilloid

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Number of Unesper Zone

Total Accuse Flow Frake

Resultual Head at Lask Oxidos

Cara Sarkin

Michael Pas Hate per Online

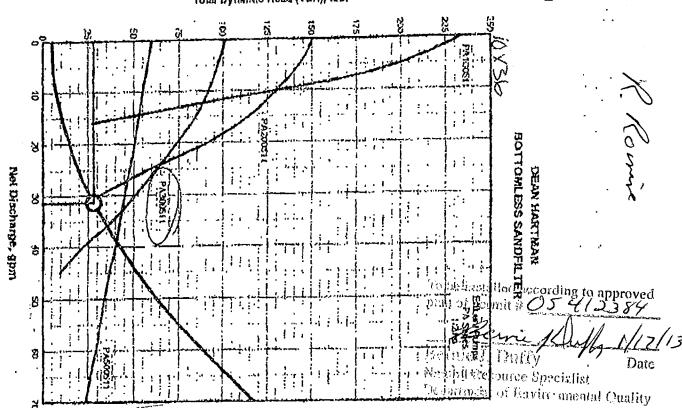
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Pump Selection for a Pressurized System

14.14.14

Input Pocarateis .... Designative and all the Court Munifold Pige ClassiSchedule Number of Islands bet Col Stationing View Mode Add-oc Friction Lossos Transport Lian Size PERSONAL CASE STOP Transport Length Cateral Line No. ARTHET PROJEKAN Critico Municipal None make 0.75 archid 8 70.0 to-8 à ź 3 8

Total Dynamic Head (TDH), feet



SCHOOL CHANGE STITE WITH THE STATE OF PORNOCIVICA X46-30-XIES NORCE 200 I P.

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**りりのグーザつおぐ~り!**/

\$21,49,720 September

TOMOS MUNITURY

plan of permit # 05 4/3 387
FIELD WORK SHEET FOR AGGREGATE

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Gravel - Drain Rock FIELD WORKSHEET FOR AGGREGATE PROJECT NAME (SECTION) CONTRACTOR OR SUPPLIER PROJECT MANAGER Teevin & Pischer Quarry BJD ITEM NUMBER SOURCE NAME SOURCE NUMBER HE Johnson Quarry MATERIAL SIZE TEST NO. | DATE 04-010-2 34"-1 14" TIME SAMPLED AT #1 TO BE USED IN 1-25-11 Stockpile SIEVE SIEVE ANALYSIS AASHTO T 27/T 11 SPECS SIZE FM LIMITS TOTAL MASS 1 MASS 2 MASS 3 MASS 4 CUMULATIVE % RET % PASS **MASS** % RETAINED 2" 100% 0.0 0.0 00 100% 1 %" 95-100% 109,3 109.3 .9 99% 1 1/4" 3747.8 3747.8 29.4 70% 133 5955.8 5955.8 46.8 23% 3/4" 0-15 2417.4 2417.4 19.0 4% 1/3" 02 406.9 406.9 3,2 1% PAN 96.3 96.3 .8 B - INITIAL DRY D = MASS AFTER 12,733,8 12,733.5 MASS: SIEVING: PERCENT FRACTURE IN AGG ELONGATED SIEVE TM 1 SPECS. SE T 176 PIECES SIZE LIMITS AUGIVION FRAC QUESTIONABLE NON FRAC TEST EI.ONO MASS (F) MASS (Q) L FRAC % SAMP MASS (N) MASS MASS 2 3 LE CLAY SAND S.E. AVG. PAN TARE **WET MASS & PAN** DRY MASS & PAN AFTER WASH DRY MASS & PAN C = DRY MASS AND PAN AFTER WASH -DRY Х WET PAN WAQTC AASHTO T 27/T 11 A = WET MASS AND PAN - PAN RESULT SPEC ROUND X SQUARE RECTANGLE 12" SIZE Combine % TM 1 To be installed according to approved R Fracture plan of permit # \_054(3 Wood Waste TM 225 Е Cleanness Value TM 227 M Flat & Elongated TM 229 Bernie J. Duffy A Fineness Modulus T 27/T 11 Natural Resource Specialist Date R MOISTURE %=((A-B)/B) X 100 Department of Environmental Quality K SIEVE LOSS %=((C-D)/C) X 100 0.0 S Base Agg 2.00mm / 6.33mm X QUALITY INDEPENDENT ASSURANCE VERIFICATION CONTROL CERTIFIED TECHNICIAN (PLEASE PRINT) COMPANY NAME SIGNATURE DATE AND CARD NUMBER

Teevin & Fischer Quarry

1/25/11

Andy Finn

# 44056

JAN 16 2013

न नेवा स्थापित । स्था WARR MICH

### MOHLER SAND & GRAVEL, LLC

PO BOX 399 NEHALEM, OR 97131 503-368-5157 Plant 503-368-5158 Fax

### PEA GRAVEL SPECIFICATIONS ANALYSIS DATE 02/21/12

SIEVE	WEIGHT	%	%	DEQ
SIZE	RETAINED	RETAINED	PASSING	SPEC'S
1/2	0		****	
1/4	2317	3109	57	18-100
4	4169	1257	23	<b>5</b> -75
10	5386	40	1	< 24
16	5405	21.0	.04	< 2
100	5418	8	.02	< 1
PAN	5426			

To be installed according to approved plan of permit # 05 4/2354

Bernie J. Duffy Date

Natural Resource Specialist Department of Environmental Quality OK - BJULG Under drain media

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PAN	5426			
-				





JAN 1 4 2013

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To:

"Ray Romine, Romine Construction LLC" <romine4@charter.net>

Cc:

"SCHIELE Vicky" <SCHIELE.Vicky@deg.state.or.us>

Sent:

Wednesday, January 09, 2013 1:12 PM

Subject:

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Subject:

Attach: underdrain.pdf

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Bernie Duffy, WWS Onsite Wastewater Specialist DEQ, ER, Pendleton 541-278-4601

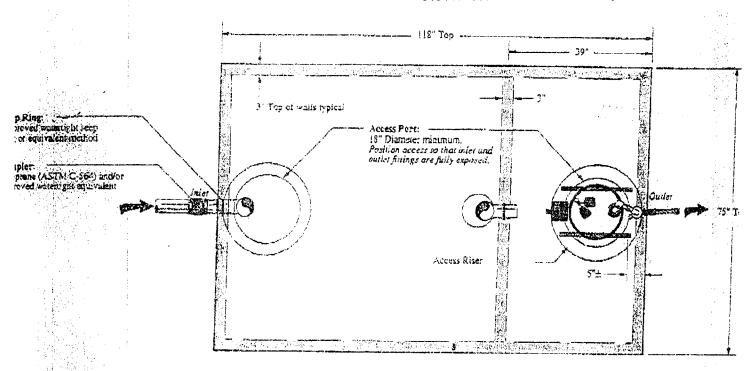
From: Ray Romine, Romine Construction LLC [mailto:romine4@charter.net]

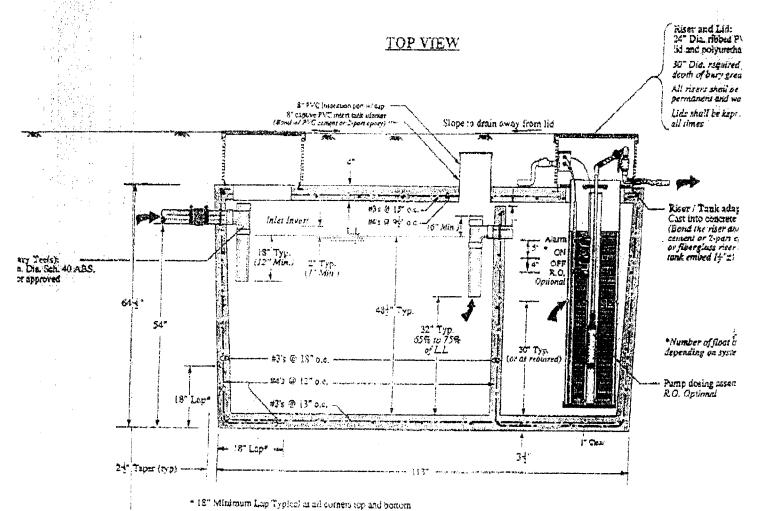
Sent: Tuesday, January 08, 2013 11:50 AM

To: DUFFY Bernie

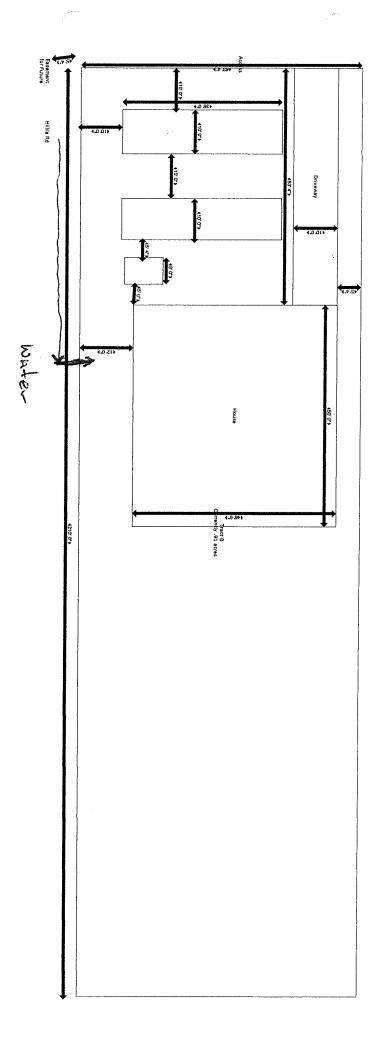
Subject: Gearhart Hillila & Dune Ln construction permit follow-up

Bernie.





SIDE VIEW 1500 GALLON TWO COMPARTMENT TANK



# 10'x36' Intermittent Sand Filter\* with Gravity Discharge

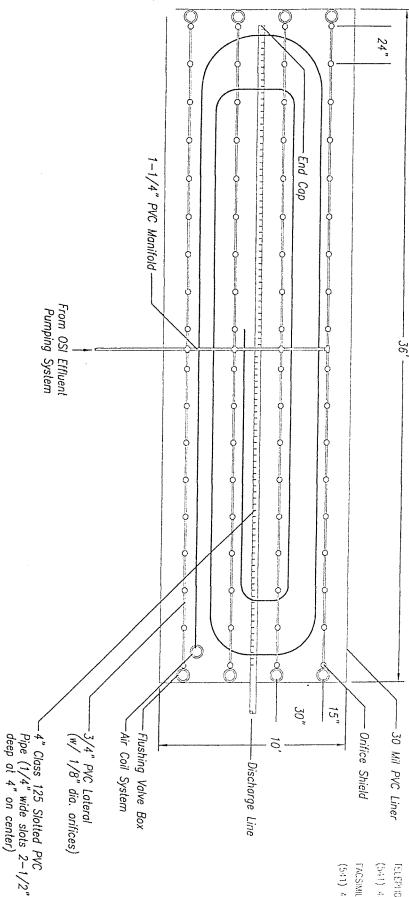
st Configured for loading rates up to  $1.25~GPD/FT.^2~$  Follow appropriate intermittent sand filter design criteria.



Orenco Systems®

97479-9012 SUTHERLIN, OREGON 814 AIRWAY AVENUE

(541) 455-2884 (541) 459-4445 TELEPHONE:



TOP VIEW - 10'X36' GRAVITY DISCHARGE SAND FILTER SCALE: 1' = 5'-0'

Note: See additional details on EDW—ISF—S—3

of Flow Differential the and Land Oritina

Number of Lines per Zone

Total Actual Flow Rake

Minimum Flow Hate per Chilice

9

foumber of Orthices per 2000

West Loss Through Distributing Valve

Residual Head at Last Oxides

LAN to Manifold

Haed Loss in Laterals

Head Loss Through Discharge

'Add an' Friction Losses

Total Flow Rate

Hoad Loss in Transport Pipe

8

8

TE CE

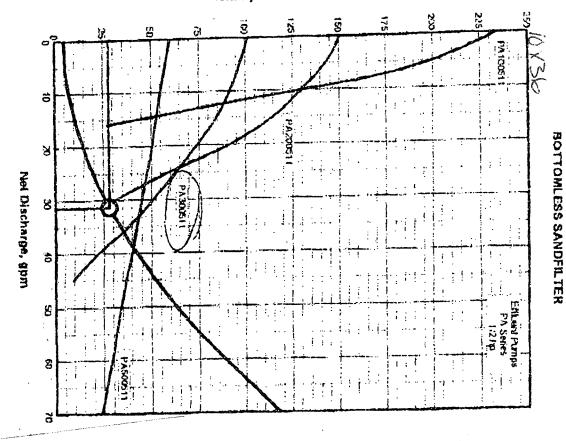
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Heal Lass in Manilold

## Pump Selection for a Pressurized System

10.0 feet	â	'Add-oif Friction Lineses
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	6	Transport Pape Classificherida
1.25 inches	12	Transport Liam Sixe
) (exch	20.0	Transport Length
S.O feek	<b>5.</b>	Lift to Manifuld
_	4	Munifold Pipe ClassiSchedule
1.25 inches		herwood line Size
100 CO	ŽĢ,	Hayane old Larryth
.,	None	Chatriousing Viewe Wode:
_	8	Lateral Prop Classificherside
0.75 inches	0.75	Lateral Line Size
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	<b>Cab</b>	Number of Laterals for Cod
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Ed	5.0	residual thad all Last Orthon
SALYN BILL	Š	Onlice Size

### Total Dynamic Head (TDH), feet



SCHOOL STATE

STATE STATE

URCH TOTAL STORY CANAN

Orenzo Systemu Exceptoraled

8277

DEAN HARTMAN

0007-WORC-01/

SNOKEDER.

म्प्रहा १५००

136-96-133

11433

STATEMENT OFFICE STATEMENTS

\* TOMOS MUNICIPAL

### Hartman Construction Material list

JAN 1 2013

Pipe &	Fittings
1/	4// 2024
	_4" 3034 pvc pipe
	_4" 3034 fittings
Tank	NO NO
	_ Willamette Graystone 2 compartment 1500 gal dosing / septic concrete
1	_ Willamette Graystone 500 gal dosing concrete
	_ Willamette Graystone 1000 septic concrete
	_ A-1 Ready mix 1500 gal 2 compartment concrete
Risers	0 04"
	_ Orenco 24"
	Norwesco
	_ Michaels
	Package
	_ Franklin PF 300511 30 gpm ½ hp
	Orenco Floats & Alarms
	Orenco Effluent Screen
	Orenco Control Panel
Manifo	
	_¾ " pvc sch 40
	_ 1 ¼ " pvc sch 40
	Orenco orifice shields ¾"
	3/1 long sweep 90
	_ 6" vavle box
	_¾" ball valve
Drain N	
	Naselle Sand & Gravel DEQ Sand
	Teevin 1 ½" Drain Rock
	Mohler Pee – Gravel
Fabric	·
	Typar
Drain F	
	Arch 18 Chambers
	Willamette Graystone Drop Box
	Willamette Graystone Serial D - Box

### FIELD WORK SHEET FOR AGGREGATE

11

734-1792 (4-89)

JAN 0 5 2013

	AME (SECTION)								CONTRACT	NO.	**	
									NORTH	COAST	BRANC	HOFF
HIGHWAY					COUNTY				F.A. NO.		RENTON	
CONTRACT	OR OR SUPPLIER				SOURCE NA	ME			-			
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PROJECT M					SOURCE NO.		MATERIAL S	ZE	TO BE USED	IN .	B. I. NO.	REPORT
					WA-02	1						
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next highe	st whole numb	es when sand equiva per. Example SE=41	.2=42. Ex	. SE=(42+	44+41)÷3	=42.3=4	anu report 3.	as a singl	e test. Rep	ort a frac	tional SE v	alue as
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From:

**DUFFY Bernie** 

Sent:

Wednesday, January 09, 2013 1:13 PM

To:

Ray Romine, Romine Construction LLC

Cc:

SCHIELE Vicky

Subject:

RE: Sand filter depth requirements.

JAN 00 2013

NORTH COAST BRANCH OFFICE

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Sent: Tuesday, January 08, 2013 11:50 AM

To: DUFFY Bernie

Subject: Gearhart Hillila & Dune Ln construction permit follow-up

Bernie.

Here is an electronic copy of the site plan for Dune Ln. in Gearhart Oregon. Vicky explained that the print was too small. You should be able to blow this up to the size you want and print if needed.

I would like to here back from you if you need anything else.

Dean Hartman was reponding to your request for current sive ratings

This should be all you need to approve the request for a new system. If not please let me know

Thank you

Ray Romine Romine Construction LLC

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Email scanned by PC Tools - No viruses or spyware found. (Email Guard: 9.0.0.898, Virus/Spyware Database: 6.20940)

http://www.pctools.com

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To: Cc:

SCHIELE Vicky

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JAN 05 2013

Attachments:

underdrain.pdf

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Bernie Duffy, WWS Onsite Wastewater Specialist DEQ, ER, Pendleton 541-278-4601

**From:** Ray Romine, Romine Construction LLC [mailto:romine4@charter.net]

Sent: Tuesday, January 08, 2013 11:50 AM

To: DUFFY Bernie

Subject: Gearhart Hillila & Dune Ln construction permit follow-up

Bernie,

Here is an electronic copy of the site plan for Dune Ln. in Gearhart Oregon. Vicky explained that the print was too small. You should be able to blow this up to the size you want and print if needed.

I would like to here back from you if you need anything else.

Dean Hartman was reponding to your request for current sive ratings

This should be all you need to approve the request for a new system. If not please let me know

Thank you

Ray Romine Romine Construction LLC

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Email scanned by PC Tools - No viruses or spyware found. (Email Guard: 9.0.0.898, Virus/Spyware Database: 6.20940)

http://www.pctools.com

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Rev 8-14-03 bjk

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

Application for Unsite Sewage
Treatment System

Phone/TTY: (503) 861-3280 Fax: (503) 861-3259

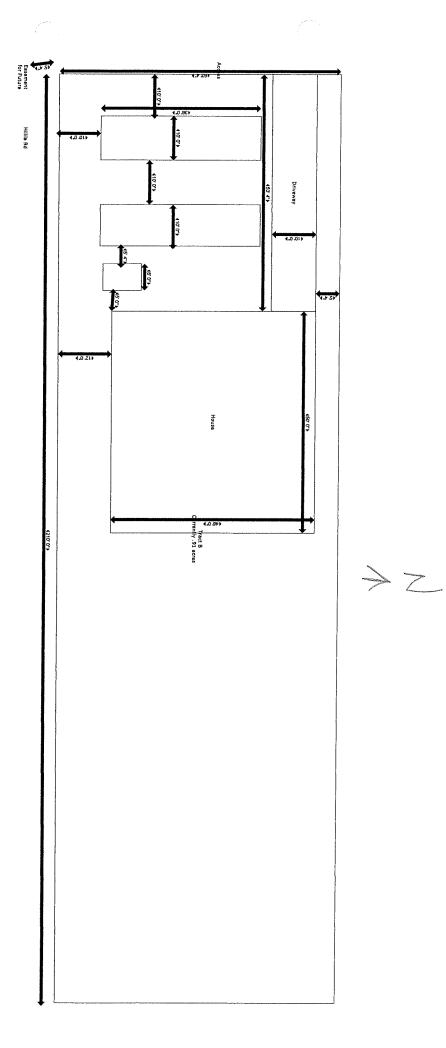
· · · · · · · · · · · · · · · · · · ·	SCUIT
Date Stamp:	For DEQ Use Only: 14/13
RECEIVED	Fee Paid 1580.
	Receipt Number /5070/
1AN A / 2032	Application Number 414025
JAN 0 1 2013	Date of 1st Response
	Date of 2nd Response
DTU COAST REANCH OFF	Date of Final Response
MILL COAD! DIVING! SI	Date of Completion
	Scanned Data Entry

SCANNED

JAN 0-4 2013

A 基础设置 1000 000 000 000 000 000 000 000 000 0	A. Property Owner Information	er er i die gegen de die de
Rian Ramina	2170 5Kyline Dr Seus Mailing Address (Street of PO Box, City, State, Zip Code)	ide OR 503440-9561
Name \.	Mailing Address (Street of PO Box, City, State, Zip Code)	Phone Number
\$P\$\$P\$ [10] 是 [10] [10] [10] [10]	B. Legal Property Description	
	03BD 3301 A	
Township Range	Section Tax Lot . Tax Ad	ecount Number Acreage or Lot Size
Clatsop		Lot Block
County	Subdivision Name	Lot
Property Address:	1	State Zip Code
Address	City	State Zip Code
Directions to Property: En	st on Hillia one block p	ost Henitrige LN
•		<u></u>
		the state of the s
1種類似出 700次過程如此	C. Existing Facility / Proposed Facility / Water	Information
Existing Facility:	Proposed Facility:	Water Supply:
☐ Single Family Residence	Single Family Residence	M Public General Name
×		Private
Number of Bedrooms	Number of Bedrooms	Well, Spring, Shared
Other	Other	
		and the second s
[2] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	D. Type of Application	
Site Evaluation	☐ Renewal Permit ☐ Authori	zation Notice for:
Construction Permit	Renewal Permit  Existing System Evaluation  Replace	ting to an Existing System Not in Use ng a Mobile Home or House with Another Mobile Home
Construction Permit Repair Permit	Renewal Permit  Existing System Evaluation  Permit Transfer  Authori  Connect Replace or Hou	ting to an Existing System Not in Use ng a Mobile Home or House with Another Mobile Home se
Construction Permit Repair Permit Major Minor Alteration Permit	Renewal Permit  Existing System Evaluation  Permit Transfer  Permit Reinstatement  Authori  Connec  Replaci or Hou	ting to an Existing System Not in Use ng a Mobile Home or House with Another Mobile Home se dition of One or More Bedrooms al Hardship
Construction Permit Repair Permit Major Minor	Renewal Permit  Existing System Evaluation  Permit Transfer  Permit Reinstatement  Authori  Replaci or Hou or Hou Person	ting to an Existing System Not in Use ng a Mobile Home or House with Another Mobile Home se dition of One or More Bedrooms
Construction Permit Repair Permit Major Minor Alteration Permit Major Minor	Renewal Permit	ting to an Existing System Not in Use  ng a Mobile Home or House with Another Mobile Home  se dition of One or More Bedrooms til Hardship tary Housing Please Specify
Construction Permit  Repair Permit  Major Minor  Alteration Permit  Major Minor	Renewal Permit	ting to an Existing System Not in Use  ng a Mobile Home or House with Another Mobile Home  se dition of One or More Bedrooms  I Hardship  rary Housing  Please Specify  ned to you as incomplete. Post a flag or sign
Construction Permit  Repair Permit  Major Minor  Alteration Permit  Major Minor	Renewal Permit	ting to an Existing System Not in Use  ng a Mobile Home or House with Another Mobile Home  se dition of One or More Bedrooms  I Hardship  rary Housing  Please Specify  ned to you as incomplete. Post a flag or sign
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Construction Permit  Repair Permit  Major Minor  Alteration Permit  Major Minor  Major Minor  If the required fee and attachme with your name and address at	Renewal Permit	ting to an Existing System Not in Use  ng a Mobile Home or House with Another Mobile Home  se dition of One or More Bedrooms at Hardship  rary Housing  Please Specify  ned to you as incomplete. Post a flag or sign  and the Department of Environmental Quality  sole purpose of this application.
Construction Permit  Repair Permit  Major Minor  Alteration Permit  Major Minor  If the required fee and attachme with your name and address at  By my signature, I certify that and it's authorized agents perm	Renewal Permit	ting to an Existing System Not in Use  ng a Mobile Home or House with Another Mobile Home  se dition of One or More Bedrooms at Hardship rary Housing Please Specify  ned to you as incomplete. Post a flag or sign  eles.  ant the Department of Environmental Quality
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Construction Permit  Repair Permit  Major Minor  Alteration Permit  Major Minor  If the required fee and attachme with your name and address at  By my signature, I certify that and it's authorized agents perm  Signature  Applicant's Name - Please Print Legit	Renewal Permit	ting to an Existing System Not in Use  ng a Mobile Home or House with Another Mobile Home  see dition of One or More Bedrooms  th Hardship  rary Housing  Please Specify  ned to you as incomplete. Post a flag or sign  soles.  ant the Department of Environmental Quality  sole purpose of this application.
Construction Permit  Repair Permit  Major Minor  Alteration Permit  Major Minor  Minor  If the required fee and attachme with your name and address at  By my signature, I certify that and it's authorized agents perm  Signature  Applicant's Name – Please Print Legit	Renewal Permit	ting to an Existing System Not in Use  ng a Mobile Home or House with Another Mobile Home  see dition of One or More Bedrooms  th Hardship  ary Housing  Please Specify  ned to you as incomplete. Post a flag or sign  soles.  ant the Department of Environmental Quality  sole purpose of this application.

SECTION 1 - TO BE COMPLETED BY APPLICANT (may be filled in electronically by tabbing to each field)
1. Applicant Name/Property Owner: Ray Romine
Mailing Address: 2170 Skyline Dr
City, State Zip Code: Sevaside OR 47138
Telephone: 503-440-9561
2. Property Information:
County: (14tsop Tax Lot No.: 3301
Township: 6 Range: 10 Section: 03 BD
Physical Address:
Block: Lot:
Subdivision Name (if applicable):
3. This proposed facility is for:
An individual, single-family dwelling
Describe the type of development, business, or facility and the provided services or products:
4. Permit or approval being requested:
Construction-Installation permit for: New Construction Repair Alteration
Non-water -carried facility requests (for example, pit privy/vault toilet for campgrounds)
Authorization Notice for: Replacement of dwelling Bedroom addition
Print Form Other changes in land use involving potential sewage flow increases
SECTION 2 - TO BE COMPLETED BY CITY OR COUNTY PLANNING OFFICIAL
5. Property Zoning: R 1 Zoning Minimum Parcel Size: 10 K Lot
6. The facility is located: inside city limits inside UGB outside UGB
If inside UGB, the proposed facility is subject to:
☐ City jurisdiction ☐ County jurisdiction ☐ Shared City/County jurisdiction
7. Does the proposed facility comply with all applicable local land use requirements: Yes No  If you answered "Yes" above, was this compliance based on:
Compliance with local comprehensive plans and land use requirements (provide a citation to the applicable provisions)
Conditional approval (provide findings and citation or attach a copy of the applicable land use decision)
Measure 49 waiver (provide Department of Land Conservation and Development approval number)
Either provide reasons for affirmative compliance decision or attach findings of fact:
8. Planning Official Signature:
Print Name: Date: 1/3/13
Title:



# JAN 0 5 2013

# Hartman Construction Co. Material list

Pipe & Fittings
1 ½ PVC sch 40 4" 3034 pvc pipe 4" 3034 fittings
Tanks
Willamette Graystone 2 compartment 1500 gal dosing / septic Willamette Graystone 500 gal dosing Willamette Graystone 1000 septic
Risers
OrencoNorwescoMichaels
Pumps & Supplies
Franklin Orenco Floats & Alarms Orenco Effluent Screen
Drain Media
Naselle Sand & Gravel DEQ Sand Teevin 1 ½" Drain Rock Mohler Pee – Gravel
Frabric
Typar
Drain Field
Arch 18 Chambers Willamette Graystone Drop Box

FIELD WORKSHEET FOR AGGREGATE

	NAME (SEC		ALCIO I	FOR A	GGREC	JA.					· · · · · · · · · · · · · · · · · · ·	T-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	CONT	RACT	NUMBER
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mrom vie			hnson (			ACE NO		MATERIAL SIZE  3/4"-1 1/2"							
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C = DRY PAN	MASS AN	D PAN	AFTER	WASH -			x	DRY	W	ET	***				
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Andy Finn # 44056 Teevin & Fischer Q						Juarry	' <b>'</b>	XTU	Z	//			1/2	25/11	

JAM J Jan



# Scappoose Sand & Gravel Co.

33485 E. Crown Zellerbach Road • P.O. Box AF • Scappoose, Oregon 97056 Phone (503)543-8821 • Fax (503) 543-7997

#### UNDERDRAIN MEDIA / SIEVE ANALYSIS

SIEVE	WEIGHT	1% RETAINED	TYPE OF M. % PASSING		PEA GRAVEL DATES
1/2	C	10	/oc	100	1-5-10 SAMPLE#
3/8	0		160	85-100	TIME 9 00 AM
4	4.60	87	13	10.30	INITIALS K.L.
8	5.25	99	1	0-10	NOTÉS
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200 TOTAL	5.27	99.8	<u> </u>	0-1:0	
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18.00	24				INITIALS
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TOTAL					
					SAMPLE#
					TIME
Articles				4.4	INITIALS
					NOTES
TOTAL					

Receipt Number: 150701

Oregon Department of Environmental Quality

Warrenton Office 65 N Highway 101, Suite G Warrenton, OR 97146

Date Received 1/4/2013

Received From Romine Construction LLC (Check Name): Ray Romine 2170 Skyline Drive Seaside, OR 97138

For **T06N R10W S03 BD** Property TaxLot 3301 Lot A At: Clatsop County **Dune Lane** 

Gearhart, OR 97138

**Current Payment** 

Check # Money Order #

Amount Paid Payment Type 1,580.00 Check

Purchase Order 2809

Bank Number

**Amount Applied** 

24-22

1,580.00

Total Amount Applied \$1,580.00

**Onsite Fees** 

Base Fee:

1,520.00

Surcharge Fee:

60.00

Plan Review Flow Fee:

Pump Evaluation Fee:

Flow Fee:

Reinspection Fee:

**Total Fee** 

\$1,580.00

**Application Description** 

Application ID: 414023

Application Type: Construction-Installation Permit

Single Family Dwelling

System Type: Sand Filter: Bottomless - Residential

Pump Evaluation: No

Flow: **450** 

gallons/day

**Payments** 

Previous Payments:

0.00

Current Payment:

1,580.00

Over Payment:

0.00

**Total Payments:** 

\$1,580.00

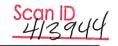
Receipt Amount: \$1,580.00

Receipted By:

Date of Entry:

Vicky Schiele

1/4/2013





#### Department of Environmental Quality

Western Region Medford Office

221 Stewart Avenue, Suite 201 Medford, OR 97501 (541) 776-6010 FAX (541) 776-6262 TTY 711

John A. Kitzhaber, MD, Governor

December 21, 2012

SITE EVALUATION REPORT

RAY ROMINE 2170 SKYLINE DR. SEASIDE, OR 97138

Re: Site Evaluation Onsite #412358

Dear Mr. Romine:

I evaluated the property referenced below to determine if an onsite wastewater disposal system that complies with State of Oregon Rules could be located on the parcel. I approved the site for the system described in the "Approved System Specifications" section of the Field worksheet. This site approval runs with the land and will automatically benefit subsequent owners. The site approval is valid until the approved system is constructed under a DEQ construction permit or unless the site is altered without approval from this office (excavation that could affect setbacks, placement of wells or utilities, etc.). Alterations made to the site may invalidate this approval.

Applicant Name: Ray Romine

Application Number: 413944

Township: 06 Range: 10

Section: 03

Tax Lot: 3301

County: Clatsop

If you believe the site evaluation is in error or that a variance from approval conditions is necessary, please contact our office for more details.

This is not your permit. A Construction/Installation permit is required before you construct your system. Please contact this office when you are ready to apply for a construction/installation permit. We cannot sign off on any Building Codes forms until we issue your permit.

If you have any questions regarding this report, please contact DEQ at 541-776-6130.

Yours truly.

Charles D. (Chuck) Costanzo, REHS

Onsite Wastewater Specialist

Attachments: Field Worksheet, Additional Conditions of Approval, Approved Area Site Plan

JAN 0 4 2013

/ <sub>\</sub> )		E EVALUATION FD	ELD WORKSHEET	10	
Township: 6 N  Owner/Applicant:	Range: 10W Romaine	Section:	Tax Reference: 7334  Evaluator:	Parcel Size:	
Inspection Date(s):		J	Application Number:_	412944	
	969 (1997) <b>1</b>				
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Application No.: 0

STTE EVALUATION FIELD WORKSHEET Section: 03 Tax Reference: Parcel Size: Owner/Applicant: Inspection Date(s):\_ Application Number: SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, DEPTH TEXTURE ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC... Pit 1 Pit 2 Pit 3 Pit 4 Landscape Notes: SYSTEM SPECIFICATIONS ATT Treatment Standard: \_\_\_\_\_\_ Initial System: inches Minimum Depth:\_\_\_ linear feet/square feet Maximum Depth: Disposal Facility: ATT Treatment Standard: \_\_ Replacement System: Disposal Facility: linear feet/square feet Maximum Depth: Special Conditions:

#### FIELD WORKSHEET

App. Name: Romine, Ray Application # 413944 County Clatsop								
RE: SITE EVALUATION REPORT for Township/Range/Section: T 06 / R 10 / S 03 , Tax Lot# 3301								
Commercial Facility: Yes X No Parcel Size: 91 Plans to subdivide into 3 lots								
APPROVED SYSTEM SPECIFICATIONS								
Design flow: 450 gpd Max # of bdrms: 4 Max # of Employees: N/A								
Initial System Replacement System								
Standard       □ Capping Fill       ▼Bottomless Sand Filter         □ Conventional Sand Filter/ATT       □ Other       □ Conventional Sand Filter/ATT       □ Other								
Tank: 1,000 gal. 1,500 gal. 2 compartment Other effluent pump required effluent filter required								
Distribution Method: Equal Serial Pressurized	Distribution Method: Equal Serial Pressurized							
Absorption facility: MA_ total linear feet	Absorption facility: MA total linear feet							
linear feet per 150 gallons projected daily sewage flow	MA linear feet per 150 gallons projected daily sewage flow							
되다면 병원 병원을 하려면 그 말이다.	보기도 이 교계에서 고장없다면 이 맛나 다니다.							
Additional Conditions of Approval	생물이 하셨다고요 그 살이 취임한 그 경기를 했다.							
1. Any alteration of natural soil conditions (i.e. cutting or fi	illing) in the acceptable area may void this approval.							
2. Both the initial and replacement disposal areas are to be	protected from traffic, cover, development, or other potential							
disturbance of natural soil conditions.								
3. The area must not be subjected to excessive saturation du	e to, but not limited to, artificial drainage of ground							
surfaces, roads, driveways, and building down spouts.								
4. This approval is given on the basis that the parcel describe	ed above will not be further partitioned or subdivided.							
5. Placement of a well within 100 feet of the approved areas	may invalidate this approval.							
A curtain drain is required, a minimum of feet above the highest disposal trench.								
The curtain drain must be a minimum of inches deep, and installed in accordance with OAR 340-071-								
0220 (12).  Rake trench sidewalls.								
	only							
<ul> <li>☐ The system must be installed during dry soil conditions only.</li> <li>☐ System must be installed between June 1 and October 1, unless otherwise approved by DEQ.</li> </ul>								
Original lot of .91 AC will only support 2 dwellings due to the Oregon Administrative Rule requirement that in areas of permanent								
Crowd water and in 1 11 11 11 11 11 1 10 17 20 10	071 0000 (0) ( )							

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#### FIELD WORKSHEET

App. Name: Romine, Ray Application # 413944 Count	/ Clatsop									
RE: SITE EVALUATION REPORT for Township/Range/Section: T 06 / R 10 / S 03 , Tax Lot# 3301										
Commercial Facility: Yes X No Parcel Size: 91 Plans to subdivide into 3 lots										
APPROVED SYSTEM SPECIFICATIONS										
Design flow: 450 gpd Max # of bdrms: 4 Max # of Employees: N/A										
Initial System Replacement System										
Standard Capping Fill XBottomless Sand Filter Standard Capping Fill XBottomless Sand Filter Conventional Sand Filter/ATT Other Conventional Sand Filter/ATT Other										
Tank: 1,000 gal 1,500 gal. 2 compartment Other Tank: 1,000 gal. 2 compartment Other effluent pump required effluent filter required = effluent filter required = effluent filter required										
Distribution Method: Equal Serial Pressurized	Distribution Method: Equal Serial Pressurized									
Absorption facility: total linear feet										
linear feet per 150 gallons projected daily sewage flow	linear feet per 150 gallons projected daily sewage flow									
" Max Depth " Min Depth	" Max Depth" Min Depth									
·	-									
Additional Conditions of Approval										
1. Any alteration of natural soil conditions (i.e. cutting or f	illing) in the acceptable area may void this approval.									
2. Both the initial and replacement disposal areas are to be disturbance of natural soil conditions.	protected from traffic, cover, development, or other potential									
3. The area must not be subjected to excessive saturation du	e to but not limited to artificial drains as of around									
surfaces, roads, driveways, and building down spouts.	e to, but not infined to, artificial dramage of ground									
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Rake trench sidewalls.										
The system must be installed during dry soil condition	ns only.									
System must be installed between June 1 and October 1, unless otherwise approved by DEQ.										
Original lot of .91 AC will only support 2 dwellings due to the Oregon Administrative Rule requirement that in areas of permanent										
ground water, only one dwelling per half acre is allowed (OAR 0340-071-0290 (2) (c).										

Tax Reference: 5330 ( Section: O3 Parcel Size: Evaluator:\_ Owner/Applicant: Application Number: Inspection Date(s): SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, DEPTH TEXTURE ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC... 1)-100 Pit 1 Pit 2 Pit 3 Pit 4 Landscape Notes: Groundwater Type: Aspect: SYSTEM SPECIFICATIONS Design Flow: gpd ATT Treatment Standard: \_ Initial System: linear feet/square feet Maximum Depth: \_\_\_\_\_ inches Minimum Depth: \_\_\_\_\_ inches Disposal Facility:\_\_ ATT Treatment Standard: Replacement System: linear feet/square feet Maximum Depth:\_ inches Minimum Depth: Disposal Facility:\_ Special Conditions:

TE EVALUATION FIELD WORKSHEE

Гоw	nship:_			R	lange:			_	, C	ction	:			,	Tax l	Refe	rence	e:				Pa	rcel	Size	e:				
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Commercian Date(s): 12/14/12  Ray Evaluator Quality Application Number: 413 944  Application Number: 413 944  Possible Future Properties of the Application	Township: $6N$	Range: 10W		Tax Reference: 73301	Parcel Size:
Possible Future Properties  Line  10'x36' Bottom(155 Sand Fifter, Dossible Localism	Owner/Applicant:	Koman	e, itay	Evaluator:	The Cold
Possible Cuture Prope Line  150.30  100's  Let A  Willia Ted  10'x36' Bottomloss Sand Filter, Possible Location	Inspection Date(s):	12/14/12	<u> </u>	Application Number:	413949
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Application No.:

#### SITE PLAN

Possible Future Propert

Application No.:



State of Oregon Department of Environmental Quality

Rev 8-14-03 bjk

### 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
Date Stamp:	For DEQ Use Only:
Date Stamp:	Date Received 11121112
RECEIVED	Fee Paid 7402
A Charles to be a control of the con	Receipt Number 19919
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· NOV 2 7 2012	Date of 1st Response
	Date of 2nd Response
THEOXIT BRANCH OFFICE	Date of Final Response
THE PERSON WAS A PROPERTY OF THE PERSON OF T	Date of Completion
WARRENTON	Scanned Data Entry

NOV 2 7 2012

187. (	(303) 001-5257
	A. Property Owner Information
Ray Romine	2170 SK 1300 Seas we OR 503-440-9561  Mailing Address (Street or PO Box, City, State, Zip Code)  Phone Number
Name	B. Legal Property Description
Township Range County  Property Address:	Section Tax Lot Tax Account Number Acreage or Lot Size  A CABC  Lot Block  City State Zip Code
Directions to Property:	it on Hillia one block past Herriage in
	C. Existing Facility / Proposed Facility / Water Information
Existing Facility:  Single Family Residence  Number of Bedrooms	Proposed Facility:  Water Supply:  Public Searchard  Number of Bedrooms  Private  Well, Spring, Shared
Other	Other
Site Evaluation Construction Permit Repair Permit Major Minor Alteration Permit Major Minor	D Type of Application  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
with your name and address at t	ents are not included with this application, it will be returned to you as incomplete. Post a flag or sign the entrance to the property. Flag and number the test holes.
By my signature, I certify that t and it's authorized agents perm	the information I have furnished is correct, and hereby grant the Department of Environmental Quality ission to enter onto the above described property for the sole purpose of this application.
Signature  Powning  Applicant's Name—Please Print Legib	Date/  502 440-956/ Applicant's Phone Number  Applicant's E-mail Address
2170 SKALL	ne Dr Sessiale OK 97138
Applicant is the Owner	Authorized Representative Licensed Septic Installer
	Authorization Attached  Installer's Name  SCANNED



Receipt Number: 149797

Oregon Department of Environmental Quality

Warrenton Office 65 N Highway 101, Suite G

Warrenton, OR 97146

NOV 2 7 2013

Date Received 11/27/2012

(Check Name): Ray Romine

Received From Romine Construction LLC

2170 Skyline Drive Seaside, OR 97138

For **T06N R10W S03** 

Property TaxLot 3301 Lot A

At: Clatsop County **Dune Lane** 

Gearhart, OR 97138

<b>Current Payment</b>				-	China	11000000	011111111
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Check #

Money Order #

Purchase Order

Bank Number

Amount Applied

740.00 Check

Amount Paid

Payment Type

2785

24-22

740.00

Total Amount Applied

\$740.00

**Onsite Fees** 

Base Fee:

680.00

Surcharge Fee:

60.00

Plan Review Flow Fee:

Pump Evaluation Fee:

Flow Fee:

Reinspection Fee:

Total Fee

\$740.00

**Application Description** 

Application ID: 413944

Application Type: New Site Evaluation

Single Family Dwelling

System Type: Unknown

Pump Evaluation: No

Flow: 450

gallons/day

**Payments** 

Previous Payments:

0.00

**Current Payment:** 

740.00

Over Payment:

0.00

**Total Payments:** 

\$740.00

Receipt Amount:

\$740.00

Receipted By:

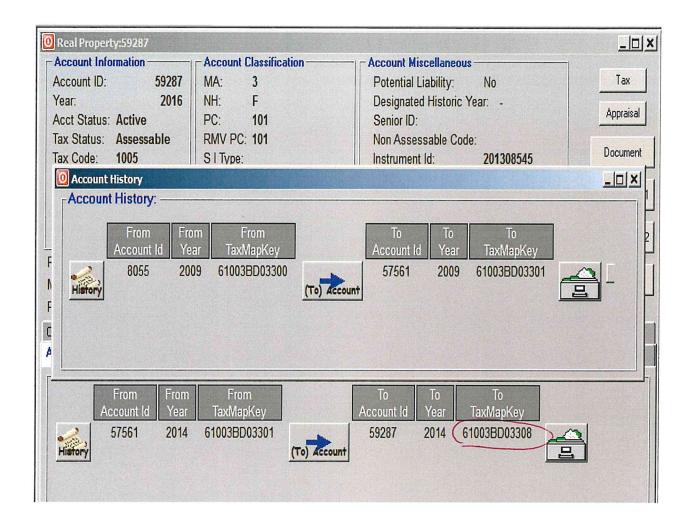
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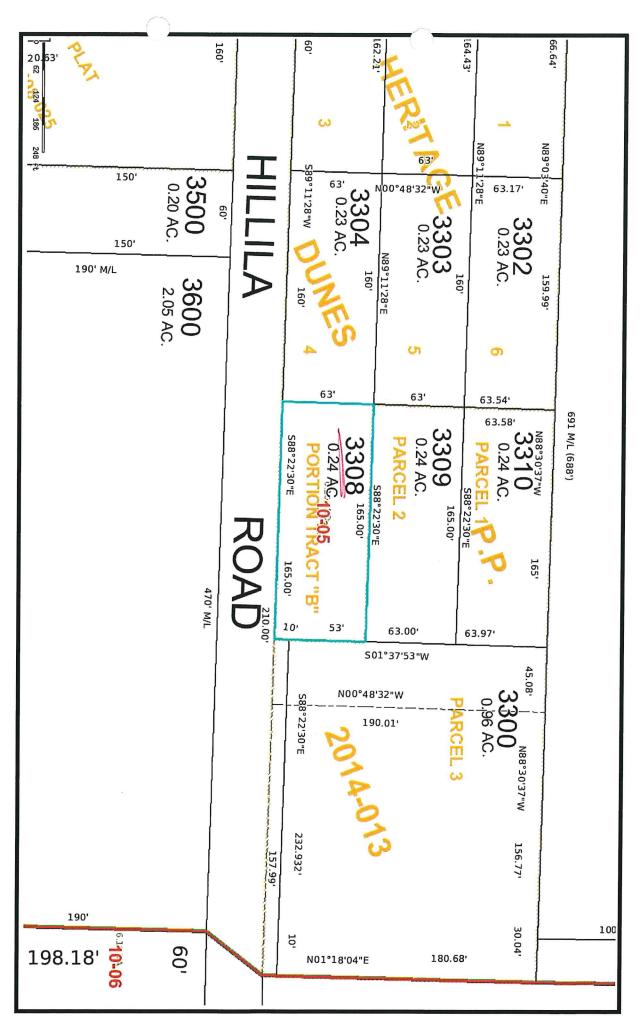
Vicky Schiele

11/27/2012

Dune Lu fature trivate Dr MOV 5 7 2012 Hillie Rd Hillita Road pro dru 62'×210'

## Paper trail of TaxMapKey numbers







# Clatsop County Webmaps

Disclaimer: This map was produced using Clatsop County GIS data. The GIS data is maintained by the County to support its governmental activities. This map should not be used for survey or engineering purposes. The County is not responsible for map errors, omissions, misuse or misinterpretation. Photos may not align with taxlots.



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