State of Oregon

Department of Environmental Quality

Onsite Permit ID: OS407205

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 OS407205 as follows:

PROPERTY INFORMATION

Property Owner: Daniel Allen And Carolyn Allen

Township 06N, Range 10W, Section 04 AA

Property Location: Patricia Ann Lane, Gearhart

Tax Lot 1000

Facility Type:

Single Family Dwelling

Clatsop County

3 Bedrooms

SPECIFICATIONS AND REQUIREMENTS

System type: Pressure Distribution

Design Flow:

450 gals/day

Drain Media Total Depth:

12 inches

Minimum Septic Tank Size:

1000 colo

Drain Media Below Pipe:

6 inches

Minimum Dosing Tank Size:

1000 gals

. . . .

500 gals

Drain Media Above Pipe:

4 inches

DistributionType:

Pressurized

Seepage Bed:

600 SqFt

Media Type:

Rock and Pipe

Maximum Trench Depth:

36 inches

Minimum Trench Depth:

18 inches

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.
- 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.

Application ID: 408141, Construction-Installation Permit - Single Family Dwelling - Installer: Big River Construction, Inc.: dba Big River Excavating

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.

SYSTEM INSPECTIONS AND COMPLETION DATES

Pre-Cover Inspection by Connie Schrandt on 5/4/2009

Installer Name: Big River Construction, Inc.: dba Big River Excavating

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

Comis Schandt

Onsite Wastewater Specialist

5/5/2009

Authorized Agent:

Title

Date CSC Issued

Connie Schrandt

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

Page 2 of 2

For Official Use Only/Date Received;



Final Inspection Request and Notice - Onsite ID: 407205

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: ON	ner/Permittee	Information:		Tou	nabi- C	CN D			
	Allen And Card			Clate	nsnip u	6N, Range 1	OW, Section	on 04 AA	*
Property Patrick Address:	a Ann Lane, Go	earhart		Clar	sop Co	unty TaxLot#	Tax Lot		
							1. 17		
SECTION 2: Sys	tem Compone	nt Specification	8-						
A. Tanks/Pumps			_	e: Pressure	Distrik	47	$\hat{\mathbf{S}}_{i}, \mathbb{R}^{r_{i}}, \hat{\mathbf{T}}_{i}$		E '
Tanks(1) Volume	1500					intiou		e degle A	Vater Light orification*
Tanks(2) Volume	1300 gal	Compariments:	2.	Manufacturer:	A-	Leonera	te	Dя	18:4/30/
Pump(e) HP:	Model/Manuf.	compartments.	_	Manufacturer:			1.1	Da	le:
, ,				Float(s)Type(1		Model/Manuf.	1 11 1		
B. Piping				Float(s)Type(2):	Model/Manuf.			
		e 1				1	· Proces		
	r (tank to drainfiel		Diam	eler: 14 11	ASTM	WOther 200	-0	Length	166
	ouro Transport Pl	e Yes No	Diam	eter.	ASTM	HOther:	class	Length:	65%
C. Secondary Treatmen				,				-ongin.	
Sand Filter	1	Type: Bus	A + 0 b	e led		Contoin	N. D'		
Underdrain pip	1 4	ASTM#JOther:	100	200 clas		OOIA	er Dimension	-	38
Manifold piping	1 1 1	ASTM#/Olher:		200 chi				Length:	
Internal Pump	1 -2	Model/Manufacti	rer					Length::	
Floats(1)	Type:	Model/Manufact	iror	PA30	ser	red_	PA30	05	
Floats(2)	Type:	Model/Manufactu	rer						
ATT	Yos No								
Certified Maint.	1	Model:							
		,							
Operation and Maint	COURSE KUCENOR	7 Yes No	T	, ,	-				
). Drainfield Media							a ·	(E)	·
Турп	(Graval, Pipe or alt	ernative?) /	17	1-3-4		7	1 to 2 1	e k	
	Yes No		1	- 4	gra	vel			
Drop Box	You No					v.	D	1 1 44	
Distribution Pipe	Yes No	Diameter: 1/10	ASTA	1#/Other:				1	
Comment		7		in other.	200.	Class	Le	ngth:	
- ominent	-			**					
III Tanks(a) semm 4-4									
NI Tanks(s) were tested i Attach sieve analysis for	or water-lightness : Underdrain Maria	ofter installation and	pesse	d in accordance	with OA	R 340-073 000			

BIG RIVER ROCK

PAGE 02/02

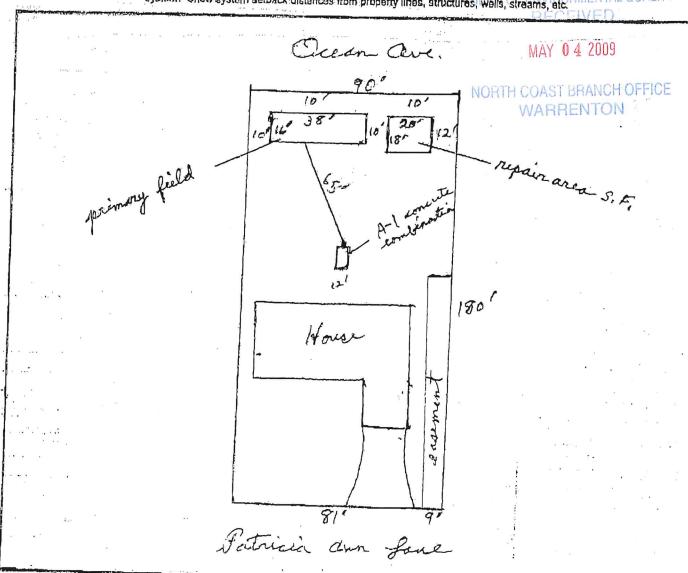
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I WARRENTON

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 A - 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/Pormittee or Cartifle	ad Installer w/Certification#: Print Name: /		7-10-10-10-10-10-10-10-10-10-10-10-10-10-
Licensed Installer. Yes	No License#: ZCO Z	DE TULKER Certification#: >	
Owner/ Certified Signatur	Way Tiolas	Data: P	1 88 hore#:
SECTION 5 - Office Us	e Only:	3.	503 741 0760
Notice Accepted Yes	NB - Date: 5-4-09	Installer/Owner (Permittee) Yes No Notified:	Dale!
If No, Reason for Non Acceptance:		hampen I	374-09
Comment:			

Dan & Carolyn allen

BIG RIVER EXCAVATING

DEPT. OF ENVIRONMENTAL QUALITY RECEIVED

MAR 0 5 2009

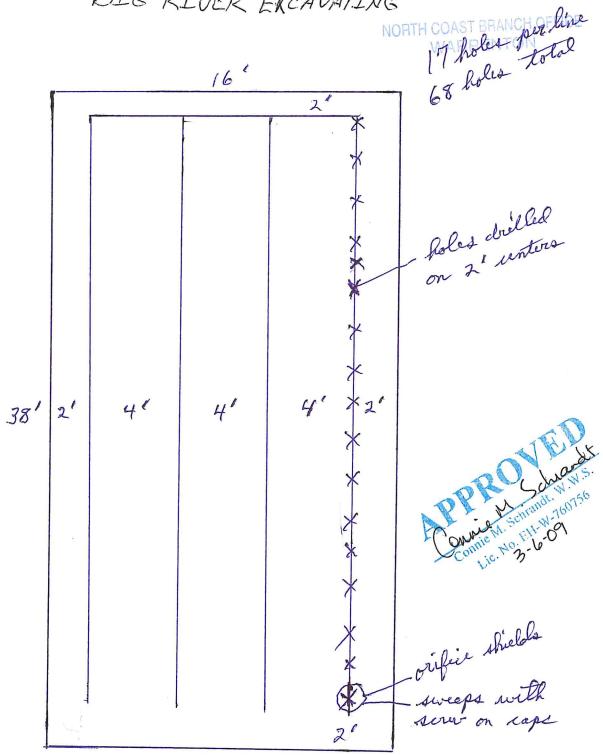
NORTH COAST BRANCH OFFICE WARRENTON

Ocean ave. 10/16 38 repair area S.F. primary field 1801 Patricia dun fane

pipe hele placement cond his by her Ban + lawyn alle DEPT. OF ENVIRONMENTAL QUALITY RECEIVED

BIG RIVER EXCAVATING

MAR 0 5 2009



x - denotes &" holes drilled straight up

Dan & Carolyn allen 6N 10W 4AA - 1000 BIG RIVER EXCAVATING

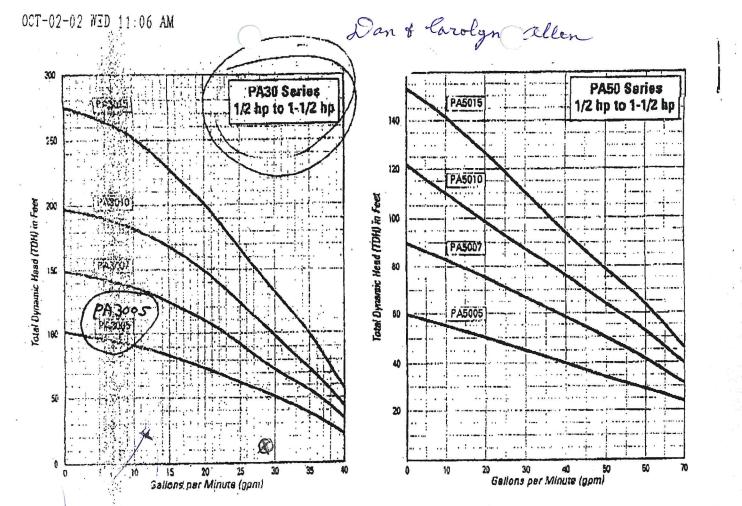
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NORTH COAST BRANCH OFFICE WARRENTON

(a) Calculate Flow rate: Diameter of orifices		SYSTEM ERAD CALCULATIONS
2. SYSTEM ALLOWANCE: (includes distribution piping losses and a five foot residual head discharge at the distribution laterals) 10* feet 10* fee	1.	and an end and and and and and and and and and a
(a) Calculate Flow rate: Diameter of orifices	2.	SYSTEM ALLOWANCE: (includes distribution piping losses
Diameter of orifices = N = 70 Number of orifices = N = 70 Orifice discharge rate = R = 14/ gpm Total gallons per minute = N X R = 28.70 gpm (b) Calculate Friction Head Loss: Length of transport pipe = P (in feet) 65 Friction loss coefficient = L (see reverse side) 6,66 Friction Head = P X L = 4.23 feet TOTAL DYNAMIC HEAD (TDE): (sum of static head, system allowance and friction head) HYDRAULIC SPECIFICATIONS: PUMP DUTY: 28.70 gpm @ 14.33 TDE BRAND: PA 30 geries MODEL: PA 3005 HORSEPOWER: 12 CAPACITY: 14.33 TDE 40 + GPM, and	з.	PRICTION HEAD: (transport pipe friction loss at flow rate)
Number of orifices = N = 70 Orifice discharge rate = R = 14/ gpm Total gallons per minuta = N X R = 28.70 gpm (b) Calculate Friction Head Loss: Length of transport pipe = P (in feet) 65 Friction loss coefficient = L (see reverse side) 6.66 Friction Head = P X L = 4.31 feet TOTAL DYNAMIC HEAD (TDH): (sum of static head, system allowance and friction head) HYDRAULIC SPECIFICATIONS: PUMP DUTY: 28.70 gpm 8 14.33 TDH BRAND: PA 30 geries MODEL: PA 3005 HORSEPOWER: 12 CAPACITY: 14.33 TDH 8 40 + GPM, and		(a) Calculate Flow rate:
Orifice discharge rate = R = 14/ gpm Total gallons per minute = N X R = 28.70 gpm (b) Calculate Friction Head Loss: Length of transport pipe = P (in feet) 65 Friction loss coefficient = L (see reverse side) 6.66 Friction Head = P X L = 4.21 feet TOTAL DYNAMIC HEAD (TDH): (sum of static head, system allowance and friction head) HYDRAULIC SPECIFICATIONS: PUMP DUTY: 28.70 gpm 8 14.33 TDH BRAND: PA 30 series MODEL: PA 3005 HORSEPOWER: 1 CAPACITY: 14.33 TDH 8 40 4 GPM, and		Diameter of orifices g inch
Total gallons per minute = N X R = 28.70 gpm (b) Calculate Friction Head Loss: Length of transport pipe = P (in feet) 65 Friction loss coefficient = L (see reverse side)6,66 Friction Head = P X L = 4.27 feet TOTAL DYNAMIC MEAD (TDH): (sum of static head, system allowance and friction head) HYDRAULIC SPECIFICATIONS: PUMP DUTY: 28.70 gpm 8 (4.33 TDH BRAND: PA 30 series MODEL: PA 3005		Number of orifices ~ N ~ 70
Total gallons per minute = N X R = 28.70 gpm (b) Calculate Friction Head Loss: Length of transport pipe = P (in feet) 65 Friction loss coefficient = L (see reverse side)6,66 Friction Head = P X L = 4.27 feet TOTAL DYNAMIC MEAD (TDH): (sum of static head, system allowance and friction head) HYDRAULIC SPECIFICATIONS: PUMP DUTY: 28.70 gpm 8 (4.33 TDH BRAND: PA 30 series MODEL: PA 3005		Orifice discharge rate = R = 14/ qpm
Length of transport pipe = F (in feet) 45 Friction loss coefficient = L (see reverse side) 6,66 Friction Head = PXL = 4.23 feet TOTAL DYNAMIC HEAD (TDH): (sum of static head, system allowance and friction head) HYDRAULIC SPECIFICATIONS: PUMP DUTY: 28.70 gpm 8 14.33 TDH BRAND: PA 30 series MODEL: PA 3005 HORSEPOWER: 12 CAPACITY: 14.33 TDH 8 40 4 GPM, and		
Friction loss coefficient = L (see reverse side) 6,66 Friction Head = PXL = 4.23 feet TOTAL DYNAMIC HEAD (TDH): (sum of static head, system allowance and friction head) HYDRAULIC SPECIFICATIONS: PUMP DUTY: 28.70 gpm @ 14.33 TDH BRAND: PA 30 series MODEL: PA 3005 HORSEPOWER: L CAPACITY: 14.33 TDH @ 40 + GPM, and		(b) Calculate Friction Head Loss:
Friction Head = PXL = 4.23 feet TOTAL DYNAMIC HEAD (TDH): (sum of static head, system allowance and friction head) HYDRAULIC SPECIFICATIONS: PUMP DUTY: 28.70 gpm & 14.33 TDH BRAND: PA 30 series MODEL: PA 3005 EORSEPOWER: 1 CAPACITY: 14.33 TDH & 40 + GPM, and		Length of transport pipe = P (in feet) 45
TOTAL DYNAMIC HEAD (TDH): (sum of static head, system allowance and friction head) HYDRAULIC SPECIFICATIONS: PUMP DUTY: 28.70 gpm & 14.33 TDH BRAND: PA 30 series MODEL: PA 3005 HORSEPOWER: 12 CAPACITY: 14.33 TDH & 40 4 GPM, and		Friction loss coefficient = L (see reverse side) 6,66
HYDRAULIC SPECIFICATIONS: PUMP DUTY: 28.70 gpm & 14.33 TDE BRAND: PA 30 series MODEL: PA 3005 EORSEPOWER: 14.33 TDE & 40 4 GPM, and		Priction Head = PXL = 4.33 feet
MODEL: <u>PA 3005</u> EORSEPOWER: 12 CAPACITY: 14.33 TDH 8 40 4 GPM, and	4.	TOTAL DYNAMIC HEAD (TDH): (sum of static head, system allowance and friction head)
MODEL: <u>PA 3005</u> EORSEPOWER: 12 CAPACITY: 14.33 TDH 8 40 4 GPM, and	5.	HYDRAULIC SPECIFICATIONS:
MODEL: <u>PA 3005</u> EORSEPOWER: 12 CAPACITY: 14.33 TDH 8 40 4 GPM, and		PUMP DUTY: 28.70 gpm & 14.33 TDE
MODEL: PA 3005 EORSEPOWER: 2 CAPACITY: 14.33 TON 8 40 4 GPM, and		BRAND: PA 30 series Connie M. EH-W. 09
		MODEL: PA 3005 HORSEPOWER: 1
28,70 GPM @ 55 TDH		CAPACITY: 14.33 TDN 8 40 4 GPM, and
		28,70 GPM @ 55 TDH

Footnote: * in absence of specific head loss calculations. use 10 feet for this factor.



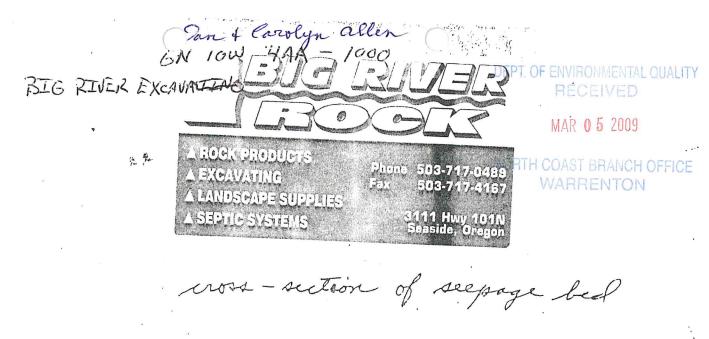
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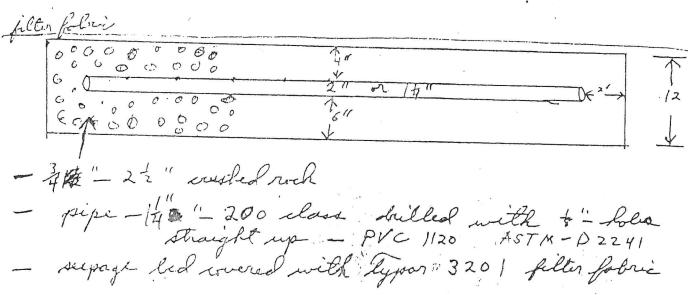
MAR 0 5 2009

NORTH COAST BRANCH OFFICE WARRENTON

Comie Mo. EH-W-760756

NTD-PU-PA-1 Rev. 1.0, © 4/02 Page 4 of 4





- 1000 gal septic tonk X 1500 gal combination tank

Connie M. Schrundt. W.W.S.

Connie No. F.H. W-760756

Lic. No. 3-107



Recording Instrument #:

200810479

Recorded By: Clatsop County Clerk

of Pages: 6 Fee:

51.0

Transaction date: 11/18/2008 13:52:56

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MAR 0 5 2009

RERECORDING STATEMENT

NORTH COAST BRANCH OFFICE WARRENTON

THIS DOCUMENT IS BEING RERECORDED TO CORRECT:

To correct scriveners error in legal

PREVIOUSLY RECORDED INSTRUMENT NUMBER 200809665

DATE: November 18, 2008

SIGNATURE



After Recording Return To: Daniel G. Allen Carolyn Ann Allen P.O. Box 465 Welches OR 97067-0465

Send Tax Statements To: Daniel G. Allen Carolyn Ann Allen P.O. Box 465 Welches OR 97067-0465 NORTH COAST BRANCH OFFICE WARRENTON

MAR 0 5 2009

Title Order No. 44-25274 Escrow No. 44-25274 Tax Account No. 1006 61004AA 01000 ACCT ID# 8385

WARRANTY DEED

(OR\$ 93.850)

Stephen E. Thompson, Jr., an estate in fee simple, Grantor, conveys and warrants to Daniel G. Allen and Carolyn Ann Alten, as tenants by the entirety, Grantee, the following described real property:

See Exhibit 'A' attached hereto and by reference made a part hereof.

Situs address:

v/l Acct.ID#8385 Gearhart OR 97138

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 6 TO 11, CHAPTER 424, OREGON LAWS 2007. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES, AS DEFINED IN ORS 30.930, AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007.

The true consideration for this conveyance is \$600,000.00.

Recorded by Ticor Title Ins. Co. 4-

Warranty Deed - Page 1

DEPT. OF ENVIRONMENTAL QUALITY RECEIVED

MAR 0 5 2009

Dated this	NORTH COAST BRANCH OFFICE WARRENTON
State of OR, County of Clatsop)ss.	
This instrument was acknowledged before me on 10/10/08 by Stephen E. Thompson, Jr. My commission expires: 7	_, 2008 May-11, 2012
OFFICIAL SEAL JAMILA M. BAKER NOTARY PUBLIC-OREGON COMMISSION NO. 426813 MY COMMISSION EXPIRES MAY 11, 2012	

DEPT. OF ENVIRONMENTAL QUALIT

MAR 0 5 2009

EXHIBIT B-RESERVATION OF EASEMENT

OCTOBER 11, 2008

NORTH COAST BRANCH OFFICE WARRENTON

LEGAL DESCRIPTION FOR STEVE THOMPSON
A 9' WIDE PERMANENT, NONEXCLUSIVE
EASEMENT FOR PLANTING AND MAINTENANCE
OF A VISUAL VEGETATIVE SCREEN ON THAT PORTION
OF PARCEL 2 INSTRUMENT NO. 200511380 CLATSOP COUNTY
DEED RECORDS AS DESCRIBED BELOW;

A 8' WIDE EASEMENT FOR PLANTING AND MAINTENANCE OF A VEGETATIVE VISUAL SCREEN ON A STRIP OF PROPERTY DESCRIBED AS FOLLOWS, ALL OF WHICH IS SITUATED ON PARCEL NO. 2 INSTRUMENT 200511380 CLATSOP COUNTY DEED RECORDS SITUATED IN THE NE 1/4 OF SECTION 4, T 6 N, R 10 W, W.M., CLATSOP COUNTY, OREGON

COMMENCING AT A RUSTY 1 1/2" IRON PIPE, THE SAME POINT BEING THE "INITIAL POINT" OF THE "NEW FIRST ADDITION TO GEARHART PALISADES" AS DEPICTED ON CLATSOP COUNTY SURVEYOR'S RECORD MAP C-343, SITUATED IN THE NW 1/4 OF SECTION 4, T 6 N, R 10 W, W.M.; THENCE NORTH 35 DEGREES 56 MINUTES 25 SECONDS EAST, A DISTANCE OF 388.96 FEET TO THE SOUTHEAST CORNER OF THAT PARCEL DESCRIBED IN INSTRUMENT NO. 200511380 AS PARCEL NO. 1, SAID POINT IS MONUMENTED BY A 5/8" REBAR WITH A PLASTIC ORANGE CAP STAMPED "MENDENHALL LS 2001, THIS SAME FOINT IS THE TRUE POINT OF BEGINNNING OF SUBJECT EASEMENT; THENCE SOUTH 00 DEGREES 00 MINUTES 00 SECONDS WEST, A DISTANCE OF 9.00 FEET, ALONG THE WESTERLY RIGHT OF WAY OF PATRICIA ANN LANE, TO A 5/8" REBAR WITH A PLASTIC ORANGE CAP STAMPED "MENDENHALL LS 2001"; THENCE NORTH 90 DEGREES 00 MINUTES 00 SECONDS WEST, A DISTANCE OF 90.00 FEET; THENCE NORTH 00 DEGREES 00 MINUTES 00 SECONDS EAST, A DISTANCE OF 9.00 FEET TO THE SOUTH BOUNDARY OF PARCEL NO 1 DESCRIBED IN INSTRUMENT NO. 200511380 CLATSOP COUNTY DEED RECORDS; THENCE NORTH 90 DEGREES 00 MINUTES 00 SECONDS EAST ALONG THE SOUTH BOUNDARY OF THE ABOVE MENTIONED PARCEL NO. 1, A DISTANCE OF 90.00' TO THE WESTERLY RIGHT OF WAY OF PATRICIA ANN LANE AND THE TRUE POINT OF BEGINNING OF THIS EASEMENT DESCRIPTION THIS EASEMENT CONTAINS 810 SQUARE FEET.

THE BASIS OF BEARING AND CONTROL FOR THE ABOVE DESCRIPTION IS PER THE SURVEY FOR STEVE THOMPSON DATED SEPTEMBER 5, 2008 RECORDED AS CLATSOP COUNTY SURVEYOR'S MAP B-12374.

Warranty Deed - Page 5

DEPT. OF ENVIRONMENTAL QUALITY
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MAR 0 5 2009

Title No. 44-25274

Escrow No. 44-25274

NORTH COAST BRANCH OFFICE

Reservation of a 9' Easement unto the Grantor as described and attached hereto as Exhibit B.

DEPT. OF ENVIRONMENTAL QUALITY RECEIVED

MAR 0 5 2009

Title No. 44-25274

Escrow No. 44-25274

EXHIBIT 'A'

NORTH COAST BRANCH OFFICE WARRENTON

Legal Description:

A parcel of land in the Gearhart Donation Land Claim more particularly described as follows:

Beginning at a point which is 3934,20 feet North and 959,35 feet West of the Southwest Southeast corner of Section 4, Township 6 North, Range 10 West, Willamette Meridian, which point is in the West line of Patricia Ann Lane as evidenced by instrument recorded in Book 156, page 214, Clatsop County Records:

thence South along the West line of said Patricia Ann Lane a distance of 90 feet; thence West a distance of 194.79 feet to the East line of Ocean Avenue as evidenced by said instrument recorded in Book 156, page 214, Clatsop County Records;

thence North 1° 41' West along the East line of sald Ocean Avenue a distance of 90.04

feet;

thence East a distance of 197.44 feet to the point of beginning.

Subject to:

The said property is free from encumbrances except:

The premises herein described lie within and are subject to the statutory powers, including the power of assessment of Sunset Empire Parks and Recreation District.

Rights of the public in and to that portion lying within Ocean Avenue and Patricia Ann Lane.

Easement as reserved in document, including the terms and provisions thereof,

Filed by:

Barney Luças

Recorded:

January 16, 1941

Book:

156 Page: 563

in Clatsop County, Oregon.

Covenants, conditions and restrictions, but omitting covenants or restrictions, if any, based upon race, color, religion, sex, sexual orientation, famillal status, marital status, disability, handicap, national origin, ancestry, or source of income, as set forth in applicable state or federal laws, except to the extent that said covenant or restriction is permitted by applicable law, imposed by instrument, including the terms and provisions thereof,

Recorded:

August 17, 1945

Book:

179 Page: 602

in Clatsop County, Oregon,

Easement as disclosed in Quitclaim Deed, including the terms and provisions thereof,

From:

Barney Lucas and Helen Lucas

To:

Palisades Homeowners Association, Inc.

Recorded:

May 7, 1986

Book:

655 Page: 387

Records of Clatsop County, Oregon.

Warranty Deed - Page 3

State of Oregon

Department of Environmental Quality

Onsite ID: **OS407205** Expiration Date: 2/10/2010

Construction-Installation Permit

This Construction-Installation Permit OS407205 authorizes the property owner to construct an onsite wastewater system as follows:

PROPERTY INFORMATION

Property Owner: Daniel Allen And Carolyn Allen

Clatsop County

Property Location: Patricia Ann Lane, Gearhart

Township 06N, Range 10W, Section 04 AA

Facility Type:

Single Family Dwelling

Tax Lot 1000

3 Bedrooms

SPECIFICATIONS AND REQUIREMENTS

System Type: Pressure Distribution

Design Flow:

450 gals/day

Drain Media Total Depth:

12 inches

Minimum Septic Tank Size:

1000 gals

Drain Media Below Pipe:

6 inches

Minimum Dosing Tank Size:

500 gals

Drain Media Above Pipe:

4 inches

DistributionType:

Pressurized

Seepage Bed:

600 SaFt

Media Type:

Rock and Pipe

Maximum Trench Depth:

36 inches

Minimum Trench Depth:

18 inches

ADDITIONAL CONDITIONS

- 1 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.
- ² Filter fabric is required over the drain media.
- ³ Meet all required setbacks.
- ⁴ The alarm and pump must be on separate circuits in the control panel.
- ⁵ The system must be installed by the property owner or a licensed sewage disposal business (installer).
- ⁶ The system must be installed in accordance with the plan approved by the agent, including any changes made by the agent.
- ⁷ Vehicular traffic and livestock must be restricted from the system area.
- ⁸ All roof drains must be directed away from the system.
- ⁹ 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.

INSPECTION REQUIREMENTS

- 1 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.
- ² A pre-cover inspection of the installed absorption facility (prior to backfill) is required.
- ³ A squirt test inspection of the pressurized piping system is required.

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

Authorized Agent:

Onsite Wastewater Specialist

2/10/2009

2/10/2010

Date Issued Expiration Date

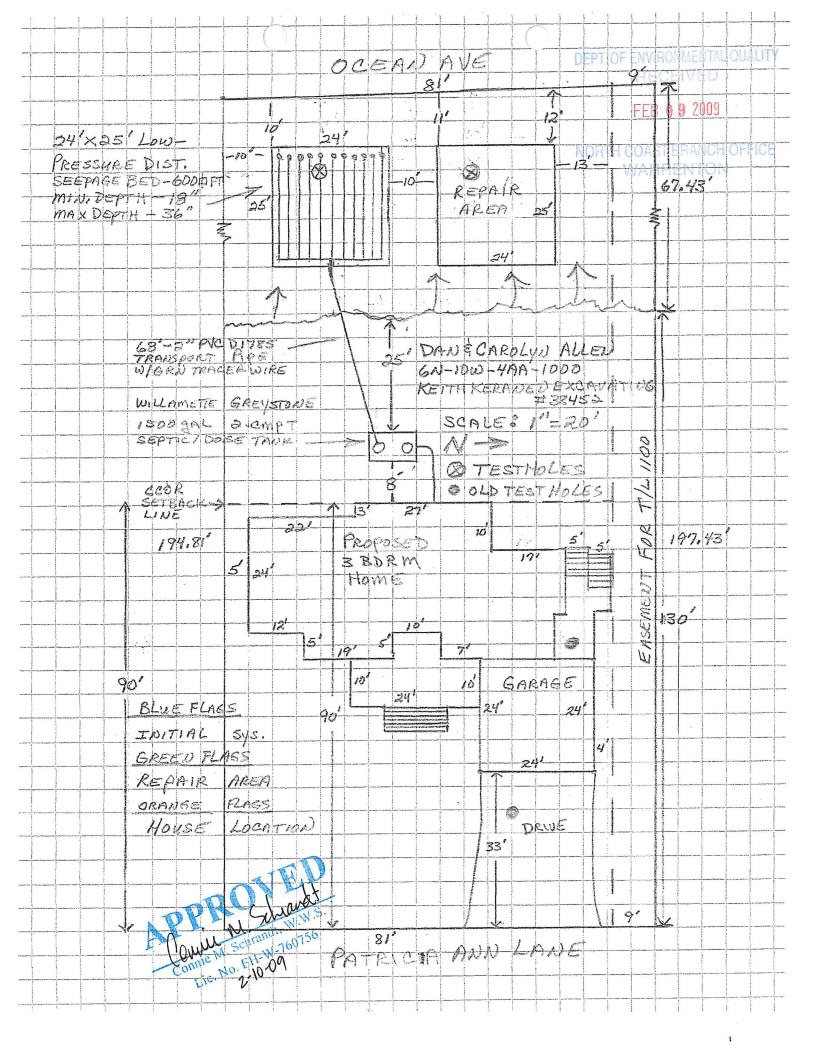
Connie Schrandt

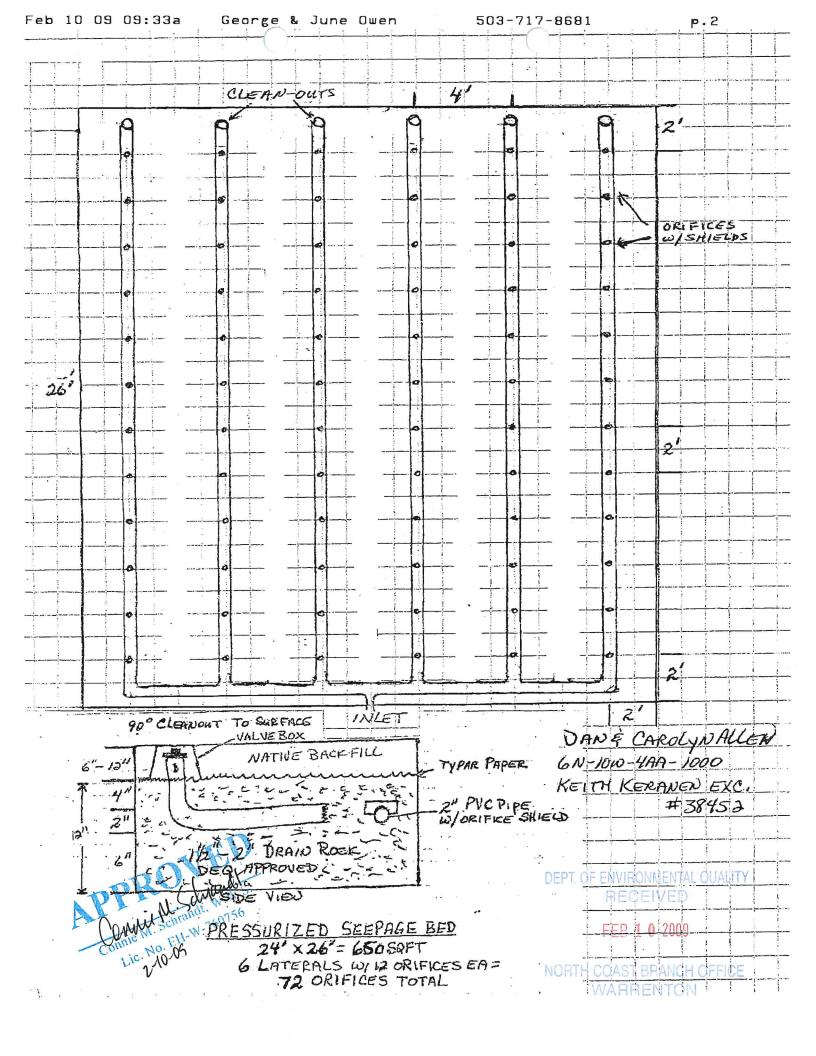
Department of Environmental Quality Northwest Region, Warrenton Office 65 N Highway 101, Suite G Warrenton, OR 97146

Phone: (503) 861-3280

Fax: (503) 861-3259

See the Attachment 1 for additional information about your permit.





Total Flow Rate

% Flow Differential 1st and Last Onflice

Number of Lines per Zone

Total Actual Flow Rate

gpm

Number of Orifices per Zone

Head Loss Through Distributing Valve

0.0 feet 0.0 feet Residual Head at Last Orifice

Lift to Manifold

-15.0 feet 5.00 feet

Head Loss in Laterals

Head Loss Through Flow Meter Head Loss Through Discharge

feet feet

'Add-on' Friction Losses

Head Loss in Transport Pipe

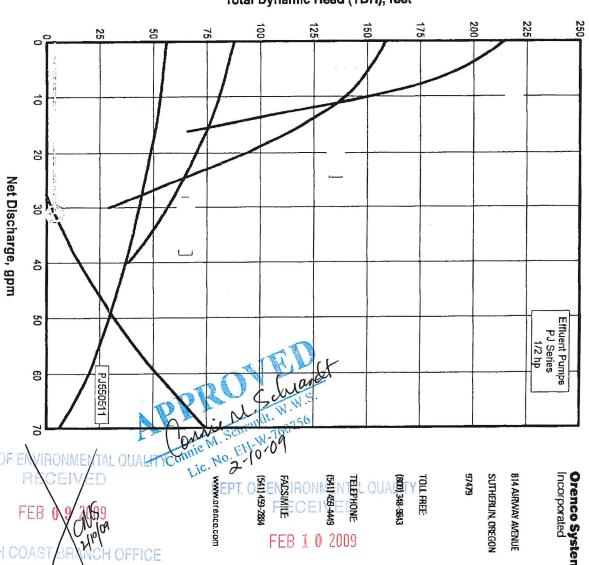
8.2 feet 0.7 feet

Head Loss in Manifold

Pump Selection for a Pressurized System

g	0.43 gpm	- Calculations
feet	0.0 feet	'Add-on' Friction Losses
None inches	None	Flow Meter
1.25 inches	1.25	Discharge Assembly Size
	40	Transport Pipe Class/Schedule
1.25 inches	1.25	Transport Line Size
feet	68.0	Transport Length
feet	-15.0 feet	Lift to Manifold
	40	Manifold Pipe Class/Schedule
inches	1.25	Manifold Line Size
feet	20.0	Manifold Length
	None	Distributing Valve Model
	40	Lateral Pipe Class/Schedule
1.25 inches	1.25	Lateral Line Size
feet	23.0	Lateral Length
	o	Number of Laterals per Cell
feet	2.0 feet	Orifice Spacing
feet	5 00	Residual Head at Last Orifice
1/8 inches	1/8	Orifice Size
		Input Parameters

Total Dynamic Head (TDH), feet



FEB

OFFICE

RONNES CEIVAGE QUAL348-9843 TELEPHONE

TOLL PRIEF

2009 FEB 10

NORTH COAST BRANCH OFFICE WARRENTON

Orenco Systems Incorporated



Kelth Keranen Excavating #38452 Patricia Ann Lane

Dan & Carolyn Allen 6N-10W-4AA-1000



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

Pate Stamp: EPT. OF ENVIRONMENTAL QUAL For DEQ Use Only: Date Received 2/9/09 Fee Paid \$\frac{100.2}{Receipt Number}\$ Receipt Number / 38403		
Receipt Number / 30 70 3	EPT. OF ENVIRONMENTAL QUALI	Date Received 2/9/09 Fee Paid # 10/0.
FEB 0 9 2009 Application Number 408141 Date of 1st Response 2-10-09	FEB 0 9 2009	Application Number 408141
DATH COAST BRANCH OFFIC Date of Final Response Date of Completion 2-10-09 Second Date of Completion 2-10-09	VALANCE STREET, WHICH I SHOW MILE IN	Date of 2nd Response Date of Final Response Date of Completion 2-10-09

	A. Property (Owner Information	
Dan & Carolyn Allen	PO Box 465 Welches, O	R 97067	503-493-6164
Name	Mailing Address (Street or PO Box		Phone Number
	B. Legal Pro	perty Description	
6N 10W Township Range Clatsop	4AA 1000 Section Tax Lot	Tax Account	Number Acreage or Lot Size
County	Subdivision Name	Lot	Block
Property Address: Patricia A	nn Lane	Gearhart City	OR 97138 State Zip Code
Directions to Property:Fro	om Warrenton go So. on Hwy	101 to Gearhart Loop Rd ar	d turn right. Go to
Palasides entrance (Sea Bre	eeze Blvd) and turn right on O	cean Ave veer right on Pati	ricia Ann. 2nd lot on left
1 diasides entrance (eea bit			
	C. Existing Facility / Propo		
Existing Facility:	Proposed Facility Single Family	-	ater Supply: _{Public} Gearhart
☐ Single Family Residence	✓ Single Family 3	Residence	Name
Number of Bedrooms	Number of Bedro	oms	Private
Other	Other		Well, Spring, Shared
	D. Tune	of Application	
		of Auditeation	
☐ Site Evaluation ☐ Construction Permit ☐ Repair Permit ☐ Major ☐ Minor ☐ Alteration Permit ☐ Major ☐ Minor	Renewal Permit Existing System Evaluatio Permit Transfer Permit Reinstatement	Authorization Connecting to a Replacing a Mo or House	n Existing System Not in Use bile Home or House with Another Mobile Home FOne or More Bedrooms nip sing
Construction Permit Repair Permit Major Minor Alteration Permit Major Minor If the required fee and attachme	☐ Renewal Permit ☐ Existing System Evaluatio ☐ Permit Transfer ☐ Permit Reinstatement	Authorization Connecting to a Replacing a Mo or House The Addition of Personal Hards Temporary Hou Other - Please solication, it will be returned to	n Existing System Not in Use bile Home or House with Another Mobile Home FOne or More Bedrooms nip sing
Construction Permit Repair Permit Major Minor Alteration Permit Major Minor If the required fee and attachme with your name and address at the sum of the	Renewal Permit Existing System Evaluatio Permit Transfer Permit Reinstatement ents are not included with this application and the entrance to the property. Flag	Authorization Connecting to a Replacing a Mo or House The Addition of Personal Hardsl Temporary Hou Other - Please standards and number the test holes.	n Existing System Not in Use bile Home or House with Another Mobile Home Cone or More Bedrooms hip sing Specify you as incomplete. Post a flag or sign Department of Environmental Quality
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SECTION 1 - TO BE FILLED OUT BY APPLICANT (may be filled in electronically using Tab key to move to each field)

1.	Applicant Name/Property Owner: Dan & Carolyn Allen NORTH COAST BRANCH (
	Mailing Address: PO Box 465 City: Welches State: OR Zip: 97067
	State. St. Zip. 07007
2.	Property Information:
	County: Clatsop Tax Lot Number: 1000
	Township: 6N Range: 10W Section: 4AA
	Property Address: Patricia Ann Lane Block: Lot: Subdivision Name (if applicable):
	Duck Duck Subdivision Name (it 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
	Other changes in land use involving potential sever now increases
SE	CTION 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: R - Zoning Minimum Parcel Size: 10000
7	Is a public notice and bearing required? TVes Hearing Date:
<i>,</i> •	Is a public notice and hearing required?
8.	Does the proposed facility comply with all applicable local land use requirements: Yes No
	Comments:
a	Planning Official Signature:
7.	Print Name: D. T. M. (A/ALL) Sitle:A
	Telephone No.: 738-5501 Date: 2-9-09
*	Planning Official Signature: Title:
	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



Receipt Number: 138403

FEB 0 9 2009

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

NORTH COAST BRANCH OFFICE

Date Received 2/9/2009

Received From Daniel Allen

(Check Name): 9611 NE Sunderland Road Portland, OR 97211

For **T06N R10W S04 AA** Property TaxLot 1000 At: Clatsop County Patricia Ann Lane Gearhart, OR 97138 The Palisades

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Check # Money Order #

Purchase Order #

Bank Number

Amount Applied

1,010.00 Check

Amount Paid

Payment Type

4244

24-680

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

Application Description

Application ID: 408141

Application Type: Construction-Installation Permit

Single Family Dwelling

gallons/day

System Type: Pressure Distribution

Pump Evaluation: No

Flow: **450**

Receipt Amount: \$1,010.00

Payments

Previous Payments:

0.00

Current Payment:

1,010.00

Over Payment:

0.00

Total Payments:

\$1,010.00

Date of Entry:

Vicky Schiele

Receipted By:

2/9/2009



Department of Environmental Quality

North Coast Branch Office 65 N Highway 101, Suite G Warrenton, OR 97146 (503) 861-3280 FAX (503) 861-3259

February 4, 2009

Dan & Carolyn Allen P.O. Box 465 Welches, OR 97067

IMPORTANT DOCUMENT – PLEASE READ CAREFULLY -This is not a construction permit-

RE:

Site Evaluation Results - Site Approval With Conditions

Township/Range/Section: T6N, R10W, S4AA; Tax Lot No. 1000, Clatsop County

Onsite No.: 407192

Dear Dan & Carolyn Allen:

The above-described property was evaluated for suitability of onsite sewage disposal on the following date(s): February 4, 2009. Based on this evaluation, the following onsite wastewater treatment systems are approved:

Initial system:

Low-Pressure Distribution Seepage Bed, 600 square feet

Replacement system:

Low-Pressure Distribution Seepage Bed, 600 square feet

NOTE: A site development plan accompanied by physical staking of both the initial and replacement disposal areas located within the area approved for onsite sewage disposal will be required for review and approval prior to issuance of a construction/installation permit. Details of the site evaluation are included in the Site Evaluation Report that is enclosed.

Next Step - Applying for a Construction/Installation Permit

When you are ready to proceed with system construction, contact this office to get a permit application package. The permit must be issued by DEQ before you can start construction.

Request for Site Evaluation Report Review or Request for Variance

If you believe that an error was made in the evaluation of your property, you may apply for a Site Evaluation Report Review within 60 days of the site evaluation report issue date at a cost of \$460. If you would like to apply for a Variance from one or more of the Onsite Wastewater Treatment System 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.

Best wishes on a successful project. If you have any other questions about this report, please feel free to call me at (503) 861-3280.

Sincerely.

Connie M. Schrandt

Natural Resource Specialist

Enc:

Site Evaluation Report

cc:

George Owen, 89647 Manion Dr., Warrenton, OR 97146



Site Evaluation Report For Onsite Wastewater Treatment System Suitability

Site Location: T6N, R10W, S4AA; Tax Lot No. 1000, Clatsop County

Applicant: George Owen

Application No.: 408056 Onsite No.: 407192 Date(s) of Site Evaluation: February 4, 2009 DEQ Onsite Specialist: Connie M. Schrandt

Date of Report: February 4, 2009

General Description of Site Evaluations

Sewage contains disease-causing organisms and other pollutants that can cause adverse impacts to human health and the environment. An onsite wastewater treatment system must treat and dispose of sewage in a way that will not cause a public health hazard, contaminate drinking water supplies, or pollute public waters.

Proper functioning of an onsite system begins with primary treatment in the septic tank. The septic tank separates the solid particles in sewage from the liquid. The liquid that comes out of the septic tank is called effluent. The effluent may then be dispersed in the soil for further treatment or discharged into a secondary treatment device such as a sand filter or aerobic treatment unit prior to dispersal in the soil. For proper treatment, the effluent must slowly infiltrate into the underlying soil. Dissolved wastes and bacteria in the effluent are trapped or adsorbed to soil particles or decomposed by microorganisms. This process removes disease-causing organisms, organic matter, and most nutrients. Effluent that comes to the ground surface (through poor soils or other problems with the system) can be a possible health hazard because it may still contain some disease-causing organisms. Soil that drains too quickly may not give the effluent enough treatment and may result in groundwater contamination.

The purpose of the evaluation was to locate suitable soils in an area that is large enough for both the initial and the replacement disposal areas. The criteria used for this site evaluation can be found in Oregon Administrative Rules (OAR) 340-071.

Soil test pits and other site features were evaluated during the site visit on February 4, 2009. In the site inspection, the following features were evaluated:

- Soil types how well they drain and other evidence of good soil structure for treatment
- Depth to groundwater
- Wells located on the site or adjacent sites.
- Slopes, escarpments, ground surface variations, topography
- Creeks or springs on the site or adjacent properties
- Whether the soils have been disturbed
- Setbacks from property lines, buildings, water lines, and other utilities
- Other site features that could affect the placement of the onsite system.



Approved Systems

Based on the evaluation of the site and soil conditions, the following onsite wastewater treatment systems are approved:

Initial System: System Type: Low-Pressure Distribution Seepage Bed

Minimum Septic Tank Capacity: 1000 gallons Minimum Dosing Tank Size: 500 gallons Distribution Method: Low Pressure

Bottom Area of Seepage Bed: 600 square feet Bed Depths: Maximum - 36" and Minimum - 18"

Replacement System: Same as for Initial System.

IMPORTANT: A site development plan accompanied by physical staking of both the initial and replacement disposal areas within the area approved for onsite sewage disposal will be required for review and approval prior to issuance of a construction/installation permit. The plan and stakeout must demonstrate that there is adequate area to accommodate both initial and replacement disposal areas and that all required setbacks (to property lines, underground utilities, building foundations, surface waters, potential man-made cuts resulting from house placement and construction, etc.) can be maintained.

Attached are the Field Worksheet and Plot Plan, which show the approved area and other details of the site evaluation.

Site Limitations

Most sites have some limitations that will affect either the location of the onsite sewage system or the type of system that can be allowed. The following describes the limitations found at this site.

Clatsop Plains Geographic Area Special Considerations

Rule Requirement: OAR 340-071-0400(5)(b)(C)

<u>Description</u>: For properties within the area generally known as the Clatsop Plains of less than one acre in size, the approved onsite system shall be either a sand filter system or a pressurized distribution system with a design sewage flow not to exceed 450 gallons per day.

<u>Site Condition(s) Observed</u>: The subject tax lot is less than one acre in size.

Setbacks from property lines, building foundations, water lines and underground utilities Rule requirement: Table 1, OAR 340-071 Minimum Separation Distances Conditions observed: The size and configuration of the subject property relative to development plans and maintaining required setbacks are such that only low-pressure distribution seepage bed or bottomless sand filter systems will be considered.



Additional Conditions of Site Approval

- 1. This site is approved for the type of onsite system described above. Peak sewage flow into the system is limited to a maximum of 450 gallons per day, with an average sewage flow of not more than approximately half of the peak sewage flow. This is normally sufficient to serve a single family dwelling with up to four bedrooms. Premature failure of the treatment system may occur if either of these flow limits is exceeded.
- 2. Any alteration of natural soil conditions (i.e. cutting or filling) in the acceptable area may void this approval.
- 3. Both the initial and replacement disposal areas are to be protected from traffic, cover, development or other potential disturbance of natural soil conditions.
- 4. The area must not be subjected to excessive saturation due to, but not limited to, artificial drainage of ground surfaces, roads, driveways and building down spouts.
- 5. This approval is given on the basis that the property described above will not be further partitioned or subdivided.

This site approval is valid until the system approved above is constructed in accordance with a DEQ construction permit. Technical rule changes shall not invalidate this approval, but may require use of a different kind of system. If there is a technical rule change affecting this site approval, the Department will attempt to notify in writing the current property owner as identified by the county assessor's records. The site approval runs with the land and will automatically benefit subsequent owners.

Attachment: Field Worksheet and Plot Plan



EVALUATION FIELD WORKSHEET Township: 6 N Range: 10 W Tax Reference: 1000 Parcel Size: 041 acces Section: 4AA Owner/Applicant: Aller 1 Doven Schraadt Evaluator: Conni Inspection Date(s): 2-4-09 408056 Application Number: SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION. DEPTH TEXTURE ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC... 2 clouff 3.66 Pit 1 wilmis 0-2 2-64 Pit 2 Pit 3 Pit 4 Landscape Notes: Stanilized Rual - Convex linear tou Slope: - 16-121/ M + SW Groundwater Type: Aspect:____ Other Site Notes: SYSTEM SPECIFICATIONS Design Flow: 450 gpd Initial System: Alt you green Listophon Googa ATT Treatment Standard: linear feet/square feet Maximum Depth: 36 inches Minimum Depth: 18 inches Disposal Facility: Replacement System: Same as Initial cilden ATT Treatment Standard: inches Minimum Depth: linear feet/square feet Maximum Depth:___ inches Disposal Facility: Special Conditions: Maintain all Setback distances required in Table 1

Owner/Applicant: HUNDOWEN	Evaluator: Connie Schrandt
Inspection Date(s): 2-4-09	Application Number: 408056
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	· Patricia Am Lane
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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

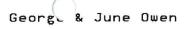
PT. UF ENVIRONMENTAL QUALI	For DEQ Use Only:
RECEIVED	Fee Paid 485
30	Receipt Number
JAN 15 2009	Application Number_
07111 1 9 2003	Date of 1st Response
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NORTH COAST BRANCH OFFICE WARRENTON

For DEQ Use Only:
Date Received 1/15/09
Fee Paid 4850
Receipt Number
Application Number 408 056
Date of 1st Response 2-4-09
Date of 2nd Response
Date of Final Response
Date of Completion 2-4-09
Scanned Data Entry

	A. Property Ov	vner Information	等。[3] 特别的 [4] 经经济	
Dan & Carolyn Allen	an & Carolyn Allen PO Box 465 Welches, OR 97		503-493-6164	
Name	Mailing Address (Street or PO Box, C			
	B. Legal Prop	erty Description		
6N 10W Township Range Clatsop	AAA 1000 Section Tax Lot	Tax Account Number	.41 Acres ccount Number Acreage or Lot Size	
County	Subdivision Name Lot Block			
Property Address: Patricia Address		Gearhart City	City State Zip Code	
Directions to Property:	From Warrenton go South on Hwy	101 to Gearhart Loop Rd and turn	right. Go to	
Palisades entrance (Sea	Breeze Blvd) and turn right on Oce	an Ave, go past junction w/Patricia	a Lane, 2nd lot on rt.	
	C. Existing Facility / Propose	ed Facility / Water Information	APANA GANANA	
Existing Facility:	Proposed Facility:	Water Supp	5 5	
☐ Single Family Residence ☐ Single Family Residence ☐ Public ☐ Gearhart			Gearhart Name	
	3		Name	
Other	Well Spring Shared			
	D. Type of	Application		
Site Evaluation Construction Permit Repair Permit Major Minor Alteration Permit Minor	D. Type of Renewal Permit Existing System Evaluation Permit Transfer Permit Reinstatement	Authorization Notice fo	System Not in Use or House with Another Mobile Home	
Construction Permit Repair Permit Najor Minor Alteration Permit Major Minor	Renewal Permit Existing System Evaluation Permit Transfer	Authorization Notice fo Connecting to an Existing S Replacing a Mobile Home of or House The Addition of One or Mo Personal Hardship Temporary Housing Other - Please Specify cation, it will be returned to you as ince	System Not in Use or House with Another Mobile Home ore Bedrooms	
Construction Permit Repair Permit Major Minor Alteration Permit Major Minor If the required fee and attach with your name and address By my signature, I certify th	Renewal Permit Existing System Evaluation Permit Transfer Permit Reinstatement ments are not included with this applicat the entrance to the property. Flag at the information I have furnished is commission to enter onto the above description.	Authorization Notice fo Connecting to an Existing S Replacing a Mobile Home of or House The Addition of One or Mo Personal Hardship Temporary Housing Other - Please Specify cation, it will be returned to you as incomed number the test holes.	System Not in Use or House with Another Mobile Home ore Bedrooms complete. Post a flag or sign ent of Environmental Quality	
Construction Permit Repair Permit Major Minor Alteration Permit Major Minor If the required fee and attack with your name and address By my signature, I certify the and it's authorized agents por	Renewal Permit Existing System Evaluation Permit Transfer Permit Reinstatement ments are not included with this applicate the entrance to the property. Flag a set the information I have furnished is commission to enter onto the above described.	Authorization Notice for Connecting to an Existing S Replacing a Mobile Home of or House The Addition of One or Mo Personal Hardship Temporary Housing Other – Please Specify Cation, it will be returned to you as incomed number the test holes. Correct, and hereby grant the Department ibed property for the sole purpose of the Sole purpose of the Sole Please Sole Pl	System Not in Use or House with Another Mobile Home ore Bedrooms complete. Post a flag or sign ent of Environmental Quality	
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Construction Permit Repair Permit Najor Minor Alteration Permit Major Minor If the required fee and attack with your name and address By my signature, I certify the and it's authorized agents permit with a signature of the si	Renewal Permit Existing System Evaluation Permit Transfer Permit Reinstatement ments are not included with this applicat the entrance to the property. Flag at the information I have furnished is commission to enter onto the above description.	Authorization Notice for Connecting to an Existing S Replacing a Mobile Home of Or House The Addition of One or Mo Personal Hardship Temporary Housing Other – Please Specify Cation, it will be returned to you as incomed number the test holes. Correct, and hereby grant the Department ibed property for the sole purpose of the	System Not in Use or House with Another Mobile Home ore Bedrooms complete. Post a flag or sign ent of Environmental Quality this application.	

Installer's Name





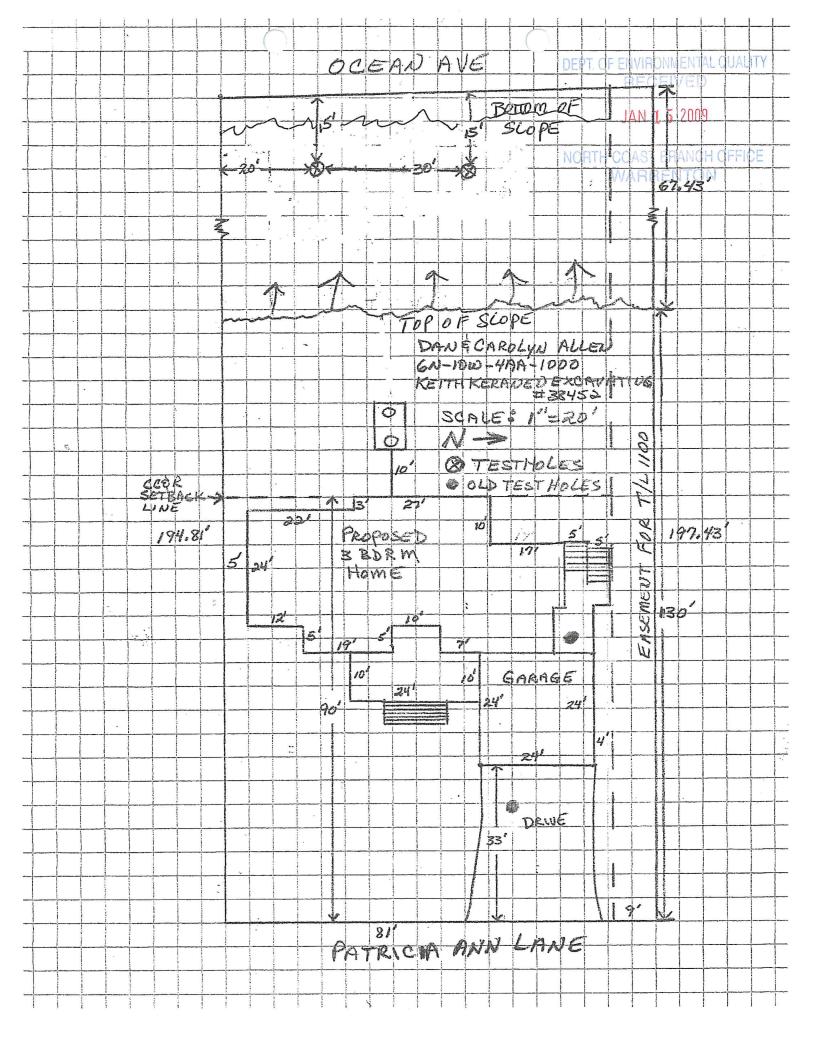
Department of Environmental Quality North Coast Office 65 N. Highway 101, Suite G Warrenton, OR 97146 Telephone: (503) 861-3280 Fax: (503) 861-3259 DEPT: OF ENVIRONMENTAL QUALITY
RECEIVED

JAN 1 5 2009

NORTH COAST BRANCH OFFICE WARRENTON

NOTICE AUTHORIZING REPRESENTATIVE

1, DAN ALLED	, have authorized
(Authorized Representative/ Print Name) (Authorized Representative/ Print Name) the activities necessary to obtain site evaluations, permits, and	act as my agent in performing
(Authorized Representative/ Print Name)	act as my agent in periorining
the activities necessary to obtain site evaluations, permits, and treatment program services provided by the Department of En	a other offsite wastewater
property described below in accordance with OAR chapter 34	0. division 071. I agree that any
costs not satisfied by the Authorized Representative are my re	esponsibility.
PROPERTY IDENTIFICATION:	
Property Situs or Road Address	S
And described in the records of CLATSOP County as	s:
Township 6 N Range 10 D Section 4AA Map ID	Tax Lot #(s)
Township Range Section Map ID	Tax Lot #(s)
PROPERTY OWNER:	
Printed Name: DAN ALLEN	
Signature: 006000	Date: _//13/09
Address: P.O. Box 465	Phone: <u>503 - 493 -616</u> 4
City, State, Zip: WELCHES, OR 97067	Fax:
E-mail Address: DAN e SWANTZMS. COM	
ALITHODIZED DEDDECENTATIVE.	
AUTHORIZED REPRESENTATIVE:	
Printed Name: 1 GEORGE M. QUED	
Signature: Livinge (wen)	Date: 1/12/09
Address: 89647 MANION DR	Phone: 503-7/7-2477
City, State, Zip: WARREWTOD, OR 97146	Fax: 503-717-8681
E-mail Address:	





JAN 1 5 2009



Receipt Number: 136178

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

NORTH COAST BRANCH OFFICE WARRENTON

Date Received 1/15/2009

Received From Daniel Allen

Amount Paid

485.00

(Check Name): 9611 NE Sunderland Road Portland, OR 97211

For **T06N R10W S04 AA** Property TaxLot 1000 At: Clatsop County Patricia Ann Lane Gearhart, OR 97138 The Palisades

24-680

Current Payment

Check # Money Order #

Payment Type Purchase Order # Check 4232

Bank Number Amount Applied

485.00

Total Amount Applied:

\$485.00

Onsite Fees

Base Fee:

425.00

Surcharge Fee:

60.00

Plan Review Flow Fee:

Pump Evaluation Fee:

Flow Fee:

Reinspection Fee:

Total Fee:

\$485.00

Payments

Previous Payments:

0.00

Current Payment:

485.00

Over Payment:

0.00

Total Payments:

\$485.00

Application Description

Application ID: 408056

Application Type: New Site Evaluation

Single Family Dwelling

System Type: Unknown

Pump Evaluation: No

Flow: 450

gallons/day

Receipt Amount:

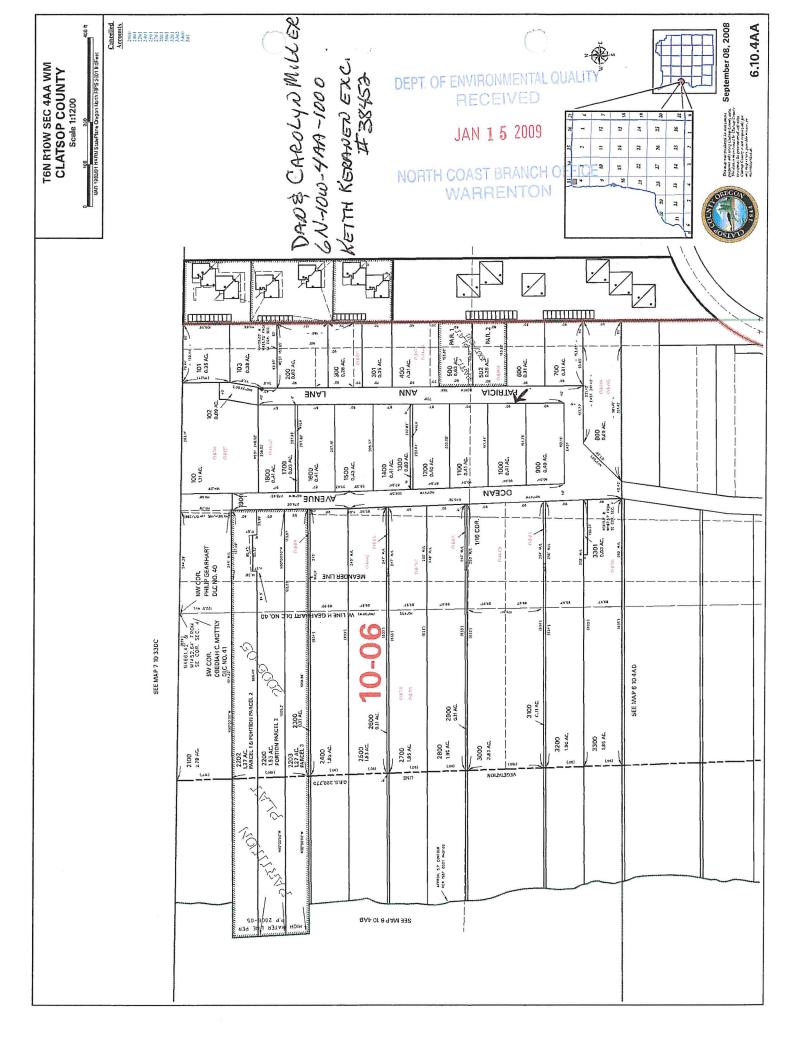
\$485.00

Receipted By:

Date of Entry:

Vicky Schiele

1/15/2009





Department of Environmental Quality

North Coast Branch Office 65 N Highway 101, Suite G Warrenton, OR 97146 (503) 861-3280 FAX (503) 861-3259

October 3, 2008

Stephen Thompson P.O. Box 999 Sisters, OR 97759

IMPORTANT DOCUMENT – PLEASE READ CAREFULLY -This is not a construction permit-

RE:

Site Evaluation Results - Site Approval With Conditions

Township/Range/Section: T6N, R10W, S4AA; Tax Lot No. 1000, Clatsop County

Onsite No.: 406804

Dear Stephen Thompson:

The above-described property was evaluated for suitability of onsite sewage disposal on the following date(s): October 2, 2008. Based on this evaluation, the following onsite wastewater treatment systems are approved:

Initial system:

Bottomless Sand Filter

Replacement system:

Bottomless Sand Filter

NOTE: A site development plan accompanied by physical staking of both the initial and replacement disposal areas located within the area approved for onsite sewage disposal will be required for review and approval prior to issuance of a construction/installation permit. Details of the site evaluation are included in the Site Evaluation Report that is enclosed.

Next Step - Applying for a Construction/Installation Permit

When you are ready to proceed with system construction, contact this office to get a permit application package. The permit must be issued by DEQ before you can start construction.

Request for Site Evaluation Report Review or Request for Variance

If you believe that an error was made in the evaluation of your property, you may apply for a Site Evaluation Report Review within 60 days of the site evaluation report issue date at a cost of \$460. If you would like to apply for a Variance from one or more of the Onsite Wastewater Treatment System 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.

Best wishes on a successful project. If you have any other questions about this report, please feel free to call me at (503) 861-3280

Sincere1y,

Connie M. Schrandt

Natural Resource Specialist

Enc:

Site Evaluation Report



Site Evaluation Report For Onsite Wastewater Treatment System Suitability

Site Location: T6N, R10W, S4AA; Tax Lot No. 1000, Clatsop County

Applicant: Stephen Thompson

Application No.: 407657 Onsite No.: 406804

Date(s) of Site Evaluation: October 2, 2008 DEQ Onsite Specialist: Connie M. Schrandt

Date of Report: October 3, 2008

General Description of Site Evaluations

Sewage contains disease-causing organisms and other pollutants that can cause adverse impacts to human health and the environment. An onsite wastewater treatment system must treat and dispose of sewage in a way that will not cause a public health hazard, contaminate drinking water supplies, or pollute public waters.

Proper functioning of an onsite system begins with primary treatment in the septic tank. The septic tank separates the solid particles in sewage from the liquid. The liquid that comes out of the septic tank is called effluent. The effluent may then be dispersed in the soil for further treatment or discharged into a secondary treatment device such as a sand filter or aerobic treatment unit prior to dispersal in the soil. For proper treatment, the effluent must slowly infiltrate into the underlying soil. Dissolved wastes and bacteria in the effluent are trapped or adsorbed to soil particles or decomposed by microorganisms. This process removes disease-causing organisms, organic matter, and most nutrients. Effluent that comes to the ground surface (through poor soils or other problems with the system) can be a possible health hazard because it may still contain some disease-causing organisms. Soil that drains too quickly may not give the effluent enough treatment and may result in groundwater contamination.

The purpose of the evaluation was to locate suitable soils in an area that is large enough for both the initial and the replacement disposal areas. The criteria used for this site evaluation can be found in Oregon Administrative Rules (OAR) 340-071.

Soil test pits and other site features were evaluated during the site visit on October 2, 2008. In the site inspection, the following features were evaluated:

- Soil types how well they drain and other evidence of good soil structure for treatment
- Depth to groundwater

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- Wells located on the site or adjacent lites.
- Slopes, escarpments, ground surface variations, topography
- Creeks or springs on the site or adjacent properties
- Whether the soils have been disturbed
- Setbacks from property lines, buildings, water lines, and other utilities
- Other site features that could affect the placement of the onsite system.



Approved Systems

Based on the evaluation of the site and soil conditions, the following onsite wastewater treatment systems are approved:

Initial System: System Type: Bottomless Sand Filter

Minimum Septic Tank Size: 1000 gallons Minimum Dosing Tank Size: 500 gallons Distribution Method: Low Pressure

Bottom Area of Sand Filter: 360 square feet

Maximum Depth: 36 inches

Replacement System: Same as for Initial System.

IMPORTANT: A site development plan accompanied by physical staking of the initial and replacement sand filter systems in the area approved for onsite sewage disposal will be required for review and approval prior to issuance of a construction/installation permit. The plan and stakeout must demonstrate that there is adequate area to accommodate both initial and replacement disposal areas associated with the approved systems and that all required setbacks (to property lines, underground utilities, building foundations, surface waters, potential man-made cuts resulting from house placement and construction, etc.) can be maintained.

The initial and replacement sand filters must be separated either by 10 feet of undisturbed ground or by a concrete wall installed as a common side of each sand filter. An engineered concrete wall is recommended.

Attached are the Field Worksheet and Plot Plan, which show the approved area and other details of the site evaluation.

Site Limitations

Most sites have some limitations that will affect either the location of the onsite sewage system or the type of system that can be allowed. The following describes the limitations found at this site.

Clatsop Plains Special Considerations

Rule Requirement: OAR 340-071-0400(5)

<u>Description</u>: For properties within the area generally known as the Clatsop Plains and of less than one acre, the approved onsite system shall be either a sand filter system or a pressurized distribution system with a design sewage flow not to exceed 450 gallons per day.

<u>Conditions observed</u>: The subject property is less than one acre in size.

Setbacks from property lines, building foundations, water lines and underground utilities Rule requirement: Table 1, OAR 346-771

<u>Description:</u> The required property line setback allows construction of the system without trespass or damage to neighboring properties. The setbacks to foundations and man-made cuts in excess of 30 inches (from top of down-slope cut) prevent too much liquid from causing the soil under the building to settle and potentially damage the building. The water line setback is required because sewage will travel as far as 10 feet, and does contain some disease-causing



bacteria and viruses. If there were to be a leak in the water line, the drinking water supply could be contaminated. The setback from other underground utilities is required for sanitary reasons during utility line maintenance, and because the effluent will tend to flow along the utility trench rather than stay in the natural soil where it can be treated.

<u>Site Conditions Observed:</u> The area available for onsite sewage disposal is not sufficient to accommodate other alternative low-pressure distribution systems and maintain required setbacks. Less area is required for bottomless sand filter systems.

Additional Conditions of Site Approval

- 1. This site is approved for the type of disposal system described above. Peak sewage flow into the system is limited to a maximum of 450 gallons per day, with an average sewage flow of not more than approximately half of the peak sewage flow. This is normally sufficient to serve a single family dwelling with a maximum of four (4) bedrooms. Premature failure of the treatment system may occur if either of these flow limits are exceeded.
- 2. Any alteration of natural soil conditions (i.e. cutting or filling) in the acceptable area may void this approval.
- 3. Both the initial and replacement disposal areas are to be protected from traffic, cover, development or other potential disturbance of natural soil conditions.
- 4. The area must not be subjected to excessive saturation due to, but not limited to, artificial drainage of ground surfaces, roads, driveways and building down spouts.
- 5. This approval is given on the basis that the property described above will not be further partitioned or subdivided.

This site approval is valid until the system approved above is constructed in accordance with a DEQ construction permit. Technical rule changes shall not invalidate this approval, but may require use of a different kind of system. If there is a technical rule change affecting this site approval, the Department will attempt to notify in writing the current property owner as identified by the county assessor's records. The site approval runs with the land and will automatically benefit subsequent owners.

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Attachment: Field Worksheet and Plot Plan



Fownsl	nip:_ <i>&N</i>	Range: 104	Section: 4AA Tax Reference: 1000 Parcel Size: 0.41 acre
Owner/	'Applicant:	1. hampson	Evaluator: OMS
nspect	ion Date(s):	10-2-0	8 Application Number: 407657
	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC
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andso	ane Notes	tabilized	dune - hillocky cleared those pros & beach grass
			spect: Valiable - SIW Groundwater Type: No evidence
	Site Notes:		
			SYSTEM SPECIFICATIONS
Design	Flow: 450	gpd	STSTEM SPECIFICATIONS
nitial	System: A\-	t. Bolton	ess Sand Filter ATT Treatment Standard:
)ispos	al Facility:	<u>360</u> 1	near feet/square feet Maximum Depth: 36 inches Minimum Depth: inches
Replac	ement System	: Same as	nitial system ATT Treatment Standard:
-			inear feet/square feet Maximum Depth: inches Minimum Depth: inches
pecia	1 8		all setback distances - initial & replacement
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<u> / </u>		5 . 3 .	nitial & replacement Sand filter oneas required for
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Township:	Range: 101	Section: 4A)	Tax Reference:	Parcel Size	2 P.41 acre
Owner/Applicant:	Thompson		Evaluator:	V. Sign	
*	<u> 10-2-08</u>			407657	
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DEQ

State of Oregon Department of Environmental Quality

Application for Ons 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

DEPT. OF ENVIRONMENTAL QUALITY FRECEIVED

SEP 17 2008

NORTH COAST BRANCH OFFICE WARRENTON

or DEQ Use Only: Oute Received 9/17/08
ce Paid 4850
Receipt Number
Application Number 40105
Date of 1st Response /0-2-68
Date of 2nd Response
Date of Final Response
Date of Completion 10-3-08
Scanned Data Entry

A. Property Owner Information
Stocken Thompson P.O. Box 999 Sisters OR 541 480 011)
Name / Mailing Address (Street or PO Box, City, State, Zip Code) 971759 Phone Number
B. Legal Property Description
GN 10W 4AA 1000 8385 0.41 acre
Township Range Section Tax Lot Tax Account Number Acreage or Lot Size
County Subdivision Name Lot Block
Property Address: State Property Address: Address A
Novem 101 + Guld Corner Rd (Roth) Right into
Directions to Property.
Pahsades Rt on Ocean Ave Rt outo Patricia Hun Lh
C. Existing Facility / Proposed Facility / Water Information
Existing Facility: Proposed Facility: Water Supply: Public City of Geachart Single Family Pecidence
Single Family Residence Single Family Residence Public Cty of Oca (Nat)
Number of Bedrooms
Other Other Well, Spring, Shared
D. Type of Application
Site Evaluation
Construction Permit Existing System Evaluation Repair Permit Permit Transfer Connecting to an Existing System Not in Use Replacing a Mobile Home or House with Another Mobile Home
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.
9-4-08
Signature Date Date Date Date Com Con Com
Applicant's Name - Please Print Legibly Applicant's Name - Please Print Legibly Applicant's Phone Number Applicant's E-mail Address
DO BOX 999 Septen OR 97759
Applicant's Mailing Address
Applicant is the Owner Authorized Representative Licensed Septic Installer
Authorization Attached
Rev 8-14-03 bix Notice: Lots 1000 and 1100 reversed in DEO records.



Department of Environmental Quality Warrenton Office 65 N. Highway 101, Ste. G, Warrenton, OR 97146 (503) 861-3280/(503) 861-3259(Fax)

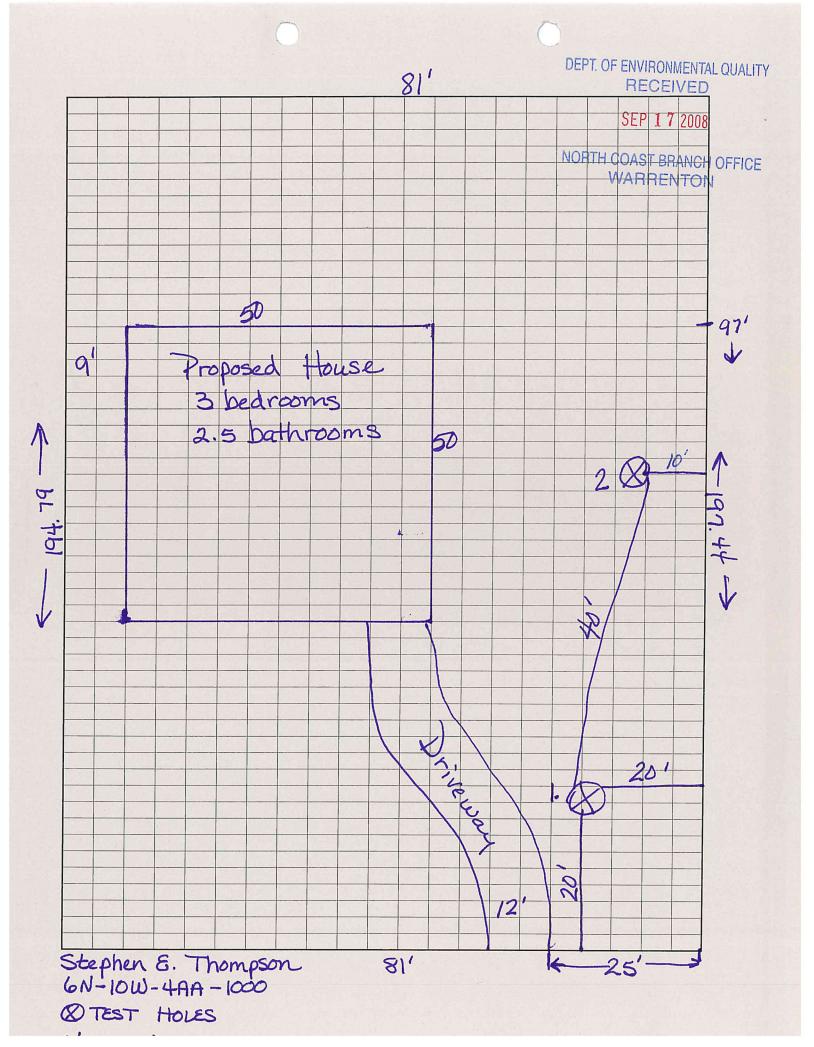
DEPT. OF ENVIRONMENTAL QUALITY RECEIVED

SEP 17 2008

NORTH COAST BRANCH OFFICE
WARRENTON

NOTICE AUTHORIZING REPRESENTATIVE , have authorized Property Owner/Print Name) to act as my agent in performing (Authorized Representative/ Print Name) the activities necessary to obtain site evaluations, permits, and other onsite wastewater treatment program services provided by the Department of Environmental Quality on the property described below in accordance with OAR chapter 340, division 071. I agree that any costs not satisfied by the Authorized Representative are my responsibility. PROPERTY IDENTIFICATION: 000 And described in the records of On County as 000 Range_/O Township Section 4 Map ID Tax Lot #(s) Township Section Range Map ID Tax Lot #(s) **PROPERTY OWNER:** Printed Name: Signature: Date: Address: Phone: City, State, Zip Fax: E-mail Address **AUTHORIZED REPRESENTATIVE:** Printed Name: Signature: A Date: Address: 600 City, State, Zip

E-mail Address dea



DEPT. OF ENVIRONMENTAL QUALITY RECEIVED



Receipt Number: 136118

SEP 17 2008

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

NORTH COAST BRANCH OFFICE WARRENTON Date Received 9/17/2008

Received From Stephen Thompson Jr (Check Name): PO Box 999 Sisters, OR 97759

For **T06N R10W S04 AA**

Property TaxLot 1000 At: Clatsop County

Patricia Ann Lane Gearhart, OR 97138 The Palisades

Current Payment

Check #

Money Order #

Purchase Order #

Bank Number

Amount Applied

485.00 Check

Amount Paid

Payment Type

1327

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25-80

485.00

Total Amount Applied:

Application Description

Single Family Dwelling

\$485.00

Onsite Fees

Base Fee:

425.00

Surcharge Fee:

60.00

Plan Review Flow Fee:

Pump Evaluation Fee:

Flow Fee:

Reinspection Fee:

Total Fee:

\$485.00

System Type: Unknown

Pump Evaluation: No

Flow: **450**

Application ID: 407657

Application Type: New Site Evaluation

gallons/day

Payments

Previous Payments:

0.00

Current Payment:

485.00

Over Payment:

0.00

Total Payments:

\$485.00

Receipt Amount:

\$485.00

Receipted By:

Vicky Schiele

9/17/2008

Date of Entry:

