33	771
Contr	ol No.

PERMIT NO.	93-97	- 6

\$ 85.00 DEPA	RTMENT OF	ENVIRONME	NTAL QUALI	TY	NO. 30 ST	,
New Construction	XX Repa	_{ir} Minor	Other			
Permit Issued To Wade Gustafson (Property Owner's Name) Off Lewis & Clark (Logan) Rd (Road Location) (City)	. Astoria	(Township)	9W 7DD Range) (Sect		Lat / Acct. No.)	
ALL WORK TO CONFOR SHALL BE DONE BY PF (MAKE NO CHANGES IN	RM TO OREG ROPERTY OWN LOCATION O	IER OR BY LIC	RATIVE RULE CENSED SEW/ TIONS WITHO	AGE DISPOS	SAL SERVICE.	
EXPIRATION DATE <u>July 09, 19</u>	994	TYP	E OF SYSTEM	Tank rep	olacement on	ıly
Average Daily Sewage Flow Gallons/Day New Concrete	y	Desi	gn Peak Sewage	Flow	Gallons/Day	
	al Trenches	Seep	age Bed(s) □		Square Fe	eet
Maximum Depth inches.	Minimum Depth _	inc	hes.	_	Linear Fe	eet
Equal Loop Serial	Pressurized	Minimum Dis	tance Between T	renches	-	-
Total Rock Depth inches. Beld	ow Pipe	_ inches. Ab	ove Pipe	inches.	☐ Rake Sidewall	
Special Conditions (Follow Attached Plot Plateristing steel septic tank. If						
surface is needed. PRE-COVER INSPECTION REQUIRED — CO CERTIFICATE				MPLET	ION	
As-Built Drawing with Reference Locations						
Installer Bill Hughes Excavation		See As-Bui submitted				
Final Insp. Date						
□ Inspected By						
☐ Issued by Operation of Law						
Pre-cover inspection waived pursuant to OAR 340, Division 71						
In accordance with Oregon Revised Statute sewage disposal system at the location identi Issuance of this Certificate does not constitution without failure.	fied above.				•	
as iminaro.					and the same of th	
(Authorized Signature)	(Title)	4		(Date)	(Office)	

STATE OF OREGON DEPT. OF ENVIRONMENTAL QUALITY RESERVED

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(SANITARIAN SIGNATURE)

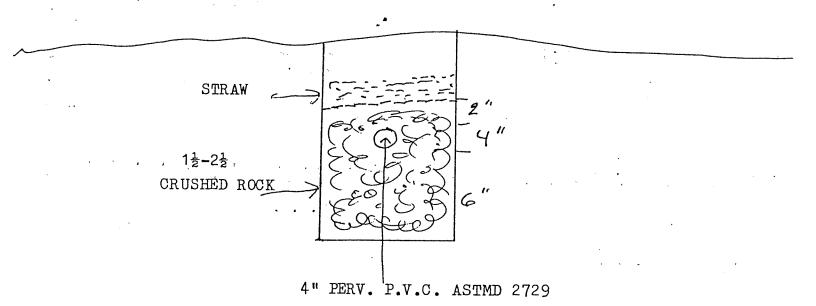
(DATE)

☐ Disapproved

MATERIAL SPECIFICATIONS:

SOLID & PERFORATED ASTM D 2729 P.V.C.

HEAVY DUTY P.V.C. 3034 SEWER ASTM F 789
DROP BOXES & DISTRIBUTION BOXES SUPPLIED BY D.& K. CONCRETE



DEPARTMENT OF ENVIRONMENTAL QUALITY EXISTING SYSTEM EVALUATION REPORT

•		
Existing On-Site Sewage Disposal System	System Components:	Current Owner:
	Septic Tank 900 gallon steel	Home Equity Corporation
x Installed before 1974	Dosing Tankn/a	Home Equity Corporation
Installed after 1974	Pump n/a	c/o Dave Dickson Realty
x Standard System 1971	Drainfield: Lineal Fect150	2737 Marine Drive
Other	Effective Sidewall 300	Astoria, Oregon 97103
	7 North, Range 9 West, Sectark Road at Route 3, Box 337-W	ion, Tax Lot
and a description and a gift	ion Report acknowledges the sewa	unbiant a second
21, 1004	, to serve the existing three (ow of up to 375 gallons per d	2) 1 - 3 1
Sketch of On	-Site Sewage Disposal System &	Scale: none
Submit cop	of pumping of perfices	Approved Dewey Paralo
Further A.	Land Bren Dol	Je level porte steel in tont
Further Brank	v de scale	googal tront steel in the steel

900 gallon steel sentic tank on the south side of the home distributes effluent to three (3) 50 ft. disposal trenches in the landscaped area west of the home. Only part of the "drainfield" could be located with a probe due to the extensive landscaping. Flouroscein dye was introduced into the system and did not surface. I recommend that the new owners have the septic tank pumped shortly after they move in, and every four years thereafter.

Note: 1. The DEQ considers this sewage disposal system adequate to serve a maximum daily sewage flow up to the amount indicated only.

2. This notice does not guarantee satisfactory or continuous operation of the sewage disposal system identified.

And Smit R.S. May 23, 1984
Sanitarian Date

DEQ - Astoria Branch, Clatsop County

STATE OF ORLGON DEPARTMENT OF ENVIRONMENTAL QUALITY NORTH COAST OFFICE 749 Commercial, P.O. Box 869 Astoria, Oregon 97103 325-8660 or 1-800-452-4011

Phone 325 4089



FOR OFFICE USE ONLY
Date Rec'd 7-7-93
Date Completed 7-9-43
Required Fee 75.00
Receipt No. 5753/
Control No. 3377/

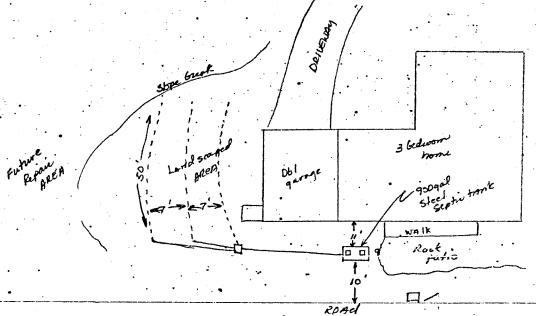
IW\WC8\WC8690 (7-19-91)

				-
FOR APPLICANT'S USE - (PLEA	SE PRINT)	.7	5ac	
Winde Gustafson		Lot Size Mary Flit	(Acreage or Dimensions)	Manager 1
(Property Owner's Na	V	plicant's Name	if Different from Owner)	
Legal Description (Tow		*//) /\ \	- a - 7 - a - 2200 - 12 - 1/a	S
for Parcels in Platted		つつへう	_	,
Subdivisions, Indicate (S	ubdivision Name)	(Lot Number	r) (Block Number)	*
Proposed Facility	•		Water Supply	
(A) Single Family Residence	(Number of Bedroom	[U Pub]	lic (Community System)	
[] Other(Specify)		/ [] 111	(Indicate: Well, Spr	Inc. Pres.
			valuate, well, Spt.	rug, Ecc.)
Existing Facility	'n			
[Single Family Residence	, <u> </u>			
	(Number of Bedroom	ns)		
[] Other				
(Specify)				
	APPLICATION FO			
[] Site Evaluation Report [] Permit to Construct On- [] Permit to Repair On-Sit [] Permit for Alteration o [] Permit Renewal [] Existing System Report [] Plan Review [] Other (Specify) Tand	of On-Site Sewage Disposal S	al System System Isposal System	Neplace or rebuild a Addition of one or mo Personal hardship Temporary housing Other (Specify)	ng system e ome with ouse house ore bedroom
This application will be re propriate fee and attachmen cording to instructions in By my signature. I certify the Department of Environme above described property fo	that the information	before action on I have furni	can be taken on this applished is correct, and here	
Mary Ellen Susta (Signature)	afson .	7-7-93 D	Authorized Representati Licensed Installer License No.	
Owner's Mailing Addr Brany Ellen Bu Rt 3 Box 337	strifson	Applicant's Mai	lling Address (if differen	<u>.t)</u>
Astoria, OR 9	7103	<i>U</i>		

Phone _

ENVIRONMENTAL

Existing On-Site Sewage	System Components:	Current Owner:
Disposal System	Septic Tank 900 gallon steel	Home Equity Corporation
x Installed before 1974	Dosing Tankn/a	Home Edutty Corporation
Installed after 1974	Pump n/a	c/o Dave Dickson Realty
x Standard System 1971	Drainfield: Lineal Feet150	2737 Marine Drive
Other	Effective Sidewall 300	Astoria, Oregon 97103
Location: Off Lewis and Cl	7 North, Range 9 West, Sect	
Mocation: Off Lewis and Cl This Existing System Evaluate property described above appropriate the control of th	ark Road at Route 3, Box 337-W tion Report acknowledges the sewa- pears adequate by x Field Inspe	ge system located on the
Mocation: Off Lewis and Clarification: Off Lewis and Clarification System Evaluate property described above approached on May 21, 1984 having a projected sewage file.	ark Road at Route 3, Box 337-W	ge system located on the ction/ Record Review, B) bedroom home



Description of System:

900 gallon steel septic tank on the south side of the home distributes effluent to three (3) 50 ft. disposal trenches in the landscaped area west of the home. Only part of the "drainfield" could be located with a probe due to the extensive landscaping. Flouroscein dye was introduced into the system and did not surface. I recommend that the new owners have the septic tank pumped shortly after they move in, and every four years thereafter.

- 1. The DEQ considers this sewage disposal system adequate to serve a maximum daily sewage flow up to the amount indicated only.
 - 2. This notice does not guarantee satisfactory or continuous operation of the sewage disposal system identified.

and Smit RS	May 23, 1984	DEO - Astoria Branch,	Clatsop County
Sanitarian	Date	••	•

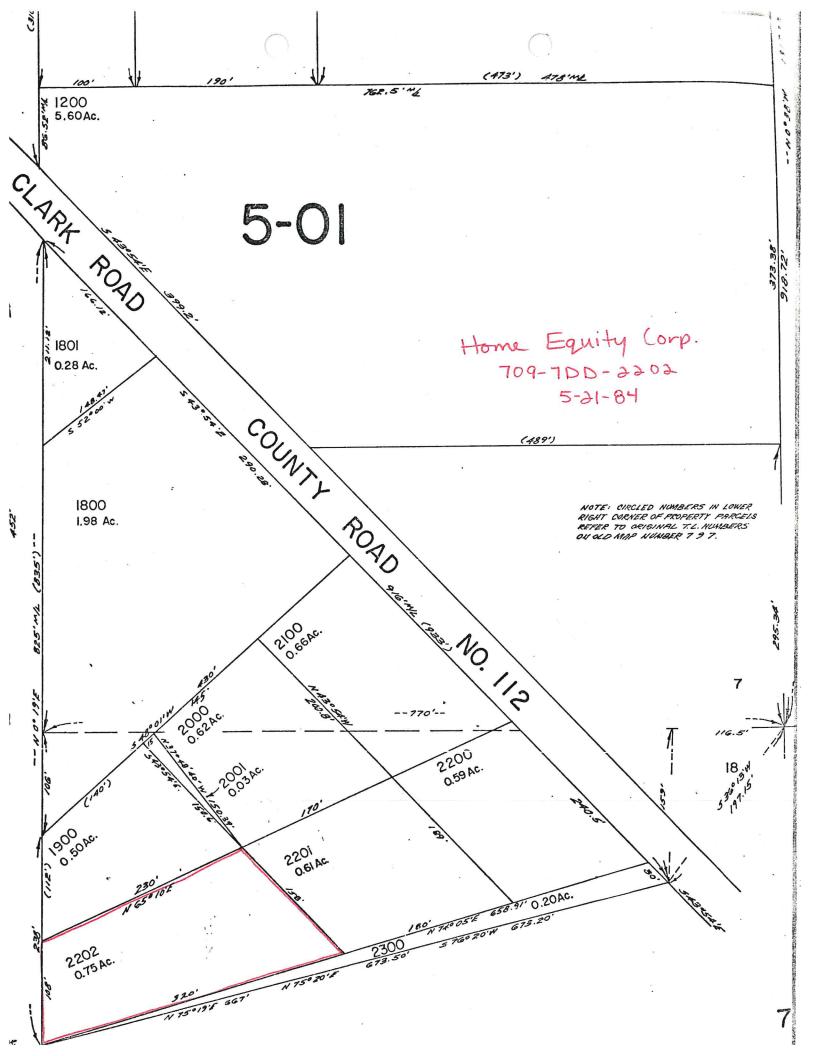
FOR OFFICE USE ONLY

STATE OF OREGON Department of Environmental Quality

FOR	OFFICE	USE	ONLY

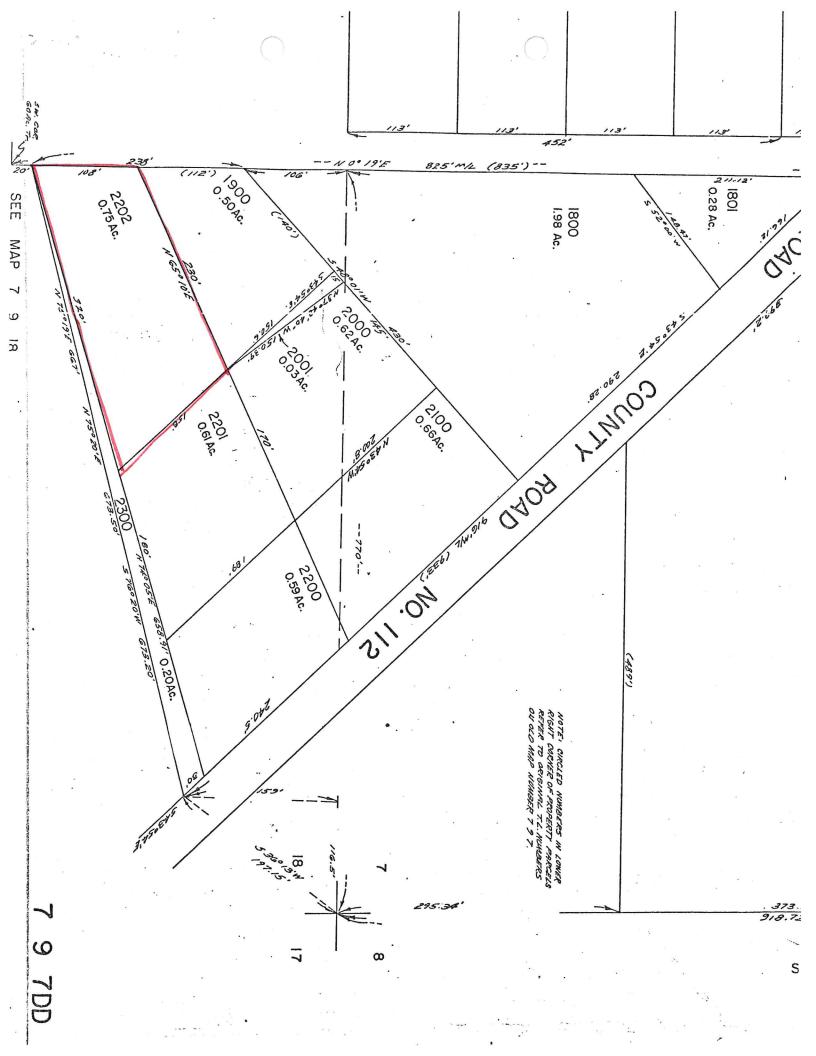
Date Rec'd. Date Completed. Date Test Holes Ready Required Fee _ Receipt No. 27279 Control No. _ APPLICATION FOR: ☐ Site Evaluation Report ☐ Permit to Construct On-Site Sewage Disposal System ☐ Permit to Repair On-Site Sewage Disposal System ☐ Permit for Alteration of On-Site Sewage Disposal System ☐ Permit Renewal ☐ Authorization Notice Other (Specify) Existing System Eval. (Required fee and land use compatibility statement must accompany application) FOR OFFICE USE ONLY: ☑ NO PLOT PLAN REQUIRED ☑ NO ATTACHED □ YES VICINITY OR TAX LOT MAP REQUIRED

✓ YES □ NO ATTACHED ☑ YES □ NO TEST HOLES REQUIRED 🗆 YES ✓ NO LAND USE COMPATIBILITY STATEMENT □ YES ON 🖸 ☑ NO ATTACHED □ YES ADDITIONAL ITEM(S) REQUIRED FOR APPLICANT'S USE — (Please Print) (Private Water Supply, Specify Type) Single Family Residence ___ Directions to Property: About 1/2 mile south of Tucker Creek Road Tunction with Lewis 1 Clark ROAD. TULK Right off Ste. Rono carguavel ROAD Last Yellow house at Endof Rompon Lett side By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agent permission to enter onto the above described property for the purpose of this application. 5-21-84 Authorized Representative (Signature) DAVIDS. DICKSUU S.D.S. License No. Owner's Mailing Address Applicant's Mailing Address (if different) DAVEDICKSON Real to 737 MARINO DLIVE Staria, OLIGOH. 97/03 Phone 325-7653



APPLICATION FOR BUILDING PERMIT

	R BUILDING PERMIT	PLOT PLAN										With the second							manufacture and the second and the s				Мар No.	St. No. Assigned	Field Check by	Date		PLANNING AND ZONING	Type of Occupancy	Total Floor Area	No. Stories Total Height		Front Yard Setback	Side Yard Sethack	Yard	New Const.	Change of Occupancy From 64 MINUTO
	APPLICATION FOR	Date Issued		Fee (1)		(+) 50% 1, 11, 11	(—) 50% V, J	Plan Checking Fee	TOTAL < 7 Men	TIONE		OF SAME STATE OF SAME SAME STATE OF SAME SAME SAME SAME SAME SAME STATE OF SAME SAME SAME SAME SAME SAME SAME SAME	Rough	Finish	Fixtures	Motors	Final	IATION	a County Road is necessary, an Approach	Permit, obtainable from the Clatsop County Road De-	Courthouse will be	-1 .		The second secon						•				'	' '		
	ċ	1		Basic Fee	7	200			197	- 2	- 1	-	Rough	Septic Tank	Sewer	Gas	Finish	SPECIAL INFORMATION	County Road is n	lable from the Clat	partment Office, Clatsop County required before starting construction			Show the state of the second						APPROVED: COUNTY SANITARIAN		***************************************		APPROVED: COUNTY PLANNING COMM.	***************************************		APPROVED: BUILDING OFFICIAL By
	Ride Desmit No	No Allinon Boro		Valuation S		Area—1st Floor	Area—2nd Floor	Additional Area	Area—Type V J		BUILDING	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Foundation	Frame	- Plaster	Flues	Final	<u> </u>	If access to a	Permit, obtain	partment Office, required before st.			\ \ 	MARTIN METAL STATE OF THE STATE					APPROVED: C		Ву.		- APPROVED: C	By		APPROVED: B
001 -1-01	79× 60+		OF WORK	Demolish	Repair	Move		Height	No. of Families	Size of Lot	Use of Bidg.	Now on Lot	SPECIFICATIONS	FOUNDATION	Exterior Piers				Spacing Span									COVERING	Roof	Reroofing	FLUES	Fl. Furnace	Water Heater	liO	I have read this application correct and agree to comply and State laws regulating		
FINAL DEBACK	DETANIMENI DUNTY, OREGON		SFASS	New	Alteration	Addition	Use of Building	Size of Building	No. of Rooms	No. of Floors	No. of Bldgs.	Now on Lot	SPECIF	FOUN	Material	Width of Top	Width of Bottom	Depth in Ground	R. W. Plate Size	Girders	Joist-1st Floor	Joist-2nd Floor	Joist—Ceiling	Exterior Studs	Interior Studs	Roof Rafters	Bearing Walls	000	Exterior Walls	Interior Walls	FL	Fireplace	Kitchen	Furnace Gas	I hereby acknowledge that I have read this and state that the above is correct and agree with all County Ordinances and State laws	Dulluing construction.	Signature of Permittee
	31 March Rich McLATSOP COUNTY, OREGON		and the state of t					La Care San San	at they seek my power	Tel. No. 🖔 🔑					Tel, No.				Tel. No.	1.00			Bik.					1 6.4. J.			m: 1, 11, 111, 1V. V.		ri	2, 3, 4.	. RA	M2.	2, 3.
	W THE STATE OF THE		DDRESS A X X	, 6 table	Considered Lateral Land	SAREST		Name	Address	City (1) Company	Name	ress	3410	Sales Carlo	State Lic, No.	Name	Address	City	State Lic. No.		Subdivision	2 307 1000	Lot. No.		0 # 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		and find of hall the	J. C. C. J. C. C.			Type of Construction: [. II. III. IV. V.		supancy Group: A, B, C, D, E, F, G, H, I,	Division 1, 2,	of Zone: R1, R2, R3,	M1, M2.	Fire Zone: 1,



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A—DISPOSAL B—FOSTER I C—GROUP C D—ICE PLAN E—INDUSTRI F—INSTITUT	SITE 709-7 ARE 1300 T AL PREMISE 00 PREMISE 3 13 15	7x 3.37 E		ROPO JBLIC JBLIC CHOO UMMI WIMM	SED C PRI C W/ DL ER C	BLD EMIS ATER AMP	G. SI E SYS	TE	Yo	u	N	75		2 F	· / · /	28	-A
SAMPLES COL	LECTED DATE	RESULT	4	TEST:	S PER	RFORM	(ED		ı	DATE				RES	ULT		
COMPLAINANT	GISTERED BY			·····			ANIT			ERVIC	CE R	ECOR	D LF		REV.	10-	58
FIELD INSPECT	TON RECORD COMPLETED:		SKET	CHES	, GR.	APH,	DIAC	RAM	(SI	low	LOCA	1017	1)				
RECORD CODE	TITLE OF FORM																
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3	SCHOOL AND INSPECTION FORM			 		-	-			_				ļ	<u> </u>	 	
4	REPORT ON PROPOSED SCHOOL																
5	FOSTER HOME REPORT	SILE		-													
6	VA HOME LOAN REPORT						├──	-			 				┼		
7	STATE VET LOAN REPORT	-		ļ				<u> </u>			ļ <u> </u>	ļ <u>.</u>	<u></u>	<u> </u>			
8	FHA HOME LOAN REPORT																
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SP*42495-333

LHS-8 12-64

DATE	ENTER VERY BRIEFLY—OFFICE AND FIELD VISIT DATA, PHONE CALL DATA, TRANSCRIPT OF LETTERS	WORKER
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