

61522

Control No.

\$ 690.00

Fee

STATE OF OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY

PERMIT NO. 00-110

Permit Type: [ ] New Construction, [ ] Repair, [X] Other Major alteration

Permit Issued To: Martin Hannu, Christofer Hannu, Laura Hannu, Brenda Hannu, Sneralyn Eatherton, Daven Hannu

Location: Wadsworth Rd., Astoria; Signature: Connie M. Schrandt; Date Issued: 8-29-00

PERMITS ARE NOT TRANSFERABLE

ALL WORK TO CONFORM TO OREGON ADMINISTRATIVE RULES, CHAPTER 340. WORK SHALL BE DONE BY PROPERTY OWNER OR BY LICENSED SEWAGE DISPOSAL SERVICE.

SPECIFICATIONS

EXPIRATION DATE: AUGUST 29, 2001; TYPE OF SYSTEM: Alternative- Conventional Sand Filter with infiltrators; Tank Volume: 1500 Gallons; Design Sewage Flow: 450 Gallons/Day

Special Conditions (Follow Attached Plot Plan) Install in accordance with plans & specifications submitted 8-25-00 and 8-29-00. As-built with all notation on approved plan addressed and certification of final construction by installer along with electrical permit/pumping receipt verification required prior to pre-cover inspection request.

PRE-COVER INSPECTION REQUIRED - CONTACT NCBO -- 861-3280

CERTIFICATE OF SATISFACTORY COMPLETION

Grid area containing completion details: As-Built Drawing with Reference Locations, Installer: Robert Martens Excavation, Final Insp. Date: 10-6-00, Inspected By: Connie Schrandt, As-built & certification of final construction received 10-7-00.

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

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

Authorized Signature: Connie M. Schrandt; Title: Natural Resource Specialist; Date: 12-14-00; Office: DEQ, NCBO, WARRENTON

DEC 13 2000

WELL I.D. # L \_\_\_\_\_  
START CARD # W137802

STATE OF OREGON  
WATER SUPPLY WELL REPORT  
(as required by ORS 537.765)

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Name M.P. Hannu, et al. (Regina Hannu, agent) Well Number NORTH COAST BRANCH OFFICE LOCATION OF WELL by legal description: WARRENTON County Lat sop Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

Address 88775 Wadsworth Road  
City Astoria State OR Zip 97103

Township 7N Nor S Range 9W E or W WM  
Section 30 NW 1/4 SW1/4  
Tax Lot 301 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 88775 Wadsworth Rd  
Astoria, OR 97103

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

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well \_\_\_\_\_ ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

Casing/Liner	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Casing:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
			1 hr.

Temperature of water \_\_\_\_\_ Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done?  Yes By whom \_\_\_\_\_  
Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Depth of strata: \_\_\_\_\_

(10) STATIC WATER LEVEL:  
\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
(50 lbs) 6 bags CT60 Pure Gold			
Medium Chips Bentonite	0'	13'	
Concrete Renix	12'	17'	
TOP 3' of Casing CUT OFF (3' below surface)	17'	20'	
(Performed well abandonment pursuant to instructions from Mike McCord)			

Date started 12-2-00 Completed 12-2-00

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

(bonded) Water Well Constructor Certification:  
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  
Signed Regina Hannu WWC Number 24474872 Date 12-2-00

**AGENCY REVIEW & APPROVAL FORM**  
(STRUCTURE AND MOBILE HOME PLACEMENT)  
*Information on this form must be filled out and signed in this order*

**1. JOB SITE INFORMATION (to be filled out by applicant/owner/agent):**

Job Site Address: 88775 Wadsworth Road City: Astoria  
Owner: \_\_\_\_\_ Phone: \_\_\_\_\_  
Owners Address: \_\_\_\_\_  
Agent: Regina Hannu  
Proposed Development/Construction: Replacement home

**2. STATE DEPARTMENT OF ENVIRONMENTAL QUALITY (DEQ) (to be filled out and signed by DEQ):**

Legal Description: T 7 R 9 SEC. 30 Tax Lot (s) # 301  
Permit Needed - Yes (  ) No (  ) Site Approved - Yes (  ) No (  )  
Signature: *[Signature]* Date: 7-31-02  
Remarks: Permit 00-110

OK PER DAVE

DEQ North Coast Branch Office, 65 North Highway 101, Suite G, Warrenton, Oregon 97146 Phone: (503) 861-3280 FAX (503) 861-3259

**3. CLATSOP COUNTY PLANNING DEPARTMENT (to be filled out and signed by Planning):**

Legal Description: T 7 R 9 SEC. 30 Tax Lot (s) # 301  
Zone: AF Overlay District: \_\_\_\_\_  
Development Permit - Yes (  ) No (  ) # 02-751  
Flood Plain - Yes (  ) No (  ) Elevation Requirements: \_\_\_\_\_  
Geologic Hazard - Yes (  ) No (  ) Special Construction Requirements? - Yes (  ) No (  )  
Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_  
Remarks: REPLACEMENT DWELLING. CURRENT MH MEETS REQUIREMENTS  
OF 3.522 # 7 FOR REPLACEMENT

Clatsop County Dept. Of Planning and Development, 800 Exchange, Suite 100, Astoria, Oregon 97103 Phone: (503) 325-8611  
FAX (503) 338-3666

**4. CLATSOP COUNTY BUILDING CODES DEPARTMENT (located at Premarq Shopping Center, 2<sup>nd</sup> Floor, Clatsop County Building Codes Department, 65 N. Highway 101, Suite F, Warrenton, Oregon). Phone: (503) 861-7140 FAX (503) 861-7324.**  
Building Codes will review and issue the building permit.

DEPT. OF ENVIRONMENTAL QUALITY  
RECEIVED

OCT 7 2000

NORTH COAST BRANCH OFFICE  
WARRENTON

FINAL INSPECTION REQUEST AND NOTICE

Pursuant to the requirements within ORS 454.665, OAR 340-71-170 and OAR 340-71-175, the system installer and/or the permittee must notify the Department of Environmental Quality (or its authorized Agent) when the construction, alteration or repair of a system for which a permit was issued is completed (except for the backfilling or covering of the installation). The Department (or Agent) has 7 days to perform an inspection of the completed construction after the official notice date, unless the Department (or Agent) elects to waive the inspection and authorizes the system to be backfilled earlier. Receipt and acceptance of this completed form by the Department (or Agent) establishes the official notice date of your request for the pre-cover inspection. Please complete all four sections of the form and return it to the office that issued the permit. Forms that are determined to be incomplete will be returned.

SECTION 1: BASIC INFORMATION.

Property Owner Hannu Permit Number 00-110 County Clatsop  
Township 7N; Range 9W; Section 30; Tax Lot 301; Tax Acct. # \_\_\_\_\_  
Job Location Wadsworth Road  
Date System Construction Completed 10-6-00; Date Submitted to DEQ or Agent 10-9-00

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

See Attached

OCT 7 2000

NORTH COAST BRANCH OFFICE  
WARRENTON

← 1511 →

*Robert [Signature]*

Hanner

7N 9W S30 T2 S01

Existing steel  
Tank  
Tank  
to be decommissioned

old system

Existing  
wood shed

Existing Mobile  
to be removed

Parking  
Area

Existing  
Garage

Proposed  
New House

Concrete  
Dist. Bz

18x20  
SPRING

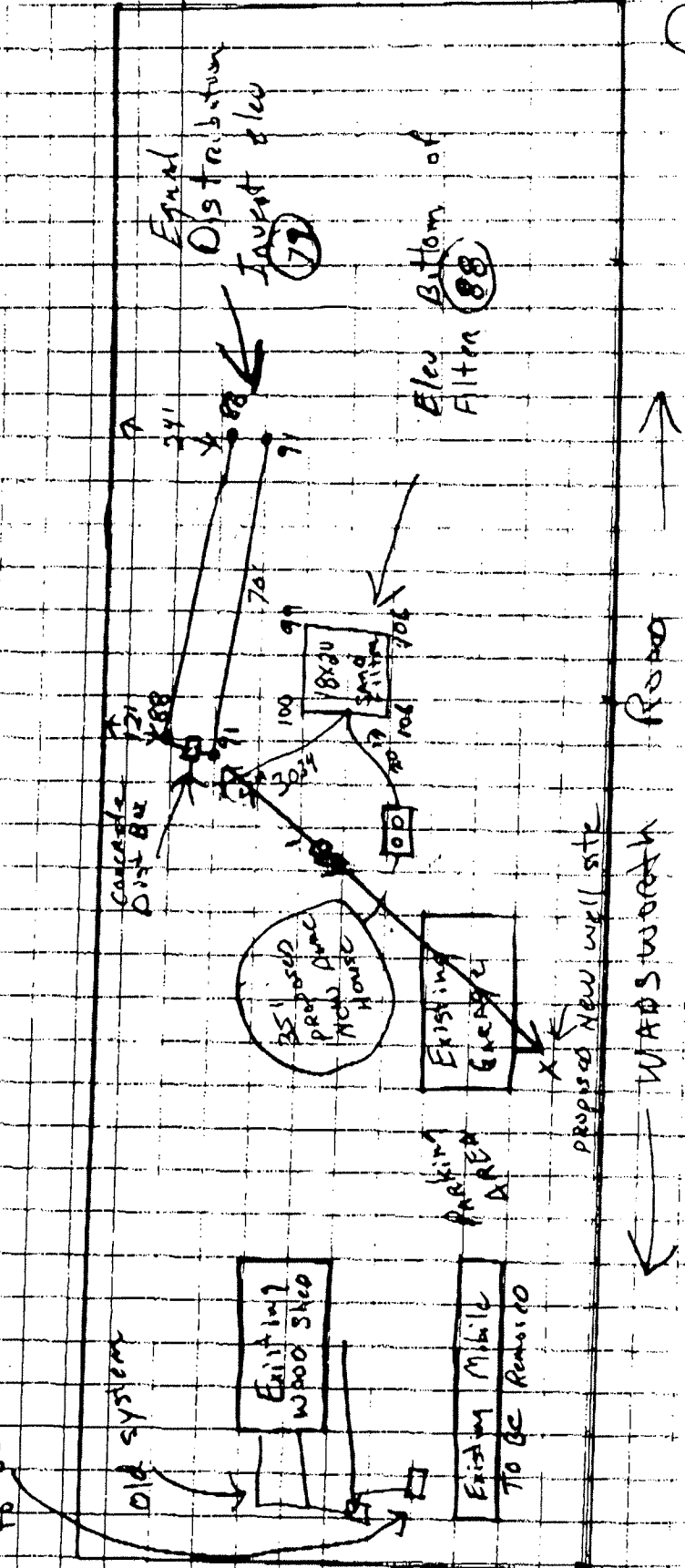
Equal  
Distribution  
Invert elev  
(77)

Elev Bottom of  
Filter (88)

ROAD

Proposed New well site

WADSWORTH ROAD



# Materials List

Hannu  
7N 9W 530 7L 301

1500 Gal Willamette Gray Stone  
Concrete septic Dosing Tank

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2 1-Ft orange Fiberglass Risers

NORTH COAST BRANCH OFFICE  
WARRENTON

63 - 3/4" orlex shields

140' 3/4" pvc sch 40 lateral piping

20' 1 1/4 manifold piping sch 40

20' 1 1/2 pvc sch 40 transport pipe

8 - 90° angle 3/4" long sweeps, for clean outs

8 - Valve Boxes (Plastic) for clean out ends

135 FT Infiltrators

4 Infiltrators End caps

30 FT 3034 4" Effluent pipe

30 yds DEQ Sand Filter Sand

8 yds Round under drain Rock

8 yds 1/2 - 1/4 clean over drain Rock

27' x 29' 30 mil liner

10 sheets 1/2" plywood

ORanco pump package with pump, floats  
control panel - w-timer, screened vault / flat solid box

50 yds clean top soil

Robt  
Mast







# Materials list

4anny  
7A 9W 530 TL301

1500 Gal Willamette Gray Stone  
Concrete septic Dosing Tank  
(2-compartment)

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2 1-Ft orange Fiberglass Risers

AUG 25 2000

63 - 3/4" orange shields

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WARRENTON

140' 3/4" pvc sch 40 lateral piping

20' 1/4" manifold piping sch 40

20' 1/2" pvc sch 40 transport pipe

8 - 90° angle 3/4" long sweeps, for clean outs

8 - Valve Boxes (Plastic) for clean out ends

135 FT Infiltrators

4 Infiltrators End caps (standard invert - no high port)

30 FT 3034 4" Effluent pipe

30 yds DEQ Sano Filter Sand

8 yds Round under drain Rock

8 yds 1/2 - 1/4 clean over drain Rock

27'x29' 30 mil liner

**APPROVED**

10 sheets 1/2" plywood

Connie M. Schrandt  
Connie M. Schrandt, W.W.S.  
Lic. No. 020760756

ORanco pump package with pump floats  
control panel - w-timer, screened vault / flat solid box

50 yds clean top soil

Robt  
Ment

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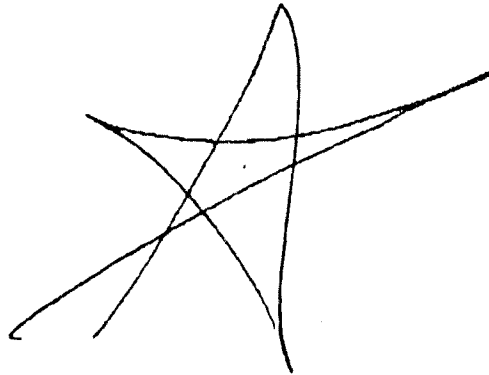
AUG 29 2000

NORTH COAST BRANCH OFFICE  
WARRENTON

	IND. WT. RETAINED	COARSE IND % RETAINED	SAND ACC % RETAINED	ACC % PASSING
#4	18.0	1.79%	1.79%	98.21%
#8	47.0	4.69%	6.48%	93.52%
#16	125.0	12.46%	18.94%	81.06%
#30	271.0	27.02%	45.96%	54.04%
#50	420.0	41.87%	87.84%	12.16%
#100	115.0	11.47%	99.30%	0.70%
#200	6.0	0.60%	99.90%	0.10%
PAN	1.0	0.10%	100.00%	0.00%
TOTAL	1003	F.M.	2.60	

This material is approved for Clackamas County, Oregon.

This has proven to be the ideal gradation for septic systems.



**APPROVED**

*Connie M Schrandt*  
 Connie M. Schrandt, W.W.S.  
 Lic. No. 0207760756  
 8/29/00

DEPT. OF ENVIRONMENTAL QUALITY  
RECEIVED

AUG 29 2000

	IND. WT. RETAINED	ASTM C-33 IND % RETAINED	ACC % RETAINED	ACC % PASSING
#4	5.0	0.67%	0.67%	99.33%
#8	18.0	2.43%	3.10%	96.90%
#16	79.0	10.65%	13.75%	86.25%
#30	222.0	29.92%	43.67%	56.33%
#50	304.0	40.97%	84.64%	15.36%
#100	106.0	14.29%	98.92%	1.08%
#200	6.0	0.81%	99.73%	0.27%
PAN	2.0	0.27%	100.00%	0.00%
	-----	-----	-----	-----
TOTAL	742	F.M.	2.45	

NORTH COAST BRANCH OFFICE  
WARRENTON

Some regions require this material for septic filter systems.

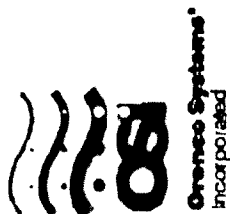
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**APPROVED**  
*Connie M. Schrandt*  
Connie M. Schrandt, W.W.S.  
Lic. No. 0207760756  
8/29/00

AUG 25 2000

NORTH COAST BRANCH OFFICE  
WARRENTON

*Robert  
Mato*

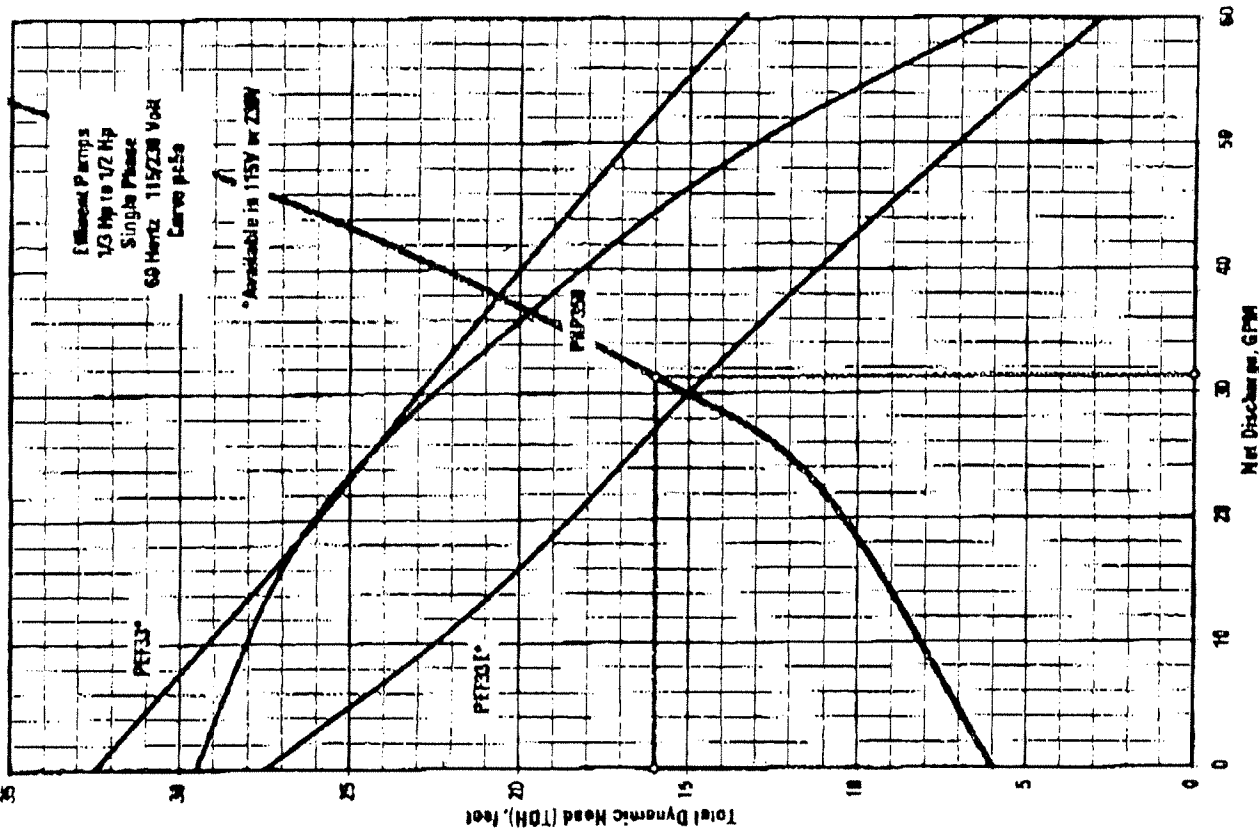


914 ALERMOY AVENUE  
SOUTH BACON, OREGON  
97479-9012

TELEPHONE:  
(503) 659-4445

FACSIMILE:  
(503) 459-2684

PROJECT: Hawaii 7A 9W 530 TL 301



Prepared for you by Robert Mato  
Pump Selection for Pressurized System  
Curve set:

Orifice Size	0.125 inches
Residual Head at Last Orifice	3.00 feet
Lateral Length	18 feet
Total Number of Laterals per Cell	8
Orifice Spacing	2.00 feet
Distributing Valve Model (# of Zones)	none
Lift to Mainfield	6 feet
Discharge Assembly Size	1.50
Transport Line Size	1.50 inches
Pipe Class/Schedule	40
Transport Length	20 feet
Mainfield Size	1.25 inches
Pipe Class/Schedule	40
Distribution Meter Length	20 feet
Lateral Size	0.75 inches
Pipe Class/Schedule	40
Row number	NONE

- Calculation:
- System Flow Rate per Orifice: 0.03 gpm
- Number of Orifices per Zone: 72
- Total Actual Flow Rate: 31.3 gpm
- Number of Lines per Zone: 8
- Total Dynamic Head:
- Lift to Mainfield: 6.0 feet
- Residual Head at Last Orifice: 5.0 feet
- Frictional Head Losses:
- Head Loss in Transport Pipe: 1.1 feet
- Head Loss through Distributing Assembly: 2.9 feet
- Head Loss in Mainfield: 0.7 feet
- Head Loss in Lateral: 0.2 feet
- Min 'Add-on' Frictional Losses: 0.0 feet
- Head Loss through Distributing Valve: 0.0 feet
- Head Loss through Flowmeters: 0.0 feet
- Head Loss through Flowmeters: 0.0 feet
- Size Pump for: 31.3 gpm
- TOTAL FLOW RATE: 31.3 gpm
- TOTAL BYPASS HEAD: 16.0 feet

**APPROVED**  
*Connie M. Schrandt*  
Connie M. Schrandt, W.W.S.  
Lic. No. 0207760756  
8/29/00

Hanny  
7N 9w 530 TL 301

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*Royt  
Mato*

**APPROVED**

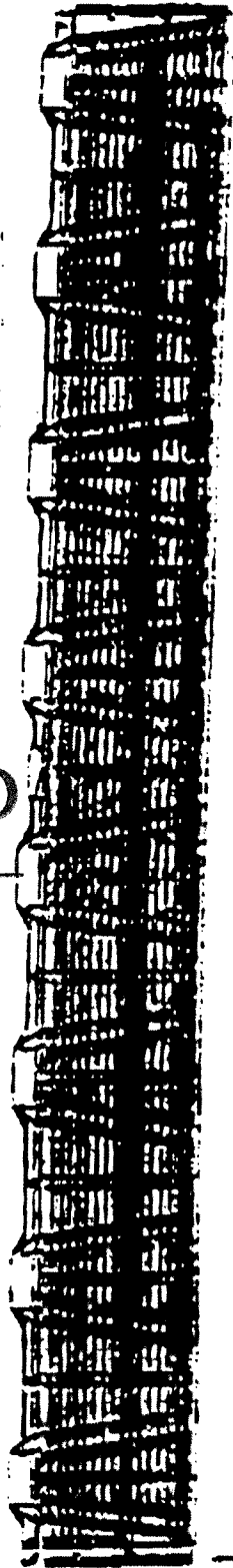
*Connie M. Schrandt*

Connie M. Schrandt, W.W.S.  
Lic. No. 0207760756

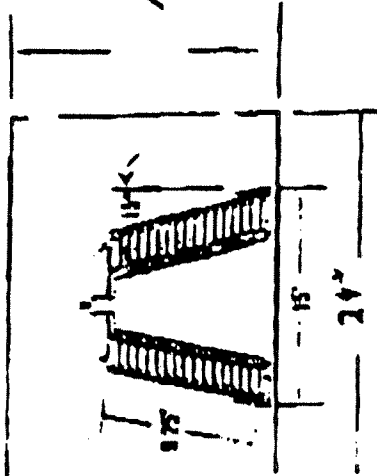
8/29/00

**INFILTRATOR  
SYSTEMS INC**

**EQUALIZER 24"**



101.25



Equalizer 24 Chamber		
Size	15' x 101.25' x 11'	
Weight	20 lbs.	
Volume	37.3 gal/4.45 M'	

DEQ APPROVED BUILDING MATERIAL LIST

DISTRIBUTION BYLER

ASTM - 4" PVC 30-34 effluent sewer line

Lin. Ft. Infiltrator chambers  
Infiltrator end plates - standard invent  
Ft. ASTM - 4" PVC 27-29 header pipe

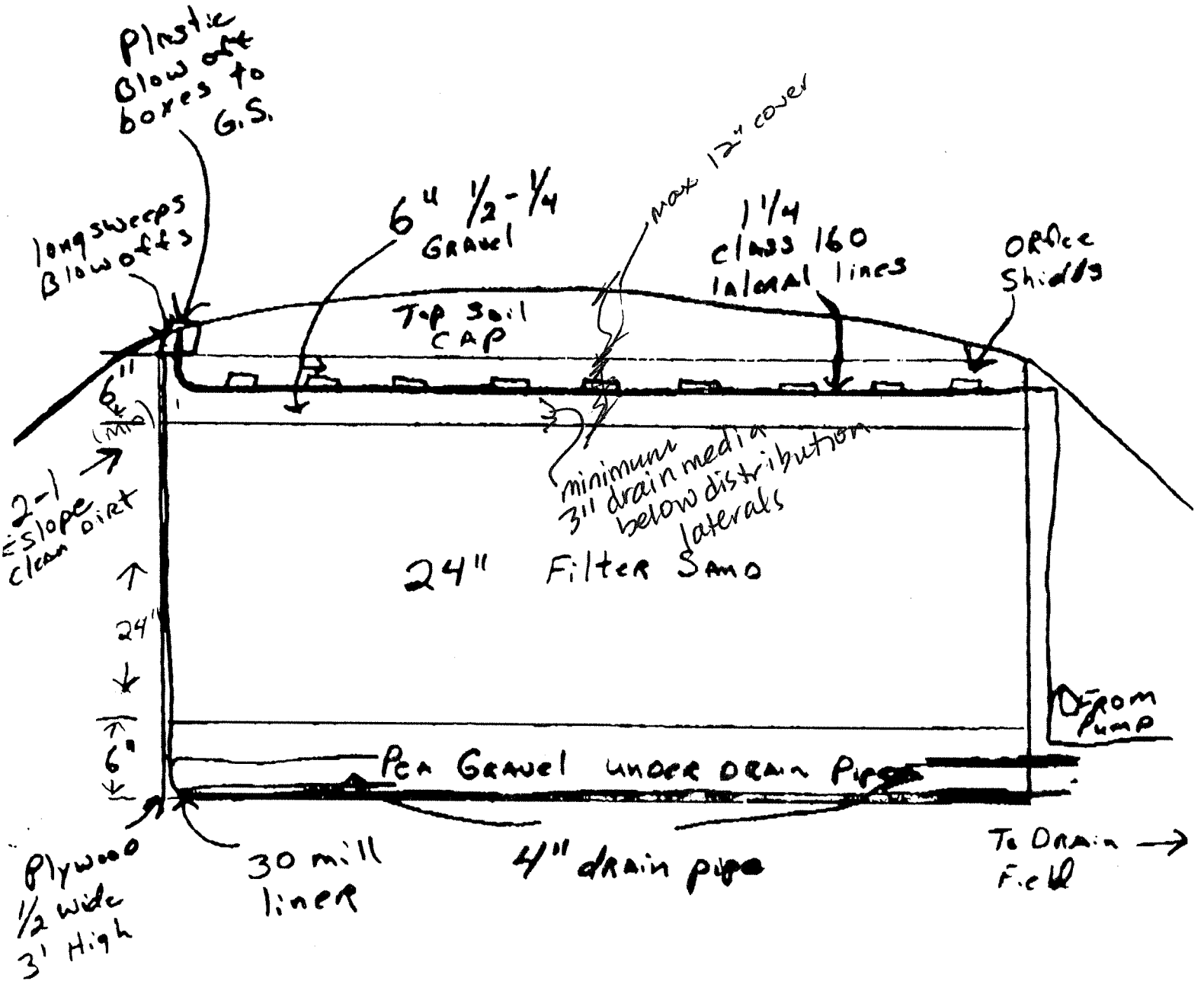
135  
47  
10

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NORTH COAST BRANCH OFFICE  
WARRENTON

Regina Hannu  
7N 9W S30 T4 301



**APPROVED**

*Connie M. Schrandt*

Connie M. Schrandt, W.W.S.  
Lic. No. 0207760756

8/24/00

ROBERT MARTEN'S EXCAVATION  
RT. 8, BOX 924-C  
ASTORIA, OR 97103

*Robert Marten*

Hanna  
7N 9W S30 TL 301



Orenco Systems  
Inc.

814 ARROY AVENUE  
SEASIDE, OREGON  
97138-9012

TELEPHONE:  
(541) 458-4449  
FACSIMILE:  
(541) 458-7884

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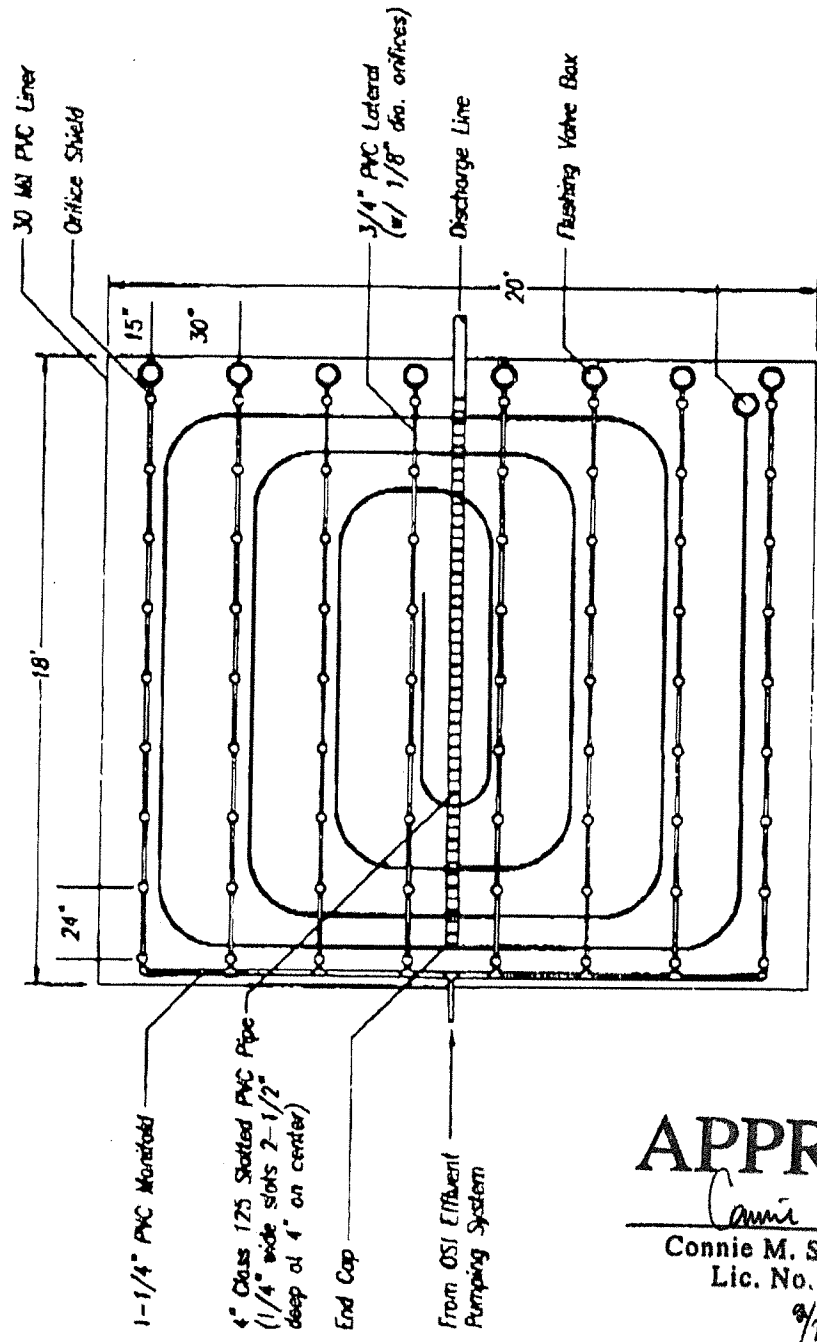
NORTH COAST BRANCH OFFICE  
WARRENTON

*Redt*  
*Mads*

EDW-ISF-2018L-1  
Rev. 1.0 (2/98)

# 20'x18' Intermittent Sand Filter with Gravity Discharge

# Configured for loading rates up to 1.25 GPD/FT.<sup>2</sup> Follow appropriate international and filter design criteria.



TOP VIEW - 20'X18' GRAVITY DISCHARGE SAND FILTER  
SCALE: 1" = 1'-0"

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

**APPROVED**  
*Connie M. Schrandt*  
Connie M. Schrandt, W.W.S.  
Lic. No. 0207760756  
8/29/00

Patent / 5,360,556  
© 1998 Orenco Systems, Inc.

**Department of Environmental Quality**  
**Northwest Region, Warrenton Office**  
65 N. Highway 101, Suite G  
Warrenton, OR 97146  
(503) 861-3280/(503) 861-3259(FAX)

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DEPARTMENT OF  
ENVIRONMENTAL  
QUALITY

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June 14, 2000

Regina Hannu  
88775 Wadsworth Road  
Astoria, OR 97103

Re: Major Alteration en Route to  
Authorization Notice  
T7N-R9W-S30; TL# 301  
Clatsop County

Dear Regina:

In response to your application for a permit to alter the existing on-site sewage disposal system on the above-described property, site visits and test pit evaluations were made on May 25 and June 6, 2000, to determine the suitability for an on-site sewage disposal system that complies with the State of Oregon On-Site Sewage Disposal Rules.

Test pit evaluations revealed a soil column of silt loam underlain with poorly-drained silty clay loam and silty clay. The property cannot be approved for a standard system due to both soil and site conditions. Specifically, the setback of 100 feet required between the sewage disposal facility and the well location proposed for the property limits the area available to accommodate the total length of disposal trench dictated by the soil conditions observed. However, the site has been found suitable for an alternative conventional sand filter system followed by 135 linear feet of disposal trenches designed in equal distribution.

The area in the vicinity of the west test pit and indicated on the enclosed plot plan as 'acceptable area' is approved for the replacement drainfield. System requirements are as follows:

- A 1000 gallon DEQ-approved septic tank and a 500 gallon dosing tank (or a DEQ-approved 1500 gallon 2-compartment dosing/septic tank) equipped with risers to ground surface and sealed for water-tightness.
- A sand filter with a minimum bottom area of 360 square feet.
- A minimum of 135 linear feet of disposal trenches.
- Maximum trench depth of 21 inches and minimum trench depth of 18 inches.



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

DEQ-1





- If drainfield media is used, filter fabric meeting Oregon Administrative Rule 340-73-041 to cover the drainfield media-top only.

The replacement sand filter and drainfield must maintain a minimum setback of 50 feet from both the proposed well and the existing well on the property. Proper abandonment of the existing well is recommended but not required by the Department as long as the 50-foot setback can be maintained. The existing septic tank must be decommissioned in accordance with OAR 340-071-0185 and a copy of the pumping receipt submitted to the North Coast Branch Office (NCBO). Also, the replacement drainfield must be protected from vehicular traffic, livestock, further development or other potential disturbance of natural soil conditions.

The system would have the capacity to serve a single family dwelling with no more than 4 bedrooms. Peak daily sewage flow into the system is limited to 450 gallons, with an average daily sewage flow of not more than approximately 225 gallons. Premature system failure may occur if either flow limit is exceeded. In order to prolong the life of the filter, the dosing septic tank should be pumped out every four or five years depending on usage and number of persons occupying the home. Periodic maintenance such as cleaning the pump screen and flushing the distribution laterals can also help to sustain proper system performance.

An alteration permit must be obtained from the Warrenton Office prior to installation of the system. To obtain this permit, the following items must be submitted:

1. A detailed plot plan drawn to scale and list of materials to be used. The plot plan must include at least the property lines, house foundation lines, driveway, septic tank, dosing tank, sand filter area and the replacement drainfield.
2. Detailed plans and specifications for the sand filter, including hydraulic calculations for the pressurized distribution system.
3. A current sieve analysis of the medium sand to be used.

Please refer to the enclosed field worksheet and revised plot plan for assistance in plan preparation. The replacement drainfield must be protected from vehicular traffic, livestock, further development or other potential disturbance of natural soil conditions. Any person other than the property owner must be licensed by the DEQ to construct/install an on-site sewage treatment and disposal system.

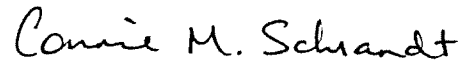
After a pre-cover inspection has been performed on the replacement system and found to comply with installation requirements specified in the permit, a certificate of satisfactory completion (CSC) will be issued along with a favorable authorization notice. No work can take place on the septic system until an alteration permit has been secured.

This approval is given on the basis that the parcels described above will not be further partitioned or subdivided and that conditions on subject or adjacent properties have not been altered in any manner which would prohibit issuance of a permit in accordance with Oregon Revised Statutes (OPRS) 454.605 through 454.755 and OAR 340-071. Any such subdivision, partitioning or alteration may void this report.

Hannu – Major Alteration en Route to Authorization Notice  
June 14, 2000  
Page 3 of 3

If you have any questions or would like further information, you are welcome to contact me at the NCBO, (503) 861-3280.

Sincerely,



Connie M. Schrandt  
Natural Resource Specialist  
Northwest Region, Water Quality

cc: Robert Martens Excavation, 92861 Walluski Loop Rd., Astoria , OR 97103  
Field Worksheet w/Plan

SITE EVALUATION FIELD WORKSHEET

Tax Reference T7N R9W S 30 TL# 301 Clatsop Co Evaluator CMS  
 Applicant Regina Hanna Date 5/25/00 & 6/16/00 Parcel Size .84 acres

Depth (inches)	Texture	Soil Matrix Color and (Mottling), % Coarse Fragments, Roots, Structure, Layer Limiting Effective Soil Depth, etc.	
Pit 1 0-15	sil	10YR 3/1; 1 SBK; common f & r roots to 24" +	1
1 15-24	sic	10YR 4/1 with common, coarse 10YR 4/6 & 2.5Y 3/6 depletions; 1 SBK	1
1 24-40	sic	10YR 5/6 with variegated reds, yellow, grays - massive sediment parent material standing water at 29" bgs	1
Pit 2 0-11	}	similar to test pit #1 0-15" & 15-24"	2
2 11-21			2
Pit 3			3
3			3
3			3
3			3

Landscape Notes Wooded area in river floodplain  
 Slope Approx 1-2% Aspect W-NW Groundwater Type Temporary  
 Other Site Notes: Drainfield(s) to be <sup>50'</sup>100' from any ground water or year-round surface water. Septic tank to be 50' from any ground water or surface water.

SYSTEM SPECIFICATIONS

360 Sq.Ft. basal area sandfilter or 20'X 18' Container w/liner & drainfield

Type System: Conventional Sandfilter with 30 ml (PVC) Liner and absorption/drainfield  
 Design Flow 450 gpd.  
 Septic Tank Size: 1000 gallons Dosing tank Size: 500 gallons (minimum)  
 Sandfilter Size: 360 Sq.Ft. Bottom Surface Area or 18 X 20 container.  
 Drainfield:  
 Initial NA Distribution System Sizing NA /150g. Min. NA Max. NA Disposal Trench Depth.  
 Replacement equal Distribution System Sizing 45 /150g. Min. 18" Max. 21" Disposal Trench Depth.  
 Note: • Watertight manhole risers required on septic and dosing tanks.  
 • DEQ approved dosing septic tanks may also be acceptable - discuss with inspector.

Special Conditions: A detailed site development plan of proposed system construction (in area of approved test holes) is required with system construction permit application. The plan must include the minimum information in the attached sandfilter system plan development guideline. Locate the proposed system placement as it relates to existing or proposed structures, wells, waterways, roads, and parking. We recommend a licensed sewage disposal business familiar with this type of work prepare plans and do eventual installation after DEQ construction permit issuance. Please call 503-861-3280 if you have questions. Honor all required setbacks; Drainfield area to be kept free of cover, traffic, development or other potential disturbance of natural soil conditions. Future replacement area is limited

## WELL ABANDONMENT SCHEDULE

Before this office can grant an approval for Subsurface Sewage Disposal and/or authorize any construction permits on this property, it will be necessary that the well be properly and duly abandoned to State of Oregon Department of Water Resources Standards. Given the type of well which exists, it is imperative that the following procedures be adhered to:

### DUG WELLS:

- (a) Contact the Oregon Department of Water Resources in Salem, Telephone No. 378-8128 and request an inspection of the well by the State in order to determine what specific abandonment methods and procedures are necessary. No work or alteration to the well should be done prior to the inspection by the State.
- (b) Perform the abandonment of the well according to the instructions from the State. If the work is performed by you, as the property owner, it is necessary to arrange for a representative of the Water Resources Department to be present during the abandonment process.
- (c) Where the work is performed by a licensed water well contractor, remittance of a copy of the contractor's well log will be considered satisfactory evidence of well abandonment. Where the work is performed by the property owner, written verification and approval is necessary from the Department of Water Resources.

### DRILLED OR DRIVEN WELLS:

- (a) The work is required to be done by a licensed water well contractor and the abandonment must be according to minimum State Standards.
- (b) Remittance of a copy of the contractor's well log will be considered satisfactory evidence that the well has been properly and duly abandoned.

If the property owner elects to perform the abandonment work, it is required that he first contact this Water Resources Department before beginning any abandonment work. There are requirements the landowner must comply with prior to and during the abandonment of a well. Additionally, a representative of the Water Resources Department will need to be present during the abandonment process.

It is imperative that these steps be followed in order to meet Department of Water Resources requirements for well abandonment. Failure to meet minimum State Standards for well abandonment could result in a denial of this property for subsurface sewage disposal. Any questions regarding well abandonment should be directed to the State Department of Water Resources in Salem. Any questions relevant to subsurface sewage disposal should be directed to this office.

CLACKAMAS COUNTY SOILS SECTION  
Development Services Division

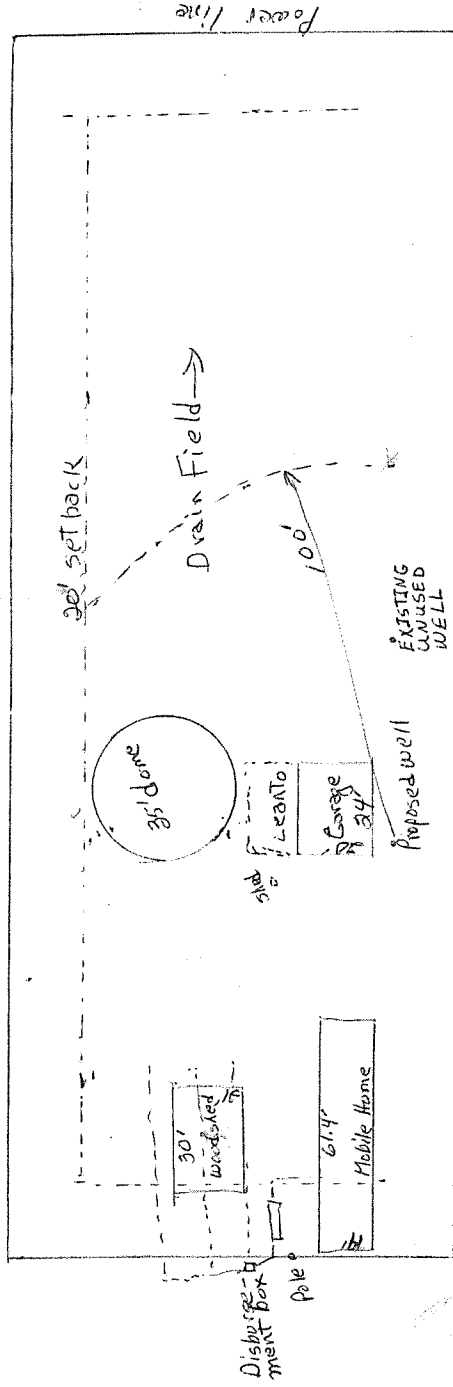
April, 1981

DEPT. OF ENVIRONMENTAL QUALITY  
RECEIVED

MAY 31 2000

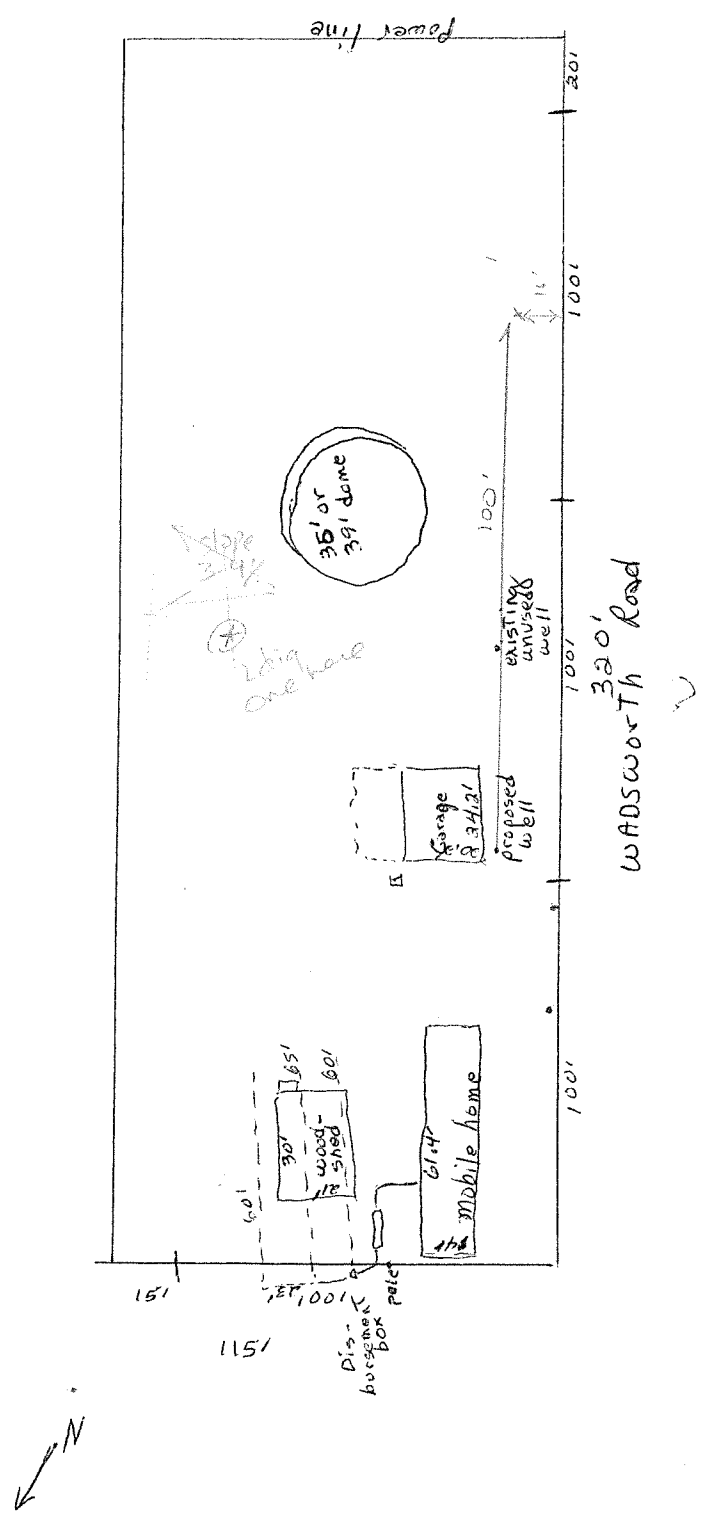
NORTH COAST BRANCH OFFICE  
WARRENTON

1/16" = 3.125'



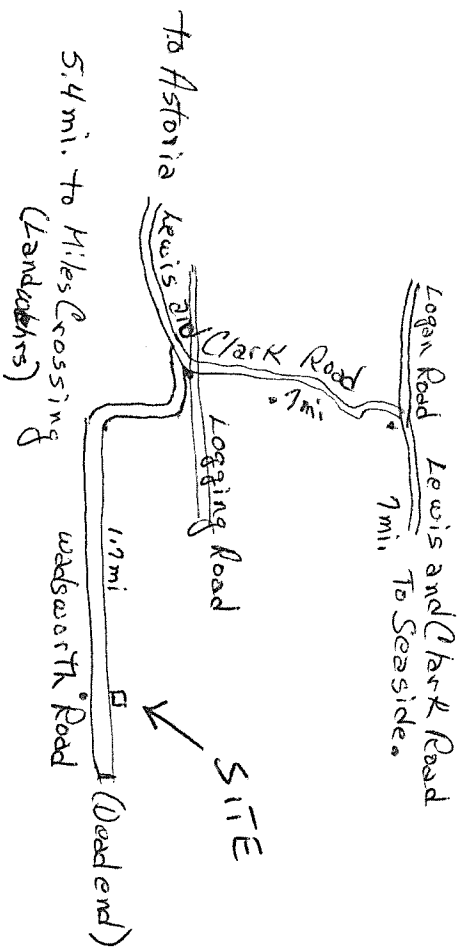
88775 Wadsworth Road  
Regina Hanna

20' set back sides and back  
 30' set back front  
 $\frac{1}{16}'' = 3.125'$



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 OCT 4 1999  
 NORTH COAST BRANCH OFFICE  
 WARRENTON

# Vicinity Map



59346

Control No.

STATE OF OREGON

PERMIT NO. 99-178

DEPARTMENT OF ENVIRONMENTAL QUALITY

\$ 310.00

Fee

New Construction

Minor

Repair

Other

Tank replacement/Auth. notice application 6-17-99

Permit Issued To

Martin Hannu, Chirstofer Hannu, Laura Hannu

Brenda Hannu, Sheralyn Eatherton, Daven Hannu

7N

9W

30

301

Clatsop

Wadsworth Rd.

Astoria

Ch. Cox

9-27-99

(Road Location)

(City)

(Issued by - Signature)

(Date Issued)

PERMITS ARE NOT TRANSFERABLE

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

SPECIFICATIONS

EXPIRATION DATE September 27, 2000

TYPE OF SYSTEM

New concrete

Design Sewage Flow Gallons/Day

Tank Volume 1000 Gallons

Disposal Trenches

Seepage Bed(s) Square Feet

Maximum Depth inches.

Minimum Depth inches.

Linear Feet

Equal Loop Serial

Pressurized

Minimum Distance Between Trenches

Total Rock Depth inches.

Below Pipe inches.

Above Pipe inches.

Rake Sidewall

Special Conditions (Follow Attached Plot Plan) Install in accordance with plans & specifications submitted. Properly decommission existing septic tank and submit copy of pumping receipt. Septic tank to be set back a minimum of 10' to any water lines and 5' to any property lines or building foundation lines.

PRE-COVER INSPECTION REQUIRED - CONTACT NCBO 861-3280

CERTIFICATE OF SATISFACTORY COMPLETION

As-Built Drawing with Reference Locations

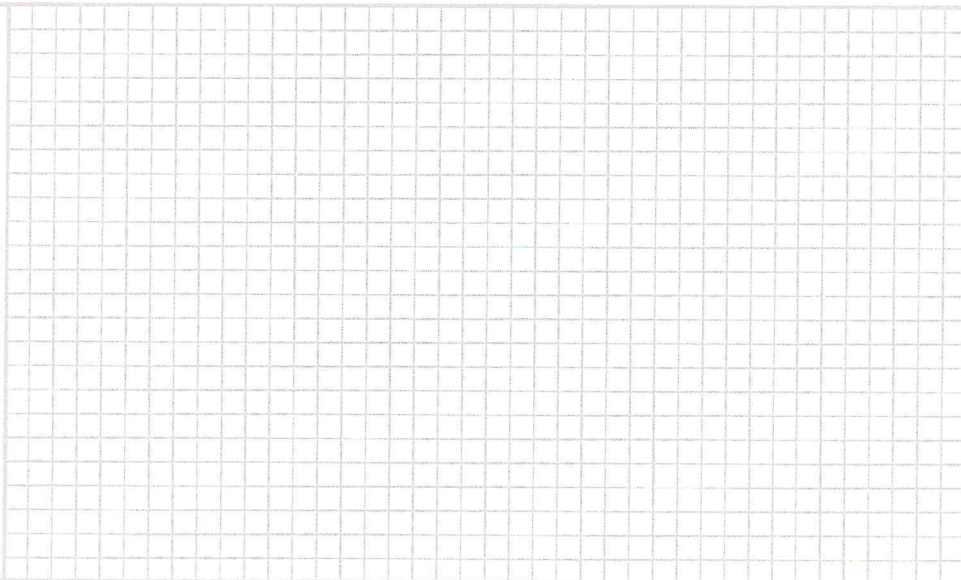
Installer

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

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

(Authorized Signature)

(Title)

(Date)

(Office)





**JOHNS Dave**

---

**From:** COX Anne  
**Sent:** Thursday, September 02, 1999 12:49 PM  
**To:** JOHNS Dave  
**Cc:** COX Anne  
**Subject:** Hannau auth/repair

Could you write something to her on DEQ stationery:

I visited your site on August 26 in response to your application for authorization notice to remove the existing mobile home and connect the septic system to a new 2 bedroom home.

The septic tank needs to be replaced. This will require a minor repair permit. (are those fees covered? by the auth app?). Please submit plans showing where the new tank will be located. Make sure that it is at least 5 feet from the property line and at least 5 feet from the distribution box. The drainfield appeared to be in good condition, even though a shed has been built over part of it. Do not drive or park on the drainfield or allow heavy items to be stored in the drainfield area.

After we receive the tank site plan, we can issue the repair permit,...etc etc.

Thanks Dave.

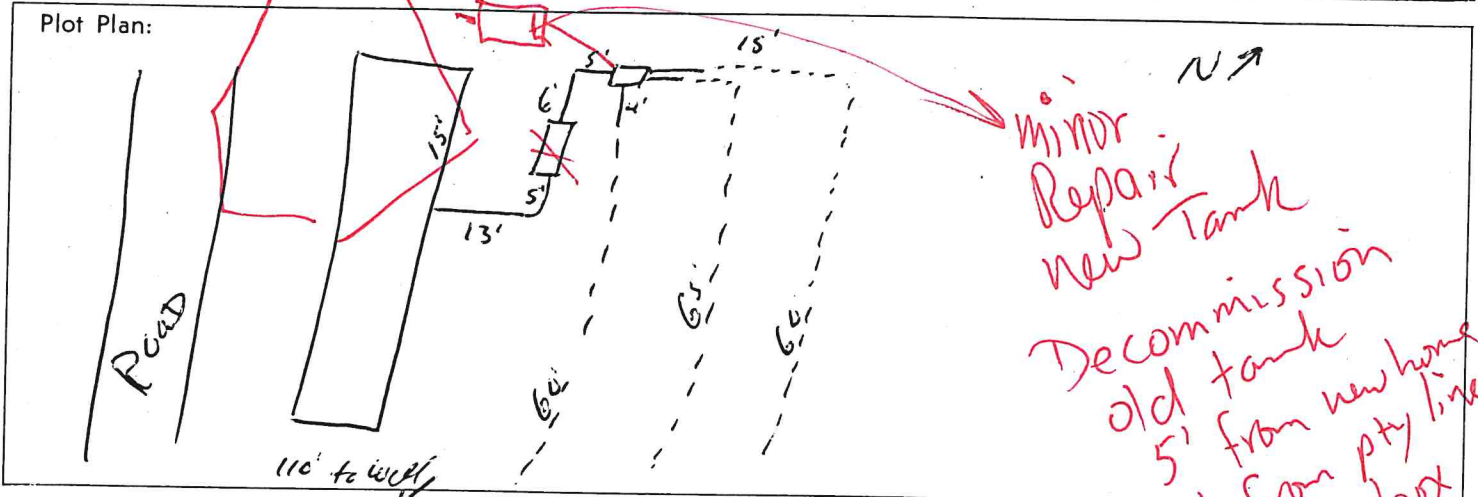
Or did you already do this one?

***Anne Cox***  
**229-6653**

709-30-30030

STATE OF OREGON  
DEPARTMENT OF ENVIRONMENTAL QUALITY  
SUBSURFACE SEWAGE SYSTEM  
CERTIFICATE OF SATISFACTORY COMPLETION

Property Owner Walter Hanna Permit Number 80-120  
T. 7 R. 9 Sec. 30 Tax Lot/Acct. No. 300 Date of Final Insp. 6/12/80  
Loc./Road \_\_\_\_\_ Approved By Ray T. Franklin  
Installer Self Title DEA  
Disposal Trenches: 400 Square Ft. 200 Lineal Ft.  
Tank Size: 1000 Gallons. System Designed to Serve 2 Bedroom house



STATE OF OREGON  
DEPARTMENT OF ENVIRONMENTAL QUALITY

Property Owner Walter Hanna Permit Number No 80-120  
T. 7 R. 9 Sec. 30 Tax Lot/Acct. No. 300 Expiration Date 5/16/81  
Loc./Road \_\_\_\_\_ Issued By Ray T.

**PERMIT**

[NOT TRANSFERABLE]

New Construction of  Repair of  Connection of  Alteration of

**A SUBSURFACE SEWAGE SYSTEM**

All work to conform to Oregon Administrative Rules Chapter 340 71-030. Work shall be done by property owner or by Licensed Sewage Disposal Service.

[MAKE NO CHANGES IN LOCATION OR SPECIFICATIONS WITHOUT WRITTEN APPROVAL]

**SPECIFICATIONS**

Tank size 1000 gallons. Disposal trenches 400 Square ft. 200 Lineal ft.  
Maximum trench depth 24" Minimum trench depth 18"  
 Loop  Equal  Serial Distance between lines on center 10'  
Total rock depth 12" Below pipe 6" Above pipe 2"  Rake sidewalls  
Special Conditions. [Follow Attached Plot Plan] \_\_\_\_\_

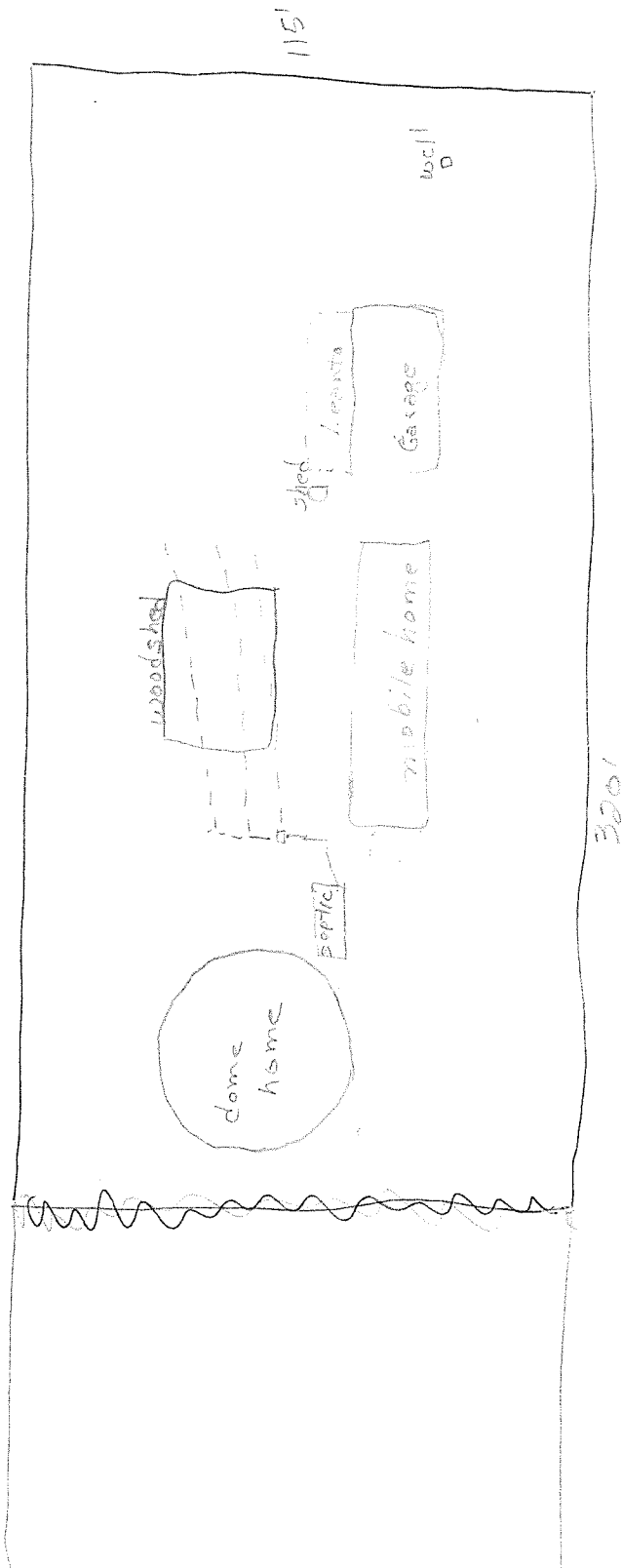
PRE-COVER INSPECTION REQUIRED - CONTACT:

**POST ON SITE**

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RECEIVED

SEP 7 1999

NORTH COAST BRANCH OFFICE  
WARRENTON



Proposed septic repair  
88775 Wadsworth Road

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

FOR OFFICE USE ONLY  
 Date Rec'd 6-17-99 / 5-31-00  
 Date Completed 8-29-00  
 Required Fee \$ 310.00 / 380.00  
 Receipt No. 87790 / 92874  
 Control No. 61522

FOR APPLICANT'S USE - (PLEASE PRINT)

Martin Hannu, Cristofor Hannu, Laura Hannu, 320' x 115' (deep) .84 acres  
 Lot Size (Acreage or Dimensions)  
Brenda Hannu, Sheralyn Eatherton, Davon Hannu Regina Hannu  
 (Property Owner's Name) (Applicant's Name if Different from Owner)

Legal Description of Property 7 9 30 301 (300) Clatsop  
 (Township) (Range) (Section) (Tax Lot/Acct. No.) (County)

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

Proposed Facility

Single Family Residence 2  
 (Number of Bedrooms)  
 Other \_\_\_\_\_  
 (Specify)

Water Supply

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

Existing Facility

Single Family Residence 2  
 (Number of Bedrooms)  
 Other \_\_\_\_\_  
 (Specify)

APPLICATION FOR:

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

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

\* APPLICATION CHANGED TO ALTERATION 5-31-00

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

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

Regina Hannu  
 (Signature)

6-17-99  
 (Date)

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

Owner's Mailing Address  
108 East 81st Place  
Denver, CO 80221-4559

Phone 303-428-1811

Applicant's Mailing Address (if different)  
88775 Wadsworth Road  
Astoria, OR 97103

Phone 503-338-6071

FAX IN DENVER  
(303-428-9614)  
 IF NEEDED  
 IW\WC8\WC8690 (7-19-91)

EXISTING SEWAGE DISPOSAL SYSTEM DESCRIPTION

Answer the following as best you can.

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

- Septic Tank                       Disposal Trenches                       Unknown
- Seepage Bed                       Cesspool or Pit
- Other -- (Describe) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. When was your sewage disposal system installed? 1980 709-30-300  
(Year) (Permit No.)

3. Tank material:

- Steel                                       Concrete                                       Fiberglass
- Polyethylene                               Unknown

4. Volume of the septic tank in gallons. 1000

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

6. Number of disposal trenches. 3

7. Total length of disposal trenches (feet). 200'

8. Is your sewage disposal system currently in use? Yes , No   
If no, how long has the system been out of use? since 7/90

9. If the sewage disposal system serves a dwelling, how many bedrooms in the dwelling? 2 How many people occupy the dwelling? 1

10. If the sewage disposal system serves a business, how many employees do you employ? N/A Type of business. \_\_\_\_\_

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

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

6-17-99  
Date

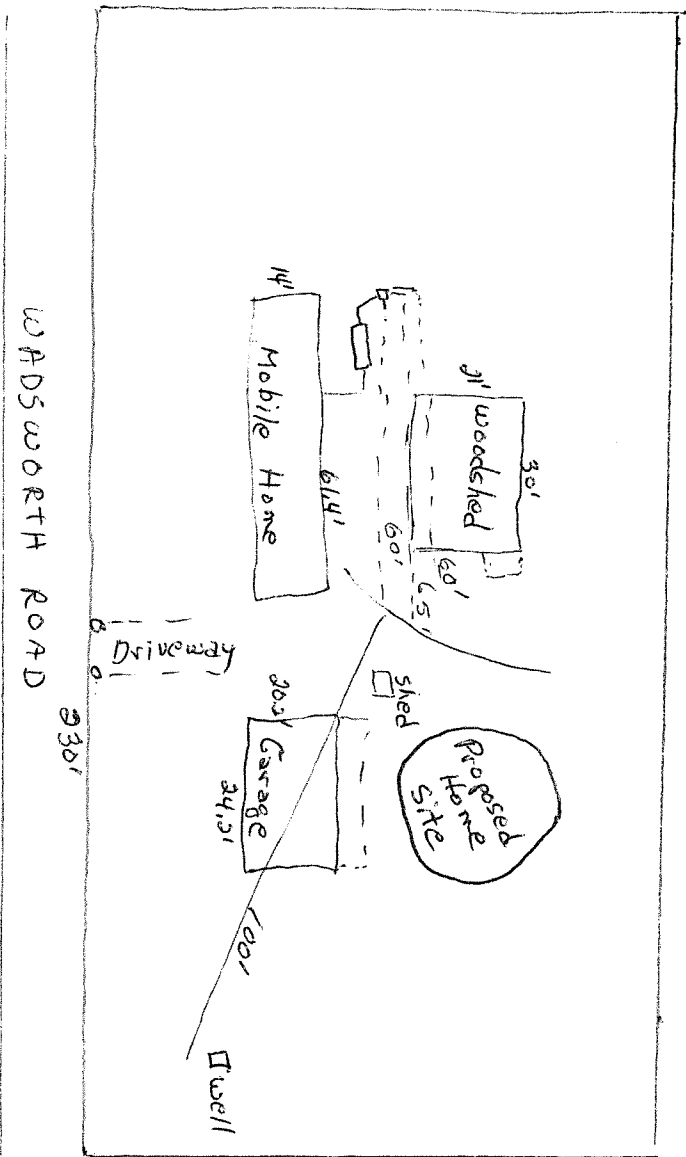
Regina Harne  
Signature of Property Owner or Legally Authorized Representative

N ↗

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RECEIVED

JUN 17 1999

NORTH COAST BRANCH OFFICE  
WARRENTON



$\frac{1}{4}'' = 9,583'$

PER FAX 861-3259

99-464

LAND USE COMPATIBILITY STATEMENT FOR ON-SITE SEWAGE DISPOSAL SYSTEMS

APPLICANT'S NAME <i>Regina Hannu</i>		MAILING ADDRESS <i>88775 Wadsworth Road</i>		PHONE <i>503-338-6071</i>
		<i>Astoria</i> CITY	<i>OR 97103</i> STATE ZIP	
P L O C A L I T Y	TOWNSHIP <i>7</i>	RANGE <i>9</i>	SECTION <i>30</i>	TAX LOT OR ACCT NO <i>301 (300)</i>
	SUBDIVISION/PROJECT	LOT	BLOCK	COUNTY
	<input checked="" type="checkbox"/> PROPERTY IS A LOT OF RECORD CREATED BEFORE AUGUST 1, 1981.			

PROPOSED LAND USE  
~~Replace mobile home with geodesic dome home~~ \* ALTERATION OF SYSTEM  
 Replacement of Septic Tank \* OK PER TERRI ALLEN CLATSOP CO. PLANNING 6-7-00

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

PROPERTY'S ZONING DESIGNATION  
*AE*

- THE ABOVE PROPOSAL HAS BEEN REVIEWED AND FOUND TO BE:
- COMPATIBLE WITH THE LDCG ACKNOWLEDGED COMPREHENSIVE PLAN
  - NOT COMPATIBLE WITH THE LDCG ACKNOWLEDGED COMPREHENSIVE PLAN
  - CONSISTENT WITH THE STATEWIDE PLANNING GOALS
  - NOT CONSISTENT WITH THE STATEWIDE PLANNING GOALS

REASON FOR FINDING OF COMPATIBILITY / INCOMPATIBILITY  
*Replacement of Existing*

PROPERTY IS LOCATED: (CHECK ONE)

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

LAND USE AUTHORITY  
*Clatsop County*

SIGNED <i>Ryl [Signature]</i>	TITLE <i>Planner</i>	DATE <i>6/10/99</i>
----------------------------------	-------------------------	------------------------

CITY/COUNTY CONCURRENCE IF INSIDE URBAN GROWTH BOUNDARY

SIGNED	TITLE	DATE
--------	-------	------

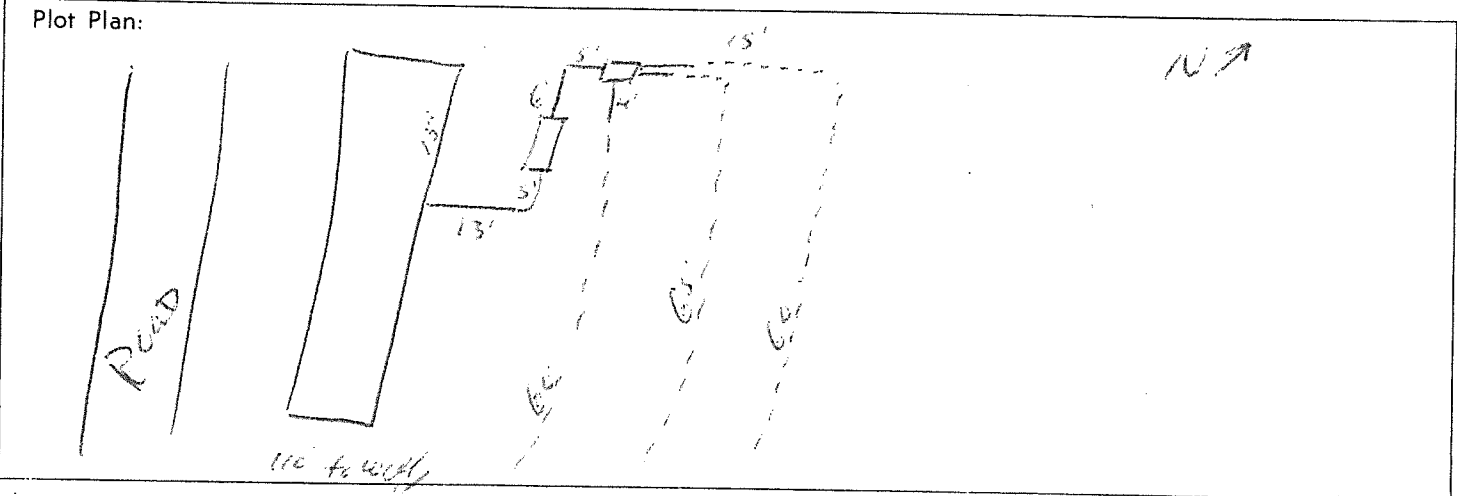


501

**STATE OF OREGON**  
**DEPARTMENT OF ENVIRONMENTAL QUALITY**  
**SUBSURFACE SEWAGE SYSTEM**  
**CERTIFICATE OF SATISFACTORY COMPLETION**

Property Owner Walter Hanna  
T. 7 R. 9 Sec. 30 Tax Lot/Acct. No. 300  
Loc./Road \_\_\_\_\_  
Installer Self  
Disposal Trenches: 400 Square Ft. 700 Lineal Ft.  
Tank Size: 1000 Gallons. System Designed to Serve 2 Bedroom house

Permit Number 80-120  
Date of Final Insp. 6/12/80  
Approved By Ray T. Franklin  
Title DEA



STATE OF OREGON  
DEPARTMENT OF ENVIRONMENTAL QUALITY

Property Owner Walter Henry  
T. 7 R. 9 Sec. 36 Tax Lot/Acct. No. 300  
Loc./Road \_\_\_\_\_

Permit Number NO 90-120  
Expiration Date 5/16/81  
Issued By [Signature]

# PERMIT

[NOT TRANSFERABLE]

New Construction of  Repair of  Connection of  Alteration of

## A SUBSURFACE SEWAGE SYSTEM

All work to conform to Oregon Administrative Rules Chapter 340 71-030. Work shall be done by property owner or by Licensed Sewage Disposal Service.

[MAKE NO CHANGES IN LOCATION OR SPECIFICATIONS WITHOUT WRITTEN APPROVAL]

### SPECIFICATIONS

Tank size 1000 gallons. Disposal trenches 400 Square ft. 700 Lineal ft.  
Maximum trench depth 24" Minimum trench depth 18"  
 Loop  Equal  Serial Distance between lines on center 10'  
Total rock depth 12" Below pipe 6" Above pipe 3"  Rake sidewalls  
Special Conditions. [Follow Attached Plot Plan] \_\_\_\_\_

PRE-COVER INSPECTION REQUIRED - CONTACT:

# POST ON SITE

DEQ/WQ-404 Rev. 1/78

SP\*54377-340

Date Rec'd 5-16-02 Amt. Rec'd \$ 40.00  
 Receipt No. 15738 Permit No. \_\_\_\_\_  
 Date Appl. Completed \_\_\_\_\_  
 Site Inspection Date \_\_\_\_\_  
 Approved \_\_\_\_\_ Disapproved \_\_\_\_\_  
 Pre-Cover Inspection Date \_\_\_\_\_

#80-120

**APPLICATION FOR SUBSURFACE SEWAGE DISPOSAL SYSTEM**

(NON-REFUNDABLE FEES MUST ACCOMPANY THIS APPLICATION)

1.  Site Evaluation Report for New System (~~\$75.00~~) \$120.00
2.  Permit to Construct New System (~~\$25.00~~) (Site Evaluation (No. 1) Required) \$40.00
3.  Permit to Repair Malfunctioning System (\$25.00)
4.  Permit to Connect New or Altered Structure to Existing System (~~\$25.00~~) \$40.00
5.  Permit to Connect Mobile/Modular Home to Existing System (\$25.00)
6.  Permit Renewal (\$25.00)
7.  Existing System Evaluation \$40.00
8.  Other (Specify) \_\_\_\_\_

ASSESSORS MAP 10¢

**REFERENCE INFORMATION (Please Print)**

WALTER HANNU  
 NAME OF APPLICANT  
RT. 3 BOX 482C  
 ADDRESS  
ASTORIA OR 97103  
 CITY ZIP CODE  
 \_\_\_\_\_  
 PHONE

SAME  
 NAME OF PROPERTY OWNER  
 \_\_\_\_\_  
 ADDRESS  
 \_\_\_\_\_  
 CITY ZIP CODE  
 \_\_\_\_\_  
 PHONE

**PROPERTY DESCRIPTION**

7N 9W 30 300 CLATSOP  
 Township Range Section Tax Lot/Account Number County  
 \_\_\_\_\_  
 Subdivision/Area Tract Block Lot Lot Size

**PROPOSAL DESCRIPTION**

PLANNED USE: House \_\_\_\_\_ Mobile/Modular Home X Commercial \_\_\_\_\_ Industrial \_\_\_\_\_ Other \_\_\_\_\_  
 No. of Bedrooms 2 Water Supply DRIILLED WELL  
 (Describe)

**APPLICANT MUST PROVIDE**

1. Test Holes (For 1, \_\_\_\_\_). Date Ready \_\_\_\_\_
2. Zoning Approval (Except 2, 3, 6 and 7) you may attach a copy of your Zoning Permit or obtain the signature of the appropriate County, City or Indian Planning Commission.  
 Signature and Name of Zoning Agency \_\_\_\_\_
3. Plot Plan.
4. Other \_\_\_\_\_

**DIRECTIONS TO SITE: (A Map Would Help)** FLAG TEST HOLES!! (2'x3'x4' deep)

SIGNATURE Reitha Hannu  
 (Contract Purchaser/Owner/Installer)

DATE \_\_\_\_\_

State of Oregon  
DEPARTMENT OF ENVIRONMENTAL QUALITY

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

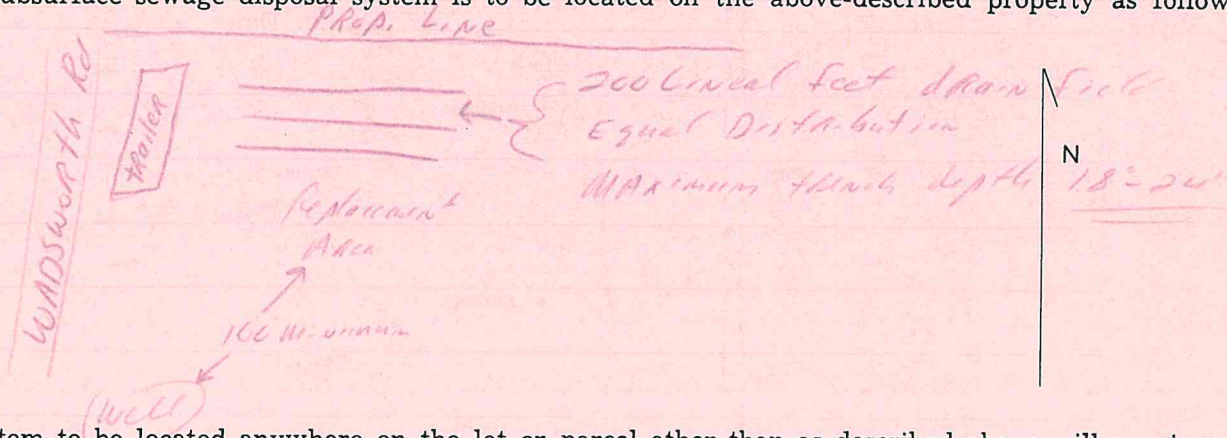
This is to certify that the following described property

709-30-300 CLATSOP COUNTY OREGON

has been evaluated on May 2, 1980 and found to be approvable for the installation of one subsurface sewage disposal system in accordance with ORS 454.605 through 454.755 and administrative rules of the Environmental Quality Commission promulgated thereunder.

This approval is given on the basis that the lot or parcel described above will not be further partitioned or subdivided and that conditions on subject or adjacent properties have not been altered in any manner which would prohibit issuance of a permit under the statutes and rules noted above. Any such subdivision, partitioning or alteration voids this certificate.

The subsurface sewage disposal system is to be located on the above-described property as follows:



A system to be located anywhere on the lot or parcel other than as described above will require an additional site evaluation along with an additional fee.

This certification is valid until a subsurface sewage disposal system is installed pursuant to a permit obtained from Department of Environmental Quality or until earlier cancellation, pursuant to Commission rules, with written notice thereof by the Department of Environmental Quality to the then owners according to Department records or the county tax records, whichever are more current. Subject to the foregoing, this certification runs with the land and will automatically benefit subsequent owners of the land.

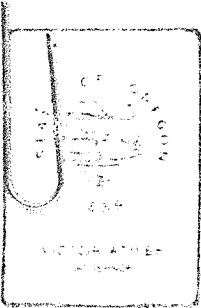
Issued: May 20, 1980 Date

To: Walter Hanny Landowner

Route 3, Box 482-C Address

Astoria, Oregon 97108 City State Zip

By Ray T. Franklin DEQ or Contract Agent



## Department of Environmental Quality

502 S.W. 5th AVENUE, P.O. BOX 1760, PORTLAND, OREGON 97107 PHONE (503) 219-

May 20, 1980  
Astoria Branch  
818 Commercial  
Astoria, Oregon 97103

Walter Hannu  
Route 3, Box 482-C  
Astoria, Oregon 97103

RE: 709-30-300

Mr. Hannu,

On 5-2-80, I performed an on site evaluation of the property referenced above to determine whether a subsurface sewage disposal permit could be issued.

As a result of this evaluation, I have determined that the conditions on the site are in compliance with the Oregon Administrative Rules pertaining to standards for subsurface and alternative sewage and nonwater-carried waste disposal. An approved evaluation report shall remain in effect until issuance of a permit to construct, unless in the meantime conditions on subject or adjacent properties have been altered in any manner which would prohibit issuance of a permit in which case the evaluation report shall be considered null and void. A permit will be granted when the required plot plan and fee are received by the Department. Please note RESTRICTIONS LISTED BELOW.

Sincerely,

Ray T. Franklin, RS  
Department of Environmental Quality

### RESTRICTIONS:

- 1) Provide an absorption area of 400 square feet with a minimum septic tank capacity of 1000 gallons for the proposed 2 bedroom house.
- 2) Place the drainfield in the approved area close to the North property line.
- 3) Maximum trench depth is 18" - 24", NOT to exceed 24".
- 4) Maintain a 100' setback from any well and the drainfield and the replacement drainfield.
- 5) Any extreme alteration of the natural soil profile in the approved area could void this approval.
- 6) Submit a detailed plot plan and obtain a sewage disposal system construction permit prior to construction.
- 7) This approval void if in conflict with any local planning or building regulations.

RTF/pkm

10-79

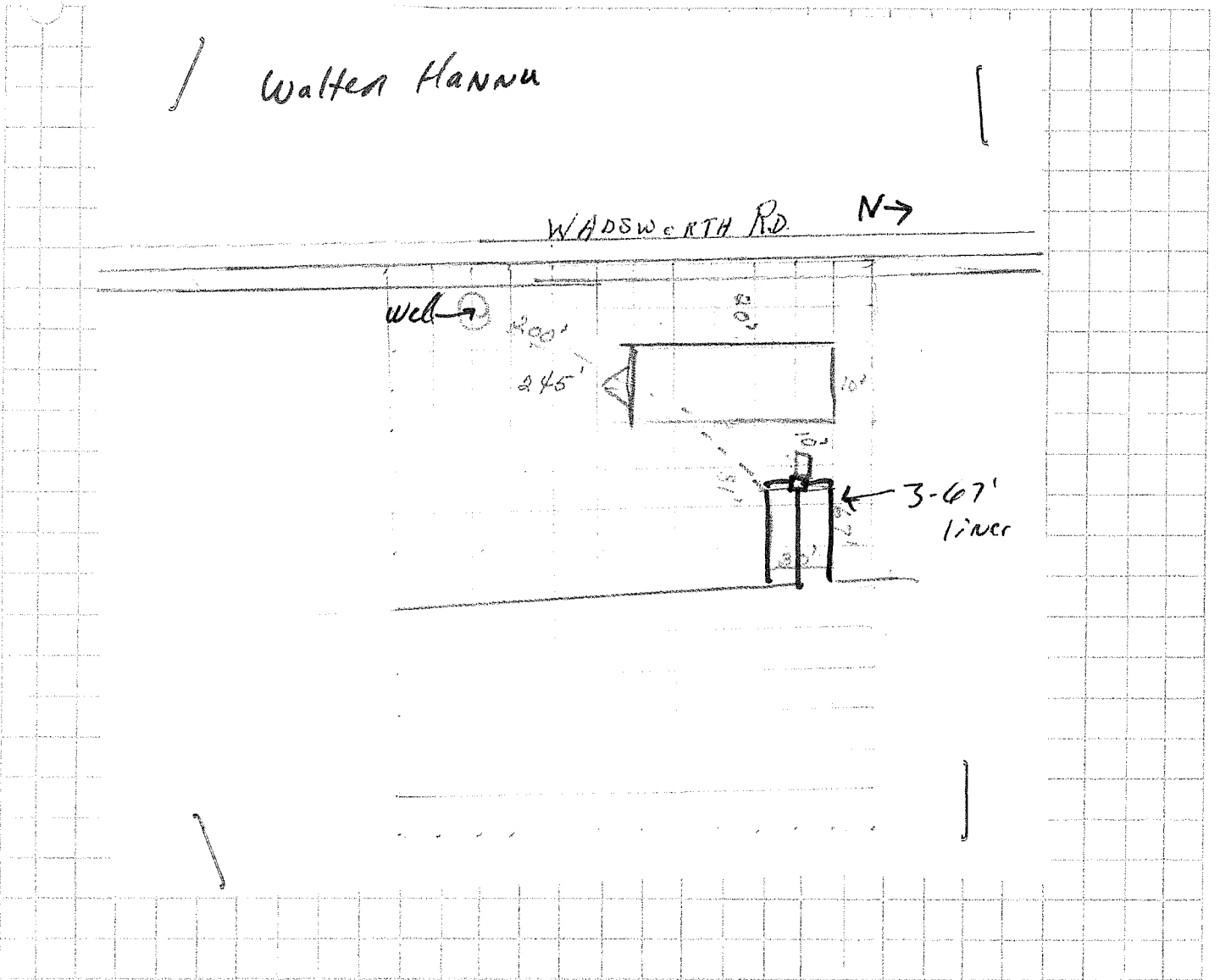
Enclosures

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

Property Owner Walter Hannu Date \_\_\_\_\_

Location: T. 7 R. 9 Sec. 30 Tax Lot/Acct. No. 300

Indicate North in Circle



REMARKS: 5/22/80 Slope of land will require df to run N-S instead  
of E-W. Replacement area will be to east of original df. P.F.

FOR DEQ USE ONLY

Approved  
 Disapproved

Permit Number 80-120  
By: Ray T. Franklin 5/16/80  
(SANITARIAN SIGNATURE) (DATE)



Date Rec'd 4-3-80 Amt. Rec'd \$ 120<sup>00</sup>  
Receipt No. 15687 Permit No. \_\_\_\_\_  
Date Appl. Completed \_\_\_\_\_  
Site Inspection Date \_\_\_\_\_  
Approved \_\_\_\_\_ Disapproved \_\_\_\_\_  
Pre-Cover Inspection Date \_\_\_\_\_

**APPLICATION FOR SUBSURFACE SEWAGE DISPOSAL SYSTEM**

(NON-REFUNDABLE FEES MUST ACCOMPANY THIS APPLICATION)

- 1.  Site Evaluation Report for New System (~~\$75.00~~) \$120<sup>00</sup>
- 2.  Permit to Construct New System (~~\$25.00~~) (Site Evaluation (No. 1) Required) \$40<sup>00</sup>
- 3.  Permit to Repair Malfunctioning System (\$25.00)
- 4.  Permit to Connect New or Altered Structure to Existing System (\$25.00) \$40<sup>00</sup>
- 5.  Permit to Connect Mobile/Modular Home to Existing System (\$25.00)
- 6.  Permit Renewal (\$25.00)
- 7.  Existing System Evaluation \$40<sup>00</sup>
- 8.  Other (Specify) ASSESSORS MAP 104

**REFERENCE INFORMATION (Please Print)**

WALTER HANNU (BEETNA)  
NAME OF APPLICANT  
RT 3 Box 482  
ADDRESS  
ASTORIA OR. 97103  
CITY ZIP CODE  
325-5954 (message number)  
PHONE

FLOYD NEUMANN  
NAME OF PROPERTY OWNER  
BOX 125  
ADDRESS  
POPLAR, MONT. 59255  
CITY ZIP CODE  
PHONE

**PROPERTY DESCRIPTION**

TN 9W 30 300 CLATSOP  
Township Range Section Tax Lot/Account Number County  
36.34 Acres  
Subdivision/Area Tract Block Lot Lot Size

**PROPOSAL DESCRIPTION**

PLANNED USE: House \_\_\_\_\_ Mobile/Modular Home  Commercial \_\_\_\_\_ Industrial \_\_\_\_\_ Other \_\_\_\_\_  
No. of Bedrooms 2 Water Supply DRILLED WELL  
(Describe)

**APPLICANT MUST PROVIDE**

- 1. Test Holes (For 1, \_\_\_\_\_). Date Ready JAN 9, 1980
- 2. Zoning Approval (Except 1, 3, 6 and 7) you may attach a copy of your Zoning Permit or obtain the signature of the appropriate County, City or Indian Planning Commission.  
Signature and Name of Zoning Agency [Signature] M. J. J. J., Zoning Administrator
- 3. Plot Plan.
- 4. Other Zoned GFF - General Farm Use & Forestry. Mobile homes permitted outright.

**DIRECTIONS TO SITE: (A Map Would Help)** flag test pits!

UP LEWIS & CLARK RD. FROM MILES CROSSING, CROSS BRIDGE - TURN LEFT - GO TO WADSWORTH RD. - RIGHT ON WADSWORTH RD. FOR 2 MILES. TO CLIFFORD OLSON RESIDENCE. HOLES LEFT SIDE ROAD BEFORE LEATHOUSE, TRAWLER ON RIGHT SIDE

SIGNATURE  Walter Hannu DATE  4-3-80  
(Contract Purchaser/Owner/Installer)

709 30 300

LOT 40.78

EAST  
717 (776')

1783.7  
204.0

300  
36.34 Ac.

300

400  
186.64 Ac.

5-01  
5-02

LOT 41.18

115'  
32°  
320'  
115'  
301  
0.84 Ac.

295.16'  
700  
295.16'

700  
79.34 Ac.

700

700

LOT 41.58

Dept. of Environmental Quality

RECEIVED

APR 03 1980

Astoria Branch

30

CROWN  
ZELLERBACH  
LOGGING ROAD

21.00 ch.

600  
0.36 Ac.

160'  
720'

WADSWORTH