

38864

Control No.

\$ 280.00

Fee

STATE OF OREGON
DEPARTMENT OF ENVIRONMENTAL QUALITY

PERMIT NO. 94-119

-809 33 000 1800 -

☒ New Construction☐ Repair☐ OtherPermit Issued To Crestview-Greenwood Cemetery
ASSOC. (Property Owner's Name)8N
(Township)9W
(Range)34 53
(Section)1800
(Tax Lot / Acct. No.)Clatsop
(County)Highway 202
(Road Location)Astoria
(City)Dewey Danold
(Issued by - Signature)6-24-94
(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)

SPECIFICATIONSEXPIRATION DATE June 24, 1995TYPE OF SYSTEM Standard with effluent lift pump with partial capDesign Sewage Flow 450 Gallons/DayTank Volume 1000 GallonsDisposal Trenches ☒Seepage Bed(s) ☐ Square FeetMaximum Depth 24 inches.Minimum Depth 12 inches.300 Linear FeetEqual ☐ Loop ☐ Serial ☒Pressurized ☐Minimum Distance Between Trenches 10' on centerTotal Rock Depth 12 inches.Below Pipe 6 inches.Above Pipe 2 inches.☐ Rake SidewallSpecial Conditions (Follow Attached Plot Plan) Install in accordance with plans & specifications submitted. 10' setback to property lines & water lines. 50' setback to drainage swale. Provide capping material 16" over top of gravel less than 24" deep. Capping material to be inspected prior to placement, unless from on site. Install during dry weather.
PRE-COVER INSPECTION REQUIRED — CONTACT North Coast Branch Office -- 861-3280**CERTIFICATE OF SATISFACTORY COMPLETION**As-Built Drawing
with Reference LocationsInstaller OwnerFinal Insp. Date 8-29-94☒ Inspected By Dewey Danold☐ Issued by Operation of Law☐ Pre-cover inspection waived
pursuant to OAR 340,
Division 71See As-Built Plot Plan
in file.

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.

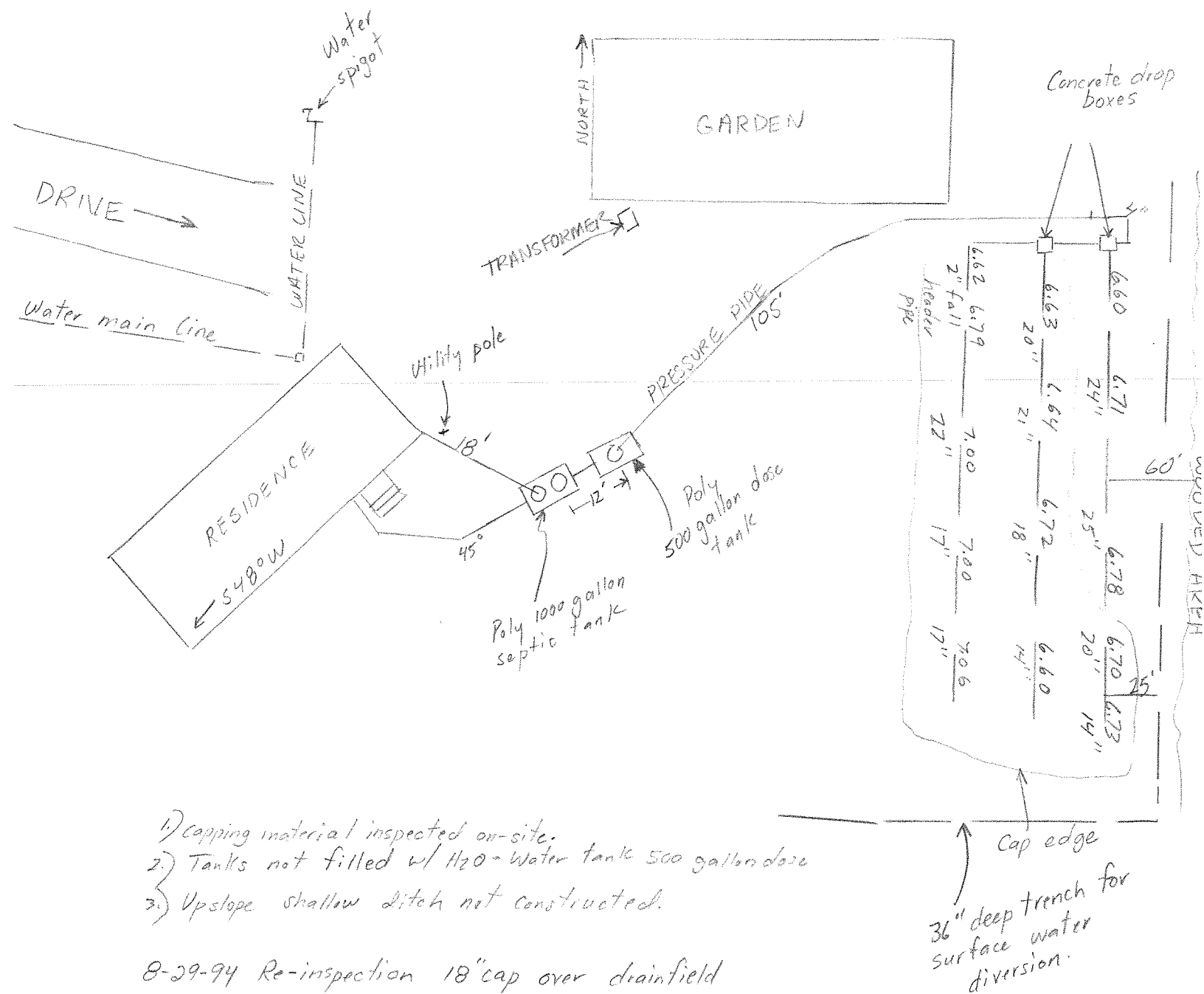
Issuance of this Certificate does not constitute a warranty or guarantee that this on-site disposal system will function indefinitely without failure.

Dewey Danold
(Authorized Signature)ES/RS
(Title)8-30-94
(Date)NCBO
(Office)



Crestview - Greenwood Cemetery
809-34-1800
94-119

Dewey Darold
8-4-94/8-29-94
As-built/Pre-cover Ins.
(NTS)



DEPARTMENT OF ENVIRONMENTAL QUALITY

North Coast Branch Office

17 North Highway 101

Warrenton, OR 97146

Phone (503) 861-3280

DATE: August 8, 1994

TO: Crestview-Greenwood Cemetery
T8N, R9W, S34, TL1800
Construction Permit # 94-119

FROM: *Dewey Darold*
Dewey W. Darold, R.S.
Environmental Specialist

SUBJECT: Pre-cover inspection

In reference to the August 4, 1994, pre-cover inspection, Mr. Lemay indicated that he used a hand level to lay the pipe in the trench. Also, Mike indicated that he used a ditch witch to excavate for the disposal trenches and used a spade shovel to widen the disposal trenches to two feet.

On August 5, 1994 another inspection was conducted. The pipe was laid level plus or minus one inch. Mike has rented a transit. All other corrections noted on the August 4, 1994 inspection were made. I gave Mike's son a copy of the partial as-built plot plan. Next step is to place cap over drainfield. Showed Mike the area of the drainfield to cap and how much. The capping material used will be from on-site. Mike showed me some soil which he intends to use for the cap. The soil was inspected and found to be acceptable. Told Mike to make sure any large roots or clods be removed before cap is placed over drainfield. Told Mike that he may need more capping material than what is on-site.

August 5, 1994 reinspection: Concrete drop boxes from Ed Fisher. Dose tank purchased from Ed Fisher. Dose tank says for water use only. Header pipes not level from header pipe outlet. Poly septic tank full of water. Outlet end of septic tank slightly lower than inlet side. Float controls on separate assembly. Mentioned to grout Inlet and outlet ports at drop boxes and alarm protected from weather.

On August 29, 1994, at 4:40 pm, I called and spoke with Ed Fisher. Ed said that he purchased the dose tank from United Pipe and they told Ed that their dose tanks are no different than the potable water tanks. I noticed a sticker on the dose tank that said for water use only. I mentioned to Ed that the water tanks are manufactured with toxic chemicals that do not leach and that is why they are used for water use only. I told Ed to make sure from now on to use only DEQ approved septic tanks and not water tanks. Drop boxes came from Bill Bergerson.

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

CORRECTION NOTICE

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

- 1.) Float controls attached to discharge pipe. Provide separate assembly for attaching float controls
- 2.) Overflow header pipes not bedded on undisturbed soil. Over excavated. Carefully backfill by hand & compact.
- 3.) Top of pipe elevations range from 2.16" on upslope trench to 1.44" middle & 3.24" downslope trench. Should be $\pm 1"$
- 4.) Trench sidewalls smeared/rack where needed.
- 5.) Cap all trench where depths are less than 24"

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

PERMIT NO. 94-119 T8N R9W S34 TL 1800
Township Range Section Tax Lot / Acct. No.

INSPECTION:

TIME 1:20 P.m.

DATE 8-4-94

BY Dewey Donald
(Signature)

CONTACT: NCBO

861-3280

DO NOT REMOVE THIS NOTICE FROM SITE



BUILDING CODES
17 N HWY 101
Warrenton, OR 97146
(503) 861-3159
Fax # (503) 861-3259

City -
OT -
CC -

BUILDING PERMIT APPLICATION

RESIDENTIAL

GREENWOOD CEMETERY RT. 1 Bx 901
JOB LOCATION/ADDRESS

ASTORIA CLATSOP
CITY HWY 202 FROM ASTORIA COUNTY
Half mile past MP 5, LEFT INTO CEMETERY
DIRECTIONS TO JOB SITE

RIGHT AT 1ST INTERSECTION TO REMOTE SE. CORNER

MICHAEL J. LEAMY, PRESIDENT
CRESTVIEW-GREENWOOD CEMETERY ASSOCIATION
OWNER

RT. 1 Box 901
ADDRESS

ASTORIA CLATSOP 97103
CITY COUNTY ZIP CODE

| DESCRIBE WORK | | CODE |
|--|---------|--------------------|
| <input type="checkbox"/> NEW CONSTRUCTION | | |
| <input type="checkbox"/> ADDITION | | |
| <input type="checkbox"/> REMODEL | | |
| <input checked="" type="checkbox"/> MOBILE HOME Set up #130.25 | | |
| <input type="checkbox"/> PRE FAB | | |
| <input type="checkbox"/> ACCESS. BLDG. | | |
| <input type="checkbox"/> OTHER | specify | |
| TOTAL SQUARE FT. | | CONSTRUCTION VALUE |
| PERMIT / JOB # | | |
| OFFICE | | |

HOME: 325-6432 WORK: SAME
TELEPHONE

| ZONING | | LOCAL GOVERNMENT APPROVALS | | SANITATION 809-34-1800 | |
|---|--------------|----------------------------|---------|------------------------|--|
| USE ZONE | | PUBLIC | PRIVATE | | |
| FLOOD ZONE <input type="checkbox"/> YES <input type="checkbox"/> NO | TWNSHP RG TL | DEQ PERMIT # 94-119 | | | |
| BY: | PERMIT # | BY: Dad 78 | | OFFICE COORDINATOR | |
| | TITLE | 861-3280 | | TITLE | |
| PHONE | DATE | 6-24-94 | | DATE | |

| DESIGNATED CONTRACTORS | | | | |
|------------------------|---------|-------|-------|-----|
| GENERAL CONTRACTOR | ADDRESS | PHONE | REG # | EXP |
| ELECTRICAL | ADDRESS | PHONE | REG # | EXP |
| PLUMBING | ADDRESS | PHONE | REG # | EXP |
| MOBILE HOME | ADDRESS | PHONE | REG # | EXP |

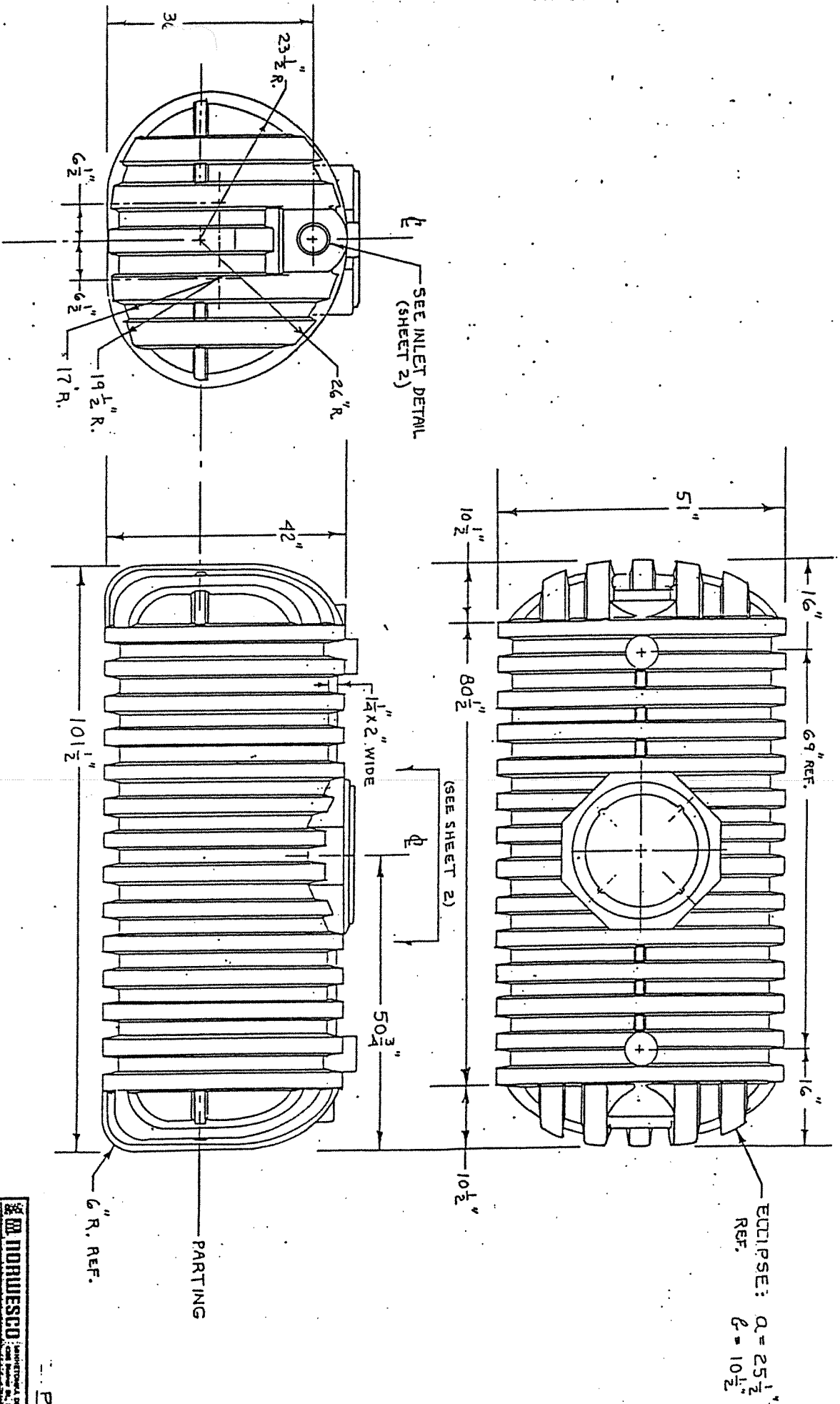
I HEREBY CERTIFY THAT, TO MY KNOWLEDGE, THE ABOVE INFORMATION IS TRUE AND CORRECT. ALL WORK TO BE PERFORMED SHALL BE IN ACCORDANCE WITH ALL GOVERNING LAWS AND RULES. I FURTHER CERTIFY THAT I AM IN FULL COMPLIANCE WITH BUILDERS BOARD REQUIREMENTS (ORS 701.055) IN THAT:

- ☒ I AM THE PROPERTY OWNER DOING MY OWN WORK AND AM EXEMPT.
☐ ONLY REGISTERED CONTRACTORS/EMPLOYEES WILL BE USED ON THIS JOB.
☐ I AM REGISTERED WITH THE BUILDERS BOARD REG # _____ EXP _____

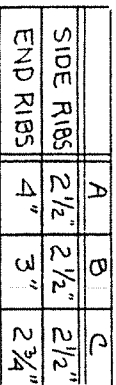
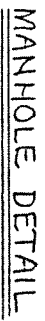
Michael J. Leamy

DATE

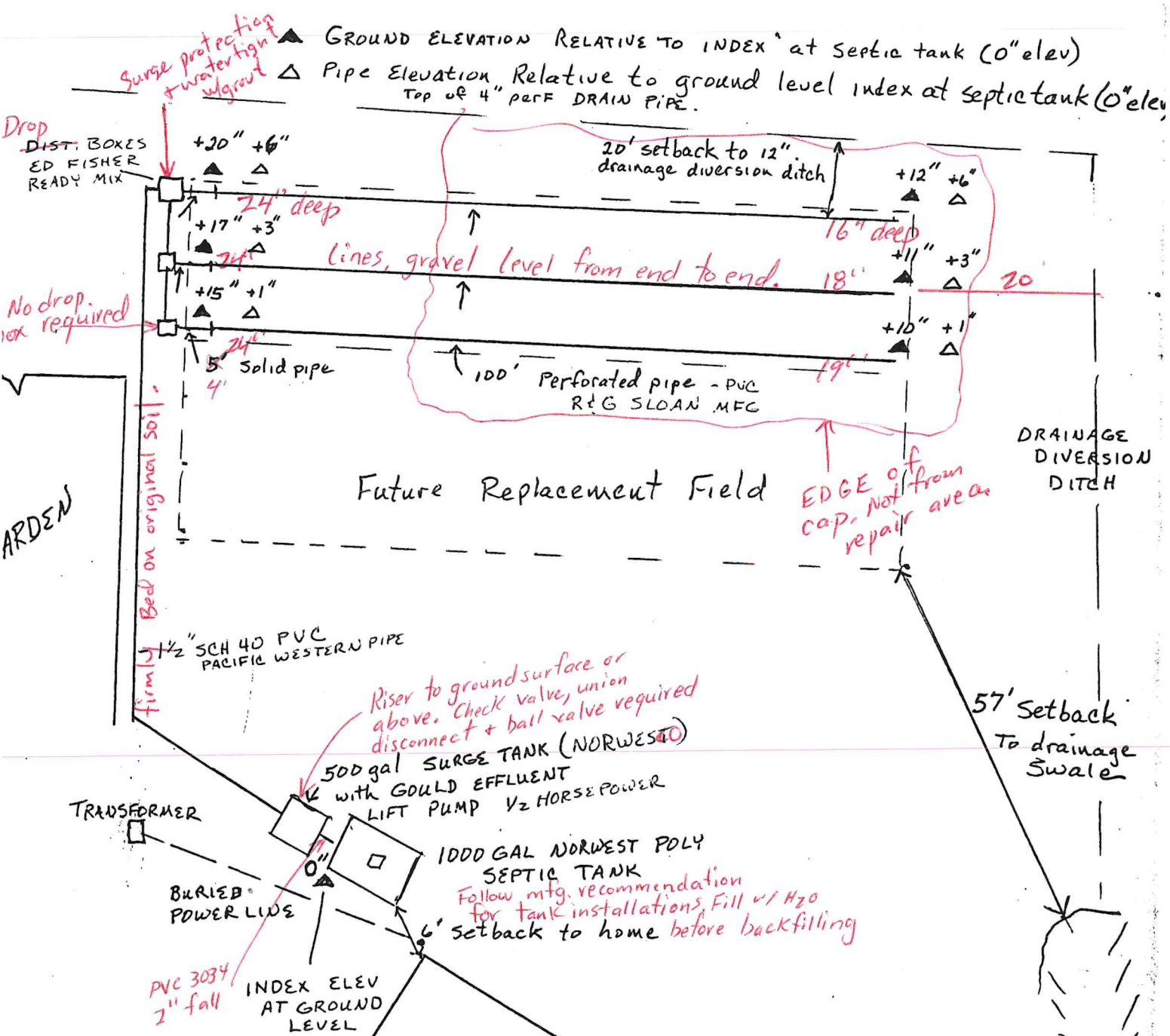
NOTE: SEE SHEET 2 FOR RIB DETAIL



| | | | |
|----------------------|---------|--------------------------------|-------|
| BA NORWESCO | | INTERNATIONAL PAPER CO. (1983) | |
| 500 GAL. SEPTIC TANK | | | |
| Customer | HOUSE | Job No. | 40014 |
| Order No. | 4118/88 | Quantity | 1 |
| Price | \$ 0.50 | Material | 40014 |
| Date | 5/18/88 | Drawn by | JDH |
| Checked by | JDH | Reviewed by | JDH |



RIB DETAIL

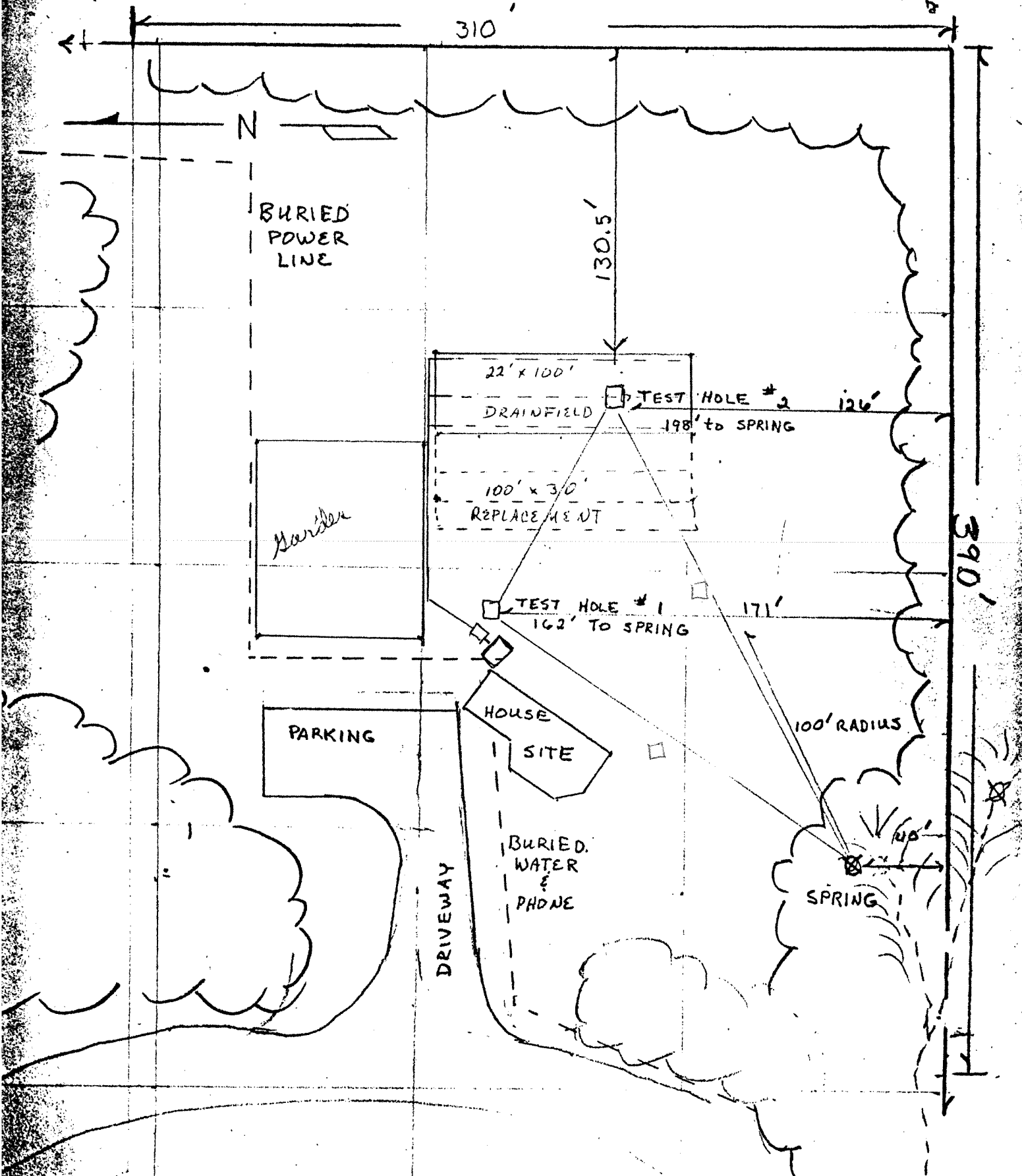


TRANSFORMER
 BURIED POWER LINE
 PVC 3034 2" fall
 INDEX ELEV AT GROUND LEVEL
 500 gal SURGE TANK (NORWEST) with GOULD EFFLUENT LIFT PUMP 1/2 HORSE POWER
 1000 GAL NORWEST POLY SEPTIC TANK
 Follow mfg. recommendation for tank installations. Fill w/ H₂O
 6' setback to home before backfilling
 Home site
 SPEC'S :
 DRAINFIELD CAPPED TO 12" COVER WITH EXTRA SOIL FROM TRENCHES PLUS Adjacent soil as needed for grade.
 TRENCHES: 2' wide, 24" maximum depth.
 DRAIN ROCK (JOHNSONS - Seaside): 6" under pipe, 2" over, total of 12"
 Fabric by TYPAR

Dewey Darold, R.S.
 APPROVED 6-24-94
 Dewey Darold
 DEPT. OF ENVIRONMENTAL QUALITY
 RECEIVED
 JUN 21 1994
 ASTORIA BRANCH OFFICE

JUN 21 1994

ASTORIA BRANCH OFFICE



DEPARTMENT OF ENVIRONMENTAL QUALITY

North Coast Branch Office

17 North Highway 101

Warrenton, OR 97146

Phone (503) 861-3280

DEPARTMENT OF

ENVIRONMENTAL

QUALITY

Date: May 25, 1994

Crestview-Greenwood Cemetery Association
Route 1 Box 901
Astoria, OR 97103

Re: Permit Application for On-Site Sewage Disposal
T8N, R9W, Section 33, Tax Lot 1800, Clatsop County,
2.8 Acres.

Dear Sirs:

Our office has received a plot plan for a permit to construct an on-site sewage disposal system on the above described property. Additional information is requested in the form of a revised plot plan. Please address the following.

- 1) Indicate the manufacturer of the septic tank.
- 2) Specify the type of filter fabric to be used over the top of the filter material. Also, indicate type and source of filter material (drainrock) to be used in the construction.
- 3) Indicate manufacturer of drop boxes and type of perforated pipe to be used. Show a 4' solid header pipe between the drop box and the perforated pipe.
- 4) Show the test pits on the plot plan and a 50 foot setback to the drainage swale.

Given the location of the house and the distance to the approved area for the drainfield, which is slightly upslope, it is unknown whether gravity flow can be achieved. The trench depth can not exceed 24 inches and must be installed a minimum 12 inches into the natural soil. Therefore, we request that you provide us with the following elevations.



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

DEQ-1



Crestview-Greenwood Cemetery Association
May 25, 1994
Page 2

- 1) Ground surface elevations at the beginning and ends of the disposal field and at the septic tank.
- 2) Top of pipe elevations at the septic tank inlet and outlet connections and the perforated pipe in the drainfield.

We recommend that you contact a state licensed installer which can help design a system which will meet our requirements.

Please be aware that only the property owner or a State licensed installer can construct or participate in the construction of any on-site sewage disposal system installation or part thereof.

Technical information pertaining to this letter is available upon request. If you have any questions, or would like further information, please feel welcome to contact the DEQ North Coast Branch Office at (503) 861-3280.

Sincerely,



Dewey W. Darold, R.S.
Environmental Specialist
Northwest Region
Water Quality

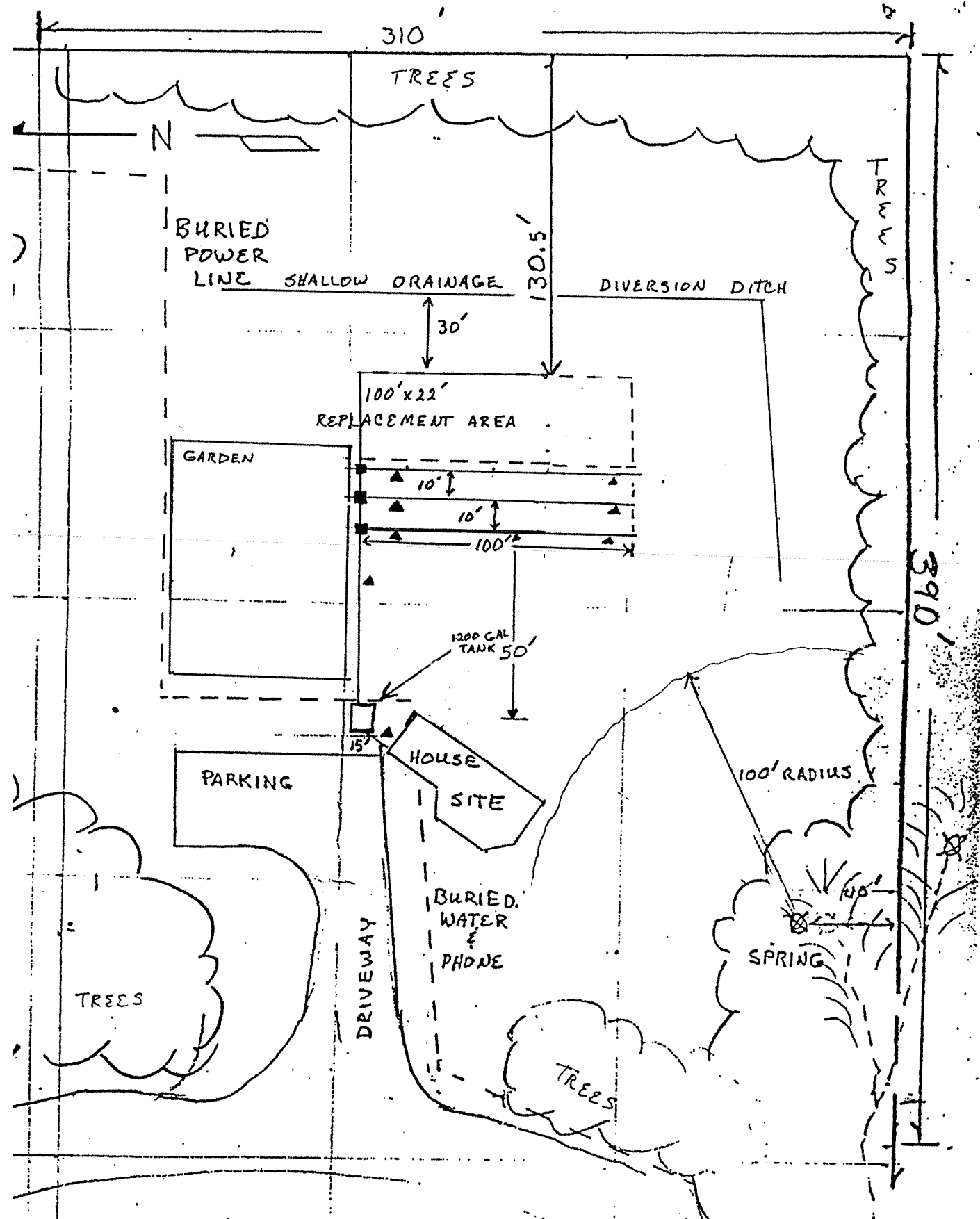
cc: Michael J. Leamy

MAY 24 1994

ASTORIA BRANCH OFFICE

SITE DEVELOPMENT PLAN

- ▲ PIPE
- DISTRIBUTION BOX



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

FOR OFFICE USE ONLY
Date Rec'd 5-24-94
Date Completed 6-24-94
Required Fee 255.00
Receipt No. 61574
Control No. 38864

FOR APPLICANT'S USE - (PLEASE PRINT)

2.8 ACRE UNSEVERED PORTION
Lot Size (Acreage or Dimensions)

CRESTVIEW-GREENWOOD CEMETERY ASSN.

MICHAEL J. LEAMY, PRESIDENT

(Property Owner's Name)

(Applicant's Name if Different from Owner)

Legal Description
of Property

8N

10W

343

1600 / 1800

CLATSOP

(Township)

(Range)

(Section)

(Tax Lot/Acct. No.)

(County)

For Parcels in Platted
Subdivisions, Indicate

(Subdivision Name)

(Lot Number)

(Block Number)

Proposed Facility

Water Supply

☒ Single Family Residence 4
(Number of Bedrooms)

☒ Public (Community System)

☐ Other _____
(Specify)

☐ Private

(Indicate: Well, Spring, Etc.)

Existing Facility

☐ Single Family Residence _____
(Number of Bedrooms)

☐ Other _____
(Specify)

APPLICATION FOR:

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

☐ Authorization Notice

Purpose of Authorization Notice

- ☐ Connect to an existing system
not currently in use
☐ Replace one mobile home with
with another or a house
☐ Replace or rebuild a house
☐ Addition of one or more bedroom
☐ Personal hardship
☐ Temporary housing
☐ Other (Specify) _____

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

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

Michael J. Leamy
(Signature)

5-23-94
(Date)

☒ Authorized Representative
☐ Licensed Installer
License No. _____

Owner's Mailing Address

Applicant's Mailing Address (if different)

CRESTVIEW-GREENWOOD CEM. ASSN

MICHAEL J. LEAMY

RT. 1 Box 901

RT. 1 Box 901

ASTORIA, OR 97103

ASTORIA, OR 97103

Phone 325-6432

Phone 325-6432

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

LAND USE COMPATIBILITY STATEMENT FOR ON-SITE SEWAGE DISPOSAL SYSTEMS

| | | | | |
|---|--|---|----------------------|---|
| APPLICANT'S NAME MICHAEL J. LEAMY CRESTVIEW-GREENWOOD CEM. ASSN. RT 1 BOX 901 ASTORIA OR 97103 | | MAILING ADDRESS MICHAEL J. LEAMY RT 1 BOX 901 ASTORIA OR 97103 <small>CITY STATE ZIP</small> | | PHONE 325-6432 |
| P L O C A T I O N | TOWNSHIP 8N | RANGE 9W | SECTION 33 | TAX LOT OR ACCT NO 1111 / 1800 |
| | SUBDIVISION/PROJECT | LOT | BLOCK | COUNTY CLATSOP |
| | <input checked="" type="checkbox"/> PROPERTY IS A LOT OF RECORD CREATED BEFORE AUGUST 1, 1981. | | | |

PROPOSED LAND USE
 CARETAKER'S RESIDENCE TO REMAIN PART OF THE
 CEMETERY PROPERTY

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

PROPERTY'S ZONING DESIGNATION

OPR

THE ABOVE PROPOSAL HAS BEEN REVIEWED AND FOUND TO BE:

☒ COMPATIBLE WITH THE LCDC ACKNOWLEDGED
COMPREHENSIVE PLAN

☐ CONSISTENT WITH THE
STATEWIDE PLANNING GOALS

☐ NOT COMPATIBLE WITH THE LCDC
ACKNOWLEDGED COMPREHENSIVE PLAN

OR

☐ NOT CONSISTENT WITH THE
STATEWIDE PLANNING GOALS

REASON FOR FINDING OF COMPATIBILITY / INCOMPATIBILITY

Conditional Use Permit issued for Caretakers Dwelling

PROPERTY IS LOCATED: (check one)

☐ INSIDE CITY

☐ INSIDE URBAN GROWTH BOUNDARY
OUTSIDE CITY LIMITS

☒ OUTSIDE URBAN
GROWTH BOUNDARY

subject to conditions

LAND USE AUTHORITY

Clatsop County Planning and Development

| | | |
|----------------------------------|-------------------------|------------------------|
| SIGNED Diana C. Nelson | TITLE Planner | DATE 5/24/94 |
|----------------------------------|-------------------------|------------------------|

☐ CITY/COUNTY CONCURRENCE IF INSIDE URBAN GROWTH BOUNDARY

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

DEPARTMENT OF ENVIRONMENTAL QUALITY

North Coast Branch Office

17 North Highway 101

Warrenton, OR 97146

Phone (503) 861-3280

DEPARTMENT OF

ENVIRONMENTAL

QUALITY

Date: May 23, 1994

Crestview-Greenwood Cemetery Association

Route 1 Box 901

Astoria, OR 97103

Re: Site Evaluation Approval for On-Site Sewage Disposal
T8N, R9W, Section 34, Tax Lot 1800, Clatsop County,
2.8 Acres.

Dear Sirs:

Department personnel have conducted an evaluation on the above described property for a single family residential building site in the area you proposed for on-site sewage disposal. This evaluation and report is based upon current Department of Environmental Quality regulations governing on-site sewage disposal, OAR Chapter 340, Divisions 71, 72 & 73.

Based upon the results of this study, on-site sewage disposal appears feasible for the installation of a standard serial distribution system for both the original system and replacement system, as described in the enclosed construction detail and setback sheets.

Only a limited area of this property appears suitable for on-site sewage disposal. Please refer to the enclosed diagram for specifics concerning the location, boundaries and/or special conditions of the specific approved site.

Please note that this approval is site specific to the area tested and does not address or warrant the potential or feasibility of locating the system elsewhere on the property.

This approval is limited to a dwelling of **four (4)** bedrooms, maximum. The definition of "bedroom" means any room within a dwelling which meets minimum habitation criteria as interpreted and administered by the local building official.



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

DFQ-1

Crestview-Greenwood Cemetery Association
Page 2
May 23, 1994

A septic construction permit is required before any work can begin or take place on the system or any part thereof. A detailed scale drawn plot plan of the proposed development and the system must accompany the permit application. The current permit fee totals \$255.00 for this type of system (fees are subject to change without notice). Only the property owner or a State licensed installer can construct or participate in the construction of any on-site sewage disposal system installation or part thereof.

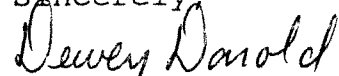
This approval runs with the land as identified and is transferable. Technical rule changes will not invalidate the approval; however, a different type system may be required in accordance with the rules in effect at the time of property development.

This approval will remain valid until the system is installed and approved. However, if conditions on the subject property or adjacent properties are changed or altered in any manner which would prohibit issuance of a construction permit because of a conflict with current State rules, this approval would be considered null and void.

The approval of this property and the conditions set forth in no way waive or supersede requirements established by the zoning of the area. A construction permit will be subject to review and approval by the Clatsop County Planning Department.

Technical information pertaining to the site evaluation is available upon request. If you have any questions, or would like further information, please feel welcome to contact the DEQ North Coast Branch Office at (503) 861-3280.

Sincerely,



Dewey W. Darold, R.S.
Environmental Specialist
Northwest Region
Water Quality

enc: Site Diagram
Construction Detail Sheet
Setback Listing

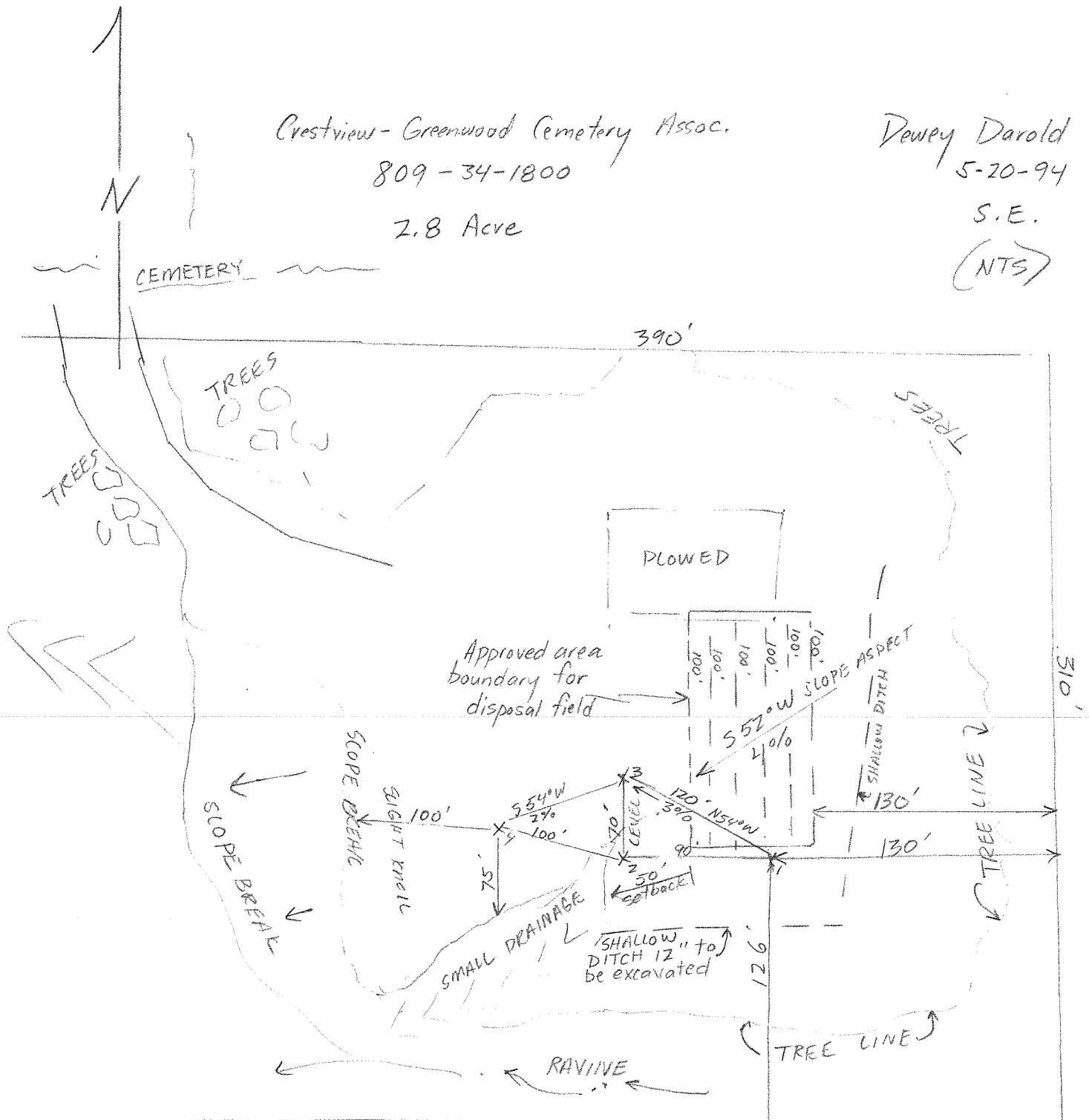
cc: Michael J. Leamy

2.8 Acre

5-20-94

S.E.

(NTS)



STANDARD SYSTEM CONSTRUCTION DETAIL SHEET

Date 5-23-94

Applicant Crestview-Greenwood Cemetery Association

Tax Lot 1800 Section 34 Twp 8 Rng 9 Acreage 2.8

X 1. For the installation of an STANDARD SEWAGE DISPOSAL SYSTEM on the above property, the following construction specifications shall apply:

X The septic tank shall have minimum liquid capacity of 1000 gallons.

X The disposal field shall be constructed in Serial distribution with a MAXIMUM TRENCH DEPTH of 24 inches and a minimum trench depth of 24 inches. There must be at least 12 inches of backfill over the top of the drainrock, measured from the natural ground surface.

X With the soil conditions on this site, 100 lineal feet of disposal trench will be required per 150 gallons maximum projected daily sewage flow. For the proposed development, a minimum of 300 total lineal feet of disposal trench is required. Disposal trenches shall be constructed 2 feet wide on 10 foot minimum centers with no individual trench exceeding 125 feet in length. The trenches and distribution piping shall be installed within one (1) inch of level, contoured to the natural ground surface.

 A curtain drain is required as a component of this system. This groundwater interceptor shall be constructed 12 inches wide by inches deep with inches of clean drainrock placed over a 4 inch perforated collection pipe. The trench and collection pipe shall be constructed on a grade of 0.2 to 0.4 feet of fall per 100 feet of line. A minimum 10 foot upslope setback must be maintained from the disposal trenches. The collection piping shall be exhausted by a non-perforated pipe to a point below and away from the disposal field. The end of the outfall shall consist of heavy duty pipe with the outlet protected by a flap gate or grate.

X An effluent lift pump may be necessary to construct the disposal field in the approved area at the correct trench depths.

X The top of the disposal trench drainrock shall be protected by filter fabric.

X Specific construction setback requirements are outlined in the enclosed listing.

 2. The following conditions shall apply to this system installation:

 For sanitation purposes, the minimum lot size for this single building site is .

MINIMUM SETBACK REQUIREMENTS

Date 5-23-94

Applicant Crestview-Greenwood Cemetery Association

Parcel Lot 1800 Section 34 Twp 8 Rng 9 Acreage 2.8

| SETBACK REQUIRED (as marked) | DISPOSAL FIELD OR AREA ¹ | TREATMENT AND DISTRIBUTION UNITS ² |
|---|--|--|
| <input checked="" type="checkbox"/> Groundwater Supplies (wells) ³ | 100' | 50' |
| <input checked="" type="checkbox"/> Springs | | |
| Upslope from system | 50' | 50' |
| Downslope from system | 100' | 50' |
| <input type="checkbox"/> Surface Public Waters ⁴ | 100' | 50' |
| For Sand Filter System (only) | 50' | 50' |
| <input checked="" type="checkbox"/> Intermittent Streams ⁵ | 50' | 50' |
| <input type="checkbox"/> Groundwater Interceptors ⁶ | | |
| On a slope 3% or less | 20' | 20' |
| On a slope greater than 3% | | |
| - Upslope from system | 10' | 10' |
| - Downslope from system | 50' | 25' |
| <input type="checkbox"/> Cuts Manmade ⁷ | _____' | _____' |
| <input type="checkbox"/> Escarpments ⁸ | _____' | _____' |
| <input type="checkbox"/> Curtain Drains | | |
| Upslope from system | 10' | 10' |
| Downslope from system | 50' | 25' |
| <input checked="" type="checkbox"/> Property Lines | 10' | 10' |
| <input checked="" type="checkbox"/> Water Lines | 10' | 10' |
| <input checked="" type="checkbox"/> Building Foundations (all) | 10' | 5' |
| <input type="checkbox"/> Other _____ | _____' | _____' |

Special Conditions: 50' setback to south depressional drainage
way. A small 12" shallow excavated ditch to be installed
10' upslope of most upslope disposal trench to divert
any surface water over drainfield.

¹ Includes all disposal trenches, "bottomless" sand filter, seepage beds and replacement area.

² Includes septic tank, effluent sewer, header pipes, drop boxes, distribution box, sand filter, dosing tank, pressure line, etc.

SITE EVALUATION FIELD WORKSHEET

Cloudy/Rains recently/overcast.

Tax Reference 809-34-1800

Evaluator Dewey Darold

Applicant Crestview - Greenwood Cemetery Ass. Date 5-20-94

Parcel Size 2.8 Acre w/ 19.40 Acres Govt lot #9
Grave digger on site

| | | Soil Matrix Color and Mottling (Notation), % Coarse Fragments, Roots, Structure, Layer Limiting Effective Soil Depth, etc. | |
|--------------|---------|--|--|
| Depth | Texture | | |
| Pit 1 SAT | 0"-20" | SIL | 10YR 3/2 v. dk. grayish brown, mod fine granular, fri |
| | 20"-30" | L | 10YR 6/3 lt. yellowish brown, wk fine sbk, fri, slightly cemented / single grain |
| | 30"-48" | FSL / S | Variegated / 7.5YR 5/8 + 10YR 7/2 bleached out zones, single grain, slightly cemented. |
| | 48"-57" | MS | 2.5Y 7/2 bleached-out throughout, single grain, loose * Scum line at 18" |
| Pit 2 SAT | 0"-18" | SIL | Same as test pit #1, "A", horizon, few fine roots |
| | 18"-24" | L | Same as test pit #1, A ₂ horizon |
| | 24"-34" | FSL | 10YR 6/2 w 7.5YR 5/8 stains, massive, firm, slightly cemented, tubular pores |
| | 34"-57" | MS | 7.5YR 5/8 w/ 2.5YR stains, massive, fri, - v. friable, loose |
| Pit 3 SAT | 0"-5" | SIL / L | Woody debris / Fill |
| | 5"-12" | L / SIL | Same as test pit #1, A ₁ horizon |
| | 12"-24" | SL | 10YR 6/3 + 4/3 variegated, wk sbk, fri, common fine tubular pores |
| | 24"-29" | S | 10YR 6/2 w/ 7.5YR 5/8 macro stains, black-out zones, single grain / tub. pores. |
| | 29"-58" | S | 10YR 5/6 w/ 10YR 7/2 stains, slightly - FeO ₂ pan, FSD one side pit. |
| Pit 4 SAT | 0"-9" | SIL | 10YR 4/2, mod-strong fine gran, fri, few roots |
| | 9"-22" | L | 10YR 4/6, dk-sbk → massive, fri |
| | 22"-44" | SL | 10YR 5/4, wk-mod. sbk, fri |
| | 44"-56" | SL / S | 2.5YR 6/3 w/ 7.5YR 5/8 macro stains |

Landscape Notes Upland hillslope / cleared site - logged

Slope 0-4% Aspect S52°W Groundwater Type Temporary

Other Site Notes Surface water over land flow apparent by erosion.

SYSTEM SPECIFICATIONS

Type System: _____ Design Flow _____ gpd Disposal Field Size _____ Linear Feet
Initial _____ System Sizing _____ / 150 g. Max. Depth Absorption Facility (in) _____
Replacement _____ System Sizing _____ / 150 g. Max. Depth Absorption Facility (in) _____

Special Conditions _____

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

OFFICE USE ONLY
Date Rec'd 4-25-94
Date Completed 5-23-94
Required Fee 265.00
Receipt No. 61532
Control No. _____

OR APPLICANT'S USE - (PLEASE PRINT)

CRESTVIEW - GREENWOOD
CEMETERY ASSOCIATION

(Property Owner's Name)

31± ACRES (2.8 ACRE UNSEVERED)
HOMESITE
Lot Size (Acreage or Dimensions)

MICHAEL J. LEAMY
(Applicant's Name if Different from Owner)

Legal Description
of Property

8 N 9 W 34 1600 (1800) (301) CLATSOP
(Township) (Range) (Section) (Tax Lot/Acct. No.) (County)

or Parcels in Platted
Subdivisions, Indicate

(Subdivision Name)

(Lot Number)

(Block Number)

Proposed Facility

Water Supply

☒ Single Family Residence 4
(Number of Bedrooms)

] Other _____
(Specify)

☒ Public (Community System)

[] Private _____
(Indicate: Well, Spring, Etc.)

Existing Facility

] Single Family Residence _____
(Number of Bedrooms)

] Other _____
(Specify)

APPLICATION FOR:

☒ Site Evaluation Report

] ~~Permit to Construct On-Site Sewage Disposal System~~

] ~~Permit to Repair On-Site Sewage Disposal System~~

] ~~Permit for Alteration of On-Site Sewage Disposal System~~

] ~~Permit Renewal~~

] Existing System Report

] Plan Review

] Other (Specify) _____

[] Authorization Notice

Purpose of Authorization Notice

[] Connect to an existing system
not currently in use

[] Replace one mobile home with
with another or a house

[] Replace or rebuild a house

[] Addition of one or more bedroom

[] Personal hardship

[] Temporary housing

[] Other (Specify) _____

This application will be returned if it is not filled out completely and accompanied by the appropriate fee and attachments required in the guidance packet. Your site must be prepared according to instructions in the guidance packet before action can be taken on this application. By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agent permission to enter onto the above described property for the purpose of this application.

Michael J. Leamy
(Signature)

3-9-94
(Date)

☒ Authorized Representative
[] Licensed Installer
License No. _____

Owner's Mailing Address

Applicant's Mailing Address (if different)

MICHAEL J. LEAMY

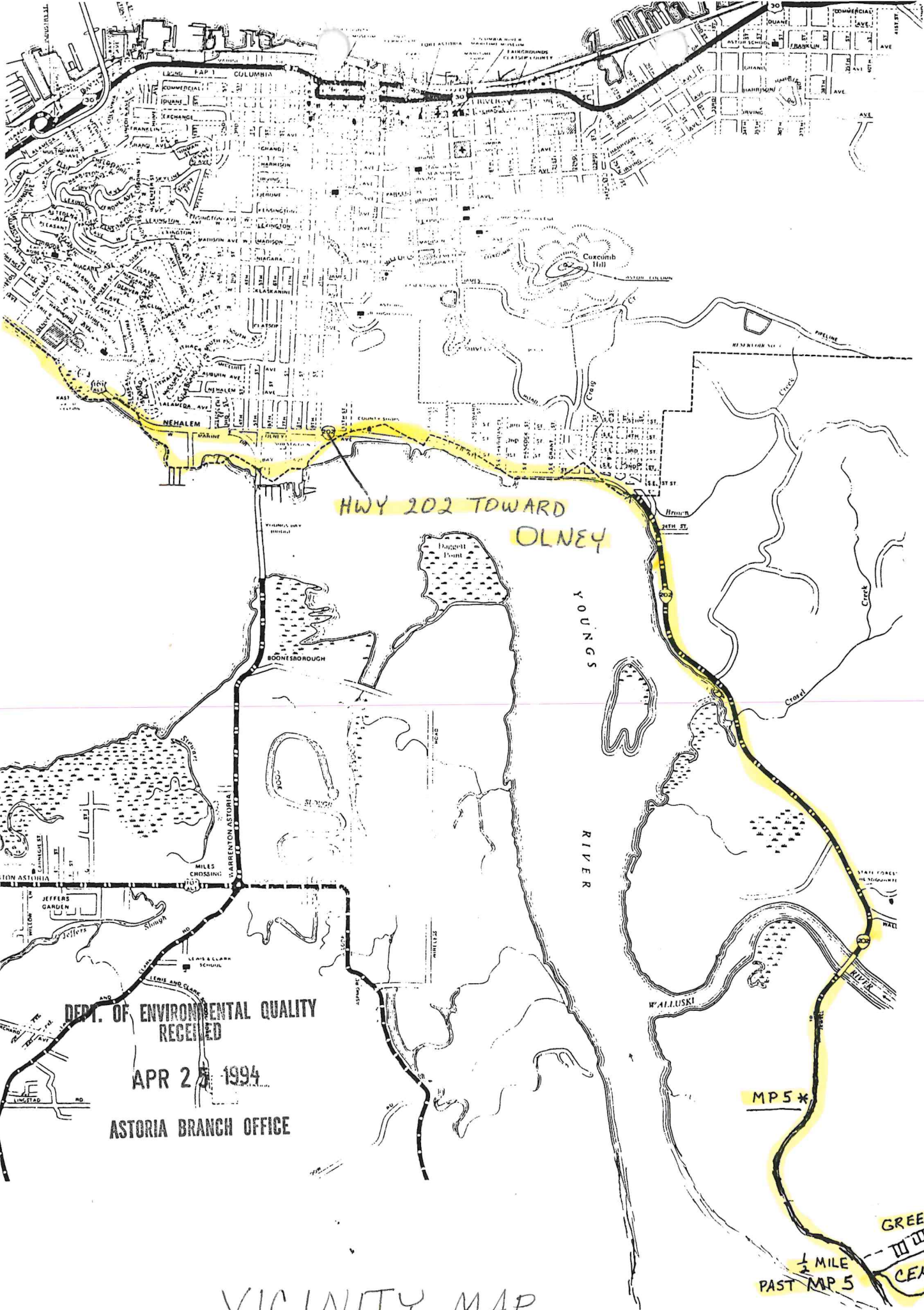
RT 1 BOX 901

ASTORIA OR 97103

Phone 325-6432

Phone _____

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



HWY 202 TOWARD
OLNEY

YOUNGS

RIVER

MP 5 *

GREENWOOD
CEMETERY

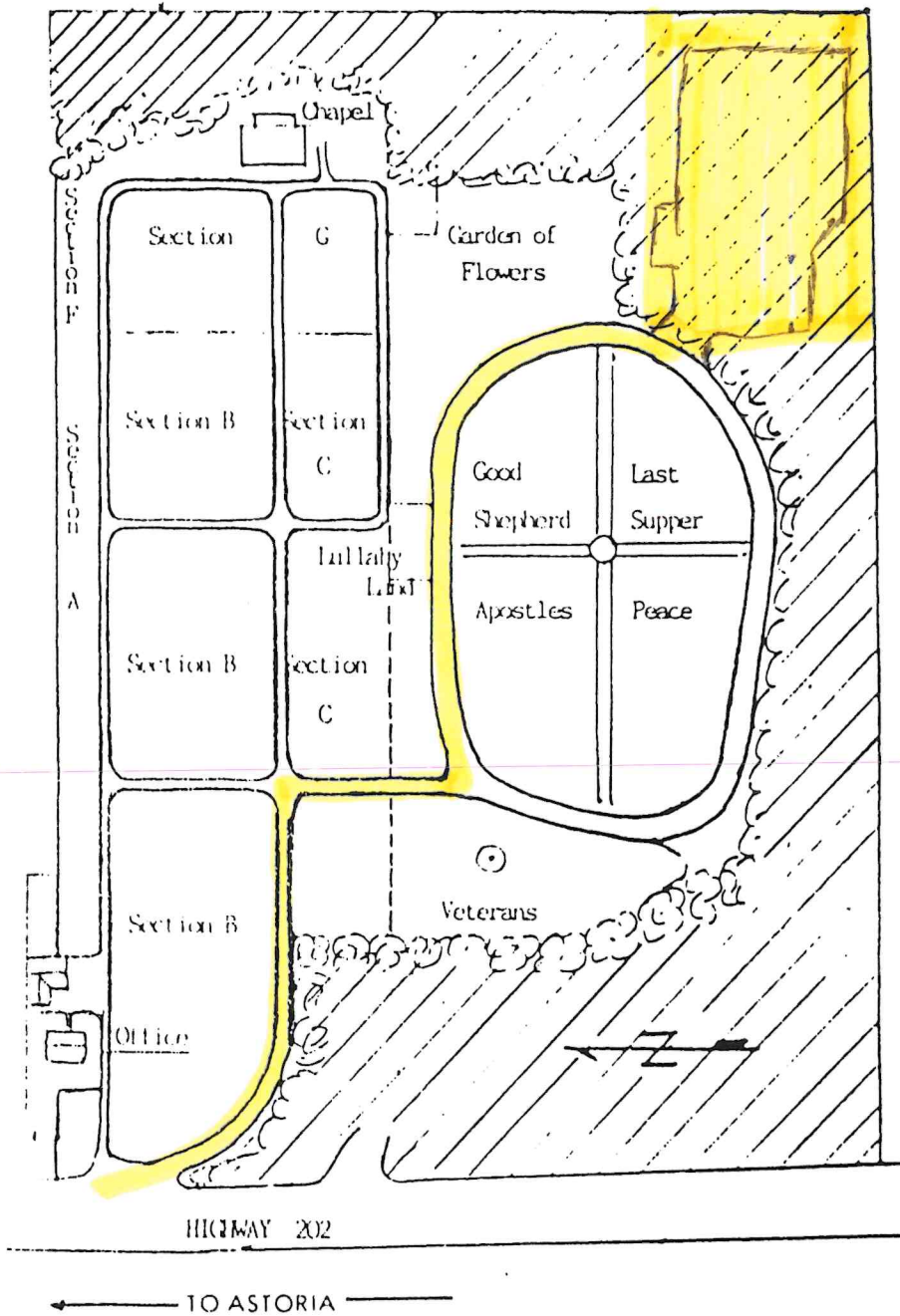
1/2 MILE
PAST MP 5

DEPT. OF ENVIRONMENTAL QUALITY
RECEIVED

APR 25 1994

ASTORIA BRANCH OFFICE

VICINITY MAP

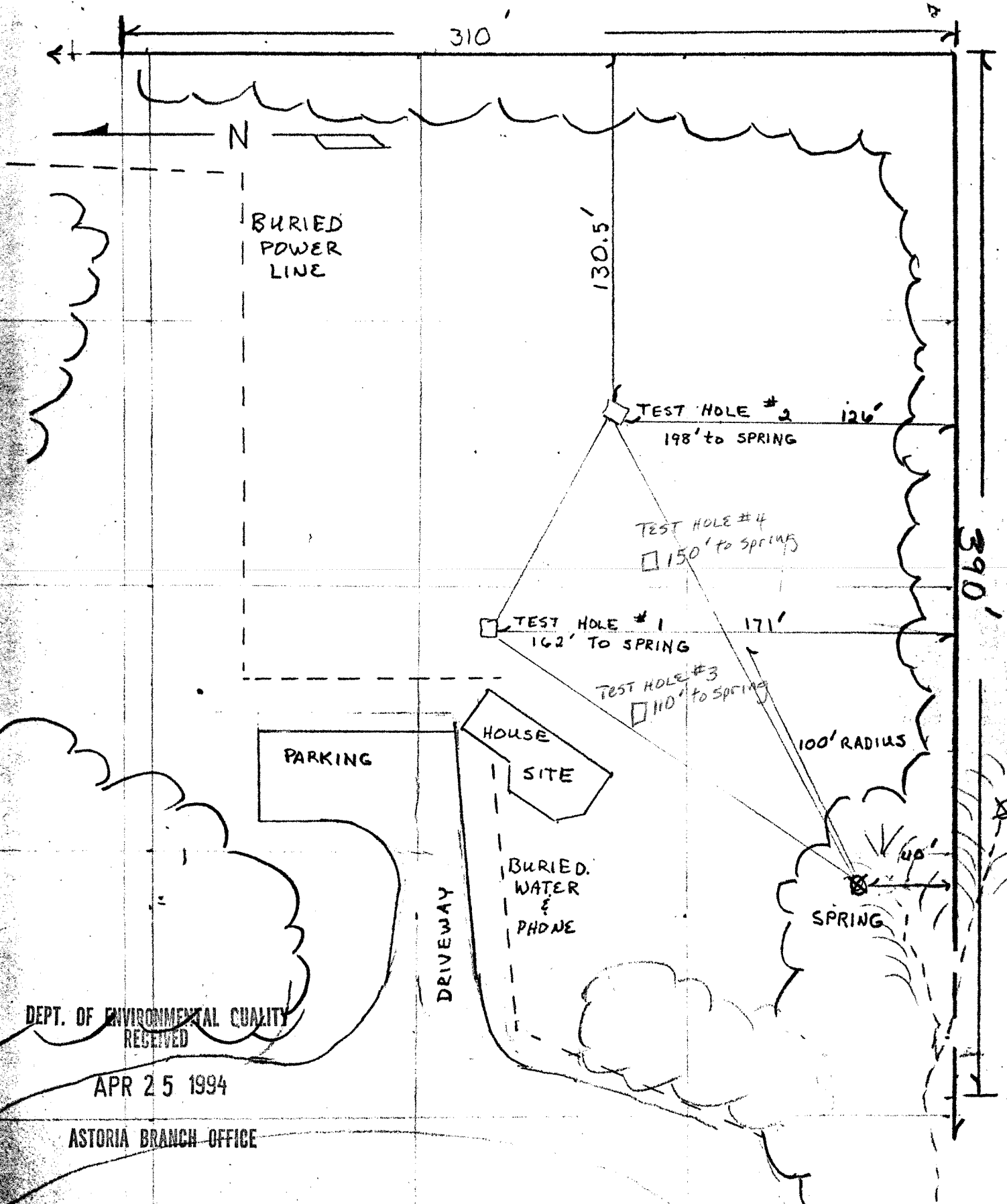


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ASTORIA BRANCH OFFICE

YOUNGS RIVER



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See Map 8 9 28

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RECEIVED

APR 25 1994

ASTORIA BRANCH OFFICE