



# Residential Septic Site Evaluation Approval

248-18-000609-EVAL

DEQ Medford Office  
221 Stewart Avenue  
Suite 201  
Medford, OR 97501  
541-776-6010  
OnsiteMedford@deq.state.or.us  
Website: oregon.gov/deq

**Date issued:** 09/19/2018  
**Application status:** Site Evaluation Approved  
**Work description:** SITE EVALUATION

**Applicant:** SNOOK, DAVID  
**Address:** 3580 REDWOOD AVE.  
GRANTS PASS OR 97527  
**Phone:** 5412183995  
**Email:** DAVIDSNOOKGCLLC@GMAIL.COM

**Owner:** DAVID SNOOK  
**Address:** 3580 REDWOOD AVE.  
GRANTS PASS OR 97527  
**Property address:** 0 Redwood Ave, Grants Pass, OR 97527  
**Parcel:** 360628B002600 - Primary      **Township:** 36S      **Range:** 6W      **Section:** 28

**Lot size:** N/A      **Water supply:** Well  
**Zoning:** N/A      **City/County/UGB:** N/A  
**County:** Josephine

**Directions to Property:** GO TO 4788 REDWOOD AVE. AND FOLLOW BLACK & YELLOW CAUTION TAPE UP DRIVEWAY AND TO TEST PITS.

**Proposed use of structure:** 4 BEDROOM SFR  
**Category of construction:** Single Family Dwelling

**General Specifications**

**Max peak design flow:** 450 gpd.      **Proposed gallons per day:** 450 gpd.  
**Min septic tank volume:** 1000 gal.      **Min dosing tank volume:** N/A

**System Specifications**

<b>System type:</b>	<i>Initial System</i>	<i>Replacement Area</i>
<b>System distribution type:</b>	Standard	Standard
<b>Distribution method:</b>	Serial	Serial
	Serial	Serial

**Trench Specifications**

<b>Trench linear feet:</b>	<i>Initial System</i>	<i>Replacement Area</i>
	300 linear ft.	300 linear ft.
<b>Max depth:</b>	30 in.	30 in.
<b>Min depth:</b>	24 in.	24 in.

**Special Requirements**

<b>Drainfield type:</b>	<i>Initial System</i>	<i>Replacement Area</i>
	Standard	Standard

CALL BEFORE YOU DIG...IT'S THE LAW

ATTENTION: Oregon law requires you to follow rules adopted by the Oregon Utility Notification Center. Those rules are set forth by Oregon Administration Rules. You may obtain copies of the rules by calling the center. (Note: The telephone number for the Oregon Utility Notification Center is 1-800-332-2344.)

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

This site approval runs with the land and will automatically benefit subsequent owners. This site approval is valid until the approved system is constructed under a DEQ construction permit or unless the site is altered without approval from this office. Alterations/excavations/lot line adjustments made to the site, or placement of wells or utilities, etc., may invalidate this approval

If you disagree with the decision of this report, you may apply for a site evaluation report review. The application for a site evaluation report review must be submitted to DEQ in writing within 60 days after the site evaluation report issue date and must include the site evaluation review fee in OAR 340-071-0140 Table 9A. A senior DEQ staff person will be assigned the site evaluation report review application.

You may apply for a variance to the onsite wastewater treatment system rules. The variance application must include a copy of the site evaluation report, plans and specifications for the proposed system, specify the rule(s) to which a variance is being requested, demonstrate the variance is warranted, and include the variance fee in OAR 340-071-140 Table 9C. A variance may only be granted if the variance officer determines that strict compliance with a rule is inappropriate or special physical conditions render strict compliance unreasonable, burdensome or impractical. A senior DEQ variance officer will be assigned the variance application.

Marty Easter

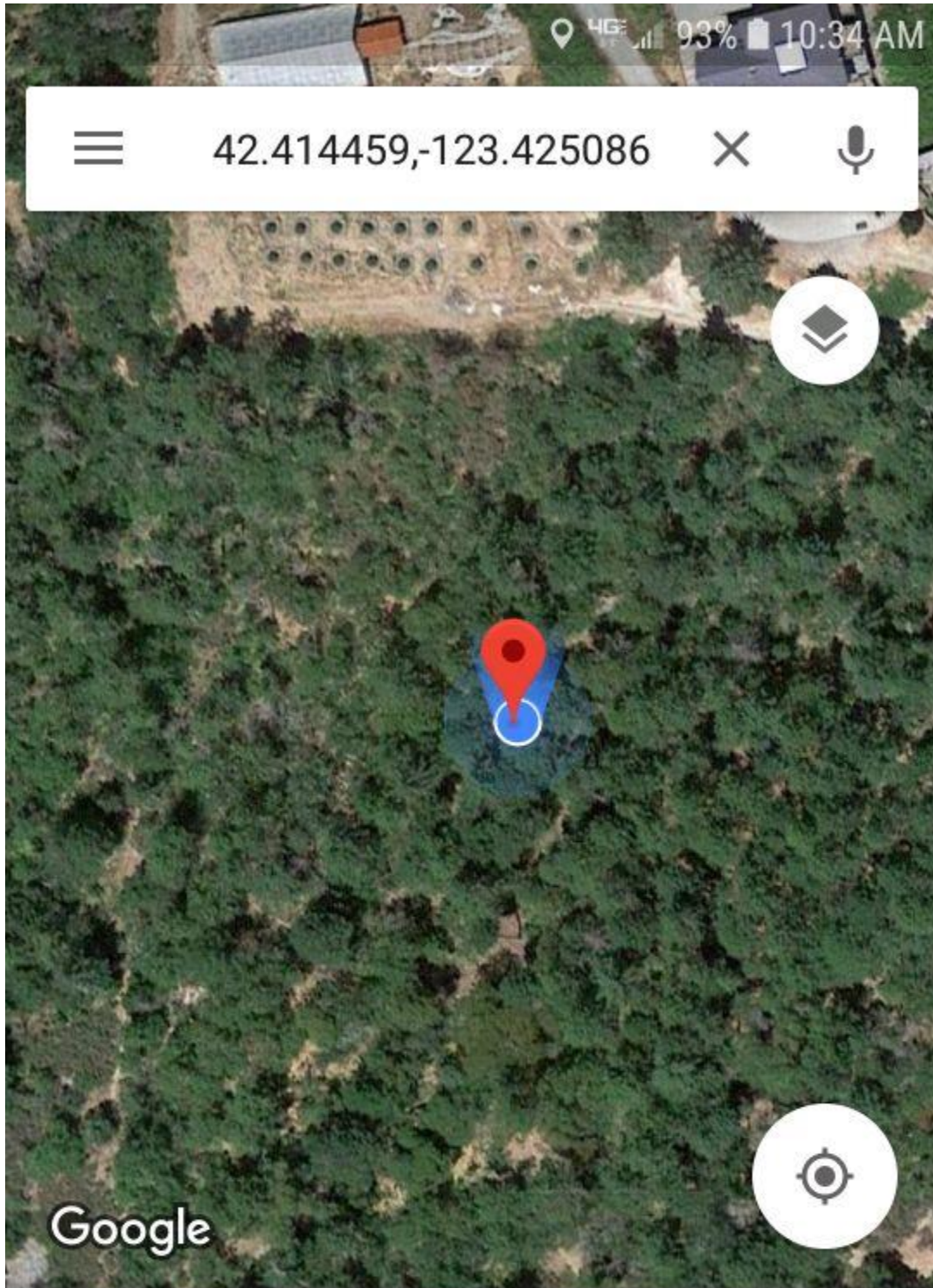
Onsite Wastewater Specialist

9/19/18

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## Dropped Pin

near R320522, Oregon 97527 ·  1 min

 MORE INFO

 DIRECTIONS



2600 JL  
 5/6/02  
 10-11-12

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
Test Pit 1	0-8	SL	10YR 3/3, WSBkY, roots 2VF, IF, <del>odor</del>
	8-38	SCL	10YR 4/4, WSBkY, roots VF, F, <del>odor</del>
	38-54	—	Weathered Fractured Bedrock.
			ESD 38
Test Pit 2			Similar to Test Pit 1
Test Pit 3			
Test Pit 4			
Test Pit 5			
Test Pit 6			

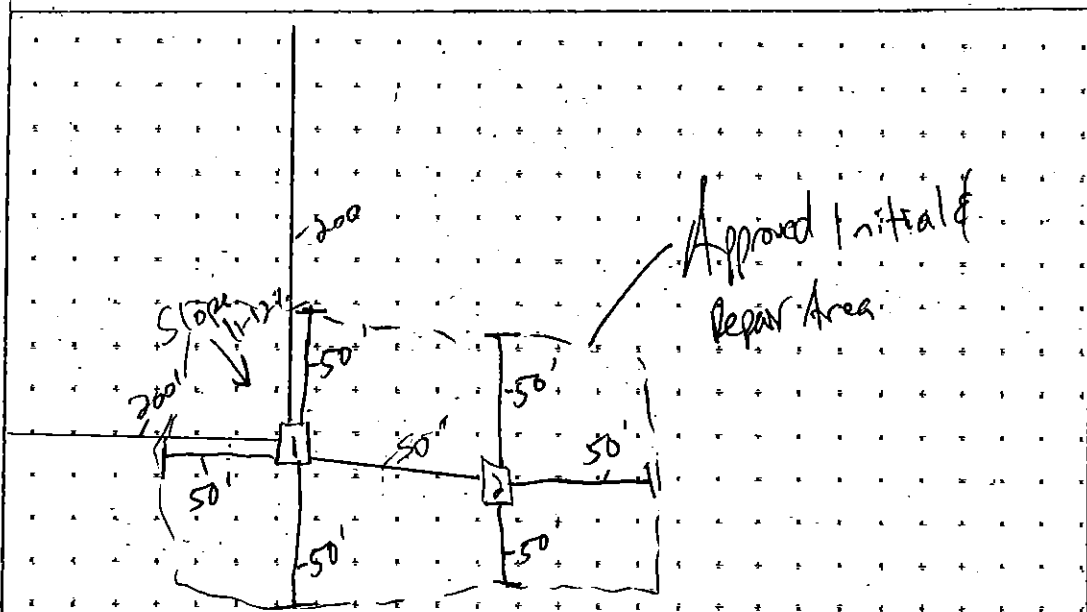
Landscape Notes: \_\_\_\_\_

Slope: 1-12 Aspect: S Groundwater Type:  Permanent  Temporary

Other Site Notes: \_\_\_\_\_

Application No.: \_\_\_\_\_

SITE PLAN



PLAN APPROVED.  
BY D.E.O.

Date: 9/19/18 Signed

+ Not to Scale

Application # \_\_\_\_\_



State of Oregon  
Department of  
Environmental  
Quality

# Application for Onsite Sewage Treatment System

Send this application  
to the appropriate  
DEQ office

For DEQ Use Only:		Date Stamp
Date received	7-26-18	
Fee paid	\$ 800.00	
Receipt number		
Application number	000009-EVAL	
Date of 1 <sup>st</sup> response		
Date of 2 <sup>nd</sup> response		
Date of final response		
Date of completion		
Scanned	Data Entry	

## A. Property Owner Information

Name: DAVID J SMUCK Mailing Address (Street or PO Box, City, State, Zip Code): 3580 Rosewood Ave, Grants Pass, OR 97527 Phone Number: 541-218-3995

## B. Legal Property Description

Township: 36 Range: 06 Section: 28-BC Tax Lot: 2600 Tax Account Number: R320522 Acreage or Lot Size: 7.38  
County: Josephine Subdivision Name: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

Property Address: 3580 Rosewood Ave City: Grants Pass State: OR Zip Code: 97527

Directions to Property: Go N on 4788 Rosewood Ave and follow Black + Yellow Caution Tape up driveway and to test pits

## C. Existing Facility / Proposed Facility / Water Information

Existing Facility:	Proposed Facility:	Water Supply:
<input type="checkbox"/> Single Family Residence	<input checked="" type="checkbox"/> Single Family Residence	<input type="checkbox"/> Public _____ Name
Number of Bedrooms: _____	Number of Bedrooms: <u>4</u>	<input checked="" type="checkbox"/> Private <u>well</u> Well, Spring, Shared
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	

## D. Type of Application

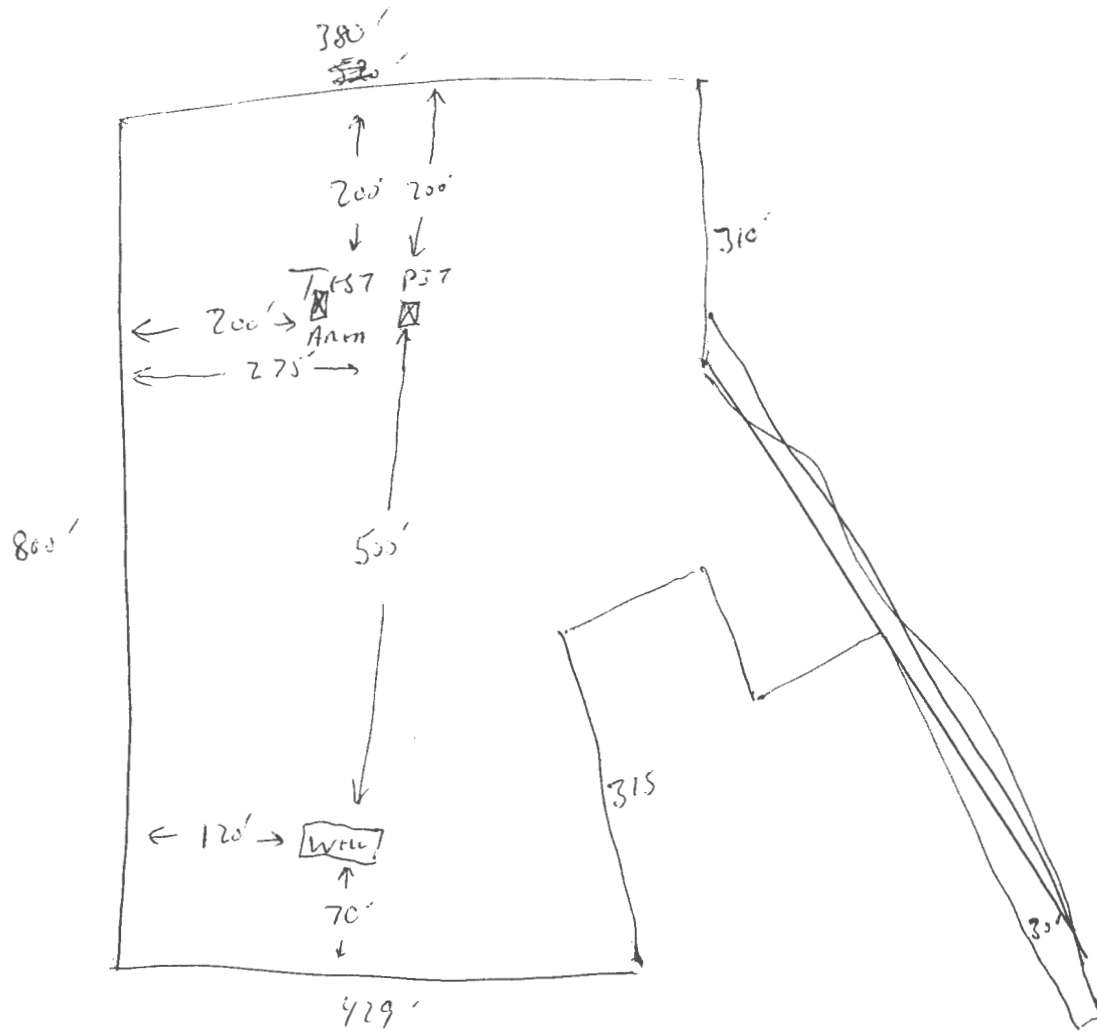
<input checked="" type="checkbox"/> Site Evaluation	<input type="checkbox"/> Renewal Permit	<input type="checkbox"/> Authorization Notice for: <input type="checkbox"/> Connecting to an Existing System Not in Use <input type="checkbox"/> Replacing a Mobile Home or House with Another Mobile Home or House <input type="checkbox"/> The Addition of One or More Bedrooms <input type="checkbox"/> Personal Hardship <input type="checkbox"/> Temporary Housing <input type="checkbox"/> Other-please specify _____
<input type="checkbox"/> Construction	<input type="checkbox"/> Existing System Evaluation	
<input type="checkbox"/> Permit Repair <input type="checkbox"/> Major <input type="checkbox"/> Minor	<input type="checkbox"/> Permit Transfer	
<input type="checkbox"/> Alteration Permit <input type="checkbox"/> Major <input type="checkbox"/> Minor	<input type="checkbox"/> Permit Reinstatement	

If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes.

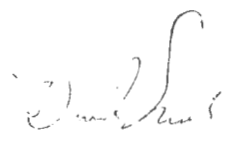
By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agents permission to enter onto the above described property for the sole purpose of this application.

Signature: David J Smuck Date: 7-26-2018  
Applicant's Name - Please Print Legibly: DAVID J SMUCK Applicant's Phone Number: 541-218-3995 Applicant's E-mail Address: dav.smuck@telnet.com  
Applicant's Mailing Address: 3580 Rosewood Ave Grants Pass, OR 97527

Applicant is the  Owner  Authorized Representative  Licensed Septic Installer  
 Authorization Attached  
Installer's Name: \_\_\_\_\_

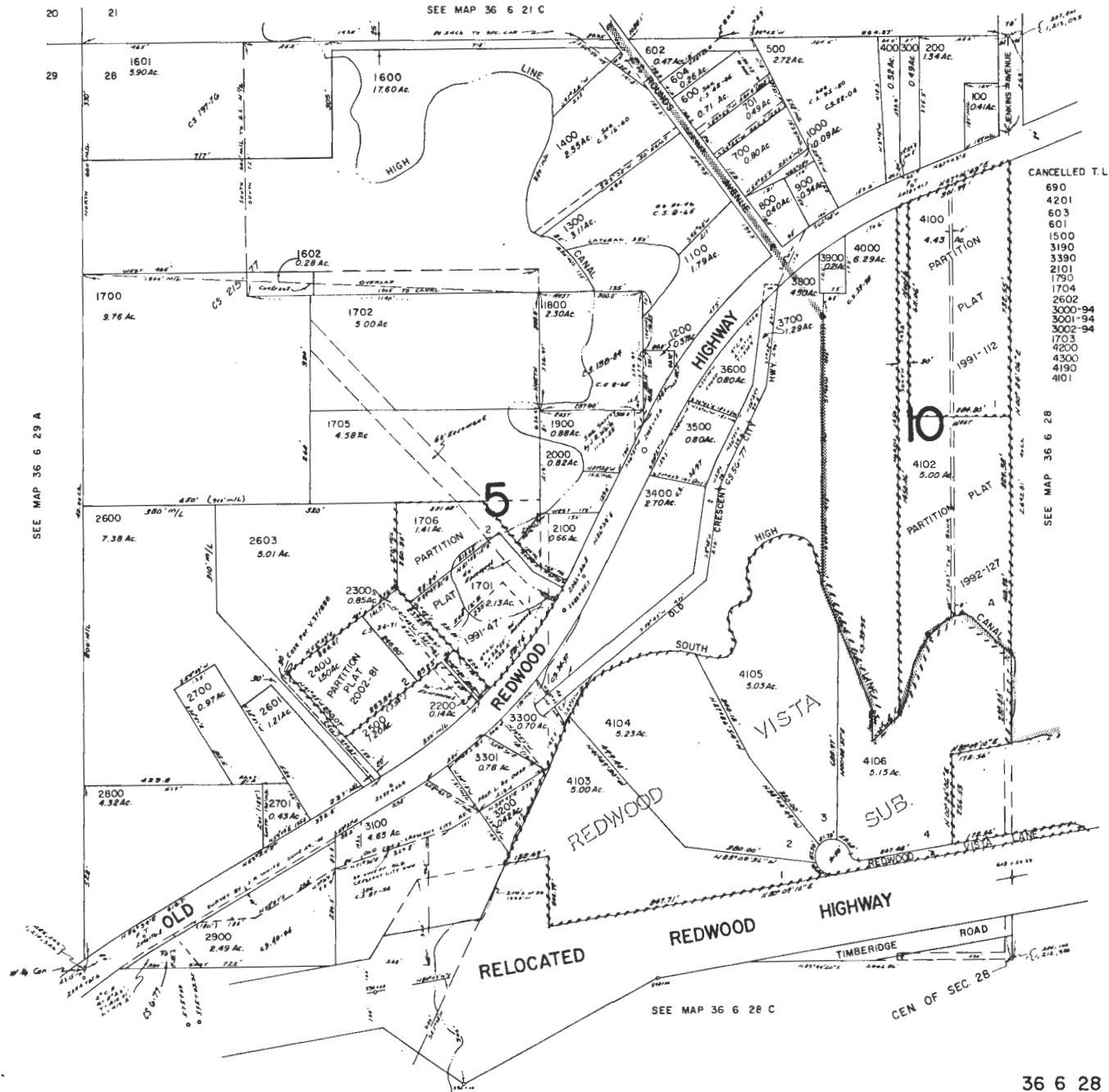


SITE EVALUATION map  
 DAVE J SNOOK 7-26-18  
 7.38 AC  
 R 320522  
 36-06-28 TL 260


 7-26-2018

This map was prepared for  
assessment purposes only.

1"=200'



- CANCELLED T.L.
- 690
  - 4201
  - 603
  - 601
  - 1500
  - 3190
  - 3390
  - 2101
  - 1790
  - 1704
  - 2602
  - 3000-94
  - 3001-94
  - 3002-94
  - 1703
  - 4200
  - 4300
  - 4190
  - 4101

SEE MAP 36 6 29 A

SEE MAP 36 6 21 C

SEE MAP 36 6 28

SEE MAP 36 6 28 C

CEN OF SEC 28