

Existing System Evaluation Report for Onsite Wastewater Systems



State of Oregon Department of Environmental Quality
Onsite Program
165 East 7th Avenue, Suite 100
Eugene, Oregon 97401

Please answer the following questions as completely as possible. If you are unable to fill out any part of this form indicate in writing why these sections were left blank. Refer to OAR 340-071-0155. For more information, visit www.oregon.gov/DEQ/WQ/pages/onsite/septicmart.

Septic System Owner-Provided Information:

Property Owner(s)(Sellers): Donald Sunkler Telephone: 509 261 9069

Site Address: 92457 Airport Rd City: Sixes Zip Code: 97476

County: Curry Lot Size: 19.5 Acres/Square Feet (circle units)

Legal Description: 315 15w 31 TL 100

Age of wastewater treatment system NA (years) Is there a service contract for system components? No

Date the septic tank was last pumped NA (please attach receipt if available)

Number of people occupying dwelling _____ If unoccupied, for how long has it been vacant? 4 yrs

The above information is true and to the best of my knowledge.

Date (DD/MM/YYYY)

Signature of Owner

Name of person performing inspection (please print): L. WAYNE MOORE

Certification:

- Installer
- Maintenance Provider
- National Association of Wastewater Technicians
- Other: DEQ approved in writing (please describe)
- Professional Engineer
- Environmental Health Specialist
- Wastewater Specialist

Certification Number: R169

WM LOGGING & CONSTRUCTION

L. WAYNE MOORE
P.O. BOX 298

Business name W-M Logging & Const Email _____

SIXES, OR 97476

Business address P.O. Box 298 Sixes Or

541-348-9927/541-253-6028

Date of Inspection: 8-26-22 (DD/MM/YYYY)

CCB 189370 DEQ38482

I hereby certify, by my signature, that I meet all of the qualifications required to perform onsite wastewater system inspections in the state of Oregon pursuant to OAR 340-071-0155.

8-30-22
Date (DD/MM/YYYY)

[Signature]
Signature of Qualified Septic System Inspector

1. **General System Information:**

The Existing System Evaluation Report form contains 7 pages. Some of the questions on this form may not pertain to the system being inspected, as there are many system designs. If you (the septic system inspector) are unable to answer any of the questions on this form please indicate, in writing, why this information was not available at the time the inspection was completed.

- The existing septic system consists of (check all that apply):

<input checked="" type="checkbox"/>	Septic Tank	<input type="checkbox"/>	Cesspool
<input checked="" type="checkbox"/>	Disposal Trenches/ Leach Lines	<input type="checkbox"/>	Capping Fill
<input type="checkbox"/>	Seepage Bed	<input type="checkbox"/>	Sand Filter
<input type="checkbox"/>	Other (please describe) _____		

Note: If the system is a seepage bed or cesspool contact your local County or DEQ office for further guidance.

- There is a permit for the septic system Yes No *NA*
- Permit Number N.A.
- Date septic system installed: N.A. (YYYY) No record of installation date

- All plumbing fixtures are connected to the septic system Yes No *unknown*

If you answered "No," please describe below:

House is built on mono slab route of plumbing fixtures unknown

- Additional Comments:

2. **Overall Septic System Status**

- Discharge of sewage to the ground surface Yes No
- Discharge of sewage to surface waters Yes No
- Sewage backup into plumbing fixtures Yes No

- Additional Comments:

3. Septic tank

In order to fully describe the condition of the tank, the septic tank may need to be pumped. Please indicate below if the septic system tank was pumped during the course of *this* inspection.

- Septic tank was pumped during the course of *this* inspection Yes No
- If the septic tank was **NOT** pumped during the course of *this* inspection, please explain below, e.g. septic system owner declined to have the tank pumped etc:

S.T. INSPECTED / MINIMAL SOLIDS + SLUDGE

- The septic tank material is:

- Concrete
- Steel
- Plastic
- Fiberglass
- Other (explain) _____
- Unknown

- Is the septic tank accessible? Yes No
 - Septic tank volume (in gallons) 1500
 - Septic tank risers are at ground level Yes No Above ground level
 - Tank appears to be watertight and in good condition Yes No
- If you answered "No," please describe the condition of the septic tank below. For example, evidence of gas corrosion, cracks, leaks, etc.

- Septic tank lid(s) is intact Yes No
- Septic tank baffles and elbows are intact Yes No
- Effluent filter is present Yes No
- Effluent filter is free of debris Yes No
- Liquid level in tank relative to invert of outlet At Above Below slightly
- Scum layer _____ (inches) Sludge layer _____ (inches)
- Scum and Sludge layer more than 35% of the *total* tank volume Yes No

- Additional Comments:

4. Dosing tank / Pump Basin

Dosing tanks, where present, have a pump that sends effluent to the soil absorption field (leach field). Not all septic system designs have a dosing tank.

- The septic system has a dosing tank Yes No
(If "No," skip the rest of section 4)
- Dosing tank capacity 500 (gallons)
- Dosing tank material concrete
- Dosing tank appears to be watertight and in good condition Yes No
- Dosing tank lid is intact Yes No
- Electrical components are sealed and watertight Yes No
- Pump/ siphon is functional Yes No
- Type of Pump Demand dose Time dose
- Pump control mechanism is functional (floats, pressure transducer) Yes No
- There is a high water alarm Yes No
- The high water alarm (audible and visual) is working Yes No N/A
- Type of screen Bio Tube screen
- Screen is clean and free of debris Yes No
- Scum/ sludge present in Dosing tank Yes No
- Scum layer 2 (inches) Sludge layer 4 (inches)

Additional Comments:

several alarm system not installed / wired to existing break panel
NEEDS MAINTENANCE with screens cleaned on
Bio Tube Chamber + pump cleaned

5. Soil absorption system

The soil absorption system is a set of trenches that receives effluent from the septic tank and filters the effluent before it enters the groundwater.

- The septic system has a soil absorption system Yes No
- Absorption distribution Equal Serial Pressure Equal via pressure
- Absorption lines construction material:
 Gravel and pipe Chamber Tile Polystyrene foam and pipe Other _____
- Absorption distribution unit(s) (dropbox, hydrospitter, equal distribution box)
 Intact Damaged N/A
- Absorption distribution unit(s) are free of debris or solids Yes No

- Locate all drain lines in soil absorption system Yes No

Total length of drain lines 240 (ft) approx

- Absorption area appears to be free from roads, vehicular traffic, structures, livestock, deep-rooted plants etc.

Yes No

If you answered "No," please describe below:

2 out of three pressurized lined are mostly under a pole barn & third line is barely outside barn on west side
Grass was recently mowed from drainfield

- Absorption area appears to be free from surface water runoff and down spouts Yes No

- Evidence of ponding in absorption area or distribution unit(s) Yes No

- The absorption replacement area assigned in the "as-built" drawing appears to be intact

Yes No

If you answered "No," please explain below:

There appears to be area enough for replacement area / no evidence of permit so to be sure & area unknown

- Additional Comments:

6. Sand Filter System

There are different sand filter system designs used in Oregon. Not every sand filter system will contain all of the components mentioned below, e.g. pumps. The owner of a sand filter system installed on or after January 2, 2014 must maintain an annual service contract with a certified Maintenance Provider. Maintenance records should be available from the system owner, or the contracted Maintenance Provider. Please attach copies of the previous two years of maintenance records to this inspection form.

- The septic system has a sand filter Yes No

(If "No," skip the rest of section 6)

- Type of sand filter

- Intermittent
- Re-circulating
- Bottomless

- Sand filter container appears to be watertight and in good condition Yes No

- Sand filter appears to be free from roads, vehicular traffic, structures, livestock, deep-rooted plants etc.

Yes No

If you answered "No," please describe below:

- Sand filter appears to be free from surface water runoff and down spouts Yes No
- Evidence of ponding in/ on sand filter media surface Yes No
- Lateral lines flushed and equal distribution verified Yes No
- Monitoring ports are present Yes No
- Surface access to manifold and valves Yes No
- The sand filter has a pump Yes No
(If "No", skip the rest of section 6)
- Pump vault appears to be watertight and in good condition. Yes No N/A
- Pump is functional Yes No
- Pump control mechanism is functional (floats, pressure transducer) Yes No
- High water alarm in pump vault (audible and visual) is working Yes No
- Pump electrical components are sealed and watertight Yes No

• Additional Comments:

7. Alternative Treatment Technology System

The owner of an ATT system *must* maintain an annual service contract with a certified Maintenance Provider. Maintenance records should be available from the system owner, or the contracted Maintenance Provider. Please attach copies of the previous two years of maintenance records to this inspection form.

Note* Some ATT systems may have a WPCF permit. Please contact the local Health Department or the DEQ to obtain a copy of the WPCF permit.

- The septic system is an Alternative Treatment Technology (ATT) Yes No
(If "No," skip the rest of section 7)
- Please provide the product name, system id number, and manufacturer name below:

Product name _____
System ID number _____
Manufacturer name _____

- Previous two years of maintenance records are available Yes No

If you answered "No," please explain below:

- Previous two years of maintenance records are attached to this form Yes No

If you answered "No," please explain below:

- Additional Comments:

8. Please attach a copy of the following items to this form. Contact the DEQ, or the local Health Department to locate these items.

- a. Please attach a copy of the original septic system permit to this form, if available
- b. Please attach a copy of the original as-built drawing to this form, if available
- c. Please attach a copy of the Certificate of Satisfactory Completion to this form, if available

- Additional Comments:

9. Provide a Plot Plan

- Please provide a sketch of the complete system on page 7 of this form, if a copy of the original "as-built" drawing is *not* available.
- Please provide a sketch of the complete system on page 7 of this form if the original "as-built" drawing is *not* accurate or representative of the existing system.
- If the original "as-built" drawing is available for copy, and the original is accurate and representative of the existing system, write "same as as-built" on page 8 of this form, and do not redraw the system.

- Additional Comments:

No original plot plan or as-built available
 unknown if there was a permit
 no found record of it

10. Disclaimer:

This evaluation report describes the on-site system as it exists on the date of inspection and to the extent that components and operation of the system are reasonably observable. DEQ recognizes that this evaluation report does not provide assurance or any warranty that the system will operate properly in the future.

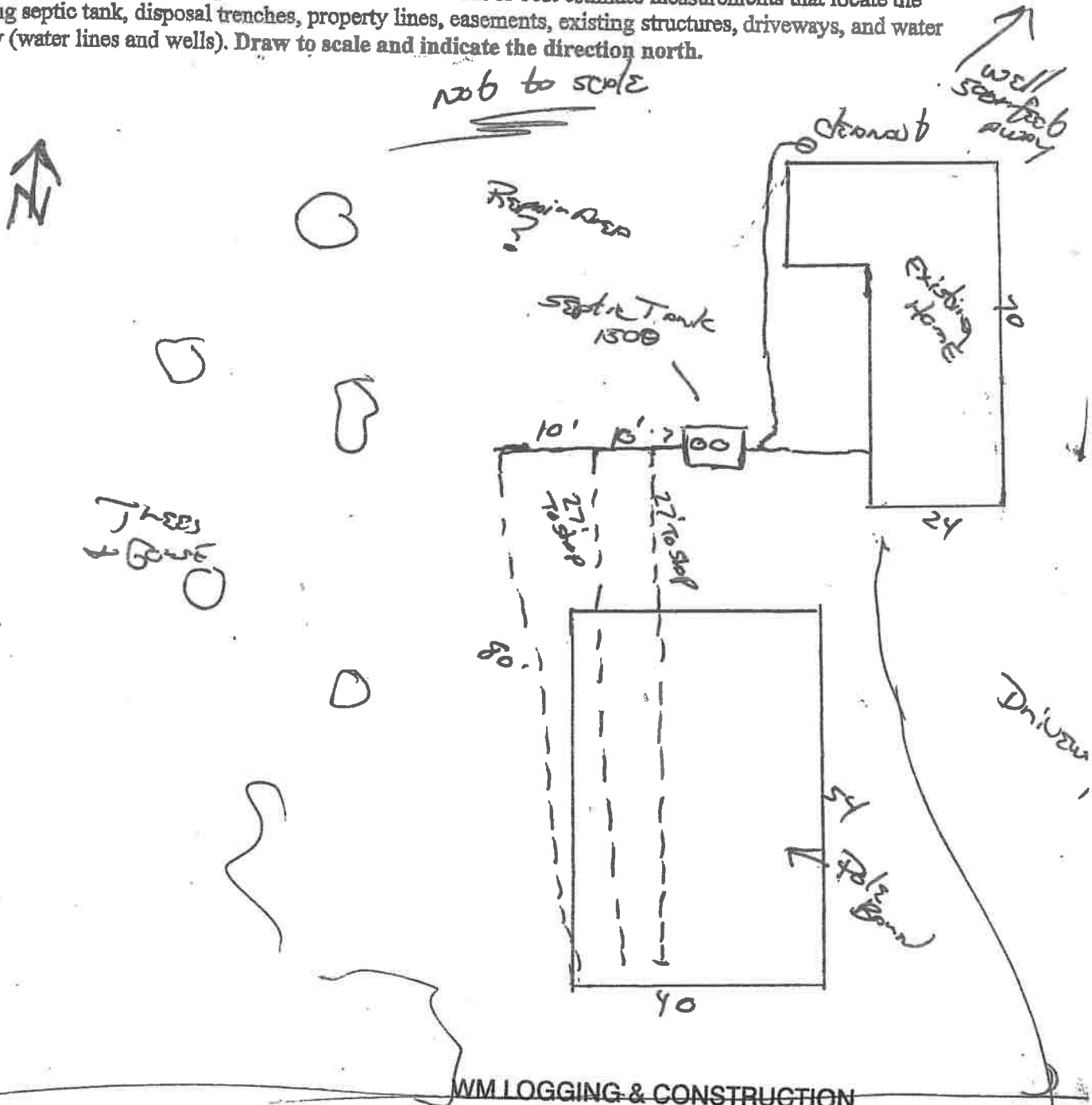
11. I hereby certify, by my signature, that the above information and the plot plan on the next page of this form are accurate and true to the best of my knowledge.

8-30-22
Date

L. Wayne Moore
Signature of Qualified Septic System Inspector

WATER LOGGING & CONSTRUCTION
 L. WAYNE MOORE
 P.O. BOX 298
 SIXES, OR 97476
 541-348-9927/541-253-6028
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Provide a Plot Plan in the space below: Show the actual or best estimate measurements that locate the existing septic tank, disposal trenches, property lines, easements, existing structures, driveways, and water supply (water lines and wells). Draw to scale and indicate the direction north.



Remarks

WM LOGGING & CONSTRUCTION

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Ring Road

This report does not guarantee continuous satisfactory operation of the on-site sewage system identified herein nor does it certify the exact location of the on-site sewage disposal system.

L. Wayne Moore
(Signature)

8-30-22
(Date of inspection)



NOTICE AUTHORIZING REPRESENTATIVE

I, Donald E Sunkler, have authorized L. Wayne Moore to act as my

(Property Owner/Print Name)

(Authorized Representative/Print Name)

agent in performing the activities necessary to obtain all onsite wastewater treatment program services provided by the Curry/Josephine County on the property described below in accordance with OAR chapter 340, division 071. I agree that any costs not satisfied by the Authorized Representative are my responsibility and I authorized Curry/Josephine County Onsite Septic agents to conduct required business activities on said property.

PROPERTY IDENTIFICATION:

92457 Airport Rd Sixes Or 97476
(Property Situs or Road Address)

And described in the records of Curry County as:

Township 3/S Range 15W Section 31 Map ID _____ Tax Lot #(s) 100

PROPERTY OWNER:

Printed Name: Donald E Sunkler

Address: 883794 Sherman Ln

City, State, Zip: Bandon Or 97411

Phone: 509 261 9069 Email: _____

Signature: Donald E Sunkler

AUTHORIZED REPRESENTATIVE:

Printed Name: L. Wayne Moore / W-M Logging + Const.

Address: P.O. Box 298

City, State, Zip: Sixes Or 97476

Phone: 541 348-9927 Email: _____

Signature: L. Wayne Moore

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