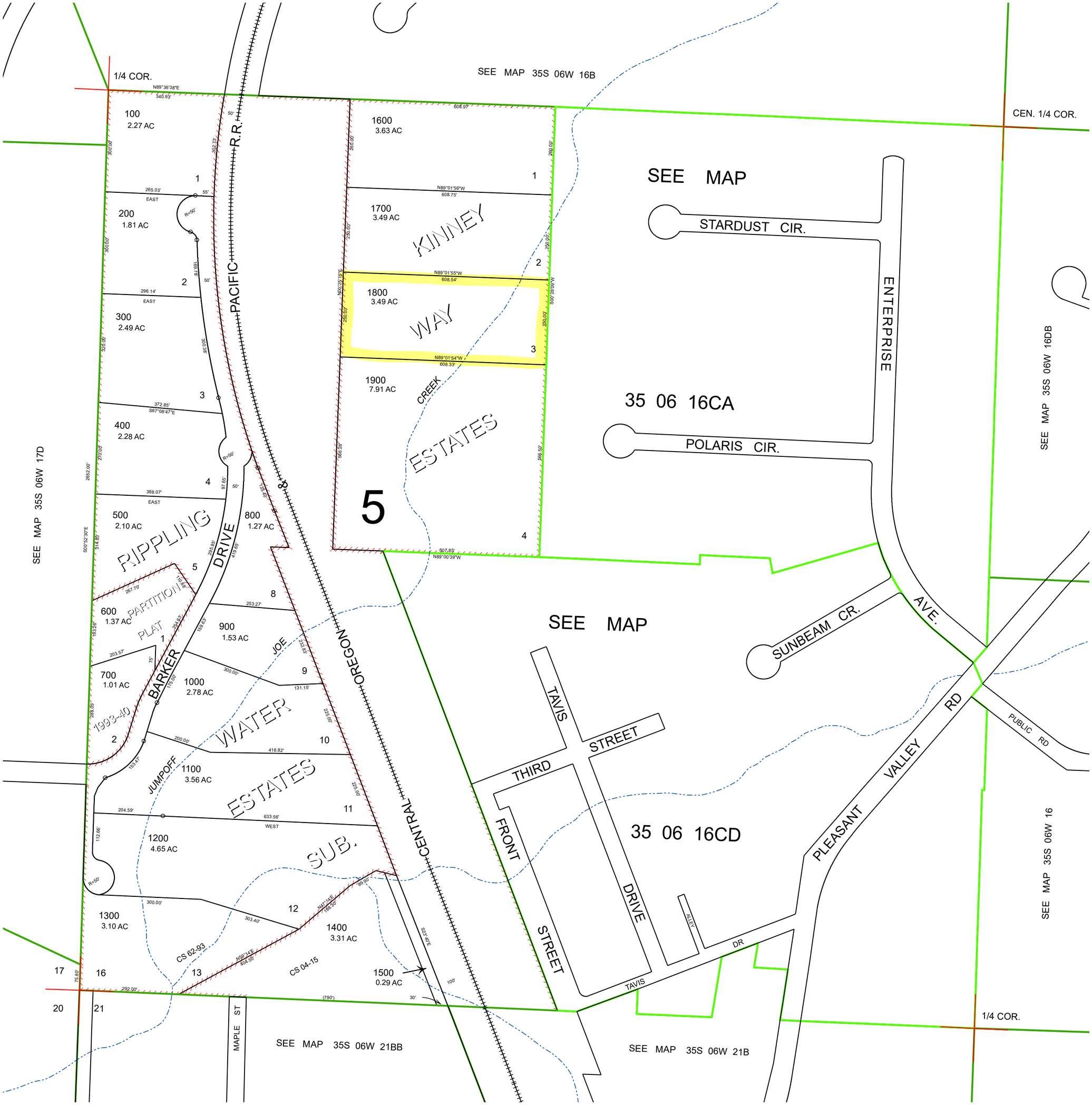
THIS MAP WAS PREPARED FOR ASSESSMENT PURPOSE ONLY

0 200 400 Feet

S.W.1/4 SEC.16 T.35S. R.6W. W.M.
JOSEPHINE COUNTY
1 " = 200 '

35 06 16C



35 06 16C

Residential Septic Site Evaluation Approval

463-22-000104-EVAL

Josephine Onsite Septic Program
700 NW Dimmick Street
Suite A
Grants Pass, OR 97526
541-474-5444
Fax: 541-474-5422
onsiteseptic@josephinecounty.gov
Website: josephine.or.us

Date issued: 11/16/2022
Application status: Site Evaluation Approved
Work description: SITE EVALUATION LOT 3

Applicant: Druther s Construction, LLC
Address: PO Box 1586
Grants Pass OR 97528
Phone: (541) 441-2029
Email: andrew.olson2002@gmail.com

Primary contractor: Druther s Construction, LLC
Installer License: 39140
Address: PO Box 1586
Grants Pass OR 97528
Phone: (541) 441-2029
Email: andrew.olson2002@gmail.com

Owner: AXXIS DEVELOPMENT INC
Address: 116 CAMBRIDGE DR
116 CAMBRIDGE DR
GRANTS PASS OR 97526

Property address: 0 Tavis Dr, Merlin, OR 97532

Parcel: 3506160000120000 - Primary

Lot size: 4 acres
Zoning: N/A
Water supply: Well
City/County/UGB: County

Proposed use of structure: SFR
Category of construction: Single Family Dwelling

General Specifications

Max peak design flow: 450 gpd.
Min septic tank volume: 1000 gal.
Proposed gallons per day: 375 gpd.
Min dosing tank volume: N/A
Comments: IF PUMP IS NEEDED, 500 GALLON DOSING TANK IS REQUIRED.
IF EQUAL DISTRIBUTION CAN BE ACHIEVED, TRENCH DEPTHS 18"-30".

System Specifications	*Initial System*	*Replacement Area*
System type:	Standard	Standard
System distribution type:	Serial	Serial
Distribution method:	Serial	Serial

Trench Specifications	*Initial System*	*Replacement Area*
Trench linear feet:	225 linear ft.	225 linear ft.
Max depth:	30 in.	30 in.
Min depth:	24 in.	24 in.

Special Requirements	*Initial System*	*Replacement Area*
Stakeout required:	Yes	Yes
Drainfield type:	Standard	Standard
Drainfield sizing:	75 linear ft/150 gal.	75 linear ft/150 gal.

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.)

Date issued: 11/16/2022

Application status: Site Evaluation Approved

Work description: SITE EVALUATION LOT 3

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 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.

Gabriel Kasiah Natural Resource Specialist 11/16/22

FIELD WORKSHEET

Name: DRUTHERS **Application No.:** 463-22-000164 **Date:** 1

RE: SITE EVALUATION REPORT for Parcel #: 350616000 1200 Lot 3

Commercial Facility: ☐ Yes ☒ No Parcel Size: 4 ACRES

APPROVED SYSTEM SPECIFICATIONS

Design flow: 450 gpd Max Number of bedrooms: 4 Max Number of Employees: _____

Initial System	Replacement System
☒ Standard ☐ Capping Fill ☐ Bottomless Sand Filter ☒ Conventional Sand Filter/ATT ☒ Other RSF	☒ Standard ☐ Capping Fill ☐ Bottomless Sand Filter ☐ Conventional Sand Filter/ATT ☐ Other _____
Tank: ☒ 1,000 gal. ☐ 1,500 gal. ☐ 2 compartment ☐ Other ☐ effluent pump required ☐ effluent filter required	Tank: ☒ 1,000 gal. ☐ 1,500 gal. ☐ 2 compartment ☐ Other ☐ effluent pump required ☐ effluent filter required
Distribution Method: ☒ Equal ☒ Serial ☐ Pressurized	Distribution Method: ☒ Equal ☒ Serial ☐ Pressurized
Absorption facility: 225 total linear feet 75 linear feet per 150 gallons projected daily sewage flow 30 " Max Depth 24 " Min Depth	Absorption facility: 225 total linear feet 75 linear feet per 150 gallons projected daily sewage flow 30 " Max Depth 24 " Min Depth

Additional Conditions of Approval

1. Any alteration of natural soil conditions (i.e. cutting or filling) in the acceptable area may void this approval.
2. Both the initial and replacement disposal areas are to be protected from traffic, cover, development, or other potential disturbance of natural soil conditions.
3. The area must not be subjected to excessive saturation due to, but not limited to, artificial drainage of ground surfaces, roads, driveways, and building down spouts.
4. Placement of a well within 100 feet of the approved areas may invalidate this approval.

☐ A curtain drain is required, a minimum of _____ feet above the highest disposal trench.

☐ The curtain drain must be a minimum of _____ inches deep, and installed in accordance with OAR 340-071-0220 (12).

☒ Rake trench sidewalls.

☒ The system must be installed during dry soil conditions only.

☐ System must be installed between June 1 and October 1, unless otherwise approved by DEQ.

* OAR 340-071-0130; 340-071-0220

* MAY REQUIRE PUMP TO DRAINFIELD; 1500 GALLON DOSING TANK & EFFLUENT FILTER REQUIRED IF PUMP IS NEEDED

* 18"-30" TRENCH DEPTHS IF EQUAL DISTRIBUTION CAN BE ACHIEVED

Inspector: KK

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
Test Pit 1	0-4	CL	10YR 3/3, GR, Roots 3VF,2F,M
	4-18	SA CL	7.5YR 4/6, wSBK, Roots 1VF,F,M,C,VC 10% CF
	~~18-48~~	COBBLY CL	2.5YR 4/6, wSBK, Roots 1VF,F,M 30% COBBLES/CF
Test Pit 2			SIMILAR TO TEST PIT 1
Test Pit 3			
Test Pit 4			
Test Pit 5			
Test Pit 6			

ESD 48"

ESD 48"

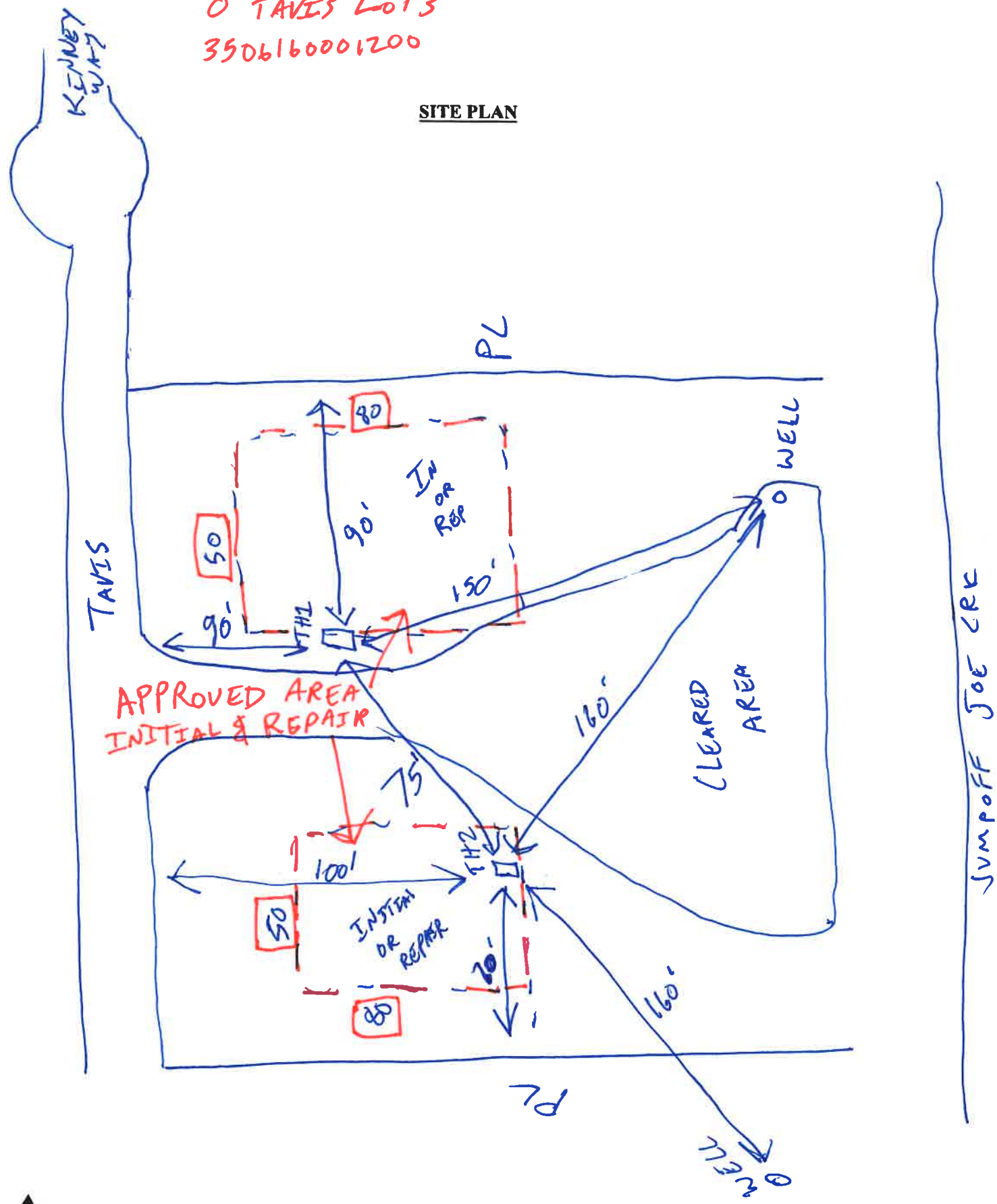
Landscape Notes: WOODED (OAK, MADRONE, FIR

Slope: 1-3% Aspect: E/SE Groundwater Type: ☐ Permanent ☐ Temporary

Other Site Notes: 3/8/2022, PARTLY SUNNY, 57°, 1:30PM

"O" TAVIS LOT 3
3506160001200

SITE PLAN



N

* NOT TO SCALE

Application # 463-22-000104-ELAC

Application for Onsite Sewage Treatment System

700 NW Dimmick Street, Suite B
Grants Pass, OR 97526
541-474-5444

For ONSITE SEPTIC Use Only:	Date Stamp
Date received	
Fee paid	
Receipt number	
Application number	
Date of 1st response	
Date of 2nd response	
Date of final response	
Date of completion	
Scanned Data Entry	

A. Property Owner Information

Name | Mailing Address (Street or PO Box, City, State, Zip Code) | Phone Number: 541-660-9591

B. Legal Property Description

Township	Range	Section	Tax Lot	Tax Account Number	Acreage or Lot Size
35	06	16	001200	R303608	3.49

County: Josephine

Subdivision Name: ~~ROSE~~ Kinney Way Estates | Lot: 3 | Block:

Property Address: 0 Kinney Way (Address) | Grants Pass (City) | OR (State) | 97526 (Zip Code)

Directions to Property: North Exit to Pleasant Valley Rd. Take left on Russell Rd. take left onto Ellis Loop follow to Kinney Way property is at the end of road.

C. Existing Facility / Proposed Facility / Water Information

Existing Facility:

☐Single Family Residence

Number of Bedrooms: ____

☐Other ____

Proposed Facility:

☑Single Family Residence

Number of Bedrooms: 3

☐Other ____

Water Supply:

☐Public ____ (Name)

☑Private Well (Well, Spring, Shared)

D. Type of Application

☑Site Evaluation

☐Construction

☐Permit Repair
☐Major ☐Minor

☐Alteration Permit
☐Major ☐Minor

☐Renewal Permit

☐Existing System Evaluation

☐Permit Transfer

☐Permit Reinstatement

☐Authorization Notice for:
- ☐ Connecting to an Existing System Not in Use
- ☐ Replacing a Mobile Home or House with Another Mobile Home or House
- ☐ The Addition of One or More Bedrooms
- ☐ Personal Hardship
- ☐ Temporary Housing
- ☐ Other-please specify ____

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 Josephine County Onsite Septic and it's authorized agents permission to enter onto the above described property for the sole purpose of this application.

Signature | Date: 3-1-22

Andrew Olson (Applicant's Name – Please Print Legibly) | 541-441-2029 (Applicant's Phone Number) | andrew.olson2002@gmail.com (Applicant's E-mail Address)

P.O. Box 1586 Grants Pass, OR 97528 (Applicant's Mailing Address)

Applicant is the ☐Owner ☑Authorized Representative ☑Licensed Septic Installer

☐Authorization Attached

Installer's Name: Dudley Construction 39140

NOTICE AUTHORIZING REPRESENTATIVE

State of Oregon
Department of
Environmental
Quality

I, John West (Property Owner/Print Name), have authorized Andrew Olson (Authorized Representative/Print Name) to act as my agent in performing the activities necessary to obtain all onsite wastewater treatment program services provided by the Department of Environmental Quality 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 DEQ agents to conduct required business activities on said property.

PROPERTY IDENTIFICATION:

Ellison Loop Russell Estates Subdivision
(Property Situs or Road Address)

And described in the records of Josephine County as:

Township 36 Range 06 Section 16 Map ID _____ Tax Lot #(s) 00100

PROPERTY OWNER:

Printed Name: AXXIS DEVELOPMENT INC.

Address: 116 Cambridge Dr.

City, State, Zip: G.P. OR. 97526

Phone: 541-660-9541 Email: JWEST1996@GMAIL.COM

Signature: [signature]

AUTHORIZED REPRESENTATIVE:

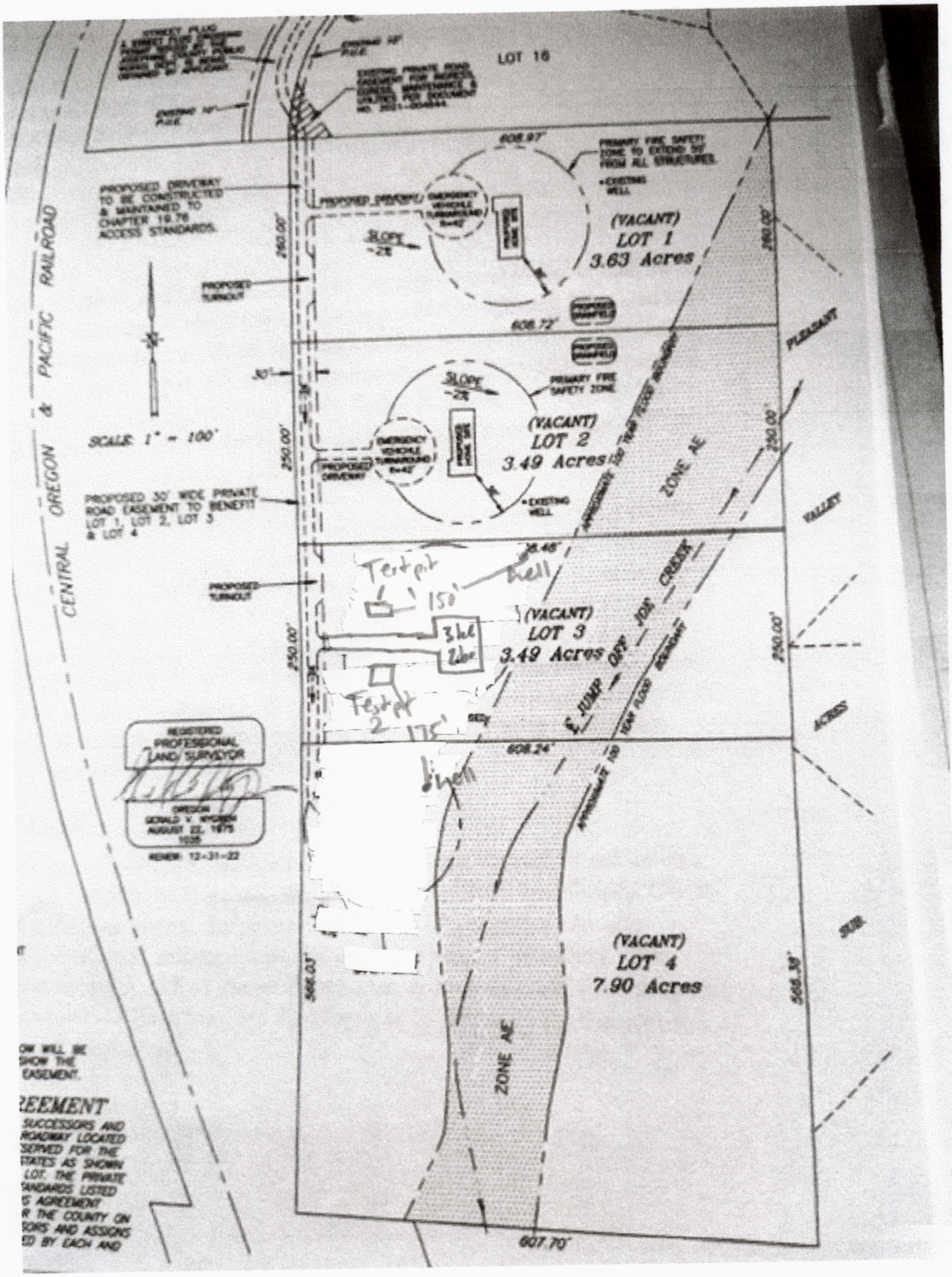
Printed Name: Andrew Olson

Address: P.O. Box 1586

City, State, Zip: Grants Pass, OR 97528

Phone: 541-441-2029 Email: andrew.olson2002@gmail.com

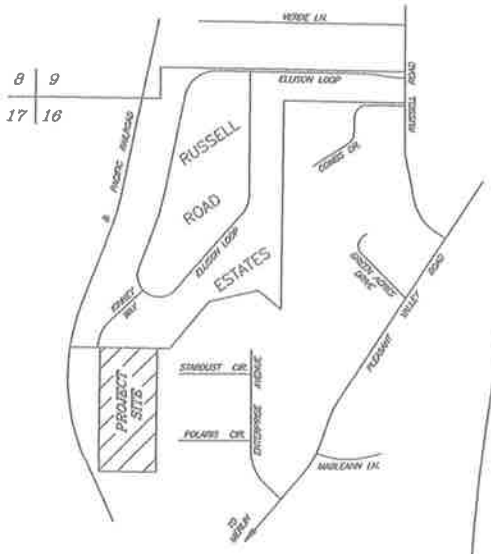
Signature: [signature]

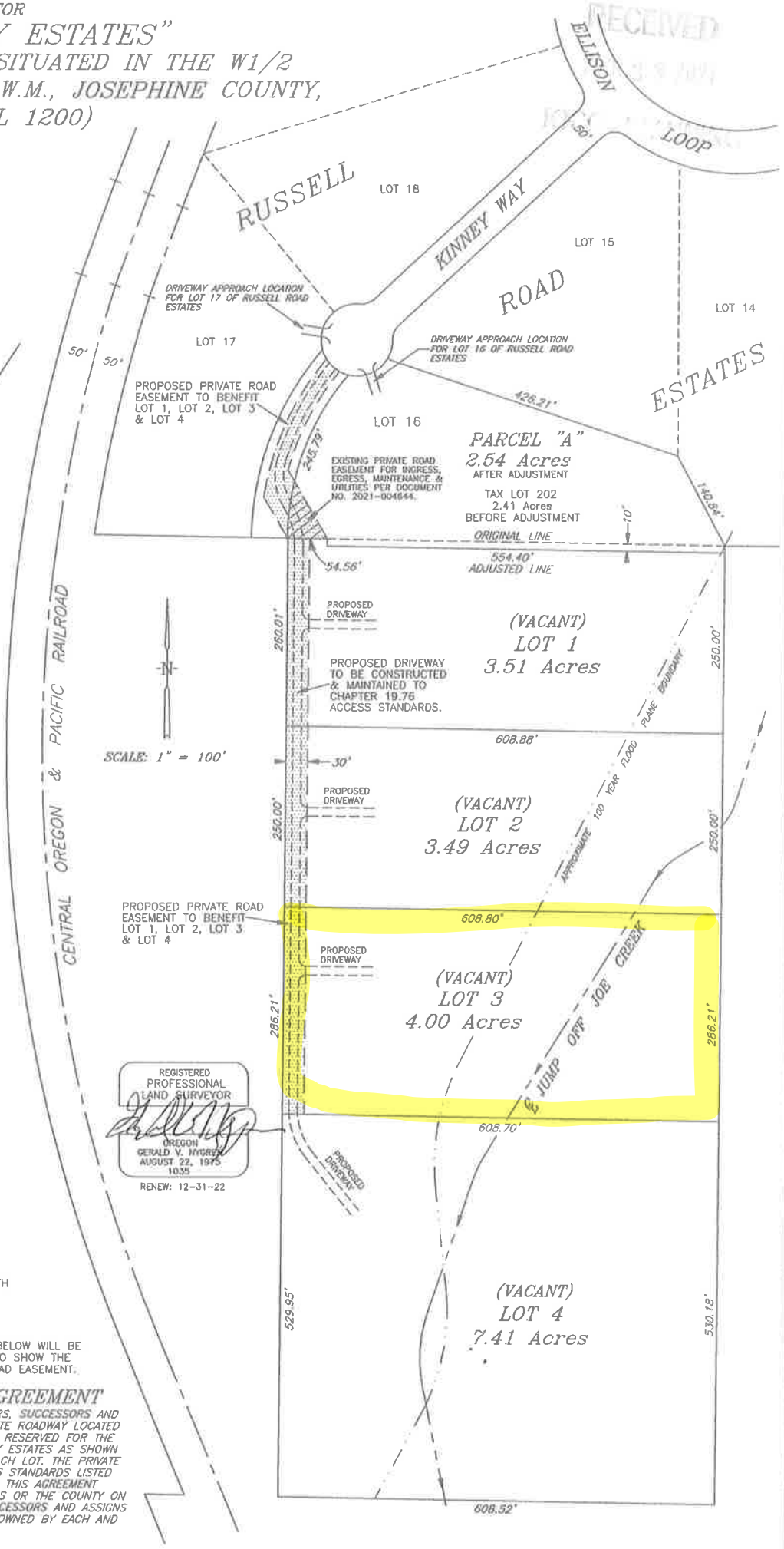

LOT 16
PROPOSED DRIVEWAY TO BE CONSTRUCTED & MAINTAINED TO CHAPTER 19.76 ACCESS STANDARDS.
PROPOSED TURNOUT
PRIMARY FIRE SAFETY ZONE TO EXTEND 30' FROM ALL STRUCTURES.
•EXISTING WELL
(VACANT)
LOT 1
3.63 Acres
SLOPE ~2%
PROPOSED EMERGENCY VEHICLE TURNAROUND
PRIMARY FIRE SAFETY ZONE
(VACANT)
LOT 2
3.49 Acres
PROPOSED 30' WIDE PRIVATE ROAD EASEMENT TO BENEFIT LOT 1, LOT 2, LOT 3 & LOT 4
Test pt 1
Test pt 2
Well
(VACANT)
LOT 3
3.49 Acres
(VACANT)
LOT 4
7.90 Acres
ZONE AE
SCALE: 1" = 100'
CENTRAL OREGON & PACIFIC RAILROAD
REGISTERED PROFESSIONAL LAND SURVEYOR
OREGON
RENEW: 12-31-22
250.00'
606.97'
606.72'
606.24'
606.03'
607.70'
PLEASANT
VALLEY
ACRES
REEMENT
SUCCESSORS AND
ROADWAY LOCATED
SERVED FOR THE
STATES AS SHOWN
LOT. THE PRIVATE
STANDARDS LISTED
S AGREEMENT
R THE COUNTY ON
SORS AND ASSIGNS
ED BY EACH AND

PRE-APPLICATION MAP
FOR
"KINNEY WAY ESTATES"
A PROPOSED SUBDIVISION SITUATED IN THE W1/2 OF SEC. 16, T.35S., R.6W., W.M., JOSEPHINE COUNTY, OREGON. (MAP 35-6-16, TL 1200)

RECEIVED

VICINITY MAP
NO SCALE





REGISTERED PROFESSIONAL LAND SURVEYOR
OREGON
GERALD V. NYGREN
AUGUST 22, 1975
1035
RENEW: 12-31-22

PREPARED FOR:

AXXIS DEVELOPMENT INC.
116 CAMBRIDGE DRIVE
GRANTS PASS, OR 97526
PH: 541-660-9541

PREPARED BY:

GERALD V. NYGREN, PLS
522 BARKER DRIVE
MERLIN, OR 97532
PH: 541-476-7034

DATE: APRIL 5, 2021

GENERAL NOTES

1) SOURCE OF WATER SUPPLY BY WELLS.
2) SUBSURFACE SEWAGE DISPOSAL.
3) UTILITIES FROM KINNEY WAY.
4) NO DEED RESTRICTIONS AT PRESENT TIME.
5) ALL PROPOSED LOTS ARE VACANT.
6) FLOOD INSURANCE RATE MAPS INDICATE REGULATORY FLOODWAY BOUNDARY AS SHOWN HEREON.
7) ALL DRIVEWAYS TO BE CONSTRUCTED TO ARTICLE 76 STANDARDS.
8) THE PROPOSED LAND DIVISION IS NOT LOCATED WITHIN THE BOUNDARIES OF AN IRRIGATION DISTRICT.
9) THE PROPOSED LAND DIVISION DOES NOT CONFLICT WITH ANY PUBLIC OR PRIVATE EASEMENTS.

NOTE: THE PRIVATE ROAD MAINTENANCE AGREEMENT SHOWN BELOW WILL BE STATED ON THE FINAL PLAT. THE FINAL PLAT WILL ALSO SHOW THE EXACT LOCATION AND DIMENSIONS OF THE PRIVATE ROAD EASEMENT.

PRIVATE ROAD MAINTENANCE AGREEMENT

IT IS HEREBY AGREED BY THE PROPERTY OWNERS, THEIR HEIRS, SUCCESSORS AND ASSIGNEES THAT THE MAINTENANCE EXSPENSE FOR THE PRIVATE ROADWAY LOCATED WITHIN THE NON-EXCLUSIVE PRIVATE ROAD EASEMENT HEREBY RESERVED FOR THE BENEFIT OF LOT 1, LOT 2, LOT 3 AND LOT 4 OF KINNEY WAY ESTATES AS SHOWN ON PAGE 2 OF THIS PLAT, SHALL BE SHARED EQUALLY BY EACH LOT. THE PRIVATE ROADWAY SHALL BE MAINTAINED TO MEET FIRE SAFETY ACCESS STANDARDS LISTED UNDER SECTION 19.76.040 OF THE JOSEPHINE COUNTY CODE. THIS AGREEMENT SHALL BE ENFORCABLE BY THE MAJORITY OF THE LOT OWNERS OR THE COUNTY ON ITS OWN MOTION AND SHALL BE BINDING ON THE HEIRS, SUCCESSORS AND ASSIGNS OF EACH PARTY IN AND TO THE REAL PROPERTY PRESENTLY OWNED BY EACH AND EACH PARTY THEREOF.

THIS MAP WAS PREPARED FOR ASSESSMENT PURPOSE ONLY

0 400 800 Feet

SECTION 16 T.35S. R.6W. W.M.
JOSEPHINE COUNTY
1 " = 400 '

35 06 16

CANCELLED:
890
1601
1100
1190
304
400
500
501
502
503
504
505
601
306
1000
1001
1002
1003
1004
1005
1006
1007
1008
1009
1010
1011
1012
1013
1014
807
808
815
190
390-90
391-90
392-90
393-90
394
395
303
203
790
1400
191
1300
1301
100
101
102
103
105
106
107
108
109
703
813
600
700
701
702
704
705
706
707
1690
800
801
802
803
804
805
806
809
810
811
812
814
816
1700
396

SEE MAP 35S 06W 09
SEE MAP 35S 06W 17A
SEE MAP 35S 06W 17D
SEE MAP 35S 06W 15B
SEE MAP 35S 06W 15
SEE MAP 35S 06W 21B
SEE MAP 35S 06W 21A

8 9 17 16 10 15 20 21 22

N89°41'30"W 1325.49' WEST N89°36'15"W

DRIVE WILDFLOWER PACIFIC R.R. OREGON CENTRAL

35 06 16B

308 2.86 AC
302 3.07 AC
301 2.47 AC
CS 277-77 CS 143-82 CS 105-84
COMBS DRIVE 503.00'
309 5.15 AC
CS 54-84
307 4.11 AC
2016-10
300 8.45 AC
PLAT
2
200 2.50 AC
310 5.57 AC
PARTITION
290 0.06 AC
202 2.94 AC CS 245-73
1
3
305 2.05 AC
201 0.85 AC
104 0.05 AC
RUSSELL ROAD
JO CREEK PL.
35 06 16AA
SEE MAP
VALLEY ROAD

CREEK JOE

5

35 06 16AC
35 06 16AD
GREEN ACRES DR.

1/4 COR. N89°36'38"E 340.93'

1302 2.27 AC
1303 1.81 AC
1304 2.49 AC
1305 2.28 AC
1306 2.10 AC
1307 1.37 AC
1308 1.01 AC
1309 1.27 AC
1310 1.53 AC
1311 2.78 AC
1312 3.56 AC
1313 4.65 AC
1314 3.10 AC
1500 3.31 AC
1501 0.29 AC
PIPPLING DRIVE
BARKER WATER ESTATES SUB.
PARTITION PLAT 1993-40
CS 62-93 CS 04-15

1200 20.00 AC
JUMPOFF
SEE MAP
STARDUST CIR.
POLARIS CIR.
ENTERPRISE
35 06 16CA
SUNBEAM CR.
AVE
TAVIS STREET
THIRD FRONT STREET DRIVE
35 06 16CD
MAPLE ST.
ASH ST.

LAWRENCE LN PLEASANT
35 06 16DB
MABLEANN LANE
900 40.00 AC
1328.10'
CREEK

1600 1.97 AC
1903 5.24 AC
CS 25-2000
1902 40.00 AC
1701 2.41 AC
PARTITION
1900 5.28 AC
02-CV-204
1702 2.00 AC
1800 2.83 AC
1901 14.96 AC
PLAT 2
1703 4.37 AC
CS 24-04
2013-01
CS 109-93
50 RODS (12.50 CHS = 825')
N89°54'W