

I, Gory D. Wicks, Oregon Professional Land Surveyor No. 1108, hereby certify that I have accurately surveyed and marked with proper monuments the land represented on this partition plat. I have designated a 5/8 inch diameter iron rod monumenting the Northwest Corner of Government Lot 1 as the Initial Point of this Partition Plat. Said parcel of land is located in Government Lots 1 and 2 within the Northwest Quarter of Section 35, Township 34 South, Range 6 West of the Willamette Meridian, Josephine County, Oregon and is more particularly described as follows:

Beginning at the Northwest Corner of Government Lot 1 of said Section 35, the INITAL POINT of this Partition Plat; thence South 89°10'24" East along the North Line of said Government Lot 1; thence South 00°00'23" East along the East Line of the West Half of said Government Lot 1, 1173.72 feet to the Northeast Corner of Parcel 3 of Document No. 2004–25611, Josephine County Official Records; thence North 89°12'26" West along the North Line of said Parcel 3, 315.04 feet to the Northwest Corner of the twenty-five foot wide public right-of-way dedicated to Josephine County in Document No. 2009–6021, Josephine County Official Records; thence South 00°01'34" West, along the West Line of said public right-of-way, 604.44 feet to the North right-of-way line of El Conejo Drive (formerly Farview Road) at the Southeast Corner of the tract of land described in Volume 325, Page 511 of the Josephine County Deed Records; thence West along said North right-of-way line, 25.00 feet; thence, leaving said North right-of-way line, North 00°01'34" East, parallel with the East Line of said tract, 612.79 feet to a point 53.00 feet North of the North Line of the tract of land described in Volume 325, Page 511 of the Josephine County Deed Records; thence North 89°12'26" West, parallel with said North Line, 268.55 feet to the West Line of said Government Lot 1; thence North 00°12'124" West along said West Line, 1166.02 feet to the point of beginning, containing 16.64 acres, more-or-less.

Gon D. Wicks, P.L.S. 1108

#### DECLARATION

KNOW ALL PERSONS BY THESE PRESENTS that Mathew D. Tibbits and Nicole J. Tibbits, husband and wife as tenants by the entirety, as to an undivided 50% interest, and David J. Holman, as to an undivided 50% interest, all as tenants in common are the owners of the land described in the "Surveyor's Certificate." Beneficiary interest in said parcel is held by Dorothy McClung, Trustee of the McClung Marital Trust by virtue of a Deed of Trust recorded as Document No. 2006–905 of the Josephine County Official Records. We have caused the same to be surveyed and partitioned into the parcels as shown on Sheet No. 1 of 2. Mossy Oak Drive, the public utility easement and the road slope easement are hereby dedicated to the public forever.

MATORI Mathew

Nicole J. Tibbits

STATE OF OREGON, County of Josephine } ss.

This is to certify that on the above dates beginning the day of August , 2009 and ending on the day of August , 2009 before me personally appeared the above named people, known to be the identical persons described in and who executed the above declaration. They acknowledge the foregoing instrument to be their voluntary act and deed. In testimony whereof I hereby affix my signature this 14 day of August 2009 August , 2009.

Notary Public - Oregon (Printed)

Notary Public - Oregon (Signature)

My Commission Expires June 28, 2013

#### PARTITION PLAT CONSENT AFFIDAVIT

From Dorothy McClung, Trustee of the McClung Marital Trust, recorded as Document No. 2006-905, Josephine County Official Records.

Recorded as Document No.

Commission No. 440600

#### ROAD MAINTENANCE AGREEMENT

Mossy Ook Drive is a privately maintained county road. The property owners, their heirs, successors and assigns of the parcels created by this plat shall be responsible for the maintenance of said Mossy Ook Drive. This responsibility shall be shared equally among said parcels. In the event any property owner fails or refuses to pay his/her equal share of the maintenance costs, the party or parties who have poid their share shall make written demand upon the property owner who failed to pay his/her share. In the event the property owner has not paid within ten days after receipt of said written demand, the property owners who have poid their share may institute suit or action to enforce this condition and covenant which shall run with the land. In addition to the casts and disbursements allowed by law, the owner or owners seeking reimbursement shall be entitled to recover from the defrauding defendants such sums as the Court may judge reasonable as attorney fees in said suit or action. Additionally, the future owners of Tax Lats 400 and 591, Map No. 34-6-35 shall be included in this maintenance agreement and shall have an equal (25%) share in this responsibility as set forth in the terms and conditions of the Agreement recorded as Document No. 2009-012194, Josephine County Official Records.

#### NARRATIVE

PURPOSE: To partition and create Mossy Oak Drive from Tax Lot 500, Map No. 34–6–35 as shown.

FROCEDURE:
A closed loop traverse was surveyed around the perimeter of Tax Lot 500 with side shot ties to found monuments as shown on Sheet No. 1 of 2. The traverse was then extended East and West along El Conejo Drive with side shot ties to found monuments. The right-of-way of El Conejo Drive was determined by the line of best fit of the found monuments per Survey No. 96-63. Monuments found per Surveys No. 96-63, 69-91 and 53-95 were accepted to establish the perimeter of Tax Lot 500. The parcels and Massy Oak Drive were then surveyed as shown on Sheet No. 1 of 2 Mossy Oak Drive were then surveyed as shown on Sheet No.

DOCUMENTS USED: Josephine County Deed Records: Vol. 184, Pg. 287; Vol. 188, Pg. 454; Vol. 291, Pg. 388; Vol. 325, Pg. 511; Vol. 327, Pg. 706; Vol. 327, Pg. 1967

Josephine County Book of Records: Documents 90-19845 and 91-6333

Josephine County Official Records:
Documents No. 2004-25611, 2006-903 and 2009-6021

INSTRUMENTS USED:

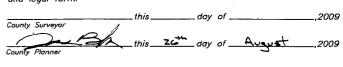
Wild T-1600 Theomat and a Distorat DI-1600 E.D.M.I. with a combined accuracy of 1 second and 3mm  $\pm$  2 ppm.

BASIS OF BEARINGS:

North Right-of-Way line of El Conejo Drive (Farview Road) per Survey No. 96-63

#### APPROVALS.

We, the undersigned, do hereby approve this plat and declaration for true and legal form.



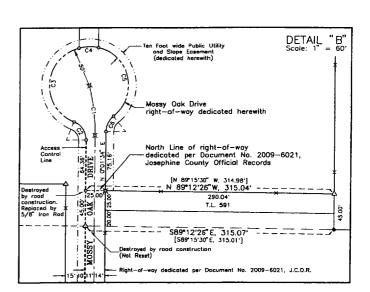
All taxes, fees, assessments, or other charges as provided by O.R.S. 92.095 have been paid this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 2009. \_day of \_

Josephine County Assessor or Deputy

STATE OF OREGON County of Josephine ss.

I hereby certify that this Partition Plat was filed for record on this day of \_\_\_\_\_\_, 2009 at \_\_\_\_\_\_O'Clock \_\_\_M and recorded as Partition Plat No.\_\_\_\_\_\_of the Official Records 

Josephine County Clerk or Deputy



This plot was prepared using HP ink Cartridge No. C4844A on Oce' 86-8342 polyester film.

ROJECT NO 968-06-465

680-18.24 garry D. Wal OREGON ANY M. 1877 GARY D. WICKS 1108 July 15, 2009

David Holman

437 Cumberland Drive Grants Pass, Oregon 97527

SURVEYED FOR

Government Lots 1 & 2 of Section 35 Township 34 South, Range 6 West, W.M. WICKS ENGINEERING & SURVEYING 311 N.E. "D" Street Grants Pass, Oregon 97526



State of Oregon

Department of Environmental Quality

Onsite Permit ID: OS407829

#### **Certificate of Satisfactory Completion**

Installation of this onsite wastewater treatment system has been determined to comply with the applicable requirements in Oregon Administrative Rules Chapter 340, Divisions 071 and 073 and the conditions of Permit OS407829 as follows:

#### PROPERTY INFORMATION

Property Owner: David J Holman

Township 34S, Range 06W, Section 35

Property Location: 180 El Conejo Dr., Grants Pass

Tax Lot 500 - parcel 1

Facility Type:

**Single Family Dwelling** 

**Josephine County** 

4 Bedrooms

CountyWorksheet #09-044

#### SPECIFICATIONS AND REQUIREMENTS

System type: Standard

Design Flow:

450 gals/day

GWI Trench Depth:

30 inches

Minimum Septic Tank Size:

1000 gals

GWI Media Depth:

24 inches

Total Trench Length:

375 Linear feet

Trench Spacing:

8 feet\*

Maximum Trench Depth:

30 inches

Minimum Trench Depth:

24 inches

\*Minimum undisturbed soil between trenches

#### **ADDITIONAL CONDITIONS**

- 1 In accordance with Oregon Revised Statute 454.665, this Certificate of Satisfactory Completion is issued as evidence of satisfactory completion of an onsite wastewater treatment system at the location identified above.
- 2 Issuance of this Certificate does not constitute a warranty or guarantee that this onsite wastewater treatment system will function indefinitely without failure. Conditions imposed as permit requirements continue for the life of the system.
- 3 The area of the initial and the identified replacement area must not be subjected to activity that is likely to adversely affect the soil or the functioning of the system. Such activities may include, but are not limited to, vehicular traffic, livestock, covering the area with asphalt or concrete, filling, cutting, or other soil modification activities.
- 4 This onsite wastewater treatment system must be connected to the facility referenced herein within 5 years of the issuance of this Certificate of Satisfactory Completion (CSC) or rules for authorization notices, alteration permits, or construction-installation permits as outlined in OAR 340-071-0160, 340-071-0205, or 340-071-0210 apply, including payment of an additional fee.
- 5 This system must operate in compliance with OAR Chapter 340, Division 071 and must not create a public health hazard or pollute public waters.
- 6 Unless otherwise required by the agent, the system installer must backfill (cover) this system within 10 days after the issuance of this Certificate of Satisfactory Completion.

SCANNED SEP 2 3 2013

#### **SYSTEM INSPECTIONS AND COMPLETION DATES**

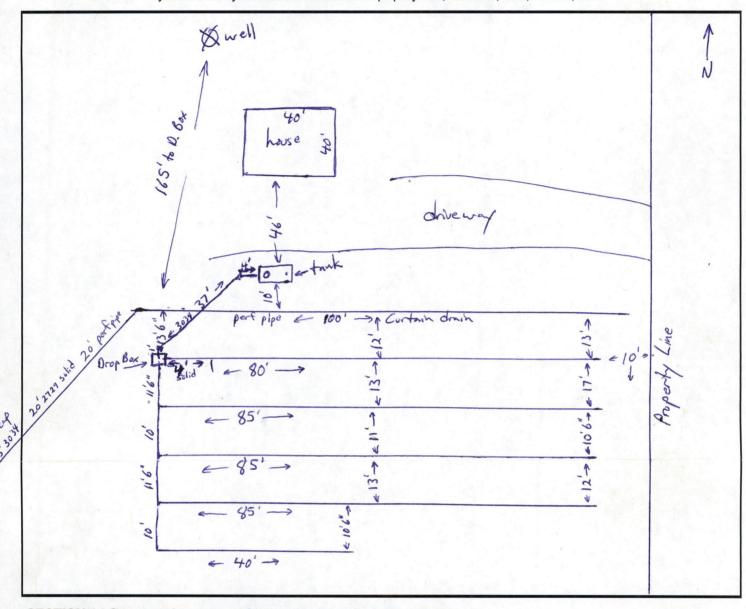
Pre-Cover Inspection by Don Jossie on 7/14/2009

To be valid, this document must be signed by an "Agent" as defined in OAR 340-071-0100.

7/15/2009 **Onsite Wastewater Specialist** Authorized Agent: Date CSC Issued Title Don Jossie Department of Environmental Quality Western Region - Grants Pass Office 302 SE H Street Grants Pass, OR 97526 Phone: (541) 471-2850 X225 Fax: (541) 479-2764

#### **SECTION 3 - As Built Plan**

AS-BUILT PLAN OF THE CONSTRUCTED SYSTEM. Indicate the direction of NORTH. Show locations of all wells within 200 feet of the system. Show system setback distances from property lines, structures, wells, streams, etc.



#### SECTION 4 - Construction was performed by (Signature Required)

I certify that the information provided on both pages of this document is correct and that the construction of this system was in accordance with the permit and the rules regulating the construction of onsite wastewater treatment systems (OAR Chapter 340, Divisions 71 and 73).

Owner/Permittee or Certified Installer w/Certification#: Print Name:	BCTnc
Licensed Installer: Yes No License#: 36863	Certification#: RT 118
Owner/ Certified Installer: Signature:	10 Date: 9-9-09 Phone#: 2-2583
SECTION 5 - Office Use Only:	Installer/Owner
Notice Accepted Yes No Date: 7. 15.09	(Permittee) Notified:  Yes No Date: 7. 15-09
If No, Reason for Non Acceptance:	
Comment:	

Township 34S, Range 06W, Section 35

#### Final Inspection Request and Notice - Onsite ID: 407829

Pursuant to the requirements within ORS 454.665, OAR 340-071-0170 and OAR 340-071-0175, 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 and prior to backfilling or covering the installation. The Department (or Agent) has 7 days to perform an inspection of the completed construction/installation following the official notice date, unless the Department (or Agent) elects to waive the inspection and authorizes the system to be backfilled. 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. Faxed copies are acceptable for inspection request purposes only. Originals must be received before a Certificate of Satisfactory Completion is issued. Please complete sections 1 through 4 on the form and return it to the office that issued the permit. Forms that are determined to be incomplete will be returned.

**SECTION 1: Owner/Permittee Information:** 

Name:	David J H	olman			Josep	phine (	County TaxLot#: Tax L	ot 500 - parcel 1
Property Address:	180 El Co	nejo Dr., G	rants Pass		Coun	nty Plai	nning Approval #: 09-04	14
SECTION 2	2: Syster	n Compone	ent Specif	ications:				
A. Tanks/Pun	nps			Syst	tem Type: Sta	ndard		Water tight verification*
Tanks(1)	Volume:	1000 gals	Compartme	ents: hone	Manufacturer:	RI	esside Rendy &	Lox Date: 7-9-09
Tanks(2)	Volume:		Compartme		Manufacturer:			Date:
Pump(s)	HP: M	/lodel/Manuf.			Float(s)Type(	(1):	Model/Manuf.	
					Float(s)Type(	(2):	Model/Manuf.	
B. Piping								A company of the second of the
Efflue	ent Sewer (	tank to drainfi	eld) Yes	No D	iameter: 44	AST	M#/Other: 3034	Length: 42'
	Pressu	re Transport I	Pipe Yes	No D	iameter:	AST	M#/Other:	Length:
C. Secondary	Treatment	Unit:						
Sa	nd Filter**	Yes No	Туре:				Container Dimens	ions:
Under	drain pipe	Diameter: 4	ASTN	1#/Other:	2729			Length: 375
Manif	fold piping	Diameter:	ASTN	1#/Other:		W.		Length::
Inte	rnal Pump	HP:	Mode	l/Manufactu	rer			
	Floats(1)	Туре:	Mode	l/Manufactui	rer			
	Floats(2)	Туре:	Mode	l/Manufactui	rer			
	ATT	Yes No	Model					
Certi	fied Maint.	Provider Nam						
Operation	and Maint.	Contract Rece	eived? Yes	No				
D. Drainfield I	Media							
	Туре	(Gravel, Pipe	or alternative	?) Grav	1 1/2"	clear	y	
Distrib	oution Box	Yes No	X					
	Drop Box	Yes No						
Distrib	ution Pipe	Yes No	Diamet	er: 4"	ASTM#/Other:	272	29	Length: WWW 10
	Comment							

\*\*Attach sieve analysis for Underdrain Media and Filter Sand

\*All Tanks(s) were tested for water-tightness after installation and passed in accordance with OAR 340-073-0025(3)



#### State of Oregon

Department of Environmental Quality

Onsite ID: **OS407829** Expiration Date: 6/29/2010

#### **Construction-Installation Permit**

This Construction-Installation Permit OS407829 authorizes the property owner to construct an onsite wastewater system as follows:

#### PROPERTY INFORMATION

Property Owner: David J Holman

**Josephine County** 

Property Location 180 El Conejo Dr., Grants Pass

Township 34S, Range 06W, Section 35

Facility Type:

Single Family Dwelling

Tax Lot 500 - parcel 1

4 Redrooms

County Planning Approval #: 09-044

#### SPECIFICATIONS AND REQUIREMENTS

System Type: Standard

Design Flow:

450 gals/day

Minimum Septic Tank Size:

1000 gals

Total Trench Length:

375 Linear feet

Trench Spacing:

8 feet\*

Maximum Trench Depth:

30 inches

Minimum Trench Depth:

24 inches

\*Minimum undisturbed soil between trenches

#### ADDITIONAL CONDITIONS

- <sup>1</sup> Each trench to be level and on contour.
- <sup>2</sup> Meet all required setbacks.
- <sup>3</sup> The system must be installed by the property owner or a licensed sewage disposal business (installer).
- <sup>4</sup> The system must be installed in accordance with the plan approved by the agent, including any changes made by the agent.
- <sup>5</sup> Vehicular traffic and livestock must be restricted from the system area.
- <sup>6</sup> All roof drains must be directed away from the system.
- <sup>7</sup> All work is to conform to Oregon Administrative Rules, Chapter 340, Divisions 071 and 073. Make no changes in system location or specifications without written approval from the permit issuing agent.

SCANNED SEP 2 3 2013

INSPECTION REQUIREMENTS

- <sup>1</sup> A final inspection request and notice form including a detailed and accurate as-built plan of the constructed system and a list of all materials used in the construction of the system must be completed and submitted prior to requesting a final inspection.
- <sup>2</sup> A pre-cover inspection of the installed absorption facility (prior to backfill) is required.

For pre-cover inspection information, contact your agent below:

11 34 By ( 1. 1.

Authorized Agent: Onsite Wastewater Specialist 6/29/2009 6/29/2010

Title Date Issued Expiration Date

#### **Don Jossie**

Department of Environmental Quality Western Region, Grants Pass Office

302 SE H Street

Grants Pass, OR 97526

Phone: (541) 471-2850 X225

Fax: (541) 479-2764

See the Attachment 1 for additional information about your permit.

34-06-35-TL500 & well House Driveway Tank-> Curtain Drain Drop 10' 101 4-102/ BOY - 801-10 -801-+101 10 80'~ Ho. 10 - 801-410'io' 551 PLAN APPROVED BY D.E.Q. 00 Date: 6-29-99 Signed

C,B.C Inc 6-29-09 Shuntury

PAGE 02/02



Application for On-Site Sewage Treatment System

Department of Environmental Quality 510 N.W. 4<sup>TH</sup> St. Grants Pass, OR 97526

0.11 6	60-6453	3000 IU 408900
n-Site Sewage System avironmental 4 <sup>TH</sup> St. OR 97526	Requirements: Plot Plan Vicinity and Tax Lot Map Test Pits—5 feet deep Zoning Clearance (County Planning Approval) Included: Plot Plan	For DEQ Use Only:  Date Received Fee Paid Receipt Number Application Number  Date of 1st Response Date of Final Response Date of Completion  Scanned  Data Entry
471-2850	Vicinity and Tax Lot Map	Underground Utility Locate Number

Department of Environmental Phone: (541) 471-2850 Quality Fax: (541) 479-2764 Test Pits -5 feet deep 1-503-232-1987 or 1-800-332-2344 Development Permit roperty Owner Information City Mailing Address B. Legal Property Description Section Tax Lot Township Property Address: Existing Facility / Proposed Facility / Water Information Water Supply: Proposed Facility: **Existing Facility:** Public Single Family Residence Single Family Residence Name X Private Number of Bedrooms Number of Bedrooms Well, Spring, Shared Other Other D. Type of Application Authorization Notice for: Renewal Permit Site Evaluation Connecting to an Existing System Not in Use **Existing System Evaluation** Construction Permit Replacing a Mobile Home or House with Another Mobile Home Permit Transfer Repair Permit or House The Addition of One or More Bedrooms ☐ Major ☐ Minor Permit Reinstatement Alteration Permit Personal Hardship Temporary Housing ☐ Major ☐ Minor 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 sign with your name and address at the entrance to the property. Flag route to site and indicate lot and test hole numbers. By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and it's authorized agents permission to enter onto the above described property for the sole purpose of this application. Signature Applicant's E-mail Address Licensed Septic Installer Applicant is the \ \ Owner Authorized Representative Authorization Attached

Installer's Name

2 3 2013

Curtain Drain Detail 34-06-35-TL500 Fubric Field 30" 1/2 DryN work Tute tite
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6-24-09 Shun Henden

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Department of Environmental Quality

Western Region Grants Pass Office 302 SE "H" Street Grants Pass, OR 97526 (541) 471-2850 FAX (541) 479-2764

June 19, 2009

David J. Holman 437 Cumberland Drive Grants Pass, OR 97526

#### IMPORTANT DOCUMENT - PLEASE READ CAREFULLY -This is not a construction permit-

RE:

Onsite #407760 Results - Site Approval With Conditions

Township/Range/Section: 34-06-35, Tax Lot Number: 500 (Lot #1)

El Conejo Drive, Grants Pass, Josephine County

Dear Mr. Holman:

Your site was evaluated for suitability of on-site sewage disposal systems on the following date(s): 6/15/09. Based on this evaluation, the following on-site sewage disposal systems are approved:

**Initial system:** 

Standard, 375 linear feet drainfield (SEE CONDITIONS PG 2 & 3)

Replacement system: Standard, 375 linear feet drainfield (SEE CONDITIONS PG 2 & 3)

Details of the site evaluation are included in the Site Evaluation Report that is enclosed. The Site Evaluation Report also includes more specific information and further conditions of site approval.

#### Next Step - Applying for a Construction/Installation Permit

When you are ready to proceed with system construction, contact this office to get a permit application package. The permit must be issued by DEQ before you can start construction.

#### Request for Site Evaluation Report Review or Request for Variance

If you believe that an error was made in the evaluation of your property, you may apply for a Site Evaluation Report Review at a cost of \$440. If you would like to apply for a Variance from one or more of the On-Site Sewage Disposal rules, you may apply for a Variance at a cost of \$1360. If you are interested in either of these actions, please contact the undersigned for more details before you proceed.

Best wishes on a successful project. If you have any other questions about this report, please feel free to call me at (541) 471-2850, ext. 225.

Sincerely,

Dan Dos Donald L. Jossie

Natural Resources Specialist

Enclosure

Site Evaluation Report





Onsite #407760 (Lot #1) June 19, 2009 Page 2

#### Site Evaluation Report For On-Site Sewage Disposal System Suitability

Site Location: 34-06-35, Tax Lot Number: 500 (Lot #1)

El Canejo Drive, Grants Pass, Josephine County

Applicant: David J. Holman

Date(s) of Site Evaluation: 6/15/09

DEO On-Site Specialist: Donald L. Jossie

Date of Report: June 19, 2009

#### **Approved Systems**

Based on the evaluation of the site conditions, the following on-site sewage disposal systems are approved:

Initial System:

System Type: Standard

Minimum Septic Tank Size: 1000 gallons

Linear feet of drainfield: 375 Distribution Method: Serial

Trench Depths – Maximum: 30" and Minimum: 24"

1. 30" curtain drain required with rock to 24".

Replacement System:

System Type: Standard

Minimum Septic Tank Size: 1000 gallons

Linear feet of drainfield: 375 Distribution Method: Serial

Trench Depths – Maximum: 30" and Minimum: 24"

Attached is the Site Evaluation Field Worksheet, which shows the approved areas and other details of the site visit.

#### Additional Conditions of Site Approval

- 1. This site is approved for the type of disposal system described above. Peak sewage flow into the system is limited to a maximum of 450 gallons per day, with an average sewage flow of not more than 225 gallons per day. This is normally sufficient to serve a single-family dwelling with a maximum of four bedrooms. Premature failure of the treatment system may occur if either of these flow quantities is exceeded. If for some reason you expect your domestic household water use may exceed these flows, it may be advisable to increase the size of the treatment system.
- 2. Any alteration of natural soil conditions (i.e. cutting or filling) in the acceptable area may void this approval.

Onsite #407760 (Lot #1) June 19, 2009 Page 3

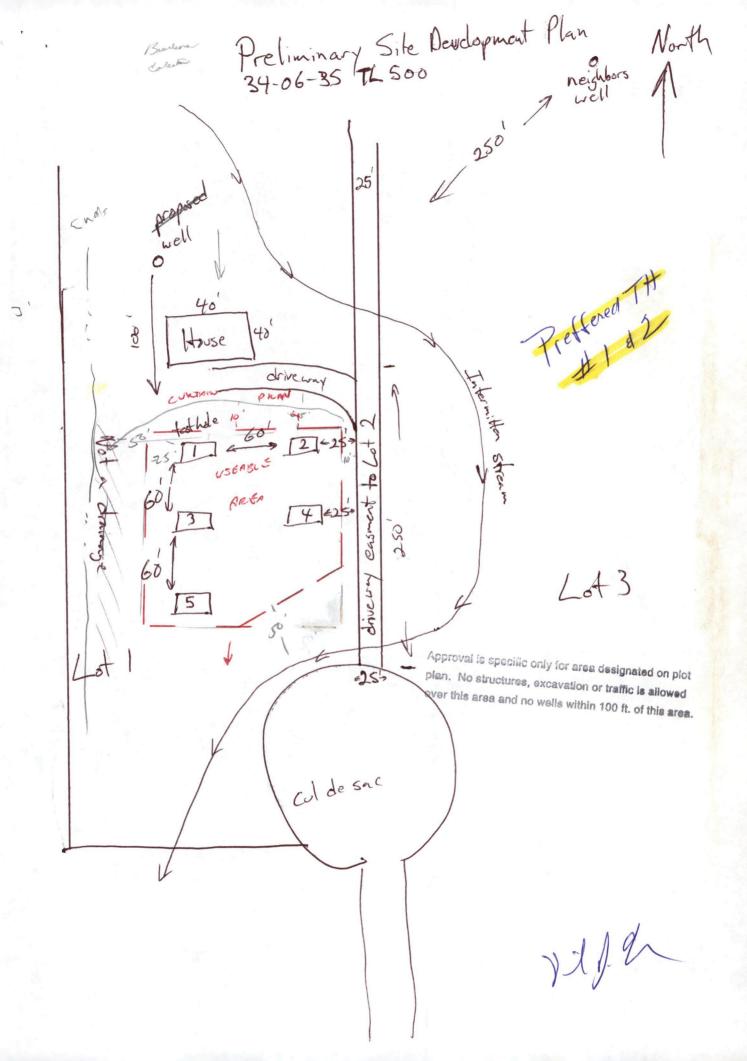
- 3. Both the initial and replacement disposal areas are to be protected from traffic, cover, development, or other potential disturbance of natural soil conditions.
- 4. The area must not be subjected to excessive saturation due to, but not limited to, artificial drainage of ground surfaces, roads, driveways, and building down spouts.
- 5. This approval is site specific and intended to serve only one tax lot. Future lot line locations through or near the approved area may invalidate this approval.
- 6. Placement of a well within 100 feet of the approved areas may invalidate this approval.

This site approval is valid until the system approved above is constructed in accordance with a DEQ construction permit. Technical rule changes shall not invalidate this approval, but may require use of a different kind of system. If there is a technical rule change affecting this site approval, the Department will attempt to notify in writing the current property owner as identified by the county assessor's records. The site approval runs with the land and will automatically benefit subsequent owners.

Attachment: Field Worksheet

#### SITE EVALUATION FIELD WORKSHEET

	ship:	_ Range:	Scenon	Tax Refe	uator: ادىء		7 5120. 1 6 . 627 7
	· = =	HOL MAW 6-15-09			lication Number		
ispec	nion Date(s)			App		•	
	DEDELL	THE YEAR ID TO	SOIL MATRIX	COLOR AND CONI	DITIONS ASSO	CIATED WIT	H SATURATION,
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-	Site Notes:				J1 :		
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_,	Flore #-18		SYSTE	EM SPECIFICATION	S		
_	n Flow:					ATT Treati	nent Standard:\_
	sal Facility: 3		near feet/square feet	Maximum Depth:	30 inches	Minimum D	
-		: Standary					nent Standard:
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ecia	l Conditions:	CO 0	30" W/24	1" Rock		<del> </del>	
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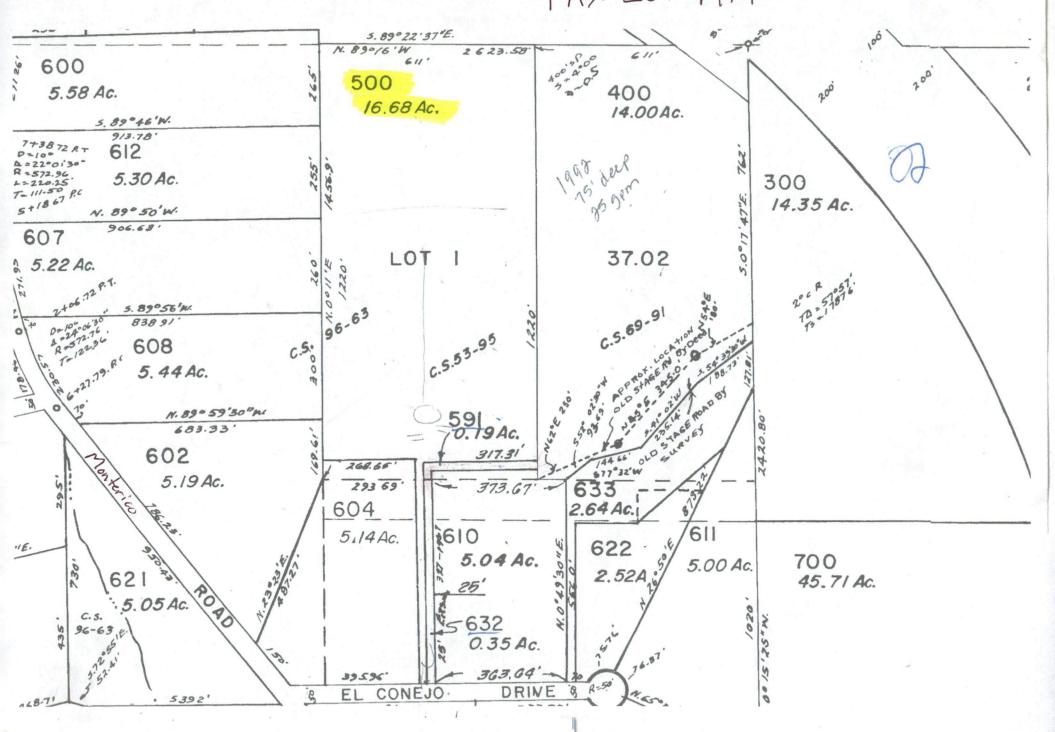


# Application for Onsite Sewage Treatment System

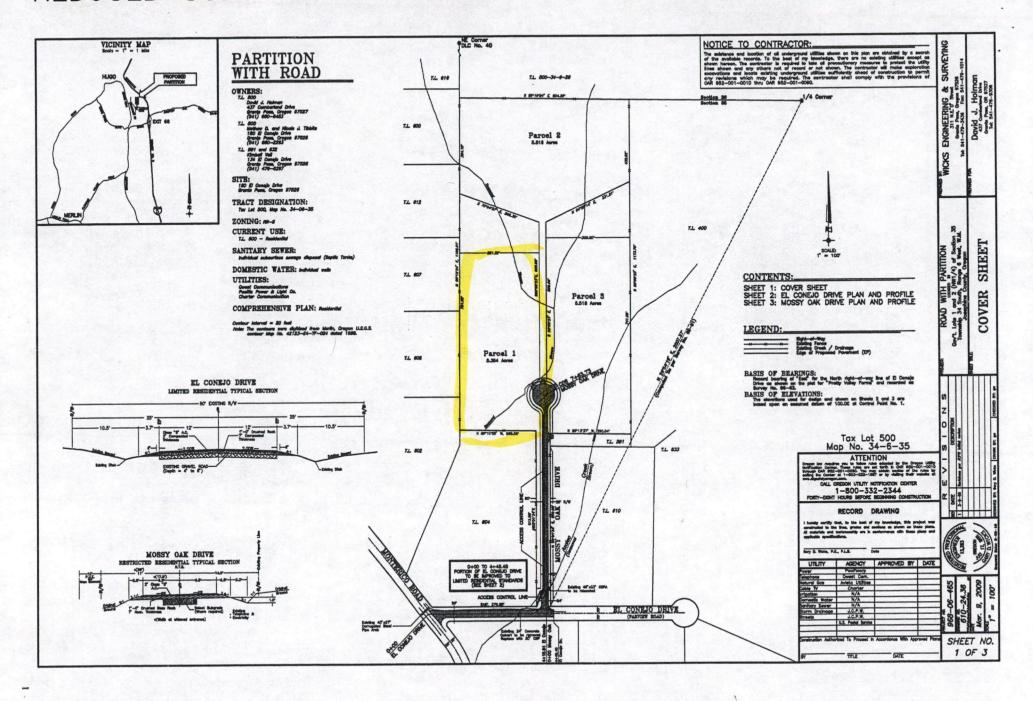
Department of Environmental Quality 302 SE "H" Street Grants Pass, OR 97526

Requirements: Plot Plan Vicinity & Tax Lot Map Test pits—5 feet deep Development permit	For DEQ Use Only: Date Received Fee Paid #485, 80  Receipt Number   39334  Application Number 408912
Included:	Date of 1st Response

Department of Environmental Quality	Phone/TTY: (541) 471 Fax: (541) 479-276	-2850	Plot Plan Vicinity & Tax L Test pits—5 feet Development per	deep	The best to be the control of the co	sponse sponse on Data Entry	
WAR TO DO		A. Property O				<b>经验验</b>	
DAVID 3	5. HOLMAN 437 Mailing Add	Combedand dress (Street or PO Box,	Or. Grants City, State, Zip Co	Pass, Dr. 975:	26 <u>54</u> Phone 1	1-660-6453 Number	
TALK STATE		B. Legal Prop	erty Descrip	tion			
34 Township Josephine County	Subdivision	n Name	500 - f	Lot		reage or Lot Size	
Property Addre	ss: 180 El Con Address operty: 7th st. to	ejo Dr.	City	ants Pass	State	775 <b>26</b> Zip Code	-
Directions to Pro	operty: 7th st. to	I-5 North	, take H	vgo exit i	nake left	ton Monument	1
1/2 mile to	ke right on Three 1	Pines then right	it on Oxyon	ke-puile	right on M	onterico then !	e
R CONTRACT	C. Existing 1	Facility / Propose	ed Facility /	Water Informat	ion	医的复数形式	200
Existing Facility		Proposed Facility:			Supply:		
☐ Single Family	y Residence	Single Family R	esidence	∐ Pul	Name .	11	
Number of Bedro	ooms	Number of Bedroom	S	Pri			
Other	<u> </u>	Other			Well, Spring	g, Shared	
NAME OF THE PARTY	いの大学の代表に対	D. Type of	Application			SE OF STEPHEN	100
Site Evaluatio Construction Repair Permi Major Alteration Per	Permit Existing t Permit T  Minor Permit R  mit	System Evaluation		cuthorization Noti Connecting to an Exis Replacing a Mobile Hoor House The Addition of One Personal Hardship Temporary Housing Other – Please Specif	sting System Not in Iome or House with or More Bedrooms	h Another Mobile Home	
	and attachments are not included address at the entrance to t				as incomplete.	Post a flag or sign	
and it's authorized  Signature  DAVID	I certify that the information of dagents permission to enter of the last of t	nto the above descri	Sorrect, and here ibed property for $5-27-0$ Date $541-660$ Applicant's Phone N	or the sole purpose	e of this applica	ation.	
Applicant's Name – P		1 1 0		Number	Applicant's E	-mail Address	
Applicant's Mailing A		nts Pass, Or.	97527				
Applicant is the	<u></u>	Representative	Licensed	Septic Installer		SCANNED	
	Authorizati	on Attached	Installer's l	Vame		SEP 2 3 2013	
			mistanci 3 i				



## REDUCED COPY SCALE: 1"=340



SUBSURFACE SEWAGE APPLICATION FOR SITE EVALUATION

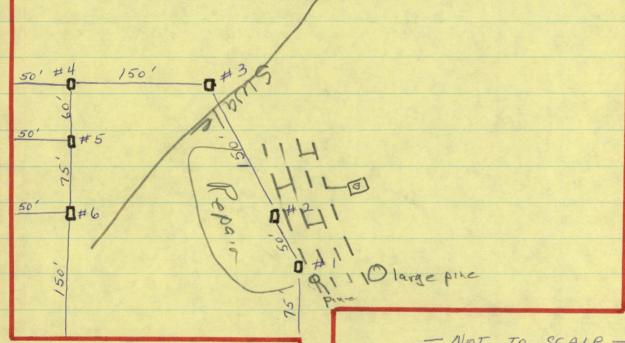
Josephine County Environmental Health Services Josephine County Courthouse, Grants Pass, OR 97526 Zone Verification 80-101 V Zone Clearance

	Nº 8009 Date Applied	November 14, 1980	
NAME OF PROPERTY OWNER	Henkens, Jim c/o Tim	Donovan	476-8228
MAILING ADDRESS	735 SE 7th St., Grants	Pass, OR 97526	PHONE
DIRECTIONS TO PROPERTY	180 El Conejo Drive		ZIP
		Sec. 35 TL 500  Lot Blk	
		X PLOT PLAN SUBMITTED X NO. SIT	-ES 1
General Topography		INFORMATION	
Relationship to Existing	g Domestic Water Sources	noted with 100'	
Hydrology: Depth to C	Ground Watertable (representative)	Someonal perched mottle	26"
Relationship to Surface	Waters		
2. 0-37 sch 37 Trest P	+ rest clay/oc	250 A 24-26.	
Miscellaneous Informat	ion holes 1+2 occupto	tele, no other harles evalue	n teel
Date 11-24-	&O Sanitarian	oh W Blanchand	
Evaluation Results: Special Conditions for	Acceptable Cond. Acc. X	Approval is specific only for area designated plan. No structures, excavation or traffic is over this area and no wells within 100 ft. of this	allowed

THIS IS NOT A PERMIT FOR CONSTRUCTION\*\*

# PLOT PLAN

HENKENS PROPERTY 34-6-35 T.L. 500 16.68 ACRES



25

- NOT TO SCALE -

LOCATION OF ANY ADJACENT WELLS

Plot plan SE 8009

> Approval is specific only for area designated on plot plan. No structures, excavation or traffic is allowed over this area and no wells within 100 ft. of this area.

CONEJO EL DRIVE

### ZONING INFORMATION SHEET

	*		ZON	ING INF	ORMATION	SHEET			
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			N:			L	ot	Block _	
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MAIL	ADDRESS	<b>:</b>							
APPL	ICANT:	Tim	, Do	nova	n		TEL:		
MAIL	ADDRESS	:7	35 3	5.E.	7th	5f			
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ordina	on the zon ance standa or parcels.	rds curren	property, i tly in effec	t may be	possible, s bdivide or p	subject to partition	compliance this proper	with all a ty into	ippropriate
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аму С	ONSTRUCTION	ON THE PR	OPERTY MUST	OBSERVE	THE FOLLOWI	NG SETBACI	roach permit at building KS:	<i></i>	* ·
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	side lot li		10		From rear		_		o of a
stree	t, the grea	ter setbac	k shall gove	ern.		•	back from th		
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