



APPLICATION FOR SUBSURFACE SEWAGE DISPOSAL PERMIT

PERMIT NO.

Josephine County Environmental Health Services
Josephine County Courthouse, Grants Pass, OR 97526

	INSTALLATION LOCATION_	330 Merlin Ave.
ZONE CLEARANCE 81-109		
	5-29-81 8450 11558-7 Date Permit # Site Eval. # Old Permit #	Nº 12342
PROPERTY OWNER	Siskiyou Enterprises (Patricia Hillman)	
MAILING ADDRESS	P.O. Box 1128, Merlin, OR	Issued TELEPHOI 97532 ZIP
INSTALLATION ADDRESS	330 Merlin Ave.	Expires
DESCRIPTION OF PROPERTY	T 35 R 6 SEC 21-22 TL 5300	
PERMIT REQUESTED BUILDING INFORM.	Acreage 1.5 Subd. Lot Blk New Repair Hook-Up X Other Commercial No. Employees Other Other	
PROPOSED WATER SUPPLY	Private X Community Public Public	_ Other
\$ 15.00 (cash) 5-29-81 Permit Fee Paid / Clerk / Date	Applicants Signature	lman
SUBSURFACE SEWAGE DISPOS. MINIMUM SEPTIC TANK CAPAC TRENCHES: Square Feet Equal	Width Length	
John Blanc Sanitarian	Date of THIS PERMIT EXPIRES ON	111
**SPECIAL INSTRUCTIONS AND OK + Mobile	conditions: 300 gpd increase	a septem design.
* N. M. S. L.	是一种"特别"的"特别"的"自己"的"特别"的"特别"的"特别"的"特别"的"特别"的"特别"的"特别"的"特别	THE WARRIES AND A STORY

THIS PERMIT AND THE ENCLOSED RECORD FORM MUST BE POSTED IN A CONSPICUOUS PLACE AT THE BUILDING SITE WHEN THE FINAL INSPECTION IS REQUESTED.

PREVIOUS APPROVAL _

3832

PERMIT NO.

8450

INSTALLATION LOCATION_

Merlin Ave



APPLICATION FOR SUBSURFACE SEWAGE DISPOSAL PERMIT

Josephine County Environmental Health Services Josephine County Courthouse, Grants Pass, OR 97526

Street Address of installation (If no street address, describe specific location): 330 Merlin Ave.
PROPERTY OWNER: Thomas A. Berry PHONE 9-8261
PROPERTY OWNER: Thomas A. Berry MAILING ADDRESS: P.O. Box 836 Merlin OR 5939 Donaldson Rd ZIP 97532 or 97526
DESCRIPTION OF PROPERTY: Twsp 35 Ran 6 Sec 21-BB Tax Lot 5300 Acreage 28000sq Name of Subdivision
PROPOSED WATER SUPPLY: Private Community Public Other
BUILDING INFORMATION: Home Mobile Home X No. of Bedrooms 2
CommercialNo. EmployeesOther
PERMIT REQUESTED: New Repair Hook-up X Other
\$ 15.00 Cash 9-2-77 ns
Permit Fee Paid / Clerk / Date Applicants Signature
MINIMUM SEPTIC TANK CAPACITY IN GALLONS: TRENCHES: Square Feet Width Length Depth Equal Loop Serial Date of Issue
Sanitarian Date 9/16/77 THIS PERMIT EXPIRES ON: 9/16/78
** SPECIAL INSTRUCTIONS AND CONDITIONS: C.W. D. confirms existance of mobile
Do not park mobile home over drain (ields or septi
DATE INSTALLATION APPROVED 12-27-78 SIGNED CERTIFICATE ISSUED
THIS PERMIT AND THE ENCLOSED RECORD FORM MUST BE POSTED IN A

CONSPICUOUS PLACE AT THE BUILDING SITE WHEN THE FINAL INSPECTION IS REQUESTED.

Joseph	ine County Health Dept.	Permit No. 3832 Expiration Date 7
Street address of installation (If no street address	s, describe specific location) 330	Morlin
Property Owner: Duis hou	Telep	hone: 479-0646
Mailing Address: 335 Merling Street	o acity	1erling
DESCRIPTION OF PROPERTY: Township	S Range Section Subse	1000
ax Lot Number: 5300 Dimension	ns of building site: Width	Depth
ROPOSED WATER SUPPLY: Individual — W Public: City	/ell (drilleddrivendug) Sur Community System(faceSpring name)
PROPOSED SUBSURFACE SEWAGE DISPOS nstalled by owner — yes no If no, gi	SAL SYSTEM: newrepair ive name of person installing system	
Have you any objection to having your application	I VI NIMO	yesno
BUILDING INFORMATION: Home Mo FHA or VA insured loan — yes no Garbage disposal unit — yes no	Commercial(type):	
SEPTIC TANK SYSTEM REPAIR INFORMATION:	Indicate proposed layout using as n	nuch detail as possible.
Septic tank material: SteelConcrete Date installed:		
Distribution box: YesNo Linear feetSquare Feet		
Aiscellaneous: Depth to ground water Topography(slope %) Distance from water source Date last pumped Probable reason for failure		
ee Schedule: new system \$5.00 repair	r \$2.00hook up to existing system	n \$1.00privy \$1.00
Permit Fee Paid of Noun 1		Checked by:
6-18-73 Signature of property of	owner Date Issued:	Clerk 7-11-23
DO NOT WRITE BELOW THIS LIN		
Domestic Sewage Disposal Permit: Approved S	Disapproved sanitaria	in 22 da
Minimum septie tank capacity in gallons: rench square feet width geepage bed square feet width geepage pit square feet width	length depth depth depth depth depth depth	. 27 m 13
Ory Well square feet width Privy	_ length depth	10.0
	Ital to be on	raching
SPECIAL INSTRUCTIONS: // O /VC		
	DMPLY WITH ORS 446.125 and OAR 44.4	90

Josephine County Health Dept.

	RECORE	OF INDIVI	DUAL SEWA	GE DISPO	SAL SYSTE	M			1 28/	
To Be Completed By	-	P . 7		il.	A A		Pin	Peke	I	
Permit Issued to		ddress 33	o mi	Pe Pe	staller's Na ermit Numb operty Ado	er	383 2000e	2	37	
Total Number:	Living units	2 6	edrooms	ba	iths	base	ment: yes	nc	,"	
Water Supply:	public syste	miı	ndividual	100	mmunity_	1 1 1 1	1			
Septic Tank:	distance fro total liquid inside width liquid depth		feet	Insic	erial Conc le length le depth	t So	nitati	on L	ervi	0
Tile Disposal Fie	eld (trench_/	or bed_)	Distributi		yes -	no	_other		_
	Total lin Width of Total squ Distance Type of r Depth ro Depth ro	of trench or be trench or between tile tock filler mark over tile tock beneath ards used:	e lines	200 1 200 1 10 1/2 m/		ft. '-' ft. '-' ft. ft. ft. ft. ft. ft.	25+1 00+1			
Seepage Pit:	depth	line	_width d(dry well)_	Miles Ton	lengtl	h gravel fill	ed(nit)	10 A		
Privy: ground e		depth		width			ngth		90.00 (c)	
cubic fee				widti-			ngtii			
DO NOT WRITE BELOW TH	HIS LINE		SIGI	NATURE OF	INSTALLER	nay .	w	6,	ATE	=
SI	KETCH OF AC	CTUAL SYST	EM (Show cr	oss section	of dry well o	r seepage p	it)			
System meets all code APPROVEDXf Remarks				New Men	Rich of Richard	satisfact	torily and	is theref	ore	
The Court	The state of the s				O					
			JOS	EPHINE C	OUNTY HE	ALTH DE	PARTMEN'	1		

Sanitarian

Date

ZONING CLEARANCE PERSIT Cosephine County, Oregon

Date SEPTEMBER 2, 1977 Zoned Area I
Owner THOMAS A BERRY
Mailing Address F.D. Box 836 MEXILIN OR 97532 OR 5939 DANALOSON ROND GRANIS PASS, UK 97527.
Property Description CEnter Appition
Subdivision-Name to meelin Lot 1- H Block 4
. Twp 35 Range 6 Section 21-188 Tax Lot 5300
Size or Lot-Width Depth Total Area 28000 57 /1-
Fronting on MERLIN AUENUE (330)
Proposed Use
Residential X If mobile home, state size 14 x 70
Commercial Industrial Other
Does a residence presently exist on this parcel: Yes X No
Subsurface Sewage Disposal System on this Parcel? Yes No
Provisions:
OTE: PLEASE RETAIN THIS DOCUMENT & BRING IT WITH YOU WHEN APPLYING FOR SEPTIC, SEWER, ELECTRICAL & BUILDING PERMITS.
Signature of Applicant
District Classification GC Minimum Lot Size
any structure to be placed on the above mentioned los must observe the following setbacks:
10' From Front Property Line (Note: Corner lots have 2 front yards)
40 1. From Center Line of Road 10' From Rear Property Line
5' From Left Side Property Line 5' From Right Side Property Line
Approved by:
No. (36)

APPLICATION FOR HOOK-UP AND EXTENSION OF EXISTING SUBSURFACE SEWAGE SYSTEM

Josephine County Health Department Environmental Health Services 714 N.W. "A" Street Grants Pass, Oregon 97526

1.0	Legal Description: Township 35 Range 6 Sec. $2/BB$
•	Tax Lot <u>530</u>
Permit N	(Date) under authority of the Josephine County Health Department, umber 3832, to serve a (Number) bedroom dwelling or taurny individuals if a commercial establishment. Business
1.	The current subsurface sewage disposal system consists of disposal trenches with a total length of 600 feet and a septic tank with a 500 gallon capacity determined by work Shut (measurement, pumping, records, etc.).
2.	The last establishment served by the sewage disposal system was a:
	a) bedroom dwelling (include all rooms built for use as bed-
	rooms though actually used for other purposes such as for a den or sewing room). (Mobile home woved off 4 pril 1977)
	b) Other (please specify) serving individuals.
3.	a) Bedrooms through actually used for other purposes such as for a den or sewing room.
	b) Other (Please specify) Serving individuals
located (includi water, b has ever	o information that the existing subsurface sewage disposal system on the property described above has failed by discharging sewage ng sink or laundry wastes) upon the ground surface or into any publicy clogging or backing up, or in any other manner. Further, if it failed, it was completely repaired, and it has operated continince the repair without another failure.

Applicants Signature homes (Sening

Date 9/5/77 ...

APPLICATION FOR HOOK-UP AND EXTENSION OF EXISTING SUBSURFACE SEWAGE SYSTEM

Phone: 474-5431 or 474-5432

Josephine County Health Department Environmental Health Services

	TION: Corner 4th & "C" Streets LING ADDRESS: County Courthouse, Grants Pass, Oregon
	AL DESCRIPTION: Township 35 Range / Sec. 21-22 Tax Lot5300
Peri	existing subsurface sewage disposal system was installed on 8-11-80 (Date) under authority of the Josephine County Health Department, nit Number 11558, to serve a 2 (Number) bedroom dwelling or nber) individuals if a commercial establishment.
1.	The current subsurface sewage disposal system consists of disposal trenches with a total length of feet and a septic tank with a gallon capacity determined by (measurement, pumping, records, etc.)
2.	The last establishment served by the sewage disposal system was a: Tavern now hosked up to system a) bedroom dwelling (include all rooms built for use as bedrooms though actually used for other purposes such as for a den or sewing room).
	b) Date previous establishment was last connected to sewage system
	C) Other (please specify)serving individuals.
3.	I propose to connect a:
	a) <pre>2 bedroom dwelling (include all rooms built for use as bedrooms though actually used for other purposes such as for a den or sewing room.</pre>
	b) Other (Please specify) Serving individuals.
	c) This is a special hardship provision (22K Zoning Ordinance) and will be temporary as long as the need exists. Dwelling will house a maximum of people.
4.	I verify that the existing subsurface sewage disposal system located on the property described above has/has not failed by discharging sewage (including sink or laundry wastes) upon the ground surface or into any public water, or by clogging or backing up, or in any other manner.
5.	The system has failed, but was completely repaired on date permit number, and it has operated continuously since the repair without another failure.
	Applicants Signature Patricia A. Villman
	Date 5-29-8/

DEVELOPMENT PERMIT JOSEPHINE COUNTY PLANNING

LEGAL DESCRIPTION:	
TOWNSHIP 35 S, RANGE W, WM, Section 71-22 TAX LOT 5300	
SUBDIVISION NAME (FILTER ADD. TO MERILLI LOT 1, 2, 3, 44 BLOCK 4	
MINOR/MAJOR PARTITION APPROVAL DATE:	
LOT WIDTH LAUFS TOTAL ACREAGE ~ 1.5	
CREATED PRIOR TO ZONING DATE PREVIOUS ZCP NUMBER 80-135	
ACCESS: ROAD FRONTAGE ON MERLY AVE. ADDRESS: 330	
MAINTAINED COUNTY ROAD/STATE HIGHWAY (See STANDARDS below)*	
PROPERTY OWNER: SISKIYOU FAITERPRISES (PATRICIA HILLIAM) 9-9	1274
MAILING ADDRESS: P.O. BOX 128 MERLY	
EXISTING PROPERTY DEVELOPMENT(S)/USES(S):	
RESIDENCE NUMBER OF RESIDENCES	
SUBSURFACE SEWAGE SYSTEM SEWER	
OTHER: " U. CORRALL" (TALERAL)	
PROPOSED STRUCTURE OR USE:	ent
Conventional Residence	partment
Mobile Home, size	Depart
Guest House	Ith I tme ins
Commercial_	Hea epar etai
Industrial	ntal ty D
Agricultural Building	Safe Plica
Addition to Existing Structure**	viro ing Ap
	3uild
Other	ary c – l denr
STANDARDS:	Series
ZONING CLASSIFICATION:	
MINIMUM LOT WIDTH AT THE BUILDING LINE: WITHIN FLOOD HAZARD AREA:	
COMMENTS: LOCATED LIXISTURGIER PROBLEM AREA /C	
6/2/3/	
The Mkt to be disconved Drive to	be
ANY CONSTRUCTION ON THE PROPERTY MUST OBSERVE THE FOLLOWING SETBACKS: From front lot line * From centerline of street *	dely
From side lot lines 5 From rear lot line 19.4	
2009 DC WARDER ON SINGER COM	m
*In regard to the setback from the front property line and the setback from the centerline of a street, the greater setback shall govern.	en.
ACCESSORY STRUCTURES IN R-1, R-2, and R-3 ZONES MAY BE PLACED 6 FEET FROM THE REAR LINE.	
* A road approach permit (for County maintained roads or State highways only) from the County Road Department or State Highway Division must be acquired prior to issuance of a Building Permit.	
**Additions to existing structures must be placed at least 5 feet from septic tank, and 10 feet from drainl	ines.
6-1-81 John Williamshow	
- Outlegaptier, to Convert	
APPROVED BY: May a signature of owner: Hatricia a Mellman	
DATE ISSUED: 26 May 8/ ZONED AREA T NUMBER 8 - 109	

I/We certify this addition will not be used as a bedroom and that no structure will be within 5' of the septic tank and 10' of the drainfield. The septic system is not failing or malfunctioning.

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SECTION

101

Airport Hazard

R

County

Tax Lot in Isolated Ownership Qualifying as a Developable Parcel

development subject to minor land partition or Commission approval.

Urban Growth Boundary __

Minor Partition: Date __

Subdivision Major Partition

Tax Lot in Contiguous Ownership T

Other: Fire Hazard

Block

JOSEPHINE COUNTY DEVELOPMENT PERMIT

Previous Permit No.

Property Owner: Mailing Address:

Commercial Industrial Agriculture Bldg.	DEVELOPMENT	SED
Addition to Existing Bldg. Home Occupation Other Vacant NOTES:	Conventional Residence Mobile Home Multi-Family Commercial Industrial Agriculture Bldg. Addition to Existing Bldg. Home Occupation Other	Br Br Units

Zoning Classification Minimum Lot Size Setbacks From Property and Street Center Line: Street Center Line 40 Ft. Ft. C.P. Ft. Rear // C.P. Additional Setback Notes

Class 1 or 2 stream setback of 15' from high water line or 25' from low water line (When setback conflicts occur, the greater setback shall govern)

Easement, Private Road, Public Usage Road Access:

Non-maintained County Road or Court-Declared Public Road Maintained County Road (See County Road Dept. to obtain road approach permit) State Highway (See State Highway Dept. to obtain road approach permit)

ALL STRUCTURES APPROVED BY THIS PERMIT MUST ALSO BE CLEARED WITH THE ADDITIONAL PERMITS: ENVIRONMENTAL HEALTH AND BUILDING SAFETY DEPARTMENTS. ** Incorrect information provided by the applicant may invalidate this permit.

_ Owner Contractor License #_ Signature

APPROVED BY

Property Acreage _

Goldenrod - Applicant

Building Safety Dept

Original - Planning

Dept

Canary

1

Environmental Health

Dept

Pink -

Yes No

col	DE	ACRES		- r	ACCOUN	IT NO.		OFF	FICIAL REG	CORD	1	-	CONTROL
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TWP.S. RGE. 1

R304237

CLARK, CONIUS C

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OF REAL PROPERTY

Josephine county assessor's office $3\,5$

MAP NU 30042375 12 FORMERLY PART OF T.L. NO. . ACCOUNT CON DATE OF ENTRY ACRES LINE TITLE OWNER'S NAME HARVEY, M. DE WITT & LAURA G. W.D. 177 313 Musick, Robert W. + Jewe) M. 28254 6-7-76 3202 % Pittman William G 716 Cont 317 %Berry, Thomas A 322 1066 Agree 14509 Co. 78-88 comb. Vac. Aller order 10-06-78 26800 %Ridley, John W. & C.F. Evans-Ea. HInt. Agree. 333 1532 7 333 % Siskiyou E nterprises, Inc. 1536 4-25-80 Assign 13 1378 Ridley, John W & Evans, C P - ea ½ int. WD 5-26-81 1381 Assign 32549 Siskiyou Enterprises, Inc. 5-26-81 13 1380 WD 2-17-83 39603 2-17-83 B&S 34 563 Bird, Michael J Bird, Michael J & Baldwin, Howard E - ea 50% B&S 34 564 1909 Record Only (Musick to Pittman) WD 11-04-83 42 12 42 1908 WD 11-04-83 Record Only (Pittman to Berry) 13 42 1907 WD 11-04-83 Record Only (Berry to Siskiyou Ent.) 14 15 30042375 C/S FAMILY BANK OF COMMERCE 112 3064 09-15-89 Sherif Děëd 125 2046 10/23/90 record (Bird/Baldwin to Fam Bank) 17 125 2889 Blakely, Billy G & Esther M WD 10/23/90 18 67042 Combine T.L. 5300 (300-423-51) 478 MP 67043 89 1478 Exe. T.L. 5701 (303-578-26) MP 2-28-92 20 Exc. T.L. 5702 (303-578-33) 21 Z-28-97 Blakely, Billy G & Esther M 1/2 int B B & E 1/2 int WD4/26/96 192 3704 22 24 R304237 AUDIT: 01/09/01 BLAKELY, BILL G & 12/29/00 00-22634 25 BLAKELY, ESTHER M 26 SCANNEDAUDIT: 04/24/03 R304237 27 TCASWELL, SIGMUND JR 04/18/03 03-009082 AUG 0 1 2005 R304237 AUDIT: 09/17/03 CLARK, CONIOUS C 09/12/03 03-022543 29

AUDIT: 09/22/04

09/15/04 04-021511

LINE

1

INDENT EACH NEW COURSE TO THIS POINT

Ctr Addn

Lots 7, 8, 9 & 10 Blk 4

AM in T35S R6W WM

New legal 3/6/92

Lots 10,11,12 and the Northwesterly half of Lot 9, all in Block 4, CENTER ADDITION TO MERLIN, Josephine County Oregon also the Southwesterly half of an alley adjoining the Easterly line of said Lots 10,11,12 and the Northwesterly half of Lot 9, as vacated by Josephine County Order No. 78-88, Entered June 8, 1978

35 6 35 06 21 22 5300 00

4

MA

30042351

ACCOUNT

MAP N

12

CON

OFFICIAL RECORD OF DESCRIPTIONS 35 06 21 22 5300 00 OF REAL PROPERTY

JOSEPHINE COUNTY ASSESSOR'S OFFICE \$ 5

FORMERLY PART OF T.L. NO. ___

		TYPE OF	DATE OF ENTRY	DEED I	RECORD	ACRES
NO.	TITLE OWNER'S NAME	INSTRUMENT	ON THIS CARD	VOL.	PAGE	REMAINING
1	ROACH, H. H.	D,		84	276	
i	Merlin Development Corp., Inc.	WO		236	321	
3	Comb. T.L. 5400	owners Reguest	IV-76588 11-70-70	218	109	
4	Cemb. T.L. 5401	. 11	11-20-70	240	350	
5	Comb. T.L. 5402	"	JV-26588 11-20-70	218	109	
6	Comb. T.L. 5500 AUG 11 2000	K	11-26588	218	418	
7	Comb.T.L. 5806	"	JV-26588 11-20-70	236	321	
8	Louie, Louis & Joanna B	WD	1080473	291	613 327	
9	\int Louis & Joanna $\frac{1}{2}$		10525			
10	Atwood, Albert E & Frances D 2	WD	12-16-74	306	875	
11	Fallow, Daly & Katherine M	MD	21507	309	347	
12	Pittman, William G.	B&S	7-14-76	318	256	
13	Barry, Thomas A & Lucille M	WD	3593 4-26-77	322	1069)
14	Comb. Vac. Alley	order	6-26-78	78	88	
15	%Ridley, John W. & C.P. Evans-Ea. ₺In	t. Agree	. 10-06-78	333	1532	
16	% Siskiyou Enterprises, Inc.	Assign	26800 4-25-80	333	1536	
17	Ridley, John W & Evans, C P - ea ½ int.	WD	5-26-81 32549	13	1378 138 1	
18	Siskiyou Enterprises, Inc.	Assign WD	5-26-81	13		
19	Bird, Michael J.	B&S	2-17-83	34	563	
20	Bird, Michael J & Baldwin, Howard E - e	a 50% B	39603 SS 2-17-83	34	564	
21	30042351	C/S				
22	FAMILY BANK OF COMMERCE		09-15-89	112	3064	
23	record (Bird/Baldwin to Fam Bank)	Sheriff Deed	10/23/90	125	2046	
24	Blakely, Billy G & Esther M	WD	10/23/90	125	2889	/
25						
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27		/				
28	CONSOLIDATED WITH ACCOUNT # 5700 (300	423-7	· <u>}</u>			
2 9	in a firm	<u></u>				
30	DATE J.V. 6/046 2-28-96/600	1				

1

INDENT EACH NEW COURSE TO THIS POINT

Ctr Addn

Lot 1 Blk 4

All in T35S R6W WM

- 3 ALSO: Lots 2,3,4, Blk 4
- 4 Lot 3, Blk 4 AISO:
- 5 Lot 4, Blk 4 ALSO:
- Cat NEly cor of Lot 5, Blk li th Wly alg the Nly li of Lot 5, 60'; th Sly at rt angles to sd li 20'; th 60'Ely at rt angles to the sd last des li to the Ely bound li of Lot 5 6 ALSO:

th Nly 20' to the pob.

7 ALSO: Lots 11 & 12 Blk 4. 35 6 21 B B 5500 TYPE SPEC.

MAP NUMBER TAX LOT NUMBER REAL PROP.

ACCOUNT NUMBER REAL PROP.

ACCOUNT NUMBER NUMBER

ACCOUNT NUMBER

OFFICIAL RECORD OF DESCRIPTIONS

JOSEPHINE COUNTY ASSESSOR'S OFFICE 3 5

FORMERLY PART OF T.L. NO.

HIIIH						
LINE NO.	TITLE OWNER'S NAME	TYPE OF INSTRUMENT	ON THIS CARD	VOL.	PAGE	ACRES REMAINING
1	MERLIN DEVELOPMENT CO., INC.	e.c.		218	418	
2						
3						
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5	ADDIAFILED					
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7	OUNDEPED					
8	CONSOLIDATED WITH ACCOUNT # 5300					
9						
10	DATE 11-20-70 JV-26588 JM					
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LINE

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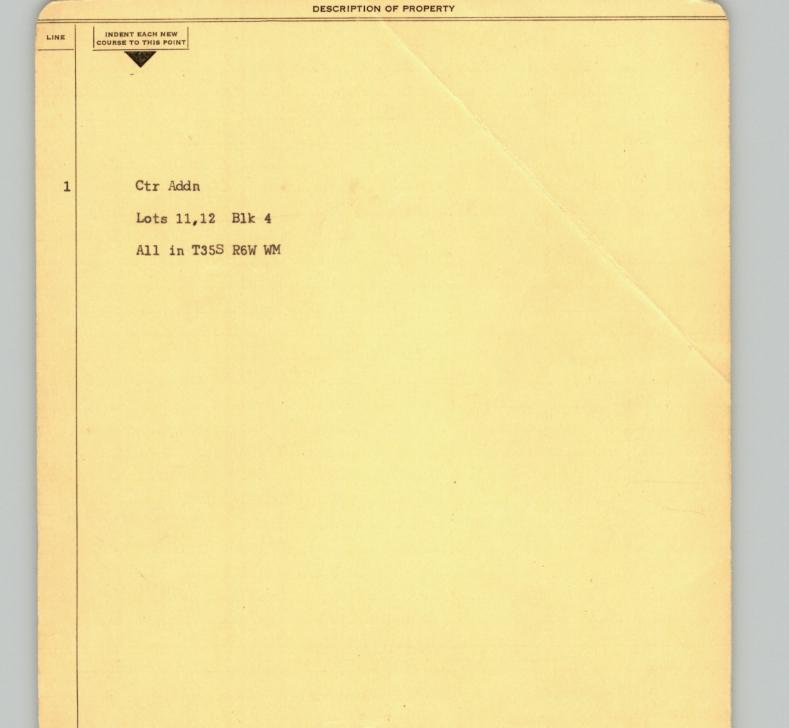
INDENT EACH NEW COURSE TO THIS POINT

Ctr Addn

Com at the NEly cor of Lot 5 Blk 4
th Wly alg the Nly li of Lot 5; 60 ft;
th Sly at rt angles to sd li 20 ft;
th 60 ft Ely at rt angles to the sd last des li to the Ely bndry li of sd lot 5;
th Nly 20 ft to the POB.

All in T35S R6W WM

OFFICIAL RECORD OF DESCRIPTION OF REAL PROPERTY 8819 6 21 B B 05800 5 JOSEPHINE COUNTY ASSESSOR'S OFFICE 5 TWP.S. RGE. W. SEC. 1/4 1/16 TYPE SPEC. TAX LOT NUMBER CODE AREA NUMBER REAL PROP. MAP NUMBER ACCOUNT NUMBER FORMERLY PART OF T.L. NO. _ DEED RECORD DATE OF ENTRY LINE TITLE OWNER'S NAME PAGE VOL. ROACH, H. H. 84 276 Merlin Development Corp., Inc. 236 321 3 4 5 8 CONSOLIDATED WITH ACCOUNT # 5300 TV-26588 ATE 11-20-70 10 11 AUG 0 1 2005 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30



OF REAL PROPERTY 5 35 6 21 B B 05400 JOSEPHINE COUNTY ASSESSOR'S OFFICE 3 5 TYPE SPEC. INT. IN REAL PROP. TWP.S. RGE. W. SEC. 1/4 1/16 TAX LOT CODE AREA NUMBER MAP NUMBER ACCOUNT NUMBER FORMERLY PART OF T.L. NO. _ DATE OF ENTRY ON THIS CARD DEED RECORD TYPE OF LINE TITLE OWNER'S NAME PAGE VOL. w.D. 218 109 MERLIN DEVELOPMENT CO., INC. Exc. TL 5401 Exc. TL 5402 3 5 6 CONSOLIDATED WITH ACCOUNT # 5300 10 DATE 11-20-10 JV-26588 Jm 11 12 13 SCANNED 14 15 AUG 0 1 2005 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

OFFICIAL RECORD OF DESCRIPTIONS

INDENT EACH NEW COURSE TO THIS POINT

1 Ctr Addn

Lots 2,3 4 Blk 4

All in T35S R6W WM

OFFICIAL RECORD OF DESCRIPTIONS OF REAL PROPERTY 9814-1 5 35 6 21 B B 05401-JOSEPHINE COUNTY ASSESSOR'S OFFICE 5 TWP.S. RGE. W. SEC. 1/4 1/16 TYPE SPEC. INT. IN REAL PROP. TAX LOT CODE AREA NUMBER MAP NUMBER 5400 ACCOUNT NUMBER FORMERLY PART OF T.L. NO. __ DEED RECORD DATE OF ENTRY ACRES REMAINING TITLE OWNER'S NAME VOL. PAGE Svistunoff, Peter M. + Alla Merlin Debelopment Company, Inc WD 235 350 G. D. 240 350 3 4 5 6 7 8 5300 9 ATE 11-20-70 JV-26588 Jm 10 11 SCANNED 12 AUG 0 1 2005 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

LINE

INDENT EACH NEW COURSE TO THIS POINT

Center Addition to Merlin

Lot 3 Blk 4

All in T35S R6W WM

OFFICIAL RECORD OF DESCRIPTIONS 35 6 21 B B 5402 5 5 OF REAL PROPERTY 8814-2 JOSEPHINE COUNTY ASSESSOR'S OFFICE 5 TYPE SPEC. INT. IN REAL PROP. TWP.S. RGE. W. SEC. 1/4 1/16 TAX LOT NUMBER CODE MAP NUMBER AREA NUMBER 5400 ACCOUNT NUMBER FORMERLY PART OF T.L. NO. LINE TYPE OF DATE OF ENTRY ON THIS CARD TITLE OWNER'S NAME PAGE Merlin Development Co., Inc. 218 WD 109 2 3 5 6 7 CONSOLIDATED WITH ACCOUNT # 5300 8 DATE/1-20-70 JV-26588 10 11 SCANNED 12 AUG 0 1 2003 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

INDENT EACH NEW COURSE TO THIS POINT

Center Addition to Merlin

Lot 4, Blk 4

All in T35S R6W WM



JOSEPHINE COUNTY BUILDING SAFETY DEPARTMENT

PERMIT 3-57-77

BUILDING PERMIT & OCCUPANCY APPLICATION

APPLICATION IS HEREBY MADE TO _ Fred S	(gg
BUILDING ADDRESS 380 Media	1 Ave
LEGAL DESCRIPTION: Township 35 Range 6	Section 2183 Tax Lot No. 5300
PERMITTEE: Name Medford Sign	Address 3630 Crutarfate profe
CONTRACTOR: Name Lic. No	
ENCINEED OR	
	Address Above Phone
LENDING INSTITUTION: Name	Address Phone
ADDITIONAL APPLICATIONS SHALL BE FILED BEFORE WORKMEN CAN PROCEED WITH ELECTRICAL, PLUMBING, MECHANICAL OR OTHER WORK FOR WHICH PERMITS MAY BE REQUIRED.	BUILDING PERMIT FEE \$ 58.00 \$
SUBCONTRACTORS: Lic. No.	PLAN CHECK FEE Warred
PLUMBING	PLUMBING FEE
MECHANICA L	medifficate in the second seco
ESTIMATED TOTAL VALUATION \$ 4000	- ELECTRICAL FEE
ESTIMATED TOTAL VALUATION \$ 1000	TOTAL FEE \$ \$ \$
ZONING & PLANNING INFORMATION: USE ZONE GC.	BUILDING CLASSIFICATION: CHANGE OF OCCUPANCE
LOT WIDTH 100 AREA (Acres) (Sq. Ft.)39 000	NEW CONSTRUCTION REPAIR DEMOLITION
LOT DEPTH 200' INDICATE	ALTERATION (Remodel) ADDITION MOVED BUILDI
REAR (·) NORTH	FIRE ZONE NO. STORIES
SETBACK	OCCUPANCY GROUP
SIDEYARD SIDEYARD BUILDING HEIGHT	TYPE CONSTRUCTION
FRONT YARD SETBACK	
SIDE YARD SETBACK	OCCUPANT LOAD
SETBACK REAR YARD SETBACK	FLOOR AREA
REQUIRED PARKING	-11 7011
ROAD FRONTAGE NEAREST INTERSECTION	PLAN CHECKED ON 3/25/77 BY
NAME DISTANCE	THE UNDERSIGNED PERMITTEE HEREBY APPLIES FOR A CERTIFICATE OF OCCUPAN
EXISTING GROUND NEW OR	FOR SAID PREMISES AND AGREES NOT TO OCCUPY THEM UNTIL THE CERTIFICATE HE BEEN ISSUED. SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, HE/ ING, VENTILATING OR AIR CONDITIONING. THIS PERMIT BECOMES NULL AND VOID
FLOOR AREASQ. FT.	ING, VENTILATING OR AIR CONDITIONING. THIS PERMIT BECOMES NULL AND VOID WORK OR CONSTRUCTION ARTHORIZED IS NOT COMMENCED WITHIN 80 DAYS, OR IF CONTROL OF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 120 DAYS AT A
NO. BEDROOMS TOTAL SQ. FT.	TIME AFTER WORK IS COMMENCED. I ACKNOWLEDGE THAT I HAVE READ THIS APPLI TION AND DECLARE THAT THE STATEMENTS ARE CORRECT AND AGREE TO BUILD ACCORDANCE WITH APPROVED PLANS, SPECIFICATIONS AND COPE OF JOSEPHINE COUL
LOT AREA COVERAGE%	1611,11
ZONING CLEARANCE PERMIT ISSUED Date 7/73 No. 79	TERMITTEE ON AGENT
	BY Sarbara Felosa
SANITATION & SEWER DATA:	BY Partone Terrosa
TYPE OF SEWERAGE DISPOSAL PUBLIC OR SEMI PUBLIC	RECEIPT NO. 56
PRIVATE	KECEII I IIO.
SEPTIC TANK: ISSUED DENIED DENIED	RECD. FROM Medford Sign
	RECD. FROM 11 ed tord Sign
TYPE OF WATER SUPPLY PUBLIC OR SEMI PUBLIC PRIVATE	A CONTROL OF THE PROPERTY OF T
PERMIT NODATE ISSUED	GENERAL FUND \$ 58.00
SITE OR PLOT PLAN & DIRECTIONS;	
SHE OR PLUI FLAN & DIRECTIONS;	390% STATE SURCHARGE
	OTHER
	CASH CHECK OTHER AMOUNT RECEIVED
	× \$ 28.89
	2-10
	RECEIVED BY 15 FUCOSO

BUILDING INSPECTION REPORT

330 Merlin Aug

INSPECTOR MUST SIGN ALL SPACES PERTAINING TO THIS JOB AND RECORD INSPECTION DATE ON POSTED INSPECTION RECORD

FOUNDATION INSPECTION:

			DATE	INSPECTOR
	1	SETBACK & FORMS	San	Service Vinera
	2	FOUNDATION & PIERS		- anni: stilligti gbila
	3	UNDERFLOOR VENTILATION		age rown manual comment.
	300	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
FRA	ME IN	SPECTION		
	4	FLOOR FRAMING / NAILING SCHEDULE		PORAD, AVIATOR OF
	5	OPEN FRAMING / NAILING SCHEDULE	103 JUL 1401 AV	BOSMINWI HALE LE
	6	ROOF FRAMING / SPAN TABLES	16.	7/A
	7	FIREPLACE CONSTRUCTION	La Carrier (Tarles	and the same
	8	FIRE STOPS		
LAT	H ANI	O / OR WALLBOARD INSPECTION	CARDSTEAN L	
	9	WALLBOARD OR PLASTER	1 044 - 100	(4) (5-8) (5-8)
	10	CERAMIC TILE AND WAINSCOTING	NICE PARKING	
	11	SHOWER WALL WATERPROOFING		ATH JEE BOATHOU
	12	NAILING SCHEDULE		396
FINA	AL INS	SPECTION		
	13	IONIZATION UNIT	1A VI 97	
	14	CRAWL SPACE DRAINAGE	The Land Mr.	Harrig Barbokawasan
	15	GARAGE WALL / DOOR / OPENINGS		ATEC GRASS SWOTE
	16	GARAGE VENTILATION	12.30.20.180.120	JAZOTO O JOJANAWA I
	17	GUARD RAILS	25.44040155	
	18	STAIRS / RISE / RUN / HAND RAILS		Part Land
	19	STRUCTURE COMPLETE	4-21-77	fre
COR	RECTI	ONS: ETC. List item numbers and corrective	P AYDING S	STATE THE PROPERTY.
		A Land of the state of the stat	- AMOUTO	SERVICE 18 10 19 3
		931 to 0		
		The second secon		10 E

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JOSEPHINE COUNTY **BUILDING SAFETY DEPARTMENT**

Location: 6th & "A" Streets, Grants Pass
Mailing Address: Josephine County Courthouse
Grants Pass, Oregon 97526

PERMIT AND **OCCUPANCY APPLICATION**

Ph	one: 476-8201			THE SAN
E Ds	LET ADD. TO DAN	Salar Sa	ANNING:	SANITATION:
	1	LU		Sewer Permit
BUILDING ADDRESS 33	O MERLIN AVE	Wi	dth_UAIC_	No.
(Str	reet, City or Lot / Block / Subdivision	on) De	pth 100	Date
LEGAL DESCRIPTION	35, 6,21-225	1000 Ar	ea .21 AC	
	wnship / Range / Section / Lot	对 阿尔 · · · · · · · · · · · · · · · · · ·		Septic
	REPINE .	SE Fro	TBACK C 40	Tank
CONTRACTOR/ BOB DEALER Name			de 0 10	Permit 1974
DEALER Name	Address Lic. No.		4	No. Date
ENGINEER/		Re	ar	Date
ARCHITECT/ INSTALLER Name	Address Lic. No.	Phone ZC	te 11/21/78	No. of
	du	4 A 4 66		Bedrooms
ESTIMATED TOTAL VALUAT	TION \$ 7 700	No.	1839I	
BUILDING:	MOBILE HOME:	CERTIFICA	TION AND FEES:	
Fire Zone 111	In City Limits?	a Laidh	FEE	STATE SURCHARGE
Occupancy	III City Limits?			
Type Const.	MH Park Lic. No.	BUILDING	PERMIT \$ 7	\$ 28
Occupant Load	WITT dik Lio. 140.	PLAN CHEC	sk	
Floor Area	No. of App. Spaces		1321/62/3	
No. Stories		MECHANIC	AL	- 18 (2)
Plan Check	Space No. This MH	MOBILE HO	OME	
	S Nu rani			\$.28
By KC	Requested Date	TOTAL		of this application to
Date 10/19/78	of Inspection/_/	BE CORRECT T	TO THE BEST OF MY KN	OWLEDGE, AND FURTHER
MECHANICAL:		FOLLOWING:	: READ, UNDERSTOOL	, AND AGREED TO THE
EQUIPMENT FEE	EQUIPMENT FEE			D ONLY IN ACCORDANCE OVISIONS RELATING TO
<u>EQUIPMENT</u> <u>FEE</u>	<u>EQUIFINENT</u> <u>FEE</u>	The second secon	AND REVOCATION.	T APPROVED INSPECTION
\$	<u> </u>	STAGE. AL	L REQUIRED INSPECT	T APPROVED INSPECTION IONS SHALL BE CALLED
			JRS IN ADVANCE. FICATION IN PLANS O	OR WORK SHALL BE RE
			ADVANCE TO THE DEP	ARTMENT. 3 WITH ALL APPLICABLE
		FEDERAL,	STATE, OR LOCAL LAWS	S, ORDINANCES, OR REGU
		LATIONS RI	ESTS SOLELY WITH THE	APPLICANT.
		no	PERM	n ₁ ,0
		BOB	REPINE	
	24011341343	- Applicant o	r Agent's Name	Clerk
		Colget	4. Kepa	\$ 7.28
		Applicant o	r Agent's Signature	Fee
		12.	4,78	12-6-78
TOTAL FEE \$ _		Data	1,10	Permit No.
IOIAL FEE 5		Date		remit No.

INSPECTION REPORT Inspector Must Sign All Spaces Pertaining To This Job

330 Merlin Ave

	BUILDING
INSPECTION	CORRECTIONS
FDN./SETBK + FORMS:	y Can the control of
DATE	
INSPECTOR	
FDN. + FLOOR SYSTEM:	EREET ADD TO WINCE HALL
DATE	
INSPECTOR	The late of the second of the
FRAMING:	
DATE	Ber Renke .
INSPECTOR	24/134 330
INSULATION:	
DATE	
INSPECTOR	
INTERIOR WALL COVERING:	
DATE	
INSPECTOR	
FINAL:	
DATE 3-7-7	7
INSPECTOR 3-7-7	
	MECHANICAL
INSPECTION	CORRECTIONS
ROUGH:	10 PA 78
DATE	
INSPECTOR	
FINAL:	
DATE	
INSPECTOR	
1 1/4	
INSPECTION	MOBILE HOMES CORRECTIONS
SET-UP:	3323110110
3E1-0F.\	
6-7-21 86 b	12

JOSEPHINE COUNTY
BUILDING SAFETY DEPARTMENT

PERMIT 3 -5-9-83

B

BUILDING PERMIT & OCCUPANCY APPLICATION

N. A. A.	0 4 0	C. 10	all 26 - 05 A	PPLICATION	122/27	
APPLICATION TO New	menling		DATE OF A	PPLICATION	123183	
BUILDING ADDRESS 3 30				file of the second second		
LEGAL DESCRIPTION: Township						
OWNER: Name						
CONTRACTOR: Name	NoAddress			Phone		
ENGINEER OR ARCHITECT: Name	Phoi	neESTIMAT	TED VALUATION TED PLAN CHECK	\$FEE \$F	REC#	
ADDITIONAL APPLICATIONS SHALL WORKMEN CAN PROCEED WITH EL MECHANICAL OR OTHER WORK MAY BE REQUIRED. SUBCONTRACTORS: PLUMBING	L BE FILED BEFO ECTRICAL, PLUMBII FOR WHICH PERM	FINAL VARIANTE STATE STA	State Sur State Sur State Sur State Sur State Sur State Sur			
PLANNING: Zone	No. Plar By: Dat NAY ACH No.	supancy— ee Const. cupant Load or Area Stories n Check TES:	I CERTIFY TO THE BE HAVE REA THE FOLLO 1. THIS PE IN ACC LATION LAPSE A 2. WORK PROVED FOR 24 3. ANY MI SHALL IN ADV. 4. RESPON APPLICA LAWS, REST'S S	CERTIFICATION: I CERTIFY THIS APPLICATION TO BE CORRE TO THE BEST OF MY KNOWLEDGE AND THAY HAVE READ, UNDERSTOOD, AND AGREED THE FOLLOWING: 1. THIS PERMIT SHALL REMAIN VALID ON IN ACCORDANCE WITH CODE OR RECLATION PROVISIONS RELATING TO THE LAPSE AND REVOCATION. 2. WORK SHALL NOT PROCEED PAST PROVED INSPECTION STAGE. ALL FOR 24 HOURS IN ADVANCE. 3. ANY MODIFICATION IN APPROVED PLASHALL BE SUBMITTED FOR REAPPROVIN ADVANCE. 4. RESPONSIBILITY FOR COMPLYING WITH A APPLICABLE FEDERAL, STATE OR LOCLAWS, ORDINANCES OR REGULATION RESTS SOLELY WITH THE APPLICANT.		
MECHANICAL:		RMIT APPROVALS	DATE	INSPECTOR'S SIGN	ATURE	
EQUIPMENT FEE \$						
	FINAL			INCREATE SIZE SIZE	LATURE	
	ROUGH	APPROVALS	DATE	INSPECTOR'S SIGN	NATURE	
	- ROUGH					
, TOTAL MECH. FEE \$	FINAL					

JOSEPHINE COUNTY
BUILDING SAFETY DEPARTMENT

PERMIT 5-7-83

B

BUILDING PERMIT & OCCUPANCY APPLICATION

			LEMODEL	- AND			1 ,
APPLICATION TO A	Dixor		Cowil/	5/09	DATE OF A	APPLICATION	1/22/83
BUILDING ADDRESS	330	n	nerlin	Ave	12.00		****
LEGAL DESCRIPTION:	Township	35	Range 6	Sect	ion 2/-	ZTax Lot No.	300/5600
OWNER: Name Mike	Bird	/	Baldu	Address _		- //	Phone
CONTRACTOR: Name	SOB GL	455	_Lic. No	Address _		4	76-8466 Phone 8466
ENGINEER OR ARCHITECT: Name			_Phone		D VALUATION D PLAN CHECK	S 11,000	REC# WAT PAID
ADDITIONAL APPLICATIONS SHALL BE FILED BEFORE WORKMEN CAN PROCEED WITH ELECTRICAL, PLUMBING MECHANICAL OR OTHER WORK FOR WHICH PERMITS MAY BE REQUIRED. SUBCONTRACTORS: PLUMBING SEWER WATER SERVICE ELECTRICAL MECHANICAL			UMBING, PERMITS	MECHANICAL FEE ADJUST PLAN CHECK FEE (+/-) LESS FOUNDATION FEE SUB TOTALS HINAL VALUATION STATEMENT SEE #		\$ 3,46	
PLANNING:	SANITATI	ON:	BUILDING:	,	CERTIFICA	TION:	
Zone Permit No. Depth No. Depth Septic Septic Tank Front O' Yo' Rear O' No. Date No.Bedrooms DRIVEWAY No. P3- 117 SITE IN FLOOD PLAIN? BASE FLOOD ELEVATION BUILD. SITE ELEVATION		No. Stories Plan Check By: Date / NOTES:	I CERTIFY THIS APPLICATION TO BE CORRE TO THE BEST OF MY KNOWLEDGE AND THA HAVE READ, UNDERSTOOD, AND AGREED THE FOLLOWING: 1. THIS PERMIT SHALL REMAIN VALID ON IN ACCORDANCE WITH CODE OR RE LATION PROVISIONS RELATING TO TI LAPSE AND REVOCATION. 2. WORK SHALL NOT PROCEED PAST PROVED INSPECTIONS STAGE. ALL QUIRED INSPECTIONS SHALL BE CALL FOR 24 HOURS IN ADVANCE. 3. ANY MODIFICATION IN APPROVED PLA SHALL BE SUBMITTED FOR REAPPROV IN ADVANCE. 4. RESPONSIBILITY FOR COMPLYING WITH A APPLICABLE FEDERAL, STATE OR LOO LAWS, ORDINANCES OR REGULATION RESTS SOLELY WITH THE APPLICANT. Applicant of Agent's Name Clerk Applicant of Agent's Signature Date			E AND THAT I D AGREED TO I VALID ONLY DE OR REGU- ING TO TIME ED PAST AP- GE. ALL RE- L BE CALLED ROVED PLANS REAPPROVAL VING WITH ALL TE OR LOCAL EGULATIONS LICANT. Clerk Date	
MECHANICAL:			G PERMIT APPE		DATE	M- Steel No	
EQUIPMENT	FEE	FLOORS	TION INSPECT	ION	7/2483 2	, OM	
		FRAMIN			6-1283	In Po Elect	
	7/3)	INSULAT		DINC			
		INTERIO	R WALL COVE	HING			
					and of		
E LIBERTAL CONTRACTOR	42. 18	FINAL			9/14/83	14	
			IICAL APPROVA	ALS	DATE	INSPECTOR'S SIGN	NATURE
		ROUGH			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
TOTAL MECH. FEE	\$	14-	200		30 500 10		
		FINAL	and the same				

MAKE COUKTESY FON INSP. PENDING STATE APP'L OF ALTERATION PLANS.

 	2004	01.33	F-14	COOMINA	ELECTRICAL	CONT	541	476	3869	



JOSEPHINE COUNTY BUILDING SAFETY DEPARTMENT 510 N.W. 4TH STREET

PHONE: (541) 474-5405 *24 HR. #474-5408

cation is being made on property I own which is not intended for sale, lease or rent.

PERMIT NO. 8-332-04 CONTROL NO.

	1
- 4	7

P.01

	· *****	-2405			
ME ADDRESS 300	E	LECTRIC	CAL PI	ERMIT	A DOWN I A DOWN
HOADDON OF WORK	Huze	Mar	K)	wire	
NG ADDRESS 300	MEK	lin	avio	11	DATE OF APPLICATION 8/24/4
HONS			<u> </u>	 _	The Janua Lalon"
R: NAME JULON	o 11	umoh	001		
KACTOR: Naver			621		PHONE 471-2163 (W)
	Bancrot		130	and the	neaCountry Flores
LICENSE NO284	BE_ CCE	4606	3 E	MERATION	
					N 09/09/04 PHONE 541-474-1800
				insp.	
in a Daglamain san	<u>items</u>	Cost(ea.)	Total	allowed	Items in section 5 & 6 are subject to 2 allowable inspections.
** Residential-Single or Multi	-Family per	dwelling unit			(5) Limited Energy System
1000 sq. ft or less		\$133.00		4	(A) Alarm
Fa. additional 500 sq. ft.		24 00			
or portion thereof					(B) Audio
on 5 & 6 will be included with	h residence	at no charge.	Piesse mai	rk	(C) Remote Control or HVAC
an abbacable isbui(8).					(D) Computer
Vices or Feeders Ins	leHations, All	erstions, or Refo	cation		(E) Video
TOU amps or less	_/_	79.00	79-	. 2	(F) Phone
201 amps to 400 amps	***********	94.00		2	(6) \$41
401 amps to 600 amps		156.00		9	(6) Misc. Systems (Service or Feeder Not Included)
701 emps to 1000 emps		204.00		2	(A) Pump (Well or Imigetion)
Over 600 amps or volts		469.00		2	(B) Septic
Reconnect only	-	63 00	-	2	(C) Power Production
				6	(Generator, Soler, Etc.)
· inporary Services or Feeders	Installat	ion, Alterations	or Relocation	nn .	(D) Sign or outline lighting
.100 amps or less		63 00	or relocation	"' 2	Total # of items above
:01 amps to 400 amps		86.00		2	② \$63.00 as.
4()1 amps to 600 amps		125.00		2	Total Fee Items 5 & 6
Over 600 amps or 1000 volts	see "2" abo	ve	***************************************	2	/71 Providely as
					(7) Ea additional inspection over the allowable \$55.00
.coch Circuits New, Alte	ration or Exte	msion Per Panel	ı		DEPLOY THE TOTAL
Branch circuit with purchase	e of				PERMIT FEE 79-
service or feeder		4.00			7% State Surcharge 5.53
Branch circuits without purch	ase of service				Plan Review: 25%
First branch circuit		54.00		2	of permit fee
Es. Additional circuit		4 00		2	TOTAL (4.1.1.7)
		· - · ·			TOTAL 84.53
hat all electric work will be do	na in arrowd				
of the National Electrical Cod					Note: It is the responsibility of the permittee to cell
			strative		for inspection.
all the Oregon State Electrical	Specialty Co	Ode.			ROUGH:
					SERVICE S- 2-04
f opire if work is not started	within 180	days or If work	is		FEEDER
had for 180 days. Limited ex	ceptions may	v be available ple	esse inquire		
- न्यातिका					FINAL



Permit #: 02-071-22, 300 MERLIN AVE

JOSEPHINE COUNTY COMMUNITY DEVELOPMENT **BUILDING SAFETY DIVISION**

700 N.W. Dimmick St, Suite C, Grants Pass, OR 97526

PHONE: (541) 474-5405

FAX: 474-5406

E-mail: buildingsafety@co.josephine.or.us

Inspections *24 HR. #474-5408 or www.co.josephine.or.us

Mechanical - Commercial

SITE ADDRESS: 300 MERLIN AVE

MERLIN, OR 97532

ISSUED: 02/08/2022

EXPIRES: 08/07/2022

PARCEL: 350621BB005600

PROJECT DESCRIPTION: Replace 100k BTU gas furnace (like for like) (Moose Lodge)

APPLICANT:

ROGUE VALLEY HEATING & AIR

CONDITIONING INC 2820 FOOTHILL BLVD GRANTS PASS, OR 97526

541-476-3211

CONTRACTOR:

ROGUE VALLEY HEATING & AIR CONDITIONING INC

2820 FOOTHILL BLVD

GRANTS PASS, OR 97526

OWNER: GRANTS PASS LODGE NO 2454 & MOOSE, LOYAL

ORDER OF 300 MERLIN AVE **MERLIN, OR 97532**

> **LICENSE: 114839 EXPIRES:** 08/04/2022

VALUATION	AMOUNT/SF	VALUE	FEES	PAID	DUE
Project Valuation	3,800	\$3,800.00	Mechanical Fee - Commercial State Surcharge Fee	\$109.28 \$13.11	\$0.00 \$0.00
000	Total:	\$3,800.00		Total: \$122.39	\$0.00

FIXTURE

Furnace up to 100,000 BTU

QTY REQUIRED INSPECTIONS

1. Mechanical Ducts Above

2. HVAC

3. Final Mechanical

2-11-22 he

ADDITIONAL PERMIT INFORMATION

Planning Zone: CC

Airport Overlay - Declaration in File_ NA



JOSEPHINE COUNTY COMMUNITY DEVELOPMENT BUILDING SAFETY DIVISION

700 N.W. Dimmick St, Suite C, Grants Pass, OR 97526

PHONE: (541) 474-5405

FAX: 474-5406

E-mail: buildingsafety@co.josephine.or.us

Inspections *24 HR. #474-5408 or www.co.josephine.or.us

CERTIFICATION

I CERTIFY THIS APPLICATION TO BE CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT I HAVE READ, UNDERSTOOD, AND AGREED TO THE FOLLOWING:

- 1. Permits expire if work is not started within 180 days or if work is suspended for 180 days. Limited exceptions may be available, please inquire before expiration. Note: It is the responsibility of the permittee to call for inspection.
- 2. Work shall not proceed past approved inspection stage. All required inspections shall be called for in advance.
- 3. Any modification in approved plans shall be submitted for reapproval in advance.
- 4. Separate additional permits shall be obtained prior to proceeding with electrical plumbing, and mechanical work.
- 5. Responsibility for complying with all applicable federal, state, or local laws, ordinances or regulations rest solely with the applicant.
- 6. It is the responsibility of the permittee to call for inspection.
- 7. A Reinspect fee of \$75 plus the applicable surcharge may be charged.
- 8. If you are disturbing any existing building material, contact Medford DEQ about asbestos, 541-776-6010.

The installation is being made on residential property I own which is not intended for sale, lease, or rent.

Note: Work commencing before permit issuance. Any person who commences any work on a building or structure before obtaining necessary permits shall be subject to an investigation fee in addition to the required permit fees As established in ORS 455.058, the investigation fee shall be the average or actual additional cost of the investigation as determined by the established hourly rates. Exception: Temporary repairs performed in an emergency on an existing structure. The authority having jurisdiction shall be notified of this work within 72 hours and permit application for the temporary work shall be submitted within the next 5 business days.

ROGUE VALLEY HEATING & AIR CONDITIONING INC			mm
Permittee Name Owner / Agent / Contractor	Signature	Date	Issued By