



Septic Site Evaluation

248-24-000356-EVAL

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

Date evaluation denied: 06/12/2025
Application status: Denied
Work description: Singh - Site Evaluation

Applicant: Josef Sebestyen
Address: 800 Sunny Glen Way
Wolf Creek OR 97497
Phone: 5412911656
Email: sales@onpointoregon.com

Primary contractor: ON POINT CONSTRUCTION LLC
CCB: 240262
Address: 800 SUNNY GLEN WAY
WOLF CREEEK OR 97497
Phone: 5412911656
Email: yotzo1@topmail.com

Owner: MANDIP SINGH

Property address: 2982 Taylor Rd, Central Point, OR
97502

Address: 1030 LATHROP DR
CENTRAL POINT OR 97502

Parcel: 372W042600 - Primary **Township:** 37S **Range:** 2W **Section:** 4
Lot size: 15.33 acre **Water supply:** Well
Zoning: N/A **City/County/UGB:** N/A
Accessory Dwelling Unit: No **County:** Jackson

Proposed use of structure: SFD
Category of construction: Residential

	Existing	Proposed
Number of bedrooms:	0	8

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.

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.)

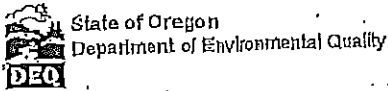
Date evaluation denied: 06/12/2025
Application status: Denied
Work description: Singh - Site Evaluation

Andrew Forbes

Onsite Wastewater Specialist

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

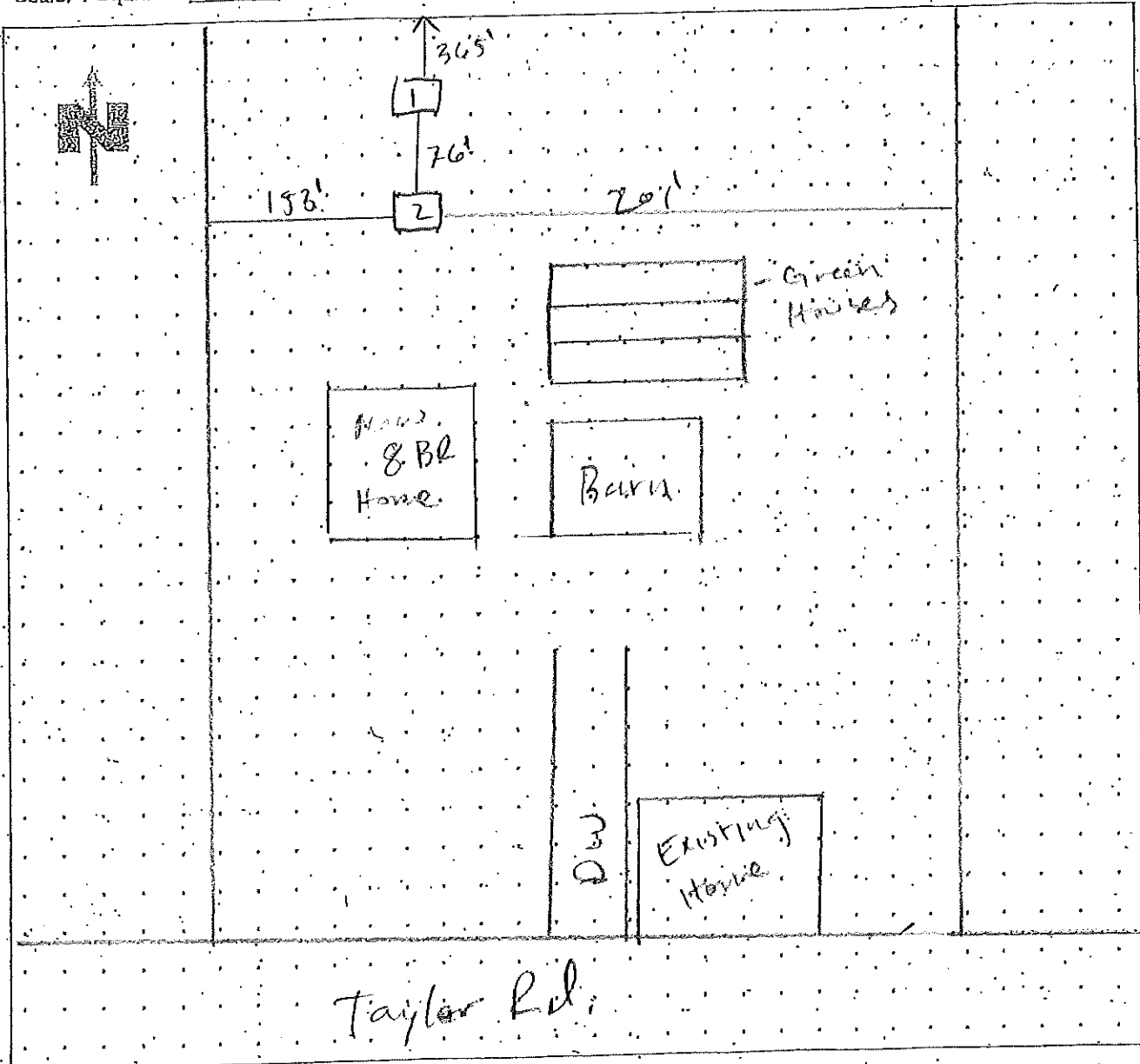
ATTENTION: Oregon law requires you to follow rules adopted by the Oregon Utility Notification Center. Those rules are set forth by Oregon Administration Rules. You may obtain copies of the rules by calling the center. (Note: The telephone number for the Oregon Utility Notification Center is 1-800-332-2344.)



SITE PLAN FOR CONSTRUCTION / INSTALLATION

Site Plan Must Be Current Property Owner: Mandip Singh Site ID: _____
 Site Address: 2982 Taylor Rd. City: Central Point County: Jackson
 Township: 37 Range: 2W Section: 04 Tax Lot: 2400
 Acres: 15.33 Subdivision: _____ Lot: _____ Block: _____

Scale: 1 Square = NOT TO SCALE Feet SITE PLAN MUST SHOW ALL PROPERTY LINES AND DIMENSIONS



I certify that the above information is accurate to the best of my knowledge. This site plan is based on actual measurements and conditions on the site.

I am the Owner or Authorized Agent. Name (please print): A. Forbes
 Signature: [Signature] Date: 6/11/25

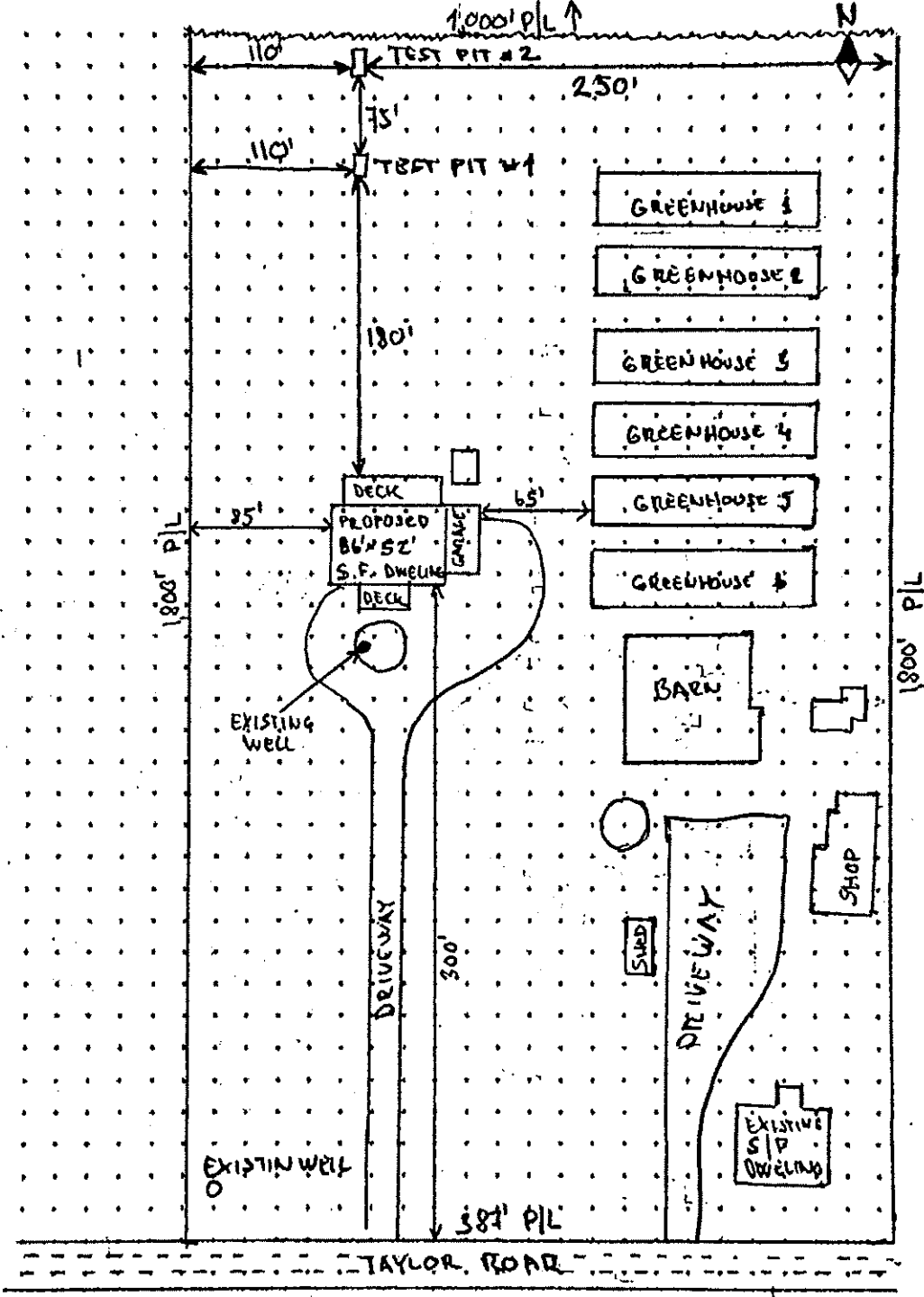


State of Oregon Department of Environmental Quality
Site Plan For Site Evaluation

RECEIVED
 OCT 08 2024
 DEQ MEDFORD

Property owner:
 Address of site:
 Legal description:
 Scale:

SINGH MANDIP
2982 TAYLOR RD CENTRAL POINT OR 97502
APPROXIMATE 1 DOT = 20'



SCALE IS APPROXIMATE 1 DOT = 20'

FOR OFFICE USE ONLY

Application No.:

FIELD WORKSHEET

Name: Mandip Singh Application No.: 248-24-000356 Date: 6/11/25
 RE: SITE EVALUATION REPORT for Parcel #: 37.2w, 04, 2600

Commercial Facility: Yes No Parcel Size: 15.37 acres

APPROVED SYSTEM SPECIFICATIONS

Design flow: N/A gpd Max Number of bedrooms: N/A Max Number of Employees: 0

Initial System	Replacement System
<input type="checkbox"/> Standard <input type="checkbox"/> Capping Fill <input type="checkbox"/> Bottomless Sand Filter <input type="checkbox"/> Conventional Sand Filter/ATT <input type="checkbox"/> Other _____	<input type="checkbox"/> Standard <input type="checkbox"/> Capping Fill <input type="checkbox"/> Bottomless Sand Filter <input type="checkbox"/> Conventional Sand Filter/ATT <input type="checkbox"/> Other _____
Tank: <input type="checkbox"/> 1,000 gal. <input type="checkbox"/> 1,500 gal. <input type="checkbox"/> 2 compartment <input type="checkbox"/> Other <input type="checkbox"/> effluent pump required <input type="checkbox"/> effluent filter required	Tank: <input type="checkbox"/> 1,000 gal. <input type="checkbox"/> 1,500 gal. <input checked="" type="checkbox"/> 2 compartment <input type="checkbox"/> Other <input type="checkbox"/> effluent pump required <input checked="" type="checkbox"/> effluent filter required
Distribution Method: <input checked="" type="checkbox"/> Equal <input type="checkbox"/> Serial <input type="checkbox"/> Pressurized	Distribution Method: <input type="checkbox"/> Equal <input type="checkbox"/> Serial <input type="checkbox"/> Pressurized
Absorption facility: _____ total linear feet _____ linear feet per 150 gallons projected daily sewage flow _____ " Max Depth _____ " Min Depth	Absorption facility: _____ total linear feet _____ linear feet per 150 gallons projected daily sewage flow _____ " Max Depth _____ " Min Depth

Additional Conditions of Approval

- Any alteration of natural soil conditions (i.e. cutting or filling) in the acceptable area may void this approval.
- Both the initial and replacement disposal areas are to be protected from traffic, cover, development, or other potential disturbance of natural soil conditions.
- 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.
- 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.

Denied Due to the Following

- ① 340-071-0150(3)(7) - water table levels, permit @ 7" 48" sep distance needed
- ② 340-071-0220(1)(A)(B) - water table for standard system,
- ③ 340-071-0265(1)(b) - Temp H₂O table not closer than 18" of surface year Round
- ④ 340-071-0290(2)(b)(A)(i) - 24" separation needed.

Inspector: A. Parkes / D. Wilse

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
Test Pit 1	0-7"	SL	10YR 3/2, SBK, 2UF, 3% CF
	7-26"	SL	10YR 3/2, ^{5MPT} SBK, 2UF, 3% CF Prom Concretions / Dep 5YR 5/6 / 5YR 5/6 @ 7"
	26-47"	SC	2.5YR 5/2, ABK, 1VFR, 1 Tube pore, Prom 10YR 5/1 - Dep / Iron concretions / 5YR 5/6
Test Pit 2			Similar to TP #1
			CAS @ 7" Iron concretions 2.5YR 5/6, Dep 5YR 5/6
Test Pit 3			
Test Pit 4			
Test Pit 5			
Test Pit 6			

Landscape Notes: _____

Slope: _____ Aspect: _____ Groundwater Type: Permanent Temporary

Other Site Notes: _____



Oregon Department of Environmental Quality
Application for Onsite Sewage Treatment System

Send this application to the appropriate DEQ office

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

Property owner information

Name: MANDIP SINGH
 Mailing Address: 1030 LATHROP DR CP OR 97502
 Phone number: 707 333 5193

Legal property description

Township	Range	Section	Tax Lot	Acreage or Lot Size
<u>37</u>	<u>2W</u>	<u>04</u>	<u>2600</u>	<u>15.33</u>
County	Subdivision Name	Tax Account Number	Block	

Property address: 2982 TAYLOR RD CENTRAL POINT OR 97502
 Directions to property:

Existing facility/Proposed facility/Water information

Existing facility	Proposed facility	Water supply
<input type="checkbox"/> Single family residence	<input checked="" type="checkbox"/> Single family residence	<input type="checkbox"/> Public
Number of bedrooms: _____	Number of bedrooms: <u>8</u>	Name: _____
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Private
Description: _____	Description: _____	Well, Spring, Shared: <u>WELL</u>

Type of application

<input checked="" type="checkbox"/> Site Evaluation <input type="checkbox"/> Construction <input type="checkbox"/> Permit Repair <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> Alteration Permit <input type="checkbox"/> Major <input type="checkbox"/> Minor	<input type="checkbox"/> Renewal Permit <input type="checkbox"/> Existing System Evaluation <input type="checkbox"/> Permit Transfer <input type="checkbox"/> Permit Reinstatement	<input type="checkbox"/> Authorization Notice for: <input type="checkbox"/> Connecting to an Existing System Not in Use <input type="checkbox"/> Replacing a Mobile Home or House with Another Mobile Home or House <input type="checkbox"/> The Addition of One or More Bedrooms <input type="checkbox"/> Personal Hardship <input type="checkbox"/> Temporary Housing <input type="checkbox"/> Other-please specify: _____
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If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes. By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agents permission to enter onto the above described property for the sole purpose of this application.

Signature: [Signature] Date: 9/24/2024
 JOSEF SEBESTYEN

Applicant's name - please print legibly: 800 SUNNY GLEN WAY WOLF CREEK OR 97497
 Applicant's phone number: 541 291 1656
 Applicant's mailing address: _____ Applicant's email address: SALES@ONPOINT OREGON.COM

Applicant is the:	<input type="checkbox"/> Owner	<input checked="" type="checkbox"/> Authorized representative	<input type="checkbox"/> Licensed septic installer
		<input type="checkbox"/> Authorization attached	Installer name: _____

Highest Precipitation by Day for Medford Area, OR (ThreadEx)

Day	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1	0.32 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
2	0.09 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
3	0.25 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
4	0.05 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
5	0.26 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
6	0.01 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
7	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
8	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
9	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
10	0.12 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
11	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
12	0.01 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
13	T 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
14	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
15	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
16	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
17	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
18	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
19	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
20	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
21	0.00 2025	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
22	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
23	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
24	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
25	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
26	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
27	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
28	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
29	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
30	M M	- -	M M	M M	M M	M M	M M	M M	M M	M M	M M	M M
31	M M	- -	M M	- -	M M	- -	M M	M M	- -	M M	- -	M M

Period of record: 2025-01-01 to 2025-01-21

100 m



3124 TAYLOR RD

2940 TAYLOR RD

2864 TAYLOR RD

0 TAYLOR RD

YLOR RD

3148 TAYLOR RD

3080 TAYLOR RD

2982 TAYLOR RD

2934 TAYLOR RD

2874 TAYLOR RD

2013 PHILLIPS WAY

100 m

+

-



0.1

2940 TAYLOR RD

2861 TAYLOR RD

3124 TAYLOR RD

TAYLOR RD

2931 TAYLOR RD

2982 TAYLOR RD

2874 TAYLOR RD

2945 TAYLOR RD

3080 TAYLOR RD

2911 PHILLIPS WAY



State of Oregon Department of Environmental Quality

Notice Authorizing Representative

I, Mandip Singh, have authorized On Point Construction
(Property Owner/Print Name) (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:

2982 Taylor Rd Central Point OR 97502

(Property Situs or Road Address)

And described in the records of: Jackson County County as:

Township 37 Range 2W Section 04 Map ID _____ Tax Lot #(s) 2600
~~OR 2022-34033~~

Property owner:

Printed Name: Mandip Singh

Address: 2982 Taylor Rd

City, State, Zip: Central Point OR 97502

Phone: 7073335193 Email: Garymehrok@yahoo.com

Signature: Mandip Singh

Authorized representative:

Printed Name: JOSEF SEBESTYEN

Address: 800 SUNNY GLEN WAY

City, State, Zip: WOLF CREEK , OR 97502

Phone: 541 - 291 - 1656 Email: SALES@ONPOINT OREGON. COM

Signature: [Signature]



Onsite Site Evaluation Application Verification 248-24-000356-EVAL

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

Application created: 9/29/24
Parcel Nbr: 372W042600
Site Address: 2982 TAYLOR RD, CENTRAL POINT, OR 97502
Owner: MANDIP SINGH
(707) 333-5193
Applicant: Josef Sebestyen - On-Point Construction LLC
800 Sunny Glen Way
Wolf Creek, OR 97497
Phone: (541) 291-1656
Email: sales@onpointoregon.com

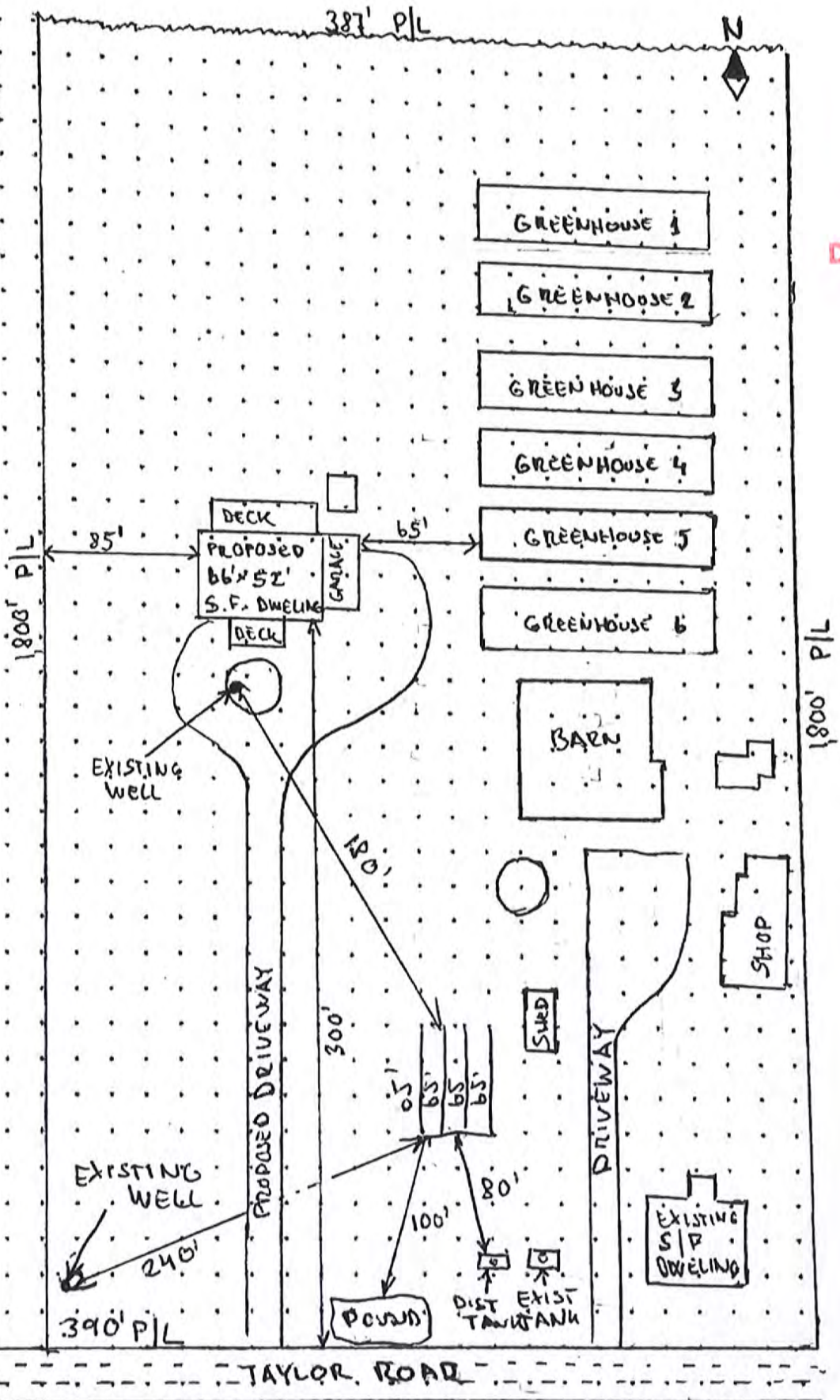
Licensed Professional(s):
License Number: CCB - 240262
ON POINT CONSTRUCTION LLC
800 SUNNY GLEN WAY
WOLF CREEEK, OR 97497
Phone: (541) 291-1656
Email: yotzo1@topmail.com

Category of Construction: Residential
Acreage or Lot Size: 15.33 acre
Site Ready for Inspection: Yes
County: Jackson
Water Supply: Well

Use of Structure:	<u>Existing</u>	Use of Structure:	<u>Proposed</u>
Number of Bedrooms:	0	Number of Bedrooms:	8

Attached Documents:	Description
Name	
Sep 29, Doc 1.pdf	Application for O-Site Sewage System
Sep 29, Doc 4.pdf	Notice Authorizing Representative
Sep 29, Doc 2.pdf	Tax lot Map

RECEIVED
JAN 25 REC'D
2024
DEQ MEDFORD



SCALE IS APPROXIMATE 1 DOT = 20'



Map Unit Symbol	Map Unit Name	Acres in AOI	Percent of AOI
10B	Barron coarse sandy loam, 0 to 7 percent slopes	49.7	14.6%
17C	Brader-Debenger loams, 1 to 15 percent slopes	4.3	1.3%
31A	Central Point sandy loam, 0 to 3 percent slopes	48.0	14.1%
76A	Gregory silty clay loam, 0 to 3 percent slopes	56.8	16.7%
100A	Kubli loam, 0 to 3 percent slopes	71.7	21.0%
100B	Kubli loam, 3 to 7 percent slopes	7.9	2.3%
102B	Langellain-Brader loams, 1 to 7 percent	47.5	13.9%

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
Test Pit 1 TD-60"	0-5"	SCL	10YR 2/2, SBK, LUK, * Moist soil
	5"-10"	SCL	10YR 4/2, WSBK, roots * Concrete 10YR 4/6
	10"-30"	SCL	10YR 4/1, WSBK, roots
	30-48"	SC	10YR 5/2, WSBK, roots (coarse sand grains)
Test Pit 2			Similar to TP#1
Test Pit 3			
Test Pit 4			Greenhouses Porch
Test Pit 5			well - TP#2 Road - TP#1 well water in pit full of water TP#3
Test Pit 6			Taylor Rd

Landscape Notes: _____

Slope: _____ Aspect: _____ Groundwater Type: Permanent Temporary

Other Site Notes: Pumped out water TP#1 same day, water in pit @ 48"
Gate joined in on soil level,

Application No.: _____

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
10-60" Test Pit 1	0-8"	SCL	10YR 2/1, WSBK, 1UF, 5% CF * Moist Soil
	8-28"	SC	10YR 2/1, WSBK, roots, 15% CF * Moist Soil
	28-60"	SC	7.5YR 4/1, WSBK, roots, 20% CF (coarse sand grains) Water in Bottom of Pit @ 46"
10-60" Test Pit 2	0-8"	SCL	10YR 2/1, WSBK, 2UF, 10% CF * Moist Soil
	8-24"	SC	10YR 2/1, WSBK, roots, 15% CF
	24-60"	SC	10YR 4/1, WSBK, roots, 20% CF (coarse sand grains) Water in Bottom of Pit @ 45"
Test Pit 3			
Test Pit 4			<p>The diagram shows a plan view of the site. At the top, 'irrigation ditch' is labeled. Below it is a 'House foundation' represented by a rectangle. To the right of the house are 'Small houses' shown as a row of five smaller rectangles. A 'well' is located between the house and the small houses. 'TP#1' is marked with a square and a vertical arrow pointing to it from above, with a '70'' dimension. 'TP#2' is marked with a square and a vertical arrow pointing to it from above, with a '60'' dimension. A horizontal dimension of '93'' is shown between the ditch and TP#1. At the bottom, 'Taylor Rd' is labeled. Other features include a 'Pond' and 'EXISTING house'.</p>
Test Pit 5			
Test Pit 6			

Landscape Notes: _____

Slope: _____ Aspect: _____ Groundwater Type: Permanent Temporary

Other Site Notes: Evaluating PITS Behind proposed house, second eval.

Application No.: _____

D-55"

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
Test Pit 1	0-8"	SL	10YR ² / ₂ , WSBK, 3UF, 1F, 8% CF # Moist soil
	8"-28"	SL	10YR ³ / ₃ , WSBK, 1UF, 15% CF # Moist Soil
	28-55"	SL	10YR ³ / ₄ , WSBK, roots, 15% CF # wavy boundary (Coarse sand grains) # Moist soil
Test Pit 2			Redox - 7.5 YR ⁴ / ₆ Depletions 10YR ⁴ / ₁ - @ 26"
Test Pit 3			
Test Pit 4			
Test Pit 5			
Test Pit 6			

Landscape Notes: _____

Slope: 0-1% Aspect: _____ Groundwater Type: Permanent Temporary

Other Site Notes: Open Ag field, Dug out TP same day. Micro low area, No water in pit day dug TP, returned 3/13/24, TP was full of water

Application No.: _____



Septic Site Evaluation

DEQ Medford Office
221 Stewart Avenue
Suite 201
Medford, OR 97501
541-776-6010

OnsiteMedford@deq.state.or.us
Website: oregon.gov/deq

248-24-000072-EVAL

Date evaluation denied: 03/22/2024
Application status: Denied
Work description: Singh - Site Evaluation

Applicant: Colt Hansen
Address: 800 Sunny Glen Way
Wolf Creek OR 97497
Phone: 5412911656
Email: sales@onpointoregon.com

Primary contractor: ON POINT CONSTRUCTION LLC
CCB: 240262
Address: 700 MERLIN RD
GRANTS PASS OR 97526
Phone: 5412911656
Email: yotzo1@topmail.com

Owner: MANDIP SINGH

Property address: 2982 Taylor Rd, Central Point, OR
97502

Address: 1030 LATHROP DR
CENTRAL POINT OR 97502

Parcel: 372W042600 - Primary **Township:** 37S **Range:** 2W **Section:** 4

Lot size: 15.33

Water supply: Well

Zoning: N/A

City/County/UGB: N/A

Accessory Dwelling Unit: No

County: Jackson

Proposed use of structure: SFD

Category of construction: Single Family Dwelling

	Existing	Proposed
Number of bedrooms:	0	8

General Specifications

Max peak design flow: 750 gpd.

Proposed gallons per day: 750 gpd.

Min septic tank volume: 1500 gal.

Min dosing tank volume: N/A

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.)



State of Oregon
Department of
Environmental
Quality

Oregon Department of Environmental Quality Application for Onsite Sewage Treatment System

Send this application to the appropriate
DEQ office

For DEQ Use Only:		Date Stamp
Date received:	_____	RECEIVED FEB 02 REC'D 2024 DEQ MEDFORD
Fee paid:	_____	
Receipt number:	_____	
Application number:	_____	
Date of 1 st response:	_____	
Date of 2 nd response:	_____	
Date of final response:	_____	
Date of completion:	_____	
Scanned:	Data Entry:	

Property owner information

Name:	MANDIP SINGH
Mailing Address:	1030 LATHROP DR CP OR 97502
Phone number:	707 333 5193

Legal property description

Township	Range	Section	Tax Lot	Acreage or Lot Size
37	2W	04	2600	15.33
County	Subdivision Name		Tax Account Number	Block

Property address: 2982 TAYLOR ROAD, CENTRAL POINT, OR 97502

Directions to property:

Existing facility/Proposed facility/Water information

Existing facility		Proposed facility		Water supply	
<input checked="" type="checkbox"/> Single family residence		<input checked="" type="checkbox"/> Single family residence		<input type="checkbox"/> Public	
Number of bedrooms: 2		Number of bedrooms: 1 8		Name:	
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input checked="" type="checkbox"/> Private	
Description:		Description: NEW BUILD		Well, Spring, Shared: WELL	

Type of application

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

If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes. By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agents permission to enter onto the above described property for the sole purpose of this application.

Signature: Mandip Singh
Date: 1/19/24

Applicant's name - please print legibly: JOSEF SEBESTYEN
Applicant's phone number: 541-291-1656

Applicant's mailing address: 800 SUNNY GLEN WAY WOLF CREEK 97147
Applicant's email address: SALES@ONPOINT OREGON.COM

Applicant is the:	<input type="checkbox"/> Owner	<input checked="" type="checkbox"/> Authorized representative	<input checked="" type="checkbox"/> Licensed septic installer
		<input checked="" type="checkbox"/> Authorization attached	Installer name: <u>ONPOINT CONSTRUCTION LLC</u>

RECEIVED

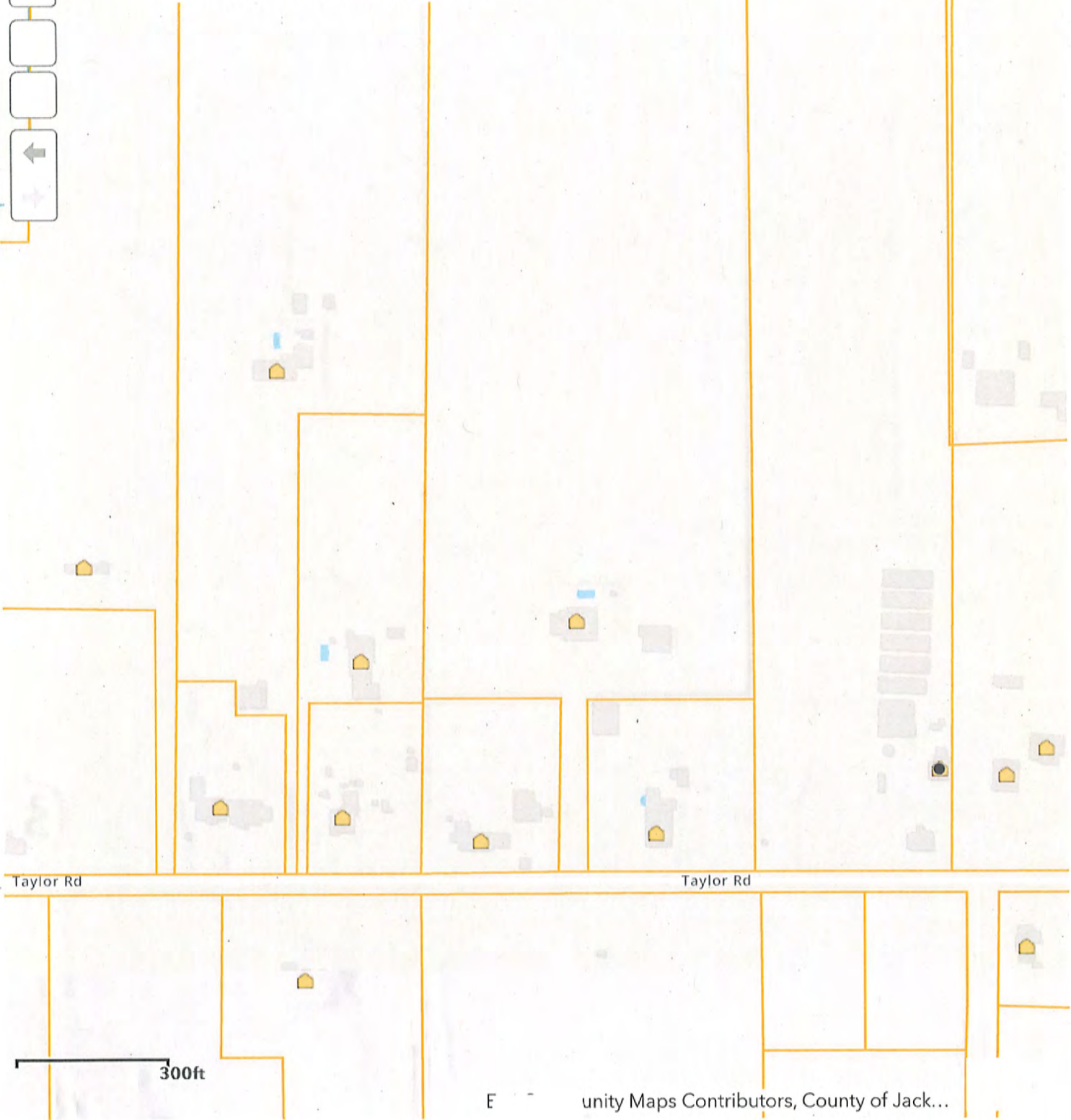
FEB 02 REC'D

2024
DEQ MEDFORD



Property

Show search results for 2982 ...



Taylor Rd

Taylor Rd

300ft

Unity Maps Contributors, County of Jack...



JACKSON COUNTY ZONING AUTHORIZATION

RECEIVED
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2024
DEQ MEDFORD
DEVELOPMENT SERVICES
Planning Division
10 South Oakdale Ave , Room 100
Medford, OR 97501-2902
Phone: 541-774-6907

ZONING: Exclusive Farm Use
ADDRESS: 2982 TAYLOR RD
PRIMARY PARCEL #: 37-2W-04-2600
CASE TYPE: Zoning Information Sheet
ASSOCIATED LOTS:

RECORD #: 439-23-01712-ZON
PRINT DATE: 10/10/2023
LAST UPDATED: 10/10/2023
PROCESS TYPE: Type I Permit

<u>Owners</u>	<u>Record Detail Description</u>
SINGH MANDIP 2982 TAYLOR RD CENTRAL POINT, OR 97502	ZIS Replacement Dwelling

<u>Primary Contact</u>	<u>Contact Type</u>
SINGH MANDIP 2982 TAYLOR RD CENTRAL POINT, OR 97502	Applicant

<u>Contact</u>	<u>Contact Type</u>
SEBESTYEN, JOSEF	Individual

GENERAL ZIS INFORMATION:

<u>STAFF</u>	<u>DATE</u>	<u>COMMENTS</u>
BEELERSF	10/10/2023	10/10/2023: Proposal is for a replacement dwelling for the 1945 dwelling. Assessment shows a 1945 850 SqFt one story with attic and a 1958 1200 SqFt One story. Per 2004 ZCS in historic central file, a dwelling inspection was conducted and passed, both dwellings are recognized. Parcel appears to match configuration in 1973 mapbook, was zoned F-5 then and is zoned EFU now, approximately 15.33 acres in size. No overlays of concern. ZIS fee paid, plot plan approved. Waiting on plans review and EFU Deed Declaration prior to permits. Ok for authorization for septic inspection and installation of new system to serve the existing home and future replacement dwelling. SFB

OVERLAY DETAILS:

<u>Applicable Overlay</u>	<u>Comments</u>
---------------------------	-----------------

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

RECEIVED
 FEB 02 REC'D
 2024
 DEQ MEDFORD

STRUCTURE / SIZE DETAILS:

<u>Item</u>	<u>Units</u>	<u>Proposed Size</u>	<u>Approved Size</u>	<u>Comments</u>
Replacement Dwelling	Sq Ft	7125	7125	Replacement dwelling for 1945 Dwelling

HEIGHT / LOCATION DETAILS:

<u>Items</u>	<u>Distance</u>	<u>Direction</u>	<u>Approved Height</u>	<u>Comments</u>
Replacement Dwelling	330	South	35	Replacement Dwelling for 1945 Dwelling
	65	West		
	180	East		
	1400	North		

<u>Condition</u>	<u>Hold Level</u>	<u>Status</u>
Counter Consultation Fee Due ZIS fee must be paid prior to issuance of any permits applicable to this case * Under circumstances where the approved use and/or structure is found to be exempt from building permits, all outstanding ZIS fees must be paid prior to initiating the approved use and/or prior to initiating construction of said structure.		Met
Accessory Structure Deed Declaration FOR 1945 DWELLING IF KEEPING PLUMBING An Accessory Structure Deed Declaration must be recorded on this property and evidence of the recordation must be provided to Planning prior to issuance of permits.* * Under circumstances where the approved use and/or structure is found to be exempt from building permits, the conditions stated above must be met prior to initiating the approved use and/or prior to initiating construction of said structure.	Notice	Not Met
Exclusive Farm Use DD Prior to issuance of permits*, the enclosed Deed Declaration, which acknowledges and accepts farm and forest activities on adjacent lands, and requires owner control of dogs, shall be recorded. The metes and bounds description (can be found on the deed or contract) for the subject property must be attached to the covenant, which must be signed in the presence of a notary public and taken to the County Clerk's Office for recordation. After the covenant has been recorded, a copy must be returned to Development Services for notation in this file. (LDO Section 4.2.6A2) * Under circumstances where the approved use and/or structure is found to be exempt from building permits, the conditions stated above must be met prior to initiating the approved use and/or prior to initiating construction of said structure.	Notice	Not Met
Plan Approval All plans must be reviewed and approved by planning staff prior to authorization of permits	Notice	Not Met
Plot Plan PRIOR TO PERMITS An accurate plot plan must be submitted for review by Development Services on either standard 8.5" x 11" or legal 8.5" x 14" size paper. The plot plan must accurately depict the boundaries of the parcel. It must be accurately drawn to a base 10-foot scale (e.g. 1" = 60'). All improvements on the property must be shown on the plot plan with labels and distances to the property lines. (LDO Sections 3.4.2A; 6.2.1A; 12.2.3)		Met

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

RECEIVED

FEB 02 REC'D

2024

DEQ MEDFORD

Removal/Demo/Converted

Notice

Not Met

If the dwelling is being replaced, the original dwelling must be removed, demolished, or converted to an allowable nonresidential use within three months of the completion of the replacement dwelling. (LDO Sections 6 5 3Gd, 4 3.6A2)

Assigned Staff:

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

State of Oregon Department of Environmental Quality
Site Plan For Site Evaluation

RECEIVED

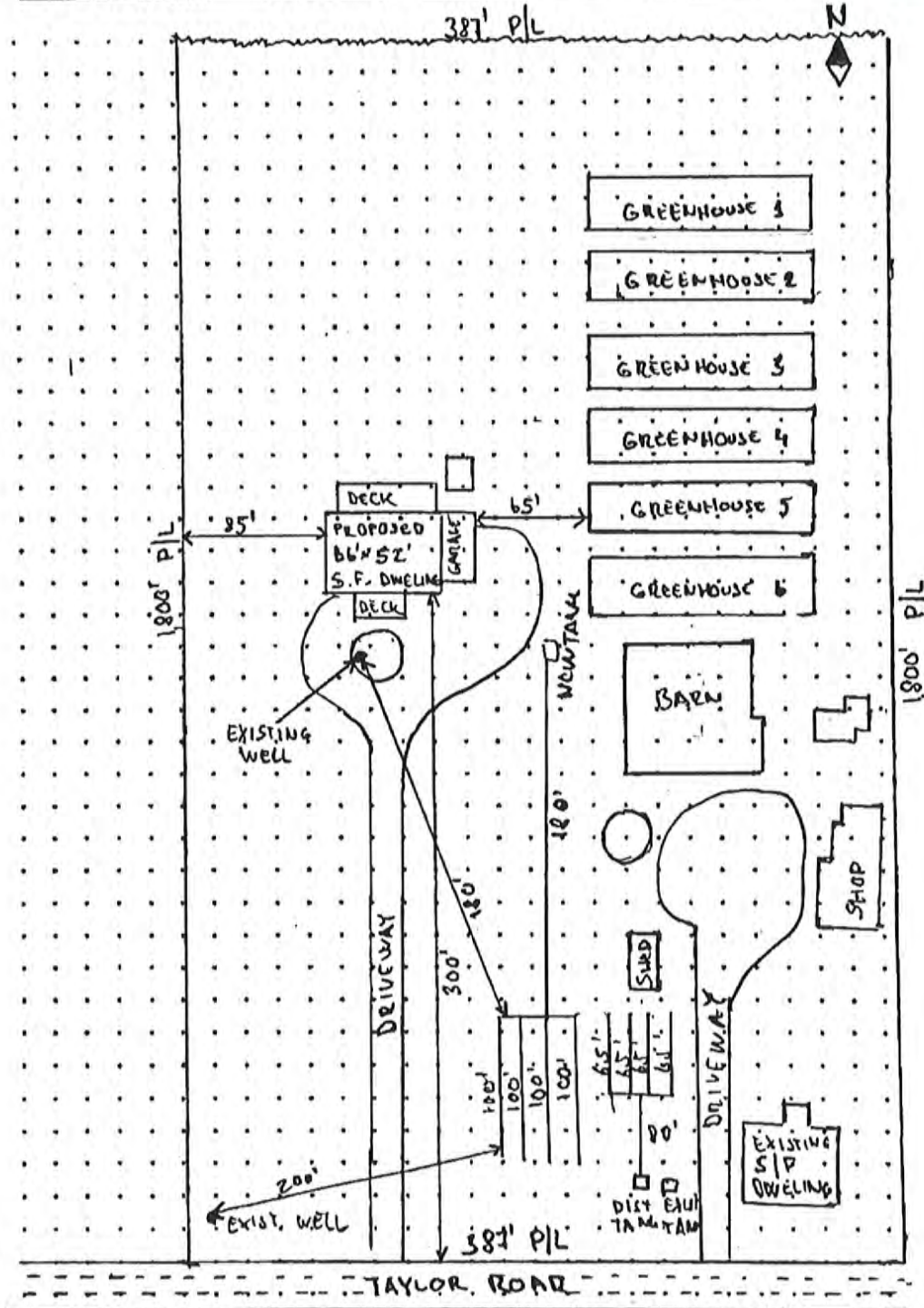
FEB 02 REC'D
 2024

DEQ MEDFORD

DEQ

Property owner:
 Address of site:
 Legal description:
 Scale:

SINGH MANDIP
 2932 TAYLOR ROAD CENTRAL POINT
 APPROXIMATE 3DOT = 20'



SCALE IS APPROXIMATE 1DOT = 20'

FOR OFFICE USE ONLY

Application No.:



EXISTING SEPTIC SYSTEM DESCRIPTION

RECEIVED
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2024
DEQ MEDFORD

Please answer the following questions as completely as possible, and to the best of your knowledge.

1. Your existing septic system consists of (check all that apply):
- Septic Tank Disposal Trenches Capping Fill Sandfilter
 Seepage Bed Cesspool or Pit Unknown
 Other (Describe) _____

2. When was your septic system installed? 1986 (Date) 15-169-86R (Permit Number)

3. Tank material: Concrete Steel Plastic or Fiberglass Unknown

4. Septic tank volume (in gallons) 1000 + 500

5. When was the septic tank last pumped? 1/11/2023 Attach receipt if available.

6. Number of disposal trenches 4

7. Total length of disposal trenches (in feet) 220'

8. Do you propose to use the existing septic system? Yes No

9. Is your septic system currently in use? Yes No If no, date of last use _____

10. If the septic system currently serves a dwelling:
How many bedrooms are in the dwelling? 2 How many people occupy the dwelling? 4

11. How many bedrooms will be in the proposed dwelling? 8 How many occupants? 6

12. If the septic system serves a business:
How many total employees are there? 0
Type of business N/A

13. Is there a proposed change of use of your structure (home or business)? Yes No
If yes, please explain _____

14. Provide a plot plan (sketch) on the reverse side of this form showing the best estimated or actual measurements that locate the existing septic tank and disposal trenches, property lines, easements, existing structures, driveways, and water supply. Indicate the direction of north. If you are proposing to replace the septic system, indicate the test hole location.

By my signature, I certify that the above information and the plot plan on the reverse side of this form are accurate and true to the best of my knowledge.

2/1/2024 (Date) _____ Signature of Property Owner or Legally Authorized Representative

DEQ use only: Record of existing system: Yes No Attached Date Issued _____
Permit Number _____ Certificate of Satisfactory Completion Issued: Yes No Initials _____
Other file information: _____



State of Oregon Department of Environmental Quality

Notice Authorizing Representative

RECEIVED
FEB 02 REC'D
2024
DEQ MEDFORD

I, Mandip Singh, have authorized On Point Construction
(Property Owner/Print Name) (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:

2982 Taylor Rd Central Point OR 97502

(Property Situs or Road Address)

And described in the records of: Jackson County County as:

Township 37 Range 2W Section 04 Map ID _____ Tax Lot #(s) 2600
OR-2022-34033

Property owner:

Printed Name: Mandip Singh

Address: 2982 Taylor Rd

City, State, Zip: Central Point OR 97502

Phone: 7073335193 Email: Garymehrok@yahoo.com

Signature: Mandip Singh

Authorized representative:

Printed Name: JOSEF SEBESTYEN

Address: 800 SUNNY GLEN WAY

City, State, Zip: WOLF CREEK, OR 97502

Phone: 541-291-1656 Email: SALES@ONPOINT OREGON.COM

Signature: [Signature]

ZENTGRAF Erica * DEQ

From: FORBES Andrew * DEQ
Sent: Thursday, February 1, 2024 10:38 AM
To: Sales@onpointoregon.com
Cc: ZENTGRAF Erica * DEQ
Subject: 2982 Taylor Rd. Major Repair Septic Application.

Hi Josef,

The authorization notification approval has been rescinded due to incorrect information on the initial application. The next step for you is to complete a [major repair application](#). Once those materials have been accepted and approved by DEQ, the fees that you paid for the authorization notification will be applied to the major repair application. Please follow the steps in this application process, and if you have any additional questions feel free to contact me.

Best regards



Andrew Forbes

Oregon Department of Environmental Quality
221 Stewart Ave. Suite #201
Medford, OR 97501
Work Desk: 503-776-6289
Andrew.Forbes@deq.oregon.gov



Onsite Authorization Application Verification 248-24-000033-AUTH

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

Application created: 1/26/24

Parcel Nbr: 372W042600

Site Address: 2982 TAYLOR RD, CENTRAL POINT, OR 97502

Owner: MANDIP SINGH
(707) 333-5193

Applicant: On-Point Construction LLC - On-Point Construction LLC
800 Sunny Glen Way
Wolf Creek, OR 97497

Phone: (541) 291-1656

Email: sales@onpointoregon.com

Licensed Professional(s):

License Number: Installer License - 39528
On-Point Construction LLC
700 Merlin Rd
Grants Pass, OR 97526

Phone: (541) 291-1656

Email: sales@onpointoregon.com

Category of Construction: Single Family Dwelling

Acreage or Lot Size: 15.33

Site Ready for Inspection: Yes

County: Jackson

Water Supply: Well

Existing
Use of Structure: SFD
Number of Bedrooms: 7

Proposed
Use of Structure: SFD
Number of Bedrooms: 7

Attached Documents:

No Documents have been attached.



State of Oregon
Department of
Environmental
Quality

Oregon Department of Environmental Quality Application for Onsite Sewage Treatment System

Send this application to the appropriate
DEQ office



For DEQ Use Only:		Date Stamp
Date received:	_____	RECEIVED JAN 25 REC'D <i>2024</i> DEQ MEDFORD
Fee paid:	_____	
Receipt number:	_____	
Application number:	_____	
Date of 1 st response:	_____	
Date of 2 nd response:	_____	
Date of final response:	_____	
Date of completion:	_____	
Scanned:	Data Entry:	

Property owner information				
Name:	MANDIP SINGH			
Mailing Address:	1030 LATHROP DR CP OR 97502			
Phone number:	707 333 5193			
Legal property description				
Township	Range	Section	Tax Lot	Acreage or Lot Size
37	2W	04	2600	15.33
County	Subdivision Name		Tax Account Number	Block
Property address: 2982 TAYLOR ROAD, CENTRAL POINT, OR 97502				
Directions to property:				
Existing facility/Proposed facility/Water information				
Existing facility		Proposed facility		Water supply
<input checked="" type="checkbox"/> Single family residence		<input checked="" type="checkbox"/> Single family residence		<input type="checkbox"/> Public
Number of bedrooms: 3		Number of bedrooms: 7		Name:
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input checked="" type="checkbox"/> Private
Description: DECOMMISSIONING		Description: NEW BUILD		Well, Spring, Shared: WELL
Type of application				
<input type="checkbox"/> Site Evaluation <input type="checkbox"/> Construction <input type="checkbox"/> Permit Repair <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> Alteration Permit <input type="checkbox"/> Major <input type="checkbox"/> Minor		<input type="checkbox"/> Renewal Permit <input type="checkbox"/> Existing System Evaluation <input type="checkbox"/> Permit Transfer <input type="checkbox"/> Permit Reinstatement		<input checked="" type="checkbox"/> Authorization Notice for: <input type="checkbox"/> Connecting to an Existing System Not in Use <input checked="" type="checkbox"/> Replacing a Mobile Home or House with Another Mobile Home or House <input type="checkbox"/> The Addition of One or More Bedrooms <input type="checkbox"/> Personal Hardship <input type="checkbox"/> Temporary Housing <input type="checkbox"/> Other-please specify:
<p>If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes. By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and it's authorized agents permission to enter onto the above described property for the sole purpose of this application.</p>				
Signature: <u>Mandip Singh</u>		Date: <u>1/19/24</u>		
Applicant's name - please print legibly: <u>JOSEF SEBESTYEN</u>		Applicant's phone number: <u>541-291-1656</u>		
Applicant's mailing address: <u>800 SUNNY GLEN WAY WOLF CREEK 97497</u>		Applicant's email address: <u>SALES@ONPOINT OREGON.COM</u>		
Applicant is the: <input type="checkbox"/> Owner		<input checked="" type="checkbox"/> Authorized representative		<input checked="" type="checkbox"/> Licensed septic installer
		<input checked="" type="checkbox"/> Authorization attached		Installer name: <u>ONPOINT CONSTRUCTION LLC</u>

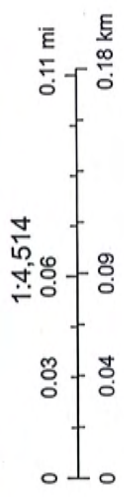
ArcGIS Web Map



1/26/2024, 3:11:07 PM

-  taxlot
-  mapIndex

CountyLines



Oregon DOR, Maxar



State of Oregon
Department of
Environmental
Quality

State of Oregon Department of Environmental Quality

Notice Authorizing Representative

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JAN 25 REC'D

2024

DEQ MEDFORD

I, Mandip Singh, have authorized On Point Construction
(Property Owner/Print Name) (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:

2982 Taylor Rd Central Point OR 97502

(Property Situs or Road Address)

And described in the records of: Jackson County County as:

Township 37 Range 2W Section 04 Map ID _____ Tax Lot #(s) 2600
OR-2022-34033

Property owner:

Printed Name: Mandip Singh

Address: 2982 Taylor Rd

City, State, Zip: Central Point OR 97502

Phone: 7073335193 Email: Garymehrok@yahoo.com

Signature: Mandip Singh

Authorized representative:

Printed Name: JOSEF SEBESTYEN

Address: 800 SUNNY GLEN WAY

City, State, Zip: WOLF CREEK, OR 97502

Phone: 541-291-1656 Email: SALES@ONPOINT OREGON.COM

Signature: [Signature]

Date evaluation denied: 03/22/2024
Application status: Denied
Work description: Singh - Site Evaluation

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.

Andrew Forbes

Onsite Wastewater Specialist

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

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

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2024
DEQ MEDFORD



JACKSON COUNTY ZONING AUTHORIZATION

DEVELOPMENT SERVICES
Planning Division
10 South Oakdale Ave., Room 100
Medford, OR 97501-2902
Phone: 541-774-6907

ZONING: Exclusive Farm Use

RECORD #: 439-23-01712-ZON

ADDRESS: 2982 TAYLOR RD

PRINT DATE: 10/10/2023

PRIMARY PARCEL #: 37-2W-04-2600

LAST UPDATED: 10/10/2023

CASE TYPE: Zoning Information Sheet

PROCESS TYPE: Type I Permit

ASSOCIATED LOTS:

<u>Owners</u>	<u>Record Detail Description</u>
SINGH MANDIP 2982 TAYLOR RD CENTRAL POINT, OR 97502	ZIS Replacement Dwelling

<u>Primary Contact</u>	<u>Contact Type</u>
SINGH MANDIP 2982 TAYLOR RD CENTRAL POINT, OR 97502	Applicant

<u>Contact</u>	<u>Contact Type</u>
SEBESTYEN, JOSEF	Individual

GENERAL ZIS INFORMATION:

<u>STAFF</u>	<u>DATE</u>	<u>COMMENTS</u>
BEELERSF	10/10/2023	10/10/2023: Proposal is for a replacement dwelling for the 1945 dwelling. Assessment shows a 1945 850 SqFt one story with attic and a 1958 1200 SqFt One story. Per 2004 ZCS in historic central file, a dwelling inspection was conducted and passed, both dwellings are recognized. Parcel appears to match configuration in 1973 mapbook, was zoned F-5 then and is zoned EFU now, approximately 15.33 acres in size. No overlays of concern. ZIS fee paid, plot plan approved. Waiting on plans review and EFU Deed Declaration prior to permits. Ok for authorization for septic inspection and installation of new system to serve the existing home and future replacement dwelling. SPB

OVERLAY DETAILS:

<u>Applicable Overlay</u>	<u>Comments</u>
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IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

RECEIVED

JAN 25 REC'D

2024

DEQ MEDFORD

STRUCTURE / SIZE DETAILS:

<u>Item</u>	<u>Units</u>	<u>Proposed Size</u>	<u>Approved Size</u>	<u>Comments</u>
Replacement Dwelling	Sq Ft	7125	7125	Replacement dwelling for 1945 Dwelling

HEIGHT / LOCATION DETAILS:

<u>Items</u>	<u>Distance</u>	<u>Direction</u>	<u>Approved Height</u>	<u>Comments</u>
Replacement Dwelling	330	South	35	Replacement Dwelling for 1945 Dwelling
	65	West		
	180	East		
	1400	North		

Condition

Hold Level

Status

Counter Consultation Fee Due

Met

ZIS fee must be paid prior to issuance of any permits applicable to this case

* Under circumstances where the approved use and/or structure is found to be exempt from building permits, all outstanding ZIS fees must be paid prior to initiating the approved use and/or prior to initiating construction of said structure.

Accessory Structure Deed Declaration

Notice

Not Met

FOR 1945 DWELLING IF KEEPING PLUMBING.

An Accessory Structure Deed Declaration must be recorded on this property and evidence of the recordation must be provided to Planning prior to issuance of permits.*

* Under circumstances where the approved use and/or structure is found to be exempt from building permits, the conditions stated above must be met prior to initiating the approved use and/or prior to initiating construction of said structure.

Exclusive Farm Use DD

Notice

Not Met

Prior to issuance of permits*, the enclosed Deed Declaration, which acknowledges and accepts farm and forest activities on adjacent lands, and requires owner control of dogs, shall be recorded. The metes and bounds description (can be found on the deed or contract) for the subject property must be attached to the covenant, which must be signed in the presence of a notary public and taken to the County Clerk's Office for recordation. After the covenant has been recorded, a copy must be returned to Development Services for notation in this file. (LDO Section 4.2.6A2)

* Under circumstances where the approved use and/or structure is found to be exempt from building permits, the conditions stated above must be met prior to initiating the approved use and/or prior to initiating construction of said structure.

Plan Approval

Notice

Not Met

All plans must be reviewed and approved by planning staff prior to authorization of permits.

Plot Plan

Met

PRIOR TO PERMITS

An accurate plot plan must be submitted for review by Development Services on either standard 8.5" x 11" or legal 8.5" x 14" size paper. The plot plan must accurately depict the boundaries of the parcel. It must be accurately drawn to a base 10-foot scale (e.g. 1" = 60'). All improvements on the property must be shown on the plot plan with labels and distances to the property lines. (LDO Sections 3.4.2A; 6.2.1A; 12.2.3)

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

RECEIVED

JAN 25 REC'D

2024

Not Met
DEPT MEDFORD

Removal/Demo/Converted

Notice

If the dwelling is being replaced, the original dwelling must be removed, demolished, or converted to an allowable nonresidential use within three months of the completion of the replacement dwelling. (LDO Sections 6.5.3Gd, 4.3.6A2)

Assigned Staff:

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

State of Oregon Department of Environmental Quality
Site Plan For Site Evaluation

RECEIVED

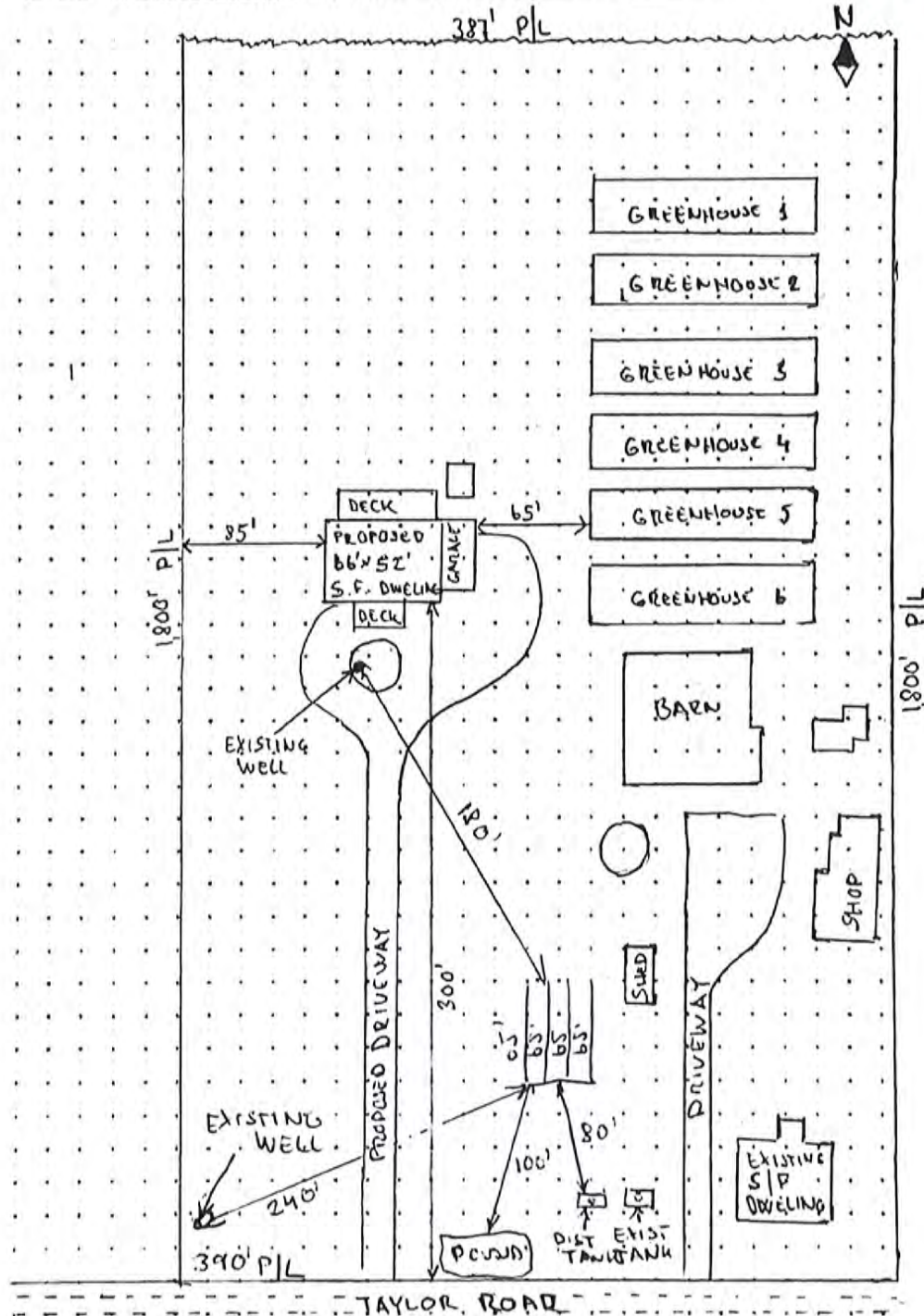
JAN 25 REC'D

2024

DEQ MEDFORD

DEQ

Property owner: SINGH MANPIP
 Address of site: 2982 TAYLOR RD CENTRAL POINT, OR 97502
 Legal description: _____
 Scale: APPROXIMATE 1 DOT = 20'



SCALE IS APPROXIMATE 1 DOT = 20'

FOR OFFICE USE ONLY

Application No.:



EXISTING SEPTIC SYSTEM DESCRIPTION

RECEIVED
JAN 25 REC'D
2024
DEQ MEDFORD

Please answer the following questions as completely as possible, and to the best of your knowledge.

- Your existing septic system consists of (check all that apply):
 Septic Tank Disposal Trenches Capping Fill Sandfilter
 Seepage Bed Cesspool or Pit Unknown
 Other (Describe) _____
- When was your septic system installed? 1986 15-169-36R
(Date) (Permit Number)
- Tank material Concrete Steel Plastic or Fiberglass Unknown
- Septic tank volume (in gallons) 1000 + 500
- When was the septic tank last pumped? _____ Attach receipt if available.
- Number of disposal trenches 4
- Total length of disposal trenches (in feet) 220'
- Do you propose to use the existing septic system? Yes No
- Is your septic system currently in use? Yes No If no, date of last use _____
- If the septic system currently serves a dwelling.
 How many bedrooms are in the dwelling? 2 How many people occupy the dwelling? 4
- How many bedrooms will be in the proposed dwelling? 7 How many occupants? 6
- If the septic system serves a business
 How many total employees are there? 0
 Type of business N/A
- Is there a proposed change of use of your structure (home or business)? Yes No
 If yes, please explain _____
- Provide a plot plan (sketch) on the reverse side of this form showing the best estimated or actual measurements that locate the existing septic tank and disposal trenches, property lines, easements, existing structures, driveways, and water supply. Indicate the direction of north. If you are proposing to replace the septic system, indicate the test hole location.

By my signature, I certify that the above information and the plot plan on the reverse side of this form are accurate and true to the best of my knowledge.

1/25/2024
(Date)

[Signature]
Signature of Property Owner or Legally Authorized Representative

DEQ use only: Record of existing system: Yes No Attached Data Issued
Permit Number _____ Certificate of Satisfactory Completion Issued: Yes No Initials _____
Other file information: _____



Property

Map navigation controls including zoom in (+), zoom out (-), and a home button.

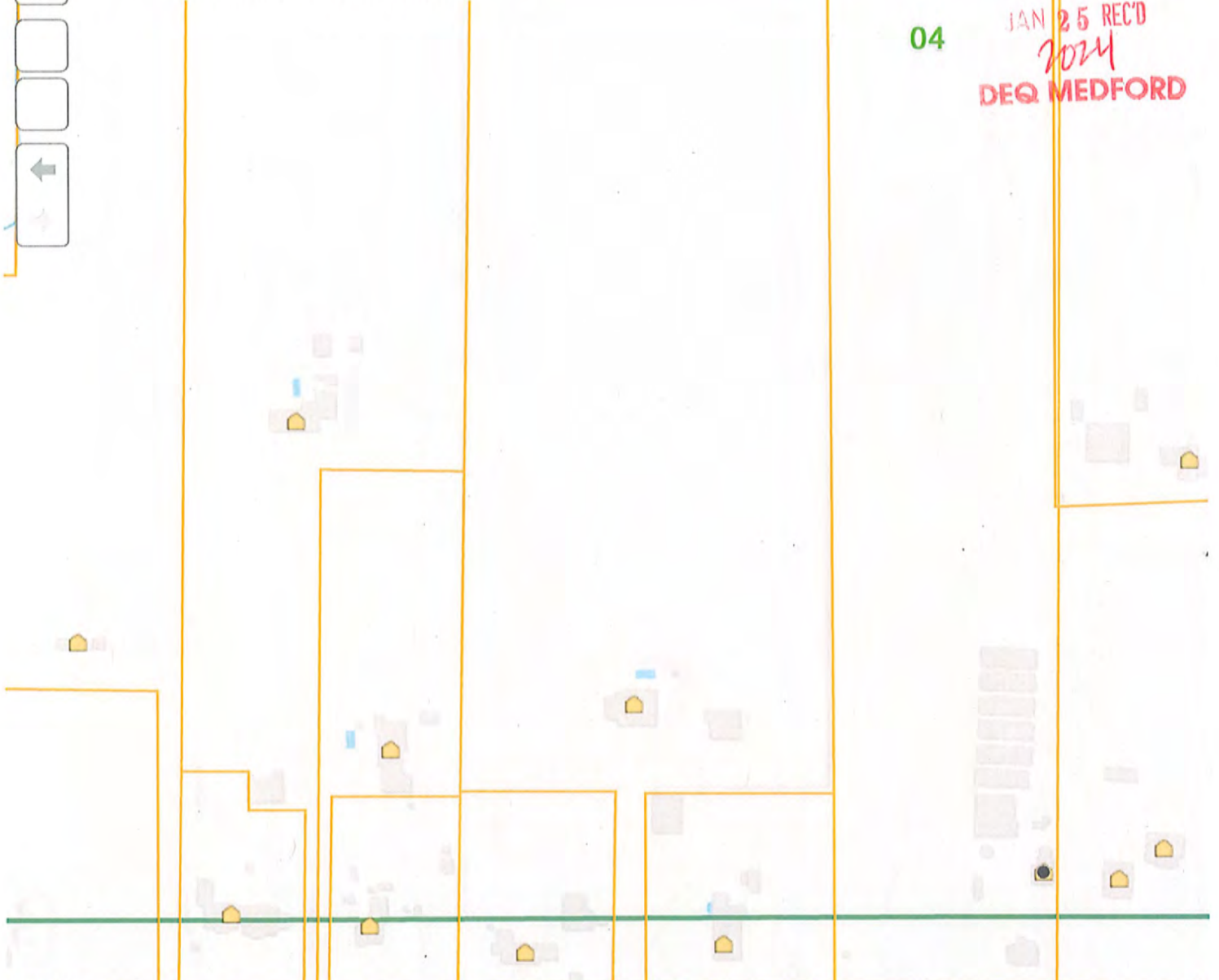
▼ 2982 Taylor road X Q

Show search results for 2982 ...

RECEIVED

04

JAN 25 REC'D
2024
DEQ MEDFORD



aylor Rd Taylor Rd

09

300ft

E unity Maps Contributors, County of Jack...

ZENTGRAF Erica * DEQ

From: ON-Point Construction llc <sales@onpointoregon.com>
Sent: Friday, January 26, 2024 1:27 PM
To: ZENTGRAF Erica * DEQ
Subject: Re: Historic Records for 2982 Taylor Rd

Follow Up Flag: Follow up
Flag Status: Flagged

You don't often get email from sales@onpointoregon.com. [Learn why this is important](#)

Thank you so much Erica.

Get [Outlook for iOS](#)

From: ZENTGRAF Erica * DEQ <Erica.ZENTGRAF@deq.oregon.gov>
Sent: Friday, January 26, 2024 1:10:12 PM
To: ON-Point Construction llc <sales@onpointoregon.com>
Subject: RE: Historic Records for 2982 Taylor Rd

Thank you for the clarification. FYI, I will be voiding your already submitted application and I will create one using the correct application type. Once completed, I will send you an email with the updated record number for reference.

Thanks again for the quick response.
Erica

From: ON-Point Construction llc <sales@onpointoregon.com>
Sent: Friday, January 26, 2024 12:39 PM
To: ZENTGRAF Erica * DEQ <Erica.ZENTGRAF@deq.oregon.gov>
Subject: Re: Historic Records for 2982 Taylor Rd

You don't often get email from sales@onpointoregon.com. [Learn why this is important](#)

Hi Erica,

We are replacing an existing house with a newly built one, and like to connect to the existing septic.

Josef
On-Point Construction LLC

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From: ZENTGRAF Erica * DEQ <Erica.ZENTGRAF@deq.oregon.gov>
Sent: Friday, January 26, 2024 12:05:45 PM
To: ON-Point Construction llc <sales@onpointoregon.com>
Subject: RE: Historic Records for 2982 Taylor Rd

Hi Josef,

I was getting ready to process your application, but it appears that you possibly submitted the wrong application type. The application you submitted was for a Site Evaluation. When looking at the application document, it shows you are replacing a mobile home or house with another home or house. Are you connecting to the existing septic?

If so, that will be an Authorization Notice Application.

Please let me know so that I can void the Site Evaluation if needed and rebuild appropriately.

Thank you,
Erica

From: ON-Point Construction llc <sales@onpointoregon.com>
Sent: Thursday, January 25, 2024 3:12 PM
To: ZENTGRAF Erica * DEQ <Erica.ZENTGRAF@deq.oregon.gov>
Subject: Re: Historic Records for 2982 Taylor Rd

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Sounds good, thank you.

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From: ZENTGRAF Erica * DEQ <Erica.ZENTGRAF@deq.oregon.gov>
Sent: Thursday, January 25, 2024 2:57:17 PM
To: ON-Point Construction llc <sales@onpointoregon.com>
Subject: RE: Historic Records for 2982 Taylor Rd

Hi Josef,

I see the documents have been received via Accela our E-Permitting site. I should be able to get that completed first thing tomorrow morning.

Please be on the lookout for an email from DEQ/Onsite/myself tomorrow with either a link for payment or a request for additional documents. Once we have all documents, a link for payment is sent out and via email. Once payment is received, the file will forward to inspectors for scheduling.

Thank you,
Erica

From: ON-Point Construction llc <sales@onpointoregon.com>
Sent: Thursday, January 25, 2024 1:04 PM
To: ZENTGRAF Erica * DEQ <Erica.ZENTGRAF@deq.oregon.gov>
Subject: Re: Historic Records for 2982 Taylor Rd

You don't often get email from sales@onpointoregon.com. [Learn why this is important](#)
Hello Erica,

Thank you for the information. I uploaded all the documents required to the application portal for processing.

Respectfully

Josef
On-Point Construction LLC

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From: ZENTGRAF Erica * DEQ <Erica.ZENTGRAF@deq.oregon.gov>

Sent: Wednesday, January 24, 2024 2:43:57 PM

To: ON-Point Construction llc <sales@onpointoregon.com>

Subject: Historic Records for 2982 Taylor Rd

Good afternoon,

Per our conversation, attached are the historic records for 2982 Taylor Rd.

Additionally, below are the documents/links to documents that are needed to process your application.

1) Complete the DEQ Application for Onsite Sewage Treatment System. This form can be found at the following location: <https://www.oregon.gov/deq/FilterDocs/os-applOWS.pdf> Please pay careful attention to the sections regarding bedrooms, water source, and directions to the property.

2) Detailed Site Plan: Draw and upload a site plan from actual measurements of the existing septic tank and disposal field (leach field) showing setbacks from foundations, property lines, and water sources. Additionally, be sure to show the proposed improvements or changes (new bedrooms, new mobile home placement, etc.) and designate them clearly. Show the location of all existing and proposed buildings, roads, driveways, property lines, easements, springs, wells, lakes, ponds, rivers, streams, drainage areas and other physical features.

3) Tax Lot Map: This map may be obtained at the local county assessor's office or planning department. Tax lot maps are also online and can be accessed using ORMap at the following address: <https://ormap.net/gis/index.html>

4) Notice Authorizing Representative form: Required if someone other than the property owner will be communicating with the DEQ regarding the application. This form can be found here: <https://www.oregon.gov/deq/FilterDocs/os-AuthRep.pdf>

5) Zoning Authorization: Obtain a zoning authorization letter from your county or local planning department allowing for the proposed development and connection/repair/replacement to the existing septic system.

6) Existing Septic System Description: this form can be found here: <https://www.oregon.gov/deq/FilterDocs/os-existingsysdesc.pdf>

Once the above items have been received and processed, your application fees will be invoiced via payment link.

Please reach out if you have any questions.

Thank you,
Erica



Erica Zentgraf
Office Specialist 2
Oregon Department of Environmental Quality
221 Stewart Ave, Ste 201
Medford, OR 97501-3647
erica.zentgraf@deq.oregon.gov
Office: (541) 776-6010

NOTICE: Medford office is appointment only
Call **541-776-6010** to schedule an appointment
Mon - Fri, 8 a.m. to noon and 1 to 5 p.m., except holidays.



Legend

- Townships**
- Township_2008
- Townships

- Approximate LWI Study Area**
- LWI Study Area
-

- National Hydrography Datasets**
- BASEDAT.DBO.NHDPPoint
-
- BASEDAT.DBO.NHDFlowline
- Perennial
- Intermittent
- Ephemeral
- Unknown
- Canal/Ditch
- BASEDAT.DBO.NHDArea
-
- BASEDAT.DBO.NHDWaterbody
-

- USFWS National Wetland Inventory**
- Wetlands**
- Estuarine and Marine Deepwater
- Estuarine and Marine Wetland
- Freshwater Emergent Wetland
- Freshwater Forested/Shrub Wetland
- Freshwater Pond
- Lake
- Riverine

- SWISoil**
- SWI Predominantly Hydric Soil Map Units
-
- SWI Agate-Winlo Soils
-



Map Unit Symbol	Map Unit Name	Acres in AOI	Percent of AOI
10B	Barron coarse sandy loam, 0 to 7 percent slopes	49.7	14.6%
17C	Brader-Debenger loams, 1 to 15 percent slopes	4.3	1.3%
31A	Central Point sandy loam, 0 to 3 percent slopes	48.0	14.1%
76A	Gregory silty clay loam, 0 to 3 percent slopes	56.8	16.7%
100A	Kubli loam, 0 to 3 percent slopes	71.7	21.0%
100B	Kubli loam, 3 to 7 percent slopes	7.9	2.3%
102B	Langellain-Brader loams, 1 to 7 percent	47.5	13.9%





Legend

- Townships**
- Township_2008
- Townships

- Approximate LWI Study Area**
- LWI Study Area
-

- National Hydrography Datasets**
- BASEDAT.DBO.NHDPoint
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- BASEDAT.DBO.NHDWaterbody
-

- USFWS National Wetland Inventory**
- Wetlands
- Estuarine and Marine Deepwater
- Estuarine and Marine Wetland
- Freshwater Emergent Wetland
- Freshwater Forested/Shrub Wetland
- Freshwater Pond
- Lake
- Riverine

- SWISoil**
- SWI Predominantly Hydric Soil Map Units
-
- SWI Agate-Winlo Soils
-



Onsite Site Evaluation Application Verification 248-24-000072-EVAL

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

Application created: 3/7/24

Parcel Nbr: 372W042600
Site Address: 2982 TAYLOR RD, CENTRAL POINT, OR 97502
Owner: MANDIP SINGH
(707) 333-5193

Applicant: Colt Hansen - OnPoint Construction llc
800 Sunny Glen Way
Wolf Creek, OR 97497

Phone: (541) 291-1656
Email: sales@onpointoregon.com

Licensed Professional(s):

License Number: CCB - 240262
ON POINT CONSTRUCTION LLC
700 MERLIN RD
GRANTS PASS, OR 97526

Phone: (541) 291-1656
Email: yotzo1@topmail.com

Category of Construction: Single Family Dwelling
Acreage or Lot Size: 15.33
Site Ready for Inspection: Yes

County: Jackson
Water Supply: Well

Use of Structure: Existing
new construction
Number of Bedrooms: 0

Use of Structure: Proposed
SFD
Number of Bedrooms: 8

Attached Documents:

Name	Description
Site plan for site evaluation Mehrok.pdf	site plan
Jacdon count zoning authorization.pdf	Jackson county zoning authorization
Notice authorizing representative 2.pdf	notice authorizing representative
Application for ansite septic.pdf	application for onsite sewage treatment system
2982 Taylor Lot map.png	Oregon lot map



Oregon Department of Environmental Quality
Application for Onsite Sewage Treatment System

Send this application to the appropriate DEQ office

For DEQ Use Only:		Date Stamp
Date received: _____	Fee paid: _____	RECEIVED MAR 07 2024 DEQ MEDFORD
Receipt number: _____	Application number: _____	
Date of 1 st response: _____	Date of 2 nd response: _____	
Date of final response: _____	Date of completion: _____	
Scanned: _____	Data Entry: _____	

Property owner information				
Name:	MANDIP SINGH			
Mailing Address:	1030 LATHROP DR CP OR 97502			
Phone number:	707 333 5193			
Legal property description				
Township	Range	Section	Tax Lot	Acreage or Lot Size
37	2W	04	2600	15.33
County	Subdivision Name		Tax Account Number	Block
Property address:	2982 TAYLOR ROAD, CENTRAL POINT, OR 97502			
Directions to property:				
Existing facility/Proposed facility/Water information				
Existing facility		Proposed facility		Water supply
<input type="checkbox"/> Single family residence		<input checked="" type="checkbox"/> Single family residence		<input type="checkbox"/> Public
Number of bedrooms: _____		Number of bedrooms: 8		Name: _____
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input checked="" type="checkbox"/> Private
Description: _____		Description: NEW BUILD		Well, Spring, Shared: WELL
Type of application				
<input checked="" type="checkbox"/> Site Evaluation <input checked="" type="checkbox"/> Construction <input checked="" type="checkbox"/> Permit Repair <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> Alteration Permit <input type="checkbox"/> Major <input type="checkbox"/> Minor		<input type="checkbox"/> Renewal Permit <input type="checkbox"/> Existing System Evaluation <input type="checkbox"/> Permit Transfer <input type="checkbox"/> Permit Reinstatement		<input type="checkbox"/> Authorization Notice for: <input type="checkbox"/> Connecting to an Existing System Not in Use <input checked="" type="checkbox"/> Replacing a Mobile Home or House with Another Mobile Home or House <input type="checkbox"/> The Addition of One or More Bedrooms <input type="checkbox"/> Personal Hardship <input type="checkbox"/> Temporary Housing <input type="checkbox"/> Other-please specify: _____
If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes. By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and it's authorized agents permission to enter onto the above described property for the sole purpose of this application.				
Signature: <u>Mandip Singh</u>		Date: <u>3/7/24</u>		
Applicant's name - please print legibly: <u>JOSEF SEBESTYEN</u>			Applicant's phone number: <u>541-291-1656</u>	
Applicant's mailing address: <u>800 SUNNY GLEN WAY WOLF CREEK 97497</u>			Applicant's email address: <u>SALES@ONPOINT OREGON.COM</u>	
Applicant is the:	<input type="checkbox"/> Owner	<input checked="" type="checkbox"/> Authorized representative	<input checked="" type="checkbox"/> Licensed septic installer	
		<input checked="" type="checkbox"/> Authorization attached	Installer name: <u>ONPOINT CONSTRUCTION LLC</u>	

2982 Taylor Rd 97502 X Q

Show search results for 298...

1600

2900

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372W04

Jackson County

2600

2800

2703

3102

3105

3200

3300

2801

2802

2700

400

801

802

200

300

372W09A

2400

2401

902

372W09B

2500

2306

2305

2302

2304

904

7 Degrees
100m
300ft

- Home
- Layers
- Share
- Fullscreen
- Print
- Info



State of Oregon
Department of
Environmental
Quality

State of Oregon Department of Environmental Quality

Notice Authorizing Representative

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DEQ MEDFORD

I, Mandip Singh, have authorized On Point Construction
(Property Owner/Print Name) (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:

2982 Taylor Rd Central Point OR 97502

(Property Situs or Road Address)

And described in the records of: Jackson County County as:

Township 37 Range 2W Section 04 Map ID _____ Tax Lot #(s) 2600
~~OR 2022-34033~~

Property owner:

Printed Name: Mandip Singh

Address: 2982 Taylor Rd

City, State, Zip: Central Point OR 97502

Phone: 7073335193 Email: Garymehrok@yahoo.com

Signature: *Mandip Singh*

Authorized representative:

Printed Name: JOSEF SEBESTYEN

Address: 800 SUNNY GLEN WAY

City, State, Zip: WOLF CREEK, OR 97502

Phone: 541-291-1656 Email: SALES@ONPOINT OREGON.COM

Signature: *[Signature]*

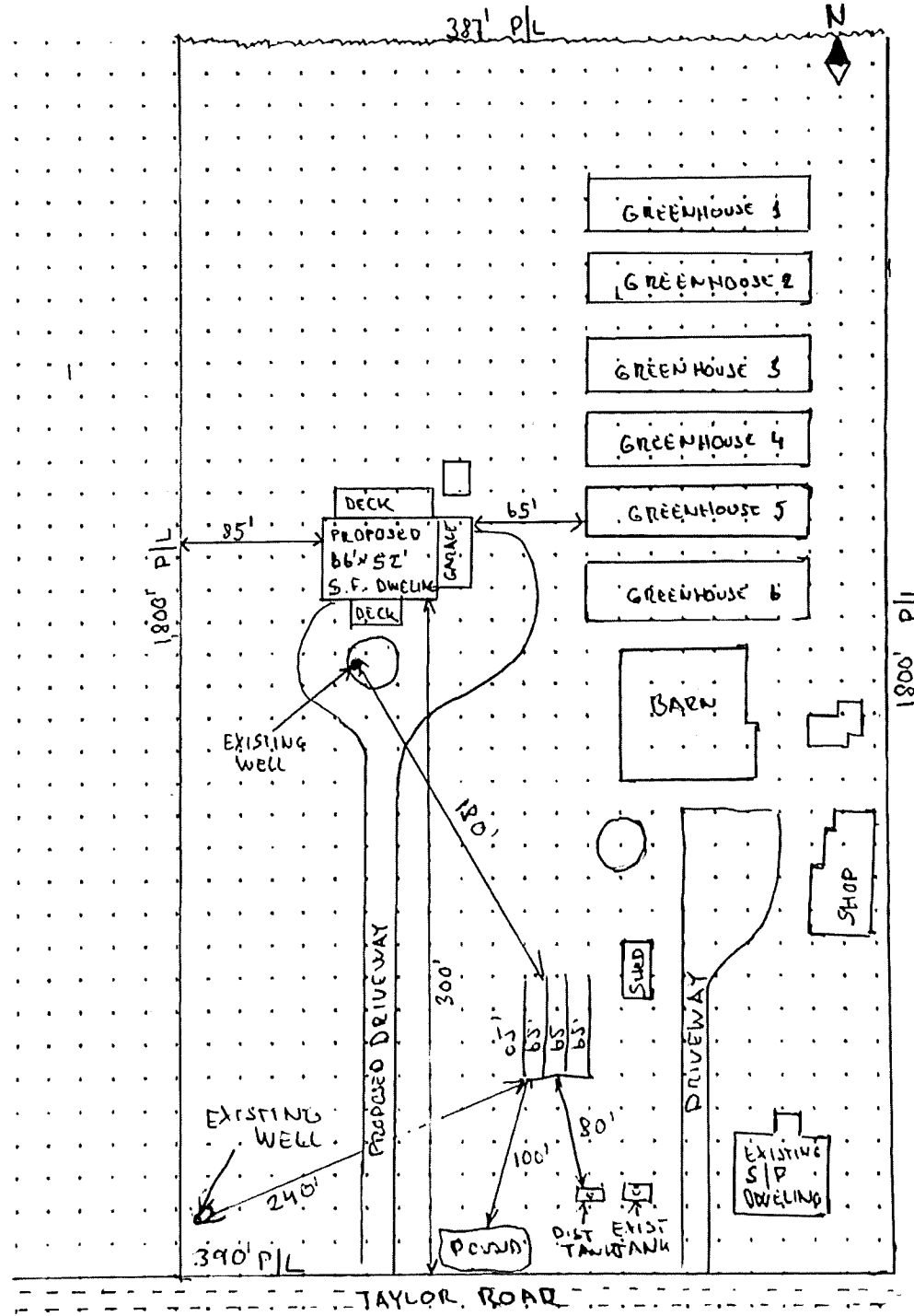
MAR 07 2024

State of Oregon Department of Environmental Quality Site Plan For Site Evaluation



DEQ MEDFORD

Property owner: SINGH MANPIP
 Address of site: 2982 TAYLOR RD CENTRAL POINT, OR 97502
 Legal description: _____
 Scale: APPROXIMATE 1 DOT = 20'



SCALE IS APPROXIMATE 1 DOT = 20'

FOR OFFICE USE ONLY

Application No.:

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DEQ MEDFORD



JACKSON COUNTY ZONING AUTHORIZATION

DEVELOPMENT SERVICES
Planning Division
10 South Oakdale Ave., Room 100
Medford, OR 97501-2902
Phone: 541-774-6907

ZONING: Exclusive Farm Use
ADDRESS: 2982 TAYLOR RD
PRIMARY PARCEL #: 37-2W-04-2600
CASE TYPE: Zoning Information Sheet
ASSOCIATED LOTS:

RECORD #: 439-23-01712-ZON
PRINT DATE: 10/10/2023
LAST UPDATED: 10/10/2023
PROCESS TYPE: Type I Permit

<u>Owners</u>	<u>Record Detail Description</u>
SINGH MANDIP 2982 TAYLOR RD CENTRAL POINT, OR 97502	ZIS Replacement Dwelling

<u>Primary Contact</u>	<u>Contact Type</u>
SINGH MANDIP 2982 TAYLOR RD CENTRAL POINT, OR 97502	Applicant

<u>Contact</u>	<u>Contact Type</u>
SEBESTYEN, JOSEF	Individual



GENERAL ZIS INFORMATION:

<u>STAFF</u>	<u>DATE</u>	<u>COMMENTS</u>
BEELERSF	10/10/2023	10/10/2023: Proposal is for a replacement dwelling for the 1945 dwelling. Assessment shows a 1945 850 SqFt one story with attic and a 1958 1200 SqFt One story. Per 2004 ZCS in historic central file, a dwelling inspection was conducted and passed, both dwellings are recognized. Parcel appears to match configuration in 1973 mapbook, was zoned F-5 then and is zoned EFU now, approximately 15.33 acres in size. No overlays of concern. ZIS fee paid, plot plan approved. Waiting on plans review and EFU Deed Declaration prior to permits. Ok for authorization for septic inspection and installation of new system to serve the existing home and future replacement dwelling. SFB

OVERLAY DETAILS:

<u>Applicable Overlay</u>	<u>Comments</u>
---------------------------	-----------------

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

MAR 07 2024

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STRUCTURE / SIZE DETAILS:

<u>Item</u>	<u>Units</u>	<u>Proposed Size</u>	<u>Approved Size</u>	<u>Comments</u>
Replacement Dwelling	Sq Ft	7125	7125	Replacement dwelling for 1945 Dwelling

HEIGHT / LOCATION DETAILS:

<u>Items</u>	<u>Distance</u>	<u>Direction</u>	<u>Approved Height</u>	<u>Comments</u>
Replacement Dwelling	330	South	35	Replacement Dwelling for 1945 Dwelling
	65	West		
	180	East		
	1400	North		

<u>Condition</u>	<u>Hold Level</u>	<u>Status</u>
<p>Counter Consultation Fee Due</p> <p>ZIS fee must be paid prior to issuance of any permits applicable to this case.</p> <p>* Under circumstances where the approved use and/or structure is found to be exempt from building permits, all outstanding ZIS fees must be paid prior to initiating the approved use and/or prior to initiating construction of said structure.</p>		Met
<p>Accessory Structure Deed Declaration</p> <p>FOR 1945 DWELLING IF KEEPING PLUMBING.</p> <p>An Accessory Structure Deed Declaration must be recorded on this property and evidence of the recordation must be provided to Planning prior to issuance of permits.*</p> <p>* Under circumstances where the approved use and/or structure is found to be exempt from building permits, the conditions stated above must be met prior to initiating the approved use and/or prior to initiating construction of said structure.</p>	Notice	Not Met
<p>Exclusive Farm Use DD</p> <p>Prior to issuance of permits*, the enclosed Deed Declaration, which acknowledges and accepts farm and forest activities on adjacent lands, and requires owner control of dogs, shall be recorded. The metes and bounds description (can be found on the deed or contract) for the subject property must be attached to the covenant, which must be signed in the presence of a notary public and taken to the County Clerk's Office for recordation. After the covenant has been recorded, a copy must be returned to Development Services for notation in this file. (LDO Section 4.2.6A2)</p> <p>* Under circumstances where the approved use and/or structure is found to be exempt from building permits, the conditions stated above must be met prior to initiating the approved use and/or prior to initiating construction of said structure.</p>	Notice	Not Met
<p>Plan Approval</p> <p>All plans must be reviewed and approved by planning staff prior to authorization of permits.</p>	Notice	Not Met
<p>Plot Plan</p> <p>PRIOR TO PERMITS</p> <p>An accurate plot plan must be submitted for review by Development Services on either standard 8.5" x 11" or legal 8.5" x 14" size paper. The plot plan must accurately depict the boundaries of the parcel. It must be accurately drawn to a base 10-foot scale (e.g. 1" = 60'). All improvements on the property must be shown on the plot plan with labels and distances to the property lines. (LDO Sections 3.4.2A; 6.2.1A; 12.2.3)</p>		Met

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

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MAR 07 2024

DEQ MEDFORD

Notice

Not Met

Removal/Demo/Converted

If the dwelling is being replaced, the original dwelling must be removed, demolished, or converted to an allowable nonresidential use within three months of the completion of the replacement dwelling. (LDO Sections 6.5.3Gd; 4.3.6A2)

Assigned Staff:

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.



Septic Authorization Approval

248-24-000105-AUTH

Residential Authorization

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

Date Issued: 4/8/24	Date Expiring: 4/8/25
Work Description: Singh - Authorization Notice	

Applicant: Josef Sebestyen	Primary Contractor: ON POINT CONSTRUCTION LLC
Address: 800 Sunny Glen Way Wolf Creek OR 97497	CCB: 240262
Phone: 5412911656	Address: 800 SUNNY GLEN WAY WOLF CREEK OR 97497
Email: sales@onpointoregon.com	Phone: 5412911656
	Email: yotzo1@topmail.com

Owner: MANDIP SINGH	Property Address: 2982 Taylor Rd, Central Point, OR 97502
Address: 1030 LATHROP DR CENTRAL POINT OR 97502	

Parcel: 372W042600 - Primary **Township:** 37S **Range:** 2W **Section:** 4

Accessory Dwelling Unit: No

Authorization Notice for: Replacing One Dwelling with Another

System is Failing? No **Date Septic Tank Last Pumped:** 01/11/2023

Lot Size: 15.33 **Water Supply:** Well

County: Jackson

Category of Construction: Single Family Dwelling

	Existing	Proposed
Use of Structure:	SFD	SFD
Number of Bedrooms:	2	4

System Specifications:

Max Peak Design Flow: 300 gpd **Proposed Gallons per Day:** 450 gpd

- Conditions of Approval:**
- 1.This notice establishes that the onsite wastewater treatment system located on the property identified above appears adequate by field inspection/record review to serve a 4 BR SFR with a peak sewage flow of 450 gallons per day.
 - 2.Type of System: Standard
 - 3.Linear feet of drainfield: 220'
 - 4.Permit #: 15-169-86R
 - 5.Original CSC Date: 6/27/1986
 - 6.Tank Size: Original Design Flow: 300 GPD
 - 7.Maintain all required setbacks.
 - 8.Vehicular traffic and livestock must be restricted from the system area.
 - 9.All roof drains must be directed away from the system.
 - 10.A full system replacement area must be maintained and meet all required setbacks.
 - 11.It is required that the existing 2 BR SFR be disconnected from septic system and is not permitted to use this onsite wastewater system. Only one dwelling allowed on this property.

Date Issued: 4/8/24 **Date Expiring:** 4/8/25

Work Description: Singh - Authorization Notice

Note: This Notice does not guarantee satisfactory or continuous operation of the sewage system. Should the system fail, a repair permit from DEQ is required.

If you disagree with this report, you have the right to apply for an authorization notice denial review. The application for review must be submitted in writing within 45 days of the report issuance and be accompanied by the review fee in OAR 340-071-0140(3), Table 9C and any additional information DEQ needs to complete the review.

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.

Andrew Forbes

Onsite Wastewater Specialist

4/8/24

APR 04 2024

DEQ MEDFORD



State of Oregon
Department of
Environmental
Quality

Notice Authorizing Representative

I, Mandip Singh, have authorized On Point Construction
(Property Owner/Print Name) (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:

2982 Taylor Rd Central Point OR 97502

(Property Situs or Road Address)

And described in the records of: Jackson County County as:

Township 37 Range 2W Section 04 Map ID _____ Tax Lot #(s) 2600
OR 2022-34033

Property owner:

Printed Name: Mandip Singh

Address: 2982 Taylor Rd

City, State, Zip: Central Point OR 97502

Phone: 7073335193 Email: Garymehrok@yahoo.com

Signature: Mandip Singh

Authorized representative:

Printed Name: JOSEF SEBESTYEN

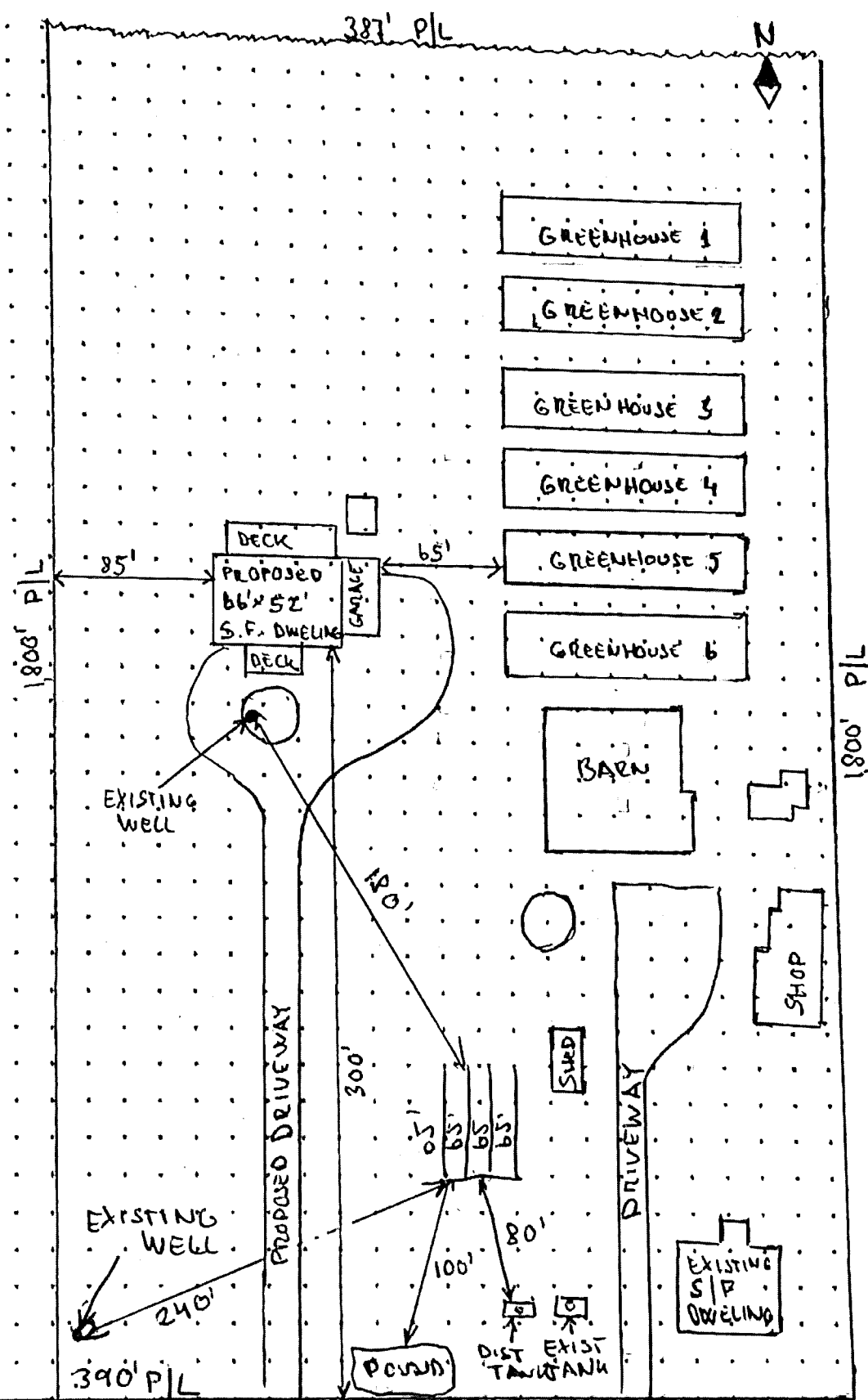
Address: 800 SUNNY GLEN WAY

City, State, Zip: WOLF CREEK , OR 97502

Phone: 541 - 291 - 1656 Email: SALES@ONPOINT OREGON.COM

Signature: [Handwritten Signature]

RECEIVED
APR 04 2024
DEQ MEDFORD



SCALE IS APPROXIMATE 1 DOT = 20'



RECEIVED

APR 04 2024

EXISTING SEPTIC SYSTEM DESCRIPTION

DEQ MEDFORD

Please answer the following questions as completely as possible, and to the best of your knowledge.

1 Your existing septic system consists of (check all that apply)

Septic Tank Disposal Trenches Capping Fill Sandfilter

Seepage Bed Cesspool or Pit Unknown

Other (Describe) _____

2 When was your septic system installed? 1986 15-169-36R

(Date) (Permit Number)

3 Tank material Concrete Steel Plastic or Fiberglass Unknown

4 Septic tank volume (in gallons) 1000 - 500

5 When was the septic tank last pumped? _____ Attach receipt if available

6 Number of disposal trenches 4

7 Total length of disposal trenches (in feet) 220'

8 Do you propose to use the existing septic system? Yes No

9 Is your septic system currently in use? Yes No If no, date of last use _____

10 If the septic system currently serves a dwelling.
How many bedrooms are in the dwelling? 2 How many people occupy the dwelling? 4

11 How many bedrooms will be in the proposed dwelling? 7 How many occupants? 6

12 If the septic system serves a business
How many total employees are there? 0
Type of business N/A

13 Is there a proposed change of use of your structure (home or business)? Yes No
If yes, please explain _____

14 Provide a plot plan (sketch) on the reverse side of this form showing the best estimated or actual measurements that locate the existing septic tank and disposal trenches, property lines, easements, existing structures, driveways, and water supply. Indicate the direction of north. If you are proposing to replace the septic system, indicate the test hole location.

By my signature, I certify that the above information and the plot plan on the reverse side of this form are accurate and true to the best of my knowledge.

1/25/2024
(Date)

[Signature]
Signature of Property Owner or Legally Authorized Representative

DEQ uses only: Record of existing system: Yes No Attached Info based
Permit Number: Certificate of Construction/Completion Issued: Yes No Invalid

Form 1 (revised 10/20/19) DEQ

Print Form



Onsite Authorization Application Verification 248-24-000105-AUTH

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

Application created: 4/4/24
Parcel Nbr: 372W042600
Site Address: 2982 TAYLOR RD, CENTRAL POINT, OR 97502
Owner: MANDIP SINGH
(707) 333-5193
Applicant: Josef Sebestyen - On-Point Construction LLC
800 Sunny Glen Way
Wolf Creek, OR 97497
Phone: (541) 291-1656
Email: sales@onpointoregon.com

Licensed Professional(s):
License Number: CCB - 240262
ON POINT CONSTRUCTION LLC
800 SUNNY GLEN WAY
WOLF CREEK, OR 97497
Phone: (541) 291-1656
Email: yotzo1@topmail.com

Category of Construction: Single Family Dwelling
Acreage or Lot Size: 15.33
Site Ready for Inspection: Yes
County: Jackson
Water Supply: Well

	<u>Existing</u>		<u>Proposed</u>
Use of Structure:	SFD	Use of Structure:	SFD
Number of Bedrooms:	2	Number of Bedrooms:	4

Attached Documents:	Name	Description
	Mehrok zoning authorization .pdf	Jackson county zoning authorization
	2982 Taylor Lot map.png	lot man
	Septic application April 4.pdf	Application for onsite sewage
	Notice authorizing representative 2.pdf	notice authorizing representative
	Septic pumping invoice.pdf	septic pumping invoice
	Existing septic description March 31.pdf	existing septic description
	Existing septic system description Mehrok.pdf	Existing septic system specification



Oregon Department of Environmental Quality Application for Onsite Sewage Treatment System

Send this application to the appropriate
DEQ office

For DEQ Use Only:		Date Stamp
Date received: _____		RECEIVED APR 04 2024 DEQ MEDFORD
Fee paid: _____		
Receipt number: _____		
Application number: _____		
Date of 1 st response: _____		
Date of 2 nd response: _____		
Date of final response: _____		
Date of completion: _____		
Scanned: _____	Data Entry: _____	

Property owner information

Name:	MANDIP SINGH
Mailing Address:	1030 LATHROP DR CP OR 97502
Phone number:	707 333 5193

Legal property description

Township	Range	Section	Tax Lot	Acreage or Lot Size
37	2W	04	2600	15.33
County	Subdivision Name		Tax Account Number	Block

Property address: 2982 TAYLOR ROAD, CENTRAL POINT, OR 97502

Directions to property:

Existing facility/Proposed facility/Water information

Existing facility		Proposed facility		Water supply
<input checked="" type="checkbox"/> Single family residence		<input checked="" type="checkbox"/> Single family residence		<input type="checkbox"/> Public
Number of bedrooms: 2		Number of bedrooms: 4		Name:
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input checked="" type="checkbox"/> Private
Description:		Description:		Well, Spring, Shared: WELL

Type of application

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

If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes. By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agents permission to enter onto the above described property for the sole purpose of this application.

Signature: Mandip Singh Date: 3/31/24

Applicant's name – please print legibly: JOSEF SEBESTYEN Applicant's phone number: 541-291-1656

Applicant's mailing address: 800 SUNNY GLEN WAY WOLF CREEK 97447 Applicant's email address: SALES@ONPOINTOREGON.COM

Applicant is the:	<input type="checkbox"/> Owner	<input checked="" type="checkbox"/> Authorized representative	<input checked="" type="checkbox"/> Licensed septic installer
		<input checked="" type="checkbox"/> Authorization attached	Installer name: ONPOINT CONSTRUCTION LLC

2982 Taylor Rd 97502 X Q

Show search results for 298...

2900

3102

3105

3200

3300

RECEIVED
APR 04 2024
DEQ MEDFORD

372W09A

200

300

2800

2802

2801

2703

372W04

Jackson County

2700

2600

400

801

802

1600

2400

2401

902

372W09B

2500

2306

2305

2302

2304

904

7 Degrees
100m
300ft

- Information icon (i)
- Print icon
- Full screen icon
- Home icon
- Layers icon

RECEIVED

APR 04 2024

DEQ MEDFORD

DEVELOPMENT SERVICES

Planning Division

10 South Oakdale Ave , Room 100

Medford, OR 97501-2902

Phone: 541-774-6907



JACKSON COUNTY ZONING AUTHORIZATION

ZONING: Exclusive Farm Use

RECORD #: 439-23-01712-ZON

ADDRESS: 2982 TAYLOR RD

PRINT DATE: 10/10/2023

PRIMARY PARCEL #: 37-2W-04-2600

LAST UPDATED: 10/10/2023

CASE TYPE: Zoning Information Sheet

PROCESS TYPE: Type I Permit

ASSOCIATED LOTS:

<u>Owners</u>	<u>Record Detail Description</u>
SINGH MANDIP 2982 TAYLOR RD CENTRAL POINT, OR 97502	ZIS Replacement Dwelling
<u>Primary Contact</u>	<u>Contact Type</u>
SINGH MANDIP 2982 TAYLOR RD CENTRAL POINT, OR 97502	Applicant
<u>Contact</u>	<u>Contact Type</u>
SEBESTYEN, JOSEF	Individual

GENERAL ZIS INFORMATION:

<u>STAFF</u>	<u>DATE</u>	<u>COMMENTS</u>
BEELERSF	10/10/2023	10/10/2023: Proposal is for a replacement dwelling for the 1945 dwelling. Assessment shows a 1945 850 SqFt one story with attic and a 1958 1200 SqFt One story. Per 2004 ZCS in historic central file, a dwelling inspection was conducted and passed, both dwellings are recognized. Parcel appears to match configuration in 1973 mapbook, was zoned F-5 then and is zoned EFU now, approximately 15.33 acres in size. No overlays of concern. ZIS fee paid, plot plan approved. Waiting on plans review and EFU Deed Declaration prior to permits. Ok for authorization for septic inspection and installation of new system to serve the existing home and future replacement dwelling. SFB

OVERLAY DETAILS:

<u>Applicable Overlay</u>	<u>Comments</u>
---------------------------	-----------------

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

STRUCTURE / SIZE DETAILS:

<u>Item</u>	<u>Units</u>	<u>Proposed Size</u>	<u>Approved Size</u>	<u>Comments</u>
Replacement Dwelling	Sq Ft	7125	7125	Replacement dwelling for 1945 Dwelling

HEIGHT / LOCATION DETAILS:

<u>Items</u>	<u>Distance</u>	<u>Direction</u>	<u>Approved Height</u>	<u>Comments</u>
Replacement Dwelling	330	South	35	Replacement Dwelling for 1945 Dwelling
	65	West		
	180	East		
	1400	North		

<u>Condition</u>	<u>Hold Level</u>	<u>Status</u>
<p>Counter Consultation Fee Due</p> <p>ZIS fee must be paid prior to issuance of any permits applicable to this case</p> <p>* Under circumstances where the approved use and/or structure is found to be exempt from building permits, all outstanding ZIS fees must be paid prior to initiating the approved use and/or prior to initiating construction of said structure.</p>		Met
<p>Accessory Structure Deed Declaration</p> <p>FOR 1945 DWELLING IF KEEPING PLUMBING</p> <p>An Accessory Structure Deed Declaration must be recorded on this property and evidence of the recordation must be provided to Planning prior to issuance of permits *</p> <p>* Under circumstances where the approved use and/or structure is found to be exempt from building permits, the conditions stated above must be met prior to initiating the approved use and/or prior to initiating construction of said structure.</p>	Notice	Not Met
<p>Exclusive Farm Use DD</p> <p>Prior to issuance of permits*, the enclosed Deed Declaration, which acknowledges and accepts farm and forest activities on adjacent lands, and requires owner control of dogs, shall be recorded. The metes and bounds description (can be found on the deed or contract) for the subject property must be attached to the covenant, which must be signed in the presence of a notary public and taken to the County Clerk's Office for recordation. After the covenant has been recorded, a copy must be returned to Development Services for notation in this file. (LDO Section 4.2.6A2)</p> <p>* Under circumstances where the approved use and/or structure is found to be exempt from building permits, the conditions stated above must be met prior to initiating the approved use and/or prior to initiating construction of said structure.</p>	Notice	Not Met
<p>Plan Approval</p> <p>All plans must be reviewed and approved by planning staff prior to authorization of permits</p>	Notice	Not Met
<p>Plot Plan</p> <p>PRIOR TO PERMITS</p> <p>An accurate plot plan must be submitted for review by Development Services on either standard 8.5" x 11" or legal 8.5" x 14" size paper. The plot plan must accurately depict the boundaries of the parcel. It must be accurately drawn to a base 10-foot scale (e.g. 1" = 60'). All improvements on the property must be shown on the plot plan with labels and distances to the property lines. (LDO Sections 3.4.2A; 6.2.1A; 12.2.3)</p>		Met

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

RECEIVED

APR 04 2024

DEQ MEDFORD

Removal/Demo/Converted

Notice

Not Met

If the dwelling is being replaced, the original dwelling must be removed, demolished, or converted to an allowable nonresidential use within three months of the completion of the replacement dwelling. (LDO Sections 6 5 3Gd, 4 3 6A2)

Assigned Staff:

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.



VIOLATION NOTICE

Map ID: 37-2W-04 2600

Owner: DAVE PORT

Address: 2982 TAYLOR RD

The Jackson County Roads, Parks & Planning Services finds the following violation(s) to exist on your property:

Failure to Obtain:

- Building Permit
- Mobile Home Permit
- Septic Permit

- Plumbing Permit
- Electrical Permit
- Expired Permit

Other Violations:

- Zoning Approval Required
- Sanitation
- Solid Waste

Please Initiate Compliance by 7-1-04

Remarks: CONVERTED SHOP INTO 2ND DWELLING
WITHOUT REQUIRED PERMITS & INSPECTIONS

TO BRING YOUR PROPERTY INTO COMPLIANCE

PLEASE BRING THIS FORM WITH YOU TO ROADS, PARKS & PLANNING SERVICES, 10 SOUTH OAKDALE, ROOM 100, MEDFORD (541)774-6900 Hours Monday, Tuesday, Thursday and Friday 8:00 a.m. to 4:00 p.m. and Wednesday 1:00 p.m. to 4:00 p.m.

PLEASE CONTACT _____ AT _____ .THANK YOU

Roads, Parks, and Planning Services 10 South Oakdale, Medford OR 97501	Enforcement Officer <u>MILLER 774-6941</u>	Date <u>6-7-04</u>
---	---	-----------------------

FAILURE TO CORRECT THE VIOLATION MAY RESULT IN THE ISSUANCE OF A FORMAL CITATION OR CIVIL ACTION.



JACKSON COUNTY Oregon

ZONING INFORMATION SHEET

THIS DOCUMENT IS FOR INFORMATION PURPOSES ONLY! THIS IS NOT A LAND-USE PERMIT

ZONING: EFU

ZIS NUMBER: ZON2004-00860

SITE ADDRESS: 2982 TAYLOR RD

PROJECT: ZON2004-00860

PRIMARY PARCEL NUMBER: 37-2W-04-2600

PRINT DATE: 06/08/2004

ASSOCIATED LOTS:

LAST UPDATED: 6/8/04 12:00 am

Owner

DAVENPORT DAVID F/RONI-SUE
P O BOX 5585 CENTRAL POINT, OR 97502

PURPOSE OF ZIS / PROJECT DESCRIPTION:

second dwelling

GENERAL ZIS INFORMATION:

OWNER IN TODAY TO VERIFY RECORDS THAT ZONING RECOGNIZES THE SECOND DWELLING ON THE PROPERTY. TOD M. CONDUCTED A FIELD INSPECTION TO VERIFY THAT STRUCTURE WAS ACTUALLY A PRE-EXISTING DWELLING. THIS HE VERIFIED. A ZONING INFORMATION SHEET FROM 1997 STATED THAT THERE WAS ONLY ONE DWELLING ON THE PROPERTY, HOWEVER ASSESSMENT IS SHOWING 2 RESIDENCE...ONE BUILT IN 1945 AND ONE BUILT IN 1958. PER SANDY MATHEWSON AND ASSESSMENT RECORDS TWO LEGAL PRE-EXISTING STRUCTURES EXIST ON THIS PROPERTY.

Staff Signature

Assigned Staff: Tracie Littlefield

ZIS Recipient Signature

To whom it may concern:

Re: 2982 Taylor Rd, Central Pt. OR 97502
Owner: David & Roni-sue Davenport

Statement:

The two homes located on this property has been in existence and used as homes prior to 1973 as observed by me. I also recall when Mr. Elmer Wallin bought this property and used it as a dairy farm 58 years ago, June 1946 deed #398365. The two homes were on and in use when he sold to Mr. Clarence Deeds in 1970 deed #70-07619 per county records.

Signature Don W. Bohnert date 6/21/04

Print name DON W. BOHNERT

Address 340 Westover Blvd Phone # (541) 734-9483
Central Point OR 97502

INDIVIDUAL ACKNOWLEDGMENT

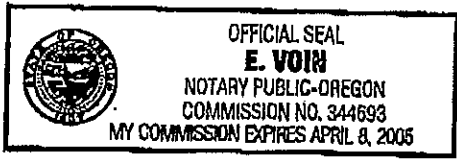
State/Commonwealth of Oregon }
County of Jackson } ss.

On this the 21st day of June, 2004, before
me, E. VOIN, the undersigned Notary
Name of Notary Public

Public, personally appeared DON W. BOHNERT
Name(s) of Signer(s)

personally known to me - OR -
 proved to me on the basis of satisfactory
evidence

to be the person(s) whose name(s) is/are
subscribed to the within instrument, and
acknowledged to me that he/she/they
executed the same for the purposes therein
stated.



WITNESS my hand and official seal.
[Signature]
Signature of Notary Public

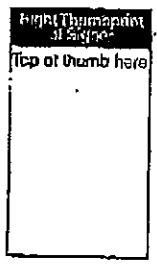
Other Required Information (Printed Name of Notary, Residence, etc.)
My commission expires:
April 8, 2005

Place Notary Seal and/or Any Stamp Above

OPTIONAL

Although the information in this section is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document
Title or Type of Document: _____
Document Date: _____ Number of Pages: _____
Signer(s) Other Than Named Above: _____



To whom it may concern:

Re: 2982 Taylor Rd, Central pt, OR 97502
Owner: David Davenport

The two homes located on this property has been in existence and used as homes prior to 1973 as observed by me as the neighbor.

Neighbor:

Signed by neighbor Marvin Arnold Bannert Date 6-8-04
MARVIN ARNOLD BANNERT

Address: 3080 Taylor Rd
Central Pt, OR 97502

Phone # 541-664-1976

INDIVIDUAL ACKNOWLEDGMENT

State/Commonwealth of Oregon } ss.
County of Jackson

On this the 8th day of June, 2004, before
me, Aminda Nickolls, the undersigned Notary
Public, personally appeared Marvin Arnold Bannert,
Name(s) of Signer(s)

personally known to me -- OR --
 proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that he/she/they executed the same for the purposes therein stated.



WITNESS my hand and official seal.
Aminda Nickolls
Signature of Notary Public
Aminda Nickolls Central Pt, OR
Other Required Information (Printed Name of Notary, Residence, etc.)

Place Notary Seal and/or Any Stamp Above

OPTIONAL

Although the information in this section is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Right Thumbprint of Signer
Top of thumb here



ZONING CLEARANCE SHEET

PLANNING & DEVELOPMENT SERVICES • 10 S. OAKDALE AVE., RM. 100 • MEDFORD OREGON 97501-2902 • (541) 776-2660 R

File Number: 97 1167 ZCS

Current Owner: APPLGATE GARY C/CAROL R

Map Id: 372W04 Tax Lot: 2600 Acreage: 15.53
Property Address: 2982 TAYLOR RD Acres: 15.53

Applicant Name: DAVENPORT DAVID
Mailing Address:
City/St: Phone:
Zoning Clearance Date: 12/23/97 Creation Date: 0/00/00

Proposal:

To Serve: INFORMATION

Property is Zoned: EFU Minimum Parcel Area: 80.0 ACRES
MINIMUM STRUCTURAL SETBACK FROM PROPERTY LINES: Front: 30 Side: 30 Rear: 20

Development on this land is subject to Mandatory Fire Safety Requirements as described in Chapter 280.100 of the Jackson County Land Development Ordinance. A 100 foot fuelbreak is required and may affect setbacks.

Comments:

SUBJECT PROPERTY HAS A HOUSE BUILT IN 1958, AN 1188 SQUARE FOOT GENERAL PURPOSE BUILDING AND A BARN. ALL STRUCTURES PRE-EXIST ZONING AND BUILDING REQUIREMENTS. SETBACKS ON THE GENERAL PURPOSE BUILDING MAY NOT MEET CURRENT BUILDING OR ZONING REQUIREMENTS, BUT ARE PRE-EXISTING NONCONFORMING. IF SUBSTANTIAL CONSTRUCTION OCCURS TO ANY STRUCTURE, CURRENT FUELBREAK, SETBACK AND BUILDING REQUIREMENTS WILL APPLY, AS PER CODE.

3/9/99 OK to issue an elec permit for a separate service for the barn. Only one dwelling allowed on property. Barn cannot be used for overnight sleeping, guest house purposes nor

NO CONFLICTS EXIST. The proposed use or development AS PRESENTED HEREIN is in conformance with the Land Development Ordinance. Falsification of information renders this zoning clearance null and void.

CERTIFICATION: The information I have provided for this zoning clearance is, to the best of my knowledge, true, accurate and complete. I also understand that any changes in my plans or county regulations may render this clearance sheet invalid.

Signature of owner/applicant: [Signature] Date: 12-23-97
Signature of staff member: [Signature] Date: 12-23-97

Copy of the zoning clearance HANDGIVEN to applicant on: 12/23/97

Commercial use. nupo.

Handwritten notes on the left side of the page, including the word "Satisfactory" and other illegible text.

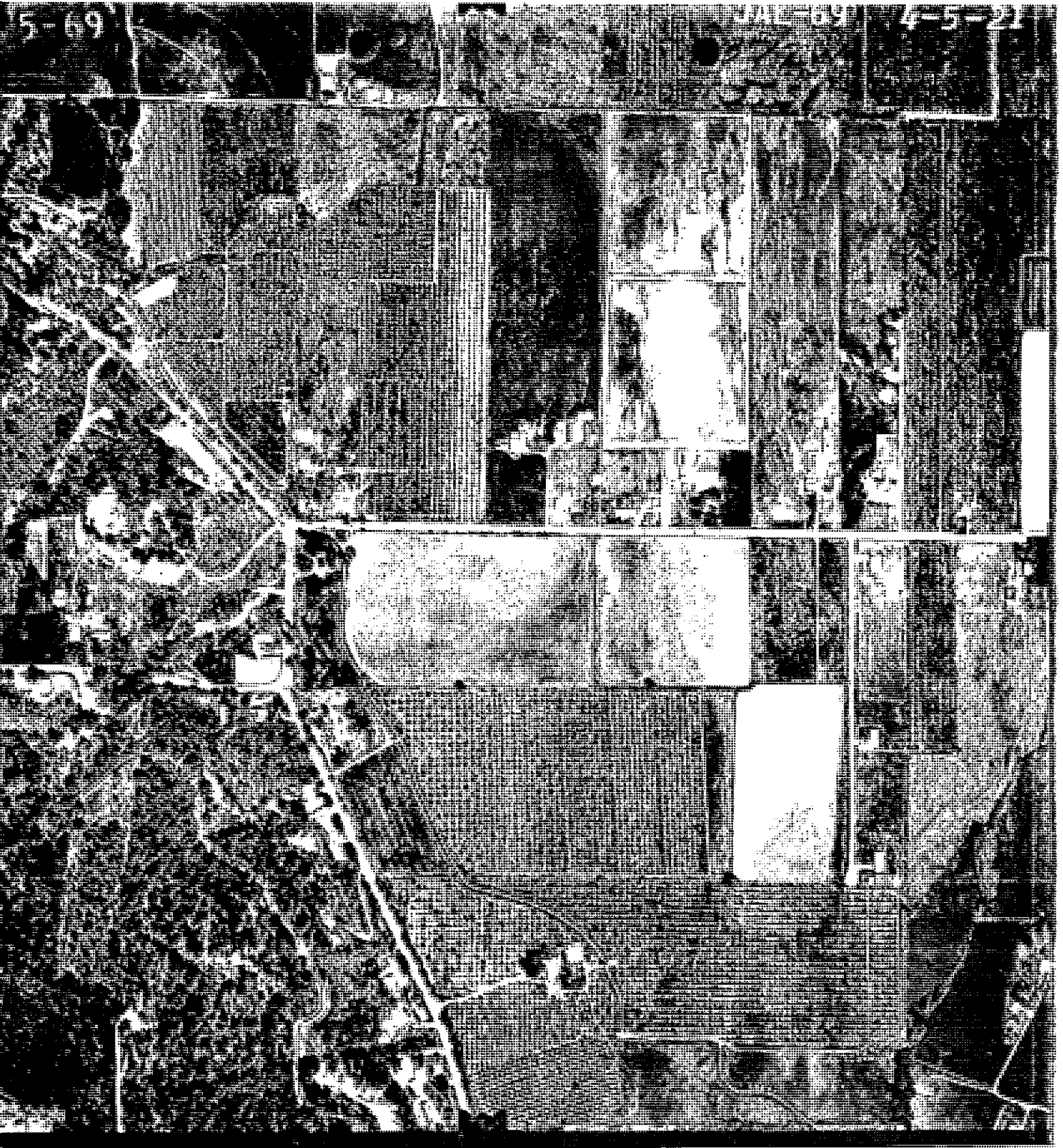
Handwritten notes on the right side of the page, including the word "Satisfactory" and other illegible text.

Handwritten notes at the bottom center of the page, including the word "Satisfactory" and other illegible text.

5-69

MAR-69

4-5-21





SEPTIC/WELL APPLICATION
SANITATION DIVISION

DEPARTMENT OF PLANNING & DEVELOPMENT • COUNTY COURTHOUSE • MEDFORD, OREGON 97501 • (503) 776-7554

Owner Charles Hopkins Township 37 Range 2W Section 4
Tax Lot 2600 Acres _____

Address (if any) and Directions to Property 2982 Taylor Road, Central Point

Site Evaluation Fee _____ Minus Preliminary Site Fee _____ Balance to be Paid _____
Number of Sites _____ Receipt # _____ Date _____

Permit Application Type _____ Fee _____ Receipt # _____ Date _____
 Well Permit Fee 10.00 Receipt # 2684 Date 11-10-87

Proposed Residence or Business? _____ # Test Holes Ready _____ Date _____
Any Residence/Business on Lot Now? _____ No. of Bdrms/Seats/Employees _____
Pumping Receipt Submitted? _____ Tank Uncovered? _____ Date _____

Comments (if any) Studebaker

I certify that the information given is true and correct to the best of my knowledge.

Date 11-10-87 Owner's Signature Charles Hopkins
(or representative with written authorization)

Mailing Address (#, Street, City, State, Zip Code) 2934 Taylor Road, Central Point, OR, 97502 Phone No. 661-5523

DO NOT WRITE BELOW THIS LINE

Complete Application Date 11-10-87

Site Evaluation Results:

By _____ Date _____

WELL PERMIT: Approved Not Approved _____ Date 12 NOV 87 By BWA Prior, R.S.
Expires 12 NOV 88

Comments: to be installed so as to meet all state and county codes. Well Permit # 374-87W

SEPTIC PERMIT INSTALLATION SPECIFICATIONS: _____ Gallon Septic Tank (1250 recommended)
_____ Lineal Feet of Drainfield _____

Keep drainfield and approved repair area free of all development, compaction, soil modification, traffic, heavy cultivation and fenced from livestock.

PERMIT: Approved _____ Not Approved _____ By _____ # _____
Date _____ EXPIRES _____ Final Inspection On _____ Installer _____

Certificate of Satisfactory Completion Issued _____ By _____
Comments: _____

Taylor Rd

280'

well ○

House

septic

Barn

150'

50' 2703

To Neighbors
drainfield
appears to
be over
100' from
title record

50' New well

to be installed so as to meet all state and county codes.
JACKSON COUNTY INDIVIDUAL WATER SYSTEM ORDINANCE
Well Setback Requirements:
100 feet from any drainfield
50 feet from any septic tank
20 feet from any property lines
(if adjoining parcel is currently undeveloped)
~~20 feet from any existing well on an adjoining property~~

2703

parcel # 2600

1.18
COPY 1.75
28

Recording requested by:)
GARY APPELEGATE)
When recorded mail to:)
GARY APPELEGATE;)
P.O. Box 384)
Morgan Hill, Ca. 95037)

Documentary Transfer Tax \$ _____

By _____
CAROL and GARY APPELEGATE,
GRANTORS

GRANT OF EASEMENT
and
EASEMENT AGREEMENT

Preamble

THIS AGREEMENT made this 29 day of January, 1987, by and between CAROL and GARY APPELEGATE, hereinafter referred to as "Grantors" and DEPARTMENT OF VETERANS' AFFAIRS hereinafter referred to as "Grantee".

Recitals

WHEREAS, Grantors are the owners of certain real property commonly known as tax parcel number 2600 located in the unincorporated area of Jackson County, State of Oregon, hereinafter referred to as the "Servient Tenement" and described as follows:

45-37-2W

"Commencing at the northeast corner of Donation Land Claim No. 45, in Township 37 South Range 2 West of the Willamette Meridian in Jackson County, Oregon; thence West, along the north line of said claim 281.11 feet to the true point of beginning; thence South 1782.0 feet (100 rods); thence West 378.89 feet; thence North 1782.0 feet on the north side of said Donation Land Claim No. 45; thence East, along said north line, 378.89 feet to the true point of beginning"; and

4
2
21

WHEREAS, Grantee is the owner of certain real property commonly known as tax parcel number 2700 located in the unincorporated area of Jackson County, State of Oregon, hereinafter referred to as the "Dominant Tenement" and described as follows:

"Parcel A: Commencing at the Northeast corner of Donation Land Claim NO. 45, in Township 37 South, Range 2 West, Willamette Meridian, Jackson County, Oregon; thence South 0 degrees 20 minutes 15 seconds West, along the East line of said

20
31
38

L-29554

claim, 909.82 feet, to the true point of beginning; thence continue South 0 degrees 20 minutes 15 seconds West, along said line, 879.00 feet, to the North rights of way of Taylor Road; thence South 89 degrees 50 minutes West, along said right of way, 31.11 feet; thence North 0 degrees 20 minutes 15 seconds East, 125.00 feet; thence South 89 degrees 50 minutes West, 250.00 feet, to the Southwest corner of tract described in deed recorded as Instrument No. 74-03342, Official Records of Jackson County, Oregon; thence North 0 degrees 20 minutes 15 seconds East, along the West line of said tract, 776.00 feet; thence North 89 degrees 50 minutes East, 140.60 feet; thence South 0 degrees 20 minutes 15 seconds West, 22.00 feet, to a point which bears South 89 degrees 50 minutes West, from the true point of beginning; thence North 89 degrees 50 minutes East, 140.51 feet, to the true point of beginning.

Parcel B: Commencing at the Northeast corner of Donation Land Claim NO. 45, in Township 37 South, Range 2 West, Willamette Meridian, Jackson County, Oregon; thence South, 1782.0 feet, to the Southeast corner of tract described in Volume 440 Page 243, Jackson Conty, Oregon, Deed Records; thence West, 156.11 feet, to the true point of beginning; thence West, 125.0 feet; thence North, 125.0 feet, thence East, 125.0 feet; thence South, 125.0 feet, to the true point of beginning.

Also, Commencing at the Northeast corner of Donation Land Claim No. 45, in Township 37 South, Range 2 West, Willamette Meridian, Jackson County, Oregon; thence South, 1782.0 feet, to the Southeast corner of tract described in Volume 440, page 243, Jackson County, Oregon, Deed Records; thence West, 31.11 feet, to the the true point of beginning; thence continue West, 125.0 feet; thence North, 125.0 feet; thence East, 125.0 feet; thence South, 125.0 feet, to the true point of beginning"; and

WHEREAS, Grantee desire to acquire certain rights in the Dominant Tenement;

NOW, THEREFORE, it is agreed as follows:

GRANT OF EASEMENT

1. Grantors hereby grant Grantee an easement hereinafter described.

CHARACTER OF EASEMENT

2. The easement granted herein is appurtenant to the Dominant Tenement.

DESCRIPTION OF EASEMENT

3. The easement granted herein is a right to locate and construct a one time only domestic well within the below described area of the Servient Tenement.

LOCATION

4. The easement granted herein is located as follows:

"In order for Grantee to locate a well on the Servient Tenement, said easement shall commence at the Walnut Tree on the East side of the fence by the established known gate, thence 50 feet to the West, which is approximately 7 (seven) acres in length to the end of the property line of the Servient Tenement, and approximately 378.85 feet wide. However, once said well is located and constructed as per the easement granted herein, Grantee use of the property shall be limited to 5' (five feet) along the east fence until 90 (ninety) degree angle to the well."

NON-EXCLUSIVENESS OF EASEMENT

5. The easement granted herein is not exclusive. The Servient Tenement owner has the right to access and use that portion of the property granted in this easement, and may grant other easements, rights of way, and/or licenses to third parties as long as there is no interference with the Dominant Tenement's owner's use of the property granted in this easement.

SECONDARY EASEMENTS

6. The easement granted herein includes rights of maintenance, repair and replacement, described as follows:

a. The Grantee shall be solely responsible for all costs incurred in locating and establishing a well on the Servient Tenement.

b. The Grantee shall be solely responsible for all costs incurred in repairing the well and in repairing and/or replacing any and all underground lines.

c. The Grantee shall be solely responsible for all maintenance costs incurred in as a result of locating a well and underground lines on the Servient Tenement.

d. The Grantee shall be solely responsible for returning the Servient Tenement back to its original condition after construction of the well and all underground lines.

e. The Grantors shall allow Grantee as many test holes as necessary to secure the well, provided however, that after each attempt the property is returned to its original condition.

f. The Grantee shall give 24 (twenty-four) hour notice to the Grantors of its intent to either dig test holes or construct the actual well.

g. All rights of ingress and egress onto the Servient Tenement shall be by permission of the Grantors only provided, however, that Grantors agree not to withhold said consent unreasonably.

h. The Grantee shall not bring any vehicle of any type onto

the Servient Tenement without prior notification of the Grantor.
1. The Grantee shall protect said well and casing from any damage due to livestock, vehicles etc. and shall be solely responsible for any costs incurred thereof.

ADDITIONAL PROVISIONS

7. In an effort to clarify the important aspects of the relationship between Grantors and Grantee, the parties hereby agree as follows:

1. The Grantors and Grantee agree to maintain a cooperative relationship with reference to the use of property granted by this easement herein.
2. Grantee shall erect and maintain a pressure tank to suit on the Servient Tenement.
3. Grantee agrees not to construct a well house on the Servient Tenement.
4. Grantee shall not erect a well casing higher than 12 (twelve) inches above ground.
5. Grantee shall provide all equipment and materials necessary to locate and construct one domestic well.
6. Grantee shall give Grantors 24 hour notice of its intent to dig test holes or construct the well.
7. Grantee shall not enter any portion of the Servient Tenement without first acquiring the permission of the Grantors.
8. Grantee shall not bring any motorized vehicle of any type onto the Servient Tenement without first notifying the Grantors.
9. Grantee agrees to locate and construct one domestic well only.
10. Grantee shall use the well for domestic purposes only and is strictly prohibited from using said well for any other purpose including, but not limited to, irrigation.
11. Grantors shall not be liable for personal or property damage, injury, or loss sustained by Grantee, or any person claiming through Grantee, as a result of any accident or occurrence, relating to the use of the easement. In addition, Grantors will be held free from all liens, bonds and assessments pertaining to and resulting from the Grantors' use of the easement granted herein.
12. Grantors agree not to in any way block or fence off the aforedescribed easement area.

ENTIRE AGREEMENT

8. This instrument contains the entire Agreement between the parties relating to the rights herein granted and the obligations herein assumed. Any oral representations or modifications concerning this instrument shall be of no force and effect excepting a subsequent modification in writing, signed by the party to be charged.

ATTORNEY'S FEES

9. In the event of a controversy, claim, or dispute relating to this instrument or the breach thereof, the prevailing party shall be entitled to recover from the losing party reasonable expenses, attorney's fees and costs.

BINDING EFFECT

10. This instrument shall bind and inure to the benefit of the respective heirs, personal representatives, successors, and assigns of the parties hereto.

IN WITNESS WHEREOF, the parties hereto have executed this instrument the day and year first written above.

GRANTORS

Gary Applegate

GARY APPELEGATE

Carol Applegate

CAROL APPELEGATE
P.O. Box 384
Morgan Hill, CA. 95037

GRANTEE

[Signature]

DEPARTMENT OF VETERANS' AFFAIRS
1175 East Main St., Suite 2B
Medford, Oregon 97504

87-05981

ACKNOWLEDGEMENT

State of California)

ss

County of Santa Clara)

On this 26 day of January, in the year 1987,
before me, Janet S. Thoen, a notary
public, personally appeared

Carol Applegate
Carol Applegate, proved to me on the basis of
satisfactory evidence to be the persons whose names are
subscribed to this instrument, and acknowledged that they
executed it.



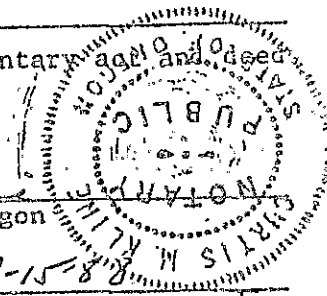
Janet S. Thoen

STATE OF OREGON)
COUNTY OF JACKSON) ss

February 23, 1987

Personally appeared the above named Boyd Westerson
and acknowledge the attached instrument to be his voluntary

Curtis M. Kline
Notary Public for Oregon



My commission expires 3-15-88

6

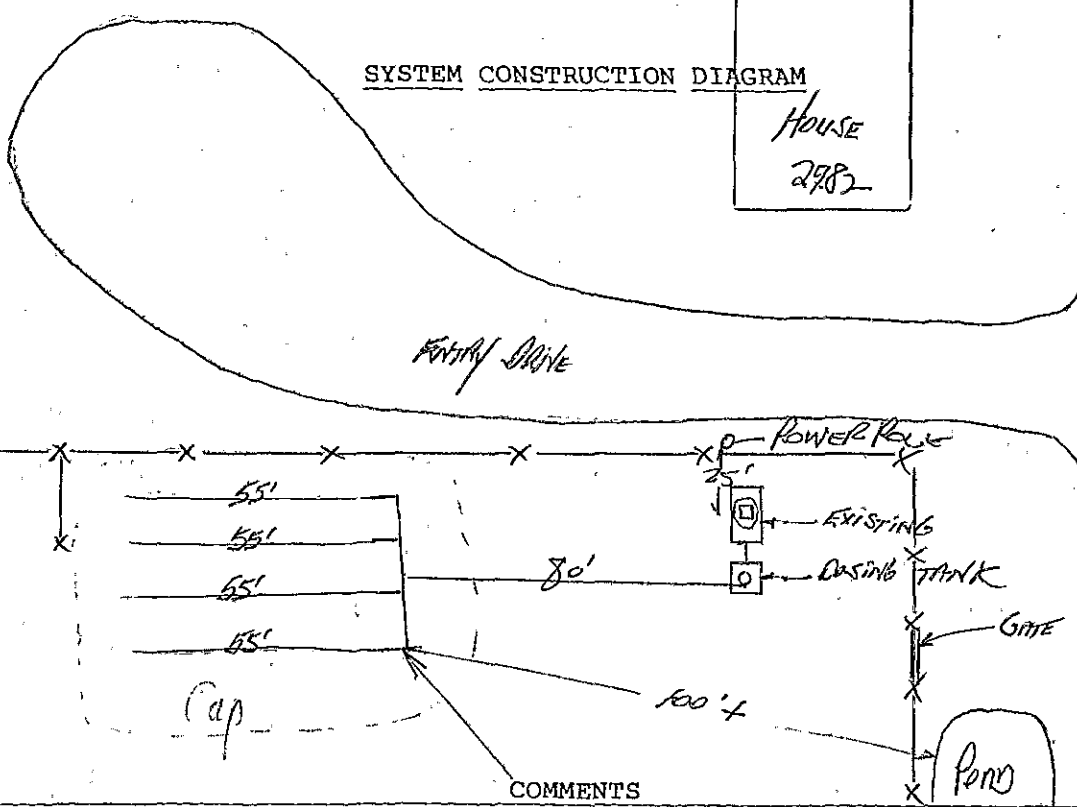
SYSTEM CONSTRUCTION REPORT

Permit # 15-169-862

Name GARY & CAROL Applegate Twp 37 R. 2W S. 4 T.L. 2600 System Type Low Pressure
 Address (Location) 2982 Taylor Rd., Central Point Oregon Capping Fill

<u>Tanks and Sewer Lines</u>		<u>INSPECTED</u> <u>JUNE 12, 1986</u> <u>Drainfield</u>		<u>Curtain Drain/V-Ditch</u>	
Effluent Sewer	Trench Width <u>24"</u>	Staking	Total Depth		
Pressure Transport Pipe <u>80' 2" 160 p.s.f.</u>	Trench Depth <u>12"</u>		Rock Depth		
Septic Tank Size & Manuf. <u>EXISTING</u>	Gravel Depth <u>12"</u>		Visqueen		
Dosing Tank Size & Manuf. <u>See Call David</u>	Distance Between Lines <u>10' 0"</u>		Screen		
Fittings, Materials & Connections <u>O.K.</u>	Lines Level <u>O.K.</u>	End Caps <u>O.K.</u>	V-Ditch		
Tank to House <u>EXISTING</u>	Overflows <u>N/A</u>	Undisturbed Earth <u>O.K.</u>	Berm		
Riser(s) <u>yes</u>	Total Lineal Feet <u>220</u>	Distance to Well <u>240'</u>			
	Approved Square Footage <u>4400</u>				

<u>ETA</u>	<u>Sand Filter/Trench</u>	<u>Tile Dewatering</u>	<u>Pump Systems</u>
Bed Check	Staking	Staking Check	Type & H.P. <u>1/2 hp Hydro</u>
Gravel & Pipe	Pressure Test	Drnfd Trnchs	Floats: <u>Single</u> Double
Cap Depth	Discharge Height	Drn Trnch Check	Chk Valve <u>Not</u> siphon
V-Dtch/Curtn Drn	Filter Fabric	Rck & Pipe in Drn Trnch	Safety Line <u>yes</u>
	Sand Depth	Cleanout	Quick Disconnect <u>yes</u>
	Backfill	Flapgate & Sch 80 Outlet Pipe	Pump off Floor <u>yes</u>
		Backfill	Alarm <u>O.K.</u>
<u>Capping Fill</u>			Electrical Permit
Scarified Surface <u>O.K. 67' x 86'</u>	<u>Low Pressure Distribution</u>		Gate Valve <u>no</u>
Staking			Screened Enclosure <u>yes</u>
Cap Depth <u>18"</u>	Staking		
V-Dtch/Curtn Drn	Pressure Test		
	Discharge Height		
	Filter Fabric		



COMMENTS

Corrections Notice Issued 240' TO WELL

CERTIFICATE OF SATISFACTORY COMPLETION

In accordance with Oregon Revised Statute 454.665, this certificate is issued as evidence of satisfactory completion of a subsurface or alternative sewage disposal system at the above location.

Charles S. Henke
Sanitarian

June 27, 1986 Date Jackson County

REQUEST FOR INSPECTION

0

Date Requested _____ Date Reported 6/23

Permit Number 15-169-86R When Available
Owner J J

Contractor Dyer Bros. 8982 Taylor Rd.

Inspection Type Pressure Test Job Site _____

TWP 37 Row S 4 TL 2600

Note: _____

REQUEST FOR INSPECTION

6/25
Date Requested 6/25 Date Reported
15-169-86R Harry Applewhite
Permit Number Owner
Dyer Bros 2982 Taylor Rd.
Contractor Central Pln.
Normal Job Site
Inspection Site

TMP37 ROWS 4 TL2600

Note: _____

LOW PRESSURE DISTRIBUTION SEWAGE DISPOSAL SYSTEM
INSTALLATION NARRATIVE

Applicant: Gary and Carol Applegate

Permit # 15-169-86R

Twp. 37 Range 2W Section 4 Tax Lot 2600

IMPORTANT NOTE: If problems are anticipated during system layout or are encountered at any stage of installation, please call Jackson County Planning Department, Sanitation Division (776-7554) for assistance on how to proceed.

For persons unfamiliar with the installation of septic systems, installation handouts are available from the Jackson County Planning Department to help you.

If this system, or any part thereof, is installed by any person other than the property owner or a regular employee of the property owner, that person must be licensed to do such work by the state Department of Environmental Quality. Be sure to use approved materials in all construction. A list is available at this office.

I. GENERAL PERMIT CONDITIONS:

A) This alternative sewage disposal system is designed to serve no more than one single family dwelling with a maximum of two (2) bedrooms. The maximum daily sewage flow shall not exceed 300 gallons.

B) The drainfield portion of this system must be installed during dry weather conditions and when soil moisture content is relatively dry. Approval of soil moisture conditions by a Jackson County Department of Planning and Development sanitarian must be obtained before beginning drainfield excavation.

C) Issuance of this permit does not relieve the applicant of the responsibility of complying with all applicable local, state, and federal regulations regarding development of this property.

D) This installation permit is valid for one year from date of issue and is not transferable.

*E) Before beginning construction, the installer of this system must meet with a Jackson County Department of Planning and Development sanitarian or soil scientist to discuss installation details.

F) Unless otherwise noted herein, all provisions of Oregon Administrative Rules, Chapter 340, 71-100 through 73-085 and Appendices must be met.

G) The septic tank, dosing tank, effluent sewer lines, and drainfield must be installed in the locations indicated on the attached plot plan. Any change in the location of any of these components must be approved by this office prior to construction.

H) A Certificate of Satisfactory Completion, issued by the Jackson County Department of Planning and Development, is required before the system is used and will be issued only if all conditions of this permit are met.

II. SEPTIC TANK:

A) The liquid capacity of the septic tank shall be at least one thousand (1,000) gallons; a twelve hundred fifty (1,250) gallon septic tank is recommended. The tank must be placed level on a solid base (not fill). The existing septic tank may be used as a primary septic tank only. This office recommends a new 1,000 gallon dosing septic tank with the appropriate vault to house the pump.

B) The septic tank must be located outside of the approved "Usable Area". The minimum separation distance between the septic tank and the building foundation is five (5) feet. The septic tank should be installed as close to this minimum separation distance as possible in order to minimize opportunity for clogging of the building sewer.

C) If the septic tank is installed deeper than eighteen (18) inches under the surface, it must have a lidded eighteen (18) inch or greater diameter watertight riser located over the inlet tee and the access manhole. Risers must extend to the finish ground surface and be provided with weighted or securely fastened lids. The ground surface must slope away from the top of each riser access lid to prevent water from entering the septic tank.

D) On sites where a high groundwater table is encountered, the septic tank and/or dosing tank must be weighted or provided with an antibuoyancy device to prevent flotation.

III. DOSING TANK SPECIFICATIONS:

A) The minimum liquid capacity of the dosing tank must be four hundred fifty (450) gallons. The liquid capacity of the tank is measured from the invert of the inlet to the tank bottom.

B) The dosing tank must have a liquid storage capacity of at least one hundred twenty-five (125) gallons between the alarm level and the inlet pipe invert.

C) The dosing tank must be provided with a lidded, watertight, eighteen (18) inch or greater diameter riser which extends to the finish ground surface. The ground surface must slope away from the top of the riser access lid to prevent water from entering the tank. The riser must be provided with a weighted or securely fastened lid.

D) The effluent sewer line between the septic tank and the dosing tank must be of approved three (3) or four (4) inch diameter sewer pipe only.

E) A two-compartment, 1,500 gallon "pumping" tank may be utilized to satisfy both the septic tank and dosing tank requirements of this permit.

F) On sites where a high groundwater table is encountered, the septic tank and/or dosing tank must be weighted or provided with an antibuoyancy device to prevent flotation.

G) The septic tank and the dosing tank must be vented through the house plumbing system.

IV. PUMPS OR DOSING SIPHONS, CONTROLS, AND ALARMS:

A) A dosing siphon may be used instead of a pump to pressurize the system. We recommend checking with the siphon dealer as to proper installation procedures and minimum fall requirements. The dosing siphon must be a type approved for use in Oregon. The siphon must produce a vertical rise of three (3) to five (5) feet during the pressure test.

B) Pumps, controls, and alarms used in this system must comply with Oregon's electrical code and must be installed in accordance with the provisions of an electrical permit issued by the State Department of Commerce.

C) Installation of pumps, controls, and alarms shall also meet the provisions of Oregon Administrative Rules, Chapter 340, 73-055, AND the following minimum requirements:

Submersible pumps shall be provided with an easy, readily accessible means of electrical and plumbing disconnect and a non-corrosive lifting device as a means of removal for servicing.

A gate valve shall be provided inside the dosing tank between the quick disconnect and the exit of the tank if the system is upslope of the dosing tank. A one way check valve shall be provided between the pump and the quick disconnect fitting if the system is located upslope of the dosing tank.

If the system is located downslope of the dosing tank, a one-eighth (1/8) inch minimum antisiphon hole shall be located in the pressure line above the high water level of the dosing tank.

Pumps shall be capable of passing a three-quarter (3/4) inch solid sphere, and have a minimum one and one-quarter (1 1/4) inch discharge. Pumps must be placed a minimum of six (6) inches above the dosing tank bottom.

Pumps must be automatically controlled by sealed mercury switches with a minimum mercury tube rating of twelve (12) amps at one hundred fifteen (115) VAC. The mercury float switch pump controls shall be set to provide a pumping volume of ninety (90) gallons (12 cubic feet) per cycle. The pump shall be placed within a corrosion-resistant screen that extends above the maximum effluent level within the pump chamber. The screen shall have at least twelve (12) square feet of surface area, with one-eighth (1/8) inch openings.

An audible, waterproof high level alarm with manual silence switch shall be located near the building served by this system. Alarm and pump controls must be on separate circuits. If the alarm is located inside a building, it must be an audio-visual type with silence switch. The mercury float switch regulating the high water level alarm must be located at least five (5) inches above the "on" level.

The pump must be capable of producing five (5) feet of vertical head during the pressure test.

V. PRESSURE DISTRIBUTION PIPING:

A) All fittings and pressure piping between the dosing tank and the laterals must be a minimum of Class 160 PVC 1120 and have a minimum inside diameter of two (2) inches. This piping must be installed below the frost line, be bedded in three (3) inches of sand or pea gravel, and be uniformly supported along the trench bottom. Backfill must be free of large rock or material which will damage the piping.

B) The pressure piping within the drainfield itself must be at least 160 psi PVC piping meeting ASTM D 2241. Joint cement compounds must conform to ASTM D 2564.

C) Pressure piping within the drainfield must be installed as shown in the enclosed diagrams. Holes perforating the pressure distribution laterals must be one-eighth (1/8) inch diameter and uniformly spaced as shown in the enclosed diagrams. Pressure distribution manifold piping must be two (2) inches in diameter; pressure distribution lateral piping must be two (2) inches in diameter and must be placed with drilled holes facing up.

VI. DRAINFIELD SPECIFICATIONS:

A) The drainfield must consist of not less than 200 lineal feet of low pressure disposal trench.

B) Trenches are to be installed level in a standard serial system design with trench depths held to 12 inches. Contouring the disposal trenches with the contour of the slopes may be necessary to maintain uniform depths.

C) Six (6) inches of clean, washed crushed rock (1 1/2" to 2 1/2") or gravel (3/4" to 2 1/2" diameter) must be placed under the lateral piping. An additional six (6) inches must be placed after pressure testing inspection, making a total of 12 inches of rock.

D) The drainfield must be installed within the "Usable Area" designated on the attached site evaluation worksheet dated May 23, 1986. Reserve one-half of the "Useable Area" for future repair drainfield installation.

E) The entire drainfield and any other areas disturbed as a result of construction must be liberally fertilized and seeded with high water use grasses such as alta fescue, orchard grass, and tall wheat-grass.

F) The site of the drainfield installation must be kept vacant, free of all development, soil modification, compaction, traffic, heavy cultivation, fenced from all livestock, or any other activity which would damage the system.

VII. SOIL CAP SPECIFICATIONS:

A) The texture of the soil used for the cap shall be sandy loam/light sandy clay loam. Topsoil native to the property at a site removed from the drainfield installation area may be used as the capping material. *The capping soil must be examined and approved by this office prior to placement.

B) After the trench construction, site scarification, and fill material have been inspected and approved, apply 18 inches of unsettled fill material over the site and work in (rototill) so that the native soil and fill are well mixed. The fill should be crowned in the middle and smoothed (not compacted) to prevent ponding. There shall be a minimum of ten (10) feet of separation between the edge of the fill and the nearest trench sidewall. Call for an inspection at this point.

VIII. INSPECTION SCHEDULE:

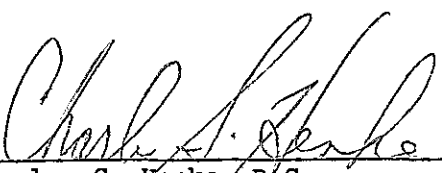
A) The Sanitation Division shall be notified to make construction inspections at the following points:

- 1) After septic tank, dosing tank, and disposal trenches have been staked out, but before construction begins.
- 2) After the septic tank, dosing tank, pump, alarm, float switches, pressure transport piping, and effluent sewer line between the dosing tank and septic tank have been installed, but before they are backfilled.
- 3) After the drainfield trenches have been excavated, and the gravel, and pressure distribution pipe have been placed in the trenches, but before placing the rock over the pressure piping.

NOTE: Water and power must be available on the site during this inspection. This is to allow the electrical and mechanical systems to be evaluated under actual working conditions. The system must produce a vertical rise of water three (3) to five (5) feet high out of the one-eighth (1/8) inch holes in the pressure laterals.

4) After the remaining six (6) inches of drainfield gravel have been placed over the pressure piping and covered with filter fabric.

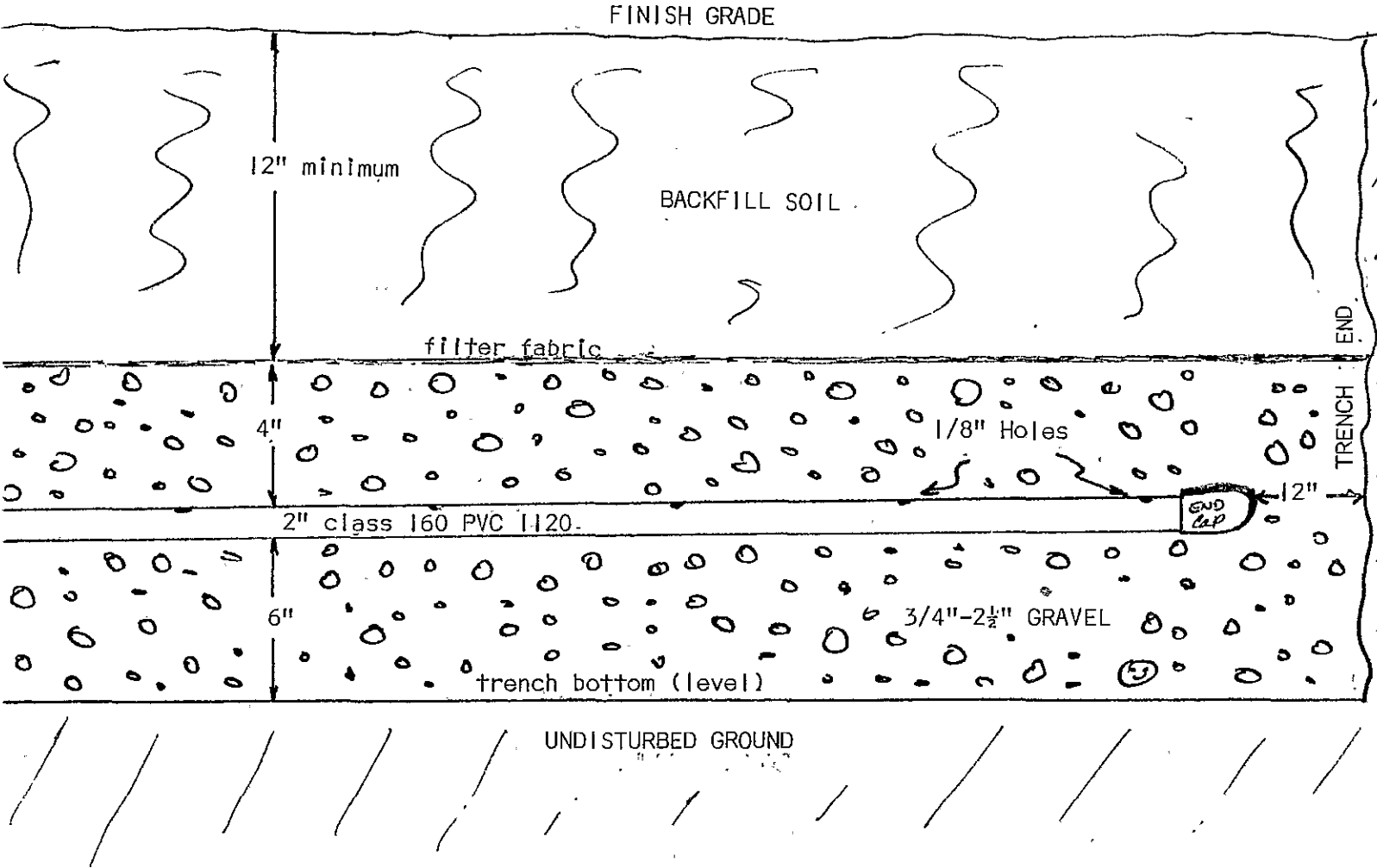
This permit letter, the enclosed diagrams and permit placard constitute a permit for construction.



Charles S. Henke, R.S.
County Sanitarian
June 5, 1986

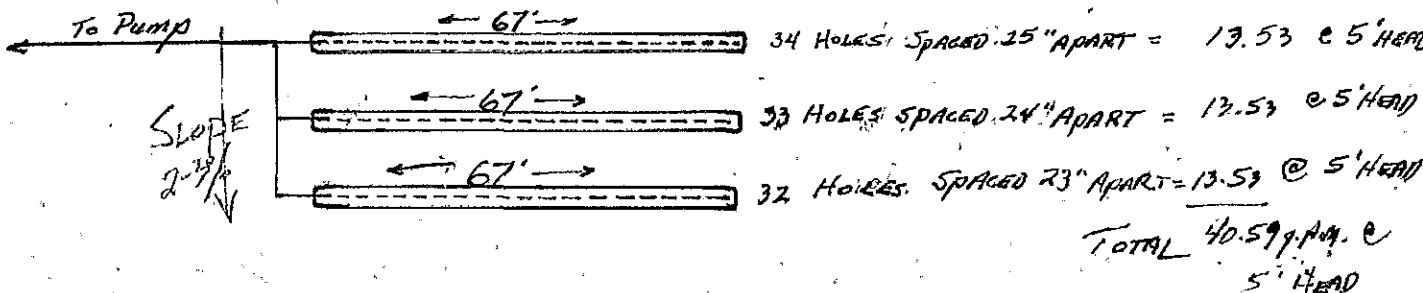
PRESSURE DISTRIBUTION SYSTEMS

DIAGRAM



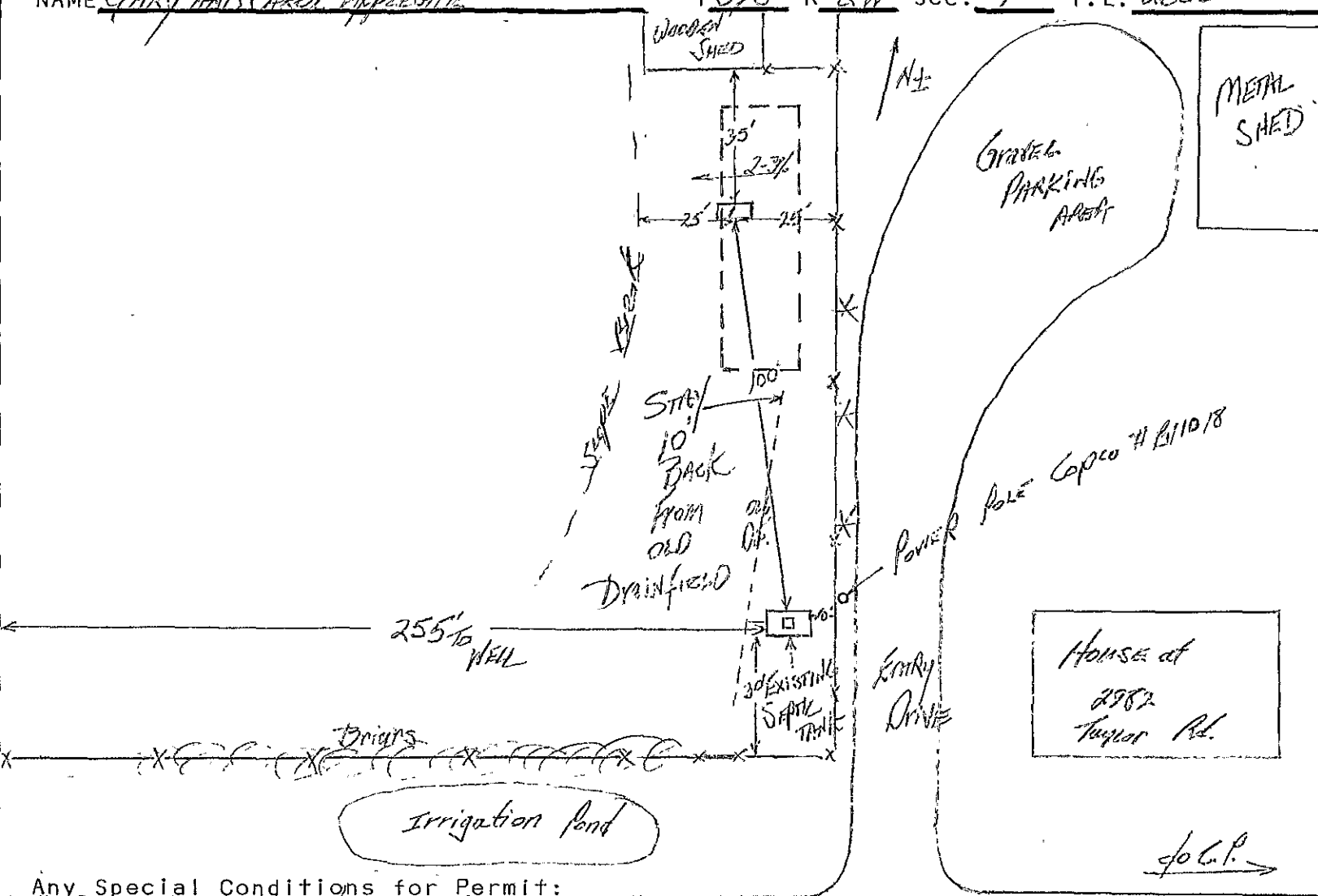
TRENCH DETAIL-SIDEVIEW (TYPICAL BOTH ENDS OF ALL LINES)

HOLE SPACING AND SIZE WILL VARY FOR EACH SITE (SEE PERMIT SPECIFICATIONS)



11/82

NAME GARY AND CAROL APPLEGATE T 375 R 2W Sec. 4 T.L. 2600



Any Special Conditions for Permit:

Position Taylor Road Scale 300 Gal/day. Low Pressure Capping fill
 Ft. Slope SMOOTHER Undft. 1" = 40'
 Side Slope Lo-Terrace Hmky. SURVEIL DESIGN 100 Lin. feet / 150 G.P.D. = 200 Lin.
 Top Btm Concave Convex FEET TOTAL 12" TRENCH DEPTH W/ 18" CAP NATIVE
 Fan Other

Depth	Texture	Structure	Pores	Mottling	Notes: (‰ Frags., Roofing, Depth, R or I, etc.)	Water Table
P 0-4	lt. SL	Wk Mod St SG Bk Grn Ply Mas	Few Com Mny dis F Med Co con	Faint "		Depth 28 Type- P TP Slope % Up Down 2-3%
t 4-16	SL	Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
# 16-38	SL (ls)	Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
1 38-50	Co. lt. SL	Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
P		Wk Mod St SG Bk Grn Ply Mas	Few Com Mny dis F Med Co con	Faint "		Water Table Depth Type- P TP Slope % Up Down
t		Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
#		Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
2		Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
P		Wk Mod St SG Bk Grn Ply Mas	Few Com Mny dis F Med Co con	Faint "		Water Table Depth Type- P TP Slope % Up Down
t		Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
#		Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
3		Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
P		Wk Mod St SG Bk Grn Ply Mas	Few Com Mny dis F Med Co con	Faint "		Water Table Depth Type- P TP Slope % Up Down
t		Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
#		Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		
4		Wk Mod St SG Bk Pri Ply Mas	Few Com Mny dis F Med Co con	Faint "		

Additional Notes: Existing septic tank appears to be cast in place concrete - APPROXIMATELY 1000 GAL. CAPACITY and in functional condition. A 500 gallon dosing tank connected in series with the primary existing septic tank. I recommend a new 1000 gallon dosing septic tank be considered.

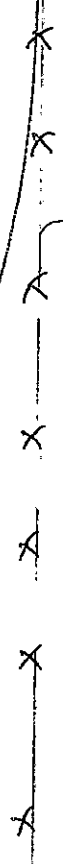
SITE SUITABILITY: REPAIR 1 CAP'n FIL. -> Low Pressure USEABLE AREA: 20' up & 70' across
 Site Evaluation By: R. Henke Date: May 23, 1986

Abbreviations
 Lt. - light C - clay W - weathered Seds - Sedimentary
 H - heavy L - loam Rx - Rocks HW - Highly Weathered
 F - fine P - pebbles (2mm.-3") Sub - Substrata DG - Decomposing Granite
 Co. - coarse K - cobbles (3"-10") Vol - Volcanic RDM - Rapidly Draining material
 S - sand(y) St. - stones (+10") Meta - Metamorphic
 Si. - silt(y) V - very
 THIS OFFICE RECOMMENDS A Sand Filter System to pre-filter water before it enters the water table
 Copies: Yes No

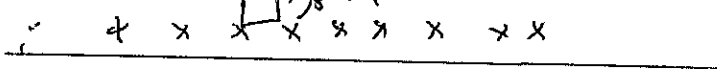
37-2W-4-2600

Taylor Rd

Creek



Existing
Septic
Tank



Driveway

Shower
9982

W

5-15-86

Jackson County Planning.

This Note will Authorize
Ray Jones To Act as my Agent
in an effort To conform my
Defective Drain Field Toward
Our County inspection Codes.

Your Consideration is Appreciated,
Please Feel Free To Contact
me Any Time.

Respectfully
Ray Jones
Owner

P.O. Box 384
Morgan Hill Ca.
95037

No file



DEPARTMENT OF PLANNING & DEVELOPMENT

ZONING CLEARANCE SHEET

This clearance sheet provides a Planning staff analysis of your property and development plans, and their relationship to the Jackson County Land Development Ordinance. Land development regulations and your property development plans are both subject to change. When such change does occur, it may invalidate this zoning clearance or otherwise alter conditions of approval.

PROPERTY DESCRIPTION: Township 37, Range 2W, Section 4, Tax Lot 2600, Acres 15.53

PROPERTY ADDRESS: 2982 TAYLOR RD DATE TAX LOT CREATED: PRE-EXISTING

OWNER OR APPLICANT: GARY APPLIGATE TELEPHONE: _____ ADDRESS: _____

PROPOSAL: First Dwelling Additional Dwelling Other - Explain REPAIR PERMIT

PROPERTY IS ZONED: EFU MINIMUM PARCEL AREA: _____

Development on this land is subject to Mandatory Fire Safety Requirements as described in Chapter 280.100 of the Jackson County Land Development Ordinance. Fuelbreak requirements may affect setbacks.

MINIMUM STRUCTURAL SETBACK FROM PROPERTY LINES: Front 30, Side 30, Rear 20

This property lies in a NONRESOURCE zoning district and abuts a RESOURCE zoning district. Special setbacks are required unless an exception is approved by staff.

BEFORE ZONING CLEARANCE CAN BE GIVEN FOR THE ABOVE PROPOSAL, THE OWNER/APPLICANT MUST APPLY FOR AND RECEIVE APPROVAL OF:

- Minor Partition
- Forest Site Plan Review
- Nonforest Site Plan Review
- Commercial Site Plan Review
- Variance
- Alteration of Nonconforming Use
- Major Partition
- Farm/Nonfarm Dwelling
- County Recognized Access
- Administrative Review for Structures in a Floodplain
- Administrative Review for Airport Approach/Concern Area
- Subdivision
- Conditional Use Permit
- Temporary Mobile Home
- Areas of Special Concern Specify _____
- Other - See Below

COMMENTS BY STAFF: HOUSE BUILT IN 1958 WITH 1200⁴
OK FOR REPAIR PERMIT.

NO CONFLICTS EXIST. The proposed use or development as presented herein is in conformance with the Land Development Ordinance. Falsification of information renders this zoning clearance null and void.

CERTIFICATION: The information I have provided for this zoning clearance is, to the best of my knowledge, true, accurate and complete. I also understand that any changes in my plans or county regulations may render this clearance sheet invalid.

Signature of owner/applicant: _____ Date: _____

Signature of staff member: Richard H. Jewell Date: 5-20-86

Copy of this zoning clearance handgiven mailed to applicant on: 5-20-86