

Certificate of Satisfactory Completion

Installation Permit - Residential - New

463-22-000360-PRMT

Josephine Onsite Septic Program 700 NW Dimmick Street Suite A

> Grants Pass, OR 97526 541-474-5444

> > N/A

N/A

Fax: 541-474-5422 onsiteseptic@josephinecounty.gov

Website: josephine.or.us

Date Certificate Issued: 09/22/2022
Work Description: New septic system

Applicant: I.V. Excavating LLC

Address: PO Box 204

Cave Junction OR 97523

Phone: 5416601798

Owner:

Max Depth:

Min Depth:

Email: epodollll@frontiernet.net

MILLER, ADAM &

Address: MILLER, KAYLA 625 MESA

VERDE DR MILLER, KAYLA 625 MESA VERDE DR CAVE JUNCTION OR 97523

Parcel: 4008040000021300 - Primary

Email: epodollll@frontiernet.net

Address:

Phone:

Property Address: 544 Mesa Verde Dr, Cave Junction,

Cave Junction OR 97523

Contractor: I.V. Excavating LLC Installer License: 38491

P.O. Box 204

(541) 597-2485

OR 97523

 Lot Size:
 5 Acres
 Water Supply:
 Well

 Zoning:
 N/A
 City/County/UGB:
 N/A

Land Use Approval: N/A

Directions to Property: From HWY 199 turn Left on to Ken Rose Lane, Follow Ken Rose Lane to the end, Sharp right will turn

into Cascade. Follow Cascade and sharp left will turn into Mesa Verde. Follow Mesa Verde to 500

block, property will be on the left hand side. 544 Mesa Verde.

Category of Construction: Single Family Dwelling

	Existing		Proposed
Use of Structure:	N/A		New House
Number of Bedrooms:	N/A		6
System Specifications			
Type:	Standard		
Max Peak Design Flow:	600 gpd.	Proposed Flow:	600 gpd.
Min Septic Tank Volume:	1500 gal.	Min Dosing Tank Volume:	N/A
Drain Field Specifications			
Drain Field Type:	Standard	System Distribution Type:	Equal
Media Type:	Rock/Pipe	Media Depth:	N/A
Trench Length:	400 linear ft.	Rock Above Pipe:	2 in.
Total Rock Depth:	12 in.	Rock Below Pipe:	6 in.

Undisturbed Soil BetweenTrenches:

Capping Fills-Min Depth of Fill Material:

30 in.

24 in.

9/22/22: 9:06:43AM ONS_OnsiteCSC_pr

Date Certificate Issued: 09/22/2022
Work Description: New septic system

Conditions of Approval

- A pre-cover inspection of the installed absorption facility (prior to backfill) is required.
- A final inspection request and notice (FIRN) form including a detailed and accurate as-built plan of the constructed system and a list of all materials used in the construction of the system must be completed and submitted prior to requesting a final inspection.
- The system must be installed by the property owner or a licensed sewage disposal business (installer).
- Vehicular traffic and livestock must be restricted from the system area.
- · All roof drains must be directed away from the system
- All tanks must be tested for watertightness and have a water-tight riser to the ground surface. Twenty- inch minimum diameter if less than 36-in deep. Thirty-inch minimum diameter if greater than 36-in deep. Maintain access to septic tank for pumping and service.
- · Meet all required setbacks
- The system must be installed in the area approved during the site evaluation and in accordance with the construction plan approved by the agent, including any changes made by the agent.
- All work is to conform to OAR 340, Division 71 and 73. Make no changes in system location or specifications without approval by the agent.
- For product approval information and manufacturer installation requirements see DEQ website at: http://www.oregon.gov/deq/Residential/Pages/Onsite.aspx
- A minimum 18-gauge, green-jacketed tracer wire or green color-coded metallic tape must be placed on top of the effluent sewer or pressure transport pipe from tank to drainfield.
- Effluent sewer. The effluent sewer must extend at least 5 feet beyond the septic tank before connecting to the distribution unit. It must be installed with a minimum fall of 4 inches per 100 feet and at least 2 inches of fall from one end of the pipe to the other. In addition, there must be a minimum difference of 8 inches between the invert of the septic tank outlet and either the invert of the header to the distribution pipe of the highest lateral in a serial distribution field or the invert of the header pipe to the distribution pipes of an equal distribution absorption field.
- Header pipe from Distribution or Drop Box must be minimum 4-ft length, level, and bedded.
- Each drainfield trench must be level within a tolerance of plus or minus 1-inch.
- Maximum length of an individual trench is 150-feet.
- Serial distribution, each trench bottom to be level and on contour. Use Drop box(es).

Date Certificate Issued: 09/22/2022
Work Description: New septic system

Installation of this onsite wastewater treatment system has been determined to comply with the applicable requirements in Oregon Administrative Rules Chapter 340, Divisions 071 and 073 and the Conditions of Approval above.

- 1. In accordance with Oregon Revised Statute 454,665, this Certificate of Satisfactory Completion is issued as evidence of satisfactory completion of an onsite wastewater treatment system at the location identified above.
- 2. Issuance of this Certificate does not constitute a warranty or guarantee that this onsite wastewater treatment system will function indefinitely without failure. Conditions imposed as permit requirements continue for the life of the system.
- 3. The area of the initial and the identified replacement area must not be subjected to activity that is likely to adversely affect the soil or the functioning of the system. Such activities may include, but are not limited to, vehicular traffic, livestock, covering the area with asphalt or concrete, filling, cutting, or other soil modification activities.
- 4. This onsite wastewater treatment system that be connected to the facility referenced herein within 5 years of the issuance of this Certificate of Satisfactory Completion (CSC) or rules for authorization notices, alteration permits, or construction-installation permits as outlined in OAR 340-071-0160, 340-071-0205, or 340-071-0210 apply, including payment of an additional fee.
- 5. This system must operate in compliance with OAR Chapter 340, Division 071 and must not create a public health hazard or pollute public waters.
- 6. Unless otherwise required by the agent, the system installer must backfill (cover) this system within 10 days after the issuance of this Certificate of Satisfactory Completion.

Certificate of Satisfactory Completion

System Inspection: No Operation of Law - 7 Days Notice: No Pre-Cover Inspection Waived Per 340-071: No

Comments: 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.)

ONS OnsiteCSC pr

Final Inspection Request and Notice - Septic ID: 463-22-000360-PRMT

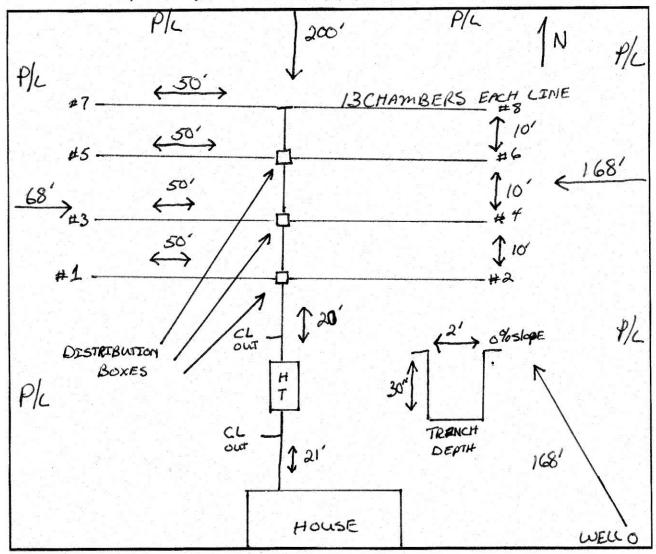
Pursuant to the requirements within ORS 454.665, OAR 340-071-0170 and OAR 340-071-0175, the system installer and/or the permittee must notify the Department of Environmental Quality (or its authorized Agent) when the construction, alteration or repair of a system for which a permit was issued is completed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

SECTION 1: Owner/	<u>Permittee Inf</u>	ormation	<u>:</u>		Twns	hp: Range:	Sect:
Name: MILLER,	ADAM &				Lot:		
Property 544 MESA Address:	A VERDE DR, (CAVE JUNG	CTION, OR	97523			
SECTION 2: System A. Tanks/Pumps	n Compone		Sys	tem Type:			Water tight verification*
Tanks(1) Volume:	1500	Compartm	ents:Szne	Manufacturer	RT	UERSIPE	Date9 14 2
Tanks(2) Volume:	000	Compartm	ents:	Manufacturer			Date:
Pump(s) HP: N	lodel/Manuf.			Float(s)Type	(1):	Model/Manuf.	
			7 July 2	Float(s)Type	(2):	Model/Manuf.	
B. Piping			-				
Effluent Sewer (tank to drainfie	Id) Yes/	No [Diameter: 4//	ASTM	#/Other: SDR 35	Length: 201
	re Transport Pi	_~		Diameter:		#/Other:	Length:
C. Secondary Treatment							
Sand Filter**		Type:				Container Dimension	nne'
Underdrain pipe			##/Other:			Toomanor Dimension	Length:
Manifold piping			/#/Other:		-		Length::
Internal Pump			/Manufactu	rer			[-0.1gun.
Floats(1)			/Manufactu				
Floats(2)			/Manufactu				
	Yes No	Model	:				
Certified Maint.	Provider Name	1000000					
Operation and Maint.	Contract Recei	ved? Yes	No				
D. Drainfield Media	(Gravel, Pipe of	alternative	3)				
Type Distribution Box	V 4 101		TOTAL	PolyLock	CHI	AMBERS/10	4 PIECES
	Yés No	-3'	OIAC	וסוץ ששנ			
Drop Box Distribution Pipe	Yes No	Diamet	ter:	ASTM#/Other:			Length:
Distribution Pipe	Comment of the second						

^{*}All Tanks(s) were tested for water-tightness after installation and passed in accordance with OAR 340-073-0025(3)
**Attach sieve analysis for Underdrain Media and Filter Sand

SECTION 3 - As Built Plan

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

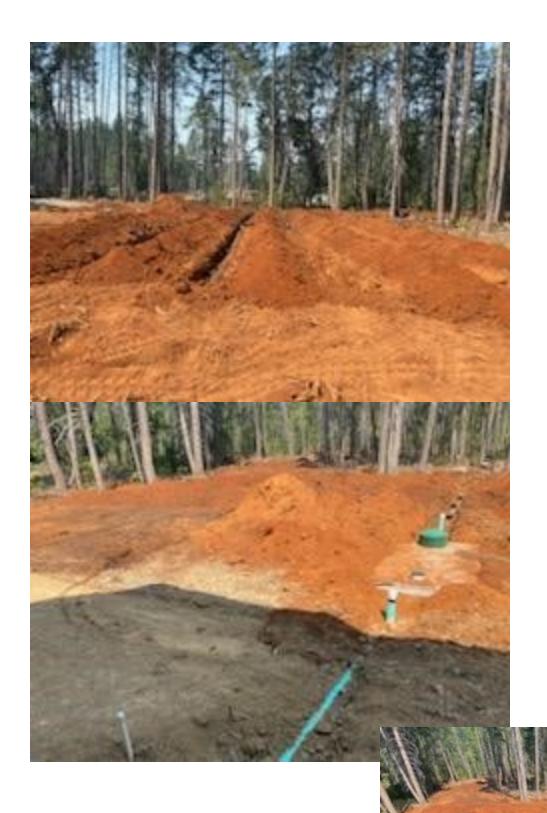


SECTION 4 - Construction was performed by (Signature Required)

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

Owner/Permittee or C	ertified	Installe	r w/Certification#:	Print Name:	U. EXCAL	PATIN	6 LU		
Licensed Installer: Y	es×	No	License#: 384	91		Certification#	RI	661	
Owner/ Certified S Installer:	ignature	Edi	vard m	. Podol	1II Pate: //	4/202	Phone 5	#1-660	-1798
SECTION 5 - Office	ce Use	Only:			Installer/Owner	20	18		
Notice Accepted Ye	es	No	Date:		(Permittee) Notified:	Yes	No	Date:	
If No, Reason for No Acceptance	Service Committee	8 ⁷ 8							
Comme	nt:								
	_								









Date issued: 8/17/22

Septic Permit Installation Permit - Residential - New

463-22-000360-PRMT

Josephine Onsite Septic Program 700 NW Dimmick Street

Suite A Grants Pass. OR 97526 541-474-5444

Fax: 541-474-5422 onsiteseptic@josephinecounty.gov

> Website: josephine.or.us Expiration date: 8/17/23

Work description: New septic system

Applicant: I.V. Excavating LLC Address:

PO Box 204

Cave Junction OR 97523

5416601798 Phone:

Email: epodollll@frontiernet.net

Business License: N/A

Owner: MILLER, ADAM &

Address: MILLER, KAYLA 625 MESA

> VERDE DR MILLER, KAYLA 625 MESA VERDE DR **CAVE JUNCTION OR 97523**

Parcel: 4008040000021300 - Primary

P.O. Box 204 Cave Junction OR 97523

(541) 597-2485 Phone:

Contractor: I.V. Excavating LLC

Installer License: 38491

Address:

epodollll@frontiernet.net Email:

Property address: 544 Mesa Verde Dr, Cave Junction, OR

97523

5 Acres Well Lot size: Water supply: N/A N/A Zoning: City/County/UGB: N/A N/A Land use approval: County: New Construction Permit - Residential Action: Type of application: System failing: N/A Septic tank last pumped: N/A

Comments: N/A

From HWY 199 turn Left on to Ken Rose Lane, Follow Ken Rose Lane to the end, Sharp right will turn into Directions to property:

Cascade. Follow Cascade and sharp left will turn into Mesa Verde. Follow Mesa Verde to 500 block,

property will be on the left hand side. 544 Mesa Verde.

Single Family Dwelling Category of construction:

	Existing	Proposed
Use of structure:	N/A	New House
Number of bedrooms:	N/A	6

System Specifications

Standard Type: ATT description: N/A 600 gpd. 600 gpd. Max peak design flow: Proposed flow: 1500 gal. N/A Min septic tank volume: Min dosing tank volume:

Drain Field Specifications

Drain field type: Standard System distribution Ttpe: Equal Rock/Pipe N/A Media type: Media depth: 400 linear ft. 2 in. Trench length: Rock above pipe: Total rock depth: 12 in. Rock below pipe: 6 in. 30 in. N/A Undisturbed soil between trenches: Max depth:

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.)

ONS_OnsitePermit_pr 8/17/22:10:10:49AM

Onsite Permit 463-22-000360-PRMT

Date issued: 8/17/22 Expiration date: 8/17/23
Work description: New septic system

Min depth: 24 in. Capping fills-min depth of fill material: N/A

Special Requirements

Stake out required: Yes

Conditions of approval

This Construction-Installation Permit authorizes the property owner to construct an onsite wastewater system specified above.

Rules, Approved Material Listing; and Database of Licensed Installers can be accessed at: http://www.deq.state.or.us/wq/onsite/onsite.htm

General Conditions And Requirements For All Permits: Onsite Construction-Installation Permits are valid for one year from the date of issuance. The expiration date is noted on this permit. Renewal of a permit may be granted if an application for permit renewal is received before the permit expiration date. Reinstatement of a permit may be granted if an application for permit reinstatement Is received within one year after the permit expiration date. Transfer of a permit from the permittee to another person may be granted if an application for permit transfer is received before the permit expiration date and no other changes to the permit are necessary.

Installation Requirements: The drainfield must be installed in undisturbed native soil. No alterations of the natural site conditions such as soil removal or filling, or slope/topography alterations within the approval areas for both the initial and replacement systems are allowed, unless otherwise authorized by the Agent. Do not install system when soil moisture, high groundwater, adverse weather, or other conditions that could affect the quality of installation or reliability of the system are present. If such conditions are present and there is a need for sewage disposal at the site, the septic tank can be utilized as a temporary holding tank as outlined in 340-071-0160(9).

Inspection Requirements: The system installer and/or the permit holder must notify the permitting Agent when the construction, alteration, or repair of a system for which a permit was issued is completed (except for the backfilling or covering of the installation). The permitting agent has 7 days to perform an inspection of the completed construction after the official notice date, unless the permitting agent elects to waive the inspection and authorizes the system to be backfilled earlier. Receipt and acceptance of a completed Final Inspection Request and Notice form by the permitting agent establishes the official notice date of your request for the final inspection. Faxed copies are acceptable for inspection request purposes only. Originals must be received before a Certificate of Satisfactory Completion can be issued.

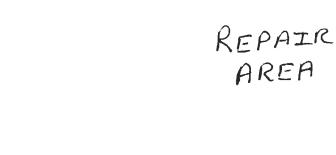
System Backfill Requirements: The system is to be backfilled or covered as follows: * Only after the permitting agent has approved the construction installation, * or the inspection has been waived * or the Certificate of Satisfactory Completion (CSC) has been issued by operation of law (where the inspection has not been conducted within 7 days of notification of completed installation).

Unless otherwise required, it is the system installer's responsibility to backfill the system within 10 days after inspection and issuance of the CSC. Backfill must be carefully placed to prevent damage to the system. The backfill must be free of large stones, frozen clumps of earth, masonry, stumps, waste construction materials, or other materials that could damage the system. Be sure that the untreated building paper, filter fabric, or other material approved by the agent is completely covering all drain media where required prior to backfill. The system can be connected to and placed into service once it has been properly backfilled and the CSC has been issued.

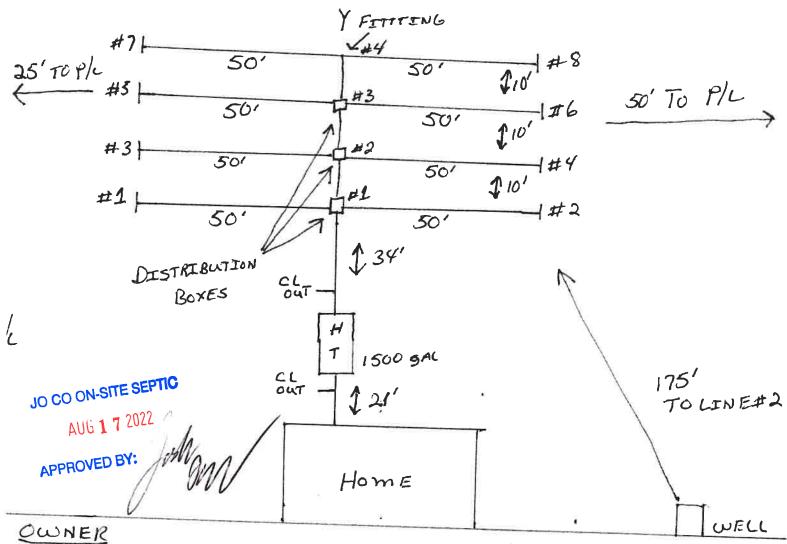
Initial and Replacement Areas — Protection: The installed subsurface absorption field and designated replacement areas must be protected and kept free of development such as roadways, covering with asphalt or concrete, filling, cutting, or other soil modifications.

8/17/22

8/17/22:10:10:49AM ONS_OnsitePermit_pr



100' TOP/C



Adamé KAYLA MILLER 544 MESA VEKLE DRIVE CAUEJet. OR. 97523 RARCEL # 4008040000021300 REFERENCE SITE EVALUATION 463-22-000001-EVAL

ACRES - 5

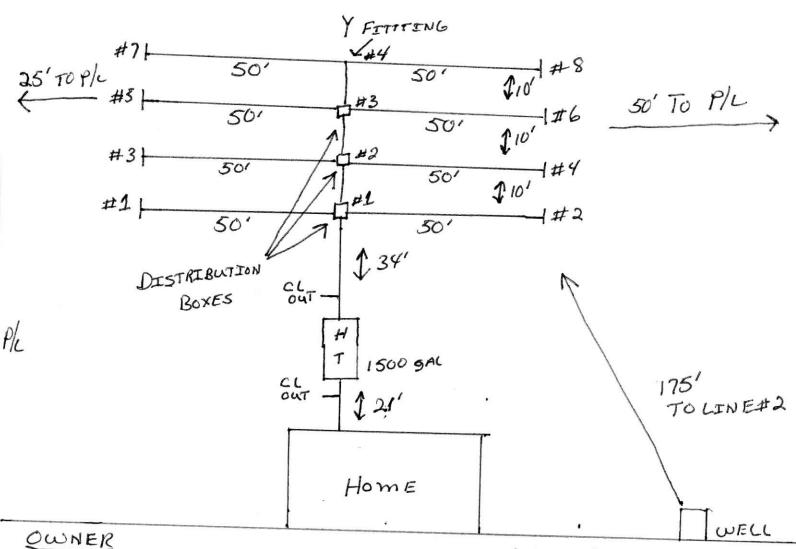
MAP BY

I.V. EXCAVATION LLC Edward m. Podoll II P.O.Box 204 CAUE Jct. OR. 97523 PH# 541-660-1798 DEQ# 38491 CCB# 181530 CERT# RI 660

REPAIR

100' TOP/L

1 ~

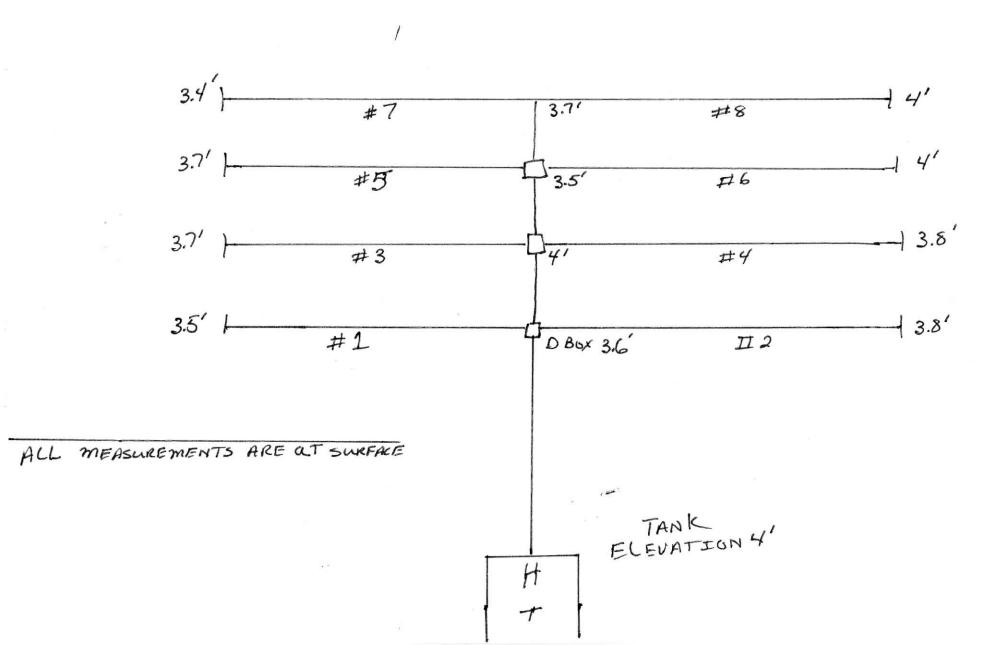


Adamé Kayla MILLER
544 MESA VEKDE DRIVE
CAUE JC+. OR. 97523
RARCEL # 4008040000021300
REFERENCE SITE EVALUATION
463-22-600001-EVAL
ACRES-5

MAP BY

I.V. EXCAVATION LLC
Edward M. Podoll II
P.O.BOX 204
BAUE Jct. OR. 97523
PH# 541-660-1798
DEQ# 38491
CCB# 181530
CERT# RI660

Adam MILLER 544 MESA VERDE DRIVE CAUE Jct. OR. 97523 REF SITE ENAL # 463-22-000001-EUAL



adom Miller 544 Mesa Verde Drive Cave Jet Or. 97523 Ref. Site Evel# 463-22-000002-EvAL

Distribution BOXES #1 LAT. 4212455 LONG-123.65358 #2 LAT. 42.12456 CONG-123.65359 #3 LAT. 42.12459 LONG-123.65359 #4 LAT. 42.12461 LONG-123.65361

DISPOSAL TRENCHES

LINE#1	LAT 42.12455	LINE#2	LAT 42.12453
	LONG-123.65384		LONG-123.65342
LINE#3	LAT 42.12459		LAT 42.12455
	LONG-123.65377		LONG-123:65341
LINE#5	LAT 42.12464	CINE#6	LAT 42.12459
51	LONG-123.65377		LONG-123.65342
	LAT 42. 12464		LAT 42.12462
	LONG-123-65377		LONG-123.65341

Adam MICLER 544 MESA VERDE DRIVE CAUE Jot OR. 97523

	MATERIAL LIST	
1)	1500 GALLON INFILTRATOR SINGLE COMPARTMENT	TANK
130')		9
3)	DISTRIBUTION BOXES POLYLOK GREEN TOP	
104)	EQUALIZER QUICK 4 CHAMBERS	
16)	END CAPS	
1)	3"TO4" FERNCO REDUCER	
500'	GREEN TRACER WIRE	
2)	CLEAN OUT Y'S 411	
2)	4" THREADED CADS	# # .
1)	4" Y FITTING	
1)	GluE	a a
1)	PRIMER	
1)	6" TANK RISER	
, ,		



I, Kayla Miller, have authorized Edward m. Podo// to act as my
(Property Owner/Print Name) (Authorized Representative/Print Name) agent in performing the activities necessary to obtain all onsite wastewater treatment program
services provided by the Josephine County on the property described below in accordance with
OAR chapter 340, division 071. I agree that any costs not satisfied by the Authorized Representative are my responsibility and I authorized Josephine County Onsite Septic agents to conduct required
business activities on said property.
PROPERTY IDENTIFICATION:
544 Mesa Verde Drive (Property Situs or Road Address)
And described in the records ofCounty as:
Township 40 Range 08 Section 04 Map ID Tax Lot #(s) 2/3
PROPERTY OWNER:
Printed Name: Kayla Miller
Address: 625 Mesa Verde Dr.
City, State, Zip: Cave Junction, OR 97523
Phone: <u>541 326 2244</u> Email: <u>Kddm 20@ live.com</u>
Signature: Kayla M. M.
AUTHORIZED REPRESENTATIVE:
Printed Name: I. V. ExCAUATING LLC / Edward m. Rodo 11 T
Address: P.O. Box 204
City, State, Zip: CAVE Junct ION On. 97523
Phone: 541-660-1798 Email: epido///10/frontiernet.net
Signature: Eclivar m. Podol/#

JOSEPHINE COUNTY PLANNING DIVISION - DEVELOPMENT PERMIT

PARCEL:

40080400000213

PERMIT NUMBER:

PL-2021-02707

SITUS:

544 Mesa Verde Dr

ZONE:

RR5

ACRES:

SCHOOL DISTRICT:

Three Rivers

APPLICANT:	Miller, Kayla	APPLICANT PHONE # : 5413262244
APPLICANT ADDRESS:	544 Mesa Verde Dr	·
AFFEIGART ADDRESS.	Cave Junction, OR 97523	
OWNER:	CASTANET, JENNIFER L	Kayla: Adam Miller
OWNER ADDRESS:	2176 BRIARLAKE TRCE NE	SHY Mesa Verde DR 275 22 (14)

SPECIAL REQUIREMENTS

· Airport Overlay - Declaration in File

Reason Outside of approach 2 one Enterprise Zone

EXISTING STRUCTURES	PROPOSAL	SETBAC	KS
Per Assessor Records: Vacant	3,024 SQ FT Two Story SFD - 6 Bedroom, 3.5 Bath,	Front Setback:	30 ft.
	Bonus Room, Rec Room with Wet Bar, Attached Garage	Side Setback:	10 ft.
	and Porches	Rear Setback:	25 ft.
		Stream Setback:	0 ft.
		Height:	35 ft.

ADDITIONAL TERMS:

- "Wet Bar" means an accessory sink, used for convenience and is not used in conjunction with the preparation of food, located within the dwelling. A wet bar has the following dimensions: The maximum size for the sink is 16 inches by 16 inches and is limited to one compartment; the waste line to the sink is limited to one and one-half inches in size; and the P-trap is limited to one and one-fourth inches in size.
- · Building Safety Note: Fire Safety Plan must be implemented prior to issuing the Certificate of Occupancy.

ALL DEVELOPMENT MUST COMPLY WITH THE REQUIREMENTS OF THE DEQ CONSTRUCTION STORMWATER BEST MANAGEMENT PRACTICES MANUAL, WHICH IS AVAILABLE ONLINE. THIS DEVELOPMENT PERMIT DOCUMENTS AND IS AUTHORIZING THE USE OF THE ABOVE STATED STRUCTURE FOR LEGAL LAND USE PURPOSES. IF THE ABOVE STANDARDS AND OR CONDITIONS GOVERNING THE PERMIT ARE NOT MET AT THE TIME OF APPLICATION OR AT ANY TIME AFTER ISSUANCE OF THIS DEVELOPMENT PERMIT, THE DIRECTOR IS AUTHORIZED TO REVOKE THE PERMIT PURSUANT TO THE PROCEDURES LISTED IN JCC 19.41.040.

OTHER PERMITS REQUIRED: *ACCESS PERMIT REQUIRED FROM COUNTY PUBLIC WORKS DEPT OR STATE HIGHWAY DIVISION. ALL STRUCTURES APPROVED BY THIS PERMIT MUST ALSO BE AUTHORIZED BY SEPARATE PERMITS FROM THE DEPARTMENTS OF BUILDING SAFETY AND ENVIRONMENTAL QUALITY. FAILURE TO COMPLY WITH THE TERMS OF THIS PERMIT WILL RESULT IN REVOCATION. FALSIFICATION OF INFORMATION IS A VIOLATION OF STATE LAW.

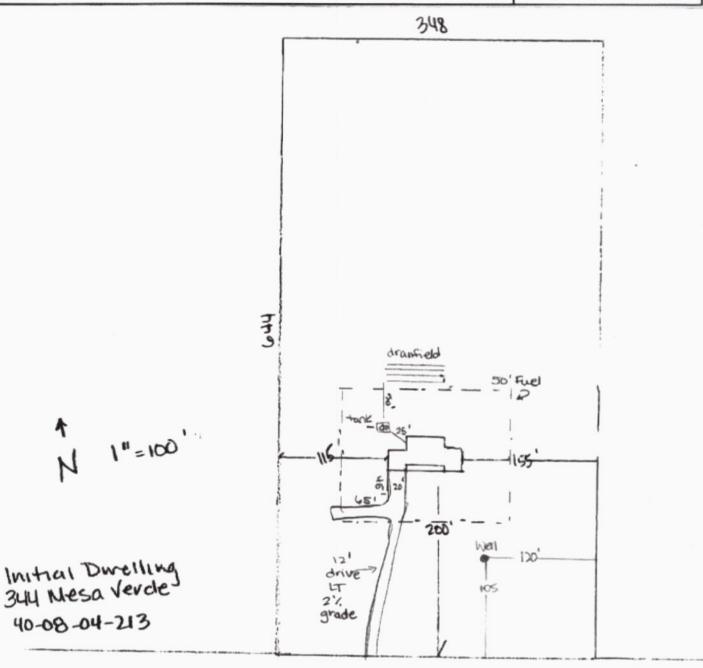
SIGNATURE:	Kingla Miller	DATE:	1/28/22
CONTRACTOR NAME:	ADAIR HOMES	LICENSE#:	593
APPROVED:	Clealer	DATE:	1-27-22

NOTE: AUTHORIZED USES MUST BE UNDERWAY WITH ALL REQUIRED PERMITS WITHIN 1 YEAR FROM DATE OF ISSUANCE OF THIS PERMIT.

PLOT PLAN

The information on this Plan has been provided and reviewed by the property owner who by signing below: 1) Acknowledges and Accepts full responsibility for its accuracy and completeness: 2) Is responsible to ensure that the improvements to the site take place in conformance with this plan: 3) Will establish all the corner irons, lot lines and code required setbacks required of this property, any change(s) to this plan must be pre-approved by the governmental agencies with jurisdiction, the mortgage lender, the contractor and documented.

DocuBigned by:		
Signature Adam Miller	Date	11/17/2021
Signature 128E1038C7C84C0	Date	



- Mesa Verde >

power pole where

VANCOUVER, WA 98683 SOUTE 100 ADAIR HOMES, INC

MAIN FLOOR PLAN

STANDARD STANDARD

SIDE CONHECEVATION

7071 OBSC

IHWS WODET CODE - 10B €

B87 - WO-30\(\frac{4}{30}\) WEATED BY: MP
DKAFTED BY: MP
SOALE: 12\(\frac{4}{30}\) MP
SOALE: 12\(\frac{4}{30}\) MP

2CVFE: 1/8" = 1'-0"

MILLER

COPYRIGHT 2021 A ADAIR HOMES INC.

FLOOR PLAN NOTES

EA

	ı
-	

CADET - NOW CADET - NOW - CELLING CADET - NOW - NO	SYMBOL MESSELLI MONT
SESSIEAT PL'MP HEAD - 1600 W - 2000 W - 200	WW WW
- LIGONA - 2000	A.00
SOUND CELLING WALL MOUNT - EXT. WALL MOUNT - EXT. WALL MOUNT - EXT. WOUNDER CABINET BLANKED OUT BOX MALL PLUSH MOUNT BLANKED OUT BOX WALL PLUSH MOUNT SOUNDER CABINET WA. VANITY - 38 W. M VANITY - 38 W. W VANITY - 38 W. M VANITY - 38 W. M VANITY - 38 W. W VANITY - 38 W. M VANITY - 38 W. W VANITY - 38 W. W VANITY - 38 W. M VANITY - 38 W. W VANITY - 38	N.S
AND CELLING OSTAT OSTA	
WANN CELLING TOWN CELLING TOWN CELLING ONTINUOUS OPERATING OUTH WALL MOUNT - EXT. DINNER ROAM WALL MOUNT - EXT. FOVER - 1 STORY FOVER - 2 STORY WAN - VARITY - 58 WA	100
OCTAM OCTAMICOLS OPERATING OCTAM OCTAMICOLS OPERATING OCTAM WALL MOUNT - EXT. WALL MOUNT - EXT. WALL MOUNT - EXT. WALL MOUNT - EXT. BLANKIN OUT BOX ENTERSED CAN BLANKIN OUT BOX OCHE - STORY BLANKIN OUT BOX OCHE - CABINIT WA VANITY - 38 W. M VANITY - 38 W. W	M.S
ONTINGUES OFFEATING CEN CEN MALL MOURT - EXT. POWER ON MALL MOURT - EXT. FOVER - STORY W. M VANITY - 38 W. W VANITY -	CV87
DUEN THE STATE OF	0
DCFM WALL MOUNT - EXT WALL MOUNT - EXT WALL MOUNT - EXT EXPLESS EXPLESS TOTRE - STORY FOURE - STORY FOURE - STORY FOURE - STORY FOURE - LUSH MOUNT MALL FUSH MOUNT MALL FUSH MOUNT WALL FUSH MOUNT WALL FUSH FOUR WALL - VANITY - 38 W. M VANITY - 58 W. W VANITY - 58	89
HING BOUGHER WALL MOURT - EXT WALL MOURT - EXT BOWNER ROOM KEVLESS FOVER - 2 STORY FOVER - 3 S	. X
WALL MOUNT - EYT DINING ROOM BONNING ROOM FEVENSE FOVER - 1 STORY FOVER - 2 ST	
DINING ROOM REVIEWS REVIEWS REVIEWS FOVER - STORY FOVER -	0
KEYLESS FOVER - 1708Y FOVER - 1708Y BLANKED OUT BOX BLANKED OUT BOX AMALE FLUSH MOUNT SMALL FLUSH MOUNT OUGHE CLIBINET UNDER CLIBINET W. M VARITY - 38 W. W VARI	•
TOYRE - STORY TOYRE - STORY TOYRE - STORY TOWNER -	(9)
FOYER - 2 STORY HAANED OUT BOX LANGE FLUSH MOUNT FESHOANT FESHOANT WANGE KLUSH MOUNT FESHOANT WANGE CASIBNIT WA	0
BLANKED OUT ROX LANGE FLUSH MOUNT FRAMALL FLUSH WOUNT FROMALL FLUSH WOUNT FROMALL FLUSH FLUSH W. M. "VARITY - 38 W. W. "W. "VARITY - 38 W. W. "W. "VARITY - 38 W. "W. "VARITY - 38 W. "W. "W. "W. "W. "W. "W. "W. "W. "W. "	0
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SMALL FLUSH MOUNT PENDAN PENDA	0
PENDANT PENDANT PENDANT W. M VANITY - 38 W. M VANITY - 38 W. M VANITY - 38 - CELLING GFI - WATER PROOF	0
o" RECESELD CAN UNDER CABINET W. M VANITY - 3B W. M VANITY - 3B W. M VANITY - 3B - CEILING GFT - 110 - WATER PROOF	0
UNDER CABINET W. M. "ANITY - SB W. M. "VANITY - SB - CELING GFI - 110 - WATER PROOF	0
W. M VANITY - SB W. M VANITY - 3B - CEILING GFT - 110 - WATER PROOF	*
W. M VANITY - 3B - CEILING GFI - 110 - WATER PROOF	Ø1
- CEILING GFT - 110 - WATER PROOF	O s
- 110 - WATER PROOF	0
- WATER PROOF	0
	20
OUTLET - 220	50
OUTLET - GFI	E C
OUTLET - HALF HOT 0	0
OUTLET - PHONE	-
OUTLET - TV	
SMOKE DETECTOR	96
SMOKE/CO DETECTOR	20
SWITCH-1 WAY \$	
SWITCH-3 WAY	
SWITCH - + WAY \$	
SWITCH-DIMMER	NOTE:

BORCH COVER

MAIN FLOOR PLAN 1795 SQ. FT. 1/8" = 1'-0"

AANCOUVER, WA 98683 SUITE 100 ADAIR HOMES, INC

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UPPER FLOOR PLAN

DATE: 12/8/2021 DRAFTED BY: MP REV: B82 - MO-30768 2CVFE: 1/8" = 1'-0" THMS MODET CODE - 10B #

STANDARD STANDARD

7071 OBSC

MILLER

ELECTRICAL LEGEND	
ELECTRICAL	SYMBOL
DUCTLESS HEAT PUMP HEAD	MINISHTE
CADET - 1600W	h opti
CADET - 900W	A.000
CADET - 700W	A 00.
CADET - 900W - CEILING	CESS Week
CADET - 700W - CELLING	TANK.
THERMOSTAT	0
FAN - CONTINUOUS OPERATING	⊕ Bull of
FAN - 80 CFM	⊕ (2)
FAN - CEILING ROUGH-IN	R
LIGHT - WALL MOUNT - EXT.	0
LIGHT - DINING ROOM	0
LIGHT - KEYLESS	9
LIGHT - FOYER - 1 STORY	Ф
LIGHT - FOYER - 2 STORY	0
LIGHT - BLANKED OUT BOX	0
LIGHT - LARGE FLUSH MOUNT	0
LIGHT - SMALL FLUSH MOUNT	0
- IGHT	0
LIGHT - 6" RECESSED CAN	
LIGHT - UNDER CABINET	*
EIGHT - W. M VANITY - 5B	9
LIGHT - W. M VANITY - 3B	91
OUTLET - CEILING GEI	ő
OUTLET - 110	0
OUTLET - WATER PROOF	to
OUTLET - 220	10
OUTLET - GFI	0
OUTLET - HALF HOT	0
OUTLET - PHONE	ě
OUTLET - TV	*
SMOKE DETECTOR	96
SMOKE/CO DETECTOR	90
SWITCH - 1 WAY	s
SWITCH - 3 WAY	s
WITCH - 4 WAY	ş
SWITCH - DIMMER	100 47

UPPER FLOOR PLAN 1232 SQ. FT. 1/8" = 1'-0"

FLOOR PLAN NOTES

 $\forall \forall$

1 of 1 PLICATION FOR PERMIT TO CONSTRUCT ROAD APPROACH

JOSEPHINE COUNTY PUBLIC WORKS

201 River Heights Way • Grants Pass OR 97527

Address City City Cave Junction St OR Zip 97583 City St TYPE OF APPROACH: TYPE OF APPROACH: X County-maintained Circuit Court Decree Diameter: Cave Junction St OR Zip 97583 City St TYPE OF APPROACH: X Residential Home Occupation* Ag Use Diameter: Cave Junction St OR Zip 97583 City St TYPE OF APPROACH: Type OF APPROACH: Commercial Junusyrial* Home Occupation* Ag Use Diameter: Cave Junction St OR Zip 97583 City St Type OF APPROACH: There of Approach: Commercial Junusyrial* Ag Use Commercial Junusyrial* There of Approach: Commercial Junusyrial* There of Approach: Ag Use This permit shall be void unless work herein described shall have been completed, inspected and approved before This permit shall be void unless work herein described shall have been completed, inspected and approved before This permit shall be void unless work herein described shall have been completed, inspected and approved before There of Approach: CONDITIONS FOR APPROVAC* ISSUED BY: CONDITIONS FOR APPROACH: Address Time 2:00 PM Latitude (N) 42° 07' 25'' Latitude (N) 42° 07' 25'' Latitude (W) 123° 39' 12' Longitude (W) 123° 39' 12' Longi			16	1: (541) 4/4-5	460	Fax: (541)	474-5	5475					
Struct Staddress Struct Staddress Struct Staddress Struct Staddress Stad	Prepared by:			5		Applic	ation	Date:	11/	3/2021		Dar	nie M	0022
Fax: Fax:			Violations:						-		Zowal .		iit No:	9932
Land Use Log: Yes No Scanned	Owner	Contact	Pickup	Mail					-			The second second second		
Land Use Log: Yes No Scanned Log: Yes No Scanned Stated Purpose: Home Construction NEW EXISTING SHARED WAIVER Contractor Street Address City / St / Zip This permit is granted subject to the terms and conditions stated below and in the GENERAL PROVISIONS, violation of said terms or conditions will constitute sufficient cause for cancellation of this permit. No work other than that specifically mentioned herein is hereby authorized. ANY WORK STARTED ON THE CONSTRUCTION OF ANY PORTION OF THE APPROACH DESCRIBED HEREIN STALL CONSTITUTE ACCEPTANCE OF THE PROVISIONS OF THIS PERMIT. Property Owner Caty Miller Phone \$41-326-2244 Contact City St Address City St TYPE OF APPROACH: Cave Junction St OR Zip 97583 City St Vere FROAD: Type OF APPROACH: Local access road Circuit Court Decree City Cave Junction St OR Zip 97583 City St Western Statisting New Width: Ag Use Phone Occupation* Read Tity Plan Ag Use This permit shall be void unless work herein described shall have been completed. inspected and approved before 1/5 203 A The permit shall be void unless work herein described shall have been completed. inspected and approved before 1/5 203 A Time 2:00 PM Latitude (N) 1/2 07 25 11 Length 2/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2	Fax:						_	1	-	sa Verd	e Driv	e		
Saled Purpose: Home Construction NEW EXISTING SHARED WAIVER	Email:	kddm30@	alive.com			T 40	R	08	S	04.00	TL	213	Parcel	No:
NEW EXISTING SHARED WAIVER	Land Use Log:			Scanned			_	pose:			structi	ion		
Street Address City / St / Zip This permit is granted subject to the terms and conditions stated below and in the GENERAL PROVISIONS, violation of said terms or conditions will constitute sufficient cause for cancellation of this permit. No work other than that specifically mentioned herein is hereby authorized. ANY WORK STARTED ON THE CONSTRUCTION OF ANY PORTION OF THE APPROACH DESCRIBED HEREIN STALL CONSTRUCTION OF ANY PORTION OF THE APPROACH DESCRIBED HEREIN CONSTRUCTION OF ANY PORTION OF THE APPROACH DESCRIBED HEREIN CONSTRUCTION OF ANY PORTION OF THE APPROACH DESCRIBED HEREIN CONSTRUCTION OF ANY PORTION OF THE APPROACH DESCRIBED HEREIN CONSTRUCTION OF ANY PORTION OF THE APPROACH DESCRIBED HEREIN CONSTRUCTION OF ANY PORTION OF THE APPROACH DESCRIBED HEREIN CONSTRUCTION OF APPROACH DESCRIBED HEREIN CONTROL OF THE PROVISIONS OF THIS PERMIT. **TYPE OF APPROACH** *				Camea		N	EW		EX	ISTING	SH	ARED	W	AIVER
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Owner-maintained	V County	. г				111	E U	r APP	KUA	H:				
Home Occupation* Ag Use Home Occupation* Ag Use Home Occupation* Ag Use Items Plant			_			X	Re	sident	ial			ommerci	ial matu	atrial*
Proposed: Existing New Width: 4	Owner-maintai	ned	Circuit Co	urt Decree		-	-		V-117-0	ion*				
New Width:					7				ccupat	ion				gie Flan
This permit shall be void unless work herein described shall have been completed, inspected and approved before	proach: Existing	New	Widt	h: 14] As	Use						
This permit shall be void unless work herein described shall have been completed, inspected and approved before								_	10	2 " 1	.ength:	29'	B	Beveled
I have received a copy of the General Provisions: Applicant Date	This permit shall be	void unles	s work herein a	lescribed shall he	ave been	completed,	insp	ected a	and ap	proved be	fore	11/	5/2	022
Time 2:00 PM Latitude (N) 123° 39' 12' WAIVER FOR ROAD APPROACH PERMIT The installation of the driveway/road approach providing ingress to and egress from the above-reference location to said road does not require an approach permit. Construction of this driveway approach shall comply with Josephine County standards and is the sole responsibility of the property owner. Inspection and approval by Josephine County Public Works Authorized Representation. Public Works Authorized Representation.	• • • • • • • •	• • • • •	• • • • • •									/.	1	<u> </u>
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Public Works Authorized Representative			way/road approx t. Construction	ach providing ing	gress to an	nd egress fr	om th	ne abo					does not he sole	
		Publi	ic Works Autho	rized Representa	tive									



Planning Office 700 NW Dimmick St Suite C Grants Pass, Oregon 97526 541-474-5421

Fax: 541-474-5422 Email: planning@co.joseph.



Article 76 Certification of Fire Protection Service

Name: Miller, Adam & Miller, K	ayla		
Assessor Map Number: 40-08	-04 TL 213		
Address: 344 Mesa Verde Dr		*	
City Cave Junction	State OR	Zip code 975	523
Phone Number:			
Email: kddm30@live.com			
I certify that the above property is	ois Valley Fire District		:
04/44/0000	e district or Fire service provider		
starting: U1/11/2022 Date		<u>.</u>	
Fire Official Signature:	annows Ism	Date:	12/07/2021
Title:	Fire Marshal		

STATE OF OREGON	JOSE 61242	WELL I.D. LABEL# L	Page 1 of 2
WATER SUPPLY WELL REPORT	JUSE 01242	CTART CARR	
(as required by ORS 537.765 & OAR 690-205-0210)	8/10/2021	ORIGINAL LOG #	1053146
(1) LAND OWNER Owner Well I.D.	0/10/2021	ORIGINAL LOG#	
First Name ADAM & KAYLA Last Name MILLER	(0) LOCAT	TION OF WELL (L	
Company		TION OF WELL (legal de	
Address 344 MESA VERDE City CAVE JUNCTION State OR Zin 97523	Sec. 4	NE 1/4 -64b NIV	Range 8.00 W E/W WN
21)	Toy Mon Numb	NE 1/4 of the NW 1	
	cision .	" or 42.12418000	Lot DMS or DD
Alteration (complete 2a & 10) Abandonment(col	In Long	" or -123.6530700	0 DMS or DD
Dia + From To Gauge Stl Plstc Wld Thrd	€ Str	reet address of well Near	est address
Casing:	344 MESA VE	RDE, CAVE JUNCTION, OR 97	7523
Material From To Amt sacks/lbs		100 to 200 to 100 to 200 to	
(3) DRILL METHOD	(10) CTATI	CWATERARY	
Rotary Air Rotary Mud Cable Auger Cable Mud	(10) STATE	C WATER LEVEL Date	CIVIT () I CIVIT (C)
Reverse Rotary Other	Existing W	ell / Pre-Alteration	SWL(psi) + SWL(ft)
	Completed	Well 7/26/2021	38
(4) PROPOSED USE Domestic Irrigation Community		Flowing Artesian?	Dry Hole?
Industrial/ Commericial Livestock Dewatering	WATER BEARI	NG ZONES Depth wate	r was first found 61.00
Thermal Injection Other	- SWL Date		low SWL(psi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (A)	ttach copy) 7/26/2021		
Depth of Completed Well 160.00 ft.	7/26/2021	61 117 20	38
BORE HOLE SEAL	sacks/		
Dia From To Material From To An 10 0 20 Bentonite Chins 0 20 1			
10 0 20 6 20 160 Bentonite Chips 0 20 1 Calculated 9.			
z zo 100 Calculated 9,1		·	
Calculated	(11) WELL I	Ground Elevation	
How was seal placed: Method A B C D	E	Material	From To
X Other DRY POURED	ORANGE BRO	WN CLAY W/ MIX GVL	0 7
Backfill placed from ft. to ft. Material		CLAY W/ MIX GVL	7 55
Filter pack from ft. to ft. Material Size	BROWN CLAY	W/ MIX GVL & SAND COURS	SE 55 160
Explosives used: Yes Type Amount			
(5a) ABANDONMENT USING UNHYDRATED BENTONIT	E		
Proposed Amount Actual Amount			
(6) CASING/LINER			
Casing Liner Dia + From To Gauge Stl Plstc W			
<u>6</u> <u>× 1.5</u> 118.5 .250 ○ <u>></u>			
	I		
	┥ ┝┤ ╟────		
Shoe Inside Outside Other Location of shoc(s) 118.	;		
Temp casing Yes Dia From + To			
7) PERFORATIONS/SCREENS			
Perforations Method Holte Air			
Screens Type Material	Date Started7/	24/2021 Comple	ted 7/26/2021
Perf/ Casing/ Screen Scrn/slot Slot # of	Tele/	compte	
Dane Carina C CO 110		ter Well Constructor Certificati	
Peri Casing 6 58 118 .188 1 1440	abandonment of	this well is in compliance w	ruction, deepening, alteration, or vith Oregon water supply well
	construction stan	dards. Materials used and inform	nation reported above are true to
	the best of my kn	lowledge and belief.	•
	License Number	Date	
B) WELL TESTS: Minimum testing time is 1 hour	Signed		
Pump Bailer • Air Flowing Arte	sian		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water	Well Constructor Certification	
20 118 1	I accept responsi	bility for the construction, deepe	ening, alteration, or abandonment
	work performed o	on this well during the construction	n dates reported above. All work
Temperature 54 °F Lab analysis Yes By	construction stand	g this time is in compliance was dards. This report is true to the be	with Oregon water supply well
Water Company of the			
	ppm License Number	1835 Date 8	3/10/2021
	Signed KEVIN	GILL (E-filed)	
		onal) Clouser Drilling Inc.	

8/10/2021

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301 (503)986-0900



LOCATION OF WELL

Latitude: 42.12418000 Datum: WGS84

Longitude: -123.65307000

Township/Range/Section/Quarter-Quarter Section:

WM40.00S8.00W4NENW

Address of Well:

344 MESA VERDE, CAVE JUNCTION, OR 97523

Well Label: 143091

Printed: August 10, 2021

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in anymanner.

Provided by well constructor



Property

R331619 MILLER, ADAM & MILLER, KAYLA 344 MESA VERDE DR, CAVE JUNCTION, OR 97523

\$100,440

2022 GENERAL INFORMATION

A Active Property Status

Linked Properties

RELATED PROPERTIES

Residential Property Type

ACRES 5.00, POTENTIAL ADD'L TAX LIAB Legal Description

Alternate Account Number

1900 Kerby Neighborhood 40-08-04-00-000213-00 Map Number 640-Forestland By Application; Vacant Property Use

Levy Code Area

RR5 Zoning

2022 OWNER INFORMATION

MILLER, ADAM & MILLER, KAYLA Owner Name

625 MESA VERDE DR CAVE JUNCTION, OR 97523 Mailing Address

2021 LAND SEGMENTS

400 Tract; Residential; Vacant 640 Forest-Designated by Appl-Vacant 4 nn	LAND SIZE
	1.00 Acres
	4.00 Acres

CERTIFIED / IN PROCESS VALUES

	\$11,360	511,030
ASSESSED VALUE		
SPECIAL USE	\$830	\$800
	\$100,440	\$97,320
RMV	\$100,440	\$97,320
LAND	\$0	0\$
IMPROVEMENTS		
YEAR	2021	2020

SALES HISTORY

	Special Warranty Deed	& Sale
INST TYPE	Special	Bargain & Sale
SALE PRICE	\$125,000	
# LINST #	21-009639	18-013605
BUYER	MILLER, ADAM & MILLER, KAYLA	CASTANET, JENNIFER L
SELLER	CASTANET, JENNIFER L	STEIN TRUST, E & L
SALE DATE	5/28/2021	

If applicable, the described property is receiving special valuation based upon its use. Additional rollback taxes which may
become due based on the provisions of the special valuation are not indicated in this listing.

	1	>
	2	1
	ANA	2
		1
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	IOTAL BILLED	AD VALOREM	SPECIAL ASMT	PRINCIPAL	INTEREST	DATE PAID	TOTAL OWED
2021	\$90.08	\$71.33	\$18.75	\$90.08	\$0.40		\$90.48
2020	\$93.26	\$74.51	\$18.75	\$93.26	\$0.00	,	\$0.00
2019	\$123.56	\$71.51	\$52.05	\$123.56	\$0.00	,	\$0.00
2018	\$85.00	\$66.25	\$18.75	\$85.00	\$0.00	,	\$0.00
2017	\$84.96	\$66.21	\$18.75	\$84.96	\$0.00		\$0.00
2016	\$74.56	\$55.81	\$18.75	\$74.56	\$0.00		\$0.00
2015	\$72.55	\$53.80	\$18.75	\$72.55	\$0.00		\$0.00
2014	\$71.22	\$52.47	\$18.75	\$71.22	\$0.00	1	\$0.00
2013	\$69.14	\$0.00	0\$	\$69.14	\$0.00	ı	\$0.00
2012	\$67.74	\$0.00	\$0	\$67.74	\$0.00	,	\$0.00
2011	\$66.03	\$0.00	\$0	\$66.03	\$0.00	,	\$0.00
2010	\$65.07	\$0.00	\$0	\$65.07	\$0.00		\$0.00
2009	\$63.75	\$0.00	\$0	\$63.75	\$0.00		\$0.00
2008	\$64.58	\$0.00	\$0	\$64.58	\$0.00		\$0.00
2007	\$60.86	\$0.00	0\$	\$60.86	\$0.00	1	\$0.00
2006	\$59.94	\$0.00	0\$	\$59.94	\$0.00		\$0.00
2002	\$29.08	\$0.00	0\$	\$59.08	\$0.00	. 1	\$0.00
2004	\$58,45	\$0.00	0\$	\$58.45	\$0.00		\$0.00
2003	\$214.51	\$0.00	0\$	\$214.51	\$0.00		\$0.00
2002	\$209.12	\$0.00	0\$	\$209.12	\$0.00	1	\$0.00
2001	\$204.72	\$0.00	0\$	\$204.72	\$0.00	,	\$0.00
2000	\$184.34	\$0.00	\$0	\$184.34	\$0.00		\$0.00
1999	\$180.38	\$0.00	\$0	\$180.38	\$0.00		\$0.00
8661	\$169.69	\$0.00	\$0	\$169.69	\$0.00		\$0.00
1997	\$165.50	\$0.00	\$0	\$165.50	\$0.00		\$0.00
1000							

	\$90.48	\$0.00	\$90.48	
TOTAL TAXES DUE	Current Year Due	Past Years Due	Total Due	

	1223677	11-12-2020	\$90.46
2019	1159163	10-21-2019	\$119.85
2018	1118347	10-31-2018	\$82.45
2017	1068829	11-9-2017	\$82.41
2016	1016372	10-25-2016	\$72.32
2015	968170	10-16-2015	\$70.37
2014	922870	10-27-2014	\$69.08
2013	870984	10-22-2013	\$67.07
2012	828426	10-31-2012	\$65.71
2011	781478	11-9-2011	\$64.05
2010	721113	11-3-2010	\$63.12
2009	662569	10-26-2009	\$61.84
2008	612255	10-29-2008	\$62.64
	576704	11-14-2007	\$59.03
	512556	11-1-2006	\$58.14
2005	462814	11-1-2005	\$57.31
	422283	11-10-2004	\$56.70
	368749	11-12-2003	\$208.07
	310957	10-30-2002	\$202.85
. 4	251966	10-29-2001	\$198.58
. 4	208479	11-6-2000	\$178.81
	154106	11-4-1999	\$174.97
	103550	10-30-1998	\$164.60
41	53472	12-3-1997	\$160.53
	16008	1-1-1938	4



Josephine County, Oregon

Community Development - Planning Division 700 NW Dimmick, Suite C / Grants Pass, OR 97526 (541) 474-5421 / Fax (541) 474-5422

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

PLANNING APPLICATION FORM

Property Address: 544 Mesa Verde Dr Cave Junction, OR 97523	Statement of Understanding X Floor Plan/Elevations	
Assessor's Map & Tax Lot:	X Access Permit	
<u>40 - 08 - 04 - 00</u> Tax Lot(s) <u>213</u>	X Proof of Fire Protection	
Tax Lot(s)	X Erosion Control Plan/Fire Safety Plan	
Zoning: _RB5	Other:	
Size of Project: (# of Units. Lots, Dimensions, Sq. Ft., Etc.)	Description of Request/Reason for Appeal	
6 bedroom, 3.5 bath, total of 3,024 sq ft on 5 acres	(Include name of project and proposed uses): Project: Miller Home	
Application/Permit Type: (Please Check All Applicable)	Proposed home is 6 bedroom, 3.5 bathroom.	
Address Assignment	Approximately 3,024 sq ft, two story home	
New Address	With attached two car garage	
☐ Change of Address ☐ Additional Address	and the same of th	
Annual Compliance Certificate		
Appeal (See Sec.19.33.040)	Property Owner:Adam Miller	
Comp Plan/Zone Map Amendment (See Sec.19.46.030)	Address: 625 Mesa Verde Dr	
Conditional Use Application (Chapter, 19.45)	Cave Junction, OR 97523	
Determination of Nonconforming Use (See Sec.19.13.060)	Phone: 5413262244	
Marijuana Prod. Site on RR (Attach License and Premise Sketch)	Email: kddm30@live.com	
Alteration/Expansion of Nonconforming Use/Structure	Applicant:	
(See Div. 19.13.050)	Applicant:	
Final Plat (See Sec. 19.56.030)	Address:	
Mass Gathering (See Sec. 19.43.B - Lee Mass Gathering Form) Partition (See Sec.19.52.040)	Phone:	
Planned Unit Development (See Sec. 19.55.030)	Email:	
Pre-Application (See Chapter, 19.21)	Authorized Pennecentative/ Samuel	
Property Line Adjustment or Vacation (See Sec.19.54.040) Replat (See Sec.19.53.040)	Authorized Representative/ Surveyor or Engineer: (If Different From Applicant) (If Applicable)	
Riparian Landscape Plan (Attach Plan or Use Form B) Site Plan Review (See Chapter 19.42) Subdivision (See Sec.19.51.040) Text Amendment (See Sec.19.46.030)	Address:	
	Address:Phone:	
	Email:	
	Email:	
Variance (See Chapter.19.44) Conditional Use Permit (Chapter. 19.92) X Development Permit (See Sec.19.41.020) Temporary Dwelling (See Chapter. 19.43)	CERTIFICATION: I hereby certify that the information on this application is correct and that I own the property or the owner has executed a Power of Attorney authorizing me to pursue this application (attached).	
☐ Detached Living Space ☐ Medical Hardship	(Signature of Owner or Attorney-in-Fact) Date	
Other:		
Attachments:	(Signature of Owner or Attorney-in-Fact) Date	
(2) Folded Maps/Site/Tentative Plan to Scale (1) 8 1/2x 11" Site/Tentative/Plot Plan Written Narrative/Response to Criteria Power of Attorney	(For Office Use)	
Statement of Intended Water Use	Fees Paid: Initials:	



Community Development - Planning Division 700 NW Dimmick, Suite C Grants Pass, OR 97526

(541) 474-5421 planning@josephinecounty.gov

Payer/Payee: KAYLA MILLER

625 MESA VERDE DR

CAVE JUNCTION OR 97523

Cashier: ONLINE PAYMENT

Date: 01/27/2022

Primary Parcel: 40080400000213

Project Description: 3,024 SQ FT Two Story SFD - 6 Bedroom, 3.5 Bath, Bonus

Room, Rec Room with Wet Bar, Attached Garage and

Porches

PL-2021-02707 DEVELOPMENT PERMIT

544 Mesa Verde Dr

Fee Description

Development Permit

 Fee Amount
 Amount Paid
 Fee Balance

 \$300.00
 \$300.00
 \$0.00

 \$300.00
 \$300.00
 \$0.00

Receipt Number: PL22-00165

Payment Method	Reference Number	Payment Amount
ONLINE PAYMENT	107822582	\$300.00
Total Paid:		\$300.00



Residential Septic Site Evaluation Approval

463-22-000001-EVAL

Josephine Onsite Septic Program
700 NW Dimmick Street
Suite A
Grants Pass, OR 97526
541-474-5444

Fax: 541-474-5422

onsiteseptic@josephinecounty.gov Website: josephine.or.us

Date issued: 01/22/2022

Application status: Site Evaluation Approved

Work description: On-site septic evaluation needed for 544 Mesa Verde Dr in Cave Junction, OR. This is be a new construction h

Applicant: Adam Miller

Address: 625 Mesa Verde Dr.

Cave Junction OR 97523

Phone: 5413262244

Email: kddm30@live.com

Owner: MILLER, ADAM &

Address: MILLER, KAYLA 625 MESA

VERDE DR MILLER, KAYLA 625 MESA VERDE DR CAVE JUNCTION OR 97523 Primary contractor: IV EXCAVATING LLC

CCB: 181530

Address: PO BOX 204

CAVE JUNCTION OR 97523

Phone: 5415972485

Email: epodollll@frontiernet.net

Property address: 544 Mesa Verde Dr, Cave Junction,

OR 97523

Parcel: 4008040000021300 - Primary

Lot size:5 acresWater supply:WellZoning:N/ACity/County/UGB:N/A

Directions to Property: From Hwy 199 turn left on to Ken rose lane. Follow ken rose to end, sharp right will turn into cascade.

Follow cascade and sharp left will turn into Mesa verde. Follow Mesa verde to 500 block, property will

be on left hand side.

Proposed use of structure: Single family residence

Category of construction: Residential

General Specifications

Max peak design flow:600 gpd.Proposed gallons per day:600 gpd.Min septic tank volume:1500 gal.Min dosing tank volume:N/A

Special tank regmts: Installer is to ensure sufficient fall from tank to drainfield.

Comments: System being designed to accommodate a 6 bedroom home.

One of the bedrooms will be designated recreational and will contain a wetbar but no kitchen.

Stakeout required to ensure sufficient space for drainfield size.

System Specifications Initial System Replacement Area

System type:StandardStandardSystem distribution type:EqualEqualDistribution method:EqualEqual

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.)

Septic Site Evaluation 463-22-000001-EVAL

Date issued: 01/22/2022

Application status: Site Evaluation Approved

Work description: On-site septic evaluation needed for 544 Mesa Verde Dr in Cave Junction, OR. This is be a new construction h

Trench Specifications	Initial System	Replacement Area
Trench linear feet:	400 linear ft.	400 linear ft.
Max depth:	30 in.	30 in.
Min depth:	24 in.	24 in.
Special Requirements	Initial System	Replacement Area
Stakeout required:	Yes	Yes
Drainfield type:	Standard	Standard

THIS IS NOT YOUR PERMIT. A Construction/Installation permit is required before you construct your system. Please contact this office when you are ready to apply for a construction/installation permit. We cannot sign off on any Building Codes forms until we issue your permit.

This site approval runs with the land and will automatically benefit subsequent owners. This site approval is valid until the approved system is constructed under a construction permit or unless the site is altered without approval from this office. Alterations/excavations/lot line adjustments made to the site, or placement of wells or utilities, etc., may invalidate this approval

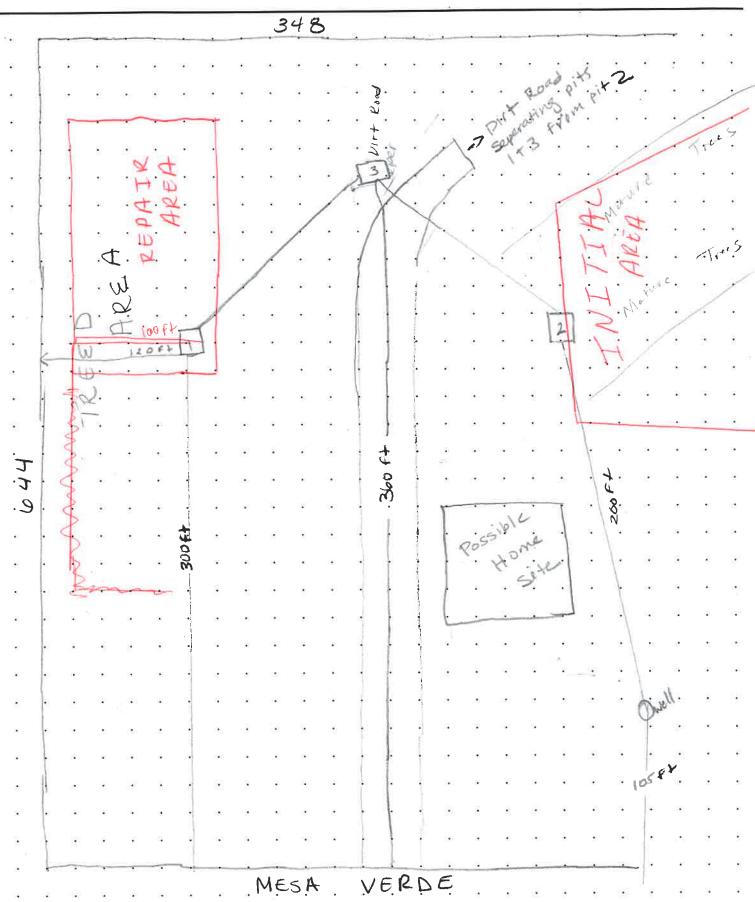
If you disagree with the decision of this report, you may apply for a site evaluation report review. The application for a site evaluation report review must be submitted to DEQ in writing within 60 days after the site evaluation report issue date and must include the site evaluation review fee in OAR 340-071-0140 Table 9A. A senior DEQ staff person will be assigned the site evaluation report review application.

You may apply for a variance to the onsite wastewater treatment system rules. The variance application must include a copy of the site evaluation report, plans and specifications for the proposed system, specify the rule(s) to which a variance is being requested, demonstrate the variance is warranted, and include the variance fee in OAR 340-071-140 Table 9C. A variance may only be granted if the variance officer determines that strict compliance with a rule is inappropriate or special physical conditions render strict compliance unreasonable, burdensome or impractical. A senior DEQ variance officer will be assigned the variance application.

Danielle Morvan 1/22/22

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

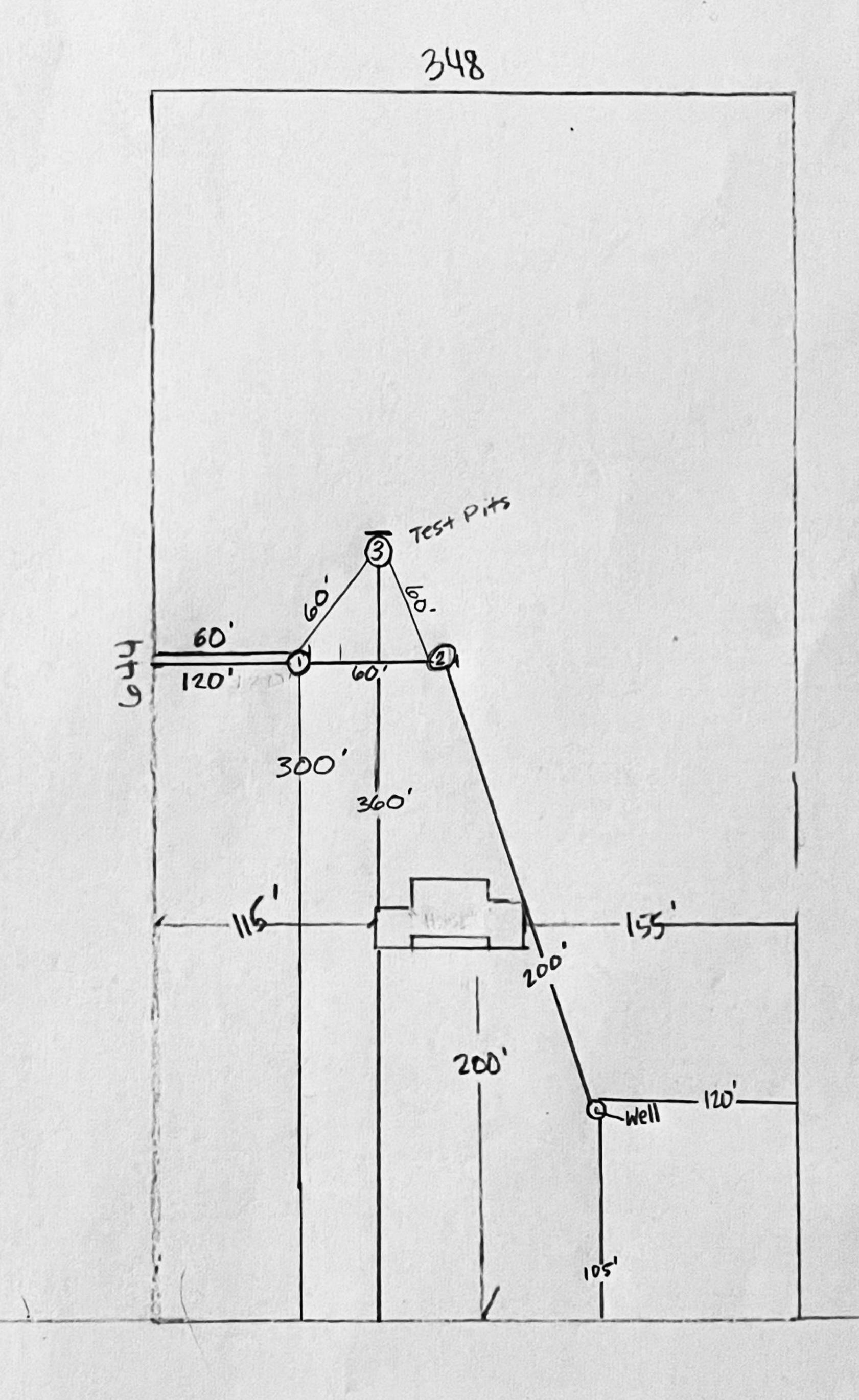
Section: 400 Property ID: 76213
Evaluator: Danielle Morvan
Application Number: 463-22-00001-EVAL



Section: 04 Range: 08 Township: 40 Evaluator: Danielle Morvan Owner/Applicant: Addem miller Application Number: 463 - 22 - 000001 - EVAL Inspection Date(s):___ SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC... **TEXTURE** DEPTH Roots-3-4F, F, 2med, 1-D, aglor-2.5 XR3/6 ; SCL Roots - 2 may 1-large; color - 2,5 YR 8-24 SCL Cobbay 25-48 481 to test Ret Cincilar Pit 2 Pit 3 Pit 4 Landscape Notes: Woo ded Groundwater Type:_ Aspect:____ Slope: 0-1 5° Other Site Notes: Pit 1 breated in area that had been recently loged Area should disturbence, pit 2 dirt mad in arca also recently logged water pooling in open located on other side of between SYSTEM SPECIFICATIONS Design Flow: /15D gpd Initial System: _ standar d Disposal Facility: 400 linear feet/square feet Maximum Depth: 30 inches Minimum Depth: Replacement System: Standar d linear feet/square feet Maximum Depth: 30 inches Minimum Depth: 24 inches Disposal Facility: 400 to be designed to accompanie 6 bedroom SFR Special Conditions: Systems installed in undisturbed area. Drainfield to be

SITE EVALUATION FIELD WORKSHEET

Property ID: TL 213



1"=100

Initial Dwelling 344 Mesa Verde 40-08-04-213

- Mesa Verde >

power pole whiter

SECTION 4 T.40S R8W W.M. JOSEPHINE COUNTY

I" = 400'

