Residential Septic Site Evaluation Approval

463-21-000070-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: 05/17/2021
Application status: Site Evaluation Approved
Work description: SITE EVALUATION

Applicant: Jack C Oldham
Address: 1574 NE 7th St
Grants Pass OR 97526
Phone: (541) 295-2124
Email: bampaw51@gmail.com

Primary contractor: Jack C Oldham
Installer License: 38854
Address: 1574 NE 7th St
Grants Pass OR 97526
Phone: (541) 295-2124
Email: bampaw51@gmail.com

Owner: E&G MITCHELL KIDS JT VENTURE
Address: C/O RANDALL E MITCHELL 309 N 1ST ST
C/O RANDALL E MITCHELL
309 N 1ST ST
SILVERTON SILVERTON, OR 97381
97381

Property address: 2301 Upper River Rd, Grants Pass, OR 97526

Parcel: 360613AC00230000 - Primary

Lot size: 2.12 ACRES
Zoning: N/A
Water supply: Well
City/County/UGB: County
Directions to Property: TAKE G ST TO 2301 UPPER RIVER RD. NEAR LOOP

Proposed use of structure: 4 BDRM SFR
Category of construction: Single Family Dwelling

	Existing	Proposed
Number of bedrooms:	0	4

General Specifications

Max peak design flow:	450 gpd.	**Proposed gallons per day:**	450 gpd.
Min septic tank volume:	1000 gal.	**Min dosing tank volume:**	500 gal.

Comments: BOTTOMLESS SAND FILTER OR ATT TREATMENT STANDARD 2 CAN BE SUBSTITUTED FOR SAND FILTER

System Specifications	***Initial System***	***Replacement Area***
System type:	Sand Filter	Sand Filter
System distribution type:	Equal	Equal
Distribution method:	Equal	Equal

Trench Specifications	***Initial System***	***Replacement Area***
Trench linear feet:	105 linear ft.	105 linear ft.
Max depth:	20 in.	20 in.

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 463-21-000070-EVAL

Date issued: 05/17/2021

Application status: Site Evaluation Approved

Work description: SITE EVALUATION

Min depth:	18 in.	18 in.
Special Requirements	***Initial System***	***Replacement Area***
Groundwater type:	Permanent	Permanent
Groundwater depth:	44 in.	44 in.
Drainfield type:	Standard	Standard
Pump to drainfield required:	Yes	Yes

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

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

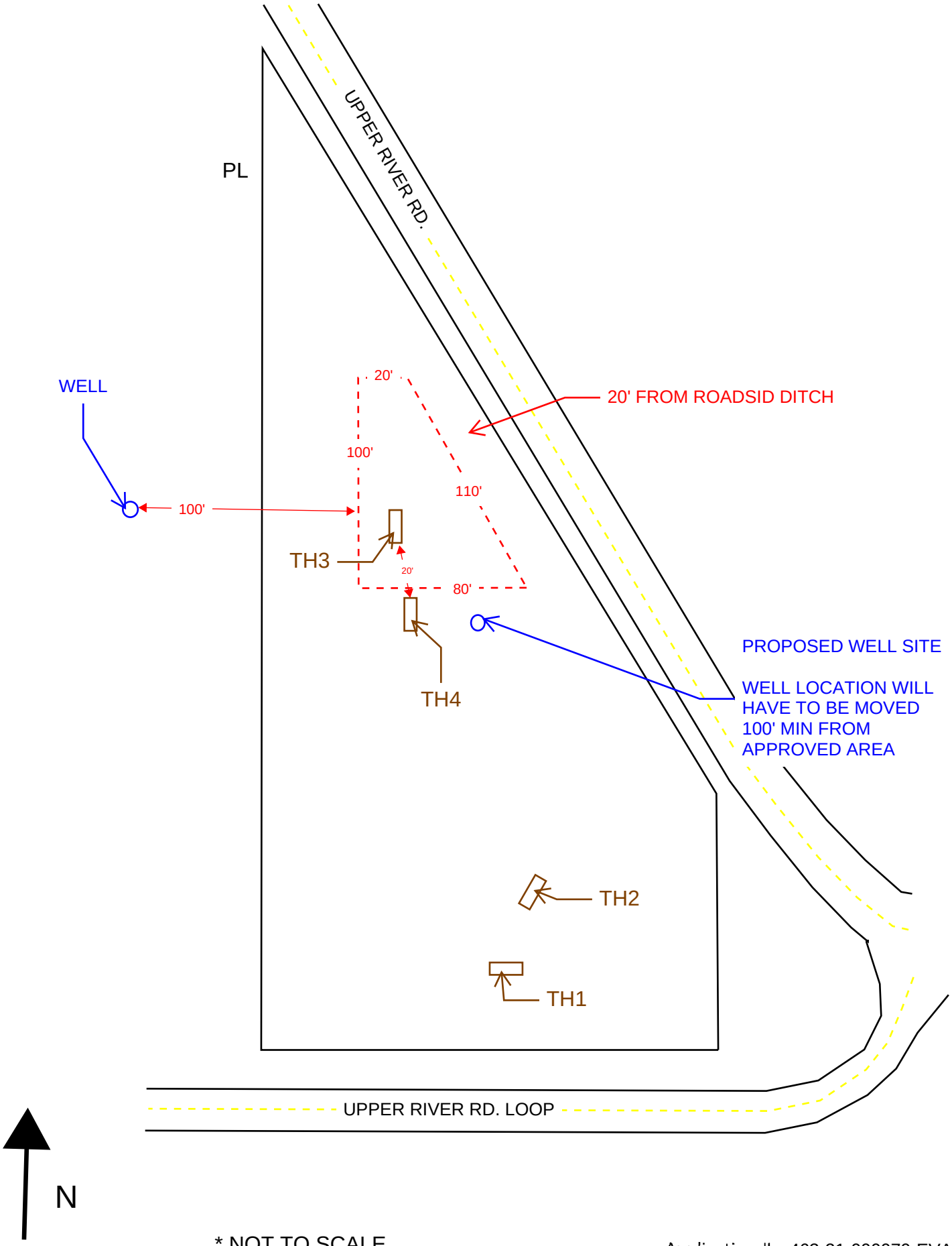
If you disagree with the decision of this report, you may apply for a site evaluation report review. The application for a site evaluation report review must be submitted to DEQ in writing within 60 days after the site evaluation report issue date and must include the site evaluation review fee in OAR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

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

Gabriel Kasiah 5/17/21

SITE PLAN

PARCEL 360613AC02300



* NOT TO SCALE

Application # 463-21-000070-EVAL

FIELD WORKSHEET

Name: RANDALL MITCHELL **Application No.:** 463-21-000070-EVAL **Date:** 4/20/2021
RE: SITE EVALUATION REPORT for Parcel #: 360613AC02300

Commercial Facility: ☐ Yes ☒ No Parcel Size: 2.12 ACRES

APPROVED SYSTEM SPECIFICATIONS

Design flow: 450 gpd Max Number of bedrooms: 4 Max Number of Employees: 8

Initial System	Replacement System
☐ Standard ☐ Capping Fill ☐ Bottomless Sand Filter ☒ Conventional Sand Filter/ATT ☐ Other	☐ Standard ☐ Capping Fill ☐ Bottomless Sand Filter ☒ Conventional Sand Filter/ATT ☐ Other
Tank: ☐ 1,000 gal. ☒ 1,500 gal. ☐ 2 compartment ☐ Other ☐ effluent pump required ☐ effluent filter required	Tank: ☐ 1,000 gal. ☒ 1,500 gal. ☐ 2 compartment ☐ Other ☐ effluent pump required ☐ effluent filter required
Distribution Method: ☒ Equal ☐ Serial ☐ Pressurized	Distribution Method: ☒ Equal ☐ Serial ☐ Pressurized
Absorption facility: 105 total linear feet 35 linear feet per 150 gallons projected daily sewage flow 20 " Max Depth 18 " Min Depth	Absorption facility: 105 total linear feet 35 linear feet per 150 gallons projected daily sewage flow 20 " Max Depth 18 " Min Depth

Additional Conditions of Approval

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

☐ A curtain drain is required, a minimum of _____ feet above the highest disposal trench.
☐ The curtain drain must be a minimum of _____ inches deep, and installed in accordance with OAR 340-071-0220 (12).
☐ Rake trench sidewalls.
☒ The system must be installed during dry soil conditions only.
☐ System must be installed between June 1 and October 1, unless otherwise approved by DEQ.

* PROPOSED WELL LOCATION WILL NEED TO BE MOVED 100' FROM APPROVED AREA

Inspector: MK

INSPECTION 4/20/2021

INSPECTION 4/30/2021

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, GRAN, ROOTS 2F,M,C,VC,1VF
	8-30	CoSL	10YR 5/4, wSBK, ROOTS 1F,M, CAS @ 12" MOTTLES CONC. 7.5YR 5/8
			WATER @ 30"
Test Pit 2	0-10	SL	SIMILAR TO TEST HOLE 1
	10-24	C.SL	CAS (MOTTLES) @ 10" DEP. 10YR 5/1, CONC. 7.5YR 5/4
			WATER @ 24"
Test Pit 3			
Test Pit 4	0-6	CoSL	10YR 2/2, GRAN, ROOTS 3F, 2M, VF, 1C, VC
	6-20	CoSL	10YR 3/3, wSBK, ROOTS 2F, 1VF
	20-44	CoSL	10YR 5/4, wSBK, ROOTS 1F, VF FAINT Fe CONC.
	44-60	CoLS	10YR 5/4, wSBK, ROOTS 1F, VF, CAS @ 44" DEP. 10YR 7/1 CONC. 7.5YR 5/8, 3/4
Test Pit 5	0-6	CoSL	SIMILAR TO TEST HOLE 3
	6-20	CoSL	ROOTS 1VF, F TO BOTTOM
	20-40	C.SL	CAS @ 40"
	40-60	CoLS	
Test Pit 6			

Landscape Notes: WOODED (PINE, ALDER, OAK, CEDAR), GRASS, BLACKBERRIES

Slope: 0-2% Aspect: S Groundwater Type: ☒ Permanent ☐ Temporary

Other Site Notes: PROPOSED WELL LOCATION WITHIN 100' OF TEST HOLES 3 & 4

Dear Sam,

This is a response to your request concerning connectivity to the City Public Sewer Main on Upper River Rd. After researching this particular lot, I found out a few things:

1. Lot 100 on Upper River Rd. Loop is outside the City limits, and the Urban Growth Boundary.
2. Had this lot been within the City Limits, it would require a Public Sewer Main Extension of approx.. 700 ft. (the City would not install)
3. There are occurrences where land within the “County Jurisdiction”, are approved to connect to the City Sewer with a Service Annexation Agreement, however, these instances only include properties within the Urban Growth Boundary. Therefore, this property shall install a septic system and not connect to the City Sewer.

Thank you,

Lance Baker

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Thank you,

Lance Baker

City of Grants Pass

Wastewater Collections Superintendent

lbaker@grantspassoregon.gov

(541) 450-6130

Application for Onsite Sewage Treatment System

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

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

A. Property Owner Information

Randall E. Mitchell — Name
17006 Abiqua RD NE, Silverton OR 97381 — Mailing Address (Street or PO Box, City, State, Zip Code)
503-873-2310 — Phone Number

B. Legal Property Description

36 — Township
06 — Range
13 — Section
AC 2300 — Tax Lot
_____ — Tax Account Number
_____ — Acreage or Lot Size

_____ — County
_____ — Subdivision Name
_____ — Lot
_____ — Block

Property Address: 2301 Upper River RD — Address; Grants Pass — City; OR — State; 97526 — Zip Code

Directions to Property: Take G St to 2301 Upper River Road. (NEAR LOOP)

C. Existing Facility / Proposed Facility / Water Information

Existing Facility:

☐ Single Family Residence

_____ Number of Bedrooms

☐ Other _____

Proposed Facility:

☒ Single Family Residence

4 Number of Bedrooms

☐ Other _____

Water Supply:

☐ Public _____ Name

☒ Private Well Proposed — Well, Spring, Shared

D. Type of Application

☒ Site Evaluation
☐ Construction
☐ Permit Repair
  ☐ Major ☐ Minor
☐ Alteration Permit
  ☐ Major ☐ Minor
☐ Renewal Permit
☐ Existing System Evaluation
☐ Permit Transfer
☐ Permit Reinstatement
☐ Authorization Notice for:
  ☐ Connecting to an Existing System Not in Use
  ☐ Replacing a Mobile Home or House with Another Mobile Home or House
  ☐ The Addition of One or More Bedrooms
  ☐ Personal Hardship
  ☐ Temporary Housing
☐ Other-please specify _____

If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes.

By my signature, I certify that the information I have furnished is correct, and hereby grant the Josephine County Onsite Septic and it's authorized agents permission to enter onto the above described property for the sole purpose of this application.

Jack Allen — Signature
3-4-21 — Date

JACK Oldham — Applicant's Name – Please Print Legibly
541 295 2124 — Applicant's Phone Number
bampaw516@gmail.com — Applicant's E-mail Address

1574 NE 7th ST GP — Applicant's Mailing Address

Applicant is the ☐ Owner ☒ Authorized Representative ☒ Licensed Septic Installer 38854

☐ Authorization Attached

JACK Oldham — Installer's Name

State of Oregon Department of Environmental Quality

NOTICE AUTHORIZING REPRESENTATIVE

I, RANDALL E. MITCHELL (Property Owner/Print Name), have authorized

Jack Oldham (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:

2301 UPPER RIVER ROAD [redacted] GPO 97526
(Property Sites or Road Address)

And described in the records of JOSEPHINE County as:

Township 36 Range 06 Section 13AC Map ID 36N06 Tax Lot #(s) 2300

PROPERTY OWNER:

Printed Name: RANDALL E. MITCHELL

Address: 17006 ABIQUA RD NE

City, State, Zip: SILVERTON, OR 97381

Phone: (503) 873-2310 Email: randy@randymitchellcpa.com

Signature: Randy Mitchell

AUTHORIZED REPRESENTATIVE:

Printed Name: JACK OLDHAM

Address: 1524 NE 7TH ST

City, State, Zip: G. P OR 97526

Phone: 541 295 2124 Email: hamptonsit@gmail.com

Signature: Jack Oldham

OREF

Sale Agreement # JL-1212021
Addendum # 1

ADDENDUM TO REAL ESTATE SALE AGREEMENT

This is an Addendum to: [X] Real Estate Sale Agreement [ ] Seller's Counter Offer [ ] Buyer's Counter Offer [ ] Other: _____

Buyer: Raymond Lee King, Veronica Lynn King

Seller: Randy Mitchell, JoAnn Mitchell

The real property described as: 2301 Upper River Road Loop, Grants Pass, OR 97526-9381

SELLER AND BUYER HEREBY AGREE THE FOLLOWING SHALL BE A PART OF THE REAL ESTATE SALE AGREEMENT REFERENCED ABOVE.

1. Buyers request permission to dig test holes for septic permit.

2. Buyers request to extend the due diligence period for an additional 2 weeks to allow for further review.

3. Buyers request test hole for ~~well~~ SEPTIC

Buyer Signature: Raymond Lee King — Date 3/1/21, 12:00 a.m. X p.m. ←

Raymond Lee King

Buyer Signature: Veronica Lynn King — Date 3/1/21, 12:00 a.m. X p.m. ←

Veronica Lynn King

Seller Signature: _____ — Date _____, _____ a.m. ___ p.m. ←

Randy Mitchell

Seller Signature: _____ — Date _____, _____ a.m. ___ p.m. ←

JoAnn Mitchell

Buyer's Agent: _____ Seller's Agent: _____

Century 21 JC Jones, 888 NW 6th St Grants Pass, OR 97526 Phone: (541)291-1384 Fax: Ung
Julie Lozano Produced with Lone Wolf Transactions (zipForm Edition) 230 Shearson Cr. Cambridge, Ontario, Canada N1T 1J5 www.lwolf.com

JACK Oldham
DEQ 38854
541 295 2124
bampaw5186@mail.com

SEE MAP 36 6 13 B

SEE MAP 36 6 13 D

UPPER RIVER LOOP ROAD

FORD STREET

HUDSON

MERCU LANE

RIVER ROAD ESTATES

PARTITION PLAT

C.S. 131-67

TRACT B

TRACT C

600 1.59 Ac.

700 1.56

2200 2.38 Ac.

2300 2.12 Ac.

241 0.43 Ac.

242 0.25 Ac.

240 2.15 Ac.

205 0.23 Ac.

219 0.18 Ac.

218 0.18 Ac.

217 0.18 Ac.

216 0.18 Ac.

215 0.18 Ac.

214 0.19 Ac.

213 0.19 Ac.

212 0.19 Ac.

211 0.19 Ac.

210 0.19 Ac.

209 0.18 Ac.

208 0.18 Ac.

207 0.18 Ac.

206 0.19 Ac.

204 0.19 Ac.

203 0.19 Ac.

202 0.19 Ac.

201 0.21 Ac.

233 0.19 Ac.

234 0.19 Ac.

236 0.19 Ac.

238 0.19 Ac.

Fd. 1 1/2" I.P. CTR. SEC. 13

THIS MAP WAS PREPARED FOR ASSESSMENT PURPOSE ONLY

0 100 200 Feet

S.W.1/4 N.E.1/4 SEC.13 T.36S. R.6W. W.M.
JOSEPHINE COUNTY
1 " = 100 '

36 06 13AC
GRANTS PASS

CANCELLED:
200
2000
2100
241
900
908
1100
1500

HUDSON LANE

SEE MAP 36S 06W 13A

1/16 COR.

FD 3/4" IR

300
3.47 AC.

CS 43-85

400
0.25 AC.

CS 116-69

500
1.77 AC.

600
1.59 AC.

700
1.56 AC.

5

224 0.18 AC. 24
223 0.18 AC. 23
222 0.18 AC. 22
221 0.18 AC. 21
220 0.18 AC. 20
219 0.18 AC. 19
218 0.18 AC. 18
217 0.18 AC. 17
216 0.18 AC. 16
215 0.18 AC. 15

HUDSON LN

225 0.18 AC. 25
226 0.22 AC. 26
227 0.26 AC.
228 0.18 AC. 28
229 0.18 AC. 29
230 0.18 AC. 30

100
1.25 AC.

800
0.63 AC.

PARTITION PLAT 2002-38

SW BUSH DR

906 0.20 AC
907 0.22 AC
PHASE 1
8
9

MERCURY LN

233 0.19 AC.
231 0.19 AC.
901 0.18 AC
902 0.17 AC
903 0.17 AC
904 0.17 AC
905 0.17 AC
906 0.18 AC
CAPITAL HILL
1 2 3 4 5

234 0.19 AC. 33
232 0.20 AC. 32
235 0.22 AC. 34
236 0.19 AC. 35
237 0.26 AC. 36
238 0.19 AC. 37
239 0.21 AC. 38
39

1000
0.28 AC.

1200
0.28 AC.

1101 0.05 AC

1300
0.35 AC.

TRACT B

CS 77-2000

1400
0.35 AC.

TRACT C

CAPITAL HILL PHASE 2

SEE MAP 36S 06W 13AD

LINCOLN RD

FORD ST

1501 0.06 AC

TRACT D

1600
0.34 AC.

TRACT E

APPROX CENTER LINE OF HILLSIDE LATERAL BY DV 162-165

1700
0.17 AC.

1800
0.97 AC.

1900
0.70 AC.

FAIRFIELD
910 0.14 AC

SEE MAP 36S 06W 13B

UPPER RIVER LOOP RD

2200
2.38 AC.

PARTITION PLAT 2003-34

2300
2.12 AC.

PARTITION PLAT 2003-93

CS 131-67

243 0.24 AC.
244 0.19 AC.
211 0.19 AC.
212 0.19 AC.
213 0.19 AC.
214 0.19 AC.

15

FORD ST

242 0.25 AC.
210 0.19 AC.
209 0.18 AC.
208 0.18 AC.
207 0.18 AC.
206 0.19 AC.
205 0.23 AC.
204 0.19 AC.
203 0.19 AC.
202 0.19 AC.
201 0.21 AC.
240
2.15 AC.

RIVER ROAD ESTATES

TRACT A

ACCESS CONTROL

FD 1 1/2" IP

CEN. SEC.

UPPER RIVER LOOP RD

SEE MAP 36S 06W 13D

FD BRASS CAP 1/16 COR.

36 06 13AC
GRANTS PASS