



Certificate of Satisfactory Completion
Repair (Major) - Residential - New
463-21-000027-PRMT

Josephine Onsite Septic Program
700 NW Dimmick Street
Suite A
Grants Pass, OR 97526
541-474-5444
Fax: 541-474-5422
onsitesepctic@josephinecounty.gov
Website: josephine.or.us

Date Certificate Issued: 04/09/2021

Work Description: Septic System Repair

Applicant: Rolando Hernandez
Address: 109 Cumberland Drive
Grants Pass OR 97527
Phone: 5416602953
Email: rolando@beelerexcavation.com

Contractor: Beeler Excavation, LLC
Installer License: 37834
Address: 109 Cumberland Dr
Grants Pass OR 97527
Phone: (541) 660-2953
Email: dominic@beelerexcavation.com

Owner: GOODRICH TRUST, TIMOTHY
LYNN
Address: %GOODRICH, PATRICIA D TPO
BOX 690
%GOODRICH, PATRICIA D
TRUSTEE
PO BOX 690
MURPHY MURPHY, OR 97533
97533

Property Address: 1390 Murphy Creek Rd, Grants Pass,
OR 97527

Parcel: 3706360000020500 - Primary

Lot Size:	9.17	Water Supply:	Well
Zoning:	N/A	City/County/UGB:	County
Land Use Approval:	N/A		

Category of Construction: Residential

	Existing	Proposed
Use of Structure:	3BDR SFR	N/A
Number of Bedrooms:	3	N/A

System Specifications

Type:	Alternative Treatment Technology (ATTs)	ATT Description:	AQUA SAFE-AS500L
Max Peak Design Flow:	375 gpd.	Proposed Flow:	375 gpd.
Min Septic Tank Volume:	1000 gal.	Min Dosing Tank Volume:	N/A

Drain Field Specifications

Drain Field Type:	Standard	System Distribution Type:	Serial
Drainfield Sizing:	N/A	Distribution Method:	Serial
Media Type:	EZ FLOW 1201P	Media Depth:	N/A
Trench Length:	120 linear ft.	Rock Above Pipe:	N/A
Max Depth:	30 in.	Undisturbed Soil Between Trenches:	N/A
Min Depth:	24 in.	Capping Fills-Min Depth of Fill Material:	N/A

Special Requirements

Pump to Drainfield Required:	Yes	Filter Fabric on Top of Drain Media:	Yes
Rake Trench Sidewalls:	Yes		

Date Certificate Issued: 04/09/2021

Work Description: Septic System Repair

Conditions of Approval

- 1.This repair permit is for 3BDR SFR.
- 2.A failing system must be repaired as soon as possible. Should the repair of this system be delayed, the property owner must notify the agent and provide the reasons for delay, and propose a different completion date. Delays may be cause for formal enforcement action, which may result in civil penalty assessments.
- 3.If there are discharges of sewage or septic tank effluent onto the ground surface or into public waters, the property owner must take immediate steps to minimize the threat to public health and the environment. These steps must include at a minimum:
- 4.Having the existing septic tank pumped, the outlet plugged, and the tank utilized as a temporary holding tank until repair of the system is complete.
- 5.Securing the area of both contaminated and saturated soils with barricades, roping, caution tape and the posting of warning notices. The notice must read, "Warning - This Area is Contaminated with Sewage - Please Stay Out" or similar language.
- 6.Treating the affected area of contaminated/saturated soil with either a calcium carbonate compound (lime) or other type of sanitizing compound.
- 7.The system must be installed by the property owner or a licensed sewage disposal business (installer).
- 8.Vehicular traffic and livestock must be restricted from the system area.
- 9.All roof drains must be directed away from the system
- 10.Meet all required setbacks
- 11.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.
- 12.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.
- 13.The pump and alarm must be wired on separate circuits in the control panel. Pump wiring must comply with applicable building, electrical, or other codes. An electrical permit and inspection from the Department of Consumer and Business Services, Building Codes Division, or the municipality with jurisdiction, is required for pump wiring installation.
- 14.Install the pump and system components in accordance with the approved pump curve and specifications.
- 15.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.
- 16.Each drainfield trench must be level within a tolerance of plus or minus 1-inch.
- 17.Serial distribution, each trench bottom to be level and on contour. Use Drop box(es).
- 18.A pre-cover inspection of the installed absorption facility (prior to backfill) is required.
- 19.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.
- 20.Photos of the septic system components must be submitted along with the FIRN.
- 21.This permit is for the installation of an Alternative Treatment Technology (ATT) system and is to be installed by a person certified by the system manufacturer in accordance with OAR 340-071-0600 and 0650. See Alternative Treatment Technology rules at OAR 340-071-0345.
- 22.The ATT system must be designed to prevent untreated waste from passing into the absorption field if the treatment system malfunctions.
- 23.The septic tank must be approved for use with the ATT system to be installed.
- 24.In addition to the As-Built and Materials List, a Start-Up checklist from the ATT maintenance provider is required to Final this permit.
- 25.The owner of an ATT system must maintain a contract with a maintenance provider certified by the manufacturer to inspect, adjust and maintain the onsite system. The maintenance provider must submit an annual report and annual evaluation fee.

Date Certificate Issued: 04/09/2021

Work Description: Septic System Repair

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

Comments: N/A

Gabriel Kasiah

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

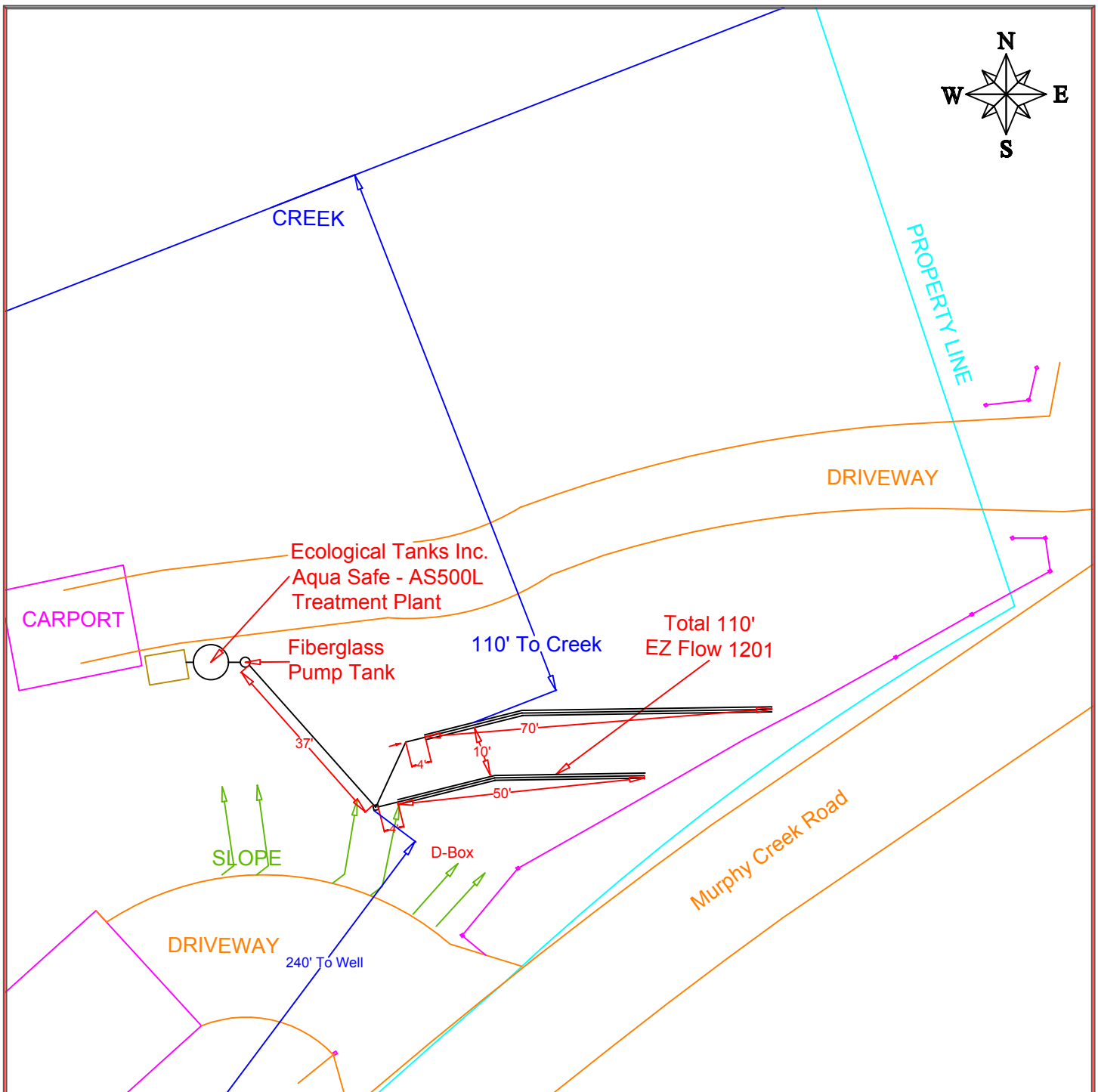
ATTENTION: Oregon law requires you to follow rules adopted by the Oregon Utility Notification Center. Those rules are set forth by Oregon Administration Rules. You may obtain copies of the rules by calling the center. (Note: The telephone number for the Oregon Utility Notification Center is 1-800-332-2344.)



Worksite Information
1390 Murphy Creek
Grants Pass, Oregon

April 2, 2021

AS BUILT



Final Inspection Request and Notice - Septic ID: 463-21-000027-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/Permittee Information:**Name:** GOODRICH TRUST, TIMOTHY LYNN**Twnshp:****Range:****Sect:****Lot:**

Property 1390 MURPHY CREEK RD, GRANTS PASS, OR
Address: 97527

SECTION 2: System Component Specifications:

A. Tanks/Pumps		System Type:		Water tight verification*	
Tanks(1)	Volume:	Compartments:	Manufacturer:	Date:	
Tanks(2)	Volume:	Compartments:	Manufacturer:	Date:	
Pump(s)	HP:	Model/Manuf.	Float(s)Type(1):	Model/Manuf.	
			Float(s)Type(2):	Model/Manuf.	

B. Piping

Effluent Sewer (tank to drainfield)	Yes	No	Diameter:	ASTM#/Other:	Length: 35"
Pressure Transport Pipe	☒	No	Diameter: 1.25"	ASTM#/Other: PVC Schedule 40	Length:

C. Secondary Treatment Unit:

Sand Filter**	Yes	No	Type:	Container Dimensions:
Underdrain pipe	Diameter:		ASTM#/Other:	Length:
Manifold piping	Diameter:		ASTM#/Other:	Length:
Internal Pump	HP:		Model/Manufacturer	
Floats(1)	Type:		Model/Manufacturer	
Floats(2)	Type:		Model/Manufacturer	
ATT	☒	No	Model: AquaSafe AS500L	
Certified Maint.	Provider Name: Aerobic Septic Systems, 541-580-4102			
Operation and Maint.	Contract Received?		☒	No

D. Drainfield Media

Type	(Gravel, Pipe or alternative?) EZ Flow 1201 (120')			
Distribution Box	Yes	☒	No	
Drop Box	Yes	☒	No	
Distribution Pipe	Yes	☒	No	Diameter: 4" ASTM#/Other: 3034 Length: 120'
Comment				

*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.

See Attached

SECTION 4 - Construction was performed by (Signature Required)

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

Owner/Permittee or Certified Installer w/Certification#:		Print Name: Dominic Florez of Beeler Excavation	
Licensed Installer:	☒ Yes ☐ No	License#: DEQ 37834	Certification#: I 2698
Owner/ Certified Installer:	Signature:		Date: 04/02/2020 Phone#: 541-660-2953

SECTION 5 - Office Use Only:

Notice Accepted	Yes	No	Date:	Installer/Owner (Permittee) Notified:	Yes	No	Date:

If No, Reason for Non Acceptance: _____

Comment: _____



















Septic Permit
Repair (Major) - Residential - New
463-21-000027-PRMT

Josephine Onsite Septic Program
700 NW Dimmick Street
Suite A
Grants Pass, OR 97526
541-474-5444
Fax: 541-474-5422
onsitesepctic@josephinecounty.gov
Website: josephine.or.us

Date issued: 3/18/21

Expiration date: 3/18/22

Work description: Septic System Repair

Applicant: Rolando Hernandez
Address: 109 Cumberland Drive
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Email: rolando@beelerexcavation.com

Contractor: Beeler Excavation, LLC
Installer License: 37834
Address: 109 Cumberland Dr
Grants Pass OR 97527
Phone: (541) 660-2953
Email: dominic@beelerexcavation.com

Business License: N/A

Owner: GOODRICH TRUST, TIMOTHY
LYNN
Address: %GOODRICH, PATRICIA D TPO
BOX 690
%GOODRICH, PATRICIA D
TRUSTEE
PO BOX 690
MURPHY MURPHY, OR 97533
97533

Property address: 1390 Murphy Creek Rd, Grants Pass,
OR 97527

Parcel: 3706360000020500 - Primary

Lot size:	9.17	Water supply:	Well
Zoning:	N/A	City/County/UGB:	County
Land use approval:	N/A	County:	N/A
Action:	New	Type of application:	Repair (Major) - Residential
System failing:	Yes	Septic tank last pumped:	01/14/2021
Comments:	N/A		

Category of construction: Residential

	Existing	Proposed
Use of structure:	3BDR SFR	N/A
Number of bedrooms:	3	N/A

System Specifications

Type:	Alternative Treatment Technology (ATTs)	ATT description:	AQUA SAFE-AS500L
Max peak design flow:	375 gpd.	Proposed flow:	375 gpd.
Min septic tank volume:	1000 gal.	Min dosing tank volume:	N/A

Drain Field Specifications

Drain field type:	Standard	System distribution Ttype:	Serial
Drainfield sizing:	N/A	Distribution method:	Serial
Media type:	Other - Indicate Product/Manufacturer	Media depth:	N/A
Media type description:	EZ FLOW 1201P		
Trench length:	112.5 linear ft.	Rock above pipe:	N/A
Max depth:	30 in.	Undisturbed soil between trenches:	N/A

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

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Date issued: 3/18/21

Expiration date: 3/18/22

Work description: Septic System Repair

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

Pump to drainfield reqd:	Yes	Filter fabric on top of drain media:	Yes
Rake trench sidewalls:	Yes		

Date issued: 3/18/21**Expiration date:** 3/18/22**Work description:** Septic System Repair**Conditions of approval**

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 - 24.In addition to the As-Built and Materials List, a Start-Up checklist from the ATT maintenance provider is required to Final this permit.
 - 25.The owner of an ATT system must maintain a contract with a maintenance provider certified by the manufacturer to inspect, adjust and maintain the onsite system. The maintenance provider must submit an annual report and annual evaluation fee.

Date issued: 3/18/21**Expiration date:** 3/18/22**Work description:** Septic System Repair

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.

Gabriel Kasiah

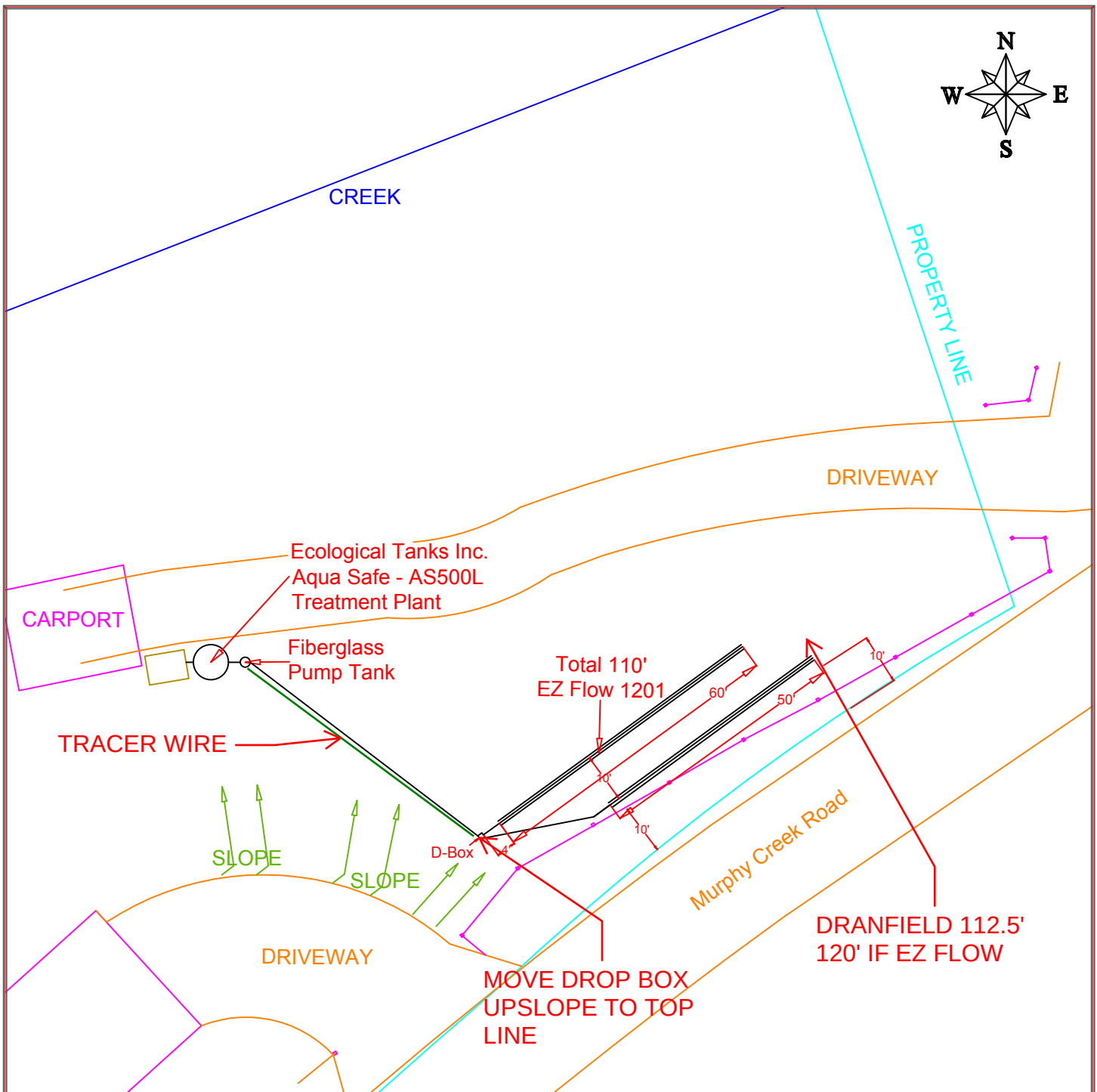
3/18/21



Worksite Information
1390 Murphy Creek
Grants Pass, Oregon

March 10, 2021

Site Plan

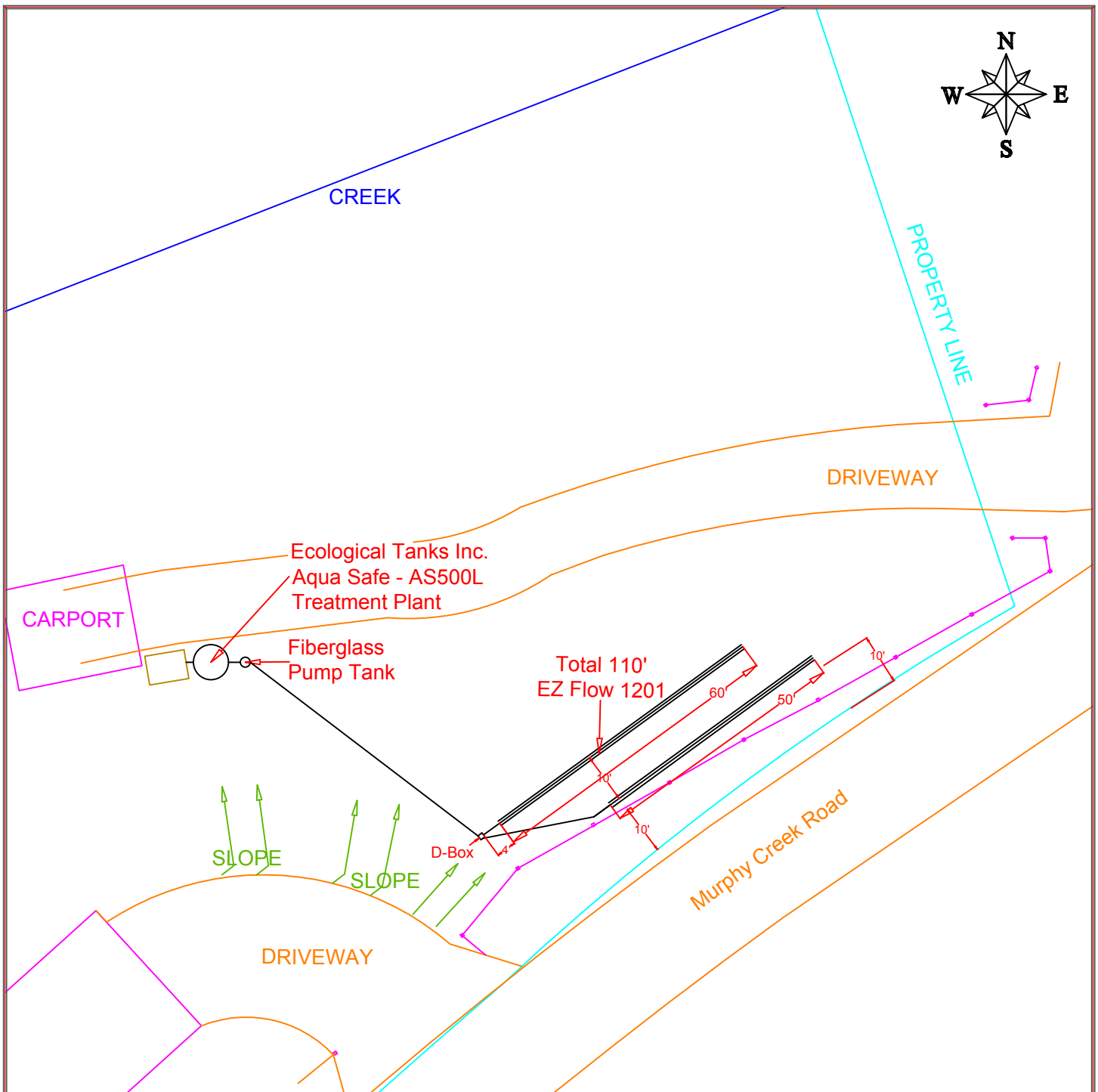




Worksite Information
1390 Murphy Creek
Grants Pass, Oregon

March 10, 2021

Site Plan



280-SERIES

Cast Iron Submersible Sump/Effluent Pump

Liberty Pumps®

A Family and Employee Owned Company

1/2 hp

1-1/2" Discharge

3/4" Solids Handling

Features

- Liberty Pumps unique, one-piece "Uni-Body" casting
- Quick-connect 10' standard power cord allows replacement of cord in seconds without breaking seals to motor (other lengths available)
- Permanently lubricated upper and lower bearings
- Oil-filled, hermetically sealed motor with thermal overload protection
- Stainless-steel removable bottom screen
- Stainless-steel rotor shaft
- Stainless-steel fasteners

115V Models

280 Manual

281 Wide-Angle Float Switch with Quick-connect

283 Wide-Angle Float Switch, Series Plug

287 Vertical Magnetic Float (VMF) Switch for heavy-duty sump pump applications

208-230V Models

280HV Manual

281HV Wide-Angle Float Switch with Quick-connect

283HV Wide-Angle Float Switch, Series Plug

287HV Vertical Magnetic Float (VMF) Switch

Wide-angle float switches are mercury-free, mechanically activated.



Available with
Vertical Magnetic
Float Switch



innovate. evolve.

280-Series

Impeller

Vortex style engineered polymer

Paint

Powder coat

Max Fluid Temperature

140°F (60°C) Intermittent
104°F (40°C) Continuous duty

Motor Specifications

1/2 hp 8A (115V) 4A (208/230V)
Oil-Filled; Thermally Protected
(PSC) Permanent Split Capacitor

Power Cord Type

SJTW (10' and 15' models)
SJTOOW (35' and 50' models)

Motor Housing

Class 25 cast iron

Dimensional Data

Weight: 29 lbs
Height: 13"
Major Width: 10" (Model 287)

Shaft

Stainless

Hardware

Stainless

Mechanical Shaft Seal

Unitized ceramic carbon

Bearings

Upper and lower ball bearings

Minimum Sump Diameters

Models 281, 283 14"
Model 287 10"

FACTORY SWITCH SETTINGS	MODELS 281 & 283	MODEL 287
Turn on level	13"	9.5"
Turn off level	7"	4"

The Model 283 features a fully adjustable wide-angle float switch. Differential adjustments can be made easily by tethering the float switch to the discharge pipe or other mounting point. Vertical float switch Model 287 is not adjustable.

Cord Lengths

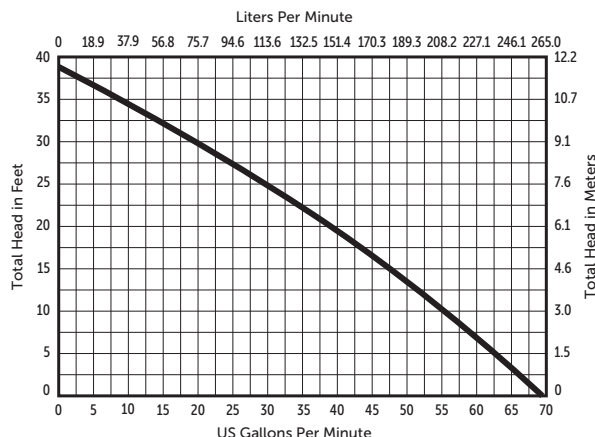
MODEL	10'	25'[-2]	35'[-3]	50'[-5]
280	Standard	Optional	Optional	Optional
281	Standard	Optional	Optional	Optional
283	Standard	Optional	Optional	N/A
287	Standard	Optional	N/A	N/A

10' cord length standard on all models. For optional lengths, add "-2, -3 or -5" suffix to model number.

Example: for model 280 with 35' cord, order 280-3

Performance Curve

60 Hz, 3450 RPM

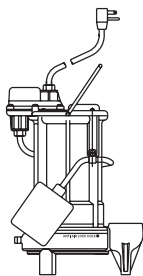


Effluent Models

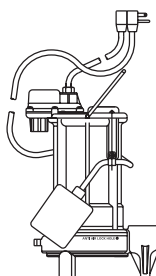
Sump Models



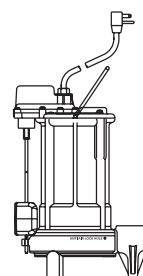
Model 280
Manual,
no float switch



Model 281
Wide-angle
float switch
with Quick-
connect



Model 283
Wide-angle
float switch
with series
(piggyback)
plug



**Model 287
VMF-Series**
Vertical magnetic
float switch for
smaller pits – will
operate in a 10"
diameter sump

Mike Arts Septic Service
337 Driver Valley Rd
Oakland OR 97462

2-year Ecological Tanks Inc. Service Contract

For the State of Oregon

Parties: (Authorized Service Provider)

Name : Mike Arts Septic Service
Address: 337 Driver Valley Rd
City, State, Zip Code: Oakland OR 97462
Telephone: 541-580-4102
Fax: 866-283-2928
Email: Mikeartssepticsservice@gmail.com

And: (Customer)

Name : [Reed Smith or Patricia Goodrich](#)
Address: [1390 Murphy Creek Road, Grants Pass, OR](#)
Telephone : [775-378-7060](#)
Email : Themurpheylady@frontier.com

System Location: Same
Address:
City, State, Zip Code:
Legal Description :
GPS Coordinates : N° W°

Installed by: Beeler Excavation

Serial #:

Permit #:

Agency Contact Information -

Agency : Josephine Onsite Septic Program
Address: 700 NW Dimmick Street, Suite A
City, State, Zip Code: Grants Pass, OR 97526
Telephone : 541-474-5444
Email : onsiteseptic@josephinecounty.gov

NOW, THEREFORE, in consideration of the terms, provision, covenants and conditions herein, the Parties here to agree as follows:

1.0 Performance of Basic Services

1.1 Initial Service Policy

The Authorized Service Provider shall perform the System Inspection/Service Visits during the 24-month period after installation, as marked:

Inspection/Service Visits ¹	6 th month	<u>1</u>
	12 th month	<u>1</u>
	18 th month	<u>1</u>
	24 th month	<u>1</u>

¹As required by NSF, these services will be included as part of the initial purchase of the system.

These services shall be performed during normal business hours Monday through Friday (excluding national holidays) on twice annual basis and as the Authorized Service Provider deems necessary or advisable.

At each service visit the System shall be inspected and serviced in accordance with the instructions in the Systems O & M Manual. Additionally, as effluent quality inspection consisting of a visual assessment of color, and scum overflow and an olfactory assessment for odor shall be performed.

The Service Provider will affix a "For Service, Call" label near the control panel's alarm signal and fill in his or her phone number.

Performance of the 2-year Inspection/Service visits shall include notification of needed repair, replacement or addition of parts used in the system.

The Service Provider shall be responsible for submitting the annual report and annual evaluation fee to the appropriate regulatory agency as required in OAR-071-0345.

The Service Provider shall notify the owner in writing if any improper system operation cannot be remedied at the time of servicing. The written notification shall include an estimated date of correction.

1.2 Extended Service Policy

The Service Provider shall make available for purchase by owner an extended service policy with terms comparable to those in the initial service policy.

1.3 Stand By Parts

In the event that a mechanical or electrical component must undergo off site repairs the local authorized representative should maintain a stock of mechanical and electrical components that may be temporally installed until repairs are completed.

1.4 Availability of Service

The service provider shall provide emergency service within 48 hours of service request.

2.0 Term of Agreement

The agreement shall be for the period 24 months from the date of the system start up unless otherwise terminated or cancelled by either party as provided herein

3.0 Definitions

For purposes of the agreement the following definitions shall apply:

- 3.1 System shall mean a ANS/NSF 40 certified wastewater treatment system.
- 3.2 "System Start-Up Date" shall mean the date the System begins operating for its intended purpose.

4.0 Charges

The basic services including service, inspection, effluent quality evaluation, and service, shall be included with the purchase of the System, Optional, additional services shall be provided at the agreed upon contract price and terms. The annual report and annual evaluation fee required by DEQ is not optional, and may or may not be included in the cost of basic services. Refer to Service Providers fee schedule for an outline of the cost of basic services and optional services to be provided under this contract.

5.0 Warranty

The Ecological Tanks provider warrants that all services shall be performed in a good and workman like manner and that service provider will correct any system errors, malfunctions, defects directly caused by service provider's failure to perform the services and additional services in such manner.

6.0 Limitation of Liability

The sole liability of the Service Provider under this agreement shall be to correct any errors, malfunctions, or defects in the system directly caused by the Ecological Tanks Providers failure to perform any services in good and workmanlike manner pursuant to section 4 above. In no event should the Service provider's liability to the customer hereunder exceed the total of the amounts paid to the service provider hereunder by the customer. In no event shall the Service Provider be liable to the customer or any other third party claimant for any indirect, special, punitive, consequential or incidental damages or lost profits arising out of or related to this agreement or the performance or breach thereof, whether based upon a claim or action of contract, warranty, negligence, or strict liability or other tort. Breach of any statutory duty, indemnity or contribution or otherwise, even if the service provider has been advised of the possibility of such damage.

7.0 Termination/Cancellation

This agreement may be terminated or cancelled only upon:

- Written notice by one Party effective as of the effective date thereof if the other Party is in default of any provision of this Agreement and such default is not cured by the defaulting Party within fifteen (15) days after the effective date of said notice from the non-defaulting party, or by the mutual agreement of both Parties.
- Copy of such written notice shall be forwarded to the regulatory agency.

8.0 Miscellaneous Provisions

This agreement is personal in nature and may not be delegated, assigned or transferred by either Party without the prior written consent of the other Party.

The laws of the State of Oregon shall govern the Agreement.

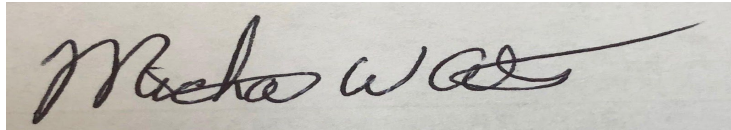
The homeowner shall be responsible for complying with the Ecological Tanks inc Installation, Operation & Maintenance Manual provided to them with the purchase of the system.

Any notice or other communication required or permitted to be given under this Agreement shall be in writing and shall be mailed by certified mail, return receipt requested, postage prepaid, addressed to the Parties at the addresses shown on the first page of the Agreement. Any notice or other communication shall be deemed given at the expiration of the second day after the date of deposit in the United States mail. The addresses to which notices or other communications shall be mailed may be changed from time to time by giving written notice to the other Party as provided in this Section.

This two year maintenance contract only valid when system is purchased thru Aerobic Septic Systems- Mike Arts Septic Service.

Ecological Tanks Service Provider

Name: Mike Arts DEQ# M-304
Title: Oregon Certified Service Provider
Phone: 541-580-4102
Signature:



Customer

DocuSigned by:

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Signature

3/16/2021

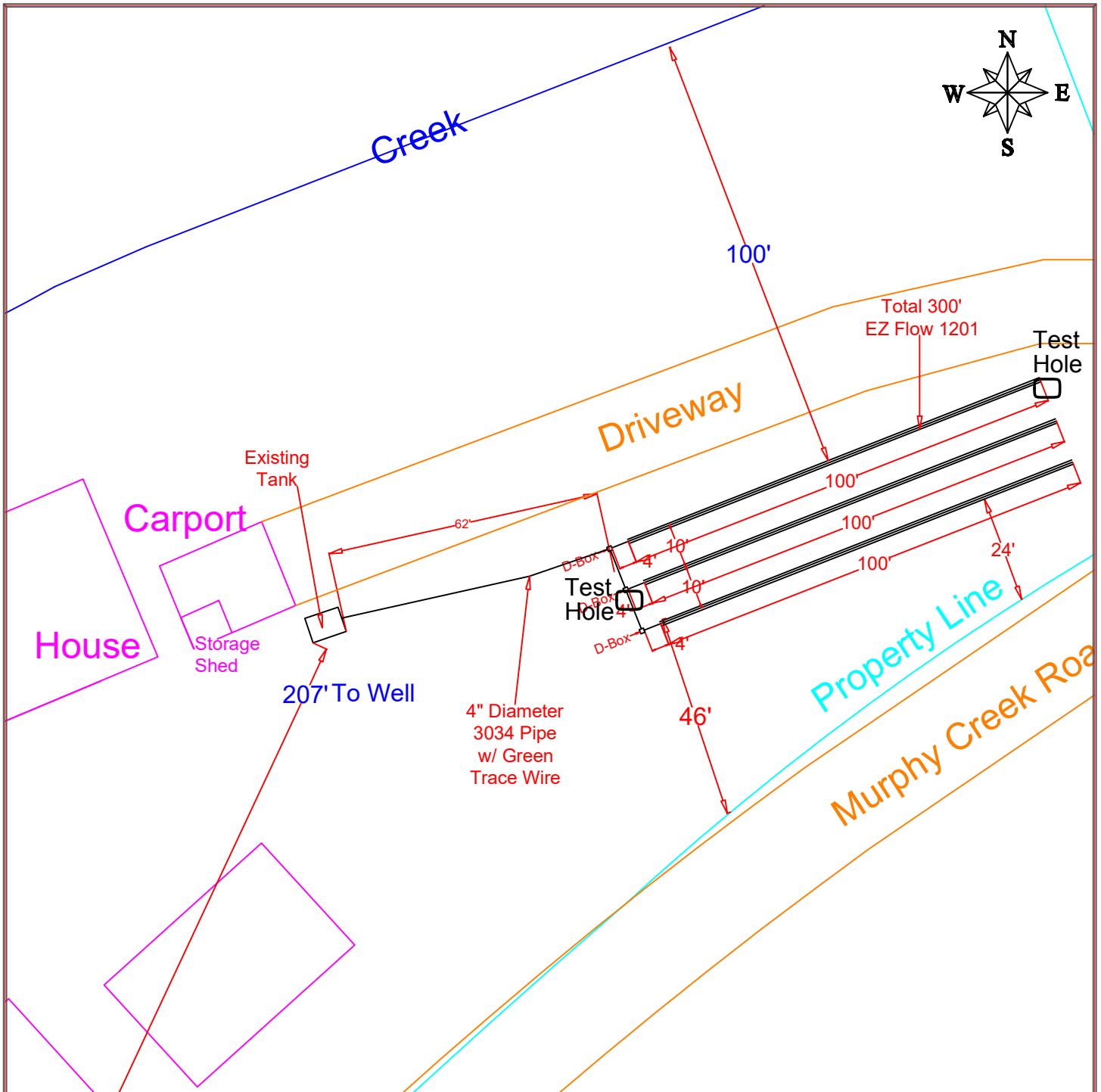
Date



Worksite Information
1390 Murphy Creek
Grants Pass, Oregon

January 26, 2021

Site Plan

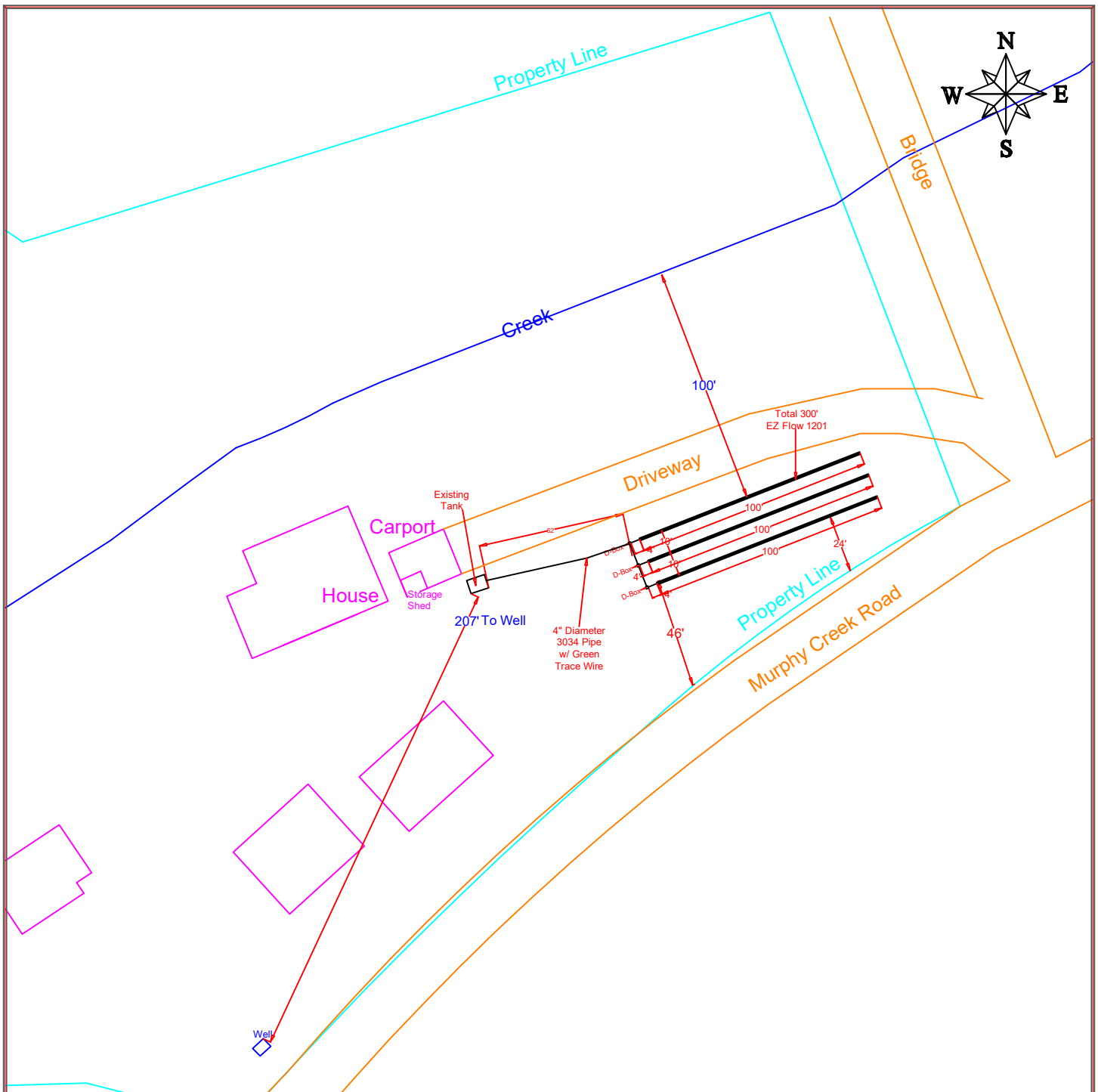




Worksite Information
1390 Murphy Creek
Grants Pass, Oregon

January 26, 2021

Plot Map





State of Oregon
Department of
Environmental
Quality

NOTICE AUTHORIZING REPRESENTATIVE

Dominic Florez

I, **Reed Smith**, have authorized **of Beeler Excavation** 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 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:

1390 Murphy Creek, Grants Pass, Oregon

(Property Situs or Road Address)

And described in the records of **Josephine** County as:

Township **37** Range **06** Section **36** Map ID **00** Tax Lot #(s) **000205**

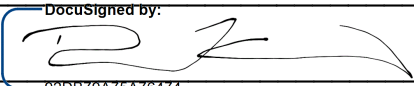
PROPERTY OWNER:

Printed Name: **Reed Smith**

Address: **1390 Murphy Creek**

City, State, Zip: **Grants Pass, Oregon**

Phone: **7753787060** Email: **smith.reed8@gmail.com**

Signature: 
92DB79A75A76474...

AUTHORIZED REPRESENTATIVE:

Printed Name: **Dominic Florez of Beeler Excavation**

Address: **109 Cumberland Drive**

City, State, Zip: **Grants Pass, OR 97527**

Phone: **541-660-2953** Email: **dominic@beelerexcavation.com**

Signature: **Dominic Florez**

SECTION 1 - TO BE COMPLETED BY APPLICANT (may be filled in electronically by tabbing to each field)

1. Applicant Name/Property Owner: Dominic Florez of Beeler Excavation
Mailing Address: 109 Cumberland Drive
City, State, Zip: Grants Pass, OR 97527
Telephone: 541-660-2953

2. Property Information:

County: Josephine Tax Lot No.: 000205
Township: 37 Range: 06 Section: 36
Physical Address: 1390 Murphy Creek Grants Pass, Oregon
Block: _____ Lot: _____
Subdivision Name (if applicable): _____

3. This proposed facility is for:

- ☐ An individual, single-family dwelling.
☐ Other. Describe the type of development, business, or facility and the provided services or products:

4. Permit or approval being requested:

- ☒ Construction-Installation permit for: ☒ New Construction ☐ Repair ☐ Alteration
☐ Non-water-carried facility requests (for example, pit privy/vault toilet for campgrounds).
☐ Authorization Notice for: ☐ Replacement of dwelling ☐ Bedroom addition
☐ Other changes in land use involving potential sewage flow increases

SECTION 2 - TO BE COMPLETED BY CITY OR COUNTY PLANNING OFFICIAL

5. Property Zoning: RR-5 Zoning Minimum Parcel Size: 5.0 acres

6. The facility is located: ☐ inside city limits ☐ inside UGB ☒ outside UGB

If inside UGB, the proposed facility is subject to:

☐ City jurisdiction ☒ County jurisdiction ☐ Shared City/County jurisdiction

7. Does the proposed facility comply with all applicable local land use requirements? ☒ Yes ☐ No

If you answered "Yes" above, was this compliance based on:

- ☒ Outright compliance with local comprehensive plans and land use requirements (provide a citation to the applicable provisions)
☐ Conditional approval (provide findings and citation or attach a copy of the applicable land use decision)
☐ Measure 49 waiver (provide Department of Land Conservation and Development approval number)

Either provide reasons for affirmative compliance decision or attach findings of fact: Per Section 19.6(1)(20.1), JCC

a single-family dwelling or manufactured dwelling is a permitted use in the RR zone. Please see attached WLUN. Permits from DSL may be required. Septic system to be connected to authorized structures/uses only.

8. Planning Official Signature: Kayla Wallace

Print Name: Kayla Wallace, CFM Title: Associate Planner

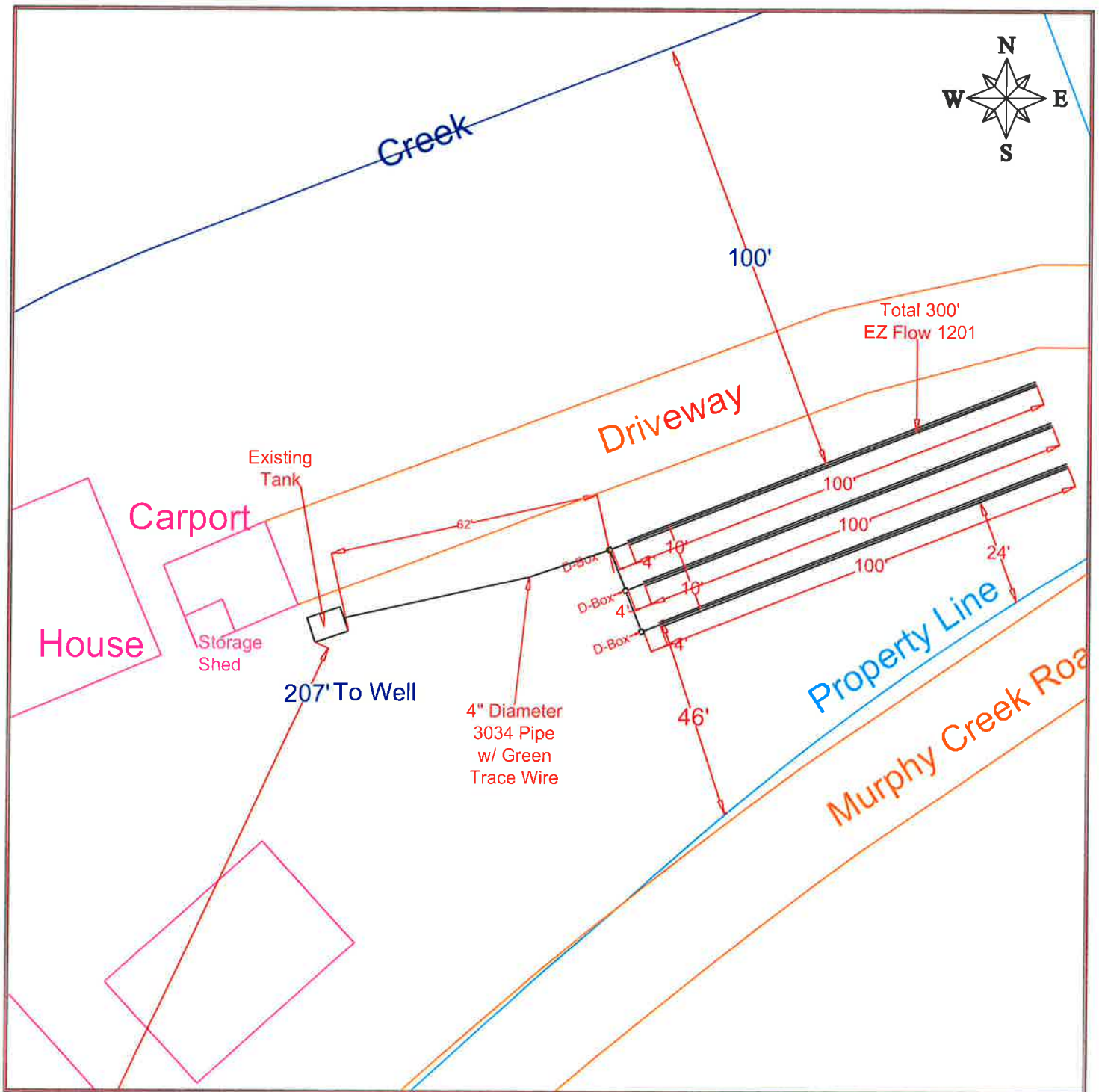
Telephone: 541-474-5427 Date: January 28, 2021



Worksite Information
1390 Murphy Creek
Grants Pass, Oregon

January 26, 2021

Site Plan





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

Receipt Number: PL21-00098

(541) 474-5421
planning@josephinecounty.gov

Payer/Payee: DOMINIC FLOREZ
109 CUMBERLAND DR
GRANTS PASS OR 97527

Cashier: ONLINE PAYMENT

Date: 01/27/2021

Primary Parcel: 37063600000205 **Project Description:** Septic System Repair

PL-2021-00161 LAND USE INFORMATION RESPONSE 1390 MURPHY CREEK RD

<u>Fee Description</u>	<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Fee Balance</u>
Land Use Information Response	\$125.00	\$125.00	\$0.00
	\$125.00	\$125.00	\$0.00

<u>Payment Method</u>	<u>Reference Number</u>	<u>Payment Amount</u>
ONLINE PAYMENT	87974375	\$125.00

Total Paid: \$125.00