



# Septic Site Evaluation

246-24-000181-EVAL

DEQ Coos Bay Office  
465 Elrod Ave  
Coos Bay, OR 97420  
541-269-2721  
Fax: 541-269-7984  
OnsiteCoosBay@deq.state.or.us  
Website: oregon.gov/deq

Date evaluation denied: 08/13/2024  
Application status: Denied  
Work description: Robbins - Site Evaluation

**Applicant:** Kelly & Toni Robbins  
**Address:** 1820 East Cedar Street  
Myrtle Point OR 97458  
**Phone:** 541-260-4286  
**Email:** sweetstrikes@gmail.com

**Owner:** KELLY & TONI ROBBINS **Property address:** 0 Hwy 42, Myrtle Point, OR 97458

**Address:** 1820 EAST CEDAR STREET  
MYRTLE POINT OR 97458

**Parcel:** 29S11W34600 - Primary **Township:** 29S **Range:** 11W **Section:** 34

**Lot size:** 8.95 Acres **Water supply:** Well  
**Zoning:** N/A **City/County/UGB:** N/A  
**Accessory Dwelling Unit:** No **County:** Coos

**Directions to Property:** East on Hwy 42 from Myrtle Point. Approx 3/4 mile East of Bridge to driveway directly across highway from Weeping Willow Lane. When you see the sign Weeping Willow Lane, turn Left directly across the highway.

NOTE: The driveway is steep and has loose gravel.

**Proposed use of structure:** SFD  
**Category of construction:** Single Family Dwelling

### General Specifications

**Comments:** This site is not suitable for onsite wastewater treatment due to slopes exceeding effective depth capacity. OAR 340-71-0310 Steep slope systems general conditions for approval. Construction-installation permits may be issued for steep slope systems serving single-family dwellings on slopes in excess of 30 percent if all the following requirements can be met.

- (a) Slope does not exceed 45 percent.
- (b) The soil is well-drained with no evidence of saturation to a depth of 60 inches.
- (c) The soil has a minimum effective soil depth of 60 inches.

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

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

**Date evaluation denied:** 08/13/2024  
**Application status:** Denied  
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If you disagree with the decision of this report, you may apply for a site evaluation report review. The application for a site evaluation report review must be submitted to DEQ in writing within 60 days after the site evaluation report issue date and must include the site evaluation review fee in OAR 340-071-0140 Table 9A. A senior DEQ staff person will be assigned the site evaluation report review application.

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

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

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



**FIELD WORKSHEET**

Name: Kelly & Toni Robbins Application No.: 246-24-000101-Eva Date: 8/7/24  
 RE: **SITE EVALUATION REPORT for Parcel #:** \_\_\_\_\_

Commercial Facility:  Yes  No Parcel Size: 8.95 Acres

**APPROVED SYSTEM SPECIFICATIONS**

Design flow: 450 gpd Max Number of bedrooms: 4 Max Number of Employees: \_\_\_\_\_

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

**Additional Conditions of Approval**

- Any alteration of natural soil conditions (i.e. cutting or filling) in the acceptable area may void this approval.
  - Both the initial and replacement disposal areas are to be protected from traffic, cover, development, or other potential disturbance of natural soil conditions.
  - The area must not be subjected to excessive saturation due to, but not limited to, artificial drainage of ground surfaces, roads, driveways, and building down spouts.
  - This approval is given on the basis that the parcel described above will not be further partitioned or subdivided.
  - Placement of a well within 100 feet of the approved areas may invalidate this approval.
- A curtain drain is required, a minimum of \_\_\_\_\_ feet above the highest disposal trench.
  - The curtain drain must be a minimum of \_\_\_\_\_ inches deep, and installed in accordance with OAR 340-071-0220 (12).
  - Rake trench sidewalls.
  - The system must be installed during dry soil conditions only.
  - System must be installed between June 1 and October 1, unless otherwise approved by DEQ.

-Denied ESD on Steep Slope  
-Need more pits in less steep area or have ESD  
in those areas, down slope  
-WATER

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.			
Test Pit 1	0-28	L	15 yr 4/4	3vf, 3f, 2c	2c SBK	✓ F <sub>R</sub>
	28-40	SiCl	7.5 yr 4/4	2f	2vc SBK	F <sub>i</sub>
	40-60	SiCl	10 yr 4/4	2f	2 MASSIVE - 2c ABK	✓ F <sub>i</sub>
	60"			ESD - 60" DENIED FOR STEEP SLOPE		
Test Pit 2	0-29	L	17.5 yr 3/1	2c-2m/SBK	2vf, 2f	✓ F <sub>i</sub>
	29-39	L	" "	2c SBK	3vf, 1f	✓ F <sub>i</sub>
	39-60	Cl	10 yr 4/4 (m) 5/1	2vc SBK		Ø ROOTS MASSIVE
	60		ESD @ 39" roots 39' denied F <sub>c</sub>		Ø roots	MASSIVE
Test Pit 3						
Test Pit 4						
Test Pit 5						
Test Pit 6						

Landscape Notes: \_\_\_\_\_

Slope: ~~35%~~ 35% - 45% Aspect: S-SW Groundwater Type:  Permanent  Temporary

Other Site Notes: Pit #2 levels out down slope, need additional pits to approve standard, Denied for esd - steep slope 35% = 40' ESD  
 Pit #1 ~35%, downslope gets steeper, upslope approximately 30-35% undulating, need pits to prove ESD.

Application No.: \_\_\_\_\_



# Onsite Site Evaluation Application Verification 246-24-000181-EVAL

DEQ Coos Bay Office  
465 Elrod Ave  
Coos Bay, OR 97420  
541-269-2721  
Fax: 541-269-7984  
OnsiteCoosBay@deq.state.or.us  
Website: oregon.gov/deq

Application created: 7/23/24

Parcel Nbr: 29S11W34600

Site Address: 0 Hwy 42, Myrtle Point, OR 97458

Owner: KELLY & TONI ROBBINS  
(541) 260-4286

Applicant: Kelly & Toni Robbins - Kelly & Toni Robbins  
1820 East Cedar Street  
Myrtle Point, OR 97458

Phone: (541) 260-4286

Email: sweetstrikes@gmail.com

**Licensed Professional(s):**

No Licensed Professionals Designated

Category of Construction: Single Family Dwelling

County: Coos

Directions: East on Hwy 42 from Myrtle Point. Approx 3/4 mile East of Bridge to driveway directly across highway from Weeping Willow Lane. When you see the sign Weeping Willow Lane, turn Left directly across the highway.

NOTE: The driveway is steep and has loose gravel.

Acreage or Lot Size: 8.95 Acres

Water Supply: Well

Site Ready for Inspection: Yes

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

**Attached Documents:**

Name	Description
FIN_TransactionReceipt_pr_20240729_140134.pdf	

*Locked Gate  
- Code taped inside folder*

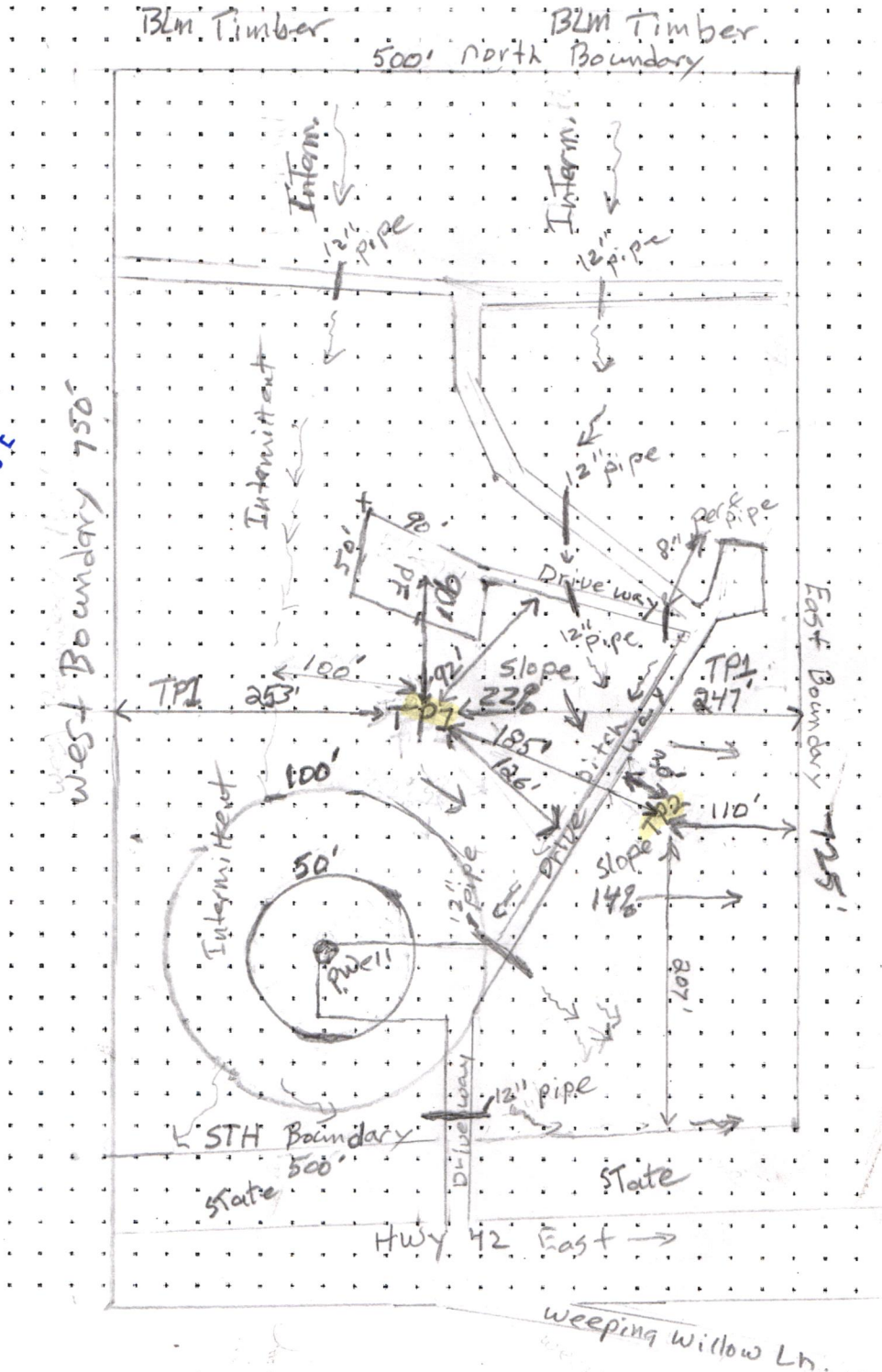


# Site Plan For Site Evaluation

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

Kelly E Robbins  
"O" Hiway 42  
Section 34 T. 29S. R. 11W. W.M. Tax Lot 600  
3/16" = 23'

RECEIVED  
JUL 29 2024  
COOS BAY OFFICE



FOR OFFICE USE ONLY

Application No.:







Oregon Department of Environmental Quality  
**Application for Onsite Sewage Treatment System**

Send this application to the appropriate  
DEQ office

For D <sup>U</sup> Use Only:		Date Stamp
Date received:	_____	<div style="text-align: center;">               COOS BAY OFFICE           </div>
Fee paid:	_____	
Receipt number:	RECEIVED	
Application number:	_____	
Date of 1 <sup>st</sup> response:	_____	
Date of 2 <sup>nd</sup> response:	JUL 23 2024	
Date of final response:	_____	
Date of completion:	_____	
Scanned:	Data Entry: _____	

**Property owner information**

Name: Kelly E. and Toni L. Robbins  
 Mailing Address: 1820 East Cedar St. Myrtle Point, OR 97458  
 Phone number: 541-260-4286 (Kelly) 541-297-9876 (Toni)

**Legal property description**

Township	Range	Section	Tax Lot	Acreage or Lot Size
295	11W	34	600	8.95
County	Subdivision Name		Tax Account Number	Block
COOS			1104605	

Property address: NOTE: DRIVEWAY STEEP & LOOSE GRAVEL

Directions to property: East on H42 from Myrtle Point, Appr. 3/4 mile East of Bridge to driveway directly across Hiway from Weeping Willow Lane

**Existing facility/Proposed facility/Water information**

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

**Type of application**

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

Signature: Kelly E. Robbins Date: 7-22-2024

Applicant's name - please print legibly: Kelly E. Robbins Applicant's phone number: 541-260-4286

Applicant's mailing address: 1820 East Cedar St. MP. OR 97458 Applicant's email address: sweetstrikes@gmail.com

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

THIS MAP WAS PREPARED FOR ASSESSMENT PURPOSE ONLY

SEC.34 T29S R11W W.M. COOS COUNTY

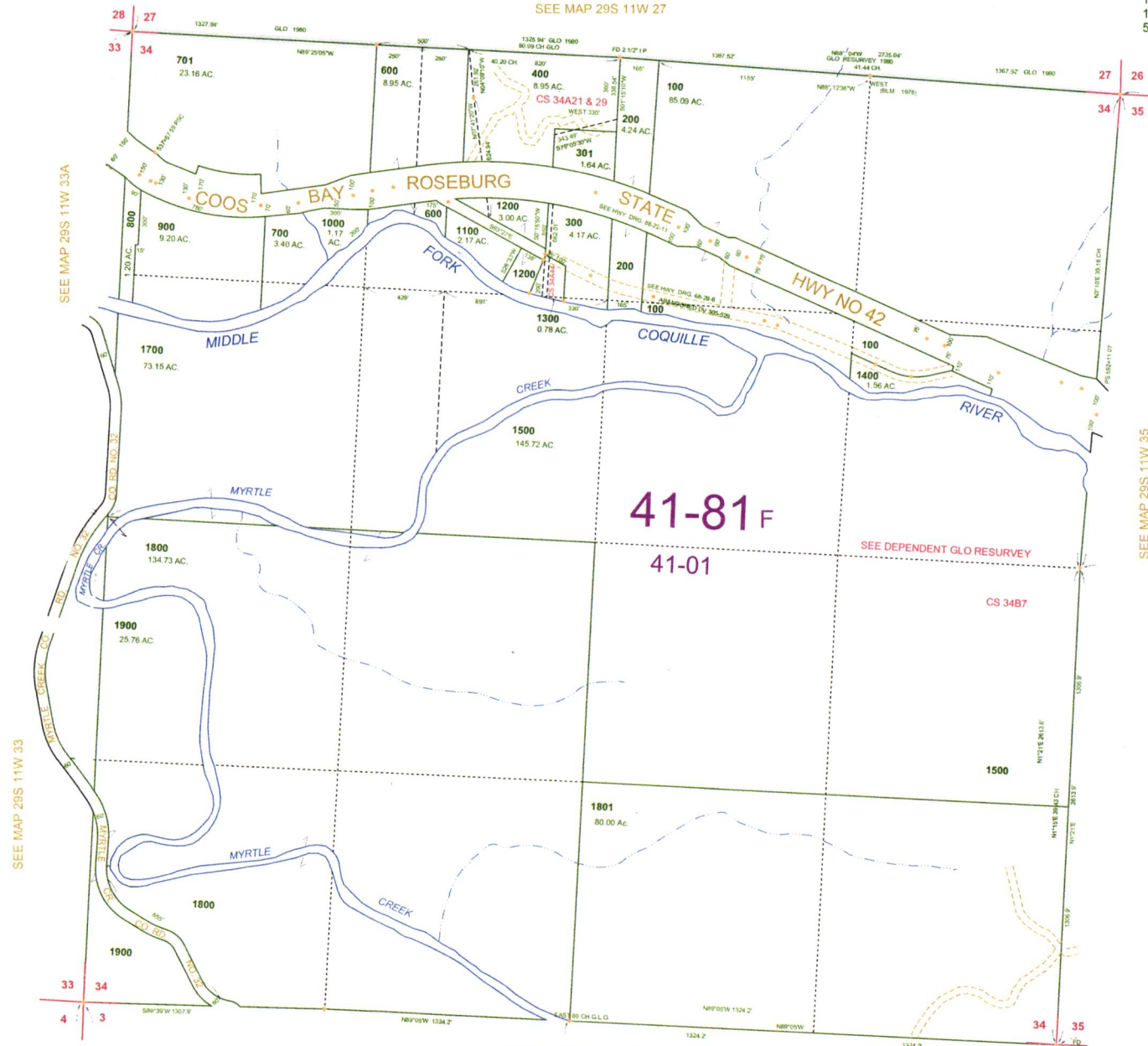
1" = 400'

29S 11W 34

CANCELLED NO.

1201  
1600  
500

SEE MAP 29S 11W 27



SEE MAP 29S 11W 33A

SEE MAP 29S 11W 33

SEE MAP 30S 11W 03

SEE MAP 29S 11W 35

COOS BAY OFFICE

JUL 23 2024

RECEIVED

02-20-2024

29S 11W 34

**METTEER Sherilee \* DEQ**

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**From:** DEQ Coos <DEQCoosNoReply@Accela.com>  
**Sent:** Tuesday, July 23, 2024 4:49 PM  
**To:** sweetstrikes@gmail.com; sweetstrikes@gmail.com; METTEER Sherilee \* DEQ  
**Subject:** Additional Information is required for record # 246-24-000181-EVAL at 0 Hwy 42, Myrtle Point, OR 97458

Additional information is required to process your permit application **246-24-000181-EVAL** at job site address **0 Hwy 42, Myrtle Point, OR 97458**. Please see the comments below for details.

*Workflow Task: Application Intake*

*Comment: Thank you for submitting an application for a Site Evaluation. Additional information is required. Please submit the following: 1) Complete a Notice Authorizing Representative form if someone other than the property owner is submitting the application or if the property owner wishes a third party to communicate with the DEQ on their behalf. If needed, this form can be found here: <https://www.oregon.gov/deq/FilterDocs/os-AuthRep.pdf> (I believe you already have this form) = = = = = 2) Complete an updated Site Plan with the following: a) distance from each test pit to nearest TWO property lines; b) distance between test pits; c) show 50' and 100' radius of proposed well; d) distance from both test pits to driveway; = = = = = Once the above items have been received, we will invoice the fees and send payment instructions to this email address.  
= = = = =*

If you have questions, please contact **Sherilee Metteer** at 541-269-2721 or [onsitecoosbay@deq.oregon.gov](mailto:onsitecoosbay@deq.oregon.gov).

Your record is available online for tracking by clicking here:

[https://aca-oregon.accela.com/oregon/Cap/CapDetail.aspx?Module=Onsite&TabName=Onsite&capID1=24CAP&capID2=00000&capID3=00051&agencyCode=DEQ\\_COOS](https://aca-oregon.accela.com/oregon/Cap/CapDetail.aspx?Module=Onsite&TabName=Onsite&capID1=24CAP&capID2=00000&capID3=00051&agencyCode=DEQ_COOS)

Thank you.

DEQ Coos Bay Office  
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Coos Bay, OR 97420  
541-269-2721  
[OnsiteCoosBay@deq.state.or.us](mailto:OnsiteCoosBay@deq.state.or.us)  
[www.oregon.gov/deq](http://www.oregon.gov/deq)