



Septic Site Evaluation Approval

Curry County Onsite Department
94235 Moore Street
Suite 113
Gold Beach, OR 97444
541-247-3304
Fax: 541-247-4579
septicpermits@currycountyor.gov
Website: currycountyor.gov

221-24-000235-EVAL

Date issued: 04/01/2025
Application status: Site Evaluation Approved
Work description: ONSITE EVALUATION FOR SFD

Applicant: WM-LOGGING AND CONSTRUCTION
Phone: 541-253-6028

Primary contractor: LESTER WAYNE MOORE
CCB: 189370
Address: PO BOX 298
SIXES OR 97476
Phone: 5413489927

Owner: WILBUR, JAMES R & CADANCE S

Property address: 0 Park Rd, Port Orford, OR 97465

Address: 8422 LAKE PARK TRAIL
HELENA MT 59602

Parcel: 331504D 0030800 - Primary

Lot size: N/A
Zoning: N/A
Accessory Dwelling Unit: No
Water supply: N/A
City/County/UGB: N/A

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

System Specifications

System type:
System distribution type:
Distribution method:

Initial System
Alternative Treatment Technology (ATTs)
Equal
Equal

Replacement Area
Alternative Treatment Technology (ATTs)
Equal
Equal

Trench Specifications

Trench linear feet:
Max depth:
Min depth:

Initial System
150 linear ft.
24 in.
18 in.

Replacement Area
150 linear ft.
24 in.
18 in.

Special Requirements

Stakeout required:
Groundwater type:
Groundwater depth:
Drainfield type:

Initial System
Yes
Temporary
42 in.
Standard

Replacement Area
Yes
Temporary
42 in.
Standard

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 issued: 04/01/2025

Application status: Site Evaluation Approved

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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.

Joshua Daley

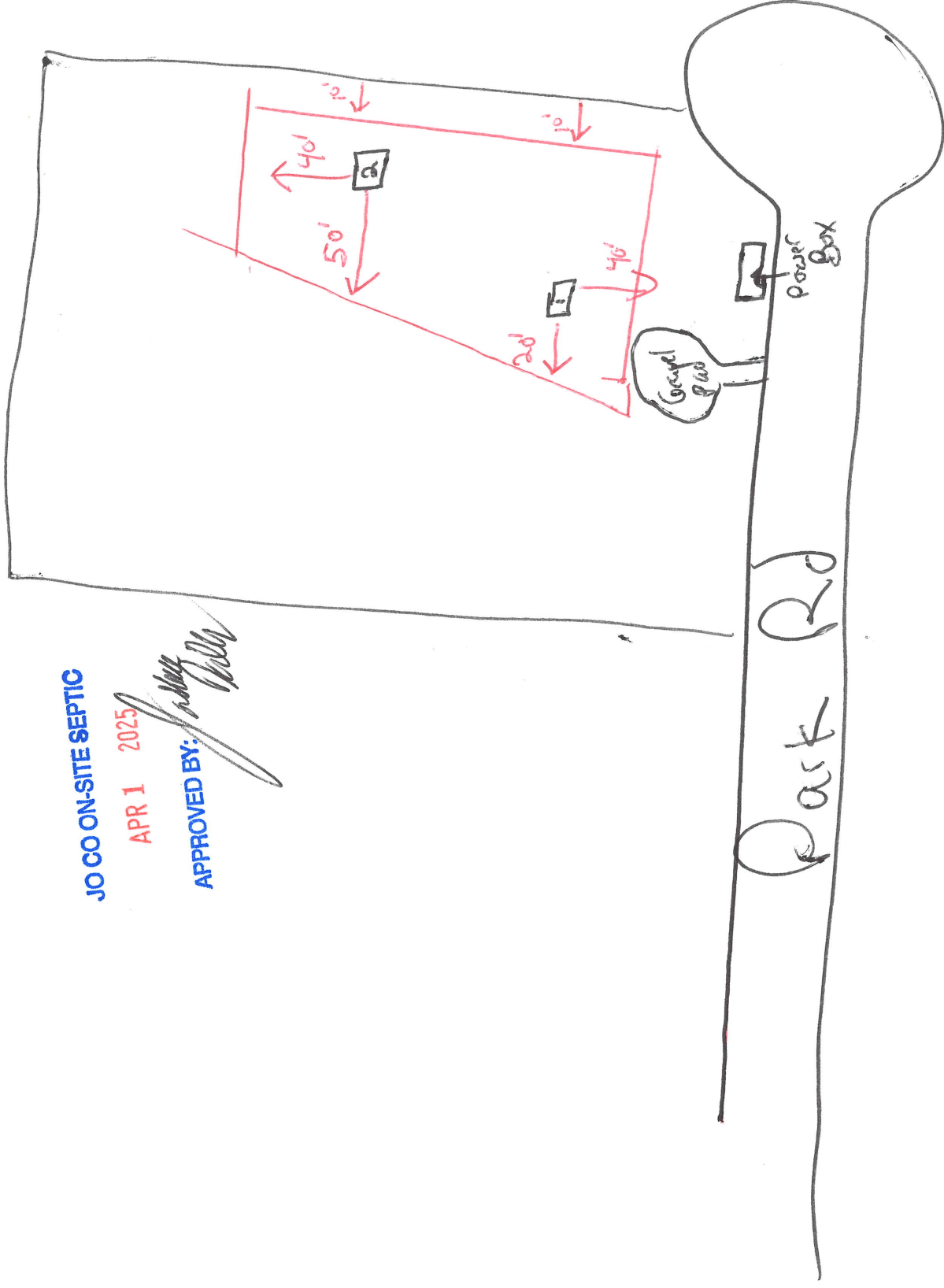
Environmental Specialist

4/1/25

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Approved Initial and Repair Septic area
Parcel: 33S-15W-04D TL 308



JO CO ON-SITE SEPTIC

APR 1 2025

APPROVED BY:

[Signature]

FIELD WORKSHEET

Name: James Wilbur Application No.: 221-24-000235 EUAL Date: 3/15/25
 RE: SITE EVALUATION REPORT for Parcel #: 33-15-040 TC 308
 Commercial Facility: Yes No Parcel Size: 1.80 AC

APPROVED SYSTEM SPECIFICATIONS

Design flow: 450 gpd Max Number of bedrooms: 4 Max Number of Employees: 0

Initial System	Replacement System
<input type="checkbox"/> Standard <input type="checkbox"/> Capping Fill <input type="checkbox"/> Bottomless Sand Filter <input checked="" type="checkbox"/> Conventional Sand Filter/ATT <input checked="" type="checkbox"/> Other <u>TSI</u>	<input type="checkbox"/> Standard <input type="checkbox"/> Capping Fill <input type="checkbox"/> Bottomless Sand Filter <input checked="" type="checkbox"/> Conventional Sand Filter/ATT <input checked="" type="checkbox"/> Other <u>TSI</u>
Tank: <input type="checkbox"/> 1,000 gal. <input checked="" type="checkbox"/> 1,500 gal. <input checked="" type="checkbox"/> 2 compartment <input type="checkbox"/> Other <input checked="" type="checkbox"/> effluent pump required <input checked="" type="checkbox"/> effluent filter required	Tank: <input type="checkbox"/> 1,000 gal. <input checked="" type="checkbox"/> 1,500 gal. <input checked="" type="checkbox"/> 2 compartment <input type="checkbox"/> Other <input checked="" type="checkbox"/> effluent pump required <input checked="" type="checkbox"/> effluent filter required
Distribution Method: <input checked="" type="checkbox"/> Equal <input type="checkbox"/> Serial <input type="checkbox"/> Pressurized	Distribution Method: <input checked="" type="checkbox"/> Equal <input type="checkbox"/> Serial <input type="checkbox"/> Pressurized
Absorption facility: <u>150</u> total linear feet <u>50</u> linear feet per 150 gallons projected daily sewage flow <u>24</u> " Max Depth <u>18</u> " Min Depth	Absorption facility: <u>150</u> total linear feet <u>50</u> linear feet per 150 gallons projected daily sewage flow <u>24</u> " Max Depth <u>18</u> " Min Depth

Additional Conditions of Approval

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

Inspector: 

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
Test Pit 1	0-13	CL	10YR 5/2 Root 2f, 3 m/c 150k organic
	3-55	C	10YR 5/6 Root 2m, 1c 1ADK
			Standing H ₂ O @ 42" Depth NCAS
Test Pit 2	0-6	CL	10YR 5/2 Root 3f. 2m/c
	0-55	C	10YR 5/6 Root 1m. 2c
			Standing H ₂ O @ 44" . NCAS
Test Pit 3			
Test Pit 4			
Test Pit 5			
Test Pit 6			

Landscape Notes: Wooded w/ fir

Slope: 0-3%

Aspect: _____

Groundwater Type: Permanent Temporary

Other Site Notes: _____



Onsite Site Evaluation Application Verification

221-24-000235-EVAL

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Suite 113
Gold Beach, OR 97444
541-247-3304
Fax: 541-247-4579
septicpermits@co.curry.or.us
Website: co.curry.or.us

Application created: 9/25/24

Parcel Nbr: 331504D 0030800

Owner: WILBUR, JAMES R &
CADANCE S
(406) 410-2204

Applicant: WM-LOGGING AND CONSTRUCTION - WM-LOGGING AND CONSTRUCTION

Phone: (541) 253-6028

Licensed Professional(s):

License Number: CCB - 189370
LESTER WAYNE MOORE
PO BOX 298
SIXES, OR 97476

Phone: (541) 348-9927

Category of Construction: Single Family Dwelling

Site Ready for Inspection: Yes

County:

Use of Structure: Existing

Number of Bedrooms:

Use of Structure:

Number of Bedrooms:

Proposed

SFR

3

Attached Documents:

No Documents have been attached.



Application for Onsite Sewage Treatment System

Send this application to:
Curry County Community Development
94235 Moore Ste, Suite 113
Gold Beach, OR 97444

or
septicpermits@co.curry.or.us

For Curry County Use Only:		Date Stamp
Date received	9/25/24	
Fee paid		
Receipt number		
Application number	24-24-000235-EVAL	
Date of 1 st response		
Date of 2 nd response		
Date of final response		
Date of completion		
Scanned	Data Entry	

A. Property Owner Information

James Wilbur 8422 Lake Park Trail, Helena, MT 59602 406 410 2204
 Name Mailing Address (Street or PO Box, City, State, Zip Code) Phone Number

B. Legal Property Description

335 15W 040 308 R12679 1.69
 Township Range Section Tax Lot Tax Account Number Acreage or Lot Size
Curry Cedar Terrace SD 308
 County Subdivision Name Lot Block
 Property Address: lot 308 Park Rd. Parkland OR 97465
 Address City State Zip Code

Directions to Property: over →

C. 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 _____ Name
Number of Bedrooms _____	<u>3</u> Number of Bedrooms	<input checked="" type="checkbox"/> Private <u>Private</u> Well, Spring, Shared
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	

D. Type of Application

<input checked="" type="checkbox"/> Site Evaluation	<input type="checkbox"/> Renewal Permit	<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 _____
<input type="checkbox"/> Construction	<input type="checkbox"/> Existing System Evaluation	
<input type="checkbox"/> Permit Repair <input type="checkbox"/> Major <input type="checkbox"/> Minor	<input type="checkbox"/> Permit Transfer	
<input type="checkbox"/> Alteration Permit <input type="checkbox"/> Major <input type="checkbox"/> Minor	<input type="checkbox"/> Permit Reinstatement	

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 Curry County and their authorized agents' permission to enter onto the above described property for the sole purpose of this application.

L. Wayne Moore 9-25 2024
 Signature Date

L. WAYNE MOORE 541 253 6028
 Applicant's Name - Please Print Legibly Applicant's Phone Number

P.O. Box 298 Sikes OR 97476
 Applicant's Mailing Address

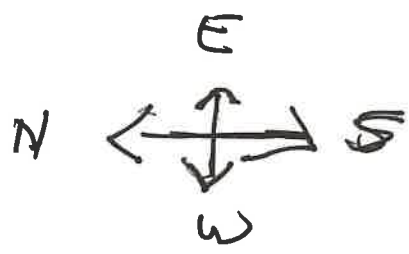
Applicant is the Owner Authorized Representative

Licensed Septic Installer

Authorization Attached

Installer's Name

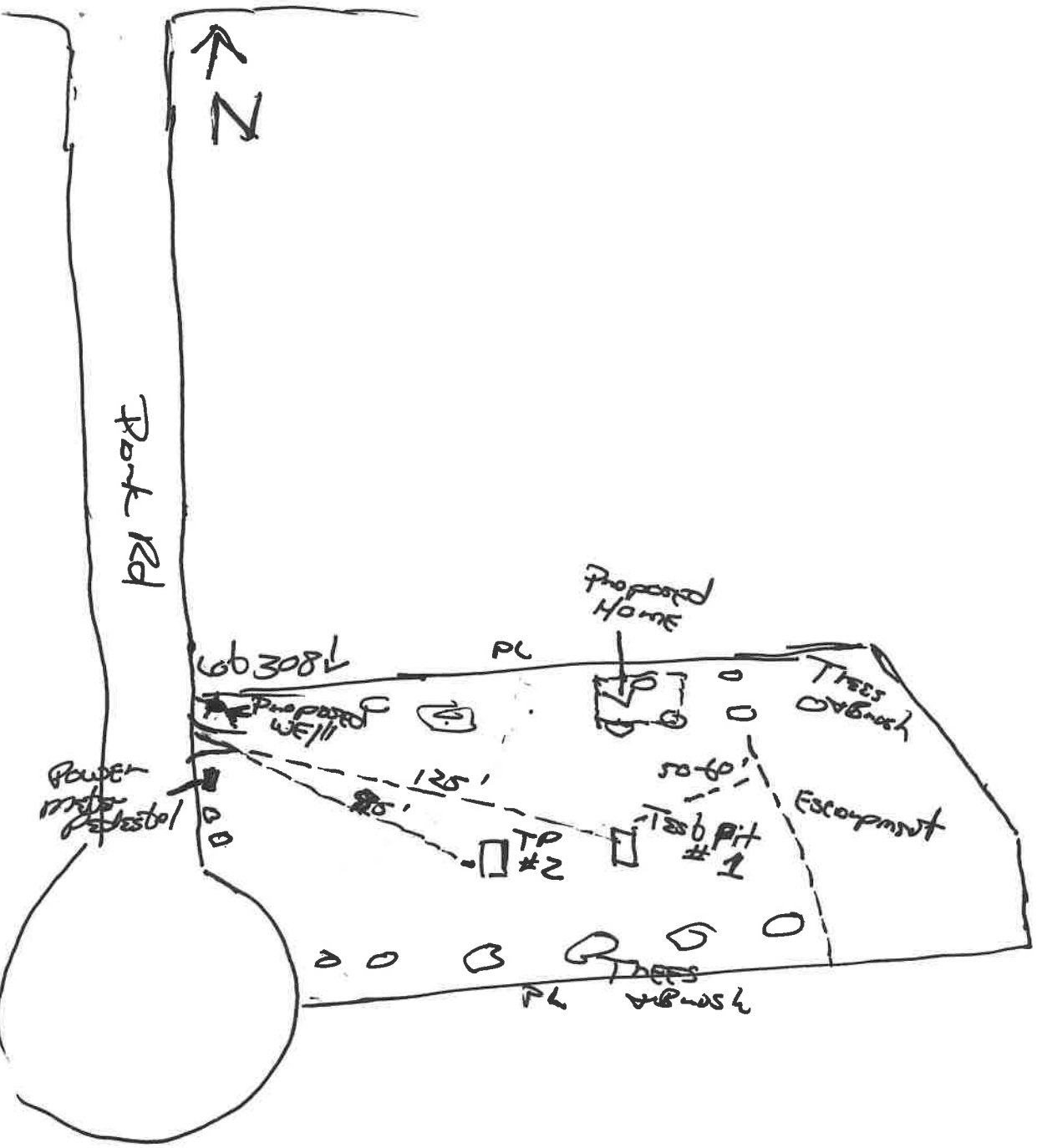
WM LOGGING & CONSTRUCTION
L. WAYNE MOORE
P.O. BOX 298
SIXES, OR 97476
541-348-9927/541-253-6028
CCB 189370 DEQ38482



old mill Rd



Park Rd



South End of Park Oxford Turn on Cemetery Loop
 Road + 90 East 0.6 miles turn north on old mill Rd
 + 90 05m to Park Rd / 90 013 to 106 308 on
 East side of Col-De-Sac

THIS MAP WAS PREPARED FOR
ASSESSMENT PURPOSES ONLY



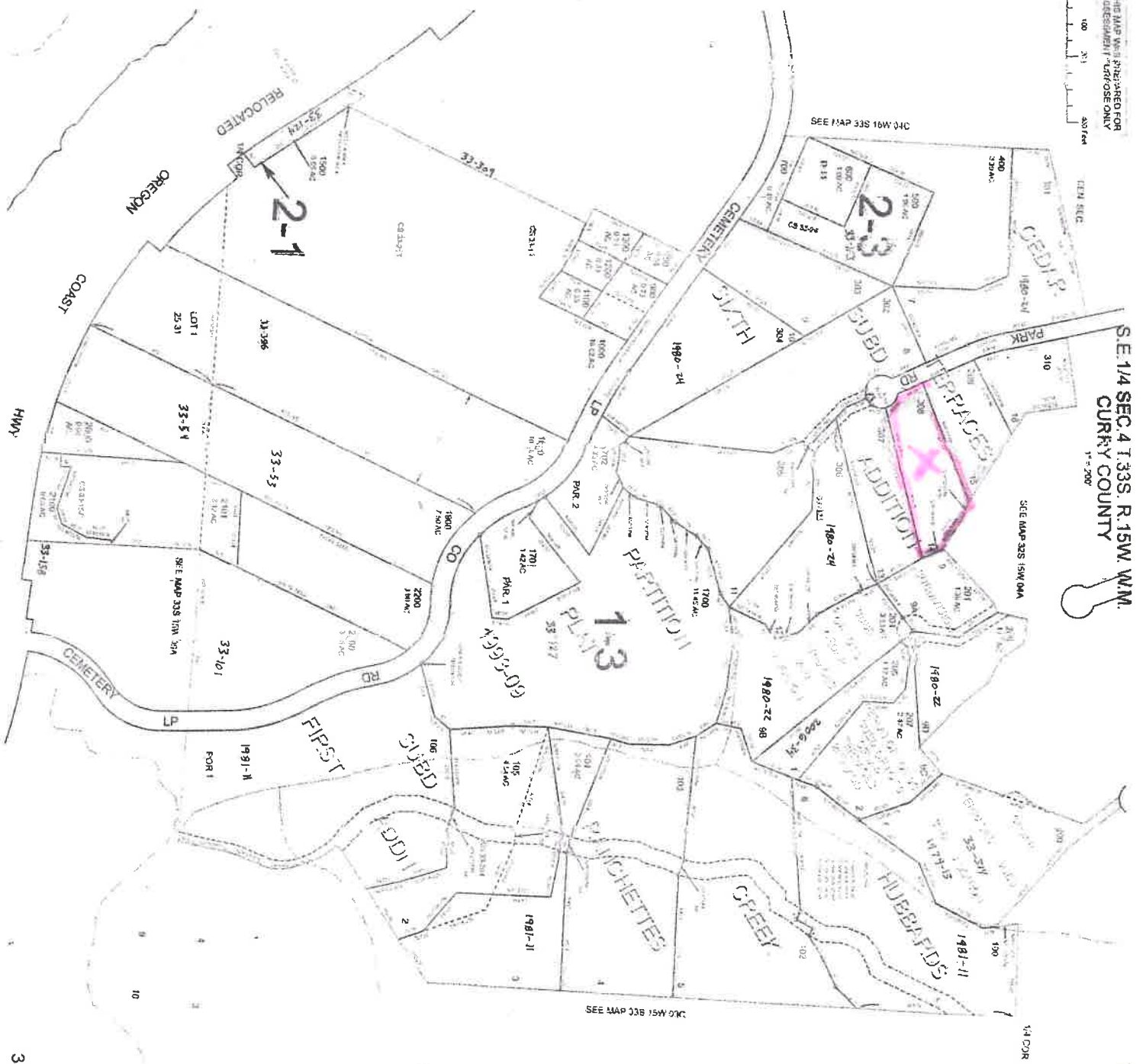
S.E. 1/4 SEC. 4 T. 33S. R. 15W. W.M.
CURRY COUNTY
1" = 200'



33S15W04D

CARELATIO

- 302
- 303
- 304
- 305
- 1000



33S15W04D

Revised: RAA
4/14/2005



NOTICE AUTHORIZING REPRESENTATIVE

I, James W. Wilbur have authorized Wayne Moore 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 Curry/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 Curry/Josephine County Onsite Septic agents to conduct required business activities on said property.

PROPERTY IDENTIFICATION:

TZ 308 Park Rd / Cedar Terrace Subdivision
(Property Situs or Road Address)

And described in the records of Curry County as:

Township 33S Range 15W Section 04D Map ID 308 Tax Lot #(s) R12679

PROPERTY OWNER:

Printed Name: James Wilbur

Address: 8422 Lake Park Trail

City, State, Zip: Helena, MT 59602

Phone: 406-419-2204 Email: jrwee@mt.net

Signature: James Wilbur

AUTHORIZED REPRESENTATIVE:

Printed Name: L. WAYNE MOORE

Address: P.O. Box 298

City, State, Zip: SIXES OR 97476

Phone 541 253 6028 Email: _____

Signature: L. Wayne Moore

WY LOGGING & CONSTRUCTION
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CCB 189370 DEQ38482