Septic Site Evaluation Approval

463-24-000281-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: 03/04/2025
Application status: Site Evaluation Approved
Work description: SE

Applicant: Doo Doo Bus Septic
Address: 4190 Willams hwy
Grants pass OR 97527
Phone: 5418463071
Email: thedoodoobus@gmail.com

Contractor: Doo Doo Bus Septic
Installer/Pumper License: 38974
Address: 4190 Willams hwy
Grants pass OR 97527
Phone: 5418463071
Email: thedoodoobus@gmail.com

Owner: WESTELL, CHRISTOPHER S JR
Address: 28045 REDWOOD HWY
CAVE JUNCTION OR 97523

Property address: 101 Three Mill Rd, Selma, OR 97538

Parcel: 3807300000040300 - Primary Township: 38 Range: 07 Section: 30

Lot size: 6.30
Zoning: N/A
Accessory Dwelling Unit: No

Water supply: Well
City/County/UGB: N/A

Proposed use of structure: new home
Category of construction: Single Family Dwelling

	Existing	Proposed
Number of bedrooms:	0	2
General Specifications		
Max peak design flow:	450 gpd.	
Min septic tank volume:	1000 gal.	
Proposed gallons per day:		300 gpd.
Min dosing tank volume:		N/A
System Specifications	***Initial System***	***Replacement Area***
System type:	Standard	Standard
System distribution type:	Equal	Equal
Distribution method:	Equal	Equal
Trench Specifications	***Initial System***	***Replacement Area***
Trench linear feet:	225 linear ft.	225 linear ft.
Max depth:	24 in.	24 in.
Min depth:	18 in.	18 in.
Special Requirements	***Initial System***	***Replacement Area***

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 463-24-000281-EVAL

Date issued: 03/04/2025

Application status: Site Evaluation Approved

Work description: SE

Stakeout required:	Yes	Yes
Groundwater type:	Not Applicable	Not Applicable
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.

Joshua Daley Environmental Specialist 3/4/25

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

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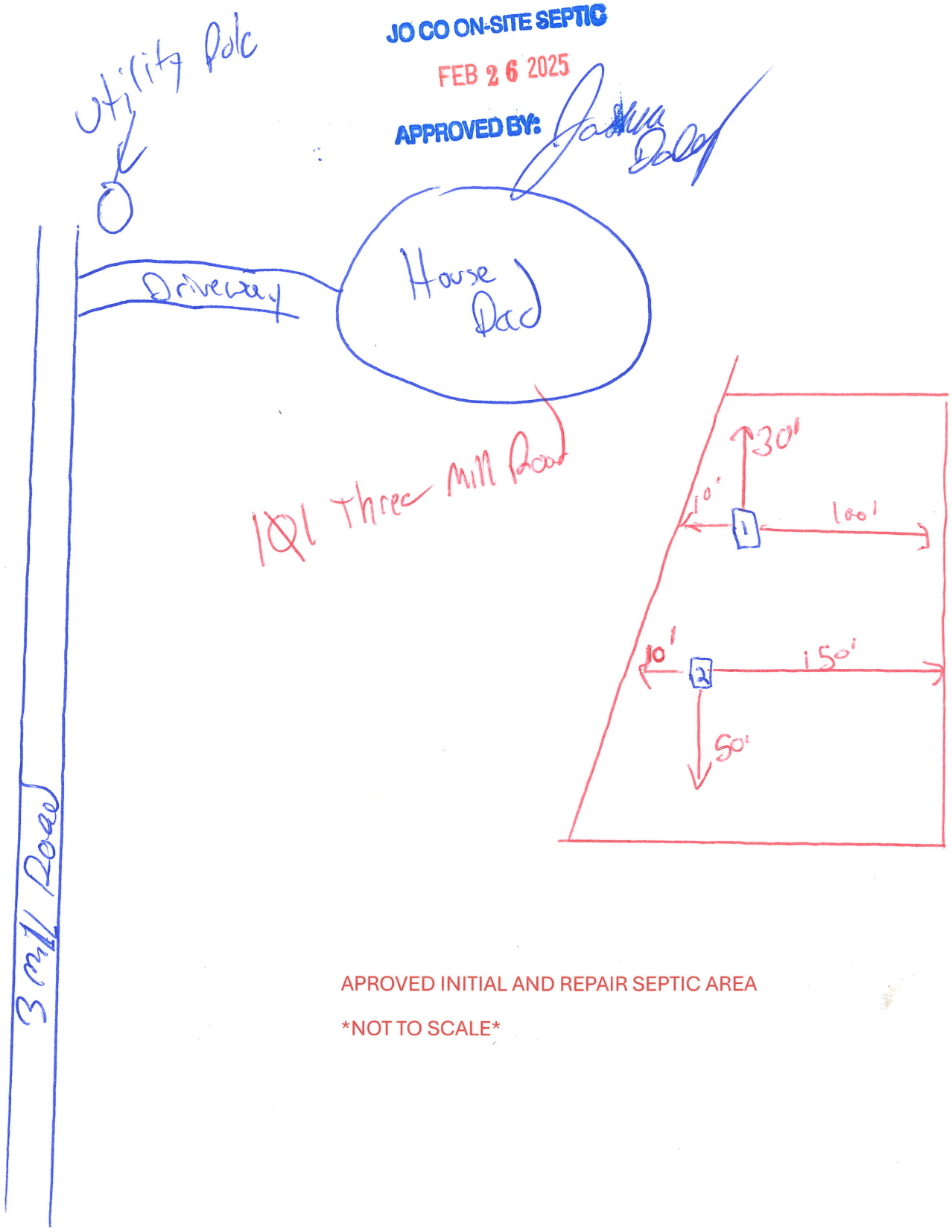
JO CO ON-SITE SEPTIC
FEB 26 2025
APPROVED BY:



APROVED INITIAL AND REPAIR SEPTIC AREA

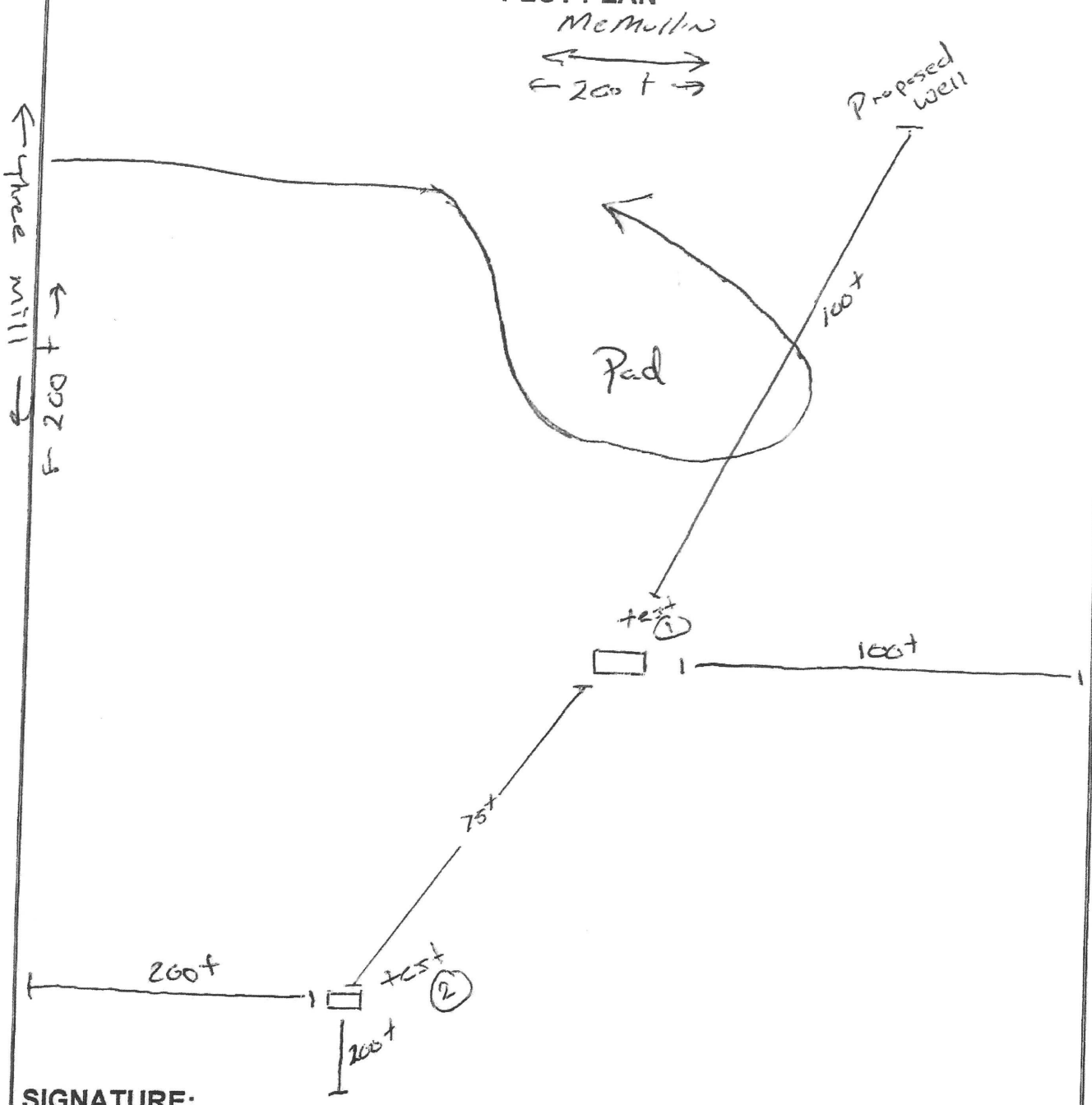
NOT TO SCALE

DATE: _____ TWN _____, RNG _____, SEC _____ QQ _____, TL _____

OWNER'S NAME: _____

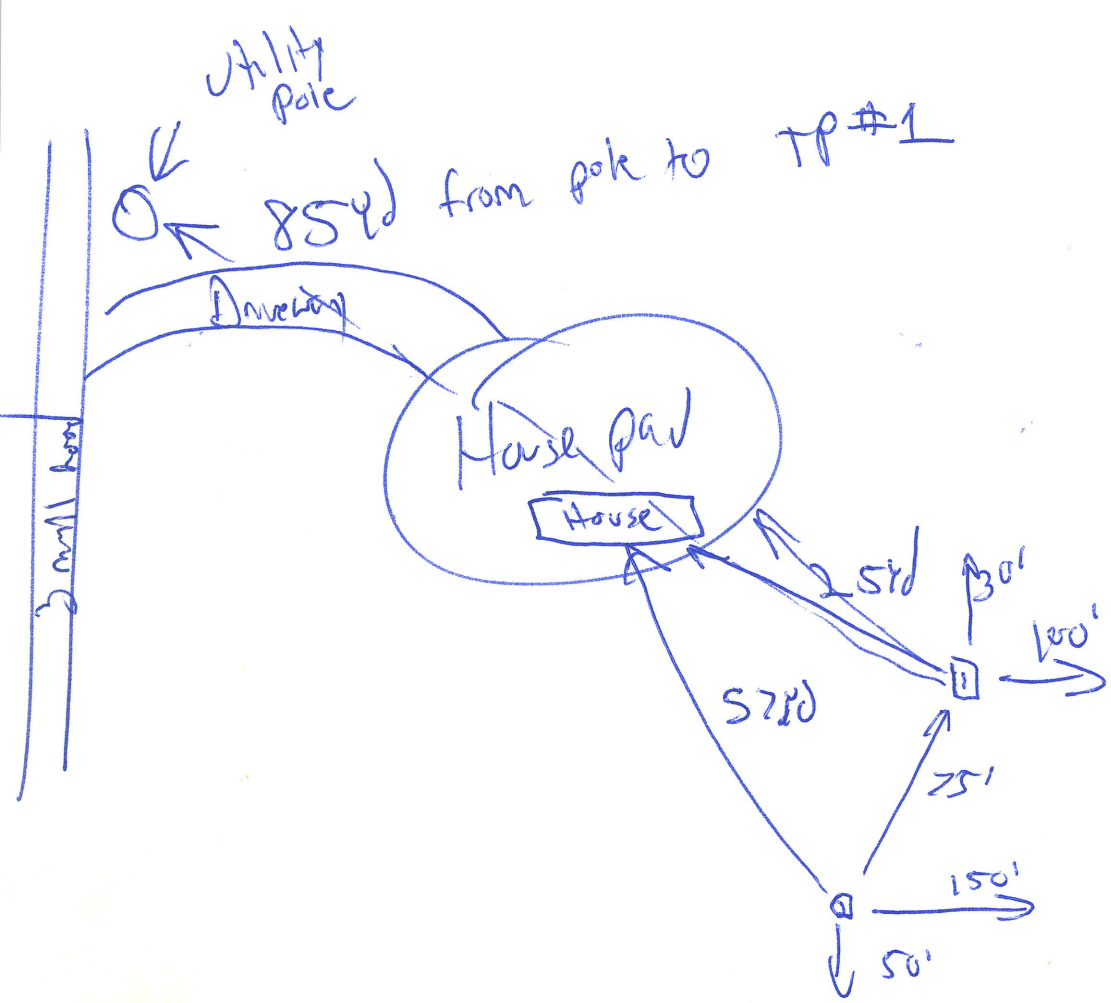
ADDRESS: _____

PLOT PLAN



SIGNATURE: _____

DATE: _____


Utility pole
85yd from pole to TP #1
Driveway
House pad
House
25yd
30'
100'
57yd
75'
150'
50'

Three Mill Rd

FIELD WORKSHEET

Name: Chris Westell **Application No.:** 463-24-000281-EVAL **Date:** 2/3/25

RE: SITE EVALUATION REPORT for Parcel #: 38-07-30 - TL 403

Commercial Facility: ☐ Yes ☒ No Parcel Size: 6.30

APPROVED SYSTEM SPECIFICATIONS

Design flow: 450 gpd Max Number of bedrooms: 4 Max Number of Employees: 9

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: 225 total linear feet 75 linear feet per 150 gallons projected daily sewage flow 24 " Max Depth 18 " Min Depth	Absorption facility: 225 total linear feet 75 linear feet per 150 gallons projected daily sewage flow 24 " 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.

Inspector: Jack Dahl

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
Test Pit 1	0-10	SCL	10YR5/4 Root 2vtf, 1m, C Granular 30-40%
	10-24	SCL	10YR6/4 Root 1f,m,C 1SBK 30-40% 1/8-1½"
	24-55	SCL	10YR6/3 Root 1m 1SBK 30-40% / Rock
			Cobbly NCAS
Test Pit 2	0-12	SCL	10YR5/4 Root 3m,C 2vtf Granular 30-40%
	12-24	CL	10YR6/4 Root 2m,C, 1f 1SBK 1/8 to 1½" Rock
	24-55	CL	10YR6/4 Root 1f,m 1SBK 30-40% 1/8-3"
			Cobbly NCAS Rock
Test Pit 3			
Test Pit 4			
Test Pit 5			
Test Pit 6			

Landscape Notes: Wooded w doug fir, Madrone

Slope: 0-3%. Aspect: _____ Groundwater Type: ☐Permanent ☐Temporary

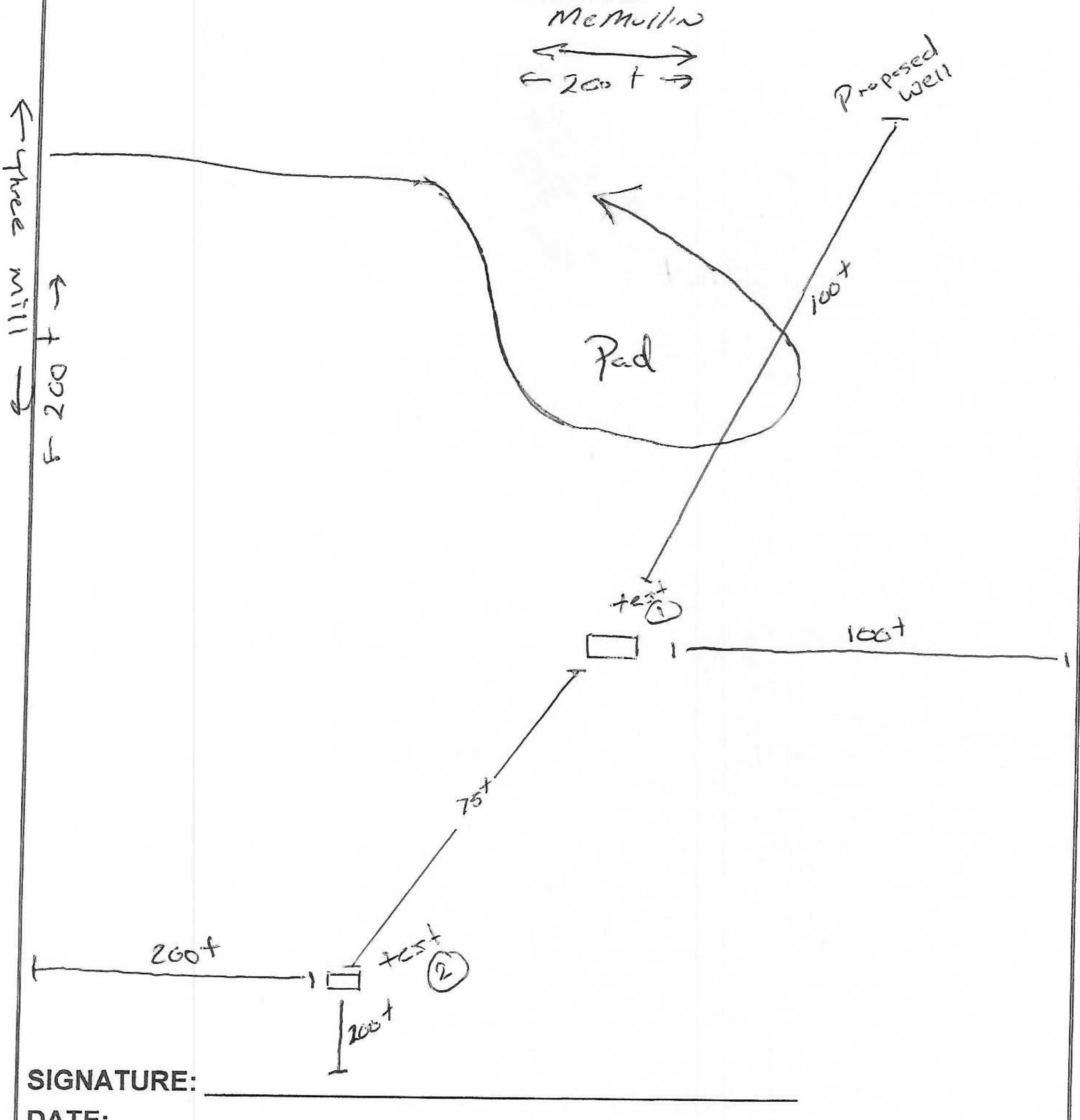
Other Site Notes: _____

DATE: _____ TWN _____, RNG _____, SEC _____ QQ _____, TL _____

OWNER'S NAME: _____

ADDRESS: _____

PLOT PLAN



SIGNATURE: _____

DATE: _____

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@josephinecounty.gov

PLANNING APPLICATION FORM

Property Address: 3 Mill Rd

Assessor's Map & Tax Lot:

~~36~~ - ~~07~~ - ~~00~~ - ~~403~~ **Tax Lot(s)** ~~00403~~

38 - 07 - 30 - 00 **Tax Lot(s)** 403

Zoning: RR5

Size of Project: (# of Units, Lots, Dimensions, Sq. Ft., Etc.)

1 ea 432 SqFt Home

Application/Permit Type: (Please Check All Applicable)

- ☑ Address Assignment
  - ☑ New Address
  - ☐ Change of Address
  - ☐ Additional Address
- ☐ Annual Compliance Certificate (See Form A)
- ☐ Appeal (See Sec.19.33.040)
- ☐ Comp Plan/Zone Map Amendment (See Sec.19.46.030)
- ☐ Conditional Use Application (Chapter. 19.45)
- ☐ Determination of Nonconforming Use (See Sec.19.13.060)
  - ☐ Marijuana Prod. Site on RR (Attach License and Premise Sketch)
  - ☐ Alteration/Expansion of Nonconforming Use/Structure (See Div. 19.13.050)
- ☐ Final Plat (See Sec.19.56.030)
- ☐ Mass Gathering (See Sec. 19.43.B - Use Mass Gathering Form)
- ☐ Partition (See Sec.19.52.040)
- ☐ Planned Unit Development (See Sec.19.55.030)
- ☐ Pre-Application (See Chapter. 19.21)
- ☐ Property Line Adjustment or Vacation (See Sec.19.54.040)
- ☐ Replat (See Sec.19.53.040)
- ☐ 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)
- ☐ Variance (See Chapter.19.44)

- ☐ Conditional Use Permit (Chapter. 19.92)
- ☐ Development Permit (See Sec.19.41.020)
- ☐ Temporary Dwelling (See Chapter. 19.43)
  - ☐ Detached Living Space
  - ☐ Medical Hardship
- ☐ Other: _____

Attachments:

- ☐ (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
- ☐ Statement of Intended Water Use

Revised 10/14/19

- ☐ Statement of Understanding
- ☐ Floor Plan/Elevations
- ☐ Access Permit
- ☐ Proof of Fire Protection
- ☐ Erosion Control Plan/Fire Safety Plan

Other: _____

Description of Request/Reason for Appeal

(Include name of project and proposed uses):

3 Mill Rd - Driveway and Street Access

Addressing

Property Owner: Christopher S. Westell, Jr

Address: PO Box 13
Cave Junction, OR 97523

Phone: 832-326-9026

Email: chris_westell@yahoo.com

Applicant: Same

Address: _____

Phone: _____

Email: _____

Authorized Representative/ Surveyor or Engineer:

(If Different From Applicant) (If Applicable)

Address: _____

Phone: _____

Email: _____

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).

Christopher Westell JR 7-24-24

(Signature of Owner or Attorney-in-Fact) Date

(Signature of Owner or Attorney-in-Fact) Date

(For Office Use)

Fees Paid: _____ Initials: _____

Community Development
(541) 474-5421
700 NW Dimmick Street, Suite C
Grants Pass, OR 97526
www.josephinecounty.gov

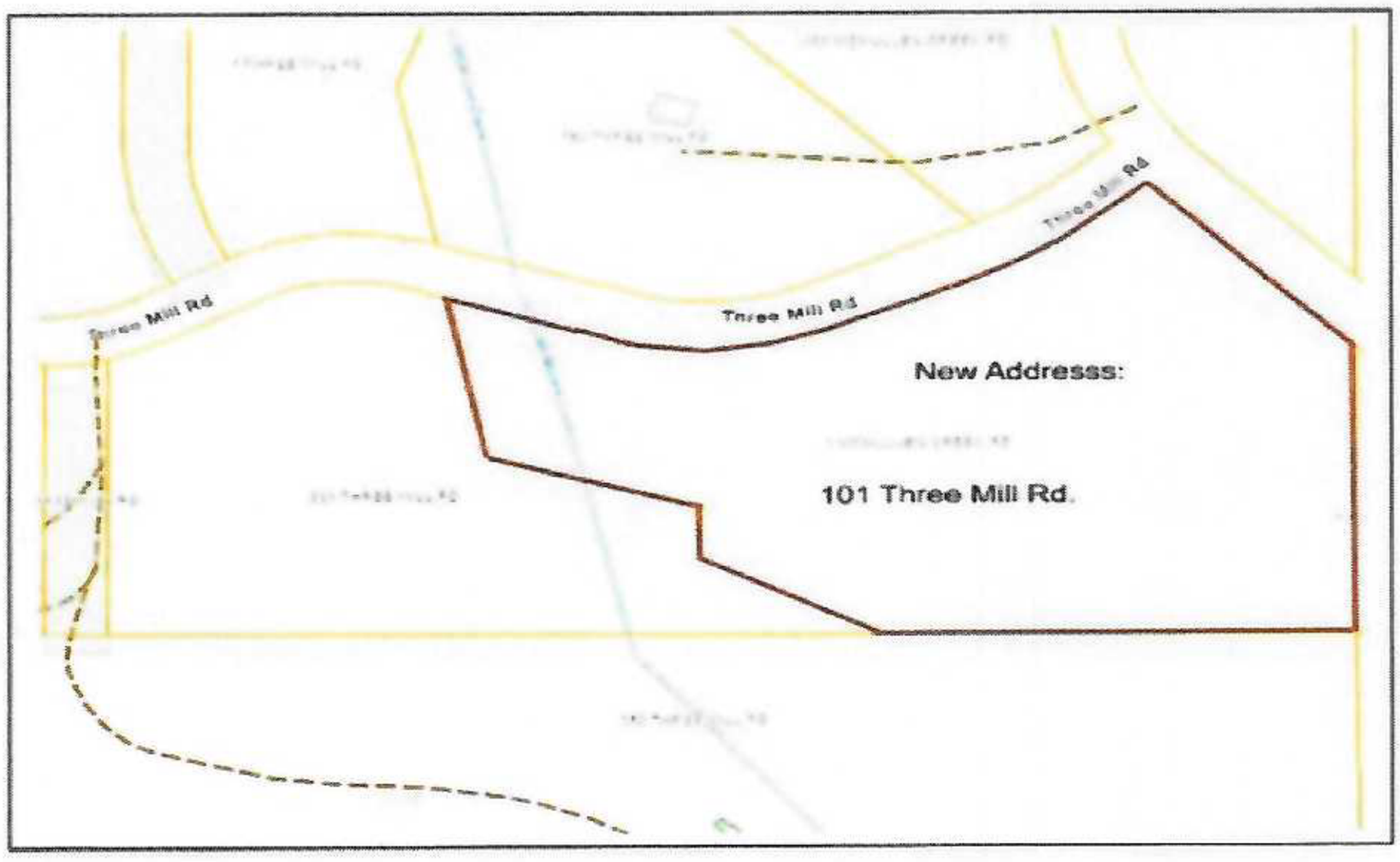
ADDRESS ASSIGNMENT

●	Owner / Applicant (must have POA)	●	PacifiCorp (Hanner)		Nicky Smith (BLM)
●	Assessor (Roach / Snodgrass)		GP Dept of Public Safety (Hyatt)		USPS Cave Junction (Krueger / Weir)
●	Bldg Safety (Wharregard/Giles)		GP Dept of Public Safety (Johnson)		USPS Grants Pass (Anderson / Foster)
●	ECSO (Murders / Harris)				USPS Merlin (Ross)
●	Public Works (Heesacker)		ODOT (Scruggs)		USPS Murphy (Deneau)
	City of Grants Pass GIS (Brandt)		Rural / Metro Fire Dept (Coates)		USPS O'Brien (Horton / Weir)
●	USPS District Address Mgmt Sys		Applegate Fire District (Jackson)		USPS Rogue River (Loop)
●	CenturyLink (DiBetta)	●	Illinois Valley Fire District (Ismaili)	●	USPS Selma / Kerby / Wilderville (Willard)
●	CenturyLink (Omaha office)		Williams Fire & Rescue (Kuntz)		USPS Williams (Rains)
●	911 (Haack)		Wolf Creek Fire District (Scruggs)		USPS Wolf Creek (Henry)
●	Hunter Communications (Sinclair)				

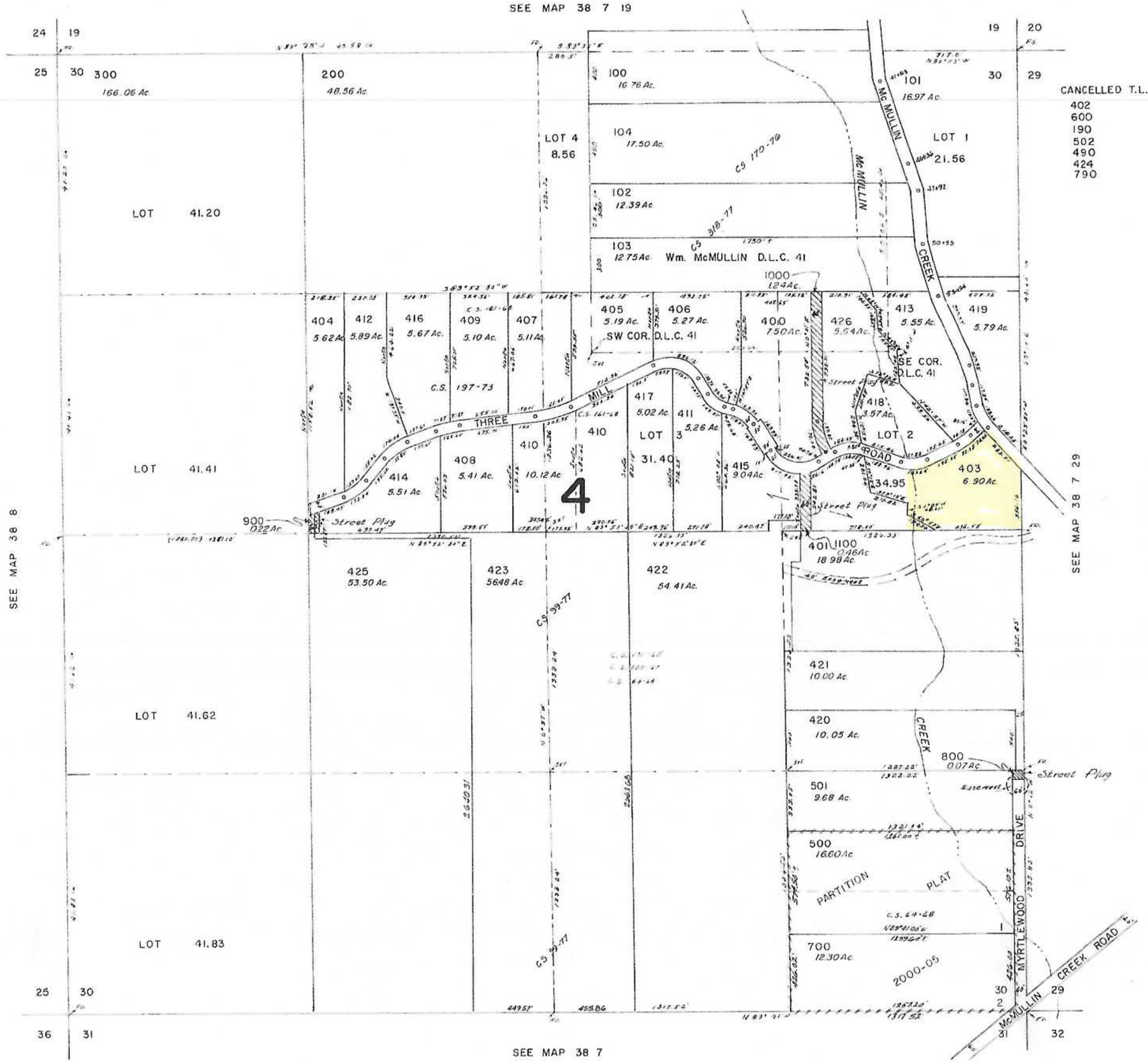
DATE: July 29, 2024

FROM: Terri Woodruff (541) 474-5109 Ext 2613 twoodruff@josephinecounty.gov

Legal	38-07-30-00 TL 403
Existing Address	None
New Address	101 Three Mill Road, Selma, OR 97538
Notes:	




ORMAP
101 Three Mill Rd, Selma, OR,
Show search results for 101...
00400
01000
00426
00413
00419
00418
Josephine County
38S07W30
01100
00415
00403
-123.564 42.237 Degrees
40m
200ft



NOTICE AUTHORIZING REPRESENTATIVE

I, Christopher westell jr (Property Owner/Print Name), have authorized Allied Septic Service LLC (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 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:

101 3 mill rd Selma Or
(Property Situs or Road Address)

And described in the records of JC County as:

Township 38 Range 8W Section 7W Map ID 30 Tax Lot #(s) 00403

PROPERTY OWNER:

Printed Name: Christopher westell jr

Address: 101 3 mill rd

City, State, Zip: Selma oregon 97538

Phone: 8323269026 Email: Chris_westell@yahoo.com

Signature: Chris W

AUTHORIZED REPRESENTATIVE:

Printed Name: Allied Septic Service LLC

Address: PO Box 463

City, State, Zip: Murphy oregon 97533

Phone: 541-846-3071 Email: Theclooclooboss@gmail.com

Signature:

SECTION 30 T38S R7 W. W.M.
JOSEPHINE COUNTY
1" = 400