

# Certificate of Satisfactory Completion

## Installation Permit - Residential - New

463-21-000222-PRMT

Primary Contractor: Dun-Right Septic

815 NE Greenfield Rd

jed97537@gmail.com

231 Grange Rd, Grants Pass, OR

**Proposed** 

N/A

(541) 890-7674

Grants Pass OR 97526

Installer License: 39262

**Property Address:** 

Address:

Phone:

Email:

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 Certificate Issued: 01/08/2022

Work Description: STANDARD CONSTRUCTION PERMIT

Applicant: SERENA PATTON

Address: 1450 OJAI AVE

**GRANTS PASS OR 97527** 

Phone: 9203683509

Owner:

Media Type:

Email: SERENA.A.PATTON@GMAIL.COM

SERENA PATTON

Address: 1450 OJAI AVE

**GRANTS PASS OR 97527** 

 Parcel: 350610A004102 - Primary
 Township:
 35
 Range: 06
 Section:
 10

**Existing** 

 Lot Size:
 N/A
 Water Supply:
 Well

 Zoning:
 N/A
 City/County/UGB:
 N/A

Land Use Approval: N/A

Category of Construction: Single Family Dwelling

Use of Structure:	N/A		4 BDRM SFR	
Number of Bedrooms:	N/A		4	
System Specifications				
Type:	Standard			
Max Peak Design Flow:	450 gpd.	Proposed Flow:		450 gpd.
Min Septic Tank Volume:	1500 gal.	Min Dosing Tank Volume:		N/A
Drain Field Specifications				
Drain Field Type:	Standard	System Distribution Type:		Equal
Drainfield Sizing:	N/A	Distribution Method:		Equal

Trench Length:300 linear ft.Rock Above Pipe:N/AMax Depth:30 in.Undisturbed Soil BetweenTrenches:8 ft.Min Depth:24 in.Capping Fills-Min Depth of Fill Material:N/A

Media Depth:

EZ flow

1/8/22: 1:10:24PM ONS\_OnsiteCSC\_pr

Date Certificate Issued: 01/08/2022

Work Description: STANDARD CONSTRUCTION PERMIT

#### **Conditions of Approval**

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

Comments: N/A

Danielle Morvan

#### 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.)

1/8/22: 1:10:24PM ONS OnsiteCSC pr

# Final Inspection Request and Notice - Septic ID: 463-21-000222-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/I	Permittee Info	ormation	Ė		Twnshp: 35	Range: 06	Sect: 10
Name: SERENA P	PATTON				Lot:		
Property 231 GRAN Address:	NGE RD, GRAN	TS PASS,	OR 975	26			
SECTION 2: System	n Componen	t Specif	cation	s:			
A. Tanks/Pumps		-	Sy	ystem Type:			Water tight verification*
Tanks(1) Volume: /	500	Compartme	ents: 2	Manufacturer	River Si	de	Date:12 -16-2
Tanks(2) Volume:		Compartme	ents:	Manufacturer			Date:
Pump(s) HP: 1 M	اodel/Manuf. کرر	berky :	283		(1): pines Ayodel/Mar		Pmaster
		. /		Float(s)Type	(2):Alcrm Model/Mar	out ST romus	Seasor
B. Piping	**************************************	TO SANCTION OF THE PROPERTY OF					
Effluent Sewer (t	ank to drainfiel	d) Yes	No X	Diameter:	ASTM#/Other:		Length:
Pressu	re Transport Pi	oe Yes	No	Diameter: 21	ASTM#/Other: 50	ch40	Length: 48
C. Secondary Treatment	Unit:			J			and have been a second control of the second control of the second control of the second control of the second
Sand Filter**	Yes No	Type:			Co	ntainer Dimensions	à:
Underdrain pipe	Diameter:	ASTM	#/Other:				Length:
Manifold piping	Diameter:	ASTN	#/Other:	The state of the s			Length::
Internal Pump	HP:	Model	/Manufac	three			<u> </u>
Floats(1)	Туре:	Mode	/Manufac	cturer		***************************************	
Floats(2)	Туре:	Mode	/Manufac	cturer			
ATT	Yes No	Model:					
	Provider Name:	Iviouei.					
Operation and Maint.		ed? Yes	No				
D. Drainfield Media							
Type	(Gravel, Pipe or	alternative	?) 12	"Ezflou	)	*	
Distribution Box	Yes No						
Drop Box	Yes NoX						
Distribution Pipe	Yes No	Diamete	er: U <sup>11</sup>	ASTM#/Other:	12" EZFI	ow	Length: 3001
Comment							

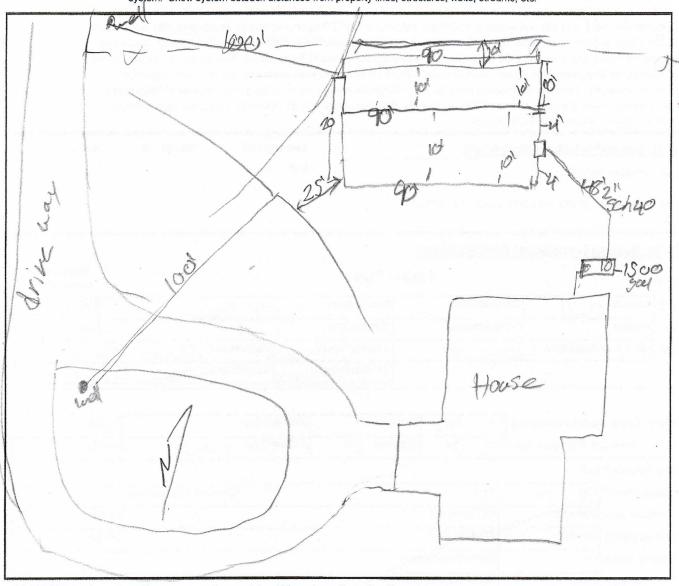
\*\*Attach sieve analysis for Underdrain Media and Filter Sand

\*All Tanks(s) were tested for water-tightness after installation and passed in accordance with OAR 340-073-0025(3)

Application ID: 463-21-000222-PRMT, Owner Name: SERENA PATTON

### **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.



## 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 Certifie	d Installer	w/Certificat	ion#: Print Name:	Dun-Right	LSep	Fic		
Licensed Installer: Yes	No	License#:	34262		Certification#:	T24	124	
Owner/ Certified Signatu Installer:	re:		MA	Date: 12	-19-21	Phone#:	M541-840	-7674
SECTION 5 - Office Us	e Only:			Installer/Owner				on the second
Notice Accepted Yes	No	Date		(Permittee) Notified:	Yes	No	Date:	
If No, Reason for Non Acceptance:								_
Comment: —							944 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	_



Line 1



Cross over



line 2



cross over



1500 gal tank



Transport line



Header line



transport line



drop box





# Septic Permit Installation Permit - Residential - New

463-21-000222-PRMT

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: 6/14/21 Expiration date: 6/14/22

Primary contractor: Dun-Right Septic

815 NE Greenfield Rd

jed97537@gmail.com

231 Grange Rd, Grants Pass, OR

(541) 890-7674

97526

Grants Pass OR 97526

Installer License: 39262

Property address:

Address:

Phone:

Email:

Work description: STANDARD CONSTRUCTION PERMIT

Applicant: **SERENA PATTON** Address: 1450 OJAI AVE

**GRANTS PASS OR 97527** 

Phone: 9203683509

Email: SERENA.A.PATTON@GMAIL.COM

**Business License:** N/A

SERENA PATTON Owner:

Address: 1450 OJAI AVE

**GRANTS PASS OR 97527** 

Parcel: 350610A004102 - Primary Township: Range: 06 Section: 10

N/A Well Lot size: Water supply: N/A N/A Zoning: City/County/UGB: Land use approval: N/A County: N/A

Action: New Type of application: Construction Permit - Residential System failing: N/A Septic tank last pumped: N/A

Comments: N/A

Category of construction: Single Family Dwelling

	Existing	Proposed
Use of structure:	N/A	4 BDRM SFR
Number of bedrooms:	N/A	4

System Specifications

Standard N/A Type: ATT description: Max peak design flow: 450 gpd. Proposed flow: 450 gpd. 1500 gal. Min septic tank volume: Min dosing tank volume: N/A

**Drain Field Specifications** 

Standard Drain field type: System distribution Ttpe: Equal Drainfield sizing: N/A Distribution method: Equal N/A Media depth:

Other - Indicate Product/Manufacturer Media type:

EZ flow Media type description:

300 linear ft. N/A Trench length: Rock above pipe: 30 in. 8 ft. Max depth: Undisturbed soil between trenches: Min depth: 24 in. Capping fills-min depth of fill material: N/A

#### 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: 6/14/21 Expiration date: 6/14/22

Work description: STANDARD CONSTRUCTION PERMIT

#### Conditions of approval

- 1. The system must be installed by the property owner or a licensed sewage disposal business (installer).
- 2. Vehicular traffic and livestock must be restricted from the system area.
- 3.All roof drains must be directed away from the system
- 4.All tanks must be tested for watertightness and have a water-tight riser to the ground surface. Twenty- inch minimum diameter if less than 36-in deep. Thirty-inch minimum diameter if greater than 36-in deep. Maintain access to septic tank for pumping and service.
  - 5.Meet all required setbacks
- 6.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.
- 7.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.
- 8.For product approval information and manufacturer installation requirements see DEQ website at: http://www.oregon.gov/deq/Residential/Pages/Onsite.aspx
- 9.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.
- 10.Effluent sewer. The effluent sewer must extend at least 5 feet beyond the septic tank before connecting to the distribution unit. It must be installed with a minimum fall of 4 inches per 100 feet and at least 2 inches of fall from one end of the pipe to the other. In addition, there must be a minimum difference of 8 inches between the invert of the septic tank outlet and either the invert of the header to the distribution pipe of the highest lateral in a serial distribution field or the invert of the header pipe to the distribution pipes of an equal distribution absorption field.
  - 11. Header pipe from Distribution or Drop Box must be minimum 4-ft length, level, and bedded.
  - 12. Each drainfield trench must be level within a tolerance of plus or minus 1-inch.
  - 13. Maximum length of an individual trench is 150-feet.
  - 14. Equal distribution, all trench bottoms must be at the same elevation. Use Distribution box(es).
  - 15.A pre-cover inspection of the installed absorption facility (prior to backfill) is required.
- 16.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.
  - 17. Photos of the septic system components must be submitted along with the FIRN.

#### Onsite Permit 463-21-000222-PRMT

Date issued: 6/14/21 Expiration date: 6/14/22

Work description: STANDARD CONSTRUCTION PERMIT

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.deg.state.or.us/wg/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).

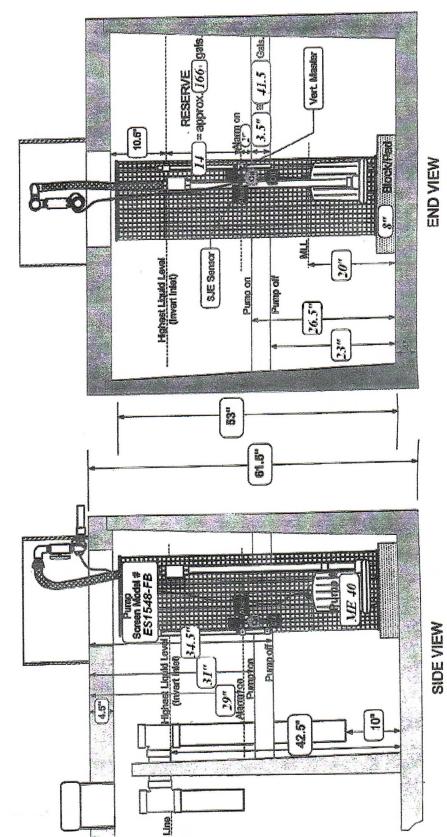
Unless otherwise required, it is the system installer's responsibility to backfill the system within 10 days after inspection and issuance of the CSC. Backfill must be carefully placed to prevent damage to the system. The backfill must be free of large stones, frozen clumps of earth, masonry, stumps, 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.

Danielle Morvan 6/14/21

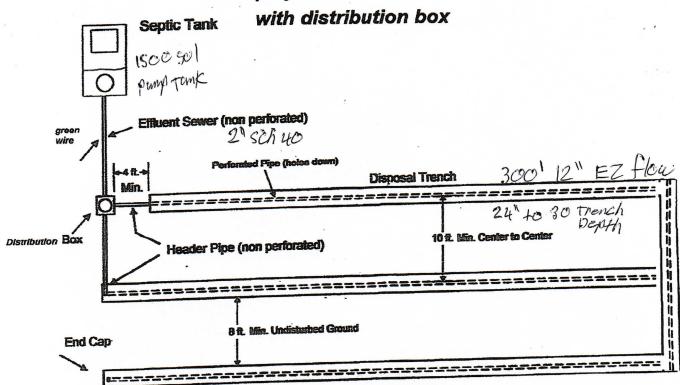
# RIVERSIDE READY MIX 1500 GALLON TWO COMPARTMENT

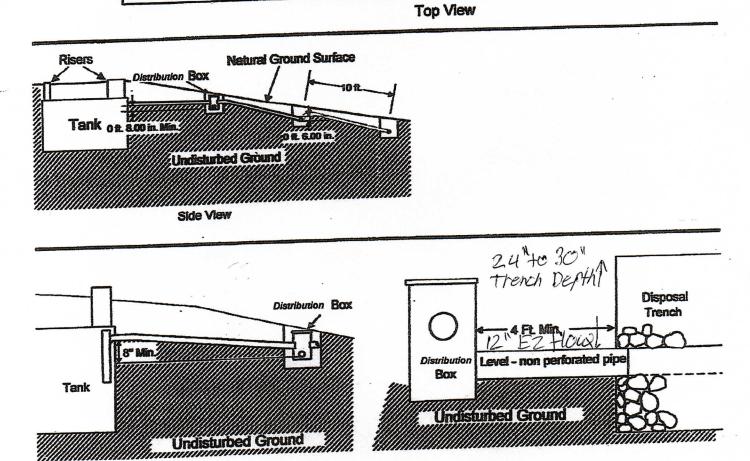
On-Demand dosing WORKSHEET

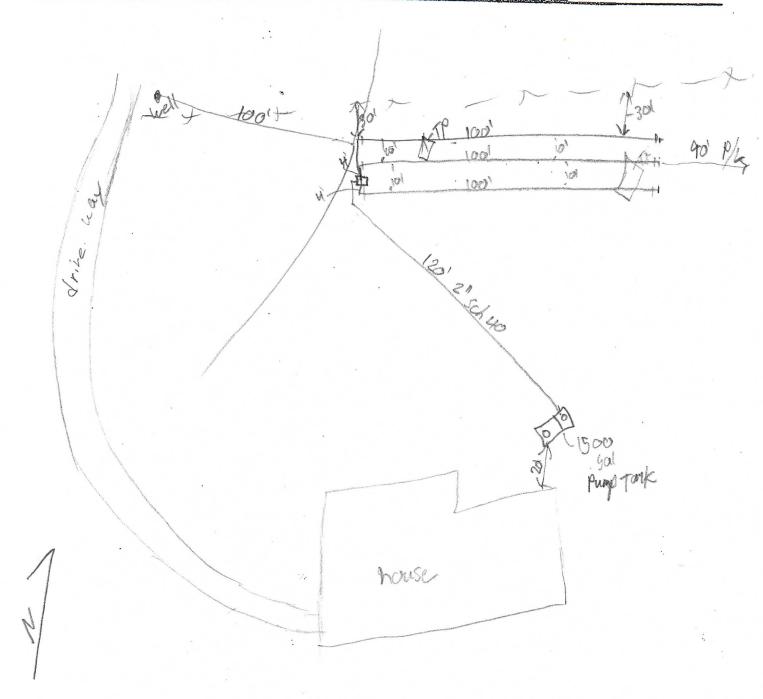


Approx. 11.9 gallons per inch

# loop system,









Property boundaries and disneusions Right-of-ways

Essences notatived and recorded
Enisting of proposed reads, diversiya, parting
Well locations, on the property & all Wells
Within 2000. Of the static

Test hole locations
Proposed dwelling location

Any criss (existing & proposed) in excess of 30 inches If disposed lines are up slope from a foundation, is there at least a 50-foot nather's? Location of septia trait, sandfiler, contain drain, drain field and replacement area. Elevation of proposed drop boxes of distribution boxes britial and replacement drain field. Transport pipe location.



# Residential Septic Site Evaluation Approval

463-20-000002-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: 11/24/2020

Application status: Site Evaluation Approved

Work description: Site Evaluation

Applicant: Doo Doo Bus Septic

Address: 4190 Williams Hwy Grants Pass OR 97527

Phone: (541) 846-3071

Owner:

Email: thedoodoobus@gmail.com

INVESTMENTS LLC

Address: 598 NE E ST STE C 598 NE E ST STE C

GRANTS PASS GRANTS PASS, OR

97526 97526

**EQUITY PROPERTY** 

Primary contractor: Doo Doo Bus Septic

Installer/Pumper License: 38974

Phone:

Address: 4190 Williams Hwy Grants Pass OR 97527

(541) 846-3071

Email: thedoodoobus@gmail.com

Property address: 229 Grange Rd, Grants Pass, OR

97526

Parcel: 350610A000410000 - Primary

Lot size:N/AWater supply:WellZoning:N/ACity/County/UGB:N/A

Proposed use of structure: N/A

Category of construction: Single Family Dwelling

General Specifications

Max peak design flow:450 gpd.Proposed gallons per day:N/AMin septic tank volume:1000 gal.Min dosing tank volume:N/A

System Specifications Initial System Replacement Area

System type:StandardStandardSystem distribution type:EqualEqualDistribution method:EqualEqual

Trench Specifications Initial System Replacement Area

 Trench linear feet:
 300 linear ft.
 300 linear ft.

 Max depth:
 30 in.
 30 in.

 Min depth:
 24 in.
 24 in.

Special Requirements Initial System Replacement Area

Drainfield type: N/A 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: 11/24/2020

Application status: Site Evaluation Approved

Work description: Site Evaluation

#### Conditions of approval:

- 1.The system must be installed by the property owner or a licensed sewage disposal business (installer).
- 2. Vehicular traffic and livestock must be restricted from the system area.
- 3.All roof drains must be directed away from the system
- 4.All tanks must be tested for watertightness and have a water-tight riser to the ground surface. Twenty- inch minimum diameter if less than 36-in deep. Thirty-inch minimum diameter if greater than 36-in deep. Maintain access to septic tank for pumping and service.
- 5. Meet all required setbacks
- 6.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.
- 7.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.
  - 8.Each drainfield trench must be level within a tolerance of plus or minus 1-inch.
  - 9.Maximum length of an individual trench is 150-feet.

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.

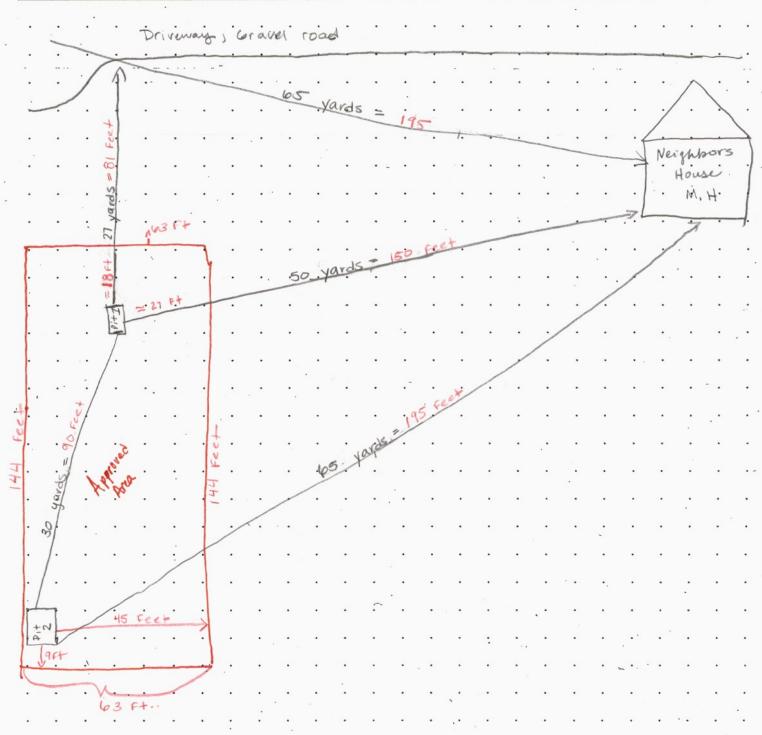
You may apply for a variance to the onsite wastewater treatment system rules. The variance application must include a copy of the site evaluation report, plans and specifications for the proposed system, specify the rule(s) to which a variance is being requested, demonstrate the variance is warranted, 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.

Danielle Morvan 11/24/20

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

			SITE EVALUATION FIELD WORKSHEET
Towns	hip: 35	Range:	O Section: O Property ID:
	-	avid Prulhier	
		Vov. 19, 2020	
	``		
	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC
	0-20"	CO SCL	3F, 3VF, 2M, 2L, 7.5 yr 1/2, WSAB, large complex, gravels throughout
	20-35"	CO SL	lvf, Im, mix d coloring, dominant color 7.5 yr 3/4; granular, rocky , colors.
Pit 1	35-58"	cobbles/gravel	IF, mixed, parent mentorial; cobbly, granular
		•	CANATACTECT
Pit 2		1	HIM AD ITS
			PI
		1	
n:4.2		+	
Pit 3		-	
•		<u> </u>	
			• • • • • • • • • • • • • • • • • • • •
Pit 4			·
			· !
	,		
	cape Notes:		Constitution Throat has a second seco
-	0-23°		spect: Groundwater Type: No Conditions associated w/se
		9 0 ,	large cobbles throughout both pits, no surface water obser
on	site, and	Set Dacks Dbs	Erved.
Daria	n Flow: 450	omd	SYSTEM SPECIFICATIONS
	System: Sto		
			inear feet/square feet Maximum Depth: 30 inches Minimum Depth: 24 inches
_		m: Standard	
~			inear feet/square feet Maximum Depth: 30 inches Minimum Depth: 24 inches
_			waluation is based on applicant confirmation
_		being 2.5	
2	Property	3 203	

Township: 35 Range: 06	Section: Property ID:
Owner/Applicant: David Prathiere	Evaluator: Danielle Morvan
Inspection Date(s):	Application Number:



CS 177-66

CEN. 1/4 COR.

SEE MAP 35S 06W 10

1/4 COR.

SEE MAP 35S 06W 10DA