



# Certificate of Satisfactory Completion Installation Permit - Residential - New

248-25-000204-PRMT

DEQ Medford Office  
221 Stewart Avenue  
Suite 201  
Medford, OR 97501  
541-776-6010  
OnsiteMedford@deq.state.or.us  
Website: oregon.gov/deq

**Date Certificate Issued:** 12/11/2025  
**Work Description:** Reece - Const/Install (Standard) - per owner already installed, needs permitted.

**Applicant:** REESE, DAVID & LEANN  
**Phone:** 541-944-8489  
**Email:** davidjreece@protonmail.com

**Owner:** DAVID & LEANN REECE      **Property Address:** 237 China Gulch Rd, Jacksonville, OR  
**Address:** 237 CHINA GULCH RD      97530  
JACKSONVILLE OR 97530

**Parcel:** 383W28319 - Primary      **Township:** 38    **Range:** 3W      **Section:** 28

**Lot Size:** 6.19      **Water Supply:** Well  
**Zoning:** N/A      **City/County/UGB:** N/A  
**Land Use Approval:** N/A

**Directions to Property:** From Hwy 237, turn on China Gulch Rd. In 0.24 miles up on left is shared driveway, property is at the end of the driveway before right turn.

**Category of Construction:** Residential

	Existing	Proposed
<b>Use of Structure:</b>	SFD	SFD
<b>Number of Bedrooms:</b>	4	4

**System Specifications**

**Type:** Standard  
**Max Peak Design Flow:** 450 gpd.      **Proposed Flow:** 300 gpd.  
**Min Septic Tank Volume:** 1000 gal.      **Min Dosing Tank Volume:** N/A

**Drain Field Specifications**

<b>Drain Field Type:</b>	Standard	<b>System Distribution Type:</b>	Serial
<b>Drainfield Sizing:</b>	75 linear ft.	<b>Distribution Method:</b>	Serial
<b>Media Type:</b>	EZ Flow 1201P	<b>Media Depth:</b>	12 in.
<b>Trench Length:</b>	240 linear ft.	<b>Rock Above Pipe:</b>	N/A
<b>Max Depth:</b>	30 in.	<b>Undisturbed Soil Between Trenches:</b>	8 ft.
<b>Min Depth:</b>	24 in.	<b>Capping Fills-Min Depth of Fill Material:</b>	N/A

Date Certificate Issued: 12/11/2025

Work Description: Reece - Const/Install (Standard) - per owner already installed, needs permitted.

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

Issued By: Andrew Forbes, Onsite Wastewater Specialist

Effective Date: 12/11/2025

*Andrew Forbes*

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 Permit

## Installation Permit - Residential - New

### 248-25-000204-PRMT

DEQ Medford Office  
 221 Stewart Avenue  
 Suite 201  
 Medford, OR 97501  
 541-776-6010  
 OnsiteMedford@deq.state.or.us  
 Website: oregon.gov/deq

**Date issued:** 8/7/25 **Expiration date:** 8/7/26

**Work description:** Reece - Const/Install (Standard) - per owner already installed, needs permitted.

**Applicant:** REESE, DAVID & LEANN  
**Phone:** 541-944-8489  
**Email:** davidjreece@protonmail.com  
**Business License:** N/A

**Owner:** DAVID & LEANN REECE  
**Address:** 237 CHINA GULCH RD  
 JACKSONVILLE OR 97530

**Property address:** 237 China Gulch Rd, Jacksonville, OR  
 97530

**Parcel:** 383W28319 - Primary      **Township:** 38    **Range:** 3W      **Section:** 28

<b>Lot size:</b>	6.19	<b>Water supply:</b>	Well
<b>Zoning:</b>	N/A	<b>City/County/UGB:</b>	N/A
<b>Land use approval:</b>	N/A	<b>County:</b>	Jackson
<b>Accessory Dwelling Unit:</b>	No		
<b>Action:</b>	New	<b>Type of application:</b>	Construction Permit - Residential
<b>System failing:</b>	N/A	<b>Septic tank last pumped:</b>	N/A
<b>Comments:</b>	N/A		

**Directions to property:** From Hwy 237, turn on China Gulch Rd. In 0.24 miles up on left is shared driveway, property is at the end of the driveway before right turn.

**Category of construction:** Residential

	Existing	Proposed
<b>Use of structure:</b>	SFD	SFD
<b>Number of bedrooms:</b>	4	4

**System Specifications**

<b>Type:</b>	Standard	<b>ATT description:</b>	N/A
<b>Max peak design flow:</b>	450 gpd.	<b>Proposed flow:</b>	300 gpd.
<b>Min septic tank volume:</b>	1000 gal.	<b>Min dosing tank volume:</b>	N/A

**Drain Field Specifications**

<b>Drain field type:</b>	Standard	<b>System distribution Ttpe:</b>	Serial
<b>Drainfield sizing:</b>	75 linear ft.	<b>Distribution method:</b>	Serial
<b>Media type:</b>	Other - Indicate Product/Manufacturer	<b>Media depth:</b>	12 in.
<b>Media type description:</b>	EZ Flow 1201P		
<b>Trench length:</b>	240 linear ft.	<b>Rock above pipe:</b>	N/A
<b>Max depth:</b>	30 in.	<b>Undisturbed soil between trenches:</b>	8 ft.
<b>Min depth:</b>	24 in.	<b>Capping fills-min depth of fill material:</b>	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: 8/7/25****Expiration date: 8/7/26****Work description: Reece - Const/Install (Standard) - per owner already installed, needs permitted.**

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.

Date issued: 8/7/25

Expiration date: 8/7/26

Work description: Reece - Const/Install (Standard) - per owner already installed, needs permitted.

Andrew Forbes

Onsite Wastewater Specialist

8/7/25

### Ways to Schedule Inspections

#### Oregon ePermitting App

Search the iOS or Android app store for 'epermitting' or by scanning the QR code below to get instant inspection results.



#### Oregon ePermitting Website

Schedule or track inspections online at [BuildingPermits.Oregon.gov](https://BuildingPermits.Oregon.gov).



#### Easy Scheduling Website

Start by visiting [BuildingPermits.Oregon.gov](https://BuildingPermits.Oregon.gov) > click on Schedule > click on Easy Inspection Scheduling or by scanning the QR code below.



For agencies that offer same-day inspection scheduling, the cut off is 7:00 AM.





# Existing System Evaluation Report for Onsite Wastewater Systems

State of Oregon Department of Environmental Quality  
Onsite Program  
165 East Seventh Ave, Suite 100  
Eugene, OR 97401

Please answer the following questions completely. Do not leave any blank responses. Write unknown if unknown. Refer to Oregon Administrative Rule 340-071-0155 for more information, and please visit: <http://www.oregon.gov/deq/Residential/Pages/Septic-Smart.aspx>

### Septic System Owner-Provided Information:

Property Owner(s)(Sellers): David Reece Telephone: \_\_\_\_\_

Site Address: 237 China Gulch Rd City: Jacksonville Zip Code: 97530

County: Jackson Lot Size: 6.19 (Acres/Square Feet (circle units))

Legal Description: Township: 38 Range: 3W Section: 28 Tax Lot: 319

Age of wastewater treatment system unknown (years) Is there a service contract for system components? No

Date the septic tank was last pumped 08/05/25 (please attach receipt if available)

Number of people occupying dwelling 4-5 If unoccupied, for how long has it been vacant? N/A

Was this section completed by the evaluator because owner or agent was unavailable? Yes

The above information is true and to the best of my knowledge.

Date (MM/DD/YYYY)

Signature of Owner, or agent if present

Name of person performing evaluation (please print): Jacob Kister - Jake's Superior Septic Service

### Certification:

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Installer                                   | <input type="checkbox"/> Professional Engineer           |
| <input checked="" type="checkbox"/> Maintenance Provider                        | <input type="checkbox"/> Environmental Health Specialist |
| <input type="checkbox"/> National Association of Wastewater Technicians         | <input type="checkbox"/> Waste Water Specialist          |
| <input type="checkbox"/> Other: DEQ approved in writing (please describe) _____ |  |

Certification Number: RI633

Business name Jake's Superior Septic Service Email Jakessuperiorsepticsevice@hotmail.com

Business address 1630 Williams Hwy #144 Grants Pass OR 97527 Phone 541-415-9516

Date of Evaluation: 08/05/2025 (MM/DD/YYYY)

I hereby certify, by my signature, that I meet all of the qualifications required to perform onsite wastewater system evaluations in the state of Oregon pursuant to OAR 340-071-0155.

08/05/2025

Date (MM/DD/YYYY)

Jacob Kister - Jake's Superior Septic Service  
Signature of Qualified Septic System Evaluator

1. **General System Information**

The Existing System Evaluation Report form contains 8 pages. Some of the questions on this form may not pertain to the system being evaluated, as there are many system designs. If you (the septic system evaluator) are unable to answer any of the questions on this form please indicate, in writing, why this information was not available at the time the evaluation was completed.

- The existing septic system consists of (check all that apply):

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Septic Tank            | <input type="checkbox"/> Cesspool                                  |
| <input type="checkbox"/> Dosing Tank                       | <input checked="" type="checkbox"/> Disposal Trenches/ Leach Lines |
| <input checked="" type="checkbox"/> Multi-compartment Tank | <input type="checkbox"/> Capping Fill                              |
| <input type="checkbox"/> Seepage Bed                       | <input type="checkbox"/> Sand Filter                               |
| <input type="checkbox"/> Other _____                       |  |

**Note:** Cesspools may be used only to serve existing sewage loads and if failing only be replaced with a seepage pit system on lots that are too small to accommodate a standard system or other alternative onsite system.

There is a permit for the septic system  Yes  No  Unknown

- Permit Number(s) No Install Permit
- Year original septic system installed: N/A (YYYY)  No record of installation date
- Dates of subsequent repairs or alterations: N/A (YYYY)
- All plumbing fixtures are connected to the septic system  Yes  No  Unknown

If you answered "No" or "unknown," please describe below:

Yes, To The Best Of Our Knowledge. Toilets flushed + Water Ran In House Which Ran into Septic Tank.

- Additional Comments:

N/A

2. **Overall Septic System Status**

- Discharge of sewage to the ground surface  Yes  No  None observed
- Discharge of sewage to surface waters  Yes  No  None observed
- Sewage backup into plumbing fixtures  Yes  No  Unknown  None Observed

- Additional Comments:

Uncovered beginning and end of each line and drop boxes - camera'd each line - pumped + inspected tank - System appears to be in good condition at time of inspection.

3. **Septic tank**

In order to fully describe the condition of the tank, the septic tank may need to be pumped. Please indicate below if the septic system tank was pumped during the course of *this* evaluation.

- Septic tank was pumped during the course of *this* evaluation  Yes  No
- If the septic tank was **NOT** pumped during the course of *this* evaluation, please explain (e.g. septic system owner declined to have the tank pumped etc):

We recommend pumping septic tank every 3-5 years with 2-3 people on system, depending on use.

- The septic tank material is:
  - Concrete
  - Steel
  - Plastic
  - Fiberglass
  - Other (explain) \_\_\_\_\_
  - Unknown
- Is the septic tank accessible?  Yes  No
- Septic tank volume in gallons 1500 Gallons
- Tank volume determined by: Check all that apply, add comments below as needed
  - Permit Records  Measured  Stamped on Tank  Other
- Septic tank risers are at ground level  Yes  No
- Tank appears to be free from defects, leaking and signs of deterioration  Yes  No  
If you answered "No," please describe the condition of the septic tank below. For example, evidence of gas corrosion, cracks, leaks, etc.  
N/A

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- Septic tank lid(s) is intact  Yes  No
- Septic tank baffles are intact: Inlet  Yes  No Outlet  Yes  No
- Baffle material - Inlet  Plastic  Concrete  Metal Outlet  Plastic  Concrete  Metal  
Plastic Tee Plastic Tee
- Effluent filter is present  Yes  No
- Effluent filter is free of debris  Yes  No  Not Applicable
- Liquid level in tank relative to invert of outlet  At  Above  Below  
If above or below invert outlet, please explain: N/A
- Scum layer 12 (inches) Sludge layer 10" (inches)
- Scum and Sludge layer more than 35% of the *total* tank volume  Yes  No  
Indicate where sludge measured from:  Inlet  Middle  Outlet
- Additional Comments:  
Solid side - 12" Scum, 10" Sludge - - - Pump Side - 1" Scum, 4" Sludge

N/A - No Dosing Tank

- 4. **Dosing tank / Pump Basin - No Dosing Tank**  
Dosing tanks use a pump to send effluent to a treatment unit or a soil absorption field.
- The septic system has a dosing tank  Yes  No  
(If "No," skip the rest of section 4)
- At the time of this evaluation the power was on to test the pump(s):  Yes  No

N/A - No Dosing Tank

- Dosing tank capacity \_\_\_\_\_ (gallons)
- Tank volume determined by: Check all that apply, add comments below as needed  
 Permit Records  Measured  Stamped on Tank  Other
- Dosing tank material \_\_\_\_\_
- Dosing tank appears to be watertight and in good condition  Yes  No
- Dosing tank lid is intact  Yes  No
- Electrical components are sealed and watertight  Yes  No
- Pump/ siphon is functional  Yes  No
- Type of Pump  Demand dose  Time dose
- Pump control mechanism is functional (floats, pressure transducer)  Yes  No
- There is a high water alarm  Yes  No
- The high water alarm (audible and visual) is working  Yes  No  Not Applicable
- Type of screen \_\_\_\_\_
- Screen is clean and free of debris  Yes  No - Screen cleaned for this evaluation  Yes  No
- Scum/ sludge present in Dosing tank  Yes  No
- Scum layer \_\_\_\_\_ (inches)      Sludge layer \_\_\_\_\_ (inches)
- Additional Comments:

\_\_\_\_\_  
\_\_\_\_\_

5. Soil absorption system

The soil absorption system is a set of trenches that receives effluent from the septic tank and filters the effluent before it enters the groundwater.

- The septic system has a soil absorption system  Yes  No  Unknown
- Was the soil absorption system part of the evaluation?  Yes  No  See note below

If the soil absorption system was not evaluated, please explain below (for example unable to locate, client did not authorize this part of the evaluation):

N/A

- Absorption distribution  Equal  Serial  Pressure  Equal via pressure
- Absorption lines construction material:  
 Gravel and pipe  Chamber  Tile  Polystyrene foam and pipe  Other 12" EZ Flow
- Absorption distribution unit(s):  dropbox  hydrosplitter  equal distribution box
- Intact  Damaged  N/A
- Absorption distribution unit(s) are free of debris or solids  Yes  No  N/A

- Locate all drain lines in soil absorption system  Yes  No  
Total length of drain lines 240 (ft)  
Lengths determined by  Physically uncovering portions of system/probing  Written records  
 Fish tape  Electronic locator  camera
- Absorption area appears to be free from roads, vehicular traffic, structures, livestock, deep-rooted plants etc.  
 Yes  No

If you answered "No," please describe below:

N/A  
\_\_\_\_\_  
\_\_\_\_\_

- Absorption area appears to be free from surface water runoff and down spouts  Yes  No  Unknown
- Evidence of ponding in absorption area or distribution unit(s)  Yes  No  Unknown
- The soil absorption system replacement area assigned in the permit record appears to be intact:  
 Yes  No  Replacement area not identified in permit record

If you answered "No," please explain below:

No Replacement area identified  
\_\_\_\_\_  
\_\_\_\_\_

- Additional Comments:

N/A  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. **Sand Filter System**

There are different sand filter system designs used in Oregon. Not every sand filter system will contain all of the components mentioned below, e.g. pumps. The owner of a sand filter system permitted on or after January 2, 2014 must maintain an annual service contract with a certified Maintenance Provider. Maintenance records should be available from the system owner, or the contracted Maintenance Provider. **Please attach copies of the previous two years of maintenance records to this evaluation form.**

- The septic system has a sand filter  Yes  No

(If "No," skip the rest of section 6)

- Type of sand filter

- Intermittent
- Recirculating
- Bottomless

- Sand filter container appears free from defects, leaks and signs of deterioration:  Yes  No

N/A No Sandfilter System

- Sand filter unit appears to be free from roads, vehicular traffic, structures, livestock, deep-rooted plants etc.

Yes  No

If you answered "No," please describe below:

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N/A No Sandfilter System

- Sand filter appears to be free from surface water runoff and down spouts  Yes  No
- Evidence of ponding in/ on sand filter media surface  Yes  No
- Surface access to manifold and valves  Yes  No
- Monitoring ports are present  Yes  No
- Lateral lines flushed and equal distribution verified  Yes  No
- The sand filter has a pump  Yes  No  
(If "No", skip the rest of section 6)
- Pump vault appears to be watertight and in good condition  Yes  No  N/A
- Pump is functional  Yes  No
- Pump control mechanism is functional (floats, pressure transducer)  Yes  No
- High water alarm in pump vault (audible and visual) is working  Yes  No
- Pump electrical components are sealed and watertight  Yes  No

- Additional Comments:

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**7. Alternative Treatment Technology System**

The owner of an ATT system *must* maintain an annual service contract with a certified Maintenance Provider. Maintenance records should be available from the system owner, or the contracted Maintenance Provider. **Please attach copies of the previous two years of maintenance records to this evaluation form.**

N/A - No ATT System

**Note\*** Some ATT systems may have a WPCF permit. Please contact the local Health Department or the DEQ to obtain a copy of the WPCF permit.

- The septic system has an Alternative Treatment Technology (ATT)  Yes  No  
(If "No," skip the rest of section 7)
- Please provide the product name, system ID number, and manufacturer name below:

Product name \_\_\_\_\_

System ID number \_\_\_\_\_

Manufacturer name \_\_\_\_\_

N/A - No  
ATT System

- Previous two years of maintenance records are available  Yes  No  
If you answered "No," please explain below:

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- Previous two years of maintenance records are attached to this form  Yes  No  
If you answered "No," please explain below:

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- Additional Comments:

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8. **Please attach a copy** of the following items to this form. Contact the DEQ, or the local Health Department to locate these items.

- The septic system permit(s) to this form, if available
- The as-built drawing(s) to this form, if available
- The Certificate of Satisfactory Completion to this form, if available
- Additional Comments:  
No Permit, As Built or Certificate of Satisfactory Completion issued at time of inspection.

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9. **Provide a Site Plan**

- Please provide a sketch of the complete system (show only system components that were evaluated) on page 8 of this form, if a copy of the original "as-built" drawing is *not* available.
- Please provide a sketch of the complete system on page 8 of this form if the original "as-built" drawing is *not* accurate or representative of the existing system.
- If the original "as-built" drawing is available for copy, and the original appears to be accurate and representative of the existing system, write "see attached as-built" on page 8 of this form, redrawing the system is unnecessary.
- Additional Comments:  
See pg 8 for sketch. \*Not drawn to scale - For visual representation only.

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10. **Disclaimer:**

This evaluation report describes the septic system as it exists on the date of evaluation and to the extent that components and operation of the system are reasonably observable. DEQ recognizes that this evaluation report does not provide assurance or any warranty that the system will operate properly in the future.

11. I hereby certify, by my signature, that the above information and the plot plan on the next page of this form are accurate and true to the best of my knowledge.

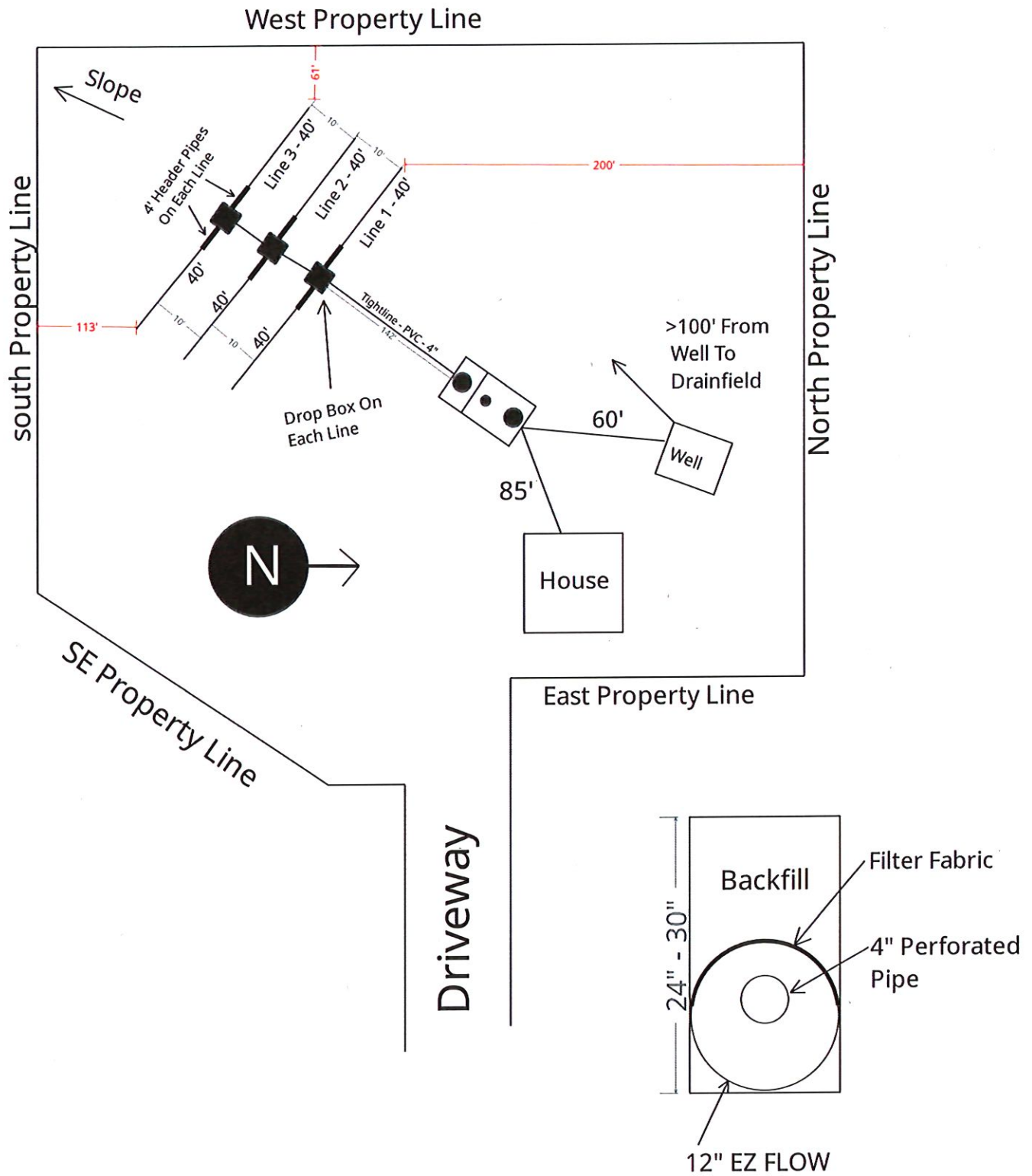
08/05/2025

Date

*Jacob...* Jake's Superior Septic Service  
Signature of Qualified Septic System Evaluator

I certify that I am licensed and bonded in the State of Oregon and that the above is true to the best of my knowledge, in this Date. We are not liable for any future issues or problems and this does not guarantee satisfactory or future use of system.

**Not Drawn To Scale - Visual Representation Only**  
237 China Gulch Rd, Jacksonville, OR 97530

















RECEIVED  
JUL 08 2025  
DEQ MEDFORD

## Statement of Site Status

Name: David James Reece

Address: 237 China Gulch Rd

City: Jacksonville State: OR Zip Code: 97530

Township: 38 Range: 3W Section: 28 Tax Lot: 300

County: Jackson

I certify by my signature the area for the initial and replacement onsite sewage disposal system has not been cut, filled or altered in any way since the original site evaluation was performed by the Department of Environmental Quality.

Date: 7/3/2025 Signed: 



State of Oregon  
Department of  
Environmental  
Quality

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

Send this application to the appropriate  
**DEQ office**

For DEQ Use Only:		Date Stamp
Date received: _____	Fee paid: _____	RECEIVED
Receipt number: _____	Application number: _____	JUL 03 2025
Date of 1 <sup>st</sup> response: _____	Date of 2 <sup>nd</sup> response: _____	DEQ MEDFORD
Date of final response: _____	Date of completion: _____	
Scanned: _____	Data Entry: _____	

*7/3/25*  
*\*system already installed - per owner.*

Property owner information	
Name:	David J Reece
Mailing Address:	237 China Gulch Rd Jacksonville OR 97530 United States
Phone number:	(541) 944-8489

Legal property description				
Township	Range	Section	Tax Lot	Acreage or Lot Size
38	3W	28	<del>300</del> <i>319</i>	<del>6.5</del> <i>6.19</i>
County	Subdivision Name		Tax Account Number	Block
Jackson				

Property address: 237 China Gulch Rd *JACKSONVILLE OR 97530*

Directions to property:  
From HWY 238 turn on China Gulch rd, .24 miles up on left is shared driveway, property is at the end of the driveway before right turn.

Existing facility/Proposed facility/Water information		
Existing facility	Proposed facility	Water supply
<input checked="" type="checkbox"/> Single family residence	<input checked="" type="checkbox"/> Single family residence	<input type="checkbox"/> Public
Number of bedrooms: <i>4</i>	Number of bedrooms: 4	Name:
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Private
Description:	Description:	Well, Spring, Shared: Well

Type of application		
<input type="checkbox"/> Site Evaluation <input checked="" 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:

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]* \_\_\_\_\_ Date 07/02/2025

David James Reece \_\_\_\_\_ (541) 944-8489

Applicant's name – please print legibly 237 China Gulch Rd Jacksonville OR 97530 United States  
Applicant's phone number davidjreece@protonmail.com

Applicant's mailing address \_\_\_\_\_ Applicant's email address

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:



DEQ Medford Office  
 221 Stewart Avenue  
 Suite 201  
 Medford, OR 97501  
 Phone: 541-776-6010

## Septic Site Evaluation Approval Residential Site Evaluation

248-17-000256-EVAL

www.oregon.gov/deq

OnsiteMedford@deq.state.or.us

**Date Issued:** 5/25/17  
**Work Description:** (Site evaluation)

**Applicant:** Miller, William  
**Address:** PO Box 818  
 Jacksonville OR 97530  
**Phone:** 541-890-3522  
**Email:** will555@rlousa.com

**Owner:** William L. Miller  
**Address:** PO Box 818  
 Jacksonville OR 97530  
**Property Address:** 233 China Gulch Rd, Jacksonville,  
 OR 97530  
**Parcel:** 383W28300 - Primary      **Township:**      **38S Range:**      **3W Section:**      **28**

**Lot Size:** Not specified      **Water Supply:** Well  
**Zoning:** Not specified      **City/County/UGB:** Not specified  
**County:** Jackson

**Directions to Property:** To China gulch Rd., turn left @233, down gravel drive/private drive to button, through gate, past barn

**Proposed Use of Structure:** 4 bedroom single family dwelling  
**Category of Construction:** Single Family Dwelling

**Number of Bedrooms:** **Proposed**  
4

**General Specifications**

<b>Max Peak Design Flow:</b>	450 gpd	<b>Proposed Gallons per Day:</b>	450 gpd
<b>Min Septic Tank Volume:</b>	1000 gal	<b>Min Dosing Tank Volume:</b>	N/A
<b>Special Tank Reqmts:</b>	N/A		
<b>Media Depth:</b>	N/A		
<b>Seepage Bed Specs:</b>	Not specified		

**Initial System**

**Replacement Area**

**System Specifications**

<b>System Type:</b>	Standard	Standard
<b>System Distribution Type:</b>	Serial	Serial
<b>Distribution Method:</b>	Serial	Serial

**Initial System**

**Replacement Area**

**Trench Specifications**

<b>Trench Linear Feet:</b>	225 linear ft	225 linear' ft
<b>Max Depth:</b>	30 in	30 in
<b>Min Depth:</b>	24 in	24 in
<b>Capping Fills-Min Depth of Fill Material:</b>	N/A	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.)

5/25/17: 3:57:09PM

Page 1 of 2

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 STANDARD

Date Issued: 5/25/17  
 Work Description: Site evaluation

Special Requirements	Initial System	Replacement Area
Stakeout Required:	No	No
Groundwater Type:	N/A	N/A
Groundwater Depth:	N/A	N/A
Groundwater Interceptor:	N/A	N/A
Groundwater Interceptor-Amount of Drain Media:	N/A	N/A
Groundwater Interceptor Depth:	N/A	N/A
Drainfield Type:	Standard	Standard
Drainfield Sizing:	N/A	N/A
Pump to Drainfield Required:	No	No
Other Special Requirement:	N/A	N/A

**Conditions of Approval:**

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 DEQ 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 believe the site evaluation is in error or that a variance from approval conditions is necessary, please contact our office for more details.

Marty Easter

Onsite Wastewater Specialist

5/25/17

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.)

5/25/17: 3:57:09PM

Page 2 of 2

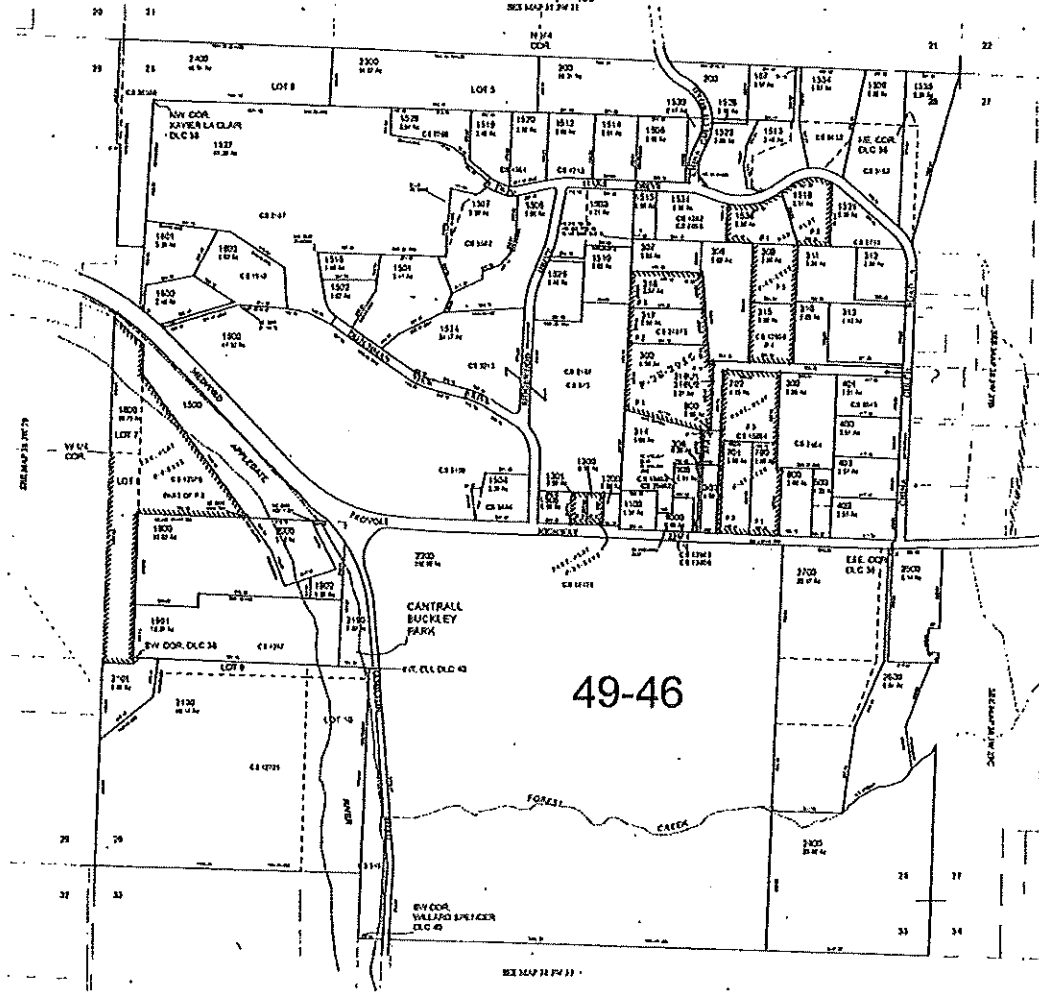
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FOR ASSESSMENT AND  
TAXATION ONLY

SECTION 28, T.38S., R.3W., W.M.  
JACKSON COUNTY

38 3W 28



CANCELLED TAX  
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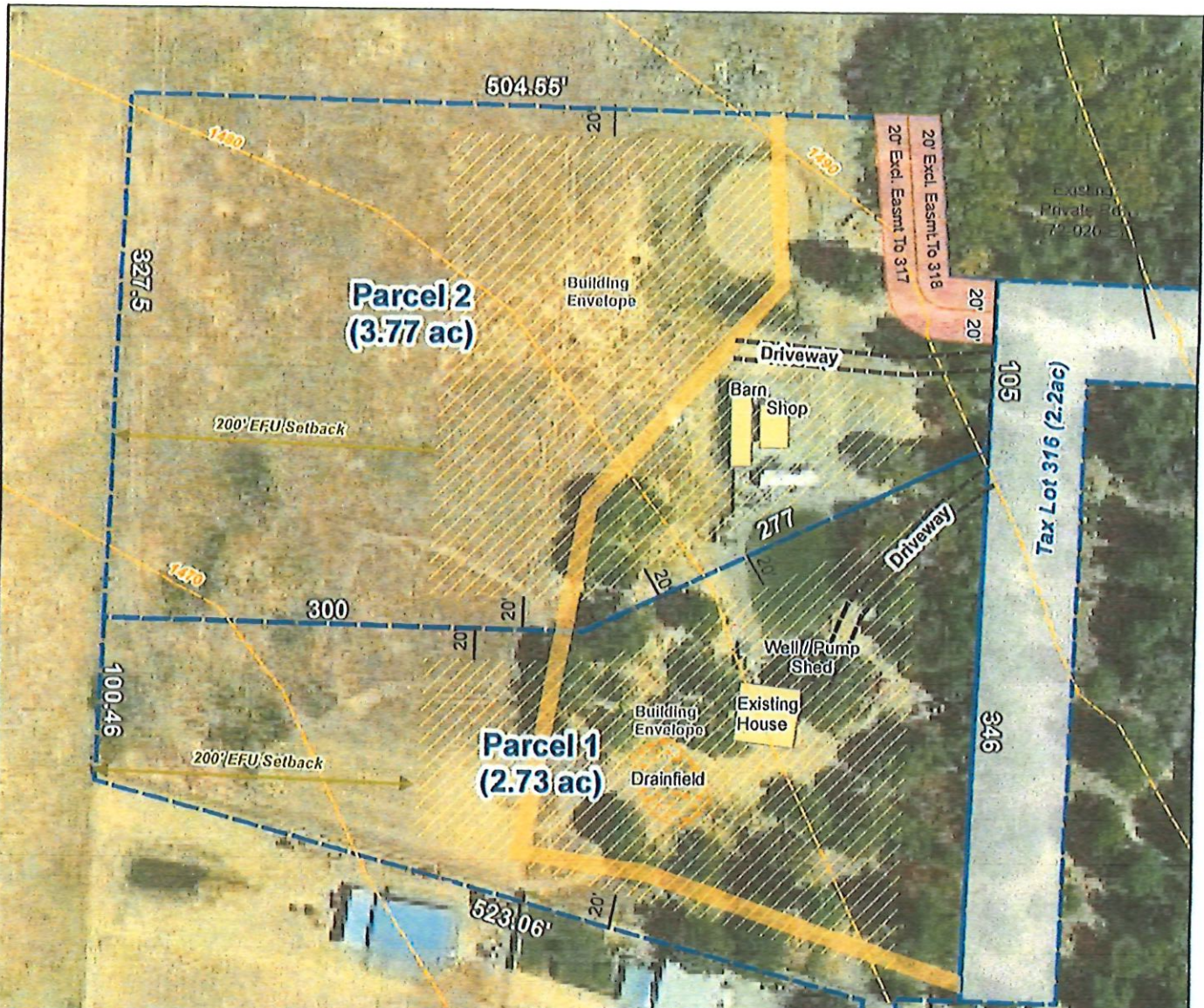
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38 3W 28

NEW MAP BOOK NO. 2003  
REV. JANUARY 20, 2016

GIS DATA  
QUOTED TO 11/17/2016 11:00 AM

REV. MAP 22 11/17/11



### Tentative Partition Plan

Miller, William Et Al; 38-3W-28-300



- Proposed Parcels
- Building Envelope
- Driveways
- 10ft Contours
- \* Easement 92-12812
- \* Easements 2007-035989, 92-29878 & 92-29879
- \* 20ft Ingress Egress Easements
- Existing Building
- Approximate Drainfield

2016 Aerial

0 50 100 Feet



\* See Partition Plat P-38-2015 for complete list and detail of all Easements

03-24-2017

**Date Issued:** 8/13/25

**Date Expiring:** 8/13/26

**Work Description:** Reese - Authorization Notice (Authorize use of existing, non-permitted septic system installed)

Note: This Notice does not guarantee satisfactory or continuous operation of the sewage system. Should the system fail, a repair permit from DEQ is required.

If you disagree with this report, you have the right to apply for an authorization notice denial review. The application for review must be submitted in writing within 45 days of the report issuance and be accompanied by the review fee in OAR 340-071-0140(3), Table 9C and any additional information DEQ needs to complete the review.

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.

Andrew Forbes

Onsite Wastewater Specialist

8/13/25



# Existing System Evaluation Report for Onsite Wastewater Systems

State of Oregon Department of Environmental Quality  
Onsite Program  
165 East Seventh Ave, Suite 100  
Eugene, OR 97401

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Please answer the following questions completely. Do not leave any blank responses. Write unknown if unknown. Refer to Oregon Administrative Rule 340-071-0155 for more information, and please visit: <http://www.oregon.gov/deq/Residential/Pages/Septic-Smart.aspx>

### Septic System Owner-Provided Information:

Property Owner(s)(Sellers): David Reece Telephone: \_\_\_\_\_

Site Address: 237 China Gulch Rd City: Jacksonville Zip Code: 97530

County: Jackson Lot Size: \_\_\_\_\_ 6.19 (Acres/Square Feet (circle units))

Legal Description: Township: 38 Range: 3W Section: 28 Tax Lot: 319

Age of wastewater treatment system unknown (years) Is there a service contract for system components? No

Date the septic tank was last pumped 08/05/25 (please attach receipt if available)

Number of people occupying dwelling 4-5 If unoccupied, for how long has it been vacant? N/A

Was this section completed by the evaluator because owner or agent was unavailable? Yes

The above information is true and to the best of my knowledge.

\_\_\_\_\_  
Date (MM/DD/YYYY) Signature of Owner, or agent if present

Name of person performing evaluation (please print): Jacob Kister - Jake's Superior Septic Service

### Certification:

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Installer                                   | <input type="checkbox"/> Professional Engineer           |
| <input checked="" type="checkbox"/> Maintenance Provider                        | <input type="checkbox"/> Environmental Health Specialist |
| <input type="checkbox"/> National Association of Wastewater Technicians         | <input type="checkbox"/> Waste Water Specialist          |
| <input type="checkbox"/> Other: DEQ approved in writing (please describe) _____ |  |

Certification Number: RI633

Business name Jake's Superior Septic Service Email Jakessuperiorsepticsservice@hotmail.com

Business address 1630 Williams Hwy #144 Grants Pass OR 97527 Phone 541-415-9516

Date of Evaluation: 08/05/2025 (MM/DD/YYYY)

I hereby certify, by my signature, that I meet all of the qualifications required to perform onsite wastewater system evaluations in the state of Oregon pursuant to OAR 340-071-0155.

08/05/2025  
Date (MM/DD/YYYY)

Jacob Kister - Jake's Superior Septic Service  
Signature of Qualified Septic System Evaluator

1. General System Information

The Existing System Evaluation Report form contains 8 pages. Some of the questions on this form may not pertain to the system being evaluated, as there are many system designs. If you (the septic system evaluator) are unable to answer any of the questions on this form please indicate, in writing, why this information was not available at the time the evaluation was completed.

- The existing septic system consists of (check all that apply):

- Septic Tank
Dosing Tank
Multi-compartment Tank
Seepage Bed
Other

- Cesspool
Disposal Trenches/ Leach Lines
Capping Fill
Sand Filter

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Note: Cesspools may be used only to serve existing sewage loads and if failing only be replaced with a seepage pit system on lots that are too small to accommodate a standard system or other alternative onsite system.

There is a permit for the septic system Yes No Unknown

- Permit Number(s) No Install Permit
Year original septic system installed: N/A (YYYY) No record of installation date
Dates of subsequent repairs or alterations: N/A (YYYY)
All plumbing fixtures are connected to the septic system Yes No Unknown

If you answered "No" or "unknown," please describe below:

Yes, To The Best Of Our Knowledge. Toilets flushed + Water Ran In House Which Ran into Septic Tank.

- Additional Comments:

N/A

2. Overall Septic System Status

- Discharge of sewage to the ground surface Yes No None observed
Discharge of sewage to surface waters Yes No None observed
Sewage backup into plumbing fixtures Yes No Unknown None Observed

- Additional Comments:

Uncovered beginning and end of each line and drop boxes - camera'd each line - pumped + inspected tank - System appears to be in good condition at time of inspection.

3. Septic tank

In order to fully describe the condition of the tank, the septic tank may need to be pumped. Please indicate below if the septic system tank was pumped during the course of this evaluation.

- Septic tank was pumped during the course of this evaluation Yes No
If the septic tank was NOT pumped during the course of this evaluation, please explain (e.g. septic system owner declined to have the tank pumped etc):

We recommend pumping septic tank every 3-5 years with 2-3 people on system, depending on use.

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- The septic tank material is:
  - Concrete
  - Steel
  - Plastic
  - Fiberglass
  - Other (explain) \_\_\_\_\_
  - Unknown

- Is the septic tank accessible?  Yes  No
  - Septic tank volume in gallons 1500 Gallons
  - Tank volume determined by: Check all that apply, add comments below as needed
    - Permit Records  Measured  Stamped on Tank  Other
  - Septic tank risers are at ground level  Yes  No
  - Tank appears to be free from defects, leaking and signs of deterioration  Yes  No
- If you answered "No," please describe the condition of the septic tank below. For example, evidence of gas corrosion, cracks, leaks, etc.

N/A

- Septic tank lid(s) is intact  Yes  No
- Septic tank baffles are intact: Inlet  Yes  No Outlet  Yes  No
- Baffle material - Inlet  Plastic  Concrete  Metal Outlet  Plastic  Concrete  Metal  
Plastic Tee Plastic Tee
- Effluent filter is present  Yes  No
- Effluent filter is free of debris  Yes  No  Not Applicable
- Liquid level in tank relative to invert of outlet  At  Above  Below  
 If above or below invert outlet, please explain: N/A
- Scum layer 12 (inches) Sludge layer 10" (inches)
- Scum and Sludge layer more than 35% of the total tank volume  Yes  No  
 Indicate where sludge measured from:  Inlet  Middle  Outlet
- Additional Comments:  
Solid side - 12" Scum, 10" Sludge - - - Pump Side - 1" Scum, 4" Sludge

N/A - No Dosing Tank

- 4. Dosing tank / Pump Basin - No Dosing Tank  
 Dosing tanks use a pump to send effluent to a treatment unit or a soil absorption field.
- The septic system has a dosing tank  Yes  No  
 (If "No," skip the rest of section 4)
- At the time of this evaluation the power was on to test the pump(s):  Yes  No

N/A - No Dosing Tank

- Dosing tank capacity \_\_\_\_\_ (gallons)
- Tank volume determined by: Check all that apply, add comments below as needed  
 Permit Records  Measured  Stamped on Tank  Other
- Dosing tank material \_\_\_\_\_
- Dosing tank appears to be watertight and in good condition  Yes  No
- Dosing tank lid is intact  Yes  No
- Electrical components are sealed and watertight  Yes  No
- Pump/ siphon is functional  Yes  No
- Type of Pump  Demand dose  Time dose
- Pump control mechanism is functional (floats, pressure transducer)  Yes  No
- There is a high water alarm  Yes  No
- The high water alarm (audible and visual) is working  Yes  No  Not Applicable
- Type of screen \_\_\_\_\_
- Screen is clean and free of debris  Yes  No - Screen cleaned for this evaluation  Yes  No
- Scum/ sludge present in Dosing tank  Yes  No
- Scum layer \_\_\_\_\_ (inches)      Sludge layer \_\_\_\_\_ (inches)
- Additional Comments:

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5. Soil absorption system

The soil absorption system is a set of trenches that receives effluent from the septic tank and filters the effluent before it enters the groundwater.

- The septic system has a soil absorption system  Yes  No  Unknown
- Was the soil absorption system part of the evaluation?  Yes  No  See note below

If the soil absorption system was not evaluated, please explain below (for example unable to locate, client did not authorize this part of the evaluation):

N/A

- Absorption distribution  Equal  Serial  Pressure  Equal via pressure
- Absorption lines construction material:  
 Gravel and pipe  Chamber  Tile  Polystyrene foam and pipe  Other 12" EZ Flow
- Absorption distribution unit(s):  dropbox  hydrosplitter  equal distribution box
- Intact  Damaged  N/A
- Absorption distribution unit(s) are free of debris or solids  Yes  No  N/A

- Locate all drain lines in soil absorption system  Yes  No

Total length of drain lines 240 (ft)

Lengths determined by  Physically uncovering portions of system/probing  Written records

Fish tape  Electronic locator  camera

- Absorption area appears to be free from roads, vehicular traffic, structures, livestock, deep-rooted plants etc.

Yes  No

If you answered "No," please describe below:

N/A

- Absorption area appears to be free from surface water runoff and down spouts  Yes  No  Unknown

- Evidence of ponding in absorption area or distribution unit(s)  Yes  No  Unknown

- The soil absorption system replacement area assigned in the permit record appears to be intact:

Yes  No  Replacement area not identified in permit record

If you answered "No," please explain below:

No Replacement area identified

- Additional Comments:

N/A

6. Sand Filter System

There are different sand filter system designs used in Oregon. Not every sand filter system will contain all of the components mentioned below, e.g. pumps. The owner of a sand filter system permitted on or after January 2, 2014 must maintain an annual service contract with a certified Maintenance Provider. Maintenance records should be available from the system owner, or the contracted Maintenance Provider. Please attach copies of the previous two years of maintenance records to this evaluation form.

N/A No Sandfilter System

- The septic system has a sand filter  Yes  No

(If "No," skip the rest of section 6)

- Type of sand filter

Intermittent  
 Recirculating  
 Bottomless

- Sand filter container appears free from defects, leaks and signs of deterioration:  Yes  No

AUG 12 2025

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N/A No Sandfilter System

- Sand filter unit appears to be free from roads, vehicular traffic, structures, livestock, deep-rooted plants etc.

Yes  No

If you answered "No," please describe below:

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- Sand filter appears to be free from surface water runoff and down spouts  Yes  No

- Evidence of ponding in/ on sand filter media surface  Yes  No

- Surface access to manifold and valves  Yes  No

- Monitoring ports are present  Yes  No

- Lateral lines flushed and equal distribution verified  Yes  No

- The sand filter has a pump  Yes  No

(If "No", skip the rest of section 6)

- Pump vault appears to be watertight and in good condition  Yes  No  N/A

- Pump is functional  Yes  No

- Pump control mechanism is functional (floats, pressure transducer)  Yes  No

- High water alarm in pump vault (audible and visual) is working  Yes  No

- Pump electrical components are sealed and watertight  Yes  No

- Additional Comments:

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N/A - No ATT System

**7. Alternative Treatment Technology System**

The owner of an ATT system *must* maintain an annual service contract with a certified Maintenance Provider. Maintenance records should be available from the system owner, or the contracted Maintenance Provider. **Please attach copies of the previous two years of maintenance records to this evaluation form.**

**Note\*** Some ATT systems may have a WPCF permit. Please contact the local Health Department or the DEQ to obtain a copy of the WPCF permit.

- The septic system has an **Alternative Treatment Technology (ATT)**  Yes  No

(If "No," skip the rest of section 7)

- Please provide the product name, system ID number, and manufacturer name below:

Product name \_\_\_\_\_  
 System ID number \_\_\_\_\_  
 Manufacturer name \_\_\_\_\_

AUG 12 2025

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N/A - No  
ATT System

- Previous two years of maintenance records are available  Yes  No  
If you answered "No," please explain below:

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- Previous two years of maintenance records are attached to this form  Yes  No  
If you answered "No," please explain below:

---



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- Additional Comments:

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8. **Please attach a copy** of the following items to this form. Contact the DEQ, or the local Health Department to locate these items.

- The septic system permit(s) to this form, if available
- The as-built drawing(s) to this form, if available
- The Certificate of Satisfactory Completion to this form, if available
- Additional Comments:  
No Permit, As Built or Certificate of Satisfactory Completion issued at time of inspection.

---



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9. **Provide a Site Plan**

- Please provide a sketch of the complete system (show only system components that were evaluated) on page 8 of this form, if a copy of the original "as-built" drawing is *not* available.
- Please provide a sketch of the complete system on page 8 of this form if the original "as-built" drawing is *not* accurate or representative of the existing system.
- If the original "as-built" drawing is available for copy, and the original appears to be accurate and representative of the existing system, write "see attached as-built" on page 8 of this form, redrawing the system is unnecessary.
- Additional Comments:  
See pg 8 for sketch. \*Not drawn to scale - For visual representation only.

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10. **Disclaimer:**

This evaluation report describes the septic system as it exists on the date of evaluation and to the extent that components and operation of the system are reasonably observable. DEQ recognizes that this evaluation report does not provide assurance or any warranty that the system will operate properly in the future.

11. I hereby certify, by my signature, that the above information and the plot plan on the next page of this form are accurate and true to the best of my knowledge.

08/05/2025

Date

*Jacob...* Jake's Superior Septic Service  
Signature of Qualified Septic System Evaluator

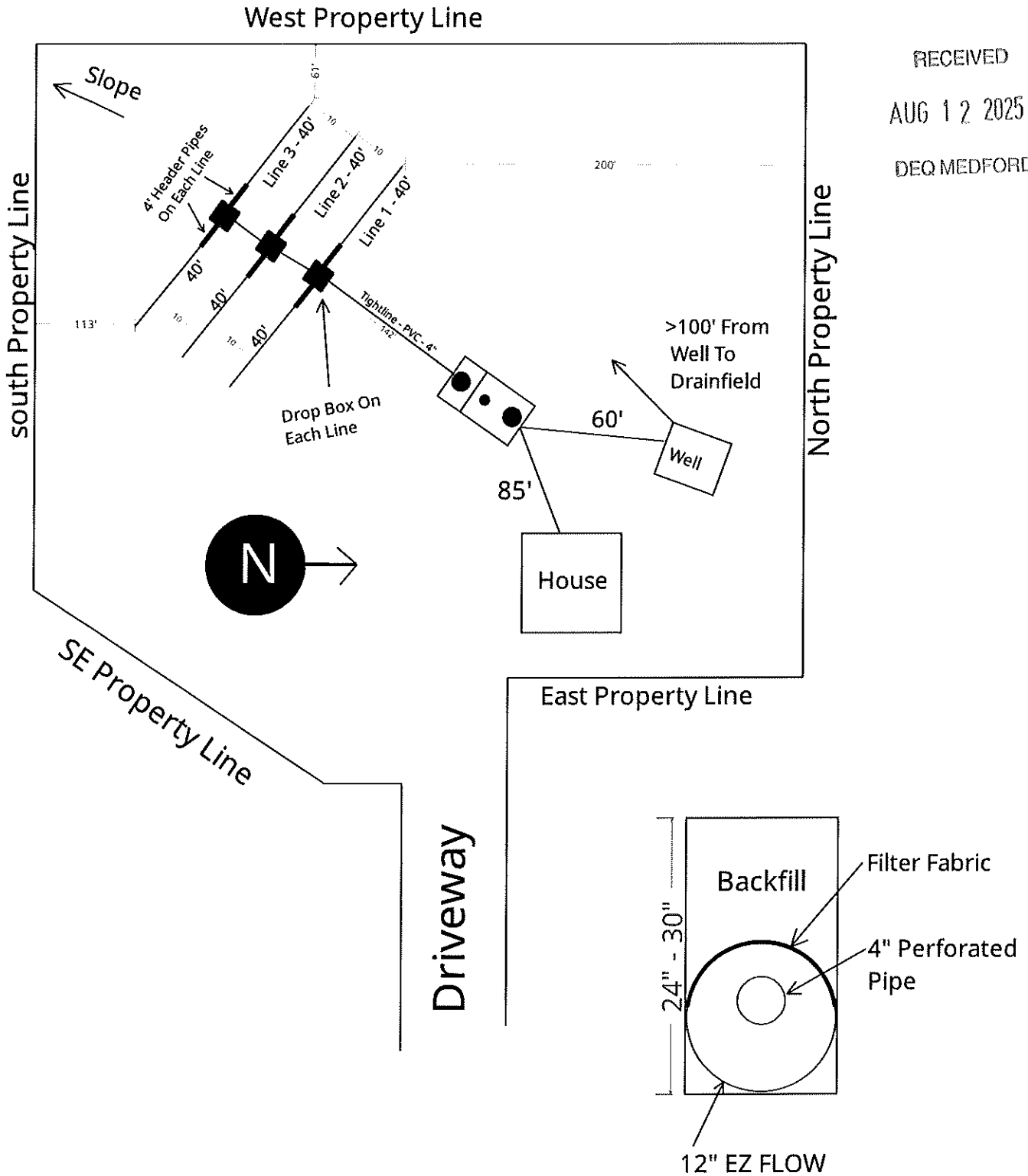
I certify that I am licensed and bonded in the State of Oregon and that the above is true to the best of my knowledge, in this Date. We are not liable for any future issues or problems and this does not guarantee satisfactory or future use of system.

**Not Drawn To Scale - Visual Representation Only**  
237 China Gulch Rd, Jacksonville, OR 97530

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AUG 12 2025

DEQ MEDFORD





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

Send this application to the appropriate  
DEQ office

For DEQ Use Only:		Date Stamp
Date received: _____	Fee paid: _____	RECEIVED  AUG 12 2025  DEQ MEDFORD
Receipt number: _____	Application number: _____	
Date of 1 <sup>st</sup> response: _____	Date of 2 <sup>nd</sup> response: _____	
Date of final response: _____	Date of completion: _____	
Scanned: _____	Data Entry: _____	

Property owner information				
Name:	David J Reece			
Mailing Address:	237 China Gulch Rd Jacksonville OR 97530 United States			
Phone number:	(541) 944-8489			
Legal property description				
Township	Range	Section	Tax Lot	Acreage or Lot Size
38	3W	28	300	6.5
County	Subdivision Name		Tax Account Number	Block
Jackson				
Property address: 237 China Gulch Rd				
Directions to property:				
From HWY 238 turn on China Gulch rd, .24 miles up on left is shared driveway, property is at the end.				
Existing facility/Proposed facility/Water information				
Existing facility		Proposed facility		Water supply
<input checked="" type="checkbox"/> Single family residence		<input checked="" type="checkbox"/> Single family residence		<input type="checkbox"/> Public
Number of bedrooms: <i>2</i>		Number of bedrooms: 4		Name:
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input checked="" type="checkbox"/> Private
Description:		Description:		Well, Spring, Shared: Well
Type of application				
<input type="checkbox"/> Site Evaluation 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 checked="" type="checkbox"/> Renewal Permit Existing System Evaluation <input type="checkbox"/> Permit Transfer <input type="checkbox"/> Permit Reinstatement <input checked="" 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 checked="" 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:		
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.				
		07/02/2025		
Signature		Date		
David James Reece		(541) 944-8489		
Applicant's name – please print legibly		Applicant's phone number		
237 China Gulch Rd Jacksonville OR 97530 United States		davidjreece@protonmail.com		
Applicant's mailing address		Applicant's email address		
Applicant is the:		<input checked="" type="checkbox"/> Owner		<input type="checkbox"/> Authorized representative
		<input type="checkbox"/> Authorization attached		<input type="checkbox"/> Licensed septic installer
				Installer name:



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AUG 12 2025

DEQ MEDFORD

DEVELOPMENT SERVICES

Planning Division

10 South Oakdale Ave., Room 100

Medford, OR 97501-2902

Phone: 541-774-6907



# JACKSON COUNTY ZONING AUTHORIZATION

ZONING: Rural Residential-2.5

RECORD #: 439-24-00218-ZON

ADDRESS: 237 CHINA GULCH RD

PRINT DATE: 07/08/2025

PRIMARY PARCEL #: 38-3W-28-319

LAST UPDATED: 02/06/2024

CASE TYPE: Zoning Information Sheet

PROCESS TYPE: Type I Permit

ASSOCIATED LOTS:

Owners

REECE DAVID/LEANN  
237 CHINA GULCH RD  
JACKSONVILLE, OR 97530

Record Detail Description

ZIS Initial Dwelling (existing) and Addition

Primary Contact

REECE DAVID/LEANN  
237 CHINA GULCH RD  
JACKSONVILLE, OR 97530

Contact Type

Applicant

**GENERAL ZIS INFORMATION:**

<u>STAFF</u>	<u>DATE</u>	<u>COMMENTS</u>
BEELERSF	02/06/2024	02/06/2024: Proposal is to recognize the existing dwelling on site and do an addition. Assessment shows a 2022 816 SqFt Two story (not recognized by Planning or Building). Parcel configuration approved in 439-18-00049-SUB as shown in survey 22864 signed by Planning on 07/18/2019. In wildfire hazard area, no other overlays of concern. See conditions. SFB
	06/25/2025:	Plans stamped approved and submitted to building. PTP conditions remain.
		Plot plan submitted. ZIS fee paid. FSI ordered. PTP conditions remain. KW
	07/03/2025:	RR Deed Declaration Submitted. PTP conditions remain. KW
	07/08/2025:	OK for Septic to serve the 4-bedroom dwelling. Septic authorization valid through 07/08/2027. PTBP conditions remain. RC

**OVERLAY DETAILS:**

Applicable Overlay

Wildfire Hazard Area

Comments

FD#9, 100' fuelbreaks

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

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**STRUCTURE / SIZE DETAILS:**

<u>Item</u>	<u>Units</u>	<u>Proposed Size</u>	<u>Approved Size</u>	<u>Comments</u>
Existing Dwelling	Sq Ft	816	816	2022 816 SqFt Two story, not recognized by Planning or Building.

**HEIGHT / LOCATION DETAILS:**

<u>Items</u>	<u>Distance</u>	<u>Direction</u>	<u>Approved Height</u>	<u>Comments</u>
Addition	30	East	35	General RR-2.5 setbacks
	20	North		
	20	South		
	20	East		
Other	230	East	31	Addition Setbacks
	120	North		
	100	South		
	289	West		

<u>Condition</u>	<u>Hold Level</u>	<u>Status</u>
Counter Consultation Fee Due ZIS fee must be paid prior to issuance of any permits applicable to this case.  * Under circumstances where the approved use and/or structure is found to be exempt from building permits, all outstanding ZIS fees must be paid prior to initiating the approved use and/or prior to initiating construction of said structure.		Met
Special Setback THERE IS A SPECIAL SETBACK OF 200 FEET FROM THE EFU ZONED PROPERTY TO THE WEST.  (LDO Sections 3.12.1; 8.5.2A; 8.5.3)		Met
Plan Approval All plans must be reviewed and approved by planning staff prior to authorization of permits.		Met
FSI Fee Due FIRE SAFETY INSPECTION fee must be paid at time of Fire Safety Inspection Request.	Notice	Not Met
RR Deed Declaration Prior to issuance of permits, a Deed Declaration which acknowledges and accepts farm and forest activities on adjacent lands shall be recorded. The deed declaration must be signed in the presence of a notary public and taken to the County Clerk's Office for recording. After the Deed Declaration has been recorded, a copy must be returned to Development Services. (LDO Section 8.4.1 A)		Met
Fire Safety Inspection	Notice	Not Met

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

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"Prior to issuance of building permits\*, the Jackson County Fire Safety Inspector must inspect the property to verify that the Wildfire Safety Standards of Section 8.7.1 are in place. A Fire Safety Inspection must be requested and paid for at Development Services when all requirements have been met. An information sheet with a complete checklist of all requirements is available at Development Service or on-line on the Development Services page under ""Planning Guides.""

The following is a summary of the requirements that must be in place prior to the inspection request:

A) A plot plan indicating the proposed structure(s) must be on record in the Planning Department.

B) The proposed structure(s) must be staked out on the site.

C) Address signs must be installed at the driveway entrance (visible from both directions) and at all forks in the drive, with directional arrows as needed.

D) Driveway access to within 150' of all exterior first story walls of all buildings must be constructed to support a gross vehicle weight of 50,000 pounds and an occasional 60,000 pound load to accommodate heavy firefighting equipment. The driveway must terminate in an approved turnaround arrangement that meets the same load carrying capacity. A 22' fuelbreak including the driving surface is required along private accessways, driveways, private roads, and private access easements in accordance with Section 8.7.1(B)(1).

E) A 100-foot/150-foot fuelbreak must be developed and maintained around all new construction. If the 100-foot/150-foot fuelbreak extends onto an adjoining parcel(s), then either a fuelbreak easement(s) must be recorded and submitted or a fuelbreak reduction application must be approved by the County.

Warning: No understory vegetation or tree

canopy may be removed in order to comply with the fuelbreak requirements of Section 8.7.1(B), which are superseded by the requirements of this Section within the area in which the riparian setback applies.

Under circumstances where the approved use and or structure is found to be exempt from building permits, the conditions stated above must be met prior to initiating the approved use and/or prior to initiating construction of said structure.

Plot Plan

Met

PRIOR TO PERMITS

An accurate plot plan must be submitted for review by Development Services on either standard 8.5" x 11" or legal 8.5" x 14" size paper. The plot plan must accurately depict the boundaries of the parcel. It must be accurately drawn to a base 10-foot scale (e.g. 1" = 60'). All improvements on the property must be shown on the plot plan with labels and distances to the property lines. (LDO Sections 3.4.2A; 6.2.1A; 12.2.3)

Fire Safety (at Time of Permits)

Met

At the time of application for building permits, evidence must be provided to Planning demonstrating the proposed improvement will meet the following Fire Safety Standards as required by JCLDO Section 8.7.1:

1. Roof Coverings: All structures shall have Class A or B roofing according to

Section 1504 of the State of Oregon Structural Specialty Code. This prohibits

wood roofing of any type, including pressure treated wood.shingle or shakes.

2. Slope: All new dwellings shall be sited on a slope less than 40 percent.

3. Chimneys: All chimneys for new dwellings, or other significant outbuildings, shall have a spark arrester.

(LDO Section 8.7.1)

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.

RECEIVED

AUG 12 2025

DEQ MEDFORD

---

Assigned Staff:

IF ANY INFORMATION RELIED UPON FOR THIS PLANNING APPROVAL HAS CHANGED, THIS AUTHORIZATION WILL BE NULL AND VOID.



# EXISTING SEPTIC SYSTEM DESCRIPTION

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AUG 12 2025  
DEQ MEDFORD

Please answer the following questions as completely as possible, and to the best of your knowledge.

1. Your existing septic system consists of (check all that apply):
- Septic Tank
  - Disposal Trenches
  - Capping Fill
  - Sandfilter
  - Seepage Bed
  - Cesspool or Pit
  - Unknown
  - Other (Describe) Multi-compartment tank

2. When was your septic system installed? Unknown (Date) N/A (Permit Number)

3. Tank material:  Concrete  Steel  Plastic or Fiberglass  Unknown

4. Septic tank volume (in gallons) 1500

5. When was the septic tank last pumped? 8/5/2025 Attach receipt if available.

6. Number of disposal trenches 6

7. Total length of disposal trenches (in feet) 240

8. Do you propose to use the existing septic system? Yes  No

9. Is your septic system currently in use? Yes  No  If no, date of last use \_\_\_\_\_

10. If the septic system currently serves a dwelling:  
How many bedrooms are in the dwelling? 2 How many people occupy the dwelling? 4

11. How many bedrooms will be in the proposed dwelling? 4 How many occupants? 5

12. If the septic system serves a business:  
How many total employees are there? \_\_\_\_\_  
Type of business \_\_\_\_\_

13. Is there a proposed change of use of your structure (home or business)? Yes  No   
If yes, please explain \_\_\_\_\_

14. Provide a plot plan (sketch) on the reverse side of this form showing the best estimated or actual measurements that locate the existing septic tank and disposal trenches, property lines, easements, existing structures, driveways, and water supply. Indicate the direction of north. If you are proposing to replace the septic system, indicate the test hole location.

By my signature, I certify that the above information and the plot plan on the reverse side of this form are accurate and true to the best of my knowledge.

08/12/2025  
(Date)

Signature of Property Owner or Legally Authorized Representative

DEQ use only: Record of existing system: Yes  No  Attached  Date Issued \_\_\_\_\_  
Permit Number \_\_\_\_\_ Certificate of Satisfactory Completion Issued: Yes  No  Initials \_\_\_\_\_  
Other file information: \_\_\_\_\_



# Onsite Authorization Application Verification 248-25-000250-AUTH

DEQ Medford Office  
221 Stewart Avenue  
Suite 201  
Medford, OR 97501  
541-776-6010  
OnsiteMedford@deq.state.or.us  
Website: oregon.gov/deq

Application created: 8/7/25

Parcel Nbr: 383W28319  
Site Address: 237 China Gulch RD, Jacksonville, OR 97530  
Owner: DAVID & LEANN REECE  
237 CHINA GULCH RD  
(541) 944-8489

Applicant: DAVID & LEANN REECE - DAVID & LEANN REECE  
237 CHINA GULCH RD  
JACKSONVILLE, OR 97530

Phone: (541) 944-8489  
Email: davidjreece@protonmail.com

**Licensed Professional(s):**

No Licensed Professionals Designated

Category of Construction: Residential County: Jackson  
Directions: From HWY 238 turn onto China Gulch Rd, turn left off of China Gulch approximately .25 miles up and continue down gravel driveway to the end before the right hand turn. Property is at the end of the driveway.  
Acreage or Lot Size: 6.19 Acres Water Supply: Well  
Site Ready for Inspection: Yes

	<u>Existing</u>		<u>Proposed</u>
Use of Structure:	SFD	Use of Structure:	SFD
Number of Bedrooms:	2	Number of Bedrooms:	4

**Attached Documents:**

Name	Description
ESER Septic Report.pdf	Existing System Evaluation Report for Onsite Wastewater Systems was completed by Jake's Superior Septic Service (1630 Williams HWY #144 Grants Pass, OR) on 8/6/2025.



State of Oregon  
Department of  
Environmental  
Quality

## Application for Onsite Sewage Treatment System

Send this application to the appropriate DEQ office

For DEQ Use Only:		Date Stamp
Date received	<u>03-24-17</u>	
Fee paid	<u>788.00</u>	
Receipt number	<u>11502</u>	
Application number	<u>248-17-000256-EVAL</u>	
Date of 1 <sup>st</sup> response		
Date of 2 <sup>nd</sup> response		
Date of final response		
Date of completion		
Scanned	Data Entry	

### A. Property Owner Information

Name: William L. Miller Mailing Address (Street or PO Box, City, State, Zip Code): Po 818 Jacksonville, OR 97530 Phone Number: 541-890-3522

### B. Legal Property Description

Township: 38 Range: 3W Section: 28 Tax Lot: 300 Tax Account Number: \_\_\_\_\_ Acreage or Lot Size: 6.5 AC.  
County: JACKSON Subdivision Name: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

Property Address: 233 China Gulch Rd. Address City: JACKSONVILLE State: OR Zip Code: 97530

Directions to Property: To China Gulch Rd. Turn left @ 233 Down Gravel Drive / Private Drive to Bottom. Through Gate, Past Barn.

### C. Existing Facility / Proposed Facility / Water Information

Existing Facility:  Single Family Residence  Other \_\_\_\_\_  
Number of Bedrooms: \_\_\_\_\_  
Proposed Facility:  Single Family Residence  Other \_\_\_\_\_  
Number of Bedrooms: 4  
Water Supply:  Public \_\_\_\_\_ Name: \_\_\_\_\_  
 Private \_\_\_\_\_ Well, Spring, Shared

### D. Type of Application

Site Evaluation  Renewal Permit  Authorization Notice for:  
 Construction  Existing System Evaluation  Connecting to an Existing System Not in Use  
 Permit Repair  Major  Minor  Permit Transfer  Replacing a Mobile Home or House with Another Mobile Home or House  
 Alteration Permit  Major  Minor  Permit Reinstatement  The Addition of One or More Bedrooms  
 Personal Hardship  Temporary Housing  
 Other-please specify \_\_\_\_\_

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.

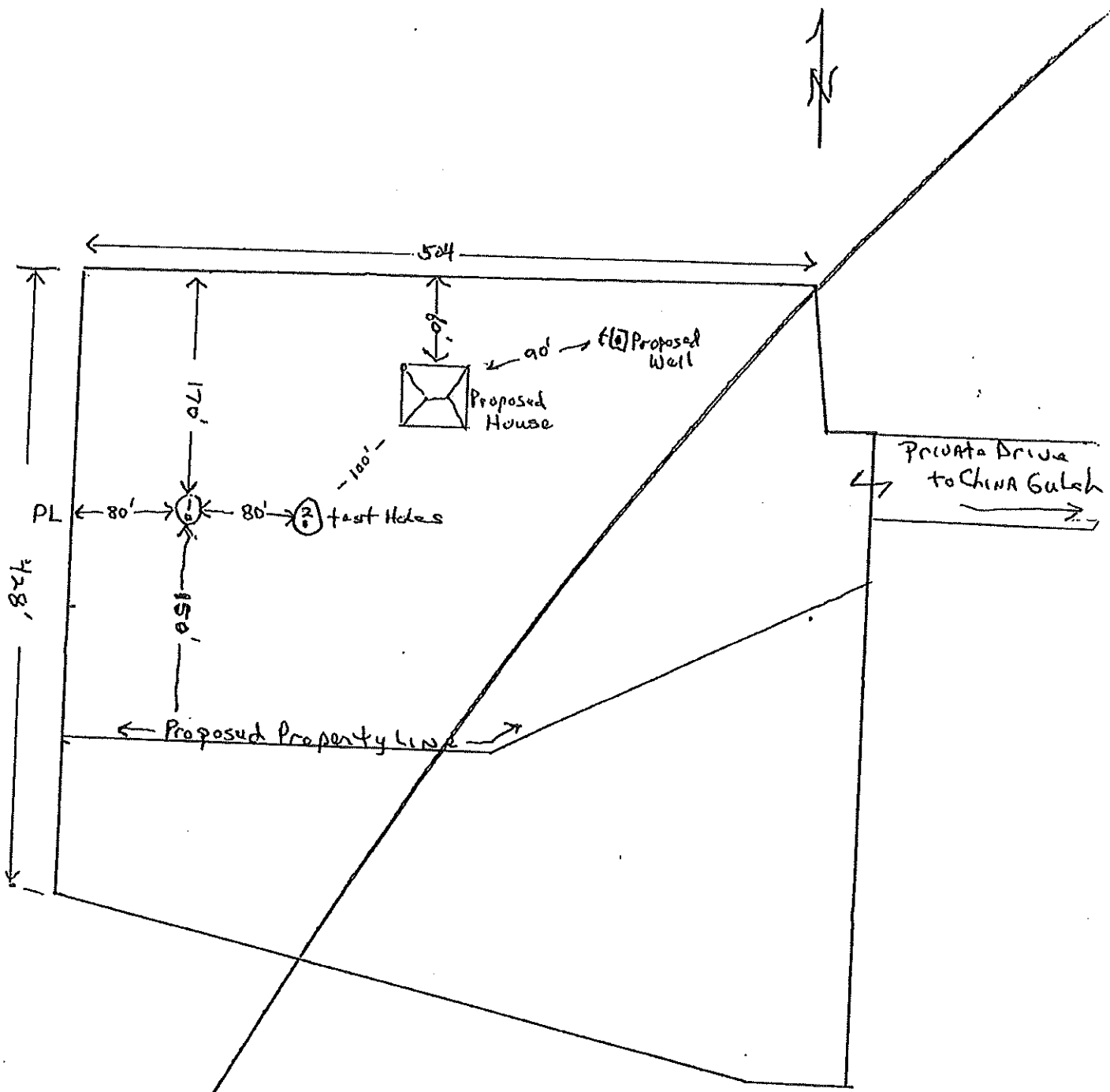
By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and it's authorized agents permission to enter onto the above described property for the sole purpose of this application.

Signature: William L. Miller Date: 3-24-17

Applicant's Name - Please Print Legibly: William L. Miller Applicant's Phone Number: 541-890-3522 Applicant's E-mail Address: WIL555@RI0USA.COM

Applicant's Mailing Address: Po 818 Jacksonville, OR 97530

Applicant is the  Owner  Authorized Representative  Licensed Septic Installer  
 Authorization Attached  Installer's Name: \_\_\_\_\_



38-34-28-300  
 233 China Gulch rd.

Scale 10'

See other revised map.  
 BR 9/20/17



**Onsite Site Evaluation  
Application Verification**

DEQ Medford Office  
221 Stewart Avenue  
Suite 201  
Medford, OR 97501  
Phone: 541-776-6010

Residential Site Evaluation

248-17-000256-EVAL

www.oregon.gov/deq

OnsiteMedford@deq.state.or.us

Application created: 3/27/17

Parcel Nbr: 383W28300

Site Address: 233 China Gulch RD, Jacksonville, OR 97530

Owner: William L. Miller  
(541) 890-3522

Applicant: Miller, William  
PO Box 818  
Jacksonville, OR 97530  
Phone: (541) 890-3522  
Email: wil555@riouasa.com

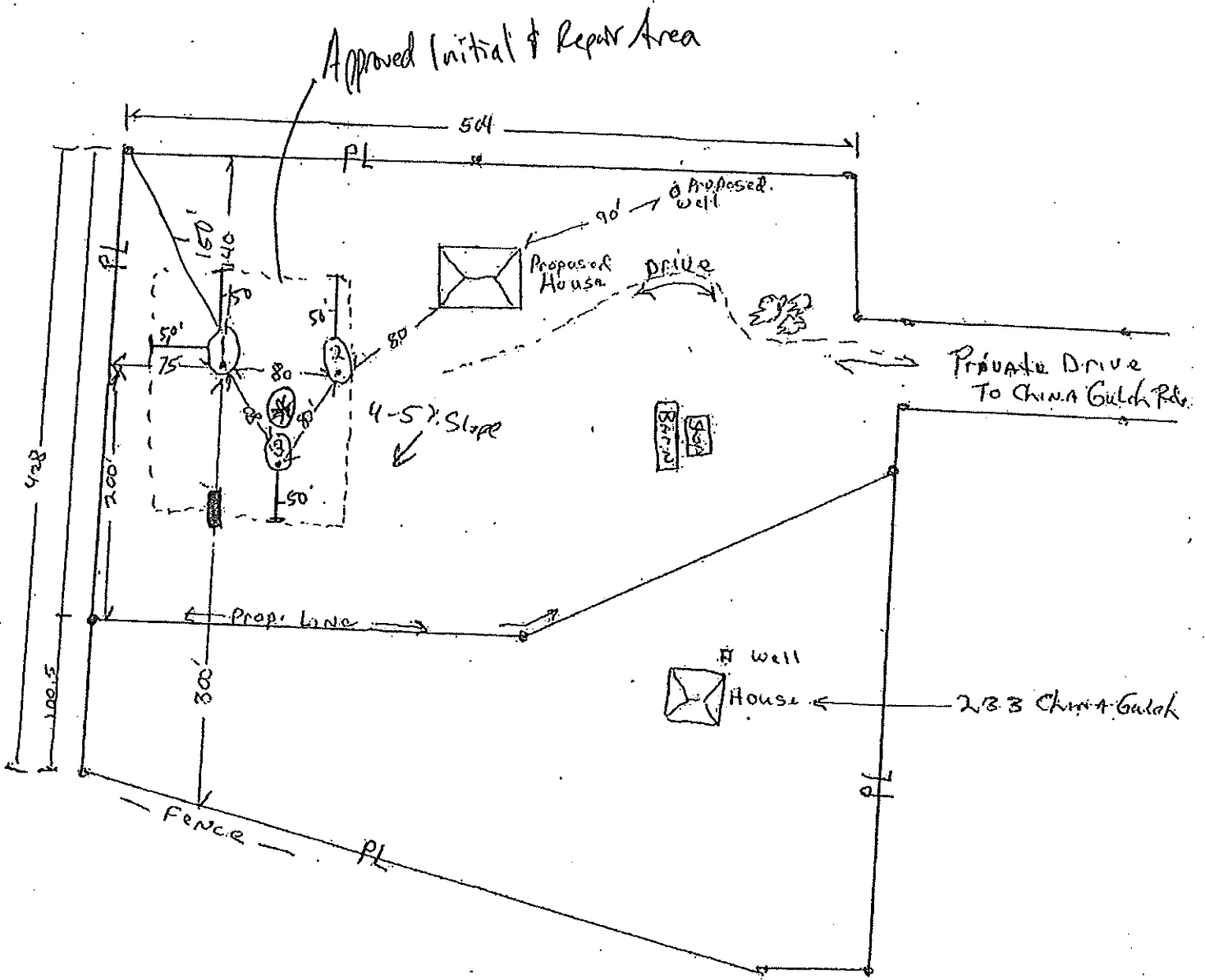
Licensed Professional:  
No Licensed Professionals Designated

Category of Construction: Single Family Dwelling      County: Jackson  
Directions: To China gulch Rd., turn left @233, down gravel drive/private  
drive to button, through gate, past barn  
Acreage or Lot Size:      Water Supply: Well  
Site Ready for Inspection: No

Existing  
Use of Structure:  
Number of Bedrooms:  
Number of Employees:  
Number of Seats:

Proposed  
Use of Structure: 4 bedroom single family dwelling  
Number of Bedrooms: 4  
Number of Employees:  
Number of Seats:

Attached Documents:  
No Documents have been attached.



Revised Site Map

38-30-28-300

5-15-17

233 China Gulch Rd.

Aug-18th

\*GPS - 42, 23815  
- 125, 06013

PLAN APPROVED  
BY D.E.Q.

Date: 5-25-17 Signed



PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
Test Pit 1	0-7	L	10YR 7/3, Gray, Roots 3VF, 1F, Ø Redox
	7-35	CL	10YR 7/3, WSBkY, Roots 1VF, F, Ø Redox
	35-60	SCL	10YR 7/6, WSBkY, Roots 1VF, Ø Redox
			ESD-60
Test Pit 2			Similar to TP1
			ESD-60
Test Pit 3			Similar to TP1
			ESD-60
Test Pit 4			
Test Pit 5			
Test Pit 6			

Landscape Notes: Open grassy area

Slope: W-4 Aspect: SW Groundwater Type:  Permanent  Temporary

Other Site Notes: \_\_\_\_\_

Application No.: 0



# Oregon

Kate Brown, Governor

Department of Environmental Quality  
Western Region Medford Office  
221 Stewart Avenue, Suite 201  
Medford, OR 97501  
(541) 776-6010  
FAX (541) 776-6262  
TTY 711

October 27, 2015

William L. Miller  
PO Box 818  
Jacksonville, OR 97530

RE: Site Evaluation Application # 417939-233 China Gulch Rd, Jacksonville, 97530- Parcel #3

Dear Mr. Miller:

I evaluated the property referenced below to determine if an onsite wastewater disposal (septic) system that complies with State of Oregon Rules could be located on the parcel. I **approved** the site for a **Standard** system as described in the "Approved System Specifications" section of the Field worksheet. This site approval runs with the land and will automatically benefit subsequent owners. The site approval is valid until the approved system is constructed under a DEQ 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.**

Applicant Name: William L. Miller

Application Number: 417939

Township: 38 Range: 3W Section: 28 Tax Lot: 300-Parcel# 3 County: Jackson

If you believe the site evaluation is in error or that a variance from approval conditions is necessary, please contact our office for more details.

**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.**

If you have any questions regarding this report, please contact DEQ at 221 Stewart Ave, Suite 201, Medford OR, 97501, 541.776.6289 or by email @ [easter.marty@deq.state.or.us](mailto:easter.marty@deq.state.or.us).

Yours truly,

Marty Easter, REHS  
Onsite Wastewater Specialist

Attachments: Field Worksheet, Additional Conditions of Approval, Approved Area Site Plan

N ↑

SITE PLAN

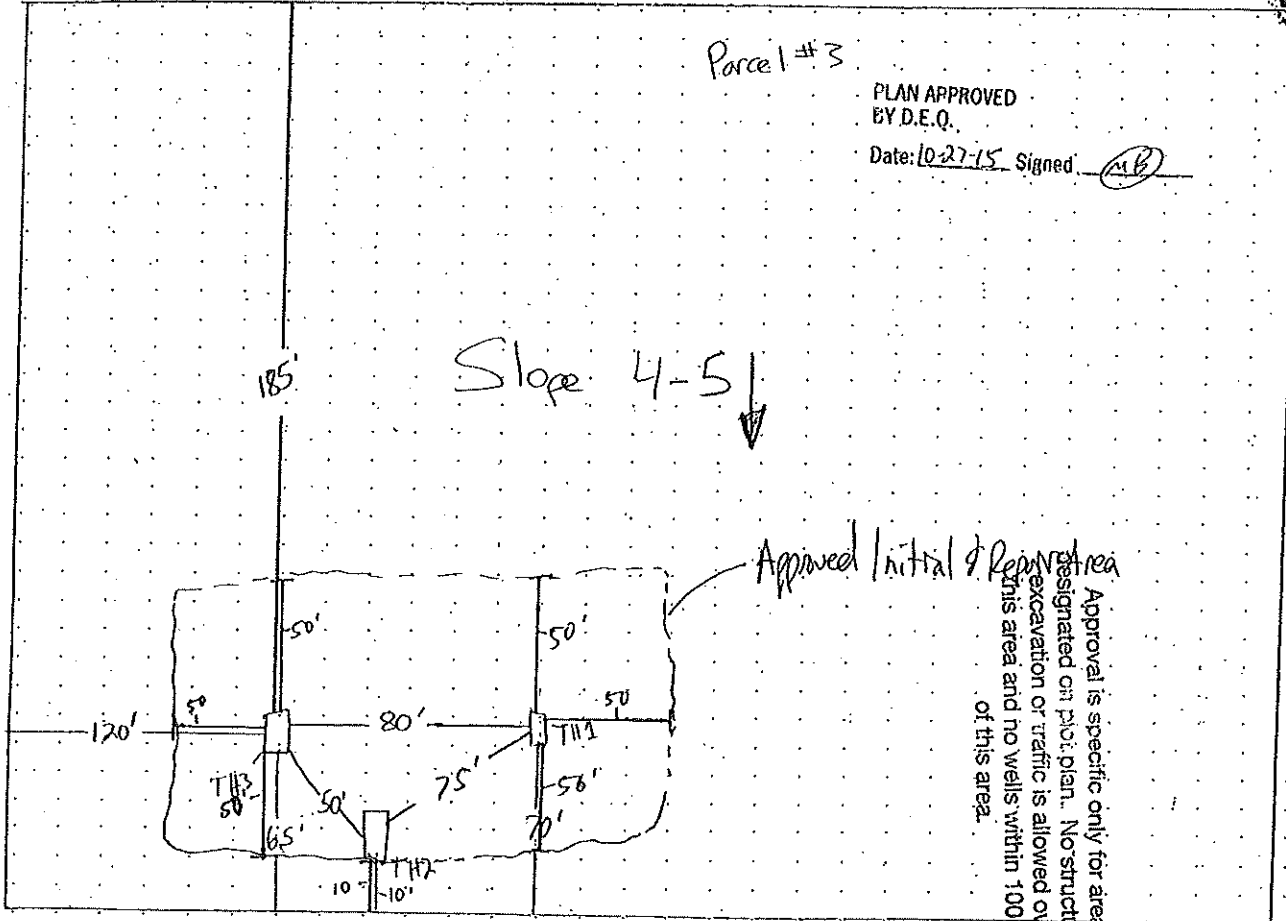
Parcel # 3

PLAN APPROVED  
BY D.E.Q.

Date: 10-27-15 Signed: MB

Application # 0

Slope 4-5 ↓



Approved Initial & Reentry Area

Approval is specific only for area designated on plat plan. No structures, excavation or traffic is allowed over this area and no wells within 100 ft. of this area.

Parcel 2

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
Test Pit 1	0-18	SiL	10YR 3/4, TV, 1vf, Med SH SBK No REDOX features
	18-36	SiCL	7.5YR 4/6 TV, <1vf, SH SBK shrink/swell cracks 2-26" No REDOX
	36-60	SiC	7.5YR 4/6, No roots, SH SBK No REDOX features
			60" TOTAL DEPTH
Test Pit 2	0-14	SiL	Similar to TP1
	14-38	SiCL	
	38-58	SiC	
			58" TOTAL DEPTH
Test Pit 3	0-18	SiL	Similar to TP1
	18-46	SiCL	
	46-61	SiC	
			61" Total Depth
Test Pit 4			
Test Pit 5			
Test Pit 6			

Landscape Notes: Pasture - No trees onsite, grass cover  
Few rodent burrows exposed in pit 0-26"

Slope: 4-5% Aspect: \_\_\_\_\_ Groundwater Type:  Permanent  Temporary

Other Site Notes: \_\_\_\_\_

Application No.: 0





State of Oregon  
Department of  
Environmental  
Quality

## Application for Onsite Sewage Treatment System

Send this application  
to the appropriate  
DEQ office

For DEQ Use Only:		Date Stamp
Date received	10/2/15	
Fee paid	7802	
Receipt number	163154	
Application number	417939	
Date of 1 <sup>st</sup> response		
Date of 2 <sup>nd</sup> response		
Date of final response		
Date of completion		
Scanned	Data Entry	

### A. Property Owner Information

Name: William L. Miller Mailing Address (Street or PO Box, City, State, Zip Code): PO Box 818 Jacksonville, OR 97530 Phone Number: 541-890-3522

### B. Legal Property Description

Township: 38 Range: 3W Section: 28 Tax Lot: 300 Parcel #: 1-047493-5 Acreage or Lot Size: 2.5 AC  
County: JACKSON Subdivision Name: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

Property Address: 233 China Gulch Rd JACKSONVILLE OR 97530  
Address City State Zip Code

Directions to Property: N. on China Gulch Rd. L. Turn @ 233. to End of Driveway to 233.

### C. Existing Facility / Proposed Facility / Water Information

#### Existing Facility:

Single Family Residence

Number of Bedrooms: \_\_\_\_\_

Other: \_\_\_\_\_

#### Proposed Facility:

Single Family Residence

Number of Bedrooms: \_\_\_\_\_

Other: \_\_\_\_\_

#### Water Supply:

Public \_\_\_\_\_

Name

Private Well

Well, Spring, Shared

### D. Type of Application

Site Evaluation

Construction

Permit Repair

Major

Minor

Alteration Permit

Major

Minor

Renewal Permit

Existing System Evaluation

Permit Transfer

Permit Reinstatement

Authorization Notice for:

Connecting to an Existing System Not in Use

Replacing a Mobile Home or House with Another Mobile Home or House

The Addition of One or More Bedrooms

Personal Hardship

Temporary Housing

Other-please specify \_\_\_\_\_

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 its authorized agents permission to enter onto the above described property for the sole purpose of this application.

Signature: William L. Miller

Date: 10-2-15

Applicant's Name - Please Print Legibly: William L. Miller

Applicant's Phone Number: 541-890-3522

Applicant's E-mail Address: WIL555@R10USA.COM

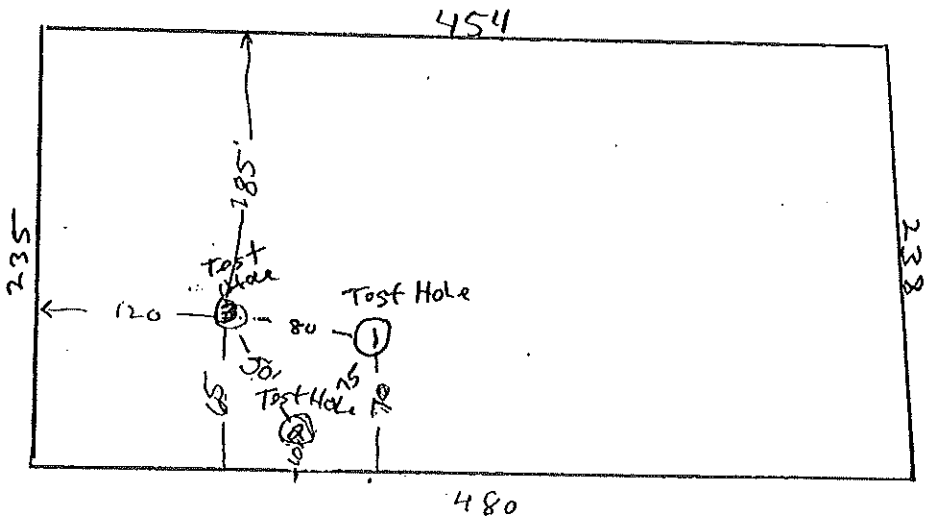
Applicant's Mailing Address: PO Box 818 Jacksonville, OR 97530

Applicant is the  Owner  Authorized Representative  Licensed Septic Installer

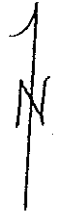
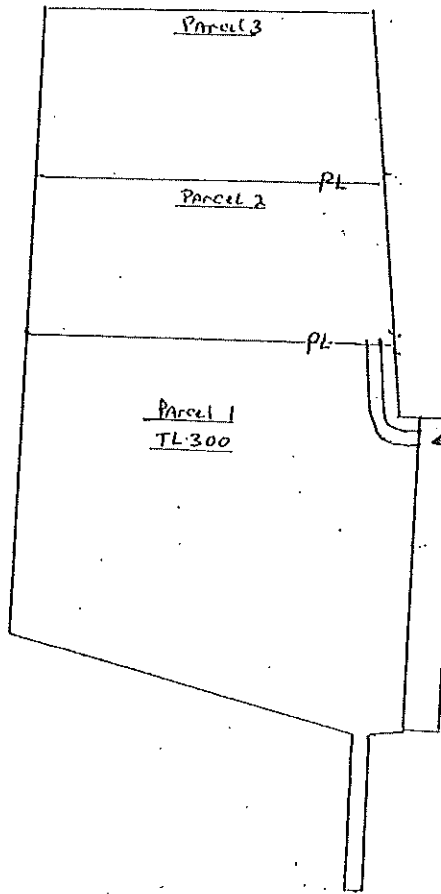
Authorization Attached

Installer's Name: \_\_\_\_\_

Parcel # 3



SCALE 10



China Gulch Road

← 233 ←

Scale 20 ±

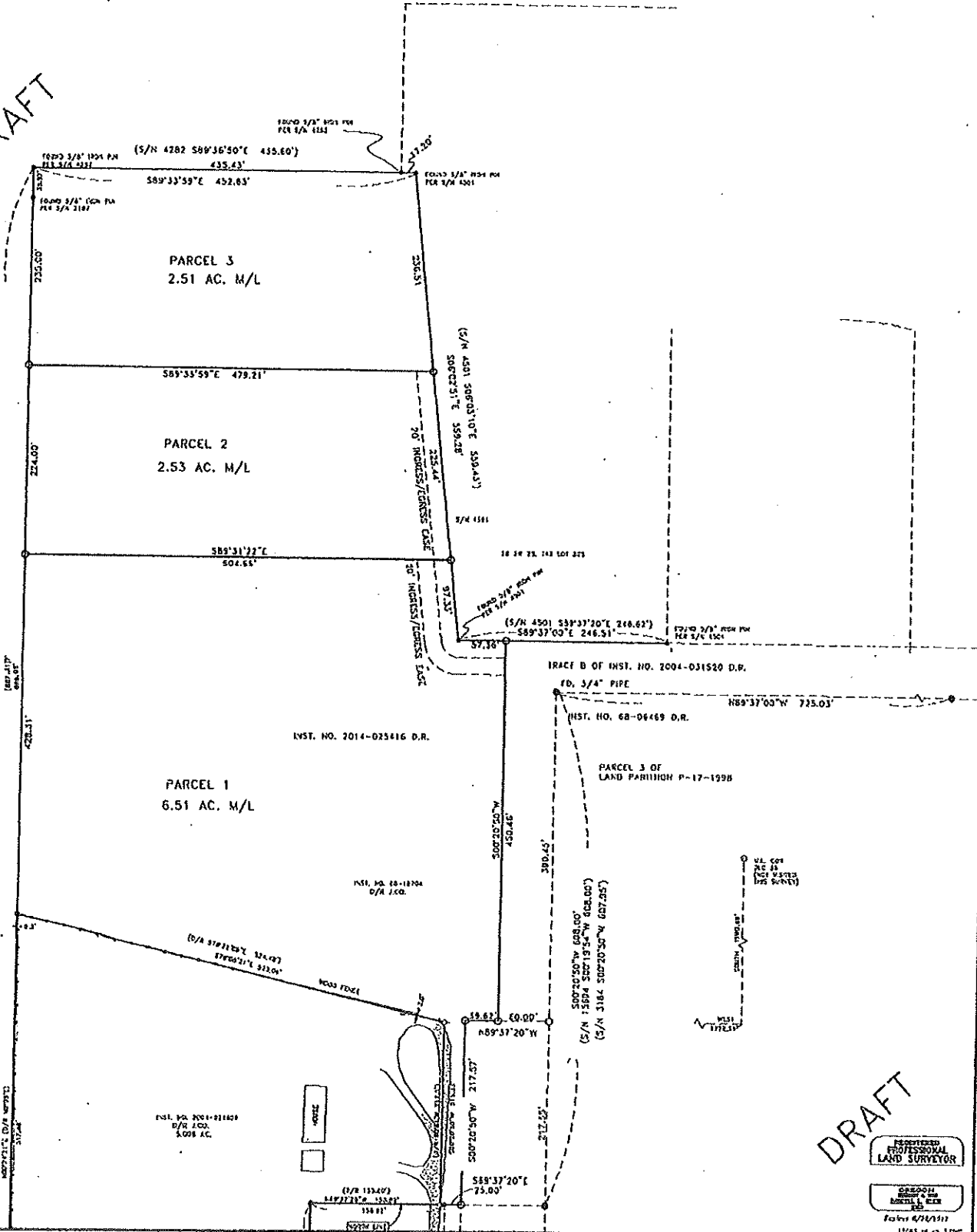
HOFFBUHR & ASSOCIATES, INC.  
 880 GOLF VIEW DRIVE, SUITE 201  
 MEDFORD, OREGON 97504  
 (541)779-4841

EXHIBIT E

DY: DARRELL L. HUCK PLS No. 2023  
 SCALE: 1 inch = 80' AUGUST 8, 2015  
 BASIS OF BEARING: SURVEY NO. 19805

- O = Set 5/8"x24" iron reinforcing pin with plastic cap stamped "D. Huck LS 2023".
- XI = Set 5/8"x30" iron reinforcing pin with plastic cap stamped "D. Huck LS 2023".
- o = Found 5/8" iron pin per survey no. 18805 & 12969 unless noted otherwise.
- ⊙ = found brass cap monument

DRAFT



DRAFT

REGISTERED PROFESSIONAL LAND SURVEYOR

DARRELL L. HUCK  
 11001 H ST. JMW

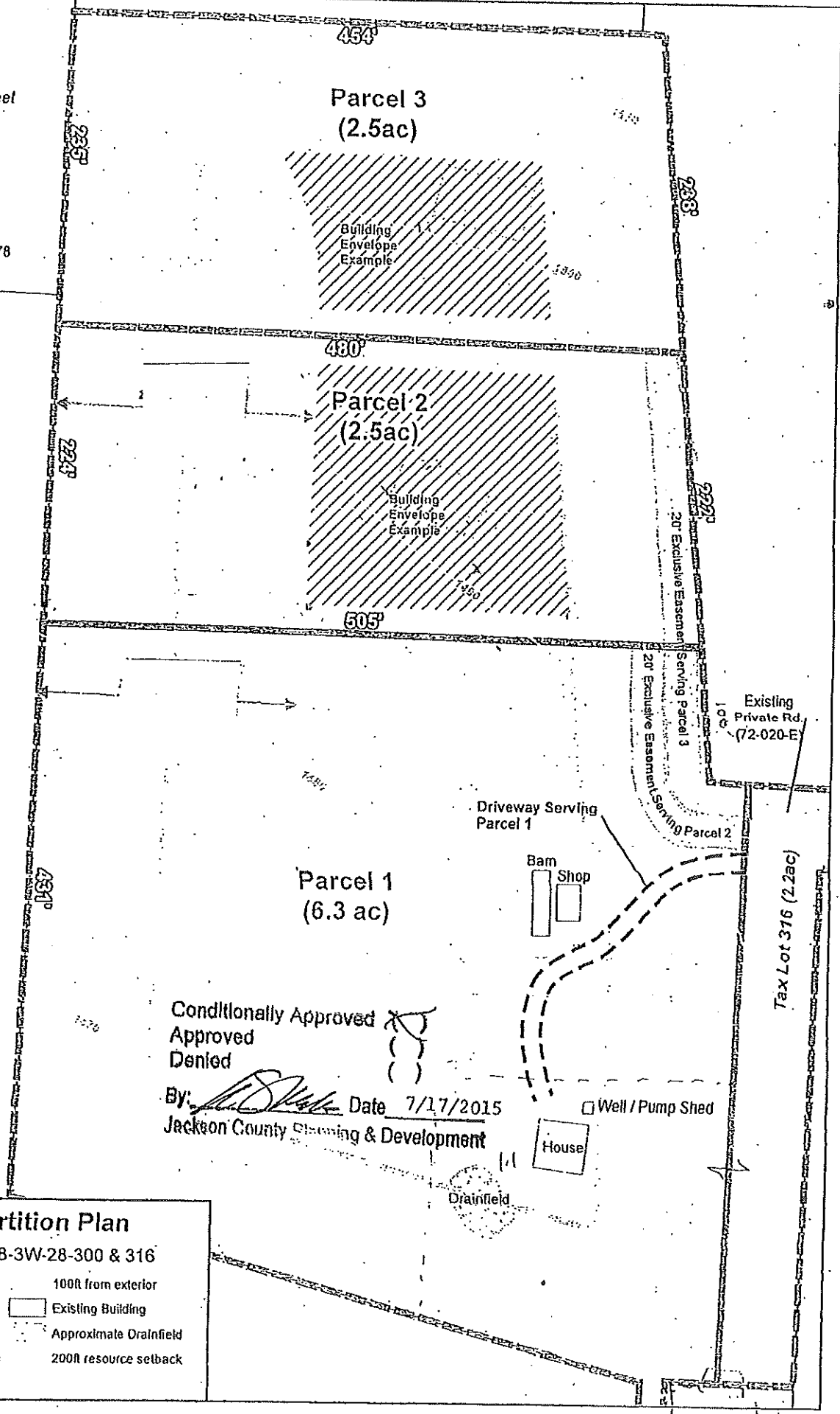


0 50 100 Feet

Print Date: 5-5-2015

Easements of Record:  
V228 P247; V500 P415;  
OR92-29878; OR2007-024878  
(powerline);

V596 P409;  
OR73-09786;  
OR92-12812;  
OR00-016568;



Conditionally Approved  
Approved  
Denied

By: *[Signature]* Date 7/17/2015  
Jackson County Planning & Development

### Tentative Partition Plan

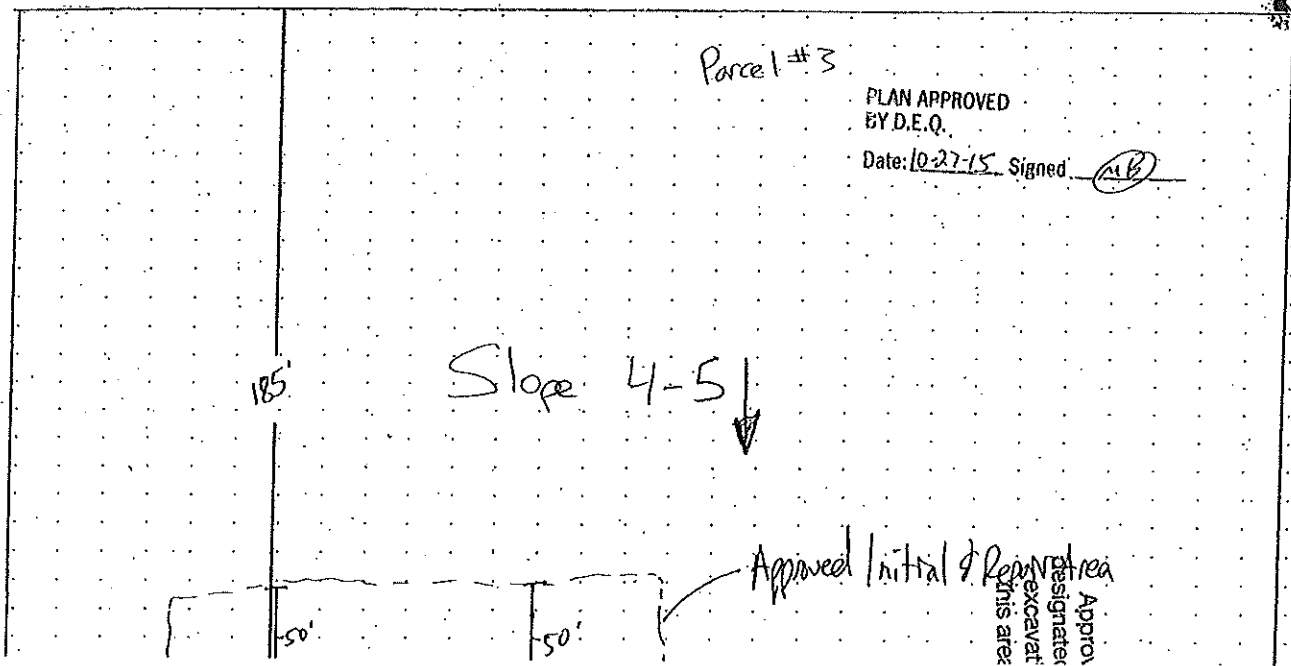
Miller, William Et Al; 38-3W-28-300 & 316

- 10ft Contours
- Proposed Parcels
- Exclusive Easement
- Building Envelope Example
- House Example
- 100ft from exterior
- Existing Building
- Approximate Drainfield
- 200ft resource setback



N ↑

SITE PLAN



Application # 0

PIT No.	DEPTH	TEXTURE	SOIL MATRIX COLOR AND CONDITIONS ASSOCIATED WITH SATURATION, ROOTS, STRUCTURE, EFFECTIVE SOIL DEPTH, ETC.
Test Pit 1	0-18	SiL	10YR 3/4, TV, 1vf, Med Sh. SBK No REDOX Features
	18-36	SiCL	7.5YR 4/6 TV, <1vf, Sh SBK Shrink/Swell cracks 2-26" No REDOX
	36-60	SiC	7.5YR 4/6, No roots, Sh SBK No REDOX Features
			60" TOTAL DEPTH
Test Pit 2	0-14	SiL	Similar to TP1
	14-38	SiCL	
	38-58	SiC	
			58" TOTAL DEPTH
Test Pit 3	0-18	SiL	Similar to TP1
	18-46	SiCL	
	46-61	SiC	
			61" Total Depth
Test Pit 4			
Test Pit 5			
Test Pit 6			

Landscape Notes: Pasture - No trees onsite, grass cover  
Few rodent burrows exposed in pit 0-26"

Slope: 4-5% Aspect: \_\_\_\_\_ Groundwater Type:  Permanent  Temporary

Other Site Notes: \_\_\_\_\_

Application No.: 0





State of Oregon  
Department of  
Environmental  
Quality

## Application for Onsite Sewage Treatment System

Send this application  
to the appropriate  
DEQ office

For DEQ Use Only:		Date Stamp
Date received	10/2/15	
Fee paid	780.00	
Receipt number	163154	
Application number	417939	
Date of 1 <sup>st</sup> response		
Date of 2 <sup>nd</sup> response		
Date of final response		
Date of completion		
Scanned	Data Entry	

### A. Property Owner Information

William L. Miller PO Box 818 Jacksonville, OR 97530 541-890-3522  
Name Mailing Address (Street or PO Box, City, State, Zip Code) Phone Number

### B. Legal Property Description

38 3W 28 300 1-047493-5 2.5 AC  
Township Range Section Tax Lot Parcel # Tax Account Number Acreage or Lot Size  
JACKSON  
County Subdivision Name Lot Block

Property Address: 233 China Gulch Rd Jacksonville OR 97530  
Address City State Zip Code

Directions to Property: N. on China Gulch Rd. L. Turn @ 233. to End  
of Driveway to 233.

### C. Existing Facility / Proposed Facility / Water Information

<b>Existing Facility:</b>	<b>Proposed Facility:</b>	<b>Water Supply:</b>
<input checked="" type="checkbox"/> Single Family Residence	<input checked="" type="checkbox"/> Single Family Residence	<input type="checkbox"/> Public _____ Name
Number of Bedrooms _____	Number of Bedrooms _____	<input checked="" type="checkbox"/> Private <u>Well</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"/> Construction	<input type="checkbox"/> Existing System Evaluation	<input type="checkbox"/> Connecting to an Existing System Not in Use
<input type="checkbox"/> Permit Repair	<input type="checkbox"/> Permit Transfer	<input type="checkbox"/> Replacing a Mobile Home or House with Another Mobile Home or House
<input type="checkbox"/> Major	<input type="checkbox"/> Permit Reinstatement	<input type="checkbox"/> The Addition of One or More Bedrooms
<input type="checkbox"/> Minor		<input type="checkbox"/> Personal Hardship
<input type="checkbox"/> Alteration Permit		<input type="checkbox"/> Temporary Housing
<input type="checkbox"/> Major		<input type="checkbox"/> Other-please specify _____
<input type="checkbox"/> Minor		

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.

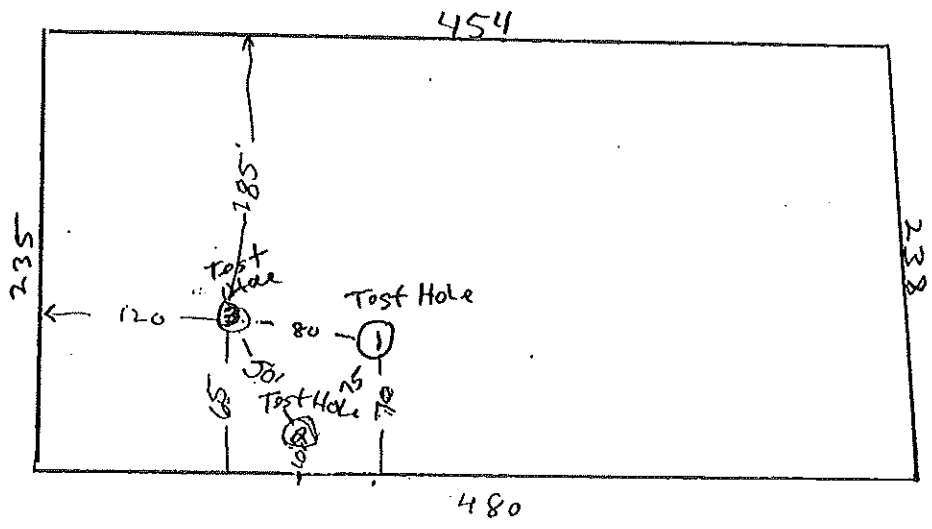
By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and it's authorized agents permission to enter onto the above described property for the sole purpose of this application.

William L. Miller 10-2-15  
Signature Date  
William L. Miller 541-890-3522 WIL555@R10USA.COM  
Applicant's Name - Please Print Legibly Applicant's Phone Number Applicant's E-mail Address

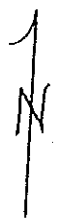
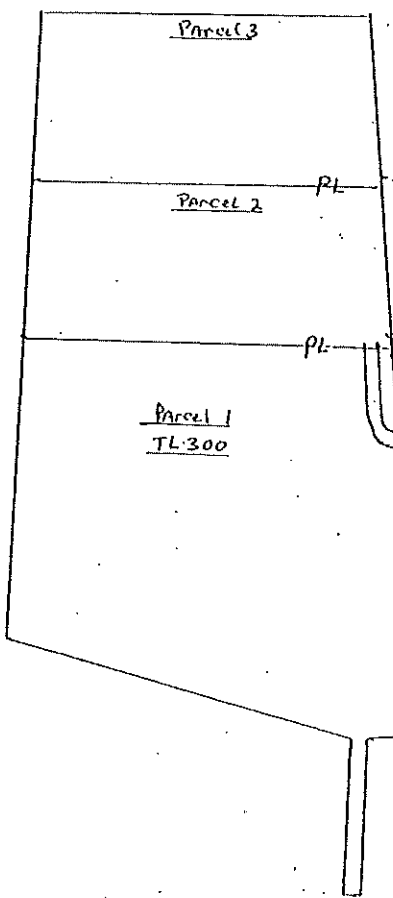
PO Box 818 Jacksonville, OR 97530  
Applicant's Mailing Address

Applicant is the  Owner  Authorized Representative  Licensed Septic Installer  
 Authorization Attached  
Installer's Name \_\_\_\_\_

Parcel # 3



Scale 10



China-Gulak Road

A vertical line representing a road, with the text 'China-Gulak Road' written vertically along its right side.

← 233 ←

A horizontal line with arrows at both ends pointing left, with the number '233' written in the middle.

Scale 20 ±

A rectangular box containing the text 'Scale 20 ±'.

HOFFBUHR & ASSOCIATES, INC.  
 880 GOLF VIEW DRIVE, SUITE 201  
 MEDFORD, OREGON 97504  
 (541)779-4841

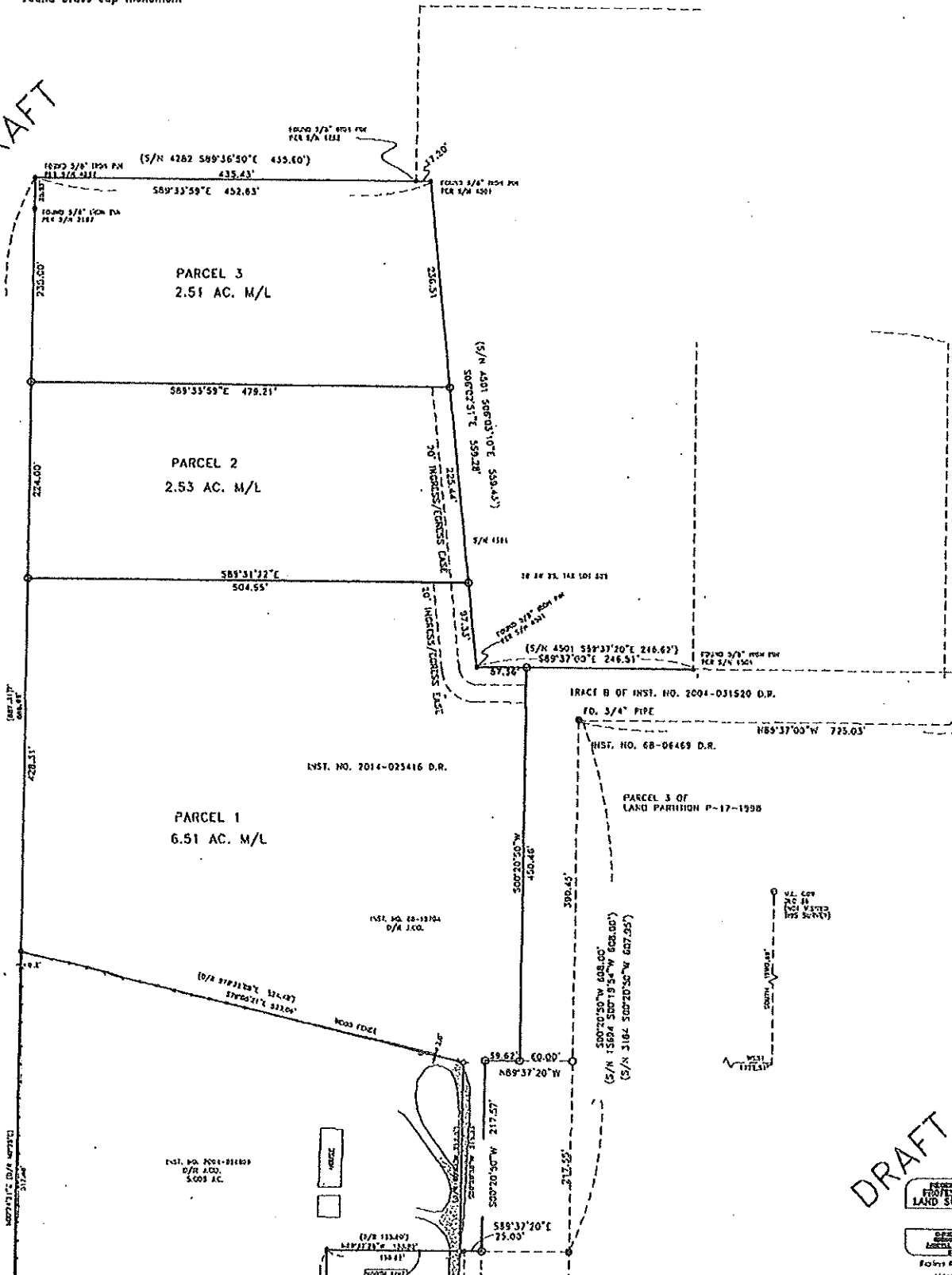
EXHIBIT E

BY: DARRELL L. HUCK PLS No. 2023  
 SCALE: 1 inch = 80' AUGUST 8, 2015  
 BASIS OF BEARING: SURVEY NO. 19605

- O = Set 5/8"x24" iron reinforcing pin with plastic cap stamped "D. Huck LS 2023".
- X = Set 5/8"x30" iron reinforcing pin with plastic cap stamped "D. Huck LS 2023".
- = found 5/8" iron pin per survey no. 18605 & 12869 unless noted otherwise

- ⊙ = found brass cap monument

DRAFT



DRAFT

REGISTERED PROFESSIONAL LAND SURVEYOR

DARRELL L. HUCK  
 No. 2023  
 11/21/15



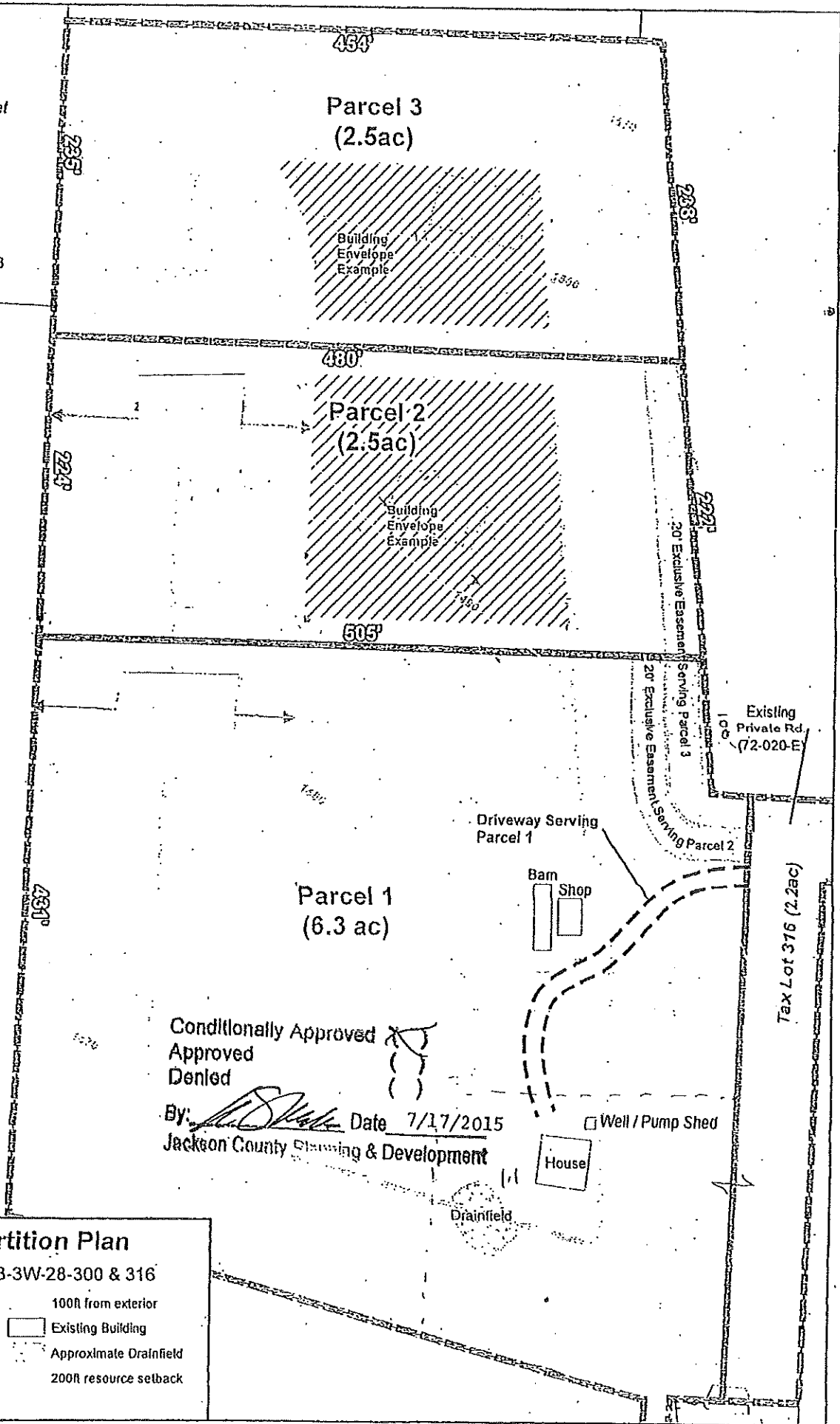
0 50 100 Feet



Print Date: 5-5-2015

Easements of Record:  
V228 P247; V500 P415;  
OR92-29878; OR2007-024878  
(powerline);

V596 P409;  
OR73-09786;  
OR92-12812;  
OR00-016568;



Conditionally Approved  
Approved  
Denied

By: *[Signature]* Date 7/17/2015  
Jackson County Planning & Development

### Tentative Partition Plan

Miller, William Et Al; 38-3W-28-300 & 316

- 100ft Contours
- Proposed Parcels
- Exclusive Easement
- Building Envelope Example
- House Example
- 100ft from exterior
- Existing Building
- Approximate Drainfield
- 200ft resource setback