



WASHINGTON COUNTY OREGON

June 13, 2018

Lynn Marie Haynes/o A-Affordable Septic Service, LLC
P.O. Box 818
Canby, OR 97013

RE: ONSITE SEWAGE DISPOSAL SYSTEM
Site Evaluation Approval for Initial and Replacement System
2S2-34-2900
SW Schmeltzer Road; Sherwood

Dear Lynn Marie Haynes:

The Washington County Environmental Health Program evaluated the above referenced site for the placement of an onsite sewage disposal system on the property. The Initial and Replacement system site was found to be in compliance with the Oregon Administrative Rules (OAR Chapter 340-Divisions 71 and 73), and is Approved for the installation of a Standard serial distribution system. A minimum 1,000 gallon capacity septic tank is required; See attached field worksheet for additional information and requirements.

The proper operation of your onsite sewage disposal system is dependent on system installation in the undisturbed approved area. Any alteration of the area approved for your onsite sewage disposal system or the approved reserve repair area may void your approval. Please keep these areas free of heavy equipment used in property development. Earth moving in the approval areas is also prohibited.

A Permit Application Packet is enclosed. System construction may not take place until a permit is issued by this office. Property owners may install their own system. Contracted installers must be licensed with the Department of Environmental Quality (DEQ). Information on licensed contractors is available at the DEQ website: <http://www.deq.state.or.us/wq/onsite/sdssearch.asp>

If you have any questions related to your approval or permit application for your proposed onsite sewage disposal system please contact this office at (503) 846-8722.

Sincerely,

Larry Fenster, Senior REHS
Environmental Health Program

Enclosures: Site Evaluation Approval Report and Permit Application Packet

Department of Health and Human Services
Environmental Health Program
155 N. First Ave, MS 5, Suite 160
Hillsboro, OR 97124
Telephone: 503-846-8722 Fax: 503-846-3705
www.co.washington.or.us/hhs/EnvironmentalHealth



SITE EVALUATION REPORT

(NOT a permit for construction)

CR #: EHA18272 Dates of Inspection: 6/6/18
Application Date: 5/3/18
Tax Account #:
Township 2S Range 2W Section 34 T.L. # 2900
Site Address: SW Schmeltzer Road; Sherwood
Applicant: Lynn Marie Haynes Parcel Size/Dim.: 5.31 Acres
c/o A-Affordable Septic Service, LLC Type of Dwelling: Residential
P.O. Box 818 Water Supply: Well
Canby, OR 97013

An approved site evaluation indicates the above described property is adequate for the installation of one on-site disposal system in accordance with ORS 454.605 through 454.755, the Administrative Rules of the Environmental Quality Commission promulgated thereunder, the Washington County Code, Chapters 12.12 and 12.16.

An approved site is given on the basis that the lot or parcel described above will not be further partitioned, divided or altered in any manner as prohibited by the Statutes, and Ordinances listed above. Any such division, partitioning or alteration voids this approval.

☒ APPROVED

☐ DENIED

COMMENTS/CONDITIONS:

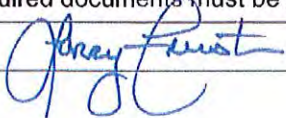
Initial and Replacement Systems:

Standard serial distribution systems sized at 125'/150gpd (375' of drainline per system);

Trench depth = 36" maximum/24" minimum; System design flow is 450 gpd (1 - 4 bedrooms);

A minimum 1,000 gallon capacity septic tank is required; See attached field worksheets for additional information and requirements.

NOTE: A plot plan and all required documents must be submitted to this office for approval prior to permit issuance.

Sanitarian's Signature:  Date: 6/7/18

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Public Health
 Prevent. Promote. Protect

SITE EVALUATION FIELD WORKSHEET

Tax Reference: 2S2-34-2900

Evaluator: Larry Fenster, REHS

Applicant Haynes

Date: 6/6/18

TP # 1	Depth (in)	Texture	Soil Matrix Color and Redox (Notation), Structure, Roots, Pores, Clay Films, % Coarse Fragments, Layer Limiting Effective Soil Depth (Llesd), etc
	0 - 12"	SiL	7.5YR3/3; 1F-SBK; MFR; FMP, MFP; 5% C-FRG(pb)
	12 - 25"	SiL	7.5YR4/3; 2F-SBK; MFR; MFP
	25 - 38"	SiCL	7.5YR4/3; 2M-SBK; CFR; CFP; 10-20% C-FRG(cb)
	38 - 52"	h-SiCL	5YR4/4 w/FFP-MNM; 3M-SBK; FFR; CFP; 20-30% C-FRG(cb)

TP # 2	Depth (in)	Texture	Soil Matrix Color and Redox (Notation), Structure, Roots, Pores, Clay Films, % Coarse Fragments, Layer Limiting Effective Soil Depth (Llesd), etc
	0 - 11"	SiL	7.5YR3/3; 1F-SBK; MFR; FMP, MFP; 5% C-FRG(pb)
	11 - 20"	SiL	7.5YR4/3; 2F-SBK; MFR; MFP
	20 - 33"	SiCL	7.5YR4/3; 2M-SBK; CFR; CFP
	33 - 43"	SiCL	7.5YR4/4 w/FFP-MNM; 2M-SBK; FFR; CFP
	43 - 55"	h-SiCL	5YR4/4 w/FMP-MNM; 3M-SBK; FFR; CFP; 15-25% C-FRG(cb)

TP # 3	Depth (in)	Texture	Soil Matrix Color and Redox (Notation), Structure, Roots, Pores, Clay Films, % Coarse Fragments, Layer Limiting Effective Soil Depth (Llesd), etc
			SIMILAR TO TP#1 & TP#2
			Depth = 53"
			No RMF/CAS
			ESD > 53"

Landscape Notes: Upland - Sideslope

Llesd: > 54"

Slope: 8 - 16 %

Aspect: E - ENE

Groundwater: No RMF/CAS

Other Notes: Vacant parcel; Proposed new building site to be served by a well and an onsite septic system.

SYSTEM SPECIFICATIONS

Facility Type: Residential

Design Units: 1-4 bedrooms

Design Flow: 450 gpd

Initial: Standard serial

System Sizing: 125'

/150 g. Max. Depth Absorption Facility (in): 36"

Replacement: Standard serial

System Sizing: 125'

/150 g. Max. Depth Absorption Facility (in): 36"

Special Conditions The above noted systems must be installed:

1) Within the approved area noted on back.

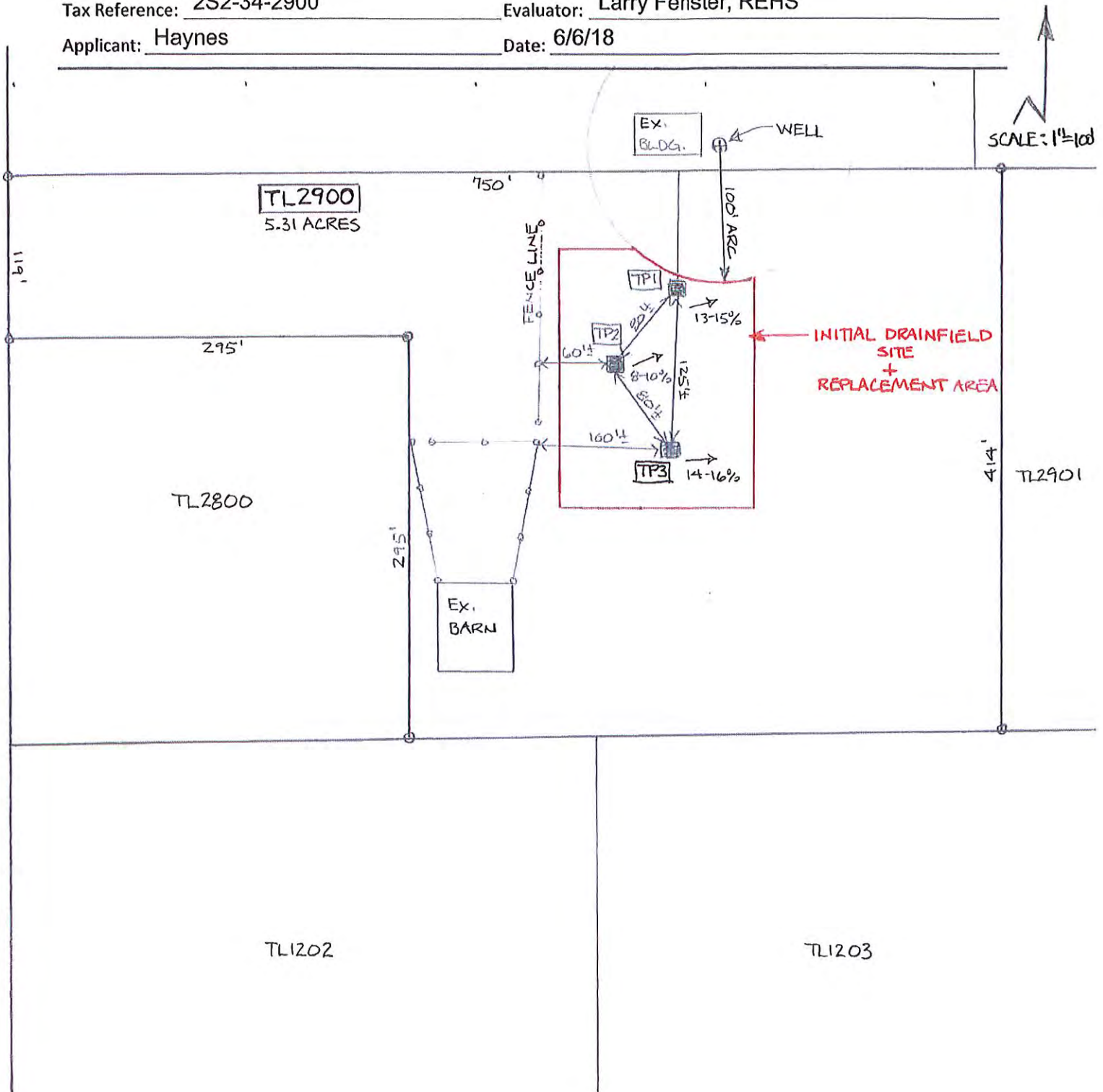
2) In accordance with DEQ rules.

Tax Reference: 2S2-34-2900

Evaluator: Larry Fenster, REHS

Applicant: Haynes

Date: 6/6/18



Additional Comments and Conditions: Must maintain all DEQ required setbacks including:

- 100' minimum from all wells, springs and year round surface waters.
- 50' minimum from some cuts > 30", escarpments and seasonal surface waters.
- 10' minimum from property lines, easements, utilities and building foundations.



Office Use Only:

PERMIT NUMBER: 18-0104 FEE: \$1,020.00# 18-0104**DEPARTMENT OF HEALTH & HUMAN SERVICES
Environmental Health Program****Onsite Wastewater Treatment System Construction Installation Permit**☒ NEW CONSTRUCTION ☐ REPAIR ☐ ALTERATION ☐ RENEWAL ☐ OTHER _____☐ Major ☐ Major
☐ Minor ☐ MinorPERMIT ISSUED TO: LYNN MARIE HAYNES 2S 2W 34 2900
Property Owner's Name Township Range Section Tax Lot/Acct.#SW SCHMELTZER ROAD
Site AddressSHERWOOD
Nearest City or Community[Signature]
Issued by - Signature7/20/18
Date Issued7/20/19
Expiration DateType of Facility Served: ☒ Single Family Res. # Bdrms: 4 ☐ Other - Specify: _____Max. Peak Design Flow: 450 Gal/Day

All work must conform with Oregon Administrative Rules, Chapter 340, Divisions 71 & 73. Work must be done by the permittee or by a licensed sewage disposal service business. No changes in system location or specifications may be made without written approval from the Washington County Environmental Health Program.

SYSTEM SPECIFICATIONSType: ☒ Standard ☐ Capping Fill ☐ Seepage Trench ☐ Seepage Bed ☐ Pressurized Distribution☐ Tile Dewatering ☐ Sand Filter ☐ RGF ☐ ATT: _____
Manufacturer/System Type/Model #Treatment Level Required: ☐ I or ☐ II ☐ Disinfection Unit: _____
Manufacturer/System Type/Model #**SEPTIC TANK SPECIFICATIONS** ☒ NEW ☐ EXISTINGMin. Septic Tank Volume: 1,000 Gal Min. Dosing Tank Volume: _____ Gal

Special Requirements: _____

DRAINFIELD SPECIFICATIONS ☒ NEW ☐ EXISTINGMedia Type: ☒ Rock/Pipe ☐ Other (Product/Manufacturer): _____Trench Specifications: 375 Linear Ft. 750 Square Ft. Undisturbed Soil Between Trenches: 8 feetMax. Depth: 36 inches Min. Depth: 24 inches Total Rock Depth: 12 inchesRock Below Pipe: 6 in. Rock Above Pipe: 2 in. Capping Fills - Min. Depth of Fill Material: 4 in.

Special Drainfield Specifications: _____

Distribution Method: ☐ Equal ☐ Loop ☐ Equal-Hydrosplitter ☒ Serial ☐ Pressurized ☐ Gravelless Half PipeSpecial Requirements: ☐ Ground water interceptor: Depth: _____ Distance from Drainfield: _____☐ Rake Sidewalls ☐ Filter Fabric On Top of Drain Media ☐ Other: _____

Inspection Requirements: For Pressurized, Sand Filters, RGFs, ATTs and Capping Fill systems, there are several inspections required. See inspection requirements specific to each system.

The attached Final Inspection Request And Notice Form must be completed and submitted at time of system completion. For pre-cover inspection information, contact Washington County Environmental Health at (503) 846-8722.

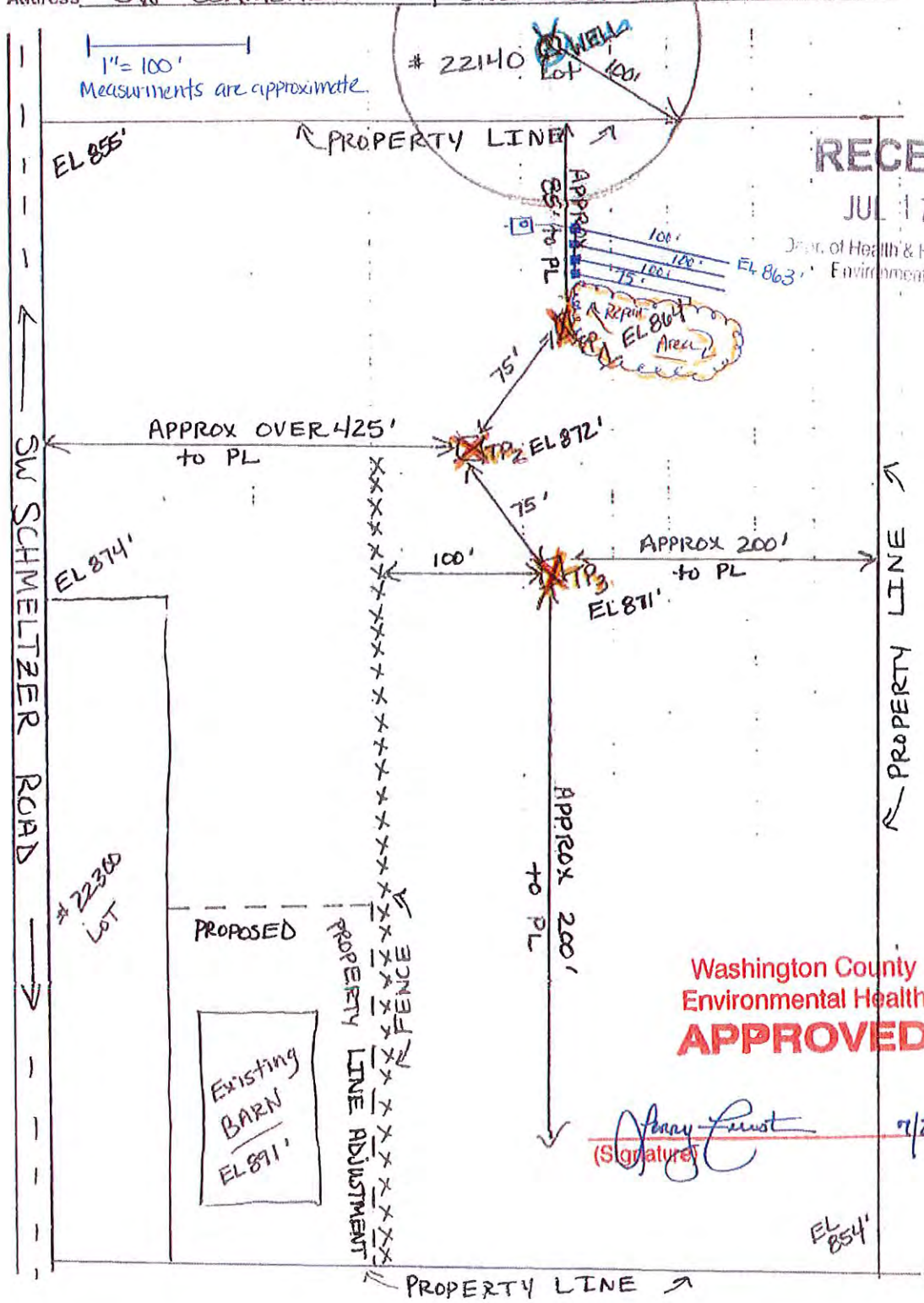
OFFICE USE: rev 5/07

Type of System: Standard Fee Received: \$1,020 Date: 7-17-18 Payment Type: CC 7779 CR#: EHA 18386

NCR: White copy to Environmental Health Program Yellow copy to Land Use & Transportation (LUT) Pink copy to Applicant

System Design

Applicant A. Affordable Septic Service, LLC
 Township 2S Range 2W Section 34 Tax Lot 2900
 Address SW Schmeltzer Rd, Sherwood OR 97140



RECEIVED

JUL 17 2018

Dep. of Health & Human Services
 Environmental Health

Washington County
 Environmental Health
APPROVED

Amy Ernst
 (Signature)

7/20/18
 (Date)



DEPARTMENT OF HEALTH AND HUMAN SERVICES
ENVIRONMENTAL HEALTH PROGRAM
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Hillsboro OR 97124
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RECEIVED

MAY 03 2018

Dept. of Health & Human Services
Environmental Health

APPLICATION FOR ONSITE SEWAGE TREATMENT SYSTEM

Property Owner Name Lynn Marie Haynes

Property Owner Mailing Address (include city state zip) 22300 SW Schmeltzer Rd Sherwood OR 97140

Lot Size Requirements All property on community water is required to be no less than 20,000 sq. ft. Property served with private water is required to have a minimum of 2 acres unless designated as rural intermediate or natural resource property on the County comprehensive plan maps. Sites must fully comply with DFO rules to be approved and permitted. DFO site criteria related to topography, soil suitability and setbacks may affect lot size. Please note that Washington County Land Use regulations may also apply to the size of the lot. Permits require Land Use Compatibility Statement (LUCS) sign off.

Legal Property Description

Township 2S Range 2W Section 34 Tax Lot # 2900 Acres 5 Water Supply WELL

Subdivision _____ Lot _____ Block _____

Property Address (include city state zip) SW Schmeltzer Rd Sherwood OR 97140

Directions to Property 440 South of the intersection SW Neil Rd & SW Schmeltzer Rd on the East side of the Rd

COMPLETE ONLY ONE SECTION BELOW, MARKING ITEMS THAT APPLY

SITE EVALUATION

☒ Single Family Dwelling / # of bedrooms 4
☐ Commercial _____
Max # of Employees _____ Max # of Patrons _____
☐ Showers ☐ Food Preparation ☐ Other _____

EXISTING SYSTEM EVALUATION

☐ Residential ☐ Commercial ☐ Lender's Request
☐ Owner's Request ☐ Buyer's Request ☐ File Review
☐ Sand Filter Biennial ☐ Alternate System Review
☐ Other _____

PERMIT REQUEST

☐ Single Family Dwelling # of bedrooms _____
☐ Commercial _____
☐ New or ☐ Renew
☐ Standard or ☐ Alternative
☐ Repair or ☐ Alteration
☐ Minor Tank Only or ☐ Major Tank and/or Drainfield
☒ Licensed Installer license # #37918 / RI-194
☐ Owner Install ☒ LUCS Statement attached

AUTHORIZATION

☐ Replace House or Mobile Home
of Bedrooms in Existing Dwelling _____
of Bedrooms in Proposed Dwelling _____
☐ New ☐ Renew
☐ Personal Hardship/Temporary Housing
☐ Other _____
☐ System Currently in Use?
☐ Yes ☐ No date of last use _____
☐ LUCS Statement attached

I understand that this site must be prepared according to instruction in the guidance packet before action will be taken on this application. By my signature I certify that the information I have furnished is correct and hereby grant Washington County Environmental Health and authorized agent permission to enter onto the above described property for the purpose of this application.

Applicant Information

Applicant Name A-Affordable Septic Service LLC

Phone 503-682-1929

Mailing Address (include city state zip) PO Box 818 Canby OR 97013

Applicant is ☐ Owner ☒ Authorized Representative (authorization attached)

☒ Licensed Septic Installer (name) Rick Jonas

Applicant Signature [Signature]

Date 5-2-18

DO NOT WRITE IN THE SPACE BELOW

Fee Received \$ 780.00

Ck/MO# CC 7779

Date 5-3-18

Received By MJ

Project # EHP18116

Activity # EHA18272



DEPARTMENT OF HEALTH AND HUMAN SERVICES
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RECEIVED

MAY 03 2013

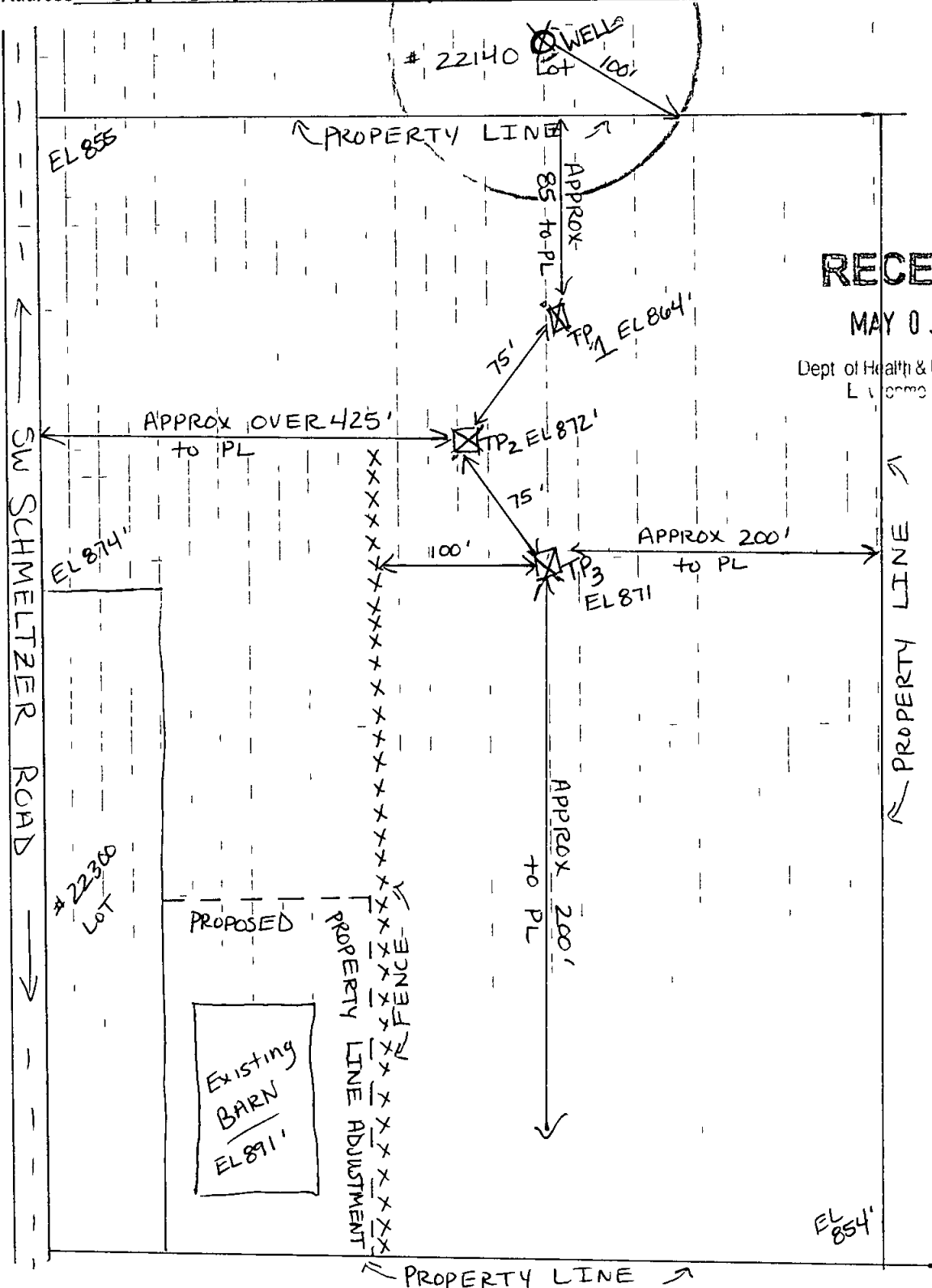
Dept of Health & Human Services
Environmental Health

AUTHORIZATION OF REPRESENTATIVE

I, <u>Lynn Marie Haynes</u> , have authorized <u>A~Affordable Septic Service, LLC</u>	
Print Name of Property Owner	Print Name of Authorized Representative
to act as my agent in performing the activities necessary to obtain site evaluations, permits and other onsite wastewater treatment program services provided by Washington County on the property described below in accordance with OAR chapter 340, division 071. I agree that any costs not satisfied by the Authorized Representative are my responsibility.	
PROPERTY IDENTIFICATION	
Property Address <u>SW Schmeltzer Rd Sherwood OR 97140</u>	
Township <u>02S</u>	Section <u>34</u>
Range <u>02W</u>	Tax Lot Number (s) <u>2900</u>
PROPERTY OWNER INFORMATION	
Name <u>LYNN MARIE HAYNES</u>	
Mailing Address (include city, state, zip) <u>22300 SW Schmeltzer Rd Sherwood OR 97140</u>	
Telephone <u>[REDACTED]</u>	Fax <u></u>
E-mail <u>[REDACTED]</u>	
Signature of Property Owner <u>Lynn Marie Haynes</u>	Date <u>5/1/2018 3:46 PM</u> PDT
AUTHORIZED REPRESENTATIVE	
Name <u>A~Affordable Septic Service, LLC</u>	
Mailing Address (include city, state, zip) <u>PO Box 818, Canby OR 97013</u>	
Telephone <u>#503 682 1929</u>	Fax <u>#503 682 1930</u>
E-mail <u>aaffordablesepticsevice@gmail.com</u>	
Signature of Authorized Representative <u>[Signature]</u>	Date <u>5-2-18</u>

SOIL EVALUATION PLOT PLAN

Applicant A Affordable Septic Service, LLC
Township 2S Range 2W Section 34 Tax Lot 2900
Address SW Schmeltzer Rd, Sherwood OR 97140



RECEIVED

MAY 03 2013

Dept of Health & Human Services
Environmental Health

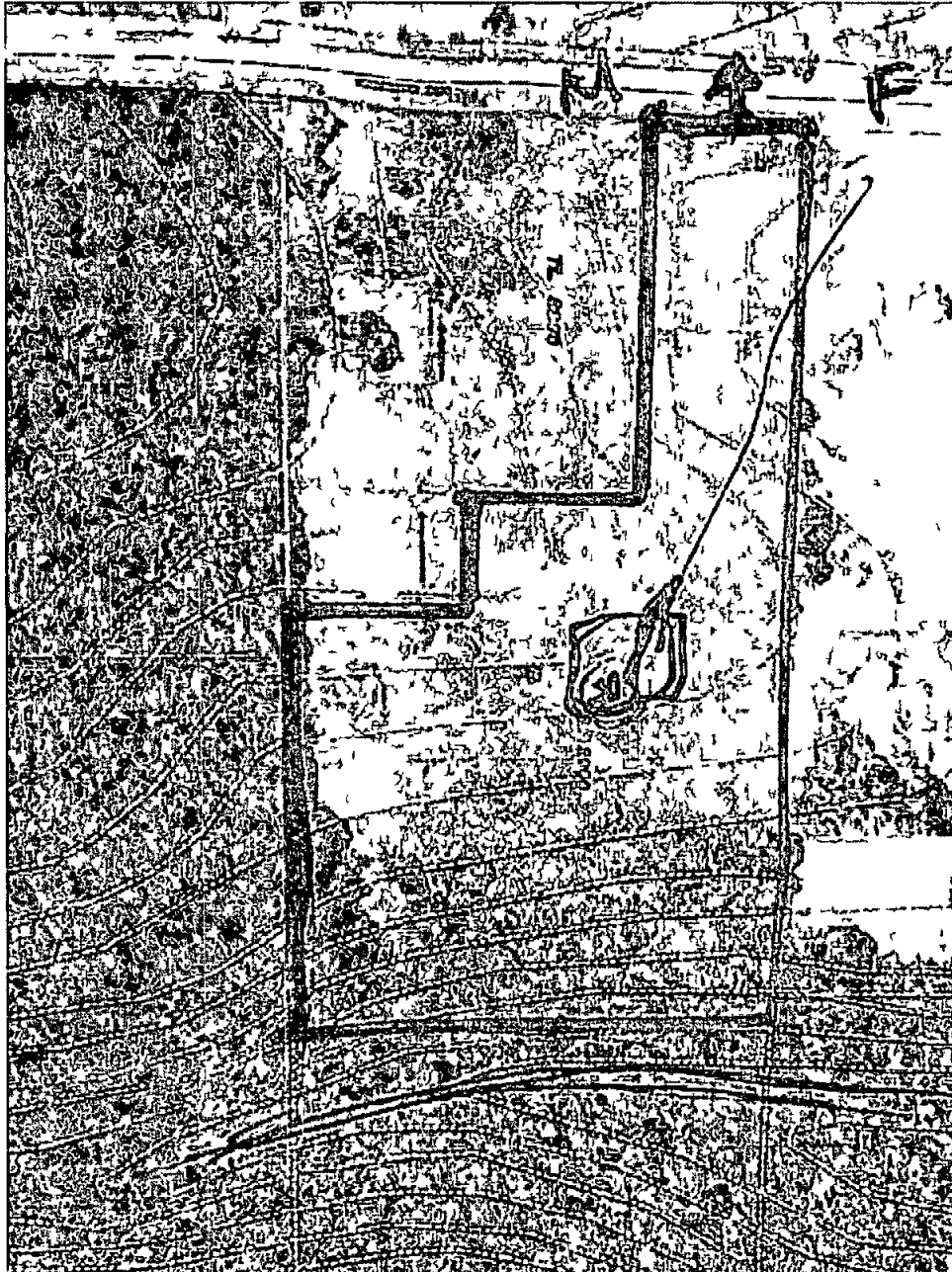
1" = 100' (Measurements are approximate)

[illegible]

RECEIVED

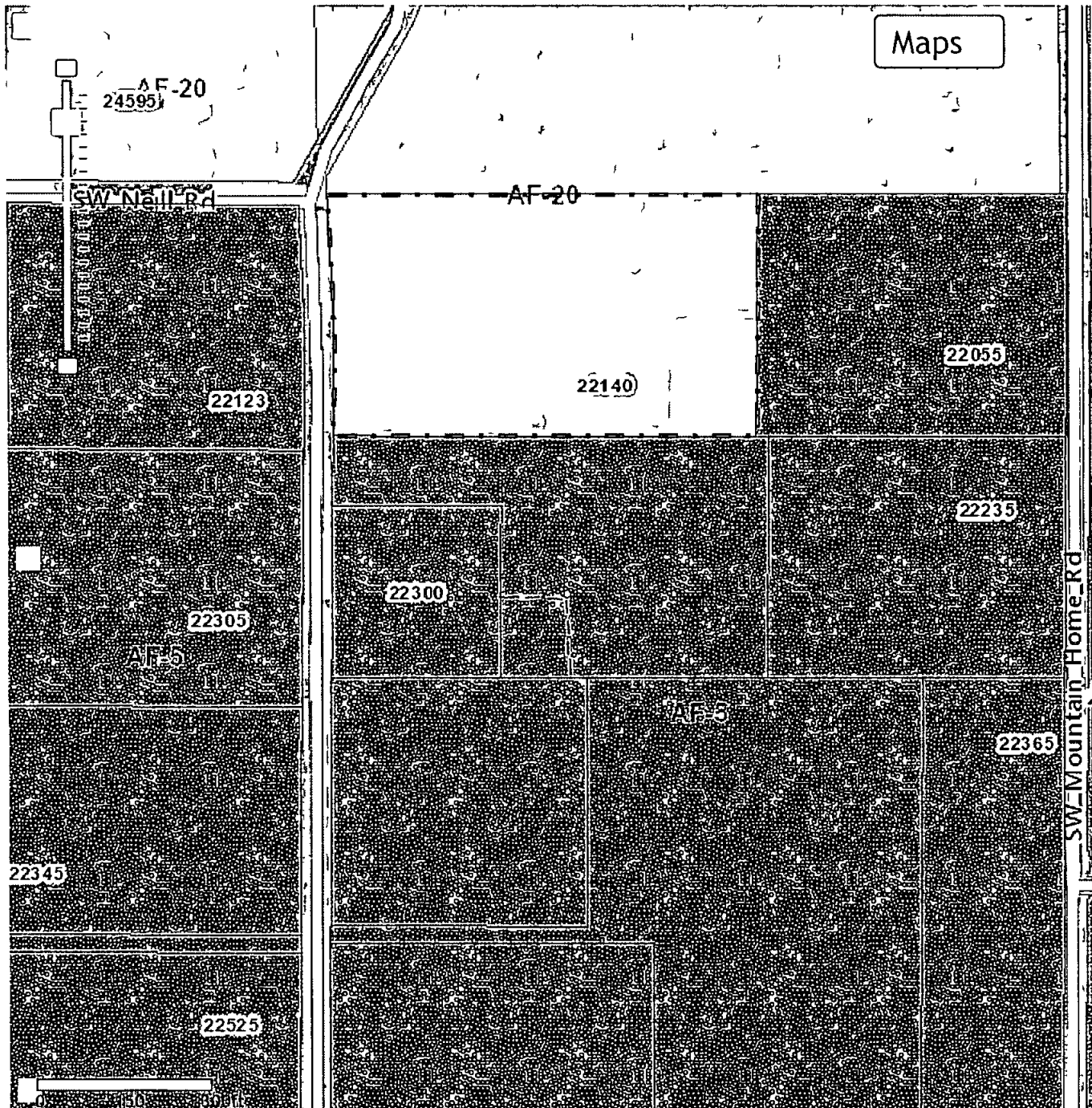
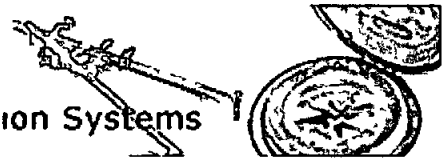
MAY 03 2012

Dept of Health & Human Services
Environmental Health

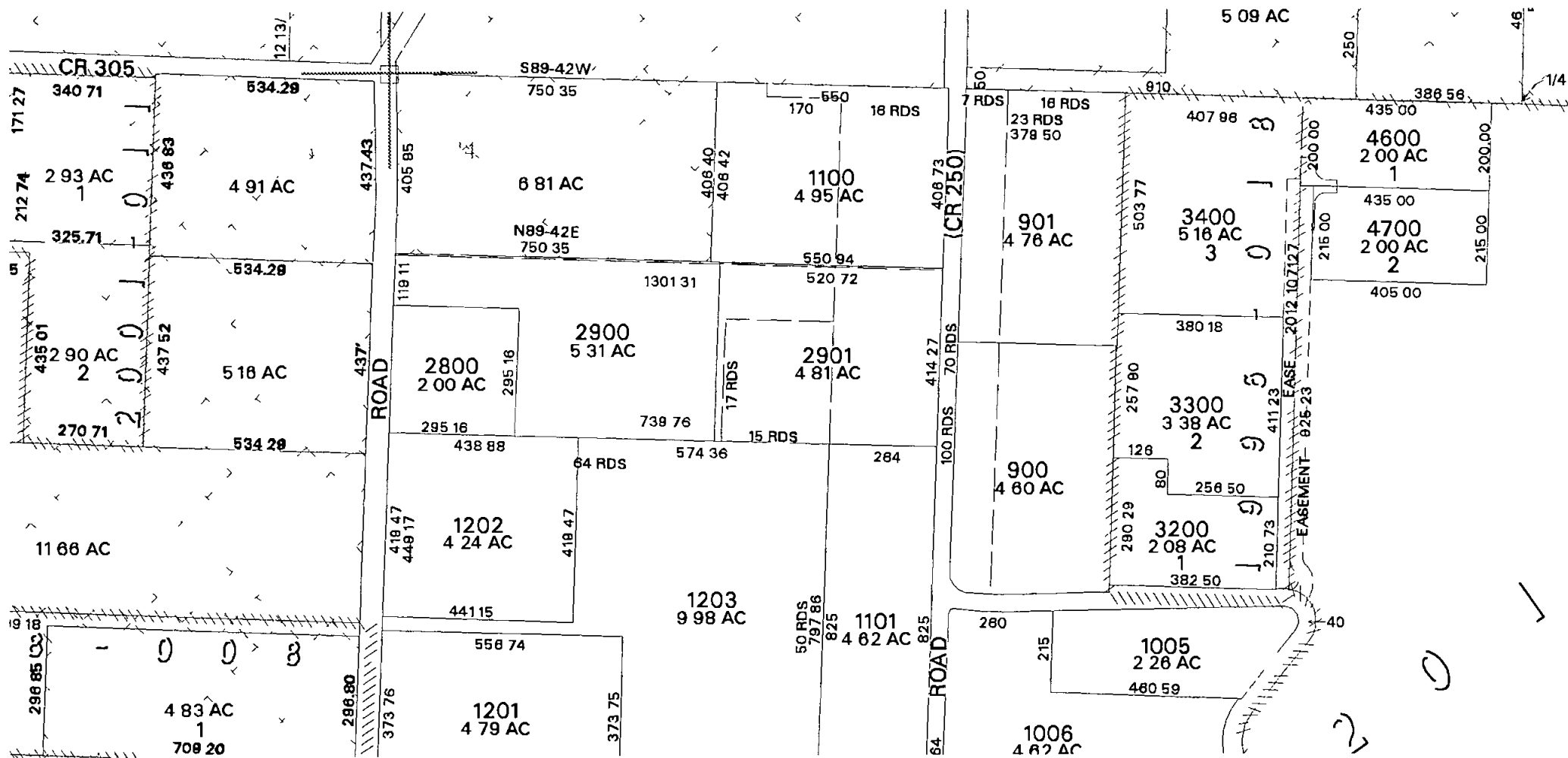


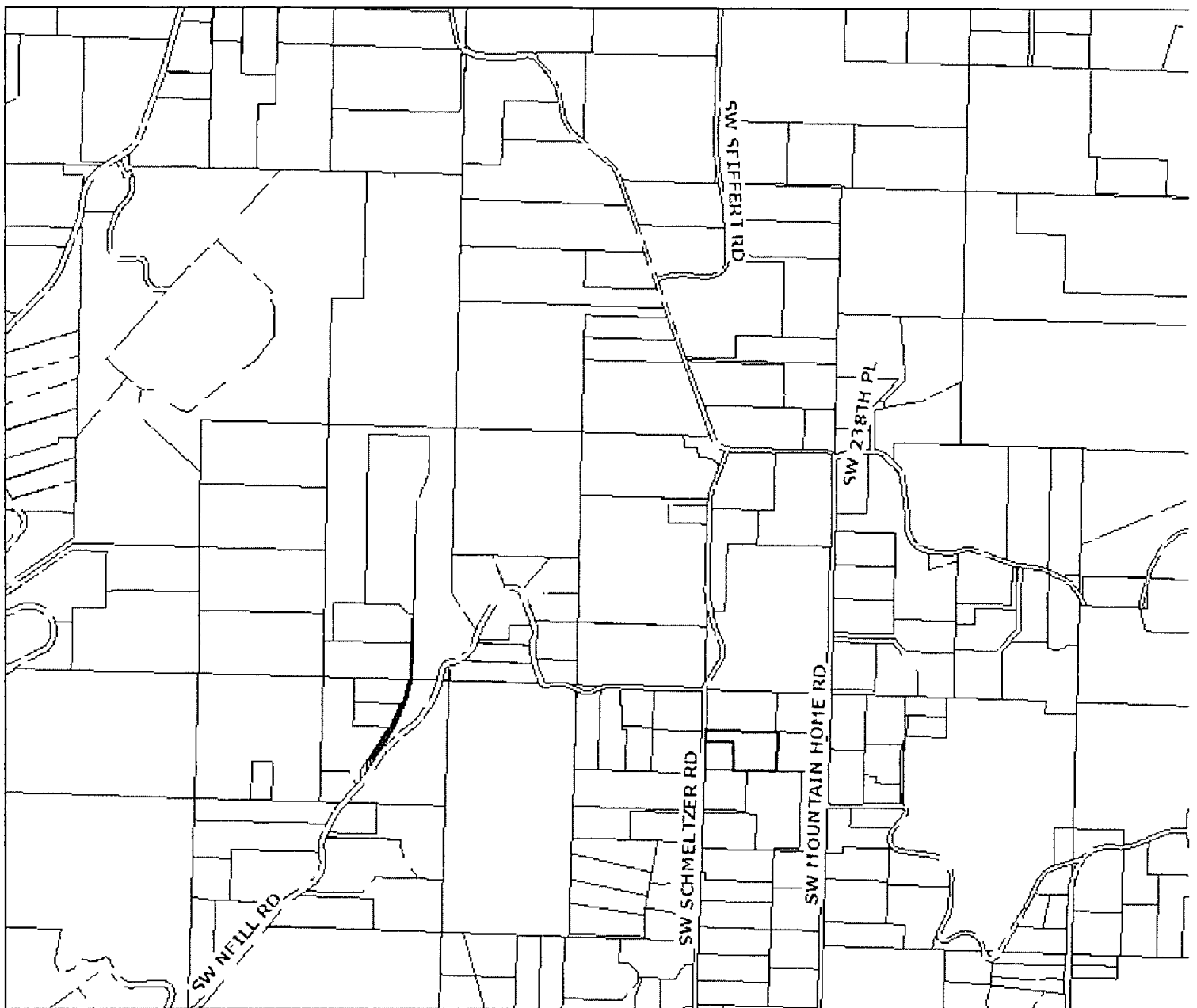


Geographic Information Systems



Base maps and air photo service are provided by Metro





2S2340002900



Washington County
155 North First Avenue
Hillsboro OR 97124
ph (503) 846 8611

Geonet

1 19 200

0 0 0750 15 0 3 0 45 0 6 Miles

June 6 2018

Disclaimer
The information on
Washington County
was taken in the or
cannot accept any
accuracy. The data
product. Notificatio

TP1 D=52" NO RUF/CAS ESD > 52"

D=12' 1.5YR 3/3, 1F-SBK, MFR, FMP, MFP, 5% L-FRL (PB)

(SIL)

12-25' 7.5YR 4/3, 2F-SBK, MFR, MFP

(SIL)

25-38" 7.5YR 4/3, 2M-SBK, CFR, CFP, 10-20% L-FRL (CB)

(SIL)

38"-4 SYR 4/4 W/FMP MIN, 3M-SBK, FFR, CFP, 20-30% L-FRL (CB)

(H-SIL)

TP2 D=55" NO RUF/CAS ESD > 55"

D=11' 7.5YR 3/3, 1F-SBK, MFR, FMP, MFP, 5% L-FRL (PB)

(SIL)

11-20" 7.5YR 4/3, 2F-SBK, MFR, MFP

(SIL)

20-33" 7.5YR 4/3, 2M-SBK, CFR, CFP

(SIL)

33-43" 7.5YR 4/4 W/FMP MIN, 2M-SBK, FFR, CFP

(SIL)

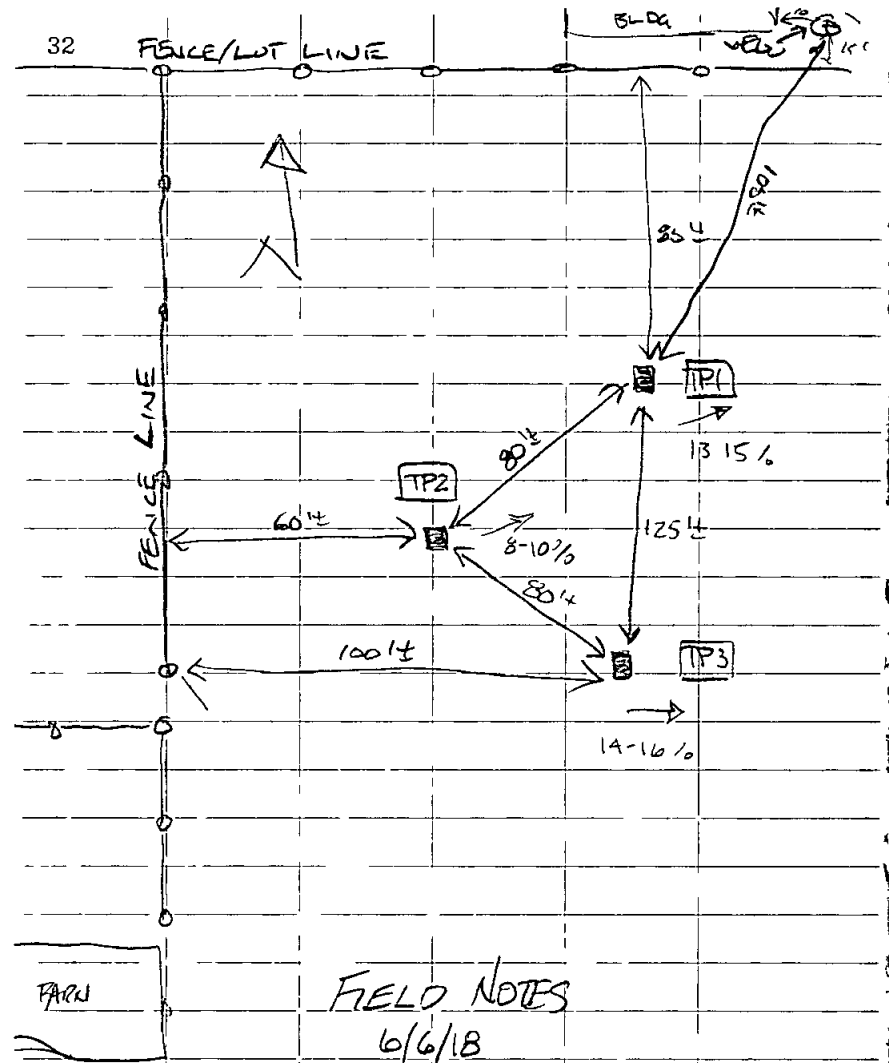
43"-4 SYR 4/4 W/FMP MIN, 3M-SBK, FFR, CFP, 15-25% L-FRL

(H-SIL)

TP3 D=53" NO RUF/CAS ESD > 53"

← SIMILAR TO TP1 & TP2

Return to Rain



FIELD NOTES

6/6/18

252-34-2900

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Telephone 503 846-8722 Fax 503 846-3705
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SITE EVALUATION REPORT

(NOT a permit for construction)

CR # EHA18272 Dates of Inspection 6/6/18
Application Date 5/3/18
Tax Account # _____
Township 2S Range 2W Section 34 T L # 2900
Site Address SW Schmeltzer Road, Sherwood
Applicant Lynn Marie Haynes Parcel Size/Dim 5 31 Acres
c/o A-Affordable Septic Service, LLC Type of Dwelling Residential
P O Box 818 Water Supply Well
Canby, OR 97013

An approved site evaluation indicates the above described property is adequate for the installation of one on site disposal system in accordance with ORS 454 605 through 454 755 the Administrative Rules of the Environmental Quality Commission promulgated thereunder the Washington County Code Chapters 12 12 and 12 16

An approved site is given on the basis that the lot or parcel described above will not be further partitioned divided or altered in any manner as prohibited by the Statutes and Ordinances listed above Any such division partitioning or alteration voids this approval

☐ APPROVED
☐ DENIED

COMMENTS/CONDITIONS

Initial and Replacement Systems

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Trench depth = 36" maximum/24" minimum System design flow is 450 gpd (1 - 4 bedrooms),
A minimum 1,000 gallon capacity septic tank is required See attached field worksheets for
additional information and requirements

NOTE A plot plan and all required documents must be submitted to this office for approval prior to permit issuance

Sanitarian's Signature

A handwritten signature in black ink, appearing to read "J. Haynes".

Date 6/7/18



Public Health
E n v i r o n m e n t a l H e a l t h

SITE EVALUATION FIELD WORKSHEET

Tax Reference 2S2-34-2900

Evaluator Larry Fenster REHS

Applicant Haynes

Date 6/6/18

TP # 1	Depth (in)	Texture	Soil Matrix Color and Redox (Notation) Structure Roots Pores Clay Films % Coarse Fragments Layer Limiting Effective Soil Depth (Llesd) etc
	0 - 12"	SiL	7 5YR3/3 1F-SBK, MFR FMP MFP, 5% C-FRG(pb)
	12 - 25	SiL	7 5YR4/3 2F-SBK MFR MFP
	25 - 38'	SiCL	7 5YR4/3, 2M-SBK CFR CFP, 10-20% C-FRG(cb)
	38 - 52	h-SiCL	5YR4/4 w/FFP-MNM 3M-SBK FFR, CFP, 20-30% C-FRG(cb)

TP # 2	Depth (in)	Texture	Soil Matrix Color and Redox (Notation) Structure Roots Pores Clay Films % Coarse Fragments Layer Limiting Effective Soil Depth (Llesd) etc
	0 - 11	SiL	7 5YR3/3 1F-SBK MFR FMP, MFP, 5% C-FRG(pb)
	11 - 20	SiL	7 5YR4/3 2F-SBK, MFR, MFP
	20 - 33	SiCL	7 5YR4/3 2M-SBK, CFR CFP
	33 - 43	SiCL	7 5YR4/4 w/FFP-MNM 2M-SBK FFR CFP
	43 - 55	h-SiCL	5YR4/4 w/FMP-MNM 3M-SBK FFR, CFP, 15-25% C-FRG(cb)

TP # 3	Depth (in)	Texture	Soil Matrix Color and Redox (Notation) Structure Roots Pores Clay Films % Coarse Fragments Layer Limiting Effective Soil Depth (Llesd) etc
			SIMILAR TO TP#1 & TP#2
			Depth = 53"
			No RMF/CAS
			ESD > 53"

Landscape Notes Upland - Sideslope

Llesd > 54

Slope 8 - 16 %

Aspect E - ENE

Groundwater No RMF/CAS

Other Notes Vacant parcel Proposed new building site to be served by a well and an onsite septic system

SYSTEM SPECIFICATIONS

Facility Type Residential Design Units 1 4 bedrooms Design Flow 450 gpd

Initial Standard serial System Sizing 125' /150 g Max Depth Absorption Facility (in) 36

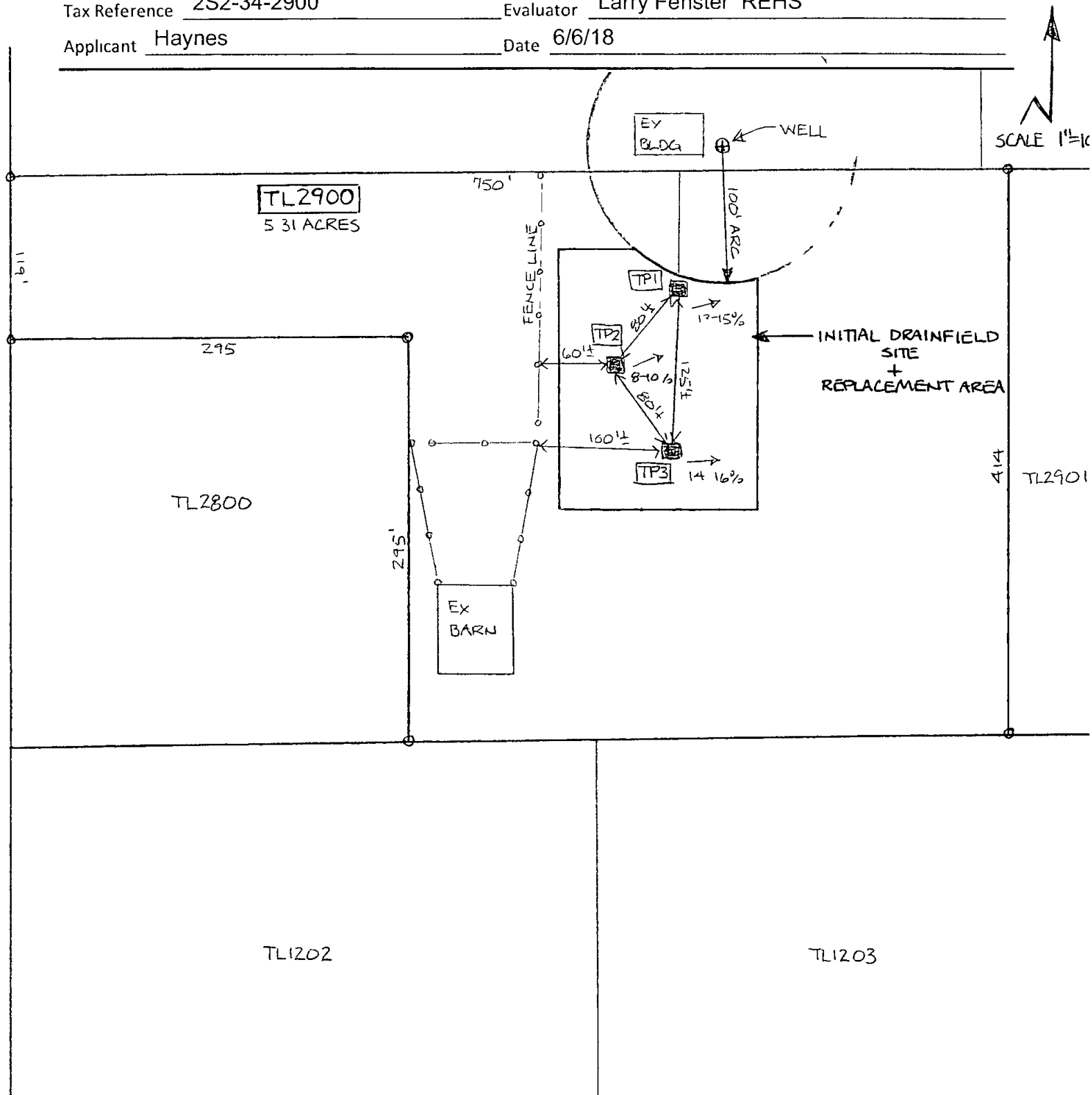
Replacement Standard serial System Sizing 125 /150 g Max Depth Absorption Facility (in) 36

Special Conditions The above noted systems must be installed

1) Within the approved area noted on back

2) In accordance with DEQ rules

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Date 6/6/18

Additional Comments and Conditions Must maintain all DEQ required setbacks including

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Public Health
P R I N C I P L E

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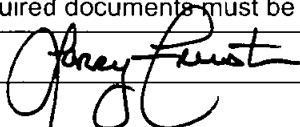
☐ APPROVED
☐ DENIED

COMMENTS/CONDITIONS

Initial and Replacement Systems

Standard serial distribution systems sized at 125'/150gpd (375' of drainline per system),
Trench depth = 36" maximum/24" minimum, System design flow is 450 gpd (1 - 4 bedrooms),
A minimum 1,000 gallon capacity septic tank is required See attached field worksheets for
additional information and requirements

NOTE A plot plan and all required documents must be submitted to this office for approval prior to permit issuance

Sanitarian's Signature  Date 6/7/18

Department of Health and Human Services
Environmental Health Program
155 N First Ave MS 5 Suite 160
Hillsboro OR 97124
Telephone 503 846 8722 Fax 503-846 3705
www.co.washington.or.us/hhs/EnvironmentalHealth



SITE EVALUATION FIELD WORKSHEET

Tax Reference 2S2-34 2900

Evaluator Larry Fenster REHS

Applicant Haynes

Date 6/6/18

TP # 1	Depth (in)	Texture	Soil Matrix Color and Redox (Notation) Structure Roots Pores Clay Films % Coarse Fragments Layer Limiting Effective Soil Depth (Llesd) etc
	0 - 12"	SiL	7 5YR3/3 1F-SBK, MFR FMP MFP, 5% C-FRG(pb)
	12 - 25"	SiL	7 5YR4/3 2F-SBK, MFR MFP
	25 - 38	SiCL	7 5YR4/3 2M-SBK, CFR, CFP 10-20% C-FRG(cb)
	38 - 52	h-SiCL	5YR4/4 w/FFP-MNM, 3M-SBK FFR, CFP, 20-30% C-FRG(cb)

TP # 2	Depth (in)	Texture	Soil Matrix Color and Redox (Notation) Structure Roots Pores Clay Films % Coarse Fragments Layer Limiting Effective Soil Depth (Llesd) etc
	0 - 11"	SiL	7 5YR3/3 1F-SBK, MFR FMP MFP 5% C-FRG(pb)
	11 - 20	SiL	7 5YR4/3 2F-SBK, MFR MFP
	20 - 33	SiCL	7 5YR4/3, 2M-SBK CFR CFP
	33 - 43	SiCL	7 5YR4/4 w/FFP-MNM 2M-SBK, FFR CFP
	43 - 55	h-SiCL	5YR4/4 w/FMP-MNM 3M-SBK FFR CFP 15-25% C-FRG(cb)

TP # 3	Depth (in)	Texture	Soil Matrix Color and Redox (Notation) Structure Roots Pores Clay Films % Coarse Fragments Layer Limiting Effective Soil Depth (Llesd) etc
			SIMILAR TO TP#1 & TP#2
			Depth = 53"
			No RMF/CAS
			ESD > 53"

Landscape Notes Upland - Sideslope Llesd > 54

Slope 8 - 16 % Aspect E - ENE Groundwater No RMF/CAS

Other Notes Vacant parcel Proposed new building site to be served by a well and an onsite septic system

SYSTEM SPECIFICATIONS

Facility Type Residential Design Units 1-4 bedrooms Design Flow 450 gpd

Initial Standard serial System Sizing 125 /150 g Max Depth Absorption Facility (in) 36

Replacement Standard serial System Sizing 125' /150 g Max Depth Absorption Facility (in) 36

Special Conditions The above noted systems must be installed

1) Within the approved area noted on back

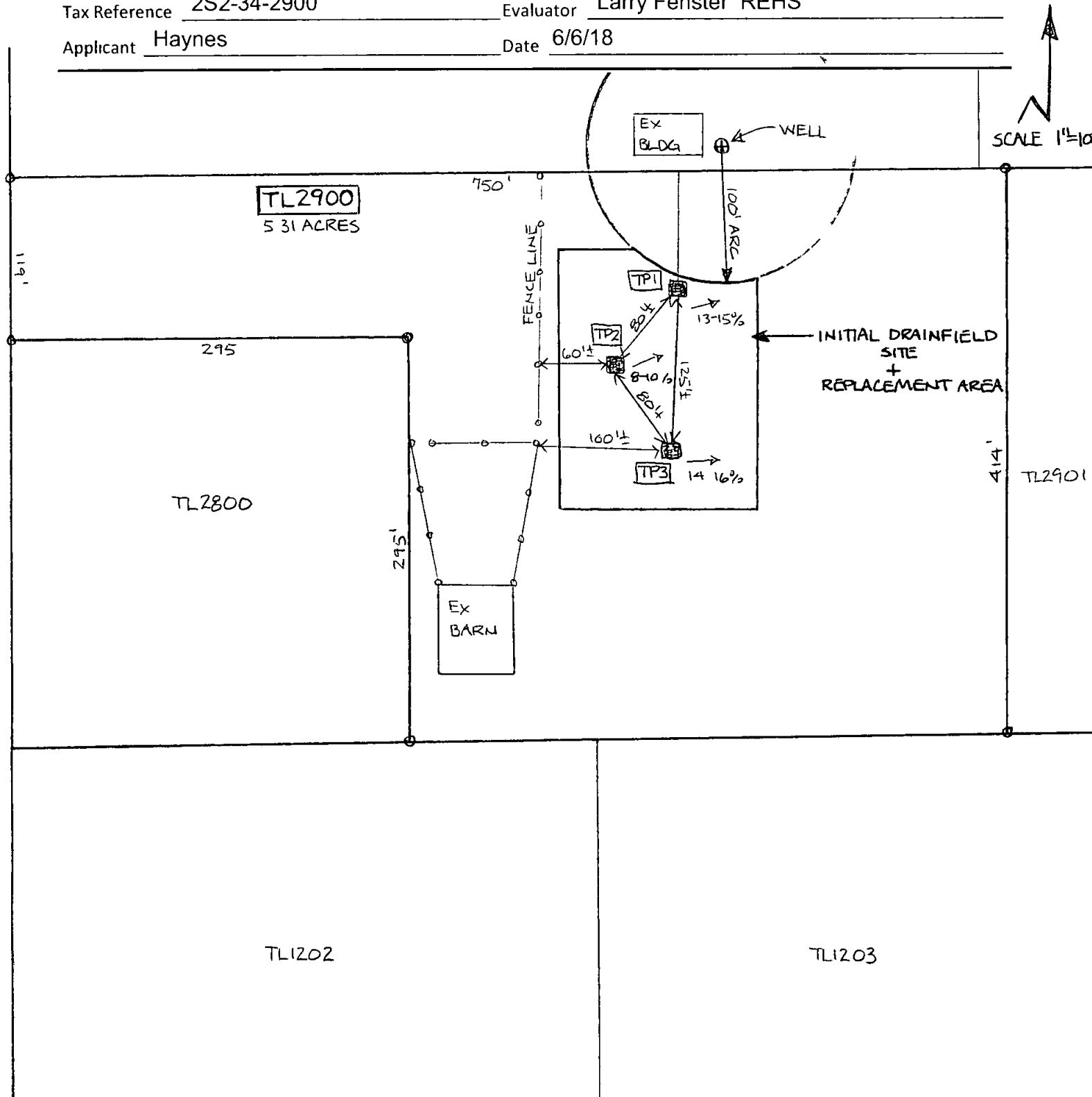
2) In accordance with DEQ rules

Tax Reference 2S2-34-2900

Evaluator Larry Fenster REHS

Applicant Haynes

Date 6/6/18



Additional Comments and Conditions Must maintain all DEQ required setbacks including

- 100' minimum from all wells springs and year round surface waters

- 50' minimum from some cuts > 30" escarpments and seasonal surface waters

- 10' minimum from property lines, easements utilities and building foundations