

**Certificate of Satisfactory Completion**

*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 Permit OS402621 as follows:*

**PROPERTY INFORMATION**

Property Owner: <b>Kerry W. Sweitz</b>	<b>Township 24S, Range 32E, Section 25</b>
Property Location: <b>Otis</b>	<b>Tax Lot 7300</b>
Facility Type: <b>Single Family Dwelling</b>	<b>Harney County</b>
<b>3 Bedrooms</b>	

**SPECIFICATIONS AND REQUIREMENTS**

**System type: Standard**

Design Flow:	<b>450 gals/day</b>	Drain Media Total Depth:	<b>12 inches</b>
Minimum Septic Tank Size:	<b>1000 gals</b>	Drain Media Below Pipe:	<b>6 inches</b>
Distribution Type:	<b>Equal</b>	Drain Media Above Pipe:	<b>6 inches</b>
Total Trench Length:	<b>225 Linear feet</b>		
Trench Spacing:	<b>8 feet*</b>		
Media Type:	<b>Rock and Pipe</b>		
Maximum Trench Depth:	<b>36 inches</b>		
Minimum Trench Depth:	<b>20 inches</b>		

\*Minimum undisturbed soil between trenches

**ADDITIONAL CONDITIONS**

- 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 must 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.

APR 17 2007

Final Inspection Request and Notice - Onsite ID: 402621

Eastern Region - Bond

Pursuant to the requirements within ORS 454.665, OAR 340-71-170 and OAR 340-71-175, the system installer and/or the permittee must notify DEQ (or authorized 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). DEQ (or Agent) has 7 days to perform an inspection of the completed construction after the official notice date, unless DEQ (or Agent) elects to waive the inspection and authorizes the system to be backfilled earlier. Receipt and acceptance of this completed form by DEQ (or Agent) establishes the official notice date of your request for the pre-cover inspection. Faxed copies are acceptable for inspection request purposes only. Originals must be received before a certificate of satisfactory completion is issued. Please complete all of sections 1 through 4 on the form and return it to the office that issued the permit. Forms that are determined to be incomplete may be returned.

SECTION 1: Owner Information:

Kerry W. Sweitz

Township 24S, Range 32E, Section 25

Harney County TaxLot#: Tax Lot 7300

Otis

SECTION 2: Materials List - Identify and list all materials used in the system.

Material Categories:	Brand Name:	Size:	Specifications	Amount of Material:
Pump(s):	none			
Distribution Pipe:	D.W.V	Schedule 40	4"	
Effluent Sewer Pipe:	2729	perforated	Schedule 40 DWV	Effluent pipe
Drain Media Type(s):	2 1/2"	crushed	Drainrock	28 yards
Filter Material:	Filter cloth			
Other:	1500	concrete tank	1500 w/ 2 compartment	D-Box Tuffstyle

NOTE: Unless previously submitted, you must attach copies of the sieve analysis for the "Filter Media" and "Underdrain Media" used in this system.

SECTION 3: Construction was performed by (signature required):

Property Owner/Permittee: Kerry W. Sweitz

Sewage Disposal Service Business KW Sweitz Trucking ; 36958  
(Print Full Business Name) (License Number)

All Tank(s) were tested for water-tightness after installation and passed in accordance with OAR 340-73-025(3): Yes  No (

Date tanks(s) tested: 3-29-2007 Date System Construction Completed: 3-29-2007

I certify that the information provided on both sides of this document is correct and that the construction of this system was in accordance with the permit and the rules regulating the construction of on-site sewage disposal systems (OAR Chapter 340, Divisions 71 and 73).

Kerry W. Sweitz Co-owner 36958 4-1-07  
(System Installer's Signature-Property Owner or Certified Installer with Certification Number) (Title) (Cert. #) (Date)

Installers Contact Phone Number: Office/Home 541-996-2259 Cell 541-921-1019

### Construction-Installation Permit

*This Construction-Installation Permit OS402621 authorizes the property owner to construct an onsite wastewater system as follows:*

#### PROPERTY INFORMATION

Property Owner: **Kerry W. Sweitz** **Harney County**  
Property Location **Otis** **Township 24S, Range 32E, Section 25**  
Facility Type: **Single Family Dwelling** **Tax Lot 7300**  
**3 Bedrooms**

#### SPECIFICATIONS AND REQUIREMENTS

##### System Type: Standard

Design Flow:	<b>450 gals/day</b>	Drain Media Total Depth:	<b>12 inches</b>
Minimum Septic Tank Size:	<b>1000 gals</b>	Drain Media Below Pipe:	<b>6 inches</b>
Distribution Type:	<b>Equal</b>	Drain Media Above Pipe:	<b>6 inches</b>
Total Trench Length:	<b>225 Linear feet</b>		
Trench Spacing:	<b>8 feet*</b>		
Media Type:	<b>Rock and Pipe</b>		
Maximum Trench Depth:	<b>36 inches</b>		
Minimum Trench Depth:	<b>20 inches</b>		

\*Minimum undisturbed soil between trenches

#### ADDITIONAL CONDITIONS

- 1 Filter fabric is required over the drain media.
- 2 Meet all required setbacks.
- 3 The system must be installed by the property owner or a licensed sewage disposal business (installer).
- 4 The system must be installed in accordance with the plan approved by the agent, including any changes made by the agent.
- 5 Vehicular traffic and livestock must be restricted from the system area.
- 6 All roof drains must be directed away from the system.
- 7 All trenches must be at the same elevation.
- 8 All work is to conform to Oregon Administrative Rules, Chapter 340, Divisions 071 and 073. Make no changes in system location or specifications without written approval from the permit issuing agent.



# Oregon

Theodore R. Kulongoski, Governor

Sex 541-573-8387

## Department of Environmental Quality

2146 NE 4th Street, Suite 104

Bend, OR 97701

(541) 388-6146

Eastern Region

This form is an attachment to Building Codes Division's Application for Structural Permit, Application for Plumbing Permit, or other similar forms used by local jurisdictions. Bend Office This form provides notification to Building Officials or offices having jurisdiction that an approved method of on-site sewage disposal has been accounted for. This notice only pertains to the specific project noted below.

**NOTE:** The applicant is responsible for retention and delivery of this form to the Building Codes Division office or other local office having jurisdiction.

**Property Owner:** Kerry & Laura Swetz

**Property Location:**

Township 24 Range 32 1/2 Section 25 Tax Lot# 7300 County Harney

Site Address, if known: off Newton Rd

**Project Description:** Structure or Action Type: (describe) \_\_\_\_\_

4 - bedroom single family residence

Domestic Wastewater:      Yes    No      Permit #  
             OS 402621

Industrial Wastewater:                \_\_\_\_\_

Pump Required:                                \_\_\_\_\_

Permit/Approval Issue Date:      11/16/06

Permit/Approval Expiration Date:      4/16/07

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Authorized Signature: Lawrence M Brown REITS Date: 11/16/06

Harney County 25 245 32V #7300 160 miles  
Kerry & Laura Sweitz  
1111 N. Bear Creek rd  
Astoria, OR 97103

INSTALLER RESPONSIBLE  
OR ALL CONSTRUCTION  
MATERIALS AND STANDARDS

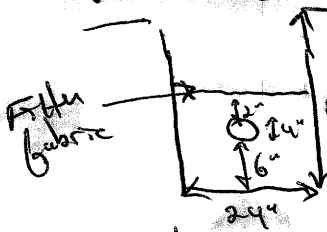
PLAN APPROVED  
SIGNED WMS DATE 11/16/06

# Effluent Sewer to have 18 gauge green-jacketed haircable  
and to have a minimum fall of 6" from the invert of the  
Septic tank outlet to the invert of the d. box inlet.

Min. 4' of solid pipe before starting  
drain field

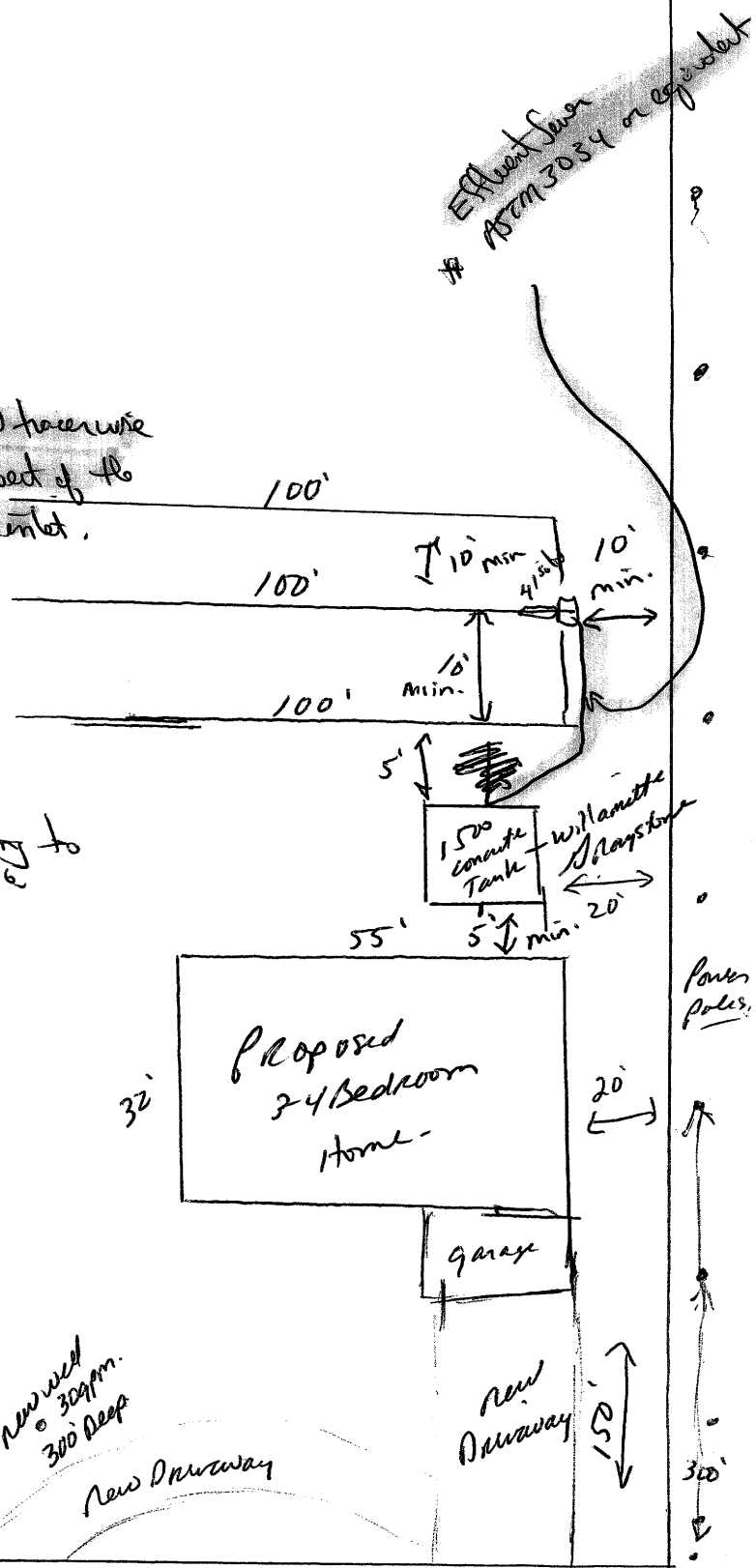
System to be installed in approved area

Trench Design



Rock a pipe according to  
phone call 11/16/06

12" rock  
3/4-2 1/2 clean durable  
drain rock



Effluent Sewer  
# 187M3054 or equivalent

2582' +/-

1.5 miles

Newton rd.

2642.50'

Propose standard Equal Distribution  
20" min. 36" max. 300' Drainfield  
+ 1500 gallon concrete tank.

Kerry W. Sweitz # 36958 DEC #  
7922 # OCB #

2 miles

Power Poles



State of Oregon  
Department of  
Environmental  
Quality

# Application for Onsite Sewage Treatment System

Department of Environmental Quality

2146 NE 4th, #104  
Bend, OR 97701

Phone/TTY: (541) 388-6146  
Fax: (541) 388-8283

LM 10-30  
Larry  
brown +  
234  
\$670.00

20" - 36"  
max. willamette  
541-388-3871  
loc ID # 302736135.00 = 156 miles  
845.00  
596.00  
1391.00  
131.02  
1522.00

Date Stamp:	For DEQ Use Only:
<b>RECEIVED</b>  NOV 15 2006  Eastern Region - Bend	Date Received <u>11-15-06</u>
	Fee Paid <u>\$670.00</u>
	Receipt Number <u>129022</u>
	Application Number <u>403331</u>
	Date of 1st Response <u>11-16-07</u>
	Date of 2nd Response _____
	Date of Final Response _____
Date of Completion <u>11-16-06</u>	
Scanned <input checked="" type="checkbox"/>	Data Entry <input checked="" type="checkbox"/>

### A. Property Owner Information

Name: Kerry W. Sweitz Mailing Address (Street or PO Box, City, State, Zip Code): 1111 A. Bear Creek Rd OHS, OR 97368 Phone Number: (541) 996-2259

### B. Legal Property Description

Township: 24S Range: 32<sup>1/2</sup> Section: 25 Tax Lot: 32V # 7300 Tax Account Number: 23373 7300 Acreage or Lot Size: 2.24-32<sup>1/2</sup> 160 aces  
 County: Harney Subdivision Name: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

Property Address: \_\_\_\_\_ Address City State Zip Code

Directions to Property:  Hwy 78 past Laven before crane - turn left on Newton rd & go 1 1/2 miles on left Power lines on NE side

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

<b>Existing Facility:</b> <input type="checkbox"/> Single Family Residence Number of Bedrooms _____ <input type="checkbox"/> Other _____	<b>Proposed Facility:</b> <input checked="" type="checkbox"/> Single Family Residence <u>0-3<sup>1/2</sup> Bedroom +</u> Number of Bedrooms <u>3-4 bedroom</u> <input type="checkbox"/> Other _____	<b>Water Supply:</b> <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private <u>wel.</u> Name _____ Well, Spring, Shared _____
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### D. Type of Application

<input checked="" type="checkbox"/> Site Evaluation <input type="checkbox"/> Construction Permit <input type="checkbox"/> Repair Permit <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 _____
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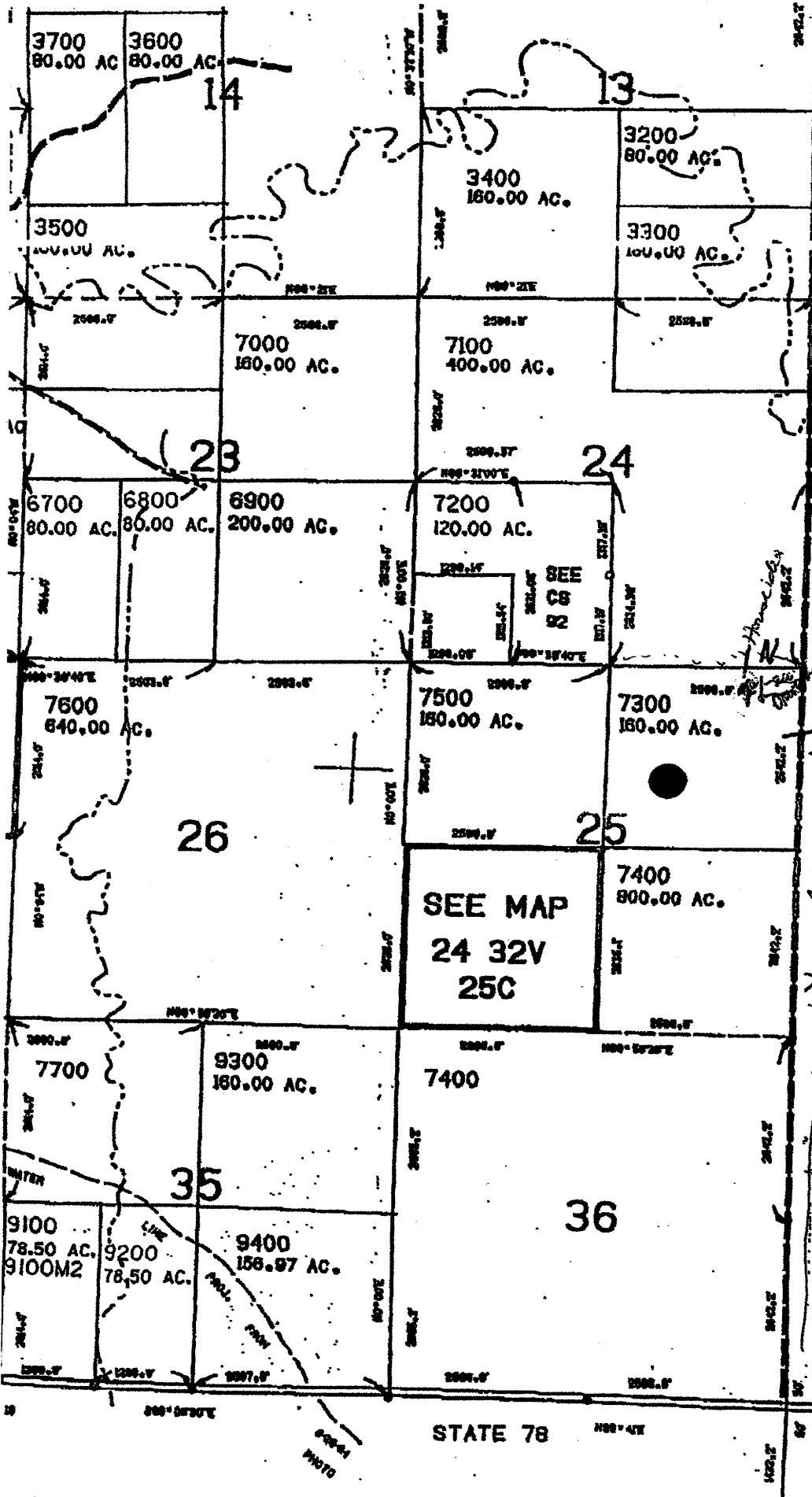
If the required fee and attachments are not included with this application, it will be returned to you as incomplete. Post a flag or sign with your name and address at the entrance to the property. Flag and number the test holes.

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: Kerry W. Sweitz Date: 6-25-06 cell # 921-1019  
 Applicant's Name - Please Print Legibly: Kerry W. Sweitz Applicant's Phone Number: (541) 996-2259  
 Applicant's Mailing Address: 1111 A. Bear Creek Rd OHS, OR 97368

Applicant is the  Owner  Authorized Representative  Licensed Septic Installer  
 Authorization Attached

Installer's Name: KW Sweitz Trucking, Seaside  
 # 36958 O.E.O Oregon



5600M2  
 5700  
 5700MI  
 5700M2  
 8300MI

SEE MAP 24 33

*On Form N. Unimproved*  
*West 100' From South*  
*App. 200' x 300'*  
*in McC... ..*  
*Locate 10-22-06*

660,000

This sketch is solely for the purpose of property location and the drafter assumes no liability for variations in dimensions and location, as determined by actual survey.

24 32V  
 & INDEX

STATE 78



# Oregon

Theodore R. Kulongoski, Governor

November 16, 2006

403330  
Department of Environmental Quality

2146 NE 4th Street, Suite 104

Bend, OR 97701

(541) 388-6146

Eastern Region

Bend Office

Kerry Sweitz  
1111 N Bear Creek Road  
Otis, OR 97368

## IMPORTANT DOCUMENT – PLEASE READ CAREFULLY

**-This is not a construction permit-**

RE: **Site Evaluation Results – Site Approval with Conditions**  
Township/Range/Section: T24 S, R32½ EWM, S25; Tax Lot 7300  
160 Acres – Harney County

Dear Mr. Sweitz:

This document is a technical report for the purpose of establishing an on-site sewage treatment and disposal (OSSTD) system on the lot or parcel referenced above. **This report is not a construction permit nor does it represent a sign-off from our Department to obtain a building permit.** In order to obtain a sign-off for a building permit a safe and adequate method of sewage disposal is to be accounted for. This accountability requires that the property owner apply for and obtain an OSSTD construction permit in accordance with this document.

On the following date(s): October 31, 2006, your site was evaluated for suitability of on-site sewage disposal systems **for a single family residence** up to four (4)-bedrooms with predicted peak flows of 450 gallons per day. If you expect your family's water use to exceed these flows, it is recommended that the system be made larger. Based on this evaluation, the following on-site sewage disposal systems are approved:

**Initial system:** Standard, 225 linear feet drainfield

**Replacement system:** Standard, 225 linear feet drainfield

Details of the site evaluation are included in the Site Evaluation Report that is enclosed. The Site Evaluation Report also includes more specific information and further conditions of site approval.

### Next Step – Applying for a Construction/Installation Permit

Any person other than the property owner must be licensed by the DEQ to install an on-site sewage disposal and treatment system. In addition, a **PERMIT** must be obtained from this office prior to installation of the system. When you are ready to proceed with system construction the following items must be submitted along with a completed and signed application form. The necessary forms are enclosed.

**A COMPLETE AND SIGNED APPLICATION FORM**



# Site Evaluation Report for On-Site Sewage Disposal System Suitability

Site Location: T24 S, R32½ EWM, S25; Tax Lot 7300

160 Acres – Harney County

Applicant: Kerry Sweitz

Date(s) of Site Evaluation: October 31, 2006

DEQ Onsite Specialist: Lawrence M. Brown, REHS

Date of Report: November 16, 2006

## General Description of Site Evaluations

Sewage contains disease-causing organisms and other pollutants that can cause adverse impacts to human health and the environment. An on-site sewage disposal system must treat and dispose of sewage in a way that will not cause a public health hazard, contaminate drinking water supplies, or pollute public waters.

Proper treatment in an on-site system begins with primary treatment in the septic tank. The septic tank separates the solid particles in sewage from the liquid. The liquid that comes out of the septic tank is called effluent. The effluent may then be dispersed in the soil for further treatment or discharged into a secondary treatment device such as a sand filter or aerobic treatment unit prior to dispersal in the soil. For proper treatment, the effluent must slowly infiltrate into the underlying soil. Dissolved wastes and bacteria in the effluent are trapped or adsorbed to soil particles or decomposed by microorganisms. This process removes disease-causing organisms, organic matter, and most nutrients. Effluent that comes to the ground surface (through poor soils or other problems with the system) can be a possible health hazard because it may still contain some disease-causing organisms. Soil that drains too quickly may not give the effluent enough treatment and may result in groundwater contamination.

The purpose of the evaluation was to locate suitable soils in an area that is large enough for both the initial drainfield area and the replacement drainfield area. The criteria used for this site evaluation can be found in Oregon Administrative Rules (OAR) 340-071.

Soil test pits and other site features were evaluated during the site visit on October 31, 2006. In the site inspection, the following features were evaluated:

- Soil types - how well they drain and other evidence of good soil structure for treatment
- Depth to groundwater
- Wells located on the site or adjacent sites.
- Slopes, escarpments, ground surface variations, topography
- Creeks or springs on the site or adjacent properties
- Whether the soils have been disturbed
- Setbacks from property lines, buildings, water lines, and other utilities
- Other site features that could affect the placement of your on-site system.

8. **If the applicant selects to install chamber type products** and burrowing rodents are within the area evaluated, the applicant is to be in contact with the manufacturer for installation requirements.

Septic Tank Selection: Before purchasing a septic tank, check the DEQ's Approved Product list at <http://www.deq.state.or.us/wq/onsite/onsite.htm>, then scroll down to section "12. Approved Products and Technology". Due to some manufacture guidelines and design specifications, some tanks have "Limited Approvals" and can not be used in certain conditions. If uncertain whether your site has such conditions, please contact your nearest DEQ office.

This site approval is valid until the system approved above is constructed in accordance with a DEQ construction permit. Technical rule changes shall not invalidate this approval, but may require use of a different kind of system. If there is a technical rule change affecting this site approval, the Department will attempt to notify in writing the current property owner as identified by the county assessor's records. The site approval runs with the land and will automatically benefit subsequent owners.

Attachment: Field Worksheet

SITE EVALUATION FIELD WORKSHEET

Tax Reference T24s R32 1/2 Eum S25 Tax Lot 7300 Evaluator Larry Brown  
 Applicant Kerry Swartz Date 10/31/06 Parcel Size 160 Acres

Depth	Texture	Soil Matrix Color and (Mottling), % Coarse Fragments, Roots, Structure, Layer Limiting Effective Soil Depth, etc.	
Pit 1 0-4"	vsfsl	10YR <sup>3 1/2</sup> 1/2. 2uf roots. (f) sblk structure	1
1 4-9"	hcl-c	10YR <sup>2 1/2</sup> 1. 3uf. 3f-mabk	1
1 9-51"	fsl	10YR <sup>4 1/2</sup> 1. 1uf. 3mabk	1
-----1			
Pit 2 0-4"	vsfsl	} Similar to Qab #1 in all aspects	2
2 4-12"	hcl-c		2
2 12-62"	fsl		2
-----2			
Pit 3 0-4"	vsfsl	} Similar to Qab #1 in all aspects	3
3 4-11"	hcl-c		3
3 11-60"	fsl		3
-----3			

Landscape Notes Sage, rabbit brush, wild foxtail grasses & broad leaf  
 Slope ~ 0% Aspect \_\_\_\_\_ Groundwater Type NA

Other Site Notes: Drainfield to be 100' from any ground water source or year-round surface water. Septic tank to be 50' from any ground water source or surface water.

SYSTEM SPECIFICATIONS

Type System: Standard Design Flow 450 gpd Disposal Field Size 225 Linear Feet  
 Initial Equal Distribution System Sizing 75' /150g. Max. Depth Absorption Facility (in) 36" / 20" minimum  
 Replacement \_\_\_\_\_ System Sizing 75' /150g. Max. Depth Absorption Facility (in) 36" / 20" "

Special Conditions: A detailed site development plan of proposed system construction (in area of approved test holes) is required with construction permit application. Plan must identify septic tank location, size, and manufactures name, building, effluent sewer pipe size and ID numbers, distribution or drop box manufacturer, cross section of disposal trench, gravel specifications or graveless system to be used, spacing between trenches, ground and pipe elevations throughout the system. Locate approved test holes as they relate to system placement. In addition to the above, the plan needs to locate the systems placement as it relates to existing or proposed structures, wells, waterways, roads and parking areas. We recommend a DEQ licensed sewage disposal business prepare plans and do eventual installation after DEQ construction permit issuance.

1) Filter fabric shall line the top of draw media of gravel/pipe system in all cases.

Comments: Removing rocks in area; 20" minimum trench depth is required to maintain trenches in fine sandy loam horizon.



State of Oregon  
Department of  
Environmental  
Quality

# Application for Onsite Sewage Treatment System

Department of Environmental Quality  
2146 NE 4th, #104  
Bend, OR 97701

Phone/TTY: (541) 388-6146

Fax: (541) 388-8283

Loc ID # 302736

Date Stamp:	For DEQ Use Only:
	Date Received <u>10-31-06</u>
	Fee Paid <u>465.00</u>
	Receipt Number <u>129021</u>
	Application Number <u>403330</u>
	Date of 1st Response <u>11-3-06</u>
	Date of 2nd Response <u>11-16-06</u>
	Date of Final Response _____
Date of Completion <u>11-16-06</u>	
Scanned <input checked="" type="checkbox"/>	Data Entry <input checked="" type="checkbox"/>

## A. Property Owner Information

Name Kerry W. Sweitz Mailing Address (Street or PO Box, City, State, Zip Code) 1111 A. Bear Creek Rd OHS, OR 97368 Phone Number (541) 996-2259

## B. Legal Property Description

Township 24<sup>th</sup> 28 Range 32<sup>nd</sup> 245 Section 25 324 Tax Lot # 7300 Tax Account Number ID# 23373 730 24-324 Acreage or Lot Size 160 acres  
County Harney Subdivision Name \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

Property Address: \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Directions to Property: Hwy 78 past Lawen before Crane - turn left on Newton rd & go 1 1/2 miles on left Power Lines on NE side

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

<b>Existing Facility:</b>	<b>Proposed Facility:</b>	<b>Water Supply:</b>
<input type="checkbox"/> Single Family Residence	<input checked="" type="checkbox"/> Single Family Residence	<input type="checkbox"/> Public _____
Number of Bedrooms _____	<u>2-3 Bedroom +</u>	Name _____
<input type="checkbox"/> Other _____	Number of Bedrooms _____	<input checked="" type="checkbox"/> Private _____
	<input type="checkbox"/> Other _____	Well, Spring, Shared _____

## 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 Permit	<input type="checkbox"/> Existing System Evaluation	<input type="checkbox"/> Connecting to an Existing System Not in Use
<input type="checkbox"/> Repair Permit	<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"/> Minor	<input type="checkbox"/> Permit Reinstatement	<input type="checkbox"/> The Addition of One or More Bedrooms
<input type="checkbox"/> Alteration Permit		<input type="checkbox"/> Personal Hardship
<input type="checkbox"/> Major <input type="checkbox"/> Minor		<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.

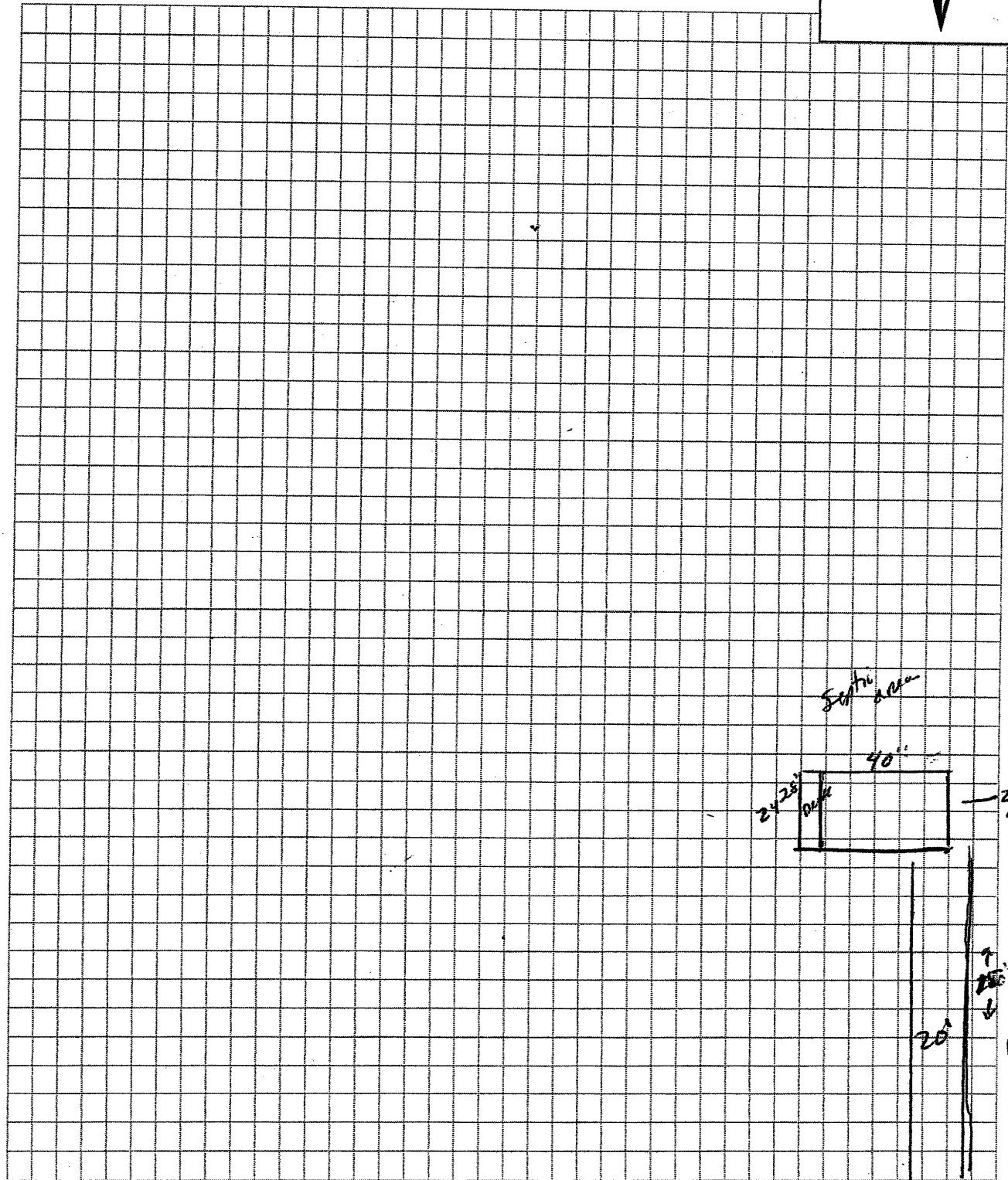
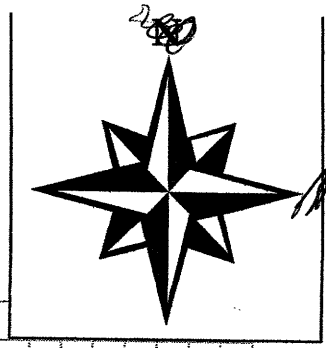
By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and it's authorized agents permission to enter onto the above described property for the sole purpose of this application.

Signature Kerry W. Sweitz Date 6-25-06  
Applicant's Name - Please Print Legibly Kerry W. Sweitz Applicant's Phone Number (541) 996-2259 Applicant's E-mail Address \_\_\_\_\_  
Applicant's Mailing Address 1111 A. Bear Creek Rd OHS, OR 97368

Applicant is the  Owner  Authorized Representative  Licensed Septic Installer  
 Authorization Attached  
Installer's Name KW Sweitz Trucking & Scaffolding  
# ~~36458~~ 0.E.O Oregon 36458

25-245-52V <sup>Y/E</sup> <sub>FL-114</sub>  
160 Acres #7360

# Exhibit B Site Plan



300ft

Power lines

App 50+

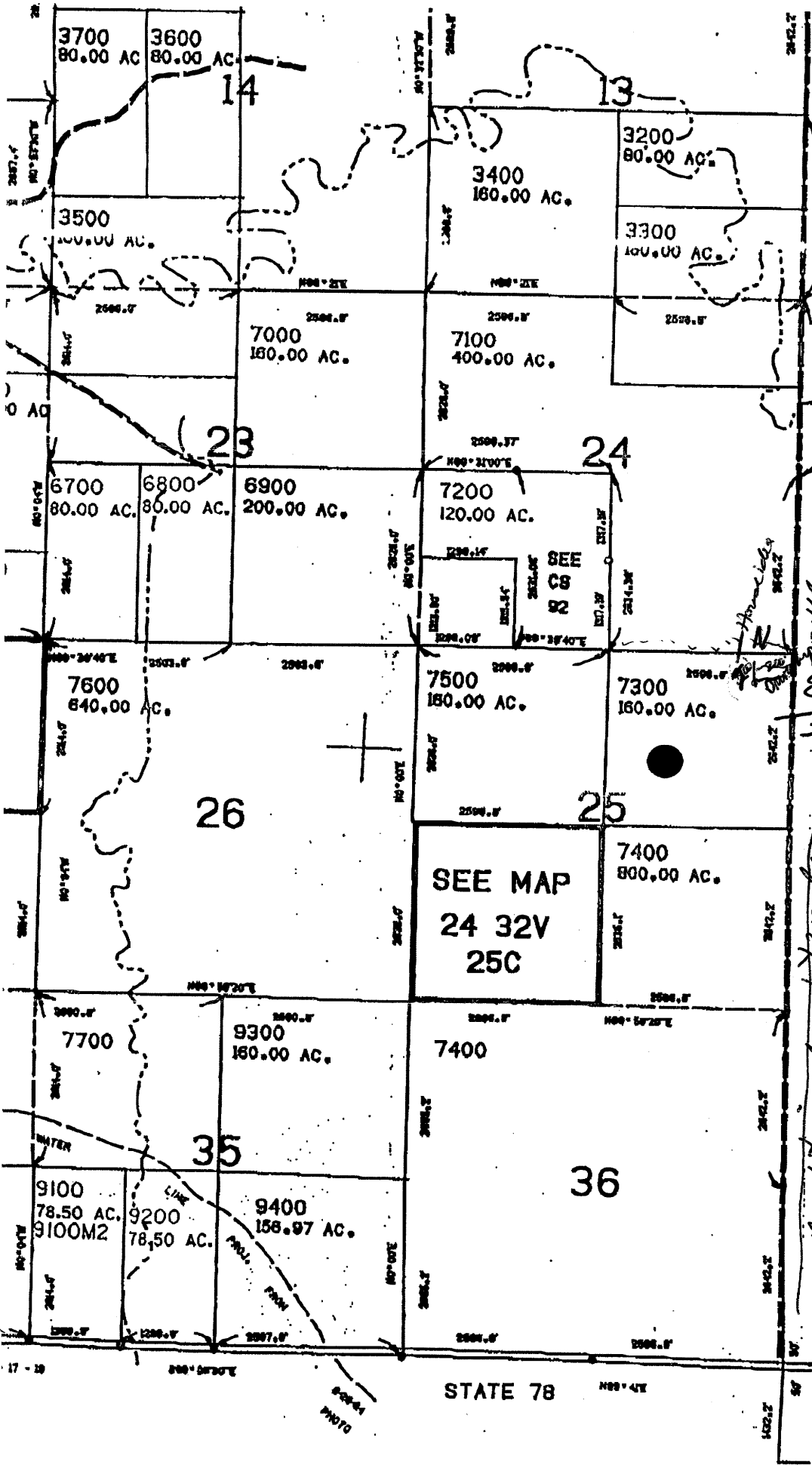
2642.70

App 50

Existing 10 gate

Newton RA

Power lines



5600M2  
 5700  
 5700MI  
 5700M2  
 8300MI

SEE MAP 24 33

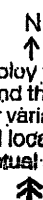
*M. Power N. Linnipower*

*Value 100' from center  
 App. 200' + 300'  
 in A.C. Survey*

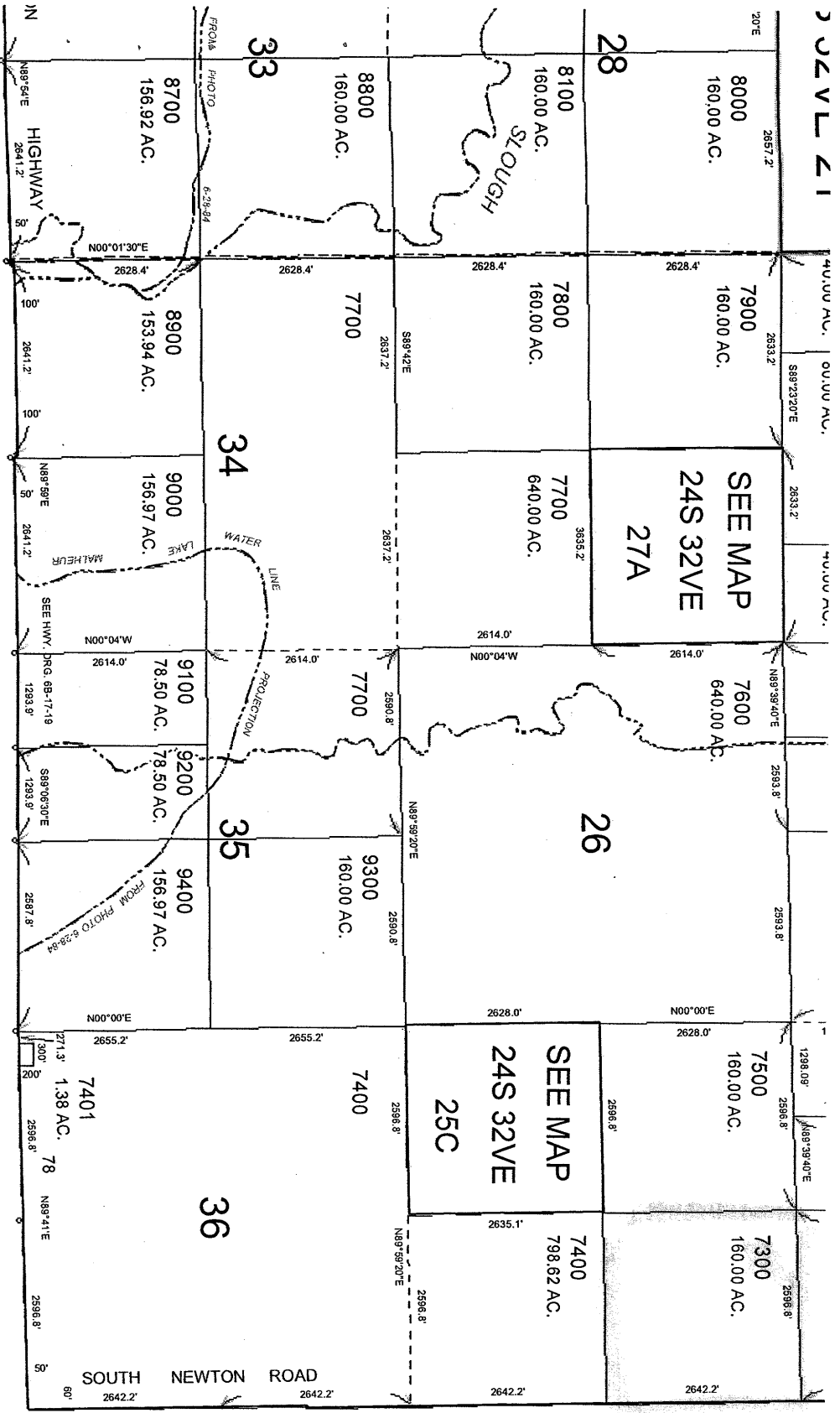
660,000

*Road to road 1/2 mile*

This sketch is solely for the purpose of property location and the company assumes no liability for variations, if any, in dimensions and location, as determined by actual survey.



24 32V  
 & INDEX



PRINTED ON  
 Jun 15, 2006  
 24S 32VE







# Oregon

Theodore R. Kulongoski, Governor

406112  
Department of Environmental Quality

300 SE Reed Market Road

Bend, OR 97702

(541) 388-6146

November 28, 2007

Eastern Region

Bend Office

Kerry & Laura Sweitz  
1111 N. Bear Creek Road  
Otis, OR 97368

**IMPORTANT DOCUMENT – PLEASE READ CAREFULLY**  
**-This is not a construction permit-**

**RE: Site Evaluation Results – Site Approval with Conditions**  
Township/Range/Section: T24 S, R32½ EWM, S25; Tax Lot ~~7300~~ 7301  
South ½ of 160 Acres – Harney County

Dear Mr. & Mrs. Sweitz:

This document is a technical report for the purpose of establishing an on-site sewage treatment and disposal (OSSTD) system on the lot or parcel referenced above. **This report is not a construction permit nor does it represent a sign-off from our Department to obtain a building permit.** In order to obtain a sign-off for a building permit a safe and adequate method of sewage disposal is to be accounted for. This accountability requires that the property owner apply for and obtain an OSSTD construction permit in accordance with this document.

On the following date(s): November 27, 2007, your site was evaluated for suitability of on-site sewage disposal systems **for a single family residence** up to four (4)-bedrooms with predicted peak flows of 450 gallons per day. If you expect your family's water use to exceed these flows, it is recommended that the system be made larger. Based on this evaluation, the following on-site sewage disposal systems are approved:

**Initial system:** Standard, 225 linear feet drainfield

**Replacement system:** Standard, 225 linear feet drainfield

Details of the site evaluation are included in the Site Evaluation Report that is enclosed. The Site Evaluation Report also includes more specific information and further conditions of site approval.

**Next Step – Applying for a Construction/Installation Permit**

Any person other than the property owner must be licensed by the DEQ to install an on-site sewage disposal and treatment system. In addition, a **PERMIT** must be obtained from this office prior to installation of the system. When you are ready to proceed with system construction the following items must be submitted along with a completed and signed application form. The necessary forms are enclosed.

**A COMPLETE AND SIGNED APPLICATION FORM**



# Site Evaluation Report for On-Site Sewage Disposal System Suitability

Site Location: T24 S, R32½ EWM, S25; Tax Lot 7300

South ½ of 160 Acres – Harney County

Applicant: Kerry & Laura Sweitz

Date(s) of Site Evaluation: November 27, 2007

DEQ Onsite Specialist: Lawrence M. Brown, REHS

Date of Report: November 28, 2007

## General Description of Site Evaluations

Sewage contains disease-causing organisms and other pollutants that can cause adverse impacts to human health and the environment. An on-site sewage disposal system must treat and dispose of sewage in a way that will not cause a public health hazard, contaminate drinking water supplies, or pollute public waters.

Proper treatment in an on-site system begins with primary treatment in the septic tank. The septic tank separates the solid particles in sewage from the liquid. The liquid that comes out of the septic tank is called effluent. The effluent may then be dispersed in the soil for further treatment or discharged into a secondary treatment device such as a sand filter or aerobic treatment unit prior to dispersal in the soil. For proper treatment, the effluent must slowly infiltrate into the underlying soil. Dissolved wastes and bacteria in the effluent are trapped or adsorbed to soil particles or decomposed by microorganisms. This process removes disease-causing organisms, organic matter, and most nutrients. Effluent that comes to the ground surface (through poor soils or other problems with the system) can be a possible health hazard because it may still contain some disease-causing organisms. Soil that drains too quickly may not give the effluent enough treatment and may result in groundwater contamination.

The purpose of the evaluation was to locate suitable soils in an area that is large enough for both the initial drainfield area and the replacement drainfield area. The criteria used for this site evaluation can be found in Oregon Administrative Rules (OAR) 340-071.

Soil test pits and other site features were evaluated during the site visit on November 27, 2007. In the site inspection, the following features were evaluated:

- Soil types - how well they drain and other evidence of good soil structure for treatment
- Depth to groundwater
- Wells located on the site or adjacent sites.
- Slopes, escarpments, ground surface variations, topography
- Creeks or springs on the site or adjacent properties
- Whether the soils have been disturbed
- Setbacks from property lines, buildings, water lines, and other utilities
- Other site features that could affect the placement of your on-site system.

8. **If the applicant selects to install chamber type products** and burrowing rodents are within the area evaluated, the applicant is to be in contact with the manufacturer for installation requirements.

Septic Tank Selection: Before purchasing a septic tank, check the DEQ's Approved Product list at <http://www.deq.state.or.us/wq/onsite/onsite.htm>, then scroll down to section "12. Approved Products and Technology". Due to some manufacture guidelines and design specifications, some tanks have "Limited Approvals" and cannot be used in certain conditions. If uncertain whether your site has such conditions, please contact your nearest DEQ office.

This site approval is valid until the system approved above is constructed in accordance with a DEQ construction permit. Technical rule changes shall not invalidate this approval, but may require use of a different kind of system. If there is a technical rule change affecting this site approval, the Department will attempt to notify in writing the current property owner as identified by the county assessor's records. The site approval runs with the land and will automatically benefit subsequent owners.

Attachment: Field Worksheet

South 1/2  
SITE EVALUATION FIELD WORKSHEET

Tax Reference T24, R32 1/2 Eum S 25 TL 7300 Evaluator Larry Brown  
 Applicant Kerry & Laura Swartz Date 11/27/07 Parcel Size 160

Depth	Texture	Soil Matrix Color and (Mottling), & Coarse Fragments, Roots, Structure, Layer Limiting Effective Soil Depth, etc.	
Pit 1 0-22"	fs1	10YR 4/3. 2-4 IP roots. 2f sbk structure	1
1 22-68"	vfs1	10YR 4/3; 1uf; 3fabk	1
1			1
1			1
Pit 2 0-21"	fs1	Top down to 20' areas of clay accumulations > Similar to Hole #1	2
2 21-70"	vfs1		2
2			2
2			2
Pit 3			3
3			3
3			3
3			3

Landscape Notes Sage, rabbit brush, greasewood, wild fringe grasses & broadleaves  
 Slope 0-1% Aspect variable Groundwater Type NA

Other Site Notes: Drainfield to be 100' from any ground water source or year-round surface water. Septic tank to be 50' from any ground water source or surface water.

SYSTEM SPECIFICATIONS

Type System: Standard Design Flow 450 gpd Disposal Field Size 225 Linear Feet  
 Initial Equal Distribution System Sizing 75' /150g. Max. Depth Absorption Facility (in) 36"/18" minimum  
 Replacement System Sizing 75' /150g. Max. Depth Absorption Facility (in) ~

Special Conditions: A detailed site development plan of proposed system construction (in area of approved test holes) is required with construction permit application. Plan must identify septic tank location, size, and manufactures name, building, effluent sewer pipe size and ID numbers, distribution or drop box manufacturer, cross section of disposal trench, gravel specifications or graveless system to be used, spacing between trenches, ground and pipe elevations throughout the system. Locate approved test holes as they relate to system placement. In addition to the above, the plan needs to locate the systems placement as it relates to existing or proposed structures, wells, waterways, roads and parking areas. We recommend a DEQ licensed sewage disposal business prepare plans and do eventual installation after DEQ construction permit issuance.

1) Filter fabric must line the top of drain media if gravel/pipe system is utilized

Comments: Burrowing rodents in area evaluated



State of Oregon  
Department of  
Environmental  
Quality

# Application for Onsite Sewage Treatment System

Department of Environmental Quality  
300 SE Reed Market Rd  
Bend, OR 97702

Phone/TTY: (541) 388-6146

Fax: (541) 388-8283

LOC ID # 302736

Date Stamp:	For DEQ Use Only:
	Date Received <u>11-23-07</u>
	Fee Paid <u>\$465.00</u>
	Receipt Number <u>33681</u>
	Application Number <u>406112</u>
	Date of 1st Response _____
	Date of 2nd Response _____
	Date of Final Response _____
	Date of Completion <u>11-23-07</u>
	Scanned <input checked="" type="checkbox"/> Data Entry <input checked="" type="checkbox"/>

### A. Property Owner Information

Name Kerry+Laura Sweitz 1111 N. Bear Creek rd. Otis, OR <sup>541-921-1019</sup>  
 Mailing Address (Street or PO Box, City, State, Zip Code) 97368 Phone Number 541-996-2259

### B. Legal Property Description

Township 24 Range 32 1/2 Section 25 Tax Lot 7300 Tax Account Number 23373 Acreage or Lot Size 160-1/2 of 80 Acres  
 County Itahey Subdivision Name \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_  
 Property Address: 66140 S. Newton Rd. Burns, OR <sup>next to</sup> Zip Code 97720

Directions to Property: Hwy. 78 east 2 1/2 miles left on S. Newton rd down 1 1/2 miles - 80 Acres before 66140 S. Newton rd. Burns, OR

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

Existing Facility:  Single Family Residence for all 3 Bedrooms on 1/2  
 Number of Bedrooms \_\_\_\_\_  
 Other \_\_\_\_\_

Proposed Facility:  Single Family Residence for all 3 Bedrooms on other 1/2  
 Number of Bedrooms \_\_\_\_\_  
 Other \_\_\_\_\_

Water Supply:  Public \_\_\_\_\_  
 Private well, existing well.  
 Name \_\_\_\_\_  
 Well, Spring (Shared) \_\_\_\_\_

### D. Type of Application

Site Evaluation  Renewal Permit  Authorization Notice for:  
 Construction Permit  Existing System Evaluation  Connecting to an Existing System Not in Use  
 Repair Permit  Permit Transfer  Replacing a Mobile Home or House with Another Mobile Home or House  
 Major  Minor  Permit Reinstatement  The Addition of One or More Bedrooms  
 Alteration Permit  Personal Hardship  
 Major  Minor  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 Kerry W. Sweitz Date 11-14-07

Applicant's Name - Please Print Legibly Kerry W. Sweitz Applicant's Phone Number 541-996-2259 Applicant's E-mail Address \_\_\_\_\_

Applicant's Mailing Address 1111 N. Bear Creek rd Otis, OR 97368

Applicant is the  Owner  Authorized Representative  Licensed Septic Installer  
 Authorization Attached  
 Installer's Name 36958



State of Oregon  
Department of  
Environmental  
Quality

Department of Environmental Quality  
Eastern Region Offices

- > **Bend:** 300 SE Reed Market Road | Bend, OR 97702  
Phone (541)388-6146, FAX (541)388-8283
- > **Pendleton/Baker City:** 700 SE Emigrant, Suite 330 Pendleton OR 97801  
Phone (541)276-4063, FAX (541)278-0168

**NOTICE AUTHORIZING REPRESENTATIVE**

I, Kerry & Laura Sweitz, have authorized  
(Property Owner/Print Name)

K.W. Sweitz Trucking & Backhoe to act as my agent in performing  
(Authorized Representative/ Print Name)

the activities necessary to obtain site evaluations, permits, and other onsite wastewater treatment program services provided by the Department of Environmental Quality 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:**

next to 66140 S. Newton rd. - 1 1/2 mile off Hwy. 78 on left hand  
Property Situs or Road Address + 1 1/2 miles in. Burns, OR

And described in the records of Harney County as: 1st 80 Acres installed 05-40-2002

Township 24 Range 32 1/2 Section 25 Map ID \_\_\_\_\_ Tax Lot #(s) 7300 Second 1/2 80  
Acres

Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ Map ID \_\_\_\_\_ Tax Lot #(s) \_\_\_\_\_

**PROPERTY OWNER:**

Printed Name: Kerry & Laura Sweitz

Signature: Kerry W. Sweitz Date: 11-14-2007

Address: 1111 N. Bear Creek rd. Phone: 541-996-2259

City, State, Zip Otis, OR 97368 Fax: 541-996-2259

E-mail Address None 541-921-1019 cell.#

**AUTHORIZED REPRESENTATIVE:**

Printed Name: K.W. Sweitz Trucking & Backhoe

Signature: Kerry W. Sweitz Date: 11-14-2007

Address: 1111 N. Bear Creek rd. Phone: 541-996-2259

City, State, Zip Otis, OR 97368 Fax: 541-996-2259 phone

E-mail Address \_\_\_\_\_ 541-921-1019 <sup>1st</sup>

X:\FORMS\Letter of Authorization.doc (bend. 4/2005)

← 2550' →

80 Acres

1 1/2 mile  
← 1275' →

← 1275' →

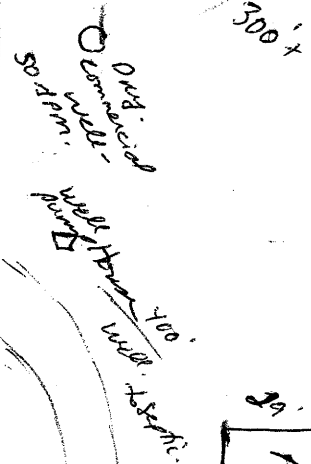
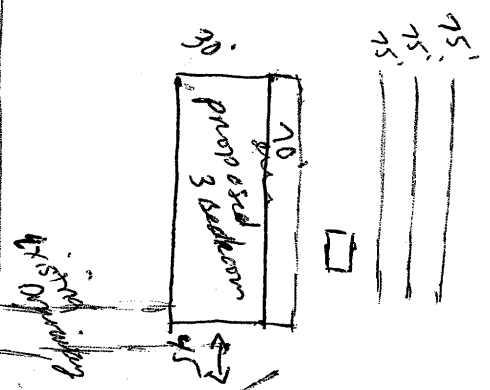
← 2550' →

← 1275' →

S. Newton rd

24-32 1/2 - 25 # 7300

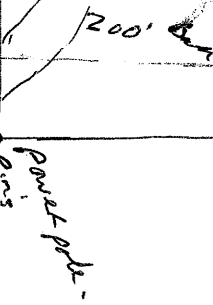
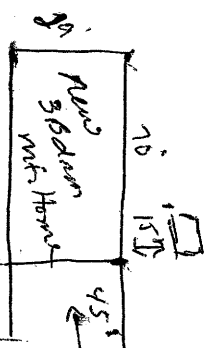
2 mile



6614 D.S. Newton

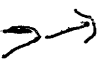
Bears, or 92200

3-75' Lines



power pole

power pole





Oregon

John A. Kitzhaber, M.D., Governor

Record # 1355

Harney Co

Department of Environmental Quality  
Eastern Region Bend Office  
2146 NE 4<sup>th</sup>, Suite 104  
Bend, OR 97701  
(541) 388-6146  
FAX (541) 388-8283

October 13, 2000

Jett Blackburn Real Estate, Inc.  
707 Ponderosa Village  
Burns, OR 97720

Re: Site Evaluation for Epling

Dear Sirs:

An *Application for Return of Fees* (copy enclosed) has been submitted to our Headquarters office in Portland. You should receive your refund within 30 days. Please be in touch with our office in Bend if you do not receive it.

If you have any questions please call.

Sincerely,

Nancy Swofford  
Administrative Assistant



State of Oregon  
Department of Environmental Quality  
2146 N.E. Fourth Street, Suite 104  
Bend, OR 97701

APPLICATION FOR RETURN OF FEES

Please provide the following information, if possible:\*

- Name of organization or individual who paid fees Jett Blackburn Real Estate  
Mailing address 707 Ponderosa Village, Burns 97720  
 by mail  
 in person
- Date fee was paid Sept. 25, 2000  
Amount of fee \$ 490.00 Receipt # 95975 Deposit # 12370
- Location where fee was submitted ER-Bend office
- If partial refund, amount requested for refund \$ \_\_\_\_\_

I hereby request that my application for a

- Site Evaluation Report (expling)       Variance  
 Permit       Other \_\_\_\_\_  
(Specify)

be withdrawn and that \$ 490.00 of the application fee be returned. I understand that a return of fees paid is subject to review by the Department to determine conformance with the refund provisions as contained in the Oregon Revised Statutes.

Nancy Snuffer \_\_\_\_\_ 10-13-00  
(Signature) (Date)

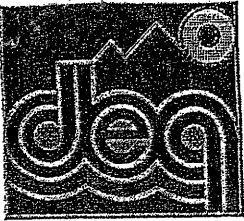
FOR MANAGEMENT USE ONLY

\*\*\*\*\*

- I certify that no field work or any other substantial work associated with the application identified above has been performed.
- The application identified above was submitted in error.
- Other explanation for return of fee Action cancelled

[Signature] \_\_\_\_\_ 10-17-00  
(Program Manager or Designee) (Date)

\*Note to office receiving application: Please supply the necessary information, if not supplied by applicant.



DEPARTMENT OF ENVIRONMENTAL QUALITY  
 EASTERN REGION BEND  
 2146 NE FOURTH SUITE 104  
 BEND, OR 97701  
 (541) 388-6146 or 1-800-452-4011

FOR OFFICE USE ONLY	
Date Received:	9-22-00
Date Completed:	9-25-00
Required Fee:	\$ 490.00
Receipt No.:	95975
Control No.:	
Record # 1355	

ON-SITE SEWAGE DISPOSAL APPLICATION

Action Cancelled  
 Send Refund App. to Blackberry

PLEASE PRINT

Norm STADELI Property Owner's name  
Roger + Bonnie Epling Applicant's Name if Different from Owner

24s Township    32 1/2 e. Range    25 Section    7300 Tax Lot #    160 Lot Size    Harney County

Subdivision Name \_\_\_\_\_ Lot # \_\_\_\_\_ Block # \_\_\_\_\_ Acreage \_\_\_\_\_

Proposed Facility:

Single Family Residence \_\_\_\_\_ Number of Bedrooms \_\_\_\_\_ Public Water Supply (Community System) \_\_\_\_\_  
 \_\_\_\_\_ Other- Specify \_\_\_\_\_  Private Water Supply  
 Specify Type well (not put in yet)  
 (Well, Spring, etc.)

Existing Facility:

\_\_\_\_\_ Single Family Residence \_\_\_\_\_ Number of Bedrooms \_\_\_\_\_ Other- Specify \_\_\_\_\_

APPLICATION FOR (CHECK ONE OF THE FOLLOWING)

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> SITE EVALUATION | AUTHORIZATION NOTICE  |
| <input type="checkbox"/> PERMIT TO CONSTRUCT        | <input type="checkbox"/> CONNECT TO AN EXISTING SYSTEM NOT IN USE |
| <input type="checkbox"/> PERMIT TO REPAIR           | <input type="checkbox"/> REPLACE M-H WITH ANOTHER OR A HOUSE      |
| <input type="checkbox"/> PERMIT FOR ALTERATION      | <input type="checkbox"/> ADDITION OF ONE OR MORE BEDROOMS         |
| <input type="checkbox"/> PERMIT FOR RENEWAL         | <input type="checkbox"/> PERSONAL HARDSHIP                        |
| <input type="checkbox"/> EXISTING SYSTEM EVALUATION | <input type="checkbox"/> TEMPORARY HOUSING                        |
| <input type="checkbox"/> PLAN REVIEW                | <input type="checkbox"/> OTHER (SPECIFY) _____                    |
| <input type="checkbox"/> OTHER (SPECIFY) _____      |   |

THIS APPLICATION WILL BE RETURNED IF IT IS NOT FILLED OUT COMPLETELY AND ACCOMPANIED BY THE APPROPRIATE FEE AND ATTACHMENTS REQUIRED IN THE GUIDANCE PACKET. YOUR SITE MUST BE PREPARED ACCORDING TO INSTRUCTIONS IN THE GUIDANCE PACKET BEFORE ACTION CAN BE TAKEN ON THIS APPLICATION.

By my signature, I certify that the information I have furnished is correct and hereby grant the Department of Environmental Quality and its authorized agent permission to enter into the above described property for the purpose of this application.

[Signature] Signature    9/19/00 Date

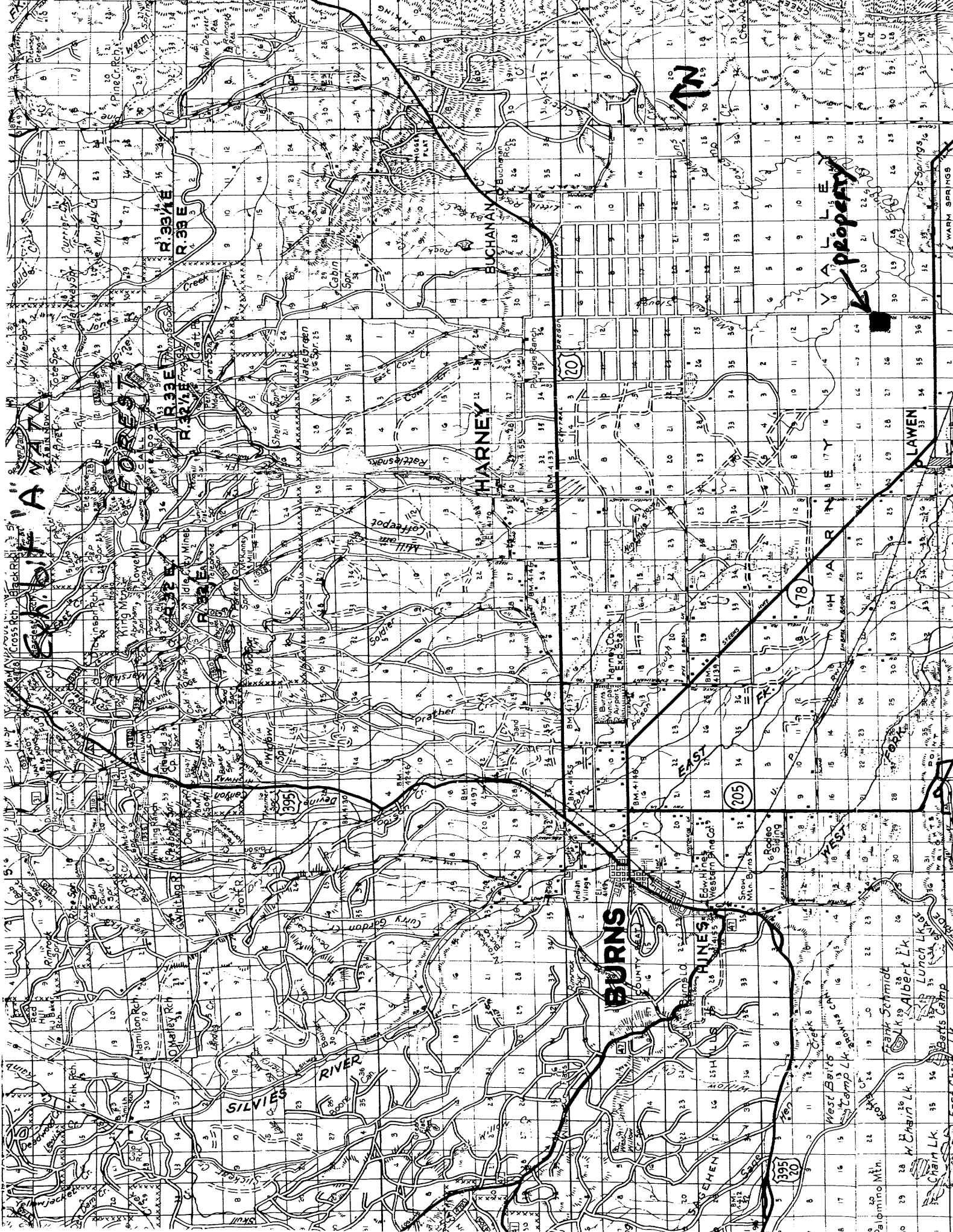
- Owner  
 Authorized Representative  
 Licensed Installer License No. \_\_\_\_\_

Owner's Mailing Address  
Norm STADELI  
4457 CASCADE HWY NE  
SILVERTON OR 97381

Applicant's Mailing Address (if different)  
Roger + Bonnie Epling  
6744 Belle River Rd  
EAST CHINA, MI 48054

Phone: 503-873-5778

Phone: 810-326-1777



PROPERTY



property



395  
20

205

78

395  
20

BURNS  
COUNTY

BURNS  
COUNTY

Chain Lk  
Lunch Lk  
Bark's Camp  
FAST TRAIL LK

W. Chain Lk  
Chain Lk  
Bark's Camp  
FAST TRAIL LK

Chain Lk  
Lunch Lk  
Bark's Camp  
FAST TRAIL LK

Chain Lk  
Lunch Lk  
Bark's Camp  
FAST TRAIL LK

8' Exhibit "A1"

7500  
160.00 AC.  
T24S. R. 32 1/2 W.M.

7300  
160.00 AC.

2628.0'

2842.2'

2596.8'

25

SEE MAP

7400  
800.00 AC.

24 32V

25C

2835.1'

2842.2'

2596.8'

Newton Rd.

2628.0'

2596.8'

N89° 59' 20" E

7400

2655.2'

2842.2'

36

1 1/2 miles

C.

7 AC.

N0° 00' E

2855.2'

2642.2'

2596.8'

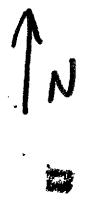
2596.8'

50'

Hwy 78 EAST of Burns

24

100'



6

EXHIBIT D

The only GATE

2596.8'

7300

160.00 AC.

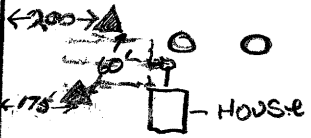
2842.2'

○ - ORANGE flagging

▲ - Test Holes

\*\*\* Fence

Road (NOT IN yet)



7400

800.00 AC.

2842.2'

Newton Rd.

↑ N

2835.1'

2596.2'