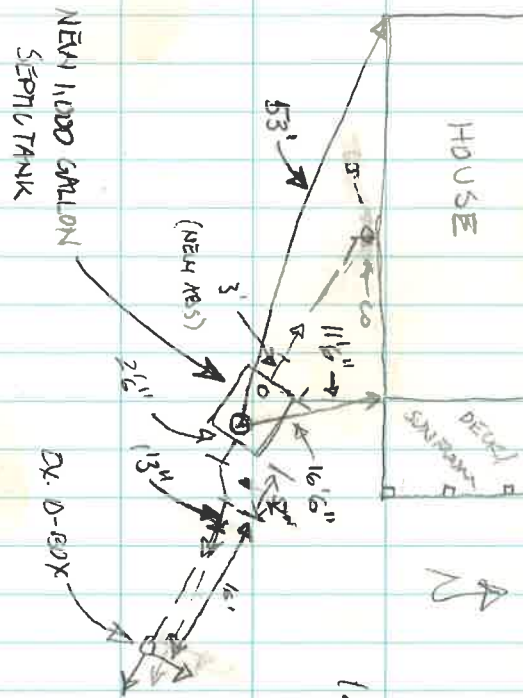




12' TANK TO D-60X

Rite in the Rain.

FIELD 15-601LT
6/17/13

1N2-11-500



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
ENVIRONMENTAL HEALTH PROGRAM**

155 North First Avenue, MS 5, Suite 160
Hillsboro, OR 97124
Telephone: (503) 846-8722 • Fax: (503) 846-3705
www.co.washington.or.us/hhs/environmentalhealth

RECEIVED
JUN 13 2013
Dept. of Health & Human Services
Environmental Health

**FINAL INSPECTION REQUEST AND NOTICE
FOR ONSITE SEWAGE DISPOSAL SYSTEM PERMITS**

Pursuant to the requirements within ORS 454.655, OAR 340-71-175, the system installer and/or the permittee must notify this office when the construction, alteration or repair of a system for which a permit was issued is completed (prior to the backfilling or covering of the installation). This office has seven business days to perform an inspection of the completed construction after the official notice date, unless this office elects to waive the inspection and authorizes the system to be backfilled earlier. **Receipt and acceptance of this completed form by this office establishes the official notice date of your request for a precover inspection. Please complete this form in its entirety. Incomplete forms will be returned. Note: If a precover waiver is requested, submission of this form is still required.**

Property Owner Name: <u>Louis Loeb</u>		Permit #: <u>13-0078</u>	
Property Site: (include city, state, and zip) <u>9195 NW Dick Rd Hillsboro, OR</u>			
Township: <u>1N</u>	Range: <u>2W</u>	Section: <u>11</u>	Tax Lot #: <u>502</u>
Date Form Submitted: <u>6/13/2013</u>			
Materials List: Identify and list all materials used in the system's construction; include amount, manufacturer size, and type (example: 40', Acme Mfg., 4" SCH 40 PVC pipe).			
<u>1000 gallon white Tank Concrete & Concrete Riser</u>			
<u>4" ABS Pipe</u>			
<u>4" ABS pipe & Fitting</u>			
<u>3/4" rock</u>			

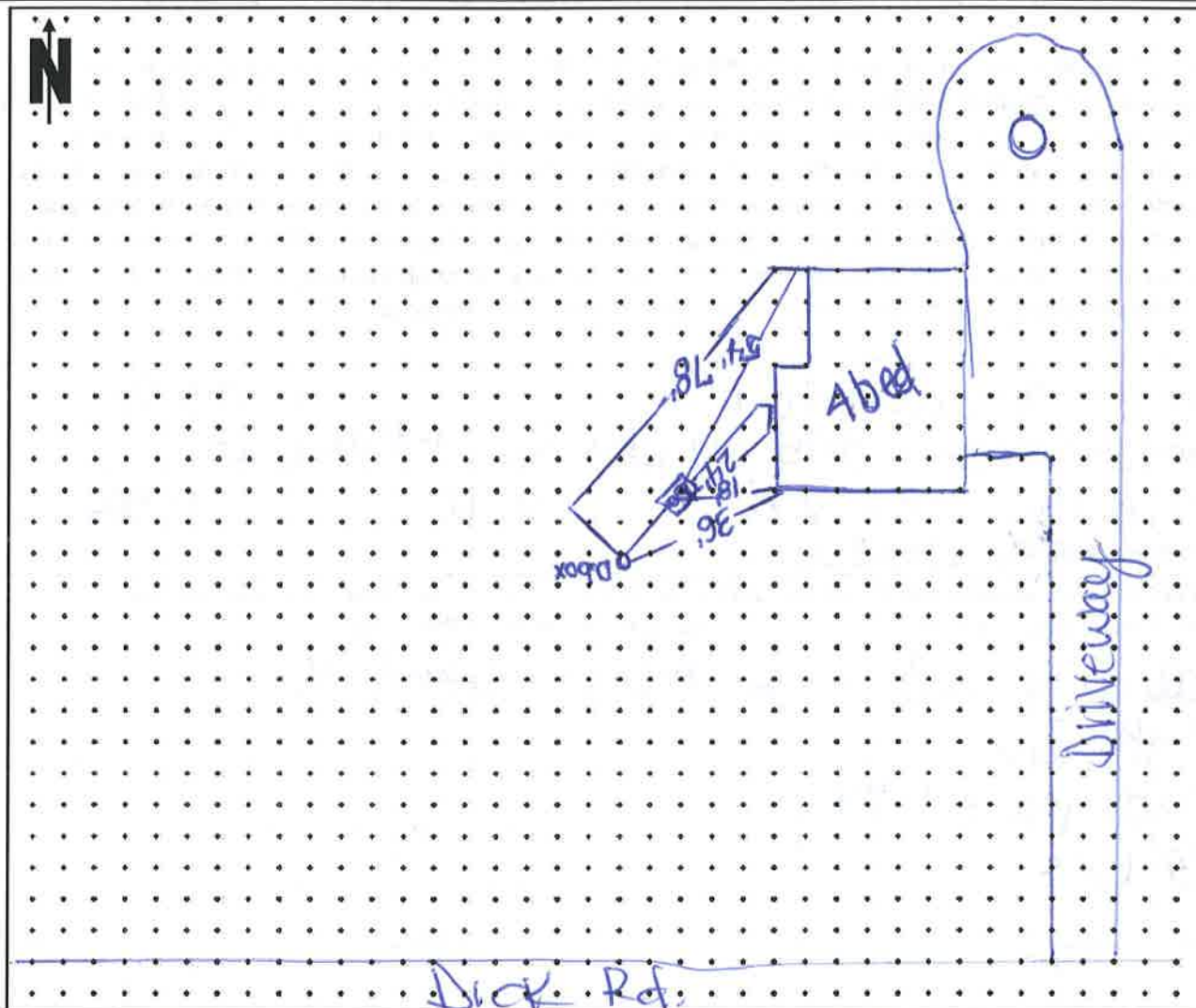
AS-BUILT DRAWING OF THE CONSTRUCTED SYSTEM

Name of Property Owner: Louis Loeb

Site Address: (include city, state, and zip) 9195 NW Dick Rd.

Township: 1N Range: 2W Section: 11 Tax Lot #: 502

Show all wells within 200 feet of system, length of each drainline, measurement to tank from two locations, distances from closest property lines to drainlines and septic tank, dwelling, outbuilding(s), and any encumbrances.



System Construction Completed By: (choose one)

☐ Property Owner

☒ DEQ Licensed Installer: Bell Construction Inc 37631

Business Name

DEQ License #

I hereby certify that the information provided on this final inspection request and notice is correct and that construction was completed in accordance with OAR Chapter 340, Divisions 71 and 73.

Owner/Installer Printed Name: Joe Bell Date: 6/13/2013

Owner/Installer Signature: Joe Bell