



WASHINGTON COUNTY OREGON

Standard or Alternative Onsite System Except for Commercial Sand Filter, RGF and ATT Systems

CERTIFICATE OF SATISFACTORY COMPLETION

NAME OF PERMITEE JIM & KAY CRUCKSHANK PERMIT # 07-0023
 Property Address 51200 NW STALEY RD, BARKS Map/Tax Lot # 2N4-5-1200
 Final Inspection Request and Notice Acceptance Date 6/18/07
 Inspection Date(s) 1st 6/21/07 2nd 8/28/07 3rd _____ 4th _____ 5th _____
 Correction Notices Issued Yes No
 System Inspected By LARRY FENSTER, REHS Name of Installer NUSSBAUMER EXCAVATING

Periodic inspections may be required for all Alternative System installations OAR 340 071 0260

All systems must be operated and maintained in compliance with OAR 340 071 and must not create a public health hazard or pollute public waters An authorization is required to change the use of or increase the projected daily flow

The area of the initial system 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 covering the area with asphalt or concrete filling cutting or other soil modification activities

In accordance with Oregon Revised Statute 454 665 this Certificate is issued as evidence of satisfactory completion of an onsite sewage disposal system at the location identified above

Issuance of this Certificate does not constitute a warranty or guarantee that this onsite sewage disposal system will function indefinitely without failure Conditions imposed as permit requirements continue for the life of the system

This Certificate of Satisfactory Completion (CSC) is valid for a period of 5 years It is valid exclusively for the septic system installed and connected to the facility as referenced herein Upon expiration of this certificate rules for Authorization Notices or Alteration Permit as outlined in OAR 340 071 0205 and 340 071 0210 apply including payment of an additional fee

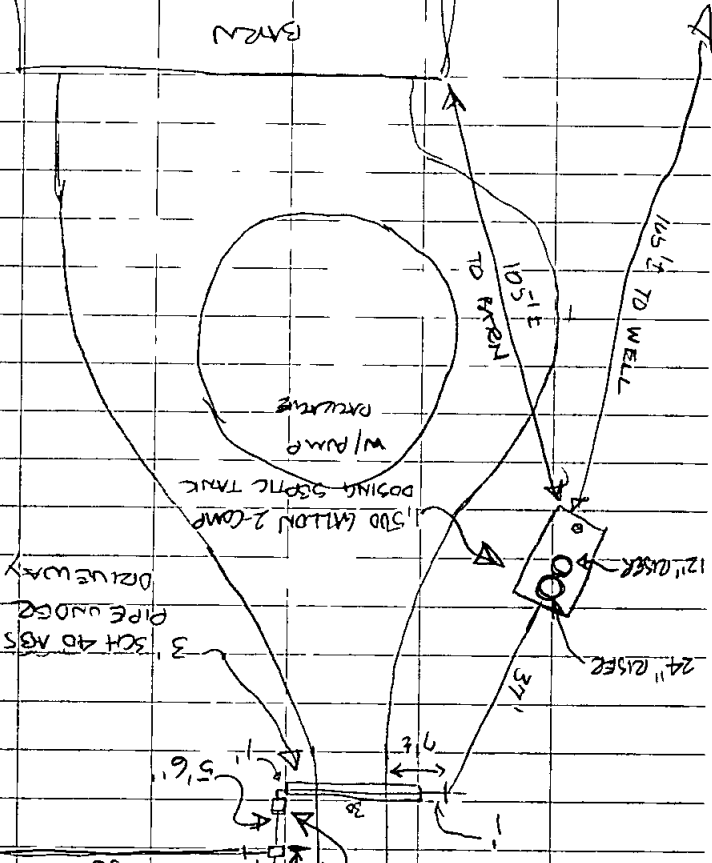
Certificate Issuance Criteria

- CSC System Inspection
- CSC Operation of Law 7 Days Notice
- CSC Pre Cover Inspection Waived Per 340 071

Larry Fenster, REHS SENIOR EHS 8/28/07
 Authorized Agent (Signature) Title Date

To be valid, this document must be signed by an Agent as defined in OAR 340-071 0100

BARN

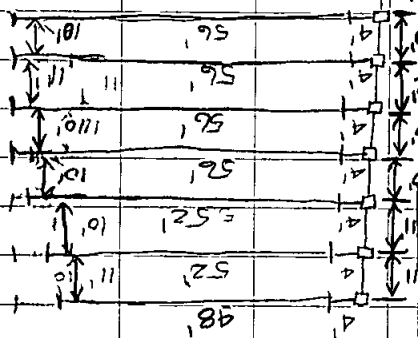


3' SCH 40 ABS
PIPE UNDER
DRIVEWAY

1' 500 GALLON 2-COMP
DOSING 500LITRE TANK

12" RISER
24" RISER
37'

5'6"
9'7"



DRIVEWAY

SPLIT BOX

NA-5-1200

109

30 AS-BUILT

STATE OF OREGON
DEPARTMENT OF ENVIRONMENTAL QUALITY
ON SITE SEWAGE SYSTEM INSTALLATION

CORRECTION NOTICE

An Inspection of this On Site Sewage System has identified the following deficiencies

- ① MUST INSTALL CONTROL PANEL, ALARM, ETC AND WIRE PROPERLY SO
A PUMP AND ALARM TEST CAN BE COMPLETED. (MUST LEAVE SPLASH
BOX UNCOVERED TO DO THIS)
- ② MUST GET CAP MATERIAL APPROVED PRIOR TO PLACEMENT OVER
DRAINFIELD (A 16" DEPTH ~~OF~~ OF THIS APPROVED CAP SOIL
MUST BE PLACED OVER DRAINFIELD AREA)
- ③ MUST GET INSPECTION OF "CAP" ONCE IT IS PLACED, LANDSCAPED
AND EROSION CONTROL METHODS ARE IN PLACE.

Under the provisions of the OREGON ADMINISTRATIVE RULES, all deficiencies listed above must be corrected within 30 days and a CERTIFICATE OF SATISFACTORY COMPLETION must be issued prior to use of this system. When corrections have been completed call for inspection.

PERMIT NO 07-0023 2N 4W 5 1200
Township Range Section Tax Lot / Acct No

INSPECTION 51200 NW STALEY ROAD; BANKS

TIME 1:45 PM

DATE 6/21/07

CONTACT LARRY FENSTER, REHS

BY *Larry Fenster*, REHS
(Signature)

503-846-8722

DO NOT REMOVE THIS NOTICE FROM SITE

~~REVISED~~ ~~VERSION~~

RECEIVED



FINAL INSPECTION REQUEST & NOTICE
For Onsite Sewage Disposal System Permits

AUG 24 2007

Washington County Department of Health & Human Services
Environmental Health
155 North First Avenue MS 5 Suite 160 Hillsboro OR 97124-3072
Telephone (503) 846-8722 www.co.washington.or.us

Pursuant to the requirements within ORS 454 655 OAR 340 71 175 the system installer and/or the permittee must notify the Department of Environmental Quality (or its authorized Agent) when the construction alteration or repair of a system for which a permit was issued is completed (prior to the backfilling or covering of the installation) The Department (or Agent) has 7 days to perform an inspection of the completed construction after the official notice date unless the Department elects to waive the inspection and authorizes the system to be backfilled earlier Receipt and acceptance of this completed form by the Department 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

Jim Cruckshank 07-0023
Printed Name of Property Owner Permit #

51200 NW Staley Rd Banks OR _____
Property Address City State Zip Code

2N 4W 05 1200
Township Range Section Tax Lot #

Date Form Submitted / 8-24-03

MATERIALS LIST

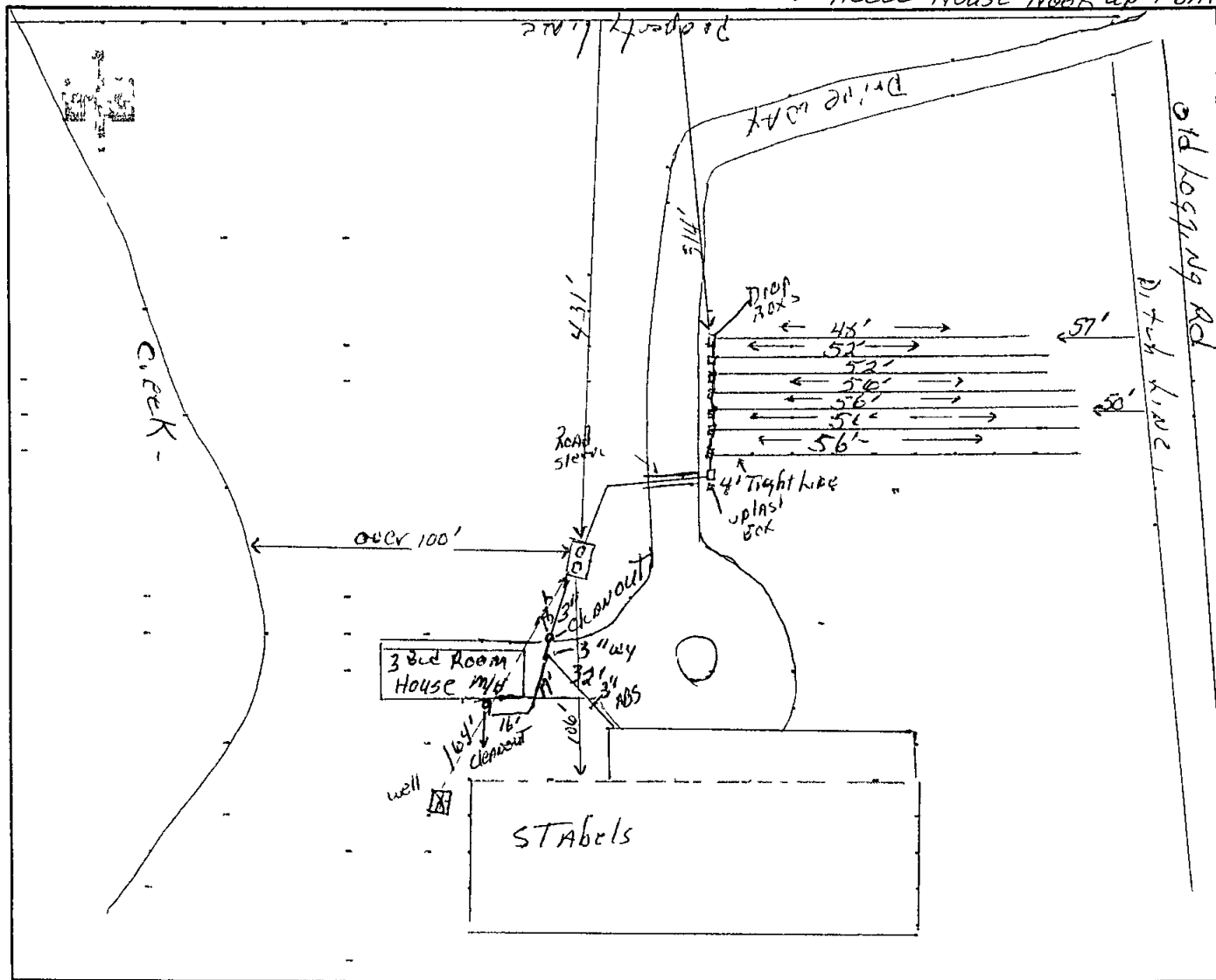
Identify and list all materials used in the system's construction include amount manufacturer size and type (Example 40 Acme Mfg 4 SCH 40 PVC pipe)

- 1- 1500 Gal 2 Compartment 143' ABS 3" J.M
- Concrete Septic Tank Waste 2- 3" clean outs ABS J.M
- 75' 1 1/2" PVC sch 40 pipe J.M
- 105' 4" PVC Tight Line J.M
- 7 Drop Box's Tuf-tite
- 1 Splash Box Tuf-tite
- 376' Infiltrator Drain Field
- 1- 12" Concrete Riser Waste
- 20' 3" Drive Way sleeve HDPE
- 1 1/2 HP Myers Pump
- 1- 3" WY ABS J.M

AS-BUILT DRAWING OF THE CONSTRUCTED SYSTEM

Show direction of North 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 outbuildings and any encumbrances

8/24/07
* Added House Hook up + BARN



SYSTEM CONSTRUCTION COMPLETED BY

Property Owner DEQ Licensed Installer Nussbaumer Exca # 38494
Business Name DEQ License #

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

[Signature] 8/24/07
Owner/Installer Signature Date



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For Onsite Sewage Disposal System Permits

RECEIVED

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JUN 13 2007

Dept of Health & Human Services
Environmental Health

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Jim Cruckshank
Printed Name of Property Owner

07-0023
Permit #

51200 NW Staley Rd
Property Address

Banks
City

OR
State

Zip Code

2N
Township

5W
Range

05
Section

1200
Tax Lot #

6/13/07
Date Form Submitted

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)

- 1- 1500 Gal 2 Compartment Concrete Septic Tank - White
- 75' 1 1/2" PVC sch 40 pipe J-M
- 105' 4" PVC Tight Line J-M
- 7 Drop Box's Tufelite
- 1- Splash Box Tufelite
- 376' Infiltrator Drain Field
- 1- 12" Concrete Riser White
- 20' 3" Drive Way sleeve HDPE
- 1 1/2 HP Myers Pump
- 1- Orenco Screen Vault

- 1- Orenco Electrical Splice Box
- 1- Orenco Float Assembly

