

# AUTHORIZATION NOTICE CHECKLIST

- Application
- Planning Clearance
- Plot Plan – Showing proposed or current home, septic layout, well, driveway, and outbuildings, water sources, escarpments etc. signed and dated.
- Existing System Description Form
- Authorizing Representative (If necessary)
- Fee

# Authorization Notice Guide for Septic Systems



State of Oregon  
Department of  
Environmental  
Quality

Click on blue text to access forms and example documents.

## **An Authorization Notice is generally required when:**

Connecting, or re-connecting, to any existing septic system.

Replacing one residence (mobile, manufactured or modular home, recreational vehicle, stick-built home) with another structure.

Note: an Authorization Notice is not necessary when replacing a mobile home or RV with a similar mobile home or RV located within a lawful mobile home or RV park.

Rebuilding, or replacing, any structure. This includes structures destroyed by fire or other natural disaster.

Adding bedrooms, or additional apartment facilities, to an existing dwelling. *Sometimes*, an Authorization Notice is not needed when making additions to a home. Check with an onsite agent to find out if you will need an Authorization Notice for your proposed additions.

**Personal Hardship:** Connecting an additional dwelling to an existing system. This allows temporary housing, for a family member suffering from personal hardship or for an individual providing care for such person, for up to four years.

Personal hardship may be authorized for up to four years, and may be granted for additional extensions. Temporary placement may be authorized for a family member in need for up to 2 years maximum, no extension allowed. Approval by your local, county and/ or city planning department is required.

Any proposed change in use results in an increase to either sewage flow or waste strength.

Some of the above situations may require changes to the septic system. You will be advised on how to proceed if, based on your application, it is determined that you will have to change your septic system.

An Authorization Notice is usually not needed if you are adding more square footage, garages etc. and not increasing the number of bedrooms. However, a local building or planning department may require you to obtain a DEQ land use review.

## **Items required to process your application:**

1. **Application form and fee:** Please make sure your [application](#) is complete. Incomplete applications will be returned.
2. **[Vicinity/ Locator map](#):** Please provide your address or specific GPS coordinates and a link to the Google map. On large parcels or in remote areas where the site is difficult to find, please upload to your application record a drawing that shows how to find your site and provide flagging at the entrance to your property.
3. **[Detailed Site Plan](#):** Draw and upload a site plan from actual measurements of the existing septic tank and disposal field (leach field). Draw and upload any proposed improvements or changes, for example new bedroom additions or mobile home placement etc. In addition, show the location of all existing and proposed buildings, roads, driveways, property lines, easements, springs, wells, lakes, ponds, rivers, streams, drainage areas and other physical features.
4. **[Tax lot map](#):** This map may be obtained at the local county assessor's office or planning department. Tax Lot maps may also be obtained [Online](#).
5. **[Notice Authorizing Representative form](#):** Required if someone other than the property owner is submitting the application.
6. **[Land Use Compatibility Statement or County planning approval](#):** This must be signed by your county and/or city planning department.

## **Onsite Program**

165 E. Seventh Ave.  
Suite 100  
Eugene, OR 97401  
Phone: 541-687-7338  
800-844-8467  
Fax: 541-686-7551  
Contact: Randy Trox  
[www.oregon.gov/DEQ](http://www.oregon.gov/DEQ)

DEQ is a leader in restoring, maintaining and enhancing the quality of Oregon's air, land and water.

7. **Existing Septic System Description:**

Fill out the Existing Septic System Description form, as completely as possible, and to the best of your knowledge.

Site preparation: Call DEQ before uncovering any portion of your system, if your system was installed under a permit, and a Certificate of Satisfactory Completion was issued. Otherwise, uncover the septic tank lids (do not remove the lids), the inlet and outlet connections to the tank, and the distribution box or drop boxes. Stake the ends of the disposal trenches.

Be careful not to damage any system components when digging. We suggest the use of a metal or fiberglass rod for locating the tank and boxes before digging.

Other information: Please include your name, township, range, section, and tax on all maps and drawings that you submit.

8. **Apply online.** You can also mail or hand-deliver the [application](#), fee and attachments to the appropriate DEQ regional office.

Documents can be provided upon request in an alternate format for individuals with disabilities or in a language other than English for people with limited English skills. To request a document in another format or language, call DEQ in Portland at 503-229-5696, or toll-free in Oregon at 800-452-4011, ext. 5696; or email [deqinfo@deq.state.or.us](mailto:deqinfo@deq.state.or.us).

**Alternative formats**



**Application for Onsite Sewage Treatment System**

Send this application to:  
**Curry County Community Development**  
 94235 Moore Ste, Suite 113  
 Gold Beach, OR 97444  
 or  
[septicpermits@co.curry.or.us](mailto:septicpermits@co.curry.or.us)

For Curry County Use Only:		Date Stamp
Date received	_____	
Fee paid	_____	
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	

**A. Property Owner Information**

\_\_\_\_\_  
 Name Mailing Address (Street or PO Box, City, State, Zip Code) Phone Number

**B. Legal Property Description**

\_\_\_\_\_  
 Township Range Section Tax Lot Tax Account Number Acreage or Lot Size

\_\_\_\_\_  
 County Subdivision Name Lot Block

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

**Directions to Property:** \_\_\_\_\_

**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 type="checkbox"/> Single Family Residence	<input type="checkbox"/> Public _____ Name
Number of Bedrooms _____	Number of Bedrooms _____	<input type="checkbox"/> Private _____ Well, Spring, Shared
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	

**D. Type of Application**

<input 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"/> Major <input type="checkbox"/> Minor	<input type="checkbox"/> Permit Transfer	<input type="checkbox"/> Replacing a Mobile Home or House with Another Mobile Home or House
<input type="checkbox"/> Alteration Permit <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"/> 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 Curry County and their authorized agents' permission to enter onto the above described property for the sole purpose of this application.

\_\_\_\_\_  
 Signature Date

\_\_\_\_\_  
 Applicant's Name – Please Print Legibly Applicant's Phone Number Applicant's E-mail Address

\_\_\_\_\_  
 Applicant's Mailing Address

Applicant is the  Owner  Authorized Representative  Licensed Septic Installer

Authorization Attached \_\_\_\_\_  
 Installer's Name



# EXISTING SEPTIC SYSTEM DESCRIPTION

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

- 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) \_\_\_\_\_
- When was your septic system installed? \_\_\_\_\_  
(Date) (Permit Number)
- Tank material:  Concrete     Steel     Plastic or Fiberglass     Unknown
- Septic tank volume (in gallons) \_\_\_\_\_
- When was the septic tank last pumped? \_\_\_\_\_ Attach receipt if available.
- Number of disposal trenches \_\_\_\_\_
- Total length of disposal trenches (in feet) \_\_\_\_\_
- Do you propose to use the existing septic system? Yes  No
- Is your septic system currently in use? Yes  No  If no, date of last use \_\_\_\_\_
- If the septic system currently serves a dwelling:  
How many bedrooms are in the dwelling? \_\_\_\_\_ How many people occupy the dwelling? \_\_\_\_\_
- How many bedrooms will be in the proposed dwelling? \_\_\_\_\_ How many occupants? \_\_\_\_\_
- If the septic system serves a business:  
How many total employees are there? \_\_\_\_\_  
Type of business \_\_\_\_\_
- Is there a proposed change of use of your structure (home or business)? Yes  No   
If yes, please explain \_\_\_\_\_
- 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.

\_\_\_\_\_  
(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: \_\_\_\_\_



## NOTICE AUTHORIZING REPRESENTATIVE

I, \_\_\_\_\_, have authorized \_\_\_\_\_ to act as my  
(Property Owner/Print Name) (Authorized Representative/Print Name)  
agent in performing the activities necessary to obtain all onsite wastewater treatment program services provided by the Curry/Josephine 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 and I authorized Curry/Josephine County Onsite Septic agents to conduct required business activities on said property.

### PROPERTY IDENTIFICATION:

\_\_\_\_\_  
(Property Situs or Road Address)

And described in the records of \_\_\_\_\_ County as:

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

### PROPERTY OWNER:

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

### AUTHORIZED REPRESENTATIVE:

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_