

# CONSTRUCTION APPLICATION

## CHECKLIST

- Application
- Planning Clearance
- Statement of Site Status (If site eval was done in the last 5 years)
- Detailed plot plan that shows how the system will be laid out in addition to proposed or current home, well, driveway, and outbuildings, water sources, escarpments etc., signed and dated.
- Maintenance Agreement signed by certified maintenance provider and homeowner. \*Only if Alternative Treatment Technology (ATT), sand filter, pressure distribution & recirculating gravel systems.
- Authorizing Representative (If necessary)
- Fee

# Construction/Installation Permit Guide for Septic Systems



State of Oregon  
Department of  
Environmental  
Quality

## 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.

Click on blue links below to access forms and example documents.

## Items required to process your application:

1. Application form and fee: Please make sure your [application](#) is complete. Incomplete applications cannot be accepted and 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. A tax lot map obtained from the local county assessor's or planning department. Tax Lot maps are [online](#).
4. [Statement of Site Status](#): To be signed by the property owner or applicant, certifying there have been no changes at the site since DEQ performed the original site evaluation.
5. [Land Use Compatibility Statement or County planning approval](#): This must be approved and signed by your county and/or city planning department.
6. [Notice Authorizing Representative form](#): Required if someone other than the property owner is submitting the application
7. [Detailed Construction/ Installation Plan - Equal Distribution](#):  
[Detailed Construction/ Installation Plan - Serial Distribution](#):
  - Your Site Evaluation Report shows the approved drainfield location, the approved area as described in your site evaluation report and other construction details.
  - Draw a site plan, from actual measurements, that shows the location of all buildings, roads, driveways, property lines, easements, springs, wells, lakes, ponds, rivers, streams, water lines, drainage areas and other physical features. Make sure you show the location of the septic tank, distribution box or drop boxes, disposal lines and drainfield.
  - The person installing the septic system should use a transit or laser level to provide the following measurements: the elevations of the building sewer line, the inlet and outlet of the septic tank and the distribution box or drop boxes. Also include the number and length of the disposal trenches and show the replacement/ repair area.
  - If your approved system requires a pump, please upload or provide a pump curve (hydraulic profile) for each pump and a cross section of the septic tank.
  - If your approved system is a sand filter, please upload or provide a pump curve (hydraulic profile) for each pump, a cross section of the septic tank, and sand filter plans, top and side views, and current sieve analyses.
8. Submit a completed service contract with a certified maintenance provider with your Construction/ Installation permit application for the following types of septic systems: sand filter, pressurized distribution, alternative treatment technology, or re-circulating gravel filter.

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

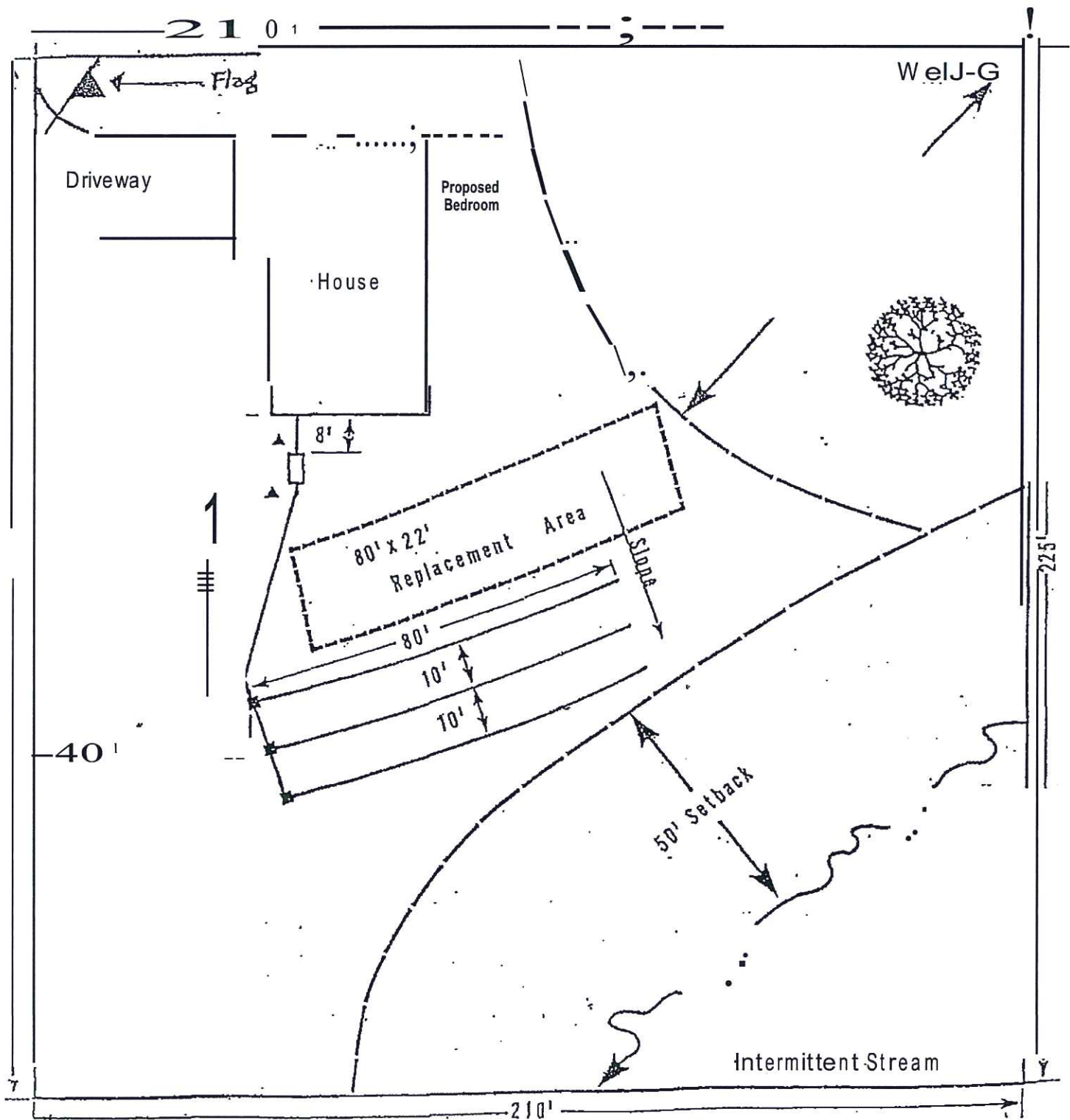
10. Apply online. You can also mail or hand-deliver the [application](#), fee and attachments to the appropriate DEQ regional office.

### **Accessibility**

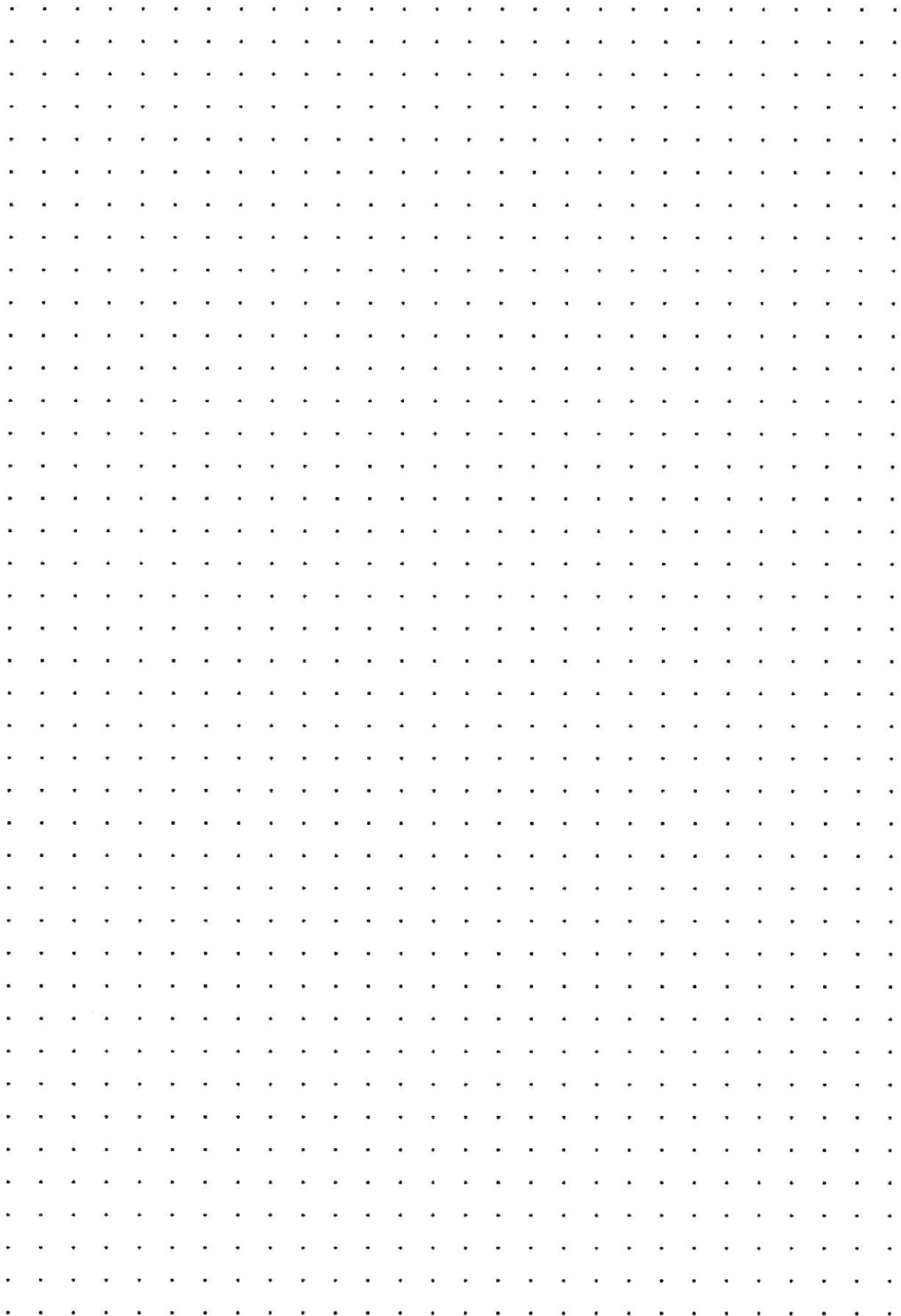
Documents can be provided upon request in an alternate format for individuals with disabilities or in a language other than English for people with limited English skills. To request a document in another format or language, call DEQ in Portland at 503-229-5696, or toll-free in Oregon at 800-452-4011,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

PLANS FOR CONSTRUCTION OF A SEPTIC SYSTEM MUST INCLUDE THE  
INFORMATION SHOWN IN THIS EXAMPLE.  
DEFICIENT PLOT PLANS WILL BE RETURNED.

## DETAILED SITE PLAN



SITE PLAN



Application # \_\_\_\_\_



## 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

#### Existing Facility:

☐ Single Family Residence

Number of Bedrooms \_\_\_\_\_

☐ Other \_\_\_\_\_

#### Proposed Facility:

☐ Single Family Residence

Number of Bedrooms \_\_\_\_\_

☐ Other \_\_\_\_\_

#### Water Supply:

☐ Public \_\_\_\_\_  
Name \_\_\_\_\_

☐ Private \_\_\_\_\_  
Well, Spring, Shared \_\_\_\_\_

### D. Type of Application

☐ Site Evaluation

☐ Construction

☐ Permit Repair

☐ Major ☐ Minor

☐ Alteration Permit

☐ Major ☐ Minor

☐ Renewal Permit

☐ Existing System  
Evaluation

☐ Permit Transfer

☐ Permit Reinstatement

☐ Authorization Notice for:

☐ Connecting to an Existing System Not in Use  
☐ Replacing a Mobile Home or House with Another  
Mobile Home or House

☐ The Addition of One or More Bedrooms

☐ Personal Hardship

☐ 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 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



## Statement of Site Status

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Township: \_\_\_\_\_ Range: \_\_\_\_\_ Section: \_\_\_\_\_ Tax Lot: \_\_\_\_\_

County: \_\_\_\_\_

I certify by my signature the area for the initial and replacement onsite sewage disposal system has not been cut, filled or altered in any way since the original site evaluation was performed by the Department of Environmental Quality.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_



## 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: \_\_\_\_\_