

C-AUTHORIZATION NOTICE GUIDE

AN AUTHORIZATION NOTICE IS REQUIRED;

- a) **When connecting or re-connecting to an existing on-site sewage disposal system.**
There is an exception when placing into service a previously unused system for which a Certificate of Satisfactory Completion has been issued within 5 years. This determination is made by review of the onsite completed construction permit's office records and confirmation that a Certificate exists.
- b) **When replacing one residence (mobile, manufactured or modular home, or commercial stick built home) with another or with any other structure.** Again there is an exception when a mobile home or RV is to be replaced with a similar mobile home or RV which is located within a lawful Mobile Home or RV Park.
- c) **When rebuilding or replacing any structure, even if destroyed by fire or other natural disaster.**
- d) **When adding bedrooms or additional apartment facilities to an existing dwelling.**
- e) **When connecting a second dwelling.** Allows temporary housing for a family member suffering medical hardship for up to 5 years or till cessation of hardship-whichever comes first-can be extended after submitting a new application.
- f) **When adding a residential commercial business that will increase either sewage flow or effluent waste strength.** You **MAY** be required to file with DEQ-depend on waste strength and flow. Will be determined at the time of application.
- g) **Any proposed change in use that will result in an increase to either the quantity or strength of the sewage waste flows into the existing system.**

Some of the above situations may require changes to the sewage disposal system. If, based on your application, we find that you will have to change your sewage disposal system, we will advise you on how to proceed. Some of the above situations may also require that you apply through the DEQ, Bend Office.

An Authorization Notice is usually **NOT** needed if you are adding more square footage, bathrooms, garages, kitchens, etc. to your structure and are **NOT** increasing the number of bedrooms, however the planning or building department may require you to get a statement from us concerning your sewage disposal system. If so, please refer to the Existing System Evaluation Report Guide.

ITEMS NEEDED TO PROCESS YOUR APPLICATION:

1. **Complete Application Form and Fee:** Incomplete application will be returned.
2. **Existing Sewage Disposal System Description:** Fill out the existing sewage disposal system description form. Check to see if any prior permits are on file, Include a site plan showing the existing septic tank, drain field location and area where the improvement will go.
3. **Site Preparation:** If the sanitarian wants you to uncover anything on the property, he will give you a call.

Mail, hand deliver or email the application, fee (we can call for credit card payment) and attachments to:

Crook County Community Development
Onsite Division
300 NE 3rd St., Rm. 12
Prineville, OR 97754

Onsite@CrookCountyor.gov



State of Oregon
Department of
Environmental
Quality

Crook County Onsite Sewage Treatment System Application

300 NE 3rd St, Rm 12
Prineville, Or 97754
541-447-3211



For DEQ Use Only:

Date received _____
Fee paid _____
Receipt number _____
Application number _____
Date of 1st response _____
Date of 2nd response _____
Date of final response _____
Date of completion _____

Scanned

Data Entry

Date Stamp

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 the Department of Environmental Quality and its 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 _____

Department of Environmental Quality
LAND USE COMPATIBILITY STATEMENT (LUCS)
for Onsite Wastewater Treatment System Permits



WHAT IS A LUCS? The Land Use Compatibility Statement is the process used by the DEQ to determine whether DEQ permits and other approvals affecting land use are consistent with local government comprehensive plans. The LUCS form is included in the onsite permit application approval packet.

WHY IS A LUCS REQUIRED? Oregon law requires state agency activities that impact land use be consistent with local comprehensive plans and land use regulations. Oregon Administrative Rules (OAR) Chapter 340, Division 18 identifies agency activities or programs that significantly affect land use and the process for ensuring consistency.

WHEN IS A LUCS REQUIRED? A LUCS is required for nearly all DEQ permits, registrations under general permits, and certain other approvals and certifications that affect land use. **This form only applies to onsite wastewater treatment system permits and activities.** *WPCF applicants must complete DEQ's General LUCS form.*

HOW TO COMPLETE A LUCS:

Step	Who Does It	What Happens
1	Applicant	Completes Section 1 of the LUCS and submits it to the appropriate city or county planning office.
2	City or County Planning Office	Completes Section 2 of the LUCS by determining if the activity or use meets all local planning requirements, and returns to the applicant the signed and dated LUCS form <u>with findings of fact for any local reviews or necessary planning approvals.</u>
3	Applicant	Includes the completed LUCS with <u>findings of fact</u> with the DEQ permit or approval submittal application to the DEQ.

A permit cannot be issued if the proposed facility does not comply with all applicable local land use requirements. The applicant is responsible for working with the local planning office to comply with land use requirements.

WHERE TO GET HELP: Questions about the LUCS process can be directed to the region staff responsible for processing the onsite permits. Headquarters and regional offices may also be reached using DEQ's toll-free telephone number 1-800-452-4011.

CULTURAL RESOURCES PROTECTION LAWS: Applicants involved in ground-disturbing activities should be aware of federal and state cultural resources protection laws. *ORS 358.920 prohibits the excavation, injury, destruction, or alteration of an archeological site or object, or removal of archeological objects from public and private lands without an archeological permit issued by the State Historic Preservation Office. 16 USC 470, Section 106, National Historic Preservation Act of 1966 requires a federal agency, prior to any undertaking, to take into account the effect of the undertaking that is included on or eligible for inclusion in the National Register. For further information, contact the State Historic Preservation Office at 503-378-4168, extension 232.*

SECTION 1 - TO BE COMPLETED BY APPLICANT (may be filled in electronically by tabbing to each field)

1. Applicant Name/Property Owner: _____

Mailing Address: _____

City, State, Zip: _____

Telephone: _____

2. Property Information:

County: _____ Tax Lot No.: _____

Township: _____ Range: _____ Section: _____

Physical Address: _____

Block: _____ Lot: _____

Subdivision Name (if applicable): _____

3. This proposed facility is for:

☐ An individual, single-family dwelling.

☐ Other. Describe the type of development, business, or facility and the provided services or products: _____

4. Permit or approval being requested:

☐ Construction-Installation permit for: ☐ New Construction ☐ Repair ☐ Alteration

☐ Non-water-carried facility requests (for example, pit privy/vault toilet for campgrounds).

☐ Authorization Notice for: ☐ Replacement of dwelling ☐ Bedroom addition

☐ Other changes in land use involving potential sewage flow increases

SECTION 2 - TO BE COMPLETED BY CITY OR COUNTY PLANNING OFFICIAL

5. Property Zoning: _____ Zoning Minimum Parcel Size: _____

6. The facility is located: ☐ inside city limits ☐ inside UGB ☐ outside UGB

If inside UGB, the proposed facility is subject to:

☐ City jurisdiction ☐ County jurisdiction ☐ Shared City/County jurisdiction

7. Does the proposed facility comply with all applicable local land use requirements: ☐ Yes ☐ No

If you answered "Yes" above, was this compliance based on:

☐ Outright compliance with local comprehensive plans and land use requirements (provide a citation to the applicable provisions)

☐ Conditional approval (provide findings and citation or attach a copy of the applicable land use decision)

☐ Measure 49 waiver (provide Department of Land Conservation and Development approval number)

Either provide reasons for affirmative compliance decision or attach findings of fact: _____

8. Planning Official Signature: _____

Print Name: _____ Title: _____

Telephone: _____ Date: _____

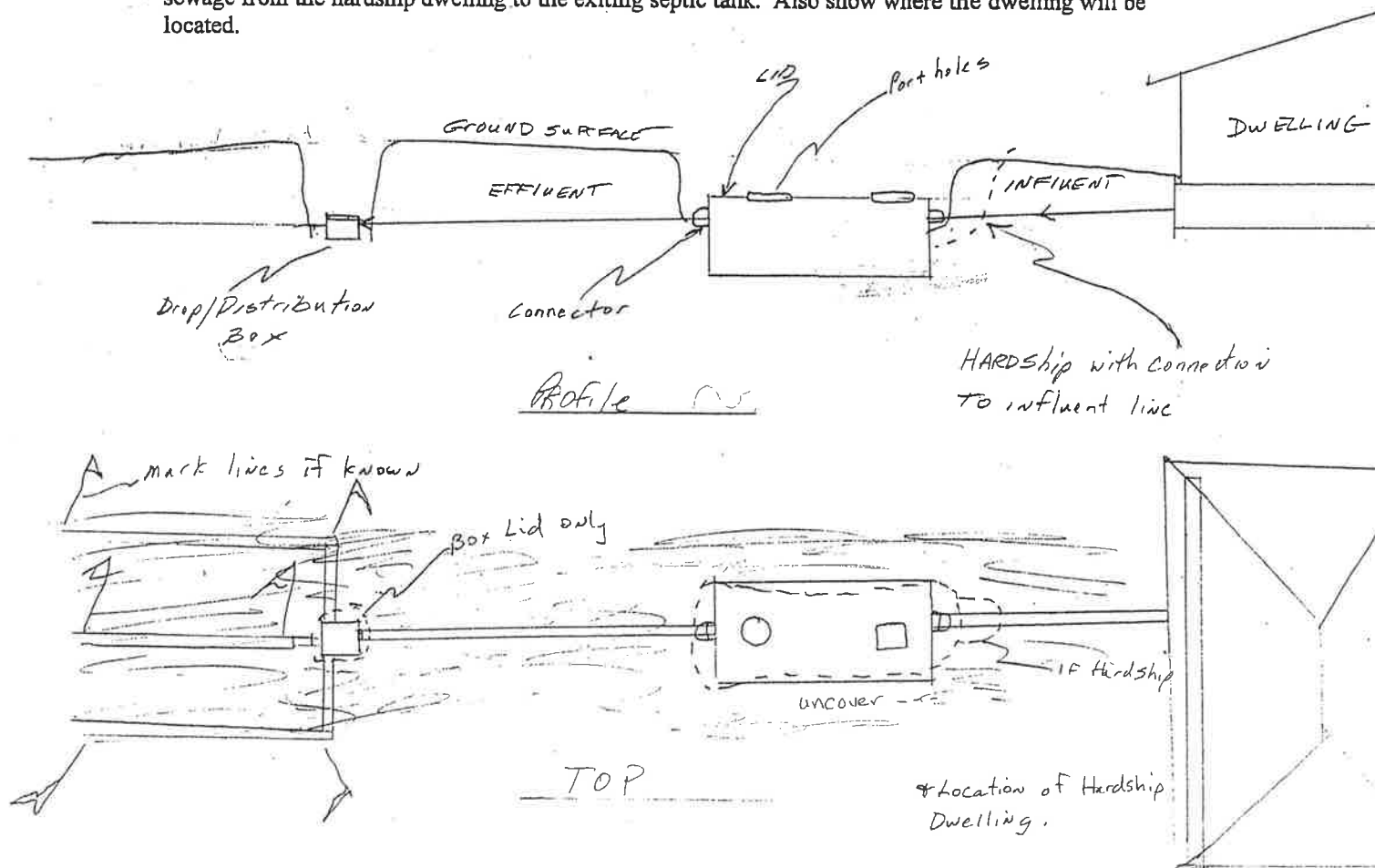
Authorization/Repair/Hardship Site Preparation

The following guidance is provided to assist you in preparing the site for the visit of the on-site system evaluator. The Environmental Health permit technician will be able to tell you if you need to follow these guidelines.

1. Uncover the top of the tank lid so that the evaluator can gain access to the manhole/lid inspection port/s. He will need to determine if the tank is in sound condition and not rusted out or cracked. He will also look at the scum and sludge layer to determine if the tank needs pumping. He will calculate the size to determine if it meets current code requirements (1,000 gallon minimum).
2. Uncover the outlet end of the tank where it connects to the pipe leaving the tank. This is needed to determine what type connection was made and to determine if it is still connected.
3. If an authorization is for a hardship to connect to the existing tank then uncover the line into the septic tank to determine the size and type.
4. Try to determine where the drop box or distribution box is and where it connects to the drain field, and uncover the lid so that observation can be made in the box.
5. Mark the area where you think the drain field lines are. Do not uncover the drain field lines.
6. Mark any other gray water system or drainage system from the dwelling that is not connected to the septic tank, and drain field.

When uncovering the components of the system be careful and try not to damage any of the system parts.

If you are applying for a hardship dwelling show on the plot plan how you think you are going to get the sewage from the hardship dwelling to the existing septic tank. Also show where the dwelling will be located.





EXISTING SEPTIC SYSTEM DESCRIPTION

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

1. 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) _____
2. When was your septic system installed? _____
(Date) _____ (Permit Number) _____
3. Tank material: ☐ Concrete ☐ Steel ☐ Plastic or Fiberglass ☐ Unknown
4. Septic tank volume (in gallons) _____
5. When was the septic tank last pumped? _____ Attach receipt if available.
6. Number of disposal trenches _____
7. Total length of disposal trenches (in feet) _____
8. Do you propose to use the existing septic system? Yes ☐ No ☐
9. Is your septic system currently in use? Yes ☐ No ☐ If no, date of last use _____
10. If the septic system currently serves a dwelling:
How many bedrooms are in the dwelling? _____ How many people occupy the dwelling? _____
11. How many bedrooms will be in the proposed dwelling? _____ How many occupants? _____
12. If the septic system serves a business:
How many total employees are there? _____
Type of business _____
13. Is there a proposed change of use of your structure (home or business)? Yes ☐ No ☐
If yes, please explain _____
14. 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 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 and I authorized DEQ 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: _____



SITE PLAN FOR CONSTRUCTION / INSTALLATION

Site Plan Must Be Current

Property Owner: _____ Site ID: _____

Site Address: _____ City: _____ County: _____

Township: _____ Range: _____ Section: _____ Tax Lot: _____

Acres: _____ Subdivision: _____ Lot: _____ Block: _____

Scale: 1 Square = _____ Feet

SITE PLAN MUST SHOW ALL PROPERTY LINES AND DIMENSIONS

I certify that the above information is accurate to the best of my knowledge. This site plan is based on actual measurements and conditions on the site.

I am the ☐ Owner or ☐ Authorized Agent. Name (please print): _____

Signature: _____ Date: _____

Site Plan Instructions

Failure to include all information in this checklist could result in a delay of your permit or application review.

The site plan map must be drawn on white paper that is at least 8 1/2" x 11" and printed or drawn in greyscale, or black and white. Multiple pages may be used. One electronic copy should be provided (.pdf format is preferred).

Distances, dimensions and other measurements must be indicated in inches, feet and/or miles.

GENERAL INFORMATION

- ☐ Owner's name
- ☐ Assessor's map and tax lot number
- ☐ North arrow
- ☐ Scale - using standard scale (1"=40') and provide detail.
- ☐ Show and label the true shape and dimensions of the parcel or development site.
- ☐ Label all roads, easements and driveways.
- ☐ Label all natural features on the property such as water sources, irrigation, cultural resources, wetlands, dry gulches (intermittant streams) and terrain features such as slope direction.
- ☐ Show road approach and label the distance from at least one property line to the intersection of the driveway and the road (also known as the apron area).

DEVELOPMENT

- ☐ Label existing and proposed structures and indicate if any structures will be removed.
- ☐ Label distances from existing and proposed structures to property lines.
- ☐ Show location of all existing and proposed utilities (water, power, gas, etc.).
- ☐ Show location of existing sewage facility or public sewer connection (septic tank, effluent lines, drain field, test pits etc.) and related easements.
- ☐ Label distance from natural features (such as public or private water sources, irrigation, cultural resources, wetlands, dry gulches and intermittant streams) to existing and proposed structures.



Community Development Department

300 NE 3rd Street, Room 12

Prineville, OR 97754

(541) 447-3211

Planning Department: plan@crookcountyor.gov

Building Department: bld@crookcountyor.gov

Septic Department: onsite@crookcountyor.gov

Website: www.co.crook.or.us

