

SKAGIT COUNTY PERMIT CENTER
County Administration Building, Room 204
700 South 2nd Street
Mount Vernon, Washington 98273-3864
206/336-9410

SKAGIT COUNTY
PERMIT CNTR

FEB 16 1995

RECEIVED

ON-SITE SEWAGE SYSTEM CERTIFICATION
FOR AS-BUILT DRAWINGS AND/OR INSTALLATIONS

Skagit County Code Section 12.04.040 states in part "...If deviations from the approved plans and specifications have occurred during construction, or if self inspection has been permitted by the Health Officer, a complete set of certified "as-built" drawings shall be provided to the Health Officer by the designer for a permanent record of the installation within ten (10) days of completion of construction."

Section 12.04.090 places special conditions on sewage systems installed by the resident owner and states in part "...that the sewage system designer must certify, in writing, to the Health Officer that the system has been properly installed before requesting the required County inspections..." and final approval.

Please complete and answer all questions and return (with certified as-built plans/specifications if required).

WARE, PAUL
Property Owner (last, first and middle initial)

18340 (1740) ASPREY DRIVE
Site Address

4530-000-029-0000 CASCADE RIDGE LOT 29
Assessor's Account Number(s) Plat, Division, Lot, Block

STEVE TRAYNOR DRAIN FIELDS PLAN
Designer's Name Installer's Name

On-Site Sewage System Permit Number 593-524 P 83880
33 04 04

Have you attached any as-built plans/specifications? YES
If yes, how many pages are being submitted? 1

INSTALLATION CERTIFICATION: I hereby certify that this sewage system was completed on (date) NOV. 17, 1994 and I have determined it was installed in accordance with the approved plans and specifications, or as indicated on the attached as-built documents, and in conformance with the County On-Site Sewage Rules and Regulations (Skagit County Code Chapter 12.04).

Designer's Signature: (M. Traynor)

-----COUNTY USE ONLY BELOW THIS LINE-----

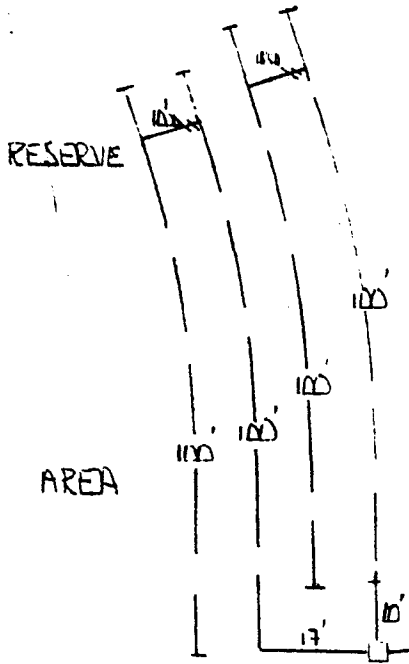
Reviewed by: Greg Selby Date: 2-16-95

S93-524
2092

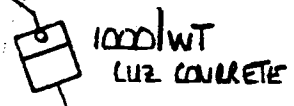
4531 000 029-D

ADDITIONAL COIL LOGS 8/31/93

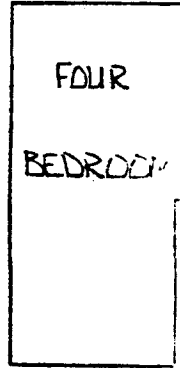
SLS 7 34" G SL (4) 34" + ROCK
SL6 10-42" " " 42" "



190' 4" WC



NO FOUNDATION AT
TIME OF FINAL!



SCALE
1" = 30'

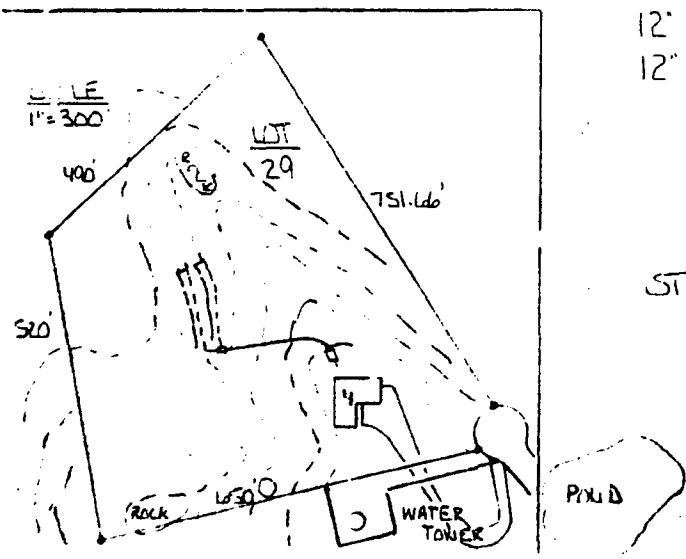


CASCADE RIDGE PUD

ASBUILT #93-524 LOT 29

1000 GALLON SEPTIC TANK WT (W. FILTER)
800 SQ. FT. DRAINFIELD
12' X 24" TRENCH
12" NATIVE SOIL COVER (1165 CU. YDS. SL)

STEVE TRAYNOR DESIGNS
259-4338



FILE #: 93-524

APPLICANT'S NAME: WARE, PAUL

ASSESSOR'S ACCOUNT NUMBER: _____

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WARE, PAUL

Property Owner (last, first and middle initial)

OSPREY DRIVE

Site Address

4530-000-029-0000

Assessor's Account Number(s)

CASCADE RIDGE LOT 29

Plat, Division, Lot, Block

STEVE TRAYNOR

Designer's Name

DRAINFIELDS PLUS

Installer's Name

On-Site Sewage System Permit Number

93-524

Have you attached any as-built plans/specifications?

YES

If yes, how many pages are being submitted?

1

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Designer's Signature:

(S.M. Traynor)

-----COUNTY USE ONLY BELOW THIS LINE-----

Reviewed by:

Greg Gelesne

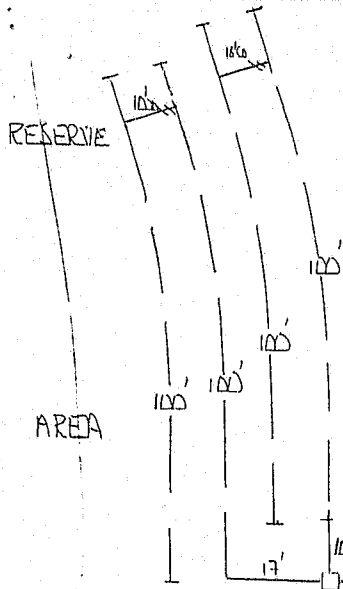
Date:

2-16-95

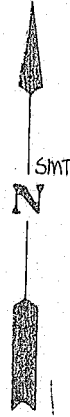
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ADDITIONAL SOIL LOGS 8/31/93

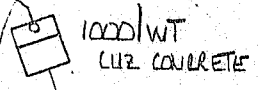
SLS 0-34" GSS (4) 34"+ ROCK
SL6 0-42" " " 42" "



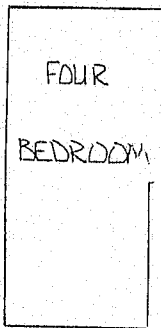
190' 4" PVC



SCALE
1" = 30'



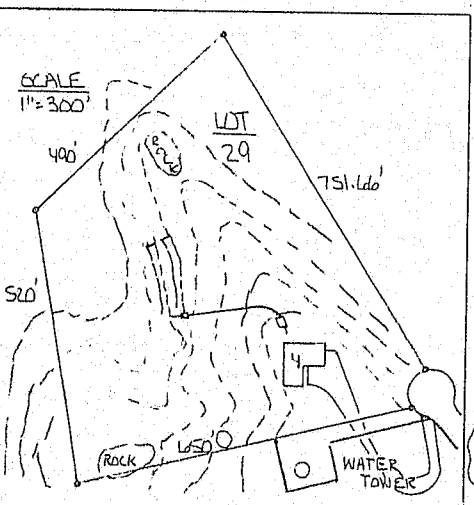
NO FOUNDATION AT TIME OF FINAL!



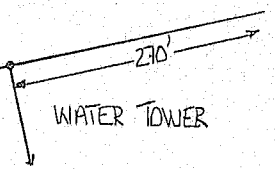
CASCADE RIDGE PUD

ASBUILT # 93-524 LOT 29

1000 GALLON SEPTIC TANK WT. (W. FILTER)
800 SQ. FT. DRAINFIELD
12' X 24" TRENCH
12" NATIVE SOIL COVER (16S CU. YDS. SL)



STEVE TRAVNOR DESIGNS
259-4338



FILE #: 93-524

APPLICANT'S NAME: WARE, PAUL

ASSESSOR'S ACCOUNT NUMBER: _____

SKAGIT COUNTY PERMIT CENTER 336-9410
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 Mount Vernon, Washington 98273

136-

DATE STAMP

SKAGIT COUNTY PERMIT CNTR.

AUG 10 1993

Flood area..... <i>Zone C</i>	Fee
Legal lot..... <i>OK</i>	\$ <i>136</i>
Unstable slope... <i>NO</i>	

RECEIVED

Do not write above this line --- Official Use Only

Issuance of a sewage disposal permit does not constitute fulfillment or satisfaction of any other land use requirements, for a future building, and does not, by itself, guarantee the issuance of any other land use permits. Land use requirements include, but are not limited to zoning, shoreline, and building code regulations. Compliance with all applicable land use requirements should be completed prior to beginning installation of the sewage system.

It is hereby agreed that this installation shall comply with all requirements of the Skagit County Rules and Regulations For On-site Sewage Disposal including INSPECTION BEFORE COVERING. Property owners should contact a designer or the County for instructions before installing their own sewage disposal system.

I acknowledge that I am familiar with the requirements of RCW 18.27 (Registration of Contractors) and state as condition for issuance of this permit, that I am either exempt from registration or that my contractor is a certified installer with Skagit County.

Any person may appeal a determination by the staff or request a waiver from the requirements found in Ordinance #10136 (Skagit County Code, Chapter 12.04). See Section 12.04.110 for details.

Owner or Agent's Signature <i>S.M. Traynor</i>	Date <i>7-30-93</i>
--	---------------------

APPLICATION

Property Owner (last, 1st, m.i.) <i>WARE PAUL</i>	Phone # <i>334-6505</i>
Mailing Address <i>12805-40TH NE MARYSVILLE WA</i>	Zip Code <i>98270</i>
Assessor's Account Number(s) <i>4530-000-029-0016</i>	Sec/Twp/Rge <i>3/33/4</i>
Existing Plat Name or No. <i>CASCADE RIDGE (PUD)</i>	Lot # <i>29</i>
Location and/or Site Address <i>OSPREY COURT</i>	Lot Size (acres) <i>6 ACRES +</i>
Site Evaluator/Phone # <i>STEVE TRAYNOR 259-4338</i>	Designer/Phone # <i>TRAYNOR DESIGNS 259-4338</i>
Any previous site evaluations/designs for this site? <i>YES</i>	Name or Project File? <i>CASCADE RIDGE</i>
	What year was work done? <i>1989</i>
PERMIT TYPE:	<input checked="" type="checkbox"/> Soils & Design <input type="checkbox"/> Repair <input type="checkbox"/> Operational <input type="checkbox"/> Design Only <input type="checkbox"/> Non-Conforming Repair
SITE EVALUATION:	<input checked="" type="checkbox"/> Existing Lot <input type="checkbox"/> Proposed Lot <input type="checkbox"/> Soil/site Consultation

SKAGIT COUNTY PERMIT CENTER 336-9410
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SEWAGE PERMIT #

93-524

DO NOT WRITE IN BOX...OFFICIAL USE ONLY

ON-SITE SEWAGE SYSTEM PERMIT

SEWAGE SYSTEM PERMITS EXPIRE FIVE
 (5) YEARS FROM DESIGN APPROVAL.

WARE, PAUL

(Print LAST NAME, FIRST above this line.)

DESIGN STATUS:	<input checked="" type="checkbox"/> New Design	<input type="checkbox"/> Redesign	<input type="checkbox"/> No design Submitted
DESIGN TYPE:	<input checked="" type="checkbox"/> Conventional	<input type="checkbox"/> Pressurized	<input type="checkbox"/> Mound
	<input type="checkbox"/> SandFilter	<input type="checkbox"/> SandFilter/Mound	<input type="checkbox"/> Sand-lined Trench
	<input type="checkbox"/> Other (Describe)==>		
SYSTEM USE:	Residential	PROPOSED PLAT REVIEW	
	<u>4</u> # of bedrooms	<input type="checkbox"/> Short plat (2-4 lots)	<input type="checkbox"/> Long plat (5 or more lots)
	<u>480</u> total daily flow	Proposed Plat Name or No?	
	Non-Residential	Lot Size (Acres)	Lot # <u>29</u>
_____ # of occupants	<u>6+ ACRES</u>	of _____	lots.
_____ gal/day/occupant			
_____ total daily flow			

Do not write below this line --- Official Use Only

NOTES: On hold pending design revisions.

ISSUANCE OF A SEWAGE PERMIT DOESN'T GUARANTEE ISSUANCE OF ANY OTHER LAND USE PERMITS

APPLICATION STATUS:

This on-site sewage application is approved. See Permit Number in upper right corner. _____/_____/_____

This application is NOT APPROVED. See NOTES above for reason(s). _____/_____/_____

INSPECTIONS:

Site Evaluation	<u>GG, 8-31-93</u>	Design Review	<u>GG, 11-15-93</u>
Soil/Site Preparation	_____/_____	Above/below Grnd Devices	<u>GG, 10-6-94</u>
Fill(sand) Material	_____/_____	Pressure Test(head)	_____/_____
Open Trenches	_____/_____	Final Inspection	<u>GG, 10-6-94</u>
Self-Inspection	_____/_____	Installed As Designed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

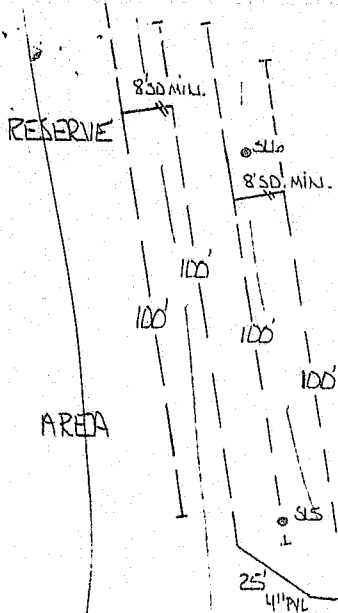
PAGE

2

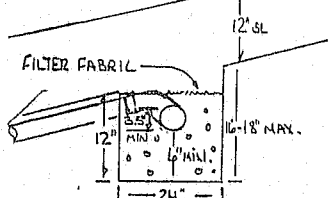
4530-000-029-0

ADDITIONAL SOIL LOGS 8/31/93

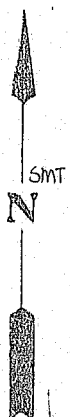
SLS 0-34" G.S.L (4) 34" + ROCK
SLL 0-42" " " 42" "



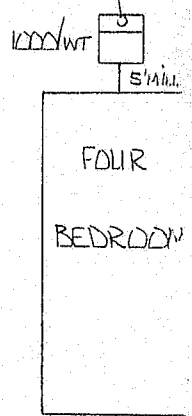
Design approved
11-15-93
GB



DRAINFIELD AREA
AVOID

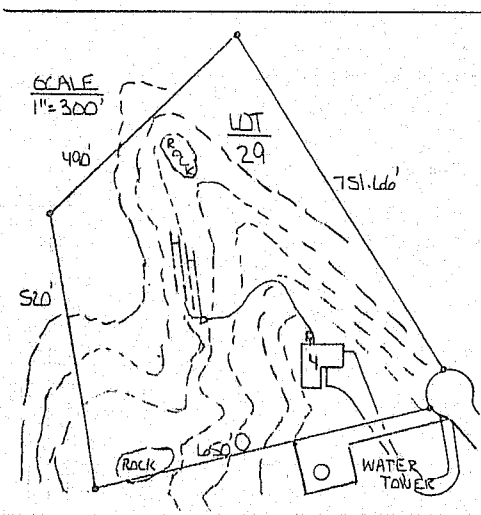


SCALE
1" = 30'

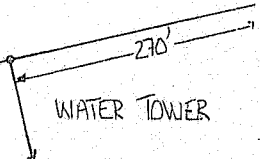


CASCADE RIDGE PUD
REQUIREMENTS LOT 29

1000 GALLON SEPTIC TANK WT (W. FILTER)
800 SQ. FT. DRAINFIELD
12' X 24" TRENCH
12" NATIVE SOIL COVER (165 CU. YDS. SL)



STEVE TRAYNOR DESIGNS
259-4338



PHONE CALL

FOR <u>Greg</u>	DATE <u>10-3</u>	TIME <u>4:50</u>	(A.M. / P.M.)
M. <u>Steve Traynor R.S.</u>			
OF _____			PHONED
PHONE _____	AREA CODE	NUMBER <u>93-524</u>	EXTENSION
MESSAGE <u>Paul Ware</u>			RETURNED YOUR CALL
<u>Osprey Ct.</u>			PLEASE CALL
<u>Final 11:00 10-6</u>			WILL CALL AGAIN
SIGNED _____			CAME TO SEE YOU
			WANTS TO SEE YOU

TOPS FORM 4003