

20-13-1150-0058

KITTITAS COUNTY HEALTH DEPARTMENT

507 N. Nanum Street • Ellensburg, Washington 98926 • Phone 925-1465

Permit to Install or Alter a Sewage Disposal System

Name

MARILYN SPOON

Date

5.5.88

Address and Location

EASTON VILLAGE I LOT 58

Installer

HOFFINE

Soil tester-designer

HOFFINE

No. Bedrooms

3

Type of bldg.

CABIN

New or existing

RENEWAL

Septic Tank Capacity

1000

gals.

Sq. ft. of absorption area

258

Comments

INSTALL AS DESIGNED

Issued by

JOHN J. WOLPERS III

This Permit expires one year from date of issuance. The above specifications are minimum. Changes in specifications shall be approved before construction. Health Department Regulation requires that all new or altered sewage disposal systems be inspected and approved before covering. Twenty four hours advance notice required for inspections.

Reason for Disapproval

Approved by

JOHN J. WOLPERS III

Date

5.10.88

8200-0211-81-06

**CERTIFICATION BY COUNTY-BONDED CONTRACTOR
IN LIEU OF HEALTH DEPARTMENT INSPECTION AND APPROVAL**

I hereby certify that the sewage system at the above address was installed or altered in accordance with all pertinent rules, regulations and laws governing the installation of such systems and meets or exceeds the specifications indicated.

Signature

for

Company

Date

KITTITAS COUNTY HEALTH DEPARTMENT

507 N. Nanum Street • Ellensburg, Washington 98926 • Phone 925-1465

Permit to Install or Alter a Sewage Disposal System

Name MARILYN SPOON Date 5.5.88
Address and Location EASTON VILLAGE I LOT 58
Installer HOFFMAN Soil tester-designer HOFFMAN
No. Bedrooms 3 Type of bldg. CABIN New or existing RENEWAL
Septic Tank Capacity 1000 gals. Sq. ft. of absorption area 258
Comments INSTALL AS DESIGNED

Issued by JOHN J WALKER III

This Permit expires one year from date of issuance. The above specifications are minimum. Changes in specifications shall be approved before construction. Health Department Regulation requires that all new or altered sewage disposal systems be inspected and approved before covering. Twenty four hours advance notice required for inspections.

Reason for Disapproval _____

Approved by JOHN J WALKER III Date 5.10.88

O.S.D.S. INSPECTION FORM

NAME: MARILYN SPOON DATE: 5-10-88ADDRESS: ~~WEST~~ EASTON VILLAGE I TIME:
LOT 58LINE 1 E LINE 2 W LINE 3

DISTANCES

LINE SEPARATION: 9'TIGHT LINE: PERF LINE: 45TRENCH WIDTH: 3'

ELEVATIONS

CAPPED END: 77 1/8MIDDLE: 76 3/8TIGHT LINE/PERF: 76 3/8READ TO CLOSE
LINE FALL TO TRANSITD-BOX OUTLET: 71 7/8D-BOX INLET: 70 5/8 TOTAL PERF LINE LENGTH: 90 FT.TANK OUTLET: 88 1/4 TRENCH WIDTH: X 3 FT.TANK INLET: DRAIN FIELD: 270 SQ. FT.

MISCELLANEOUS

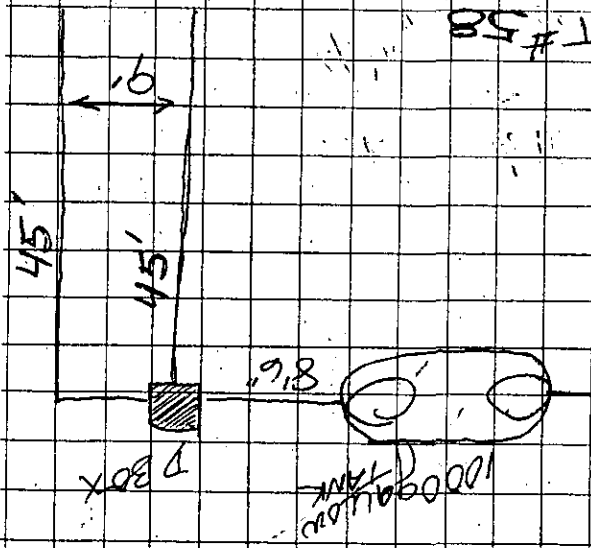
CROSS-SECTION SATISFACTORY? X YES NODISTANCES SATISFACTORY? X YES NOELEVATIONS SATISFACTORY? X YES NOINSTALLATION CONFORMS WITH DESIGN? X YES NOCOMMENTS: 8'6" FROM TANK TO D BOXAPPROVED BY:

PRIVACY

PRIVACY

RAVY BUD

LOT # 58



KITTITAS COUNTY HEALTH DEPARTMENT

507 Nanum Street, Ellensburg, WA 98926-2898 | Telephone: (509) 962-6811, ext. 109

505 Power Street, Cle Elum, WA 98922-1047 | Telephone: (509) 674-5513

MAY 04 1988

ON-SITE SEWAGE SYSTEM PERMIT RENEWAL INFORMATION / APPLICATION

PERMIT RENEWAL APPLICATION

PERMIT RENEWAL INFORMATION

PROPERTY OWNER:

Name: MARILYN SPOON
 Mailing Address: 2101 S. 324th #177
Federal Way WA 98003
 Telephone: (206) 874-2842

REQUESTED BY: (if different than owner)

Name: _____
 Mailing Address: _____
 Telephone: () _____

COMPLETE THIS SECTION ONLY IF A COPY OF THE PERMIT IS NOT ATTACHED OR ON THE REVERSE.

SITE:

Subdivision: EASTON VILLAGE I
 Division: _____ Block: _____ Lot: 58
 Legal description, if not in a subdivision

Section: 11 Township: 20 Range: 13
 Assessor's Parcel (Card) Number: 2013 11500058/00
 Permit previously issued to:
MARILYN SPOON

COMPLETE THIS SECTION AS NEEDED TO INDICATE DEVELOPMENT PLAN CHANGES:

STRUCTURE:

☒ single or _____ multiple family dwelling
 on-site constructed or ☒ mobile home
☒ other: proposed cabin 3 bdrm
☒ proposed or _____ existing
 Number of bedrooms: 3 per dwelling unit
 Number of (intended) permanent occupants: 1
 Maximum number of occupants in 24 hours: 1

WATER SUPPLY:

☒ public or _____ private: ☒ well or _____ spring

Application is hereby made for renewal of the sewage system installation Permit issued for the hereon described site. It is understood that the Permit, if renewed, will be issued to the property owner indicated above and will allow site development as specified on the original Permit (or as amended by the Health Officer upon approval of the changes requested above). Payment of the renewal fee (20.00) is due at time of application.

Signed: Marilyn R Spoon
 Date: 5-2-88

A "Permit to Install a Sewage Disposal System" allows the person named thereon to install an on-site sewage disposal system according to the design approved by the Health Officer. Development other than that described on the permit application, incorporated into the approved design and specified on the Permit will, without advance approval of the Health Officer, invalidate the Permit. A sewage system installation permit expires one year from date of issuance. If more than a year passes between date of issue and date of installation the Permit must be renewed to establish validity at the time of installation. A renewed permit also expires one year from date of issuance. If several years are expected to pass before installation of the sewage system it is not necessary to renew the permit each year. It is only necessary to possess a valid permit at the time of installation.

As indicated above the Permit is valid solely for the person to whom it was issued. If property ownership changes the permit can be issued to the new owner by means of renewal. Any new development plans and resulting sewage system design changes can, with Health Officer approval, be incorporated at the time of Permit renewal.

Please be advised that the Health Officer is not obligated to renew a Permit in the event of:

- 1) Significant changes in site development plans for which the Permit was initially issued.
- 2) Discovery of false, incomplete or misleading information presented in the initial application for the Permit.
- 3) Establishment of new regulations governing, or related to, on-site sewage disposal systems.

=====

FOR DEPARTMENT USE ONLY

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| Date | Activity | Fee | Receipt |
|--------|----------|-------|---------|
| 5-5-88 | Renewal | 20.00 | 012418 |
| | | | |
| | | | |

Application Reviewed 5/5/88 by JFW

Renewal Permit Issued 5/5/88 by JFW

Design Changes: _____ Yes ☒ No

KITTITAS COUNTY HEALTH DEPARTMENT

507 Nanum Street, Ellensburg, WA 98926-2898 | Telephone: (509) 962-6811, ext. 109

505 Power Street, Cle Elum, WA 98922-1047 | Telephone: (509) 674-5513

April 25, 1988

Marilyn Spoon
2101 S. 324th #177
Federal Way WA 98003

Dear Marilyn:

On April 20, 1988, I received your check #00874 for \$20.00 along with a letter from Mark Soltman dated September 23, 1988 concerning permit renewal. Mark Soltman is no longer with us and I have been unable to locate your application.

I am returning your check along with paperwork I need filled out and returned to process your request.

If you have any questions or concerns on this matter, please don't hesitate to contact me. I am sorry for any inconvenience.

Sincerely,



John J. Wolpers III
Environmental Health Specialist

JJW:kdk A7

Enclosures

APR 20 1988

KITTITAS COUNTY HEALTH DEPARTMENT

507 Nanum Street, Ellensburg, WA 98926-2898 | Telephone: (509) 962-6811, ext. 109

505 Power Street, Cle Elum, WA 98922-1047 | Telephone: (509) 674-5513

September 23, 1987

Marilyn Spoon
2101 S. 324th, #177
Federal Way WA 98003

RE: On-Site Sewage System Permit Renewal for Lot 58, Easton Village I

Dear Ms. Spoon:

We have received your application for sewage system permit renewal. Before we can fully process your request, we need the following:

1. Documentation that water service had been arranged for (Paid for) or promised by the water district (a letter of commitment to provide water), prior to June 23, 1987. *Water is already on my lot.*
2. Fee payment of \$20.00.

Once we have received these items we can proceed with your application. If you have any questions, please feel free to call.

Sincerely,

J. Mark Soltman

J. Mark Soltman, R.S.
Environmental Health Specialist

JMS:kdk



Kittitas Co. Health Dept
507 Nanum St.
Ellensburg, Wa. 98926-2898

SPOON
2101 S. 324th #177
Federal Way, Wa.
98003

LA

KITTITAS COUNTY HEALTH DEPARTMENT

507 N. Nanum Street • Ellensburg, Washington 98926 • Phone 925-1465

Permit to Install or Alter a Sewage Disposal System

Name Marilyn Spoon Date 12/6/83
Address and Location Easton Village I, Lot 58
Installer unknown Soil tester-designer C. Hoffman
No. Bedrooms 3 Type of bldg trailer / cabin ☒ New or existing Renewal
Septic Tank Capacity 1000 gals. Sq. ft. of absorption area 258
Comments Install as designed

Issued by J. Mark Soltner

This Permit expires one year from date of issuance. The above specifications are minimum. Changes in specifications shall be approved before construction. Health Department Regulation requires that all new or altered sewage disposal systems be inspected and approved before covering. Twenty four hours advance notice required for inspections.

Reason for Disapproval.....

Approved by..... Date.....

**CERTIFICATION BY COUNTY-BONDED CONTRACTOR
IN LIEU OF HEALTH DEPARTMENT INSPECTION AND APPROVAL**

I hereby certify that the sewage system at the above address was installed or altered in accordance with all pertinent rules, regulations and laws governing the installation of such systems and meets or exceeds the specifications indicated.

.....
Signature

.....
for

.....
Company

Date.....

KITTITAS COUNTY HEALTH DEPARTMENT

507 N. Nanum Street • Ellensburg, Washington 98926 • Phone 925-1465

Permit to Install or Alter a Sewage Disposal System

Name Marilyn Spoon Date 12/10/83

Address and Location Easton Village I, Lot 58

Installer unknown Soil tester-designer C. Kordt

No. Bedrooms 3 Type of bldg trailer / cabin (New) or existing Renovated

Septic Tank Capacity 1000 gals. Sq. ft. of absorption area 258

Comments Install as designed

Issued by Mark Soltman

This Permit expires one year from date of issuance. The above specifications are minimum. Changes in specifications shall be approved before construction. Health Department Regulation requires that all new or altered sewage disposal systems be inspected and approved before covering. Twenty four hours advance notice required for inspections.

Reason for Disapproval

Approved by Date

KITTITAS COUNTY HEALTH DEPARTMENT

507 N. Nanum Street • Ellensburg, Washington 98926 • Phone 925-1465

Permit to Install or Alter a Sewage Disposal System

Name Marilyn R. Spoon Date 5/13/82
Address and Location Easton Village I, Lot 58
Installer unknown Soil tester-designer C. Hoffline
No. Bedrooms 3 Type of bldg. Trailer or cabin ☒ New or existing Renewal
Septic Tank Capacity 1000 gals. Sq. ft. of absorption area 250
Comments Install as designed

Issued by D. Mark Saltzman

This Permit expires one year from date of issuance. The above specifications are minimum. Changes in specifications shall be approved before construction. Health Department Regulation requires that all new or altered sewage disposal systems be inspected and approved before covering. Twenty four hours advance notice required for inspections.

Reason for Disapproval _____

Approved by _____ Date _____

**CERTIFICATION BY COUNTY-BONDED CONTRACTOR
IN LIEU OF HEALTH DEPARTMENT INSPECTION AND APPROVAL**

I hereby certify that the sewage system at the above address was installed or altered in accordance with all pertinent rules, regulations and laws governing the installation of such systems and meets or exceeds the specifications indicated.

.....
Signature

..... for
Company

.....
Date

KITTITAS COUNTY HEALTH DEPARTMENT

507 N. Nanum Street • Ellensburg, Washington 98926 • Phone 925-1465

Permit to Install or Alter a Sewage Disposal System

Name Marilyn R. Spoon Date 4/14/81
Address and Location Easton Village I, Lot 58
Installer unknown Soil tester-designer Charles Hoffman
No. Bedrooms 3 Type of bldg. trailer or cabin New or ~~existing~~ New (Renewal)
Septic Tank Capacity 1000 gals. Sq. ft. of absorption area 258
Comments Install as designed

Issued by Gordon C. Kelly

This Permit expires one year from date of issuance. The above specifications are minimum. Changes in specifications shall be approved before construction. Health Department Regulation requires that all new or altered sewage disposal systems be inspected and approved before covering. Twenty four hours advance notice required for inspections.

Reason for Disapproval _____

Approved by _____ Date _____

**CERTIFICATION BY COUNTY-BONDED CONTRACTOR
IN LIEU OF HEALTH DEPARTMENT INSPECTION AND APPROVAL**

I hereby certify that the sewage system at the above address was installed or altered in accordance with all pertinent rules, regulations and laws governing the installation of such systems and meets or exceeds the specifications indicated.

Signature for _____
Company

Date _____

104

KITTITAS COUNTY HEALTH DEPARTMENT

507 N. Nanum Street • Ellensburg, Washington 98926 • Phone 925-1455

Permit to Install or Alter a Sewage Disposal System

Name Easton Village Inc Date 5/7/80
Address and Location Easton Village Lot 58
Installer Licensed Soil tester-designer Hoffin
No. Bedrooms 3 Type of bldg Trailer or Cabin New or existing
Septic Tank Capacity 1000 gals. Sq. ft. of absorption area 255
Comments Install as designed

Issued by W.D. Gross / D. A. Salpey

This Permit expires one year from date of issuance. The above specifications are minimum. Changes in specifications shall be approved before construction. Health Department Regulation requires that all new or altered sewage disposal systems be inspected and approved before covering. Twenty four hours advance notice required for inspections.

Reason for Disapproval.....

Approved by..... Date.....

**CERTIFICATION BY COUNTY-BONDED CONTRACTOR
IN LIEU OF HEALTH DEPARTMENT INSPECTION AND APPROVAL**

I hereby certify that the sewage system at the above address was installed or altered in accordance with all pertinent rules, regulations and laws governing the installation of such systems and meets or exceeds the specifications indicated.

Signature for Company

Date _____

KITTITAS COUNTY HEALTH DEPARTMENT

ON-SITE SEWAGE DISPOSAL SYSTEM

PREAPPLICATION

Person requesting review Easton Village Inc

Intended Occupant _____

Assessor's parcel number lot 58

Intended occupant's current address _____

General property location Easton Village

Type of structure Cabin or Trailer

On the reverse of this sheet, show by sketch:

1. property configuration and dimensions
2. locations of and distances between wells, sewage systems, creeks, ditches, and drainage ways within 300' of the proposed structure.
3. trees - location and type within 300' of the proposed structure.
4. slope of property - % (amount of fall) and direction
distance
5. location of existing or proposed location of driveways, water lines, other structures, and easements within 300' of the proposed structure.

KITTITAS COUNTY HEALTH DEPARTMENT

ON-SITE SEWAGE DISPOSAL SYSTEM

PERMIT APPLICATION

Permit to be issued to Easton Village Inc

Intended Occupant _____

Intended Occupants Current Address _____

Assessor's Parcel Number Lot 58 Easton Village

General Property Location 1/4 mile past R.V. Town on Sparks Road

Type of structure to be served Trailer or Cabin

Number of intended permanent occupants _____

Maximum anticipated occupants including visitors _____

Number of bedrooms or waste generating fixtures 33 ~~21~~ ~~15~~ ~~13~~ ~~10~~

Type of system proposed (conventional, hybrid, alternative) _____

Person to do installation Licensed installer

Depth to seasonal high water table none

Method determined (direct observation, mottling, root zone, other) Trees & brush will have to be removed in drain field area

Corrections to control surface water and/or water table if needed none

Specify if any removing or grading soil is to be done in the disposal area none

Percolation data: Date tests done 5-5-80
 Tests done by whom Haffine
 Test Hole No. 1 - rate (minutes/inch) 6" in 8 min
 depth (inches) 28"
 Test Hole No. 2 - rate (minutes/inch) 6" in 8 min
 depth (inches) 27"
 Average of No. 1 and No. 2 1" in 1 1/2 min
 Size of septic tank proposed 1000 gallons
 Square feet of disposal area 255 ~~130~~ ~~25~~ ~~13~~ ~~100~~ ~~100~~

Soil Log - description and depths of various soils encountered:

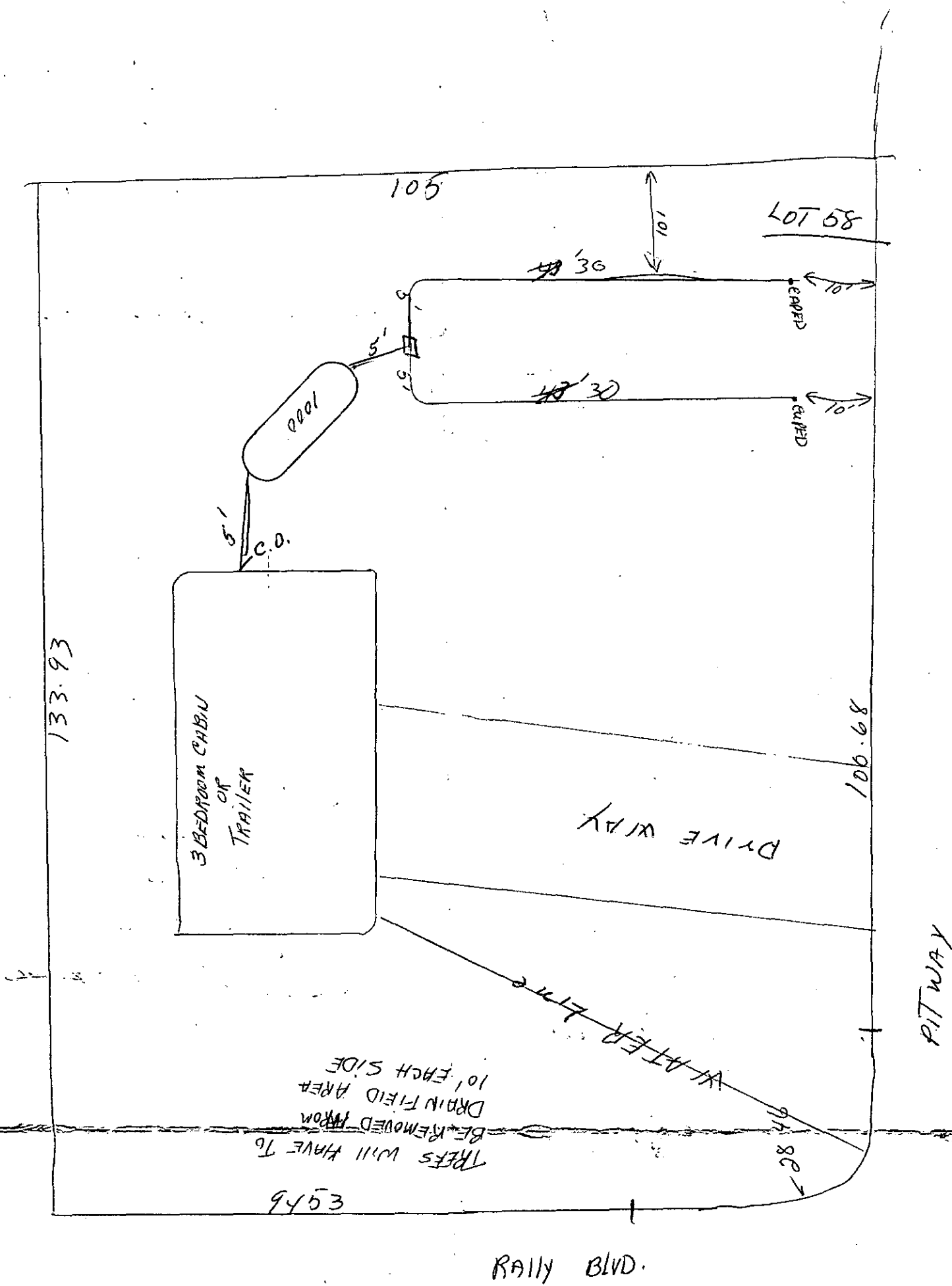
① 26" soil
2" sand & gravel

② 24" soil
3" sand & gravel

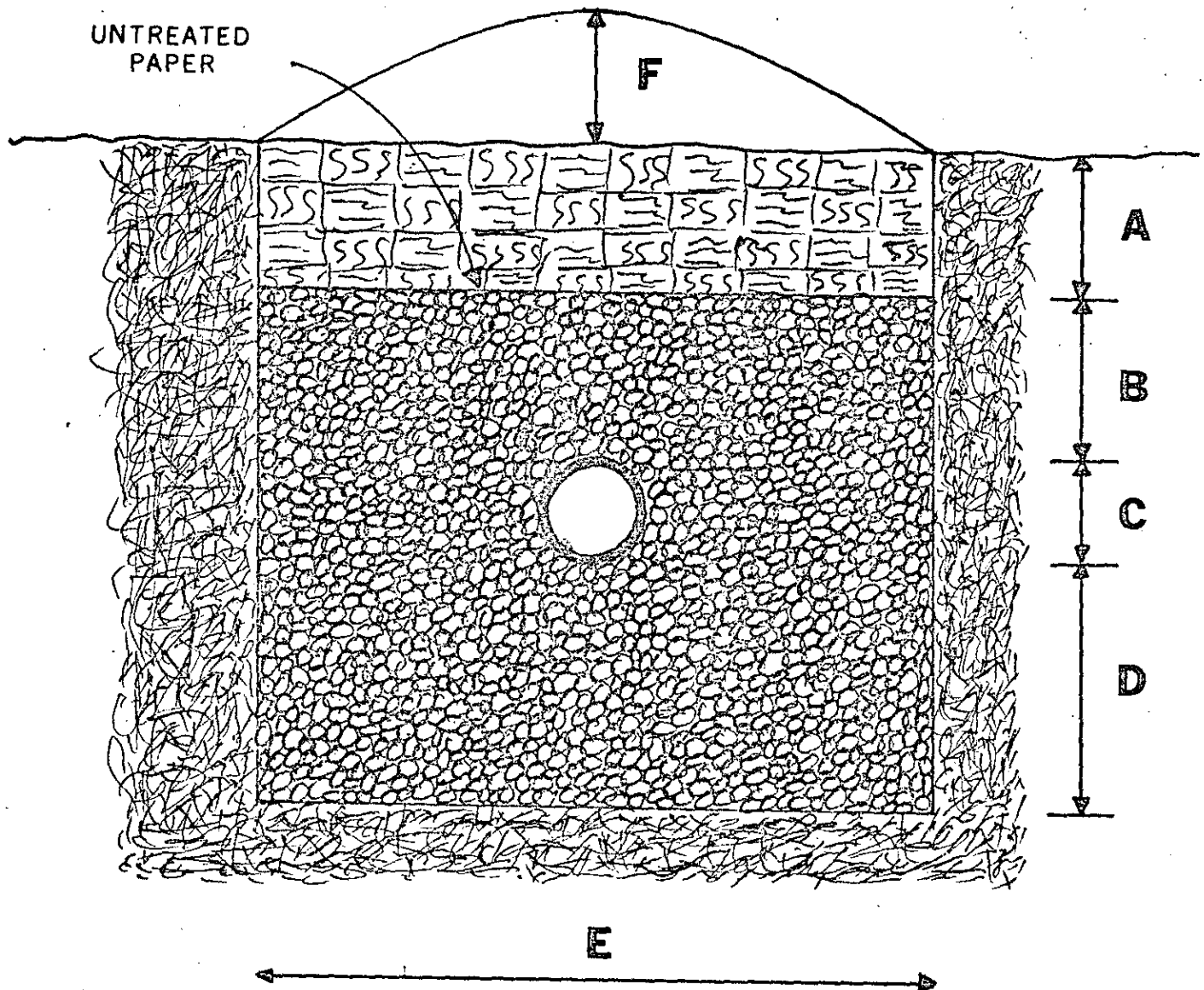
I certify that the above information was collected by me or under my supervision. I accept responsibility for its accuracy and the design accompanying this application.

Signed Charles J. Haffine Designer
 Date 5-5-80

On the reverse of this sheet, show the detailed design drawing including the following: topography, property configuration and dimensions, driveways, corrals, distances from the O.S.D.S. to domestic water supplies, surface waters, banks, cuts, swales, depressions, property boundaries, structures, trees (including varieties), public sewer systems, and other information as necessary to allow a proper design and evaluation of the proposed O.S.D.S.



CROSS SECTION



A = app. 14"

B = 2"

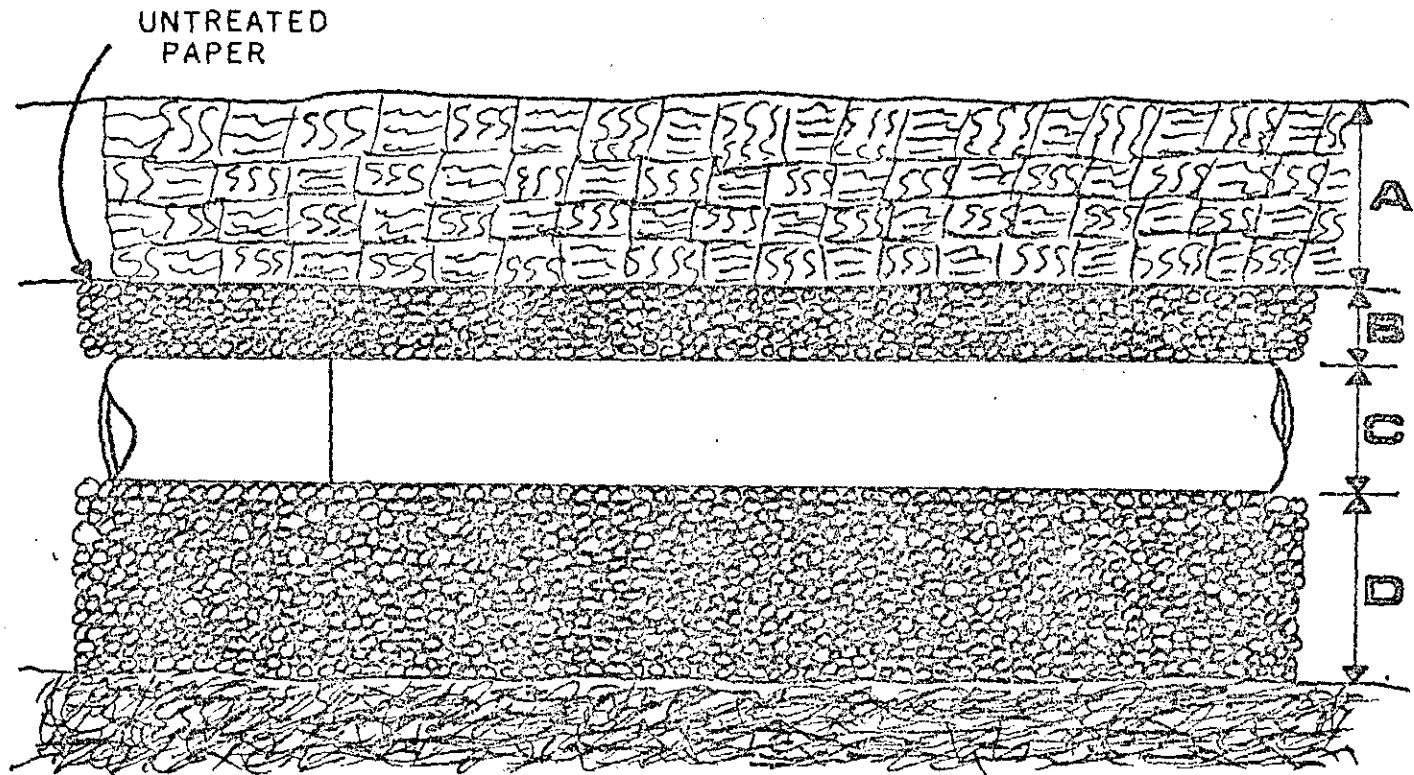
C = 4"

D = 6"

E = 36"

F = 2"

LONGITUDINAL SECTION



A: app. 14"

B: 2"

C: 4"

D: 6"

PIPE SLOPE: 2 70

NO Changes

KITTITAS COUNTY HEALTH DEPARTMENT

ON-SITE SEWAGE DISPOSAL SYSTEM

PERMIT APPLICATION

MAY 12 1982

Permit to be issued to Easton Village Inc

Intended Occupant _____

Intended Occupants Current Address _____

Assessor's Parcel Number Lot 58 Easton Village

General Property Location 1/4 mile past R.V. Town on Sparks Road

Type of structure to be served Trailer or Cabin

Number of intended permanent occupants _____

Maximum anticipated occupants including visitors _____

Number of bedrooms or waste generating fixtures 33 ~~21~~ ~~18~~ ~~13~~ ~~10~~

Type of system proposed (conventional, hybrid, alternative) _____

Person to do installation Licensed installer

Depth to seasonal high water table none

Method determined (direct observation, mottling, root zone, other) Trees & brush

will have to be removed in drain field area

Corrections to control surface water and/or water table if needed none

Specify if any removing or grading soil is to be done in the disposal area none

Percolation data: Date tests done 5-5-80

Tests done by whom Hoffine

Test Hole No. 1 - rate (minutes/inch) 6" in 8 min
depth (inches) 25"

Test Hole No. 2 - rate (minutes/inch) 6" in 8 min
depth (inches) 27"

Average of No. 1 and No. 2 1" in 1 1/2 min

Size of septic tank proposed 1000 gallons

Square feet of disposal area 255 ~~100~~ ~~250~~ ~~300~~ ~~350~~ ~~400~~ ~~450~~ ~~500~~ ~~550~~ ~~600~~ ~~650~~ ~~700~~ ~~750~~ ~~800~~ ~~850~~ ~~900~~ ~~950~~ ~~1000~~

Soil Log - description and depths of various soils encountered: 258 58 ft

① 26" soil
2" sand & gravel

② 24" soil
3" sand & gravel

I certify that the above information was collected by me or under my supervision. I accept responsibility for its accuracy and the design accompanying this application.

Signed Charles J. Hoffine Designer
Date 5-5-80

On the reverse of this sheet, show the detailed design drawing including the following: topography, property configuration and dimensions, driveways, corrals, distances from the O.S.D.S. to domestic water supplies, surface waters, banks, cuts, swales, depressions, property boundaries, structures, trees (including varieties), public sewer systems, and other information as necessary to allow a proper design and evaluation of the proposed O.S.D.S.

NO
Changes

RAILY BLVD

EGTB

TREES WILL HAVE TO
BE REMOVED FROM
DRAIN FIELD AREA
10' EACH SIDE

WATER LINE

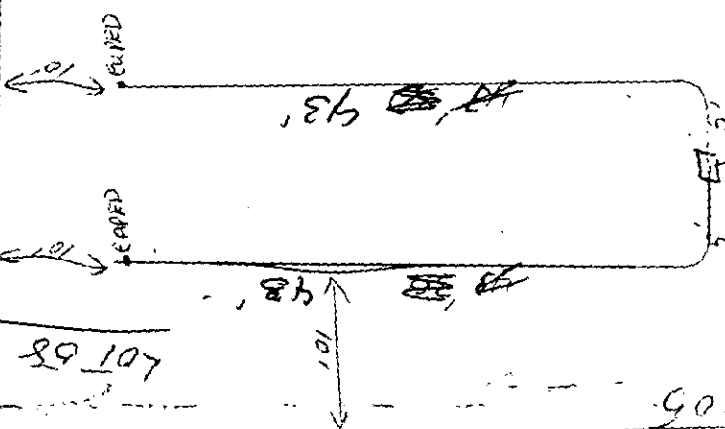
PIT WAY

DRIVE WAY

3 BEDROOM CHILL
OR
TRAILER

133 93

106.68



89 107

106

KITTITAS COUNTY HEALTH DEPARTMENT

507 Nanum Street, Ellensburg, WA 98926 / Telephone: (509) 925-1465

505 Power Street, Cle Elum, WA 98922 / Telephone: (509) 674-5513

ON-SITE SEWAGE SYSTEM PERMIT RENEWAL INFORMATION / APPLICATION

PERMIT RENEWAL APPLICATION

PROPERTY OWNER:

Name: MARILYN SPOON
Mailing Address: BOX 4122
SOLDOTNA, AK. 99669
Telephone: (907) 283-9279

REQUESTED BY: (if different than owner)

Name: _____
Mailing Address: N/A
Telephone: () _____

COMPLETE THIS SECTION ONLY IF A COPY OF THE PERMIT IS NOT ATTACHED OR ON THE REVERSE.

SITE:

Subdivision: EASTON VILLAGE
Division: 1 Block: N/A Lot: 58
Legal description, if not in a subdivision

Section: 11 Township: 20 Range: 13
Assessor's Parcel (Card) Number: 201311-5000-58-3
Permit previously issued to:
MARILYN R. SPOON

COMPLETE THIS SECTION AS NEEDED TO INDICATE DEVELOPMENT PLAN CHANGES:

STRUCTURE:

_____ single or _____ multiple family dwelling
_____ on-site constructed or _____ mobile home
_____ other: _____

_____ proposed or _____ existing
Number of bedrooms: _____ per dwelling unit
Number of (intended) permanent occupants: _____
Maximum number of occupants in 24 hours: _____

WATER SUPPLY:

_____ public or _____ private: _____ well or _____ spring

Application is hereby made for renewal of the sewage system installation Permit issued for the hereon described site. It is understood that the Permit, if renewed, will be issued to the property owner indicated above and will allow site development as specified on the original Permit (or as amended by the Health Officer upon approval of the changes requested above). Payment of the renewal fee (\$20.00) is due at time of application. 10/28/83

Signed: Marilyn R. Spoon

Date: 11-14-83

PERMIT RENEWAL INFORMATION

A "Permit to Install a Sewage Disposal System" allows the person named thereon to install an on-site sewage disposal system according to the design approved by the Health Officer. Development other than that described on the permit application, incorporated into the approved design and specified on the Permit will, without advance approval of the Health Officer, invalidate the Permit. A sewage system installation permit expires one year from date of issuance. If more than a year passes between date of issue and date of installation the Permit must be renewed to establish validity at the time of installation. A renewed permit also expires one year from date of issuance. If several years are expected to pass before installation of the sewage system it is not necessary to renew the permit each year. It is only necessary to possess a valid permit at the time of installation.

As indicated above the Permit is valid solely for the person to whom it was issued. If property ownership changes the permit can be issued to the new owner by means of renewal. Any new development plans and resulting sewage system design changes can, with Health Officer approval, be incorporated at the time of Permit renewal.

Please be advised that the Health Officer is not obligated to renew a Permit in the event of:

- 1) Significant changes in site development plans for which the Permit was initially issued.
- 2) Discovery of false, incomplete or misleading information presented in the initial application for the Permit.
- 3) Establishment of new regulations governing, or related to, on-site sewage disposal systems.

FOR DEPARTMENT USE ONLY

| Date | Activity | Fee | Receipt |
|---------|----------|-------|---------|
| 12/2/83 | | 20.00 | 3531 |
| | | | |
| | | | |

Application Reviewed / / by _____

Renewal Permit Issued / / by _____

Design Changes: _____ Yes _____ No

KITTITAS COUNTY HEALTH DEPARTMENT

507 Nanum Street, Ellensburg, WA 98926-2898 | Telephone: (509) 962-6811, ext. 109

505 Power Street, Cle Elum, WA 98922-1047 | Telephone: (509) 674-5513

September 23, 1987

Marilyn Spoon
2101 S. 324th, #177
Federal Way WA 98003

RE: On-Site Sewage System Permit Renewal for Lot 58, Easton Village I

Dear Ms. Spoon:

We have received your application for sewage system permit renewal. Before we can fully process your request, we need the following:

1. Documentation that water service had been arranged for (Paid for) or promised by the water district (a letter of commitment to provide water), prior to June 23, 1987.
2. Fee payment of \$20.00.

Once we have received these items we can proceed with your application. If you have any questions, please feel free to call.

Sincerely,

J. Mark Soltman

J. Mark Soltman, R.S.
Environmental Health Specialist

JMS:kdk

KITTITAS COUNTY HEALTH DEPARTMENT

507 Nanum Street, Ellensburg, WA 98926-2898 | Telephone: (509) 962-6811, ext. 109

505 Power Street, Cle Elum, WA 98922-1047 | Telephone: (509) 674-5513

July 30, 1987

Marilyn Spoon
1190 Union Ave. N.E. #D-7
Renton WA 98056

RE: On-Site Sewage System Permit Renewal for Lot 58, Easton Village I

Dear Ms. Spoon:

We have received your request for renewal of the sewage system permit for the lot referenced above. The purpose of this letter is to explain to you that renewal of this permit may not be possible at this time.

On June 23, 1987, Mr. Robert E. James, Regional Engineer of the Northwest Drinking Water Operations section of the Washington State Department of Social and Health Services drafted a letter requesting that the county building department not issue any building permits for new construction for which water is intended to be supplied by Water District #3. Due to the public health concerns surrounding the condition of the water source and distribution system in Water District #3, we are honoring this request and are not issuing sewage system permits for this area. This position also extends to the renewal of previously issued permits for those sites where water service from the district has yet to be established.

If your lot has had water service from the district for some time, please provide documentation of this with your application for permit renewal. If water service has yet to be established at your lot, we are unable to renew your sewage system permit at this time.

Please find enclosed a permit renewal application. If you have any questions, please do not hesitate to call.

Sincerely,

J. Mark Soltman

J. Mark Soltman, R.S.
Environmental Health Specialist

JMS:kdk-

Enclosure

SEP 18 1987

ON-SITE SEWAGE SYSTEM PERMIT RENEWAL INFORMATION / APPLICATION

PERMIT RENEWAL APPLICATION

PROPERTY OWNER:

Name: MARILYN SPOON
Mailing Address: 2101 S. 324th #177
Federal Way, WA 98003
Telephone: (206) 874-2842

REQUESTED BY: (if different than owner)

Name: _____
Mailing Address: _____
Telephone: () _____

COMPLETE THIS SECTION ONLY IF A COPY OF THE PERMIT IS NOT ATTACHED OR ON THE REVERSE.

SITE:

Subdivision: EASTON VILLAGE
Division: 1 Block: _____ Lot: 58

Legal description, if not in a subdivision
SEC 11; TWP. 20; RGE 13

Section: 11 Township: 20 Range: 13

Assessor's Parcel (Card) Number: 2013-11500058/00

Permit previously issued to: _____

COMPLETE THIS SECTION AS NEEDED TO INDICATE DEVELOPMENT PLAN CHANGES:

STRUCTURE:

☒ single or _____ multiple family dwelling
_____ on-site constructed or ☒ mobile home
_____ other: _____

☒ proposed or _____ existing

Number of bedrooms: 1 per dwelling unit

Number of (intended) permanent occupants: 1

Maximum number of occupants in 24 hours: 2

WATER SUPPLY:

_____ public or _____ private: ☒ well or _____ spring

Application is hereby made for renewal of the sewage system installation Permit issued for the hereon described site. It is understood that the Permit, if renewed, will be issued to the property owner indicated above and will allow site development as specified on the original Permit (or as amended by the Health Officer upon approval of the changes requested above). Payment of the renewal fee () is due at time of application.

Signed: Marilyn R Spoon

Date: 9-15-87

PERMIT RENEWAL INFORMATION

A "Permit to Install a Sewage Disposal System" allows the person named thereon to install an on-site sewage disposal system according to the design approved by the Health Officer. Development other than that described on the permit application, incorporated into the approved design and specified on the Permit will, without advance approval of the Health Officer, invalidate the Permit. A sewage system installation permit expires one year from date of issuance. If more than a year passes between date of issue and date of installation the Permit must be renewed to establish validity at the time of installation. A renewed permit also expires one year from date of issuance. If several years are expected to pass before installation of the sewage system it is not necessary to renew the permit each year. It is only necessary to possess a valid permit at the time of installation.

As indicated above the Permit is valid solely for the person to whom it was issued. If property ownership changes the permit can be issued to the new owner by means of renewal. Any new development plans and resulting sewage system design changes can, with Health Officer approval, be incorporated at the time of Permit renewal.

Please be advised that the Health Officer is not obligated to renew a Permit in the event of:

- 1) Significant changes in site development plans for which the Permit was initially issued.
- 2) Discovery of false, incomplete or misleading information presented in the initial application for the Permit.
- 3) Establishment of new regulations governing, or related to, on-site sewage disposal systems.

FOR DEPARTMENT USE ONLY

| Date | Activity | Fee | Receipt |
|------|----------|-----|---------|
| | | | |
| | | | |
| | | | |

Application Reviewed / / by

Renewal Permit Issued / / by

Design Changes: Yes No

KITTITAS COUNTY HEALTH DEPARTMENT
507 N. Nanum Street • Ellensburg, Washington 98926 • Phone 925-1465

Permit to Install or Alter a Sewage Disposal System

Name

Marilyn Spoon Easton Village I, Lot 58 Date 12/6/83

Address and Location

Installer Unknown

No. Bedrooms 3

Type of bldg trailer

Soil tester-designer C. H. H. H. H.

Septic Tank Capacity 1000

gals.

Sq. ft. of absorption area 258

Comments

Install as designed

Issued by

J. Mark Sullivan

This Permit expires one year from date of issuance. The above specifications are minimum. Changes in specifications shall be approved before construction. Health Department Regulation requires that all new or altered sewage disposal systems be inspected and approved before covering. Twenty four hours advance notice required for inspections.

Reason for Disapproval

Approved by

Date

KITTITAS COUNTY HEALTH DEPARTMENT
ON-SITE SEWAGE DISPOSAL
PREAPPLICATION

Person requesting review Easton Village I

Intended Occupant

Assessor's parcel number Lot 58

Intended occupant's current address

General property location Easton Village I

Type of structure Cabin or Trailer

On the reverse of this sheet, show by sketch

1. property configuration and dimensions
2. locations of and distances between ditches, and drainage ways within
3. trees - location and type within
4. slope of property - % (amount of distance)
5. location of existing or proposed other structures, and easements