

YAMHILL COUNTY DEPARTMENT OF PLANNING AND DEVELOPMENT

400 NE BAKER STREET · McMinnville, Oregon 97128 Phone: 503-434-7516 · Fax: 503-434-7544

Septic Inquiry for an Additional Dwelling Unit

Application Number _____ Docket Number _____

To Be Completed By Applicant:

Date _____ Owner/applicant name _____

Contact phone _____ Contact Email _____

Tax Lot _____ Address _____

Bedrooms in main home _____ # Bedrooms in proposed ADU _____

Is the proposed ADU (circle one): remodel of existing structure / new structure

Water source (circle one): individual well / shared well / community water system

Applicant Signature _____

To Be Completed by Sanitation Staff:

<p>Record of Existing System: Yes / No In UGB? Yes / No</p> <p>Installation Date of existing system _____</p> <p>GPD existing system sizing _____</p> <p>Type of existing drain field _____</p> <p>Pre-treatment? Yes / No If yes, model: _____</p> <p>If yes, current annual report on file? Yes / No / NA</p>	<p>NOTES:</p>																								
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: none;">Application Type Needed:</th> <th style="text-align: center; border-bottom: none;">Required</th> <th style="text-align: center; border-bottom: none;">Optional</th> <th style="text-align: center; border-bottom: none;">NA</th> </tr> </thead> <tbody> <tr> <td style="border-top: none;">Site Evaluation*</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="border-top: none;">Installation Permit*</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="border-top: none;">Major Alteration Permit</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="border-top: none;">Minor Alteration Permit</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="border-top: none;">Authorization</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> </tbody> </table>		Application Type Needed:	Required	Optional	NA	Site Evaluation*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Installation Permit*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Major Alteration Permit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Minor Alteration Permit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Authorization	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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REHS Signature	Date																								

* If a separate system is chosen and/or required BOTH a site evaluation and an installation permit will be required.

Date	Receipt Nbr	Payment type	Total Paid
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