



**POLK COUNTY COMMUNITY DEVELOPMENT
ENVIRONMENTAL HEALTH**

850 MAIN STREET, DALLAS, OR 97338
PHONE: (503) 623-9237 FAX: (503) 623-6009
INSPECTION LINE: (503) 623-8771

For Office Use Only	ID #: _____
Date: _____	Received by: _____
Receipt No.: _____	
Septic Fee Deposit: _____	
Additional Fee Due: _____	
Total Fee: _____	
Add. Pmt. Info.: _____	
	Date Receipt No.

SEPTIC SITE EVALUATION / PLAN REVIEW APPLICATION

Property Owner's Name _____ Phone _____

Mailing Address _____
City State Zip

Applicant's Name _____ Phone _____

Mailing Address _____
City State Zip

Site Address and/or Directions _____

Existing Address Adjacent Address

Township _____ Range _____ Section _____ Taxlot _____ Acres _____ Zone _____

Single Family Dwelling: Proposed Number of Bedrooms _____ Plan Review Only

Other: Proposed Use _____ Proposed gallons per day _____

If there are employees proposed, list the total number of proposed employees: _____

Water Supply: Well Community/Public Water System Other _____

Instructions and required exhibits to be submitted with a Septic Site Evaluation application are listed below:

- 1) Submit a site development plot plan (see plot plan checklist).
- 2) Owner or applicant must supply two test holes per site.
Dig the test holes where you would like to place the drainfield (see minimum separation distances on plot plan checklist). Test holes must be 2' wide by 5' deep and 75' apart.
- 3) Stake property lines and corners or meet Sanitarian at site.
- 4) Call the Sanitarian at (503) 623-9237 when the test holes are ready, to schedule an inspection.

Site Ready for Inspection? Yes No If not, When? _____

I understand that this application and site for a septic site evaluation must be prepared according to instruction before action can be taken on this application. By my signature, I certify that the information I have furnished is correct, and hereby grant the Department of Environmental Quality and its authorized agent, Polk County Environmental Health Division, permission to enter onto the above described property for the purpose of this application.

Signature _____ Date _____

Owner Licensed Installer Authorized Representative Date Authorization Handed Out _____