

ENVIROCHECK LLC.
1612 Hastings Ave. W.
Port Townsend, WA 98368
PH 360-378-9400

TO BRUCE MUNN

FROM DALE

DATE 120909

TO INSTALL RISERS 450 + TAX
(1 1/2' DP)

OR

PARTS TO YOU
325

THANK YOU!

DALE

ENVIRO✓CHECK, L.L.C.
 1612 Hastings Ave. W.
 Port Townsend, WA 98368

INVOICE NO.

188870

SOLD TO:	BRUCE MUNN
ADDRESS:	231 COYLE RD
CITY, STATE, ZIP:	QUILCEDE, WA

SHIP TO:	
ADDRESS:	
CITY, STATE, ZIP:	

CUSTOMER'S ORDER:	SOLD BY: <i>DDW</i>	TERMS:	F.O.B.:	DATE: 12/09/09
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QUANTITY		DESCRIPTION	PRICE	AMOUNT
1	1	FES INSPECTION		225.00
1	2	COUNTY FILING FEE		41.00
1	3	LABOR		25.00
1	4	ATPT. LOCATE 'D' BOX (AUDIBLE)		50.00
	5			
	6			
	7		SUB	341.00
	8		TAX	28.64
	9			
	10	TOTAL DUE	\$	369.64

INVOICE
 71711-12114 RECEIVED

Jefferson County Department of Community Development
621 Sheridan St., Port Townsend WA 98368 (360) 379-4450

Evaluation of an Existing Onsite Sewage System (EES)

Draw on the back of this sheet a current plot plan showing location of:
Buildings, Drainfields, Septic Tanks, Wells, etc OR attach a current plot plan
identifying these items.

ALL SPACES MUST BE FILLED IN.

If information is not available enter (NV) or not applicable (NA).

Office Use Only

Date _____

Fee _____

Recpt _____

Check _____

Case # _____

Type of Evaluation

- ☒ Evaluation of on-site sewage system
☐ Evaluation of drinking water
☐ Evaluation of on-site sewage & drinking water

Reason for Evaluation

- ☐ Routine Operation and Monitoring Inspection
☒ Real Estate transaction
☐ Complete a Permit # _____
☐ Building Permit Review and/or no septic permit on file
☐ Other, explain _____

Date of evaluation 120909 Inspected by Dale Wurtsmith (Envirocheck, LLC)

Tax Parcel # 801334004 Permitted System ☒ yes ☐ no Permit/case # SEP 85-142

Subdivision, Division, Block and Lot(s) NA

Lot Size 1.2+/- Acres or Dimensions X

Current Owner RYAN & ANN DICKS

Site Address 231 COYLE RD, QUILCENE

Owner Phone # NV

Previous property owner name(s) - (NV if not known) NA

Directions to Site FM D.T., S1/8 Hwy 20, S1/8 Hwy 19, S1/8 CENTER RD., E1/8
DABOB RD., E1/8 COYLE RD.

Date System Installed 10-88 Age of Dwelling 1920 # Bedrooms 2

House Occupied ☐ yes ☒ no, vacant how long? 1 yr +

Who installed system? TONY BODENHEIMER

Send completed report to:

Owner

Name _____

Mailing Address _____

Phone/email/fax _____

Realtor or Other Representative

Name WINDERMERE / HOOD CANAL (BRUCE MUMF)

Mailing Address _____

Phone/email/fax 360-765-3122 (SENT 120909 BY ENVIROCHECK, LLC)

Laserfiche WebLink

Browse Search

Template: Permits
Case number
SEP85-00142
Parcel Number
801334004
Description

Issued Date

Final Date

First Name

Last Name

Status

ProjNo

MLA

Document Type

Help Logout MyWebLink

Page 2 of 7 Go

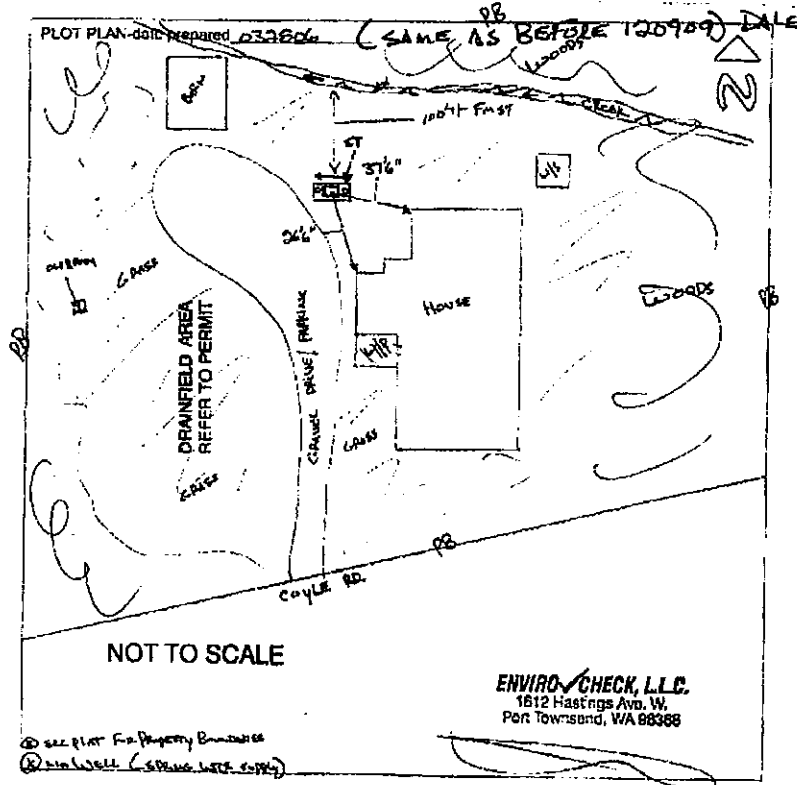
23.97%

Pages 2 to 7

JEFFERSON > Environmental Health > Septic files-on site sewage cases > Public Files > 1985 Public files SEP85 > SEP85-00142

Include the following items on your plot plan:

- ☐ Property boundaries
- ☐ Names of adjacent streets
- ☐ Driveways and parking spaces
- ☐ Surface water (ponds, creeks, etc)
- ☐ Buildings (residence, sheds, garages, etc)
- ☐ Vents
- ☐ Septic tank
- ☐ Drainfield (enter N/A if under MAR 29 2006)
- ☐ North Arrow



Permit # of Parcel # SEP 85-142
Evaluation of an Existing Onsite Sewage System 07/09/04, 10'

Date of Inspection 120909 Inspected by Dale Wurtsmith (Envirocheck, LLC)

Water Supply (fill in only if water supply is being tested in this evaluation)

Sample was taken Yes No Sample Results _____
 Well casing 12" above ground Yes No
 Sanitary Seal in place Yes No
 Public: offsite onsite Name of System _____
 Individual: offsite onsite
 Is well more than 100' to drainfield/disposal component yes no, if not, distance _____
 Is well more than 50' to tanks and effluent transport line yes no, if not, distance _____

ONSITE SEWAGE SYSTEM

Bedrooms/gallons per day indicated in County Health Dept. records for this case 2/240

#1 - Septic Tank

Tank size 1,000 gal. single compartment X two compartment CONCRETE material
 Riser to grade on Inlet yes X no. Riser to grade on outlet yes X no
 Condition of tank X good needs repair, describe _____
 1st comp. Scum (top layer) 0 in. sludge (bottom layer) 10 in.
 2nd comp. scum 0 in. sludge 10 in.
 Was ground water observed leaking into tank? yes X no
 If yes, where was water observed? _____
 Condition of baffles: Inlet: good X needs repair material (PVC) Concrete
 Outlet: X good needs repair material (PVC) concrete
 Screened Outlet X no yes, condition clean clogged/dirty

Septic tank needs to be pumped (per Jefferson County code 8.15.150 (1) (b)) yes X no

Effluent level at outlet (mark level on circle)

(eg: )



If effluent is below the outlet, indicate when tank was last pumped:

Does system include a pump? yes If yes, complete the next section X no (if no skip to section 3)

#2 - Pump Chamber

Tank size _____ gal. _____ Material. Riser to grade? yes no
 Condition of tank good needs repair, describe _____
 Solids in Tank (see 8.15.150) yes no scum _____ in. sludge _____ in.
 Was Ground water observed leaking into tank? yes no
 If yes, where was water observed? _____
 Screen around pump? no yes, condition clean dirty/clogged
 Shroud around pump? no yes
 Electrical Components
 Pump operating yes no, describe _____
 High water alarm functions yes no, if no, describe _____
 Elec. Panel condition good needs repair, describe _____
 Pump cycle drawdown _____ inches. Time for pump cycle _____ min/sec.
 Timer Settings _____ min/sec on _____ min/hrs off Floats secured: yes no

Permit # or Parcel # SEP 85-142
 Evaluation of an Existing Onsite Sewage System 07/30/04.pdf

#3 - DrainfieldAppropriate Vegetation in area ☒ yes _____ no. Describe vegetation Grass

Indications of surfacing sewage (check one) _____ yes, if yes, describe and diagram on plot plan

☒ no

_____ drainfield area is overgrown and not observable

Signs of parking/driving in area _____ yes ☒ no _____ drainfield area unknownGround settling or erosion _____ yes ☒ no _____ overgrown/not observable

Monitoring Port Observations (if present):

Residual Head _____ yes, _____ # of inches _____ no

Ponding in trench _____ yes, _____ # of inches of ponded effluent _____ no

Repair area is? _____ Available as shown on permit ☒ None evaluated or shown on permit

Addendum (page 5) is attached for evaluation of Treatment Unit or detailed evaluation of drainfield

_____ yes ☒ no

COMMENTS (attach additional sheet if necessary):

- #1 - A. RISERS ARE NOW MANDATORY.
 B. CENTER LID HAS A CORNER BROKEN OFF.
 (NEEDS RISER INSTALLED.)
 C. THE BOTTOM PIPE OF INLET BAFFLE IS MISSING.
 (NEED TO INSTALL PIPE AT BOTTOM OF PUK BAFFLE.)

other (A) The house / dwelling was unoccupied so no
 assessment of drainfield could be made.

SEE ATTACHED ADDENDUMWas a System Problem Identified? Yes ☒ if yes, what section #. 1(A&C) No _____

This report on the existing onsite sewage system is valid for the permitted or historic (if installed prior to permit requirements) use of the system only and does not constitute assurance of future County approvals (such as building permits) on this parcel. Any future application will be judged separately by the rules and laws in effect at that time.

I certify that the information provided is based on a review of County records and my direct observations at the time of inspection.

Name/Signature

Date

No guarantee of future onsite sewage system performance is implied or granted based on the information contained in this report. This report constitutes a summary of findings only.

Permit # or Parcel # SEP 85-142Evaluation of an Existing Onsite Sewage System 07/30/04 pdf

SEP 85-142DATE 12/9/09ADDRESS 231 Cayle Rd, QuilOWNER Dicks**ADDENDUM****Enviro Check, L.L.C. Company Disclaimer**

Based on what we were able to observe and our experience with on-site wastewater technology, we submit this Sewage treatment Inspection/Evaluation Report based on the present condition of the on-site sewage treatment system. Enviro Check, L.L.C. has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period of time in the present or future. Because of the numerous factors (usage, soil characteristics, previous failures, etc.) which may affect the proper function of a septic system. And the inability of our company to supervise or monitor the use of the system, or to inspect none visible areas of the system, this report shall not be construed as a warranty by our company that the system will function properly for any particular owner or buyer.

Enviro Check, L.L.C. disclaims any warranty, expressed or implied, arising from the inspection/evaluation of the septic system or this report/evaluation. We are also not ascertaining the impact the system is having on the groundwater table or environment.

Enviro Check, L.L.C. does not make any claim, warranty or guarantee as to where property lines/boundaries of properties are located. And does not warrant or guarantee any encroachments from on site sewage systems on to adjacent properties. Any indications of possible property lines/boundaries are approximations and do not indicate legal property lines or boundaries.

Enviro Check, LLC EES reports do not state where the exact location of drainfields are located. Only the general area is indicated, based on permit information that may or may not be correct.

Enviro Check, L.L.C. will not be held responsible in any way for information being undisclosed (intentionally or unintentionally) by Jefferson County employees, property owner, representative or other parties of interest.

All reports, including E.E.S. inspection reports are subject to any change by Jefferson County Environmental Health Department. Enviro Check, LLC is not liable for any such changes.

All parties are encourages to check county records for any information regarding properties.

Company

Enviro Check, L.L.C.
1612 Hastings Ave. W
Port Townsend, Wa. 98368
360-379-9400

I acknowledge that I have studied the information contained herein and that my assessment is honest, done in accordance with Jefferson County Ordinances, and to the best of my ability, correct.


Dale R. Wurtsmith Co-Manager

SAMPLING (Septic tank)

Date- _____

PH Result- _____

DO Result- _____

Temp. Result- _____

MEASUREMENTS

Counter Setting- PC _____ SF _____

Hour Meter- PC _____ SF _____