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Type

✓

Plans

SEP 10-0627

Permit Number

9965

Street Number

Hwy 1

Street Name

Jen

Community Code

099-050-014

APN

Application is hereby made to the Permit & Resource Management Department for a permit to construct or repair a sewage disposal system as described below in compliance with code of Sonoma County or for clearance for other construction.

APPLICANT: PLEASE PRESS HARD (USE BLACK INK). FILL IN BETWEEN HEAVY LINES ONLY. SEE BACK SIDE FOR TERMS OF PERMIT

Building PERMIT # SEP10-0627 EXISTING USE(S) ON SITE: Repair Sewerage - Daily

JOB ADDRESS 9965 Hwy 1 LOT --- LOT ---

NEAREST CROSS STREET Hwy 116 ZIP ---

ASSESSOR'S PARCEL No. 099050014

SUBDIVISION ---

CITY Sebastopol

SEWAGE DISPOSAL SYSTEM CONTRACTOR Behan + Conally

ADDRESS 4800 Cazadero Hwy PHONE No. 6325708

GENERAL CONTRACTOR ---

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code): Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury one of the following declarations: I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. I have and will maintain worker's compensation insurance as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are: ---

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I hereby affirm under penalty of perjury one of the following declarations: I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. I have and will maintain worker's compensation insurance as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are: ---

OWNER'S INFORMATION

OWNER'S NAME AJO-LP

MAILING ADDRESS 161 Robertson Wy STATE CA ZIP 95418

CITY Sebastopol

PHONE (707) 441-6364

INSTALLATION WILL SERVE: EXISTING RESIDENCE NEW RESIDENCE

REPLACEMENT RESIDENCE SECOND UNIT COMMERCIAL REPAIR

OTHER: Mobile Home + Camp ATTACHED CONDITIONAL STATEMENT

TOTAL (Existing + Proposed) 7.6 Acres

Water Supply: Public Private

CONTRACTOR INFORMATION

Contractor --- License Class --- Expiration Date ---

License Number ---

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

DATE 10/31/10 BY Mike Tremmer

DATE 10/31/10 BY Mike Tremmer

DATE 10/31/10 BY Mike Tremmer

TERMS OF PERMIT

APPLICANT AGREES THAT:

1. PRMD ENVIRONMENTAL HEALTH SPECIALIST WILL BE NOTIFIED A MINIMUM OF 24 HOURS PRIOR TO COMMENCING WORK.
2. PRMD ENVIRONMENTAL HEALTH SPECIALIST AND ENGINEER'S OR CONSULTING ENVIRONMENTAL HEALTH SPECIALIST'S INSPECTION, WHEN INDICATED, WILL BE OBTAINED PRIOR TO COVERING THE SYSTEM.
3. A COPY OF THE APPROVED SEWAGE DISPOSAL SYSTEM PLAN SHALL BE AVAILABLE AT THE JOB SITE AT ALL TIMES.
4. ANY DEVIATION FROM APPROVED PLAN WITHOUT PRIOR PRMD APPROVAL WILL BE CAUSE FOR STOPPING WORK UNTIL THE CHANGES ARE FULLY JUSTIFIED AND APPROVED.
5. THE SEPTIC TANK MUST BE I.A.P.M.O. APPROVED.
6. PRIOR TO AUTHORIZING OCCUPANCY OF ANY BUILDING WITH AN ENGINEER OR CONSULTING ENVIRONMENTAL HEALTH SPECIALIST DESIGNED SYSTEM, A SIGNED STATEMENT BY THE DESIGNER CERTIFYING THAT THE SYSTEM WAS INSTALLED IN COMPLIANCE WITH THE APPROVED PLAN MUST BE SUBMITTED TO PRMD.
7. THIS PERMIT IS SUBJECT TO REVOCATION IF FOUND TO BE IN NONCONFORMANCE WITH SONOMA COUNTY CODE OR STANDARDS OF PRMD.

IT IS UNDERSTOOD THAT THE ISSUANCE OF A PERMIT IN NO WAY INDICATES A GUARANTEE BY THE COUNTY OF SONOMA THAT THE SYSTEM WILL FUNCTION WITHOUT THE NEED FOR REPAIRS. THE OWNER IS REQUIRED TO MAKE ANY REPAIRS NECESSARY TO CONFINE SEWAGE BELOW THE SURFACE OF THE GROUND. APPROVAL OF THIS PERMIT IS BASED UPON INFORMATION SUBMITTED BY THE APPLICANT. FIELD CONDITIONS THAT VARY WITH THE INFORMATION SUBMITTED BY THE APPLICANT MAY CAUSE THE PERMIT TO BE VOID.

County of Sonoma
Permit & Resource Management Department
Well & Septic Section
2550 Ventura Avenue, Santa Rosa, CA 95403-2829
(707) 565-1900

SEPTIC SYSTEM INSPECTION

Site Address: 9165 Hwy 1
Owner: ADD LPD

REQUEST FOR INSPECTION

Date of call: 11/12/10 Time: _____
Caller: Nick Camelo
Caller's Phone No.: 632 5708
Remarks: _____
insp Mon 11/15?
915 A
Call taken by: (TE)

INSPECTION NOTICE

- Stop work immediately - Call Environmental Health Specialist
Telephone _____ Hours _____
- OK to cover leachfield tank
- Provide Engineer's letter of approval
- Provide "As Built" plan to scale not req.
- Call for inspection on pump & alarm
- Corrections needed - see remarks below
- OK to cover with Engineer's approval
- Issue Operational Permit

For further information call: Tom Yewell
Hours & Day: 565-1940 M-F
Remarks: Verified 120 LF leachline installed as planned. I was valve pr. Two monit wells added.
Need: Final letter from Consultant - Notarized Condit. Statement.
Environmental Health Specialist's Signature: Tom Yewell Date: 11/15/10

Received by: _____
Contractor's Signature

Posted



COUNTY OF SONOMA
PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403
(707) 527-1900 FAX (707) 527-1103

Jaime O'Bryan (Mgr)
*(H) 865-0502

MEMORANDUM

TO:	FROM:	Date
Site Address		Fax 865-2473
9965 Hwy 1	Bridgehaven Mobile Home Park	Site ID#

11/10/20/10 Site visit to see sewage failure after disc
This date w/ N. Camelia, Met Jaime O'Bryan - Discussed
Water Conservation measures in place, tank pump
to prevent discharge, moving trailers stored over
leach line area, use of Chlorine and for time to
render pooled sewage less hazardous. Will fax
consultant list.

TC to Kurt Knikendell w/ CDC. Advised
him of situation as FYI. (916) 253-1119. left
message.

5:15pm. Called Elsa to fax consultant list to Jaime. (OK)

11/21/10 821A Kirk w/ CDC left message that confirmed
receipt. County to issue re-open permit. (916) 698-0874.

11/8/10 - Disc w/ Mike Meinen.

11/8/10 - Give copy of permit to neighbor Mike. (P)

11/6/10 Const inspection. See tag (P)

11/22/10 - TC w/ owner Jaime O'Bryan. He stated 2 1/2 rods
w/in 5 FT of start of lower line had crushed line
Replaced line - believes will work now (P)
- OK -

October 26, 2010

Bridgehaven Trailer Park

AJO -- LP

9965 Highway 1

1161 Robertson Way

Jenner, CA 95450

Sacramento, CA 95818

(707) 865-2473 voice, fax

(916) 441-6364

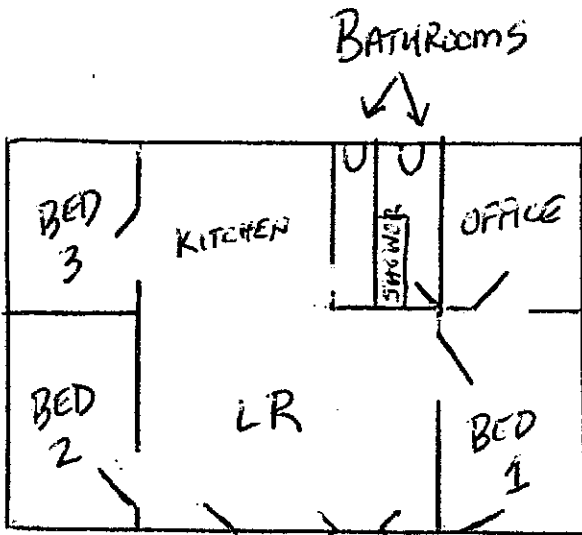
I, Jaime O'Bryan, manager of Bridgehaven Trailer Park, and agent to owner AJO-LP, authorize Mike Treinen to apply for the septic system repair permit at the above address.

10/26/10

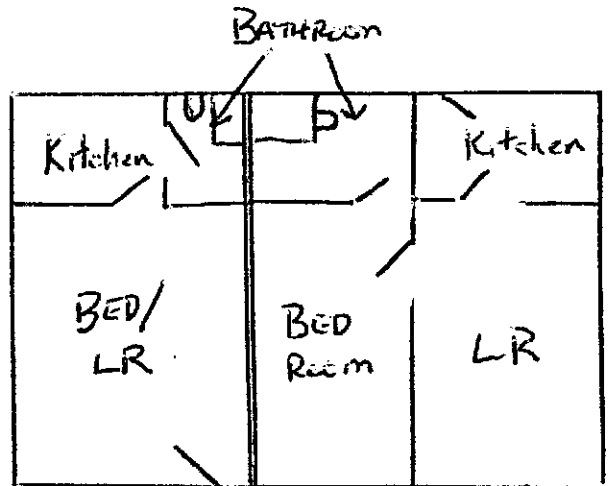
Jaime O'Bryan

Date

N ←



UNITS 3-4



UNIT 1

SEPTIC TANK IS 30 FEET NORTH

SONOMA COUNTY
 PERMIT AND RESOURCE
 MANAGEMENT DEPARTMENT
 REVIEWED BY
 PERMIT # SEP10-0627
M. Treinen
 DATE 10/18/10
 WELL AND SEPTIC SECTION

Floor plan must match that in HOD permit

**MIKE TREINEN, REHS
ONSITE WASTEWATER CONSULTANT
4910 HAYFIELD CT.
SANTA ROSA CA 95404-9550
707-526-0872**

Sunday
October 31, 2010

Tracey Fitzgerald, REHS
Well and Septic Division
Permit and Resource Management Department
2550 Ventura Ave
Santa Rosa CA 95403

Re: 9965 Hwy 1, Jenner – Bridgehaven Park
AP # 099-050-014

Dear Tracey,

I have been asked to design a septic system repair for the Bridgehaven Park. the current system is in failure and I understand you have already been to the site. An expedited permit issuance is requested due to weather concerns.

I am using the base plan produced by Bohan and Canelis in 1989 for the last system repair and proposing to use that proposed 1989 expansion area while adding one additional 30 foot line. I propose a three-way switch valving to use the new field (#1) and then re-utilize the 1989 system (#2) after a suitable resting period of 1-2 years. In addition, I am proposing use of a 92 foot system (#3) abandoned in 1989, assuming that a 21 year resting period has allowed a moderate degree of recovery. In the plans I am noting that this older system be used only in the period of May to October and only as long as it remains functional. The use of all three systems in this relatively constrained space should allow an increased lifespan for all three systems.

Depending on the soils found by Bohan and Canelis, I have suggested up to 18 inches of rock in the new field.

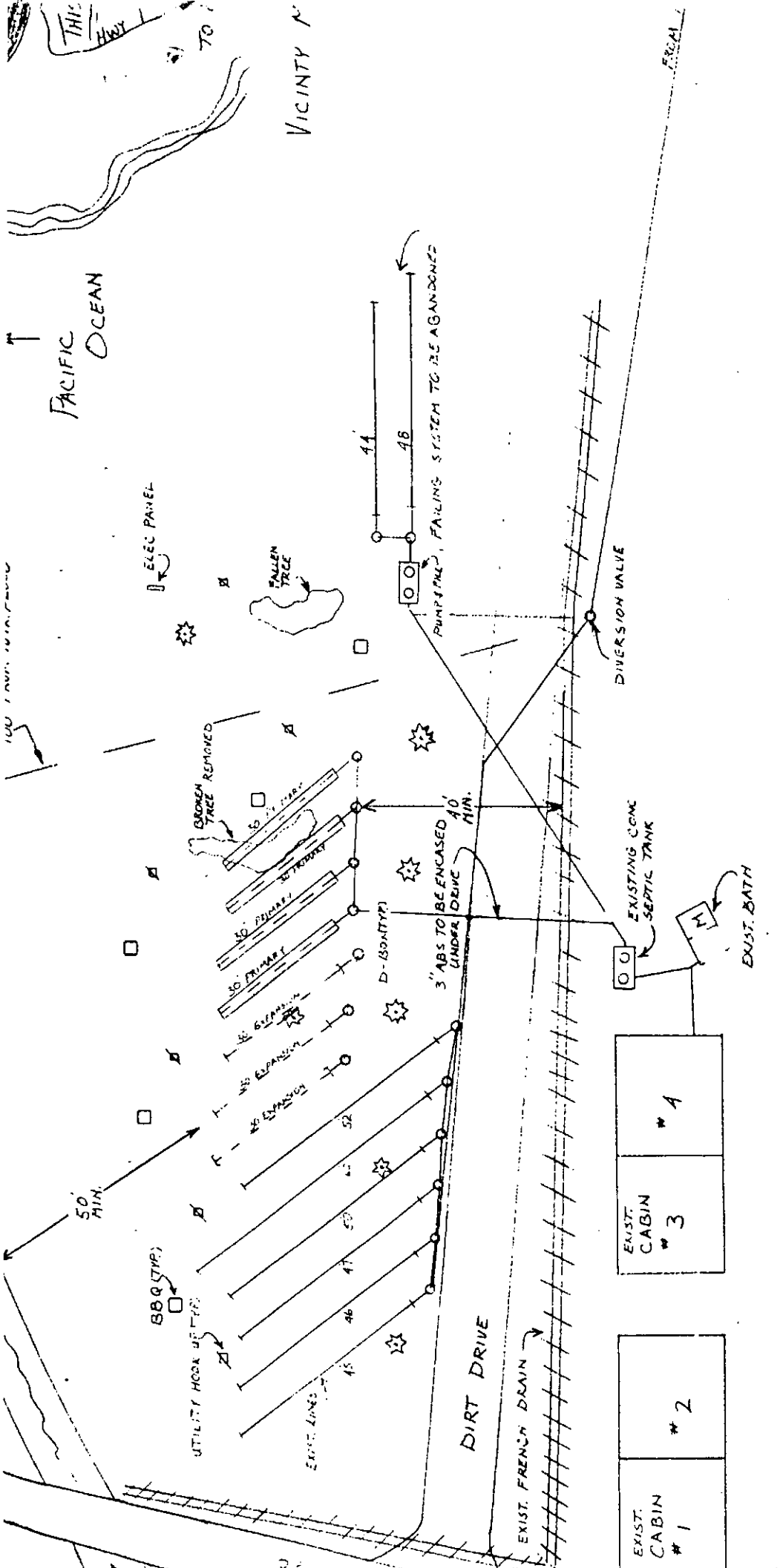
Should you have questions or need further information regarding this design, please contact me at 707-526-0872.

Respectfully,

Mike Treinen
Mike Treinen,
California Registered Environmental Health Specialist # 3826

c: Jaime O'Bryan, Manager

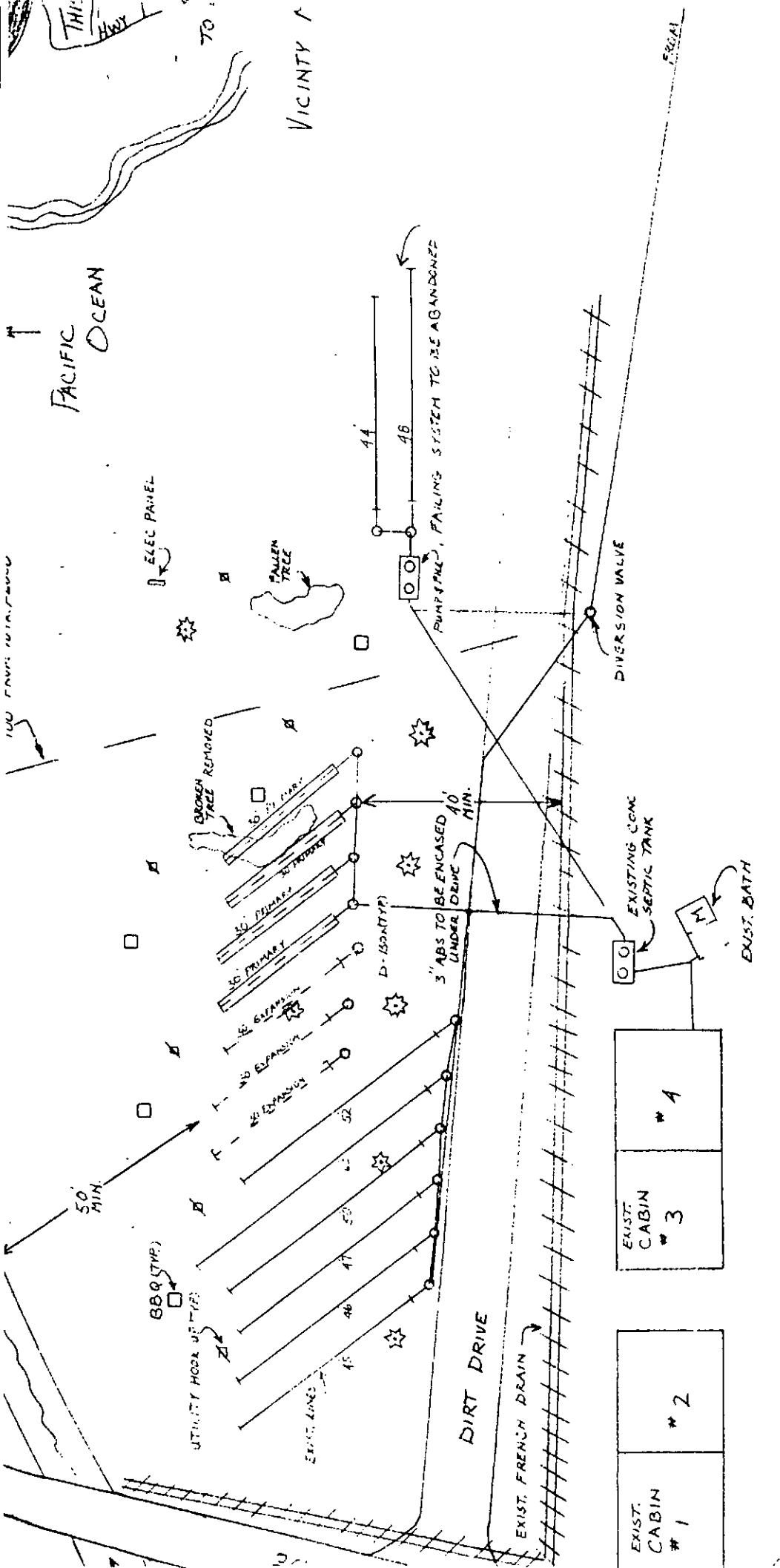
*Adv. (30-36")
- depth of trench?
- what do you propose for sanitary line?
- how to get uphill??*



AS-BUILT
 Sewage System Repair
 For
 Bridge Heaven camp gro
 9965 Hwy 1
 Jenner

- LEGEND**
- = BBQ
 - ☆ = TREE
 - ⊠ = UTILITY HOOK UP
 - = EXISTING LEACH LINE
 - = PROPOSED LEACH LINE
 - - - = EXPANSION LEACH LINES
 - = EXISTING FRENCH DRAIN
 - = DISTRIBUTION ZONE





- LEGEND**
- = BBQ
 - ☆ = TREE
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 - = PROPOSED LEACH LINE
 - - - = EXPANSION LEACH LINES
 - ||||| = EXISTING FRENCH DRAIN
 - = DISTRIBUTION BOX

AS-BUILT
 Sewage System Repair
 For
 Bridge Heaven camp ground
 9965 Hwy 1
 Jenner

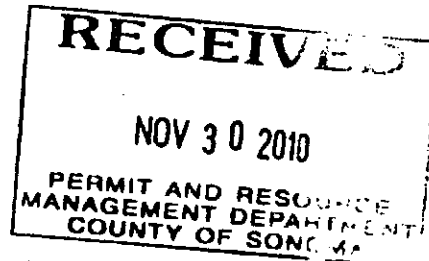


**MIKE TREINEN, REHS
ONSITE WASTEWATER CONSULTANT
4910 HAYFIELD CT.
SANTA ROSA CA 95404-9550
707-526-0872**

Final Designer Letter

November 27, 2010

Tracey Fitzgerald, REHS
Well and Septic Division
Permit and Resource Management Department
2550 Ventura Ave
Santa Rosa CA 95403



Re: 9965 Hwy 1, Jenner – Bridgehaven Park
AP # 099-050-014

Dear Tracey,

I inspected the septic system repair on November 15, 2010. Attached is an As Built plan. Effectively, the system was installed per plans except for the connection to the pre-existing system to the north which was in the 100 foot setback to the ten year flood line. Your office did not wish to see leach lines utilized which were within that setback area. This reduction leaves the switch valve as a *two* way valve. As soils were reasonably permeable, 18 inches of rock was placed in the 36 inch trenches for added sidewall absorption.

As my schedule allowed only for an early morning inspection, I noted to Bohan and Canelis the following items to be completed:

- 1) Correct the leak from the distribution box.
- 2) Finish the last several feet of the downhill line. A direct burial electrical line had been encountered and the electrician was due that morning to deal with that issue.
- 3) Finish the switch box and install access to that box through a gopher proofed irrigation box.

If these had been completed by the time of your later inspection, the repair has my approval for final County sign-off.

Should you have question regarding this system, please contact me at 707-526-0872.

Respectfully,

A handwritten signature in black ink that reads "Mike Treinen". The signature is written in a cursive, slightly slanted style.

Mike Treinen,
California Registered Environmental Health Specialist # 3826

c: Jaime O'Bryan, Manager
Nick Canelis, Bohan and Canelis General Engineering

Condition of Class I Private Sewage Disposal Repair Permit

WLS-027

Purpose: This form is to notify the applicant of the conditions under which a permit can be issued to repair an existing nonconforming sewage disposal system. Before a repair permit can be issued, the property owner is required to sign this form in the presence of a notary accepting the conditions applied to the permit.

SEP10-0627	AJO LP
Permit Number 9965 HIGHWAY 1	Applicant AS ABOVE
Site Address JENNER	Property Owner (mail courtesy copy) 099-050-014
City/Town CA	Assessor's Parcel Number(s)
State/Zip	

The proposed septic system repair meets the current Well & Septic Division Remodel and Repair Policy requirements for a Class I System (Best Available System, given site conditions and constraints). It does not meet all current code requirements that would apply to an undeveloped parcel or an increase in flow (e.g. bedroom addition). The repair has been authorized to allow continued occupancy of and improvements to the existing structure and in no way implies any guarantee of the work proposed or of the function, effectiveness or longevity of this repair. Inspection of the repair by this department will be to check proper installation only. The proposed repair permit will be issued upon acceptance of the conditions listed below.

The sewage disposal system is considered Conditional Class I and not code compliant due to the following reasons. There may be other site limitations that are not apparent at this time.

- Soil and groundwater conditions may impact proper septic system operation particularly during wet-weather conditions.
- The size of the leachfield appears smaller than typical for this size house or for soil types in the area.
- The installation does not conform to present code setbacks, specifically _____.
- Other: THIS IS A VOLUNTARY REPAIR FOR AN EXISTING SYSTEM FAILURE OF SURFACING SEWAGE.

The issuance of this permit does not constitute a recognition by the County of the legality of any structures on the parcel. Bedroom additions to structures served by this septic system cannot be approved unless the septic system can be brought into compliance with present Well & Septic Division Reutilization Policy criteria..

The use of low-flow toilets and other water conservation measures are strongly recommended to decrease the sewage flow to the septic system.

Dated: _____ Conditions accepted by Property Owner(s):

STATE OF CALIFORNIA, COUNTY OF _____ On this day _____ before me,
 _____, Notary Public, personally appeared,
 _____ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
 WITNESS my hand and official seal.

Signature _____ (SEAL)