

E

Type

Docs

Plans

SEP97-0835

Building Permit Number

22184

Street Number

Umland Circle

Street Name

Community Code

APN

PERMIT & RESOURCE MANAGEMENT DEPARTMENT  
WELL & SEPTIC SECTION

2550 VENTURA AVENUE, SANTA ROSA, CA 95403 TELEPHONE (707) 527-1900

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT

APPLICATION FOR PUBLIC HEALTH CLEARANCE FOR:

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

This permit application must be signed on all 3 signature lines by the same person (i.e., contractor or owner/builder). A letter of authorization from owner must accompany this application if agent is signing on owner's behalf.

Pressure Distribution

APPLICANT: PLEASE PRESS HARD (USE BLACK INK). FILL IN BETWEEN HEAVY LINES ONLY AND SEE REVERSE SIDE FOR INSTRUCTIONS.

BLDG. PERMIT NO. A	SDS PERMIT NO. SEP 97-0835	DATE ISSUED 12/1/97	CLEARANCE	NEW	REPT
-----------------------	-------------------------------	------------------------	-----------	-----	------

JOB ADDRESS: 22184 Umland Circle  
 NEAREST CROSS STREET: Ruoff  
 ASSESSOR'S PARCEL NO.: 109-420-036  
 SUBDIVISION: Timber Cove Unit 2 LOT 43 BLK. 6  
 CITY: Jenner STATE: CA ZIP: \_\_\_\_\_

OWNER'S NAME: John and Lynn Birmingham  
 MAILING ADDRESS: 2202 Chester Drive  
 CITY: Penngrove STATE: CA PHONE NUMBER: 94951 792-1496

SEWAGE DISPOSAL SYSTEM CONTRACTOR:  
 ADDRESS: \_\_\_\_\_ TEL. NO.: \_\_\_\_\_  
 GENERAL CONTRACTOR:  
 ADDRESS: \_\_\_\_\_ TEL. NO.: \_\_\_\_\_

INSTALLATION WILL SERVE:  
 RESIDENCE  APARTMENT HOUSE  COMMERCIAL  MOBILE HOME   
 MOTEL  OTHER  BUILDING CONST. NEW  ADDN/ALTER   
 NO. OF UNITS: 1 TOTAL NO. OF BEDROOMS: 1 WATER SUPPLY: PUBLIC  PRIVATE  LOT SIZE: 1.3 ac<sub>x</sub>

TERMS OF PERMIT

- HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SPECIALIST WILL BE NOTIFIED A MINIMUM OF 48 HOURS PRIOR TO COMMENCING WORK.
- HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SPECIALIST AND ENGINEER'S CONSULTATION ENVIRONMENTAL HEALTH SPECIALIST'S INSPECTIONS WHEN INDICATED WILL BE OBTAINED PRIOR TO COVERING THE SYSTEM.
- THE JOB CARD AND A COPY OF THE APPROVED SEWAGE DISPOSAL SYSTEM DESIGN SHALL BE AVAILABLE AT THE JOB SITE AT ALL TIMES.
- ANY DEVIATION FROM APPROVED PLAN WITHOUT PRIOR APPROVAL OF THE HEALTH OFFICER WILL BE CAUSE FOR STOPPING WORK UNTIL THE CHANGES ARE FULLY JUSTIFIED AND APPROVED.
- THE SEPTIC TANK MUST BE I.A.P.M.O. APPROVED.
- 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 THE PUBLIC HEALTH OFFICER.
- THIS PERMIT IS SUBJECT TO REVOCATION IF FOUND TO BE IN NON-COMFORMANCE WITH SONOMA COUNTY CODE OR STANDARDS OF THE PUBLIC HEALTH DEPARTMENT.
- THIS PERMIT IS NOT TRANSFERABLE.

IT IS UNDERSTOOD THAT THE ISSUANCE OF A PERMIT IN NO MANNER INDICATES THAT A GUARANTEE OF PERFECT AND INDEFINITE OPERATION OF THIS SYSTEM IS MADE BY THE COUNTY OF SONOMA PUBLIC HEALTH DEPARTMENT AND THAT THE OWNER IS REQUIRED TO MAKE ANY REPAIRS NECESSARY TO CONFINE SEWAGE BELOW THE SURFACE OF THE GROUND. APPROVAL IS BASED UPON INFORMATION SUBMITTED BY THE APPLICANT, FIELD CONDITIONS AT VARIOUS TIMES WITH APPLICATION MAY VOID PERMIT.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND THE INSTRUCTIONS ON THE REVERSE SIDE AND STATE THAT THE ABOVE IS CORRECT AND I AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING CONSTRUCTION OF PRIVATE SEWAGE DISPOSAL SYSTEMS. THIS PERMIT SHALL EXPIRE BY LITIGATION IF WORK IS NOT AUTHORIZED TO COMMENCE WITHIN 180 DAYS.

*[Signature]*  
SIGNATURE OF APPLICANT

The undersigned applicant for private sewage disposal permit certifies as follows:

CONTRACTOR'S LICENSE LAW CERTIFICATE

(COMPLETE EITHER A OR B)  
 A. THE APPLICANT IS LICENSED UNDER THE PROVISIONS OF THE CONTRACTORS' LICENSE LAW UNDER LICENSE NUMBER \_\_\_\_\_  
**SONOMA COUNTY PERMIT AND RESOURCE**  
 WHICH LICENSE IS IN FULL FORCE AND EFFECT.  
 B. THE APPLICANT IS EXEMPT FROM THE PROVISIONS OF THE CONTRACTORS' LICENSE LAW FOR THE FOLLOWING REASONS:  
 1) OWNER/BUILDER   
 2) OTHER (EXPLAIN)

DATE: 12-1-97 APPLICANT: *[Signature]*

WORKMEN'S COMPENSATION CERTIFICATE

(One or Two must be completed)  
 1. A currently effective certificate of Workmen's Compensation Insurance coverage is on file with the Sonoma County Public Health Department.  
 Compensation Insurance Policy # SIERRA 015079 06/18/97BC1  
 is currently in force. # 970835 \$ 148.00  
 2. I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workmen's compensation laws of California.  
 # \*\*TTL \$ 148.00  
 # QUEST \$ 148.00  
 # LANG \$ 00.00

DATE: \_\_\_\_\_ APPLICANT: *[Signature]*

LAYOUT PLAN APPROVED BY: DAVID DONAUAR DATE: 12-1-97 CONSTRUCTION APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

WELL & SEPTIC SECTION WHEN APPROVED THIS IS YOUR PERMIT Site ID Number OPR97-2934 GTO

DENIED  
 ORIGINAL PERMIT

DIST. (1) ORIG. HEALTH DEPT. (2) HEALTH DEPT. (3) PERMITTEE (4) BLDG. INSP. DEPT. (5) BLDG. INSP. DEPT. NOT TRANSFERABLE



Mailed 3-12-92

**COUNTY OF SONOMA**  
**PUBLIC HEALTH DEPARTMENT**  
**ENVIRONMENTAL HEALTH SERVICES**

MARK A. KOSTIELNEY  
Director of Public Health  
GEORGE R. FLORES, M.D.  
Health Officer

1030 CENTER DRIVE, SUITE A • SANTA ROSA • CALIFORNIA 95403-2067 • TELEPHONE (707) 525-6500

**DATE:** March 12, 1992  
**TO:** Sonoma County Planning Department, Attn: Kathi Jacobs  
**FROM:** Sonoma County Environmental Health Department  
**SUBJECT:** Application for Coastal Permit

**Name:** Greg & Kari Kelly  
**File No.** CP 92-075  
**Location:** 22184 Umland Circle, Timber Cove  
**A.P. No.** 109-420-36  
**Purpose:** Drilling of private well

1. Subject application has been reviewed by this department and we find:
  - a. ( ) We can see no environmental health reason to deny this request.
  - b. (X) If this application is approved, it is recommended it be subject to the following conditions:

Apply for a well drilling permit meeting all standards of the Sonoma County Division of Environmental Health.

2. (X) Additional comments:

Well should be placed as far as possible from neighboring property lines.

*Mike Treinen*  
MIKE TREINEN, R.E.H.S.  
Land Use Specialist

MT/mn

CC: Applicant

DD  
104

Sonoma County Public Health Department  
Environmental Health Division  
1030 Center Drive - Suite A  
Santa Rosa, CA 95402

OFFICE USE ONLY

Fee's Paid \_\_\_\_\_

Date Paid \_\_\_\_\_

Receipt # \_\_\_\_\_

CONTROL No. 12502  
92-3615

NOTIFICATION  
TO PERFORM  
SOIL PERCOLATION TEST

PUBLIC HEALTH DEPARTMENT

NOV 18 1992

DIV. OF E.H.

Address 22184 UMLAND CIRCLE

A.P. No. 109-420-36

Property Owner GREG KELLY

Address 22020 TIMBER LAKE ROAD  
JENNER, CA 95450

Test Conducted by ADDBE ASSOCIATES, INC

Certified by STEVE BROWN

Water Supply-Private \_\_\_\_\_ Public

Land Division Yes \_\_\_\_\_ No

Planning Application Type/File No. \_\_\_\_\_  
Minor or Major Subdiv.# \_\_\_\_\_

Wet weather Test yes \_\_\_\_\_ no

Wet weather ground water determination  
Yes \_\_\_\_\_ No

NOTE: Percolation test shall be completed within 120 days.  
See Section 13 - C of Sonoma County Percolation Test Methods for Proper Notification!

Submit a plot plan showing area to be tested in relationship to property features.

001342D  
SEP TANK 248.00  
TTLAMT 248.00  
CHECKS 248.00  
CHANGE 0.00  
**1538 #2 8:17**

11/18/92

PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

File N  
P# 253-89

mailed 5/10/89

**REQUEST FOR SERVICE**  
COUNTY OF SONOMA  
ENVIRONMENTAL HEALTH DIVISION  
PUBLIC HEALTH DEPARTMENT

Recheck Date  
/ / 19

Location of Service	22184 Umland Circle, Timber Cove		By	Date	Apr 17, 1989
Requesting Person	Dale R. Davis		Phone No. of Person Requesting Service	823-9123	
Address of Person Requesting Service	3460 Burnside Rd., Sebastopol 95472	Owner or Agent to be Contacted	Felix Buchenroth		
Reason for Request	Preliminary site review for percolation test				
	Engr: Adobe Associates		PUBLIC HEALTH DEPARTMENT		
	526-2664		APR 14, 1989		
	DIV. OF EH				

For office use only  
Property No.

SANITARIAN

Request Classifier:  
 A. Complaint  
 B. Consultation  
 C. Approval  
 D. Other

Person Requesting Service  
 1. Tenant  
 2. Neighbor  
 3. Owner or Mgr.  
 4. Official Agency  
 5. Anonymous  
 6. Other

Disposition  
 A. Clear  
 B. Follow Up  
 C. Referral  
 D. H.O.H.  
 E. D.A.H.  
 F. Court  
 G. No Violation  
 H. Other

Census Tract:    District:

Duration  
 1. 1-15  
 2. 16-30  
 3. 31-45  
 4. 46-1 hr.  
 5. 1:01-1:15  
 6. 1:16-1:30  
 7. 1:31-1:45  
 8. 1:46-2 hrs.  
 9. 2:01 and over

TOTAL VIOLATIONS

• REPORT OF INVESTIGATION •

4/20/89 site review w/ Dale Davis + Merrill Van Fleet.

- Site was too steep for backhoe access, and is very constrained by spring activity, formation, and steep slopes.

- A 2' hole had been dug about the spring and showed shallow unsuitable (mottled) clay-clay loam type soils.

OK  
[Signature]

- A few small areas of reasonable slope could be explored by hand dug profiles to fl or constructing a backhoe access road. Some cleaning may be needed.

(U1342)  
REP TANK 120.00  
TTLAMT 120.00  
CHECKS 120.00  
CHANCE 0.00  
04/16/89  
01:58 H2 20:44

Mike Treiman, REHS 5/3/89  
Sanitarian Date

WHITE: Upper section to file  
Lower section to file

YELLOW: Retained for office file at time form is typed

PINK: Upper section to person requesting service (when appropriate)  
Lower section to owner or occupant  
GOLDENROD: Retained by District Sanitarian

Job No. 92191

410 12-13-93  
**REQUEST FOR SERVICE**  
COUNTY OF SONOMA  
ENVIRONMENTAL HEALTH DIVISION  
PUBLIC HEALTH DEPARTMENT

Recheck Date

For office use only  
Property No.

9  
DD/S  
ID-12502  
93-1606-14

Location of Service	22184 Umland Circle	By	J. Jenner	Date	11-18-93
Person Requesting Service	Steve Brown Adobe Associates, Inc.	Phone No. of Person Requesting Service	526-2664		
Address of Person Requesting Service	1142 State F. cm Drive Santa Rosa, CA 95403	Owner or Agent to be Contacted			
Reason for Request	Plan Check for <del>testing</del>				
Encl: 2 plans					
Calculations					

PUBLIC HEALTH DEPARTMENT

NOV 22 1993

DIV. OF E.H.

• REPORT OF INVESTIGATION •

OK { Please address Mike Treinon's comment concerning spring activity and if w/in 150' of septic show on plot plan. (5-3-89)

Section III, C, 19, 522, B, 2  
→ increase trench spacing one foot for every 6" increase of gravel.

OK f Also observe 10' fl lateral setback.

Provide easement survey monumentation & recordation prior to design approval

001342D
SEP TANK 331.00
TTLAMT 331.00
CHECKS 331.00
CHANGE 0.00
11/22/93
085B H2 10:45

SANITARIAN

Request Classification

A. Complaint  
 B. Consultation  
 C. Approval  
 D. Other

Person Requesting Service

1. Tenant  
 2. Neighbor  
 3. Owner or Mgr.  
 4. Official Agency  
 5. Anonymous  
 6. Other

Disposition

A. Clear  
 B. Follow Up  
 C. Referral  
 D. H.O.H.  
 E. D.A.H.  
 F. Court  
 G. No Violation  
 H. Other

Census Tract      District

Duration

1. 1-15  
 2. 16-30  
 3. 31-45  
 4. 46-1 hr.  
 5. 1:01-1:15  
 6. 1:16-1:30  
 7. 1:31-1:45  
 8. 1:46-2 hrs.  
 9. 2:01 and over

TOTAL VIOLATIONS

DM DONAVAN

12-8-93 525-6506

WHITE: Upper section to file  
Lower section to file  
YELLOW: Retained for office file at time form is typed  
LLO44 (7/92)

Date  
PINK: Upper section to person requesting service (when appropriate)  
Lower section to owner or occupant



Unmailed 1/8/93  
COUNTY OF SONOMA

MARK A. KOSTIELNEY  
Director of Public Health  
GEORGE R. FLORES, M.D.  
Health Officer

PUBLIC HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

1030 CENTER DRIVE, SUITE A • SANTA ROSA • CALIFORNIA 95403-2067 • TELEPHONE (707) 525-6500

1-4-92  
DATE

odoloe

1142 State Farm Dr

SR Co. 95403

PERCOLATION TEST REPORT EVALUATION

Site Address: 22184<sup>1/2</sup> Umland. TC A.P.# 109.420.36

Owner: Kelly

We have reviewed the subject percolation test report. Evaluation of data provided does not substantiate approval for construction of an on-site sewage disposal system for the reason(s) checked below:

- The leachfield and reserve area do not have an acceptable percolation rate for proposed system.
- A seasonal high groundwater table exists in the area.
- Requirements of the Regional Water Quality Control Board relating to on-site sewage disposal systems have not been satisfied.
- Test was not conducted in accordance with Sonoma County Standards.
- The tests indicate there is insufficient depth of suitably permeable soil above impervious formations of clay and/or rock.
- Test not certified in accordance with Section 10 of the Sonoma County Site Evaluation Procedure.

Other: Perc test holes may have been run on slope > 30%. Please plot pt's on accurate topographic map. Include cuts > 3', by lic. surveyor.

If you have any questions, please call Don Dominguez at (707) 525-6506 from 7:30 to 9:00 am Tu through Fr

need 6 holes in < 30% ~~for~~

DD  
104

N

mailed 11-19-92

ID-12502  
92-0383

**REQUEST FOR SERVICE**  
COUNTY OF SONOMA  
ENVIRONMENTAL HEALTH DIVISION  
PUBLIC HEALTH DEPARTMENT

Recheck Date  
/ / 19

A.P.# 109-4236

Location of Service 22188 UMLAND, Timbercove	By	Date
Person Requesting Service Mia Kelly for Huffman Eng	Phone No. of Person Requesting Service 893 2190	
Address of Person Requesting Service 876 Hranovstein Hwy S, Sebastopol	Owner or Agent to be Contacted Rob Huffman	
Reason for Request		
	adobe	
	1142 State Farm Dr	
	SR 95403	

For office use only  
Property No.

SANITARIAN

Request Classification  
 A. Complaint  
 B. Consultation  
 C. Approval  
 D. Other

Person Requesting Service  
 1. Tenant  
 2. Neighbor  
 3. Owner or Mgr.  
 4. Official Agency  
 5. Anonymous  
 6. Other

Disposition  
 A. Clear  
 B. Follow Up  
 C. Referral  
 D. H.O.H.  
 E. D.A.H.  
 F. Court  
 G. No Violation  
 H. Other

Census Tract  
District

Duration  
 1. 1-15  
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 7. 1:31-1:45  
 8. 1:46-2 hrs.  
 9. 2:01 and over

TOTAL VIOLATIONS

• REPORT OF INVESTIGATION •

Soil profiles dug on 22188 umland revealed conditions suitable for PD or shallow sloping systems. However 2 profiles out of 3 were on slope exceeding the 30% limit. Topographic mapping req'd to determine extent of erable area. If slopes >30% are intended to be used, waiver w/NCWQSR & blessing req'd. Ifs their decision may not be allowed. Especially due to PD/SS proposal (shallow soils). perc & hydro at trench bottoms & perc or hydro 2' and 2' below below.

Easement or LHA from 22188 to 22184 req'd.	0013420
	SEP TANK 170.00
	TTLAMT 170.00
	CHECKS 170.00
	CHANGE 0.00
Proof of water also req'd., 02/11/92	699B H2 8:16

\*Note >30% slope waiver approval by WQB is rare.

D.M. DONAVAN

11-18-92

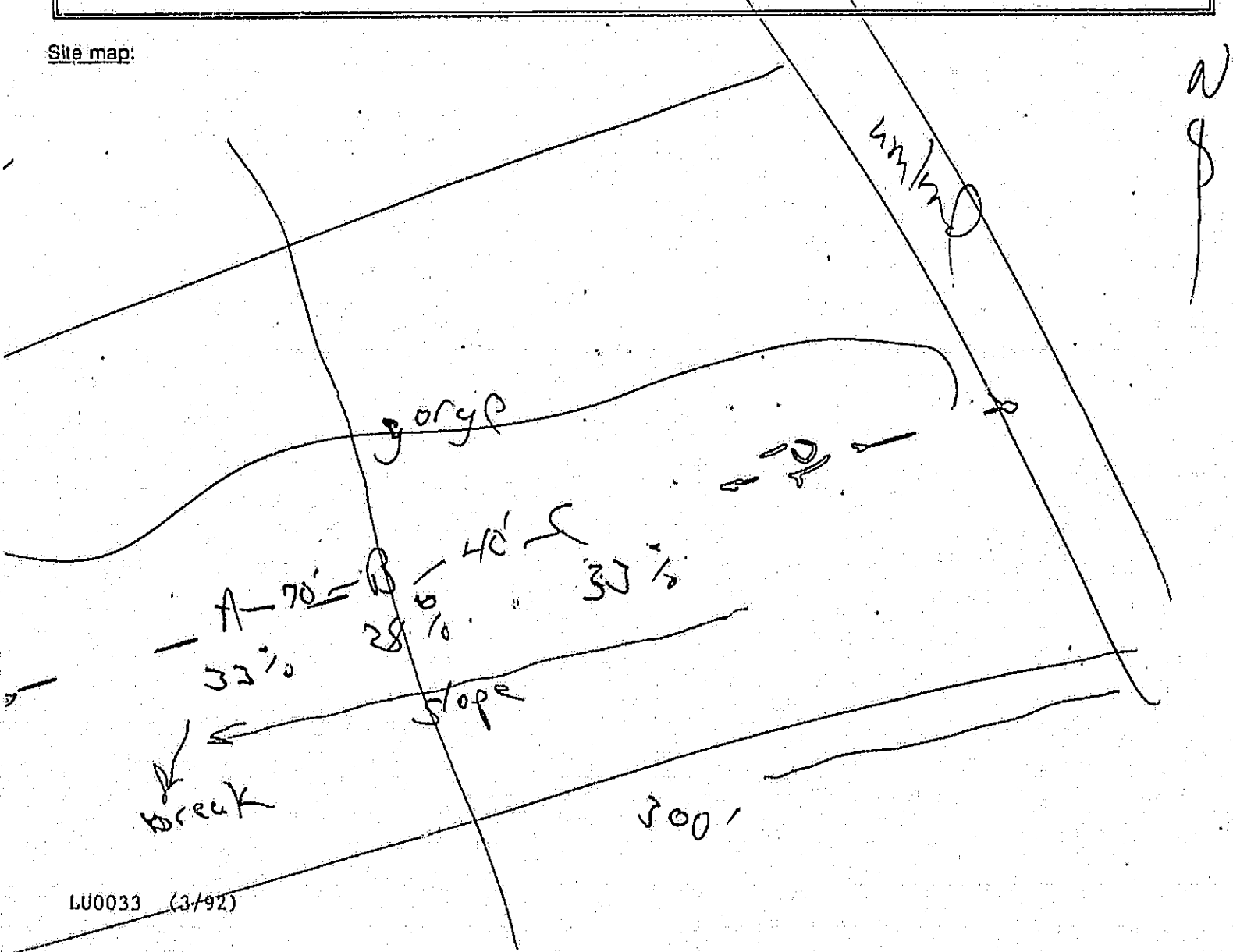
525 6506

SONOMA COUNTY PUBLIC HEALTH DEPARTMENT  
Pre-Perc Field Notes

2

Address: 22184 Umland	Pre-perc date:	Time:
AP#:	Site review by:	
Test conducted by:	Subdivision: Yes <input type="checkbox"/> No <input type="checkbox"/>	Initial <input type="checkbox"/> Supp. <input type="checkbox"/>
Test verified by:	Water availability zone:	
Special standards area:	SCS soil type:	
Topography: Ridge <input type="checkbox"/> Slope <input type="checkbox"/> Sadr <input type="checkbox"/> Basin <input type="checkbox"/>	Convex <input type="checkbox"/> Planar <input type="checkbox"/> Concave <input type="checkbox"/>	
Setbacks: Cutbank/grade break <input type="checkbox"/> Wells <input type="checkbox"/> Springs <input type="checkbox"/> Streams <input type="checkbox"/> Ponds <input type="checkbox"/> Drainage <input type="checkbox"/>		
Areas of concern: Trees <input type="checkbox"/> Drainage <input type="checkbox"/> Geology report <input type="checkbox"/> Rock outcrops <input type="checkbox"/> % Rock _____ GW <input type="checkbox"/>		
Hydrometer test: Yes <input type="checkbox"/> No <input type="checkbox"/> Depth(s) _____ Bulk density: Yes <input type="checkbox"/> No <input type="checkbox"/> Depth _____		
Wet-weather perc required: Yes <input type="checkbox"/> No <input type="checkbox"/> Wet-weather groundwater required: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Subsoil perc depth(s) _____ Pump system: Yes <input type="checkbox"/> No <input type="checkbox"/> Perc depth(s) _____		
Type of system _____ Eng. design <input type="checkbox"/> Topographic map req. <input type="checkbox"/> Geology report req. <input type="checkbox"/>		
Comments: Fogged		

Site map:



for 22184 Profile B Average Ground Slope 23

Depth	Munsell Color	% Rock	Texture	Structure	Consistency	Moist	Pores	Roots
24	similar to A		L					
48			SL					
92			soft weathered sandstone					

Mottling \_\_\_\_\_ Reduction  Oxidation  Depth to groundwater \_\_\_\_\_ Perc depth \_\_\_\_\_

Other: OK to test for 36-48 PD or SS hyd 3648-7'

22184 Profile C Average Ground Slope 33

Depth	Munsell Color	% Rock	Texture	Structure	Consistency	Moist	Pores	Roots
54			SC					
98			SL					

Mottling \_\_\_\_\_ Reduction  Oxidation  Depth to groundwater \_\_\_\_\_ Perc depth \_\_\_\_\_

Other: Not usable.

Profile A Average Ground Slope 33%

Depth	Munsell Color	% Rock	Texture	Structure	Consistency	Moist	Pores	Roots
19	10YR 4/2	<5	L	B-G	L-Fr	D	excellent	many
38	5/6		SL	B	Fr	Dr	few	few
82	4/8	95		M	EF	"D	d	φ
			dense sandstone					

Mottling \_\_\_\_\_ Reduction  Oxidation  Depth to groundwater \_\_\_\_\_ Perc depth \_\_\_\_\_

Other: OK to test for PD slope limit may be exceeded.

Abbreviations: ∴ → water

- USDA Texture: Gravel=G, Sand=S, Loamy Sand=LS, Sandy Loam=SL, Sandy Clay Loam=SCL, Sandy Clay=SC, Silt Loam=SIL, Loam=L, Clay Loam=CL, Silty Clay Loam=SICL, Clay=C
- Structure: Granular=G, Platy=P, Blocky=B, Prismatic=Pr, Massive=M, Columnar=C
- Consistency: Loose=L, Very Friable=VFr, Friable=Fr, Firm=F, Very Firm=VF, Extremely Firm=EF, Solid (BH refusal)=S
- Moisture: Dry=Dr, Damp=D, Very Damp=VD, Saturated=S, Seepage=Se

DD 05 MA

Job No. 92191

6-23-94

**REQUEST FOR SERVICE**  
COUNTY OF SONOMA  
ENVIRONMENTAL HEALTH DIVISION  
PUBLIC HEALTH DEPARTMENT

ID 12502  
93-1611-LL

Recheck Date

For office use only  
Property No.

Location of Service	22184 Umland Circle <i>Jenner</i>	By	Date
Person Requesting Service	Steve Brown Adobe Associates, Inc.	Phone No. of Person Requesting Service	11-18-93 526-2664
Address of Person Requesting Service	1142 State Farm Drive Santa Rosa, CA 95403	Owner or Agent to be Contacted	Gregory P. Kelly 22020 Timber Cove Rd. Jenner, CA 95450

SANITARIAN

Request Classification

A. Complaint  
 B. Consultation  
 C. Approval  
 D. Other

Person Requesting Service

1. Tenant  
 2. Neighbor  
 3. Owner or Mgr.  
 4. Official Agency  
 5. Anonymous  
 6. Other

Disposition

A. Clear  
 B. Follow Up  
 C. Referral  
 D. H.O.H.  
 E. D.A.H.  
 F. Court  
 G. No Violation  
 H. Other

Census Tract      District

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 8. 1:46-2 hrs  
 9. 2:01 and over

TOTAL VIOLATIONS

Vesting Certificate on approved plans

# 109-42-36

PUBLIC HEALTH DEPARTMENT

NOV 22 1993

DIV. OF E.H.

• REPORT OF INVESTIGATION •

OK to vest one bedroom PD design

SONOMA COUNTY PUBLIC HEALTH DEPARTMENT

VESTED

APPROVED *D.M. DONOVAN* DATE *6-17-94*

0014790

VESTCERT 215.00

TTLAMT 215.00

CHECKS 215.00

CHANGE 0.00

11/22/93

0368 #2 10:45

525 6506

Sanitarian

Date

WHITE: Upper section to file  
Lower section to file

YELLOW: Retained for office file at time form is typed  
LU044 (7/82)

PINK: Upper section to person requesting service (when appropriate)  
Lower section to owner or occupant

REPRO GTO 02

Recording Requested By:

When Recorded, Return to:

**SONOMA COUNTY PUBLIC HEALTH DEPARTMENT  
SEWAGE DISPOSAL SYSTEM VESTING CERTIFICATE**

NAME: Gregory P. Kelly

ADDRESS: 22184 Umland Circle, Jenner, CA 95450

ASSESSOR'S PARCEL NO. 109-42-36

SITE I.D. NO. 12502 PERMIT NO. 93-1611-LU

The above site has been reviewed and found to be in compliance with State and County sewage disposal system regulations. This approval will remain valid for the time period noted below.

Pursuant to Sonoma County Code Section 24-56:

- 1) Private sewage disposal permit will be issued for the approved sewage disposal system if proper application is made and fees are paid prior to June 17, 1997 (three years from date of issuance).
- 2) A Public Health Clearance to connect to the existing septic system will be approved if proper application is made and fees are paid prior to \_\_\_\_\_ (two years from date of issuance).

This certificate will expire and become null and void if proper application for a private sewage disposal permit (box 1 above) or for a Public Health Clearance (box 2 above) is not made within the specified time period. The site will be subject to all regulations in effect upon expiration of a certificate.

This certificate may be revoked for causes specified in Sonoma County Code Section 24-57.

Date of certificate issuance: June 17, 1994

Approval by: DM DONAVAN

SONOMA COUNTY PUBLIC HEALTH DEPARTMENT REVIEWED BY
<u>DM</u>
<u>6-23-94</u> DATE
ENVIRONMENTAL HEALTH

(Not valid without Department stamp in space at right)

LU0063

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

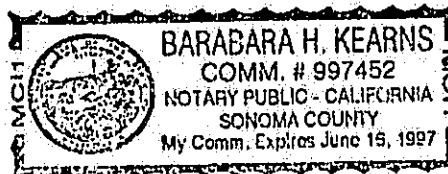
County of Sonoma

On June 23, 1994 before me, Barbara H. Kearns, Notary Public

personally appeared, D. M. Donavan

[X] personally known to me - OR - [ ] proved to me on the basis of satisfactory evidence to be the person(X) whose name(X) 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(X) on the instrument the person(X), or the entity upon behalf of which the person(X) acted, executed the instrument.

WITNESS my hand and official seal.



Barbara H. Kearns

(SEAL)

\* \* \* \* \* OPTIONAL INFORMATION \* \* \* \* \*

DESCRIPTION OF ATTACHED DOCUMENT

TITLE OR TYPE OF DOCUMENT Vesting Certificate

DATE OF DOCUMENT June 17, 1994

NUMBER OF PAGES One

SIGNER(S) OTHER THAN NAMED ABOVE N/A

SONOMA COUNTY PUBLIC HEALTH DEPARTMENT  
DIVISION OF ENVIRONMENTAL HEALTH  
1030 Center Drive, Suite A - Santa Rosa, CA 95403

SOIL PERCOLATION TEST DATA

Address of Percolation Test: 22184 UMLAND CIRCLE		A. N. Number: 109-420-36		Winter Groundwater Test: No		"Wet Weather Percell": No	
Owner's Name: GREG KELLY				Field Check: Yes No		By: _____	
				Date: _____		Time: _____	
Owner's Mailing Address: 22020 TIMBER COVE ROAD				Review of Data: Rates Acceptable: Yes No			
City/State/Zip Code: JENNER, CA 95450		Telephone Number: (707) 947-3311		Remarks:		Receipt Information:	
Water Supply: Private Public <input checked="" type="checkbox"/>		Lot or Parcel Size:					
Test Conducted By:		Telephone Number: ( )					
Address/City/State/Zip Code:							
Type of Soil:			Date of Test: 11/18/92		Circle One: <u>Initial Test</u> Supplemental		Sanitarian

Hole No.	Depth of Hole	Pipe Length	Pipesoak Remaining	Start		First Measurement		Second Measurement		Third Measurement		Fourth Measurement		Fifth Measurement		Sixth Measurement		RATE
				Time	Inches	Time	Inches	Time	Inches	Time	Inches	Time	Inches	Time	Inches	Time	Inches	
1	43	24	Ø	8:55	12	9:55	16	10:55	18 1/4	11:55	19 5/8	12:55	20 5/8	1:55	21 1/2	2:55	22 3/8	69
2	43	24	Ø		12		17 3/8		20 1/8		22 1/4		16 1/2		19 1/8		21 1/8	32
3	36	24	Ø		12		17 1/4		18 7/8		20 1/8		21 1/8		22 1/2		16	69
4	46	24	Ø		12		15		16		17		17 3/4		18 1/2		19 1/4	80
5	36	24	Ø		12		14 5/8		16		17 1/8		18	Ø	18 7/8		19 3/4	69
6	48	24	Ø		12		19 3/4		D/R		19 3/8		23 1/2		18 5/8		23	15
																		56
																		334

**Van Houten Consultants, Inc.**

Geologists  
Geotechnical Engineers  
Environmental Scientists



November 16, 1992  
Job No. 92-285.72

Adobe Associates  
1142 State Farm Drive  
Santa Rosa, CA 95403

Attention: Mr. Steve Brown

Re: Results of Soil Texture Analysis  
By Bouyoucos Hydrometry Method

Client Address: 22184 Umland


The results of soil texture analysis on soil samples received on  
November 13, 1992 are as follows:

SAMPLE LOCATION	No. B at 36 inches
% Plus No. 10	3.6
% Sand	75.4
% Clay	8.8
% Silt	15.8
D <sub>s</sub> g/cc	--

We are pleased to provide laboratory services for you and look forward to your continued work. If you have any questions, please call.

VAN HOUTEN CONSULTANTS, INC.

By:

  
Wayne G. Oakley  
Laboratory Director

wgo/jb/#111

**Van Houten Consultants, Inc.**

Geologists  
Geotechnical Engineers  
Environmental Scientists



November 16, 1992  
Job No. 92-285.72

Adobe Associates  
1142 State Farm Drive  
Santa Rosa, CA 95403

Attention: Mr. Steve Brown

Re: Results of Soil Texture Analysis  
By Bouyoucos Hydrometry Method

Client Address: 22184 Umland

The results of soil texture analysis on soil samples received on  
November 13, 1992 are as follows:

SAMPLE LOCATION	No. B at 48 inches
% Plus No. 10	0.9
% Sand	61.0
% Clay	20.8
% Silt	18.2
L <sub>b</sub> g/cc	--

We are pleased to provide laboratory services for you and look forward to your continued work. If you have any questions, please call.

VAN HOUTEN CONSULTANTS, INC.

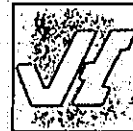
By: 

Wayne G. Oakley  
Laboratory Director

wgo/jb/#111

**Van Houten Consultants, Inc.**

Geologists  
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November 16, 1992  
Job No. 92-285.72

Adobe Associates  
1142 State Farm Drive  
Santa Rosa, CA 95403

Attention: Mr. Steve Brown

Re: Results of Soil Texture Analysis  
By Bouyoucos Hydrometry Method

Client Address: 22184 Umland

The results of soil texture analysis on soil samples received on  
November 13, 1992 are as follows:

SAMPLE LOCATION	No. B at 84 inches
% Plus No. 10	1.0
% Sand	63.0
% Clay	17.8
% Silt	19.2
D <sub>b</sub> g/cc	--

We are pleased to provide laboratory services for you and look forward to your continued work. If you have any questions, please call.

VAN HOUTEN CONSULTANTS, INC.

By: 

Wayne G. Oakley  
Laboratory Director

wgo/jb/#111

Profile A Average Ground Slope 30%+

Depth	Color	% Rock	Texture	Structure	Consistency	Moist	Pores	Roots
0-18	10YR 4/3	<5%	L	blk	friable	dry	many	many
18-38	10YR 5/6	4	SL	blk	friable	dry		some
38-82	10YR 6/8		SS	blk-mass	firm	dry	very few	0

Mottling: \_\_\_\_\_ Depth to groundwater: \_\_\_\_\_

Other: \_\_\_\_\_

Profile B Average Ground Slope 20%

Depth	Color	<del>Texture</del>	<del>Structure</del>	Structure	Consistency	Moist	Pores	Roots
0-24		L			friable	dry	many	many
24-48		SL			friable	dry		
48-92		Weathered Sandstone			firm	dry		

Mottling: \_\_\_\_\_ Depth to groundwater: \_\_\_\_\_

Other: Hydros at 36", 48" & 84"

Profile C Average Ground Slope 33%

Depth	Color	% Rock	Texture	Structure	Consistency	Moist	Pores	Roots
0-54			SC					
54-98			LS					

Mottling: \_\_\_\_\_ Depth to groundwater: \_\_\_\_\_

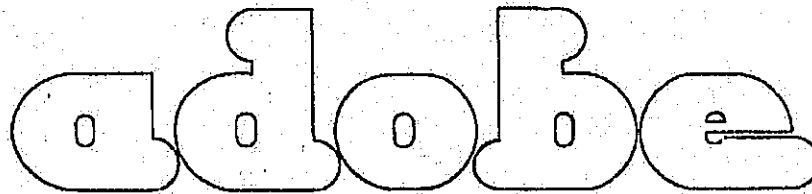
Other: \_\_\_\_\_

Abbreviations:

Texture: Gravel=G, Sand=S, Sandy Loam=SL, Sandy Clay Loam=SCL, Sandy Clay=SC, Silt Loam=SiL, Loam=L, Clay Loam=CL, Silty Clay Loam=SiCL, Clay=C

Structure: Granular=G, Platy=P, Blocky=B, Prismatic=Pr, Massive=M

Consistency: Loose=L, Very Friable=VFr, Friable=Fr, Firm=F, Very Firm=VF, Extremely Firm=EF



ASSOCIATES, INC.

Civil Engineering, Land Surveying and Planning

1142 State Farm Drive, Santa Rosa, CA 95403

Tel: (707) 526-2664 Fax: (707) 526-0331

PERCOLATION TEST RESULTS TRANSMITTAL

Sonoma County Public Health Department  
Environmental Health Division  
1030 Center Drive  
Santa Rosa, CA 95403

PUBLIC HEALTH DEPARTMENT

DEC 09 1992

DIV. OF E.H.

Attn: Dave Donovan, R.E.H.S.

IO-12502 92-3615  
Site Address: 22184 Umland Circle APN 109-420-36

Job Number: 92191

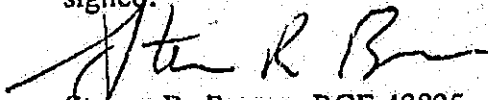
Enclosures: Location Map, Assessor's Parcel Map, Sonoma County Soil Survey Map, Soil Profile Log, Hydrometer Test Results, Percolation Test Data, and Percolation Test Map

These tests were run in order to establish the on site sewage disposal potential for this 1.33 acre parcel in Timber Cove. The test site lies along the south easterly property line on this parcel and on the neighboring parcel (APN 109-420-37 at 22188 Umland Circle) to the south east. Ground slopes in the area vary from 28% to 33% to the south west. Site soils appear consistent with the Empire Caspar Complex as described in the Soil Survey of Sonoma County.

Six percolation holes were tested at depths ranging from 36 to 48 inches. The average percolation rate of these holes is 56 minutes per inch. This site is considered suitable for the installation of a pressure distribution septic system. The trenches should be 48 inches deep, 24 inches wide, with 24 inches of gravel beneath the disposal pipe. The pressure distribution septic system should provide 106 linear feet per bedroom, based on a sewage application rate of .377 gallons per square foot per day. Depth of soil beneath the trench bottom is demonstrated by field observations and by zone two hydrometer analysis results from a soil sample collected at 84 inches from profile B. Installation of this type system is limited to slopes less than 30%. Use of a portion of the area tested for this lot will require an easement on the neighboring property or a lot line adjustment. Maintain all applicable Health Department setbacks including 25 feet to grade breaks, and 5 feet to property lines or easement boundaries.

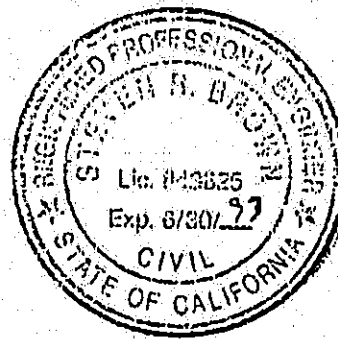
The attached percolation test data was generated from percolation tests run in conformance with the methods and procedures of the Sonoma County Public Health Department. The results are a true and accurate account of the tests. Recommendations made in this report are subject to the review and approval of the Health Department staff. A response to this report will be on file at the Health Department office.

signed:



Steven R. Brown, RCE 43825  
my license expires 6/30/93

date: 12/4/92



file:[44,12]klprc7.wrt

PERMIT & RESOURCE MANAGEMENT DEPARTMENT  
WELL & SEPTIC SECTION

2550 VENTURA AVENUE, SANTA ROSA, 95403 TELEPHONE (707) 565-1900

APPLICATION FOR PRIVATE  
SEWAGE DISPOSAL PERMIT

APPLICATION FOR PUBLIC  
HEALTH CLEARANCE FOR:

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.

This permit application must be signed on all 3 signature lines by the same person (i.e., contractor or owner/builder.) A letter of authorization from the owner must accompany this application if an agent is signing on the owner's behalf.

Pressure Distribution

APPLICANT: PLEASE PRESS HARD (USE BLACK INK). FILL IN BETWEEN HEAVY LINES ONLY.	BLDG PERMIT #	SDS PERMIT No. 54499-2004	DATE ISSUED 12/9/99	CLEARANCE	NEW	REPAIR
	JOB ADDRESS <u>22184 Umland Circle</u>		OWNER'S NAME <u>John and Lynn Cunningham</u>			
NEAREST CROSS STREET <u>Ruoff</u>		MAILING ADDRESS <u>332 Chester Drive</u>				
ASSESSOR'S PARCEL No. <u>109-420-036</u>		CITY <u>Penngrrove</u> STATE <u>CA</u> ZIP <u>94951</u>				
SUBDIVISION <u>Timber Cove Unit 2</u> lot <u>43</u> LOT <u>Blk 6</u>		INST. LOCATION WILL BE FOR: <input checked="" type="checkbox"/> RESIDENCE <input type="checkbox"/> APARTMENT HOUSE <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> MOBILE HOME				
CITY <del>XXXXXXXXXXXXXXXXXXXX</del> <u>Jenner</u> ZIP _____		<input type="checkbox"/> MOBILE <input type="checkbox"/> OTHER <input type="checkbox"/> NEW BUILDING CONSTRUCTION <input type="checkbox"/> ADDITION /ALTERATION				
SEWAGE DISPOSAL SYSTEM CONTRACTOR _____		No. OF UNITS: <u>1</u> TOTAL No. OF BEDROOMS: <u>1</u>		WATER SUPPLY: <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	LOT SIZE: <u>1.3</u> Ac	
ADDRESS _____ HOME No. _____						
GENERAL CONTRACTOR _____						

TERMS OF PERMIT

- APPLICANT AGREES THAT:
- PRMD ENVIRONMENTAL HEALTH SPECIALIST WILL BE NOTIFIED A MINIMUM OF 24 HOURS PRIOR TO COMMENCING WORK.
  - PRMD ENVIRONMENTAL HEALTH SPECIALIST AND ENGINEERS OR CONSULTING ENVIRONMENTAL HEALTH SPECIALIST'S INSPECTION, WHEN INDICATED, WILL BE OBTAINED PRIOR TO COVERING THE SYSTEM.
  - THE JOB CARD AND A COPY OF THE APPROVED SEWAGE DISPOSAL SYSTEM SHALL BE AVAILABLE AT THE JOB SITE AT ALL TIMES.
  - ANY DEVIATION FROM APPROVED PLAN WITHOUT PRIOR APPROVAL OF THE PRMD WILL BE CAUSE FOR STOPPING WORK UNTIL THE CHANGES ARE FULLY JUSTIFIED AND APPROVED.
  - THE SEPTIC TANK MUST BE I.A.P.M.O. APPROVED.
  - PRIOR TO AUTHORIZING OCCUPANCY OF A 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.
  - 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 THAT A GUARANTEE OF PERFECT AND INDEFINITE OPERATION OF THIS SYSTEM IS MADE BY THE COUNTY OF SONOMA AND THE OWNER IS REQUIRED TO MAKE ANY REPAIRS NECESSARY TO CONFINE SEWAGE BELOW THE SURFACE OF THE GROUND. APPROVAL IS BASED UPON INFORMATION SUBMITTED BY THE APPLICANT. FIELD CONDITIONS AT VARIANCE WITH APPLICATION MAY VOID PERMIT.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THE INFORMATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING CONSTRUCTION OF PRIVATE SEWAGE DISPOSAL SYSTEMS. THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMPLETED WITHIN 3 YEARS.

*[Signature]*  
SIGNATURE OF APPLICANT

CONTRACTOR'S LICENSE LAW CERTIFICATE

(COMPLETE EITHER A OR B)

- A. THE APPLICANT IS LICENSED UNDER THE PROVISIONS OF THE CONTRACTOR'S LICENSE LAW UNDER LICENSE No. \_\_\_\_\_ WHICH LICENSE IS IN FULL FORCE AND EFFECT.

B. THE APPLICANT IS EXEMPT FROM THE PROVISIONS OF THE CONTRACTORS LICENSE LAW FOR THE FOLLOWING REASONS:

- 1) OWNER/BUILDER  2) OTHER (EXPLAIN)

DATE 11/22/99 *[Signature]*  
SIGNATURE OF APPLICANT

WORKER'S COMPENSATION CERTIFICATE

(COMPLETE EITHER 1 OR 2)

1. A CURRENTLY EFFECTIVE CERTIFICATE OF WORKER'S COMPENSATION INSURANCE IS ON FILE WITH THE SONOMA COUNTY PRMD. COMPENSATION INSURANCE POLICY # \_\_\_\_\_ IS CURRENTLY IN FORCE.

2. I CERTIFY THAT IN THE PERFORMANCE OF THE WORK FOR WHICH THIS PERMIT IS ISSUED I SHALL NOT EMPLOY ANY PERSON IN ANY MANNER SO AS TO BECOME SUBJECT TO THE WORKER'S COMPENSATION LAWS OF CALIFORNIA.

DATE 11/22/99 *[Signature]*  
SIGNATURE OF APPLICANT

016057 12/01/99A01  
POLICY # \_\_\_\_\_  
STIERRA \$1007.00  
CHECK \$1007.00  
CHNG \$0.00

LAYOUT PLAN APPROVED BY *[Signature]*

DATE 12-9-99

CONSTRUCTION APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_

Mailed 5/20/04



**COUNTY OF SONOMA  
PERMIT AND RESOURCE MANAGEMENT DEPARTMENT**

2550 Ventura Avenue, Santa Rosa, CA 95403-2829  
(707) 527-1900 FAX (707) 527-1103

Field Operations • Code Enforcement • Permits • Environmental & Comprehensive Planning

EXPIRATION OF SEPTIC SYSTEM PERMIT

Date: May 17, 2004

Gregory Gretz #6  
4270 Wayne Ave #6  
Oakland, CA 94606

Dear Mr. Gretz:

Re: Job Address: 22184 Umland Ct, Timber Cove  
Permit No. SEP 97-0835 and SEP 99-2004  
Issuance Date: 12-1-97 and 12-9-99

In accordance with the provisions of section 7-14(f) of the Sonoma County Code, the private sewage disposal permit has expired due to time limitation or lack of evidence that work was performed. If you had a current building permit at the time of the septic permit expiration, or, if your building plans were in plan check, or of you have any other information, please call me.

Work was performed on the septic system but a final inspection was not conducted. Please contact this office regarding a final inspection.

Work was performed, completed and a final inspection conducted, but the consultant's final letter of approval has not been received by this office. Please inform your consultant to provide this office with a letter of approval within 15 days. The consultant will need to provide an "as-built" plan, if applicable.

Other Previous owner name: John & Lynn Cunningham  
Prev. permits applied for by them

Please call me at 565-1940 if you have any questions.

Thank you,

Tracy Fitzgerald REHS  
District Specialist