

APPLICATION FOR REPORT OF SYSTEM STATUS

ON0089027

SR0219474

11/22/2017

O&M Record # (Office Use)

RSS Application # (Office Use)

Closing Date

Mail To Information

Randy Oxier

Name

PO BOX 1938

Address

Port Orchard, WA 98366

City/State/Zip

(253) 851-9925

Phone

29 Fox Island Villa Tracts

Site Information

Mabel Gerhardt

Owner Name

3970000810

Parcel #

273 North Shore BLVD

Site Address

Fox Island, WA 98333

City/State/Zip

41400

Lot#	Subdivision	# of Units	Lot Size in Sq Ft
------	-------------	------------	-------------------

Building Type:	Single Family	Multi Family	Mobile Park	Food Service	Commercial	Institutional
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Water Supply:

Public Water Company: FOX ISLAND MUTUAL WATER A ID: 26300U
 Individual Well Spring

System Information:

- Current # of Occupants: 0
 - Vacant? Yes No If vacant how long? 2 months
 - Garbage Disposal? Yes No 4. Number of Bedrooms: 4
 - Have any septic system malfunctions occurred during your ownership of this property? Yes No Unk
 - Have any alterations or repairs been made to the septic system during your ownership? Yes No Unk
- If you answered 'Yes' to either question 5 or 6 you must attached a description and receipts (if available).

RSS Validation

**WEB PAYMENT
RECEIVED
11/17/2017**

RME Report

O&M Firm:

Express

I certify that the information on this application is true and correct to the best of my knowledge, and I understand I can be held liable for making false statements. I am authorized by the legal property owner to request inspection for this location and grant consent to employees of the Tacoma-Pierce County Health Department to allow access to this property for inspection related to this application.

WEB APPLICATION

Signature

Date

Additional Information: N/A

Fax To:

Fax #: WEB APPLICATION

Microfilm Records

2001 Drawing

Please allow 10 working days
for inspection of the
property to be completed



17-08538



On-Site Sewage Operation and Maintenance Program Report of System Status (For Real Estate)

Mail To Information:
Randy Oxier
PO BOX 1938
Port Orchard, WA 98366

Phone: (253) 851-9925

Site Address:
273 North Shore BLVD
Fox Island, WA 98333
Parcel #: 3970000810

Fax: WEB APP
Fax To:

TPCHD Record Number:
SR0219474
Closing Date:
11/22/2017
Issued Date:
11/28/2017

Dwelling Type: Single Family **# of Bedrooms:** 4 **Garbage Disposal:** N **Water System Information:**
Water System Type: Public
State Water ID: 26300U
Water System Name: FOX ISLAND MUTUAL WATER ASSOCI

Inspection Results for:

Report of System Status (For Real Estate)

Field Inspection Completed on: 11/28/2017

Field Inspection Completed by: Jacob Smith

RSS Issued By: Jacob Smith

Telephone # : (253) 798-3792

Meets requirements for system evaluation and compliance with Board of Health Resolution 2014-4414 Section 34.

Onsite Sewage System Information:

O&M Record #: ON0089027 **Program Element:** 0688
System Classification: Pressure System. Requires inspection every three years.

Approved or estimated Wastewater Gallons Per Day: 480

System Description:
Pressure Distribution

Inspector Comments:

- Septic system appears to be functioning but system was not in use at time of inspection; home/building is vacant.
- Inspector also noted the following items:
 - Part of the drainfield appears to be covered by an impervious structure.

Note: This is the Official Report of System Status
Valid for 12 months from Issued Date

Any person aggrieved by a decision of the health officer shall have the right to appeal such decision, in writing, within fifteen (15) days in accordance with the appeal procedures set forth in Environmental Health Code, Chapter 1, General Provisions - Board of Health Resolution 2010-4221.

Tacoma-Pierce County Health Department
Environmental Health Division
3629 S D Street, MS-1035
Tacoma, WA. 98418-6813

Phone: (253) 798-7392 Fax: (253) 798-7663

Site Address: 273 North Shore BLVD Fox Island, WA 98333

Record ID: SR0219474

Closing Date: 11/22/2017

Dwelling Type: Single Family

O&M Record #: ON0089027

of Bedrooms: 4 ✓

Waste Water Gallons Per Day: 480

Garbage Disposal: No

System Type: O&M Simple Septic System/Registration

Components: Pressure Distribution

Pressure

Inspector's Signature/Date: 11/27/2017

[Handwritten Signature]

- Septic system appears to be functioning at time of inspection (no surfacing sewage found).
- Septic system appears to be functioning but system was not in use at time of inspection.
- Exact location of the drainfield cannot be verified (no asbuilt drawing found).
- Drainfield is sized for ___ bedrooms per Health Department records.
- Septic system was not designed to include a garbage disposal.
- Use of a garbage disposal unit is not recommended.
- This is an area of high winter water tables and/or marginal soils.
- Drainfield is located on an easement addressed as _____.
- Part of the drainfield appears to be covered by a structure or impervious surface.
- Part of the drainfield appears to be covered by a sport court.
- Small constructed pond or fountain appears to be located in the drainfield area.
- Landscaping material placed over drainfield must allow air passage into soil.
- Green striping with lush plant growth noted in drainfield area.
- Vehicle traffic over drainfield or reserve area is not recommended.
- Drainfield is located in a pasture and may be impacted by livestock.
- Fire pit in drainfield area is not recommended.
- Health Department records indicate the water well serving this property has not received final approval.
- RME OK

RSS on Hold for:

- Drainfield area was overgrown with brush / blackberries and could not be inspected; clear the drainfield area.
- A field inspection revealed that there is an abandoned well on your property.
- Septic system appears to be malfunctioning at the time of the inspections: _____

This application is on hold for receipt of additional inspection or other information. Check below:

- Health Department staff observed the tank or pump lid is not properly secured.
- Missing RME report
- Deficient RME report: _____
- Community System not current with the O&M inspection requirements.
- An unapproved septic system or component was installed on the property.