



COWLITZ COUNTY

HEALTH DEPARTMENT
207 FOURTH AVE. NORTH, KELSO, WA 98626

Phone (360) 414-5599 • Fax (360) 425-7531 • www.co.cowlitz.wa.us/health

SOILS EVALUATION

Status: Approved

Date: December 08, 2022

Record Number: EHU-11-22-1188

Project Address: 2388 SPIRIT LAKE HWY, CASTLE ROCK, WA 98611

Project Parcel: WF0508005

Applicant: TRAVIS BUCK
3210 WESTSIDE HWY
CASTLE ROCK, WA 98611

GENERAL INFORMATION

Designer: TRAVIS BUCK

Business Name: ADVANCED SEPTIC CONSULTING

Phone Number: 3604335476

Email: dirtwhisperer@gmail.com

Proposed Use: Residential

Number of Bedrooms: 3

Design Flow (GPD): 360

DRAINFIELD INFORMATION

Primary Drainfield

Proposed Treatment Level: E

Proposed Drainfield Type: Pressure Distribution

Drainfield Land Area: 2250 Sq. Ft.

Reserve Drainfield

Proposed Treatment Level: E

Proposed Drainfield Type: Pressure Distribution

Drainfield Land Area: 2250 Sq. Ft.

COMMENTS

The Cowlitz County Department of Health – Environmental Health Unit (EHU) has evaluated the soil report submitted by your on-site sewage system (OSS) designer or Engineer. The following are our findings:

The EHU has evaluated the soil log(s), texture, structure, and compaction of the Soil and Site Evaluation Report submitted by a Washington State licensed Designer or Engineer.

This site appears to be able to, at this time, support an OSS as proposed.

Approved Soil and Site evaluations are valid for five (5) years from the approval date. The proposed septic primary and reserve area(s) set-aside for future septic use must be protected from grading, fill, compaction, or any other alteration that may change soil characteristics. Soil and Site evaluations may be invalidated if the proposed septic area(s) are not protected.

In order to install a septic system on this property a complete OSS design, meeting the standards of the time, must be submitted to the EHU.

For future well construction: When drilled, the well must maintain a 100' setback from the approved, proposed primary and reserve septic areas or new test holes will need to be opened and evaluated.

CONDITIONS

- **THIS IS NOT A PERMIT TO INSTALL A SEPTIC SYSTEM**
- **THIS IS NOT A DESIGN APPROVAL**
- **THIS SOIL AND SITE APPROVAL DOES NOT GUARANTEE THE PLAUSIBILITY OF SEPTIC SYSTEM APPROVAL FOR THIS SITE**

This Evaluation Valid Until: 12/8/2027

Approved By:

Nic Bakotich

Date of Approval: 12/8/2022

Nic Bakotich

Environmental Health Specialist (Agent of the Health Officer)



Advanced Septic Consulting Inc.

Site Evaluation & Soil Report for Lot 1 @ 2388 Spirit Lake Hwy.

October 18, 2022

Project Number: 22-269.1

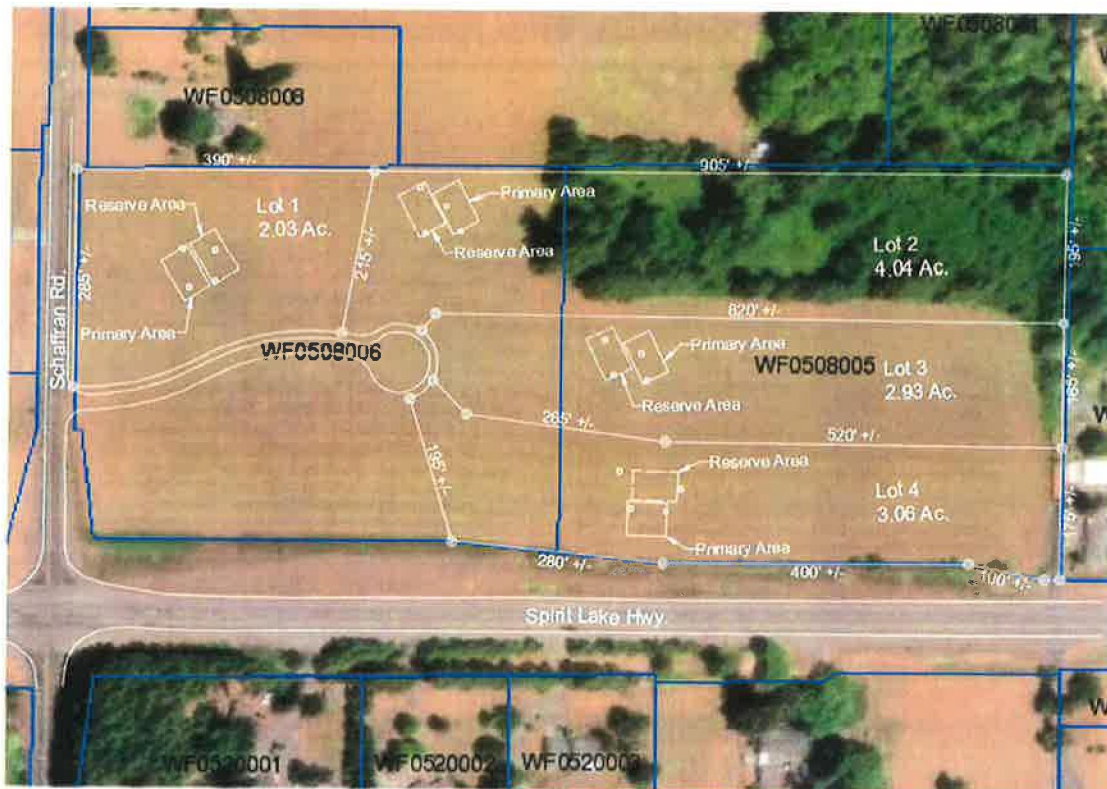
Customer: GLICR LLC, 11400 SE 8th ST. Suite 450 Bellevue, Washington 98004

Project Location: 2388 Spirit Lake Hwy. Castle Rock, Washington 98611

Section: 5 Township: 9N Range: 1W Lot: 1 of 4

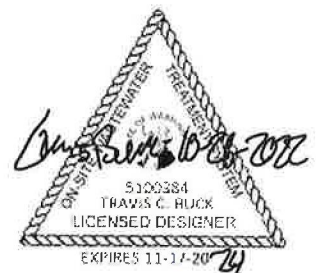
Parcel Number: WF0508005 Acres: 2.03 No. Bedrooms: 3

Type of Water Supply: Public Water



APPROVED
DEC 08 2022

COWLITZ COUNTY
HEALTH DEPARTMENT



EHU 11-22-1188



Advanced Septic Consulting Inc.

October 18, 2022

Project Number: 22-269.1

Customer: GLICR LLC, 11400 SE 8th ST. Suite 450 Bellevue, Washington 98004

Project Location: 2388 Spirit Lake Hwy. Castle Rock, Washington 98611

Section: 5 Township: 9N Range: 1W Lot: 1 of 4

Parcel Number: WF0508005 Acres: 2.03 No. Bedrooms: 3

Type of Water Supply: Public Water

Site Characteristics:

The site is located within USDA-NRCS mapping unit 192 – Sequest Silt Loam. Typical depth to the water table is greater than 80". The site is moderately well drained in the septic areas with moderate mottling and a restrictive layer noted ranging from 36 to 45 inches. Typical slope ranges from 8 to 20%. The proposed primary septic area is on a southwest facing slope with a slope ranging from 14 to 18%. Vegetation in the septic area is field grass.

Soil Evaluation:

	<u>Depth</u>	<u>Soil</u>	<u>Type</u>	<u>Structure</u>	<u>Color</u>	<u>Roots</u>	<u>Mottling</u>
Test Hole #1	0-12"	SiL	5	gr, m	10yr4/3	m/f	None
	12-36"	siCL	5	2, m, sbk	10yr4/4	c/f	None
	36-48"	siCL	7	1, m, sbk	Mixed	None	Moderate
Test Hole #2	0-14"	SiL	5	gr, m	10yr4/3	m/f	None
	14-43"	siCL	5	2, m, sbk	10yr4/4	c/f	None
	43-48"	siCL	7	1, m, sbk	Mixed	None	Moderate
Test Hole #3	0-12"	SiL	5	gr, m	10yr4/3	m/f	None
	12-39"	siCL	5	2, m, sbk	10yr4/4	c/f	None
	39-48"	siCL	7	1, m, sbk	Mixed	None	Moderate
Test Hole #4	0-14"	SiL	5	gr, m	10yr4/3	m/f	None
	14-45"	siCL	5	2, m, sbk	10yr4/4	c/f	None
	45-50"	siCL	7	1, m, sbk	Mixed	None	Moderate

Design Requirements:

Based upon the evaluation performed on September 14, 2022 it is my determination that the primary area is adequate for the use of a Standard Pressure Distribution system meeting Treatment Level E to service the on-site septic needs of the future home.

The primary area will require 900 sq. ft. of drain field and 2,250 sq. ft. of land area.

The reserve area has been designated for the use of a Standard Pressure Distribution system meeting Treatment Level E and will require 900 sq. ft. of drain field and 2,250 sq. ft. of land area.

Other comments or concerns:

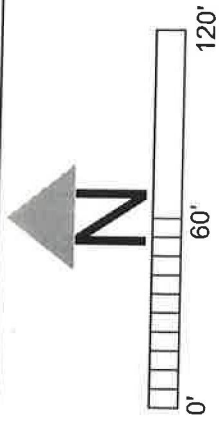
APPROVED

DEC 08 2022

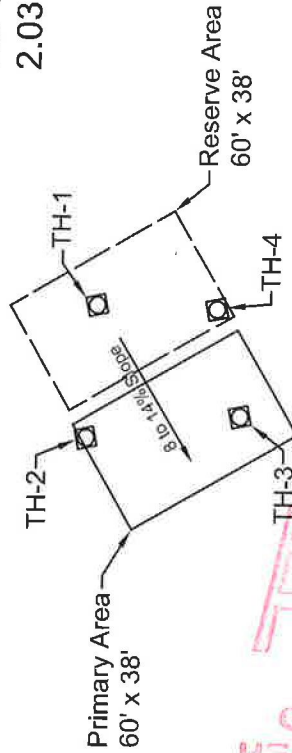
COWLITZ COUNTY
HEALTH DEPARTMENT



EHU 11-22-1188



Lot 1
2.03 Ac.



Schaffran Rd.

285' +/-

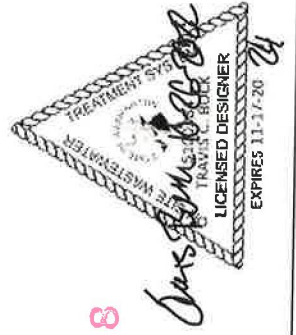
390' +/-

215' +/-

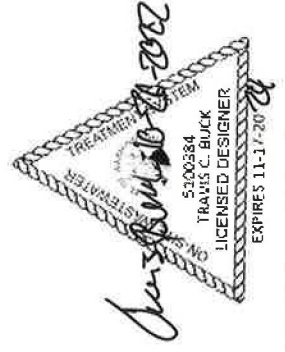
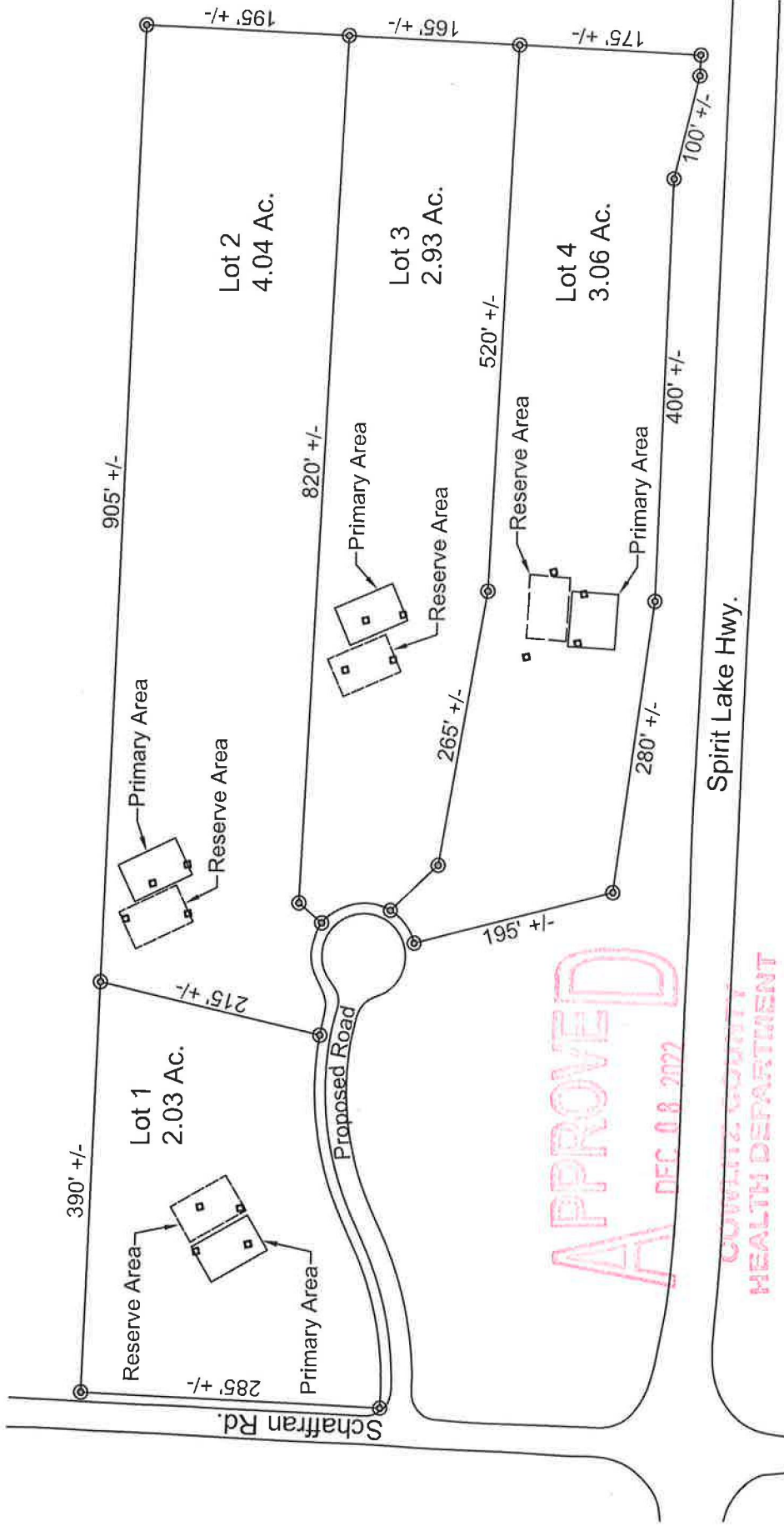
Proposed Road

APPROVED
DEC 08 2022
COWLITZ COUNTY
HEALTH DEPARTMENT

EHU 11-22-1188



GLICR LLC 23880 Spirit Lake Hwy. Castle Rock, Washington 98611	Advanced Septic Consulting Inc. 3210 Westside Hwy. Castle Rock, Washington 98611 Cell: 360-433-5476 E-Mail: dirtwhisperer@gmail.com	
	Design: 22-269.1 Drawing: 1	Date: 10/18/2022 Scale: 1" = 60'



ERU 11-22-1188

GLICR LLC 2388 Spirit Lake Hwy. Castle Rock, Washington 98611	Advanced Septic Consulting Inc. 3210 Westside Hwy. Castle Rock, Washington 98611 Cell: 360-433-5476 E-Mail: dirtwhisperer@gmail.com		Design: 22-269	Date: 10/18/2022
			Drawing: 2	Scale: 1" = 150'



Cowlitz County Health & Human Services Department

Environmental Health Unit

207 Fourth Avenue North, Kelso, WA 98626

TEL (360) 414-5599 FAX (360) 425-7531

www.co.cowlitz.wa.us/hhs

SOILS EVALUATION CHECKLIST

Project Address (if available): 2388 Spirit Lake Hwy. Parcel No.: WF0508005

Plat #: _____ Lot #: 1 of 4 Acreage 2.03 Method II Analysis Required (Indicate One): ☐ Yes ☒ No

Name: GLICR LLC Choose one: ☐ Owner ☒ Applicant ☐ Authorized Agent

Designer: Travis Buck #Bedrooms/GPD: 3/360 Water Supply: ☒ Public ☐ Well (choose one)

Proposed System Type: Standard Pressure Distribution System

Proposed Treatment Level (choose one): ☐ A ☐ B ☐ C ☐ D ☒ E ☐ N

DESIGNER INITIAL		STAFF INITIAL
<u>TB</u>	1. Completed EHU Master Application*, including parcel # and address (if available)	
<u>TB</u>	2. A Cowlitz County Planning Certification form had been completed (please circle: YES or NO)	
<u>TB</u>	3. Name & Address of property owner and applicant on each page of submission. [WAC 246-272A-0200(1)(a)(i)]	
<u>TB</u>	4. Each page of submission is stamped, signed, and dated by a Washington State Professional Engineer or Onsite Wastewater Designer (RCW 18.210.130, WAC 196-33-500) (The Soil Log/Evaluation Report may be completed by a soil scientist)	
<u>TB</u>	5. A site plan is attached and shows general topography and /or slope are shown on the parcel for the applicable areas	
<u>TB</u>	6. Site plan shows test-hole locations, primary and reserve drainfield areas, and the well or proposed well location with 100' radius around the well or proposed well.	
<u>TB</u>	7. Numbered Soil Log/Evaluation Report dated and attached with texture, structure, and other soil characteristics.	
<u>TB</u>	8. The site is ready for inspection: <ul style="list-style-type: none">• Clear and concise directions to inspection site are provided (if necessary).• Entrance to property is clearly marked• Primary and reserve areas are labeled**• Test pits are open and labeled with at least two soil logs within / immediately adjacent to the primary and reserve area; test pits match the soil log	N/A

Comments: _____

Permit Number (For official use) EHU 11-22-1188

* Not required for online application.

** If the site is constricted and horizontal setback are in question, we reserve the right to have the designer re-stake the area.

For more information, contact OMseptic@co.cowlitz.wa.us. Permit intake and issuance hours are Monday through Thursday, 7:30 am – 5:30 pm.

Last Date Revised: 04/23/2021

EHU Form: 8432



Cowlitz County Building and Planning

Planning Clearance Certification - Septic/Soils

Reviewed site plan on reverse

Parent

Address: 2388 Spirit Lk Hwy

Parcel #: WF0508005 - LOT 1



Planning Clearance Complete

Permit #: _____

Site plan matches PC: _____



Planning Clearance Exempt



Repair/Replacement - Same Footprint



Subdivision Currently in Process

Subdivision #: _____

Preliminary Approval Date: _____



Stand-Alone Soils Test - Critical Areas Identification

☐ Geohazard

☐ Fish/Wildlife Habitat Area

Stream Type/Buffer: _____

☐ Wetlands

☐ Floodplain

☐ CARA

This is not a Planning Clearance, nor is it a formal review under County Code. This is a brief overview of the critical/sensitive areas that may be present on or around your property for the purposes of submission of a soils test only. Approval of a soils test does not guarantee that your parcel is a legal lot of record. Legal status can be obtained by contacting the Building and Planning Department. Planning Clearance through the Building and Planning Department will be required prior to submission of an application for a septic permit. Installation of a septic system within a critical/sensitive area or its buffer may require special reports, Critical Areas permitting, review under the Shorelines Management Act, and/or review under the State Environmental Policy Act (SEPA).

Staff Initials: EMT Date: 11.28.22

EHU 11-22-1188

SOILS ONLY (SUB-LOT 1)

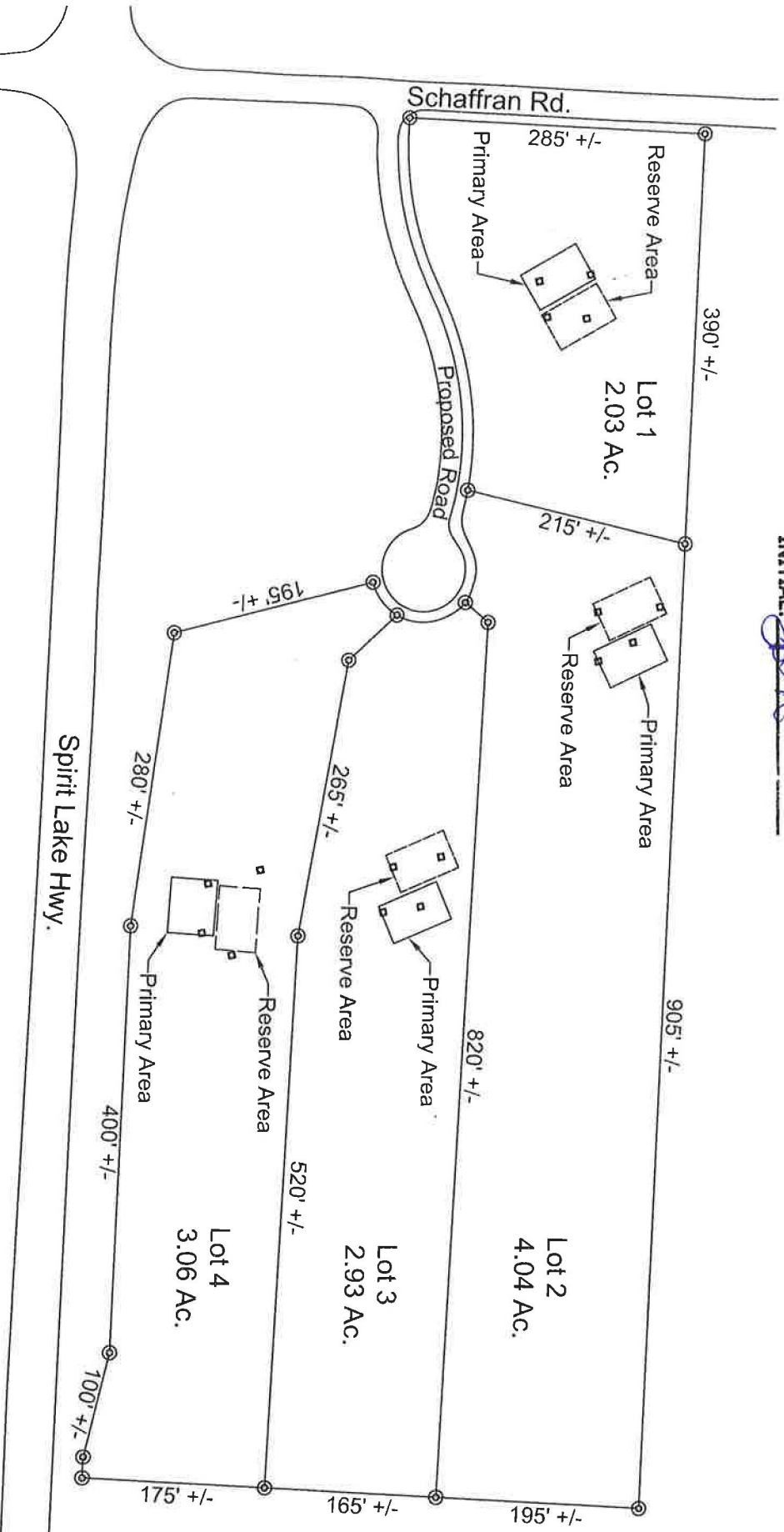
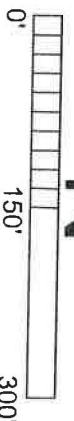
PLANNING CLEARANCE

EXEMPT

11.28.22

DATE:

INITIAL: *[Signature]*



FORM 11-22-1188

GLICR LLC

2388 Spirit Lake Hwy.

Castle Rock, Washington 98611

Advanced Septic Consulting Inc.

3210 Westside Hwy. Castle Rock, Washington 98611

Cell: 360-433-5476 E-Mail: dirtwhisperer@gmail.com

Design:

22-269

Date:

10/18/2022

Drawing: 2

Scale: 1" = 150'



Cowlitz County
Environmental Health Unit
207 4TH AVE. N
KELSO, WA 98626
Telephone: (360) 414-5599

Receipt No.: **21476**
Receipt Date: **11/28/2022**

RECEIPT

RECORD & PAYER INFORMATION

Record ID: EHU-11-22-1188
Record Type: Soils Evaluation
Property Address: 2388 SPIRIT LAKE HWY, CASTLE ROCK, WA 98611
Description of Work: LOT 1
Payer: GLICR LLC
Applicant: Travis Buck
3210 Westside Hwy
Castle Rock, WA 98611

PAYMENT DETAIL

Date	Payment Method	Reference	Cashier	Comments	Status	Amount
11/28/2022	Check	5002	YOHOA		Paid	\$440.00

FEE DETAIL

Fee Description	Invoice #	Quantity	Fee Amount	Current Paid
Soil and Site Evaluation, Per Lot Add-On	25520	1	\$440.00	\$440.00
			\$440.00	\$440.00



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EHU MASTER APPLICATION

Applicant: Please print in ink or type. A Staff Member will review this application at intake for completeness.

Property Information

Project Address 2388 Spirit Lake Hwy City Castle Rock Parcel # WF0508005

Application Type (check one)

Septic	Water Availability	Other
<input type="checkbox"/> New Septic ¹ <input checked="" type="checkbox"/> Site/Soil Evaluation ¹ <input type="checkbox"/> Repair <input type="checkbox"/> Tank Placement <input type="checkbox"/> Verification	Well (check sub-type) <input type="checkbox"/> Individual <input type="checkbox"/> 2-party Shared ^{1,2} <input type="checkbox"/> Public Water Verification	<input type="checkbox"/> Temporary Campground <input type="checkbox"/> Solid Waste Facility <input type="checkbox"/> _____
¹ If part of a subdivision, please indicate: Subdivision # _____, Lot(s) # ⁴ _____	² Please indicate shared Address _____ Parcel # _____ Lot(s) # _____	

Applicant/Owner Information

Applicant/Authorized Agent Advanced Septic Consulting Inc.

Mailing Address 3210 Westside Hwy City Castle Rock State Wa. Zip Code 98611

Daytime Telephone _____ Email Address _____

Property Owner GLICR LLC

Mailing Address 11400 SE 8th St. Suite 450 City Bellevue State Wa. Zip Code 98004

Daytime Telephone _____ Email Address _____

Project Description

Please provide a brief description of your project:

Site & Soil Evaluation for a 4 Lot Short Plat.

I hereby certify that I am the owner or duly authorized agent of the owner for the purposes of this application. I further certify that I have read and examined this application and know the same to be true and correct. If any of the information provided on this application is incorrect, the permit or approval may be revoked.

Applicant Signature Chris Buck

Date 11-28-2022

Printed Name Chris Buck

Office Use Only

Permit # EHU 11-22-1188

Date _____

Accepted By _____

For more information, contact OMseptic@co.cowlitz.wa.us. Permit intake and issuance hours are Monday through Thursday, 7:30 am – 5:30 pm.