To request translation or disability-related accommodations, please contact us at **DTDcompliance@clackamas.us** | **503-742-4400**.

Si quiere solicitar servicios de traducción o adaptaciones para la discapacidad, contáctenos en/al **DTDcompliance@clackamas.us** | **503-742-4400**.

Чтобы запросить перевод или приспособления, связанные с инвалидностью, пожалуйста, свяжитесь с нами по:
DTDcompliance@clackamas.us | **503-742-4400**.

Щоб попросити переклад або спеціальні послуги для осіб з особливими потребами, зверніться до нас, скориставшись такими контактними даними:
DTDcompliance@clackamas.us | **503-742-4400**.

如需翻译服务或残障相关的协助，请与我们联系：
DTDcompliance@clackamas.us | **503-742-4400**。

Để yêu cầu dịch vụ dịch thuật hoặc điều chỉnh liên quan đến tình trạng khuyết tật, vui lòng liên hệ với chúng tôi qua **DTDcompliance@clackamas.us** | **503-742-4400.**

Clackamas County
www.clackamas.us

CLACKAMAS COUNTY

DAN JOHNSON
DIRECTOR

DEPARTMENT OF TRANSPORTATION AND DEVELOPMENT

DEVELOPMENT SERVICES BUILDING
150 BEAVERCREEK ROAD OREGON CITY, OR 97045

INSPECTION GUIDANCE

DO NOT BACKFILL (COVER) ANY PART OF THE SYSTEM PRIOR TO REQUESTING INSPECTION.

Locate the 'Insp Area' field on the cover sheet of your issued septic permit; EAST area inspections are on Mondays and Wednesdays only, WEST area inspections are on Tuesdays and Thursdays only.

Standard systems include 2 inspections and other systems include 3 inspections in the permit fees; after the allowed number of inspections, additional inspection fees will be applied. **A reinspection fee will be applied if corrections from an earlier inspection are not addressed, regardless of the total number of inspections completed.**

INSTRUCTIONS TO REQUEST INSPECTION

1. **Install the septic system as approved in the permit issued by the Septic Program, but do not backfill (cover) any part of the system prior to requesting inspection, with the exception of backfilling around the sides of the tank as required by the manufacturer's specifications.**
2. **Upload complete versions of the required documents into the permit in Development Direct prior to requesting an inspection; see page 2 and 3 for instructions with screen shots on how to submit 'Inspection Paperwork Uploads'.** If these required documents are not received by 7:00 AM on the day of the requested inspection, the inspection will be cancelled.
    a. **As-Built Form**. The as-built drawing must meet the requirements on the enclosed Sample As-Built Drawing. Failure to provide a detailed as-built or complete all portions of the as-built may result in rejection of the as-built and delays in having the system inspected.
        i. Ensure the following fields are complete: permit number, address, date, day-of-inspection contact phone number, installer's name and, if the installer is other than the property owner, the installer's company name, DEQ certification number and signature.
    b. **Septic System Installed Materials List**. Incomplete forms may delay inspections.
    c. If applicable, **Certification of Existing System Decommissioning** with pumping receipt.
3. **Request an inspection** using code 700 in our inspection app (QR codes below), online or by calling 503-742-4720 (inspections called in after 2:00 PM are not guaranteed to be scheduled for the next business day).

Apple iPhone

Google Android

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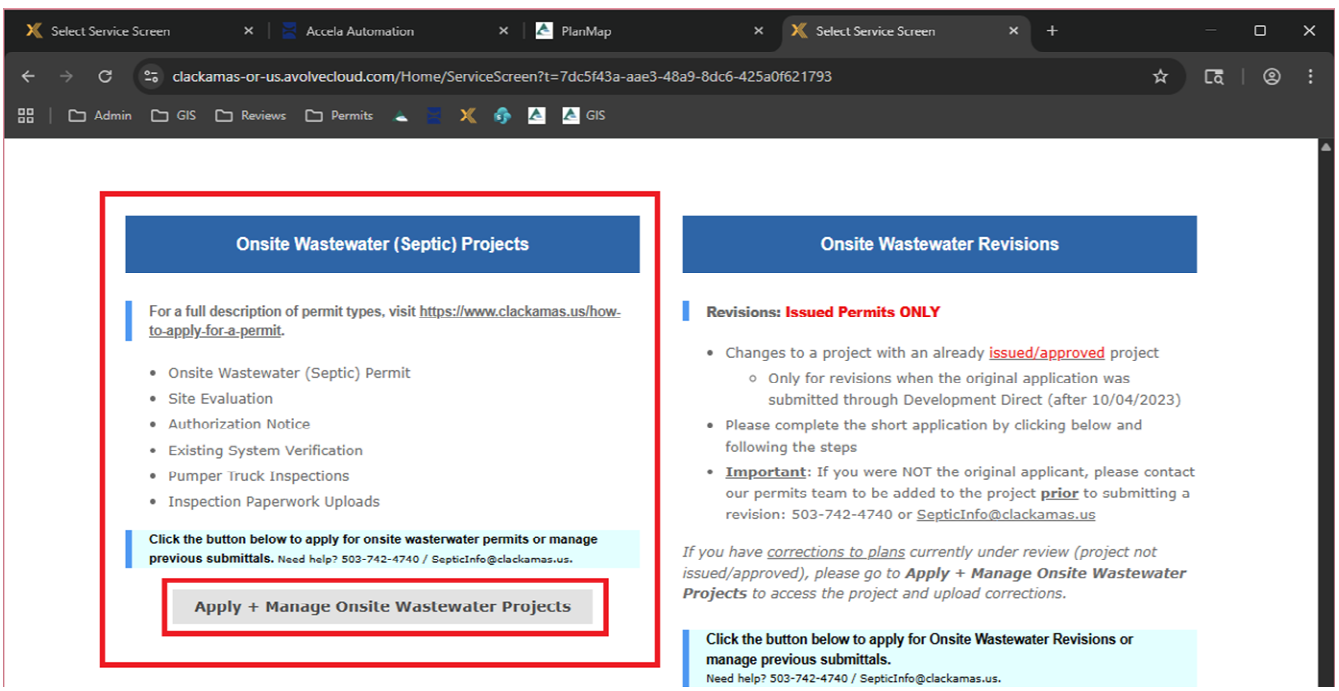
DEVELOPMENT DIRECT (DD) WORKFLOW INSTRUCTIONS

YOU WILL REQUIRE THE SEPTIC PERMIT NUMBER IN ORDER TO BEGIN THE APPLICATION.

If you need assistance with the application process, please schedule an appointment with the customer service kiosk, call (503) 742-4400 or email dtdcustomerInfo@clackamas.us.

Visit Development Direct and follow the screenshots below to begin the 'Inspection Paperwork Uploads'.

1) Enter the Onsite Wastewater (Septic) Projects module in Development Direct by clicking the 'Apply + Manage Onsite Wastewater Projects' button.



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DAN JOHNSON
DIRECTOR

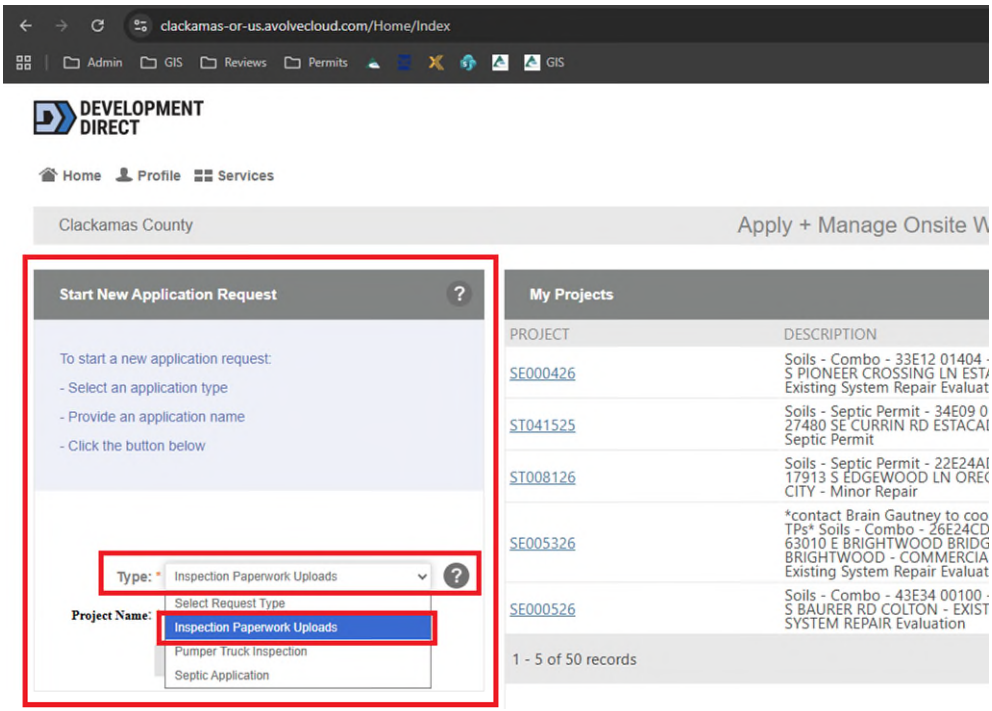
DEPARTMENT OF TRANSPORTATION AND DEVELOPMENT

DEVELOPMENT SERVICES BUILDING
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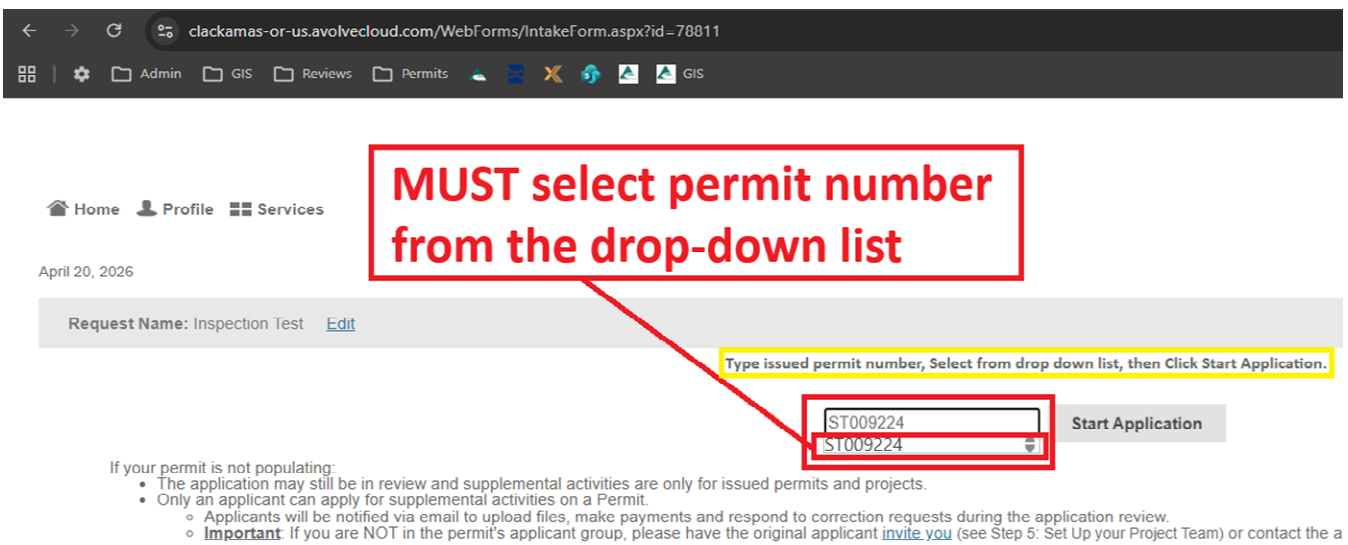
DEVELOPMENT DIRECT (DD) WORKFLOW INSTRUCTIONS

Continued

2) In the Start New Application Request section, begin following the instructions. In the drop-down next to 'Type,' select 'Inspection Paperwork Uploads'. In the 'Project Name' field, enter a project name before clicking the gray 'Start Application Process' button beneath.



3) When asked, begin *typing* your permit number; do not copy/paste the entire number or the lookup function will not operate correctly.



AS BUILT: USE THIS FORM OR STATEMENT BELOW ON THE SUBMITTAL: **Provide the as-built plan of the constructed system. Indicate the direction north, scale, and show all wells within 200 ft of the system; provide setbacks to all applicable items requiring setback.**

ST0_____ ADDRESS_____

CONSTRUCTION WAS DONE BY:

I CERTIFY THE INFORMATION PROVIDED IN THIS NOTICE IS ACCURATE, AND THAT THE CONSTRUCTION OF THIS SYSTEM WAS IN ACCORDANCE WITH THE PERMIT AND THE RULES REGULATING THE CONSTRUCTION OF ON-SITE SEWAGE DISPOSAL SYSTEMS (OAR CHAP. 340, DIV. 71 AND 73) ONLY THE OWNER OR A D.E.Q. LICENSED INSTALLER PERFORMED THE SEPTIC SYSTEM INSTALLATION.

PRINT INSTALLER'S NAME: _____

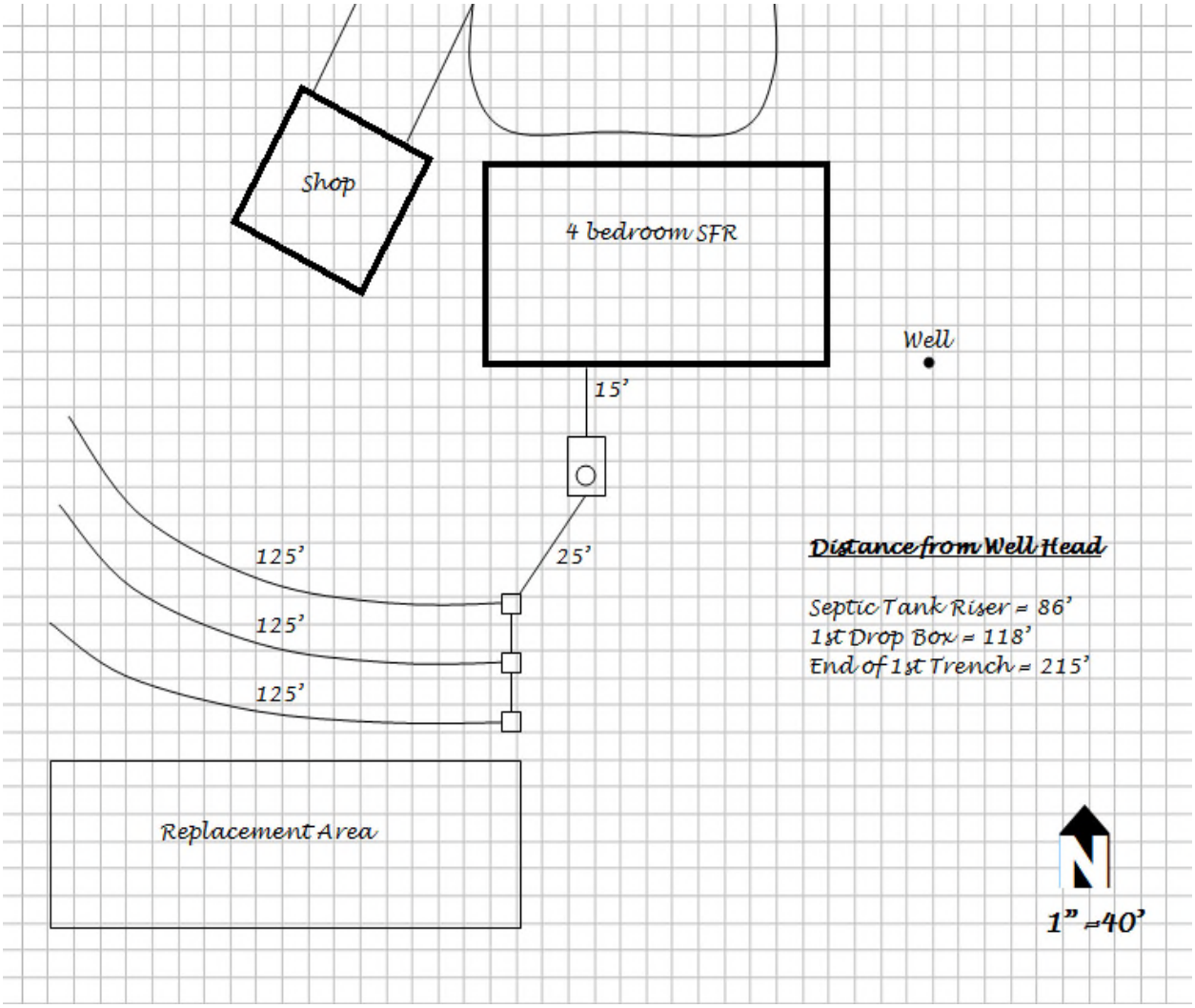
IF OTHER THAN OWNER - INCLUDE COMPANY NAME AND DEQ LICENSE #

INSTALLER'S SIGNATURE: _____

IF OTHER THAN OWNER- PROVIDE CERTIFICATION # AND EXPIRATION DATE

DATE _____ DAY-OF-INSPECTION CONTACT PHONE NUMBER:_____

Sample As-Built Drawing



1) Drawn to engineer's scale in inches to feet
2) Arrow pointing north
3) Proposed or existing structures at the time of septic installation
4) Septic tank, pretreatment, and drainfield components as installed
5) Approved replacement area (if applicable)
6) Distances to major septic components from one or more permanent points (property corner, wellhead, building foundation)

Accurate As-Built drawings are critical in locating the buried components of a septic system for future development and maintenance during the life of the system.

Failure to complete all portions of the as-built and include the above items may result in rejection of the as-built and delays in having the system inspected.

CLACKAMAS COUNTY

DEPARTMENT OF TRANSPORTATION AND DEVELOPMENT
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SEPTIC SYSTEM INSTALLED MATERIALS LIST:

INSTALLERS MUST NOTIFY THE DEPARTMENT WHEN A SEPTIC SYSTEM IS COMPLETED UNDER A PERMIT. ALL APPLICABLE COMPONENTS LISTED BELOW SHOULD BE INSTALLED BUT NOT BACKFILLED. FAILURE TO DO SO MAY RESULT IN A RE-INSPECTION FEE UNLESS OTHER ARRANGEMENTS ARE MADE.

FILL OUT ALL APPLICABLE SECTIONS OF THIS DOCUMENT. FAILURE TO SUBMIT THIS DOCUMENT VIA DEVELOPMENT DIRECT BEFORE 7AM ON THE DATE OF THE INSPECTION WILL RESULT IN CANCELLATION OF THE INSPECTION.

******INCOMPLETE FORMS MAY DELAY YOUR INSPECTION*******

SECTION I

PROPERTY OWNER: _____ PERMIT NUMBER:_____

TOWNSHIP:_____ RANGE:_____ SECTION:_____ TAX LOT:_____

SITE ADDRESS:_____

SECTION II: COMPLETE, AS APPLICABLE:

MUST PROVIDE MAKE, MODEL, MATERIAL, AND APPLICABLE MEASUREMENTS

SEPTIC TANK: CAPACITY:

EFFLUENT FILTER

EFFLUENT SEWER PIPE:

DOSE TANK/VAULT: CAPACITY:

TANK PUMP :

FLOAT SETTINGS(PROVIDE INCHES FROM TOP OF TANK TO WATER LEVEL @ FLOAT FUNCTION):

ALARM: ON: OFF: RO:

PRESSURE PIPE FROM TANK TO PRETREATMENT AND/OR DRAINFIELD

DROP OR DISTRIBUTION BOX: QTY:

HYDROSPLITTER ORIFICE SIZE(S):

HEADER PIPES

LEACH LINES: FT MATERIAL:

PRESSURE BED DIMENSIONS: FT MATERIAL:

CAPPING FILL (DEPTH OVER TOP OF DRAIN MEDIA, IN INCHES):

GWI OR TILE DEWATER SYSTEM (DEPTH / DEPTH OFGRAVEL IN INCHES): /

ATT:MANUFACTURER_____MAKE/MODEL_____SERIAL#_____SANDFILTER TYPE:

☐ BOTTOMLESS ☐ IN GROUND ☐ ABOVE GROUND DIMENSION:_____X_____ FT

CONTROL/ALARM PANEL:

TANK TIMER SETTINGS (PROVIDE SECONDS ON / MINUTES OFF):

NORMAL OPERATIONS: SEC. / MIN. *HIGH WATER ALARM OPERATIONS*: SEC./ MIN.

PRETREATMENT PUMP:

(INCHES BELOW VAULT TOP): ALARM ON OFF

INCHES FROM VAULT TOP TO TOP OF UNDERDRAIN PIPE:

PUMP OR AERATOR INTERLOCK FUNCTION:

VERIFY THE TANK PUMP WILL NOT FUNCTION IF PRETREATMENT IS IN "ALARM" (CIRCLE ONE): YES / NO

MONITORING PORTS:

OTHER:

CLACKAMAS COUNTY

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CERTIFICATION OF EXISTING SYSTEM DECOMMISSIONING

SEPTIC PERMIT NUMBER: ST0_____

T. ____ S.; R. ____ E.; Sec. _____; Tax Lot _____

The street address for the property is _____.

By my signature, I certify that the existing onsite wastewater system serving the property listed above was decommissioned following established standards of the Oregon Department of Environmental Quality (DEQ).

Any remaining septage was pumped by a licensed sewage disposal service, and the existing:

A) [ ] **Septic tank** **B)** [ ] **Seepage Pit** **C)** [ ] **Cesspool**

was either:

A) [ ] **Removed and properly disposed of; or**

B) [ ] **Filled with one of the following:**
a) [ ] **sand** **b)** [ ] **bar run or other suitable gravel** **c)** [ ] **concrete or CDF**

The septage was pumped by _____
(Company Name of the septage pumping business)

Signature: _____ Date: _____

- Upload a copy of the signed and completed form and receipt for septage pumping to the associated permit in Development Direct
- Contact the Onsite Wastewater Program at septicinfo@clackamas.us with questions about the form or how to submit it.