SOIL PERCOLATION TEST (PLEASE PRINT LEGIBLY or TYPE)

The state of the s	TITION.							
GENERAL INFORM	ia ioa;	Housing	Che	erokee				74465
Name and Mailing Ad	idress of Property Ov	wner: Authority		ions ss Name		BOX 1007	Tahlequah	74465 Zip Code
		First Name				Patti Warde	n	
Owner Phone Number	r: <u>(</u> ) -		Owner	's E-Mail Addre	ess (Optional).			
Property Address:	141	28 N. 411 Road			Hulbert	7444 Zip Coo		, Oklahoma
Troperty Transfer		Street Address			City DO		T-1 (1987)	1
Legal Description:	A tract of land	d in the SE4 NW4 N	1W4	n Section 11	, T17N, R20	DE Lot Size	ft² or	1 2 122
The state of the s	At the interse	ction of N. County	Line R	oad & N. W	illey Street	in Ft. Gibson, t	ake S. 370 Road north	1 1.5 miles,
Finding Location:	driveway on r	ight, follow to new	constr	uction.	ks or miles from a gr	iven point)		
		5	7 n			herokee Co. R	WD #11	
Water Supply:	☐ Individual Pr		g Publi	c water Supply	- Marie			
WATERBODY PROTECTION AREA:  Dispersal field located in Water Body Protection Area: check one ☐ Zone 1 ☐ Zone 2 or ☒ None								
Dispersal field loca	ated in Water Body	Protection Area: che	ck one	Zone I	☐ Zone Z	or M None		
and to the control of the Parks	274 0 5 2001 \$6	ection 2-6-403 states-1	t shall	be the duty of	the person co	ontracting with a	n installer who is modifice or the water usage of	ying or installing an
!ta saumaa tres	tment system for a	residence or busines	is to cer	thy the numb	ci di bediodi	ns in the residence	ce or the water usage of	the business that
		at cuctam co that the c	cyclem	can be brober	IV SIZCU.			
TI Callenging info	emation was certif	ied on DEO Form 64	1-581C	ert. (Certifica	tion Docume	ntation Form)	" Cl . l	3
	l sewage treatment	system will serve an	individ	ual residence	or duplex wit	th the following	# of bedrooms	
☐ The estimated	flow or actual flow	v for this small public	sewag	e system is		gal/day and is	aType o	f Facility
							Design Date	
SOIL TEST RES	ULTS: Des	ign Only Print Fir	st and	Last Name:			ricoramics and	88484001
TEST HOLE	Test Hole Depth	Test Hole Percolation Rate	1	SHALLOW! GROUNDWAT	EST DEPTH A TER WAS EN	AT WHICH COUNTERED	OVERALL PERCO	
#1	_32_ inches	_80_ min/in			0 inches		_80_ min	utes/inch
		_80_ min/in				SYSTEMS	ALLOWED	
#2	_32_ inches	_80_ min/in	11		System Type		Option based on perc	olation test results?
#3	_32_ inches	_80_ min/in	1 6	SA – Convention		Absorption:	□Y	Øи
#4	inches			- Lagoon:			□Y	⊠N
#5	inches	min/in		SI – Aerobic w	/Caron Irrigatio	on:	⊠Y	□N
#6	inches	min/in	I A	SI – Aerobic w	Spray Imgane	ALC: NO.		
test holes prior to	starting the preson 2 inches for at least an	esoak no earlier than 2 bak; I presoaked each st 4 consecutive hours Miggletto	rest no	s prior to the	7	ercolation test protect and then ref	ocedure; I did not observatilling them as necessary	ve water in any of the vector to maintain a water 11/22/2017  Date Signed
- Indiana in the	58457.2			688			/22/2017	dispersal field will
I certify that I con	nducted the above-	described percolation	test in	compliance w	vith OAC 252	:641 on11	/22/2017, and the	dispersar field will
not be located in	a Water Body Prot	tection Area.			12		11/	22/2017
Brian		gletto  Last Name			Soll Ten	er's Signalure		Date Signed
Soil Tester's F	1250 🗆	RPS RPES	☐ PI	E 🗆 LS	□ ss			
	38, Tahleguah, C						918	-822-7988
P.O. BOX 20	36, Tairiequaii, C	/	Mailing Ac	dress				Phone Number
PECOMMENDE	D SYSTEM: (check	one)						
CSA - Co	nventional Subsurfa	ce Absorption (require.	s soil te.	st)	L-Lago	on	ASI − Aerobic with	Spray Irrigation
		est Results / Design:						
	ED by DEQ on:				REJECTE	D by DEQ on:	Date	Initial
		1)ate					are the	
Notes:								
		Environmental Special	list's Signe	ture		-	Employe	e ID

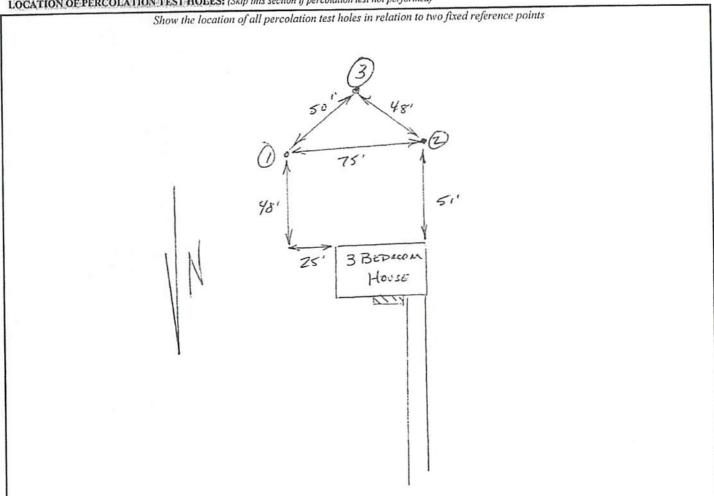
Owner's Last Name SYSTEM DESIGN: TREATMENT: Aerobic Treatment gal. liquid capacity Septic Tank with DISPERSAL: with \_\_\_\_\_ feet of subsurface absorption trenches. The trench bottom shall be no deeper than \_\_\_\_\_ inches with bottom dimensions of \_\_\_\_\_\_ feet by \_\_\_\_\_ feet or with a diameter of \_\_\_\_\_ feet □ L: ASI: with a 700\_-gallon capacity pump tank and \_7,767\_\_\_\_ square feet of spray irrigation area LOCATION OF PERCOLATION TEST HOLES: (Skip this section if percolation test not performed) Show the location of all percolation test holes in relation to two fixed reference points -14 75

SOIL PERCOLATION TEST (PLEASE PRINT LEGIBLY or TYPE)

GENERAL INFOR	MATION:						
		Housing	Cherokee	DO D	1007	Tahlequah	74465
Name and Mailing	Address of Property O	wner: Authority	Nations Last Name	P.O. Box Mailing Addr		City	Zip Code
Owner Phone Numb	per: ( ) -	H20 80, A1 1 - A	Owner's E-Mail A	ddress (Optional):	eronica Wil	lson	
		67 W. 678 Road		Hulbert			, Oklahoma
Property Address:		Street Address		Cuy	Zip Code	County	
Legal Description:	A tract of lan	d in the NW4 SW4	of Section 17, 7	Γ18N, R21E	_ Lot Size _	ft² or	1 acres
	Take N. Lost	City Road north or	ut of Hulbert, go	8.5 miles, turn righ	it on W. 678	Road, go 1 mile, nev	w construction
Finding Location:	on right.			(Blocks or miles from a given po	int)		
Water Supply:		rivate Well or [	Public Water Sur	pply - Name:			
WATERBODY PROTECTION AREA:							
Dispersal field lo	cated in Water Body	Protection Area: ch	eck one Zon	ne 1 🔲 Zone 2 or 🗵	None		
The state of the state of the	221 0 2 2001 5	2 6 402 states	It shall be the duty	v of the person contra	cting with an	installer who is modify	ing or installing an
an nite coverge tre	eatment system for a	residence or busine	ss to certify the nu	imber of bedrooms in	the residence	or the water usage of t	he business that
	the cawage treatme	nt system so that the	system can be pro	perly sized." fication Documentation			
The following int	formation was certif	ed on DEQ Form 64	individual resider	nce or duplex with the	following #	of bedrooms	3
	al sewage treatment	System will serve an	s savinga system is	ga ga	I/day and is a		
☐ The estimated	flow or actual flow	for this small public	sewage system is		arday and is c	Type of	Facility
SOIL TEST RE	SULTS: Des	ign Only Print Fi	rst and Last Name	機能		Design Date	
TEST HOLE	Test Hole Depth	Test Hole Percolation Rate	SHALLO GROUNDW	OWEST DEPTH AT W	HICH NTERED	OVERALL PERCO	LATION RATE
#1	_34_ inches	_13_ min/in		0 inches		_13_ minu	tes/inch
#2	_34_ inches	_13_ min/in			SYSTEMS A	LLOWED	
#3	_35_ inches	_13_ min/in	11	System Type		Option based on perco	olation test results?
#4	inches	min/in	CSA - Conve	entional Subsurface Absorb	orption:	⊠ Y	ПN
#5	inches	min/in	L – Lagoon:			□ Y	⊠Ν
#6	inches	min/in	ASI – Aerobi	ic w/Spray Irrigation:		□ Y	⊠N
Presoak Certifica		soak no earlier than ?	24-hours prior to t	he start of the percola	tion test proc	edure; I did not observe	e water in any of the
test holes prior t	to starting the preso	ak; I presoaked each	i test hole by filling	ng them with water a	nd then relii	ling them as necessary	to maintain a wate
		t 4 consecutive hour	3.		~		11/21/2017
Bri Printed F		Miggletto  Last Name		1 Menatur	re )		Date Signed
Commercial Charles	Tee Fore						15.11
I certify that I co	inducted the above-	described percolation	test in complianc	e with OAC 252:641	on11/2	21/2017, and the d	ispersal field will
not be located in	a Water Body Prot			2		11/2	1/2017
Brian Soil Tester's		gletto  Last Name	-	Soll Tester 3 Sign	nature		Date Signed
Registration #	1250	RPS 🖾 RPES	□ PE □ L	s S SS		0.0	000 7000
P.O. Box 20	38, Tahlequah, C	K 74465	Mailing Addrson			918-	822-7988 Phone Number
			Mailing Address				
	D SYSTEM: (check		e soil test)	L-Lagoon		ASI - Aerobic with S	Spray Irrigation
		ce Absorption (require	3 3011 1831)	L Dagon			
	ED by DEQ on:	est Results / Design:		REJECTED by	DEQ on:		
ACCEPT	ED by DEQ on.	Date			-	Date	Initial
Notes:						*	
		Environmental Specia	list's Sionature			Employee :	ID .

· , *	Owner's Last Name
SYSTEM DESIG	1/2/1/19
TREATMENT	
DISPERSAL:	with _270 feet of subsurface absorption trenches. The trench bottom shall be no deeper than 28 inches
☐ L: W	with bottom dimensions of feet by feet or with a diameter of feet
	with a

LOCATION OF PERCOLATION TEST HOLES: (Skip this section if percolation test not performed,



SOIL PERCOLATION TEST (PLEASE PRINT LEGIBLY or TYPE)

TOTAL CONTRACTOR OF THE PARTY O	RMATION:	Housing	Cherokee				
Name and Mailing	Address of Property O	wner: Authority	Nations Last Name	P.O. Bo	x 1007	Tahlequah	74465 Zip Code
Dumer Phone Nur	nher: ( ) -	PI M Name		100		helsea Lindsey	
Property Address:	4000	676 S. 370 Road		Ft. Gibson		Cherokee	, Oklahoma
	A tract of lan	Street Address d in Gov't Lot 3. Se	ection 30, T16N.		15.0	ft² or	1 acres
Legal Description:	At the interse	ction of N. County	Line Road & N.	Willey Street in	Ft. Gibson, ta	ke S. 370 Road north 1	.3 miles,
Finding Location:	driveway on i	right, follow to new	construction.	locks or miles from a give			
W - C	☐ Individual P	rivate Well D	Public Water Sup			rict	
Water Supply:	ROTECTION AREA						
Dispersal field le	ocated in Water Body	y Protection Area: che	eck one Zone	21 Zone 2 or	None		
on-site sewage to will be served by The following in This individe	reatment system for a y the sewage treatme nformation was certifual sewage treatment	a residence or busines nt system so that the ied on DEQ Form 64	ss to certify the nur system can be prop 1-581 cert. (Certifi individual residen	neer of bedrooms early sized." cation Document ce or duplex with	ation Form) the following #	installer who is modifying or the water usage of the of bedrooms	4
			rst and Last Name:			1078.00000000	(計画)
SOIL TEST RI	ESULTS: Des	ign Only Print Fit  Test Hole		WEST DEPTH AT	WHICH	OVERALL PERCOLA	BERTHADE NO THE V. T
TEST HOLE	Test Hole Depth	Percolation Rate	GROUNDW	ATER WAS ENCO	OUNTERED		
#1	_33_ inches	_24_ min/in		0 inches		_24_ minutes	s/inch
#2	_33_ inches	_24_ min/in			SYSTEMS AI		
#3	_33_ inches	_24_ min/in		System Type		Option based on percolat	N rest results?
#4	inches	min/in	Range of the second second second	ntional Subsurface A	Absorption:		N N
#5	inches	min/in	L – Lagoon:				N N
#6	inches	min/in	ASI – Aerobio	w/Spray Irrigation:			7 14
test holes prior depth of at least Brimed.  Soil Tester Certification of the state	that I started the pre- to starting the presor t 12 inches for at least rian	Miggletto  Last Name  described percolation	i test hole by fillings.	g them with water	nature)	2/2017, and the disp	1/22/2017 Date Signed  persal field will
Brian		gletto  Last Name		Soil Tester's	Agnature	11/22/2	2017 Date Signed
Registration #		RPS ⊠ RPES 0K 74465	□ PE □ LS	S D-SS			2-7988
THE PROPERTY OF THE PROPERTY OF THE PARTY OF		/	Mailing Address				
P.O. Box 2	The State Service Commission	NAME OF THE OWNER OWNER OF THE OWNER OWNE					
P.O. Box 2	ED SYSTEM: (check		s soil test)	L-Lagoon		ASI - Aerobic with Spr	ay Irrigation
P.O. Box 2  RECOMMEND  CSA - C	Conventional Subsurfa	ce Absorption (require:	s soil test)	L - Lagoon		ASI - Aerobic with Spr	ay Irrigation
P.O. Box 2  RECOMMEND  CSA - C  DEQ USE ON		ce Absorption (require:	s soil test)	L-Lagoon		☑ ASI – Aerobic with Spr	ay Irrigation
P.O. Box 2  RECOMMEND  CSA - C  DEQ USE ON	Conventional Subsurfa	ce Absorption (required est Results / Design:	s soil test)				

SYSTEM DESIGN:
TREATMENT   7   4   19    Septic Fank with   1,000 gal. liquid capacity
DISPERSAL:
CSA: with _510 feet of subsurface absorption trenches. The trench bottom shall be no deeper than 27 inches
L: with bottom dimensions of feet by feet or with a diameter of feet
ASI: with agallon capacity pump tank and square feet of spray irrigation area
LOCATION OF PERCOLATION TEST HOLES: (Skip this section if percolation test not performed)  Show the location of all percolation test holes in relation to two fixed reference points
76'  30'  4' BEDALCEL  HOUSE  12'  12'  12'  12'  12'  12'  12'  12



## ENVIRONMENTAL COMPLAINTS AND LOCAL SERVICES DIVISION

REPORT FOR ON-SITE SEWAGE TREATMENT SOIL PROFILE DESCRIPTION TEST

Work Order No.	
System No.	
Date Rec'd	

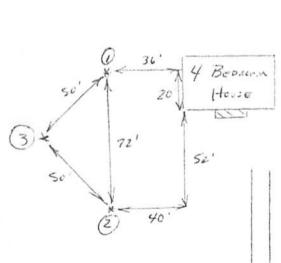
(PLEASE PRINT or TYPE) GENERAL INFORMATION: Housing Cherokee Name and Mailing Address of Property Owner Authority Nations P.O. Box 1007 Tahlequah 74465 Mailing Address Owner Phone Number: Owner's E-Mail Address (Optional): Mary Ellis 26736 E. 635 Road Property Address: Proctor 74457 Cherokee Oklahoma Zont'sal Cite A tract of land in the S2 SE4 NE4 of Section 26, T19N, R23E Legal Description. ft2 or Lot Size in Take Hwy. 51 east out of Tahlequah, turn left on Hwy. 10, turn right on Chewey Road, go 2.2 miles, turn right on River Ranch Road, go .7 miles, turn right on D4595 Road, go 2 miles, turn right on E. 635 Road, new construction on Finding Location: thicks or miles from a given points Water Supply ☐ Public Water Supply – Name: WATERBODY PROTECTION AREA: Dispersal field located in Water Body Protection Area: check one Zone 1 ☐ Zone 2 ☐ or None ☒ Flow Certification: 27A O.S. 2001, Section 2-6-403 states-"It shall be the duty of the person contracting with an installer who is modifying or installing an on-site sewage treatment system for a residence or business to certify the number of bedrooms in the residence or the water usage of the business that will be served by the sewage treatment system so that the system can be properly sized." The following information was certified on DEQ Form 641-581cert. (Certification Documentation Form) ∑ This individual sewage treatment system will serve an individual residence or duplex with the following # of bedrooms ☐ The estimated flow or actual flow for this small public sewage system is Type of Facility Design Date: SOIL TEST RESULTS: Design Only Print First and Last Name of Designer; SEPARATION RANGE HOLE #1 HOLE #2 HOLE #3 Depth of "shallowest limiting layer": 24 inches Limiting Layer Limiting Layer Limiting Layer Depth of Group Group Group w/in Interval\* w/in Interval\* Hole # 3 w/in Interval Test hole with the lowest clay content in separation range: Test Hole Most prevalent soil group found in the separation range: Group 4 4 0-6" 4 DISPERSAL ALLOWED / APPLICABLE SIZING RANGE 4 4 4 6-12" Sizing Range 4 4 System Type Option 4 12-18" 5 G5 24" 5 G5 24" CSA - Conventional Subsurface Absorption 12-30" DY Ø N 18-24" 5 G5 24" LPD - Low Pressure Dosing 12-30" OY ØN 24-30" O N SE - Shallow Extended 6-24 DY 30-36" 12-30 DY O N ET/A - Evapotranspiration/Absorption 36-42" Ø N N/A DY 42-48" L - Lagoon 0-18 DY. O N 48"-54" ADI - Aerobie w/ Drip Irrigation RX = RedoxRC = RockG5 = Group 5 Soil ASI - Aerobic w/Spray Irrigation 0-18" DY \*Limiting layers: GW = Ground Water RECOMMENDED SYSTEM AND SIZING CRITERIA: MOST PREVALENT SOIL GROUP IN SIZING RANGE IN HOLE WITH HIGHEST CLAY THE HOLE IDENTIFIED IN (a) TREATMENT REQUIRED check one (a) CONTENT IN SIZING RANGE Septic tank Aerobic treatment □ 3 □ 3a ⊠ 4  $\square_5$ ☐ #1 X #2 □ #3  $\Box$ 1  $\square$  2 ☐ 2a Acrobic treatment with nitrogen reduction CERTIFIED SOIL TESTER USE ONLY: A certify than conducted the above-described soil profile description test in compliance with OAC 252:641 on 1/09/2018 Date Test Performed 037 Brian Miggletto Certification Number Law Nam P.O. Box 2038 Tahlequah OK 74465 918-822-7988 1/09/2018 Date Signed Sign. Zip DEQ USE ONLY: DEQ Reviewed and Accepted Soil Test Performed by DEQ on (date): OR Verification of DEQ Soil Joint Soil Profile DEO Reviewed and Rejected (date and initial) Profile Test Design

Notes:

Environmental.	Specialist	×	Sign	sture
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Emp			

Environmental Specialist's Signature	Employee ID	Date Signed and Paperwork Issued
SYSTEM DESIGN: Check all that apply	1/1/18	Work Order No. System No. Owner's Last Name
TREATMENT:  Septic Tank with gal. liquid capacity	Aerobic Treatment	Aerobic Treatment with Nitrogen Reduction
DISPERSAL:		
CSA: with feet of subsurface absorption trench	es. The trench bottom sha	all be no deeper thaninches.
LPD: with agallon capacity pump tank and deeper that inches.	feet of subsurface abs	sorption trenches. The trench bottom shall be no
SE: with feet of subsurface absorption trench	es. The trench bottom sha	ll be no deeper thaninches.
ET/A: withfeet of evapotranspiration trenches.	The trench bottom shall b	be no deeper thaninches.
L: with bottom dimensions of feet by	_ feet.	
DI: with agallon capacity pump tanks and	feet of drip line.	
SI: with a 700-gallon capacity pump tank and 7.28.	2 square feet of surface ap	plication area
An Alternative system as described on the attached D System".	EQ Form 641-581 Sup, "5	Supplemental Application for an Alternative
LOCATION OF TEST HOLES: Show the location of all test holes in		nce points in the sketch box below
	SKETCH BOX	



SOIL PERCOLATION TEST

### (PLEASE PRINT LEGIBLY or TYPE)

Legal Description.  A tract of land in the SW4 SW4 SE4 of Section 04, T19N, R23E  Take Hwy. 51 east out of Tahlequah, turn left on Hwy. 10, turn left on N. Oaks Road, go 3.2 miles, turn left on E.  600 Road, go .8 miles, new construction on right.	GENERAL INFOR	MATION:						
Description   Control   Phone Number   Phone Num								
Downer Phone Number   Councer's I-Mail Address Optionals   Attandad Carmell	Name and Mailing A	ddress of Property (						
Legal Description   A tract of land in the SW4 SW4 SE4 of Section 04, T19N, P23E   Lot Size   ft or	Owner Phone Numb	er ( ) -						Zq: Code
Take Hovy. 51 east out of Tahlequah, turn left on Hwy. 10, turn left on N. Oaks Road, go 3.2 miles, turn left on E. 600 Road, go 3.8 miles, new construction on right.  ### Ware Supply:	Property Address:	24						. Oklahoma
Solid Test Results:   Design Only   Print First and Last Name:   Design Date   Desig	Legal Description.							
Water Supply:	Finding Location			ruction on right			ad, go 3.2 miles, tu	rn left on E.
Dispersal field located in Water Body Protection Area; check one	Water Supply:		Private Well or					
Flow Certification: 27A O. S. 2001, Section 2-6-103 states-It shall be the duty of the person contracting with an installer who is modifying or installing an on-site sevage treatment systems of a residence or business to certify the number of bedrooms in the residence or the water usage of the business that will be servage treatment systems to that the system can be properly sized." The following information was certified on DEQ Form 641-581 cert. (Certification Documentation Form)  This individual sevage treatment systems will serve an individual residence or duplex with the following if of bedrooms gal/day and is a lips of bedrooms gal/day and is a lips of bedrooms gal/day and is a lips of found from a caula flow for this small public sewage system is gal/day and is a lips of bedrooms gal/day and is a lips	WATERBODY PR	OTECTION AREA	١:					
mestic sewage treatment system for a residence or business to certify the number of bedrooms in the residence or the water usage of the business that will be served by the sewage treatment systems on that the system can be properly sized."  The following information was certified on DEQ Form 641-581 cert. (Certification Documentation Form)  This individual sewage treatment system will serve an individual residence or duples with the following # of bedrooms galiday and is a gal	Dispersal field loc	ated in Water Bod	y Protection Area: che	ck one Zone	21 Zone 2 or	None     Non		
TEST HOLE  Test Hole Depth  Test Hole  Percolation Rate  #1 32 inches	on-site sewage tres will be served by t The following info This individua	atment system for the sewage treatmo ormation was certi I sewage treatmen	a residence or businessent system so that the s fied on DEQ Form 641 t system will serve an	s to certify the nur ystem can be prop -581cert. (Certifi individual residen	nber of bedrooms berly sized." cation Documenta ce or duplex with t	in the residence or t tion Form) the following # of b	he water usage of the	business that
TEST HOLE  Test Hole Depth  Test Hole  Percolation Rate  #1 32 inches	COU TEST DES	III TS. Do	sign Only Print Fire	et and I act Name:			Design Date	elcastra
#1 32 inches 27 min/in #2 32 inches 27 min/in #3 32 inches 27 min/in #4 miches min/in #5 inches min/in #6 inches min/in Het holes prior to starting the presoak no earlier than 24-hours prior to the start of the percolation test procedure; I did not observe water in any of the test holes prior to starting the presoak. I presoaked each test hole by filling them with water and then refilling them as necessary to maintain a water depth of at least 12 inches for at least 4 consecutive hours.  #6 Miggletto  #7 Department of the percolation test procedure; I did not observe water in any of the test holes prior to starting the presoak. I presoaked each test hole by filling them with water and then refilling them as necessary to maintain a water depth of at least 12 inches for at least 4 consecutive hours.  #8 Brian Miggletto  #8 Miggletto			Test Hole	SHALLO	WEST DEPTH AT			ATION RATE
System Type   Option based on percolation test results?	#1	32 inches		GROCAM		CITIENED	_27_ minute	s/inch
32   inches   27   min in	42					SYSTEMS ALLO	WED .	
#4 miches minifin #5 miches minifin #6 miches minifin #6 miches minifin #6 miches minifin #6 MSI - Aerobic w/Spray Irrigation:    L - Lagoon:				-	System Type			tion test results?
#\$ inches min/in   L - Lagoon.   Y				GSA - Conver				
Presonk Certification: I hereby certify that I started the presonk no earlier than 24-hours prior to the start of the percolation test procedure; I did not observe water in any of the test holes prior to starting the presonk; I presonked each test hole by filling them with water and then refilling them as necessary to maintain a water depth of at least 12 inches for at least 4 consecutive.  Brian Miggletto Presonk park Name Load Name Load Name Load Name Not Fooder & Load Name Registration 8 1250					N. S.			
Thereby certify that I started the presoak no earlier than 24-hours prior to the start of the percolation test procedure; I did not observe water in any of the test holes prior to starting the presoak; I presoaked each test hole by filling them with water and then refilling them as necessary to maintain a water depth of at least 12 inches for at least 4 consecutive hours.  Brian Miggletto Protection Miggletto Protection Area.  Brian Miggletto Soil Tester Certification:  I certify that I conducted the above-described percolation test in compliance with OAC 252:641 on 1/9/2018. and the dispersal field will not be located in a Water Body Protection Area.  Brian Miggletto Soil Tester Visit Name Registration # 1250					w/Spray Irrigation:		□ Y □	⊠N
Certify that I conducted the above-described percolation test in compliance with OAC 252:641 on 1/9/2018, and the dispersal field will not be located in a Water Body Protection Area.    Brian   Miggletto   1/9/2018	I hereby certify the test holes prior to depth of at least I Bria	at I started the pro- starting the preso 2 inches for at lea	oak; I presoaked each st 4 consecutive hours. Miggletto	test hole by fillin	g them with water	and then refilling	them as necessary to	1/9/2018
P.O. Box 2038, Tahlequah, OK 74465  RECOMMENDED SYSTEM: (check one)    Section   Conventional Subsurface Absorption or equares soil test)   L - Lagoon   AS1 - Aerobic with Spray Irrigation	l certify that I cor not be located in a /Brian	ducted the above- a Water Body Pro Mig	gletto  Tiot Name		Null Toyles		1/9/20	18
			OK 74465		10.88			
	RECOMMENDE	SYSTEM: Ichael	(one)					
DEQ USE ONLY: Percolation Test Results / Design:  ACCEPTED by DEQ on:  Date  REJECTED by DEQ on:  Date  Initial				soil testi	L - Lagoon		ASI – Aerobic with Sp	ray Irrigation
ACCEPTED by DEQ on:    Date								
					REJECTED	by DEQ on:	Date	Ininal
	Notes:							
			Enginamental Nevi da	d's Stematore			Employee ID	

	Owner's Last Name
SYSTEM DESIGN:	
TREATMENT:  Septic Tank with 1,000 gal. liquid capacity ☐ Aerob	ic Treatment
DISPERSAL: Z L 18  CSA: with 510 feet of subsurface absorption trenches. The trend	ch bottom shall be no deeper than 26_ inches
L: with bottom dimensions of feet by feet	or with a diameter of feet
ASI: with agallon capacity pump tank and	
LOCATION OF PERCOLATION TEST HOLES: (Skip this section if percolation test no Show the location of all percolation test holes in t	
1 25' 2 4 Be Da Hous	
REMARKS:	



# ENVIRONMENTAL COMPLAINTS AND LOCAL SERVICES DIVISION

REPORT FOR ON-SITE SEWAGE TREATMENT SOIL PROFILE DESCRIPTION TEST (PLEASE PRINT or TYPE)

Work Order No.	
System No.	
Date Rec'd	

te du less affici	tive increases (A	drieno		17	141213121	MINT OF THEE		Da	ite Rec'd	
GENERAL	INFORM	IATION:								
				Housing	Cherol	kee				
Name and N	Jailing Ado	fress of Prope	erty Owner.	Authority	Nation	018330	P.O. Box 1007	Tahleq	uah	74465
			0.5 (0.000.000)	Lita None	last Name		Alading Address	Cin		Zip Code
Owner Phon	ne Number:	( )		Owner's E-	Mail Addr	ess (Optionali: 🧵	Zachary Ferguson			
Property Ad	ldress.		The state of the s	7. 877 Road		Park		Chero		klahoma
		A tract o	f land in th	e W2 NE4 SW	4 of Sec	tion 29, T15N				
Legal Descr	iption:	R22E					Lot Size in	tt² or	r I :	icres:
		Take Hy	v 82 south	n out of Tablea	mah turi	n right on India	n Road, turn right on V	V 877 Road ge	1 3 miles n	ew
Finding Loc	ation		ion on righ	,						e.r.:
						thlocks or mil	es from a given pouni			
Water Supp	lv:	☐ Individ	had Private V	vell or 🗵	Public W	ater Supply - Nan	ne. Stick Ross Mtn R	WD		
100000000000000000000000000000000000000		TECTION A	RFA:	- 10 m						
LICE OF STREET										
Dispersal fie	eld located	in Water Box	ly Protection	Area: check one	Zone I 🗵	Zone 2 or	None [			
Flow Certif	fication: 2	7A O.S. 200	Section 2-6	-403 states-"It sha	ll be the du	ity of the person c	ontracting with an installer w	ho is modifying or	installing an on-	site sewage
treatment sy	stem for a	residence or	ousiness to ce	rtify the number o	f bedroom	s in the residence	or the water usage of the busi	ness that will be see	rved by the sewa	ge
treatment sy	stem so th	at the system	can be proper	rly sized."						
AND DESCRIPTION OF THE	The state of the s			Form 641-581cert						
■ This inc.	dividual sev	wage treatmen	it system will	serve an individua	al residenc	e or duplex with th	he following # of bedrooms	4		
☐ The esti	imated flow	or actual flo	w for this sm	all public sewage	system is		gal/day and is a			
					Name of the last o				Type of Facility	
SOIL TEST	TRESUL	rs: 🗆 De	sign Only	Print First and Last	Name of	Designer.		Design	Date:	
	T u	OLE#1	1 1	IOLE #2	11	IOLE #3	SE	PARATION RAN	GE	
	- 11					T		oth of "shallowest I		28 inches
Depth of	Group	Limiting Lay w/in Intervo		Limiting Layer w/in Interval*	Group	Limiting Layer w/in Interval*	Test hole with the lowes			Hole # 3
Test Hole	-	man micro					Most prevalent soil gre			Group 3
0-6"	2		2		2		DISPERSAL ALLO			
6-12"	3		3		3				Sizing Range	
12-18"	3		3		3		System Typ CSA – Conventional Subsur		12-30"	DY ØN
18-24"	3	D (2.200	3	D.C. 20"	3	D.C. 20"	LPD - Low Pressure Dosing		12-30"	DY DY
24-30"	4	RC 28"	4	RC 30"	4	RC 30"	SE – Shallow Extended	5	6-24"	DY DN
30-36"							ET/A - Evapotranspiration/	Absorption	12-30"	DY DY
36-42"				-			L - Lagoon	Austrian	N/A	DY ØN
42-48"	-					-	ADI – Aerobie w/ Drip Irrig	eation	0-18"	OY Ø
48"-54"	CP'	Cound W	ter $RN = I$	Padov PC = P	d 65=1	Group 5 Soil	ASI - Aerobic w/Spray Irrig		0-18"	ØY DN
	dhill many				n U3=0		The state of the play in the		1 - 10	1
RECOMM	ENDED S	YSTEMAN	D SIZING C		EWITHI	HGHEST CLAY	MOST PREVAI	ENT SOIL GRO	UP IN SIZING	RANGE IN
TREATME	ENT REOL	IRED chec	cone			SIZING RANGE		ENTIFIED IN (a)		
Septic ta	ank Ac	robic treatm	ent	[S]				□ 2a ⊠ 3	□ 3a □ 4	□5
(X Aerobic	treatment	with nitrog	en reduction			U.113				
CERTIFIE	D SOIL T	ESTER USE	ONLY:							
I certify th	hat cond	neted the ab	ove-describ	ed soil profile do	escription	test in complian	nce with OAC 252:641 on		1/10/2018	
=	1								Date Test Performed	
1	)	7				Brian	Miggletto		- Con	037
Sui Tester Con	profiler.	no non	2020		Tolel	Please Print I in		918-822-798		fication Number 10/2018
		P.O. Box	2038			equah O	K 74465	11hme =	and the second s	Atte Signed
	031131	-,-10,133								
DEQ USE						1 10				
200			EQ on (date	e):		DE DE	Q Reviewed and Accepte	d		
	EQ Soil	1 3 3 4 3 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	fication of	Joint Soil I	rofile	OR	Q Reviewed and Rejecte	d (date and initia	D.	
Pro	file Test		Design			Notes:	Q Keviewed and Rejecte	u (date and milla	.,	
1						Notes: -				

Environmental Specialist's Signature Employee ID	Date Signed and Papersseck Issued
SYSTEM DESIGN: Check all that apply	Work Order No. System No. Owner's Last Name
TREATMENT:  Septic Tank with gal. liquid capacity Acrobic Treatment	Aerobic Treatment with Nitrogen Reduction
DISPERSAL:	
CSA: with feet of subsurface absorption trenches. The trench bottom shall be	no deeper thaninches.
LPD: with agallon capacity pump tank andfeet of subsurface absorpti deeper that inches.	on trenches. The trench bottom shall be no
SE: with feet of subsurface absorption trenches. The trench bottom shall be	no deeper thaninches.
ET/A: withfeet of evapotranspiration trenches. The trench bottom shall be no	deeper thaninches.
L: with bottom dimensions of feet by feet.	5
DI: with agallon capacity pump tanks and feet of drip line.	
SI: with a 700-gallon capacity pump tank and 6,311 square feet of surface applica	tion area
An Alternative system as described on the attached DEQ Form 641-581 Sup, "Supple System".	emental Application for an Alternative
LOCATION OF TEST HOLES: Show the location of all test holes in relation to two fixed reference po	nints in the sketch box below
SKETCH BOX	
15' So' 4 Be Draw M House	



frojen, ex	E C	985		REPORT FOR SOIL I	ON-SI			Work Or Systen	der No.	
GENERAL	INFOR	MATION:								
Name and M	Aailing Ac	ddress of Property	Owner:	Housing Authority	Chero Nation		P.O. Box 1007	Tahlequ	uah	74465
Owner Phor	e Numbe	r: ( )		Owner's E-	Mail Add	ress (Optional):	Isaac Pedrick			774
Property Ad	dress:	2078		ely Hollow Ros	ad	Tahle				Oklahoma
Legal Descr	iption:		and in th	e SW4 NE4 of		02, T17N, R2	2E Lot Size in	ft² or		acres:
Finding Loc	ation:	Take Hwy.			ah, turn		0, turn left on E. Stee	ely Hollow Road, g	go .2 miles,	new
Water Supp		☐ Individual		/ell or ⊠	Public W		ne: Cherokee Co. F	RWD #3		
WATERBO	DDY PRO	DTECTION ARE	A:							
Dispersal fie	eld located	I in Water Body P	rotection.	Area: check one	Zone 1 🗵	Zone 2 or	None			
The following This inc	ng inform lividual se mated flo	wage treatment sy w or actual flow f	on DEQ estem will or this sma	Form 641-581cert	al residenc system is	e or duplex with t	he following # of bedroon	а	Type of Facility	
30112 1133										
	11	OLE #1		IOLE #2	- 1	IOLE #3		SEPARATION RANG		
Depth of	Group	Limiting Layer w/in Interval*	Group	Limiting Layer w/in Interval*	Group	Limiting Layer w/in Interval*		Depth of "shallowest lin		26 inches
Test Hole 0-6"	3		3		3			group found in the sep-		Hole # 2
6-12"	3		3		3			OWED / APPLICAB		Group 4
12-18"	4		4		4	-	System		Sizing Range	
18-24"	4		4		4		CSA - Conventional Sub		12-30"	DY ØN
24-30"	5	G5 26"	5	G5 30"	5	G5 28"	LPD - Low Pressure Do		12-30"	DY ØN
30-36"							SE - Shallow Extended		6-24"	DY MN
36-42"							ET/A - Evapotranspirati	on/Absorption	12-30"	DY ØN
42-48"							L - Lagoon		N/A	DY MN
48"-54"							ADI - Aerobic w/ Drip I		0-18"	DA DIN
		= Ground Water			k G5 = 0	Group 5 Soil	ASI - Aerobic w/Spray I	rrigation	0-18"	□ A □ N
RECOMMI	ENDED S	YSTEM AND S	ZING CI			nameer at	T MOST BROWN		ID 111 0111111	
TREATME	NT REO	UIRED check on	e			HGHEST CLAY SIZING RANGE		ALENT SOIL GROU DENTIFIED IN (a)	P IN SIZING	RANGE IN
☐ Septic ta	nk 🗆 Ae	robic treatment t with nitrogen r		⊠ #			01 02		□ 3a □ 4	□5
CERTIFIE	SOIL T	ESTER USE ON	LY:							
I cortify th	at I cond	ucted the above	-describe	d soil profile de	scription	test in complian	ce with OAC 252:641		1/09/2018 hate Test Performed	
A	7	7				Brian	Miggletto		7	037
Soil Tester's SAn	*					Please Print Fars	t Name Last Name			ification Number
	1	P.O. Box 203	8		Tahle	equah O	K 74465	918-822-7988	1.	/09/2018

Date Signed DEQ USE ONLY: Soil Test Performed by DEQ on (date): □ DEQ Reviewed and Accepted DEQ Soil Verification of Joint Soil Profile

Design Joint Soil Profile OR DEQ Reviewed and Rejected (date and initial)

Notes: Profile Test

Work Order No.
System No.  Qwner's Last Name
YSTEM DESIGN: Check all that apply
TREATMENT:
Septic Tank with gal. liquid capacity Aerobic Treatment Aerobic Treatment Aerobic Treatment with Nitrogen Reduction
DISPERSAL:
CSA: with feet of subsurface absorption trenches. The trench bottom shall be no deeper thaninches.
LPD: with agallon capacity pump tank andfeet of subsurface absorption trenches. The trench bottom shall be no deeper that inches.
SE: with feet of subsurface absorption trenches. The trench bottom shall be no deeper thaninches.
ET/A: withfeet of evapotranspiration trenches. The trench bottom shall be no deeper thaninches.
L: with bottom dimensions of feet by feet.
DI: with agallon capacity pump tanks and feet of drip line.
SI: with a 700-gallon capacity pump tank and 6,311 square feet of surface application area
An Alternative system as described on the attached DEQ Form 641-581 Sup, "Supplemental Application for an Alternative System".
OCATION OF TEST HOLES: Show the location of all test holes in relation to two fixed reference points in the sketch box below
SKETCH BOX
(3) 25'  75'  4 BEPALOM  HOLSE  20'
REMARKS:

SOIL PERCOLATION TEST (PLEASE PRINT LEGIBLY or TYPL)

	RMATION:	Housing	Cherokee		*		
same and Mailing	Address of Property Own	The second secon	Nations	P.O. Box		Tahlequah	74465
Wner Phone Num	ber ( ) •		Owner's E-Mail Add	ltess (Optional): 🛅	Doyle Mackall a	nd Deannadra Gou	ld
roperty Address		W. 835 Road		Tahlequah	74464 Zarrick	Cherokee	. Oklahoma
egal Description	A tract of land i	n the S2 NW4 SI	4 of Section 34,	T16N, R21E	Lot Size	ft <sup>2</sup> or	1 acres
	Take Hwy, 62 s	outh out of Table	quah, turn right o	on S. 470 Road, g	o .1 miles, turn	left on W. 835 Roa	d, go .3 miles.
inding Location	new construction			Charles and a fine a given o			
Vater Supply	☑ Individual Prov.	ate Well [	Public Water Supp	ly Name			
VATERBODY P	ROTECTION AREA:						
Dispersal field le	eated in Water Body P	rotection Area; che	ck one Zone	1 Zone 2 or 2	] None		
∃ This individ:	nformation was certified that sewage treatment sy and flow or actual flow for	stem will serve an	individual residenc	e or duplex with th	ic following # of b al day and is a	Type of E	4
SOIL TEST RI	ESULTS: Design	n Only Print Fir	st and Last Name:			Design Date	Page 1
TEST HOLE	Test Hole Depth	Test Hole Percolation Rate		VEST DEPTH AT V		OVERALL PERCOL	ATION RATE
41	34 inches	_15_ min in		inches		_15_ minut	es inch
#2	34 inches	15 mmm			SYSTEMS ALLO	OWED	
#3	36_inches	_15_ mm/m	1	System Type		Option based on percol	ation test results?
#4	inches	min/in	CSA - Conven	tional Subsurface Ab	scrption.	⊠Y	
115	inches	min/in	1 Lagoon				⊠N
#6	inches	min in	ASI - Aerobic	w Spray Irrigation			⊠N
test holes prior	that I started the preson to starting the presonk 12 inches for at least 4	; I presoaked each	test hole by filling	them with water	and then refilling	them as necessary t	o maintain a wa
Soil Tester Certi 1 certify that I c not be located i Brian	onducted the above-de n a Water Body Protect Miggle	scribed percolation tion Area	test in compliance	TO	on 3/5/20	3/5/20	3.5/2018 That Separat  spectral field will  118 That Separat
Soil Tester Certification of the located in Brian See Local Registration #	fication: onducted the above-de- n a Water Body Protect	scribed percolation ion Area atto		TO		3/5/20	persal field will
Soil Tester Certify that I control be located in Brian Soul Level Registration # P.O. Box 2	ification: onducted the above-de- on a Water Body Protect Miggle classifications 1250	Approximation from Area (III) Are		To sur sur sur		3/5/20	Day Speed opersal field will 018 (tay Speed
Soil Tester Certify that I could be located in Brian Soul Leser Registration in P.O. Box 2	fication: onducted the above-de n a Water Body Protect  Miggle (For Circ.  1250	Jack State  serified percolation ion Area fillo  face State  RPTS  74465	DPI DIS	To sur sur sur	centure	3/5/20	Thiry Separat opersal field will 118 Thir Separat 22-7988 Franc Santher
Soil Tester Certify that I control be located in Brian Soul Level Registration # P.O. Box 2	fication: onducted the above-de in a Water Body Protect Miggle (1915-1956) 1250	seribed percolation ion Area etto fav banc ms  RPI S 74465	DPI DIS	Sad Traje - Sa	centure	3/5/20 918-8	Thiry Separat opersal field will 118 Thir Separat 22-7988 Franc Santher
Soil Tester Certify that I conot be located in Brian Soil Lesson Registration # P.O. Box 2  RECOMMENDED TO SEA OF THE SEA	ification: onducted the above-de- on a Water Body Protect Miggle classification 1250	seribed percolation ion Area etto fav banc ms  RPI S 74465	DPI 1.8	Sad Traje - Sa	centre	3/5/20 918-8	Thiry Separat opersal field will 118 Thir Separat 22-7988 Franc Santher
Soil Tester Certify that I contriby that I contriby that I contribe located in Brian Soil Lesson Registration if P.O. Box 2  RECOMMENDI CONTRIBUTION OF THE CONTRIBUTI	ification: onducted the above-de- on a Water Body Protect Miggle classification 1250	seribed percolation ion Area etto fav banc ms  RPI S 74465	DPI 1.8	SS L - Lagoon	centre	3/5/20 918-8	Thiry Separat opersal field will 118 Thir Separat 22-7988 Franc Santher

		Owner's Last Name	
SYSTEM D	DESIGN:		_
TREATM Septic	Tank with 1,000 gal liquid capacity	Aerobic Treatment	
DISPERSA		. The trench bottom shall be no deeper than 28 inches	
□ L:	with bottom dimensions of feet by	feet or with a diameter of feet	
☐ ASI:	with agallon capacity pump tank and	square feet of spray irrigation area	
LOCATIO	ON OF PERCOLATION TEST HOLES: (Skip this section if percolation to Show the location of all percolation to	olation test not performed) ist holes in relation to two fixed reference points	



ENVIRONMENTAL COMPLAINTS AND LOCAL SERVICES DIVISION
REPORT FOR ON-SITE SEWAGE TREATMENT
SOIL PROFILE DESCRIPTION TEST
(PLL INL PRINT or TYPE)

Oate Rec'd

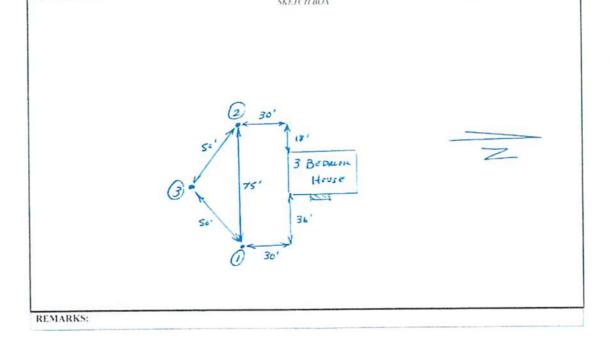
100000000000000000000000000000000000000														
GENERAL	INFORM	ATION:			Ch									
	CONCERNION AND ADDRESS OF THE PERSON AND ADD			Housing	Cheroke Nations		P.O. Box 10	07		Fahleq	uah		7446	5
Name and M	failing Add	ltess of Property	Owner	Authority	Los Same		Making Adher			Lan	Contract Con	-	Zorish	
Charles What	. Number	()		Owner's L-		s (Optional)	Billy Critter	nden and	Stephani	willi	ams			
Owner Phon	ig Symmest.	1 /			William The Control			Tarrest and a contract of						
Property Ad	ldress		24875	Hwy. 51		Table	quah	74464		Chero		O	Aattom	ë.
		The N. 248	71' of th	e W. 208.71' c	of the NW	4 NE4 NW4	NE4							
Legal Deser	intion	of Section 2					Lot	size in		11 0	r 1		ictes	
LEGIN LICES	150000	4			2 0202									
Finding Loc	A11+7/3	Take Hwy.	51 east o	out of Tahlequ	ah, go 5.5	miles, new c	onstruction o	n right.						-
		122 1000 1000	100	-			ne Cheroke	e Co RW	VD #8					
Water Supp	dy.	[ Individual	Private W	ell ar 🖸	Public Wat	er zabbiy - gan	ne Cherone	c co ici						
WATERBO	ODY PRO	TECTION ARE	A:											
District of G	eld torated	in Water Body P	rotection	Area check one	Zone I 🖂	Zone 2 🖾 or	None 🗆							
										fi in a co	in talling		- the see	
Flow Certif	fication: 2	7A O S. 2001, S	ection 2-6-	403 states. It sha rtify the number of	if he the duty	y of the person c	ontracting with a	se of the box	ones that	all be a	ers out his th	Se sess.	100	
reatment sy	stem for a	residence or busi	the second	this inc number of	i bearwins	in the residence	of the water using	C Lit III C CO.						
		at the system can												
The follows	my informa	tion was certified	on DEQ	Form 641-581 cen	Certificat	ion Documentati	on Form)		107					
This me	dividual ser	ware treatment so	stem will	serve an individu	al residence	or duplex with t	he following a or	bedrooms	3					
								day and is a						
☐ The est	imated 103	s of actual flow i	or tins sin	all public sewage	System is		9.00				Digwellian	dida		
SOU TES	TRESIT	rs. Desire	n Only	'rint Lirst and Las	Name of D	Nessenter .				Design	n Date			
SOIL ILS									EPARATI	- D 1	SOF.			_
	- 11	OLE#I	- 1	IOLE #2	110	OLE #3			epth of "sha		minutes and the		42	-
Depth of	Group	Limiting Layer	Group	Limiting Layer	Group	Limiting Layer win Interval*								
Test Hole	U	win Interval*		w/in Interval*		w in Interval	Lest hole w						Hole	
0-6"	3		_ 3		3			alent soil g				_	Gros	_
6-12"	3		3		3		DISPER	SAL ALLO			and the second second second	THE RESIDENCE AND THE	non-spinned piecets	
12-18"	3		3		3		ALC: NO.		pe				(E)	tion
18-24"	3		3		-1		CSA Conven			eption	12-		107	
24-30"	4		4		4		LPD - Low Pro		ng		-		-	
30-36"	4		4		-4		SE - Shallow I	-			6-2	271	01	(I)
36-42"	5	G5 41"	- 5	G5 42"	5	G5 42"	ET/A - Evapot	ranspiration	z Absorptio	1	12-		01	<b>E</b>
42-48"							L - Lagoon				N/	-	01	0
48"-54"							ADI - Aerobie				0-1		D,	0
		= Ground II ater			GS = G	toup 5 Soil	ASI – Acrobic	w Spray Irr	igation		0-1	8	D,	0
RECOMM	ENDED S	VSTEM AND S	IZING CI					or anexa.		u cne		713.7	0.57	F 13
TREATAN	AT DEAL	IDT Daheel on				IGHEST CLAY IZING RANGE		ST PREVA				ZING	KAN	1. 1.
		IRED check or robic treatment			201	A						п.	□5	_
		with nitrogen r		. 🗵	≈1	2 🗆 #3		:	☐ 2a	E 3	□ 3a	П.	T,	
CERTIFIE	D SOIL T	ESTER USE OF	NLY:											
				ed soil profile de	nurrintian t	est in counties	re with OAC	252 641 or	n.		3 05 2	018		
· certify if	na i cona	ucted the above	-UK-MITTIN	a son prome a	escription (	est in compilar					they feetly			
1	7	7				Brian		tiggletto					037	
Not bear &	1	1				Elgony Direct to	u Nove 15	w how					Scotte or 1	
	/	P.O. Box 203	S		Tables	quah O	K 7446	5.5		22-798	88		05 20	
		Autori			1'01	1 14	ate Agr			hart.			Auto Segre	v.,
DEQUSE	ONLY:													
☐ Seit T	lest Perfo	rmed by DEQ	on (date	y:		□ DE	O Reviewed at	nd Accept	ed					
	O Soil	□ Verifica				OR	•							
	tile lest	Des	1	Joint Soil I	rome	☐ DE	Q Reviewed at	nd Rejecte	ed (date at	d initia	d)			
						Notes.								

Work Order No.	
System No.	
Owner's Last Name	

SYSTEM	DESIGN.	Chert a	If that analy

TREATM  Septic	ENT:  Tank with 1,000 gal, liquid capacity  Acrobic Treatment  Acrobic Treatment with Nitrogen Reduction
DISPERS	AL:
⊠ CSA:	with 340 feet of subsurface absorption trenches. The trench bottom shall be no deeper than 30 inches.
LPD:	with agallon capacity pump tank andfeet of subsurface absorption trenches. The trench bottom shall be no deeper thatinches.
☐ SE:	withfeet of subsurface absorption trenches. The trench bottom shall be no deeper thaninches.
☐ ET/A:	withfeet of evapotranspiration trenches. The trench bottom shall be no deeper thaninches.
□ L:	with bottom dimensions of feet by feet.
☐ DI:	with agallon capacity pump tanks and feet of drip line.
☐ S1:	with agallon capacity pump tank and square feet of surface application area
	Alternative system as described on the attached DEQ Form 641-581 Sup, "Supplemental Application for an Alternative em".

 $\textbf{LOCATION OF TEST HOLES:} \textit{Show the location of all test holes in relation to two fixed reference points in the sketch box below the property of the prope$ 



SOIL PERCOLATION TEST (PLEASE PRINT LEGIBLY or TYPE)

GENERAL INFORM		Housing	Cherokee	POR	ox 1007	Tahlequah	74465
	ddress of Property Ov	PIPM Name	Nations Last Name	Mailin	g Address	City	Zip Code
Owner Phone Number	er: <u>(</u> ) -		Owner's E-Mail Add	dress (Optional):			
Property Address:		09 W. 678 Road Street Address		Hulbert	Zip Code		
Legal Description:	A tract of land	l in the NE4 SE4 o	of Section 18, T18	N, R21E	Lot Size	ft² or 3 Road, go .6 miles, n	1 acres
Finding Location:	Take N. Lost on left.	City Road north or		ocks or miles from a gi		, round, go to minos, in	
Water Supply:		ivate Well or [	☐ Public Water Supp	ly – Name:			
	OTECTION AREA						
		Protection Area: ch		1 Zone 2 c			
on-site sewage tre will be served by t The following info This individua	atment system for a the sewage treatmen ormation was certiful al sewage treatment	residence or busines at system so that the ied on DEQ Form 64	ss to certify the num system can be propo 11-581 cert. (Certific i individual residenc	erly sized." cation Documer ce or duplex wit	ntation Form)  th the following #	of bedrooms  Type of	4 Facility
SOIL TEST RES	SULTS:  Des	ign Only Print Fi	rst and Last Name:	2000年		Design Date	E PRE
TEST HOLE	Test Hole Depth	Test Hole Percolation Rate	SHALLOV GROUNDWA	VEST DEPTH A	T WHICH COUNTERED	OVERALL PERCO	LATION RATE
#1	_35_ inches	_29_ min/in		0 inches		_29_ minu	tes/inch
#2	_35_ inches	_29_ min/in			SYSTEMS A	LLOWED	
#3	_35_ inches	_29_ min/in	11	System Type		Option based on perco	lation test results?
#4	inches	min/in	CSA - Convent	tional Subsurface	Absorption:	⊠Y	Пи
#5	inches	min/in	L – Lagoon:			□Y	⊠N
#6	inches	min/in	ASI - Aerobic	w/Spray Irrigation	n:	□Y	Ν
depth of at least I  Brig  Printed Fire  Soil Tester Certific	nat 1 started the presonant 1 started the presonant 2 inches for at least an	ak; I presoaked each t 4 consecutive hours Miggletto  Last Name	i test hole by filling	them with wa	ignature	ling them as necessary	11/21/2017 Date Signed
I certify that I cor	nducted the above-on Water Body Prote	lescribed percolation ection Area.	test in compliance	with OAC 252:	641 on11/2		ispersal field will
Brian Soil Tester's F		Last Name			's Signature		1/2017 Date Signed
-	1250	RPS ⊠ RPES K 74465	PE LS	□ ss		918-	822-7988 Phone Number
DECOMMENDE	SYSTEM: (check						
		e Absorption (require	s soil test)	L - Lagoo	n	ASI - Aerobic with S	Spray Irrigation
The second secon		st Results / Design:					
☐ ACCEPTE	ED by DEQ on:	Date		REJECTE	D by DEQ on:	Date	Initial
Notes:							
						Employee I	7

Owner's Last Name
SYSTEM DESIGN: /   /
TREATMENT: 7 2/6/18  Septic Tank with 1,000 gal. liquid capacity  Aerobic Treatment
DISPERSAL:  CSA: with _510_ feet of subsurface absorption trenches. The trench bottom shall be no deeper than 29_ inches
L: with bottom dimensions of feet by feet or with a diameter of feet
ASI: with agallon capacity pump tank and square feet of spray irrigation area
LOCATION OF PERCOLATION TEST HOLES: (Skip this section if percolation test not performed)  Show the location of all percolation test holes in relation to two fixed reference points
3 72' 4 BEDSGOM 1-torse