



MARION COUNTY PUBLIC WORKS  
BUILDING INSPECTION DIVISION  
5155 Silverton Rd NE  
Salem OR 97305  
(503) 588-5147 Fax (503) 588-7948  
<http://publicworks.co.marion.or.us/building>

## **SEPTIC CONSTRUCTION-INSTALLATION PERMIT** **APPLICATION INSTRUCTIONS**

Refer to your Site Evaluation report for the approved disposal field locations, the type of approved system, and other construction details. The proposed development plan submitted with your application will be evaluated based on the original site approval specifications for compatibility and compliance.

### **ITEMS NEEDED TO PROCESS YOUR APPLICATION:**

#### **1. Completed Application Form and Fee:**

Oregon Administrative Rule (OAR) 340-071-0160 does not allow Marion County to accept incomplete applications. Please return the completed application form, with the appropriate fee and attachments:

The **owner must sign the application form or owner's authorized representative**. "*Authorized Representative*" means a person with written authorization to act as another person's delegate. If needed, an **Authorization to Apply** form is attached for your convenience.

\* Indicate the proposed use of the system, number of bedrooms, employees, etc.

#### **2. A Detailed Site Plan:**

Instructions are listed on the backside of site plan form. Include construction details: size and type of tank(s), distribution or drop boxes, effluent pump—alarm & float details, length of lines, existing drain lines and tanks, etc.

#### **3. Land Use Compatibility Statement (LUCS):**

Required when a property is located inside the city limits, or urban growth boundary of a city. Instructions are provided with the LUCS form.

#### **4. Stakeout of Proposed Septic System**

If required as a condition of the Site Evaluation, or requested by the Onsite Wastewater Specialist. A stakeout is used to show that the proposed septic system will fit on the property while meeting all DEQ-required setbacks. If the system does not fit, other options may be considered such as a different type of septic system or obtaining an easement to place the system or a portion of it on an adjacent property.

**Return the completed application form, fee and attachments to:  
Marion County Building Inspection Division at the address listed above.**



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**NOTICE AUTHORIZING REPRESENTATIVE**

I, \_\_\_\_\_, have authorized  
 (Property Owner / Print Name)

\_\_\_\_\_ to act as my agent in performing the  
 (Authorized Representative / Print Name)

activities necessary to obtain site evaluations, permits, and other onsite wastewater treatment program services provided by the Department of Environmental Quality or County Agent on the property described below in accordance with OAR chapter 340, division 071.

**PROPERTY IDENTIFICATION:**

\_\_\_\_\_ Property Situs or Street Address

And described in the records of MARION County as:

Legal Description \_\_\_\_\_ Tax Lot #(s) \_\_\_\_\_

**PROPERTY OWNER:**

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address \_\_\_\_\_

**AUTHORIZED REPRESENTATIVE:**

Printed Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address \_\_\_\_\_

DEQ License # \_\_\_\_\_ CCB # \_\_\_\_\_



# Application for Onsite Wastewater Treatment System

Date Stamp:

MARION COUNTY PUBLIC WORKS  
BUILDING INSPECTION DIVISION  
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(503) 588-5147 Fax (503) 588-7948  
[www.co.marion.or.us/PW/BuildingInspection](http://www.co.marion.or.us/PW/BuildingInspection)

## A. Property Owner Information

Name \_\_\_\_\_ Mailing Address \_\_\_\_\_  
City, State, and Zip \_\_\_\_\_ (Area Code) Phone # \_\_\_\_\_

## B. Legal Property Description

Property Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Parcel # \_\_\_\_\_ Tax Lot \_\_\_\_\_ Acreage or Lot Size \_\_\_\_\_

Directions to Property: \_\_\_\_\_

## C. Existing Facility / Proposed Facility / Water Information

Existing Residential: \_\_\_\_\_ Proposed Residential: \_\_\_\_\_ Existing Commercial: \_\_\_\_\_ Proposed Commercial: \_\_\_\_\_ Water Supply: \_\_\_\_\_  
Number of Bedrooms \_\_\_\_\_ Number of Bedrooms \_\_\_\_\_ Number of Employees/Seating \_\_\_\_\_ Number of Employees/Seating \_\_\_\_\_  
 Public \_\_\_\_\_ Name \_\_\_\_\_  
 Private \_\_\_\_\_ Well, Spring, Shared \_\_\_\_\_

## D. Type of Application

Site Evaluation  Renewal Permit  Authorization Notice for:  
 Construction Permit  Permit Reinstatement  Replacing a Dwelling  
 Repair Permit  Permit Transfer  The Addition of One or More Bedrooms  
 Major  Minor  Existing System Evaluation  Personal Hardship  
 Alteration Permit  Record Review  Temporary Housing  
 Major  Minor  Other \_\_\_\_\_  Connecting to an Existing System Never in Use (over 5-yrs old)  
 Other – Please Specify \_\_\_\_\_

If the required fee and attachments are not included with this application, it will be returned to you as incomplete.  
Post the orange card at the entrance to the property. Flag the test holes.

By my signature, I certify that the information I have furnished is correct, and hereby grant Marion County, authorized agent of the Department of Environmental Quality, permission to enter onto the above described property for the sole purpose of this application.

Applicant's Name – Please Print Legibly \_\_\_\_\_ Applicant's Phone Number \_\_\_\_\_ DEQ Lic. # (if applicable) \_\_\_\_\_

Applicant's Mailing Address \_\_\_\_\_ Email: \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_ CCB# (if applicable) \_\_\_\_\_  
Applicant is the  Owner  Authorized Representative (form attached)

# Marion County Onsite Disposal System Fee Schedule

Effective August 1, 2024

New Site Evaluations	Marion County Fee	DEQ Surcharge	Total Fee w/DEQ Surcharge
Single Family Dwelling - First Lot	\$890	\$117	\$1,007
- each add'l lot evaluated during initial visit	\$820	\$117	\$937
Commercial Facility System – First 1,000 Gallons	\$940	\$117	\$1,057
-Each Additional 500 Gallons	\$180	-	\$180

Construction Installation Permits	Fee	DEQ Surcharge	Total Fee w/DEQ Surcharge
Standard System, Redundant System, Sapro-lite, Seepage Pit, Steep Slope	\$1,080	\$117	\$1,197
Alternate Treatment Technologies, Capping Fill, Pressure Distribution, Tile Dewatering	\$1,550	\$117	\$1667
Sand Filter, Recirculation Gravel Filters	\$1,800	\$117	\$1,917
Gray Water Disposal Sump	\$430	\$117	\$547
Holding Tank	\$820	\$117	\$937
Major Repair	\$670	\$117	\$787
Minor Repair	\$340	\$117	\$457
Major Alteration Permit	\$850	\$117	\$967
Minor Alteration Permit	\$470	\$117	\$587
Permit w/sewage flow > 1000 gallons per day in addition to above, per 500 gallons per day	\$110	-	\$110
Pump System - in addition to permit fee	\$70	-	\$70
Permit Renewal/Transfer - Field Visit	\$500	\$117	\$617
Permit Renewal/Transfer - No Field Visit	\$40	\$117	\$157
Commercial Plan Review	Fee	DEQ Surcharge	Total Fee w/DEQ Surcharge
Gallon/day = 601 - 1000 Gallons	\$370	-	\$370
Each 500 Gallons per day above 1000	\$70	-	\$70
Other Onsite Activities	Fee	DEQ Surcharge	Total Fee w/DEQ Surcharge
Authorization Notice with Field Visit	\$700	\$117	\$817
Authorization Notice without Field Visit	\$220	\$117	\$337
Pumper Truck Inspection - First Truck	\$190	-	\$190
Pumper Truck Inspection - Additional Truck	\$100	-	\$100
Existing System Report	\$650	\$117	\$767
Mobile Hardship Renewal Inspection	\$370	\$117	\$487
Annual Report Evaluation Fee Holding Tanks/ Alternate Systems	\$80	-	\$80
Alternate System Inspection Fee	\$520	-	\$520
Hourly Inspection Rate	\$80	-	\$80
Reinspection Fee	\$80	-	\$80
Compliance Recovery Fee (For work done without permits) when authorized by OAR 340-071-0140 is equal to the application fee.	Varies		
Record Review	\$70	-	\$70