

Marion County OREGON

Brooks Community Service District
5155 Silverton Rd NE
Salem, OR 97305
Ph. (503) 588-5084 | service_districts@co.marion.or.us
https://www.co.marion.or.us/PW/servicedistricts/Pages/B
rooks-Community-Service-District.aspx

Brooks Community Service District Sewer Permit Application

Sections 1, 2, 3, and 6 are required for <u>all</u> applications. Sections 4 and 5 are only needed if applicable

| 1. Project Information | (Required) | | |
|------------------------|---|--------------------------|---|
| Project Name: | | | |
| Basic Description of | | | |
| Work: | | | |
| Parcel #(s): | | | |
| Address: | | | |
| City: | | | |
| ZIP: | | | |
| Note: If no address | is assigned to the subject property, er | nter "No Address As | signed" |
| | | | |
| 2. Owner Information | (Required) | | |
| First and Last Name: | | | |
| Mailing Address: | | | |
| E-mail: | | | |
| Primary Phone: | | | |
| | | | |
| 3. Applicant Informati | on (Required) | ☐ Check if same a | as Owner |
| First and Last Name: | | | |
| Organization Name: | | | |
| Mailing Address: | | | |
| E-mail: | | | |
| Primary Phone: | | | |
| | | | |
| 4. Agent for Applicant | Information (If Applicable) | ☐ Check if same as Owner | ☐ Check if same as Licensed Professional |
| First and Last Name: | | | |
| Organization Name: | | | |
| Mailing Address: | | | |
| E-mail: | | | |
| Primary Phone: | | | |
| | | | - |

| 5. Licensed Professional Information (If Applicable) | | | | |
|---|--|--|---|---------------------|
| License Type (CCB, F | PE, etc.): | | | |
| License #: | | | | |
| Business Name: | | | | |
| First and Last Name | : | | | |
| Mailing Address: | | | | |
| Primary Phone: | | | | |
| Email Address: | | | | |
| | | | | |
| | | Check all that apply | | |
| Type of Structure: | □ Commercial | ☐ Industrial ☐ Resident | | |
| Residential only: | Number of | | Approximate | |
| | Bedrooms: | | Square Footage of | |
| Camana anaial amb | | | House: | |
| Commercial only (including multi- | Nature of | | Estimated Gallons/ Day (multifamily see | |
| family): | Business: | | bottom of page)* | |
| ionniy). | Occupancy: | | # of Multifamily Units | |
| Industrial only: | Nature of | | Estimated Gallons/ | - i |
| | Business: | | Day: | |
| | 2431112331 | | , | |
| | Occupancy: | | | |
| | Process water | Attach description of pro | | |
| | discharge: | suspended solids, Biochemical Oxygen Demand (BOD), and any | | |
| | | toxic materials such as h | , | |
| Type of Project: ☐ Construction ☐ Improvement ☐ Other, explain: | | <u>'</u> | | |
| | (If installing a new tank, applicant is responsible for costs of installation to district | | | |
| | specifications. Specifications will be attached to the permit. A plot plan is required for new installations. The plan shall be to scale with dimensions from the new tank to the property | | | |
| | | nificant structures in the vicin | | ank to the property |
| Type of Work: | | tion | | |
| 71 | | Repair Other, explain: | | |
| Site Plan: | • | Site Plan Attached | | |
| | | - | | |

^{*}Multifamily = 300 gallons per day per unit. Minimum of 900 gallons per day.

| Construction Installation Permits | Fee | Total Fee w/DEQ |
|---|-------|--------------------|
| | | Surcharge |
| Residential System Installation | \$600 | \$600 |
| Multi-Family System Installation | \$750 | \$750 |
| Commercial System Installation | \$750 | \$750 |
| Industrial System Installation | \$750 | \$750 |
| | | |
| Commercial/Multifamily/Industrial Plan Review | Fee | Total Fee |
| | | w/DEQ |
| | | Surcharge |
| Gallon/day = 601 - 1000 Gallons | \$250 | \$250 |
| Each 500 Gallons per day above 1000 | \$50 | \$50 |
| | | |
| Other Activities | Fee | Total Fee |
| | | w/DEQ |
| | | Surcharge |
| Reinspection Fee | \$50 | \$50 |
| Reconnection Fee (of same use) | \$300 | \$300 |
| No Service call-out | \$150 | \$150 |

Applicant's Statement:

| I hereby make application to the Brooks Community Service District for sanitary sewer se | rvice |
|--|-------|
| for one: | |

| Single Family Residence | Multifamily Residence |
|-------------------------|-----------------------|
| Commercial Facility | Industrial Facility |

I understand that the District will not allow discharge of sewage that is deleterious to its treatment process (see Brooks Community Service District Sewer Use and Regulation Ordinance 906 – Section 7) and agree that any permit may be terminated after one warning if deleterious sewage in violation of the permit is discharged to District treatment facilities.

The above information is true to the best of my knowledge and belief. I agree that I will bear all costs associated with installation of any new tank and service lines and will pay the monthly service charge from date of permit approval. I understand that the tank and service lines shall be installed to service district standards according to the approved site plan, and that I will provide a site plan for approval. I understand this permit does not grant permission to construct anything in the public right-of-way. A separate road authority permit is required to perform work in a public right-of-way.

I understand that the Brooks Community Service District will accept these improvements to the District and maintain them as a part of the District beginning no sooner than one year after the completion of the improvements. Prior to acceptance into the District, all improvements must be inspected and approved by the District Engineer.. I understand that I will be responsible for all corrective maintenance work needed on the improvements until improvements are accepted into the District. See Brooks Community Service District Sewer Use and Regulation Ordinance 906 for more information.

The Applicant shall indemnify and save harmless the Brooks Community Service District, its governing body, its officers and employees from all suits and actions; or claims of any character brought because of any injury or damages received or sustained by any person or property on account of the operations of the Applicant, any Subcontractors or the employees of either; or on account of or in consequence of any neglect or misconduct of the Applicant, and Subcontractors or the employees of either.

The Applicant accepts and approves the terms and provisions contained and attached hereto, including the special provisions. Permits for construction expire one (1) year from date of issue.

Note: This application is not an approved permit and does not authorize the start of work

| Note: This application is not an approved permit and does not authorize the start of work. | | | |
|--|--|--|--|
| Print Owner's Name | | | |
| Signature of Owner | | | |

SPECIFICATIONS FOR NEW COMMERCIAL INSTALLATIONS

While new installations are the responsibility of the property owner, the Brooks Community Service District assumes maintenance responsibility and ownership of the installation one year from the date of the final inspection.

As the eventual owner of the equipment being installed, our specifications are more stringent than State code. They are based on maintaining the same type of equipment as installed in the original system. This reduces cost to the citizens of the District by:

- 1. Minimizing inventories of spare parts
- 2. Minimizing the need for extra training for operators on different types of equipment and materials
- 3. Minimizing the possibility of breakdowns

Therefore, strict adherence to spec's till be required by the District. Assistance and clarifications can be obtained by calling the District operator or the operations manager at 503-588-5304.

Please call for a pre-construction meeting with an operator prior to ordering equipment and starting your project.

PERMITS AND INSPECTIONS

A construction permit must be obtained prior to installation. These permits are available from the District operator, Marion County Public Works, 5155 Silverton Road NE. Permits may modify or add to the requirements of these specifications.

Locate requests must be made prior to any excavation. Locates can be obtained by calling 800-332-2344.

When working in the Right-of-Way on County or State roads, ROW permits are the responsibility of the property owner. All traffic control requirements of the appropriate Road Authority must be met.

Inspections must be requested at least 24 hours in advance and may not be completed for 48 hours on occasion. However, nearly all can be done in accordance with the installer's schedule.

Website:

SEPTIC TANKS

| 1 | · · · · · · · · · · · · · · · · · · · |
|---------------|--|
| | Willamette Graystone, LLC, Eugene, telephone 541-726-7666. Waite Concrete Products, |
| Tank Source: | LLC, Canby, 503-266-2670. Specify that the tank must be constructed with Brooks |
| | specifications. They will include a cast band to accept the access riser. |
| | Septic tanks shall be sized in conformance with OAR 340-071-0220(3)(a). Size must be |
| . | approved by District. Heavy duty models will be required for burial of 3' or deeper. The |
| Size: | tank shall have a separate baffled dosing chamber (or separate dosing tank) with pump |
| | assembly. Specify a 4" or 6" PVC wall sleeve to match the size of the gravity line needed. |
| | Willamette Greystone provides tank installation and testing instructions with each |
| | tank. Follow these instructions, and if you feel there is a discrepancy between our |
| | requirements and theirs, please call before continuing. |
| | Use 4" of well-compacted sand or 3/4 minus rock under the tank, level to 1/4" in 20'. If |
| | native soil is not suitable for tank support, the District may require over-excavation and |
| | more sand or crushed rock. Call for inspection prior to setting tank. The District |
| | Wastewater Operator will inspect the tank cavity and must be present for the placing |
| | of the tank. |
| Tank | |
| | Around and under external piping, use compacted ¾"-0" crushed rock or sand. |
| Installation: | Compact backfill over and around tank to a minimum of 85% maximum dry density per |
| | ASTM T-99 test specification. |
| | Tank watertight test: Call to schedule inspection. Follow Willamette Graystone, LLC or |
| | Waite Concrete Products, LLC's instructions regarding backfilling before water testing. |
| | Then fill to 2" into the riser and above the riser ring joint. 1/2" of decline in the water |
| | level in 24 hours is allowable. Tanks must be soaked 24 hours prior to test. A tank may |
| | be rejected by the District if it fails a second test after being repaired. |
| | Place tanks in accessible location that is not behind a locked gate, in the front or side |
| | yard and on higher ground that is not subject to flooding. |
| Access Riser | Orenco, Sutherlin 1-800-348-9843 |
| Source: | oreneo, suthermi 1 ooo 5 to 50 to |
| Access Riser | Duplex (double) pump: 30" diameter |
| Size: | Effluent Filter for Settling Tank: 24" diameter |
| | Install to place lid 1-3" above the surrounding surface in non traffic areas and 3-6" |
| Riser | below manhole lid in traffic areas. |
| Installation: | Bond with two-part epoxy from Orenco or approved bonding agent (check with |
| | inspector), cured 24 hours before backfilling. Call for inspection prior to backfilling. |
| Riser Lids in | Output lide to metals viscousing imptalled with product and baselines. Blancalled the control of the |
| Non-Traffic | Orenco lids to match riser size, installed with gasket and hex bolts. Riser shall be protected by |
| Areas: | either bollards or landscaping methods. |
| 711 Cu3. | Orongo lide to match ricar city, installed with gook and have halts inside east income and have |
| Riser Lids in | Orenco lids to match riser size, installed with gasket and hex bolts inside cast iron manhole frame set in concrete traffic slab per the districts standard drawing. Call for inspection prior to |
| | pouring concrete. |
| Traffic | Manhole lid shall be sealed with a neoprene O-ring, 3-bolt design with ½" stainless bolts |
| Areas: | |
| | and two cast recessed lifting bars. Lids to read "Sewer" or to be marked with an "S". |

GRAVITY SEWER LINE

| | Ţ |
|---------------|--|
| Gravity Pipe: | 4" or 6" PVC (Schedule 40 glued joints or ASTM 3034 SDR 35, bell and spigot with rubber gasket joints) or ABS glue joint pipe. Rubber gasket joints shall be "Ring Tite" or "Fluid Tite" brands as manufactured by JM Pipe or Certain Teed pipe. |
| | Fittings and service cleanouts shall be of the same type, class, and grade of material as the pipe. |
| | Rubber couplings shall be Fernco Series 1006, 1056, or approved equal. |
| | Minimum cover is 24", unless authorized by the District. |
| | Slope shall be at least ¼" per foot for 4" pipe, 1/8" per foot for 6" pipe. |
| | Use a minimum of bends and fittings. Bends shall be 45 degrees or less unless approved by the District. |
| | Install 12 gauge solid-core trace wire with green insulation from the clean- |
| | out to the tank riser, wrapping around each twice. Connect to clean-out at |
| Trace Wire: | ground level. Secure to pipe also every 20' intervals and at all bends. |
| | Make splices and connections with waterproof heat shrink splice kits, or |
| | approved underground connector. |
| | One cleanout at least five feet from the building, and one at least every |
| Clean-outs: | 100 feet. Caps should be installed slightly below grade. In improved areas, |
| | cover with a Brooks Type 1-RT or 3T box. |
| | Call for an inspection of the gravity line prior to backfilling. |
| | Thoroughly compact bedding and backfill material under and around |
| | service piping connection to STEP tank to prevent differential settling and |
| | leakage into or out of connection. |
| | Provide 4" pipe bedding of 3/4"-0" crushed rock or sand, free of sticks, |
| Backfill: | stones, or other debris. Install piping and provide 12 inches of 3/4"-0" |
| васктін: | crushed rock or sand as pipe zone material. |
| | In improved areas, above the pipe zone, use ¾"-0" crushed rock and |
| | compacted to 95% of maximum dry density per ASTM T-99 test |
| | specification. Compacted native material may be used in unimproved |
| | areas. |
| | Minimum cover is 24 inches or as authorized by the District. |
| Using Near | Installations near waterlines must meet County regulations and building |
| Waterlines: | codes. For specific rules, contact the Building Inspection Department |
| waterinies. | at 503-588-3046. |

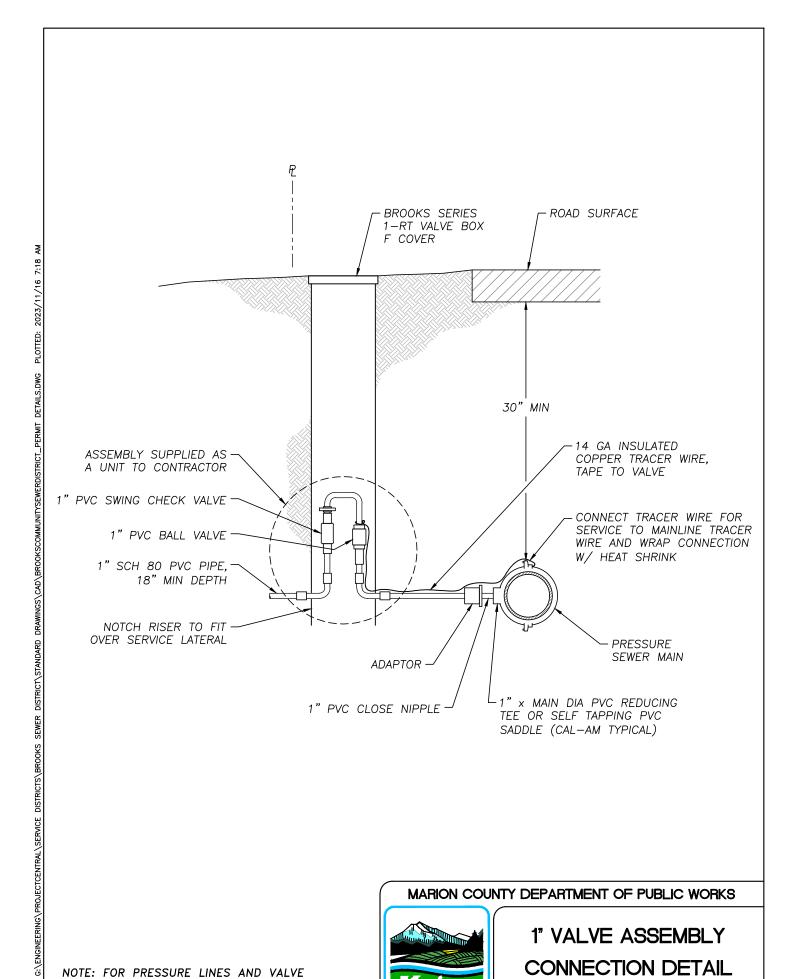
PRESSURE SERVICE LINE

| Pressure Piping and Fittings: | Schedule 40 or 80 PVC, 1" for simplex and 2" for duplex. ABS will not be |
|-------------------------------|--|
| | accepted. Solvent weld, using primer and cement. |
| | Ball valves shall be PVC, the same size as the service line, located in a valve box. |
| | Swing check valves are to be bronze or PVC and same size as service line. |
| | Stainless Steel Saddle Taps: Call for an inspection; a district wastewater |
| and rittings. | operator must be present during hot tap connections, and they must be done |
| | by a licensed contractor or plumber. |
| | Pressure service lines shall be pressure tested to 100 psi with no more than 5 psi |
| | loss in 30 minutes. Call for an inspection. |
| | Install 12 gauge solid-core trace wire with green insulation continuously from |
| | the force main to the tank riser, wrapping around the riser twice. Secure to pipe |
| Trace Wire: | every 20' and at all bends. Extend a loop of wire to the top of each valve box. |
| | Make splices with waterproof heat shrink splice kits or approved underground |
| | connector. |
| | Box and cover are to be concrete with cast iron ring and lid. The lid is to say |
| | "Sewer" or "S". The box is to be a Brooks 1RT or 3T, as appropriate, with valve |
| | box extension as required. |
| | Valve assembly to be an in-line ball and check valve. A ball valve shall be located |
| | in an 8-inch PVC riser with Brooks precast concrete box and cast iron lid above, |
| | marked "Sewer" or "S". A plastic box may be allowed if in a landscaped area |
| Valve Box | protected from traffic, and when approved by the District Operator. The check |
| Assemblies: | valve shall be direct buried, located adjacent to and downstream of the ball |
| | valve. "Goose neck" installations are no longer required by the district. |
| | Install valve boxes true and plumb so that valves operate smoothly. Notch risers |
| | such that there is a 4" minimum clear distance from the pressure service line. |
| | Keep dirt and debris out of valve boxes. The valve box/riser assembly shall be |
| | extended at least 4" from the fully collapsed position. |
| | Install pressure service line on a uniform grade from the septic tank to the force |
| | main unless site conditions prohibit. Clean the interior of pipe of foreign |
| | material before connection to force main. |
| | Call for an inspection prior to backfilling. |
| Installation and | Provide 4" pipe bedding of 3/4"-0" crushed rock or sand, free of sticks, stones, |
| Backfill: | or other debris. Install piping and provide 4 inches of 3/4"-0" crushed rock or |
| | sand as pipe zone material. Lay pipe with 30" minimum cover. |
| | In paved and graveled areas, backfill above pipe zone with 3/4"-0 or 1"- |
| | 0"crushed rock, compacted to 95% of maximum dry density per ASTM T-99 test |
| | specification. Compacted native materials can be used in other areas. |
| | Required in commercial and industrial applications. |
| Flow Meters: | Use Sensus SR meters reading in gallons, the same size as the pressure line. |
| | Install in a Brooks Box using Schedule 80 quick disconnect unions. |
| L | and the second s |

PUMPS, CONTROLS, AND VAULT ASSEMBLIES

| Equipment Source: Orenco, Sutherlin. 1-800-348-9843 | |
|--|----------|
| Pump Models: PF100511 for 10 gpm applications | |
| PF200511 for 20 gpm applications | |
| Float Switch Duplex applications (two pumps) will use Model MF-4A | |
| Float switches will be mounted to a removable PVC stem from Orenco | |
| Assembly: Mount with no less than one inch of tether length. | |
| Screened Pump Duplex applications will use Model PVU57-2419-L for Biotube assembly. | |
| Vault Assembly: | |
| Discharge Hose Model HV100B. Two required for duplex. | |
| and Valve: | |
| Effluent Filter For use where pump tanks and filter tanks are used in series. | |
| Assembly: Duplex use two Model FT 1254-36. | |
| Install so as to be easily removable from the tank, using Schedule 40 PVC. | |
| Must be serviced by a dedicated circuit | |
| Duplex, 30 amp | |
| Duplex use Model DAX-1ETM CT TS | |
| An inside mounted alarm test push button must be installed on both. | |
| Mount to building exterior within sight of the septic tank riser, under an eave | and out |
| of the sunlight where possible. | |
| Pump Control Panels: | |
| Or mount on a 4"x 4"x 8' pressure treated post anchored into the ground wit | า 12" |
| diameter concrete foundation (2' depth) within 5' of septic tank. Use ¾" exte | _ |
| plywood, painted grey, for the mounting backboard within sight of the septic | |
| riser. Exact location of pump control panel installation to be confirmed in the | field |
| with the District's operations representative. | |
| Top of the panel on buildings or posts must be 5' above grade. | |
| No 16 AWG THHN or TFFN. Match wire colors with manufacturers written | |
| specifications/diagrams. | |
| Schedule 40 PVC Conduit, UL listed; fittings to be OZ Gedney type – EYA or eq | ual |
| Conduit sealing compound must be NEC approved | |
| Install 18" below grade or 24" below grade in paved or gravel areas, or where | required |
| by building electrical code. | |
| Splice box to be PVC, mounted inside the access riser. | |
| Electrical Conduit Call for an inspection by a District operator prior to backfilling. | |
| and Fittings: Marion County Building Inspection Department must be called for an electr | cal |
| inspection; this must be completed prior to making the sewer system opera | tional. |
| The District will inspect the system as to compliance with their specifications, | but |
| operators are not licensed electricians and cannot perform electrical inspection | ons. |
| Backfill with native material in non-traffic areas. In traffic areas, use ¾"-0" or | 1"-0" |
| crushed rock compacted to at least 95% maximum dry density per ASTM T-99 | test |
| specification. | |

| | BROOKS COMMUNITY SERVICE DISTRICT | | |
|---|---|--|--|
| Marion, | Update my water/sewer account information | | |
| | Sign me up for sewer service | e Service Start Date: | |
| County | SERVICE ADDRESS: | | |
| O R E G O N | Please fill out this form thoroug | hly and to the best of your knowledge. If you have | |
| , , | • | ne District Office at (503) 588-5084 | |
| or service_districts@ | | | |
| TENANT/OCCUPANT | INFORMATION | | |
| CONTACT NAME: | | BUSINESS NAME: | |
| MAILING ADDRESS: | | (if applicable) MAILING ADDRESS CITY, STATE, ZIP: | |
| PHONE NUMBER: | | EMAIL ADDRESS: | |
| Preferred method of | contact: Phone Email M | 1ail | |
| END OF LEASE DATE: | | | |
| (if applicable) | | | |
| OWNER INFORMATIO |)N | Same as Tenant | |
| CONTACT NAME: | | BUSINESS NAME: | |
| MAILING ADDRESS: | | (if applicable) MAILING ADDRESS CITY, STATE, ZIP: | |
| PHONE NUMBER: | | EMAIL ADDRESS: | |
| Preferred method of contact: Phone Email Mail | | | |
| | | | |
| BILLING INFORMATION | DN: | Same as Owner Same as Tenant | |
| CONTACT NAME: | | BUSINESS NAME: | |
| MAILING ADDRESS: | | (if applicable) MAILING ADDRESS CITY, STATE, ZIP: | |
| PHONE NUMBER: | | EMAIL ADDRESS: | |
| Preferred method of contact: Phone Email Mail | | | |



NOTE: FOR PRESSURE LINES AND VALVE ASSEMBLIES SERVING DUPLEXING PUMP SYSTEMS, PROVIDE 2" DIAMETER PIPES AND FITTINGS

MARION COUNTY DEPARTMENT OF PUBLIC WORKS



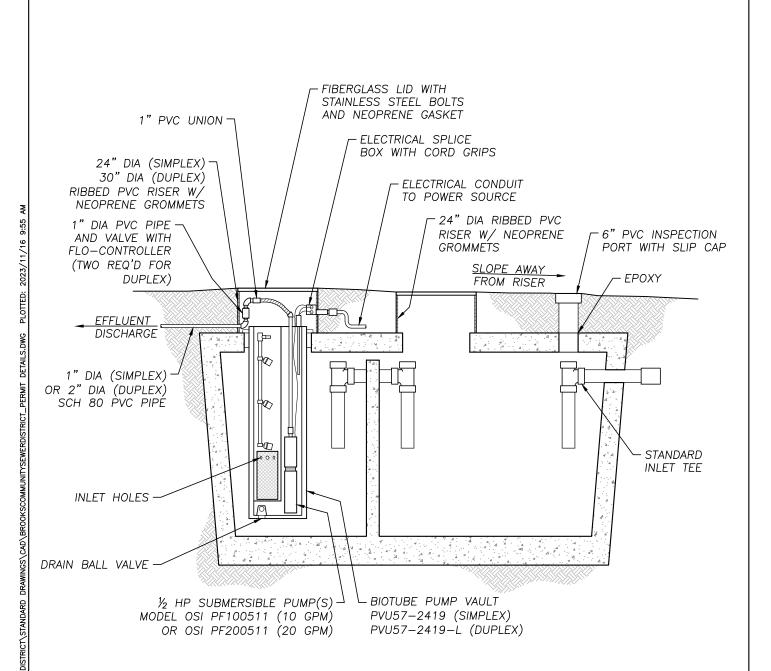
1" VALVE ASSEMBLY **CONNECTION DETAIL**

BROOKS COMMUNITY SEWER DISTRICT

DETAIL NO.

N.T.S.

1 of 1



GENERAL SEPTIC TANK NOTES:

- 1. LOCATE TANK IN NON-TRAVELED AREAS
- 2. HEAVY DUTY SEPTIC TANK REQUIRED FOR BURIAL DEPTH OF 3' OR GREATER
- 3. INSTALLATION OF SEPTIC TANK DEEPER THAN 5—FEET FROM THE TOP OF THE TANK TO THE GROUND SURFACE NOT PERMITTED UNLESS APPROVED BY THE DISTRICT

MINIMUM TANK SIZE REQUIREMENTS:

- 1. 1000 GAL SEPTIC TANK, 500 GAL DOSING TANK OR 1500 GAL BAFFLED TANK W/ SIMPLEX PUMP FOR SINGLE FAMILY RESIDENTIAL
- 2. 1500 GAL BAFFLED TANK W/ DUPLEX PUMPS FOR MULTI-FAMILY RESIDENTIAL, LIGHT INDUSTRIAL OR COMMERCIAL

PUMP NOTES:

BROOKS

G:\ENGINEERING\PROJECTCENTRAL\SERVICE

- . SINGLE FAMILY RESIDENTIAL: SIMPLEX PUMP SYSTEM
- 2. MULTI FAMILY RESIDENTIAL, LIGHT INDUSTRIAL, OR COMMERCIAL: DUPLEX PUMP SYSTEM

MARION COUNTY DEPARTMENT OF PUBLIC WORKS



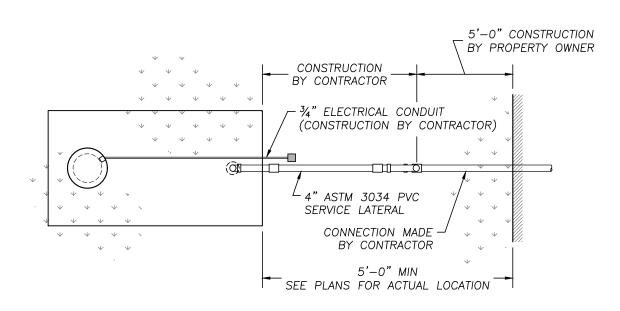
TYPICAL PUMP CHAMBER 1500 GAL

BROOKS COMMUNITY SEWER DISTRICT

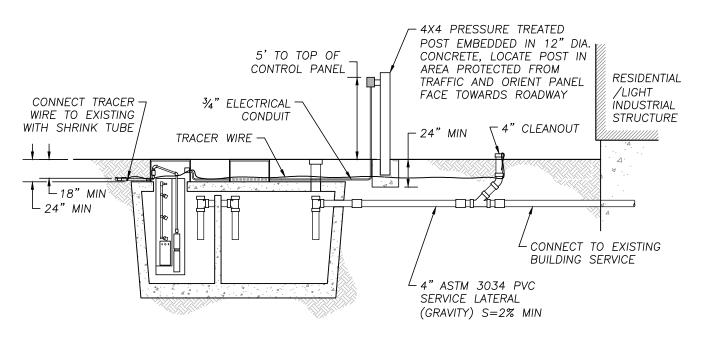
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N.T.S.

1 of 1



PLAN



GENERAL SEPTIC TANK NOTES:

- 1. LOCATE TANK IN NON-TRAVELED AREAS
- 2. HEAVY DUTY SEPTIC TANK REQUIRED FOR BURIAL DEPTH OF 3' OR GREATER
- 3. INSTALLATION OF SEPTIC TANK DEEPER THAN 5-FEET FROM THE TOP OF THE TANK TO THE GROUND SURFACE NOT PERMITTED UNLESS APPROVED BY THE DISTRICT

MINIMUM TANK SIZE REQUIREMENTS:

- 1. 1000 GAL SEPTIC TANK, 500 GAL DOSING TANK OR 1500 GAL BAFFLED TANK W/ SIMPLEX PUMP FOR SINGLE FAMILY RESIDENTIAL
- 1500 GAL BAFFLED TANK W/ DUPLEX PUMPS FOR MULTI-FAMILY RESIDENTIAL, LIGHT INDUSTRIAL OR COMMERCIAL

PUMP NOTES:

PLOTTED: 2023/11/16 9:56

DETAILS.DWG

DISTRICT\STANDARD DRAWINGS\CAD\BROOKSCOMMUNITYSEWERDISTRICT_PERMIT

G:\ENGINEERING\PROJECTCENTRAL\SERVICE

- SINGLE FAMILY RESIDENTIAL: SIMPLEX PUMP SYSTEM
- 2. MULTI FAMILY RESIDENTIAL, LIGHT INDUSTRIAL, OR COMMERCIAL: DUPLEX PUMP SYSTEM

ELEVATION

MARION COUNTY DEPARTMENT OF PUBLIC WORKS



TYPICAL PUMP CHAMBER SINGLE TANK INSTALL

BROOKS COMMUNITY SEWER DISTRICT detail no.

1"=5"

1 of 1