



ON-SITE SEWAGE PERMIT APPLICATION FOR SINGLE FAMILY RESIDENCE

PART A—GENERAL INFORMATION

Property Owner Name: JOSEPH V. DURPOS
Mailing Address: 2250 KETTLE RIVER RD
City: KETTLE FALLS **State:** WA **Zip Code:** 99141
Phone: _____ **Cell Phone:** ⁵⁰⁹ 675-0540 **Email:** durpos@yahoo.com

Primary Contact: Information concerning this application and NETCHD findings will be mailed or provided to the primary contact, and septic designer or engineer as appropriate. It will be the responsibility of the primary contact to provide the information to others involved with the project.

Primary Contact Name: VANCE DURPOS
Mailing Address: 2250 KETTLE RIVER RD
City: KETTLE FALLS **State:** WA **Zip Code:** 99141
Phone: _____ **Cell Phone:** ⁵⁰⁹ 675-0540 **Email:** durpos@yahoo.com
Indicate how you would like to receive information: Standard Mail Email (for fastest response)

Applicant: Please mark appropriate designation

- Property Owner (will be resident) Property Owner (will not be resident) Purchaser (will be resident)
 Purchaser (will not be resident) Realtor Contractor Installer Designer/Engineer

Applicant Name: VANCE DURPOS
Mailing Address: 2250 KETTLE RIVER RD
City: KETTLE FALLS **State:** WA **Zip Code:** 99141
Phone: _____ **Cell Phone:** 509-675-0540

In accordance with Chapter 246-272A WAC, this application shall be signed by the property owner, the contract purchaser of the property, or the property owner's authorized agent. This application is made for the permit to authorize the activities described herein. I certify that I am familiar with the information contained in the application and that to the best of my knowledge, such information is true, complete, and accurate. I certify that I have received and read the permit application instructions and information. I grant permission to allow representatives of the Health Office to enter this property for the purpose of the application evaluation and any subsequent inspections. I understand that requests to be present for inspections must be made at least 72 hours in advance and appointments are scheduled as a multi-hour time slot based on the inspector's availability. All fees and required paperwork must be received prior to a permit being granted. Fees are non-refundable.

Applicant Signature: *Vance Durpos* **Date:** 3/16/26

Mail Final Permit & Sewage System As-Built Drawing To (Choose only one and notify us if address changes):

- Property Owner Primary Contact Applicant
 Other (Name & Address) _____

*** For Office Use Only ***

Date Application Received: <u>3/24/26</u>	Fee Received: <u>688⁰⁰</u>	Invoice #: <u>16998</u>	AR#: <u>8420</u>	ON#:
Planning Dept. Review: _____				

PART B—SITE AND PROJECT INFORMATION

Property Owner Name: JOSEPH V. DURPOS

LEGAL DESCRIPTION & OWNERSHIP

A copy of the most recent tax statement, printout from the county assessor office, or a recorded document (real estate contract, quit claim deed, etc.) verifying property legal description and ownership must be submitted with the permit application. **If ownership and legal description verification documents are not submitted, the application will not be processed.**

Parcel #: 0473305 Acreage/Lot Size: .29 ACRES

Legal Description: _____

(Rural Description or Lot, Block & Subdivision)

Section: _____ Township: _____ Range: _____

Site Address (if available): 1304 MINTER BLVD N. MARCUS, WA

SITE PLAN

An accurate and detailed site plan must be submitted with the on-site sewage permit application for review. The site plan must show all **existing and proposed** elements for this project. See site plan instructions and sample site plan for more information.

DIRECTIONS TO SITE

Provide accurate and detailed directions to the site on a separate document. If there is a driveway or access to the property, it is helpful if this is flagged or marked to help identify the access. Mark or flag the test hole locations if they are not visible from the access to the property.

SITE ANALYSIS

A site analysis must be completed and paid for prior to test hole review. Please contact your local county Planning Office for more information.

TEST HOLES

Please ensure inspector can access property. If you have a gate, it must be unlocked, or you may provide the code for the combination lock. Blocked access may result in additional fees.

Are new test holes dug and ready for inspection? Yes No Mark yes if test holes are ready now. If no, call when ready.

of Test Holes: 2 3 4 5 6

Were test holes dug on this property previously? Yes No Unknown

If yes, do you plan to dig new test holes? Yes No *Info. from prior soil logs must be evaluated for suitability by NETCHD

ON-SITE SEWAGE SYSTEM INFORMATION

New Repair / Replacement Expansion Existing Alteration

For Repair / Replacement: Is the existing system failing? Yes No

Number of bedrooms in residence: 1-2 3 4 5 6 Other: _____

Will wastewater from other structures be disposed into this on-site sewage system or will other structures be connected?

Yes No

If yes, describe what type of structure or wastewater (i.e. private shop, RV dump, etc.): _____

WATER SUPPLY INFORMATION

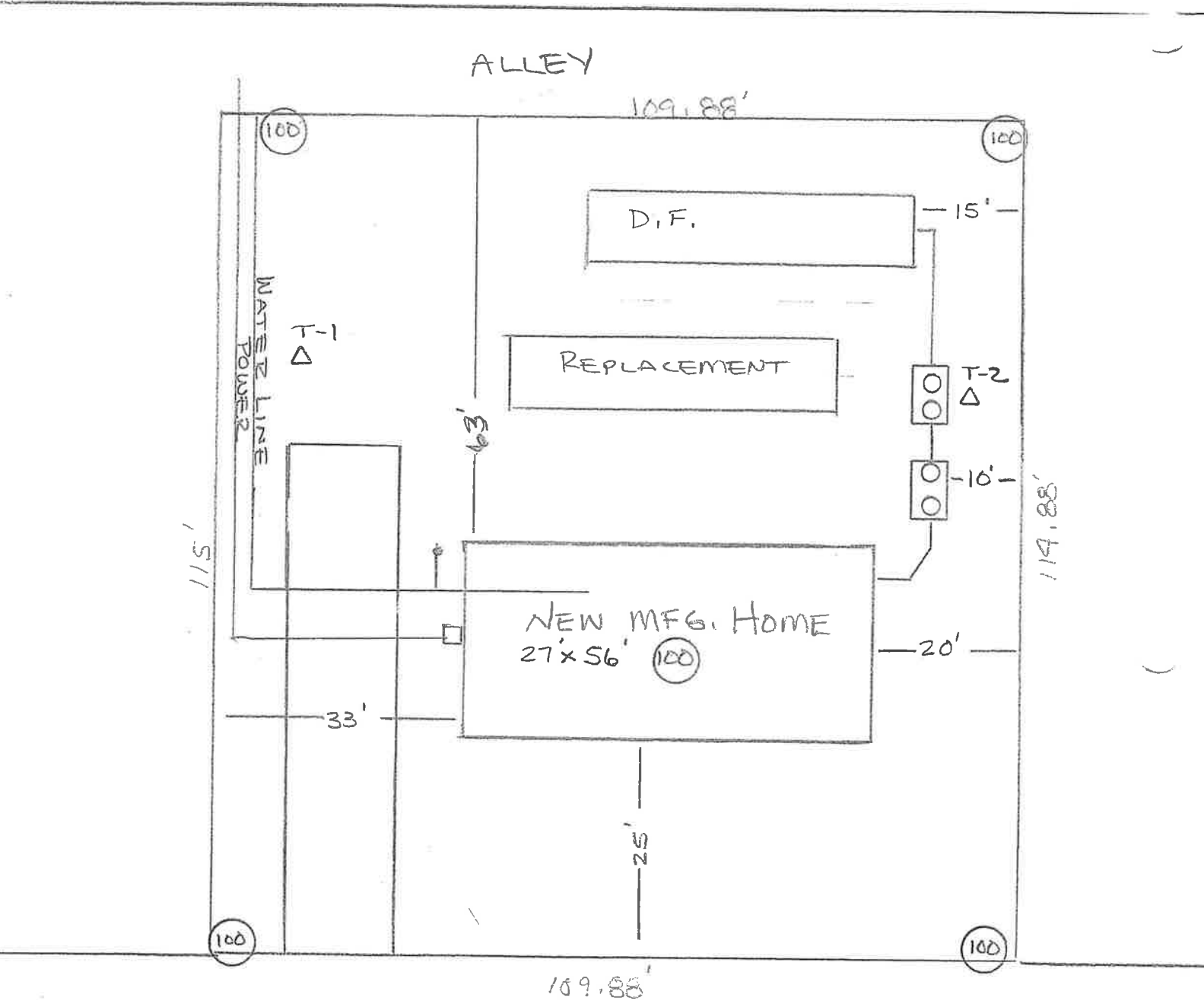
- Private Well- One (1) Residential Connection
 Private Well- Two (2) Residential Connections
 Public or Community Water Supply (Name/ID#):
TOWN OF MARCUS

SITE ANALYSIS

Date Submitted: _____

Application Approved: Yes No Unknown

DURPOS



1304 MINTER BLVD N.

Sunny Pratt

From: Angie Sphuler <town.marcusclerk@gmail.com>
Sent: Tuesday, March 24, 2026 2:16 PM
To: Sunny Pratt
Subject: Re: Site Analysis Application

Sunny,

Yes, this permit is approved.

Angie

On Tue, Mar 24, 2026 at 2:13 PM Sunny Pratt <spratt@netchd.org> wrote:

Hi there!

We received an application for a septic in Marcus. Please review the attached application and let me know if they are approved.

Sunny Pratt

EH Administrative Assistant

240 E. Dominion Ave Colville, WA 99114

Office 509 684-2262 Option 2

Direct 509 563-8022

Fax 509 684-8506

Spratt@netchd.org

www.netchd.org



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Angie Sphuler
Clerk/Treasurer

Town of Marcus
Phone: (509)684-3771
Email: town.marcusclerk@gmail.com

