



CERTIFICATION OF EXISTING SYSTEM DECOMMISSIONING

SEPTIC PERMIT NUMBER: STO _____

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.