

State of Oregon Department of Environmental Quality

Notice Authorizing Representative



I,		, nave	: aumonzeu	
•	(Property Owner/Print Name)		(Authorized Representative/Print Name)	
program servic below in accord Authorized Rep	ces provided by to dance with OAR	he Department of chapter 340, divis my responsibility a	Environmental Quali ion 071. I agree that	onsite wastewater treatment ity on the property described any costs not satisfied by the Q agents to conduct required
Property iden	tification:			
		(Property Situs	s or Road Address)	
And described in the records of:County as:				
Township	Range	Section	Map ID	Tax Lot #(s)
Property own	er:			
Printed Name:				
Address:				
Phone:	Email:			
Signature:				
Authorized re	presentative:			
Printed Name:				
Address:				
City, State, Zip	:			
Signature:				