

EL PASO COUNTY HEALTH DEPARTMENT  
INDIVIDUAL SEWAGE DISPOSAL INSPECTION FORM

Permit # 05513

Date 11-6-89

33440 Highway 94

APPROVED YES  NO  # 1410000008

ENVIRONMENTALIST Lori Doane

Address Highway 94 1/2 mile east of Yoder CO Owner Joseph D. Williams

Legal Description E 1/2 W 1/2 SE 1/4 Section 10 Township 14 El Paso County

Residence  Commercial  # of Bedrooms 3 System Installer Owner

SEPTIC TANK

Commercial  Noncommercial  Measurements: L \_\_\_\_\_ W \_\_\_\_\_ WD \_\_\_\_\_

Construction Material Precast Concrete Liq. Cap. 1250 gal.

DISPOSAL FIELD

Exc. Depth 36" Width 24" Total Length 170' Sq. Ft. 340<sup>sq</sup>

Rock River Rock Depth 12" Under 6" Over 2"

Rockless System: Diameter of Pipe \_\_\_\_\_

Seepage Pits: Number of rings \_\_\_\_\_ Lining Material \_\_\_\_\_ Sq. Ft. \_\_\_\_\_

Working Depth \_\_\_\_\_ Width \_\_\_\_\_

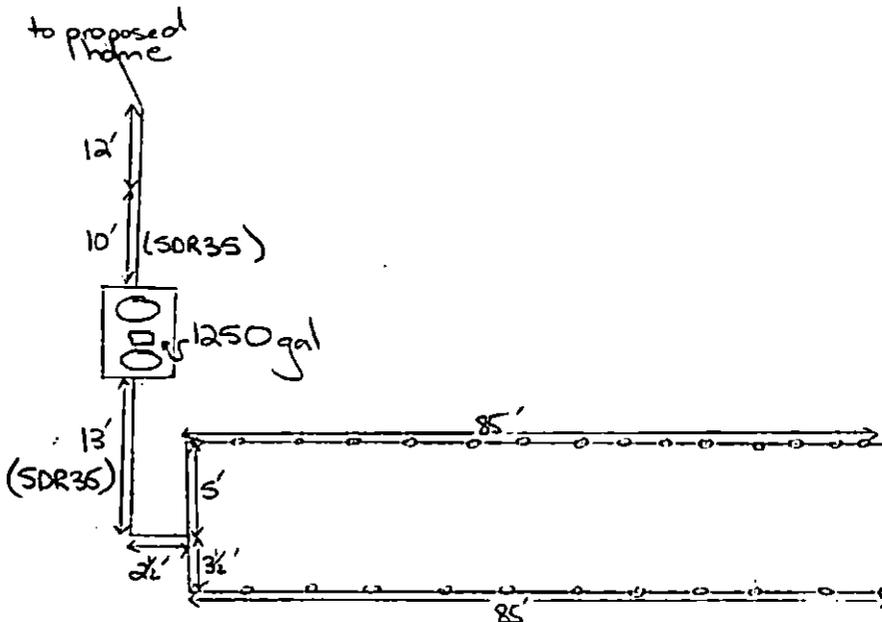
Engineer Design Yes \_\_\_\_\_ Type \_\_\_\_\_ Engineer Approval Letter Yes \_\_\_\_\_

Well 50 feet from Tank Yes 100 feet from leach field Yes

Well Installed at Time of Septic System Inspection Yes  No \_\_\_\_\_ Public Water \_\_\_\_\_

⊗ Well

N →



*[Handwritten signature]*

Acres 4 mi. x 1/8 mi.

**EL PASO COUNTY • COUNTY HEALTH DEPARTMENT**  
501 North Foote Avenue • Colorado Springs, Colorado • 578-3125

Permit **05513**

Water Supply well

**PERMIT**

Receipt No. 2521

**TO CONSTRUCT, ALTER, REPAIR or MODIFY ANY INDIVIDUAL SEWAGE DISPOSAL SYSTEM**

Issued To JOSEPH D. WILLIAMS

Date 10/6/89

Address of Property Highway 94, Sec. 10 T14,  
(Permit valid at this address only)

Phone 574-5263

Sewage-Disposal System work to be performed by Owner Phone \_\_\_\_\_

This Permit is issued in accordance with 25-10-106 Colorado Revised Statutes 1973, as amended. PERMIT EXPIRES upon completion of installation of sewage-disposal system or at the end of twelve (12) months from date of issue—whichever occurs first—(unless work is in progress). This permit is revokable if all stated requirements are not met.

**—THIS PERMIT DOES NOT DENOTE APPROVAL OF ZONING AND ACREAGE REQUIREMENTS—**

**\$150.00**  
PERMIT FEE (NOT REFUNDABLE)  
10/6/90

John B. ...  
DIRECTOR, COUNTY HEALTH DEPARTMENT

...  
ENVIRONMENTALIST

DATE OF EXPIRATION

**NOTE: LEAVE ENTIRE SEWAGE-DISPOSAL SYSTEM UNCOVERED FOR FINAL INSPECTION. 48 HOUR ADVANCE NOTICE REQUIRED.**

SEPTIC TANK: total square feet <u>1250</u> gallons	TRENCH SYSTEM: total square feet <u>331</u> <u>165</u> ft. of trench <u>24</u> inches wide <u>111</u> ft. of trench <u>36</u> inches wide	BED SYSTEM: total square feet	SEEPAGE PIT SYSTEM: total square feet rings or diam. x w/d
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**NOTES: Maintain all minimum distance requirements. Install according to El Paso County Health Department. ISDS Regulations.**

The Health Office shall assume no responsibility in case of failure or inadequacy of a sewage-disposal system, beyond consulting in good faith with the property owner or representative. Free access to the property shall be authorized at reasonable times for the purpose of making such inspections as are necessary to determine compliance with requirements of this law.

El Paso County Health Department  
501 North Foote Avenue  
Colorado Springs, CO 80909-4593  
(303) 578-3125

(New)

APPLICATION FOR A PERMIT TO CONSTRUCT, REMODEL, OR INSTALL A SEWAGE DISPOSAL SYSTEM

NAME OF OWNER Joseph D. Williams HOME PHONE 5745263 WORK PHONE 4731769

ADDRESS OF PROPERTY Highway 94 1/2 mile east of Yampa CO DATE OCT 5, 1989

LEGAL DESCRIPTION OF PROPERTY E 1/2, W 1/2, SE 1/4, SECTION 10 TOWNSHIP 14 EL PASO COUNTY

TAX SCHEDULE NUMBER 1400000238 SYSTEM CONTRACTOR NOIP OWNER SELF INSTALLED PHONE

OWNER'S ADDRESS IF DIFFERENT \_\_\_\_\_

TYPE OF HOUSE CONSTRUCTION MOBILE HOME SOURCE AND TYPE OF WATER SUPPLY WELL WATER

SIZE OF LOT 1/2 mile x 1/8 mi MAXIMUM POTENTIAL NUMBER OF BEDROOMS 3 BASEMENT (yes or no) NO

PERCOLATION TEST RESULTS ATTACHED (yes or no) yes

A plot plan and accompanying information are essential; it may be drawn on the back of this application or be attached. Please include by measured distance the location of wells including neighbors' wells, springs, water supply lines, cisterns, buildings, proposed structures, property lines, property dimensions, subsoil drains, lakes, ponds, water courses, streams, and dry gulches. Please show the location of the proposed septic system by directions and distances from actual and/or proposed dwellings, structures, or fixed reference objects. Give complete directions to the property from major highways. (ANSWER QUESTIONS ON BACK OF FORM).

Applicant acknowledges that the completeness of the application is conditional upon such further mandatory and additional tests and reports as may be required by the department to be made and furnished by the applicant for purposes of evaluation of the application; and issuance of the permit is subject to such terms and conditions as deemed necessary to ensure compliance with rules and regulations adopted under Article 10, Title 25, C.R.S. 1973 as amended. The undersigned hereby certifies that all statements made, information and reports submitted by the applicant are or will be represented to be true and correct to the best of my knowledge and belief and are designed to be relied on by the El Paso County Health Dept. in evaluating the same for purposes of issuing the permit applied for herein. I further understand that any falsification or misrepresentation may result in the denial of the application or revocation of any permit granted based upon said application and in legal action for perjury as provided by law.

165' of 24" trench  
111' of 36" trench

SIGNATURE Joseph D. Williams

HEALTH DEPARTMENT USE ONLY

PERMIT NUMBER 05573 RECEIPT NUMBER 2521 DATE TO LAND USE DEPARTMENT 10-4-89

ABSORPTION AREA 331 # TANK CAPACITY 1250 gal. DATE OF SITE INSPECTION 10-5-89

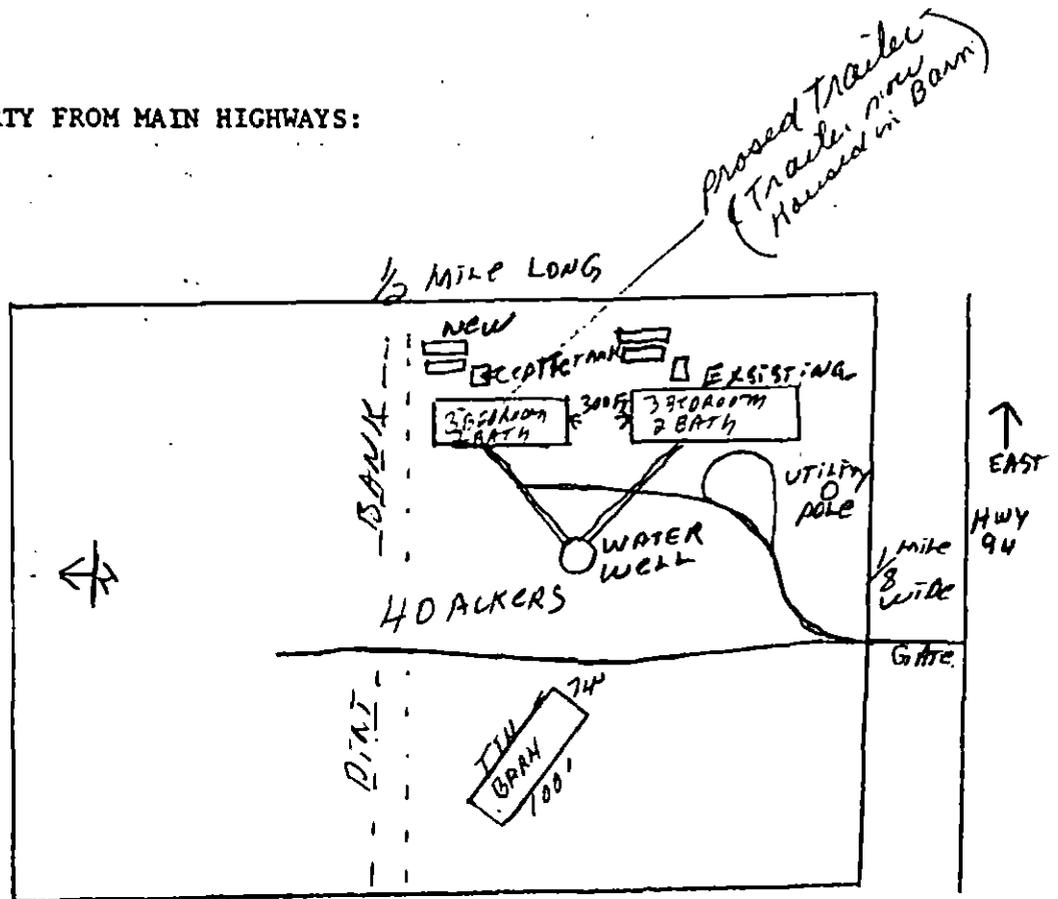
REMARKS: Maintain all minimum distance requirements. Install according to El Paso County Health Dept. ISDS Regulations.

APPLICATION IS APPROVED (  ) DENIED (  ) DATE 10-5-89 ENVIRONMENTALIST Lori Roane

ANSWER THE FOLLOWING ITEMS AND/OR INCLUDE ON PLOT PLAN.

PROPERTY LINES MARKED WITH BARB WIRE  
PROPERTY DIMENSIONS 1/2 MILE BY 1/2 MILE  
LOCATION OF PROPOSED SEPTIC SYSTEM SEE PLOT PLAN  
LOCATION OF WELL SEE PLOT PLAN  
LOCATION OF ADJACENT WELLS NONE  
BUILDINGS SEE PLOT PLAN  
PROPOSED BUILDINGS SEE PLOT PLAN  
WATER SUPPLY LINE SEE PLOT PLAN  
CISTERNS NA  
SPRINGS NA  
LAKES NA  
PONDS NA  
WATER COURSES NA  
STREAMS NA  
DRY GULCHES NA  
SUBSOIL DRAINS SEE PERK TEST.

DIRECTIONS TO PROPERTY FROM MAIN HIGHWAYS:



1/2 MILE EAST OF YODER

GREATER WEST DISTRIBUTORS

33440 Highway 94

# 1410000008

MAILING ADDRESS  
P. O. BOX 7887  
Colorado Springs, Colorado  
80933

PLANT LOCATION  
12825 Judge Orr Road  
East of Colorado Springs  
(303) 495-4947

PERCOLATION TEST

Name Joe Williams E (11-6-89) Date of test Oct. 2, 1989

Mailing address 603 Bridger, Colorado Springs, CO 80909

Telephone Number - Home: 574-5263 Work: 473-1765

Legal lot description E 1/2, W 1/2, SE 1/4, Section 10, Township 14, El Paso County

Size of lot 40 acres Water supply well

Pertinent Data:

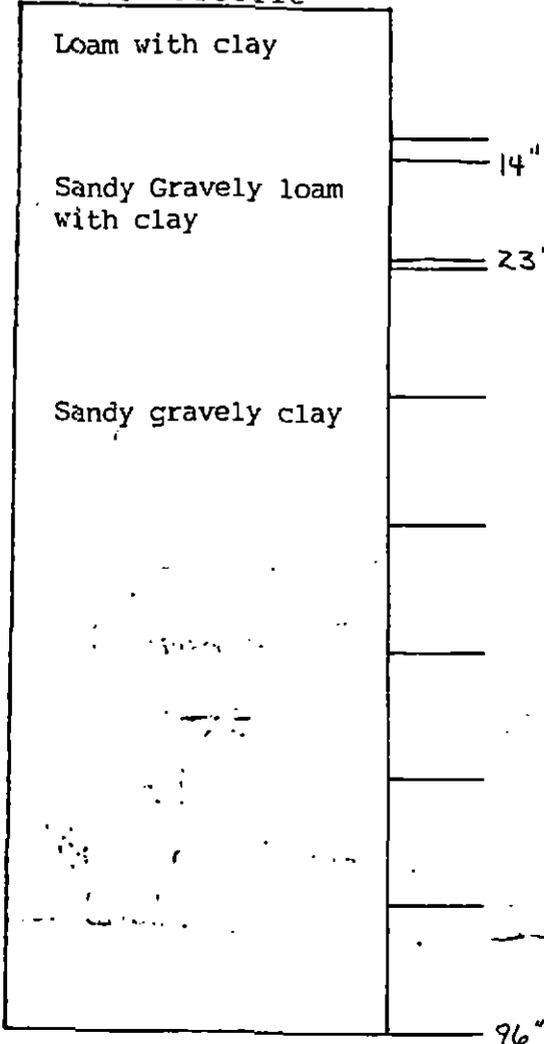
Number of holes tested 3 Average depth 30"

Depth to ground water none encountered

Depth to bedrock none encountered

AVERAGE PERCOLATION RATE 6 M.P.I.

8' Profile



Remarks:



Existing excavation  
for a Septic System

Hwy 94



*[Handwritten Signature]*

Slope - % to the -  
Site is relatively level.

Percolation Test Hole#1

Depth of hole 30"

Time	Time Interval, minutes	Measurement, inches	Drop in water level inches	Percolation rate, m.p.i.	Remarks
1700		10			
1715	15		8 7/8		
1730	15		6 3/8		
1745	15		5		
1800	15		4 3/8		
1815	15		3 6/8		
1830	15		3 6/8	4	

Percolation Test Hole#2

Depth of hole 30"

Time	Time Interval, minutes	Measurement, inches	Drop in water level inches	Percolation rate, m.p.i.	Remarks
1701		10			
1716	15		6 5/8		
1731	15		3 5/8		
1746	15		3 2/8		
1801	15		2 5/8		
1816	15		2		
1831	15		2	7.5	

Test performed by \_\_\_\_\_

LOT DIAGRAM ON REVERSE

Percolation Test Hole #3

Depth of hole 30"

Time	Time Interval, minutes	Measurement, inches	Drop in water level inches	Percolation rate, m.p.i.	Remarks
1702		10			
1717	15		9 1/8		
1732	15		7 4/8		
1747	15		6		
1802	15		5 2/8		
1817	15		4 3/8		
1832	15		4 3/8	6.4	

Percolation Test Hole

Depth of hole

Time	Time Interval, minutes	Measurement, inches	Drop in water level inches	Percolation rate, m.p.i.	Remarks

Test performed by

LOT DIAGRAM ON REVERSE