

EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT
INDIVIDUAL SEWAGE DISPOSAL SYSTEM INSPECTION FORM

Permit # 30671
Date 03-22-11

#6228004013

P

APPROVED: Yes No Environmental Health Specialist: GUSTAVO AVAREZ

Address: 10090 STEEP AVE. Owner: CHARLES DELAY

Legal Description: LOT M. SPRING CREST - Fil 2

Residence # Bedrooms 4 Commercial System Installer _____

SEPTIC TANK:

Commercial Noncommercial Construction Material PRE CAST Capacity Gallon 1250 EXISTING

DISPOSAL FIELD:

Trench: Depth (Range) _____ Width _____ Total Length _____ Sq. Ft. _____

Bed: Depth (Range) _____ Length _____ Width _____ Sq. Ft. _____

Depth of Rock _____ Under PVC _____ Type of cover on Rock _____

DRYWELLS: # of Pits _____ Rings (Pit 1) _____ Rings (Pit 2) _____ Working Depth #1 _____ #2 _____

Size (L x W) #1 _____ #2 _____ Total Sq. Ft. _____

ROCKLESS SYSTEMS:

Standard Chamber: Type Q4LP #Chambers 27 Sq. Ft./Chamber 10 Bed _____ Trench

High Profile Units: Type Chamber _____ #Chambers _____ Sq. Ft./Chamber _____ Bed _____ Trench _____

Reduction Allowed _____ % Sq. Ft. Required _____ Depth (Range) 44"-48"

Sq. Ft. Installed 270 Equivalent Sq. Ft. Installed with Reduction _____

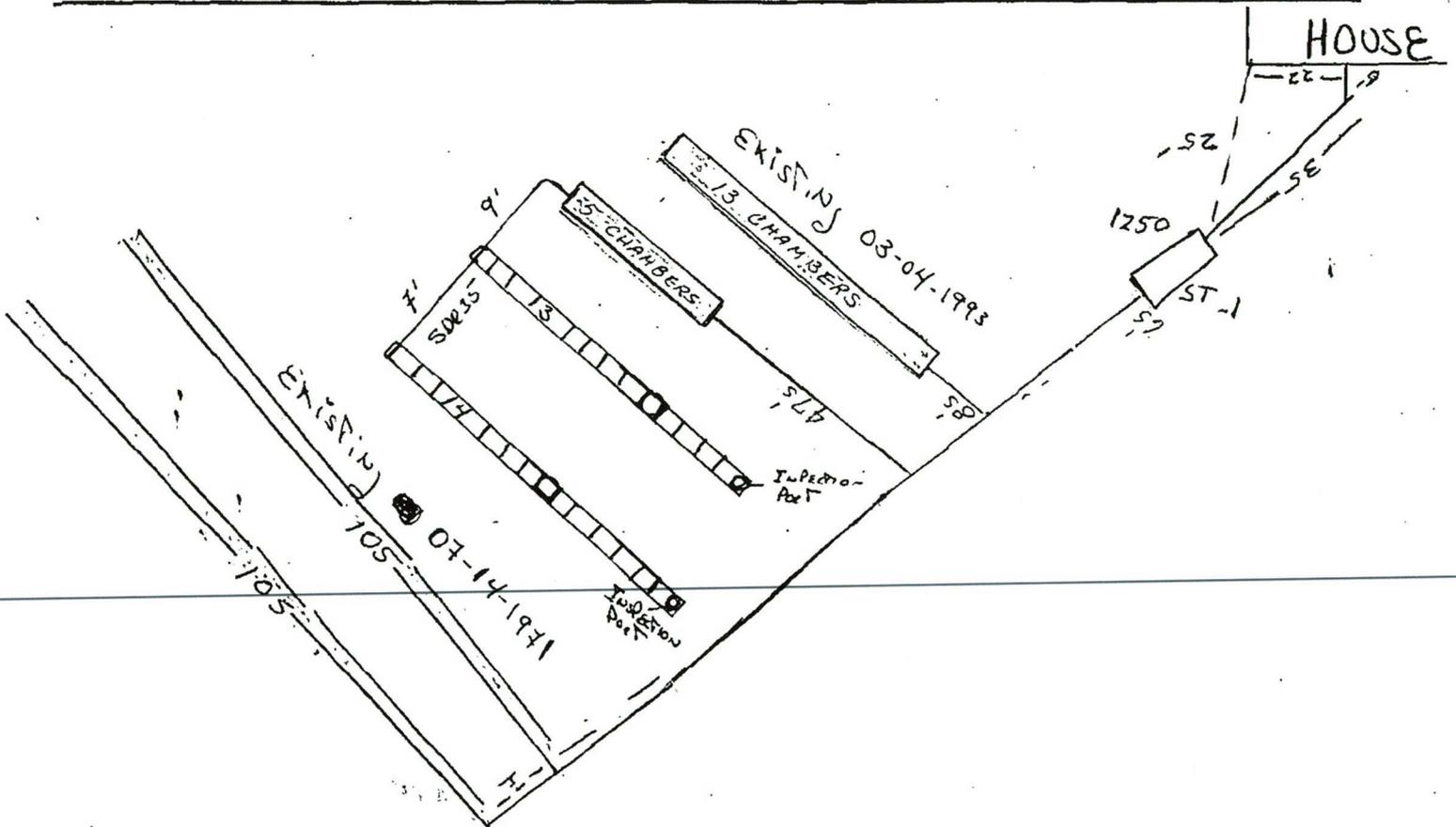
Engineer Design: Y N Engineering Firm _____

Approval letter provided? Y N

Well installed at time of septic system inspection? Y N Public Water? _____

*Approval will be revoked if in the future the well is found to be within 50 feet of the septic tank and/or 100 feet of the disposal field.

NOTES: 03-22-11 270 Sq. FT.
03-04-93 900 Sq. FT.
07-14-71 630 Sq. FT.



FROM : LD ELECTRIC

PHONE NO. : 719 5984280

Feb. 24 2011 12:53PM P1

02/23/2011 21:08
12/03/2007 MON 18:08

7194953699
FAX 7195788188 ETS FAX

DOWN TO EARTH

PAGE 01
2001/00A



EL PASO COUNTY DEPARTMENT OF HEALTH & ENVIRONMENT
301 South Union Boulevard - Colorado Springs, CO - 80910-3123 -
(719) 575-8655 - Fax: (719) 578-3188

3/1/11
JAW

Record I.D. 0030671

APPLICATION FOR AN ONSITE WASTEWATER SYSTEM PERMIT

Contractor
Down to Earth

MINOR PERMIT MINOR REPAIR PERMIT MAJOR REPAIR PERMIT

Owner Charles L. MARY E DELAY Daytime Phone 598-1567
Address of Property 10090 Otero Ave City & Zip Colorado Springs Co 80920
Legal Description Lot M. Spring Crest-Fl 2
Owner's MAILING Address 10090 Otero Ave City, State & Zip Colorado Springs Co
Lot Area 2.66 Tax Schedule # 62280-04-013
Type of Building: Frame Modular Mobile Commercial Manufactured Other
Water Supply: Well or Spring Cistern Public Inside City Limits: No Yes
MAIL PERMIT - OR - PICK UP PERMIT FAX - FAX TO AND # 495-3699

MAXIMUM POTENTIAL NUMBER OF BEDROOMS 4

Recreation Tent Attached N Y N Y N Y N Y N Y N Y N

I have supplied a plan as described on the back of this form. I acknowledge the completeness of the application is conditional upon such for the necessary and additional tests and reports as may be required by the Department. It is made and furnished by an applicant for purposes of evaluating 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 pursuant to C.R.S. 25-10-107 et. seq. I hereby certify all 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 Department of Health and Environment in evaluating the same for purposes of issuing the permit applied for herein. I further understand 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.

OWNER'S/OWNER'S AGENT SIGNATURE Mary E Delay Date 2/24/11

You will be notified by telephone when your permit is ready for pick up. Please allow a minimum of 10 days for new permits.

DEPARTMENT OF HEALTH USE ONLY
n/a n/a 3/3/11

LEACH FIELD ADDITION IS APPROVED. AS NUMBER OF BEDROOMS HAVE NOT CHANGED SINCE LAST OWS INSTALLATION, OWNER CAN ADD ANY LEACH FIELD SQUARE FOOTAGE DESIRED. UNLESS A DIVERTED VALVE IS USED, IF A DIVERTED VALVE IS USED 50% OF THE CURRENT SQUARE FOOTAGE REQUIREMENT NEEDS TO BE INSTALLED (720 SQUARE FEET) WITH NO REDUCTION. ENSURE THAT LEACH FIELD IS INSTALLED NO DEEPER THAN 48 INCHES BELOW NATIVE GROUND SURFACE. THE NEW LEACH FIELD MUST BE INSTALLED IN THE AREA OF THE OLD LEACH FIELD, BUT AT LEAST 6 FEET FROM IT. ALL SETBACKS MUST BE MAINTAINED, INCLUDING BUT NOT LIMITED TO 10 FEET FROM PROPERTY LINES, 25 FEET FROM WATER LINES AND 100 FEET FROM ANY WELL.

CURRENT FEES AS APPROVED BY EL PASO COUNTY BOARD OF HEALTH
New Permit: \$304.00 + Planning Department Surcharge of \$137.50 = \$441.50
Major repair permit: \$716.00
Minor repair permit: \$131.00
DATE TO LAND DEVELOPMENT/WASTEWATER: 23 = \$465.00
DATE TO FLOODPLAIN/INVENTORATIONS:

PLEASE COMPLETE THE BACK OF THIS FORM

Rec. 2/28/11 Mon.
4:26 PM JAW

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RW/GA