

Prevent • Promote • Protect

1675 W. Garden of the Gods Rd., Suite 2044 Colorado Springs, CO 80907 (719) 578-3199 phone (719) 575-8664 jus: www.elpasocountyhealth.org

January 13, 2015

ON-SITE WASTEWATER TREATMENT SYSTEM INSPECTION FORM	ON-SITE ID: <u>OV/0038328</u> P APN # <u>34/800/0/2</u> DATE: <u>6/28/1</u> C
APPROVED YES NO Environmental Health Specialist: Neil Mayes  Address: 255 N Page Bd, Colo Spas Co 90930 Owner: Bandy + Amy	Dayler
Residence: A #Bedrooms: 2 Commercial: System Installer: Buganagen Exce	
SEPTIC TANK: Construction Material Concrete Capacity Gallon	New 1500
SOIL TREATMENT AREA:  Trench: Depth (Range): Width: Total Length: Sq. Ft.:  Bed: Depth (Range): Width: Total Length: Sq. Ft.:  Depth of Rock: Under PVC: Type of cover on Rock:	
SEEPAGE PITS: # of Pits: Working Depth #1: #2: Size (L x W) #1 #2	Total Sq. Ft
CHAMBER SYSTEMS:  Type of Chamber: #Chambers: Sq. Ft./Chamber: Bed: Trench: Compared (10-1): Sq. Ft. Required (10-2): Sq. Ft. Required (10-3): Sq. Ft. Installed: Sq. Ft. Installed: Sq. Ft. Paproval Letter Provided: Y Sq. Ft. Required (10-3): Sq. Ft. Installed: Sq. Ft. Required (10-3): Sq. Ft. Required	q. Ft. Required for Diverter Valve:
Well installed at time of OWTS inspection: Y	
STA = So. 1 Trestment Area	
House	
To entry 3' 17.5'  To Entry  To O O O O O O O O O O O O O O O O O O O	sēkeJ
New York	

Notify Environmental Health of any change of ownership, type of business activity, business name, or billing address by calling (719) 578-3199. Failure to notify Environmental Health may result in late penalties. Permit/License denial or revocation, and business closure. PERMITS/LICENSES TO OPERATE AND ANNUAL FEE PAYMENTS ARE NOT TRANSFERABLE. Permits become void on change of ownership. New owners must apply and pay for a new Permit(s)/License(s) prior to beginning operation.

Attn: RANDY & AMY DREXLER 255 N PAGE RD COLORADO SPRINGS, CO 80930



## EL PASO COUNTY PUBLIC HEALTH ENVIRONMENTAL HEALTH DIVISION

1675 W. GARDEN OF THE GODS ROAD, SUITE 2044 COLORADO SPRINGS, CO 80907 PHONE: (719) 578-3199 FAX: (719) 578-3188

www.elpasocountyhealth.org

## **MINOR REPAIR PERMIT - OWTS**

Valid From 6/15/2016 To 9/15/2016

PERMITEE:

RANDY & AMY DREXLER 255 N PAGE RD COLORADO SPRINGS, CO 80930

Tax Schedule #: 3418001012 Permit Issue Oate: 06/15/2016

Dwelling Type: RESIDENTIAL

# of Bedrooms (if Res): 3

ER

Proposed Use (if Comm): Designed Gallons/Day:

Water Source: PRIVATE WELL

Onsite ID: ON0038328

OWNER NAME:

RANDY & AMY DREXLER

## **System Installation Requirements:**

- Permit issued for tank replacement, minimum 1000gallon septic tank to be installed.
- Any additional changes require health department notification and approval

This permit is issued in accordance with 25-10-106 Colorado Revised Statutes. The PERMIT EXPIRES upon completion/installation of the Onsite Wastewater Treatment System, or at the end of twelve (12) months from date of issue, whichever occurs first. If both a Building Permit and an Onsite Wastewater Treatment System Permit are issued for the same property and construction has not commenced prior to the expiration date of the Building Permit, the Onsite Wastewater Permit shall expire at the same time as the Building Permit. This permit is revocable if all stated requirements are not met. The Onsite Wastewater Treatment System must be installed by an El Paso County Licensed System Contractor, or the property owner.

The Health Officer shall assume no responsibility in case of failure or inadequacy of an Onsite Wastewater Treatment System, beyond consulting in good faith with the property owner or representative. Access to the property shall be authorized at transmable time for the purpose of making such inspections as are necessary to determine compliance with the requirements of this law (permit).

Inspection request line: Call (719) 575-8699 before 8:30 a.m. of the day that the inspection is requested Weekends & Holidays excluded.

Authorized By Environmental Health Specialist



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AND THE RESIDENCE OF THE PROPERTY AND ADMINISTRATION OF THE PROPERTY ADMINISTRATION OF THE PROPERTY AND ADMINISTRATION OF	
APPLICATION FOR AN ON-SITE WA	ASTEWATER TREATMENT SYSTEM PERMIT
	EPAIR PERMIT MINOR REPAIR PERMIT
	. — - •
Owner Princy & Arm, Drewer	
System Installer Frinz Buzenhagen	Daytime Phone 719.440-8490
3	City and Zip Colorado Springs 80930
Legal Description	F / .i .d. 5 Co. 90000
J	uad Colorado Springs CO 80930
Email Address	Fax #  Lot Size 9.72 acres
Tax Schedule # 3418001012  Site Located Inside City Limits Yes   [2]	No Primary Contact Owner Contractor
•	ti-Family Commercial
Water Supply:  Well	
	X FMBOriver @ Frigrex
	A BELL TARGET WAY THE TARGET THE
CURRENT FEES AS APPROVED BY 7	THE EI PASO COUNTY BOARD OF HEALTH
New Permit: \$685.00 (EPCPH Charge) + \$147.00 (EPC P	Planning Dept. Surcharge) + \$23.00 (CDPHE Surcharge) = \$855.00
Major Repair Permit: \$525.00 (EPCPH Charge) + \$23.0	
Minor Repair Permit: \$240.00 (EPCPH Charge) + \$23.0	
<ul> <li>All Paymants are due at the time or application</li> <li>This permit will expire one year from the date</li> </ul>	on submittal; by cash, check or major credit card (Visa MC)
I cartify that the information provided on this application is in compliance w	
	with pertion 8.5, cliabes 8 of the orbits systemster parties (OAP) refinistions of the FI
	with Section 6.5, Chapter 6 or the Unite Wastewater System (OWS) regulations of the El of El Paso County Public Health to enter onto this property in order to obtain information
necessary for the issuence of a permit.	of El Paso County Public Health to enter onto this property in order to obtain information
necessary for the issurance of a permit.	of El Paso County Public Health to enter onto this property in order to obtain information
Applicants Signature:	· · · · · · · · · · · · · · · · · · ·
Applicants Signature:	of El Paso County Public Health to enter onto this property in order to obtain information  Date: 6-11-/6
Applicants Signature:	of El Paso County Public Health to enter onto this property in order to obtain information  Date: 6-11-/6
Applicants Signature:	Tate:  Permit #0000883
Applicants Signature: Aratha Bargo.  Site Insp. Date: Perc.  E.H.S. Review Notes:	of El Paso County Public Health to enter onto this property in order to obtain information  Date: 6-11-/6
Applicants Signature:	Tate:  Permit #0000883
Applicants Signature: And Review Notes:  Date to: E.P.C. Development Services	Tate:  Permit #0000883
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Applicants Signature: And Perc.  Site Insp. Date: Perc.  E.H.S. Review Notes:  Date to: E.P.C. Development Services	Tate:  Permit #0000883
Applicants Signature: And Date: Perc.  E.H.S. Review Notes:  Date to: E.P.C. Development Services  Permit Requirements:	Permit # Pain Basis Information  Date: 6-11-/6  Rate: Permit # Per

Reviewed 2016 approved fee (12/30/2015)

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