

EROSION AND STORMWATER QUALITY CONTROL PERMIT (ESQCP) EL PASO COUNTY APPLICATION AND PERMIT

EPC Project Number: CDR2211

APPLICANT INFORMATION

PERMIT NUMBER

Owner Information	
Property Owner	Glenn Orton
Applicant Name (Permit Holder)	Travis Bell
Company/Agency	Castle Rock Construction of Colorado, LLC
Position of Applicant	General Superintendent
Address (physical address, not PO Box)	6374 South Racine Circle
City	Centennial
State	Colorado
Zip Code	80111
Mailing address, if different from above	same
Telephone	720-273-6227
FAX number	
Email Address	tbell@crocllc.com
Cellular Phone number	
Contractor/Operator Information	
Name (person of responsibility)	Travis Bell
Company	Castle Rock Construction of Colorado, LLC
Address (physical address, not PO Box)	6374 South Racine Circle
City	Centennial
State	Colorado
Zip Code	80111
Mailing address, if different from above	same
Telephone	720-273-6227
FAX number	
Email Address	tbell@crocllc.com
Cellular Phone number	
Erosion Control Supervisor (ECS)*	tbd
ECS Phone number*	tbd
ECS Cellular Phone number*	tbd

*Required for all applicants. May be provided at later date pending securing a contract when applicable.

PROJECT INFORMATION

Project Information	
Project Name	Orton Pit
Legal Description	PART NW4, NW4NE4 SEC 18-17-67 LY SWLY OF C/L OF RED CREEK, NWLY OF NWLY R/W LN OF HWY 115 AND NLY OF NLY LN OF TR CONV IN BK 781-41, ALSO THAT PT OF N2N2 LY NWLY OF NWLY R/W LN OF HWY 115 AND NELY FROM C/L OF RED CRK
Address (or nearest major cross streets)	17710 CO115 Colorado Springs, El Paso County, Colorado 80926
Acreage (total and disturbed)	Total: 93.75 acres Disturbed: 10.0 acres
Schedule	Start of Construction: Summer 2022 Completion of Construction: Spring 2024 Final Stabilization: Summer 2024
Project Purpose	Borrow pit for construction materials for CDOT Project # 22903 on Colorado State Highway 115.
Description of Project	This project will extend a historic borrow pit to the west to generate construction materials for a state highway project. Duration of the project is approximately 2 years. No permanent stormwater facilities will be required.
Tax Schedule Number	7700000025

FOR OFFICE USE ONLY

The following signature from the ECM Administrator signifies the approval of this ESQCP. All work shall be performed in accordance with the permit, the El Paso County Engineering Criteria Manual (ECM) Standards, City of Colorado Springs Drainage Criteria Manual, Volume 2 (DCM2) as adopted by El Paso County Addendum, approved plans, and any attached conditions. The approved plans are an enforceable part of the ESQCP. Construction activity, except for the installation of initial construction BMPs, is not permitted until issuance of a Construction Permit and Notice to Proceed.

Signature of ECM Administrator: _____

Date _____

1.1 REQUIRED SUBMISSIONS

In addition to this completed and signed application, the following items must be submitted to obtain an ESQCP:

- Permit fees;
- Stormwater Management Plan (SWMP) meeting the requirements of DCM2 and ECM either as part of the plan set or as a separate document;
- Operation and Maintenance Plan for any proposed permanent stormwater control measures; and
- Signed Private Detention Basin/Stormwater Quality Best Management Practice Maintenance Agreement and Easement, if any permanent stormwater control measures are to be constructed.

1.2 RESPONSIBILITY FOR DAMAGE

The County and its officers and employees, including but not limited to the ECM Administrator, shall not be answerable or accountable in any manner for damage to property or for injury to or death of any person, including but not limited to a permit holder, persons employed by the permit holder, or persons acting in behalf of the permit holder, from any cause. The permit holder shall be responsible for any liability imposed by law and for damage to property or injuries to or death of any person, including but not limited to the permit holder, persons employed by the permit holder, persons acting in behalf of the permit holder, arising out of work or other activity permitted and done under a permit, or arising out of the failure to perform the obligations under any permit with respect to maintenance or any other obligations, or resulting from defects or obstructions, or from any cause whatsoever during the progress of the work or other activity, or at any subsequent time work or other activity is being performed under the obligations provided by and contemplated by the permit.

The permit holder shall indemnify, save, and hold harmless the County and its officers and employees, including but not limited to the BOCC and ECM Administrator, from all claims, suits or actions of every name, kind and description brought for or on account of damage to property or injuries to or death of any person, including but not limited to the permit holder, persons employed by the permit holder, persons acting in behalf of the permit holder and the public, resulting from the performance of work or other activity under the permit, or arising out of the failure to perform obligations under any permit with respect to maintenance or any other obligations, or resulting from defects or obstructions, or from any cause whatsoever during the progress of the work or other activity, or at any subsequent time work or other activity is being performed under the obligations provided by and contemplated by the permit, except as otherwise provided by state law. The permit holder waives any and all rights to any type of expressed or implied indemnity against the County, its officers or employees. It is the intent of the parties that the permit holder will indemnify, save, and hold harmless the County, its officers and employees from any and all claims, suits or actions as set forth above regardless of the existence or degree of fault of or negligence, whether active or passive, primary or secondary, on the part of the County, the permit holder, persons employed by the permit holder, or persons acting in behalf of the permit holder

1.3 APPLICATION CERTIFICATION

We, as the Applicants or the representative of the Applicants, hereby certify that this application is correct and complete as per the requirements presented in this application, the El Paso County Engineering Criteria Manual, and Drainage Criteria Manual, Volume 2 and El Paso County Addendum.

We, as the Applicants or the representatives of the Applicants, have read and will comply with all of the requirements of the specified Stormwater Management Plan and any other documents specifying stormwater best management practices to be used on the site, including permit conditions that may be required by the ECM Administrator. We understand that the stormwater control measures are to be maintained on the site and revised as necessary to protect stormwater quality as the project progresses. We further understand that a Construction Permit must be obtained and all necessary stormwater quality control measures are to be installed in accordance with the SWMP, the El Paso County Engineering Criteria Manual, Drainage Criteria Manual, Volume 2 and El Paso County Addendum before land disturbance begins and that failure to comply will result in a Stop Work Order and may result in other penalties as allowed by law. We further understand and agree to indemnify, save, and hold harmless the County and its officers and employees, including but not limited to the BOCC and ECM Administrator, from all claims, suits or actions of every name, kind and description as outlined in Section 1.2 Responsibility for Damage

Amy Brooks
Signature of Owner or Representative

Date: 7/13/2022

Amy Brooks
Print Name of Owner or Representative

Amy Brooks
Signature of Operator or Representative

Date: 7/13/2022

Amy Brooks
Print Name of Operator or Representative

Permit Fee \$ _____
Surcharge \$ _____
Financial Surety \$ _____
Total \$ _____

Type of Surety _____

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EPC Project Number: CDR2211

APPLICANT INFORMATION

PERMIT NUMBER

Owner Information	
Property Owner	Golden Eagle Ranch, LLC
Applicant Name (Permit Holder)	Travis Bell
Company/Agency	Castle Rock Construction of Colorado, LLC
Position of Applicant	General Superintendent
Address (physical address, not PO Box)	6374 South Racine Circle
City	Centennial
State	Colorado
Zip Code	80111
Mailing address, if different from above	same
Telephone	720-273-6227
FAX number	
Email Address	tbell@crccllc.com
Cellular Phone number	
Contractor/Operator Information	
Name (person of responsibility)	Travis Bell
Company	Castle Rock Construction of Colorado, LLC
Address (physical address, not PO Box)	6374 South Racine Circle
City	Centennial
State	Colorado
Zip Code	80111
Mailing address, if different from above	same
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FAX number	
Email Address	tbell@crccllc.com
Cellular Phone number	
Erosion Control Supervisor (ECS)*	tbd
ECS Phone number*	tbd
ECS Cellular Phone number*	tbd

*Required for all applicants. May be provided at later date pending securing a contract when applicable.

PROJECT INFORMATION

Project Information	
Project Name	Rock Creek Canyon Batch Plant
Legal Description	N2SE4 EX NLY 600 FT SEC 35-15-67, S2NW4, SW4, N2N2 EX 100 X 150 FT TR TO STARRITT, EX TRACTS 5 & 6 DESC BY BK 2045-759 THAT PART OF SE4NE4 LY NLY OF OLD CANON CITY RD SEC 36-15-67, THAT PART OF W2 SEC 31-15-66 LY WLY OF HWY 115 & LY NLY OF
Address (or nearest major cross streets)	710 ROCK CREEK CANYON RD COLORADO SPRINGS CO, 80926-9800
Acreage (total and disturbed)	Total: 367.07 acres Disturbed: 10.0 acres
Schedule	Start of Construction: Summer 2022 Completion of Construction: Spring 2024 Final Stabilization: Summer 2024
Project Purpose	Temporary batch plant for CDOT Project # 22903 on Colorado State Highway 115.
Description of Project	This project is for a temporary batch plant to support a state highway project on SH 115. Duration of the project is approximately 2 years. No permanent stormwater facilities will be required.
Tax Schedule Number	7500000236

FOR OFFICE USE ONLY

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Signature of ECM Administrator: _____

Date _____

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Amy Brooks
Signature of Owner or Representative

Date: 7/13/2022

Amy Brooks
Print Name of Owner or Representative

Amy Brooks
Signature of Operator or Representative

Date: 7/13/2022

Amy Brooks
Print Name of Operator or Representative

Permit Fee \$ _____
Surcharge \$ _____
Financial Surety \$ _____

Total \$ _____

Type of Surety _____