

Water Quality Control Division Engineering Section

4300 Cherry Creek Drive South, B2 Denver, Colorado 80246-1530 CDPHE.WQEngReview@state.co.us

303-692-6298

Applicant Certification and Review Agencies Recommendation

A. Project and System Inform	Tation					
System Name	Falcon Meadow RV Campground					
Project Title	Falcon Meadow RV Campground Lift Station					
County	El Paso					
. Applicant Certification						
I certify that I am familiar with the	and have	ment of Regulation 22 - Site Location posted the site in accordance with the disenciosed.				
Applicant Legal Representative (e.g. Public Works Director)	Date	Typed Name	∖ (Signa	iture		
Owner	3/20/19	David Ozburn	Wil an			
		responsible agent and decision-making au oot the legal representative and cannot sig		a board, public works		
gency: 1) acknowledges receip ay elect to provide comments, prisistency of the proposed site dopted water quality managem	ot of the pro and 3) has location a lent plans(s	s for review and comment prior to sub oposed site location application, 2) ha is provided a recommendation to the I application with the local comprehensi is). Please note: If a governmental au ope for their decision or comment on the	is reviewed the proposed sit Division. The recommendati ve plan(s) as they relate to with thority does not recommend	e location application an ion should be based on t water quality and any		
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9.	Describe emergency back-up system in case of lift station and/or power failure. See Site Application
Ргој	ect Information
10.	a) What entity is financially responsible for the construction of the facility?
	Falcon Meadow RV Campground
11.	a) What entity has the financially responsibility for owning and long term operating expense of the proposed facility?
	Falcon Meadow RV Campground
2.	a) What entity has the responsibility for managing and operating the proposed facility after construction?
	Falcon Meadow RV Campground
\dd	 itional Factors
13.	Please identify any additional factors that might help the Water Quality Control Division make an informed decision on your site location application.

Colorado Department of Public Health and Environment Water Quality Control Division 4300 Cherry Creek Drive South, B2 Denver, Colorado 80246-1530 CDPHE.WQEngReview@state.co.us 303-692-6298

Regulation 22 – Domestic Wastewater Step 2: Application Form Section 22.7: Interceptor Sewers Not Eligible for Certification and Lift Stations

Regulation 22 Application Form

Section 22.7 of Regulation 22: Interceptor Sewers Not Eligible for Certification and Lift Stations

Project Title
System Name Falcon Meadow RV Campground
Interceptor/Lift Station Design Information
Interceptor/Lift Station Design Information
1. a) Name and address of wastewater treatment facility providing treatment (Receiving wastewater facility must fill out "Receiving Wastewater Entity Certification") Woodmen Hills Metropolitan District Wastewater Treatment Plant, 9503 Meridian Ranch Boulevard, Falcon, CO 80831 Site Information 2. Vicinity maps of facility location which includes the following: a) 1 mile radius map: habitable buildings, location of public and private potable water wells, an approximate indication of the topography, and neighboring land uses See Site Application Appendices 3. Site Location Zoning a) Present zoning of the site location? Residential Rural (5 acres) b) Zoning within a one (1) mile radius of the site? For New Lift Stations Only. Residential Rural (5 acres), PUD, Unzoned 4. Floodplain or Natural Hazards a) Is the facility located in a 100-year floodplain or other natural hazard area? If so, what precautions are being taken? No, N/A b) Has the floodplain been designated by the Colorado Water Conservation Board, Department of Natural Resources or other agency? If so, please list agency name and the designation.
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b) Has the floodplain been designated by the Colorado Water Conservation Board, Department of Natural Resources or other agency? If so, please list agency name and the designation.
agency? If so, please list agency name and the designation.
5. Land Ownership
a) Who owns the land upon which the facility will be constructed? Please attach copies of the document(s) creating authority for the applicant to construct the proposed facility at this site.
See Appendix B
Lift Station Facility Only
6. Please describe the period during which service area build-out will occur.
The campground has been to projected to be at full buildout conditions within the next 20 years. No expansio of the service area will occur beyond the full buildout conditions.
7. Please describe the flows expected in the first five years and ten years of operation.
Flows are expected to be at current average day flow of 0.0026 MGD in the first 5 years. Flows are expected to increase to a maximum average day flow of 0.0054 MGD at full build out conditions in 10 to 20 years.
8. Will the proposed lift station replace an existing lift station?
Yes No 🗵
If Yes, please describe the current flows and loadings that will be switched to the proposed lift station.



Water Quality Control Division Engineering Section

4300 Cherry Creek Drive South, B2 Denver, Colorado 80246-1530 CDPHE.WQEngReview@state.co.us 303-692-6298

of Public Health and Environment

Regulation 22 Application Form
Section 22.7 of Regulation 22: Interceptor Sewers Not Eligible for Certification and Lift Stations

A. Project	and System In	formation		- 0					To all the second	
System Name Falcon Me		Falcon Meadow RV Campgr	n Meadow RV Campground							
Project Title Falcon Meadow RV C		Falcon Meadow RV Campgr	npground Lift Station							
County		El Paso								
Date Fee Paid or payment attached				Invoice Number and Check Number						
Design Company Name		Element Engineering, LLC								
Design Engineer		Alice Arsenault		CO License Number					53350	
Address		12687 West Cedar Drive, Su	ite 300							
7.00.000		Lakewood, CO 80228								
Email		alicea@elementengineering.	alicea@elementengineering.net							
Phone		(303) 981-0453		Fax						
Applicant / Entity		Falcon Meadow RV Campground								
Representative Name/Title		David Ozburn, Owner								
Address		11150 Hwy 24								
Address		Peyton, CO 80831								
Email		davidozburn@hotmail.com								
Phone		(719) 421-0604 Fax								
B. Project	Information			=1101		. "		N. P. L.		
	Location (exi	sting or proposed site)					osed Projec	ct Capacit	y	
		11150 Hwy 24	Hyd	Maximum Month Average Hydraulic Capacity in million gallons per day (MGD)			0.0081	MGD		
(0.31)		S2SW4NW4		Peak Hour Hydraulic Capacity in million gallons per day (MGD)		0.0217 MGD				
		El Paso								
		38°55'27.30" N -104°37'11.13" W	Organic Capacity (lbs. BOD₅/day) – Treatment Facility Only			15.2 lbs	s. BOD₅/day			
Will a State or E		Federal grant or loan be sought to	116	reatment F		Only				
Funding Process		ortion of the project (e.g., State	No				If yes, plea project nu			
	Project Sche	dule and Cost Estimate								
Estimated	Bid Opening Da									
Estimated	Completion Date	e 12/31/2019	154							
Estimated	Project Cost									



Water Quality Control Division Engineering Section

4300 Cherry Creek Drive South, B2 Denver, Colorado 80246-1530 CDPHE.WQEngReview@state.co.us 303-692-6298

Wastewater Receiving Entity Certification

Section 22.7 of Regul	ation 2			vers Not Eli	gible for Certification and L	ift Stations		
Project and System Informat	ion							
System Name	Falco	n Meadow R\	/ Campo	ground				
Project Title	Falco	n Meadow R\	/ Campo	pground Lift Station				
County	El Pas							
Receiving Wastewater Entity -			ble Trea	tment Capacity	v			
Receiving wastewater treatm								
Receiving wastewater treatmen			Woodr	nen Hills Metr	opolitan District Wastewater Treat	ment Plant		
County		•	El pas					
CDPS discharge permit number	r and exp	iration date		7091 1/31/20	CDPS discharge permit capacity	1.3 MGD		
Site location approval number and date (please								
attach a copy of approval letter)			4512	4512 Site location approved capacity 1.3				
Proposed facility capacity im	pacts on	receiving was	stewater	treatment faci	lity (projected at buildout or 20-yea	rs)		
Proposed project hydraulic cap	acity: ma:	ximum month a	verage	0.0081 million	gallons per day			
Proposed project hydraulic cap	acity: pea	k hour		0.0217 million gallons per day				
Proposed project organic capac	city: maxii	mum month av	erage	15 lbs BOD₅/day				
Proposed project will increase the receiving treatment hydraulic loading capacity to (% of total capacity):				1.67%				
Proposed project will increase the receiving treatment to organic loading capacity to (% of total capacity):				0.43%				
Treatment Certification (22.7								
		atment facility	will treat	the wastewater	from the proposed wastewater facility	project		
Yes, will provide treatment				ovide treatmen		J. 0/00		
Capacity Certification (22.7 (1					9	22		
					wastes (hydraulic and organic			
loads) in excess of the above lift from the new interceptor sewer					to treat the projected discharge	44		
Trotti the new interceptor sewer	OI WOITE	ile liew or expa		OR	d above (ii iidai iii box).			
I certify that the receiving waste	water tre	atment facility			the capacity to serve the			
					tion of new or expanded facilities	l		
				arge from the n	ew interceptor sewer or from the			
new or expanded lift station, as	listed abo	ove (initial in bo	ox).					
				Estimat	ted date capacity will be available			
					h build out of the service area will occur or			
					provided to demonstrate the plan for main			
(reference, attach), or by ap					must be shown in the Water Quality Manag attach)	jement Plan		
Compliance Status Certificati			incoming o	idaico freierenee,	, attaon).			
I certify that the receiving waste			nas not h	een in violation	of any effluent limitations in its	81%		
discharge permit for the last two			100 1100 1	oon in violation	or any omeone inmediate in the	11		
			s not ope	erating under a	Notice of Violation and/or Cease			
and Desist Order from the Divis	ion result	ing from discha	arge pern	nit violations (in	itial in box).	14		
					is operating under a Notice of Violation a			
					n and the treatment entity's proposed corre			
granted with conditions, or o		iance. The DIVIS	ion will ev	aiuale illioimation	n provided and determine if approval shoul	u be granteu,		
I hereby certify that the information		ented above is	accurate	and complete.				
Receiving Treatment					2 0			
Facility Representative	Date		Name an		Signature			
Jerry Jacobson	3/1/19	Jerry Ja	copsor	1	(land landon	ŝ		

Revised December 2013

Section 22.7: Application Form

Page 6 of 6

ignature of Other Basin Wat Water Quality Control Comi Role	ter Quality A mission Wat Date	uthority, Watershed Associat tershed Protection Control Ard Typed Name / Agency	Recommend Approval? Yes
Water Quality Control Com Role	mission Wat	tershed Protection Control Are	tion, Watershed Authority, etc., if facility is located in ea. Signature
Water Quality Control Comi Role	mission Wat	tershed Protection Control Are	ea. Signature
	Date	Typed Name / Agency	
eview Agency Comments:			Recommend Approval? Yes
eview Agency Comments:			
eview Agency Comments:			