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

Permit Number: ON0002857

Date: June 11, 2001

APPROVED: YES

ENVIRONMENTALIST:

Address:

1955 South Calhan Highway

Legal Description:

lengthy, see file

Owner:

Jeffry D. and Louise B. Adams

System Contractor:

Fred Bugenhagen

Residential system for three bedrooms.

For use with clothes washer and garbage disposal.

#### **SEPTIC TANK**

Commercial tank constructed of precast concrete.

Capacity: 1250 gallons.

### **DISPOSAL FIELD**

Chamber system utilizing Biodiffuser brand leaching chambers in a trench configuration.

22 chambers X 15.5 sq. ft. per chamber = 341 total sq. ft. installed. reduction allowed: 40%: installation is equivalent to 568 sq. ft.; sq.ft. required: 554; depth of installation: about 37 inches.

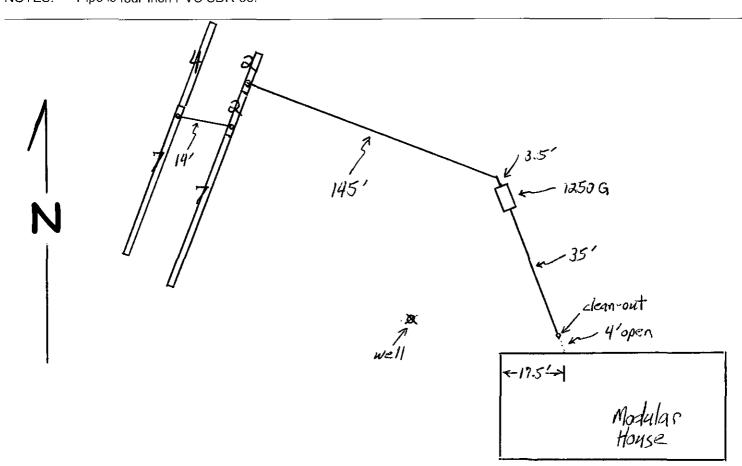
#### SYSTEM DESIGN

By Engineer: No.

#### **WATER SUPPLY**

Private Water Supply. Installed well is  $\geq 50$  ft. from tank, and  $\geq 100$  ft. from leach field. Approval shall be revoked if, in the future, minimum horizontal distances are not maintained.

NOTES: Pipe is four-inch PVC SDR-35.



## EL PASO COUNTY

## DEPARTMENT OF HEALTH AND ENVIRONMENT 301 S Union Blvd, Colorado Springs, Colorado 719-578-3126

# INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT

WATER SOURCE:

WELL

PERMIT NUMBER: ON0002857

OWNER NAME: JEFFREY ADAMS

ADDRESS: 1955 S CALHAN HWY

DATE PERMITTED:

3/13/01

CITY, STATE, ZIP: YODER

CO 80864

PHONE NUMBER: 7196321754

#### INSTALLED BY:

This permit is issued in accordance with 25-10-107 Colorado Revised Statues. PERMIT EXPIRES upon completion-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). If both a building and an ISDS permit are issued for the same property and construction has not commenced prior to the expiration date of the building permit, the ISDS permit shall expire at the same time as the building permit. This permit is revokable if all stated requirements are not met. Sewage disposal system to be installed by an El Paso County Licensed System Contractor or the property owner.

THIS PERMIT DOES NOT DENOTE APPROVAL OF ZONING AND ACREAGE REQUIREMENTS.

DIRECTOR, EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT

PERMIT EXPIRATION DATE:

Expires twelve months from date of issue

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

MINIMUM SEPTIC TANK SIZE

1,250 GALLONS

MINIMUM ABSORPTION AREA REQUIRED

554 SO FT



**ENUMERATION** 







#### COMMENTS:

INSTALL SEPTIC SYSTEM IN LOCATION AND AT DEPTH (36 INCHES) OF PERCOLATION TEST. ENSURE THAT SEPTIC SYSTEM IS AT LEAST 100 FEET AWAY FROM THE WATER WELL.

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 time for the purpose of making such inspections as are necessary to determine compliance with requirements of this law.

Record I.D. 2857

# EL PASO COUNTY ENVIRONMENTAL HEALTH SERVICES

301 South Union Boulevard • Colorado Springs, CO • 80910-3123 • (719) 578-3126

# APPLICATION FOR AN ON-SITE TREATMENT SYSTEM:

☑NEW ☐REPAIR TANK ☐REPAIR/ADD LEACH FIELD ☐P.E. DESIGN			
Owner Jeffry D+ Louise B. Adams  Daytime Phone 119-632-1754 (Lou Address of Property 1955 S. Calman Huy  City & Zip Yoder 80844  Legal Description 1804thy - See attached S252 NWY Sec 29-14-61			
Address of Property 1955 S. Calpan Huy City & Zip Voder 80844			
Legal Description 18 northy - see attached S2SZNWY Sec 29-14-61			
Owner's MAILING Address 33080 Bellemant Kd. City, State & Zip Voder CO 80864			
Lot Size 40acres Tax Schedule # 1400-00-354 Septic Contractor FRONT Range Housing Fred			
Type of Building: Frame Modular Mobile Commercial Manufactured Other			
Water Supply: Well or Spring Cistern Public Inside City Limits: No Tyes-City 5725			
□MAIL PERMIT OR ☑PICK UP PERMIT □THERE IS AN ADDITIONAL RESIDENCE ON THIS PROPERTY			
MAXIMUM POTENTIAL BEDROOMS			
Percolation Test Attached N Garbage Disposal N Basement Y N Clothes Washer N			
I have supplied a plot plan as described on the back of this form. I acknowledge 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 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 SIGNATURE  Date  Date			
DEPARTMENT OF HEALTH USE ONLY			
55 Y/2503/7/01Minimum Absorption AreaMinimum Tank CapacityDate of Site Inspection			
Minimum Absorption Area Minimum Tank Capacity Date of Site Inspection  REMARKS Install septic system in location and at depth (36 inches) of perc test. Ensure that septic system is at least 100 ft away from the water well.			
·			
EHS INSPECTOR Selvel Police DATE 3/8/01 APPROVED DENIED			
FEE AS OF 8/1/00: NEW \$315 - REPAIR TO LEACH FIELD \$150 - REPAIR TO TANK OR LINE \$75 -  DATE TO PLANNING / WASTEWATER			

1)	We require or (PE) star	":RCOLATION (PERC) TEST with an original professional engineer's as a plot of the percolation test holes.	
2)	PROPE CL PASO COUNTY HEALTH ENU HETH/ATR QUALITY	OT NUMBER MUST BE POSTED AND CLEARLY VISIBLE FROM BE CLEARLY MARKED.	
3)	A <b>PLO</b> ? (719) 575-8636 1) a noi	not to scale) on an 8 ½ x 11 sheet of paper. The plot plan must include:  ll buildings (proposed or existing)  roposed septic system site  existing and name of	
4)	3) prop Initial a TATE 63.01.'01 THU	lternate septic system site adjoining street) ures that apply to your property and INCLUDE them on your PLOT	
,	PLAN. 100 400 100 100 100 100 100 100 100 100	_ Adjacent property well(s) Subsoil drain	
5)	Initial at PLOT 1 175. 60 PLOT 1 175	e within 100 feet of your proposed septic system and <b>INCLUDE</b> on your	
	- : [MF 121]	Lake(s)	
		Stream(s)	
		Natural drainage course(s)	
<u>()</u>	CIVE COMPLETE DIDECTION	NC TO THE DRODEDTY EDOM A MAIN HIGHWAY	
East on Huy 94 go thru Ellicott at about mile marker 24 go right on Calhan Hwy property approx			
$\gamma$	narker 24 ap rio	ght on Calhan Hwy. property approx	
, C	2=1 miles. South	on the left hand side. Large	
		1955 S. Calhan Hwy.	
(	INTRE Way gutes.		