

EL PASO COUNTY  
DEPARTMENT OF HEALTH AND ENVIRONMENT  
301 S Union Blvd, Colorado Springs, Colorado 719-575-8636  
INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT

7-18-07

EP

Tex # 1419001013

010034231

OWNER NAME: TANNER RANCH LLC PERMIT NUMBER: 678  
ADDRESS: 238 N DINNER BELL DR  
CITY, STATE, ZIP: YODER, CO 80864 DATE PERMITTED: 07/21/2008  
INSTALLED BY: PHONE NUMBER: 719-575-8635

This permit is issued in accordance with 25-10-207 Colorado Revised Statutes. 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 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

MIKE MCCARTHY 578-3121 578-3131  
ENVIRONMENTALIST/PHONE NUMBER\*

WATER SOURCE: Well or Spring

MINIMUM SEPTIC TANK SIZE: 1500 GALLONS MINIMUM ABSORPTION AREA REQUIRED 1382 SQ FT

PLANNING DEPARTMENT ☐ ENUMERATION ☐ FLOOD PLAN ☐ WASTEWATER ☐

COMMENTS:

\* FOR INSPECTIONS CALL 575-8699 BEFORE 8:30 A.M. OF THE DAY TO BE INSPECTED.  
(WEEKENDS & HOLIDAYS EXCLUDED)  
LEAVE THE ENTIRE SEWAGE DISPOSAL SYSTEM UNCOVERED FOR FINAL INSPECTION

INSTALL SYSTEM IN THE AREA AND DEPTH (36 INCHES) OF THE PERCOLATION TEST. MUST CONFORM TO JULY 7, 2007 OWS REGULATIONS. PENDING OUTSIDE APPROVALS. GPS N 38 DEGREES 50.05 MINUTES W 104 DEGREES 16.499 MINUTES.

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.

FOR ADMINISTRATOR USE ONLY

Permit Ready: \_\_\_\_\_ Called \_\_\_\_\_ Mailed \_\_\_\_\_

Final Inspection Requested:

BY: \_\_\_\_\_

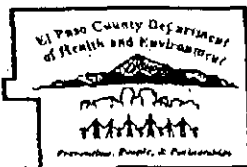
Date Called In: \_\_\_\_\_

Phone # \_\_\_\_\_

Septic Site will be ready: \_\_\_\_\_

01-05-10 Spoke with Steve, will be in to renew the permit.  
JC

7/16



## EL PASO COUNTY DEPARTMENT OF HEALTH &amp; ENVIRONMENT

301 South Union Boulevard • Colorado Springs, CO • 80910-3123 •  
(719) 575-8635 • Fax: (719) 578-3188

Record I.D. 678

\*ALL PAYMENTS ARE DUE AT TIME OF SUBMITTAL IN CASH, CHECK, or MAJOR CREDIT CARD

## APPLICATION FOR AN ONSITE WASTEWATER SYSTEM PERMIT

☒ NEW PERMIT☐ MINOR REPAIR PERMIT☐ MAJOR REPAIR PERMITOwner Tanner Ranch LLCContact Steve JacksonDaytime Phone 337-2851Address of Property 238 No Dinner Bell Drive City & Zip Yorker 80864Legal Description Lot 32 Tanner Ranch Fil No 1Owner's MAILING Address 9 Ridge Road City, State & Zip Color Spgs, Colo. 80904Lot Size 2.87 Acres Tax Schedule # 14180 01 013Type of Building: ☒ Frame ☐ Modular ☐ Mobile ☐ Commercial ☐ Manufactured ☐ OtherWater Supply: ☒ Well or Spring ☐ Cistern ☐ Public Inside City Limits: ☒ No ☐ Yes-City☐ MAIL PERMIT - OR ☒ PICK UP PERMIT ☒ FAX - FAX TO AND # 520-56071MAXIMUM POTENTIAL NUMBER OF BEDROOMS 4Percolation Test Attached ☒ Y ☐ N Basemen ☒ Y ☐ N Garbage Dispos ☒ Y ☐ N Clothes Washer ☒ Y ☐ 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/OWNER'S AGENT SIGNATURE [Signature]Date 7-18-07

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

## DEPARTMENT OF HEALTH USE ONLY

1,500 gal.  
Minimum Tank Capacity1,387  
Minimum Absorption Area7/20/07  
Date of Site Inspection

## REMARKS

Install system in the area and depth (36")  
of the percolation test.Must conform to 7/7/07 OHS RegulationsN 38° 50.055 minW 104° 16.499 minEHS INSPECTOR [Signature]DATE 7/20/07 APPROVED ☒DENIED ☐Pending outside approvals

## CURRENT FEES AS APPROVED BY EL PASO COUNTY BOARD OF HEALTH

New Permit: \$304.50 + Planning Department Surcharge of \$137.50 = \$442.00

Major repair permit: \$316.00

Minor repair permit: \$131.00

DATE TO LAND DEVELOPMENT/WASTEWATER: 7-19-2007DATE TO FLOODPLAIN/ENUMERATIONS: 7-19-2007

\$23.00

\$465.00 - Total


PLEASE COMPLETE THE BACK OF THIS FORM

- 1) We require an original of your **PERCOLATION (PERC) TEST** with an original licensed engineer's (PE) stamp and signature as well as a plot of the percolation test hole locations with measurements from a fixed reference point. (A faxed copy directly from the engineering firm to this office is acceptable.)
- 2) **PROPERTY ADDRESS OR LOT NUMBER MUST BE POSTED AND CLEARLY** **SEE FROM ROAD.**  
**PERC HOLES MUST BE CLEARLY MARKED OR AN ADDITIONAL CHARGE FOR A RETURN TRIP**  
**TO THE SITE MAY BE ASSESSED.**

- 3) A **PLOT PLAN** must be drawn (not to scale) on an 8 1/2 x 11 inch sheet of paper. The plot plan must include:

- |                               |                                 |                                 |
|-------------------------------|---------------------------------|---------------------------------|
| 1) a north bearing            | 5) proposed septic system site  | 8) Distance of percolation test |
| 2) property lines             | 6) alternate septic system site | to two property lines.          |
| 3) property dimensions        | 7) driveway (proposed or        |                                 |
| 4) all buildings (proposed or | existing and name of adjoining  |                                 |
| existing)                     | street)                         |                                 |

- 4) Initial any of the following features that apply to your property and **INCLUDE** them on your **PLOT PLAN**.

 Well(s)  
Cistern

\_\_\_\_ Adjacent property well(s)  
\_\_\_\_ Water line

\_\_\_\_ Subsoil drain

- 5) Initial any of the following that are within 100 feet of your proposed septic system and **INCLUDE** on your **PLOT PLAN**.

\_\_\_\_ Spring(s)

\_\_\_\_ Lake(s)

\_\_\_\_ Pond(s)

\_\_\_\_ Stream(s)

\_\_\_\_ Dry Gulch(es)

\_\_\_\_ Natural drainage course(s)

- 6) **GIVE COMPLETE DIRECTIONS TO THE PROPERTY FROM A MAIN HIGHWAY**

