

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

Permit # 2587
Date 2-23-01

APPROVED: YES X NO #1500000245 ENVIRONMENTALIST Robinson

Address 8160^S Edison Rd. Owner Childres

Legal Description SL 2 OF N 1/2 OF SE 1/4 OF Sec. 25 T2NSHP 15S Range 6W
Residence X, # of bedrooms 4; Commercial ; System Installer Owner

SEPTIC TANK:

Commercial X; Noncommercial , L , W , WD
Construction Material precast concrete, capacity 1500 gallons.

DISPOSAL FIELD:

Rock Systems:

Trench: depth , width , total length , sq. feet

Bed: depth , length , width , sq. feet

Rock type , depth , under PVC , over PVC

Seepage Pits: # of pits , total # of rings , working depth(s)
size of pit(s) L X W , lining material , total sq. feet

Rockless Systems:

Chamber: Type Bio-Diffuser, number of chambers 24, bed , trench X
sq. ft./section 15.5, reduction allowed 40%, sq. ft. required 611
total sq. ft. installed 620, depth of installation 36"-53"

Engineer Design Y or (N), Designing Engineer

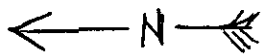
Approval letter provided? Y or N

Well 50 feet from tank (Y) or N 100 feet from leach field (Y) or N

Well installed at time of septic system inspection (Y) or N Public Water

*Approval will be revoked if in the future the well is found to be within 50 feet of the septic tank and/or 100 feet of the disposal field.

NOTES: SDR 35



↑
Well
550 ft.
east



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: ON0002587

OWNER NAME: BRIAN CHILDRES

DATE PERMITTED: 11/15/00

ADDRESS: 8160 EDISON RD

CITY, STATE, ZIP: YODER

CO 80864

PHONE NUMBER: 7195367937

INSTALLED BY: OWNER

This permit is issued in accordance with 25-10-107 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 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.

Jisha Lowe

DIRECTOR, EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT

PERMIT EXPIRATION DATE :

Expires twelve months from date of issue

Juan Alvarez 578-3287
ENVIRONMENTALIST / PHONE NUMBER

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

MINIMUM SEPTIC TANK SIZE: 1,500 GALLONS

MINIMUM ABSORPTION AREA REQUIRED

611 SQ FT

PLANNING DEPARTMENT



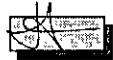
ENUMERATION



FLOOD PLAIN



WASTEWATER



COMMENTS:

INSTALL LEACH FIELD IN LOCATION AND AT DEPTH OF PERCOLATION TEST.

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.

mailed 11/30/00

EL PASO COUNTY ENVIRONMENTAL HEALTH SERVICES

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

APPLICATION FOR A ☒ NEW ☐ REMODEL ☐ REPAIR OR ☐ ADDITION
TO AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM ☐ P.E. DESIGN

Owner BRIAN CHILDRES Daytime Phone 719-536-7937
Address of Property 8160 EDISON RD. City & Zip YODER 80864
Legal Description S 1/2 OF N 1/2 OF SE 1/4 OF SEC. 25 TOWNSHIP 15 S. RANGE 61 W.
Tax Schedule # 1500000245 Lot Size 40 AC Septic Contractor OWNER
Inside City Limits ☒ No ☐ Yes-City _____ Water Supply ☒ Well or Spring ☐ Cistern ☐ Public
Type of Building ☐ Frame ☐ Modular ☒ Mobile ☐ Commercial ☐ Manufactured ☐ Other _____
Owner's MAILING Address P.O. Box 52 City, State & Zip YODER 80864
☒ MAIL PERMIT OR ☐ PICK UP PERMIT ☐ THERE IS AN ADDITIONAL RESIDENCE ON THIS PROPERTY

MAXIMUM POTENTIAL BEDROOMS <u>4</u>			
Percolation Test Attached <input checked="" type="checkbox"/> <u>Y</u>	Garbage Disposal <input checked="" type="checkbox"/> <u>Y</u>	Basement <input type="checkbox"/> <u>N</u>	Clothes Washer <input checked="" type="checkbox"/> <u>Y</u>

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 Brian Childres Date _____

DEPARTMENT OF HEALTH USE ONLY

611 Minimum Absorption Area 1,500 Minimum Tank Capacity 11/8/00 Date of Site Inspection

REMARKS Install leach field in location and at depth of perc test

Approved pending review of comments from County planning/flood plain EBD
EHS INSPECTOR Jan [Signature] DATE 11/14/00 ☒ APPROVED ☐ DENIED

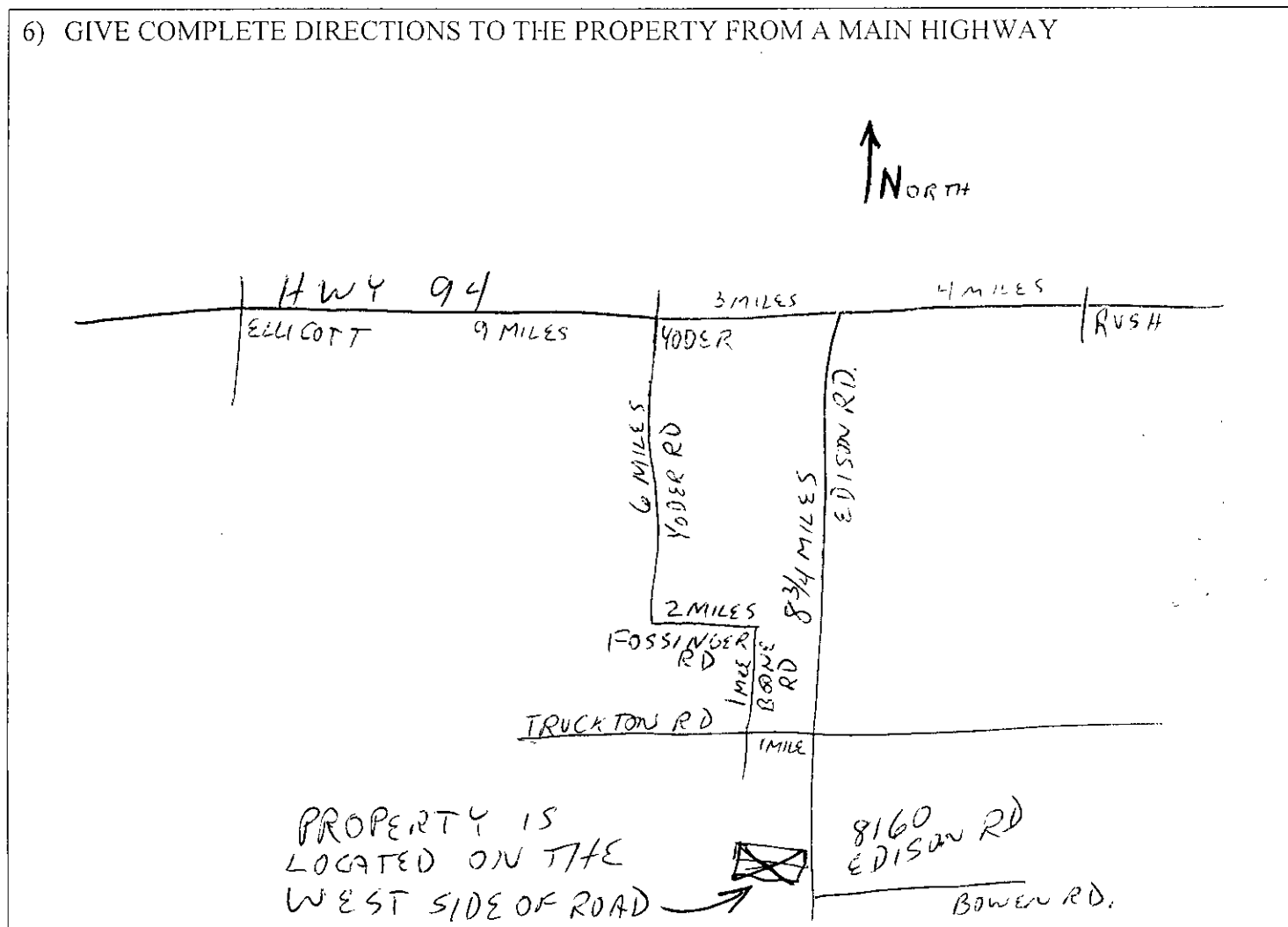
FEE AS OF 8/1/00: NEW \$315 -
REPAIR TO LEACH FIELD \$150 -
REPAIR TO TANK OR LINE \$75 -
DATE TO PLANNING / WASTEWATER 11/3/00

- 1) We require a copy of your percolation (**PERC**) **TEST** with an original professional engineer's (PE) stamp and signature.
- 2) A **PLOT PLAN** must be drawn (not to scale) on a 8 1/2 x 11 sheet of paper. The plot plan must include
 - 1) a north bearing
 - 2) property lines
 - 3) property dimensions
 - 4) all buildings (proposed or existing)
 - 5) proposed septic system site
 - 6) designated alternate septic system site
 - 7) driveway (proposed or existing and name of adjoining street)
- 3) Initial any of the following features that apply to your property and include them on your plot plan.

<u>BC</u> Well(s)	_____ Adjacent property well(s)	_____ Subsoil drain
_____ Cistern	<u>BC</u> Water line	
- 4) 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)
- 5) **PROPERTY ADDRESS OR LOT NUMBER MUST BE POSTED AND CLEARLY VISIBLE FROM ROAD. PERC HOLES MUST BE CLEARLY MARKED.**

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



PAUL SOPKO III
36995 SOPKO LANE
YODER, CO 80864
719-478-3456

8160 S Edison Rd
#1500000245

E

Soil Percolation Data Sheet

02-23-2001

Date: Oct. 9, 2000

Client: Brian Childres

Address: 8160 Edison Rd

City: Yoder

State: CO

Zip Code: 80864

Ph:

County: EL PASO

Location of Test: SAME

No. Acres: 40

Water Supply: WELL

Prepared: 10/9/00

Test Run: 10/10/00

Percolation Rate Measurement Results

Test Hole	Hole Depth	DEPTH TO WATER								Final Drop	Min. per inch
		1:00 Time	1:15 Time	1:20 Time	1:35 Time	1:40 Time	1:55 Time	2:00 Time	2:15 Time		
		Start	Stop	Start	Stop	Start	Stop	Start	Stop		
#1	36"	13.75	15.75	14.0	16.0	14.25	16.125	14.5	16.375	1.875	8.0
#2	36"	14.5	16.75	14.25	16.5	14.0	16.125	15.0	17.125	2.125	7.06
#3	36"	15.125	17.25	15.0	17.125	14.75	16.75	15.25	17.25	2.0	7.5
Average Drop:										2.0	7.52

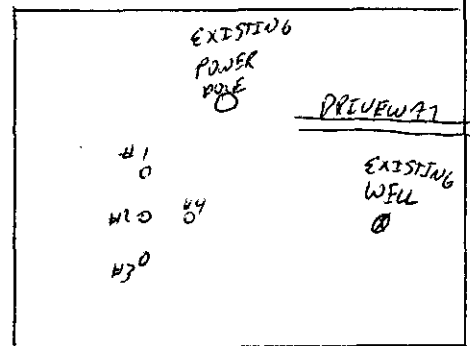
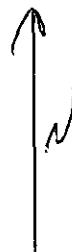
Profile

#4	Depth	Soil Description	Ground Water:
	0-12"	Topsoil	None
	12-96"	Sandy Loam	Bedrock: None
			Grade of Site: 1% W
			Hwy 94

Remarks:

- LOAMY SAND
- USE PERCOLATION RATE OF 8 MIN/IN FOR DESIGN OF SYSTEM

PERC HOLES ARE APPROX. 20' APART



EDISON RD