

Prevent • Promote • Protect

1675 W. Garden of the Gods Rd., Suite 2044 Colorado Springs, CO 80907 (719) 578-3199 phone (719) 575-8664 fax

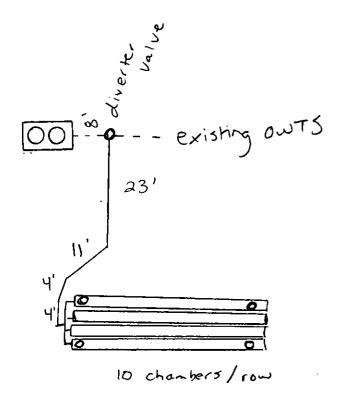
www.elpasocountyhealth.org

ON-SITE W	VASTEWATER TREATMENT SYSTEM INSPECTION FORM	<del></del>	0024629	P
			<u>18008004</u> <u>13/2015</u>	1
APPROVED Y	/ES NO Environmental Health Specialist: Celeste			
_	#Bedrooms: 3 Commercial: System Installer: Kunau Drilling			
SEPTIC TANK:	Construction Material Concrete Capacity Gallon 1250 (Existing	<u>e)</u>		
SOIL TREATME	ENT AREA:			
Trench:	Depth (Range): Width: Total Length: Sq. Ft.:			
Bed:	Depth (Range): Width: Total Length: Sq. Ft.:	_		
	Depth of Rock: Under PVC: Type of cover on Rock:	<u> </u>		
SEEPAGE PITS:	i: # of Pits: Working Depth #1: #2: Size (L x W) #1	#2 Total Sq. Ft	·	
CHAMBER SYS	STEMS:			
Type of Chamb	ber: Infiltrator Quick 4 standard #Chambers: 40 Sq. Ft./Chamber: 12	Bed: 🛛 Trench: 🔲 Depth	(Range): <u>12-18'</u>	_
Sq. Ft. Require	ed (10-1): <u>750</u>	Sq. Ft. Required for Div	erter Valve: <u>450</u>	
Sq. Ft. Installed	ed: <u>480</u>			
Engineer Desig	ign: Y 🔲 N 🗵 Engineering Firm: Approval Letter Provided:	Y 🗌 N 🗌		
Well installed	at time of OWTS inspection: Y 🔲 N 🗍 Public Water: Y 🔲 N	$\boxtimes$		
*Approval will	l be revoked if in the future the well is found to be within 50 feet of the septic to	ank and/or 100 feet of the soi	l treatment area	
Notes:		<u> </u>		

See Attached As-Built

mell I

House



1"=20'

N

Notify Environmental Health of any change of ownership, type of business activity, business name, or billing address by calling (719) 578-3199. Failure to notify Environmental Health may result in late penalties, Permit/License denial or revocation, and business closure. PERMITS/LICENSES TO OPERATE AND ANNUAL FEE PAYMENTS ARE NOT TRANSFERABLE. Permits become void on change of ownership. New owners must apply and pay for a new Permit(s)/License(s) prior to beginning operation.

Attn: JOHNSON SHANNON L C 17980 CONNESTOGA CT PEYTON, CO 80831-9457



## EL PASO COUNTY PUBLIC HEALTH **ENVIRONMENTAL HEALTH DIVISION**

1675 W. GARDEN OF THE GODS ROAD, SUITE 2044 **COLORADO SPRINGS, CO 80907** PHONE: (719) 578-3199 FAX: (719) 578-3188 www.elpasocountyhealth.org

## **MAJOR REPAIR PERMIT - OWTS**

Valid From 7/2/2015 To 7/2/2016

PERMITEE:

OWNER NAME:

JOHNSON SHANNON L C 17980 CONNESTOGA CT PEYTON, CO 80831-9457

Onsite ID: ON0024629 Tax Schedule #: 3118008004

Dwelling Type: RESIDENTIAL

Permit Issue Date: 07/02/2015

JOHNSON SHANNON L C

# of Bedrooms (if Res): 3

Proposed Use (if Comm):

Designed Gallons/Day:

Water Source: PRIVATE WELL

## **System Installation Requirements:**

- Install according to design document dated 7/2/15. If changes are made to the design document, health department must be contacted.

The OWTS must be installed per the stamped and approved Design Document dated 07/02/2015.

This permit is issued in accordance with 25-10-106 Colorado Revised Statutes. The PERMIT EXPIRES upon completion/installation of the Onsite Wastewater Treatment System, or at the end of twelve (12) months from date of issue, whichever occurs first. If both a Building Permit and an Onsite Wastewater Treatment System Permit are issued for the same property and construction has not commenced prior to the expiration date of the Building Permit, the Onsite Wastewater Permit shall expire at the same time as the Building Permit. This permit is revocable if all stated requirements are not met. The Onsite Wastewater Treatment System must be installed by an El Paso County Licensed System Contractor, or the property owner.

The Health Officer shall assume no responsibility in case of failure or inadequacy of an Onsite Wastewater Treatment System, beyond consulting in good faith with the property owner or representative. Access to the property shall be authorized at reasonable time for the purpose of making such inspections as are necessary to determine compliance with the requirements of this law (nermit).

Inspection request line: Call (719) 575-8699 before 8:30 a.m. of the day that the inspection is requested Weekends & Holidays excluded.

Authorized By: Environmental Health Specialist



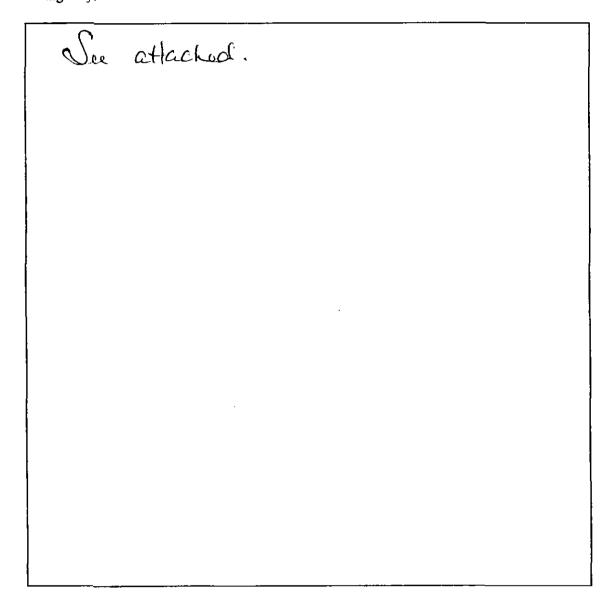
Prevent • Promote • Protect

1675 W. Garden of the Gods Rd., Suite 2044 Colorado Springs, CO 80907 (719) 57B-3199 phone (719) 578-3188 fax www.elpasocountyhealth.org

APPLICATION FOR AN ON-SITE WASTEWATER TREATMENT SYSTEM PERMIT				
☐ NEW PERMIT ☐ MAJOR REPAIR PERMIT ☐ MINOR REPAIR PERMIT				
Owner Christing + Sharmon Johnson Paytime Phone 352-232-2396				
System Installer Kurgy Delling U.C. Daytime Phone 719-683-3720				
Property Address 17980 Connestond Court City and Zip Peuton, CO 80831				
Legal Description Lot 177 fc 3 Perton Pines				
Owners Mailing Address 17980 (Bornestoga Court Penton, CO 80831				
Email Address Scskyler@ad.com Fax # 719-683-3717				
Tax Schedule # 3118008004 Lot Size 5.01				
Site Located Inside City Limits Yes 🖾 No Primary Contact 🔲 Owner 💹 Contractor				
Proposed Use: ES Single Family Multi-Family Commercial				
Water Supply:   Well Cistern Municipal Number of Bedrooms 3				
Pickop: Email: Scskyler@aol.com				
Kungudritting@apt.com				
CURRENT FEES AS APPROVED BY THE EI PASO COUNTY BOARD OF HEALTH				
New Permit: \$650.00 (EPCPH Charge) + \$147.00 (EPC Planning Dept. Surcharge) + \$23.00 (CDPHE Surcharge) = \$820.00				
<u>Major Repair Permit:</u> \$515.00 (EPCPH Charge) + \$23.00 (CDPHE Surcharge) = \$538.00 <u>Minor Repair Permit:</u> \$230.00 (EPCPH Charge) + \$23.00 (CDPHE Surcharge) = \$253.00				
All Payments are due at the time of application submittal; by cash, check or major credit card (Visa / MC)				
This permit will expire one year from the date of issuance.				
I certify that the information provided on this application is in compliance with Section 8.3, Chapter 8 of the Onsite Wastewater System (OWS) Regulations of the El				
Paso County Board of Health. I also authorize the assigned representative of El Paso County Public Health to enter onto this property in order to obtain information necessary for the issuance of a permit.				
Applicants Signature: Class Cuttohickeng Villeng for Date: 6/28/15				
Christing + Shannon Achnson				
Site Insp. Date: 7/2/15 Perc. Rate: 16 Permit #ONCO24629				
E.H.S. Review Notes:				
Date to: E.P.C. Development Services NA Flood Plain and Enumerations NA				
Permit Requirements:				
I				
Min. Sentic Tank Canacity  Min. Absorption Area				
Min. Septic Tank Capacity  Min. Absorption Area  7/2/15  Page 1/2/15  Min. Absorption Area				

Reviewed 2015 approved fee (12/29/2014)

- A report is required per Section 8.5 A-E, "Site and Soil Evaluation", or Section 8.5 A-F if the OWTS requires design by a Colorado Registered Professional Engineer. If your permit application submittal is incomplete, the application will not be accepted.
- 2) Property address or lot number must be posted and clearly visible from the road. The percolation test holes and/ or soil profile test pit must be clearly marked or an additional charge for a return trip to the site may be assessed.
- 3) The proposed soil treatment area must be protected from compaction and disturbance by staking, fencing, posting or other effective method.
- 4) In the Box below, please provide complete and accurate directions to the property from a main highway.



3118008004 7/15/15 North Ge of GOONS 4 Rous 10 Guick 201 WELL El Paso County Public Health Environmental Health Services 1675 W. Garden of the Gods Rd., Suite 2044 Colorado Springs, CO 80907 (6 7/2/15

Kunau Drilling LLC 23945 Lucky Lane Calhan Co 80808 719-883-3720

$\alpha$
Hame Christina & Shannon Johnson
Address 1798 Compatoca Ct
Phone 601-862-3186- TRISH Renter
352-232-2396 Christina Owner
OSS 030 ASTO CHICSTILL COUNTY
- lostall divertervalve 3' from Lank, run 20' east
WHA 4" SDP 35 then 14' North!
- Install 4 Runs OF 10 Quick y Standard Chambers
Corners Manitory Set 40: exceeds minimums
- Uso 750×1.2 900 USO 37.5
160 2 12
- ,5% Slove trunids North
- ,570 Stope Touting Indite
- Minimum of 1 of cover over hed.
pecial Instructions;
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