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Environmental Health Division

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

CONVENTIONAL ON-SITE WASTEWATER TREATMENT SYSTEM
FINAL INSPECTION FORM

P

On-site ID: 000049986 Tax schedule (APN) #: 4129003018 Permit Type: New ☒ Major ☐

Environmental Health Specialist: Chelsea Stevens Final Inspection Date: 8-23-19 Approved: YES ☒ NO ☐

Residential Property Information:

Owner: Anderson Homestead Builders Address: 16035 Homestead Circle, Elbert, CO 80106 Approved No. Bedrooms: 5
Water supply: Municipal ☐ Well ☒ Cistern ☐ Date well installation verified: 8-23-19 GPS of Well: 39°3'49.21"N, 104°34'43.60"W
Approval will be revoked if in the future any well is found to be within 50 feet of the septic tank and/or 100 feet of the soil treatment area.

Minimum System Requirements: Soil Type: 3 LTAR: 0.35 Limiting Layer: ☐ Groundwater ☐ Bedrock ☐

OWTS Tank: Capacity (gallons): 1500

Soil Treatment Area (STA): Sq. Ft. (10-1): 1714 Sq. Ft. (10-2): 1714 Sq. Ft. (10-3): 1200 Sq. Ft. (with Diverter Valve):

Final system installation:

Licenses Installer: Tier 1 ☐ Tier 2: ☒ Homeowner: ☐ Installer: Down to Earth Excavating

OWTS Tank: Construction Material: Concrete Capacity (gallon): 1500 Existing ☐ New ☒
GPS Location of tank: 39°3'49.59"N, 104°34'42.25"W

OWTS Pump Tank: YES ☐ NO ☒ Capacity (gallon): Audio/visual Alarm: YES ☐ NO ☐
Pump (Gal/dose): Dose: Total Dynamic Head: Elevation difference:

Soil Treatment Area (STA): GPS Location: 39°3'47.96"N, 104°34'42.67"W Total Sq. Ft installed: 1200

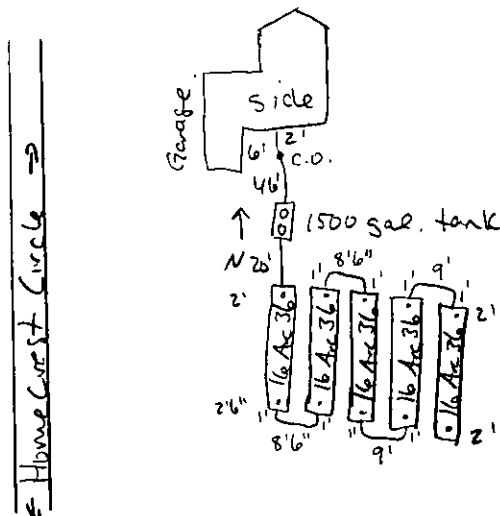
Configuration: Trench ☒ Bed ☐ Distribution: Gravity ☒ Pump to Gravity ☐

☐ Rock and Pipe: Width: Total Length: Installation Depth:

Depth of Rock(under pipe): Type of cover on Rock:

☒ Chambers: Type: 4x36 Sq. Ft./chamber: 15 No. Chambers: 80 Installation Depth (range): 2'-2'6"

Record Drawing: ⊕ Well > 100' from tank + STA



All pipe is SDR 35

Attn: ANDERSON HOMESTEAD BUILDERS
16035 HOMECREST CIR
ELBERT, CO 80106

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.



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NEW SYSTEM PERMIT - OWTS

Valid From 4/3/2019 To 4/3/2020

PERMITEE :

ANDERSON HOMESTEAD BUILDERS
16035 HOMECREST CIR
ELBERT, CO 80106

Onsite ID: ON0049986

Tax Schedule # : 4129003018

Permit Issue Date: 04/03/2019

Dwelling Type: RESIDENTIAL

OWNER NAME :

ANDERSON HOMESTEAD BUILDERS

of Bedrooms (if Res): 5

Proposed Use (if Comm):

Designed Gallons/Day:

Water Source: PRIVATE WELL

System Installation Requirements:

- A Conventional non-engineered OWTS system to be installed on site, requiring a minimum of Tier 1 licensed installer.
- System installation includes gravity fed system to chamber in trenches, max installation depth of 48". Minimum tank requirements 1500 gallon and 1200 sq ft of soil treatment area (100 Q4 / 80 Arc 36 chambers required).
- The system must be installed per approved RJM Designs non-engineered design document #19-109 signed and dated 04.01.2019, changes to the approved design document must be submitted and approved by Public Health prior to installation.
- All horizontal setbacks must be maintained through system installation. In addition system must remain completely uncovered, including the tank size, for final inspection.
- The well must be installed at time of final inspection, or final approval will not be given until well installation is verified.
- Ensure that all work is completed prior to contacting and requesting final line for inspection, otherwise additional fees may be incurred.

Box P for Chelsea

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16035 HOMECREST CIR
ELBERT, CO 80106

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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 (permit).

Inspection request line: Call (719) 575-8699 before 3:30 p.m. the business day prior to the requested inspection date.

Authorized By: Environmental Health Specialist



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APPLICATION FOR AN ON-SITE WASTEWATER TREATMENT SYSTEM PERMIT**Property Information:**Property Address: 16035 Homestead Cir, Elbert, CO City and Zip: 80106Legal Description: Lot 41, Woodlake Filing #4, El Paso Co., CO.Tax Schedule #: 41240-03-018 Lot size: _____Is the property gated: ☐ Yes ☒ No Please provide a gate code if necessary: _____Site Located Inside City Limits: ☐ Yes ☒ No Proposed Use: ☒ Residential ☐ CommercialWater Supply: ☒ Well ☐ Cistern ☐ Municipal Potential Number of Bedrooms: 5Has a Conditional Acceptance Document been issued for this property: ☐ Yes ☒ No ☐ Unsure**Owner Information:** ☒ Primary ContactOwner: Larry Anderson Daytime Phone: 719-229-8345Owners Mailing Address: 13350 W. Bucknell Cir, Elbert, CO 80106Email Address: Larryandmary2@hotmail.com Fax #: _____General Contractor: Larry Anderson Phone/Email: same**OWTS Installer Information:** ☒ Primary ContactSystem Installer: Down to Earth Excavating Daytime Phone: 719-495-3660Email Address: _____ Licensed installer: ☐ Tier 1 ☒ Tier 2All engineer-design systems must be installed by a Tier 2 licensed installer**CURRENT FEES AS APPROVED BY THE EL PASO COUNTY BOARD OF HEALTH**

All Payments are due at the time of application submittal; by cash, check or major credit card (Visa / MC)

☒ **New Permit:** \$750.00 (EPCPH Charge) + \$147.00 (EPC Planning Dept. Surcharge) + \$23.00 (CDPHE Surcharge) = **\$920.00**☐ **Modification Permit:** \$675.00 (EPCPH Charge) + \$23.00 (CDPHE Surcharge) = **\$698.00**☐ **Major Repair Permit:** \$535.00 (EPCPH Charge) + \$23.00 (CDPHE Surcharge) = **\$558.00**☐ **Minor Repair Permit:** \$245.00 (EPCPH Charge) + \$23.00 (CDPHE Surcharge) = **\$268.00**

Permits expire one year from date of issuance, unless otherwise noted

REQUIRED: Provide a complete written scope of work to be performed on the property.

The following documents MUST be included with your application.

- A soils report: including at least 1 soil profile excavation pit, in accordance with section 8.5 A-F of OWTS regulations
- A clear and legible design document: including the proposed and alternate locations, as well as system layout, labeled with all setbacks to pertinent structures and features in table 7-1.
- Provide directions to property, from a main highway, on the backside of application.

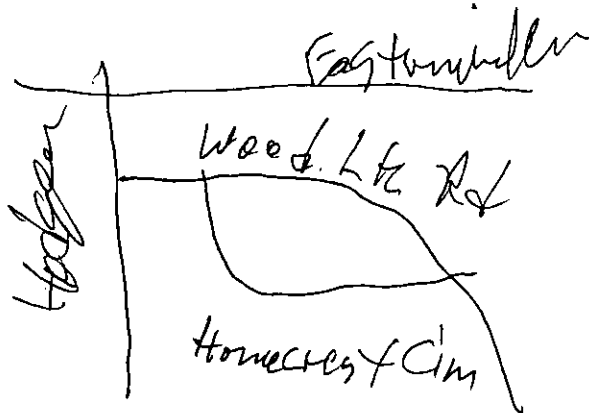
Failure to provide the above listed documents may result in denial of the permit application

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: _____

Date: 3/18/19

- Property address or lot number must be clearly marked and visible from the road.
- Profile excavation test pit and/or soil profile holes must be clearly marked
- Proposed and alternate soil treatment areas must be protected from compaction and disturbance
- Locked gates require the gate code or lock combination be provided on front of application
- Please provide directions to the property from a main highway, by text or picture, below.



Failure to comply with the above information may result in an additional charge for a return trip.

Permit #: ON0049986 Site Inspection date: 4-1-19

Date Approvals Rcvd: Development Services: 3-29-19 Floodplain/enumerations: 4-1-19

Design: ☒ Conventional ☐ Engineer Design Engineer: _____

Engineer Job #: _____ Engineer Date Stamped: 4-1-19

LTAR/Soil Type: 0.35 / 3 Groundwater: ☒ PP1/ ☒ PP2 Bedrock: ☒ PP1/ ☒ PP2

Minimum Requirements: Tank Capacity: 1500 Soil Treatment Area: 1200

System Feed: ☒ Gravity ☐ Pump to Gravity ☐ Pressure Dosed ☐ Other: _____

System Media: ☒ Chambers ☐ Rock and Pipe ☐ Other Soil Treatment Area: ☒ Trenches ☐ Bed

Pump specs: Tank capacity: _____ gal Gal/dose: _____ Flow: _____ gpm Total Dynamic Head: _____

Additional Comments: No bedrock or groundwater.
 $1000 / 0.35 = 1714 (1.0) = 1714 (0.7) = 1200$ 1000 / 0.4 or 80 Are 36

E.H. Specialist: Cullen Spivey Date: 4-1-19 ☒ Approved ☐ Denied



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530011342 AR0015320 ON00049986

APPLICATION FOR AN ON-SITE WASTEWATER TREATMENT SYSTEM PERMIT

Property Information:

Property Address: 16035 Homestead Cr City and Zip: Elbert Co 80106

Legal Description: lot 41 Woodlake filing #4

Tax Schedule #: 4129003018 Lot size: 5.44 acres

Is the property gated: ☐ Yes ☒ No Please provide a gate code if necessary:

Site Located Inside City Limits: ☐ Yes ☒ No Proposed Use: ☒ Residential ☐ Commercial

Water Supply: ☒ Well ☐ Cistern ☐ Municipal Potential Number of Bedrooms: 5

Has a Conditional Acceptance Document been issued for this property: ☐ Yes ☒ No ☐ Unsure

Owner Information: ☒ Primary Contact

Owner: Anderson Homestead Builders Daytime Phone: 719-229-8345

Owners Mailing Address: 13350 Bucknell Cr. Elbert Co 80106

Email Address: larryandmarti2@hotmail.com Fax #:

General Contractor: Phone/Email:

OWTS Installer Information: ☐ Primary Contact

System Installer: Down to Earth Exc Daytime Phone: 719-495-3660

Email Address: rick.down2earthexc@gmail.com Licensed installer: ☐ Tier 1 ☒ Tier 2

All engineer-design systems must be installed by a Tier 2 licensed installer

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

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Install a new non engineered septic system

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Applicants Signature: Date:

Chelsea