FI PAGE COMPTY WEST THE PROPERTY OF THE PAGE OF THE PA
EL PASO COUNTY HEALTH DEPARTMENT — Permit # 05/29018
Date (8-23-88)
APPROVED YES X NO # 4208002010 ENVIRONMENTALIST Pute Tuth P
Address 13120 HALLELUIAH TRL Owner ANDERSON HOMES
Legal Description LOT 21, FILING #1, THE TRAILS
Residence Commerical # of Bedrooms 3 System Installer T. C. EXCAUATING
SEPTIC TANK
Commercial Measurements: L W WD
Construction Material PRECAST CONCREVE Liq. Cap. 1250 GAL
DISPOSAL FIFLD
Exc. Depth 36 Width 24 Total Length 1/5' Sq. Ft. 345 4
Exc. Depth 36 Width 24 Total Length 1/5 Sq. Ft. 345 Rock Depth Under Over
Rock less System: Diameter of Pipe 1011 -58-2
Seepage Pits: Number of rings Lining Material Sq. Ft.
Working Depth Width
Engineer Design Yes Type Engineer Approval Letter Yes
Well 50 feet from Tank 100 feet from leach field
Well Installed at Time of Septic System Inspection Yes No Public Water
N 7
N
N
1250 GAL.
7 7 70 5' 10 7'
7 7 5' V 9 5'
48' ODO (ASTM 2730)
(SOR-35) (ASTM 2730 (ASTM 2730) 1500 #
14.5' (ASTM 2730 (ASTM 2730 1500 #: CRUSH)
(SOR-35) (ASTM 2730 (ASTM 2730) 1500 #
(ASTM 2730 (ASTM 2730 1500 # CRUSH)
14.5' (ASTM 2730 (ASTM 2730 1500 #: CRUSH)
(ASTM 2730 (ASTM 2730 1500 # CRUSH)

	PERMIT	Receipt No. / / /
TO CONSTRUCT, ALTER, REPAIR or	MODIFY ANY INDIVIDUAL SEWAGE DISPOSAL SYSTEM	
ssued ToJAY_ANDERSO	N HOMES INC.	Date7-27-8
	LLELUIAH TRIAL, LOT 21 fil #1, trall	Phone 495-3411
1300-1	(Permittvalid 6 this direct only)	
Sewage-Disposal System work to be	performed by TCEXCAVATING	Phone 495-2379
nstallation of sewage-disposal syste progress). This permit is revokable if	ce with 25-10-106 Colorado Revised Statutes 1973, as amem or at the end of twelve (12) months from date of issue fall stated requirements are not met. OT DENOTE APPROVAL OF CONING AND	-whichever occurs first-(unless work is in
nstallation of sewage-disposal syste progress). This permit is revokable if	em or at the end of twelve (12) months from date of issue f all stated requirements are not met.	-whichever occurs first-(unless work is in
installation of sewage-disposal system progress). This permit is revokable if —THIS PERMIT DOES NO \$150.00	em or at the end of twelve (12) months from date of issue f all stated requirements are not met.	whichever occurs first(unless work is in ACREAGE REQUIREMENTS
nstallation of sewage-disposal system progress). This permit is revokable if —THIS PERMIT DOES NO \$150.00 PERMIT FEE (NOT REFUNDABLE)	em or at the end of twelve (12) months from date of issue fall stated requirements are not met. OT DENOTE APPROVAL OF CONING AND COLUMN AND CO	whichever occurs first(unless work is in ACREAGE REQUIREMENTS
nstallation of sewage-disposal system of several system of several system of several system of the s	em or at the end of twelve (12) months from date of issue fall stated requirements are not met. OT DENOTE APPROVAL OF ZONING AND DIRECTOR, BOUNTY HEALTH DEPA	whichever occurs first(unless work is in ACREAGE REQUIREMENTS
installation of sewage-disposal system of sevage-disposal system of sevage-disposal system of the second system of	em or at the end of twelve (12) months from date of issue fall stated requirements are not met. OT DENOTE APPROVAL OF ZONING AND DIRECTOR, BOUNTY HEALTH DEPARAMENTALIST	—whichever occurs first—(unless work is in ACREAGE REQUIREMENTS— RTMENT
installation of sewage-disposal system of several system of several system of several system of the	em or at the end of twelve (12) months from date of issue fall stated requirements are not met. OT DENOTE APPROVAL OF ZONING AND DIRECTOR, BOUNTY HEALTH DEPARATION BOUNTY	—whichever occurs first—(unless work is in ACREAGE REQUIREMENTS— RTMENT
nstallation of sewage-disposal system of several system of several system of several system of the s	em or at the end of twelve (12) months from date of issue fall stated requirements are not met. OT DENOTE APPROVAL OF ZONING AND DIRECTOR, BOUNTY HEALTH DEPARATION DIRECTOR, BOUNTY HEALTH DEPARATION DIRECTOR FINAL INSPECTION DEPARTMENTS BED SYSTEM: BED SYSTEM: BED SYSTEM:	whichever occurs first—(unless work is in ACREAGE REQUIREMENTS— RTMENT 48 HOUR ADVANCE NOTICE REQUIRED.
installation of sewage-disposal system of progress. This permit is revokable if —THIS PERMIT DOES NO \$150.00 PERMIT FEE (NOT REFUNDABLE) 7-27-89 DATE OF EXPIRATION NOTE: LEAVE ENTIRE SEWAGE-DISECTION TRENCH total square feet to the progression of the square feet to the second second square feet to the square fe	em or at the end of twelve (12) months from date of issue fall stated requirements are not met. OT DENOTE APPROVAL OF ZONING AND DIRECTOR, BOUNTY HEALTH DEPARATION DIRECTOR, BOUNTY HEALTH DEPARATION DIRECTOR FINAL INSPECTION DEPARTMENTS BED SYSTEM: BED SYSTEM: BED SYSTEM:	ACREAGE REQUIREMENTS— RIMENT AS HOUR ADVANCE NOTICE REQUIRED. SEEPAGE PIT SYSTEM:

NOTES: LOCATE LEACH FIELD IN AREA OF PERC TEST. WELL TO BE AT LEAST 50 FEET FROM SEPTIC TANK AND 100 FEET FROM LEACH FIELD. MAINTAIN ALL MINIMUM REQUIRED DISTANCES.

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

El Paso County Health Department 501 North Foote Avenue Colorado Springs, CO 80909-4598 (303) 578-3125

530.6600

APPLICATION FOR A PERMIT TO CONSTRUCT, REMODEL, OR INSTALL A SEWAGE DISPOSAL SYSTEM
NAME OF OWNER JAY ANDONSON HOMES THE HOME PHONE 495 2981 WORK PHONE 495 3411
NAME OF OWNER JAY ANDORSON HOMES INC. HOME PHONE 495 2981 WORK PHONE 495 3411 ADDRESS OF PROPERTY FOT 21 DATE 20 Valy 88
LEGAL DESCRIPTION OF PROPERTY Lat 21 Filing I the trails
TAX SCHEDULE NUMBER 420 80-02-010 SYSTEM CONTRACTOR 7-C. Excounting Fulphone 495 2379
OWNER'S ADDRESS IF DIFFERENT 11725 timberlane ct. C. S.C. 80908
TYPE OF HOUSE CONSTRUCTION Single Dewelling Source and TYPE OF WATER SUPPLY we !!
SIZE OF LOT. 5 ACLES MAXIMUM POTENTIAL NUMBER OF BEDROOMS 3 BASEMENT (yes-or no) NO
PERCOLATION TEST RESULTS ATTACHED (yes or no) 7/05.
A plot plan and accompanying information are essential; it may be drawn on the back of this application of be attached. Please include by measured distance the location of wells including neighbors' wells, springs, water supply lines, cisterns, buildings, proposed structures, property lines, property dimensions, subsoil drains, lakes ponds, water courses, streams, and dry gulches. Please show the location of the proposed septic system by direction and distances from actual and/or proposed dwellings, structures, or fixed reference objects. Give complete directions to the property from major highways. (ANSWER QUESTIONS ON BACK OF FORM).
Applicant acknowledges that 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 the applicant for purposes of evaluation of the application; and issuance of the permit is subject to such terms and conditions at deemed necessary to ensure compliance with rules and regulations adopted under Article 10, Title 25, C.R.S. 197 as amended. The undersigned hereby certifies that all statements made, information and reports submitted by the applicant are or will be represented to be true and correct to the best of my knowlege and belief and are designed to be relied on by the El Paso County Health Dept. in evaluating the same for purposes of issuing the permit applier for herein. I further understand that 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 a provided by law.
SIGNATURE Jay Choseison
PERMIT NUMBER 05/29 RECEIPT NUMBER 1094 DATE TO LAND USE DEPARTMENT 1/2/1855
ABSORPTION AREA 33/ THE TANK CAPACITY 1250 GAL DATE OF SITE INSPECTION 7-22-88
REMARKS: LOCATE LEACH FIET-D IN ARREST OF PERC TESTI
WELL TO BE MY LEAST 50' FROM SEPTIC TANK +
100' FROM LEACH FISTO, MAINTAIN ALL MINIMUM
PEQUIRED DISTANCES.
III LANGAR FRET OF 36" TRENCH

ANSWER THE FOLLOWING ITEMS AND/OR INCLUDE ON PLOT PLAN.

PROPERTY LINES See plat Plan
PROPERTY DIMENSIONS <u>See plot plow</u>
LOCATION OF PROPOSED SEPTIC SYSTEM Seeplot Plan
LOCATION OF WELL See plot plan
LOCATION OF ADJACENT WELLS
BUILDINGS
PROPOSED BUILDINGS See Plat Plan
WATER SUPPLY LINE Seeplot plan
CISTERNS
SPRINGS
LAKES
PONDS
WATER COURSES
STREAMS
DRY GULCHES
SUBSOIL DRAINS
•

DIRECTIONS TO PROPERTY FROM MAIN HIGHWAYS:

Remotion St. Meridian