

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

Permit # 34  
Date 12/17/08

APPROVED: Yes ☒ No ☐ # 4333002009 Environmental Health Specialist: Debbie Polelli

Address 13770 Gymkhana Rd, Peyton, CO 80831 Owner Larry Robley

Legal Description Lot 9, Block 2, Corral Ranch

Residence ☒ # Bedrooms 3 Commercial ☐ System Installer Larry Robley (owner)

SEPTIC TANK:

Commercial ☒ Noncommercial ☐ Construction Material concrete Capacity Gallon 1250g (existing)

DISPOSAL FIELD:

Trench: Depth (Range) n/a Width          Total Length          Sq. Ft.         

Bed: Depth (Range)          Length          Width          Sq. Ft.         

Depth of Rock          Under PVC          Type of cover on Rock         

DRYWELLS: # of Pits          Rings (Pit 1)          Rings (Pit 2)          Working Depth #1          #2         

Size (L x W) #1          #2          Total Sq. Ft.         

ROCKLESS SYSTEMS:

Standard Chamber: Type n/a #Chambers          Sq. Ft./Chamber          Bed          Trench         

High Profile Units: Type Chamber          #Chambers          Sq. Ft./Chamber          Bed          Trench         

Reduction Allowed          % Sq. Ft. Required          Depth (Range)         

Sq. Ft. Installed          Equivalent Sq. Ft. Installed with Reduction         

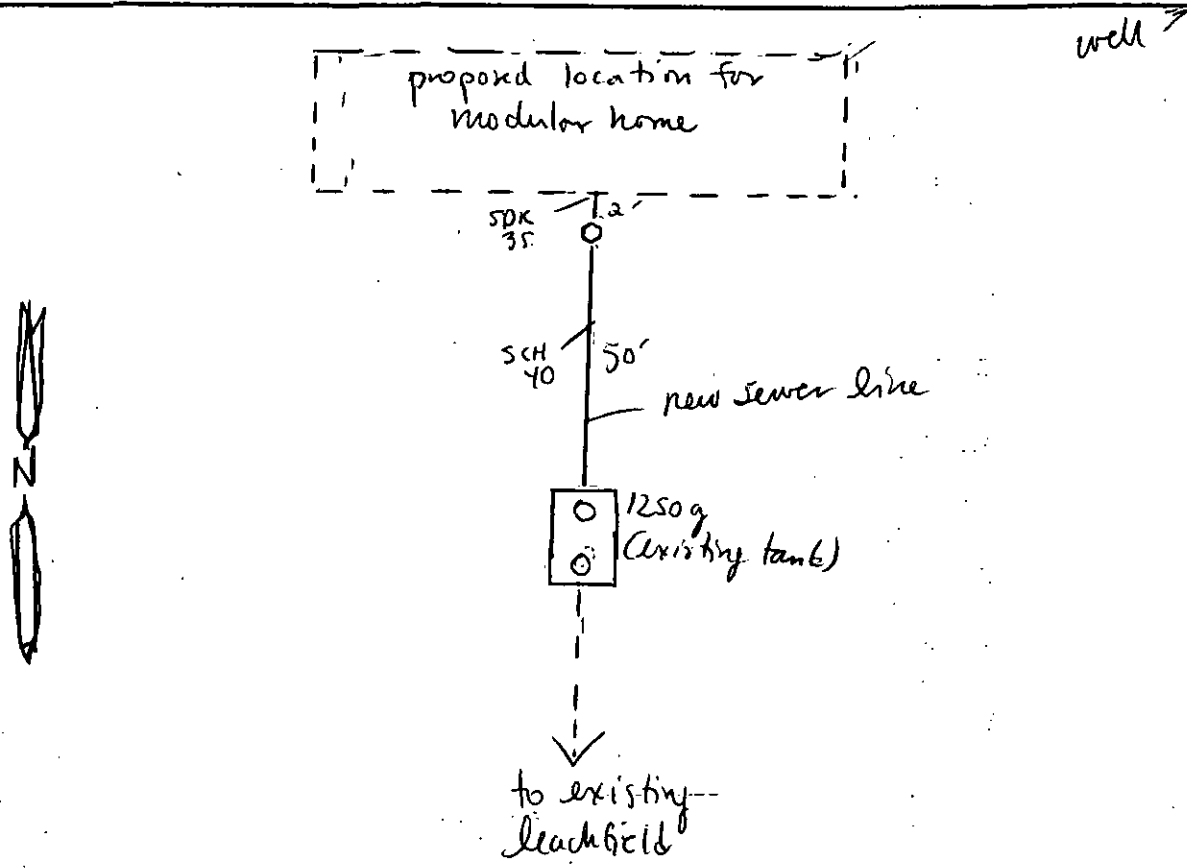
Engineer Design: Y ☒ N ☐ Engineering Firm         

Approval letter provided? Y ☐ N ☒

Well installed at time of septic system inspection? Y ☒ 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: new septic line replacement only



EL PASO COUNTY  
DEPARTMENT OF HEALTH AND ENVIRONMENT  
301 S Union Blvd, Colorado Springs, Colorado 719-575-8635  
ONSITE WASTE WATER SYSTEM PERMIT

OWNER NAME: LARRY ROBLEY  
ADDRESS: 13770 GYMKHANA RD  
CITY, STATE, ZIP: PEYTON, CO 80831  
PHONE NUMBER: (719) 440-4887 (Mobile Phone)

PERMIT NUMBER: 0000034  
DATE PERMITTED: 11/10/2008

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.**

PERMIT EXPIRATION DATE: 11/10/2009  
Expires twelve months from date of issue

*Brad Wallace 578-3127*

WATER SOURCE: Well or Spring

MINIMUM SEPTIC TANK SIZE: *NA* GALLONS MINIMUM ABSORPTION AREA REQUIRED *NA* SQ FT

PLANNING DEPARTMENT ☐ *NA* ENUMERATION ☐ *NA* FLOOD PLAIN ☐ *NA* WASTEWATER ☐ *NA*

**COMMENTS:**

\* FOR INSPECTIONS CALL 575-8635 BEFORE 8:30 A.M. OF THE DAY TO BE INSPECTED.  
(WEEKENDS & HOLIDAYS EXCLUDED)  
LEAVE THE ENTIRE SEWAGE DISPOSAL SYSTEM UNCOVERED FOR FINAL INSPECTION

PERMIT IS FOR THE INSTALLATION OF NEW LINE FROM HOUSE TO EXISTING SEPTIC TANK AND NEW LINE FROM SEPTIC TANK TO LEACH FIELD. PIPE MUST HAVE THE STRENGTH OF AT LEAST SDR-35 PIPE OR STRONGER. A CLEAN OUT USING A SWEEP TEE IS REQUIRED WITHIN 5 FEET OF HOUSE. REPLACEMENT OF CHAMBER(S) MUST HAVE AT LEAST THE SQUARE FOOTAGE OF SYSTEM INSTALLED IN 1998.

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.

*Called 440-4887*

FOR ADMINISTRATOR USE ONLY

Permit Ready:

Called

Mailed

*11/17/08 Mon.*

Final Inspection Requested:

BY: *Larry Robley*

Date Called In: *12-19-08*

Phone # *440-4887*

Septic Site will be ready: *Please call Larry*

*Larry indicated to mail permit. JFW*

**COPY**



# EL PASO COUNTY DEPARTMENT OF HEALTH & ENVIRONMENT

301 South Union Boulevard • Colorado Springs, CO • 80910-3123 •

(719) 575-8635 • Fax: (719) 578-3188

Record I.D. 0000034

**\*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 PERMIT

Owner Larry Robley Daytime Phone 719-440-4887

Address of Property 13770 Gymkhana Rd City & Zip Payton 80831

Legal Description Lot 9 Blk 2 Corral Ranches

Owner's MAILING Address 13820 Gymkhana Rd City, State & Zip Payton, CO 80831

Lot Size 5 acres Tax Schedule # 4333002009

Type of Building: ☐ Frame ☐ Modular ☒ Mobile ☐ Commercial ☐ Manufactured ☐ Other

Water Supply: ☒ Well or Spring ☐ Cistern ☐ Public Inside City Limits: ☐ No ☐ Yes-City

☒ MAIL PERMIT - OR - ☐ PICK UP PERMIT ☐ FAX - FAX TO AND #

MAXIMUM POTENTIAL NUMBER OF BEDROOMS 3

Percolation Test Attached ☒ N Basement Y ☒ N Garbage Disposal Y ☒ N Clothes Washer ☒ 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

Date 11-5-08

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

NA  
Minimum Tank Capacity

NA  
Minimum Absorption Area

NA  
Date of Site Inspection

REMARKS Permit is for the installation of new line from house to existing septic tank, and new line from septic tank to leach field. Pipe must have the strength of at least SDR-35 pipe or stronger. A clean out using a wide sweep tee is required within 5' of house. Replacement of chamber(s) must have at least the sq footage of system installed in 1998.

EHS INSPECTOR

Brian Wallan

DATE

11-10-08

☒ APPROVED

☐ DENIED

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

New Permit: \$304.50 EPCDHE costs + \$23.00 State Surcharge + \$177.50 EPC Planning Surcharge = \$505.00

Major repair permit: \$316.00

Minor repair permit: \$131.00

DATE TO LAND DEVELOPMENT/WASTEWATER:

DATE TO FLOODPLAIN/ENUMERATIONS:

11/18/2008

RECEIVED  
11/18/08  
2:25 PM

11/16/08 - Spoke w/ Mike McCarthy  
ok'd ~~minor~~ for minor repair.

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 VISIBLE 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 ½ 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**.

<input type="checkbox"/> Well(s)	<input type="checkbox"/> Adjacent property well(s)	<input type="checkbox"/> Subsoil drain
<input type="checkbox"/> Cistern	<input type="checkbox"/> Water line	

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

<input type="checkbox"/> Spring(s)	<input type="checkbox"/> Lake(s)
<input type="checkbox"/> Pond(s)	<input type="checkbox"/> Stream(s)
<input type="checkbox"/> Dry Gulch(es)	<input type="checkbox"/> Natural drainage course(s)

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

*Refer to Attached Google Map*