EL PASO COUNTY HEALT INDIVIDUAL SEWAGE DISPOSA	
#-44000000	
APPROVED_YES NO	ENVIRONMENTALIST Loci Dogne P
Address Blancy Rd.	Owner Donald Fergueson
Legal Description NEX4 / NEX4 5-145-64	
Residence Commerical # of Bedrooms	3 System Installer Kungu Drilling
SEPTIC TANK	and Excavating -
Commercial Measurements: L	WWD
Construction Material Precast Concrete	Liq. Cap
DISPOSAL FIELD	
Exc. Depth 36" Width 36" Total Leng	gth 105' Sq. Ft. 315 \$
Rock River Rock Depth 12" Under La	<u>"</u> Over 2"
Rockless System: Diameter of Pipe	•
Seepage Pits: Number of ringsLining Material	Sq. Ft
Working Depth Width	
Engineer Design Yes Type	Engineer Approval Letter Yes
Well 50 feet from Tank Ycs 100 feet from leach field	Yes
Well Installed at Time of Septic System Inspection Yes	No Public Water
wal .	N>
	Mobile Home
	Tibble Trans
	II'
	30 <sup>1</sup>
5u/	
<u>≤</u> 54′	5'(50R35)
5'(sores	5'
11 10'	1250 gal
<del></del>	

LOIT

Acres 35 EL PASO COUNT	Y • COUNTY HEALTH DEPA	05311
	ue • Colorado Springs, Colorado	
Water Supply well	PERMIT	• 578-3125 *Receipt No. 43.50
TO CONSTRUCT, ALTER, REPAIR OF MODIFY ANY INDIV	VIDUAL SEWAGE DISPOSAL SYSTEM	Λ
Issued To DONALD FERGUESON		Date 4/6/89
Address of Property 2160 Blaney Rd. NEW NEW (Permit value)	5 ≤ 14S = 64 Lot 1 Slo id at this address only)	Phone 683-2979
Sewage-Disposal System work to be performed byKu	nau Drilling & Exc	Phone <u>693-2720</u>
This Permit is issued in accordance with 25-10-106 C installation of sewage-disposal system or at the end of progress). This permit is revokable if all stated requirem—THIS PERMIT DOES NOT DENOTE AI	twelve (12) months from date of issu- nents are not met.	e-whichever occurs first-(unless work is in
\$150.00	- Henry hark	W.A.
PERMIT FEE (NOT REFUNDABLE) 4/6/90	DIRECTOR, OBUNTY HEALTH DEP,	Dans
DATE OF EXPIRATION	ENVIRONMENTALIST	
NOTE: LEAVE ENTIRE SEWAGE-DISPOSAL SYSTEM U	INCOVERED FOR FINAL INSPECTIO	N. 48 HOUR ADVANCE NOTICE REQUIRED.
SEPTIC TANK: TRENCH SYSTEM:	BED SYSTEM:	SEEPAGE PIT SYSTEM:
total square feet 302 101ft, of trench 36 inches wic	deju)	total square feet
1250 gallons 151 ft. of trench 24 inches wid	de total square feet	rings ordiam.xw/d

NOTES: Maintain all minimum distance requirement. Install according to El Paso County Department ISDS Regulations (1986).

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



APPLICATION FOR A PERMIT TO CONSTRUCT, REMODEL, OR INSTALL A SEWAGE DISPOSAL SYSTEM ADDRESS OF PROPERTY SYSTEM CONTRACTOR TYPE OF HOUSE CONSTRUCTION SOURCE AND TYPE OF WATER SUPPLY MAXIMUM POTENTIAL NUMBER OF BEDROOMS BASEMENT (yes on no) PERCOLATION TEST RESULTS ATTACHED (yes)or no) A plot plan and accompanying information are essential; it may be drawn on the back of this application or 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 directions 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 as deemed necessary to ensure compliance with rules and regulations adopted under Article 10, Title 25, C.R.S. 1973 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 applied 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 as provided by law. of 24" trens HEALTH DEPARTMENT USE ONLY RECEIPT NUMBER DATE TO LAND USE DEPARTMENT (A LLO) TANK CAPACITY

ENVIRONMENTALIST

DENIED ( ) DATE

APPLICATION IS APPROVED (

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

in' = + 1 suth
PROPERTY LINES 100' East 100' South
PROPERTY DIMENSIONS January 17 assert
LOCATION OF PROPOSED SEPTIC SYSTEM for tos Usice
LOCATION OF WELL 300 West
LOCATION OF ADJACENT WELLS 300 South Was
BUILDINGS Born 250 West
PROPOSED BUILDINGS Vae
WATER SUPPLY LINE From Well to Hoohun on Mobil
CISTERNS None
springs
LAKES
PONDS None
WATER COURSES South East
STREAMS Work
DRY GULCHES
SUBSOIL DRAINS Was
DIRECTIONS TO PROPERTY FROM MAIN HIGHWAYS:
1/ 215 1
This way to
this is a second of the
with the state of
min 3
F 10
HWV 94
HWY 94