

## ON-SITE WASTEWATER SYSTEM INSPECTION FORM

PERMIT # CN0024962DATE Sep. 5, 2013APPROVED YES ☒ NO ☐Environmental Health Specialist: J. ChristensenAddress: 18320 Table Rock Rd. 80908 Owner Timothy and Lisa AnthonyLegal Description: Lot 3 Block 2, Willow Springs EstatesResidence ☒ #Bedrooms 0 Commercial ☐ System Installer Kunau DrillingSEPTIC TANK: Construction Material Concrete Capacity Gallon 1000

## DISPOSAL FIELD:

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 \_\_\_\_\_

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

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

## ROCKLESS SYSTEMS:

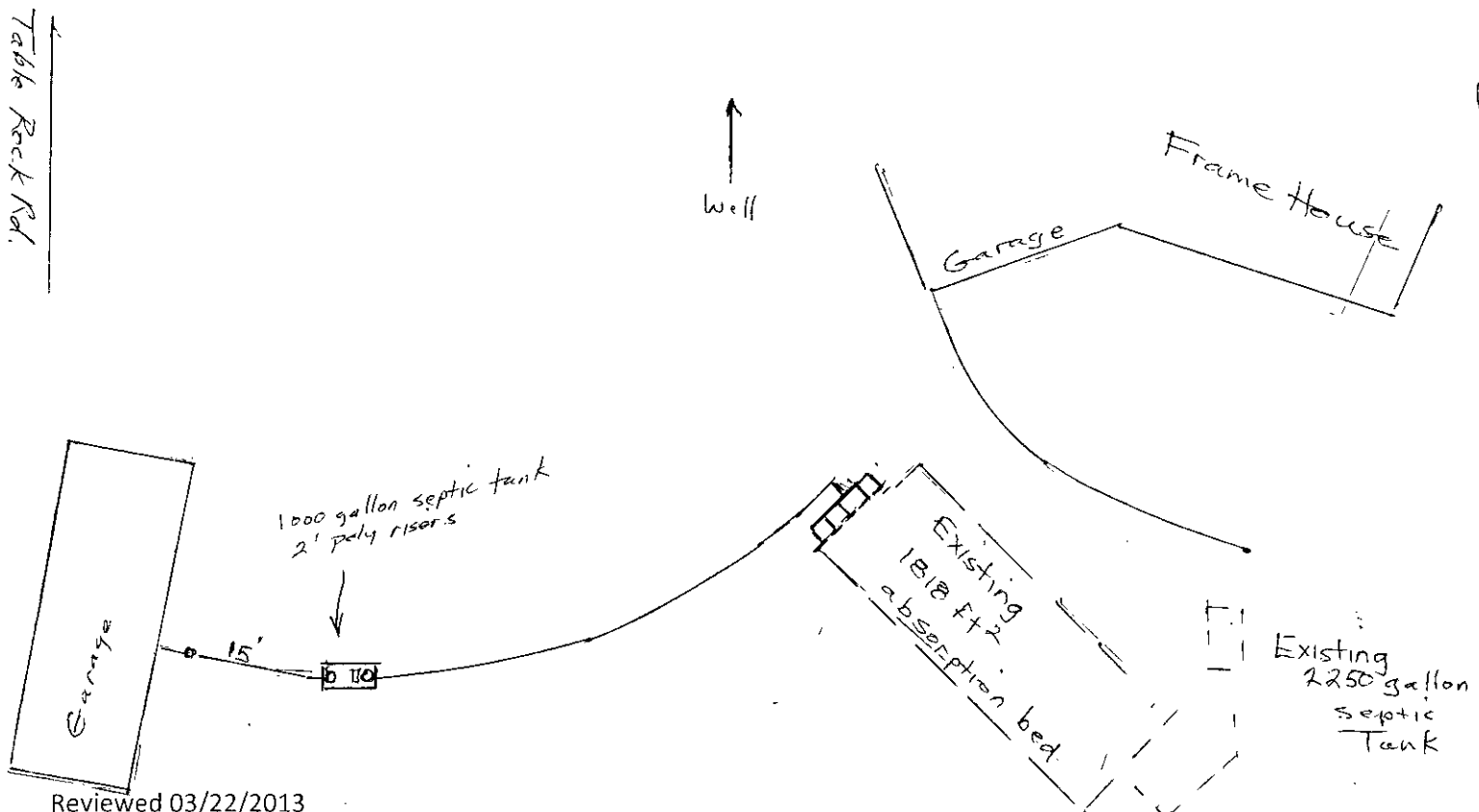
Standard Chamber: Type \_\_\_\_\_ #Chambers \_\_\_\_\_ Sq. Ft./Chamber \_\_\_\_\_ Bed \_\_\_\_\_ Trench \_\_\_\_\_

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

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

Sq. Ft. Installed 0 Equivalent Sq. Ft. Installed with Reduction 0Engineer Design: Y ☐ N ☒ Engineering Firm N/A Approval Letter Provided: Y ☐ N ☐Well installed at time of septic inspection: Y ☒ N ☐ Public Water: Y ☐ N ☐

\*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: minor repair permit. New garage building east of house tied onto existing septic's absorption bed.

Attn: TIMOTHY AND LISA ANTHONY  
18320 TABLE ROCK RD  
COLORADO SPRINGS, CO  
80908-1521

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.



**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](http://www.elpasocountyhealth.org)

## MINOR REPAIR PERMIT - OWTS

Valid From 8/29/2013 To 8/29/2014

PERMITEE :

TIMOTHY AND LISA ANTHONY  
18320 TABLE ROCK RD  
COLORADO SPRINGS, CO 80908-1521

Onsite ID: ON0024962

Tax Schedule # : 5115005003

Permit Issue Date: 08/29/2013

Dwelling Type: RESIDENTIAL

# of Bedrooms (if Res): 0

Proposed Use (if Comm):

Designed Gallons/Day:

Water Source: PRIVATE WELL

OWNER NAME :

TIMOTHY AND LISA ANTHONY

### System Installation Requirements :

Permit is to install a sewer line for a garage.

Install a cleanout within 5 feet of the garage.

The garage will have a 1000 gallon septic tank and effluent line will attach to the existing residence system effluent line.

Septic Tank Capacity Required: 1000 (Gallons) Soil Treatment Area Required: 0 (SQ. Feet)

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)

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

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. Onsite Wastewater Treatment System to be installed by an El Paso County Licensed System Contractor, or the property owner

*Janet Christensen* 578-3141  
Authorized By: Environmental Health Specialist

El Paso County, CO



Prevent • Promote • Protect

Environmental Health Division

1675 W. Garden of the Gods Rd., Suite 2044  
Colorado Springs, CO 80907  
(719) 578-3199 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 Tim & Lisa Anthony Daytime Phone 719-494-8482

System Installer Kunau Daytime Phone \_\_\_\_\_

Property Address 18320 Table Rock Rd City and Zip Colo. Spgs CO 80908

Owners Mailing Address 18320 Table Rock Rd. Colo Spgs CO 80908

Email Address \_\_\_\_\_ Fax # \_\_\_\_\_

Tax Schedule # 5115005003 ✓ Lot Size 5.5 Acres 5.74 acres

Site Located Inside City Limits ☐ Yes ☒ No Primary Contact ☐ Owner ☒ Contractor

Proposed Use: ☒ Single Family ☐ Multi-Family ☐ Commercial

Water Supply: ☒ Well ☐ Cistern ☐ Municipal Number of Bedrooms 2

☐ Pick up: ☐ Fax: ☒ Email: merlin.bottin@gmail.com

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

**New Permit:** \$440.00 (EPCPH Charge) + \$147.00 (EPC Planning Dept. Surcharge) + \$23.00 (CDPHE Surcharge) = \$610.00

**Major Repair Permit:** \$494.00 (EPCPH Charge) + \$23.00 (CDPHE Surcharge) = \$517.00

**Minor Repair Permit:** \$188.00 (EPCPH Charge) + \$23.00 (CDPHE Surcharge) = \$211.00

- 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: Merlin Bottin Date: 8/27/2013

Site Insp. Date: NIA Perc. Rate: \_\_\_\_\_ Permit # ON0024962

E.H.S. Review Notes: \_\_\_\_\_

Date to: E.P.C. Development Services \_\_\_\_\_ Flood Plain and Enumerations \_\_\_\_\_

Permit Requirements: Permit is to install a sewer line for a garage to the existing septic.  
Install a cleanout within 5ft. of the garage.  
The garage will have a separate septic tank.

1000 gallons  
Min. Septic Tank Capacity

NIA  
Min. Absorption Area

E.H. Specialist Janet Christensen Date 8/29/13 ☒ Approved ☐ Denied

Reviewed 03/22/2013

- 1) We require an original copy of your PERCOLATION TEST with a licensed engineer's (P.E.) stamp and signature as well as a plot plan of the test hole locations with measurements from a fixed reference point.
- 2) Property address or lot number must be posted and clearly visible from the road. The percolation 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 on an 8 1/2" x 11" sheet of paper and shall include the following items:

a) North Arrow	e) Proposed Septic System Site	h) Distance of Percolation
b) Property Lines	f) Alternate Septic System Site	Test to Two Property
c) Property Dimensions	g) Driveway & Name of Adjoining	Lines.
d) All Existing and Proposed Buildings	Street	
- 4) Additional items that shall be included on the plot plan if they apply to your site:

a) Proposed &/or Existing Wells	
b) Wells on Adjacent Properties	e) Drainage Ways; Existing or Proposed
c) Water Lines	(ie: Streams, Dry Gulch, etc...)
d) Bodies of water (ie: Lake, Pond)	f) Subsoil Drains
- 5) Please provide below complete and accurate directions to the property from a main highway.

- 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) (

er. The plot plan must include:

- 1) a north bearing
- 2) property lines
- 3) property dimensions
- 4) all buildings (proposed or existing)

- 5) prop
- 6) alter
- 7) driv
- existing
- street)

EL PASO  
COUNTY HEALTH  
DEPARTMENT

- distance of percolation test
- no property lines.

06-12-2008 THU #120

- 4) Initial any of the following features that apply

**E them on your PLOT PLAN.**

☒ Well(s)  
☐ Cistern

☐ Adjacent  
☐ Water

031926  
OW: NEW 304.50  
OW: CNTY SURCH. 140.00  
OW: STATE SUR 23.00  
SURTLE 467.50  
CHECK 467.50

☐ Subsoil drain

- 5) Initial any of the following that are within 100 **PLAN.**

tem and **INCLUDE** on your **PLOT**

☐ Spring(s)  
☐ Pond(s)  
☐ Dry Gulch(es)

ITEM 3  
SHERYL 7702 14:01TH  
s)  
n(s)

☐ Natural drainage course(s)

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

*See Attached Directions*