

Permit # 0714
Date 4/21/02

ENVIRONMENTALIST D. Firley.

Owner: Brian Blaser

SEPTIC TANK:

DISPOSAL FIELD:

Rock Systems:

Bed: depth _____, length _____, width _____, sq. feet _____

Rock type _____, depth _____, under PVC _____, over PVC _____

Seepage Pits: # of pits _____, total # of rings _____, working depth(s) _____
size of pit(s) L X W _____, lining material _____, total sq. feet _____

Rockless Systems:

Chamber: Type BioDiffuser, number of chambers 30, bed , trench ☒
sq. ft./section 15.5, reduction allowed 40%, sq. ft. required 762
total sq. ft. installed 775, depth of installation 24"-48"

Engineer Design Y or (N), Designing Engineer

Approval letter provided? Y or N

Well 50 feet from tank (Y) or N 100 feet from leach field (Y) or N

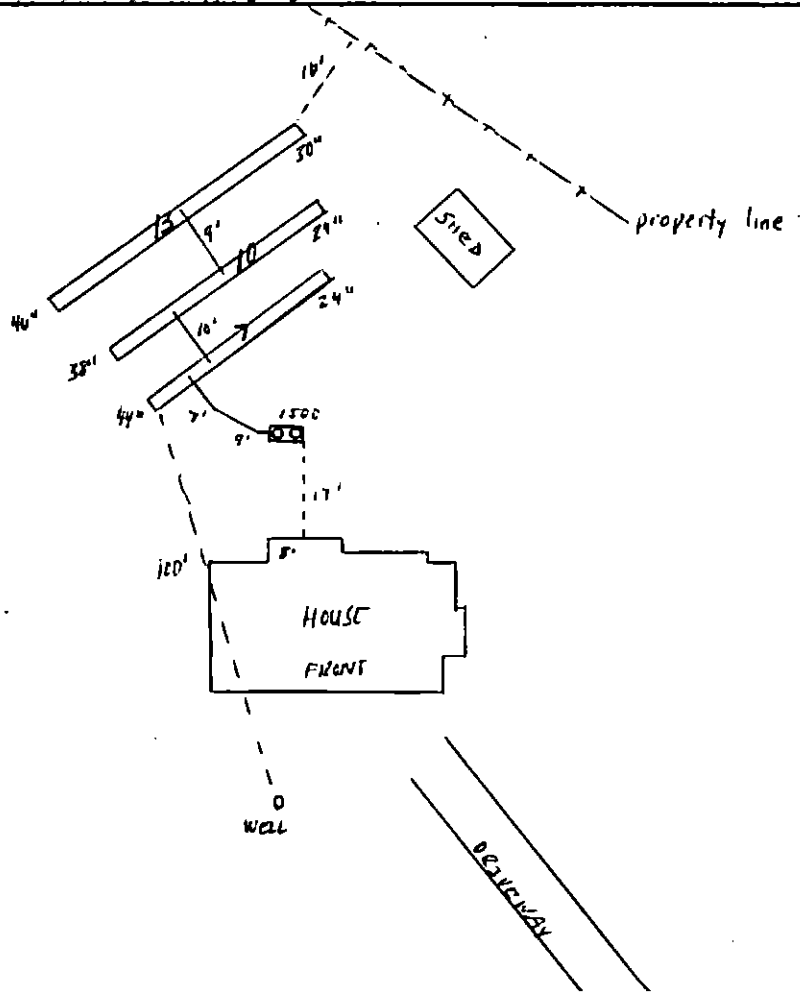
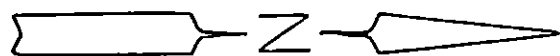
Well installed at time of septic system inspection ☒ Y or N ☐ Public Water

*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: pipe = 4" SDR 35

* Existing leach field was abandoned.

* Refer to RE letter concerning depth of beach field. 4/23/03



DAVE F.

EL PASO COUNTY
DEPARTMENT OF HEALTH AND ENVIRONMENT
301 S Union Blvd, Colorado Springs, Colorado 719-575-8636

INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT

OWNER NAME: BRIAN BLASER
ADDRESS: 7215 WALCH ST
CITY, STATE, ZIP: COLORADO SPRINGS CO 80908
INSTALLED BY: MURRAY, MICHAEL [Murray Const]

PERMIT NUMBER: ON0000714
DATE PERMITTED: 11/30/2000
PHONE NUMBER: 7194959831

This permit is issued in accordance with 25-10-107 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 construction has not commenced prior to the expiration date of the building permit, the ISDS permit shall expire at the same time as the building permit. This permit is 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.

Rosemary C. Baker-Martin

DIRECTOR, EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT

PERMIT EXPIRATION DATE:
Expires twelve months from date of issue

Janet Christensen / 578-3141
ENVIRONMENTALIST / PHONE NUMBER*

* NOTE: FOR INSPECTIONS CALL 575-8699 BEFORE 8:30 A.M. OF THE DAY TO BE INSPECTED.
(WEEKENDS & HOLIDAYS EXCLUDED)
LEAVE THE ENTIRE SEWAGE DISPOSAL SYSTEM UNCOVERED FOR FINAL INSPECTION.

WATER SOURCE: WELL

MINIMUM SEPTIC TANK SIZE: 1,500 GALLONS MINIMUM ABSORPTION AREA REQUIRED 762 SQ FT

PLANNING DEPARTMENT

N/A

ENUMERATION

N/A

FLOOD PLAIN

N/A

WASTEWATER

N/A

COMMENTS:

INSTALL ABSORPTION SYSTEM IN AREA OF JANUARY 23, 2003 SOIL PERCOLATION TEST. "BOTTOM OF THE INFILTRATORS SHOULD BE INSTALLED AS SHALLOW AS POSSIBLE" PER THE ENGINEER. MAINTAIN MINIMUM ISDS SETBACK 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 time for the purpose of making such inspections as are necessary to determine compliance with requirements of this law.

FOR ADMINISTRATIVE USE ONLY

Permit Ready: 4/8/03 JAK

Called

Mailed

Final Inspection Requested: BY:

R + R Ditching

Date Called In:

4/24/03 7:39

Phone #

492-9998

Septic Site will be ready:

NOW

Inspector

Record I.D.



EL PASO COUNTY ENVIRONMENTAL HEALTH SERVICES

301 South Union Boulevard • Colorado Springs, CO • 80910-3123 • (719) 578-3126

APPLICATION FOR A ☐ NEW ☐ REMODEL ☒ REPAIR OR ☒ ADDITION TO AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM

Owner Brian P. Blaser Daytime Phone 495-9831
 Address of Property 7215 WALCH ST Blk Forest CO City & Zip 80908
 Legal Description Lots 1-9 IN Block 16, Brentwood country club CABIN/Trailer EL PASO CO.
 Tax Schedule # 52082-17-001 Lot Size 1.95 ac Septic Contractor/Phone Mumma const.
 Inside City Limits ☒ No ☐ Yes-City 002 003 Water Supply ☒ Well or Spring ☐ Cistern ☐ Public
 Type of Building ☒ Frame ☐ Mobile ☐ Modular ☐ Other _____
 Owner's Mailing Address 7215 WALCH ST City, State & Zip Blk Forest CO 80908

MAXIMUM POTENTIAL BEDROOMS 4

Basement Y ☒ NPercolation Test Attached ☒ NGarbage Disposal ☒ NClothes 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 SIGNATURE

Brian P. Blaser

Date 6/20/99

DEPARTMENT OF HEALTH USE ONLY

P.E. design

Minimum Absorption Area

P.E. design

Minimum Tank Capacity

06/21/99

Date of Site Inspection

REMARKS Call Brian @ both #'s - No answer 6/30/99 4 pm

Install system in area of soil percolation test, per
P.E. design. An engineers letter of ~~for~~ approval I must
be received by this office for final approval of system
and the health dept. must inspect system prior
to backfill.

EHS INSPECTOR

Janet Christensen

DATE 07/16/99

APPROVED

DENIED

PERMIT # DA10000 714

FEE NO FEE

DATE TO PLANNING DEPT

DATE TO WASTEWATER DISTRICT

N/A

1) We require a copy of your percolation (**PERC**) **TEST** with an original professional engineer's (PE) stamp and signature.

2) A **PLOT PLAN** must be drawn (not to scale) on a 8 1/2 x 11 sheet of paper. The plot plan must include

- | | | |
|------------------------|--|---|
| 1) a north bearing | 4) all buildings (proposed or existing) | 7) driveway (proposed or existing and name of adjoining street) |
| 2) property lines | 5) proposed septic system site | |
| 3) property dimensions | 6) designated alternate septic system site | |

3) Initial any of the following features that apply to your property and include them on your plot plan.

<input checked="" 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	

4) 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 checked="" type="checkbox"/> Dry Gulch(es)	<input checked="" type="checkbox"/> Natural drainage course(s)

5) **PROPERTY ADDRESS OR LOT NUMBER MUST BE POSTED AND CLEARLY VISIBLE FROM ROAD. PERC HOLES MUST BE CLEARLY MARKED.**

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

