



Prevent • Promote • Protect

Environmental Health Division

1675 W. Garden of the Gods Rd., Suite 2044
Colorado Springs, CO 80907
(719) 578-3199 phone
(719) 575-8664 fax
www.elpasocountyhealth.org

**ENGINEERED ON-SITE WASTEWATER TREATMENT SYSTEM
FINAL INSPECTION FORM**

P

On-site ID: ON0040712 Tax schedule(APN) #: 5226001004 Permit Type: New ☐ Major ☒ Minor ☐
Environmental Health Specialist: Kat McGarvy Final Inspection Date: 11.9.2018 Approved: YES ☒ NO ☐

Residential/Commercial Property Information:

Owner: Mathews Christina Address: 9750 Flaming Sun Dr, Colorado Springs CO 80908 Approved No. Bedrooms: 3
Water supply: Municipal ☐ Well ☒ Cistern ☐ Date well installation verified: 11.9.2018 GPS of Well: not found within 100'
Approval will be revoked if in the future any well is found to be within 50 feet of the septic tank and/or 100 feet of the soil treatment area.

Minimum System Requirements: Soil Type: 4 LTAR: 0.2 Limiting Layer: ☐ Groundwater ☐ Bedrock ☐

OWTS Tank: Capacity (gallons): 1250

Soil Treatment Area (STA): Sq. Ft. (10-1): 4460 Sq. Ft. (10-2): 3568 Sq. Ft. (10-3): 2498 Sq. Ft. (with Diverter Valve): (10-2)/(2)

Mound (STA): Chamber Adjustment: ☐ Sq. Ft. (Dist. Area): ☐ Sq. Ft. (Basal Area): ☐

NDDS (STA): Sq. Ft. (10-1): ☐ NDDS Factor: ☐ Sq. Ft. (NDDS adjustment): ☐

Engineering:

Design Engineer: Parr Engineering Engineer design #: 18.230

Date engineer record drawing/certification letter recieved: ☐

Final system installation:

Licensed Installer: Teir 2: ☒ Installer: Bugenhagen Septic

Treatment Level: 1 ☐ 1PD ☒ 2 ☐ 2N ☐ 3 ☐ 3N ☐

Operation and Maintenance Inspection: Required ☒ Not Required ☐

OWTS Tank: GPS Location: 38° 58.516 N, 104° 38.627 W

Construction Material: concrete Capacity (gallon): 1250 Existing ☐ New ☒

OWTS Pump Tank: YES ☒ NO ☐ Capacity (gallon): 1250 Audio/visual Alarm: YES ☒ NO ☐

Pump (Gal/dose): 125 gal Flow: 20 gpm Total Dynamic Head: 20' Elevation difference: not provided

Soil Treatment Area (STA): GPS Location: 38° 58.803 N, 104° 38.581 W Total Sq. Ft installed: 2520

Configuration: Trench ☒ Bed ☐ Distribution: Gravity ☐ Pressure Dosed ☒ NDDS ☐ Dosed ☐

☐ Rock and Pipe: Width: ☐ Total Length: ☐ Installation Depth: ☐

Depth of Rock(under pipe): ☐ Type of cover on Rock: ☐

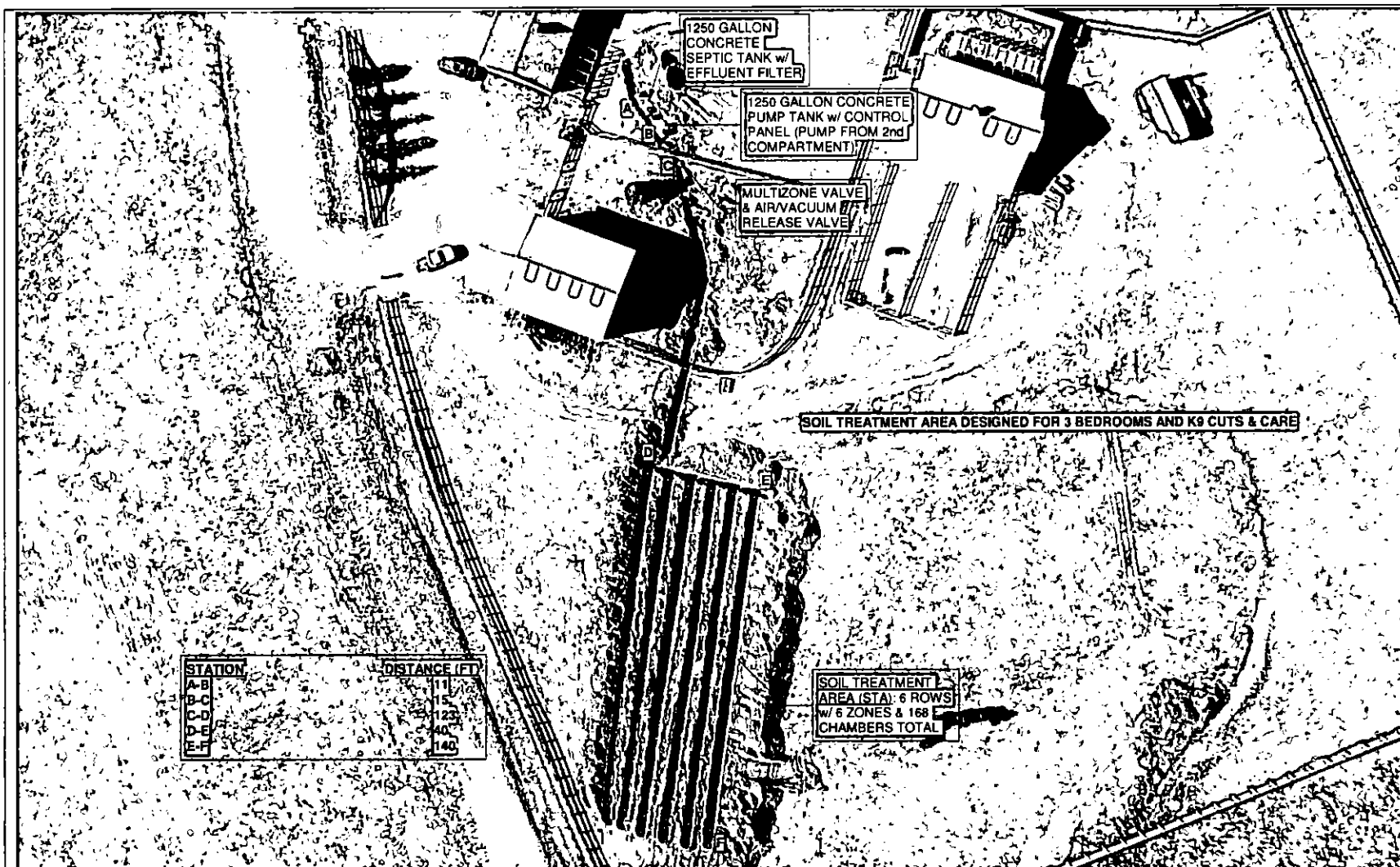
☒ Chambers: Type: ARC 36 LP Sq. Ft./chamber: 15 No. Chambers: 168 Installation Depth(range): 10-12"

☐ NDDS: # Zones: ☐ # Laterals/zone ☐ Field Dimensions: ☐

☐ Seepage Pit: # Rings: ☐

Notes:

September 20, 2017



① Site Map - AS-BUILT
1" = 40'-0"



Part Engineering & Consulting, Inc.
11590 Black Forest Road, Suite 10
Colorado Springs, Colorado 80908
Phone: 719-494-0404

9750 Flaming Sun Drive, 80908

As-Built

Project number 18.230
Date 11/14/18
Drawn by H.LACERDA
Checked by Checker

C1 A.B.

Scale 1" = 40'-0"

Attn: MATHEWS CHRISTINA
9750 FLAMING SUN DR
COLORADO SPRINGS, CO 80908

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.



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MAJOR REPAIR PERMIT - OWTS

Valid From 10/16/2018 To 10/16/2019

PERMITEE :

**MATHEWS CHRISTINA
9750 FLAMING SUN DR
COLORADO SPRINGS, CO 80908**

Onsite ID: ON0040712

Tax Schedule #: 5226001004

Permit Issue Date: 10/16/2018

Dwelling Type: RESIDENTIAL

OWNER NAME :

MATHEWS CHRISTINA

of Bedrooms (if Res): 3

Proposed Use (if Comm):

Designed Gallons/Day:

Water Source: PRIVATE WELL

System Installation Requirements:

- An Engineered OWTS system to be installed on site due to encountering USDA Soil Type 4, requiring a Tier II licensed installer.
- System installation to include pressure dosed chamber in trenches, max installation depth of 48". Minimum tank requirements 2000 gallon and 2498 sq ft of soil treatment area (209 Q4 / 167 Arc 36 chambers required).
- The system must be installed per approved Parr Engineering design document #18.230 stamped and dated 7.17.2018, changes to the approved design document must be submitted and approved by Public Health prior to installation.
- All horizontal setbacks must be maintained through system installation. In addition system must remain completely uncovered, including the tank size, for final inspection.
- The well must be installed at time of final inspection, or final approval will not be given until well installation is verified.
- Engineered systems require the as built drawing and certification letter from the engineer be submitted to Public Health prior to final approval and Regional Building sign off
- Ensure that all work is completed prior to contacting and requesting final line for inspection, otherwise additional fees may be incurred.

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COLORADO SPRINGS, CO 80908

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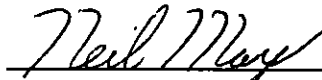


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This permit is issued in accordance with 25-10-106 Colorado Revised Statutes. The PERMIT EXPIRES upon completion/installation of the Onsite Wastewater Treatment System, or at the end of twelve (12) months from date of issue, whichever occurs first. 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. The Onsite Wastewater Treatment System must be installed by an El Paso County Licensed System Contractor, or the property owner.

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).

Inspection request line: Call (719) 575-8699 before 3:30 p.m. the business day prior to the requested inspection date.



Authorized By: Environmental Health Specialist

El Paso County, CO

Public Health

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530010388 AS0014464 ON0040712

APPLICATION FOR AN ON-SITE WASTEWATER TREATMENT SYSTEM PERMIT

Property Information:

Property Address: 9750 Flaming Sun City and Zip: Colorado Springs 80908

Legal Description: _____

Tax Schedule #: 5226001004 Lot size: 4.75

Is the property gated: ☐ Yes ☒ No Please provide a gate code if necessary: _____

Site Located Inside City Limits: ☐ Yes ☒ No Proposed Use: ☒ Residential ☐ Commercial

Water Supply: ☒ Well ☐ Cistern ☐ Municipal Potential Number of Bedrooms: 3

Has a Conditional Acceptance Document been issued for this property: ☐ Yes ☒ No ☐ Unsure

Owner Information: ☐ Primary Contact

Owner: _____ Daytime Phone: _____

Owners Mailing Address: _____

Email Address: _____ Fax #: _____

General Contractor: _____ Phone/Email: _____

OWTS Installer Information: ☒ Primary Contact

System Installer: Bugenbogen Excavating Daytime Phone: 719 355-0082

Email Address: thesepth2specialist@gmail.com Licensed installer: ☐ Tier 1 ☒ Tier 2

All engineer-design systems must be installed by a Tier 2 licensed installer

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

All payments are due at the time of application submittal; by cash, check or major credit card (Visa / MC)

☐ **New Permit:** \$750.00 (EPCPH Charge) + \$147.00 (EPC Planning Dept. Surcharge) + \$23.00 (CDPHE Surcharge) = \$920.00

☒ **Major Repair Permit:** \$535.00 (EPCPH Charge) + \$23.00 (CDPHE Surcharge) = \$558.00

☐ **Minor Repair Permit:** \$245.00 (EPCPH Charge) + \$23.00 (CDPHE Surcharge) = \$268.00

Permits expire one year from date of issuance, unless otherwise noted

REQUIRED: Provide a complete written scope of work to be performed on the property.

Install new 2250 gallon tank and pump tank. Install new STA
according to design document and all County Regulations.

The following documents MUST be included with your application.

- A soils report including at least 1 soil profile excavation pit, in accordance with section 8.5 A-F of OWTS regulations
- A clear and legible design document including the proposed and alternate locations, as well as system layout, labeled with all setbacks to pertinent structures and features in table 7-1.
- Provide directions to property, from a main highway, on the back side of application.

Failure to provide the above listed documents may result in denial of the permit application

I certify that the information provided on this application is in compliance with Section 8.3, Chapter 8 of the On-site 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.

Applicant Signature: [Signature] Date: 10/1/18

Neil

- Property address or lot number must be clearly marked and visible from the road.
- Profile excavation test pit and/or soil profile holes must be clearly marked
- Proposed and alternate soil treatment areas must be protected from compaction and disturbance
- Locked gates require the gate code or lock combination be provided on front of application
- Please provide directions to the property from a main highway, by text or picture, below.

East on Woodman Rd. North on Black Forest Rd. East on
Vollmer Rd. East on Burgess Rd. South on Raygor Rd. East
on Flaming Sun Dr. to address 9750

Failure to comply with the above information may result in an additional charge for a return trip.

Permit #:	Site Inspection date: <u>10/10/2018</u>
Date Approvals Rcvd: Development Services: _____	Floodplain/enumerations: <u> </u>
Design: <input type="checkbox"/> Conventional <input type="checkbox"/> Engineer	Design Engineer: <u>7/17/18 Russ Engineering</u>
Engineer Job #: <u>18-230</u>	Engineer Date Stamped: <u>7/17/18</u>
LTAR/Soil Type: <u>020/4</u>	Groundwater: <u> </u> PP1/ <u> </u> PP2 Bedrock: <u> </u> PP1/ <u> </u> PP2
Minimum Requirements: Tank Capacity: <u>2000</u>	Soil Treatment Area: <u>2,498</u>
System Feed: <input type="checkbox"/> Gravity <input type="checkbox"/> Pump to Gravity <input checked="" type="checkbox"/> Pressure Dosed <input type="checkbox"/> Other: _____	
System Media: <input checked="" type="checkbox"/> Chambers <input type="checkbox"/> Rock and Pipe <input type="checkbox"/> Other	Soil Treatment Area: <input checked="" type="checkbox"/> Trenches <input type="checkbox"/> Bed
Additional Comments: _____	
E.H. Specialist: <u>Neil Meyer</u> Date: <u>10/16/18</u> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	