

#5227002016

EL PASO COUNTY HEALTH DEPARTMENT
COLORADO SPRINGS, COLORADO#1122 ^{DE}
P

SEWAGE DISPOSAL INSPECTION FORM

APPROVAL:

YES ☒ NO ☐

DATE 6/22/81

ENVIRONMENTALIST

Krueger

LOCATION (street number) 9620 Tomahawk Tr. OCCUPANT

LEGAL DESCRIPTION Lot 1415 Block 1 Indian Wells #1

TYPE OF CONSTRUCTION Dwelling NO. OF BEDROOMS 4

SYSTEM INSTALLED BY

COMMERCIAL MFG. yes SIZE 1500

TYPE OF MATERIAL concrete NO. COMPARTMENTS 2

WIDTH LENGTH DEPTH (total) LIQ. CAP.

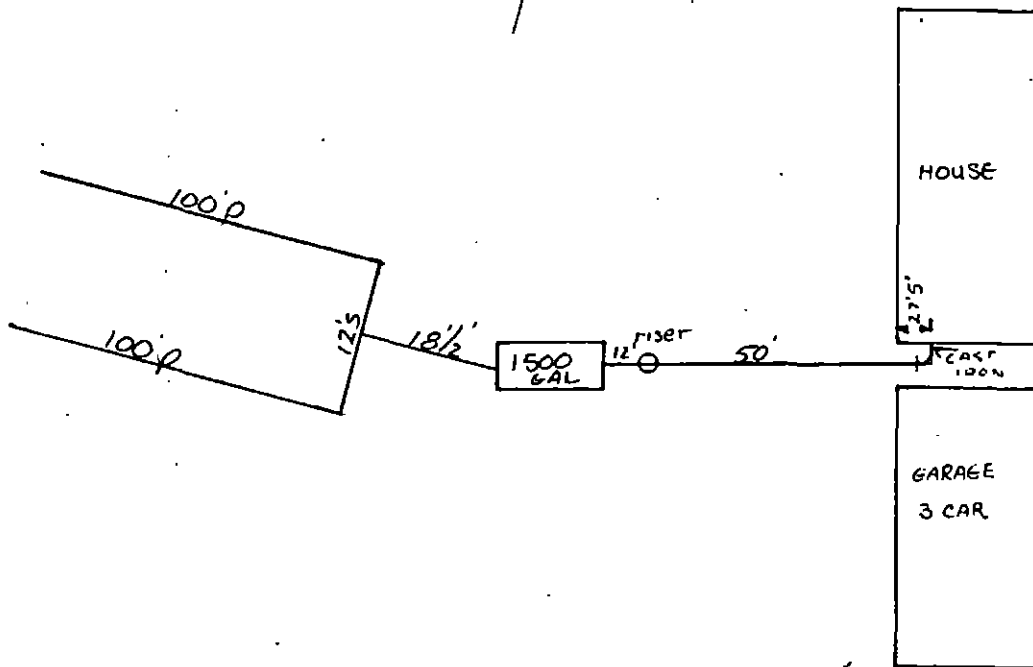
DISPOSAL FIELD: BED OR TRENCH DEPTH 30'-36" WIDTH 36" LENGTH 200' SQ. FT. 600

DISTANCE BETWEEN LINES 12' ROCK river DEPTH 12" UNDER 6" OVER 2"

LEACHING PITS (NO.) LINING MATERIAL CAPACITY SQ. FT.

NORTH

WELL



Acres 5

EL PASO COUNTY • COUNTY HEALTH DEPARTMENT
501 North Foote Avenue • Colorado Springs, Colorado • 475-8240

Black Forest
1122
Receipt No. 2857

Water Supply Well

PERMIT

TO CONSTRUCT, ALTER, REPAIR OR MODIFY AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM

Issued To James A. & Sharon M. Lightfoot Date March 31, 1981

Address of Property 9620 Tomahawk Trail, Lot 14, Block 1, Indian Wells Sub, Filing #1
(Permit valid at this address only) Black Forest, CO.

Sewage-Disposal System work to be performed by T & C Exc. Phone _____

This Permit is issued in accordance with 25-10-106 Colorado Revised Statutes 1973, as amended. PERMIT EXPIRES upon completion-installation of sewage-disposal system or at the end of six (6) months from date of issue - whichever occurs first - (unless work is in progress).

- This Permit does not denote approval of zoning and acreage requirements. -

Permit Fee 7500
550100L
September 31, 1981

Alan B. [Signature]
Director, City-County Health Department
Michael [Signature]
Environmentalist

NOTE: LEAVE ENTIRE SEWAGE-DISPOSAL SYSTEM UNCOVERED FOR FINAL INSPECTION.

576 Sq. Ft.

24-HOUR ADVANCE NOTICE REQUIRED

Septic tank	<u>1500</u> gals.	Field	<u>288</u>	Feet of trench	<u>24</u> inches wide
		OR. Field	<u>192</u>	Feet of trench	<u>24</u> inches wide
Seepage bed	_____ ft. long	_____ ft. wide.	Seepage pit	_____ sq. ft.	_____ diam. _____ w/d

The Health Officer 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.

Date March 24, 81

EL PASO COUNTY, HEALTH DEPARTMENT
501 NORTH FOOTE AVENUE
COLORADO SPRINGS, COLORADO
636-0125

Application for permit to construct, Remodel, or Install a Sewage Disposal System.

Name of Owner James A. & Sharon M. Lightfoot Phone 597-2128

Address of Property 9620 TUNAWALK TRAIL

Legal Description of Property LOT #14 BLK1 INDIAN WELLS SUB FIL. #1

Owner's Address (if different) 2318 SAN MARCOS Phone 597-2128

Systems Contractor T.C. E.C. Address _____

Type of Construction CIRC TANK ~~4000 GALL~~ source and type of water supply WELL

Size of Lot 5 ACRE

The construction of the Sewage Disposal System will comply with all applicable Laws, Ordinances, Standards or Resolutions.

HEALTH DEPARTMENT USE ONLY

Permit Number _____ Receipt Number _____

Number of Bedrooms 4 Tank Capacity 1500 gallons Absorption area 576 Sq. Ft.

Remarks Appears OK to south of house - pending percolation test; trenches must not be deeper than 36"

APPLICATION IS

(☒) APPROVED

() DENIED

288' x 24'
192' x 36'

ENVIRONMENTALIST

Krueger

DATE 3/26

1981

PLOT PLAN WILL INCLUDE THE FOLLOWING

Plot plan may be drawn on the back of this sheet or on a separate sheet.

1. Streams, Lakes, Ponds, Irrigation Ditches and other Water Courses
2. North Direction
3. Location of Property Line
4. Buildings
5. Wells
6. Location of Proposed Septic System
7. Location of percolation test
8. Geographical features
9. Other Information as required

288
2 576
4
17
16
192
3 576
3
27

NORTH →

