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EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT  
INDIVIDUAL SEWAGE DISPOSAL SYSTEM INSPECTION REPORT

Permit Number: ON0002694

Date: April 27, 2001

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APPROVED: YES

ENVIRONMENTALIST:

*Minger Glenn*

Address: 9576 Cairngorm Way  
Legal Description: Lot 10, Highland Park  
Owner: Anthony Homes  
System Contractor: Kunau Drilling

Residential system for bedrooms.  
For use with clothes washer and garbage disposal.

**SEPTIC TANK**

Commercial tank constructed of precast concrete.

Capacity: Tank A 1250 gallons; Tank B 1250 gallons.

**DISPOSAL FIELD SYSTEM DESIGN**

By Engineer: Yes; Name of Design Engineer: Colorado Engineering Geotechnical Group.  
Approval Letter Provided: Yes / No.

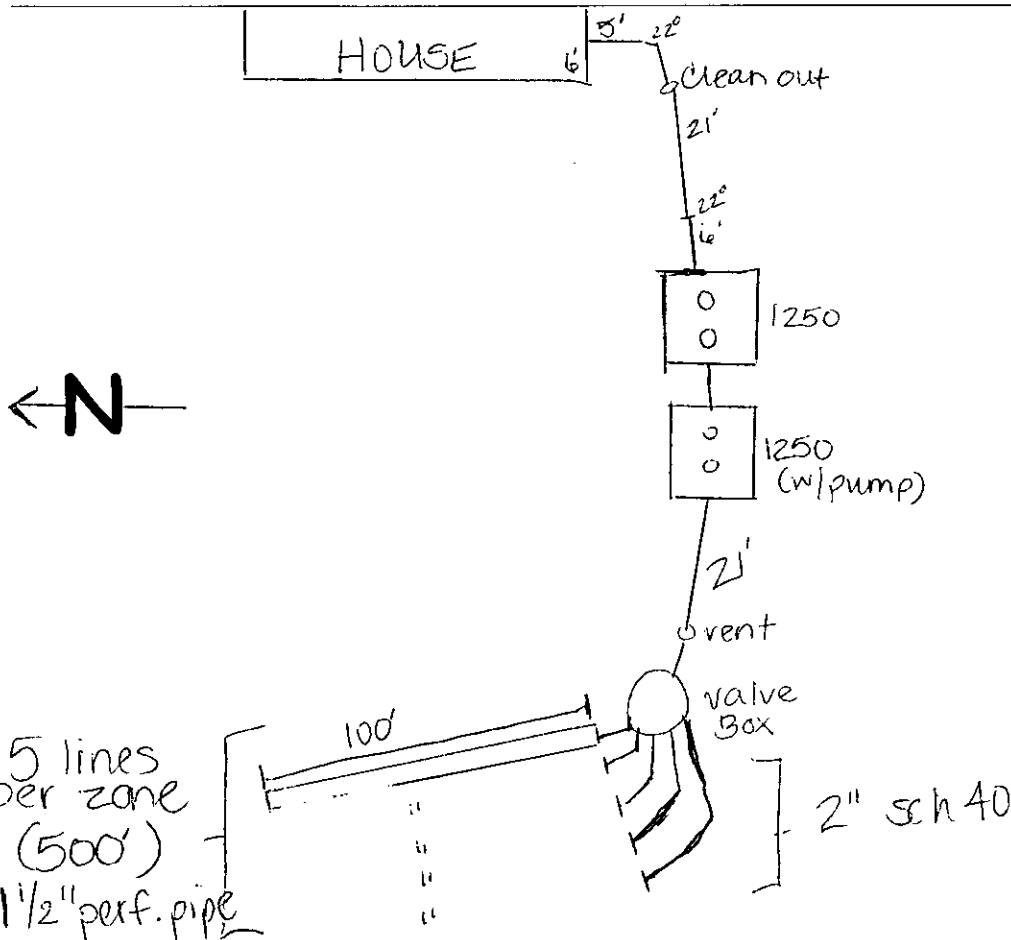
**WATER SUPPLY**

Private Water Supply. ~~Proposed~~ Installed well is  $\geq 50$  ft. from tank, and  $\geq 100$  ft. from leach field.

Approval shall be revoked if, in the future, minimum horizontal distances are not maintained.

NOTES: Drawing is not to scale.

⊗ well



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EL PASO COUNTY  
DEPARTMENT OF HEALTH AND ENVIRONMENT  
301 S Union Blvd, Colorado Springs, Colorado 719-578-3126

INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT

WATER SOURCE: WELL  
OWNER NAME: ANTHONY HOMES  
ADDRESS: 9576 CAIRNGORM WAY  
CITY, STATE, ZIP: COLORADO SPRINGS CO 80908

PERMIT NUMBER: ON0002694  
DATE PERMITTED: 4/6/01  
PHONE NUMBER: 7194953005

INSTALLED BY: KUNAU [Kunau Drilling]

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.**

*John Dower*

DIRECTOR, EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT

*Dinger Glenn / 578-3289*  
ENVIRONMENTALIST / PHONE NUMBER

PERMIT EXPIRATION DATE :  
Expires twelve months from date of issue

NOTE: LEAVE THE ENTIRE SEWAGE DISPOSAL SYSTEM UNCOVERED FOR FINAL INSPECTION, 48 HOUR ADVANCE NOTICE REQUIRED.

MINIMUM SEPTIC TANK SIZE P/E Design GALLONS      MINIMUM ABSORPTION AREA REQUIRED P/E Design SQ FT

PLANNING DEPARTMENT  ENUMERATION  FLOOD PLAIN  WASTEWATER

COMMENTS:

SEPTIC SYSTEM SHALL BE INSTALLED PER P.E. DESIGN IN ACCORDANCE WITH COUNTY I.S.D.S. REGULATIONS.  
AN APPROVAL LETTER IS REQUIRED WITHIN TWO WEEKS OF FINAL INSPECTION.

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.

called 4-9-01 Bm

Inspector

Glenn

Record I.D.

2694

**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  P.E. DESIGN Harvey

Owner ANTHONY HOMES Daytime Phone 495-3005

Address of Property 9576 CAIRO GORM WAY City & Zip CO. SPRS, CO 80908

Legal Description LOT 10, HIGHLAND PARK FILING #1

Tax Schedule # 2293-01-010 Lot Size 2.501A Septic Contractor KUNAK

Inside City Limits  No  Yes-City \_\_\_\_\_ Water Supply  Well or Spring  Cistern  Public

Type of Building  Frame  Modular  Mobile  Commercial  Manufactured  Other \_\_\_\_\_

Owner's MAILING Address 6355 BURROWS RD. City, State & Zip CO. SPRS, CO 80908

MAIL PERMIT OR  PICK UP PERMIT  THERE IS AN ADDITIONAL RESIDENCE ON THIS PROPERTY

MAXIMUM POTENTIAL BEDROOMS 4

Percolation Test Attached  N Garbage Disposal  N Basement  N Clothes 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 [Signature] Date 12/14/00

DEPARTMENT OF HEALTH USE ONLY

955 ft<sup>2</sup> Minimum Absorption Area      1,500 gallons Minimum Tank Capacity      December 20, 2000 Date of Site Inspection

REMARKS \_\_\_\_\_

- System must be installed in accordance with El Paso County Rules and Regulations governing ISDS.

- Maintain all appropriate setbacks and proper distances.

A bed system should have 41 chambers and a trench system should have 38 chambers.

EHS INSPECTOR Glenn DATE 12/21/00  APPROVED  DENIED

FEE AS OF 8/1/00: NEW \$315 -  
REPAIR TO LEACH FIELD \$150 -  
REPAIR TO TANK OR LINE \$75 -  
DATE TO PLANNING / WASTEWATER 12/19/00

- 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 ½ 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.
 

___ Well(s)	___ Adjacent property well(s)	___ Subsoil drain
___ Cistern	___ Water line	
- 4) Initial any of the following that are within 100 feet of your proposed septic system and include on your plot plan.
 

___ Spring(s)	___ Lake(s)
___ Pond(s)	___ Stream(s)
___ Dry Gulch(es)	___ 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

