

## INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT

OWNER NAME: ROGELIO GALINDO  
ADDRESS: 19875 EL VALLE VIEW RT 3  
CITY, STATE, ZIP: PUEBLO  
INSTALLED BY:

Tax # 5733001007  
CO 81008

PERMIT NUMBER: ON0002661

DATE PERMITTED: 10/15/01

PHONE NUMBER 7195619949

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.**

*Jisha Dower*

DIRECTOR, EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT

PERMIT EXPIRATION DATE:

Expires twelve months from date of issue

*David Buff* 578-3143

ENVIRONMENTALIST / PHONE NUMBER

NOTE: 48 HOUR ADVANCE NOTICE REQUIRED

LEAVE THE ENTIRE SEWAGE DISPOSAL SYSTEM UNCOVERED FOR FINAL INSPECTION.

WATER SOURCE: PUBLIC

MINIMUM SEPTIC TANK SIZE: 1,250 GALLONS

MINIMUM ABSORPTION AREA REQUIRED 567 SQ FT

PLANNING DEPARTMENT

ENUMERATION

FLOOD PLAIN

WASTEWATER

COMMENTS:

INSTALL LEACH FIELD AT A DEPTH OF 3' YES.

Phone # disconnected

Property has a mobile home, could not see any evidence of an OWS installed, 8/8/01 but there could be one there.

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: 10/8/01 Called *Bm* Mailed

Final Inspection Requested: BY: Date Called In:

Phone # Septic Site will be ready:

*10/9*



Inspector

Jim

Record I.D.

2661

762

## 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

Owner Rogelia Galindo Daytime Phone Norm (719) 778-0667  
 Address of Property 19845 El Valle View Rd 3 City & Zip Pueblo, Co. 81008  
 Legal Description Lot 16 Valerosa Village Filing No. 1  
 Tax Schedule # 57330-01-007 Lot Size 5 Acres Septic Contractor \_\_\_\_\_  
 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 1002 Benlah St City, State & Zip Pueblo Co 81004  
☐ MAIL PERMIT OR ☒ PICK UP PERMIT ☐ THERE IS AN ADDITIONAL RESIDENCE ON THIS PROPERTY

MAXIMUM POTENTIAL BEDROOMS 3Percolation Test Attached ☒ NGarbage Disposal Y ☒Basement Y ☒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

Rogelia GalindoDate 12-4-00

## DEPARTMENT OF HEALTH USE ONLY

Minimum Absorption Area

567

Minimum Tank Capacity

1250

Date of Site Inspection

12/5/01 10/15/01

REMARKS

Install leachfield at a depth of 34 inches.  
in area of new perc test

EHS INSPECTOR

[Signature]

DATE

12/5/01

APPROVED

DENIED

FEE NO FEE

DATE TO PLANNING / WASTEWATER

12/5/00



- 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 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.
- |             |                               |                   |
|-------------|-------------------------------|-------------------|
| ___ Well(s) | ___ Adjacent property well(s) | ___ Subsoil drain |
| ___ Cistern | <u>RS</u> 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)                  |
| <u>RS</u> 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

I 25 South to exit 119 go west 1/2 mile turn left on Roton Hgts. 1 mile or so first right on Indian Village Hgts about 2 mile left on armadillo Hgts. 1/2 mile turn left on El Valle View - 1/2 mile about lot 16