

3	DEPARTMENT	L PASO COUNTY OF HEALTH AND ENVIRONMENT rado Spŕings, Colorado 719-578-3126	
INDIVI	DUAL SEWAG	E DISPOSAL SYSTEM PI	CRMIT 👷
system or at the end of twelve (12) ruont are issued for the same property and cou the same ame as the building permit. Th Sewage disposal system to be installed b	N (J & K EXCAVATIN 25-10-107 Colorado Revi hs from date of issue- which istruction has not commen is permit is revokable if al y an El Paso County Licer	IG) ised Statues. PERMIT EXPIRES upon con chever occurs first-(unless work is in progr	ess). If both a building and an ISDS permit ding permit, the ISDS permit shall expire at per.
PERMIT FEE(NON REFUNDABLE) New Permit\$ 300.00 ISDS Repair -\$ 50.00 Voided/Altered permit\$ 25.00 PERMIT EXPIRATION DATE : Expires twelve months from date NOTE: LEAVE THE ENTIRE SEWAGE DIS	DIRECTO of issue	R, EL PASO COUNTY DEPARTMENT O	78 - <u>3132</u> F / PHONE NUMBER
MINIMUM SEPTIC TANK SIZE : Planning department	2,000 GALLONS	MINIMUM ABSORPTION AREA	REQUIRED 2,555 SQ FT WASTEWATER
COMMENTS: MUST KEEP AT LEAST 53 REGULATIONS.	FEET FROM DRY W	ASH ON PROPERTY. MEET ALL	APPLICABLE I.S.D.S.
{T - 99} B - 1085			
The Health Office shall assume no re with the property owner or represent inspections as are necessary to determ	ative. Free access to the prope	e or imdequacy of a sewage-disposal system, be erty shall be authorized at reasonable time for the ments of this law.	yond consulting in good faith re purpose of making such

CALLED They

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EL PASO COUNTY ENVIRONMENTAL HEALTH SERVICES 301 South Union Boulevard Colorado Springs, CO 80910-3123			
APPLICATION FOR A NEW, REMODEL, REPAIR, OR ADDITION			
TO AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM			
Owner Ray O'Mara Phone 527-6180 Address of Property 15430 Raton Rd Legal Description Lot 2 Block 2			
Tax Schedule Number 6133001039 Lot Size 5 acres Source of Water Supply Well			
Type of Building by Use Festdence Septic Contractor and Phone # J = KEXawating 4812417			
Owner's Mailing Address POBOX 15946 COLO Spgs MAXIMUM POTENTIAL BEDROOMS (0			
Basement (Y) N Percolation Test Attached (Y) N Garbage Disposal (Y) N Clothes Washer (Y) 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 a 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. 10-25-101 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 Rey O'Man Date 5-8-00			
outside city limits / pick up permit			
DEPARTMENT OF HEALTH USE ONLY			
1883* 2000 5/12/00			
Absorption Area Tank Capacity Date of Site Inspection			
REMARKS: MUST KEEP \$ 53 FROM DRY WASH ON PROPERTY			
HEET ALL APPLICABLE ISDS REGS. MAY BE DIFFICULT TO			
INSTALL LEACH FIELD IN PERC LOCATION & MEET DISTANCE			
TO DRY WASH.			
NEW PERC TEST 6/10/00 OK GLK			
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EHS INSPECTOR AULEULA DENIED DENIED			
EHS INSPECTOR AUGU Date 5/12/00 APPROVED DENIED			

DRY MASH FHROMEH. PROV

require the ORIGINAL of your percolation (PERC) TEST. he following information must be on your PLOT PLAN. EL PASO COUNTY HEALTH ENU HLTHXAIR QUALITY Property dimensions (719) 525-8636 search system site Designated alternate septic system site -----Adjacent property well(s) Build: 0 31 Proposed building(s) water line Cistern DATE OF 11:300 ' THUS) \$300.00 priv of these are within 100 feet of your proposed septic system NEW SEPTIC include on your plot plan \$300.00 SUBTOTAL \$300.00 TOTAL none Lake(s) CHECK' \$300.00 Stream(s) TIME THE SUL SULMAN Natural drainage course(s) REALITY AND PERC HOLES MUST BE CLEARLY MARKED OR POSTED GIVE COMPLETE DIRECTIONS TO THE PROPERTY FROM A MAIN HIGHWAY 1-25 North to Baptist Rd. go East to Roller Coaster Rd. turn right (south) on Stella Rd. 1st left is Raton 2nd lot on right