

APPROVED: YES ☒ NO ☐

ENVIRONMENTALIST KRUEGER

Address 12675 ABERT WAY

Owner GOLD CREST HOMES, LTD

Legal Description LOT 18 ABERT ESTATES

Residence ☒, # of bedrooms 5; Commercial ☐; System Installer KUNALL

**SEPTIC TANK:**

Commercial ☒; Noncommercial ☐, L ☐, W ☐, WD ☐  
Construction Material CONCRETE, capacity 2250 gallons.

**DISPOSAL FIELD:**

**Rock Systems:**

Trench: depth ☐, width ☐, total length ☐, sq. feet ☐

Bed: depth ☐, length ☐, width ☐, sq. feet ☐

Rock type ☐, depth ☐, under PVC ☐, over PVC ☐

Seepage Pits: # of pits ☐, total # of rings ☐, working depth(s) ☐

size of pit(s) L X W ☐, lining material ☐, total sq. feet ☐

**Rockless Systems:**

Chamber: Type INFILTRATOR, number of chambers 72, bed ☐, trench ☒

sq. ft./section 15.5, reduction allowed 17.7%, sq. ft. required 1357

total sq. ft. installed 1356<sup>+</sup>, depth of installation 48"

Engineer Design (Y) or N, Designing Engineer MICHAEL GACKLE / RMG

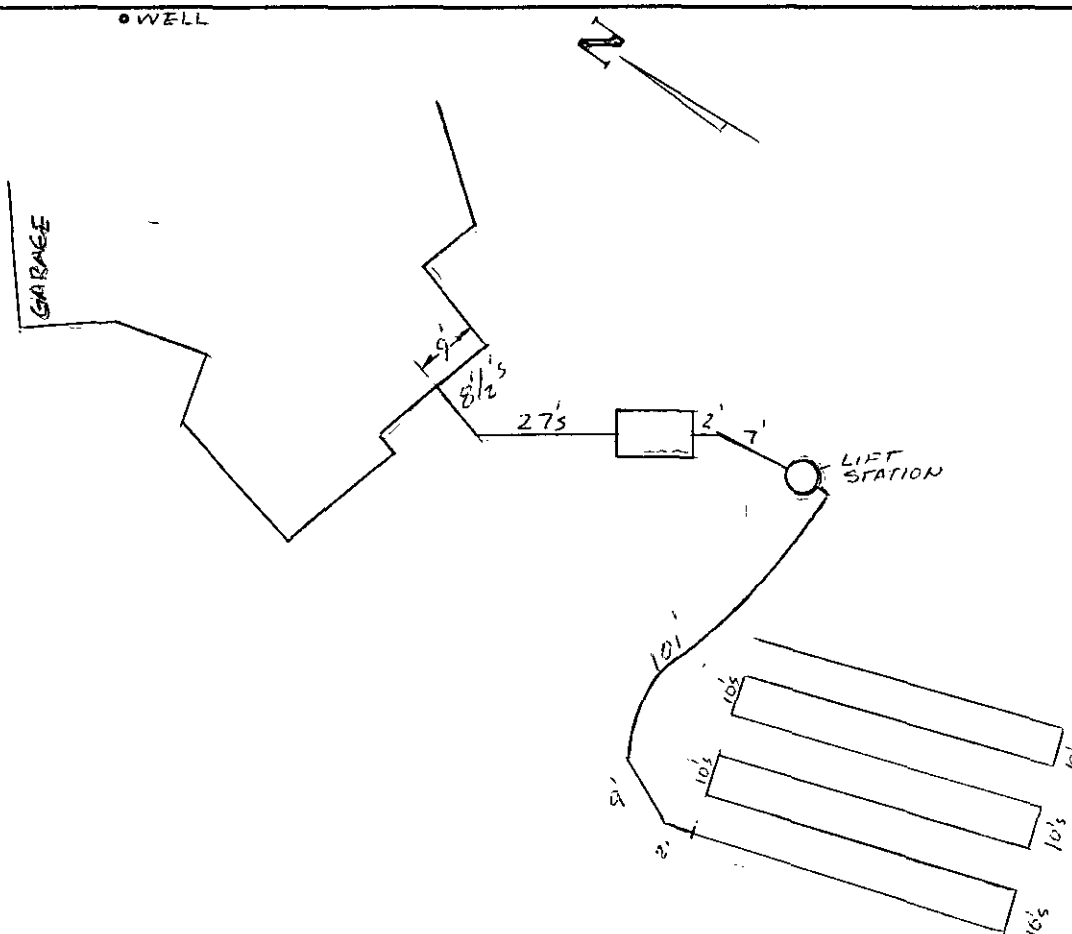
Approval letter provided? (Y) or N

Well 50 feet from tank (Y) or N 100 feet from leach field (Y) or N

Well installed at time of septic system inspection (Y) or N Public Water ☐

\*Approval will be revoked if in the future the well is found to be within 50 feet of the septic tank and/or 100 feet of the disposal field.

NOTES: \* PE SIZING + DEPTH RECOMMENDATION



Acres 5 **EL PASO COUNTY • DEPARTMENT OF HEALTH AND ENVIRONMENT**

301 South Union Blvd. • Colorado Springs, Colorado • 578-3125

Water Supply h

Permit 12409

**PERMIT**

**TO CONSTRUCT, ALTER, REPAIR OR MODIFY ANY INDIVIDUAL SEWAGE DISPOSAL SYSTEM**

Receipt No. **PAID**

Issued to **GOLD CREST HOMES, LTD.**

Date **8-18-98**

Address of Property **12675 ABERT WAY, LOT 18, ABERT ESTATES**

Phone **260-8930**

(Permit valid at this address only)

Sewage-Disposal System work to be performed by **KUNAU**

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 twelve (12) months from date of issue- whichever occurs first-(unless work is in progress). This permit is revokable if all stated requirements are not met.

**-THIS PERMIT DOES NOT DENOTE APPROVAL OF ZONING AND ACREAGE REQUIREMENTS-**

**PAID 6/22/98**

Permit No. 12409 is void.

PERMIT FEE (NOT REFUNDABLE)

**Steven J. Englander, M.D.**  
DIRECTOR, DEPARTMENT OF HEALTH AND ENVIRONMENT

**8-18-99**

DATE OF EXPIRATION

**KUNAU**  
ENVIRONMENTALIST

**578-3132**

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

SEPTIC TANK:	TRENCH SYSTEM:	BED SYSTEM:	SEEPAGE PIT SYSTEM:
total square feet <b>1750</b>	total square feet <b>1357</b>		total square feet
_____ gallons	_____ ft. of trench _____ inches wide		
	_____ ft. of trench _____ inches wide	total square feet	rings or _____ diam.x _____ w/d

**NOTES:** Leach field to be at least 50 feet from edge of drainage gulch on property. Leach field to be at least, or greater than, 110 feet from all walls. Meet all applicable ISDS regulations. Ok per P.E. letter (see attached). Follow P.E. sizing and recommendations for depth. P.E. to certify installation and submit approval letter to Health Dept. 72 chambers.

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.