

ON-SITE WASTEWATER SYSTEM INSPECTION FORM

PERMIT # 0031901

6214000039

DATE 10/19/2012

APPROVED YES ☒ NO ☐ Environmental Health Specialist: Chuck Cousino, REHS
Address: 4515 Leprechaun Ln., Co. Springs, Co. Owner Charlotte Jonker

Legal Description: See attached document

Residence X #Bedrooms 4 Commercial System Installer Kunau

SEPTIC TANK: Construction Material Concrete (existing tank abandoned) Capacity Gallon 2250 gal.

DISPOSAL FIELD:

Trench: Depth (Range) Width Total Length Sq. Ft.

Bed: Depth (Range) Width Total Length Sq. Ft.

Depth of Rock Under PVC Type of cover on Rock

DRYWELLS: # of Pits Rings(Pit 1) Rings(Pit2) Working Depth #1 #2

Size (L x W) #1 #2 Total Sq. Ft.

ROCKLESS SYSTEMS: Standard Chamber Low Profile Chamber X High Profile Chamber

Type (Mfgr.) Inf., Quick 4 Plus; Low #Chambers 87 Sq. Ft./Chamber 10 Bed X Trench Depth (Range) 12"-18"

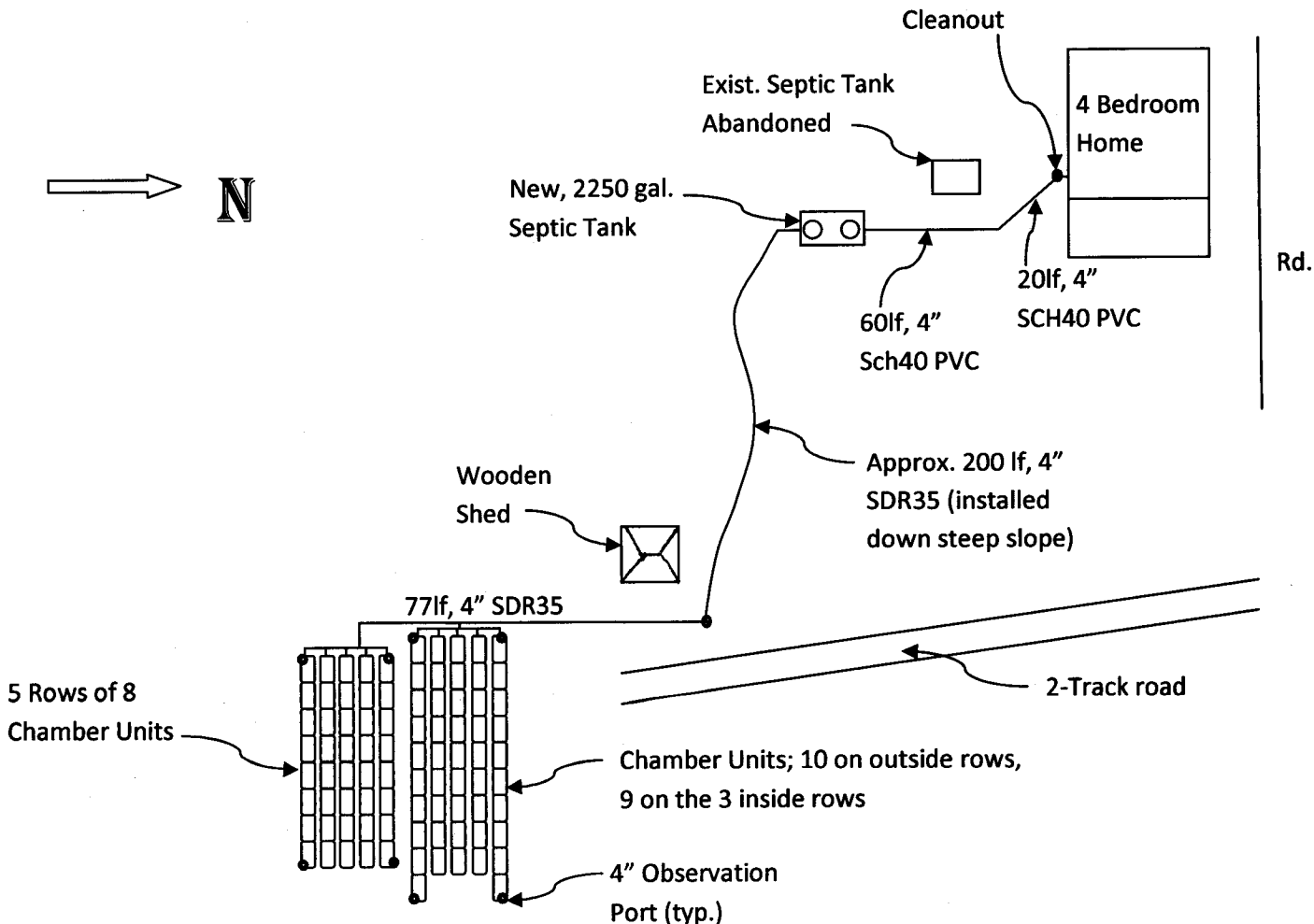
Reduction Allowed 25 % Sq. Ft. Required 1152 Sq. Ft. Installed 870 Equiv. Sq. Ft. Installed with Reduction 1160

Engineer Design: Y ☐ N ☒ Engineering Firm N/A Approval Letter Provided: Y ☐ N ☐

Well installed at time of septic inspection: Y ☒ N ☐ Public Water: Y ☐ N ☐

*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:



EL PASO COUNTY PUBLIC HEALTH
ENVIRONMENTAL HEALTH DIVISION
1675 W. Garden of the Gods Road, Suite 2044, Colorado Springs, Colorado 80907 719-578-3195
ONSITE WASTEWATER SYSTEM PERMIT

COPY

OWNER NAME: CHARLOTTE JONKER PERMIT NUMBER: 0031901
ADDRESS: 4515 LEPRECHAUN LN
CITY, STATE, ZIP: COLORADO SPRINGS, CO 80908 DATE PERMITTED: 07/27/2012
PHONE NUMBER: (719) 323-1436 (Home Phone)

This permit is issued in accordance with 25-10-207 Colorado Revised Statutes. The PERMIT EXPIRES upon completion/installation of the 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 Permit and an Onsite Wastewater System Permit are issued for the same property and construction has not commenced prior to the expiration date of the Building Permit, the Onsite Wastewater 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.

PERMIT EXPIRATION DATE: 07/27/2013

Expires twelve months from date of issue

WATER SOURCE:

MINIMUM SEPTIC TANK SIZE: 1500 GALLONS MINIMUM ABSORPTION AREA REQUIRED 1152 SQ FT

PLANNING DEPARTMENT ☒ ENUMERATION ☒ FLOOD PLAIN ☒ WASTEWATER ☐

COMMENTS:

* FOR INSPECTIONS CALL 719-575-8699 BEFORE 8:30 A.M. OF THE DAY TO BE INSPECTED.
(WEEKENDS & HOLIDAYS EXCLUDED)
LEAVE THE ENTIRE SEWAGE DISPOSAL SYSTEM UNCOVERED FOR FINAL INSPECTION

INSTALL SYSTEM IN PROPOSED AREA. SHALLOW (2 FEET DEEP), NARROW (3 - 12 FEET WIDE) TRENCHES OR BEDS PREFERRED. OWNER MUST DIVERT DRAINAGE AWAY FROM SOIL TREATMENT AREA (LEACH FIELD).

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 ADMINISTRATOR USE ONLY

Permit Ready:

Called

Mailed

Final Inspection Requested:

BY: Jeremy Kuhnua

Date Called In: 10/18/12 - 5:09 pm

Phone # 306-7549

Septic Site will be ready: mid-day - Noon

439-6362

Call before going

8/8/12 -
Called 323-1436
Owner w/ be by pick
up this week. JKH