#7104004015	1
EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT Permit # 10030463 INDIVIDUAL SEWAGE DISPOSAL SYSTEM INSPECTION FORM Date 12/8/1/10	
	143
APPROVED: Yes No Tank too small Environmental Health Specialist: Sarah Robbin	
Address 19515 Belatrix Or Monument CO 90132 Owner Minu Ternus Legal Description Tract 107 Colo Estates Sub 3 Residence # Bedrooms # Commercial System Installer Tak Excavating	
Residence # Bedrooms # Commercial System Installer To K Excounting SEPTIC TANK:	
Commercial Noncommercial Construction Material Concrete Capacity Gallon 1250 DISPOSAL FIELD:	
Trench: Denth (Range) Width Total Length Sa Et	
Bed: Depth (Range) Length Width Sq. Ft. Depth of Rock Under PVC Type of cover on Rock DRYWELLS: # of Pits Rings (Pit 1) Rings (Pit 2) Working Depth #1 #2 Size (L x W) #1 #2 Total Sq. Ft.	
Size (L x W) #1 #2 Total Sq. Ft. ROCKLESS SYSTEMS:	
ROCKLESS SYSTEMS: Standard Chamber: Type 1. Known Arc. 36 #Chambers 44 Pt. Sq. Ft./Chamber 84 X Trench Bed X/X Trench Bed X/X Trench Bed Trench Reduction Allowed 50 0 % Sq. Ft. Required 505/539 Depth (Range) 31/32-48 relax PSq. Ft. Installed 2625/5405 Equivalent Sq. Ft. Installed with Reduction 525/5405	
Reduction Allowed 50 0 % Sq. Ft. Required 505/539 Depth (Range) 31/32-481040 Sq. Ft. Installed 2625/5405 Equivalent Sq. Ft. Installed with Reduction 525/5405	
Approval letter provided? Y N	
Well installed at time of septic system inspection? (Y) N Public Water?	
disposal field.	
NOTES: The leach field addition is approved however system approval cannot be given due to the undersized tank at this time SR 12/21/10	
Blue = New House	
Black Not obs	
3 150	
nation 1 250 instank	
deep no 10 units - 28 St p 40 00 in extention	
15' 9 units - 28' 51 0 40 00' 52"	
15) quaits Canits o quaits	,
36°00 32°00 \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	\langle
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EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT 301 S Union Blvd, Colorado Springs, Colorado 719-575-8635 ONSITE WASTE WATER SYSTEM PERMIT

OWNER NAME:	MINA TER	NUS	PERMIT NU	MBER:	0030483	
ADDRESS:	19515 BEL	ATRIX DR				
CITY, STATE, ZIP:	MONÙMEI	NT, CO 80132	DATE PERN	AITTED:	11/16/2010	
PHONE NUMBER:		420 (Home Phone)				
		,				
				(DDG	4	
This permit is issued in ac	cordance with 2	25-10-207 Colorado Revised	Statues. PERMIT EXP	IRES upon cor	npletion-installat	ion of
sewage-disposal system o	r at the end of two	welve (12) months from date sued for the same property a	e of issue - willchever oc and revokable if all stated	curs mst -tum Lrequirements	ess work is in pro	igress). II
Sewage disnosal system to	o he installed by	an El Paso County License	d System Contractor or t	the property of	vner.	
oowago araposar system t	o oo maanee oj	an Bridge County Browns		۲ ۲ 3		
THIS PERMIT DO	ES NOT DE	NOTE APPROVAL O	F ZONING AND A	CREAGE	REOUIREM	ENTS.
					L	
PERMIT EXPIRATION	л патр. — 11/	/16/2011				
Expires twelve months fa			\mathcal{O}	10 711		
Expires twelve months in	rom nam or 1990	uc	16	L Ma glio	ru	1
WATED SOUDCE.	Woll on Can	ain c	11/	alia	F	
WATER SOURCE:	Well or Spr	ring	11/1	3110		
MINIMITM CEDTIC TA	NIZ	MI	NIMUM ABSORPTIO	NADEA		
MINIMUM SEPTIC TA SIZE:	1500		NIMOWI ABSORPTIO QUIRED	NAKEA	N/A	SQ FT
312.5		KL	QUIKED			
PLANNING			FLOOD	g		
DEPARTMENT	Î	ENUMERATION	PLAIN		WASTEWATI	ERI_
COMMENTS:						
	* FOR INSPECT	TONS CALL 719-575-8699 BEFOR		O BE INSPECTE	<u>0.</u>	
	LEAVE THE EN	<u>(W</u> EEK <u>ENDS & HO</u> LI NTIRE SEWAGE DISP <u>OSAL SYS</u>		AL INSPECTION	N	
	<u> </u>				_	
		EA THAT THE PERCOLAT				
AWAY FROM EXISTIN	NG SYSTEM, A	NY AMOUNT MAY BE AI	ODED TO THE EXISTING	NG LEACH FI	ELD. IF A DIVE	RTER
PEDROOM WAS ADD	INIMUM ADDI	TION OF 539 SQUARE FE DUSE; THEREFORE THE T	CANK SHALL BE INCRI	I NO REDUC	HON, AN ADDL (1250/EXISTING	HONAL 3) TO 1500
		BE MAINTAINED, INCLUD				
AND 100 FEET FROM		L 1111 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11(0,501,1,01,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1		11101/11111	** * ********************************
The Health Office sh	hall assume no respon	nsibility in case of failure or inadequa	cy of a sewage-disposal system,	beyond consulting	in good faith with the	
property owner or re	presentative. Free acc	cess to the property shall be authorize requirements of this law.	ed at reasonable time for the purp	oose of making sucl	inspections as are	
necessary to determ	ne compnance with 1	equitements of this law.				
, , , , , , , , , , , , , , , , , , , 		FOR ADMINISTRA	ATOR USE ONLY			-
Permit Ready:		Colled	Mailed 11/01/15	Ω xO		
remnt Ready:		Called BY: John/J+KExce	avortina	ya		
Final Inspection Requ	ested:	BY: Opini OF N Exce	Avating Date Called In: 7 home Septic Site will be	,		
		Phone # 481-241	7 home. Septic Site will be	ready:	n /	
		· ·	- · •	, , ,	U	

Jung 12.56

331- 4321 cell

John said homeowner does not have funds to upsize the existing septic fork new but intends to do so leter date.



EL PASO COUNTY DEPARTMENT OF HEALTH & ENVIRONMENT

301 South Union Boulevard • Colorado Springs, CO • 80910-3123 • (719) 578-3199 • Fax: (719) 578-3188

Record I.D. 30483

*ALL PAYMENTS ARE DUE AT TIME OF SUBMITTAL IN CASH, CHECK, or MAJOR CREDIT CARD

	APPLICATION FOR AN ONSITE WASTEWATER SYSTEM PERMIT ONEW PERMIT OMINOR REPAIR PERMIT MAJOR REPAIR PERMIT
	Owner MINA K. TERNUS Daytime Phone 7/9-481-5420
	Address of Property 19515 BELATRIX DY City & Zip MONUMENT, 80132
	Legal Description Tract 107 Colo Estates Sub 3
	Owner's MAILING Address POBOX 953 City, State & Zip MONUMENT, CO 8013
	Lot Size 2/2 2.55 Tax Schedule # 71040040/5
	Type of Building: A Frame Modular Mobile Commercial Manufactured Other
	Water Supply: Well or Spring Cistern Public Inside City Limits: No Yes-City
	MMAIL PERMIT - OR - PICK UP PERMIT FAX - FAX TO AND # PO Box 953 Monument
*	MAXIMUM POTENTIAL NUMBER OF BEDROOMS 4/
2010	Percolation Test Attached Y N Basement N Garbage Disposal N Clothes Washer N N
	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/OWNER'S AGENT SIGNATURE Many K. A. Language Date 11-16-10
	You will be notified by telephone when your permit is ready for pick up. Please allow a minimum of 10 days for new septics.
	DEPARTMENT OF HEALTH USE ONLY
•	INSTALL LEACH FIELD IN THE AREA THAT THE PERCOLATION TEST WAS TAKEN ON
	RE 2/9/91 BUT AT LEAST SIX FEET AWAY FROM EXISTING SYSTEM. ANY AMOUNT MAY BE
	ADDED TO THE EXISTING LEACH FIELD. IF A DIVERTER VALVE IS USED, A MINIMUM
	ADDITION OF 539 SQUARE FEET IS REQUIRED WITH NO REDUCTION. AN ADDITIONAL
•	BEDROOM WAS ADDED TO THE HOUSE, THEREFORE THE TANK SHALL BE INCREASED
	- FROM 1250(EXISTING) TO 1500 GALLONS. ALL SETBACKS MUST BE MAINTAINED,
	 INCLUDING BUT NOT LIMITED TO 10 FEET FROM PROPERTY LINES, AND 100 FEET FROM ANY WELL.
	
	EHS INSPECTOR /Veil / Jeeps.
	CURRENT FEES AS APPROVED BY EL PASO COUNTY BOARD OF HEALTH New Permit: \$304.00 EPCDHE Charge + \$23.00 CDPHE Surcharge + \$147.00 EPC Planning Surcharge = \$474.00
	New Permit: \$304.00 EPCDHE Charge + \$23.00 CDPHE Surcharge + \$147.00 EPC Planning Surcharge = \$474.00 Major repair permit: \$341.00 EPCDHE Charge + \$23.00 CDPHE Surcharge = \$364.00 Minor repair permit: \$141.00 EPCDHE Charge + \$23.00 CDPHE Surcharge = \$164.00
	Minor repair permit: \$141.00 EPCDHE Charge + \$23.00 CDPHE Surcharge = \$164.00
	DATE TO LAND DEVELOPMENT/WASTEWATER: DATE TO FLOODPLAIN/ENUMERATIONS:

PLEASE COMPLETE THE BACK OF THIS FORM

Assigned to