

APPROVED: YES ☒ NO ☐

ENVIRONMENTALIST R. Swenson

Address 16640 Vincent 71220-02-065 Owner Bruce Bugno

Legal Description Lot 6 Block 1 Pine Hills Sub

Residence Y, # of bedrooms 4; Commercial     ; System Installer Marvhem

SEPTIC TANK: (Fletcher)

Commercial Y; Noncommercial     , L     , W     , WD       
Construction Material Concrete, capacity 1500 gallons.

**DISPOSAL FIELD:**

**Rock Systems:**

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

Bed: depth     , length 54, width 14, sq. feet 756

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     , number of chambers     , bed     , trench     

sq. ft./section     , reduction allowed     %, sq. ft. required     

total sq. ft. installed     , depth of installation     

Engineer Design Y or N, Designing Engineer W. Green

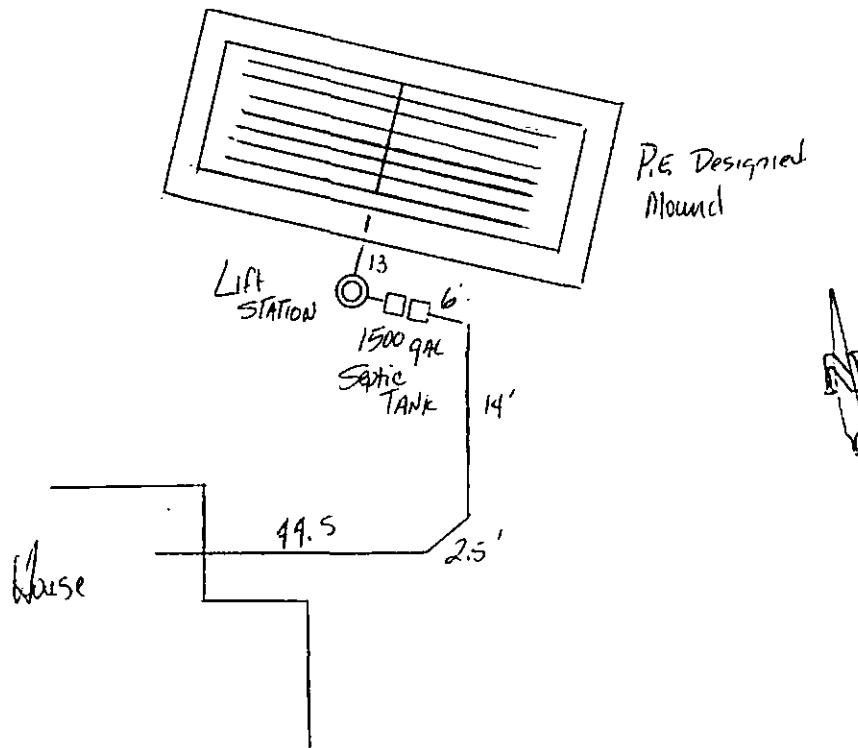
Approval letter provided? Y or N

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     

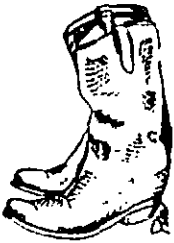
\*Approval will be revoked if in the future the well is found to be within 50 feet of the septic tank and/or 100 feet of the disposal field.

**NOTES:**



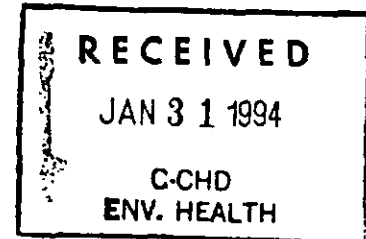
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*Handwritten signature/initials*



**PHIL WEINERT ENTERPRISES**

15590 Castlegate Court  
Colorado Springs, CO, U.S.A. 80921-1809  
Phone (719) 488-2478  
CompuServe 70476,70



J.B. Duca Construction  
13102 Emerson Street  
Thorton, Colorado 80241

RE: Bugno Residence, Vincent Drive

Dear J.B.,

I inspected the waste disposal system at this address today. The installation is satisfactory.

Final grading remains and must divert water away from the absorption bed.

Operation of the alarm system must be verified to insure float switches function as required.

Regards,

A stylized, handwritten signature in dark ink, appearing to read "Phil Weinert".

Phil Weinert, P.E.

cc: JoAnn Mayne, Environmental Health Services

Acres 5

## EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT

Permit

7589

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

Water Supply

Receipt No.

PAID**PERMIT**#8210**TO CONSTRUCT, ALTER, REPAIR OR MODIFY ANY INDIVIDUAL SEWAGE DISPOSAL SYSTEM**Issued to BRUCE BUGNO

Date

12-2-93

Address of Property

16640 VINCENT AVENUE, LOT 6 BLOCK 1

Phone

576-6808

(Permit valid at this address only)

PINE HILLS SUB.

Sewage-Disposal System work to be performed by

Phone

This Permit is issued in accordance with 25-10-106 Colorado Revised Statutes 1973, as amended. PERMIT EXPIRES upon completion 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-**\$150.00

PERMIT FEE (NOT REFUNDABLE)

DIRECTOR, DEPARTMENT OF HEALTH AND ENVIRONMENT

David L. Smith

ENVIRONMENTALIST

12-2-94

DATE OF EXPIRATION

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

SEPTIC TANK:

TRENCH SYSTEM:

BED SYSTEM:

SEEPAGE PIT SYSTEM:

1500 gallons

total square feet

\_\_\_\_ ft. of trench

\_\_\_\_ inches wide

\_\_\_\_ ft. of trench

\_\_\_\_ inches wide

total square feet

total square feet

\_\_\_\_ rings or \_\_\_\_ diam. x \_\_\_\_ w/d

NOTES:

INSTALL AS REQUIRED BY ENGINEER. ENGINEER FINAL APPROVAL LETTER REQUIRED.  
DESIGN PLANS DATED 23 NOVEMBER 93 ARE TO BE USED FOR INSTALLATION.

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.

EHS.ISDS-10-93

EL PASO COUNTY DEPARTMENT OF HEALTH & ENVIRONMENT  
301 South Union Boulevard  
Colorado Springs, CO 80909-3123  
(719) 578-3125

APPLICATION FOR A PERMIT TO CONSTRUCT, REMODEL, OR INSTALL A SEWAGE DISPOSAL SYSTEM

NAME OF OWNER BRUCE BUGNO HOME PHONE 576-6808 WORK PHONE 599-0818  
ADDRESS OF PROPERTY 16640 VINCENT AVENUE DATE 10/11/93  
LEGAL DESCRIPTION OF PROPERTY LOT 6, BLOCK 1, PINE HILLS SUB  
TAX SCHEDULE NUMBER 71220-02-065 SYSTEM CONTRACTOR \_\_\_\_\_ PHONE \_\_\_\_\_  
OWNER'S ADDRESS IF DIFFERENT 234 STRATMOOR DR., COLORADO SPRINGS, CO 80906  
TYPE OF HOUSE CONSTRUCTION SINGLE FAMILY SOURCE AND TYPE OF WATER SUPPLY \_\_\_\_\_  
SIZE OF LOT 5 ACRES MAXIMUM POTENTIAL NUMBER OF BEDROOMS 4 BASEMENT (yes or no) YES  
PERCOLATION TEST RESULTS ATTACHED (yes or no) YES

A plot plan and accompanying information are essential; it may be drawn on the back of this application or be attached. Please include by measured distance the location of wells including neighbors' wells, springs, water supply lines, cisterns, buildings, proposed structures, property lines, property dimensions, subsoil drains, lakes, ponds, water courses, streams, and dry gulches. Please show the location of the proposed septic system by directions and distances from actual and/or proposed dwellings, structures, or fixed reference objects. Give complete directions to the property from major highways. (ANSWER QUESTIONS ON BACK OF FORM).

Applicant acknowledges that 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 the applicant for purposes of evaluation of 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 under Article 10, Title 25, C.R.S. 1973 as amended. The undersigned hereby certifies that all statements made, information and reports submitted by the applicant are or will be 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 Health Dept. in evaluating the same for purposes of issuing the permit applied for herein. I further understand that 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.

SIGNATURE Bruce Bugno

HEALTH DEPARTMENT USE ONLY  
PERMIT NUMBER 17589 RECEIPT NUMBER ~~8210~~ 8210 DATE TO LAND USE DEPARTMENT 10-12-93 *attached ok*  
ABSORPTION AREA \_\_\_\_\_ TANK CAPACITY 1500 gal DATE OF SITE INSPECTION 10-12-93

REMARKS: Install AS required by engineers. Engineers final approval letter required. Design plans dated 23 Nov 93 are to be used for installation.

APPLICATION IS APPROVED (X) DENIED ( ) DATE 11-24-93 ENVIRONMENTALIST J. Johnston

ANSWER THE FOLLOWING ITEMS AND/OR INCLUDE ON PLOT PLAN.

PROPERTY LINES ✓  
PROPERTY DIMENSIONS ✓  
LOCATION OF PROPOSED SEPTIC SYSTEM ✓  
LOCATION OF WELL ✓  
LOCATION OF ADJACENT WELLS \_\_\_\_\_  
BUILDINGS ✓  
PROPOSED BUILDINGS ✓  
WATER SUPPLY LINE ✓  
CISTERNS \_\_\_\_\_  
SPRINGS \_\_\_\_\_  
LAKES \_\_\_\_\_  
PONDS \_\_\_\_\_  
WATER COURSES \_\_\_\_\_  
STREAMS \_\_\_\_\_  
DRY GULCHES \_\_\_\_\_  
SUBSOIL DRAINS ✓ ?

DIRECTIONS TO PROPERTY FROM MAIN HIGHWAYS:

I-25 to Monument. Take Mitchell Ave to Arnold. Take Arnold until you come to T in the Road. That is Vincent Ave. Where the T in the road is, that is the property.