

EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT
INDIVIDUAL SEWAGE DISPOSAL SYSTEM INSPECTION FORM

Permit # 644
Date 10-14-99

P

APPROVED: YES ☒ NO ☐ # 7704001007 ENVIRONMENTALIST L. Griffin

Address 15660 Rancho Pavo AR. Owner J. Cassio

Legal Description Lot 51 Pinons at Turkey Canon Filing #2
Residence ☒ # of bedrooms 3; Commercial ☐; System Installer Saurbagen

SEPTIC TANK:

Commercial ☒; Noncommercial ☐ L W WD
Construction Material 2comp Precast Concrete, capacity 1500 gallons.

DISPOSAL FIELD:

Rock Systems:

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

Bed: depth , length 96, width 36, sq. feet 3456

Rock type 1 1/2 R.R., depth 12", under PVC 6", over PVC 2"

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 ☒ or N, Designing Engineer Jim Allison P.E.

Approval letter provided? ☒ or N

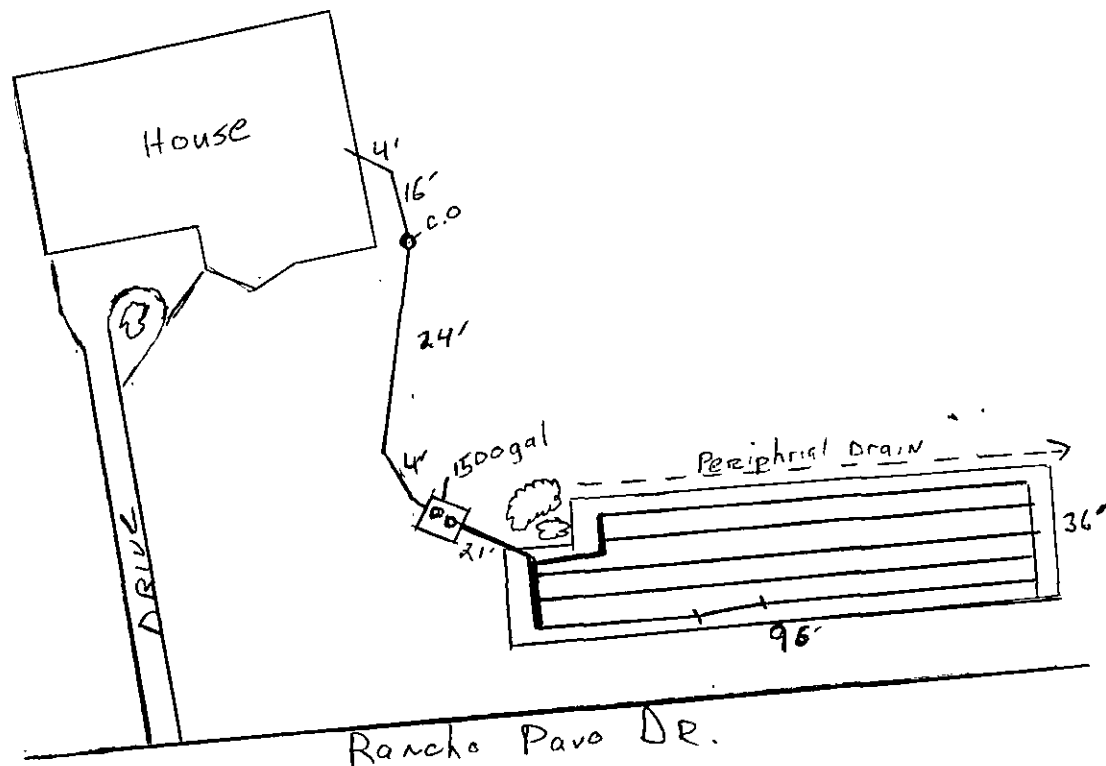
Well 50 feet from tank Y or N 100 feet from leach field Y or N

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:

Solid pipe —



EL PASO COUNTY
DEPARTMENT OF HEALTH AND ENVIRONMENT
301 S Union Blvd, Colorado Springs, Colorado 719-578-3126



INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT

WATER SOURCE: PUBLIC

PERMIT NUMBER: ON0000644

OWNER NAME: JIM CASSIO

DATE PERMITTED: 6/14/99

ADDRESS: 15660 RANCHO PAVO DR

CITY, STATE, ZIP: COLORADO SPRINGS

80926

PHONE NUMBER: 7193313191

INSTALLED BY: MARVIN SAURHAGEN

This permit is issued in accordance with 25-10-107 Colorado Revised Statutes. 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.

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 FEE(NON REFUNDABLE) :

New Permit-----\$ 300.00

ISDS Repair -\$ 50.00

Voided/Altered permit --\$ 25.00

[Signature]
DIRECTOR, EL PASO COUNTY DEPARTMENT OF HEALTH AND ENVIRONMENT

PERMIT EXPIRATION DATE :

Expires twelve months from date of issue

[Signature] 578-3135
ENVIRONMENTALIST/PHONE NUMBER

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

MINIMUM SEPTIC TANK SIZE: 1,500 GALLONS

MINIMUM ABSORPTION AREA REQUIRED

P.E SQ FT

PLANNING DEPT ☒

ENUMERATION ☒

FLOOD PLAIN ☒

WASTEWATER ☒

COMMENTS:

SEPTIC NOTES

FOLLOW ENGINEER DESIGN. KEEP LEACH FIELD AWAY FROM DRAINAGE DITCH ON SOUTH, SOUTHEAST PORTION OF PROPERTY. NEED PROOF OF INSTALLER CERTIFICATION.

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.

Inspector

Lee

Record I.D.

644



EL PASO COUNTY ENVIRONMENTAL HEALTH SERVICES

301 South Union Boulevard • Colorado Springs, CO • 80910-3123 • (719) 578-3126

ASAP

APPLICATION FOR A ☒ NEW ☐ REMODEL ☐ REPAIR OR ☐ ADDITION
TO AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM

Owner

JIM CASSIO

Daytime Phone

719 331-3191

Address of Property

15660 RANCHO FAVO DR

City & Zip

TURKEY CANYON CO/SP

Legal Description

LOT 51 PINONS TURKEY CANYON FILING # 2

MLS Assoc 80926-9300

Tax Schedule #

T1040-01007

Lot Size

5.002 AC

Septic Contractor/Phone

JES PRO-TECH

Inside City Limits

☒ No☐ Yes-City

Water Supply

☐ Well or Spring☐ Cistern☒ Public

Type of Building

☒ Frame☐ Mobile☐ Modular☐ Other

Owner's Mailing Address

6 ALSACE WAY C/S COLO 809106

City, State & Zip

Basement ☒ NPercolation Test Attached ☒ NGarbage Disposal ☒ NClothes Washer ☒ N

MAXIMUM POTENTIAL BEDROOMS

3 Bed

6-7-99

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 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 SIGNATURE

Jim Cassio

Date

5-26-99
6-7-99 gm

DEPARTMENT OF HEALTH USE ONLY

P.E. Design

Minimum Absorption Area

1500 gal

Minimum Tank Capacity

6/11/99

Date of Site Inspection

REMARKS

Engineer

Follow Engineer Design
Keep back field away from S, SE portion of property
drainage ditch on S, SE portion of property

* need proof of installer certification

EHS INSPECTOR

Lee Guffen

DATE

APPROVED

DENIED

PERMIT #

0N0000644pd

FEE NO FEE

DATE TO PLANNING DEPT

6/8/99

Call

6-7-99

DATE TO WASTEWATER DISTRICT



- 1) We require a copy of your percolation (**PERC**) **TEST** with an original professional engineer's (PE) stamp and signature.
- 2) A **PLOT PLAN** must be drawn (not to scale) on a 8 1/2 x 11 sheet of paper. The plot plan must include
- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> 1) a north bearing | <input checked="" type="checkbox"/> 4) all buildings (proposed or existing) | <input checked="" type="checkbox"/> 7) driveway (proposed or existing and name of adjoining street) |
| <input checked="" type="checkbox"/> 2) property lines | <input checked="" type="checkbox"/> 5) proposed septic system site | |
| <input checked="" type="checkbox"/> 3) property dimensions | <input checked="" type="checkbox"/> 6) designated alternate septic system site | |
- 3) Initial any of the following features that apply to your property and include them on your plot plan.
- | | | |
|----------------------------------|--|---|
| <input type="checkbox"/> Well(s) | <input type="checkbox"/> Adjacent property well(s) | <input checked="" type="checkbox"/> Subsoil drain @ BLD FOOTING |
| <input type="checkbox"/> Cistern | <input type="checkbox"/> Water line | |
- 4) Initial any of the following that are within 100 feet of your proposed septic system and include on your plot plan.
- | | |
|--|---|
| <input type="checkbox"/> Spring(s) | <input type="checkbox"/> Lake(s) |
| <input type="checkbox"/> Pond(s) | <input type="checkbox"/> Stream(s) |
| <input type="checkbox"/> Dry Gulch(es) | <input type="checkbox"/> Natural drainage course(s) |
- 5) **PROPERTY ADDRESS OR LOT NUMBER MUST BE POSTED AND CLEARLY VISIBLE FROM ROAD. PERC HOLES MUST BE CLEARLY MARKED.**

6) GIVE COMPLETE DIRECTIONS TO THE PROPERTY FROM A MAIN HIGHWAY

HWY 115 SOUTH (PAST RED ROCK VALLEY)
RIGHT ON RANCHO PAVO DR. (2ND LOT ON
RIGHT.) CASSIO SANTA FE SIGN @ DRIVE. PERC
HOLES FLAGGED SOUTH END LOT