



<b>Land Use Office</b> PO Box 197, 6683 County Rd 13, Conejos CO 81129 Phone #: 719-376-2014 Fax: 719-376-6769	<b>Permit #</b> _____  <b>Start Date:</b> _____  <b>Expiration Date:</b> _____
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## Application for On-Site Wastewater Treatment System Permit

**FEES:** (Permit Fees are payable to **CONEJOS COUNTY TREASURER** and are Non-Refundable.)

Install New System \$250.00-Pre-construction     Repair Tank STA/Leach/Drain Field \$125.00  
**POST CONSTRUCTION FEES:**  Install New System \$500.00     Repair Tank or STA/Leach/Drain Field \$250.00

**ADDRESS OF PROPERTY SERVED BY PROPOSED SYSTEM:**

Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
  
 Lot Size (in Acres): \_\_\_\_\_ Assessor's Parcel Number: \_\_\_\_\_  
 Legal Description: \_\_\_\_\_ Subdivision \_\_\_\_\_

**Property Owner:**      Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Applicant:**     Same as Property Owner  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_ E-mail: \_\_\_\_\_

**PROPOSED FACILITY:**

Single Family Dwelling     Multi-Family     Commercial     Other \_\_\_\_\_

**SINGLE FAMILY DWELLING GENERAL INFORMATION:**

Number of Bedrooms: \_\_\_\_\_ Additional Bedrooms Planned?  Yes  No    Number of Bathrooms \_\_\_\_\_  
 Garbage Disposal     Hot Tub     Water Softener

**WATER AND SEWER INFORMATION:**

Water Supply:             Well Permit # \_\_\_\_\_     Hauled                     Public Water System

Supplier Name: (for Hauled or Public Water) \_\_\_\_\_



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**SYSTEM INFORMATION:**

Is property within boundaries of a sewer district?  No  Yes – name: \_\_\_\_\_

Is property within 400' of a sewer line?  Yes  No Waiver from the sewer/sanitation district?  Yes  No

**CONTRACTOR/ENGINEER INFORMATION**

Systems Installer: \_\_\_\_\_ License #: \_\_\_\_\_

Soil Evaluation Technician: \_\_\_\_\_ Job #: \_\_\_\_\_

Design Engineer (if applicable): \_\_\_\_\_ Job #: \_\_\_\_\_

Is this to be an Engineered System?  Yes  No

**COMMERCIAL GENERAL INFORMATION (if applicable)**  Section is not applicable

Type of Business: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

Must be designed by an Engineer – designed attached  Yes  No

Design Flow > = 2,000 Gallons/Day  Yes  No If yes, attached CDPHE approval.  Yes  No  
 (Note: Permit cannot be issued until the site approval is given from CDPHE)

Are floor drains existing or proposed?  Yes  No

\_\_\_\_\_

***For all work done under this permit the applicant and/or landowner accepts full responsibility for compliance with the State of Colorado and County Regulations.***

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Permit Fee paid by: <input type="checkbox"/> Property Owner <input type="checkbox"/> Applicant <input type="checkbox"/> Other: _____ Date Paid: _____ Receipt # _____ Type of Payment: _____ Inspected by: _____ Inspection Date: _____ <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions _____
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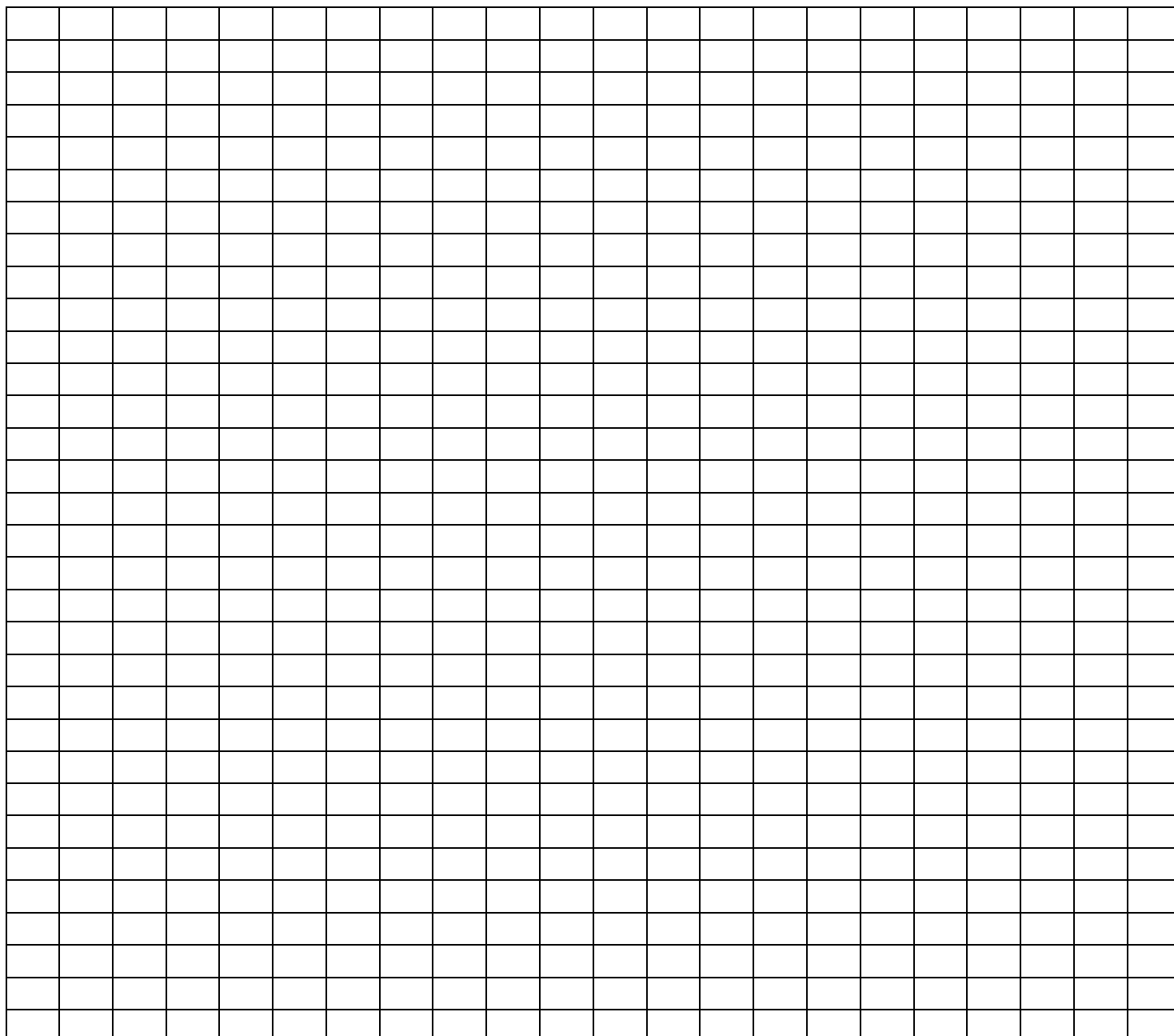
Permit # \_\_\_\_\_

Start Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Land Owner/Applicant: \_\_\_\_\_  
   Owner  Address:  Phone  Date

North Arrow Here





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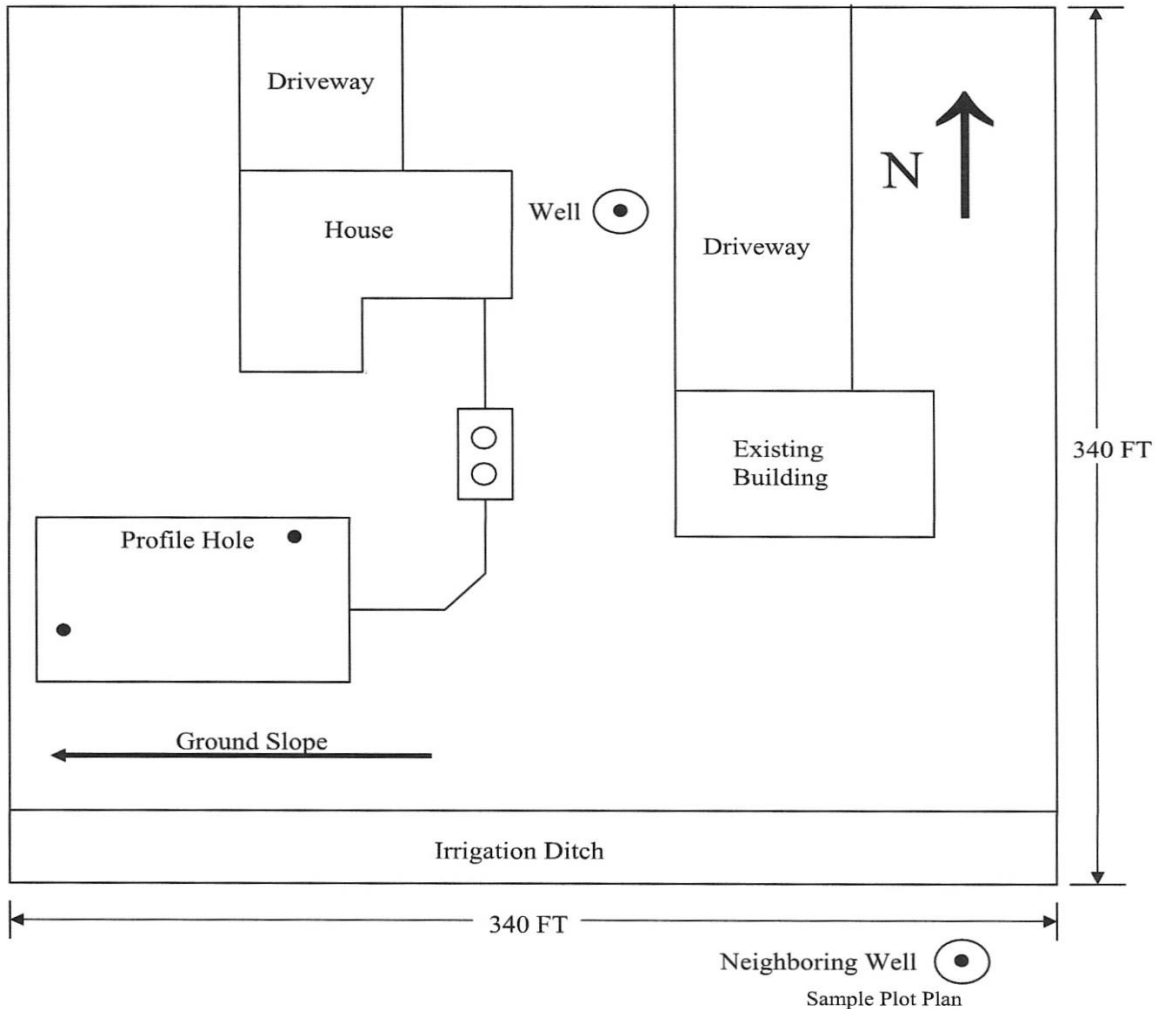
Permit # \_\_\_\_\_

Start Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

### SAMPLE PLOT PLAN - Needs to be to scale on 8 ½" x 11" paper and have the following Items:

- Street Name and Address
- Arrow Pointing North
- House Marked
- Existing and proposed Structures (Barns/Sheds/Garages)
- Ditches, Streams, Lakes, Trees (significant onsite features)
- Profile Pit at each end of the drain field but not in the drain field.
- Well and/or neighbors well if within 100' feet of the property line
- Signed and Dated by the Owner/Applicant
- Indicate Scale (each square = 10')
- Driveway marked
- Property Boundaries





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## Setback or Separation Distance Table

### ON-SITE WASTEWATER TREATMENT SYSTEMS (OWTS – previously known as ISDS or SEPTIC SYSTEM)

#### Septic Tank, Higher Level Treatment Unit, Dosing Tank, Vault

- 50' Well, Spring, Potable Water Supply Cistern, Lakes, Water Course, Irrigation Ditches, Streams, Wetland, Suction Line.
- 10' Property Lines, Potable Water Supply Line, Upslope curtain drain,
- 10' Piped or Lined Irrigation Ditch, Subsurface drains, Intermittent Irrigation Lateral, Drywell, or Storm Water Structure, Dry Gulch, Cut Bank, Fill Area (from crest)
- 5' Structures w/basement, crawl space or footing drains, Structure without basement crawl space or footing drains.

#### Soil Treatment Area (STA), Soil Treatment Bed, Unlined Sand Filter, Sub-surface Disbursal System, Seepage Pit

- 100' Well, Spring, Suction Line, Potable Water Supply Cistern.
  - 50' Lake, Water Course, Irrigation Ditch, Stream, Wetland.
  - 25' Potable Water Supply line, Subsurface Drain, Intermittent Irrigation Lateral, Drywell, Storm Water Structure, Dry Gulch, Cut Bank, Fill Area (from crest)
  - 20' Structure w/basement, crawl space or footing drains
  - 10' Structure without Basement, Crawl Space or Footing Drains, Property Lines, Piped or Lined Irrigation Ditch, Upslope Curtain Drain.
  - 5' to Septic Tank, Higher Level Treatment Unit, Dosing Tank, Vault or Privy
- See CDPHE – Regulation Table 7-1 for Minimum Horizontal Distances in feet between components of an On-site Wastewater Treatment System installed after November 15, 1973 and water physical and health impact features.*



### **CONSTRUCTION SETBACKS:**

Any building/structure that is 120' square feet & larger must comply per zone district regulations.

Agricultural Zone District:	Front – 40'	Side – 40'	Rear – 40'	
Rural Zone District:	Front – 40'	Side – 40'	Rear – 40'	
Residential District:	Front – 25'	Side – 8'	Rear – 25'	Road/Street Corner – 25'
Community Town Site District	Front – 25'	Side – 8'	Rear – 25'	Road/Street Corner – 25'
Commercial District	Front – 25'	Side – 10'	Rear – 20'	Road/Street Corner – 25'
Industrial District	Front – 50'	Side – 10'	Rear – 20'	

- ★The front of a property is where the property is accessed from a public road.
- ★Measurements are taken from property lines. Know your property lines. Fences may not be a property line.
- ★A corner lot is determined as the sides abutting the road/street.

**PUBLIC UTILITY SETBACKS:** You MAY be subject to public utility setbacks such as electricity, propane/natural gas cable and telephone lines. Contact your individual vendor for more information.

**SPECIAL USES:** Some Special Uses MAY be subject to larger setback requirement. For Example: Mining uses must be setback 100' from adjacent properties, irrigation ditches, and Road Right-of-Way and 1000' from Conservation, Federal and State areas. Cell Towers have required setbacks. See CCLU Code Article 5.



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## SOIL INVESTIGATION FORM

PROPERTY OWNER: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

CONTRACTOR/ENGINEER: \_\_\_\_\_

**Indicate which soil investigation method you performed:** (Check One)

- 1. Visual and tactile evaluation from two or more soil profile test pit.  
Attach a Soil Profile Test Pit Log for each profile test pit.
- 2. Percolation test plus one or more soil profile test pit excavations.  
Attach a Percolation Test Summary and Result Form and Soil Profile Test Pit Log for each profile test pit.
- 3. Percolation test plus one or more soil profile holes (Not allowed after 07/01/2016)  
Attach a Soil Percolation Test Summary and Results.

### **SOIL INVESTIGATION RESULTS:**

Is there a limiting condition with low permeability, bedrock, ground water or other condition that restricts the treatment capability of the soil?

- No
- Yes -- If yes, design document must explain how the limiting condition is addressed.

**Recommended Infiltrative Surface Elevation or Depth:** \_\_\_\_\_

**Recommended Long Term Acceptance Rate (LTAR):** \_\_\_\_\_

Table 10-1 of Regulation 43

**Soil Type:** \_\_\_\_\_ (Use this for the OWTS Design Worksheet)

**Completed by:** \_\_\_\_\_

**Date:** \_\_\_\_\_



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**OWTS DESIGN WORKSHEET** (COMPLETED FOR ALL CONVENTIONAL DESIGNS)

PROPERTY OWNER: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

CONTRACTOR/ENGINEER: \_\_\_\_\_

1. WATER FLOW:

Number of bedrooms: \_\_\_\_\_ Design Wastewater Flow (gallons/day): \_\_\_\_\_

2. SEPTIC TANK: Septic Tank Size in Gallons: \_\_\_\_\_

Maximum Tank Burial Depth from top of tank \_\_\_\_\_ inches

Is tank certified for proposed burial depth  No  Yes

Will groundwater affect tank:  No  Yes

Include buoyancy calculation

Will an effluent screen be installed  No  Yes Type \_\_\_\_\_

Manufacturer: \_\_\_\_\_

Will a secondary safety device be installed in the risers  No  Yes

3. METHOD OF SEPTIC TANK EFFLUENT APPLICATION:

Gravity  Dosed with Pump  Dosed with Siphon

4. TYPE OF MEDIA:

Rock & Pipe  Tire Chips  Chambers  Other: \_\_\_\_\_

5. SOIL TYPE: \_\_\_\_\_

6. SOIL TREATMENT AREA (STA)

Long Term Acceptance Rate (Table 10-1 Regulation 43) \_\_\_\_\_

Unadjusted STA Size – Show Calculation: \_\_\_\_\_

Trench or Bed (circle one) Size Adjustment 10-2: \_\_\_\_\_

Size Adjustment 10-3: \_\_\_\_\_

Rock & Pipe: \_\_\_\_\_

Chambers: \_\_\_\_\_

Other: \_\_\_\_\_

Repairs:  Wide Bed  Deep Gravel Trenches

Mounded  Other: \_\_\_\_\_



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**CALCULATION SHEET – ADJUSTED STA SIZE** (show calculation with adjustment factors utilized):

Calculation for Square Foot needed for Drain Field (SQ/DF)

# of Bedrooms = \_\_\_\_\_ x 150 Gallons Per Day per bedroom (GPD/BR) = \_\_\_\_\_ GPD  
 Soil Type \_\_\_\_\_ = \_\_\_\_\_ Gallons Per Square Foot (GPSF)  
 \_\_\_\_\_ ÷ \_\_\_\_\_ = \_\_\_\_\_ **SQ FT needed for Drain Field (SQ/DF)**  
GPD GPSF

Calculation for the Adjusted Square Footage (ASQFT) for the Drain Field Type (Trench & Bed)

Pipe:  
 Trench 1.0 X \_\_\_\_\_ SQ/DF = \_\_\_\_\_ SQ FT (No Reduction Allowed) = \_\_\_\_\_ ASQFT  
 Bed 1.2 X \_\_\_\_\_ SQ/DF = \_\_\_\_\_ SQ FT (No Reduction Allowed) = \_\_\_\_\_ ASQFT

Chambers:  
 Trench 1.0 X \_\_\_\_\_ SQ/DF = \_\_\_\_\_ SQ FT X Reduction .7 = \_\_\_\_\_ ASQFT  
 Bed 1.2 X \_\_\_\_\_ SQ/DF = \_\_\_\_\_ SQ FT X Reduction .7 = \_\_\_\_\_ ASQFT

Pressure Dosed system  
 Trench 0.8 x \_\_\_\_\_ SQ/DF = \_\_\_\_\_ SQ FT X Reduction .7 = \_\_\_\_\_ ASQFT  
 Bed 1.0 x \_\_\_\_\_ SQ/DF = \_\_\_\_\_ SQ FT X Reduction .7 = \_\_\_\_\_ ASQFT

Calculation for type of Drain System (Chambers & Pipe)

**Chambers:** \_\_\_\_\_ ÷ 12 = \_\_\_\_\_  
ASQFT **CHAMBERS NEEDED**

**Pipe:** \_\_\_\_\_ ÷ 20 = \_\_\_\_\_  
ASQFT FOR 10' PIPE **PIPE NEEDED**

NOTE: A scale drawing shall be provided with each design document, showing:

- Location of each OWTS Component and distances to all applicable Physical features
- Layout of Soil Treatment Area (STA)  Dimensions of trenches or beds
- Depths of each component (or elevations relative to a designated benchmark)

**CERTIFICATION:**

I certify that I have all the competencies needed in accordance with Regulation 43.

\_\_\_\_\_  
 Signature Print Name Date

\_\_\_\_\_  
 Company Name