

**APPLICATION AND PERMIT FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM**

**LAS ANIMAS-HUERFANO COUNTIES  
DISTRICT HEALTH DEPARTMENT**

**# 16**

412 BENEDICTA AVENUE  
TRINIDAD, COLORADO 81082  
(719) 846-2213 FAX (719)846-4472

119 EAST FIFTH <sup>2004</sup>  
WALSENBURG, COLORADO 81089  
(719) 738-2650

DATE PAID 2-24-03 2/22/06  
RECEIPT # 38562 44226

PROPERTY OWNER Frank Autabee  
ADDRESS 3626 So Halifax way Qu.  
AGENT \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE 303 693-3427  
ADDRESS OF SITE 25110 Ridge Line Dr.  
LEGAL DESCRIPTION OF SITE Lot 160 Ludlow  
SIZE OF PROPERTY 35 3/4 <sup>acres</sup> WATER SUPPLY: ( ) PRIVATE WELL ( ) PUBLIC Cistern  
TYPE OF STRUCTURE ( ) SINGLE FAMILY DWELLING ( ) # OF BEDROOMS 2  
( ) OTHER \_\_\_\_\_  
PLUMBING FIXTURES IN STRUCTURE: WATER CLOSETS \_\_\_\_\_ LAVATORIES 2  
BATHTUBS 1 SHOWERS 1 SINKS 2 AUTOMATIC WASHERS \_\_\_\_\_  
DISHWASHERS \_\_\_\_\_ OTHER \_\_\_\_\_ # OF ANTICIPATED USERS 2

**AN ACCURATE PLOT PLAN AS DESCRIBED ON PAGE 2 MUST ACCOMPANY  
THIS APPLICATION**

Application for an individual sewage disposal system permit is hereby submitted, together with the plans, specification, and the required fee.

- ( ) Four hundred fifty dollars (\$450) This amount includes a percolation test.
- ( ) One hundred fifty dollars (\$150) Remodeling Permit
- ( ) One hundred fifty dollars (\$150) Existing Septic System (hook-up/search)

The undersigned does hereby agree to comply with all Las Animas-Huerfano Counties Health Department stipulation, the provisions of Regulation VIII, and all applicable State Laws and Regulations (please read reverse side).

**THE HEALTH DEPARTMENT WILL NOT BE HELD RESPONSIBLE FOR ANY  
SEPTIC SYSTEM FAILURE!!!**

SIGNATURE OF OWNER OR AGENT Frank Autabee DATE 2-24-03

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(THIS AREA FOR HEALTH DEPARTMENT USE ONLY)

Percolation Test: Date: 4-15-2003 By Whom: Tommy George Rate: 1/6 Min/Inch \_\_\_\_\_  
Soil Profile: Depth to Water Table \_\_\_\_\_ Depth to Bedrock \_\_\_\_\_  
Other Terrain Features of Soil Conditions \_\_\_\_\_  
Installed by: Ugill Const

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**PLOT PLAN MUST INCLUDE THE FOLLOWING:**

(All locations must be indicated by measured distances)

1. Accurate property dimensions and size of property. (survey preferred)
2. Proposed location of sewage disposal system and alternate area.
3. Location of streams, lakes, ditches and drainage areas on and within 50 feet of property.
4. Location of water supply line to the dwelling and any out buildings.
5. Accurate location of **ALL WELLS** existing or proposed on and within 150 feet of the property.
6. Location of proposed and existing buildings.
7. Type of buildings by use.
8. Such additional information as may be required by the Health Officer.

**AN INCOMPLETE PLOT PLAN WILL CAUSE DELAYS IN ISSUANCE OF THE PERMIT.**

**DRAW PLOT PLAN BELOW:**

