DOLORES COUNTY COMMISSIONERS
DOLORES COUNTY
P.O. BOX 608
DOVE CREEK, COLORADO 81324
Phone 970-677-2383 Fax 970-677-2815
dcdolocnty@fone.net

SEWAGE DISPOSAL SYSTEM APPLICATION AND PERMIT

PERMIT FEE = $175.00

Date Fee Paid_____This permit expires after one year from date of issuance, Extension may be granted on request.
Amount Paid_____(Non Refundable)
FEE INCLUDES TWO TRIPS TO LOCATION: ANY ADDITIONAL TRIP WILL COST $20.00 PER HR. PLUS $.40 PER MILE.

OWNER/APPLICANT_____Phone_____
Property Address_____City/Town_____
Mailing Address_____
Contractor_____

Is permit for: ( ) New Installation ( ) Alteration ( ) Repair ( ) Other
Location of Proposed Facility: Subdivision Name:_____Lot #_____
If not subdivision, enter any Exemption Resolution Number:_____Lot Size_____
( ) Commercial ( ) Residential Number of: Bedrooms_____People_____

Please attach PLOT PLAN AND DESIGN FEATURES: Include, by measured distance, location of well, spring, potable water supply lines, cisterns, buildings, property lines, subsoil drains, lake, water course, stream, dry gulch and show location of proposed system by direction and distance from dwelling or other fixed reference objects, and additional submissions in support of this application, such as data, plans, specifications, statements and commitments.

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 local health department to be made and furnished by the applicant for the purpose of evaluating the application; and the issuance of the permit is subject to such terms and conditions as deemed necessary to insure compliance with rules and regulations adopted under Article 10, Title 25, CRS 1973 as amended. The undersigned herby certifies that all statements made, information and reports submitted herewith and required to be submitted by the applicant are true and correct to the best of his/her knowledge and are designed to be relied on by the local department of health in evaluating the propose for issuing the permit. I further understand that any falsification or misrepresentation may result in a denial or revocation of any permit granted based upon the application.

This system shall be constructed in accordance with the Colorado State and Dolores County regulations governing sewage disposal system, subject to the issuance of a permit, and to final inspection before back filling,

Note:
The issuance of a permit does not constitute assumption by the Department or its employees of liability for the failure of any sewage disposal system.

BE FURTHER ADVISED: **the Septic Inspector may have a relationship with one or more septic installers and landowners should be sure to require full disclosure.**

SIGNATURE_____