

COLORADO DEPARTMENT OF HEALTH
Water Pollution Control Division
1210 East 11th Avenue
Denver, Colorado 80202

APPLICATION FOR APPROVAL OF LOCATION FOR SEPTIC TANK SYSTEMS

Applicant (Owner) RICHARD A. JONES

Mail address: BOX 143 #106 City: WEST CLIFFE Phone: 783-2761

A. INFORMATION REGARDING PROJECT SUBMITTED FOR REVIEW:

Attach separate sheets or report showing entire area with respect to surrounding areas, topography of area, habitable buildings, location of potable water wells, soil percolation test holes, soil profiles in test holes.

1. Location of Facility: County CUSTER City or Town WEST CLIFFE

Legal Description: LOT 26 - 1st SUBDIVISION Lot Size: 3.3

2. Type of area and facility - Number of persons served: 4 PEOPLE (2 BATH ROOMS - 1400 sq. ft.)

Subdivision Hotel Restaurant Trailer court

Other: _____

3. Source of domestic water: Public (name): _____

Private: Well Depth _____ Other _____ Dept to first ground water table _____

4. Is facility within boundaries of City or Sanitation District: NO

If so, name: _____

5. Distance to nearest sewer system: NONE

1. Have negotiations been attempted with owner to connect: NO

1. If rejected, give reason: _____

6. Rate of absorption in test holes in minutes per inch of drop in water level after holes have been soaked for 24 hours: 1 - 5 min

7. Name, address and telephone of person who made soil absorption tests: 2903 mgp, ONeilville, Colo

6. Name, address and telephone of person responsible for design of the system: _____

9. Est. bid opening date: _____ Est. Completion Date: _____ Est. project cost: _____

DATE: 4-30-82

Signature of Owner

Richard A. Jones

B. SIGNATURES FOR LOCAL GOVERNMENT OFFICIALS: The undersigned have reviewed the proposal for the location of the above-described septic tank system and RECOMMEND APPROVAL or DISAPPROVAL in the space provided below:

DATE	APPROVAL	DISAPPROVAL	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>J. J. O'Sullivan</u> Signature for Local Health Department
	<input type="checkbox"/>	<input type="checkbox"/>	Signature for Mayor or City Manager
	<input type="checkbox"/>	<input type="checkbox"/>	Signature for County Commissioners

Comments: 1000 tank - 300 sq ft leach field

Signature and Title

Note: The applicant must obtain the comments and signature of at least one of the above.

FOLLOWING FOR STATE HEALTH DEPARTMENT USE: Recommendations of the District Engineer

D. ACTION BY THE COLORADO WATER POLLUTION CONTROL COMMISSION:

(Permit as described in Sec. 9.2 of Resolution)

APPLICATION FOR USE BY RIGHT ZONING PERMIT FOR CONSTRUCTION AND USE
NOTE: THIS IS NOT A BUILDING PERMIT Building Department must be obtained from the

1. DATE 4-13-84
 2. LOCATION OF CONSTRUCTION Custer Co - Ley Subdivision - LOT 26

3. LEGAL DESCRIPTION OF PROPERTY LOT 26 - LEY SUBDIVISION

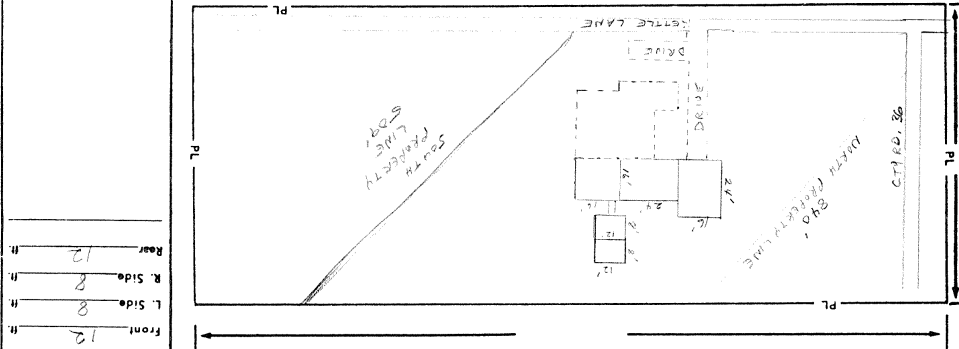
4. ZONE NO. 5. CLASS OF WORK
 CORNER
 INTERIOR
 ADD
 REPAIR
 MOVE
 ALTER
 OTHER (Specify)

6. EXISTING USE (S) (or past use (S), if vacant)
 R. 28.5
 R. 28.5 Sec. 35 & PM

7. USE PROPOSED BY THIS APPLICATION
 GROSS FLOOR AREA OF NEW OR ADD. STORAGE & ADDITIONAL LIVING SPACE
 GROSS FLOOR AREA FOR EACH USE 1144
 ACCESSORY USE (S) GARAGE & DECIDUOUS STORAGE
 ACCESSORY USE (S)

NOTE: Property lines must be officially established prior to construction, indicate on plot plan where streets, alleys and/or easements exist. Indicate existing structures by broken lines; proposed structures by solid lines. All signs and fences require separate permits. Use is subject to limitations of external effects. (ZONING CODE) DRAW TO SCALE, INDICATING TOWNSHIP AND RANGE NO'S.
 INDICATE NORTH IN CIRCLE 1" = 50' (APPROXIMATE)

8. Height of proposed structure at highest point:
 Front 12 ft.
 L. Side 8 ft.
 R. Side 8 ft.
 Rear 12 ft.



9. I/we hereby apply for a zoning permit for the construction of the structure(s) described above and depicted on the attached plan(s). I/we agree that construction will be accomplished in strict compliance with this application and the regulations contained in the Zoning Chapter of the Revised Municipal Code. If we certify that no use will be operated on the land or in the structure(s) identified above except the use(s) set forth above, unless a ZONING PERMIT FOR CHANGE OF USE is obtained. The use(s) will be operated in compliance with all the regulations contained in the Zoning Chapter of the Revised Municipal Code.

Name (s) of owner (s) of zone lot and structure (s) (PRINT) RICHARD A. JOHNS
 Signature of owner (s) or authorized representative Richard A. Johns
 ADDRESS: BOX 142 WESTCELL EFFICIENT NO 303-282-2945

USE APPROVED FOR DATE 4/16/84
 DENIED DATE 4/16/84
 REMARKS

SPACE BELOW THIS LINE FOR DEPARTMENT OF ZONING ADMINISTRATION USE ONLY

CUSTER COUNTY ZONING PERMIT APPLICATION FOR CONSTRUCTION

LAND OWNER(S) Benjamin L. Gregor & Joyce E. Gregor DATE 04-13-1990

MAILING ADDRESS OF OWNER(S) 936 County Rd. 137

LEGAL DESCRIPTION OF PROPERTY (if located in a subdivision, give name of subdivision, lot number and subdivision filling number) Lot 26, Lay Subdivision

ZONE I (II) III IV V Circle One) LOT SIZE: 3 1/4 A

CLASS OF WORK: New Addition Accessory Building Mobile Home Other

FLOOR AREA OF EACH STORY: CROSS FLOOR AREA

HEIGHT OF PROPOSED STRUCTURE: Front Rear L Side R Side

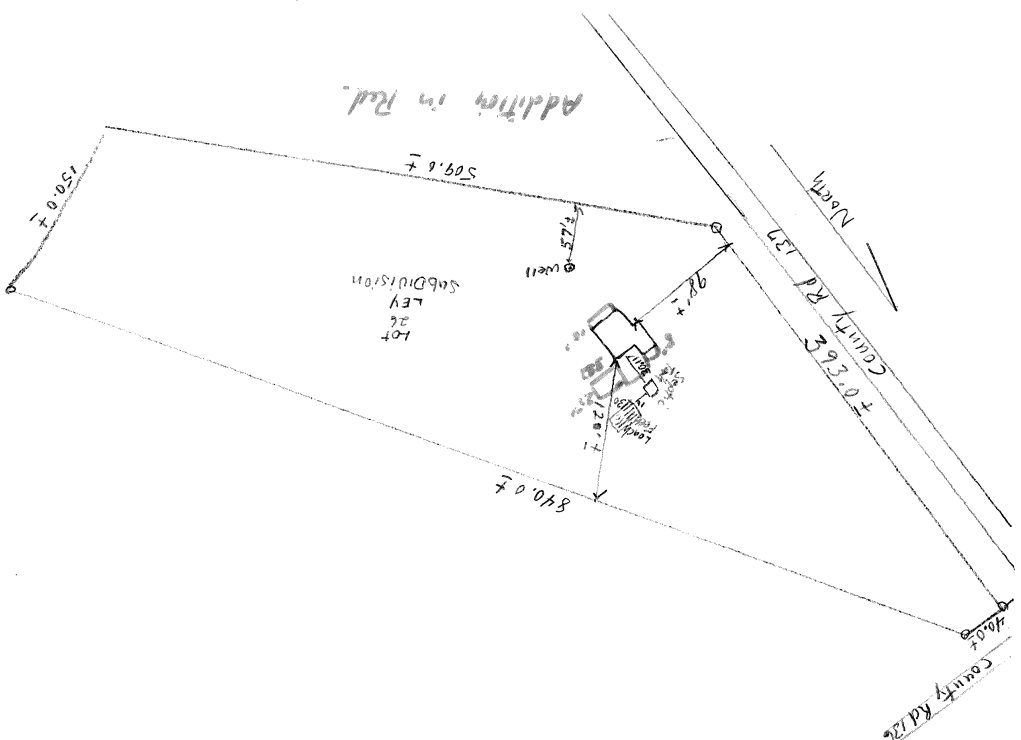
TYPE OF STRUCTURE: Single Family Dwelling Multi-Family Dwelling Accessory Building

NUMBER OF BEDROOMS 3 NUMBER OF OCCUPANTS 2

I.S.D.S. TYPE: Septic Tank Privy Chemical Toilet Vault System Aeration Plant

WATER SOURCE: Private Well Community Well Cistern Other

In the space provided below, draw a diagram indicating the lot dimensions, location of all existing buildings (use solid line) proposed buildings (use broken line). Indicate the distances from each building to property lines and centers of roadways. Show the location of wells, or other water sources, streams, lakes, dry gulches and ponds, and indicate the distances of components of the sewage disposal system from water source, buildings and property lines.



Signature of Owner or Applicant

Benjamin L. Gregor

SPACE BELOW THIS LINE FOR DEPARTMENT OF ZONING ADMINISTRATION ONLY

Use Tax Paid \$

Remarks:

Prelim Approval Date: 12-13-90 by J. O. J.

Zoning Enforcement Officer

Final Approval Date:

Denied Date: