



Date Applied: _____ Septic Permit #: _____

Permit Fee: \$ _____ Expiration Date: _____

Use Tax: \$ _____ Check #: _____

Building Permit # (if applicable): _____ Receipt #: _____

FREMONT COUNTY SEWAGE DISPOSAL PERMIT APPLICATION

Owner: _____ Applicant: _____

Mailing Address: _____ Mailing Address: _____

City, State, Zip Code: _____ City, State, Zip Code: _____

Phone Number: _____ Phone Number: _____

Contractor: _____ Phone: _____ License #: _____

Construction Address: _____

Gate/Combination Lock #: _____ Directions To Site From Major Thoroughfare: (Include Legible Map & Directions On Back) →

Legal Description: _____

Type of Structure: _____ Use of Structure: _____

Lot Size: _____ Acres Source, Type of Water: _____

Maximum Potential # of Bedrooms: _____ Basement: _____ Washer: _____ Garbage Disposal: _____

Engineering Firm: _____ Project Number: _____

Type of System: _____ Absorption Tank Size: _____ Gallons

Absorption: _____ Square Feet Perc Rate: _____ Min./Inch LTAR: _____

Notes: _____

Is Site Within 400 Feet of Sewer Main? Yes No Or Within a Sewer District? Yes No

If **YES**, Is A Letter of Refusal To Connect Attached? _____

Is Site In A Designated Flood Plain? Yes No If **YES**, Engineer's Requirements Listed? _____

I certify that the sewage disposal system described in this permit will be installed in compliance with the attached percolation test report and the Fremont County and State of Colorado Regulations. I understand that I will be responsible for the operation, maintenance, and performance of the individual sewage disposal system. In addition, I am aware that it is my responsibility to provide the contractor with a copy of the attached percolation test report. I am also aware that the issuance of this permit does not constitute assumption by the local health department or its employees of liability for failure of any individual sewage disposal system. Request for inspection will be required after installation of all pipe and gravel (prior to installation of hay, straw or similar pervious material) unless otherwise specified by engineer. The system must be properly protected from off site drainage, vehicular traffic, and livestock. This system and its running order is the sole responsibility of the owner. After this system has been inspected and approved by the inspector it shall be assumed that this system is in proper working order.

Approval of a Fremont County Individual Sewage Disposal Permit does not guarantee or assure that the proposed use is permitted within the zone district for the property, nor does it guarantee or assure that any proposed building complies with applicable land use and requirements for the zone district, such as setbacks, height restrictions, or other similar issues. You have the responsibility and obligation to verify and confirm that all proposed uses are allowed in the zone district and conform to the requirements of the zone district for the property.

Owner or Applicant's Signature: _____ Date Applied: _____

DEPARTMENT USE ONLY

Permit Has Been: Approved Disapproved Date: _____

Notes: _____

Approved By: _____ Date Approved: _____

Prepared By: _____ Date Prepared: _____