	BROOMFIELD HEALTH & HUMAN SERVICES **PUBLIC HEALTH & ENVIRONMENT DIVISION** **INDIVIDUAL SEWAGE DISPOSAL SYSTEMS**	**6 Garden Center** **Broomfield, CO 80020** **720-887-2220** **720-887-2229 (Fax)**

REQUIREMENTS FOR SUBMITTING APPLICATION FOR AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM

The following information must accompany your application for a permit to construct, repair or install an **Individual Sewage Disposal System**:

1. Soil and percolation tests performed by or under the direct supervision of a registered professional engineer (P.E.) and have their **original embossed stamp/seal and signature**. (Use Percolation Test and Soils Data Form & Percolation Test Result Form)

2. If the property is within the boundaries of the City and County of Broomfield sewage disposal district, and sewer is available within 100 feet of the property line, the application must be accompanied by a letter from the Director of Public Works giving the Public Health & Environment Division permission to issue an individual sewage disposal system permit for the property.

3. **It is the owner or applicant's responsibility to provide an accurate site plan, drawn to scale, and signed either by the owner or applicant. It must include:**

    a. Accurate directions to site
    b. Location of property (address, lot, block or other legal description)
    c. Location of percolation test holes and profile hole
    d. Accurate property boundaries, indication of North, location of existing or proposed structures, trees, driveways, domestic wells and neighboring wells, and neighboring septic tanks and septic systems within 100 feet of property lines
    e. Accurate location of streams, lakes, wetlands, irrigation ditches, washes, or other drainage conditions within the boundaries of the parcel and within 100 feet of the subject property line
    f. The design engineer's original embossed stamp/seal

4. The maximum slope in the area of the leach field must be listed by the engineer:

    a. Slopes over 15% need a topographic plot plan with 2-foot contours.
    b. Slopes over 20% need an Engineer Designed System.

5. The lot <u>MUST BE</u> marked with an address sign visible from the street. The area for the septic tank, the absorption field, the profile hole and the percolation holes must be staked and labeled.

6. A test pit may be required at the time of the site visit. (See Soil Profile Test Pit Requirements)

7. If commercial, engineer information regarding building use, number and type of fixtures, projected water use, and EPA UIC Form are required.

8. Upon completion of the system, the as-built drawing must be P.E. stamped and drawn to scale on The City and County of Broomfield as-built form.

9. Upon completion of the system, the City & County of Broomfield must receive a P.E. stamped letter from the engineer stating that the system was installed per the design.

10. A three day advance notice for any inspection is required, especially a final inspection.

This division may require additional soil, geological, hydrological, or engineering information provided by a Registered Professional Engineer if evidence suggests that undesirable subsurface conditions exist. The permit fees are: $523/New or $338/Repair and must accompany the application. **Make checks payable to: City & County of Broomfield**.

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Permit #: _____

APPLICATION TO: INSTALL an Individual Sewage Disposal System
(**$523**, includes a $23.00 State surcharge fee)
REPAIR an Individual Sewage Disposal System
(**$338**, includes a $23.00 State surcharge fee)
EXPAND an Individual Sewage Disposal System
(**$338**, includes a $23.00 State surcharge fee)

1. ADDRESS OF PROPERTY SERVED BY PROPOSED SYSTEM:

_____
Street Address City Zip Code

Parcel _____ 1/4 Sec _____ 1/4 Sec _____ Section _____ Township _____ Range _____
(Legal Description if no street address)

2. PROPERTY OWNER'S CURRENT MAILING ADDRESS:

Name: _____ Phone: _____
Address: _____
Street City Zip Code

3. APPLICANT:

Name: _____ Phone: _____
Address: _____
Street City Zip Code

4. SUBDIVISION: Lot _____ Block _____

_____ _____
Subdivision Name Filing (*if* applicable)

5. If GPS Information Available/Obtained:

a. Longitude___ ___ ___ Latitude ___ _____ Elevation _____

6. System Contractor/Installer: _____ License #: _____ Phone: _____

7. Soils/Percolation Test Engineer: _____ Phone: _____

8. Is this to be an Engineered System? Yes No

a. Design Engineer: _____ Phone: _____

9. Lot Size: _____ **Is lot marked and are perc holes staked? Yes No**

10. PROPOSED FACILITY:
Single Family Multi-Family Commercial Other

11. WATER SUPPLY:
Private Well: Yes No Community Water: Yes No If Yes, Supplier: _____

PERMIT #: _____

SINGLE FAMILY RESIDENTIAL GENERAL INFORMATION:

1. Number Bedrooms: _____
2. Basement: Full Walkout Partial None
3. Basement Plumbed: Yes No If yes, stub out elevation _____ Final grade elevation _____
4. Are additional bedrooms planned? Yes No
5. Are the premises within 100 ft. of a sewer line? Yes No
6. Is property within boundaries of a sewer district? Yes No

COMMERCIAL GENERAL INFORMATION:

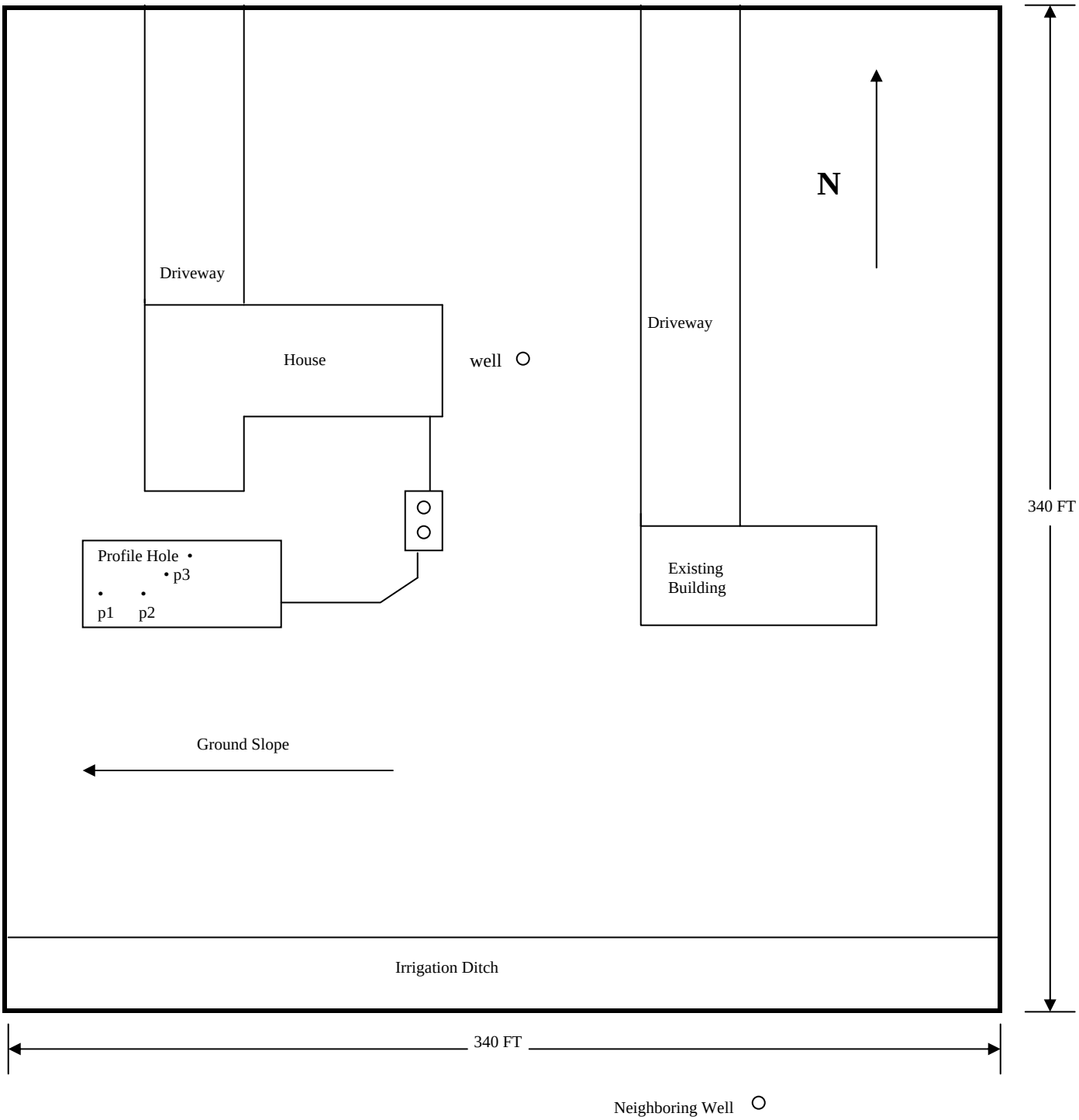
1. Type of Business: _____
2. Number of Employees: _____
3. Design Flow > 3,000 Gallons/Day Yes No
4. If yes, has site approval been given from CDPHE? Yes No
   (Note: Permit cannot be issued until site approval is given from CDPHE)
5. Floor Drains: Yes No
6. Basement Plumbed: Yes No If yes, stub out elevation _____ Final grade elevation _____
7. EPA Shallow Injection Well Inventory Request Form Completed? Yes No

Payment Type: Cash Date Paid: _____
Check #_____
Other _____

Amount Paid: $ _____
Received By: _____

Applicant's Name: _____
(Please Print)

Applicant's Signature: _____ Date: _____

Sample Plot Plan

15210 E. 144th Avenue