



OTERO COUNTY DEPARTMENT OF HEALTH

Serving Crowley and Otero Counties

ON-SITE WASTE WATER TREATMENT SYSTEM PERMIT APPLICATION

DATE: _____

APPLICANT: _____

ADDRESS: _____ PHONE: _____

ADDRESS OF SYSTEM _____ CITY: _____

SYSTEM CONTRACTOR: _____ PHONE: _____

PERMIT TYPE: ☐ New Installation ☐ New Installation – Engineer Designed System

☐ Absorption Field Repair/Alteration ☐ Basic Repair (Sewer Line, Clean Out or Tank

Replacement) ☐ Bank Request/Remodeling

TYPE OF BUILDING: ☐ Family Dwelling ☐ Commercial ☐ Non-domestic

SERVICES: Number of Bedrooms _____ Number of toilets _____ Number of sinks _____

☐ Garbage disposal ☐ Clothes washer ☐ Dishwasher ☐ Water softener/RO units

☐ Other: _____

☐ Unfinished Basement – If the unfinished basement is finished to contain bedrooms, the septic system must be evaluated by the Health Department to ensure it is sized appropriately for the additional occupancy of 2 people per bedroom. This may involve enlarging the septic system to meet the maximum occupancy of the home.

WATER SUPPLY: ☐ Community Water System – Name _____

☐ Well – Certification # _____ (required) ☐ Cistern – Potable water source _____

LOCATION OF PROPOSED AND EXISTING SYSTEM:

Lot Size _____ County _____

Distance from potable water supply: _____ Distance from dwelling: _____

FEE: Make check payment to: OTERO COUNTY PUBLIC WORKS

411 N 10th

Rocky Ford, CO 81067

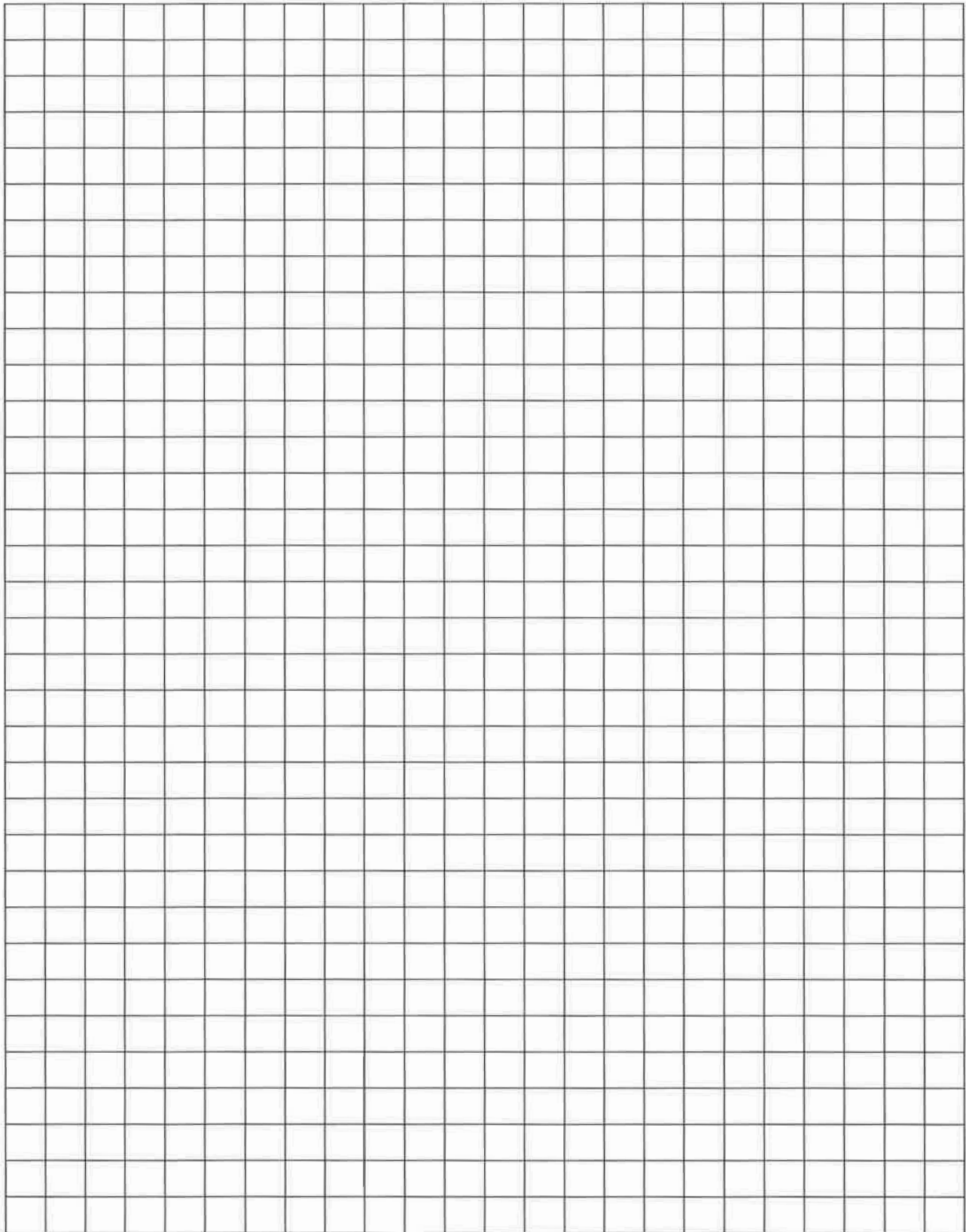
Telephone: 719-383-3035

APPLICANT SIGNATURE: _____

NOTE: Application will expire 1 year from received date.

For Health Department Use Only:

Date Received: _____ Cash/Check # _____ Amount Paid: _____



Make accurate measurements to septic tank covers and sewer line clean-outs.

OCHD 04/2021