



**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 _____

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: _____

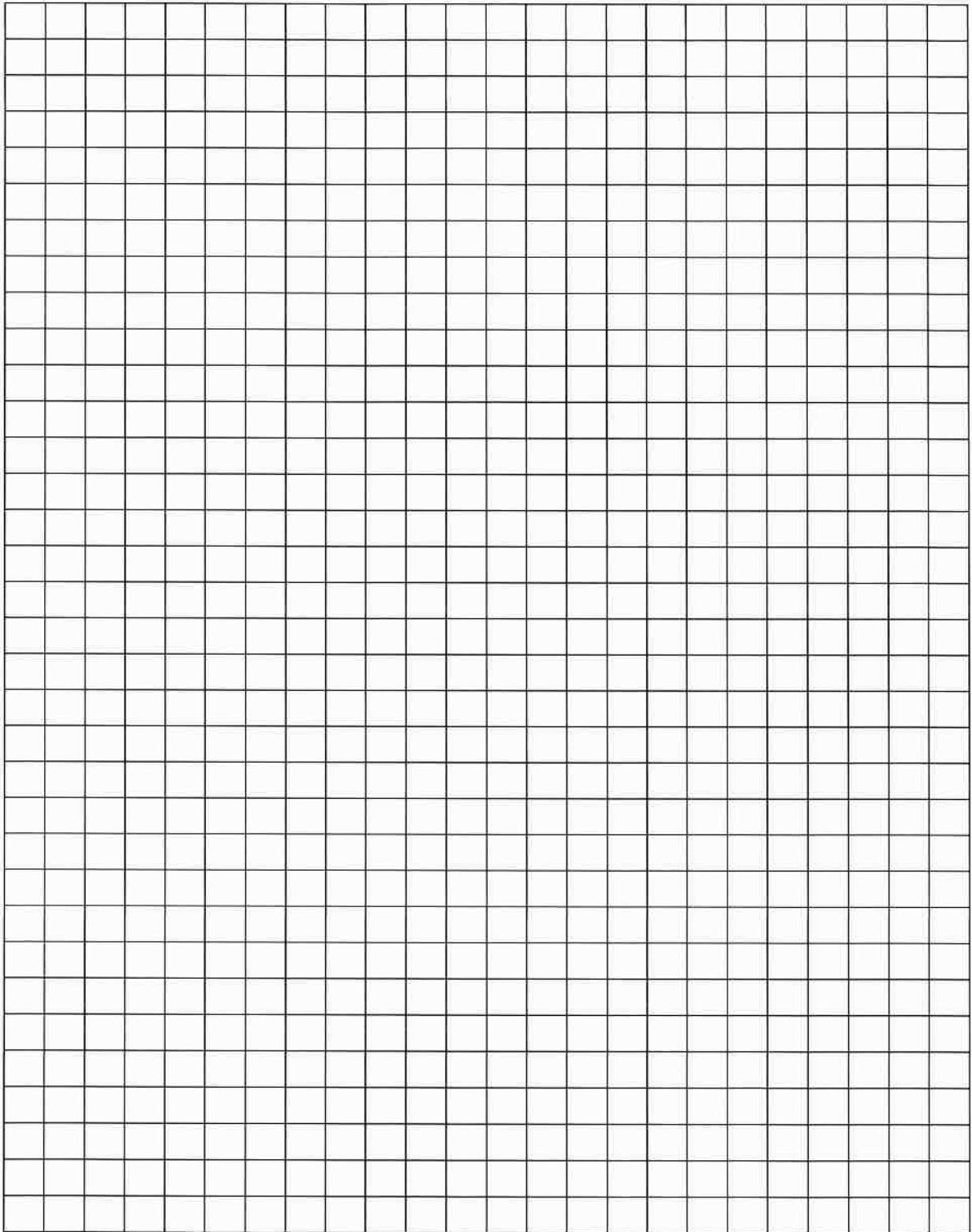
FEE: Make check payment to: OTERO CTY PUBLIC WORKS
411 N. 10th Street
Rocky Ford, CO 81067
Telephone: 719-383-3035

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.**