

**SEPTIC TANK OR COMPONENT
INSTALLATION PERMIT
Instructions and Application Form**

USE THIS PACKET TO APPLY FOR A PERMIT TO COMPLETE THE INSTALLATION OF A PARTIALLY-CONSTRUCTED SYSTEM OR TO INSTALL THE FOLLOWING SPECIFIC COMPONENTS OF AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM:

- A SEPTIC or DOSING TANK, only
- ABSORPTION BED or TRENCH (but using existing septic tank)
- ANY OTHER SINGLE COMPONENT THAT REQUIRES A PERMIT AND INSPECTIONS

Do not use this form to apply for a permit to install or replace a complete individual sewage disposal system, including septic tank and absorption or evaporation system. Use **FORM 100** (standard application), **FORM 110** (Review Cases) or **FORM 200** (Variance Cases – primarily sub-minimum lot sizes).

NOTE: Please verify that there is a **LEGAL ADDRESS** for the property through the Jefferson County Planning and Zoning Department (303 271-8700) before applying for your permit. Applications cannot be accepted unless a property has a legal address.

TO APPLY FOR YOUR PERMIT:

1. **COMPLETE PGS 1 - 3** of this application packet
2. **ATTACH TWO COPIES OF ENGINEERING REPORT AND SITE PLAN (soil tests not required for septic tanks or vaults)**
3. **SUBMIT CASH, CHECK or MONEY ORDER payable to “Jefferson County Treasurer”** for amounts shown on page 1. Note; There is also a separate state fee of \$20.00 made payable to “CDPHE-WQCD”. Do NOT mail CASH.

PROCESSING TIME

Allow approximately ten (10) working days to process your application and issue the permit. Lack of documents, required engineering changes or other deficiencies may significantly increase processing time.

STAFF CONTACTS:

LINDA JONES 303 271-5756
lonelj@jeffco.us

CRAIG SANDERS 303 271-5759
csanders@jeffco.us

APPLICATION FOR SEPTIC TANK OR COMPONENT INSTALLATION PERMIT

Property Address	City			ZIP
Legal Description*	Lot(s)	Block	Unit/Filing	Subdivision Name
(*For metes and bounds descriptions, please attach separate page with complete legal)				

FEES: **NEW PERMIT: \$500.00** **RENEWAL OF A PERMIT: \$250.00**

A state wastewater fee of \$20.00 is also required. Please attach a separate check payable to "CDPHE-WQCD" for this amount. CASH cannot be accepted for this fee.

APPLICANT NAME _____

MAILING ADDRESS _____

CITY STATE ZIP _____

PHONE _____ email _____

ENGINEERING FIRM _____

LOT SIZE _____ acres **BEDROOMS** _____ or 'NONE'

PREVIOUS PERMIT NUMBER (if applicable)
 If this permit will be issued to complete a system that was partially installed under a previous permit, please provide that former permit number: _____ **OW**

STRUCTURAL TYPE

<input type="checkbox"/> *Barn / Stable (commercial)	<input type="checkbox"/> *Office with
<input type="checkbox"/> Barn / stable – (personal use)	<input type="checkbox"/> *Recreational (public)
<input type="checkbox"/> *Dwelling – Bed & Breakfast	<input type="checkbox"/> *Recreational (commercial)
<input type="checkbox"/> *Dwelling – multifamily	<input type="checkbox"/> *Religious Institution
<input type="checkbox"/> *Dwelling – multiple structures	<input type="checkbox"/> *Restaurant with
<input type="checkbox"/> Dwelling – single family	<input type="checkbox"/> *Retail Facility with
<input type="checkbox"/> *Fire station	<input type="checkbox"/> *Studio / shop (commercial)
<input type="checkbox"/> *Garage (commercial)	<input type="checkbox"/> Studio / shop (personal)
<input type="checkbox"/> Garage (personal use)	
<input type="checkbox"/> *Other commercial use (specify) _____	
<input type="checkbox"/> Other personal use (specify) _____	
<input type="checkbox"/> *Other public use (specify) _____	

NOTE: an ASTERISK (*) means that Board of Health Review of the application is sometimes required – call for information.

MAP TO PROPERTY

INSTRUCTIONS: Please **DRAW** a driving map to the site for the field inspectors, beginning at the last major intersection, or attach a map from Google®, MSN Maps® or similar a similar web-based site, making sure that it accurately reflects the property location. **DO NOT JUST WRITE DIRECTIONS!**

If the property is in a security or gated area, please indicate the code below or provide other instructions for entry. Remember that you must have the address posted on the property prior to our site visit and the location of the proposed well and absorption / evaporation system must also be staked. Failure to do so may result in a significant delay in processing your application!

SECURITY GATE CODE
(if applicable)