

**USE PERMIT FOR EXISTING INDIVIDUAL
SEWAGE DISPOSAL SYSTEM
Instructions and Application Forms**

Use this packet to apply for a Use Permit for an existing individual sewage disposal system. A Use Permit is required for the sale of a year-round occupied single family dwelling or non-residential structure. A Use Permit may also be required for certain planning and zoning case approvals as well as the remodeling or reconstruction of an existing dwelling.

Use **FORM 800** for sale of a limited occupancy dwelling that does not have a standard individual sewage disposal system (such as a privy or outhouse).

Use **FORM 704** to renew a current use permit for a property that has not yet closed.

Before applying for the use permit, a private use permit inspector must pump the septic tank and inspect the system – the County does not perform this work. A list of inspectors may be found at the website shown above. The Use Permit inspector will then provide you with complete copies of FORMS 701, 702 (and 703, if necessary) to be submitted along with this FORM 700.

TO APPLY FOR YOUR PERMIT:

1. **SUBMIT** the following forms:

- FORM 700, (this form) signed by the current owner.
- FORM 701, (inspection report) dated with 30 days of application date
- FORM 702, (pumping report) dated within eighteen (18) months of application date
- FORM 703 (for mechanical systems only) dated within 30 days of application date.

2. **ATTACH** check for **\$100.00** (do not send cash in mail) payable to Jefferson County Treasurer.

PROCESSING TIME

Allow 7-10 working days to process your application.

DEPARTMENT CONTACTS

Linda Jones

303 271-5756

jonelj@jeffco.us

Date Received

APPLICATION FOR USE PERMIT - FEE: \$100.00

Property Address					
Legal Description	Lot(s)	Block	Unit	Subdivision Name	
	(or) Quarter Section(s)		Section(s)	Township	Range

IF USE PERMIT IS FOR SALE OF PROPERTY, provide the following:

Closing Date _____ Resolution Date _____ or **TBD**
Agent name and phone number: _____

IF USE PERMIT IS FOR A PLANNING OR ZONING CASE, provide the following:

Planning or Zoning Case Number _____

Applicant: NAME _____
MAILING ADDRESS _____
CITY STATE ZIP _____
PHONE _____ email _____

Current Owner: NAME _____

Structure Type

- | | |
|--|---|
| <input type="checkbox"/> Barn / Stable (commercial) | <input type="checkbox"/> Office |
| <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 |
| <input type="checkbox"/> Dwelling – single family | <input type="checkbox"/> Retail Facility |
| <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) _____ |

Owner Statement Regarding Operational Status of an Existing Individual Sewage Disposal System

By applying for this permit, the owner states that, to the best of their knowledge, the individual sewage disposal system on the property described in this application has functioned properly for a period of at least one year prior to the date of this application (or date property became vacant), meaning that none of the following has occurred: surfacing of sewage from any portion of the system (or a buildup of ice during winter months); slow or sluggish drains; damage to any part of the system; or any other factor that would impact the suitability and operation of the system. The owner also grants the health officer access to the property to verify information contained in any document or report submitted with this application.

OWNER

DATE

PLEASE ATTACH THE FOLLOWING:

- **FORM 701** (individual sewage disposal system inspection form) dated not more than thirty (30) days prior to the date of the use permit application (required).
- **FORM 702** (pumping and inspection report) dated not more than eighteen (18) months prior to the date of the use permit application (required).
- **FORM 703** (mechanical and aeration system report) dated not more than thirty (30) days prior to the date of the use permit application (for mechanical treatment systems only).

WHEN ISSUED, THE USE PERMIT SHOULD BE (PLEASE PICK ONE):

- Mailed to the applicant shown on page 1
- Mailed to _____

- Emailed to: _____
- Faxed to _____
- Held for pickup (call) _____