

PERMIT FEE: \_\_\_\_\_

PERMIT NO: \_\_\_\_\_

# Town of Pitkin, CO

## On-site Wastewater Treatment System (OWTS)

### Permit Application

Applicant must fill in each section of this two-page document and include required documents.  
 Refer to the OWTS guide for further clarification on the application requirements  
 and procedures as specified in Regulation 43.4.B.

TYPE OF PERMIT:            \_\_\_\_\_ NEW    \_\_\_\_\_ ALTERATION    \_\_\_\_\_ REPAIR  
 VARIANCE GRANTED:        \_\_\_\_\_ N/A    \_\_\_\_\_ YES, ATTACHED

OWNER: \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_  
 PHONE NUMBER: \_\_\_\_\_  
 EMAIL ADDRESS: \_\_\_\_\_

LICENSED SEPTIC CONTRACTOR: \_\_\_\_\_ LICENSE # \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_  
 PHONE NUMBER: \_\_\_\_\_  
 EMAIL ADDRESS: \_\_\_\_\_

LICENSED ENGINEER: \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_  
 PHONE NUMBER: \_\_\_\_\_  
 EMAIL ADDRESS: \_\_\_\_\_

PRIMARY PROJECT CONTACT PERSON: \_\_\_\_\_  
 PROJECT DESCRIPTION: Please identify all existing buildings/development and identify all  
 proposed building/development on the parcel. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

LEGAL DESCRIPTION OF SUBJECT PROPERTY: LOTS \_\_\_\_\_ BLOCK: \_\_\_\_\_  
 ADDRESS OF SUBJECT PROPERTY: \_\_\_\_\_  
 TYPE OF CONSTRUCTION: \_\_\_\_\_  
 NUMBER OF BEDROOMS: \_\_\_\_\_ NUMBER OF BATHROOMS: \_\_\_\_\_  
 CLOTHES WASHER: YES/NO \_\_\_\_\_ GARBAGE DISPOSAL: YES/NO \_\_\_\_\_  
 TYPE OF OWTS: \_\_\_\_\_ TANK SIZE: \_\_\_\_\_  
 ABSORPTION AREA DESCRIPTION/SIZE: \_\_\_\_\_

PERMIT FEE: \_\_\_\_\_

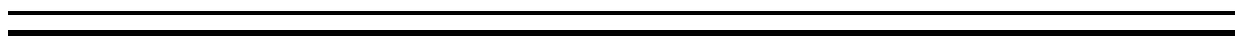
PERMIT NO: \_\_\_\_\_

**THE FOLLOWING ITMES MUST BE SUBMITTED  
WITH THE OWTS APPLICATION**

Check all that items that are included with this application:

- Report from Site and Soils Evaluation and Site Plan (in accordance with Colorado Regulation 43.5(F))
- Vicinity Map: General area map showing the location proposal on a typical U.S. Geological Survey map, U.S. Forest Service map, or County parcel map, available from the Gunnison County Geographic Information Services Department or the Gunnison County Assessors Office.
- System Design: A legible, accurate site plan which shows pertinent physical features on subject property, and on adjacent properties (in accordance with Colorado Regulation 43.5.G.)
- Copy of Well Permit, if applicable.
- Surcharge: \$23.00
- New System Fee: \$400
- Repair or Alteration Fee: \$200

Signature of Owner/Contractor: \_\_\_\_\_ Date: \_\_\_\_\_



Do not write below the double line

**OFFICE USE ONLY**

PERMIT STATUS: \_\_\_\_\_ APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_ DATE: \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_

IF REPAIR PERMIT: Specify reasonable period of time within which the owner or occupant must make repairs. At the end of that period, the local public health agency must inspect the system to ensure it is functioning properly (43.4.B.7.B) \_\_\_\_\_

\_\_\_\_\_

REVIEWED BY: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_