Recycled Paper

Tri-County Health Department

Serving Adams, Arapahoe and Douglas Counties Permit # 1999-07-006020

Chris J. Wiant, M.P.H., Ph.D.
Executive Director

PERMIT TO CONSTRUCT
AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM
Tri-County Health Department
7000 East Belleview Avenue Suite 301
Englewood, Colorado 80111

Owner BERTON C. MYRICK
Location: 7773 Corona Court Larkspur CO 80118
Subdivision: Sterling Pointe County: Douglas

==========

Design Requirements:

Install system per specifications of the Design Engineer

Number of Chambers: Refer to TCHD Form #S-183 Rev Date 12/15/97

Special Conditions
INSTALL SYSTEM AS PER CASTLE ROCK DESIGN GROUP INC., JOB NO. 99-1882-OWTS.

==========

A Permit to CONSTRUCT shall expire ONE YEAR from the date of issuance unless extended to a fixed date upon request by the Applicant and approved by the Tri-County Health Department.

This Permit Expires: 05/18/2000

Issued by: Kleckner, John T., John T. Kleckner EHS

Tri-County Health Department on May 18, 1999

OWNER MUST MAKE SURE THAT HIS/HER ENTIRE WASTE DISPOSAL SYSTEM REMAINS OPEN FOR INSPECTION UNTIL IT HAS RECEIVED APPROVAL BY TRI-COUNTY HEALTH DEPARTMENT. TRI-COUNTY HEALTH DEPARTMENT CANNOT ASSUME RESPONSIBILITY IN CASE OF FAILURE OR INADEQUACY OF A WASTE DISPOSAL SYSTEM BEYOND CONSULTING IN GOOD FAITH WITH THE PROPERTY OWNER.

Permit Fee: 300.00 Payment Method Check #2085

Received By: Dutton, Becky on 05/11/1999

( )Owner Copy ( ) Bldg. Dept. Copy ( ) Installer Copy ( ) H.D.

For Accounting Use Only:
680-500000 300.00

Fifty years of working to **50** *improve the public's health*

101 Third Street □ Castle Rock, Colorado 80104-2428
303-663-7650 □ FAX 303-688-8870

CASTLE ROCK DESIGN GROUP, INC.

GEOTECHNICAL & STRUCTURAL CONSULTANTS
FOUNDATION & SEPTIC SYSTEM DESIGNS

101 Briscoe Street • Unit A • Castle Rock, CO 80104
Phone/Fax (303) 688-5151

MYCO & Associates, LLC
1582 South Parker Road, #306
Denver, CO 80231

Date: January 14, 2000
Job No.: 4-1249owts

Certification of On-Site Wastewater Treatment System inspection for a residence located at Lot 30, Filing #3, 7773 Corona Court, Sterling Point subdivision, Douglas County

This is to certify that an inspection was made of the On-Site Wastewater Treatment System and was found to be in accordance with the design and specifications with the following exceptions, if any:

Remarks: Actual field area: 5100 sq. ft. vs. design field area: 5200 sq. ft. A 2 percent deficiency is acceptable.

CASTLE ROCK DESIGN GROUP, INC.

Reviewed by:

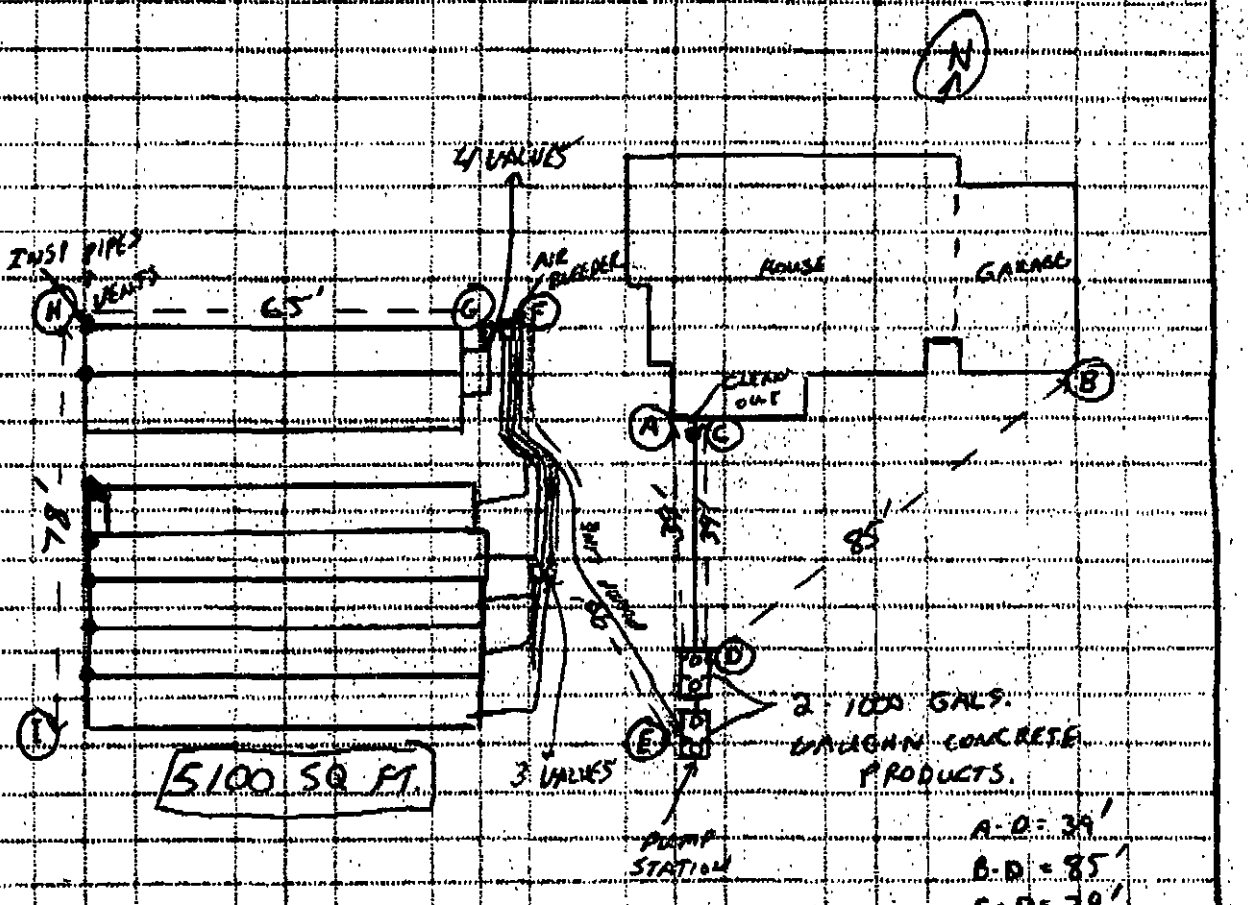
Robert S. Park, P.E.

dcc

ATTN: JACK K.

Onsite System As-Built Drawing

Property Address 7773 CORONA CT
Permit #
Date System Completed JAN 2000
Installer's Name M-DIRT EXC.
Installer's License # 0180
Installer's Address and Phone
783-2879



5100 SQ FT

TCHD S-103 1/88

Tri-County Health Department

Serving Adams, Arapahoe and Douglas Counties

Chris J. Wiant, M.P.H., Ph.D.
Executive Director

CERTIFICATION OF INDIVIDUAL SEWAGE DISPOSAL SYSTEM

This certifies that Individual Sewage Disposal System (ISDS) at
7773 Corona Court Larkspur CO 80118
Subdivision: Sterling Pointe County: Douglas
has been permitted and installed in compliance with Tri-County Health Department Regulation Number I-96. A file for the ISDS will be kept in our Castle Rock office.

SUMMARY OF INFORMATION

The permit number for the system was: 1999-07-006020

The soils and percolation test was performed by: Colorado Soil

The design engineer for the system was: Castle Rock Design Group

The system was installed by: M-dirt Excavating

The system consists of:

A 1,000 gallon septic tank and 1,000 gallon dosing tank and 5,100 square foot absorption area.

The system is sized for 3 bedrooms. If additional bedrooms are added, an expansion may be necessary.

Maintenance Requirements:

The septic tank must be pumped and inspected every 4 years

If the septic or dosing tank is equipped with an effluent filter, the filter must be cleaned annually

If the system has alternating beds or is a drip irrigation system, beds or zones must be rotated annually

Additional maintenance requirements may apply. Refer to the operations manual or engineer's report for specific requirements.

Signature: John T. Kleckner PE
KLECKNER, JOHN T.

Date: 5-17-00

101 Third Street □ Castle Rock, Colorado 80104-2428
303-663-7650 □ FAX 303-688-8870

PERMIT # 1999-07-6020

TRI-COUNTY HEALTH DEPARTMENT

Serving Adams, Arapahoe and Douglas Counties

APPLICATION TO

☒ INSTALL(255) ☐ REPAIR(256) ☐ EXPAND(256)

$300 $250 $250

AN INDIVIDUAL SEWAGE DISPOSAL SYSTEM

ADDRESS OF PROPERTY SERVED BY PROPOSED SYSTEM:

7773 Corona Court — Street Address
Larkspur Co. — City
80118 — Zip Code
Douglas — County

Parcel ____ 1/4 Sec ____ 1/4 Sec ____ Section ____ Township ____ Range ____ Lot ____ Block ____
Legal Description (if no street address)

Sterling Pointe — Subdivision Name
____ Filing (if applicable)

If GPS Information Available/Obtained: Longitude ___ ___ ___ Latitude ___ ___ ___ Elevation ____

Property Owner:
Name Berton C. Myrick
Address 16723 E. Kenyon Dr.
City, State Aurora Co.
Zip 80013 Phone 303-690-6179

Applicant:
Name Berton C. Myrick
Address 16723 E. Kenyon Dr.
City, State Aurora Co.
Zip 80013 Phone 303-690-6179

Systems Contractor: Jim Patterson Co. TCHD Use Only: License # ____
Soils/Percolation Test Engineer Colo. Soil Job # ____
TCHD Use Only: FSE # ____
Design Engineer (if applicable Job # ____
TCHD Use Only: FSE # ____

Is this to be an Engineered System? ☒ Yes ☒ No

Lot Size: 2.3 Ac. Is Lot Marked and Are Perc Holes Staked? ☒ Yes ☐ No

PROPOSED FACILITY:

☒ Single Family (SF) ☐ Multi-Family (MF) ☐ Commercial (CM) ☐ Other (OT) ____

WATER SUPPLY:

On Site: ☒ Yes ☐ No Community Water ☒ Yes ☐ No If Yes, Supplier Berry Park Water

Continued on back

PERMIT # 6020

SINGLE FAMILY RESIDENTIAL GENERAL INFORMATION:

Number of Bedrooms 3 Basement: ☒Full (F) ☒Walkout(W) ☐Partial(P) ☐None(N)

Basement Plumbed: ☒Yes ☐No

Are Additional Bedrooms Planned? ☐Yes ☒No Are the premises within 400 ft. of a sewer line? ☐Yes ☐ No

Is property within boundaries of a sewer district? ☐Yes ☒No

If Yes, name of sewer district _____

COMMERCIAL GENERAL INFORMATION:

Type of Business: _____

TCHD Use Only: SIC Code: _____

Number of Employees _____

Design Flow > 3,000 Gallons/Day ☐Yes ☐No

If Yes, has Site Approval been given from CDPHE? ☐Yes ☐No

(Note: Permit cannot be issued until site approval is given from CDPHE)

Floor Drains ☐Yes ☐No

EPA Shallow Injection Well Inventory Request Form Completed ☐Yes ☐No

---

Date Paid: 5-11-99 Received By: bd

Payment Type: ☐ Cash

☒ Check (# 2085)

☐ Charge

☐ Other _____

Amount Paid $ 300.00

Applicant's Name Berton C. Myrick
Please Print

Applicant's Signature Berton C. Myrick Date 5-11-99

☐ Aurora
1400 E. 14th Place
Suite 309
Aurora, CO 80011
303-341-9370

☐ Castle Rock
101 3rd Street
Castle Rock, CO 80104
303-663-7650

☐ Commerce City
4301 E. 72nd Avenue
Commerce City, CO
80022
303-288-6816

☐ Englewood
4857 S. Broadway
Englewood, CO 80110
303-761-1340

☐ Northglenn
10190 Bannock Street,
Suite 100
Northglenn, CO 80221
303-452-9547

Douglas County Septic, Inc. · 10333 Wildlife Way · Littleton, CO 80125 · Tel. 303-791-7716 · Fax 303-791-3304 ·

To: TCHD-CR
Fax #: 3036888870
Company: TCHD-CR

Fax #: 303-791-3304
Tel #: 303-791-7716

Pages: 1 (including cover)

Subject:

MESSAGE:

As soon as practicable, please fax back the as-built drawing(s) for the following address(es):

1680 Elk View Rd. 2 as-builts house/barn

7773 Corona Ct.

Faxed 10/2/06

FINAL VISIT WORKSHEET

Permit Number: **1999-07-006020** Date Printed: May 18, 1999

Property Location: 7773 Corona Court Lot 30
County: Douglas
Owner: Berton C. Myrick
System Installer: Jim Patterson Co, 60000173

SITE INFORMATION:

Keys for completing information on installed tanks:
Usage (D)osing (T)reatment (V)ault

Tank Manufacturer

100	Aguilars Corp	102	Colorado Precast	103	Copeland
104	Dekta Env. Products	105	Erie Precast	106	Firebaugh Pre-Cast
107	Front Range Precast	108	Schmitt Reddi Mix	109	Sterling Pre Cast
110	Vaughn Concrete				

Tank Type: (C)oncrete (PT)Polyethelene (FG)Fiber Glass

TANK INFORMATION

Number of Tanks Installed: 2
Tank Size in gallons and Usage:

Tank 1:	Tank 2:	Tank 3
Size 1000	Size 1000	Size
Use (D) (T) (V)	Use (D) (T) (V)	Use (D) (T) (V)
Mfg 110	Mfg 110	Mfg
Type (C) (PT) (FG)	Type (C) (PT) (FG)	Type (C) (PT) (FG)
T's or	T's or	T's or
Baffles (T) (B)	Baffles (T) (B)	Baffles (T) (B)
Effluent	Effluent	Effluent
Screen Y (N)	Screen Y (N)	Screen Y N

Secondary Treatment System Y (N) If yes, type: (circle one)
Sand Filter (SF) Constructed Wetlands (CW) Trickling Filter (TF)
Aerobic System (AS) Recirculating Sand Filter (RSF) Other (OT)

Final Treatment Type:

Bed (BD)	Mound (MD)	Trench (T)
ET (ET)	Pond (PD)	Sand Filter (SF)
Bed (Chambers) (BD-CH)	Trench SB-2 (TR-SB)	Drip Irrigation (DR)
Trench (Chambers) (TR-CH)	Other (OT)	
Area Size (s.f.) 5100	If Chambers Used, #	ET Lined Y N

Method of Waste Water Application:

Dosed w/Pump (DP)	Dosed w/Siphon (DS)	Gravity (GR)
Uniformly Dosed w/ Pump (UDP)	Uniformly Dosed w/ Siphon (UDS)	

Continued on Next Page

2-1000 - Vaughn
5100 sq ft.

FINAL VISIT WORKSHEET

Permit Number: **1999-07-006020** Date Printed:

RECORD OF SITE VISITS:

(It is important to record any extra visits for billing purposes)

Visit 1 Date 1/10/00 By (EHS #) 408

Visit 2 Date _____ By (EHS #) _____

Visit 3 Date _____ By (EHS #) _____

Visit 4 Date _____ By (EHS #) _____

TCHD Engineer Review **Y** **N** Time _____ EHS# _____

FINAL SITE VISIT COMMENTS:

√ Need Eng. letter - comment on 5100 not 5200

√ AS-Built

Final Approval Given ~~Y~~ N By (EHS #) 832 Date 5-17-00

Tri-County Health Department

Serving Adams, Arapahoe and Douglas Counties

Chris J. Wiant, M.P.H., Ph.D.
Executive Director

Berton C. Myrick
16723 E. Kenyon Drive
Aurora CO 80013

RE: Individual Sewage Disposal System located at:
7773 Corona Court, Permit # 1999-07-006020

On 1/10/00, a partial septic system inspection was conducted on the above referenced property. The following item(s) must be completed and/or submitted prior to this Department giving final approval of your Individual Sewage Disposal System installation:

- ✓ As-Built Drawing from System Installer M-Dirt
- ✓ Final Approval Letter from System Engineer Castle Rock design
- ___ System Engineer's Letter Regarding Pump Station
- ___ Signed Plot Plan
- ___ Installation of a Snifter Valve
- ___ Other: _____

If the Individual Sewage Disposal System is not approved for use by this Department, the file will reflect this and it may prevent the issuance of a Certificate of Occupancy or have an adverse effect on any future sale of this property.

If you have any questions concerning this letter, please call 303/663-7650.

Sincerely,

John Kbeckman

Environmental Health Specialist
Tri-County Health Department

101 Third Street □ Castle Rock, Colorado 80104-2428
303-663-7650 □ FAX 303-688-8870

Tri-County Health Department Inspection Report

Establishment Name	Establishment I.D.	Page / Date
Address	Received By	
City / State	Inspected By	

Item No.	Remarks	Corrected By

T.C.H.D. - 1/11/00

Mark, Jack was here. Approved, Good Job!

Need Robert Park's letter of approval.

Bury it Burba!

Need AS-Built

CASTLE ROCK DESIGN GROUP, INC.

GEOTECHNICAL & STRUCTURAL CONSULTANTS
FOUNDATION & SEPTIC SYSTEM DESIGNS

101 Briscoe Street • Unit A • Castle Rock, CO 80104
Phone/Fax (303) 688-5151

Weep hole
Header event

PREPARED FOR

BERTON MYRICK
16723 E. KENYON DRIVE
AURORA, COLORADO 80013

ONSITE WASTEWATER TREATMENT SYSTEM DESIGN

OF

7773 CORONA CT.,
LOT 30, STERLING POINTE SUBDIVISION,
DOUGLAS COUNTY, COLORADO

JOB NO: 99-1882-OWTS
MAY 13, 1999

GENERAL

As requested, we have reviewed percolation test results by Colorado Soil Report, Job No. 96-802, Dated 12/13/96 for the subject site. The purpose of our review was to evaluate subsurface conditions and to design an onsite wastewater treatment system (OWTS).

SITE CONDITIONS

The site currently is vacant. Our understanding is that a 4-bedroom single family home is planned to be built at 7773 Corona Court, Lot 30, Sterling Pointe Subdivision, Douglas County, Colorado. The location of the site, percolation tests and proposed OWTS are presented in Figure 1 and 2.
The sewage loading for a 4-bedroom dwelling is 600 gallons per day (GPD), 1,440 GPD with a 1.5 safety factor. The design loading includes a garbage grinder and washing machine.

SUBSURFACE CONDITIONS

Subsurface conditions were investigated by one profile test hole and three percolation holes, as indicated on Figure 1. Subsurface conditions encountered consist of clayey sand overlaying silty sandstone bedrock to the depth of 10 feet. No free water was encountered in the profile hole. The average percolation rate is 140 MPI.

RECOMMENDATIONS

We recommend a low pressure shallow trench OWTS be installed in the natural soils. We recommend the OWTS be designed based on a percolation rate of 180 MPI, which is an application rate of 0.18 gallons/square foot / day (GAL/SF/DAY). This application rate utilizes slow rate soil absorption. The OWTS should be designed for a sewage load of 1,440 GPD. A low pressure shallow trench disposal system design based on an application rate of 0.18 GAL/SF/DAY and a sewage load of 1,440 GPD is presented on Figures 2 through 4. As indicated on Fig. 2, the disposal field has an area of 7,000 square feet (SF) in 7 sections. **The OWTS installer must be approved by this office before work begins on this system.**

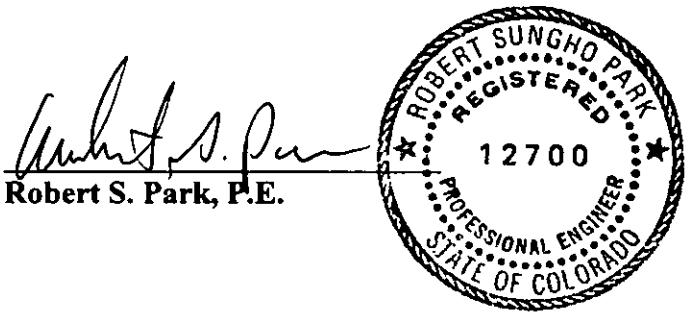
If more bedrooms are added the system will have to be increased to accommodate the new sewage load which will mean an increase in tank size and field size. The installation of a properly sized OWTS to serve future buildout can be cost effective.

We recommend the surface of the field be seeded after installation of the system. A good native grass cover will prevent erosion. We recommend a seed mix such as a "Foothills, Pasture, or Prairie" mixes available at local seed stores. These mixes do not require irrigation and develop a growth of 10 to 15 inches high. No automatic sprinkler system should be installed over the field.

The owner must realize an OWTS is different from public sewer service. The owner must be aware of and assume responsibility for maintenance of the system. The system is relatively maintenance free, but the owner must have the septic tanks pumped. We recommend the tanks be pumped every two years. There are daily considerations, such as not putting plastic or other nonbiodegradable material into the septic system. Water use must be monitored so toilets are not allowed to run if the seals malfunction. To illustrate the point, a running toilet will consume an excess of 1000 gallons per day, if allowed to run. As the system is designed for 1,440 GPD, an excess 1000 GPD loading could irreparably harm the system. No discharge from water softeners, spas, or pools should be directed to the OWTS.

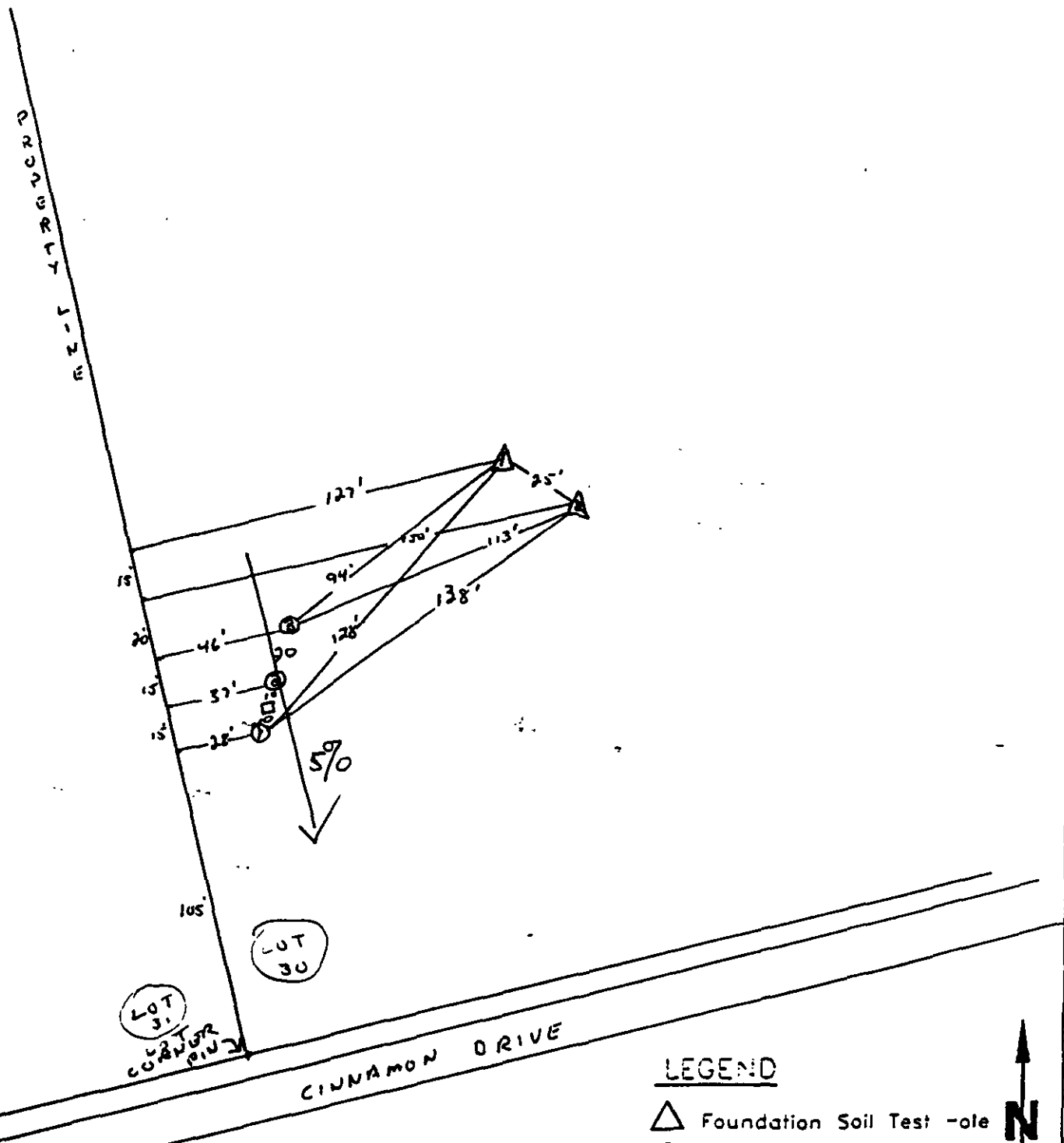
LIMITED

Our investigation, layout, and recommendations are based on data submitted. If conditions different from those described in this report are encountered, we should be notified to evaluate the effect of the changes on the proposed OWTS. If modifications to our recommendations are made by local health departments, we should be contacted to evaluate the impact to our OWTS recommendations.



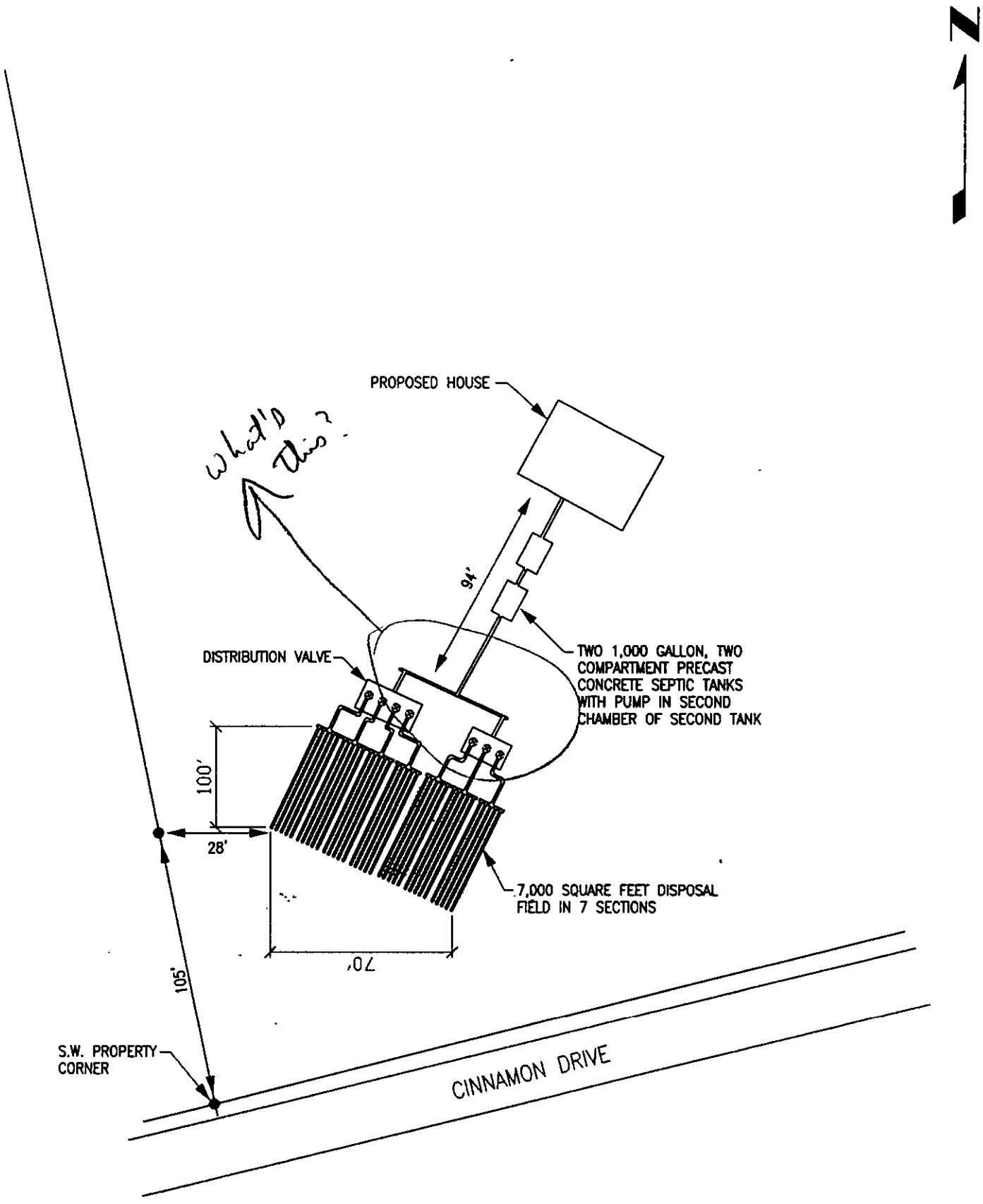
Robert S. Park, P.E.

Location Plan



PROJECT NUMBER	96-802
ADDRESS/LEGAL N.W. CORNER CINNAMON/SUNSET STERLING POINTE LOT 30 FILING 3	
DOUGLAS COUNTY	

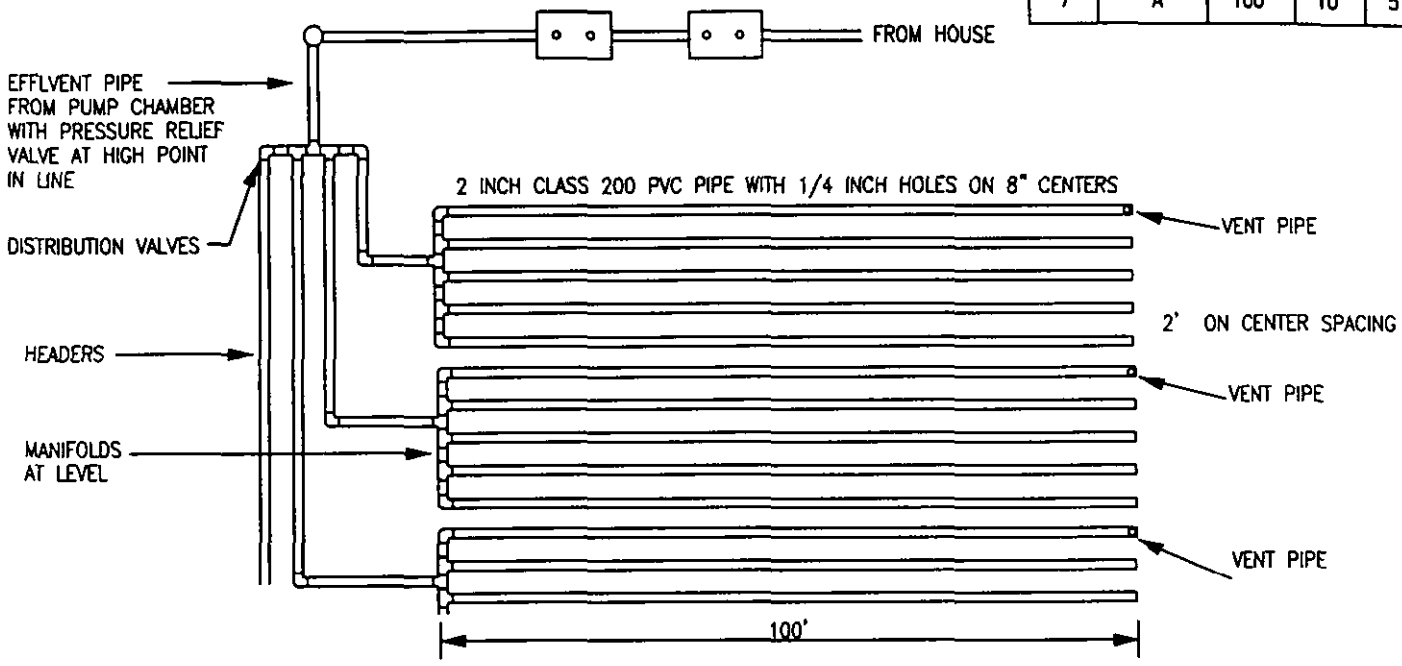
Figure 1



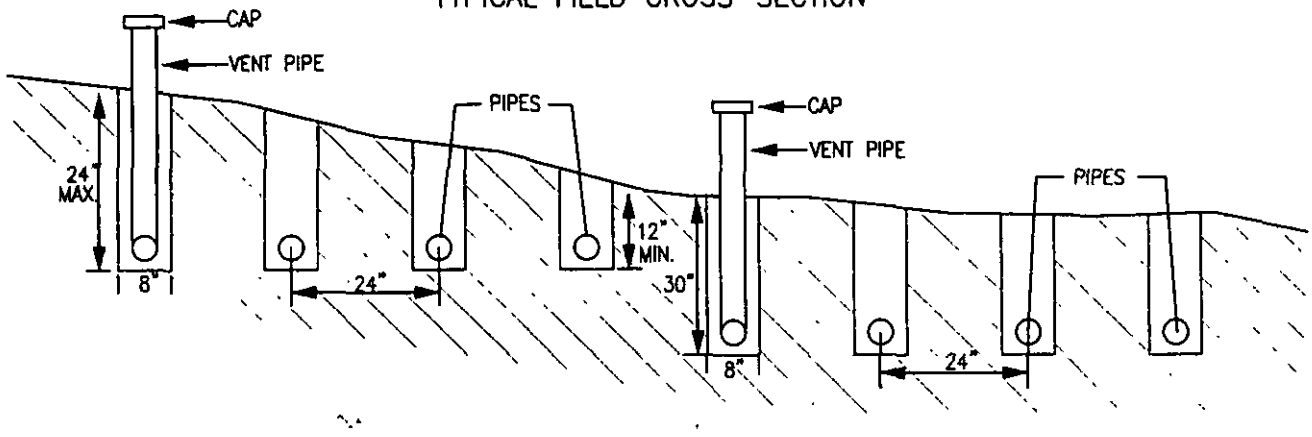
CASTLE ROCK DESIGN GROUP INC.	DISPOSAL FIELD LAY-OUT	DATE: 05/13/99
	Consulting Engineering	JOB NO. 99-1882
	Soil & Percolation Test, Foundation & Septic System Design	FIG. NO. 2

TYPICAL PLAN VIEW

NO.	SECTION	LENGTH	WIDTH	LINES
7	A	100'	10'	5



TYPICAL FIELD CROSS-SECTION



SPECIFICATIONS AND DESIGN CALCULATIONS

TREATMENT UNIT

1. TWO 1000 GALLON 2 COMPARTMENT SEPTIC TANKS WITH PUMP IN SECOND CHAMBER OF SECOND TANK.
2. PUMP 1/2 H. P. SK-50, BY HYDROMATIC
3. ALARM / CONTROL LOCATION AT OWNER'S REQUEST.
4. RISERS 7
5. DRAIN BACK ____ TO PUMP CHAMBER OR FIELD.
6. OTHER ____

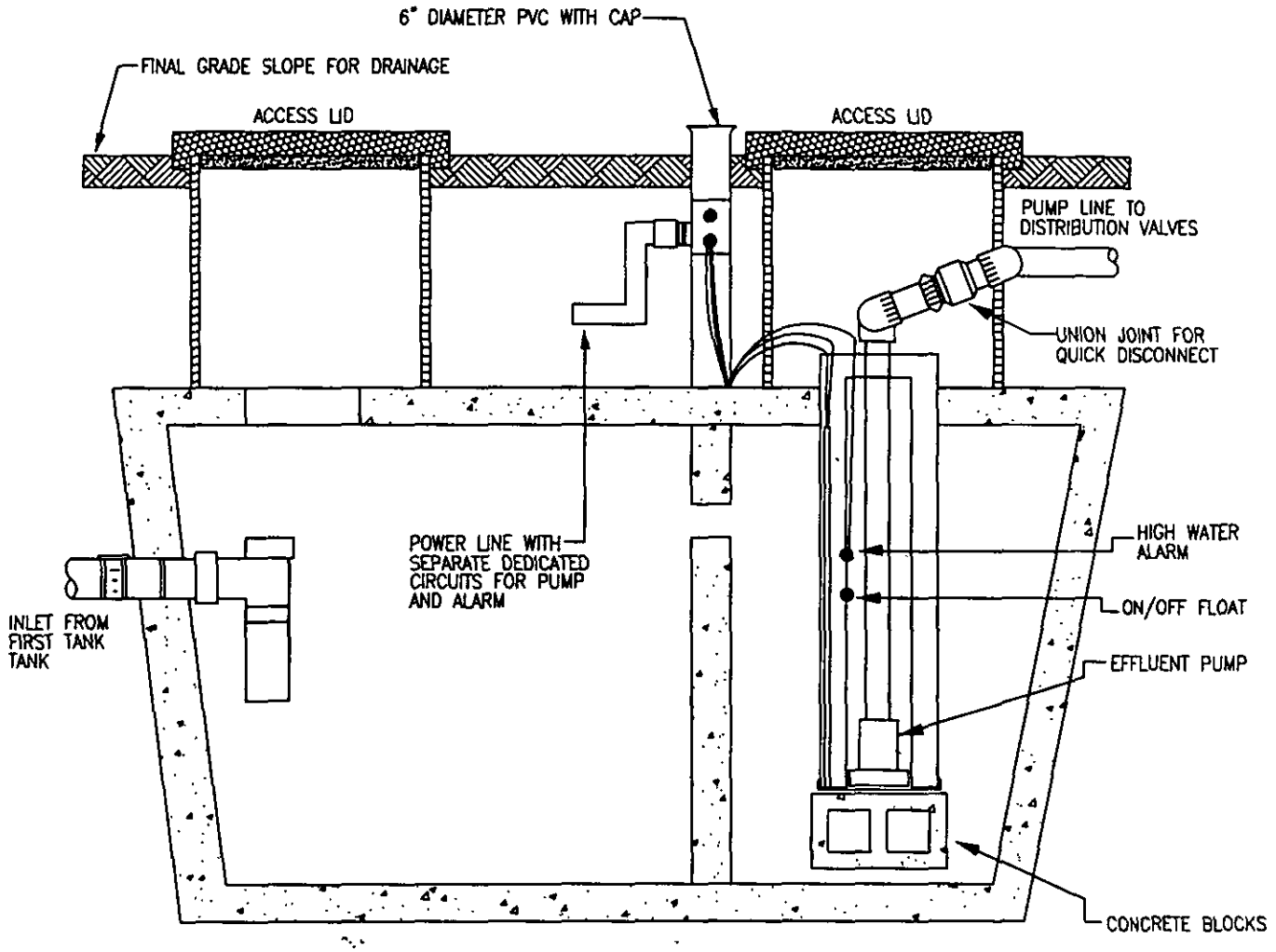
3 Bdrms
5265
5200
5300

DISTRIBUTION FIELD

1. BEDROOMS 4 (Q GAL.) 600
2. PERCOLATION RATE (MPI) 180
3. DISPOSAL RATE (R GAL/SF/DAY) 0.18
4. AREA = (Q/R) (1.5) (1.6) (0.75) (1.17) = 7,000
5. FIELD AREA (SQ. FT.) 7,000
6. FIELD LINE (LN. FT.) 3,500
7. TRENCH SIZE 8 INCHES.
8. LANDSCAPING BY OWNER.
9. OTHER ____

CASTLE ROCK DESIGN GROUP INC. — Consulting Engineering — Soil & Percolation Test, Foundation & Septic System Design	*SHALLOW TRENCH DETAILS*	*DATE: 05/13/99*
		JOB NO. 99-1882
		FIG. NO. 3

1000 GALLON TWO COMPARTMENT PRECAST CONCRETE SEPTIC TANK OR SEPRATE
500 GALLON CHAMBER. (APPROVED TANK WITH 18" OPENING)



SPECIFICATIONS

1. MINIMUN PUMP CAPACITY 30 GPM AT A 15 FOOT HEAD
2. PUMP ON LEVEL WITH A MINIMUM OF 150 GALLONS FOR PUMPING
3. INSTALL PRESSURE RELIEF VALVE AT HIGH POINT IN PUMP LINE.
4. AUDIBLE ALARM IN BUILDING . ALARM LEVEL 3 INCHES ABOVE 'ON FLOAT LEVEL OF TANK TO BE INSTALLED ON DEDICATED CIRCUIT

CASTLE ROCK DESIGN GROUP INC.	*PUMP CHAMBER DETAIL*	*DATE:* 05/13/99
	Consulting Engineering	*JOB NO.* 99-1882
	Soil & Percolation Test, Foundation & Septic System Design	*FIG. NO.* 4

Tri-County Health Department
Percolation Test and Soils Data Form

Property address 7773 Corona Ct. Stageport.

Legal description LOT 30, FILING 5, STERLING POINTE SUB., DOUGLAS COUNTY

Property Owner:

Name ~~David Moore~~ Benton Myrick

Address ~~1110 S. EATON CIRCLE, APT. 2F, CASTLE ROCK, CO 80104~~ 16723 E. Kenyon Dr. Aurora, CO. 80013

Phone ~~814-1239~~ 303-690-6129

Note:

- Percolation Test Form, Site Plan and Grain Size Distribution Curve of the Sample must be submitted with this form.
- For all Lots <5 acres the site plan must include the entire lot. Test locations must be accurately tied to lot corners or other permanent markers.

Saturation and Swelling

- Smeared surfaces removed: X Yes ____ No
- Sand or gravel added: ____ Yes X No
- Date and time presoak water added: 11/25/96 8:10
- Amount of presoak water added (gallons): 5
- Date and time percolation test is started: 11/26/96 1:00
- Did water remain in hole after the overnight swelling period:

Hole 1 ____ Yes X No
Hole 2 ____ Yes X No
Hole 3 ____ Yes X No

Percolation Rate Measurement

Percolation Rate (min./in.)

Hole 1 240
Hole 2 60
Hole 3 120

Average 140

Groundwater:

- Encountered @ NONE feet.
- Estimated depth to maximum seasonal water table if not encountered in profile: 10'+
- Is area believed to be subject to seasonal fluctuations which could result in a seasonal water table within 8' of surface?

____ Yes X No

Slope determination in absorption area: 5 % to the S (direction)

Bedrock:

- Encountered @ 2 feet.
- Estimated depth if not encountered in profile: ____
- Type of bedrock: X Sandstone

X Claystone ____ Siltstone

____ Other

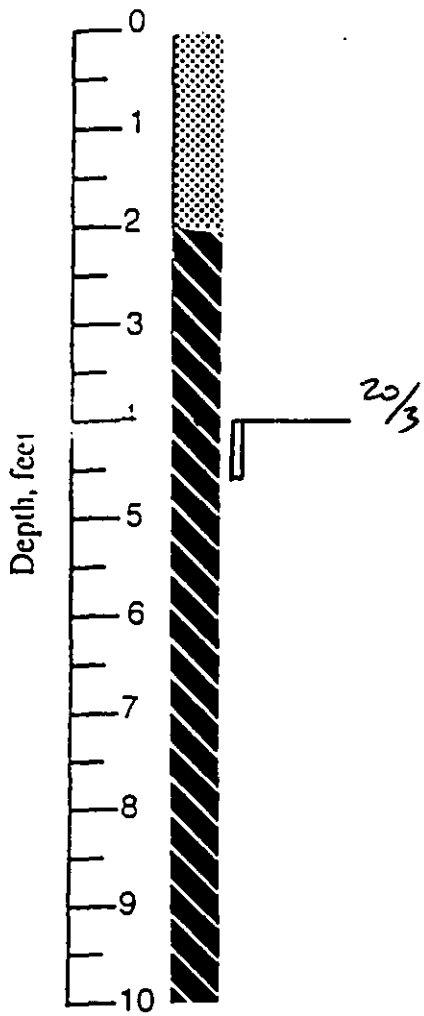
- Is bedrock fractured or weathered?

____ Yes X No

Pofile Hole Information (Cont.)

(Soils must be classified using Unified System ASTM D2487)

Profile Hole Log



CLAYEY SAND, SLIGHTLY MOIST, BROWN

SANDSTONE / CLAYSTONE, SLIGHTLY MOIST, LIGHT BROWN

Certification

I certify that the above information is correct and complete to the best of my knowledge and that all tests were performed in accordance with the provisions of Tri-County Health Department Regulation I-96 by myself or under my supervision.

Tyrone R. Carter
Original Signature

12/13/96
Date

COLO. SOIL
Company Name

113 WILCOX ST., CASTLE ROCK
Address

688-9475
Phone

COLORADO REGISTERED
TYRONE R. CARTER
28716
PROFESSIONAL ENGINEER
Original Seal

96-802

TRI-COUNTY HEALTH DEPARTMENT
Percolation Test Result Form

Hole No.	Hole Depth (in.)	Length of Interval (min.)	Water Depth @ Start of Interval (in.)	Water Depth @ End of Interval (in.)	Drop in Water Level (in.)	Percolation Rate @ Final Interval (min./in.)
1	50	30	43 1/4	43	1/4	
		30	43	43 3/8	3/8	
		30	43 3/8	43 5/8	1/4	
		30	43 5/8	43 7/8	1/4	
		30	43 7/8	44	1/8	
		30	44	44 1/8	1/8	
		30	44 1/8	44 1/4	1/8	
		30	44 1/4	44 3/8	1/8	240

*Field Notes shall be recorded on this form or in this format; typed copies of field records may be submitted on this form.

*A four hour test must be conducted unless (a) water remains in the hole after the presoak in which case one 30 min. interval is sufficient, (b) the first 6" of water seeps away in <30 minutes in which case a one-hour test of 6 - 10 minute time intervals may be used, (c) the test is being conducted in sand in which case a one-hour test of 6 - 10 minute time intervals may be used, (d) three successive water level drops do not vary by more than 1/16 inch in which case a two hour test may be conducted.

TRI-COUNTY HEALTH DEPARTMENT
Percolation Test Result Form

Hole No.	Hole Depth (in.)	Length of Interval (min.)	Water Depth @ Start of Interval (in.)	Water Depth @ End of Interval (in.)	Drop in Water Level (in.)	Percolation Rate @ Final Interval (min./in.)
2	49 3/4	30	42 1/2	42 3/4	1/4	--
		30	42 3/4	43 1/8	3/8	
		30	43 1/8	43 1/2	3/8	
		30	43 1/2	44	1/2	
		30	44	44 5/8	5/8	
		30	44 5/8	45 1/8	1/2	
		30	45 1/8	45 5/8	1/2	
		30	45 5/8	46 1/8	1/2	60

*Field Notes shall be recorded on this form or in this format; typed copies of field records may be submitted on this form.

*A four hour test must be conducted unless (a) water remains in the hole after the presoak in which case one 30 min. interval is sufficient, (b) the first 6" of water seeps away in <30 minutes in which case a one-hour test of 6 - 10 minute time intervals may be used, (c) the test is being conducted in sand in which case a one-hour test of 6 - 10 minute time intervals may be used, (d) three successive water level drops do not vary by more than 1/16 inch in which case a two hour test may be conducted.

TRI-COUNTY HEALTH DEPARTMENT
Percolation Test Result Form

Hole No.	Hole Depth (in.)	Length of Interval (min.)	Water Depth @ Start of Interval (in.)	Water Depth @ End of Interval (in.)	Drop in Water Level (in.)	Percolation Rate @ Final Interval (min./in.)
3	48 5/8	30	41 3/4	42 1/8	3/8	
		30	42 1/8	42 1/2	3/8	
		30	42 1/2	42 3/4	1/4	
		30	42 3/4	43	1/4	
		30	43	43 1/4	1/4	
		30	43 1/4	43 1/2	1/4	
		30	43 1/2	43 3/4	1/4	
		30	43 3/4	44	1/4	120

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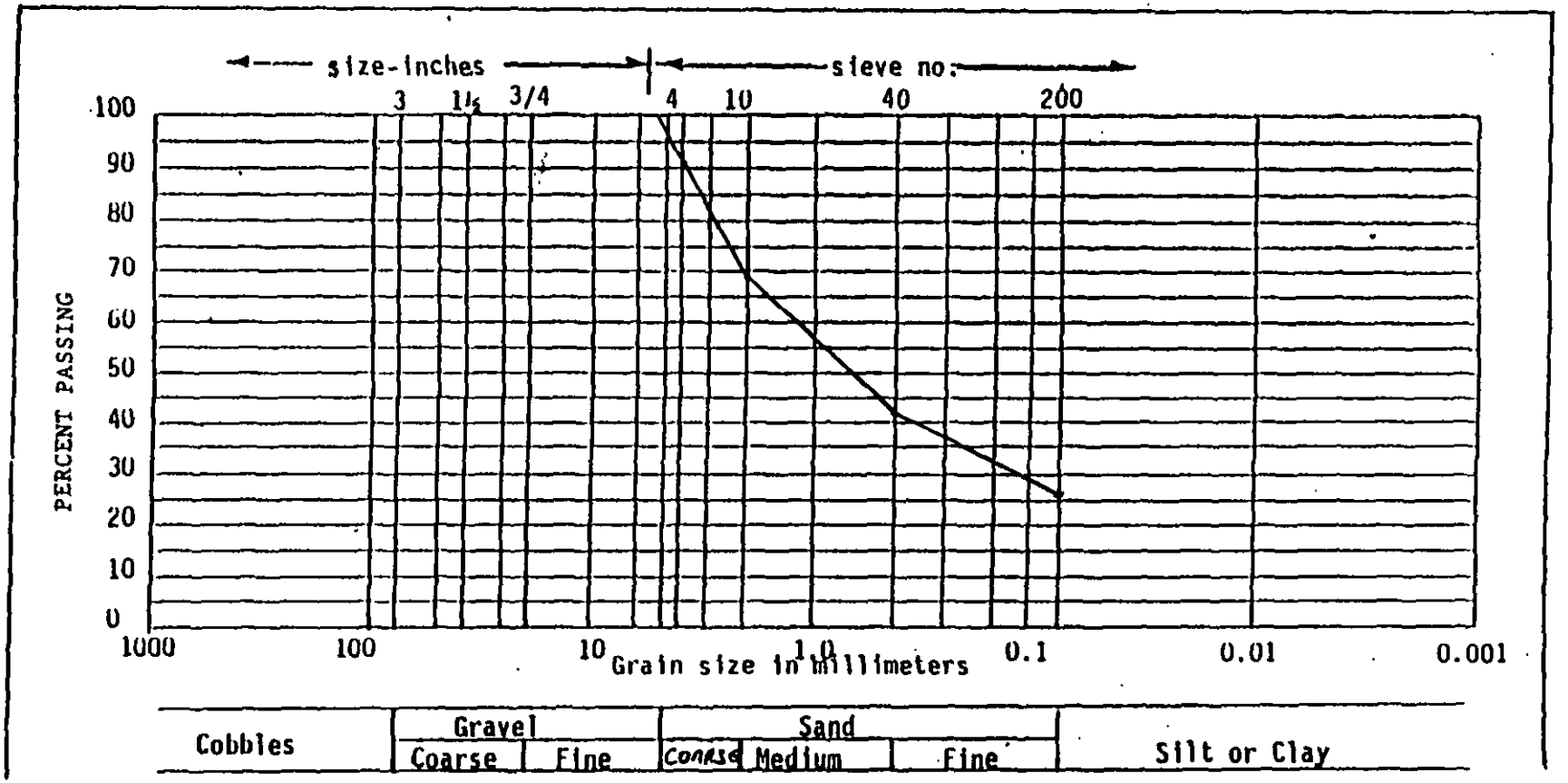
*A four hour test must be conducted unless (a) water remains in the hole after the presoak in which case one 30 min. interval is sufficient, (b) the first 6" of water seeps away in <30 minutes in which case a one-hour test of 6 - 10 minute time intervals may be used, (c) the test is being conducted in sand in which case a one-hour test of 6 - 10 minute time intervals may be used, (d) three successive water level drops do not vary by more than 1/16 inch in which case a two hour test may be conducted.

U S STANDARD SIEVE SIZE



NAME: MOORE

REPORT NO. 96-802

S.P.H. 0'-10'

CASTLE ROCK DESIGN GROUP, INC.

GEOTECHNICAL & STRUCTURAL CONSULTANTS
FOUNDATION & SEPTIC SYSTEM DESIGNS

101 Briscoe Street • Unit A • Castle Rock, CO 80104
Phone/Fax (303) 688-5151

Berton C. Myrick
16723 East Kenyon Drive
Aurora, CO 80013

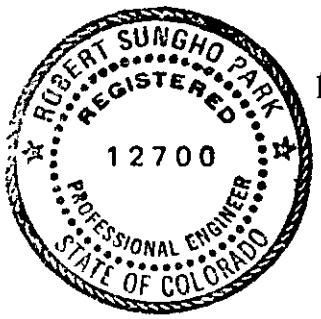
Date: May 18, 1999
Job No.: 4-0679

Subject: Onsite Wastewater Treatment System design (Job No. 99-1882owts) for Lot 30, Sterling Point, Filing 3, Douglas County

Due to our error, we designed the septic system for the above subject site for a 4-bedroom house, which would have required a 7,000 sq. ft. leach field. However, since it is to be a 3-bedroom house, it will only require a 5,200 sq. ft. leach field.

If we can be of further service, or if you have any questions, please call.

CASTLE ROCK DESIGN GROUP, INC.



Robert S. Park, P. E.

dcc

SITE VISIT WORKSHEET

Permit Number: **1999-07-006020** Date Printed: May 11, 1999

Property Location: 7773 Corona Court Lot 30
County: Douglas
Owner: Berton C. Myrick

SITE INFORMATION AS REPORTED BY ENGINEER:

PERC RATE:
Holes:

One 240 Two 60 Three 120 Four_____ Five_____ Six_____ Avg Rate_____ Sizing Rate 180

CIRCLE ONE:

Bedrock Encountered? (Yes) No If Yes, Type Sandstone Depth to Bedrock (ft) 2

Ground Water Encountered? Yes (No) If Yes, Depth to Groundwater (ft)_____

Ground Slope at Absorption Area (%) 5

Max depth of disposal area (in) 30" (not to exceed depth of percolation test holes)

Min depth of disposal area (in) 12"

SOIL CLASSIFICATION: Most prohibitive soil below bottom of bed (circle one)

CL Clay (low-med plasticity)	**CH** Clay (high plasticity)	**MH** Silt
ML Silt	**ML-CL** Silt & Clay	(**SC**) Clayey Sand
SM-SC Silty Clayey Sand	**SM** Silty Sand	**SW** Sand, Well Graded
SP Sand, Poorly Graded	**GC** Clayey Gravel	**GM-GC** Silty Clayey Gravel
GM Silty Gravel	**BR** Bedrock	**GW** Gravel, Well Graded

FIELD OBSERVATIONS:
Field Observations Consistent with Engineer's Data: (Yes) No
IF NO, complete below (circle one)

Bedrock Encountered? **Yes** **No** If Yes, Type_____ Depth to Bedrock (ft) _____

Ground Water Encountered? **Yes** **No** If Yes, Depth to Groundwater (ft)_____

Ground Slope at Absorption Area (%)_____

Max depth of disposal area (in)_____(not to exceed depth of percolation test holes)

Min depth of disposal area (in)_____

SOIL CLASSIFICATION:

CL Clay (low-med plasticity)	**CH** Clay (high plasticity)	**MH** Silt
ML Silt	**ML-CL** Silt & Clay	**SC** Clayey Sand
SM-SC Silty Clayey Sand	**SM** Silty Sand	**SW** Sand, Well Graded
SP Sand, Poorly Graded	**GC** Clayey Gravel	**GM-GC** Silty Clayey Gravel
GM Silty Gravel	**BR** Bedrock	**GW** Gravel, Well Graded

CONTINUED ON THE NEXT PAGE

SITE VISIT WORKSHEET

Permit Number: **1999-07-006020** Date Printed: May 11, 1999

RECORD OF SITE VISITS:
(It is important to record any extra visits for billing purposes)

Visit 1 Date 5/18/99 By (EHS #) 408

Visit 2 Date _____ By (EHS #) _____

Visit 3 Date _____ By (EHS #) _____

Visit 4 Date _____ By (EHS #) _____

SPECIAL CONDITIONS

Install system as per C/Pk design
Shaw Inc. Job NO. 99-1852-OWTS

COMMENTS

Did OB Hole (M-Dirt) profile verified

Signature TCHD Inspector: John Fleckner Date 5/18/99

Tri-County Health Department
Percolation Test and Soils Data Form

Property address 7773 Corona Court

Legal description LOT 30, FILING 3, STERLING POINTE SUB., DOUGLAS COUNTY.

Property Owner:

Name ~~David Moore~~ Berton C. Myrick

Address 16723 E. Kenyon Dr. Aurora, CO. 80013 ~~1110 S. Gaton Circle, Apt. 2F, Castle Rock, CO 80104~~

Phone ~~814-1239~~ 303-690-6179

Note:

- Percolation Test Form, Site Plan and Grain Size Distribution Curve of the Sample must be submitted with this form.
- For all Lots <5 acres the site plan must include the entire lot. Test locations must be accurately tied to lot corners or other permanent markers.

Saturation and Swelling

- Smeared surfaces removed: X Yes ____ No
- Sand or gravel added: ____ Yes X No
- Date and time presoak water added: 11/25/96 8:10
- Amount of presoak water added (gallons): 5
- Date and time percolation test is started: 11/26/96 1:00
- Did water remain in hole after the overnight swelling period:

Hole 1 ____ Yes X No
Hole 2 ____ Yes X No
Hole 3 ____ Yes X No

Percolation Rate Measurement

Percolation Rate (min./in.)

Hole 1 240
Hole 2 60
Hole 3 120

Average 140

Groundwater:

- Encountered @ NONE feet.
- Estimated depth to maximum seasonal water table if not encountered in profile: 10'+
- Is area believed to be subject to seasonal fluctuations which could result in a seasonal water table within 8' of surface?

____ Yes X No

Slope determination in absorption area: 5 % to the S (direction)

Bedrock:

- Encountered @ 2 feet.
- Estimated depth if not encountered in profile: ____
- Type of bedrock: X Sandstone

X Claystone ____ Siltstone

____ Other

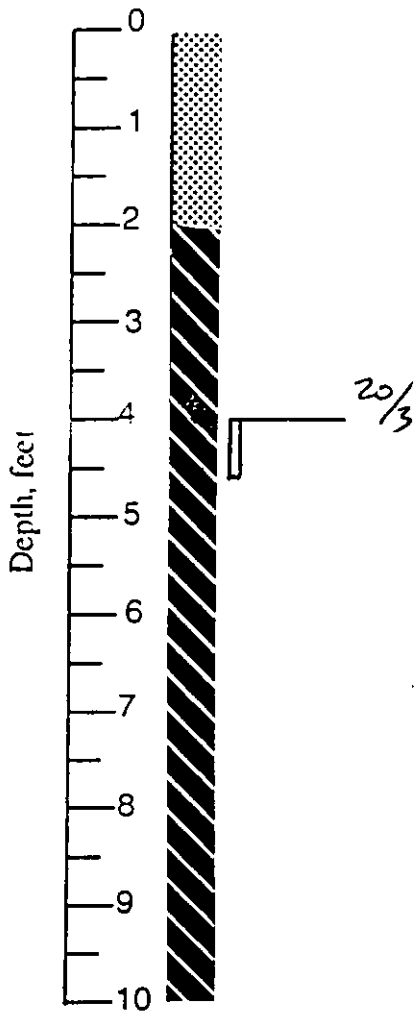
- Is bedrock fractured or weathered?

____ Yes X No

Pofile Hole Information (Cont.)

(Soils must be classified using Unified System ASTM D2487)

Profile Hole Log



CLAYEY SAND, SLIGHTLY MOIST, BROWN

SANDSTONE / CLAYSTONE, SLIGHTLY MOIST, LIGHT BROWN

Certification

I certify that the above information is correct and complete to the best of my knowledge and that all tests were performed in accordance with the provisions of Tri-County Health Department Regulation I-96 by myself or under my supervision.

Tyrone R. Carter
Original Signature

12/13/96
Date

COLO. SOIL
Company Name

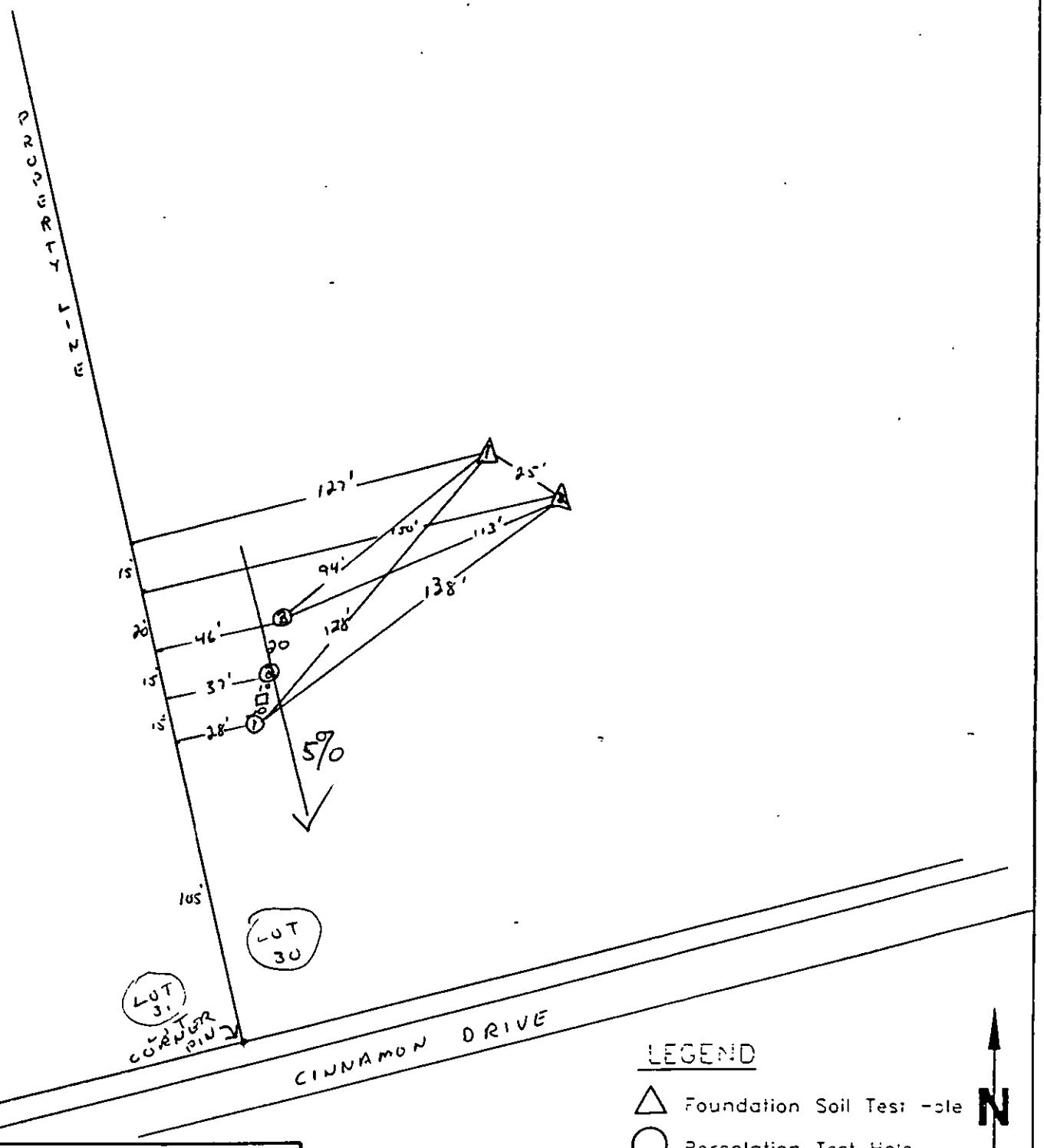
113 WILCOX ST., CASTLE ROCK
Address

688-9475
Phone

COLORADO REGISTERED PROFESSIONAL ENGINEER
TYRONE R. CARTER
28716
Original Seal

96-802

Location Plan



PROJECT NUMBER	96-802
ADDRESS/LEGAL	N.W. CORNER CINNAMON/CORUNA STERLING POINTE LOT 30 FILING 3
	DOUGLAS COUNTY

Figure 1

TRI-COUNTY HEALTH DEPARTMENT
Percolation Test Result Form

Hole No.	Hole Depth (in.)	Length of Interval (min.)	Water Depth @ Start of Interval (in.)	Water Depth @ End of Interval (in.)	Drop In Water Level (in.)	Percolation Rate @ Final Interval (min./in.)
1	50	30	43 1/4	43	1/4	
		30	43	43 3/8	3/8	
		30	43 3/8	43 5/8	1/4	
		30	43 5/8	43 7/8	1/4	
		30	43 7/8	44	1/8	
		30	44	44 1/8	1/8	
		30	44 1/8	44 1/4	1/8	
		30	44 1/4	44 3/8	1/8	240

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TRI-COUNTY HEALTH DEPARTMENT
Percolation Test Result Form

Hole No.	Hole Depth (in.)	Length of Interval (min.)	Water Depth @ Start of Interval (in.)	Water Depth @ End of Interval (in.)	Drop in Water Level (in.)	Percolation Rate @ Final Interval (min./in.)
2	49 3/4	30	42 1/2	42 3/4	1/4	
		30	42 3/4	43 1/8	3/8	
		30	43 1/8	43 1/2	3/8	
		30	43 1/2	44	1/2	
		30	44	44 5/8	5/8	
		30	44 5/8	45 1/8	1/2	
		30	45 1/8	45 5/8	1/2	
		30	45 5/8	46 1/8	1/2	60

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TRI-COUNTY HEALTH DEPARTMENT
Percolation Test Result Form

Hole No.	Hole Depth (in.)	Length of Interval (min.)	Water Depth @ Start of Interval (in.)	Water Depth @ End of Interval (in.)	Drop In Water Level (in.)	Percolation Rate @ Final Interval (min./in.)
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		30	42 1/8	42 1/2	3/8	
		30	42 1/2	42 3/4	1/4	
		30	42 3/4	43	1/4	
		30	43	43 1/4	1/4	
		30	43 1/4	43 1/2	1/4	
		30	43 1/2	43 3/4	1/4	
		30	43 3/4	44	1/4	120

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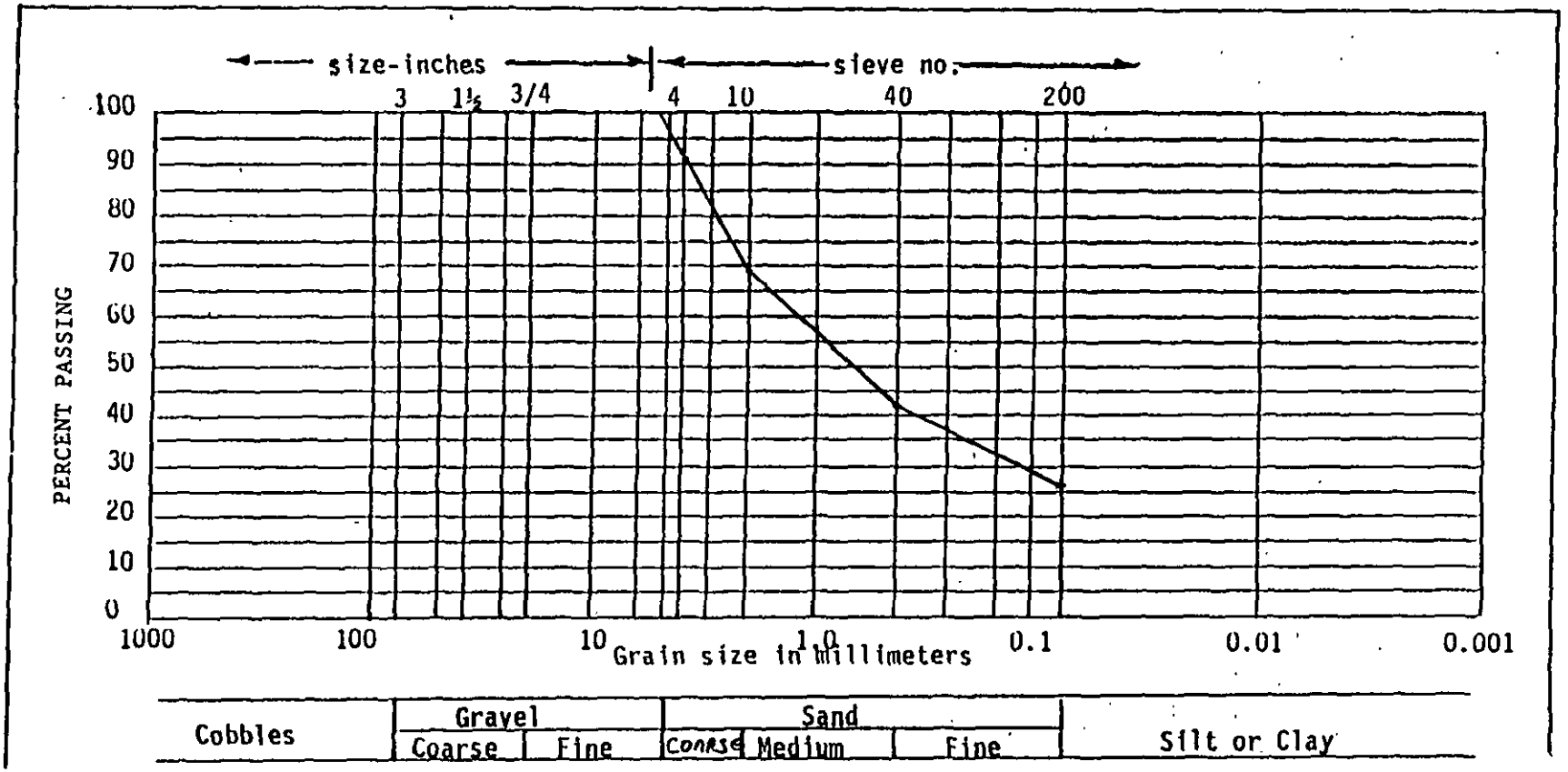
U S STANDARD SIEVE SIZE



NAME: ~~[illegible]~~ Myrick

REPORT NO. 96-802

S.P.H. 0'-10'

TRI-COUNTY HEALTH DEPARTMENT

SETBACK FORM

CHECK ALL COMPON-ENTS WHICH APPLY	PHYSICAL FEATURE / SYSTEM COMPONENT	Spring, Wells, Suction Lines	Potable Water Supply Line	Potable Water Supply Cistern	Dwelling Occupied Building	Property Lines, Piped or Lined Irrigation Ditch	Subsoil Drains, Intermittent Irrigation Lateral	Lake, Water Course, Irrigation Ditch or Stream	Dry Gulches	Septic Tanks
	Is Physical Feature Present or Planned?	☐	☐	☐	☐	☐	☐	☐	☐	☐
☐	Dispersal System Using Aerosol Methods	(3) 100	(4) (2) 10	50	125	10	0	(3) 25	(3) 10	10
	Is Setback Distance Met or Exceeded?	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N
☐	Seepage Pit or Slit Trench	(3) 100	(4) (2) 50	25	20	25	10	(3) 50	(3) 25	6
	Is Setback Distance Met or Exceeded?	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N
☐	Absorption Trench, Seepage Bed, Sand Filter, Sub-surface Dispersal System, or Drywell	(3) 100	(4) (2) 25	25	20	10	10	(3) 50	(3) 25	6
	Is Setback Distance Met or Exceeded?	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N
☐	Unlined Sand Filter in Soil With a Percolation Rate Slower than 60 Minutes per Inch	100	(4) (2) 25	25	15	10	10	25	15	10
	Is Setback Distance Met or Exceeded?	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N
☐	Unlined or Partially Lined Evapotranspiration System Wastewater Pond, or Surface Disposal System Other than Aerosol	100	(4) (2) 25	25	15	10	10	25	15	10
	Is Setback Distance Met or Exceeded?	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N
☐	Lined Sand Filter	60	(4) (2) 10	25	15	10	10	25	10	5
	Is Setback Distance Met or Exceeded?	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N
☐	Lined Evapotranspiration Field or Lined Wastewater Pond	60	(4) (2) 10	25	15	10	10	25	10	5
	Is Setback Distance Met or Exceeded?	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N
☐	Pit Privy or Vault Privy	50	(4) (2) 10	25	15	10	10	25	10	---
	Is Setback Distance Met or Exceeded?	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N
☐	Septic Tanks, Treatment Plants, Dosing Tanks, Vaults	(2) 50	(4) (2) 10	25	(1) 5	10	10	50	10	---
	Is Setback Distance Met or Exceeded?	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N
☐	Building Sewer or Effluent Lines	(2) (4) 50	(4) (2) 10	4						
	Is Setback Distance Met or Exceeded?	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N	☐Y☐N

TRI-COUNTY HEALTH DEPARTMENT

SETBACK FORM

Note: The minimum distances shown above shall be maintained between the system components and the physical features described Where soil, geological or other conditions warrant, greater distances may be required by the local board of health or by the Water Quality Commission pursuant to C.R S. 25-8-206 in accordance with the authority prescribed by law and rules and regulations implemental of said section. Components which are not water tight should not extend into areas of the root system of nearby trees. For repair or upgrading of existing systems where the size of lot precludes adherence to these distances, repaired facility shall not be closer to water supply components than the existing facilities.

(1) Distance shown shall not apply to treatment plants or effluent lines where recycling is permitted.

(2) Crossings or encroachments may be permitted at the points as noted above provided that the water conveyance pipe is encased for a minimum distance of ten (10) feet on each side of the crossing. A length of pipe shall be used with a minimum Schedule 40 rating of sufficient diameter to easily slide over and completely encase the water conveyance. Ridged end caps of at least Schedule 40 rating must be glued or secured in a watertight fashion to the ends of the encasement pipe A hole of sufficient size to accommodate the pipe shall be drilled in the lowermost section of the ridged cap so that the conveyance pipe rests on the bottom of the encasement pipe. The area which the pipe passes through the endcaps shall be sealed with an approved underground sealant compatible with the piping used.

(3) Add 8 feet additional distance for each 100 gallons per day of design flow over 1000 gallons per day as specified in the table, unless it can be demonstrated by a Registered Professional Engineer or Geologist that a mechanical or natural barrier will prevent contamination.

(4) Encroachments may be permitted provided the water or wastewater conveyance pipe is encased as in (2) above, specified in the table

ISDS CHECK LIST: PERCOLATION TEST REVIEW

7773 Corona Ct.

Property Address

Permit Number

Legal Description

EH Specialist

	I-96 REQUIREMENT Percolation Test (Sections 13.4 - 13.6 & Diagram 3)	CONFORM TO I-96 YES	NO	N/A	COMMENTS
1.	Is there at least one percolation test hole for each 1200 square feet of absorption area and not less than 3 holes?		✓		
2	If there is a change in soil type, are there at least two additional percolation test holes and percolation tests in this soil?	✓			
3.	Does percolation test procedure comply with Section 13.4 and Diagram #3 of Regulation I-96?	✓			
4.	Are final percolation rates calculated correctly?	✓			
	Was pre-soak performed 24 hours before commencement of percolation test?	✓			
6.	Are percolation rates from Form S-100 recorded correctly and average percolation rate calculated correctly?	✓			

	I-96 REQUIREMENT Alternate Perc Test If Applicable (Section 13.7)	CONFORM TO I-96 YES	NO	N/A	COMMENTS
1.	Prior approval given?				
2.	Is test substantially equivalent to Diagram 3?				

ISDS CHECK LIST: ENGINEERED SYSTEM DETERMINATION REVIEW FORM

7773 Corona St.
Property Address

Permit Number

Legal Description

EH Specialist

I-96 REQUIREMENT **Engineered System Determination**		CONFORM TO I-96			COMMENTS
		YES	NO	N/A	
An engineered system will be required if any one or more of the following conditions exist (Section 17.3)					
1.	Average Percolation rate is greater than 60 mpi?	✓			
2.	Average Percolation rate is less than 5 mpi and soils not of sandy texture (sandy texture means more than fifty (50) percent passing the #4 sieve)			✓	
3.	Bedrock or Dawson Sand less than four (4) feet below bottom of proposed absorption system?	✓			
4.	Groundwater less than four (4) feet below bottom of proposed absorption system?		✓		
5.	Ground slope at absorption area more than twenty (20) percent?		✓		
6.	Is system for a commercial, business, institutional, industrial, or multi-family dwelling?		✓		
7.	Is system within Cherry Creek Basin and are soils, gravels, sands and/or average percolation rate < 20 mpi? (Not applicable for Adams County.)		✓		
8.	If yes to item 7, see Section VII (A, B & C) of I-96.				
9.	Is it necessary to dose the system?	✓			
10.	Is engineered design required?	✓			
11.	If yes, is engineer design provided?	✓			

ISDS CHECK LIST: SOIL TEST REVIEW PROGRAM

Property Address _____ Permit Number _____

Legal Description _____ EH Specialist _____

	I-96 REQUIREMENT Soils Information (Section 13.3)	CONFORM TO I-96 YES	NO	N/A	COMMENTS
1.	Was profile hole drilled to a depth of at least 4 feet below the bottom of the proposed absorption system?	✓			
2.	Is there a change in soil type within those soils comprising the four feet of soils beneath the absorption system? (If yes refer to question #2 under Percolation Test Review Form)		✓		
3.	Is a grain size analysis curve provided by engineer?	✓			
4.	Are more than 50% of soil particles finer than the #200 sieve or is soil Dawson Sand? If yes, are Atterberg Limits provided?		✓		
5.	Was soil sample for grain size analysis taken from within 4 feet of soils below the proposed absorption area?	✓			
6.	Are blow counts indicated?	✓			
7.	Moist soil color indicated on Profile Hole Log?	✓			
8.	Are soils from sample correctly classified, (Per ASTM D-2487) based on grain size and Atterberg Limits (if required)?	✓			
9.	Has engineer provided proper certification (signature, company name, address, date and original seal)?	✓			

ISDS CHECK LIST: PLOT PLAN REVIEW

Property Address _____ Permit Number _____

Legal Description _____ EH Specialist _____

	I-96 REQUIREMENT Plot Plan (Section 3.4)	CONFORM TO I-96 YES	NO	N/A	COMMENTS
1.	Location of property, address and lot, block, subdivision, or other legal description?	✓			
2.	Accurate property boundary measurements with an indication of north direction and ground slope direction?	✓			
3.	Accurate location of both existing and proposed structures, trees, walks and driveways?	✓			
4.	Accurate location of the proposed ISDS showing soil profile and percolation test hole locations?	✓			
	Accurate location of existing or proposed well(s), neighboring wells and neighboring ISDS's, within one-hundred (100) feet of the subject property lines?			✓	
6.	Accurate location of streams, lakes, irrigation ditches, washes, or other drainage conditions within the boundaries of the parcel and within one-hundred (100) feet of the subject property?	✓			
7.	Topographic mapping with two (2) foot contour intervals when the slope exceeds fifteen (15) percent in the area of the proposed construction and when any lot grading is proposed which will affect the system construction?			✓	
8.	Is slope indicated for proposed absorption area?	✓			
9.	Is original signature of applicant/property owner on plot plan?	✓			

Note: Items 3, 5 and 6 may be waived if property is >5 acres or if information not necessary to show conformance with regulation.

ISDS CHECK LIST: DRIP IRRIGATION REVIEW FORM (LOW PRESSURE PIPE)

Property Address | Permit Number

Legal Description | EH Specialist

	I-96 REQUIREMENT **Review of Design (Section 17.20D, and 17.26)**	CONFORM TO I-96 YES	NO	N/A	COMMENTS
1.	Are plans and specifications, stamped with original seal (or signature)and signed by Colorado Registered Professional Engineer?	✓			
2.	System dosing complies with I-96 Regulation, Section 17.26? (See dosing checklist)	✓			
3.	Adequate capacity in septic tank(s), except for dosing chamber, per Table #6.	✓			
4.	Required inspections listed on plans or in specifications?	✓			

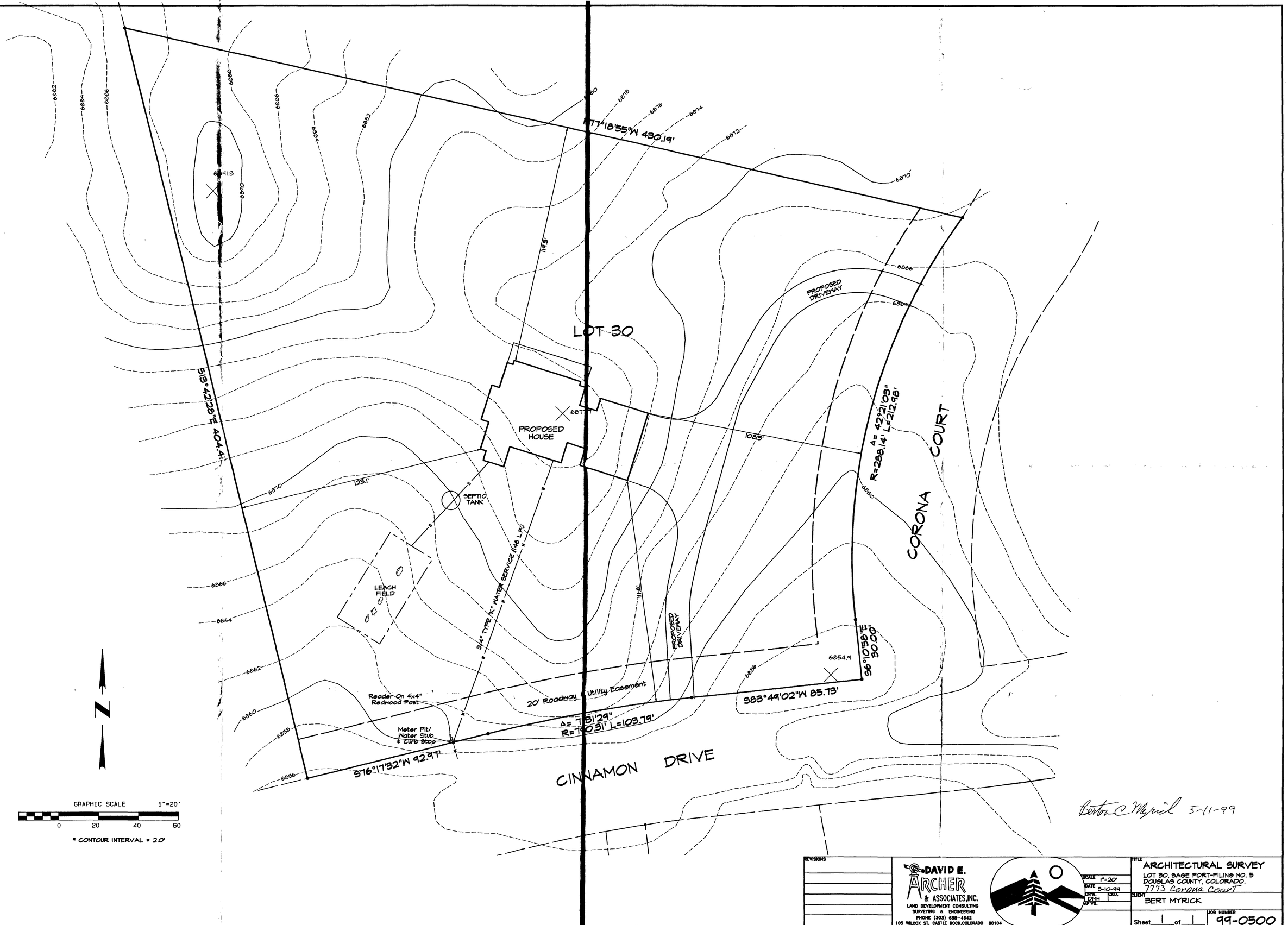
	I-96 REQUIREMENT **Field Sizing**	CONFORM TO I-96 YES	NO	N/A	COMMENTS
1.	Average flow (Q) = number of bedrooms x 150?	✓			
2.	Loading rate (R) proper for soils percolation rate?	✓			

AVERAGE PERCOLATION RATE MPI	LOADING RATE (R) gals/sq. ft./day
5	0.57
10	0.54
15	0.50
20	0.47
30	0.42
40	0.36
60	0.32
90	0.25
120	0.21
(180)	(0.18)
180+	0 15

CHECK LIST: DRIP IRRIGATION REVIEW FORM (LOW PRESSURE PIPE)

Property Address _____ Permit Number _____

3.	Is field size correct? Area = $\frac{Q}{R}$ x1.5x1.6x1.17x0.75	✓			
I-96 REQUIREMENT **Field Sizing**		CONFORM TO I-96 YES	NO	N/A	COMMENTS
4.	Lineal feet of field lateral piping correct? ($\frac{Area}{2}$)	✓			
5.	Is the number of laterals correct?	✓			
6.	Is zone layout proper for number of laterals and site conditions?	.			?



Bert C Myrick 5-11-99

REVISIONS			

DAVID E. ARCHER & ASSOCIATES, INC.
LAND DEVELOPMENT CONSULTING
SURVEYING & ENGINEERING
PHONE (303) 688-4842
105 WILCOX ST. CASTLE ROCK, COLORADO 80104

SCALE 1"=20'
DATE 5-10-99
DR'N. DMH CK'D.
APP'D.

TITLE: ARCHITECTURAL SURVEY
LOT 30, SAGE PORT-FILING NO. 5
DOUGLAS COUNTY, COLORADO.
7773 Corona Court
CLIENT: BERT MYRICK

Sheet 1 of 1
JOB NUMBER 99-0500

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Mon May 10 12:22:04 1999