

## LIQUID WASTE PERMIT APPLICATION FOR A

NMED Permit Number: Permit Approved for J Bedrooms

TOTAL WASTEWATER FLOW ON PROPERTY.  SITE INFORMATION A. Lot Size: 10.10 Acres Date of Record: 11-03-05 (Plat Date or Subdivision Date)		NER'S NAME:  Last, First, MI  Log - 2123-0444  DRESS: Street PO Box,  CENTRAL AND NEST UNIFORM PROPER  ATION: Street Address/Location-give directions to site  CENTRAL AND NEST UNIFORM PROPER  PRE BLOCK  LOT  UNIFORM PROPER  RANGE SECTION QTR QTR QTR  RANGE SECTION QTR QTR  RANGE SECTION QTR  OTR  OTR  CIty  State  COMM  1 COLO 12  COMM  1 COLO	
C. Minimum required absorption area  Trench or Bed width  Total Trench or Bed length  Total Trench or Bed length  Number of gravelless units  D. Depth from graving surface to bottom of absorption area  Total Trench or Bed length  Total Trench or Bed leng	STEM DESIGN  Treatment Unit Septic Tank Capacity too Gallon Manufacturer: Enascs Plantbuc Certifi Other (specify):  Disposal System: Trench Bed Evapotranspiration Other, Specify:  Materials V. Pipe and Gravel Ga	B. Depth from Ground Surface to: Seasonal High Water Table Bedrock, Caliche, Tight Clay Gravel, Cobbles, Highly permeable soil  C. Soil Description: (NMED may require both texture description and Texture:  Conrae sand or gravel; (give percolation rate below) Sand; (give percolation rate below) Sandy Loam; Clay Loam; Clay Loam; Clay Loam; Clay:  Other; (describe)  D. Domestic Water Source:  Private State Engineer Well Permit #  Name of Public Water System  Description:  Name of Public Water System	

D. Depth from ground surface to bottom of absorption area

SITT N: Diagram the lot and liquid waste system. Show setbacks to the objects a below within 200 feet of system and the direction of groundwater flow. Give distances from:

Treatment Unit to:

Disposal System to:

DO	Hoo	NA	400	50	20	u <sub>oo</sub>	200
A.	1	P.	1	P	₽	1	T.
Surface Water	Arroyos	Irrigation	Wells	Structures	Buildings	Property line	Property line
NA	420	Z.*	420	30	30	400	200
ft.	1	7	1	1	₽	P	1

Draw picture of system or attach a picture file

552, 45'  632 4000 152, 09'  1017.54
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vII. The foregoing information is correct and true to the best of my knowley understand that the issuing of this permit does not relieve me from the responsibility of complying with all applicable provisions of the New Mexico Plumbing Code and the New Mexico Liquid Waste Disposal Regulations. Obtaining this permit does not relieve me from the responsibility of obtaining any permit required by state, city or county regulation or ordinance or other requirements of state or federal law.

Owner 4 Contractor

Other

Reasons for Denial:

NOTE: This permit may be canceled for failure to neet any condition specified: failure to complete the system within one year; for providing inaccurate or incomplete information; or for failure to notify NMED that the system is completed. If you have questions call:

If you have questions call:

NMED Inspection History

NMED Representative

NMED Representative

NMED Representative

NMED Representative

NMED Representative

NMED Representative

NMED FINAL APPROVAL:

The system described above

NMED Representative

NMED Representative

NMED Representative

NMED Representative

NMED Representative

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