STATE OF NEW MEXICO
ENVIRONMENT DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

ONSITE LIQUID WASTE SYSTEM INSPECTION

Revised 07/08

TA140008

NMED Permit No: ________ **Applicant's Name** HAYES, David + MARSHA
Address US Hwy 285 MILE MARKER OJO CALIENTE
Type of Inspection: ☐ INITIAL ☑ FINAL ☐ REINSPECTION ☐ COMPLAINT ☐ OTHER

1. BUILDING SEWER

a. OK Correct Size and Material *20.7.3.813.C*
b. OK Required Cleanouts Present, Installed Correctly & to Finish Grade *20.7.3.813.B*
c. OK Pipe at Correct Grade (1 /8" to 1/4" per foot) *20.7.3.813.A*

2. PRE-TREATMENT

a. / Type: ______
b. / Installed as per Plans or Manufacturer's Instructions *20.7.3.401.I*
c. ____ Other: ______

3. SEPTIC TANK / SEC./TERT. TREATMENT UNIT

Type ☑ Concrete ☐ Plastic/Fiberglass ☐ Sec./Tert. Treatment Unit

a. OK Located as per Site Plan *20.7.3.401.I* Medina's 1200 gal
b. OK Correct Setbacks *20.7.3.302, Table 302.1*
c. OK Tank Certified; Correctly Labeled *20.7.3.501; 20.7.3.501.B.4*
d. OK Tank Correctly Oriented, Level & Depth Below Grade *20.7.3.501.J.7*
e. OK Inlet / Outlet Pipes Sealed & Watertight
f. OK Inlet / Outlet Baffle or Tee with Branch Extending 12" Minimum Below Liquid Level
g. OK Effluent Filter Installed, Riser to Grade
h. OK Tank & Fittings Correctly Vented
i. OK Concrete Tank: Coated & Material Correct **OR** Type V Concrete
j. OK Outlet Pipe Correct Size & Material
k. OK Manholes Correctly Sized & Located
l. OK Manhole Risers at Grade, Diameter, Secure Lids & Coated
m. OK Tank Installed per Manufacturer's Instructions
n. / Advanced Treatment Unit Installed per Manufacturer's Instructions
o. / Water Tightness Test Conducted
p. ____ Water Softener Discharge Bypassing ATU
q. ____ Other:

4. SURGE, PUMP AND HOLDING TANKS

Type ☑ Surge Tank ☐ Pump Tank ☐ Holding Tank ☐ Other

a. / Correct Size
b. / Inlet/Outlet Sealed Correctly
c. / Pump(s) & Alarms installed on separate circuits, properly set and located
d. ____ Manholes, Risers, Lids Correct and Water Tight

5. TEE/DISTRIBUTION BOX/HEADER

a. OK 4" Diameter
b. OK Tee Level/Header
c. / "D" Box Level and on Concrete Slab or Stable Soil
d. / "D" Box Inlet Baffled and 1" Above Outlets
e. ____ "D" Box Outlets at Same Height; Equal Flow to Outlets
f. OK Tee or "D" Located a Min. of 5' From Disposal Field.
g. Other:

6. DISPOSAL TRENCH OR BED

Type ☐ Trench ☐ Chamber ☐ Bed ☐ Seepage Pit(s) ☑ Other 1203V

a. OK Soil Type Verified
b. OK Correct Clearance to Ground Water or Limiting Layer
c. OK Correctly sized disposal area
d. OK Correct Setbacks
e. OK Excavation at Correct Grade
f. OK Correct Spacing Between Trenches or Beds
g. ____ Smeared Soils Not Present on Trench or Bed
h. — Correct Aggregate; Type, Size, Clean and Amount
i. — Correct Depth of Aggregate Above and Below Pipe
j. OK Correct Pipe; 2-hole, 4" Minimum Diameter, End Caps
k. — Aggregate Covered with Approved Material
l. — Pipe Covered with Geotextile Fabric in Place of Aggregate
m. OK Inspection Port(s), Capped
n. ____ Other:

Seepage Pits:

a. ____ Underside of lid coated; riser provided as required
b. ____ Domed covers covered with minimum 2" concrete
c. ____ Brick or block laid end to end with staggered tight joints
d. ____ Side wall inlet properly vented
e. ____ Inlet/outlet fittings sealed
f. ____ Locking or secured lid

Other Disposal Methods:

a. ____ Type:
b. ____ Installed per Plans or Manufacturer's Instructions
c. Other:

7. ON-SITE WELL MEASUREMENTS

a. ____ Nitrate-N: ______ (mg/L)
b. ____ Iron: ______ (mg/L)
c. ____ Fluoride: ______ (mg/L)

8. GIS COORDINATES

Well: lat______ long______
Elev______
Sys: lat______ long______
Elev______

9. COMMENTS/VIOLATIONS

☐ Continued on attached Sheet(s)

☑ Installation **Approved**
☐ Installation **Approved w/conditions** (See Comments/Violations)
☐ Installation **Not Approved** (See Comments/Violations)

10. Final Approval

☑ Granted ☐ Not Granted

[signature] 05/28/14
NMED Inspector, Date

I certify that this liquid waste system was installed in accordance with the permit approved by NMED, unless otherwise noted in in Comments Section above.

[signature] 5-28-14
Installer, Date

Additional comments: ______

OK - If installed and meets Requirements	
N/I - Not inspected	A/P - As Proposed
N/C - Not Compliant	N/V - Not Verified
N/A - Not applicable	N/T - Not Tested
	EX – Existing

Mailing Address
3277 CR 4300
independance KS 67301-7516

RECEIVED
FEB - 3 2014
NM ENVIRONMENT DEPARTMENT
DIST II TAOS FIELD OFFICE

APPLICATION FOR A LIQUID WASTE PERMIT OR REGISTRATION

Date NMED Received:

NMED Processing Number: TA140008

NMED Use Only: Call _____ to schedule an inspection a minimum of 2 working days prior to the inspection. **Permit Fee:** _____
Permit Approved for (circle one): 1 2 3 4 5 6 Bedrooms __Multiple dwellings __ Other:

SYSTEM OWNER'S NAME: Last, First, MI | Home Phone: | Business Phone:
Hayes David & Marsha A | (620) 330-0582 |

MAILING ADDRESS: Street/PO Box | City | State | Zip Code
~~Mile marker 359.2~~ PO Box 339 | Ojo Caliente | N.M. | 87549

SYSTEM LOCATION: Address, City, ZIP, County - (if needed, attach directions)
d.S Hwy 285 m.le marker 359.2 tract "B-2B"

SUBDIVISION | UNIT/PHASE | BLOCK | LOT/TRACT

UNIFORM PROPERTY CODE: 1 053 143 297 349

TOWNSHIP	RANGE	SECTION	QTR	QTR	QTR	LATITUDE	LONGITUDE	ELEV
24N	9E	11						

INSTALLER'S NAME & FIRM: | PHONE:
Ron Perraglio R&B Southwest Metal | (505) 927-0819 (470-6939) Tammy

MAILING ADDRESS: Street/PO Box | City | State | Zip Code
312 Paseo de Onate | Espanola | N.M | 87532

CID License No./Class No.: 51077 __MM-1 ✓MM-98 __MS-1 __MS-3 __Homeowner

I. PERMIT APPLICATION (instructions available on request)

Application is for: ✓New Permit ____Registration - existing unpermitted system
____Modification of an existing system ____ATS ownership transfer
Existing Permit No.(if applicable): _____

II. WASTEWATER SOURCES & DESIGN FLOWS IN GALLONS PER DAY (gpd)

A. Proposed liquid waste system use and design flow:
✓Single family residence 3 no. of bedrooms oversized for home 375 gpd
__Multiple family units __no. of units; __no. bedrooms per unit _____ gpd
__Seasonal residence
__Commercial/Institutional (type): _____ _____ gpd
__Other (type): _____ Fixture units: ____ _____ gpd
B. Are there other sewage sources on this property? __Yes ✓No _____ gpd
TOTAL WASTEWATER FLOW ON PROPERTY - 375 gpd

III. SITE INFORMATION

A. Lot Size: 10.054 Acres (nearest 0.01 acre) Date of Record: 10-24-2011 (Plat Date or Subdivision Date)
Ownership and lot size documentation attached: ✓Warranty deed ✓Property tax receipt
__Recorded survey ✓Recorded plat __Other, specify: _____

B. Depth from Ground Surface to:
Seasonal High Water Table N/A feet
Bedrock, Caliche, Tight Clay N/A feet more than 12'
Gravel, Cobbles, Highly permeable soil N/A feet

C. Soil Description:
USDA Soil Class Methodology & Verification Submitted? __Yes ✓No
__Type Ia=1.25 sf/gal/day __Type Ib=2 sf/gal/day __Type II= 2 sf/gal/day
✓Type III=2 sf/gal/day __Type IV=5 sf/gal/day

D. Domestic Water Source: no water source (Hauled Water)
__On-site ✓Off-site __Private __Public __Shared
Irrigation well, or flood irrigated area on lot? __Yes ✓No
State Engineer Well Permit #: N/A
Name of Public Water System: N/A

IV. SYSTEM DESIGN

__Experimental System

A. Treatment Unit:
✓Septic tank Manufacturer: Medwas Precast Capacity: 1,000
Certification No: N-M09-03-100A
__ATS (Advanced Treatment System) __Secondary __Tertiary __Sand filter
__Disinfection __Other (specify): _____
Manufacturer: _____ Model: _____
__Voluntary ATS

B. Disposal System: ✓Trench __Leaching Bed __Seepage Pit
__Privy ~~✓Holding tank~~ no __Elevated Bed __Wisconsin Mound
__Vault __Lined Evapotranspiration (ET) Bed __Unlined ET Bed
__Irrigation __Low pressure dosed __Drip __Gray water
__Other (specify): _____
Materials: __Pipe & Gravel ✓Gravelless (type): E-Z Flow-120SV
Distribution box: ✓Yes __No

C. Minimum required absorption area:
AR 2 x Q 375 = 750 SQ FT
(AR - Application Rate) (Q - Design Flow)
Trench or Bed width = 1 ft.
Gravel depth below pipe = N/A ft.
Total Trench or Bed Length = 140'
Length of Trenches = (1) 70'; (2) 70'; (3) _____; (4) _____
Number of Gravelless Units = 14
Proposed Absorption Area of System = 756 SQFT

D. Depth from ground surface to bottom of absorption area = 5 ft.

NMED Processing Number: TA140008

V. **SITE PLAN: Attach plat, diagram or picture file of the lot and liquid waste system. Show setback distances from both the tank and disposal field to property lines, buildings, structures, wells, water lines, irrigation ditches, arroyos and surface waters within 200 feet of the system, and the direction of groundwater flow.**

NMED Use:	A plat, drawing or picture, including setback distances, in accordance with 20.7.3.302:	__IS attached

VI. The foregoing information is correct and true to the best of my knowledge. I understand 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 and Treatment 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.

Print Name RON FERRACCIO

Signature — **Date** 1/27/14

__Owner __Owner's Authorized Representative ✓Owner's Authorized Representative and Contractor

NMED USE ONLY

VII. **NMED PERMIT TO CONSTRUCT (For Registrations, ATS Ownership Transfer, or Permitting of Existing Unpermitted Systems installed after February 1, 2002 skip this section and go to Section VIII):**

A permit for CONSTRUCTION ONLY of the liquid waste disposal system described herein is hereby:
✓**Granted** __**Granted subject to conditions** __**Denied** **NMED Permit to Construct No.** _____

Permit Conditions or Reasons for Denial: _____

NMED Representative — **Date** 02/03/14

NOTE: This permit may be canceled for failure to meet any condition specified: failure to complete the system within one year; for providing inaccurate or incomplete information; or for failure to notify NMED to schedule an inspection, a minimum of 2 working days prior to the inspection.
If you have questions call: _____

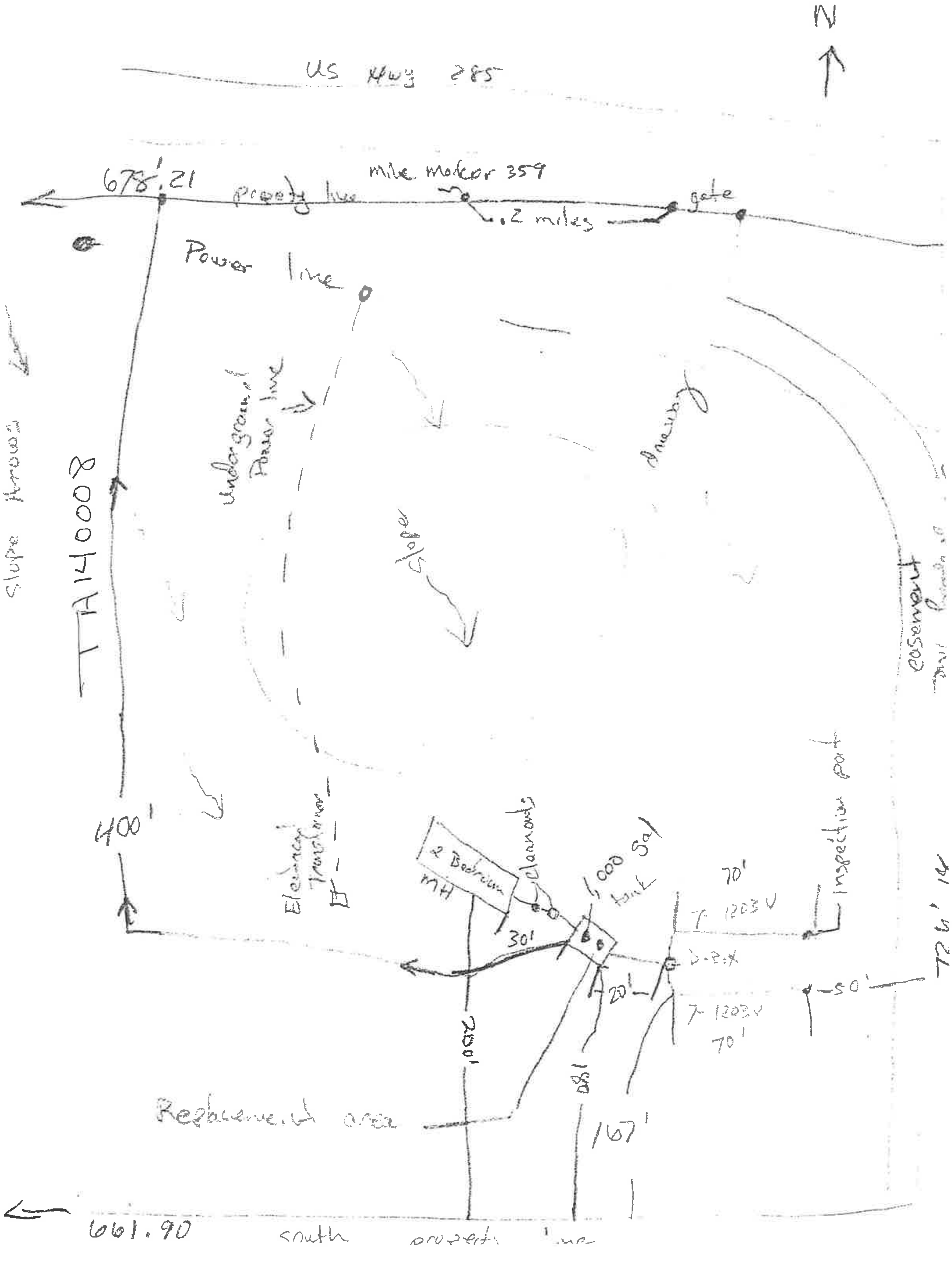
VIII. **NMED FINAL APPROVAL TO OPERATE LIQUID WASTE SYSTEM:**
The system described above: __**was inspected by NMED** __**Contractor photo inspection authorized**

NMED Inspection History	NMED Representative	Date

A permit for operation of the liquid waste disposal system described herein is hereby:
__**Granted** __**Granted subject to conditions** __**Denied** **NMED Permit to Operate No.** _____

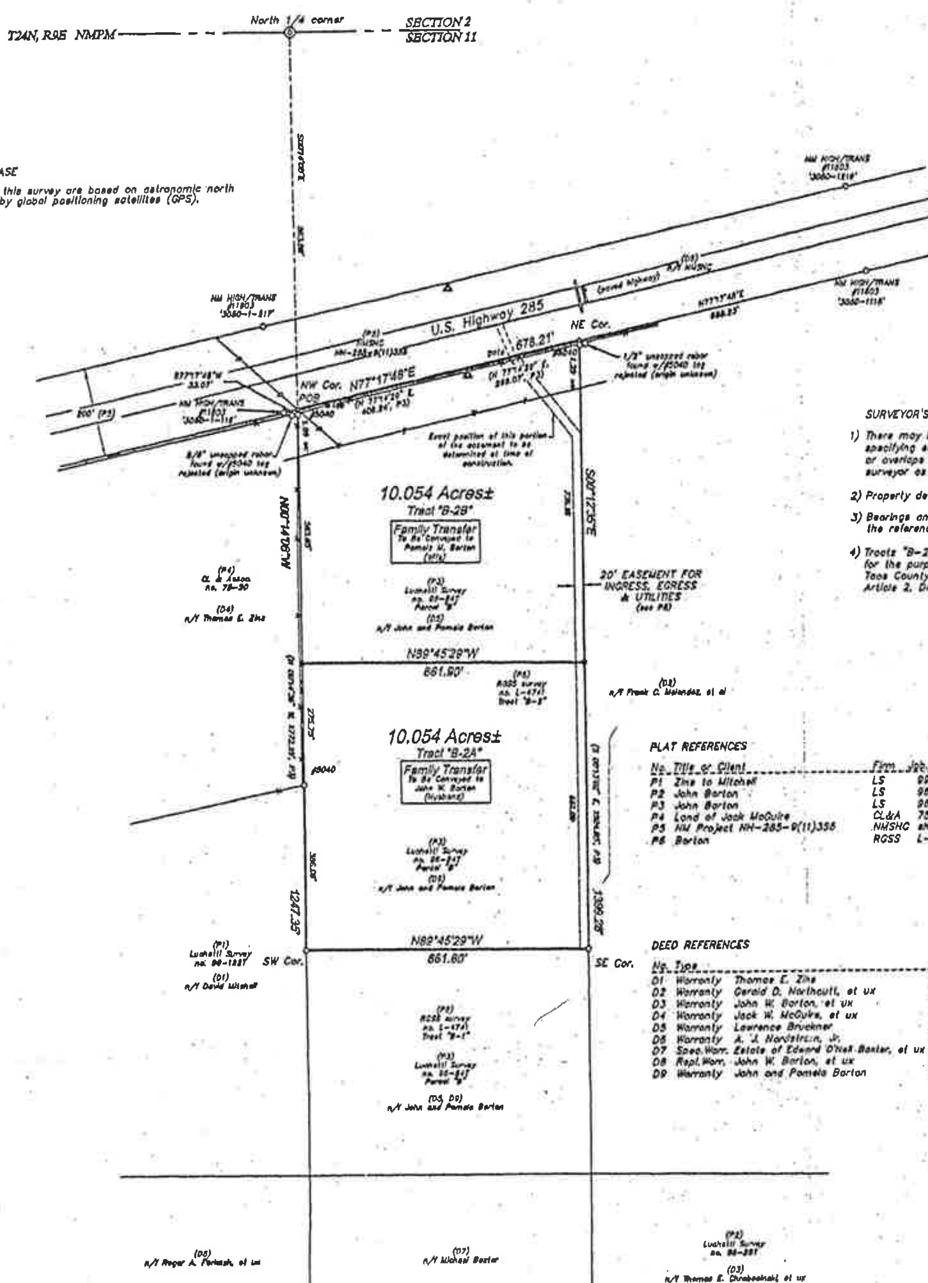
Conditions of Approval: _____

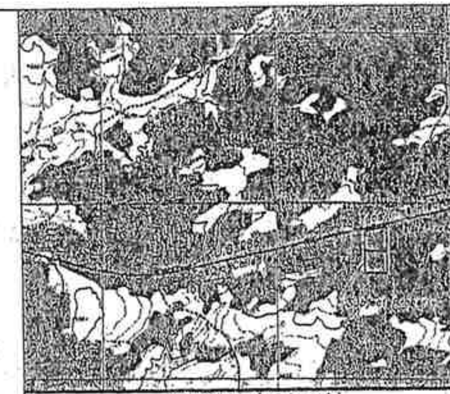
NMED Representative **Date**


N
US Hwy 285
678.21
mile marker 359
property line
gate
.2 miles
Power line
Underground Power line
Driveway
slope
Slope Arrows
400'
Electrical Transformer
2 Bedroom
MH
cleanouts
1,000 gal tank
30'
20'
70'
inspection port
50'
200'
180'
167'
Replacement area
661.90
easement

BEARING BASE

Bearing of this survey are based on astronomic north as derived by global positioning satellites (GPS).





SURVEYOR'S NOTES

1) There may be recorded or unrecorded documents in existence specifying easements, restrictions, covenants, encroachments, or overlaps that are unknown or have not been provided to this surveyor as of the date of this plat.

2) Property descriptions are attached as a supplement to this plat.

3) Bearings and distances shown in parenthesis are record from the reference indicated.

4) Tracts "B-2A" and "B-2B," shown on this plat, are intended for the purpose of "Family Transfers" as defined by the Taos County Subdivision Regulations, Ordinance 2005-8, Article 2, Definitions, Subdivision (9) and Article 9, Section 9-5.

PLAT REFERENCES

No.	Title or Client	Firm	Job. no.	Surveyor/Engineer	Reg.	Date	Amended	Cab.
P1	Zins to Mitchell	LS	99-122T	Wallace R. Luchetti	5040	10/11/99	---	D,103B
P2	John Barton	LS	98-25T	Wallace R. Luchetti	5040	06/10/98	---	---
P3	John Barton	LS	98-84T	Wallace R. Luchetti	5040	07/24/98	---	D, 19A
P4	Land of Jack McGuire	CL&A	75-20	Cleon L. Langley	3814	06/07/75	---	---
P5	NM Project NH-285-9(11)356	NMSHC	sht. 5	Richard J. Toth	7268	07/19/01	---	D,152B
P6	Barton	RGSS	L-4741	Scott B. Crowl	12441	11/03/05	---	E, 94A

DEED REFERENCES

No.	Type	Grantor	Grantee	Date	Book	Page(s)
D1	Warranty	Thomas E. Zins	David Mitchell	10/21/99	M224	388-389
D2	Warranty	Gerald D. Northcutt, et ux	Frank C. Melendez, et al	07/23/90	A197	146
D3	Warranty	John W. Barton, et ux	Thomas E. Chrobocinski, et ux	09/23/99	M222	50-52
D4	Warranty	Jack W. McGuire, et ux	Thomas E. Zins	10/31/94	M224	386-387
D5	Warranty	Lawrence Bruckner	John W. Barton, et ux	07/26/96	A234	781
D6	Warranty	A. J. Nordstrom, Jr.	NMSHC	08/12/63	A81	599
D7	Spec.Warr.	Estate of Edward O'Neil Baxter, et ux	Michael Baxter	08/03/88	A192	514
D8	Repl.Warr.	John W. Barton, et ux	Roger A. Forkash, et ux	10/02/95	A228	698
D9	Warranty	John and Pamela Barton	John and Pamela Barton	04/26/06	M548	881

STATE OF NEW MEXICO)
COUNTY OF TAOS)SS

This is a conformed copy of a Survey
which was filed for record on the 19th of May
A.D. 2006 at 11:42:09 o'clock a.m. per receipt # 018 U
(provided as per request of John Barton P 44 A
Elaine S. Montoya
COUNTY CLERK & RECORDER
By Lilia K. Mills Deputy

PREPARED BY

Rio Grande Surveying Service
Box 6351, Taos, New Mexico
(505) 758-2901

ORIENTATION

1 inch = 200 ft.

LEGEND

5/8 in. rebar found. (unless noted)
1919 USGLO brass cap mon. fnd.
telephone drop box.
existing road.
wire fence.
overhead power line.
utility pole.
culvert — cmp
easement boundary.
section line
1/2 in. rebar set
point not set
"Point and Place of Beginning" — POB
witness corner — wc
NMSHC r/w rail mon. (rejected)

TAOS COUNTY PLANNING DEPARTMENT APPROVAL

The division of Tracts "B-2A" and "B-2B," shown on this plat, is hereby approved for a "FAMILY TRANSFER" as defined by the Taos County Subdivision Regulations, Ordinance 2005-8, Article 2, Definitions, Subdivision (9) and Article 9, Section 9-5.

Edward L. [illegible], Planner
by: County of Taos Planning Department Date
file no. ET-026-06 5/18/06

CERTIFICATE

I hereby certify to John and Pamela Barton that this plat is a representation of field work performed by me or under my supervision in the field on 11/04/05 and conforms to the minimum requirements for land surveys as adopted by the New Mexico State Board of Registration for professional engineers and surveyors.

Scott B. Crowl NMLS# 12441

INDEXING INFORMATION FOR COUNTY CLERK

Owner: John and Pamela Barton
Township: Sec. 11, T24N, R9E, NMPM

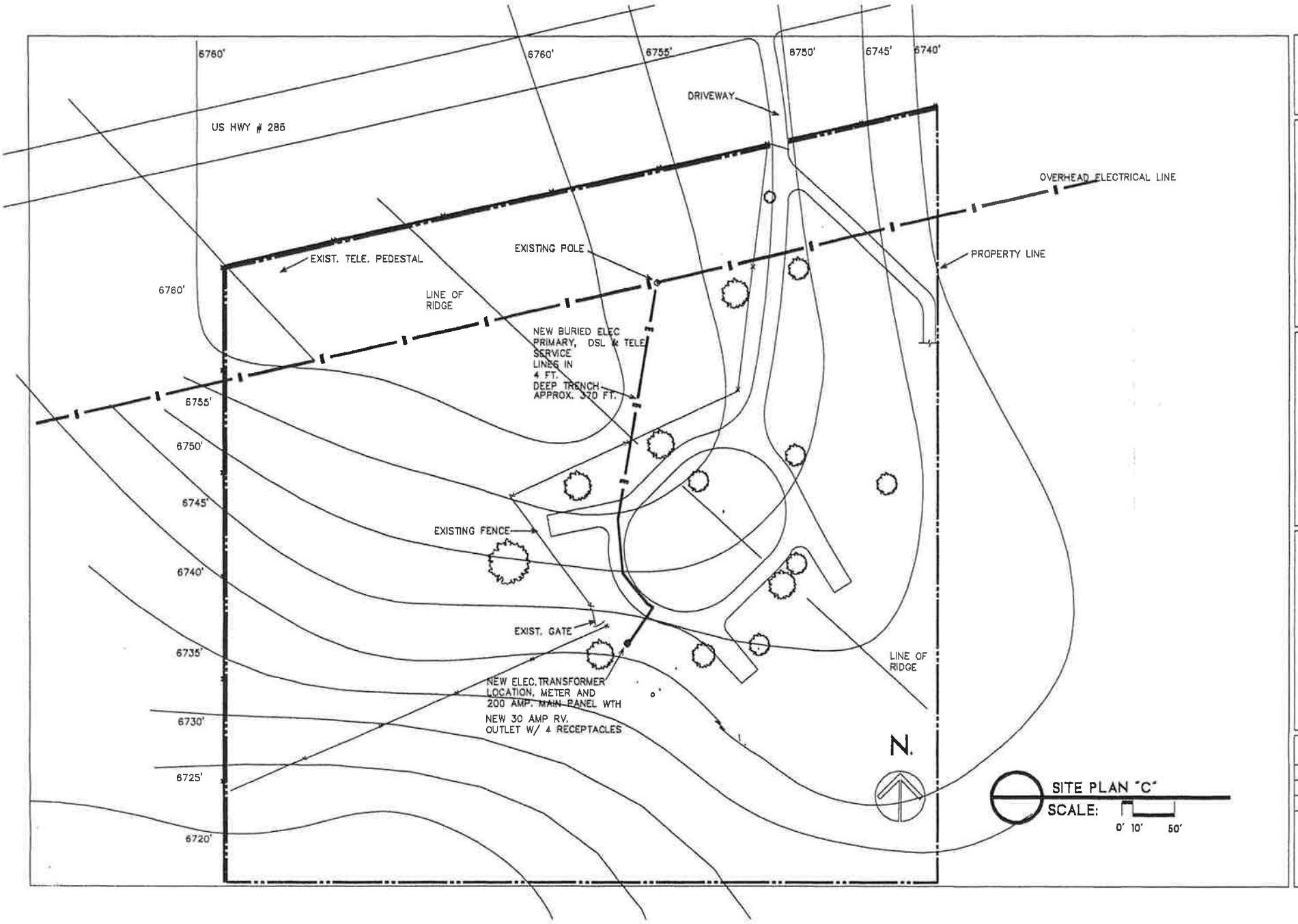
GENERAL INFORMATION

County: Taos
Local area: South of Tres Piedras, New Mexico

FAMILY TRANSFER BOUNDARY SURVEY PLAT FOR

Barton

Scale 1" = 200' | Field date: 11/04/05 | Job. no.: L-4741A



JOHN BARTON, AIA
ARCHITECT
PO BOX 33870
SANTA FE, NM 87594 (505) 474-8855

HAYES PROPERTY
OJO CALIENTE, NM
PROJECT

SITE PLAN "C"
DRAWING TITLE

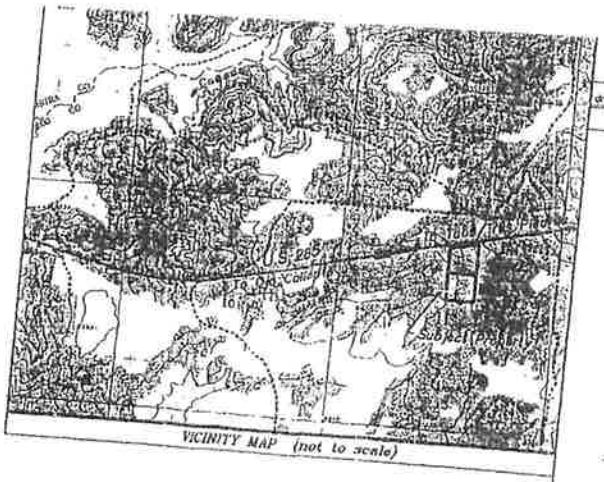
DRAWN: JWB
CHECKED:
DATE:
SCALE: 1" = 10'
JOB NO.:
SHEET
A-
of SHEETS

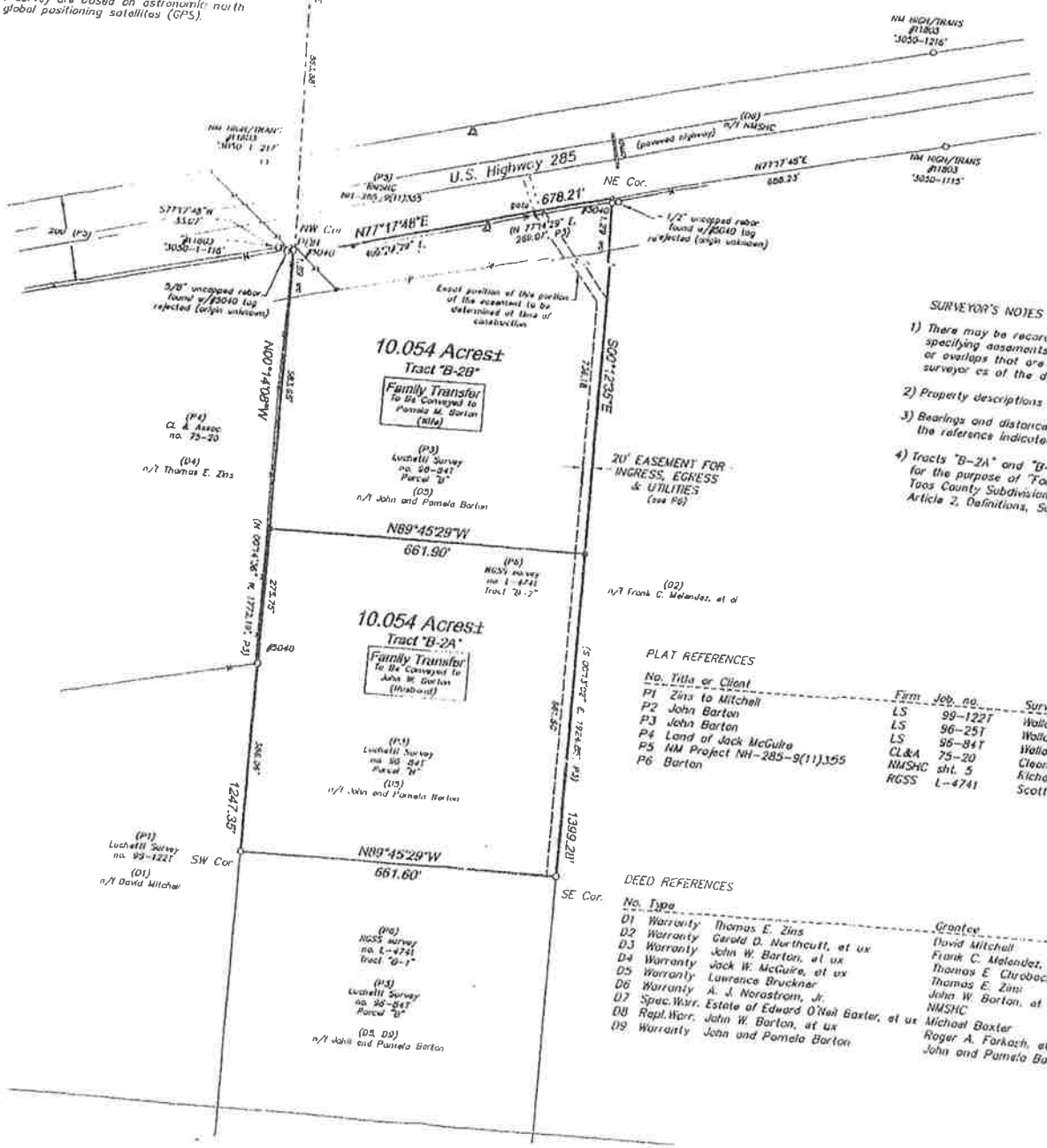
0003:8920
Book 348 Page 716
1 of 1
05/18/2006 11:42:09 AM
BY LILLIAN

RYE NMPM — North 1/4 corner — SECTION 2 / SECTION 11

'ING BASE

'ng of this survey are based on astronomic north
'rived by global positioning satellites (GPS).





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P2	John Barton	LS	96-251	Wallace R. Luchetti	5040	08/10/96	---	---
P3	John Barton	LS	96-841	Wallace R. Luchetti	5040	07/24/96	---	D. 194
P4	Land of Jack McGuire	CL&A	75-20	Cleon L. Longley	5814	08/07/75	---	---
P5	NM Project NH-285-9(11)355	NMSHC	sht. 5	Richard J. Toth	7268	07/19/01	---	D.1528
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D9	Warranty	John and Pamela Barton	John and Pamela Barton	04/28/06	M548	691

200 0
1 inch

LEGEN

5/8 in. rebar found
1919 USGLO brass cap
telephone drop box
existing road
wire fence
overhead power line
utility pole
culvert
easement boundary
section line
1/2 in. rebar set
point not set
"Point and Place of Beg
witness corner
NMSHC r/w (rail mon.)

TAOS COUNTY PLANNING DEPA

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plat, is hereby approved for a "FA
defined by the Taos County Subdiv
Ordinance 2005-8, Article 2, Defin.
and Article 9, Section 9-5.

Edward L. Ortiz, P
by: County of Taos Planning Departm

file no. FT-026-06

CERTIFICATE

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that this plat is a representation
field work performed by me or un
supervision in the field on 11/04/0
and conforms to the minimum req
for land surveys as adopted by the
Mexico State Board of Registration
professional engineers and surveyors

Scott B. Crowl
NMLS# 12