



Prevent • Promote • Protect

Environmental Health
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ON-SITE WASTEWATER TREATMENT SYSTEM OWTS CHANGE REQUEST

APPLICANT INFORMATION <i>Each ON# Requires a Separate Change Request Form</i>			
Applicant Name			
Property Address			ON#:
City, State, Zip			
Structure Type:	<input type="checkbox"/> Main Residence <input type="checkbox"/> Secondary Living Structure <input type="checkbox"/> Auxiliary Structure		
Main = Primary living structure, Secondary = Mother in law, additional living quarters in separate structure Auxiliary = has wastewater disposal but no living space			
Phone		Email	
Applicant Signature			Date

ADMINISTRATIVE PERMIT CHANGE REQUEST <i>Documentation is Required for Connection to Sanitation District and Enumeration Changes</i>			
<input type="checkbox"/>	Abandon Existing System	Reason:	
		Describe how system will be abandon:	Date system abandon:
<input type="checkbox"/>	Connection to Sanitation District	Sanitation District:	Date of Connection:
<input type="checkbox"/>	Property Re-enumeration	New Property Address:	Need Corrected OWTS Permit? Yes <input type="checkbox"/> No <input type="checkbox"/>
		Reason:	
<input type="checkbox"/>	Upgraded Permit	Reason:	
		Issued Permit Type:	Date Permit Issued:
		Requested Permit Type: <input type="checkbox"/> New <input type="checkbox"/> Modification <input type="checkbox"/> Major Repair	Additional Documents Included: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	Alteration Permit	Change Requested: <input type="checkbox"/> Location Change <input type="checkbox"/> Soil Change <input type="checkbox"/> Design Change <input type="checkbox"/> Other:	
		Description of Change:	
		Original Permit Date:	Additional Documents Included: <input type="checkbox"/> Yes <input type="checkbox"/> No
Comments:			
Specialist:		Date Reviewed and Approved:	

FIELD CHANGE REQUEST

Form to Be Used for In-field Changes that DO NOT Impact Previously Permitted System Capacities. Requires Acknowledgment of Change from EHS Prior to Final Inspection.

<input type="checkbox"/>	Addition of Pump/Pump Tank	Reason:
		Pump Tank Specs: Pump Specs:
Note: Components must meet minimum regulation requirements to be verified at time of final inspection		
<input type="checkbox"/>	Bed to Wide Bed Change	Reason:
Note: Applies only to Major Repair Permit		
<input type="checkbox"/>	Other:	Reason:

Comments:
Specialist: Date Reviewed and Approved: