



WELD COUNTY DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
1555 North 17th Avenue, Greeley, CO 80631 www.weldhealth.org
970-400-3415

**COMMERCIAL ON-SITE WASTEWATER TREATMENT
SYSTEM (OWTS) INSTALLATION PERMIT (New or Repair)
Instructions and Application Form**

THIS PACKET PROVIDES THE FORMS AND INFORMATION NEEDED TO APPLY FOR A PERMIT TO INSTALL A NEW COMMERCIAL OWTS OR REPAIR (REPLACE OR UPGRADE) AN EXISTING COMMERCIAL OWTS. Commercial OWTS Permit is required for business commercial, industrial, institutional, and multi-family dwellings. ***REQUIRES ENGINEER DESIGN**

NOTE: A Commercial Repair Permit covers replacement or upgrade of an existing soil treatment area (septic field), and **may** include the septic tank, pump chamber or other components along with the soil treatment area. If only the tank or pump chamber needs to be repaired, replaced, or added to the system, see Vault Installation Permit Application. If only a minor repair installation is required, such as sewer replacement or tank lid replacement, see Minor Repair Permit Application.

ALL PERMIT APPLICATIONS MUST BE SIGNED BY THE OWNER OR AUTHORIZED AGENT. NO PERMIT APPLICATIONS WILL BE ACCEPTED BY MAIL.

Submit in person or by email HE-OWTS-PERMITTING@WELD.GOV

TO APPLY FOR YOUR COMMERCIAL OWTS PERMIT, THE FOLLOWING FORMS, FEES, AND INFORMATION MUST BE SUBMITTED:

1. COMPLETE THE ATTACHED FORMS:

- a. **COMMERCIAL OWTS PERMIT APPLICATION FORM:** with appropriate fee of \$1600.00 for Commercial OWTS Permit.
- b. **DETAILED MAP** and accurate directions to the property from the nearest highway.

2. AUTHORIZATION FORM: If applicant is not the property owner, a **NOTARIZED AUTHORIZATION FORM** must be completed and submitted with application.

3. PARCEL NUMBER: This can be obtained from the Assessor's Office at (970)400-3650, or on the county website under property information. Link to property information:
<https://www.co.weld.co.us/maps/propertyportal/>

4. SANITATION DISTRICT: If the property is within the boundaries of a municipality or special district that provides public sewer service, the Commercial OWTS Permit application must be accompanied by a letter from the District, stating they have no objection to the issuance of an OWTS permit for the property. (Section 30-4-30. K)

5. EXISTING SEPTIC PERMIT, if replacing or upgrading an existing Commercial OWTS, or change of use from residential to commercial. Existing septic permits are on record at the Division, or on the County website under property information. Link to property information:
<https://www.co.weld.co.us/maps/propertyportal/>

- 6. SITE AND SOILS EVALUATION:** Site and soils evaluations are required for new system installation and existing soil treatment area replacement or upgrade. The evaluation is conducted to determine suitability of the location to support an OWTS, and to provide the designer a sound basis to select the most appropriate OWTS design for the location. The site and soils evaluation must be performed by or under the direct supervision of a professional engineer, professional geologist, or competent technician or other similarly qualified professional approved by the Division (Certified Professional Soil Scientist/Classifier). The soils evaluation must meet the current Weld County OWTS Regulations. *A minimum of 2 soil profile test pits, or a minimum of 2 soil profile test pits and 3 percolation holes are required in the area of the proposed soil treatment system.*
Refer to the Site and Soils Evaluation Requirements per the Weld County OWTS Regulations (Article V of Chapter 30 of the Weld County Code; Onsite Wastewater Treatment System regulations).
- 7. ENGINEER DESIGN AND SITE PLAN:** Commercial OWTS must be designed by a Registered Professional Engineer. The design document, including a site plan, must be signed and stamped by a Registered Professional Engineer. **ONE** original design must be submitted with the permit application. The engineer design document must meet the minimum site plan and design requirements in the current Weld County OWTS Regulations. **Refer to the attached Site Plan and Design Document requirements checklist per the Weld County OWTS Regulations.**

SITE INSPECTION:

Prior to permit issuance, a site inspection will be performed by the Weld County Division of Environmental Health Services. Please be sure the SITE is marked as indicated below. Failure to do so may result in a significant delay in processing your application and a \$100 re-inspection fee will be assessed. **Dogs must be confined for the county site inspection.**

1. OWNER'S NAME AND ADDRESS OF THE SITE must be posted at the site, on a sign large enough to be seen from the fronting road and in lettering legible to be easily read from the fronting road.
2. LOCATION OF THE SOILS EVALUATION must be staked or flagged, such that they can be easily located under all conditions at the site (such as tall grass).
3. LOCATION OF THE PROPOSED AND EXISTING OWTS (if applicable) must be staked or flagged, such that they can be easily located under all conditions at the site (such as tall grass).
4. LOCATION OF PROPOSED OR EXISTING DRINKING WATER SOURCE (well, water line, cistern) must be staked or flagged such that they can be easily located under all conditions at the site (such as tall grass).

PROCESSING TIME:

Allow approximately five (5) working days to process your application and issue the permit. Lack of documents, required engineer changes, and other deficiencies may significantly increase processing time.

COMMERCIAL OWTS INSTALLATION INSPECTION REQUIREMENTS:

- 1.** Inspection of Commercial OWTS installations by Weld County Division of Environmental Health Services must be made prior to backfilling. When the installation of the OWTS has been completed, the System Contractor or owner shall notify the Division, and a representative of the Division will attempt to make a final inspection within three (3) business days.
- 2.** Commercial OWTS must also be inspected by the design engineer prior to backfilling to verify that the system was installed per the engineer's design specifications. A signed letter from the engineer approving the installation must be submitted to the Division.
- 3.** Verification of existing vault abandonment, if replacing an existing septic tank or pump tank as part of an existing OWTS repair: Installers shall provide a pump receipt from a Weld County licensed systems cleaner, and an inspection made by the Division or (photos if approved in advance by the division) provided for verification of the vault abandonment.
- 4.** Record Drawing Submittal: Installers shall provide a drawing to a standard engineering scale, showing the Commercial OWTS as installed, including its location from known and locatable points, sizes, manufacturers' names and models as available, and other information relative to locating and maintaining the OWTS.



**COMMERCIAL ON-SITE WASTEWATER
TREATMENT SYSTEM (OWTS) INSTALLATION
PERMIT (New or Repair)**

NEW OR REPAIR COMMERCIAL OWTS PERMIT FEE: \$1600.00 NEW REPAIR/REPLACE/ADDITION

- All payments are due at the time of application submittal; by cash, check or credit card
- Incomplete applications will not be accepted (Site and soils evaluation, engineer design document, along with site plan must be included)

PARCEL NO.: _____ (12 DIGIT NUMBER)
 LEGAL DESCRIPTION: SECTION _____ TOWNSHIP _____ RANGE _____ ACRES _____
 SUBDIVISION _____ LOT _____ BLOCK _____ FILING _____
 INFORMATION CAN BE OBTAINED FROM THE ASSESSOR'S OFFICE AT (970) 353-3845 EXT 3650, OR ON THE COUNTY WEBSITE UNDER PROPERTY INFORMATION. Link to property information:
<https://www.co.weld.co.us/maps/propertyportal/>

SITE ADDRESS _____

DETAILED DIRECTIONS TO SITE (ATTACH MAP) _____

PROPERTY OWNER: _____

MAILING ADDRESS: _____ CITY _____ ST _____ ZIP _____

HOME PHONE: (____) _____ WORK PHONE (____) _____ FAX (____) _____

EMAIL ADDRESS: _____

APPLICANT NAME: _____

MAILING ADDRESS: _____ CITY _____ ST _____ ZIP _____

HOME PHONE: (____) _____ WORK PHONE (____) _____ FAX (____) _____

EMAIL ADDRESS: _____

PROPOSED USE: (Refer to Table 30-6-2 of the Weld County OWTS Regulations for Average Wastewater Flow):

- MULTI-FAMILY/BOARDING HOMES/MOBILE HOME PARKS**
 TYPE OF USE (Ex. mobile home park, boarding home, triplex): _____
 NUMBER OF PERSONS (i.e. boarding homes): _____
 NUMBER OF BEDROOMS or SPACES (i.e. mobile home parks): _____
- COMMERCIAL/INDUSTRIAL**
 TYPE OF USE (Ex. repair shop, office, dog kennel, restaurant): _____
 NUMBER OF EMPLOYEES: _____
 NUMBER OF BATHROOMS: _____
 FLOOR DRAINS EXISTING OR PROPOSED: YES _____ NO _____
- RECREATIONAL/INSTITUTIONAL**
 TYPE OF USE (RV Park, day camp, church, school, public pool): _____
 NUMBER OF BATHROOMS: _____

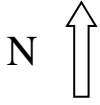
EPA CLASS V INJECTION WELL INVENTORY REQUEST FORM COMPLETED: YES _____ NO _____

WATER SOURCE:

- PUBLIC WATER SUPPLY (NAME OF SUPPLY) _____
- INDIVIDUAL WELL (PERMIT #) _____
- CISTERN (PERMIT #) _____

*WARNING: Neither Weld County nor any of its affiliates shall be responsible for the use of any information submitted in relation to this OWTS installation permit. It is the responsibility of the user to determine under what circumstances the information is being applied and ensure that the circumstances are suitable to the application of the information. Neither Weld County nor its employees are liable for the failure or inadequacy of the onsite waste water treatment system.

PLEASE DRAW A DETAILED MAP TO YOUR PROPERTY with directions from the nearest two county roads. If the property is in a security or gated area, please indicate the code or other instructions for entry on the map.



- Label all roads
- Label subject property with address
- Indicate nearby landmarks, such as businesses, structures, natural features



DEPARTMENTS OF PLANNING
BUILDING, DEVELOPMENT REVIEW
AND ENVIRONMENTAL HEALTH
1555 NORTH 17TH AVENUE
GREELEY, CO 80631

AUTHORIZATION FORM

I, (We), _____, give permission to _____
(Owner – please print) (Authorized Agent/Applicant–please print)

to apply for any **Planning, Building, Access or OWTS** permits on our behalf, for the property located at
(address or parcel number) below:

Legal Description: _____ of Section _____, Township _____ N, Range _____ W

Subdivision Name: _____ Lot _____ Block _____

Property Owners Information: _____

Address: _____

Phone: _____ E-mail: _____

Authorized Agent/Applicant Contact Information: _____

Address: _____

Phone: _____ E-Mail: _____

Correspondence to be sent to: Owner _____ Authorized Agent/Applicant _____ by: Mail _____ Email _____

Additional Info: _____

Owner Signature: _____ Date: _____

Owner Signature: _____ Date: _____