



# APPLICATION FOR A LIQUID WASTE PERMIT

NMED Permit Number:

TA050120

NMED Inspection Required  No  Yes, Call 758-8808 for Appointment

Date NMED Received: 5/14/05

SYSTEM OWNER'S NAME: Last, First, MI.

Home Phone:

Business Phone:

505-751-0695

MAILING ADDRESS: Street/PO Box,

City,

State,

Zip Code

HCR 74 Box 22602

EL Prado NM

87529

SYSTEM LOCATION: Street Address/ Location - give directions to site

County:

9 Desiderio, off Honda-Reco Road towards  
Reco - 1/2 mile from Hwy 230.

SUBDIVISION

BLOCK

LOT

UNIFORM PROPERTY CODE

TOWNSHIP

RANGE

SECTION

QTR

QTR

QTR

LATITUDE

LONGITUDE

26 13 6

INSTALLER'S NAME & FIRM:

ANTUNIO T. ARNULFO

PHONE:  
751-4458

MAILING ADDRESS: Street/PO Box,

City

State,

Zip Code

BOX 2481

TAOS

NM

87571

CID License No./ Certification

MM-1

MM-98

MS-1

MS-3

Homeowner

89325

## I. PERMIT APPLICATION (Instructions on back of pink copy)

A. Proposed Liquid Waste System is for:  New construction

Replacement of an existing system  Modification to an existing system

B. Manufactured Housing (mobile)  Yes  No

C. Proposed System is:  Conventional  Mound  Holding Tank

Evapotranspiration  Other; Describe: \_\_\_\_\_

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

A. Proposed liquid waste system use and design flow:

Single family residence with 3 no. of bedrooms

375 gpd

Multiple family units;  no. of units;  no. bedrooms per unit

\_\_\_\_\_ gpd

Other (type) \_\_\_\_\_ Flow sizing 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: 1.076 Acres

(nearest 0.01 acre)

Date of Record: 12/10/1985

(Plat Date or Subdivision Date)

B. Depth from Ground Surface to:

Seasonal High Water Table

7 100 feet

Bedrock, Caliche, Tight Clay

\_\_\_\_\_ feet

Gravel, Cobbles, Highly permeable soil

\_\_\_\_\_ feet

C. Soil Description: (NMED may require both texture description and percolation rate)

Texture:

Coarse sand or gravel; (give percolation rate below)

Sand; (give percolation rate below)  Fine Sand

Sandy Loam;  Loam;  Silty Loam;

Clay Loam;  Clay;

Other; (describe) \_\_\_\_\_

Soil Percolation Rate: \_\_\_\_\_ min/inch (attach percolation test record)

D. Domestic Water Source:  On-site  Off-site;

Private  Public  Shared

Irrigation Well or Flood Irrigated Area on the lot.  Yes  No

## IV. SYSTEM DESIGN

A. Treatment Unit:

Septic Tank Capacity 1000 Gallons

Manufacturer: Silva Certification No.: \_\_\_\_\_

Other (specify): \_\_\_\_\_

B. Disposal System:  Trench  Bed  Seepage Pit  Mound

Evapotranspiration  Other, specify: INFILTRATION

Materials:  Pipe and gravel  Gravelless (specify) \_\_\_\_\_

C. Minimum required absorption area 536 square feet

Trench or Bed width \_\_\_\_\_ ft. Gravel depth below distribution pipe \_\_\_\_\_ ft.

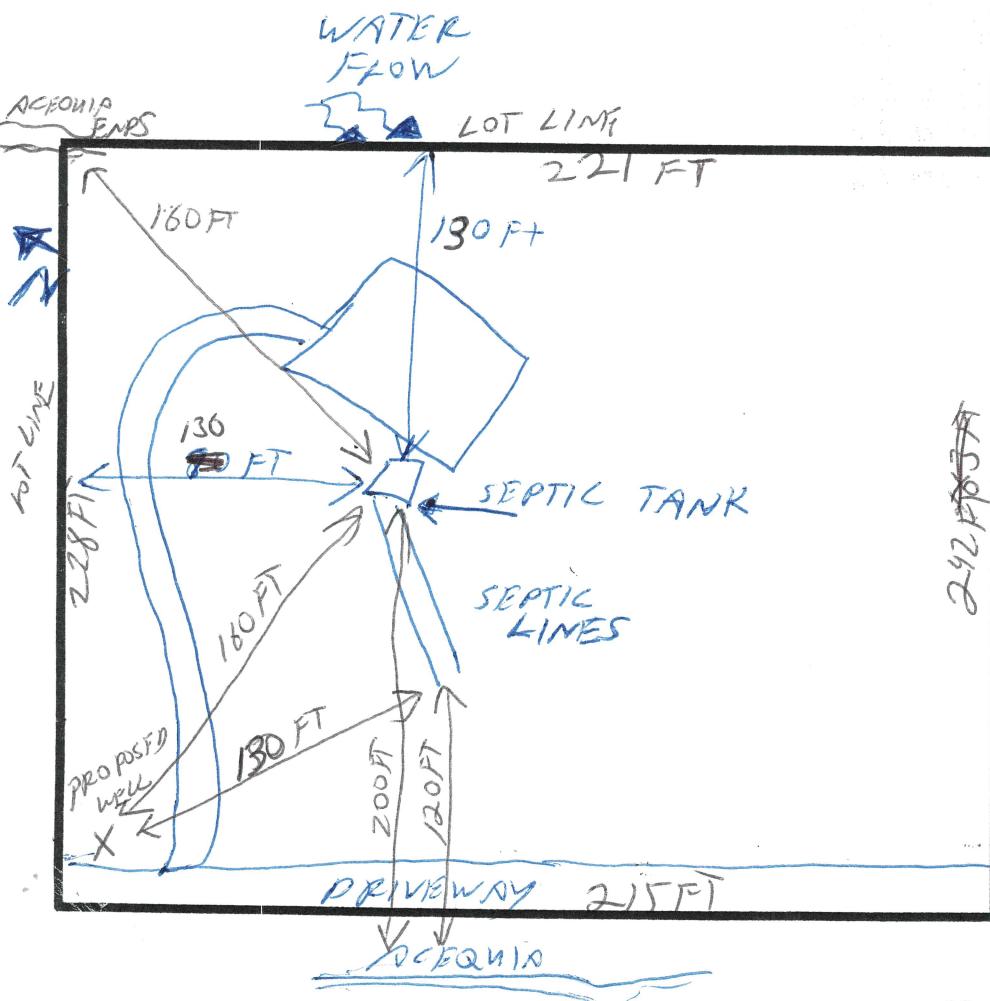
Total Trench or Bed length \_\_\_\_\_ ft. Number of trenches: \_\_\_\_\_

Number of gravelless units 18

D. Depth from ground surface to bottom of absorption area \_\_\_\_\_ ft.

V. SITE PLAN: Diagram the lot and liquid waste system. Show setbacks to the objects listed below within 200 feet of system and the direction of groundwater flow. Give distances from:

Treatment Unit to:	Disposal System to:
130 ft.	Property line 135 ft.
130 ft.	Property line 140 ft.
10 ft.	Buildings 20 ft.
ft. Structures	ft.
160 ft. Wells	130 ft. PT
200 ft. Irrigation	120 ft.
ft. Arroyos	ft.
ft. Surface water	ft.



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

*WCKing*  
Signature

4/18/05  
Date

Owner  Contractor  Other

VII. NMED PERMIT A permit for construction of the liquid waste disposal system described herein is hereby:

Granted  Granted subject to conditions  Denied  
 Conditions  Reasons for Denial:

*William C. King*  
NMED Representative

5/11/05  
Date 5/11/05

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 that the system is completed.

If you have questions call: \_\_\_\_\_

NMED Inspection History

NMED Representative

Date

SITE INSP - DISPOSITION OF WATERLINE LESS THAN 10 FT FROM TANK. NEEDS RISER. CORRECTED

VIII. NMED FINAL APPROVAL:

The system described above  was  was not inspected.

*WCKing*  
NMED Representative

12/9/05  
Date



NEW MEXICO  
ENVIRONMENT  
DEPARTMENT

PERCOLATION TEST RECORD  
FOR INDIVIDUAL LOTS

OWNER'S NAME - Last, First and Middle

Yates, James E

HOME PHONE

505-751-0695

BUSINESS PHONE

MAILING ADDRESS - Street/P O Box, City, State and Zip Code

HCR 74 Box 22602 El Prado NM 87529

LOCATION OF PROPERTY

15 DESIDERIO

Test Hole Number 1

Time	Depth of hole	Distance to Top of Water	Actual Water Level Drop
2:15	37		
2:25	37 1/2		1/2
2:55	39		1 1/2
3:25	40 1/2		1 1/2
3:55	REFILLED TO 37	38 1/2	1/2
4:25	40 1/4		1 3/4
4:55	41 3/4		1 1/2
5:25	REFILLED TO 37	38 1/2	1 1/2
5:55	40		1 1/2
6:25	41 1/2		1 1/2

Test Hole Number 2

Time	Depth of hole	Distance to Top of Water	Actual Water Level Drop
2:15	38		
2:25	38 1/2		1/2
2:55	40		1 1/2
3:25	41 3/4		1 3/4
3:55	REFILLED TO 38	39 1/2	1 1/2
4:25	41		1 1/2
4:55	42 1/2		1 1/4
5:25	REFILLED TO 38	39 1/2	1 1/2
5:55	41		1 1/2
6:25	REFILLED TO 38	39 1/2	1 1/2

Percolation Rate

Percolation rate = Time interval used, in minutes  $\div$  Last water level drop, in inches

Test Hole Number 1 :  $\frac{30 \text{ minutes}}{1.5 \text{ inches}} = 20 \text{ min/in}$

Test Hole Number 2 :  $\frac{30 \text{ minutes}}{1.5 \text{ inches}} = 20 \text{ min/in}$  Average  $20 \text{ min/in}$

Test completed by: JAMES YATES

Date: 4-14-05

Owner

Contractor

Other -specify \_\_\_\_\_

Report reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

WARRANTY DEED

ANN CROMBIE, a single person, for consideration paid, grants to JAMES YATES, a married man dealing with his sole and separate property, whose address is HCR 74 Box 22602, El Prado, New Mexico 87529, the following described real estate in Taos County, New Mexico:

A certain tract of land near Arroyo Seco, Taos County, New Mexico, with the Antonio Martinez or Godoi Grant; and located within the Northeast 1/4 of Projected Section 6, Township 26 North, Range 13 East, New Mexico Principal Meridian; described as part of Tract 63, Map 42, Survey 4 of the 1941 Taos County Reassessment Survey; and more particularly described by metes and bounds as follows:

BEGINNING a 1/2 inch rebar set for the Southeast corner of this tract, from whence Triangulation Station "Antonio", a 1973 State Engineer Office brass cap monument found, bears N 81° 47'E, 5515.8 feet distant, thence;

S 75° 13' W, 163.8 feet to a point, thence;  
S 76° 09' W, 58.9 feet to a 1/2 inch rebar set for the Southwest corner, thence;  
N 14° 29' W, 68.8 feet to a 1/2 inch rebar set thence;  
N 10° 03' W, 147.8 feet to a 1/2 inch rebar set for the Northwest corner, thence;  
N 70° 37' E, 117.1 feet to a 1/2 inch rebar set, thence;  
N 67° 54' E, 111.3 feet to a 1/2 inch rebar set for the Northeast corner, thence;  
S 10° 40' E, 221.2 feet to the POINT AND PLACE OF BEGINNING.

This tract contains 1.076 acres, more or less. Together with any appurtenant water rights.

SUBJECT TO:

1 Reservations, restrictions and easements, if any, as contained in patent from the UNITED STATES OF AMERICA to the ANTONIO MARTINEZ or LUCERO DE GODOI GRANT, including but not limited to, water rights, claims of title to water, any easements appurtenant thereto, and all interest in oil, gas and other minerals, if any, recorded in Book A-16, Page 68-97, records of Taos County, New Mexico.

2. Driveway through property and to others as shown on Survey Plat entitled "Ann Crombie" by Joel K. Schantz, NMLS #700B dated April 4, 1985, having Survey # R2921 filed in Cabinet C, Page 63-A, records of Taos County, New Mexico and as shown on Improvement Location Report entitled "Ann Crombie", by Craig T. Gillio, NMLS #14833, dated December 8, 2004, having Project #204-278.

TAOS COUNTY  
JEANNETTE G. RAEI, CLERK  
000299595  
Book 470 Page 19  
12/13/2004 10:13:55 AM  
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3. Power pole and overhead power line as shown on Survey Plat entitled "Ann Crombie" by Joel K. Schantz, NMLS #700B dated April 4, 1985, having Survey # R2921, filed in Cabinet C, Page 63-A, records of Taos County, New Mexico and as shown on Improvement Location Report entitled "Ann Crombie", by Craig T. Gillio, NMLS #14833, dated December 8, 2004, having Project #204-278.

with warranty covenants.

WITNESS my hand and seal this 10<sup>th</sup> day of December, 2004.

Ann Crombie  
ANN CROMBIE

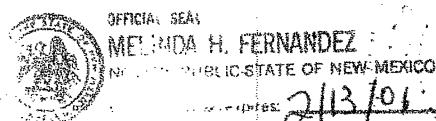
**ACKNOWLEDGMENT IN AN INDIVIDUAL CAPACITY**

STATE OF New Mexico )  
COUNTY OF Taos ) ss.

This instrument was acknowledged before me on December 10<sup>th</sup>, 2004 by  
ANN CROMBIE, a single woman.

Melinda H. Fernandez  
Notary Public

My Commission Expires:





STATE OF NEW MEXICO  
ENVIRONMENT DEPARTMENT  
FIELD OPERATIONS DIVISION  
ONSITE LIQUID WASTE SYSTEM INSPECTION



NMED Permit No: TAC50120 Applicant's Name YATES, JAMES Address 7 DAWNS RD  
Type of Inspection:  INITIAL  FINAL  REINSPECTION  COMPLAINT  OTHER off Honda - Seco Rd

**1. BUILDING SEWER**

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

**2. PRE-TREATMENT**

- a.  Type: \_\_\_\_\_
- b.  Installed as per Plans or Manufacturer's Instructions
- c.  Other: \_\_\_\_\_

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

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

- a.  Located as per Site Plan
- b.  Correct Setbacks
- c.  Tank Certified; Correctly Labeled
- d.  Tank Correctly Oriented, Level & Depth Below Grade
- e.  Inlet / Outlet Pipes Sealed & Watertight
- f.  Inlet / Outlet Baffle or Tee with Branch Extending 12" Minimum Below Liquid Level;
- g.  Effluent Filter Installed, Riser to Grade
- h.  Tank & Fittings Correctly Vented
- i.  Concrete Tank: Coated & Material Correct OR Type V Concrete
- j.  Outlet Pipe Correct Size & Material
- k.  Manholes Correctly Sized & Located
- l.  Manhole Risers at Grade, Diameter, Secure Lids & Coated
- m.  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.  4" Diameter
- b.  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.  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

- a.  Soil Type Verified
- b.  Correct Clearance to Ground Water or Limiting Layer

Additional comments: \_\_\_\_\_

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

- c.  Correctly sized disposal area
- d.  Correct Setbacks
- e.  Excavation at Correct Grade
- f.  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.  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.  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 36 31 22 long 105 35 32  
Elev 7155.7

**9. COMMENTS/VIOLATIONS**

- Continued on attached Sheet(s)

THE TANK IS IN THE HOLDING LINE  
STRUCTURE ERECTED  
SOILS IN PLACE

- Installation Approved
- Installation Approved w/conditions (See Comments/Violations)
- Installation Not Approved (See Comments/Violations)

**10.**

**Final Approval**

- Granted
- Not Granted

NMED Inspector,

Date

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

Installer,

Date



STATE OF NEW MEXICO  
ENVIRONMENT DEPARTMENT  
FIELD OPERATIONS DIVISION  
ONSITE LIQUID WASTE SYSTEM INSPECTION



NMED Permit No: NC012 Applicant's Name TARZON  
Type of Inspection:  INITIAL  FINAL  REINSPECTION  COMPLAINT  OTHER

**1. BUILDING SEWER**

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

**2. PRE-TREATMENT**

- a.  Type: \_\_\_\_\_
- b.  Installed as per Plans or Manufacturer's Instructions
- c.  Other: \_\_\_\_\_

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

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

- a.  Located as per Site Plan POURED IN PLACE
- b.  Correct Setbacks 1700 GAL
- c.  Tank Certified; Correctly Labeled
- d.  Tank Correctly Oriented, Level & Depth Below Grade
- e.  Inlet / Outlet Pipes Sealed & Watertight
- f.  Inlet / Outlet Baffle or Tee with Branch Extending 12" Minimum Below Liquid Level;
- g.  Effluent Filter Installed, Riser to Grade
- h.  Tank & Fittings Correctly Vented
- i.  Concrete Tank: Coated & Material Correct OR Type V Concrete
- j.  Outlet Pipe Correct Size & Material
- k.  Manholes Correctly Sized & Located
- l.  Manhole Risers at Grade, Diameter, Secure Lids & Coated
- m.  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.  4" Diameter
- b.  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.  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

- a.  Soil Type Verified 25' x 30'
- b.  Correct Clearance to Ground Water or Limiting Layer 3' WIDTH WITH 4' GRAVEL

Additional comments: \_\_\_\_\_

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

Address 110 TARZON LN  
**UPPER LAS CRONINAS**

- c.  Correctly sized disposal area
- d.  Correct Setbacks
- e.  Excavation at Correct Grade
- f.  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.  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.  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 36 26.818 long 105 36.388  
Elev 7260

**9. COMMENTS/VIOLATIONS**

- Continued on attached Sheet(s)

INSTALL D-BOX

- Installation Approved
- Installation Approved w/conditions (See Comments/Violations)
- Installation Not Approved (See Comments/Violations)

**10. Final Approval**

- Granted  Not Granted

NMED Inspector, \_\_\_\_\_ Date \_\_\_\_\_

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

Installer, \_\_\_\_\_ Date \_\_\_\_\_



STATE OF NEW MEXICO  
ENVIRONMENT DEPARTMENT

FIELD OPERATIONS DIVISION

ONSITE LIQUID WASTE SYSTEM INSPECTION



NMED Permit No: NONE

Applicant's Name TARLETON

Type of Inspection:  INITIAL  FINAL  REINSPECTION  COMPLAINT  OTHER

Address #10 TARLETON LN

UPPER Las Coronas

**1. BUILDING SEWER**

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

**2. PRE-TREATMENT**

- a.  Type: \_\_\_\_\_
- b.  Installed as per Plans or Manufacturer's Instructions
- c.  Other: \_\_\_\_\_

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

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

- a.  Located as per Site Plan POURED IN PLACE
- b.  Correct Setbacks 1700' OAL
- c.  Tank Certified; Correctly Labeled
- d.  Tank Correctly Oriented, Level & Depth Below Grade
- e.  Inlet / Outlet Pipes Sealed & Watertight
- f.  Inlet / Outlet Baffle or Tee with Branch Extending 12" Minimum Below Liquid Level;
- g.  Effluent Filter Installed, Riser to Grade
- h.  Tank & Fittings Correctly Vented
- i.  Concrete Tank: Coated & Material Correct OR Type V Concrete
- j.  Outlet Pipe Correct Size & Material
- k.  Manholes Correctly Sized & Located
- l.  Manhole Risers at Grade, Diameter, Secure Lids & Coated
- m.  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.  4" Diameter
- b.  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.  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

- a.  Soil Type Verified 25' x 30' 3' WIDTH WITH 2' GRAVEL
- b.  Correct Clearance to Ground Water or Limiting Layer

Additional comments: \_\_\_\_\_

- OK - If installed and meets Requirements
- N/I - Not inspected
- N/A - Not applicable
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- A/P - As Proposed
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- c.  Correctly sized disposal area
- d.  Correct Setbacks
- e.  Excavation at Correct Grade
- f.  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.  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.  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 36 28 878 long 105 36 388

Elev 7260

9.

**COMMENTS/VIOLATIONS**

- Continued on attached Sheet(s)

INSTALL D-BOX

- Installation Approved
- Installation Approved w/conditions (See Comments/Violations)
- Installation Not Approved (See Comments/Violations)

10.

**Final Approval**

- Granted
- Not Granted

NMED Inspector, \_\_\_\_\_ Date \_\_\_\_\_

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

Installer, \_\_\_\_\_ Date \_\_\_\_\_