



APPLICATION FOR A
LIQUID WASTE PERMIT

NMED Permit Number: TA050120
Date NMED Received: 5/4/05

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

SYSTEM OWNER'S NAME: Last, First, MI Home Phone: Business Phone:
B. Yates, James E 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 Hondo-Secco Road towards
Secco - 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: PHONE:
ANTONIO J. ARNOLD 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 Date of Record: PRIOR TO 1985
(nearest 0.01 acre) (Plat Date or Subdivision Date)

- B. Depth from Ground Surface to:
Seasonal High Water Table 7100 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: INFILTRATORS
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

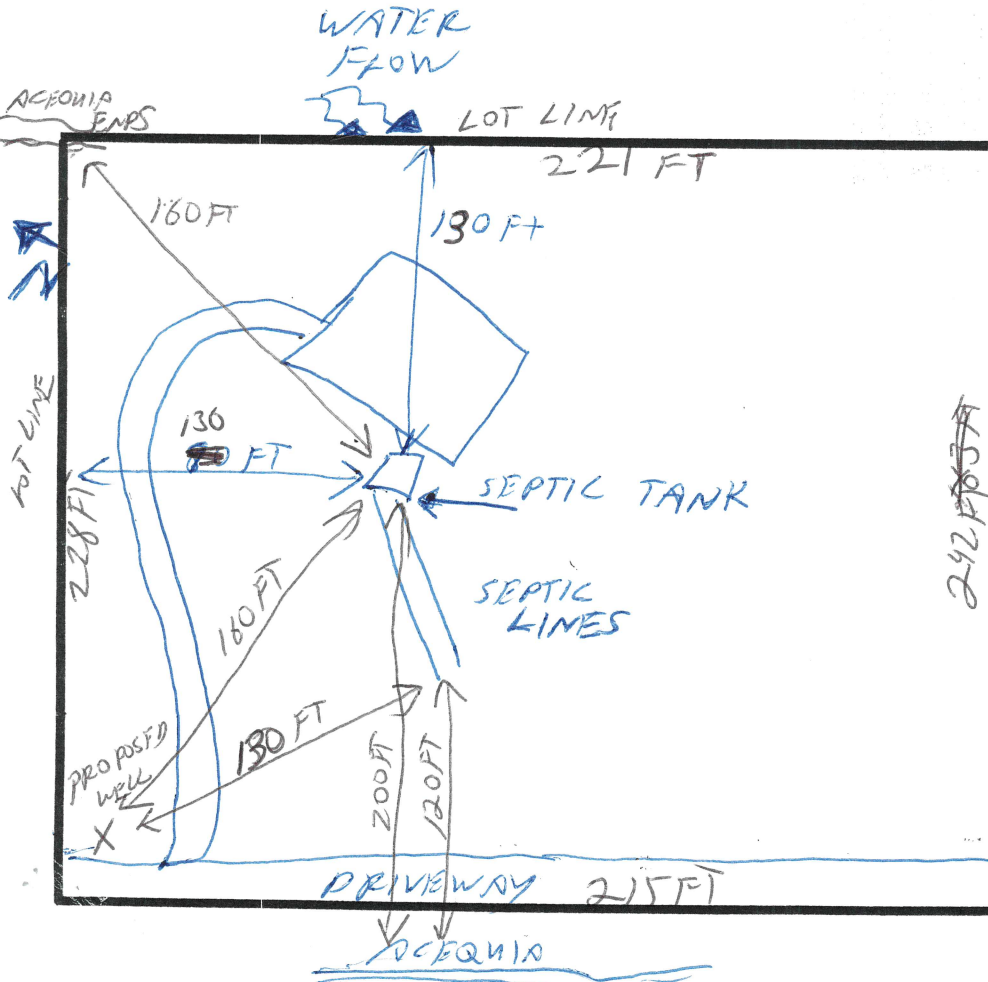
- D. Depth from ground surface to bottom of absorption area ft.

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:

<u>130</u> ft.	Property line	120 <u>135</u> ft.
<u>130</u> ft.	Property line	<u>140</u> ft.
<u>10</u> ft.	Buildings	<u>20</u> ft.
<u>160</u> ft.	Structures	<u>130</u> ft.
<u>200</u> ft.	Wells	<u>120</u> ft.
<u>160</u> ft.	Irrigation	<u>130</u> ft.
<u>120</u> ft.	Arroyos	<u>120</u> ft.
<u>120</u> ft.	Surface water	<u>120</u> 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.

Signature

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 INSPECTION - DISPOSITION OF WATER LINE LESS THAN 10' FROM TANK. NEEDS RISER. CORRECTED

VIII. **NMED FINAL APPROVAL:**

The system described above ☒ was ☐ was not inspected.

NMED Representative

Date



NEW MEXICO
ENVIRONMENT
DEPARTMENT

PERCOLATION TEST RECORD
FOR INDIVIDUAL LOTS

OWNER'S NAME - Last, First and Middle <u>Yates, James E</u>	HOME PHONE <u>505-751-0695</u>	BUSINESS PHONE
MAILING ADDRESS - Street/P.O. Box, City, State and Zip Code <u>HCR 74 Box 22602 El Prado NM 87529</u>		
LOCATION OF PROPERTY <u>15 DESIPERIO</u>		

Test Hole Number 1

Depth of hole 43

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

Test Hole Number 2

Depth of hole 44

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

Percolation Rate

Percolation rate = Time interval used, in minutes ÷ 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 min/in

Test completed by: JIM 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.

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 10th 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 10th, 2004 by ANN CROMBIE, a single woman.

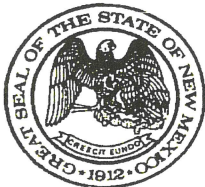
Melinda H. Fernandez
Notary Public

My Commission Expires:



OFFICIAL SEAL
MELINDA H. FERNANDEZ
NOTARY PUBLIC STATE OF NEW MEXICO

2/13/01



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 Delmar Rd
Type of Inspection: ☐ INITIAL ☐ FINAL ☐ REINSPECTION ☐ COMPLAINT ☐ OTHER off 110000 - 5000 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: _____

- 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 32.5
Elev 7557

9. COMMENTS/VIOLATIONS

☐ Continued on attached Sheet(s)

SEPTIC TANK WITH 100' HOLDING
TANK REQUIRED DWS
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, LUCKINS

Date 12/8/05
12/9/05

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 _____

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



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



NMED Permit No: NMVE Applicant's Name TARLTON
Type of Inspection: ☐ INITIAL ☐ FINAL ☐ REINSPECTION ☐ COMPLAINT ☐ OTHER

Address #10 TARLTON LN

UPPER LAS COLONIAS

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' & 30'
b. ☐ Correct Clearance to Ground Water or Limiting Layer 3' WIDTH WITH 24' GRAVEL

Additional comments: _____

- 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 8 18 long 105 36 38 8
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, _____

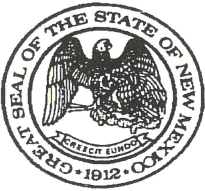
Date _____

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 _____

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



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



NMED Permit No: NONE Applicant's Name TARLTON Address #10 TARLTON LN
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' 3' WIDTH WITH
b. ☐ Correct Clearance to Ground Water or Limiting Layer 2' GRAVEL

Additional comments: _____

- 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 26 878 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 _____

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