

**APPLICATION FOR A PERMIT TO INTALL, ALTER OR REPAIR AN INDIVIDUAL  
SEWAGE DISPOSAL SYSTEM**

**CHEYENNE COUNTY**

**STATE OF COLORADO**

Number: \_\_\_\_\_

Fee: \_\_\_\_\_

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

**Owner:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Site Address:**

\_\_\_\_\_  
\_\_\_\_\_

**Legal Description:**

**County:** Cheyenne    **Section:** \_\_\_\_\_    **T'ship:** \_\_\_\_\_    **Range:** \_\_\_\_\_

**Acres:** \_\_\_\_\_    **Subdivision:** \_\_\_\_\_    **Lot:** \_\_\_\_\_    **Block:** \_\_\_\_\_

**Parcel No.:** \_\_\_\_\_

**Installer:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Indicate All Applicable:**

**Residential:** \_\_\_\_\_    **Commercial:** \_\_\_\_\_    **Other:** \_\_\_\_\_

**Number of Persons:** \_\_\_\_\_    **Basement Plumbing:** \_\_\_\_\_

**Number of Bedrooms:** \_\_\_\_\_    **Bathrooms:** Full: \_\_\_\_\_ 3/4: \_\_\_\_\_ 1/2: \_\_\_\_\_

**Water Public (Y/N):** \_\_\_\_\_    **Utility Name:** \_\_\_\_\_

**Water Private (Y/N):** \_\_\_\_\_    **Cistern (Y/N):** \_\_\_\_\_    **Well (Y/N):** \_\_\_\_\_

**Well Permit No.:** \_\_\_\_\_    **Garbage Disposal (Y/N):** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_

**ABSENSE OF PACEL & WELL PERMIT NUMBERS WILL RESULT IN THE  
RETURN OF YOUR PERMIT APPLICATION**

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(Completed by County)

**Planning and Zoning Board's Comments and Recommendations:**

**Comments** (if any):

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**Decision:**

\_\_\_\_\_ Approval

\_\_\_\_\_ Denial

By: \_\_\_\_\_ Date: \_\_\_\_\_  
Chairman of the Board