

**Hinsdale County Building
Department**
311 Henson St.
P.O. Box 277
Lake City, Colorado 81235
(p) 970.944.2225



**Mineral County Land Use
Office**
1201 N. Main
P.O. Box 70
Creede, Colorado 81130
(p) 719.658.2360

APPLICATION for a Transfer of Title Acceptance Document

Transfer of Title/Permit Number: _____ - _____ Date: _____

Property Address: _____ Parcel Number: _____

Current Property Owner: _____ Application Date: _____

Property Owner's Agent : _____

Owner or Agent's Phone Number: _____ Email address: _____

GENERAL INFORMATION (to be completed by Owner or Owner's Agent):

What is currently served by this OWTS?

- Commercial (describe): _____
- Residential: Number of dwellings: _____ Number of bedrooms: _____
(list number of bedrooms in each dwelling separately, i.e. "3+2")
- RV only Other (describe): _____

Number of dwellings listed by County Assessor: _____ Number of bedrooms: _____

NOTE: Your application may be rejected if the listing by the County Assessor exceeds the application. A new application may be required to add additional capacity.

Are there any other on-site wastewater treatment systems on the property? (Y/N) _____

NOTE: Separate applications for a Transfer of Title Acceptance Document and separate Inspection Reports must be submitted for each OWTS on the property being transferred.

Are there any ongoing Maintenance or Inspection contracts for an OWTS on this property? (Y/N) _____

Attach a copy of the most recent maintenance agreement. Date of expiration: _____

Age of OWTS: Tank(s) _____ years Soil Treatment Area _____ years Lagoon _____ years

Water Softener? Y / N Garbage Disposal? Y / N Grease Trap? Y / N

Has a sewage backup ever occurred? Y / N Date of last sewage backup: _____

List any known repairs to system: _____

Date septic tank was last pumped before inspection: _____ Usual frequency of pumping: _____

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INSPECTION INFORMATION (attach Inspection Report(s) to this Application upon submission):

Date of Most Recent Inspection: _____ Inspector: _____

Inspection Result Acceptable? (Y/N) _____ Inspector's NAWT Certification Number: _____

FEES \$50 Administrative fee: Date paid: _____ Payment type: _____ Check #: _____
Received by: _____

AFFIRMATION (must be signed by current property owner): I am requesting...

- A Transfer of Title Acceptance Document (*all inspection and servicing reports are acceptable, bedroom count matches permit and County Assessor records*)
- A Conditional Transfer of Title Acceptance Document (*check at least one of the following*):
 - Buyer has completed an agreement to obtain necessary permits and repairs (attached)
 - Conditions do not allow for repairs (attach explanation)
 - Inspection could not be completed (attach explanation)

I acknowledge: (1) The information above is true and accurate to the best of my knowledge, (2) STPHD may deny this application or issue conditional acceptance in accordance with relevant laws and regulations, (3) issuance of an acceptance document does not imply any warranty by STPHD as to the operation of the OWTS, and (4) the property owner and all future property owners assume the responsibility and liability for proper maintenance of the OWTS.

Signature of Property Owner _____ **Date:** _____