

Variance from the On-site Wastewater Treatment System Regulations Construction Site

Contractor: _____ Date: _____

Company: _____

Mailing Address: _____

Phone Number: _____ Cell: _____

Name of Property Owner: _____

Schedule number of property: _____

Legal description of property: _____

Property address (if known): _____

I will use a **Portable Chemical Toilet at a Construction Site**, and I agree to the following restrictions:

1. The information I have provided is complete and accurate to the best of my knowledge.
2. All contents of the toilet will be disposed of in an approved dump station.
3. The chemical toilet will be used to service a **Construction Site** only.
4. The variance is NOT transferable to another site.
5. When this construction project is completed, the chemical toilet will be removed.
6. The construction company will not pay more than \$100.00 per year for units in excess of five sites.
7. Site specific copies of receipts for rental of the unit must be provided to the Zoning Office.
8. I include a non-refundable \$20.00 application fee with this request.

I have read, understand and agree to the above.

Signed: _____

Make check payable to Custer County

Return to:
Custer County Planning and Zoning
P. O. Box 203
Westcliffe, CO 81252

For official use only
