



PARAGON ENGINEERING, INC.

P.O.

Ref Price

Pat O'Connor

March 18, 1980

Colorado Department of Health
125 N. 8th
Grand Junction, CO 81501

Attn: Dick Bowman, P.E.
Re: C3/4 Rd. Interceptor,
Central Grand Valley Sanitation District

Gentlemen:

Attached is an Application for Site Approval of Sewage Collection Facilities for the above referenced project.

Criteria used for design of sewage collection facilities is as follows:

Design Period		20 years
Area Served		440 acres
Population	units @ 3.5 persons/unit	6,160 persons
Density		14 persons/acre
Per capita sewage contribution	average	100 gpd
	maximum	400 gpd
Infiltration		normal
Industrial Waste Contribution		none
Design flow rates	average	616,000 gpd
	maximum	1,540,000 gpd
Pipe Size		15 inch
Minimum Grade		0.15 %
Velocity (flowing full, n = 0.013)		2.2 fps
Maximum capacity (n = 0.013)		1.70 mgd

Please contact our office if you have any questions.

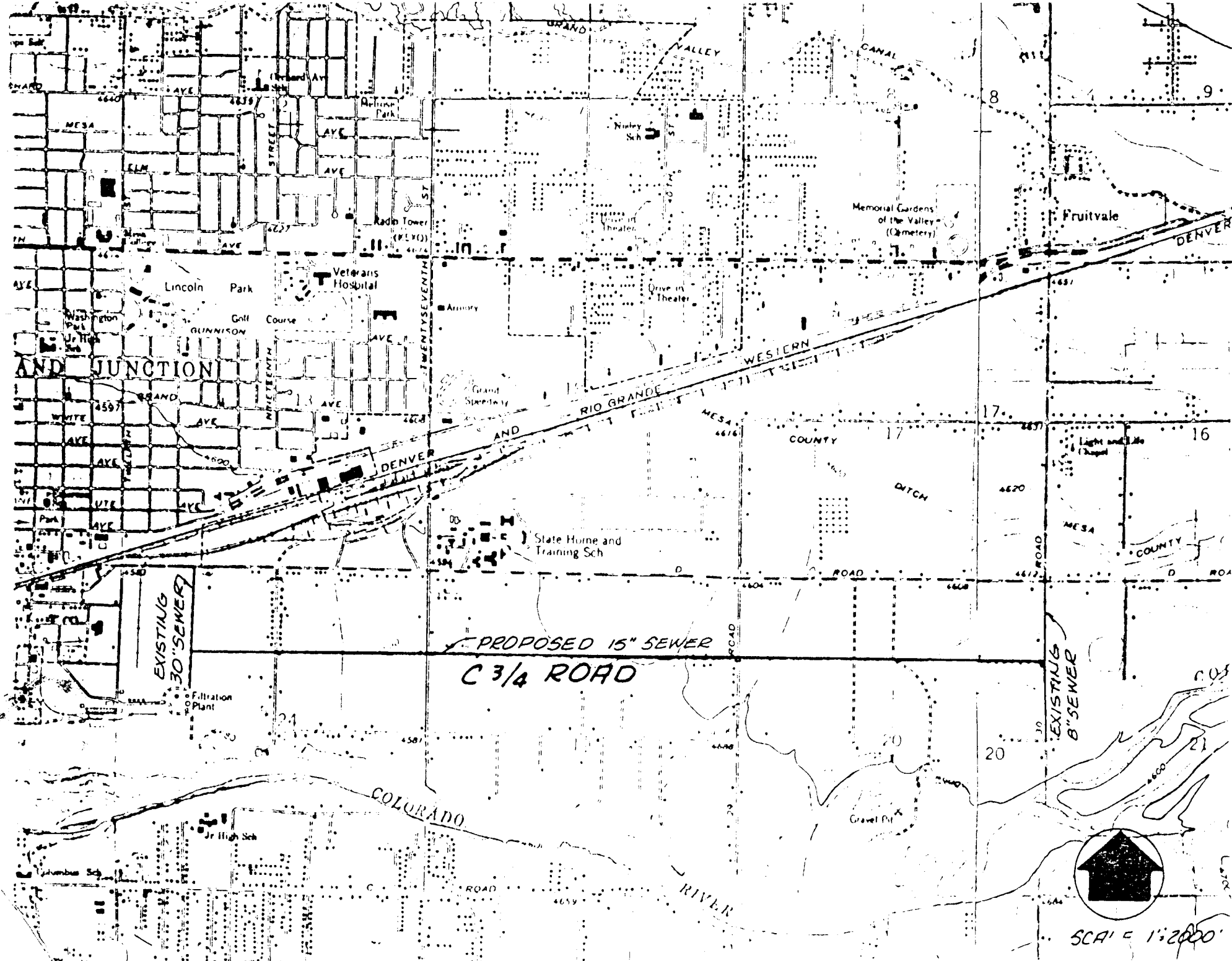
Very truly yours,

William E. Bennett

William E. Bennett

WEB/lt

cc: Jim Patterson, City of Grand Junction



SCALE 1:2000

APPLICATION FOR SITE APPROVAL OF SEWAGE COLLECTION FACILITIES AND SMALL LIFT STATIONS
Required If: A) Serving MORE than Twenty Persons and MORE than 2,000 GPD of flow
and/or B) Lift station having less than 20,000 GPD capacity.

Applicant: Central Grand Valley Sanitation District

Address: 590 Grand Valley Drive Phone: 434-3642

Name and Address of Consulting Engineer: Paragon Engineering, Inc.

P.O. Box 2872 Grand Junction, CO 81502 Project: C3/4 Road Interceptor

A. Size of Lift Station: _____ gpm County: Mesa

B. Sizes and approx. lengths of Sewer Lines:
15 inch 14,540 ft. _____ inch _____ ft.
_____ inch _____ ft. _____ inch _____ ft.

C. Average flow when fully developed: 1.70 mgd.

D. Will any structure serviced by the collection facilities be located in a 100 year
flood plain? No

E. Connection:
This sewer system will connect to a 30 inch existing sewer owned by City of Grand Junction
Munic. or District

which has/has not approved this connection on _____ Approved
Date _____ Disapproved

Signature and Title

F. Treatment:
Treatment Entity City of Grand Junction has the capacity and
agrees to treat this sewage _____ Yes _____ No
Date _____

Signature and Title

G. Comments of Governmental Authority (City or County):
This project (meets) (does not meet) our planning requirements for the service area.
Recommend: Approval _____ Disapproval _____ No Comment _____
Date _____

Signature and Title

H. Applicant's Signature _____ Date Mailed to
Commenting Authority

Copies must be sent to local health department and Council of
Governments. If over 50,000 gpd, also send to local and regional
planning agency and to any other city or town within three miles
of the proposed facilities.
(Enclose copies of postal receipt showing copies were sent by Certified Mail.)

I. District Engineer comments and recommendation: _____

Date _____ Signature _____

J. Commission Action:
The Water Quality Control Commission (Approved) (Disapproved) this application on
Chief, Field Services Section _____
Date _____ Date _____

Interested persons may comment to the Water Quality Control Commission. The application