



## Request for Comments

Case Name: Lira Vehicle Storage Conditional Use Permit

Case Number: RCU2024-00011

May 29, 2024

The Adams County Planning Commission is requesting comments on the following application: **Conditional use permit to allow accessory parking and storage vehicles in excess of 7,000 pounds on a residentially-used property in the Agricultural-3 zone district. The site is affected by the Airport Height and Noise Overlays.** This request is located at 25999 E 152ND AVE. The Assessor's Parcel Number is 0156708400003.

Applicant Information:

DANIEL LIRA  
25999 E 152ND AVE  
BRIGHTON, CO 80603

Please forward any written comments on this application to the Community and Economic Development Department at 4430 South Adams County Parkway, Suite W2000A Brighton, CO 80601-8216 or call (720) 523-6800 by 06/12/2024 in order that your comments may be taken into consideration in the review of this case. If you would like your comments included verbatim please send your response by way of e-mail to CSpaid@adcogov.org.

Once comments have been received and the staff report written, the staff report and notice of public hearing dates may be forwarded to you upon request. The full text of the proposed request and additional colored maps can be obtained by contacting this office or by accessing the Adams County web site at [www.adcogov.org/current-land-use-cases](http://www.adcogov.org/current-land-use-cases).

Thank you for your review of this case.

Cody Spaid  
Planner II

BOARD OF COUNTY COMMISSIONERS

Eva J. Henry  
DISTRICT 1

Charles "Chaz" Tedesco  
DISTRICT 2

Emma Pinter  
DISTRICT 3

Steve O'Dorisio  
DISTRICT 4

Lynn Baca  
DISTRICT 5



# CONDITIONAL USE PERMIT

Conditional uses are those uses which are presumptively compatible with other land uses authorized or permitted in a zone district, but, if approved, will require more discretionary review than those uses which are authorized. In addition to meeting applicable performance standards, conditional uses may require the imposition of conditions to ensure the number and type of conditional uses and their location, design, and configuration are appropriate at a particular location.

## Required Checklist Items

- Development Application Form (pg. 5)
- Written Explanation
- Site Plan
- NA Landscape Plan
- Proof of Ownership (warranty deed or title policy)
- Proof of Water, Sewer Services, and Utilities
- Legal Description
- Statement of Taxes Paid
- NA Trip Generation Analysis

Supplemental items may be needed on a case-by-case basis. **\*Email documentation will be required if supplemental items are deemed unnecessary.**

- Please contact the Planner of the Day ([CEDD-POD@adcogov.org](mailto:CEDD-POD@adcogov.org)) to determine whether a Neighborhood Meeting is necessary.
- Please contact the Engineer of the Day ([CEDD-ENG@adcogov.org](mailto:CEDD-ENG@adcogov.org)) to determine whether a Level 1 Storm Drainage Study is necessary

If you are applying for any of the following applications, please contact the Planner of the Day:

- Solid waste transfer station
- Scrap tire recycling facility
- Inert fill

Fees Due When Application is Deemed Complete	
Conditional Use Permit	Residential Use: \$1,000 (Additional Requests: \$400) Non-Residential Use: \$1,400 (Additional Requests: \$600)

## Conditional Use - Guide to Development Application Submittal

This application shall be submitted electronically to [epermitcenter@adco.gov](mailto:epermitcenter@adco.gov). If the submittal is too large to email as an attachment, the application may be sent as an unlocked Microsoft OneDrive link. Alternatively, the application may be delivered on a flash drive to the One-Stop Customer Service Center. All documents should be combined in a single PDF, although you may provide multiple PDFs to ensure no file exceeds 100 MB. Once a complete application has been received, fees will be invoiced and payable online at [www.permits.adco.gov](http://www.permits.adco.gov).

### Written Explanation

- A clear and concise description of the proposal. Please include description of use, time frame, purpose of project, proposed improvements, and all other relevant details.

### Site Plan

- A detailed drawing of existing and proposed improvements, including:
  - Streets, roads, and intersections
  - Driveways, access points, and parking areas
  - Existing and proposed structures, wells, and septic systems,
  - Easements, utility lines, and no build or hazardous areas
  - Scale, north arrow, and date of preparation
- Parking: must meet the quantity, dimensional standards and other requirements outlined in Section 4-15
- An Improvement Location Certificate or Survey may be required during the official review
- Elevations

### Landscape Plan

- Landscaping must meet the requirements outlined in Section 4-19 of the Adams County Development Standards and Regulations
- Landscape plan must include:
  - Number, installation size, and location of each plant type
  - Landscape maintenance plan
  - Bufferyards: identify the uses of adjacent properties and incorporate the correct bufferyard between existing and proposed use

### Proof of Ownership

- A deed may be found in the Office of the Clerk and Recorder.
- A title commitment is prepared by a professional title company.

### Proof of Water/Sewer/Utilities

#### Water

- A written statement from the appropriate water district indicating that they will provide service to the property OR a copy of a current bill from the service provider.
- Well permit(s) information can be obtained from the Colorado State Division of Water Resources at (303) 866-3587.

#### Sewer

- A written statement from the appropriate sanitation district indicating that they will provide service to the property OR a copy of a current bill from the service provider.
- A written statement from Tri-County Health indicating the viability of obtaining Onsite Wastewater Treatment Systems.

#### Utilities (Gas, Electric, etc.)

- A written statement from the appropriate utility provider indicating that they will provide service to the property.
- Copy of a current bill from the service provider.

### Legal Description

- Geographical description used to locate and identify a property.
- Visit <http://gisapp.adco.gov/quicksearch/> to find the legal description for your property.

**Statement of Taxes Paid**

- All taxes on the subject property must be paid in full. Please contact the Adams County Treasurer's Office or visit ADCOTAX.COM

**Trip Generation Analysis (TGA)**

- This analysis should be conducted by a traffic engineer and should include total vehicle trips per day and peak hour volumes generated by the proposed development.
- A Traffic Impact Study may be required after the first review.

**SUPPLEMENTAL:****Neighborhood Meeting Summary**

- Please refer to Section 2-01-02 of the Adams County Development Standards and Regulations for the specific requirements regarding time, location, and notice.
- A written summary shall be prepared including the materials submittal presented at the meeting, any issues identified at the meeting, and how those issues have been addressed.

**Level 1 Storm Drainage Study**

- If the proposed conditional use permit involves paving, construction of any structures, grading of property, outdoor storage of materials (gravel piles included) or otherwise increasing the impervious area of a site, a Level 1 Storm Drainage Study will be required.
- This plan should be prepared in accordance with the "Level 1 Storm Drainage Plan" criteria as defined in Appendix item B-3 of the Adams County Development Standards and Regulations. Most importantly, it needs to clearly identify a viable storm outfall location, and floodplain/floodway boundaries.



## DEVELOPMENT APPLICATION FORM

### APPLICANT

Name(s):  Phone #:

Address:

City, State, Zip:

2nd Phone #:  Email:

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### OWNER

Name(s):  Phone #:

Address:

City, State, Zip:

2nd Phone #:  Email:

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### TECHNICAL REPRESENTATIVE (Consultant, Engineer, Surveyor, Architect, etc.)

Name:  Phone #:

Address:

City, State, Zip:

2nd Phone #:  Email:

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**DESCRIPTION OF SITE**

Address:

City, State, Zip:

Area (acres or square feet):

Tax Assessor Parcel Number

Existing Zoning:

Existing Land Use:

Proposed Land Use:

Have you attended a Conceptual Review? YES  NO

If Yes, please list PRE#:

I hereby certify that I am making this application as owner of the above-described property or acting under the authority of the owner (attached authorization, if not owner). I am familiar with all pertinent requirements, procedures, and fees of the County. I understand that the Application Review Fee is non-refundable. All statements made on this form and additional application materials are true to the best of my knowledge and belief.

Name:

Date:

Owner's Printed Name

Name:

Owner's Signature

### **Written Explanation** □

The applicants, Daniel and Silvia Lira, residing at 25999 East 152<sup>nd</sup> Avenue, Brighton, CO 80603, are requesting a Conditional Use Permit for an agricultural support business and to keep, park or store on the premises a vehicle in excess of seven thousand (7,000) pounds Gross Vehicle Weight (GVW) including tractor trailers, over-the-road semi-trucks, and similar equipment in the Agricultural-3 (A-3) zone district. □

The applicants own and operate Lira Landscaping and Services, LLC on the property. Lira Landscaping and Services has been in business since 2008. Lira Landscaping & Services provides agricultural and landscaping services throughout northern Colorado including Adams County. This business employs ten (10) to twelve (12) seasonal employees including the owners. One quarter of the employees commute and park on the property. A parking spot is provided for each employee vehicle. No customers visit the site. All materials and equipment are kept indoors. Applicants also own and operate one semi-truck. Applicants sole source of income comes from Lira Landscaping & Services. □

The applicants maintain a very low profile. The business is located at their home, so it is extremely important for them to maintain a clean, quiet environment. Lira Landscaping and Services is a small business that employs disadvantaged individuals. The applicants purchased this property in this location because Adams County supports small, and minority owned and operated businesses. The applicants would like to continue maintaining their business in Adams County. □

### **Site Characteristics** □

The subject site is located on the north side of East 152<sup>nd</sup> Avenue, between Harvest and Powhatton Roads. The subject property is approximately 40 acres. The site contains a single-family home and two outbuildings. The outbuildings are 1,200 and 40' x 2,400 square feet in size. □

### **Development Standards and Regulations Requirements** □

The property is zoned Agricultural-3 (A-3), which is intended to provide landholdings of 35 acres or greater for agricultural and pasturage. Per Section 3-07-01 of the Adams County Development Standards and Regulations, agricultural support business uses and trucking and general warehousing shall require a conditional use permit in the Agricultural-3 zone district. Section 2-02-09-06 of the County's Development Standards and Regulations, "The conditional use is compatible with the surrounding area, harmonious with the character of the neighborhood, not detrimental to the immediate area, not detrimental to the future development of the area, and not detrimental to the health, safety, or welfare of the inhabitants of the area and the County". The existing structures conform to all setback and height regulations with the Agricultural-3 zone district, as specified in Section 3-10-06-04 of the Development Standards and Regulations. □

### **Future Land Use Designation/Goals of the Conditional Use Plan for the Area** □

The future land use designation on the property is Agriculture. Per Chapter 5 of the Adams County Comprehensive Plan, the Agriculture future land use designation is intended for land holdings of at least 35 acres, and for the preservation of agricultural area for long-term farming. The future land use areas designated for agricultural use are also to conserve environmentally

sensitive areas. The proposed use of an agricultural support business would support these kinds of land uses. □

### **Compatibility with the Surrounding Land Uses** □

The surrounding properties are all zoned Agricultural-3 (A-3). The surrounding properties are either used for agricultural or developed with very low density single-family residential uses. The subject request is compatible with the surrounding area and will not cause significant off-site impacts such as traffic, noise, or lighting to the surrounding properties. The applicants have been operating this business for the past sixteen years. The use of this property shall not adversely impact the existing irrigation facilities (Denver-Hudson Canal). □

### **Environmental Impacts** □

Received notification on February 17, 2022, from Verdad Resources that the oil and gas wells on the property were plugged and abandoned as per COGCC regulations. There are no plans to construct any structures within a two-hundred-fifty (250) foot buffer of the abandoned oil and gas wells. Since the oil and gas wells have been plugged and abandoned, the oil pipeline that traverses the parcel from north to south is not in use and will not be impacted by the proposed plan. □

Most equipment and vehicle repairs and maintenance will not be performed on site. Small equipment repairs will be performed on a concrete pad. □

Recycled asphalt is utilized as a dust control measure on the property to prevent any off-site impacts. Surface areas for all parking surfaces, non-paved driveway areas, and access throughout the property is recycled asphalt. □

Engine idling will be limited and will not exceed the maximum allowed as outlined in C.R.S.42-14-105. □

### **Planning** □

Applicants own four (4) personal vehicles. Applicants operate three (3) landscaping vehicles that tow wire mesh landscaping trailers. Applicants propose to have four (4) designated parking spots for employees during the peak season, which is June through September. Screening for vehicles will be in the form of fencing, not to exceed ninety-six (96) inches in height. The application for a building permit will be requested prior to the installation of any fencing on the property. □

The recreational vehicle located on the property has not been in the past and is not inhabited. □

Public right-of-way parking does not apply to this property since it is zoned A-3, Agricultural. □

### **Engineering** □

Vehicle trips do not exceed twenty (20) per day; therefore, a Traffic Impact Study (TIS) is not required. □

The referenced property is not located within a delineated 100-year flood hazard zone. □

The referenced property is not in Adams County MS4 Stormwater Permit area. Applicants do not intend to disturb any areas on the property which would require a State Permit COR400000. □



Applicants are not proposing to pave any parking areas. □

Applicants do not intend to import any soil to the property site. □

There are not any trees, hedges, shrubs, fences, walls or other structures, and facilities and devices over forty-two (42) inches in height that would obstruct a driver's vision within the vision clearance triangle of any public roadways adjacent to the property. □

Applicants have requested an inspection from the Brighton Fire Rescue District of the entrance gate to the property and of the vehicle dimensions and turning radius for internal circulation of fire trucks, trash trucks, and delivery trucks. Inspection results will be provided when received. □

□

# SITE PLAN

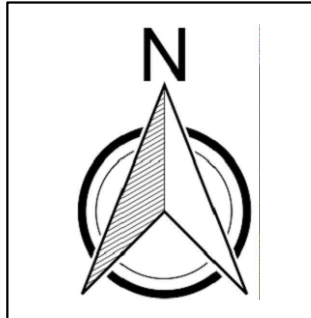
25999 E 152nd Ave

Brighton, CO 80603

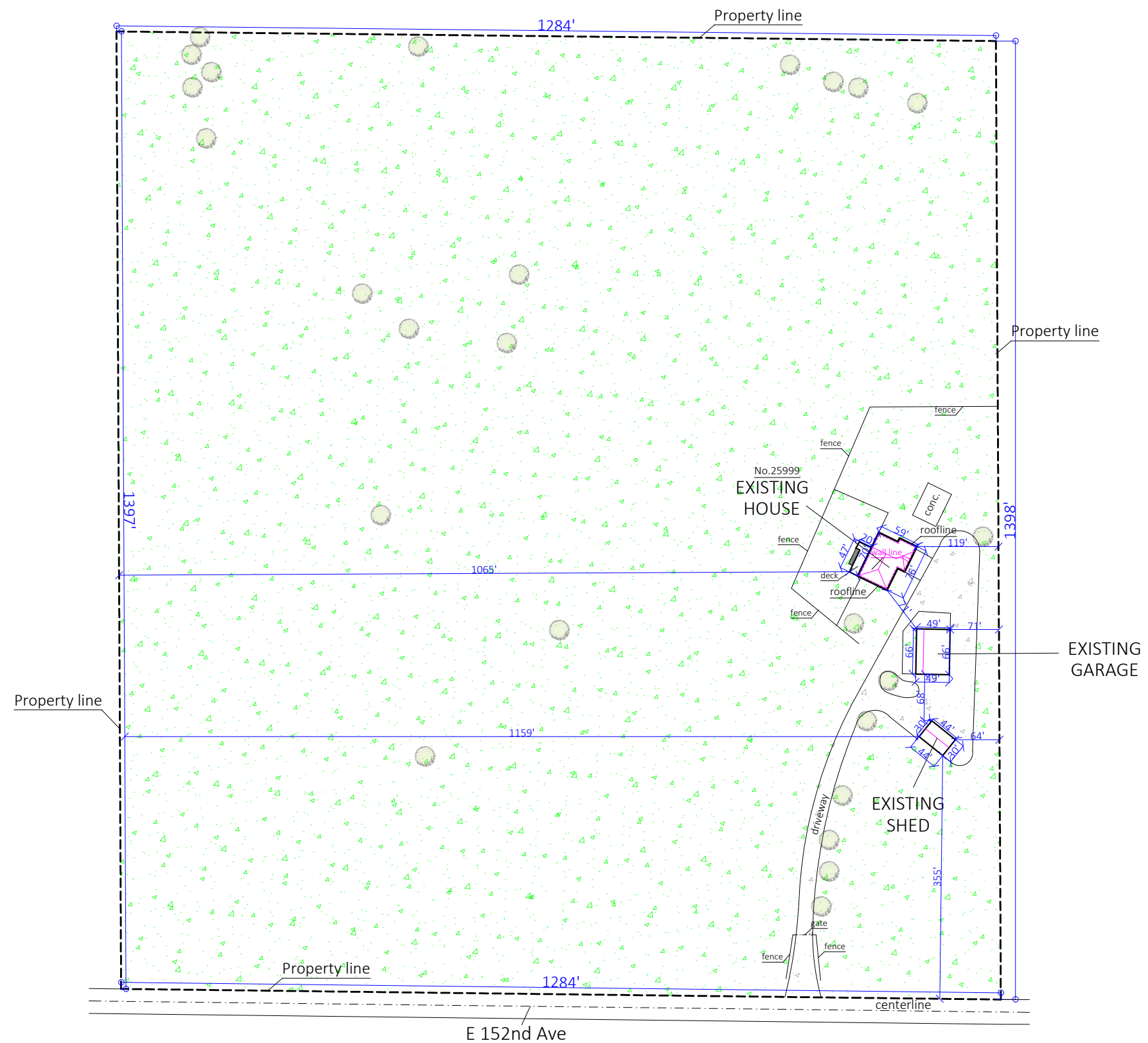
Parcel ID: R0127294

Lot area: 42.22 Acres

Paper Size: 11"x17"



scale 1"=180'







**ORIGINAL PERMIT APPLICANT(S)**

DIXIE L LOVINGIER

**APPROVED WELL LOCATION**

Water Division: 1      Water District: 2  
 Designated Basin: N/A  
 Management District: N/A  
 County: ADAMS  
 Parcel Name: N/A  
 Physical Address: 25999 EAST 152ND AVENUE BRIGHTON,  
 CO 80603

SW 1/4 SE 1/4 Section 8 Township 1.0 S Range 65.0 W Sixth P.M.

**UTM COORDINATES (Meters, Zone: 13, NAD83)**

Easting: 526817.1      Northing: 4424860.3

**ISSUANCE OF THIS PERMIT DOES NOT CONFER A WATER RIGHT  
CONDITIONS OF APPROVAL**

- 1) This well shall be used in such a way as to cause no material injury to existing water rights. The issuance of this permit does not ensure that no injury will occur to another vested water right or preclude another owner of a vested water right from seeking relief in a civil court action.
- 2) The construction of this well shall be in compliance with the Water Well Construction Rules 2 CCR 402-2, unless approval of a variance has been granted by the State Board of Examiners of Water Well Construction and Pump Installation Contractors in accordance with Rule 18.
- 3) Approved pursuant to CRS 37-92-602(3)(b)(II)(A) as the only well on a tract of land of 42.23 acre(s) described as that portion of the SE 1/4 of Sec. 8, Twp. 1 South, Rng. 65 West, 6th P.M., Adams County, more particularly described on the attached exhibit A.
- 4) The use of ground water from this well is limited to fire protection, ordinary household purposes inside not more than three (3) single family dwellings, the watering of poultry, domestic animals and livestock on a farm or ranch and the irrigation of not more than one (1) acre of home gardens and lawns.
- 5) Production from this well is restricted to the Upper Arapahoe aquifer, which corresponds to the interval between 175 feet and 380 feet below the ground surface. Plain casing shall be installed and grouted to prevent production from other zones.
- 6) The pumping rate of this well shall not exceed 15 GPM.
- 7) The return flow from the use of this well must be through an individual waste water disposal system of the non-evaporative type where the water is returned to the same stream system in which the well is located.
- 8) This well shall be constructed not more than 200 feet from the location specified on this permit.

NOTE: To ensure a maximum productive life of this well, perforated casing should be set through the entire producing interval of the approved zone or aquifer indicated above.

See Original Permit

Date Issued: 8/5/2013

Issued By \_\_\_\_\_

Expiration Date: 8/5/2015

**PERMIT HISTORY**

- 10-14-2020 CHANGE IN OWNER NAME/MAILING ADDRESS. CHANGED TO DANIEL LIRA
- 10-14-2020 CHANGE IN OWNER NAME/MAILING ADDRESS. CHANGED TO SILVA LIRA

FORM NO. GWS-31 04/2005	<b>WELL CONSTRUCTION AND TEST REPORT</b> STATE OF COLORADO, OFFICE OF THE STATE ENGINEER 1313 Sherman St., Room 818, Denver, CO 80203 Phone – Info (303) 866-3587 Main (303) 866-3581 Fax (303) 866-3589 <a href="http://www.water.state.co.us">http://www.water.state.co.us</a>	For Office Use Only  <div style="text-align: center; font-size: 24pt; font-weight: bold;">RECEIVED</div> <div style="text-align: center; font-size: 24pt; font-weight: bold;">OCT 25 2013</div> WATER RESOURCES STATE ENGINEER COLO								
<b>1. WELL PERMIT NUMBER:</b> 292162										
<b>2. WELL OWNER INFORMATION</b> NAME OF WELL OWNER: Dixie L Lovingier										
MAILING ADDRESS: 6212 Klimer Loop Unit 201										
CITY: Golden STATE: CO ZIP CODE: 80403										
TELEPHONE NUMBER: (720) 425-4232										
<b>3. WELL LOCATION AS DRILLED:</b> SW1/4, SE1/4, Sec. 8, Twp. 1 <input type="checkbox"/> N or <input checked="" type="checkbox"/> S, Range 65 <input type="checkbox"/> E or <input checked="" type="checkbox"/> W DISTANCES FROM SEC. LINES: 400 ft. from <input type="checkbox"/> N or <input checked="" type="checkbox"/> S section line and 2100 ft. from <input checked="" type="checkbox"/> E or <input type="checkbox"/> W section line. SUBDIVISION: _____, LOT _____, BLOCK _____, FILING (UNIT) _____ Optional GPS Location: GPS Unit must use the following settings: Format must be UTM, Units must be meters, Datum must be NAD83, Unit must be set to true N, <input type="checkbox"/> Zone 12 or <input checked="" type="checkbox"/> Zone 13 STREET ADDRESS AT WELL LOCATION: 25999 152 <sup>ND</sup> Ave, Brighton Northing: 4424916 Owner's Well Designation: _____ Easting: 526986										
<b>4. GROUND SURFACE ELEVATION</b> _____ feet DATE COMPLETED 9/11/2013 TOTAL DEPTH 320 feet DRILLING METHOD Air - Wngbit DEPTH COMPLETED 320 feet										
<b>5. GEOLOGIC LOG:</b>										
Depth	Type	Grain Size	Color	Water Loc.	6. HOLE DIAM (in.)	From (ft)	To (ft)			
	See Attached				9.5	0	20			
					6.5	20	320			
					<b>7. PLAIN CASING:</b>					
					OD (in)	Kind	Wall Size (in)	From (ft)	To (ft)	
					7	Steel	.188	+1	20	
					4	PVC	Sch 40	10	190	
					<b>PERFORATED CASING. Screen Slot Size (in): .030</b>					
					4	PVC	Sch 40	190	320	
					<b>8. FILTER PACK:</b>			<b>9. PACKER PLACEMENT:</b>		
					Material <u>Silica + Pum</u> Size <u>8-10 + 1/4" &lt;</u> Interval <u>320-190 140</u>			Type _____ Depth <u>40</u>		
					<b>10. GROUTING RECORD</b>					
					Material	Amount	Density	Interval	Placement	
					NCement	3 bags	21 gal	20-10	Trimmie	
					NCement	4 bags	28 gal	190-140	Trimmie	
					NCement	4 bags	28 gal	10-40	Trimmie	
Remarks: _____										
<b>11. DISINFECTION:</b> Type HTH					Amt. Used 8 oz					
<b>12. WELL TEST DATA:</b> <input type="checkbox"/> Check box if Test Data is submitted on Form Number GWS 39 Supplemental Well Test.										
TESTING METHOD <u>Air Lift - 1" drop pipe</u>										
Static Level <u>120</u> ft. Date/Time measured. <u>9/12/2013</u> , Production Rate <u>15</u> gpm.										
Pumping Level <u>310</u> ft. Date/Time measured <u>9/12/2013</u> , Test Length (hrs) <u>6</u> .										
Remarks: _____										
<b>13. I have read the statements made herein and know the contents thereof, and they are true to my knowledge This document is signed and certified in accordance with Rule 17 4 of the Water Well Construction Rules, 2 CCR 402-2. [The filing of a document that contains false statements is a violation of section 37-91-108(1)(e), C.R.S., and is punishable by fines up to \$5000 and/or revocation of the contracting license ]</b>										
Company Name: Can-America Drilling, Inc.						Phone: (719)541-2967			License Number: 1149	
Mailing Address: PO Box 416 Simla, CO 80835										
Signature: <u>Wayne Arde</u>				Print Name and Title Wayne A. Arde V.P.				Date 9/17/2013		

## Use Permit For An On-site Waste Water Treatment System

**PROPERTY INFORMATION:**

**OWNER INFORMATION:**

**Address:** 25999 E 152nd Ave  
Brighton, CO 80603--  
**County:** Adams  
**APN:** 0156708400003

**Dwelling Type:** Single Family  
**No. of Bedrooms:** 3  
**Water Supply:** Private Well  
**Onsite ID:** House

**Address:** 25999 E 152nd Ave  
Brighton, CO 80603-  
**Phone:** 720-425-4232

**PERMIT INFORMATION:** ON0039229

**Permit Type:** OWTS

**Construction Phase:** Complete - Use Permit

**Tank 1**

**Tank Capacity Built (Gal):** 1,250  
**Tank Type:** T-Treatment  
**Tank Material:** C-Concrete  
**Tank Baffle:** T's  
**No of Compartments:** 2  
**Effluent Screen?** No

**Soil Treatment Area Built:**

**Type:** BD-CH: Bed with Chambers  
**Area (Sq ft):**  
**Final Depth (Inches):**  
**Chamber Type:** Unknown  
**No of Chambers:** 68  
**Application Method:** Gravity

NOTE: A "Not Specified" comment indicates that either the information was not available or not applicable at the time the permit was issued.

### Associated Professionals

**Business Name:** A-1 Septic Service Inc  
**Name:** David Hage  
2276 Appaloosa Ave  
Brighton, CO 80603

**OWTS - Inspector**  
NAWT Certification: 7325ITC Exp. 11/30/2021  
Phone: 303-921-0258 Phone2: 303-659-0

**OWTS - Permit Comments**

Tuesday, August 11, 2020 11:17 AM - Jeff McCarron

8/11/20 - JM 1805: Jeff McCarron reviewed the inspection report, and approved the use permit. JM emailed the use permit to the applicant.

**FOR AN ON-SITE WASTE WATER TREATMENT SYSTEM**

## Use Permit For An On-site Waste Water Treatment System

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**PROPERTY INFORMATION:**

**Address:** 25999 E 152nd Ave  
Brighton, CO 80603--  
**County:** Adams  
**APN:** 0156708400003

**OWNER INFORMATION:**

**Dwelling Type:** Single Family  
**No. of Bedrooms:** 3  
**Water Supply:** Private Well  
**Onsite ID:** House

**Address:** 25999 E 152nd Ave  
Brighton, CO 80603-  
**Phone:** 720-425-4232

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**PERMIT INFORMATION:** ON0039229**Permit Type:** OWTS**Construction Phase:** Complete - Use Permit**CONDITIONS FOR USE**

This certifies that the On-Site Wastewater Treatment System (OWTS) was either installed or inspected at the property location and was in conformance with the Tri-County Health Department OWTS regulation in effect at the indicated date, and the engineer design (if applicable). This certification for Use allows the owner to use the system until one of the following occurs:

- \* Sale of the property to another owner.
- \* Change of use in the property.
- \* Addition of up to one bedroom.
- \* Addition of a modular unit or mobile home.
- \* Other circumstances as deemed appropriate by Tri-County Health Dept.

Tri-County Health Department must be contacted if any of the above occurs.

**MAINTENANCE REQUIREMENTS**

- \* The septic tank must be inspected once every four years and pumped according to the Requirements in the current Tri-County Health Department OWTS Regulation.
- \* If the septic or dosing tank is equipped with an effluent filter, the filter must be cleaned at manufacturer recommended intervals or more often.
- \* If the system has alternating beds or is a drip or low pressure pipe system, beds or zones must be rotated annually.
- \* Additional maintenance requirements may apply. Refer to the Tri-County Health Department "Your Septic System Guidelines and Records" or engineer's report for specific requirements.

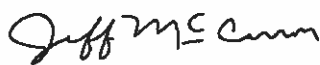
**LIMITATIONS AND DISCLAIMER**

Issuance of a **Use Permit** is subject to the applicable conditions, restrictions and limitation set forth in the OWTS regulations, and is based solely on the conditions observed on the date of inspection(s) and on Department Records at the time of permitting. The issuance of a Use Permit does not constitute a guarantee, warranty or representation by the Department that the system was installed correctly, or that the system will operate properly or will not fail.

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**PERMIT VALID FROM:**

8/11/2020
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Jeff McCarron 08/11/2020



016039229

Permit #PT0032770

USE PERMIT APPLICATION FOR AN ON-SITE WASTEWATER TREATMENT SYSTEM (OWTS)

IMPORTANT NOTE: All items listed below MUST be completed and submitted at the same time:

- Tri-County Health Department Use Permit Application form AND Application fee.
• Tri-County Health Department Inspection Report completed by a CERTIFIED inspector (an inspection report completed by an uncertified inspector will NOT be accepted).
• Copy of the most recent septic tank pumper's receipt (if available).
• If the OWTS system needs to be repaired, then a Minor or Major Repair Permit Fee may be applicable.

(PERMIT FEE IS NON-REFUNDABLE)

Submit electronically to EHWebfillableforms@tchd.org

Completion of All Fields is Required

Application Date: 8/6/20

PROPERTY FOR WHICH PERMIT IS REQUESTED

Address: 25999 E 152nd Ave

City: Brighton

State: CO

Zip: 80603

Parcel Number (APN): 0156708400003

Lot Size in Acres: 42

Current Property Owner Name: Dixie Lovingier

Owner Phone: 720-425-4232

Owner Email: cascoprop@aol.com

County: Adams

Name of Applicant: Dixie Lovingier

Address: 25999 E 152nd Ave

City: Brighton

State: CO

Zip: 80603

Applicant Phone: 720-425-4232

Email: cascoprop@aol.com

Dwelling Type: [X] Single Family [ ] Multi-Family [ ] Commercial [ ] Other

Number of Bedrooms (existing): 3

Water Supply: [ ] Public Community [X] Private Well [ ] Public Non-Community [ ] Unknown [ ] Other

Is more than one building connected to the one OWTS system? [ ] Yes [X] No

Are multiple OWTS serving the property? [ ] Yes [X] No (Complete a separate inspection form and fee for each OWTS)

Reason for Use Permit (Check One): [X] Sale [ ] Bedrooms Added (# Added)

[ ] Change in Use (Commercial or Business) [ ] Addition of Mobile Home

[ ] Other (explain):

Use Permit Inspector

Name: David Hage

Phone: 303-921-0258

Email:

National Association of Wastewater Technicians (NAWT) Certification Number: NA 79587 WT





### Use Permit Inspection Form

Date of Inspection: 8-5-20

#### Use Permit Inspection Information

**IMPORTANT NOTE:** This Tri-County Health Department (TCHD) Inspection Form must be completed by a **CERTIFIED** inspector. An inspection report completed by **UNCERTIFIED** inspector(s) will **NOT** be accepted.

Name: David Hoge Phone: 3-921-0258 Email: \_\_\_\_\_

National Association of Wastewater Technicians (NAWT) (or other approved) Certification

Number: NA 79587 WT If Other, certifying entity: \_\_\_\_\_

#### Owner and Property Information

Owners Name: <sup>Dixie</sup> Bill ~~Wick~~ Lovinick Phone: 3-250-8676 Email: \_\_\_\_\_

Address: 25999 E 152<sup>nd</sup>

City: Brighton State: COLO Zip: 80602 County: ADAMS

Address of Property for which Use Permit is requested (if different from above):

City: \_\_\_\_\_ Colorado Zip: \_\_\_\_\_ County: \_\_\_\_\_

#### Section 1: Tanks

##### Tank 1

Tank Size (gallons): 1250

Does this match TCHD records?  Yes  No

Type:  Concrete  Polyethylene  Fiberglass  Other

Was tank pumped?  Yes  No

If yes: Date Pumped: 8-5-20 Pumped by: A-Z septic

Attach copy of pump receipt

Yes No

- Is the tank in good condition such that the tank functions are not compromised?
- Is the tank a two compartment tank?  
 Tees  Baffles (check one)
- If Tees or Baffles, are they in good condition?
- Is top of tank or riser to grade?
- Are the risers in good condition such that their function is not compromised?
- Is the lid (riser or manhole) in good condition?
- Does lid have a secure closing mechanism or sufficient weight to prevent unauthorized access?

(Tank 1 information continued on next page)

##### Tank 2

Check if Not Applicable (N/A)

Tank Size (gallons): \_\_\_\_\_

Does this match TCHD records?  Yes  No

Type:  Concrete  Polyethylene  Fiberglass  Other

Was tank pumped?  Yes  No

If yes: Date Pumped: \_\_\_\_\_ Pumped by: \_\_\_\_\_

Attach copy of pump receipt

Yes No

- Is the tank in good condition such that the tank functions are not compromised?
- Is the tank a two compartment tank?  
 Tees  Baffles (check one)
- If Tees or Baffles, are they in good condition?
- Is top of tank or riser to grade?
- Are the risers in good condition such that their function is not compromised?
- Is the lid (riser or manhole) in good condition?
- Does lid have a secure closing mechanism or sufficient weight to prevent unauthorized access?

(Tank 2 information continued on next page)

Property Address: 25999 E 52<sup>ND</sup>

**Tank 1** (continued)

- |                          |                                     |  |
|--------------------------|-------------------------------------|--|
| Yes                      | No                                  |  |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Was tank water level <b>above</b> the outlet invert? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Was tank water level <b>below</b> the outlet invert? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Does tank have an effluent filter(s)?                |
| <input type="checkbox"/> | <input type="checkbox"/>            | If YES, is the filter accessible for cleaning?       |
| <input type="checkbox"/> | <input type="checkbox"/>            | If YES, is the filter clean and in good condition?   |

**Tank 2** (continued)

- |                          |                          |  |
|--------------------------|--------------------------|--|
| Yes                      | No                       |  |
| <input type="checkbox"/> | <input type="checkbox"/> | Was tank water level <b>above</b> the outlet invert? |
| <input type="checkbox"/> | <input type="checkbox"/> | Was tank water level <b>below</b> the outlet invert? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does tank have an effluent filter(s)?                |
| <input type="checkbox"/> | <input type="checkbox"/> | If YES, is the filter accessible for cleaning?       |
| <input type="checkbox"/> | <input type="checkbox"/> | If YES, is the filter clean and in good condition?   |

Comments: *The outlet side of tank is starting to get some deterioration.*

◆◆◆ Are additional tanks installed?  Yes  No - If YES, complete another use permit inspection form for the additional tanks. ◆◆◆

Is system equipped with a Siphon, Pumps & Floats or Controls? Yes  No   
(If "Yes" complete Section 2)

**Section 2: Dosing Systems**

Dosing Unit:  Siphon  Pump

Note: N/A answers apply to a siphon only

- |                          |                          |                          |   |
|--------------------------|--------------------------|--------------------------|---|
| N/A                      | Yes                      | No                       |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Is siphon or pump operational?                                  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Are floats properly tethered and operational?                   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Is the junction box (J-Box) approved for use?                   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If Yes, are J-Box and wiring properly installed and functional? |

- |                          |                          |                          |   |
|--------------------------|--------------------------|--------------------------|---|
| N/A                      | Yes                      | No                       |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Is there an audio visual alarm?   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If alarm, is alarm operational?   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Is pump in a screened vault?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If Yes, is the vault in acceptable condition and screen clean?                      |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Is there a means to disconnect house power supply to junction box or control panel? |

Comments:

System Utilizes Uniform or Pressure Dosing, or is a Low Pressure Pipe or Drip Irrigation Yes  No   
(If "Yes" complete Section 2A)

**Section 2A: Pressure Dosed, Non-Pressurized Drip Dispersal System (NDDS) or Drip Irrigation Systems**

- |                          |                          |                          |   |
|--------------------------|--------------------------|--------------------------|---|
| N/A                      | Yes                      | No                       |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Are the distribution valves in a box or vault?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If Yes, is the box or vault in acceptable condition?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Are the distribution valves operational?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If Pressure dosed, NDDS, or Drip Irrigation, are risers at ends of zones in good condition? |

- |                          |                          |   |
|--------------------------|--------------------------|---|
| Yes                      | No                       |   |
| <input type="checkbox"/> | <input type="checkbox"/> | Is there an automatic distribution valve (ADV)?             |
| <input type="checkbox"/> | <input type="checkbox"/> | If Yes, is the ADV working properly?                        |
| <input type="checkbox"/> | <input type="checkbox"/> | Is the system equipped with flushing valves?                |
| <input type="checkbox"/> | <input type="checkbox"/> | If Yes, are the flushing valves accessible and operational? |

Comments:

Property Address: 25999 E 152<sup>ND</sup>

Is System Equipped with a Secondary Treatment Unit?

Yes

No

(If "Yes" complete Section 3)

### Section 3: Secondary Treatment

Type of Unit:

- ATU  
  RSF  
  ISF  
  Textile Fiber  
  Peat Filter  
  Other

If other, indicate type: \_\_\_\_\_

Yes No

- Is secondary treatment unit operating properly?

Yes No

- Is there a current operation and maintenance (O&M) contract?

If Yes, when was system last inspected?

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Comments:

### Section 4: Absorption Area (Required for all Systems)

Yes No

- Is absorption area covered with snow?  
  Are there odors?  
  Are there wet areas on ground surface?  
  Is irrigated landscaping planted over absorption area?  
  Is surface drainage adequate to protect absorption area?  
  Is vegetative cover adequate to protect absorption area from excessive erosion?  
  Is vegetative cover excessive?

Yes No

- Are driveways, horse corrals, patios, or pools constructed over the septic tank or absorption area?  
  Are there observation pipes in the absorption area?  
 If Yes, how many? 2  
  If observation pipes, is there standing effluent in observation pipes? NOT SURE  
  Is system equipped with a distribution box?  
  If there is a distribution box, is it to grade?  
  If distribution box is accessible, is it in good condition and are the outlets level?

Comments:

*The Insp. Pipes that were found are broken & full of dirt. Couldn't see if they had an effluent in them. Walked around leechfield & found no moisture.*

### Section 5: Building Sewer (Required for all Systems)

Yes No

- Is there a cleanout(s) on the building sewer from house to septic tank?  
 If Yes, state location of cleanouts or show on system diagram N.S. OF HOUSE  
  Is there any evidence of damage, plugging or settlement of the building sewer from house to first septic tank?  
  Is there any evidence of damage, plugging or settlement of the building sewer from the septic tank to the absorption area?

Yes No

- If system is equipped with a pump, is there any evidence of damage, plugging or settlement of the pump line (force main) from the septic tank to the absorption area?  
 If Yes, explain what was noted:  
  If system has more than one tank, is there any evidence of damage, plugging or settlement of the building sewer between the tanks?

Comments:

Property Address: 25999 E 152<sup>ND</sup>

**Section 6: General Questions and Inspector Comments (Required for All Systems)**

Is the property  Vacant  Occupied      If vacant, how long? \_\_\_\_\_

Yes   No

Is property served by a well?

Is there a system diagram (as-built diagram)?

If Yes, is diagram accurate?

If No diagram exists or if the diagram is inaccurate, please provide a system diagram on TCHD Form S-103.

Is the public sewer within 400 feet of the property?

Does the entire system meet all required set-backs in Table 5 of TCHD Regulation O-14 On-site Wastewater Treatment Systems (OWTS)?

(If No, provide detailed information in Comments and indicate on diagram)

Comments:

Yes   No

In my opinion, at the time of the inspection, the OWTS has deficiencies that require repairs.

**IMPORTANT NOTE:**

All non-permitted repairs must be documented on TCHD Form S-406

Yes   No

In my opinion, at the time of the inspection, the OWTS is functioning adequately.

David Hoyle  
Inspector Signature

8-5-20  
Date

DEC/02/2013/MON 08:44 AM

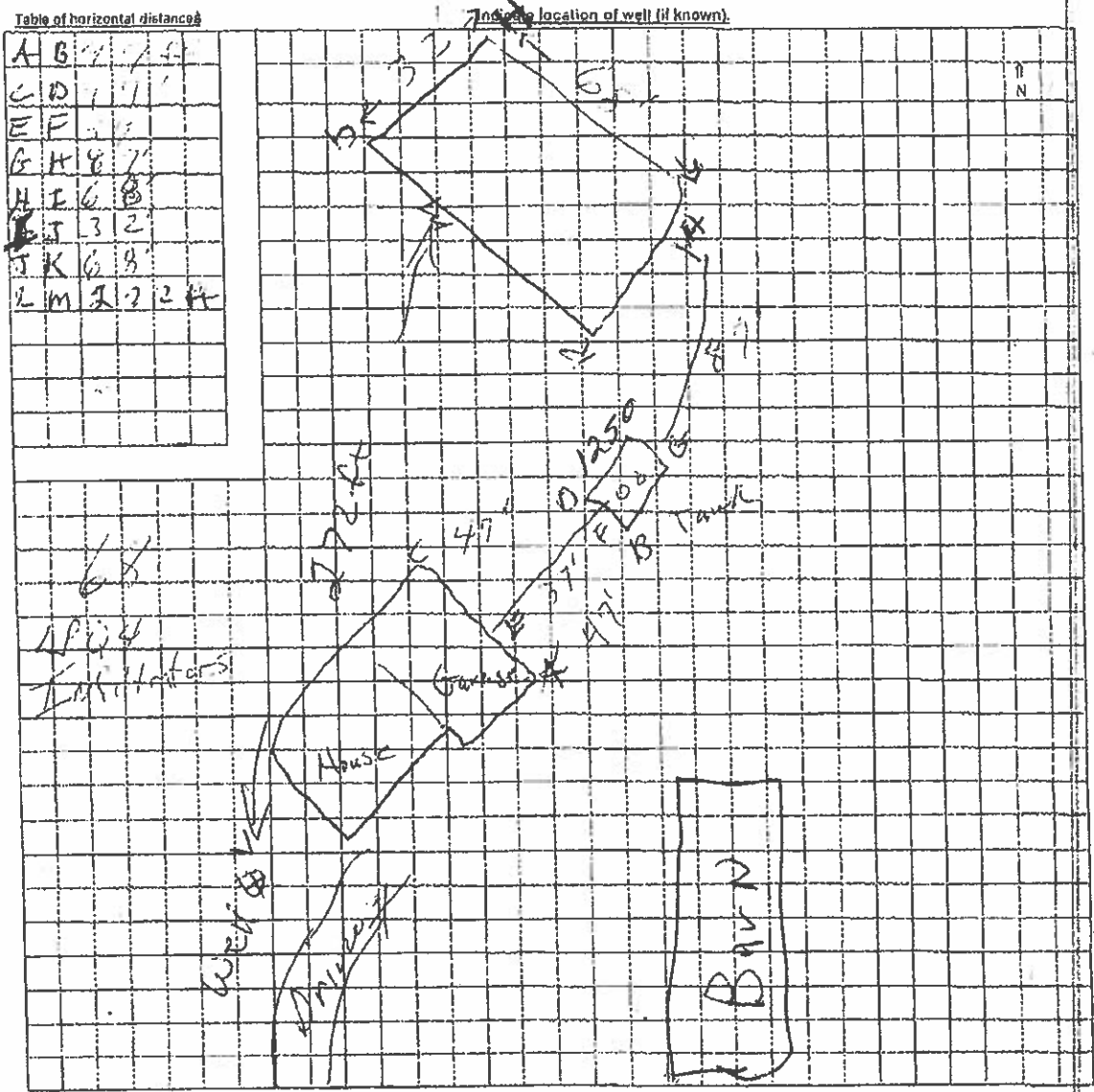
FAX No.

P. 001/001



Onsite System As-Built Drawing

Property Address 25999 E 152nd Ave  
 Permit # 14-00000000  
 System Completion Date 12/10/2013  
 Installer Name Mike Bullin  
 Installer License # 60008042  
 Installer Address P.O. Box 454 Ft. Lupton  
 Installer Phone 303-349-6380



TCHO S-103 Rev. '09

# A-1 SEPTIC SERVICE, INC.

P.O. BOX 1015  
 BRIGHTON, CO 80601-1015  
 (303) 659-0610

CUSTOMER'S ORDER NO.		PHONE		DATE		
		3-250-5676		7-5-20		
NAME						
Billie <del>Smith</del> Dixie Lowmber						
ADDRESS						
25999 E 152 <sup>ND</sup> Brighton						
SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MDSE. RET'D.	PAID OUT
QTY.	DESCRIPTION		PRICE	AMOUNT		
1250 Gal.	PUMPED SEPTIC TANK			310	00	
	INSP Fee			200	00	
	Thanks Dore					
	177 CT 1045					
RECEIVED BY			TAX			
			TOTAL	510	00	

23786

All claims and returned goods  
 MUST be accompanied by this bill.

**Thank You!**

PRODUCT 2531



## **Can-America Drilling, Inc.**

708 Cheyenne ~ PO Box 416

Simla, CO 80835

(719) 541-2967 ~ Fax (719) 541-9545

canamericadrilling.com

RECEIVED

OCT 25 2013

WATER RESOURCE  
STATE ENGINEER  
COLO.

### **GEOLOGIC LOG**

Well Permit Number: 292162

Name: Dixie L Lovingier

Address: 6212 Klimer Loop Unit 201

City, State, Zip Code: Golden, CO 80403

Legal Description: SW ¼ SE ¼ 8 - 1S - 65W

Distance from Section Lines: 400 from  N  S  
2100 from  E  W

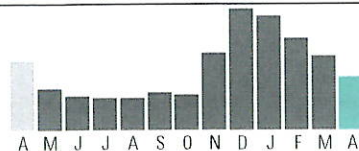
Easting: 526986 Northing: 4424916

0	6	Tan, fine/pea, sand & gravel
6	15	Tan clay & shale mix
15	140	Blue shale
140	150	Blue sandstone
150	190	Blue shale
190	320	Blue sandstone & shale mix



SERVICE ADDRESS	ACCOUNT NUMBER	DUE DATE	
DANIEL LIRA 25999 E 152ND AVE BRIGHTON, CO 80603	53-3128464-3	05/16/2024	
	STATEMENT NUMBER	STATEMENT DATE	AMOUNT DUE
	875033639	04/26/2024	\$69.89

**YOUR MONTHLY NATURAL GAS USAGE**



DAILY AVERAGES	Last Year	This Year
Temperature	46° F	50° F
Gas Therms	3.4	2.4
Gas Cost	\$3.21	\$2.33

**QUESTIONS ABOUT YOUR BILL?**

See our website: [xcelenergy.com](http://xcelenergy.com)  
 Call Mon - Fri 7 a.m.-7 p.m. or Sat 9 a.m.-5 p.m.  
 Please Call: 1-800-895-4999  
 Español: 1-800-687-8778  
 Or write us at: XCEL ENERGY  
 PO BOX 8  
 EAU CLAIRE WI 54702-0008



**SUMMARY OF CURRENT CHARGES** (detailed charges begin on page 2)

Natural Gas Service	03/27/24 - 04/26/24	73 therms	\$69.89
<b>Current Charges</b>			<b>\$69.89</b>

**ACCOUNT BALANCE** (Balance de su cuenta)

Previous Balance	As of 03/27	\$218.79
Payment Received	Check 04/08	-\$218.79 <b>CR</b>
Balance Forward		<b>\$0.00</b>
Current Charges		\$69.89
<b>Amount Due</b> (Cantidad a pagar)		<b>\$69.89</b>

**INFORMATION ABOUT YOUR BILL**

Thank you for your payment.







February 17, 2022

TO: Property Owner or Current Resident

RE: Melissa #1 Plug and Abandon notice

To Whom It May Concern,

You are being provided this notice pursuant to Adams County Development Standards and Regulations 4-11-02-03-03-03, 13.c. Plug and Abandonment as a resident within ½ mile. Verdad Resources LLC ("Operator") is planning to move onto the well listed below to Plug and Abandon per COGCC Regulations.

Location: Melissa #1, API 05-001-07623-00  
SESW SEC 8 1S65W 6<sup>th</sup> PM  
Nearest Cross Streets: 152nd Ave & Harvest Mill Rd  
Lat/Long 39.975206/-104.690754

This operation is planned to begin between March 1 - 5, 2022, and last 7-14 days. This operation will be performed during daylight hours and require a workover rig and additional equipment.

Access to the location will be from Hwy-76 turn on 152<sup>nd</sup> Ave heading east approximately 3 miles, passing Harvest Mill Rd and turn North onto the access to the location.

You may contact the following individuals with Verdad concerning the proposed operations:

Jeff Berghorn - Landman  
720-845-6912  
[jberghorn@verdadresources.com](mailto:jberghorn@verdadresources.com)

Heather Mitchell – Regulatory Manager  
720-845-6917  
[hmittchell@verdadresources.com](mailto:hmittchell@verdadresources.com)

The Oil and Gas Liaison contact information is:

Greg Dean  
720-523-6891  
[gdean@adcogov.org](mailto:gdean@adcogov.org)

Best Regards,  
Verdad Resources LLC

*Heather Mitchell*

Heather Mitchell  
Regulatory Manager

## Legal Description

**25999 East 152<sup>nd</sup> Avenue, Brighton, CO 80603**

SECT,TWN,RNG:8-1-65 DESC: PT OF THE SE4 OF SEC B DESC AS FOLS BEG AT THE SE COR OF SD SEC 8 TH N 00D 14M 46S E 1427 FT TH N 89D 17M 36S W 1335/39 FT TO THE TRUE POB TH CONT N 89D 17M 36S W 1288/91 FT TH S 00D 17M 00S E 1427/17 FT TH S 89D 17M 36S E 1288/91 FT TH N 00D 17M 00S W 1427/17 FT TO THE POB 42/223A



# ADAMS COUNTY COLORADO

## TREASURER'S OFFICE RECEIPT OF PAYMENT

Account	Parcel Number	Receipt Date	Effective Date	Receipt Number
R0127294	0156708400003	Feb 23, 2024	Feb 22, 2024	2024-02-22-99-0866

LIRA DANIEL AND  
 25999 E 152ND AVE  
 BRIGHTON, CO 80603-8805

Situs Address	Payor
25999 E 152ND AVE	DOVENMUEHLE MORTGAGE INC. 95 METHODIST HILL DRIVE ROCHESTER NY 14623

**Legal Description**  
 SECT,TWN,RNG:8-1-65 DESC: PT OF THE SE4 OF SEC B DESC AS FOLS BEG AT THE SE COR OF SD SEC 8 TH N 00D 14M 46S E 1427 FT TH N 89D 17M 36S W 1335/39 FT TO THE TRUE POB TH CONT N 89D 17M 36S W 1288/91 FT TH S 00D 17M 00S E 1427/17 FT TH S 89D 17M 36S E 1288/91 FT TH N 00D 17M 00S W 1427/17 FT TO THE POB 42/223A

Property Code	Actual	Assessed	Year	Area	Mill Levy
AG DRY GRAZING LAND - 4147	1,897	500	2023	290	104.522
FARM/RANCH RESID - 4277	486,442	28,910	2023	290	104.522
FARM/RANCH BLDG - 4279	38,936	10,280	2023	290	104.522

Payments Received	
Direct Deposit Bank Account 1	Multi-Account Payment

Payments Applied					
Year	Charges	Billed	Prior Payments	New Payments	Balance
2023	Tax Charge	\$4,148.48	\$0.00	\$2,074.24	\$2,074.24
				\$2,074.24	\$2,074.24
<b>Balance Due as of Feb 22, 2024</b>					<b>\$2,074.24</b>

ALL CHECKS ARE SUBJECT TO FINAL COLLECTION. THANK YOU FOR YOUR PAYMENT!

EMAIL: [treasurer@adcogov.org](mailto:treasurer@adcogov.org) | PHONE: 720.523.6160 | WEBSITE: [www.adcotax.com](http://www.adcotax.com)



# RECEIPT OF PAYMENT (Tax, Fees, Costs, Interests, Penalties)

Account	Parcel Number	Receipt Date	Effective Date	Receipt Number
R0127294	0156708400003	Jun 5, 2023	Jun 2, 2023	2023-06-05-99-4877

LIRA DANIEL AND  
 25999 E 152ND AVE  
 BRIGHTON, CO 80603-8805

Situs Address	Payor
25999 E 152ND AVE	DOVENMUEHLE MORTGAGE INC. (CORELOGIC-WIRE-2023-0602-\$139,750.221.55) 95 METHODIST HILL DRIVE ROCHESTER NY 14623

**Legal Description**  
 SECT,TWN,RNG:8-1-65 DESC: PT OF THE SE4 OF SEC B DESC AS FOLS BEG AT THE SE COR OF SD SEC 8 TH N 00D 14M 46S E 1427 FT TH N 89D 17M 36S W 1335/39 FT TO THE TRUE POB TH CONT N 89D 17M 36S W 1288/91 FT TH S 00D 17M 00S E 1427/17 FT TH S 89D 17M 36S E 1288/91 FT TH N 00D 17M 00S W 1427/17 FT TO THE POB 42/223A

Property Code	Actual	Assessed	Year	Area	Mill Levy
1276 - 1276	486,442	33,810	2022	290	103.192
AG DRY GRAZING LAND - 4147	1,843	490	2022	290	103.192
FARM/RANCH BLDG - 4279	38,936	10,280	2022	290	103.192

Payments Received	
Direct Deposit	Multi-Account Payment
Bank Account 1	

Payments Applied					
Year	Charges	Billed	Prior Payments	New Payments	Balance
2022	Tax Charge	\$4,600.30	\$2,300.15	\$2,300.15	\$0.00
				\$2,300.15	\$0.00
				<b>Balance Due as of Jun 2, 2023</b>	<b>\$0.00</b>

4430 S ADAMS COUNTY PKWY C2436  
 BRIGHTON CO 80601  
 [Stay Safe! Please use website payment services [www.adcotax.com](http://www.adcotax.com)]

Email: [treasurer@adcogov.org](mailto:treasurer@adcogov.org)  
 Telephone: 720-523-6160

ALL CHECKS ARE SUBJECT TO FINAL COLLECTION. THANK YOU FOR YOUR PAYMENT!



# COLORADO

## RECEIPT OF PAYMENT (Tax, Fees, Costs, Interests, Penalties)

Account	Parcel Number	Receipt Date	Effective Date	Receipt Number
R0127294	0156708400003	Feb 23, 2023	Feb 14, 2023	2023-02-23-99-2073

LIRA DANIEL AND  
25999 E 152ND AVE  
BRIGHTON, CO 80603-8805

Situs Address	Payor
25999 E 152ND AVE	DOVENMUEHLE MORTGAGE INC.

**Legal Description**  
SECT,TWN,RNG:8-1-65 DESC: PT OF THE SE4 OF SEC B DESC AS FOLS BEG AT THE SE COR OF SD SEC 8 TH N 00D 14M 46S E 1427 FT TH N 89D 17M 36S W 1335/39 FT TO THE TRUE POB TH CONT N 89D 17M 36S W 1288/91 FT TH S 00D 17M 00S E 1427/17 FT TH S 89D 17M 36S E 1288/91 FT TH N 00D 17M 00S W 1427/17 FT TO THE POB 42/223A

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FARM/RANCH BLDG - 4279	38,936	10,280	2022	290	103.192

Payments Received	
Direct Deposit Bank Account 1	Multi-Account Payment

Payments Applied					
Year	Charges	Billed	Prior Payments	New Payments	Balance
2022	Tax Charge	\$4,600.30	\$0.00	\$2,300.15	\$2,300.15
				\$2,300.15	\$2,300.15
<b>Balance Due as of Feb 14, 2023</b>					<b>\$2,300.15</b>

4430 S ADAMS COUNTY PKWY C2436  
BRIGHTON CO 80601  
[Stay Safe! Please use website payment services [www.adcotax.com](http://www.adcotax.com)]

Email: [treasurer@adcogov.org](mailto:treasurer@adcogov.org)  
Telephone: 720-523-6160

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