



**AGREEMENT TO FOREGO EXPANSION OF AN
ON-SITE WASTEWATER TREATMENT SYSTEM**

Date: _____

ACHD:

Adams County Health Department (ACHD)
4430 S. Adams County Pkwy.
Brighton, CO 80601
EHWaterProgram@adcogov.org

PURCHASER:

Name: _____

Address: _____

Phone: _____
Email: _____

Current Owner: _____

Property Legal Address: _____

Property Street Address: _____

Use Permit Inspector: _____

Use Permit Inspection Date: _____

Closing Date: _____

Each of the foregoing definitions shall be deemed a substantive part of this Agreement.

AGREEMENT

This Agreement to Forego Expansion of an On-site Wastewater Treatment System (“Agreement”) is made effective as of the date set forth above by and between ACHD and Purchaser.

WHEREAS, Purchaser has entered into a contract to purchase the Property from the Current Owner, which is scheduled to close on the Closing Date; and



WHEREAS, as part of Purchaser’s due diligence, and pursuant to the requirements of Section 4 of ACHD’s On-site Wastewater Treatment System (OWTS) Regulation Number O-22 (“Regulation O-22”), the OWTS that serves the Property was inspected by the Use Permit Inspector on the Inspection Date, and a copy of the Inspection Report issued by the Use Permit Inspector is attached hereto, and incorporate herein by reference; and

WHEREAS, as a condition to selling the property, the Current Owner is required to obtain a Use Permit for the Property under the provisions of Section 4 of Regulation O-22; and

WHEREAS, the OWTS is functioning adequately and any deficiencies noted in the Use Permit Inspection have been satisfactorily repaired; and

WHEREAS, ACHD’s records indicate that the OWTS serving the residence on the property is undersized for the current number of bedrooms in the residence.

WHEREAS, ACHD’s Regulation O-22 requires that the OWTS be sized for the number of bedrooms in the residence; and

WHEREAS, the Purchaser desires to purchase the Property on the Closing Date, without expanding the OWTS; and

NOW THEREFORE, in consideration of the foregoing premises and the covenants and agreements hereinafter set forth, ACHD and the Purchaser acknowledges the following:

1. Purchaser acknowledges that the OWTS is undersized for the current number of bedrooms.
2. Purchaser acknowledges that, because the OWTS is undersized, it may lead to premature system failure and require repair sooner than a properly sized OWTS, and as such, Purchaser accepts full and complete responsibility thereof.
3. If at any time the Department determines that the OWTS is not functioning in compliance with the OWTS regulation, the property owner will be required to obtain a repair permit and complete any necessary repairs at Purchaser’s sole cost and expense.
4. ACHD agrees to issue a Use Permit for the sale of the Property.
5. The terms and conditions of this Agreement shall be null and void in the event that the Purchaser does not complete the purchase of the Property.



ADAMS COUNTY
HEALTH DEPARTMENT
Your Health. Our Mission.

Signed and dated the day and year first above written.

PURCHASER:

Print

Signature

Print

Signature

STATE OF COLORADO)
) ss.
County of _____)

Subscribed, sworn to and acknowledged before me this _____ day of _____, 20__ by _____ as Purchasers.

Witness my hand and official seal.

My commission expires: _____

Notary Public

ADAMS COUNTY HEALTH DEPARTMENT

Print

Signature

Date