

Texas Commission on Environmental Quality
 APPLICATION FOR ON-SITE SEWAGE FACILITY
 NEW CONSTRUCTION

CORYELL COUNTY USE ONLY	
_____	PERMIT NO.
_____	DATE RECEIVED
_____	AMOUNT

 TCEQ REGION NUMBER

 COUNTY OF INSTALLATION

- PROPERTY OWNER'S NAME: _____
 (Last) (First) (Middle)
- CURRENT MAILING ADDRESS: _____
- HOME PHONE NO.: () _____ OTHER or FAX NO.: () _____
- 911 SITE ADDRESS: _____
- PROPERTY LEGAL DESCRIPTION: _____
 Acreage: _____ Plat Date: _____ Subdivision name (if applicable): _____
PLEASE ATTACH VERIFICATION OF LEGAL DESCRIPTION SUCH AS A COPY OF: DEED, PLAT MAP, SURVEY, OR OTHER DOCUMENTATION CONTAINING LEGAL DESCRIPTION
- DIRECTIONS TO SITE: _____

- SOURCE OF WATER: Private Well Public Water Supply _____
 (Name of Supplier)
- SINGLE FAMILY RESIDENCE: No. of Bedrooms: _____ Living Area (ft²): _____
- COMMERCIAL/INSTITUTIONAL (other than single-family residence) TYPE: _____
 BUSINESS / INSTITUTION NAME: _____
 RESPONSIBLE OFFICIAL: _____ NO. OF EMPLOYEES/UNITS: _____
- SITE EVALUATOR: _____ LICENSE NO. _____
 PHONE NO.: () _____ OTHER or FAX NO.: () _____
 MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
- INSTALLER: _____ LICENSE NO.: _____
 PHONE NO.: () _____ OTHER or FAX NO.: () _____
 MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given to the Texas Commission on Environmental Quality to enter upon the above described property for the purpose of soil/site evaluation and investigation of an on-site sewage facility.

SIGNATURE OF OWNER: _____ DATE: _____

This application may be executed in separate and multiple counterparts, which together shall constitute a single instrument. Any executed signature on this agreement may be transmitted by digital or electronic transmission, including but not limited to facsimile transmission and electronic mail. Any signature affixed to this application shall constitute an original signature for all purposes.

Texas Commission on Environmental Quality

PERMIT NO. _____

ON-SITE SEWAGE FACILITY
TECHNICAL INFORMATION FOR PERMIT

PROFESSIONAL DESIGN REQUIRED?: Yes No If yes, professional design attached: Yes No

Designer Name: _____ License Type and No. _____

Phone No. (____) _____ Other or Fax No. (____) _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

I. TYPE AND SIZE OF PIPING FROM: (EXAMPLE: 4" SCH 40 PVC)

Stub out to treatment tank: _____

Treatment tank to disposal system: _____

II. DAILY WASTEWATER USAGE RATE: Q= _____ (gallons/day)

Water Saving Devices: Yes No

III. TREATMENT UNIT(S): Septic Tank Aerobic Unit

A. • Tank Dimensions: _____ • Liquid Depth (bottom of tank to outlet): _____

• Size Proposed: _____ (gal) • Manufacturer: _____

• Material/Model #: _____

• Pretreatment Tank: Yes SIZE: _____ (gal) No NA

• Pump/Lift Tank: Yes SIZE: _____ (gal) No NA

B. OTHER Yes No If yes, please attach description.

IV. DISPOSAL SYSTEM:

Disposal Type: _____

Manufacturer and Model: _____

Area Proposed: _____ square feet

V. ADDITIONAL INFORMATION:

NOTE - THIS INFORMATION MUST BE ATTACHED FOR REVIEW TO BE COMPLETED.

A. Soil/Site evaluation B. Planning materials (If Applicable)

**DO NOT BEGIN CONSTRUCTION PRIOR TO OBTAINING AUTHORIZATION TO CONSTRUCT.
UNAUTHORIZED CONSTRUCTION CAN RESULT IN CIVIL AND/OR ADMINISTRATIVE
PENALTIES.**

SIGNATURE OF INSTALLER OR DESIGNER: _____ DATE: _____

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SITE EVALUATION AND PLANNING MATERIALS FOR AN ON-SITE SEWAGE FACILITY

The following information must be submitted with the design package for review by the TCEQ.
 Failure to include or address all of the following items may result in approval delays.

PERMIT NO. _____

Applicant/Site Information		Site Evaluator Information	
Name		Name	
Address		Address	
City, State, Zip		City, State, Zip	
Phone No.		Phone No.	
County		License No.	

Additional information:

SITE EVALUATION: A minimum of two soil borings or backhoe pits must be excavated at opposite ends of the proposed disposal area. The borings or pits must be excavated to a depth of two feet below the proposed excavation, or to a restrictive horizon, whichever is less. The boring or pit locations must be indicated. This report shall include a groundwater evaluation, a surface drainage analysis, and all applicable minimum separation requirements.

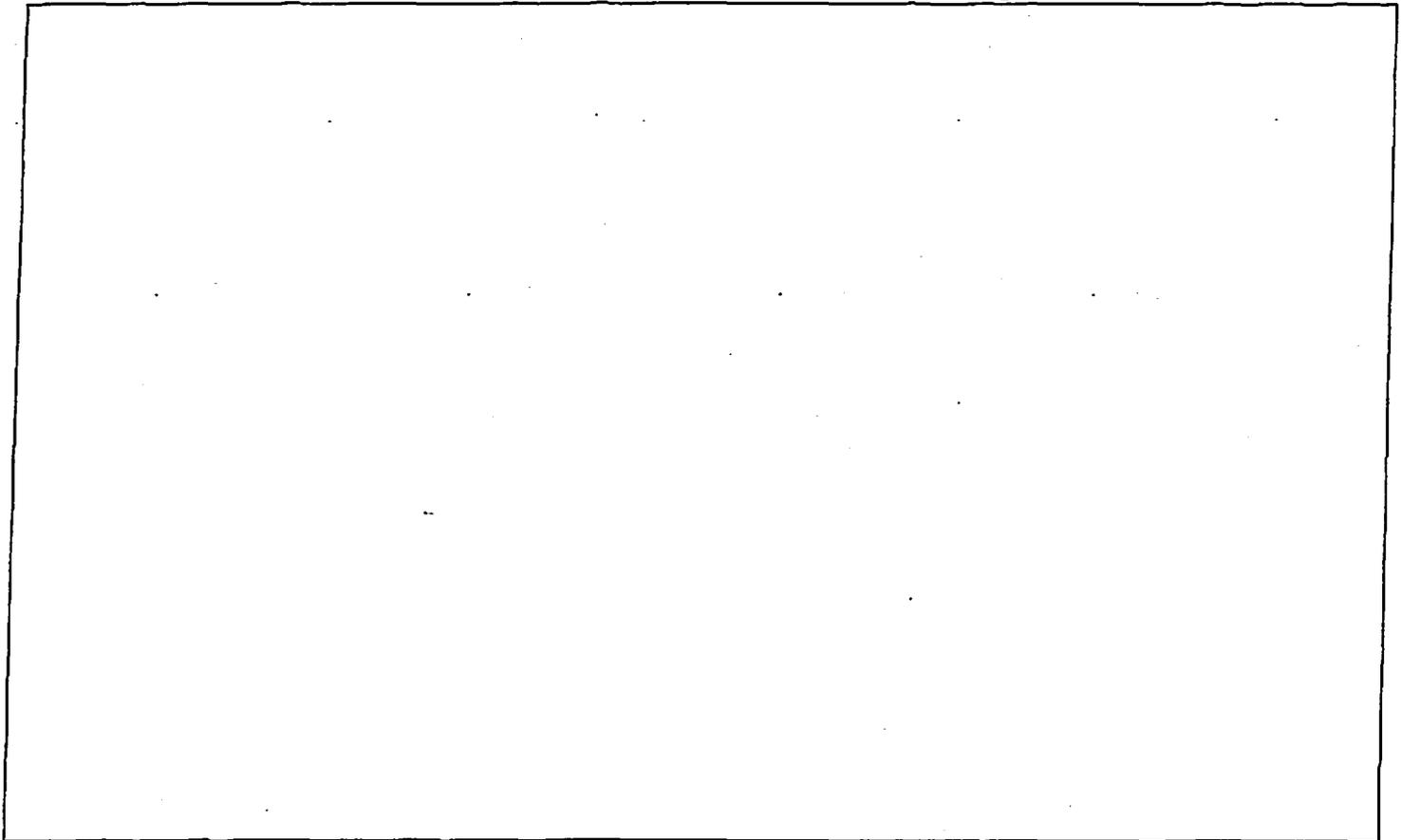
PLANNING MATERIALS: The proposed treatment and disposal system shall be prepared based on the site evaluation. The submittal requirements must include the following details.

- A scale drawing of the on-site sewage facility, showing all structures served.
- Submittals prepared by a professional engineer or professional sanitarian must be sealed, dated, and signed.
- Proposed designs must comply with all separation distances identified in Table X.
- A sectional view of the tanks, including pump tanks, and excavations must be submitted.

Soil Boring/Backhoe Pit Number _____						
Depth (Feet)	Soil Class	Gravel Analysis	Restrictive Horizon	Groundwater	Topography	Flood Hazard
0						
1						
2						
3						
4						
5						
6						
7						

		Soil Boring/Backhoe Pit Number _____				
Depth (Feet)	Soil Class	Gravel Analysis	Restrictive Horizon	Groundwater	Topography	Flood Hazard
0						
1						
2						
3						
4						
5						
6						
7						

Schematic of Lot or Tract / Site Drawing



Scale: 1 inch = 50 feet/or appropriate

I certify that the results of this report are based on my site observations and are accurate to the best of my ability.

Signature: _____
(Site Evaluator)

Date: _____

AFFIDAVIT TO THE PUBLIC

PERMIT # _____

COUNTY OF CORYELL
STATE OF TEXAS

OWNER'S PRINTED NAME: _____

Before me, the undersigned authority, on this day personally appeared _____, who, after being by me duly sworn, upon oath states that he/she is the representative of, or owner of record of that certain tract of parcel of land lying and being situated in Coryell County, Texas, and being more particularly described as follows:

Survey Name _____ Abs. # _____ Vol. # _____ Pg # _____ Acres _____

and/or

Name of Subdivision: _____ Block _____ Lot/Tract _____ Section/Phase _____

9-1-1 Address: _____ City & Zip _____

EVAPOTRANSPIRATIVE (Gallons per day) _____

The undersigned further states that he/she, upon any sale or transfer of the above-described property, informs any buyer or transferee that an evapotranspirative drainfield is utilized on the property. State law requires this due to the systems wastewater disposal limits.

AEROBIC SYSTEM (Gallons per day) _____

The undersigned further states that he/she will, upon any sale or transfer of the above-described property, request a transfer of the permit to operate such system to the buyer or transferee. Any buyer or transferee is hereby notified that a maintenance contract with an approved maintenance company will be required for use of the system.

Failure to abide by the above stated conditions constitutes a violation of the Texas Commission on Environmental Quality Rules and of the Coryell County Order for the On-Site Sewage Facilities which will result in the filing of a complaint with the Justice of the Peace Court having jurisdiction in the area where the offense occurs.

WITNESS MY/OUR HAND(S) on this _____ day of _____, 20____.

Representative or Property Owner Signature or Licensed Installer

SWORN TO AND SUBSCRIBED BEFORE ME on this _____ day of _____, 20____.

by _____ for _____
(Representative) (Property Owner)

seal
⇒

Notary Public, State of Texas

Leave space below this line BLANK for County Clerk's seal