

# Robertson County

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## APPLICATION FOR ON-SITE SEWAGE FACILITY NEW CONSTRUCTION TCEQ REGION #9

NAME OF APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_ CITY & ZIP: \_\_\_\_\_  
911 ADDRESS (IF DIFFERENT): \_\_\_\_\_  
LEGAL DESCRIPTION: SEC \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_ DATE \_\_\_\_\_  
COPY OF SURVEY ATTACHED-( ) YES ( ) NO SUBDIVISION: \_\_\_\_\_  
OTHER THAN SUBDIVISION: ACREAGE \_\_\_\_\_ SURVEY \_\_\_\_\_  
TYPE OF RESIDENCE: ( ) STRUCTURE ( ) MANUFACTURED HOME  
SOURCE OF WATER: ( ) PRIVATE WELL ( ) PUBLIC WATER SUPPLY \_\_\_\_\_  
SINGLE FAMILY RESIDENCE: # OF BEDROOMS \_\_\_\_\_ BATHS \_\_\_\_\_ SQ.FT. \_\_\_\_\_  
ESTIMATED USAGE - GALLONS OF WATER PER DAY \_\_\_\_\_  
COMMERCIAL/INSTITUTIONAL (INCLUDING MULTI-FAMILY RESIDENCES) TYPE: \_\_\_\_\_  
#OF EMPLOYEES/OCCUPANTS/UNITS: \_\_\_\_\_ DAYS OCCUPIED PER WEEK: \_\_\_\_\_  
SITE EVALUATOR: \_\_\_\_\_ CERTIFICATION#: \_\_\_\_\_  
DESIGNER: \_\_\_\_\_ LICENSE# (PE OR RS): \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_  
INSTALLER: \_\_\_\_\_ REGISTRATION #: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby give to the TEXAS COMMISSION on ENVIRONMENTAL QUALITY DESIGNATED REPRESENTATIVE (DR) to enter upon the above described property for the purpose of lot evaluation and inspection of the on-site sewage facility and that a permit to operate the facility will be granted following successful inspection of the installed system which indicates that the system was installed in compliance with the commission's On-Site Facility Rules, TAC30, Chapter 285.

\_\_\_\_\_  
(Signature of HOME OWNER ONLY)

\_\_\_\_\_  
(Date)

PERMIT RECEIPT NUMBER \_\_\_\_\_

# AFFIDAVIT TO THE PUBLIC

THE COUNTY OF ROBERTSON

STATE OF TEXAS

## CERTIFICATION OF ON-SITE SEWAGE FACILITY (OSSF) MAINTENANCE

According to the Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities, this document is filed in the Deed Records of ROBERTSON County, Texas

I.

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (TCEQ) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), 5.012 and 5.013, gives the TCEQ primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The TCEQ, under the authority of the TWC and the Texas Health and Safety Code, requires owner's to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the TCEQ requires a deed recording. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This deed certification is not a representation or warranty by the TCEQ of the suitability of this OSSF, nor does it constitute any guarantee by the TCEQ that the appropriate OSSF was installed.

II.

An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code 285.91(12) will be installed on the property described as:

Address at site: \_\_\_\_\_

Legal Description: \_\_\_\_\_

The property is owned by: \_\_\_\_\_

**This OSSF must be covered by a continuous maintenance contract. The undersigned further understands that the owner of the surface application system shall continuously maintain a signed written contract, for service and repairs, with a valid maintenance company. An approved maintenance company must perform all maintenance on this OSSF, and a signed maintenance contract must be submitted to the ROBERTSON COUNTY AUTHORIZED AGENT within 30 days after the property has been transferred.**

The owner will, upon any sale or transfer of the above-described property, request a transfer of the permit for the OSSF to the buyer or new owner. A copy of the planning material for the OSSF can be obtained from the Robertson County Health Department.

WITNESS BY HAND (S) ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_

Signature of Owner (s) \_\_\_\_\_

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_

By: \_\_\_\_\_

(Name of homeowner(s))

Notary Public, State of Texas

Printed Name: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_