On Site Sewage Facility Information Sheet BASTROP

PROPERTY OWNER INFORMATION

Date:		
Name:		
Site Address:	_City:	Zip:
Current Mail Add.:	_ City:	Zip:
Email Address:		
Home Ph#: Work Ph#:		Cell Ph#:
Referred By:	_	
Address:	_City:	Zip:
BILLING INFO Name:	RMATIC	DN
Name:		
Mailing Address:	City:	Zip:
Email Address:		
Phone Number:		
Payment Option: Personal Check: Credit Card (add 4% to bid price):		
Purchase Order #:		
Notes:		

Customer instructions for completing septic system paperwork.

- 1 County application. Fill out owner information
- 2 Norweco Contract Customer Signature and Date required
- 3 Affidavit Sign and print name of property owner.

NOTE: A copy of your property survey needs to be returned with papers (preferably a plot plan).

4 – Installation Contract – Read notes, sign and date.

NOTE: Duplicate copy is for your records

Please return all originals along with property survey to our office. The brochure is for your records.

If you have any questions or require additional information please feel free to call us anytime at 1-800-841-3447.

CUSTOMER CHECKLIST:

 Survey of Property or Plot Plan Tax Receipt or Deed for legal description and proof of ownership Well Log (if requested) Correct 911 Address (Required for Floodplain) Floodplain Signoff
Below for office use only.
Before the application is submitted to the D.R. the following is needed.
1. Survey of property.
2. Legal description is to be filled out on all paperwork.
3. Affidavit to the public filed in the county clerk's office
4. Well log.
5. Maintenance contract.
6. Check for permit.
7. Site Evaluation.
8. Engineered design
9. Proposal Sheet
10. Flood Plain Signoff

	t, Bastrop, Texas 78602 • 5						OFFICIAL USE ONLY File #:
				Rec'd:			
	N TYPE –Select all that app						
	nent/Construction	·	ay/Right-of-Way	<u> </u>	On-Site Sev	wage Facility	9-1-1 Address
Proof of O Site Plan Copy of Su	OCUMENTS -Application ownership urvey or Plat uired Permits		ems shown below. A Site Sewage Facility I Septic Plan/Specion Site Evaluation Ro	<u>Must Inclu</u> fications	olete/illegible app ude:	lication will delay p Aerobic OSS Affida	process and may be returned. F Only Must Include: vit for Maintenance enance Contract
PROPERTY O	WNER INFORMATIO	N –Enter prope	rtv owner informati	ion only; o	do not enter build	er or agent informa	ntion
	vn on Deed:					er or agent mjor	idon.
						Apt/U	Jnit/Ste #:
City:							
	ne #:						
	ESCRIPTION –Refer to B						
	umber(s): R						y 01 Cuii 312-303-1330,
Legal Descript							
Does this prop	erty comply with local su	bdivision pla	t requirements or	meet a	n exception to t	he plat requirem	ents? OYes ONo
	D SPECIES ACT -Refer t						
	located in the Lost Pines)? OYes ONo
	agree to participate in the						
FLOODPLAIN	/FLOODWAY -Refer to I	EMA flood map	at www.msc.fema.	.gov or su	ıbmit Flood Deteri	mination request to	o vickie.box@co.bastrop.tx.us.
Is any part of t	the property within the Fe	deral Emerge	ncy Management	t Agenc	y (FEMA) 100-	-year floodplain	? OYes ONo
	NT INFORMATION -Pt						
List each exist	ing building and indicate	if it will be de	emolished/remov	ed and	date:		
Enter the number	ber of <u>new/proposed</u> struc	tures:	Provide the	followi	ng information	for each new/pr	oposed structure:
Classification:	Single Family Resid	dential select	Main (Guest	/Secondary	ODuplex	OAccessory Building
	Non Single-Family	Residential [5]	elect → Multi-Fa	amily (Single-Unit (Multi-Unit Commercial
Construction:	_		nufactured C	_		_	
Foundation:	O Slab O Pier an		O Basement	_	Other:		
Dimensions:	Total Square Footage:				=	ge (heat/cool): _	
Contractor:	Number of: Floors/Sub	floors:	Apts/Stes:	Bed	łrooms:	Bathrooms:	Kitchens:
Contractor.	Daytime Phone #:			Email:	· · · · · · · · · · · · · · · · · · ·		**************************************
ON-SITE SEW	AGE FACILITY						
				nt.		, .	II.
	me: Provider:				one:		ense #:
Installer's Nan					one:		ense #:
Installation Ty		ion Opro	faccional Deciar		ne:	Lic Tank Repl	ense #:
inomination 23	System Type:	_	otessional Design	_		•	acement
Water Source:			Public Water Sys		me:		·
ACKNOWLED	GEMENT –Read and ackn						
I certify that all information, statements and documents provided are true and correct to the best of my knowledge. I understand that permit(s) may be revoked by Bastrop County, its duly appointed agents, representatives and staff ("the County") at their discretion. Should development/plans be altered, I agree to submit a revised application, pay any additional fees, and immediately cease development until further notice by the County. I acknowledge that the submittal of this application and any subsequent permit(s)/correspondence(s) does not create liability on the part of the County, in addition I agree to hold the County harmless against any actions for resulting personal injury or property damage. I hereby grant the County access to the identified property for site, development, and compliance inspections.							
Signature:			I	Date:			
Print Name:				Oow	vner Oov	wner's Agent (Owi	ner's written approval required.)



Development ServicesOwner's Agent Certification

Applications for development activities may be submitted by the recorded property owner(s) or the owner's agent(s). Effective October 1, 2009 agents will need to provide a completed copy of this agent certification when submitting applications on behalf of owners. Signatures obtained by facsimile will be accepted. Bastrop County may contact property owners by phone, email or U.S. mail to validate signatures.

Appraisal District Property ID(s)	
Property Address(es)	
Owner's Name(s)	
Owner's Contact Address	
Owner's Contact Phone(s)	
Owner's Contact Email	
Agent's Name(s)	
Agent's Contact Address	
Agent's Contact Phone(s)	
Agent's Contact Email	
(agent)	Certification Statement certify I have assigned to represent my interests ervices associated with (initial all that apply):
9-1-1 Address Assignment	On-Site Sewage Facility Permit
Development Permit	Subdivision
Driveway Permit	Other:
Habitat Conservation Plan	
I understand that I may repeal this a	r declare that this statement is valid until (date) ussignment at any time by submitting a written request, ustrop County Development Services, 211 Jackson Street,
Signed this of	, 20
Owner's Signature	

Hurt's Wastewater Management, Ltd. John P. Hurt -Norweco Certified Technician No. 5208134 PO Box 662, Ganado, Texas 77962 321 Hwy 172 1-800-841-3447

NORWECO SINGULAIR

Initial Service Contract

Owners Name:Address:		Per final inspection
Str		
	Expiration Date:	
City State	Zip	
Telephone No:	System Installed On:	
Directions:		
the site described above is it for the Singulair unit, as well technician. When this contruct Under the terms of this service four month intervals. The sit period. The contract shall reexpiration dates listed above warranty as determined by the pump, all electrical components, and piping. This services heads, and piping. This services heads, and piping the responsible for maintaining rules requires a service policity void. All commercial system be billed to the owner for the Management Ltd. with all gas conducting routine inspection new combinations or keys.	ntract for the Singulair Bio-Kinetic wastewate nded to enable the owner to economically obtas non-scheduled or special service that may be is in force, the owner will not be charged for agreement, a technician will regularly inspecial be visited following each special owner serin in effect for a period of two years, as special components of the Singulair unit are covered at above. The components include: concress installed as part of the system, filter / chloric contract does not include the pipe from the simal need to occur. It shall also be understood chlorine in the system. The Texas Commission be in effect at all times or the on-site sewage will have a BOD and TSS test performed annual OD and TSS test. The homeowner agrees to combinations, keys, etc. to gain access to the or service calls and to immediately notify with	tain regular service inspection be required by a qualified any routine service labor. It, test, and report the plant at ervice request within a 48-hor effect in the effective and red for a full two years ete tanks, aerator, discharge nation assembly, sprinkler structure to the tanks or any distant the homeowner is son on Environmental Quality ge facility permit is considered ually. Additional charges will provide Hurt's Wastewater system for the purpose of the any changes and provide the
twenty-four hours, disconnec	Y includes shutting off the electric current to ag the alarm system, restricting ventilation to or introducing excessive amounts of harmful	the aerator, overloading the
Customer Signature	Date	
Hurt's Wastewater Manag	nent, Ltd. Date	

THE COUNTY OF	
STATE OF TEXAS	

AFFIDAVIT

According to Texas Commission on Environmental Quality Records of County, Texas.	Rules for On-Site Sewage Facilities, this document is filed in the Deed
site sewage facilities (OSSFs). Additionally, the Texas Wateresponsibility for implementing the laws of the State of Texas and duties under the TWC. The TCEQ, under the authority provide notice to the public that certain types of OSSFs are I requires a recorded affidavit. Additionally, the owner must precorded affidavit is not a representation or warranty by the by the TCEQ that the appropriate OSSF was installed.	I the Texas Commission on Environmental Quality (TCEQ) to regulate oneer Code (TWC), §5.012 and §5.013, gives the TCEQ primary as relating to water and adopting rules necessary to carry out its powers of the TWC and the Texas Health and Safety Code, requires owners to ocated on specific pieces of property. To achieve this notice, the TCEQ provide proof of the recording to the OSSF permitting authority. This TCEQ of the suitability of this OSSF, nor does it constitute any guarantee
	Texas Administrative Code §285.91(12) will be installed on the property
The property is owned by (insert owner(s) full name)	·
This OSSF shall be covered by a continuous service policy for an aerobic treatment system for a single family residence	for the first two years. After the initial two-year service policy, the owner shall either obtain a maintenance contract within 30 days or maintain the sper \$285.7(d)(4)(B) An owner may not maintain an OSSF under the
are to be sold separately, the existing on-site sewage facility	operty, the properties above will be sold together as one. If the properties which shares both properties must be dismantled. Permits for the unning materials for existing, permitted, on-site sewage facilities are signing is the TCEQ.
Upon sale or transfer of the above-described property, the peof the planning materials for the OSSF can be obtained from	rmit for the OSSF shall be transferred to the buyer or new owner. A copy (insert permitting authority)
WITNESS BY HAND(S) ON THIS	DAY OF
PR	UNT:
	GN:(Owner(s) signatures)
SWORN AND SUBSCRIBED BEFORE ME ON THIS	, DAY OF,
	Notary Public, State of Texas
	Notary's Printed Name:
	My Commission Expires:

Hurt's Wastewater Management, Ltd. P.O. Box 662, Ganado, TX 77962 (800) 841-3447- Fax (361) 771-3452

Installation Contract

nstallation Prices: Include appropriate trash and pump tank sizes.
600 gpd Norweco Aerobic Unit 750 gpd Norweco Aerobic Unit 1000 gpd Norweco Aerobic Unit 1500 gpd Norweco Aerobic Unit
Site evaluation / Design / Permit: Total(Good for 60 days)
This is a dry bid only. In the event the job site is not accessible due to the weather conditions, there will be an additional charge to mud the system in (either use of track hoe to dig and set tanks or use of mats to drive truck in). Additional amount charged is subject to severity of location.
• The above prices are based on the home having one stub out and the tanks being located within 15' of the stub out. If there is more than one stub out, there will be an additional charge per stub out to connect the pipe. In the event of multiple stub outs and the stub out being positioned such as to require the installation of a lift station, there will be additional charges.
 An additional charge of \$250.00 for Risers will be added if stub outs are more than 24"
• Owner's electrician is responsible for bringing 30amp 110 circuit (for 600 gpd only) within 5' of stub out. Hurt's will provide 15' of electrical, however extra wire and conduit will be an additional charge.
• Excess dirt will be left stockpiled on job site.
 Hurt's will not be responsible for damaging any unmarked underground lines.
 Homeowner or Builder is responsible for water supply to fill tanks, as well as the removal and/or replacement of fences or structures.
• Hurt's not responsible for back filling around tanks after dirt settles. One load of sand provided by Hurt's to be used for 4" pad under tanks and filling around 4" pipe from house.
Payment in full required day of installation. <u>Contract is with Hurt's and homeowner</u> . If payment is coming from the builder, the homeowner is responsible for making sure Hurt's receives that payment. Visa / MasterCard / accepted at Hurt's office only. If used, there will be an additional charge.
Customer Signature Date

Date

Hurt's Wastewater Management, Ltd.

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