

**On Site Sewage Facility Information Sheet  
COLORADO COUNTY**

**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:** \_\_\_\_\_

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**BILLING INFORMATION**

**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Payment Option: Personal Check:** \_\_\_\_\_ **Cash:** \_\_\_\_\_

**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:

- \_\_\_ 1. Survey of Property or Plot Plan
  - \_\_\_ 2. Tax Receipt or Deed for legal description and proof of ownership
  - \_\_\_ 3. Well Log (if requested)
  - \_\_\_ 4. Correct 911 Address (Required for Floodplain)
  - \_\_\_ 5. 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.



# Colorado County Development Permit Application

305 Radio Lane - Suite 108 Columbus, Texas 78934

ccpermits@co.colorado.tx.us

(979) 732-6380 phone

(979) 733-0274 fax

**Owner is required to have tax receipt or copy of deed with stamps from County Clerk's Office to process application.**

### Property Owner Information

\_\_\_\_\_  
(First Name) (Middle Initial) (Last Name)

If a Business - Name of Business \_\_\_\_\_

\_\_\_\_\_  
(Current Mailing Address) P.O. Box or Street # Street Name City State Zip

Work # \_\_\_\_\_ Home # \_\_\_\_\_ Fax # \_\_\_\_\_

Her Cell # \_\_\_\_\_ His Cell # \_\_\_\_\_

E-mail Address \_\_\_\_\_

### Address Request For (check all that apply below)

- Residential
- Commercial
- Existing House
- Other Not Listed \_\_\_\_\_
- 911 Address
- Non-Profit Organization
- 911 Sign
- Private Road Sign Required

### Description of Proposed Construction (check all that apply below)

- Water Well
- New Construction
- House
- New Cell Tower
- Other Not Listed \_\_\_\_\_
- OSSF
- Substantial Improvement to Existing Structure
- Manufactured / Mobile Home
- Cell Tower Modifications
- Oil Well
- Modular Home
- Pipe Line

**Property to be 911 addressed Information**

|                           |             |      |     |
|---------------------------|-------------|------|-----|
| Street # (If known)       | Street Name | City | Zip |
| Name of Subdivision _____ |             |      |     |
| GPS Coordinates _____     |             |      |     |

Will you have a lock on your gate, if so please contact the Sherriff's Office with combination for in the event of an emergency.

**Disclaimer**

The flood hazard insurance rate maps and other flood data used by the County Building Official in evaluating flood hazards to proposed developments are considered reasonable and accurate for regulatory purposes and are based on the best available scientific and engineering data. On rare occasion's greater floods can and will occur, flood heights may be increased by man-made or natural causes. This statement does not imply that developments outside the identified area of special flood hazard will be free from flooding or flood damage. Issuance of this statement shall not create liability on the part of Colorado County, the County Building Official or any officer or employee of Colorado County in the event flooding of flood damage does occur.

It is the property owner's responsibility to have 911 sign posted visible at entrance.

No construction can begin without a development permit; a septic permit is required for all septic installation or repairs.

If you are required to have a private road sign, owner is responsible for maintaining sign at all times.

Signature below acknowledges the information provided is correct, owner is aware of the flood hazards and other responsibilities.

|                  |      |
|------------------|------|
| Owners Signature | Date |
|------------------|------|

|                            |      |
|----------------------------|------|
| Owners Name (please print) | Date |
|----------------------------|------|

# (Office Use Only)

Permit # \_\_\_\_\_

Property ID # \_\_\_\_\_

Flood Zone     A             AE             X             Both A & AE

Assigned 911 Address \_\_\_\_\_

Gate Access Code \_\_\_\_\_

Is the property located in an identified flood hazard area?     Yes     No

Is the structure located in an identified flood hazard area?     Yes     No

Is additional information required?     Yes     No

Elevation Certificate required             Elevation Certificate received (date: \_\_\_\_\_)

Exemption Certificate Issued

Permit Application Approved

Permit Application Rejected

SIGN MADE \_\_\_\_\_

**MAILED OR WILL PICK UP IN OFFICE**

\_\_\_\_\_  
David W. Kotzebue  
Floodplain Manager

\_\_\_\_\_  
Date

(OFFICE USE ONLY)

PERMIT NO. \_\_\_\_\_  
PROPERTY ID # \_\_\_\_\_

**COLORADO COUNTY**  
**ON - SITE SEWAGE FACILITY APPLICATION (OSSF)**

**PLEASE PRINT ALL INFORMATION**

**I. APPLICANT INFORMATION:**

\_\_\_\_\_  
( FIRST NAME )                      ( MIDDLE INITIAL )                      ( LAST NAME )

\_\_\_\_\_  
IF BUSINESS - NAME OF BUSINESS

**II. CURRENT MAILING ADDRESS:**

TX.

\_\_\_\_\_  
P.O.BOX OR STREET #              STREET NAME              CITY              STATE              ZIP

**EMAIL ADDRESS:**

**PHONE NUMBERS:**

\_\_\_\_\_  
HOME#                                      WORK#                                      FAX#

\_\_\_\_\_  
HIS CELL#                                      HER CELL#

**III. LOCATION (ADDRESS) OF PROPERTY WHERE THE OSSF IS INSTALL:**

\_\_\_\_\_  
STREET #                                      STREET NAME                                      CITY                                      ZIP

**NAME OF SUBDIVISION:**

MAIL TO:  
COLORADO COUNTY PERMIT OFFICE  
305 RADIO LANE, SUITE 108  
COLUMBUS, TEXAS 78934  
PHONE # 979-732-2435  
FAX # 979-733-0274  
EMAIL: [ccpermits@co.colorado.tx.us](mailto:ccpermits@co.colorado.tx.us)

PERMIT NO. \_\_\_\_\_

**ON-SITE SEWAGE FACILITY APPLICATION (OSSF)**

**IV. WATER SUPPLY INFORMATION:**

WELL                       PUBLIC WATER SUPPLY

**V. STRUCTURE INFORMATION:**

**(A) DWELLING INFORMATION**

RESIDENTIAL / SINGLE FAMILY                       MANUFACTURED MOBILE HOME  
 BARN / CONDO     BARN / STORAGE BUILDING  
 COMMERCIAL / MULTI FAMILY

YEAR BUILT \_\_\_\_\_ SQ. FT. OF LIVING AREA \_\_\_\_\_  
NUMBER OF BEDROOMS \_\_\_\_\_ NUMBER OF FULL BATHS \_\_\_\_\_

**(B) CHECK TYPE OF FIXTURES:**

WATER SAVING     NOT-WATER SAVING

**(C) SEWAGE TREATMENT**

NEW SYSTEM     REPLACE OR REPAIR SYSTEM

**VI. ENGINEERING PLANS AND SPECIFICATIONS IN SUPPORT OF THIS APPLICATION SUBMITTED.**

YES     NO

SITE EVALUATOR: \_\_\_\_\_ TCEQ LIC # \_\_\_\_\_  
ENGINEER / SANITARIAN: \_\_\_\_\_ TCEQ LIC # \_\_\_\_\_  
INSTALLER: \_\_\_\_\_ TCEQ LIC # \_\_\_\_\_

I authorize Colorado County, Texas and Texas Commission on Environmental Quality and their agents to enter the described property during daylight hours to inspect for On-Site Sewage Facilities, for any reason consistent with the water quality program of the Texas natural Resource Conservation Commission.

SIGNATURE OF APPLICANT: \_\_\_\_\_

DATE: \_\_\_\_\_

APPLICATIONS ACCEPTED BY: \_\_\_\_\_

Steven L. Ault  
TCEQ # OS0030798

DATE: \_\_\_\_\_

PERMIT NO. \_\_\_\_\_

I CERTIFY THAT ALL THE INFORMATION GIVEN ON PAGES 1 AND 2 OF THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

AUTHORIZATION IS HEREBY GIVEN TO THE COLORADO COUNTY DESIGNATED REPRESENTATIVE AND THE TEXAS COMMISSION ON ENVIRONMENTAL QUALITY (TCEQ) TO ENTER UPON THE DESCRIBED PROPERTY FOR THE PURPOSE OF LOT EVALUATION AND INSPECTION OF THE ON-SITE SEWAGE FACILITY (OSSF). A PERMIT TO OPERATE THE OSSF WILL BE GRANTED FOLLOWING A SUCCESSFUL INSPECTION OF THE INSTALLED SYSTEM, WHICH INDICATES THAT THE SYSTEM WAS INSTALLED IN COMPLIANCE WITH TCEQ RULES FOR AN OSSF, TAC30, CHAPTER 285.

\_\_\_\_\_  
ACKNOWLEDGEMENT OF DISCLAIMER BY APPLICANT

\_\_\_\_\_  
APPLICANT - PLEASE PRINT NAME

DATE: \_\_\_\_\_

**PLEASE NOTE:**

**THE FOLLOWING MUST BE INCLUDED WITH APPLICATION TO PROCESS THE (OSSF) ON-SITE SEWAGE FACILITY PERMIT.**

- 1. FEE**
- 2. DEED OR PROPERTY TAX RECEIPT**
- 3. SITE EVALUATION**
- 4. DESIGN & DRAWING**
- 5. AFFIDAVIT (if applicable)**
- 6. MAINTENANCE CONTRACT (if applicable)**





**AFFIDAVIT TO BE FILED WITH THE COLORADO COUNTY CLERK'S OFFICE**

THE COUNTY OF COLORADO  
STATE OF TEXAS

**AFFIDAVIT**

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities (OSSF's), this document is filed in the Official Records of Colorado County, Texas.

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (TCEQ), to regulate on-site sewage facilities (OSSF's). The Texas Water Code (TWC), §5.012 and §5.013, gives the commission 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 commission, under the authority of the TWC and the Texas Health and Safety Code, requires owners to provide notice to the public that certain types of OSSF's are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. The owner must provide proof of the recording the OSSF's permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF's nor does it constitute any guarantee by the commission that the appropriate OSSF's was installed.

**II**

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

\_\_\_\_\_

This property is owned by \_\_\_\_\_

This OSSF's shall be covered by a continuous service policy for the first two years. After initial two year service policy, the owner of the aerobic treatment system for a single family residence shall either obtain a maintenance contract within 30 days or maintain the system personally.

Upon sale or transfer of the above described property, the permit for the OSSF's shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF's may be obtained from the Colorado County Permit Office 305 Radio Lane Columbus, Texas 78934.

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

\_\_\_\_\_  
(Owner's Signature)

SWORN TO 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**

**Installation 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 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. Contract is with Hurt's and homeowner. 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**

\_\_\_\_\_  
**Hurt's Wastewater Management, Ltd.**

\_\_\_\_\_  
**Date**

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**P.O. Box 662, Ganado, TX 77962**  
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\_\_\_\_\_  
**Customer Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Hurt's Wastewater Management, Ltd.**

\_\_\_\_\_  
**Date**