		Coryell	Count	ty		Permi	it #
	Applic	ation To Con	struct	or Modi	fy OSSF		
Permit Amount:	□ Aerobic \$450.00	□Anaerobic \$3 □	350.00 Repair		merical \$55(0.00 🗆	Re-Inspection \$100.00
Property Owners Nan	ne:			Telephone	Number:		
Current Mailing Addr	ess:						
9-1-1 Site Address:							
Inside City Limits?			Yes	🗆 No			
Legal Discription:	Subdivision				-	Block N	umber
Lot Number		Section Numbe	۶r		-	Number	of Acres
Name of Survey		Abs	it. #		Vol. #		Pg. #
Source of Water:	Private Well	D Public Well		Name of P	ublic Water	Supply	
Water Saving Devices	?		Yes	🗆 No			
Residental:	Number of Bedrooms			Square Fee	et of Living A		
Built on Site		□ Pre-Built/Mo	dular				obile Home
Non-Residental (inclu	ding mulit-family reside	ence)		Type of Fac	cility:		
Number of Employees	s/Occupants/Units:			Days Occur	pied per We	eek:	
Treatment: Standard:				Disposal: Type:			
Aerobic:							
Tank Size Required:				Area Requ	ired:		
Tank Size/ Manufactu	rer:			GPD:		Soil Typ	e:
Site Evaluator:		Lice	ense#			Phone#	
Designer:		Lice	ense#			Phone#	
Installer:		Lice	ense#			Phone#	
best of my knowledge. Authors Designated Representative o	ents are true and correct to the orizaton is hereby given to the f Coryell County, Texas to enter the purpose of inspecting the						
site and OSSF. Construction of the on-site sewage system must not begin until this applicatioin is approved and a PERMIT TO OPERATE is issued.		-	nature o presenta	of Owner or ative	r	•	Date

Coryell County

Permit #

OSSF Soil Evaluation Report Information

Property Owner:

Site Address:

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REQUIREMENTS: At least two (2) soil excavations must be performed on the site at opposite ends of the proposed disposal area. <u>Locations of soil boring or dug pits must be shown on the site drawing</u>. For subsurface disposal, soil evaluations must be performed to a depth of at least two (2) feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.

Describe each soil horizon and identify any restrictive features on the form. Indicate depths where features appear.

SOIL BORING #1						
Depth	Texture	Structure	Drainage	Restrictive	Observations	
(feet)	Class	(if applicable)	(mottles/water table)	Horizon	Observations	
0						
1						
2						
2						
3						
4						
4						
5						
5						

SOIL BORING #2							
Depth	Texture	Structure	Drainage	Restrictive	Observations		
(feet)	Class	(if applicable)	(mottles/water table)	Horizon	Observations		
0							
1							
2							
2							
3							
4							
T							
5							
l cer	tify that the	findings of this report are	e based on my field obser	vations and are accurate	to the best of my knowledge.		
Signature of Site Evaluator			License Numb	er	Date		

	Coryell Cou	Inty OSSF Site Evaluation	Permit	#		
				•		
Ар	plicant Information if not Homeowner		te the Follov	ving:		
	(Includes Builders):	Incorporated Area?		Yes		No
		Presence of upper water	r shed? \Box	Yes		No
Name:		Water Well (Existing or Pro	posed) 🗆	Yes		No
Address:		Is Organized Sewage Ava	ailable 🗆	Yes		No
City:		Any Presence of Adjacen	it Ponds, Str	eams,		
Tele:	Fax:	Water Impoundments?		Yes		No
	Installer Information	Site Evaluator Info	ormation (if	f not ins	taller	
Name:		Name:	(
Company:		Company:				
Address:		Address:				
City:		City:				
Tele:	Fax:	Tele:	Fa	ax:		
	ALL DESIGNS SHO	DULD BE ATTACHED SEPARATELY				
	BEFORE APPROVAL IS	GRANTED DESIGN SHOULD INCLUDE:				
	Drawing to Scale with Scale Legend					
	Compass North					
	Adjacent Streets					
	Property Lines					
	Locations of Buildings					
	Easements					
	Swimming Pools					
	Water Lines and Other Structures Where Kr					
	Location of Existing or Proposed Water Wel					
	Indication of Slope (or provide contour lines	s from structure to the farthest location	n of the prop	posed		
	soil absorption or irrigation area.)					
	Location of Soil Boring or Dug Pits (show loc		• •			
	Location of Natural, Constructed and/or Pro					
	tide of salt water bodies) Water Impounded	Areas, cut of Fill Bark, Sharp Slopes a	nu/or break			
	Acres of Property Tank Size and Manufacturer					
	Parameters: (GPD, soil class, soil Ra and square feet of absorptive area required)					
	Proposed Design: (style of drainfield, trench width and length, number of leaching chambers and					
	manufacturer if applicable, and square feet of absorptive area used)					
	Warranty Deed and/or Survey must be Attached					
Signatu	ire of Site Evaluator	License Number		Date		

Coryell County

Permit #__

AFFIDAVIT TO THE PUBLIC

Property Owner:				
	County of Cor	yell State of Texas		
Before me, the undersigned authority by me duly sworn, upon oath states tl of land lying and being situated in Cor	, on this day personally nat he/she is the \Box repre	appeared esentative of, or \Box owne	r of record of that certain t	
□Name of Survey:	Abst. #	Vol. #	Pg. # Acres	
and/or □Name of Subdivision:	Block	Lot/Tract	Section/Phase	
9-1-1 Site Address:		City and Zi	р	
****	*****	*******	******	****
EVAPOTRANSPORATIVE	(Gallo	ns per Day)		
 The udersigned further states that h transferee that an evapotranspirative wastewater disposal limits. AEROBIC SYSTEM 	drainfield is utilized on			
 The undersigned further states that the permit to operate such system to contract with an approved maintenan 	the buyer or transferee	. Any buyer or transferee	e is hereby notified that a r	
Failure to abide by the above stated Rules and of the Coryell County Orde Justice of the Peace Court having juri	r for the On-Site Sewag	e Facilities which will re		-
WITNESS MY/OUR HAND(S) on this		day of	,20	
Doproc	ontativo or Bronorty Ou	vner Signature or License	ad Installer	
		ary Public * * * * * * * * *		
SWORN TO AND SUBSCRIBED BEFORE	ME on this	day of	,20	
by:	for	:		
(Representative)	(Pro	operty Owner)		
	seal \rightarrow			
Notary Public, State of Texas				

County Clerks