



ENVIRONMENTAL HEALTH

GUADALUPE COUNTY

310 IH 10 W

Seguin, Texas 78155

Office: (830) 303-8858

permits@co.guadalupe.tx.us

Shelly Reed Jackson, Director

APPLICATION FOR ON-SITE SEWAGE FACILITY (OSSF) DEVELOPMENT

Application For: New OSSF Replace existing OSSF Connect to existing OSSF **Original Permit #** _____
 Replace Tank Replace Tank Lid Add Tank to existing OSSF Repair Disposal System Move Disposal System
 Composting Toilet Graywater Collection Holding Tank Other _____

Property Owner _____

911 Approved Property Address _____ City/ST/ZIP _____

Mailing Address _____ City/ST/ZIP _____

Phone#(____) _____ Gate Code _____ Email Address _____

Property Tax ID# _____ Acreage _____ Property located in City Limits _____

Property in the flood zone? _____ Driveway Permit Issued _____

OSSF in the flood zone? _____ # of Existing Living Quarters on Property _____

Source of Water Public Private Well Rain Collect _____ # of Existing OSSF on Property _____

 Single Family Residential **Non-Residential (Business, Commercial)**

Type of Construction _____ Type of Facility _____

Square Footage _____ # of Bedrooms _____ #Occ _____ #Seats _____ #Beds _____ #Spaces _____

Will this structure be used for rental? Yes No Building Permit # Issued by Fire Marshal _____

System/Disposal _____ / _____ Soil Type _____ Disposal Area _____

Tank Size _____ Tank Brand _____ Gallons per Day (TCEQ Table III) _____

Non-Residential (Business, Commercial) Uses: 3 areas of reserve shown on OSSF site design

Existing Tank Size _____ New Tank Size _____

Existing Disposal Area _____ New Disposal Area _____

Professional Engineer _____ Lic# _____

Registered Sanitarian/Site Evaluator _____ Lic# _____

Septic Installer _____ Lic# _____

By signing this application, I certify that:

-The completed application and all additional information submitted does not contain any false information and does not conceal any material facts.

-I certify that I am the property owner or possess the appropriate land rights necessary to make the permitted improvements on said property.

-Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities.

-I also understand that a permit of authorization to construct will not be issued until the septic inspector has performed a site inspection of the property and approved the application and all other documents submitted.

-I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application.

Property Owner Signature: _____ Date: _____

Permit expires one year from issued date of Authorization to Construct Complete Both Sides



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ON-SITE SEWAGE FACILITY (OSSF) DEVELOPMENT APPLICATION CHECKLIST

On-Site Sewage Facilities, Title 30, TAC Chapter 285.3(c) Action on Application: The permitting authority shall either approve or deny an application within 30 days of receiving the application.

Instructions: Place a check mark next to all items that apply. For items that do not apply, place "N/A". This OSSF Development Application Checklist must accompany the completed application.

- Completed Application for On-Site Sewage Facility (OSSF) Development
- Site/Soil Evaluation Completed by a Certified Registered Sanitation/Site Evaluator or a Professional Engineer
- Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist of a scaled design and all system specifications
- Composting Toilet Materials (approved by the executive director provided the system has been tested and certified under NSF International Standard 41 (1999) or under any other standards approved by the executive director)
- Guadalupe Appraisal District Property Identification Card
- Copy of Recorded Deed
- Copy of Recorded Subdivision Plat *(If located in a recorded subdivision)*
- Copy of Non-Residential Building Permit *(For Non-Residential OSSF applications)*
- Copy of Issued Driveway Permit *(For New OSSF applications)*
- Copy of Address Assignment Verification Letter *(For New OSSF applications)*
- Copy of Sludge Transporter Pumping Receipt *(For Replacement of OSSF or Connect to existing OSSF application)*
- Evaluation Report of existing OSSF *(For Connect to existing OSSF application)*
- Property Owner's Statement *(For Connect to existing OSSF application)*
- Permit Fee *(See Fee Schedule)*
- Copy of all current licenses for septic designers and septic installer
- For Aerobic Treatment System:
 - Affidavit to the Public Certification of OSSF requiring maintenance *(Recorded with County Clerk's Office)*
 - Maintenance Contract signed by both property owner and maintenance provider

I affirm that I have provided all information required for my OSSF Development Application and that this application constitutes a completed OSSF Development Application.

Permit expires one year from issued date of Authorization to Construct an On-Site Sewage Facility

Signature of Agent

Date

Complete Both Sides →

OFFICE USE

Date Received _____

By _____

Complete Application

Incomplete Application (Missing items listed below):

Cash Credit Card Check

Receipt Number _____
