



## HILL COUNTY SHERIFF'S OFFICE - ENVIRONMENTAL COMPLIANCE UNIT

JEFF WARD ~ 254-337-1210

406 HALL STREET - HILLSBORO - TEXAS - 76645

[www.jward.hill.tx.us](http://www.jward.hill.tx.us)

### **APPLICATION FOR ON-SITE SEWAGE FACILITY (OSSF) PERMIT** **INSTRUCTIONS & REQUIREMENTS**

☐

**\$325.00 STANDARD CONVENTIONAL SYSTEM**

☐

**\$475.00 NON-STANDARD SYSTEM**

(NON-STANDARD SYSTEMS INCLUDE, BUT NOT LIMITED TO: AEROBIC/LPD/DRIP EMITTERS/ET BEDS/HOLDING TANKS/COMMERCIAL FACILITY/MULTI-FAMILY RESIDENCES)

OBTAIN AN APPLICATION FOR OSSF PERMIT:

-HILL COUNTY TAX OFFICE

126 S COVINGTON, HILLSBORO, TX 76645

[www.hilltax.org](http://www.hilltax.org) 254-582-4000

-HCSO – ENVIRONMENTAL COMPLIANCE UNIT

406 HALL STREET, HILLSBORO 254-582-5313 EXT 414

[www.co.hill.tx.us](http://www.co.hill.tx.us)

A SITE EVALUATION MUST BE CONDUCTED BY A LICENSED EVALUATOR. A DETAILED REPORT DOCUMENTING THE RESULTS OF THE SOIL/SITE CONDITIONS MUST ACCOMPANY THE APPLICATION FOR OSSF PERMIT.

PLANNING MATERIALS MUST BE COMPLETED BY THE REQUIRED INDIVIDUAL. STANDARD CONVENTIONAL SYSTEM PLANS MAY BE PREPARED BY THE OWNER OR INSTALLER. NON-STANDARD SYSTEM PLANS MUST BE PREPARED BY A PROFESSIONAL ENGINEER OR PROFESSIONAL SANITARIAN.

SUBMIT A COMPLETED OSSF PERMIT APPLICATION (TWO (2) PAGES), THE APPLICATION FEE (\$325.00 STANDARD/\$475.00 NON-STANDARD), SOIL/SITE EVALUATION RESULTS, ALL PLANNING MATERIALS, RECORDED "AFFIDAVIT TO THE PUBLIC", AND EXECUTED MAINTENANCE CONTRACT (IF REQUIRED) TO THE:  
HILL COUNTY TAX OFFICE  
PO BOX 412  
126 S COVINGTON HILLSBORO TX 76645

THE APPLICATION/PLANNING MATERIALS WILL BE REVIEWED BY THE HILL COUNTY SHERIFF'S ENVIRONMENTAL COMPLIANCE UNIT PERSONNEL AND/OR THE TEXAS COMMISSION ON ENVIRONMENTAL QUALITY.

IF APPROVED, THE "AUTHORIZATION TO CONSTRUCT" PERMIT WILL BE ISSUED. THE AUTHORIZATION TO CONSTRUCT PERMIT IS VALID FOR ONE (1) YEAR FROM THE DATE OF ISSUANCE.

THE INSTALLER MUST CONTACT THE HILL COUNTY SHERIFF'S ENVIRONMENTAL COMPLIANCE UNIT FIVE BUSINESS DAYS BEFORE THE REQUESTED DATE OF THE CONSTRUCTION INSPECTION.  
THE EXCAVATION/INSTALLATION SITE MUST REMAIN OPEN UNTIL THE INSPECTION HAS BEEN COMPLETED AND APPROVED.

IF APPROVED, A NOTICE OF APPROVAL PERMIT/LICENSE TO OPERATE WILL BE ISSUED TO THE OWNER WITHIN SEVEN DAYS.

NOTE: A RE-INSPECTION FEE EQUAL TO ONE HALF (1/2) THE PERMIT APPLICATION FEE MUST BE PAID FOR EACH TIME THE SYSTEM MUST BE REINSPECTED DUE TO A DISAPPROVAL. ALL FEES MUST BE PAID TO THE HILL COUNTY TAX OFFICE. THE TAX OFFICE ACCEPTS CASH, CHECKS, VISA AND MASTERCARD.

**FOR ADDITIONAL INFORMATION OR TO REQUEST AN INSPECTION CONTACT:** JEFF WARD, HCSO ENVIRONMENTAL COMPLIANCE UNIT OFFICER 254-582-5313 EXT 414



# HILL COUNTY SHERIFF'S OFFICE - ENVIRONMENTAL COMPLIANCE UNIT

JEFF WARD ~ 254-337-1210  
406 HALL STREET - HILLSBORO, TEXAS 76645  
jward@co.hill.tx.us

PERMIT APPLICATION #: 109-

## APPLICATION FOR ON-SITE SEWAGE FACILITY PERMIT

- ☐ \$325.00 STANDARD CONVENTIONAL SYSTEM  
☐ \$475.00 NON-STANDARD SYSTEM

(NON-STANDARD SYSTEMS INCLUDE, BUT NOT LIMITED TO: AEROBIC/LPD/DRIP EMITTERS/ET BEDS/HOLDING TANKS/COMMERCIAL FACILITY/MULTI-FAMILY RESIDENCES)

FLOOD PLAIN PERMIT RECEIPT # \_\_\_\_\_ NEW CONSTRUCTION ☐ REPLACEMENT SYSTEM ☐ RENOVATION ☐

1. PROPERTY OWNER:

(LAST) \_\_\_\_\_ (FIRST) \_\_\_\_\_ (MIDDLE) \_\_\_\_\_

2. MAILING ADDRESS:

(STREET ADDRESS/P.O. BOX) \_\_\_\_\_

(CITY/STATE) (ZIP) \_\_\_\_\_

3. TELEPHONE NO. HOME: (\_\_\_\_\_) \_\_\_\_\_ WORK/CELL: (\_\_\_\_\_) \_\_\_\_\_

4. E-MAIL ADDRESS: \_\_\_\_\_

5. SITE ADDRESS: \_\_\_\_\_

6. PROPERTY DESCRIPTION: Lot \_\_\_\_\_ Block \_\_\_\_\_ Sec \_\_\_\_\_ Subdivision \_\_\_\_\_

OR  
Survey: \_\_\_\_\_ Abstract \_\_\_\_\_ Vol. \_\_\_\_\_ Page \_\_\_\_\_

7. LOT SIZE: Acres \_\_\_\_\_ OR Dimensions \_\_\_\_\_ Survey attached YES ☐ NO ☐

8. SOURCE OF WATER: \_\_\_\_\_ Private Well \_\_\_\_\_ Public Water Supply \_\_\_\_\_

9. SINGLE FAMILY RESIDENCE: #Of Bedrooms \_\_\_\_\_ Living Area (Sq. Ft.) \_\_\_\_\_ (NAME OF WELL DRILLER OR SUPPLIER) \_\_\_\_\_  
Water Saving Devices Installed? Yes ☐ No ☐

10. COMMERCIAL/INSTITUTIONAL (including multi-family residences) TYPE: \_\_\_\_\_

NUMBER OF EMPLOYEES/OCCUPANTS/UNITS: \_\_\_\_\_ Square Footage \_\_\_\_\_

11. DESIGNER: \_\_\_\_\_ Registration # \_\_\_\_\_ Phone # \_\_\_\_\_

12. INSTALLER: \_\_\_\_\_ Registration # \_\_\_\_\_

Phone # \_\_\_\_\_ E-Mail \_\_\_\_\_

13. SITE EVALUATOR: \_\_\_\_\_ Registration # \_\_\_\_\_ Phone # \_\_\_\_\_

This application is valid for one (1) year after dated receipt of payment. Authorization is hereby given to Hill County, the Texas Commission on Environmental Quality (TCEQ), the Texas Department of Health and their agents, or designees, singularly or jointly to enter upon the above described property for the purpose of inspecting sewage facilities for any reason consistent with the Texas Health and Safety Code. I HEREBY CERTIFY THAT ALL STATEMENTS IN THIS DOCUMENT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## TECHNICAL INFORMATION

**DO NOT BEGIN CONSTRUCTION PRIOR TO APPLICATION APPROVAL.**

PROPERTY OWNER:

(LAST)

(FIRST)

(MIDDLE)

PROFESSIONAL DESIGN REQUIRED? YES ☐ NO ☐ IF YES, PROFESSIONAL DESIGN ATTACHED? YES ☐ NO ☐

**SEWER** (House Drain):

Type and Size of Pipe: \_\_\_\_\_ Slope of Sewer Pipe to Tank: \_\_\_\_\_

### **TECHNICAL INFORMATION:**

Daily Wastewater Usage Rate: Q= \_\_\_\_\_ (gallons/day)

Water Saving Devices: YES ☐ NO ☐

Disposal System Type: \_\_\_\_\_ Area Required Sq. Ft.: \_\_\_\_\_ Designed Area Sq. Ft.: \_\_\_\_\_

### **TREATMENT UNIT/TANKS:**

Septic Tank: ☐

Aerobic Unit: ☐

Other: \_\_\_\_\_

Septic Tank Dimensions: \_\_\_\_\_ Liquid Depth: \_\_\_\_\_ (tank bottom to outlet)

Size Required: \_\_\_\_\_ Size Designed: \_\_\_\_\_

☐ Concrete:

Fiberglass: ☐

Other: \_\_\_\_\_

Unit Manufacturer: \_\_\_\_\_ Model No.: \_\_\_\_\_ Size: \_\_\_\_\_

Treatment Tank Serial No.: \_\_\_\_\_

Concrete: ☐

Fiberglass: ☐

Other: \_\_\_\_\_

### **ATTACH REQUIRED INFORMATION:**

- ☐ SOIL/SITE EVALUATION
- ☐ PLANNING MATERIALS
- ☐ PUMP DATA
- ☐ MAINTENANCE CONTRACT
- ☐ AFFIDAVIT TO THE PUBLIC

**PLEASE READ THE HILL COUNTY OSSF PERMIT APPLICATION REQUIREMENTS AND INSTRUCTIONS CHECK LIST FOR INFORMATION REGARDING REQUIRED DOCUMENTATION SUBMISSION.**

DESIGNER'S/INSTALLER'S SIGNATURE: \_\_\_\_\_ LICENSE NO.: \_\_\_\_\_ DATE: \_\_\_\_\_

### **COUNTY USE ONLY:**

PERMIT APPLICATION #: 109- \_\_\_\_\_

AUTHORIZATION TO CONSTRUCT OSSF:	APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>	DATE: _____	INSPECTOR: _____
OPEN INSPECTION:	APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>	DATE: _____	INSPECTOR: _____
FINAL INSPECTION/ AUTHORIZATION TO OPERATE:	APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>	DATE: _____	INSPECTOR: _____

# OSSF Soil & Site Evaluation

Page 1 (Soil & Site Evaluation)

Date Performed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Property Owner: \_\_\_\_\_

Site Location: \_\_\_\_\_ Proposed Excavation Depth: \_\_\_\_\_

## REQUIREMENTS:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil borings or dug pits must be shown on the site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed disposal field excavation depth. For surface disposal, the surface horizon must be evaluated. Describe each soil horizon and identify any restrictive features on this form. Indicate depths where features appear.

Soil Boring Number: _____					
Depth (Feet)	Texture Class	Gravel Analysis (If Applicable)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
1 FT.					
2 FT.					
3 FT.					
4 FT.					
5 FT.					

Soil Boring Number: _____					
Depth (Feet)	Texture Class	Gravel Analysis (If Applicable)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
1 FT.					
2 FT.					
3 FT.					
4 FT.					
5 FT.					

## FEATURES OF SITE AREA

Presence of 100 year flood zone

Presence of upper water shed

Presence of adjacent ponds, streams, water impoundments

Existing or proposed water well in nearby area (within 150 feet)

Ground Slope

☐ Yes    ☐ No

☐ Yes    ☐ No

☐ Yes    ☐ No

☐ Yes    ☐ No

\_\_\_\_\_ %

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability.

\_\_\_\_\_  
(Signature of person performing evaluation)

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

\_\_\_\_\_  
Registration Number and Type

Date Performed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Site Location: \_\_\_\_\_

☐ Subsurface Disposal    ☐ Surface Disposal

**Schematic of Lot or Tract**

**Show:**

Compass North, adjacent streets, property lines, property dimensions, location of buildings, easements, swimming pools, water lines, and any other structures where known, all to scale.

Location of existing or proposed water wells within 150 feet of the property.

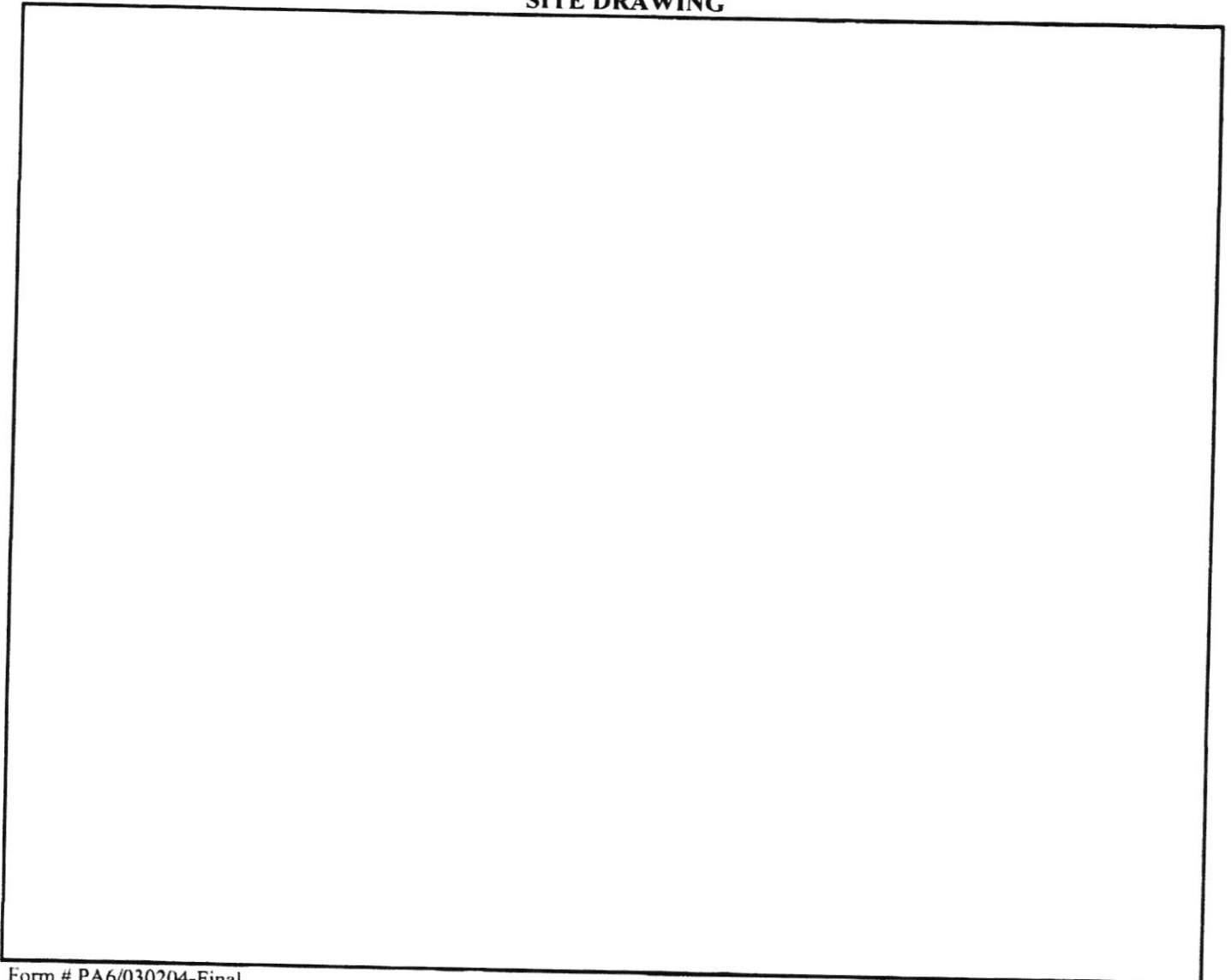
Indicate slope or provide contour lines from the structure to the farthest location of the proposed disposal field.

Location of soil boring or excavation pits (show location with respect to a known reference point).

Location of natural, constructed, or proposed drainage ways (ditches, streams, ponds, lakes, rivers, etc.), water impoundment areas, cut or fill bank, sharp slopes and breaks.

Lot Size: \_\_\_\_\_ or Acreage: \_\_\_\_\_

**SITE DRAWING**



# AFFIDAVIT TO THE PUBLIC

THE COUNTY OF HILL  
STATE OF TEXAS

## CERTIFICATION OF OSSF REQUIRING MAINTENANCE AND FOR AN OSSF LOCATED ON TWO OR MORE TRACTS OF LAND

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities, this document is filed in the deed records of Hill 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 meeting the requirements of 30 Texas Administrative Code §285 will be installed on the property described as:  
(insert legal description):

\_\_\_\_\_

\_\_\_\_\_

The property is owned by: (insert owner's full name)

\_\_\_\_\_

This OSSF must be covered by a continuous maintenance contract. All maintenance on this OSSF must be performed by an approved provider and/or maintenance company, and a signed maintenance contract must be submitted to the Hill County Sheriff's Office Environmental Compliance Unit within 30 days after the property has been transferred.

This OSSF is located on two or more separate legal tracts of land and the tracts cannot be sold separately. This document must be recorded with each tract's property deed affected by the OSSF.

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 materials for the OSSF can be obtained from Hill County Sheriff's Office Environmental Compliance Unit

WITNESS BY HAND(S) ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

\_\_\_\_\_

(Owner(s) Signature(s))

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

Notary Public, State of Texas

Notary's Printed Name: \_\_\_\_\_

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