



KAUFMAN COUNTY, TEXAS

Development Services

OSSF Application

101 N. Houston St.
Kaufman, Texas 75142
469-376-4127

**PLEASE NOTE: ALL INFORMATION MUST BE PROVIDED
INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED FOR SUBMISSION**

Type of Permit: Other Commercial Residential

Other (specify): _____

APPLICANT INFORMATION

Property Owner: _____ DL/ID: _____

Site Address: _____

Phone: _____ Email Address: _____

Mailing Address: _____ City/Zip: _____

FOR PARCELS WITH EXISTING SEPTIC SYSTEMS - IF AN ADDITIONAL SEPTIC IS BEING INSTALLED, PLEASE ATTACH THE NEW ADDRESS LETTER ISSUED BY KAUFMAN COUNTY 911/GIS FOR THE NEW SEPTIC BEING INSTALLED. EACH SEPTIC MUST HAVE ONE ACRE OF USABLE SPACE, ALONG WITH A SEPARATE ADDRESS.

Property ID# (from County Appraisal District): _____

Subdivision: _____ Phase: _____ Lot: _____

Single Family Residence: Type: _____ Sq Ft: _____ Bedrooms: _____ Bathrooms: _____

Commercial (Includes Multi Family): Type: _____ Sq Ft: _____ # of Employees: _____

Installer Name: _____ Ph#: _____

OSSF#: _____ Mailing Address: _____

The undersigned applicant certifies that all information supplied herein is true and correct to the best of my knowledge and no incorrect information was provided for purposes of obtaining a permit to construct an on-site sewage facility and applicant either owns and/or has authority to construct an on-site sewage facility on this property. Permission is hereby-granted to a designated representative of the licensing authority, Kaufman County Public Works Department, to enter said property for purposes of inspection, to determine compliance with applicable laws, standards, rules and regulations.

X _____
Owner Signature Date

SUBMIT APPLICATIONS

EMAIL: publicworks@kaufmancounty.net

MAIL OR IN PERSON: 101 N Houston St, Kaufman, TX 75142 QUESTIONS: 469-376-4127

IF APPLICANT IS AGENT THEN COMPLETE SECOND PAGE FOR AGENT INFORMATION



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AGENT INFORMATION

COMPLETE THIS PAGE ONLY IF THE APPLICANT IS ACTING AS AN AGENT FOR THE OWNER

OWNER IDENTIFICATION

Owner(s) Name: _____

AGENT IDENTIFICATION

Agent Name: _____ Title: _____

Physical Address: _____ City, State: _____ Zip: _____

Mailing Address: _____ City, State: _____ Zip: _____

Phone: (____) _____ - _____ Email: _____

DOB: _____ DL/ID#: _____

The undersigned applicant further certifies that if they are acting as an agent for an entity identified above, specifically:
(Initial at least one that applies)

_____ *A partner (if the Owner is a partnership);*

_____ *An Officer of the corporation, association, Limited Liability Company, nonprofit corporation listed above; or*

_____ *An agent of the above entity, and by my duties in my above listed title I have such responsibility that have the authority to represent the policy and direction of the entity in this matter.*

IF NONE OF THE ABOVE APPLY THEN YOU ARE NOT THE AGENT THAT SHOULD BE COMPLETING THIS APPLICATION. THIS APPLICATION MUST BE COMPLETED BY A PERSON WITH SUFFICIENT AUTHORITY LISTED ABOVE.

X _____

Agent Signature

Date

THE COUNTY OF KAUFMAN
STATE OF TEXAS

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities, this document is filed in the Deed Records of Kaufman 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 and guarantee by the TCEQ that the appropriate OSSF was installed.

II

An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code § 285.91 (12) will be installed on the property as described as: (enter legal description of property)

The property is owned by:

This OSSF must be covered by a continuous maintenance contract. All maintenance on this OSSF must be performed by an approved maintenance company, and a signed maintenance contract must be submitted to Kaufman County within 30 days after the property has been transferred.

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 Kaufman County.

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

TRI-COUNTY SEPTIC
Wastewater Recycling Specialists
PO Box 283
Royse City, TX 75189

Office 903-285-5255
Fax 877-273-4380
jack@triseptic.com
www.triseptic.com



Permit # _____ Duc Date: _____ Annual Inspection Agreement Price: \$ _____

Beginning Date: _____ Ending Date: _____ Manufacturer: _____



The County requests receipt of the agreement 30 days prior to the renewal date.

Service Policy

Term of Policy:

1. An inspection/service call every 4 months, which includes inspection, adjustments, and service of the mechanical and electrical components parts as necessary to ensure proper function. If any additional visits are necessary there will be an additional service charge.
2. If there is **NO ACCESS** to the on-site sewage facility (OSSF), there will be a **\$85 service charge to re-inspect system**, unless previously notified.
3. All **"CALL BEFORE"** customers will be notified the day prior to inspection via phone, voicemail or text. If there is **NO ACCESS** to the on-site sewage facility (OSSF), there will be a **\$85 service charge to re-inspect system**, unless previously notified.
4. An effluent quality inspection every 4 months consists of a visual check for color, turbidity, scum overflow, and examination for odor.
5. A sample shall be pulled from the pump tank every 4 months as described in the "SOLIDS REMOVAL" section to determine if there is an excess of solids in the treatment plant. If the test results determine a need for solid removal, the user will bear the cost and the responsibility for doing so.
6. User is responsible for keeping the chlorine in the chlorinator. If chlorine test reveals no chlorine, a grab test is required. User will be responsible for the cost.
7. If any improper operation is observed which cannot be corrected at that time, the user shall be notified immediately in writing of the conditions and the estimated date of correction.
8. All emergency calls will be visited within 24 hours and non-emergency calls within 72 hours.

Violations of Warranty

Includes shutting off electric current to the system for more than 24 hours, disconnecting the alarm system, restricting ventilation to the aerator, over loading the system above capacity, introducing excessive amounts of harmful matter into the system, or any other form of unusual abuse.

This policy does not include pumping of sludge from the unit if necessary. Your local Permitting Authority may require a service policy to be in effect at all times or the on-site sewage facility permit is void. Failure to maintain the permit requirements can result in fines, court cost, and penalties by the County and State regulatory agencies. Any fees for non-compliance are the responsibility of the homeowner.

This policy is effective when signed by the homeowner or homeowner's agent and accepted by Tri County Septic. Tri County Septic may terminate this contract for any reason at any time.

All materials installed during the contract will remain the property of Tri County Septic until full compensation for materials and labor has been received. Labor rates of \$60 per hour will be in effect to re-install any removed materials.

Inspection Agency:

Homeowner:

*Name: _____

*Home Owner Signature: _____

*Address: _____

*City _____ Zip: _____

Service By: Tri County Septic

*Phone# _____

Jack Self

*Email: _____

License # MP0001892/OS0033020

* Call or Text Before Inspection due to: Aggressive Dogs Locked Gates Gate Code _____

Immediately following inspection, the OSSF inspector will call primary number listed above to notify the inspection is complete.

Office Use Only:

Payment: Cash ___ Credit Card _____ Check # _____ Entered _____ Faxed _____ QB _____

Tri County Septic
Wastewater Recycling Specialists
PO Box 283 – Royse City, TX 75189
903.285.5255 – jack@triseptic.com – www.triseptic.com



Name _____ Date: _____



Address _____ Phone: _____

City _____ State: TEXAS Zip: _____

Installation/Modification Policy

Terms of Policy:

1. An installation or modification of an Aerobic Septic System will be installed according to the specifications and design provided by an engineer, registered sanitarian or installer.
2. Any changes to the design including utilities that were not accounted for, or any reason requiring design changes not accounted for during the bidding process may result in an increase in price. Add \$40 per additional sprayhead over two (2). Add \$4.50 per foot of additional distribution line over 200'. Add \$250 for timer. Add \$40 per each additional 6" riser over 12". Add \$200 for control panel C Channel stand.
3. Property owner will be responsible for calling 811 (dig test) prior to installation. These markings must not be tampered with.
4. Property owner is responsible for locating and exposing ALL private utilities. Homeowner will be responsible for cost of any damages or repairs needed during the time of installation.
5. Any removal of excavated materials, fence removal, utility relocation or repair, tree or limb removal, landscaping, sprinkler damage or any other damages that occur during installation will be at the expense of the property owner.
6. Property owner will not hold Tri County Septic or any of its subcontractors liable for damage to any landscaping, driveways, walkways or utilities in the area of excavation or areas used to obtain access to the installation area.
7. Backfill areas will be soft and can settle. In the event of settling of the backfill materials, DO NOT walk on when wet due to potential hazards until the materials have settled.
8. Property owner will be responsible for obtaining an electrical source for OSSF and contacting Tri County Septic for proper breaker and wire sizing if needed.
9. Property owner will operate the system in a responsible manner and report any defects to Tri County Septic to be evaluated. Owner's manual may be included and will be available upon request.
10. Property owner will provide true and proper information on house size, property size, number of occupants, etc. for properly sized system. In the event of system failure due to overloading, abuse, or not following proper usage guidelines of the septic system, property owner will assume all responsibility.
11. Two (2) year Inspection Agreement included with installation and payment. Access to the entire system needs to be accessible to inspector at all times.
12. Two (2) year Manufacturer's warranty on parts included with installation and payment. Warranty violations include shutting off electric current to the system for more than 24 hours, disconnecting the alarm system, restricting ventilation to the aerator, overloading the system above capacity, introducing excessive amounts of harmful matter into the system, or any other form of abuse.
13. Upon sale of the property, new owner should contact Tri County Septic with ownership change information to be provided to the county records office.
14. All materials installed during the contract will remain the property of Tri County Septic until full compensation for materials and labor has been received. Labor rates of \$85 per hour will be in effect to re-install any removed materials.

This policy becomes effective when signed by the Property Owner or their agent and accepted by Tri County Septic. Tri County Septic may terminate this contract for any reason at any time. I agree that all information provided to Tri County Septic is true and I agree with all terms and conditions. All payment is due in full prior to beginning excavation and installation. Check or Cash preferred. A 5% handling fee for credit will be applied. A cancellation fee of \$250, plus any expenses Tri County Septic has incurred for permits and design will be applied.

Property Owner or Agent signature: _____ Date: _____

Date: _____

Jack Self, Tri County Septic | License #MP0001892/OS0033020