PROCEDURE FOR OBTAINING AN ON-SITE SEWAGE FACILITY PERMIT

**REMOVE AND RETAIN THIS PAGE PRIOR TO SUBMITTING THE APPLICATION**

1. The Property Owner must fill out applications and pay required fees for On-Site Sewage Facilities and Floodplain Development.

2. Mandatory site evaluation must be conducted for each On-Site Sewage Facility.

3. If the system to be installed is a proprietary or nonstandard system, or certain other systems, it must be designed by a Registered Sanitarian or Professional Engineer.

4. The following planning materials must be completed in full and returned to the Taylor County Environmental Department for review and approval before an Authorization To Construct can be issued:

   (1) OSSF Application
   (2) Technical Information Sheet
   (3) Soil Evaluation and Site Plan (must be drawn to scale)
   (4) Detailed Plan of Proposed On-Site Sewage Facility (must be drawn to scale)

5. Upon approval of planning materials, an Authorization To Construct will be issued. The OSSF application is valid for twelve (12) months from the date of issuance.

6. Any system installation other than a standard absorption system will require that an Affidavit To The Public be filed on the property owner(s)’ deed before an Authorization To Construct will be issued.

7. Once the Authorization To Construct is issued, the On-Site Sewage Facility may be installed only according to the approved plan design.

8. After final inspection by the Taylor County Environmental Department, the property owner(s) will be issued a License To Operate the On-Site Sewage Facility.

9. The final grade shall be covered with vegetation fully capable of providing maximum transpiration. Evergreen bushes having shallow root systems may be planted in the drainfield to assist in water uptake. Grasses with dormant periods shall be over seeded to provide year-round transpiration.

NOTE: A REINSPECTION FEE OF $50.00 MUST BE PAID BY THE INSTALLER EACH TIME THE SYSTEM REQUIRES REINSPECTION.
ON-SITE SEWAGE FACILITY APPLICATION

Date: __________________________ Application Number: __________________________

Property Owner’s Name: __________________________

Current Mailing Address: __________________________

Telephone: (home) ______________ (cell) ______________ (work) ______________

Legal Description (COPY REQUIRED):

911 Site Address / Location: __________________________

Source of Water: Private Well _______; Public Water System (name): __________________________

Single Family Residence: Number of Bedrooms ___________; Number of Bathrooms ___________

Dwelling Area ______________ square feet

Institutional / Commercial: Type of Facility __________________________

Site Evaluator: ______________ Telephone Number: ______________ Certification Number: ______________

Designer: ______________ Telephone Number: ______________ Certification Number: ______________

Installer: ______________ Telephone Number: ______________ Certification Number: ______________

I Request: ______ I certify that this facility has or will have water saving devices such as low flow shower heads, low flow toilets and appliances that are designed with water saving features installed. I understand by requesting this credit my system size and the amount of wastewater disposed of will be reduced.

I Do Not Request: ______ I certify that this facility has or will have water saving devices such as low flow shower heads, low flow toilets and appliances that are designed with water saving features installed.

I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT. I UNDERSTAND THAT APPROVAL OF THIS APPLICATION IS REQUIRED BEFORE A PERMIT TO CONSTRUCT AN ON-SITE SEWAGE FACILITY CAN BE ISSUED. A LICENSE TO OPERATE AN ON-SITE SEWAGE FACILITY WILL BE ISSUED AFTER FINAL INSPECTION OF THE INSTALLATION BY THIS DEPARTMENT.

Signature of Owner: __________________________

FEES: ______ PERMIT APPLICATION FEE $200.00

TDH RESEARCH FEE $10.00

TOTAL FEE: $210.00

* AN AUTHORIZATION TO CONSTRUCT IS VALID FOR ONE CALENDAR YEAR FROM THE DATE OF IT'S ISSUANCE. IF THE INSTALLER DOES NOT REQUEST A CONSTRUCTION INSPECTION BY THE PERMIT AUTHORITY WITHIN ONE YEAR OF THE ISSUANCE OF THE AUTHORIZATION TO CONSTRUCT, THE AUTHORIZATION TO CONSTRUCT EXPIRES, AND THE OWNER(S) WILL BE REQUIRED TO SUBMIT A NEW APPLICATION AND PAY FEE BEFORE AN OSSF CAN BE INSTALLED.
Property owner(s): ___________________  Address: ___________________

The following information must be included with the design package for review by the Taylor County Environmental Department. Failure to include or address all of the following items may result in approval delays.

1. □ Site Evaluation: At least two soil borings/backhoe pits shall be taken in opposite ends of the area to be used for the soil absorption system, and shall be excavated to a depth of 2 feet BELOW the proposed excavation or to a restrictive horizon, whichever is less. A copy of the test results and a scale must be enclosed. The following information shall be included:
   □ A. Soil texture analysis. List texture type and class.
   □ B. Gravel analysis. List percentage and size of gravel. (Soils with greater than 30% gravel are unacceptable unless 80% of gravel is less than 5mm in size.)
   □ C. Depth of test. (Soils without at least 24 inches of soil beneath the proposed drainfield shall be deemed unsuitable.)
   □ D. Restrictive horizon evaluation
   □ E. Groundwater evaluation
   □ F. Topography
   □ G. Flood hazard
   □ H. Vegetation
   □ I. Easements and bodies of water (lakes, watercourses, etc.) must be identified.
   □ J. Location of all buildings (existing or proposed).
   □ K. All separations distances identified in Table X must be shown.
   □ L. All water wells on this site and neighboring properties

SITE EVALUATOR: ___________________  CERTIFICATION #: ___________________

   (signature)

2. □ Planning Materials: A copy of the construction drawing must be enclosed and shall include the following information:
   □ A. A detailed, legible site plan with boundary description (aerobic systems require scale drawings, legal description of the lot, an Affidavit to the Public, and Maintenance Agreement to be attached). Note: All systems require a scale drawing of site plan.
   □ B. The location of all buildings (existing or proposed) on the site plan.
   □ C. The size and location of the wastewater treatment units and disposal area (include width and depth). A cross section of the excavation must be included. (on aerobic systems, pump tank size and pump and alarm settings must be detailed).
   □ D. All water wells on this site and neighboring properties must be identified and located on the site plan.
   □ E. Easements and bodies of water (lakes, watercourses, etc.) must also be identified.
   □ F. All separation distances identified in Table X must be shown.

INSTALLER OR DESIGNER: ___________________  CERTIFICATION #: ___________________

   (signature)
DO NOT BEGIN CONSTRUCTION PRIOR TO APPLICATION APPROVAL. UNAUTHORIZED CONSTRUCTION CAN RESULT IN CIVIL AND OR ADMINISTRATIVE PENALTIES.

PROPERTY OWNER(S): ___________________________  SITE LOCATION: ___________________________

Professional design required? Yes ____  No ____  If yes, professional design attached? Yes ____  No ____

I.  SEWER (house drain):
    Type and size of pipe: ___________________________  Slope of sewer pipe tank: ___________________________

II. DAILY WASTEWATER USAGE RATE:  Q = ___________________________ (gallons per day)

III. TREATMENT UNIT:
    A.  SEPTIC TANK:
        Manufacturer: ___________________________
        Tank dimensions: ___________________________  Liquid depth (tank bottom to outlet): ___________________________
        Size required: ___________________________  Size proposed: ___________________________
    B.  AEROBIC:
        Manufacturer: ___________________________  Model #: ___________________________
        Size required: ___________________________  Size proposed: ___________________________
        Pretreatment tank: Yes ____  No ____
    C.  OTHER: ___________________________

IV. DISPOSAL SYSTEM:
    Type: ___________________________
    Area required: ___________________________  Area proposed: ___________________________

V. ADDITIONAL INFORMATION: (NOTE: This information must be attached for review to be completed.)

A. Site Evaluation
B. Planning materials

** The attached checklist details those items that must be addressed under each of these categories. **

INSTALLER OR DESIGNER SIGNATURE: ___________________________

REGISTRATION NUMBER: ___________________________  DATE: ___________________________
This page to be completed by installer.

SEPTEC TANK SCHEDULE (NO SCALE)

12" Cleanouts

Tank Shape: Round

(1) Tank Size: Gallons

<table>
<thead>
<tr>
<th>A = Inches</th>
<th>B = Inches</th>
<th>C = Inches</th>
</tr>
</thead>
</table>

Tank Manufacturer:

TYPICAL TRENCH CROSS SECTION - 4" PIPE AND GRAVEL - NO SCALE

if you are using other types of trenches or septic tank(s), make appropriate cross section drawings showing dimensions on back of this page.

No authorization to construct will be issued without cross section drawings.

TYPICAL TRENCH CROSS SECTION - LEACHING CHAMBER - NO SCALE
ON-SITE SEWAGE FACILITY
SOIL AND SITE EVALUATION REPORT

PROPERTY OWNER(S): ___________________________ SITE LOCATION: ___________________________

REQUIREMENTS:
(1) At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil boring or dug pits must be shown on the site drawing.
(2) For subsurface disposal, soil evaluations must be performed to a depth of at least two feet BELOW the proposed excavation excavation depth. For surface disposal, the surface horizon must be evaluated.
(3) Describe each soil horizon and identify any restrictive features on the form. Indicate depths where features appear.

<table>
<thead>
<tr>
<th>SOIL BORING NUMBER: One</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depth (feet)</td>
</tr>
<tr>
<td>0 -----</td>
</tr>
<tr>
<td>1 -----</td>
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<tr>
<td>2 -----</td>
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<td>3 -----</td>
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<td>5 -----</td>
</tr>
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<td>6 -----</td>
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<tr>
<td>7 -----</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>SOIL BORING NUMBER: Two</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depth (feet)</td>
</tr>
<tr>
<td>0 -----</td>
</tr>
<tr>
<td>1 -----</td>
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<td>2 -----</td>
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<td>6 -----</td>
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<tr>
<td>7 -----</td>
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</tbody>
</table>

PROPOSED EXCAVATION DEPTH: ____________ inches

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

Site Evaluator: ___________________________ Certification #: ____________ Date: ____________
Schematic of Lot or Tract

Show:
Compass North, adjacent street, property lines, property dimensions, location of building easements, swimming pools, water lines, and other surface improvements where known (drainage, patios, sidewalks). Location of existing or proposed water wells within 150 feet of property. Indicate slope or provide contour lines from the structure to the farthest location of the proposed soil absorption or irrigation area. Location of soil borings or dug pits (show location with respect to a known reference point). Location of natural, constructed, or proposed drainage ways (streams, ponds, lakes, rivers, high tide of salt water bodies) water impoundment areas, cut or fill bank, sharp slopes and breaks.

Lot Size: _______ acres Scale: 1” = _______ feet

SITE DRAWING
MUST BE DRAWN TO SCALE

Features of Site Area

<table>
<thead>
<tr>
<th>Feature</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Presence of 100 year flood zone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Presence of adjacent ponds, streams, water impoundments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Existing or proposed water well in nearby area</td>
<td></td>
<td></td>
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<tr>
<td>Organized sewage service available to lot or tract</td>
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<td></td>
</tr>
</tbody>
</table>

Site Evaluator Name (please print): ____________________________

(Circle One: RS, PE, DR, Installer II) (Signature)

Date: __________________________  Site Evaluator Certification #: __________________________