MADISON COUNTY RURAL DEVELOPMENT



101 West Main – Ste B-22 Madisonville, TX 77864 (936)348-2152 Cell (575) 218-6976 Tom McWhorter #OS0038767 tom.mcwhorter@madisoncountytx.org



DESIGNATED REPRESENTATIVE – Tom McWhorter

INSTALLER 1 – May install conventional system and ET beds.

<u>INSTALLER 2</u> – May install conventional systems, aerobic systems, ET beds, etc.

REGISTERED SANITARIAN (RS) – Evaluates property owners' topography, performs soil samples, and evaluates which system is needed for the type of soil. A (RS) can also give a plan of design for ET beds, conventional systems, aerobic systems or any other systems licensed and approved through TCEQ. This service is charged and set up by the (RS) and is separate from the permit cost and in some cases the installation cost.

<u>SITE EVALUATOR (SE)</u> – Evaluates property owners' topography, performs soil samples, and evaluates which system is needed for the type of soil. A (SE) can also give a plan of design for ET beds, conventional systems. This service is charged and set up by the (SE) and is separate from the permit cost and in some cases the installation cost.

FOR INSTALLATION OF YOUR SEPTIC SYSTEM BY A LICENSED INSTALLER:

- 1. Contact either a Site Evaluator (SE) or Registered Sanitarian (RS) and have a site evaluation performed on the property. The site evaluation will let you know what type of septic system is needed for your property. The (SE) or (RS will be able to give you a plan of design for your system as well.
- 2. Once you know whether you must have a conventional, aerobic, or another type of system, contact an installer, licensed through the Texas Commission on Environmental Quality.
- 3. Contact the Designated Representative (DR) and submit the site evaluation and the plan of design for approval BEFORE installation begins. This is usually done by the licensed installer.
- 4. Contact the permitting office at 101 West Main, Suite B-22 to obtain a permit to construct a new septic system for \$400.00 (residential) or \$600.00 (commercial). If you will be installing an aerobic system, an affidavit will need to be filled out and signed. The property owner should then contact the installer and let them know that approval has been given to construct.
- 5. From this point, the installer will keep the (DR) informed as to the progress of the installation. The installer will contact the (DR) for final inspection.
- 6. Upon final inspection, a notice of approval to operate the On-Site Sewage Facility will be issued by the Designated Representative.

For Aerobic Systems Only

Per TCEQ requirements under Chapter 285.7 of the OSSF Rules & Regulatory Guidelines, a two-year maintenance agreement will be included in the installation of the aerobic system. Also under this regulation, the landowner must keep a maintenance agreement with a company for the maintenance and upkeep of the system throughout the duration of the system. These guidelines are effective February 4, 1997.



Madison County Rural Development 101 West Main - Ste B-22

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APPLICATION FOR ON-SITE SEWAGE FACILITY NEW CONSTRUCTION TCEQ REGION #9

NAME OF APPLICANT:		PHONE: _	
MAILING ADDRESS:			
911 ADDRESS (IF DIFFERENT):			
LEGAL DESCRIPTION: SEC	BLOCK	LOT	DATE
COPY OF SURVEY ATTACHED-()	YES () NO	SUBDIVISION:	
OTHER THAN SUBDIVISION: ACRE	EAGE	SURVEY_	
TYPE OF RESIDENCE: () STRUCT			
SOURCE OF WATER: () PRIVATE	WELL () PUBL	IC WATER SUPPLY	
SINGLE FAMILY RESIDENCE: # OF	BEDROOMS	BATHS	SQ.FT
ESTIMATED USAGE - GALLONS OF			
COMMERCIAL/INSTITUTIONAL (IN	CLUDING MULTI-F	AMILY RESIDENCES) TY	PE:
#OF EMPLOYEES/OCCUPANTS/UNI	TS:	DAYS OCCUPIED PI	ER WEEK:
SITE EVALUATOR:			
	CENSE# (PE OR RS):		
PHONE NUMBER:			
INSTALLER:	R	EGISTRATION #:	
PHONE NUMBER:			
I certify that the above statements are true and communication on ENVIRONMENTAL QUAL described property for the purpose of lot evaluat facility will be granted following successful inspection of the commission's On-Site Faci	LITY DESIGNATED ion and inspection of the installed lity Rules, TAC30, Ch	REPRESENTATIVE (DR) to the on-site sewage facility and system which indicates that that the paper 285.	enter upon the above that a permit to operate the
FEE RECEIPT NUMBER		_	

Date Perfo	rmed:						
Property Lo	cation:		Proposed Excavation	Proposed Excavation Depth:			
Name of Site Evaluator:			Registration Number:	Registration Number:			
	wo soil exc		ed on the site, at opposite en ng or dug pits must be shown				
feet belov	orface dispo w the propo evaluated.	osal, soil evaluations mus sed excavation depth. Fo	t be performed to a depth of a surface disposal, the surface	at least two ce horizon			
	each soil h here featur		strictive features on the form	. Indicate			
Soil Boring	Number:						
Depth	Textural		Drainage	Restrictive			
(Feet)	Class	Structure (if applicable)	(Mottles/Water Table)	Horizon	Observations		
0							
	İ						
2	1						
1 2 3	1			1			
	1						
<u>4</u> 5	1						
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Soil Boring	Number:						
Depth	Textural		Drainage	Restrictive			
(Feet)	Class	Structure (if applicable)	(Mottles/Water Table)	Horizon	Observations		
0							
1]						
1 2 3	1						
2	1	1		1			
P		1					
3 4 5							

Site Evaluator Information Applicant Information Name: _ Company: Address: Address: _____ City:____ State: _____ Zip Code: ____ ____ State: ___ City:_____ Zip Code: _____ Phone: ____ Phone: _____ Fax: ____ Installer Information: **Property Location:** Lot:_____ Block: _____ Subdivision: _____ Name: _____ Company: _____ Address: ___ Address: ____ County: Madison Unincorporated Area: Y/N _____ Zip Code: _____ City: ___ City: __ ____ State: _____ Zip Code: _____ Additional Informatio: ___ _ Phone: _____ _____ Fax:______ SCHEMATIC OF LOT OR TRACT Show: * Compass North, adjacent streets, property lines, property dimensions, location of buildings, easements, swimming pools, water lines and other structures where known. * 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 or salt water bodies) water impoundment areas, cut or fill bank, sharp slopes and breaks. Lot Sizes: _____ Acres SITE DRAWING **FEATURES OF THE SITE AREA** Presence of 100 year flood zone Yes 🔲 Presence of upper water shed Yes 🔲 Presence of adjacent ponds, streams, water impoundments No \square Yes 🔲 No 🔲 Existing or proposed water well in nearby area Organized sewage service available to lot or tract