

**On Site Sewage Facility Information Sheet
COLORADO COUNTY**

Owner To Fill In:

Date: _____

Name: _____

Site Address: _____ City: _____ Zip: _____

Current Mail Add.: _____ City: _____ Zip: _____

Home Ph#: _____ Work Ph#: _____

Cell Ph#: _____ Fax Ph#: _____

Payment Option: Personal Check: _____ Cash: _____ Lender: _____

Visa or MasterCard (add 4% to bid price): _____

To be filled out by person meeting owner.

Harness: Flex: _____ Post: _____ What length: _____

4" pipe needed: _____ 1" or 1-1/4" pipe needed: _____

Sign in yard: _____ Map made: _____ Job flagged: Y / N

Lines to cross: telephone, gas, electrical, etc. _____

Notes:

Customer instructions for completing septic system paperwork.

- Pg. 1a – Colorado Co. application - Leave blank.
- Pg. 1b – Colorado Co. application - Fill out all information.
- Pg. 1c – Colorado Co. application - Leave blank.
- Pg. 1d – Colorado Co. application - Read, sign and date.
- Pg. 1e – Colorado Co. application - Read, sign and date.
- Pg. 2 – Norweco Contract - Customer signature & Date required
- Pg. 3 – Affidavit - Sign and Print name of property owner.

NOTE: A copy of your property survey needs to be returned with papers, preferably a plot plan.

- Pg. 4 – Installation Contract - Read notes, Sign and Date.

NOTE: Duplicate copy is for your records.

Please return all originals to our office. The brochure and system design are for you to keep.

If you have any questions or require additional information please feel free to call us anytime at 1-800-841-3447.

CUSTOMER CHECKLIST:

- 1. Survey of Property or Plot Plan
- 2. Tax Receipt or Deed for Legal Description and Proof of ownership
- 3. Well Log (if requested)
- 4. Correct 911 Address (Required for Floodplain)
- 5. Floodplain Signoff

BELOW FOR OFFICE USE ONLY.

Before the application is submitted to the D.R. the following is needed.

- 1. Survey of property.
- 2. Legal description is to be filled out on all paperwork.
- 3. Affidavit to the public filed in the county clerk's office
- 4. Well log.
- 5. Maintenance contract.
- 6. Check for permit.
- 7. Site Evaluation.
- 8. Engineered design
- 9. Proposal Sheet
- 10. Flood Plain Signoff.

AEROBIC LPD STANDARD
CHAMBER MP 9 MP 11

DATE & TIME: _____
INSTALLER: _____
CELL NO: _____

**COLORADO COUNTY OSSF OFFICE
REQUIRED INFORMATION CHECK LIST
FOR ON-SITE SEWAGE FACILITY (OSSF) LICENSE**

DATE _____ OWNER _____ PERMIT # _____

- _____ 1. ASSIGNED 911 PHYSICAL ADDRESS
- _____ 2. PROOF OF OWNERSHIP (CURRENT PROPERTY TAX RECEIPT OR 1ST PAGE OF PROPERTY DEED.
- _____ 3. LOCATION MARKED ON FEMA MAP
- _____ 4. ELEVATION CERTIFICATE (IF IN FLOODZONE)
- _____ 5. SOIL ANALYSIS REPORT
- _____ 6. TYPE OF SYSTEM REQUIRED
- _____ 7. SEPTIC SYSTEM DESIGN
- _____ 8. NOTARIZED & RECORDED AFFIDAVIT (ONLY IF AEROBIC SYSTEM IS REQUIRED)
- _____ 9. AEROBIC MAINTENANCE CONTRACT REQUIRED
- _____ 10. 911 ADDRESS IS VISABLY POSTED FROM THE ROAD
- _____ 11. AUTHORIZATION TO CONSTRUCT
- _____ 12. FINAL INSPECTION OF SYSTEM
- _____ 13. FINAL SEPTIC PERMIT ISSUED
- _____ 14. ALL INFORMATION HAS BEEN ENTERED INTO SAFE ON _____, 2010 BY _____

APPLICATION NO. _____

**COLORADO COUNTY OSSF OFFICE
305 RADIO LANE, SUITE 105
COLUMBUS, TX 78934**

APPLICATION FOR ON-SITE SEWAGE FACILITY (OSSF) LICENSE

Applicant applies for a license to construct an On-Site Sewage Facility in the unincorporated area of Colorado County, Texas, as required by Rules of Colorado County, Texas, for On-Site Sewage Facilities

PLEASE PRINT ALL REQUIRED APPLICANT INFORMATION

I. APPLICANT INFORMATION:

(FIRST NAME)	(MIDDLE INITIAL)	(LAST NAME)
IF BUSINESS – NAME OF COMPANY		

II. CURRENT MAILING ADDRESS:

P.O. BOX OR STREET NO.	STREET NAME	CITY	STATE TX	ZIP
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PHONE NUMBERS:

WORK PHONE (EXT.)	HOME PHONE	FAX	CELL PHONE
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III. 911 PHYSICAL LOCATION OF PROPERTY:

STREET NO.	STREET NAME	CITY	ZIP
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NAME OF SUBDIVISION _____

APPLICATION NO. _____

COLORADO COUNTY OSSF OFFICE
305 RADIO LANE, SUITE 105
COLUMBUS, TX 78934
979-732-2435 PHONE
979-732-5883 FAX

IV. WATER SUPPLY INFORMATION:

SOURCE OF WATER: _____ WELL _____
NAME OF DRILLING CO. _____
_____ PUBLIC WATER SUPPLY _____
NAME OF COMPANY _____

V. STRUCTURE INFORMATION:

(A) DWELLING INFORMATION:

- RESIDENTIAL/ SINGLE FAMILY
- COMMERCIAL/MULTI FAMILY

TYPE OF BUSINESS: _____
NUMBER OF EMPLOYEES: _____

- MANUFACTURED MOBILE HOME
- BARN/STORAGE BUILDING
- BARN/CONDO

SQ. FT. OF LIVING AREA _____
Q-GPD (GALLONS PER DAY) _____

YEAR BUILT _____
NUMBER OF BEDROOMS _____
NUMBER OF FULL BATHS _____

(B) CHECK TYPE OF FIXTURES:

WATER SAVING: _____
NON-WATER SAVING _____

(C) SEWAGE TREATMENT

Installing New System () Replacing Existing System ()

APPLICATION NO. _____

**COLORADO COUNTY OSSF OFFICE
305 RADIO LANE, SUITE 105
COLUMBUS, TX 78934
979-732-2435 PHONE
979-732-5883 FAX**

**VI. ENGINEERING PLAN AND SPECIFICATIONS IN SUPPORT OF THIS
APPLICATION SUBMITTED:**

SITE EVALUATOR: _____ **TCEQ LIC#** _____

ENGINEER/SANITARIAN: _____ **TCEQ LIC#** _____

SYSTEM INSTALLER: _____ **TCEQ LIC#** _____

I authorize Colorado County, Texas, Texas Commission on Environmental Quality and their agents to enter the described property during daylight hours to inspect for On-Site Sewage Facilities, for any reason consistent with the water quality program of the Texas Natural Resource Conservation Commission.

SIGNATURE OF APPLICANT: _____

DATE: _____

APPLICATIONS ACCEPTED BY: _____

DATE: _____

PLEASE NOTE:

THE FOLLOWING MUST BE INCLUDED WITH APPLICATION TO PROCESS THE ON-SITE SEWAGE FACILITY LICENSE:

- 1. FEE**
- 2. DEED OR PROPERTY TAX RECEIPT**
- 3. SITE EVALUATION/DRAWING**
- 4. DESIGN**
- 5. AFFIDAVIT TO PUBLIC (if applicable)**
- 6. MAINTENANCE CONTRACT (if applicable)**

APPLICATION NO. _____

**COLORADO COUNTY PERMIT OFFICE
305 RADIO LANE, SUITE 105
COLUMBUS, TX 78934
979-732-2435 PHONE
979-732-5883 FAX**

I CERTIFY THAT ALL THE INFORMATION GIVEN IN PAGES 1-5 OF THE ATTACHED STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

AUTHORIZATION IS HEREBY GIVEN TO THE COLORADO COUNTY OSSF AUTHORITY AND THE TEXAS NATURAL RESOURCES CONSERVATION COMMISSION TO ENTER UPON THE DESCRIBED PROPERTY FOR THE PURPOSE OF LOT EVALUATION AND INSPECTION OF THE ON-SITE SEWAGE FACILITY. A PERMIT TO OPERATE THE FACILITY WILL BE GRANTED FOLLOWING A SUCCESSFUL INSPECTION OF THE INSTALLED SYSTEM WHICH INDICATES THAT THE SYSTEM WAS INSTALLED IN COMPLIANCE WITH THIS COMMISSION'S ON-SITE SEWAGE FACILITY RULES, TAC 30, CHAPTER 285.

ACKNOWLEDGEMENT OF DISCLAIMER BY APPLICANT

DATE

Applicant - Please print name

DESIGNATED REPRESENTATIVE

DATE

KEEP THIS FOR YOUR INFORMATION ONLY

THE FOLLOWING SHOULD NOT BE USED OR DISPOSED INTO THE SYSTEM

Greases, fats, oils, pesticides, herbicides or any other toxins.

Garbage disposal should be used sparingly. Dispose of food waste, grease, etc., in the solid waste bin. Food waste represents additional loading the Aerobic Treatment Plant would have to digest, increasing pump out intervals.

Paints, household chemicals – automobile fluids – do not discard mop water into the system.

Non-biodegradable items such as cigarette butts, disposable diapers, feminine hygiene products, condoms, hair, coffee grounds, rags, paper towels, bandages, etc.

Wash loads must be spread out over the week. Once a week multiple loads or half loads are not recommended.

Citrus products, oranges, lemons, grapefruit, etc.

Additives for septic systems – they do no more harm than good.

Hydraulic overload due to excessive water from other sources.

Home brewery water – strong medicines, antibiotics. Anti-bacteria soaps should be avoided.

Strong disinfectants or bleaches. Laundry products such as Lysol, Pine-Sol, Tidy Bowl, or discharge from water softeners, Drano.

Recommended detergents are powdered, low-suds, low phosphates and biodegradable, washing soda ingredients such as Fain, Arm & Hammer, Fresh Start and Dash Bright. Fabric softener dryer sheets are recommended.

Recommended cleaning products are non-chlorine, biodegradable and non-toxic such as Ivory & Sunlight dish washing liquids, Cascade & Sunlight powdered dishwasher detergents; Comet & Biz powdered cleaners, baking soda.

SYSTEMS REQUIRING PUMP OUTS DUE TO THE ABOVE VIOLATIONS ARE NOT COVERED BY THE WARRANTY.

Hurt's Wastewater Management, Ltd.
John P. Hurt -Norweco Certified Technician No. 5208134
PO Box 662, Ganado, Texas 77962
2450 A Hwy 172 South
1-800-841-3447

NORWECO SINGULAIR
Initial Service Contract

Owners Name: _____
Address: _____ Effective Date: _____ Per final inspection
Street _____
Expiration Date: _____
City State Zip _____
Telephone No: _____ System Installed On: _____
Directions: _____

This initial two year service contract for the Singulair Bio-Kinetic wastewater treatment system located at the site described above is intended to enable the owner to economically obtain regular service inspections for the Singulair unit, as well as non-scheduled or special service that may be required by a qualified technician. When this contract is in force, the owner will not be charged for any routine service labor. Under the terms of this service agreement, a technician will regularly inspect, test, and report the plant at four month intervals. The site will be visited following each special owner service request within a 48-hour period. The contract shall remain in effect for a period of two years, as specified in the effective and expiration dates listed above. All components of the Singulair unit are covered for a full two years warranty as determined by the dates above. The components include: concrete tanks, aerator, discharge pump, all electrical components installed as part of the system, filter / chlorination assembly, sprinkler heads, and piping. This service contract does not include the pipe from the structure to the tanks or any necessary sludge pumping that may need to occur. It shall also be understood that the homeowner is responsible for maintaining the chlorine in the system. The Texas Commission on Environmental Quality rules requires a service policy to be in effect at all times or the on-site sewage facility permit is considered void. All commercial systems will have a BOD and TSS test performed annually. Additional charges will be billed to the owner for the BOD and TSS test. The homeowner agrees to provide Hurt's Wastewater Management Ltd. with all gate combinations, keys, etc. to gain access to the system for the purpose of conducting routine inspections or service calls and to immediately notify with any changes and provide the new combinations or keys.

VIOLATION OF WARRANTY includes shutting off the electric current to the system for more than twenty-four hours, disconnecting the alarm system, restricting ventilation to the aerator, overloading the system above its rated capacity, or introducing excessive amounts of harmful matter into the system, or any other form of unusual abuse.

Hurt's Wastewater Management, Ltd.

Date

Customer Signature

Date

THE COUNTY OF COLORADO
STATE OF TEXAS

**AFFIDAVIT TO THE PUBLIC
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 Colorado County, Texas.

I

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (commission) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), §5.012 and §5.013, gives the commission 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 commission, under the authority of the TWC and 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 commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

II

An OSSF requiring a continuous service policy, according to 30 Texas Administrative Code §285.91(12) will be installed on the property(ies) described and that this recorded affidavit affirms that the property(ies) will not be sold separately, subdivided, or re-platted without prior approval from the Colorado County Environmental Health Department.

1) Legal Description: _____

2) Legal Description: _____

_____ Check here if additional properties are involved. Provide additional legal descriptions on a separate sheet labeled "Attachment A".

Physical address(es): _____

The property is owned by:

Owner: _____

The OSSF shall be covered by a continuous service policy. All service on this OSSF must be performed by an approved maintenance provider, and a signed continuous service policy must be submitted to Colorado County within 30 days after the property has been transferred.

Upon any sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from Colorado County.

WITNESS BY HAND(S) ON THIS _____ DAY OF _____.

(Owner(s) signature(s))

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS _____ DAY OF _____.

Notary Public, State of Texas

Revised September 2008

Hurt's Wastewater Management, Ltd.
P.O. Box 662 – Ganado, TX 77962
(800) 841-3447- Fax (361) 771-3452

Installation Contract

Installation Prices: Include appropriate trash and pump tank sizes.

600 gpd Norweco Aerobic Unit w/ 890 gal. pump tank 600 gpd w/ drip irrigation
750 / 1000 / 1250 / 1500 gpd Norweco Aerobic Unit

Site evaluation / Design / Permit: Total _____ John Hurt _____
(Good for 60 days)

- Note: **This is a dry bid only.** In the event the job site is not accessible due to the weather conditions, there will be an additional charge to mud the system in. Either use of track hoe to dig and set tanks or use of mats to drive truck in. Additional amount charged subject to severity of location.
- Note: The above prices are based on the home having one stub out and the tanks being located within 20' of the stub out. If there is more than one stub out, there will be an additional charge \$50.00 per stub out plus \$5.00 per foot to connect the pipe. In the event of multiple stub outs and the stub out being positioned such as to require the installation of a lift station, there will be additional charges.
- Note: An additional charge of \$250.00 for Risers will be added if stub outs are more than 24"
- Note: **Owners electrician is responsible for bringing 30amp 110 circuit (for 600 gpd only) within 5' of stub out.** Hurt's will provide 15' of electrical, however extra wire and conduit will cost \$6.00 per foot.
- Note: **Excess dirt will be left stockpiled on job site.**
(Hurt's not responsible for damaging any unmarked underground lines)
- Note: **Homeowner or Builder** is responsible for water supply to fill tanks, as well as the removal and/or replacement of fences or structures.
- Note: **Hurt's is not responsible for back filling around tanks after dirt settles.** One load of sand provided by Hurt's to be used for 4" pad under tanks and filling around 4" pipe from house.
- **Payment in full required day of installation. Contract is with Hurt's and homeowner. If payment is coming from the builder the homeowner is responsible for making sure Hurt's receives that payment.**
Visa / MasterCard / accepted at Hurt's office only. If used there will be an additional charge.

Customer Signature: _____ Date Required: _____

Hurt's Wastewater Management, Ltd.

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Customer Signature: _____ Date Required: _____

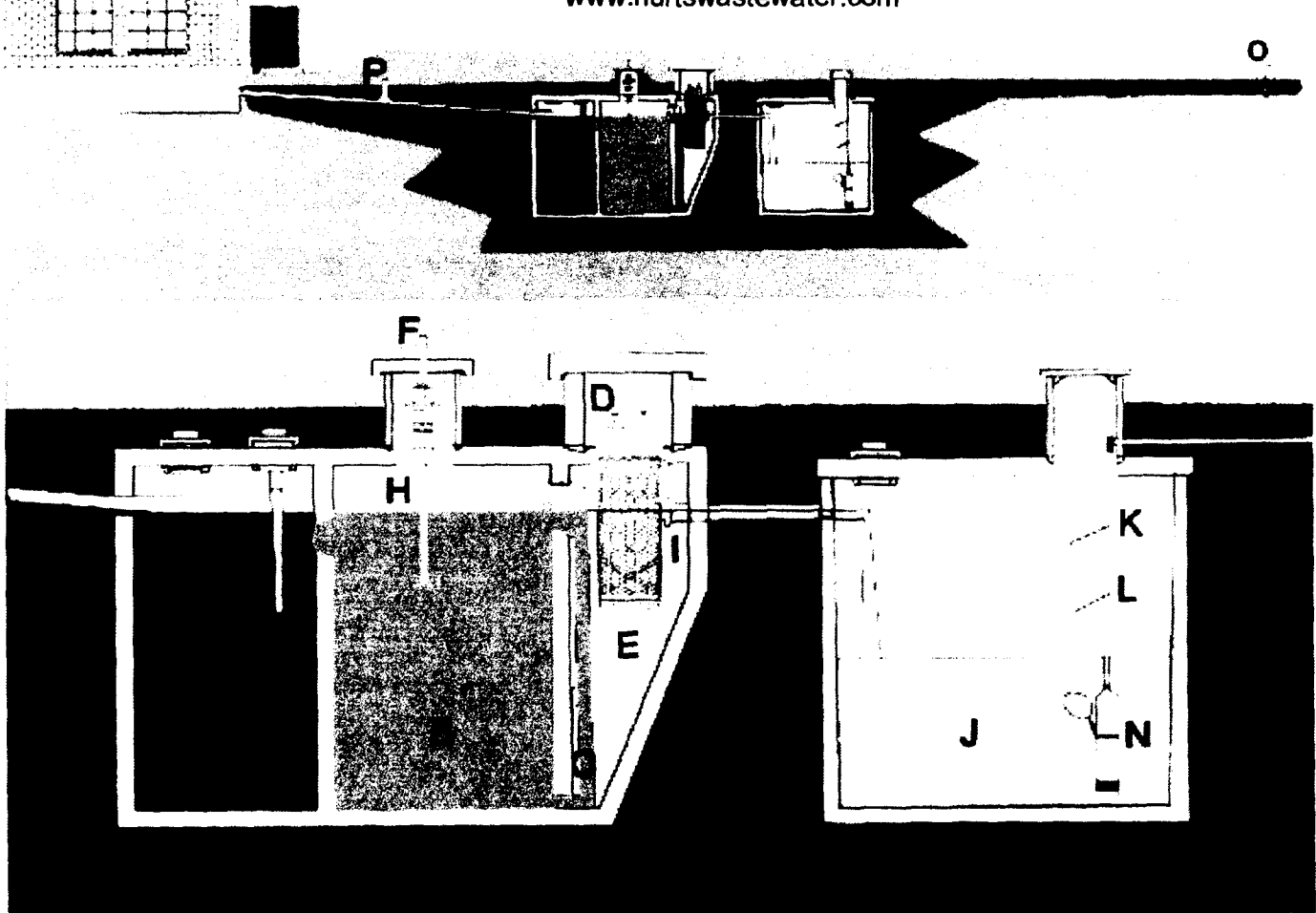
HURT'S WASTEWATER MANAGEMENT, LTD.

John P. Hurt – Norweco Certified Technician No. 5208134

P.O. Box 662 – Ganado, TX 77962

Bus: (800) 841-3447 - Fax: (361) 771-3452

www.hurtswastewater.com



A – Pretreatment Chamber

B – Extended Aeration Chamber

C – Sludge Return

D – Chlorination System

E – Clarification Chamber

F – Fresh Air Vent

G – Inspection Cover

H – Aerator

I – Filter Assembly

J – Pump Chamber

K – Alarm Float

L – Override Float

M – On/Off Float

N - Pump

O - Sprinkler

P – Clean Out

NOTE: Total System Capacity – 1,300 Gallons
Total Capacity – 889 Gallons

RATED CAPACITY: 600 Gallons Per Day