

**On Site Sewage Facility Information Sheet  
HARRIS 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): \_\_\_\_\_

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**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. 1 – Harris County application – Fill out owner information, sign and date for Owner Signature

Pg. 2 – Harris Co. Acknowledgement App. Sign and Date.

Pg. 3 – Sign and Date Owner Signature

Pg. 4 – Norweco Contract - Customer signature & Date required

Pg. 5 – 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. 6 – 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

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### **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.

HARRIS COUNTY PUBLIC INFRASTRUCTURE DEPARTMENT – ENGINEERING DIVISION  
10000 NORTHWEST FREEWAY – SUITE 102  
HOUSTON, TX 77092-8620  
(713) 956-3000

REVISED RULES OF HARRIS COUNTY, TEXAS FOR ON-SITE SEWERAGE FACILITIES

**APPLICATION FOR PERMIT (Complete All Sections)**

TO THE HARRIS COUNTY ENGINEER:

The undersigned applicant (property owner) hereby makes application for a permit to construct an on-site sewerage facility in the unincorporated area of Harris County, Texas as required by THE REVISED RULES OF HARRIS COUNTY, TEXAS FOR ON-SITE SEWERAGE FACILITIES.

DAY PHONE: \_\_\_\_\_

PROPERTY OWNER'S NAME: \_\_\_\_\_ ALT PHONE: \_\_\_\_\_

CURRENT MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONSTRUCTION SITE ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_ SECTION: \_\_\_\_\_ BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_ RESERVE: \_\_\_\_\_

IF NOT IN A SUBDIVISION:

SURVEY NAME: \_\_\_\_\_ ABSTRACT NO. \_\_\_\_\_ TRACT NO. \_\_\_\_\_

APPLICANT IS:  OWNER  LEASEE  OTHER (If other, please specify Name, Address, and Phone.)

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

WATER SUPPLY:

PUBLIC: (Name of System) \_\_\_\_\_  COMMUNITY  INDIVIDUAL (Existing)  INDIVIDUAL (Proposed)

ENGINEER OR SANITARIAN:

Engineering Plans and specifications in support of this application submitted by:

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

**APPLICANT MUST SUBMIT THE FOLLOWING:**

1. Metes and Bounds description (survey), if not in a recorded subdivision. (1 Copy)
2. Site Evaluation (1 Original)
3. Plan of Site & Disposal System (3 Sets – 1 Original & 2 Copies)
4. Affidavit – Notarized (1 Original)
5. Acknowledgement of Testing Requirements
6. Flood Insurance Rate Map with site accurately located.

AUTHORIZATION is hereby given to Harris County, Texas, the Texas Commission on Environmental Quality, the Texas State Department of Health and to their agents, or designees, singularly or jointly, to enter upon the above described property during daylight hours for the purpose of inspecting the on-site sewerage facilities, or for any reason consistent with the water quality program of the Texas Commission on Environmental Quality and the Texas Department of Health. I also acknowledge that INSPECTOIN OF THE SEWERAGE SYSTEM IS REQUIRED PRIOR TO ALL COMPONENTS BEING COVERED. TO REQUEST INSPECTION, A TWENTY-FOUR (24) HOUR ADVANCE NOTICE MUST BE GIVEN TO THE ENGINEERING DEPARMTMENT AT (713) 956-3035.

OWNER'S SIGNATURE \_\_\_\_\_ PRINTED OWNER'S NAME \_\_\_\_\_ DATE \_\_\_\_\_

**FOR COUNTY USE ONLY**

MINIMUM TANK SIZE: \_\_\_\_\_ GALLONS MINIMUM ABSORPTION AREA: \_\_\_\_\_ SQ FT MAXIMUM GPD: \_\_\_\_\_ GPD

TYPE OF SYSTEM PROPOSED: \_\_\_\_\_ SQUARE FOOTAGE OF BUILDING: \_\_\_\_\_ SQ FT CT: \_\_\_\_\_

SEWERAGE APPLICATION RATE: \_\_\_\_\_ SOIL CLASSIFICATION: \_\_\_\_\_

INSPECTIONS: S S2 ULF WW SPECIAL REQUIEMENTS: ULF SSC INS PLANS FLTANK WLOG WWPLUG

FLOOD PLAIN STATUS: A B F DEV PERMIT # \_\_\_\_\_ OSSF PERMIT # \_\_\_\_\_

APPLICANT NO. \_\_\_\_\_ REQUEST NO. \_\_\_\_\_ PROPERTY NO. \_\_\_\_\_

PLANCHECKER: \_\_\_\_\_ APPROVED BY \_\_\_\_\_ DATE: \_\_\_\_\_

**ACKNOWLEDGMENT OF TESTING REQUIREMENTS  
FOR AN ON-SITE SEWAGE FACILITY USING PROPRIETARY,  
SECONDARY, OR NON-STANDARD TREATMENT SYSTEMS**

I, \_\_\_\_\_, recipient of a license (No. 2-\_\_\_\_\_) to operate this on-site sewage facility that uses proprietary/secondary/non-standard treatment on the property I own that is located at \_\_\_\_\_ hereby acknowledge and agree that I must:

1. Employ, by means of an initial two-year prepaid maintenance contract, a wastewater operator certified by the State of Texas;
2. Employ a wastewater operator during the entire operational life of the said on-site sewage facility;
3. Assure that the wastewater operator provides the testing of the sewage effluent on the schedule provided below and sends the required report to the Harris County Public Infrastructure Department - Engineering Division, Permit Group:
  - a. **BOD<sup>5</sup> - Annually**
  - b. **TSS - Annually**
  - c. **Chlorine or Fecal Coliform - Quarterly for Residential  
Monthly for Commercial**
  - d. **pH - Quarterly for Residential Monthly for Commercial**
4. Operate this system in strict conformance with sewage effluent discharge standards promulgated by the Texas Commission on Environmental Quality (T.C.E.Q.). See Table IV attached.

I further understand that my failure to strictly abide by the above conditions could result in filing of a complaint with a Justice of the Peace Court and that the Court, if I am found guilty, could assess me a fine of up to \$200.00 per day for each day the violation exists.

The start-up date of the facility will mark the anniversary dates of testing and reporting.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Licensee & Property Owner

\_\_\_\_\_  
Printed Name



AFFIDAVIT TO THE PUBLIC

COUNTY OF HARRIS §
STATE OF TEXAS §

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_ who, after being by me duly sworn, upon oath states that he/she is the owner of record or person in possession of that certain tract or parcel of land lying and being situated in Harris County, Texas, and being more particularly described as follows:

Property No. (For County Use Only): \_\_\_\_\_

Septic License No. (For County Use Only): \_\_\_\_\_

Subdivision/Survey: \_\_\_\_\_

Section/Abstract No. \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Street Address: \_\_\_\_\_

The undersigned further states that an on-site wastewater treatment system has been licensed in accordance with the permitting provisions of the Harris County Public Infrastructure Department Engineering Division, Permit Group as signified by License No. \_\_\_\_\_ (For County Use Only)

The following conditions are set forth in said license:

- 1. If said system is a subsurface type on-site sewerage facility the undersigned agrees to take immediate and corrective measures to alleviate any surfacing of sewage effluent upon receipt of notice to do so by the Engineering Division representative.
2. If said system uses a proprietary, secondary, or non-standard treatment system, the undersigned agrees to enter into a maintenance agreement with an approved maintenance company for service and repairs to the wastewater system.

Failure to abide by the above stated conditions constitutes a violation of the Revised Rules of Harris County, Texas for On-Site Sewerage Facilities and will result in the filing of a complaint with the Justice of the Peace Court having jurisdiction in the area where the offense occurs.

Further, the undersigned states that he/she will, upon any sale or transfer of the above described property, request a transfer of the license to operate such system to the buyer or transferee. Any buyer or transferee is hereby notified that a maintenance contract with an approved maintenance company will be required for use of any system using proprietary, secondary, or non-standard treatment of wastewater.

WITNESS MY/OUR HAND(S) on this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_\_.

(Property Owner's Signature) DATE

(Print Property Owner's Name)

SWORN TO AND SUBSCRIBED BEFORE ME on this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_\_

by \_\_\_\_\_

(Print Property Owner's Name)

SEAL

Notary Public, State of Texas
My Commission Expires \_\_\_\_\_

NOTE: RECORDER MAIL TO: HARRIS COUNTY PUBLIC INFRASTRUCTURE DEPARTMENT - ENGINEERING DIVISION, PERMIT GROUP, 10000 NORTHWEST FREEWAY SUITE 102, HOUSTON TX 77092-8620.

**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: \_\_\_\_\_

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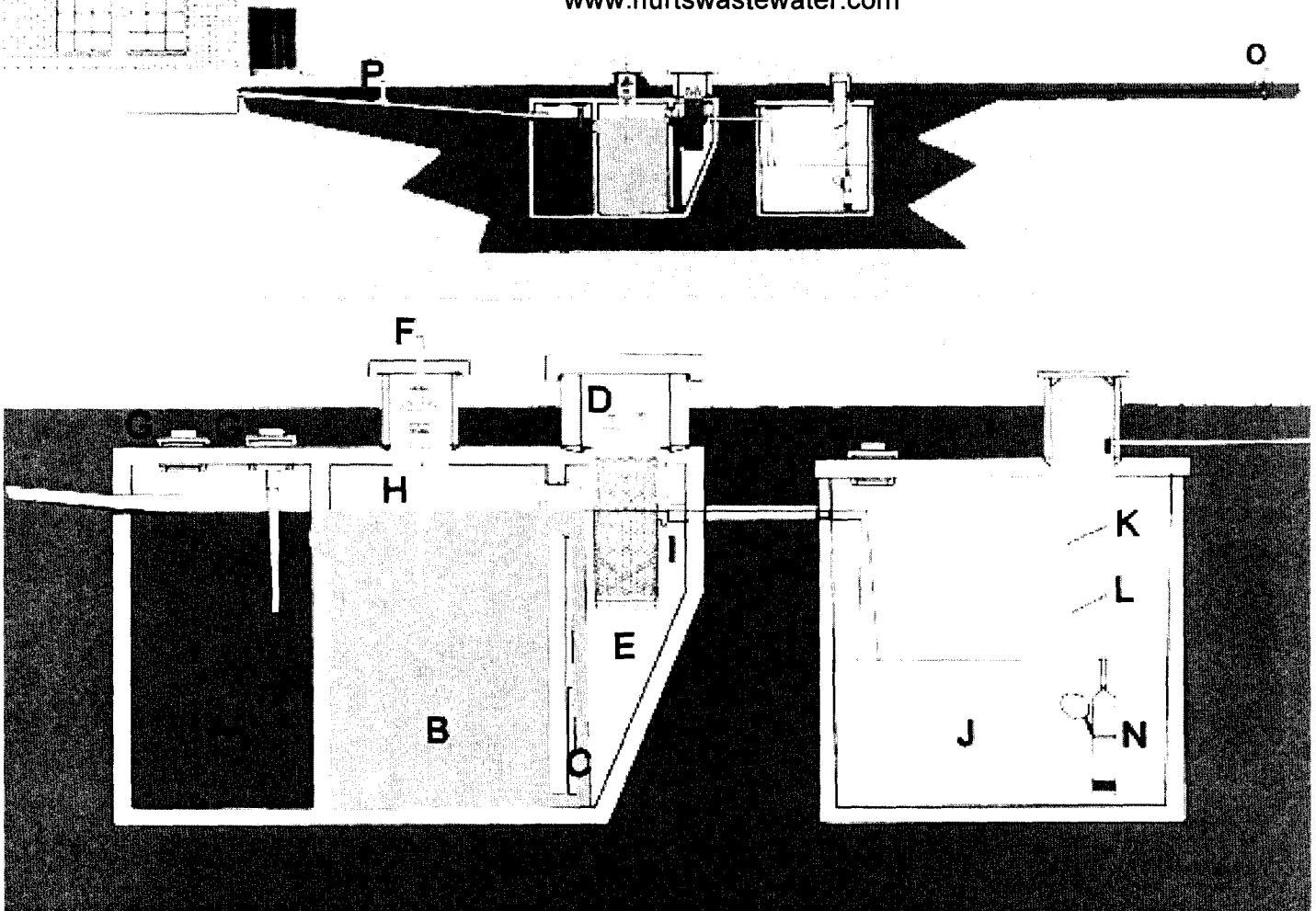
# HURT'S WASTEWATER MANAGEMENT, LTD.

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