

PROCEDURE FOR OBTAINING A SEPTIC PERMIT

ROCKWALL COUNTY
101 S.FANNIN
ROCKWALL, Tx 75087
972-204-7600

On December 1, 1982 through a Texas Department of Water Development Board's order, became unlawful to construct a septic tank in the unincorporated area of Rockwall County without first obtaining a permit from the Rockwall County Health Coordinator.

Necessary steps to secure a septic tank permit:

1. A minimum of one and one-half (1 ½) acres of suitable land is necessary to install a system per dwelling.
2. Fill out an application with the Rockwall County Health Coordinator and pay Permit Fee.
3. The applicant must turn in a Site Evaluation that was performed by a site evaluator or professional engineer and a detailed drawing or blueprint of the system they wish to install.
4. If an alternate system is to be used, such as an aerobic system with above ground discharge, an affidavit must be filed with the County Clerk's office and a copy filed with the Health Coordinator's office stating that a surface application on-site wastewater treatment system has been installed in accordance with the permitting provisions of Rockwall County and the owner has entered into a maintenance agreement with a certified maintenance company that will be in effect for the use of the system.
5. Mandatory meeting with Health Coordinator to get paperwork approved to county specifications before proceeding further.
6. Notify the Health Coordinator when work is to start on the system and when it will be ready for inspection.
7. It is very important to understand that even though an on-site sewage facility has been properly constructed, satisfactory performance cannot be guaranteed under all conditions because of the many variables involved including maintenance weather, soil conditions and usage. The ultimate responsibility rests with the on-site sewage facility user.

AFFIDAVIT TO THE PUBLIC
WASTEWATER TREATMENT SYSTEM

THE COUNTY OF ROCKWALL
STATE OF TEXAS

BEFORE ME, THE UNDERSIGNED AUTHORITY, ON THIS DATE PERSONALLY
APPEARED _____ WHO, AFTER BEING BY DULY SWORN,
UPON OATH STATES THAT HE/SHE IS THE OWNER OF RECORD OF THAT
CERTAIN TRACT OR PARCEL OF LAND LYING AND BEING SITUATED IN
ROCKWALL COUNTY, TEXAS AND BEING MORE PARTICULARLY
DESCRIBED AS FOLLOWS:

THE UNDIGNED FURTHER STATES THAT A SURFACE APPLICATION ON-
SITE WASTEWATER TREATMENT SYSTEM HAS BEEN OR WILL BE
INSTALLED IN ACCORDANCE WITH THE PERMITTING PROVISIONS OF
ROCKWALL COUNTY, TEXAS THE UNDERSIGNED HAS ENTERED INTO A
MAINTENANCE AGREEMENT, AS REQUIRED BY THE PERMITTING ENTITY
WITH AN APPROVED MAINTENANCE COMPANY FOR THE SERVICE AND
REPAIRS TO THE SURFACE APPLICATION SYSTEM.

FURTHER, THE UNDERSIGNED STATES THAT HE/SHE WILL UPON SALE OR
TRANSFER OF THE ABOVE-DESCRIBED PROPERTY, REQUEST A TRANSFER
OF THE PERMIT TO OPERATE SUCH SURFACE APPLICATION SYSTEM TO
THE BUYER OR TRANSFEREE. ANY BUYER OR TRANSFEREE IS HEREBY
NOTIFIED THAT A MAINTENANCE CONTRACT WITH AN APPROVED
MAINTENANCE COMPANY MUST BE SUBMITTED TO ROCKWALL COUNTY
WITHIN 30 DAYS AFTER THE PROPERTY HAS BEEN TRANSFERRED.

SIGNATURE OF HOMEOWNER(S)

THIS INSTRUMENT SWORN TO AND SUBSCRIBED BEFORE ME ON THIS
_____ DAY OF _____, 2008.

(SEAL)

NOTARY PUBLIC, STATE OF TEXAS
COMMISSION EXPIRES:

APPLICATION FOR SEPTIC PERMIT

ROCKWALL COUNTY
101 S.FANNIN STREET
ROCKWALL, TX 75087
972-204-7600

Name _____ Amount Paid _____

Address _____

City _____

Phone _____

Type of system _____

Address of system to be installed _____

Signature of
Applicant _____ Date _____

“THIS IS NOT A PERMIT”

ON-SITE WASTEWATER DISPOSAL APPLICATION
ROCKWALL COUNTY HEALTH DEPARTMENT

Date of Request _____
Name _____ Phone _____

Present mailing address _____
PROPERTY LOCATION

Nearest City _____ Subdivision Name _____

Street address or lot# _____

Lot size _____

Travel Directions _____

SITE EVALUATION OF SOIL

Type of Soil(as per Soil Conservation _____

Depth to impervious layer _____ Depth to groundwater _____

Site Evaluation as performed by licensed engineer _____

Name of person performing Site Evaluation _____

I have inspected and confirmed the soil type as stated and have performed the Site Evaluation on this property, according to the Texas Commission On Environmental Quality (TCEQ) specifications, and have accurately and truthfully reported the results.

Date _____ Signature _____

License# or seal _____

SYSTEM LOAD

of bedrooms _____ # of bathrooms _____ Square feet of living area _____

Washing Machine _____ Dishwasher _____ Garbage Disposal _____

Water Saving Devices: Yes _____ No _____ 100 Year Flood Zone: Yes _____ No _____

Daily Design Flow (GPD) _____ Water Company _____

CONTRACTOR INFORMATION

Installer Name and License# _____

Address _____

Phone _____

Anticipated Installation Date _____