CITY OF OVILLA APPLICATION FOR ON-SITE SEWAGE FACILITY NEW CONSTRUCTION AND MODIFICATION

	NEW INSTALLATION	MODIFICATION
1.	Property Owner's Name:	
2.	Mailing Address:	
3.	Telephone Number:	
4.	Site Address:	
5.	SINGLE FAMILY RESIDI	
6.	COMMERCIAL BUILDIN Number of Employees:	IG Type: Days Occupied Per Week:
7.	Site Evaluator:	Certification Number:
8.	Designer:	License Number (PE or RS):
9.	Installer:	Registration Number:
to the on-site install	e City of Ovilla to enter upon the above descri te sewage facility and that a permit to operate lled system which indicates that the system w	rect to the best of my knowledge. Authorization is hereby given ibed property for the purpose of lot evaluation and inspection of the facility will be granted following successful inspection of the as installed in compliance with the rules of the City of Ovilla and (TCEQ) On-Site Sewage Facility Rules, TAC30, Chapter 285.
the so	oil analysis and plan of site and disposal syste	ewage facility system requirements are the minimum and based or means submitted by applicant. Applicant further understands that cause of the many variables involved. The City of Ovilla assumes f the applicant's system.
Signa	nature of Owner	 Date

CITY OF OVILLA ON-SITE SEWAGE FACILITY TECHNICAL INFORMATION FOR PERMIT

NOTE: DO NOT BEGIN CONSTRUCTION PRIOR TO APPLICATION APPROVAL. UNAUTHORIZED CONSTRUCTION CAN RESULT IN CIVIL AND OR ADMINISTRATIVE PENALTIES.

OWN	NER'S NAME:		
		No If yes, professional design	
1.	SEWER (House Drain) Type and size of pipe:	Slope of sewer pipe t	to tank:
2.	DAILY WASTEWATER USAGE RATE: Q=(gallons/day) Water saving devices : Yes No		
3.	TREATMENT UNIT:		
	SEPTIC TANK:		
	Tank Demensions:	Liquid depth (tank bottom to d	outlet):
	Size required:	Size Proposed:	
	AEROBIC:		
	Manufacturer:	Model Number:	
	Size required:	Size Proposed:	
	Pretreatment Tank: Ye	es No	
	OTHER:	(PLEASE ATTACH DESCRIPTION	W.
4.	DISPOSAL SYSTEM:	(PLEASE ATTACH DESCRIPTION	ואו)
••	Type:		
	Area Required:	Area Proposed:	
5.	ADDITIONAL INFORMATION: (Note-This information must be attached for review to be completed Site Evaluation Planning Materials		
The a	ttached checklist details those ite	ems that must be addressed under each	of these categories.
DESIGNER'S SIGNATURE		REGISTRATION NO. DA	TE

AFFIDAVIT TO THE PUBLIC

The County of, State of Texas.				
Before me, the undersigned authority, on this day personally who, after being by me duly sworn, upon oath states that he/s	he is the owner of record of that certain tract			
or parcel of land lying and being situated inparticularly described as follows:	County, Texas and being more			
The undersigned further states that a surface application on-site wastewater treatment system is being installed in accordance with the permitting provisions of TCEQ on-site facility rules TAC 30 Ch. 285.33. The undersigned has entered into a maintenance company agreement for service and repair to the surface application system.				
Furthermore, 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 transfer. Any buyer or transferee is hereby notified that a maintenance contract with an approved maintenance company will be required for use of the system. For more information concerning the rules or regulations on surface applications on on-site wastewater treatment system, please contact the Division of Watershed Management, the Texas Commission on Environmental Quality, P O Box 13087, Austin, Texas 78711-1087.				
Witness my/our hand(s) on the day of	, 20			
	Signature of Homeowner(s)			
	Signature of Homeowner(s)			
	Printed Name of Homeowner(s)			
SWORN TO AND SUBSCRIBED BEFORE ME on this 20	s day of,			
	Notary Public, State of Texas			
	Notary's Printed Name			
	Commission Expires			