



S. J. R. A. REQUIREMENTS FOR OSSF PERMITS

- 1) A site evaluation must be performed to determine the type of Septic System needed. A Registered Sanitarian or a Professional Engineer can perform these tests. If the type of soil is determined to be unsuitable for a Standard or Conventional Septic System with a drainfield, an alternate system must be utilized.
- 2) A Registered Sanitarian or a Professional Engineer must design all Septic Systems.
- 3) When an Aerobic System with spray irrigation is used, the following must be presented to the San Jacinto River Authority before a permit can be issued.
 - a) Professional Design
 - b) Site Evaluation (soil analysis)
 - c) Two Year Maintenance Agreement (must be signed by both the installer and the homeowner)
 - d) Receipt of an Affidavit to the Public filed at the County Clerks Office.
 - e) Completed San Jacinto River Authority OSSF Application (applicant must be a person – please do not apply as a business)
 - f) OSSF Permit Fee is \$300.00 (THREE HUNDRED DOLLARS AND NO CENTS)

Please fill out the application as described below:

1. Fill in name, date, mailing address (where you receive mail), city, state, zip, home phone and work phone.
2. Fill in the Lot – Block – Section of where the facility is located. Indicate whether this is an addition to your current facility. Fill in the lot address (where the facility is located).
3. Fill in the size of the lot in acres (example: 1 acre; 2 1/2 acres) Indicate the square feet (example: 1 acre is 43,560 sq.ft.) Indicate the size of the living area and number of bedrooms.

Please sign the application and return to the San Jacinto River Authority.

- ♦ The San Jacinto River Authority will inspect your septic system after completion.

NOTE: OSSF Permitting Process may take up to 30 days to approve



SAN JACINTO RIVER AUTHORITY
APPLICATION FOR AN ON SITE SEWAGE FACILITY

TEXAS HEALTH AND SAFETY CODE CHAPTER 366.031
REPLACES BOARD ORDER NUMBER 76-1216-4

Name _____ Date _____

Mailing Address _____

City, State, Zip _____

PHONE NUMBERS (Primary): _____ (Secondary): _____

LOCATION OF FACILITY

Lot _____ Block _____ Section _____ Subdivision _____

SITE ADDRESS _____

City, State, Zip _____

BUILDING PARTICULARS

Lot Size: _____ (Square Feet) Water Usage _____ Gallons per day

Size of Living Area _____ Total Bedrooms _____ Water Savings Device _____

Installer _____ Registration Number _____

Installer Contact Number _____ Site Evaluator _____

AUTHORIZATION IS HEREBY GIVEN TO THE SAN JACINTO RIVER AUTHORITY AND THE TEXAS NATURAL RESOURCE CONSERVATION COMMISSION OR THEIR AGENTS OR DESIGNEES, SINGULAR OR JOINTLY, TO ENTER ON THE ABOVE DESCRIBE PROPERTY FOR THE PURPOSE OF MAKING NEEDED SOIL TESTS, INSPECTING SEPTIC SYSTEMS OR FOR ANY OTHER REASON CONSISTENT WITH THE WATER QUALITY PROGRAMS OF THE SJRA OR THE TNRCC.

SIGNATURE OF APPLICANT

S.J.R.A. AUTHORIZED AGENT SIGNATURE

● **Permitting Process May Take Up to 30 Days** ●