



TARRANT COUNTY ENGINEERING SERVICES

200 Taylor Street, Ste. 305 | Fort Worth, TX 76196 | 817-884-1250 | www.tarrantcountytx.gov

NON-RESIDENTIAL ON-SITE SEWAGE FACILITY PERMIT APPLICATION

This application is valid for one year from the date the fees are received.

GENERAL INFORMATION

System Type: Aerobic Conventional
 New Repair/Remodel Relocation of Disposal Field Addition to Disposal Field Other _____

PROPERTY INFORMATION

Site Address: _____ City/State/Zip: _____

Inside the City limits of: _____ or Unincorporated Tarrant County

Property Size - # of acres: _____ (IMPORTANT: MUST BE 1 ACRE NET MINIMUM) MAPSCO #: _____

Legal Description:

Subdivision Name: _____ Lot: _____ Block: _____ Phase: _____

OR Survey: _____ Tract: _____ Abstract: _____

System Use: Office Church Manufacturing Auto RV Park Other _____

Will any wastewater come from manufacturing or industry processes? Yes No

Maximum number of employees (or people using system) per day: _____

Estimated Daily Water Usage: _____ gpd Maximum Daily Water Usage: _____ gpd

Water Source: Public Supply: _____ Existing Private Well To Be Installed Private Well

OWNER INFORMATION

Property Owner Name: _____

Mailing Address: _____ City/State/Zip: _____

Main Phone: _____ Email: _____

INSTALLER INFORMATION

Same as Owner (If checked, skip)

Installer/Company Name: _____ License #: _____

Main Phone: _____ Email: _____

OWNER'S SIGNATURE

I understand that a properly designed and constructed sewage disposal facility may malfunction if not maintained or used properly. Due to the many variables involved, a system cannot be guaranteed. The licensing authority shall inspect to confirm the system meets design standards. The property owner is ultimately responsible for assuring the correct operation and maintenance of the system in accordance with the specific requirements of the type of system used. Furthermore, I, the undersigned, hereby grant access to the property, for purposes of inspecting the on-site sewage disposal system, to representatives of the Tarrant County Engineering Services Department.

Property Owner's Printed Name _____ Property Owner's Signature _____ Date: _____

ENGINEERING SERVICES DEPARTMENT USE ONLY

Received Date: _____ Expiration Date: _____ Approval Date: _____

Payment Method: _____ DW #: _____

Permit Number: _____ Approved for Tarrant County by: _____



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OSSF DOCUMENT SUBMITTAL LIST (CHECK ALL THAT APPLY)

- Site/Soil Evaluation
- Technical Report
 - Required for **ALL** Aerobic OSSFs.
- System Design
- Initial 2-year Maintenance Contract
 - Required for all **NEW** Aerobic OSSFs.
- Affidavit to the Public
 - Required for all **NEW** Aerobic OSSFs.
 - Must be filled out, notarized, and filed with the County Clerk's office.
- Water Well Log (if applicable)
- City of Fort Worth Platting Waiver Letter (if applicable)

IMPORTANT: SUBMISSION OF THE LISTED MATERIALS DOES NOT GUARANTEE AN AUTHORIZATION TO CONSTRUCT (ATC). APPLICATIONS WILL NEED TO BE REVIEWED PRIOR TO APPROVAL. ADDITIONAL DOCUMENTS MAY BE REQUESTED DURING THE REVIEW PROCESS.