Charles McDonald Designated Representative

Coleman, Concho, Edwards, Menard, Schleicher & Sutton Counties, City of Eden

4826 Red Oak Ln. San Angelo, TX 76904 325-456-4607 Bus. & Cell

325-227-6333 Fax # Lic. # OS0007644

Sutton County OSSF Permit

Permit fee for a single-family residence is \$400.00. All other types of facilities are \$400.00. All systems are required to be permitted. Make the check out to Sutton County. Send the application and check to the above address.

Note

There are 4 pages to the application. All four pages MUST be filled out. DO NOT send an application in that has the words "SEE ATTACHED or SEE DESIGN" written in any blank space on the application. It will be sent back and the ATC will not be issued. Legal descriptions are a must. Go to the county appraisal district office and ask for a copy of your clients CAD CARD. The information you need is on this document. Last item, a respectable drawing needs to be with the application as well.

RS&PE

Most of you have your own forms for your site evaluation. You may substitute your form for the ones in the permit. However, page #2 (technical information) needs to be filled out no matter how many times this information shows up in your design information. Once again, do not want to see the words "SEE ATTACHED or SEE DESIGN" in any of the blanks on page 1 & 2 of the permit.

Any questions, call 325-456-4607

Charles McDonald DR Sutton County

SUTTON COUNTY

OSSF SITE EVALUATION AND PLANNING MATERIALS CHECKLIST

O	WNEI	R'S NAM	1E	Date:						
	The following information must be submitted with the design package for review by the permitting authority. Failure to include or address all of the following items may result in approval delays.									
1.	the p	roposed d		gs or backhoe pits must be excavated at opposite ends of ated to a depth of two feet below the proposed excavation less. Two copies of the analysis results and the drawing ided:						
		Α.	Depth of soil boring or backhoe pit.	100,0						
		В.	Soil texture analysis. List the soil class.	70 30						
		C.	Gravel analysis (if applicable).	PERCENT SO FRACENT GLAY SO CLAY GLAY GLAY GLAY GLAY GLAY GLAY GLAY TO						
		D.	Restrictive horizons analysis.	20 20 20 20 20 20 20 20 20 20 20 20 20 2						
		E.	Groundwater evaluation.	100 90 80 70 60 50 40 30 20 10 PERCENT BAND						
		F.	Topography.	Clay - Smaller than 0.002 mm in diameter						
		G.	Flood hazard.	Silt - 0.05 v 0.002 mm in diameter Sand - 2.0 to 0.05 mm in diameter						
		Н.	Vegetation.	Gravel - Greater than 2.0 mm in diameter nim = millimeter						
		I.	Location of water wells, existing or proposed, and on adjacent properties.	Note 1: Sand shall be free of organic matter and shall be composed of silica, quartz, mica, or any other stable mineral. Note 2: Class Ia soils contain more than 30% gravel; therefore,						
		J.	Location of any streams, ponds, lakes, rivers, creeks or slopes that impact the site.	they are not portrayed on the soil triangle. Adopted January 20, 1997 Effective February 5, 1997						
		K.	Location of foundations, buildings, surface improvements, property lines, easements, swimming pools, and other structures existing or proposed							
 PLANNING MATERIALS: Submit two copies of the proposed treatment and disposal construction design. The following design criteria must be prepared and submitted for review: 										
	☐ A. A scale drawing of the on-site sewage facility, showing all structures served.									
		В.	Materials prepared by a professional engineer or professional sanitarian must have appropriate seal, date, and signature.							
		C.	Proposed designs must clearly indicate prop	erty lines and the location of all water wells.						
		D.	Site plans must show streams, ponds, lakes, rivers, creeks, and slopes.							
		E.	Site plans must show surface improvements, easements, swimming pools, and any other structure, existing or proposed.							
		F.	All separation distances identified in Table							
		G.	A sectional view of the tanks, including a p	ump tank detail, and excavations must be submitted.						

SUTTON COUNTY

APPLICATION REQUIREMENTS FOR ON-SITE SEWAGE FACILITY PERMITS

ALL OTHER TYPE FACILITIES, FEE: \$400.00 SINGLE FAMILY DWELLING, FEE: \$400.00 (Commercial, multi-unit, residential development) ☐ Obtain an application from the Sutton County Judge's Office ☐ A licensed soil/site evaluator must conduct a complete site evaluation. A detailed report, documenting the results of the soil and site conditions, must be submitted with the application. ☐ Have planning materials prepared by the required individual. • Standard systems may be prepared by the owner or the installer. Non-standard and proprietary systems must be prepared by a professional engineer (P.E.) or a professional registered sanitarian (R.S.) ☐ Submit the completed application and technical information sheets 1&2. Remit the appropriate fee and two copies each of the following: soil/site evaluation results; all planning materials; a recorded affidavit (if required); a signed maintenance contract (if required), and applicable subdivision or site plat information. ☐ Driving directions to the site should also be included. ☐ The submitted application and planning materials will be reviewed by the Sutton County Designated Representative (DR). Non-standard planning materials may be reviewed by the TCEQ central office staff in Austin if necessary or upon request by the TCEQ Region 8 Office. ☐ If approved, an Authorization to Construct (ATC) will be issued in writing. The Authorization to Construct is valid for one year from the date of issuance. ☐ The installer must notify the Sutton County Designated Representative (DR) at least five working days before the date of the construction inspection. ☐ All excavations must be left open until the inspection has been completed. ☐ If the installation is approved, a Notice of Approval (NOA) will be issued in writing, to the owner within seven days. □ NOTE: If a reinspection of the system is required, a fee equal to ½ the original permit fee must be paid by the installer for each time the system is reinspected. All fees must be paid before a Notice of

ALL FEES ARE NON-REFUNDABLE AND MUST BE PAID BY CHECK OR MONEY ORDER. CASH WILL NOT BE ACCEPTED.

PAYMENTS MUST BE MADE PAYABLE TO SUTTON COUNTY.

Approval will be issued as final approval.

SUTTON COUNTY APPLICATION FOR ON-SITE SEWAGE FACILITY NEW CONSTRUCTION

i c	OUNTY USE ONLY
	DATE
	AMOUNT

APPLICATION NUMBER

1.	PROPERTY OWNER'S NAME:(Last)	(First)	(Middle)
2.	CURRENT MAILING ADDRESS:		
3.	DAYTIME TELEPHONE NO.: ()		
4.	SITE ADDRESS:		
5.	LEGAL DESCRIPTION: Sec Block	Lot	Plat Date
	SUBDIVISION:		
	OTHER THAN SUBDIVISION: Acreage:	Survey N	Name:
		Abstract	Name/No.:
6.	SOURCE OF WATER: Private Well Public Water Supply(Name of Supplier)		
7.	SINGLE FAMILY RESIDENCE: No. of Bedrooms	1	Living Area (ft²)
8.	COMMERCIAL/INSTITUTIONAL (including multi-family	residences) TYPE:	
0.	NO. OF EMPLOYEES/OCCUPANTS/UNITS:		
9.	SITE EVALUATOR:	LICENSI	E NO
10.	PHONE NO.: DESIGNER: PHONE NO.:	LICENS	E NO. (PE or RS)
11.	INSTALLER:PHONE NO.:		E NO
	certify that the above statements are true and co creby given to the SUTTON COUNTY AA/DR arpose of soil/site evaluation and investigation of	rrect to the best of to enter upon the	above described property
12	. (SIGNATURE OF OWNER)		(DATE)
	(SIGNATURE OF OWNER)		

SUTTON COUNTY ON-SITE SEWAGE FACILITY TECHNICAL INFORMATION FOR PERMIT

APPLICATION # _____

DATE RECEIVE	ED:	
DO NOT BEGIN CONSTR UNAUTHORIZED CONSTRUCTION CAI	UCTION PRIOR TO APPLICATION A N RESULT IN CIVIL AND/OR ADMIN	
OWNER'S NAME:		
I. SEWER (House drain):		
TYPE AND SIZE OF PIPE:	SLOPE OF SEWER PIPE	E TO TANK:
II. DAILY WASTEWATER USAGE RAT	E: Q=(gallons/day)	
Water saving devices:	□ No	
III. TREATMENT UNIT:	ank	
A. • TANK DIMENSIONS: • SIZE REQUIRED: • MANUFACTURER: • PRETREATMENT TANK:	SIZE PROPOSED: MATERIAL/MODEL #: SIZE :(gal)	OF TANK TO OUTLET):
(Please attach description)		
IV. DISPOSAL SYSTEM: TYPE: V. ADDITIONAL INFORMATION:		
NOTE - THIS INFORMATION MUST BE AT	TACHED FOR REVIEW TO BE COM	PLETED.
A. SOIL/SITE EVALUATION		
B. PLANNING MATERIALS		
The attached checklist details those items t	hat must be addressed under each	of these categories.
DESIGNER'S SIGNATURE	LICENSE NO.	DATE

SUTTON COUNTY

SOIL/ SITE EVALUATION AND PLANNING MATERIALS FOR AN ON-SITE SEWAGE FACILITY

The following information must be submitted with the design package for review by the local Sutton County Authorized Agent's Designated Representative. Failure to include or address all of the following items may result in approval delays.

Application No.		<u>'</u>						
	Applicant/Site	Information		Site Evaluator Information Name Address City, State, Zip Phone No. License No.				
Name			Name					
Address			Address					
City, State, Zip			City, State, Z					
Phone No.			Phone No.					
County			License No.					
Additional infor	mation:							
					<u> </u>			
a restrictive horiz groundwater eval PLANNING MAThe submittal records a Submittals proposed des A sectional v	ton, whicheve luation, a surface ATERIALS: 'quirements muing of the one epared by a pigns must coniew of the tan	er is less. The boring acceding an ally are proposed treat ust include the following site sewage facility professional enginemply with all separ	be excavated to a depthing or pit locations must ris, and all applicable rement and disposal systement and disposal systement details. Y, showing all structure or professional sanitation distances identification distance	be indicated. The minimum separatem shall be preputed arian must be seed in Table X.	nis report shall ition requirement ared based on the aled, dated, and	nclude a its. he site evaluatior		
Depth (Feet)	Soil Class	Gravel Analysis	Restrictive Horizon	Groundwater	Topography	Flood Hazard		
0								

Soil Boring/Backhoe Pit Number: #2						
Depth (Feet)	Soil Class	Gravel Analysis	Restrictive Horizon	Groundwater	Topography	Flood Hazard
		,				
·						
·						
5						
7						

Schematic of Lot or Tract / Site Drawing
Scale: 1 inch = 50 feet/or appropriate

Compass North	•	
Compass North		
		:
	· · · · · · · · · · · · · · · · · · ·	

I certify that the resu	lts of this report are based on my site observation	is and are accurate to the best of my ability.	
Signature:		Date:	
	(Site Evaluator)		