



Nacogdoches County
ENVIRONMENTAL HEALTH
Application for On - Site Sewage Facility

FEE: \$300.00
Comm: \$400

1. Property Owner's Name: _____
2. Permanent Mailing Address: _____
3. Telephone No. During Day: _____
4. Site Address: _____ Location _____
5. Legal Description: Sec. _____ Block. _____ Lot. _____ Date. _____
Subdivision: _____
Other than subdivision: Acreage _____ Survey _____
6. Source of water : Private well _____ Public water supply _____
Water saving devices? Yes _____ No _____
7. Single Family Residence : No. Of Bedrooms _____ Living area(ft) _____
8. New Construction _____ Existing Home _____ Approx. Date of Occupancy _____
9. Commercial/Institutional (including multi - family residences) Type: _____
No. Of Occupants: _____ Days Occupied Per Week: _____
10. Site Evaluator: _____ Certification No. _____
11. Designer: _____ License No. _____
Phone No. _____
12. Installer: _____ Registration No: _____
Phone No. _____
- DATE: _____ PERMIT # _____ AMOUNT: _____

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given to the Designated Representative of Nacogdoches County to enter upon the above described property for the purpose of lot evaluation and inspection of on- site sewage facility and that a permit to operate the facility will be granted following successful inspection of the installed system which indicates that the system was installed in Compliance with this commission's On- Site Sewage Facility Rules, TAC30, Chapter 285.

13. _____
(Signature of Owner)

(Date)