



# New On-Site Sewage Facility App

Environmental Health Division

Wichita Falls-Wichita County Public Health District

1700 Third St. | Wichita Falls, TX 76301 | 940-761-7800 | www.health.wichitafallstx.gov

Date \_\_\_\_\_ County \_\_\_\_\_  
 App# \_\_\_\_\_  
 Site# \_\_\_\_\_  
 Amount:  \$268 Conventional  
 \$293 Proprietary Includes State fee

**Incomplete Applications will not be approved**

## SITE INFORMATION

System Address: \_\_\_\_\_  
*(Building # and Street name) (City) (State) (Zip)*

Directions to Site/Location of System: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Legal Description: \_\_\_\_\_  
 \_\_\_\_\_

Acreage:	Survey:
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Water Source: \_\_\_\_\_

## OWNER INFORMATION

Owner Name:	Phone:
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Owner Mailing Address: \_\_\_\_\_  
*(Building # and Street name) (City) (State) (Zip)*

Secondary Phone:	Email:
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## BUILDING INFORMATION

Building Area (sq.ft):	Type of Building:
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#Bedrooms/Other:	#Occupants/Other:	Days of Use:
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## SYSTEM INFORMATION

Installer Name:	License #:
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Type of System: \_\_\_\_\_

(If Modification of System) Description: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## CHECKLIST OF ATTACHMENTS

<input type="checkbox"/> Application	<input type="checkbox"/> Site Plan	<input type="checkbox"/> Soil Evaluation
<input type="checkbox"/> Flood Plain	<input type="checkbox"/> Design	<input type="checkbox"/> Drawing
<input type="checkbox"/> Materials	<input type="checkbox"/> Landscape	<input type="checkbox"/> Affidavit
<input type="checkbox"/> Contract	<input type="checkbox"/> Professional Design	<input type="checkbox"/> Other

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given to the Wichita Falls - Wichita County Public Health District 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 TCEQ's On-Site Sewage Facility Rules, TAC 30, Chapter 285.

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Owner Print Name
Owner Signature
Date