City of Wimberley
Environmental Health Department
221 Stillwater Drive
P.O. Box 2027, Wimberley, TX 78676
Phone: (512) 847-0025 x24 Fax: (512) 847-0422

On-Site Septic Facility (OSSF)
Check List & Application

Permit No. _____

Date: _____

CHECK LIST FOR OSSF APPLICATION:

ALL DOCUMENTATION IS REQUIRED AND MUST BE CHECKED AND ATTACHED TO THIS APPLICATION. **PARTIAL OR INCOMPLETE APPLICATIONS WILL BE SUBJECT TO A $125.00 RE-SUBMISSION AND/OR RE-INSPECTION FEE, AND WILL NOT BE ACCEPTED OR PROCESSED.**

PLEASE CHECK ONE:

☐ SFR Standard ☐ SFR Engineered ☐ Commercial Engineered ☐ Amendment/Engineer Adjustment

☐ APPLICATION

☐ FEES
(Refer to Fee Schedule on page 3)

☐ SITE PLAN

☐ FLOOR PLAN

☐ SOIL EVALUATION

☐ SURVEY OR PLAT

☐ SEPTIC DESIGN
(Including manufacturer spec pages for all tanks & components)

☐ MAINTENANCE CONTRACT
(If using a class I system, aerobic treatment)

☐ AFFIDAVIT & HCCO Receipt
(If using an aerobic treatment system ONLY, Must be filed and recorded at the Hays County Clerks Office and included with this application)

*This application must be signed by the property owner OR have a notarized letter giving the applicant permission to file application on his or her behalf.

**This is an affidavit that indicates that the owner realizes the system that is planned for installation requires a maintenance contract for the life of the system.

Incomplete applications that are submitted as "Complete" are subject to a $125.00 resubmittal and/or re-inspection fee. Please verify that all items on the checklist are submitted with the application to avoid these fees.

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Phone: (512) 847-0025 Fax: (512) 847-0422 Web: www.cityofwimberley.com

ON-SITE SEWAGE FACILITY PERMIT APPLICATION

This application is for on-site sewage facilities only and does not authorize the start of any facility or construction.

Property Owner's Name: _____
(Last) (First) (M.I.)

Mailing Address: _____

Home Phone: _____ Business Phone: _____

Email: _____

ON-SITE SEWAGE ADDRESS: _____

Legal Description:

Lot # _____ Block _____ Subdivision _____ Section _____ Recorded Date _____

Land Area/Acreage: _____
(Acreage) (Survey) (Vol/Pg/Date)

Builder's / Agent's Name: _____
(Last) (First) (M.I)

Installer's Name: _____
(Last) (First) (M.I)

Email: _____

Source of Water: Private _____ Public _____ Name: _____

Is facility in 100 yard flood plain? Yes _____ No _____

TYPE OF FACILITY

( ) SINGLE FAMILY RESIDENT (SFR): ☐ House ☐ Mobile Home

Size of Living Area: _____ sq. ft. Number of Bedrooms: _____ Number of Baths: _____

( ) COMMERCIAL (NON-SFR): Type: _____ Days occupied per week _____ Estimated daily water usage_____

Size of Building Area _____ sq. ft. No. of Employees _____

Improvement to structure less than 50% : _____ Other: _____

Floodplain Development: ☐ New Construction ☐ Excavation ☐ Fill

I, THE PROPERTY OWNER, CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT.

I _____ hereby file this application for an on-site sewage facility permit, and if the permit herein applied for is granted, acknowledge myself to be bound to the City of Wimberley, Texas, to see that all provisions of the permit are faithfully performed.

_____ _____

Owner's Signature **Date**

NOTE: THE PERMIT TO CONSTRUCT AN ON-SITE SEWAGE FACILITY EXPIRES ONE YEAR FROM APPLICATION DATE.

ON-SITE SEWAGE FACILITIES (OSSF) FEE SCHEDULE

Permit Application Fees (Includes up to 3 inspections)

SFR Standard System..... $400.00

SFR Engineered System..... $450.00

Commercial Engineering System..... $750.00

TCEQ On-Site Wastewater Treatment Research (per permit) ....+ **$10.00**
(State/Council Fees added to ALL and each permit applications)

Amendment/Engineer Adjustment to On-Site Sewage Facility:
SFR..... $200.00
Commercial..... $400.00

Re-Submission and/or Re-Inspection Fees $125.00
(Incomplete applications will be charge this fee)

On-Site Sewage Facility Certification..... $125.00

Waiver/Variance Request..... $500.00

Pre-Application Conference (per hour, one hour min.).....$50.00

TOTAL FEES INCLUDED WITH THIS APPLICATION..... $_____

I, THE APPLICANT FOR THIS PERMIT, WARRANT THE TRUTHFULNESS OF ALL OF THE INFORMATION PROVIDED IN THIS APPLICATION AND UNDERSTAND THAT IF ANY OF THE INFORMAION PROVIDED IS IN CORRECT; PERMIT MAY BE REVOKED BY THE CITY HEALTH ENVIRONMENTAL INSPECTOR OFFICIAL.

Owner/Representative

_____ _____ _____
Applicant's Name (Print) **Signature** **Date**

**********For City Official Only**********

_____ _____
Environmental Health Official **Date**

AFFIDAVIT
FOR ON-SITE SEWAGE FACILITIES (OSSFs) REQUIRING A MAINTENANCE CONTRACT
Must be filed and recorded at the Hays County Clerk's Office and included with this application

STATE OF TEXAS §
COUNTY OF HAYS §
CITY OF WIMBERLEY §

The undersigned,_____, being the owner of property the subject of an Application for a Development Authorization with the City of Wimberley, Hays County, Texas, and being duly sworn, deposes and says as follows:

1. That (s) he is the owner, in whole or in part, of that certain tract or parcel of land lying and being situated in the City of Wimberley, Hays County, Texas and described herein.

2. According to Texas Commission on Environmental Quality (TCEQ) Rules for On-Site Sewage Facilities (OSSFs), this document is filed in the Deed Records of the City of Wimberley, Hays County, Texas.

3. The Texas Health and Safety Code, Chapter 366 authorizes the TCEQ to regulate OSSFs. Additionally, the Texas Water Code (TWC), §5.012 and §5.013, gives the TCEQ primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The TCEQ, under the authority of the TWC and the Texas Health and Safety Code, requires owners to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the Commission requires a recorded affidavit. Additionally, the owner must prove proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the TCEQ of the suitability of this OSSF, nor does it constitute any guarantee by the TCEQ that the appropriate OSSF was installed.

4. An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91 (12), will be installed on the property described as follows:

911 street address for the Subject Property, if established: _____
Acreage: _____

Legal description:
Lot: _____, Block: _____, Subdivision: _____

Sec: _____, Phase: _____

If not located in a subdivision: Survey _____

Abstract: _____, Recorded (Vol/Page): _____, Date Recorded: _____

5. The property is owned by: _____

6. This OSSF shall be covered by a continuous service policy for the first two years. After the initial two-year service policy, the owner of an aerobic treatment system for a single family residence shall obtain a maintenance contract within 30 days. All maintenance on this OSSF must be performed by an approved maintenance company, and a signed maintenance contract must be submitted to the City of Wimberley, Environmental Health Department within 30 days after the property has been transferred.

7. The owner will, upon any sale or transfer of the above-described property, request a transfer of the permit for the OSSF to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the City of Wimberley, Environmental Health Department.

IN WITNESS WHEREAS (s) he has hereto set his/her hand.

Signature: **X**_____

Print Name: _____

STATE OF TEXAS §
COUNTY OF HAYS §
CITY OF WIMBERLEY §

I hereby certify that _____, known to me to be the affiant in the foregoing affidavit, personally appeared before me this day and having been by me duly sworn deposes and says that the facts set forth in the above affidavit are true and correct.

WITNESS my hand and official seal this the _____ day of _____, 20_____.

(SEAL)

_____
Notary Public, State of Texas

Return filed copy to:

My Commission expires: _____

Name: _____ Mailing Address: _____ City/State/Zip Code: _____