

Karnes County Region 13 TCEQ Authorized Agency

Karnes County Special Projects Office

210 W Calvert Ave. Suite 155

Karnes City, Texas 78118

Phone: 830.780.3511 FAX: 830.780.2865

HOW TO OBTAIN A KARNES COUNTY PERMIT FOR AN ON-SITE SEWAGE FACILITY

RETAIN A COPY OF THIS PAGE PRIOR TO RETURNING THE APPLICATION TO THE ABOVE ADDRESS PLEASE USE BLUE INK

Determination Development Application required prior to OSSF Permit

SINGLE FAMILY RESIDENTIAL FEE: \$450.00 (PER TANK) COMMERCIAL FEE: \$500.00 (PER TANK)

- Obtain an application from the Karnes County Special Projects Department
- Have appropriate individual (Registered Site Evaluator or Registered Combination Installer II/Site Evaluator) perform mandatory soil tests.
- Have appropriate individual prepare planning material professional design (R.S.P.E.) is required to scale for all systems.
- Submit **completed application** and technical information sheet (in property owner's name) with **proof** of property ownership (deed), including tract of land and description of property, with all pages intact and filled out. Include the appropriate fee and **one copy** each of the following: 1) planning materials, 2) site and soil evaluation, 3) accurate directions to the site.
- Submit a copy of the Installers License
- Plans and application will be reviewed by the Designated Representative (DR). Non-standard system plan may be reviewed by TCEQ representative or central office staff in Austin.
- Upon approval, authorization to construct will be issued. The Authorization to Construct is valid for one year from the date of issuance.
- Begin construction. An inspection of the installation is required before covering of the system. Contact our office at least **5 working days** in advance to arrange an inspection.
- For inspection call Jim Adams, the Karnes Co. Designated Representative (DR) at 830-780-3511

Affidavit and Maintenance Contract are required for Aerobic systems

Special Projects will retain the original.

**ALL FEES SHALL BE PAID BY:
PERSONAL CHECK, CASHIER'S CHECK, OR MONEY ORDER
PAID TO KARNES COUNTY**



County of Karnes
210 W Calvert Ave, Ste. 155
Karnes City, TX. 78118
830-780-3511

Karnes County Use Only
OSSF Permit # _____

APPLICATION FOR ON-SITE SEWAGE FACILITY
TCEQ Region 13

☐ New system
☐ Replacement
☐ Repair/Alteration

1. PROPERTY OWNER(S) NAME: _____
(Last) (First) (Middle)

2. CURRENT MAILING ADDRESS: _____

3. HOME PHONE NO.: _____ EMAIL ADDRESS: _____

4. 911 SITE ADDRESS: _____

5. PROPERTY LEGAL DESCRIPTION: _____

Acreage: _____ Plat Date: _____ Subdivision name (if applicable): _____

*PLEASE ATTACH VERIFICATION OF LEGAL DESCRIPTION SUCH AS A COPY OF: DEED, PLAT MAP, SURVEY, OR
OTHER DOCUMENTATION CONTAINING LEGAL DESCRIPTION*

6. DIRECTIONS TO SITE: _____

7. SOURCE OF WATER: Private Well ☐ Public Water Supply _____
(Name of Supplier)

8. SINGLE FAMILY RESIDENCE: No. of Bedrooms: _____ No. of Bathrooms: _____ Living Area (ft²): _____

9. COMMERCIAL/INSTITUTIONAL (other than single-family residence) TYPE: _____

BUSINESS / INSTITUTION NAME: _____

RESPONSIBLE OFFICIAL: _____ NO. OF EMPLOYEES/UNITS: _____

10. SITE EVALUATOR: _____ LICENSE NO. _____

PHONE NO.: _____ EMAIL ADDRESS _____:

MAILING ADDRESS: _____

11. INSTALLER: _____ LICENSE NO.: _____

PHONE NO.: _____ EMAIL ADDRESS _____:

MAILING ADDRESS: _____

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given to Karnes County to enter upon the above described property for the purpose of inspection or investigation of an on-site sewage facility.

SIGNATURE OF OWNER: _____ DATE: _____



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TCEQ Region 13

**ON-SITE SEWAGE FACILITY
TECHNICAL INFORMATION FOR PERMIT**

PROFESSIONAL DESIGN REQUIRED per Karnes County Ordinance

Designer: _____ **License Number:** _____

License Type: _____ **Address:** _____

Phone: _____ **Fax:** _____ **Email:** _____

I. TYPE AND SIZE OF PIPING FROM: (EXAMPLE: 4" SCH 40 PVC)

Stub out to treatment tank: _____

Treatment tank to disposal system: _____

II. DAILY WASTEWATER USAGE RATE: Q= _____ (gallons/day)

Water Saving Devices: Yes ☐ No ☐

III. TREATMENT UNIT(S): Septic Tank ☐ Aerobic Unit ☐

A. Tank Dimensions: _____ Liquid Depth (bottom of tank to outlet): _____

Size Proposed: _____ (gal) Manufacturer: _____

Material/Model #: _____

Pretreatment Tank : Yes / No SIZE : _____ (gal)

Pump/Lift Tank : Yes / No SIZE : _____ (gal)

B. OTHER Yes ☐ No ☐ If yes, please attach description.

IV. DISPOSAL SYSTEM:

Disposal Type: _____ Trench: length _____ x _____ width

Area Proposed: _____ square feet Area required: _____ square feet

V. ADDITIONAL INFORMATION:

NOTE - THIS INFORMATION MUST BE ATTACHED FOR REVIEW TO BE COMPLETED.

A. Soil/Site evaluation B. Planning materials (If Applicable), Site Plan/Design to scale

**DO NOT BEGIN CONSTRUCTION PRIOR TO OBTAINING AUTHORIZATION TO CONSTRUCT.
UNAUTHORIZED CONSTRUCTION CAN RESULT IN CIVIL AND/OR ADMINISTRATIVE PENALTIES.**

SIGNATURE OF DESIGNER: _____ **DATE:** _____

If you have questions on how to fill out this form or about the on-site sewage facility program, please contact the Karnes County DR at 830-780-3511.

KARNES COUNTY OSSF SOIL EVALUATION

Date Performed: _____ Proposed Excavation Depth: _____

Property Location: _____ Textural Class Determined For Drain field: _____

Name of Site Evaluator: _____ Registration Number: _____

Requirements:

At least two (2) soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Location of soil boring or dug pits must be shown on the site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two (2) feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated. Describe each soil horizon and identify any restrictive features on this form. Indicate depths where features appear.

Soil Boring Number _____					
Depth (Feet)	Textural Class	Structure (if applicable)	Drainage (Mottles) Water Table	Restrictive Horizon	Observations
0					
1					
2					
3					
4					
5					

Soil Boring Number _____					
Depth (Feet)	Textural Class	Structure (if applicable)	Drainage (Mottles) Water Table	Restrictive Horizon	Observations
0					
1					
2					
3					
4					
5					

ATTACH COPY OF SITE DRAWING

Features of Site Area		
Presence of 100 year flood zone	See Karnes County Development Permit Application	
Presence of upper water shed	Yes	No
Presence of adjacent ponds, streams, water impoundments	Yes	No
Existing or proposed water well in nearby area	Yes	No
Organized sewage service available to lot or tract	Yes	No

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability.

Signature of Site Evaluator

Date

CARE OF YOUR NEW SEPTIC TANK

Facility owners' responsibilities: a properly designed on-site sewerage facility, properly constructed in a suitable soil can malfunction if the amount of water it is required to dispose of is not controlled. It will be the responsibility of the owner to maintain and operate the facility in a satisfactory manner. The proper performance of an on-site sewerage facility cannot be guaranteed even though all provisions of these Standards have been met. Inspection and licensing of an on-site sewerage facility by the licensing authority shall indicate only that the facility meets minimum requirements and does not relieve the owner of the property from complying with County, State and Federal Regulations. On-site sewerage facilities, although approved as meeting minimum Standards, must be upgraded by the owner, at the owner's expense, if the owner's operation of the nuisance conditions are threatened or occur, or if the facility when used does not comply with government regulations.

An on-site sewerage system should not be treated as if it were a city sewer. Economy in the use of water helps prevent overloading of a sewerage system that could lessen its usefulness. Leaky faucets and faulty commode fill-up mechanisms should be carefully guarded against. Garbage grinders can cause a rapid buildup of sludge or scum resulting in a requirement for more frequent cleaning and possible system failure. The excessive use of garbage grinders and grease discarding should be avoided.

Check commodes for leaks that may not be apparent. Add a few drops of food coloring to the tank. Do not flush. If the color appears in the bowl within a few minutes, the toilet flush mechanism needs adjustment or repair.

Do not use the toilet to dispose of cleaning tissues, cigarette butts or other trash. This disposal practice will waste water and also impose an undesired solids load on the treatment system.

Since it is not practical for the average homeowner to inspect his tank and determine the need for cleaning, a regular schedule of cleaning the tank at two (2) to three (3) year intervals should be established. Commercial cleaners are equipped to readily perform the cleaning operation. Owners of septic tank systems shall engage only persons registered with the Texas Commission on Environmental Quality to transport the septic tank cleanings.

Signature of Property Owner

Date

Signature of Homeowner

Date

30 TAC §285.90(2)

COUNTY OF KARNES §
STATE OF TEXAS §

AFFIDAVIT TO THE PUBLIC

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

I

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (commission) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), §5.012 and §5.013, gives the commission 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 commission, 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 provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

II

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

The property is owned by _____

This OSSF shall be covered by a maintenance contract for the first two years. After the initial two-year service agreement, the owner of an aerobic treatment system for a single family residence shall either obtain a maintenance contract within 30 days or maintain the system personally. All commercial aerobic treatment systems shall maintain a continuous maintenance contract.

Upon sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF may be obtained from the Karnes County Special Projects Office.

WITNESS BY HAND(S) ON THIS ____ DAY OF _____, _____.

(Owner(s) signature(s))

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS ____ DAY OF _____,
_____.

Notary Public, State of Texas
Notary's Printed Name:
My Commission Expires:

AUTHORIZATION TO CONSTRUCT
ON-SITE SEWERAGE FACILITY

Application Number _____ TCEQ Region Number 13 _____

Property Owner _____

Mailing Address _____

Property Location _____

Karnes County, TX. _____

This serves to notify all persons that an on-site sewerage facility application, related technical data, and the appropriate fees have been received by the County of Karnes from the property owner. The application has been reviewed for technical and administrative consideration against the standards set forth by the County of Karnes. Approval is hereby granted for the construction shown on the submitted plans and is based on the information provided in the application.

Any modification made to the submitted plans require approval by the County of Karnes prior to installation.

You or your installer must contact the approving office prior to completion to arrange the required facility inspection. The authorization to construct is valid for one year from the date of issue. If a final inspection has not been performed within one year of issue, a new application and fee will be required.

Comments: _____

Application reviewed by

Date

**COUNTY OF KARNES
LICENSE TO OPERATE
ON-SITE SEWERAGE FACILITY**

PERMIT # _____

CHECK # _____

DATE # _____

Property Owner _____

Mailing Address _____

Property Location or "911" address _____

Karnes County, Texas

This serves to notify all persons that the on-site sewerage facility owned by the above has satisfied design, construction, and installation requirements of the Texas Commission on Environmental Quality (TCEQ) and the County of Karnes. This TCEQ-Karnes County On-Site Sewerage Facility Permit is issued for the operation of the above-identified on-site facility.

ANY MODIFICATIONS TO THE STRUCTURE, SYSTEM COMPONENTS, OR CHANGES OF OWNERSHIP MAY REQUIRE A NEW PERMIT. The owner must notify this office of the aforementioned changes.

ADDITITONAL INFORMATION:

Inspector

Karnes County Designated Representative

Date _____