

Charles McDonald
Designated Representative
Coleman , Concho , Edwards , Menard , Schleicher and Sutton Counties
2375 Fishermans Road #52
San Angelo , TX. 76903
325-456-4607 Bus. & Cell
325-227-6333 Fax #
Lic. # OS0007644

Installers ,

The following information will help you and your client obtain an OSSF permit in Coleman County . All applications must be on Coleman County letterhead . The TCEQ forms will not be accepted . The checks are to be made out to Coleman County and the fees and applications are to be mailed to the above address . The fees are \$375.00 for a single family residents and \$375.00 for commercial . The applications must be filled out completely and all other information that the check list calls for must be with the application . The correct number of copies must also be with the application .

The Ten Acre rule is in effect in Coleman County . This rule applies to a full time single family Residence only. There are no exceptions.

Be sure that your Site and Soil evaluations are done correctly . If I have any questions about your evaluations we will check them together .

Every system that is installed will be of correct size according to the soil profile . The State rules do not address weekend or holiday use of the systems , neither will I .

The last item is water saving devices . Please be sure that these devices are actually installed in the home , Mobil home , cabin or building that you are designing a system for .

Sincerely ,

Charles McDonald
DR Coleman County
Lic # OS0007644

COLEMAN COUNTY

APPLICATION REQUIREMENTS FOR ON-SITE SEWAGE FACILITY PERMITS

SINGLE FAMILY DWELLING, FEE: \$375.00 **ALL OTHER TYPE FACILITIES, FEE: \$375.00**
(Commercial, multi-unit residential developments)

- **Obtain an OSSF application from the Coleman, County Court House.**
- **A licensed Soil/Site Evaluator or State licensed engineer must conduct a complete site evaluation.** A detailed report, documenting the results of the soil and site conditions in accordance with 30 TAC §285.30, & 30 TAC 285.31, must be submitted for all systems installed.
- **Have planning materials prepared by the required individual.** Standard systems may be prepared by the owner or the OSSF installer. Non-standard and proprietary systems must be prepared by a licensed professional engineer or a licensed professional registered sanitarian (RS), 30 TAC 285.5
- **Submit completed application and technical information sheets.** Remit the appropriate application fee and two copies of each of the following: complete site evaluation results; all planning materials and the directions to the site; a legally recorded affidavit, (if required) and a signed maintenance contract, (if required), 30 TAC 285.3(a)(1).
- **The application and planning materials will be reviewed by the Coleman County DR.** Non-standard planning materials may be reviewed by TCEQ Regional Staff or the TCEQ Central Office staff in Austin OSSF Support Program.
- **Upon approval, a written Authorization to Construct (ATC) will be issued in the name of the property Owner by mail.** The ATC is valid for one year from the date of issuance 30 TAC 285.3(d)(1).
- **The installer must notify the DR of Coleman County for the final inspection within at least five working days before the requested date of the final construction inspection. All excavations must be left open until the inspection has been completed.** 30 TAC 285.3(d)(2) & §285.61(11)
- **If the installation is approved, a written Notice of Approval, (NOA) will be issued to the owner within seven days.** 30 TAC 285.3(e)(1).
- **The OSSF Installer or the installer's registered apprentice on record must be present on site during all OSSF site inspections** 30 TAC 285.50(f), §285.61(9), (10).

NOTE: In the event of a re-inspection; the re-inspection fee equal to half the original permit fee shall be paid by the installer each time the system requires a re-inspection. All fees must be paid before the final Notice of Approval as final authorization is issued.

**ALL APPLICABLE OSSF APPLICATION FEES AND SYSTEM
RE-INSPECTION FEES MUST BE MADE PAYABLE TO THE
"COLEMAN COUNTY TREASURER OFFICE".**

**ALL FEES MUST BE PAID BY CHECK OR MONEY ORDER,
CASH WILL NOT BE ACCEPTED.**

&

ALL FEES ARE NON-REFUNDABLE

NEW INSTALLATION
OR
 REPAIR / ALTERATION

COLEMAN COUNTY
APPLICATION FOR ON-SITE SEWAGE FACILITY

100 WEST LIVEOAK STREET
COLEMAN, TEXAS 76834
325/456-4607
325/625-4218

COUNTY USE ONLY
APPLICATION NO. _____
DATE _____
AMOUNT _____

1. PROPERTY OWNER'S NAME: _____
(Last) (First) (Middle)
2. CURRENT MAILING ADDRESS: _____
3. DAYTIME TELEPHONE NO.: () _____
4. 911 SITE ADDRESS: _____
5. LEGAL DESCRIPTION: Sec. _____ Block _____ Lot _____ Plat Date _____
SUBDIVISION: _____
OTHER THAN SUBDIVISION: Acreage: _____ Survey Name: _____
Abstract Name/No.: _____
6. PHYSICAL LOCATION/ DIRECTIONS TO SITE: _____

7. SOURCE OF WATER: Private Well Public Water Supply _____
(Name of Supplier)
8. SINGLE FAMILY RESIDENCE: No. of Bedrooms _____ Living Area (ft²) _____
9. COMMERCIAL/INSTITUTIONAL (including multi-family residences) TYPE: _____
NO. OF EMPLOYEES/OCCUPANTS/UNITS: _____ DAYS OCCUPIED PER WEEK: _____
10. SITE EVALUATOR: _____ LICENSE NO. _____
PHONE NO.: _____
11. DESIGNER: _____ LICENSE NO. (PE or RS) _____
PHONE NO.: _____
12. INSTALLER: _____ LICENSE NO. _____
PHONE NO.: _____

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given to the Coleman County, Designated Representative to enter upon the above described property location for the purpose of clarification of the soil/site evaluation and all other related OSSF inspection and/or investigation activities.

(SIGNATURE OF OWNER)

(DATE)

**COLEMAN COUNTY
 AUTHORIZED AGENT OSSF PROGRAM
 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 Coleman County DR.
 Failure to include or address all of the following items may result in approval delays.

Application No. _____

Applicant's Site Information		Site Evaluator Information	
Name		Name	
Address		Address	
City, State, Zip		City, State, Zip	
Phone No.		Phone No.	
County		License No.	

Additional information: _____

SITE EVALUATION: A minimum of two soil borings or backhoe pits must be excavated at opposite ends of the proposed disposal area. The borings or pits must be excavated to a depth of two feet below the proposed excavation, or to a restrictive horizon, whichever is less. The boring or pit locations must be indicated on the site diagram. This report shall include a groundwater evaluation, a surface drainage analysis, and all applicable minimum separation requirements in regards to 30 TAC 285.91(10) (Table X).

PLANNING MATERIALS: The proposed treatment and effluent disposal system shall be prepared based on the site evaluation. The submittal requirements must include the following details.

- A legible scale drawing of the on-site sewage facility, showing all structures served.
- Any documents prepared by a professional engineer or professional registered sanitarian must be signed, sealed, and dated.
- Proposed designs must comply with all separation distances identified in 30 TAC 285.91(10) Table X.
- A sectional view of the tanks, including pump tanks, and excavations must be submitted.

Soil Boring/Backhoe Pit Number <u> #1 </u>						
Depth (Feet)	Soil Class 285.30(b)(1)(A)(i-v)	Gravel Analysis 285.30(b)(1)(B)	Restrictive Horizon 285.30(b)(1)(C)(i, ii)	Groundwater 285.30(b)(2)	Topography 285.30(b)(3)(A)	Flood Hazard 285.30(b)(3)(B)
0						
1 ft						
2 ft						
3 ft						
4 ft						
5 ft						
6 ft						
7ft						

Soil Boring/Backhoe Pit Number <u> #2 </u>						
Depth (Feet)	Soil Class 285.30(b)(1)(A)(i-v)	Gravel Analysis 285.30(b)(1)(B)	Restrictive Horizon 285.30(b)(1)(C)(i,ii)	Groundwater 285.30(b)(2)	Topography 285.30(b)(3)(A)	Flood Hazard 285.30(b)(3)(B)
0						
1ft.						
2ft						
3ft						
4ft						
5ft						
6ft						
7ft						

Schematic of Lot or Tract / Site Drawing

Scale: 1 inch = 50 feet/or appropriate

*If necessary the site diagram may be provided on separate pages.



Indicate Northern Direction

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

Signature: _____ Lic. No. OS Date: _____
 (Site Evaluator)