Phone: (806)-378-9472
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CITY OF AMARILLO® ENVIRONMENTAL HEALTH

OSSF Permit No.: _____

Date Paid: _____

Amarillo Area Public Health District

Application to install or alter an Aerobic On-Site Sewage Facility in Potter or Randall County

Permit Fees: See Current FY Fee Schedule

Property Owner's Name: _____

Property Owner's Mailing Address: (City, State, Zip) _____

Property Owner's Contact Info: Email: _____ Phone: _____

Installer's Name: _____ License #_____

Installer's Contact Info: Email: _____ Phone: _____

Designer's Name: _____ License No._____ ☐ PE ☐ RS/REHS

Designers Contact Info: Email: _____ Phone: _____

911 Address of Installation: (City, State, Zip) _____

Directions to Job Site: _____

_____

The information below may be obtained from the Potter/Randall Appraisal District at 806-358-1601 or on their website: www.prad.org

☐ Potter ☐ Randall Property ID: ___ ___ ___ ___ ___ __ Lot Size (In acres): _____

Subdivision/Survey: _____ Unit: _____ Block: _____ Lot: _____

Section: _____ Tract: _____

Permit Type: ☐ Residential ☐ Commercial

Permit Purpose: ☐ New Construction ☐ Replacement If Replacement, Existing permit No._____

Water Source on Property: ☐ Private Well ☐ Public Water Source – Supplier: _____

For wells drilled after December 18, 1996, and the well is pressure cemented, is a copy of the well log attached? - ☐ Yes ☐ No

OSSF gallons per day: _____

Soil Classification: ☐ Ia ☐ Ib ☐ II ☐ III ☐ IV Square footage of House/Building: _____

Water saving devices present: ☐ Yes ☐ No Number of bedrooms: _____

Tank Information: (Please list all tanks that will be used)

Aerobic Tank Manufacture/Model: _____/_____ Tash Tank Manufacture/Model: _____/_____

Pump Manufacture/Hp: _____/_____ Secondary containment: ☐ Yes ☐ No

Pipe specs -pre-tank(s) _____size /_____rating Pipe specs -post-tank(s) _____size /_____rating

Drainfield Information:

Type: ☐ Leaching Chambers ☐ Absorptive Mounds ☐ EZFLOW ☐ Pipe & Gravel ☐ Drip Irrigation ☐ LPD
☐ Evapo. Bed ☐ Pumped Effluent ☐ Trench Bed ☐ Surface App. ☐ Graveless Pipe ☐ Other

Total disposal area installed: _____ Total No. emitters/panels: _____

Excavation length: _____ft. Flow rate of each emitter: _____gph

Minimum application area: _____ Total No. sprinkler heads: _____

Irrigation timer required: ☐ Yes ☐ No Inlet sprinkler pressure: _____Max App. Rate:GPD/0.109

FOR COMMERCIAL SYSTEMS: DOMESTIC SEWAGE ONLY; NO HYDROCARBONS OR OTHER WASTE PRODUCTS

Type of facility (floor plan showing dimensions required for review) _____

Occupant load: _____ Occupant load factor(s) used: _____
(Ex: Warehouse-50P(Persons), Office area- 12P, Total 62P) (Ex: Warehouse 500gross, Business areas 150gross)

Floor drains present: ☐ Yes ☐ No If yes, what is the use of the floor drains: _____

A Professional Engineer or Registered Sanitarian must design the following On-Site Sewage Facilities and submit appropriate planning materials with this application:

Aerobic Treatment *Manufactured Housing Community* *Recreational Vehicle Parks* *OSSF In a Flood Plain* *Secondary Treatment*

Multi-Unit Residential *Low Pressure Dosing* *Soil Substitution* *Spray Application* *Mound Systems* *Sewage Recycling*

You must check the proper box with a yes, no, or not applicable					
From all the site characteristics listed below: Can you install the septic tank and drain field to at least the minimum distances shown?	To: Tank (in feet)	To: Drainfield (in feet)	YES	NO	N/A
Public Wells	50	150	☐		☐
Wells: Yours and Neighbors'	50	100	☐	☐	
Water Lines	10	10	☐	☐	
Property Lines	5	5	☐	☐	
Lakes, Streams, Ponds, and/or Creeks (include dry ones)	50	75	☐	☐	☐
Sharp slopes where seeps may occur	5	25	☐	☐	☐
Foundations, Buildings, and/or Surface Improvements, Swimming Pools	5	5	☐	☐	
Overhead and Underground Easements	1	1	☐	☐	☐
For any above question answered NO, a signed Variance Request must be included, and a Registered Sanitarian or Professional Engineer must design the system; include planning materials with this application					
Is the valid two-year maintenance contract attached?			☐	☐	
Is a copy of the "Maintenance Required" affidavit filed and recorded, and a copy attached?			☐	☐	
Will the maintenance provider follow the maintenance requirements listed in TAC §285.7?			☐	☐	

It is hereby stipulated and agreed by the undersigned, who is the applicant for such permit, that in consideration of the issuance of such permit, the said applicant will conform with all the provisions of Texas Chapter 285 On-Site Sewage Facilities and with all orders that may be made from time to time by the Health Officer. It is further stipulated and agreed that the Health Officer or his/her representative is granted permission to inspect the premises and system of the undersigned insofar as it pertains to the provisions of Texas Chapter 285 On-Site Sewage Facilities and that the information given herein is true and correct. It is further agreed that the applicant will provide all application materials to the Environmental Health Department including, but not limited to, Site and Soil Evaluation, scaled site plan, and a floor plan with dimensions. These application materials are subject to change at any time and without notice as determined by the Director of the Environmental Health Department.

It is further agreed that the associated fee will accompany this permit. **Prior to installation, which includes disturbing the soil, an Authorization to Construct (ATC) by the Environmental Health Department is required** and **a passing inspection by the Environmental Health Department must be completed before backfilling. Site evaluation holes are allowed by the Site Evaluator prior to the ATC.** Once this application is approved, the ATC will be valid for a period of one year. There will be an additional **$150 trip fee for each inspection if more than one inspection is needed**. Any applicant can appeal decisions and inspections relating to the installation of this septic system by requesting an Administrative Hearing. The Director of the Environmental Health Department can furnish details of this process.

Are you familiar with all the provisions of Texas Chapter 285 On-Site Sewage Facilities? ☐ Yes ☐ No

If using graveless pipe or leaching chambers, are you familiar with the installation requirements? ☐ Yes ☐ No

_____ License No.: _____ Date: _____

Owner's Agent signature (Owner's Agent may be an Installer, Professional Sanitarian, or Professional Engineer)

_____ Date: _____

Property Owner's signature

The property owner's signature must be obtained to grant permission for the agent to obtain the necessary permits for the installation of an On-Site Sewage Facility

FOR OFFICAL USE ONLY

Payment Information:

Payment Type: ☐ Cash ☐ Credit Card- Type: _____ Authorization No.: _____ ☐ Check No.: _____

Permit Amt Paid: _____ Merchant Service Fee Amt Paid: _____ Receipt No.: _____

Application Review Information:

Date Authorization to Construct Issued: _____ (ATC expires one-calendar year from the date the ATC was issued)

Authorization to Construct Issued By: _____

Inspection Information:

Date Operational Permit Issued: _____

Designated Representative Signature: _____ License: OS_____

Amarillo Area Public Health District

Application for a Site and Soil Evaluation in Potter or Randall County

ALL INFORMATION MUST BE COMPLETE OR THE SITE EVALUATION MAY BE REJECTED

Requirements:

1. At least two soil excavations must be performed on the site, at opposite ends of the disposal area, by a licensed Site Evaluator or Professional Engineer.
2. Locations of the evaluation holes must be shown on the site drawing.
3. For subsurface disposal, soil evaluations must be dug to a depth of at least two feet below the bottom of the excavation.
4. For surface disposal, the surface horizon must be evaluated to at least two feet below the bottom of the surface (design criteria must be included).

Site Evaluator Contract Information:

Site Evaluator Name: _____License No: _____ ☐ PE ☐ SE

Phone No.: _____ Email Address: _____

Property Information:

911 Address of Proposed Installation: (City, State, Zip) _____

Number of structures on the property: _____ Estimated total GPD produced on property (5,000 or less): _____

The disposal and treatment method shall be considered suitable for the soil class determined during the soil evaluation as mentioned in Texas Administrative Code Chapter 285 Table V and Table XIII.

Soil Boring Number #1:

Depth (inches)		**Soil Class** Ia, Ib, II, III, or IV	**Soil Texture**	**Soil Drainage** Mottling water table presence	**Restrictive Horizon**	**Munsell Color**

Soil Boring Number #2:

Depth (inches)		**Soil Class** Ia, Ib, II, III, or IV	**Soil Texture**	**Soil Drainage** Mottling water table presence	**Restrictive Horizon**	**Munsell Color**

Gravel present in class II or class III soil: ☐ Yes ☐ No % by volume and size: _____%/_____

If yes, a gravel analysis shall be done and must contain less than 30% gravel and gravel greater than 2.0mm

Presence of 100-year floodplain or Floodway: ☐ Yes ☐ No If yes, a copy of the FEMA floodplain map shall be included, and special planning materials must be prepared by a Professional Sanitarian or Professional Engineer

SCALED SITE PLAN

A scaled site plan showing the location of the OSSF and all pertinent features such as, but not limited to, Floodplain and Floodway information, natural, constructed, or proposed drainage ways (streams, ponds, lakes, rivers), all known private and public water wells within a 150’ radius, potable and non-potable water lines, property slope, swimming pools, easements, surface improvements, driveways, site evaluation holes, scaled measurement used and a North-arrow for spatial reference.

If the property is larger than 5-acres, a vicinity map shall be provided. The vicinity map is not required to be to-scale.

I certify that the findings of this report are based on my field observations at the site location and are accurate to the best of my ability. I also understand if the soil classification is disputed, it can be requested to submit a soil analysis by a laboratory to support the findings.

Signature of Site Evaluator/ License No.

Date

Mail Application and Permit Fee To:
Environmental Health Department
PO Box 1971
Amarillo, TX 79105-1971

Physical Address:
Environmental Health Department
808 S. Buchanan St
Amarillo, TX 79101