ON-SITE SEWAGE FACILITY (OSSF) APPLICATION
FOR

Single Family Residence: Commercial/Institutional Facility:
Name of Owner: Name of Owner: Name of Company:
Name of Company:

Property Address: Mailing Address: City & Zip Code: Telephone Number:

Procedures for obtaining OSSF permit

1. Submit signed statement from Dallas County Public Works Department verifying that property is not in the 100 year flood prone/plain area (214) 653-7151. If, in a contracting City, the letter must come from that particular City's official (copy of contracting cities enclosed). All buildings and the OSSF must be up out of the flood plain.

2. Submit site evaluation report which must be performed by a T.C.E.Q. licensed Site Evaluator.

3. Submit copy of property plat or survey.

4. Submit a copy of the OSSF design. The OSSF may be designed by a Registered Sanitarian or Registered Professional Engineer licensed to practice in the State of Texas and who is knowledgeable in OSSF designs. All designs must use the most recent design standards and data as published by the T.C.E.Q. If all of the soil or site criteria categories are determined to be suitable, an absorptive drainfield design should be submitted, along with any other valid design proposed by the designer.

a. For ET drainfield installations; an affidavit stating the flow rate must be filed and recorded in the deed records at the County Clerk's office* advising the owner/future owners of the ET drainfield's wastewater disposal limits. A copy of the affidavit must be submitted along with the other planning materials for obtaining a permit.

b. For surface irrigation system; (1) submit a copy of a valid maintenance contract with a valid maintenance company (2) submit a copy of an affidavit which has been duly recorded at the County Clerk's office* and filed in reference to the real property deed on which the surface application system is to be installed. *Records Bldg, 509 Main St., Dallas, TX. (214) 653-7131.
5. Submit check/money order payable to: Dallas County Health and Human Services in the amount of $260.00 (Single Family Residence) Services in the amount of $310.00 (Commercial)

*ATTENTION INSTALLERS AND HOMEOWNERS: MUST PRESENT (Driver’s License when paying for a set-up.) WE DO NOT HAVE THE CAPABILITY OF ACCEPTING DEBIT OR CREDIT CARD PAYMENTS. PLEASE HAVE THE EXACT CHANGE, CHECK (PERSONAL, CASHIER’S, COMPANY), OR MONEY ORDER.

6. Submit signed copy of application by the owner. This application must be filled out in its entirety as applicable. Planning materials in numbers 1 through 4 must be submitted along with application or it will be rejected. Allow a minimum of 10 working days for application and planning materials to be reviewed before permit to construct will be issued.

Address of Proposed OSSF: __________________________________________ City __________________________
Zip Code _______ Est. Date of OSSF Installation __________________ Lot Size ______________
Lot No. _______ Blk. No. _______ Subdivision Name __________________________
Travel Directions (if needed) __________________________________________

MAPSCO #: _________________________________________________________

SINGLE FAMILY RESIDENCE:
# of Bedrooms _______ # of Baths _______ Square ft. of living area
Washing machine _______ Dishwasher _______ Garbage Disposal _______ Other Connections

COMMERCIAL/INSTITUTIONAL FACILITY:
List origin, description and quantity per day of ALL WASTES that are to be disposed of through the OSSF __________________________________________________________

Number of persons normally using premises __________________________________________
Is structure serviced by water well? Yes _______ No _______
If water supply is Public, submit suppliers name and phone number __________________________
Distance of water line serving house to OSSF __________________________
Distance of a stream, pond, wells or lake to the OSSF ________________________________________

Name, address, phone number and certification number of Licensed Installer (if known): ________________________________________________________________________________________
Is there another home, business, or OSSF on any other part of this property?

If the answer to this question is YES, please contact our office immediately at (214) 819-2115.

Signature of Owner

Date

DALLAS COUNTY HEALTH AND HUMAN SERVICES DEPARTMENT
Environmental Health Division
2377 N. Stemmons Fwy. - 6th Floor, Rm. 607
Dallas, Texas 75207
(214) 819-2115
AFFIDAVIT TO THE PUBLIC
OSSF - ET DRAINFILL

THE COUNTY OF DALLAS
STATE OF TEXAS

Before me, the undersigned authority, on this day personally appeared ______________________, who after being by me duly sworn, upon oath states that he or she is the owner of record of that certain tract or parcel of land lying and being situated in Dallas County, Texas, and being more particularly described as follows: (include street address and legal description)

The undersigned further states that he or she will, upon any sale or transfer of the above-described property, request a transfer of the permit to operate such surface application system to the buyer or transferee. Any buyer or transferee is hereby notified that a maintenance contract with an approved maintenance company will be required for the use of the system and will need to be submitted to Dallas County Health and Human Services, Environmental Health Division within 30 days after the property has been transferred. A copy of the planning materials for the on-site sewage facility can be obtained from Dallas County Health and Human Services, Environmental Health Division.

Witness my/our hands(s) on this ______ day of ____________, ______

________________________________________
Notary Public, State of Texas

________________________________________
Notary’s Printed Name

My Commission Expires:

This document must be filed at the Dallas County Clerk’s Office* (214) 653-7441 8:00AM - 4:30PM
Records Building
509 Main Street
Dallas, TX. 75202

*An original or copy of the filed document is to be submitted with the OSSF Application and other planning materials to Dallas County Environmental Health Division.
AFFIDAVIT TO THE PUBLIC
OSSF - AEROBIC TREATMENT SYSTEM

THE COUNTY OF DALLAS
STATE OF TEXAS

Before me, the undersigned authority, on this day personally appeared __________________________, who after being by me duly sworn, upon oath states that he or she is the owner of record of that certain tract or parcel of land lying and being situated in Dallas County, Texas, and being more particularly described as follows: (include street address and legal description)

The undersigned further states that he or she will, upon any sale or transfer of the above-described property, request a transfer of the permit to operate such aerobic treatment system to the buyer or transferee. Any buyer or transferee is hereby notified that a maintenance contract with an approved maintenance company will be required for the use of the system and will need to be submitted to Dallas County Health and Human Services, Environmental Health Division within 30 days after the property has been transferred. A copy of the planning materials for the on-site sewage facility can be obtained from Dallas County Health and Human Services, Environmental Health Division.

Witness my/our hands(s) on this ______ day of ________________, 20___

________________________________________

________________________________________

Notary Public, State of Texas

________________________________________

Notary’s Printed Name

________________________________________

My Commission Expires:

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Dallas, TX. 75202

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THE STATE OF TEXAS

COUNTY OF

BEFORE ME, the undersigned authority, on this day personally appeared

________________________ known to be the person (s) whose name is/are subscribed to the

foregoing instrument and acknowledge to me that he executed the same for the purpose and

consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE

this ______ day of __________, ________

NOTARY PUBLIC, in and for

_____________________, COUNTY, TEXAS.
AFFIDAVIT TO THE PUBLIC
OSSF – SURFACE APPLICATION SYSTEM

THE COUNTY OF DALLAS
STATE OF TEXAS

Before me, the undersigned authority, on this day personally appeared ________________, who after being by me duly sworn, upon oath states that he or she is the owner of record of that certain tract or parcel of land lying and being situated in Dallas County, Texas, and being more particularly described as follows: (include street address and legal description)

The undersigned further states that he or she will, upon any sale or transfer of the above-described property, request a transfer of the permit to operate such surface application system to the buyer or transferee. Any buyer or transferee is hereby notified that a maintenance contract with an approved maintenance company will be required for the use of the system and will need to be submitted to Dallas County Health and Human Services, Environmental Health Division within 30 days after the property has been transferred. A copy of the planning materials for the on-site sewage facility can be obtained from Dallas County Health and Human Services, Environmental Health Division.

Witness my/our hands(s) on this _______ day of ________________, ______

________________________________________
Notary Public, State of Texas

________________________________________
Notary’s Printed Name

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THE STATE OF TEXAS §
COUNTY OF §

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________________________ known to be the person (s) whose name is/are subscribed to the
foregoing instrument and acknowledge to me that he executed the same for the purpose and
consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE

this ________ day of _____________

NOTARY PUBLIC, in and for

________________________, COUNTY, TEXAS.