

# On-Site Sewage Facility Application Packet

## Victoria County Public Health Department Environmental Services



**Public Health**  
Prevent. Promote. Protect.

Cuero-DeWitt County Health Department  
106 N. Gonzales  
Cuero, Texas 77954

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Victoria County Public Health Department  
2805 North Navarro  
Victoria, Texas 77901  
**(361) 578-6281      Fax: (361) 579-6348**

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On-Site Sewage Facility Application Packets are available at both health departments noted above. Please address all questions to the Victoria County Public Health Department Environmental Services Division at (361)578-6281. **All completed applications must be submitted to the Victoria County Public Health Department Environmental Services in person, by mail, or by fax.**

**Victoria County Public Health Department  
Environmental Services  
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This document is **not** intended to be a comprehensive manual for the installation of all On-Site Sewage Facilities (OSSF). It is a basic guideline and information source for all planning materials that must be submitted with each OSSF application for Calhoun, DeWitt, and Victoria Counties under current Texas Commission on Environmental Quality regulations. The Victoria County Public Health Department Environmental Services reserves the right to modify this OSSF application package and OSSF forms at any time as deemed necessary to enforce OSSF state regulations and local ordinances.

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**PERMIT FEES**

**CALHOUN COUNTY** **\$ 35.00**

**DEWITT COUNTY**

<b>New Installation . . . . .</b>	<b>\$ 110.00</b>
<b>Repair/Alteration . . . . .</b>	<b>\$ 50.00</b>

**VICTORIA COUNTY**

<b>Residential . . . . .</b>	<b>\$ 285.00</b>
<b>Commercial . . . . .</b>	<b>\$ 385.00</b>
<b>Reinspection . . . . .</b>	<b>\$ 100.00</b>

## On-Site Sewage Facility Application Checklist

The following information must be included with the OSSF application when submitted for review. **Failure to complete and include the following items may result in application approval delays.**

- 1. Completed **Application for On-Site Sewage Facility Construction** and signed by the owner.
- 2. OSSF Permit Fee **Receipt** (Victoria and Calhoun Counties pay at the Victoria County Public Health Department. DeWitt County permits are paid at the DeWitt County Judge’s office in Cuero, TX)
- 3. **Property Description with Owner Verification.** (Available at the county appraisal district and or the county clerk’s office)
- 4. **Plat** of the property with approximate location of the proposed OSSF indicated for property 2 acres or less. (Available at county clerk’s office and/or county appraisal district)
- 5. **Soil & Site Evaluation** by Certified Soil & Site Evaluator/Professional Engineer.
- 6. **OSSF Design Plan. Separation and setback distances** identified in Table X (included in packet).
  - Location of the **proposed treatment unit** and **disposal area** including **existing / failing drainfield.**
  - Location of the **water softener, reverse, osmosis system,** etc. including **plumbing to the pump tank.**
  - Water Wells** on site and adjacent properties identified on the design. Include on-site **water lines.**
  - Easements** and **bodies of water** identified.
  - Location of **soil borings.**
  - Identify **property lines, out buildings, gardens, ditches, ponds, play gyms, driveways, swimming pools, etc.**
  - Landscape Plan** which specifies the vegetation that will be on site.
- 7. Signed **Floodplain certification or current FEMA Floodplain map** location.
  - If in a floodplain, include provisions that will be taken to prevent contamination during flooding.
- 8. Signed and filed **Affidavit** (for Aerobic, Variance, Unjoined Lots ).
- 9. **Maintenance / Pumping contract** (if required).
- 10. ETJ Variance Granted (by City Council).
- 11. Well Log / Plugging Report (if required).
- 12. Variance Request Form.
- 13. Partial Cover-Up Request Form.
- 14. Soil & Site Verification Request Form.
- 15. **Map** or directions to site.

Deficiencies:

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DR Signature - OS# - Date  
Approve – Disapprove

DR Signature - OS# - Date  
Approve – Disapprove

DR Signature - OS# - Date  
Approve - Disapprove

Contacted \_\_\_\_\_ on deficiencies. \_\_\_\_\_

Installer’s Name

DR Name

Date Time

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## Applying for an On-Site Sewage Facility Operating Permit

*Application for a permit shall be made on standard forms provided by the Victoria County Public Health Department Environmental Services and must include the appropriate planning materials in accordance with 30 TAC § 285.5 of the State of Texas On-Site Sewage Facilities Rules and Regulatory Guidance [OSSF Rules]. Address all questions to the Environmental Services at (361) 578-6281. **Incomplete** applications will **not** be processed.*

1. Obtain a copy of the property plat (or survey if a plat is not available) from local tax appraisal district or county clerk, and the date the property was platted. The copy should note all boundaries, easements, and rights-of-way. *Indicate the approximate location of proposed OSSF on the plat.* Property size and proposed OSSF must follow the parameters given in 30 TAC § 285.4 - 285.6 of the OSSF Rules. Copies of the OSSF Rules are available at the health department in Victoria for \$3.
2. Have a Certified Site Evaluator or Professional Engineer complete a soil and site evaluation of the proposed OSSF location *using the enclosed soil and site evaluation form.* Additional soil and site evaluation information may be attached to the evaluation. The soil and site evaluation must address all required elements as specified in 30 TAC § 285.30 and 285.31 of the OSSF Rules, to include:
  - a. Soil texture analysis (include soil color);
  - b. Gravel analysis for Class II and III soils;
  - c. Restrictive horizons analysis (bedrock, clay pan, water table, etc.);
  - d. Groundwater evaluation (presence, size and color of mottling; seasonal water table; water table depth as per Soil Survey; etc.);
  - e. Surface drainage analysis (*which includes topography and flood hazard*); and
  - f. Separation requirements (Table X).
3. Determine if the site can be utilized for standard subsurface absorption system (gravity). (*See Table V: Criteria for Standard Subsurface Absorption Systems included for your reference.*)
4. If site is not suitable for standard subsurface absorption, determine the type of Non-standard/Proprietary\*\* system to be proposed for the property. (*Table XIII, included for your reference, contains some of the many types of OSSFs available and the conditions that must be present. Some OSSFs are not recommended for this area, but in most cases there is more than one type of system that can be installed.*)

\*\*Note: Non-standard/Proprietary systems require a Professional Engineer or Registered Sanitarian design, and must be installed by an Installer that holds a Class II License from the State of Texas unless the homeowner is installing. A homeowner may install their own standard septic system but the owner must meet all permitting, construction, and maintenance requirements of the permitting authority.

5. OSSF Design Plan: **All design plans must be drawn to scale** and must include the following items:
  - a. Location of home.
  - b. Location of all water wells (including proposed) on the property and adjacent property.
  - c. Boundaries of the property, including distance from OSSF.
  - d. Location of all easements, water lines, rights-of-way, creeks, ponds, lakes and all setbacks listed on Table X (included for your reference).
  - e. All distances should be noted in feet. (For example: If the distance from the well to drainfield is 100 ft, a line should be drawn from location of well to corner of drainfield and labeled 100 ft.)
  - f. All on-site sewage facility components must be shown in detail. For example, location of soil borings, size (length, width and height) and placement of tanks; clean outs; trench length, width, and depth; distance between trenches; location of spray heads for surface irrigation; distance from tanks to drainfield or spray irrigation area; and distance to property lines, easements, home, water well(s), out

buildings, gardens, ditches, driveways, swimming pools, play gyms. **Accurate measurements must be obtained for future reference of OSSF components.**

- g. Drain lines from water treatment systems, including but not limited to, water softeners and reverse osmosis systems, shall be noted.
- 6. If a landscape design, well log, recorded affidavit to the public, or maintenance contract is required, it must be submitted with the OSSF application for review.
- 7. *Floodplain certification* signed by representative of County Floodplain Administration. A current FEMA floodplain map may also be used.
- 8. A map and/or directions to the proposed OSSF site along with “911” address/physical address. **The legal description of the property must be noted on application form.**
- 9. Any request for a *variance* to the OSSF Rules must be prepared by a Professional Engineer or Registered Sanitarian, sealed, and submitted with application on the enclosed Variance Request Form. **Variations will only be considered when all other possible OSSF systems not requiring a variance from TCEQ Rules have been ruled out as suitable for the location.**
- 10. Any request for a *soil and site verification* must be submitted on the enclosed request form. The request must include all of the sources utilized by the requestor in attempting to resolve the soil and site evaluation question.
- 11. Any request for a *partial cover-up* of the OSSF prior to final inspection must be submitted on the enclosed form and include justifiable reasons for the request. In some cases, a verbal request may be accepted.
- 12. *Application for On-Site Sewerage Facility Construction* form must be completely filled out with all required information and signed by the property owner.

**When the OSSF application is complete (including OSSF application fee), submit the application to the Victoria County Public Health Department Environmental Services at 2805 N. Navarro in Victoria, Texas. Application packages can also be mailed to the same address or faxed to (361) 579-6348.**

- 13. Applications will be reviewed in the order in which they are received and ONLY if the application is complete. The cost for the permit is based on the county where the OSSF will be located. The completed application will be recorded as received, upon arrival, and assigned a log number. **\*\*\*PLEASE NOTE THIS IS ONLY A RECEIPT VERIFYING PAYMENT, NOT AN AUTHORIZATION TO CONSTRUCT.** The permitting authority has 30 days in which to approve or deny the application. Most applications should be reviewed within one week. Fees are paid at the following locations:

Calhoun County-	Victoria County Public Health Department
DeWitt County-	DeWitt County Judge’s office in Cuero, Texas
Victoria County-	Victoria County Public Health Department

- 14. Complete applications will be reviewed by the Designated Representative (DR) Quality Assurance (QA) Team. The DR-QA Team reviews the application to determine if the proposed OSSF is appropriate for the site as described in the submitted soil and site evaluation. At the Team’s discretion, a **soil and site verification** inspection may be conducted prior to Authorization to Construct being granted. The purpose for the site verification is to confirm soil quality/classification and site conditions as recorded in applicant’s site evaluation and OSSF planning materials. The assigned DR will normally contact the applicant to inform him/her of the intent to conduct a soil and site verification. The DR reserves the right to conduct an unannounced soil and site verification/inspection at any time during the application process.



15. After all information submitted on the OSSF application and planning materials has been verified and reviewed; an **Authorization to Construct** may be issued. An Authorization to Construct is valid for one year from the date it is issued. After one year, the property owner must submit a new OSSF application and pay for a new permit.
16. Once Authorization to Construct has been granted, and the installer/homeowner is ready for the **final inspection**, the installer/homeowner must notify VCPHD at least 24 hours in advance to schedule the inspection. **Under no circumstances will scheduled appointments with VCPHD be cancelled to accommodate an installer/homeowner that fails to schedule an inspection at least 24 hours in advance.**

**All portions of the OSSF are to be uncovered** at the time of final inspection, unless prior approval from a DR is granted. If a system needs to be partially covered for legitimate safety reasons, an OSSF Partial Cover-Up Request form must be completed and turned in along with the application or prior to scheduling the final inspection. Any OSSF that is covered without DR approval before the final inspection will not be granted a Notice of Approval to operate until the system is uncovered. The DR will schedule a reinspection when the OSSF has been uncovered.

The DR may require the installer to demonstrate that the OSSF system is operating correctly during the final inspection before a Notice of Approval is granted.

17. If the OSSF system passes final inspection, the DR will issue a **Notice of Approval to Operate On-Site Sewage Facility and a Permit Number**. The Approval to Operate will not be issued until updated planning materials, such as an “As Installed” drawing, are received, and the OSSF is installed as per the planning materials and state law. The system may then operate for disposal of on-site wastewater.

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VICTORIA COUNTY PUBLIC HEALTH DEPARTMENT  
ENVIRONMENTAL SERVICES

Application for On-Site Sewage Facility  
Construction

VCPHD USE ONLY

- New
 Replacement
 Alteration

County
Application Date
Receipt No.
Application Log No.

Property Owner Name:
Mailing Address:
Telephone Numbers:

OSSF Site Address: Subdivision:

Legal Description: Acres:

(Section/Tract) (Block) (Lot)
Water Source: Private Water Well Public: Water Saving Devices: Yes No
Water Treatment System: Yes No

Single Family Residence: No. Bedrooms: Square Footage: Other:

Commercial/Institution/Multi-Family: No. Employees/Occupants/Units: Days/wk Occupied:

I. Treatment Unit: Daily Wastewater Usage Rate: gallons/day (gpd)

- A. Septic Tank Size: gal. # Tanks/Compartments:
Pump Tank Size: gal. 1st Tank/Compartment Volume: gal.
B. Aerobic Model: Size: gpd
Manufacturer:

C. Other:

II. Disposal System: Drainfield Area: sq ft Trench Depth: inches

- A. Gravity
4" with gravel ft Trench width ft Gravel depth ft
8" gravelless ft 10" gravelless ft Evapotranspiration Bed
Multipipe -pipe bundle ft Leaching Chamber ft or panels
B. Other
Low Pressure Dosed ft Trench width ft Gravel depth inches
Surface Irrigation sq ft Drip Irrigation ft
Mound Other

Site Evaluator: Cert./License No. Telephone:
Designer: R.S./P.E. No. Telephone:
Installer: Registration No. Telephone:

VICTORIA COUNTY ONLY: \$100 REINSPECTION FEE MAY BE REQUIRED

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given to the authorized agent to enter upon the above described property for the purpose of lot evaluation and inspection of the on-site sewage facility and that a permit to operate the facility will be granted following successful inspection of the installed system which indicates that the system was installed in compliance with 30 TAC § 285, On-Site Sewage Facility Rules.

Signature of Owner Date

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Victoria County Public Health Department  
Environmental Services  
**On-Site Sewage Facility Soil and Site Evaluation**

Date Performed: \_\_\_\_\_

New Installation\_\_\_\_ Replacement\_\_\_\_ Alteration\_\_\_\_

**Property Owner's Information**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Zip Code \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Certified Site Evaluator/PE Information**

Name \_\_\_\_\_  
Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Zip Code \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
TCEQ Registration Number \_\_\_\_\_

**Property Description**

Plat Date \_\_\_\_\_  
Sec \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street/Road Address \_\_\_\_\_  
County \_\_\_\_\_ Unincorporated Area?  
City \_\_\_\_\_ Zip Code \_\_\_\_\_  
Property Size \_\_\_\_\_ Acreage \_\_\_\_\_  
Survey \_\_\_\_\_ Abstract \_\_\_\_\_  
Additional Information \_\_\_\_\_

**Installer Information**

Name \_\_\_\_\_  
Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Zip Code \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
TCEQ Registration Number \_\_\_\_\_

**TOPOGRAPHY**

- | Slope                                      | Vegetation                                 | Site<br>Drainage                  | Reference Soil Survey Book  |
|--|--|-----------------------------------|---|
| <input type="checkbox"/> Flat (under 2%)   | <input type="checkbox"/> Grass/Brush       | <input type="checkbox"/> Poor     | <input type="checkbox"/> Seasonal water table                                       |
| <input type="checkbox"/> Slight (under 4%) | <input type="checkbox"/> Lightly<br>Wooded | <input type="checkbox"/> Adequate | <input type="checkbox"/> Water table (upper water shed) evident<br>Depth: _____     |
| <input type="checkbox"/> Severe (over 5%)  | <input type="checkbox"/> Heavily<br>Wooded | <input type="checkbox"/> Good     | <input type="checkbox"/> Presence of adjacent ponds, streams, water<br>impoundments |

Comments/Observations: \_\_\_\_\_

**WATER SUPPLY**

Private \_\_\_\_\_ Public \_\_\_\_\_ Name of public water supplier \_\_\_\_\_

For on-site water well:

Is water well less than 100 feet from drainfield?  
\*If yes, attach documentation, i.e. well log or driller affidavit,  
that well is pressure cemented or grouted to required depth.

Neighboring wells within 100 feet of property line?  
\*If neighboring wells exist they must be shown on the design.

Water saving devices

- Water softener       Reverse osmosis system       Other: \_\_\_\_\_

## SOIL EVALUATION

**Requirements:**

- At least two soil evaluations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil boring or dug pits must be shown on the drawing.
- For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed trench depth. For surface disposal, the surface horizon must be evaluated.
- Please describe each soil horizon and identify any restrictive features in the space provided below. Draw lines at the appropriate depth.

Proposed Trench Depth \_\_\_\_\_ (Will be 18" to 36" unless designed by P.E. or R.S.)

Soil Boring Number _____					
Depth (Feet)	Textural Class	Soil Texture And Color	Gravel Analysis For Class II and III	Drainage (Mottles/Water Table) indicate color of mottling	Restrictive Horizon
0					
1					
2					
3					
4					
5					
6					

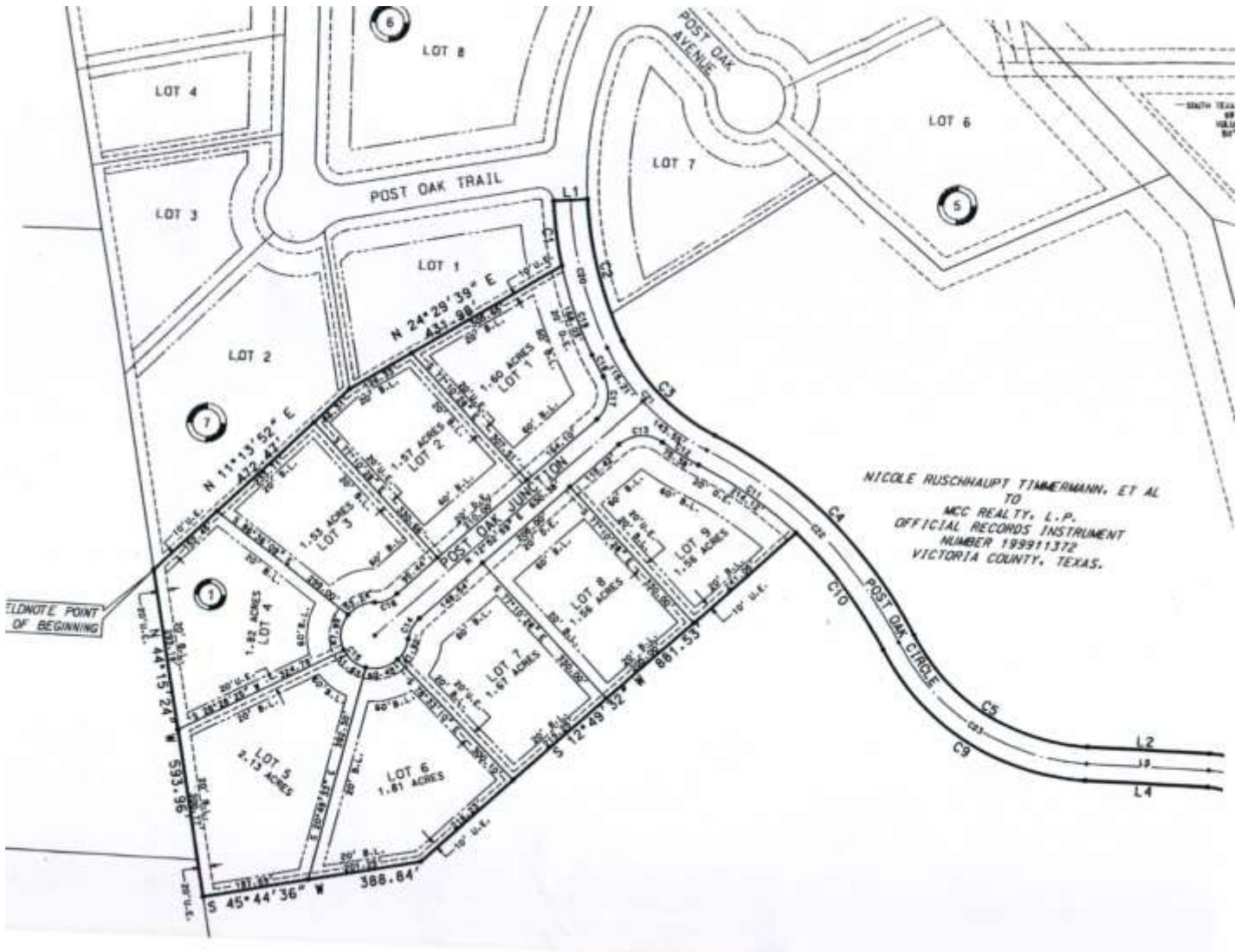
Soil Boring Number _____					
Depth (Feet)	Textural Class	Soil Texture And Color	Gravel Analysis For Class II and III	Drainage (Mottles/Water Table) indicate color of mottling	Restrictive Horizon
0					
1					
2					
3					
4					
5					
6					

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 Certified Site Evaluator/PE & License #

\_\_\_\_\_  
Date

# Example of Property Plat



**Table V. Criteria for Standard Subsurface Absorption Systems.**

Figure: 30 TAC §285.91(5)

FACTORS	SUITABLE (S)	UNSUITABLE (U)
Topography	Slopes 0-30%	Slopes greater than 30% Complex slopes
Subsoil Texture	Soil Class Ib, II, or III soils along the sidewall and two feet below the bottom of the excavation	Soil Class Ia soils along the sidewall or within two feet below the bottom of the excavation (Except for lined ET)  Soil Class IV along the sidewall or within two feet below the bottom of the excavation (Except for pumped effluent and ET)
Restrictive Horizon	No restrictive horizon intersects the sidewall or is within 24 inches below the bottom of the proposed excavation.	A restrictive horizon intersects the sidewall or is within 24 inches below the bottom of the proposed excavation (Except as indicated in §285.33(b)(1)(A)(vi))
Gravel analysis	In Class II or III soils, only; Gravel portion less than 30% and gravel greater than 2.0 mm; or If greater than 30% gravel, 80% of the gravel portion must be less than 5.0 mm	All other Class II and III soils, which contain gravel in excess of what is described as suitable  All other soils with greater than 30% gravel
Groundwater	No indication of seasonal groundwater anywhere within 24 inches of the bottom of the proposed excavation.	Indications of seasonal groundwater or drainage mottles anywhere within 24 inches of the bottom of the proposed excavation (Except for lined ET)
Flood Hazard	No flooding potential.	Areas located in the floodplain and regulatory floodway unless system designed according to §285.31(c)(2)  Depressional areas without adequate drainage
Other		Fill material



**Table X. Minimum Required Separation Distances for On-Site Sewage Facilities.**  
 Figure: 30 TAC §285.91(10)

	TO					
FROM	Tanks	Soil Absorption Systems, & Unlined ET Beds	Lined Evapotranspiration Beds	Sewer Pipe With Watertight Joints	Surface Application (Edge of Spray Area)	Drip Irrigation
Public Water Wells <sup>2</sup>	50	150	150	50	150	150
Public Water Supply Lines <sup>2</sup>	10	10	10	10	10	10
Wells and Underground Cisterns	50	100	50	20	100	100
Private Water Line	10	10	5	10 <sup>5</sup> except at connection to structure	No separation distances	10
Wells (Pressure Cemented or Grouted to 100 ft. or Pressure Cemented or Grouted to Watertable if Watertable is Less Than 100 ft. deep)	50	50	50	20	50	50
Streams, Ponds, Lakes, Rivers, Creeks (Measured From Normal Pool Elevation and Water Level); Salt Water Bodies (High Tide Only)	50	75, LPD (Secondary Treatment & Disinfection) - 50	50	20	50	25 when $R_a \leq 0.1$ 75 when $R_a > 0.1$ (With Secondary Treatment & Disinfection - 50)

**Table X. Minimum Required Separation Distances for On-Site Sewage Facilities.**  
 Figure: 30 TAC §285.91(10)

FROM	TO					
	Tanks	Soil Absorption Systems, & Unlined ET Beds	Lined Evapotranspiration Beds	Sewer Pipe With Watertight Joints	Surface Application (Edge of Spray Area)	Drip Irrigation
Foundations, Buildings, Surface Improvements, Property Lines, Easements, Swimming Pools, and Other Structures	5	5	5	5	No Separation Distances Except: Property lines - 20 <sup>6</sup> Swimming Pools - 25	No Separation Distances Except <sup>4</sup> : Property Lines - 5
Slopes Where Seeps may Occur	0 (special support may be required for zero separation distances)	25	5	10	25	10 when $R_a \leq 0.1$ 25 when $R_a > 0.1$
Edwards Aquifer Recharge Features (See Chapter 213 of this title relating to Edwards Aquifer) <sup>3</sup>	50	150	50	50	150	100 when $R_a \leq 0.1$ 150 when $R_a > 0.1$

1. All distances measured in feet, unless otherwise indicated.
2. For additional information or revisions to these separation distances, see Chapter 290 of this title (relating to Public Drinking Water).
3. No OSSF may be installed closer than 75 feet from the banks of the Nueces, Dry Frio, Frio, or Sabinal Rivers downstream from the northern Uvalde County line to the recharge zone.
4. Drip irrigation lines may not be placed under foundations.
5. Private water line/wastewater line crossings should be treated as public water line crossings, see Chapter 290 of this title (relating to Public Drinking Water).
6. Separation distance may be reduced to 10 feet when sprinkler operation is controlled by commercial timer. See §285.33(d)(2)(G)(i).

## TABLE XIII: DISPOSAL AND TREATMENT SELECTION CRITERIA

Figure: 30 TAC §285.91(13)

ON-SITE SEWAGE FACILITY <sup>(9)</sup> (OSSF)	SOIL TEXTURE OR FRACTURED ROCK <sup>(10)</sup> (MOST RESTRICTIVE CLASS ALONG MEDIA <sup>(1)</sup> or 2 FEET BELOW EXCAVATION)				MINIMUM DEPTH TO GROUNDWATER	MINIMUM DEPTH TO RESTRICTIVE HORIZON <sup>(1)</sup>
	Class Ia	Class Ib, II <sup>(8)</sup> or III <sup>(8)</sup>	Class IV	Fractured Rock	MEASURED FROM BOTTOM OF MEDIA <sup>(7)</sup>	MEASURED FROM BOTTOM OF MEDIA <sup>(7)</sup>
Disposal Method (section) Treatment						
Absorptive drainfield <sup>(2)</sup> (285.33(b)(1))Septic tank	U	S	U	U	2 feet	2 feet
Absorptive drainfield <sup>(2)</sup> Secondary treatment	S <sup>(5)</sup>	S	U	S <sup>(5)</sup>	2 feet	2 feet
Lined E-T <sup>(2)</sup> Septic tank	S	S	S	S	N/A	N/A
Lined E-T <sup>(2)</sup> Secondary treatment	S	S	S	S	N/A	N/A
Unlined E-T <sup>(2)</sup> Septic tank	U	S	S	U	2 feet	2 feet
Unlined E-T <sup>(2)</sup> Secondary treatment	S <sup>(5)</sup>	S	S	S <sup>(5)</sup>	2 feet	2 feet
Pumped Effluent Drainfield <sup>(3)</sup> Septic tank	U	S	S	U	2 feet	1 foot
Leaching chamber <sup>(2)</sup> Septic tank	U	S	U	U	2 feet	2 feet
Leaching chamber <sup>(2)</sup> Secondary treatment	S <sup>(5)</sup>	S	U	S <sup>(5)</sup>	2 feet	2 feet
Gravelless pipe <sup>(2)</sup> Septic tank	U	S	U	U	2 feet	2 feet
Gravelless pipe <sup>(2)</sup> Secondary treatment	S <sup>(5)</sup>	S	U	S <sup>(5)</sup>	2 feet	2 feet
Drip Irrigation Septic tank/ filter	U	S	S	U	2 feet	1 foot
Drip Irrigation Secondary treatment/ filter	S <sup>(5)</sup>	S	S	S <sup>(5)</sup>	1 foot	6 inches
Low Pressure Dosing Septic tank	U	S	S	U	2 feet	1 foot
Low Pressure Dosing Secondary treatment	S <sup>(5)</sup>	S	S	S <sup>(5)</sup>	2 feet	1 foot
Mound <sup>(4)</sup> Septic tank	S	S	S	S	2 feet	1.5 feet
Mound <sup>(4)</sup> Secondary treatment	S	S	S	S	2 feet	1.5 feet
Surface application Secondary treatment	S <sup>(6)</sup>	S <sup>(6)</sup>	S <sup>(6)</sup>	S <sup>(6)</sup>	N/A	N/A
Surface application Non-standard treatment	S <sup>(6)</sup>	S <sup>(6)</sup>	S <sup>(6)</sup>	S <sup>(6)</sup>	N/A	N/A
Soil Substitution <sup>(2)</sup> Septic tank	S	S	U	S	2 feet	2 feet
Soil Substitution <sup>(2)</sup> Secondary Treatment	S	S	U	S	2 feet	2 feet

**S = Suitable**  
**U = Unsuitable**

## **TABLE XIII: DISPOSAL AND TREATMENT SELECTION CRITERIA**

Figure: 30 TAC §285.91(13)

- (1) An absorptive drainfield may be used, if a rock horizon is at least 6 inches above the bottom of the excavation, see §285.33(b)(1).
- (2) If the slope in the drainfield area is greater than 30% or is complex, the area is unsuitable for the disposal method.
- (3) Can only be installed in an area where the slope is less than or equal to 2.0%.
- (4) Can only be installed in an area where the slope is less than 10%.
- (5) Requires disinfection before disposal. A form of pressure distribution shall be used for effluent disposal in fractured or fissured rock.
- (6) Requires vegetation cover and disinfection.
- (7) When no media exists, measure from the bottom of the excavation or pipe, whichever is less.
- (8) May require gravel analysis for further suitability analysis (see §285.30(b)(1)(B)).
- (9) If OSSF is located within a Flood Hazard, see §285.31(c)(2) for special planning requirements.
- (10) Includes fissured rock.

All OSSFs require surface drainage controls if slope is less than 2%.

## Table XII. OSSF Maintenance Contracts, Affidavit, and Testing/Reporting Requirements.

Figure: 30 TAC §285.91(12)

SYSTEM DESCRIPTION	Maintenance Contract/Affidavit Required	Maintenance Activities Required	Testing and Reporting Requirements <sup>2</sup>
Septic Tank & Absorptive Drainfield	No	See §285.39	No
Septic Tank & ET Drainfield (Unlined)	No (3)	See §285.39	No
Septic Tank & ET Drainfield (Lined)	No (3)	See §285.39	No
Septic Tank & Pumped Drainfield	No	See §285.39	No
Septic Tank & Leaching Chamber	No	See §285.39	No
Septic Tank & Gravelless Pipe	No	See §285.39	No
Septic Tank & Low Pressure Dosing	No	See §285.39	No
Septic Tank & Absorptive Mounds	No	See §285.39	No
Septic Tank & Soil Substitution	No	See §285.39	No
Septic Tank, Secondary Treatment, Filter & Surface Application	Yes	Entire OSSF	Test & Report
Secondary Treatment & Standard Absorptive Drainfields	Yes	Treatment System	Report
Secondary Treatment & ET Drainfield	Yes	Treatment System	Report
Secondary Treatment & Leaching Chamber	Yes	Treatment System	Report
Secondary Treatment & Gravelless Pipe	Yes	Treatment System	Report
Secondary Treatment, Filter & Drip Emitter	Yes	Entire OSSF	Report
Secondary Treatment & Low Pressure Dosing	Yes	Treatment System	Report
Secondary Treatment & Absorptive Mounds	Yes	Treatment System	Report
Secondary Treatment & Surface Application	Yes	Entire OSSF	Test and Report
Any Other Treatment System	(1)	(1)	(1)
Any Other Subsurface Disposal System	(1)	(1)	(1)
Any Other Surface Disposal System	Yes	(1)	(1)
Non-Standard Treatment and Surface Application	Yes	Entire OSSF	Test and Report (1)
Holding Tank	Yes	Pump tank as needed	Keep pump records

- (1) Determined by the permitting authority based upon review required by §285.5(b) of this title (relating to Submittal Requirements for Planning Materials).
- (2) Requirements for Planning Materials). Testing criteria and reporting frequency for those systems not covered under (1) shall be according to §285.91(4) of this title.
- (3) Required if design Q is less than required by §285.91(3) of this title.

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THE COUNTY OF \_\_\_\_\_  
STATE OF TEXAS

### AFFIDAVIT

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

I  
The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (TCEQ) to regulate on-site sewage facilities. 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 TCEQ 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 TCEQ of the suitability of this OSSF, nor does it constitute any guarantee by the TCEQ 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 (insert legal description) \_\_\_\_\_  
\_\_\_\_\_.

The property is owned by (insert owner(s) full name) \_\_\_\_\_.

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 either obtain a maintenance contract within 30 days or maintain the system personally (when the permitting authority allows). As per §285.7(d)(4)(B) An owner may not maintain an OSSF under the provisions of this section for commercial, speculative residential, or multifamily property.

If applicable, applicant agrees that, in the event of sale of property, the properties above will be sold together as one. If the properties are to be sold separately, the existing on-site sewage facility which shares both properties must be dismantled. Permits for the alteration of the on-site sewage facility may be required. Planning materials for existing, permitted, on-site sewage facilities are available with the authorized agent, which at the time of this signing is the Victoria County Public Health Department Environmental Services located at 2805 N. Navarro, Victoria, Texas 77901.

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 can be obtained from (insert permitting authority) \_\_\_\_\_.

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

SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

(Owner(s) signatures)

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 \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of Texas

Notary's Printed Name: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

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THE COUNTY OF \_\_\_\_\_  
STATE OF TEXAS.

**AFFIDAVIT TO PUBLIC**

**CERTIFICATION OF OSSF REQUIRING MAINTENANCE**

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

I  
The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (TCEQ) to regulate on-site sewage facilities (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 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 OSSF's are located on specific pieces of property. To achieve this notice, the TCEQ requires a deed recording. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This deed certification 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.

II  
An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91(12) will be installed on the property described as (insert legal description, lot, block) \_\_\_\_\_  
\_\_\_\_\_.

The property is owned by (insert owner(s) full name) \_\_\_\_\_.

This OSSF has a variance; therefore, it must be covered by a continuous maintenance contract. All maintenance on this OSSF must be performed by an approved maintenance company, and a signed maintenance contract must be submitted to (insert permitting authority) \_\_\_\_\_ within 30 days after the property has been transferred.

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 (insert permitting authority) \_\_\_\_\_.

WITNESS BY HAND(S) ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_.

PRINT: \_\_\_\_\_

SIGN: \_\_\_\_\_  
(Owner(s) signatures)

SWORN AND SUBSCRIBED BEFORE ME ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_.

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

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Permit # \_\_\_\_\_

### Sample Testing and Reporting Record for Homeowners

Date test performed: \_\_\_\_\_  Routine  Repair  Other \_\_\_\_\_

Owners Name: \_\_\_\_\_

Property (OSSF) Address: \_\_\_\_\_

Person Performing Inspection: \_\_\_\_\_

#### Inspected Items

- Aerators
- Filters
- Irrigation Pumps
- Recirculation Pumps
- Disinfection Device
- Chlorine Supply
- Electrical Circuits
- Distribution System
- Sprayfield Vegetation/Seeding (if applicable)
- Other as Noted \_\_\_\_\_

Repairs to the system (list all components replaced):

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Tests required and results:

<u>Test</u>	<u>Required</u> Yes / No	<u>Results</u> mg/l, mpn/100 ml, or trace	<u>Test</u> <u>Method</u>
Cl2 (Grab)	_____	_____	_____
OR			
Fecal Coliform	_____	_____	_____

General comments or recommendations:

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This testing and reporting record shall be completed, signed, and dated after each maintenance check and test. One copy shall be retained by the maintenance company or, if applicable, the homeowner performing the maintenance. The second copy shall be sent to the local permitting authority, Victoria County Public Health Department, Environmental Services, 2805 N Navarro, Victoria, Texas 77901, within 14 days after the inspection has been done.

Signature: \_\_\_\_\_

Permit # \_\_\_\_\_

### Sample Testing and Reporting Record for Maintenance Providers

Date test performed: \_\_\_\_\_  Routine  Repair  Other \_\_\_\_\_

Owners Name: \_\_\_\_\_

Property (OSSF) Address: \_\_\_\_\_

Person Performing Inspection: \_\_\_\_\_

**Inspected Items**

- Aerators
- Filters
- Irrigation Pumps
- Recirculation Pumps
- Disinfection Device
- Chlorine Supply
- Electrical Circuits
- Distribution System
- Sprayfield Vegetation/Seeding (if applicable)
- Other as Noted \_\_\_\_\_

Repairs to the system (list all components replaced):

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Tests required and results:

	<b><u>Test</u></b> Yes / No	<b>Required Results</b> mg/l, mpn/100 ml, or trace	<b>Test Method</b>
BOD (Grab)	_____	_____	_____
TSS (Grab)	_____	_____	_____
Cl <sub>2</sub> (Grab)	_____	_____	_____
Fecal Coliform	_____	_____	_____

Date(s) responded to owner complaints during reporting period (attach copy of complaint and findings): \_\_\_\_\_

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General comments or recommendations:

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This testing and reporting record shall be completed, signed, and dated after each maintenance check and test. One copy shall be retained by the maintenance company or, if applicable, the homeowner performing the maintenance. The second copy shall be sent to the local permitting authority, Victoria County Public Health Department, Environmental Services, 2805 N Navarro, Victoria, Texas 77901, within 14 days after the inspection has been done.

Signature: \_\_\_\_\_

Victoria County Public Health Department  
OSSF VARIANCE REQUEST

Date: \_\_\_\_\_

OSSF Receipt #: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Property Address: \_\_\_\_\_

**The two statements below must be certified as true, and thereby initialed, by a Registered Sanitarian (R.S.) or Professional Engineer (P.E.) before this variance request can be reviewed by a Designated Representative (D.R.):**

\_\_\_\_\_ The following variance for separation distances is requested because there is **no alternative** OSSF system that can be installed according to the provisions of Texas Administrative Code, Chapter 285.

\_\_\_\_\_ The following variance describes an OSSF which provides equivalent protection of the public health and the environment when compared with any OSSF that would not require a variance.

**Variance Detail – Must be prepared and signed by R.S. or P.E. (Use back of form if necessary\*)**

Include supporting documentation about the system design and special interventions (i.e., installation of a chlorinator on an existing well when setback distances can not be met), being careful to clearly describe how the proposed OSSF will provide equivalent protection (as defined in paragraph 3 above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*  Check here if back of form is used.

\_\_\_\_\_  
Signature of R.S. or P.E.

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date Signed

**Designated Representative (D.R.) Review**

Date of Review: \_\_\_\_\_ Variance Approved \_\_\_\_\_ Variance Disapproved \_\_\_\_\_

Comments of Reviewer(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
D.R. Signature, License #, and Date Signed

\_\_\_\_\_  
D.R. Signature, License #, and Date Signed

If the variance is disapproved, the homeowner and/or OSSF designer (R.S.) or (P.E.) may initiate an appeal to Victoria County Commissioners' Court via written request to:

Victoria County Commissioners' Court  
101 N Bridge Street, Room 102  
Victoria, TX 77901



# ON-SITE SEWAGE FACILITY PARTIAL COVER-UP REQUEST

Date: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Installer: \_\_\_\_\_

Specify Area(s) of OSSF to be Partially Covered:

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Justification/Reason for Request: (Use back of this form, if needed.)

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\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

FOR VCPHD USE ONLY

**Partial Cover-Up Request:**

Date of Review: \_\_\_\_\_ Date of Review: \_\_\_\_\_ Date of Review: \_\_\_\_\_

APPROVED/DISAPPROVED APPROVED/DISAPPROVED APPROVED/DISAPPROVED

\_\_\_\_\_  
DR Signature

\_\_\_\_\_  
DR Signature

\_\_\_\_\_  
DR Signature

Comments:

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## **ON-SITE SEWAGE FACILITY APPEAL PROCEDURE**

### **As per 30 TAC §285.11(d)**

It is the intent of the VCPHD Environmental Services to facilitate the OSSF application process as quickly as possible. Therefore, the following appeals process has been developed to ensure swift action in the event of disagreement with VCPHD decisions regarding a submitted OSSF application.

Installers or property owners wishing to appeal a decision of the Victoria County Public Health Department Designated Representatives may do so as follows:

1. The Property Owner shall submit a request for review by completing an OSSF APPEAL REQUEST form.
2. A meeting date and time will be scheduled so the Property Owner may present his/her position to the OSSF Quality Assurance Team.
3. Following the meeting, the QA Team will consider the information provided and make a decision regarding the appeal.
4. The applicant will be notified in writing (Letter of Appeal “Decision”) as to the QA Team’s decision.
5. In the event that the applicant wishes to appeal the QA Team’s decision, the applicant may have the appeal formally considered by the Commissioners’ Court of the County where the proposed OSSF will be physically located.



# ON-SITE SEWAGE FACILITY APPEAL REQUEST

Date: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Installer: \_\_\_\_\_

State Appeal Requested:

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Justification/Reason for Request: (Use back of this form, if needed.)

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\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

.....  
FOR VCPHD USE ONLY

## QA Appeal Request:

Date of Review: \_\_\_\_\_

Appeal:  
APPROVED/DISAPPROVED

\_\_\_\_\_  
DR Signature

Date of Review: \_\_\_\_\_

Appeal:  
APPROVED/DISAPPROVED

\_\_\_\_\_  
DR Signature

Date of Review: \_\_\_\_\_

Appeal:  
APPROVED/DISAPPROVED

\_\_\_\_\_  
DR Signature

## Who Do I Get to Help Me with Installation of My On-Site Sewage Facility System?

1. **Soil and Site Evaluator:** A soil and site evaluation of the proposed OSSF location must be conducted by a current, Texas Commission on Environmental Quality (TCEQ) licensed soil and site evaluator, or a Professional Engineer. On the following pages, a site evaluator is denoted with the symbol “SE”. To ensure that the SE that you want to use is approved go to [Licensing](#) then select [Search License Information](#) at:

<https://www.tceq.texas.gov>

A list of licensed professional engineers is available by clicking on [Search the Roster](#), then [Search for a Licensed PE](#), and choose “Structural” for the Branch) at:

<http://www.tbpe.state.tx.us>

2. **Installer I - Installer II:** A person can only install a septic system if they are licensed as a TCEQ-approved Installer I or Installer II. Installer IIs can install all types of septic systems. An Installer I is limited in the type of system that can be installed. On the following pages, an Installer I is denoted as “OSI”, and an Installer II is “OSII”.

To ensure that the Installer I/II that you want to use is approved go to [Licensing](#) then select [Search License Information, Group Search Criteria and Select On-Site Sewage Facility Licensing Program](#) at:

<https://www.tceq.texas.gov>

3. **Professional Sanitarian (PS) /Professional Engineer (PE):** Some septic systems require that a scaled drawing, design description and other planning materials be prepared by a PS or a PE.

A list of professional sanitarians is available at:

[http://www.dshs.state.tx.us/sanitarian/rs\\_rosters.shtm](http://www.dshs.state.tx.us/sanitarian/rs_rosters.shtm)

Click on [Find a Registrant](#) then select [Live Online Search](#).

A list of licensed professional engineers is available at: <http://www.tbpe.state.tx.us>

4. **Maintenance Provider:** Some septic systems require that the homeowner keep an ongoing maintenance contract with an approved maintenance company. A licensed maintenance provider must be an Installer II; Class C Wastewater Operator; or 3 years of experience as a registered maintenance provider or registered maintenance technician. The maintenance provider is also required to take the TCEQ approved basic maintenance and advanced maintenance courses and pass the maintenance provider licensing exam. Search for licensed maintenance provider at:

[http://www2.tceq.texas.gov/lic\\_dpa/index.cfm](http://www2.tceq.texas.gov/lic_dpa/index.cfm)



# VICTORIA COUNTY PUBLIC HEALTH DEPARTMENT

## Environmental Services

Calhoun - DeWitt - Victoria Counties

2805 North Navarro Street

Victoria, Texas 77901

<http://health.vctx.org/Environmental.aspx>

PHONE 361-578-6281

FAX 361-579-6348

### Homeowner's Guide to Alternative Septic Systems

The State of Texas On-Site Sewage Facilities (OSSF) Rules (30 TAC §285.7) requires that certain types of septic systems have ongoing maintenance contracts. The most common systems are surface application disposal and drip emitter disposal. Both of these methods of sewage disposal are used following an aerobic treatment unit (ATU). Basically, any type of sewage disposal that is preceded by treatment in an aerobic unit may require an ongoing maintenance contract with a licensed maintenance provider.

The **initial maintenance contract** is effective for at least 2 years from the date the septic system is first used. If the system is for a newly constructed house, the start date is the date of sale by the builder. If the system is for an existing house, the start date is the date of approval to operate by the permitting authority.

#### **Contract / No Contract. . .**

Some counties require homeowners to continually have a yearly maintenance contract with a licensed maintenance provider. Where applicable, the owner of an OSSF for a single family residence may maintain the system personally. Contact your local permitting authority for information and requirements.

If the owner elects to have a maintenance company conduct the maintenance inspections, a new contract must be signed and submitted to the permitting authority **30 days before** the current contract expires. The owner can renew with the current maintenance provider or obtain services from a different maintenance provider as long as they are licensed by the Texas Commission on Environmental Quality (TCEQ) to maintain the aerobic unit.

#### **Contract Contents. . .**

The maintenance contract must have the following:

- List items that are covered by the contract.
- Specify a time frame in which the maintenance provider or maintenance technician will visit the property in response to a complaint by the property owner regarding operation of the system.
- Specify the name of the maintenance provider who is responsible for fulfilling the terms of the maintenance contract.
- Identify the frequency of routine maintenance and the frequency of the required testing and reporting.
- Identify who is responsible for maintaining the disinfection unit (i.e. chlorine).
- Indicate the business physical address and telephone number for the maintenance provider.

## **Contract Amendments or Terminations. . .**

If the maintenance company changes the individual certified by the manufacturer, the maintenance company must initiate an amendment of the contract. The contract has to be amended within 30 days after the change in personnel. The permitting authority must be provided with a copy of the amended contract within 30 days after the amended contract is signed.

If the maintenance provider discontinues the maintenance contract, the maintenance provider shall notify, in writing, the permitting authority, the manufacturer, and the owner at least 30 days before the date service will cease.

If the owner discontinues the maintenance contract, the owner shall notify, in writing, the permitting authority, the manufacturer, and the maintenance company at least 30 days before the date service will cease.

If a maintenance contract is discontinued or terminated, the owner must contract with another maintenance provider and provide the permitting authority with a copy of a newly signed maintenance contract no later than 30 days after termination.

## **Testing and Reporting. . .**

Aerobic units are tested and checked every 4 months. The system is checked and a sample of the wastewater is drawn from the pump chamber after the disinfection unit. The sample is tested for Total Chlorine Residual or Fecal Coliform. The chlorine residual must be at least 0.1 mg/L, and the fecal coliform count cannot exceed 200 CFU/100ml.

A report must be submitted to the permitting authority **and the owner** within 14 days following the maintenance check and testing. The report must include the following:

- Any responses to owner's complaints,
- Results of the maintenance companies findings, and
- The test results.

## **Maintenance Tags. . .**

In addition to copies of the maintenance reports, the maintenance company must install a weather resistant tag, or some other form of weather resistant identification, on the system at the beginning of each contract. The maintenance tag must:

- Identify the maintenance provider,
- List the telephone number of the maintenance provider,
- Specify the start date of the contract, and
- Be either punched or indelibly marked with the date the system was checked at the time of each maintenance check, including any maintenance check in response to owner complaints.

## **System Information. . .**

The OSSF system installer must provide the owner with written information regarding maintenance, management practices and water conservation measures related to the septic system installed, repaired, or maintained by the installer.

## Homeowner Responsibilities. . .

### Maintenance...

The disposal area is to be kept mowed and nothing is to be within 10 feet of the sprinkler head to allow an even distribution of spray. Owners shall not allow driveways, gardens, play gyms, storage buildings, or other structures to be constructed over the treatment or disposal area. Do not allow anyone to drive or operate heavy machinery over any part of the system.

### Recordkeeping...

It is recommended the system be pumped every 3-5 years and the waste must be disposed of by a waste transporter holding a current registration. Retain copies of inspection reports and manifests from the waste hauler. It is recommended that owners have some basic knowledge of their aerobic treatment unit, how it works, and how to handle any malfunctions. Keep a detailed record of all inspections, pumpings, permit, repairs, receipts, and any maintenance that has been done to the system. Also keep a drawing of the location of your septic system and drainfield.

### Chlorine...

The maintenance contract identifies who is responsible for maintaining the chlorine added to the system. In most cases it is the homeowner's responsibility to ensure the system has adequate chlorine at all times. Your system will either be using liquid household bleach OR chlorine tablets. Chlorine tablets for ATU's ARE NOT the same as swimming pool tablets. Acid-based products, such as swimming pool tablets, can result in the discharge of inadequately treated wastewater and create potentially harmful or hazardous gases. The chlorine tablets are to be stored in a well ventilated area free from moisture. Chlorine tablets are corrosive to metals. The tablets are available through your maintenance provider, on-line, and local plumbing stores.

### Common Household Tips...

Use household cleaners such as bleach, disinfectants, drain and toilet bowl cleaners in moderation. It is **not** recommended to use 'additives' to your septic tank as they can harm your aerobic system. Leftover hazardous chemicals such as paint, paint thinners, oil, anti-freeze, pharmaceuticals, pesticides, and other organic chemicals should be disposed of at an approved hazardous waste collection site. Take measures to conserve water such as washing clothes and dishes when the washers are full; repair leaky faucets and running toilets; avoid letting the water run while brushing teeth and avoid long showers. Divert outside water from gutters, lawn irrigation sprinklers, water softener, etc. away from the drainfield. Do not use your toilet as a trash can. Grease and cooking oils should not be put down the drain. The more solids that go into the tank, the more often it will need to be pumped.

### Malfunctions...

The owner shall bring the OSSF into compliance by repairing any malfunction. If the high water alarm sounds the system may need attention. If the aerobic treatment system maintenance is provided by the homeowner, the authorized agent may require the homeowner to contract for maintenance if the system is located in a county of at least 40,000 persons and if the owner fails to correct the violation no later than the 10<sup>th</sup> day after the date of receipt of notification OR if the owner commits another violation before the third anniversary of the initial violation of the chapter or rule under the Texas Health & Safety Code, Chapter 366.

### Reporting Violations. . .

In addition to questions, any violations of these guidelines are to be directed to the Victoria County Public Health Department Environmental Services, 2805 N. Navarro Victoria, Texas 77901, (361) 578-6281.

Information brought to you by the Victoria County Public Health Dept. and the National Environmental Service Center (NESC) 800-624-8301.

## **Review of Subdivision or Development Plans by the On-Site Sewage Facility Permitting Authority**

Title 30 Texas Administrative Code Chapter 285.4(c), specifies that “Before the permit process for individual OSSFs can begin, persons proposing residential subdivisions, manufactured housing communities, multi-unit residential developments, business parks, or other similar uses and using OSSFs for sewage disposal shall submit planning materials for these developments to the permitting authority. The planning materials shall be prepared by a professional engineer or professional sanitarian and shall include an overall site plan, topographic map, 100-year floodplain map, soil survey, location of water wells, locations of easements as identified in §285.91(10) of this title (relating to Tables), and a complete report detailing the types of OSSFs to be considered and their compatibility with area-wide drainage and groundwater. A comprehensive drainage plan shall also be included in these planning materials. The permitting authority will either approve or deny the planning materials, in writing within 45 days of receipt.”

The Victoria County Public Health Department Environmental Services is the permitting authority for Calhoun, DeWitt, and Victoria counties. Planning materials for review are submitted to the Environmental Health Division located at:

Dr. Pattie Dodson Public Health Center  
2805 N. Navarro  
Victoria, Texas 77901

I. Planning materials must be prepared and signed by a professional engineer (PE) or registered professional sanitarian (RS), and must include the following items:

- A. Overall site plan;
- B. Topographic map;
- C. 100-year floodplain map;
- D. Soil survey;
- E. Location of water wells;
- F. Locations of easements identified in the attached Table 10;
- G. A complete report detailing the types of OSSFs to be considered and their compatibility with area-wide drainage and groundwater; and
- H. A comprehensive drainage plan.

II. Additional information

- A. The National Cooperative Soil Survey book for the county where the development is located provides some of the information required in the planning materials.
- B. The total acreage of each lot must be included on the plat.
- C. If the subdivision/development will have a public water supply and waste disposal via OSSFs, the minimum lot size is ½ acre if each lot will be owned individually.

- D. If the subdivision/development will have individual water wells and waste disposal via OSSFs, the minimum lot size is 1 acre if each lot will be owned individually.
- E. The OSSF permitting authority signature line must be on the page with the final overall site plan and with the following statement:

“No home constructed in this subdivision shall be occupied until that home is connected to a functioning septic system approved by the Texas Commission on Environmental Quality or its authorized agent.”
- F. Please keep in mind that water wells must be 100 feet away from a septic system drainfield and 50 feet from a septic tank. It is recommended that all water wells be placed in the front or back with septic systems placed at the opposite end of the property.
- G. In order to get a timely response, it is recommended that you contact the health department when initial planning for a subdivision or development begins.
- H. Contact a VCPHD D.R. at (361)578-6281 if you have any questions.

## **SAMPLE COVER LETTER**

Victoria County Public Health Department  
2805 N. Navarro  
Victoria, Texas 77901

In response to the requirements of the Victoria County Public Health Department (VCPHD) Environmental Services and the Texas Commission on Environmental Quality (TCEQ), we are submitting the following enclosures:

1. Final plat.
2. A topographic survey of the project and the project drainage plan.
3. This project is not within any FEMA flood plain.

In addition, we have the following comments:

It is our understanding that you have the USDA National Conservation soil survey for Victoria County on file. This property is on Sheet 27. The soils are shown to be Telferner fine sandy loam. These soils appear to be marginal, under current standards, to allow conventional drainfield wastewater disposal. It is my opinion that as VCPHD investigates each site, the disposal method will range from conventional through pressure dosing to aerobic surface irrigation.

As shown on the attached plat, the minimum lot size in this development is approximately 2 acres with the smallest being 1.61 acres which is large enough to provide more than twice the area needed to accommodate any of these disposal methods.

There are no existing water wells on this site.

Thank you for your time and cooperation, and if you have any questions, please contact me.

Sincerely,

Enclosures