

MONTGOMERY COUNTY

PERMIT DEPARTMENT

501 N. THOMPSON, SUITE 100 CONROE, TX 77301 (936) 539-7836 • FAX (936) 538-8155

CHECK LIST FOR EXISTING AEROBIC SEPTIC SYSTEMS (ADD-ON) ANY CHANGE TO THE EXISTING SEPTIC SYSTEM (TANK OR DISPOSAL) ANYTHING OTHER THAN A SINGLE FAMILY DWELLING IS COMMERCIAL EX. DUPLEX

 Completed Permit Application (Montgomery County Permit Office)
 Commercial Guidelines (for commercial property only)
 Disclaimer (for ALL systems from Montgomery County Permit Office, notarized)
 Septic Disclaimer (for conventional systems MUST be signed by Owner)
 Affidavit to the Public for Aerobic Systems
(A) Signed by Owner Only, notarized
(B) Filed at Montgomery County Clerks Office (by owner or applicant)
 Legal Description
(A) Recorded Plats – Subdivision, Section, Block, Lot
(B) Unrecorded Plats – Metes and Bounds or Survey (Often found in Deed or at County Clerk office (C)
Floor Plans for all residential and commercial buildings
 (A) Show applicable bedrooms, restrooms, and square footage of structure
(B) Signed by property owner
If you receive water from a public utility district or company, you must provide a letter on letterhead
(dated within one year) from that company stating water service will be provided to your property.
 Stormwater Management Program Compliance Certification
 Culvert Verification Form / Receipt – Only required for properties in Precinct 4
Power of Attorney
(A) For signature of Permit Application and Disclaimer ONLY, notarized
(B) Must be an original
 Current Maintenance Contract and most recent Inspection Report
 Map (From Conroe to property. Directions drawn/written OR printed from computer)
 3 sets of Soil Analysis (Site Evaluator) (1 original & 2 copies)
3 sets of Septic System Design (Designer) (1 original & 2 copies)
IF PERMIT EXPIRES ALL PAPERWORK MUST BE RESUBMITTED FOR NEW PERMIT.

TWO YEAR MAINTENANCE CONTRACT MUST BE COMPLETED BY OWNER AND INSTALLER BEFORE FINAL INSPECTION.

Permit #	Montgom Development Permi	ery County t Application				
TO BE FILLED OUT BY COUNTY OFFICIAL						
DATE ISSUED:			PRECINCT #	ZC	ONE	
DEVELOPMENT PERMIT			CENSUS TRACT #			
TYPE/FEE:			CLASS A C			
			IS PROPERTY IN F			
SEPTIC PERMIT			FLOODWAY?			
TYPE/FEE:						
OTHER:			PERMIT ASSISTAN			
			(Phone)28	31-384-3976		
1. Applicant's Name:	ew Ross			drew@rosso	designservice.co	
Mailing Address: PO Bo	x 1167	City				
2. LOCATION						
	Block			oroago/Lot Sizo		
	State					
Survey Name/Abstract #			Closest Major	Noau		
3.	RESIDENTIAL			COMMERCIA	<u>\L</u>	
A. Manufactured Home	e	A. In				
B. Single ramily house		8. 80	usiness/Office			
C. Other	/# of Units					
E. # Residences/Buildir		D. O	ther			
E. Witesidences, Buildin	163 OH 1 Toperty .					
# of Doonla / Posidonts nor da	ay # Be	drooms		# Postrooms		
Square Foot of Living Area	# be	Square	Foot of Structure	# Restrooms		
			_			
4. ELECTRIC COMPANY		[\neg			
Centerpoint Ente	rgy Mid-South	Sheco	Acct# (If kn	own)		
5. WATER SYSTEM						
Private Well	Water District		Other			
6. SEWAGE TREATMENT						
Installing Septic	Existing Septic		Public	System		
NOTICE						
	tion, partnership, or other legal entity other	than a natural p	person, state the name o	of one or more natur	ral persons who will be	
	t to see that all provisions of the Developme					
	ed until a final inspection and approval of the so on the representation to Commissioner					
obtain all necessary permits require				,	, -0,	
.1.						
Signature *			D	ate		

Permit #	

Guideline for Commercial Permits

In Montgomery County

Name of project being permitted:			
Address of property being permitted:			
SuiteCity	State	Zip	
Type of business	Pr	operty ID R #	
Open to public use?Hours open	# of	employees	
Is this an Existing Development?			YES OR NO
Sq. ft. of build out/lease space/remodel space for existing structure	•		
Sq. ft. of all existing structures on property			
Sq. ft. of all existing impervious cover. (Concrete, asphalt, crushed rock, limestone, driveways, etc.))		
Is this a New Development?			YES OR NO
Sq. ft. of this new structure or addition			
Sq. ft. of all new impervious cover. (Concrete, asphalt, crushed rock, limestone, driveways, etc.))		
Total Development			
Total sq. ft. of <u>all</u> structures and <u>all</u> impervious cover on <u>entire prop</u>	perty		
Will there be any proposed work in the County Road Right Of Way	y?	YES or NO	2
*If yes to above, have plans been submitted to Engineering?		YES or NO	<u>)</u>
If not, must provide separate plans on thumb drive with this s	ubmittal		
Will there be new or modified driveway access on TXDOT road? _			
Septic system on property? How many?			
If different addresses, please list			
Water well to be used? If yes, for public consumption?	_ Future exp	pansion planned? _	
Food preparation? Y or N Foods to be served **OTHER PERMITS MAY BE REQUIRED **			
SEE - Dev Structure Permit, Fire Code Permit, Septic Per	mit, Food	Permit or Non-S	tructure Permit
I understand that this department is relying on information provided by me a Permit Requirements. I also understand that failure to provide correct information void. If there are any changes in these plans, I will contact this department.	mation will res	sult in this permits im	
Signature			Date

DISCLAIMER

Permit #	issued this date	is an "Authorization to
Construct" a septic system only ar Sanitarian or Professional Engineer and accurate. I understand that a "a all criteria set up by TCEQ and Montg	nd is based on information so I employed. This information Notice of Approval" for the somery County Environmental and that failure to comply with	supplied by myself and the Registered on to the best of my knowledge is true eptic system will be issued ONLY after Health Services regarding onsite sewage TCEQ or County rules regarding on-site
components of the existing system that in order to identify where the tarbe dug and/or probing the area on my	MUST be brought up to curnks and field lines of an existing property may be done. If was be damaged during the course	r improving any "existing system," all rrent codes or standards. I understanding septic system are located, holes may ater lines, gas lines and any undergrounder of inspection. However, Montgomery and damages that may be done.
Health Services must be completed a modifications to existing systems. In Environmental Health Office by 3	and approval given <u>prior</u> to be spections may be scheduled l 3:00 p.m. two (2) business of	by Montgomery County Environmental ack-fill of any newly installed or add-on by contacting the Montgomery County lays prior to the need for inspection. a.m. the morning of the inspection to
to enter upon the property described I understand that the performance of	bed in the permit for the put the septic system will depend of rainfall received on the pr	amental Health Department personnel arpose of inspecting the septic system on many factors including correct sizing operty, etc. Montgomery County or its
Signature of Owner or Legal Repres	sentative	
Subscribed and Sworn before me th	is day of	
Signature of Notary My Commission expires:		

SEPTIC VERIFICATION DISCLAIMER

Development Permit #	is a permit for the structure ONLY
and not a permit for a septic system.	
INSPECTION: I understand that this department the Registered Sanitarian to verify that no on-sit exists on the property, at the time of inspection, permit.	ite sewage discharge, either sewer/greywater,
FAILURE: I understand that any failure/disch the development permit is issued, especially i question, will result in "ALL" components of county and state codes.	f a complaint is filed against the property in
DISCHARGE: I understand that if any discharthen issuance of the development permit will be all proper paperwork is completed for "NEW"	be denied, and no permits will be issued until
APPROVAL: I understand that an inspection personnel was not performed and this is an isonot an approval, only a verification by a Reexisting septic system. This is only to permit will be utilizing an existing septic system.	suance of a development permit only, this is egistered Sanitarian, for the non-permitted
I understand that the performance of the scorrect sizing, maintenance, water usage, an etc. This evaluation is based upon a soil/sit septic system as found by the Registered Sano guarantees, expressed or implied, the Montgomery County Environmental Health	nount of rainfall received on the property, e analysis and an on-site inspection of the nitarian. I also understand that there are at accompany this verification by the
Signature of Owner	
SUBSCRIBED and SWORN BEFORE ME THIS	DAY OF
Signature of Notary My Commission Expires:	

AFFIDAVIT TO THE PUBLIC (Commercial)

sworn	me, the undersigne upon oath, states th ing more particular	at he/she is the ov	vner of record of the	appearedhat certain tract or	who, after being by me duly parcel of land lying and being situated in Montgomery County, Texas
Subdiv	ision:	·			*
Section	n: Bl	ock:	Lot:	If not available	: See Attached Metes and Bounds
of the		on Environmenta	l Quality. The und	lersigned has enter	ent system will be installed in accordance with the permitting provisions ed into a maintenance agreement, as required by the permitting entity on system.
surface compa	application system by will be required	to the buyer or tra	nsferee. Any buye stem. For more in	r or transferee is he formation concern	pove described property, request a transfer of the permit to operate such reby notified that a maintenance contract with an approved maintenance ing the rules or regulations on surface application on-site wastewater ity, P. O. Box 13087, Austin, Texas 78711-3087 or (512) 908-1000.
I hereb	y agree and acknow	vledge that I mus	:		
	1. Employ, by	neans of an initia	l two-year policy	contract, a certifie	I maintenance provider.
	2. Employ a cer	rtified maintenan	e provider during	the entire operation	onal life of the said application facility.
		he certified maint ed report to the P		rovides the testing	of the sewage effluent on the schedule provided below and sends the
		Annually: B	OD5 and TSS		nes per Year: pH and Chlorine Residual Unless otherwise noted by permitting authority
		system in strict co ry (TCEQ).	nformance with se	wage effluent disc	harge standards promulgated by Texas Commission on Environmental
	5. Adhere to ma	aximum gallons p	er day as stated in	design.	
	to abide by the about-up date of the fa				
WITN	ESS MY/OUR HA	ND(S) on this	day of _		
Owner	's Return Address:				
					Owner's Signature
		· · · · · ·			Owner's Printed Name
SWOR	N TO AND SUBS	CRIBED BEFOR	E ME on this	day of	
					ablic, State of Texas



MONTGOMERY COUNTY

PERMIT DEPARTMENT
501 N. THOMPSON, SUITE 100
CONROE, TEXAS 77301
(936) 539-7836 • (281) 364-4200 EXT 7836 • FAX (936) 538-8155

Montgomery County Stormwater Management Program Compliance Certification

Post-Cor	f development is 1 acre (43,560 sf) or more you must file a Long-Term Maintenance Plan of instruction Stormwater Control Measures in the real property records of Montgomery County. General Permit $4(b)3$
Is your a	rea of <u>development</u> 1 acre or more? <i>(circle one)</i> Yes or XNo
If yes, pr	rovide filed document #
	st - means any man-made change to improved and unimproved real estate, including but not limited to buildings uctures, mining, dredging, filling, grading, paving, excavation or drilling operations or storage of equipment or
Eros	ion and/or sediment controls to be implemented during construction.
Proper	rty Address:
	silt Fence
В	Berm
H	Iay Bales
	Other
Signature verifie	es that the above referenced controls will be used.
Printed Name	
*	
Signature	Date

POWER OF ATTORNEY

I,			_, owner o	of the property described bel	ow
Telephone number - Hm. () -		, Wk. <u>(</u>	1		
LOCATION OF PROPERTY TO BE INSPECTED:	Lot:	Block:	Se	ection:	
(Stree	et Address o	of Property)			-
Residents/Buildings utilizing a septic system on this	same lot: _	prope	erty:		
Total Lot/Property size for this permit only:					
Water: Private Individual Well ()		Other ()			
Construction Type:				Bedrooms:	
Commercial Type:	People	per Day:		Restrooms:	
Square Footage of Structure:	Square	Footage of Liv	ing Area:		
Give,application for permit to construct and/or to inspect a	, (Ir a septic syst	ndividual name em.	e, not Coi	mpany) power of attorney to	sign
I understand that this gives Montgomery Couduring regular business hours, 8:00 a.m. to 5:00 p.m.	•	• •	-	mission to perform the inspe	ction
I also understand that in order to identify wh water lines, gas lines, etc., and any underground ut inspection.					
All precautions will be taken during the insp will not be responsible for damages.	ection. How	wever, Montgor	mery Cou	nty Health Department Perso	onne
Signature of Property Owner			59	Date	
Subscribed and sworn to before me this da	y of			*	
Signature of Notary			(-	My Commission Expires	

^{*}This statement must be signed, notarized and returned to this office before the application can be processed.

*	
To insure that we can complete your permit as soon a requests that property owners comply with the following	as possible, the Montgomery County Health Department owing:
 Draw a detailed map to the property with Mark the property with lot and block num 	h written directions. abers on a poster large enough to be seen from the street.
MAP:	Thank You!
a a	
2	
4	
Weitten Directions	
Written Directions:	

PERMIT#: _____