



KB SEPTIC SYSTEMS

P. O. BOX 600
ANDERSON TEXAS 77830
(936) 825-6223

KBSEPTICSYSTEMS@NETZERO.NET

Office Use.

Date Received _____

Received By: _____

County: **BRAZOS**

Permit # _____

Type: **RES. AERO.**

I have been advised and understand that the system to be installed is not warrantied against water surfacing.

KB Septic Systems will not be held liable for water standing or wetness, as we have no control over the weather or water usage.

KB Septic Systems is NOT responsible for the following:

- Dirt Settling around tanks or trenches. You can fill it in with sand purchased at any home improvement store.
- Damage to buried underground utilities or sprinkler lines. Please have them clearly marked, & call 811 to locate and mark other lines.
This will be the owners responsibility.
- We do not connect under cabins that are close to the ground. Customer/Owner is responsible for making sure there is a sewer line easily accessible on the outside of the cabin for septic connection. We reserve the right to refuse to connect under cabins/Mobiles homes etc if the pipes are broken, there is waste from use or access to under the building is limited. We will install a clean out for your plumber to connect to if the above happens

KB Septic Systems will apply additional charges for the following:

- If there is a deep set and extra risers are needed, there will be a charge per riser.
- If we run into rock while digging and CANNOT break it up easily with the backhoe.
- If the customer uses the drains before the septic is connected and we have to work in unsanitary conditions.
- If we have to mount the control box near the tanks and it requires a panel for mounting there will be an additional charge for the panel.

Customer Name: _____

Address at site: _____, Texas _____

Mailing Address: _____

Phone number: _____

Signature: _____ Date: _____



ON-SITE SEWAGE FACILITY PERMIT APPLICATION

Brazos County Health District

201 N Texas Ave, Bryan, TX 77803

(979) 361-4450 • Fax (979) 361-5759 • health.brazoscountytx.gov

This application will expire one year from the application date.
If final inspection not completed, a new permit fee is required.
No fee refunds once Authorization to Construct has been issued.

Permit Number

\$445 Residential
 \$570 Commercial
 \$100 Alteration

Property Owner _____ Phone _____ Email _____

Mailing Address _____ City/State/Zip _____

Site Address _____ City/State/Zip _____

9-1-1 Address _____ City/State/Zip _____

Legal Description: Abstract/Subdivision _____ Phase _____ Block _____ Lot/Tract _____

Residential: # of Bedrooms _____ Heated Sq. Ft Area _____ Daily Wastewater Usage _____ GPD Acres _____ Swimming pool: Yes No

Construction Type: New Existing Site Built Manufactured Home Duplex Residential Accessory Structure w/plumbing

Commercial: New Existing Heated Sq. Ft Area _____ # of Employees/guests per day _____ Kitchen Yes No

Commercial Office Commercial Manufacture or Shop Institutional Food Establishment Multi Unit Residential Convenience Store

RV/Manufactured Housing Park of # Spaces _____ Other: _____

Property is within Incorporated limits or ETJ of Bryan College Station Kurten Wixon Valley Unincorporated Area Brazos County

OSSF DESIGNER _____ Reg# _____ Email _____

SITE EVALUATOR _____ Reg# _____ Email _____

OSSF INSTALLER **K. ANDREW BUTTS** _____ Reg# **0029543** _____ Email **kbsepticsystems@netzero.net**

Water Supply Private Well Public Water (Name of PWS) _____ Water Saving Devices: Yes No

Well Log or Plugging Reports Required? Yes No Adjoined Lots Affidavit Required? Yes No ATU Affidavit Required? Yes No

Flood Plain Info: Floodplain Permit # _____ or Exemption Form (Include Copy of Floodplain Permit or Exemption Form)

Treatment: Primary/Septic Secondary/Aerobic

Disposal Method: Surface Irrigation Drip Emitter Low Pressure Dosing ET Bed Conventional Graveless Pipe Multi Pipe

Leaching Chamber Other: _____

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 evaluation of the site prior to approval of planning materials and for inspection of the OSSF. I also acknowledge that inspection of the OSSF is required prior to all components being covered and prior to any use of the system.

Signature of Owner _____ Printed Name _____ Date _____

PERMITTING AUTHORITY USE ONLY BELOW THIS LINE _____

OSSF APPLICATION: APPROVED DENIED DATE _____ TCEQ DR: _____ LIC# OS _____

OSSF APPLICATION: APPROVED DENIED DATE _____ TCEQ DR: _____ LIC# OS _____

Authorization To Construct (ATC) Issued Notice of Deficiency & ATC Denial Letter Issued

Provided to Installer: _____ Date: _____ In person Email Mail By: _____

Provided to Owner: _____ Date: _____ In person Email Mail By: _____

Receipt Information:

Residential OSSF Permit Fee \$445

Date: _____

Rec'd By: _____

Commercial OSSF Permit Fee \$570

Date: _____

Rec'd By: _____

OSSF Repair/Alteration Fee \$100

Date: _____

Rec'd By: _____

Re-inspection Fee \$100

Date: _____

Rec'd By: _____

AB Septic Maintenance & Repairs, LLC

P. O. Box 685 | 6440 County Road 185 Anderson Texas 77830

979-324-2428

Timothy Adam Butts | MP # 002422

SCHEDULED SERVICE AGREEMENT

A representative (Trained Service Technician) of AB Septic Maintenance & Repairs will perform routine service every four months. This agreement will be in effect for 2 years from the date of installation of the system.

Date of Installation: _____ End of Contract: _____ (Residential System)

AB Septic Maintenance & Repairs agrees to perform the following services during the term of this agreement:

1. Removal and field service of aerator motor.
2. Inspection and adjustment of control panel setting and overload protection (if control panel is accessible).
3. Chlorine residual checked and reported to local authorities. (Customer is responsible for adding chlorine.)
4. Inspect sprinkler system.

*Parts needed to maintain system will be billed separately to homeowner.

*Your property must be clearly marked with the address. Acceptable locations are on the home/building, the mailbox or the curb.

Reports will be sent to local authorities or to TCEQ if the county does not have a local authority. The homeowner will also receive a copy of the report.

*This agreement does not include any emergency calls or service calls or repairs during the policy year; service is normally given within 2 business days. If the service calls or billed items are not paid within 30 days, your agreement will be void and you will forfeit any previously paid inspections per this contract until payment has been made. If we are unable to access your property, there will be a fee of \$125/\$150 to return for inspection.

*AB Septic Maintenance & Repair, LLC may add ant poison at or around the system unless otherwise indicated on this form.

I accept the terms and conditions of this policy and the service it provides.

NAME _____ SIGNATURE _____

MAILING ADDRESS _____

SEPTIC SYSTEM LOCATION ADDRESS _____

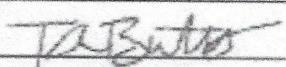
COUNTY **BRAZOS** CELL PHONE # _____

SECONDARY CONTACT # _____ GATE CODE (IF APPLICABLE) _____

NOTES (DOGS OR OTHER INFORMATION THAT MAY BE HELPFUL) _____

E-MAIL ADDRESS _____

OFFICE USE
ROUTE: _____
PERMIT #: _____


Timothy Adam Butts | MP #002422

AFFIDAVIT TO THE PUBLIC

THE COUNTY OF BRAZOS

STATE OF TEXAS

CERTIFICATION OF ON-SITE SEWAGE FACILITY (OSSF) MAINTENANCE

According to the Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities, this document is filed in the Deed Records of BRAZOS 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 the TWC. The TCEQ, under the authority of the TWC and the Texas Health and Safety Code, requires owner's 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 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:

Address at Site: _____

Legal Description: _____

The property is owned by: _____

This OSSF must be covered by a continuous maintenance contract. The undersigned further understands that the owner of the surface application system shall continuously maintain a signed written contract, for service and repairs, with a valid maintenance company. An approved maintenance company must perform all maintenance on this OSSF, and a signed maintenance contract must be submitted to the BRAZOS COUNTY AUTHORIZED AGENT 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 material for the OSSF can be obtained from the Brazos County Health Department.

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

Signature of Owner(s) _____

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS _____ DAY OF _____, _____
By _____
(Name of homeowner(s))

Notary Public, State of Texas
Printed Name: _____
My Commission Expires: _____

PROPERTY OWNER: _____ PROPERTY ADDRESS: _____

BRAZOS COUNTY SEPTIC PAPERWORK CHECK LIST

ALL PAPERWORK MUST BE SIGNED BY THE LEGAL PROPERTY OWNER.

- WAIVER.
- BRAZOS COUNTY APPLICATION PAGE
- 2- YEAR MAINTENANCE CONTRACT
- BRAZOS COUNTY AFFIDAVIT TO THE PUBLIC (THIS PAGE MUST BE NOTARIZED)
- SOIL EVALUATION (WE WILL PROVIDE THIS)
- DESIGN & SITE PLAN (WE WILL PROVIDE THIS)
- DEED TO PROPERTY IF YOU HAVE RECENTLY PURCHASED THE PROPERTY.
- COMPLETE COPY OF THE FLOOD PLAIN DEVELOPMENT PERMIT (PROPERTY OWNER IS REQUIRED TO OBTAIN THIS PER COUNTY REQUIREMENTS CONTACT INFO BELOW)

Floodplain Permit Information:

Brazos County Road and Bridge Department
2617 W. Hwy 21
Bryan, Texas 77803
(979) 822-2127

<https://www.brazoscountytexas.gov/FormCenter/Road-and-Bridge-Department-2/Brazos-County-Floodplain-Development-Per-53>

NOTES:

I WILL NEED THE ORIGINALS MAILED TO ME @ P.O. BOX 600 ANDERSON TX 77830 FOR ALL AEROBIC PAPERWORK.

NOTARIZED AFFIDAVIT (AEROBIC SYSTEMS ONLY) - I AM A NOTARY IF YOU NEED ONE.

SOIL EVALUATION - WE WILL PROVIDE THIS. IF YOU HAVE ALREADY HAD THIS DONE PLEASE INCLUDE THIS WITH THIS PAPERWORK

DESIGN - WE WILL PROVIDE THIS. IF YOU HAVE ALREADY HAD THIS DONE PLEASE INCLUDE THIS WITH THIS PAPERWORK

SITE PLAN - WE WILL PROVIDE THIS. IF YOU HAVE ALREADY HAD THIS DONE PLEASE INCLUDE THIS WITH THIS PAPERWORK

PLEASE NOTE THAT THE PROPERTY OWNER WILL HAVE TO BE THE ONE TO FILL OUT & SIGN THE PAPERWORK. THE COUNTY REQUIRES THAT ONLY PROPERTY OWNERS CAN SIGN. IF YOU HAVE POA PLEASE INCLUDE THAT INFORMATION WITH PAPERWORK.

THANK YOU,
CHLOE BUTTS