



KB SEPTIC SYSTEMS

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

KBSEPTICSYSTEMS@NETZERO.NET

Office Use.

Date Received _____

Received By: _____

County: **BURLESON**

Permit # _____

Type: **RES. CONV.**

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: _____



Burleson County Environmental Office
100 West Buck St, Suite 303, Caldwell TX, 77836
Phone: (979) 567-2360

(Office use only)

PERMIT NUMBER

Payment Receipt Number

APPLICATION FOR AN ON-SITE SEWAGE FACILITY

All information on this form is required. Forms with missing information will be rejected. If your installer does not request a construction inspection by the permitting authority within one year of the issuance of the authorization to construct, the authorization to construct expires, and the owner will be required to submit a new application and fee. All systems require a construction inspection before a License-to-Operate is issued. **License-to-Operate is required before the septic system is put into use.** Fees subject to change.

Reason for Permit (check one) New Construction System Replacement System Repair/Modification Transfer of Ownership

Owner Name: _____

Phone: _____

911 Address: _____

City/State: _____ Zip: _____

Email Address: _____

Owner will receive the license to operate at the email address provided.
Please print clearly.

Single Family Residential

Type of Construction:
(house, mobile home, RV, etc) _____

Commercial/Multi-unit residential

Type of Facility: _____

Living Area Square FT: _____

Offices, Factories, Churches, Schools, Parks, Etc. Number Of Occupants: _____

Year structure built: _____

Restaurants, Lounges, Theaters Number of Seats: _____

Number of bedrooms: _____

Hotel, Motel, Hospital, Nursing Home Number of Beds: _____

Travel Trailer/RV Parks/Multi-unit residential Number of Spaces: _____

Other: _____

Water Source: Private Well: YES NO if no, enter name of public water supplier _____

Subdivision Name: (if applicable) _____ Lot #: _____ Acres: _____

Property ID: _____ The Property ID and legal description is available from the Burleson County Appraisal District

Property Legal Description: _____

Is this property in the floodplain? YES NO

Is this property homesteaded? (optional) YES NO

I certify that the above statements are true and correct to the best of my knowledge. By signing I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on the property. Authorization is hereby given to the BURLESON COUNTY DESIGNATED REPRESENTATIVE (DR), the authorized agent for Texas Commission On Environmental Quality (TCEQ), to enter upon the above described property for the purpose of lot evaluation and inspection of the on-site sewage facility and that a license-to-operate the facility will be granted following successful inspection of the installed system which indicates that the system was installed in compliance with the Texas Commission On Environmental Quality (TCEQ) On-Site Facility Rules, TAC30, Chapter 285.

Signature of Owner: _____ Date: _____

OFFICE USE ONLY – Application updated 10/20/2023

Residential \$330 Commercial \$540 Re-Inspection \$ _____ Modification \$ _____ Repair \$100 REF# _____ DATE _____

MODIFICATION – OSSF systems with current permit on record; modification includes any changes that add to or take away from the original design of the OSSF system.
REPAIR – OSSF systems with current permit on record in need of repair due to collapsed lines, tanks, etc. Repairs do not alter the original design of the OSSF.



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PERMIT NUMBER

ON-SITE SEWAGE FACILITY TECHNICAL INFORMATION FOR PERMIT

Site Address: _____

Professional Design Required: Yes No if yes, professional design must be attached

Tank size in gallons: _____ **Absorption/Application Area (sq ft)** _____

Daily wastewater usage rate: Q = _____ (gallons/day) **Water saving devices:** Yes No

GPS LOCATION OF WATER WELL (if applicable)

Latitude: (30.xxxxxx) _____

Longitude (-96.xxxxxx) _____

CONTACT INFORMATION (REQUIRED)

Installer Name: K. ANDREW BUTTS

Provide installers name NOT the company name

Site Evaluator Name: _____

License #: _____

Phone #: _____

License #: 0029543

Phone #: 936.825.6223 OFFICE/936.825.4978 CELL

Installer Email: kbsepticsystems@netzero.net

Designer Name: _____

License #: (RS or PE) _____

Phone #: _____

Note – This information must be attached for review to be completed.

- A. Site Evaluation
- B. Planning Materials
- C. Site Design

DO NOT BEGIN CONSTRUCTION UNTIL THE AUTHORIZATION TO CONSTRUCT HAS BEEN ISSUED.
UNAUTHORIZED CONSTRUCTION CAN RESULT IN CIVIL AND OR ADMINISTRATIVE PENALTIES.

Signature of Installer or Designer: _____ Date: _____



Burleson County
Environmental Office
On-site Sewage Facility Permitting

100 W Buck St, Suite 303, Caldwell, TX 77836
PHONE 979-567-2360

Property Owner Release

This letter must be filled out the by the property owner if another party is submitting an application to construct an on-site sewage facility on their property. This letter must be submitted with the On-Site Sewage Facility application packet.

Property Owner's Contact Information:

Phone: _____ E-Mail: _____

I, _____ am the owner of the property listed below and I certify that I have granted permission to **CHLOE BUTTS/ KB SEPTIC SYSTEMS**, to obtain permits necessary for the construction or installation of an On-Site Sewage Facility at the following address and legal description:

Property Owner's Signature

Date



Checklist for OSSF Application Submission

The following items must be submitted together:

- Application for an On-Site Sewage Facility, original document only
- Copy of 911 Address Verification letter
- OSSF Technical Sheet, form completed by installer, original document
- Site and soil evaluation, original or scanned copy. No screenshots or images accepted.
- System plan/design, original or scanned copy. No screenshots or images accepted.
- Affidavit to the Public (2 pages) – if required by system selection. *This must be filed by the property owner or their representative with the Burleson County Clerk's office. Burleson County Environmental office will not file this document for anyone.*
- Signed maintenance contract, if required by system selection
- OSSF permit fee, check or money order payable to Burleson County
- Property Owner Release - This form must be completed by the property owner if another party is submitting an application to construct an on-site sewage facility on their property (this is not for the installer)