

MILLS COUNTY  
P.O. BOX 483  
GOLDTHWAITE, TX 76844  
325-648-2222  
325-648-2806 fax

**PERMIT PROCEDURE FOR ON-SITE SEWAGE FACILITY:**

**\*\*ALL pages in packet MUST be filled out completely\*\***  
**"SEE ATTACHED" WILL NOT BE ACCEPTED**

- \_\_\_ Obtain an application from Mills County Judge's Office.
- \_\_\_ Have appropriate individual (Registered Sanitarian, Professional Engineer, or Site Evaluator) perform mandatory soil identification procedure.
- \_\_\_ Have appropriate individual prepare planning materials. Professional design (R.S., P.E.) is required for proprietary and non-standard systems.
- \_\_\_ **If installing an Aerobic/Surface System an AFFIDAVIT TO THE PUBLIC** (last page of this permit) **must be filed** with the County Clerk's office and a copy attached to the permit. (Filing fee applies)
- \_\_\_ Submit **completed** application and technical information sheet ( in property owner's name) **with all pages intact**. Include the appropriate fee for permit **\$310.00** and **copy of legal description** from deed of property – may obtain through Clerk's office or Appraisal Dist.
- \_\_\_ Plans and application will be reviewed by county staff.
- \_\_\_ Upon approval an Authorization to Construct will be issued. The Authorization to Construct is valid for one year from the date of issuance. After one year, a new application and fees are required.
- \_\_\_ Begin construction. Inspection is required **BEFORE** covering of the system. Contact county inspector at least **5 working days** in advance to arrange for the inspection.

**GENERAL INFORMATION:**

**\*\*AS OF 7-27-09 PERMIT REQUIRED REGARDLESS OF ACREAGE\*\***

1. **Mills County Inspector, Al Hamrick 325-372-1751**
2. No refund of any amount will be granted.
3. Inspection Fee is included in the permit fee.
4. A **re-inspection fee** equal to ½ the permit amount must be **paid by the installer** for each time the system must be re-inspected. All fees must be paid before a Notice of Approval will be issued.



**MILLS COUNTY  
ON-SITE SEWAGE FACILITY  
TECHNICAL INFORMATION FOR PERMIT**

APPLICATION # \_\_\_\_\_

**DO NOT BEGIN CONSTRUCTION PRIOR TO APPLICATION APPROVAL.  
UNAUTHORIZED CONSTRUCTION CAN RESULT IN CIVIL AND/OR  
ADMINISTRATIVE PENALTIES.**

Owner's Name: \_\_\_\_\_ County \_\_\_\_\_

Professional design required? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, professional design attached? \_\_\_\_\_ Yes \_\_\_\_\_ No

1. Sewer (House drain): Type and size of pipe: \_\_\_\_\_  
Slope of sewer pipe to tank: \_\_\_\_\_

2. Daily Wastewater usage rate: Q = \_\_\_\_\_ (gallons per day)  
Water saving devices: \_\_\_\_\_ Yes \_\_\_\_\_ No

3. Treatment Unit:

a. \_\_\_\_\_ Septic Tank - Manufacturer \_\_\_\_\_  
Tank dimensions \_\_\_\_\_ Liquid depth \_\_\_\_\_  
Size required \_\_\_\_\_ Size Proposed \_\_\_\_\_

b. \_\_\_\_\_ Aerobic - Manufacturer: \_\_\_\_\_ Model # \_\_\_\_\_  
Size required \_\_\_\_\_ Size Proposed \_\_\_\_\_

c. \_\_\_\_\_ Other: \_\_\_\_\_  
(Please attach description.)

4. Disposal System: Type \_\_\_\_\_  
Area Required: \_\_\_\_\_ Area Proposed \_\_\_\_\_

5. Additional Information (**Note – This information must be attached for review to be completed.**)

**a. Site Evaluation**

**b. Planning Materials**

\_\_\_\_\_  
**Designer's Signature**

\_\_\_\_\_  
**Registration No.**

\_\_\_\_\_  
**Date**

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

Application No.: \_\_\_\_\_

**Applicant Information:**

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

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

City: \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Site Evaluator Information:**

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

Company \_\_\_\_\_

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

City: \_\_\_\_\_ State \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

**Property Location:**

Lot \_\_\_ Block \_\_\_ Subdivision \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ County: \_\_\_\_\_

Unincorporated Area? \_\_\_ Yes \_\_\_ No

**Installer Information:**

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

Company: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email or Fax: \_\_\_\_\_

**Schematic of Lot or Tract**

**Show:**

- Compass North, adjacent streets, property lines, property dimensions, location of buildings, easements, swimming pools, water lines, and other structures where known.
- Location of existing or proposed water wells within 150 feet of property
- Indicate slope or provide contour lines from the structure to the farthest location of the proposed soil absorption irrigation area.
- Location of soil borings or dug pits (show location with respect to a known reference point.)
- Location of natural, constructed, or proposed drainage ways, (streams, ponds, lakes, rivers, high tide of salt water bodies) water impoundment areas, cut or fill blank, sharp slopes and breaks.

Lot Size: \_\_\_\_\_ Acres

**Application # \_\_\_\_\_**

**Site Drawing**  
**Scale: 1 inch = 50 ft.**

**Compass  
North**



**SKETCH MUST BE DRAWN TO SCALE & SHOW LOCATION OF  
SOIL SAMPLE POINTS OF SOIL ANALYSIS.**

Features of Site Area

Presence of 100-year flood zone?     Yes     No  
Presence of upper water shed?         Yes     No  
Presence of adjacent ponds, streams, water impoundments?     Yes     No  
Existing or proposed water well in nearby area ?     Yes     No  
Organized sewage service available to lot or tract ?     Yes     No

Site Evaluator: \_\_\_\_\_ Signature: \_\_\_\_\_  
License No.: \_\_\_\_\_ Date: \_\_\_\_\_

Application # \_\_\_\_\_

**OSSF SOIL EVALUATION**

Date Performed: \_\_\_\_\_  
 Property Location: \_\_\_\_\_  
 Proposed Excavation Depth: \_\_\_\_\_

**Requirements:**

1. At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area.
2. Locations of soil boring or dug pits must be shown on this site drawing.
3. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.
4. Describe each soil horizon and identify any restrictive features on the form. Indicate depths where features appear.

**Soil Boring Number:**

Depth (Feet)	Textural Class	Structure (is applicable)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0					
1					
2					
3					
4					
5					

**Soil Boring Number:**

Depth (Feet)	Textural Class	Structure (is applicable)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0					
1					
2					
3					
4					
5					

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 Site Evaluator

\_\_\_\_\_  
 License #

\_\_\_\_\_  
 Date

AFFIDAVIT TO THE PUBLIC

COUNTY OF MILLS  
STATE OF TEXAS

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_, who, after being by me duly sworn, upon oath states that he/she is the \_\_\_ representative of, or \_\_\_ owner of record of that certain tract or parcel of land lying and being situated in Mills County, Texas, and being more particularly described as follows:

Name of Owner of Property \_\_\_\_\_

Physical Address of Property \_\_\_\_\_

Survey Name \_\_\_\_\_ Abst. \_\_\_ Vol. \_\_\_ Page(s) \_\_\_ Acres \_\_\_

OR

Subdivision \_\_\_\_\_ Phase \_\_\_ Blk \_\_\_ Lot \_\_\_

\_\_\_\_\_ GPD is the maximum usage for this residence

( ) EVAPOTRANSPORATIVE

The undersigned further states that he/she will, upon any sale or transfer of the above described property, inform any buyer or transferee that an Evapotransporative drain field is utilized on the property. State law requires this due to the system's wastewater disposal limits.

( ) AEROBIC SYSTEM:

The undersigned further states that he/she will, upon any sale or transfer of the above described property, request a transfer of permit to operate such system to the buyer or transferee. Any buyer or transferee is hereby notified that a maintenance contract with an approved maintenance company will be required for use of the system.

Failure to abide by the above stated conditions constitutes a violation of the Rules of Mills County, Texas for On-Site Sewage Facilities and will result in the filing of a complaint with the Justice of the Peace Court having jurisdiction in the area where the offense

WITNESS MY HAND on this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
(Representative or Property Owner's Signature)

SWORN TO AND SUBSCRIBED BEFORE ME on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_.

\_\_\_\_\_  
NOTARY OF PUBLIC in and for the STATE OF TEXAS

\_\_\_\_\_  
Licensed Installer's Signature