

ON-SITE SEWAGE FACILITY APPLICATION AND CONSTRUCTION PERMIT NO._____

Check No.	Recpt. No
Authorization to Construct Date:	

1. Property owner's	name:	(Last	<u> </u>		(First)			Iiddle)
2. Current mailing a		mail address:	· !		(First)		(14.	
Check if n	_							
3. Telephone number	::	Home				Work		
4. Legal description:						WOIK		
8F	Block	Section	Lot/Tract No	No. of	Acres		Subdivi	son
	L.C.A.D. #	R						
5. Site Address:								
Directions if applicable	e							
6. Variance requested Unplatted subdivisi	ision - date	lot subdivide	d:					
7. Builder's or agent	's name:	(Last			(First)		(Work pl	hone no.)
		`	,			1	(,
8. Installer's name: 9. Designer's name, i	f applicable	(must be D F	or P S)	License no.	0	Poo	T 70	<u> </u>
						KCg	z. 110	
10. Water usage rate Water-saving (() Single-fami	levices? _	Yes	i				rivate iving area	Public
() Institutiona	l (including							
				Estimate	ed daily water	r consumption		gallons
11. Site evaluation an A. Depth to bott			ist ha 24"> than	proposed drain	fiold)			inches
								inches
	Class III (s	suitable)		Class IV (unsuitable)		_	
C. Presence of h	ard caliche	deposits?	D. Presence	of other condit	ions which wi	ll affect suitab	ility, size, or lo	cation of system?
If yes, please explain								
E. Is the site loc	ated in the 1	00-year flood	lplain?	If yes,	explain what j	precautions wi	ll be taken to p	revent tank
flotation & envi	ronmental c	ontamination	l					
F. Site evaluator's n	ame			1	License no	OS		
12. Tank size and ma	nufacturer:							
13. Drainfield:	Lea	ching chamb	ers	PVC of Other:	& Gravel		Gravelle	SS
14. Total drainfield a	rea:		square feet					
15. Please draw prop	osed layout doned sewag	of septic syst ge disposal sys	em on back of th stems, easement	nis sheet noting l lines, swimming	pools, ponds	/lakes, sharp sl	lopes, drainage	nes, foundations, surface ditches, direction of and associated trench widths
	Y DESIGNA	ATED REPR	ESENTATIVE((S) TO ENTER	UPON THE	ABOVE DESC		EBY GIVEN TO THE ATE PROPERTY FOR
16. Signature of own	er or agent						Date	

LUBBOCK COUNTY OSSF SOIL EVALUATION FORM

Property owner:	
Site Location/Address:	
Name of Site Evaluator:	Registration No. OS
*At least two soil evaluations must be performed or *Soil evaluations must be performed to a depth of a	Proposed Depth of Excavation:inches not the site, at opposite ends of the proposed disposal area. It least two feet below the proposed excavation depth. The restrictive features in the space provided below. Draw lines at the

Depth (inches)	Textural Class	Structure (if applicable)	Drainage Mottles/ Water Table?	Restrictive Horizon?	Comments
0 -					
12 -					
24 -					
36 -					
48 -					
60 -					
72 -					
84 -					

Soil Boring No.					
Depth (inches)	Textural Class	Structure (if applicable)	Drainage Mottles/ Water Table?	Restrictive Horizon?	Comments
0 -					
12 -					
24 -					
36 -					
48 -					
60 -					
72 -					
84 -					