

Septic System - Original Permit

This is a copy of the original septic system installation permit which is a conventional septic system (*allowed due to deep sandy loam soil*).

Bastrop county accepted the testing that was done showing the septic system is functioning normally and is acceptable for a house or mobile home up to 2500 square feet.

If a home larger than 2500 square feet is to be built, Bastrop County said the septic system leech field would have to be enlarged (*in this event, the existing septic tank itself would not need to be altered*).

Property owner (Seller) is needing to relocate to a different county and ended up not building on the property after all.

Original Septic System Permit

BASTROP COUNTY
DEPT. OF HEALTH & SANITATION
P. O. BOX 802
BASTROP, TEXAS 78602

PLEASE DO NOT WRITE IN THIS BLOCK

APPLICATION NUMBER
2291

Rc'd: _____ by _____ Ref: _____
Amount Enclosed: \$ _____

cut
45.00
APPLICATION FOR PRIVATE SEWAGE FACILITY LICENSE

\$ _____ FEES ENCLOSED FOR: () APPLICATION. () INSPECTION. () PERCOLATION TESTS.

To the Bastrop County Department of Health & Sanitation:

I hereby make application for a Permit to construct and a License to operate a private sewage system as required by County Ordinance and approved by Texas Water Quality Board Resolution No. 75-R-6, October 29, 1975.

(ALL INFORMATION BELOW MUST BE COMPLETED FOR A PERMIT OR LICENSE)

Property Owner's Name: RICHARDSON (LAST) JAMES (FIRST) GLEN (MIDDLE)

Permanent Mailing Address: Rt 2 (NUMBER and STREET, or BOX) Box 149L (CITY) Smithville (STATE and ZIP CODE) TX 78957

Telephone Numbers: (HOME) 1 (BUSINESS) 1

Location of Property: Smithville (COUNTY) WEST (NAME OF SUBDIVISION) LOT 40 (SECTION No.) 1 (BLOCK No.) 140 (LOT No.)

IF located in a Subdivision: Smithville West (NAME OF SUBDIVISION) 1 (SECTION No.) 1 (BLOCK No.) 140 (LOT No.)

IF NOT in a Subdivision: _____

DESCRIBE LOCATION OF PROPERTY AND ATTACH A MARKED MAP, AERIAL PHOTOGRAPH OR SKETCH SHOWING ACCESS ROADS, LANDMARKS AND APPROXIMATE DISTANCES:

(USE OF PROPERTY)

TYPE DWELLING: (Check one) () HOUSE. () MOBILE HOME/HOUSE TRAILER () OTHER (Describe on back)

AVERAGE NO. OCCUPANTS: 4 DAYS PER YEAR PLUMBING USED: _____

SOURCE OF WATER SUPPLY: () SUBDIVISION SYSTEM. () WATER DISTRICT. () WELL. () _____

ALL APPLICANTS please write TOTAL numbers of items below, and leave blank for "none"

1. BEDROOMS	<u>3</u>	4. LAVATORIES	<u>2</u>	7. KITCHEN SINKS:	<u>1</u>	10. GARBAGE DISPOSER	
2. COMMODES	<u>2</u>	5. SHOWERS		8. CLOTHES WASHERS	<u>1</u>	11. GREASE TRAP	
3. URINALS		6. BATHTUBS	<u>2</u>	9. AUTOMATIC DISH WASHER	<u>1</u>		

(SEWAGE SYSTEM INFORMATION)

SEPTIC TANK INFORMATION	ABSORPTION FIELD INFORMATION
1. Number of Separate Systems at This Location: _____ NOTE: If more than one system, give same information, as below, for tank and field on back of this form.	1. Nearest Water Well or Cistern Distance: _____ Feet
2. Nearest Water Well or Cistern Distance: _____ Feet	2. Type Field: () Trench or ditch system (<input checked="" type="checkbox"/>) Absorption Bed System
3. Distance to an Organized Sewer Collection System Line: _____ Feet	a. Trench Size: (Wd) _____ inches X (Dp) _____ inches X (Total Lg.) _____ Ft. (OR)
4. Tank Capacity: <u>1000</u> Gallons. 5. _____	b. Bed Bottom <u>10</u> Ft. X (Lg.) <u>80</u> Ft. Size: (Wd) _____ Ft. X (Lg.) _____ Ft.
6. Number of Tank Compartments: _____	Minimum Total Size: <u>800</u> Sq. Ft.
7. Name the Installer: <u>Bill Wright</u>	Washed rock or gravel shall be 1 1/2-2 1/2 in. () Washed sand to be used (<input checked="" type="checkbox"/>) Sandy loam back fill Required
8. Tank Made of: () FIBERGLASS (check one) (<input checked="" type="checkbox"/>) PREFAB CONCRETE () CONCRETE POURED IN PLACE, give size below: * (Wd) _____ Ft. X (Lg.) _____ Ft. X (Dp) _____ Ft.	PLEASE DRAW A LAYOUT AND DIMENSIONS OF YOUR PROPERTY AND SEWAGE SYSTEM, ETC. ON BACK OF THIS SHEET OR ATTACH A COPY OF THE INSTALLER'S PLAT.
() Other: _____	

AUTHORIZATION is hereby given to the Bastrop County Department of Health & Sanitation, Texas Water Quality Board, the Texas State Department of Health, and to their agents or designees, singularly or jointly, to enter upon the above described property during daylight

hours for the purpose of making soil percolation tests, inspecting private sewage systems, or for any reason consistent with the water quality program of the Texas Water Quality Board, the Texas State Department of Health and the Bastrop County Department of Health & Sanitation.

Mail this completed form, with Fees, to
DEPT. OF HEALTH & SANITATION
P. O. BOX 802
BASTROP, TEXAS 78602

James Richardson
(SIGNATURE OF APPLICANT)

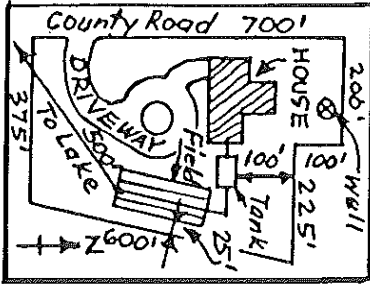
DATE: 8 April, 1985

DWELLING SEWAGE APPLICATION

LAYOUT SPACE

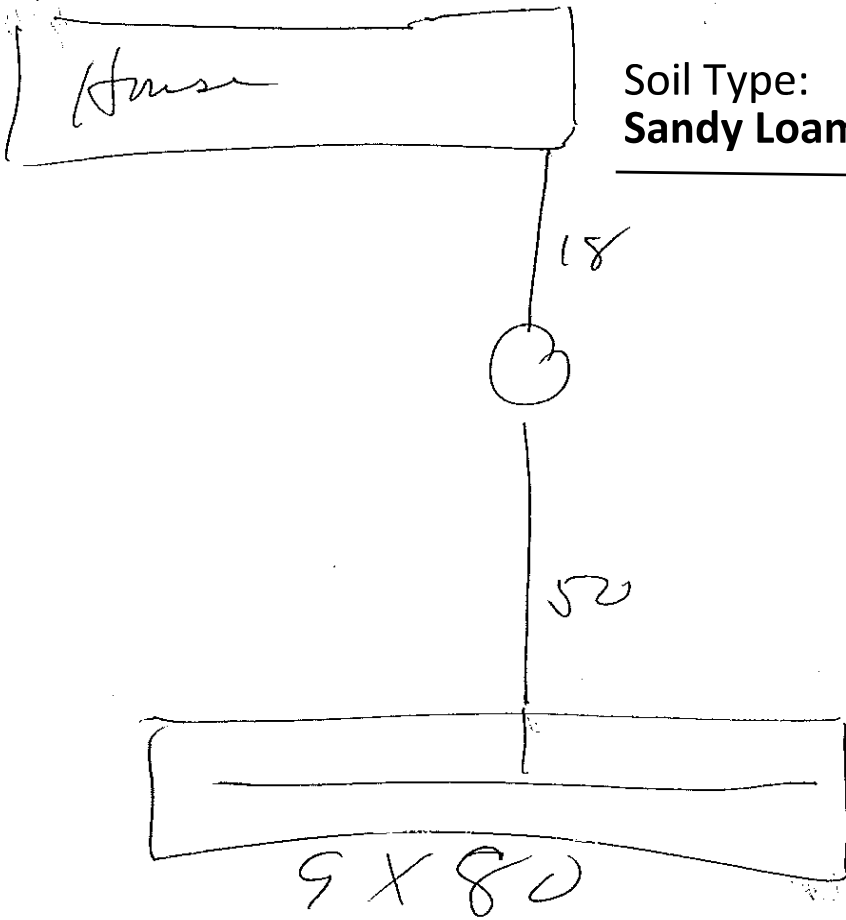
For Property Outline, Size and Improvements Location.

EXAMPLE



In addition to other information requested on other side, please indicate:

1. Direction of North at property.
2. Direction and Distance from Field to nearest Lake Shoreline.



Soil Type:
Sandy Loam

FOR OFFICE USE ONLY	
APPLICATION NUMBER	
Percolation Rate <i>Est 15</i> min./in.	
Forms Mailed 1108 <i>met owner</i> 1109 _____	
Prior Inspection Date <i>4-8-83</i> Soil Condition → <i>Sandy loam</i>	
Slope of Area <input type="checkbox"/> Flat <input checked="" type="checkbox"/> Sloping <i>1/8" - 1"/ft.</i> <input type="checkbox"/> Steep 1"/ft. & over	
Final Inspection Date <i>4-11-83</i> Septic Tank: <i>1000</i> gals. <input checked="" type="checkbox"/> Approved As <input type="checkbox"/> Modified Approved <input type="checkbox"/> Disapproved	
Absorption Field: <input type="checkbox"/> Trench _____ Sq. Ft. <input checked="" type="checkbox"/> Bed <i>720</i> Sq. Ft.	
<input checked="" type="checkbox"/> Approved As <input type="checkbox"/> Modified Approved <input type="checkbox"/> Disapproved	

Subject **FW: PI Request**
From Public Information <public.information@co.bastrop.tx.us>
Date 2023-06-05 08:15

Amber Hobbs has shared a OneDrive for Business file with you. To view it, click the link below.

 [2000-2291.pdf](#)

Good morning,

Attached is the information requested.

Thank you!

Amber Hobbs

Public Information Records Clerk | Bastrop County

804 Pecan St | Bastrop, TX 78602

512-581-4080 | amber.hobbs@co.bastrop.tx.us | <http://www.co.bastrop.tx.us>



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