



WASHINGTON COUNTY  
ENGINEERING AND DEVELOPMENT SERVICES  
Environmental Health Division  
3650 Hwy 36 N, Brenham, Texas 77833

<b>Office Use Only</b>
Permit #OSSF _____
Fee Paid \$ _____
Date _____
Receipt # _____

**ON-SITE SEWAGE FACILITY PERMIT APPLICATION**  
**Single-Family Residential or Accessory Structure**

Property Owner's Name \_\_\_\_\_

Installation Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_ (Can we text this number?)  Yes  No

Email \_\_\_\_\_

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**Property Information**

Acreage \_\_\_\_\_  Private Water Well  Public Water Supply (Name) \_\_\_\_\_

List other structures on this property that use a septic system \_\_\_\_\_

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The structure to be served is  New  Existing

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The structure to be served is a

House/Modular Home  Manufactured/Mobile Home

Other (Describe) \_\_\_\_\_

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No. of Bedrooms \_\_\_\_\_ Living Area (Sq. Ft.) \_\_\_\_\_



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**To avoid delay, please include as much of the following information as you can:**

Appraisal District property ID number (five numbers) \_\_\_\_\_

A copy of your filed deed (If Appraisal District property ID number is not in your name)

Licensed Installer's name and phone number (if one has been selected) \_\_\_\_\_

Licensed Installer's email (if one has been selected) \_\_\_\_\_

Type of System to be installed (if system type has been selected) \_\_\_\_\_

Is any portion of the property in the Floodplain?       Yes     No     Unsure

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**Information for the owner of an On-Site Sewage Facility (OSSF or septic system)**

- All septic systems require a permit, regardless of acreage.
- The amount of maintenance required and the long-term cost can vary a lot depending on the type of system.
- Decisions regarding system type must take the owner's wishes into consideration.
- Washington County does NOT require any certain type of septic system; you have options, and may choose to install any type of system that meets code.
- We are here to assist you in making an informed decision when choosing the type of system to install.
- If you have any questions or concerns, contact our office at 979-277-6290.

I acknowledge receipt of the information for the owner of an On-Site Sewage Facility and I certify that the information given by me with this application is true and accurate to the best of my knowledge. I authorize Washington County Environmental Health employees, their agents and designees, to enter upon the subject property for purposes associated with this application, which may include site evaluation, inspection, traditional photos, and photos taken by drone.

\_\_\_\_\_  
(Signature of Owner)

\_\_\_\_\_  
(Date)