P.O. Box 220 S-204P, Austin, TX 78767
512-578-3216 or 800-776-5272, Ext. 3216
Fax 512-578-3501

2643 N. Wirtz Dam Road, Marble Falls, TX 78654
800-776-5272, Ext. 3216
Fax 830-693-6242

On-Site Sewage Facility (OSSF) Approval for Continued Use Application

This box for LCRA use only **FORM 1100**

APPLICATION NO. _____ DATE_____NEW OWNER_____ T-O-O_____FEE $_____

This box for LCRA use only

Date entered:_____

Entered by:_____

I hereby make application for approval for continued use of an OSSF in one of the Highland Lakes Zones as required by LCRA OSSF Rules.

ALL INFORMATION MUST BE PROVIDED

_____ _____ _____

Owner's last name or company name First name MI Additional owner's name

If owned by a company, provide a copy of a corporate resolution that names the officers.

_____ _____ _____

Mailing address, number and street or box City State and ZIP code

_____ _____ _____ _____

Home phone number Business phone number Cell number Email address

Property location: _____ _____ _____

Nearest lake County Tax ID #

If within the city limits, <u>circle one</u>: Jonestown Lakeway Volente Lago Vista Briarcliff Granite Shoals

Subdivision:_____Section No._____ Block No._____ Lot No._____

If property is not located in a subdivision, provide full legal description:_____

Property site address: _____ City:_____

Type of residence, check one: ( ) Single-family ( ) Multi-family

( ) Commercial, Describe:_____ Gallons used per day:____

Source(s) of water supply, check all that apply: ( ) Subdivision ( ) Water district, name of provider: _____

( ) Well ( ) Cistern ( ) Lake pump (LCRA requires a contract for the use of water from the Highland Lakes)

The heated/cooled living area of the residence is_____ square feet.

State the TOTAL number of items below and write zero (0) for none. Note the number of bedrooms includes heated and/or cooled rooms with adequate space, privacy and a closet.

1. Bedrooms: _____ 2. Bathrooms:_____ 3. Kitchens:_____
4. Living Rooms: _____ 5. Recreation Rooms/Dens: _____ 6. Offices/Studies:_____

Authorization is hereby given to LCRA, the Texas Commission on Environmental Quality (TCEQ), and to their agents or designees, singularly or jointly, to enter upon the above described property during daylight hours for the purpose of inspecting on-site sewage facilities, or for any reason consistent with the water quality programs of TCEQ or LCRA.

_____ _____

Property Owner's Signature Date