



TARRANT REGIONAL WATER DISTRICT
APPLICATION FOR ON-SITE SEWAGE FACILITY

TRWD USE ONLY
APP. NO.:

TRWD RESERVOIR

RECEIPT NO.:

DATE:

COUNTY OF INSTALLATION

AMOUNT:

Lake Bridgeport
1710 FM 1658
Bridgeport, TX 76426
940-683-2349
940-683-4016 (FAX)

Cedar Creek Lake
6613 Ashby Lane
Trinidad, TX 75163
903-432-2814
903-432-3355 (FAX)

Eagle Mountain Lake
10201 North Shore Drive
Fort Worth, TX 76135
817-237-8585
817-237-8563 (FAX)

Richland-Chambers Reservoir
140 FM 416
Streetman, TX 75859
903-389-3928
903-389-7587 (FAX)

PLEASE FILL IN ALL BLANKS. If the information requested in a space is not applicable, please mark it NA to indicate that you have not inadvertently skipped it.

- 1. PROPERTY OWNER'S NAME: (LAST) (FIRST) (MI)
2. PERMANENT MAILING ADDRESS: (STREET/PO BOX) (CITY/STATE) (ZIP)
3. DAYTIME TELEPHONE NUMBER : ()
4. SITE ADDRESS: (STREET) (CITY/STATE) (ZIP)
5. LEGAL DESCRIPTION: SUBDIVISION: LOT/TRACT BLOCK/ABSTRACT COUNTY DATE OF PLAT/ SURVEY: IF OTHER THAN SUBDIVISION: ACREAGE SURVEY ABSTRACT
6. SOURCE OF WATER: Private Well Public Water Supply (NAME)
7. SINGLE FAMILY RESIDENCE: NUMBER OF BEDROOMS LIVING AREA (sq ft)
8. IF COMMERCIAL/INSTITUTIONAL (including multi-family residences) TYPE: NO. OF EMPLOYEES/OCCUPANTS/UNITS: DAYS OCCUPIED PER WEEK:
9. ESTIMATED DAILY WATER CONSUMPTION (Gal/Day): WATER SAVING DEVICES INSTALLED Y N
10. SYSTEM DESIGNER: LICENSE #: TELEPHONE #:
11. PROPOSED INSTALLER: LICENSE #: TELEPHONE #:

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given to the Tarrant Regional Water District to enter upon the above-described property for the purpose of lot evaluation and inspection of on-site sewage facilities. I understand that the approval of this application constitutes authorization for construction of the on-site sewage facility and that a permit to operate the facility will be granted following successful inspection of the installed system which verifies that the system was installed in compliance with the TCEQ's On-Site Sewage Facility Rule (OSSF) and the TRWD Waste Control Order.

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

12. SIGNATURE OF OWNER OR OWNER'S AGENT DATE

13. SIGNATURE OF AUTHORIZED TRWD REPRESENTATIVE LICENSE # DATE