

HUNT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL SERVICES 2701 JOHNSON STREET GREENVILLE, TX 75401 TELEPHONE: 903-408-4140 FAX: 903-454-2913

E-MAIL: health@huntcounty.net

PRIVATE SEWAGE DISPOSAL CHANGE OF OWNERSHIP

PERMIT #	
New Owner:	
Driver's License Number	
Driver's License Number	
Phone Number (Home) (Work)	 3
Cell Number Email Address	
Property Address:	-
Previous Owner:	
PLEASE READ AND SIGN:	
The undersigned understands that a properly installed sewage facility can malfunin water usage, water leaks, seasonally high water tables, soil conditions, age of s and low evaporation rates can cause failure of a system. The owner is responsible out tanks every 2-4 years based on family and type of wastewater being discharge applicant's responsibility to correct, change, or increase the system due to the ma properly installed system. The applicant must maintain and operate the facility in manner and comply with all County, State, and Federal regulations.	ystem, rainfall for pumping ed. It is the lfunction of a
Aerobic Wastewater Treatment System: The owner of an aerobic waste responsible for chlorine and maintaining a written maintenance contract w maintenance company at <u>all</u> times. Homeowner agrees to receive legal services to	ith an approved
Applicant's Signature: Date:	