

**HARRIS COUNTY PUBLIC INFRASTRUCTURE DEPARTMENT
APPLICATION FOR DISCHARGE TO COUNTY OR DISTRICT FACILITY**

1. APPLICANT INFORMATION (Please print or type)

Owner/Applicant

Name _____

Applicant Mailing Address _____ City _____ State _____ Zip _____

Home Phone _____ Daytime Phone _____ Fax _____ Pager _____

Agent/Consultant Name _____ Phone _____

Agent's Mailing Address _____ State _____ Zip _____

2. LOCATION OF PROPERTY

Subdivision _____ Section _____ Block _____ Lot _____ Reserve _____

Street Address _____ City _____ State _____ Zip _____

Survey Name _____ Abstract Number _____ Acreage _____

Property Tax Account Number _____ - _____ - _____

3. DISCHARGE LOCATION

Attach the following documents in support of the application

A. Detailed Map Showing Discharge Point [] Key Map Page [] attached GPS Latitude _____ ° _____ ' _____ "

B. Detailed Map Showing downstream Path for one mile after discharge point [] Longitude _____ ° _____ ' _____ "

4. DISCHARGE PARAMETERS

A. Type

[] Treated Sewage Effluent [] Treated Stormwater

[] Potable Water [] _____

B. Quantity: _____ Millions Gallons Per Day ([] Initial [] Intermediate [] Final) Check One

C. Quality (Either Current or Proposed)

BOD:= _____ TSS:= _____

NH₃-N= _____ Disinfection Type = _____

O₂ = _____ Source [] Permit Application

Bacteria (Ecoli or Enterococcus) = _____ [] Other: _____ Specify

5. OTHER PERMITS/APPLICATION:

[] TCEQ Discharge Permit # _____ [] New [] Renewal [] Amendment

[] Harris County Notice # _____ [] Harris County Development Permit # _____

[] Other: _____

I, _____, the undersigned have carefully reviewed this application and my answers to all questions. To the best of my knowledge, the answers are all true and correct.

SIGNATURE of Applicant/Agent/Consultant or Attorney _____ Date _____

Receiving		Date Application Received
Applicant Number	Planchecker	
Request No.	Approved By	
Project ID No.	Date	
Clerk & Date	Vio No.	