BASTROP COUNTY DEVELOPMENT SERVICES APPLICATION

211 Jackson Street, Bastrop, Texas 78602 ◆ 512 / 581-7176 ◆ 512 / 581-7178 (fax) ◆ website: www.co.bastrop.tx.us

OFFICIAL USE ONLY
File #: _____
Rec'd: _____

PRINT CLEARLY AND COMPLETE ALL QUESTIONS. ENTER "N/A" IF ITEM DOES NOT APPLY. DO NOT LEAVE ANY ITEM BLANK.

APPLICATION TYPE *–Select all that apply.*

☐ Development/Construction ☐ Driveway/Right-of-Way ☐ On-Site Sewage Facility ☐ 9-1-1 Address

REQUIRED DOCUMENTS *–Application must include items shown below. An incomplete/illegible application will delay process and may be returned.*

☐ Proof of Ownership
☐ Site Plan
☐ Copy of Survey or Plat
☐ Other Required Permits

On-Site Sewage Facility Must Include:
☐ Septic Plan/Specifications
☐ Site Evaluation Report

Aerobic OSSF Only Must Include:
☐ Affidavit for Maintenance
☐ Maintenance Contract

PROPERTY OWNER INFORMATION *–Enter property owner information only; do not enter builder or agent information.*

Name(s) Shown on Deed: _____
Mailing Address: _____ Apt/Unit/Ste #: _____
City: _____ State: _____ Zip: _____
Daytime Phone #: _____ Email: _____

PROPERTY DESCRIPTION *–Refer to Bastrop Central Appraisal District on-line property records at www.bastropcad.org or call 512-303-1930.*

Property ID Number(s): R_____ Number of Acres: _____
Legal Description(s): _____
Does this property comply with local subdivision plat requirements or meet an exception to the plat requirements? ◯ Yes ◯ No

ENDANGERED SPECIES ACT *–Refer to the Bastrop County Lost Pines Habitat Conservation Plan Area map.*

Is the property located in the Lost Pines Habitat Conservation Plan (LPHCP) area (e.g.: Houston toad habitat)? ◯ Yes ◯ No
If yes, do you agree to participate in the LPHCP for incidental take authorization of the endangered Houston toad? ◯ Yes ◯ No

FLOODPLAIN/FLOODWAY *–Refer to FEMA flood map at www.msc.fema.gov or submit Flood Determination request to vickie.box@co.bastrop.tx.us.*

Is any part of the property within the Federal Emergency Management Agency (FEMA) 100-year floodplain? ◯ Yes ◯ No

DEVELOPMENT INFORMATION *–Provide the following information for each existing and proposed structure. Use additional sheets if necessary.*

List each existing building and indicate if it will be demolished/removed and date: _____
Enter the number of new/proposed structures: _____ Provide the following information for each new/proposed structure:

Classification: ◯ Single Family Residential (select one) ◯ Main ◯ Guest/Secondary ◯ Duplex ◯ Accessory Building
◯ Non Single-Family Residential (select one) ◯ Multi-Family ◯ Single-Unit Commercial ◯ Multi-Unit Commercial
Construction: ◯ Site-Built ◯ Mobile/Pre-manufactured ◯ RV/Travel Trailer ◯ Other: _____
Foundation: ◯ Slab ◯ Pier and Beam ◯ Basement ◯ Other: _____
Dimensions: Total Square Footage: _____ Occupied Square Footage (heat/cool): _____
Number of: Floors/Subfloors: Apts/Stes: Bedrooms: Bathrooms: Kitchens:
Contractor: _____
Daytime Phone #: _____ Email: _____

ON-SITE SEWAGE FACILITY

Designer's Name: _____ Phone: _____ License #: _____
Maintenance Provider: _____ Phone: _____ License #: _____
Installer's Name: _____ Phone: _____ License #: _____
Installation Type: ◯ Standard Design ◯ Professional Design ◯ Modification ◯ Tank Replacement
System Type: _____ Brand: _____
Water Source: ◯ Private Water Well ◯ Public Water System: Name: _____

ACKNOWLEDGEMENT *–Read and acknowledge*

I certify that all information, statements and documents provided are true and correct to the best of my knowledge. I understand that permit(s) may be revoked by Bastrop County, its duly appointed agents, representatives and staff ("the County") at their discretion. Should development/plans be altered, I agree to submit a revised application, pay any additional fees, and immediately cease development until further notice by the County. I acknowledge that the submittal of this application and any subsequent permit(s)/correspondence(s) does not create liability on the part of the County; in addition I agree to hold the County harmless against any actions for resulting personal injury or property damage. I hereby grant the County access to the identified property for site, development, and compliance inspections.

Signature: _____ Date: _____
Print Name: _____ ◯ Owner ◯ Owner's Agent ***(Owner's written approval required.)***