



**BRAZOS COUNTY HEALTH DEPARTMENT  
201 NORTH TEXAS AVENUE  
BRYAN, TEXAS 77803  
(979) 361-4450**

### REQUEST FOR RECORDS

I, the undersigned do hereby request to see the On-site Sewage Facility (OSSF) records for the following address(es):

**OSSF SITE ADDRESS AND/OR OWNER**

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Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Business (if applicable): \_\_\_\_\_

EMAILED: \_\_\_\_\_

FAXED: \_\_\_\_\_

MAILED: \_\_\_\_\_