



Texas Commission on Environmental Quality
Application to Certify Marine Sanitation Device (MSD)
 Issued under authority of §26.044 Texas Water Code

Per 30 TAC §321.7(d), all applications and payments must be submitted electronically. Persons unable to comply may request a waiver from this requirement by completing this form. If you have any questions about completing this form, please contact the Clean Water Certification Program at 512-239-BOAT (2628).

Select one of the following requests:

- Complete Waiver of Electronic Submittal of Application and Payment (Section 1 to 3)
- Partial Waiver for either Electronic Submittal of Application or Payment:
 - Application (Section 1 and 2) or
 - Payment (Section 3)

NOTE: Completion of Section 4 is required all waiver requests.

Section 1. Owner Information

Legal Owner: _____

Contact Information

First Name: _____ Middle Initial: _____ Last Name: _____

Street / Mailing Address: _____

City or Town: _____ State: _____ Zip Code: _____ County: _____

Phone Number: _____ Alternate Phone Number: _____

E-mail Address: _____

Section 2. Boat Information

Texas Parks and Wildlife Department Registration Number: _____

Length of Boat: _____ FT. _____ IN.

Serial Hull ID Number: _____

Boat Description: _____
(Manufacturer) (Model) (4-digit year)

Boat Location: _____
(Include marina/residence address, where boat is normally housed.)

Lake(s) / Waterbodies: _____
(Where boat is used.)

- Type of MSD: Type I – Flow through device (65 feet long or shorter)
 Type II – Flow through device (longer than 65 feet)
 Type III – Holding tank

Section 3. Payment

Fee Type

Indicate applicable fee to application:

- Initial (\$15.00)
- Renewal (\$15.00)

Payment Information:

Mailed Check/Money Order Number: _____
 Check/Money Order Amount: _____
 Name Printed on Check: _____
EPay Voucher Number: _____

Section 4. Certification Statement

Indicate reason for requesting a waiver from electronic reporting:

- I don't have a computer
- I don't have internet access
- I have limited internet access
- I need additional training on electronic reporting
- I have a religious objection to electronic reporting

I certify that the above information is true and correct to the best of my knowledge. By signing this document, I am self-certifying that my vessel's MSD meets the requirements of 30 TAC §321.

Owner's Signature: _____ Date: _____

NOTE: A certificate issued based on information supplied in this application is subject to cancellation if that information is false or fraudulent.

Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, contact us at 512-239-2628.

Mailing Instructions

Retain a copy of your application for your records. Mail your completed application and/or payment to the following address:

Clean Water Certification Program (MC 174)
Texas Commission on Environmental Quality
P.O. Box 13087
Austin, Texas 78711-3087

For Office Use Only
Fee Enclosed: _____
Processed Date: _____