

**SABINE RIVER AUTHORITY OF TEXAS
Lake Fork Division
APPLICATION FOR GRAZING PERMIT**

1. Date: _____

2. Applicant: _____

Address _____

Mailing
Address _____

Email address: _____

Phone: Home _____ Alternate: _____

3. Property: Subdivision _____ Lot _____

(If not in subdivision, please furnish location and field notes
or deed description of the property.) _____

4. **WRITTEN APPROVAL MUST PRECEDE ANY CONSTRUCTION ON PERMIT AREA.**

Applications for construction on permit area are available at the
Lake Fork office.

5. Is there a septic system on your property? () Yes () No

Is the system licensed? () Yes () No License # _____

Do you desire application forms for a license? () Yes () No

6. Applicant agrees to pay all fees, rentals, and charges as
established by the Authority, and to abide by all rules,
regulations, conditions, and restrictions regarding the placement
and use of above facility, as well as all rules pertaining to
general use of the Lake Fork Reservoir as published by the
Authority, under penalty of revocation for noncompliance
therewith or of violation thereof.

Applicant (Please Print)

Signature of Applicant

Return APPLICATION and
WARRANTY DEED to:

**SABINE RIVER AUTHORITY OF TEXAS
Lake Fork Division
353 PR 5183
Quitman, TX 75783
Office 903/878-2262 Or Fax 903/878-2416**