

OCT 13 2015

**REQUEST FOR AGENDA PLACEMENT FORM**

**Submission Deadline - Tuesday, 12:00 PM before Court Dates**

**SUBMITTED BY: David Disheroon**

**TODAY'S DATE: 9/22/2015**

**DEPARTMENT:**

**X Public Works**

**SIGNATURE OF DEPARTMENT HEAD:**

**X**

**REQUESTED AGENDA DATE:**

**X October 13, 2015**

**SPECIFIC AGENDA WORDING: Consideration to grant a variance for 2100 E. FM 4 Cleburne for residence and pool house on one septic system, located in Precinct 4.**

**PERSON(S) TO PRESENT ITEM: David Disheroon**

**SUPPORT MATERIAL: (Must enclose supporting documentation)**

**TIME: Ten Minutes**

**ACTION ITEM: X**

**WORKSHOP: \_\_\_\_\_**

**(Anticipated number of minutes needed to discuss item) CONSENT: \_\_\_\_\_**

**EXECUTIVE: \_\_\_\_\_**

**STAFF NOTICE:**

**COUNTY ATTORNEY: \_\_\_\_\_**

**ISS DEPARTMENT: \_\_\_\_\_**

**AUDITOR: \_\_\_\_\_**

**PURCHASING DEPARTMENT: \_\_\_\_\_**

**PERSONNEL: \_\_\_\_\_**

**PUBLIC WORKS: \_\_\_\_\_**

**BUDGET COORDINATOR: \_\_\_\_\_**

**OTHER: \_\_\_\_\_**

**\*\*\*\*\*This Section to be Completed by County Judge's Office\*\*\*\*\***

**ASSIGNED AGENDA DATE: \_\_\_\_\_**

**REQUEST RECEIVED BY COUNTY JUDGE'S OFFICE \_\_\_\_\_**

**COURT MEMBER APPROVAL \_\_\_\_\_ Date \_\_\_\_\_**

## Variance Request

If you wish to request a variance from Johnson County Commissioner's Court for your property please include the following information.

Owner Herbert M Cohen Date 9-22-2015

### Contact Information:

Phone no. 940-867-6658 cell no. 940-232-8983

Email address hometownherb@yahoo.com

### Property Information for Variance Request:

Property 911 address 2100 E FM 4 Cleburne, Tx. 76031

Subdivision name \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Survey T.D. CLARK Abstract 172 TR 4 Acreage 5 ACRES

Reason for request Added pool house need to tie into septic with house.

*You will need a survey showing the reason for the request (such as a building over the building lot line).*

This request will be presented in Commissioner's Court for their decision.



JOHNSON COUNTY Department of Public Works

1 North Main Street/Suite 305, Cleburne, TX 76033

development@johnsoncountytx.org - (817) 556-6380 - Fax (817) 556-6391

Application for 'Authorization to Construct' OSSF System

Office use only Authorization to Construct Permit # \_\_\_\_\_ Date \_\_\_\_\_
FIRM Panel # \_\_\_\_\_ Precinct \_\_\_\_\_

This is to certify that: \_\_\_\_\_ has paid a
Fee of:  \$475.00 Aerobic Septic Systems  \$375.00 All other Septic Systems

And has complied with the rules and regulations of this department for the construction of a private liquid
waste disposal system - address and owner listed below. Inspector approval: \_\_\_\_\_ Date \_\_\_\_\_
This AUTHORIZATION TO CONSTRUCT is only valid with INSPECTOR APPROVAL and is valid for 1 year from the
issue date unless revoked for non-compliance with the rules and regulations of this department

To be completed and signed by Property owner (Modification to OSSF)

Property Owner's Name: Herb Cohen Ph. # 940-867-6658

911 site address: 2100 E FM 4, Cleburne Current mailing address: same

Legal Description:  Metes and Bounds: Acreage: 5

Recorded deed: Volume \_\_\_\_\_ Page \_\_\_\_\_ Survey TD Clark Abstract \_\_\_\_\_ -or-

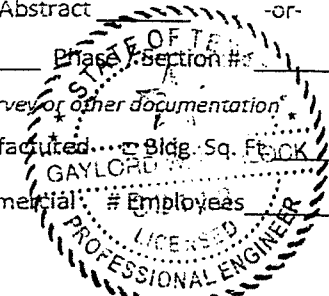
Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Blk #: \_\_\_\_\_ Phase Section # \_\_\_\_\_

Please attach verification of legal description such as a copy of: Deed and Survey or other documentation

Type of Home / Building:  New  Existing  Site Built  Manufactured Bldg. Sq. Ft. \_\_\_\_\_

Single-Family # Bdrms \_\_\_\_\_  Multi-Family # Bdrms \_\_\_\_\_  Commercial # Employees \_\_\_\_\_

Well -or-  Water Co. Public



I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given
for Johnson County Public Works to enter upon the above described property for the purpose of site evaluation and
investigation of an on-site sewage facility.

(Signature of Owner)

9/22/2015 (Date)

Site Evaluator: G. CARLOCK, PE License No. PE 32113

Phone No: 817-614-1408 Other No. \_\_\_\_\_

Mailing Address: 1225 Stadium City Joshua State TX Zip 76058

Installer: K. Holland License No. OS 3361

Phone No: 817-239-7645 Other No. \_\_\_\_\_

Mailing Address: 3905 Highway 171 City Cleburne State TX Zip 76031

\*\*\*\*System must be installed according to specifications on attached design\*\*\*\*



# JOHNSON COUNTY Department of Public Works

1 North Main Street/Suite 305  
Cleburne, Texas 76033 -- (817) 556-6380 -- Fax (817) 556-6391  
development@johnsoncount.tx.org

## ON-SITE SEWAGE FACILITY TECHNICAL INFORMATION FOR PERMIT

**PROFESSIONAL DESIGN REQUIRED:**  Yes  No If Yes, professional design attached:  Yes  No  
Designer Name: G. CARLOCK License Type and No. PE 32113  
Phone No. 817-614-1408 Other or Fax No. 817-556-9956  
Mailing Address: 1225 Stadium City: Joshua State: TX Zip: 76058

**I. TYPE AND SIZE OF PIPING FROM:** (Example: 4" SCH 40 PVC)  
Stub out to treatment tank: 3" PVC SCHED 40 PVC  
Treatment tank to disposal system: 1" PVC schedule 40

**II. DAILY WASTEWATER USAGE RATE:** Q= 360 (gallons/day)  
Water Saving Devices:  Yes  No 300 + 60 ← added

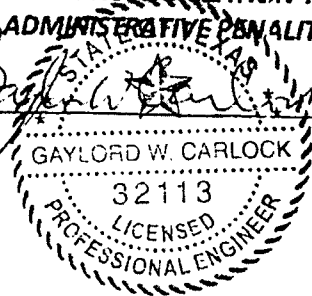
**III. TREATMENT UNIT(S):**  Septic Tank  Aerobic Unit  
A. Tank Dimensions: 6' X 12' Liquid Depth (bottom of tank to outlet): 3"  
Size proposed: 500 gpd (gal)\* Manufacturer: Cajon Aire  
Material/Model# Concrete 500 gpd  
Pretreatment Tank:  Yes Size: 400 (gal)  No  NA  
Pump/Lift Tank:  Yes Size: 500 (gal)  No  NA  
B. OTHER  Yes  No If yes, please attach description.

**IV. DISPOSAL SYSTEM:**  
Disposal Type: Surface Spray Irrigation  
Manufacturer and Model Cajon Aire  
Area Proposed: 6754 Area Required: 5625

**V. ADDITIONAL INFORMATION:** (Demand Spray)  
NOTE - THIS INFORMATION MUST BE ATTACHED FOR REVIEW TO BE COMPLETED.  
A. Soil/Site Evaluation B. Planning materials (If Applicable).

**DO NOT BEGIN CONSTRUCTION PRIOR TO OBTAINING AUTHORIZATION TO CONSTRUCT. UNAUTHORIZED CONSTRUCTION CAN RESULT IN CIVIL AND/OR ADMINISTRATIVE PENALTIES.**

SIGNATURE OF INSTALLER OR DESIGNER: [Signature] DATE: 9-7-15



# JOHNSON COUNTY - OSSF SOIL EVALUATION FORM

Date Performed 9-8-15  
 Owner's Name Heib Cohen  
 Physical Address 2100 E. FM 9, Cleburne  
 Site Evaluator G. CARLOCK O.S. Number PE 32113  
 Proposed Excavation Depth \_\_\_\_\_

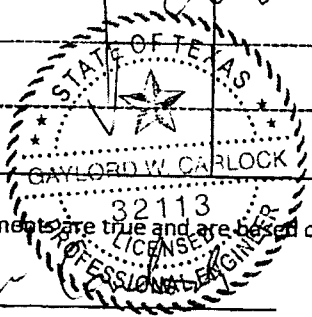
\*At least two soil evaluations must be performed on the site, at opposite ends of the disposal area. Please show the results of each soil evaluation on a separate table. Locations of soil evaluations must be shown on site drawing.  
 \*For subsurface disposal, soil evaluations must be performed to a depth of at least 2 ft below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.  
 \* Please describe each soil horizon and identify any restrictive features in the space provided below. Draw lines at the appropriate depths.

Soil Boring Number 1

Depth Inches	Textural Class	Drainage/Mottles Water Table	Restrictive Horizon	Comments
12	Type III	No	No	Sandy Clay
24		No		Clay
36	Yes		Reddish	
48				
60				

Soil Boring Number 2

Depth Inches	Textural Class	Drainage/Mottles Water Table	Restrictive Horizon	Comments
12	ditto			
24				
36				
48				
60				



I certify that the above statements are true and are based on my own field observations.

ATTESTED BY: [Signature]

Site Evaluator No. PE 32113

Signature [Signature]  
1225 Stadium 76058  
 Address

817-614-1408  
 Phone

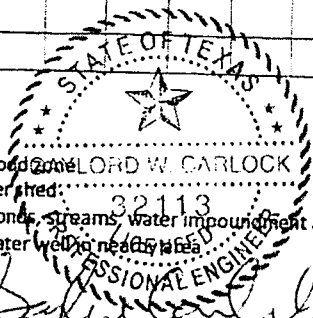
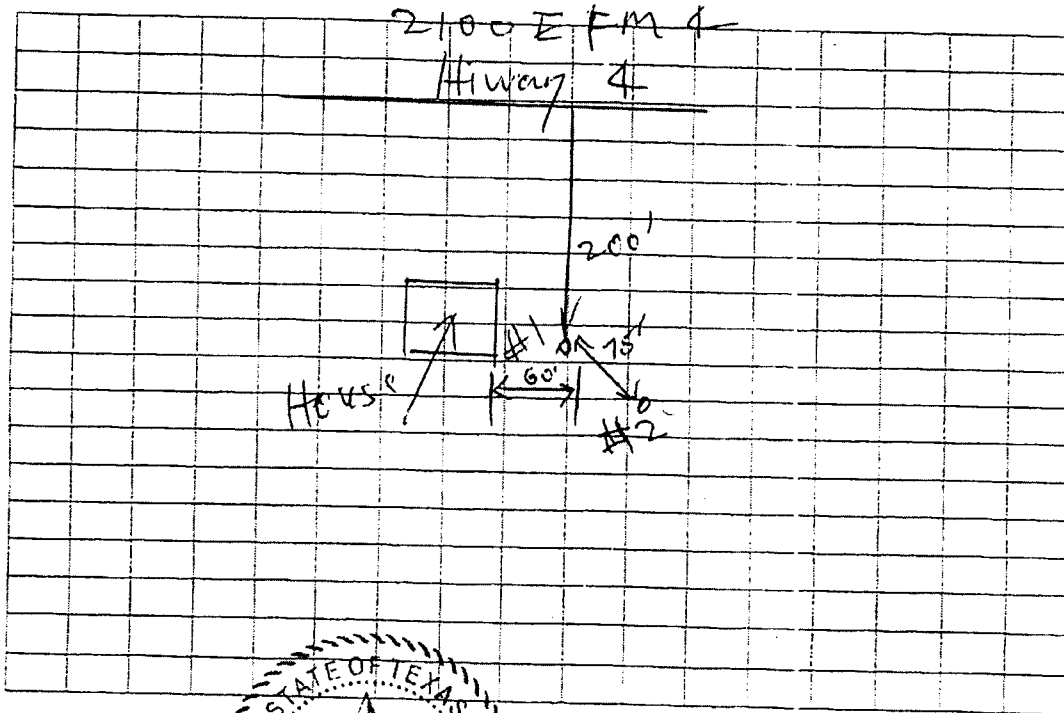
The test data and other information on this report is required by Johnson County. The design, construction and installation of each system is based upon specific conditions affecting each lot or tract and must be subsequently approved by Johnson County

JOHNSON COUNTY - SITE EVALUATION REPORT

Date 9-7-15  
 Name Herb Cohen Phone 940-867-6658  
 Address 2100 E FM 4  
 PROPERTY LOCATION T.D. Clark Survey  
 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street/Road Address 2100 EFM 4  
 Additional Information Cleburne TX

SCHMATIC OF LOT OR TRACT

Compass North, adjacent street(s), direction of slope, property lines  
 Location of natural, constructed or proposed drainage ways, water impoundment areas, cut or fill banks, sharp slopes and buildings.  
 Location of existing or proposed water wells.  
 Location of (numbered) soil boring and dug pits (show distance of each hole from property line or other discernible point).



Presence of 100 year flood zone Yes \_\_\_\_\_ No / Firm Panel # \_\_\_\_\_  
 Presence of upper watershed Yes \_\_\_\_\_ No /  
 Presence of adjacent ponds, streams, water impoundment area Yes \_\_\_\_\_ No /  
 Existing or proposed water well in nearby area Yes \_\_\_\_\_ No /

ATTESTED BY: [Signature] Site Evaluator No. PE32113  
 Signature \_\_\_\_\_  
1225 Stadium 76058 817-614-1408  
 Address \_\_\_\_\_ Phone \_\_\_\_\_

The information on this report is required by Johnson County. The design, construction and installation of each system is based upon specific conditions affecting each lot or tract and must be subsequently approved by Johnson County.

Site Layout for  
Herb & January Cohen  
2100 EFM 4  
Cleburne Texas  
940-867-6658

Sacre tract  
T. D. Clark Survey

Owner of OSSF

2100 EFM 4

NORTH ↑

DRIVE

3 Bedroom / 2 Bath  
2000 sq ft

Q = 300 gpd

Existing

Cajon Aire 500  
Aerobic Unit

w/ 2 - 25' dia spray heads

Add 14' x 40' Pool house  
w/ 1 Bath (60 gpd)

Q<sub>new</sub> = 300 + 60 = 360 Above ground pool

Run 3" dia Schedule

40 PVC to add Pool House

A<sub>spray Rgd</sub> =  $\frac{360}{0.064} = 5625 \text{ ft}^2$

Add additional spray head New Pool House 14' x 40' w/ Bathroom

A<sub>provided</sub> =  $2(25)^2\pi + 30^2\pi$   
= 3927 + 2827 = 6754 ft<sup>2</sup>

Cajon Aire 500 gpd  
(Demand Spray)

1" PVC Schedule 40  
Slope

2-3%

180'

75'

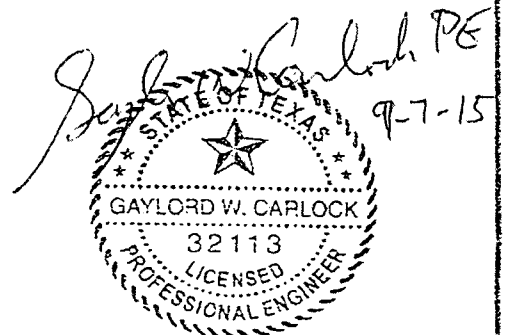
3" PVC Schedule 40

Additional Spray Head - 30' Radius

Gaylord W. Carlock, P.E.

1225 Stadium Drive, Joshua, Texas 76058 817-614-1408

Scale: 1" = 60'



## System Component Specifications:

Treatment Unit: Pretreatment of effluent shall meet the requirements for a NSF, Standard 40, Class I effluent by means of aerobic action and a contact chlorine chamber. Effluent shall maintain a residual chlorine level of no less than 1.0 mg/liter with a pH rating between 7 and 8. Effluent to have a 30 day average BOD & TSS level of no more than 20 mg/liter.

Piping: Piping shall be purple one inch Schedule 40 PVC. Sprinkler lines shall be installed a minimum of 12 inches beneath any water lines crossed in the installation.

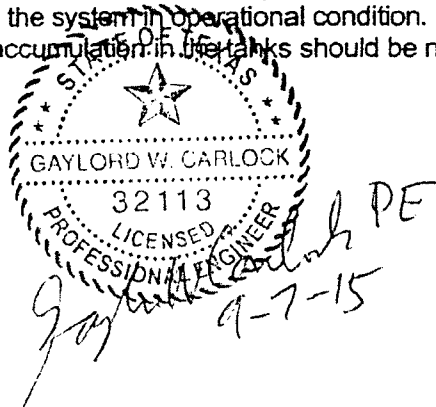
Pump, Controls, and Alarm System: A submergible ½ hp pump shall be placed in the sprinkler pump tank for pressure dispersal of treated effluent. Control for the pump shall include a manual over-ride of an automatic float control in case of an emergency. An automatic float switch on a dedicated electrical circuit shall be the normal controlling device for on/off operation of the pump. The pump motor shall have its own dedicated electrical circuit. A high water switch with both audible and visual alarm shall be required in the pump chamber and pre-set to a level sufficient for containing a 1/3 days flow quantity. All electrical connections shall be made outside the liquid chambers.

Sprinkler Heads: Toro 700 or equivalent heads shall be used. Sprinkler heads that are installed at an elevation higher than the pump tank shall be equipped with check valves to prevent liquid back-flow into the holding tanks. If sprinkler heads are installed below the pump tank, an anti-siphon provision shall be provided in the discharge supply line.

Site Layout: The treatment unit, pump tank, and distribution system shall be installed at the site approximately as shown on the attached site plan. All supply lines shall be placed a minimum of 12 inches below grade. All spray patterns shall be adjusted in order to provide separation of the spray from property lines and surface impounds of at least 10 feet and 50 feet, respectively.

### Maintenance:

1. System design is based on Owner's normal use providing normal domestic waste with no chemical, petroleum cleaning products, or heavy medication waste entering the aerobic unit for treatment.
2. Owners of aerobic units utilizing surface discharge for disposal of wastewater must maintain the system in operational condition.
3. Sludge accumulation in the tanks should be monitored and pumped as required.



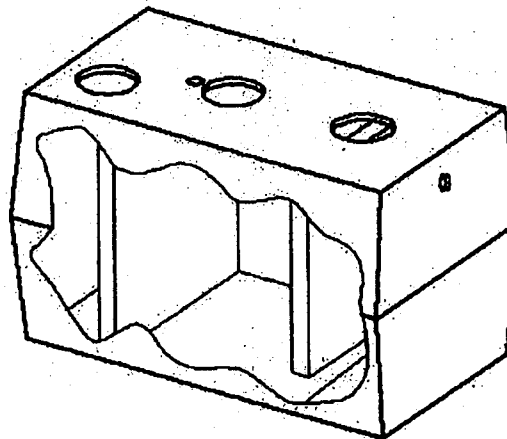
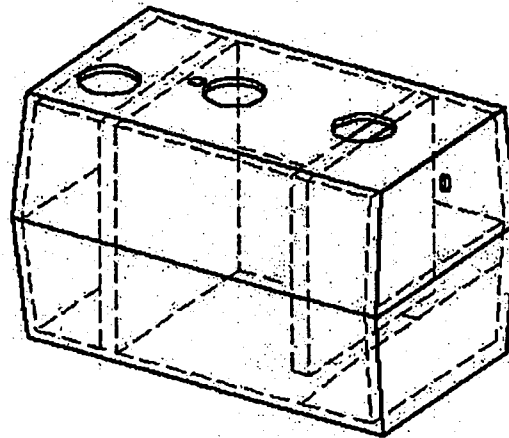


**Acquired Wastewater Technologies**  
onsite wastewater treatment systems



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**CajunAire Advanced**



Material: Concrete  
Rated Capacity: 500 GPD, 600 GPD, 750 GPD, and 1000 GPD

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