





## Variance Request for Septic System

Johnson County Subdivision Rules and Regulations state only one septic system per one (1) acre, Section VII A. To request a variance for the purpose of:

- 1 installing a septic system on a lot or tract of less than an acre or  
2 two residences / structures on one (1) septic system or  
   installing a second septic system on a lot less than 2 acres

Please provide the following information. This request will be presented to the Commissioner's Court for their decision.

Owner R & A Inc Rasoul Karbasi Date 11-28-17

Contact Information:

Phone no. 915 240-4701

Cell no. \_\_\_\_\_

Email address

r.karbasi1@yahoo.com

Property Information for Variance Request:

Property 911 address 48330 0-A/B; E. Hwy 67, Alvarado, Tx 76009

Subdivision name R & A Industrial Park Block 1 Lot 1

Lot size: 33 acres Size of existing residence: \_\_\_\_\_ sq. ft.

Does this lot currently have a septic system?  Yes  No System type \_\_\_\_\_

ETJ:  Yes - City Alvarado  No

Is a part of the property located in a FEMA designated Floodplain?  Yes  No

Reason for request \_\_\_\_\_

Provide the following with this request:

- Copy of your plat if property has been platted
- Copy of property deed
- Survey or drawing showing existing home, buildings, existing & proposed septic system locations

F:/Platting/Variences/Septic System Variance Request App



## Johnson County Public Works Department

1 North Main Street, Suite 305  
Cleburne, Texas 76033  
817-556-6380 Fax: 817-556-6391

### Septic Permit Application Checklist

Items that do not have a check must be provided to complete the approval process for your Septic Permit. Please note if customer will send any missing documents.

Property Owner: R & A Inc.

Site Address: 8330 A & B E Hwy 67

Acreage: \_\_\_\_\_

Variance Required: yes / no

- Septic Application \_\_\_\_\_
- Technical Sheet \_\_\_\_\_
- Soil Test \_\_\_\_\_
- Site Sheet \_\_\_\_\_
- Drawing \_\_\_\_\_
- Spec Sheets \_\_\_\_\_

Inspector will determine if necessary:

- Affidavit \_\_\_\_\_
- Maintenance Contract \_\_\_\_\_
- Other \_\_\_\_\_

If no existing development permits:

- Filed Deed \_\_\_\_\_
- Survey or Plat \_\_\_\_\_

Application was: brought in / e-mailed Date: 12-01-17



# JOHNSON COUNTY PUBLIC WORKS

2 North Mill Street/Suite 305, Cleburne, TX 76033  
development@johnsoncountytexas.org (817) 556-6380

## Application for 'Authorization to Construct' OSSF System

Office use only Precinct \_\_\_\_\_

Authorization to Construct Permit # \_\_\_\_\_ Firm Panel \_\_\_\_\_

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: [Signature] Date 12.4.17

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

Property Owner's Name: R E A Inc Phone number: 9152404701

911 site address 8330 A, B, E Hwy 67 Alvarado, TX

Current mailing address: 1625 Fair Oaks Ct. Westlake TX 76262

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

Legal Description:  Metes and Bouns      Acreage: 33

Recorded deed: Volume - Page - Survey - Abstract 49

-OR-  Subdivision: Rm Billingsley Lot #: - Blk #: - Phase / Section #: -

Well Water or  Water provider \_\_\_\_\_

**Is this Building:** choose one  New or  Existing

choose one  Site Built or  Manufactured/Mobile Home Building Square Feet: \_\_\_\_\_

choose one  Single Family # Bedrooms \_\_\_\_\_ or  Multi-Family # Bedrooms \_\_\_\_\_

Commercial # Employees 4

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] (Signature of Owner)      11-28-17 (Date)

-----

Site Evaluator: Doyle Culp License No. 6470

Phone No: 817-297-2342 Other No. \_\_\_\_\_

Mailing Address: P.O. Box 986 City Crowley State TX Zip 76036

Installer: Jonathan Salazar License No. 050030096

Phone No: 8178962696 Other No. \_\_\_\_\_

Mailing Address: 600 CR 404 City Alvarado State TX Zip 76009

\*\*\*\*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) 556-6180 - Fax (817-556-6391
development@johnsoncountytx.org

ON-SITE SEWAGE FACILITY
TECHNICAL INFORMATION FOR PERMIT

PROFESSIONAL DESIGN REQUIRED: [X] Yes [ ] No If Yes, professional design attached: [X] Yes [ ] No
Designer Name: Doyle W. Culp License Type and No. 2949 RS
Phone No. 817-297-2342 Other or Fax No. 817-297-2100
Mailing Address: PO 986 City: Cleburne State: TX Zip: 76033

I. TYPE AND SIZE OF PIPING FROM: (Example: 4: SCH 40 PVC)

Stub out to treatment tank: 3" PVC sch 40
Treatment tank to disposal system: 4" Dia. FOOT

II. DAILY WASTEWATER USAGE RATE: Q= 384 (gallons/day)

192 w/sinks for 2 Bldgs

Water Saving Devices: [X] Yes [ ] No

III. TREATMENT UNIT(S): [ ] Septic Tank [X] Aerobic Unit 2 UNITS

A. Tank Dimensions: 113.5" x 81.5" Liquid Depth (bottom of tank to outlet): 37"
Size proposed: 500 EA (gal)\* Manufacturer: Nuwater
Material/Model# Nuwater 500 GPD
Pretreatment Tank: [X] Yes [ ] No Size: 500 (gal) [ ] No [ ] NA
Pump/Lift Tank: [X] Yes [ ] No Size: 750 (gal) [ ] No [ ] NA
B. OTHER [ ] Yes [ ] No If yes, please attach description.

IV. DISPOSAL SYSTEM:

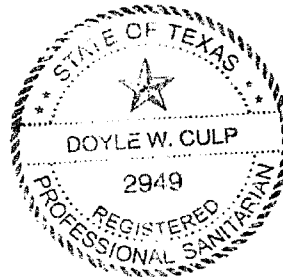
Disposal Type: Sprinkler
Manufacturer and Model Nuwater 500 GPD
Area Proposed: 785 sq ft Area Required: 6000 sq ft

V. ADDITIONAL INFORMATION:

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: 11/16/17



# JOHNSON COUNTY - OSSF SOIL EVALUATION FORM

Date Performed 11/10/12  
 Owner's Name M.A. Heston, Inc  
 Physical Address 8330 W. Hwy E 67th Bldg 400 TX  
 Site Evaluator L. Cowley O.S. Number 6470

**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 B1

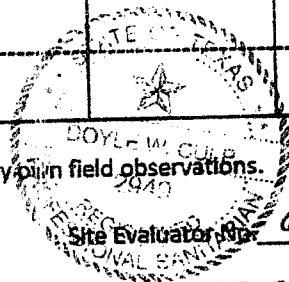
Depth Inches	Textural Class	Drainage/Mottles Water Table	Restrictive Horizon	Comments
=				
<u>12</u>				
=				
<u>24</u>	<u>Clay II</u>	<u>N/A</u>	<u>yes</u>	<u>unsuitable</u>
=				
<u>36</u>				
=				
<u>48</u>				
=				
<u>60</u>				

Soil Boring Number B2

Depth Inches	Textural Class	Drainage/Mottles Water Table	Restrictive Horizon	Comments
=				
<u>12</u>				
=				
<u>24</u>	<u>Clay II</u>	<u>N/A</u>	<u>yes</u>	<u>unsuitable</u>
=				
<u>36</u>				
=				
<u>48</u>				
=				
<u>60</u>				

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

ATTESTED BY: [Signature]  
 Signature \_\_\_\_\_



PO 986 Cowley, TX  
 Address \_\_\_\_\_

Site Evaluator No. 6470  
817-297-3342  
 Phone \_\_\_\_\_

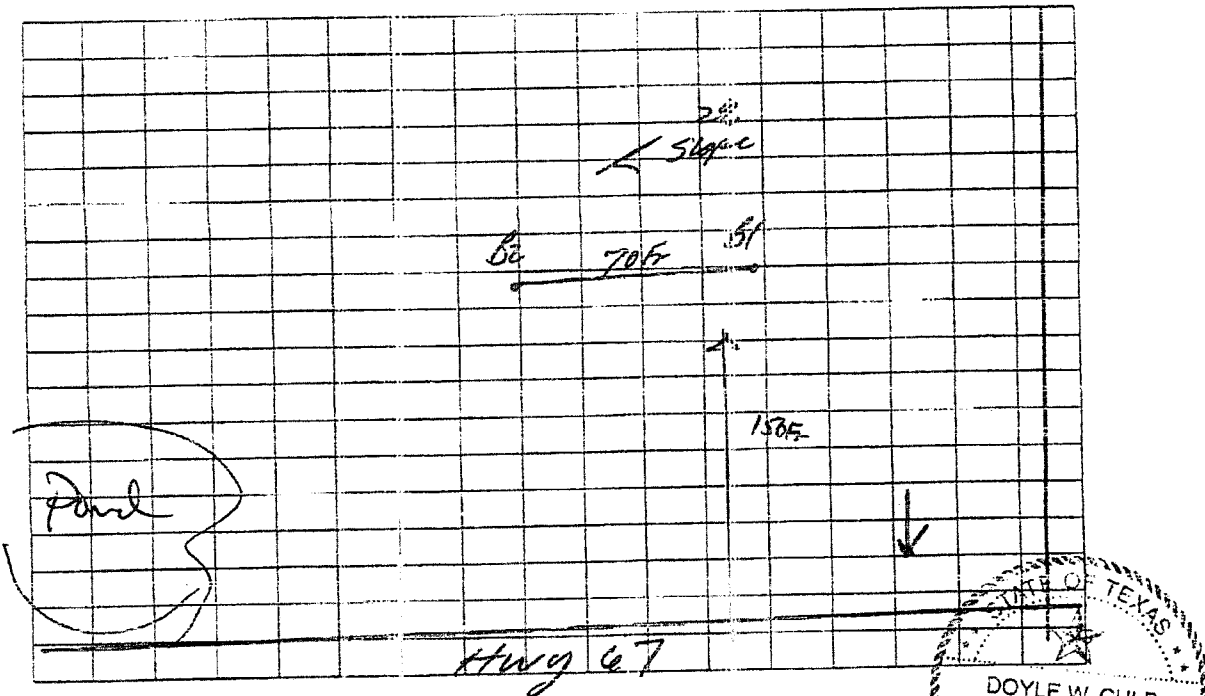
The test data and other information on this report is required by Johnson County. The design, construction and installation of each system is based upon specific conditions affecting each lot or tract and must be subsequently approved by Johnson County

JOHNSON COUNTY - SITE EVALUATION REPORT

Date 11/10/17  
 Name R.E.A. Inc Phone 915 240 4701  
 Address 8330 10 Hwy E Lot A,B  
 PROPERTY LOCATION  
 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision RM Bullingsley  
 Street/Road Address 8330 10 Hwy E 67 AB Alvarado TX  
 Additional Information 33 acres

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 <u>X</u>
Presence of upper water shed	Yes _____	No <u>X</u>
Presence of adjacent ponds, streams, water impoundment area	Yes _____	No <u>X</u>
Existing or proposed water well in nearby area	Yes _____	No <u>X</u>

ATTESTED BY: Doyle W. Culp  
 Signature \_\_\_\_\_

Site Evaluator No. 6470

80984 Crowley TX  
 Address \_\_\_\_\_ Phone 817-297-2342

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.

Revised 7/10/2012

November 29, 2017

SPRAYFIELD DESIGN

PREPARED FOR:

NAME: R.A. INDUSTRIAL PARK Part A, B  
ADDRESS: 2330 E Hwy 67 Alvarado, Texas  
LEGAL: 11 Johnson County Texas  
INSTALLER: Jonathan Salazar # 30096

DESIGN PARAMETERS:

ESTIMATED FLOW: 192 Gals ( 4 people x 2 bldgs x 12 Gals x 2 shifts= 192  
LOADING RATE: .064  
AREA REQUIRED: 3000 Sq FT.  
AREA DESIGN: 3926 Sq Ft.

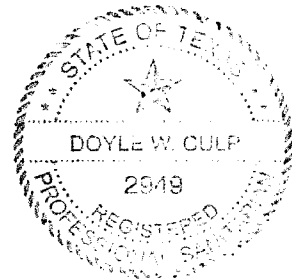
SYSTEM PARAMETERS:

PRETREATMENT TANK: 500 Gallon  
AERATION TANK: 500 Gallon Aerobic Unit  
PUMP TANK: 500 Gallon  
SPRINKLER AREA: 2- 25 Ft. Radius Full Circle 1963 Sq. Ft. Each  
Total 3926 Sq. Ft.  
PUMP SPECIFICATION: 1/2 H.P.  
CHLORINATOR: Yes - 285.91 (4) ANSI / NSF Approved  
WATER SUPPLY: Co-Op Water  
VEGETATION COVER: Sprayfield areas to be sod in all season grasses

PREPARED BY:

Doyle Culp  
PO Box 986  
Crowley, Texas 76036  
(817) 297-2342

R.S. 2949





## ON-SITE EVALUATION

### DESIGN CALCULATIONS

Using the formula :  $GPD = \text{Total Square Feet} \times \text{App. Rate}$

Required Area :  $192 \text{ W/s} / .064 = 3000 \text{ Sq. Ft.}$

Designed Area : 3926 Sq. Ft.

### SYSTEM LAYOUT

Discharge from each 2 buildings will flow by gravity (1/8 inch fall per foot minimum) to a 500 gallon pretreatment tank then to a 500 gallon Aerobic Unit via a PVC pipe. A clean out will be 3 Ft. within the building and every 100 Ft. if needed.

The clear effluent from the 500 gallon Aerobic Unit will discharge through a tablet chlorinator into a 500 gallon dosing tank. The chlorinated effluent will pass through a 1/2 horse power pump to 2 sprinkler heads of 25 feet radius supplied via a one inch purple pressure rated line. The sprinkler heads will be a low angle nozzle 13 degrees or less shall be used to keep spray low and to reduce aerosol. All sprayed area will be covered in grasses or trees, or prepared for seeding of grasses. Risers must be fitted with removable watertight caps and protected against unauthorized intrusions. All installers to abide by the section ( 285.38 )

The area around the tanks should be protected by a fence to prevent damage by vehicles to the On-Site Sewage Facility.

### PUMP TANK

The pump tank volume will be 500 gallon minimum. In the event of pump failure a total volume of 195 gallons will be left exceeding the 1/3 flow above the alarm. The tank shall be provided with as audio and visual high water alarm. All electrical wiring shall be in accordance with the most recent edition of the National Electrical Code. When sprinklers are used as the application method, the maximum inlet pressure shall be 40 pounds per square inch.

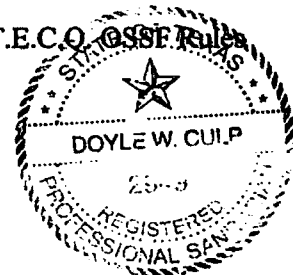
### VARIANCES

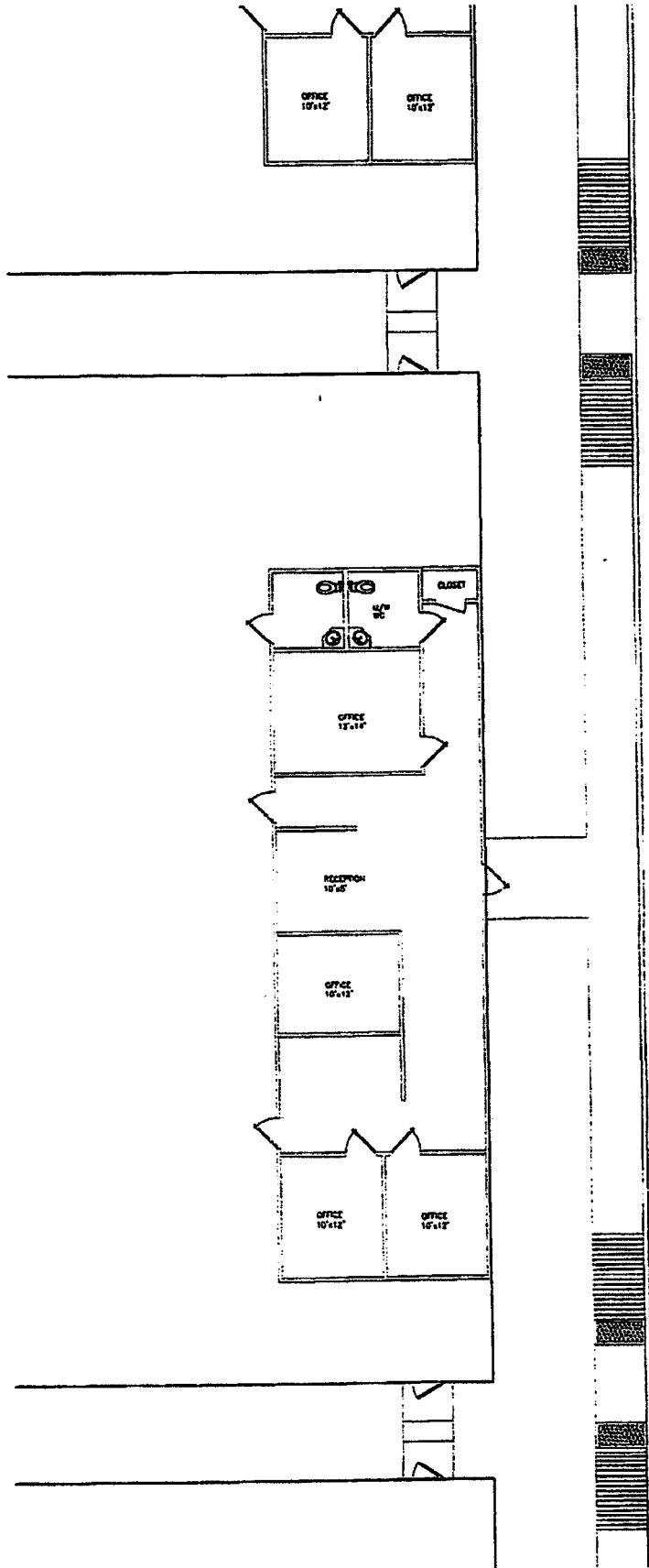
No variances are requested with any part of this system. Any changes in proposed system must be approved by the permitting authority.

A timer will be installed if any spray area is within 20 feet of property line. For night time distribution.

### Maintenance:

The Maintenance Company shall inspect the system as directed T.E.C.O. ~~OSSE Rules~~  
Revised March 2013, Sec. 285.7 Table IV.





INACTIVE  
 PROPOSED  
 EXISTING

NO. 1  
 NO. 2  
 NO. 3

NO. 4  
 NO. 5  
 NO. 6

NO. 7  
 NO. 8  
 NO. 9

NO. 10  
 NO. 11  
 NO. 12

NO. 13  
 NO. 14  
 NO. 15

NO. 16  
 NO. 17  
 NO. 18

NO. 19  
 NO. 20  
 NO. 21

NO. 22  
 NO. 23  
 NO. 24

NO. 25  
 NO. 26  
 NO. 27

NO. 28  
 NO. 29  
 NO. 30

NO. 31  
 NO. 32  
 NO. 33

NO. 34  
 NO. 35  
 NO. 36

NO. 37  
 NO. 38  
 NO. 39

NO. 40  
 NO. 41  
 NO. 42

NO. 43  
 NO. 44  
 NO. 45

NO. 46  
 NO. 47  
 NO. 48

NO. 49  
 NO. 50  
 NO. 51

NO. 52  
 NO. 53  
 NO. 54

NO. 55  
 NO. 56  
 NO. 57

NO. 58  
 NO. 59  
 NO. 60

NO. 61  
 NO. 62  
 NO. 63

NO. 64  
 NO. 65  
 NO. 66

NO. 67  
 NO. 68  
 NO. 69

NO. 70  
 NO. 71  
 NO. 72

NO. 73  
 NO. 74  
 NO. 75

NO. 76  
 NO. 77  
 NO. 78

NO. 79  
 NO. 80  
 NO. 81

NO. 82  
 NO. 83  
 NO. 84

NO. 85  
 NO. 86  
 NO. 87

NO. 88  
 NO. 89  
 NO. 90

NO. 91  
 NO. 92  
 NO. 93

NO. 94  
 NO. 95  
 NO. 96

NO. 97  
 NO. 98  
 NO. 99

NO. 100  
 NO. 101  
 NO. 102

NO. 103  
 NO. 104  
 NO. 105

NO. 106  
 NO. 107  
 NO. 108

NO. 109  
 NO. 110  
 NO. 111

NO. 112  
 NO. 113  
 NO. 114

**LEGEND**

- PROPOSED DRIVE PER FRONT STAMPODS
- PROPOSED FIRE LANE
- PROPOSED HEFT CURB FINISH
- PROPOSED PAVING SEAL FINISH
- PROPOSED STORAGE
- PROPOSED STORAGE PAVING-RELI USE
- EXISTING GAS WELL EXEMPT AREA

**SITE DATA SUMMARY TABLE**

PROPOSED ITEM	AREA (SQ. FT.)	AREA (SQ. YD.)
PROPOSED DRIVE PER FRONT STAMPODS	1,200	33.3
PROPOSED FIRE LANE	1,200	33.3
PROPOSED HEFT CURB FINISH	1,200	33.3
PROPOSED PAVING SEAL FINISH	1,200	33.3
PROPOSED STORAGE	1,200	33.3
PROPOSED STORAGE PAVING-RELI USE	1,200	33.3
EXISTING GAS WELL EXEMPT AREA	1,200	33.3
<b>TOTAL PROPOSED AREA</b>	<b>7,200</b>	<b>200</b>

PROPOSED DRIVE PER FRONT STAMPODS  
 DRIVE SPACE = 3 SPACES  
 SIDEWALK SPACE = 8 SPACES  
 SIDEWALK SPACE = 9 SPACES

PARCEL #4  
 CALLED 60.53 ACRES  
 PLAT NO. 2011-25747  
 OFF-ROAD

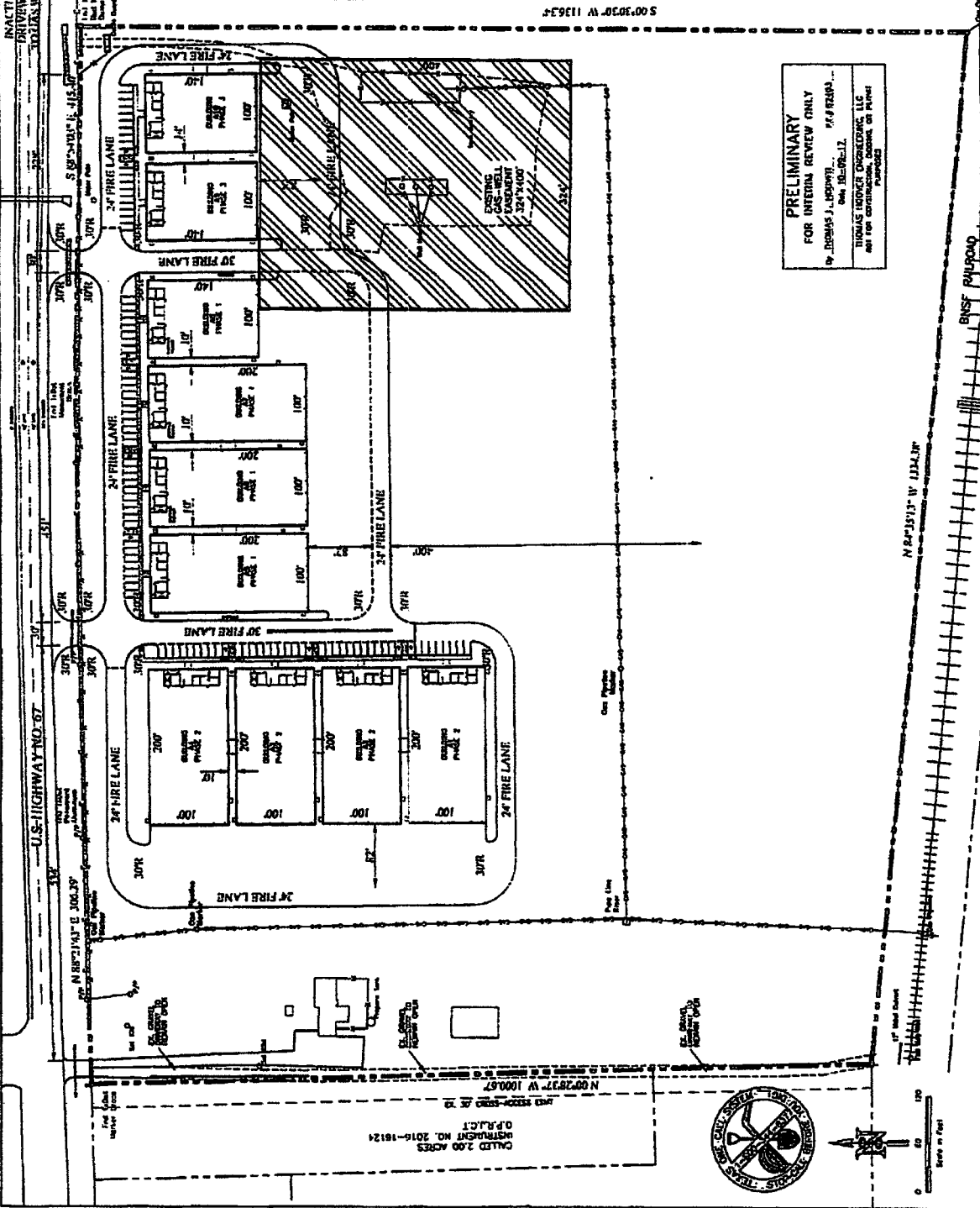
PROPOSED DRIVE PER FRONT STAMPODS  
 DRIVE SPACE = 3 SPACES  
 SIDEWALK SPACE = 8 SPACES  
 SIDEWALK SPACE = 9 SPACES

**THOMAS HOOPER ENGINEERING, LLC**

THOMAS HOOPER ENGINEERING, LLC  
 1000 W. 10TH STREET, SUITE 100  
 DENVER, CO 80202  
 PHONE: (303) 733-1111  
 FAX: (303) 733-1112  
 WWW.THOOPERENGINEERING.COM

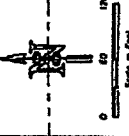
**SITE PLAN**

DATE: 11-15-17  
 PROJECT NO.: 2017-01  
 SHEET NO.: 50-1



**PRELIMINARY**  
 FOR INTERIM REVIEW ONLY  
 THOMAS HOOPER ENGINEERING, LLC  
 1000 W. 10TH STREET, SUITE 100  
 DENVER, CO 80202  
 PHONE: (303) 733-1111  
 FAX: (303) 733-1112  
 WWW.THOOPERENGINEERING.COM

CALLD 2.00 ACRES  
 INSTRUMENT NO. 2016-18124  
 OFF-ROAD  
 N 00°28'37" W 1000.67'



Johnson County  
Becky Ivey  
County Clerk  
Cleburne 76033

COPY



70 2017 00029420

Instrument Number: 2017-29420

As

Affidavit

Recorded On: November 28, 2017

Parties:

To

Billable Pages: 1

Number of Pages: 2

Comment:

( Parties listed above are for Clerks reference only )

\*\* Examined and Charged as Follows: \*\*

Affidavit	26.00
Total Recording:	26.00

Address changed  
on after affidavit  
filed, address on  
permit is  
correct

\*\*\*\*\* DO NOT REMOVE. THIS PAGE IS PART OF THE INSTRUMENT \*\*\*\*\*

Any provision herein which restricts the Sale, Rental or use of the described REAL PROPERTY  
because of color or race is invalid and unenforceable under federal law.

File Information:

Document Number: 2017-29420

Receipt Number: 113684

Recorded Date/Time: November 28, 2017 10:55:41A

User / Station: L Bailey - CCL30

Record and Return To:

R AND A INC

1625 FAIR OAKS COURT

CK

WESTLAKE TX 76262-8224



I hereby certify that this instrument was filed on the date and time stamped hereon and was duly  
recorded in the Volume and Page of the named records in Johnson County, Texas.

Any provision herein which restricts the sale, rental or use of the described Real Estate because of  
color race is invalid and unenforceable under Federal law.

*Becky Ivey*

BECKY IVEY, COUNTY CLERK  
JOHNSON COUNTY, TEXAS

**ANNUAL MAINTENANCE AGREEMENT Provided by Dee Scarbro AEROBIC MAINTENANCE PROVIDER, MP 0000804**

CONTRACT BEGIN DATE: 11/27/17  
CUSTOMER NUMBER: \_\_\_\_\_

ENDING DATE: 12/15/18

8330 - **R & A, INC**  
HWY 67 A, B  
ALVARADO, TX 76009

INSTALLER: J SALAZAR

GATE CODE OR ENTRY INFO: \_\_\_\_\_  
PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_ WORK: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

**CHOOSE YOUR PLAN:**

- BASIC PLAN – 3 service calls (every 4 months) no chlorine .....\$120 1-year or \$210 2-years
  - STAR PLAN – 3 service calls (every 4 months) with chlorine.....\$160 1-year or \$290 2-years
  - PLATINUM PLAN – 6 service calls (every 2 months) with chlorine & warranty parts...\$550 1-year or \$50 monthly
- \*\*\*\*\*call us if you would like to discuss a monthly billing plan

In consideration of pre payment, an AGREEMENT is entered this day by and between the parties signed hereto for the testing and reports of the aerobic system located on the property detailed above under the following terms:

**THIS AGREEMENT INCLUDES THE FOLLOWING:**

- Three (3) service calls annually performed every four (4) months which includes the inspection of the mechanical/electrical components of the treatment system for proper function and application.
- A visual inspection of all the pumps, switches, control panel, circuitry, tank contents and spray rotors.
- The compressor output shall be measured for flow and pressure.
- A sludge measurement shall be determined. If the levels warrant the need for pumping of solids the OWNER shall bear responsibility to arrange with a local pumping company and bears all associated costs.
- An effluent sample shall be tested for Chlorine residuals and PH levels. The OWNER is responsible to maintain a constant supply of tablets to the dosing tank at all times.
- The OWNER shall be notified in writing of all necessary repairs and shall bear the responsibility to schedule appointment for repairs and shall bear any associated costs.
- The SERVICE COMPANY shall respond to any calls within 48 hours weekdays only.

**THIS AGREEMENT DOES NOT INCLUDE THE FOLLOWING:**

- Pumping of sludge/solids.
- Chlorine tablets other than the tablets added on each visit once every 4 months (if paid extra as noted above).

**VIOLATIONS OF THIS AGREEMENT:**

- Non-payment of any nature by OWNER.
- Failure of OWNER to respond to requests for safe entry or repair notices.
- OWNER failure to maintain constant electrical supply to treatment system; overloading system above it's rated capacity by laundry, external flooding or drainage.
- Damage of any component by acts of nature, abuse or loading of chemicals, garbage disposal, water softener discharge or A/C discharge lines or the use of excess paper products or foreign objects not normally found in domestic wastewater.

Upon execution of this agreement all parties agree mutually to the covenants and conditions contained herein. NO REFUNDS will be provided at any time.

AGREED: \_\_\_\_\_ OWNER  
AGREED: *[Signature]* D. Scarbro, MP

**SIGN AND RETURN THE CONTRACT ALONG WITH YOUR PAYMENT – PLEASE MAKE A COPY FOR YOUR FILES.**  
**MAIL TO: D. SCARBRO / Circle S Backhoes@ PO BOX 485, RIO VISTA, TX 76093 OR 385 HCR 1418, GRANDVIEW, TX 76050**  
**CREDIT CARD PAYMENT:**

NUMBER: \_\_\_\_\_ EXP DATE: \_\_\_\_\_  
CARD BILLING ADDRESS AND ZIP: \_\_\_\_\_