

<b><u>REQUEST FOR AGENDA PLACEMENT FORM</u></b>		MAR 12 2018
<b>Submission Deadline - Tuesday, 12:00 PM before Court Dates</b>		
<b>SUBMITTED BY: David Disheroon</b>		<b>TODAY'S DATE: 02/22/2018</b>
<b><u>DEPARTMENT:</u></b>	<b><u>Public Works</u></b>	
<b><u>SIGNATURE OF DEPARTMENT HEAD:</u></b>	_____	
<b><u>REQUESTED AGENDA DATE:</u></b>	<b><u>03/12/2018</u></b>	
<b><u>SPECIFIC AGENDA WORDING:</u> Consideration of variance for two structures on one septic system located at 8018 E FM 917, in Precinct 3.</b>		
<b><u>PERSON(S) TO PRESENT ITEM:</u> David Disheroon</b>		
<b><u>SUPPORT MATERIAL:</u> (Must enclose supporting documentation)</b>		
<b>TIME: 10 minutes</b>	<b>ACTION ITEM:</b>	<b><u>X</u></b>
	<b>WORKSHOP</b>	_____
(Anticipated number of minutes needed to discuss item)	<b>CONSENT:</b>	_____
	<b>EXECUTIVE:</b>	_____ _____ _____
<b><u>STAFF NOTICE:</u></b>		
<b>COUNTY ATTORNEY:</b> _____	<b>IT DEPARTMENT:</b>	_____
<b>AUDITOR:</b> _____	<b>PURCHASING DEPARTMENT:</b>	_____
<b>PERSONNEL:</b> _____	<b>PUBLIC WORKS:</b>	<u>X</u> _____
<b>BUDGET COORDINATOR:</b> _____	<b>OTHER:</b>	_____
<b>*****This Section to be Completed by County Judge's Office*****</b>		
ASSIGNED AGENDA DATE: _____		
REQUEST RECEIVED BY COUNTY JUDGE'S OFFICE _____		
<b>COURT MEMBER APPROVAL</b> _____	<b>Date</b> _____	



## Johnson County Public Works Department

David Disheroon / Director of Public Works

2 North Mill Street, Suite 305

Cleburne, Texas 76033

817-556-6380

### VARIANCE REQUEST

Owner Rodolfo Canada Date 2/21/18

Phone # 817-683-9677

Email Address rodolfocanada12@aol.com

#### Property Information for Variance Request:

Property 911 address 8018 E. FM 917 Alvarado, TX 76009

Subdivision name Canada Addition Block 1 Lot 1

Survey TS Roberts Abstract 716 Acreage 10.3

Reason for request A sink and a toilet in barn attached to septic for residential

[Signature] 2-21-18

Please attach copy of property survey.



**JOHNSON COUNTY Department of Public Works**

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

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

**Application for 'Authorization to Construct' OSSF System**

**Office use only** Authorization to Construct Permit # 550770 Date 1/26/2018  
 FIRM Panel # 2053 Precinct 3

This is to certify that: Circle S Backhoe 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: Ronda Verbeke Date 4/27/17  
*This AUTHORIZATION TO CONSTRUCT is only valid with INSPECTOR APPROVAL and is valid for 3 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: RODOLFO CANADA Ph. # 817-683-9677  
 911 site address: 8018 E 7th AVENUE ALVARADO, TX 76009 Current mailing address: 3401 CR 616, ALVARADO  
 Legal Description:  Metes and Bounds: Acreage: 11.29  
 Recorded deed: Volume        Page        Survey TS Roberts Abstract 716 -or-  
 Subdivision: Canada Addition Lot #: 1 Blk #: 1 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. 2,499  
 Single-Family # Bdrms 4  Multi-Family # Bdrms         Commercial # Employees         
 Well -or-  Water Co.       

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) 4-18-17 (Date)

-----

Site Evaluator: Barney Ballard License No. PE36781  
 Phone No: 817-295-4891 Other No.         
 Mailing Address: 140 Magnolia Street City Burleson State TX Zip 76028  
 Installer: Danny R. Scarbro License No. OSII 0004616  
 Phone No: 817-373-3170 cell 817-996-6031 Other No.         
 Mailing Address: PO BOX 485 City Rio Vista State TX Zip 76093

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

# Johnson County Public Works

Johnson County Public Works  
1 North Main Street, Suite 305  
Cleburne, TX 76033  
(817) 556-6380

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## AUTHORIZATION TO INSTALL PRIVATE ON-SITE SEWER Permit #: S50770

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Location: 8018 E FM 917, Alvarado TX 76009  
Canada Addition Block: 1 Lot: 1  
Owner: Canada, Rodolfo  
Mailing address: 3401 CR 616 Alvarado TX 76009

This is to certify that: \_\_\_\_\_  
has complied with the rules and regulations of this department for the construction of a private liquid waste disposal system according to the Johnson County Commissioners Court Order and by the authority of Section 21.084 of the Texas Water Quality Act.

AUTHORIZATION IS FOR FOLLOWING:

- NEW  EXISTING
- SINGLE FAMILY RESIDENCE
- MANUFACTURED / MOBILE HOME
- SITE BUILT HOME
- MULTIPLE FAMILY RESIDENCE  
# OF BEDROOMS
- BUSINESS TYPES OF WASTES  
# OF EMPLOYEES

*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.*

I UNDERSTAND THAT APPROVAL OF APPLICATION DOES NOT CONSTITUTE A PERMIT LICENSE FOR OPERATION

1/26/2018  
DATE

  
SIGNATURE OF APPLICANT

Application Action: Approved  
By:  
COMMENTS:

**Lot 1 Block 1 Canada Addition site built house**

Catherine Gaines  
Agency Official

01/26/2018  
Date

1/26/2018 01:19 PM Page 1



# JOHNSON COUNTY Department of Public Works

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

## ON-SITE SEWAGE FACILITY TECHNICAL INFORMATION FOR PERMIT

PROFESSIONAL DESIGN REQUIRED:  Yes  No If Yes, professional design attached:  Yes  No  
Designer Name: Barney Ballard License Type and No. PE 36781  
Phone No. 817-295-4891 Other or Fax No. \_\_\_\_\_  
Mailing Address: 140 Magnolia Street City: Burleson State: TX Zip 76028

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

Stub out to treatment tank: 3" or 4" SCH 40 PVC  
Treatment tank to disposal system: 3/4" or 1" SCH 40 Purple Coded PVC Pipe

### II. DAILY WASTEWATER USAGE RATE: Q= 315 (gallons/day)

Water Saving Devices:  Yes  No

### III. TREATMENT UNIT(S): Septic Tank Aerobic Unit

A. Tank Dimensions: 159"L x 68"W x 71"H Liquid Depth (bottom of tank to outlet): 55"  
Size proposed: 500 (gal)\* Manufacturer: Pro Flo  
Material/Model# Concrete SLPT 2  
Pretreatment Tank:  Yes  No Size: 400 (gal)  No  NA  
Pump/Lift Tank:  Yes  No Size: 771 (gal)  No  NA  
B. OTHER  Yes  No *If yes, please attach description.*

### IV. DISPOSAL SYSTEM:

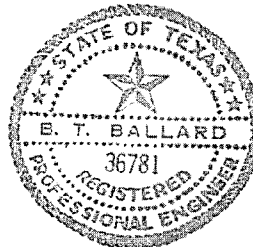
Disposal Type: Spray Irrigation  
Manufacturer and Model K-Rain rotors  
Area Proposed: 19,036 Ft<sup>2</sup> Area Required: 5,860 Ft<sup>2</sup>

### 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.**

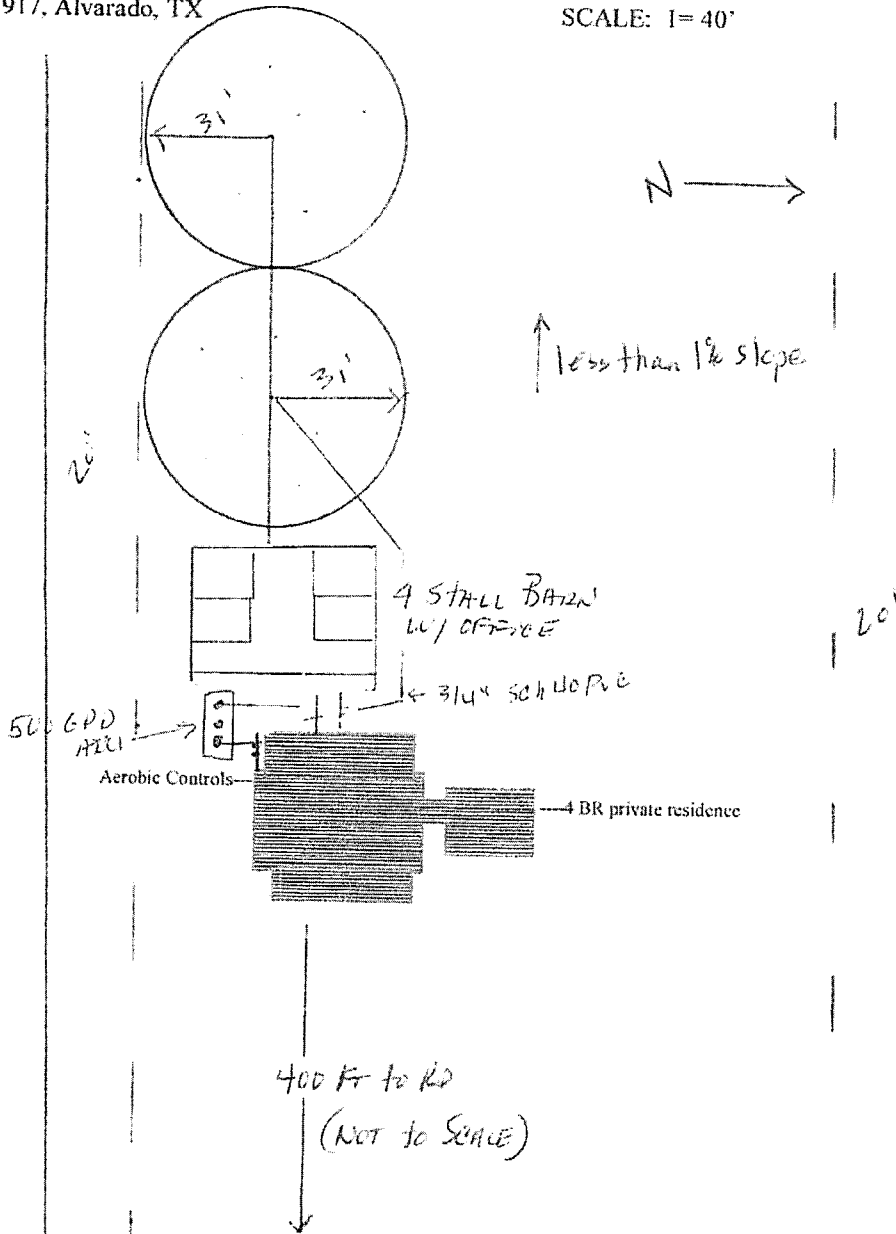
SIGNATURE OF INSTALLER OR DESIGNER: Barney Ballard DATE: 4-20-17



SITE SPECIFIC AEROBIC DESIGN  
Rodolfo Canada  
8018 E. FM 917, Alvarado, TX

100 plus ft. to Prop Line

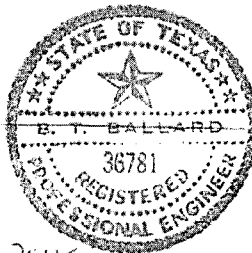
SCALE: 1=40'



FM 917

Submitted by:

*Barney Ballard*



Barney Ballard, PE 36781

4-20-17

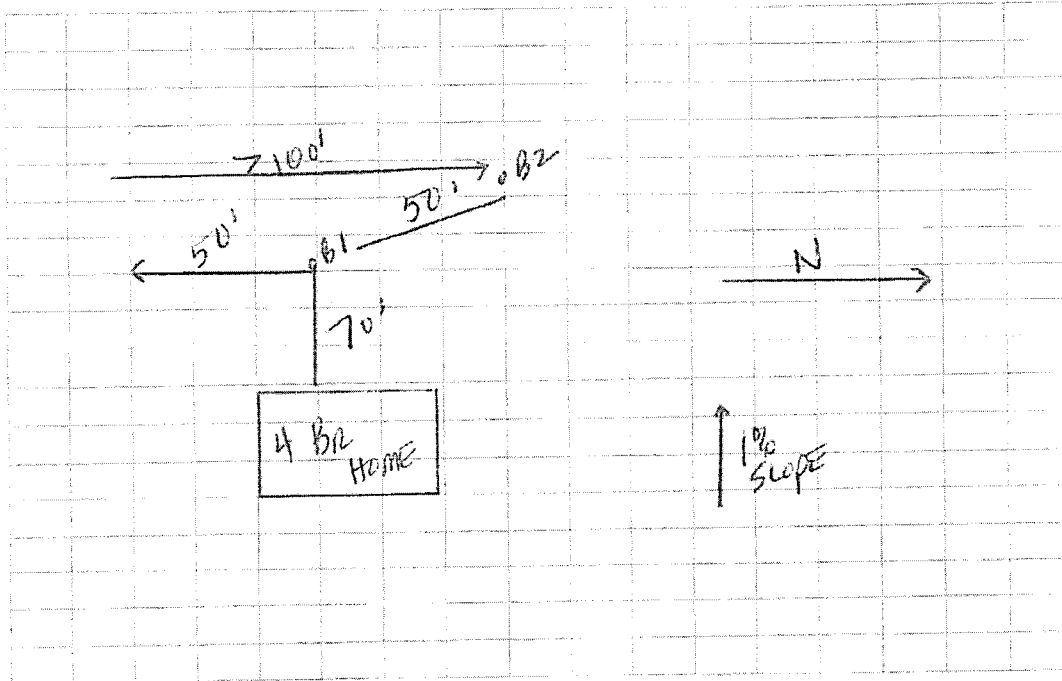
ES. Revised  
2-2-2018

JOHNSON COUNTY - SITE EVALUATION REPORT

Date 4-20-2017  
 Name RODOLFO CANADA Phone 817-683-9677  
 Address 6937 YORKSTON ST. WATAUGA TX 76148  
 PROPERTY LOCATION  
 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street/Road Address 8018 E FM 917, ALVARADO, TX 76009  
 Additional Information \_\_\_\_\_

SCHEMATIC 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 <input checked="" type="checkbox"/> |
| Presence of upper water shed                                | Yes _____ | No <input checked="" type="checkbox"/> |
| Presence of adjacent ponds, streams, water impoundment area | Yes _____ | No <input checked="" type="checkbox"/> |
| Existing or proposed water well in nearby area              | Yes _____ | No <input checked="" type="checkbox"/> |

Firm Panel # 48251C0205J

ATTESTED BY:  
 Signature B. T. Ballard 4-20-17 Site Evaluator No. PE 36781

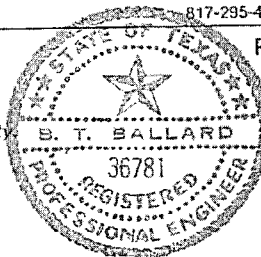
140 Magnolia St, Burleson, TX 76028

Address

817-295-4891

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.



Revised 7/10/2012

**SYSTEM FLOW PLAN**

Discharge from the residence shall gravity flow via 3" – 4" sch 40 PVC pipe through a two-way cleanout within 50 LF of the structure into a 400 gallon pre-treatment (trash) tank which is designed to reduce the concentration of solids, oil and fat from the wastewater.

Separated liquids shall gravity flow from this tank / compartment into the aeration chamber. Once the aeration process is complete, remaining suspended solids will be removed during the clarification process. The clear, treated effluent from the stilling chamber shall gravity flow via 3" sch 40 PVC pipe across the stack type, NSF approved chlorinator as it flows into the dosing tank / chamber.

The dosing chamber is 771 gallons volume with liquid depth of 55". Each inch represents 13 gallons. In the event of pump failure a total volume of 250 gallons will be left exceeding the 1/3 flow above the alarm. The tank control panel is equipped with an audible and a visual alarm system.

Treated effluent will pass through a ½ HP pump to spray rotors via ¾" to 1" SCH 40 PVC purple coded pipe. Treated effluent is discharged via low angle nozzles onto vegetation for evaporation into the atmosphere. The installer may later the plan for location of the spray rotors to accommodate landscape patterns and land use by owner without notice to PE so long as the new design meets the requirement for spray coverage and maintains all safe distance setbacks.

**SITE EVALUATION RESULTS**

Total site area: 11.3 AC

Depth of excavation: 36"

Depth to groundwater if any: N/A

Separation distances from well to tanks – 50' and to sprayers – 50' if pressure cemented or 100' if no well log avail.

Separation distances to pool: 25'

Site suitability: Suitable

Restrictive Horizon: Yes

**Boring #1 Results:**

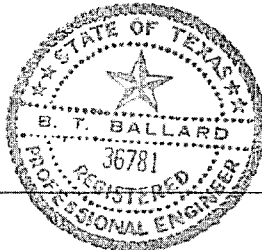
DEPTH	SOIL CLASS	SOIL TYPE	MOTTLES	RESTRICTIVE
12-24"	III	Clay Loam	None	No
25-36"	III	Clay Loam	None	No
37-48"	III	Clay Loam	None	No
49-60"	IV	Silty Clay	None	Yes

**Boring #2 Results:**

DEPTH	SOIL CLASS	SOIL TYPE	MOTTLES	RESTRICTIVE
12-24"	III	Clay Loam	None	No
25-36"	III	Clay Loam	None	No
37-48"	III	Clay Loam	None	No
49-60"	IV	Silty Clay	None	Yes

Disclaimer: I certify that all content of this report are true, accurate, and based on my field observation or that of my associates. It should be understood that the test data and other information given in this report does not cover nor infer approval for the installation of the onsite sewage facility. The design, construction and installation are based upon the specific conditions affecting each lot and tract and usage and must be subsequently approved by the local county authorities.

Submitted by: Barney Ballard  
4-20-17



Barney Ballard, PE 36781



**ON-SITE SEWAGE FACILITY – SITE SPECIFIC SITE EVALUATION AND AEROBIC DESIGN**

Prepared By:  
BARNEY BALLARD, PE 36781  
140 Magnolia St  
Burleson, TX 76028  
(817) 295-4891

PREPARED FOR: RODOLFO CANADA

SITE ADDRESS: 8018 E FM 917, ALVARADO, TX 76009

LEGAL DESCRIPTION: 11.29 AC TRACT 1 – T S ROBERTS SURVEY, ABST 716

INSTALLER: Danny Scarbro

POTABLE WATER SOURCE: JOHNSON COUNTY RURAL WATER ESD

**DESIGN PARAMETERS USING TCEQ CHPT 285**

Estimated Flow: 4 BR / 2,500 SF private residence and 800 SF / 1 toilet personal shop (no chemicals) = 375 GPD

Loading Rate: 0.64

Spray area required: 5,860 SF

Spray area designed: 6,036 SF

**TREATMENT TANK DESIGN PARAMETERS**

Pre-treatment tank capacity: 400 gallons

Aeration / treatment tank capacity: 500 gallons per day Brand: PRO FLO SLPT

Dosing tank capacity: 771 gallons

**SYSTEM EFFLUENT DISCHARGE PLAN**

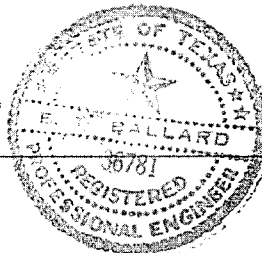
Sprinkler area: 2 – 31'R heads @ 360 degree (3,018 SF)

Total coverage: 6,036 SF

**COMPONENT SPECIFICATIONS**

Effluent pump	½ HP, 20 GPM, stainless, submersible
Chlorination device:	NSF approved tablet stack chlorination device
Rotor specs:	Max inlet pressure rate at 40 psi with low angle trajectory nozzles (less than 13 degree)
Vegetation cover:	All areas affected by spray irrigation shall be covered in all season vegetation.
Electrical:	All electrical wiring shall be in accordance with the latest edition of the N.E.C.
Secondary Safety Caps:	All tanks must have inspection ports located on top over inlet/outlet which extend to ground surface utilizing a secondary plug or other suitable restraint system below the riser cap to prevent tank entry if the cap is damaged or removed.

Submitted by: Barney Ballard  
4-20-17  
OSSF Site Evaluation and Design – Page 1 of 2



Barney Ballard, PE 36781

Johnson County  
Becky Ivey  
County Clerk  
Cleburne 76033

COPY



70 2018 00002185

Instrument Number: 2018-2185

As

Affidavit

Recorded On: January 26, 2018

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

\*\*\*\*\* 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: 2018-2185

Receipt Number: 118436

Recorded Date/Time: January 26, 2018 01:10:37P

User / Station: D Vannatta - CCL13

Record and Return To:

CIRCLE S BACKHOE

385 HILL COUNTY RD 1418

CHK

GRANDVIEW TX 76050



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



### Johnson County Affidavit to the Public

According to Texas Commission on Environmental Quality Rules for On-Site Sewage (OSSF's) Facilities, this document is filed in the Deed Records of Johnson County, Texas.

I

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (commission) to regulate on-site sewage facilities (OSSF's). Additionally, the Texas Water Code (TWC), §5.012 and §5.013, gives the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety Code, requires owners to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

II

Ann OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91(12) will be installed on the property described as 11.29 AC (TRACT 1) - S ROBERTS SURVEY ALST. 716 - JOHNSON COUNTY TX

This property is owned by RODOLFO CANADA  
(Owner's full name)

This OSSF shall be covered by a continuous service policy for the first two years. After the initial two-year service policy, the owner of an aerobic treatment system for a single family residence shall either obtain a maintenance contract within 30 days or maintain the system personally.

Upon sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF may be obtained from Johnson County Public Works.

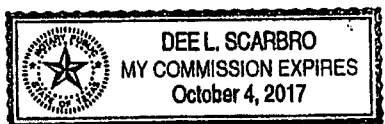
WITNESS BY HAND(S) ON THIS 17 DAY OF April, 2017

\_\_\_\_\_  
(Owner(s) signature(s))

Rodolfo Canada  
(Owner(s) signature(s))  
8016 E. FM 917  
ALVARADO, TX 76009

SWORN TO AND SUBSCRIBED BEFORE ME ON THE 17 DAY OF April, 2017

Notary Public, State of Texas  
Notary's Printed Name:  
My Commission Expires:



**ANNUAL MAINTENANCE AGREEMENT Provided by Dee Scarbro DBA LONE STAR AEROBIC, MP 0000804**

CONTRACT BEGIN DATE: 5-1-17

ENDING DATE: 5-1-19

RODOLFO CANADA  
8018 E FM 917  
ALVARADO, TX 76009

sc18

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: \_\_\_\_\_, D. Scarbro, MP

**SIGN AND RETURN THE CONTRACT ALONG WITH YOUR PAYMENT – PLEASE MAKE A COPY FOR YOUR FILES.**

MAIL TO: Lone Star Aerobic @ 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: \_\_\_\_\_