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Variance Request for Septic System

Johnson County Subdivision Rules and Regulations state only one septic system per one (1) acre, Section VII A. Variance fee is \$100 per request. To request a variance for the purpose of:

- installing a septic system on a lot or tract of less than an acre or
- 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 T Thomas DAVIDSON Date 6-21-2018

Phone no. 469-446-0728

Email address TOM@DMWCOMMERCIAL.COM

Property Information for Variance Request:

Property 911 address 4901 CR 605 BURLESON TX 76028

Subdivision name _____ Block _____ Lot _____

Survey V ANDERSON Abstract 1 Acreage 1.291

Size of existing residence: 1840 sq. ft.

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

ETJ: Yes - City FORT WORTH No

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

Reason for request 2 STRUCTURES ON ONE SEPTIC SYSTEM
SINK + toilet

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

Johnson County Public Works

Johnson County Public Works

1 North Main Street, Suite 305

Cleburne, TX 76033 (817) 556-6380

Receipt Number: 2018-840

6/22/2018 04:42 PM CG 1

Descriptions:

1.	\$100.00	Variance Request
2.		
3.		
4.		

Received From:

Davidson Thomas

4901 CR 605 Burleson

Amount Received:

\$100.00

Payment Information:

Visa Fee = \$0.00

Permit

S51959

100170212812

Signature / Initials: _____

CG 1 6/22/2018 04:42 PM



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: _____ Date 6.22.18

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 or authorized representative

Property Owner's Name: THOMAS DAVIDSON Phone number: 469-446-0728

911 site address: 4901 CR 605 BURLESON TX 76028

Current mailing address: SAME

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

Legal Description: Metes and Bounds Acreage: 1.29

Recorded deed: Volume _____ Page _____ Survey V ANDERSON Abstract 1

-OR- Subdivision: _____ Lot #: _____ Blk #: _____ Phase / Section #: _____

Well Water or Water provider JOHNSON COUNTY SUD

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 _____

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.

SNOP

(Signature of Owner or Representative)

6-21-2018
(Date)

.....

Site Evaluator: Doyle Culp License No. 6470

Phone No: 817-297-2342 Other No. _____

Mailing Address: PO 986 City Crowley State TX Zip 76036

Installer: THOMAS DAVIDSON License No. HOME OWNER

Phone No: 469-446-0728 Other No. _____

Mailing Address: Tom@BMWCOMMERCIAL.com City Burleson State TX Zip 76028

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



JOHNSON COUNTY PUBLIC WORKS

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

ON-SITE SEWAGE FACILITY TECHNICAL INFORMATION FOR PERMIT

PROFESSIONAL DESIGN REQUIRED: Yes No If Yes, professional design attached: Yes No

Designer Name: Doyle Culp License Type and No. 2949 RS

Phone No. 817-297-2342 Other or Fax No. _____

Mailing Address: PO 986 City: Crowley State: TX Zip: 76036

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

Stub out to treatment tank: 3 inch PVC schdle 40

Treatment tank to disposal system: 1/8 inch per foot

II. DAILY WASTEWATER USAGE RATE: Q= 264 w/s (gallons/day)

*240 38M
24 shop
264 total*

Water Saving Devices: Yes No

III. TREATMENT UNIT(S): Septic Tank

Aerobic Unit *Existing*

A. Tank Dimensions: _____ Liquid Depth (bottom of tank to outlet): _____

Size proposed: _____ (gal)* Manufacturer: _____

Material/Model# _____

Pretreatment Tank: Yes No NA Size: _____ (gal)

Pump/Lift Tank: Yes No NA Size: _____ (gal)

B. OTHER Yes No If yes, please attach description.

Pro 380 Liberty Pump Vault transfer to Aerobic

IV. DISPOSAL SYSTEM:

Disposal Type: Existing

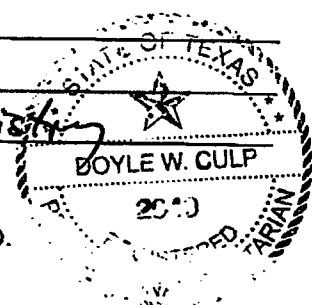
Manufacturer and Model _____

Area Proposed: Existing Area Required: Existing

V. ADDITIONAL INFORMATION:

NOTE - THIS INFORMATION MUST BE ATTACHED FOR REVIEW TO BE COMPLETED.

A. Soil/Site Evaluation B. Planning materials (If Applicable).

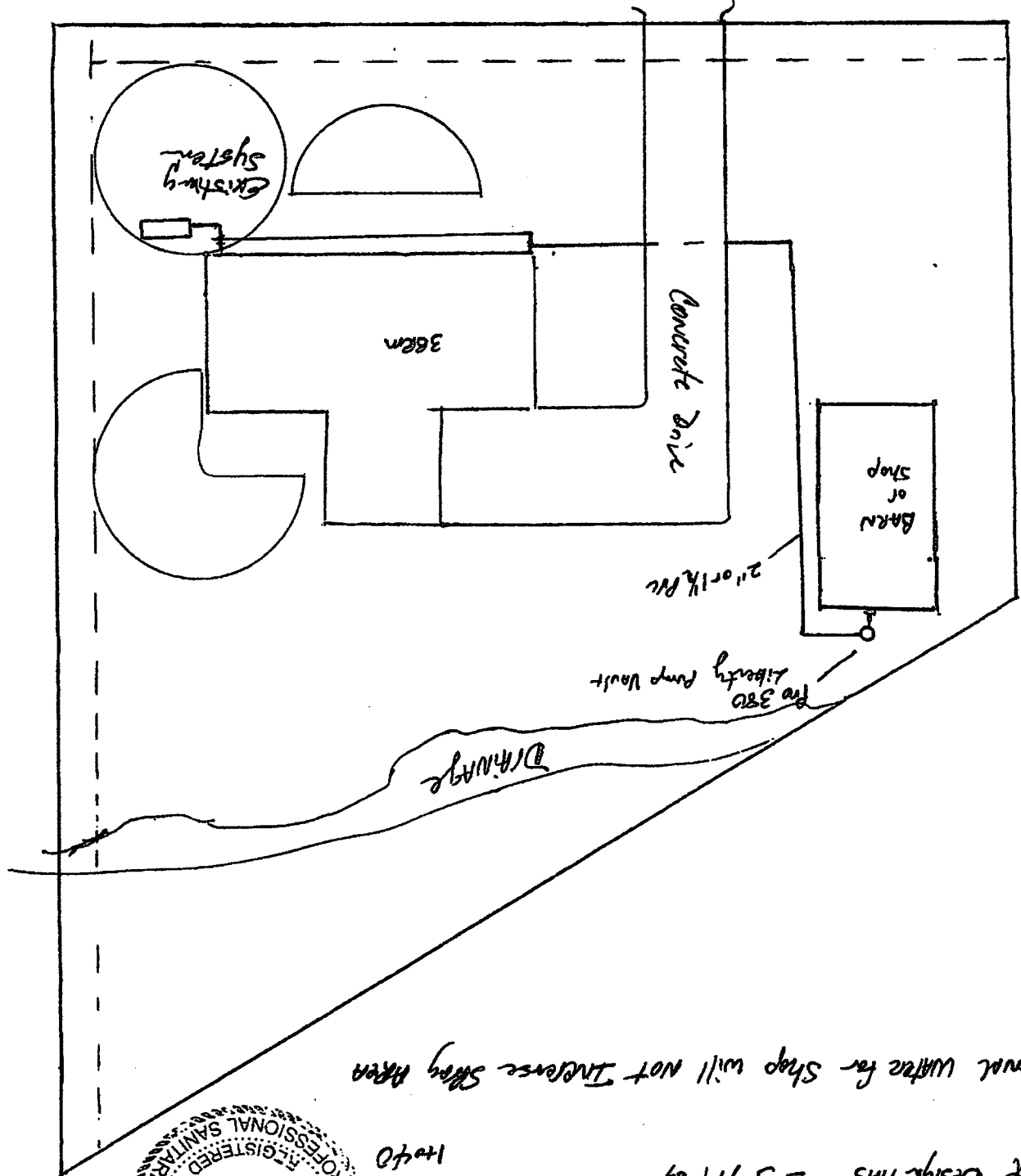


DO NOT BEGIN CONSTRUCTION PRIOR TO OBTAINING AUTHORIZATION TO CONSTRUCT. UNAUTHORIZED CONSTRUCTION CAN RESULT IN CIVIL AND/OR ADMINISTRATIVE PENALTIES.

SIGNATURE OF INSTALLER OR DESIGNER: *Doyle Culp* DATE: 6/21/18

02 605

02 519



ADDITIONAL WATER FOR SHOP WILL NOT INCREASE STAGY AREA

Tom Davidson
 4901 CE 605
 Burleson TX
 3600 Home 240 wts gallon
 shop 2 people 24 wts gallon
 at 12 wts/gals 264/064 = 4125 sqft
 Current Design Hrs = 5714 sqft



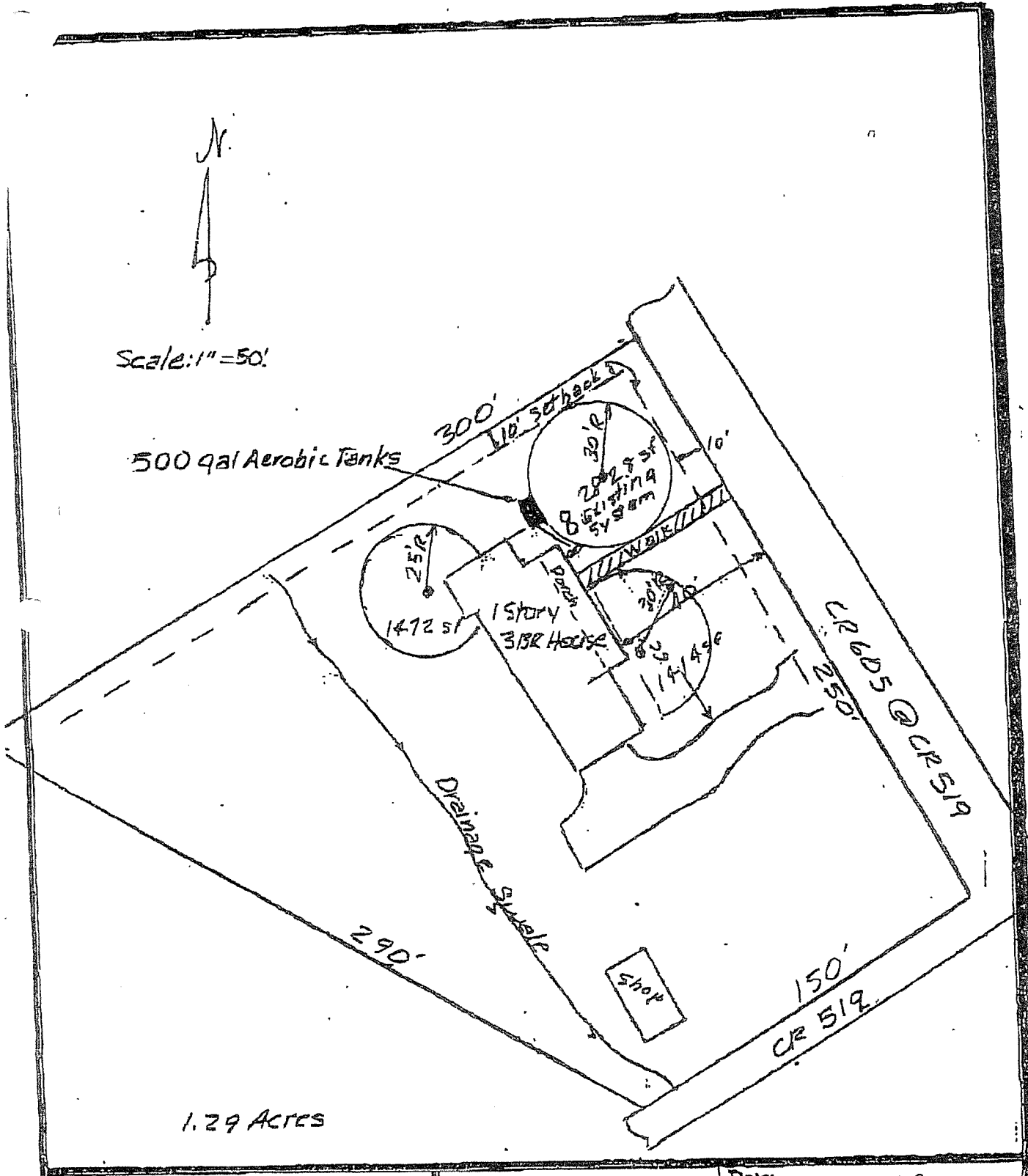
6/20/18
 Doyle W. Culp

14040

08:21A FROM:

TO: 18175566391

P:4



Bruce D. Gipson
 Professional Engineer
 1525 Canterbury Circle
 Fort Worth Texas 76112

Betty Toomer	Date: 5-8 2000
4901 CR 605	Proj: Aerobic Sewage Disposal System
Burleson Tr 76028	Designed by: BDG.

June 21, 2018

SPRAYFIELD DESIGN

PREPARED FOR:

NAME: Tom Davidson
ADDRESS: 4901 County Road 605
LEGAL: Burleson, Texas
INSTALLER: Johnson County Texas

DESIGN PARAMETERS:

ESTIMATED FLOW: 240 Gallon (3 BRm) Water Saving Devices
24 Gallon (Shop & Barn) (2 people at 12 Gals.)
Total 264 Gallon

ADDITIONAL WATER FOR SHOP WILL NOT INCREASE SPRAY AREA

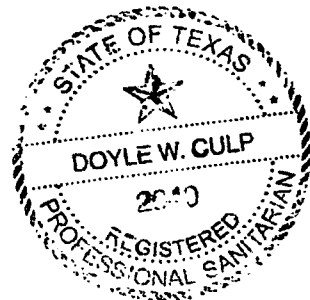
LOADING RATE: .064
AREA REQUIRED: 4125 Sq. Ft.
AREA DESIGN: Pre-Existing 5714 Sq. Ft.

SYSTEM PARAMETERS:

SEPTIC TANK: Pro-380 Liberty Pump Vault
PRETREATMENT TANK: Pre-Existing
AERATION TANK: Pre-Existing
PUMP TANK: Pre-Existing
SPRINKLER AREA: Pre- Existing
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 R.S. 2949
PO Box 986
Crowley, Texas 76036
(817) 297-2342



ON-SITE EVALUATION

DESIGN CALCULATIONS

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

Required Area : $264 \text{ W/s} / .064 = 4125 \text{ Sq. Ft.}$

Designed Area : 5714 Sq. Ft.

SYSTEM LAYOUT

Discharge from the residence will flow by gravity (1/8 inch fall per foot minimum) to a existing pretreatment tank then to a existing Aerobic Unit via a PVC pipe. A clean out will be 3 Ft. within each of the building and every 100 Ft. if needed. Discharge from Shop & Barn will flow by gravity to a Pro 380 Liberty Pump Vault then combine in the pretreatment tank.

The clear effluent from the Aerobic Unit will discharge through a tablet chlorinator into a existing dosing tank. The chlorinated effluent will pass through a 1/2 horse power pump to existing 3 sprinkler heads of existing 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)

PUMP TANK

The pump tank volume will be existing tank minimum. In the event of pump failure a total volume of 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.

