Approved Commissioners Court

JUL 1 0 2017

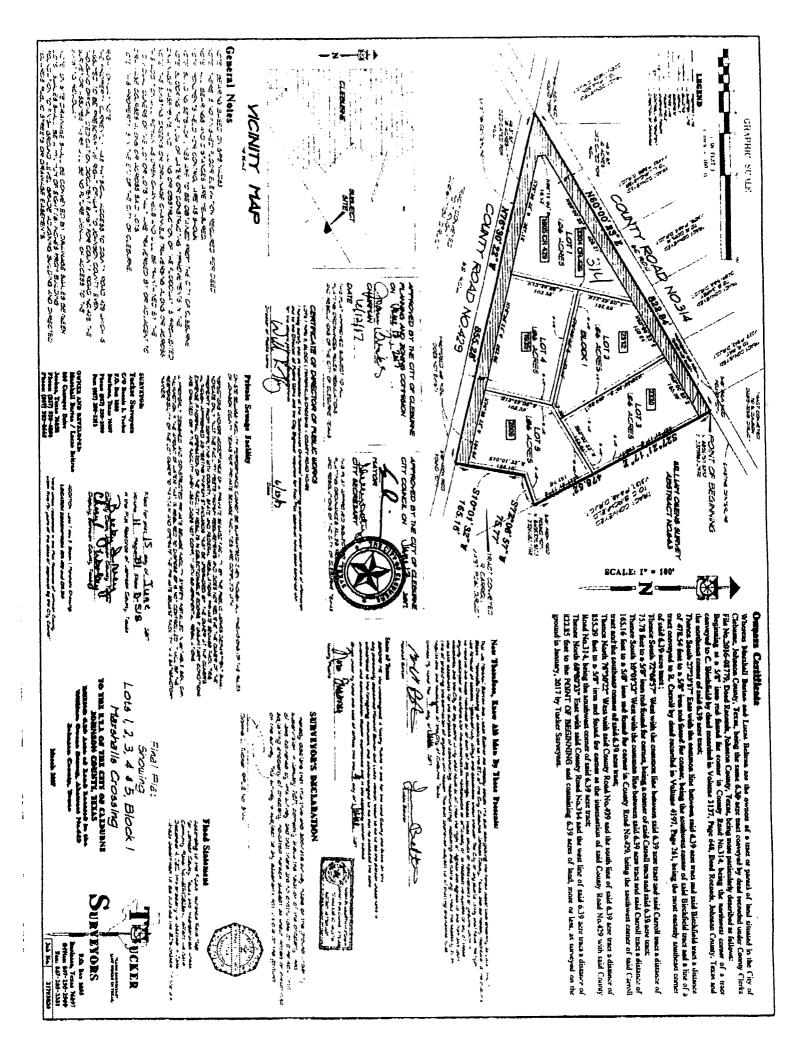
REQUEST FOR AGENDA PLACEMENT FORM									
Submission Deadline - Tuesday, 12:00	PM before Court Dates								
SUBMITTED BY: David Disheroon TOD	AY'S DATE: 06/30/2017								
<u>DEPARTMENT</u> :	Public Works								
SIGNATURE OF DEPARTMENT HEAD:									
REQUESTED AGENDA DATE:	07/10/2017								
SPECIFIC AGENDA WORDING: Request for pre-variance for a duplex w/ 1 septic system on less than 2 acres located at 2330 County Road 314, Cleburne in Precinct 4. State minimum is ½ acre per home. PERSON(S) TO PRESENT ITEM: David Disheroon SUPPORT MATERIAL: (Must enclose supporting documentation)									
TIME: 15 minutes (Anticipated number of minutes needed to discuss item	ACTION ITEM: X WORKSHOP CONSENT: EXECUTIVE:								
STAFF NOTICE:									
COUNTY ATTORNEY:IT DE	PARTMENT:								
AUDITOR: PURC									
PERSONNEL: PUBL	IC WORKS:X								
BUDGET COORDINATOR: OTHER:									
**********This Section to be Completed by C	ounty Judge's Office********								
ASSIGNED AGENDA	DATE:								
REQUEST RECEIVED BY COUNTY JUDG	E'S OFFICE								
COURT MEMBER APPROVAL	Date								



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:
installing a septic system on a lot or tract of less than an acres (Duplex)
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 Marshall Barton Date 6-30-17
Contact Information: Phone no. 817 5384891
Cell no. 817.5384891 Email address <u>marshall@digterlle.com</u>
Property Information for Variance Request: Property 911 address 2330 CR 314 Clebarne
Subdivision name Marshall & Crovering Block Lot 3
Lot size: 1,06 acres Size of existing residence:sq. ft.
Does this lot currently have a septic system? () Yes () No System type
ETJ: (Yes - City Cleburne () No
Is a part of the property located in a FEMA designated Floodplain? () Yes
Reason for request Mult: family
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/Variances/Septic System Variance Request App





JOHNSON COUNTY Department of Public Works

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

ON-SITE SEWAGE FACILITY TECHNICAL INFORMATION FOR PERMIT

PROFE	SSIONAL DESIGN REQUIRED: A Yes - No	If Yes, professional	design attached:	√ g ['] Yes □ No						
	Designer Name: Doyle Cuip	License Type and N	0. <u>2797 \ \ 3</u>	70077						
	Phone No. 817-347-3342	Other or Fax No.								
	Mailing Address: Po 986	City: Cloudy	State:_ <u>/ X</u>	Zip: <u>/66.5 U</u>						
ŧ.	TYPE AND SIZE OF PIPING FROM: (Example: 4:	SCH 40 PVC)								
	Stub out to treatment tank: 3" Puz Sch 40									
	Treatment tank to disposal system:	a Foot								
u.	DAILY WASTEWATER USAGE RATE: Q=	(gallons/day)								
	Water Saving Devices: ♠ Yes □ No									
111.	TREATMENT UNIT(S): Septic Tank	Aerobic Unit		- II						
	A. Tank Dimensions:	Liquid Depth (botto	om of tank to outle	t): <u>37</u>						
	Size proposed: 600 (gal)*	Manufacturer:								
	Material/Model#									
	Pretreatment Tank: Yes	Size:(gal)		□ NA						
	Pump/Lift Tank: Yes	Size:(gal)		□ NA						
	B. OTHER Yes In No If yes,	please attach descrip	otion.							
IV.	DISPOSAL SYSTEM: Disposal Type: Spinal Manufacturer and Model									
	Area Proposed: 3404 9617	Area Required:	3430 5ifr							
	8478 s4F7		7500							
٧.	ADDITIONAL INFORMATION:		,							
	NOTE - THIS INFORMATION MUST BE ATTACH	IED FOR REVIEW TO E	BE COMPLETED.							
	A. Soil/Site Evaluation B. Planning r	materials (If Applicabl	le).							
	OT BEGIN CONSTRUCTION PRIOR TO OBTAIN TRUCTION CAN RESULT IN CIVIL AND/OR A			UCT. UNAUTHORIZEE						
SIGNA	TURE OF INSTALLER OR DESIGNER:	gh W. Cik	DATE	4/21/17						
		/ /		/ ******						
		J	· · · · · · · · · · · · · · · · · · ·	OF TEXAS W. CULP 2949						
Revised '	7/10/2012	Page 2 of 2	1600	NAL SAM						

Page 2 of 2

SPRAYFIELD DESIGN

PREPARED FOR:

NAME: ADDRESS:	County Road 314	Cleburne, Texa
LEGAL:	Lot 3	Johnson County Texas
INSTALLER	:	#
DEVELOPM	IENT PERMIT:	

DESIGN PARAMETERS:

ESTIMATED FLOW: 480 Gallon (3 BRm Duplex) Water Saving Devices

LOADING RATE: .064

AREA REQUIRED: 7500 Sq. Ft. AREA DESIGN: 8478 Sq. Ft.

SYSTEM PARAMETERS:

PRETREATMENT TANK: 431 Gallon

AERATION TANK: 800 Gallon NuWater Aerobic Unit

PUMP TANK: 854 Gallon

SPRINKLER AREA: 3 - 30 Ft. Radius Full Circle 2826 Sq. Ft. Each

Total 8478 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 : <u>GPD</u> = Total Square Feet App. Rate

Required Area: 480 W/s / .064 = 7500 Sq. Ft.

Designed Area: 8478 Sq. Ft.

SYSTEM LAYOUT

Discharge from the Residence will gravity flow via a three inch PVC pipe (1/8 inch per ft. fall minimum) to a Nu Water B-800 Aerobic Treatment Plant. There will be a clean out installed within 3 Ft. of house and every 100 Ft. if needed.

The clear effluent from the Nu Water Aerobic Unit will discharge through a chlorinator into 854 gallon pump tank. The chlorinated effluent will pass through a 1/2 horse power pump to 30 feet radius with 3 sprinkler heads via a one inch pressure rated line. Low angle nozzle 13 degree or less shall be used to keep the spray low and reduce aerosol. All spray areas 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. (285.38)

PUMP TANK

The pump tank volume will be 854 gallon minimum. In the event of pump failure a total volume of 246 gallons will be left exceeding the 1/3 flow above the alarm. The tank shall be provided with an 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 40 pounds per square inch.

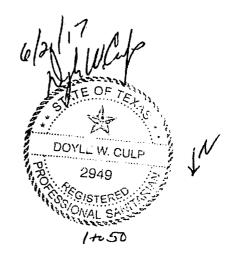
VARIANCES

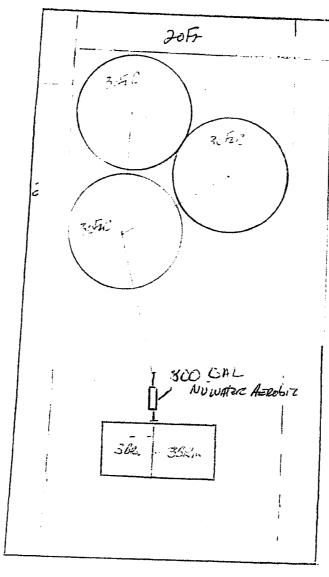
No variances are requested with any part of this system. Any changes in proposed system must be approved by the permitting authority before the installer is authorized to make change.

A timer will be installed if any sprinkler is within 20 feet of property line distribution.

40+3 CR 314 Cleburne IX

36em 480 NsgAls/064=7500 SgF2 Deplexes Design = 3478 SgF2



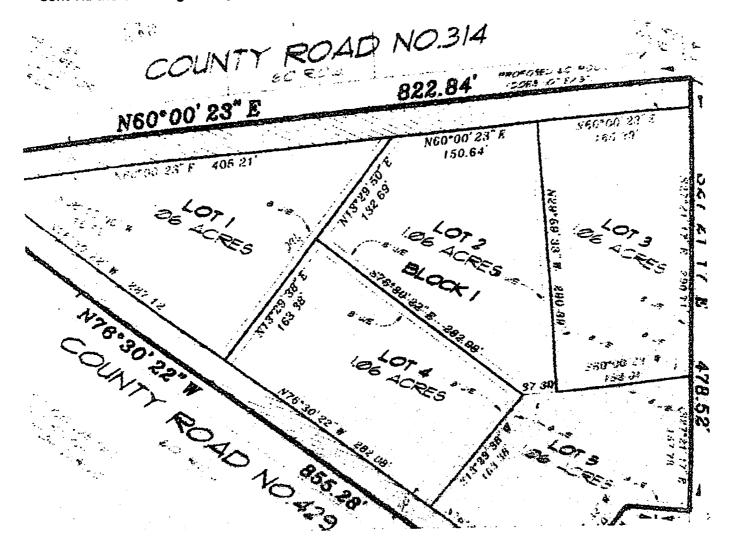


CR 314

From: dulp4 dulp4@att.net Date: Jun 20, 2017, 1:02:12 PM

To: dulp4@att.net

Sent via the Samsung Galaxy S@6 active, an AT&T 4G LTE smartphone



JOHNSON COUNTY - SITE EVALUATION REPORT

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,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	LotBlockSubdivisionStreet/Road Address(R 314 Clebvay																
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Presen	ce of :	100 yea	r flood :	zone					Y	es		No	«	:	Firm	OY! Paneli	W. CULP
Presence of upper water shed Yes No ✓ 2949 ≥																	
Presence of adjacent ponds, streams, water impoundment area Yes No Existing or proposed water well in nearby area Yes No Yes																	
ATTESTED BY:																	
Signature							Sit	e Fva	iuatr	or No.	60	170					
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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

JOHNSON COUNTY - OSSF SOIL EVALUATION FORM **Date Performed** Owner's Name Cleburne **Physical Address** O.S. Number 4470 Site Evaluator **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, soll 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 Drainage/Mottles Restrictive Depth Comments Horizon **Water Table** Textural Class Inches Suitable NA NA 12 <u>24</u> <u>36</u> <u>48</u> 60 **Soil Boring Number** Drainage/Mottles Restrictive Depth **Comments** Horizon **Water Table** Inches **Textural Class** Sutable NA 12 24 36 48 60 I certify that the aboy's statements are true and are based on my own field observations ATTESTED BY: Site Evaluator No. Signature

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