



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: Larry & Melinda Brockman Date 10/20/2017
Phone no. 817-219-1711
Email address lindib@att.net

Property Information for Variance Request:

Property 911 address 6400 Shadow Valley Dr.
Subdivision name Shadow Valley Estates Block 2 Lot 19
Survey _____ Abstract _____ Acreage 2.507
Size of existing residence: 3454 sq. ft.

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

ETJ: Yes - City _____ No

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

Reason for request adding 1 toilet & 1 sink to Metal
barn for convenience

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 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: Linda Overby Date 10/23/17
 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: LARRY & Melinda Brockman Ph. # 817-219-1911
 911 site address: 4400 Shadow Valley Dr. Current mailing address: 4400 Shadow Valley Dr.
 Legal Description: Metes and Bounds: Acreage: 2.5 +/- Burleson TX 76028
 Recorded deed: Volume _____ Page _____ Survey _____ Abstract _____ -or-
 Subdivision: Shadow Valley Estates Lot #: 19 Blk #: 2 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 3 Multi-Family # Bdrms _____ Commercial # Employees _____
 Well -or- Water Co. Bethesda

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.

Larry Brockman / Melinda Brockman 8/18/2017
(Signature of Owner) (Date)

.....
 Site Evaluator: William A. Cameron License No. 3630
 Phone No: _____ Other No. _____
 Mailing Address: _____ City _____ State _____ Zip _____
 Installer: MAH D. D. D. D. License No. 8172
 Phone No: 972-670-6314 Other No. _____
 Mailing Address: 5021 SE McKinney City RICE State TX Zip 75155

****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@johnsoncountytexas.org

**ON-SITE SEWAGE FACILITY
TECHNICAL INFORMATION FOR PERMIT**

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

Designer Name: William A. Cameron License Type and No. RS 3630

Phone No. 817-723-5398 Other or Fax No. _____

Mailing Address: P.O. Box 161615 City: Fort Worth State: TX Zip: 76161

I. TYPE AND SIZE OF PIPING FROM: (Example: 4: SCH 40 PVC) Existing Proposed
Stub out to treatment tank: 3" Sch 40 PVC 3" Sch 40 PVC
Treatment tank to disposal system: 3/4" sch 40 PVC 2" Transfer sch 40 PVC

II. DAILY WASTEWATER USAGE RATE: Q= 300 (gallons/day)
Water Saving Devices: Yes No

III. TREATMENT UNIT(S): Septic Tank Existing Aerobic Unit
A. Tank Dimensions: 5'3" x 13'6" Liquid Depth (bottom of tank to outlet): 53"
Size proposed: 600 (gal)* Manufacturer: NU WATER
Material/Model# B550

Pretreatment Tank: Yes No Size: 400 (gal) No NA Proposed
Pump/Lift Tank: Yes No Size: 268 (gal) No NA 500 gal

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

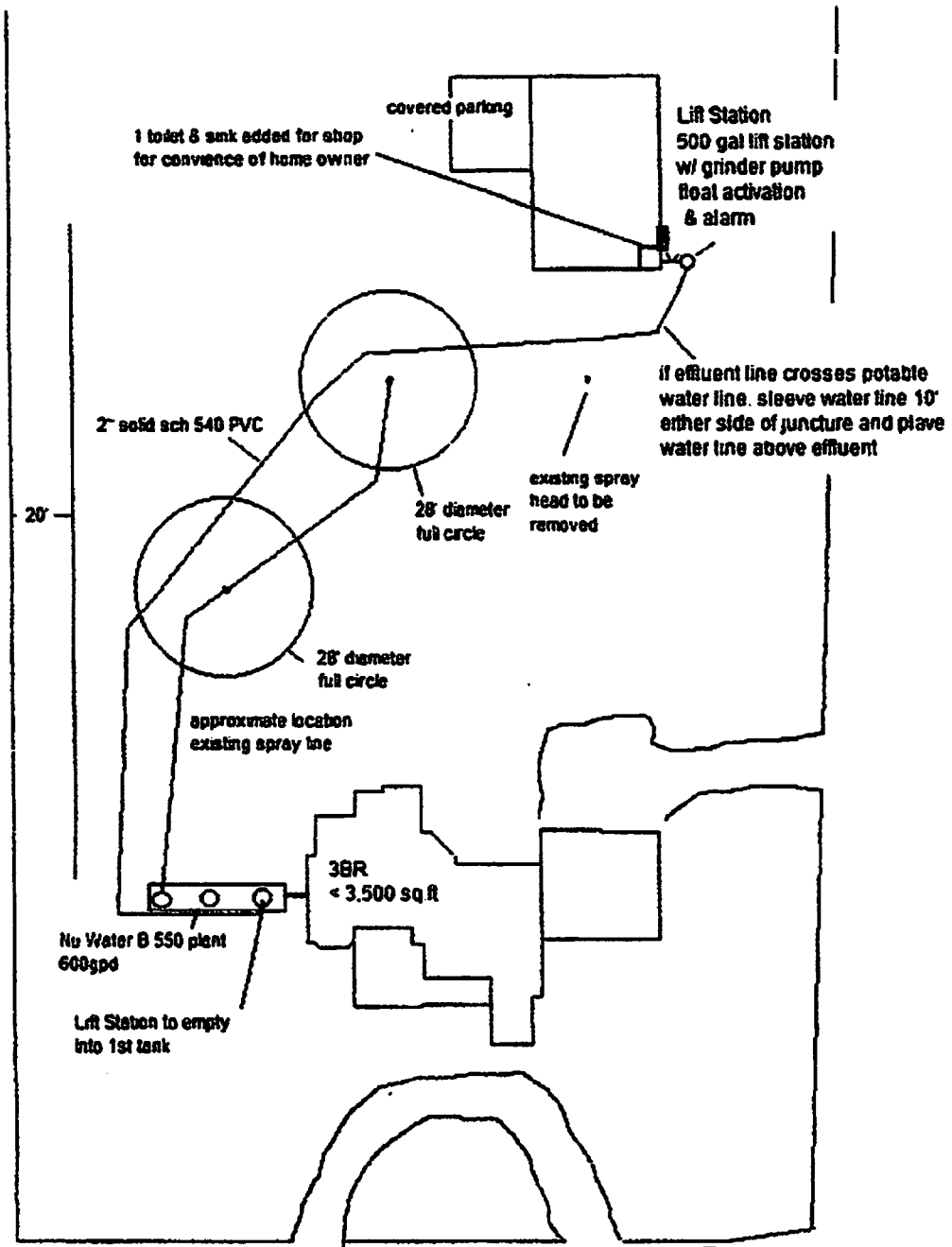
IV. DISPOSAL SYSTEM:
Disposal Type: Surface Irrigation
Manufacturer and Model: Rain Bird K-Rain
Area Proposed: 4924 Area Required: 4688

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: 8/6/2017





Scale 50:1

William A. Cavanaugh
Professional Sanitarian
3530
License Expires 03/30/17



DESIGN PLANNING MATERIALS
FOR
AEROBIC TREATMENT
AND
SURFACE DISTRIBUTION

Date : August 7, 2017

County : Johnson

AUTHORIZED AGENT : Johnson County Public Works

Property 911 address : 6400 Shadow Valley Dr., Burleson, TX 76028

Owner : Larry & Meinda Brockman

Legal : Lot 19, Block 2, Shadow Valley Estates Johnson County

Acreage : 2.5 acres Water Supply : Public

Usage Type : Residential #BR 3 Sq. FT. <3,500 sq. ft.

Min estimated effluent 300 gpd

Design estimated effluent 300 gpd

House Sewer Size : 3" min. 2 way clean ou Yes Slope: 1/8"/FT.

Existing System : NO Future Use : NO Abandon : N/A

1. PRIMARY TREATMENT:

SEPTIC RETENTION

Proprietary Plant 1 - 600 gpd plant

PUMP TANK REQUIRED YES

PUMP TANK SIZE 768 gal 1-C

ADDED LIFT STATION AT SHOP 500 gallon lift station

NO ADDED LIVING SPACE

PUMP 1/2 Horse Power Grinder Pump

2. SECONDARY TREATMENT APPLIED :

B-550 Nuwater

Minimum aerobic treatment capacity 600 GPD

DESIGN TREATMENT CAPACITY 600 GPD

Manufacturer NuWater

3. DESIGN DISPERSEMENT METHOD

SPRAY IRRIGATION

Design Flow (Q) : 300 gpd

Application Rate(Ar): 0.064 g/sq.ft.

Application Area Required (Q/Ar) : 4688 sq. ft.

Area Proposed : 4,924 sq. ft.
Number of spray heads 2
2 - Full Circle - Diameter = 56' r = 28' 4,924 Area sq. ft.

3. Number of spray cycles per day : 2
amount of dose 150 gallons / dose
estimated run time 20 minutes

Spray heads KRain ProPlus 1103 RCW Low Angle
Low trajectory(15° or less) max pressure at head 40 PSI
Nozzle Required : # 3
GPM / head 3.5 gpm

Pump : Franklin Electric
FPS E series
20FE05SP4 2W115
OR EQUAL

4. DISINFECTION TYPE : NSF APPROVED SANITIZER

5. Pump TANK : 768 gallon capacity
Commercial timer required NO
Alarm ON set 30 inches from bottom

The tanks shall have risers to service the tanks and the pump in the pump tank.

The risers are to be secure as outlined in TAC 30 Chap 285.

A disconnect or "lock out" switch must be supplied for the pump and the high water alarm circuits within sight of the controls of the pump and alarm. The controller will have two electrical circuits; one for the pump, activation float, and compressor, and one separate circuit for the alarm.

The control panel shall be equipped with an audible and visual alarm for 1) high water level in the pump tank or 2) an aeration malfunction. The alarms must be within sight and hearing of the living area.

Before commencing excavations, call Dig Toss or Texas One-Call for identification of utility easement hazards.

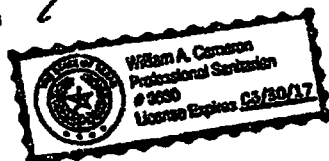
The area to be sprinkled shall be vegetated with native grasses not used for food production or crops intended for human consumption. Cool weather grasses will be over seeded during winter months.

All piping from the pump tank is to be Schedule 40 PVC and purple in color and located approximately as shown on the attached prints.

Maintaining sufficient hypochlorite tablets necessary for sanitizing the effluent is the responsibility of the owner.

Respectfully submitted


William A. Cameron



Johnson County Public Works

Johnson County Public Works

1 North Main Street, Suite 305

Cleburne, TX 76033 (817) 556-6380

Receipt Number: 2017-1259

10/20/2017 10:47 AM JE 1

Descriptions:

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

Received From:

Melinda Brockman
6400 Shadow Valley Drive Burleson

Amount Received:

\$100.00

Payment Information:

Check #2315

Permit

S12594

Septic variance for 6400 Shadow Valley Dr Burleson

Signature / Initials: _____

JE 1 10/20/2017 10:47 AM