

GALVESTON COUNTY HEALTH DISTRICT
CERTIFICATE OF COMPLETION

1205 Oak Street
La Marque, TX 77568

P.O. Box 939
(409) 938-7221

ON 7640

Permit Number: ON 7640 Issued By: Galveston County Health District

Property Owner: Lloyd Mosley

Installer: Michael Robinson

Subdivision: Greenbriar Unrecorded Block: _____ Lot: 11 & 13

Street Address: 7011 Ave E City: Sanfa Fe

This is to certify that the above Wastewater Disposal System is constructed to meet the minimum construction requirements and special provisions of the Galveston County Health District.

Antonio Cortez
Health Official

June 11, 2013
Date

EC-03/Rev.06/ms

Galveston County Health District

Notice of Construction Deficiency

1205 Oak Street
P.O. Box 939
La Marque, Texas 77568
(409)938-2411

4700 Broadway, Suite 100-C
P.O. Box 838
Galveston, Texas 77553
(409)765-2551

Permit Number: ON 7640 Issued By: Galveston County Health Dept

Property Owner: Lloyd Mosley Installer: Michael Robinson SA

Subdivision: Greenbriar Unrecorded Lot: 11 & 13 Block: 3

Street Address: 7011 Ave E City: Sanfa Fe, TX 77510

The above Wastewater Disposal System Private Water Supply N/A has not been constructed in accordance with or otherwise fails to meet current minimum construction standards and special provisions of the Galveston County Health District. It may not be used until reinspection shows the following deficiencies to be corrected: septic system was not installed according to design on permit.

Antonio Cortez
Health Official

Oct. Nov. 2, 2012
Date

Site Evaluation: _____
Building Application: _____
Drainage Plan: _____
Floodplain Information: _____

Health District OSSF Permit# ON7640
City/County Building Permit# _____
Water Well Permit # _____
rcpt#

002695
GALVESTON COUNTY HEALTH DISTRICT
ON - SITE SEWAGE FACILITY
APPLICATION AND INSPECTION REPORT

NEW INSTALLATION
 RENOVATION

1. PROPERTY OWNER'S NAME: Mosley Lloyd
(LAST) (FIRST) (MIDDLE)
2. PERMANENT MAILING ADDRESS: 13814 View Meadow Ln., Houston, TX 77034
(STREET/P O BOX) (CITY/STATE) (ZIP)
3. TELEPHONE NO. DURING DAY: (832) 738-6340
4. SITE ADDRESS: 7011 Ave E Santa Fe TX 77510
(STREET) (CITY/STATE) (ZIP)
5. PROPERTY DESCRIPTION: Lot 11+13 Block _____ Sec 3 Subdivision: Greenbriar Un Recorded
Lot Size: 256x320 PROPERTY SURVEY OR SIMILAR DOCUMENT SHOULD BE ATTACHED.
6. SOURCE OF WATER: Private Well _____ Public Water Supply _____
(NAME OF SUPPLIER)
7. SINGLE FAMILY RESIDENCE: No. of Bedrooms — Living Area (sq. ft.) —
8. ESTIMATED MAXIMUM DAILY WATER CONSUMPTION (gpd): 600
WATER-SAVING DEVICES PROVIDED: (CIRCLE ONE) YES/NO YES
9. COMMERCIAL/INSTITUTIONAL (including multi-family residences) TYPE: Meeting Hall
NO. OF EMPLOYEES/OCCUPANTS/UNITS: 150 DAYS OCCUPIED PER WEEK: 1 day per week for 4 hrs
10. IS AN ORGANIZED SEWAGE COLLECTION WITHIN 300 FEET? — YES NO
11. Professional design required: Yes No If yes, professional design attached: Yes No
DESIGNER: Garry Gana, R.S. REGISTRATION NO. 3207
PHONE NO. (281) 235-4201 (RS)
12. INSTALLER: Mike Robinson REGISTRATION NO. 6955
PHONE NO. (409) 925 2534

I. SEWER (House drain):

TYPE AND SIZE OF PIPE: 3 or 4 inch pvc SLOPE OF SEWER PIPE TO TANK: 1/8" / 1'

II. TREATMENT TANKS:

TANK #	MAT'L	NO. OF COMPARTMENTS	TYPE	SIZE	gals
#1	<u>conc</u>	<u>1</u>	<u>Dosing</u>	<u>1000</u>	
#2	<u>conc</u>	<u>2</u>	<u>Septic</u>	<u>750</u>	
#3					
#4					

III. SITE EVALUATION

NOTE: Information worksheet must be attached for review to be completed.

Soil Class/Texture III Sandy Clay Load Rate 0.20
Performed By Garry Gana Mike Robinson Phone No (281) 235-4201 409-925 2534

IV. DISPOSAL AREA

TYPE Leaching Chamber MINIMUM AREA REQUIRED 394 ft²
EXCAVATION WIDTH 36" DISTANCE BETWEEN EXCAVATIONS 5 ft
TYPE/SIZE OF MEDIA — TYPE/DIAMETER OF PIPE 36" Leaching Chamber
TYPE OF BARRIER — EXCAVATION DEPTH 24"
LANDSCAPE PLAN see design

99

V. PLOT PLAN

NOTE: This information must be attached for review to be completed.

1. Submit two (2) copies of the Galveston County Health District OCSF Application & Inspection Report. The plot on the above mentioned form must include:

- a. Size and shape of lot or property,
- b. All structures on lot such as buildings, barns, pens, etc,
- c. Size and location of treatment tank(s),
- d. Size and location of wastewater disposal area,
- e. Distance of treatment tank(s) from house, property line, water well and wastewater disposal area,
- f. Distance of wastewater disposal area from house, property line, water well and treatment tank(s),
- g. Distance and direction to closest neighboring water well from treatment tank(s) and wastewater disposal area,
- h. Distance and direction to closest open water such as ponds, lakes, streams, etc.

[Handwritten Signature]
 DESIGNER'S SIGNATURE

3207
 REGISTRATION NO.

~~10-11-12~~
 DATE Revised
 10-16-12

This notice must be read and signed before these construction plans will be approved. **AFTER APPROVAL A BUILDING PERMIT MUST BE SECURED FROM THE APPROPRIATE COUNTY OR CITY BUILDING INSPECTION DEPARTMENT.** The final inspection is to assure the system has been constructed according to the submitted plan and is consistent with good public health engineering practices. The acceptance of this plan and the approval of the final inspection, however, should not be construed to mean that the Galveston County Health District recommends, approves, certifies or guarantees On-site Sewage Facility Systems or their satisfactory performance. In the Galveston County area, due to the high water table, variation of water usage, soil and climatic conditions, On-site Sewage Facility Systems may not function satisfactorily at all times. This plan meets all State and local rules and laws including distance requirements.

* *[Handwritten Signature]*
 Property Owner

HEALTH DISTRICT USE ONLY

Authorization to Construct Approved/Disapproved by [Handwritten Signature] DR# 057799 Date 10-19-12
 Inspection Requested by [Handwritten Signature] Date Oct 25, 2012
 Date inspection requested for Oct 26, 2012 Time 10:00 am/pm
 Date inspection made Oct 26, 2012 Time 10:15 am/pm
 Construction Approved/Disapproved by [Handwritten Signature] DR# 6475 Date Nov 2, 2012
 Disapproval notice given to certified & regular mail to Date Nov 2, 2012
 REMARKS: Michael Robinson (Gulf Coast Aerobic Services)

Reinspection made on 6-11-2013 pump moved to dosing tank as designed by Garry Gana. Facility was not built, only concrete slab. Charges against installer were dismissed in JP 4 Court, Santa Fe, TX

5 ft pL buffer

○ = soil test site
by Site Evaluator

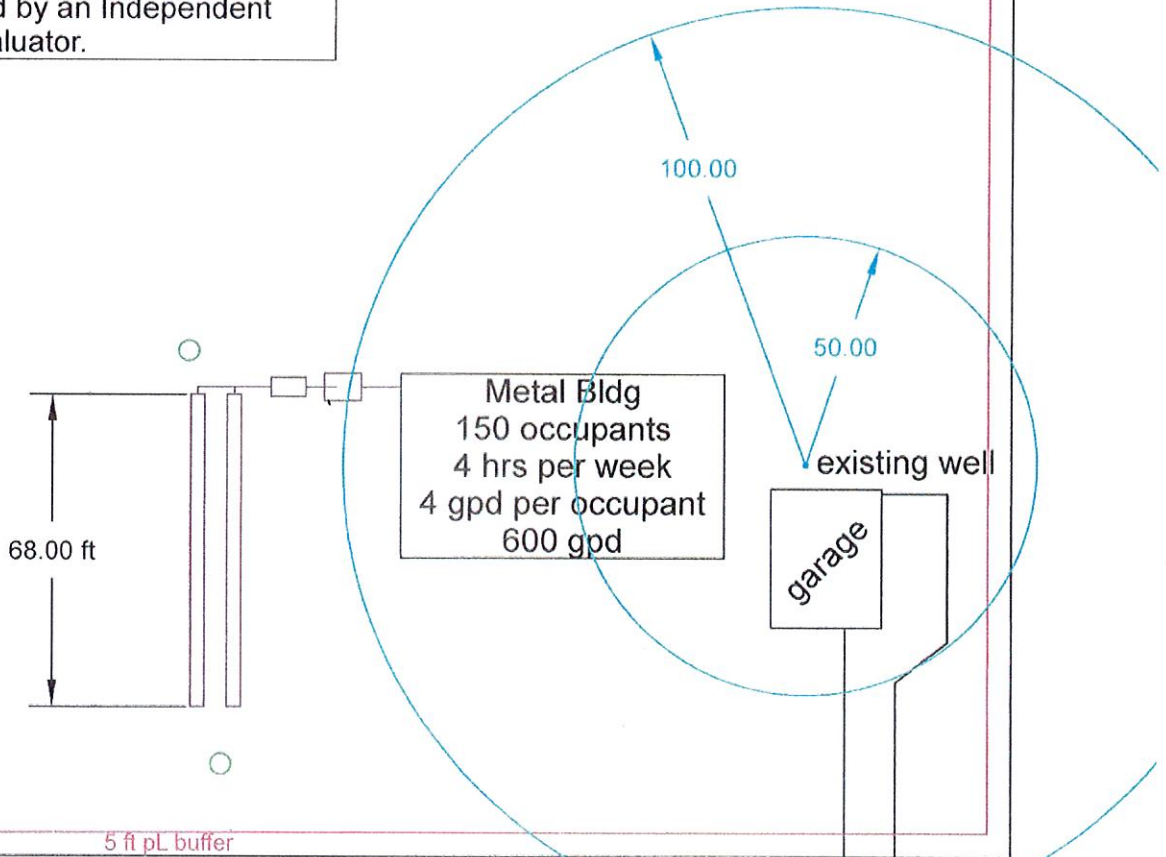
Per the Site Evaluator,
this property does not
lie within the 100 year
floodplain

Per the Site Evaluator,
this property exhibits less
than 1% slope across
its entire area

The designer, Garry Gana, R.S.,
has no first hand knowledge of
this property. The design is
based entirely on information
provided by an Independent
Site Evaluator.

5 ft pL buffer

5 ft pL buffer



5 ft pL buffer

7011 AVENUE E

scale = 40 : 1



G. Gana
10-16-12

PROPOSED OSSF DESIGN

PROPERTY OWNER: Lloyd Mosley

SITE ADDRESS: 7011 Avenue E
Santa Fe, Texas 77510

LEGAL DESCRIPTION: Lots 11 & 13, Greenbriar UnRec Sub, Sec 3

DESIGN PERAMETERS:

Structure: 150 occupant meeting hall w/ WSD. Used 4 hours per week. Each occupant rated at 4 gallons.
Estimated Event Flow: 600 gal
Daily Dosed Flow: 105 gpd
Application Rate: 0.20 gal/ ft²/day
Area Required: 394 ft² using 36 inch Leaching Chambers
Area Designed: 680 ft² using 36 inch Leaching Chambers

SYSTEM COMPONENTS:

Dosing Tank: 1000 gallons
Dosing Pump: Meyers SRM4 or equal
Dosing Timer: On 15 minutes, Off 23 hours, 45 minutes
Dosing Rate: 7 gallons per minute
Supply Manifold: 2 inch sch 40 pvc
Alarm: Audio/Visual required
Treatment Tanks: 750 gallons, in two compartments.
Drainfield: 136 feet of 36" wide Leaching Chambers
Trench Depth: 24 inches
Distance between Trenches: 5 feet

Friction Calculations

Total of 2" sch 40 PVC pipe 20 ft. max.
Flow 7 gpm
Friction Loss due to pipe 0.13 hd-ft./100ft. = 0.026 hd-ft.
Friction Loss including elbows & joints 0.026 hd-ft. x 1.2 = 0.31 head-ft.
Depth of tank 6 feet
Total Head Required 6.31 feet @ 7 gpm
Pump Required Myers SRM4 or equiv.

DOSING TANK DESCRIPTION:

Week Day	Gallons left in Dosing Tank at 4 am	Daily gallons In	Daily gallon Out
Sunday	600	0	105
Monday	495	0	105
Tuesday	390	0	105
Wednesday	285	0	105
Thursday	180	0	105
Friday	75	0	75
Saturday	0	600	0
Total	-----	600	600

1000 Gallon Pump Tank

Volume: 1028 gallons
Dimensions:
 L x W 91.0" x 60.0" internal
 depth below inlet 46.5"
 gallons per inch 23.6
Static Volume: 141.6 gallons
Storage Volume: 600.0 gallons
Reserve Capacity: 200.6 gallons
Float Settings (from bottom):
 pump off 6.00"
 pump on **minimum tether, timer controlled**
 alarm on 38.00"

This system is designed to treat **600** gallons/day based on estimated water usage. If the system is overloaded or not properly maintained, the installer and designer are not responsible. If assumed loading rates are exceeded; additional treatment capacity, disposal area, etc. will need to be added by the owner at his expense. This design is based solely upon site evaluation information provided by an independent site evaluator. The designer has no firsthand knowledge of the environmental and structural conditions at this location. This system must be installed and maintained in accordance with all standards set by the Texas Commission on Environmental Quality and Local Authorities. This designer does not represent or warrant the material, installation, operation or proper performance of this system for any period of time. Every attempt has been made to accurately depict the location of lines, plant, tanks, sprinklers, etc. Construction realities may necessitate minor design changes. Any major changes will be submitted prior to construction.

Seal



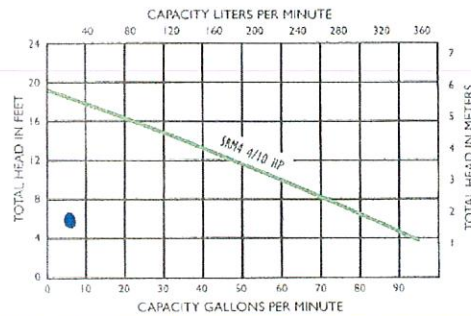
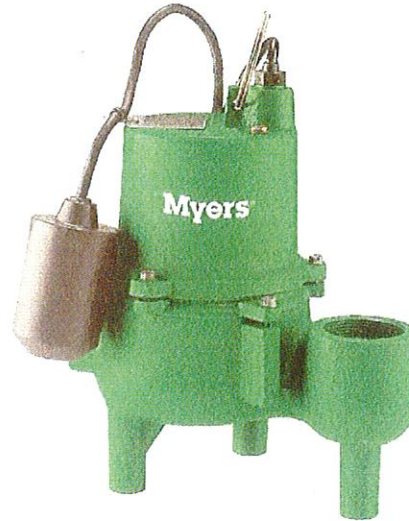
[Handwritten Signature]
 Garry Gana, R.S.
 10-16-12

SRM4

4/10 HP Sewage Pump

SPECIFICATIONS

Applications	Sewage, High-Capacity Sump, Effluent	
Capacities	95 GPM	360 LPM
Shut-off Head	19'	5.8 m
Solids Handling	2"	50.8 mm
Liquids Handling	septic effluent and sewage	
Intermittent Liquid Temp.	up to 140°F	up to 60°C
Motor Electrical Data	4/10 HP, shaded pole, 115V, 12A, 1Ø, 60Hz, 230V, 6A, 1Ø, 60Hz	
Acceptable pH Range	5-9	
Discharge, NPT	2"	50.8 mm
Housing	heavy cast iron	
Power Cord	10' (20' optional)	
Impeller	recessed, thermoplastic	
Volute Case	cast iron	
Shaft Seal	type IIA, carbon & ceramic	



FEATURES

- Power for versatile applications
- Residential septic tank sewage
- Large sumps
- ETL Listed
- Long-lasting performance
- Oil-filled motor for maximum heat dissipation and continuous bearing lubrication
- Recessed vortex impeller for free flow of liquids, solids up to 2" diameter
- Rotary shaft seal has carbon and ceramic faces for positive seal
- Thermal overload protection with automatic reset

M9029SSE

Galveston County Health District Site Evaluation Form

Date: 9-25-12

Client: MOSLEY

Address: 13814 VIEW MEADOW LN.

Phone: 832-778-6340

City, State Zip: HOUSTON, TX 77034

Legal Description:

Site Address: 7011 AVE E

City/Area: S.F.

Subdivision: GREENBRIAR UNRECORDED

Sec: 3 Lot: 4214 Block: Lot 11-1

Survey: ATTACHED

Abstract No: 48

Property Size: 256' x 328'

Acres: 1.822

Existing or proposed structure to be served: (Circle one) Existing Structure New Structure

Topography

Slope	Vegetation	Drainage
Flat: Under 2% <input checked="" type="checkbox"/> Note: If slope is flat a detailed drainage plan shall be provided on design.	Grass/Brush: <input type="checkbox"/>	Poor: <input type="checkbox"/> Note: If drainage is poor a detailed drainage plan shall be provided on design.
Slight: Under 4% <input type="checkbox"/>	Lightly Wooded: <input checked="" type="checkbox"/>	Adequate: <input checked="" type="checkbox"/>
Severe: Over 5% <input type="checkbox"/> Note: If slope is severe a Tape Survey with half foot contours should be provided with this form on design.	Heavily Wooded: <input type="checkbox"/>	Good: <input type="checkbox"/>
Other: <input type="checkbox"/>	Other: <input type="checkbox"/>	Other: <input type="checkbox"/>

Flood Hazard

Property is located:

Outside 100 year flood plain:

*In 100 year flood plain:

In 100 year flood plain and floodway:

Note: *Systems installed in flood plain must document how floatation concerns will be addressed on design. Attach a FEMA Flood Insurance Rate Map (FIRM) with property location identification or current survey with Flood Plain determination.

Soil Evaluation

(Based on at least two soil borings or two backhoe pits at opposite ends of the soil absorption area)

12"
24"
36"
48"

Profile Depth	Texture (USDA)	Color
	LOAM	DK. BROWN
	LOAM	DK. BROWN
	SANDY CLAY	BROWN
	SANDY CLAY	BROWN

(Minimum depth is two feet below proposed excavation)

12"
24"
36"
48"

Profile Depth	Texture (USDA)	Color
	LOAM	DK BROWN
	LOAM	BROWN
	SANDY CLAY	BROWN
	SANDY CLAY	TAN

(Minimum depth is two feet below proposed excavation)

Normal Textures (USDA) coarse sand/gravel, loamy sand, sandy loam, loam, sandy clay, clay loam, silty clay, clay.
 Note: Location of bore holes must be shown on design or on a separate sheet of paper.

EFFLUENT LOADING DETERMINATION

<u>Soil Class/Texture</u>	<u>Gallons per day per square foot</u>
Ia/Gravelly Soil >30% Gravel	To great for consideration >0.5
Ib/Sandy solis with <30% gravel	0.38
II/Sandy loams/loams	0.25
III/Sandy clay/clay loams	0.20
IV/Clay/silty clays	Unsuitable 0.10

Note: The soil evaluated for effluent loading should be below the maximum depth of application (normally between 36 and 48 inches.)

Indication of seasonal water table: (Circle One) Yes No
 Depth: _____

SOIL STRUCTURE

Class III soils must have soil structure analysis performed

Soil structure is:
 Massive: _____
 Blocky:
 Platy: _____

Note: Massive and platy soils are considered unsuitable with respect to structure

FINDINGS

Is soil suitable for standard subsurface disposal methods? (Circle One) Yes No
 Wastewater application rate 150 Gal/day/sq.ft.

I, MICHAEL ROBINSON, a registered Soil
 did personally conduct the site evaluation on 9-28-12
 (Date)

I certify that these results are true and correct for the property evaluated.

[Signature]
 Site Evaluator
9831
 Registration Number



WARRANTY DEED

THE STATE OF TEXAS :
: KNOW ALL MEN BY THESE PRESENTS:
COUNTY OF GALVESTON :

NOTICE OF CONFIDENTIALITY RIGHTS: IF YOU ARE A NATURAL PERSON, YOU MAY REMOVE OR STRIKE ANY OR ALL OF THE FOLLOWING INFORMATION FROM ANY INSTRUMENT THAT TRANSFERS AN INTEREST IN REAL PROPERTY BEFORE IT IS FILED FOR RECORD IN THE PUBLIC RECORDS: YOUR SOCIAL SECURITY NUMBER OR YOUR DRIVER'S LICENSE NUMBER.

That I, **BILLY W. SIMPSON**, of the County of GALVESTON and State of TEXAS, for and in consideration of the sum of **TEN AND NO/100 DOLLARS (\$10.00)** and other valuable consideration to the undersigned paid by the Grantee herein named, the receipt of which is hereby acknowledged, have **GRANTED, SOLD AND CONVEYED**, and by these presents do **GRANT, SELL AND CONVEY** unto **LLOYD MOSLEY** of _____, in and to the following described real property in **GALVESTON** County, Texas, to-wit:

The Surface only of part of Outlots 471 and 472, in the town of ALTA LOMA, in Galveston County, Texas, according to the map thereof recorded in Volume 113, Page 9, in the Office of the County Clerk of Galveston County, Texas, said tract being more particularly described by metes and bounds as follows:

STARTING at the Southwest corner of Said Outlot 472;

THENCE Northerly, along the East line of the 40 foot County Road, and the West line of said Outlot 472, a distance of 416.22 feet to the Place of Beginning;

THENCE in the Easterly direction and parallel with the South line of said Outlot 472, a distance of 320 feet to point for southeast corner;

THENCE in a Northerly direction and parallel with the West line of said Outlot 471 and 472, a distance of 256.22 feet to point for Northeast corner;

THIS DOCUMENT PREPARED
FROM INFORMATION FURNISHED
THIS OFFICE AND IS NOT BASED UPON
A TITLE SEARCH AS NONE WAS MADE
{00163436.PDF}{00150749.DOC}

THENCE in a Westerly direction and parallel to the South line of said Outlot 471, a distance of 320 feet to point for Northwest corner;

THENCE in a Southerly direction and parallel with the West line of said Outlots 471 and 472, a distance of 256.22 feet to point for Southwest corner and PLACE OF BEGINNING;

SAVE AND EXCEPT 10 feet off the West line of said tract, said 10 feet being previously deeded to Galveston County for widening of said 40 foot County Road.

This conveyance is made and accepted subject to the following matters, to the extent same are in effect at this time: Any and all restrictions, reservations, covenants, conditions and easements, if any, relating to the hereinabove described property, but only to the extent they are still in effect, shown of record in GALVESTON County, Texas, and to all zoning laws, regulations, and ordinances of municipal and/or other governmental authorities, if any, but only to the extent that they are still in effect, relating to the hereinabove described property.

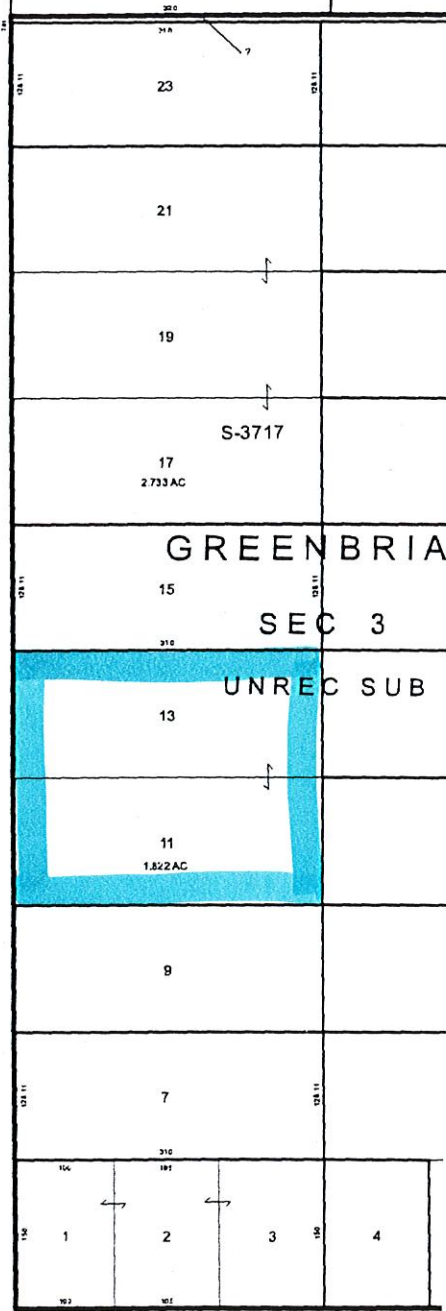
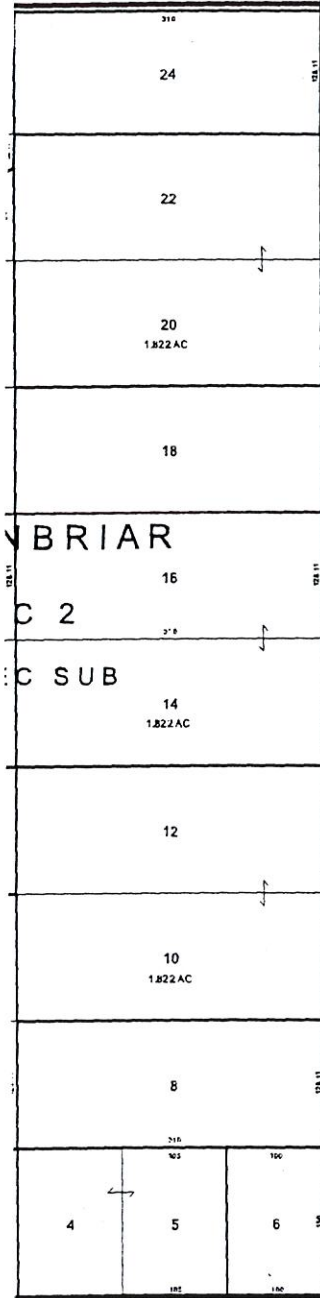
TO HAVE AND TO HOLD the above described premises, together with all and singular the rights and appurtenances thereto in anywise belonging unto the said **LLOYD MOSLEY**, his heirs, executors and administrators, and itself, its successors and assigns, forever; and I do hereby bind myself, my heirs and assigns, to WARRANT AND FOREVER DEFEND all and singular the said premises unto the said **LLOYD MOSLEY**, his heirs, executors and administrators, and itself, its successors and assigns, against every person whomsoever lawfully claiming or to claim the same or any part thereof.

EXECUTED this 13 day of August, 2012.

Billy W. Simpson
BILLY W. SIMPSON

490

AVE E



32ND ST

473

100

100

100

100



Galveston Central Appraisal District

9850 Emmett F. Lowry Expressway, Ste. A, Texas City, TX 77591, (866) 277-4725
Data on this Web site represents Certified 2012 Information



- [Home](#)
- [General Information](#)
- [News](#)
- [FAQ](#)

Property Detail Sheet (R194399)

 [History](#)
  [Plat Map](#)
  [GIS Map](#)
  [Datasheet](#)
 [Protest](#)

Searches

- [Property ID Search](#)
- [Account Search](#)
- [Owner Search](#)
- [Address Search](#)

Owner Information

Owner ID: **O417524**
 Owner Name: **SIMPSON, BILLY W**
 Owner Address: **PO BOX 144
 HITCHCOCK, TX 77563-0144**
 Property Address: **7011 AVE E
 SANTA FE, TX 77510**

Property Data

- [Detail Sheet](#)
- [History](#)
- [Datasheet](#)

Parcel Information

Legal Description: **ABST 48 PAGE 19 LOTS 11 & 13 (11-1) GREENBRIAR UNRECORDED SUB SEC 3**
 Neighborhood: **1095A(1095A - Alta Loma Outlots Pt A)**
 Acreage: **1.822**
 Cross Reference: **3717-0000-0011-000**
 Undivided Interest: **100%**

Other

- [Taxing Units](#)
- [Neighborhoods](#)
- [Abstracts](#)
- [Subdivisions](#)
- [ARB Rules](#)
- [ONLINE Protest Info](#)
- [New Homestead Info](#)
- [Tax Code](#)
- [Calendar](#)

Exemption Codes:

OA (Over 65)
HS (Homestead)
 Entity Codes: **GGA (Galveston County)**
J05 (Mainland College)
S17 (Santa Fe Isd)
RFL (Co Road & Flood)
F01 (Galv County Emergency Service #01)
D01 (Drainage #1)
 Deed Type: **Unrecorded Deed**
 Deed Book:
 Deed Page: **SEE DOCS**
 Map Page: **304-A**

Property Codes

- [County Tax Rates](#)
- [PROTEST VIDEO](#)
- [Legislative Updates](#)
- [Forms](#)
- [GIS Map Viewer](#)
- [County Tax Office](#)

Values Breakdown

	2012 Value
Land HS:	\$31,750 +
Land NHS:	\$0 +
Improvement HS:	\$14,070 +
Improvement NHS:	\$0 +
Ag Market:	\$0
Ag Use:	\$0 +
Timber Market:	\$0
Timber Use:	\$0 +
Appraised:	\$45,820 =
Homestead Cap:	\$3,854 -
Assessed:	\$41,966 =

- [GIS Shape Files](#)
- [PDF Map Index](#)

Improvements

ID	Type	SPTB	Segs	Value
----	------	------	------	-------

ADDRESS IS-

7011 Avenue E, SanteFe, TX 77510

The building will be 2800 sq. foot.

The building will hold a capacity of 150 people.

The building will only be used on Saturdays from 7-11pm.

There will be 2 restrooms that will be 6'x6'

The kitchen area will be 9'x12'

The kitchen will have a sink and refrigerator.

The sink will be used to wash hands and fill vases for the flowers.

The refrigerator will be used to keep floral cool and for water.

The tenants will not bring food, food will not be served.

will install new ON 7640

LC6993 - DEAD

entered

PANEL # <u>195C</u>		COUNTY OF GALVESTON		PERMIT # _____	
FIRM DATE <u>5-2-83</u>		BUILDING DEPARTMENT		DATE <u>4-11-12</u>	
BUILDING PERMIT APPLICATION					
LOCATION OF BUILDING <u>7011 Ave E - SE 7510</u>					
TYPE OF IMPROVEMENT NEW <input checked="" type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR <input type="checkbox"/> M.HOME <input type="checkbox"/> R.V. <input type="checkbox"/> LIVING <input type="checkbox"/> STORAGE <input type="checkbox"/> DETACHED STORAGE <input type="checkbox"/> DECK <input type="checkbox"/> Reception Hall					
OWNERSHIP <input checked="" type="checkbox"/> PRIVATE (INDIVIDUAL, CORPORATION, NON-PROFIT, ETC.) <input type="checkbox"/> PUBLIC (FEDERAL, STATE OR LOCAL GOV'T.)					
VALUE L SQUARE FT. <u>2800</u> * COST PER SQUARE FT. <u>30⁰⁰</u> = IMPROVEMENT VALUE <u>84000</u> D SQUARE FT. <u>0</u> * COST PER SQUARE FT. _____ = IMPROVEMENT VALUE _____ S SQUARE FT. <u>0</u> * COST PER SQUARE FT. _____ = IMPROVEMENT VALUE _____					
FEE TOTAL FEE <u>185 + 10 = 195.⁰⁰</u>			TOTAL IMPROVEMENT VALUE _____		
RESIDENTIAL SINGLE <input type="checkbox"/> MULTI <input type="checkbox"/> OTHER _____			NON-RESIDENTIAL TYPE: _____		
FOUNDATION SLAB <input checked="" type="checkbox"/> PILE <input type="checkbox"/> PIER & BEAM <input type="checkbox"/> OTHER _____			STRUCTURE WOOD <input type="checkbox"/> STEEL <input checked="" type="checkbox"/> MASONRY <input type="checkbox"/> CONCRETE <input type="checkbox"/> OTHER _____		
WATER SUPPLY PUBLIC <input checked="" type="checkbox"/> PRIVATE <input type="checkbox"/> INDIVIDUAL <input checked="" type="checkbox"/> GROUP <input type="checkbox"/>			SEWAGE DISPOSAL PUBLIC <input type="checkbox"/> PRIVATE <input type="checkbox"/> INDIVIDUAL <input checked="" type="checkbox"/> GROUP <input type="checkbox"/>		
SPECIFIC ROOMS (RESIDENTIAL) NUMBER OF BEDROOMS <u>0</u> NUMBER OF BATHROOMS: FULL <u>0</u> PARTIAL <u>2</u>					
FLOODPLAIN INFORMATION ZONE <u>C</u> REQUIRED ELEVATION <u>18"</u> ELEVATION CERTIFICATE <input type="checkbox"/>					
IDENTIFICATION					
OWNER		NAME <u>Lloyd Mosley</u>		PHONE # <u>H 932 738</u>	
		ADDRESS <u>3814 View Meadow Ln - Houston</u>		<u>6340</u>	
CONTRACTOR		NAME <u>Mosley</u>		H _____	
		ADDRESS _____			
COMMENTS <u>two half baths, a kitchen, a party room</u> <u>70 x 40 metal Bldg</u>					
If Applicable: Which version of IRC will be used? <u>REC 1491664</u>					
<p>Areas below BFB only to be used for parking, storage or building access. No mechanical, electrical or plumbing. The receipt, acceptance, and or deposit of a check, money order or any form of payment to the County does not constitute any approval of a permit.</p> <p>The issuance of this permit does not in any way commit the County to make any road improvements. The proposed improvement may not have access to an existing improved road that is maintained by the County. The applicant should fully investigate the road situation before signing this application and beginning construction.</p>					
**** It is a violation to begin work before a permit is issued. This is not a permit. ****					
APPLICANT		ADDRESS		DATE	
<u>Lloyd Mosley</u>		<u>Mosley</u>		<u>4/9/12</u>	
APPROVED BY	FEE PAID	DATE ISSUED	ISSUED BY	PROJECTED START DATE	
	CASH _____ CHECK _____				

Site Evaluation: _____
Building Application: _____
Drainage Plan: _____
Floodplain Information: _____

Health District OSSF Permit # ON 764C
City/County Building Permit # _____
Water Well Permit # _____
RPT# 44750

 **E-MAILED**
10-1-12

CK#3427
DEAD
GALVESTON COUNTY HEALTH DISTRICT
ON - SITE SEWAGE FACILITY
APPLICATION AND INSPECTION REPORT
NEW INSTALLATION
RENOVATION

- 735X*
- 1. PROPERTY OWNER'S NAME: Mosley Lloyd
 - 2. PERMANENT MAILING ADDRESS: 13814 View Meadow LN Houston TX 77034
 - 3. TELEPHONE NO. DURING DAY: () 832-738-16340
 - 4. SITE ADDRESS: 7011 Ave E Santa Fe TX 77570
 - 5. PROPERTY DESCRIPTION: Lot 11-1 Block _____ Sec 3 Subdivision: GREENPRAIR UNRECORDED
Lot Size: 2564378 **PROPERTY SURVEY OR SIMILAR DOCUMENT SHOULD BE ATTACHED.**
 - 6. SOURCE OF WATER: Private Well Public Water Supply (NAME OF SUPPLIER) _____
 - 7. SINGLE FAMILY RESIDENCE: No. Of Bedrooms 2 Living Area (sq. ft.) 51500
 - 8. ESTIMATED MAXIMUM DAILY WATER CONSUMPTION (gpd): 180
 - 9. WATER-SAVING DEVICES PROVIDED: (CIRCLE ONE) YES/NO
 - 10. COMMERCIAL/INSTITUTIONAL (including multi-family residences) TYPE: N/A
NO. OF EMPLOYEES/OCCUPANTS/UNITS: N/A DAYS OCCUPIED PER WEEK: N/A
 - 11. IS AN ORGANIZED SEWAGE COLLECTION WITHIN 300 FEET? YES NO
 - 12. Professional design required: Yes No If yes, professional design attached: Yes No
DESIGNER: _____ REGISTRATION NO. _____
PHONE NO. () _____ (PE or RS)
 - 13. INSTALLER: Michael Robinson REGISTRATION NO. 6955
PHONE NO. 409 925 2534

I. SEWER (House drain):
TYPE AND SIZE OF PIPE: 5CH 40/4" SLOPE OF SEWER PIPE TO TANK: 1/8"/1'

II. TREATMENT TANKS:
TANK #1 MAT'L Concrete NO. OF COMPARTMENTS 1 TYPE CONV SIZE 500 gals
#2 " L CONV 500
#3 _____
#4 _____

III. SITE EVALUATION
NOTE: Information worksheet must be attached for review to be completed.
Soil Class/Texture III SANDY CLAY Load Rate 20
Performed By M. Robinson Phone No. 409 925 2534

IV. DISPOSAL AREA
TYPE LEACHING CHAMBER MINIMUM AREA REQUIRED 135 L.W. FT.
EXCAVATION WIDTH 36" DISTANCE BETWEEN EXCAVATIONS 5' MIN.
TYPE/SIZE OF MEDIA N/A TYPE/DIAMETER OF PIPE 5DR 35/4"
TYPE OF BARRIER N/A EXCAVATION DEPTH 18"-36"
LANDSCAPE PLAN GRADED TO PROMOTE POSITIVE DRAINAGE

E-MAILED

DEAD

V PLOT PLAN

NOTE: This information must be attached for review to be completed.

Submit two (2) copies of the Galveston County Health District OSSF Application & Inspection Report. The plot on the above mentioned form must include:

- a. size and shape of lot or property,
- b. all structures on lot such as buildings, barns, pens, etc.,
- c. size and location of treatment tank(s),
- d. size and location of wastewater disposal area,
- e. distance of treatment tank(s) from house, property line, water well and wastewater disposal area,
- f. distance of wastewater disposal area from house, property line, water well and treatment tank(s),
- g. distance and direction to closest neighboring water well from treatment tank(s) and wastewater disposal area,
- h. distance and direction to closer open water such as ponds, lakes, streams, etc.

DESIGNERS SIGNATURE _____

REGISTRATION NO. _____

DATE _____

This notice must be read and signed before these construction plans will be approved. **AFTER APPROVAL A BUILDING PERMIT MUST BE SECURED FROM THE APPROPRIATE COUNTY OR CITY BUILDING INSPECTION DEPARTMENT.** The final inspection is to assure the system has been constructed according to the submitted plan and is consistent with good public health engineering practices. The acceptance of this plan and the approval of the final inspection, however, should not be construed to mean that the Galveston County Health District recommends, approves, certifies or guarantees On-site Sewage Facility Systems or their satisfactory performance. In the Galveston County area, due to the high water table, variation of water usage, soil and climatic conditions, On-site Sewage Facility Systems may not function satisfactorily at all times. This plan meets all State and local rules and laws including distance requirements.

* Floyd Morley
Property Owner

HEALTH DISTRICT USE ONLY

* Authorization to Construct Approved Disapproved by Jennifer Keeley DR# 05779 Date 9-28-12
 Inspection Requested by _____ Date _____
 Date inspection requested for _____ Time _____ am/pm
 Date inspection made _____ Time _____ am/pm
 Construction Approved/Disapproved by _____ DR# _____ Date _____
 Disapproval notice given to _____ Date _____

REMARKS: Existing building
10-1-12 Approval rescinded. Building will not be
a 2 BR Hab. It will be a Reception Hall.

* Authorization to construct is valid for 1 year from the date of approval. After 1 year, a new application must be submitted along with a new application fee before the OSSF may be installed.



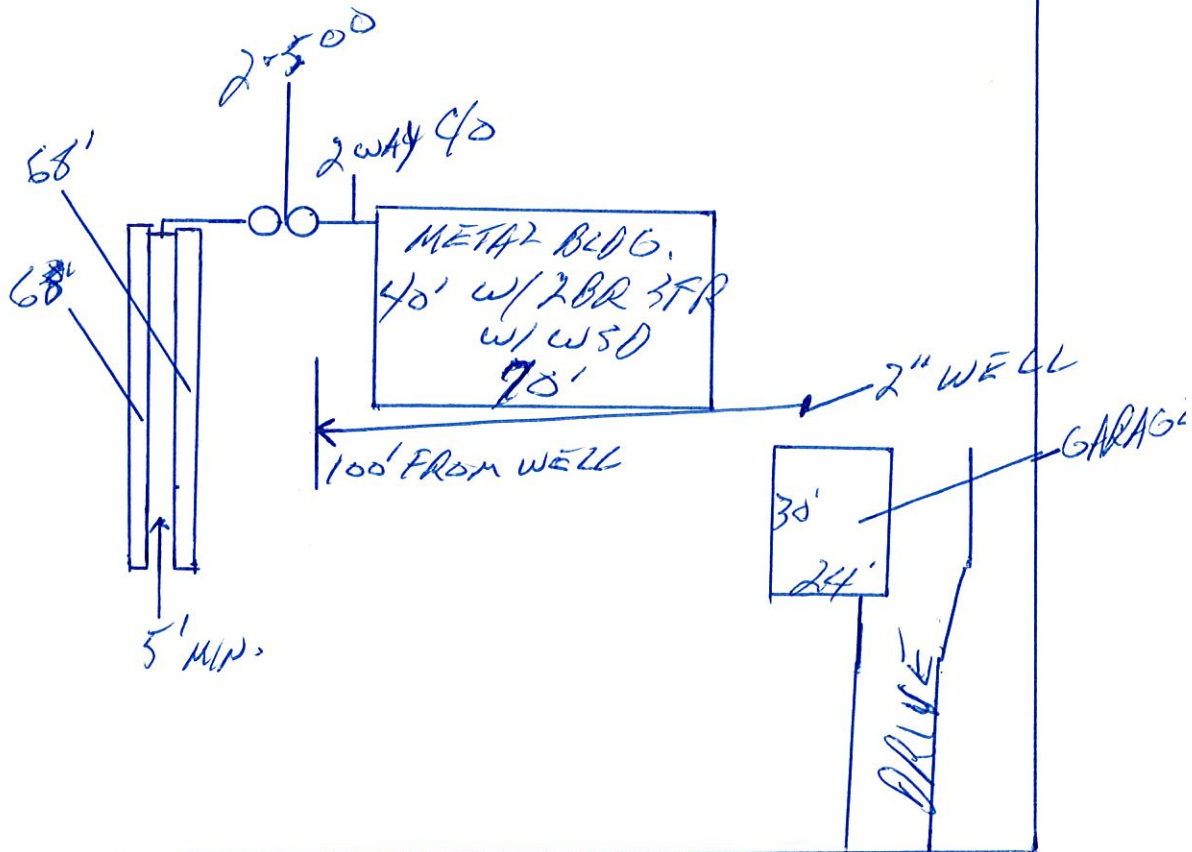
DEAD

256'

LLOYD MOSLEY
7011 AVE E
SANTAFE, TX 77511
2BR 3FR W/WSD
180 GPD

1" = 40'

320'



7011 AVE E.



New Well only

Site Evaluation: _____
Building Application: _____
Drainage Plan: _____
Floodplain Information: _____

Health District OSSF Permit# _____
City/County Building Permit# _____
Water Well Permit # LC13572

GALVESTON COUNTY HEALTH DISTRICT
ON - SITE SEWAGE FACILITY
APPLICATION AND INSPECTION REPORT

___ NEW INSTALLATION
___ RENOVATION

- PROPERTY OWNER'S NAME: Simpson Bill W
(LAST) (FIRST) (MIDDLE)
- PERMANENT MAILING ADDRESS: 7011 Ave. E. Santa Fe, N.M. 77510
(STREET/P O BOX) (CITY/STATE) (ZIP)
- TELEPHONE NO. DURING DAY: (409) 925-2772
- SITE ADDRESS: 7011 Ave E off 32nd Santa Fe, N.M. 77510
(STREET) (CITY/STATE) (ZIP)
- PROPERTY DESCRIPTION: Lot _____ Block _____ Sec _____ Subdivision: _____
Lot Size: 220' x 310' **PROPERTY SURVEY OR SIMILAR DOCUMENT SHOULD BE ATTACHED.**
- SOURCE OF WATER: ___ Private Well ___ Public Water Supply _____
(NAME OF SUPPLIER)
- SINGLE FAMILY RESIDENCE: No. Of Bedrooms _____ Living Area (sq. ft.) _____
- ESTIMATED MAXIMUM DAILY WATER CONSUMPTION (gpd):** _____
WATER-SAVING DEVICES PROVIDED: (CIRCLE ONE) YES/NO
- COMMERCIAL/INSTITUTIONAL (including multi-family residences) TYPE: _____
NO. OF EMPLOYEES/OCCUPANTS/UNITS: _____ DAYS OCCUPIED PER WEEK: _____
- IS AN ORGANIZED SEWAGE COLLECTION WITHIN 300 FEET? YES ___ NO ___
- Professional design required: ___ Yes ___ No If yes, professional design attached: ___ Yes ___ No
DESIGNER: _____ REGISTRATION NO. _____
PHONE NO.() _____ (PE or RS)
- INSTALLER: _____ REGISTRATION NO. _____
PHONE NO.() _____

BE
BY
DATE

- SEWER (House drain):
TYPE AND SIZE OF PIPE: _____ SLOPE OF SEWER PIPE TO TANK: _____
- TREATMENT TANKS:
TANK #1 MAT'L. _____ NO. OF COMPARTMENTS _____ TYPE _____ SIZE _____ gals
#2 _____
#3 _____
#4 _____

III. SITE EVALUATION
NOTE: Information worksheet must be attached for review to be completed.
Soil Class/Texture _____ Load Rate _____
Performed By _____ Phone No() _____

- DISPOSAL AREA
TYPE _____ MINIMUM AREA REQUIRED _____
EXCAVATION WIDTH _____ DISTANCE BETWEEN EXCAVATIONS _____
TYPE/SIZE OF MEDIA _____ TYPE/DIAMETER OF PIPE _____
TYPE OF BARRIER _____ EXCAVATION DEPTH _____
LANDSCAPE PLAN _____

V. PLOT PLAN

NOTE: This information must be attached for review to be completed.

1. Submit two (2) copies of the Galveston County Health District OSSF Application & Inspection Report. The plot on the above mentioned form must include:
 - a. Size and shape of lot or property,
 - b. All structures on lot such as buildings, barns, pens, etc,
 - c. Size and location of treatment tank(s),
 - d. Size and location of wastewater disposal area,
 - e. Distance of treatment tank(s) from house, property line, water well and wastewater disposal area,
 - f. Distance of wastewater disposal area from house, property line, water well and treatment tank(s),
 - g. Distance and direction to closest neighboring water well from treatment tank(s) and wastewater disposal area,
 - h. Distance and direction to closer open water such as ponds, lakes, streams, etc.

DESIGNERS SIGNATURE

REGISTRATION NO.

DATE

This notice must be read and signed before these construction plans will be approved. **AFTER APPROVAL A BUILDING PERMIT MUST BE SECURED FROM THE APPROPRIATE COUNTY OR CITY BUILDING INSPECTION DEPARTMENT.** The final inspection is to assure the system has been constructed according to the submitted plan and is consistent with good public health engineering practices. The acceptance of this plan and the approval of the final inspection, however, should not be construed to mean that the Galveston County Health District recommends, approves, certifies or guarantees On-site Sewage Facility Systems or their satisfactory performance. In the Galveston County area, due to the high water table, variation of water usage, soil and climatic conditions, On-site Sewage Facility Systems may not function satisfactorily at all times. This plan meets all State and local rules and laws including distance requirements.

Billy W. Simpson

Property Owner

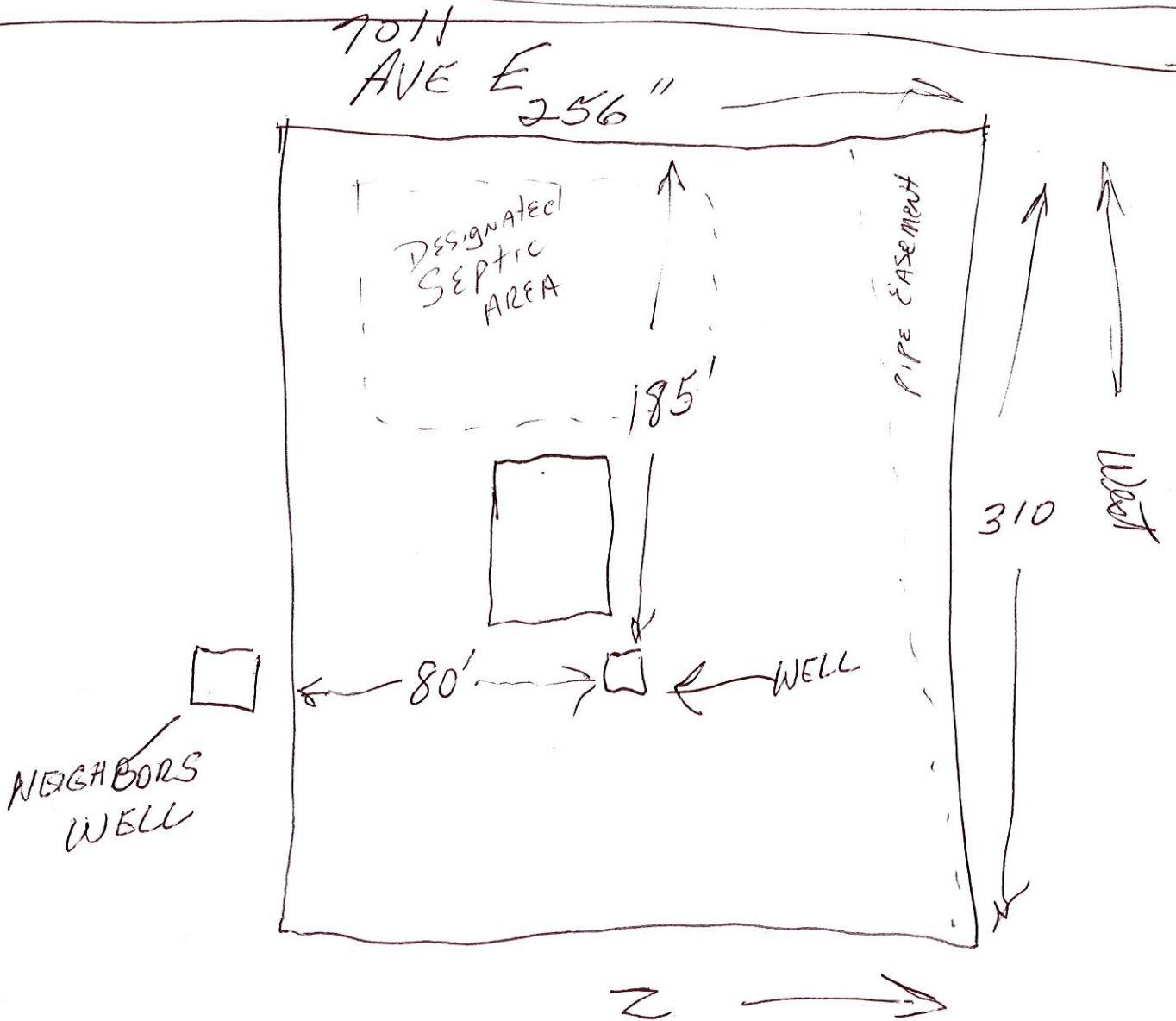
HEALTH DISTRICT USE ONLY

Plot plan: Approved/Disapproved by _____	Date _____
Inspection Requested by _____	Date _____
Date inspection requested for _____	Time _____ am/pm
Date inspection made _____	Time _____ am/pm
Construction Approved/Disapproved by _____	Date _____
Disapproval notice given to _____	Date _____

REMARKS: *Well only on 9-8-00 g. Peckley*

PLEASE DRAW PLOT PLAN BELOW
TO SCALE YES NO

SCALE _____



PLEASE SKETCH DIRECTIONS TO PROPOSED CONSTRUCTION SITE IN SPACE BELOW.



GALVESTON COUNTY HEALTH DISTRICT
PRIVATE WASTEWATER DISPOSAL SYSTEM INSPECTION REPORT

HEALTH DISTRICT PERMIT # LC 6993
CITY/COUNTY BUILDING PERMIT # _____
WATER WELL PERMIT # LC 6993

C.L. Evans
Name of Property Owner
110 I-45
Current Address
Galveston TX. 77554
City State Zip
935-8989
Telephone

[Signature]
Septic Tank Installer
Current Address
City State Zip
Telephone

Well Driller
Current Address
City State Zip
Telephone

DESCRIPTION OF PROPERTY: City: Alta Loma Subdivision: _____
Lot Size: Width: 256 ft. Depth: 320 ft. Block: _____ Lot: _____
Is the construction: new existing renovation transfer mobile home
Number of persons 2 Bedrooms 2 Is this a ? business residence

SEPTIC TANK(S): Number of tanks 2 Concrete yes Other _____
Clean-out: inlet line between house and tank discharge line between last tank & field
Tank 1: Number compartments 1 Thickness: wall 3 in. lid 3 in. reinforced? yes
Inlet below top of tank 4 in. Outlet below top of tank 8 in. Liquid capacity 500 gal.
Tank 2: Number compartments 1 Thickness: wall 3 in. lid 3 in. reinforced? yes
Inlet below top of tank 6 in. Outlet below top of tank 8 in. Liquid capacity 500 gal.

GREASE TRAP: Number of compartments _____ Liquid capacity _____ gal. Concrete _____ Other _____
Clean-out: inlet between house and trap discharge line between trap and septic tank _____
Inlet below top of tank _____ in. Outlet extension above bottom of tank _____

DRAINFIELD: Pipe material: PVC Pipe size: 4 in.
Trench: Width 36 in. Depth 8 in. Total length 17 ft. Total square feet 513
Distance between trenches 9 ft. Grade level (Aggregate type 1/2" - 2 1/2" washed gravel)
Aggregate under pipe 6 in. Aggregate over top of pipe 2 in. Total cu. yds. 19

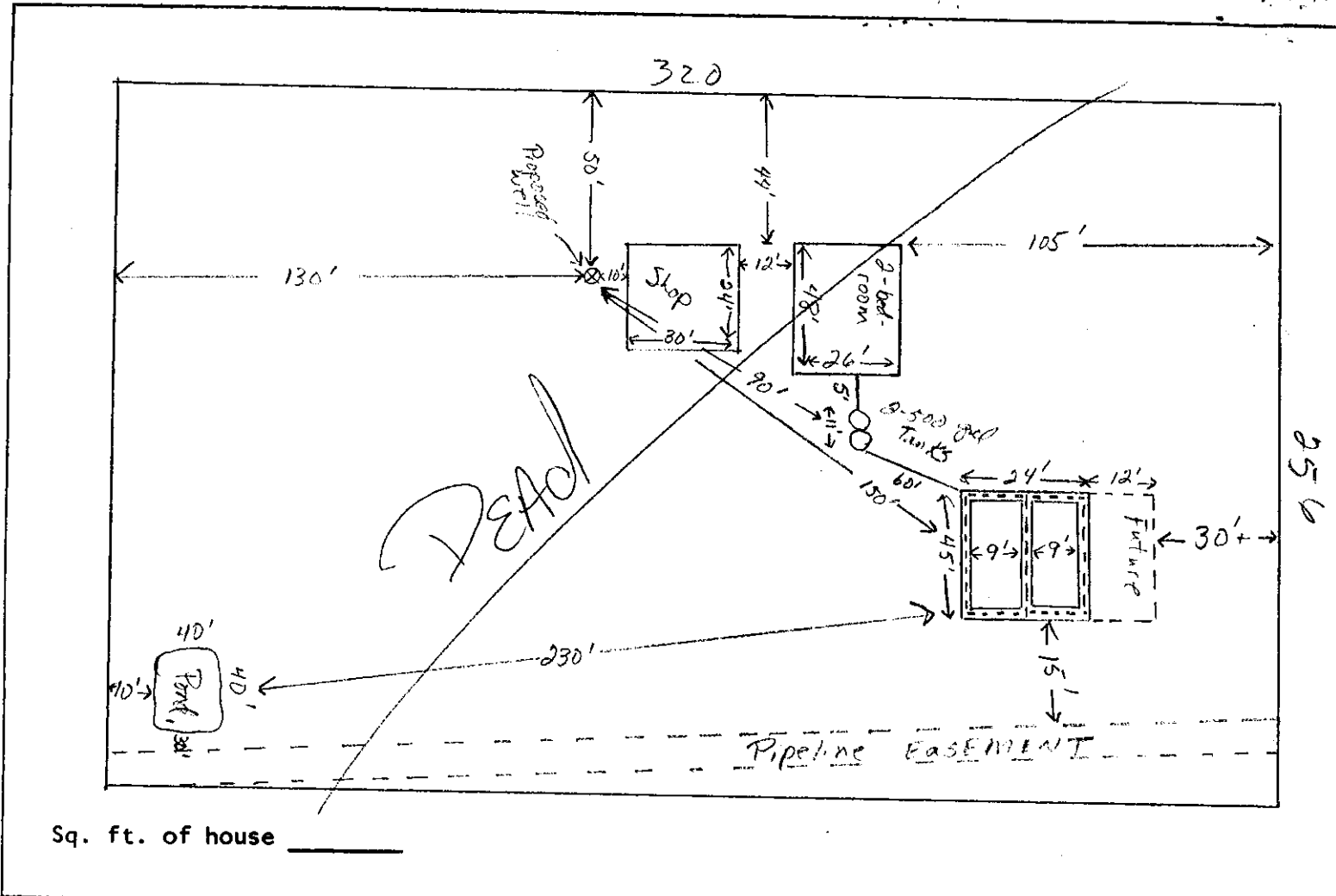
DISTANCES FROM YOUR:	Foundation	Property line	Open Water	Water Well	Nearest Well
Septic Tank:	<u>5</u> ft.	<u>50 +</u> ft.	<u>230</u> ft.	<u>90</u> ft.	<u>90</u> ft.
Drainfield:	<u>20 +</u> ft.	<u>70 +</u> ft.	<u>230</u> ft.	<u>150</u> ft.	<u>150</u> ft.

HEALTH DEPARTMENT USE ONLY

Inspection requested by: _____ Date: _____
Date inspection requested for: _____ Time: _____ am/pm
Date inspection made: _____ Time: _____ am/pm
Plot Plan: Approved/Disapproved J. Garcia Date: 10-30-89
Construction: Septic Tank - Approved/Disapproved _____ Date: _____
Disapproval notice given to: _____ Date: _____

REMARKS: Septic System sized for a 2-bedroom home. The shop will not have any plumbing in it. (JG), 10-30-89.

PLOT PLAN OF PROPOSED CONSTRUCTION--show lot size, house placement, wells, septic tanks, etc

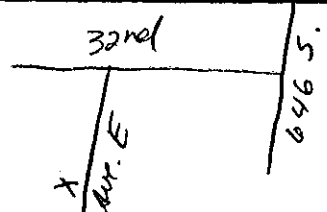


Sq. ft. of house _____

PLEASE SKETCH DIRECTIONS TO PROPOSED CONSTRUCTION SITE IN THIS SPACE

Give street address 7011 Ave. E - Alta Loma.

Adjacent property address _____



Percolation Rate: 31 - 45 min/in Zone/Lot: _____

This is a Class IV property. Please read and sign the Galveston County Private Wastewater Land Suitability Notice. This notice must be read and signed before these construction plans will be approved.

The final inspection is to assure the system has been constructed according to the submitted plan and is consistent with good public health engineering practices. The acceptance of this plan and the approval of the final inspection, however, should not be construed to mean that the Galveston County Health District recommends, approves, certifies, or guarantees septic tank systems or their satisfactory performance. In the Galveston County area due to the high water table, variation of water usage, soil and climatic conditions, septic tank systems cannot be expected to function properly at all times.

X _____
Property Owner

Site Evaluation: _____
Building Application: _____
Drainage Plan: _____
Floodplain Information: _____

Health District OSSF Permit# ON7640
City/County Building Permit# _____
Water Well Permit # _____
rpt# _____

002695
GALVESTON COUNTY HEALTH DISTRICT
ON - SITE SEWAGE FACILITY
APPLICATION AND INSPECTION REPORT

 **E-MAILED**
10-19-12

NEW INSTALLATION
 RENOVATION

1. PROPERTY OWNER'S NAME: Mosley Lloyd
2. PERMANENT MAILING ADDRESS: 13814 View Meadow Ln, Houston TX 77034
(LAST) (FIRST) (MIDDLE)
(STREET/P O BOX) (CITY/STATE) (ZIP)
3. TELEPHONE NO. DURING DAY: (832) 738-6340
4. SITE ADDRESS: 7011 Ave F Santa Fe TX 77510
(STREET) (CITY/STATE) (ZIP)
5. PROPERTY DESCRIPTION: Lot 11 & 13 Block _____ Sec 3 Subdivision: Greenbriar Un Recorded
Lot Size: 256x320 PROPERTY SURVEY OR SIMILAR DOCUMENT SHOULD BE ATTACHED.
6. SOURCE OF WATER: Private Well _____ Public Water Supply _____
(NAME OF SUPPLIER)
7. SINGLE FAMILY RESIDENCE: No. Of Bedrooms _____ Living Area (sq. ft.) _____
8. ESTIMATED MAXIMUM DAILY WATER CONSUMPTION (gpd): 600
WATER-SAVING DEVICES PROVIDED: (CIRCLE ONE) YES/NO
9. COMMERCIAL/INSTITUTIONAL (including multi-family residences) TYPE: Meeting Hall
NO. OF EMPLOYEES/OCCUPANTS/UNITS: 150 DAYS OCCUPIED PER WEEK: 1 day per week for 4 hrs
10. IS AN ORGANIZED SEWAGE COLLECTION WITHIN 300 FEET? YES NO
11. Professional design required: Yes _____ No If yes, professional design attached: Yes _____ No
DESIGNER: Garry Gana, R.S. REGISTRATION NO. 3207
PHONE NO. (281) 235-4201 (RS)
12. INSTALLER: Mike Robinson REGISTRATION NO. 6955
PHONE NO. (409) 925 2534

735X

I. SEWER (House drain):

TYPE AND SIZE OF PIPE: 3 or 4 inch pvc SLOPE OF SEWER PIPE TO TANK: 1/8" / 1'

II. TREATMENT TANKS:

TANK #	MAT'L	NO. OF COMPARTMENTS	TYPE	SIZE	gals
#1	<u>conc</u>	<u>1</u>	<u>Dosing</u>	<u>1000</u>	
#2	<u>conc</u>	<u>2</u>	<u>Septic</u>	<u>750</u>	
#3					
#4					

III. SITE EVALUATION

NOTE: Information worksheet must be attached for review to be completed.

Soil Class/Texture III Sandy Clay Load Rate 0.20
Performed By Garry Gana Mike Robinson Phone No (281) 235-4201 409-925 2534

IV. DISPOSAL AREA

TYPE Leaching Chamber MINIMUM AREA REQUIRED 394 ft²
EXCAVATION WIDTH 36" DISTANCE BETWEEN EXCAVATIONS 5 ft
TYPE/SIZE OF MEDIA _____ TYPE/DIAMETER OF PIPE 36" Leaching Chamber
TYPE OF BARRIER _____ EXCAVATION DEPTH 24"
LANDSCAPE PLAN see design

99

E-MAILED



V. PLOT PLAN

NOTE: This information must be attached for review to be completed.

1. Submit two (2) copies of the Galveston County Health District OSSF Application & Inspection Report. The plot on the above mentioned form must include:

- a. Size and shape of lot or property,
- b. All structures on lot such as buildings, barns, pens, etc.
- c. Size and location of treatment tank(s).
- d. Size and location of wastewater disposal area.
- e. Distance of treatment tank(s) from house, property line, water well and wastewater disposal area.
- f. Distance of wastewater disposal area from house, property line, water well and treatment tank(s).
- g. Distance and direction to closest neighboring water well from treatment tank(s) and wastewater disposal area.
- h. Distance and direction to closest open water such as ponds, lakes, streams, etc.

[Handwritten Signature]
DESIGNERS SIGNATURE

3207
REGISTRATION NO.

~~10-11-12~~
DATE Revised
10-16-12

This notice must be read and signed before these construction plans will be approved. **AFTER APPROVAL A BUILDING PERMIT MUST BE SECURED FROM THE APPROPRIATE COUNTY OR CITY BUILDING INSPECTION DEPARTMENT.** The final inspection is to assure the system has been constructed according to the submitted plan and is consistent with good public health engineering practices. The acceptance of this plan and the approval of the final inspection, however, should not be construed to mean that the Galveston County Health District recommends, approves, certifies or guarantees On-site Sewage Facility Systems or their satisfactory performance. In the Galveston County area, due to the high water table, variation of water usage, soil and climatic conditions, On-site Sewage Facility Systems may not function satisfactorily at all times. This plan meets all State and local rules and laws including distance requirements.

* *[Handwritten Signature]*
Property Owner

HEALTH DISTRICT USE ONLY

Authorization to Construct Approved/Disapproved by *[Handwritten Signature]* DR# 057799 Date 10-19-12
 Inspection Requested by _____ Date _____
 Date inspection requested for _____ Time _____ am/pm
 Date inspection made _____ Time _____ am/pm
 Construction Approved/Disapproved by _____ DR# _____ Date _____
 Disapproval notice given to _____ Date _____

REMARKS: _____

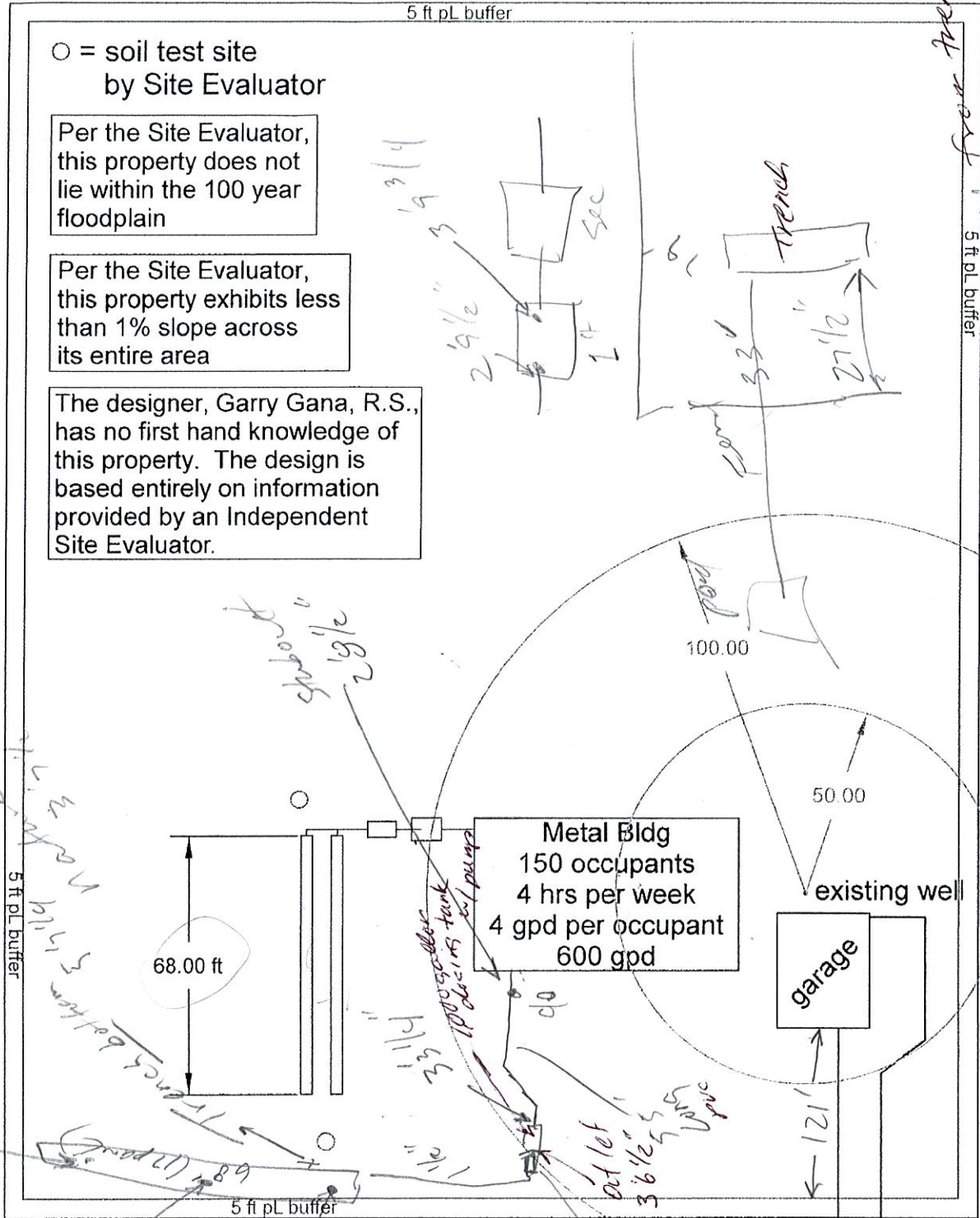
5 ft pL buffer

○ = soil test site
by Site Evaluator

Per the Site Evaluator,
this property does not
lie within the 100 year
floodplain

Per the Site Evaluator,
this property exhibits less
than 1% slope across
its entire area

The designer, Garry Gana, R.S.,
has no first hand knowledge of
this property. The design is
based entirely on information
provided by an Independent
Site Evaluator.



5 ft pL buffer

68.00 ft

100.00

50.00

Metal Bldg
150 occupants
4 hrs per week
4 gpd per occupant
600 gpd

existing well

Garage

121'

5 ft pL buffer

7011 AVENUE E

scale = 40 : 1



10-16-12

1 1/2
3 3
2 1/2
1 1/2

4 1/2 = 1.2
17 2.1
16

5 ft pL buffer from trench

167 inch tank
110 inch tank

Handwritten notes on the left side of the plan, including '167 inch tank' and '110 inch tank'.

Handwritten notes at the bottom right, including 'double dump' and 'drain'.

PROPOSED OSSF DESIGN

PROPERTY OWNER: Lloyd Mosley
SITE ADDRESS: 7011 Avenue E
Santa Fe, Texas 77510
LEGAL DESCRIPTION: Lots 11 & 13, Greenbriar UnRec Sub, Sec 3

DESIGN PERAMETERS:

Structure: 150 occupant meeting hall w/ WSD. Used 4 hours per week. Each occupant rated at 4 gallons.
Estimated Event Flow: 600 gal
Daily Dosed Flow: 86 gpd
Application Rate: 0.20 gal/ ft²/day
Area Required: 322.5 ft² using 36 inch Leaching Chambers
Area Designed: 340 ft² using 36 inch Leaching Chambers

$0.75A / (wt^2)$
 $0.75 \times (3,000) / 5 =$

SYSTEM COMPONENTS:

Dosing Tank: 1000 gallons *first*
Dosing Pump: Meyers SRM4 or equal
Dosing Timer: On 15 minutes, Off 23 hours, 45 minutes
Dosing Rate: 5.75 gallons per minute
Supply Manifold: 2 inch sch 40 pvc
Alarm: Audio/Visual required
Treatment Tanks: 750 gallons, in two compartments.
Drainfield: 68 feet of 36" wide Leaching Chambers
Trench Depth: 24 inches
Distance between Trenches: 5 feet

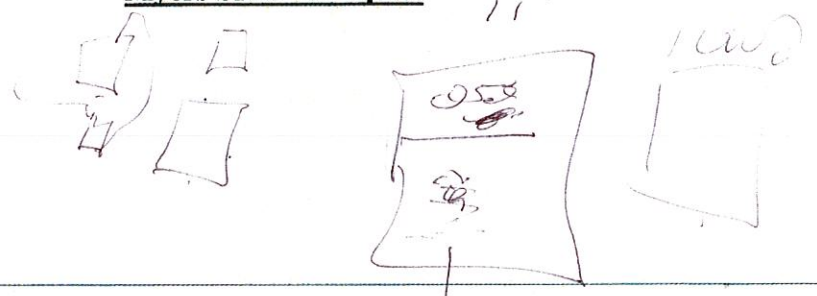
250 side pump
 $3900 / 2250$

Friction Calculations

Total of 2" sch 40 PVC pipe 50 ft. max.
Flow 5.7 gpm
Friction Loss due to pipe 0.13 hd-ft./100ft. = 0.065 hd-ft.
Friction Loss including elbows & joints 0.065 hd-ft. x 1.2 = 0.078 head-ft.
Depth of tank 6 feet
Total Head Required 6.1 feet @ 5.7 gpm
Pump Required Myers SRM4 or equiv.

$\frac{600}{0.2} = 3,000$
 $\frac{600}{1.5} = 394$

$\frac{50}{10} = 5$
 $\frac{600}{x} = 394$
 $1,522$



DOSING TANK DESCRIPTION:

Week Day	Gallons left in Dosing Tank at 4 am	Daily gallons In	Daily gallon Out
Sunday	600	0	86
Monday	514	0	86
Tuesday	428	0	86
Wednesday	342	0	86
Thursday	256	0	86
Friday	170	0	86
Saturday	84	600	84
Total	----	600	600

1000 Gallon Pump Tank

Volume:	1028 gallons
Dimensions:	
L x W	91.0" x 60.0" internal
depth below inlet	46.5"
gallons per inch	23.6
Static Volume:	141.6 gallons
Storage Volume:	600.0 gallons
Reserve Capacity:	200.6 gallons
Float Settings (from bottom):	
pump off	6.00"
pump on	minimum tether, timer controlled
alarm on	38.00"

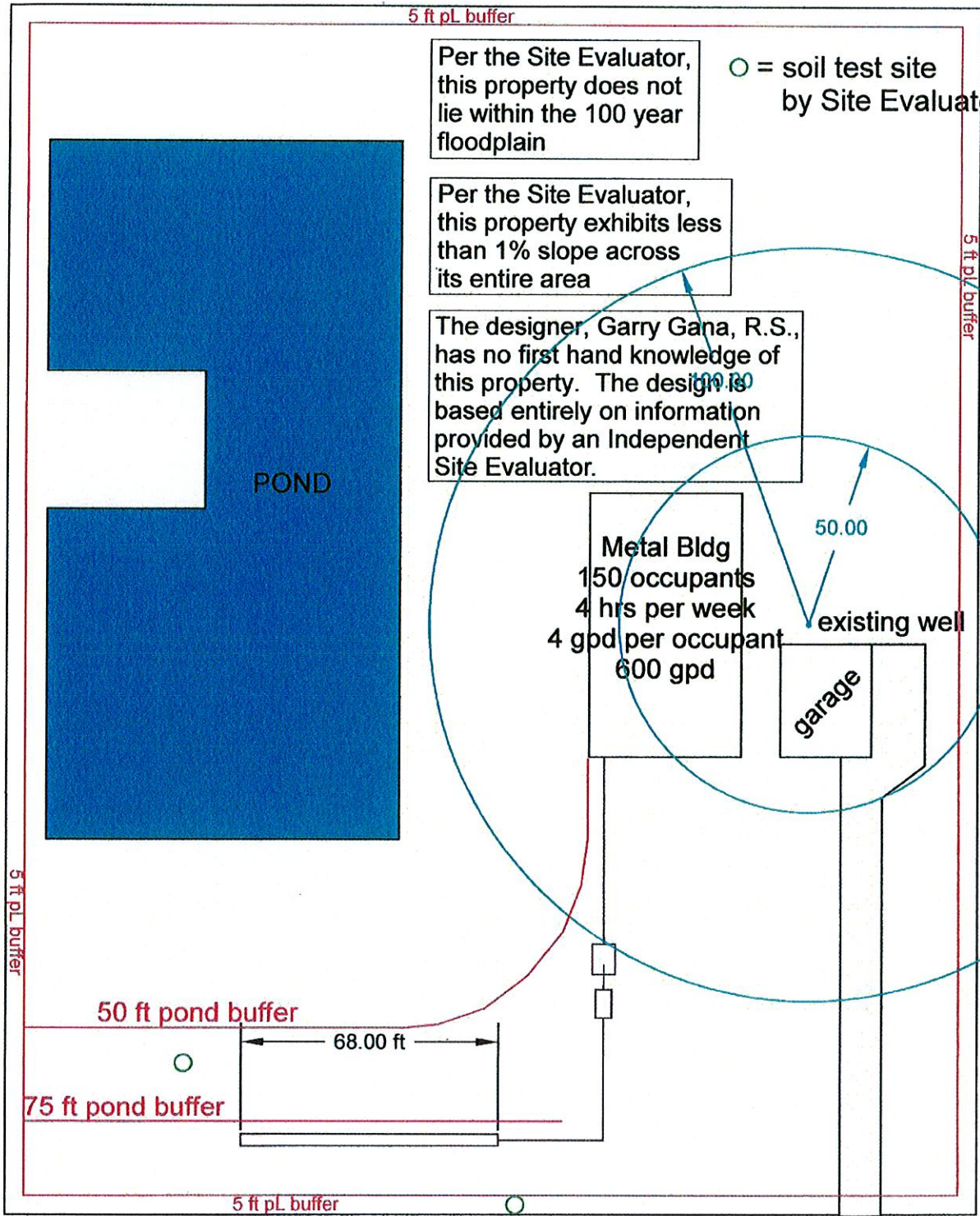
This system is designed to treat **600** gallons/day based on estimated water usage. If the system is overloaded or not properly maintained, the installer and designer are not responsible. If assumed loading rates are exceeded; additional treatment capacity, disposal area, etc. will need to be added by the owner at his expense. This design is based solely upon site evaluation information provided by an independent site evaluator. The designer has no firsthand knowledge of the environmental and structural conditions at this location. This system must be installed and maintained in accordance with all standards set by the Texas Commission on Environmental Quality and Local Authorities. This designer does not represent or warrant the material, installation, operation or proper performance of this system for any period of time. Every attempt has been made to accurately depict the location of lines, plant, tanks, sprinklers, etc. Construction realities may necessitate minor design changes. Any major changes will be submitted prior to construction.

Seal



Garry Gana, R.S.

*Revised
10-29-12
AS Built*



7011 AVENUE E

scale = 40 : 1



[Handwritten Signature]
Revised
10-29-12
AS BUILT

IN THE NAME AND BY THE AUTHORITY OF THE STATE OF TEXAS:

BEFORE ME, the undersigned authority, on this day personally appeared Antonio Contreras, Galveston County Health District who, after being by me duly sworn, on oath deposes and says: That heretofore, to-wit, on or about the 8th day of May, A.D., 2013, and before the making and filing of this Complaint, in the County of Galveston and State of Texas, Michael Robinson, of 12547 D Bar Dr. , Santa Fe, TX 77510, did then unlawfully violate* Chapter 7 Texas water Code. Sec. 7.173(a) A person commits an offense if the person violates a rule adopted by the commission under Chapter 366, Health and Safety Code, or an order or resolution adopted by an authorizes agent under Subchapter C, Chapter 366, Health and Safety Code by: not constructing the OSSF that has been authorized by the permitting authority for the specific location identified in the site evaluation at 7011 Avenue E, Santa Fe, TX 77510 against the peace and dignity of the State.

 Antonio Contreras Complainant

Sworn to and subscribed before me, this _____ day of _____, A.D. 20 _____

 NOTARY PUBLIC, IN AND FOR THE STATE
 OF TEXAS
 COMMISSION EXPIRES: _____

 JUSTICE OF THE PEACE, PCT. 4

*Here describe specifically the offence committed

Galveston County, Texas

D-246

No. _____

COMPLAINT

THE STATE OF TEXAS

vs.

Mr. Michael Robinson

Site: 12547 D Bar Dr.
Santa Fe, TX 77510
Mailing: P.O. Box 1684
Santa Fe, TX 77510

Filed _____ day of _____, 20____

Justice of the Peace, Precinct No.4

Galveston County, Texas

WITNESSES:

Antonio Contreras

Galveston County Health District

(409)938-2320

*Charges dismissed
on June 11, 2013*

GALVESTON COUNTY HEALTH DISTRICT
 OSSF CHECKLIST (STANDARD/GRAVELESS)

PERMIT NO. 7640 DATE OF ISSUE Oct 19, 2012

Property Owner: <u>Lloyd Mosley</u>	Installer: <u>Michael Robinson</u>		
Address: <u>13814 View Meadow Lane</u>	Address:		
Telephone No. <u>(832) 738-6340</u>	Telephone No. <u>(409) 925-2534</u>		
Construction site location / legal description: <u>7011 Ave E Lot 11 & 13 Greenbriar Unrecorded Santa Fe, TX 77510</u>	Certificate No. <u>6955</u>		
	Classification: Installer I <input type="checkbox"/> or Installer II <input checked="" type="checkbox"/> <u>dosing tank</u>		
	Septic Tank: Required (Gallon) <u>500</u> Actual <u>4,000</u> <u>750</u> <u>750</u>		
Description of Structure: <u>Metal Structure</u> (please note if structure not present)	Absorption Area Required: <u>394</u> Ft ²		
Soil Type:	Absorption Area Installed: <u>340</u> Ft ²		
I. SEWER (Structure to Pretreatment Tank)	Y	N	N/A
1. Proper pipe from structure to tank. SDR 26 / <u>Schedule 40</u>	<input checked="" type="checkbox"/>		
2. Slope of sewer no less than 1/8" per foot of pipe.	<input checked="" type="checkbox"/>		
3. Two-way Cleanout(s) provided.	<input checked="" type="checkbox"/>		
II. SEPTIC TANK - Tank permanently marked with manufacturer's name, address and tank capacity near outlet. Flow direction clearly marked (in and out).	<input checked="" type="checkbox"/>		
1. Tank set in 4" of select backfill.			<input checked="" type="checkbox"/>
2. Inlet and outlet "T" properly attached to tank with inlet liquid penetration of 6" and outlet penetration of 1/4 to 1/2 of liquid depth.	<input checked="" type="checkbox"/>		
3. Flowline of inlet pipe 3" higher than outlet of pretreatment tank.	<input checked="" type="checkbox"/>		
4. Riser and manhole provided on tank buried more than 12".			<input checked="" type="checkbox"/>
5. Tank lid properly sealed to tank. <u>#1 Tank 4,000 gallons</u> <u>#2 Tank (2 compartments) 750 gallons</u>	<input checked="" type="checkbox"/>		
6. Approved Tank: _____ Gallons Material: <u>concrete</u>			
7. If single tank are two compartments provided?			<input checked="" type="checkbox"/>
III. DRAINFIELD	Y	N	N/A
1. Excavation bottom \geq 12" lower than outlet flowline? <u>pump used (leaching chamber)</u>	<input checked="" type="checkbox"/>		
2. Excavation length \leq 150' long per linear line?	<input checked="" type="checkbox"/>		
3. Excavation width: <u>36</u> inches	<input checked="" type="checkbox"/>		
4. Excavation depth: <u>24</u> inches <u>bottom of 4" SCH 40 pipe</u>	<input checked="" type="checkbox"/>		

$8 \frac{3}{4}$
 24
 4

$4' 7'' - 5' 1/2''$ (bottom of trench)
 $4' 8' 1/2''$ top of panel

Y N N/A

Property Owner: <u>Lloyd Mosley</u>	Installer: <u>Mike Robinson</u>		
5. Distance between trenches: _____ feet			
6. End caps in place or lines looped. <u>Leaching Chamber</u>	<input checked="" type="checkbox"/>		
7. Pipe diameter: <u>N/A</u> Pipe Type: <u>Leaching chamber</u>			
8. Proper barrier between gravel and backfill?			<input checked="" type="checkbox"/>
9. Type of media used? _____			<input checked="" type="checkbox"/>
10. Depth of media = 12"?			<input checked="" type="checkbox"/>
11. Proper backfill used?			<input checked="" type="checkbox"/>

SETBACK REQUIREMENTS (Check each distance meeting the required standard)

From:	To: Treatment Tank	To: Application Area
Private water wells <u>Existing</u>	50' <u>110'</u>	100' <u>167'</u> 50' (with pressure cemented well)
All water courses and open bodies of water	50' <u>3100'+</u>	75' <u>100'+</u>
Property lines, foundations, buildings, easements, other structures	5' <input checked="" type="checkbox"/>	5' <input checked="" type="checkbox"/>
Swimming pools <u>N/A</u>	5' <u>—</u>	5' <u>—</u>
Public water supply lines <u>N/A</u>	10' <u>—</u>	10' <u>—</u>

Remarks: GPS: N 29.34477
W 095.07202

NOTE: Re-inspection made on June 11, 2013
Pump move to original tank - first tank dosing
Completion slip given and charges dismissed

Inspected by: Antonio Contreras DR# 6475 Date: Oct 26, 2012
Telephone: (409) 938-2320

NOTE: Commercial building was not built at time of inspection. Concrete slab was poured.