

**HUNT COUNTY HEALTH DEPARTMENT**  
**OSSF LICENSE RESIDENTIAL FOR SYSTEMS REQUIRING MAINTENANCE CONTRACTS**

LICENSE NUMBER 14641 A

This License is hereby given to ZACHARY PAT BOLTON AND/OR AMANDA S. BOLTON

to own and/or operate a private, on-site surface application sewage disposal system located: 4451 CR 4410

System is approved for a maximum wastewater flow of 240 gal/day.

in Hunt County which is not located within the boundaries of incorporated cities and towns. Also this Order does not apply to the area surrounding Lake Tawakoni which is covered by Vernon's Texas 1989 Health and Safety Code Chapter 366. The permit shall be enforced and continue in force until such time as the licensing authority, pursuant to orders of the Commissioners Court, notifies the licensee requiring reinspection and relicensing.

Facility owner's responsibilities. A properly designed on-site sewage facility, properly constructed in a suitable soil, can malfunction if the amount of water it is required to dispose is not controlled. It will be the responsibility of the owner to maintain and operate the facility in a satisfactory manner. THE FACILITY OWNER SHALL CONTINUOUSLY MAINTAIN A WRITTEN CONTRACT WITH A VALID MAINTENANCE COMPANY AND SHALL SUBMIT A COPY OF THE CONTRACT TO THE PERMITTING AUTHORITY AT LEAST 30 DAYS PRIOR TO EXPIRATION OF THE PREVIOUS CONTRACT. Inspection and licensing of an on-site sewage facility by the licensing authority shall indicate only that the facility meets minimum requirements and does not relieve the owner of the property from complying with County, State and Federal regulations. On-site sewage facilities, although approved as meeting minimum standards, must be upgraded by the owner, at the owner's expense, if the owner's operation of the facility results in objectionable odors, if unsanitary conditions are created, if pollution or nuisance conditions are threatened or occur, or if the facility when used does not comply with governmental regulations.

**REQUIRED TESTING AND REPORTING DATES:**

The maintenance company shall inspect this system a minimum of 3 times a year and at an interval of 4 months apart. Beginning period starts at date the system was approved by our department. Response to homeowner complaints and results of maintenance finding shall be sent to our department and should be sent to homeowner.

Maintenance Contracts expire 2 years from date of inspection. Renewed contracts are to be submitted to our office, signed by both parties with starting and ending dates. Renewed contracts will be charged an administrative fee and by law should be submitted 30 days prior to expiring.



SEPTEMBER 2017

Maintenance Contract Expires

SEPTEMBER 29, 2015

Date Issued

Joe Lilly / DR # 6865  
Designated Representative



**CLEARSTREAM WASTEWATER SYSTEMS, INC.**  
**INSTALLATION SHEET**

Customer and Contractor must sign and file this form with Clearstream within fourteen (14) days after installation or All CLEARSTREAM EQUIPMENT WARRANTIES ARE VOID. By signing this, Customer acknowledges receipt of Owner's Manual including the Contractor Service Contract and Clearstream Limited Warranty; and that Contractor or contractor's representative has instructed Customer on the proper use of the Clearstream Wastewater Treatment Equipment installed. Customer also acknowledges and understands that the Contractor or Installer of Customer's On-Site Wastewater System is an independent contractor and not an employee or agent of Clearstream Wastewater Systems, Inc.

Send original installation sheet to:  
**CLEARSTREAM WASTEWATER SYSTEMS, INC.** 2-20" x 12  
P.O. Box 7568 1-12" x 12  
Beaumont, Texas 77726-7568

Tank Ser. # <u>6789-555</u>	Aerator Ser. # <u>0615002619</u>
Wholesaler <u>Dane McGee</u>	Date Installed <u>09-29-2015</u>
Customer <u>Amanda Bottom</u>	Contractor <u>McGee Construction</u>
Address <u>4451 CR 4410</u>	Address <u>P.O. Box 8549</u>
City <u>Commerce</u>	City <u>Greenville</u>
State <u>Texas</u> Zip <u>75428</u>	State <u>Texas</u> Zip <u>75404</u>
Phone # _____	Phone # <u>903-454-3618</u>
Licensing Regulatory Agency:	
Name <u>Hunt County</u>	Service will be performed by:
City <u>Greenville</u>	Name <u>McGee Construction</u>
State <u>TX</u>	City <u>Greenville</u>
	State <u>Texas</u>

Type of Installation

**Residential:**

Number of Residents \_\_\_\_\_

Garbage Disposal (Y or N) \_\_\_\_\_

Wastewater Disposal Method Used: SPRAY

IF IRRIGATION METHOD USED, PLACE PUMP SERIAL # HERE 1503-80197

CHLORINATOR SER. # \_\_\_\_\_ AUTO DIALER SER. # \_\_\_\_\_

**Commercial:**

Type of Business \_\_\_\_\_

Number of Occupants \_\_\_\_\_

**ADDRESS AND GEOGRAPHIC DIRECTIONS TO INSTALLATION SITE:**

**CONTRACTOR**

(Signature) \_\_\_\_\_

(Printed Name) M. Denise

**CUSTOMER**

(Signature) \_\_\_\_\_

(Printed Name) \_\_\_\_\_

White - Clearstream

Yellow - Wholesaler

Pink - Customer



## REGISTERED PROFESSIONAL SANTTARIAN

Texas Registration #782

10672 Bradley Circle  
Forney, Texas 75126Telephone (972) 564-9962  
Fax (972) 564-1017

## Aerobic Sewage System

NAME AMANDA BOLTON DATE AUGUST 24, 2015  
LOCATION 4451 CR 4410 CITY COMMERCE  
COUNTY HUNT

## Design Parameters

Number Bedrooms (3) 2047 FT<sup>2</sup> Lot Size 3 AC.  
Design Capacity - G.P.D. 240 GPD USING WATER SAVING DEVICES  
Maximum Loading Rate .045 GAL/FT<sup>2</sup>/DAY  
Required Disposal Area 5333 FT<sup>2</sup>  
Designed Disposal Area 5652 FT<sup>2</sup>  
Actual Loading Rate .042 GAL/FT<sup>2</sup>/DAY

## System Parameters

Interceptor Tank 500 GALLON CONCRETE  
Aeration Tank 500 GPD CLEARSTREAM 500 NC3 CONCRETE  
Chlorinator TABLET OR LIQUID APPROVED BY ANSI / NSF  
Pump Tank 500 GAL CONCRETE Pump 1/2 HP  
Number of Sprinklers (2) 360° Radius 30' R, LOW ANGLE  
\* TCEQ REQUIRES ALL TANKS HAVE SECONDARY RISER PLUGS INSTALLED

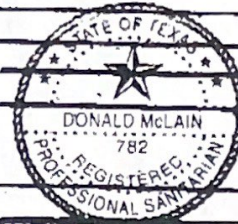
## Site Evaluation

Well NO Pond/Stream NO Drainage Easement NO  
Terrain 3% SLOPES

## Landscape Plan

Vegetation Type NATIVE GRASSES

Notes

Donald W. McLain RS  
AUG. 24, 2015

NOTE: IT SHOULD BE UNDERSTOOD THAT DATA GIVEN IN THIS REPORT DOES NOT COVER INSTALLATION OF THE SEWAGE SYSTEM, DESIGN, CONSTRUCTION, INSTALLATION, AND FINAL INSPECTION SHOULD BE BASED UPON SPECIFIC CONDITIONS AFFECTING EACH LOCATION AND MEET REQUIREMENTS OF STATE AND LOCAL AUTHORITY.



McGee Construction  
P O Box 8549  
Greenville, Texas 75404  
Phone # 903-454-3618 Fax # 903-454-2850

INSTRUCTIONS FOR THE PROPER CARE OF YOUR CLEARSTREAM WASTEWATER  
SYSTEM  
AND BACKFILLING MEMO

SYSTEM OWNER NAME: Amanda Bolton PERMIT # 14641

The SYSTEM OWNER is responsible for keeping chlorine (calcium Hypochlorite properly labeled for wastewater disinfection) in the chlorinator as well as the cost of the chlorine.

McGee Construction is not responsible for adding the chlorine to your system. Suggestion, do not add more than three chlorine tablets at a time as too many may cause a blockage.

Check the chlorinator on a monthly basis in order to make sure that there is chlorine in the chlorinator. If you are using the chlorine tablets you may purchase them at the Home Depot or Ace Hardware.

However, if you have a liquid chlorinator then household bleach may be purchased at any store where household bleach is sold, simply fill up the chlorinator and check it monthly, fill as needed

ASB Initials

PUMP OUTS

We suggest having your system pumped out for the first time when the system is three years old. This is simply good maintenance for your system which helps prolong the life of the components within the aerobic system. Then every 2-3 years after that. Pumping schedules may vary due to individual usage of system and sludge level build up. Sludge is a natural by product of your system. Sludge will accumulate over time in the tanks and will need to be pumped out. Our technician will take a sludge level reading at each maintenance visit.

ASB Initials

MAINTENANCE INSPECTIONS

Maintenance inspections are performed every four months. A door hanger will be left at your home after each inspection. An identical copy of this information will be sent to the permitting authority that your system was permitted through. Please read these reports. They will relay to you important information about the health of your system. Please provide a good mailing address and working phone number so that we may stay in contact with you concerning your aerobic system.

ASB Initials

Fire ants are an enemy to the external and internal components of your system. Kill the

### FIRE ANTS

mound when you see it anywhere near the aerobic system. The ants will strip the plastic coating from the wiring of your system causing corrosion or a short. And we have seen them cover an entire aerator, with their mound causing the aerator to burn up and have to be replaced, which is very costly.

*ASD* Initials

### POWER TO THE SYSTEM

Power is to be on all of the time. It is essential to the health of your system that the power remains on 24/7. If, the power is turned off for an extended length of time the unit will begin to smell due to the aerator not running and the system not receiving the necessary air supply in the treatment tank. Your system MUST have power to work properly.

*CSB* Initials

### SETTLING

After installation of the aerobic system there WILL be settling of the dirt around the tanks, anywhere from 2-4 ft. The settling will occur over a period of time.

We will leave dirt for you to use when filling in around the system, unless you ask us not to. McGee Construction "Does Not" come back and fill-in the settling around the system. It is the "homeowner's responsibility" to fill in around the tanks after installation is complete and settling of the soil begins.

*ASD* Initials

DO NOT WALK AROUND AREA OF EXCAVATION UNTIL THIS SETTLING HAS STOPPED. AS YOU COULD SINK INTO THE FRESHLY DUG AND REPLACED DIRT.

*ASD* Initials

I HAVE READ AND UNDERSTAND THE INFORMATION IN THIS MEMO AND DO ACKNOWLEDGE MY RESPONSIBILITY IN THE CARE OF THE AEROBIC SYSTEM.

System Owner Signature

*Amada Spelli*

Date 12 Aug 15