



### INFORMATION ABOUT ON-SITE SEWER FACILITY

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CONCERNING THE PROPERTY AT 4003 E Mossy Oaks Rd, Spring, TX 77389

#### A. DESCRIPTION OF ON-SITE SEWER FACILITY ON PROPERTY:

- (1) Type of Treatment System:  Septic Tank  Aerobic Treatment  Unknown  
 \_\_\_\_\_
- (2) Type of Distribution System: \_\_\_\_\_  Unknown
- (3) Approximate Location of Drain Field or Distribution System: Middle of back yard  Unknown  
\_\_\_\_\_  
\_\_\_\_\_
- (4) Installer: AES Septic  Unknown
- (5) Approximate Age: 2024  Unknown

#### B. MAINTENANCE INFORMATION:

- (1) Is Seller aware of any maintenance contract in effect for the on-site sewer facility?  Yes  No  
If yes, name of maintenance contractor: \_\_\_\_\_  
Phone: \_\_\_\_\_ contract expiration date: \_\_\_\_\_  
*(Maintenance contracts must be in effect to operate aerobic treatment and certain non-standard on-site sewer facilities.)*
- (2) Approximate date any tanks were last pumped? \_\_\_\_\_
- (3) Is Seller aware of any defect or malfunction in the on-site sewer facility?  Yes  No  
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- (4) Does Seller have manufacturer or warranty information available for review?  Yes  No

#### C. PLANNING MATERIALS, PERMITS, AND CONTRACTS:

- (1) The following items concerning the on-site sewer facility are attached:  
 planning materials  permit for original installation  final inspection when OSSF was installed  
 maintenance contract  manufacturer information  warranty information  \_\_\_\_\_
- (2) "Planning materials" are the supporting materials that describe the on-site sewer facility that are submitted to the permitting authority in order to obtain a permit to install the on-site sewer facility.
- (3) **It may be necessary for a buyer to have the permit to operate an on-site sewer facility transferred to the buyer.**

**D. INFORMATION FROM GOVERNMENTAL AGENCIES:** Pamphlets describing on-site sewer facilities are available from the Texas Agricultural Extension Service. Information in the following table was obtained from Texas Commission on Environmental Quality (TCEQ) rules in 30 TAC 285.91(3) on 09/05/2025. The table estimates daily wastewater usage rates. Actual water usage data or other methods for calculating may be used if accurate and acceptable to TCEQ.

<u>Facility</u>	<u>Usage (gal/day) without water-saving devices</u>	<u>Usage (gal/day) with water-saving devices</u>
Single family dwelling (1–2 bedrooms; less than 1,500 sf)	225	180
Single family dwelling (3 bedrooms; less than 2,500 sf)	300	240
Single family dwelling (4 bedrooms; less than 3,500 sf)	375	300
Single family dwelling (5 bedrooms; less than 4,500 sf)	450	360
Single family dwelling (6 bedrooms; less than 5,500 sf)	525	420
Mobile home, condo, or townhouse (1-2 bedroom)	225	180
Mobile home, condo, or townhouse (each add'l bedroom)	75	60

**This document is not a substitute for any inspections or warranties. This document was completed to the best of Seller’s knowledge and belief on the date signed. Seller and real estate agents are not experts about on-site sewer facilities. Buyer is encouraged to have the on-site sewer facility inspected by an inspector of Buyer’s choice.**

Jason D. Newsom \_\_\_\_\_  
Signature of Seller Date 05/23/2026

\_\_\_\_\_  
Signature of Seller Date

Receipt acknowledged by:

\_\_\_\_\_  
Signature of Buyer Date

\_\_\_\_\_  
Signature of Buyer Date



**Harris County Engineering Department**  
 Dr. Milton Rahman, P.E., PMP, CFM, ENV SP - Executive Director & County Engineer  
 10555 NORTHWEST FREEWAY, SUITE 120, HOUSTON, TX 77092 – OFFICE 713-274-3900



Request Your Inspection

**PERMIT FOR RESIDENTIAL ON-SITE SEWERAGE SYSTEM**

<b>Date Issued:</b> 12/11/2023	<b>Project Name:</b> Residential Construction
<b>Issued To:</b> Tiffany Sebastian	<b>Permit No:</b> 2311130166-RSS-001
<b>Owner:</b> Tiffany Sebastian	<b>Permit Class Code:</b> CLASS I
<b>Applicant:</b> AES Septic	<b>Construction Started By:</b> 12/10/2024
<b>Contact:</b> AES Septic	
<b>Contact Email:</b> ashley@aeseppticmagnolia.com	
<b>Contact Phone:</b> (281) 356-5000	

<b>Property Information</b>					
<b>Address:</b> 4003 E Mossy Oaks Rd	<b>Bldg:</b>	<b>Suite:</b>	<b>Trailer:</b>		
<b>City:</b> SPRING	<b>State:</b> TX	<b>Zip:</b> 77389			
<b>Subdivision:</b> MOSSY OAKS U/R	<b>Section:</b> 1	<b>Lot:</b> 1	<b>Block:</b> N/A	<b>Reserve:</b> N/A	
<b>Abstract No.:</b>	<b>Survey Name:</b>				

**REQUIRED INSPECTION(S)**

IT IS YOUR RESPONSIBILITY TO CALL FOR ALL REQUIRED INSPECTIONS

(\* All Inspections designated with an asterisk must be passed before permanent power will be released.

- 1 \* Sewage Facility Inspection

**PRE-INSPECTION DOCUMENT(S)**

ALL PRE-INSPECTION DOCUMENTS MUST BE RECEIVED AND APPROVED BEFORE INSPECTIONS CAN BE REQUESTED

**SPECIAL REQUIREMENT(S)**

- 1 Schedule Inspection(s) By Logging Into Your Online Account (e-Permits), Selecting Inspections - Inspection Request, And Select The Inspection You Would Like To Request; You may also fill out the online request form at <http://www.eng.hctx.net/permits/Inspection-Forms> . All Site, Storm Water Quality, On-site Sewerage Facility and Right of Way Inspections must be PASSED and Permanent Power Released before requesting your Fire Marshal Inspection.
- 2 All Construction Shall Be In Accordance With The Approved And Permitted Documents, Any Special Details Will Be Noted On Approved Plans
- 3 On-Site Sewerage (OSS) License Must Be Obtained Prior To Start Of Construction
- 4 Ultra Low Flow Fixtures Required As Per Design

Permit Manager

Main Line HCPID 713-274-3900

Inspection's Line 713-274-3800

Request Inspections  
<http://www.eng.hctx.net/permits/Inspection-Forms>

On the day herein stated the undersigned authority did issue to the hereinafter mentioned Permittee this Permit to install and operate an on-site private sewage facility on the hereinafter mentioned premises in accordance with the application, drawings and specifications submitted in support hereof with the Revised Rules of Harris County, Texas, for on-site Sewerage Facilities, and with the Laws of the State of Texas. This Permit shall not be transferable without the prior written consent of the undersigned authority. Authority for issuance of this Permit is derived from Chapter 366 of the Texas Health and Safety Code. Harris County has not examined title to the site designated in this Permit nor has Harris County determined whether the construction described in this Permit is in violation of or contrary to any deed restrictions or covenants applicable to the said site. The determination that the facility to be constructed is not in violation of any deed restrictions or applicable covenants shall be the responsibility of the Permittee. This said Permit to operate an on-site sewage facility shall become null and void if the construction of the said facility is not started, completed and inspected within one (1) year from the date shown hereon. Approval of the on-site sewage facility for operation shall only indicate that the facility meets the minimum requirements for issuance of this Permit. County and State Standards do not guarantee that the on-site sewage system will always perform satisfactorily. It is the responsibility of the owner to maintain and operate the facility in a satisfactory manner. NO REFUND OF PERMIT FEES IS ALLOWED FOR EXPIRED, VOID OR CANCELED PERMITS, OR FOR ANY INSPECTIONS THAT MAY HAVE BEEN CONDUCTED.

Fax 713-956-0744

12/11/2023 11:11:35 AM

[www.hcpid.org/permits/](http://www.hcpid.org/permits/)



THE ENTIRETY OF THIS PROPERTY LIES IN ZONE "X"

4015 E. mossy oaks  
3927 E. mossy oaks

MOSSY OAKS RD. E.

80.90'

50' WELL BUFFER

EXISTING WELL

3927 E. mossy oaks

EXISTING WELL

EXISTING WELL

100' WELL BUFFER

EXISTING OSSF TO BE ABANDONED PER TCEQ

(1) PRO FLO 500 SLPT2 UNIT W/LIQUID CHLORINATOR

EXISTING 1,558 SQ. FT. 3 BR. HOME

4" C.O.

4" C.O.

(B.H.)

EXISTING GREASE TRAP

100' WELL BUFFER

**NSF46 Listed Disinfection Device Required!**

**IT IS THE INSTALLER'S RESPONSIBILITY TO INSURE THAT THIS AEROBIC TREATMENT UNIT MEETS A 30-DAY AVERAGE CBOD OF 10mg/L & TSS OF 10mg/L.**

**ELECTRONIC MONITORING REQUIRED  
Auto-dialer must be in place by final inspection.**

HARRIS COUNTY ENGINEERING DEPARTMENT  
INTERPOSES NO OBJECTIONS PROVIDED THE SYSTEM IS INSTALLED IN ACCORDANCE WITH THESE PLANS. SYSTEM DESIGNER, INSTALLER AND PROPERTY OWNER ARE RESPONSIBLE FOR PROPER SYSTEM OPERATION.  
*Jose L. Canales RS 3379* 12-11-2023  
SIGNATURE DATE  
(Signature valid for 1 year)

(2) K-RAIN PRO PLUS SPRAY HEADS

489.60'

R31

431.40'

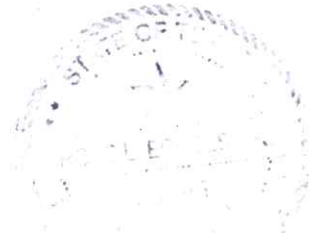
R31

(B.H.)

10' BUFFER

10' BUFFER

This License to construct and operate an on-site sewerage facility requires that this Department **INSPECT AND APPROVE** the construction of the said facility **PRIOR TO COVER UP** and **PRIOR TO PLACING INTO OPERATION**. Failure to comply with these requirements constitutes a Class "C" Misdemeanor.  
**CALL 713-274-3800 TO SCHEDULE INSPECTION.**



*Ron Nichols, Jr., P.E.*  
*#78195; 10/11/2023*

**CALCULATIONS:**  
EXISTING 1,558 SQ. FT. 3 BR. HOME = 240 GPD  
240 GPD / .041 = 5,854 SQ. FT. REQUIRED.  
USE 6,038 SQ. FT. AS DESIGNED  
2(31' x 31' x 3.14) = 6,038 SQ. FT.



**LEGEND:**  
4" SCH 40 SEWER LINE  
1" PURPLE PIPE  
BUFFER ZONE  
WATER LINE  
PROPERTY LINE

TBPELS FIRM 20346  
30703 N. CRIPPLE CREEK DR.  
MAGNOLIA, TX 77354  
281-356-5000  
info@aeseppticmagnolia.com  
Design-Permits-Installation-Maintenance

REV#	DESCRIPTION	REV_BY	REV_DATE

SCALE: 1"=60'      DRAWN BY: JD      DATE: 10/09/23

TIFFANY SEBASTIAN  
4003 MOSSY OAKS RD. E.  
SPRING, TX 77389  
MOSSY OAKS U/R  
SEC. 1, 1.004 AC. LOT 1  
HARRIS COUNTY  
DRAWING NUMBER:      REV:

101.13'  
DRAINAGE GULLY

**APPROVED**



### ON-SITE SEWERAGE FACILITY APPLICATION

10555 Northwest Freeway - Suite 126 - Houston, TX 77092 Main Phone: 713-274-3900 Monday-Friday 7:30am - 4:00pm

Facsimiles NOT Accepted

COMPLETE ALL FIELDS AS REQUIRED

The undersigned property owner hereby makes application for a permit to construct an on-site sewerage facility in the unincorporated area of Harris County, Texas as required by Article 10, Section 10, of the Constitution of the State of Texas and the Rules of Harris County, Texas for ON-SITE SEWERAGE FACILITIES.

PROJECT	CONSTRUCTION SITE ADDRESS:	4003 E. Mossy Oaks Rd.	<input type="checkbox"/> COMMERCIAL
	City, St.	Spring TX	<input checked="" type="checkbox"/> RESIDENTIAL
INFORMATION	HCAD#	093 473 000 0001	HC PROJECT# 2311130166
	Subdivision	mossy oaks v1R	Section 1 Block Lot 1 Reserve
APPLICANT	Water Supply	Private well-no log	<input checked="" type="checkbox"/> INDIVIDUAL (Existing)
	<input type="checkbox"/> PUBLIC <input type="checkbox"/> COMMUNITY <input type="checkbox"/> INDIVIDUAL (Proposed)	Name of System	
OWNER	Name	Aes Septic	E-Mail: info@aessepticmagnolia.com
	Address	30703 N. Cripple Creek Dr.	City, St. Magnolia, Tx Zip 77354
	Phone	281-356-5000	Phone Ext.
OWNER	Name	Tiffany Sebastian	E-Mail: tiffsebastian@gmail.com
	Address	5002 Shiloh Lake Dr	City, St. Richmond TX Zip 77407
	Phone	281-300-8585	Phone Ext.

#### ENGINEER / SANITARIAN INFORMATION

Engineering Plans and specifications in support of this application submitted by:

Name	Ross Echols	License #	78195
Address	30703 N. Cripple Creek Dr.	City, St.	Magnolia, Tx Zip 77354
Phone	281-356-5000	E-Mail	info@aessepticmagnolia.com

#### APPLICANT MUST SUBMIT THE FOLLOWING

- 1 Metes & Bounds description (survey), if not in a recorded subdivision
- 2 Site Evaluation (1 Original)
- 3 Plan of Site & Disposal System (3 Sets - 1 Original & 2 Copies)
- 4 Recorded Affidavit - *Provide copy of recorded affidavit filed at Harris County Clerk's Office*
- 5 Acknowledgement of Testing Requirements
- 6 Flood Insurance Rate Map with site accurately located

AUTHORIZATION is hereby given to Harris County, Texas, the Texas Commission on Environmental Quality, the Texas State Department of Health and to their agents, singly or jointly, to enter upon the above described property during daylight hours for the purpose of inspecting the on-site sewerage facility, or for any reason consistent with the water quality program of the Texas Commission on Environmental Quality and the Texas Department of Health. I also acknowledge that INSPECTION OF THE SEWERAGE SYSTEMS IS REQUIRED PROMPTLY ALL COMPONENTS BEING COVERED. TO REQUEST INSPECTION, A TWENTY-FOUR (24) HOUR NOTICE MUST BE GIVEN TO THE ENGINEERING DEPARTMENT AT (713) 274-3800.

The undersigned has carefully reviewed this application and the answers to questions. To the best of my knowledge, the answers are all true and correct.

*Tiffany Sebastian* SIGNATURE (OWNER) DATE 11/10/2023

FOR COUNTY USE ONLY			
MINIMUM TANK SIZE (GALLONS):	500	MINIMUM ABSORPTION AREA:	6038
TYPE OF SYSTEM PROPOSED:	sis	SQUARE FOOTAGE OF BUILDING:	1558
SEWERAGE APPLICATION RATE:	0.041	SOIL CLASSIFICATION:	IV
INSPECTIONS:	<input checked="" type="checkbox"/> S <input checked="" type="checkbox"/> SS <input type="checkbox"/> UL <input type="checkbox"/> WW	SPECIAL REQUIREMENTS:	<input checked="" type="checkbox"/> OLF <input checked="" type="checkbox"/> SSC <input checked="" type="checkbox"/> INS <input checked="" type="checkbox"/> PLANS <input type="checkbox"/> FLTANK <input type="checkbox"/> WLOG <input type="checkbox"/> WWPLUG
REVIEW			
REVIEWER	DATE	REVIEWER	DATE
<i>George L. Corbett RS 8399</i>	12-11-2023		
RECEIVING			
CLERK	DATE	CLERK	DATE



# Harris County Engineering Department

Dr. Milton Rahman, P.E., PMP, CFM, ENV SP - Executive Director & County Engineer  
 10555 NORTHWEST FREEWAY, SUITE 120, HOUSTON, TX 77092 – OFFICE 713-274-3900

## INSPECTION RECORD - POST THIS CARD ON SITE

Property Information		Project Detail	
<u>Residential Property</u>			
<b>Project Name:</b>	Residential Construction	<b>Project No:</b>	2311130166
<b>Property Owner:</b>	Tiffany Sebastian	<b>Suite:</b>	
<b>Address:</b>	4003 E Mossy Oaks RD	<b>Zip:</b>	77389
<b>City:</b>	SPRING	<b>State:</b>	TX
<b>Applicant/DBA:</b>	AES Septic	<b>Email:</b>	tiffanysebastian@gmail.com
		<b>Contact No:</b>	(281) 300-8585

### REQUIRED INSPECTION(S)

IT IS YOUR RESPONSIBILITY TO CALL FOR REQUIRED INSPECTIONS

(\* All Inspections below designated with an Asterisk must be passed before permanent power will be released

Permit Number	Inspection Description	Inspector Name & Signature	Pass/Fail	Date
2311130166-RSS-001	*Sewage Facility Inspection			

### CERTIFICATE OF COMPLIANCE

Date	Inspection Category	Inspector	Signature	Pass/Fail

Main Line HCPID 713-274-3900

Schedule Inspections 713-274-3800

Fire Code Inspections  
<http://www.eng.hctx.net/permits/Inspection-Forms>

Fax 713-437-5764

This Card is your record of inspections and must be signed off by all required departments to receive your Fire Marshal's final inspection and Certificate of Compliance. This card must be kept onsite and available to the inspector at all times and during inspections. Protect this card from weather. The approved plans must be available during inspections. Inspections must be completed in the listed order and the Certificate of Compliance will not be issued until all other required inspections are completed and approved.

[www.hcpid.org/permits](http://www.hcpid.org/permits)

12/11/2023 11:11:36 AM

AFFIDAVIT TO THE PUBLIC

COUNTY OF HARRIS §  
STATE OF TEXAS §

Before me, the undersigned authority, on this day personally appeared Tiffany Sebastian who, after being by me duly sworn, upon oath states that he/she is the owner of record or person in possession of that certain tract or parcel of land lying and being situated in Harris County, Texas, and being more particularly described as follows:

Property No. (For County Use Only): \_\_\_\_\_

Septic License No. (For County Use Only): \_\_\_\_\_

Subdivision/Survey: MOSSY OAKS ULR

Section/Abstract \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Street Address: 4003 E MOSSY OAKS Rd Spring, TX 77389

The undersigned further states that an on-site wastewater treatment system has been licensed in accordance with the permitting provisions of the Harris County Engineering Department, Permit Group as signified by License No. \_\_\_\_\_ (For County Use Only)

The following conditions are set forth in said licensee:

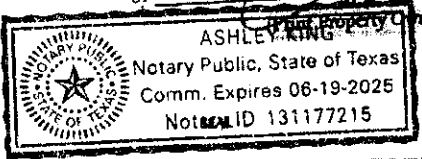
1. If said system is a subsurface type on-site sewerage facility the undersigned agrees to take immediate and corrective measures to alleviate any surfacing of sewerage effluent upon receipt of notice to do so by the Engineering Department representative.
2. If said system uses a proprietary, secondary, or non-standard treatment system, the undersigned agrees to enter into a maintenance agreement with an approved maintenance company for service and repairs to the wastewater system. Said agreement must be in force for the life of the system and the undersigned or subsequent possessor must notify the Engineering Department when the maintenance contact is transferred from one maintenance company to another.

Failure to abide by the above stated conditions constitutes a violation of the Revised Rules of Harris County, Texas for On-site Sewerage Facilities and will result in the filing of a complaint with the Justice of the Peace Court having jurisdiction in the area where the offense occurs.

Further, the undersigned states that he/she will, upon any sale or transfer of the above described property, request a transfer of the license to operate such system to the buyer or transferee. Any buyer or transferee is hereby notified that a maintenance contract with an approved maintenance company will be required for use of any system using proprietary, secondary, or non-standard treatment of wastewater. For more information concerning this specific on-site wastewater treatment facility, contact, Harris County Engineering Department, Permit Group, 10555 Northwest Freeway, Suite 120, Houston, Texas 77092, (713) 274-3900.

WITNESS MY/OUR HAND(S) on this 10 day of November, 2023  
[Signature] 11/10/2023  
(Property Owner's Signature) DATE

SWORN TO AND SUBSCRIBED BEFORE ME on this 10 day of November, 2023  
by [Signature] Tiffany Sebastian  
(Print Property Owner's Name)



[Signature]  
Notary Public, State of Texas  
My Commission Expires 6-19-25

NOTE: RECORDER MAIL TO: HARRIS COUNTY ENGINEERING DEPARTMENT, PERMIT GROUP, 10555 NORTHWEST FREEWAY, SUITE 120, HOUSTON, TX 77092.

RP-2023-431562

RP-2023-431562

RP-2023-431562  
# Pages 2  
11/13/2023 09:04 AM  
e-Filed & e-Recorded in the  
Official Public Records of  
HARRIS COUNTY  
TENESHIA HUDSPETH  
COUNTY CLERK  
Fees \$18.00

RECORDERS MEMORANDUM  
This instrument was received and recorded electronically  
and any blackouts, additions or changes were present  
at the time the instrument was filed and recorded.

Any provision herein which restricts the sale, rental, or  
use of the described real property because of color or  
race is invalid and unenforceable under federal law.  
THE STATE OF TEXAS  
COUNTY OF HARRIS  
I hereby certify that this instrument was FILED in  
File Number Sequence on the date and at the time stamped  
hereon by me; and was duly RECORDED in the Official  
Public Records of Real Property of Harris County, Texas.



*Teneshia Hudspeth*  
COUNTY CLERK  
HARRIS COUNTY, TEXAS

ACKNOWLEDGMENT OF TESTING REQUIREMENTS  
FOR AN ON-SITE SEWAGE FACILITY USING PROPRIETARY, SECONDARY, OR  
NON-STANDARD TREATMENT SYSTEMS

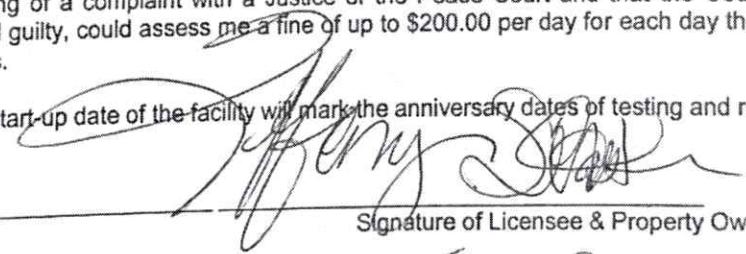
I, Tiffany Sebastian, recipient of a  
license (No. 2- ) to operate this on-site sewage facility that uses  
proprietary/secondary/non-standard treatment on the property I own that is located at  
4003 E. Mossy Oaks Rd. Spring, TX hereby  
acknowledge and agree that I must: 77389

1. Employ, by means of an initial two-year prepaid maintenance contract, a wastewater operator certified by the State of Texas;
2. Employ a wastewater operator during the entire operational life of the said on-site sewage facility;
3. Assure that the wastewater operator provides the testing of the sewage effluent on the schedule provided below and sends the required report to the Harris County Engineering Department - Permits:
  - a. BOD<sup>5</sup> - Annually
  - b. TSS - Annually
  - c. Chlorine or Fecal Coliform - Quarterly for Residential  
Monthly for Commercial
  - d. pH - Quarterly for Residential Monthly for Commercial
4. Operate this system in strict conformance with sewage effluent discharge standards promulgated by the Texas Commission on Environmental Quality (T.C.E.Q.). See Table IV attached.

I further understand that my failure to strictly abide by the above conditions could result in filing of a complaint with a Justice of the Peace Court and that the Court, if I am found guilty, could assess me a fine of up to \$200.00 per day for each day the violation exists.

The start-up date of the facility will mark the anniversary dates of testing and reporting.

Date

  
Signature of Licensee & Property Owner

Tiffany Sebastian  
Printed Name

**TABLE IV  
REQUIRED TESTING AND REPORTING**

Type and Size Of Treatment Unit	Frequency of Site Visits	Required Tests	Minimum Acceptable Test Results
Any treatment method in conjunction with surface application	4 per year – Harris County (single family residence)  12 per year – Harris County (non-single family residence & commercial)	One BOD <sub>5</sub> and TSS Grab Sample per year  Total Chlorine Residual or Fecal Coliform at each required test	For systems permitted prior to Feb. 14, 2010 - BOD <sub>5</sub> and TSS grab samples not to exceed 65 mg/l )  For systems permitted on or after Feb. 14, 2010 and in an impaired watershed - BOD <sub>5</sub> and TSS grab samples not to exceed 10 mg/l
Any Secondary Treatment System	At least once every three months – residential At least once per month – non single family residence and commercial	Same as above	Same as above
Non-Standard	Permit Specific	Same as above	Same as above

**Effluent Disinfection** – Treated effluent must be disinfected prior to surface application. Approved disinfection methods shall include, but not be limited to, chlorination, ozonation or ultraviolet radiation. The efficiency of the disinfection procedure will be established by monitoring the fecal coliform count or chlorine residual from effluent grab samples as directed in the testing and reporting schedule. The frequency of testing and type of test required are shown in Table IV.

Revised 10/20/2015



## AEROBIC DESIGN SUMMARY SPRAY IRRIGATION

*Basis for design is the Texas Administrative Code (TAC) Chpt 285*

*Ross Echols, P.E.  
#78195 5/10/11/2023*

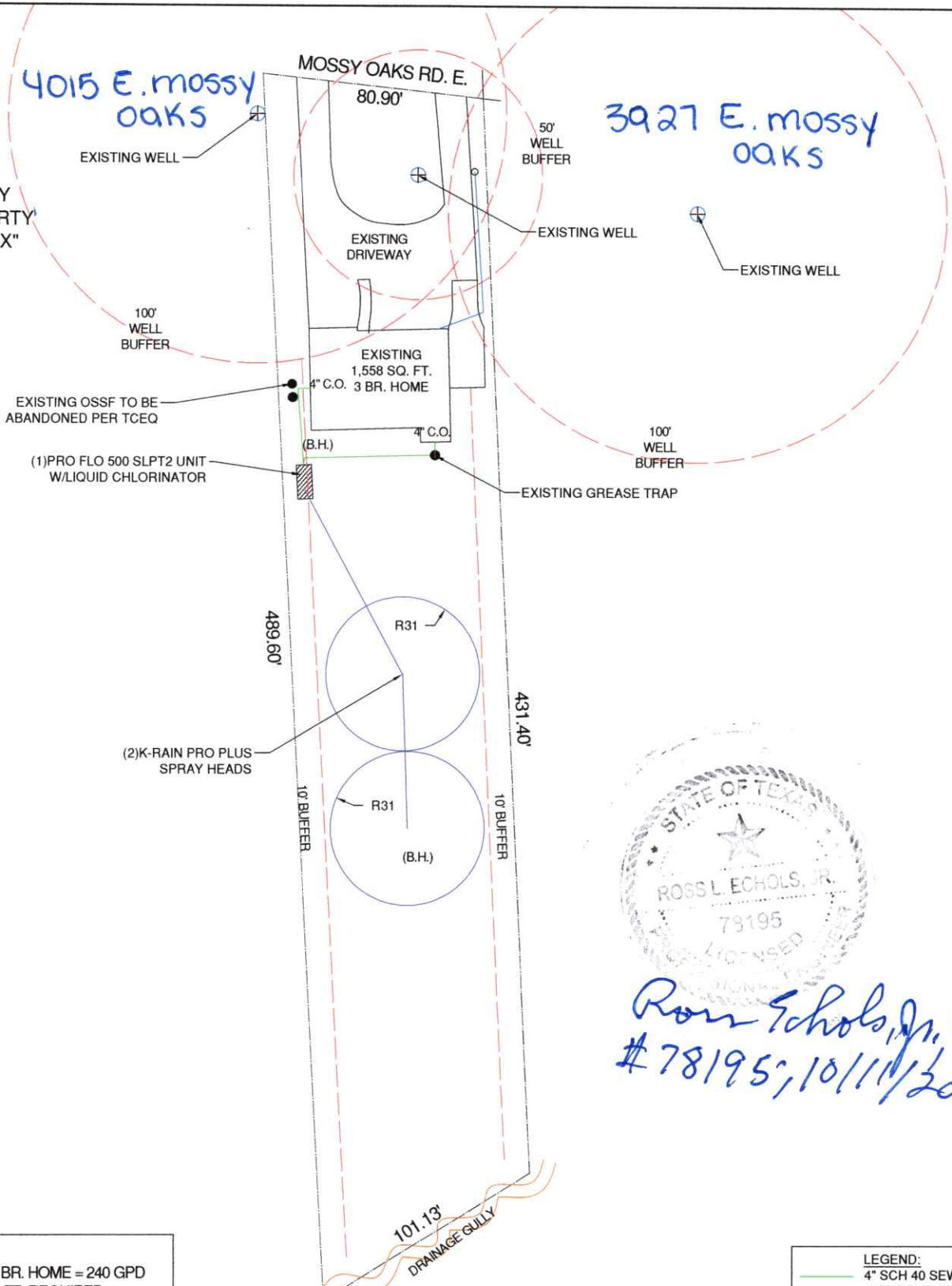
**PROPERTY ADDRESS: 4003 Mossy Oaks Rd. E Spring, TX 77389**

**CALCULATIONS: Existing 1,558 sq. ft. 3 Br. Home = 240 GPD**

1. An OSSF permit must be granted by the permitting authority, in which the property lies, before any construction takes place.
  - a. Installation must be completed by a licensed TCEQ OSSF INSTALLER II.
  - b. Installer must obtain an inspection approval from the permitting authority before they system is backfilled.
  - c. A maintenance contract must be kept active on the system for the entirety of system operation. Maintenance reports must be submitted to the governing authority, per TCEQ Rules.
2. All non-wastewater lines shall not be tied into the proposed OSSF, including but not limited to:
  - a. Condensation/Runoff from A/C units, ice makers, or other refrigeration equipment. Backwash from pools or water softeners.
3. High Water Alarm (HWA) is required and must be installed on a separate circuit from the pump.
  - a. Battery powered alarms shall not be used.
  - b. Alarm shall have a light and audible speaker.
4. A mechanical timer or photocell must be used and should be set for the pump to run between the hours of 12:00AM and 5:00AM.
  - a. Pump must be installed with a float that is set to where the "pump off" (down) position is above the pump inlet.
  - b. Pump float must be wired with the timer inside the control panel. PUMP MUST NOT BE CONNECTED DIRECTLY TO FLOAT.
5. ALL ELECTRICAL COMPONENTS SHALL BE INSTALLED USING ONLY N.E.M.A APPROVED OUTDOOR ELECTRICAL DEVICES.
  - a. A quick pull disconnect must be installed within eye site of the pump tank.
  - b. All electrical connections for the pump(s) should be installed outside the pump tank or in a sealed/liquid tight junction box, inside the tank, with wire nuts.
  - c. All electrical connections for the compressor(s) should be wired directly inside the control panel; if connection is made outside of the panel, wire nuts and a liquid tight junction box must be used.
6. If the site has been altered between the site evaluation and installation or if discrepancies exist between the design and actual layout of the property, the installer shall notify the designer prior to any work being completed.
7. **IF DAILY FLOW RATES EXCEED THE GALLONS PER DAY (GPD) LISTED ON THE DESIGN THEN THIS PACKET WILL BECOME INVALID.**
  - a. It is the responsibility of the property owner and maintenance provider to ensure system is not being overused.
8. Construction materials and methods shall be pursuant to state and county rules and policies, unless specifically noted that it has been approved by the permitting authority on this design.
9. Distribution area shall be seeded or sodded after it is backfilled.
  - a. Grading for tanks and distribution area shall be graded with positive runoff to avoid puddling or water formation around the OSSF area.
  - b. Spray heads shall not spray within 10' of any trees.
    - i. Heads should not spray any trees producing food whatsoever.



THE ENTIRETY OF THIS PROPERTY LIES IN ZONE "X"



Ross Echols, Jr., P.E.  
#78195; 10/11/2023

**CALCULATIONS:**  
 EXISTING 1,558 SQ. FT. 3 BR. HOME = 240 GPD  
 240 GPD / .041 = 5,854 SQ. FT. REQUIRED.  
 USE 6,038 SQ. FT. AS DESIGNED  
 2(31' x 31' x 3.14) = 6,038 SQ. FT.



**LEGEND:**

- 4" SCH 40 SEWER LINE
- 1" PURPLE PIPE
- BUFFER ZONE
- WATER LINE
- PROPERTY LINE

TBPELS FIRM 20346

30703 N. CRIPPLE CREEK DR.  
MAGNOLIA, TX 77354  
281-356-5000

info@aeseppticmagnolia.com  
Design-Permits-Installation-Maintenance

REV#	DESCRIPTION	REV_BY	REV_DATE

SCALE: 1"=60'      DRAWN BY: JD      DATE: 10/09/23

TIFFANY SEBASTIAN  
4003 MOSSY OAKS RD. E.  
SPRING, TX 77389  
MOSSY OAKS U/R  
SEC. 1, 1.004 AC. LOT 1  
HARRIS COUNTY

DRAWING NUMBER:      REV:

ATTENTION OWNER: Confidentiality  
Privilege Notice on reverse side  
of Well Owner's copy (pink)

# State of Texas WELL REPORT

Texas Department of Licensing &  
Regulation  
P.O. Box 12157  
Austin, TX 78711  
512-463-7880

1) OWNER Ray Tipton (Name) ADDRESS 4003 E. MOSSY OAKS Spring TX 77389 (Street or RFD) (City) (State) (Zip)  
2) ADDRESS OF WELL'S LOCATION: County Harris Co. Same (Street, RFD or other) (City) (State) (Zip) Grid # 100-61-1 Long 30°05'48" N at 95°28'51" W

3) TYPE OF WORK (Check):  New Well  Deepening  Reconditioning  Plugging  
4) PROPOSED USE (Check):  Monitor  Environmental Soil Boring  Domestic  Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

6) WELL LOG: Date Drilling: \_\_\_\_\_ Started 5:15 19 98 Completed 5:16 19 98  
DIAMETER OF HOLE: Dia. (in.) From (ft.) To (ft.)  
6 1/2 Surface 326  
7) DRILLING METHOD (Check):  Driven  Air Rotary  Mud Rotary  Bored  Air Hammer  Cable Tool  Jetted  Other \_\_\_\_\_

From (ft.)	To (ft.)	Description and color of formation material
0	99	sand & clay mix
99	110	ROCK
110	118	sand & clay
118	121	SOFT ROCK
121	134	sand
134	136	rock (hard)
136	151	mix
151	181	red clay
181	223	clay some mixed rock
223	265	mixed (sand & clay)
265	326	sand

8) Borehole Completion (Check):  Open Hole  Straight Wall  Underreamed  Gravel Packed  Other Inside Comp.  
If Gravel Packed give interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

CASING, BLANK PIPE, AND WELL SCREEN DATA:

Dia. (in.)	New or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft.)		Gage Casing Screen
			From	To	
4	N	PVC casing	0	316	Sch 40
2 1/2	N	PVC blank pipe	312	316	Sch 40
2 1/2	N	PVC slotted screen	316	326	.012

9) CEMENTING DATA: Cemented from 316 ft. to 181 ft. No. of sacks used 9  
10 ft. to 9 ft. No. of sacks used 1  
Method used Halliburton  
Cemented by self  
Distance to septic system field lines or other concentrated contamination 100 ft.  
Method of verification of above distance tape

13)  Well plugged within 48 hours

Casing left in well:		Cement/bentonite placed in well:		Sacks used:
From (ft)	To (ft)	From (ft)	To (ft)	

14) TYPE PUMP:  Turbine  Jet  Submersible  Cylinder  Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., 240 ft.

10) SURFACE COMPLETION:  Specified Surface Stab Installed  Specified Steel Sleeve Installed  Pileless Adapter Used  Approved Alternative Procedure Used

15) WELL TESTS: Type test:  Pump  Bailor  Jetted  Estimated  
Yield: 40 gpm with 15 ft. drawdown after 1 hrs.

11) WATER LEVEL: Static level 168 ft. below land surface Date 5-16-98  
Artesian flow \_\_\_\_\_ gpm. Date \_\_\_\_\_

16) WATER QUALITY: Did you knowingly penetrate any strata which contained undesirable constituents?  Yes  No  
If yes, submit "REPORT OF UNDESIRABLE WATER"  
Type of water: \_\_\_\_\_, Depth of strata: \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

12) PACKERS: Type \_\_\_\_\_ Depth \_\_\_\_\_  
K Packer 312

I certify that I drilled this well (or the well was drilled under my direct supervision) and that each and all of the statements herein are true and correct. I understand that failure to complete items 1 thru 16 will result in the log(s) being returned for completion and resubmittal.

COMPANY NAME Hildebrandts Water Wells (Type or print) WELL DRILLER'S LICENSE NO. 2195  
ADDRESS 21802 Rhodes Road (Street or RFD) Spring (City) TX (State) 77388 (Zip)  
(Signed) Bob Hildebrandt 2195W (Licensed Well Driller) (Signed) \_\_\_\_\_ (Registered Driller Trainee)

Please attach electric log, chemical analysis, and other pertinent information, if available.

AES Septic LLC.  
 30703 N. Cripple Creek Dr.  
 Magnolia, TX 77354  
 281-356-5000  
[info@aessepticmagnolia.com](mailto:info@aessepticmagnolia.com)  
 -Design-Permit-Installation-Maintenance

NAME  
 ADDRESS  
 CITY, ST, ZIP  
 LEGAL DESCRIPTION  
 COUNTY

Tiffany Sebastian  
 4003 Mossy Oaks Rd  
 Spring Tx 77389  
 Mossy Oaks U/R Sec. 1, Lot 1, 1.004 Acres  
 Harris



*Ross Echols, Jr. P.E.*  
 #78195; 10/11/2023

HYDRAULIC LOAD			
DESIGNATION	q, gpd/capita	Count	Unit gpd
3 Bdr House	240	1	240
		Total	240

PUMP SIZE DETERMINATION CALCULATIONS						
Daily flow rate, Q gpd	240	Rad. ft	psi	gpm	#	gpm
Application rate, gal/ft2	0.041	31	40	1.3	2	2.6
Disposal Area required, ft2	5854					
Designed Disposal Area, ft2	6038					
Required System Flow Rate, gpm	2.60					
Designed System Pressure, psi	40.00	TOTAL gpm				2.6
	ft	92.31				
Supply line length, ft	145					
Supply line diameter, in	1.00					
Supply pipe inside diameter, in	1.049					
Hydraulic Loss, ft	0.86					
Static Head, ft	5.00					
<b>TOTAL SYSTEM HEAD REQUIRED</b>	<b>98.2</b>					
Designed pump size, hp	0.50					

Based on Rainbird performance specification, alternate equipment may be substituted if equal coverage is obtained.  
 GENERALLY WANT THE FLOW RATE OF THE PUMP TO BE < 20 GPM FOR 1/2 HP PUMP

PRO FLO PRODUCTS PUMP TANK AND ATU FLOATATION PREVENTION			
500 gal			
Tank weight, lb.	17710	Net Buoyant Force, lb	-14050
Tank Crossection, ft2	75.08	Density of soil, lb/ft3	110
Static Water Level, in	12	Required top cover, in	-20.41
Weight of static water, lb	4001		

PRO FLO PRODUCTS PUMP TANK AND ATU FLOATATION PREVENTION SETTINGS			
500 gal			
Daily Flow Rate, gpd	240	<b>Required reserve, gal (Q/3)</b>	<b>80</b>
Actual Tank Volume, gal	620	<b>Designed reserve, gal</b>	<b>477</b>
Height to inlet from tank bottom, in	60.50	Pump off setting from inlet, in	49
Tank Invert, gal/in	10.25	Pump on setting from inlet, in	25
Static Water Level, in	12	Alarm on setting from inlet, in	47
Dose/day	1	Dose Invert, in	<b>23</b>
Dose Volume, gal	<b>240</b>		

RESIDENTIAL DOSING IS USED TO REDUCE TO REQUIRED CAPACITY OF AEROBIC TREATMENT  
 ATU CAN BE SIZED PER DOSE VOLUME VS TABLE II  
 PRIMARY CRITERIA IS VOLUME BETWEEN PUMP INLET AND ALARM ON LEVEL

PRO FLO AEROBIC SYSTEM TREATMENT		
gpd	lb BOD/DAY	
	low	high
500	1	1.5
600	1.25	1.75
800	1.5	2
1000	2	2.5
1500	3	3.75

### Performance Data

NOZZLE	PRESSURE PSI	NO ADJUSTMENT				-30% ADJUSTMENT			
		RADIUS Feet	FLOW GPM	PRECIP ■	in/hr ▲	RADIUS Feet	FLOW GPM	PRECIP ■	in/hr ▲
#1.0	30	30	1.2	.21	.25	21	0.8	.30	.36
	40	31	1.3	.23	.27	22	0.9	.33	.39
	50	31	1.5	.27	.31	22	1.1	.39	.44
	60	32	1.8	.32	.37	22	1.3	.46	.53
#1.5	30	36	1.5	.22	.26	25	1.1	.31	.37
	40	37	1.8	.25	.29	26	1.3	.36	.41
	50	37	2.0	.28	.32	26	1.4	.40	.46
	60	38	2.2	.29	.34	27	1.5	.41	.49
#2.0	30	35	1.8	.28	.33	25	1.3	.40	.47
	40	35	2.2	.35	.40	25	1.5	.50	.57
	50	36	2.6	.39	.45	25	1.8	.56	.64
	60	38	2.9	.39	.45	27	2.0	.56	.64
#2.5 Pre- Installed	30	37	2.5	.35	.41	26	1.8	.50	.59
	40	38	3.0	.40	.46	27	2.1	.57	.66
	50	40	3.4	.41	.47	28	2.4	.59	.67
	60	40	3.8	.46	.53	28	2.7	.66	.76
#3.0	30	36	3.0	.45	.51	25	2.1	.64	.73
	40	37	3.4	.48	.55	26	2.4	.69	.79
	50	38	4.0	.53	.62	27	2.8	.76	.89
	60	41	4.4	.50	.58	29	3.1	.71	.83
#4.0	30	37	4.0	.56	.65	26	2.8	.80	.93
	40	39	4.5	.57	.66	27	3.2	.81	.94
	50	39	5.2	.66	.76	27	3.6	.94	1.09
	60	40	5.6	.67	.78	28	3.9	.96	1.11
#5.0	30	37	4.8	.68	.78	26	3.4	.97	1.11
	40	38	5.6	.75	.86	27	3.9	1.07	1.23
	50	41	6.5	.74	.86	29	4.6	1.06	1.23
	60	43	7.2	.75	.87	30	5.0	1.07	1.24
#6.0	30	40	6.0	.72	.83	28	4.2	1.03	1.19
	40	41	6.8	.78	.90	29	4.8	1.11	1.29
	50	42	7.5	.82	.95	29	5.3	1.17	1.36
	60	44	8.4	.84	.96	31	5.9	1.20	1.37
#8.0	30	38	7.9	1.05	1.22	27	5.5	1.50	1.74
	40	44	9.2	.92	1.06	31	6.4	1.31	1.51
	50	45	10.4	.99	1.14	32	7.3	1.41	1.63
	60	46	11.1	1.01	1.17	32	7.8	1.44	1.67

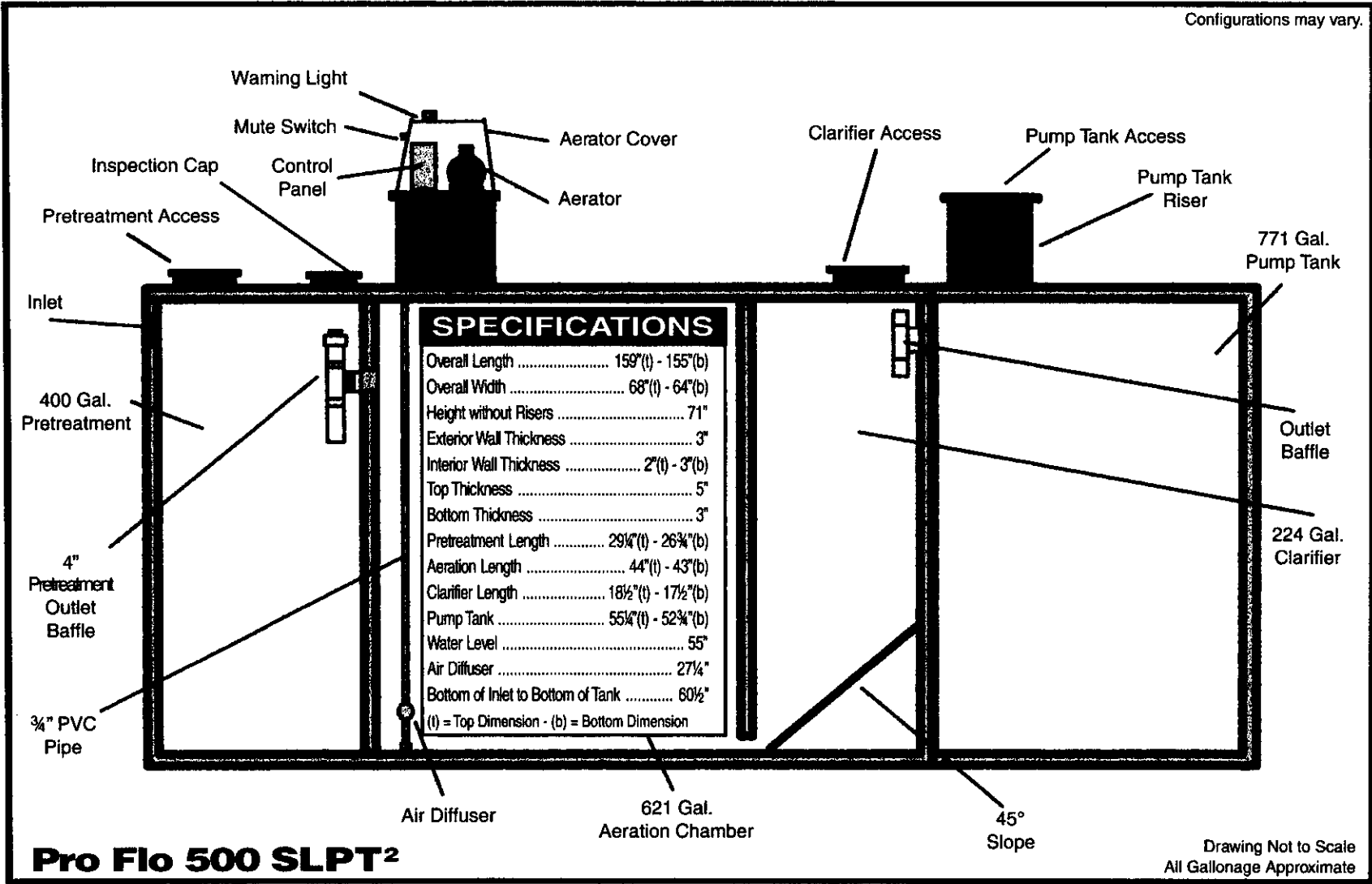
### Low Angle Performance Data

NOZZLE	PRESSURE PSI	NO ADJUSTMENT				-30% ADJUSTMENT			
		RADIUS Feet	FLOW GPM	PRECIP ■	in/hr ▲	RADIUS Feet	FLOW GPM	PRECIP ■	in/hr ▲
#1.0	30	26	1.1	.31	.36	18	0.8	.44	.51
	40	30	1.3	.28	.32	21	0.9	.40	.46
	50	30	1.4	.30	.35	21	1.0	.43	.50
	60	30	1.6	.34	.40	21	1.1	.49	.57
#1.5	30	27	1.4	.37	.43	19	1.0	.53	.61
	40	28	1.7	.42	.48	20	1.2	.60	.69
	50	31	1.9	.38	.44	22	1.3	.54	.63
	60	30	2.1	.45	.52	21	1.5	.64	.74
#2.0	30	30	2.1	.45	.52	21	1.5	.64	.74
	40	31	2.4	.48	.56	22	1.7	.69	.80
	50	33	2.8	.50	.57	23	2.0	.71	.81
	60	31	3.1	.62	.72	22	2.2	.89	1.03
#3.0	30	32	3.0	.56	.65	22	2.1	.80	.93
	40	34	3.5	.58	.67	24	2.5	.83	.96
	50	35	3.9	.61	.71	25	2.7	.87	1.01
	60	35	4.3	.68	.78	25	3.0	.97	1.11

\*All precipitation rates calculated for 180° operation.  
For the precipitation rate for a 360° sprinkler, divide by 2.

Configurations may vary.

**Pro Flo 500 SLPT<sup>2</sup> System Diagram**



**Pro Flo 500 SLPT<sup>2</sup>**

Drawing Not to Scale  
All Gallonage Approximate





EFFLUENT LOADING DETERMINATION

SOIL TEXTURE	SOIL CLASS	LONG TERM LOADING RATE
Course Sand, Gravel	Ia	>0.50 (Not Suitable for Standard Systems)
Sand, Loamy Sand	Ib	0.38
Sandy Loam, Loam	II	0.25
Sandy Clay Loam, Sandy Clay, Clay Loam, Silty Clay Loam, Silty Loam, Silt	III X	0.20
Clay, Silty Clay	IV	0.1 (Not Suitable for Standard Systems)

NOTE: The site soil condition must be evaluated to a minimum of two feet (2') below the application area disposal depth or to a restrictive horizon whichever is shallower.

Indication of Seasonal Water Table: YES [X] NO [ ]  
Depth: 26"

Is Soil Suitable for a Standard System: YES [ ] NO [X]  
Application Rate: .20 / .041

NOTE: If soil has an application rate of over 0.38 g/sqft/d or less than 0.10 g/sqft/d or a high seasonal water table then standard systems are prohibited by State Law.

I Darin L. Daniels, a registered site evaluator/ professional engineer (circle one) did personally conduct the site evaluation on 9/29/23.  
Date

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

9/29/23  
Date

  
Signature

Site Evaluator License Number: OS0028005

