

XXSEPARATEXX



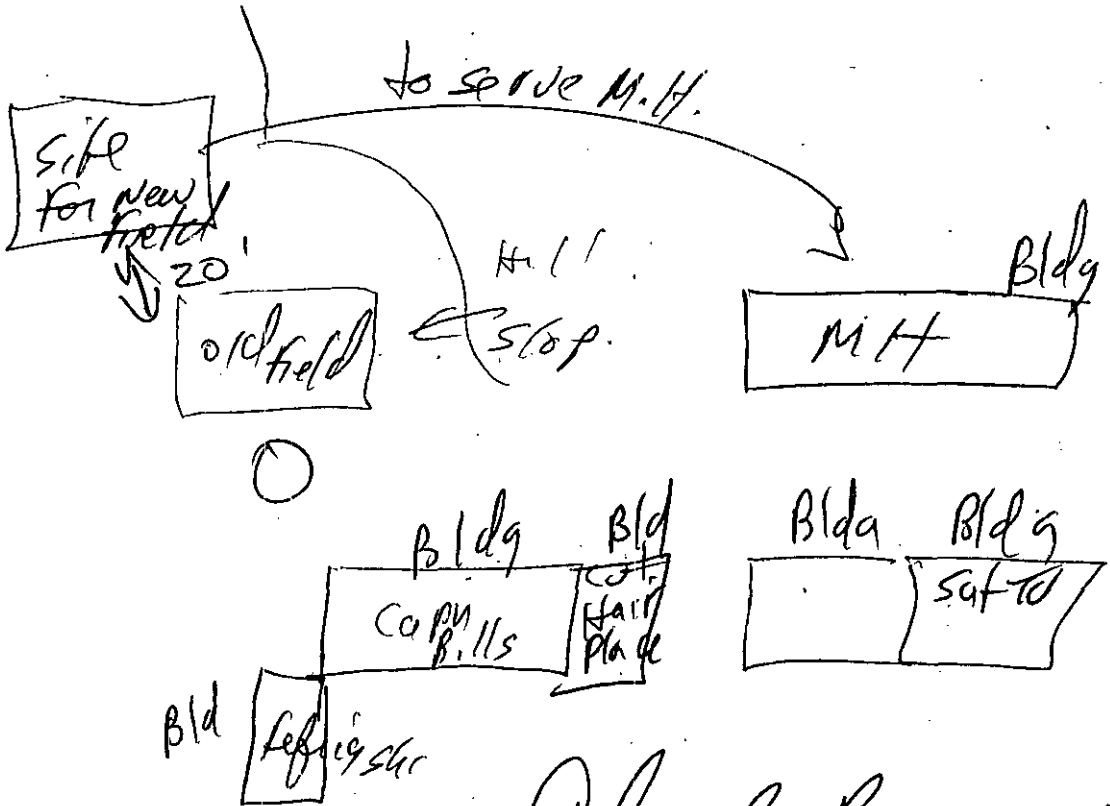
4948774

3411 FM 620

AUSTIN/TRAVIS COUNTY HEALTH DEPARTMENT
Environmental Health Services Division
15 Waller Street
Austin, Texas 78702
Telephone: 469-2022

**SANITARIAN FIELD INSPECTION REPORT
FOR
PRIVATE SEWAGE FACILITIES**

Date 4/26/85 Time 2:20 ^{a.m.} ~~p.m.~~ APPLICATION NO. _____
Address 3411 FM 620 N
Legal Description _____
Installer _____
This report directed to: Blayd



Received by (name & title) _____

Charles Beaman & S
Sanitarian

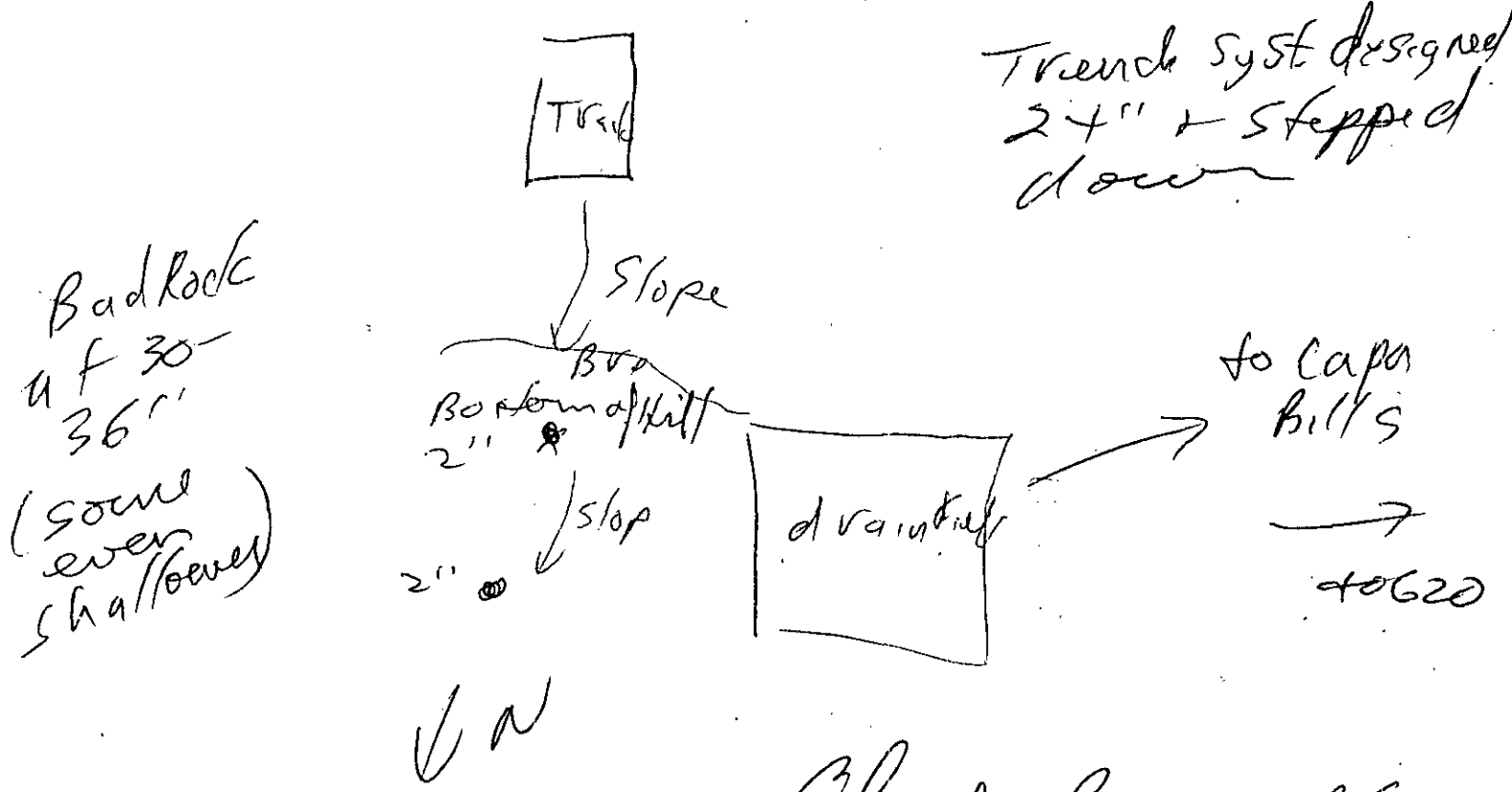
THIS FORM DOES NOT CONSTITUTE A LICENSE TO OPERATE A PRIVATE SEWAGE FACILITY IN TRAVIS COUNTY. (FOR ENGINEERED DESIGNED SYSTEMS: THIS REPORT IS NOT A SUBSTITUTE FOR ENGINEER'S REVIEW OR INSPECTION.)

AUSTIN/TRAVIS COUNTY HEALTH DEPARTMENT
Environmental Health Services Division
15 Waller Street
Austin, Texas 78702
Telephone: 469-2022

SANITARIAN FIELD INSPECTION REPORT
FOR
PRIVATE SEWAGE FACILITIES

PK Only

Date 6/12/85 Time 1200 a.m. APPLICATION NO. _____
Address 3411 RR620
Legal Description _____
Installer 1
This report directed to: Robert Alan



Received by (name & title)

Charles Beaman R.S.
Sanitarian

THIS FORM DOES NOT CONSTITUTE A LICENSE TO OPERATE A PRIVATE SEWAGE FACILITY
IN TRAVIS COUNTY. (FOR ENGINEERED DESIGNED SYSTEMS: THIS REPORT IS NOT A
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- 01 anaerobic
- 02 aerobic
- 03 upflow rock
- 04 sand filter
- 05 recirculating
- 06 metal tank
- 07 recycle

**AUSTIN-TRAVIS COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES DIVISION
PRIVATE SEWAGE FACILITY RECORD**

- 05 Austin
- 06 Lake Austin
- 07 Garfield
- 08 Creedmoor
- 09 Westlake Hills
- 10 Rollingwood
- 11 Briarcliff
- 12 Lakeway
- 13 Lago Vista
- 14 Jonestown
- 15 Mustang Ridge
- 16 LCRA
- 17 Bee Caves
- 18 Williamson Co.
- 19 San Leanna
- 20 Sunset Valley

- 01 beds
- 02 trenches
- 03 lined ET
- 04 unlined ET
- 05 LPD
- 06 mound
- 07 greywater
- 08 holding tank

UNIQUE # JURISDICTION

application#

STREET #

STREET NAME

LEGAL DESCRIPTION: Lot Block Section

SUBDIVISION

tax parcel - -

zip code

FACILITY

TREATMENT

DISPOSAL

ENGINEERED Y/N

ENGINEER

WELL Y/N

APPLICATION DATE

ALTERNATIVE Y/N

incomplete letter sent

LAKE AREA Y/N

eng. plans approved

COLLECTIVE Y/N

P.C. issued

bedrooms

most recent insp.

square footage

FINAL INSP.

tank gal.

Tank Appl. date

pump tank gal.

Tank replaced

field

LO. ISSUED

sq ft? y/n

Appl. refunded

perc rate . min/in

latest certification

DO YOU HATE BEN? Y

SYSTEM REMODELED? Y/N REFER TO

DATE _____

SYSTEM CUTOVER TO SEWER SERVICE? Y/N

San. _____

boxes35

Super. _____

mighty map grid _____ map grid _____

Entered _____



City of Austin

Founded by Congress, Republic of Texas, 1839
Municipal Building, Eighth at Colorado, P.O. Box 1088, Austin, Texas 78767 Telephone 512/499-2000

HEALTH AND HUMAN SERVICES DEPARTMENT
Environmental Health Services Division
15 Waller Street
Austin, Texas 78702

June 26, 1990

Mr. Mark de Santos
311 FM 620 South
Austin, Texas 78734

Dear Mr De Santos:

An inspection of your property located at 3411 FM 620 South, on June 13, 1990 by the Austin-Travis County Health Department has revealed it to be in violation of Rules of Travis County for Private Sewage Facilities. A hold has been placed on the utilities. The following must be completed in order for our department to release the hold on utilities: (1) Submit disposal system plans for review and approval to Ervin Coonrod, R. S., and obtain permit for septic system. (2) Submit plans for review of establishment to Barrie Turano.

If you need further information, please contact Ervin Coonrod, R.S., at 469-2015.

Respectfully,

Fred Rodgers, P.E., Division Director
Environmental Health Services

FR:ap

Enclosure

June 22, 1990

Mark de Santos Narrative:

On June 13, 1990, I stopped at a food service establishment in the process of being built at 3411 RR 620 S (said establishment does not currently have a name.) I stopped because I noticed a bulldozer behind the building clearing away brush. Mr. Mark de Santos, owner, gave me a tour of his establishment and indicated that he is about to install electrical and plumbing. I indicated that he should submit plans for review to Barrie Turano as soon as possible. I also inquired about his plans for a septic system, and he indicated that his engineer, Herndon Bailey, is in the process of designing his septic system. He asked me about the size of his drainfield, i.e., what size drainfield I thought his business might need. I stated he needed to ask his engineer about the size of his drainfield because I am not qualified to provide technical information related to septic systems. I left my card with him with Barrie Turano's name written on it and encouraged him to make an appointment for a plan review before installing his plumbing or electrical system.

AUSTIN-TRAVIS COUNTY HEALTH DEPARTMENT
Environmental Health Services Division
15 Waller Street
Austin, Texas 78702

TO: Irene Hendrickson
Utility Customer Service Office

FROM: Fred Rodgers, P.E., Division Director
Environmental Health Services Division

DATE: June 26, 1990

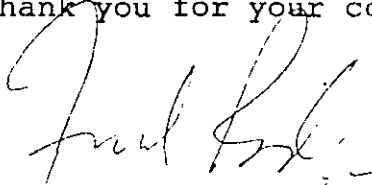
SUBJECT: HOLD ON UTILITIES at 3411 FM 620 North

Please place a hold on the utilities for the following reasons:

- No permit for septic system
- Septic system not completed to Health department requirements
- Disposal system plans not submitted and/or approved
- Disposal system failed and requires repair/replacement
- Other - Submit plans for review of establishment to Barrie Turano.

If you have any questions please call Linda Klaus, R.S. or David Kuhles, R.S. at 469-2022.

Thank you for your cooperation in this matter.


Fred Rodgers, P.E., Division Director
Environmental Health Services Division

AUSTIN-TRAVIS COUNTY HEALTH DEPARTMENT
WASTEWATER DISPOSAL RECORD

Receipt # 098433

Address 3411 FM 620 North
 Lot _____ Block _____ Sub. LEONARD Eck
 Owner O. E. McBride
 Installer S + S
 Engineer _____

Type of dwelling 2 offices Bedrooms 2 Bath

Percolation test: Date 9-16-82 Depth 32"

Soil Type Loose + Hard Caliche

Fall in inches/30 minutes _____

#1 2 1/4 #2 3 #3 _____ #4 _____

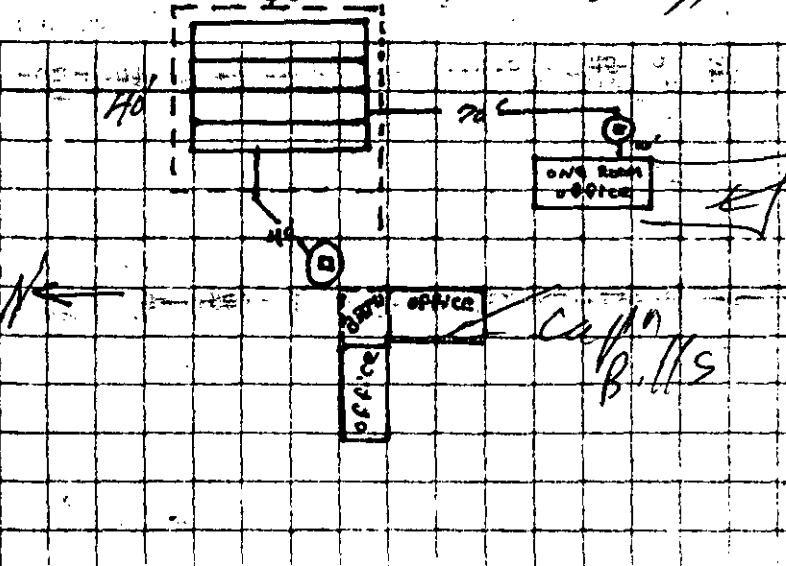
Tank Capacity 1000 / 1000 Material CONCRETE

Length of Field 45' Width 40'

Effective Area 1800 sq' Gravel Depth 12"

Sand Depth 10" Fill Depth 8"-16"

Final Date 9-30-82 Signed [Signature] P.S.



*Check for possible
room to expand*

*A new site for
drainfield for
M.H. in back*

*No mobile Home
1 bathroom
connecting pipe*

office

*CARRON
B. H. S.*

Beaman

Receipt # 476096
Date Paid 6/3/85
Amount (50.00) CILP 213
Address _____
W & WW _____

AUSTIN-TRAVIS COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES DIVISION
15 Waller Street, Austin, Texas 78702

For Office Use Only

Application for PRIVATE SEWAGE FACILITY (Inside Austin)

1. Site Address 3411 RR 600 Bldg. Permit # _____
Number and Street

2. Legal Description: _____ Subdivision _____ Unplatted

3. Service Requested:
Construction Permit (\$135) _____ Reinspection (\$30) _____
Add. fee/Engineered System (\$40) Certification Letter (\$40) _____
Percolation Test Only (\$50)

4. Property Owners Name Robert F. Bland, Jr. Phone 477-7700
Address 703 W. 9th, Austin, TX 78701

5. Builder or Agent _____ Phone _____
Address _____

6. Engineer's Name * _____ Phone _____

7. Installer's Name _____ Phone _____

8. Source of Water: Private Well _____ Public Water Supply WD #17
Name of Supply

9. Type of Development:
 Single/Fam Residential No. of Bedrooms _____ Size of Residence _____
 Institutional (including multi-family residential) (sq.ft.) _____
 Institution _____
Size of Building _____ sq. ft.
Number of Employees _____ No. of Lavatories _____
Days Occupied per week _____ No. of Showers _____
Type _____ No. of Clothes/Dish Washers _____
No. of Toilets/Urinals _____ No. of Floor Drains _____
Estimated Daily Water Consumption _____ gpd
Is process water used? _____

10. Percolation Tests:
 I request that the Health Department perform the percolation test.
 Percolation test results are attached.

11. An organized sewer system () is (is not located within 100 ft. of the property.

I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT. AUTHORIZATION IS HEREBY GIVEN TO THE HEALTH DEPARTMENT TO ENTER UPON THE ABOVE DESCRIBED PRIVATE PROPERTY FOR THE PURPOSE OF LOT EVALUATION AND INSPECTION OF PRIVATE SEWAGE FACILITIES.

Robert F. Bland, Jr.
Signature of Owner _____ Date 6/3/85

A PLOT PLAN MUST BE SUBMITTED WITH THIS APPLICATION (see attached instructions)

* Required for alternative private sewage facilities, commercial private sewage facilities producing more than 500 gpd of wastewater and collective private sewage facilities.

CONTACT THE HEALTH DEPARTMENT BEFORE BEGINNING ANY CONSTRUCTION: 469-2015 91841/4066

Instructions for Plot Plan

The application for a private sewage facility is not complete unless accompanied by a plot plan of the property. Use 8½"x11" paper. This drawing must accurately show:

- a. Outline and size of property.
- b. Location and dimensions of all proposed facilities such as buildings, swimming pools, driveways and other paved areas, patios, decks and any trees that will be preserved.
- c. Wells, existing or proposed, including those on adjoining property within 150 feet of the proposed private sewage facility. Conversely, show any private sewage facility on adjoining properties which will be within 100 feet of any proposed or existing wells.
- d. Potable water lines.
- e. Areas to be cut or filled.
- f. Direction of north.
- g. Nearest public road and name of road.
- h. Easements.
- i. Distance and direction to and name of any organized sewer collection system line with 500 feet of property line.
- j. Creeks, dry washes, drainage ditches, ponds or lakes.
- k. Sharp slopes, breaks, areas of slope greater than or equal to 15%
- l. Twenty-five year flood plain or statement that there is no flood plain on the lot.
- m. Proposed location of private sewage facility components, including type and size of septic tank.
- n. Location of percolation test holes. These holes must be located where the absorption beds will be installed.
- o. NOTE: If Engineer's plans are submitted, the information requested above must be included on those plans.

* An example sketch is provided on the back of these instructions.

2 BR # Bath

500 ft² → Rock 50% oversize

→ 50 ft² of trench

60/375⁶

1000 ft² for Pit

3 BR 1150 ft² of trench

1300 ft² Pit

2" perK 6/13/85

Mark ~~De~~

De Santos

Mark Boat Rentals

266-2888

Mrs. McBride

Family Circle BBQ
Box Lunch

Captain Bill's

WICD #17

COA - Elec -

Septic System -

PLAN Review

The attached inspection report lists the violations which must be corrected and the time period in which such corrections must be made. This suspension may be lifted as soon as the conditions for which it was imposed have been corrected, but only on re-inspection by the sanitarian ordering closure or other authorized Health Department representative.

For additional information, please contact _____, Supervisor, Community and Consumer Protection Program or Mary Bell Lockhart, R.S., Manager, General Environmental Programs, at 469-2015.

Received by

Sanitarian



AUSTIN TRAVIS COUNTY HEALTH DEPARTMENT

Bureau of Environmental Health Services
15 Waller Street
Austin, Texas 78702
(512) 469-2022

Name of establishment: _____

Date: _____

Address: _____

STATEMENT REGARDING CLOSURE OF FOOD ESTABLISHMENT

This is to notify you that your Food Establishment has been found to be in violation of the Texas Department of Health "Rules on Food Service Sanitation"/"Rules on Retail Food Store Sanitation". Accordingly, this Food Establishment is ordered to close under the provisions of section 229.171/229.238 of said Rules, and the Texas Food, Drug and Cosmetic Act, Article 4476-5, Vernon's Texas Civil Statutes. This closure is ordered due to one or more of the following conditions:

- () 1. The presence of an imminent health hazard; to wit:

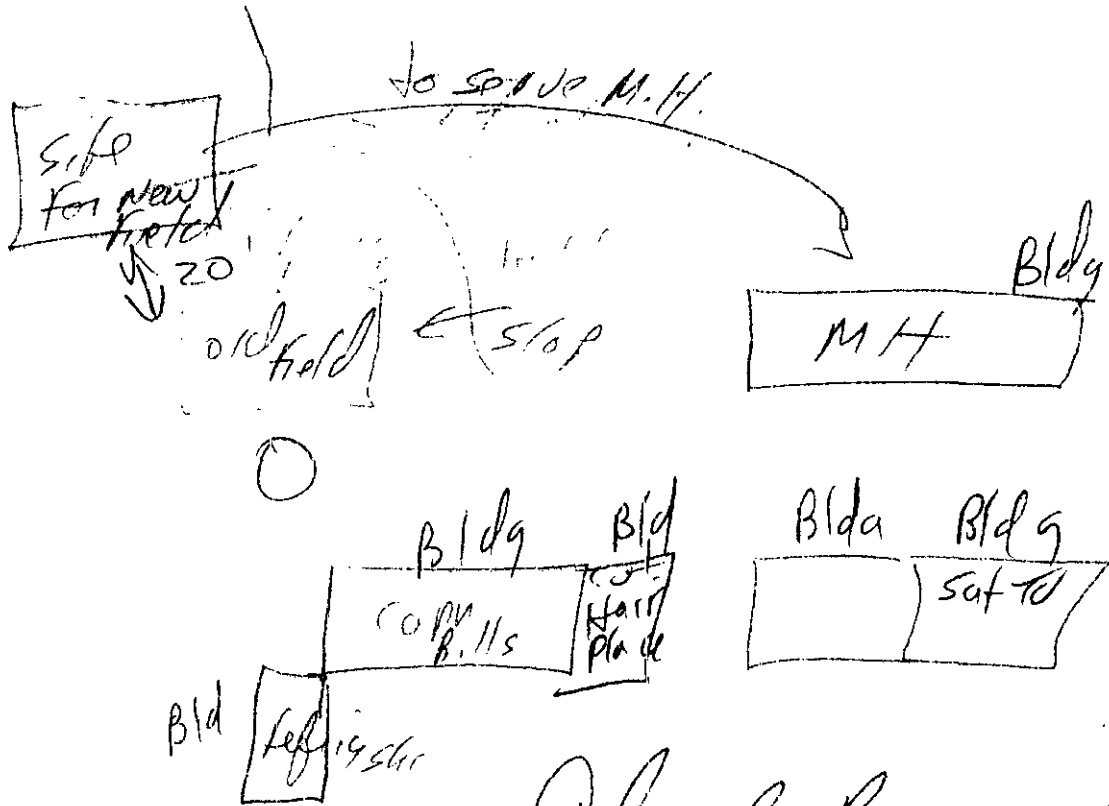
- () 2. Failure to initiate corrective action on all identified violations within 48 hours of notice to do so. An inspection with score below 60 was made on _____.

You have the right to request a hearing to appeal this order, but the food establishment must remain closed until this appeal is decided or the violations are corrected. To appeal this order, send a written request to Dr. Solbritt E. Murphy, Health Authority, 15 Waller Street, Austin, Texas 78702. A hearing on your appeal will be granted within 10 days of receipt of your written request.

AUSTIN/TRAVIS COUNTY HEALTH DEPARTMENT
Environmental Health Services Division
15 Waller Street
Austin, Texas 78702
Telephone: 469-2022

**SANITARIAN FIELD INSPECTION REPORT
FOR
PRIVATE SEWAGE FACILITIES**

Date 4/26/85 Time 2:20 ^{a.m.}/_{p.m.} APPLICATION NO. _____
 Address 3411 FM 620 N
 Legal Description _____
 Installer _____
 This report directed to: Blair



Received by (name & title) _____

Charles Beaumont
Sanitarian

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AUSTIN/TRAVIS COUNTY HEALTH DEPARTMENT
Environmental Health Services Division
15 Waller Street
Austin, Texas 78702
Telephone: 469-2022

**SANITARIAN FIELD INSPECTION REPORT
FOR
PRIVATE SEWAGE FACILITIES**

PK only

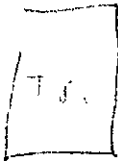
Date 6/15/85 Time 1200 a.m. APPLICATION NO. _____
p.m.

Address 3411 RR620

Legal Description _____

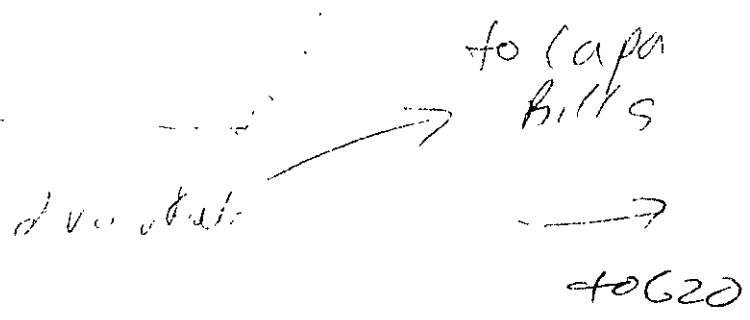
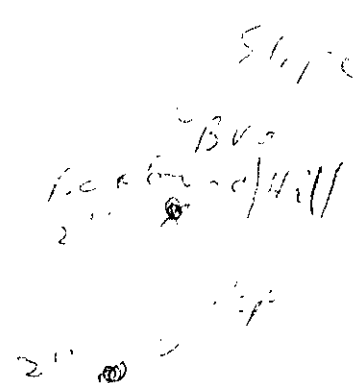
Installer 1

This report directed to: Robert Alan



*trench syst. designed
24" & stepped
down*

*Bad Rock
4' to 30'
36'
15000
even
5' in a (level)*



Received by (name & title)

Charles Beaman R.S.
Sanitarian

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IN TRAVIS COUNTY. (FOR ENGINEERED DESIGNED SYSTEMS: THIS REPORT IS NOT A
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IF AN INSPECTION IS CALLED FOR AND ONE OR MORE ITEMS IS NOT READY, THOSE ITEMS WILL REQUIRE A REINSPECTION. EXCEPTIONS OR VARIANCES MUST BE SUBMITTED IN WRITING TO THE COUNTY SUPERVISOR.

FIELD NOTES

System oversized to allow for some expansion.
JDM

AUSTIN TRAVIS COUNTY HEALTH DEPARTMENT
 WASTEWATER DISPOSAL RECORD

Receipt # 098433

Address 3411 FM 620 North

Lot _____ Block _____ Sub. LEONARD ECK

Owner O. E. McBRIDE

Installer S + S

Engineer _____

Type of dwelling 2 offices Bedrooms 2 Bath 1

Percolation test: Date 9-16-82 Depth 32"

Soil Type Loose + Hard Caliche

Fall in inches/30 minutes _____

#1 2 1/4 #2 3 #3 _____ #4 _____

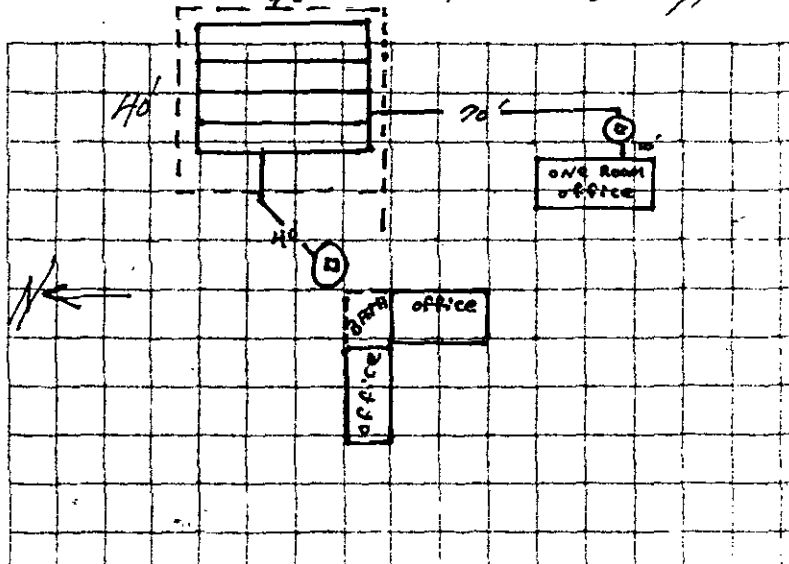
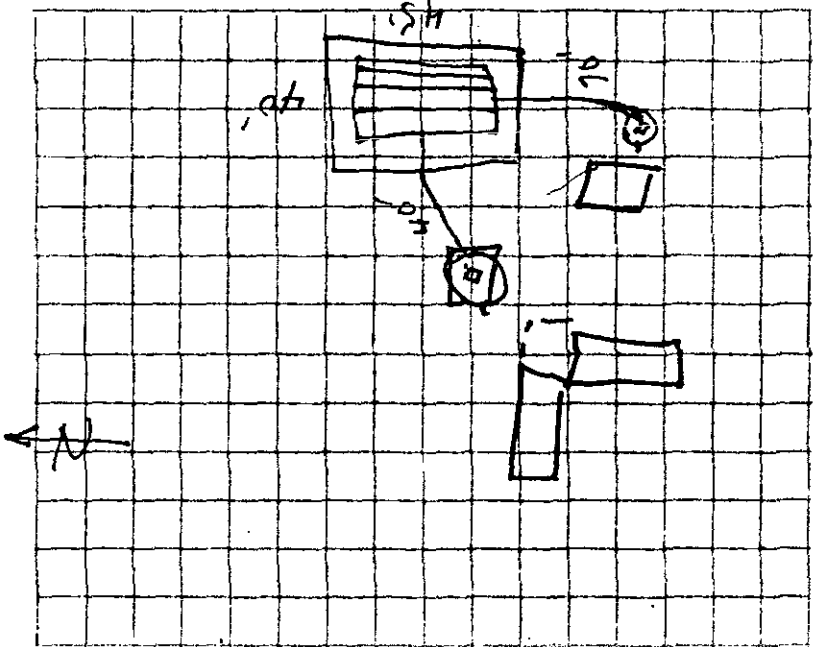
Tank capacity 1000 / 1000 Material Concrete

Length of Field 45' Width 40'

Effective Area 1800 sq' Gravel Depth 12"

Sand Depth 10" Fill Depth 8"-16"

Final Date 9-30-82 Signed D. J. Nelson, P.E.



Check if OK or meets specifications

Property is legally subdivided

PERCOLATION TEST

- 2 holes, 6 to 10 inches in diameter, 20 feet apart and a minimum of 30 inches deep: if drainfield is to be deeper, holes must be deeper.
- Holes properly pre-saturated
- Holes meet all setbacks from wells, slopes, etc.

Comments and Special Requirements

Perc's 2 1/4" 3"
750-1000 1200' total combined
minimum

Born *9-16-82*
 (Sanitarian) (date)

PIT INSPECTION

- Depth of drainfield is at least 30 inches
- Bottom of drainfield is level (2 inch tolerance - use eye level)
- Pit size as required.
- No springs, seepage or groundwater present
- Drainfield is not bedded in rock
- Drainfield dug where perc test run
- Septic tank leveled on 4 inch minimum of washed sand

Comments

Born *9/28/82*

- Minimum 12 inches of 1 1/2-2 1/2 inch gravel or hard crushed rock (one or more holes dug to bottom of drainfield).
- Minimum 10 inches of washed sand on site (Tickets available for inspection)
- 4 corners of pipe in drainfield open for level check (use eye level)
- Drainfields wider than 20 feet must have cross pipes on 12 foot centers.
- At least 6 inches gravel beneath perforated pipe
- D/A* If drainfield is deeper than 30 inches extra depth must be made up with sand or sandy loam.
- Adequate backfill material, either sandy loam or pre-approved material on-site; no more than 10 inches original soil as backfill.
- Minimum 1/4 inch-per-foot fall throughout line from house to septic tank (use eye level)
- Minimum 1/8 inch-per-foot fall throughout line from septic tank to drainfield (use eye level)
- Concrete septic tank and pipes must be grouted to make air tight seal.
- Tank is level, outlet pipe at least 3 inches below inlet pipe.
- Sanitary Tee's extensions in tank must be cemented in.
- Adequate hay or paper on site

Comments

Born *9/30/82*

FILED

FEB 20 8 05 AM '85

NOTICE

THE STATE OF TEXAS
COUNTY OF TRAVIS

X
X
X

Doris Shropshire
COUNTY CLERK
TO ALL PERSONS INTERESTED:

William S. Jones, III

has (have) filed a petition with the County Judge of Travis County, Texas, on the 20th day of February, A.D., 1985, for a permit for a Wine & Beer Retailer's Permit to be issued to Captain Bill's Restaurant, which place of business will be located at 3411 RR 620 N. "B", Austin, Texas in Travis County, Texas.

The affidavits required by law have been made and appended to said application.

Said petition will be heard by the County Judge on the 25th day of February, A.D., 1985, at 9:00 o'clock A.M., at the Courthouse of said County in Austin, Texas.

Witness my hand and official seal at Austin, Texas, this the 20th day of February A.D., 1985.

DORIS SHROPSHIRE
County Clerk
Travis County, Texas

By Kim Crow, Deputy
Kim Crow

RETURN

I certify that a true copy of the above notice was posted by me at the Courthouse door of Travis County, Texas, on the 20th day of February A.D., 1985.

DORIS SHROPSHIRE
County Clerk
Travis County, Texas

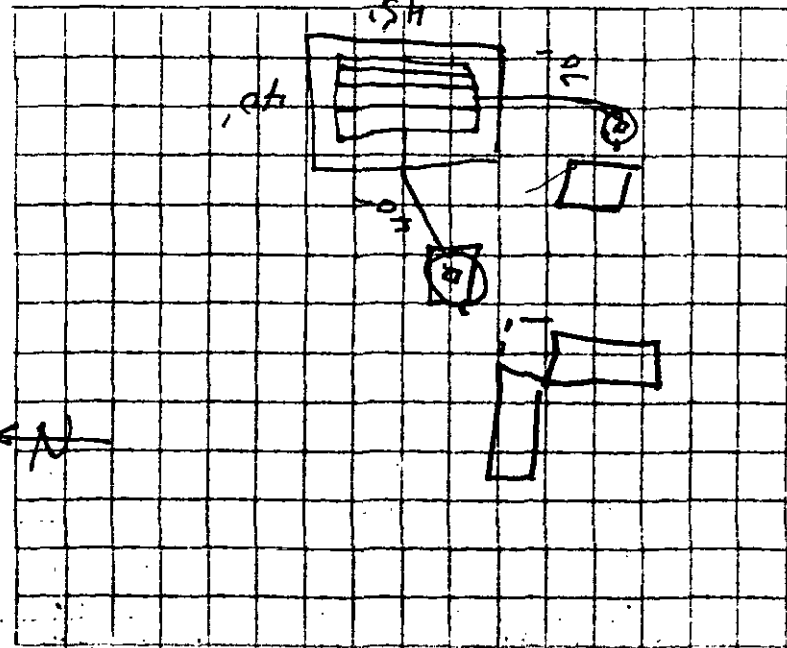
By Kim Crow, Deputy
Kim Crow

*Next to lunch box
put it of DP or otherwise*

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FIELD NOTES

System oversized to allow for some expansion.
BM



AUSTIN-TRAVIS COUNTY HEALTH DEPARTMENT
 WASTEWATER DISPOSAL RECORD

Receipt # 098433

Address 3411 FM 620 North

Lot _____ Block _____ Sub. LEONARD ECK

Owner O. E. Mc Bride

Installer S + S

Engineer _____

Type of dwelling 2 offices Bedrooms 2 Bath

Percolation test: Date 9-16-82 Depth 32"

Soil Type Loose + Hard Caliche

Fall in inches/30 minutes _____

#1 2 1/2 #2 3 #3 _____ #4 _____

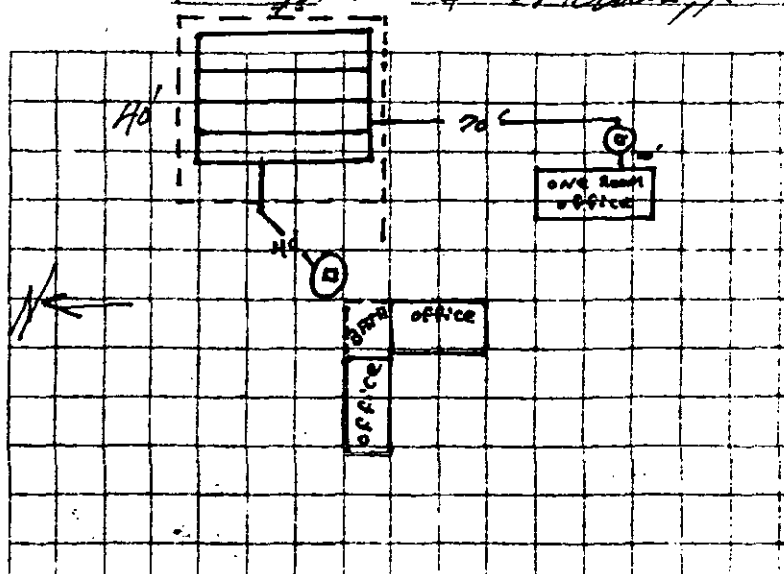
Tank capacity 1000 / 1000 Material Concrete

Length of Field 45' Width 40'

Effective Area 1800 sq' Gravel Depth 12"

Sand Depth 10" Fill Depth 8"-16"

Final Date 9-30-82 Signed [Signature]



Check if OK or meets specifications

- Property is legally subdivided

PERCOLATION TEST

- 2 holes, 6 to 10 inches in diameter, 20 feet apart and a minimum of 30 inches deep: if drainfield is to be deeper, holes must be deeper.
- Holes properly pre-saturated
- Holes meet all setbacks from wells, slopes, etc.

Comments and Special Requirements

Perc's 2 1/4" 3"
750 - 1000 / 1200⁰ total combined
minimum

Born 9-16-82
(Sanitarian) (date)

PIT INSPECTION

- Depth of drainfield is at least 30 inches
- Bottom of drainfield is level (2 inch tolerance - use eye level)
- Pit size as required.
- No springs, seepage or groundwater present
- Drainfield is not bedded in rock
- Drainfield dug where perc test run
- Septic tank leveled on 4 inch minimum of washed sand

Comments

Born 9/25/82

- Minimum 12 inches of 1 1/2-2 1/2 inch gravel or hard crushed rock (one or more holes dug to bottom of drainfield).
- Minimum 10 inches of washed sand on site (Tickets available for inspection)
- 4 corners of pipe in drainfield open for level check (use eye level)
- Drainfields wider than 20 feet must have cross pipes on 12 foot centers.
- At least 6 inches gravel beneath perforated pi;
- If drainfield is deeper than 30 inches extra depth must be made up with sand or sandy loam.
- Adequate backfill material, either sandy loam or pre-approved material on-site; no more than 10 inches original soil as backfill.
- Minimum 1/4 inch-per-foot fall throughout line from house to septic tank (use eye level)
- Minimum 1/8 inch-per-foot fall throughout line from septic tank to drainfield (use eye level)
- Concrete septic tank and pipes must be grouted to make air tight seal.
- Tank is level, outlet pipe at least 3 inches below inlet pipe.
- Sanitary Tee's extensions in tank must be cemented in.
- Adequate hay or paper on site

Comments

Born 9/30/82



**ATCHD ENVIRONMENTAL HEALTH SERVICES
COMPLAINT/REQUEST REPORT**

TIME: ____:____

LOCATION _____
(lot or block) _____ (street) _____ (tax parcel)

BUSINESS NAME _____

COMPL/REQ NAME _____ PHONE: _____

ADDRESS _____

COMM/COUNC/MAN ____ REPORT TO: _____

COMPL/REQ TYPE 106 REC'D BY _____ DUP ____ SEE _____

COMPLAINT/REQUEST: _____

SPRAY FOR MOSQUITOES

REFERRAL: PROGRAM/PERSON 106 / RD _____ / _____ / _____ INIT. RESP. DATE _____

REPORT: _____

COMPLETED DATE: _____ CLEARANCE TIME: _____ (DAYS)

SUPERVISOR: _____ DIS. CODE _____

FILE: CITY GEN ____ COUNTY GEN ____ FOOD ____ PC ____ WC ____ AP ____ VC ____ RC ____

$$15 \text{ gal/person} \\ \times 20$$

$$300 \text{ gal/shift} \\ \times 3 \text{ "}$$

$$900 \text{ gal/day} \\ \times 30 \text{ day/mo}$$

27,000

$$A = 30 \\ \text{R.A}$$

$$3 \times 900 \\ / 1.3$$

2076 #

~~15 gal/person~~



ATCHD ENVIRONMENTAL HEALTH SERVICES
COMPLAINT/REQUEST REPORT

TIME: _____

LOCATION _____
(lot or block) (street) (tax parcel)

BUSINESS NAME _____

COMPL/REQ NAME _____ PHONE: _____

ADDRESS _____

COMM/COUNC/MAN ____ REPORT TO: _____

COMPL/REQ TYPE 106 REC'D BY _____ DUP ____ SEE _____

COMPLAINT/REQUEST: _____

SPRAY FOR MOSQUITOES

REFERRAL: PROGRAM/PERSON 106 / RD _____ / _____ / _____ INIT. RESP. DATE _____

REPORT: _____

COMPLETED DATE: _____ CLEARANCE TIME: _____ (DAYS)

SUPERVISOR: _____ DIS. CODE _____

FILE: CITY GEN ____ COUNTY GEN ____ FOOD ____ PC ____ WC ____ AP ____ VC ____ RC ____

$$15 \text{ gal/person}$$

$$\times 60 \text{ ''}$$

$$= 900 \text{ gal/shift}$$

$$\times 3 \text{ ''}$$

$$2700 \text{ gal/day}$$

$$\times 30 \text{ day/mo}$$

$$81,000$$

$$A = \frac{30}{RA}$$

$$\frac{3 \times 8100}{1.3} =$$

$$18200$$

$$=$$

$$6230 \text{ P}$$

SEWAGE

CITY OF AUSTIN-TRAVIS COUNTY HEALTH DEPARTMENT

15 Waller Street, Austin, Texas 78702

Name: Caplan's Bill's William J Jones Owner

Address: 3411 RP 620 (N) Date: 3-1-85

This is to inform you that a condition, in violation of the City Ordinance and/or State Law, exists on your property at _____ Austin, Texas,

as follows: sewage effluent running on surface of ground in violation of Texas Water Code, Sec. 26.032 (e) and Rules of Travis County for Private Sewage Facilities Chap. 5.02(h)&(j).

Have septic tank pumped immediately by licensed pump service and as necessary to prevent overflow. Make permanent repairs within 30 days.

and the same is required to be corrected within 30 days. PLEASE CEASE OPERATIONS IMMEDIATELY

FAILURE TO COMPLY WITH THIS NOTICE WITHIN THE TIME SPECIFIED MAY RESULT IN LEGAL ACTION.

Inspector serving this notice may be contacted at 469-2015 during the following office hours: Week-days 7:45 a.m.-4:45 p.m.



Respectfully,
Austin-Travis County Health Department

By David Kishles, R.S.
Sanitarian

1900

William J. Fox

Restaurant

4/18/90

3411 - A RR 620N

1 pm

Mike DeSantos -

~~Boheway~~
~~Lohmann Crossing~~
~~Parkway~~
~~McBride Paper Clips~~

talked about plans, reviews
CCP requirements, PSF

Heardon Bailey - engineer for
septic

266-2889

261-3561

AUSTIN-TRAVIS COUNTY HEALTH DEPARTMENT
Environmental Health Services Division
13 Sabine Street, Austin, Texas 78701

Please Do Not Write in this Block
Receipt No. 098433
Amount Paid 80.00 Date 8-23-80

APPLICATION FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT

NAME (owner/builder) MCBRIDE OREN E Phone 266-2700
(Last) (First) (Middle)

SITE ADDRESS 3411 FM RD 620 North
 Temporary (Number and Street or Box or Complete Description of Location)

LEGAL DESCRIPTION Inter Tap RW survey Parcel F (k)
(Subdivision) (Section No.) (Block No.) (Lot No.)

SUBDIVISION STATUS

- UNPLATTED - Percolation Test for Subdivision Approval Only - Subdivision Required
- EXEMPT - No Subd. Required
- PLATTED - See above Legal Des:

NOTE: Please attach a map or sketch showing roads, landmarks, and distances when this may be needed to locate the property.

DRINKING WATER SOURCE: Travis Co WD 17 Public Water Supply Travis Co WID#17 Private Well

NUMBER OF BEDROOMS NONE (Include studies and other similar areas)

I affirm the above statements are true and correct.

Signed O. McBride Address 5708 Longhorn Landing Austin 78756 Date 8-2
CONTACT THE HEALTH DEPARTMENT BEFORE BEGINNING ANY CONSTRUCTION: 474-6581, ext. 210-2.

AUSTIN-TRAVIS COUNTY HEALTH DEPARTMENT
Environmental Health Services Division
1313 Sabine Street, Austin, Texas 78701

Please Do Not Write in this Block
Receipt No. 098433
Amount Paid 82.00 Date 8-23-82

APPLICATION FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM PERMIT

129988
Phone 266-2700

NAME (owner/builder) McBRIDE OREN E
(Last) (First) (Middle)

SITE ADDRESS 3411 FM RD 620 North
(Number and Street or Box or Complete Description of Location)

LEGAL DESCRIPTION Inter Top Survey Leonard E Ck
(Subdivision) (Section No.) (Block No.) (Lot No.)

SUBDIVISION STATUS

- UNPLATTED - Percolation Test for Subdivision Approval Only - Subdivision Required
- EXEMPT - No Subd. Required
- PLATTED - See above Legal Des:

NOTE: Please attach a map or sketch showing roads, landmarks, and distances when this may be needed to locate the property.

DRINKING WATER SOURCE: WD 17 ^{Travis Co} Public Water Supply WD 17 ^{Travis Co} Private Well

NUMBER OF BEDROOMS NONE (Include studies and other similar areas)

I affirm the above statements are true and correct.

Signed O. McBride Address 5708 Longhorn Landing Austin 78734 Date 8-23-82

CONTACT THE HEALTH DEPARTMENT BEFORE BEGINNING ANY CONSTRUCTION: 474-6581, ext. 210-2

SURVEY OF A PORTION OF THE LT. ECK SURVEYS NO. 162 and NO. 164 TRAVIS COUNTY, TEXAS

CURVE DATA

R = 768.45'
 Δ = 7° 16' 47"
 L = 97.64'
 C = 97.57'

Scale 1" = 40'

Legend

- 1/2" Bar Found
- 3/4" Pipe Found
- ⊙ 1/2" Bar Set
- △ Bar Found
- ▷ 60d Nail Found

THIS TRACT IS SUBJECT TO THE FOLLOWING EASEMENTS

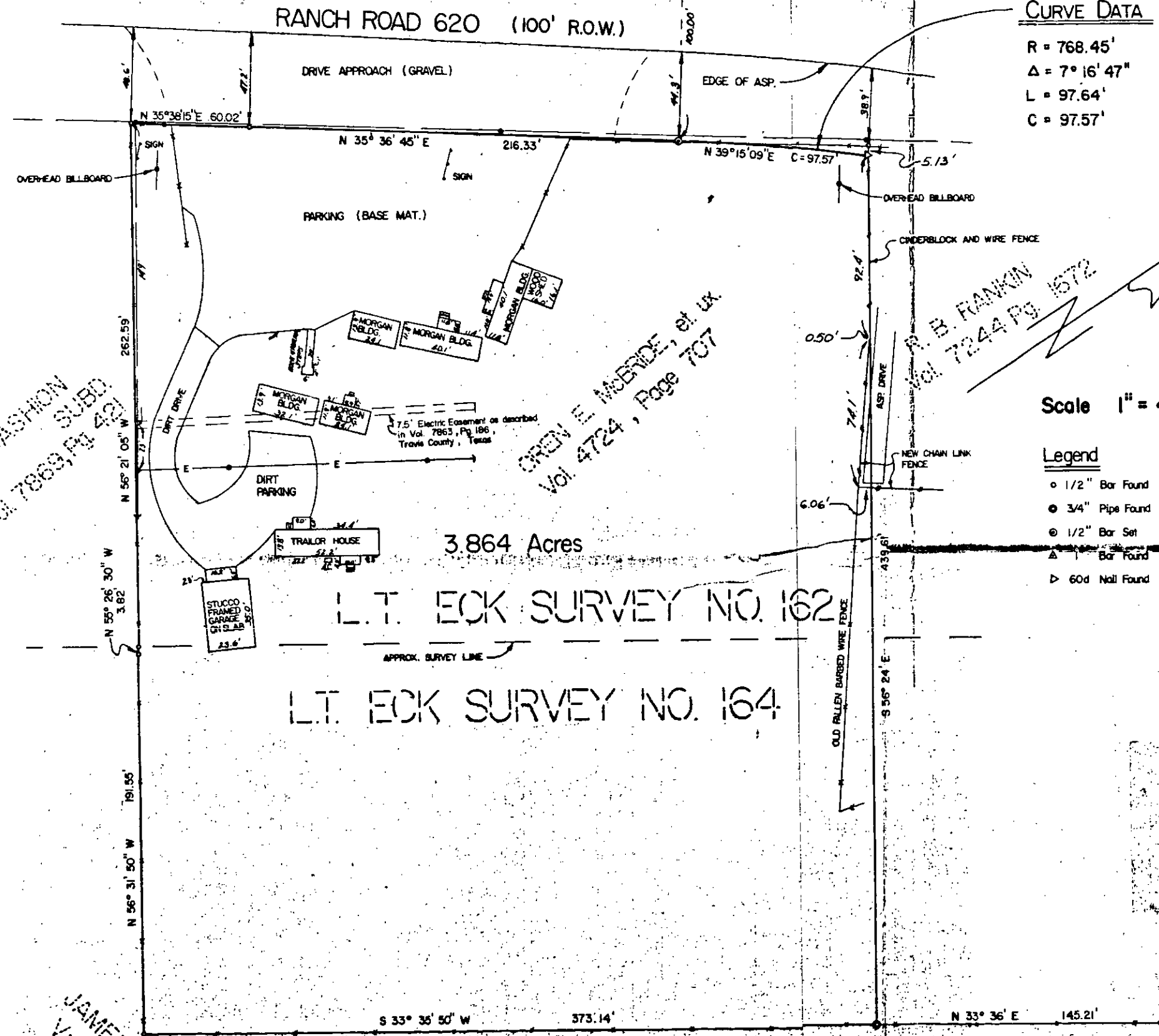
Volume/Page	Description
564/512	to Travis County right of way for public roadway "approximately eight (80) feet wide and approximately 6.888 feet long" cannot be located.
589/300	to L.C.R.A. tract subject only to ingress-egress. The electric transmission line was built per plans elsewhere on the parent tract.
706/324	to R. K. Allen right of way for underground water line with route to be selected by R. K. Allen. No description, cannot be located.

The undersigned does hereby certify that this survey was this day made on the ground of the property legally described hereon and is correct, there are no discrepancies, conflicts, shortages in area, boundary line conflicts, apparent encroachments, overlapping of improvements, visible utility lines or roads in place, except as shown hereon, and that said property has access to and from a dedicated roadway, except as shown hereon.

I hereby certify that the property described herein is not within a special Flood Hazard Area, as identified by the Federal Insurance Administration, Department of Housing and Urban Development on Community Panel No. 481026-0285, Zone C, dated 4/01/82. Dated this the 1st day of July, 1983.



BARBER AND TRIMBLE LAND SURVEYORS
 1030 S. LAMAR, SUITE H AUSTIN, TEXAS 78704
 512-444-9963



CASHION SUBD
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CHRY E. MURKIN, et. ux.
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R. B. FRANKIN
 Vol. 7244 Pg. 1572

JAMES THOMAS
 Vol. 7869, Pg. 421

JOB NO. 83-0082
 DATE 7-1-83
 CLIENT JOHN TURNER
 F.B. 12, 8-16