

Comal County Environmental Health

OSSF Inspection Sheet

Installer Name: V. Castro OSSF Installer #: _____
 1st Inspection Date: 7/20/18 2nd Inspection Date: 10-09-19 3rd Inspection Date: _____
 Inspector Name: Mike T. Inspector Name: B. Olvera Inspector Name: _____
 Permit#: 106122 Cypress Lake Garden / 1415 Covered Wagon

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
1	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials	✓	285.31(a) 285.30(b)(1)(A)(iv) 285.30(b)(1)(A)(v) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(ii) 285.30(b)(1)(A)(i)	no insp. 2 tanks 7/20/18 Covered. No Trenches yet.			
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards		285.91(10) 285.30(b)(4) 285.31(d)				
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)		285.32(a)(1)				
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot		285.32(a)(3)				
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)		285.32(a)(5)				
6	PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(G) 285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(A) 285.32(b)(1)(E)(ii)(ii) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(i)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

10-09-19 BMO
 No trenches tank
 covered
 (Feed Check)

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8	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If Single Tank, 2 Compartments Provided with Baffle SEPTIC TANK Inlet Flowline Greater than 3" and "T" Provided on Inlet and Outlet SEPTIC TANK Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(E) 285.91(2) 285.32(b)(1)(F) 285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(ii)(I) 285.32(b)(1)(E)(ii)(I) 285.32(b)(1)(E)(i) 285.32(b)(1)(D) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C)(i) 285.32(b)(1)(B) 285.32(b)(1)(A) 285.32(b)(1)(E)(iv)				
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
10	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
11	SEPTIC TANK Secondary restraint system provided SEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
12	SEPTIC TANK Tank Volume Installed						
13	PUMP TANK Volume Installed						
14	AEROBIC TREATMENT UNIT Size Installed						
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number						
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

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20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(4) 285.33(a)(3) 285.33(a)(1)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
24	DISPOSAL SYSTEM Other (describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
25	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC						
26	DRAINFIELD Area Installed						
27	DRAINFIELD Level to within 1 Inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
28	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
29	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
30	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.)		285.33(c)(2)				
31	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)				

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No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	<p>EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling</p> <p>EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0%</p> <p>EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom)</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart</p>		<p>285.33(b)(3)(A)</p> <p>285.33(b)(3)(A)</p> <p>285.33(b)(3)(B)</p> <p>285.91(13)</p> <p>285.33(b)(3)(D)</p> <p>285.33(b)(3)(F)</p>				
33	<p>AEROBIC TREATMENT UNIT is Aerobic Unit Installed According to Approved Guidelines.</p>		285.32(c)(1)				
34	<p>AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided</p> <p>AEROBIC TREATMENT UNIT Secondary restraint system provided</p> <p>AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank</p> <p>AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions</p>						
35	<p>AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.</p>						
36	<p>PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction</p> <p>PUMP TANK Sampling Port Provided in the Treated Effluent Line</p> <p>PUMP TANK Check Valve and/or Anti-Siphon Device Present When Required</p> <p>PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump</p>						
37	<p>PUMP TANK Inspection/Clean Out Port & Risers Provided</p> <p>PUMP TANK Secondary restraint system provided</p> <p>PUMP TANK Riser permanently fastened to lid or cast into tank</p> <p>PUMP TANK Riser cap protected against unauthorized intrusions</p>						
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No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

106122 at 1415 Covered Wagon

114.91'

04/30/2019 11:22



04/30/2019 11:22



04/30/2019 11:22

Comal County Environmental Health

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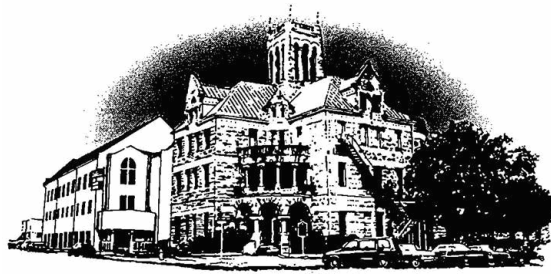
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Comal County Environmental Health
OSSF Inspection Sheet

39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried								
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OSSF Inspection Sheet**

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44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



Comal County

OFFICE OF COMAL COUNTY ENGINEER

Permit of Authorization to Construct an On-Site Sewage Facility Permit Valid For One Year From Date Issued

Permit Number: 106122
Issued This Date: 07/19/2017
This permit is hereby given to: Hugo Acuna Ugarte

To start construction of a private, on-site sewage facility located at:

1415 COVERED WAGON
SPRING BRANCH, TX 78070

Subdivision: Indian Hills
Unit: Western Skies Section
Lot: 4
Block: 103
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Septic Tank
Leaching Chambers

This permit gives permission for the construction of the above referenced on-site facility to commence. Installation must be completed by an installer holding a valid registration card from the Texas Commission on Environmental Quality (TCEQ). Installation and inspection must comply with current TCEQ and Comal County requirements.

Call (830) 608-2090 to schedule inspections.

*** COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH
APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN
ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE

REVISED

3:16 pm, Jul 19, 2017

Date 06/24/2017

Permit # 106122

Owner Name Hugo Aana Ugarte

Agent Name Virginia Castro

Mailing Address 1234 S. Saint Marys st Apt 3

Agent Address 2970 Rolling Hills

City, State, Zip 78210

City, State, Zip Blanco TX 78606

Phone # 210-330-1972

Phone # (210) 275-8523

Email [REDACTED]

Email Vleedwards

All correspondence should be sent to: ☐ Owner ☐ Agent ☐ Both Method: ☐ Mail ☐ Email

Subdivision Name Cypress Lake Gardens Western Skies Unit Section Lot 4 Block 03

Acreage/Legal _____

Street Name/Address Covered Wagon City Spring Branch Zip 78070

Type of Development:

☒ Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) mobile home

Number of Bedrooms 2

Indicate Sq Ft of Living Area under 1500

☐ Commercial or Institutional Facility

(Planning materials must show adequate land area for doubling the required land needed for treatment units and disposal area)

Type of Facility _____

Offices, Factories, Churches, Schools, Parks, Etc. - Indicate Number Of Occupants _____

Restaurants, Lounges, Theaters - Indicate Number of Seats _____

Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds _____

Travel Trailer/RV Parks - Indicate Number of Spaces _____

Miscellaneous _____

Estimated Cost of Construction: \$ 0,000 (Structure Only)

Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement?

☐ Yes ☒ No

(If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water ☒ Public ☐ Private Well

Are Water Saving Devices Being Utilized Within the Residence? ☒ Yes ☐ No

I certify that the completed application and all additional information submitted does not contain any false information and does not conceal any material facts. Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities. I also understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.

Signature of Owner [Signature]

Date _____

Page 1 of 2

*** COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH ***

APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN
ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE

Planning Materials & Site Evaluation as Required Completed By Virginia Castro

System Description Proprietary: septic tank with leaching chambers

Size of Septic System Required Based on Planning Materials & Soil Evaluation

Tank Size(s) (Gallons) 750 Absorption/Application Area (Sq Ft) 675

Gallons Per Day (As Per TCEQ Table III) 180

(Sites generating more than 5000 gallons per day are required to obtain a permit through TCEQ.)

Is the property located over the Edwards Recharge Zone? ☐ Yes ☒ No

(If yes, the planning materials must be completed by a Registered Sanitarian (R.S.) or Professional Engineer (P.E.))

Is there an existing TCEQ approved WPAP for the property? ☐ Yes ☒ No

(If yes, the R.S. or P.E. shall certify that the OSSF design complies with all provisions of the existing WPAP.)

If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP? ☐ Yes ☒ No

(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct will not be issued for the proposed OSSF until the proposed WPAP has been approved by the appropriate regional office.)

Is the property located over the Edwards Contributing Zone? ☒ Yes ☐ No

Is there an existing TCEQ approval CZP for the property? ☐ Yes ☒ No

(If yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP.)

If there is no existing CZP, does the proposed development activity require a TCEQ approved CZP? ☐ Yes ☒ No

(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to Construct will not be issued for the proposed OSSF until the CZP has been approved by the appropriate regional office.)

Is this property within an incorporated city? ☐ Yes ☒ No


If yes, indicate the city:

RECEIVED

JUN 26 2017

COUNTY ENGINEER

I certify that the information provided above is true and correct to the best of my knowledge.


Signature of Designer

6/23/17
Date

Lot 4 Bl 103 Western Skies Section
Cypress Lake Gardens
Hugo Acuña Ugarte

OSSF SOIL EVALUATION

Date Performed: 6/23/17 Proposed Excavation Depth: 18"
Property Location: Lot 4 Western Skies Cypress Lake Gardens Textural Class Determined For Drain field: _____
Signature of Site Evaluator: AS Registration Number: 12319

Requirements:

At least two (2) soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Location of soil boring or dug pits must be shown on the site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two (2) feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated. Describe each soil horizon and identify any restrictive features on this form. Indicate depths where features appear. Describe each soil horizon and identify any restrictive features on this form. Indicate depths where features appear.

Soil Boring Number _____					
Depth (Feet)	Textural Class	Structure (if applicable)	Drainage (Mottles) Water Table	Restrictive Horizon	Observations
0		brown clay lean with boulders caliche	non	none	boulders are removable large oaks also demonstrate deep soil in area where drain field is situated
1					
2					
3					
4					
5					

RECEIVED
JUN 26 2017
COUNTY ENGINEER

Soil Boring Number <u>2</u>					
Depth (Feet)	Textural Class	Structure (if applicable)	Drainage (Mottles) Water Table	Restrictive Horizon	Observations
0	Same				
1					
2					
3					
4					
5					

Features of Site Area		
Presence of 100 year flood zone		No ✓
Presence of upper water shed	Yes	No ✓
Presence of adjacent ponds, streams, water impoundments	Yes	No ✓
Existing or proposed water well in nearby area	Yes	No ✓
Organized sewage service available to lot or tract	Yes	No ✓

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability.

Signature of Site Evaluator

Date

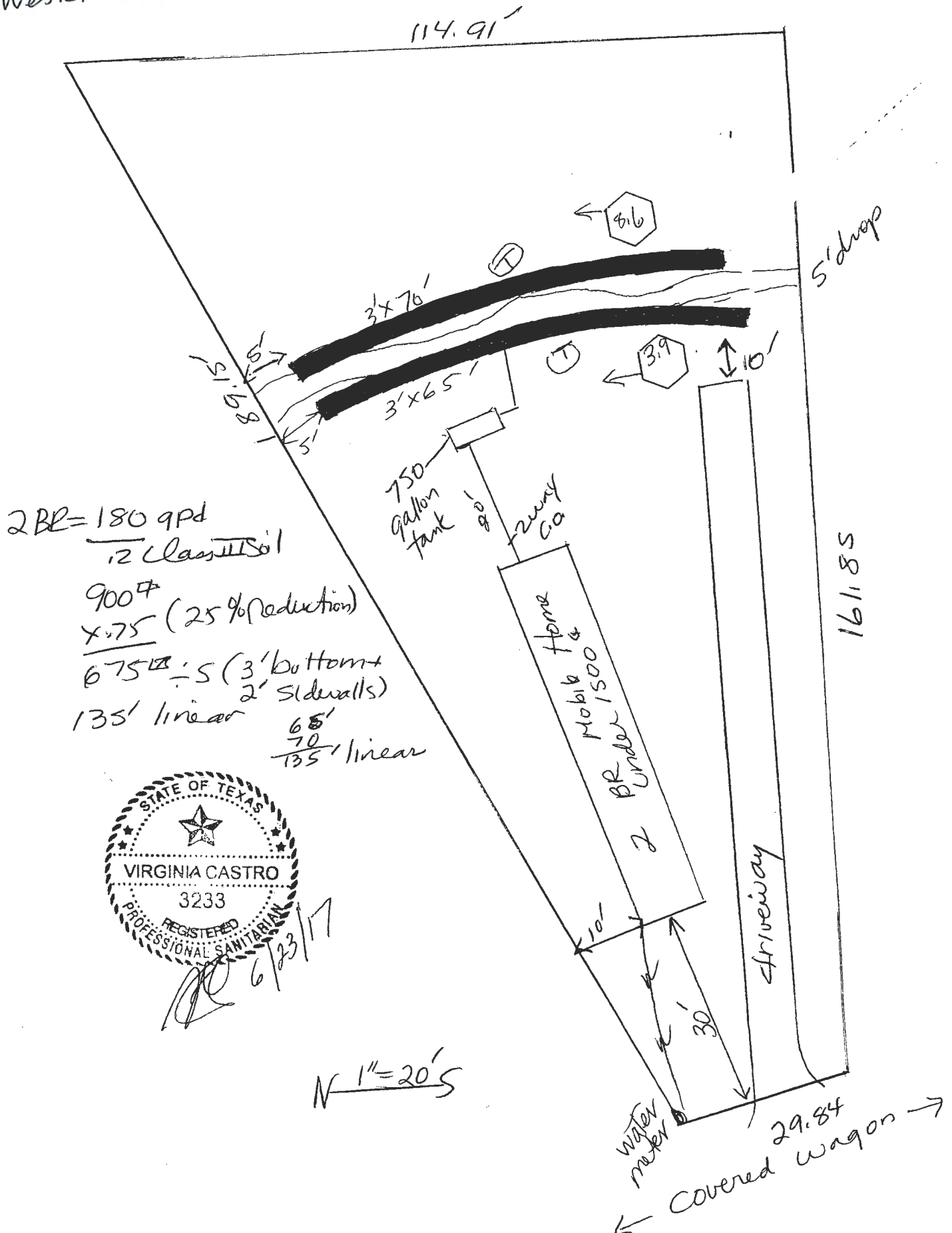
6/23/17

Lot 4 Block 103
Cypress Lake Gardens
Western Skis Section

106122 at 1415 Covered Wagon

REVISED

3:16 pm, Jul 19, 2017

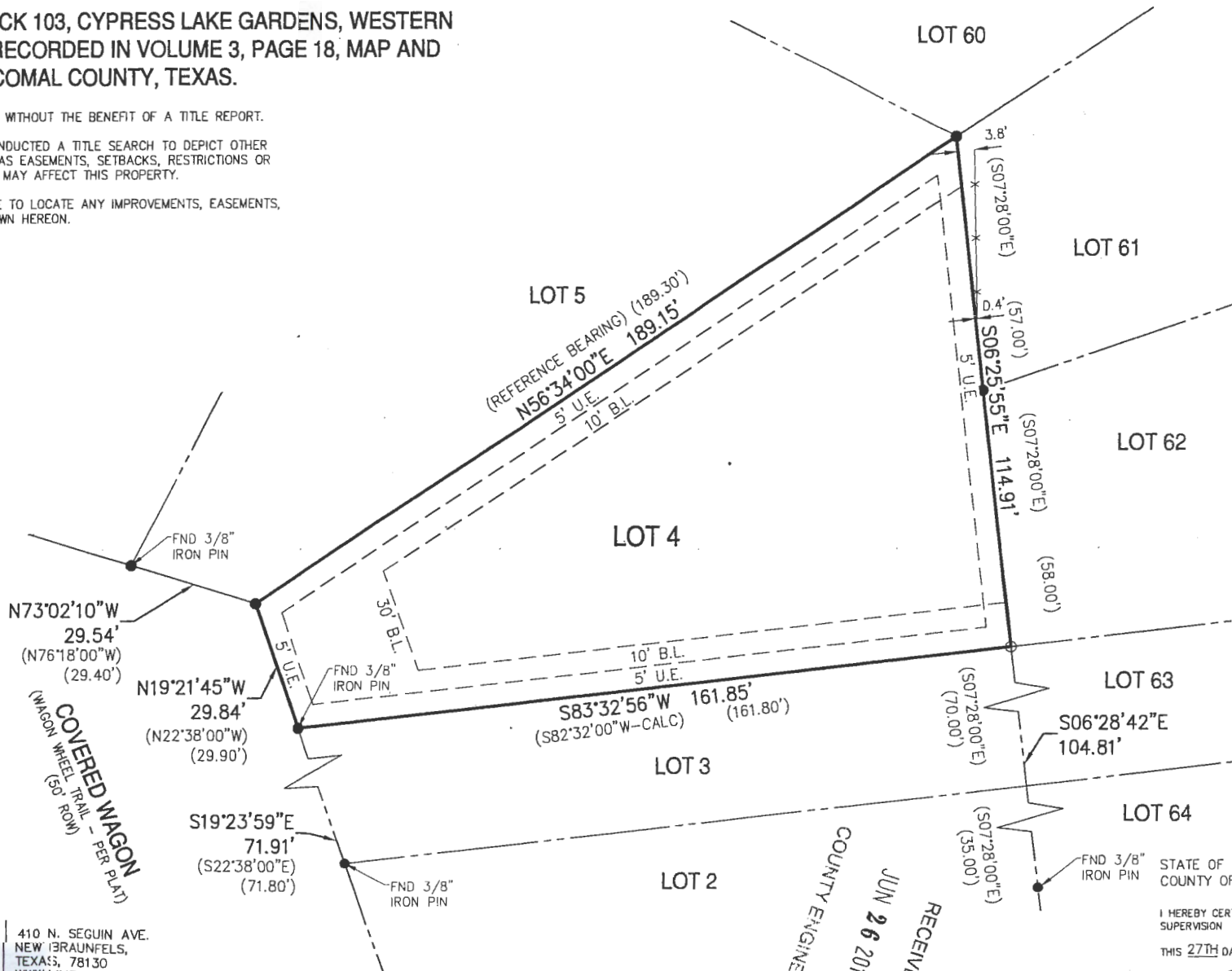


**4, BLOCK 103, CYPRESS LAKE GARDENS, WESTERN
TITION, RECORDED IN VOLUME 3, PAGE 18, MAP AND
ORDS, COMAL COUNTY, TEXAS.**

PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT.

AS NOT CONDUCTED A TITLE SEARCH TO DEPICT OTHER
ORD, SUCH AS EASEMENTS, SETBACKS, RESTRICTIONS OR
NCES THAT MAY AFFECT THIS PROPERTY.

BEEN MADE TO LOCATE ANY IMPROVEMENTS, EASEMENTS,
Y NOT SHOWN HEREON.

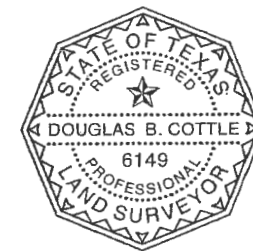


LEGEND:

- = FND 1/2" IRON PIN
UNLESS OTHERWISE NOTED
- = SET 1/2" IRON PIN W/
PLASTIC CAP STAMPED "HMT"
- B.L. = BUILDING SETBACK LINE
- U.E. = UTILITY EASEMENT
- R.O.W. = RIGHT-OF-WAY
- () = PLAT CALLS
- X— = FENCE



SCALE: 1"=30'



0 COVERED WAGON
SPRING BRANCH, TEXAS

THIS SURVEY IS CERTIFIED TO:
HUGO ACUNA UGARTE

RECEIVED
JUN 26 2017
COUNTY ENGINEER

STATE OF TEXAS
COUNTY OF COMAL

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE ON THE GROUND UNDER MY
SUPERVISION

THIS 27TH DAY OF OCTOBER 2016

DOUGLAS B. COTTLE
REGISTERED PROFESSIONAL LAND SURVEYOR NO. 6149




410 N. SEGUIN AVE.
NEW BRAUNFELS,
TEXAS, 78130
WWW.I-M-T-N-B.COM
PH: (830)625-8555
TBPLS: FIRM 10153600

From: [Hernandez, Sandra](#)
To: ["Virginia Edwards"](#)
Subject: 106122 deficiency comments
Date: Thursday, June 29, 2017 3:46:15 PM

RE: lot 4, Block 103, Western Skies Section, Cypress Lake Gardens

Virginia,

We received planning materials for the referenced permit application on June 26, 2017 and found those planning materials to be deficient. In order to continue processing this permit, we need the following information:

1.  Discrepancy on the legal description between warranty deed and permit application.
2. It appears that the trenches are not to scale.
3. Revise accordingly and resubmit.

If you have any questions, you can email me or call the office.

Thank you,

Sandra Ann Hernandez
Environmental Health Assistant
Comal County Engineers Office
New Braunfels, Texas 78132
830-608-2090 Office
830-608-2078 Fax
www.cceo.org

*** COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH ***

APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN
ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE

Date 06/24/2017

VOID

Permit # 106122

Owner Name Hugo Acuna Ugarte
Mailing Address 1234 S. Saint Marys st Apt 13
City, State, Zip 78210
Phone # 210-330-1972
Email [REDACTED]

Agent Name Virginia Castro
Agent Address 2970 Rolling Hills
City, State, Zip Blanco TX 78606
Phone # (210) 275-8523
Email Vlceedwards

All correspondence should be sent to: ☐ Owner ☐ Agent ☐ Both Method: ☐ Mail ☐ Email

Subdivision Name Indian Hills Unit Western Skies Section Lot 4 Block 03

Acreage/Legal 1415

Street Name/Address Covered Wagon 1415 City Spring Branch Zip 78070

Type of Development:

☒ Single Family Residential

RECEIVED

Type of Construction (House, Mobile, RV, Etc.) mobile home

JUN 26 2017

Number of Bedrooms 2

Indicate Sq Ft of Living Area under 1500

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COUNTY ENGINEER

☐ Commercial or Institutional Facility

(Planning materials must show adequate land area for doubling the required land needed for treatment units and disposal area)

Type of Facility _____

Offices, Factories, Churches, Schools, Parks, Etc. - Indicate Number Of Occupants _____

Restaurants, Lounges, Theaters - Indicate Number of Seats _____

Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds _____

Travel Trailer/RV Parks - Indicate Number of Spaces _____

Miscellaneous _____

Estimated Cost of Construction: \$ 8,000 (Structure Only)

Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement?

☐ Yes ☒ No

(If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water ☒ Public ☐ Private Well

Are Water Saving Devices Being Utilized Within the Residence? ☒ Yes ☐ No

I certify that the completed application and all additional information submitted does not contain any false information and does not conceal any material facts. Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities. I also understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has completed the reviews required by the Comal County Flood Damage Prevention Order.

VOID

Signature of Owner [Signature]

Date _____

Page 1 of 2

Lot 4 Block 103
Cypress Lake Gardens
Western Skies Section

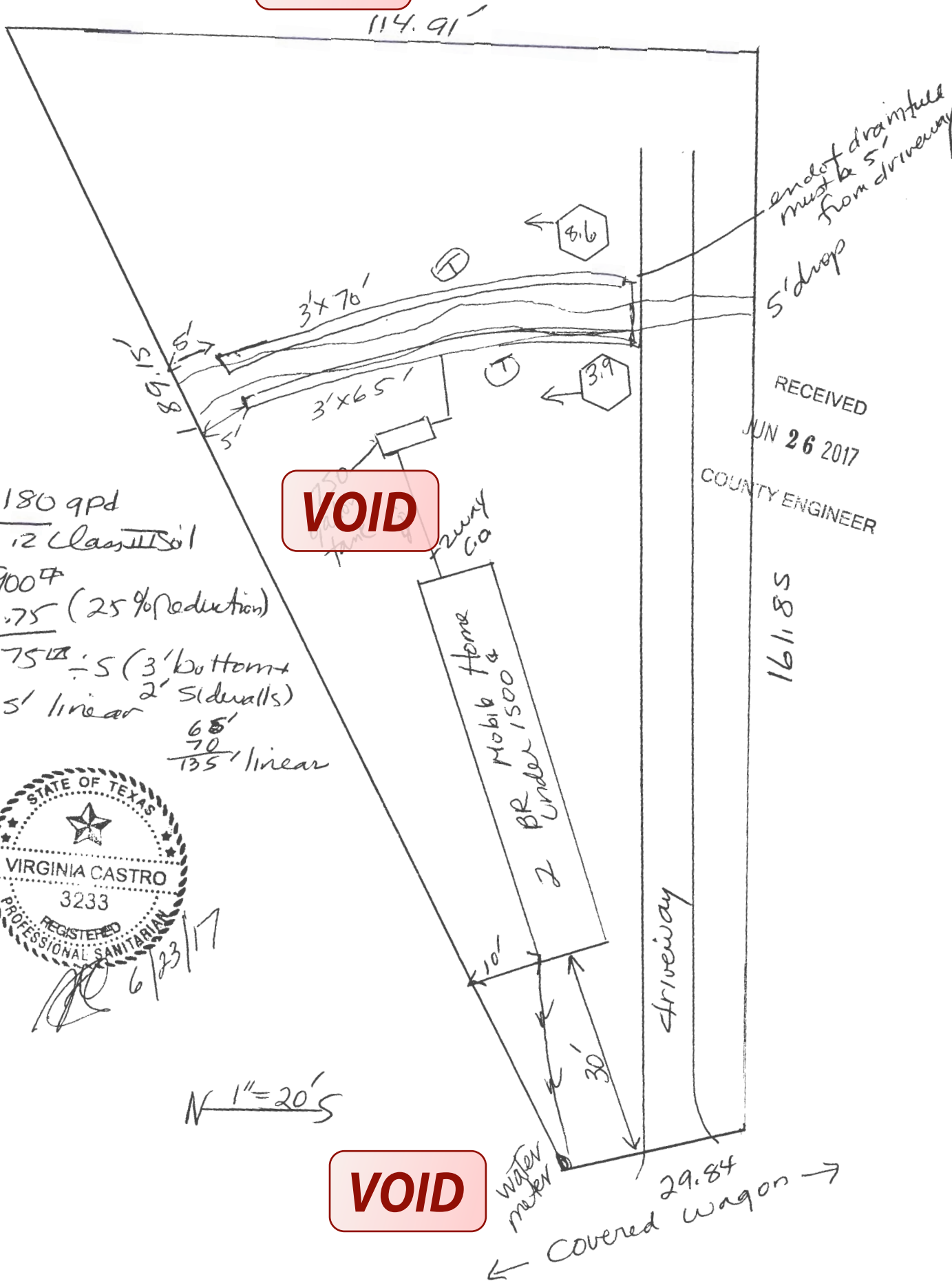
VOID

$2 \text{ BR} = \frac{180 \text{ gpd}}{12 \text{ Class III Soil}}$
 $\frac{900 \text{ ft}^3}{\times .75} \text{ (25\% reduction)}$
 $\frac{675 \text{ ft}^3}{\div 5} \text{ (3' bottom + 2' sidewalks)}$
 $135' \text{ linear}$
 $\frac{65'}{70'} \text{ linear}$



N 1" = 20'

VOID



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161.85

driveway

29.84
← Covered wagon →

He

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JUN 26 2017

COUNTY ENGINEER



201606040422 10/25/2016 12:57:05 PM RECEIVED

JUN 26 2017

COUNTY ENGINEER

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.

GENERAL WARRANTY DEED

THE STATE OF TEXAS

§

KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF COMAL

§

THAT **JAYZ ENTERPRISES of San Antonio**, hereinafter called Grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) cash and other good and valuable consideration in hand paid by **HUGO ACUNA UGARTE**, whose address is **5004 Brassiewood Drive, Austin, Texas, 78744-5111**, hereinafter called Grantee, the receipt and sufficiency of which is hereby acknowledged;

HAS GRANTED, SOLD and CONVEYED, and by these presents does GRANT, SELL and CONVEY unto the said Grantee the following described property situated in Comal County, Texas, to-wit:

Lot 4, Block 103, WESTERN SKIES SECTION, CYPRESS LAKE GARDENS SUBDIVISION, according to the map or plat thereof recorded in **Volume 3, page 18**, of the Deed and Plat Records of Comal County, Texas.

This conveyance is made subject to, all and singular, the mortgages, restrictions, conditions, easements and covenants, if any, applicable to and enforceable against the above described property as reflected by the records of the County Clerk of Comal County, Texas.

Taxes for the current year have been prorated and are thereafter assumed by Grantee.

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 Grantee, Grantee's heirs, executors, administrators, successors, or assigns forever.

JUN 26 2017

COUNTY ENGINEER

Grantor does hereby bind Grantor, Grantor's heirs, executors, administrators, and successors to warrant and forever defend, all and singular, the said premises unto the said Grantee, Grantee's heirs, executors, administrators, successors, and assigns against any person whomsoever claiming or to claim the same or any part thereof.

DATED this the 25th day of October, 2016.

JAYZ ENTERPRISES of San Antonio

BY:

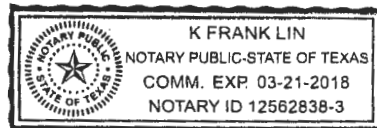
CRUZ ELENA GOMEZ RAMIREZ, Owner

STATE OF TEXAS

COUNTY OF Bexar

§
§

This instrument was acknowledged before me on this the 25th day of October, 2016, by CRUZ ELENA GOMEZ RAMIREZ, Owner of JAYZ ENTERPRISES of San Antonio.



7758.deeds

Notary Public in and for the State of Texas

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
10/25/2016 12:57:05 PM
CHRISTY 2 Page(s)
201606040422



Bobbie Koepp