



Comal County

OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: 06/21/2019 Permit Number: 106367

Location Description: 10309 MONTANIO DR
NEW BRAUNFELS, TX 78132
Subdivision: Schoenthal Ranch
Unit: 1
Lot: 4A
Block:
Acreage:

Type of System: Aerobic
Surface Irrigation

Issued to: Judy Allison

This license is authorization for the owner to operate and maintain a private facility at the location described in accordance to the rules and regulations for on-site sewerage facilities of Comal County, Texas, and the Texas Commission on Environmental Quality.

The license grants permission to operate the facility. It does not guarantee successful operation. It is the responsibility of the owner to maintain and operate the facility in a satisfactory manner.

Alterations to this permit including, but not limited to:

- Increase in the square feet of living area
- Increase in the number of bedrooms
- A change of use (i.e. residential to commercial)
- Relocation of system components (including the relocation of spray heads)
- Installation of landscaping
- Adding new structures to the system

may require a new permit. It is the responsibility of the owner to apply for a new permit, if applicable.

Inspection and licensing of a facility indicates only that the facility meets certain minimum requirements. It does not impede any governmental entity in taking the proper steps to prevent or control pollution, to abate nuisance, or to protect the public health.

This license to operate is valid for an indefinite period. The holder may transfer it to a succeeding owner, provided the facility has not been remodeled and is functioning properly.

Licensing Authority
Comal County Environmental Health

Signature of Michael Tapp OS8497
ENVIRONMENTAL HEALTH INSPECTOR

Signature of Sandra Ann Hernandez OS025599
ENVIRONMENTAL HEALTH COORDINATOR

Comal County OSSF Inspection Sheet

Permit#: 106367 Location: Schoenthal Ranch 10309 Montano

Installer Name: David Flugrath License # 059620

(if more than one installer is used list them according to inspection)

1st Inspection: JC 11-22-17 2nd Inspection: _____ Final Inspection: MT-6/24/19
(inspector initials & date) (inspector initials & date) (inspector initials & date)

Are additional inspections required: _____

Re-inspection fee owed: _____ Re-inspection fee paid: _____

Existing soil conditions:

Site/soil conditions match soil evaluation: Notes: _____

System Description:

Aerobic with spray: Aerobic with drip emitters: _____ Low Pressure Dosing: _____ Absorptive drainfield: _____
Evapotranspirative (ET) system: _____ Gravel-less drainfield piping: _____ Leaching chambers: _____
Soil substitution drainfield: _____ other: _____

Tank Inspection:

Tank set level & watertight: Inlet/Outlet: Tank Size or GPD: 600 Manuf./Brand: Solaris
Model#: _____ Pump Tank Size: _____ Alarms/Audible & Visual: Operational:
Is timer required/provided?: Chlorination required/provided?

Notes:

Maintenance Tag for Aerobic: () _____

System installation:

Pipe check/house to tank: Clean-out at structure/every 50 ft./@90's _____ Pipe check/tank to drainfield: _____
(1/8"-ft., SDR 26 or Sch. 40)
Trenches/Excavations: Width/Depth: _____ Trenches/Excavations Level: _____ Pipe & Gravel: _____
Slope within drainfield/spray area: Leaching Chambers: _____ GeoTex: _____

Spray irrigation purple pipe: Spray irrigation area checked:
Notes: from house to new tank is good. new tank to spray field good
operational on both

Separation Distances

Prop. Lines: Water lines: _____ Water Wells: _____ Bldgs/Driveway/Improvements: _____ Creeks/Rivers/Ponds: _____
Drainage Easements/Sharp Slopes: _____ If over Recharge Zone check for recharge features: _____ Are there water
lines crossing tightlines/or within 10 feet of system?: Have they been properly sleeved: _____ Are there sewer
lines crossing under driveways, sidewalks, or within 5 ft. of surface improvements: Have the sewer lines been
properly sleeved?: _____

Notes: ready for cover - no final/LTD until barn/apartment
attached to septic and revision sent to office.

Final Inspection:

Tank(s) Backfilled:
System Backfilled: ET Systems Class II backfill & vegetative cover for transpiration in place: _____
Surface application area properly landscaped/vegetation acceptable:

Notes: Covered.

Size of Installed Drainfield/Spray Area: 2 heads

Comal County OSSF Inspection Sheet

Permit#: 106367 Location: Schoenthal Ranch 10309 Montano

Installer Name: David Flugath License # 059620
(if more than one installer is used list them according to inspection)

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(inspector initials & date) (inspector initials & date) (inspector initials & date)

Are additional inspections required: _____

Re-inspection fee owed: _____ Re-inspection fee paid: _____

Existing soil conditions:

Site/soil conditions match soil evaluation: Notes: _____

System Description:

Aerobic with spray: Aerobic with drip emitters: _____ Low Pressure Dosing: _____ Absorptive drainfield: _____
Evapotranspirative (ET) system: _____ Gravel-less drainfield piping: _____ Leaching chambers: _____
Soil substitution drainfield: _____ other: _____

Tank Inspection:

Tank set level & watertight: Inlet/Outlet: Tank Size or GPD: 600 Manuf./Brand: Solar Air
Model#: _____ Pump Tank Size: _____ Alarms/Audible & Visual: Operational:
Is timer required/provided?: Chlorination required/provided?:

Notes: _____

Maintenance Tag for Aerobic: () _____

System installation:

Pipe check/house to tank: Clean-out at structure/every 50 ft./@90's _____ Pipe check/tank to drainfield: _____
(1/8" -ft., SDR 26 or Sch. 40)
Trenches/Excavations: Width/Depth: _____ Trenches/Excavations Level: _____ Pipe & Gravel: _____
Slope within drainfield/spray area: Leaching Chambers: _____ GeoTex: _____
Spray irrigation purple pipe: Spray irrigation area checked:

Notes: from house to new tank is good. new tank to spray field good
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Prop. Lines: Water lines: _____ Water Wells: _____ Bldgs/Driveway/Improvements: _____ Creeks/Rivers/Ponds: _____
Drainage Easements/Sharp Slopes: _____ If over Recharge Zone check for recharge features: _____ Are there water
lines crossing tightlines/or within 10 feet of system?: Have they been properly sleeved: _____ Are there sewer
lines crossing under driveways, sidewalks, or within 5 ft. of surface improvements: Have the sewer lines been
properly sleeved?: _____

Notes: ready for cover - no final / LTD until barn/apartment
attached to septic and revision sent to office.

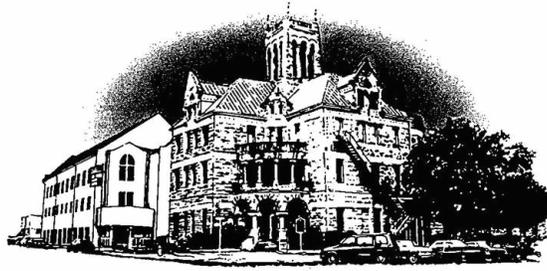
Final Inspection:

Tank(s) Backfilled: _____
System Backfilled: _____ ET Systems Class II backfill & vegetative cover for transpiration in place: _____
Surface application area properly landscaped/vegetation acceptable: _____

Notes: _____

Size of Installed Drainfield/Spray Area: 2 heads 2

____ Check here to confirm that service agreement has been received, entered and activated in CASST.



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: 106367
Issued This Date: 08/30/2017
This permit is hereby given to: Judy Allison

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

10309 MONTANIO DR
NEW BRAUNFELS, TX 78132

Subdivision: Schoenthal Ranch
Unit: 1
Lot: 4A
Block:
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic
Surface Irrigation

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

Date July 12 2017 Permit # 106367

Owner Name Judy Allison Agent Name David Flusgrath
Mailing Address 10309 Montanio Dr Agent Address 1235 Lone Oak Rd
City, State, Zip New Braunfels TX 78132 City, State, Zip N.B Tx 78132
Phone # 210 355 0009 Phone # 210-275-1481
Email [Redacted] Email [Redacted]

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

Subdivision Name Schaenthal Ranch Unit 1 Lot 4A Block _____
Acreage/Legal 7.74 AC
Street Name/Address 10309 Montanio Dr City New Braunfels Zip 78132

Type of Development:

Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) 3Br House 2406 PD RECEIVED
Apartment 1206 PD AUG 16 2017
Number of Bedrooms 1 BR Apt + 3 Br House 3606 PD
Indicate Sq Ft of Living Area LSTA 1500 APT COUNTY ENGINEER
LSTA 2500 HOUS P

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 _____

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 approved and released the development permit for this property.

Signature of Owner Judy Allison Date 7/12/2017

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

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

REVISED

10:14 am, Nov 22, 2017

Planning Materials & Site Evaluation as Required Completed By Schrank/Flugrad

System Description Proprietary Spray

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

Tank Size(s) (Gallons) 600 GPD Absorption/Application Area (Sq Ft) 5,625

Gallons Per Day (As Per TCEQ Table III) 240 + 120 = 360 GPD
(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:

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

Vern R Schmal
Signature of Designer

11-21-17
Date

AFFIDAVIT TO THE PUBLIC



201706038433 08/16/2017 01:14:42 PM 1/1

County of **Comal**, State of Texas

According to the Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities, This Document is filed in the Deed of Records of **Comal** County, Texas.

The Texas Health and Safety Code, Chapter 366 Authorizes the Texas Commission on Environmental Quality (T.C.E.Q.) to regulate on-site sewage facilities (OSSF's). Additionally, the Texas Water Code (TWC), § 5.012, gives the TCEQ primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its power and duties under the TWC, The TCEQ, under the authority of the TWC and the Texas Health and safety code, requires owner's to provide notice to the public that certain types of OSSF's are located on specific pieces of property. To achieve this notice, the TCEQ requires a deed recording. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This deed certification is not a representation of warranty by the TCEQ of the suitability of this OSSF, nor does it constitute any guaranty by the TCEQ that the appropriate OSSF was installed.

An OSSF requiring a Monitoring Contract, according to 30 Texas Administrative Code §285.91(12) will be installed on the property described as (legal description as shown on the recorded warranty deed.

Schoenthal Ranch, Unit 1, Lot 4A, Comal County

The property is owned by (owner's name as shown recorded warranty deed: if more than one owner both names must be included) *Judy Allison*

This OSSF must be covered by a continuous Monitoring Agreement. All Monitoring on this, OSSF must be preformed by a approved Monitoring Company, and a signed monitoring Contract must be submitted to the County Engineers Office within 30 days after the property has been transferred.

The owner will upon sale or transfer of the above described property, request a transfer of the permit for the OSSF to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the County Engineer's Office.

WITNESS BY HANDS(S) ON THE 8 DAY OF July 2017

RECEIVED

AUG 16 2017

Judy Ann Allison
Owner(s) Signature(s)

Judy Ann Allison
printed name

COUNTY ENGINEER

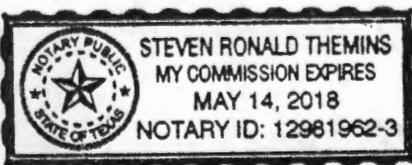
SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 8 DAY OF JULY ~~2016~~ ^{1st} 2017

[Signature]
Notary Public State of Texas

Notary's Printed name STEVEN THEMINS

My Commission Expires MAY 14 2018

Place Notary Seal Here



Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
08/16/2017 01:14:42 PM
MEDINM 1 Page(s)
201706038433



Bobbie Koepf

AUG 16 2017

TWO YEAR WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

COUNTY ENGINEER

1. General: This work for hire agreement (known as "Agreement") is entered into by and between Judy Allison (known as "Customer") and **(David Flugrath)**. By this agreement, Flugrath Construction and its employees (known as "Contractor") agree to render services at the site address stated below, and customer agrees to fulfill her or their responsibilities, as best he or she or they can. The designed flow rate for this system is a maximum of 240 gallons per day.

2. Effective dates: This agreement commences on _____ and ends on _____ for a total of (2) TWO years. The (T. C. E. Q.) Texas Commission on Environmental Quality requires that a contract be in effect at all times. This start date is this contract shall be the date of the License to Operate is issued.

3. Termination of agreement: This agreement may be terminated by both parties with thirty (30) days written notice. Either party may terminate, without fault or liability of the terminating party. If this agreement is terminated: wither party terminating this agreement for any reason, including non-renewal shall notify in writing the appropriate regulatory agency a minimum of thirty (30) days prior to the date of such termination.

4. Services: Contractor Will:

A. Inspect and perform upkeep on OSSF Facility as recommended by system manufacturer and State and local Regulatory Authority for a total of 3 visits per year.

B. Provide written records of each visit by means of tag attached to control panel.

C. Repair or replace any component of the OSSF found inoperable any time of the duration of the monitoring visits. If such services are not under warranty the customer holds full responsibility for the costs of said repairs and authorizes the contractor to make repairs and bill customer accordingly as to the State and Regulatory code.

D. Provide sample collection for testing of TSS and BOC on a yearly basis.

E. Forward copies of this agreement and all reports to the Regulatory Agency and Customer within 14 days.

F. Respond to Customer request for unscheduled request within 48 hours of the date of notification. Unless costs are covered under the warranty an unscheduled responses will be billed to Customer.

5. Chlorinization is the sole responsibility of the customer.

6. Performance of Agreement: Performance by Contractor under this agreement is contingent on the following conditions:

A. Contractors receipt of original copy of monitoring agreement.

B. Contractors receipt of payment of Wastewater monitoring fee.

C. If the above conditions are not met, Contractor is not obligated to perform any portion of this agreement.

7. Customer responsibilities: The customer is responsible for each and all of the following:

A. Provide all necessary yard or lawn maintenance and removal of all obstacles, like dogs and other animals, needed to allow access and the proper function of the OSSG to allow Contractor safe and easy access to the OSSF including gate codes and combinations to locks.

B. Protect OSSF equipment form physical damage including by and not limited to the damage caused by ants and insects.

C. Maintain and abide by the conditions and limitations of the license to operate for and OSSF from the state and local regulatory agency and manufacturers recommendations.

D. It is the customers responsibility to notify the contractor of any or all alarms or problems immediately.

E. Allow for samples of OSSF be obtained by contractor of evaluating the OSSF's performance.

F. Prevent backwash or flushing of water treatment or conditioning equipment from enter OSSF.

G. Prevent hydraulically overloading OSSF by introducing more than 240 gallons a day into the system.

Drain lines may discharge into the surface application pump tank if approved by system designer.

H. Schedule for pumping and cleaning of all tanks when recommended by contractor is at customers expense.

I. Maintain site drainage to prevent adverse effects on the OSSF.

J. Pay promptly and fully, all contractors fees, bills or invoices as described herein.

8. Access by Contractor: Contractor is granted easement to the OSSF for purpose of servicing described: Contractor may enter property during normal business hours without prior notice to customer to service or repair of OSSF. Contractor is not responsible for the uneven settling of the soil.

9. Limited Liability: Contractor shall not be held liable for any incidental, consequential or special damages or for economic loss due to expense or loss of profits or income or loss of use to customer, whether in contract tort or any other theory. In no

event shall contractor be held liable in an amount exceeding the total fee for services amount paid by customer under this agreement.

10. Fee for Services: The fee for the basic services described in this agreement is \$250.00 per year unless this is an initial monitoring agreement of a new installation. This fee does not include any equipment materials, or labor cost for non-warranty or unscheduled repairs. This fee doesn't include the cost of pumping the system upon contractors advice to do so.

11. Payment: Fees for services of a 1 year contract are as follows:

- A. \$250.00 per 1 years in full amount due on signing the monitoring agreement.
- B. 2 payments, \$84.00 and one payment of \$82.00
- C. Payments for invoices are due upon receipt and any checks returned will be charged \$35.00 fee.

12. Application or transfer of payment: The fees paid for this agreement may be transferred to the subsequent property owner(s). The customer will advise the subsequent owner(s) of the requirement that they sign a replacement agreement authorizing contractor to perform services, and accepting customer responsibilities. These replacement agreement must be signed and received in the contractors office within ten (10) days of date of transfer of property. Contract will continue from existing date of startup or license to operate is null and void and ends in one year of that date.

13. Entire agreement: This agreement contains the entire agreement of the parties, and no other promises or conditions in any other agreement, oral or written.

DAVID FLUGRATH/ FLUGTRATH CONSTRUCTION, TEXAS INSTALLER II AND SITE EVALUATOR LICENSE # OS1648 & OS9620. ADDRESS 1235 LONE OAK RD., NEW BRAUNFELS, TX 78132 CERTIFIED SERVIC PROVIDER FOR HOOT, PRO FLO, AQUA SAFE, AQUA AIRE, NORWECO, CAJUN AIRE. MEMBER: TEXAS ON SITE WASTEWATER ACSSOCIATION AND NATIONAL ON SITE WASTEWATER RECYCLING ASSOCIAN.

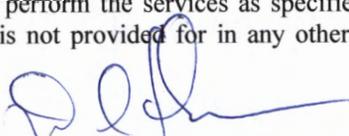
CUSTOMER NAME: Judy Allison
 SITE ADDRESS: 10309 Montano Cir
 CITY: New Braunfels Tx 78132
 STATE & ZIP: Tx 78132
 PERMIT #:

REGULATORY AUTHORITY/ COUNTY: Comal

ATU BRAND: MODEL: SERIAL #:

Acceptance of this agreement: The above prices, specification, and conditions are satisfactory and are hereby accepted. You are authorized to perform the services as specified. Payment will be made as outlined above. It is understood and agreed that this work is not provided for in any other agreement and no contractual rights arise until this agreement is accepted in writing.

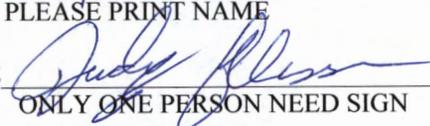
RECEIVED

DAVID FLUGRATH: 

AUG 16 2017

CUSTOMER NAME: Judy Allison
PLEASE PRINT NAME

COUNTY ENGINEER

CUSTOMER SIGNATURE 
ONLY ONE PERSON NEED SIGN

**COUNTY ENVIRONMENTAL HEALTH DEPARTMENT
OSSF SOIL EVALUATION FORM**

Owners Name: Judy A. Allison
 Physical Address: LOT 4A Schoenthal Ranch Unit 1
 Name of Site Evaluator: Dave P. [unclear]
 Date Performed: July 20-2017 Proposed Excavation Depth: _____

LOT 4A Schoenthal Ranch
SUBDIVISION UNIT 1

201606012837

Requirements:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil evaluation must be shown on the application site drawing or designer's site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated. Please describe each soil horizon and identify any restrictive features in the space provided below. Draw lines at the appropriate depths.

SOIL BORING NUMBER _____						
Depth (Feet)	Texture Class	Soil Texture	Structure (For Class III-blocky, platy or massive)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0		N/A				RECEIVED AUG 16 2017 COUNTY ENGINEER
1						
2						
3						
4						
5						

SOIL BORING NUMBER _____						
Depth (Feet)	Texture Class	Soil Texture	Structure (For Class III-blocky, platy or massive)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0		N/A				
1						
2						
3						
4						
5						

FEATURES OF SITE AREA

Presence of 100 year flood zone YES NO
 Presence of adjacent ponds, streams, water impoundments YES NO
 Existing or proposed water well in nearby area YES NO
 Organized sewage available to lot or tract YES NO
 Recharge features within 150 feet YES NO

I certify that the above statements are true and are based on my own field observations.

[Signature]
 Signature of Site Evaluator

July 25-2017
 Date

#106367

REVISED
10:04 am, Nov 22, 2017

SEPTIC DESIGN FOR AEROBIC TREATMENT
OF WASTEWATER

OWNER & SITE LOCATION: Judy A. Allison, Lot 4A Schonthal Ranch, Unit 1

DESIGN SPECIFICATIONS: This design is for a 3 bdrm less than 2,500 sq. ft. home, and a 1 bdrm apartment less than 1,500 sq.ft.all utilizing water saving devices. The projected wastewater usage is $240+120=360$ gallons per day.

SITE EVALUATION: The area of effluent treatment has a slope of less than 15 percent. The site is supporting a good strand of native grasses. Owner requested Aerobic Treatment soil evaluation was performed, profile holes were dug. No recharge features were found within 150 feet of the spray discharge area. No water runs, or dry creeks are located in the treatment area. This site is located in the Edwards recharge zone. The location is not in the 100-year Floodplain. Spray area is more than 20' from the property line a timer will be used and will spray between midnight and 5am.

SYSTEM DISCRIPTION: The system will use a 600 GPD Solar Aerobic wastewater treatment plant off the TCEQ approved list. The pipe from the house to the 440 gallon pretreatment tank will be a 3" or 4" PVC sch. 40 pipe. The Aerobic tank is connected to a NSF approved liquid chlorinator and then to the 760 gallon pump tank by 4" sch 40 The manifold pipe to the sprinklers is to be 1" sch. 40 PVC pipe. Audio & visual alarm required. The system is to be installed as to manufactures instruction.

CALCULATIONS: No. of Bedrooms: 3 bdrm home plus 1 bdrm apt.
Wastewater Flow: 360gpd
Application Rate: 0.064gal/ft. x ft/day
Min. Area Required: $360\text{gpd}/0.064$
 $= 5,625\text{sq. ft.}$
Actual Spray Area $2(32 \times 32 \times 3.14) = 6,431 \text{ sq ft}$

PUMP TANK CALCULATIONS:

Pump of at 15" above floor = 253 gal.
Pump on at 27" above floor = 203 gal.
Alarm on 34" above floor = 118 gal.
Total Effluent = 575 gal.
Reserve (760- 575) gallons = 185 gal.
Reserve Required $(360 \times 1/3) = 120 \text{ gal.}$

STATE OF TEXAS
★
VERN R. SCHRANK
87588
PROFESSIONAL ENGINEER
21 Nov 2017
Firm # F-11631

PUMP AND SPRINKLER SECSIFICATIONS: 2sprinkler, with a 32' radius with an arc of 360 degrees. Pump to be a 10-20 gallon 1/2 hp shallow well pump.

LANDSCAPING: Type II or Type III, soils must be placed over all exposed surface rock. All areas must be seeded with Rye or Bermuda grass or a combination of both.

AFFIDAVIT AND MAINTENANCE: An Affidavit that has been certified and duly recorded at the Count Clerks Office must be submitted. A Maintenance Contract between the owner and an Authorized maintenance company must be submitted and included for a two year period under the original contract of installation, at the end of two years and will be renewed each year after for the life of the system.

#106367

REVISED

10:04 am, Nov 22, 2017

OUTDOOR RECEPTACLE WITH TWO SEPARATE 110-VOLT CIRCUITS

UNDERGROUND CABLE

GATE OR GLOBE VALVE

SIGNAL-BREAKER WIRE

BUSHING ADAPTER



Vern R. Schrank
 21 NOV 2017
 Firm # F-11631

ELBOW

THREADED UNION

MALE ADAPTERS

SUPPLY LINE

LEVEL CONTROL SWITCH

HIGH WATER ALARM FLOAT

32"

PUMP ON 24" FLOAT CONTROL

1000 gallon Pump + 1000 gal / 60" = 16.7 gal per inch

24" x 16.7 = 401.94 No.

32 - 24 = 8"

8" x 16.7 = 134

401
 + 134

 535

1000 gal
 - 535

360 gal Per Day x 1/3 = 120 gal required reserve

465 gal Reserve

SUBMERSIBLE PUMP

MALE ADAPTER

8" CONCRETE BLOCKS

Details of pumping chamber

From: Ritzen, Brenda
To: [REDACTED]
Subject: FW: 106367
Date: Tuesday, November 28, 2017 8:40:00 AM

David,

The designer must indicate on the design that the unpermitted septic tank will be completely exposed for 1st inspection. Revise and resubmit accordingly.

Thank you,

Brenda Ritzen, OS0007722
Environmental Health Coordinator
Comal County Engineers Office
195 David Jonas Drive
New Braunfels, Texas 78132
830-608-2090
www.cceo.org

From: Ritzen, Brenda
Sent: Tuesday, November 28, 2017 8:39 AM
To: 'david flugrath'
Subject: RE: 106367

David,

The designer must indicate that the unpermitted septic tank will be completely exposed for 1st inspection. Revise and resubmit accordingly.

Thank you,

Brenda Ritzen, OS0007722
Environmental Health Coordinator
Comal County Engineers Office
195 David Jonas Drive
New Braunfels, Texas 78132
830-608-2090
www.cceo.org

From: Ritzen, Brenda
To: [REDACTED]
Subject: RE: 106367
Date: Tuesday, November 28, 2017 8:38:00 AM

David,

The designer must indicate that the unpermitted septic tank will be completely exposed for 1st inspection. Revise and resubmit accordingly.

Thank you,

Brenda Ritzen, OS0007722
Environmental Health Coordinator
Comal County Engineers Office
195 David Jonas Drive
New Braunfels, Texas 78132
830-608-2090
www.cceo.org

From: david flugrath [REDACTED]
Sent: Monday, November 27, 2017 1:45 PM
To: Ritzen, Brenda
Subject: Re: 106367

106367

On Monday, November 27, 2017 9:49 AM, "Ritzen, Brenda" <rabbjr@co.comal.tx.us> wrote:

David,

I have reviewed your response regarding the referenced revision received 10/22/17 and found the following information is still needed:

1. The designer must mark the horse arena on the design.
2. The designer must indicate on the design that there is no permit for the existing tank and that it must be exposed for first inspection.
3. Revise above as needed and resubmit.

Thank you,

Brenda Ritzen, OS0007722
Environmental Health Coordinator
Comal County Engineers Office

From: Ritzen, Brenda
To: [REDACTED]
Subject: RE: 106367
Date: Monday, November 27, 2017 9:49:00 AM

David,

I have reviewed your response regarding the referenced revision received 10/22/17 and found the following information is still needed:

- ✓ 1. The designer must mark the horse arena on the design.
2. The designer must indicate on the design that there is no permit for the existing tank and that it must be exposed for first inspection.
3. Revise above as needed and resubmit.

Thank you,

Brenda Ritzen, OS0007722
Environmental Health Coordinator
Comal County Engineers Office
195 David Jonas Drive
New Braunfels, Texas 78132
830-608-2090
www.cceo.org

From: david flugrath [REDACTED]
Sent: Monday, November 27, 2017 6:12 AM
To: Ritzen, Brenda
Subject: 106367

Q All david flugrath, search your mailbox

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- Spam (105)
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- friday the 13th
- Humane Soci... (3)
- Luke Flugrath E Trade
- Notes
- tammy hand

Recent

106367 (2)

david flugrath

Today at 7:30 AM

Ritzen, Brenda <rabbjr@co.comal.tx.us>

Today at 11:24 AM

To david flugrath

Re: Judy Allison
 Schoenthal Ranch Unit 1 Lot 4A
 Application for Permit for Authorization to Construct an
 On-Site Sewage Facility

David,

I have reviewed your revised planning materials for the referenced permit submittal and found the following is still needed:

1. Indicate permit number of existing septic tank. *I could not find on web s.t.*
2. You may use 120 gpd for the apartment if you ~~just~~ *NO REASON, but I'd like more spray area* wish but is there a specific reason for using the 120 gpd vs. the 100 gpd for a 1 bedroom apartment as per Table III?
3. Is the unmarked rectangle still the horse arena? *yes*
4. Revise above as needed and resubmit.

Thank you,

Brenda Ritzen, OS0007722
 Environmental Health Coordinator
 Comal County Engineers Office
 195 David Jonas Drive
 New Braunfels, Texas 78132
 830-608-2090
 www.cceo.org

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From: Ritzen, Brenda
To: [REDACTED]
Subject: RE: 106367
Date: Wednesday, November 22, 2017 11:24:00 AM

Re: Judy Allison
Schoenthal Ranch Unit 1 Lot 4A
Application for Permit for Authorization to Construct an On-Site Sewage Facility

David,

I have reviewed your revised planning materials for the referenced permit submittal and found the following is still needed:

1. Indicate permit number of existing septic tank.
2.  You may use 120 gpd for the apartment if you wish but is there a specific reason for using the 120 gpd vs. the 100 gpd for a 1 bedroom apartment as per Table III?
3. Is the unmarked rectangle still the horse arena?
4. Revise above as needed and resubmit.

Thank you,

Brenda Ritzen, OS0007722
Environmental Health Coordinator
Comal County Engineers Office
195 David Jonas Drive
New Braunfels, Texas 78132
830-608-2090
www.cceo.org

From: david flugrath [REDACTED]
Sent: Wednesday, November 22, 2017 7:31 AM
To: Ritzen, Brenda
Subject: 106367

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

APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN ON-SITE SEWAGE TREATMENT SYSTEM AND TO OPERATE

VOID

Date July 12 2017

Permit # 106367

Owner Name Judy Allison
Mailing Address 10309 Montanio Cr
City, State, Zip New Braunfels TX 78132
Phone # 210 355 0009
Email [Redacted]

Agent Name David Flusgrath
Agent Address 1235 Lone Oak R
City, State, Zip N.B Tx 78132
Phone # 210-275-1481
Email [Redacted]

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

Subdivision Name Schaenthal Ranch Unit 1 Lot 4A Block _____
Acreage/Legal 7.74 AC
Street Name/Address 10309 Montanio Dr City New Braunfels Zip 78132

Type of Development:

Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) Apartment

Number of Bedrooms 1

Indicate Sq Ft of Living Area Lst 1500

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Commercial or Institutional Facility

(Planning materials must show adequate land area for distribution and 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 _____

VOID

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 approved and released the development permit for this property.

Signature of Owner Judy Allison

Date 7/12/2017

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

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

106367

VOID

Planning Materials & Site Evaluation as Required Completed By Schrank/Flugrant

System Description Proprietary Spray

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

Tank Size(s) (Gallons) 500 Absorption/Application Area (Sq Ft) 3,750

Gallons Per Day (As Per TCEQ Table III) 240

(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:

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

[Signature]
Signature of Designer

8-12-17
Date

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COUNTY ENGINEER

SEPTIC SYSTEM AEROBIC TREATMENT WASTEWATER



OWNER & SITE LOCATION: ~~Thomas Coff~~ and Judy A. Allison, Lot 4A Schonthal Ranch Subd., Unit 1
DESIGN SPECIFICATIONS: This design is for a 1 bdrm less than 1,500 sq. ft. apartment. The projected wastewater usage is 240 gallons per day.

SITE EVALUATION: The area of effluent treatment has a slope of less than 15 percent. The site is supporting a good strand of native grasses. Owner requested Aerobic Treatment so no profile holes were dug. No recharge features were found within 150 feet of the spray discharge area. No water runs, or dry creeks are located in the treatment area. This site is located in the Edwards recharge zone. The location is not in the 100-year Floodplain. Spray area is 20' from the property line a timer will be used and will spray between midnight and 5am.

SYSTEM DISCRIPTION: The system will use a 500 GPD Aerobic wastewater treatment plant off the TCEQ approved list. The pipe from the house to the 440 gallon pretreatment tank will be a 3" or 4" PVC sch. 40 pipe. The pretreatment tank is to be connected to the Aerobic center by 4" sch 40. The Aerobic tank is connected to a stack feed chlorinator and then to the 760 gallon pump tank by 4" sch 40 The manifold pipe to the sprinklers is to be 1" sch. 40 PVC pipe. Audio & visual alarm required. The system is to be installed as to manufactures instruction.

CALCULATIONS: No. of Bedrooms: 1 bdrm Apartment
Wastewater Flow: 240gpd
Application Rate: 0.06gpd/sq ft
Min. Area Required: 240gpd / 0.06gpd/sq ft = 750sq ft
Actual Spray Area 2(30x30x3.14)= 5,652 sq ft



25 May 2017
Firm # F-11631

PUMP TANK CALCULATIONS:

- Pump of at 15" above floor = 253 gal.
- Pump on at 27" above floor = 203 gal.
- Alarm on 34" above floor = 118 gal.
- Total Effluent = 575 gal.
- Reserve (760- 575) gallons = 185gal.
- Reserve Required (240x1/3)= 80 gal.

PUMP AND SPRINKLER SECSIFICATIONS: 2 sprinklers, with a 30' radius each with an arc of 360 drgrees. Pump to be a 10-20 gallon 1/2 hp shallow well pump.

LANDSCAPING: Type II or Type III, soils must be placed over all exposed surface rock. All areas must be seeded with Rye or Bermuda grass or a combination of both.

AFFIDAVIT AND MAINTENANCE: An Affidavit that has been certified and duly recorded at the Count Clerks Office must be submitted. A Maintenance Contract between the owner and an Authorized maintenance company must be submitted and included for a two year period under the original contract of installation, at the end of two years and will be renewed each year after for the life of the system.

CALLED 33.612 AC
ALICE K. GERFERS
DOC. # 9806009956
O.P.R.C.C.T.

N70°08'13"E 14.12'
N42°01'13"E 74.78'
N52°31'13"E 81.49'

N49°30'13"E 104.69'

VOID

~~Thomas Goff~~
Judy A. Allison
Lot 4A Subdivision
Ranch Subdivision
Unit 1

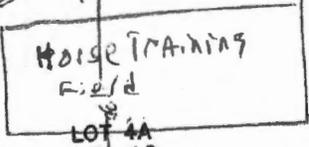
LOT 11
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N49°30'13"E 356.64'

S07°46'40"E 267.22'
K Back 95.06'

R-30' Radius 360° EACH
Sprinklers

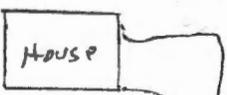
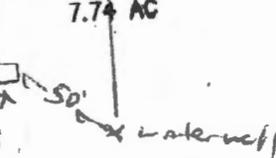
S41°41'13"W 286.85'
20' Set Back



BARB Remodel to
BR Apt

LOT 3A
5.23 AC

VOID



S07°45'47"E 600.00'
20' Set Back

LOT 4A

S07°45'47"E 600.00'

This Property is Exempt from WAP because no recharge features were found within 151' of the discharge area. No water runs or dry creeks are located in the treatment area. All improvements on property do not exceed 20% Impervious Cover.

Scale 1" = 100'

LOT 5

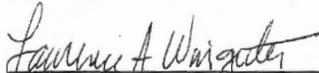


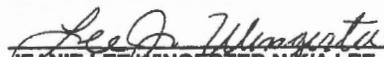
25 May 2017
Firm # F-11631

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.

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AUG 16 2017

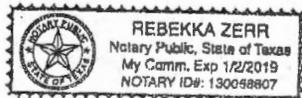
DATED this the 17th day of April, 2017.


LAURENCE A. WINGERTER, JR.


JEANIE LEE WINGERTER N/K/A LEE JEANIE WINGERTER

STATE OF TEXAS §
COUNTY OF Comal §

This instrument was acknowledged before me on this the 17th day of April, 2017 by LAURENCE A. WINGERTER and wife, JEANIE LEE WINGERTER N/K/A LEE JEANIE WINGERTER.




Notary Public, State of Texas

GRANTEE'S MAILING ADDRESS:

10309 Montanio Dr.
New Braunfels, TX 78132

8141.deeds
Trinity Title Co. (RS)
GF #3339NB

Filed and Recorded
Office of Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
05/01/2017 03:23:53 PM
TERRI 2 Pages(s)
201706023002



Bobbie Koepp