

Comal County  
OFFICE OF COMAL COUNTY ENGINEER

**License to Operate On-Site Sewage Treatment and Disposal Facility**

Issued This Date: 12/19/2018 Permit Number: 108239

Location Description: 1125 HAPPY HOLLOW DR  
NEW BRAUNFELS, TX 78132

Subdivision: The Summit  
Unit: Phase 6  
Lot: 334  
Block:  
Acreage:

Type of System: Aerobic  
Surface Irrigation

Issued to: Paysco Properties, LLC

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

*James F. Connor*  
ENVIRONMENTAL HEALTH INSPECTOR

OS0032485

*Sandra Ann Hernandez*  
ENVIRONMENTAL HEALTH COORDINATOR

OS 0025599

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Countryside OSSF Installer #: 05 000 2929  
 1st Inspection Date: 11-21-18 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: 12-18-18 *final*  
 Inspector Name: Connor Inspector Name: \_\_\_\_\_ Inspector Name: Connor  
 Permit#: 108239 Address: Summitt Ext 1125 Happy Hollow

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)		/		
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)(iii) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(i)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

*tank set - level - operational - cover  
 covered 12-18-18*

**Comal County Environmental Health  
OSSF Inspection Sheet**

*Final*

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	/	285.33(d)(2)(G)(iii)(ii)285.33(d)(2)(G)(iii)(iii)285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(i)		/		
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed	/	285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)		/		/
42	APPLICATION AREA Area installed	/		5654 SJ	/		
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Countypide OSSF Installer #: OS 0002929  
 1st Inspection Date: 11-21-18 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: \_\_\_\_\_  
 Inspector Name: Connor Inspector Name: \_\_\_\_\_ Inspector Name: \_\_\_\_\_  
 Permit#: 108239 Address: Summitt Ext 1125 Happy Hollow

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)		/		
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)				

tank set - level - operational - cover

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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)(II) 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	/		<i>Clearstream 600 NC3T</i>	/		
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)				



**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
19	DISPOSAL SYSTEM Drip Irrigation		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
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)	<i>Aerobic spray</i>	✓		
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)				

**Comal County Environmental Health  
OSSF Inspection Sheet**

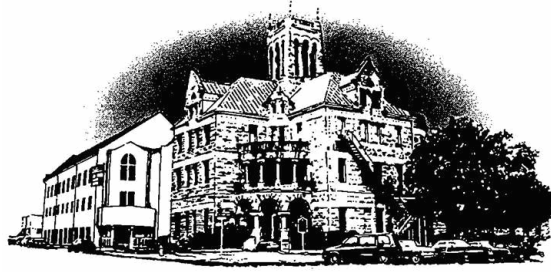
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less & an additional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



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OSSF Inspection Sheet**

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42	APPLICATION AREA Area Installed	/		5654 SJ	/		
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
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: 108239  
Issued This Date: 10/18/2018  
This permit is hereby given to: Paysco Properties, LLC

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

1125 HAPPY HOLLOW DR  
NEW BRAUNFELS, TX 78132

Subdivision: The Summit  
Unit: Phase 6  
Lot: 334  
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.

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

<i>items Date Received</i>	<i>initials</i>

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OCT 15 2018

<i>Permit Number</i>

COUNTY ENGINEER

Instructions:

Place a check mark next to all items that apply. For items that do not apply, place "N/A". This OSSF Development Application Checklist **must** accompany the completed application.

OSSF Permit

- Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate
- Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer
- Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist of a scaled design and all system specifications.
- Required Permit Fee
- Copy of Recorded Deed
- Surface Application/Aerobic Treatment System
  - Recorded Certification of OSSF Requiring Maintenance/Affidavit to the Public
  - Signed Maintenance Contract with Effective Date as Issuance of License to Operate

I affirm that I have provided all information required for my OSSF Development Application and that this application constitutes a completed OSSF Development Application.

  
 \_\_\_\_\_  
 Signature of Applicant

10/15/18  
 \_\_\_\_\_  
 Date

____ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

____ INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)



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

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

Date October 5, 2018

Permit # 109239

Owner Name PAYSCO PROPERTIES LLC  
Mailing Address 851 RIVER CLIFF  
City, State, Zip CANYON LAKE, TX, 78133  
Phone# 830-237-6307  
Email karen@rivercliffhomes.com

Agent Name GREG W. JOHNSON, P.E.  
Agent Address 170 HOLLOW OAK  
City, State, Zip NEW BRAUNFELS, TX 78132  
Phone # (830) 905-2778  
Email gregjohnsonpe@yahoo.com

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

Subdivision Name THE SUMMIT Unit/Phase/Section 6 Lot 334 Block \_\_\_\_\_  
Acreage/Legal \_\_\_\_\_  
Street Name/Address 1125 HAPPY HOLLOW City NEW BRAUNFELS Zip 78132

Type of Development:

Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1803

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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: \$ 225,000 (Structure Only)

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

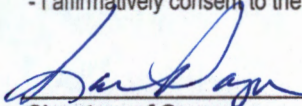
Yes  No (if yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water  Public  Private Well

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

By signing this application, 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.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

  
Signature of Owner

10/8/18  
Date

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

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

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Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

COUNTY ENGINEER

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

Tank Size(s) (Gallons) CLEARSTREAM 600NC3T Absorption/Application Area (Sq Ft) 5654

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? [X] 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? [X] 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 [X] No

Is there an existing TCEQ approval CZP for the property? [ ] Yes [X] 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 P.E. or R.S. 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 [X] No

If yes, indicate the city: \_\_\_\_\_



FIRM #2585

By signing this application, I certify that:

- The information provided above is true and correct to the best of my knowledge.

I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable

Signature of Designer

Date October 5, 2018



**AFFIDAVIT**

**THE COUNTY OF COMAL  
STATE OF TEXAS**



201806040536 10/15/2018 11:51:33 AM 1/1

*Yes*

**CERTIFICATION OF OSSF REQUIRING MAINTENANCE**

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities (OSSF's), this document is filed in the Deed Records of Comal County, Texas.

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OCT 15 2018

**I**

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (TCEQ) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 5.013, gives the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, 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 OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

COMAL COUNTY ENGINEER

**II**

An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91(12) will be installed on the property described as (insert legal description):

6 UNIT/PHASE SECTION \_\_\_\_\_ BLOCK 334 LOT \_\_\_\_\_ THE SUMMIT EXTENSION SUBDIVISION

IF NOT IN SUBDIVISION: \_\_\_\_\_ ACREAGE \_\_\_\_\_ SURVEY

The property is owned by (insert owner's full name): PAYSCO PROPERTIES, LLC

This OSSF must be covered by a continuous maintenance contract for the first two years. After the initial two-year service policy, the owner of an aerobic treatment system for a single family residence shall either obtain a maintenance contract within 30 days or maintain the system personally.

Upon sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the Comal County Engineer's Office.

WITNESS BY HAND(S) ON THIS 10 DAY OF 10 OCTOBER, 2018

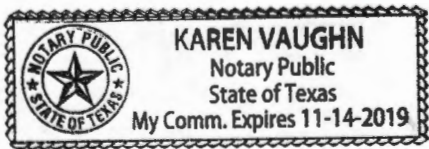
*Karen Payne*  
Owner(s) signature(s)

*Karen Payne* - MANAGER  
Owner (s) Printed name (s)

KAREN PAYNE SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 10 DAY OF  
OCTOBER, 2018

*Karen Vaughn*  
Notary Public Signature

THIS AREA FOR COMAL COUNTY CLERK RECORDING PURPOSES ONLY



(Notary Seal Here)

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
10/15/2018 11:51:33 AM  
TERRI 1 Page(s)  
201806040536



*Bobbie Koepf*

**Countryside Construction, Inc.**  
**300 Chapman Parkway, Canyon Lake, TX. 78133**  
**Phone: 830-899-2615 or 1-888-379-3721 Fax: 830-899-6662**  
**Septic System Service Agreement**

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COUNTY ENGINEER

In consideration of payment for this service contract, we will abide by and agree to its terms and conditions:

Name: PAYSCO PROPERTIES, LLC Address: 1125 HAPPY HOLLOW  
Sub-Div./County: SUMMIT EXT. / COMAL City, State-Zip: NEW BRAUNFELS, TX 78132  
Permit #: \_\_\_\_\_ Model #: CLEARSTREAM 800NC3T Serial #: \_\_\_\_\_  
Phone #: 830-237-6307

(X) Initial Two Year Service Agreement & Two Year Limited Warranty  
 ( ) One Year Service Agreement

The effective date of this initial maintenance contract shall be the date the License to Operate is issued.

Legal Description: THE SUMMIT EXTENSION, PHASE 6, LOT 334

This contract will be in effect FROM LTO TO \_\_\_\_\_ and will provide the following:

- A: An inspection/service call every (4) four months which will include: inspection, adjustments and servicing of the mechanical & electrical components as necessary to insure proper function of the system.
- B: An effluent quality inspection consisting of a visual check for color, turbidity, scum, overflow and odor.
- C: The property owner is responsible for "purchasing and keeping chlorine" in the chlorinator, (if applicable). If the chlorine test reveals "No Chlorine" in the system, the property owner may incur an additional cost.
- D: If any improper operation is observed (which cannot be corrected at that time) the property owner will be notified immediately of the conditions and the estimated cost.
- E: The response time to a complaint by the property owner regarding operation of the system, shall be within "48 hours," from the time of notification.
- F: ANY PARTS, WARRANTY OR NON-WARRANTY, OR FREIGHT CHARGES, LABOR OR SERVICE CALLS DUE NOT PAID FOR REMAIN THE PROPERTY OF COUNTRYSIDE CONSTRUCTION AND COULD RESULT IN REPOSSION OF PARTS BY COUNTRYSIDE CONSTRUCTION.
- G: THE SIGNING OF THIS SERVICE AGREEMENT AUTHORIZES COUNTRYSIDE CONSTRUCTION TO ENTER THE PROPERTY TO EXECUTE ALL TERMS OF THIS CONTRACT.

Countryside Construction, Inc., will warranty installation of the septic system to be according to state and county regulations and the designs approved by the county. **HOMEOWNER WILL BE RESPONSIBLE FOR SERVICE CALLS, LABOR AND SHIPPING COSTS ON ANY "WARRANTED PARTS" EXCHANGED DURING WARRANTY.** All other components will be according to manufacture's warranties.

**Important:** As Countryside Construction, Inc. cannot control what or how much effluent goes into this septic system, we cannot warranty how the system will function. Refer to manufacturers or installer's instructions, for suggestions on septic operation. This service agreement does not cover the cost of "Service Calls, Labor or Materials that are required or parts out of warranty, the failure to maintain electrical power to the system, sprinklers that are broken, leaking, stopped-up or otherwise mal-functioning; or sewage flows exceeding the hydraulic/organic design capabilities and the input of non-biodegradable materials (solvents, grease, oil, paints, etc.), or any usage contrary to the requirements as advised by authorized service representative. Laboratory test work is available at an additional cost. Chlorine, filters, or parts that are out of warranty are available at a reasonable cost.

This contract does not include the pumping of a tank or of any compartment of a tank, or settlement of soil on or around any part of the system regardless of reason:

Violations of the warranty also include: Disconnecting the alarm, restricting ventilation to the aerator, over loading the system above its rated capacity; or flooding by external means. Rodent, insect or Fire Ant damage or any other form of unusual abuse is a violation.

A renewal service contract should be "Activated" (30) thirty days before expiration of existing contract. We will contact property owner prior to expiration of existing contract.

Serviced by: Countryside Construction Inc.  
Walker Chapman - Operator Licensee #2929

Karen Payne Print Name: Karen Payne Date: 10/8/18  
Property Owner Signature

Walker Chapman Date: 10/8/18 Authorized Service Representative (revised 10/9/09)



Greg W. Johnson, P.E.  
170 Hollow Oak  
New Braunfels, Texas 78132  
830/905-2778

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OCT 15 2018

COUNTY ENGINEER

October 5, 2018

Comal County Office of Environmental Health  
195 David Jonas Drive  
New Braunfels, Texas 78132-3760

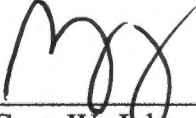
RE- SEPTIC DESIGN  
1125 HAPPY HOLLOW  
THE SUMMIT EXTENSION, PHASE 6, LOT 334  
NEW BRAUNFELS, TX 78132  
PAYSCO PROPERTIES, LLC

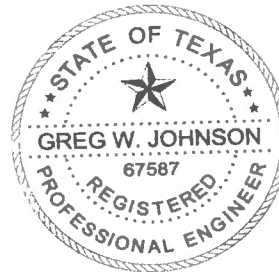
Ms. Brenda Ritzen/Sandra Hernandez,

The referenced property is located within the Edwards Aquifer Recharge Zone. This OSSF design will comply with requirements in the WPAP.

Temporary erosion and sedimentation controls should be utilized as necessary prior to construction. If any sensitive feature (caves, solution cavities, sink holes, etc.) is discovered during construction, activities must be suspended immediately and the applicant or his agent must immediately notify the TCEQ Regional Office. After that operations can only proceed after the Executive Director approves required additional engineered impact plans.

Designed in accordance with Chapter 285, Subchapter D, §285.40, 285.41, & 285.42, Texas Commission on Environmental Quality (Effective December 29, 2016).

 10/05/18  
\_\_\_\_\_  
Greg W. Johnson, P.E. No. 67587 / F#2585  
170 Hollow Oak  
New Braunfels, Texas 78132 - 830/905-2778



**ON-SITE SEWERAGE FACILITY  
SOIL EVALUATION REPORT INFORMATION**

Date Soil Survey Performed: October 04, 2018

Site Location: SUMMIT EXTENSION, PHASE 6, LOT 334

Proposed Excavation Depth: N/A

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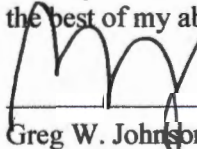
**Requirements:**

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area.  
Locations 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 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 the form. Indicate depths where features appear.

SOIL BORING NUMBER		SURFACE EVALUATION				
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	III	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 4"	BROWN
1						
2						
3						
4						
5						

SOIL BORING NUMBER		SURFACE EVALUATION				
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	SAME		AS		ABOVE	
1						
2						
3						
4						
5						

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

  
Greg W. Johnson, P.E. 67587-F2585, S.E. 11561

10/04/18  
Date

## OSSF SOIL EVALUATION REPORT INFORMATION

Date: October 05, 2018

### Applicant Information:

Name: PAYSCO PROPERTIES, LLC.  
Address: 851 RIVER CLIFF ROAD  
City: CANYON LAKE State: TEXAS  
Zip Code: 78133 Phone: (830) 237-6307

### Site Evaluator Information:

Name: Greg W. Johnson, P.E., R.S., S.E. 11561  
Address: 170 Hollow Oak  
City: New Braunfels State: Texas  
Zip Code: 78132 Phone & Fax (830)905-2778

### Property Location:

Lot 334 Unit 6 Blk      Subd. SUMMIT EXTENSION  
Street Address: 1125 HAPPY HOLLOW  
City: NEW BRAUNFELS Zip Code: 78132  
Additional Info.:                                 

### Installer Information:

Name:     
Company:     
Address:     
City:    State:                                   
Zip Code:                          Phone                                 

**Topography:** Slope within proposed disposal area: 4 to 6 %  
Presence of 100 yr. Flood Zone: YES      NO X  
Existing or proposed water well in nearby area. YES      NO X  
Presence of adjacent ponds, streams, water impoundments YES      NO X  
Presence of upper water shed YES      NO X  
Organized sewage service available to lot YES      NO X

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### Design Calculations for Aerobic Treatment with Spray Irrigation:

#### Commercial

Q =                  GPD

**Residential** Water conserving fixtures to be utilized? Yes X No     

Number of Bedrooms the septic system is sized for: 3 Total sq. ft. living area 1803

Q gal/day = (Bedrooms +1) \* 75 GPD - (20% reduction for water conserving fixtures)

Q = (3 +1)\*75-(20%)= 240

Trash Tank Size 400 Gal.

TCEQ Approved Aerobic Plant Size 700 G.P.D.

Req'd Application Area = Q/Ri = 240 / 0.064 = 3750 sq. ft.

Application Area Utilized = 5654 sq. ft.

Pump Requirement 12 Gpm @ 41 Psi (Redjacket 0.5 HP 18 G.P.M. series or equivalent)

Dosing Cycle:      ON DEMAND or X TIMED TO DOSE IN PREDAWN HOURS

Pump Tank Size = 700 Gal. 12.3 Gal/inch.

Reserve Requirement = 80 Gal. 1/3 day flow.

Alarms: Audible & Visual High Water Alarm & Visual Air Pump malfunction

With Chlorinator NSF/TCEQ APPROVED

SCH-40 or SDR-26 3" or 4" sewer line to tank

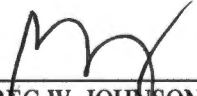
Two way cleanout

Pop-up rotary sprinkler heads w/ purple non-potable lids

1" Sch-40 PVC discharge manifold

APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

I HAVE PERFORMED A THOROUGH INVESTIGATION BEING A REGISTERED PROFESSIONAL ENGINEER AND SITE EVALUATOR IN ACCORDANCE WITH CHAPTER 285, SUBCHAPTER D, §285.30, & §285.40 (REGARDING RECHARGE FEATURES), TEXAS COMMISSION OF ENVIRONMENTAL QUALITY (EFFECTIVE DECEMBER 29, 2016)

  
\_\_\_\_\_  
GREG W. JOHNSON, P.E. F#002585 - S.E. 11561

10/05/18  
\_\_\_\_\_  
DATE



**FIRM #2585**

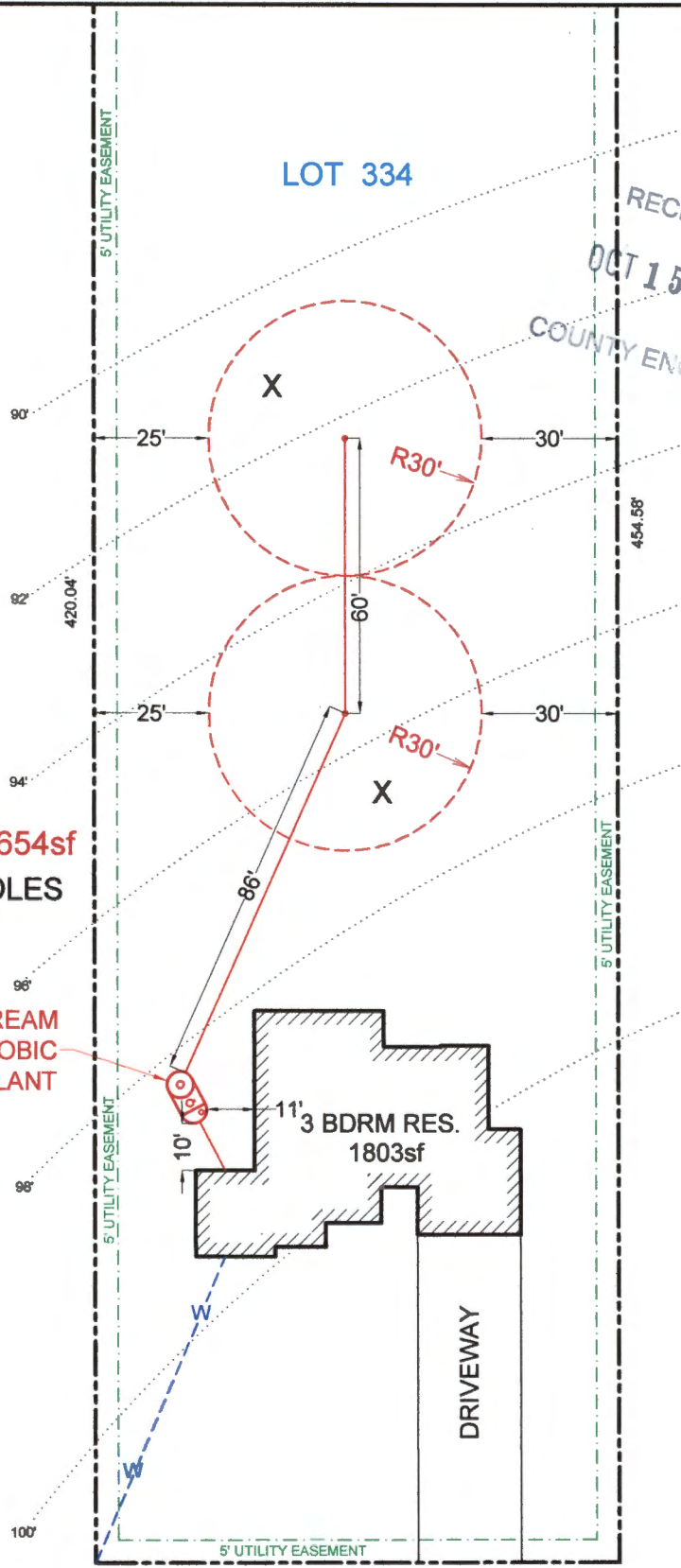


LOT 334

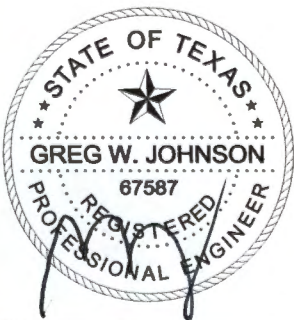
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SPRAY AREA = 5654sf  
X= TEST HOLES

CLEARSTREAM  
600NC3T AEROBIC  
TREATMENT PLANT



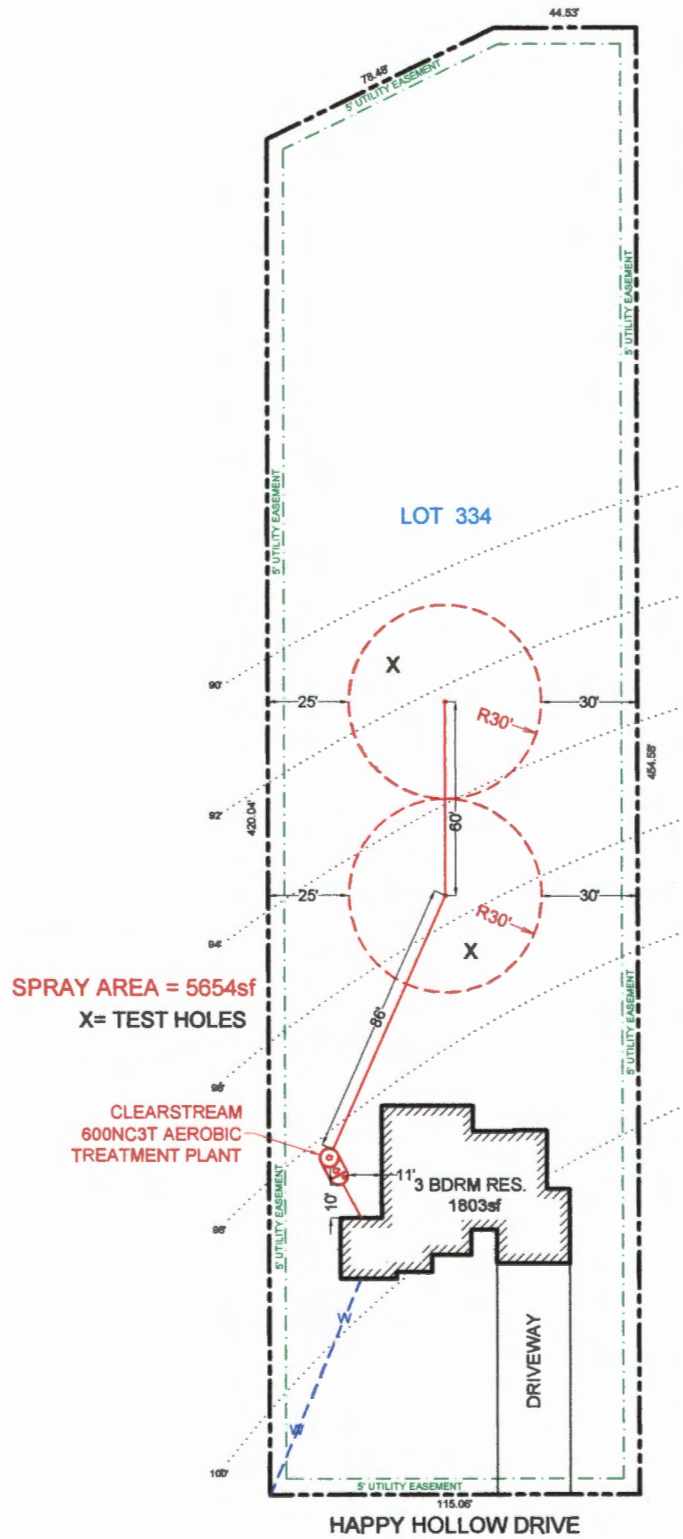
HAPPY HOLLOW DRIVE



OWNER: PAYSICO PROPERTIES, LLC.		DRAWN BY: EJS III	
STREET ADDRESS: 1125 HAPPY HOLLOW			
LEGAL DESC: SUMMIT EXTENSION	UNIT/SECTION/PHASE: 6	BLOCK:	LOT: 334
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=40'	DATE: 10/5/2018	REVISED:



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 COUNTY ENGINEER



OWNER: PAYSICO PROPERTIES, LLC.		DRAWN BY: EJS III	
STREET ADDRESS: 1125 HAPPY HOLLOW			
LEGAL DESC: SUMMIT EXTENSION	UNIT/SECTION/PHASE: 6	BLOCK:	LOT: 334
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=60'	DATE: 10/5/2018	REVISED:



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F-2585

10/05/18

### TANK NOTES:

Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

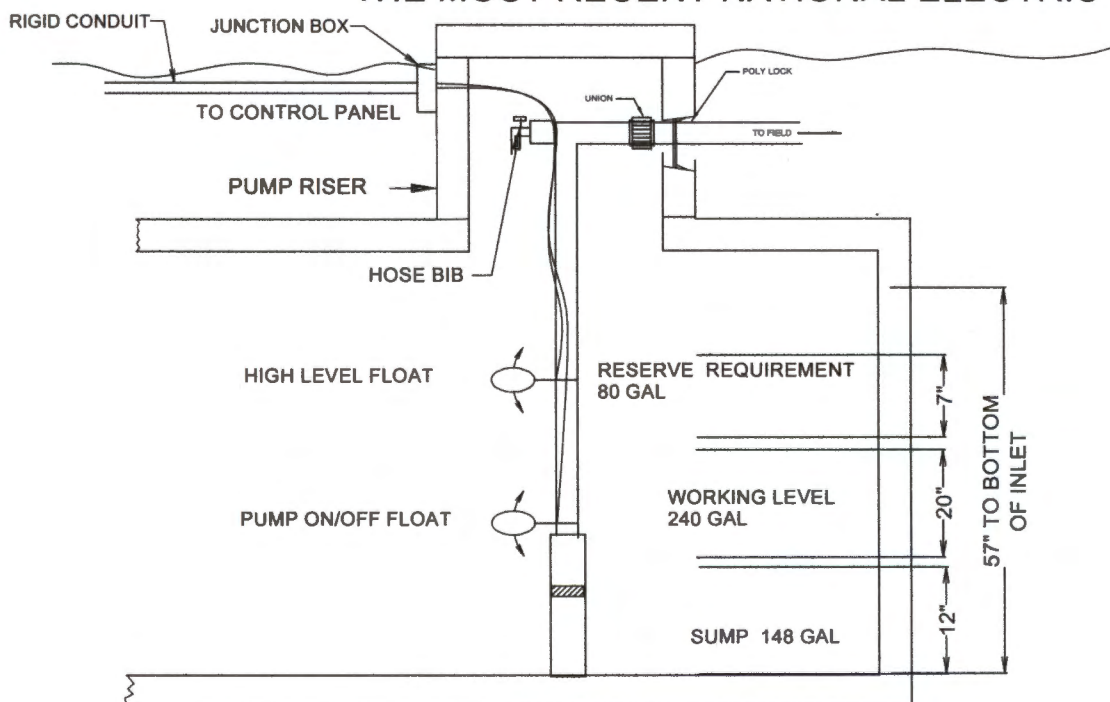
Tightlines to the tank shall be SCH-40 PVC.

A two way sanitary tee is required between residence and tank.

A minimum of 4" of sand, sandy loam, clay loam free of rock shall be placed under and around tanks

Tanks must be left uncovered and full of water for inspection by the permitting authority.

ALL WIRING MUST BE IN COMPLIANCE WITH THE MOST RECENT NATIONAL ELECTRIC CODE

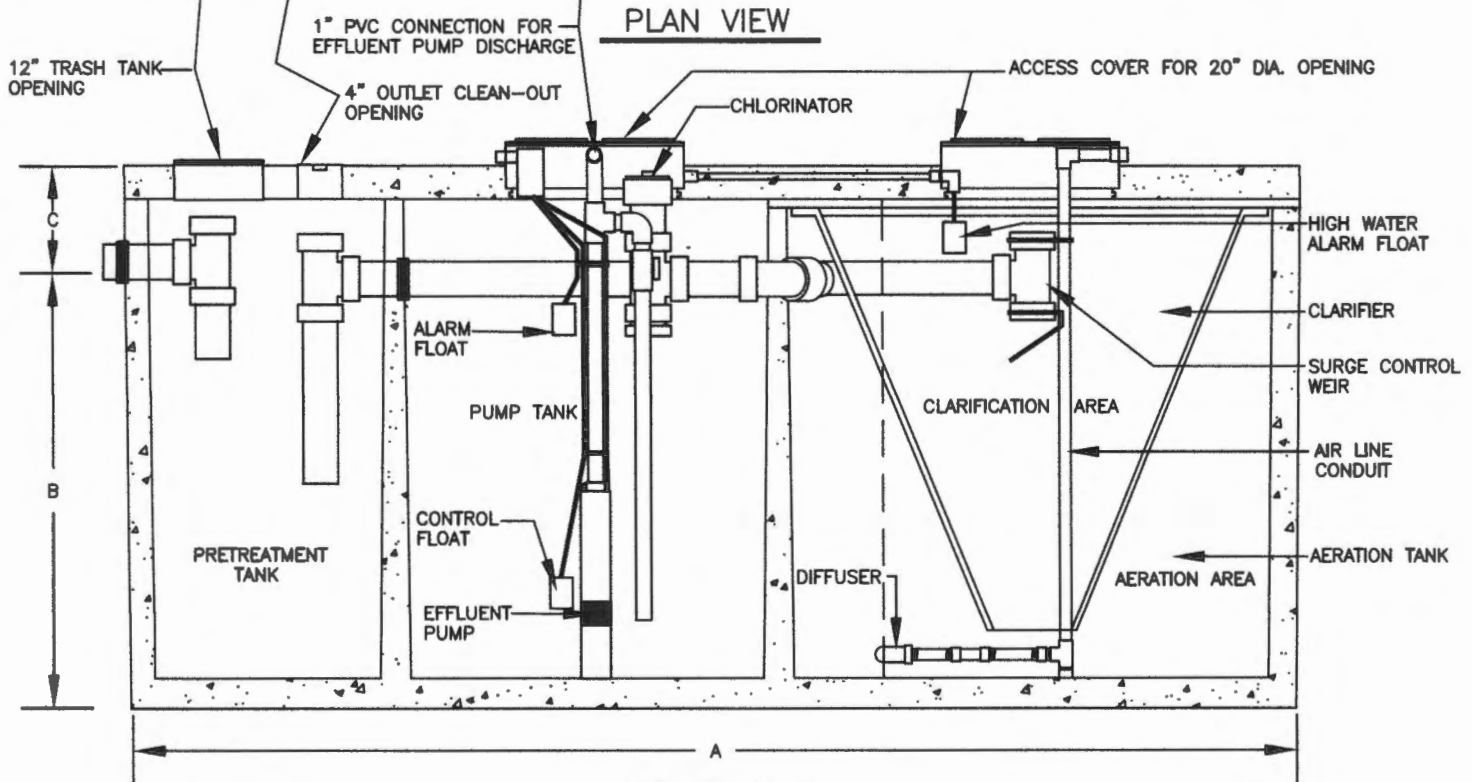
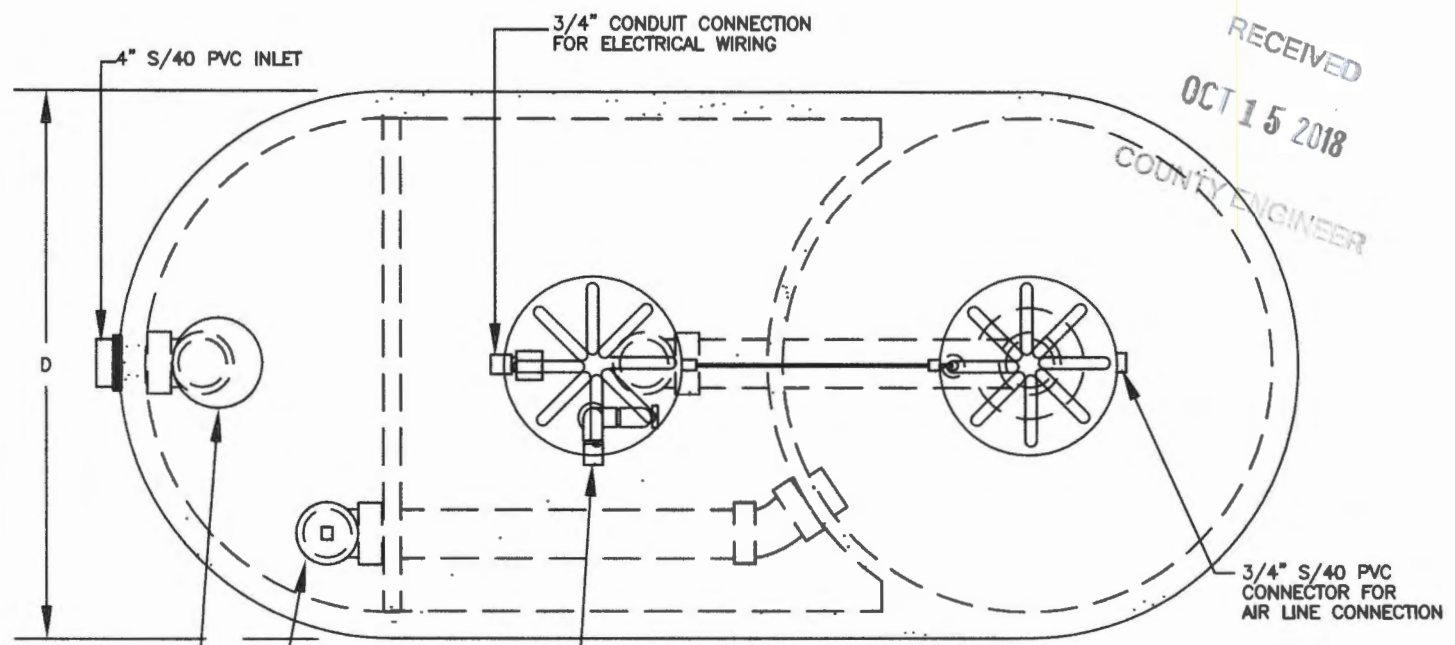


TYPICAL PUMP TANK CONFIGURATION

CLEARSTREAM 600NC3T W/ 700 GAL PUMP TANK

# DESIGN DRAWINGS

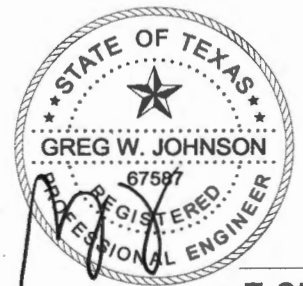
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MODEL NC3  
SECTION

## DIMENSIONAL DATA

MODEL	A	B	C	D
500NC3-500	12'-2"	60"	10"	75"
500NC3-750	13'-5"	60"	10"	75"
600NC3	12'-7"	60"	10"	82"



10/5/18

F-2585



358

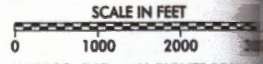
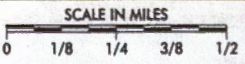
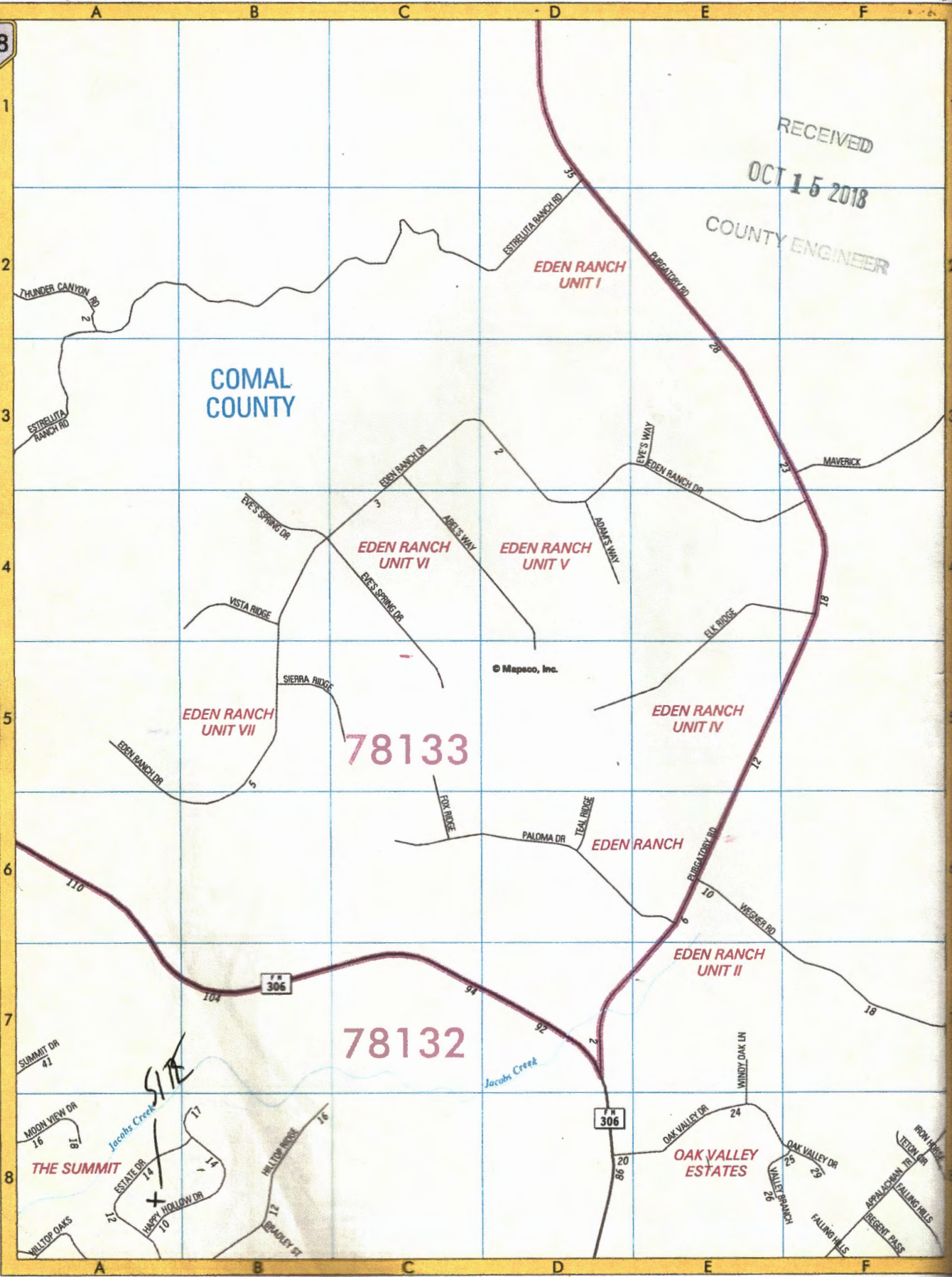


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COMAL COUNTY

78133

78132



General Warranty Deed

STC 238771 mw

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.

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OCT 15 2018  
COUNTY (E)

Date: July 17, 2018

Grantor: DEBORAH SIEGEL and MARICELA LOPEZ

Grantee: PAYSICO PROPERTIES, LLC

Grantee's Mailing Address: 851 River Cliff Canyon Lake, TX 78133

Consideration: Cash and other valuable consideration.

Property (including any improvements):

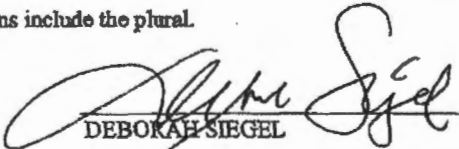
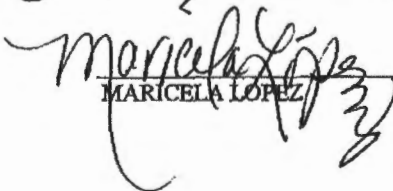
Lot 334, SUMMIT EXTENSION, PHASE 6, a subdivision in the City of New Braunfels, Comal County, Texas, according to the map or plat thereof recorded in Volume 9, Page(s) 50-52, Map and Plat Records of Comal County, Texas;

Reservations from Conveyance: NONE.

Exceptions to Conveyance and Warranty: Any and all restrictions, covenants, conditions, reservations, mineral leases, interests, agreements and easements, shown of record in the hereinabove mentioned County and State and to all zoning laws, regulations and ordinances of municipal and/or governmental authorities, if any, but only to the extent that they are still in effect relating to the hereinabove described property, and further subject to all stand by fees, taxes and assessments by any taxing authority for the current and subsequent years, and subsequent taxes and assessments for prior years due to changes in land usage or ownership and all matters reflected on the hereinabove mentioned plat.

Grantor, for the Consideration and subject to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty, grants, sells, and conveys to Grantee the Property, together with all and singular the rights and appurtenances thereto in any way belonging, to have and to hold it to Grantee and Grantee's heirs, successors, and assigns forever. Grantor binds Grantor and Grantor's heirs and successors to warrant and forever defend all and singular the Property to Grantee and Grantee's heirs, successors, and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, except as to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty.

When the context requires, singular nouns and pronouns include the plural.

  
DEBORAH SIEGEL  
  
MARICELA LOPEZ



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ACKNOWLEDGMENT

STATE OF TEXAS

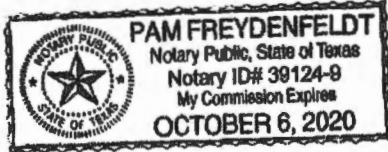
COUNTY OF *Williamson*

§  
§  
§  
§

COUNTY

This instrument was acknowledged before me on the 17 day of July, 2018, by DEBORAH SIEGEL and MARICELA LOPEZ.

*Pam Freydenfeldt*  
Notary Public in and for the State of Texas



AFTER RECORDING RETURN TO:

PAYSCO PROPERTIES, LLC  
*851 River Cliff*  
*Canyon Lake, TX 78133*

PREPARED IN THE LAW OFFICES OF:

THE HOUGHAM LAW FIRM  
5152 Fredericksburg Road, Ste. 280A  
San Antonio, Texas 78229  
Telephone No. (210) 375-7570

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
07/18/2018 10:27:10 AM  
TERRI 2 Pages(s)  
201806028114



*Bobbie Koepf*

COUNTRYSIDE CONSTRUCTION, INC.  
 300 CHAPMAN PARKWAY  
 CANYON LAKE, TX 78133

Phone: 830-899-2515  
 Fax: 830-899-6662

**TESTING AND REPORTING RECORD**

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

Inspection Date: AUGUST 19, 2019 Installed: 12-19-2018 Service Expires: 12-19-2020

**BILLING ADDRESS:**

\* JOEL EVANS & KELLY HEARTIG  
1125 HAPPY HOLLOW  
NEW BRAUNFELS, TX 78133

**PHYSICAL ADDRESS**

1125 HAPPY HOLLOW  
NEW BRAUNFELS, TX 78133

TELEPHONE 820-499-0400 (KELLY)  
 ALT PHONE

LOT LT 38A

SECTION # 108239  
 COUNTY COMAL  
 SW 1\*12025  
 MAPSHEET NOT AVAILABLE

SUBDIVISION: THE SUMMIT Manufacturer: CLEARSTREAM SPRING

**NOTES**

TYPE OF SYSTEM SPRAY

Inspected Item	Operational	Inoperative
Aerators/SOFC Compressors PSI (Record Pressure Readings)	<u>1.5</u>	
Filters	<u>/</u>	
Irrigation Pumps	<u>/</u>	
Recirculation Pumps	<u>N/A</u>	
Disinfection Device	<u>/</u>	
Chlorine Supply	<u>/</u>	
Electrical Circuits	<u>/</u>	
Distribution System	<u>/</u>	
Sprayfield Vegetation		
Back Flush Drip Field, if applicable	<u>N/A</u>	
Other as Noted	<u>1</u>	
Access Points are Secured	<u>Yes</u>	No

1. Action taken or Repairs or Needed repairs to system (list all components replaced)

CHECKED COMPRESSORS  
sprinklers, pump.  
Alarm, FLOATS  
Adjusted Timer

**2. Tests performed and results**

	Required		Results	Test Method
	Yes	No		
BOD Grab				
TSS Grab			<u>OK</u>	
Cl Grab	<u>/</u>			
Feet Coliform				

Copies of this report have been forwarded to the following: COMAL county homeowner

Manufacture Technician: THOMAS ID: \_\_\_\_\_

Date of completion: 8-22-19 Start Time: 12:40 Stop Time: 12:53

Manufacture Operator: Walker Chapman

**COUNTRYSIDE CONSTRUCTION, INC.**  
**300 CHAPMAN PARKWAY**  
**CANYON LAKE, TX 78133**

**Phone: 830-899-2615**  
**Fax: 830-899-6662**

**TESTING AND REPORTING RECORD**

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: AUGUST 19, 2020 Installed: 12/19/2018 Service Expires: 12/19/2020

BILLING ADDRESS:  
 \* JOEL EVANS & KELLY HEARTIG  
 1125 HAPPY HOLLOW  
 NEW BRAUNFELS, TX 78133

PHYSICAL ADDRESS:  
 1125 HAPPY HOLLOW  
 NEW BRAUNFELS, TX 78132

TELEPHONE: 830-499-0409 (KELLY)  
 ALT. PHONE:

LOT: LT 334,

PERMIT#: 108239

COUNTY: COMAL

SN: 1712028

SUBDIVISION: THE SUMMIT MFG: CLEARSTRM 600NC3T

MAPSCO: N/A

NOTES:

TYPE OF SYSTEM: SPRAY

Inspected Item:	Operational	Inoperative
Aerators		
SCFM/Compressors PSI (Record Pressure Reading)	3.0	
Filters	/	
Irrigation Pumps	/	
Recirculation Pumps	N/A	
Disinfection Device	/	
Chlorine Supply	/	
Electrical Circuits	/	
Distribution System	/	
Sprayfield Vegetation	/	
Back Flush Drip Field, if applicable	N/A	
Other as Noted		

2. Action taken or Repairs or Needed repairs to system (list all components replaced):

checked compressor  
 cleaned air filter  
 checked chloring  
 flats and sprinklers  
 set timer

SYSTEM OPERATING AS DESIGNED?  Y/N

Access Posts are Secured  Yes  No

3. Tests required and results:

	Required		Results mg/l mpn/100mi or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)		/	clear	grab
Cl (Grab)	/		1.0	OTO
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: Winkle 2

Date of completion: 12-14-20 Start Job Time: \_\_\_\_\_ Stop Job Time: \_\_\_\_\_

Maintenance Provider: Willie Chapman



COUNTRYSIDE CONSTRUCTION, INC.  
 300 CHAPMAN PARKWAY  
 CANYON LAKE, TX 78133

Phone: 830-899 2615  
 Fax: 830-899-6662

**TESTING AND REPORTING RECORD**

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: DECEMBER 19, 2020 Installed: 12/19/2018 Service Expires: 12/19/2020

BILLING ADDRESS:  
 \* JOEL EVANS & KELLY HEARTIG  
 1125 HAPPY HOLLOW  
 NEW BRAUNFELS, TX 78133

PHYSICAL ADDRESS:  
 1125 HAPPY HOLLOW  
 NEW BRAUNFELS, TX 78132

TELEPHONE: 830-499-0409 (KELLY)  
 ALT. PHONE:

LOT: LT 334,

PERMIT#: 108239

COUNTY: COMAL

SN: 1712028

MAPBOOK: N/A

SUBDIVISION: SUMMIT (THE) MFG: CLEARSTRM 600NC3T

NOTES:  
 TYPE OF SYSTEM: SPRAY

Inspected Item:	Operational	Inoperative
Aerators		
3CFM/Compressors PSI (Record Pressure Readings)	30	
Filters	/	
Irrigation Pumps	/	
Recirculation Pumps	N/A	
Disinfection Device	/	
Chlorine Supply	/	
Electrical Circuits	/	
Distribution System	/	
Sprayfield Vegetation	/	
Back Flush Drip Field, if applicable	N/A	
Other as Noted		

2. Action taken or Repairs or  
 Needed repairs to system (list all  
 components replaced):

Checked compressor

Cleaned air filter

Checked chlorine

floats and sprinklers

set timer

SYSTEM OPERATING AS DESIGNED? yes

Access Ports are Secured yes No

3. Tests required and results:

	Required		Results mg/l mpn/100ml or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)	/		Clear	grab
Cl (Grab)	/		1.0	oto
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: Winkle

Date of completion: 1-15-21 Start Job Time: \_\_\_\_\_ Stop Job Time: \_\_\_\_\_

Maintenance Provider: Wick Construction