



# COMAL COUNTY

## ENGINEER'S OFFICE

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

Issued This Date: **10/17/2019** Permit Number: **109068**

Location Description: **652 TURKEY CANYON DR  
SPRING BRANCH, TX 78070**

Subdivision: Cypress Lake Gardens, Western Skies Sect  
Unit:  
Lot: 15  
Block: 105  
Acreage:

Type of System: Aerobic  
Drip Irrigation

Issued to: Irene Luna

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:

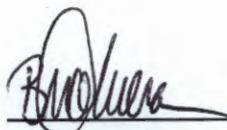
- Increase in the square feet of living area
- Increase in the number of bedrooms
- A change of use (i.e. residential to commercial)
- Relocation of system components (including the relocation of spray heads)
- Installation of landscaping
- Adding new structures to the system

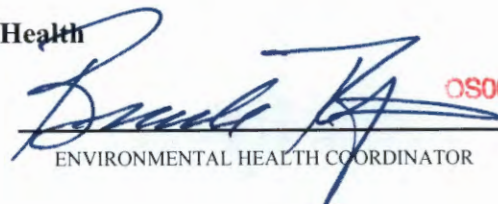
may require a new permit. **It is the responsibility of the owner to apply for a new permit, if applicable.**

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

  
OS0034792  
ENVIRONMENTAL HEALTH INSPECTOR

  
OS0007722  
ENVIRONMENTAL HEALTH COORDINATOR

10-17-19  
Final

**Comal County Environmental Health  
OSSF Inspection Sheet**

Installer Name: VERONICA CASAR OSSF Installer ID: 050023417  
 1st Inspection Date: 7-23-19 FAIL 2nd Inspection Date: 7-29-19 FAIL 3rd Inspection Date: 08-02-19  
 Inspector Name: CONNOR Inspector Name: CONNOR Inspector Name: CONNOR

Permit #: 109068 Address: 657 TURKEY CANYON DR EXPRESS LAKE GARDENS

No.	Description	Answer	Options	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)	not per design		/	10-17-19
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	/	285.31(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)	not connected to house		/	
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)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

7-23-19 JC  
 TANK CHECK ONLY, SET/LEVELLED  
 NEED TO PLACE SOIL PER DESIGN,  
 revision needed for tank rotation: field layout  
 needs class II underneath tubing. Correct filter SC placement. not operational  
 7-29-19 - move gauge to out flow do not cover field, JC need operational  
 08-02-19 JC operational call all  
 10-17-19 BUD covered

**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)(III) 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)		/		10-7-19
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	/		NUWATER 600	/		/
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)(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(c)(3)(A)-(F)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
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 manufacturer's 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.
	<p>EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling</p> <p>EFFLUENT DISPOSAL SYSTEM Topographic Slopes</p> <p>&lt; 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less &amp; an additional 400 ft. for each additional bedroom )</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. &amp; 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.) &amp; 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>				
32	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.	/	285.32(c)(1)		/		10-17-19
33	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	/			/		
34	AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions	/			/		
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place						
36	<p>PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials &amp; 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	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	/					

**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)		/		10-17-19
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	/			/		
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

Retailer Name: VERDE SA EASTAD OSSF Installer #: 050023417  
 1st Inspection Date: 7-23-19 FAIL 2nd Inspection Date: 7-29-19 FAIL 3rd Inspection Date: 08-02-19  
 Inspector Name: COMNER Inspector Name: COMNER Inspector Name: COMNER

Permit #: 109068 Address: 652 TURKEY CANYON DR / CYPRESS LAKE GARDENS

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)	<i>not per design</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)	<i>not connected to house</i>		/	
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)				

7-23-19 JC  
 TANK CHECK ONLY, SET/LEVELLED  
 NEED TO PLACE SOIL PER  
 DESIGN.  
 revision needed for  
 tank rotation: field layout

needs class II underneath tubing. Correct filter SC  
 placement. not operational  
 7-29-19 - move gauge to out flow  
 do not cover field, SC need operational

08-02-19 JC  
 operational cover all

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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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)				
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15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	/		NUWATER 600	/		
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
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**Comal County Environmental Health  
OSSF Inspection Sheet**

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**Comal County Environmental Health  
OSSF Inspection Sheet**

(No.)	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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32	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.	/	285.32(c)(1)		/		
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34	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
35	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						
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38	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried	/					/

**Comal County Environmental Health  
OSSF Inspection Sheet**

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)(I) 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)				
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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						

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: VERGENZA CASTRO OSSF Installer #: 050028417

1st Inspection Date: 7-23-19 FAIL 2nd Inspection Date: 7-29-19 FAIL 3rd Inspection Date: \_\_\_\_\_

Inspector Name: CONNOR Inspector Name: CONNOR Inspector Name: \_\_\_\_\_

Permit#: 109068 Address: 657 TURKEY CANYON DR / CYPRESS LAKE GARDENS

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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7-23-19 JC  
 TANK CHECK ONLY, SET/LEVELLED  
 NEED TO PLACE SOIL PER  
 DESIGN.  
 revision needed for  
 tank rotation: field layout

*needs class II underneath tubing. Correct filter SC  
 placement. not operational  
 7-29-19 - move gauge to out flow  
 do not cover field. SC need operational*

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: VERGENIA CASTRO OSSF Installer #: 050028417

1st Inspection Date: 7-23-19 FAIL 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: \_\_\_\_\_

Inspector Name: CONNOR Inspector Name: \_\_\_\_\_ Inspector Name: \_\_\_\_\_

Permit#: 109068 Address: 657 TURKEY CANYON DR / CYPRESS LAKE GARDENS

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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7-23-19 JC  
*TANK CHECK ONLY, SET/LEVELLED  
 NEED TO PLACE SOIL PER  
 DESIGN,  
 revision needed for  
 tank rotation : field layout*

*needs class II underneath tubing. Correct filter JC  
 placement. not operational*

**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	—		NUWATER 600	—		
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(c)(3)(A)-(F)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
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)				

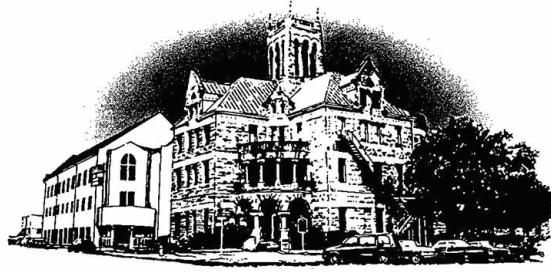
**Comal County Environmental Health  
OSSF Inspection Sheet**

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 &lt; 2.0%</p> <p>EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less &amp; an additional 400 ft. for each additional bedroom )</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. &amp; 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.) &amp; 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 &amp; 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 &amp; 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 &amp; 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>						
38	<p>PUMP TANK Secondary restraint system provided</p>						
39	<p>PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried</p>						



**Comal County Environmental Health  
OSSF Inspection Sheet**

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						
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: 109068  
Issued This Date: 05/07/2019  
This permit is hereby given to: Irene Luna

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

652 TURKEY CANYON DR  
SPRING BRANCH, TX 78070

Subdivision: Cypress Lake Gardens, Western Skies Sect  
Unit:  
Lot: 15  
Block: 105  
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic  
Drip 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 \_\_\_\_\_ Permit # 109068  
Owner Name Irene Luna Agent Name Douglas R. Dowlearn  
Mailing Address 2021 Indian Hills Agent Address 703 Oak Drive  
City, State, Zip Spring Branch, TX 78070 City, State, Zip Blanco, TX 78606  
Phone # 620.655.6291 Phone # 210.240.2101  
Email jarmondov0625@gmail.com Email txseptic@gmail.com

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

Subdivision Name Western Skies Section of Cypress Lake Gardens Unit \_\_\_\_\_ Lot 15 Block 105  
Acreage/Legal .2661  
Street Name/Address 652 Turkey Canyon Drive City Spring Branch Zip 78070

Type of Development:

Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1120

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: \$ \$10,000<sup>00</sup> (Structure Only) Complete

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 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.

Irene Luna  
Signature of Owner

4-11-19  
Date

Sign & Date

\*\*\* 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 Douglas R. Dowlearn

System Description Aerobic Treatment with drip disposal

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

Tank Size(s) (Gallons) 600 gpd Absorption/Application Area (Sq Ft) 1200 Required

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.)

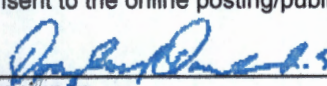
Is this property within an incorporated city?  Yes  No

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

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

4/8/19

Date

Page 2 of 2

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AFFIDAVIT TO THE PUBLIC

COUNTY ENGINEER

THE COUNTY OF COMAL  
STATE OF TEXAS

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.

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (commission) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 6.013, 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.

||

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):

Lot 15, Block 105, Western Skies Section, Cypress Lake Gardens

The property is owned by (Insert owner's full name): Irene Luna

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 11 DAY OF April, 2019.

Irene Luna

Irene Luna  
Owner(s) signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 11 DAY OF April, 2019

[Signature]  
Notary Public, State of Texas Pharos

Notary's Printed Name: Karen Aracely  
My Commission Expires: 01-30-20





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COUNTY ENGINEER

This page has been added to comply with the statutory requirement that the clerk shall stamp the recording information at the bottom of the last page.

This page becomes part of the document identified by the file clerk number affixed on preceding pages.

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
04/24/2019 02:23:22 PM  
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201906013884



*Bobbie Koepf*

WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

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Regulatory Authority \_\_\_\_\_  
Block Creek Aerobic Services, LLC  
444 A Old Hwy #9  
Comfort, TX 78013  
Off. (830) 995-3189  
Fax. (830) 995-4051

Permit/License Number \_\_\_\_\_  
Customer Irene Luna  
Site Address 652 Turkey Canyon Drive  
City Spring Branch Zip 78070  
Mailing Address 2021 Indian Hills, Spring Branch, TX 78070  
County Comal Map # \_\_\_\_\_  
Phone 620.655.6291  
Email jarmondov0625@gmail.com

COUNTY ENGINEER

**I. General:** This Work for Hire Agreement (hereinafter referred to as "Agreement") is entered into by and between Irene Luna (hereinafter referred to as "Customer") and Block Creek Aerobic Services, LLC. By this agreement, Block Creek Aerobic Services, LLC and its employees (hereinafter inclusively referred to as "Contractor") agree to render services at the site address stated above, as described herein, and the Customer agrees to fulfill his/her/their responsibilities, as described herein.

**II. Effective Date:** Issue date of License to Operate \_\_\_\_\_ and ends on 2 yrs from License to Operate  
This Agreement commences on \_\_\_\_\_ and ends on \_\_\_\_\_ for a total of two (2) years (initial agreement) or one (1) year (thereafter). If this is an initial agreement (new installation), the Customer shall notify the Contractor within two (2) business days of the system's first use to establish the date of commencement. If no notification is received by Contractor within ninety (90) days after completion of installation or where county authority mandates, the date of commencement will be the date the "License to operate" (Notice of Approval) was issued by the permitting authority. This agreement may or may not commence at the same time as any warranty period of installed equipment, but in no case shall it extend the specified warranty.

**III. Termination of Agreement:**  
This Agreement may be terminated by either party for any reason, including for example, substantial failure of either party to perform in accordance with the terms of this Agreement, without fault or liability of the terminating party. The terminating party must provide written notice to the non-terminating party thirty (30) days prior to the termination of this Agreement. If this Agreement is terminated, Contractor will be paid at the rate of \$75.00 per hour for any work performed and for which compensation has not been received. After the deduction of all outstanding charges, any remaining monies from prepayment for services will be refunded to customer within thirty (30) days of termination of this Agreement. Either party terminating this Agreement for any reason, including non-renewal, shall notify in writing the equipment manufacturer and the appropriate regulatory agency a minimum of thirty (30) days prior to the date of such termination. Nonpayment of any kind shall be considered breach of contract and a termination of contract.

**IV. Services:**  
Contractor will:  
a. Inspect and perform routine upkeep on the On-Site Sewage Facility (hereinafter referred to as OSSF) as recommended by the treatment system manufacturer, and required by state and/or local regulation, for a total of three visits to site per year. The list of items checked at each visit shall be the: control panel, Electrical circuits, timer, Aeration including compressor and diffusers, CFM/PSI measured, lids safety pans, pump, compressor, sludge levels, and anything else required as per the manufacturer.  
b. Provide a written record of visits to the site by means of an inspection tag attached to or contained in the control panel.  
c. Repair or replace, if Contractor has the necessary materials at site, any component of the OSSF found to be failing or inoperative during the course of a routine monitoring visit. If such services are not covered by warranty, and the service(s) cost less than \$100.00, Customer hereby authorizes Contractor to perform the service(s) and bill Customer for said service(s). When service costs are greater than \$100.00, or if contractor does not have the necessary supplies at the site, Contractor will notify Customer of the required service(s) and the associated cost(s). Customer must notify Contractor of arrangements to affect repair of system within two (2) business days after said notification.  
d. Provide sample collection and laboratory testing of TSS and BOD on a yearly basis (commercial systems only).  
e. Forward copies of this Agreement and all reports to the regulatory agency and the Customer.  
f. Visit site in response to Customer's request for unscheduled services within forty-eight (48) hours of the date of notification (weekends and holidays excluded) of said request. Unless otherwise covered by warranty, costs for such unscheduled responses will be billed to Customer.

I.L.  
Customer's Initials



BS  
Contractor's Initials

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**V. Disinfection:**

\_\_\_\_ Not required; X required. The responsibility to maintain the disinfection device(s) and provide any necessary chemicals is that of the Customer.

**VI. Electronic Monitoring:**

Electronic Monitoring is not included in this Agreement.

**VII. Performance of Agreement:**

Commencement of performance by Contractor under this Agreement is contingent on the following conditions:

a. If this is an Initial Agreement (new installation):

1. Contractor's receipt of a fully executed original copy or facsimile of this agreement and all documentation requested by Contractor.

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

**VIII. Customer's 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, including but not limited to dogs and other animals, vehicles, trees, brush, trash, or debris, as needed to allow the OSSF to function properly, and to allow Contractor safe and easy access to all parts of the OSSF.

b. Protect equipment from physical damage including but not limited to that damage caused by insects.

c. Maintain a current license to operate, and abide by the conditions and limitations of that license, and all requirements for and OSSF from the State and/or local regulatory agency, whichever requirements are more stringent, as well as the proprietary system's manufacturer recommendations.

d. Notify Contractor immediately of any and all alarms, and/or any and all problems with, including failure of, the OSSF.

e. Provide, upon request by Contractor, water usage records for the OSSF so that the Contractor can perform a proper evaluation of the performance of the OSSF.

f. Allow for samples at both the inlet and outlet of the OSSF to be obtained by Contractor for the purpose of evaluating the OSSF's performance. If these samples are taken to a laboratory for testing, with the exception of the service provided under Section IV (d) above, Customer agrees to pay Contractor for the sample collection and transportation, portal to portal, at a rate of \$35.00 per hour, plus the associated fees for laboratory testing.

g. Prevent the backwash or flushing of water treatment or conditioning equipment from entering the OSSF.

h. Prevent the condensation from air conditioning or refrigeration units, or the drains of icemakers, from hydraulically overloading the aerobic treatment units. Drain lines may discharge into the surface application pump tank if approved by system designer.

i. Provide for pumping and cleaning of tanks and treatment units, when and as recommended by Contractor, at Customer's expense.

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

k. Pay promptly and fully, all Contractor's fees, bills, or invoices as described herein.

**IX. Access by Contractor:**

Contractor is hereby granted an easement to the OSSF for the purpose of performing services described herein. Contractor may enter the property during Contractor's normal business hours and/or other reasonable hours without prior notice to Customer to perform the Services and/or repairs described herein. Contractor shall have access to the OSSF electrical and physical components. Tanks and treatment units shall be accessible by means of man ways, or risers and removable covers, for the purpose of evaluation as required by State and/or local rules and the proprietary system manufacturer. It is Customer's responsibility to keep lids exposed and accessible at all times.

**X. Limit of Liability:**

Contractor shall not be held liable for any incidental, consequential, or special damages, or for economic loss due to expense, or for 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 liable in an amount exceeding the total Fee for Services amount paid by Customer under this Agreement.

**XI. Indemnification:**

Customer (whether one or more) shall and does hereby agree to indemnify, hold harmless and defend Contractor and each of its successors, assigns, heirs, legal representatives, devisees, employees, agents and/or counsel (collectively "Indemnitees") from and against any and all liabilities, claims, damages, losses, liens, causes of action, suits, fines, judgments and other expenses (including, but not limited to, attorneys' fees and expenses and costs of investigation), of any kind, nature or description, (hereinafter collectively referred to as "liabilities") arising out of, caused by, or resulting, in whole or in part, from this Agreement.

I.L

Customer's Initials



BS

Contractor's Initials



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COUNTY ENGINEER

**THIS INDEMNIFICATION APPLIES EVEN IF SUCH LIABILITIES ARE CAUSED BY THE CONCURRENT OR CONTRIBUTORY NEGLIGENCE OR BY THE STRICT LIABILITY OF ANY INDEMNITEE.**

Customer hereby waives its right of recourse as to any Indemnitee when Indemnification applies, and Customer shall require its insurer(s) to waive its/their right of subrogation to the extent such action is required to render such waiver of subrogation effective. Customer shall be subrogated to Indemnitees with respect to all rights Indemnitees may have against third parties with respect to matters as to which Customer provides indemnity and/or defense to Indemnitees. No Indemnification is provided to Indemnitees when the liability or loss results from (1) the sole responsibility of such Indemnitee; or, (2) the willful misconduct of such Indemnitee. Upon irrevocable acceptance of this Indemnification obligation, Customer, in its sole discretion, shall select and pay counsel to defend Indemnitees of and from any action that is subject to this Indemnification provision. Indemnitees hereby covenant not to compromise or settle any claim or cause of action for which Customer has provided Indemnification without the consent of Customer.

**XII. Severability:**

If any provision of the "Proposal and Contract" shall be held to be invalid or unenforceable for any reason, the remaining provisions shall continue to be valid and enforceable. If a court finds that any provision of the "Agreement" is invalid or unenforceable, but that by limiting such provision it would become valid and enforceable, then such provision shall be deemed to be written, construed, and enforced as so limited.

**XIII. Fee for Services:**

The Fee for Services does not include any fees for equipment, material, labor necessary for non-warranty repairs, unscheduled inspections, or Customer requested visits to the site.

**XIV. Payment:**

Full payment is due upon execution of this Agreement (Required of new Customer). For any other service(s) or repair(s) provided by Contractor the Customer shall pay the invoice(s) for said service(s) or repair(s) within thirty (30) days of the invoice date. The Contractor shall mail all invoices on the date of invoice. All payments not received within thirty (30) days from the invoice date will be subject to a \$29.00 late penalty and a 1.5% per month carrying charge, as well as any reasonable attorney's fees, and all collection and court costs incurred by Contractor in collection of unpaid debt(s). Contractor may terminate contract at any time for nonpayment for services. Any check returned to Contractor for any reason will be assessed a \$30.00 return check fee.

**XV. Application or Transfer of payment:**

The fees paid for this agreement may be transferred to subsequent property owner(s); however, this Agreement is not transferable. Customer shall advise the subsequent property owner(s) of the State requirement that they sign a replacement agreement authorizing Contractor to perform the herein described Services, and accepting Customer's Responsibilities. This replacement Agreement must be signed and received in Contractor's offices within ten (10) business days of date of transfer of property ownership. Contractor will apply all funds received from Customer first to any past due obligation arising from this Agreement including late fees or penalties, return check fees, and/or charges for services or repairs not paid within thirty (30) days of invoice date. Any remaining monies shall be applied to the funding of the replacement Agreement. The consumption of funds in this manner may cause a reduction in the termination date of effective coverage per this Agreement. See Section IV.

**XVI. Entire Agreement:**

This agreement contains the entire Agreement of the parties, and there are no other conditions in any other agreement, oral or written.

*Brent S. Siderstick*

Block Creek Aerobic Services, L.L.C.  
Contractor  
MC# 0000042 and MC#0000002

*Irene Luna*  
Customer Signature

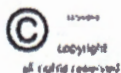
*4-11-19*  
Date

I.L.

Customer's Initials

BS

Contractor's Initials



## OSSF SOIL EVALUATION REPORT INFORMATION

**Date:** 4/10/19  
**Applicant Information:**  
**Name:** Irene Luna  
**Address:** 2021 Indian Hills  
**City, State & Zip Code:** Spring Branch, TX 78070  
**Phone:** 620.655.6291  
**Email:** [jarmandov0625@gmail.com](mailto:jarmandov0625@gmail.com)

**Site Evaluator Information:**  
**Name:** Douglas R. Dowlearn  
**Company:** D.A.D. Services, Inc.  
**Address:** 703 Oak Drive  
**City, State & Zip:** Blanco, TX 78606  
**Phone:** (210)240-2101 **Fax:** (866)260-7687  
**Email:** txseptic@gmail.com

**Property Location:**  
**Lot:** 15    **Block:** 105    **Subdivision:** Western Skies Section, Cypress Lake Gardens  
**Street/Road Address:** 652 Turkey Canyon Drive  
**City:** Spring Branch    **Zip:** 78070  
**Additional Info:** Comal County/.2661 Acres

**Installer Information:**  
**Name:** Douglas Dowlearn  
**Company:** D.A.D. Services, Inc.  
**Address:** 703 Oak Drive  
**City, State & Zip:** Blanco, TX 78606  
**Phone:** 210.240.2101    **Email:** [txseptic@gmail.com](mailto:txseptic@gmail.com)

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Depth	Texture Class	Soil Texture	Structure (For Class III - blocky, platy or massive)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observation
Soil Boring #1 60"	III	0-12" Clay Loam 12"+ Limestone	Blocky	<30% Gravel	12"+ Limestone	None
Soil Boring #2 60"		Same as above				

### DESIGN SPECIFICATIONS

Application Rate (RA): 0.2  
OSSF is designed for: 3 BR (1120 Sq. Ft.)  
240 Gallons per day required  
An aerobic treatment/drip disposal system is to be utilized based on the site evaluation.  
1200 sq. ft. disposal area required  
600 gallon/day aerobic tank required  
Calculations: Absorption Area:  $Q/RA = 240/0.2 = 1200$  Sq. Ft.

### FEATURES OF SITE AREA

Presence of 100-year flood zone: NO  
Existing or proposed water well in nearby area: NO  
Presence of adjacent ponds, streams, water impoundments: NO

Presence of upper water shed: NO  
Organized sewage service available to lot: NO

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability. The site evaluation and OSSF design are subject to approval by the TCEQ or the local authorized agent. The planning materials and the OSSF design should not be considered final until a permit to construct has been issued.

**Site Evaluator:**  
**NAME:** Douglas R. Dowlearn, R.S.

**License No.** OS9902 - Exp. 6/30/2020  
**TDH:** #2432 - Exp. 2/28/2021

**Signature:**



**D.A.D SERVICES, INC.**  
DOUG DOWLEARN  
703 OAK DRIVE, BLANCO, TX 78606  
Designed for: Irene Luna

The installation site is on Lot 15, Block 105 of the Western Skies Section, Cypress Lake Gardens Subdivision in Comal County, TX. The proposed OSSF will treat the wastewater from a 3 Bedroom (1120 sq. ft.) residence. The proposed method of wastewater treatment is aerobic treatment with drip irrigation. This method was chosen because of unsuitable soil conditions.

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**PROPOSED SYSTEM:**

A 4" PVC pipe will discharge from the residence to a pre-treatment tank, which flows into a 600 gpd aerobic treatment plant. The pump is activated by a time controller allowing the distribution 24 times per day with a 2 minute run time with float switches set to pump 240 gallons per day. A high level audible and visual alarm will activate should the pump fail. Distribution from the pump is through a self flushing 100 mesh spin filter then through a 1" SCH-40 manifold to a 720 L.F. drip tubing field, with drip lines set approximately two feet apart with 0.61 emitters set every two feet, as per the attached schematic. A pressure gauge and hose bib installed in the pump tank on the manifold to the field will maintain pressure at 10 psi. A 1 1/4" SCH-40 return line is installed to periodically flush the system by cycling a 1 1/4" ball valve. Solids caught in the spin filter are flushed each cycle back to the trash tank. Vacuum breakers installed at the highest point on each manifold will prevent siphoning of effluent from higher to lower parts of the field. The placement of the drip tubing will be on soil that has been roughed up and 2" of Class II added; the tubing will be covered with 6" of Class II soil.

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**DESIGN SPECIFICATIONS:**

Daily Waste Flow: 240 gpd  
Application rate: 0.2  
Application area required:  $240/.2 = 1200$  ft. sq.  
Application area utilized: 1440 sq. ft.  
Pump tank reserve capacity: 120 gal minimum



*Douglas R. Dowlearn*  
4/10/19

**SYSTEM COMPONENTS:**

SCH 40 PVC sewer line  
1" purple PVC supply line  
600 gpd aerobic treatment plant with manual or timed controls  
Liquid chlorinator  
Pump tank  
Pretreatment tank

**LANDSCAPING:**

The native vegetation in the distribution area should consist of low level shrubs, plains grass, bluestem or bermuda. The entire area of the drip disposal must be covered with a ground cover such as grass seed or sod prior to the final inspection. The drip disposal tubing will be laid on top of roughed up soil covered with 2" of Class II soil; the tubing will then be covered with 6" of Class II soil. In the event the natural cover is disturbed, a suitable ground cover must be installed on all excavated areas.

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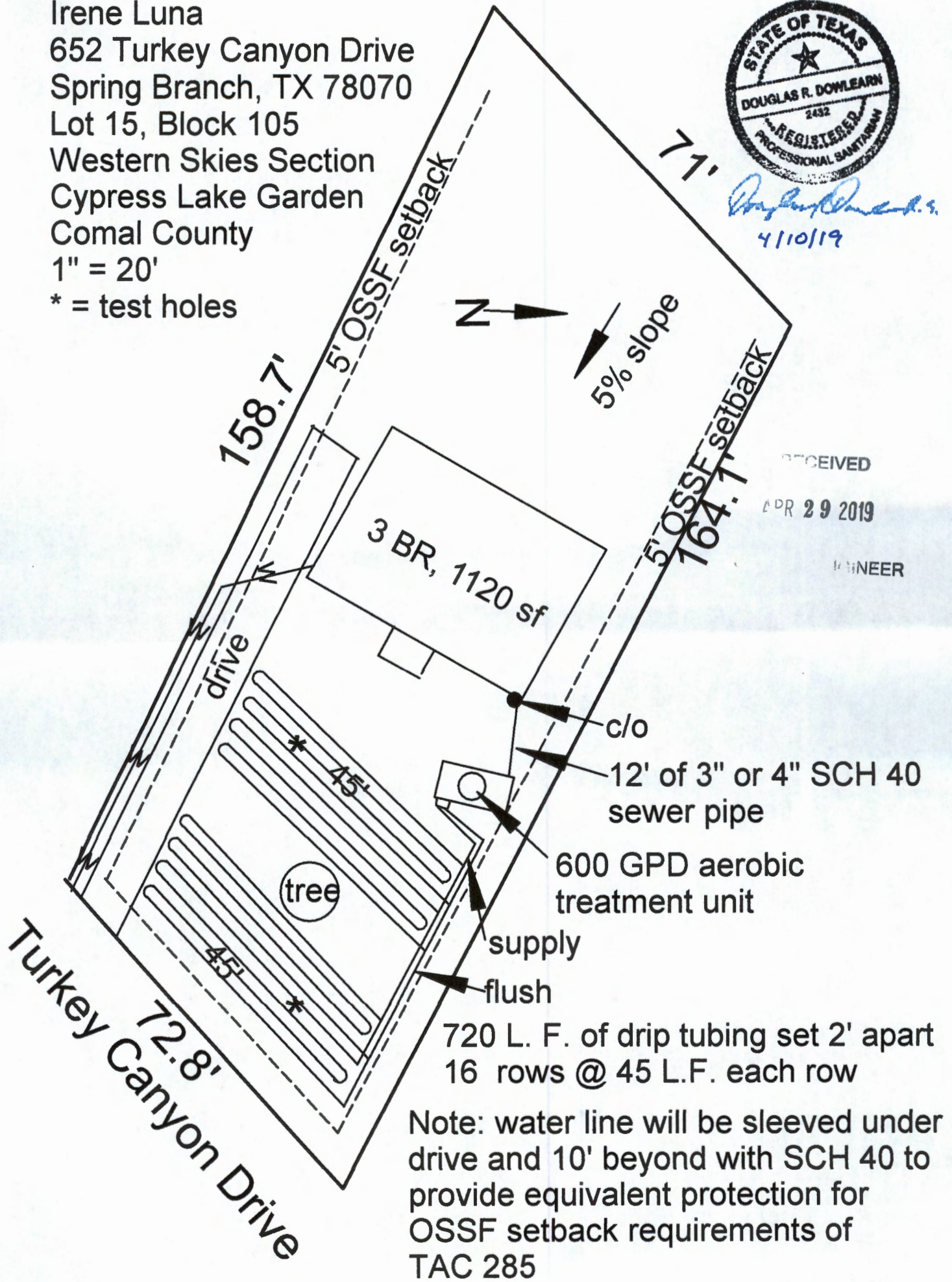


*Douglas R. Dowlearn*  
4/10/19

Irene Luna  
 652 Turkey Canyon Drive  
 Spring Branch, TX 78070  
 Lot 15, Block 105  
 Western Skies Section  
 Cypress Lake Garden  
 Comal County  
 1" = 20'  
 \* = test holes



*Douglas R. Dowlearn, P.E.*  
 4/10/19



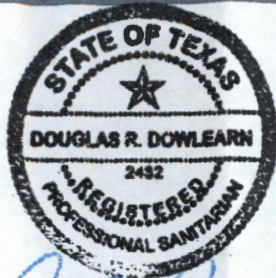
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720 L. F. of drip tubing set 2' apart  
 16 rows @ 45 L.F. each row

Note: water line will be sleeved under drive and 10' beyond with SCH 40 to provide equivalent protection for OSSF setback requirements of TAC 285

# Assembly Details

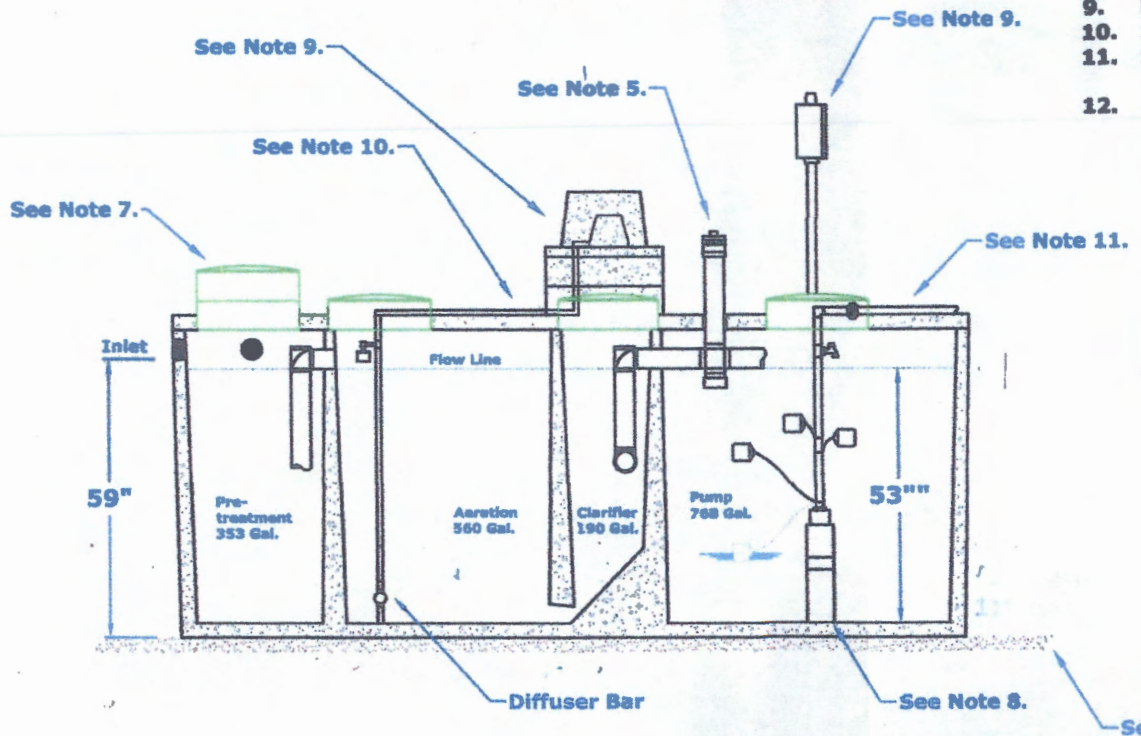
OSSF



*Douglas R. Dowlearn*  
4/24/19

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**14.49 Gallons per inch**



**GENERAL NOTES:**

1. Plant structure material to be precast concrete and steel.
2. Maximum burial depth is 30" from slab top to grade.
3. Weight = 14,900 lbs.
4. Treatment capacity is 600 GPD. Pump compartment set-up for a 360 GPD Flow Rate (4 bedroom, < 4,000 sq/ft living area). Please specify for additional set-up requirements. BOD Loading = 1.62 lbs. per day.
5. Standard tablet chlorinator or Optional Liquid chlorinator. NSF approved chlorinators (tablet & liquid) available.
6. Bio-Robix B-550 Control Center w/ Timer for night spray application. Optional Micro Dose (min/sec) timer available for drip applications. Electrical Requirement to be 115 Volts, 60 Hz, Single Phase, 30 AMP, Grounded Receptacle.
7. 20" Ø access riser w/ lid (Typical 4). Optional extension risers available.
8. 20 GPM 1/2 HP, high head effluent pump.
9. HIBLOW Air Compressor w/ concrete housing.
10. 1/2" Sch. 40 PVC Air Line (Max. 50 Lft from Plant).
11. 1" Sch. 40 PVC pipe to distribution system provided by contractor.
12. 4" min. compacted sand or gravel pad by Contractor

**41"-53" - Reserve - 174 Gal**  
**41" - Alarm**  
**13"-41" - Working Level - 405 Gal**  
**10"-13" - On/Off Tether - 44 Gal**  
**0"-10" - Sump - 145 Gal**

**DIMENSIONS:**  
 Outside Height: 67"  
 Outside Width: 63"  
 Outside Length: 164"

**MINIMUM EXCAVATION DIMENSIONS:**  
 Width: 76"  
 Length: 176"

**NuWater B-550 (600 GPD)**  
**Aerobic Treatment Plant (Assembled)**

Model: B-550-PC-400PT

March, 2012 - Rev 1  
 By: A.S.  
 Scale:  
 \* All Dimensions subject to allowable specification tolerances.  
 Dwg. #: ADV-B550-3



Advantage Wastewater Solutions llc.  
 444 A Old Hwy No 9  
 Comfort, TX 78013  
 830-995-3189  
 fax 830-995-4051

alc

**Recording Requested By:**  
LandSackk Investments LLC  
8111 Mainland Suite 104-171  
San Antonio, Texas 78240



201906036625 09/07/2018 03:18:21 PM 1/2

**When recorded mail to:**  
Irene Luna  
2021 Indian Hills  
Spring Branch Tx 78070

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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.

### Special Warranty Deed

For good and valuable consideration of Ten Dollars (\$10.00), the receipt and sufficiency of which is hereby acknowledged that, **LANDSACKK INVESTMENTS LLC (GRANTOR)**, does hereby convey to **IRENE LUNA (GRANTEE)**, Sole Ownership, the following described real property situated in Comal (COUNTY), Texas (STATE):

**Lot 15, Block 105, Western Skies Section, CYPRESS LAKE GARDENS, according to the map or plat thereof recorded in Volume 3, Page 18, of the Deed and Plat Records of Comal County, Texas.**

**SUBJECT TO:** Easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded instruments that affect the property; existing taxes, covenants and conditions.

And the GRANTOR binds itself and its successors to warrant the title against its acts and none other, subject to the matters above set forth.

**Signature Page to Follow**

DATED: September 7, 2018

BY: 

**Shaun Stevens  
Managing Member  
LandSackk Investments LLC**

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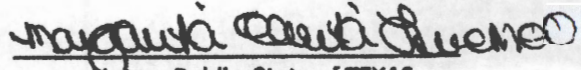
APR 29 2019

STATE OF TEXAS )  
 ) S.S.  
COUNTY OF BEXAR )

COUNTY ENGINEER

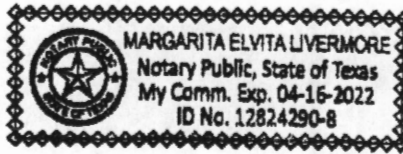
On September 7, 2018, before me, the undersigned Notary Public, personally appeared Shaun Stevens, personally, known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument, and that by his signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

  
Notary Public, State of TEXAS

My Commission Expires:

04-16-2022



Filed and Recorded  
Official Public Records  
Bobbie Koopp, County Clerk  
Comal County, Texas  
09/07/2018 03:18:21 PM  
JESS(C) 2 Page(s)  
201806035625



*Bobbie Koopp*



OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

Items Date Received	Initials

Permit Number

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

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Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer APR 29 2019

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

Portion of Proposed OSSF Located in the United States Army Corps of Engineers (USACE) Flowage Easement

USACE Consent for proposed OSSF

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

Trene Luna  
Signature of Applicant

2182  
Date

4-11-19  
Date

<input type="checkbox"/> COMPLETE APPLICATION
Check No. _____ Receipt No. _____

<input type="checkbox"/> INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)

Block Creek Concrete Products, LLC  
444 A Old Hwy No 9  
Comfort, TX 78013

Phone: (830) 995-3189  
Fax: (830) 995-4051

To: Home Owner  
652 Turkey Canyon  
Canyon Lake, TX 78133

Printed: 10/13/2020  
Site: 652 Turkey Canyon  
Canyon Lake, TX 78133

Permit #: **109068** Customer ID: 6861  
Agency: Comal County Contract Dates: 10/17/2019 - 10/17/2021  
County: Comal Sub: Scheduled Date: 10/17/2020 Inspection 3 of 6  
Mfg / Brand: Advantage Wastewater LLC - Nu Water Installed: 7/17/2019  
Treatment Type: Aerobic Without Chlorin Warranty End: 7/17/2021  
Disposal: Drip Emitters GPS Coordinates - Latitude: 29.923417 Longitude: -98.388855

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"  
Entered By: Cameron T Ivey

Visit Date: 10/13/2020 Time In: 250 Out: 305

Method: Grab

Technician: Cameron T Ivey

Maint. Provider: Rudy Carson

Aerators: Operational  
Filters: Operational  
Irrigation Pumps: Operational  
Disinfection Device: Operational

Sludge Levels  
For Tank 1: 28  
For Tank 2: 12  
For Tank 3: 0"

CFM: 2.0

Tank Lid / Riser: Secured

Electric Circuits: Operational  
Distribution System: Operational  
Sprayfield Veg: Operational

Color: Good  
Odor: Good

Alarm: Operational

PSI Pressure: 2.8

Comments

- Technician Secured the Tank Lid and/or Riser prior to leaving location. Pretreatment is trace. - Cleaned compressor filter.  
Cleaned drip filter. - Secured system in the on position with a lock bolt.

Service Completed

Insp ID #: 100126

Provider: *Rudy Carson*

Technician: *Cameron T Ivey*

License #: MP0002036

License #: MT0001917

Expires: 7/31/2023

*Rudy Carson*  
Rudy Carson

C.T

Block Creek Concrete Products, LLC  
444 A Old Hwy No 9  
Comfort, TX 78013

Phone: (830) 995-3189  
Fax: (830) 995-4051

To: Home Owner  
652 Turkey Canyon  
Canyon Lake, TX 78133

Printed: 2/1/2021  
Site: 652 Turkey Canyon  
Canyon Lake, TX 78133

Permit #: **109068**

Agency: Comal County

County: Comal

Mfg / Brand: Advantage Wastewater LLC - Nu Water

Treatment Type: Aerobic Without Chlorin

Disposal: Drip Emitters

Customer ID: 6861

Contract Dates: 10/17/2019 - 10/17/2021

Scheduled Date: 2/17/2021

Inspection 4 of 6

Installed: 7/17/2019

Warranty End: 7/17/2021

GPS Coordinates - Latitude: 29.923417 Longitude: -98.388855

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

Visit Date: 2/1/2021

Time In: 120

Out: 135

Entered By: Alex Seidensticker

Method: Grab

Technician: Alex Seidensticker

Maint. Provider: Rudy Carson

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

**Sludge Levels**

For Tank 1: 30

For Tank 2: 10

For Tank 3: .0"

CFM: 3.2

Tank Lid / Riser: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Color: Good

Odor: Good

Alarm: Operational

PSI Pressure: 3.4

**Comments**

Service Completed

- Technician Secured the Tank Lid and/or Riser prior to leaving location. - Scum in pretreatment is .0" drip field is non operational no drip filter and they have it going through a water hose system is not operating as designed

Insp ID #:104504

Provider: **Rudy Carson**

Technician: **Alex Seidensticker**

License Info: MP0002036 Expires:

License Info: MP0001961 Expires: 9/30/2021