

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

Issued This Date:

03/10/2020

Permit Number:

110204

Location Description:

131 OLIVE HILL

CANYON LAKE, TX 78133

Subdivision:

Woodlands

Unit:

3

Lot:

14

Block:

Acreage:

Type of System:

Septic Tank

Leaching Chambers

Issued to:

Terri K. Eubanks

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

ENVIRONMENTAL HEALTH COORDINATOR

OS0007722

ENVIRONMENTAL HEALTH INSPECTOR

	1st Inspection Date:		2nd Inspection Da	_	3	rd Inspection	Date: 03-1	0-2020	
	Inspector Name:	te 7	Inspector Name:_			Inspector	Name: B. C	lvera	
	Permit#: 110 20	4		Address: _	Woodland	de li		ive Hill	1 Oc
lo.	Description SITE AND SOIL CONDITIONS & SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials	Anwser	Citations 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>-</i>	Notes #		1st Insp.	2nd Insp.	3rd insp.
	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards		285.91(10) 285.30(b)(4) 285.31(d)						
-	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)		285.32(a)(1)			# <b>\$</b> \$\$\$ 10			
	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	/	285.32(a)(3)						
	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)(C)(ii) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II)						
6	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)						

Towkset, Leveled
Transhes Leveled
Acady Fox Cover

03-10-2020 BMO

Covered

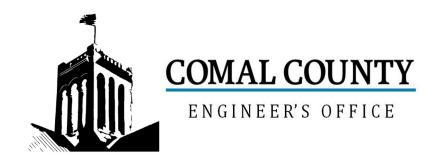
No.	Description	Anwser	Citations	Notes	388	1st In	sp.	2nd Insp.	3rd Insp.
_	SEPTIC TANK Tank(s) Clearly		285.32(b)(1)(E)						
	Marked SEPTIC TANK If	İ	285.91(2)				İ		
	SingleTank, 2		285.32(b)(1)(F)		1				
	Compartments Provided with		285.32(b)(1)(E)(iii)				ł		
	Baffle SEPTIC TANK Inlet Flowline		285.32(b)(1)(E)(ii)(II)			,	,		
1 1	Greater than	ł	285.32(b)(1)(E)(ii)(I)		}	1/21	20		
	3" and " T " Provided on Inlet and		285.32(b)(1)(E)(i)			1/2/	,00		
	Outlet		285.32(b)(1)(D)		1	1	1 1		İ
	SEPTIC TANK Septic Tank(s) Meet		285.32(b)(1)(C)(ii)						
	Minimum Requirements		285.32(b)(1)(C)(i)		- 1				i
		/	285.32(b)(1)(B)				1		
			285.32(b)(1)(A)						ì
			285.32(b)(1)(E)(iv)						
			203.32(0)(1)(1)(1)		-				
8	ALL TANKS Installed on 4" Sand						-		
	Cushion/ Proper Backfill Used	//	285.32(b)(1)(F)						
	Cusinon, Proper backim oseu	/	285.32(b)(1)(G)						
Ì			285.34(b)			1			
9							$\vdash$		
	SEPTIC TANK Inspection / Clean								
	Out Port & Risers Provided on	/							
	Tanks Buried Greater than 12"		285.38(d)		ļ				
	Sealed and Capped	] [			1	f	İ		
10									
ì	SEPTIC TANK Secondary restraint					1			
	system provided				Ì	- 1	ļ		
ĺ	SEPTIC TANK Riser permanently					- 1			
	fastened to lid or cast into tank				1	i	ļ		}
	SEPTIC TANK Riser cap protected		285.38(d)			- 1			
	against unauthorized intrusions		285.38(e)		- 1	- 1			ŀ
11						-			
	SEPTIC TANK Tank Volume			1000 gal, Dual tan	1-	- 1	l		
12	Installed			1000 gar, Dual 1 an	-/1	i			
	PUMP TANK Volume Installed								
13									_
	AEROBIC TREATMENT UNIT Size						3445		
	Installed								
14							38.80		
	AEROBIC TREATMENT UNIT				A	a 1479			
	Manufacturer					, in		5.25	
	AEROBIC TREATMENT UNIT								
	Model								
15	Number								
	DISPOSAL SYSTEM Absorptive		285.55(d)(4)						
			285.33(a)(1)						
			285.33(a)(2) 285.33(a)(3)						
16									
	DISPOSAL SYSTEM Leaching		285.33(a)(1)	15.4		,	,		
	Chamber	/	285.33(a)(3) 285.33(a)(4)	1)5'		1/2	eileo		
İ			285.33(a)(2)	1 2)6'7"		"	.,		
17			1						
	DISPOSAL SYSTEM Evapo-		285.33(a)(4)						
	transpirative		285.33(a)(1)						
			285.33(a)(2)						
18									

No.	Description	Anwser	Citations	Notes		1st insp.	2nd Insp.	3rd Insp.
	DISPOSAL SYSTEM Drip Irrigation	240.	285.33(c)(3)(A)-(F)					
19								
	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				<u>,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,</u>	
	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(3) 285.33(a)(1) 285.33(a)(2)					
	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				i.W.a	
22	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)					
	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC							
26	DRAINFIELD Area Installed							
	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)					
27	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)					
	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection							
20	Port & Closed End Plates in Place (per manufacturers spec.)		285.33(c)(2)					
30	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches	. : : : : :	285.33(d)(1)(C)(i)	, in maging	1	1. 1		

No.	Description	Anwser	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	FFLUENT DISPOSAL SYSTEM Utilized						
	Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM FORDING SIOPES C 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 cinear 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)				
	AEROBIC TREATMENT UNIT IS Aerobic Unit Installed According to Approved Guidelines.		285.32(c)(1)				
	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						
34	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
33	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						
36	High Water Alarm Installed on Separate Circuit From Pump 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						
37							
39	PUMP TANK Electrical Connections in Approved Junctior Boxes / Wiring Buried	1					

<b>T</b> •			1
H1	n	a	ı

No.	Description	Anwser	Citations	Notes		1st Insp.	2nd Insp.	3rd Insp.
	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?		285.33(d)(2)(G)(iii)(II)285.3 3(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)				97. J	
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							



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

Permit Number: 110204

Issued This Date: 01/08/2020

This permit is hereby given to: Terri K. Eubanks

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

131 OLIVE HILL

CANYON LAKE, TX 78133

Subdivision: Woodlands

Unit: 3

Lot: 14

Block:

Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Septic Tank

**Leaching Chambers** 

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

Call (830) 608-2090 to schedule inspections.

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

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

Date Januar	y 1, 2020		Permit #_	110204				
Owner Name	TERRI K. EUBANKS	Agent Name	GREG W	. JOHNSON, P.E.				
Mailing Address	c/o 160 GALLAGHER DRIVE	Agent Address	170 H	170 HOLLOW OAK				
City, State, Zip	CANYON LAKE TEXAS 78133	City, State, Zip	NEW BRA	NEW BRAUNFELS, TX 78132				
Phone#	210-557-7134	Phone #	(83	0) 905-2778				
Email	dnbcustomhomes@aol.com	Email	gregjohns	sonpe@yahoo.com				
All correspondence sh	nould be sent to:  Owner Agent	t 🔲 Both	Method: Mail	⊠ Email				
Subdivision Name	WOODLANDS Unit/	Phase/Section 3	Lot 14	Block				
Acreage/Legal								
Street Name/Address	131 OLIVE HILL	City C	ANYON LAKE	Zip 78133				
ype of Developmen	t:			RECEIVED				
Single Family Res	idential			14 14 14 14 2020				
Type of Constru	uction (House, Mobile, RV, Etc.)	HOUSE		JAN <b>0 8</b> 2020				
Number of Bed	rooms 3		(	COUNTY ENGINEER				
Indicate Sq Ft o	of Living Area							
Restaurants, Lo	es, Churches, Schools, Parks, Etc Incompes, Theaters - Indicate Number of ospital, Nursing Home - Indicate Number of Spaces	Seats	ccupants					
	Instruction: \$ 350,000 (Stru							
	proposed OSSF located in the United S							
Yes No (if ye	es, owner must provide approval from USACE f	for proposed USSF impro	vements within the US	ACE flowage easement)				
	Public  Private Well vices Being Utilized Within the Residen	nce? X Yes N	0					
Authorization is hereby g site/soil evaluation and in I also understand that a p by the Comal County Floo	I certify that: In and all additional information submitted does given to the permitting authority and designated an appection of private sewage facilities. It is authorization to construct will not be issued Damage Prevention Order. It is a certify that: I certify that	agents to enter upon the a	above described proper Administrator has perfor	ty for the purpose of med the reviews required				
TRE	u la la	113/2	020					

Page I of 2 Revised April 2019

Date

Signature of Owner

Revised July 2018

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

### <u>APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE</u>

Planning Materials & S	ite Evaluation as Required Completed By GREG W. JOHNSON, P.E.
System Description	PROPRIETARY; SEPTIC TANK AND LEACHING CHAMBERS
Size of Septic System F	Required Based on Planning Materials & Soil Evaluation
Tank Size(s) (Gallons)	1000 GAL. DUAL COMP. SEPTIC TANK Absorption/Application Area (Sq Ft)
	er TCEQ Table III)an 5000 gallons per day are required to obtain a permit through TCEQ)
Is the property located	over the Edwards Recharge Zone?  Yes  No RECEIVED
(If yes, the planning mater	rials must be completed by a Registered Sanitarian (R.S.) or Professional Engineer (P.E.))  JAN 0 8 2020
is there an existing TCI	EQ approved WPAP for the property?  Yes  No
(if yes, the R. S. or P. E. s	hall certify that the OSSF design complies with all provisions of the existing WPAP.) COUNTY ENGINEER
(If yes, the R.S. or P. E. s	/PAP, does the proposed development activity require a TCEQ approved WPAP? Yes No hall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct will osed OSSF until the proposed WPAP has been approved by the appropriate regional office.)
Is there an existing TCE	ever the Edwards Contributing Zone? Yes No  EQ approval CZP for the property? Yes No  all certify that the OSSF design complies with all provisions of the existing CZP)
(if yes, the P.E. or R.S. sh	ZP, does the proposed development activity require a TCEQ approved CZP?  Yes No all certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to construct will) posed OSSF until the CZP has been approved by the appropriate regional office.)
Is this property with	ity:  GREG W. JOHNSON  FIRM #2585
	I certify that: above is true and correct to the best of my knowledge. he online posting/public release of my e-mail address associated with this permit application, as applicable  Old Date  Page 2 of 2

195 David Jonas Dr., New Braunfels, Texas 78132-3760 (830) 608-2090 Fax (830) 608-2078

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

Date Soil Survey Performed:	ary 03, 2020	
Site Location:	WOODLANDS, UNIT 3, LOT 14	_
Proposed Excavation Depth:18"	to 30"	
	s must be performed on the site, at opposite ends of the proposed disposal area.  lug 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 N						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0 8"	Ш	CLAY LOAM				BROWN
2						RECEIVED
3						JAN 08 2020
<b>54"</b>	ш	SILTY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 54"	COUNTY ENGIN

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

Date

### OSSF SOIL EVALUATION REPORT INFORMATION

Date: January 06, 2020
Applicant Information:

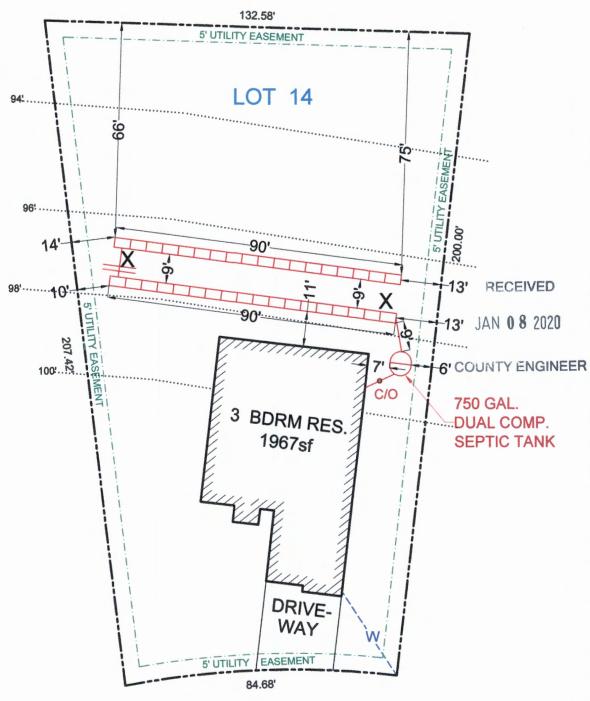
	Site Evaluator Information:	
Name: TERRI K. EUBANKS	Name: Greg W. Johnson, P.E., R.S.,	S.E. 11561
Address: 160 GALLAGHER DRIVE	Address: 170 Hollow Oak	
City: CANYON LAKE State: TEXAS	City: New Braunfels State:	Texas
Zip Code:	Zip Code: 78132 Phone & Fax: (83)	0)905-2778
Property Location:  Lot 14 Unit 3 Blk Subd. WOODLANDS	Installer Information: Name:	
Street Address: 131 OLIVE HILL	company:	
City: CANYON LAKE Zip Code: 78133	Address:	
Additional Info.:	City:	State:
	Zip Code:Phone	
Topography: Slope within proposed disposal area:Presence of 100 yr. Flood Zone: Existing or proposed water well in nearby area. Presence of adjacent ponds, streams, water impoundments Presence of upper water shed Organized sewage service available to lot	YES NO X YES NO X YES NO X YES NO X YES NO X YES NO X	RECEIVED JAN 0 8 2020
Design Calculations for Leaching Chambers:		COUNTY ENGINEE
Commercial		COUNTY LIVE
Q= GPD		
Residential Water conserving fixtures to be utilized? Y Number of Bedrooms the septic system is sized for:  Q gal/day = (Bedrooms +1) * 75 GPD  Q = (3+1) * 75 - (20 %) =240  A = Q/Ra =240/0.20 =1200sq.	3 Total sq. ft. living area 190	67
Tank Size = $(\sim 3 * Q) =$ Gal. Dual Comp.		
Excavation Length & Width L = 0.75A/(W+2) (<3' Wide) =900 /5'	= <u>180'</u> of <u>3' WIDE</u>	36 - 5' PANELS
or L=0.75(A-2W)/(W+2) (>3'Wide)=/	of	
I HAVE PERFORMED A THOROUGH INVESTIGATION AND SITE EVALUATOR IN ACCORDANCE WITH CHARGE FEATURES), TEXAS CO (EFFECTIVE DECEMBER 29, 2016).	APTER 285, SUBCHAPTER D, §285.3	30, & §285.40
GREG W. JOHNSON, P.E. 67587 - F#2585	DATE GREG W. JOHNSO	**: Z: &

FIRM #2585

INSTALL 900sf OF FIELD USING 36 5'-0" LEACHING CHAMBER PANELS WITH BULKHEAD. THERE SHALL BE NO PARKING, DRIVING OR STORAGE ON THE SEPTIC FIELD AT ANY TIME FOR ANY REASON.

\*USE TWO WAY CLEAN OUT \*\*USE SCH-40 OR SDR-26 TO TANK

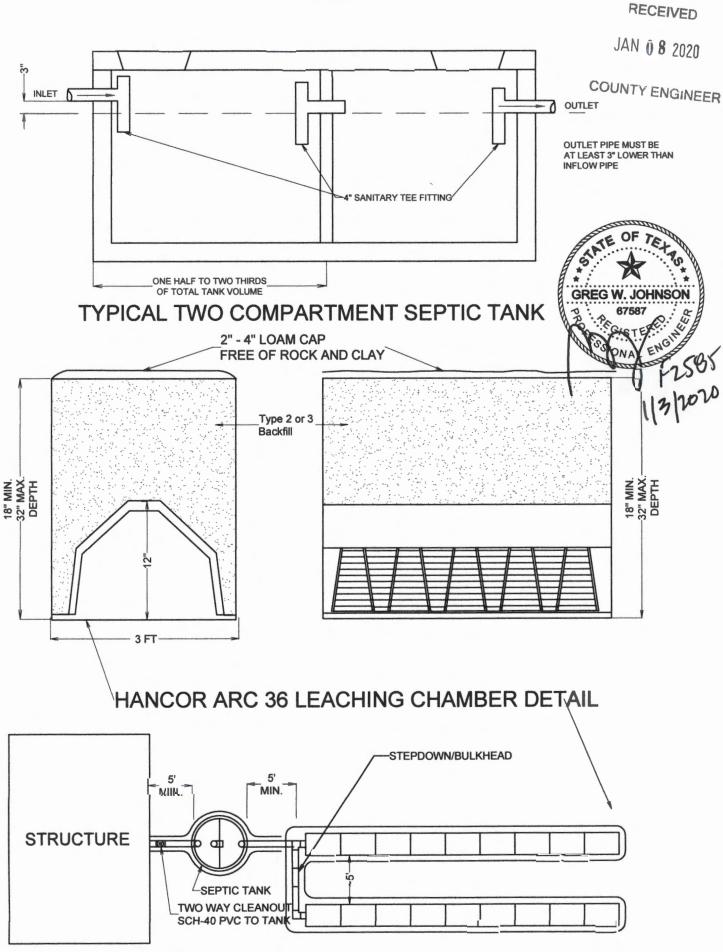
X= TEST HOLE







TERRI K. EUBANKS				EJS III
STREET ADDRESS: 131 OLIVE HILL				
LEGAL DESC: WOODLANDS	UNIT/SE	CTION/PHASE:	BLOCK:	LOT: 14
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=30'	DATE: 1/6/20	20	REVISED:



HANCOR ARC 36 LEACHING CHAMBER DETAIL



RECEIVED

JAN 0 8 2020

COUNTY ENGINEER

#### General Warranty Deed

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.

Date: Executed June 26, 2018, effective June 29, 2018 as to MALCOM A. POLLARD
Executed June 29, 2018 by JUNB M. POLLARD

Grantor: MALCOM A. POLLARD and JUNE M. POLLARD

Grantor's Mailing Address: 309 Watts Lane, Canyon Lake, TX 78133

Grantee: TERRI K. BUBANKS

Grantee's Mailing Address: 121 Watts Lane, Canyon Lake, TX 78133

Consideration: Cash and other valuable consideration.

Property (including any improvements):

Lot 14, WOODLANDS SUBDIVISION, UNIT THREE, situated in Comal County, Texas, according to map or plat thereof recorded in Volume 6, Page(s) 39, 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.

JUNE M. POLLARD

ACKNOWLEDGMENT

STATE OF TEXAS

COUNTY OF NUCCES

This instrument was acknowledged before me on the THiday of June, 2018, by MALCOM A. POLLARD.

Notate Public in and for the State of Texas

ANNETTE HAMLYN Notary Public, State of Texas Comm. Expires 11-18-2020 Notary ID 2962011

ACKNOWLEDGMENT

STATE OF TEXAS

COUNTY OF COMAL

RECEIVED

JAN 0 8 2020

This instrument was acknowledged before me on the day of June, 2018, by JUNE M. POLLARD.

COUNTY ENGINEER:

MELISSA WILLIAMS **Notary Public** STATE OF TEXAS Comm. Exp. 09/10/2019 ID# 12624958-5

Notary Public in and for the State of Texas

AFTER RECORDING RETURN TO:

PREPARED IN THE LAW OFFICES OF:

TERRIK, EUBANKS 121 Watts Lane Canyon Lake, TX 78133 Filed and Recorded Official Public Records Bobbie Koepp, County Clerk Comal County, Texas 07/02/2018 10:57:29 AM LAURA 2 Pages(s) 201806025689

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





## OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

	Date Received	Initials	Permit Number
Instructions:	4	451/A7 This O	CCF Davidson and Application
Place a check mark next to all items that apply. For i Checklist <u>must</u> accompany the completed application		ce "N/A". This O	SSF Development Application
OSSF Permit			
Completed Application for Permit for Authorizat	ion to Construct an On-Site	Sewage Facility	y and License to Operate
Site/Soil Evaluation Completed by a Certified S	ite Evaluator or a Professio	nal Engineer	
Planning Materials of the OSSF as Required by of a scaled design and all system specifications	the TCEQ Rules for OSSF	Chapter 285. F	Planning Materials shall consist
Required Permit Fee - See Attached Fee Sched	dule		JAN 08 2020
Copy of Recorded Deed			COUNTY ENGINEER
Surface Application/Aerobic Treatment System			
Recorded Certification of OSSF Requiring	g Maintenance/Affidavit to t	he Public	
Signed Maintenance Contract with Effect	ive Date as Issuance of Lic	ense to Operate	
I affirm that I have provided all information requirementally constitutes a completed OSSF Development App		ment Applicatio	on and that this application
Signature of Applicant		1/07/2	ovo ate
COMPLETE APPLICATION  Check No. Receipt No.	(Mi		TE APPLICATION ed, Application Refeused)

Revised: September 2019