		OSSF Ins	spection Sheet				
Installer Name: VIRGINI	A CAS	TRO	OSSF Installer #:	OS002843	17		
1st Inspection Date: $2/1$		0 2nd Inspection Da	nte: 03-04-2020	3rd Inspection	n Date:05-20)-2020	
Inspector Name: CONNOR	·	Inspector Name:			Name: B. Ol		
Permit#: 110267			Address: 2046 Ho	_ ORNSBY			
Description	Anwser	Citations	Notes		1st Insp.	2nd Insp.	3rd Insp.
SITE AND SOIL CONDITIONS & SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials	х	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)			х		
SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	x	285.91(10) 285.30(b)(4) 285.31(d)			X		
SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	¹ X	<u>285.32(a)(1)</u>			x		
SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	X	<u>285.32(a)(3)</u>			Х		
SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)	Х	285.32(a)(5)			х		
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)(F) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C)(ii) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii) 285.32(b)(1)(E)(ii)(I)					
PRETREATMENT Grease Interceptors if required for commercial 'ANK SET. LEVEL.		285.34(d) EAKS. OPERATI	IONAL. COVER		EVISION		

03-04-2020 BMO: Operational, Ready for Cover

05-20-2020 BMO: No Structure 5/5/21 JC no house

11/8/23 Covered but not seeded, fail

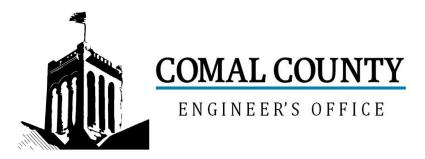
4/25/24 JC drip field is fully vegetated

No.	Description	Anwser	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	SEPTIC TANK Tank(s) Clearly		285.32(b)(1)(E)		•	•	
	Marked SEPTIC TANK If		285.91(2)				
	SingleTank, 2		285.32(b)(1)(F)				
	Compartments Provided with		285.32(b)(1)(E)(iii)				
	Baffle SEPTIC TANK Inlet Flowline		285.32(b)(1)(E)(ii)(II)				
	Greater than		285.32(b)(1)(E)(ii)(I)				
	3" and " T " Provided on Inlet and		285.32(b)(1)(E)(i)				
	Outlet		285.32(b)(1)(D)				
	SEPTIC TANK Septic Tank(s) Meet		285.32(b)(1)(C)(ii)				
	Minimum Requirements		285.32(b)(1)(C)(i)				
			285.32(b)(1)(B)				
			285.32(b)(1)(A)				
			285.32(b)(1)(E)(iv)				
8							
	ALL TANKS Installed on 4" Sand						
	Cushion/ Proper Backfill Used	Х	285.32(b)(1)(F)		Х		
			285.32(b)(1)(G)		А		
9			285.34(b)				
	SEPTIC TANK Inspection / Clean						
	Out Port & Risers Provided on						
	Tanks Buried Greater than 12"		285.38(d)				
	Sealed and Capped		(*)				
10							
	SEPTIC TANK Secondary restraint						
	system provided						
	SEPTIC TANK Riser permanently						
	fastened to lid or cast into tank						
	SEPTIC TANK Riser cap protected		285.38(d)				
	against unauthorized intrusions		285.38(e)				
11			(-)				
	SEPTIC TANK Tank Volume						
12	Installed						
12	PUMP TANK Volume Installed						
13							
	AEROBIC TREATMENT UNIT Size	37					
	Installed	Х			Х		
14							
14	AEROBIC TREATMENT UNIT	Х		TEXAS AIRE	Х		
	Manufacturer	Λ		TRAC AINE	21		
	AEROBIC TREATMENT UNIT	Х			37		
	Model	Λ			X		
15	Number						
	DISPOSAL SYSTEM Absorptive		205.35(d)(4)				
			285.33(a)(1)				
			285.33(a)(2) 285.33(a)(3)				
16							
	DISPOSAL SYSTEM Leaching		285.33(a)(1) 285.33(a)(3)				
	Chamber		285.33(a)(3) 285.33(a)(4)				
			285.33(a)(4) 285.33(a)(2)				
17			203.35(d)(2) 203.35(d)(3)				
	DISPOSAL SYSTEM Evapo-		285.33(a)(3)				
	transpirative		285.33(a)(4) 285.33(a)(1)				
			285.33(a)(2)				
18			/-//-/				

No.	Description	Anwser	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	DISPOSAL SYSTEM Drip Irrigation		285.33(c)(3)(A)-(F)			20	
						03-04-20	
19	DISPOSAL SYSTEM Soil						
	Substitution		285.33(d)(4)				
20	DISPOSAL SYSTEM Pumped		205 22/2/(2)				
	Effluent		285.33(a)(3) 285.33(a)(1)				
21			285.33(a)(2)				
	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3)				
			285.33(a)(2)				
			285.33(a)(4)				
22			285.33(a)(1)				
	DISPOSAL SYSTEM Mound		285.33(a)(3)				
			285.33(a)(1)				
			285.33(a)(2) 285.33(a)(4)				
23			(")				
	DISPOSAL SYSTEM Other		285.33(d)(6)				
	(describe) (Approved Design)		285.33(c)(4)				
24							
	DRAINFIELD Absorptive Drainline 3" PVC						
25	or 4" PVC						
	DRAINFIELD Area Installed						
26	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						
28							
	DRAINFIELD Pipe and Gravel -		285.33(b)(1)(E)				
29	Geotextile Fabric in Place						
	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End						
	Plates w/Splash Plate, Inspection						
	Port & Closed End Plates in Place		285.33(c)(2)				
	(per manufacturers spec.)		203.33(0)(2)				
30							
	LOW PRESSURE DISPOSAL						
	SYSTEM Adequate Trench Length						
	& Width, and Adequate		285.33(d)(1)(C)(i)				
	Separation Distance between Trenches						
31	TT CHUIC3						

No. Description	Anwser	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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 Hole (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)			03-04-20	
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						
AEROBIC TREATMENT UNIT Chlorinator Properly Installed with 35 Chlorine Tablets in Place.	1					
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 Wher Required PUMP TANK Audible and Visual High Water Alarm Installed on 36 Separate Circuit From Pump 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 PUMP TANK Secondary restraint						
38 system provided PUMP TANK Electrical						
Connections in Approved Junction Boxes / Wiring Buried						

No.	Description	Anwser	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)285.3 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)(ii) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iii)(I)			03:04:20	
40	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						



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

Permit Number:	110267
Issued This Date:	02/04/2020
This permit is hereby given to:	Fernando Rojo & Angilita Rojo

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

2046 HORNSBY SPRING BRANCH, TX 78070

Subdivision:Cypress CoveUnit:2Lot:355Block:Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic Drip Irrig

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 County requirements.

Call (830) 608-2090 to schedule inspections.



OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

Date Received Initials

Permit Number

Instructions:

RECEIVED

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

COUNTY ENCLIEER

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 - See Attached Fee Schedule

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

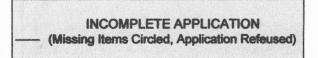
I affirm that I have provided all information required for my OSSF Development Application and that this application constitutes a completed OSSF Development Application.

Fernundo BJO Anglita Signature of Applicant

CON	IPLETE APPLICATION	
Check No.	Receipt No	

01-16.2020

Date



Revised: September 2019

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

REVISED 2:50 pm, Mar 03, 2020

Date 3/3/2020			Permit # 110267	
Owner Name	Fernando Rojo & Angelita Rojo	Agent Name	Virginia Castro	
Mailing Address	1286 Grand Oaks Drive	Agent Address	2970 Rolling Hills Rd.	
City, State, Zip	Spring Branch TX, 78070	City, State, Zip	Blanco TX, 78606	
'Phone #	210.685.6628	Phone #	210.275.8523	
Email	Angelita_rojo@yahoo.com	Email	vleeedwards@yahoo.com	
All corres	pondence should be sent to: Owner Age	ent 🖂 Both	Method: 🗌 Mail	🖂 Email
Subdivision Nam	ne Cypress Cove section 2	Unit [] Lot_355	Block []
Acreage/Legal	[.1865 Acres]			
Street Name/Ad	dress 2046 Hornsby Drive	City Sprin	g Branch Z	Zip 78070
Type of Develop	oment:			
Single Fam	nily Residential			
Type of Con	struction (House, Mobile, RV, Etc.) House			
Number of E	Bedrooms 3			
Indicate Sq I	Ft of Living Area1,216 s.f.			
Non-Single	e Family Residential			
(Planning mate	rials must show adequate land area for doubling the re	quired land needed	for treatment units and dispo	osal area)
Type of Faci				
Offices, Fact	tories, Churches, Schools, Parks, Etc Indicate N	- Jumber Of Occup	ants	
	, Lounges, Theaters - Indicate Number of Seats			
	, Hospital, Nursing Home - Indicate Number of Be	ds		
	r/RV Parks - Indicate Number of Spaces			
Miscellaneou		-		
Estimated Con				
Estimated Cos	t of Construction: \$ [150000 (Structure)	re Only)		
Is any portion o	of the proposed OSSF located in the United State	s Army Corps of I	Engineers (USACE) flowag	ge easement?
🗌 Yes 🖂	No (If yes, owner must provide approval from USACE for p	proposed OSSF impro	ovements within the USACE flows	age easement)
Source of Water	Public Private Well			
	g Devices Being Utilized Within the Residence?	🛛 Yes 🗌 No		
	lication, I certify that: oplication and all additional information submitted does	not contain any fal	se information and does not c	conceal any material
- Authorization is he	ereby given to the permitting authority and designated	agents to enter upo	on the above described proper	rty for the purpose of
	n and inspection of private sewage facilities a permit of authorization to construct will not be issued	until the Floodolain	Administrator has performed	the reviews required
by the Comal Cou	unty Flood Damage Prevention Order.			
- I aπirmatively con	sent to the online posting/public release of my e-mail a	ddress associated	with this permit application, as	s applicable.
Ger	-nondo 12010 Inge	dita N	40 03/03/202	20
Signature of Ov	wner	Date		Page 1 of 2

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

Revised April 2019

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



Planning Materials & Site Evaluation as Required Completed By Virginia Castro
System Description Aerobic treatment/ with drip tubing
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 X 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? X 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 philine posting/public release of my e-mail address associated with this permit application, as applicable.
ND 364070
Signature of Designer Date Page 2 of 2
Fage 2 01 2

Revised July 2018

202006002094 01/16/2020 03:49:07 PM 1/1

THE COUNTY OF COMAL STATE OF TEXAS

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

AFFIDAVIT TO THE PUBLIC

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

I

COUNTY ENGINEER

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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 TCEQ 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 TCEQ, under the authority of the TWC and the Texas Health and Safety Code, requires owners to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the TCEQ requires a deed recording. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This deed certification is not a representation or warranty by the TCEQ of the suitability of this OSSF, nor does it constitute any guarantee by the TCEQ that the appropriate OSSF was installed.

П

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):

Lot355Block_Subdivision_Cypress Cove	Unit/Phase Section 2
If not in Subdivision:Acres	Survey
The property is owned by (insert owner's full name): Fernando	Rojo And Angelita Rojo

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.

Fernundo RO

Owner Name

Owner Signature

This instrument was acknowledged before me on: 10 Day of Day UDM, 2020.

Notary's Printed Name Notary Public, State of Texas

Commission Expires: 09 -24 -202



Filed and Recorded Official Public Records Bobbie Koepp, County Clerk Comal County, Texas 01/16/2020 03:49:07 PM LAURA 1 Page(s) 202006002094 Cobbie Koepp

Affix Notary Stamp Above

RECEIVED

JAN 17 2020.

WASTEWATER TREATMENT FACILITYY MONITORING AGREEMENT

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 CustomerAngeli	QUNTREATON
Customer Fernando : Angeli	TO PLOYUNEER
Sile Address 10 TO FULLISPAIV	
City Spring Brand Zip T& 78070 Mailing Address 286 Grand Oaks Dr	
Mailing Address 1286 Grand Oaks Dr	we al county
County SpringBranch Map #	210.685.6628
Phone 210 6850 6628	
Email Angelita rojoe yahoo.co	om

perate

I. General: This Work for Hire Agreement (hereinafter referred to as "Agreement") is entered into by and between Ferral do; AWelite Reio (hereinafter referred to as "Customer") and Block Creek Aerobic Services, LLC. By this agreement, Block Creek Aerobic Services, I.I.C 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:

nseto Operate This Agreement commences on Issue date of licencet and ends on 2 yrs from 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 manu facturer, 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 with in 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.

V. Distinfection. (C) Customer's Initials at the manue Contractor's Initials

BS

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:

1

Electronic Monitoring is not included in this Agreement.

VII. Performance of Agreement:

ormance of Agreement: Commencement of performance by Contractor under this Agreement is contingent on the following conditionstry ENGINEER

I. 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 Contactor 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 Contactor, 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 Customers 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.

FRAR C copyright Contractor's Initials Customer's Initials arights

BS

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JAN 17 2020

THIS INDEMNITIFCATION APPLIES EVEN IF SUCH LIABILITIES ARE CAUSED BY THE CONCURRENT OF A 2020

Customer hereby waives its right of recourse as to any Indemnitee when Indemnification applies, and Customer shall reduine 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 Indemnitees. 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 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.

into Sidestick

Block Creek Aerobic Services, LLC, Contractor MC# 0000042 and MC#0000002

Ingelite Rojo 01-16.20 Date Fernundo Customer Signature

Customer's Initials at rights reserved Contractor's Initials

OSSF SOIL EVALUATION REPORT

REVISED 2:49 pm, Mar 03, 2020

Date: 3/3/2020Site EvApplicant Information:NamName: Fernando & Angelita RojoCompAddresse 1286 Crond Oaka Drive

Address: 1286 Grand Oaks Drive City, State, & Zip Code: Spring Branch TX, 78070

Phone: 210.685.6628 Email: Angelita_rojo@yahoo.com

Property Location: Legal: [Lot 355/Section 2] Subdivision: Cypress Cove

Street/Road Address: 2046 Hornsby Drive City: Spring Branch, TX Zip: 78070 Additional Info: Comal County Site Evaluator Information: Name: Virginia E. Castro Company: Address: 2970 Rolling Hills Dr.

City, State, & Zip: Blanco TX, 78606

Phone: 210.275.8523 Email: vleeedwards@yahoo.com

Installer Information: Name: Virginia Castro Company: Address: 2970 Rolling Hills Dr. City, State, & Zip: Blanco TX, 78606 Email: vleeedwards@yahoo.com Phone: 210.275.8523

Depth	Texture Class	Soil Texture	Structure (for Class III- blocky, platy or massive)	Drainage	Restrictive Horizon	Observation
Soil Boring #1 60"	111	0-12" Clay Loam 12"+ limestone	Blocky	<30% gravel		Bedrock
Soil Boring #1	111	Same as above				

DESIGN SPECIFICATIONS

Application Rate (Ra): .2

60"

OSSF is designed for: 3 BR home (1,216 Sq. Ft.) Wastewater Usage: 240 gal./day

A aerobic treatment system/ with drip tubing is to be utilized based on the site evaluation

1,200 sq. ft. absorptive area required with 600 linear feet of drip tubing

600-gpd aerobic tank required

Calculations: Absorption Area: Q/Ra= 240 gpd/.2 = 1,200 sq. ft min /2 = 600 l.f. min of drip tubing Actual: 1,512 s.f. of field available \rightarrow 1512 s.f./2 l.f/s.f. = 756 l.f. to be installed

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: Virginia Castro

#12319 Signature:

License No.: TDH:

AEROBIC TREATMENT DRIP TUBING SYSTEM DESIGNED FOR: FERNANDO ROJO & ANGELITA ROJO SITE ADDRESS: 2046 HORNSBY DRIVE CYPRESSS COVE, LOT 355 SECTION 2

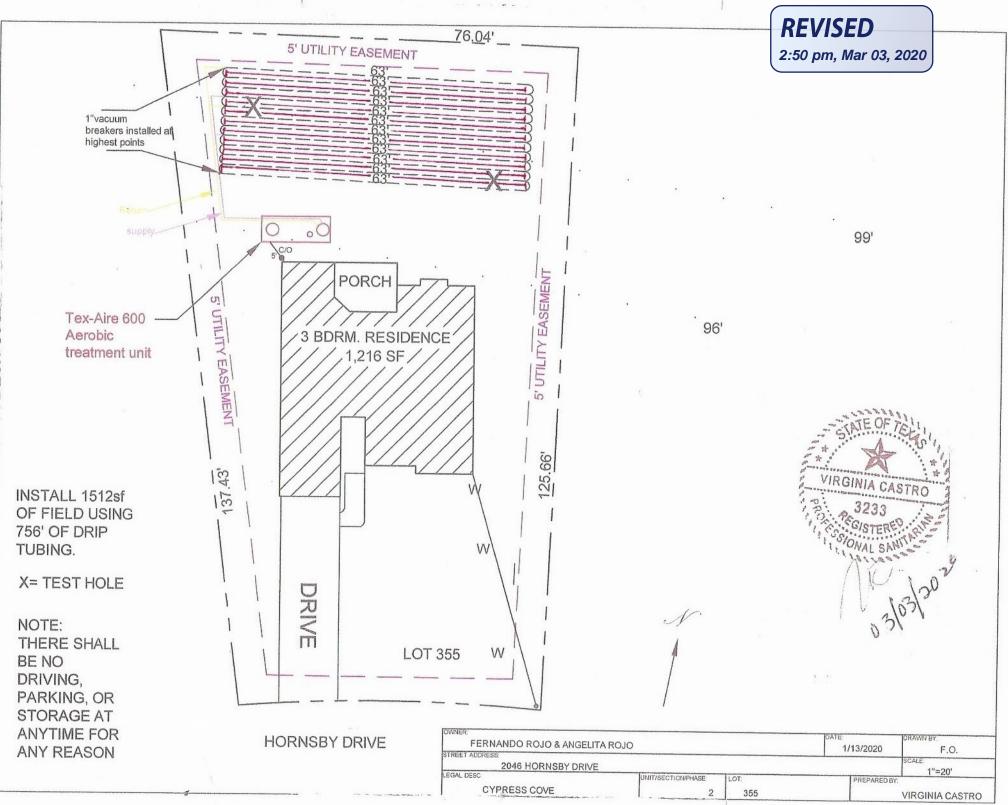
LANSCAPING:

The site of installation located in Cypress Cove, Section 2, Lot 355, Comal County TX, will include a 3 bedroom (1,216 Sq.ft) residence to be treated by a proposed aerobic treatment plant utilizing drip irrigation tubing as the most suitable system for the underlying soil.

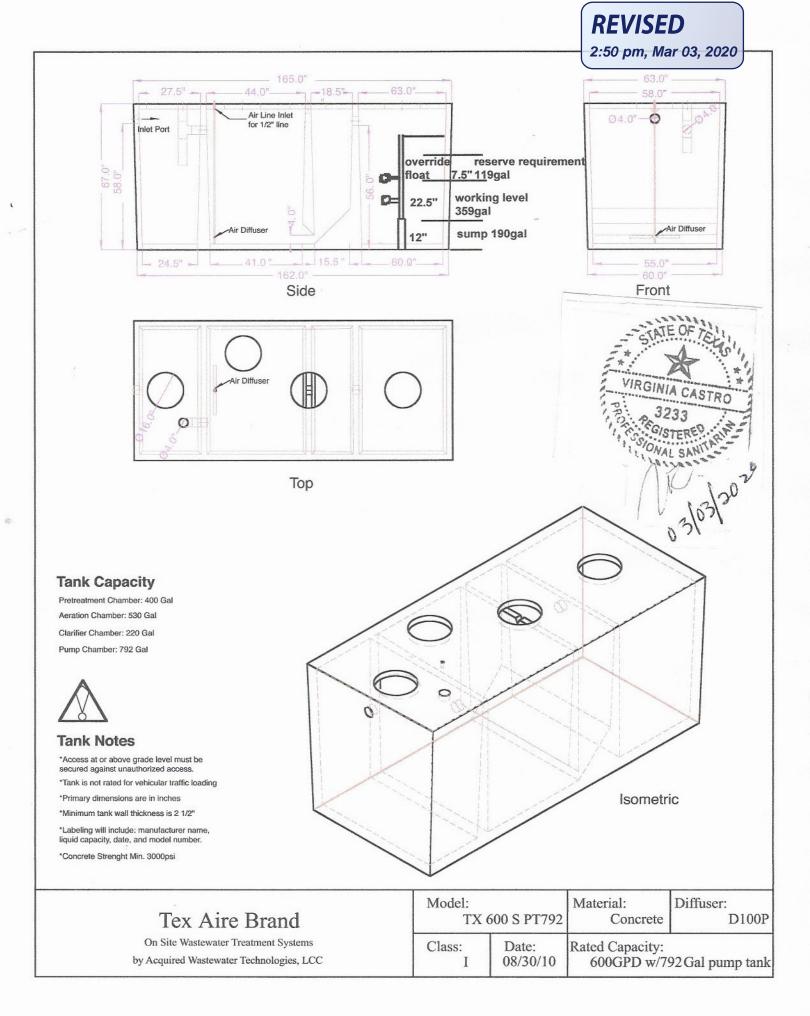
PROPOSED SYSTEM:

A 3" or 4" SCH 40 PVC pipe discharges from the residence into a Tex-Aire Model TX- 600 (600gpd) aerobic treatment plant containing a 400 gallon pretreatment tank and a 792 gallon pump chamber. The pump is activated by a time controller allowing the distribution 8 times per day with a 7 minute run time with the float 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 and subsequently through a 1" SCH 40 manifold allowing effluent distribution to 756 l.f. of drip tubing lines spaced 2ft. apart with .61 emitters set every two feet. A pressure guage will be installed on the pump tank side for both the supply manifold and flush line and shall maintain a pressure of at least 25 PSI. A 1" SCH 40 return line will flush each cycle back to the pump tank. Vacuum breakers will be installed at the two highest points of the drip field for the supply and flush manifold to prevent siphoning. Drip field will be scarified and built up with 6" of type II or type III soil before laying drip lines then covered with 6" of type II or III soil. Seeding will be added upon completion.





A Carlos and a carlo



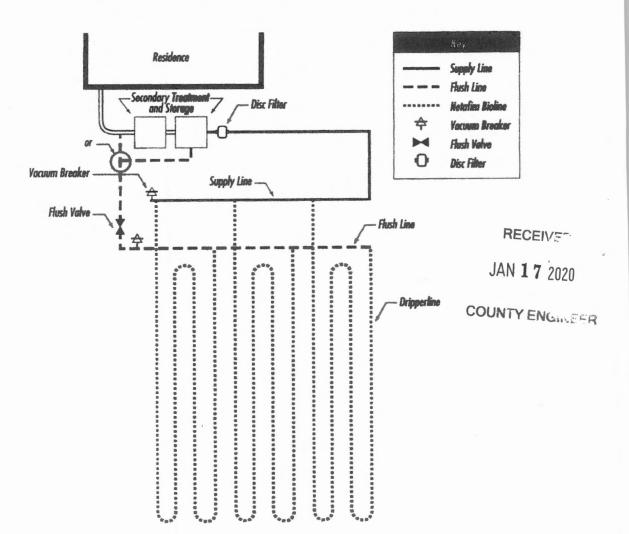
NETAFIM WASTEWATER DISPERSAL SYSTEM DESIGN GUIDE

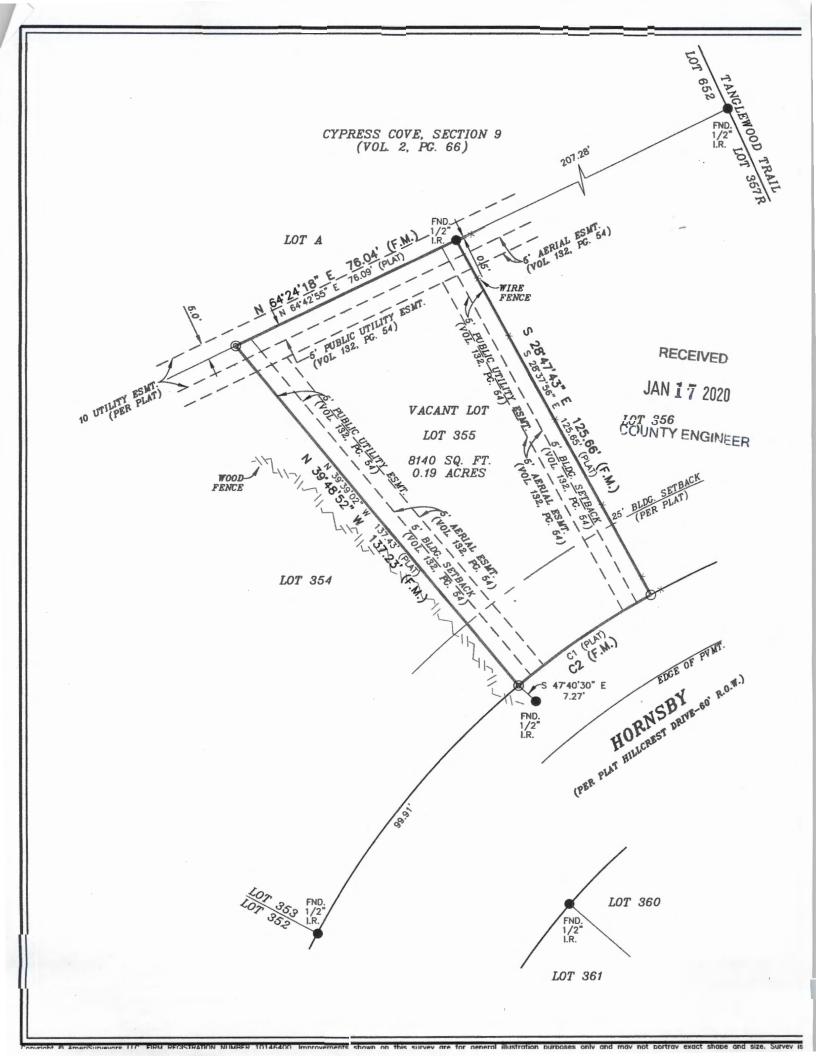
SAMPLE

SINGLE TRENCH LAYOUT

Rectangular field with supply and flush manifold on same side and in same trench;

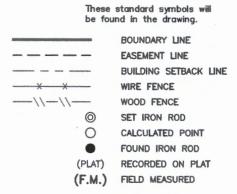
- · Locate supply and flush manifold in same trench
- · Dripperlines are looped at the end opposite the supply and flush manifolds
- The longest Bioline length should not exceed 400 ft. Drip fields 200 ft. in length might loop the
 Bioline once; drip dispersal fields under 100 ft. might be looped twice, as illustrated





CURVE	RADIUS	ARC LENGTH	CHORD LENGTH	CHORD BEARING	DELTA ANGLE
C1	260.00'	50.00'	49.92'	S 55°51'31" W	11°01'06"
C2	260.00'	50.00'	49.92'	S 55°41'47" W	11°01'06"

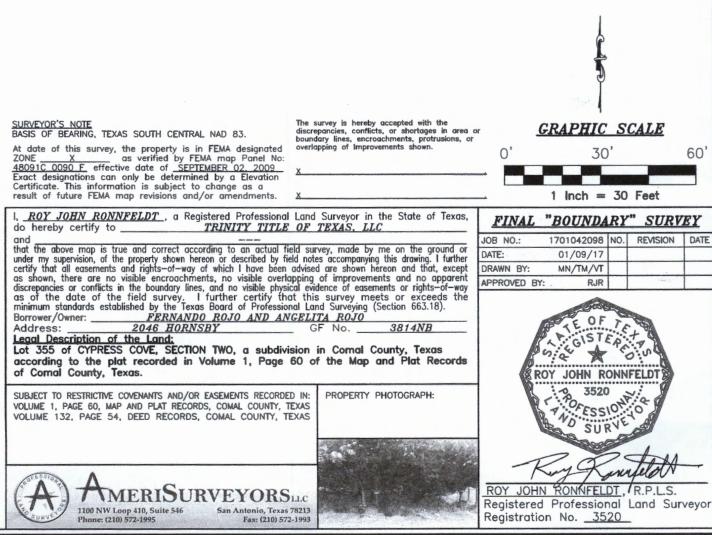
LEGEND



RECEIVED

JAN 17 2020

COUNTY ENGINEER



on a Title report issued by the Title Company listed above issued under Commitment No./GF No. shown on this survey. email questions to: info@amerisurveyors.com

Ritzen, Brenda

From: Sent: To: Cc: Subject: Ritzen, Brenda Tuesday, March 3, 2020 9:39 AM 'Virginia Edwards' Frank Oranday RE: 110267

Virginia,

Before I can continue processing the revised planning materials, or schedule further inspections, the following information is needed:



Dimension each drip line on the design.

Verify that there will be a minimum of 12 inches of suitable soil under the drip tubing located over the tank/ATU.

The amount of absorption area on the 2nd page of the permit application must be updated to match the revised area.

The remaining planning materials must be revised as needed to match the latest revised design.

The pump tank detail must be revised to include the height and location of all pump tank settings, and identify the minimum reserve capacity provided.

6. Revise as needed and resubmit.

Thank you,

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

From: Virginia Edwards <vleeedwards@yahoo.com>
Sent: Monday, March 2, 2020 4:47 PM
To: Ritzen, Brenda <rabbjr@co.comal.tx.us>
Cc: Frank Oranday <frankoranday@gmail.com>
Subject: 110267

This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

- Comal IT

This job is now ready for inspection if you have received the corrected tank information. Can you schedule it for Wednesday? Thanks, Virginia

			CONSTRUCT AN	REVISED 12:52 pm, Jan 27, 2020
Date 1/16/2020)	Permit #]	0267
Owner Name	Fernando Rojo & Angelita Rojo	Agent Name	Virginia Castro	
Mailing Address	1286 Grand Oaks Drive	Agent Address	2970 Rolling Hills Rd.	
City, State, Zip	Spring Branch TX, 78070	City, State, Zip	Blanco TX, 78606	
Phone #	210.685.6628	Phone #	210.275.8523	
Email	Angelita_rojo@yahoo.com	Email	vieeedwards@yahoo.cc	m

All correspondence should be sent to:
Owner
Agent
Both Method: Mail 🔀 Email Carrian Subdivision Name Cynress Cove Hoit I 1 of 355 Block [

QUEGIVISION INSING	Cypross Cove	 Section 2	Out I	1	LOI	 -
Acreage/Legal [.1865 Acres]	 and the standard standard in				

Street Name/Address 2046 Homsby Drive	City Spring Branch	
Type of Development:		

Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1,216 s.f.

Non-Single Family Residential

(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 Occupa	ants
Restaurants, Lounges, Theaters - Indicate Number of VOID	
Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds	
Travel Trailer/RV Parks - Indicate Number of Spaces	
Miscellaneous	

Estimated Cost of Construction: \$ [(Structure Only) 150000

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

Yes X 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? X 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.

frigelite Roje Ferrundo 12050 Signature of Owner

01.16.2020 Date

Page 1 of 2

78070

* * * COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH * * * <u>APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN</u> <u>ON-SITE</u>				
Planning Materials & Site Evaluation as Required Completed By Virgini	nia Castro			
System Description Aerobic treatment/ with drip tubing				
Size of Septic System Required Based on Planning Materials & Soil Ev	valuation			
Tank Size(s) (Gallons) 600 gpd Absorpt	ption/Application Area (Sq Ft)			
Gallons Per Day (As Per TCEQ Table III) 240				
(Sites generating more than 5000 gallons per day are required to obtain a perm	mit through TCEQ.)			
	No RECEIVED			
(If yes, the planning materials must be completed by a Registered Sanitarian (F	(R.S.) or Professional Engineer (P.E.)) JAN 17 2020			
Is there an existing TCEQ approved WPAP for the property? Yes	X No			
(If yes, the R.S. or P.E. shall certify that the OSSF design complies with all prov	ovisions of the existing WPAP.) COUNTY ENGINEER	1		
If there is no existing WPAP, does the proposed development activity re	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 public issued for the proposed OSSF until the proposed WPA ^o has been approved	provisions of the proposed WPAP. A Permit to Construct will no by the appropriate regional office.)	ot		
Is the property located over the Edwards Contributing Zure CLPs	□ No			
Is there an existing TCEQ approval CZP for the property?	No			
(If yes, the P.E. or R.S. shall certify that the OSSF design complies with all pro-	ovisions of the existing CZP.)			
If there is no existing CZP, does the proposed development activity req	equire a TCEQ approved CZP? 📋 Yes 🔀 No			
(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all pushed for the proposed OSSF until the CZP has been approved by the approp		be		
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 knowled - I affirmatively consent to the online posting/public release of my e-mail address				
Æ	1/13/2020			
Signature of Designer D	Date Page 2 of	f2		

Revised July 2018

OSSF SO VOID ATION REPORT

Date: 3/3/2020 Applicant Information: Name: Fernando & Angelita Rojo

Address: 1286 Grand Oaks Drive City, State, & Zip Code: Spring Branch TX, 78070

Phone: 210.685.6628 Email: Angelita_rojo@yaboo.com

Property Location: Legal: [Lot 355/Section 2] Subdivision: Cypress Cove

Street/Road Address: 2046 Hornsby Drive City: Spring Branch, TX Zip: 78070 Additional Info: Comal County Site Evaluator Information: Name: Virginia E. Castro Company: Address: 2970 Rolling Hills Dr.

City, State, & Zip: Blanco TX, 78606

Phone: 210.275.8523 Email: vleeedwards@yahoo.com

Installer Information: Name: Virginia Castro Company: Address: 2970 Rolling Hills Dr. City, State, & Zip: Blanco TX, 78606 Email: vleeedwards@yahoo.com Phone: 210.275.8523

Depth	Texture Class	Soil Texture	Structure (for Class III- blocky,	Drainage	Restrictive Horizon	Observation
Soil Boring #1 60"	III	Ora Clay Loam	VOID	<30% gravel	<u>125</u>	-Bedrock
Soil Boring #1	111	Same as above				

DESIGN SPECIFICATIONS

Application Rate (Ra): .2

60"

OSSF is designed for: 3 BR home (1,216 Sq. Ft.)

Wastewater Usage: 240 gal./day

A aerobic treatment system/ with drip tubing is to be utilized based on the site evaluation

1512 sq. ft. absorptive area required with 756 linear feet of drip tubing 600-gpd aerobic tank required

Calculations: Absorption Area: Q/Ra= 240 gpd/.2 = 1,200 sq. ft min /2 = 600 l.f. min of drip tubing Actual: 1512 s.f. of field available \rightarrow 1512 s.f./2 l.f/s.f. = 756 l.f.

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: Virginia Castro

Signature: # 12319

License No.: TDH:







AERONIC TREATMENT DRIP TUBING SYSTEM DESIGNED FOR: FERNANDO ROJO & amp: ANGELITA ROJO

SITE ADDRESS: 2046 HORNSBY DRIVE CYPRESSS COVE, LOT 355 SECTION 2

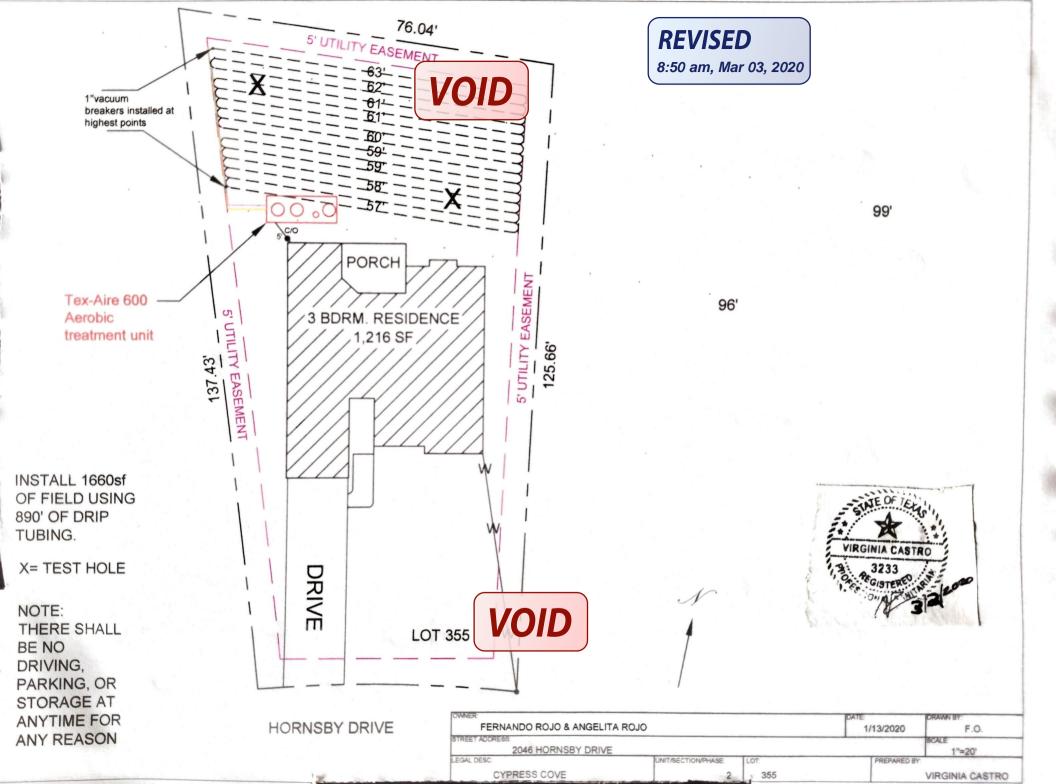
LANSCAPING:

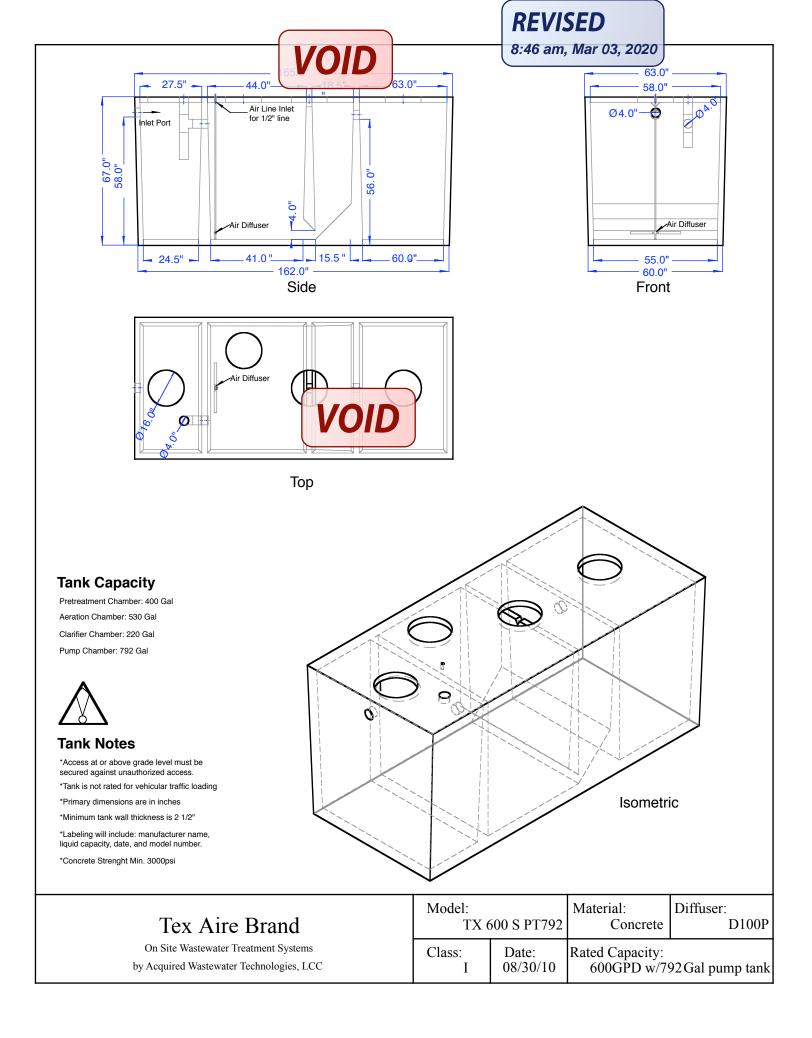
The site of installation located in Cypress Cove, <u>Section 2</u>, Lot 355, Comal County TX, will include a 3 bedroom (1,216 Sq.ft) residence to be treated by a proposed aerobic treatment plant utilizing drip irrigation tubing as the most suitable system for the underlying soil.

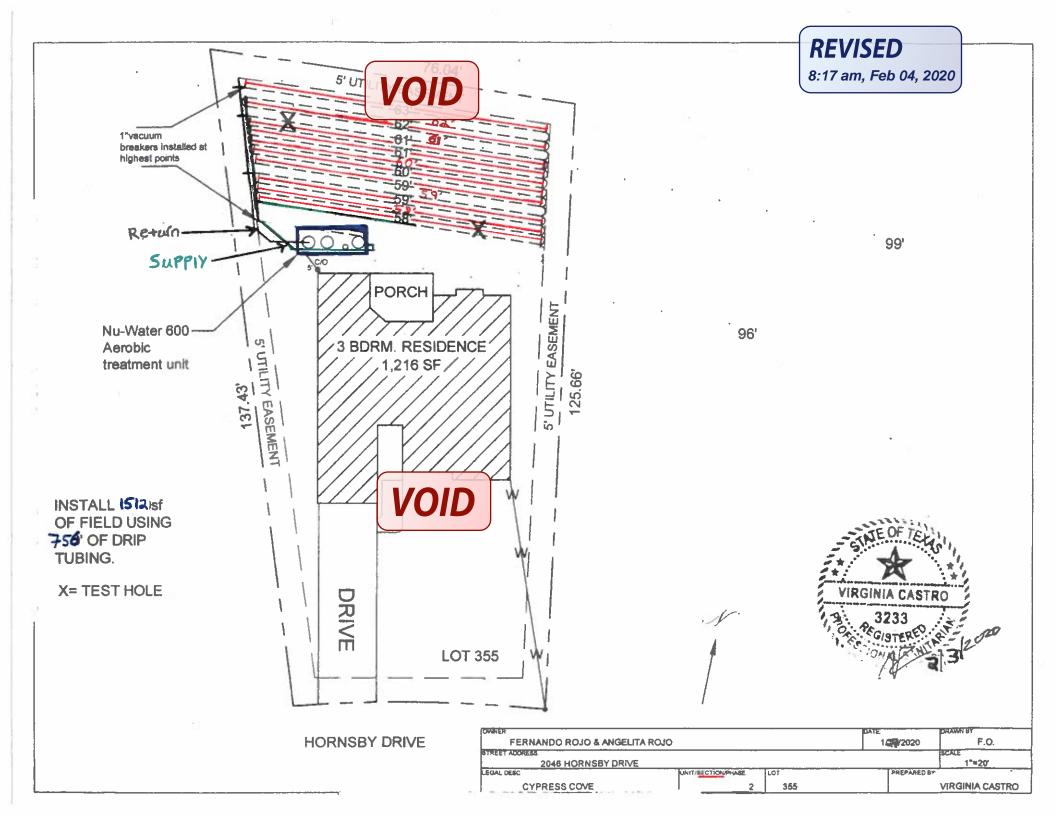
PROPOSED SYSTEM:

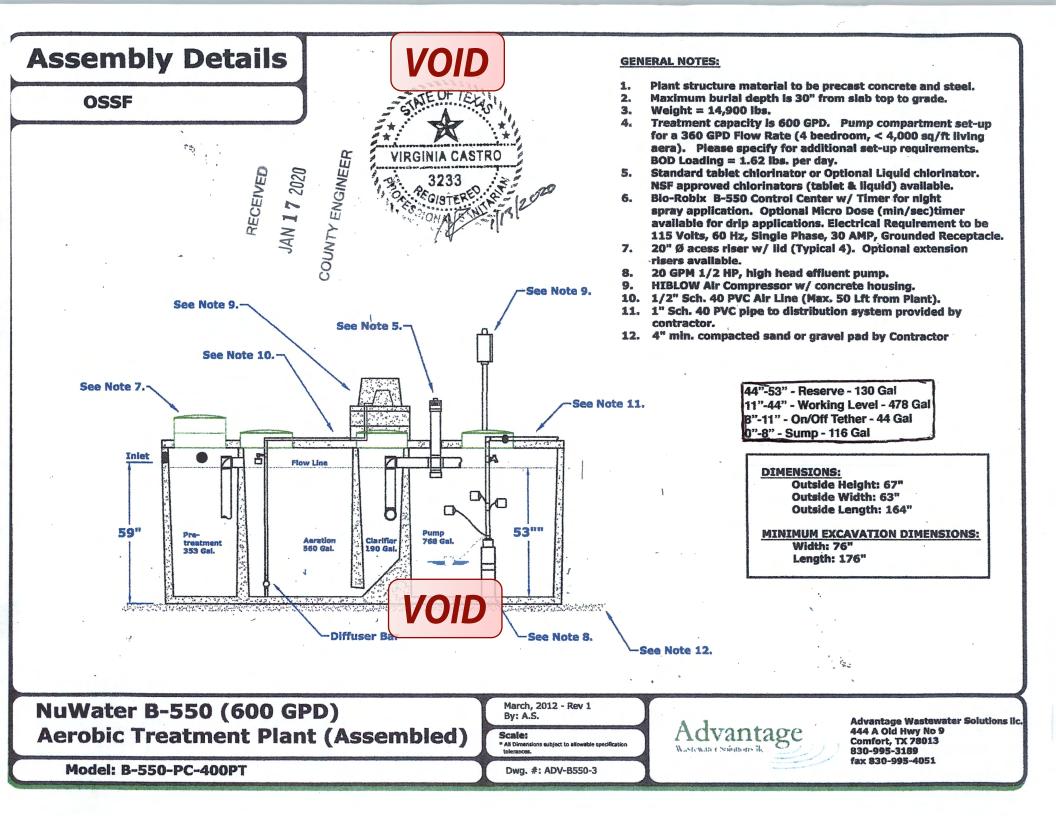
A 3" or 4" SCH 40 PVC pipe discharges from the residence into a Nu-water B-550 (600gpd) aerobic treatment plant containing a 353 gallon pretreatment tank and a 768 gallon pump chamber. The pump is activated by a time controller allowing the distribution 8 times per day with a 7 minute run time with the float 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 and subsequently through a 1" SCH 40 manifold allowing effluent distribution to 890 l.f. of drip tubing lines spaced 2 ft. apart with .61 emitters set every two feet. A pressure gauge will be installed on the pump tank side for both the supply manifold and flush line and shall maintain a pressure of at least 25 PSI. A 1" SCH 40 return line will flush each cycle back to the trash tank. Vacuum breakers will be installed at two of the highest points of the drip field for the supply and flush man phoning. Drip field will be scarified and built up with 6 of type II or type III soil lines then will be covered with 6 of type on completion. Il or type Ill soil. Seeding will











Ritzen, Brenda

From: Sent: To: Cc: Subject: Ritzen, Brenda Monday, February 3, 2020 1:17 PM 'Frank Oranday' Virginia Edwards RE: Revision submittal

Virginia,

I have reviewed the revised planning materials and have found the following information is needed:

The design specifications are contradicting. It indicates 1660 sq. ft. of absorption area is required, but the next line indicates 1200 sq. ft. required.

A minimum of 6 inches of cover is required over the drip tubing.

3. Revise as needed and resubmit.

Thank you,

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

From: Frank Oranday <frankoranday@gmail.com>
Sent: Monday, February 3, 2020 12:36 PM
To: Ritzen, Brenda <rabbjr@co.comal.tx.us>
Cc: Virginia Edwards <vleeedwards@yahoo.com>
Subject: Revision submittal

This email originated from outside of the organization.

Do not click links or open attachments unless you recognize the sender and know the content is safe.

- Comal II

Good afternoon,

attached is the revision for 2046 Hornsby Drive. permit # 110267

Thank you, Frank Oranday

OSSF LUATION REPORT



		USST		AIL	N KEFU	KI	1:01 pm, Fe	b 03, 2020
Date: 2/3 /2020 Applicant Information: Name: Fernando & Angelita Rojo				Site Evaluator Information: Name: Virginia E. Castro Company:				
				Addres	s: 2970 Rollin	g Hills D	r.	
Address: 12 City, State, o		aks Drive : Spring Branch TX,	, 78070	City, St	ate, & Zip: Bl	anco TX	, 78606	
Phone: 210.0	685.6628			Phone:	210.275.8523			
Email: Ange	lita roio@va	hoo.com			vleeedwards@	Dvahoo c	-om	
						<i>y</i> , u u u u u		
Property Location: Legal: [Lot 355/Section 2] Subdivision: Cypress Cove Street/Road Address: 2046 Hornsby Drive City: Spring Branch, TX Zip: 78070 Additional Info: Comal County				Installer Information: Name: Virginia Castro Company: Address: 2970 Rolling Hills Dr. City, State, & Zip: Blanco TX, 78606 Email: vleeedwards@yahoo.com Phone: 210.275.8523				
Depth	Texture Class	Soil Texture	Structure Class III- platy or m	blocky,	Drainage	Restric Horizoi		ation
Soil Boring #1 60"	111	Clay Loam	Blocky		<30% gravel		-Sedroo	:k
Soil Boring #1 III Same as above 60" Application Rate (Ra): .2 OSSF is designed for: 3 BR home (1,216 Sq. Ft.) Wastewater Usage: 240 gal./day								
A aerobic tre	atment syste	m/ with drip tubing is	to be utiliz	ed based	on the site eva	luation		
	-	ptive area required wi ank required	ith 890 line	ar feet of	drip tubing			
Calculations:	Absorption	Area: Q/Ra= 240 gpd	l/.2 = 1,200	sq. ft mi	m /2 = 600 l.f.	min of di	rip tubing	
		available → ISIZ s.f.						
		FEAT	FURES OF	SITE AR	EA			
Presence of 10	00-year flood	zone: NO			Presence of up	oper wate	r sh ed: NO	

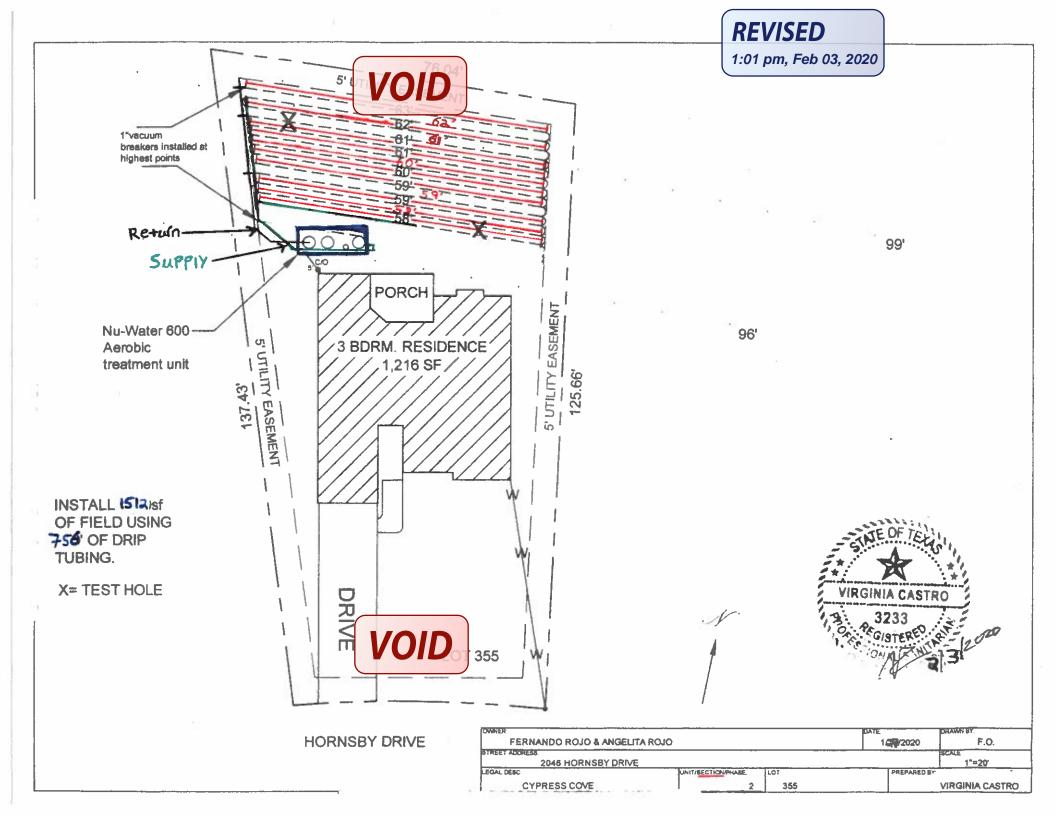
Presence of 100-year flood zone: NO Existing or proposed water well in nearby area: NO Presence of adjacent ponds, streams, water impoundments: NO Presence of upper water shed: NO Organized sewage service available to lot: NO

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: Virginia Castro

Signature: A # 12319

License No.: TDH:







AEROBIC TREATMENT DRIP TUBING SYSTEM DESIGNED FOR: FERNANDO ROJO & amp: ANGELITA ROJO SITE ADDRESS: 2046 HORNSBY DRIVE CYPRESSS COVE, LOT 355 SECTION 2

LANSCAPING:

The site of installation located in Cypress Cove, Section 2, Lot 355, Comal County TX, will include a 3 bedroom (1,216 Sq.ft) residence to be treated by a proposed aerobic treatment plant utilizing drip irrigation tubing as the most suitable system for the underlying soil.

PROPOSED SYSTEM:

A 3" or 4" SCH 40 PVC pipe discharges from the residence into a Nu-water B-550 (600gpd) aerobic treatment plant containing a 353 gallon pretreatment tank and a 768 gallon pump chamber. The pump is activated by a time controller allowing the distribution 8 times per day with a 7 minute run time with the float 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 and subsequently through a 1" SCH 40 manifold allowing effluent distribution to 890 l.f. of drip tubing lines spaced 2 ft. apart with .61 emitters set every two feet. A pressure gauge will be installed on the pump tank side for both the supply manifold and flush line and shall maintain a pressure of at least 25 PSI. A 1" SCH 40 return line will flush each cycle back to the trash tank. Vacuum breakers will be installed at two of the highest points of the drip field for the supply and flush manifold to prevent siphoning. Drip field will be scarified and built up will 6" of type II or type III soil before laying drip lines then will be covered with 3" of type II or type III soil. Seeding will be acted upon Comment.





Ritzen, Brenda

From:	Ritzen, Brenda
Sent:	Monday, January 27, 2020 1:05 PM
То:	Virginia Edwards
Subject:	Permit 110267

Re: Fernando & Angelita Rojo Cypress Cove Section 2 Lot 355 Application for Permit for Authorization to Construct an On-Site Sewage Facility

Virginia,

I have reviewed your revised planning materials and have found the following information is still needed:

- 1. A minimum of 12 inches of soil is required below the drip tubing over the tank/ATU.
- 2. Revise planning materials accordingly and resubmit.

Thank you,

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

OSSF SOIL EVALUATION REPORT



Date: 1/372020 Applicant Information: Name: Fernando & Angelita Rojo

Address: 1286 Grand Oaks Drive City, State, & Zip Code: Spring Branch TX, 78070

Phone: 210.685.6628 Email: Angelita_rojo@yahoo.com

Property Location: Legal: [Lot 355/Section 2] Subdivision: Cypress Cove

Street/Road Address: 2046 Hornsby Drive City: Spring Branch, TX Zip: 78070 Additional Info: Comal County Site Evaluator Information: Name: Virginia E. Castro Company: Address: 2970 Rolling Hills Dr.

City, State, & Zip: Blanco TX, 78606

Phone: 210.275.8523 Email: vleeedwards@yahoo.com

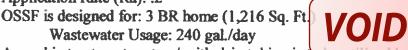
Installer Information: Name: Virginia Castro Company: Address: 2970 Rolling Hills Dr. City, State, & Zip: Blanco TX, 78606 Email: vleeedwards@yahoo.com Phone: 210.275.8523

Depth	Texture Class	Soil Texture	Structure (for Class III- blocky, platy or massive)	Drainage	Restrictive Horizon	Observation
Soil Boring #1 60"	HE	0-6" Clay Loam 6"+ limestone	Blocky	<30% gravel	<u>k</u> et	-Bedrock
Soil Boring #1	łu	Same as above				

DESIGN SPECIFICATIONS

Application Rate (Ra): .2

60"



A aerobic treatment system/ with drip tubing is to be utilized based on the site evaluation

1,660 sq. ft. absorptive area required with 890 linear feet of drip tubing 600-gpd aerobic tank required

Calculations: Absorption Area: Q/Ra= 240 gpd/.2 = 1,200 sq. ft min /2 = 600 l.f. min of drip tubing Actual: 1,660 s.f. of field available \rightarrow 1660 s.f./2 l.f/s.f. = 830 l.f. to be installed

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: Virginia Castro

Signature: 4 # 12319

License No.: TDH: AEROBI VOID RIP TUBING SYSTEM DESIGNED FOR VOID JO & amp: ANGELITA ROJO SITE ADDRESS: 2046 HORNSBY DRIVE CYPRESSS COVE, LOT 355 SECTION 2

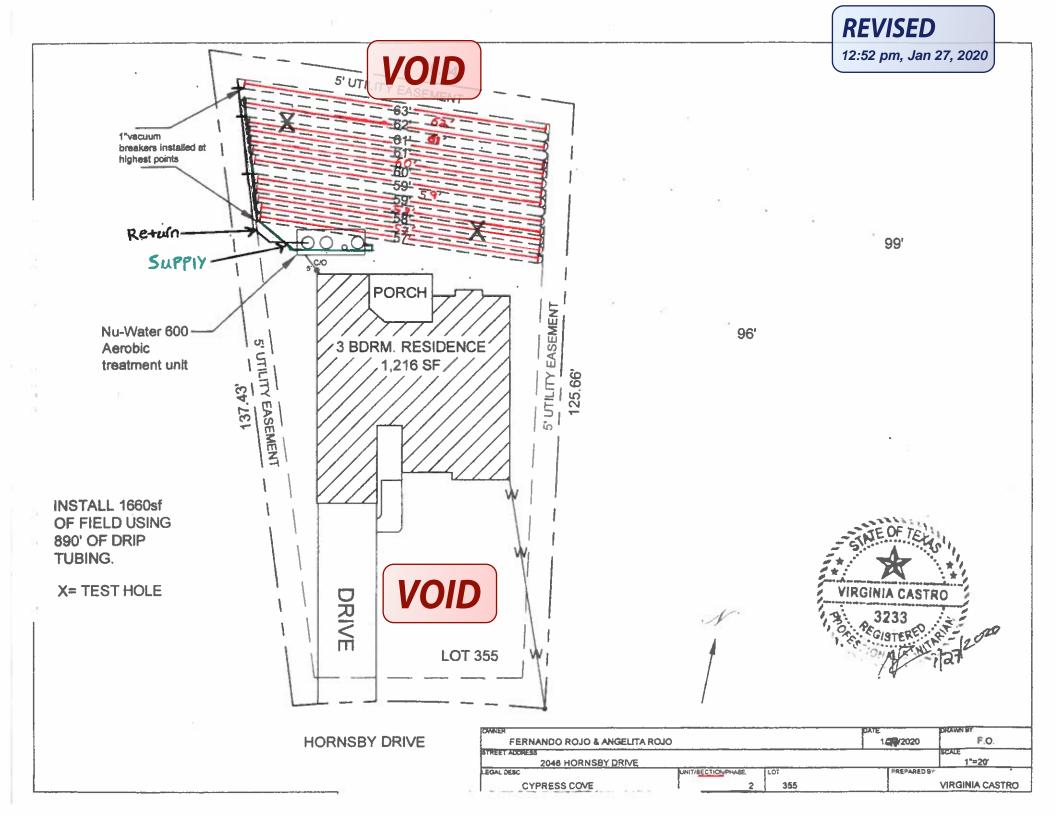
LANSCAPING:

The site of installation located in Cypress Cove, <u>Section 2</u>, Lot 355, Comal County TX, will include a 3 bedroom (1,216 Sq.ft) residence to be treated by a proposed aerobic treatment plant utilizing drip irrigation tubing as the most suitable system for the underlying soil.

PROPOSED SYSTEM:

A 3" or 4" SCH 40 PVC pipe discharges from the residence into a Nu-water B-550 (600gpd) aerobic treatment plant containing a 353 gallon pretreatment tank and a 768 gallon pump chamber. The pump is activated by a time controller allowing the distribution 8 times per day with a 7 minute run time with the float 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 and subsequently through a 1" SCH 40 manifold allowing effluent distribution to 890 l.f. of drip tubing lines spaced 2 ft. apart with .61 emitters set every two feet. A pressure gauge will be installed on the pump tank side for both the supply manifold and flush line and shall maintain a pressure A 1" SCH 40 return line will flush each cycle back to the trash tank. Vacuur e installed at two of the highest points of the drip field for the supply and flush man t siphoning. Drip field will be scarified and built up will 6"of type II or type III soil before laying drip lines then will be covered with 3" of type Il or type III soil. Seeding will be added upon completion.





Ritzen, Brenda

From: Sent: To: Cc: Subject: Ritzen, Brenda Friday, January 24, 2020 2:46 PM 'angelita_rojo@yahoo.com' Virginia Edwards Permit 110267

Mr. & Mrs. Rojo,

The following information is needed before I can continue processing the referenced permit submittal:

- V. Add the subdivision section number to the permit application.
- With a .2 loading rate a minimum of 12 inches of soil is required below the drip lines. The planning materials call for only 8 inches of soil to be added on top of the 3 inches of existing soil, and indicate only 8 inches of soil below drip lines over the tank/ATU.
- Dimension each drip line on the design.
- Show the supply line from the tank/ATU to the drip field and the return line from the drip field to the tank/ATU.
- 5. Revise as needed and resubmit.

Thank you,

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

* * * COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH * * * APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN

	<u>ON-SI</u>	TY AND LICENSE TO C	DPERATE
Date 1/16/2020	VOID		Permit # 110267
Owner Name	Fernando Rojo & Angelita Rojo	Agent Name	Virginia Castro
Mailing Address	1286 Grand Oaks Drive	Agent Address	2970 Rolling Hills Rd.
City, State, Zip	Spring Branch TX, 78070	City, State, Zip	Blanco TX, 78606
Phone #	210.685.6628	Phone #	210.275.8523
Email	Angelita_rojo@yahoo.com	Email	vleeedwards@yahoo.com
All corres	spondence should be sent to: Owner	Agent 🔀 Both	Method: 🗌 Mail 🔀 Email
Subdivision Nan	ne Cypress Cove	Unit []	Lot _355 Block []
Acreage/Legal	[.1865 Acres]		
Street Name/Ad	dress 2046 Hornsby Drive	City Spring	Branch Zip 78070
Type of Develo	pment:		RECEIVED
Single Far	nily Residential		JAN 17 2020
Type of Cor	struction (House, Mobile, RV, Etc.)		
Number of E	Bedrooms 3		COUNTY ENGINEER
Indicate Sq	Ft of Living Area 1,216 s.f.		
Non-Sing	le Family Residential		
(Planning mate	erials must show adequate land area for doubling t	he required land needed	for treatment units and disposal area)
Type of Fac	ility VO		
Offices, Fac	tories, Churches, Schools, Parks, Sto. India	ate Number Of Occupa	ants
Restaurants	s, Lounges, Theaters - Indicate Number of Se	ats	
Hotel, Mote	l, Hospital, Nursing Home - Indicate Number o		
	(D) (Dealer I a directo Number of Oceano		
Miscellaneo			
Estimated Co	st of Construction: \$ [150000 (Str	ucture Only)	
Is any portion	of the proposed OSSF located in the United S	States Army Corps of E	Engineers (USACE) flowage easement?
🗌 Yes 🖂	No (If yes, owner must provide approval from USAC	E for proposed OSSF improv	vements within the USACE flowage easement)
Source of Water	r 🛛 Public 🔲 Private Well		· ·
Are Water Savir	ng Devices Being Utilized Within the Residence	e? 🖂 Yes 📋 No	
	plication, I certify that: application and all additional information submitted	does not contain any fals	se information and does not conceal any material
 Authorization is site/soil evaluati 	hereby given to the permitting authority and design on and inspection of private sewage facilities		
	t a permit of authorization to construct will not be is ounty Flood Damage Prevention Order.	sued until the Floodplain	Administrator has performed the reviews required
	nsent to the online posting/public release of my e-	mail address associated v	with this permit application, as applicable.
OF.	lout Doz.		2020
Signature of C	Dwner 2050 Anglite Roje	Date	Page 1 of 2

Page 1 of 2

OSSF SOIL EVALUATION REPORT

Date: 1/13/2020 Site Evaluator Information: **Applicant Information:** Name: Virginia E. Castro Name: Fernando & Angelita Rojo **Company:** Address: 2970 Rolling Hills Dr. Address: 1286 Grand Oaks Drive City, State, & Zip Code: Spring Branch 1X, 78070 City, State, & Zip: Blanco TX, 78606 Phone: 210.685.6628 Phone: 210.275.8523 Email: Angelita rojo@yahoo.com Email: vleeedwards@yahoo.com **Property Location: Installer Information:** Legal: [Lot 355/Section 2] Subdivision: Cypress Cove Name: Virginia Castro **Company:** Street/Road Address: 2046 Hornsby Drive Address: 2970 Rolling Hills Dr. City: Spring Branch, TX Zip: 78070 City, State, & Zip: Blanco TX, 78606 **Additional Info: Comal County** Email: vleeedwards@vahoo.com Phone: 210.275.8523 Depth Texture Soil Texture Structure (for Drainage **Restrictive Observation** Class Class III- blocky. Horizon platy or massive) Soil Boring #1 0-3" Clay Loam <30% gravel RECEIVERIOCK 111 Blocky 60" 4"+ limestone JAN 17 2020 Soil Boring #1 111 Same as above 60" COUNTY ENGINEER **DESIGN SPECIFICATIONS** Application Rate (Ra): .2 OSSF is designed for: 3 BR home (1,21 Wastewater Usage: 240 gal./day A aerobic treatment system/ with drip tubing is to be utilized based on the site evaluation 1,660 sq. ft. absorptive area required with 890 linear feet of drip tubing 600-gpd aerobic tank required Calculations: Absorption Area: Q/Ra= 240 gpd/.2 = 1,200 sq. ft min /2 = 600 l.f. min of drip tubing Actual: 1,660 s.f. of field available → 1660 s.f./2 l.f/s.f. = 830 l.f. to be installed

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Site Evaluator: NAME: Virginia Castro

Signature: # 12319

License No.: TDH:



AEROBIC TREATMENT DRIP TUBING SYSTEM DESIGNED FOR: FERNANDO ROJO & amp: ANGELITA ROJO SITE ADDRESS: 2046 HORNSBY DRIVE CYPRESSS COVE, LOT 355 SECTION 2

LANSCAPING:

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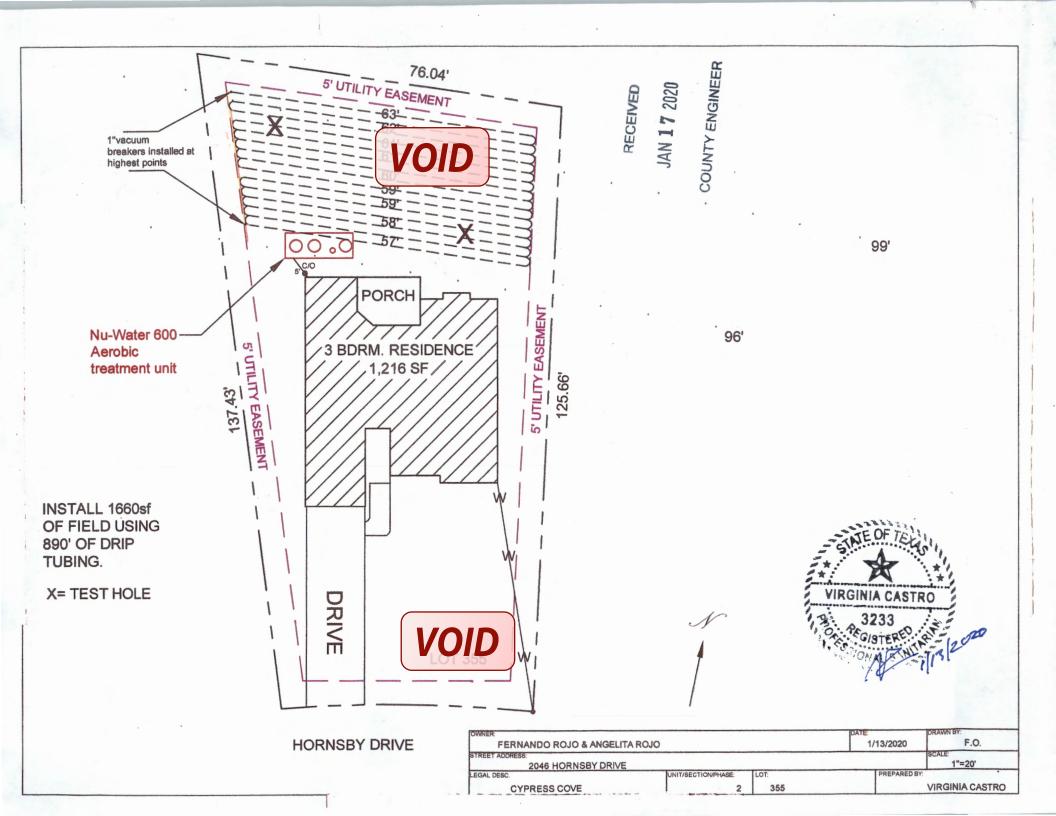
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JAN 17 2020

COUNTY ENGINEER





84/Closer M TTT/GF# <u> ABBARANA MANGANAMANANA MANANA</u>

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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.

GENERAL WARRANTY DEED

§

§

STATE OF TEXAS

KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF COMAL

THAT MICHAEL K. OTTEN, a single person hereinafter called Grantor, for and in

consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) cash and other good

and valuable consideration in hand paid by FERNANDO ROJO and wife, ANGELITA

ROJO, hereinafter called Grantee, the receipt and sufficiency of which is hereby acknowl-

edged;

HAS GRANTED, SOLD and CONVEYED, and by these presents does GRANT,

SELL and CONVEY unto the said Grantee the following described property situated in

Comal County, Texas, to-wit:

Lot 355 of CYPRESS COVE SECTION TWO, a subdivision in Comal County, Texas, according to the plat recorded in Volume 1, page 60, of the Map and Plat Records of Comal County, Texas.

This conveyance is made subject to, all and singular, the restrictions, conditions, easements and covenants, if any, applicable to and enforceable against the above

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described property as reflected by the records of the County Clerk of Comal County, Texas.

TO HAVE AND TO HOLD the above described premises, together with, all and singular, the rights and appurtenances thereto in anywise belonging unto the said Grantee, Grantee's heirs, executors, administrators, successors, or assigns forever.

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

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

DATED this the <u>17</u> day of **January**, 2017.

Michael & Otton MICHAEL K. OTTEN, a single person

STATE OF TEXAS

2

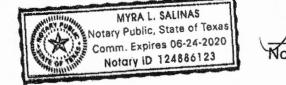
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JAN 17 2020

COUNTY ENGINEER

This instrument was acknowledged before me on this the 11^{-1} day of January, 2017 by MICHAEL K. OTTEN, a single person.



Notary Public, State of Texas

GRANTEE'S MAILING ADDRESS:

1286 Grand Oaks TX 78070 Spring Br anch

7923.deeds Trinity Title Co. (MS) GF #3814NB

Filed and Recorded Official Public Records Bobbie Koepp, County Clerk Comal County, Texas 01/17/2017 02:27:05 PM LAURA 3 Pages(s) 201706002557



Bobbie Keepp