

# COMAL COUNTY

## ENGINEER'S OFFICE

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

Issued This Date: 06/05/2020 Permit Number: 110445

Location Description: 1181 FERNWOOD RD  
FISCHER, TX 78623

Subdivision: Rancho del Lago  
Unit: 12  
Lot: 195  
Block:  
Acreage:

Type of System: Aerobic  
Surface Irrigation

Issued to: DB Builder, LLC

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

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

Alterations to this permit including, but not limited to:

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

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

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

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

Licensing Authority

Comal County Environmental Health

OS0034792

ENVIRONMENTAL HEALTH INSPECTOR

ENVIRONMENTAL HEALTH COORDINATOR

OS 0025599

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: D. Barker OSSF Installer #: OS0008287

1st Inspection Date: 6/2/20 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: 06-05-2020

Inspector Name: CONNOR Inspector Name: \_\_\_\_\_ Inspector Name: B. Olvera

Permit#: 110445 Address: Rancho del Lago 1181 Fernwood Rd

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	X	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)		X		
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	X	285.91(10) 285.30(b)(4) 285.31(d)		X		
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	X	285.32(a)(1)		X		
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	X	285.32(a)(3)		X		
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)	X	285.32(a)(5)		X		
6	PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(G)285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(A) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(I)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

TANK SET. LEVEL. NO LEAKS. OPERATIONAL. COVER ALL.

06-05-2020 BMO: 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)(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	X	285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)		X		
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	X			X		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	X X		Solar Air SA 600 Lp 778	X X		
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)	X	285.33(d)(6) 285.33(c)(4)	aerobic spray	X		
25	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC						
26	DRAINFIELD Area Installed						
27	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
28	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
29	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
30	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.)		285.33(c)(2)				
31	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)				

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom ) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes ( 3/16 - 1/4" dia. Hole Size ) 5 ft. Apart		285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3)(B) 285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)				
33	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.	X	285.32(c)(1)		X		
34	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions	X  X  X			X  X  X		
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.	X			X		
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
37	PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions						
38	PUMP TANK Secondary restraint system provided						
39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried	X			X		

**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?	X	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)		X		
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	X  X	285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)		X  X		06-05-20 
42	APPLICATION AREA Area Installed	X					
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



# COMAL COUNTY

ENGINEER'S OFFICE

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

Permit Number: 110445  
Issued This Date: 03/02/2020  
This permit is hereby given to: DB Builder, LLC

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

1181 FERNWOOD RD  
FISCHER, TX 78623

Subdivision: Rancho del Lago  
Unit: 12  
Lot: 195  
Block:  
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic  
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.



**COMAL COUNTY**  
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION CHECKLIST**

*Staff will complete shaded items*

<i>Date Received</i>	<i>Initials</i>	<i>Permit Number</i>

**Instructions:**

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

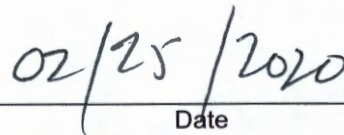
**OSSF Permit**

- Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate
- Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer
- Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist of a scaled design and all system specifications.
- Required Permit Fee - 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.**



Signature of Applicant



Date

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

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



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

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

Date February 12, 2020

Permit # 110445

Owner Name DB BUILDER, LLC Agent Name GREG W. JOHNSON, P.E.
Mailing Address 515 LANTANA MESA Agent Address 170 HOLLOW OAK
City, State, Zip SPRING BRANCH TEXAS 78070 City, State, Zip NEW BRAUNFELS, TX 78132
Phone# 210-867-3760 Phone # (830) 905-2778
Email dbarrbuilder@gmail.com Email gregjohnsonpe@yahoo.com

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

Subdivision Name RANCHO DEL LAGO Unit/Phase/Section PHASE 12 Lot 195 Block
Acreage/Legal
Street Name/Address 1181 FERNWOOD ROAD City FISCHER Zip 78623

Type of Development:

[X] Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1650

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[ ] 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 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: \$ 250,000 (Structure Only)

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 [X] 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 also understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Signature of Owner

Date 2/19/20

\*\*\* 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 GREG W. JOHNSON, P.E.

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) SOLAR AIR SA-600LP Absorption/Application Area (Sq Ft) 4576

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)

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Is the property located over the Edwards Recharge Zone? [ ] Yes [X] No

(If yes, the planning materials must be completed by a Registered Sanitarian (R.S.) or Professional Engineer (P.E.))

FEB 25 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 provisions of the existing WPAP.)

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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 [X] No

(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

If there is no existing CZP, does the proposed development activity require a TCEQ approved CZP? [ ] Yes [X] No

(if yes, the P.E. or R.S. shall certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to construct will not be issued for the proposed OSSF until the CZP has been approved by the appropriate regional office.)

Is this property within an incorporated city? [ ] Yes [X] No

If yes, indicate the city:



FIRM #2585

By signing this application, I certify that:

- The information provided above is true and correct to the best of my knowledge.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable

Signature of Designer (Handwritten Signature)

Date February 17, 2020

AFFIDAVIT



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THE COUNTY OF COMAL  
STATE OF TEXAS

Yes

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

I

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

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II

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

XII UNIT/PHASE/SECTION \_\_\_\_\_ BLOCK 195 LOT \_\_\_\_\_ RANCHO DEL LAGO \_\_\_\_\_ SUBDIVISION

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

The property is owned by (insert owner's full name): \_\_\_\_\_ DB BUILDER, LLC

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

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

WITNESS BY HAND(S) ON THIS 19TH DAY OF FEB, 2020

x [Signature]  
Owner(s) signature(s)

\_\_\_\_\_  
DAVID BARR - MANAGER  
Owner (s) Printed name (s)

DAVID BARR SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 19 DAY OF

FEBRUARY, 2020  
[Signature]  
Notary Public Signature

THIS Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
02/25/2020 01:14:17 PM  
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202006007322  
ISES ONLY  
 Bobbie Koepf



(Notary Seal Here)

**ROCKY RIDGE SEPTIC  
INITIAL SERVICE CONTRACT**

2449 Rocky Ridge Loop  
Canyon Lake, Texas 78133  
(830) 935-2750 Home  
(830) 935-2753 Fax

This service policy entered into this \_\_\_\_\_ day of \_\_\_\_\_ by and between DB BUILDER, LLC (Home Owner) and Rocky Ridge Septic (Service Provider). Service provider agrees to operate and maintain the Aerobic System at the referenced property for a period of two years beginning \_\_\_\_\_ and ending \_\_\_\_\_.

**Legal Description:** RANCHO DEL LAGO, PHASE XII, LOT 195

**Physical Address:** 1181 FERNWOOD ROAD

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By this agreement the contractor agrees to render professional service and the client agrees to fulfill the terms of this agreement. **FEB 25 2020**  
This agreement will provide all required inspections, testing, and services for your Aerobic treatment System. This agreement will provide:

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1. 3 inspections per year (at least one every four months) for a total of 7 over the two year period. These inspections will include inspecting control panel, air pumps, diffuser operation, and replacing or repairing any component not functioning properly. Any alarm situation affecting the proper operation of the aerobic treatment process will be addressed within a 48 hour period.
2. An effluent quality inspection consisting of a visual check for color, turbidity, scum overflow, and examination for odor. A test for chlorine residual and ph will be taken and reported as necessary.
3. If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified in writing of the estimated date of repair.
4. Customer is responsible for chlorine tablets or liquid chlorine.
5. Any additional visits, inspections or sample collection required by specific Municipalities, water/river authorities, County Agencies, the TCEQ, or any other regulatory agency will not be covered by this agreement.

At the conclusion of this agreement, our company will make available for purchase on an annual basis, a continuing service agreement. The manufactures homeowners' manual must be strictly adhered to or warranties are subject to invalidation.

Pumping of sludge build up is not covered by this agreement.

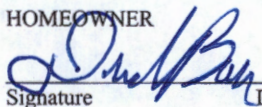
This agreement does not cover any labor or parts which must be replaced due to acts of God or due to misuse or abuse of the system.

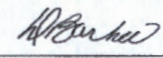
**ACCESS BY CONTRACTOR**

The contractor or anyone authorized by the contractor may enter the property at reasonable times without prior notice for the purpose of the above mentioned services. The contractor may access the system components including the tank by means of excavation for the purpose of evaluation if necessary. Soil is to be replaced as best as possible.

**TERMINATION**

Either party may terminate this agreement within 10 days of written notice in event of substantial failure to perform by either party. If this agreement is terminated, the contractor will notify the appropriate agency.

HOMEOWNER  
  
Signature \_\_\_\_\_ Date \_\_\_\_\_

SERVICE PROVIDER   
Signature \_\_\_\_\_ Date \_\_\_\_\_

Phone 210-867-3760

Rocky Ridge Septic (830) 935-2750  
2449 Rocky Ridge Loop  
Canyon Lake, TX 78133

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

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

February 15, 2020

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

RE- Septic Design  
1181 FERNWOOD ROAD  
RANCHO DEL LAGO, PHASE 12, LOT 195  
FISCHER, TX 78623  
DB BUILDER, LLC

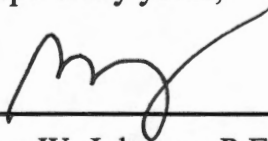
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Ms. Ritzen/Hernandez,

Due to the lack of available application area it is necessary to have the setback from the property line to the spray at ten feet as required by TCEQ Chapter 285 rules Table X. I hereby request a variance to the twenty foot setback to property lines as required by Comal County Order and equivalent protection will be maintained by including a battery backup to the timer clock to assure sprayers to only spray during the predawn hours. In my professional opinion this variance will not pose a threat to the environment or public health.

If I can be of further assistance please contact me.

Respectfully yours,



Greg W. Johnson, P.E., F#2585

02/15/2020

Date



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

Date Soil Survey Performed: February 14, 2020

Site Location: RANCHO DEL LAGO, PHASE 12, LOT 195

Proposed Excavation Depth: N/A

**Requirements:**

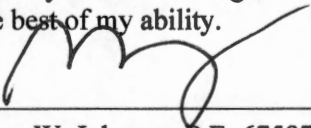
At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil boring or dug pits must be shown on the site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated. Describe each soil horizon and identify any restrictive features on the form. Indicate depths where features appear.

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SOIL BORING NUMBER		SURFACE EVALUATION				
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0	III	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 6"	BROWN
1						
2						
3						
4						
5						

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

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

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

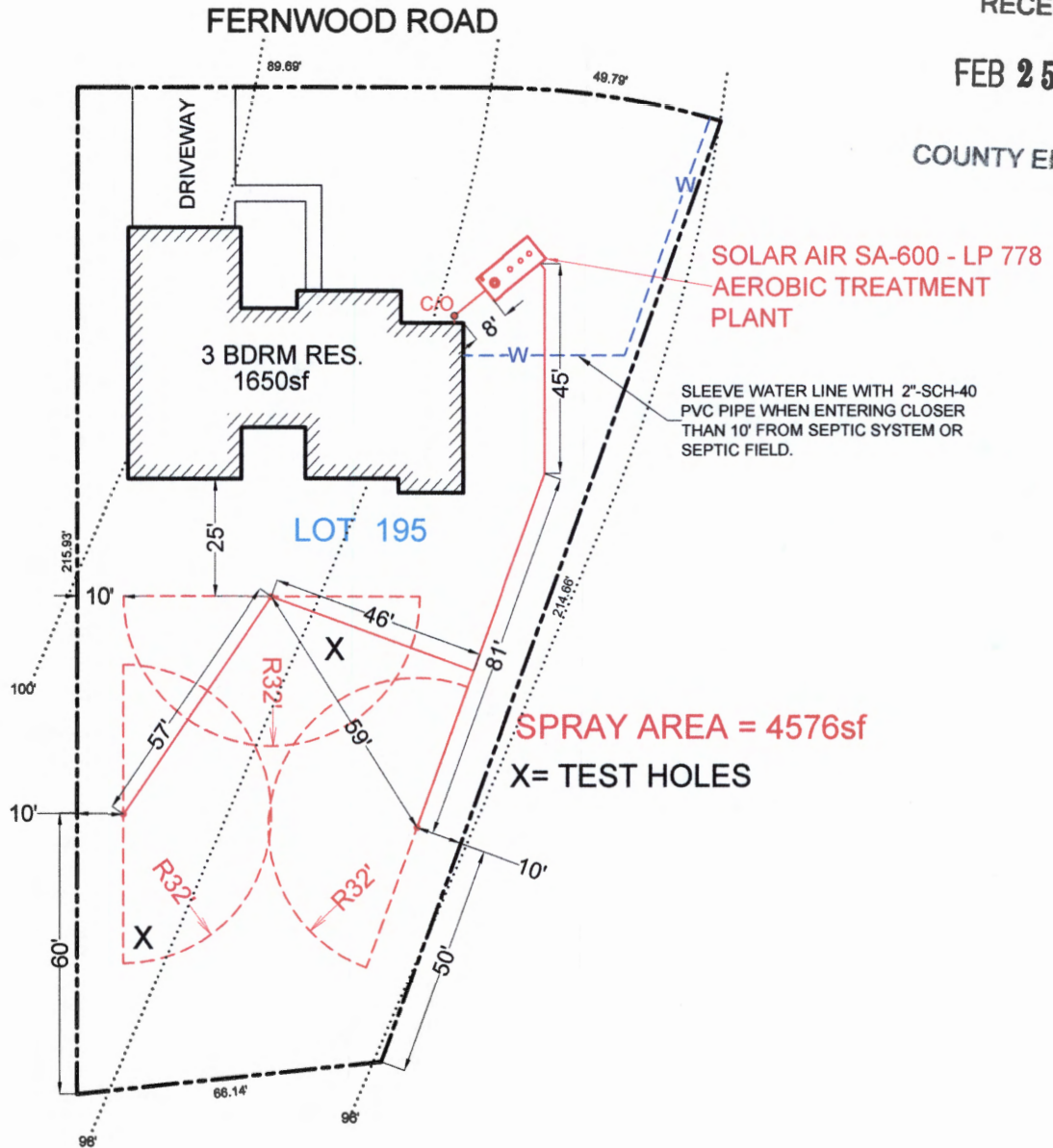
02/14/2020  
\_\_\_\_\_  
Date



RECEIVED

FEB 25 2020

COUNTY ENGINEER



OWNER: DB BUILDER, LLC.		DRAWN BY: EJS III	
STREET ADDRESS: 1181 FERNWOOD ROAD			
LEGAL DESC: RANCHO DEL LAGO	UNIT/SECTION/PHASE: 12	BLOCK:	LOT: 195
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=40'	DATE: 2/17/2020	REVISED:



**TANK NOTES:**

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

Tightlines to the tank shall be SCH-40 PVC.

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

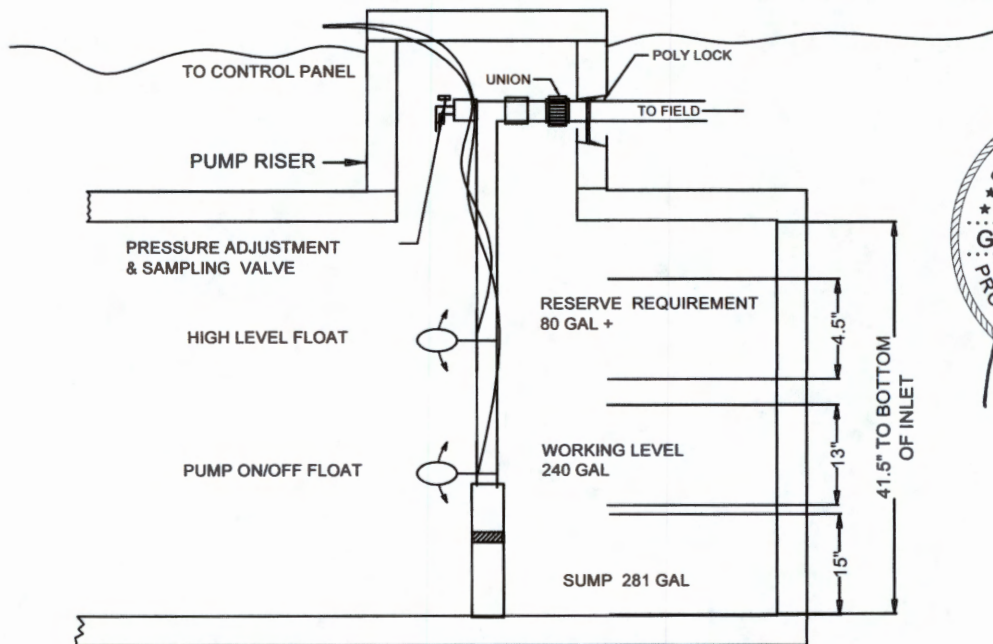
A minimum of 4" of sand, sandy loam, clay loam free of rock shall be placed under and around tanks

RECEIVED

FEB 25 2020

COUNTY ENGINEER

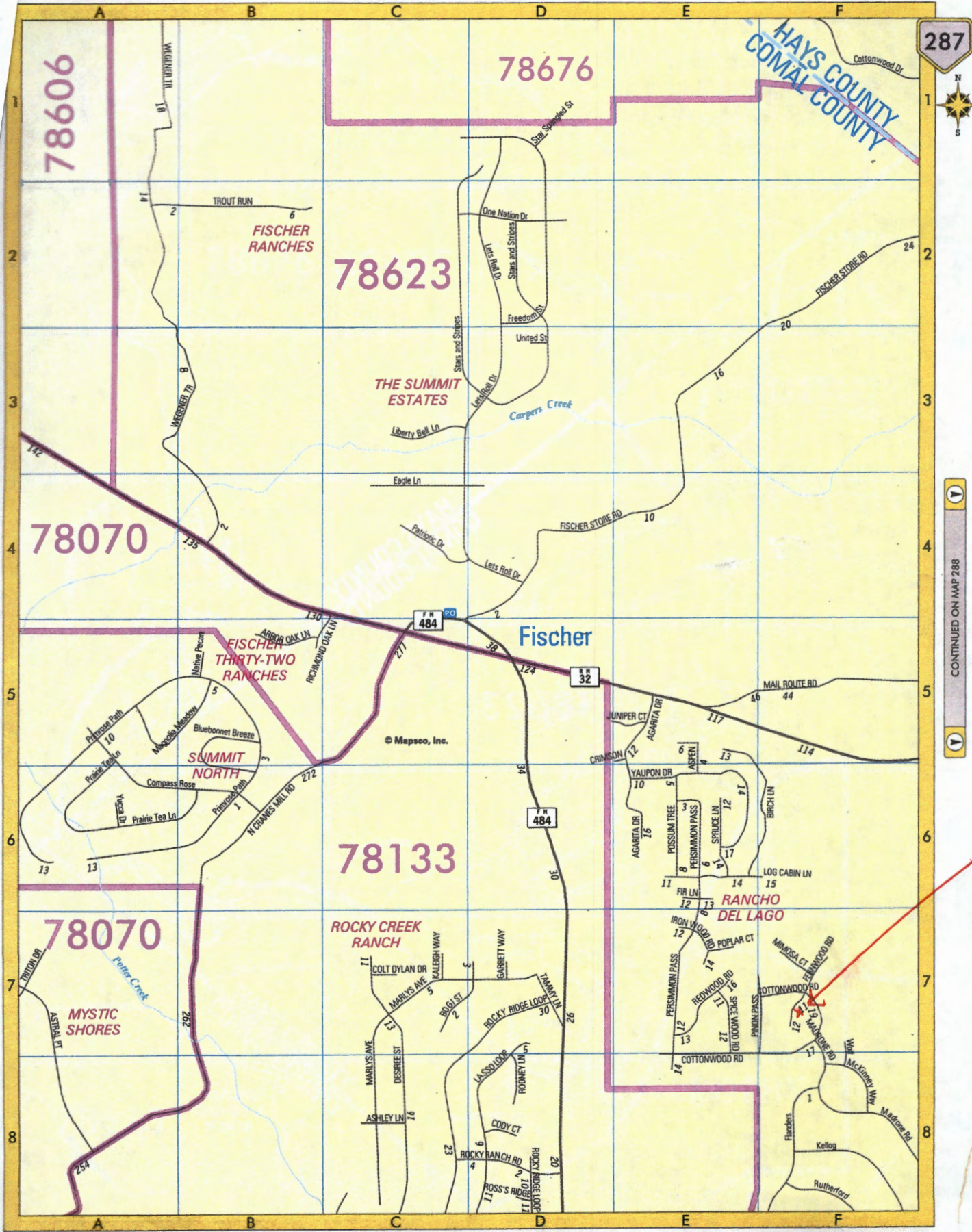
ALL WIRING MUST BE IN COMPLIANCE WITH THE MOST RECENT NATIONAL ELECTRIC CODE



F#2585

02/15/2020

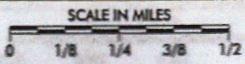
**TYPICAL PUMP TANK CONFIGURATION  
SOLAR-AIR SA-600 LP 778 GAL PUMP TANK**



287



CONTINUED ON MAP 288



202006000388 01/06/2020 01:07:14 PM 1/2

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**

THE STATE OF TEXAS §

KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF COMAL §

Executed on date of acknowledgement to be Effective on: January 3, 2020

RECEIVED

FEB 25 2020

Grantor: **Jerry L. Hilburn and wife, Kathy S. Hilburn**

COUNTY ENGINEER

Grantor's Mailing Address: 1405 Ponderosa Drive, New Braunfels, Comal County, Texas 78132

Grantee: **DB Builder, LLC**

Grantee's Mailing Address: 515 Lantana Mesa, Spring Branch, Comal County, Texas 78070

Consideration: TEN DOLLARS (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged.

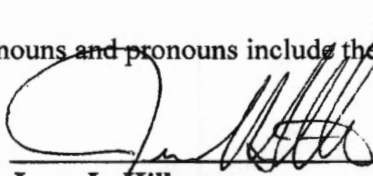
Property (including any improvements): **Lot 195, Rancho Del Lago, Phase XII**, in Comal County, Texas, according to map or plat thereof recorded in Volume 8, Page 293, Map and Plat Records of Comal County, Texas.

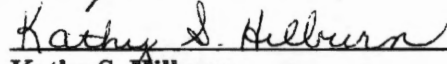
Reservations from Conveyance: None.

Exceptions to Conveyance and Warranty: All presently recorded restrictions, reservations, easements, covenants and conditions that affect the property and taxes for the current year, the payment of which Grantee assumes.

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.

  
Jerry L. Hilburn

  
Kathy S. Hilburn

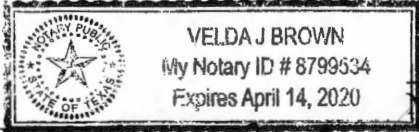
RECEIVED

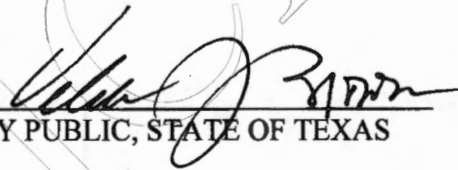
FEB 25 2020

COUNTY ENGINEER

THE STATE OF TEXAS \*  
COUNTY OF Comal \*

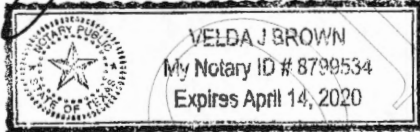
This instrument was acknowledged before me on this the 3rd day of Jan, 2020, by Jerry L. Hilburn.



  
NOTARY PUBLIC, STATE OF TEXAS

THE STATE OF TEXAS \*  
COUNTY OF Comal \*

This instrument was acknowledged before me on this the 3rd day of Jan, 2020, by Kathy S. Hilburn.



  
NOTARY PUBLIC, STATE OF TEXAS

AFTER RECORDING RETURN TO:  
ALAMO TITLE COMPANY  
GF No. 4000131900801

PREPARED IN THE LAW OFFICE OF:  
KRISTEN QUINNEY PORTER, LLC  
P.O. Box 312643  
New Braunfels, Texas 78131-2643

Filed and Recorded  
Official Public Records  
Bobbie Koepp, County Clerk  
Comal County, Texas  
01/06/2020 6:07:14 PM  
CSCHUL 2 Pages(s)  
20200600388





# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 10-31-20

2. System inspection: Property Owner: D. B  
 Property address: 1181 Fernwood  
 Permit number: 110445  
 Person Performing Inspection: LLGDDO  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured: Yes No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	—	
Electrical Circuits	<u>OK</u>	
Distribution System	—	
Spray field	—	
Other as noted	—	

3. Repairs to system: \_\_\_\_\_

### 4. Tests required and results:

<u>Test</u>	<u>Required</u> <u>Yes-No</u>	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	<u>0.1</u>
Fecal Coli form	—	

5. General comments:

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 2-24-21
2. System inspection: Property Owner: D.B.  
 Property address: 1181 FERNWOOD  
 Permit number: 110445  
 Person Performing Inspection: CLGPO  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured:  Yes  No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	<u>OK</u>	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

4. Tests required and results:

<u>Test</u>	<u>Required</u> <u>Yes-No</u>	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	
Fecal Coli form	—	<u>0.1</u>

5. General comments:

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 7-13-21
2. System inspection: Property Owner: D.B.  
 Property address: 1181 FERNWOOD  
 Permit number: 110445  
 Person Performing Inspection: LLGPOO  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured:  Yes  No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	<u>OK</u>	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

### 4. Tests required and results:

<u>Test</u>	<u>Required</u> Yes-No	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	<u>a)</u>
Fecal Coli form	—	

5. General comments:

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 10-19-21

2. System inspection: Property Owner: D.S.  
Property address: 1181 Eganwood  
Permit number: 110445  
Person Performing Inspection: D. Barker  
Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured: Yes No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	<u>—</u>	
Filters	<u>—</u>	
Irrigation Pumps	<u>—</u>	
Disinfection Device	<u>—</u>	
Chlorine Supply	<u>OK</u>	
Electrical Circuits	<u>—</u>	
Distribution System	<u>—</u>	
Spray field	<u>—</u>	
Other as noted		

3. Repairs to system: \_\_\_\_\_

4. Tests required and results:

<u>Test</u>	<u>Required</u> Yes-No	<u>Result</u>
BOD	<u>—</u>	
TSS	<u>—</u>	
Cl1	<u>—</u>	<u>0.1</u>
Fecal Coli form	<u>—</u>	

5. General comments: \_\_\_\_\_



# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 2-21-22
2. System inspection: Property Owner: D.B  
 Property address: 1181 Fernwood  
 Permit number: 110445  
 Person Performing Inspection: D BARKER  
 Signature: D Barker

Scheduled Insp. Service Order, Repair, Other

All access ports secured: Yes No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	OK	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

4. Tests required and results:

<u>Test</u>	<u>Required Yes-No</u>	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	0.1
Fecal Coli form	—	

5. General comments: