

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

Issued This Date: 08/10/2022 Permit Number: 111311

Location Description: 22125 PASEO CORTO DR

GARDEN RIDGE, TX 78266

Subdivision: Georg Ranch

Unit:

Lot: 3 Block: 14

Acreage:

Type of System: Aerobic

Surface Irrigation

Issued to: Craig & Shelly Schreader

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

INSPECTOR / ENVIRONMENTAL HEALTH COORDINATOR

US0007722

staller Name:	OSSF Installer #:	
1st Inspection Date:	2nd Inspection Date:	3rd Inspection Date:
Inspector Name:	Inspector Name:	Inspector Name:

Perm	Permit#: Address:						
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
1	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials		285.31(a) 285.30(b)(1)(A)(iv) 285.30(b)(1)(A)(v) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(ii) 285.30(b)(1)(A)(i)				
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards		285.91(10) 285.30(b)(4) 285.31(d)				
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)		285.32(a)(1)				
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot		285.32(a)(3)				
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)		285.32(a)(5)				
6	PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(G) 285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(G)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

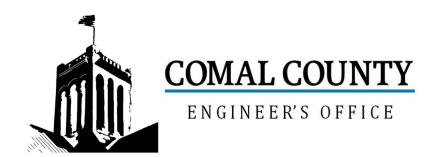
**Inspector Notes:** 

AL.	Di-si	Δ	Citation	N-4	1,41,	2	2
No.	Description SEPTIC TANK Tank(s) Clearly	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	Marked SEPTIC TANK If SingleTank, 2Compartments Provided withBaffle SEPTIC TANK Inlet Flowline Greater than3" and "T" Provided on Inlet and OutletSEPTIC TANK Septic Tank(s) MeetMinimum 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) (I)285.32(b)(1)(E) (i)285.32(b)(1)(E) (i)285.32(b)(1) (D)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (ii)285.32(b)(1) (B)285.32(b)(1) (A)285.32(b)(1)(E)(iv)				
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
	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 providedSEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
	SEPTIC TANK Tank Volume						
12	Installed						
	PUMP TANK Volume Installed						
13	AEROBIC TREATMENT UNIT Size						
14							
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number						
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)				

	OSSI 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)						
	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(4) 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)						
	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)						
24	DISPOSAL SYSTEM Other (describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)						
	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC								
26	DRAINFIELD Area Installed								
27	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)						
	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media								
	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)						
	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection 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)						

No.	Docorintian	Answer	Citations	Notes	1ct lease	2nd Inco	2rd Inco
NO.	Description  EFFLUENT DISPOSAL SYSTEM Utilized	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	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)				
	AEROBIC TREATMENT UNIT IS Aerobic Unit Installed According to Approved Guidelines.		285.32(c)(1)				
	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions						
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
	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						
	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

	1						
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?		285.33(d)(2)(G)(iii)(II) 285.33(d)(2)(G)(iii)(III) 285.33(d)(2)(G)(iii) 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)				
	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)				
41	ADDUCATION ADDA Average tradellar						
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: 111311

Issued This Date: 09/29/2020

This permit is hereby given to: Craig & Shelly Schreader

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

22125 PASEO CORTO DR GARDEN RIDGE, TX 78266

Subdivision: Georg Ranch

Unit:

Lot: 3
Block: 14

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 OFFICE OF ENVIRONMENTAL HEALTH \* \*

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

REVISED 10:12 am, Sep 29, 2020

Owner Name Craig Schreader + Shell Mailing Address 22/2 - Passa Casta Do	Simoder	Permit# 11131	- Andrews
Owner Name Craia Schreader + Shel	Agent Name	Jank Tolda	11.
Mailing Address 22/2 5 Passo Costo Do	Agent Address	1047 Jeison	
City, State, Zip CARDEN RIDGE, TX 78266	City, State, Zip		And the second s
Phone# 210-913-4018	Phone #	210 4/4 660	ンフ
Email CSchreader @ quail.com	*	y+@landsleword	1
All correspondence should be sent to:  Owner  Age		Method: Mail	. 0
Subdivision Name Georg Ranch	Unit	Lot <u>3</u> Bl	ock/4/
Acreage/Legal - 93			
Street Name/Address 22125 PASEO CORTO DRIVE	City GARDE	Y RIDGE, TX Zip	78266
Type of Development:			
Single Family Residential			
Type of Construction (House, Mobile, RV, Etc.) House	٤		
Number of Bedrooms 4		₹E(	CEIVED
Indicate Sq Ft of Living Area 3,345		SEP (	0 8 2020
Non-Single Family Residential		-	
(Planning materials must show adequate land area for doubling the re	equired land needed for tr	eatment units and disposal	FAGINEER
Type of Facility	_		
Offices, Factories, Churches, Schools, Parks, Etc Indicate I	Number Of Occupants		
Restaurants, Lounges, Theaters - Indicate Number of Seats	- Landau - L		
Hotel, Motel, Hospital, Nursing Home - Indicate Number of Be			
Travel Trailer/RV Parks - Indicate Number of Spaces			
Miscellaneous			
Estimated Cost of Construction: \$ (Structu	ure Only)		
Is any portion of the proposed OSSF located in the United State	es Army Corps of Engin	eers (USACE) flowage	easement?
Yes Vo (If yes, owner must provide approval from USACE for	proposed OSSF improvemen	nts within the USACE flowage	easement)
Source of Water  Public  Private Well			
Are Water Saving Devices Being Utilized Within the Residence?	Y Yes No		
By signing this application, I certify that:  - The completed application and all additional information submitted does facts. I certify that I am the property owner or I possess the appropriate property.	s not contain any false info		
<ul> <li>Authorization is hereby given to the permitting authority and designated site/soil evaluation and inspection of private sewage facilities</li> <li>I understand that a permit of authorization to construct will not be issued</li> </ul>	, , ,		9098 - 125.0
by the Comal County Flood Damage Prevention Order I affirmatively consent to the online posting/public release of my e-mail a			
(1) kem	7-13-703	22	
Signature of Owner	7-13-202 Date		Page 1 of 2

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

REVISED
10:12 am, Sep 29, 2020

Planning Materials & Site Evaluation as Required Completed By # Seculation  Acrobic	
Size of Septic System Required Based on Planning Materials & Soil Evaluation  Tank Size(s) (Gallons)	Planning Materials & Site Evaluation as Required Completed By Host Sedatile
Gallons Per Day (As Per TCEQ Table III)  Gites generating more than 5000 gallons per day are required to obtain a permit through TCEQ.)  RECEIVED  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.))  SEP 0 8 2020  Is there an existing TCEQ approved WPAP for the property? Yes No COUNTY ENGINEER (If yes, the R.S. or P.E. shall certify that the OSSF design complies with all provisions of the existing WPAP.)  If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP? Yes No (If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct will not be issued for the proposed OSSF until the proposed WPAP has been approved by the appropriate regional office.)  Is the property located over the Edwards Contributing Zone? Yes No QUELLON (If yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP.)  If there is no existing CZP, does the proposed development activity require a TCEQ approved CZP? Yes No (If yes, the P.E. or R.S. shall certify that the OSSF design complies 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 there is no existing CZP, does the proposed development activity require a TCEQ approved 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: Yes No	System Description Aerobic with Spray Distribution
Gallons Per Day (As Per TCEQ Table III)	Size of Septic System Required Based on Planning Materials & Soil Evaluation
(Sites generating more than 5000 gellons per day are required to obtain a permit through TCEQ.)  RECEIVED  Is the property located over the Edwards Recharge Zone?	Tank Size(s) (Gallons) 600 GPD ATU Absorption/Application Area (Sq Ft) 506790
Is the property located over the Edwards Recharge Zone?  Yes No SEP 0 8 2020  Is there an existing TCEQ approved WPAP for the property?  Yes No COUNTY ENGINEER (If yes, the R.S. or P.E. shall certify that the OSSF design complies with all provisions of the existing WPAP.)  If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP?  Yes No (If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct will not be issued for the proposed OSSF until the proposed WPAP has been approved by the appropriate regional office.)  Is the property located over the Edwards Contributing Zone? Yes No QUE CONTRIBUTION (If yes, the R.S. or P.E. shall certify that the OSSF design complies with all provisions of the existing CZP.)  If there is no 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: Yes) No (If yes, indicate the	Gallons Per Day (As Per TCEQ Table III) 3 0 0
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(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct will not be issued for the proposed OSSF until the proposed WPAP has been approved by the appropriate regional office.)  Is the property located over the Edwards Contributing Zone? Yes No Q. V. V. V. V. 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:	(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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Is this property within an incorporated city? Yes No  If yes, indicate the city: R, dge  By signing this application, I certify that:	
If yes, indicate the city: Graden R. dge  By signing this application, l'certify that:	(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.)
If yes, indicate the city: (Y Gr den 11, dge)  By signing this application, I certify that:	Is this property within an incorporated city? Yes No
<ul> <li>The information provided above is true and correct to the best of my knowledge.</li> <li>I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.</li> </ul>	- The information provided above is true and correct to the best of my knowledge.

Signature of Designer

Page 2 of 2

# 1

#### AFFIDAVIT TO THE PUBLIC



201006015047

05/07/2010 04:29:54 PM 1/1

THE COUNTY OF COMAL STATE OF TEXAS

## RECEIVED

MAY 1 1 2010

#### CERTIFICATION OF OSSF REQUIRING MAINTENANCE

**COUNTY ENGINEER** 

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.

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.

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 An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91(12) will be installed on the property described as (legal description as shown on recorded warranty deed): GEORG PLANCIA SYDDIMSYON UNITSI BLOCK 14 LOT. The property is owned by (owner's full name as shown on recorded warranty deed): ADAM MICHOEL SEP 08 2020 HOMES, LTD. This OSSF must be covered by a continuous maintenance contract. All maintenance on this OSSF must ONLY ENGINEER performed by an approved maintenance company, and a signed maintenance contract must be submitted to Comal County Engineer's Office within 30 days after the property has been transferred. 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 30 DAY OF for , 2010. Owner(s) Signature(s) 30 DAY of April SWORN TO AN D SUBSCRIBED BEFORE ME ON THIS \_ MARGIE A. HASTINGS NOTARY PUBLIC STATE OF TEXAS Comm. Expires 08-25-2012 Notary's Printed Name: \_\_\_ Filed and Recorded My Commission Expires: 8-25-2012 Official Public Records Joy Streater, County Clerk Comal County, Texas

201006015047

Jay Straater

05/07/2010 04:29:54 PM

CASHONE

#### ALWAYS ON THE LEVEL EXCAVATING

#### Mike Dunn, Owner/Operator

PO Box 993, Boeme, Texas 78006

210-378-6096 (celf) 830-537-5112 (home) 830-537-5189 (fax)

OSSF# OS0008099 MP #0682

Physical address only, mail is not received at the following address: 27 Ernst Rd., Boerne, TX 78006

BioRobic System Service Policy Craig Schreader This agreement entitles: County: Comal 22125 Paseo Corto Dr. (Print name and address) Permit. 92591 Garden Ridge, TX 78266 Installation Date:

to the following service indefinitely from the date of initial installation or upon expiration of existing contract. Service can be terminated at any time by, either party, in writing giving 30 days notice and notifying the county of the termination.

Contract date for this agreement commencing \_\_\_\_\_ 1/9/2016

Upon receipt of this signed agreement and \$80 per visit (\$100per visit for Norweco;\$90 per visit for Jet) indefinitely

MIKE DUNN DBA ALWAYS ON THE LEVEL EXCAVATING agrees to perform the following services during the term of this agreement. It is the Homeowners responsibility to see that the chlorinator is stocked with chlorine. This contract does not include the cost of the chlorine, pares, or jabor.

Service the BioRobic System 3 times per year. If we are unable to access the property, there will be an additional charge for us to return. These inspections will include:

#### PLANT SERVICE

- \*Inspection, adjustment, and cleaning of aerator.
- \*Inspection and adjustment of all control settings and overload protection.
- \*Inspection of pump, chlorinator, sprinkler heads, spray area, and test chlorine and report conditions.
- \*If special arrangement are requested (i.e. call ahead, appt., etc.) there will be an additional charge.
- \*Additional Service as ordered including replacement of components, laboratory test work, and pumping of unit or trash-tank will be done upon authority from customer at an additional charge.

Important: This service agreement does not cover the cost of service calls, labor or materials which are required due to misuse or abuse of the system; failure to maintain electrical power to the system; disposal of non-biodegradable materials, chemicals, solvents, grease, oil, paint, etc.; or any uses contrary to the requirements as stated in the operational manual.

Violations of Warranty including shutting off the electrical current to the system for more than 24 hours, disconnecting the alarm system, restricting ventilation to the aerator, overloading the system above its rated capacity, or introducing excessive amounts of harmful matter into the system, or any other form of unusual abuse.

#### **EMERGENCY SERVICE**

- \*Two emergency service calls per year at no charge (service call only does not include parts or labor)
- \*Any warrantied parts or labor will be covered according to the manufacturers warranty program. Freight charges to and from the manufacturer will be billed to the homeowner

We will respond to Homeowner's concerns within 3 working days.

This contract is specific to the undersigned homeowner and the address fisted above.

This contract is not transferable. Homeowner's signature below gives Always On The Level Excavating and/or its representative permission to enter

Home Telephone

210 713 - 4018

Work Telephone

210 913 4018

Cell Phone

X CSch reader e grail. com

Email

9/4/2020 7:08 AM Aerobic with Spray Distribution System

# ON-SITE SEWAGE FACILITY DESIGN CRITERIA

CRAIG SCHREADER + Shelly Schreader

Total irrigated area (sq. ft.):

#### House Information **Property Information:** St. Address: 22125 Paseo Corto No. of Bedrooms: COLINTY City: Garden Ridge State: Texas Sq. footage (Approx.): Zip code: 78266 gallons per day Predicted Quantity of Sewage (Q) Water Supply: public **Supply Line from House** Water Saving Devises in Home (y/n): yes Gallons/day (Q): 300 Length of supply line (approx. ft): Greywater included (yes/no): Type of supply line: SCH 40 PVC ves Rate of Adsorption (Ra) Size of Supply line (in): 3 or 4 Supply Line For Spray Irrigation System Application rate (g/sq. ft): 0.064 Length of supply line (approx. ft): Minimum Adsorptive Area (sq. ft.): 4687.5 Type of supply line: SCH 40 PVC **Aerobic Unit** Size of supply line (in): Required size of aerobic unit: 480 gpd 353 Disposal Area per this System Pretreatment Tank (gallons): $\pi (13)^2/2$ 265.33 Class 1 Aerobic Unit:: Bio-Robix 550-PC-400PT $\pi (13)^2/2$ Pump tank total capacity (gal): 265.33 768 $\pi (24)^2/2$ 904.32 Chlorination: Liquid installed in Tank $\pi (33)^2/2$ 1709.73 Pump Switch operation: Float system $\pi (35)^2/2$ Varied 1923.25 Dosing cycle quantity (gals): Cycling time: night time

All design criteria is in accordance with TCEQ, Title 30, TAC Chapter 285, Subchapter D, On-Site Sewage Facilities (Effective December 27, 2012). The above design was based on the best available information and should function properly under normal operating conditions.

All changes or modifications made to design must be approved by the below signed designer.

Hoyt Seidensticker, R.S. No. 3588

Date

Land Stewardship Services, LLC, 124 Bristow Way, Boerne, Texas 78006

Pump size and capacity: Franklin E-Series 20 GPM

Cell (210) 414-6603,

hovt@landstewardshipservices.com

5067.96

9/4/2020 7:08 AM Aerobic with Spray Distribution System

## **ON-SITE SEWAGE FACILITY DESIGN CRITERIA**

## CRAIG SCHREADER

## **Head Pressure**

Sprinkler Head Information

Elevation Head: 4 Pressure Head: 92

Friction Head: 12.04

Total head: 108 K-Rain sprinkler head PROPEUS<sub>NTY ENGLINEER</sub>

No. 3 @40psi

GPM: 5

Number of sprinkler heads:

15.5 Gallons per minute:

A class 1 aerobic wastewater treatment unit, chlorination and spray distribution system will be designed for this location. Wastewater from the residence will flow to a pretreatment/trash tank, then to the treatment unit. Treated effluent will be disinfected by a Chlorination Station 200-1500 Unit in the pump tank, before being disposed of through above ground sprinkler heads. All warning systems shall be installed with the aerobic unit

Land acceptable for surface application shall have a flat terrain (with less than or equal to 15% slope). Sloped land (with greater than 15% slope) may be acceptable if it is properly landscaped and terraced to minimize runoff. There shall be nothing in the surface application area within ten feet of the sprinkler which would interfere with the uniform application of the effluent.

Areas that rock is exposed must be covered with a suitable amount of material acceptable to the inspecting authority. Areas that are bare or have been disturbed must be seeded or sodded with a mixture of rye and bermuda grasses or other grass species prior to system operation.

A maintenance contract for the entire system must be established at time of installation with someone holding a license to maintain the installed aerobic system.

At every inspection a Total Chlorine Residual test must be conducted on the effluent in the pump tank and must be a minimum acceptable level of .1 mg/l residual.

All design criteria is in accordance with TCEQ, Title 30, TAC Chapter 285, Subchapter D, On-Site Sewage Facilities (Effective December 27, 2012). The above design was based on the best available information and should function properly under normal operating conditions. All changes or modifications made to design must be approved by the below signed designer.

Hoyt Seidensticker, R.S. No. 3588

Date

Land Stewardship Services, LLC, 124 Bristow Way, Boerne, Texas 78006

Cell (210) 414-6603.

hovt@landstewardshipservices.com



Scale 1"=40

10:13 am, Sep 29, 2020

KEVISED

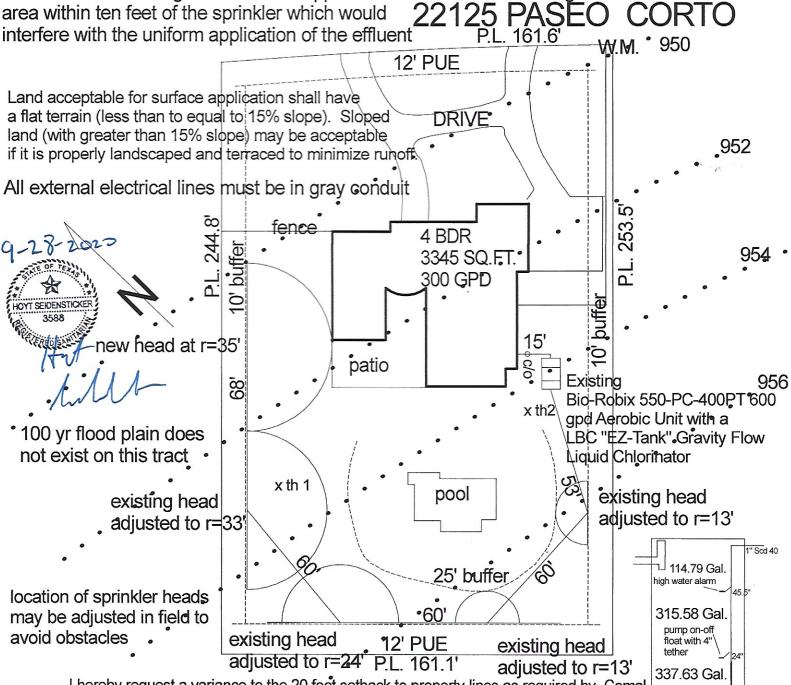
Areas that rock is exposed must be covered with a suitable amount of material. Areas that are bare or have been disturbed must be seeded or sodded with a mixture of rye and bermuda grasses or other grass species prior to system operation.

Risers must be permanently fastened to the tank lid or cast into the tank The connection between the riser and the tank lid must be watertight. Risers must be fitted with removable watertight caps and protected against unauthorized intrusions by either a padlock, a cover that can be removed with specialized tools, a cover having a minimum net weight of 29.5 kilograms (65 pounds) set into a recess of the tank lid, or any other means approved by the executive director.

Site Map permit 111311 Aerobic with Spray Distribution Craig and Shelly Schreader Lot: 3 Blk. 14 Georg Ranch Subdivision 22125 Paseo Corto Drive Garden Ridge, Texas 78266 Comal County

Surface application should be done between the

There shall be nothing in the surface application hours of 12:00 midnight and 5:00 a.m.



I hereby request a variance to the 20 foot setback to property lines as required by Comal County Order to a 10' setback to property lines as required by TCEQ, Chapter 285 and equivalent protection will be maintained by adding a battery backup to the timer clock or photo cell activated timer 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.

### **ON-SITE SEWERAGE FACILITY** Site Evaluation Report Information

Date:	7/21/2020		Site Eva	luator in	formatio	on:		
Applicant Information:			Name:	: Hoyt Seidensticker				
Name: Craig Schreader -	+Shelly Sch	hreader	License_	OS00087	71	Expires	8/31/2023	3
Address: 22125 Paseo Cort							Services,	
City: Garden Ridge State:	Texas	Zip 78266	Address:	124 Brist	ow Way			
Phone: <u>210-913-4018</u>	· · · · · · · · · · · · · · · · · · ·		City:	Boerne	State: _	Texas	Zip:	78006
			Phone: _	(210) 414	I-6603			
Property Location:			Email	hoyt@la	ndstewa	rdshipser	vices.com	<u>1</u>
Lot: 3 Block: 14	Sub.: Georg	Ranch	Installer	informat	tion:			
Street/Road Address:	22125 Paseo	Corto	Name:	·N	Mike Du	ınn	OS00080	99
City: Garden Ridge State:	Texas	Zip: 78266	Company	":	Always	on the Lev	/el	
Unincorporated Area? Y or	N	n	Address:		P.O. Bo	x 993		
Additional information	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·	City:	Boerne	State:_	Texas	Zip:	78006
		0.1	Phone:	(210) 378	3-6096	Fax:		Chi ma
Show:		Schemati	ic of Loi	or Irac	ct			RECEIVED
Location of soil boring Location of natural, which tide of salt water	constructed, or	proposed drain	age ways, (	streams, po	nds, lake	s, rivers,	eaks.	
		SITE	DRAWIN	IG	Lot Size:			acres
SEE ATTA	ACHED							
		<i></i>					<u> </u>	

Signature of Site Evaluator Site Evaluator License No: OS0008771

# ON-SITE SEWERAGE FACILITY Soil Evaluation Report Information

Date Soi	l Survey Pe	erformed:		7/16/2020	)			
Site Loca	ation:		22125 Paseo	Corto Drive				_
Name of	Site Evalua	ato <u>r:</u>		Hoyt Seidens	ticker	Registration	Number: <u>OS0008771</u>	_
Proposed	d Excavation	n Depth: _		n/a		County:	Comal	
Requiren	nents:							
					site, at opposite ends	of the propos	sed disposal area.	
		•	dug pits must b		9	and how food I	below the proposed exca	
			osal, the surface	-	-	east two feet i	below the proposed exca	
	•	·				dicate depths	where features appear.	TFP 0 8 2020
	Soil Boring	Number _		11	-			1
	Depth (feet)	Texture Class	Soil Structure	Gravel Analysis	Drainage (Redox Features/ Water Table)	Restrictive Horizon	Observations (colo consistence)	COL MAN THEORIGE
	0	111	LOAM	<30%	none		BROWN	
	1 <u>12 i</u> n		rock			yes, rock		
	2							
	3							
	4							
	5							
	Soil Boring	Number _		2		,		
	Depth	Texture		Gravel	Drainage (Redox Features/	Restrictive	Observations (colo	ır,
	(feet)	Class	Soil Structure	Analysis	Water Table)	Horizon	consistence)	
		Ш	LOAM	<30%	none		BROWN	
	1 12 in		rock			yes, rock		
	2							
	3							
	4							
	5							
					Features of	Site Are	ea e	
Presence	e of 100 yea	ar flood zone	•		Yes No_x			
Presence	e of adjacer	nt ponds, str	eams, water im	provements	Yes No_x_			
Existing	or proposed	d water well	in nearby area		Yes No_x_			
Organize	d sewage s	service avail	able to lot or tra	ict	Yes No_x_			
Recharge	e feature w	ithin 150 fee	t		Yes No_x			
By my sign	ature, I herby	certify that the	information provid	led in this report	is based on my site obs	ervations and a	are accurate to the best of m	y ability.
l understar	nd that any mi	srepresentation	n of the information	contained in thi	s report my be grounds	to revoke or su	spend my license. The site	evaluation
determined the site is suitable for a Spray Distribution				disposal system with		Aerobic	treatment	
According	to table XIII, t	he site is suitat	ole for this propose	d system. A cor	by of Tables IX and XIII h	ave been give	n to the property owner to in	form them of
-	Hut	upon the result	t of this site evalua	ation	9-3- L	023		

## **Assembly Details**

OSSF

## See Note 9. See Note 9. See Note 5. See Note 10. See Note 7.-See Note 11. Inlet Flow Line 53"" 59" Pump Clarifier 768 Gal. treatment 190 Gal. 353 Gal. Diffuser Bar See Note 8.

#### **GENERAL NOTES:**

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

#### **DIMENSIONS:**

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

#### **MINIMUM EXCAVATION DIMENSIONS:**

Width: 76" Length: 176"

See Note 12.

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

Model: B-550-PC-400PT

March, 2012 - Rev 1

By: A.S.

Scale:

Dwg. #: ADV-B550-3



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

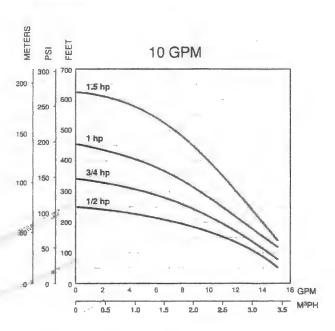


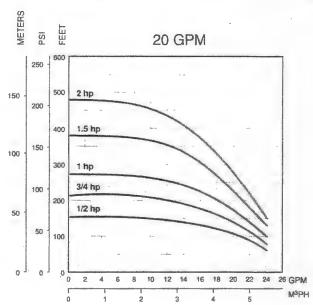
## Environmental Series Pumos

RECEIVED

SEP 08 2020

# Thermoplastic Performance Programmer





## **Thermoplastic Units Ordering Information**

1/2 - 1/5 HP Single-Phase Units								
Order No.	Model	GPM	HP	Vott	Wire	Wt		
94741005	10FE05P4-2W115	10	1/2	115	2	24		
94741010	10FE05P4-2W230	10	1/2	230	2	24		
94741015	10FE07P4-2W230	10	3/4	230	2	28		
94741020	10FE1P4-2W230	4.10	1	280	2	431:		
94741025	10FE15P4-2W230	10	1.5	230	2	46		
94742005	20FE05P4-2W115	20	1/2	<b>3775</b>	2	25		
94742010	20FE05P4-2W230	20	1/2	230	2	25		
94742015	20FE07P4-2W230	20	3/4	230	2	28		
94742020	20FE1P4-2W230	20	1	230	2	31		
94742025	20FE15P4-2W230	20	1.5	230	2	40		

114 341 350001 11	7 300 011 000 02. 1 1 000	1170-17			44 8445 385						
	Thermoplastic 1/2 - 2 HP Pump Ends										
Order No.	Model'	GPM	HP	Volt	Wire	WL					
94751005	10FE05P4-PE	10	1/2	N/A	N/A	6					
94751010	10FE07P4-PE	10	3/4	N/A	N/A	7					
94751015	10FE1P4-PE	10	4	N/A	N/A	8					
94751020	10FE15P4-PE	10	1.5	N/A	N/A	12					
94752005	20FE05P4-PE	20	1/2	N/A	N/A	6					
94752010	20FE07P4-PE	20	3/4	N/A:	N/A	37					
94752015	20FE1P4-PE	20	1	N/A	N/A	8					
94752020	20FE15P4-PE	20	1:5	N/A	N/A	10					
94752025	20FE2P4-PE	20	2	N/A	N/A	11					

### PROPLUS"

The PROPLUS™ adjustable arc and full-circle gear driven rotor comes standard with nine numerically coded interchangeable nozzles. Excellent nozzle performance delivers an exceptional fall out pattern. In independent testing by C.I.T., the PROPLUS™ delivered up to 90% uniform coverage.

Also Available: 12" High Pop, Shrub Head and Reclaimed Water models.

Tough, proven and advanced, the PROPLUS<sup>™</sup> is the leader in it's class. Set it and forget it. Arc Memory Clutch returns the rotor to its preset position. Technology works for you.

#### MODELS

11003	<b>ProPlus</b>

11003-HP	ProPlus 12" High Pop
11003-SH	ProPlus Shrub Head

#### OTHER OPTIONS: ADD TO PART NUMBER

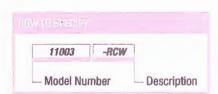
-CV	<b>Check Valve</b>			
-LA	Low Angle Nozzle			
-NN	No Nozzle			

-RCW ProPlus for Reclaimed Water w/Low Angle Nozzle

#### FASY ARC SETTING

Arc Selection 40° to Continuous 360° Adjust From Left Start







K-Rain Manufacturing Corp. 1640 Australian Avenue Riviera Beach, FL 33404 USA +1 561 844-1002 FAX: +1 561 842-9493

1.800.735.7246 | www.krain.com

#### SPECIFICATIONS

- Inlet: 3/4" Threaded NPT
- Arc Adjustment Range: 40° to Continuous 360°
- Flow Range: .5 10.0 GPM
- Pressure Rating: 20 70 PSI
- Precipitation Rate: .06 to .50 Inches Per Hour (Depending on Spacing and
- Overall Height (Popped Down):7 1/2" / 17" for High Pop
- Recommended Spacing: 28' to 44'
- Radius: 22' to 50'
- Nozzle Trajectory: 26°
- Low Angle Nozzle Trajectory: 12°
- Standard and Low Angle Nozzle: Included
- Riser Height: 5"

#### PERFORMANCE DATA

Nozzie Used)

41277-1466 A 1 ( )									
			115	1000					
#0.5	30 40 50 60	28° 29° 29°	.5 .6 .7 .8	#0.5	206 275 345 413	2.0 3.0 3.5 4.0	8.5 8.8 8.8 9.1	1.89 2.27 2.65 3.03	.11 .14 .16 .18
#0.75	30 40 50 60	29' 30' 31' 32'	.7 .8 .9 1.0	#0.75	206 275 345 413	2.0 3.0 3.5 4.0	8.6 9.1 9.4 9.8	2.65 3.03 3.41 3.79	.16 .18 .20 .23
#1	30 40 50 60	32' 33' 34' 35'	1.3 1.5 1.6 1.8	#1	206 275 345 413	2.0 3.0 3.5 4.0	9.8 10.1 10.4 10.7	4.92 5.68 6.05 6.81	.30 .34 .36 ,41
#2	30 40 50 60	37' 40' 42' 43'	2.4 2.5 3.0 3.3	#2	206 275 345 413	2.0 3.0 3.5 4.0	11.3 12.2 12.8 13.1	9.08 9.46 11.35 12.49	.54 .56 .68 .75
#2.5 PRE-INSTALLED	30 40 50 60	38' 39' 40' 41'	2.5 2.8 3.2 3.5	#2.5 PRE-INSTALLED	206 275 345 413	2.04 2.72 3.40 4.08	11.6 11.9 12.2 12.5	9.46 10.60 12.11 13.25	.57 .64 .73 .79
#3	30 40 50 60	38' 39' 41' 42'	3.6 4.2 4.6 5.0	#3	206 275 345 413	2.0 3.0 3.5 4.0	11.6 11.9 12.5 12.8	13.63 15.89 17.41 18.92	.81 .95 1.04 1.13
84	30 40 50 60	43' 44' 46' 49'	4.4 5.1 5.6 5.9	#4	206 275 345 413	2.0 3.0 3.5 4.0	13.1 13.4 14.0 14.9	16.65 19.30 21.19 22.33	.99 1.15 1.27 1.33
#6	40 50 60 70	45' 46' 48' 49'	5.9 6.0 6.3 6.7	#6	206 275 345 413	3.0 3.5 4.0 5.0	13.7 14.0 14.6 14.9	22.33 22.71 23.85 25.35	1.33 1.36 1.43 1.52
#B	40 50 60 70	42° 45° 49° 50°	8.0 8.5 9.5 10.0	#8	208 275 345 413	3.0 3.5 4.0 5.0	12.8 13.7 14.8 15.3	30.28 32.12 35.95 37.85	1.81 1.92 2.15 2.27

	1/4()								
							\$		
#1	30 40 50 60	22° 24° 26° 28′	1.2 1.7 1.8 2.0	#1	207 275 344 413	2.04 2.72 3.40 4.08	6.71 7.32 7.92 8.53	4.54 6.43 6.80 7.56	.27 .39 .41 .46
#3	30 40 50 60	29' 32' 35' 37'	3.0 3.1 3.5 3.8	#13	207 275 344 413	2.04 2.72 3.40 4.08	8.84 9.75 10.67 11.58	11.34 11.72 13.23 14.36	.68 .71 .80 .87
#4	30 40 50 60	31' 34' 37' 38'	3.4 3.9 4.4 4.7	#4	207 275 344 413	2.04 2.72 3.40 4.08	9.45 10.36 11.28 11.58	12.85 14.74 16.63 17.77	.78 .89 1.00
#6	40 50 60 70	38' 40' 42' 44'	6.5 7.3 8.0 8.6	#6	275 344 413 482	2.72 3.40 4.08 4.76	11.58 12.19 12.80 13.41	27.59	1.48 1.76 1.82 1.96

Data represents test results in zero wind. Adjust for local conditions. Radius may be reduced with nozzle retention screw.

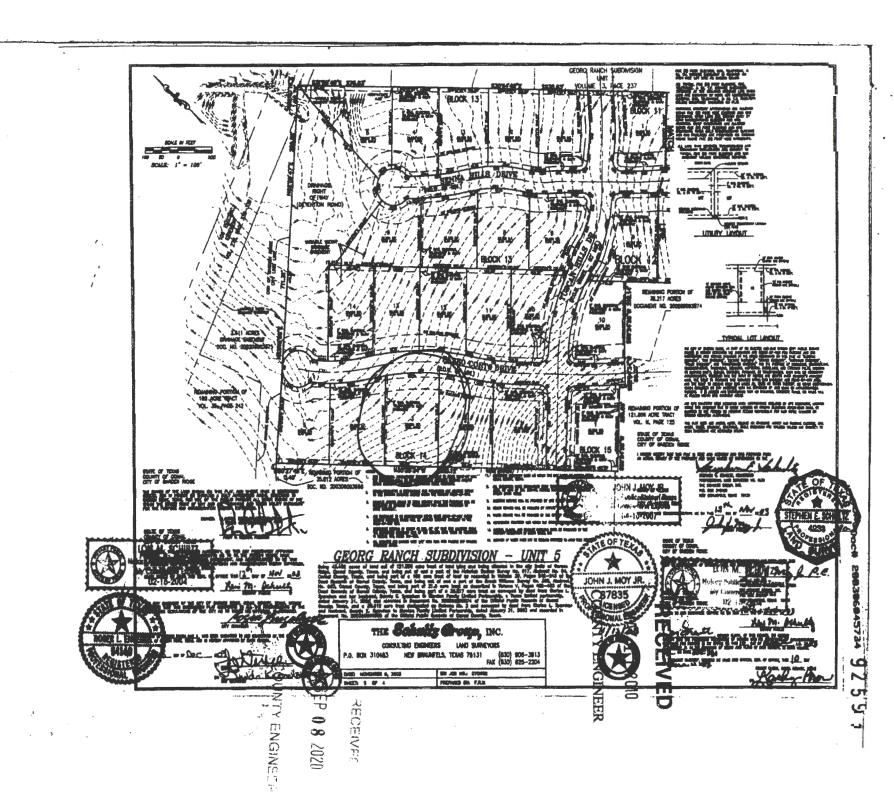
© K-Rain Manufacturing Corporation AN ISO 9001:2000 CERTIFIED COMPANY



- ▶ 3/4<sup>th</sup> Inlet-Replaces all standard rotors.
- 2N1 Adjustable or Continuous Rotation Provides a full range adjustment from 40° to a continuous full circle.
- Patented Arc Set Degree Markings —
   Clearly indicates the current watering pattern and simplifies arc set adjustment.
- Arc Memory Clutch Prevents internal gear damage and returns rotor to its prior setting automatically if nozzle turret is forced past its stop.
- Time Proven Patented Reversing Mechanism Assures continuous reverse and return...over a 20 year history.
- Ratcheting Riser Allows for easy adjustment of your left starting position with a simple turn of the riser.
- Rubber Cover Seals out dirt and increases product durability.
- Wide Selection of Nozzles Including standard and low angle, provides flexibility in system design.
- Optional Check Valve -- Prevents low head drainage.



IRRIGATION SOLUTIONS
WORLDWIDE\*



# CCEO COPY



## **Comal County**

OFFICE OF COMAL COUNTY ENGINEER

## License to Operate

## On-site Sewage Treatment and Disposal Facility

Date Issued: 4/4/2011

Permit Number: 92591

Location Description:

22125 Paseo Corto, Garden Ridge, TX 78266

Lot 3, Block 14, Georg Ranch Unit 5 Subdivision

Type of System:

Aerobic Treatment with Surface Irrigation Discharge

License issued to:

Adam Michael Homes, Ltd

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 Natural Resource Conservation Commission.

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.

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.

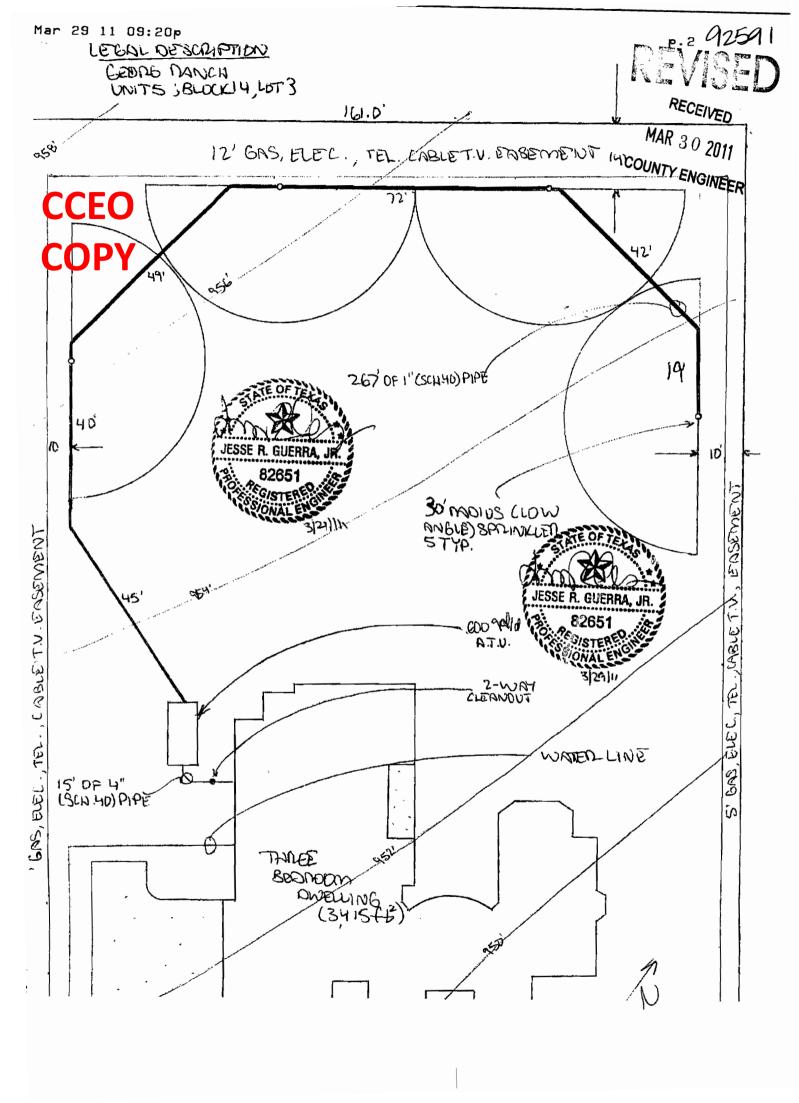
This license to operate is valid for an indefinite period. The holder may transfer it to a succeeding owner, provided the facility has not been remodeled and is functioning properly.

Licensing Authority

Comal County Environmental Health
OS0023773

VIRONMENTAL HEALTH INSPECTOR

ENVIRONMENTAL HEALTH COORDINATOR



From: Ritzen, Brenda

To: <u>"cschreader@gmail.com"</u>

Cc: hoyt@gvtc.com
Subject: Permit 111311

Date: Wednesday, September 9, 2020 4:20:00 PM

Re: Craig & Shelly Schroeder

Georg Ranch Unit 5 Lot 3 Block 14

Application for Permit for Authorization to Construct an On-Site Sewage Facility

Dear Property Owner & Agent,

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



The owner name on the permit application must match the owner name as indicted on the recorded warranty deed. Please add Shelly Schreader to the permit application.



This property does not appear to be located within the Edwards Aquifer Recharge or Contributing Zones. Please revise the permit application accordingly.



Maintain required 20 ft. setback from the edge of the spray area to the property lines.

4. 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 HEALTI

UTHORIZATION TO CONSTRUCT AN 7-13-202 Agent Name Mailing Address 2 Agent Address City, State, Zip City, State, Zip 913-4018 Phone # Phone # CSchreader @ quail.com Email Email M Email All correspondence should be sent to: ☐ Owner ☐ Agent 🏋 Both Mail Method: Unit Subdivision Name Acreage/Legal City GARDEN RIDGE Street Name/AddressZ Type of Development: Single Family Residential Type of Construction (House, Mobile, RV, Etc.) RECEIVED Number of Bedrooms Indicate Sq Ft of Living Area SEP 08 2020 Non-Single Family Residential (Planning materials must show adequate land area for doubling the required land needed for treatment units and disposal area) INEER 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 (Structure Only) Estimated Cost of Construction: \$ Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement? Yes IV No (If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement) Source of Water N. Public Private Well Are Water Saving Devices Being Utilized Within the Residence? 

▼ Yes □ No By signing this application, I certify that: - The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said

- 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.

Signature of Owner

7-13-2020

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

APPLICATION FOR I

VOID

PRIZATION TO CONSTRUCT AN LICENSE TO OPERATE

Planning Materials & Site Evaluation as Required Completed By Host Serdatile
System Description Aerobic with Spray Distribution
Size of Septic System Required Based on Planning Materials & Soil Evaluation
Tank Size(s) (Gallons) 600 GO ATU Absorption/Application Area (Sq Ft) 5067.90
Gallons Per Day (As Per TCEQ Table III) 3 0 0
(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.))  SEP 0 8 2020
Is there an existing TCEQ approved WPAP for the property?  Yes No COUNTY ENGINEER
(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 construct will not be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has be issued for the proposed OSSF until the proposed WPAP has been proposed of the proposed WPAP has been proposed of the proposed OSSF until the proposed WPAP has been proposed of the proposed WPAP.
Is the property located over the Edwards Contributing Zone? Yes No
Is there an existing TCEQ approval CZP for the property? Yes No
(If yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP.)
If there is no existing CZP, does the proposed development activity require a TCEQ approved CZP?   Yes  No
(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to Construct will not be issued for the proposed OSSF until the CZP has been approved by the appropriate regional office.)
Is this property within an incorporated city? Yes  No
If yes, indicate the city: Garden Ridge
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.

Page 2 of 2

## Scale 1"=40

This design complies with all provisions of the existing Edwards Contributing Zone Plan and their is not a recharge feature within 150' of the proposed septic system.

Areas that rock is exposed must be cov a suitable amount of material. Areas th or have been disturbed must be seeded or sodded with a mixture of rye and bermuda grasses or other grass species prior to system operation.

Risers must be permanently fastened to the tank lid or cast into the tank The connection between the riser and the tank lid must be watertight. Risers must be fitted with removable watertight caps and protected against unauthorized intrusions by either a padlock, a cover that can be removed with specialized tools, a cover having a minimum net weight of 29.5 kilograms (65 pounds) set into a recess of the tank lid, or any other means approved by the executive director.

Site Map

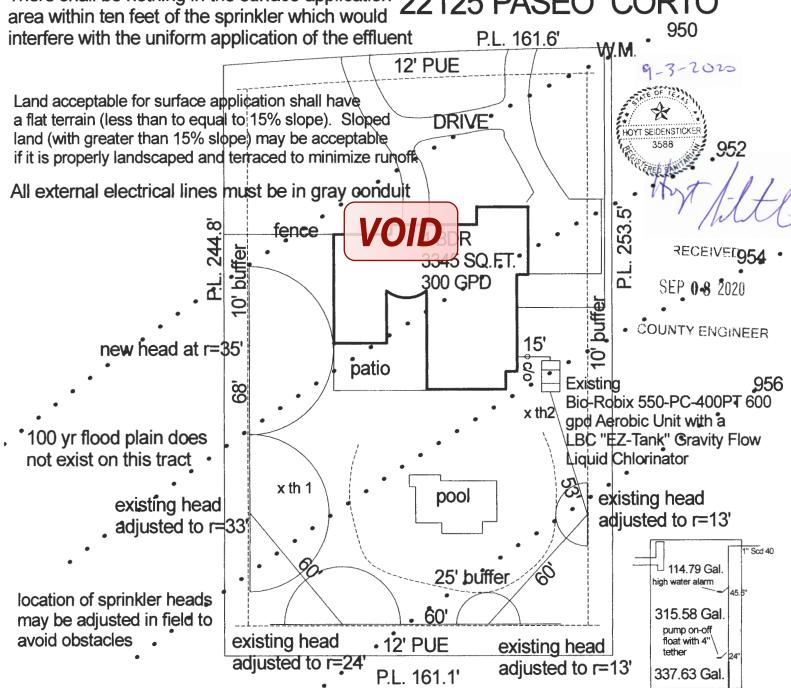
Aerobic with Spray Distribution Craig and Shelly Schreader

Lot: 3 Blk. 14

Georg Ranch Subdivision 22125 Paseo Corto Drive Garden Ridge, Texas 78266 **Comal County** 

hours of 12:00 midnight and 5:00 a.m.

There shall be nothing in the surface application 22125 PASEO COF



TTT/GF# 61784 30.00



12/2010 10 41 12 AM 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.

RECEIVED

SEP 08 2020

WARRANTY DEED WITH VENDOR'S LIEN

Date:

November 4, 2010

COUNTY ENG.

Grantor:

ADAM MICHAEL HOMES, LTD., a Texas limited partnership

Grantor's Mailing Address:

16500 San Pedro Avenue San Antonio, TX 78232

Grantee:

CRAIG SCHREADER and wife, SHELLY SCHREADER

Grantee's Mailing Address:

143 Sable Heights

Garden Ridge TX 78266

Consideration:

Cash and note of even date executed by Grantee and payable to the order of JEFFERSON BANK ("Lender") in the principal amount of Twenty Nine Thousand One Hundred and no/100 Dollars (\$29,100.00). The note is secured by a first and superior vendor's lien and superior title retained in this deed and by a first-lien deed of trust dated the same date as this deed in favor of Lender.

Property (including any improvements):

LOT 3, BLOCK 14, GEORG RANCH SUBDIVISION - UNIT 5, A SUBDIVISION IN THE CITY OF GARDEN RIDGE, COMAL COUNTY, TEXAS ACCORDING TO THE PLAT RECORDED IN VOLUME 14, PAGE 328-331, OF THE DEED AND PLAT RECORDS OF COMAL COUNTY, TEXAS.

Reservations from Conveyance: None

Exceptions to Conveyance and Warranty:

All ad valorem taxes for the current and all subsequent years, zoning ordinances and utility district assessments, if any, applicable to and enforceable against the Property and all conditions, covenants, options, restrictions, easements, charges and liens for assessments, setbacks, encroachments, reservations, and mineral reservations effecting the Property that are shown in the Real Property Records of Comal County, Texas

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.

The vendor's lien against and superior title to the Property are retained until each note described is fully paid according to its terms, at which time this deed will become absolute.

Lender, at Grantee's request, has paid in cash to Grantor that portion of the purchase price of the Property that is evidenced by the note. The first and superior vendor's lien against and superior title to the Property are retained for the benefit of Lender and are transferred to 15 feet 8 2020 without recourse against Grantor.

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

COUNTY ENGINEER

ADAM MICHAEL HOMES, LTD.

By Its Sole General Partner:

Adam Michael Holdings, LLC

By: Jay A, Malzel, Mentber

STATE OF TEXAS COUNTY OF BEXAS

This instrument was acknowledged before me on the \_\_\_\_\_\_ day of November, 2010 by Jay A. Maizel, Member of Adam Michael Holdings, LLC, a Texas limited liability company, on behalf of said company and Adam Michael Holdings, LLC executed this instrument as sole General Partner of Adam Michael Homes, 1 td., a Texas limited partnership, on behalf of said partnership.

[SEAL]

AFTER RECORDING RETURN TO CRAIG SCHREADER 143 Sable Heights San Antonio, TX 78258 Notary Public, State of Texas



Files and Recorded

Official Parison Records

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# OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

		1	
	Date Received	Initials	Permit Number
Instructions:			
Place a check mark next to all items that apply. For iter Checklist <u>must</u> accompany the completed application.	ms that do not apply, plac	ce "N/A". This	OSSF Development Application
OSSF Permit			
Completed Application for Permit for Authorization	n to Construct an On-Site	Sewage Faci	lity and License to Operate
Site/Soil Evaluation Completed by a Certified Site	Evaluator or a Professio	nal Engineer	
Planning Materials of the OSSF as Required by the of a scaled design and all system specifications.	ne TCEQ Rules for OSSF	Chapter 285.	Planning Materials shall consist
Required Permit Fee - See Attached Fee Schedul	е		
Copy of Recorded Deed			
Surface Application/Aerobic Treatment System			
Recorded Certification of OSSF Requiring N	flaintenance/Affidavit to t	he Public	
Signed Maintenance Contract with Effective	Date as Issuance of Lice	ense to Opera	te
I affirm that I have provided all information required constitutes a completed OSSF Development Applic		ment Applica	tion and that this application
01/1/1		7	1/- 1000
Signature of Applicant		/-/	Date
COMPLETE APPLICATION		INCOMPL	ETE APPLICATION
Check No Receipt No	(Mi		rcled, Application Refeused)