

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: _____

OSSF Installer #: _____

1st Inspection Date: _____

2nd Inspection Date: _____

3rd Inspection Date: _____

Inspector Name: _____

Inspector Name: _____

Inspector Name: _____

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)(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)				

Inspector Notes:

**Comal County Environmental Health
OSSF Inspection Sheet**

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8	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If Single Tank, 2 Compartments Provided with Baffle SEPTIC TANK Inlet Flowline Greater than 3" and " T " Provided on Inlet and Outlet SEPTIC TANK Septic Tank(s) Meet Minimum Requirements		285.32(b)(1) (E)285.91(2)285.32(b)(1) (F)285.32(b)(1)(E) (iii)285.32(b)(1)(E)(ii) (II)285.32(b)(1)(E)(ii) (I)285.32(b)(1)(E) (i)285.32(b)(1) (D)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (i)285.32(b)(1) (B)285.32(b)(1) (A)285.32(b)(1)(E)(iv)				
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
10	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
11	SEPTIC TANK Secondary restraint system provided SEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
12	SEPTIC TANK Tank Volume Installed						
13	PUMP TANK Volume Installed						
14	AEROBIC TREATMENT UNIT Size Installed						
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number						
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)				

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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)(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)				
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
24	DISPOSAL SYSTEM Other (describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
25	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC						
26	DRAINFIELD Area Installed						
27	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
28	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
29	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
30	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.)		285.33(c)(2)				
31	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)				

**Comal County Environmental Health
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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.		285.32(c)(1)				
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						
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						
37	PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions						
38	PUMP TANK Secondary restraint system provided						
39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?		285.33(d)(2)(G)(iii)(II) 285.33(d)(2)(G)(iii)(III) 285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(I)				
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed		285.33(d)(2)(G) (i)285.33(d)(2) (A)285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



COMAL COUNTY

ENGINEER'S OFFICE

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

Permit Number: 117163
Issued This Date: 02/29/2024
This permit is hereby given to: George & Irene Saldana

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

665 TRAVIS FOREST DR
BULVERDE, TX 78163

Subdivision: Belle Oaks Ranch
Unit: IX
Lot: 124
Block: 4
Acreage: 0.0000

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
8:25 am, Feb 29, 2024

Date _____

Permit # _____

Owner Name George & Irene Saldana
Mailing Address 8410 Overlook Path
City, State, Zip San Antonio, TX 78249
Phone # 830 249-8098
Email diandra@stwastewater.com

Agent Name South Texas Wastewater Treatment
Agent Address PO Box 1284
City, State, Zip Boerne, TX 78006
Phone # (830) 249-8098
Email diandra@stwastewater.com

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

Subdivision Name Belle Oaks Ranch Unit IX Lot 124 Block 4

Acreage/Legal _____

Street Name/Address 665 Travis Forest Drive City Bulverde Zip 78163

Type of Development:

Single Family Residential

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

Number of Bedrooms 4

Indicate Sq Ft of Living Area 4201

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: \$ 1,160,000.00 (Structure Only)

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

Yes No (If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water Public Private Well

Are Water Saving Devices Being Utilized Within the Residence? Yes No

By signing this application, I certify that:

- The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property.
- 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

Date

1-25-24

* * * **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 South Texas Wastewater Treatment

System Description Aerobic/ Surface Spray

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

Tank Size(s) (Gallons) 750/1000 Absorption/Application Area (Sq Ft) 5054

Gallons Per Day (As Per TCEQ Table III) 360

(Sites generating more than 5000 gallons per day are required to obtain a permit through TCEQ.)

Is the property located over the Edwards Recharge Zone? Yes No

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

Is there an existing TCEQ approved WPAP for the property? Yes No

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

If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP? Yes No

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

Is the property located over the Edwards Contributing Zone? Yes No

Is there an existing TCEQ approval CZP for the property? Yes No

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

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

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

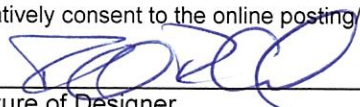
Is this property within an incorporated city? Yes No

If yes, indicate the city: _____

By signing this application, I certify that:

- The information provided above is true and correct to the best of my knowledge.

- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.



Signature of Designer

1/3/24

Date

Page 2 of 2

AFFIDAVIT TO THE PUBLIC

THE COUNTY OF COMAL
STATE OF TEXAS

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities, 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 (TVWC), 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 TVWC. 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.

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):

Lot 124 Block 4 Subdivision Belle Oaks Ranch Unit IX
not in Subdivision: _____ Acres _____ Survey _____

The property is owned by George & Irene Saldana

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.

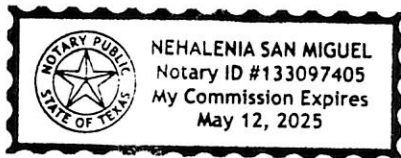
Upon sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the Comal County Engineer's Office.

George Saldana Owner Name [Signature] Owner Signature ●
Irene Saldana Owners Name [Signature] Owners Signature ●

This instrument was acknowledged before me on: 25th Day of January, 2024

Nehalena San Miguel Notary's Printed Name

#133097405 Notary Public, State of Texas ●
Commission Expires: May 12th 2025



Affix Notary Stamp Above

Official County use only



AFFIDAVIT TO THE PUBLIC

THE COUNTY OF COMAL
STATE OF TEXAS

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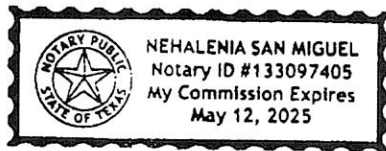
George Saldana Owner Name [Signature] Owner Signature

Irene Saldana Owners Name [Signature] Owners Signature

This instrument was acknowledged before me on: 25th Day of January, 2024

Nehalensia San Miguel Notary's Printed Name

#133097405 Notary Public, State of Texas
Commission Expires: May 12th 2025



Affix Notary Stamp Above

Filed and Recorded
 Official Public Records
 Bobbie Koepf, County Clerk
 Comal County, Texas
 01/31/2024 11:35:28 AM
 MARY 1 Pages(s)
 202406002862

[Signature]



South Texas Wastewater Treatment
PO Box 1284
Boerne, TX 78006

Phone: (830) 249-8098

Date Printed: 12/19/2023

Customer ID: 8015

Site: 665 Travis Forest Dr., Bulverde, TX 78163

County: Comal

Subdivision: Belle Oaks Ranch Phase IX

To: George & Irene Saldana
8410 Overlook Path
San Antonio, TX 78249

Customer's Email: bailey.built.heath@gmail.com

Installed by: Ronald R Graham
Contract with: South Texas Wastewater Treatment
Treatment Type: Aerobic / Disposal: Surface Application
MFG: Jet, Inc. / Brand: J-750- 2 yr / S#:
Disinfectant: Chlorine

Contract Period

through

NO PERMIT ON FILE

Agency: Comal County Environmental
3 visits per year - one every 4 months

System Max Allowance: 360 gallons per day

- I. General: This Work for Hire Agreement (hereinafter referred to as "Agreement") is entered into by and between South Texas Wastewater Treatment and the above referenced name (referred to as Customer). By this agreement, South Texas Wastewater Treatment and its' employees (hereinafter referred to as "Contractor") agree to render services at the site address stated above, as described herein, and the Customer agrees to fulfill his/her/their responsibilities, as described herein.
- II. Effective Dates: This agreement commences and ends as noted above. The date of commencement will be the date the "License to Operate" was issued by the permitting authority. The agreement may or may not commence at the same time as any warranty period of installed equipment, but in no case shall it extend the specified warranty as stated in our PROPOSAL AND CONTRACT FOR SERVICES.
- III. Renewal: This Agreement can renew for an additional period of two (2) years at the same terms and conditions unless either party gives notice of termination a minimum of thirty (30) days prior to end of first agreement period. See Section IV.
- IV. Termination of Agreement: This Agreement may be terminated by either party with thirty (30) days written notice for any reason, including for example, substantial failure to perform in accordance with its terms, without fault or liability of the terminating party. NO REFUNDS. If this Agreement is so terminated, Contractor will be paid at the rate of \$135.00 per hour for any work performed and for which compensation has not been received. Either party terminating this agreement for any reason, including non-renewal, shall notify in writing the appropriate regulatory agency a minimum of thirty (30) days prior to the date of such termination.
- V. Services: Contractor will:
- A. Inspect and perform routine upkeep on the On-Site Sewage Facility (hereinafter referred to as OSSF) as recommended by the treatment system manufacturer, and required by state and/or local regulations approximately every four months.
 - B. Provide a written record of visits to the site by means of an inspection tag attached to or contained in or near the control panel.
 - C. Repair or replace: if repairs or replacement of parts is necessary during a routine service visit, the repair or replacement of parts will be made at that time, if the charges for parts do not exceed \$100.00. If the charges for parts exceed \$100.00, the homeowner will be contacted for approval at the number(s) provided by the homeowner below. If the homeowner cannot be reached for approval while the technician is at the property, the repairs will not be made if they exceed \$100.00. **If the technician receives approval after he leaves the property, a service call charge of \$135.00 to return to the property will be added to the final bill.** If warranted items are required to be replaced within 30 days of installation, labor will not be charged. After 30 days, labor will be charged according to the service agreement.
 - D. Provide sample collection and laboratory testing of TSS and BOD on a yearly basis as required by permit. An additional charge will be incurred by the Customer for this service. (Only required for other than single family residence.)
 - E. Forward copies of this Agreement and all reports to the regulatory agency and the customer within 14 days.
 - F. Visit site in response to Customer's request for unscheduled service within forty-eight (48) hours of the date of notification of said request. **Unless otherwise covered by warranty, costs for such unscheduled responses will be billed to Customer.**
- VI. Disinfection: Not Required. Required. The responsibility to maintain the disinfection device (s) and provide any necessary chemicals is that of the Customer. If the Customer pays for it, Contractor will add 6 tablets of chlorine at routine services (See Section V Sub-section A) **INITIAL**
- VII. Electronic Monitoring is is not included in this Agreement.
- VIII. Performance of Agreement: Commencement of performance by Contractor under this agreement is contingent on the following conditions:
- A. **If this is an initial agreement (new installation):**
 - 1. Contractor's receipt of a fully executed original copy or email of this agreement and all documentation requested by Contractor.
 - 2. Contractor providing the equipment and installation for this OSSF.
 - 3. Contractor's receipt of payment in full for the equipment and installation.
 - 4. Contractor's receipt of payment of the wastewater monitoring fee in accordance with the terms as described in section XIV of this Agreement.
 - B. If this is not an initial agreement (existing system):
 - 1. Contractor's receipt of a fully executed original copy of this agreement and all documentation requested by Contractor.
 - 2. Contractor's receipt of payment of the wastewater monitoring fee in accordance with the terms as described in Section XIV of this agreement
 - C. If the above conditions are not met, Contractor is not obligated to perform any portion of this agreement.
- IX. Customer's Responsibilities: The Customer is responsible for each and all of the following :
- A. **DO NOT ALLOW ALTERATION TO ANY PART OF THE SYSTEM OR SPRINKLER HEAD LOCATIONS. ALTERATIONS WOULD PUT THE SYSTEM OUT OF COMPLIANCE AND WOULD CAUSE THE PROPERTY OWNER ADDITIONAL EXPENSES TO BRING THE SYSTEM BACK INTO COMPLIANCE.**
 - B. Provide all necessary yard or lawn maintenance and the removal of all obstacles, including but not limited to dogs and other animals, vehicles, trees, brush, trash, or debris, as needed to allow the OSSF to function properly, and to allow Contractor safe and easy access to all parts of the OSSF.
 - C. Protect equipment from physical damage including but not limited to that damage caused by insects.
 - D. Maintain a current license to operate, and abide by the conditions and limitations of that license, and all requirements for an on-site sewage facility (OSSF) from the State and/or local regulatory agency, whichever are more stringent, as well as proprietary system's
 - E. Notify Contractor immediately of any and all alarms, and/or any and all problems with, including failure of, the OSSF.

REVISED
8:26 am, Feb 29, 2024

- F. Provide, upon request by Contractor, water usage records for evaluation by Contractor as to the performance of the OSSF
 - G. Allow for samples at both the inlet and outlet of the OSSF to be obtained by Contractor for the purpose of evaluating the OSSF's performance. If these samples are taken to a laboratory for testing, with the exception of the service provided under Section Sub-section D above, Customer agrees to pay Contractor for sample collection and transportation, portal to portal, at a rate of \$135.00 per hour plus the associated fees for laboratory testing
 - H. Prevent the backwash or flushing of water treatment of conditioning equipment from entering the OSSF
 - I. Prevent the condensate from air conditioning or refrigeration units, or the drains of ice makers, from hydraulically overloading the aerobic treatment units. Drain lines may discharge into the surface application pump tank if approved by system designer
 - J. Provide for pumping and cleaning of tanks and treatment units, when and as recommended by Contractor, at Customer's expense
 - K. Maintain site drainage to prevent adverse effects on the OSSF
 - L. Pay promptly and fully, all Contractor's fees, bills, or invoices as described herein
- X. **Access by Contractor:** Contractor is hereby granted an easement to the OSSF for the purpose of performing services described herein. Contractor may enter the property during Contractor's normal business hours and/or other reasonable hours without prior notice to Customer to perform the Services and/or repairs described herein. Contractor shall have access to the OSSF electrical and physical components. **IF SPECIAL ARRANGEMENTS ARE REQUESTED (any advance or prior notice or contacting of owner/resident in order to enter property to perform routine service visit (locked gates, biting dogs, appointment to enter, to call on the way, etc.) or if any part of the system is located behind a locked door (garage, etc.) -THERE IS AN ADDITIONAL CHARGE.** Tanks and treatment units shall be accessible by means of man ways, or risers and removable covers, for the purpose of evaluation as required by State and/or local rules and proprietary system manufacturer. If not an initial agreement (new installation) and this access is not in place or provided for by the customer, the costs for the labor of excavation, and possibly other labor and materials costs, will be required. These costs shall be billed to Customer as an additional service at a rate of \$135.00 per hour, plus materials at list price. Excavated soil shall be replaced as best as Contractor can at the time such service is performed and under no circumstances is Contractor responsible for damages to sod, grass, roots, landscaping, or any unmarked underground items (telephone, television, or electric cables, water air or gas lines, etc.) or for the uneven settling of the soil
- XI. Limit of Liability. Contractor shall not be held liable for any incidental, consequential, or special damages, or for economic loss due to expense, or for loss of profits or income, or loss of use to Customer, whether in contract tort or any other theory. In no event shall Contractor be liable in an amount exceeding the total Fee for Services amount paid by Customer under this Agreement
- XII. Severability. If any provision of this "Proposal and Contract" shall be held to be invalid or unenforceable for any reason, the remaining provisions shall continue to be valid and enforceable. If a court finds that any provision of this "Agreement" is invalid or unenforceable, but that by limiting such provision it would become valid and enforceable, then such provision shall be deemed to be written, construed, and enforced as so limited
- XIII. Fee for Services. The fee for the **basic** Services described in this Agreement is _____. This fee does not include any equipment, materials, or labor necessary for non-warranty repairs and/or any other on-site visit, other than required regularly Scheduled Inspections (see Section V, item A), and will incur a service call fee of 135.00, plus parts and labor.
- XIV. Payment. Payment of Fee for Services for the original term as stated above is to be made as follows
 X. Included in PROPOSAL, AND CONTRACT
 _____ Full amount due upon signature (Required of new Customer)
 _____ Payments of \$_____ due upon receipt of invoice (Payment terms for renewal of agreement)
- Payment of invoice(s) for any other service or repair provided by contractor is due upon receipt of invoice. Invoices are mailed on the date of invoice. All payments not received within thirty (30) days from the invoice date will be subject to a late penalty and a 1.5% per month carrying charge, as well as any reasonable attorney's fees, and all collection and court costs incurred by Contractor in collection of unpaid debt(s). Any check returned to Contractor for any reason will be assessed a \$40.00 returned check fee
- XV. Application of Transfer of payment. The fees paid for this agreement are not refundable, however, the agreement is transferable. Customer will advise subsequent property owner(s) of the state requirement that they sign a replacement agreement authorizing Contractor to perform the herein described Services, and accepting Customer's Responsibilities. This replacement Agreement must be received from Customer first to any past due obligations arising from this Agreement including late fees or penalties, returned check fees, and/or charges for services or repairs not paid within thirty (30) days of invoice date. Any remaining monies shall be applied to the funding of the replacement Agreement. The consumption of funds in this manner may cause a reduction in the termination date of effective coverage per this agreement. See Section IV
- XVI. Entire Agreement. This agreement contains the entire agreement of the parties, and there are no other promises or conditions in any other agreement, oral or written.

R. Bruce Colabe _____ OSSF Installer II, Lic OS0004815, and, OSSF Site Evaluator, Lic OS0012360
 Name Date exp 1/31/2024 exp 12/31/2023

Certified Service Provider for: Jet Inc Member Texas On-Site Wastewater Association and National On-site Wastewater Recycling
 Acceptance of Agreement: The above prices, specifications, and conditions are satisfactory and are hereby accepted. You are authorized to perform the Services as specified. It is understood and agreed that this work is not provided for in any other agreement and no contractual rights arise until this "Agreement" is accepted in writing AND payment is made as outlined above.

[Signature] 1-25-24 _____
 Customer Date E-Mail

CONTACT PHONE NUMBERS:
 #1 210-669-5058
 #2 210-669-5057

Gate Codes for:
 SubDivision _____
 Property _____

South Texas Wastewater Treatment
PO Box 1284
Boerne, TX 78006
830-249-8098

2 January 2024

665 Travis Forest Drive
Belle Oaks Ranch IX
Lot 124 Blk 4
Comal Co. Texas

I, Ronald R. Graham have reviewed the CZP# 13000964 for this location and certify that this design meets all the requirements of the Texas Commission of Environmental Quality OSSF regulations, all provisions of the existing CZP and the orders of Comal County.



Ronald R Graham, RS

SOUTH TEXAS WASTEWATER TREATMENT

Authorized JET Distributor - Home and Commercial - Engineering Services
P O Box 1284 Boerne, Texas 78006 * 830-249-8098 or 1-800-86 WASTE

SITE EVALUATION INFORMATION SHEET

TA French Custom Builder
4571 FM 1102
New Braunfels, TX 78132

SITE: 665 Travis Forest Drive
Belle Oaks Ranch Phase IX
Lot 124 Blk 4
Comal County, Texas

Date Site Evaluation Performed: 5 September 2023

Within 100 year Flood zone No, FIR Map 48453C0585H.
Edwards Recharge Zone: No, USGS map Index map

Profile Holes: 10" – 18" medium to light brown silty clay loam with scattered limestone at surface. Gravely limestone mixed from 8" – 10". Rock more prevalent deeper than 8".

Soil Texture Analysis: Class _____ suitable _____
Soil Structure Analysis: _____ suitable X unsuitable for conventional septic

Structureless _____
Weak _____ Moderate _____ Strong _____
Blocky _____
Platy _____ (unsuitable)
Massive _____ (unsuitable)

Restrictive Horizon: None found: _____ Depth : surface
Rock or Fractured Rock: X
Clay 40% or more _____
Ground Water _____

Brief Description: No sensitive features noted at time of site evaluation. No physical drainage features noted.

This site evaluated by:

South Texas Wastewater Treatment
Ronald R Graham, Site Evaluator
Registration Number OS0019772, State of Texas
PO Box 1284, Boerne, Texas



Ronald R Graham, SE

1-3-24

Date

SOUTH TEXAS WASTEWATER TREATMENT

Authorized JET Distributor - Home and Commercial - Engineering Services
P O Box 1284 Boerne, Texas 78006 * 830-249-8098 or 1-800-86-WASTE www.stwastewater.com

REVISED

9:39 am, Jul 09, 2024

2 January 2024

JET HOME WASTEWATER TREATMENT SYSTEM WITH SURFACE SPRAY DISPOSAL

Bailey Built Custom Homes
5457 FM 1863
PO Box 181
Bulverde, TX 78132

SITE: 665 Travis Forest
Belle Oaks Ranch IX
Blk 4 Lot 124
Comal County, Texas

This design includes an attached drawing No.8015R0 dated 1 JAN 2024

Design Specifications:

Estimated average daily wastewater flow – Primary Residence - 4 bedroom home, 4,201sf, (360gpd), and an RV drop (50 gpd)

Treatment capacity for 650gpd

Pump tank/chlorine contact chamber capacity: 1000 gallons

Design application rate: 0.064 gal./sq.ft./day

Dosing cycle quantity: 120-130 gallons

Number of dosing cycles per day: three (3)

Type of float switch: mercury float switch

Design pressure head: 40 psi max. at sprinkler head

Dosing pump capacity: Little Giant WE20G05P4-20-20.0gpm

NSF Certified Tablet Chlorinator: installed at inlet of pump tank

Safety lid installed on Clarifier

Maximum slope of the field: <15 percent

Means of preventing syphoning: hose bib

Diameter of supply pipe: 1 inch

Offsets: property lines, wells, easements, water lines, structures, swimming pools, ponds, etc shall be strictly adhered to as required by latest Texas Natural Resources

Conservation Commission OSSF Regulations.



8 July 24
[Handwritten signature]

Pump controls must have NEMA (National Manufacturing Association) approval. A PVC union shall be placed above the pump to allow for easy pump removal.

Calculation of field Size

Four bedroom home, 4,201sf with an RV drop (50gpd) --allow 410 GPD effluent flow
Assume an application rate of 15.6 square feet per gallon per day.

$$410 \div 0.064 = 6,406 \text{ sq ft}$$

We are installing 2 sprinkler heads that are capable of 2.0 gallons per minute, each spraying a full circle, with a radius of 30' each. The area covered is

$$A = 5,654 \text{ sq ft.}$$

REVISED

9:40 am, Jul 09, 2024

Pipe and fittings

All pipes and fittings in this system shall be schedule 40 PVC. All joints shall be sealed with an approved solvent-type PVC cement. The forced main shall be 1 inch in diameter. A Little Giant We20G05P4-20 or equivalent high head submersible pump capable of providing at least 8 GPM and providing a 25-40 psi head shall be utilized for pumping effluent. A brass hose bib shall be added near the top of 1" SCH 40 riser pipe to be used as a sampling port and if necessary to lower pressure on the sprinklers.

Site Preparation

Some preparation is required. Some cedar trees may need to be cleared where spray heads cover the area. Sprayed area shall be provided with grass or other suitable ground cover. Home owner is expected to maintain ground cover.

Provisions for Emergencies

A warning system shall be added to the pump tank on a separate circuit from the pump circuit to provide warning (both visual and audible) of a failure of the system. This aerobic system has a warning (both visual and audible) circuit and a 24 month service agreement which includes emergency service.

Flood Prone Areas

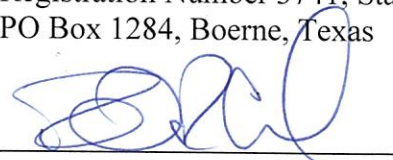
The subject lot is not in flood prone area according to National Flood Insurance Program FIR Map community-panel Number 48453C0585H.

Tank Sizes

The system shall have a JET Model J-750 extended aeration plant external NSF certified tablet chlorinator. The pump tank shall have a capacity of 1000 gal. This tank will not need tees on inlet.

This system designed by:

South Texas Wastewater Treatment
Ronald R Graham, Registered Sanitarian
Registration Number 3741, State of Texas
PO Box 1284, Boerne, Texas



Ronald R. Graham, RS

July 8, 2024
Date



8 Jul 21

Attachments:

Drawing No. 8015R0 dated 1 JAN 2024

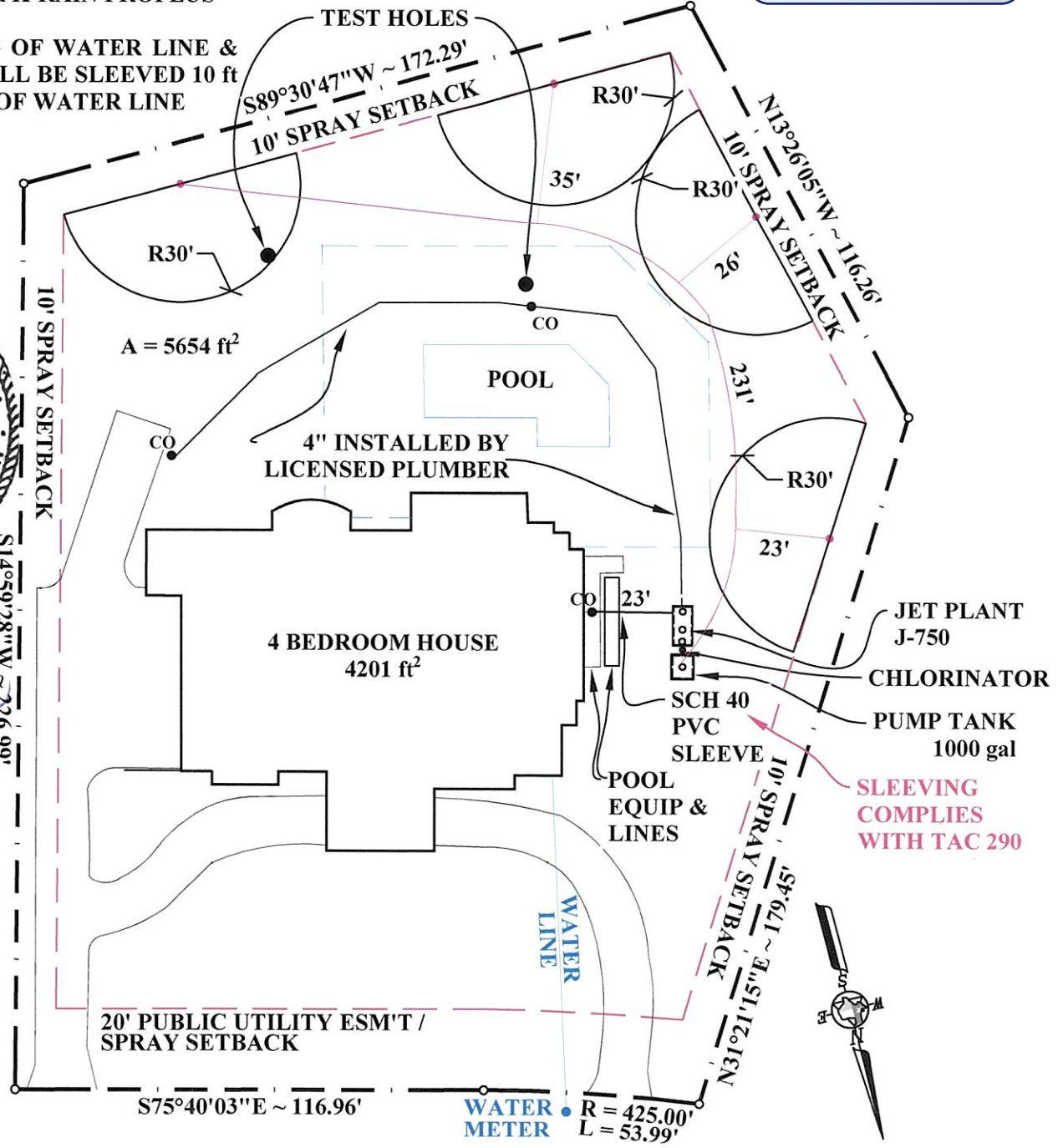
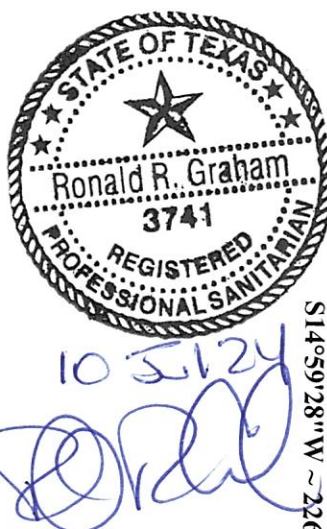
THIS DESIGN MEETS ALL OF THE REQUIREMENTS OF THE TEXAS COMMISSION ON ENVIRONMENTAL QUALITY OSSF REGULATIONS AND THE ORDERS OF COMAL COUNTY AND WILL NOT CAUSE A NUISANCE OR HEALTH HAZARD

- NO PHYSICAL DRAINAGE FEATURE ON PROPERTY WHICH WOULD REQUIRE SPECIAL PROTECTIVE MEASURES
- NO TEST HOLES DUG DUE TO EXTENSIVE SURFACE ROCK

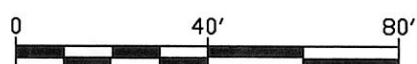
ALL SPRINKLERS ARE HUNTER PGP-ARV-LA OR K-RAIN PROPLUS

ANY CROSSING OF WATER LINE & SPRAY LINE WILL BE SLEEVED 10 ft ON EACH SIDE OF WATER LINE

REVISED
2:16 pm, Jul 11, 2024



TRAVIS FOREST DRIVE



SOUTH TEXAS WASTEWATER TREATMENT
 P.O. BOX 1284
 BOERNE, TX 78006
 830-249-8098
 BY RONALD R. GRAHAM R.S. 3741

665 Travis Forest Drive
 Lot 124, Block 4
 Belle Oaks Ranch Phase IX
 COMAL COUNTY, TEXAS

Rev	Date	By	DRAWING NO.	8015R2
0	01 JAN 2024	RCC	DATE	10 JUL 2024
			SCALE	1" = 40'



RECEIVED
By Brenda Ritzen at 8:28 am, Feb 29, 2024

CITY OF BULVERDE
New Single Family (Residential) Permit

PERMIT# 2023-268

DATE ISSUED 7/31/2023

PROJECT ADDRESS: 665 Travis Forest Drive Bulvere, TX 78163
LOCATION NAME: NSFR
SUBDIVISION: Belle Oaks
OWNER: Bailey Built LLC - Nick Bailey
CONTRACTOR: Bailey Built LLC - Nick Bailey
ADDRESS: PO BOX 181
CITY, STATE, ZIP: Bulverde, TX 78163
PHONE: (210) 336-5951
EMAIL ADDRESS: baileybuilt.nick@gmail.com
CONTACT NAME: Nick Bailey
ALT PHONE: (210) 336-5951

NOTES: Form survey required at plumbing rough in inspection.

Foam insulation.

Bealor 3170

SQ FT: 0.00
PROJECT VALUATION: 0.00
PLAN REVIEW BY:


PERMIT TYPE	AMOUNT DUE
New Single-Family Residential	\$0.00
TOTAL:	\$4061.62

NOTES: Schedule by 2pm for next day inspections

NOTICE

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS STARTED. SEPARATE PERMITS FOR ELECTRICAL, PLUMBING, MECHANICAL, AND PAVING ARE REQUIRED. ALL PERMITS REQUIRE FINAL INSPECTION.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS DOCUMENT AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISION OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.


(SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT)
NICK BAILEY

PRINTED NAME
Bailey Built LLC

PRINTED COMPANY NAME
Clayton Corderas 08/02/2023

ISSUED BY
CITY OF BULVERDE

30360 Cougar Bend, Bulverde Texas 78163
830.438.3612 / 830.980.8832 metro / 830.438.4339 fax
www.bulverdetx.gov

From: [Ritzen, Brenda](#)
To: [Diandra Linares](#)
Subject: RE: 117163 - 665 Travis Forest
Date: Thursday, July 11, 2024 2:19:00 PM
Attachments: [image002.png](#)
[image003.png](#)

Diandra,

The permit file has been updated.

Thank you,



Brenda Ritzen
Environmental Health Coordinator
195 David Jonas Dr.
New Braunfels, TX 78132
DR:OS00007722
830-608-2090
www.cceo.org

From: Diandra Linares <diandra@stwastewater.com>
Sent: Thursday, July 11, 2024 1:53 PM
To: Ritzen, Brenda <rabbjr@co.comal.tx.us>
Subject: RE: 117163 - 665 Travis Forest

This email originated from outside of the organization.

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

- Comal IT

Hey Brenda,

Please see attached.

Thanks!

Diandra Linares

From: [Ritzen, Brenda](#)
To: "[Diandra Linares](#)"; [Olvera, Brandon](#); [Hendry, Clint](#); [Allen, Corey](#); [Connor, James F](#); [Griffin, Kathy](#)
Subject: RE: 117163 - 665 Travis Forest
Date: Tuesday, July 9, 2024 9:33:00 AM
Attachments: [image002.png](#)
[image003.png](#)

Diandra,

Certification is needed on the design that the equivalent protection provided at the sewer and water line crossings will meet the TAC Chapter 290 Rules.

Thank you,



Brenda Ritzen
Environmental Health Coordinator
195 David Jonas Dr.
New Braunfels, TX 78132
DR:OS00007722
830-608-2090
www.cceo.org

From: Diandra Linares <diandra@stwastewater.com>
Sent: Monday, July 8, 2024 7:57 AM
To: [Olvera, Brandon](mailto:Olverb@co.comal.tx.us) <Olverb@co.comal.tx.us>; [Hendry, Clint](mailto:hendrc@co.comal.tx.us) <hendrc@co.comal.tx.us>; [Allen, Corey](mailto:Allenc@co.comal.tx.us) <Allenc@co.comal.tx.us>; [Connor, James F](mailto:connoj@co.comal.tx.us) <connoj@co.comal.tx.us>; [Griffin, Kathy](mailto:griffk@co.comal.tx.us) <griffk@co.comal.tx.us>; [Ritzen, Brenda](mailto:rabbjr@co.comal.tx.us) <rabbjr@co.comal.tx.us>
Subject: 117163 - 665 Travis Forest

This email originated from outside of the organization.

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

- Comal IT

Please see attached updated drawing.

Thanks!

Diandra Linares

THIS DESIGN MEETS ALL OF THE REQUIREMENTS OF THE TEXAS COMMISSION ON ENVIRONMENTAL QUALITY OSSF REGULATIONS AND THE ORDERS OF COMAL COUNTY AND WILL NOT CAUSE A NUISANCE OR HEALTH HAZARD

ALL SPRINKLERS ARE HUNTER PGP-ARV-LA OR K-RAIN PROPLUS

ANY CROSSING OF WATER LINE & SPRAY LINE WILL BE SLEEVED 10 ft ON EACH SIDE OF WATER LINE

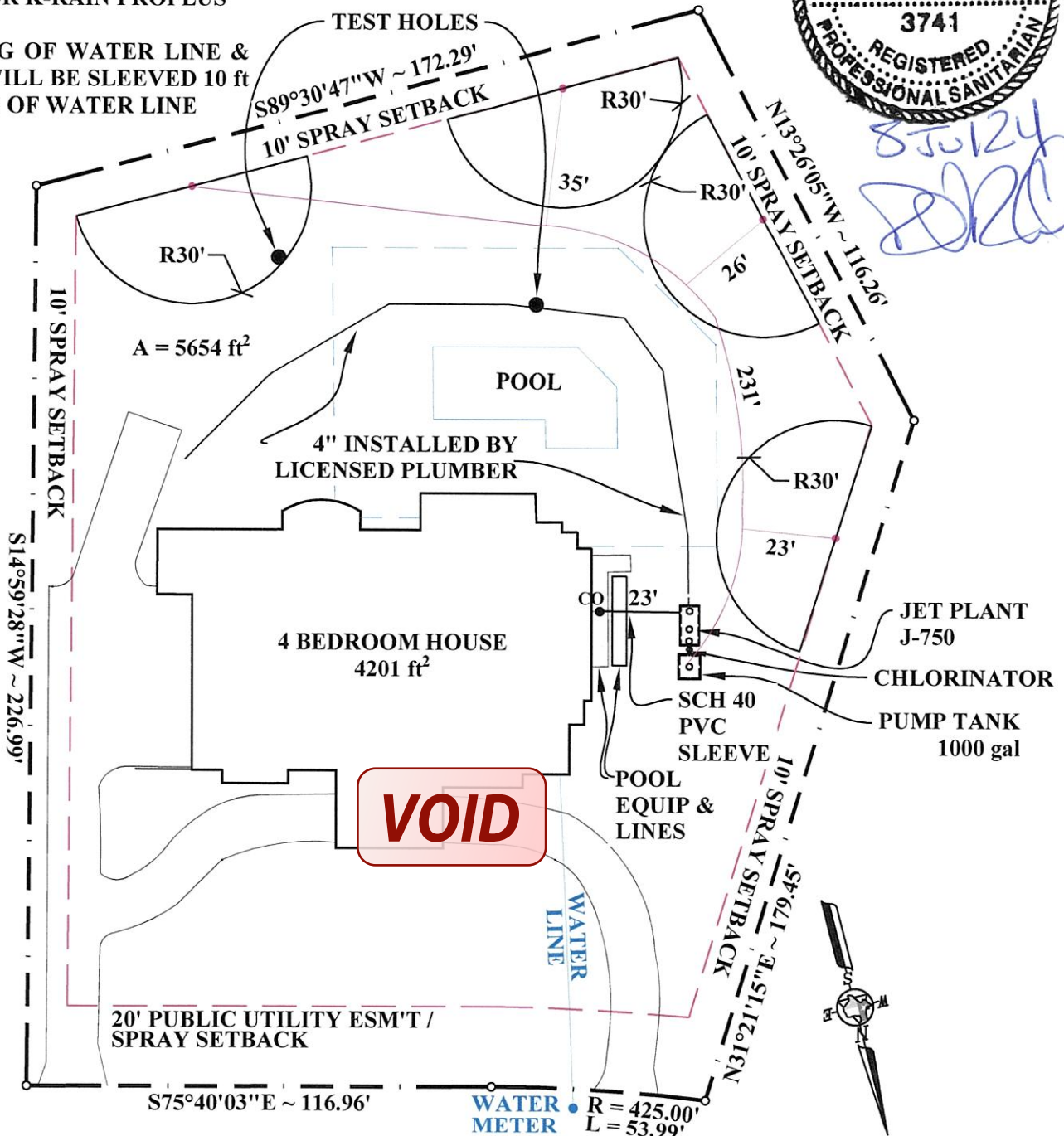
4. NO PHYSICAL DRAINAGE FEATURE ON PROPERTY WHICH WOULD REQUIRE SPECIAL PROTECTIVE MEASURES

5. NO TEST HOLES DUG DUE TO EXTENSIVE SURFACE ROCK

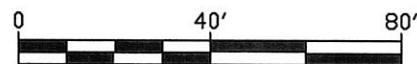
VOID



Handwritten signature and date: 8/5/24



TRAVIS FOREST DRIVE



SOUTH TEXAS WASTEWATER TREATMENT
 P.O. BOX 1284
 BOERNE, TX 78006
 830-249-8098
 BY RONALD R. GRAHAM R.S. 3741

665 Travis Forest Drive
Lot 124, Block 4
Belle Oaks Ranch Phase IX
COMAL COUNTY, TEXAS

Rev	Date	By	DRAWING NO.	8015R2
0	01 JAN 2024	RCC	DATE	08 JUL 2024
			SCALE	1" = 40'

SOUTH TEXAS WASTEWATER TREATMENT

Authorized JET Distributor - Commercial - Engineering Services
PO Box 1284 Buene, Texas 78006 * 830-249-3098 or 1-800-86-WASTE www.stwastewater.com

VOID

2 January 2024

JET HOME WASTEWATER TREATMENT SYSTEM WITH SURFACE SPRAY DISPOSAL

Bailey Built Custom Homes
5457 FM 1863
PO Box 181
Bulverde, TX 78132

SITE: 2007 Ristrello
Vintage Oaks @ The Vineyard
Lot 1426
Comal County, Texas

This design includes an attached drawing No.8015R0 dated 1 JAN 2024

Design Specifications:

Estimated average daily wastewater flow – Primary Residence - 4 bedroom home,
4,201sf, (360gpd)

Treatment capacity for 600gpd

Pump tank/chlorine contact chamber capacity: 1000 gallons

Design application rate: 0.064 gal./sq.ft./day

Dosing cycle quantity: 120-130 gallons

Number of dosing cycles per day: three (3)

Type of float switch: mercury float switch

Design pressure head: 40 psi max. at sprinkler head

Dosing pump capacity: Little Giant WE20G05P4-20-20.0gpm

NSF Certified Tablet Chlorinator: installed at inlet of pump tank

Safety lid installed on Clarifier

Maximum slope of the field: 15 percent

Means of preventing syphoning: hose bib

Diameter of supply pipe: 1 inch

Offsets: property lines, wells, easements, water lines, structures, swimming pools,
ponds, etc shall be strictly adhered to as required by latest Texas Natural Resources

Conservation Commission OSSF Regulations.



3 Jan 24
[Handwritten signature]

VOID

Pump controls must have NEMA (National Manufacturing Association) approval. A
PVC union shall be placed above the pump to allow for easy pump removal.

Calculation of field Size

Four bedroom home, 4,201sf --allow 360 GPD effluent flow
Assume an application rate of 15.6 square feet per gallon per day.

$$360 \div 0.064 = 5,625 \text{ sq ft}$$

We are installing 2 sprinkler heads that are capable of 2.0 gallons per minute, each
spraying a full circle, with a radius of 30' each. The area covered is

$$A = 5,654 \text{ sq ft.}$$

VOID
Pipe and fittings

All pipes and fittings in this system shall be schedule 40 PVC. All joints shall be sealed with an approved solvent-type PVC cement. The forced main shall be 1 inch in diameter. A Little Giant We20G05P4-20 or equivalent high head submersible pump capable of providing at least 8 GPM and providing a 25-40 psi head shall be utilized for pumping effluent. A brass hose bib shall be added near the top of 1" SCH 40 riser pipe to be used as a sampling port and if necessary to lower pressure on the sprinklers.

Site Preparation

Some preparation is required. Some cedar trees may need to be cleared where spray heads cover the area. Sprayed area shall be provided with grass or other suitable ground cover. Home owner is expected to maintain ground cover.

Provisions for Emergencies

A warning system shall be added to the pump tank on a separate circuit from the pump circuit to provide warning (both visual and audible) of a failure of the system. This aerobic system has a warning (both visual and audible) circuit and a 24 month service agreement which includes emergency service.

Flood Prone Areas

The subject lot is not in flood prone area according to National Flood Insurance Program FIR Map community-panel Number 48453C0585H.

Tank Sizes

VOID

The system shall have a JET Model J-1000 generation plant external NSF certified tablet chlorinator. The pump tank shall have a capacity of 1000 gal. This tank will not need tees on inlet.



This system designed by:

South Texas Wastewater Treatment
Ronald R Graham, Registered Sanitarian
Registration Number 3741, State of Texas
PO Box 1284, Boerne, Texas

4 Jan 24
[Handwritten signature]

[Handwritten signature]
Ronald R. Graham, RS

January 4, 2024
Date

Attachments:

Drawing No. 8015R0 dated 1 JAN 2024

NOTES:

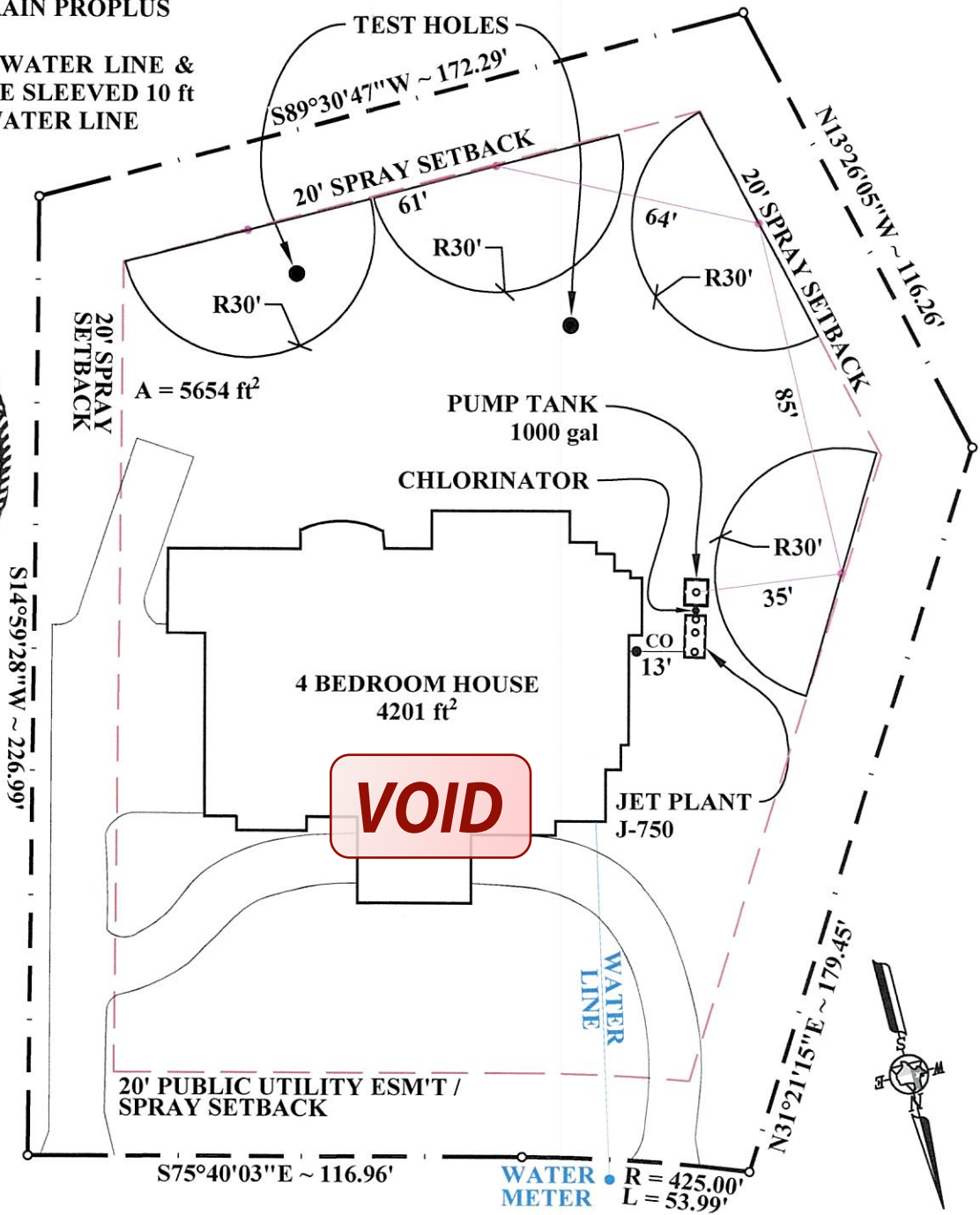
1. THIS DESIGN MEETS ALL OF THE REQUIREMENTS OF THE TEXAS COMMISSION ON ENVIRONMENTAL QUALITY OSSF REGULATIONS AND THE ORDERS OF COMAL COUNTY AND WILL NOT CAUSE A NUISANCE OR HEALTH HAZARD
2. ALL SPRINKLERS ARE HUNTER PGP-ARV-LA OR K-RAIN PROPLUS
3. ANY CROSSING OF WATER LINE & SPRAY LINE WILL BE SLEEVED 10 ft ON EACH SIDE OF WATER LINE

4. NO PHYSICAL DRAINAGE FEATURE ON PROPERTY WHICH WOULD SPECIAL PROTECTIVE MEASURES
5. NO TEST HOLES DUG DUE TO EXTENSIVE SURFACE ROCK

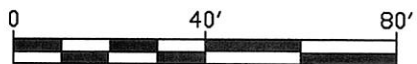
VOID



3 Jan 24
[Signature]



TRAVIS FOREST DRIVE



SOUTH TEXAS WASTEWATER TREATMENT
 P.O. BOX 1284
 BOERNE, TX 78006
 830-249-8098
 BY RONALD R. GRAHAM R.S. 3741

665 Travis Forest Drive
 Lot 124, Block 4
 Belle Oaks Ranch Phase IX
 COMAL COUNTY, TEXAS

Rev	Date	By	DRAWING NO.	
0	01 JAN 2024	RCC	8015R0	
			DATE	01 JAN 2024
			SCALE	1" = 40'

From: [Ritzen, Brenda](#)
To: [Diandra Linares](#)
Subject: Permit 117163
Date: Friday, February 23, 2024 4:24:00 PM
Attachments: [image001.png](#)

**Re: George & Irene Saldana
Belle Oaks Ranch Phase IX Lot 124 Block 4
Application for Permit for Authorization to Construct an On-Site
Sewage Facility (OSSF)**

Diandra :

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

- ✘ The block number is missing from the permit application.**
- ✔ Submit a copy of the approved building permit from the City of Bulverde.**
- ✔ All property owners as identified on the warranty deed must sign the permit application.**
- 4. Revise as needed and resubmit.**

Thank you,



Brenda Ritzen
Environmental Health Coordinator
195 David Jonas Dr.
New Braunfels, TX 78132
DR:OS00007722
830-608-2090
www.cceo.org

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

Date _____ Permit # 117163

Owner Name George & Irene Saldana Agent Name South Texas Wastewater Treatment
Mailing Address 8410 Overlook Path Agent Address PO Box 1284
City, State, Zip San Antonio, TX 78249 City, State, Zip Boerne, TX 78006
Phone # 830 249-8098 Phone # (830) 249-8098
Email diandra@stwastewater.com Email diandra@stwastewater.com



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

Subdivision Name Belle Oaks Ranch Unit IX Lot 124 Block 4

Acreage/Legal _____

Street Name/Address 665 Travis Forest Drive City Bulverde Zip 78163

Type of Development:

Single Family Residential
Type of Construction (House, Mobile, RV, Etc.) House
Number of Bedrooms 4
Indicate Sq Ft of Living Area 4201

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: \$ 1,140,000.00 (Structure Only)

Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement?
 Yes No (If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)



Source of Water Public Private Well

Are Water Saving Devices Being Utilized Within the Residence? Yes No

By signing this application, I certify that:
- The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property.
- 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 _____ Date 1-25-24

VOID

- F. Provide, upon request by Contractor, water usage records for the property as to the performance of the OSSF.
- G. Allow for samples at both the inlet and outlet of the OSSF for the purpose of evaluating the OSSF's performance. If these samples are taken to a laboratory for testing, with the exception of the service provided under Section. Sub-section D above, Customer agrees to pay Contractor for sample collection and transportation, portal to portal, at a rate of \$135.00 per hour plus the associated fees for laboratory testing.
- H. Prevent the backwash or flushing of water treatment of conditioning equipment from entering the OSSF.
- I. Prevent the condensate from air conditioning or refrigeration units, or the drains of icemakers, from hydraulically overloading the aerobic treatment units. Drain lines may discharge into the surface application pump tank if approved by system designer.
- J. Provide for pumping and cleaning of tanks and treatment units, when and as recommended by Contractor, at Customer's expense.
- K. Maintain site drainage to prevent adverse effects on the OSSF.
- L. Pay promptly and fully, all Contractor's fees, bills, or invoices as described herein.

X. **Access by Contractor:** Contractor is hereby granted an easement to the OSSF for the purpose of performing services described herein. Contractor may enter the property during Contractor's normal business hours and/or other reasonable hours without prior notice to Customer to perform the Services and/or repairs described herein. Contractor shall have access to the OSSF electrical and physical components. **IF SPECIAL ARRANGEMENTS ARE REQUESTED (any advance or prior notice or contacting of owner/resident in order to enter property to perform routine service visit, (locked gates, biting dogs, appointment to enter, to call on the way, etc.) or if any part of the system is located behind a locked door (garage, etc.) -THERE IS AN ADDITIONAL CHARGE.** Tanks and treatment units shall be accessible by means of man ways, or risers and removable covers, for the purpose of evaluation as required by State and/or local rules and proprietary system manufacturer. If not an initial agreement (new installation) and this access is not in place or provided for by the customer, the costs for the labor of excavation, and possibly other labor and materials costs, will be required. These costs shall be billed to Customer as an additional service at a rate of \$135.00 per hour, plus materials at list price. Excavated soil shall be replaced as best as Contractor can at the time such service is performed and under no circumstances is Contractor responsible for damages to sod, grass, roots, landscaping, or any unmarked underground items (telephone, television, or electric cables, water air or gas lines, etc.), or for the uneven settling of the soil.

XI. **Limit of Liability:** Contractor shall not be held liable for any incidental, consequential, or special damages, or for economic loss due to expense, or for loss of profits or income, or loss of use to Customer, whether in contract tort or any other theory. In no event shall Contractor be liable in an amount exceeding the total Fee for Services amount paid by Customer under this Agreement.

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

XIII. **Fee for Services:** The fee for the basic Services described in this Agreement is _____. This fee does not include any equipment, materials, or labor necessary for non-warranty repairs and/or any other on-site visit, other than required regularly Scheduled Inspections (see Section V, item A), and will incur a service call fee of 135.00, plus parts and labor.

XIV. **Payment:** Payment of Fee for Services for the original term as stated above is to be made as follows:

- Included in PROPOSAL AND CONTRACT
- Full amount due upon signature (Required of new Customer)
- Payments of \$_____ due upon receipt of invoice. (Payment terms for renewal of agreement.)

Payment of invoice(s) for any other service or repair provided by contractor is due upon receipt of invoice. Invoices are mailed on the date of invoice. All payments not received within thirty (30) days from the invoice date will be subject to a late penalty and a 1.5% per month carrying charge, as well as any reasonable attorney's fees, and all collection and court costs incurred by Contractor in collection of unpaid debt(s). Any check returned to Contractor for any reason will be assessed a \$40.00 returned check fee.

XV. **Application of Transfer of payment:** The fees paid for this agreement are not refundable, however, the agreement is transferable. Customer will advise subsequent property owner(s) of the state requirement that they sign a replacement agreement authorizing Contractor to perform the herein described Services, and accepting Customer's Responsibilities. This replacement Agreement must be received from Customer first to any past due obligations arising from this Agreement including late fees or penalties, returned check fees, and/or charges for services or repairs not paid within thirty (30) days of invoice date. Any remaining monies shall be applied to the funding of the replacement Agreement. The consumption of funds in this manner may cause a reduction in the termination date of effective coverage per this agreement. See Section IV.

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

R. Bruce Cobabe _____ OSSF Installer II, Lic OS0004815, and, OSSF Site Evaluator, Lic OS0012360
 Name Date exp 1/31/2024 exp 12/31/2023

Certified Service Provider for: Jet Inc. Member: Texas On-Site Wastewater Association and National On-site Wastewater Recycling

Acceptance of Agreement: The above prices, specifications, and conditions are satisfactory, and are hereby accepted. You are authorized to perform the Services as specified. It is understood and agreed that this work is not provided in lieu of payment and no contractual rights arise until this "Agreement" is accepted in writing AND payment is made as outlined above.

VOID

[Signature] _____ 1-25-24 _____
 Customer Date E-Mail

CONTACT PHONE NUMBERS:

#1 210-669-5058
 #2 _____

Gate Codes for:

SubDivision _____
 Property _____

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

WARRANTY DEED WITH VENDOR'S LIEN

STATE OF TEXAS §
COUNTY OF COMAL § KNOW ALL MEN BY THESE PRESENTS:
§

Comal Title Co. CF# 22-3582-N

THAT ASHTON COMPANIES LLC, a limited liability company ("Grantor"), for and in consideration of the sum of TEN DOLLARS (\$10.00) and other valuable consideration to the undersigned in hand paid by the Grantee herein named, the receipt of which is hereby acknowledged, and the further consideration of the execution and delivery by GEORGE G. SALDANA, JR. AND WIFE, IRENE L. SALDANA ("Grantee", whether one or more), of that one certain promissory note of even date herewith (the "Note") in the principal sum of \$168,000.00, payable to the order of LONE STAR CAPITAL BANK, N.A. ("Lender"), as therein specified, providing for acceleration of maturity and for attorney's fees, the payment of the Note being secured by the vendor's lien herein retained, and being additionally secured by a deed of trust of even date herewith to DANNY L. BUCK, TRUSTEE, has GRANTED, SOLD AND CONVEYED, and by these presents does GRANT, SELL AND CONVEY unto Grantee the real property (the "Property") described as follows, to-wit:

Lot 124, Block 4, of BELLE OAKS RANCH, PHASE IX, a Subdivision in Comal County, Texas, according to the map or plat of record in Document No. 202206007924, of the Map and Plat Records of Comal County, Texas.

TO HAVE AND TO HOLD the above described premises, together with all and singular the rights and appurtenances thereto in anywise belonging, unto Grantee, Grantee's heirs, executors, successors and assigns forever; and Grantor does hereby bind Grantor, Grantor's heirs, executors, successors and assigns, to WARRANT AND FOREVER DEFEND all and singular the said premises unto Grantee, Grantee's heirs, executors, successors and assigns, against every person whomsoever lawfully claiming or to claim the same or any part thereof.

This conveyance, however, is made and accepted subject to any and all restrictions, reservations, easements, exceptions, covenants and conditions, if any, applicable to and enforceable against the Property as shown by the records of Comal County, Texas.

But it is expressly agreed that the Vendor's Lien, as well as Superior Title in and to the Property, is retained against the Property, premises and improvements until the Note and all interest thereon are fully paid according to the face, tenor, effect and reading thereof, when this Deed shall become absolute.

THAT Lender, at the instance and request of Grantee, having advanced and paid in cash to Grantor herein that portion of the purchase price of the Property as is evidenced by the Note, the Vendor's Lien, together with the Superior Title to the Property, is retained herein for the benefit of Lender and the same are hereby TRANSFERRED AND ASSIGNED to Lender, its successors and assigns, without recourse on Grantor.

Current ad valorem taxes on the Property having been prorated, the payment thereof is assumed by Grantee.

Executed January 20, 2023 to be effective as of January 24, 2023.

GRANTOR:

ASHTON COMPANIES LLC
a limited liability company

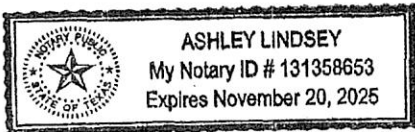
By: [Signature]
Brian Douglas Box, Member

Address of Grantee:

8410 Overlook Path
San Antonio TX 78249

STATE OF TEXAS §
 §
COUNTY OF Comal §

This instrument was acknowledged before me this 20th day of January, 2023 by Brian Douglas Box, member of ASHTON COMPANIES LLC, a limited liability company, on behalf of said limited liability company.



[Signature]
Notary Public, State of Texas

AFTER RECORDING, RETURN TO:

CORRIDOR TITLE, LLC

22-3582-N

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
01/24/2023 04:08:05 PM
TERRI 2 Pages(s)
202306002516

 Bobbie Koepf



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

		117163
<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.

[Handwritten Signature]

Signature of Applicant

1/31/24

Date

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

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