

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**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If Single Tank, 2 Compartments Provided with Baffle SEPTIC TANK Inlet Flowline Greater than 3" and " T " Provided on Inlet and Outlet SEPTIC TANK Septic Tank(s) Meet Minimum Requirements		285.32(b)(1) (E)285.91(2)285.32(b)(1) (F)285.32(b)(1)(E) (iii)285.32(b)(1)(E)(ii) (II)285.32(b)(1)(E)(ii) (I)285.32(b)(1)(E) (i)285.32(b)(1) (D)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (i)285.32(b)(1) (B)285.32(b)(1) (A)285.32(b)(1)(E)(iv)				
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		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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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: 117266
Issued This Date: 03/21/2024
This permit is hereby given to: VALERIE HENNESSEY-SODERLUND & JOSEPH MORGENROTH

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

487 CURVATURA
NEW BRAUNFELS, TX 78132

Subdivision: VINTAGE OAKS AT THE VINEYARD
Unit: 19
Lot: 1737
Block: 0
Acreage: 1.0700

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.



COMAL COUNTY
ENGINEER'S OFFICE

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

		117266
<i>Date Received</i>	<i>Initials</i>	<i>Permit Number</i>

Instructions:

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

OSSF Permit

- Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate
- Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer
- Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist of a scaled design and all system specifications.
- Required Permit Fee - See Attached Fee Schedule
- Copy of Recorded Deed
- Surface Application/Aerobic Treatment System
 - Recorded Certification of OSSF Requiring Maintenance/Affidavit to the Public
 - Signed Maintenance Contract with Effective Date as Issuance of License to Operate

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

Signature of Applicant

3/7/2024

Date

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

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



COMAL COUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

195 DAVID JONAS DR
NEW BRAUNFELS, TX 78132
(830) 608-2090
WWW.CCEO.ORG

Date February 8, 2024

Permit Number 117266

1. APPLICANT / AGENT INFORMATION

Owner Name VALERIE HENNESSEY-SODERLUND & JOSEPH MORGENROTH
Mailing Address 487 CURVATURA
City, State, Zip NEW BRAUNFELS TEXAS 78132
Phone # 830-660-7941
Email valerie.hennessey@icloud.com

Agent Name GREG JOHNSON, P.E.
Agent Address 170 HOLLOW OAK
City, State, Zip NEW BRAUNFELS TEXAS 78132
Phone # 830-905-2778
Email gregjohnsonpe@yahoo.com

2. LOCATION

Subdivision Name VINTAGE OAKS AT THE VINEYARD Unit 19 Lot 1737 Block _____
Survey Name / Abstract Number _____ Acreage _____
Address 487 CURVATURA City NEW BRAUNFELS State TX Zip 78132

3. TYPE OF DEVELOPMENT

Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) REMODEL EXISTING HOME

Number of Bedrooms 5

Indicate Sq Ft of Living Area 3603

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: \$ EXISTING (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 Rainwater Collection

4. SIGNATURE OF OWNER

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 02/24/2024

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

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

Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) PRO-FLO MODEL 5060 Absorption/Application Area (Sq Ft) 5654

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? [X] 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? [X] 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 [X] 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 [X] No

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

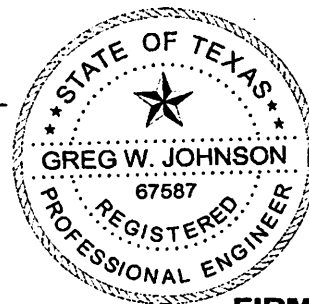
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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

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

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

If yes, indicate the city:



FIRM #2585

By signing this application, I certify that:

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

Signature of Designer (handwritten signature)

Date February 12, 2024

AFFIDAVIT

**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 (OSSF's), this document is filed in the Deed Records of Comal County, Texas.

I

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

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):

19 UND/PHASE/SECTION _____ BLOCK 1737 LOT VINTAGE OAKS AT THE VINEYARD SUBDIVISION

IF NOT IN SUBDIVISION: _____ ACREAGE _____ SURVEY

The property is owned by (insert owner's full name): VALERIE HENNESSEY-SODERLUND & JOSEPH MORGENROTH

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

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

WITNESS BY HAND(S) ON THIS 24th DAY OF February, 2024

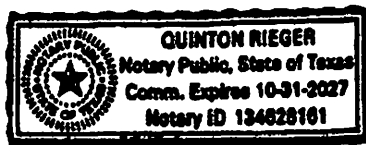
[Signature]
Owner(s) signature(s)

VALERIE HENNESSEY-SODERLUND & JOSEPH MORGENROTH

Joseph Morgenroth
Valerie Hennessey-Soderlund
Owner (s) Printed name (s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 24 DAY OF February, 2024

[Signature]
Notary Public Signature



Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
03/07/2024 08:26:41 AM
LAURA 1 Pages(s)
202406006887

[Signature]
Bobbie Koepf

Greg W. Johnson, P.E.

170 Hollow Oak

New Braunfels, Texas 78132

830/905-2778

February 12, 2024

Comal County Office of Environmental Health

195 David Jonas Drive

New Braunfels, Texas 78132-3760

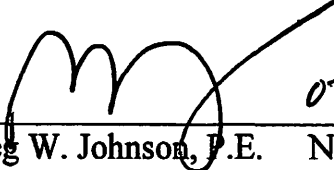
RE- SEPTIC DESIGN
487 CURVATURA
VINTAGE OAKS AT THE VINEYARD, UNIT 19, LOT 1737
NEW BRAUNFELS, TX 78132
VALERIE HANNESSEY-SODERLUND & JOSEPH MORGENROTH

Brandon /Brenda,

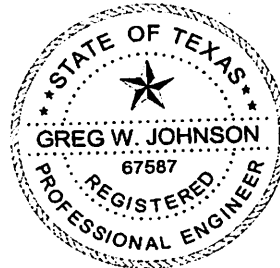
The referenced property is located within the Edwards Aquifer Recharge Zone. This OSSF design will comply with requirements in the WPAP.

Temporary erosion and sedimentation controls should be utilized as necessary prior to construction. If any sensitive feature (caves, solution cavities, sink holes, etc.) is discovered during construction, activities must be suspended immediately and the applicant or his agent must immediately notify the TCEQ Regional Office. After that operations can only proceed after the Executive Director approves required additional engineered impact plans.

Designed in accordance with Chapter 285, Subchapter D, §285.40,285.41, & 285.42, Texas Commission on Environmental Quality (Effective December 29, 2016).

 02/12/24

Greg W. Johnson, P.E. No. 67587 / F#2585
170 Hollow Oak
New Braunfels, Texas 78132 - 830/905-2778



ON-SITE SEWERAGE FACILITY SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed: February 09, 2024

Site Location: VINTAGE OAKS at the VINEYARD, UNIT 19, LOT 1737

Proposed Excavation Depth: N/A

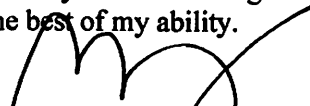
Requirements:

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

SOIL BORING NUMBER <u> </u> SURFACE EVALUATION <u> </u>						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0 <div style="border: 1px solid black; width: 60px; height: 20px; margin-left: 10px; text-align: center;">8"</div> 1 2 3 4 5	IV	CLAY	N/A	NONE OBSERVED	LIMESTONE @ 8"	DARK BROWN

SOIL BORING NUMBER <u> </u> SURFACE EVALUATION <u> </u>						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0 <div style="border: 1px solid black; width: 60px; height: 20px; margin-left: 10px;"></div> 1 2 3 4 5	SAME		AS		ABOVE	

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



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

02/09/24

 Date

OSSF SOIL EVALUATION REPORT INFORMATION

Date: February 12, 2024

Applicant Information:

VALERIE HENNESSEY-SODERLUND &
Name: JOSEPH MORGENROTH
Address: 487 CURVATURA
City: NEW BRAUNFELS State: TEXAS
Zip Code: 78132 Phone: (830) 660-7941

Site Evaluator Information:

Name: Greg W. Johnson, P.E., R.S., S.E. 11561
Address: 170 Hollow Oak
City: New Braunfels State: Texas
Zip Code: 78132 Phone & Fax (830)905-2778

Property Location:

VINTAGE OAKS at the
Lot 1737 Unit 19 Blk ___ Subd. VINEYARD
Street Address: 487 CURVATURA
City: NEW BRAUNFELS Zip Code: 78132
Additional Info.: _____

Installer Information:

Name: _____
Company: _____
Address: _____
City: _____ State: _____
Zip Code: _____ Phone _____

Topography: Slope within proposed disposal area: 3 %

Presence of 100 yr. Flood Zone: YES ___ NO X
Existing or proposed water well in nearby area. YES ___ NO X
Presence of adjacent ponds, streams, water impoundments YES ___ NO X
Presence of upper water shed YES ___ NO X
Organized sewage service available to lot YES ___ NO X

Design Calculations for Aerobic Treatment with Spray Irrigation:

Commercial

Q = _____ GPD _____

Residential Water conserving fixtures to be utilized? Yes X No _____

Number of Bedrooms the septic system is sized for: 5 Total sq. ft. living area 3603

Q gal/day = (Bedrooms +1) * 75 GPD - (20% reduction for water conserving fixtures)

Q = (5 +1)*75-(20%)= 360

Trash Tank Size 397 Gal.

TCEQ Approved Aerobic Plant Size 600 G.P.D.

Req'd Application Area = Q/Ri = 360 / 0.064 = 5625 sq. ft.

Application Area Utilized = 5654 sq. ft.

Pump Requirement 12 Gpm @ 41 Psi (Redjacket 0.5 HP 18 G.P.M. series or equivalent)

Dosing Cycle: _____ ON DEMAND or X TIMED TO DOSE IN PREDAWN HOURS

Pump Tank Size = 768 Gal. 13.3 Gal/inch.

Reserve Requirement = 120 Gal. 1/3 day flow.

Alarms: Audible & Visual High Water Alarm & Visual Air Pump malfunction

With Chlorinator NSF/TCEQ APPROVED

SCH-40 or SDR-26 3" or 4" sewer line to tank

Two way cleanout

Pop-up rotary sprinkler heads w/ purple non-potable lids

1" Sch-40 PVC discharge manifold

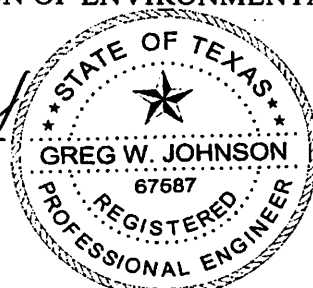
APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

EXPOSED ROCK WILL BE COVERED WITH SOIL .

I HAVE PERFORMED A THOROUGH INVESTIGATION BEING A REGISTERED PROFESSIONAL ENGINEER AND SITE EVALUATOR IN ACCORDANCE WITH CHAPTER 285, SUBCHAPTER D, §285.30, & §285.40 (REGARDING RECHARGE FEATURES), TEXAS COMMISSION OF ENVIRONMENTAL QUALITY (EFFECTIVE DECEMBER 29, 2016)

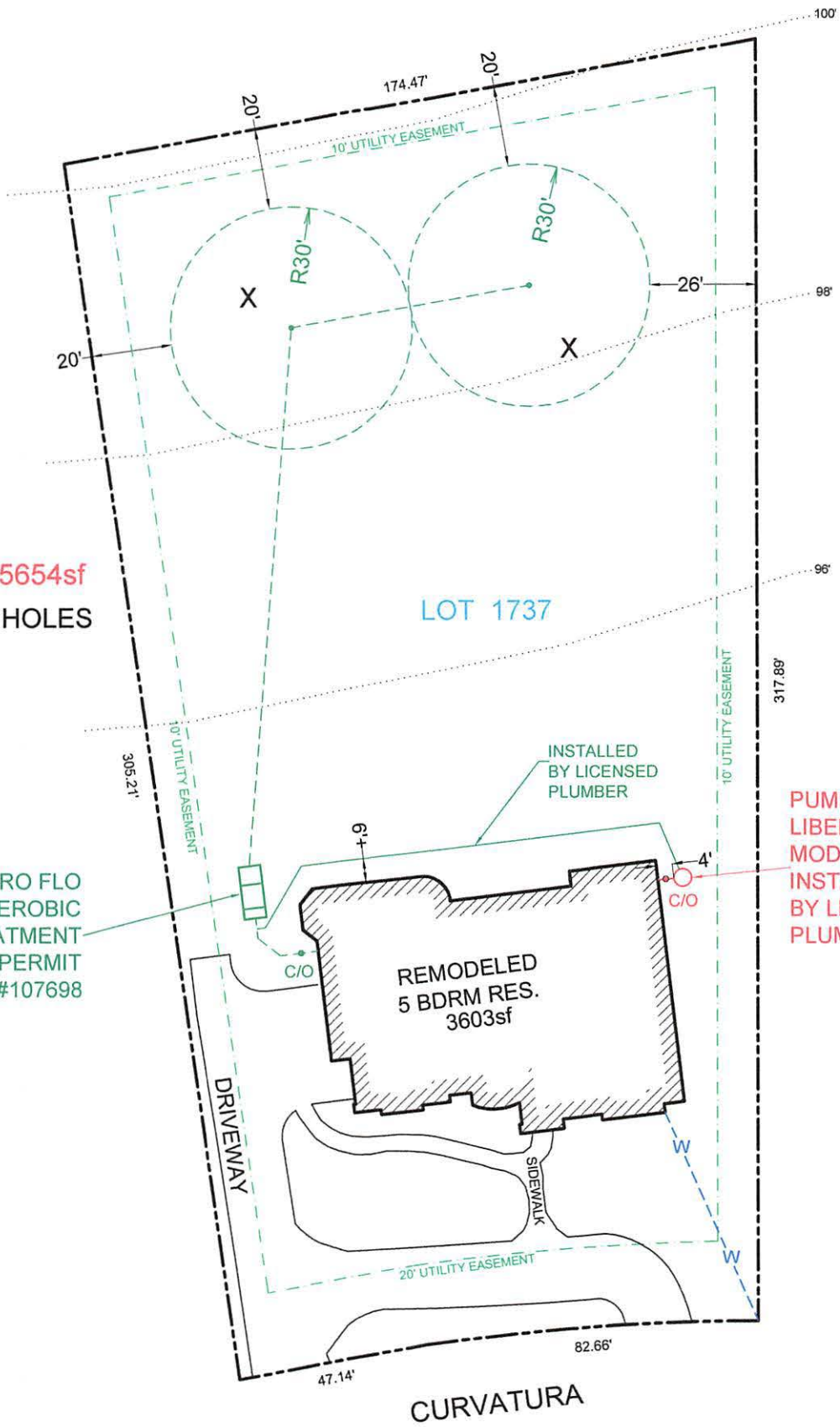
GREG W. JOHNSON, P.E. F#002585 - S.E. 11561

02/12/24
DATE



FIRM #2585

SPRAY AREA = 5654sf
 X= TEST HOLES



PUMP TANK:
 LIBERTY PUMP
 MODEL #P380
 INSTALLED
 BY LICENSED
 PLUMBER

EXISTING PRO FLO
 5060 HCSP AEROBIC
 TREATMENT
 PLANT. PERMIT
 #107698

INSTALLED
 BY LICENSED
 PLUMBER

REMODELED
 5 BDRM RES.
 3603sf

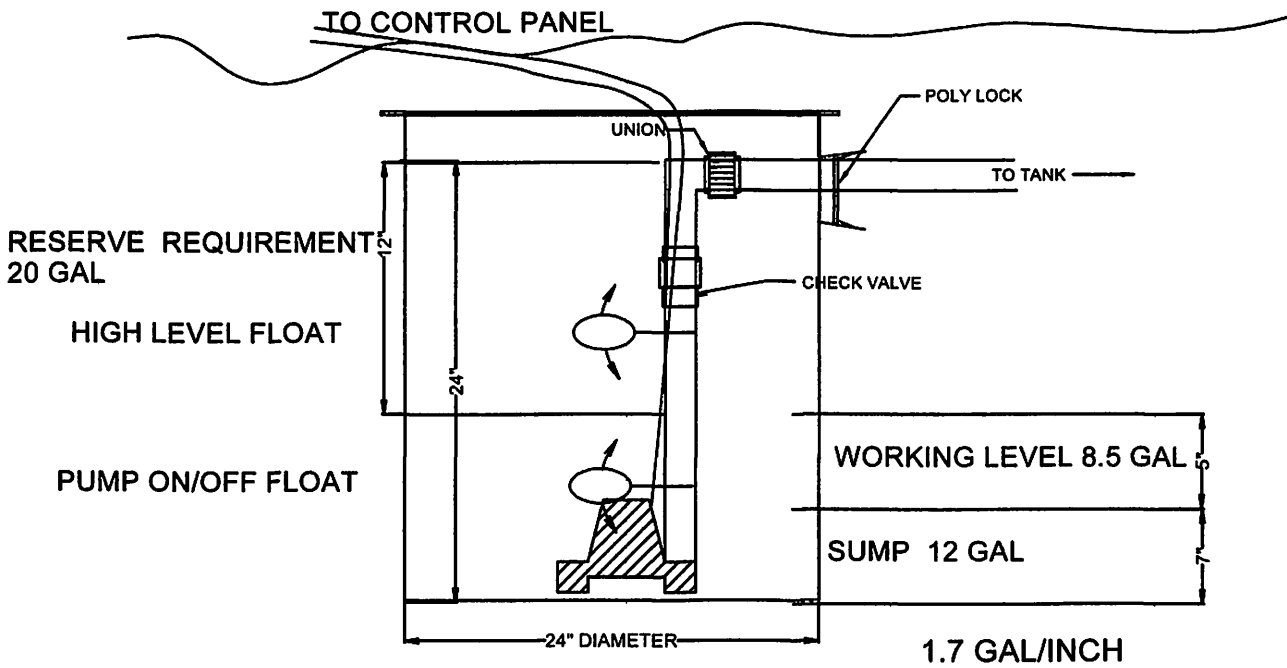
CURVATURA



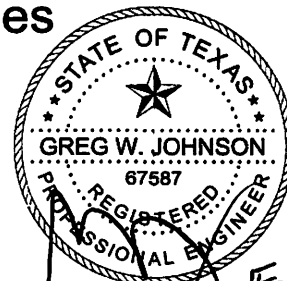
OWNER: VALERIE HENNESSEY-SODERLUND & JOSEPH MORGENROTH		DRAWN BY: EJS III	
STREET ADDRESS: 487 CURVATURA			
LEGAL DESC: VINTAGE OAKS at the VINEYARD	UNIT/SECTION/PHASE: 19	BLOCK:	LOT: 1737
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=40'	DATE: 2/12/2024	REVISED:



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



TYPICAL PUMP TANK CONFIGURATION LIBERTY PUMPS PRO380 Series

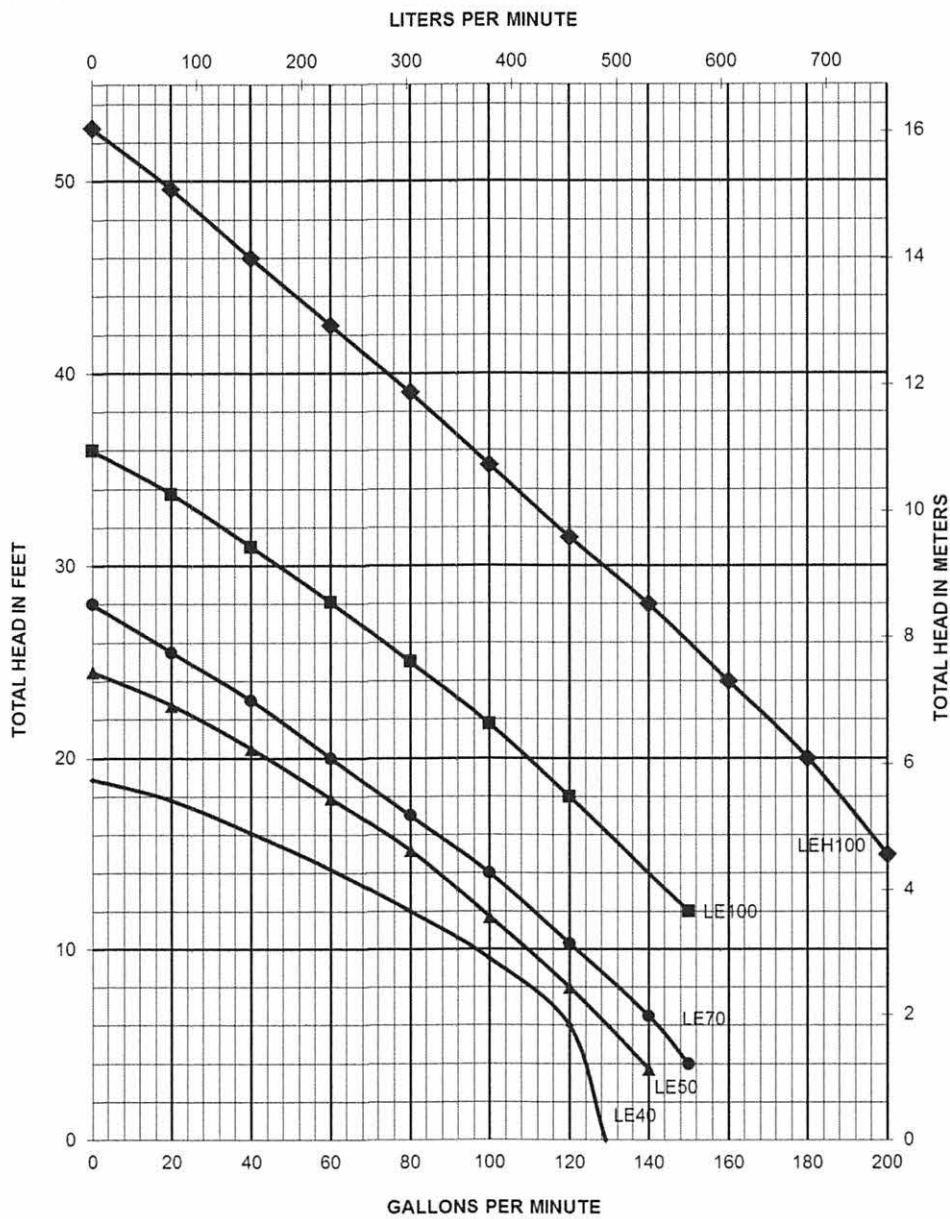
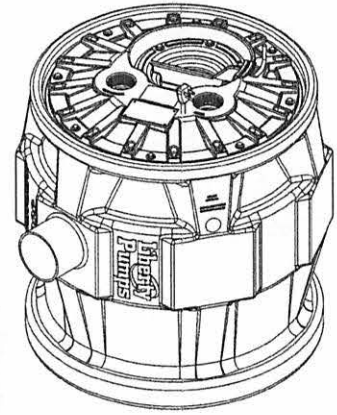


JF2585
02/12/24

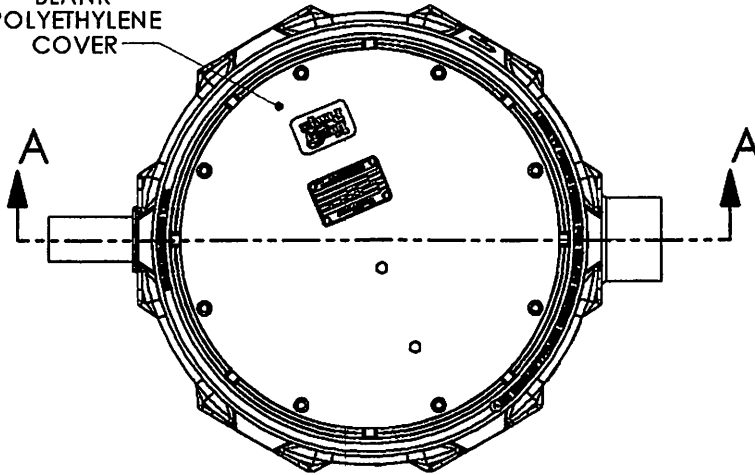


Product Specifications

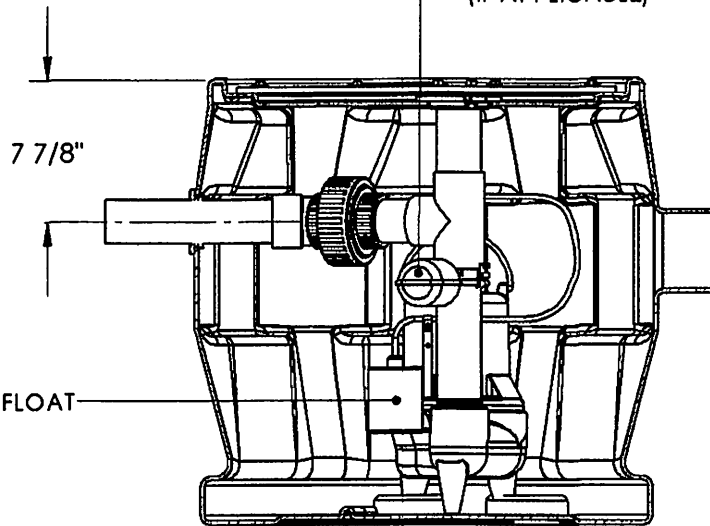
P380-Series Submersible Sewage Simplex Package



BLANK
POLYETHYLENE
COVER



ALARM FLOAT
MOUNTED TO
DISCHARGE PIPE
(IF APPLICABLE)



CONTROL FLOAT

7 7/8"

SECTION A-A
SCALE 1 : 8



PROPRIETARY AND CONFIDENTIAL
THE INFORMATION CONTAINED IN THIS
DRAWING IS THE SOLE PROPERTY OF
LIBERTY PUMPS. ANY REPRODUCTION
IN PART OR AS A WHOLE WITHOUT THE
WRITTEN PERMISSION OF LIBERTY PUMPS
IS PROHIBITED.

P380LE40/50 SIDE DISCHARGE
SERIES DIMENSIONAL

DWG. NO.

SIZE
A

DATE: 10/22/15

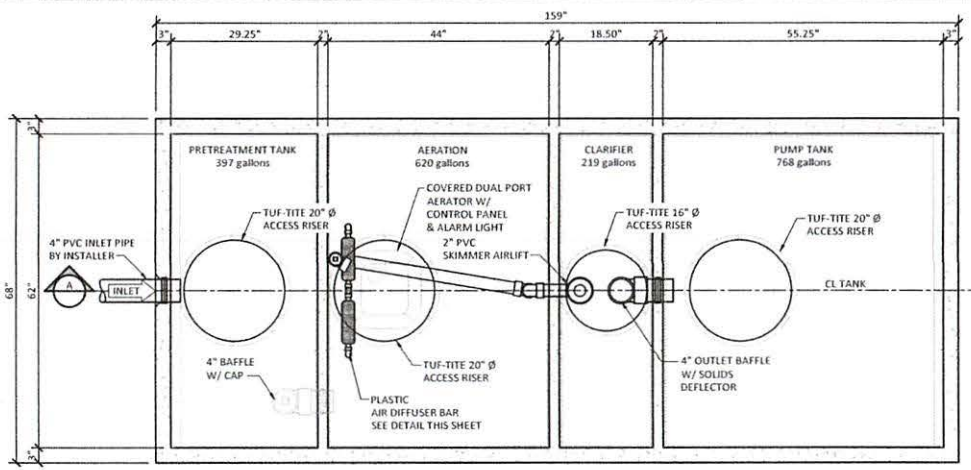
REV
A

APPLICATION

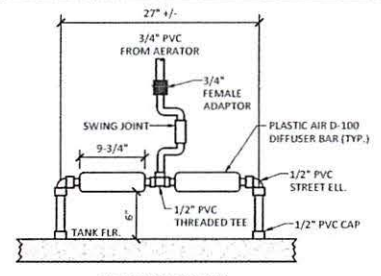
DO NOT SCALE DRAWING

SCALE 1 : 4

SHEET 1 OF 1



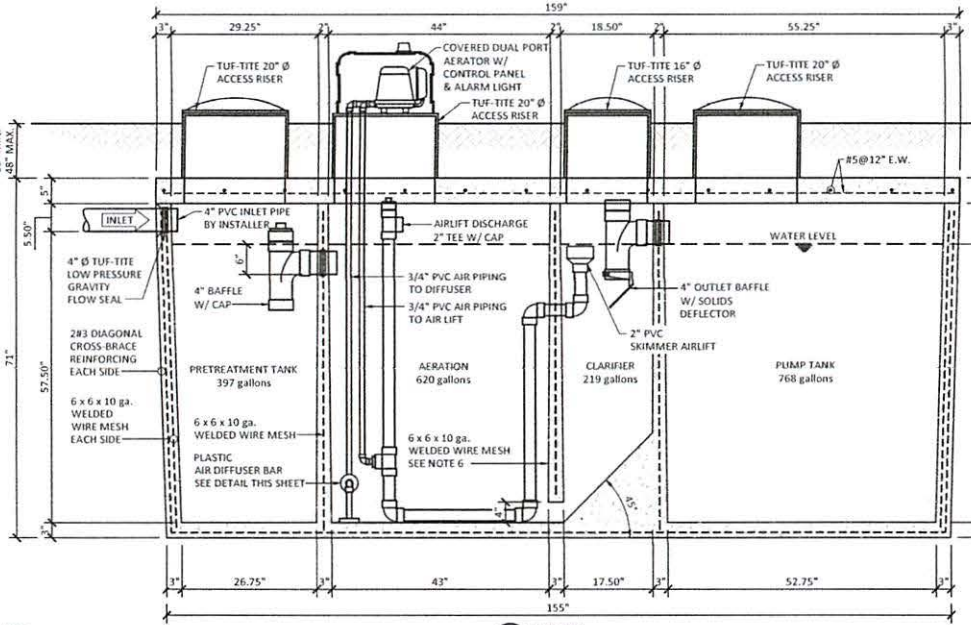
PLAN



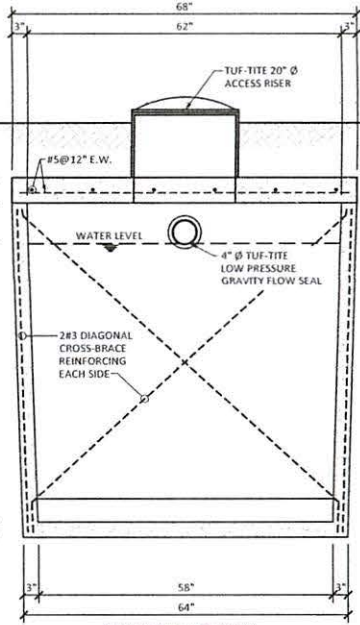
AIR DIFFUSER DETAIL

GENERAL NOTES:

1. ALL CONCRETE TO BE 4000 PSI WITH A AGGREGATE SIZE OF 3/4".
2. ALL INSPECTION HOLES AND TOPS ARE TO BE SEALED WITH A NEOPRENE SEALER.
3. THE SUB GRADE IS TO BE WITHIN 1/2" AND FREE OF FOREIGN OBJECTS.
4. PRETREATMENT TANK & CLARIFIER RISERS MAY BE BELOW GRADE.
5. TANK LID TO BE SEALED WITH ASPHALTIC SEALANT.
6. A 2-1/2" THICK WALL MAY BE USED IN LIEU OF THE CAST IN PLACE INTERNAL WALL BETWEEN THE AERATION & CLARIFIER.
7. THE MANUFACTURER IS REQUIRED TO DEMONSTRATE THAT FAILURE WILL NOT OCCUR BY PHYSICALLY APPLYING LOADS TO THE TANK. THE LOAD APPLIED SHALL BE 1.5 TIMES THE DESIGN DEAD LOAD. SUCH TESTING SHALL BE WITNESSED & CERTIFIED BY A REGISTERED PROFESSIONAL ENGINEER.



SECTION



OUTLET END ELEVATION

TANK DIMENSIONS		
TANK LENGTH (TOP)	159.00	in.
TANK LENGTH (BOTTOM)	155.00	in.
TANK WIDTH (TOP)	68.00	in.
TANK WIDTH (BOTTOM)	64.00	in.
TANK HEIGHT	71.00	in.
FLOOR THICKNESS	3.00	in.
WALL THICKNESS	3.00	in.
LID THICKNESS	5.00	in.
BOTTOM TO INLET	60.50	in.

TANK VOLUMES		
PRETREATMENT CAPACITY	397	gal.
AERATION CAPACITY	620	gal.
CLARIFIER CAPACITY	219	gal.
PUMP TANK CAPACITY	768	gal.
WATER DEPTH	55	in.
TANK CONCRETE VOLUME	86.11	FT ³ 3.15 YD ³
TANK LID CONCRETE VOLUME	27.97	FT ³ 1.04 YD ³
TANK WEIGHT (EMPTY)	42917	lbs.
LID WEIGHT	4195	lbs.
TOTAL TANK WEIGHT (EMPTY)	17112	lbs.

TANK BUOYANCY CALCULATIONS		
TANK DIMENSIONS:		
Length =	159.0	Inches = 13.3 Ft
Width =	68	Inches = 5.7 Ft
Height =	71	Inches = 5.9 Ft
Tank Displacement Volume =	444.2	Cu Ft
Uplift Force @ 62.4 lb/cu ft =	27720.8	Lbs
RESISTING FORCES		
Concrete Tank Deadweight (if empty) =	17112	Lbs
Weight of Insulated Equipment & Hatches =	350	Lbs
Total Tank Weight =	17262	Lbs
WEIGHT OF SOIL OVER TANK		
Length =	13.3	Ft
Width =	5.7	Ft
X Section Area =	75.1	Sq Ft
LESS ACCESS HATCH AREAS		
1	35	Inches = -1.05 Sq Ft
3	20	Inches = -5.91 Sq Ft
Net Area for Soil Cover =	70.1091	Sq Ft
Height of Soil Cover =	18.0	Inches
Soil Cover Volume =	105.2	Cu Ft
Compacted Weight of Soil Cover =	100.00	Lbs/Cu Ft
Weight of Soil Cover =	10516.37	Lbs
Total Downward Force =	27778.37	Lbs
Net Uplift Force =	-57.61	Lbs
Since uplift force is negative, tank will not float when empty with indicated cover.		
Soil skin friction has been neglected. Actual resistance to flotation is greater.		

REVISIONS / ISSUANCE

REV.	DATE	DESC.

WATER ENGINEERS, INC.
 Water & Wastewater Treatment Consultants
 TEXAS BOARD OF PROFESSIONAL ENGINEERS FIRM NO. 2066
 TEL: 281-373-0500
 17210 HUMPHRESTER ROAD
 CYPRESS, TEXAS 77429
 FAX: 281-373-1113

PRO FLO AEROBIC SYSTEMS, LP
 WASTEWATER TREATMENT SYSTEMS
 20222 FM 362
 WALLER, TEXAS 77484

AEROBIC WASTEWATER TREATMENT UNIT
 FOR USE IN HARRIS COUNTY, TEXAS

STATE OF TEXAS
 D. RAY YOUNG
 37068
 LICENSED PROFESSIONAL ENGINEER

D. Ray Young
 12-19-2013

MODEL No.

5060 HCSP

DRAWN BY: BW
 DATE: 12/3/2013
 JOB No.: 4604.12
 SHEET No.:

04 of 04

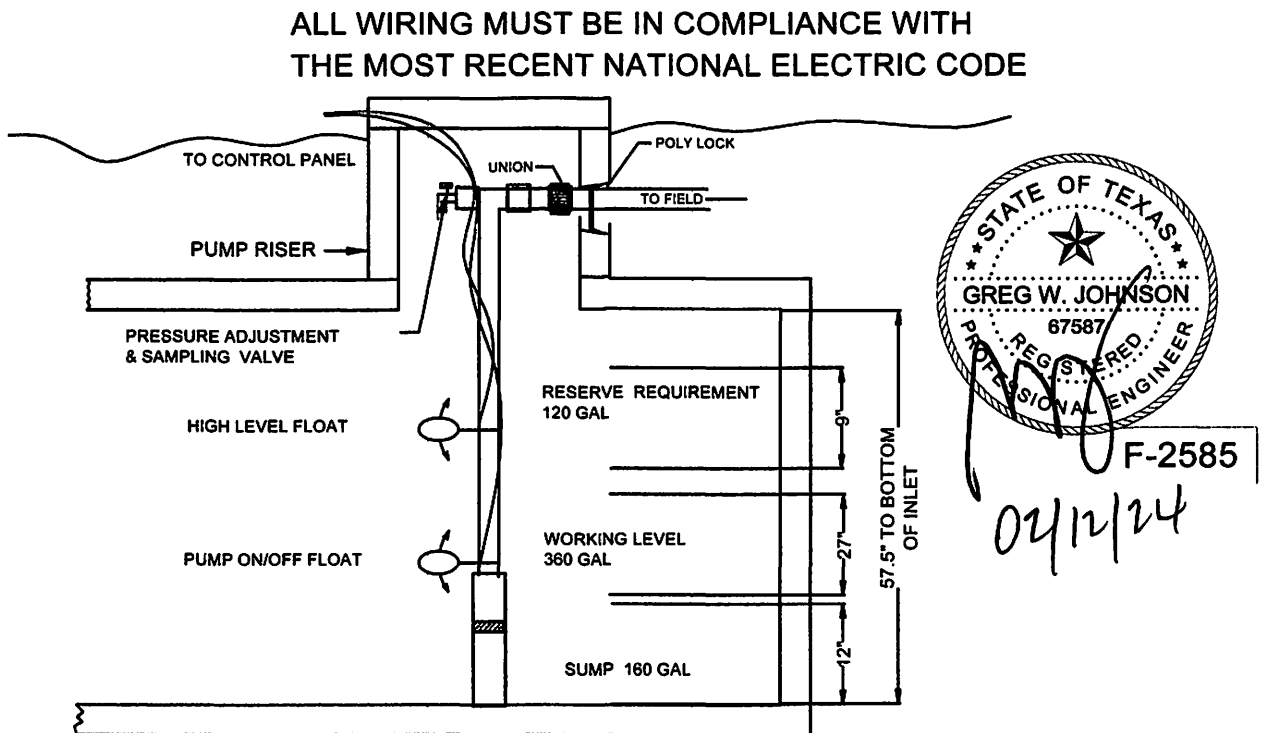
TANK NOTES:

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

Tightlines to the tank shall be SCH-40 PVC.

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

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



TYPICAL PUMP TANK CONFIGURATION
PRO-FLO 768 GAL PUMP TANK

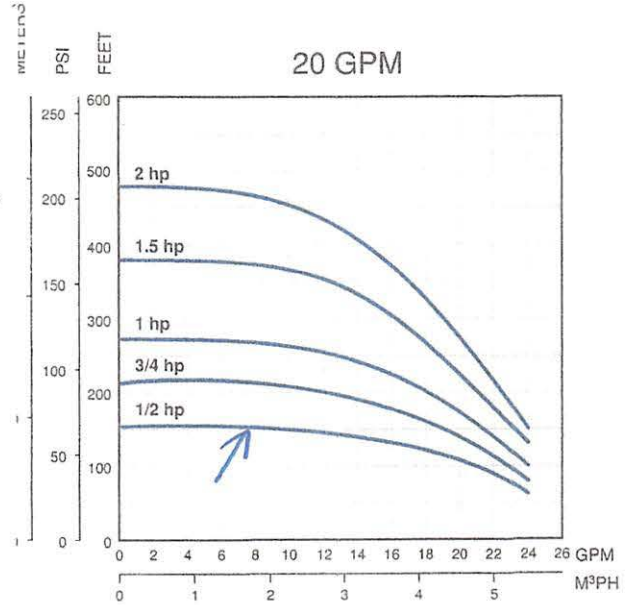
Thermoplastic Performance

LOW ANGLE NOZZLE PERFORMANCE CHART

Nozzle	PSI	Radius	GPM
#1	30	22'	1.5
	40	24'	1.7
	50	26'	1.8
	60	28'	2.0
#3	30	29'	3.0
	40	32'	3.1
	50	35'	3.5
	60	37'	3.8
#4	30	31'	3.4
	40	34'	3.9
	50	37'	4.4
	60	38'	4.7
#6	40	38'	6.5
	50	40'	7.3
	60	42'	8.0
	70	44'	8.6

KRAIN
Pro-Plus

*



Thermoplastic Units Ordering Information

1/2 - 1.5 HP Single-Phase Units

Order No.	Model	GPM	HP	Volt	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	10	1	230	2	31
94741025	10FE15P4-2W230	10	1.5	230	2	46
94742005	20FE05P4-2W115	20	1/2	115	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

Thermoplastic 1/2 - 2 HP Pump Ends

Order No.	Model	GPM	HP	Volt	Wire	Wt.
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	1	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	7
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

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.

SPECIAL WARRANTY DEED

Date: February 13, 2023

Grantor: Valerie Hennessey-Soderlund

Grantor's Mailing Address:

487 Curvatura, New Braunfels, TX 78132

Grantee: Valerie Hennessey-Soderlund and Joseph Morgenroth, wife and husband

Grantee's Mailing Address:

487 Curvatura, New Braunfels, TX 78132

Consideration: To place husband in title as owner with Grantor.

Property (including any improvements):

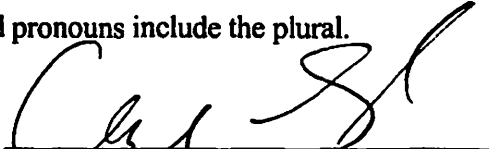
Lot 1737, VINTAGE OAKS AT THE VINEYARD, UNIT 19, situated in Comal County, Texas, according to the map or plat thereof, recorded in Document No. 201806006077, Map and Plat Records of Comal County, Texas.

Reservations From and Exceptions to Conveyance and Warranty: This conveyance, however, is made and accepted subject to the following matters, to the extent same are in effect at this time: any and all restrictions, covenants, assessments, reservations, outstanding mineral interests held by third parties, conditions, and easements, if any, relating to the hereinabove described property, but only to the extent they are still in effect and shown of record in the hereinabove mentioned County and State or to the extent that they are apparent upon reasonable inspection of the property; and to all zoning laws, regulations and ordinances of municipal and/or other governmental authorities, if any, but only to the extent they are still in effect and relating to the hereinabove described property. Ad valorem taxes on said property for the current year, having been prorated, the payment thereof is assumed by Grantee.

Grantor, for the consideration, receipt of which is acknowledged, and subject to the reservations from and 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 wise belonging, to have and hold it to Grantee, Grantee's heirs, executors, administrators, successors or assigns forever. Grantor binds Grantor and Grantor's heirs, executors, administrators and successors to warrant and forever defend all and singular the property to Grantee and Grantee's heirs, executors, administrators, successors and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, except as to the reservations from and

exceptions to conveyance and warranty when the claim is by, through or under Grantor but not otherwise.

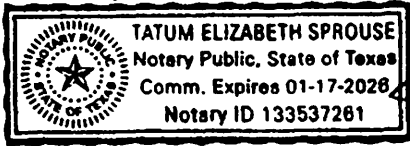
When the context requires, singular nouns and pronouns include the plural.


Valerie Hennessey-Soderlund

ACKNOWLEDGMENT

STATE OF TEXAS §
COUNTY OF Comal §
§

This instrument was acknowledged before me on this the 13 day of February, 2023, by Valerie Hennessey-Soderlund.




Notary Public, State of Texas

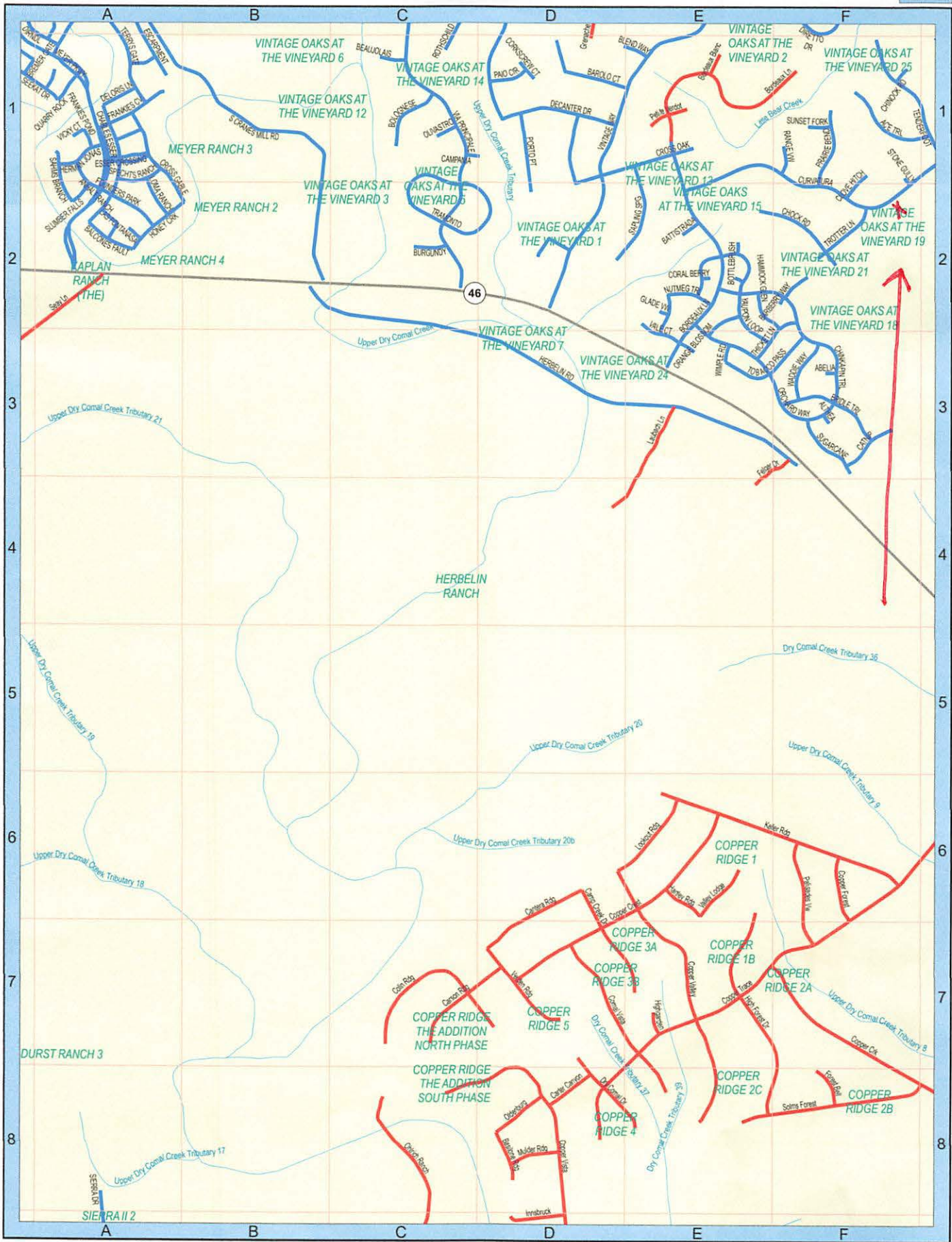
PREPARED IN THE OFFICE OF:
Law Office of Kenneth R. Cooper
14607 San Pedro, Suite 130
San Antonio, TX 78232-4356

AFTER RECORDING RETURN TO:
Valerie Hennessey-Soderlund and
Joseph Morgenroth
487 Curvatura
New Braunfels, TX 78132

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
02/27/2023 04:30:26 PM
TERRI 2 Pages(s)
202306006022

 Bobbie Koepf

SEE PAGE 2



SEE PAGE 57

SEE PAGE 67



Account & Contact Information

Account	Valerie Hennessey	Prepared By	Nicole Loria
Phone	(830) 660-7941	Phone	(855) 560-9909
Address	487 Curvatura New Braunfels, TX 78132	Company Address	9595 Ranch Rd 12 Suite #1 Wimberley, TX 78676

System Details

Asset	PRO-FLO	Description	
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Work Details

Work Type	Service Call	Work Order #	00107298
Subject	Service Call	Description	morning-added another line about a month ago-Corey with Comal County is failing the inspection due to 2 sprayers not functioning correctly. 1 is spraying in neighbor's yard and the other is not rotating the way it should until corrected permit will not be issued

Services

Service	Subject	Description	Quantity	Unit Price	Total Price
Labor	Service Call	Service Results: Replaced bad spray head Cut clogged tubing preventing chlorinator from working. Property has an extra tank on the house extension for the new master bed and bath being pumped into the main tank.	1.00	\$95.00	\$95.00

Parts & Materials

Product	Description	Quantity	Unit Price	Subtotal	Tax Amount	Total
Total Services						\$95.00
Total Parts/Materials						\$0.00
Total						\$95.00

Customer Signature

Signature
 Signed By
 Type Customer
 Date