

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 Drip Irrigation | | 285.33(c)(3)(A)-(F) | | | | |

**Comal County Environmental Health
OSSF Inspection Sheet**

| No. | Description | Answer | Citations | Notes | 1st Insp. | 2nd Insp. | 3rd Insp. |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------------------------------------------------------------------------------------------------|-------|-----------|-----------|-----------|
| 32 | EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart | | 285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3) (B)285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F) | | | | |
| 33 | AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines. | | 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: 117321
Issued This Date: 04/17/2024
This permit is hereby given to: Robbie S. Riley Irrevocable Trust

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

838 RAMBLEWOOD DR
CANYON LAKE, TX 78133

Subdivision: CANYON LAKE VILLAGE
Unit: 6
Lot: 29-30
Block: -
Acreage: 0.9200

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic
Drip Irrigation

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

Call (830) 608-2090 to schedule inspections.

Preliminary Field Check For Drip Systems



ON-SITE SEWAGE FACILITY APPLICATION

Date March 5, 2024

Permit Number 117321

1. APPLICANT / AGENT INFORMATION

Owner Name Robbie S. Riley, Trustee of the Robbie S. Riley Irrevocable Trust

Agent Name Doug Dowlearn R.S.

Mailing Address 9820 N. Bentsen Rd

Agent Address 703 Oak Dr.

City, State, Zip McAllen, TX 78504

City, State, Zip Blanco, TX 78606

Phone # _____

Phone # 210-878-8100

Email _____

Email TXSEPTIC@GMAIL.COM

2. LOCATION

Subdivision Name CANYON LAKE VILLAGE Unit 6 Lot 29 and 30 Block _____

Survey Name / Abstract Number _____ Acreage .9208

Address 838 Ramblewood Dr City Canyon Lake State TX Zip 78133

3. TYPE OF DEVELOPMENT

Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1440

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

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.

Robbie Sue Riley
Signature of Owner

March 5, 2024
Date

***** 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 _____

System Description _____

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

Tank Size(s) (Gallons) _____ Absorption/Application Area (Sq Ft) _____

Gallons Per Day (As Per TCEQ Table III) _____

(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

Date

2/15



202406007788 03/14/2024 02:17:22 PM 1/2

**COUNTY OF COMAL
STATE OF TEXAS**

AFFIDAVIT TO THE PUBLIC

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (TCEQ) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 5.013, give 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 owners 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.

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):

Canyon Lake Village, Unit 6, Lots 29 and 30

The property is owned by (Insert owner's full name):

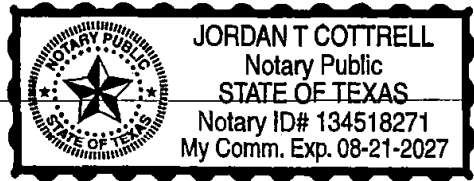
Robbie S. Riley, Trustee of the Robbie S. Riley Irrevocable Trust

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 OSSF may be obtained from Comal County Engineer's Office.

WITNESS BY HAND(S) ON THIS 11 DAY OF March, 2024
Robbie Sae Riley Robbie Sae Riley
Owner(s) signature(s) (PRINTED NAME) /TITLE

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 11 DAY OF March 2024
Jordan Cottrell
Notary Public, State of Texas
Notary's Printed Name: JORDAN COTTRELL
My Commission Expires: 08/21/2027



AFFIDAVIT TO THE PUBLIC

THE COUNTY OF COMAL

STATE OF TEXAS

Before me, the undersigned authority, on this day personally appeared **Robbie S. Riley** who after being duly sworn, upon oath states that he/she is the owner of record of those certain tracts or parcels of land lying and being situated in Comal County, Texas, and being more particularly described as follows:

Canyon Lake Village, Unit 6, Lots 29 and 30

The undersigned further states that the on-site sewage facility for the referenced properties crosses the boundary between the described properties. These properties cannot be sold separately and must be sold as one. Any buyer or transferee is hereby notified of this requirement.

WITNESS BY HAND(S) ON THE 5th DAY OF March
2024

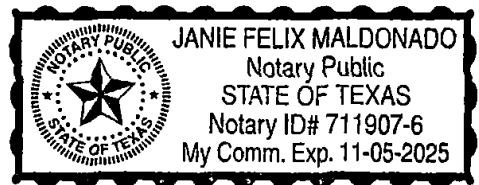
Robbie Sue Riley
Owner(s) signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 5th
DAY OF March, 2024

Janie Maldonado
Notary Public, State of Texas

Notary's Printed Name: Janie Maldonado

My Commission Expires: 11-05-2025



County Clerk Use Only

- Instructions:
-) Document must be completed and Property Owner(s) signature(s) notarized,
 -) Record completed document in the Comal County Clerk's Office,
 -) Submit copy of recorded document to the Comal County Office of Environmental Health

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
03/14/2024 02:17:22 PM
TERRI 2 Page(s)
202406007788



Bobbie Koepf

Baker Septic Service, LLC
15375 Cranes Mill Rd., Canyon Lake, TX 78133
830-899-2971

Septic System Service Agreement

In consideration of payment for this service contract, we will abide by and agree to its terms and conditions:

Name: Robbie S. Riley Address: 838 Ramblewood Dr
Subdivision/ County: CL Village / Comal City, State, Zip: Canyon Lake, TX 78133
Permit # _____ Model # _____ Serial # _____
Phone: 727-301-7741

Initial Two Year Service Agreement & Two Year Limited Warranty
 One Year Service Agreement

RENEWAL _____ NAME TRANSFER _____ ANALYSIS _____

Legal Description:

The Effective date of this initial maintenance contract shall be the date the license to Operate is issued.

For Just to fill this contract will be in effect FROM LITIO - 24/1/5 and will provide the following:

1. An inspection/service call every (4) four months which will include: inspection, adjustments and servicing of the mechanical & electrical components as necessary to insure proper function of the system.
2. An effluent quality inspection consisting of a visual check for color, turbidity, scum, overflow and odor.
3. THE PROPERTY OWNER IS RESPONSIBLE FOR PURCHASING AND KEEPING CHLORINE IN THE CHLORINATOR (IF APPLICABLE). IF THE CHLORINE TEST REVEALS "NO CHLORINE" IN THE SYSTEM, THE PROPERTY OWNER MAY INCURE AN ADDITIONAL COST.
4. If any improper operation is observed (which cannot be corrected at that time) the property owner will be notified immediately of the conditions and the estimated cost.
5. The response time to a complaint by the property owner regarding operation of the system, shall be within 48 hours, from the time of notification. One service call a year, if needed, will be provided with no cost to property owner.
6. ANY PARTS, WARRANTY OR NON-WARRANTY, FREIGHT CHARGES, LABOR OR SERVICE CALLS DUE NOT PAID FOR REMAIN THE PROPERTY OF BAKER SEPTIC SERVICE, LLC AND COULD RESULT IN REPOSSESSION OF PARTS BY BAKER SEPTIC SERVICE, LLC.
7. THE SINGING OF THIS SERVICE AGREEMENT QUTHORIZES BAKER SEPTIC SERVICE, LLC TO ENTER THE PROPETY TO EXECUTE ALL TERMS OF THIS CONTRACT.

BAKER SEPTIC SERVICE, LLC, WILL WARRANTY INSTALLAION of the septic system according to state and county regulations and the designs approved by the county. HOMEOWNER WILL BE RESPONSIBE FOR SERVICE CALL, LABOR, AND SHIPPING COSTS ON ANY "WARRANTED PARTS" EXCHANGED DURING WARRANTY. All other component will be according to manufacturer's warranties. IMPORTANT: As Baker Septic Service, LLC cannot control what or how much effluent goes into this septic system, we cannot warranty how the system will function. Refer to manufacturers or installers instructions for suggestions on septic operation. This service agreement does not cover the cost of service call, labor or materials that are required or parts out of warranty, the failure to maintain electrical power to the system, sprinklers that are broken, leaking, stopped-up or otherwise mal-functioning; or sewage flows exceeding the hydraulic/organic design capabilities and the input of non-biodegradable materials (solvent, grease, oil, paints, etc.), or any usage contrary to the requirements as advised by authorized service representative. Laboratory test work is available at an additional coast. Chlorine, filters, or parts that are out of warranty are available at a reasonable cost.

This contract does not include the pumping of a tank or of any compartment of a tank, or settlement of soil on or around any part of the system regardless of reason:

Violations of the warranty also include: Disconnecting the alarm, restricting ventilation to the aerator, over loading the system above its rated capacity; or flooding by external means. Rodent, Insect or Fire Ant damage or any other form of unusual abuse is a violation.

A renewal service contract should be activated (30) thirty days before expiration of existing contract. We will contact property owner prior to expiration of existing contract.

Serviced by: Baker Septic Service, LLC

Maintenance Provider ME0002093

(x) Robbie S Riley Print Name (x) Robbie Sue Riley Date: March 5, 2024
Property Owner Signature

(x) [Signature] Date: 3-25-24 Authorized Service Representative

Date: 3/25/2024

Applicant Information:

Name: Robbie S. Riley, Trustee of the Robbie S. Riley Irrevocable Trust

Address: 9820 N. Bentsen Rd

City, State & Zip Code: McAllen, TX 78504

Phone:

Email:

Site Evaluator Information:

Name: Douglas R. Dowlearn

Company: D.A.D. Services, Inc.

Address: 703 Oak Drive

City, State & Zip: Blanco, TX 78606

Phone: (210)240-2101 Fax: (866)260-7687

Email: txseptic@gmail.com

Property Location:

Subdivision: Canyon Lake Village Unit: 6 Lot: 29 and 30

Street/Road Address: 838 Ramblewood Dr

City: Canyon Lake Zip: 78133

Additional Info: Comal County

Installer Information:

Name:

Company:

Address:

City, State & Zip:

Phone: Fax:

| Depth | Texture Class | Soil Texture | Structure (For Class III – blocky, platy or massive) | Drainage (Mottles/Water Table) | Restrictive Horizon | Observation |
|-----------------------|---------------|----------------------------------|------------------------------------------------------|--------------------------------|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Soil Boring #1 60" | III | 0-3" Clay Loam 3" + Limestone | Blocky | <30% Gravel | 3"+ Limestone | CLEAR SURFACE ROCK AND BOULDERS FROM DRAINFIELD AREA, AND ENSURE THAT THERE IS AT MINIMUM 12" OF SUITABLE SOIL BETWEEN THE BOTTOM OF THE DRIP LINES, AND THE RESTRICTIVE HORIZON. CLASS II SOIL MAY NEED TO BE IMPORTED IN ORDER TO MAINTAIN THE MINIMUM 12" OF SOIL BETWEEN THE BOTTOM OF THE DRIP LINES AND RESTRICTIVE HORIZON |
| Soil Boring #2 60" | | Same as above | | | | |

DESIGN SPECIFICATIONS

Application Rate (RA): 0.2

OSSF is designed for: 3 Bedroom 1440 Sq. Ft House

240 Gallons per day required

An aerobic treatment/drip disposal system is to be utilized based on the site evaluation.

1200 sq. ft. disposal area required

600 gallon/day aerobic tank required

Calculations: Absorption Area: Q/RA= 240/0.2= 1200 Sq. Ft.

FEATURES OF SITE AREA

Presence of 100-year flood zone: NO

Existing or proposed water well in nearby area: NO

Presence of adjacent ponds, streams, water impoundments: NO

Presence of upper water shed: NO

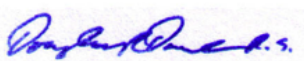
Organized sewage service available to lot: NO

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability. The site evaluation and OSSF design are subject to approval by the TCEQ or the local authorized agent. The planning materials and the OSSF design should not be considered final until a permit to construct has been issued.

Site Evaluator:

NAME: Douglas R. Dowlearn, R.S.

Signature:



License No. OS9902 – Exp. 6/30/2026

TDH: #2432 – Exp. 2/28/2025

D.A.D SERVICES, INC.
DOUG DOWLEARN
PO BOX 212, BULVERDE, TX 78163
Designed for:
Riley Robbie S Irrvcbl Trst 2-08-2018

The installation site is on lot 29-30 of the Canyon Lake Village 6 Subdivision in Comal County, TX. The proposed OSSF will treat the wastewater from a 3 bedroom (1440 sq. ft.) residence. The proposed method of wastewater treatment is aerobic treatment with drip irrigation. This method was chosen because of unsuitable soil conditions.

PROPOSED SYSTEM:

A 3" or 4" PVC pipe will discharge from the structure to a Pro Flo 600 SLPT aerobic treatment plant, containing a 447 gallon pre-treatment tank, a 600 gpd aerobic treatment plant, and a 796 gallon pump tank equipped with a 20 gpm submersible pump. The pump is activated by a time controller allowing the distribution 8 times per day with a 10 minute run time per dose, with float switches set to pump 240 gallons per day. A high level audible and visual alarm will activate should the pump fail. Distribution from the pump is through a self flushing 100 micron, 140 mesh disc filter, then through a 1" SCH-40 manifold to a 600 L.F. drip tubing field, with drip lines set approximately two feet apart with 0.61 gph emitters set every two feet, as per the attached schematic. A threaded union will be installed in the pump tank on the supply manifold to the drip field, and a pressure regulator will be installed on the supply manifold to maintain a pressure of 30 psi. A 1" SCH-40 return line is installed to periodically flush the system by cycling a 1" ball valve. Solids caught in the spin filter are flushed each cycle back to the pre-treatment tank. Vacuum breakers installed at the highest point on each manifold will prevent siphoning of effluent from higher to lower parts of the field. The placement of the drip tubing will be on soil that has been scarified, and enough class II soil will be added so that there is 12" of soil under the drip tubing. The tubing will be covered with 6" of Class II soil.

DESIGN SPECIFICATIONS:

Daily Waste Flow: 240 gpd
Application rate: 0.2
Application area required: $240/.2 = 1200$ ft. sq.
Application area utilized: 1200 sq. ft.
Pump tank reserve capacity: 80 gal minimum



A handwritten signature in blue ink, appearing to read "Douglas R. Dowlearn", positioned below the professional seal.

SYSTEM COMPONENTS:

SCH 40 PVC sewer line
Pro Flo 600 SLPT
 447 gallon pre treatment tank
 600 gpd aerobic treatment plant
 796 gallon pump tank with timed controls
 C1 Series, 20Xgpm - 0.5hp/115V, Model No. 20C1X-05P4-2W115 (or equivalent)
1" purple PVC supply line
30 PSI pressure regulator - Model PMR30MF
Netafim Bioline Drip tubing

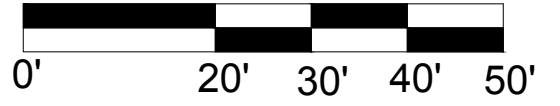
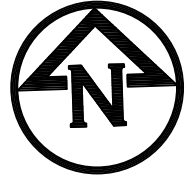
LANDSCAPING:

The native vegetation in the distribution area should consist of low level shrubs, plains grass, bluestem or bermuda. The entire area of the drip disposal must be covered with a ground cover such as grass seed or sod prior to the final inspection.

REVISED

3:14 pm, May 07, 2024

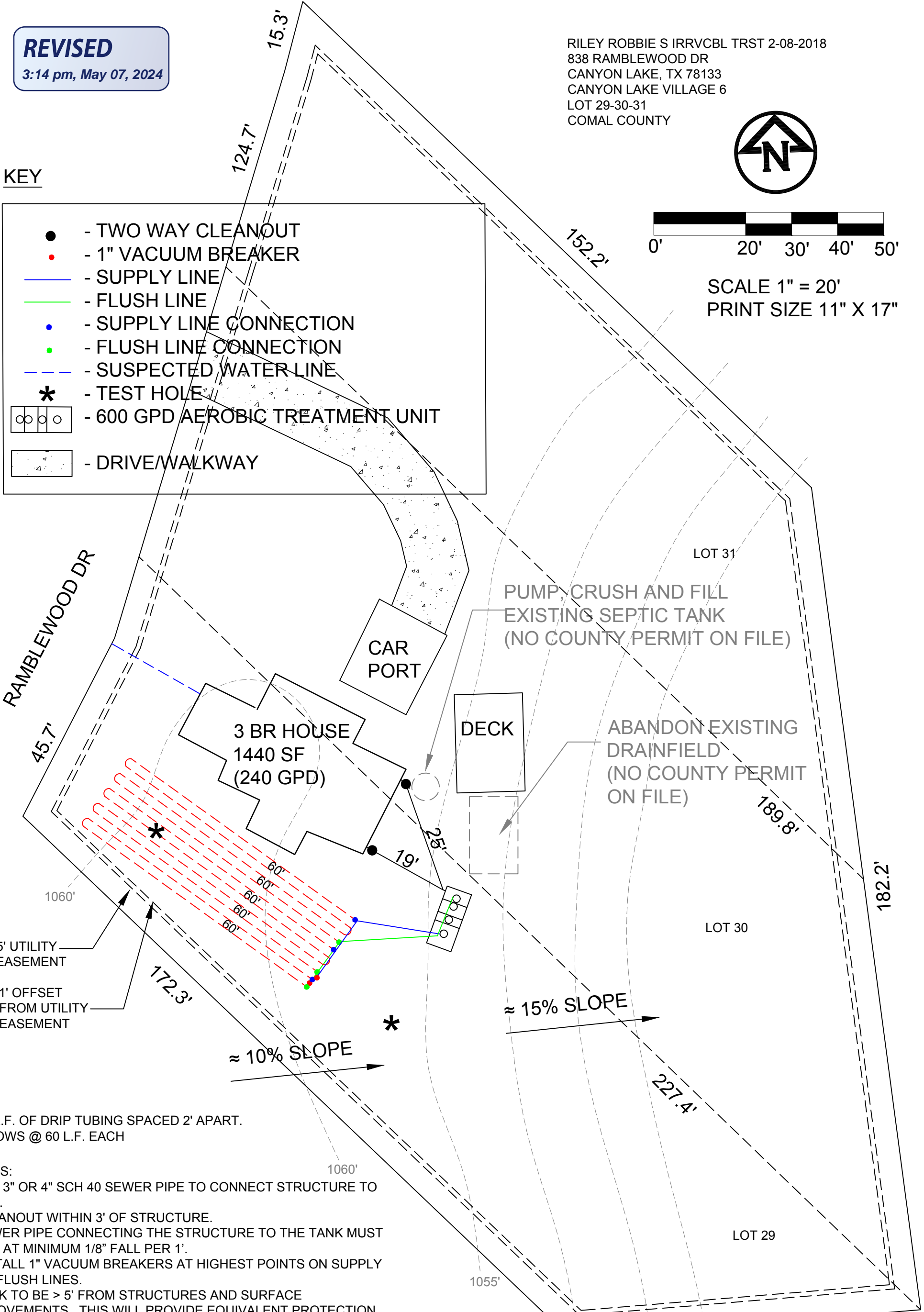
RILEY ROBBIE S IRRVCBL TRST 2-08-2018
 838 RAMBLEWOOD DR
 CANYON LAKE, TX 78133
 CANYON LAKE VILLAGE 6
 LOT 29-30-31
 COMAL COUNTY



SCALE 1" = 20'
 PRINT SIZE 11" X 17"

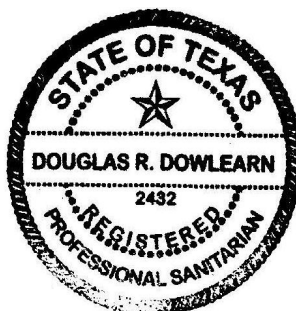
KEY

- - TWO WAY CLEANOUT
- - 1" VACUUM BREAKER
- (blue) - SUPPLY LINE
- (green) - FLUSH LINE
- (blue) - SUPPLY LINE CONNECTION
- (green) - FLUSH LINE CONNECTION
- - - (blue) - SUSPECTED WATER LINE
- * - TEST HOLE
- ⊞ ⊞ ⊞ - 600 GPD AEROBIC TREATMENT UNIT
- ▨ - DRIVE/WALKWAY

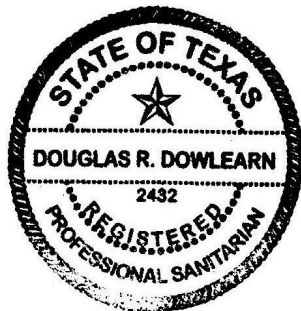


600 L.F. OF DRIP TUBING SPACED 2' APART.
 10 ROWS @ 60 L.F. EACH

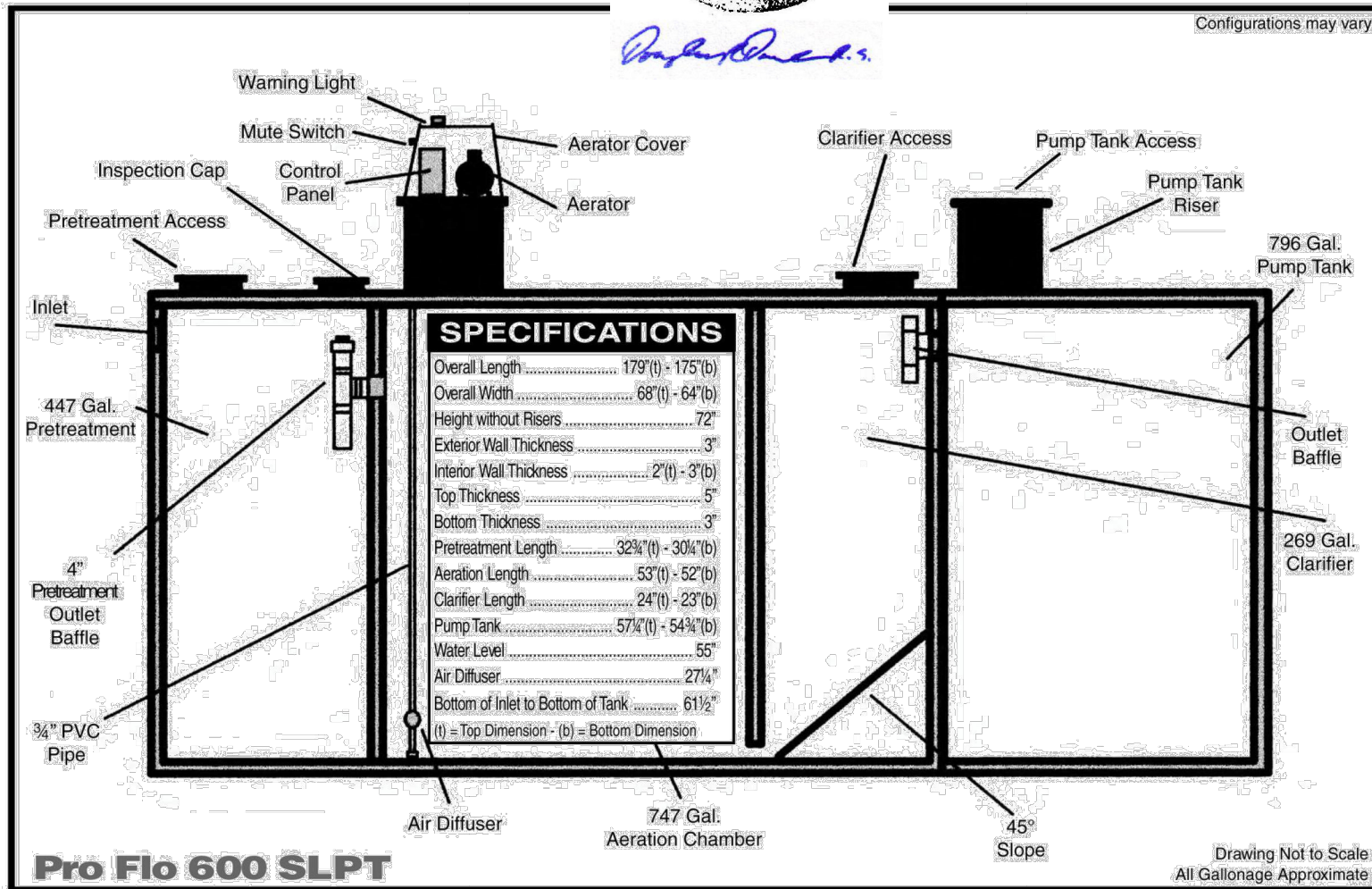
- NOTES:
- USE 3" OR 4" SCH 40 SEWER PIPE TO CONNECT STRUCTURE TO TANK.
 - CLEANOUT WITHIN 3' OF STRUCTURE.
 - SEWER PIPE CONNECTING THE STRUCTURE TO THE TANK MUST HAVE AT MINIMUM 1/8" FALL PER 1'.
 - INSTALL 1" VACUUM BREAKERS AT HIGHEST POINTS ON SUPPLY AND FLUSH LINES.
 - TANK TO BE > 5' FROM STRUCTURES AND SURFACE IMPROVEMENTS. THIS WILL PROVIDE EQUIVALENT PROTECTION FOR THE SETBACK REQUIREMENTS OF TAC 285.
 - TANK WILL BE WATER TIGHT AND MANUFACTURED ACCORDING TO ASTM DESIGNATION: C 1227.
 - DRAINFIELD SHALL BE GREATER THAN 100' FROM PRIVATE WELLS, AND GREATER THAN 150' FROM PUBLIC WELLS. VERIFY WELL LOCATION(S) ON SITE.
 - CLEAR SURFACE ROCK AND BOULDERS FROM DRAINFIELD AREA, AND ENSURE THAT THERE IS AT MINIMUM 12" OF SUITABLE SOIL BETWEEN THE BOTTOM OF THE DRIP LINES, AND THE RESTRICTIVE HORIZON. CLASS II SOIL MAY NEED TO BE IMPORTED IN ORDER TO MAINTAIN THE MINIMUM 12" OF SOIL BETWEEN THE BOTTOM OF THE DRIP LINES AND RESTRICTIVE HORIZON.



Douglas R. Dowlearn



Douglas R. Dowlearn



Pro Flo 600 SLPT System Diagram

- 37" - 55" - RESERVE - 260.46 GAL
- 12" - 37" - PUMP ON TO ALARM ON - 361.75 GAL
- 10" - 12" - PUMP OFF TO PUMP ON - 28.94 GAL
- 0 - 10" - SUMP- 144.7 GAL

WORKING LEVEL = 55"
14.47 GAL/INCH

NOTE: SET ON A TIMER TO DOSE 8 TIMES PER DAY AT 10 MINUTES PER DOSE.

C1 SERIES

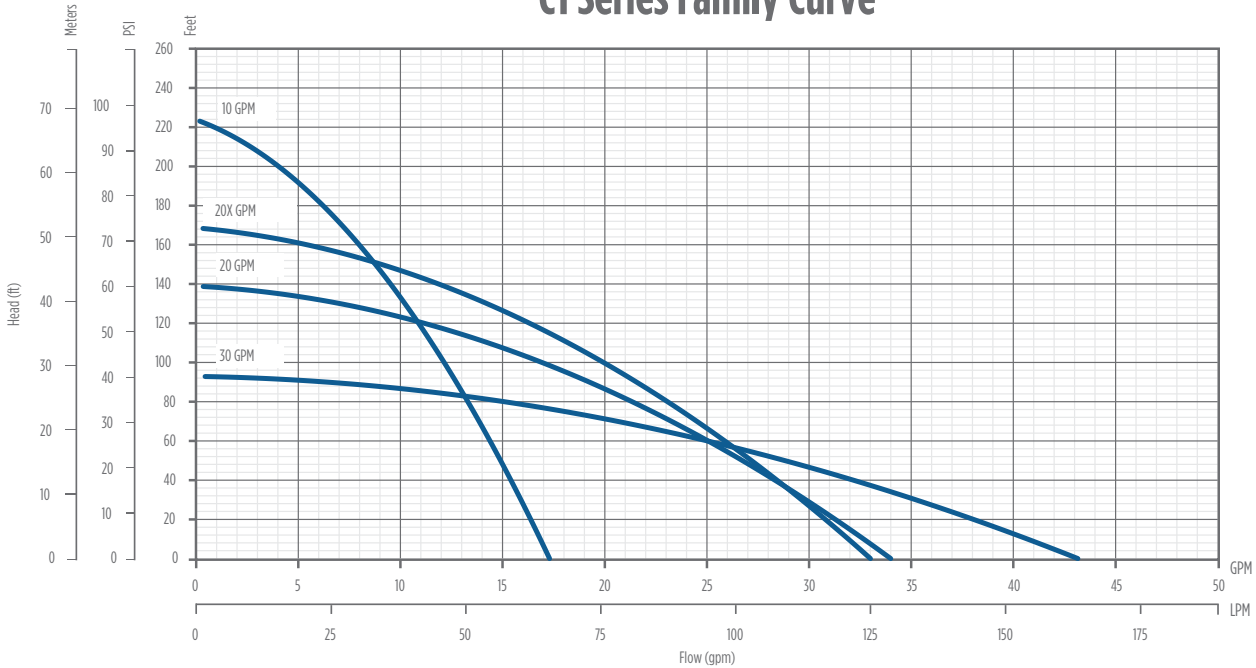
CISTERN PUMPS

Designed for use in gray water / filtered effluent service applications, the C1 Series cistern pump provides high performance and long life in less than ideal water conditions. The C1 Series pump is able to pass solids up to 1/8" without having a negative effect on the internal hydraulic components.

The pump's unique bottom suction design allows for maximum fluid drawdown without compromising durability or overall life, and it does not require the use of a flow induction sleeve. Intended specifically for use in a cistern or tank, C1 Series pumps are suitable for use in agricultural, residential, and commercial installations.



C1 Series Family Curve



FEATURES

- Supplied with a removable 5" base for secure and reliable mounting
- Bottom suction design
- Robust thermoplastic discharge head design resists breakage during installation and operation
- Single shell housing design provides a compact unit while ensuring cool and quiet operation
- Hydraulic components molded from high quality engineered thermoplastics
- Optimized hydraulic design allows for increased performance and decreased power usage
- All metal components are made of high grade stainless steel for corrosion resistance
- Available with a high quality 115 V or 230 V, ½ hp motor
- Fluid flows of 10, 20, and 30 gpm, with a max shut-off pressure of over 100 psi
- Heavy duty 600 V 10 foot SJ00W jacketed lead

APPLICATIONS

- Gray water pumping
- Filtered effluent service water pumping
- Water reclamation projects such as pumping from rain catchment basins
- Aeration and other foundation or pond applications
- Agriculture and livestock water pumping

ORDERING INFORMATION

| C1 Series Pumps | | | | | | | |
|-----------------|-----|-------|-------|------------------|-----------|-------------|--------------|
| GPM | HP | Volts | Stage | Model No. | Order No. | Length (in) | Weight (lbs) |
| 10 | 1/2 | 115 | 7 | 10C1-05P4-2W115 | 90301005 | 26 | 17 |
| | | 230 | 7 | 10C1-05P4-2W230 | 90301010 | 26 | 17 |
| 20 | | 115 | 5 | 20C1-05P4-2W115 | 90302005 | 25 | 16 |
| | | 230 | 5 | 20C1-05P4-2W230 | 90302010 | 25 | 16 |
| 20X | | 115 | 6 | 20XC1-05P4-2W115 | 90302015 | 26 | 17 |
| | | 230 | 6 | 20XC1-05P4-2W230 | 90302020 | 26 | 17 |
| 30 | | 115 | 4 | 30C1-05P4-2W115 | 90303005 | 25 | 16 |
| | | 230 | 4 | 30C1-05P4-2W230 | 90303010 | 25 | 16 |

Note: All units have 10 foot long SJ00W leads.



From: [Ritzen, Brenda](#)
To: [Lauren Dowlearn](#)
Cc: [William Baker](#)
Subject: RE: Permit 117321
Date: Tuesday, May 7, 2024 3:15:00 PM
Attachments: [image001.png](#)

Lauren,

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: Lauren Dowlearn <txseptic@gmail.com>
Sent: Tuesday, May 7, 2024 11:49 AM
To: Ritzen, Brenda <rabbjr@co.comal.tx.us>
Cc: William Baker <bakerseptic@yaho.com>
Subject: Re: Permit 117321

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

Good morning,

Please see attached revision.

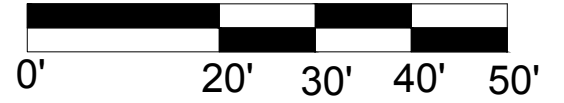
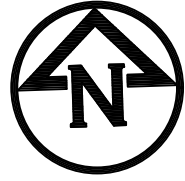
Thank you,
Lauren Dowlearn
210-878-8100
D.A.D Services, Inc.
www.TexasSuperSeptic.com

REVISED

1:34 pm, Apr 17, 2024

VOID

RILEY ROBBIE S IRRVCBL TRST 2-08-2018
838 RAMBLEWOOD DR
CANYON LAKE, TX 78133
CANYON LAKE VILLAGE 6
LOT 29-30-31
COMAL COUNTY



SCALE 1" = 20'
PRINT SIZE 11" X 17"

KEY

- - TWO WAY CLEANOUT
- - 1" VACUUM BREAKER
- (blue) - SUPPLY LINE
- (green) - FLUSH LINE
- (blue) - SUPPLY LINE CONNECTION
- (green) - FLUSH LINE CONNECTION
- - - (blue) - SUSPECTED WATER LINE
- * - TEST HOLE
- ⊞ ⊞ ⊞ - 600 GPD AEROBIC TREATMENT UNIT
- ▨ - DRIVE/WALKWAY

RAMBLEWOOD DR

PUMP, CRUSH AND FILL
EXISTING SEPTIC TANK
(NO COUNTY PERMIT ON FILE)

VOID

ABANDON EXISTING
DRAINFIELD
(NO COUNTY PERMIT
ON FILE)

3 BR HOUSE
1440 SF
(240 GPD)

VOID

≈ 15% SLOPE

≈ 10% SLOPE

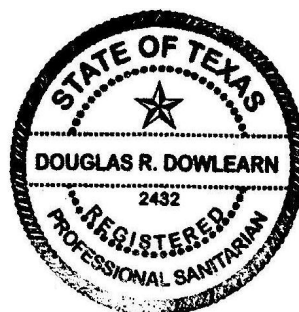
5' UTILITY
EASEMENT

1' OFFSET
FROM UTILITY
EASEMENT

600 L.F. OF DRIP TUBING SPACED 2' APART.
8 ROWS @ 75 L.F. EACH

NOTES:

- USE 3" OR 4" SCH 40 SEWER PIPE TO CONNECT STRUCTURE TO TANK.
- CLEANOUT WITHIN 3' OF STRUCTURE.
- SEWER PIPE CONNECTING THE STRUCTURE TO THE TANK MUST HAVE AT MINIMUM 1/8" FALL PER 1'.
- INSTALL 1" VACUUM BREAKERS AT HIGHEST POINTS ON SUPPLY AND FLUSH LINES.
- TANK TO BE > 5' FROM STRUCTURES AND SURFACE IMPROVEMENTS. THIS WILL PROVIDE EQUIVALENT PROTECTION FOR THE SETBACK REQUIREMENTS OF TAC 285.
- TANK WILL BE WATER TIGHT AND MANUFACTURED ACCORDING TO ASTM DESIGNATION: C 1227.
- DRAINFIELD SHALL BE GREATER THAN 100' FROM PRIVATE WELLS, AND GREATER THAN 150' FROM PUBLIC WELLS. VERIFY WELL LOCATION(S) ON SITE.
- CLEAR SURFACE ROCK AND BOULDERS FROM DRAINFIELD AREA, AND ENSURE THAT THERE IS AT MINIMUM 12" OF SUITABLE SOIL BETWEEN THE BOTTOM OF THE DRIP LINES, AND THE RESTRICTIVE HORIZON. CLASS II SOIL MAY NEED TO BE IMPORTED IN ORDER TO MAINTAIN THE MINIMUM 12" OF SOIL BETWEEN THE BOTTOM OF THE DRIP LINES AND RESTRICTIVE HORIZON.



Douglas R. Dowlearn

68.2'
1050' 1045' 1040'

227.4'

LOT 29

LOT 30

LOT 31

182.2'

189.8'

152.2'

124.7'

15.3'

45.7'

1060'

172.3'

1060'

1055'

75'

75'

75'

75'


95'

From: [Ritzen, Brenda](#)
To: [Lauren Dowlearn](#)
Subject: Permit 117321
Date: Thursday, April 11, 2024 2:42:00 PM
Attachments: [image001.png](#)

Re: Robbie S. Riley, Trustee of the Robbie S. Riley Irrevocable Trust dated February 8, 2018
Canyon Lake Village Unit 6 Lots 29 & 30
Application for Permit for Authorization to Construct an On-Site Sewage Facility (OSSF)

Lauren :

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

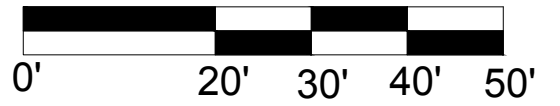
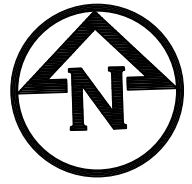
1.  Show property boundaries for each lot on the design.
2. Revise as needed and resubmit.

Thank you,



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

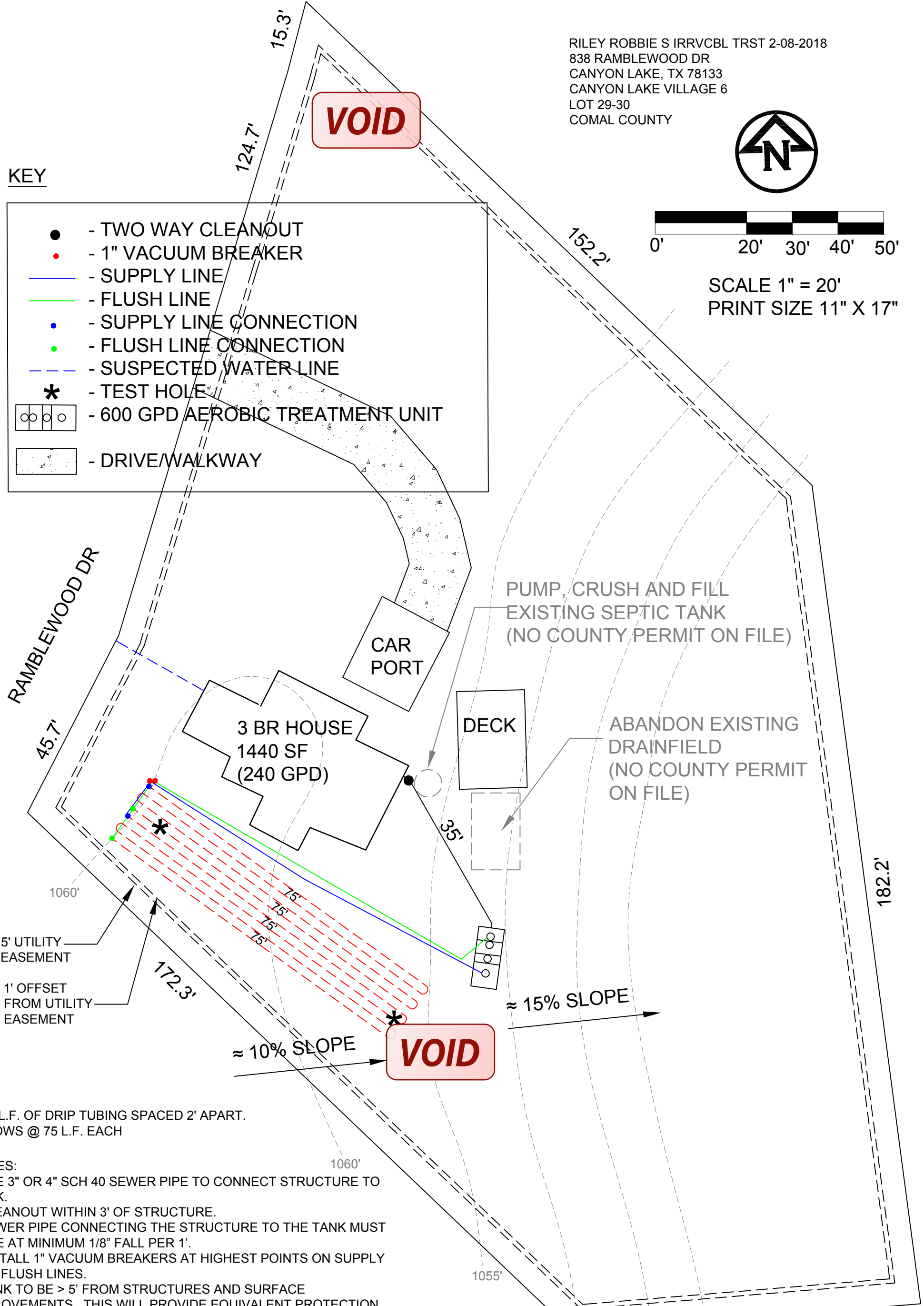
RILEY ROBBIE S IRRVCBL TRST 2-08-2018
 838 RAMBLEWOOD DR
 CANYON LAKE, TX 78133
 CANYON LAKE VILLAGE 6
 LOT 29-30
 COMAL COUNTY



SCALE 1" = 20'
 PRINT SIZE 11" X 17"

KEY

- - TWO WAY CLEANOUT
- - 1" VACUUM BREAKER
- (blue) - SUPPLY LINE
- (green) - FLUSH LINE
- (blue) - SUPPLY LINE CONNECTION
- (green) - FLUSH LINE CONNECTION
- - - (blue) - SUSPECTED WATER LINE
- * - TEST HOLE
- ⊞ ⊞ ⊞ - 600 GPD AEROBIC TREATMENT UNIT
- ▨ - DRIVE/WALKWAY

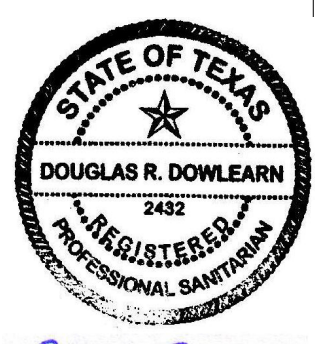


PUMP, CRUSH AND FILL
 EXISTING SEPTIC TANK
 (NO COUNTY PERMIT ON FILE)

ABANDON EXISTING
 DRAINFIELD
 (NO COUNTY PERMIT
 ON FILE)

600 L.F. OF DRIP TUBING SPACED 2' APART.
 8 ROWS @ 75 L.F. EACH

- NOTES:
- USE 3" OR 4" SCH 40 SEWER PIPE TO CONNECT STRUCTURE TO TANK.
 - CLEANOUT WITHIN 3' OF STRUCTURE.
 - SEWER PIPE CONNECTING THE STRUCTURE TO THE TANK MUST HAVE AT MINIMUM 1/8" FALL PER 1'.
 - INSTALL 1" VACUUM BREAKERS AT HIGHEST POINTS ON SUPPLY AND FLUSH LINES.
 - TANK TO BE > 5' FROM STRUCTURES AND SURFACE IMPROVEMENTS. THIS WILL PROVIDE EQUIVALENT PROTECTION FOR THE SETBACK REQUIREMENTS OF TAC 285.
 - TANK WILL BE WATER TIGHT AND MANUFACTURED ACCORDING TO ASTM DESIGNATION: C 1227.
 - DRAINFIELD SHALL BE GREATER THAN 100' FROM PRIVATE WELLS, AND GREATER THAN 150' FROM PUBLIC WELLS. VERIFY WELL LOCATION(S) ON SITE.
 - CLEAR SURFACE ROCK AND BOULDERS FROM DRAINFIELD AREA, AND ENSURE THAT THERE IS AT MINIMUM 12" OF SUITABLE SOIL BETWEEN THE BOTTOM OF THE DRIP LINES, AND THE RESTRICTIVE HORIZON. CLASS II SOIL MAY NEED TO BE IMPORTED IN ORDER TO MAINTAIN THE MINIMUM 12" OF SOIL BETWEEN THE BOTTOM OF THE DRIP LINES AND RESTRICTIVE HORIZON.



Douglas R. Dowlearn



g/m

NOTICE OF CONFIDENTIALITY RIGHTS: IF YOU ARE A NATURAL PERSON, YOU MAY REMOVE OR STRIKE ANY OR ALL OF THE FOLLOWING INFORMATION FROM ANY INSTRUMENT THAT TRANSFERS AN INTEREST IN REAL PROPERTY BEFORE IT IS FILED FOR RECORD IN THE PUBLIC RECORDS: YOUR SOCIAL SECURITY NUMBER OR YOUR DRIVER'S LICENSE NUMBER.

General Warranty Deed

Date: February 8, 2018

Grantor: Robbie S. Riley, a single person

Grantor's Mailing Address: 9820 N. Bentsen Rd., McAllen, Texas 78504

Grantee: Robbie S. Riley, Trustee of the Robbie S. Riley Irrevocable Trust dated February 8, 2018

Grantee's Mailing Address: 9820 N. Bentsen Rd., McAllen, Texas 78504

Consideration:

Cash and other good and valuable consideration

Property (including any improvements):

Lots 29, 30, and 31, CANYON LAKE VILLAGE, UNIT NO. 6, according to a map or plat recorded in Volume 2, Page 63, Comal County, Texas Map and Plat Records.

Reservations from Conveyance: None

Exceptions to Conveyance and Warranty:

Validly existing easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded and validly existing instruments, other than conveyances of the surface fee estate, that affect the Property; and taxes for 2018, which Grantee assumes and agrees to pay, and subsequent assessments for that and prior years due to change in land usage, ownership, or both, the payment of which Grantee assumes.

Grantor, for the Consideration and subject to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty, grants, sells, and conveys to Grantee the Property, together with all and singular the rights and appurtenances thereto in any way belonging, to have and to hold it to Grantee and Grantee's heirs, successors, and assigns forever. Grantor binds Grantor and Grantor's heirs and successors to warrant and forever defend all and singular the Property to Grantee and Grantee's heirs, successors, and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, except as to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty.

GRANTEE IS TAKING THE PROPERTY IN AN ARM'S-LENGTH AGREEMENT BETWEEN THE PARTIES. THE CONSIDERATION WAS BARGAINED ON THE BASIS OF AN "AS IS, WHERE IS" TRANSACTION AND REFLECTS THE AGREEMENT OF THE PARTIES THAT THERE ARE NO REPRESENTATIONS OR EXPRESS OR IMPLIED WARRANTIES. GRANTEE HAS NOT RELIED ON ANY INFORMATION OTHER THAN GRANTEE'S

INSPECTION.

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

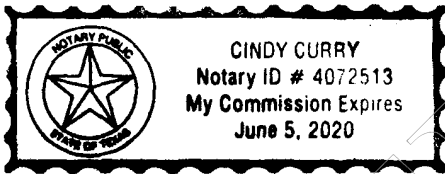
This instrument was prepared based on information furnished by the parties, and no independent title search has been made.

Robbie S. Riley
Robbie S. Riley

STATE OF TEXAS)

COUNTY OF HIDALGO)

This instrument was acknowledged before me on February 12, 2018, by Robbie S. Riley.



Cindy Curry
Notary Public, State of Texas
My commission expires: 6-5-20

PREPARED IN THE OFFICE OF:

Villeda Law Group
6316 North 10th Street, Building B
McAllen, TX 78504

AFTER RECORDING RETURN TO:

↙
Villeda Law Group
6316 North 10th Street, Building B
McAllen, TX 78504

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
02/16/2018 02:14:16 PM
JESSICA 2 Page(s)
201806006171

 *Bobbie Koepf*

RECEIVED

By Kathy Griffin at 2:41 pm, Mar 25, 2024



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

| | | |
|----------------------|-----------------|----------------------|
| | | 117321 |
| <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.

Robbie Sue Riley
Signature of Applicant

March 5, 2024
Date

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

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