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

Inspector Notes:

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If SingleTank, 2Compartments Provided withBaffle SEPTIC TANK Inlet Flowline Greater than3" and " T " Provided on Inlet and OutletSEPTIC TANK Septic Tank(s) MeetMinimum Requirements		285.32(b)(1) (E)285.91(2)285.32(b)(1) (F)285.32(b)(1)(E) (iii)285.32(b)(1)(E)(ii) (I)285.32(b)(1)(E)(ii) (I)285.32(b)(1)(E) (i)285.32(b)(1) (D)285.32(b)(1)(C) (i)285.32(b)(1) (B)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)				
	SEPTIC TANK Secondary restraint system providedSEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
11	SEPTIC TANK Tank Volume						
12	Installed						
	PUMP TANK Volume Installed						
13	AEROBIC TREATMENT UNIT Size						
14	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)				
	DISPOSAL SYSTEM Evapo-		205 22/-//2/				
18	transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	DISPOSAL SYSTEM Drip Irrigation						
			285.33(c)(3)(A)-(F)				
19							
	DISPOSAL SYSTEM Soil		205 22(-1)(4)				
20	Substitution		285.33(0)(4)				
	DISPOSAL SYSTEM Pumped		285.33(a)(4)				
	Effluent		285.33(a)(3)				
			285.33(a)(1)				
21			285.33(a)(2)				
	DISPOSAL SYSTEM Gravelless Pipe						
			285.33(a)(3)				
			285.33(a)(2)				
			285.33(a)(4) 285.33(a)(1)				
22							
	DISPOSAL SYSTEM Mound		285 33(a)(3)				
			285.33(a)(1)				
			285.33(a)(2)				
23			285.33(a)(4)				
	DISPOSAL SYSTEM Other		205 22(4)(6)				
	(describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
24			203.33(0)(1)				
	DRAINFIELD Absorptive Drainline						
	or 4" PVC						
25	DRAINFIELD Area Installed						
	DRAINFIELD Area Installed						
26	DRAINFIELD Level to within 1 inch						
	per 25 feet and within 3 inches						
	over entire excavation		285.33(b)(1)(A)(v)				
27							
	DRAINFIELD Excavation Width						
	DRAINFIELD Excavation Depth						
	DRAINFIELD Depth of Porous Media						
	DRAINFIELD Type of Porous Media						
28							
	DRAINFIELD Pipe and Gravel -		285 22/h)/1)/E)				
29	Geotextile Fabric in Place		203.33(D)(1)(E)				
	DRAINFIELD Leaching Chambers						
	DRAINFIELD Chambers - Open End						
	Port & Closed End Plates in Place		285.33(c)(2)				
	(per manufacturers spec.)						
20							
30							
	SYSTEM Adequate Trench Length						
	& Width, and Adequate		285.33(d)(1)(C)(i)				
	Separation Distance between						
31	irencnes						

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	Connections in Approved Junction Boxes / Wiring Buried						

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)(ii) 285.33(d)(2)(G)(ii) 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						



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

Permit Number:

Issued This Date:

117335

This permit is hereby given to:

04/12/2024

Terry & Dusty DeLacey

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

1605 FM 3424 CANYON LAKE, TX 78133

Subdivision:The Point at Rancho Del LagoUnit:Phase 1Lot:66Block:0Acreage: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.

REVISED 4:09 pm, Dec 16, 2024

From:	Nicole Barnes
То:	Ritzen, Brenda
Subject:	Fwd: 1605 FM 3424/117335 Septic Permit Transfer
Date:	Wednesday, December 4, 2024 9:26:56 AM

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

Brenda,

Please see below email from Scott Davis, previous owner of this property.

Let me know if you have any questions or need anything else.

Thanks, *Nicole Barnes* David Winters Septic's LLC. 830-935-2477

> From: William <weststar3@yahoo.com> To: Nicole <wintersseptics@gvtc.com> Date: Wednesday, 4 December 2024 5:23 AM CST Subject: Re: 1605 FM 3424 Septic Transfer question

Nicole

I approve the transfer of the septic plans by David Winters Septic to Terry DeLacey, the new owner of 1605 FM 3424 Canyon Lake, Texas.

Thank you

Guadalupe Handyman Services LLC Scott Davis 830-929-5445 Spring Branch, Texas 78070 Have a blessed day!



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

Permit Number:	117335
Issued This Date:	04/12/2024
This permit is hereby given to:	Scott and Shelly Davis

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

1605 FM 3424 CANYON LAKE, TX 78133

Subdivision:	The Point at Rand	cho Del Lago
Unit:	phase 1	
Lot:	66	
Block:	0	
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.



ON-SITE SEWAGE FACILITY APPLICATION

APPLICANT / AGENT INFORMATION 4:03 pm, Dec 16, 2024 Owner Name	Date	Pe	ermit Number	REVISED
Automation Agent Name Mailing Address Agent Address City, State, Zip City, State, Zip Phone # Email 2. LOCATION Email Suddvision Name Unit Lot Suddvision Name Unit Lot Suddvision Name Onit Block Survey Name / Abstract Number Acreage Address City State Zip 3. TYPE OF DEVELOPMENT Biogle Family Residential Type of Construction (House, Mobile, RV, Etc.) Number of Bedrooms Indicate Sq F1 of Living Area Indicate Sq F1 of Living Area Mon-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 Construction Offices, Factories, Churches, Schools, Parks, Etc Indicate Number of Occupants Restaurants, Lounges, Theaters - Indicate Number of Beds Travel Traier/RV Parks - Indicate Number of Spaces Miscellaneous	1 APPLICANT / AGENT INFORMATION			4:03 pm, Dec 16, 2024
Mailing Address Agent Address City, State, Zip City, State, Zip Phone # Phone # Email Email 2. LOCATION Subdivision Name Subdivision Name Unit Lot Subdivision Name Unit Lot Subdivision Name Unit Lot Subdivision Name Unit Lot Subdivision Name Unit Acreage Address City State Zip 3. TYPE OF DEVELOPMENT Single Family Residential Type of Construction (House, Mobile, RV, Etc.) Number of Bedrooms Indicate Sq Ft of Living Area Indicate Sq Ft of Living Area Indicate Sq Ft of Living Area 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	Owner Name	Agent Name		
City, State, Zp City, State, Zp Phone # Phone # Email Email 2. LOCATION Subdivision Name Subdivision Name Unit Lot Block Survey Name / Abstract Number Acreage Address City State Zip 3. TYPE OF DEVELOPMENT Single Family Residential Type of Construction (House, Mobile, RV, Etc.) Number of Bedrooms Indicate Sq Ft of Living Area Øffices, Factories, Churches, Schools, Parks, Etc Indicate Number of Occupants Restaurants, Lounges, Theaters - Indicate Number of Seats Indicate Sq Ft of Living Area Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds Travel Trailer/RV Parks - Indicate Number of Spaces Indicate Number of Spaces Miscellaneous (Structure Only) Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement? Source of Water Public Private Well Rainwater ASIGNATURE OF OWREN Public Private Well Rainwater Asignature of application and adjustional information submitted dees not contain any false information and does not conceal any material forck. Lorinty fhat: <td< th=""><th>Mailing Address</th><th> Agent Address</th><th></th><th></th></td<>	Mailing Address	Agent Address		
Phone #	City, State, Zip	City, State, Zip		
Email	Phone #	Phone #		
2. LOCATION Subdivision Name Unit Lot Block Survey Name / Abstract Number Acreage Address City State Zip 3. TYPE OF DEVELOPMENT Single Family Residential Type of Construction (House, Mobile, RV, Etc.) Number of Bedrooms Indicate Sq Ft of Living Area Ohno-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	Email	Email		
Subdivision Name Unit Lot Block Survey Name / Abstract Number Acreage Address City State Zip 3. TYPE OF DEVELOPMENT State Zip 3. Type of Construction (House, Mobile, RV, Etc.) Number of Bedrooms Indicate Sq Ft of Living Area Indicate Sq Ft of Living Area Mumber of Bedrooms Indicate Sq Ft of Living Area Indicate Sq Ft of Living Area Indicate Sq Ft of Living Area Offices, Factories, Churches, Schools, Parks, Etc Indicate Number Of Occupants Restaurants, Lounges, Theaters - Indicate Number of Seats Hotel, Hospital, Nursing Home - Indicate Number of Seats Indicate Restaurants, Lounges, Theaters - Indicate Number of Seats Miscellaneous Sistellaneous Indicate Number of Spaces Miscellaneous (Structure Only) Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement? Source of Water Public Private Well Rainwater 4. SiGNATURE OF OWNER By signing this application, I centify that1: The compleade application and additional information submitted does not contain any false information and does not conceal any material facts. Learning of the property orner or I possess the appropriate land rights necessary to make the permitted authority and designated agents to enter upon the above descri	2. LOCATION			
Survey Name / Abstract Number Acreage Address City State Zip 3. TYPE OF DEVELOPMENT State Zip Single Family Residential Type of Construction (House, Mobile, RV, Etc.) Number of Bedrooms Number of Bedrooms	Subdivision Name	Unit	Lot	Block
Address City State Zip 3. TYPE OF DEVELOPMENT Single Family Residential Type of Construction (House, Mobile, RV, Etc.) Number of Bedrooms Indicate Sq Ft of Living Area	Survey Name / Abstract Number			
S. TYPE OF DEVELOPMENT Single Family Residential Type of Construction (House, Mobile, RV, Etc.). Number of Bedrooms Indicate Sq Ft of Living Area 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: \$ (Structure Only) Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement? Source of Water Public Private Well Rainwater A 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. Loetfly that 1 am the property owner or I possess the appropriate land rights necessary to make the permitted improvements or salid property	Address	City	State	e Zip
□ Single Family Residential Type of Construction (House, Mobile, RV, Etc.)	3. TYPE OF DEVELOPMENT			'
Type of Construction (House, Mobile, RV, Etc.) Number of Bedrooms Indicate Sq Ft of Living Area 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: \$ (Structure Only) Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement? Source of Water Public Private Well Rainwater A SIGNATURE OF OWNER By signing this application, I certify that: - Rainwater Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of stersion exhibition information submitted does not contain any false information has performed the reviews required by the Comal all additional information submitted does not contain any false information and does not conceal any material facts. I certify that 1 am the property owner or 1 possess the appropriate land rights necessary to make the permitted improvements on said property. <td>Single Family Residential</td> <td></td> <td></td> <td></td>	Single Family Residential			
Number of Bedrooms Indicate Sq Ft of Living Area Onon-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: \$ (Structure Only) Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement? Source of Water Public Private Well Rainwater A SIGNATURE OF OWNER Rainwater By signing this application, I certify that: The completed application and all additional information submitted does not contatin 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. - 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 diffirmatively consent to the Three perference of private sewage facili	Type of Construction (House, Mobile, RV, Etc.))		
Indicate Sq Ft of Living Area	Number of Bedrooms	/		
Indext eq. (1) Exing etc	Indicate Sg Et of Living Area			
(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: \$	Non-Single Family Residential			
Type of Facility	(Planning materials must show adequate land area t	for doubling the required land needed fo	or treatment units	and disposal area)
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: \$ (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 Compol Depamage Preventing Order. I affirmatively consent to the thinker permitting intorder. Date Page 1 of 2 <th></th> <th></th> <th></th> <th></th>				
Restaurants, Lounges, Theaters - Indicate Number of Seats 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: \$	Offices Factories Churches Schools Parks	Etc Indicate Number Of Occupant	s	
Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds Travel Trailer/RV Parks - Indicate Number of Spaces Miscellaneous Estimated Cost of Construction: \$	Restaurants Lounges Theaters - Indicate Nur	mber of Seats		
Travel Trailer/RV Parks - Indicate Number of Spaces	Hotel Motel Hospital Nursing Home - Indicate	Number of Beds		
Miscellaneous Estimated Cost of Construction: \$	Travel Trailer/RV Parks - Indicate Number of S			
	Miscellaneous			
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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 A. 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 Thime posting/public elease of my e-mail address associated with this permit application, as applicable. Signature of Owner Page 1 of 2 Revised January 202 Page 1 of 2	Is any portion of the proposed OSSF located in the	United States Army Corps of Engir	neers (USACE) flowage easement?
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 A. 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 thinker posting/public elease of my e-mail address associated with this permit application, as applicable. 	Source of Water Public Private Well	Rainwater		
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 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 mine pesting/public elease of my e-mail address associated with this permit application, as applicable. Signature of Owner 	property.			
 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 pesting/public elease of my e-mail address associated with this permit application, as applicable. Signature of Owner 	 Authorization is hereby given to the permitting authority al site/soil evaluation and inspection of private sewage facili 	nd designated agents to enter upon the ties	above described	d property for the purpose of
- I affirmatively consent to the filme posting/public elease of my e-mail address associated with this permit application, as applicable. Signature of Owner DATA De Date Page 1 of 2 Revised January 202	- I understand that a permit of authorization to construct wil	I not be issued until the Floodplain Adm	inistrator has pe	rformed the reviews required
Signature of Owner DATA De Date Page 1 of 2 Revised January 202	- I affirmatively consent to the <u>mine posting</u> /public release	of my e-mail address associated with the	nis permit applic	ation, as applicable.
Signature of Owner DATION Date Page 1 of 2 Revised January 202	5-10			
Revised January 202	Signature of Owner	Date		Page 1 of 2
	VJ#FD2	201/		Revised January 202



Planning Materials & Site Evaluation as Required Completed By Garrett R. Winters R.S #5213
System Description Aerobic System W/ Surface Irrigation
Size of Septic System Required Based on Planning Materials & Soil Evaluation
Tank Size(s) (Gallons) 600GPD Absorption/Application Area (Sq Ft) 4926
Gallons Per Day (As Per TCEQ Table III) 114
(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.)
Is there at least one acre per single family dwelling as per 285.40(c)(1)? 🔘 Yes 💽 No
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?
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? O Yes O 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.

Aarhland

Signature of Designer

11/4/2024

Date

REVISED 4:05 pm, Dec 16, 2024

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 Savage Facilities (OSSFs), this document is Ned 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 imperienting 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 active this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF, nor does it constitute any guarantee by the commission in 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)

Lot 66, The Point at Rancho Del Lago, Phase One, an addition in Comal County, Texas

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

Terry DeLacey and Dusty DeLacey

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 Comat County Engineer's Office,

WITNESS BY HANDIS) ON THIS 12 DAY OF DECEMBER 2024

20

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS LOAV OF DILLING LOLY

NOLARY PUBLIC, State of Texas Notary's Printed Name 11000 My Commission Expires





Filed and Recorded Official Public Records Bobbie Koepp, County Clerk Comal County, Texas 12/16/2024 02:44:33 PM MARY 2 Pages(s) 202406038015



REVISED 4:03 pm, Dec 16, 2024

DAVID WINTERS SEPTICS, LLC PO BOX 195 SPRING BRANCH, TX 78070 830-935-2477 OFFICE 830-935-2477 FAX wintersseptics@gvtc.com

Routine Maintenance and Inspection Agreement

(hereafter referred to as "Contractor") located at ______ Date beginning on <u>Issue Date</u> of and contract ending <u>2 years from Issue Date of License to</u> Operate ______ License to Operate By this agreement the Contractor agrees to render professional service, as described herein, and the Client agrees to fulfill the terms of this Agreement as described herein.

This agreement will provide for all required inspections, testing, and service for your Aerobic Treatment System. The policy will include the following:

1. Three (3) inspections per year/service calls (at least one every four months), for a total of six (6) over the two-year period, including inspection, adjustment, and servicing of the mechanical, electrical and other applicable component parts to ensure proper function. This includes inspecting control panel, air pumps, air filters, diffuser operation, and replacing or repairing any component not found to be functioning correctly. Any alarm situations affecting the proper function of the Aerobic process will be addressed within a 48-hour time frame. This contract does not include labor on warranty and non-warranty parts.

2. An effluent quality inspection consisting of a visual check of color, turbidity, scum overflow and examination for odors. A test for chlorine residual and pH will be taken and reported as necessary.

3 If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified on your inspection report.

4. The Client is responsible for the chlorine tablets and/or liquid chlorine; they must be filled before or during the service visit.

5. Any additional visits, inspections or sample collection required by specific Municipalities, Water/River Authorities, and County Agencies the TCEQ or any other authorized regulatory agency in your jurisdiction will not be covered by this policy.

At the conclusion of the initial service policy, our company will make available, for purchase on an annual basis, a continuing service policy cover NORMAL inspection, maintenance and repair.

The Homeowners Manual must be strictly followed or warranties are subject invalidation. Pumping of sludge build up is not covered by this policy and will result in additional charges.

This agreement does not cover any labor or parts for items which must be replaced due to acts of God, i.e., lightning strikes, high winds, flooding, freezing.

This agreement DOES NOT COVER materials or parts which must be replaced due to misuse or abuse of the system. These include but are not limited to: Sewage flows exceeding the recommended daily hydraulic design capabilities, Disposal of Non-Biodegradable materials, such as chemicals, grease or oil, sanitary napkins, tampons, baby wipes, disposable diapers, Clogs in the line between the house and the tank.

This agreement DOES NOT COVER LABOR OR PARTS for out- of- warranty items.

ACCESS BY CONTRACTOR

The contractor or anyone authorized by the contractor may enter the property at reasonable times without prior notice for the purpose of service described above. First 2 years

PAYMENT AGREEMENT

The client will pay compensation to the contractor for the services in the amount of install . This compensation shall be payable in one lump sum payment upon acceptance of this agreement. Payments not received within 30 days of the above described due date will be subject to a \$25.00 late penalty.

TERMINATION OF THIS AGREEMENT

Either party may terminate this agreement within 10 days of written notice in the event of substantial failure to perform in accordance with its terms by other party without fault of the terminating party. If this agreement is terminated, the contractor will immediately notify the appropriate health authority.

LIMIT OF LIABILTY

The Contractor will not be liable for indirect, consequential, incidental or punitive damages, whether in contract or any other theory. In no event shall the Contractor's liability for direct damages exceed the price for the services described in this agreement.

Permit #

The effective date of this initial maintenance agreement shall be the date the license to operate is issued.

Client

Name

Contractor

Spring Branch, Texas 780170

P.O. Box 195

David Winters Septic's, LLC, Inc.

Address

City/State/Zip Code

Phone Number

Office 830-935-2477 Fax 830-935-2477

By: Jane

Signature of Contractor Maintenance Provider #-MP0001686

Email-tdelace d@gmail.com

Signature of Client



included with new

OSSF Soil & Site Evaluation

Page 1 (Soil & Site Evaluation)

Date Performed:	3	/	/ 2024

Property Owner: <u>William Scott Davis</u>

Site Location:	1605 FM 3424. Canyon LAke, TX 78133	Proposed Excavation Depth:	N/A
REQUIREME	ENTS:		

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil borings 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 disposal field excavation depth. For surface disposal, the surface horizon must be evaluated. Describe each soil horizon and identify any restrictive features on this form. Indicate depths where features appear.

Soil Boring Number:					
Depth (Feet)	Texture Class	Gravel Analysis (If Applicable)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
1 FT.	ш	<30%	None Observed	Bedrock 4"	Clay Loam
2 FT.					
3 FT.					
4 FT.					
5 FT.					

Soil Boring Number:					
Depth (Feet)	Texture Class	Gravel Analysis (If Applicable)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
1 FT.					
2 FT.		SAME	AS	ABOVE	
3 FT.					
4 FT.					
5 FT.					

FEATURES OF SITE AREA

Presence of 100 year flood zone			□ Yes	⊠No
Presence of upper water shed			□ Yes	⊠No
Presence of adjacent ponds, streams, water impoundments			□ Yes	🗹 No
Existing or proposed water well in nearby area (within 150 feet)			□ Yes	🗹 No
Ground Slope	3	 %		

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

Shuce Uning

(Signature of person performing evaluation) Form # PA5/030204-Final 3/11/2024 (Date) OS # 0037882

Registration Number and Type

OSSF Soil & Site Evaluation

Page 1 (Soil & Site Evaluation)

Date Performed:	3	/	/ 2024

Property Owner: <u>William Scott Davis</u>

Site Location:	1605 FM 3424. Canyon LAke, TX 78133	Proposed Excavation Depth:	N/A
REQUIREME	ENTS:		

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1 FT.					
2 FT.		SAME	AS	ABOVE	
3 FT.					
4 FT.					
5 FT.					

FEATURES OF SITE AREA

Presence of 100 year flood zone			□ Yes	⊠No
Presence of upper water shed			□ Yes	⊠No
Presence of adjacent ponds, streams, water impoundments			□ Yes	🗹 No
Existing or proposed water well in nearby area (within 150 feet)			□ Yes	🗹 No
Ground Slope	3	 %		

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

Share Uning

(Signature of person performing evaluation) Form # PA5/030204-Final 3/11/2024 (Date) OS # 0037882

Registration Number and Type



GW Designs Garrett R. Winters 1332 Mountain View DR, Canyon Lake TX

November 4th, 2024

<u>Comal County Engineer's Office</u> 195 David Jonas Drive New Braunfels, TX 78132

RE- Septic Design

1605 FM 3424 Canyon Lake, TX 78133

Brandon/Brenda

The unique circumstances of this property make it difficult to comply with the 20ft spray setback requirement. I hereby request a variance for the placement of the spray disposal area 10 feet from the property lines, as well as a battery backup timer to be installed to ensure sprayers only spray during the predawn hours. Installing this timer will provide equivalent protection with TCEQ CHAPTER 285 rules Table X. In my professional opinion this variance will not pose a threat to the environment or public health.

Please feel free to contact me with any questions or concerns.

Sincerely,

Garrett R. Winters R.S



GW Septic Designs



On-Site Sewage Facility Application and Design

Prepared By: Garrett R. Winters Registered Professional Sanitarian R.S# <u>5213</u>



<u>Contact Information</u> Phone: (210) 854-2673 Email: Gwintersseptics@gmail.com 1332 Mountain View Dr. Canyon Lake, TX 78133



Owner/Site Location

Owner/Builder:Terry DeLacey Address: 1605 FM 3424 Canyon Lake, TX 78133 Subdivision: The Point at Rancho Del Lago Phase1 Lot: 66

LOT DESCRIPTION

The proposed method of wastewater treatment is aerobic treatment with spray irrigation. The sizing of the OSSF was determined as specified in the Texas Commission on Environmental Quality (TCEQ) CHAPTER 285.33 (C)(2). Water saving devices are assumed for the septic system design. This site is not within the 100-Year flood plain (see site plan). Water to the property will be serviced by Public Water Supply.

This design was performed in conformance with Chapter 285 of the Texas Commission on Environmental Quality. I have performed a thorough site visit of the proposed lot as a Professional Registered Sanitarian and Site Evaluator in accordance with Chapter 285, Subchapter D, regarding Recharge Features, of the Texas Commission on Environmental Quality.

System Summary

- 600gpd Aerobic treatment unit
- Manual 24HR control timer
- 20gpm submersible effluent pump
- SCH40 PVC Sewer pipe
- 1" purple PVC SCH40 supply line
- Liquid Chlorinator (EZ Tank)
- 3 K-Rain Gear Driven Pop-up Sprinklers not to exceed 40PSI.
- Sprinklers: *See Site Plan Page*
- Visual and audio alarms monitoring high water and aerator failure placed in a noticeable location.

Wastewater Design Flow

Structure: RV Bedrooms: N/A Wastewater Usage Rate: 114GPD Application Rate: 0.064 Application Area Required: 1,781sf Actual Application Area: 4,926sf

System Components

Pretreatment Tank: 500gal Pump Tank: 800gal Aeration Tank: 600gpd Pump: C1 Series Mid suction Or equivalent Pump tank reserve minimum: 38gal



Potable Water Lines

Potable water lines must be at a minimum distance of 10 feet from OSSF components. If a water line is within 10 feet, it must be sleeved with 2" SCH40 PVC Pipe in order to provide equivalent protection of a 10' separation in compliance with TAC chapter 290, Subchapter D, Rules for Public Drinking Water Systems.

Landscaping

The native vegetation in the distribution area should consist of low-level shrubs, plains grass, bluestem, or Bermuda. The entire application area must maintain a ground cover after construction. Exposed rock will be covered when in the application area with fine soil such as sandy loam.

If the slope in the drain field area is greater than 15% or is complex, the area is unsuitable for the disposal method, suitable fill shall be brought into the field area to meet this requirement. Surface application systems may apply treated and disinfected effluent upon areas with existing vegetation. If any ground within the proposed surface application area does not have vegetation, that bare area shall be seeded or covered with sod before system start-up. The vegetation shall be capable of growth before the system start-up.

Installation

A 3" or 4" solid-wall SCH40 or SDR 26 PVC pipe with a minimum downward slope of 1/8 inch per foot will be installed between the tank and house. A 2-way cleanout must be included in the line between the house and tank. All piping from house-to-tank and tank-to-drain field must be bedded with class lb, II, or III soils containing less than 30% gravel. The bottom of the excavation for the tank shall be level and free of large rocks/debris, the tanks shall then be bedded with a 4" layer of sand, sandy loam, 3/4 dust or pea gravel. All openings in the tank are to be sealed to prevent the escape of wastewater. For all OSSF's permitted on OR after September 1, 2023, inspection and cleanout ports shall risers over the port openings which extend to a minimum of two inches above grade. A secondary plug, cap, or other suitable restraint system shall be provided below the riser cap to prevent tank entry if the cap is unknowingly damaged or removed. A secondary plug, cap, or other suitable restraint system shall be provided below the riser cap to prevent tank entry if the cap is unknowingly damaged or removed. Risers must be fitted with removable watertight caps and protected against unauthorized intrusions. Acceptable protective measures include: a padlock and a cover that can be removed with tools.

Electrical Components

All electrical wiring shall conform to the requirements of the National Electric Code (1999) or under any other standards approved by the executive director. Additionally, all external wiring shall be installed in approved, rigid, non-metallic gray code electrical conduit. The conduit shall be buried according to the requirements in the National Electric Code and terminated at a main circuit breaker panel or sub-panel. Connections shall be in approved junction boxes. All electrical components shall have an electrical disconnect within direct vision from the place where the electrical device is being serviced. Electrical disconnects must be weatherproof (approved for outdoor use) and have maintenance lockout provisions.



Maintenance Requirements

The homeowner is primarily responsible for maintaining a properly functioning aerobic treatment system. The installer is responsible for furnishing the homeowner with the installation manual and instructing the homeowner on proper use for this type of OSSF. The following provisions are required by the homeowner:

- A maintenance contract must be maintained for the first 2 years by a licensed maintenance contractor.
- A constant supply of chlorine must be provided to the OSSF system.
- The owner must prohibit the discharge of grease into the OSSF system.
- Keep the spray area mowed and tank area free of ants and weeds.
- Maintain all faucets and toilets inside the home free of leaks.
- Maintaining the pretreatment tanks by pumping them out every 3-5 years to avoid sludge buildup.

Maintenance Contract

For any OSSF with a pump, the installer shall provide the Designated Representative with proof of an executed twoyear full-service maintenance contract as required by the TCEQ. The maintenance company will verify that the system is operating properly and that they will provide on-going maintenance of the installation. The initial contract will be for a minimum of 2 years. A maintenance contract will authorize the Maintenance Company to maintain and repair the system as needed. The owner must continuously maintain a signed written contract with a valid maintenance company and shall submit a copy of the contract to the permitting authority at least 30 days prior to the date service will cease.

<u>Affidavit</u>

Prior to issuance of a permit, a certified copy of an affidavit must be submitted to the County Clerk's office. The affidavit is a recorded file in reference to the real property deed on which the surface application is installed on the property. The permit issued to the previous owner of the property being transferred to the new owner in accordance with §285.20(5) of the TCEQ OSSF Rules. The permit will be issued in the name of the owner of the OSSF. Permits shall be transferred to the new owner automatically upon legal sale of the OSSF. The transfer of an OSSF permit under this section shall occur upon actual transfer of the property on which the OSSF is located unless the ownership of the OSSF has been severed from the property.



<u>The following design is intended to follow and meet the TCEQ 30 TAC 285 OSSF Regulations. The</u> performance of this system cannot be guaranteed even though all provisions of 30 TAC 285 have been <u>met or exceeded</u>







PROPLUS[™]



Packed with features that ensure reliability, saving the installer time and money on every job.

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



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Riviera Beach, FL 33404 USA
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FAX: +1 561 842-9493
1.800.735.7246 www.krain.com



Easy Arc Setting

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



Models

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

OTHER OPTIONS: ADD TO PART NUMBER

-CV	Check Valve
-LA	Low Angle Nozzle
-NN	No Nozzle
-RCW	ProPlus for Reclaimed Water
	w/Low Angle Nozzle

How to Specify

Model Number	Description
11003	-RCW

Specifications

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

Performance Data

NOZZLE	PRE PSI	SSURE kPa	E Bars	Ft.	IUS M.	FLOV GPM	V RATE L/M	E M³/H	PREC	IP in/hr	PREC	CIP mm/h
#0.5	30	207	2.1	28	8.5	0.5	1.9	0.11	0.12	0.14	3	4
	40	276	2.8	29	8.8	0.6	2.3	0.14	0.14	0.16	3	4
	50	345	3.5	29	8.8	0.7	2.7	0.16	0.16	0.19	4	5
	60	414	4.1	30	9.1	0.8	3.0	0.18	0.17	0.20	4	5
#0.75	30	207	2.1	29	8.8	0.7	2.7	0.16	0.16	0.19	4	5
	40	275	2.8	30	9.1	0.8	3.0	0.18	0.17	0.20	4	5
	50	344	3.4	31	9.4	0.9	3.4	0.20	0.18	0.21	5	5
	60	413	4.1	32	9.8	1.0	3.8	0.23	0.19	0.22	5	6
#1.0	30	207	2.1	32	9.8	1.3	4.9	0.30	0.24	0.28	6	7
	40	275	2.8	33	10.1	1.5	5.7	0.34	0.27	0.31	7	8
	50	344	3.4	34	10.4	1.6	6.1	0.36	0.27	0.31	7	8
	60	413	4.1	35	10.7	1.8	6.8	0.41	0.28	0.33	7	8
#2.0	30	207	2.1	37	11.3	2.4	9.1	0.55	0.34	0.39	9	10
	40	275	2.8	40	12.2	2.5	9.5	0.57	0.30	0.35	8	9
	50	344	3.4	42	12.8	3.0	11.4	0.68	0.33	0.38	8	10
	60	413	4.1	43	13.1	3.3	11.4	0.68	0.34	0.36	8	9
2.5 Pre-installed	30 40 50 60	207 275 344 413	2.1 2.8 3.4 4.1	38 39 40 41	11.6 11.9 12.2 12.5	2.5 2.8 3.2 3.5	9.5 10.6 12.1 13.3	0.57 0.64 0.73 0.80	0.33 0.35 0.39 0.40	0.38 0.41 0.44 0.46	8 9 10 10	10 10 11 12
#3.0	30	207	2.1	38	11.6	3.6	13.6	0.82	0.48	0.55	12	14
	40	275	2.8	39	11.9	4.2	15.9	0.96	0.53	0.61	14	16
	50	344	3.4	41	12.5	4.6	17.4	1.05	0.53	0.61	13	15
	60	413	4.1	42	12.8	5.0	19.0	1.14	0.55	0.63	14	16
#4.0	30	207	2.1	43	13.1	4.4	16.7	1.00	0.46	0.53	12	13
	40	275	2.8	44	13.4	5.1	19.3	1.16	0.51	0.59	13	15
	50	344	3.4	46	14.0	5.6	21.2	1.27	0.51	0.59	13	15
	60	413	4.1	49	14.9	5.9	22.4	1.34	0.47	0.55	12	14
#6.0	40	276	2.8	45	13.7	5.9	22.4	1.34	0.56	0.65	14	16
	50	344	3.4	46	14.0	6.0	22.7	1.36	0.55	0.63	14	16
	60	413	4.1	48	14.6	6.3	23.9	1.43	0.53	0.61	13	15
	70	482	4.8	49	14.9	6.7	25.4	1.52	0.54	0.62	14	16
#8.0	40	276	2.8	42	12.8	8.0	30.3	1.82	0.87	1.01	22	26
	50	344	3.4	45	13.7	8.5	32.2	1.93	0.81	0.93	21	24
	60	413	4.1	49	14.9	9.5	36.0	2.16	0.76	0.88	19	22
	70	482	4.8	50	15.2	10.0	37.9	2.27	0.77	0.89	20	23

Low Angle Performance Data

NOZZLE	PRE	SSURE		RAD	IUS	FLO\	N RATE		PREC	IP in/hr	PREC	IP mm/hr
	PSI	kPa	Bars	Ft.	M.	GPM	L/M	M ³ /H				
#1.0	30	207	2.1	22	6.7	1.2	4.5	.27	0.48	0.55	12	14
	40	276	2.8	24	7.3	1.7	6.4	.39	0.57	0.66	14	17
	50	345	3.4	26	7.9	1.8	6.8	.41	0.51	0.59	13	15
	60	414	4.1	28	8.5	2.0	7.6	.45	0.49	0.57	12	14
#3.0	30	207	2.1	29	8.8	3.0	11.4	.68	0.69	0.79	17	20
	40	276	2.8	32	9.8	3.1	11.7	.70	0.58	0.67	15	17
	50	345	3.4	35	10.7	3.5	13.2	.80	0.55	0.64	14	16
	60	414	4.1	37	11.3	3.8	14.4	.86	0.53	0.62	14	16
#4.0	30	207	2.1	31	9.4	3.4	12.9	.77	0.68	0.79	17	20
	40	276	2.8	34	10.4	3.9	14.8	.89	0.65	0.75	17	19
	50	345	3.4	37	11.3	4.4	16.7	1.00	0.62	0.71	16	18
	60	414	4.1	38	11.6	4.7	17.8	1.07	0.63	0.72	16	18
#6.0	40	275	2.8	38	11.6	6.5	24.6	1.48	0.87	1.00	22	25
	50	344	3.4	40	12.2	7.3	27.7	1.66	0.88	1.01	22	26
	60	413	4.1	42	12.8	8.0	30.3	1.82	0.87	1.01	22	26
	70	482	48	44	13.4	8.6	32.6	1 96	0.86	0 99	22	25



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CISTERN PUMPS

Designed for use in gray water and filtered effluent service applications, the CI Series cistern pump provides high performance and long life in less than ideal water conditions. Able to pass solids up to 1/8" without having a negative effect on the internal hydraulic components, the pump features a unique bottom suction design allowing 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, CI Series pumps are suitable for use in agricultural, residential, and commercial installations.



G1 SERIE

Franklin Eles



franklinwater.com

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
- Standard backflow prevention through a built-in, but removable, check valve.
- 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, 1/2 hp motor
- Fluid flows of 10, 20, and 30 gpm, with a max shut-off pressure of over 100 psi
- Heavy-duty 300 V 10 foot SJOOW jacketed lead

ORDERING INFORMATION

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

GPM	HP	Volts	Stage	Model No.	Order No.	Length (in)	Weight (lbs)
10		115	6	10C1-05P4-2W115	90301005	26	17
IU		230	6	10C1-05P4-2W230	90301010	26	17
20		115	4	20C1-05P4-2W115	90302005	25	16
20	1/2	230	4	20C1-05P4-2W230	90302010	25	16
201	1/2	115	5	20XC1-05P4-2W115	90302015	26	17
207		230	5	20XC1-05P4-2W230	90302020	26	17
70		115	3	30C1-05P4-2W115	90303005	25	16
50		230	3	30C1-05P4-2W230	90303010	25	16

NOTE: All units have 10 foot long SJOOW leads

Franklin Electric

LBC Manufacturing "EZ-Tank" GRAVITY FLOW Liquid Bleach Chlorinator

US Patent Pending

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LBC Manufacturing P.O. Box 454 Fayetteville, TEXAS 78940 (979) 826-0139 off.

www.liquidchlorinator.com



THIS PRODUCT WAS EVALUATED AS A CHLORINE DISINFECTION DEVICE AND MEETS OR EXCEEDS THE APPLICABLE REQUIREMENTS OF STANDARD 46

RECOMMENDED INSTALLATION INSTRUCTIONS

**** LBC Manufacturing recommends installation by TCEQ licensed and trained installers. ****

- 1. Locate the Aerobic System Holding/Pump tank
- 2. Remove the green access lid mounting screws and remove green access lid.
- 3. Install vertical sensing pipe into Holding/Pump tank. Ensure sensing pipe is resting on the bottom of the Holding/Pump tank. Cut the sensing pipe off below the top of the Holding/Pump tank lid, and secure the sensing pipe to remain vertical in the Holding/Pump tank
- 4. Using PVC Cleaner and PVC glue, attach the barb fitting adapter (supplied on the end of EZ-Tanks vinyl tubing) to the sensing pipe.
- 5. Place the EZ-Tank reservoir inside the holding tank access riser. (EZ-Tank reservoir rests on the secondary safety lid inside the holding tank access riser. If the holding tank access riser does not have a secondary safety lid, replace with new access riser that accommodates the secondary safety lid to code.)
- Next, drill 4.25 inch hole in center of holding tank access lid. (this allows the fill lid to be accessed without having to reopen the holding tank lid) Next, Re-Install holding tank access lid and replace mounting and safety screws.

7. Open EZ-Tank gasketed fill lid. Fill with 6% -10% sodium hypochlorite. Once filled, Replace the gasketed fill lid ensuring a firm secure seal. (If the fill lid is not tightened securely, a vacuum will not form and reservoir will empty sodium hypochlorite contents into Holding/Pump tank prematurely.)



CHLORINE DISINFECTION DEVICE PERFORMANCE

The LBC MFG "EZ-Tank" is a proven disinfection device that meets the applicable requirements of NSF standard 46 for Chlorine disinfection devices. The EZ-Tank is listed as a certified chlorine disinfection device for secondary treated effluent. Certification requires the device to be used with 6-10% sodium hypochlorite (household bleach) The EZ-Tank Disinfection device is a gravity flow product that applies disinfectant to a holding tank as the water level rises thus giving the ultimate amount of contact time for the disinfectant to work.

THE LIQUID CHLORINATION PROCESS

LBC Manufacturing designed and built the "EZ-Tank" to provide years of trouble-free service. It is constructed from durable Polyethylene material which can withstand the corrosive nature of Sodium Hypochlorite (Household Bleach). It has been tested to NSF/ANSI Std 46 and has proven to function more consistently, at a lower operating cost, than any other disinfection method.

The basic function of the Liquid Bleach Chlorinator is to introduce disinfectant to the effluent water in the Holding/Pump tank as the effluent enters. The longer the contact time the disinfectant has to interact with pathogens, the better it disinfects. The ideal method is maximum contact time for minimal pathogen survival.

LIQUID CHLORINATOR OPERATION AND MAINTENANCE

It is the Owner's Responsibility to operate and maintain the Liquid Chlorinator to the best of their ability.

If Service is required, refer to the Data/Service Plate located on the Fill Lid of the Liquid Chlorinator.

The Liquid Chlorinator uses 6-10% Sodium Hypochlorite (Household Bleach). Do not use any other products and or chemicals other than specified. Always maintain a constant supply of disinfectant / Bleach in the Chlorinator Housing at all times. The rate of disinfectant/Bleach usage will vary with individual homeowner water usage. If disinfectant usage increases or decreases, call the service provider.

If flood waters, ants, chemicals etc.. other than Sodium Hypochlorite, enters the Chlorinator Housing, call for service.

****Alwavs use Personal Protective Equipment when Filling or Servicing the Chlorinator*****

- **MONTHLY**: Open the Chlorinator Fill Lid and Visually Inspect the liquid level the chlorine reservoir. Maintain a constant supply of Sodium Hypochlorite (Household Bleach) in the Chlorinator Housing and reservoir at all times. Check Sprinkler discharge for Chlorine redidual. If Service is required, refer to the Data/Service Plate located on the Fill Lid of the chlorinator reservoir
- **PERIODICALLY:** Open the Chlorinator Fill Lid and Visually Inspect the Chlorinator for debris such as dirt, grass clippings etc. Check Sprinkler discharge for Chlorine residual. If Service is required, refer to the Data/Service Plate located on the Fill Lid of the Chlorinator reservoir.
- YEARLY: Visually inspect the Chlorinator Housing for any damage from lawnmowers, etc. Remove dirt/ant build up , grass, etc. from Chlorinator Housing Fill Lid. Check Sprinkler discharge for Chlorine residual.

If Service is required, refer to the Data/Service Plate located on the Fill Lid of the Chlorinator reservoir

FOR INTERMITTENT PERIODS OR EXTENDED PERIODS OF NON-USE

The EZ_Tank is designed to function under normal use or Intermittent periods of use. If periods of non use exceed 6 months, drain Chlorinator Housing and refill with 6-10% Sodium Hypochlorite. If Service is required, refer to the Data/Service Plate located on the Fill Lid of the Chlorinator reservoir.

ArcGIS Web Map



3/8/2024, 2:57:09 PM







ORT/GF#125 /Closer NE 15

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

September 04. 2024 Date:

Grantor: William Scott Davis and Shelly Marie Davis

Grantor's Mailing Address: 7745 FTK DeivE (including county) Jaurg Based County, TX Cornel

Grantee: Terry DeLacey and Dusty DeLacey

Grantee's Mailing Address: 340 Traynor Blyd (including county) Kyle, Hay County, TX 78640

Consideration: TEN AND NO/100 DOLLARS (\$10.00) and other valuable consideration and a note of even date in the principal amount of Sixty-Four Thousand and no/100 DOLLARS (\$64,000.00) executed by Grantee payable to the order of Randolph-Brooks Federal Credit Union. The note is secured by a vendor's lien retained in favor of Randolph-Brooks Federal Credit Union in this deed and by a deed of trust of even date from Grantee to Morton W. Baird II, Trustee.

Property (including any improvements):

Lot 66, THE POINT AT RANCHO DEL LAGO, PHASE ONE, situated in Comal County, Texas, according to the map or plat recorded in Volume 7, Pages 123-126, Map and Plat Records, Comal County, Texas.

Reservations from and Exceptions to Conveyance and Warranty:

This conveyance is made subject to any easements, conditions, mandatory homeowners assessments and/or restrictions of record affecting the title to the hereinbefore described property .

Grantor, for the consideration 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 hereby 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.

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

Randolph-Brooks Federal Credit Union, at Grantee's request, has paid in cash to Grantor that portion of the purchase price of the property that is evidenced by the note described above. The vendor's lien and superior title to the property are retained for the benefit of Randolph-Brooks Federal Credit Union and are transferred to that party without recourse on Grantor.

Revised 10-85

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Revised 10-85

REVISED 4:01 pm, Dec 16, 2024

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 From:
 Ritzen,Brenda

 To:
 Nicole Barnes; Winters, Garrett

 Subject:
 RE: 1605 FM 3424/117335

 Date:
 Wednesday, December 4, 2024 1:10:00 PM

 Attachments:
 image001.png

Nicole,

I have reviewed the revised planning materials and found the following information is needed:

An updated permit application and recorded deed for the new property owner must be submitted.

Submit a new maintenance contract and Affidavit for Certification of OSSF Requiring Maintenance for the new property owner.

3. Revise as needed and resubmit.

Thank you,



Brenda Ritzen Environmental Health Coordinator 195 David Jonas Dr.

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

From: Nicole Barnes <wintersseptics@gvtc.com>
Sent: Tuesday, December 3, 2024 11:18 AM
To: Ritzen,Brenda <rabbjr@co.comal.tx.us>; Winters, Garrett <gwsepticdesigns@gmail.com>
Subject: Fwd: 1605 FM 3424/117335

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

Brenda,

Please see revision for this permit. Let us know if you need anything else.

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.

11

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 66, The Point at Rancho Del Lago, Phase One, an addition in Comal County, Texas

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

William Scott Davis and Shelly Marie Davis

This OSSF must be covered by a continuous mainte owner of an aerobic treatment system for a single fa maintain the system personally.

st two years. After the initial two-year service policy, the r obtain a maintenance contract within 30 days or

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 Arch DAY OF

Owner(s) signature(s)

(PRINTED NAME)

SWORNTO AND SUBSCRIBED BEFORE ME ON THIS 25 DAY OF March 2024

ary Rublic, State of Texas No Notary's Printed Name: Kim My Commission Expires: 05





To Whom It May Concern:

I, William Scott Davis a	nd Shelly Marie Davis, swear that th	e statements below are
True for the properties at _	1605 FM 3424 Canyon Lake, TX 7833	in
Subdivision The Point at R	ancho Del Lago , lot(s) 66	in Comal
County, Texas.		

The 3 bedroom 1035 sq. ft. main house and 1 bedroom detached 384 sq. ft. living are to be lived in by members of a single family

Filed and Recorded Official Public Records Bobbie Koepp, County Clerk Texas 41:37 PM VOI dels obbie Koept Date Signature (Sign in front of a notary) SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 25 DAY OF Mourch 2024 Notary Public, State of Texas KIMBERLY A. PALACIOS Notary Public, State of Texas Comm. Expires 05-23-2026 Notary's Printed Name: Notary ID 131579521 -2021 My Commission Expires: 05





Date		Permit Nur	mber1	17335
1. APPLICANT / AGENT INFORMATION				
Owner Name Scott and Shelly Davis	Agent Name	Garrett R. W	inters	
Mailing Address7845 Elk Dr.	Agent Address	P.O Box 195		
City, State, Zip Spring Branch, TX 78070	City, State, Zip	Spring Branc	h, TX 78070	
Phone #	Phone #	830-935-247	7	
Email	Email	wintersseptic	s@gvtc.com	
2. LOCATION				
Subdivision Name The Point at Rancho Del Lago	L	Init phase 1	Lot66	Block
Survey Name / Abstract Number			Acreag	je 0.52
Address 1605 FM 3424	City Canyon Lake)	State Tx	Zip 78133
3. TYPE OF DEVELOPMENT				
Single Family Residential				
Type of Construction (House, Mobile, RV, Etc.) House + [Detached Living			
Number of Bedrooms 3 Bed House + 1 Bed Detac	hed Living= 4 beds			
Indicate Sq Ft of Living Area 1035+384=1419sf				
Non-Single Family Residential				
(Planning materials must show adequate land area for doubling	the required land nee	ded for treatme	nt units and d	isposal area)
Type of Facility				
Offices, Factories, Churches, Schools, Parks, Etc / indica	ate Number Of Occi	upants		
Restaurants, Lounges, Theaters - Indicate Number of S				
Hotel, Motel, Hospital, Nursing Home - Indicate Number of	f Beds			
Travel Trailer/RV Parks - Indicate Number of Spaces				
Miscellaneous				
Estimated Cost of Construction: \$	(Structure Only)			
Is any portion of the proposed OSSF located in the United Sta	ates Army Corps of	Engineers (US	SACE) flowa	ge easement?
Yes No (If yes, owner must provide approval from USACE for	or proposed OSSF impro	ovements within the	ne USACE flow	age easement)
Source of Water 🖉 Public 🗌 Private Well 🔲 Rainwa	ter			
4. SIGNATURE OF OWNER				
By signing this application, I certify that: - The completed application and all additional information submitted do facts. I certify that I am the property owner or I possess the appropria property.	es not contain any fals te land rights necessa	se information a try to make the	and does not o permitted imp	conceal any material provements on said
 Authorization is hereby given to the permitting authority and designate site/soil evaluation and inspection of private sewage facilities I understand that a permit of authorization to construct will not be issue by the Comal County Flood Damage Prevention. Order. 	ed agents to enter upo ed until the Floodplair	on the above de Administrator	scribed prope has performed	rty for the purpose of d the reviews required

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

9 1 al 11 ignature of Owner 2

Date

Page 1 of 2 Revised January 2021



Routine Maintenance and Inspection Agreement

This Work-for-Hire Agreement (hereafter referred to a	as this "Agreement") is entered into, by,	and between
WILLIAM AND SHELLY DAVIS	(referred to as "Client") and David Win	ters Septic's, LLC, Inc.
(hereafter referred to as "Contractor") located at 1605 FI	M 3424	Date beginning on Issue Date of
and contract ending 2 years from Issue Date of Lice	ense to Operate	License to Operate
By this agreement the Contractor agrees to render prot	fessional service, as described herein, an	d the Client agrees to fulfill the
terms of this Agreement as described herein.		-

This agreement will provide for all required inspections, testing, and service for your Aerobic Treatment System. The policy will include the following:

1. Three (3) inspections per year/service calls (at least one every four months), for a total of six (6) over the two-year period, including inspection, adjustment, and servicing of the mechanical, electrical and other applicable component parts to ensure proper function. This includes inspecting control panel, air pumps, air filters, diffuser operation, and replacing or repairing any component not found to be functioning correctly. Any alarm situations affecting the proper function of the Aerobic process will be addressed within a 48-hour time frame. This contract does not include labor on warranty and non-warranty parts.

2. An effluent quality inspection consisting of a visual check of color, turbidity, scum overflow and examination for odors. A test for chlorine residual and pH will be taken and reported as necessary.

3 If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified on your inspection report.

4. The Client is responsible for the chlorine tablets and/or liquid chlorine; they must be filled before or during the service visit.

5. Any additional visits, inspections or sample collection required by specific Municipalities, Water/River Authorities, and County Agencies the TCEQ or any other authorized regulatory agency in your jurisdiction will not be covered by this policy.

At the conclusion of the initial service policy, our company will make available, for purchase on an annual basis, a continuing service policy cover NORMAL inspection, maintenance and repair.

The Homeowners Manual must be strictly followed or warranties are subject invalidation. Pumping of sludge build up is not covered by this policy and will result in additional charges.

This agreement does not cover any labor or parts for items which must be replaced due to acts of God, i.e., lightning strikes, high winds, flooding, freezing.

This agreement DOES NOT COVER materials or parts which must be replaced due to misuse or abuse of the system. These include but are not limited to: Sewage flows exceeding the recommended daily hydraulic design capabilities, Disposal of Non-Biodegradable materials, such as chemicals, grease or oil, sanitary napkins, tampons, baby wipes, disposable diapers, Clogs in the line between the house and the tank.

This agreement DOES NOT COVER LABOR OR PARTS for out- of- warranty items.



ACCESS BY CONTRACTOR

The contractor or anyone authorized by the contractor may enter the property at reasonable times without prior notice for the purpose of service described above.

PAYMENT AGREEMENT

First 2 years included with new

The client will pay compensation to the contractor for the services in the amount of <u>install</u>. This compensation shall be payable in one lump sum payment upon acceptance of this agreement. Payments not received within 30 days of the above described due date will be subject to a \$25.00 late penalty.

TERMINATION OF THIS AGREEMENT

Either party may terminate this agreement within 10 days of written notice in the event of substantial failure to perform in accordance with its terms by other party without fault of the terminating party. If this agreement is terminated, the contractor will immediately notify the appropriate health authority.

LIMIT OF LIABILTY

The Contractor will not be liable for indirect, consequential, incidental or punitive damages, whether in contract or any other theory. In no event shall the Contractor's liability for direct damages exceed the price for the services described in this agreement.

Permit # ____

The effective date of this initial maintenance agreement shall be the date the license to operate is issued.

Client	Contractor
WILLIAM AND SHELLY DAVIS	David Winters Septic's, LLC, Inc.
Name	
1605 FM 3424	P.O. Box 195
Address	
CANYON LAKE, TX 78133	Spring Branch, Texas 780170
City/State/Zip Code	
830-929-5445	Office 830-935-2477 Fax 830-935-2477
Phone Number	<u></u>
EMAIL-WESTSTAR3@YAHOO.COM	
Hattion file i	By Zury Wintine
Signature of Client	Signature of Contractor
Julter M/ and	Maintenance Provider #-MP0001686

COMAL COUNTY ENGINEER'S OFFICE ON-SITE SEWAGE FACILITY APPLICATION (830) 608-2090 WWW.CCEO.ORG
Planning Materials & Site Evaluation as Require VOID
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?
(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.

A Trace Uning

Signature of Designer

Date



March 11, 2024

<u>Comal County Engineer's Office</u> 195 David Jonas Drive New Braunfels, TX 78132

RE- **Septic Design** 1605 FM 3424 Canyon Lake, TX 78133

Brandon/Brenda

The unique circumstances of this property make it difficult to comply with the 20ft spray setback requirement. I hereby request a variance for the placement of the spray disposal area 10 feet from the property lines, as well as a battery backup timer to be installed to ensure sprayers only spray during the predawn hours. Installing this timer will provide equivalent protection with TCEQ CHAPTER 285 rules Table X. In my professional opinion this variance will not pose a threat to the environment or public health.

Please feel free to contact me with any questions or concerns.

Sincerely,

Garrett R. Winters R.S





Owner/Site Location

Owner/Builder: William Scott Davis Address: 1605 FM 3424. Canyon Lake, TX 78133 Subdivision: The Point at Rancho Del Lago Phase 1 Lot: 66 0.52 Acres

LOT DESCRIPTION

The proposed method of wastewater treatment is aerobic treatment with spray irrigation. The sizing of the OSSF was determined as specified in the Texas Commission on Environmental Quality (TCEQ) CHAPTER 285.33 (C)(2). Water saving devices are assumed for the septic system design. This site is not within the 100-Year flood plain (see site plan). Water to the property will be serviced Public Water Supply.

System Summary

This design was performed in conformance with Chapter 285 of Texas Commission on Environmental Quality.

- 600gpd Aerobic treatment unit
- Manual 24HR control timer (Battery Backup Timer Set to Spray Predawn Hours) _
- 20gpm submersible effluent pump
- SCH40 PVC Sewer pipe
- 1" purple PVC SCH40 supply line
- NSF/ANSI STD 46 Approved Liquid Chlorinator (EZ TANK Gravity Flow Disefenction)
- K-Rain Gear Driven Pop-up Sprinklers not to exceed 40PSI. -
- Sprinklers: 1 360 degree (28'R) 2 90 Degree (28'R) 1 180 Degree (28'R)
- Visual and audio alarms monitoring high water and aerator failure placed in a noticeable location.

Wastewater Design Flow

Structure: Single Family Residence (1,035sf 3BR) + Detached Living (384sf 1BR) Bedrooms: ^^^^ Wastewater Usage Rate: 300gpd Application Rate: 0.064 Application Area Required: 4688sf Actual Application Area: 4926sf

System Components

Pretreatment Tank: 500gal Pump Tank: 800gal Aeration Tank: 600gpd Pump: C1 20gpm submersible pump (Model Pump tank reserve minimum: 100gal



Landscaping

The native vegetation in the distribution area should consist of low-level shrubs, plains grass, bluestem, or Bermuda. The entire application area must maintain a ground cover after construction. Exposed rock will be covered when in the application area with fine soil such as sandy loam.

If the slope in the drain field area is greater than 15% or is complex, the area is unsuitable for the disposal method, suitable fill shall be brought into the field area to meet this requirement. Surface application systems may apply treated and disinfected effluent upon areas with existing vegetation. If any ground within the proposed surface application area does not have vegetation, that bare area shall be seeded or covered with sod before system startup. The vegetation shall be capable of growth before the system start-up.





Potable Water Lines

Potable water lines must be at a minimum distance of 10 feet from OSSF components. If a water line is within 10 feet, it must be sleeved with 2" SCH40 PVC Pipe in order to provide equivalent protection of a 10' separation in compliance with TAC chapter 290, Subchapter D, Rules for Public Drinking Water Systems.

Installation

A 3" or 4" solid-wall SCH40 or SDR 26 PVC pipe with a minimum downward slope of 1/8 inch per foot will be installed between the tank and house. A 2-way cleanout must be included in the line between the house and tank. All piping from house-to-tank and tank-to-drain field must be bedded with class lb, II, or III soils containing less than 30% gravel. The bottom of the excavation for the tank shall be level and free of large rocks/debris, the tanks shall then be bedded with a 4" layer of sand, sandy loam, 3/4 dust or pea gravel. All openings in the tank are to be sealed to prevent the escape of wastewater. *For all OSSF's permitted on OR after September 1, 2023, inspection and cleanout ports shall risers over the port openings which extend to a minimum of two inches above grade. A secondary plug, cap, or other suitable restraint system shall be provided below the riser cap to prevent tank entry if the cap is unknowingly damaged or removed.*

Electrical Components

All electrical wiring shall conform to the requirements of the National Electric Code (1999) or under any other standards approved by the executive director. Additionally, all external wiring shall be installed in approved, rigid, non-metallic gray code electrical conduit. The conduit shall be buried according to the requirements in the National Electric Code and terminated at a main circuit breaker panel or sub-panel. Connections shall be in approved junction boxes. All electrical components shall have an electrical disconnect within direct vision from the place where the electrical device is being serviced. Electrical disconnects must be weatherproof (approved for outdoor use) and have maintenance lockout provisions.

Maintenance Requirements

The homeowner is primarily responsible for maintaining a properly functioning aerobic treatment system. The installer is responsible for furnishing the homeowner with the installation manual and instructing the homeowner on proper use for this type of OSSF. The following provisions are required by the homeowner:

- A maintenance contract must be maintained for the first 2 years by a licensed maintenance contractor.
- A constant supply of chlorine must be provided to the OSSF system.
- The owner must prohibit the discharge of grease into the OSSF system.
- Keep the spray area mowed and tank area free of ants and weeds.
- Maintain all faucets and toilets inside the home f
- Maintaining the pretreatment tanks by pur buildup.



ery 3-5 years to avoid sludge

Maintenance Contract

For any OSSF with a pump, the installer shall provide the Designated Representative with proof of an executed two-year full-service maintenance contract as required by the TCEQ. The maintenance company will verify that the system is operating properly and that they will provide on-going maintenance of the installation. The initial contract will be for a minimum of 2 years. A maintenance contract will authorize the Maintenance Company to maintain and repair the system as needed. The owner must continuously maintain a signed written contract with a valid maintenance company and shall submit a copy of the contract to the permitting authority at least 30 days prior to the date service will cease.





<u>Affidavit</u>

Prior to issuance of a permit, a certified copy of an affidavit must be submitted to the County Clerk's office. The affidavit is a recorded file in reference to the real property deed on which the surface application is installed on the property. The permit issued to the previous owner of the property being transferred to the new owner in accordance with §285.20(5) of the TCEQ OSSF Rules. The permit will be issued in the name of the owner of the OSSF. Permits shall be transferred to the new owner automatically upon legal sale of the OSSF. The transfer of an OSSF permit under this section shall occur upon actual transfer of the property on which the OSSF is located unless the ownership of the OSSF has been severed from the property.



The following design is intended to follow and meet the TCEQ 30 TAC 285 OSSF Regulations. The performance of this system cannot be guaranteed even though all provisions of 30 TAC 285 have been met or exceeded



Pump float settings for 300gpd

(Measure from bottom of tank)

800gal pump tank at 52.5 to bottom outlet = 15.

Pump ON: 12" (184gal) Pump OFF: 18" (276gal) ALARM: 38" (581gal)

220gal reserve capacity



Page 3 of 11

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Capital Title GF# 23-726133-NB

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General Warranty Deed

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.

Date: March 14, 2023

Grantor: Dennis D. Roetman, Terry Jean Roetman a/k/a Terry Jean Burchette, Patricia Marie Roetman-Martin and Janet Lee Higgins, married persons as their sole and separate property

Grantor's Mailing Address: 2513 Southland, Austin, TX 78704

Grantee: William Scott Davis and Shelly Marie Davis, husband and wife

Grantee's Mailing Address: 7845 Elk Drive, Spring Branch, TX 78070

Consideration: the sum of TEN DOLLARS (\$10.00) cash, and other good and valuable consideration

Property (including any improvements):

Lot 66, The Point at Rancho Del Lago, Phase One, an Addition in Comal County, Texas, according to the Map or Plat recorded in Volume 7, Pages 123-126, Map and Plat Records of Comal County, Texas.

Reservations from Conveyance: None/

Exceptions to Conveyance and Warranty:

This conveyance is made and accepted subject to all restrictions, encumbrances, easements, covenants, and conditions relating to the Property filed for record in Comal County, Texas.

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

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

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EXECUTED this day of March, 2023.

Dennis D. Roetman

Terry Jean Roetman a/k/a Terry Jean Burchette

Patricia Marie Roetman-Martin

Janet Lee Higgins THE STATE OF TEXES COUNTY OF TRAVIS

Before me, a Notary Public, the foregoing instrument was acknowledged on <u>Hurd</u> day of March, 2023 by Dennis D. Roetman, Terry Jcan Roetman a/k/a Terry Jean Burchette, Patricia Marie Roetman Martin and Janet Lee Higgins who personally appeared before me, and who is known to me through <u>TX_DL</u> to be the person(s) who executed it for the purposes and consideration expressed therein, and in the capacity stated.



STATE OF NOTĂ

AFTER RECORDING, RETURN TO: <u>Capital Title of Texas</u> <u>168 W. San Antonio Street</u> <u>New Braunfels, TX 78130</u> PREPARED IN THE LAW OFFICE OF Shaddock & Associates, P. C. 2400 N. Dallas Parkway, Ste. 560 Plano, Texas 75093

ահատել շատե

EXECUTED this / day of March, 2023. Dennis D. Roetman a/K/a Verry par Barotette MUShai Terry Jean Roetman a/k/a Terry Jean Burchette Patricia Marie Roetman-Martin Janet Lee Higgins THE STATE OF TENNESSEE § COUNTY OF SUMNER § Before me, a Notary Public, the foregoing instrument was acknowledged on <u>1474</u> day of March, 2023 by Dennis Di Roetman, Terry Jean Roetman a/k/a Terry Jean Burchette, Patricia Marie Roetman Martin and Janet Lee Higgins who personally appeared

<u>*Hin*</u> day of March, 2023 by <u>Dennis D^F</u> Roetman, Terry Jean Roetman a/k/a Terry Jean Burchette, Patricia Marie Roetman Martin and Janet Lee Higgins who personally appeared before me, and who is known to me through <u>IDENTIFICATION (Dewee uc</u>) to be the person(s) who executed it for the purposes and consideration expressed therein, and in the capacity stated.

IN THERINE ANN OF NE ANN PTASIN SUMMER COUNTIN

PUBLIC, ŃÒTARY

TENNESSEE

AFTER RECORDING, RETURN TO: Capital Title of Texas 108 W. San Antonio Street New Braunfels, TX 78130 PREPARED IN THE LAW OFFICE OF Shaddock & Associates, P. C. 2400 N. Dallas Parkway, Ste. 560 Plano, Texas 75093

EXECUTED this _ day of March, 2023. Dennis D. Roetman Terry Jean Roetman a/k/a Terry Jean Burchette Ó Man ľV ŇĬ Patricia Marie Roetman-Martin Janet Lee Higgins THE STATE OF § COUNTY OF 354 §

Before me, a Notary Public, the foregoing instrument was acknowledged on day of March, 2023 by Dennis D. Roetman, Terry Jean Roctman a/k/a Terry Jean Burchette, Patricia Marie Roetman-Martin and Janet-Lee Higgins who personally appeared before me, and who is known to me through DAVES UCLIVE to be the person(s) who executed it for the purposes and consideration expressed therein, and in the capacity stated.

STACY A. LASSETER Notary Public State of Texas ID# 12567591-0 My Comm. Expires 04-28-2026

NOTARY OF PUBL STATE TEXAS

AFTER RECORDING, RETURN TO: Capital Title of Texas Ilos W. San Antonio Street New Braunfels, TX 78130 PREPARED IN THE LAW OFFICE OF Shaddock & Associates, P. C. 2400 N. Dallas Parkway, Ste. 560 Plano, Texas 75093

د دفات السعانية

EXECUTED this <u>14</u> day of March, 2023.

Dennis D. Roetman Terry Jean Roetman a/k/a Terry Jean Burchette

Patricia Marie Roetman-Martin

Janet Lee Higgins

COUNTY OF Collin

Before me, a Notary Public, the foregoing instrument was acknowledged on day of March, 2023 by Dennis-D. Roetman, Terry Jean Roetman a/k/a Terry Jean Burehette, Patricia Marie Roetman Martin and Janet Lee Higgins who personally appeared before me, and who is known to me through ONSTO ID to be the person(s) who executed it for the purposes and consideration expressed therein, and in the capacity stated.

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AFTER RECORDING, RETURN TO: Capital Title of Texas 168 w San Antonio Street New Braunfels, TX 78130

STATE OF

PREPARED IN THE LAW OFFICE OF Shaddock & Associates, P. C. 2400 N. Dallas Parkway, Ste. 560 Plano, Texas 75093

> Filed and Recorded Official Public Records Bobbie Koepp, County Clerk Comal County, Texas 03/15/2023 02:57:30 PM LAURA 5 Pages(s) 202306008005

Babbie Keepp



COMAL CO	DUNTY
E N G I N E E R' S	OFFICE

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

Date Received Initials

117335

Permit Number

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 <u>must</u> 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.



8-25 Date



Revised: September 2019