

Olvera,Brandon

From: Olvera,Brandon
Sent: Thursday, April 18, 2024 12:08 PM
To: Greg Johnson
Cc: Kyle Krohn; Traci Field
Subject: RE: 622 SYCAMORE FALLS - WITT #117336

Good Morning,

File has been updated.

1. Show a cross section of the entire tank.
2. Include the use of an audible and visual alarm in the planning materials

Thank You,

| **Brandon Olvera** | **Designated Representative OS0034792** | Comal County | www.cceo.org |
| 195 David Jonas Dr, New Braunfels, TX-78132 | t: 830-608-2090 | f: 830-608-2078 | e:
olverb@co.comal.tx.us |

From: Greg Johnson <gregjohnsonpe@yahoo.com>
Sent: Tuesday, April 16, 2024 9:59 AM
To: Olvera,Brandon <Olverb@co.comal.tx.us>
Cc: Kyle Krohn <kyle@psseptics.com>; Traci Field <traci@psseptics.com>
Subject: 622 SYCAMORE FALLS - WITT #117336

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

REVISED TO ADD PUMP CHAMBER DUE TO STUBOUT DEPTH.
THX,
GREG

Send for Greg W. Johnson, P.E.,R.S.)

170 Hollow Oak

New Braunfels, TX 78132

Office/Fax (830) 905-2778

Email: gregjohnsonpe@yahoo.com

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: _____

OSSF Installer #: _____

1st Inspection Date: _____

2nd Inspection Date: _____

3rd Inspection Date: _____

Inspector Name: _____

Inspector Name: _____

Inspector Name: _____

Permit#: _____

Address: _____

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

Inspector Notes:

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If Single Tank, 2 Compartments Provided with Baffle SEPTIC TANK Inlet Flowline Greater than 3" and " T " Provided on Inlet and Outlet SEPTIC TANK Septic Tank(s) Meet Minimum Requirements		285.32(b)(1) (E)285.91(2)285.32(b)(1) (F)285.32(b)(1)(E) (iii)285.32(b)(1)(E)(ii) (II)285.32(b)(1)(E)(ii) (I)285.32(b)(1)(E) (i)285.32(b)(1) (D)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (i)285.32(b)(1) (B)285.32(b)(1) (A)285.32(b)(1)(E)(iv)				
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
10	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
11	SEPTIC TANK Secondary restraint system provided SEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
12	SEPTIC TANK Tank Volume Installed						
13	PUMP TANK Volume Installed						
14	AEROBIC TREATMENT UNIT Size Installed						
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number						
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

**Comal County Environmental Health
OSSF Inspection Sheet**

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

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart		285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3) (B)285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)				
33	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.		285.32(c)(1)				
34	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions						
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
37	PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions						
38	PUMP TANK Secondary restraint system provided						
39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

**Comal County Environmental Health
OSSF Inspection Sheet**

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



COMAL COUNTY

ENGINEER'S OFFICE

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

Permit Number: 117336
Issued This Date: 04/15/2024
This permit is hereby given to: MICHAEL WITT

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

622 SYCAMORE FALLS
CANYON LAKE, TX 78133

Subdivision: RIVERS EDGE
Unit: 3
Lot: 1
Block: E
Acreage: 0.0000

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Septic Tank
Leaching Chambers

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

Call (830) 608-2090 to schedule inspections.



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

		117336
<i>Date Received</i>	<i>Initials</i>	<i>Permit Number</i>

Instructions:

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

OSSF Permit

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

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

Signature of Applicant

04/01/2024

Date

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

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



ON-SITE SEWAGE FACILITY APPLICATION

Date June 7, 2023

Permit Number 117336

1. APPLICANT / AGENT INFORMATION

Owner Name MICHAEL WITT
Mailing Address c/o 23011 FM 306
City, State, Zip CANYON LAKE TEXAS 78133
Phone # 830-935-4936
Email paul@psseptics.com

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

2. LOCATION

Subdivision Name RIVER'S EDGE Unit 3 Lot 1 Block E
Survey Name / Abstract Number _____ Acreage _____
Address 622 SYCAMORE FALLS City CANYON LAKE State TX Zip 78133

3. TYPE OF DEVELOPMENT

Single Family Residential
Type of Construction (House, Mobile, RV, Etc.) HOUSE
Number of Bedrooms 3
Indicate Sq Ft of Living Area 2247

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: \$ 400,000 (Structure Only)

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

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

Source of Water Public Private Well Rainwater Collection

4. SIGNATURE OF OWNER

By signing this application, I certify that:

- The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property.
- Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities.
- I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Michael Witt
Signature of Owner

3/25/2024
Date

#117336

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

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

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

System Description PROPRIETARY; SEPTIC TANK AND LEACHING CHAMBERS

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

Tank Size(s) (Gallons) 1000 GAL. DUAL COMP. SEPTIC TANK + 500 PUMP Absorption/Application Area (Sq Ft) 913

Gallons Per Day (As Per TCEQ Table III) 240

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

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

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

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

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

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

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

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

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

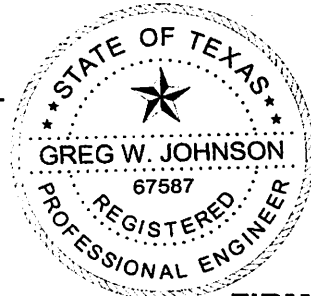
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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

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

Is this property within an incorporated city? Yes No

If yes, indicate the city: _____



FIRM #2585

RECEIVED
By Brandon Olvera at 11:01 am, Apr 18, 2024

By signing this application, I certify that:

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

[Signature]
Signature of Designer

June 9, 2023
Date

ON-SITE SEWERAGE FACILITY SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed: June 08, 2023

Site Location: RIVER'S EDGE, UNIT 3, BLOCK "E", LOT 1

Proposed Excavation Depth: 18" to 36"

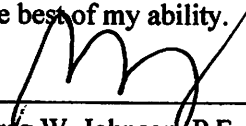
Requirements:

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

SOIL BORING NUMBER <u>1</u>						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	III	CLAY LOAM				BROWN
1						
2						
3						
4						
5	III	SILTY LOAM	N/A	NONE OBSERVED	NONE OBSERVED	LT. BROWN

SOIL BORING NUMBER <u>2</u>						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	SAME		AS		ABOVE	
1						
2						
3						
4						
5						

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



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

06/08/2023

 Date

OSSF SOIL EVALUATION REPORT INFORMATION

Date: June 09, 2023

Applicant Information:

Name: MICHAEL WITT
Address: c/o 23011 F.M. 306
City: CANYON LAKE State: TEXAS
Zip Code: 78133 Phone: (830) 935-4935

Site Evaluator Information:

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

Property Location:

Lot 1 Unit 3 Blk E Subd. RIVER'S EDGE
Street Address: 1264 RIVER OAKS BLVD.
City: CANYON LAKE Zip Code: 78133
Additional Info.: _____

Installer Information:

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

Topography: Slope within proposed disposal area: 1 %
Presence of 100 yr. Flood Zone: YES ___ NO X
Existing or proposed water well in nearby area. YES ___ NO X
Presence of adjacent ponds, streams, water impoundments YES ___ NO X
Presence of upper water shed YES ___ NO X
Organized sewage service available to lot YES ___ NO X

Design Calculations for Leaching Chambers:

Commercial

Q= _____ GPD _____

Residential Water conserving fixtures to be utilized? Yes X No _____
Number of Bedrooms the septic system is sized for: 3 Total sq. ft. living area 2247

Q gal/day = (Bedrooms +1) * 75 GPD
Q = (3 + 1) * 75 - (20 %) = 240

A = Q/Ra = 240 / 0.20 = 1200 sq. ft.

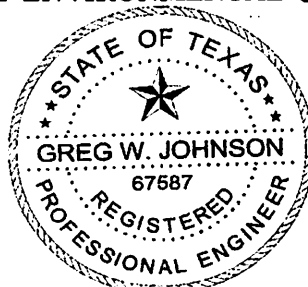
Tank Size = (~3 * Q) = 1000 Gal. Dual Comp.

Excavation Length & Width
L = 0.75A/(W+2) (<3' Wide) = 913 / VARIES = VARIES of VARIES 55-5' PANELS
or
L=0.75(A-2W)/(W+2) (>3'Wide)= _____ / _____ = _____ of _____

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

[Signature]
GREG W. JOHNSON, P.E. 67587 - F#2585

06/09/23
DATE

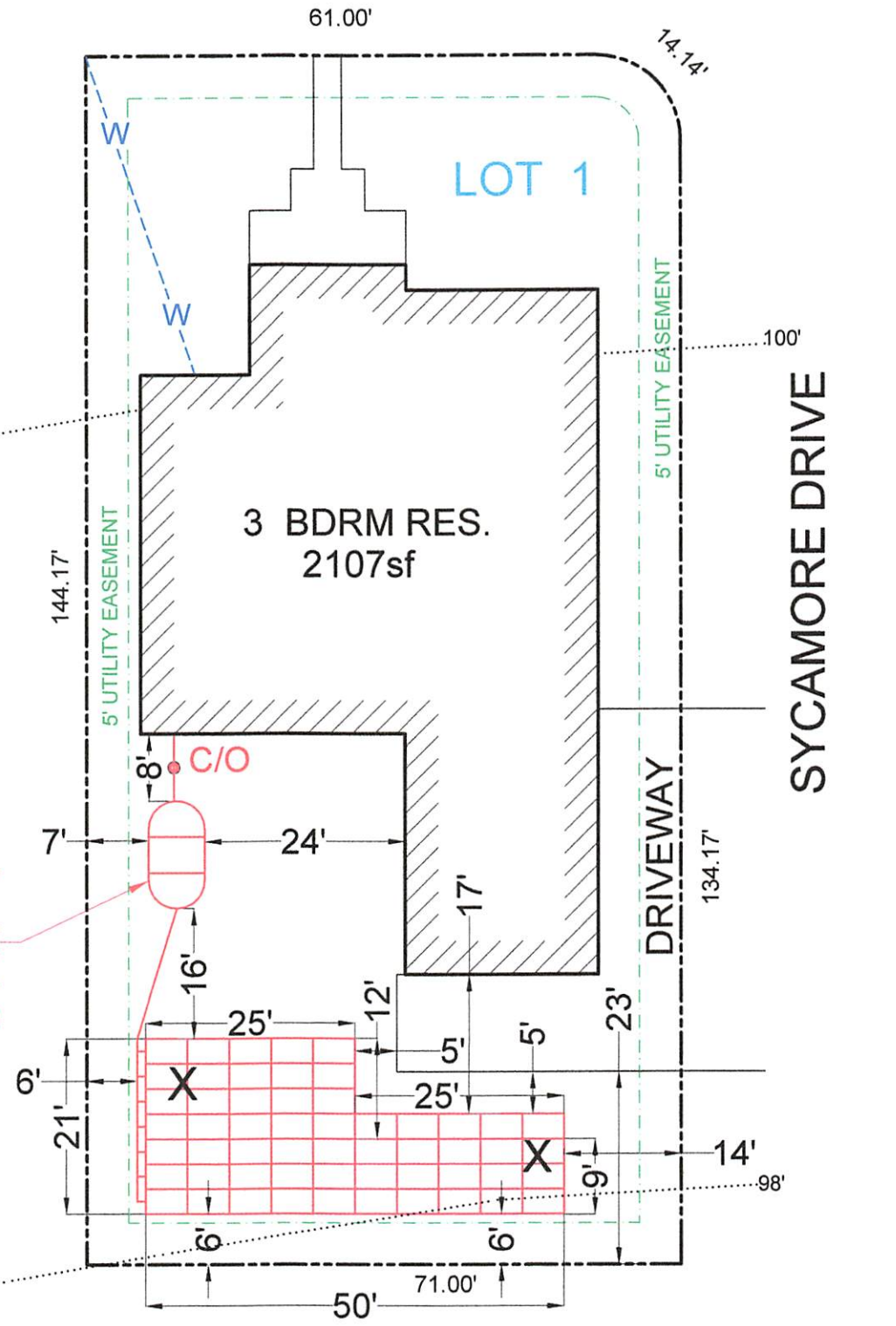


FIRM #2585

INSTALL 973sf OF FIELD USING 55 5'-0" LEACHING CHAMBER PANELS. THERE SHALL BE NO PARKING, DRIVING OR STORAGE ON THE SEPTIC FIELD AT ANY TIME FOR ANY REASON.

*USE TWO WAY CLEAN OUT
 **USE SCH-40 OR SDR-26 TO TANK
 X= TEST HOLE

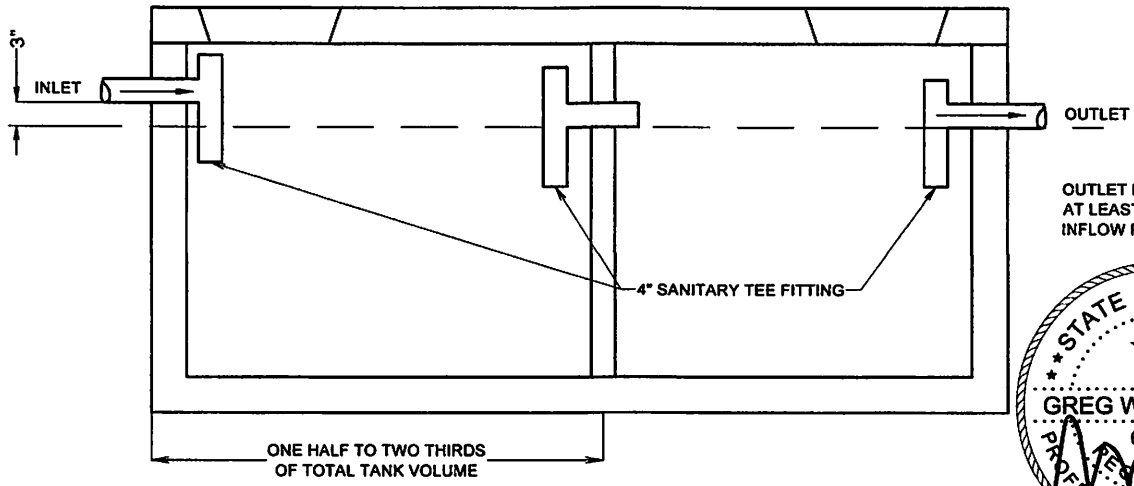
RIVERS OAK BLVD.



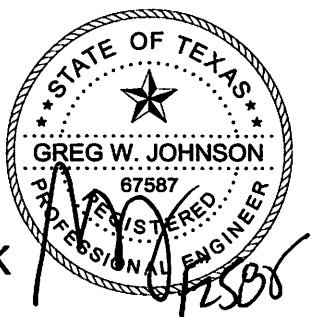
**1500 GAL.
 THREE COMP.
 SEPTIC TANK
 W/PUMP**



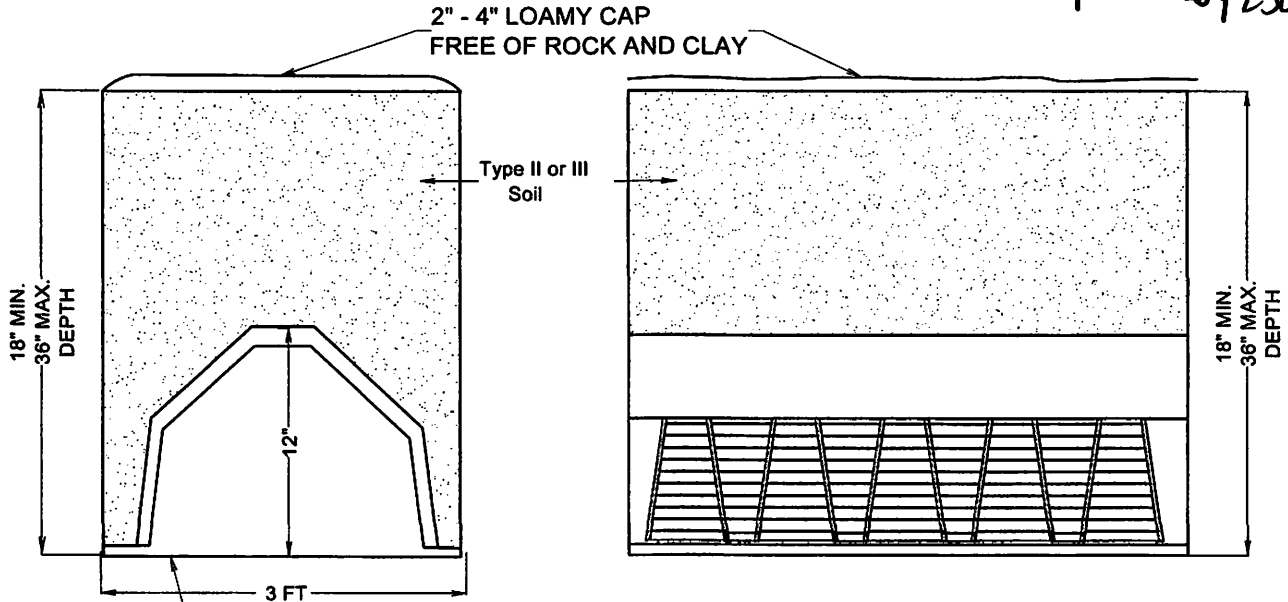
OWNER:	MICHAEL WITT	DRAWN BY:			EJS III
STREET ADDRESS:	622 SYCAMORE FALLS				
LEGAL DESC:	RIVER'S EDGE	UNIT/SECTION/PHASE:	3	BLOCK:	E
				LOT:	1
PREPARED BY:	GREG W. JOHNSON, P.E. F#002585	SCALE:	1"=20'	DATE:	6/9/2023
				3rd REVISION:	4/10/2024



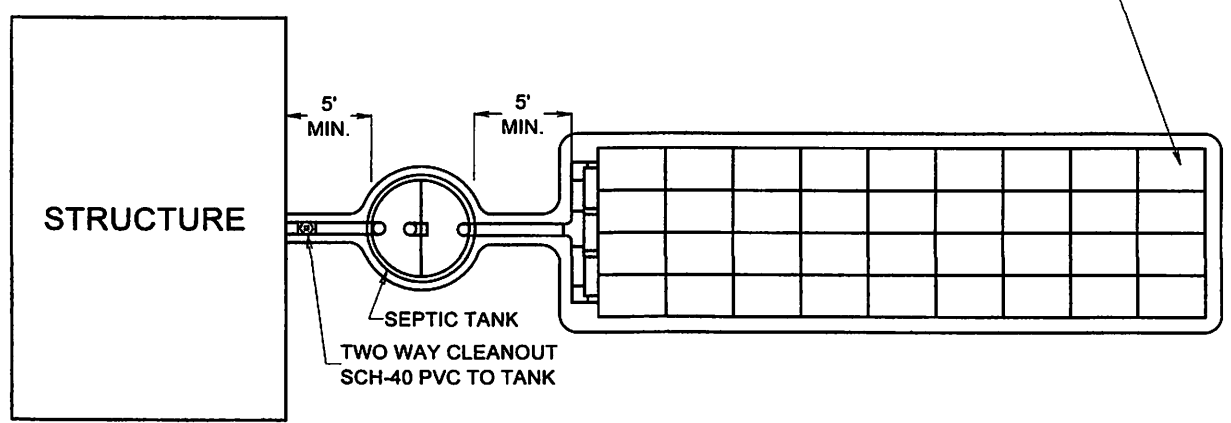
OUTLET PIPE MUST BE AT LEAST 3" LOWER THAN INFLOW PIPE



TYPICAL TWO COMPARTMENT SEPTIC TANK



HANCOR LEACHING CHAMBER DETAIL



HANCOR LEACHING CHAMBER DETAIL

RECEIVED

By Brandon Olvera at 11:03 am, Apr 18, 2024

TANK NOTES:

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

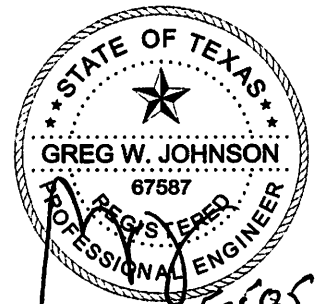
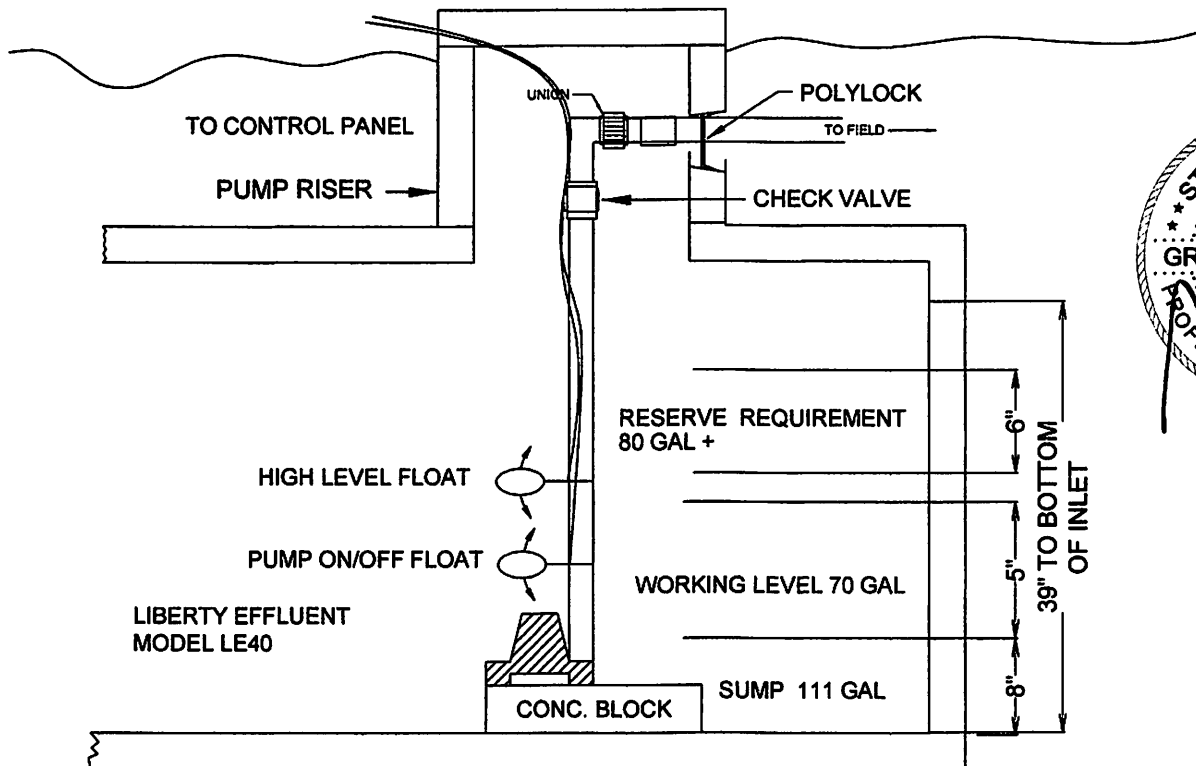
Tightlines to the tank shall be SCH-40 PVC.

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

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

Tanks must be left uncovered and full of water for inspection by the permitting authority.

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



F2585
04/16/24

**TYPICAL PUMP TANK CONFIGURATION
500 GAL 3RD COMP. OF
1500 GAL 3 COMP.**

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

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

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

System Description PROPRIETARY; SEPTIC TANK AND LEACHING CHAMBERS

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

Tank Size(s) (Gallons) 1000 GAL. DUAL COMP. SEPTIC TANK Absorption/Application Area (Sq Ft) 913

Gallons Per Day (As Per TCEQ Table III) 240

(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 certified by a Registered Professional Engineer (R.S.) or Professional Engineer (P.E.)

Is there an existing TCEQ approved CZP 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 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 the property located over the Edwards Contributing Zone? Yes No

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

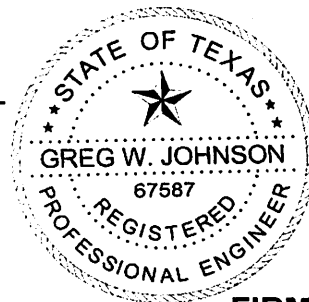
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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

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

Is this property within an incorporated city? Yes No

If yes, indicate the city: _____



FIRM #2585

By signing this application, I certify that:

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

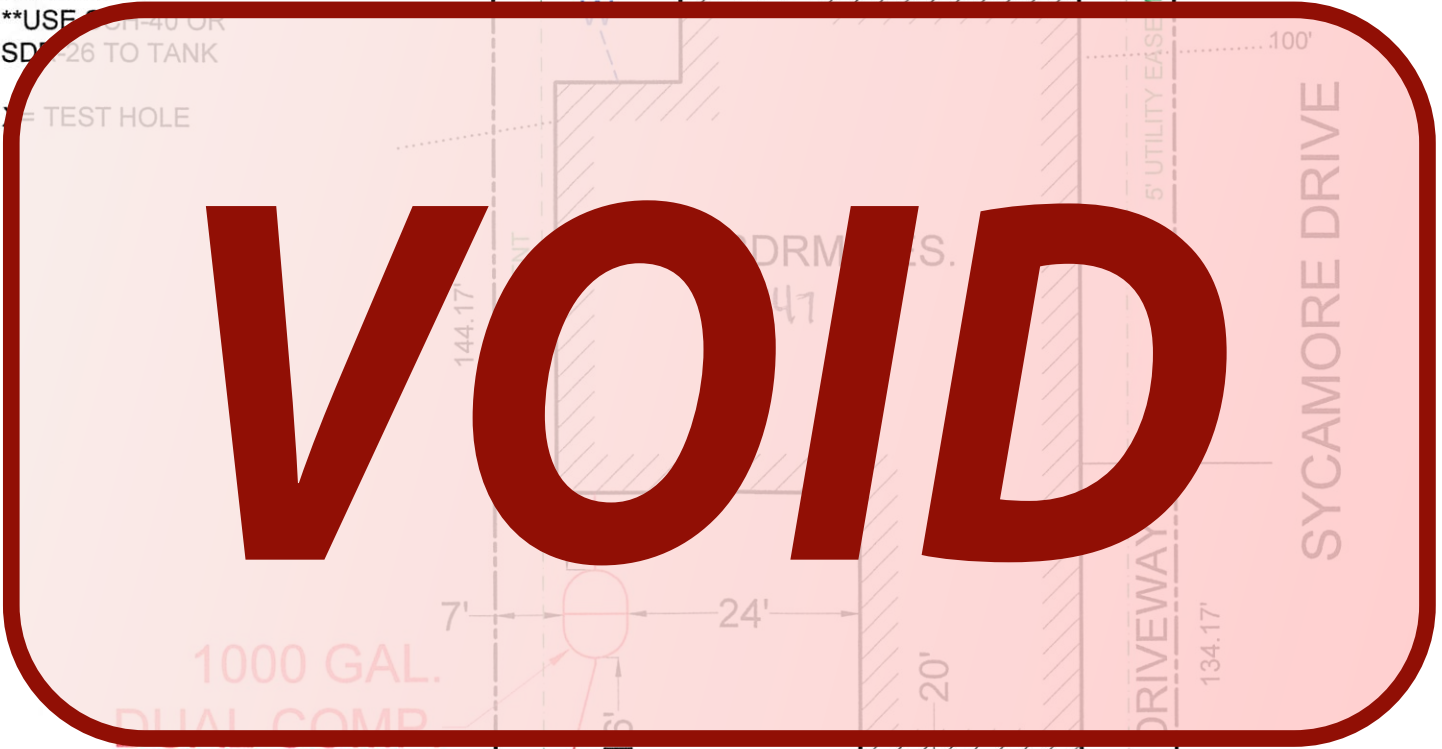
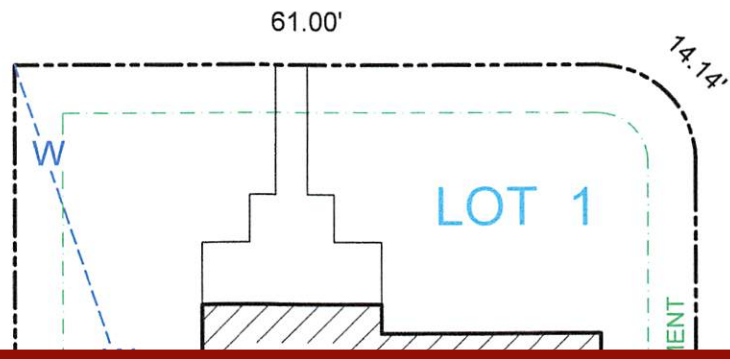
[Signature]
Signature of Designer

June 9, 2023
Date

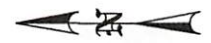
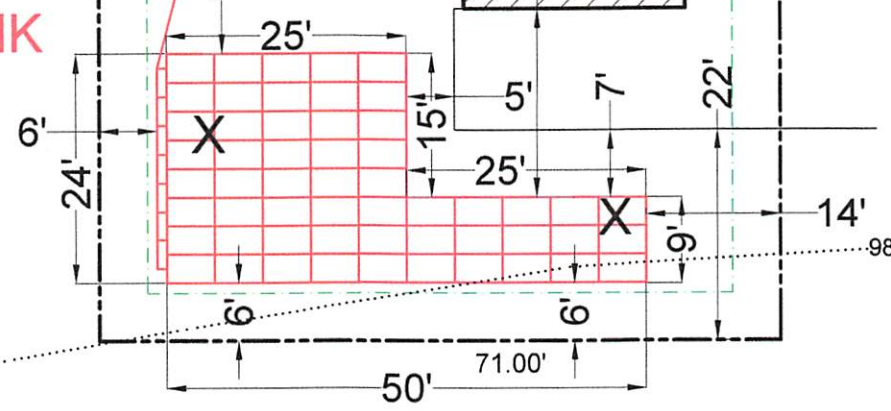
INSTALL 973sf OF
 FIELD USING 55 5'-0"
 LEACHING
 CHAMBER PANELS.
 THERE SHALL BE NO
 PARKING, DRIVING
 OR STORAGE ON
 THE SEPTIC FIELD
 AT ANY TIME FOR
 ANY REASON.

RIVERS OAK BLVD.

*USE TWO WAY
 CLEAN OUT
 **USE 1/2" DIA. OR
 SD 26 TO TANK
 W = TEST HOLE



SEPTIC TANK



OWNER: MICHAEL WITT		DRAWN BY: EJS III		
STREET ADDRESS: 622 SYCAMORE FALLS				
LEGAL DESC: RIVER'S EDGE	UNIT/SECTION/PHASE: 3	BLOCK: E	LOT: 1	
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=20'	DATE: 6/9/2023	2nd REVISION: 9/25/2023	

Stc / GF#1748432 / RDS

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

WARRANTY DEED WITH VENDOR'S LIEN

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

That ROBERT KOURY, hereinafter called Grantor (whether one or more), in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations, to said Grantor in hand paid by MICHAEL WITT, a single person, hereinafter called Grantee (whether one or more), whose mailing address is: 909 Ivy Lane, San Antonio, TX 78209, the receipt of which is hereby acknowledged, and for the further consideration of the sum of \$101,250.00, to Grantor in hand paid by JEFFERSON BANK, which amount is advanced at the special instance and request of the Grantee herein, and as evidence thereof, the Grantee has executed and delivered one certain promissory note of even date herewith for the sum of ONE HUNDRED ONE THOUSAND TWO HUNDRED FIFTY AND NO/100 DOLLARS (\$101,250.00), payable to the order of JEFFERSON BANK, whose mailing address is as set forth in the hereinafter mentioned Deed of Trust, bearing interest and payable as in said note provided; said note containing the usual provisions for attorney's fees and acceleration of maturity in case of default, and being secured by Vendor's Lien herein and hereby expressly retained in favor of the Grantor, on the property hereinafter described, and as further security for the payment of said note, the SUPERIOR TITLE and VENDOR'S LIEN to said property are hereby transferred and conveyed to JEFFERSON BANK without recourse against Grantor, said note being also secured by Deed of Trust of even date herewith to DANNY B. BUTLER, Trustee; has GRANTED, SOLD and CONVEYED, and by these presents Grantor does GRANT, SELL and CONVEY unto the Grantee above named, the following described real property together with all improvements thereon situated in Comal County, Texas, described as follows, to-wit:

Lot One (1), Block E, RIVER'S EDGE, UNIT THREE (3), situated in Comal County, Texas, according to map or plat thereof recorded in Volume 5, Page 100, Map and Plat Records of Comal County, Texas.

TO HAVE AND TO HOLD the said premises, together with the rights, hereditaments and appurtenances thereto belonging, unto the said Grantee above named, Grantee's heirs, successors and/or assigns forever. And Grantor does hereby bind Grantor, Grantor's heirs, successors and/or assigns to WARRANT AND FOREVER DEFEND the title to said property unto the said Grantee above named, Grantee's heirs, successors and/or assigns, against every person whomsoever lawfully claiming or to claim the same, or any part thereof.

Grantee assumes taxes for the current year on the property hereby conveyed.

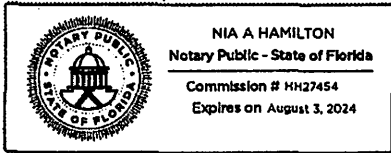
This conveyance and the warranties of title given herein are made subject to any and all restrictions, easements, setback lines, covenants, conditions, reservations, terms and provisions of record affecting the property herein conveyed.

EXECUTED ON THE FOLLOWING DATE: 08/19/2022

Robert Koury
ROBERT KOURY

Florida (ACKNOWLEDGEMENT)
STATE OF §
COUNTY OF Polk §

This instrument was ACKNOWLEDGED before me, on this the 19th day of August, 2022, by ROBERT KOURY, who produced driver license as identification.



Nia A Hamilton
Notary Public, State of Florida
Nia A Hamilton
08/03/2024
HH27454

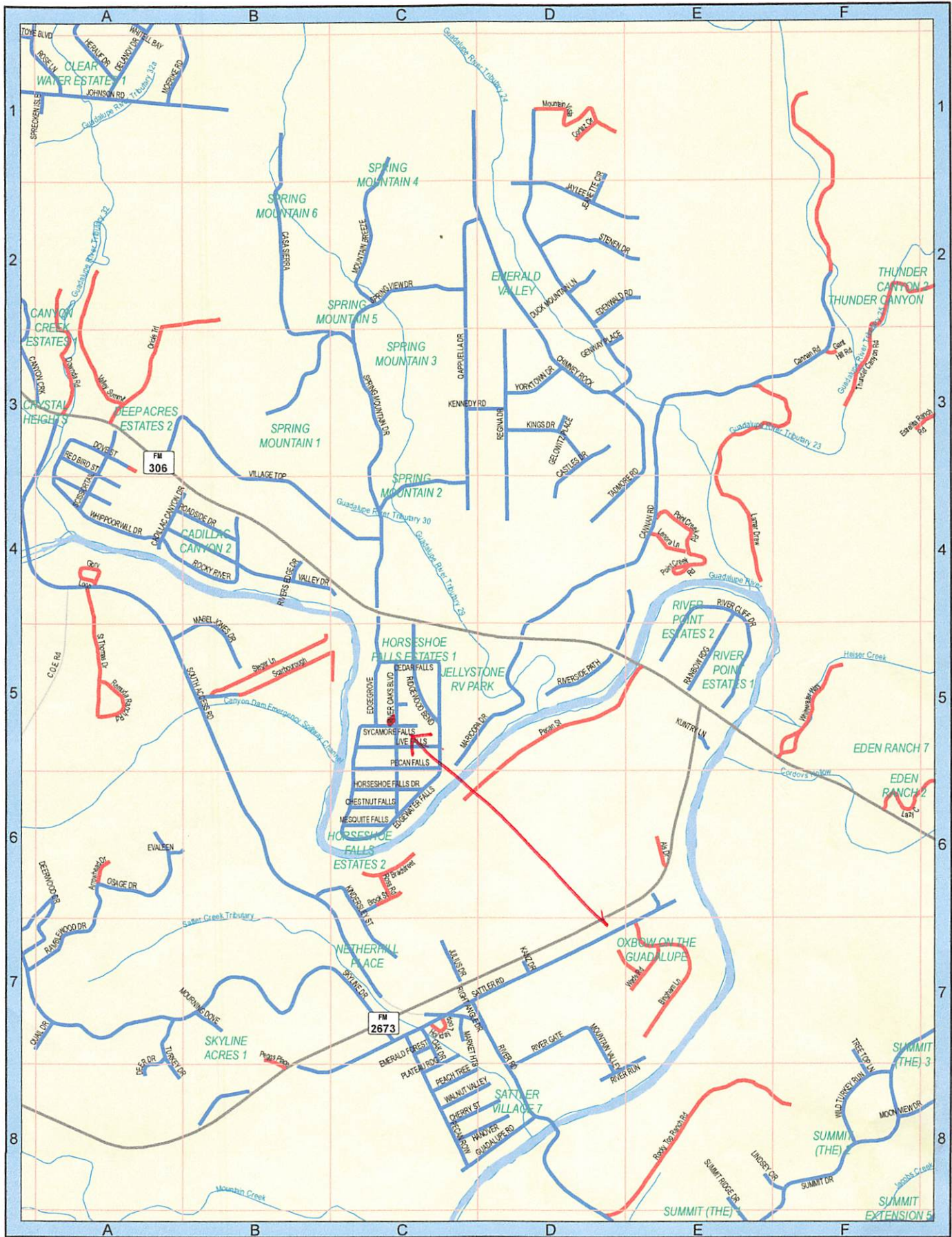
Notarized online using audio-video communication

AFTER RECORDING RETURN TO:
908 Ivy Lane
San Antonio, TX 78209

Prepared in the Law Offices of:
West & West
Attorneys at Law, P.C.
2929 Mossrock, Suite 204
San Antonio, Texas 78230

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
08/19/2022 01:16:57 PM
TERRI 2 Pages(s)
202206037586

 Bobbie Koepp



SEE PAGE 32



0 1,250 2,500
Feet

0 0.25 0.5
Miles