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

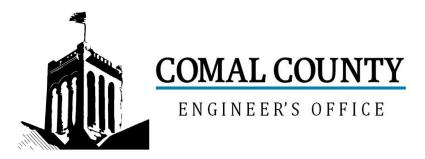
Inspector Notes:

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)(C) (ii)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)				
	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
	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 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)				
	SEPTIC TANK Tank Volume Installed						
	PUMP TANK Volume Installed						
	AEROBIC TREATMENT UNIT Size Installed						
14	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)				

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(4)(4)				
20	Substitution		285.33(d)(4)				
	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(4)				
			285.33(a)(3) 285.33(a)(1)				
24			285.33(a)(1) 285.33(a)(2)				
21	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) 285.33(a)(4)				
23	DISPOSAL SYSTEM Other						
	(describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
24			265.55(0)(4)				
	DRAINFIELD Absorptive Drainline 3" PVC						
	or 4" PVC						
25	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 Excavation Separation						
	DRAINFIELD Depth of Porous Media						
	DRAINFIELD Type of Porous Media						
28							
	DRAINFIELD Pipe and Gravel -		205 22/5//4//5/				
29	Geotextile Fabric in Place		285.33(b)(1)(E)				
	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End						
	Plates w/Splash Plate, Inspection						
	Port & Closed End Plates in Place		285.33(c)(2)				
	(per manufacturers spec.)						
30							
	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length						
	& Width, and Adequate		285.33(d)(1)(C)(i)				
	Separation Distance between						
31	Trenches						

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.						
	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						
	PUMP TANK Secondary restraint system provided						
	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	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)(iv) 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)				
	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						
	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:	117340
Issued This Date:	04/15/2024
This permit is hereby given to:	ROBERT RAY & KIM WOMACK HERVEY

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

414 SCARLET CT CANYON LAKE, TX 78133

Subdivision:	OAK SHORES ESTATES
Unit:	0
Lot:	23
Block:	0
Acreage:	0.7900

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.



OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

117340

Date Received Initials

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.

oss	F Permit
\boxtimes	Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate
\times	Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer
\times	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.
\times	Required Permit Fee - See Attached Fee Schedule
\boxtimes	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

__ COMPLETE APPLICATION

Check No.

Receipt No.

04/01/2024

Date

INCOMPLETE APPLICATION (Missing Items Circled, Application Refeused)

Revised: September 2019

ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

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

	bruary 21, 2024	Permit Number 117340					
1. APPLICANT	AGENT INFORMATION						-
Owner Name	ROBERT RAY HERVEY & KIM WOMACK HERVEY	Agent Name	G	REG JO	HNSO	N, P.E.	
Mailing Address	c/o 106 SAN SALVADOR	Agent Address		170 HOL	LOW	OAK	
City, State, Zip	CANYON LAKE TEXAS 78133	City, State, Zip	NEW B	RAUNF	ELS TI	EXAS 78132	
Phone #	830-832-2848	Phone # 830-905-2778		/8			
Email	david@champagnecustomhomes.com	Email gregjohnsonpe@yahoo.co		hoo.com			
2. LOCATION							
Subdivision Nan	ne OAK SHORES ESTATES	Un	nit	Lot	23	Block	
	Abstract Number						
Address	414 SCARLET COURT	City CANYON	LAKE	State			
3. TYPE OF DE	VELOPMENT	-					-
🔀 Single Fan	nily Residential						
Type of Co	onstruction (House, Mobile, RV, Etc.)	HOUSE					
	f Bedrooms 4						
Indicate S	q Ft of Living Area 2448						
	Family Residential						
(Planning m	aterials must show adequate land area for doubling	the required land neede	ed for treatme	nt unite ar	nd dien		
	acility				na aispi	sai alea)	
Offices, Fa	actories, Churches, Schools, Parks, Etc Indica	 ate Number Of Occur	nante				
Restauran	ts, Lounges, Theaters - Indicate Number of Sea	its	/anto				
Hotel, Mot	el, Hospital, Nursing Home - Indicate Number o	4 D					
	iler/RV Parks - Indicate Number of Spaces			<u> </u>			
Miscellane	eous						
		(Structure Only)					
Is any portion	of the proposed OSSF located in the United Sta	ites Army Corps of E	ngineers (US	SACE) flo	wage	easement?	
🗌 Yes 🛛	No (If yes, owner must provide approval from USACE for	proposed OSSF improve	ments within the	e USACE f	llowage	easement)	
Source of Wate	er 🔀 Public 🔲 Private Well 🔲 Rainwater (-		
4. SIGNATURE							
 The completed ap facts. I certify tha property. 	lication, I certify that: pplication and all additional information submitted doe t I am the property owner or I possess the appropriat	e land rights necessary	to make the p	permitted	improv	ements on said	
- Authorization is he site/soil evaluation - Lunderstand that	ereby given to the permitting authority and designate n and inspection of private sewage facilities	d agents to enter upon	the above des	scribed pr	operty	for the purpose of	
by the Comal Cou - I affirmatively con	a permit of authorization to construct will not be issue inty Flood Damage Prevention Order. sent to the online posting/public release of my e-mail	address associated wit	dministrator h	as perfor	med the	ereviews required	
Mmy	In Kindela			-philograph	n' es qh	hurania.	
Signature of Ov	vner /	<u> </u>	067			Daga 1 of	2
		-				Page 1 of 2 Rovised January 2021	

فله مله مله	By Brandon Olyera at 8:21 am Nov 12 2024 OAK SHORES ESTATES, LOT 2
~ ~ 7	By Brandon Olvera at 8:21 am, Nov 12, 2024 OAK SHORES ESTATES, LOT 2
	APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN
	ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE
Planning Materials & Si	te Evaluation as Required Completed By <u>GREG W. JOHNSON, P.E.</u>
System Description	PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION
	Required Based on Planning Materials & Soil Evaluation
Tank Size(s) (Gallons)	SOLAR AIR SAGOOLP Absorption/Application Area (Sq Ft) 4825
Gallons Per Day (As Per (Sites generating more the	er TCEQ Table III) 300 an 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 mater	ials must be completed by a Registered Sanitarian (R.S.) or Professional Engineer (P.E.))
Is there an existing TCE	Q approved WPAP for the property? 🔲 Yes 🛛 No
(if yes, the R. S. or P. E. s	hall certify that the OSSF design complies with all provisions of the existing WPAP.)
If there is no existing W	/PAP, does the proposed development activity require a TCEQ approved WPAP? 🔲 Yes 🛛 🗙
_	
(If yes, the R.S. or P. E. sh	hall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construction of the proposed WPAP. A Permit to Construction of the proposed WPAP. A Permit to Construction of the appropriate regional office.)
(If yes, the R.S. or P. E. st not be issued for the propo	nall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construc
(If yes, the R.S. or P. E. sh not be issued for the propo- ls the property located of	nall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Constructors of the appropriate regional office.)
(If yes, the R.S. or P. E. st not be issued for the propo- ls the property located of Is there an existing TCE	hall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct osed OSSF until the proposed WPAP has been approved by the appropriate regional office.)
(If yes, the R.S. or P. E. st not be issued for the propo- Is the property located of Is there an existing TCE (if yes, the P.E. or R.S. sh If there is no existing C (if yes, the P.E. or R.S. shi	hall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct osed OSSF until the proposed WPAP has been approved by the appropriate regional office.)
(If yes, the R.S. or P. E. st not be issued for the propo- ls the property located of ls there an existing TCE (if yes, the P.E. or R.S. sh If there is no existing C (if yes, the P.E. or R.S. shi not be issued for the prop	hall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct by the appropriate regional office.) by the Edwards Contributing Zone? Yes No C approval CZP for the property? Yes No all certify that the OSSF design complies with all provisions of the existing CZP) ZP, does the proposed development activity require a TCEQ approved CZP? Yes No all certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to construct will)
(If yes, the R.S. or P. E. st not be issued for the propo- ls the property located of ls there an existing TCE (if yes, the P.E. or R.S. sh If there is no existing C (if yes, the P.E. or R.S. shi not be issued for the prop	hall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Constructor based OSSF until the proposed WPAP has been approved by the appropriate regional office.) bower the Edwards Contributing Zone? Yes No EQ approval CZP for the property? Yes No all certify that the OSSF design complies with all provisions of the existing CZP) Yes No ZP, does the proposed development activity require a TCEQ approved CZP? Yes No all certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to construct will) No posed OSSF until the CZP has been approved by the appropriate regional office.) In an incorporated city? Yes No ity:
(If yes, the R.S. or P. E. st not be issued for the propo- is the property located of is there an existing TCE (if yes, the P.E. or R.S. sh If there is no existing C (if yes, the P.E. or R.S. shi not be issued for the pro- is this property with	hall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct obsed OSSF until the proposed WPAP has been approved by the appropriate regional office.) cover the Edwards Contributing Zone? Yes No cc approval CZP for the property? Yes No all certify that the OSSF design complies with all provisions of the existing CZP) Yes No zP, does the proposed development activity require a TCEQ approved CZP? Yes No all certify that the OSSF design will comply with all provisions of the proposed CZP? Yes No all certify that the OSSF design will comply with all provisions of the proposed CZP? Yes No all certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to construct will) Posed OSSF until the CZP has been approved by the appropriate regional office.) in an incorporated city? Yes No wity:
(If yes, the R.S. or P. E. sh not be issued for the property is the property located of is there an existing TCE (if yes, the P.E. or R.S. sh If there is no existing C. (if yes, the P.E. or R.S. shi not be issued for the pro- is this property with if yes, indicate the c	hall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct one of the proposed WPAP has been approved by the appropriate regional office.) over the Edwards Contributing Zone? Yes No EQ approval CZP for the property? Yes No all certify that the OSSF design complies with all provisions of the existing CZP) Yes No ZP, does the proposed development activity require a TCEQ approved CZP? Yes No all certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to construct will) Yes No all certify that the OSSF design will comply with all provisions of the proposed CZP? Yes No all certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to construct will) Yes No in an incorporated city? Yes No Yes No ity:

ignature of Designer 195 David Jonas Dr., New Braunfels, Texas 78132-3760 (830) 608-2090 Fax (830) 608-2078

Revised July 2018

AFFIDAVIT

THE COUNTY OF COMAL STATE OF TEXAS

CERTIFICATION OF OSSF REQUEING MARYIMANCE

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

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (TCEO) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 5.013, gives the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety code, requires owner's to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To ackieve 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 waterany by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was instabled.

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):

URIT/PHASE/SECTION	BLOCK	L0	TOAK SHORES ESTATES	SUBDIVISION
--------------------	-------	----	---------------------	-------------

IF NOT IN SUBDIVISION: ______ ACREAGE ______ SUBVIY

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

ROBERT RAY HERVEY & KM WOMACK HERVEY

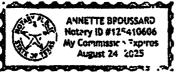
This OSSF must be covered by a continuous maintenance contract for the first two years. After the initial two-year service policy, the owner of an acrobic treatment system for a single family residence shall either obtain a maintenance contract within 30 days or maintain the system personally.

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

DAY OF MARCA WIINERS BY HAND(S) ON THIS nor

Owner(s) signature(s) *

10 20 24 nn otary Public Signature



SWORN TO AND SUBSCRIEED REFORE ME ON THIS / **Filed and Recorded Official Public Records Bobbie Koepp, County Clerk**

DAY OF

0 BC1

Owner (s) Printed some (s)

Comal County, Texas 03/28/2024 01:05:33 PM TERRI 1 Pages(s) 202406009278



Countryside Construction, Inc. 300 Chapman Parkway, Canyon Lake, TX. 78133 Phone: 830-899-2615 or 1-888-379-3721 Fax: 830-899-6662 Septic System Service Agreement

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

Name:	ROBERT &	& KIM W. HERVEY	Address: 4	14 SCARLET CT
	/County:	OAK SHORES ESTATES / COMA		Code CANYON LAKE, TX 78133
Permit #	•	TYPE, Model# & SIZE:	CLEARSTREAM 600NC3T	Serial #:
Phone:				

(X) Initial Two Year Service & Two Year Limited Warranty

Legal Description: LOT 23, OAKS SHORES ESTATES, COMAL COUNTY

The effective date of the initial maintenance contract shall be the date the License to Operate is issued. This contract will be in effect FROM (LTO) TO: Countryside Construction, Inc. will provide the following:

- An inspection every (4) four months which will include: Servicing of the mechanical & electrical components as necessary to
 insure system is functioning as engineer designed, pulling and cleaning the Norweco Brand aerator shaft, cleaning
 compressor air filters of other brands, check chlorine, conduct solids test to determine if system should be pumped, back
 flushing tubing for drip irrigation fields and checking sprinklers on above ground systems.
- 1) The property owner is responsible for "purchasing and keeping chlorine" in the chlorinator, (if applicable). If the chlorine test reveals "No Chlorine" in the system, the property owner may incur an additional cost.
- If any improper operation is observed (which cannot be corrected at that time) the property owner will be notified immediately of the conditions and the estimated cost.
- 3) ANY PARTS, WARRANTY OR NON-WARRANTY, FREIGHT CHARGES, LABOR OR SERVICE CALLS NOT PAID IN FULL AT THE END OF (30) DAYS SHALL REMAIN THE PROPERTY OF COUNTRYSIDE CONSTRUCTION AND AUTHORIZES CONTRACTOR TO REMOVE AND REPOSSESS ANY PARTS INSTALLED. CLIENT FURTHER AGREES TO PAY ANY LABOR COST OF THE INSTALLATION AND REASONABLE COST OF REMOVAL OF SAID PARTS.
- 4) THE SIGNING OF THIS SERVICE AGREEMENT AUTHORIZES COUNTRYSIDE CONSTRUCTION TO ENTER THE PROPERTY TO EXECUTE ALL TERMS OF THIS CONTRACT.

Countryside Construction, Inc., will warranty installation of the septic system to be according to state and county regulations and the designs approved by the county. HOMEOWNER WILL BE RESPONSIBLE FOR SERVICE CALLS, LABOR AND SHIPPING COSTS ON ANY "WARRANTIED PARTS" EXCHANGED DURING WARRANTY. All other components will be according to manufacturer's warranties.

Important: As Countryside Construction, Inc. <u>cannot control</u> what or how much effluent goes into this septic system, we <u>cannot</u> <u>warranty</u> how the system will function. Refer to manufacturers or installer's instructions, for suggestions on septic operation. If necessary, between inspections, it is the property owner's responsibility to clean the micron filters on drip irrigation systems. This service agreement <u>does not</u> cover the cost of "service calls, labor or materials that are required or parts out of warranty, the failure to maintain electrical power to the system, sprinklers that are broken, leaking, stopped-up or otherwise mal-functioning; or sewage flows exceeding the hydraulic/organic design capabilities and the input of non-biodegradable materials (solvents, grease, oil, paints, etc.), or any usage contrary to the requirements as advised by authorized service representative. Laboratory test work is available at an additional cost. Chlorine, filters, or parts that are out of warranty are available at a reasonable cost.

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

Violations of the warranty also include: disconnecting the alarm, restricting ventilation to the aerator, overloading the system above its rated capacity; or flooding by external means. Rodent, insect or fire ant damage or any other form of unusual abuse is a violation. A renewal service contract <u>should</u> be <u>"activated" (30) thirty days</u> before expiration of existing contract. We will contact property owner prior to expiration of existing contract.

Serviced by: Countryside Construction Inc. Walker Chapman – Installer's Licensee #050002929-055F Maintenance Provider Licensee #MP0000035 Maintenance Provider Licensee #MP0000035 Maintenance Provider Licensee #MP0000035 Maintenance Provider Licensee #MP0000035 Montenance Provider Licensee #MP0000035 Maintenance Provider Licensee #MP0000035 Montenance Provider Licensee #MP0000035 Maintenance Provider Licensee #MP0000035 Maintenance Provider Licensee #MP0000035 Montenance Provider Licensee #MP0000035 Maintenance Provide

ON-SITE SEWERAGE FACILITY SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed: _____ February 21, 2024

Site Location:

OAK SHORES ESTATES, LOT 23

Proposed Excavation Depth: _____ N/A

Requirements:

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

SOIL BORING	NUMBER SUI	RFACE EVALUATI	<u>ON</u>			
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0 4" 2	III	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 4"	BROWN
3						
4						

Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
	SAME		AS		ABOVE	
3						
5						

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

02/21/23

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

Date

RECEIVED **OSSF SOIL EVALUATION REPORT 1** By Brandon Olvera at 8:22 am, Nov 12, 2024

Date: February 22, 2024

Applicant Information:

CANYON LAKE

Address: _____

City:__

Name: ROBERT RAY & KIM WOMACK HERVEY

Zip Code: _______ Phone: ______ (830) 832-3085

c/o 106 SAN SALVADOR

State:

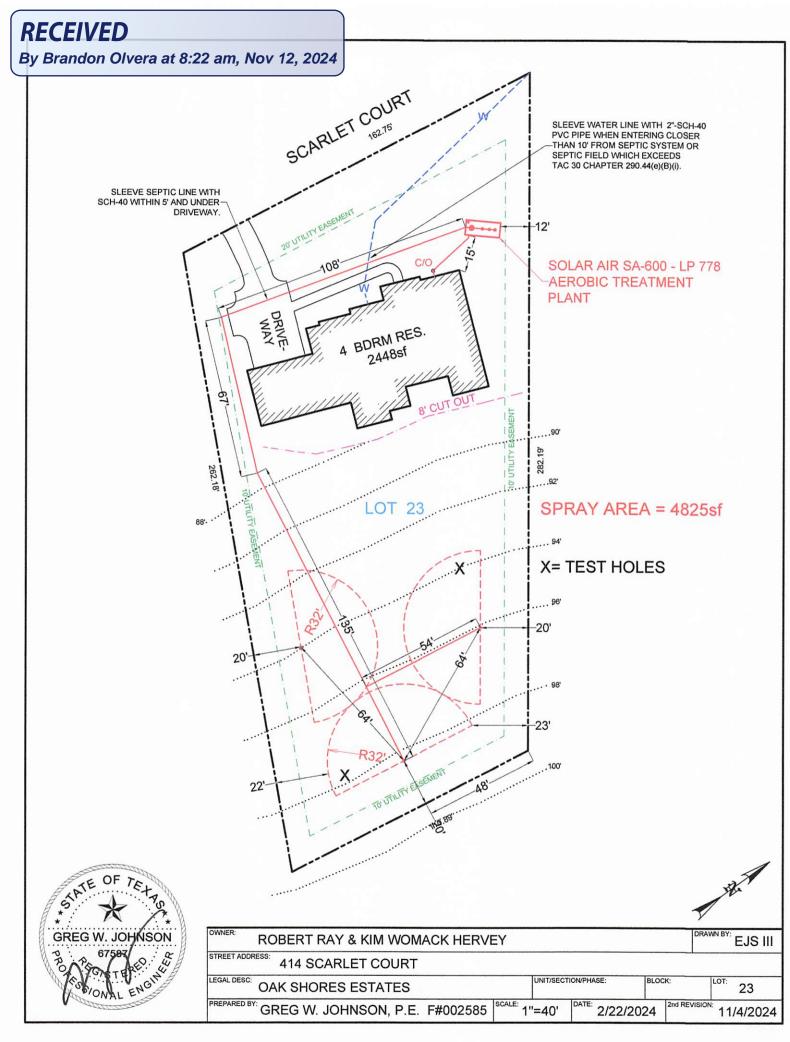
TEXAS

Site Evaluator Information:

Name: Greg W. Johnson	n, P.E., R.S., S.E. 11561
Address: 170 Hollow	Dak
City: New Braunfels	State: Texas
Zip Code: 78132 Ph	none & Fax (830)905-2778

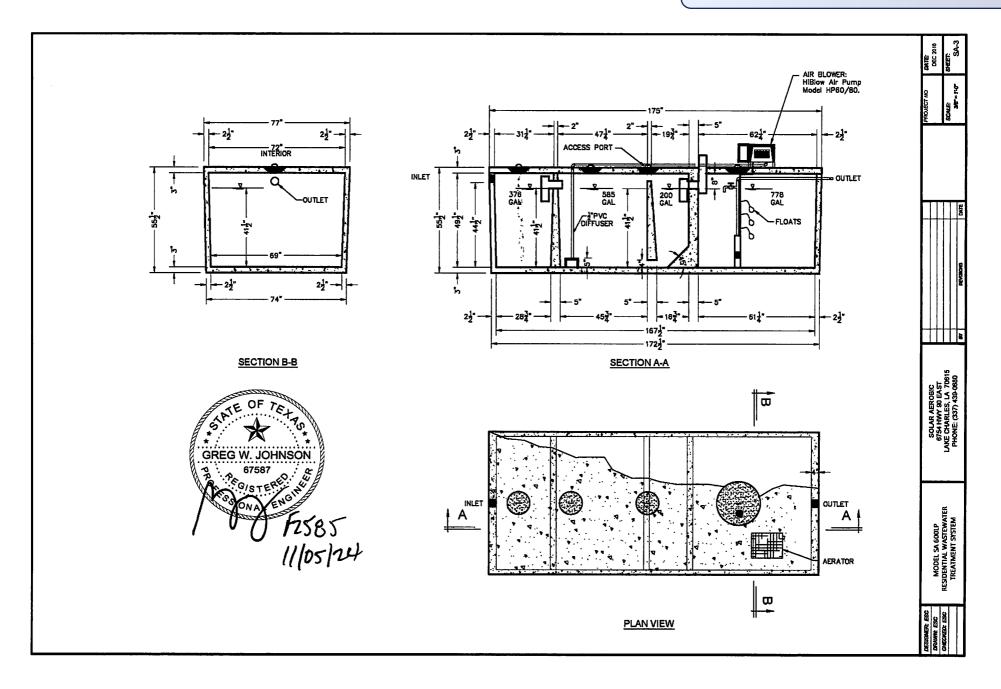
Property Location:	Installer Information:	
Lot 23 Unit Blk Subd. OAK SHORES ESTATES		
Street Address: 414 SCARLET COURT City: CANYON LAKE Zip Code: 78133	_ Company:	
	Address: City:	State.
Additional Info.:	Zip Code: Phone	State
Topography: Slope within proposed disposal area: 8 to		
Presence of 100 yr. Flood Zone:	YES NO X	
	YES NO X	
	YESNO_X	
Presence of upper water shed	YESNO_X	
Organized sewage service available to lot	YESNO_X	
Design Calculations for Aerobic Treatment with Spray	Irrigation:	
Commercial		
O = GPD		
Residential Water conserving fixtures to be utilized? Yes	<u>X</u> No	
Number of Bedrooms the septic system is sized for:4		2448
Q gal/day = (Bedrooms +1) * 75 GPD - (20% reduction for	water conserving fixtures)	
Q = (4 +1)*75-(20%) = 300		
Trash Tank Size 316 Gal.		
TCEQ Approved Aerobic Plant Size G.P.I	D.	
Req'd Application Area = $Q/Ri = 300$ / 0.064	= 4688 sq. ft.	
Application Area Utilized = 4825 sq. ft.		
Pump Requirement <u>12</u> Gpm @ <u>41</u> Psi (Redjac	ket 0.5 HP 18 G.P.M. series or (equivalent)
Pump Requirement 12 Gpm @ _41 Psi (Redjac Dosing Cycle: ON DEMAND or X TIM	ED TO DOSE IN PREDAWN H	IOURS
Pump Tank Size = <u>118</u> Gal. <u>18.15</u> Gal/in	ch.	
Reserve Requirement = 100 Gal. 1/3 day flow.		
Alarms: Audible & Visual High Water Alarm & Visual Air	Pump malfunction	
With Chlorinator NSF/TCEQ APPROVED		
SCH-40 or SDR-26 3" or 4" sewer line to tank		
Two way cleanout		
Pop-up rotary sprinkler heads w/ purple non-potable lids		
1" Sch-40 PVC discharge manifold APPLICATION AREA SHOULD BE SEEDED AND MA	INITAINED WITH VEGETAT	ION
EXPOSED ROCK WILL BE COVERED WITH SOIL .	UNTAINED WITH VEGETAT	
I HAVE PERFORMED A THOROUGH INVESTIGATION BE	ING A REGISTERED PROFESSI	ONAL ENGINEER
AND SITE EVALUATOR IN ACCORDANCE WITH CHAPTE		
(REGARDING RECHARGE FEATURES), TEXAS COMM		-
(EFFECTIVE DECEMBER 29, 2016)	OF TA	
/h/	1- ANTE AT	
$(X \land OZ / 2$		
GREG W. JOHNSON, P.E. F#002585 - S.E. 11561 DA	TE GREG W. JOHNSON	
UND W. JUIINOUN, F.E. F#002303 - S.E. 11301 DA	67587 Q	l de la constante de
	Or COISTERE	FIRM #2585
	SONAL ENGINE	
	M. Commentation	

100%



RECEIVED

By Brandon Olvera at 8:22 am, Nov 12, 2024



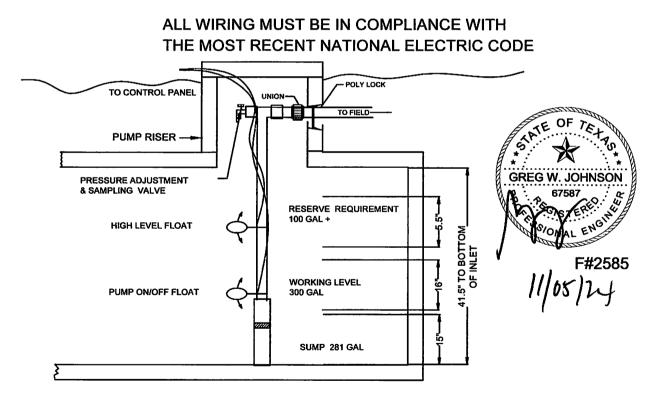
TANK NOTES:

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



TYPICAL PUMP TANK CONFIGURATION SOLAR-AIR SA-600 LP 778 GAL PUMP TANK

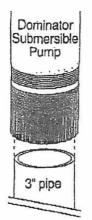
OPERATION

- The pump must be submerged at all times during normal opera-tion. Do not run pump dry.
- Make sure that the float switches are set so that the pump stops before the pump runs dry or breaks suction. If necessary, adjust float switches to achieve this.
- The motor bearings are lubricated internally. No maintenance is required or possible on the pump.

--

Table 1: Recommended Fusing Data 60 Hz/1 Phase 2-Wire Cable

Model	HP .	Voltz/Hz/ Phase	Max Load Amps	Locked Rotor Amps	Fuse Size Standard/ Dual Element
P10D	1/2	115/60/1	11.0	30.0	15
P20D	1/2	115/60/1	9.5	. 30.0	15
P30D	1/2	115/60/1	9.5	30.0	15



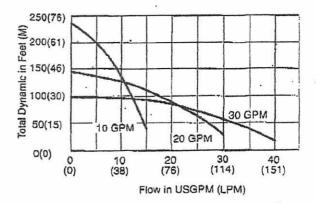
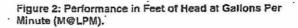
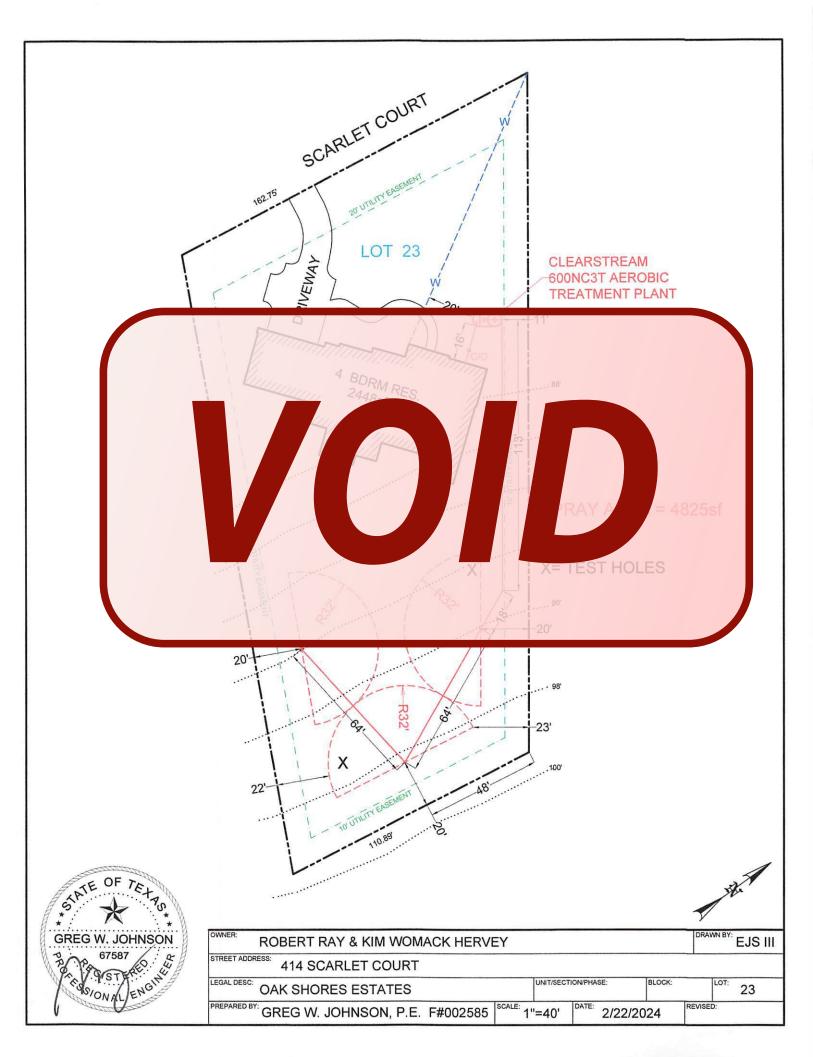


Figure 1: Insert a piece of 3" PVC pipe in the bottom of the motor to raise the pump in the tank.



Nozzle	PSI	Radius	GPM	1.
#1	30	22'	1.5	- KRAI K-Z P
	40	24'	1.7	
	50	26'	1.8	K-2 4
	60	28'	2.0	
#3	30	29'	3.0	
	40	32'	3.1	×.
	50	35'	3.5	
	60	37'	3.8	
#4	30	31'	3.4	
	40	34'	3.9	
	50	37'	4.4	
	60	38'	4.7	
#6	40	38'	6.5	
	50	40'	7.3	
	60	42'	8.0	
	70	44'	8.6	



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

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

Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E. System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION Size of Septic System Required Based on Planning Materials & Soil Evaluation Absorption/Application Area (Sq Ft) Size(s) (Gallons) Tan G Ions Per Day (As Per TCEQ Table III) (S es generating more than 5000 gallons per day are required to obtain a permit through TCEQ) ls he property locate r the Edv (If es, the planning ma here an existing T(Is (if es, the R. S. or P. E. complies wi If ere is no existing \ the propo (If es, the R.S. or P. E. that the OSSF d ermit to Construct will a OSSF until the proposed W no be issued for the prop as been approve a by the appropriate regional office.) e property located over the Edwards Contributing Zone? 🛛 Yes 🗌 No ls existing TCEO approval CZP for the property? Yes is there

(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	AE OF TEL
If yes, indicate the city:	- STAT TO
	GREG W. JOHNSON
	P 67587 E
	SSIONAL ENG
	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



February 22, 2024

Page 2 of 2 Revised July 2018

195 David Jonas Dr., New Braunfels, Texas 78132-3760 (830) 608-2090 Fax (830) 608-2078

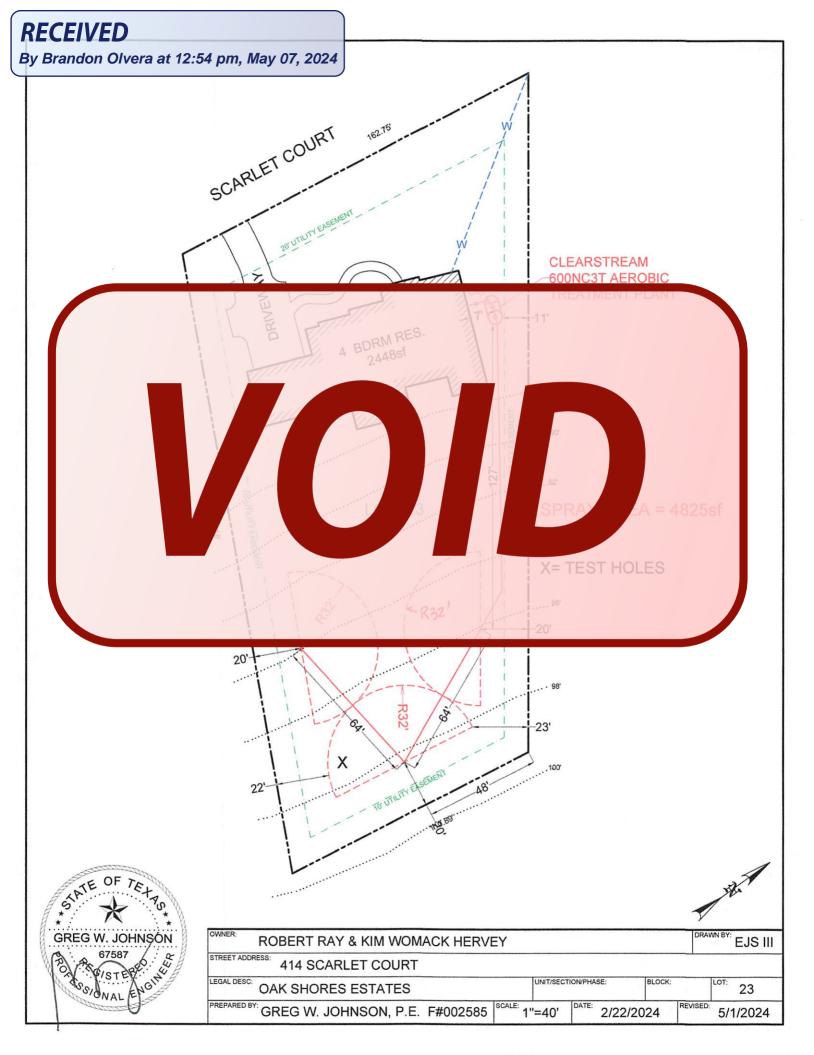
Date

OSSF SOIL EVALUATION REPORT INFORMATION

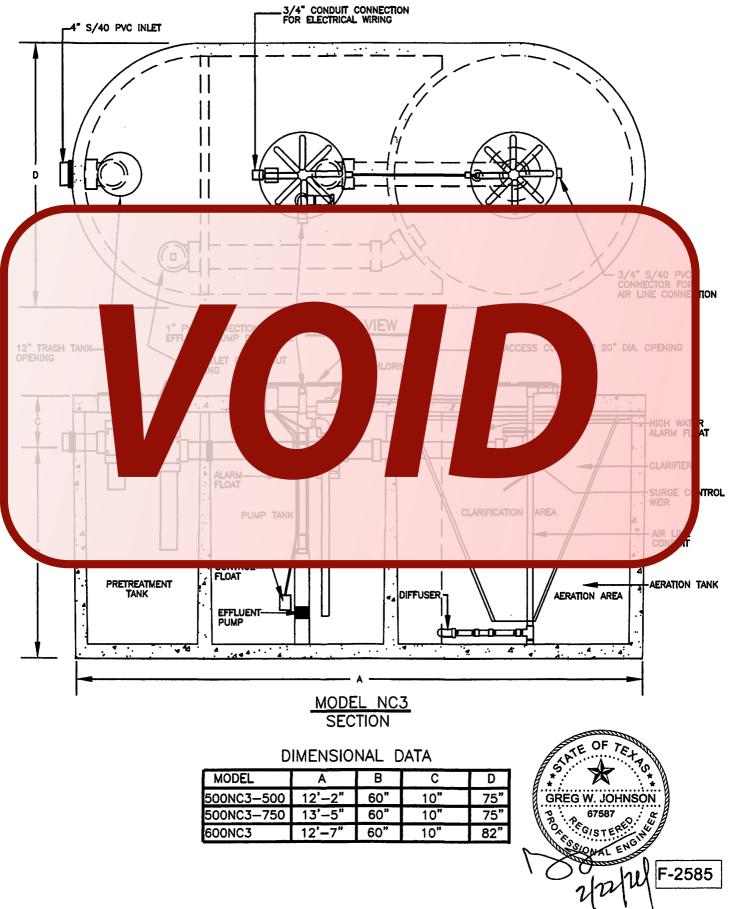
Date: February 22, 2024

Applicant Information:

	Site Evaluator Information:	
Name: ROBERT RAY & KIM WOMACK HERVEY	Name: Greg W. Johnson, P.E., R.S., S.E. 11561	
Address: c/o 106 SAN SALVADOR City: CANYON LAKE State: TEXAS	Address: <u>170 Hollow Oak</u>	
City: CANYON LAKE State: TEXAS Zip Code: 78133 Phone: (830) 832-3085	City: <u>New Braunfels</u> State: <u>Texas</u> Zip Code: <u>78132</u> Phone & Fax (830)905-2778	
Zip Code:Phone:	Zip Code: <u>78132</u> Filone & Fax <u>1850/505-2778</u>	
Property Location:	Installer Information:	
Lot 23 Unit Blk Subd. OAK SHORES ESTAT		
Street Address: 414 SCARLET COURT	Company:	
City: CANYON LAKE Zip Code: 78133		
Additional Info.:	City: State:	
	Lip Code: Phone	
Tor graphy: Slope within proposed disposal area:	8 to 10 %	
Pr sence of 100 yr. Flood Zone:	YESNO_X	
E isting or proposed water well in nearby area.	YES NO_X	
Presence of adjacent ponds, streams, water impoundments	YESNO_X	
Presence of upper the shed	YES X	
O ganized sewage a sea e available t	YES	
D sign Calculation r Aer (res , with Sp.	rigation and a second	
<u>C</u> <u>mmercial</u> Q = (
R sidential Water or ry fixtures utilized? Y	X	• <u>•</u> •••
<u>R</u> sidential Water of ry a lixtures utilized? Y mber of Bedroon a lic system ed for:	T q. ft. g area 448	
Q gal/day = (Bedroo * 75 GPD -	or wat nserv	
$Q = (_4_+1)*7$, (20%)=		
Tash Tank Size 400 Gal.		
TEQ Approved Aerobic Plant Size 600 G	J.P.D.	
Rei d Application Area = Q/Ri = 300 / 0.0		
Apple stion Area Utilized = 4825 sq. ft.		
Pump Requirement Opm @ Isi (Red	ujacket 0.5 HI 18 C.F.IVI. Series of equivalent)	
Dosing Cycle: ON DEMAND or T	TIMED TO DOSE IN PREDAWN HOURS	
$Pump Tank Size = \underline{700} Gal. \underline{12.3} Ga$		
Reserve Requirement = 100 Gal. 1/3 day flow.		
Alarms: Audible & Visual High Water Alarm & Visual	Air Pump malfunction	
With Chlorinator NSF/TCEQ APPROVED		
SCH-40 or SDR-26 3" or 4" sewer line to tank Two way cleanout		
Pop-up rotary sprinkler heads w/ purple non-potable lids		
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EXPOSED ROCK WILL BE COVERED WITH SOIL .		
I HAVE PERFORMED A THOROUGH INVESTIGATION		
AND SITE EVALUATOR IN ACCORDANCE WITH CHAN		
(REGARDING RECHARGE FEATURES), TEXAS CO	MMISSION OF ENVIRONMENTAL QUALITY	
(EFFECTIVE DECEMBER 29, 2016)	TE OF TEL	
/YYX na	177/1/185 - 70	
	1 M X	
GREG W. JOHNSON, P.E. F#002585 - S.E. 11561	DATE GREG W. JOHNSON	
	P	
	FIRM #2585	
	COS/ONAL ENGINE	



DESIGN DRAWINGS

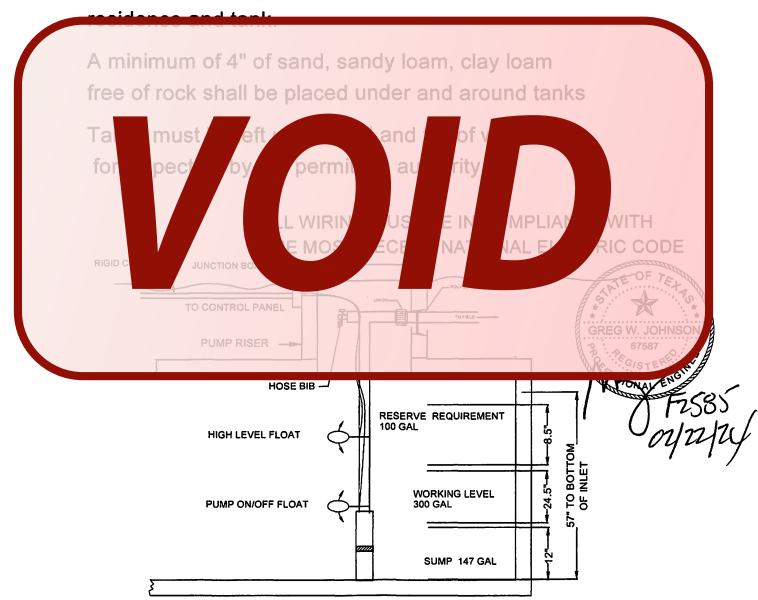


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A two way sanitary tee is required between



TYPICAL PUMP TANK CONFIGURATION CLEARSTREAM 600NC3T W/ 700 GAL PUMP TANK

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: December 24, 2020

Grantor: Francisco V. Diaz and Barbara A. Diaz, husband and wife

Grantor's Mailing Address: <u>854 W. 4155 ST HOUSTON, TX 7700</u>

Grantee: Robert Ray Hervey and Kim Womack Hervey

Grantee's Mailing Address: 2702 SMada of. Sugar Land, Tr. 17478

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

Property (including any improvements):

Lot 23 OAK SHORES ESTATES SUBDIVISION, according to map or plat recorded in Volume 12, Pages 306-310, 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 County, Texas.

Grantor, for the Consideration, and subject to the Reservations from 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 to Grantee and Grantee's successors and assigns forever. Grantor binds Grantor and Grantor's successors and assigns to warranty and forever defend all and singular the Property to Grantee and Grantee's 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.

EXECUTED this _____ day of December, 2020.

20-542650700

This document has been electronically recorded by Capital Title of Texas.

Truniscon Francisco V. Diaz

Barbara A. Diaz

THE STATE OF TEXAS COUNTY OF HARRIS

st

OF

Before me, a Notary Public, the foregoing instrument was acknowledged on 21 day of December, 2020 by Francisco V. Diaz and Barbara A. Diaz who personally appeared before me, and who is known to me through _______ to be the person(s) who executed it for the purposes and consideration expressed therein, and in the conseint stated capacity stated.

NOTARY

TEXAS

§

EBONIE E COLLINS Notary ID #130090836			
Anuary 26, 2023	836 sires	Notary ID #1300908 My Commission Expla	

AFTER RECORDING, RETURN TO:

	•
•	

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

4 7.

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Filed and Recorded

Official Public Records Bobbie Koepp, County Clerk **Comal County**, Texas 12/28/2020 08:29:39 AM CHRISTY 2 Pages(s) 202006058730

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PUBLIC,

STATE

