

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

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

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

**Comal County Environmental Health
OSSF Inspection Sheet**

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



COMAL COUNTY

ENGINEER'S OFFICE

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

Permit Number: 117370
Issued This Date: 04/25/2024
This permit is hereby given to: SALLY JANE DRISCOLL

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

1642 HILLCREST FOREST
CANYON LAKE, TX 78133

Subdivision: CANYON LAKE FOREST
Unit: 1
Lot: 74, 75, 76
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.



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

--	--

Date Received

Initials

117370

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 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

04/11/2024

Date

___ COMPLETE APPLICATION
Check No. _____ Receipt No. _____

INCOMPLETE APPLICATION ___ (Missing Items Circled, Application Refused)
--



COMAL COUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

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

Date March 19, 2024

Permit Number 117370

1. APPLICANT / AGENT INFORMATION

Owner Name SALLY JANE DRISCOLL
Mailing Address c/o 15 PEMBERTON ST.
City, State, Zip CAMBRIDGE, MA 02140
Phone # 415-261-3077
Email phil@darnowsky.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 CANYON LAKE FOREST Unit 1 Lot 74,75,76 Block

Survey Name / Abstract Number Acreage

Address 1642 HILLCREST FOREST City CANYO LAKE State TX Zip 78133

3. TYPE OF DEVELOPMENT

Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1332

Non-Single Family Residential

(Planning materials must show adequate land area for doubling the required land needed for treatment units and disposal area)

Type of Facility

Offices, Factories, Churches, Schools, Parks, Etc. - Indicate Number Of Occupants

Restaurants, Lounges, Theaters - Indicate Number of Seats

Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds

Travel Trailer/RV Parks - Indicate Number of Spaces

Miscellaneous

Estimated Cost of Construction: \$ EXISTING (Structure Only)

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

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

Source of Water Public Private Well Rainwater Collection

4. SIGNATURE OF OWNER

By signing this application, I certify that:

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

x Sally Driscoll by Philip Darnowsky March 22 2024
Signature of Owner as agent POA Date

#117370

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

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

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

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) CLEARSTREAM 600 NC3T Absorption/Application Area (Sq Ft) 4084

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

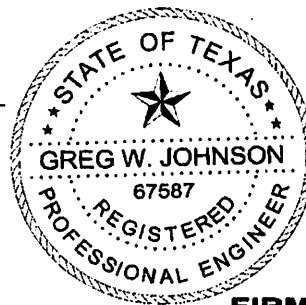
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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: _____



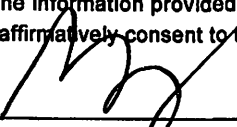
FIRM #2585

RECEIVED

By Brandon Olvera at 3:20 pm, Apr 25, 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 of Designer

March 21, 2024
Date

AFFIDAVIT

**THE COUNTY OF MIDDLESEX
STATE OF MASSACHUSETTS**

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

I

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

II

An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91(12) will be installed on the property described as (insert legal description):

1 UNIT/PHASE/SECTION _____ BLOCK 74, 75, 76 LOT _____ CANYON LAKE FOREST SUBDIVISION

IF NOT IN SUBDIVISION: _____ **ACREAGE** _____ **SURVEY**

The property is owned by (insert owner's full name): SALLY JANE DRISCOLL

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

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

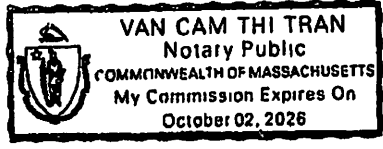
WITNESS BY HAND(S) ON THIS 22 DAY OF March, 2024

[Signature]
Owner(s) signature(s)

PHILIP DARNOWSKY - POA FOR SALLY JANE DRISCOLL
Owner (s) Printed name (s)

PHILIP DARNOWSKY **SWORN TO AND SUBSCRIBED BEFORE ME ON THIS** 22 **DAY OF**
March, 2024

2 1 2
Notary Public Signature



AFFIDAVIT TO THE PUBLIC

THE COUNTY OF MIDDLESEX §
STATE OF MASSACHUSETTS §

PHILIP DARNOWSKY - POA

Before me, the undersigned authority, on this day personally appeared FOR SALLY JANE DRISCOLL
who after being by me duly sworn, upon oath state that
tract or parcel of land lying and being situated in Comal County, Texas, and being more particularly
described as follows:

1 UNIT/PHASE/SECTION BLOCK 74, 75, 76 LOT CANYON LAKE FOREST SUBDIVISION

IF NOT IN SUBDIVISION: ACREAGE SURVEY

The property is owned by (insert owner's full name): SALLY JANE DRISCOLL

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

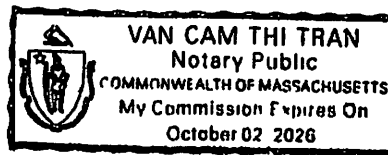
WITNESS MY/OUR HAND(S) on this 21st day of March, 20 24.

[Signature]

PHILIP DARNOWSKY - POA FOR SALLY JANE DRISCOLL

SWORN TO AND SUBSCRIBED BEFORE ME on this 22 day of March, 20 24.

Notary Public Signature



Filed and Recorded
Official Public Records
Bobbie Koeppe, County Clerk
Comal County, Texas
04/08/2024 08:31:16 AM
LAURA 2 Pages(s)
202406010360



Bobbie Koeppe

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: SALLY JANE DRISCOLL Address: 1642 HILLCREST FOREST
Sub-Div./County: CANYON LAKE FOREST / COMAL City, State, Zip Code CANYON LAKE, TX 78133
Permit #: _____ TYPE, Model# & SIZE: CLEARSTREAM 600NC3T Serial #: _____
Phone: 415-261-3077

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

Legal Description: LOT 74, 75, & 76, CANYON LAKE FOREST, UNIT 1, 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.
- 2) 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. cannot control what or how much effluent goes into this septic system, we cannot warranty 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 does not 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 should be "activated" (30) thirty days before expiration of existing contract. We will contact property owner prior to expiration of existing contract.

Served by: *Countryside Construction Inc.*

Walker Chapman - Installer's Licensee #OS0002929-OSSF Maintenance Provider Licensee #MP0000035
Sally Driscoll by Philip Darnowsky as agent for
(X) _____ Print Name (X) SALLY JANE DRISCOLL Date: 3-22-2024
Property Owner Signature

(X) Walker Chapman Date: 3-22-2024 Authorized Service Representative (revised 08/13/2020)

**ON-SITE SEWERAGE FACILITY
SOIL EVALUATION REPORT INFORMATION**

Date Soil Survey Performed: March 19, 2024

Site Location: CANYON LAKE FOREST, UNIT 1, LOTS 74, 75 & 76

Proposed Excavation Depth: N/A

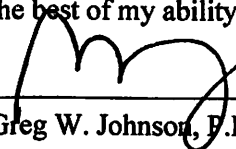
Requirements:

- 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		SURFACE EVALUATION				
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	III	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 10"	BROWN
1						
2						
3						
4						
5						

SOIL BORING NUMBER		SURFACE EVALUATION				
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

03/19/24

 Date

OSSF SOIL EVALUATION REPORT

RECEIVED

By Brandon Olvera at 3:21 pm, Apr 25, 2024

Date: March 20, 2024

Applicant Information:

Name: SALLY JANE DRISCOLL
Address: 15 PEMBERTON STREET
City: CAMBRIDGE State: MASSACHUSETTS
Zip Code: 02140 Phone: (415) 261-3077

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 Unit 1 Blk Subd. CANYON LAKE FOREST
Street Address: 1642 HILLCREST FOREST
City: CANYON LAKE Zip Code: 78133
Additional Info.: LOTS 74, 75 & 76

Installer Information:

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

Topography: Slope within proposed disposal area: 3 to 6 %

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

Design Calculations for Aerobic Treatment with Spray Irrigation:

Commercial

Q = GPD

Residential Water conserving fixtures to be utilized? Yes X No

Number of Bedrooms the septic system is sized for: 3 Total sq. ft. living area 1332

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

Q = (3 +1)*75-(20%)= 240

Trash Tank Size 400 Gal.

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

Req'd Application Area = Q/Ri = 240 / 0.064 = 3750 sq. ft.

Application Area Utilized = 4084 sq. ft.

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

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

Pump Tank Size = 700 Gal. 12.3 Gal/inch.

Reserve Requirement = 80 Gal. 1/3 day flow.

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

With Chlorinator NSF/TCEQ APPROVED

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

Two way cleanout

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

1" Sch-40 PVC discharge manifold

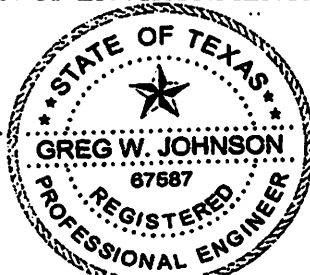
APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

EXPOSED ROCK WILL BE COVERED WITH SOIL .

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

Handwritten signature of Greg W. Johnson and printed name: GREG W. JOHNSON, P.E. F#002585 - S.E. 11561

Handwritten date: 03/20/24 and printed label: DATE



FIRM #2585

RECEIVED

By Brandon Olvera at 3:21 pm, Apr 25, 2024

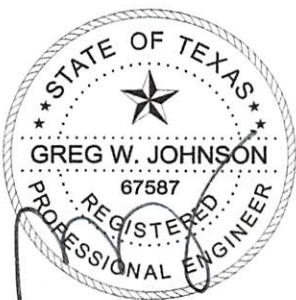
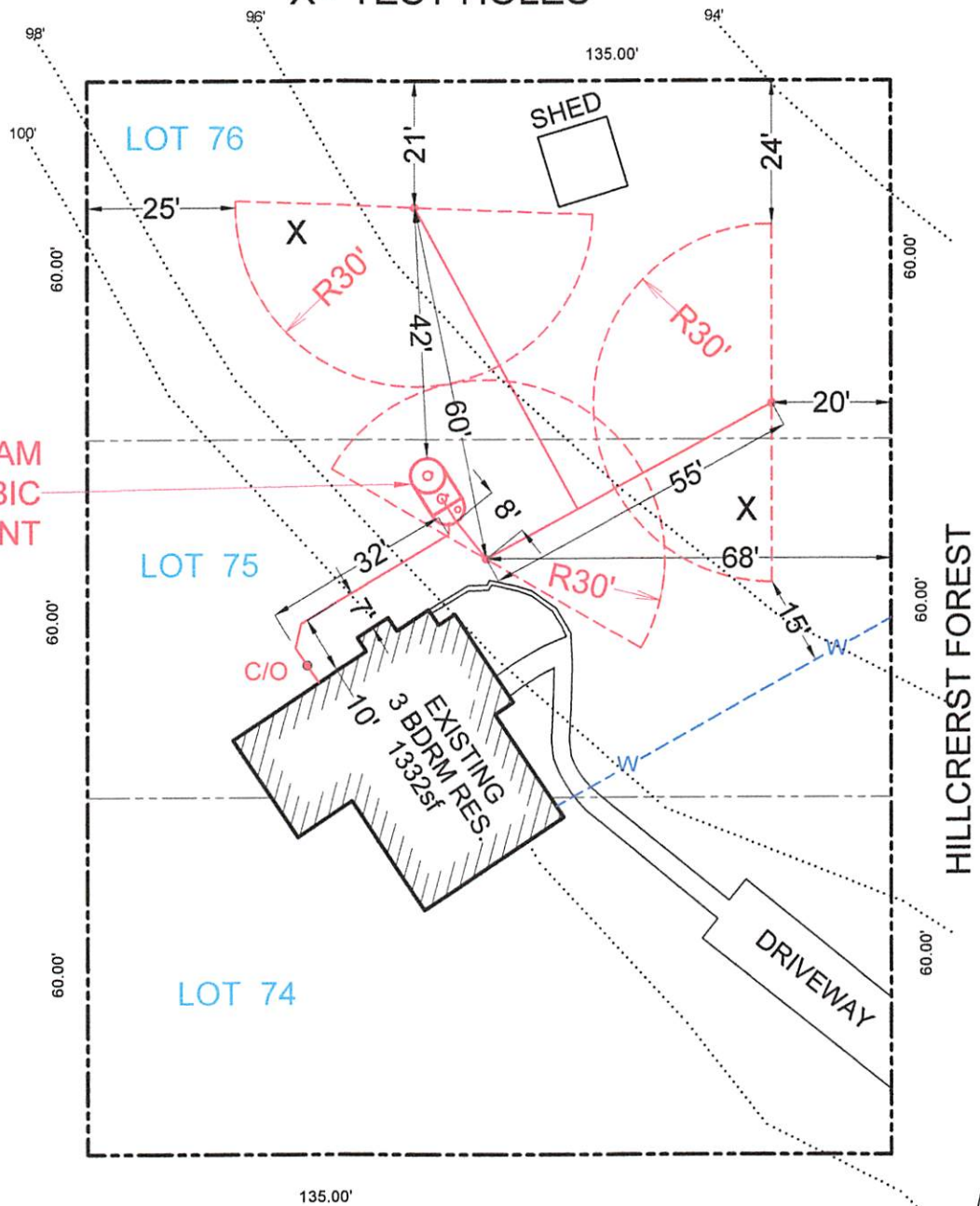
NOTE:
EXISTING SEPTIC
TANK TO BE
PUMPED, CRUSHED
AND BACK FILLED.
EXISTING SEPTIC
SYSTEM TO BE
ABANDONED

SPRAY AREA = 4084sf

X= TEST HOLES

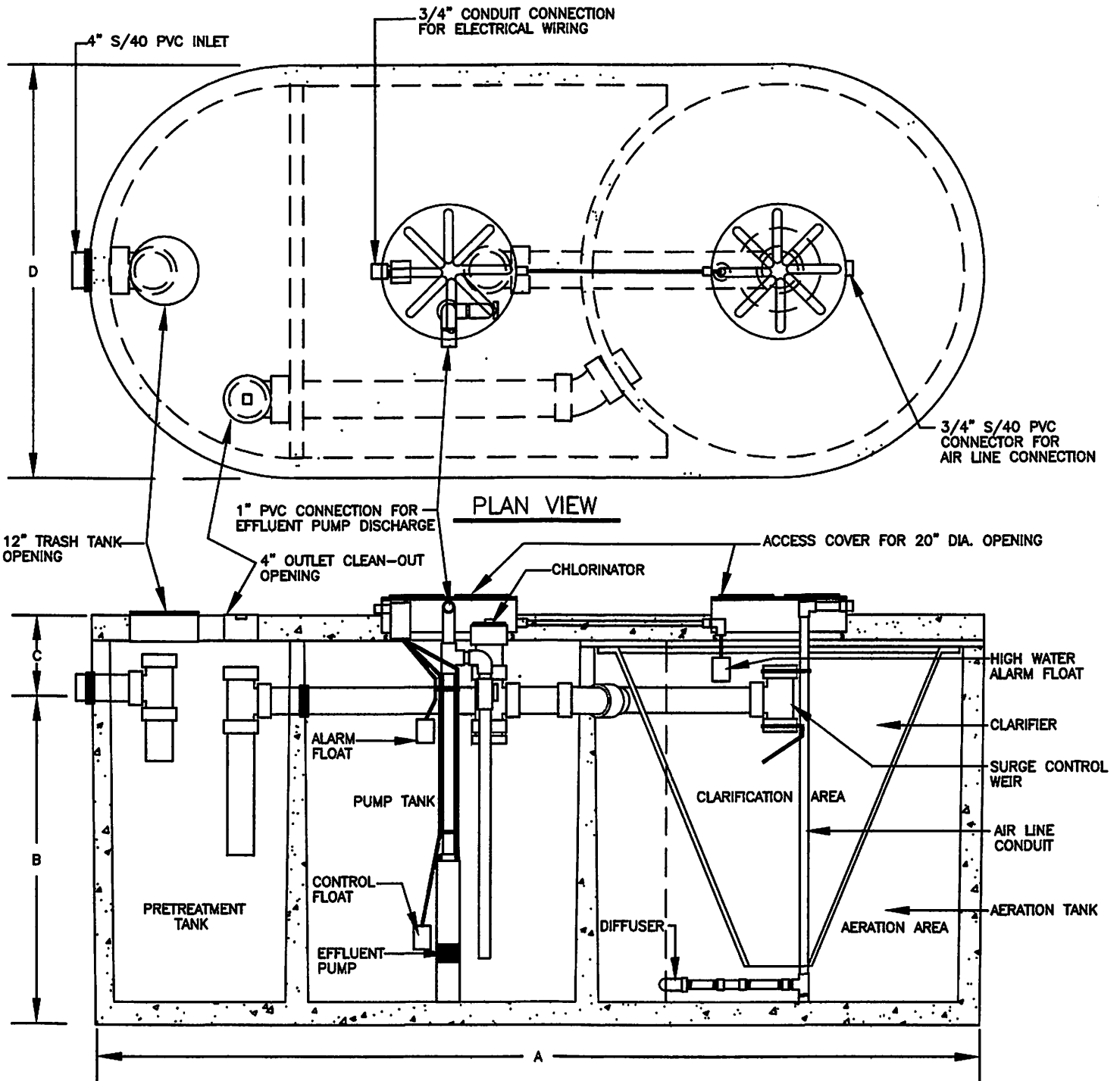
CLEARSTREAM
600NC3T AEROBIC
TREATMENT PLANT

NOTE:
NO OSSF SYSTEM
CAN BE INSTALLED
ON THE SAME
PROPERTY AS THE
SINGLE FAMILY
DWELLING, DUE TO
PLACEMENT OF
HOUSE AND SIZE OF
LOT. SALLY JANE
DRISCOLL OWNS ALL
THREE PROPERTIES.



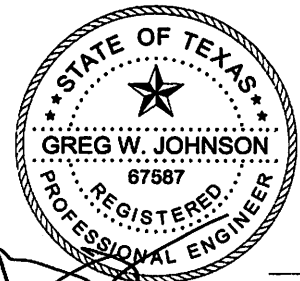
OWNER: SALLY JANE DRISCOLL		DRAWN BY: EJS III	
STREET ADDRESS: 1642 HILLCREST FOREST			
LEGAL DESC: CANYON LAKE FOREST	UNIT/SECTION/PHASE: 1	BLOCK:	LOT: 74, 75 & 76
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=30'	DATE: 3/20/2024	REVISED: 4/23/2024

DESIGN DRAWINGS



DIMENSIONAL DATA

MODEL	A	B	C	D
500NC3-500	12'-2"	60"	10"	75"
500NC3-750	13'-5"	60"	10"	75"
600NC3	12'-7"	60"	10"	82"



100
3/20/24

F-2585

TANK NOTES:

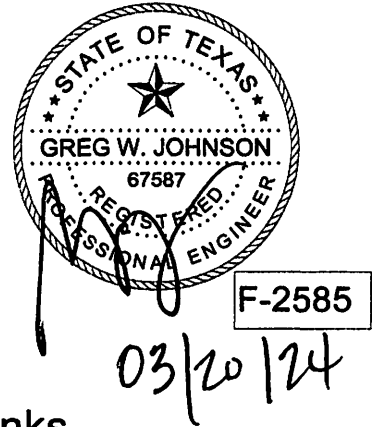
Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

Tightlines to the tank shall be SCH-40 PVC.

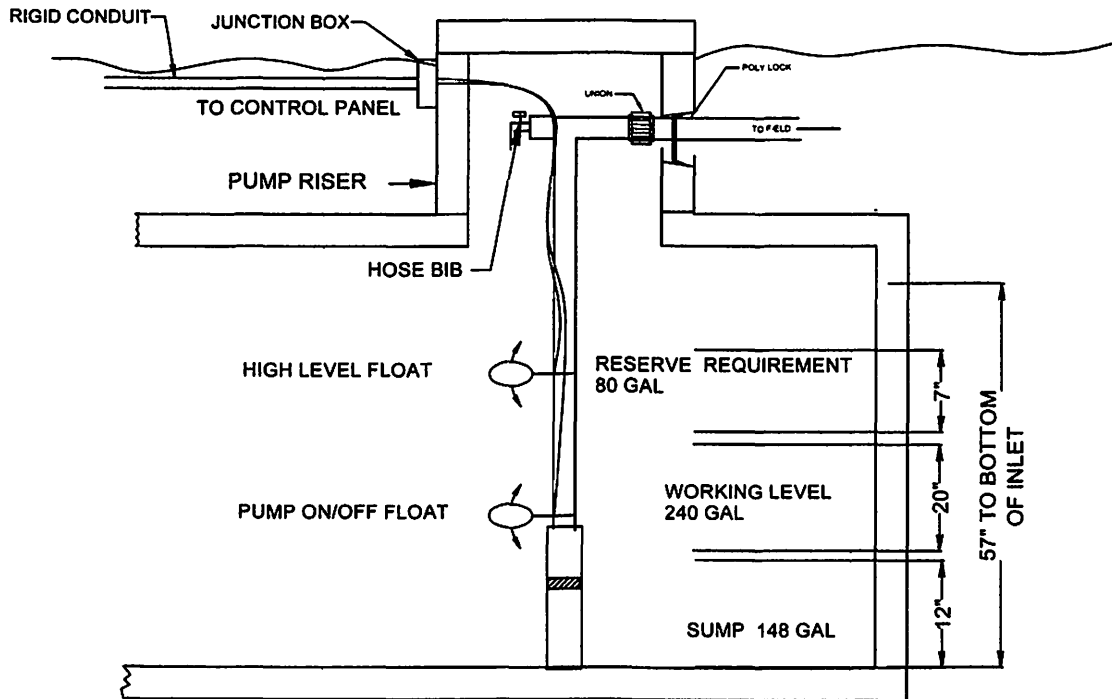
A two way sanitary tee is required between residence and tank.

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



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

OPERATION

1. The pump must be submerged at all times during normal operation. Do not run pump dry.
2. 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.
3. 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.

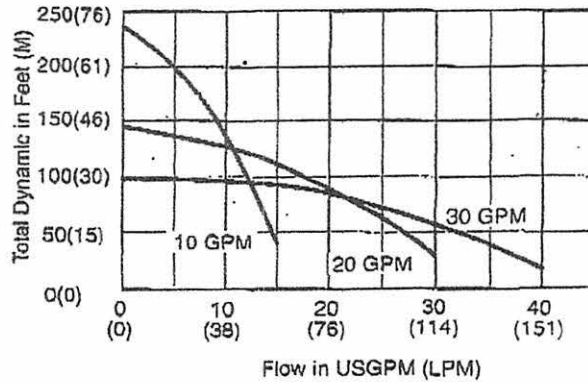


Figure 2: Performance in Feet of Head at Gallons Per Minute (M@LPM).

LOW ANGLE NOZZLE PERFORMANCE CHART

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

KRAIN
K-2 Plus

*

Olvera,Brandon

From: Olvera,Brandon
Sent: Tuesday, April 23, 2024 12:54 PM
To: Greg Johnson; phil@darnowsky.com
Subject: 117370

Property Owner Agent,

Submit the POA documents showing that Philip Darnowsky can sign on behalf of Sally Jane Driscol.

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 |

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

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

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

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) CLEARSTREAM 600 NC3T Absorption/Application Area (Sq Ft) 4150

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 Aquifer 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 WPAP has been approved by the appropriate regional office.)

Is the property located over the Edwards Aquifer Confining Zone? Yes No

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

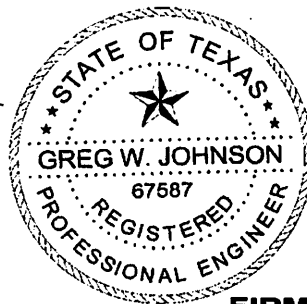
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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 of Designer

March 21, 2024

Date

OSSF SOIL EVALUATION REPORT INFORMATION

Date: March 20, 2024

Applicant Information:

Name: SALLY JANE DRISCOLL
Address: 15 PEMBERTON STREET
City: CAMBRIDGE State: MASSACHUSETTS
Zip Code: 02140 Phone: (415) 261-3077

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 ^{SEE}_{BELOW} Unit 1 Blk Subd. CANYON LAKE FOREST
Street Address: 1642 HILLCREST FOREST
City: CANYON LAKE Zip Code: 78133
Additional Info.: LOTS 74, 75 & 76

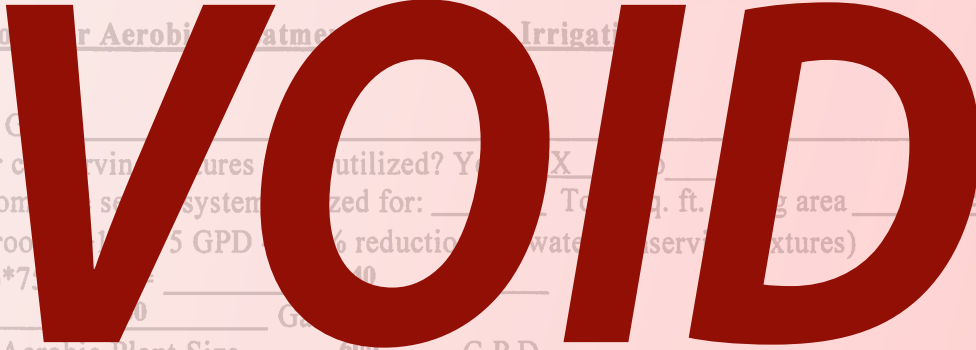
Installer Information:

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

Topography: Slope within proposed disposal area: 3 to 6 %

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

Design Calculations for Aerobic Treatment Units for Irrigation
Commercial
Q = _____
Residential Water closets, showers, lavatories, and kitchen sinks utilized? Yes ___ No X
Number of Bedrooms _____ sized for: _____ Toilet _____ sq. ft. Living area _____ sq. ft.
Q gal/day = (Bedrooms) x (5 GPD) + (6 reduction) (water closets, showers, lavatories)
Q = (3 + 1) * 7 = 28
Trash Tank Size _____ Gal.
TCU Approved Aerobic Plant Size _____ G.P.D.
Required Application Area = Q/Ri = 240 / 0.064 = 3750 sq. ft.
Application Area Utilized = 4150 sq. ft.
Pump Requirement 12 Gpm @ 41 Psi (Redjacket 0.5 HP 18 G.P.M. series or equivalent)
Dosing Cycle: ON DEMAND or YES TIMED TO DOSE IN PREDAWN HOURS
Pump Tank Size = 700 Gal. 12.3 Gal/inch.
Reserve Requirement = 80 Gal. 1/3 day flow.



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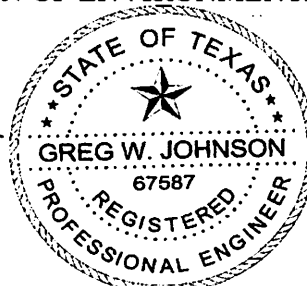
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[Signature]
GREG W. JOHNSON, P.E. F#002585 - S.E. 11561

03/20/24
DATE

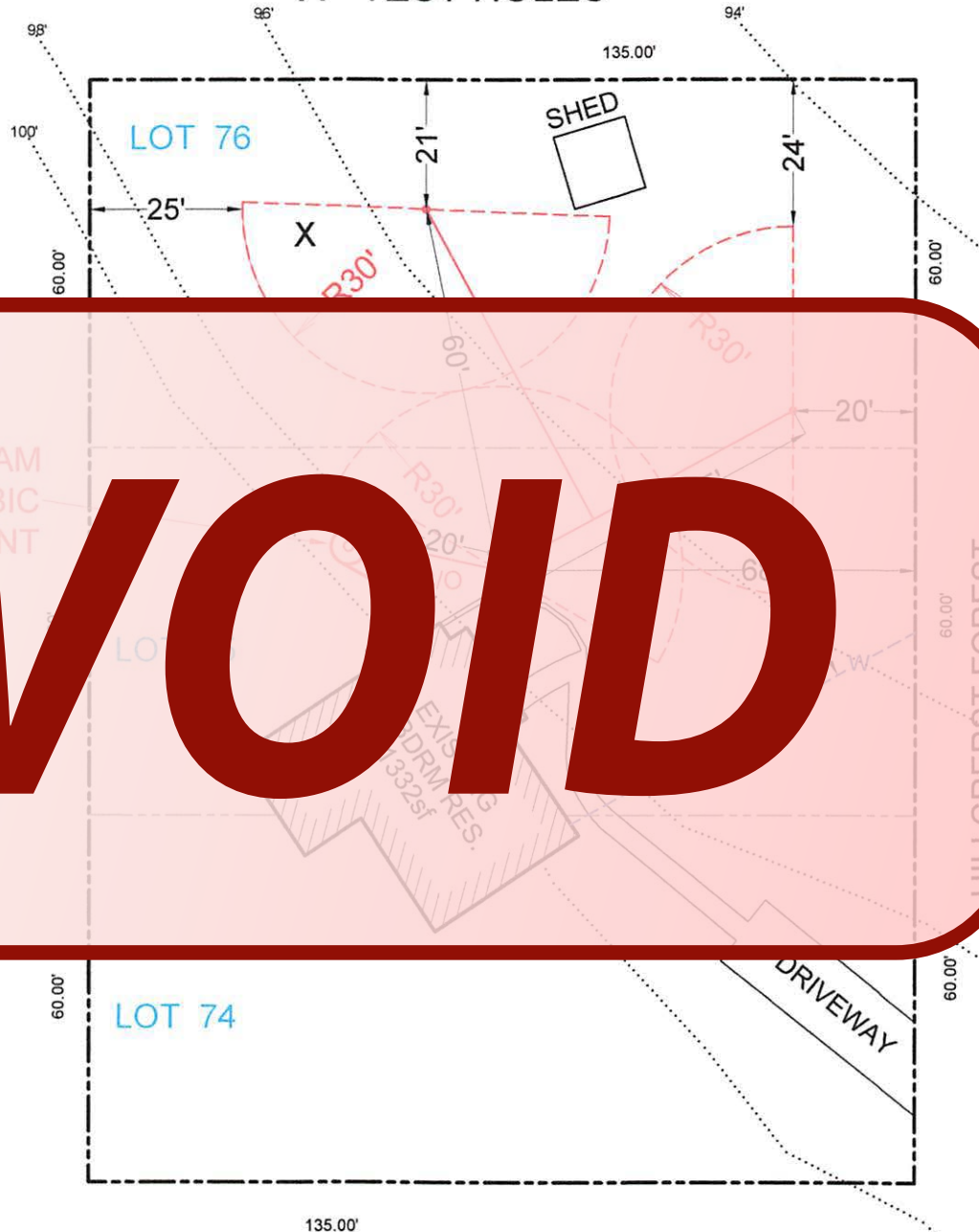


FIRM #2585

NOTE:
 EXISTING SEPTIC
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 AND BACK FILLED.
 EXISTING SEPTIC
 SYSTEM TO BE
 ABANDONED

SPRAY AREA = 4150sf

X= TEST HOLES



VOID

NOTE:
 NO OSS SYSTEM
 CAN BE INSTALLED
 ON THE SAME
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 SINGLE FAMILY
 DWELLING, DUE TO
 PLACEMENT OF
 HOUSE AND SIZE OF
 LOT. SALLY JANE
 DRISCOLL OWNS ALL
 THREE PROPERTIES.



OWNER: SALLY JANE DRISCOLL		DRAWN BY: EJS III	
STREET ADDRESS: 1642 HILLCREST FOREST			
LEGAL DESC: CANYON LAKE FOREST	UNIT/SECTION/PHASE: 1	BLOCK:	LOT: 74, 75 & 76
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=30'	DATE: 3/20/2024	REVISED:

4/11/14 (2)



201406001584 01/15/2014 02:51:30 PM 1/4

CHICAGO TITLE GF# 4324D12615/CT

RETURN TO GRANTEE:
SALLY JANE DRISCOLL
1642 HILLCREST FOREST
CANYON LAKE, TEXAS 78133

**GENERAL
WARRANTY DEED WITH VENDOR'S LIEN**
(Texas)

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.

STATE OF TEXAS
COUNTY OF COMAL

KNOW ALL MEN BY THESE PRESENTS:

On this, the 10TH day of JANUARY, 2014 that
SHARON PETERS REAL ESTATE, INC., A DEFUNCT TEXAS CORPORATION, ACTING BY ITS
LAST OFFICERS, DIRECTORS AND SHAREHOLDERS AND AS SHARON PETERS INDIVIDUALLY

hereinafter called "Grantor" (whether one or more), for and in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration to Grantor paid by
SALLY JANE DRISCOLL, A SINGLE WOMAN

hereinafter called "Grantee" (whether one or more), the receipt of which is hereby acknowledged and confessed, and the further consideration of the execution and delivery by Grantee of that certain Promissory Note of even date herewith, in the principal sum of \$ 94,500.00, payable to the order of
BOKF, NA D/B/A BANK OF TEXAS

hereinafter called "Mortgagee", bearing interest at the rate therein provided; said note containing the usual reasonable attorneys' fee clause and various acceleration of maturity clauses in case of default, and being secured by Vendor's Lien and superior title retained herein in favor of said Mortgagee, and being also secured by a Deed of Trust of even date herewith from Grantee to
BEN COWEN

Trustee; and

WHEREAS, Mortgagee has, at the special instance and request of Grantee, paid to Grantor a portion of the purchase price of the property hereinafter described, as evidenced by the above-described Note, said Vendor's Lien and Deed of Trust Lien against said property securing the payment of said Note are hereby assigned, transferred and delivered to Mortgagee, Grantor hereby conveying to said Mortgagee the said superior title to said property, subrogating said Mortgagee to all the rights and remedies of Grantor in the premises by virtue of said liens; and

4142011

JDEEDTX (10/08)

Page 1 of 4

Grantor has GRANTED, SOLD and CONVEYED, and by these presents does GRANT, SELL and CONVEY unto said Grantee, the following described property, to-wit: LOTS 74, 75 AND 76 CANYON LAKE FOREST UNIT NO. 1, ACCORDING TO THE MAP OR PLAT RECORDED IN VOLUME 1, PAGES 53-54, COMAL COUNTY, TEXAS MAP AND PLAT RECORDS.

TO HAVE AND TO HOLD the above-described premises, together with all and singular, the rights and appurtenances thereunto in anywise belonging unto said Grantee, his heirs and assigns, forever. And Grantor does hereby bind himself, his heirs, executors and administrators, to warrant and forever defend all and singular the said premises unto said Grantee, his heirs and assigns, against every person whomsoever lawfully claiming or to claim the same or any part thereof

Taxes for the current year have been prorated and their payment is assumed by Grantee.

This conveyance is made subject to any and all valid and subsisting restrictions, easements, rights of way, reservations, maintenance charges together with any lien securing said maintenance charges, zoning laws, ordinances of municipal and/or other governmental authorities, conditions and covenants, if any, applicable to and enforceable against the above-described property as shown by the records of the County Clerk of said County.

The use of any pronoun herein to refer to Grantor or Grantee shall be deemed a proper reference even though Grantor and/or Grantee may be an individual (either male or female), a corporation, a partnership or a group of two or more individuals, corporations and/or partnerships, and when this Deed is executed by or to a corporation, or trustee, the words "heirs, executors and administrators" or "heirs and assigns" shall, with respect to such corporation or trustee, be construed to mean "successors and assigns".

It is expressly agreed that the Vendor's Lien is retained in favor of the payee of said Note against the above-described property, premises and improvements, until said Note and all interest thereof shall have been fully paid according to the terms thereof, when this Deed shall become absolute.

JDEEDTX (10/08)

4142011

Page 2 of 4

EXECUTED this 10th day of January, 2014, but to be effective JANUARY 10, 2014

[Signature]
by Sharon Peters
SHARON PETERS REAL ESTATE, INC., A DEFUNCT
TEXAS CORPORATION

[Signature]
Sharon Peters, Individually

STATE OF TEXAS

County of Hays

Before me, the undersigned, on this day personally appeared Sharon Peters, Individually

known to me (or proved to me on the oath of _____
or through DL) to be the person(s) whose name(s) IS subscribed to
the foregoing instrument and acknowledged to me that she executed the same for the purposes and
consideration therein expressed.

Given under my hand and seal of office this 10th day of JANUARY, 2014

(Seal)

[Signature]
Notary Public



4142011

Page 3 of 4

STATE OF TEXAS

County of Hays

Before me, the undersigned, on this day personally appeared Sharon Peters of

SHARON PETERS REAL ESTATE, INC., A DEFUNCT TEXAS CORPORATION

known to me (or proved to me on the oath of _____) or through DL to be the person(s) whose name(s) is subscribed to the foregoing instrument and acknowledged to me that she executed the same for the purposes and consideration therein expressed and in the capacity therein stated.

Given under my hand and seal of office this 10th day of JANUARY, 2014.

(Seal)



Sarah Jane Carranco
Notary Public

4142011

Page 4 of 4

JDEEDTX (10/08)

Filed and Recorded
Official Public Records
Joy Streater, County Clerk
Comal County, Texas
01/15/2014 02:51:30 PM
TERRI 4 Page(s)
201406001584



Joy Streater

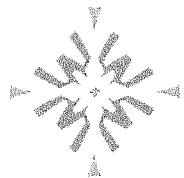
RECEIVED

By Brandon Olvera at 3:13 pm, Apr 25, 2024

STATUTORY DURABLE POWER OF ATTORNEY

OF

SALLY JANE DRISCOLL



WEISINGER
LAW FIRM, PLLC

17300 Henderson Pass, Suite 240, San Antonio, Texas 78232
Office: 210.308.0800 • Fax: 210.308.0801 • WeisingerLawFirm.com

STATUTORY DURABLE POWER OF ATTORNEY
OF
SALLY JANE DRISCOLL

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. THEY ARE EXPLAINED IN THE DURABLE POWER OF ATTORNEY ACT, SUBTITLE P, TITLE 2, TEXAS ESTATES CODE. IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTH-CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO. IF YOU WANT YOUR AGENT TO HAVE THE AUTHORITY TO SIGN HOME EQUITY LOAN DOCUMENTS ON YOUR BEHALF, THIS POWER OF ATTORNEY MUST BE SIGNED BY YOU AT THE OFFICE OF THE LENDER, AN ATTORNEY AT LAW, OR A TITLE COMPANY.

You should select someone you trust to serve as your agent. Unless you specify otherwise, generally the agent's authority will continue until:

- (1) you die or revoke the power of attorney;
- (2) your agent resigns, is removed by court order, or is unable to act for you; or
- (3) a guardian is appointed for your estate.

I, SALLY JANE DRISCOLL, with an address of 1642 Hillcrest Forest, Canyon Lake, Texas 78133, appoint my son, PHILIP WALTER DARNOWSKY, with an address of 15 Pemberton Street, Cambridge, Massachusetts 02140, as my agent to act for me in any lawful way with respect to all of the following powers that I have initialed below. If PHILIP WALTER DARNOWSKY dies, becomes incapacitated, resigns, refuses to act, or is removed by court order, I appoint my daughter, NINA ELISABETH DARNOWSKY, with an address of 8702 Addison Ridge, San Antonio, Texas 78254, as my successor agent.

TO GRANT ALL OF THE FOLLOWING POWERS, INITIAL THE LINE IN FRONT OF (O) AND IGNORE THE LINES IN FRONT OF THE OTHER POWERS LISTED IN (A) THROUGH (N).

TO GRANT A POWER, YOU MUST INITIAL THE LINE IN FRONT OF THE POWER YOU ARE GRANTING.

TO WITHHOLD A POWER, DO NOT INITIAL THE LINE IN FRONT OF THE POWER. YOU MAY, BUT DO NOT NEED TO, CROSS OUT EACH POWER WITHHELD.

- _____ (A) Real property transactions;
- _____ (B) Tangible personal property transactions;
- _____ (C) Stock and bond transactions;
- _____ (D) Commodity and option transactions;
- _____ (E) Banking and other financial institution transactions;
- _____ (F) Business operating transactions;

- _____ (G) Insurance and annuity transactions (provided that my agent shall specifically **not** have the power to designate or change the beneficiary of any annuity or contract of insurance on my life);
- _____ (H) Estate, trust and other beneficiary transactions;
- _____ (I) Claims and litigation;
- _____ (J) Personal and family maintenance;
- _____ (K) Benefits from social security, Medicare, Medicaid, or other governmental programs or civil or military service;
- _____ (L) Retirement plan transactions (provided that my agent shall specifically **not** have the power to designate or change the beneficiary of any of my retirement plans or IRAs);
- _____ (M) Tax matters;
- _____ (N) Digital assets and the content of an electronic communication;
- SJD _____ (O) ALL OF THE POWERS LISTED IN (A) THROUGH (N). YOU DO NOT HAVE TO INITIAL THE LINE IN FRONT OF ANY OTHER POWER IF YOU INITIAL LINE (O).

SPECIAL INSTRUCTIONS

Compensation: Special instructions applicable to agent compensation (initial in front of one of the following sentences to have it apply; if no selection is made, each agent will be entitled to compensation that is reasonable under the circumstances):

_____ My agent is entitled to reimbursement of reasonable expenses incurred on my behalf and to compensation that is reasonable under the circumstances.

SJD _____ My agent is entitled to reimbursement of reasonable expenses incurred on my behalf but shall receive no compensation for serving as my agent.

Gifts: My agent shall not have the power to make gifts of my property.

Limitations: Notwithstanding any provision herein to the contrary, any authority granted to my agent shall be limited so as to prevent this power of attorney from causing my agent to be taxed on my income (unless my agent is my spouse) and from causing my assets to be subject to a general power of appointment by my agent, as that term is defined in Section 2041 of the Internal Revenue Code of 1986, as amended.

Additional Powers: ON THE FOLLOWING LINES YOU MAY GIVE SPECIAL INSTRUCTIONS LIMITING OR EXTENDING THE POWERS GRANTED TO YOUR AGENT.

None.

EFFECTIVE IMMEDIATELY

This power of attorney is effective immediately and is not affected by my subsequent disability or incapacity.

REVOCATION OF PRIOR POWERS OF ATTORNEY

I hereby revoke all durable general powers of attorney executed by me prior to the date of this power of attorney, and all such durable general powers of attorney shall no longer be of force and effect. All powers and authorities granted under said durable general powers of attorney are hereby withdrawn and revoked effective immediately. The provisions of this paragraph shall not revoke any power of attorney I have previously executed which is limited to a specific and identifiable action or transaction, such as a power of attorney I have executed as part of a contract for the management of a bank or brokerage account. If I desire to revoke any such prior limited or specific power of attorney, I will execute a revocation specifically referring to the power of attorney to be revoked.

I agree that any third party who receives a copy of this document may act under it. Termination of this durable power of attorney is not effective as to a third party until the third party has actual knowledge of the termination. I agree to indemnify the third party for any claims that arise against the third party because of reliance on this power of attorney. The meaning and effect of this durable power of attorney is determined by Texas law.

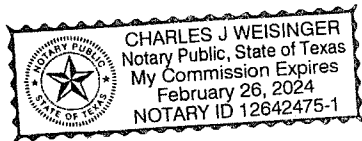
Signed on September 8, 2023.

Sally Driscoll
 SALLY JANE DRISCOLL, Principal

This document was executed at the law office of Weisinger Law Firm, located at 17300 Henderson Pass Ste. 240, San Antonio, Texas 78232.

STATE OF TEXAS §
 §
 COUNTY OF BEXAR §

This instrument was acknowledged before me on September 8, 2023, by SALLY JANE DRISCOLL.



[Signature]
 Notary Public, State of Texas

IMPORTANT INFORMATION FOR AGENT

Agent's Duties

When you accept the authority granted under this power of attorney, you establish a "fiduciary" relationship with the principal. This is a special legal relationship that imposes on you legal duties that continue until you resign or the power of attorney is terminated, suspended, or revoked by the principal or by operation of law. A fiduciary duty generally includes the duty to:

- (1) act in good faith;
- (2) do nothing beyond the authority granted in this power of attorney;
- (3) act loyally for the principal's benefit;
- (4) avoid conflicts that would impair your ability to act in the principal's best interest; and
- (5) disclose your identity as an agent when you act for the principal by writing or printing the name of the principal and signing your own name as "agent" in the following manner:

SALLY JANE DRISCOLL, by (Your Signature) as Agent

In addition, the Durable Power of Attorney Act (Subtitle P, Title 2, Estates Code) requires you to:

- (1) maintain records of each action taken or decision made on behalf of the principal;
- (2) maintain all records until delivered to the principal, released by the principal, or discharged by a court; and
- (3) if requested by the principal, provide an accounting to the principal that, unless otherwise directed by the principal or otherwise provided in the Special Instructions, must include:
 - (A) the property belonging to the principal that has come to your knowledge or into your possession;
 - (B) each action taken or decision made by you as agent;
 - (C) a complete account of receipts, disbursements, and other actions of you as agent that includes the source and nature of each receipt, disbursement, or action, with receipts of principal and income shown separately;
 - (D) a listing of all property over which you have exercised control that includes an adequate description of each asset and the asset's current value, if known to you;
 - (E) the cash balance on hand and the name and location of the depository at which the cash balance is kept;
 - (F) each known liability;
 - (G) any other information and facts known to you as necessary for a full and definite understanding of the exact condition of the property belonging to the principal; and
 - (H) all documentation regarding the principal's property.

Termination of Agent's Authority

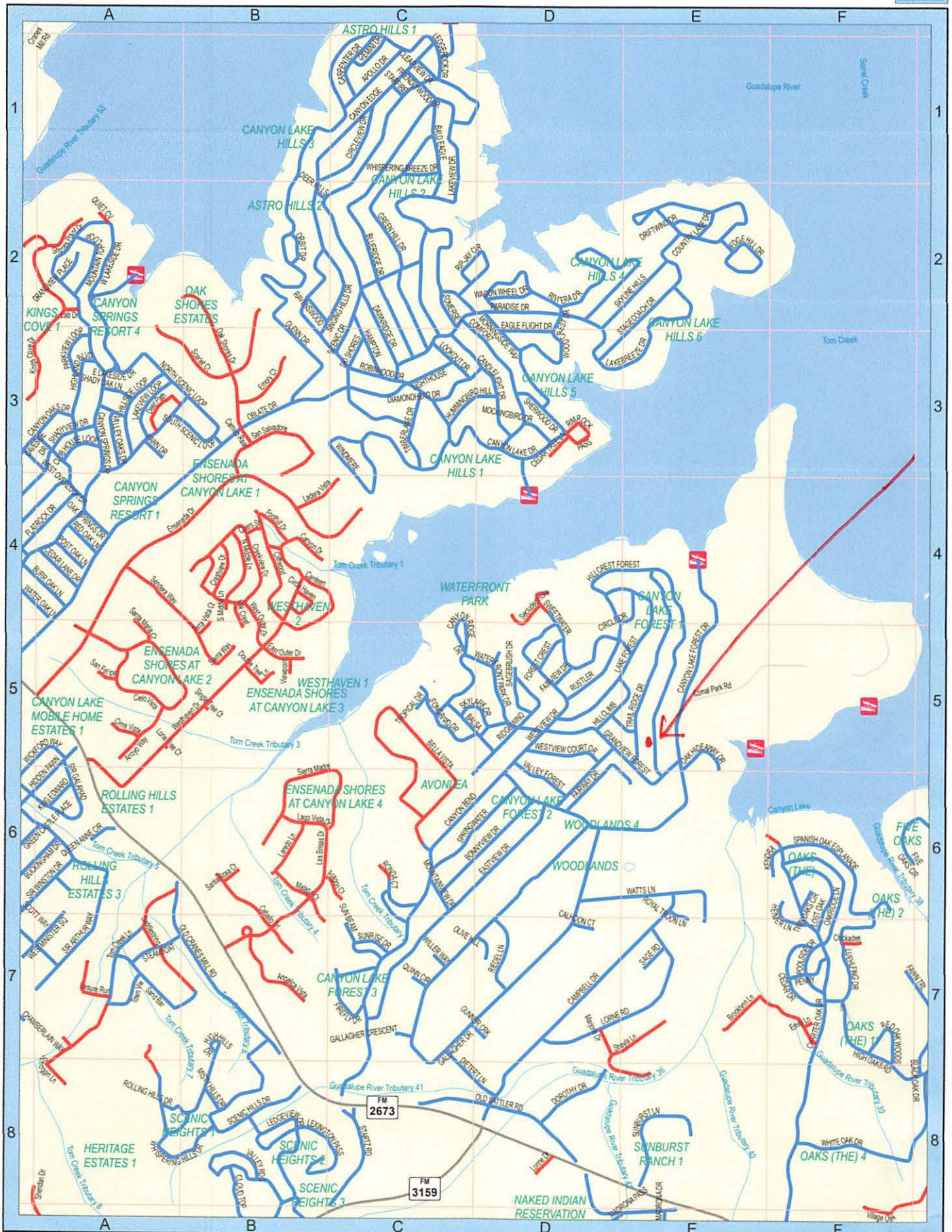
You must stop acting on behalf of the principal if you learn of any event that terminates or suspends this power of attorney or your authority under this power of attorney. An event that terminates this power of attorney or your authority to act under this power of attorney includes:

- (1) the principal's death;
- (2) the principal's revocation of this power of attorney or your authority;
- (3) the occurrence of a termination event stated in this power of attorney;
- (4) if you are married to the principal, the dissolution of your marriage by court decree of divorce or annulment or declaration that your marriage is void, unless otherwise provided in this power of attorney;
- (5) the appointment and qualification of a permanent guardian of the principal's estate unless a court order provides otherwise; or
- (6) if ordered by a court, your removal as agent (attorney in fact) under this power of attorney. An event that suspends this power of attorney or your authority to act under this power of attorney is the appointment and qualification of a temporary guardian unless a court order provides otherwise.

Liability of Agent

The authority granted to you under this power of attorney is specified in the Durable Power of Attorney Act (Subtitle P, Title 2, Estates Code). If you violate the Durable Power of Attorney Act or act beyond the authority granted, you may be liable for any damages caused by the violation or subject to prosecution for misapplication of property by a fiduciary under Chapter 32 of the Texas Penal Code.

THE AGENT, BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES OF AN AGENT.



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