

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:

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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
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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: 117574
Issued This Date: 06/19/2024
This permit is hereby given to: Maryann Hill

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

336 ROSEWOOD DR
SPRING BRANCH, TX 78070

Subdivision: East Ridge of Cypress Cove
Unit: -
Lot: 8R
Block: -
Acreage: 0.8500

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

		117574
<i>Date Received</i>	<i>Initials</i>	<i>Permit Number</i>

Instructions:

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

OSSF Permit

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

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



Signature of Applicant

06-11-24

Date

___ COMPLETE APPLICATION Check No. _____ Receipt No. _____

INCOMPLETE APPLICATION ___ (Missing Items Circled, Application Refeused)



ON-SITE SEWAGE FACILITY APPLICATION

Date _____ Permit Number 117574

1. APPLICANT / AGENT INFORMATION

Owner Name <u>Maryann Hill</u>	Agent Name <u>Doug Dowlearn R.S.</u>
Mailing Address <u>336 Rosewood Dr</u>	Agent Address <u>703 Oak Dr.</u>
City, State, Zip <u>Spring Branch, TX 78070</u>	City, State, Zip <u>Blanco, TX 78606</u>
Phone # _____	Phone # <u>210-878-8100</u>
Email _____	Email <u>TXSEPTIC@GMAIL.COM</u>

2. LOCATION

Subdivision Name East Ridge of Cypress Cove Unit _____ Lot 8R Block _____
 Survey Name / Abstract Number _____ Acreage .8471
 Address 336 Rosewood Dr City Spring Branch State TX Zip 78070

3. TYPE OF DEVELOPMENT

- Single Family Residential
 Type of Construction (House, Mobile, RV, Etc.) HOUSE
 Number of Bedrooms 2
 Indicate Sq Ft of Living Area 2200
- 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 _____

EXISTING

Estimated Cost of Construction: \$ 395,000.00 (Structure Only)

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

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

Source of Water Public Private Well Rainwater

4. SIGNATURE OF OWNER

By signing this application, I certify that:

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

Signature of Owner

06-11-24
Date

Planning Materials & Site Evaluation as Required Completed By _____

System Description _____

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

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

Gallons Per Day (As Per TCEQ Table III) _____

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

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

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

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

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

Is there at least one acre per single family dwelling as per 285.40(c)(1)? Yes No

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

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

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

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

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

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


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

Is this property within an incorporated city? Yes No

If yes, indicate the city: _____

By signing this application, I certify that:

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



Signature of Designer

Date

1/CS



**COUNTY OF COMAL
STATE OF TEXAS**

AFFIDAVIT TO THE PUBLIC

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

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, give the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety Code, requires owners to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

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):

East Ridge of Cypress Cove, Lot 8R

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

Maryann Hill

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

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

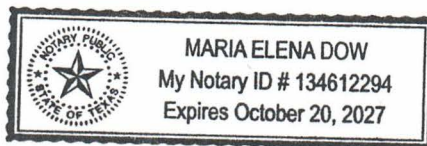
WITNESS BY HAND(S) ON THIS 11th DAY OF June, 2024

[Signature]
Owner(s) signature(s)

Mary Ann Hill (owner)
(PRINTED NAME) / TITLE

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 11th DAY OF June, 2024

[Signature]
Notary Public, State of Texas
Notary's Printed Name: Maria Elena Dow
My Commission Expires: 10-20-2027



Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
06/11/2024 01:00:26 PM
TERRI 1 Page(s)
202406017498



Bobbie Koepf

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

Septic System Service Agreement

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

Name: Maryann Hill Address: 336 Rosewood Dr
Subdivision/ County: East Ridge of Cypress Cove / Comal City, State, Zip: Canyon Lake, TX 78133
Permit # _____ Model # _____ Serial # _____

Phone: _____

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

RENEWAL _____ NAME TRANSFER _____ ANALYSIS _____

Legal Description:

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

For *Just install* this contract will be in effect FROM LITIO - 2yrs and will provide the following:

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

BAKER SEPTIC SERVICE, LLC, WILL WARRANTY INSTALLATION of the septic system according to state and county regulations and the designs approved by the county. **HOMEOWNER WILL BE RESPONSIBLE FOR SERVICE CALL, LABOR, AND SHIPPING COSTS ON ANY "WARRANTED PARTS" EXCHANGED DURING WARRANTY.** All other component will be according to manufacturer's warranties.

IMPORTANT: As Baker Septic Service, LLC cannot control what or how much effluent goes into this septic system, we cannot warranty how the system will function. Refer to manufacturers or installers instructions for suggestions on septic operation. This service agreement does not cover the cost of service call, labor or materials that are required or parts out of warranty, the failure to maintain electrical power to the system, sprindlers that are broken, leaking, stopped-up or otherwise mal-functioning; or sewage flows exceeding the hydraulic/organic design capabilities and the input of non-biodegradable materials (solvent, grease, oil, paints, etc.), or any usage contrary to the requirements as advised by authorized service representative. Laboratory test work is available at an additional coast. Chlorine, filters, or parts that are out of warranty are available at a reasonable cost.

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

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

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

Serviced by: Baker Septic Service, LLC

Maintenance Provider MP0002099

Maryann Hill

Property Owner Signature

Print Name (D) Mary Ann Hill

[Signature]
Date: 06-11-24

[Signature]

Date: 6-12-24

Authorized Service Representative

OSSF SOIL EVALUATION REPORT INFORMATION

Date: 6/12/2024

Applicant Information:

Name: Maryann Hill

Address: 336 Rosewood Dr

City, State & Zip Code: Spring Branch, TX 78070

Phone:

Email:

Site Evaluator Information:

Name: Douglas R. Dowlearn

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

Address: 703 Oak Drive

City, State & Zip: Blanco, TX 78606

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

Email: txseptic@gmail.com

Property Location:

Subdivision: East Ridge of Cypress Cove Lot: 8R

Street/Road Address: 336 Rosewood Dr

City : Spring Branch Zip: 78070

Additional Info: Comal County

Installer Information:

Name:

Company:

Address:

City, State & Zip:

Phone:

Depth	Texture Class	Soil Texture	Structure (For Class III - blocky, platy or massive)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observation
Soil Boring #1 60"	III	0-12" Clay Loam 12"+ Limestone		<30% Gravel	12"+ Limestone	N/A
Soil Boring #2 60"		Same as above				

DESIGN SPECIFICATIONS

Application Rate (RA): 0.064

OSSF is designed for: 2 Bedroom 2200 Sq, Ft House

240 gallons per day

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

3750 sq. ft. disposal area required

600 gallon per day aerobic tank

Calculations: Absorption Area: $Q/RA = 240 / 0.064 = 3750$ Sq. Ft.

FEATURES OF SITE AREA

Presence of 100-year flood zone: NO

Existing or proposed water well in nearby area: NO

Presence of adjacent ponds, streams, water impoundments: NO

Presence of upper water shed: NO

Organized sewage service available to lot: NO

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

Site Evaluator:

NAME: Douglas Dowlearn

Signature:



License No. OS9902 Exp. 6/30/2026

TDH: #2432 Exp. 2/28/2025

Baker Septic Service, a Series LLC
Baker Septic Pumping PS LLC
PO Box 2221
Canyon Lake, TX 78133-0009
830-899-2971

Invoice

Bill To

Hill, Mary ann
336 Rosewood dr
Spring Branch, TX, 78070
713-446-9165

Date: 6/22/2024

Invoice # 17557

Item	Description	Qty	Price	Amount
Pump	Septic pump up to 1000 gal.	1	450.00	450.00

bakersepticsservice@yahoo.com

Subtotal

Sales Tax (8.25%)

Total

D.A.D SERVICES, INC.
DOUG DOWLEARN
PO BOX 212, BULVERDE, TX 78163

Designed for:
Maryann Hill

The installation site is at lot 8R of the East Ridge of Cypress Cove subdivision in Comal County, TX. The proposed OSSF will treat the wastewater from a 2 bedroom(2200 sf) residence. The proposed method of wastewater treatment is aerobic treatment with spray irrigation. This method was chosen because of unsuitable soil conditions.

PROPOSED SYSTEM:

A 3" or 4" PVC pipe will discharge from the residence to a pre-treatment tank, which flows into a 600 gpd aerobic treatment plant. The aerobic tank effluent flows to a 796 gallon storage/pump tank containing a liquid chlorinator and a single 20 gpm submersible pump. Distribution is through 3 K-Rain Gear Driven pop-up sprinklers, with low angle (13 degrees) spray nozzles spraying at 40 psi. One sprinkler will spray a radius of 32' at 180 degrees of arc; One sprinkler will spray a radius of 29' at 180 degrees of arc; One sprinkler will spray a radius of 28' at 180 degrees of arc. An audio and visual alarm monitoring both high water and aerator failure will be placed in a noticeable location.

DESIGN SPECIFICATIONS:

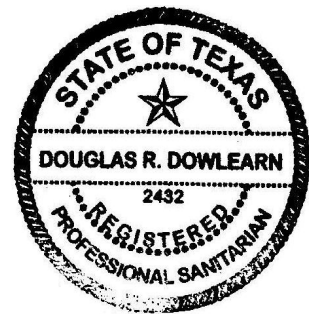
Daily Waste Flow: 240 gpd

Application rate: 0.064

Application area required: $240 / .064 = 3750$ sq. ft.

Application area utilized: 4160 sq. ft. - 393 sq. ft.(for impermeable lids) = 3767 sq. ft.

Pump tank reserve capacity: 80 gal minimum



SYSTEM COMPONENTS:

SCH 40 PVC sewer line

Pro Flo 600 SLPT

447-gallon Pretreatment tank

600 GPD Aerobic Treatment Unit

796-gallon Pump tank with timed controls set to spray in the pre-dawn hours of midnight to 5:00 am

C-1 20X, Model no. 20XC1-05P4-2W115 (or equivalent) submersible pump

Liquid chlorinator

1" purple PVC supply line

3 K-Rain Gear Driven pop-up sprinklers

LANDSCAPING:

The entire surface application area must consist of an area with vegetation capable of growth, before system start up. In the event the surface application area does not have vegetation capable of growth, the bare area shall be seeded or sodded. If the non-vegetative area consists of rock or caliche, 3" of class II or III soil, capable of growing and sustaining vegetative growth, will be added before it is seeded or sodded.

Douglas R. Dowlearn
D.A.D. Services, Inc.
703 Oak Drive
Blanco, TX 78606
(210)240-2101
txseptic@gmail.com

June 13, 2024

RE: 336 Rosewood Dr.

To Whom It May Concern:

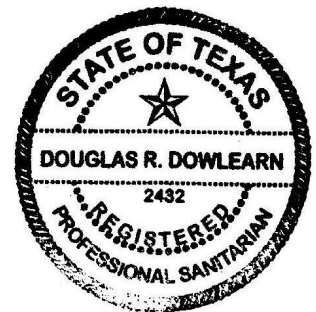
I am requesting a variance for the placement of a spray disposal area 10 feet from the property line, but less than 20 feet from the property line as Comal County regulations require. This variance is requested due to limited space. This setback complies with TCEQ CHAPTER 285 rules Table X. requirements. Equivalent protection will be maintained by including a battery backup to the timer clock to assure sprayers only spray during the predawn hours. In my professional opinion this variance will not pose a threat to the environment or public health.

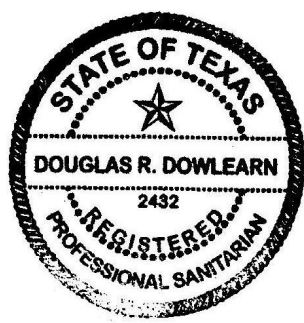
If there are any questions or concerns, please contact me at 210.240.2101 or by email at txseptic@gmail.com.

Sincerely,

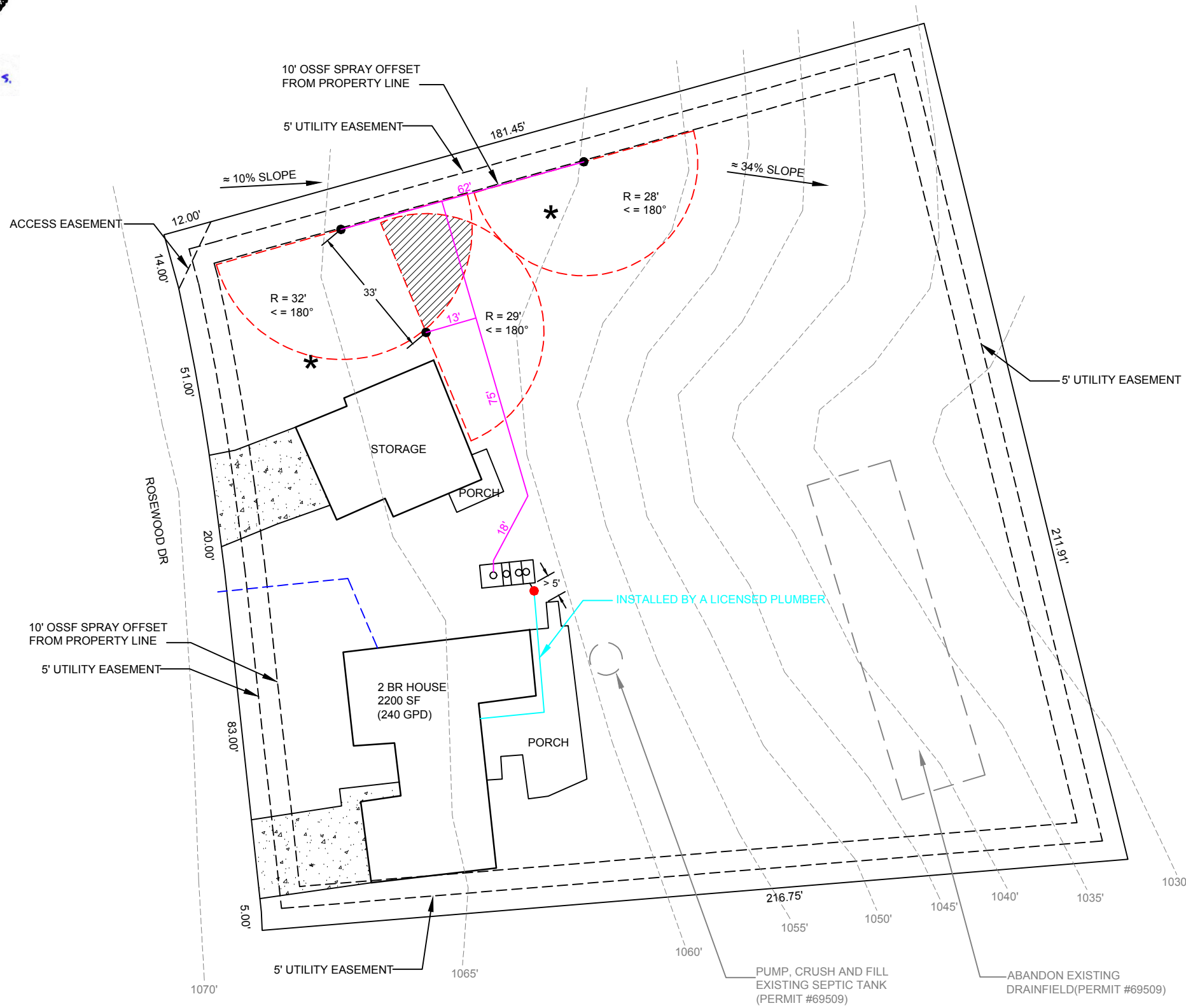


Douglas R. Dowlearn, R.S.





Douglas R. Dowlearn



MARYANN HILL
336 ROSEWOOD DR
SPRING BRANCH, TX 78070
EAST RIDGE OF CYPRESS COVE
LOT 8R, LIFE ESTATE
COMAL COUNTY

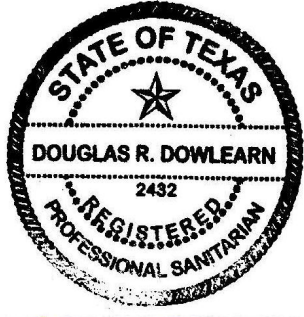
SCALE 1" = 30'
PRINT SIZE 11" X 17"

KEY

	- 2 WAY CLEANOUT
	- 1" SCH 40 PVC PURPLE PIPE
	- WATER LINE (VERIFY LOCATION ON SITE)
	- TEST HOLE
	- 600 GPD AEROBIC TREATMENT UNIT
	- DRIVE/WALKWAY
	- SPRAY OVERLAP AREA = 393 SF
	- INSTALLED BY A LICENSED PLUMBER

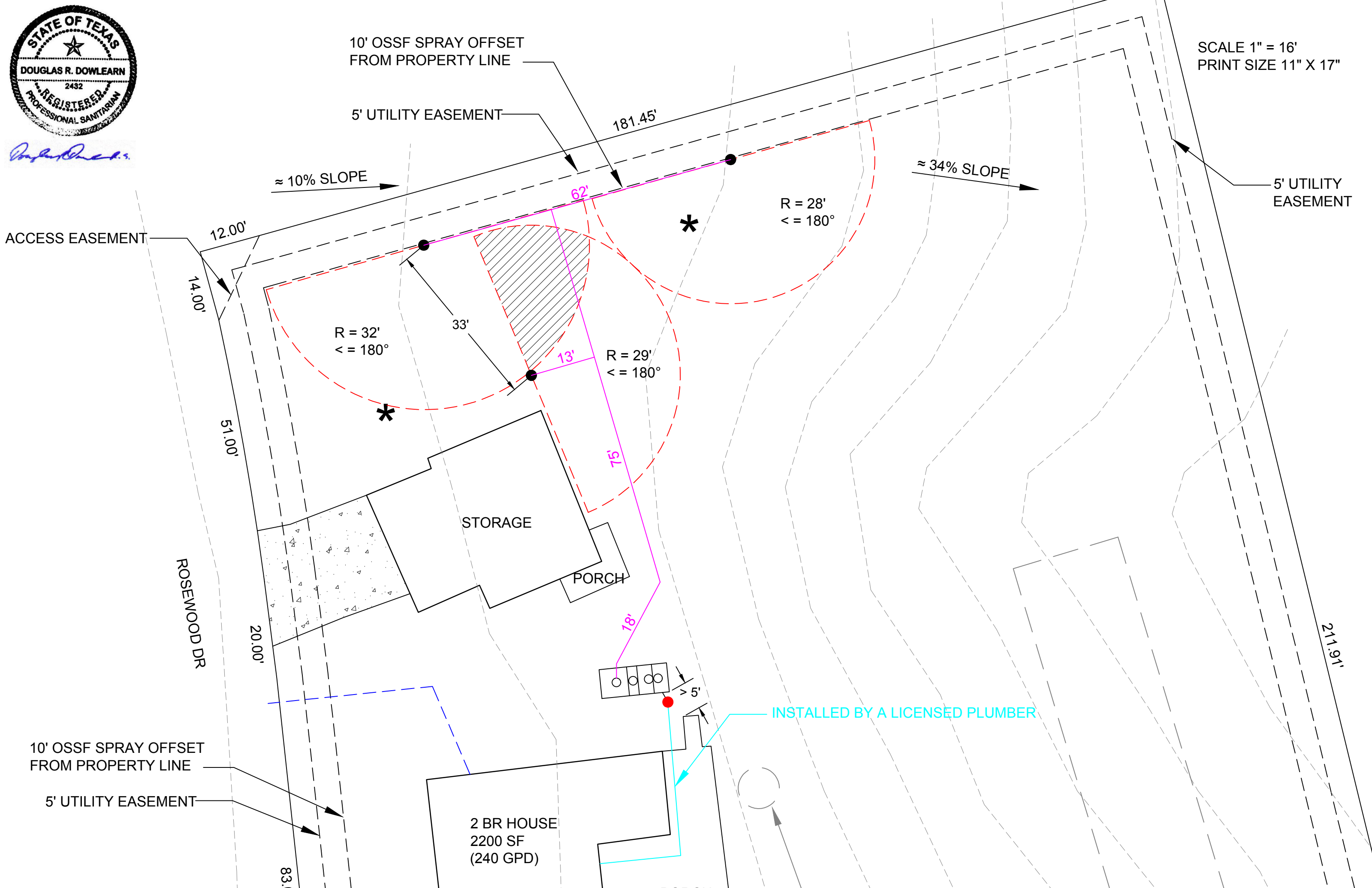
NOTES:

- 1" SCH 40 PURPLE PIPE TO ALL SPRAY HEADS.
- 3" OR 4" SCH 40 PVC PIPE FROM CLEANOUT TO TANK.
- SEWER PIPE FROM THE CLEANOUT TO THE TANK MUST HAVE AT MINIMUM 1/8" FALL PER 1'.
- TOTAL SPRAY AREA = 4160 SF - 393 SF (SPRAY OVERLAP AREA) = 3767 SF.
- TANK WILL BE WATER TIGHT AND MANUFACTURED ACCORDING TO ASTM DESIGNATION: C 1227.
- TANK TO BE > 5' FROM STRUCTURES AND SURFACE IMPROVEMENTS. THIS WILL PROVIDE EQUIVALENT PROTECTION FOR THE SETBACK REQUIREMENTS OF TAC 285.
- DRAINFIELD SHALL BE GREATER THAN 100' FROM PRIVATE WELLS, AND GREATER THAN 150' FROM PUBLIC WELLS. VERIFY WELL LOCATION(S) ON SITE.
- SPRINKLERS SHALL BE LOCATED AT LEAST 10' AWAY FROM TREES WITHIN THE DISTRIBUTION AREA.
- SPRAY APPLICATION SHALL BE IN AREAS WITH < 15% SLOPE. SOME SPRAY APPLICATION AREAS MAY NEED TO BE REGRADED IN ORDER TO STAY UNDER THE MAXIMUM 15% SLOPE ALLOWED IN SPRAY APPLICATION AREAS.



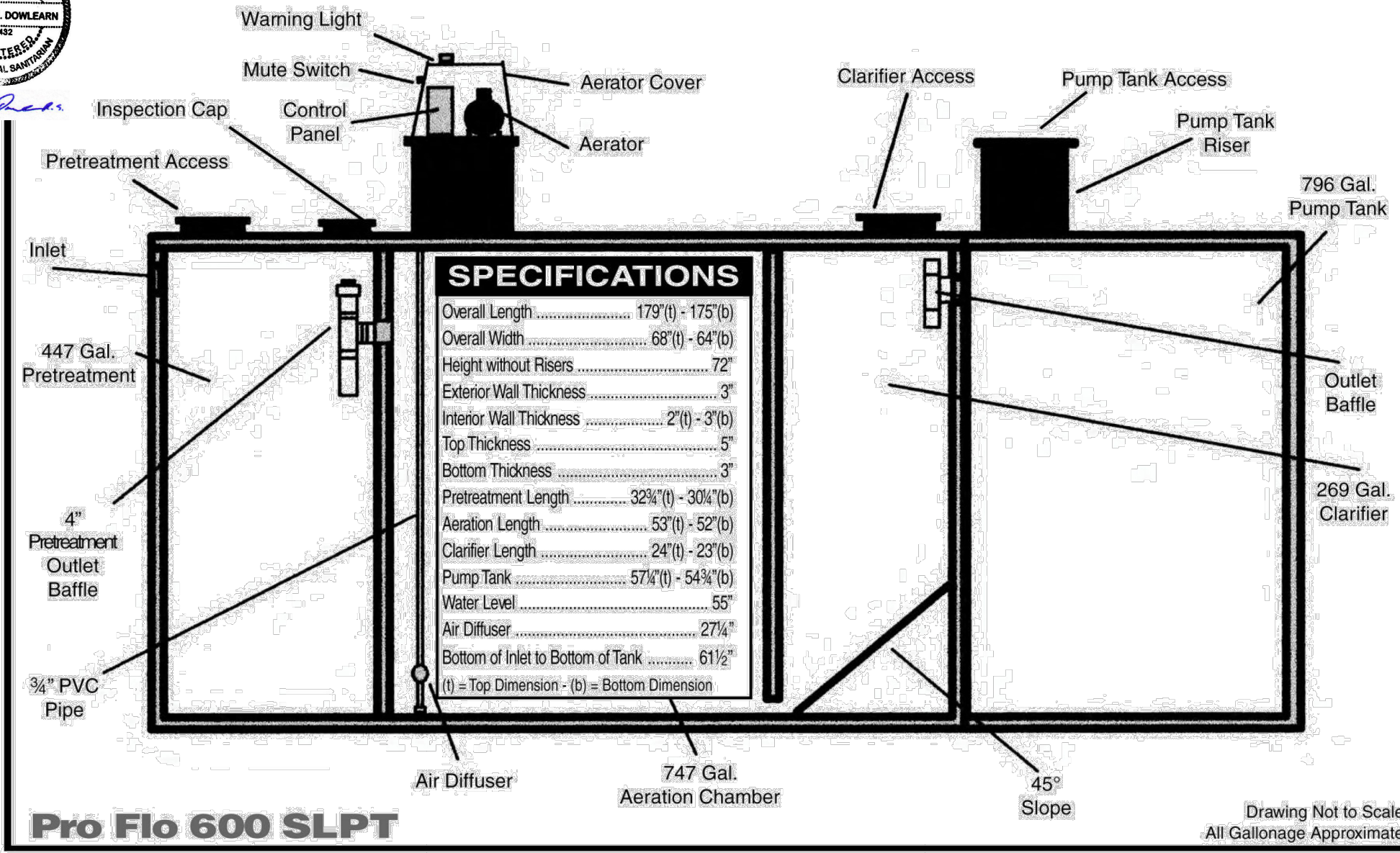
Douglas R. Dowlearn

SCALE 1" = 16'
PRINT SIZE 11" X 17"





D. Dowlearn



SPECIFICATIONS

Overall Length	179"(t) - 175"(b)
Overall Width	68"(t) - 64"(b)
Height without Risers	72"
Exterior Wall Thickness	3"
Interior Wall Thickness	2"(t) - 3"(b)
Top Thickness	5"
Bottom Thickness	3"
Pretreatment Length	32¾"(t) - 30¼"(b)
Aeration Length	53"(t) - 52"(b)
Clarifier Length	24"(t) - 23"(b)
Pump Tank	57¼"(t) - 54¾"(b)
Water Level	55"
Air Diffuser	27¼"
Bottom of Inlet to Bottom of Tank	61½"

(t) = Top Dimension - (b) = Bottom Dimension

Pro Flo 600 SLPT

Drawing Not to Scale
All Gallonage Approximate

NOTES:
 - NOT TO SCALE.
 - SET TO ACTIVATE IN PRE DAWN HOURS OF MIDNIGHT TO 5:00 AM.

14.47 GALLONS PER INCH
46" - 55" = RESERVE(130.23 GALLONS)
46" = ALARM ON
12" - 46" - WORKING LEVEL (491.91 GALLONS)
10" - 12" = ON/OFF TETHER (28.94 GALLONS)
0" - 10" = SUMP (144.7 GALLONS)

C1 SERIES

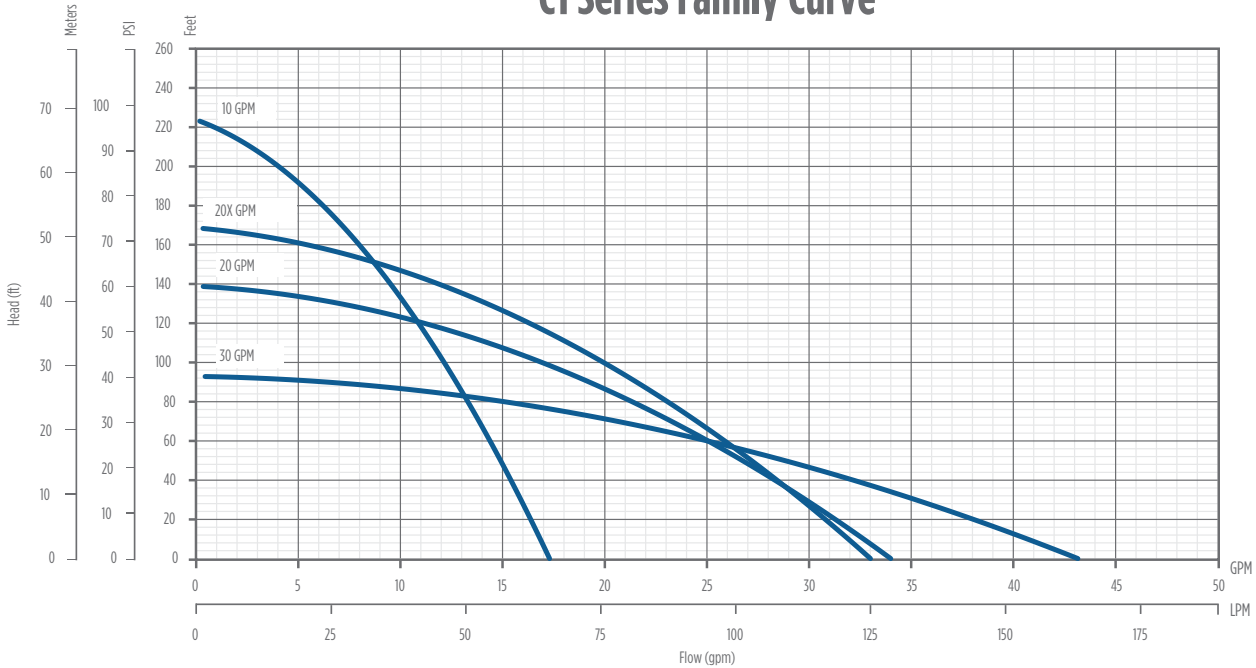
CISTERN PUMPS

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

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



C1 Series Family Curve



FEATURES

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

APPLICATIONS

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

ORDERING INFORMATION

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

Note: All units have 10 foot long SJ00W leads.



A/M



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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.

Revocable Transfer on Death Deed

Date: AUGUST 2/, 2023

Owner (Transferor): MARYANN HILL (also known as MARY ANN HILL), an unmarried woman, holding title as her sole and separate property.

Legal Description of Comal County Property (including any improvements):

LOT 8R, EAST RIDGE OF CYPRESS COVE, A SUBDIVISION IN COMAL COUNTY, TEXAS, ACCORDING TO THE MAP OR PLAT THEREOF RECORDED IN VOLUME 2, PAGES 29-30, MAP AND PLAT RECORDS, COMAL COUNTY, TEXAS, AN AMENDMENT TO PLAT RECORDED IN DOCUMENT NO. 9806001037, MAP AND PLAT RECORDS, COMAL COUNTY, TEXAS; MOST RECENTLY RECORDED ON JUNE 23, 2023 AS INSTRUMENT NO. 202306019836 IN THE DEED RECORDS OF COMAL COUNTY, TEXAS AND MORE COMMONLY KNOWN AND NUMBERED AS 336 ROSEWOOD DRIVE, SPRING BRANCH, COMAL COUNTY, TEXAS.

Property Address:

336 Rosewood Drive
Spring Branch, TX 78070
Comal County

Primary Beneficiary (Transferee):

I designate the following beneficiary, if the beneficiary survives me:

SHANE ANDREW GROFF
13319 Bristow Dawn
San Antonio, TX 78217
Bexar County

Alternate Beneficiary or Beneficiaries (optional): NONE

Transfer on Death: (Unmarried)

At my death, I grant and convey to the primary beneficiary or beneficiaries, my interest in the property, to have and hold forever.

In the Event of Death of a Beneficiary:

In the event a primary beneficiary predeceases me, and at least one primary beneficiary survives me, I grant and convey the primary beneficiaries' share or shares of the property, to have and hold forever, as follows:

MAH (1) Anti-Lapse Election. To the surviving primary beneficiary or beneficiaries, but if a deceased primary beneficiary, if any, was a child or other descendant of mine or of one or both of my parents, that deceased primary beneficiary's share will pass to the surviving children or other descendants of that deceased primary beneficiary.

_____ (2) Surviving Primary Beneficiaries Election. To the surviving primary beneficiary or beneficiaries only. If a deceased primary beneficiary, if any, was a child or other descendant of mine or of one or both of my parents, I do not want that deceased primary beneficiary's share to pass to the children or other descendants of that deceased primary beneficiary.

No Surviving Primary Beneficiary:

If no primary beneficiary survives me, I grant and convey the share of the property that would have transferred to a deceased primary beneficiary, to have and hold forever, as follows:

MAH (1) Anti-Lapse Election. To the surviving children or other descendants of the deceased primary beneficiary, if the deceased primary beneficiary was a child or other descendant of mine or of one or both of my parents.

_____ (2) Surviving Alternate Beneficiaries Election. To the alternate beneficiary or beneficiaries designated above. If the deceased primary beneficiary was a child or other descendant of mine or of one or both of my parents, I do not want that deceased primary beneficiary's share to pass to the children or other descendants of that deceased primary beneficiary.

If no primary beneficiary survives me and the anti-lapse election is not chosen or that election is chosen, but a deceased primary beneficiary is not a child or other descendant of mine or of one or both of my parents, I grant and convey to the alternate beneficiary or beneficiaries my share in the property that otherwise would have transferred to the deceased primary beneficiary, to have and hold forever. If I have not designated alternate beneficiaries, this transfer on death deed shall be considered cancelled by me.

Consideration:

Cash and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged.

Reservations from Conveyance:

None

Exceptions to Conveyance and Warranty:

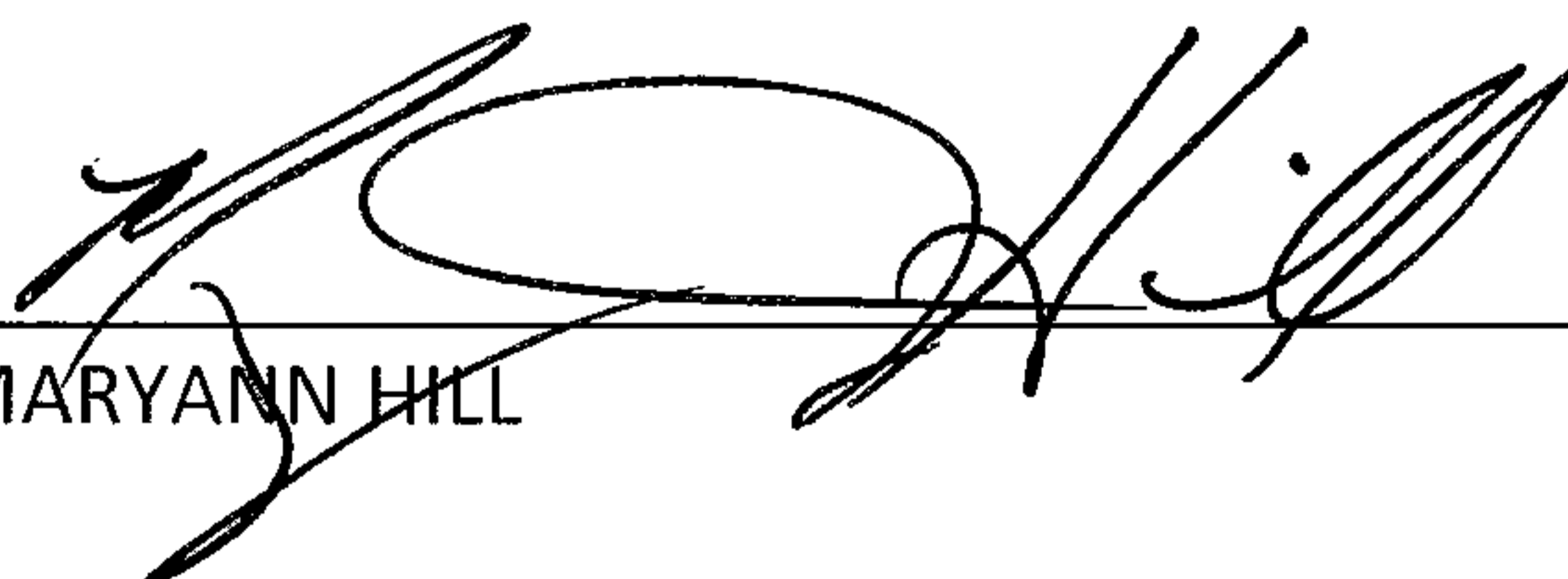
Validly existing easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded and validly existing instruments, other than conveyances of the surface fee estate, that affect the Property; and taxes for the year of Owner's death, which Beneficiary assumes and agrees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

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

As a material part of the Consideration for this deed, Owner and Beneficiary agree that Beneficiary is taking the Property "AS IS" with any and all latent and patent defects and that there is no warranty by Owner that the Property has a particular financial value or is fit for a particular purpose. Beneficiary acknowledges and stipulates that Beneficiary is not relying on any representation, statement, or other assertion with respect to the Property condition but is relying on Beneficiary's examination of the Property. Beneficiary takes the Property with the express understanding and stipulation that there are no express or implied warranties except for limited warranties of title set forth in this deed.

This deed was prepared without a review or examination of the title or a survey of the Property and no opinions or representations are being made either expressly or impliedly by the Behlmann Law Firm, LP.

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



MARYANN HILL

(Notary Acknowledgment Continued On Page 4 of This Document)

STATE OF TEXAS

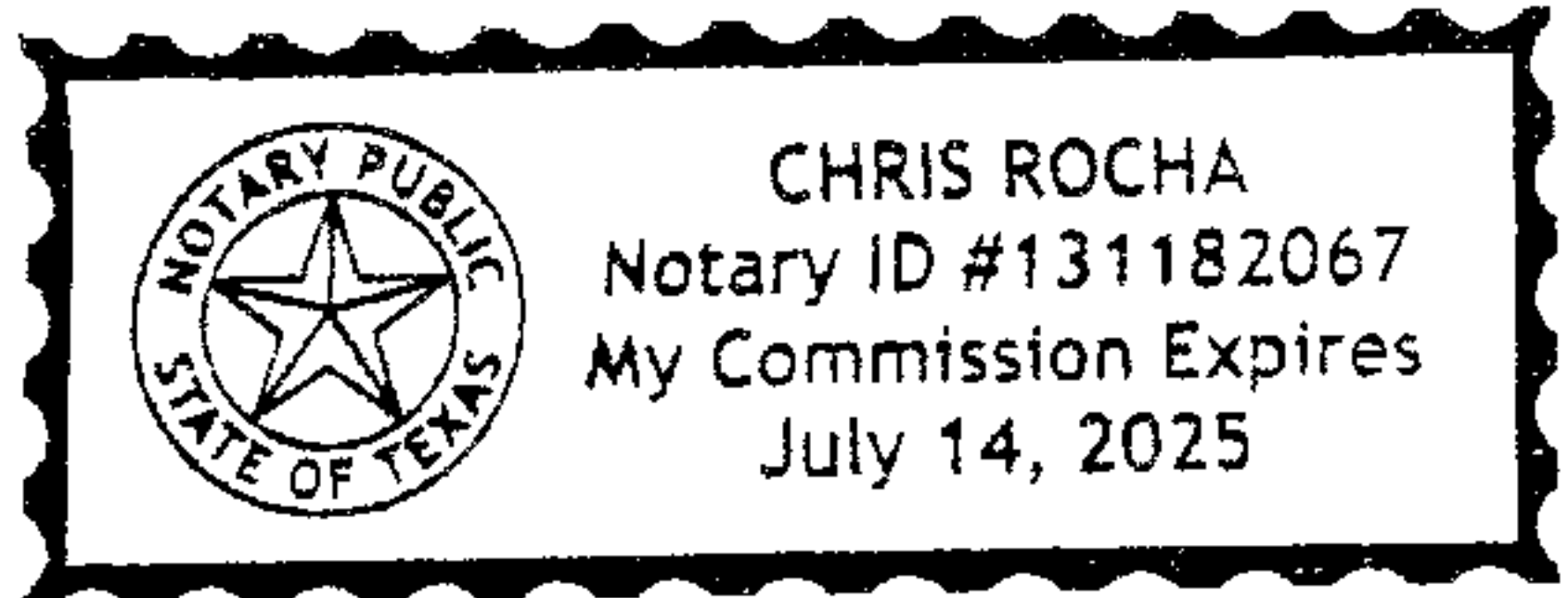
§

§

COUNTY OF Bexar

§

This instrument was acknowledged before me on AUGUST 21st, 2023, by MARYANN HILL.



Chris Rocha

Signature, Notary Public, State of Texas

Printed Name of Notary: Chris Rocha

My Commission Expires: July 14, 2025

PREPARED IN THE OFFICE OF:

Behlmann Law Firm, LP
21218 Kingsland Blvd.
Katy, Texas 77450-5898
Tel: (281) 398-0088
Fax: (832) 201-8627

AFTER RECORDING RETURN TO:

↙ Behlmann Law Firm, LP
21218 Kingsland Blvd.
Katy, Texas 77450-5898

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
08/29/2023 08:31:04 AM
TAMMY 4 Page(s)
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Bobbie Koepf