

Comal County Environmental Health

OSSF Inspection Sheet

Installer Name: _____

OSSF Installer #: _____

1st Inspection Date: _____

2nd Inspection Date: _____

3rd Inspection Date: _____

Inspector Name: _____

Inspector Name: _____

Inspector Name: _____

Permit#:

Address:

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

Inspector Notes:

**Comal County Environmental Health
OSSF Inspection Sheet**

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

**Comal County Environmental Health
OSSF Inspection Sheet**

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

**Comal County Environmental Health
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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: 118154
Issued This Date: 12/27/2024
This permit is hereby given to: Roger & Linda Johnston

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

193 FALLING HILLS
NEW BRAUNFELS, TX 78132

Subdivision: River Chase
Unit: 6
Lot: 917
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.

RECEIVED

By Kathy Griffin at 8:56 am, Dec 04, 2024



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

--	--

Date Received

Initials

118154

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

11/15/2024

Date

___ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

INCOMPLETE APPLICATION (Missing Items Circled, Application Refeused)



COMAL COUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

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

Date 11/13/2024

Permit Number 118154

1. APPLICANT / AGENT INFORMATION

Owner Name Roger & Linda Johnston

Agent Name Brian Erxleben, R.S. 3637

Mailing Address 193 Falling Hills

Agent Address 562 S. Hwy 123 Bypass #128

City, State, Zip New Braunfels, Texas 78132

City, State, Zip Seguin, Texas 78155

Phone # 830-515-8902

Phone # 830-660-9133

Email rogerjohns@me.com

Email bandverx@gmail.com

2. LOCATION

Subdivision Name River Chase Unit 6 Lot 917 Block NA

Survey Name / Abstract Number _____ Acreage _____

Address 193 Falling Hills City New Braunfels State Texas Zip 78132

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) 2-Houses as a single family residence

Number of Bedrooms 6 total

Indicate Sq Ft of Living Area 4696

☐ 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: \$ 150,000 (Structure Only)

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

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

Source of Water ☒ Public ☐ Private Well ☐ Rainwater

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

Date

Page 1 of 2

Revised January 2021



ON-SITE SEWAGE FACILITY APPLICATION

Planning Materials & Site Evaluation as Required Completed By Brian Erxleben, R.S. 3637

System Description Aerobic Treatment/Surface Application

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

Tank Size(s) (Gallons) 750 gpd Absorption/Application Area (Sq Ft) 6842

Gallons Per Day (As Per TCEQ Table III) 420

(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

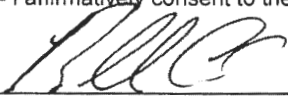
(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to Construct will not be issued for the proposed OSSF until the CZP has been approved by the appropriate regional office.)

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

11-13-24
Date

1
C
THE COUNTY OF COMAL
STATE OF TEXAS

Doc# 200406043993

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

87734

According to Texas Natural Resource Conservation Commission Rules for On-Site Sewage Facilities, this document is filed in the Deed Records of Comal County, Texas.

RECEIVED

FEB 02 2006

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Natural Resource Conservation Commission (TNRCC) to regulate on-site sewage facilities (OSSF's). Additionally, the Texas Water Code (TWC), § 5.012 and §5.013, gives the TNRCC 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 TNRCC, 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 TNRCC requires a deed recording. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This deed certification is not a representation or warranty by the TNRCC of the suitability of this OSSF, nor does it constitute any guarantee by the TNRCC that the appropriate OSSF was installed.

An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91 (12) will be installed on the property described as : Lot 917 , Unit 6, River Chase Subdivision,

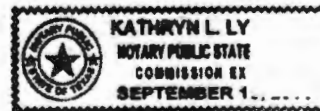
The property is owned by: Homes of the Hills, Daniel O'Connor

This OSSF must be covered by a continuous maintenance contract. All maintenance on this OSSF must be performed by an approved maintenance company, and a signed maintenance contract must be submitted to Comal County Engineer's Office within 30 days after the property has been transferred.

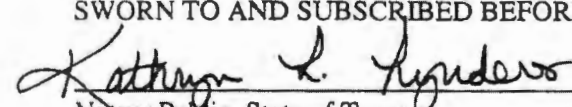
The owner will, upon sale or transfer of the above described property, request a transfer of the permit for the OSSF to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the Comal County Engineer's Office.

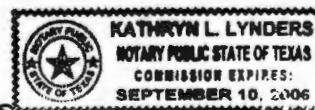
WITNESS BY HAND(S) on this 11 day of November, 2004.


Daniel O'Connor



SWORN TO AND SUBSCRIBED BEFORE ME on this 11 day of November, 2004.


Notary Public, State of Texas



Notary's Printed Name: Kathryn L. Lynders

My Commission Expires: 9/10/06

AFFIDAVIT OF A SINGLE FAMILY RESIDENCE

THE COUNTY OF COMAL
STATE OF TEXAS

Before me, the undersigned authority, on this day personally appeared _____

Roger Johnston, who after being duly sworn, upon oath states that he/ she is the owner of record of those certain tracts or parcels of land lying and being situated in Comal County, Texas, and being more particularly described as follows:

Lot 917

River Chase, Unit 6

The undersigned further states the following described structures _____

5-bedroom Residence, 3976 SF

1-bedroom Residence, 720 SF

on the said residential property are for one family and are routinely used only by members of the household of that one family.

WITNESS BY HAND(S) ON THE 15th DAY OF November, 2024

Roger Johnston

~~Denise W Mitchell~~ N/A

Owner(s) signature(s)

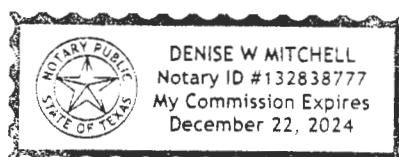
SWORN TO AND SUBSCRIBED BEFORE ME ON THIS

15 DAY OF November, 2024

Denise W Mitchell
Notary Signature

Notary's Printed Name: Denise W Mitchell

My Commission Expires: December 22, 2024



OSSF SOIL EVALUATION REPORT INFORMATION
COMAL COUNTY

DATE: 11-13-24

Applicant Information:

Name: Roger & Linda Johnston
Address: 193 Falling Hills
City: New Braunfels State: Texas Zip: 78132
Ph: (830) 515-8902 Fax:

Site Evaluator Information:

Name: Brian Erxleben
Address: 562 S. Hwy 123 Bypass #128
City: Seguin State: Texas Zip: 78155
Ph: (830) 660-9133 E-mail: bandverx@gmail.com

Property Location:

Lot: 917 Block:
Subdivision: River Chase, Unit 6
Street/Road Address: 193 Falling Hills
City: New Braunfels State: TX Zip: 78132
Additional:

Installer Information:

Name: Carl Eoff, OS0029546
Company:
Address: 420 Baer Creek Drive
City: New Braunfels State: TX Zip: 78132
Ph: (210) 669-6088 carleoff@yahoo.com

SCHEMATIC of LOT of TRACT

Show:

North arrow, adjacent streets, property lines, dimensions, location of buildings, easements, swimming pools, water lines, and other structures where known.

Location of existing or proposed water wells within 150 feet of property.

Indicate slope or provide contour lines from the structure to the farthest location for the proposed soil absorption or irrigation area.

Location of soil boring or dug pits (show with respect to a known reference point).

Location of drainage ways, water impoundment areas, cut or fills bank, sharp slopes and breaks.

Lot Size: 1.10 acres

SITE DRAWING

SEE SITE PLAN

FEATURES OF SITE AREA

Presence of 100 year flood zone	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Presence of upper water shed	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Existing or proposed water well in nearby area	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Organized sewage service available to lot	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Presence of adjacent ponds, streams, water impoundments	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		

Site Evaluator:

NAME: BRIAN ERXLEBEN Signature:  License No: 11458

COMAL COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

OSSF SOIL EVALUATION FORM

Owners Name: Roger & Linda Johnston
 Physical Address: 193 Falling Hills New Braunfels, Texas 78132
 Name of Site Evaluator: Brian Erxleben, S.E. #11458
 Date Performed: 11-13-24 Proposed Excavation Depth: NA

Requirements:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil evaluation must be shown on the application site drawing or designer's 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.
 Please describe each soil horizon and identify any restrictive features in the space provided below. Draw lines at the appropriate depths.

SOIL BORING NUMBER <u>NA</u>						
Depth (Feet)	Texture Class	Soil Texture	Structure (For Class III- blocky, platy or massive)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0						Modifying an existing aerobic spray system
1						
2						
3						
4						
5						

SOIL BORING NUMBER _____						
Depth (Feet)	Texture Class	Soil Texture	Structure (For Class III- blocky, platy or massive)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0						
1						
2						
3						
4						
5						

FEATURES OF SITE AREA

Presence of 100 year flood zone	YES ___ NO <u>X</u>
Presence of adjacent ponds, streams, water impoundments	YES ___ NO <u>X</u>
Existing or proposed water well in nearby area	YES ___ NO <u>X</u>
Organized sewage available to lot or tract	YES ___ NO <u>X</u>
Recharge features within 150 feet	YES ___ NO <u>X</u>

I certify that the above statements are true and are based on my own field observations.

Signature of Site Evaluator

Date



11-13-24

Brian Erxleben, R.S., S.E.
562 S. Hwy 123 Bypass #128
Seguin, Texas 78155
Mobile (830) 660-9133 bandverx@gmail.com

OSSF DESIGN

Owner: **Roger & Linda Johnston**
Location: **193 Falling Hills New Braunfels, Texas 78132**
Phone: **(830) 515-8902**
Date: **11-13-24**

Development: **Single family residence with water saving devices** Bedrooms: **6 total** Sq. Ft: **4696 total**

Q: **420 gpd** Soil: **Type 4** R_i : **0.064 gal/ft²/day** Min. Req. ATU Capacity: **720 gpd**

System Type: **Aerobic/Surface Application (Jet J-750)**

Trash Tank: 500 gall Aerobic Tank: 750 gpd Pump Tank: 500 gall

Supply Line: **Sch 40, 1" purple (~200')** Check Valve Required: **No**

Minimum Application Area (A): 6562 ft² ($A = Q/R_i$)

Sprinklers: **K-Rain Super Pro Low Angle**

Number	Nozzle	PSI	Pattern	Radius	Area/head	GPM/head	R_i
S1	#4	40	360°	33 ft	3421 ft ²	3.9	0.064
S2	#4	40	360°	33 ft	3421 ft ²	3.9	0.064

Overlap Area: 0 Actual Application Area: **6842 ft²** GPM: **7.8 GPM**

TDH Calculations:

$$\text{Friction Head}(H_f) = \frac{1.2(10.4397)(L)(Q)^{1.85}}{(C)^{1.85}(D)^{4.8655}} = 17 \text{ ft}$$

L = Length of equivalent pipe length (D) in feet

C = Hazen - Williams flow coefficient (150 for schedule 40)

Q = Flow rate, gpm

D = Internal pipe diameter, inches

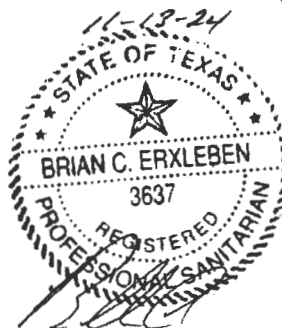
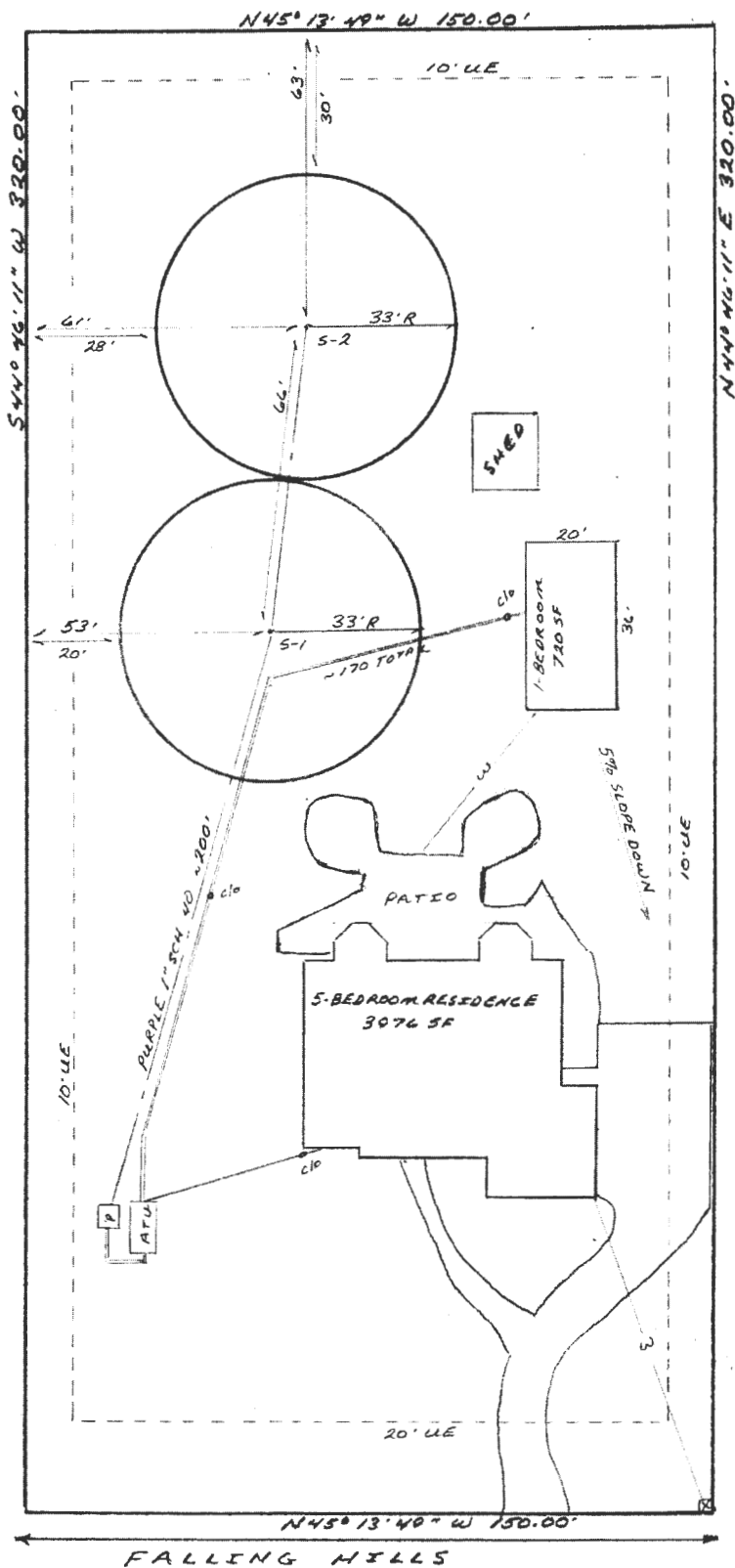
Pressure Head (H_p) = 93 ft (2.31)(psi) Elevation Head (H_e) = 5 ft

TDH = **115 ft** ($H_f + H_p + H_e$)

Pump Requirements: **7.8 GPM @ 115 ft TDH** Pump Used: **StaRite 0.50 HP, 20 GPM bottom suction**

- **Pump Runs On Demand**
- **Tablet chlorinator**





LOT 917
RIVER CHASE, UNIT 6
1.10 ACRES

PROPERTY IS LOCATED OUTSIDE OF THE 100-YEAR FLOODPLAIN AND WITHIN THE RECHARGE ZONE. DESIGN COMPLIES WITH ALL OF THE PROVISIONS OF THE CURRENT WPAP FOR THE SUBDIVISION.

NOTES:

1. Design is a modification of an existing OSSF installed under permit #87734. A 1-bedroom 720 ft^2 is being connected to the OSSF creating a single family dwelling with a total of 6 bedrooms and 4696 ft^2 and a total wastewater flow of 420 gpd.
2. Install a 2-way cleanout in a 3" or 4" sch 40 tightline from the 1-bedroom structure to the ATU, minimum slope 1/8 in/ft. Additional cleanout to be installed at an interval not to exceed 100'.
3. Existing ATU is a Jet J-750.
4. Pump tank is an existing 500 gall. Pump shall be a StaRite 0.50 HP, 20 gpm bottom suction or equivalent. A mid-level suction pump is not acceptable. Pump shall run "on-demand". See "Pump Tank Cross-Section" for float levels.
5. Supply line to the sprinklers is purple 1" sch 40.
6. S1 & S2 are K-Rain Proplus low angle sprinklers with #4 nozzles operating @ 40 psi, 360° pattern, 33' radius.
7. There shall be no obstruction within 10' of the sprinkler heads.
8. Audible & visual alarms, external disconnect within site of the pump tank, pump & alarms on separate breakers and external wiring in conduit are required.
9. Tablet chlorinator.
10. Any excavations and/or exposed rock in the disposal area shall be covered with topsoil and seasonal grasses shall be seeded over the disposal area in order to minimize run-off & erosion.

SITE PLAN & OSSF DESIGN:

ROGER & LINDA JOHNSTON
193 FALLING HILLS
NEW BRAUNFELS, TEXAS 78132

BRIAN C. ERXLEBEN, R.S.
562 S. HWY 123 BYPASS #128
SEGUIN, TEXAS 78155
(830) 660-9133

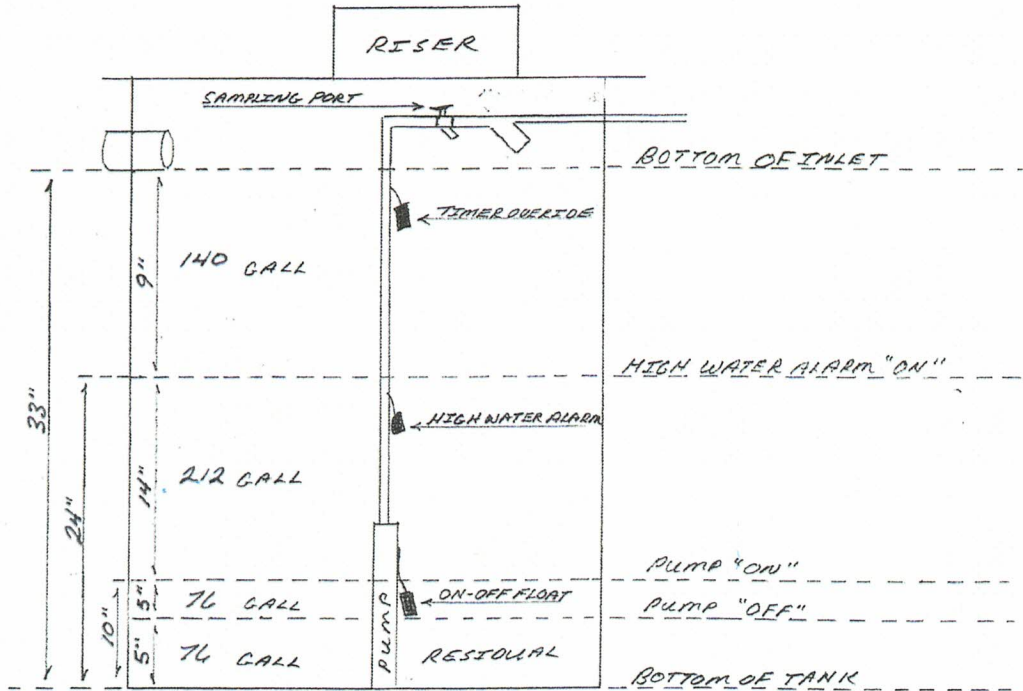
DATE: 11-13-24

SCALE: 1" = 40'

PUMP TANK CROSS-SECTION 500 GALL

RECEIVED

By Brandon Olvera at 2:45 pm, Dec 27, 2024



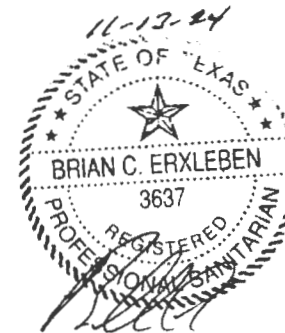
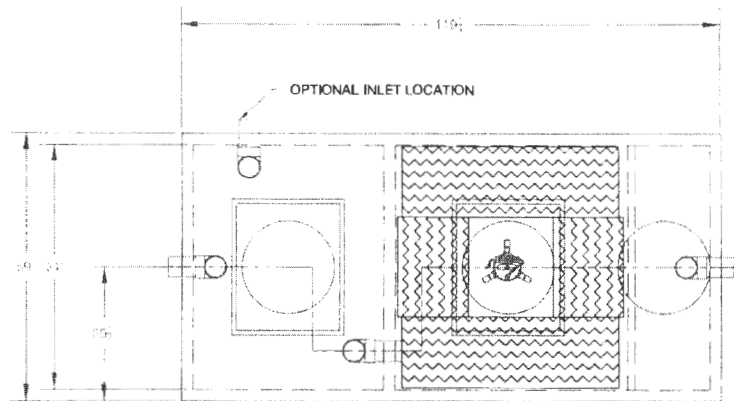
Q = 420 GPD
15.15 GALL/IN
PUMP: STARITE 0.50 HP 20 GPM BOTTOM SUCTION
MODE OF OPERATION: ON DEMAND

ROGER & LINDA JOHNSTON
193 FALLING HILLS
NEW BRAUNFELS, TEXAS 78132

BRIAN C. ERXLEBEN, R.S.
562 S. HWY 123 BYPASS #128
SEGUIN, TEXAS 78155
(830) 372-3778

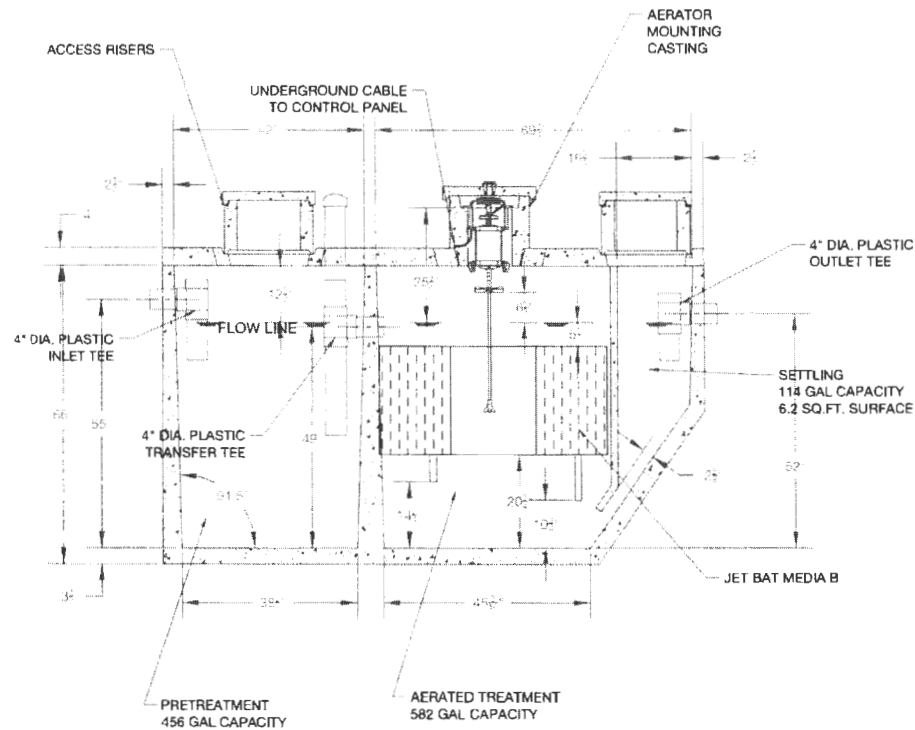
DATE: 11-13-24


SCALE: NTS



NOTES:

1. AERATOR MODEL 700LL MUST BE USED IN CONTINUOUS OPERATION
2. DEVELOP RISERS TO GRADE OR WITHIN 12" BELOW GRADE
3. PLASTIC RISERS CAST INTO THE TANK LID MAY BE USED IN PLACE OF CONCRETE RISERS

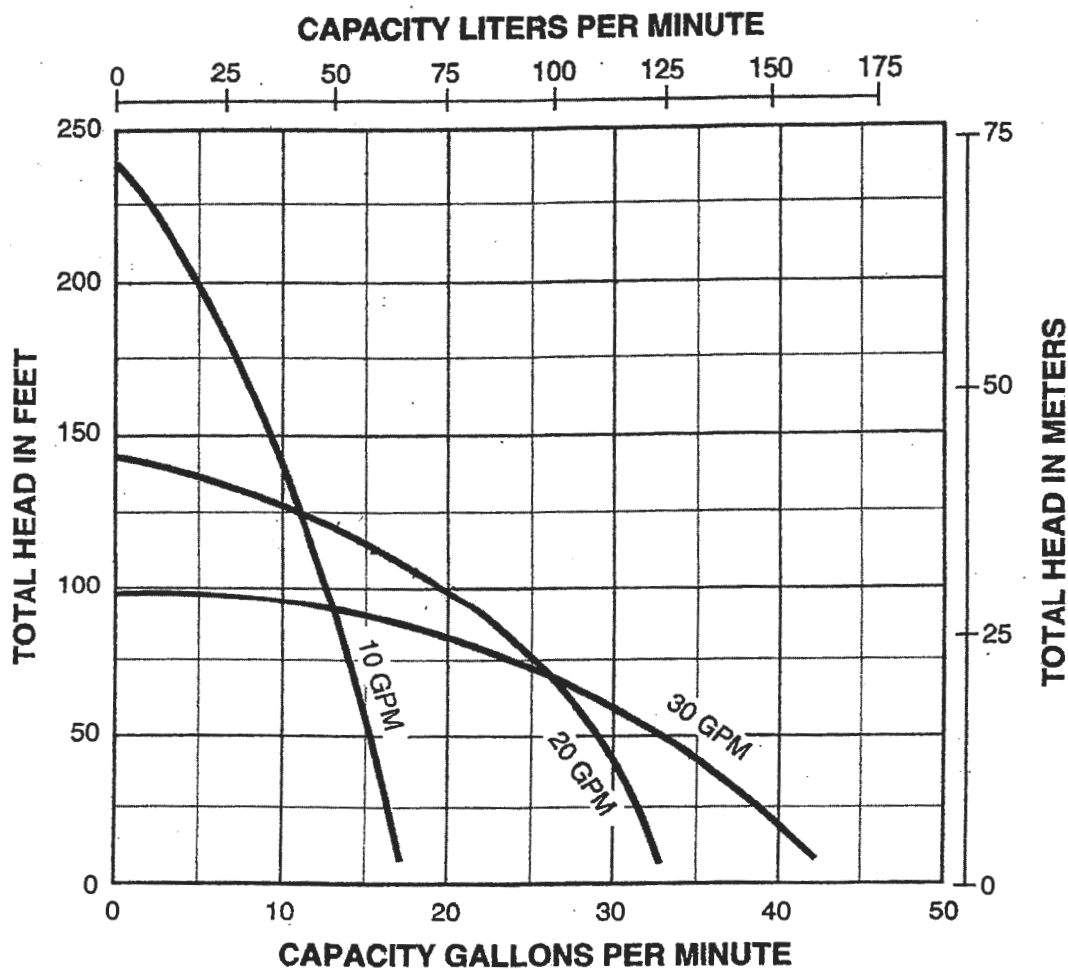


- 1407/08/14/14 REDRAWN		N J K	
REVIECD	DATE	DESCRIPTION	DRFTAPRV
		DRAWN BY: N J K	DATE: 08/14/14
		APPROVED BY:	DATE:
TITLE:		MATERIAL:	
J-750 RESIDENTIAL WWTP		SCALE: 1:20	SIZE: C
ONE PIECE TANK CASTING		UNLESS OTHERWISE SPECIFIED:	
USED ON:		ALL DIMENSIONS ARE IN INCHES	
		DECIMAL: ± .005	
		FRACTIONAL: ± 1/64	
		DEGREE: ± 1°	
PROPRIETARY PROPERTY: THIS DRAWING IS THE PROPERTY OF JET INC. AND MAY NOT BE REPRODUCED, COPIED OR USED WITHOUT WRITTEN PERMISSION.		DRAWING NUMBER: J-750	
		REV: -	



4" multi-stage submersible pump

PUMP PERFORMANCE



PUMP PERFORMANCE (Capacity in Gallons per Minute)

Pump Model	PSI											
	0	10	20	30	40	50	60	70	80	90	100	110
10DOM05121			15.0	13.7	12.7	11.5	10.2	8.4	6.5	4.3	1.0	
20DOM05121			30.0	26.0	21.5	14.2	4.4					
30DOM05121		38.5	33.3	25.8	16							

PUMP PERFORMANCE (Capacity in Liters per Minute)

Pump Model	Bar											
	0	.69	1.38	2.07	2.76	3.45	4.13	4.82	5.51	6.20	6.89	7.58
10DOM05121			56.8	51.9	48.1	43.5	38.6	31.8	24.6	16.3	3.8	
20DOM05121			113.6	98.4	81.4	53.7	16.7					
30DOM05121		145.7	126.0	97.7	60.6							

SPRINKLER INSTALLATION

7 INSTALL AND BURY

Thread the sprinkler onto the pipe. Bury the sprinkler flush to grade.

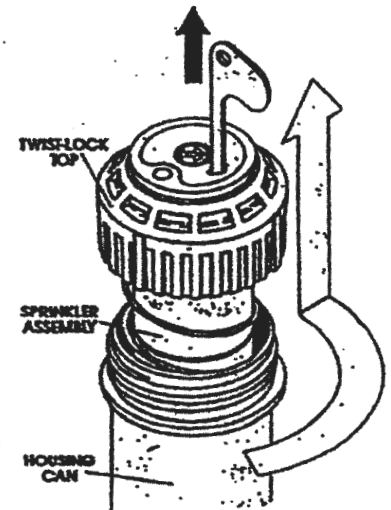
POINTING THE LEFT START

8 TURN THE CAN

You can orient the LEFT START position (the point where the sprinkler will begin spraying) by simply turning the entire sprinkler housing can on the pipe. Visually point the nozzle retention screw where you want it to begin spraying.

OR TURN THE LOWER PORTION OF THE RISER

Pull the riser up with your KEY. Grab the LOWER portion of the riser, and rotate it to orient the nozzle to the desired LEFT starting position. IMPORTANT: DO NOT GRAB THE TOP PORTION OF THE RISER.



9 INSPECTING THE FILTER

Unscrew the top and lift complete sprinkler assembly out of the housing can. The filter is on the bottom of the sprinkler assembly and can easily be pulled out, cleaned and re-installed.

STANDARD NOZZLE PERFORMANCE CHART

Nozzle	PSI	Radius	GPM
#1	30	33'	1.0
	40	35	1.3
	50	38	1.4
	60	38'	1.5
#2	30	38'	2.1
	40	39'	2.5
	50	40'	3.0
	60	41'	3.1
#3	30	41'	2.8
	40	42'	3.3
	50	45'	3.6
	60	46'	4.2
#4	30	43'	3.9
	40	45'	4.5
	50	47'	5.4
	60	52'	5.8
#5	40	49'	6.2
	50	51'	7.0
	60	54'	7.9
	70	55'	8.1
#8	40	47'	8.0
	50	51'	8.9
	60	53'	9.6
	70	55'	10.6

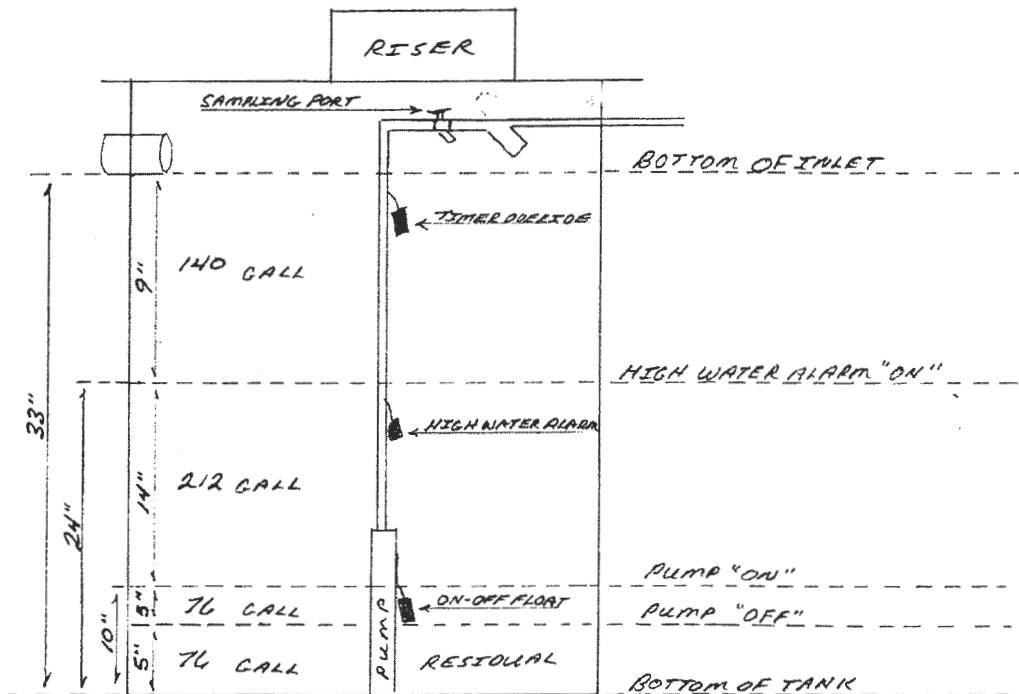
LOW ANGLE NOZZLE PERFORMANCE CHART

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

DATA REPRESENTS TEST RESULTS IN ZERO WIND. ADJUST FOR LOCAL CONDITIONS. RADIUS MAY BE REDUCED WITH NOZZLE RETENTION SCREW.

© 1996 K-Rain Mfg. Corp.

PUMP TANK CROSS-SECTION 500 GALL



Q = 420 GPD
 15.15 GALL/IN
 PUMP: STARITE 0.50 HP 20 GPM BOTTOM SUCTION
 MODE OF OPERATION: ON DEMAND

ROGER & LINDA JOHNSTON
 193 FALLING HILLS
 NEW BRAUNFELS, TEXAS 78132

BRIAN C. ERXLEBEN, R.S.
 562 S. HWY 123 BYPASS #128
 SEGUIN, TEXAS 78155
 (830) 372-3778

DATE: 11-13-24

SCALE: NTS

INVOICE

Brian Erxleben, R.S., S.E.
562 S. Hwy 123 Bypass #128
Seguin, Texas 78155
Mobile (830) 660-9133 bandverx@gmail.com

INVOICE DATE: 11-13-24

BILL TO: 4 Rivers Construction

ADDRESS:

CITY:

STATE:

ZIP:

FAX:

DATE	DESCRIPTION	AMOUNT
11-13-24	Septic System Design: Roger & Linda Johnston 193 Falling Hills New Braunfels 78132	700.00
TOTAL		700.00

THANKS!



COMAL COUNTY

ENGINEER'S OFFICE

RE: ***193 Falling Hills
River Chase 6
Lot 917***

Dear Property Owner & Agent,

Thank you for your submission. We have reviewed the planning materials for the referenced permit application, and unfortunately, they are insufficient. To proceed with processing this permit, we require the following:

- ✓ Sign and seal the pump tank details.
- 2. Revise accordingly and resubmit.

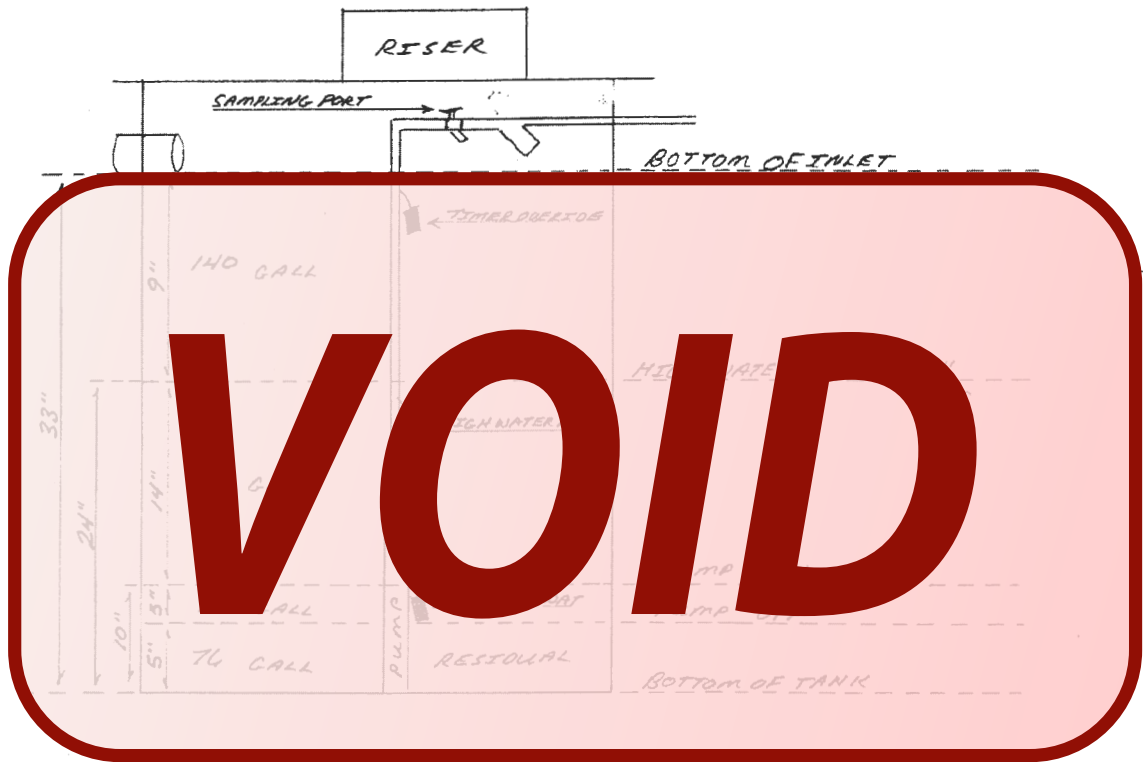
If you have any questions, you can email me or call the office.

Thank You,

| **Brandon Olvera** | **Designated Representative OS0034792** |

| Comal County | www.cceo.org | f: 830-608-2078 | e: olverb@co.comal.tx.us |

**PUMP TANK CROSS-SECTION
500 GALL**



**Q = 420 GPD
15.15 GALL/IN
PUMP: STARITE 0.50 HP 20 GPM BOTTOM SUCTION
MODE OF OPERATION: ON DEMAND**

ROGER & LINDA JOHNSTON 193 FALLING HILLS NEW BRAUNFELS, TEXAS 78132	
BRIAN C. ERXLEBEN, R.S. 562 S. HWY 123 BYPASS #128 SEGUIN, TEXAS 78155 (830) 372-3778	DATE: 11-13-24
SCALE: NTS	

CCEO
COPY



Comal County

OFFICE OF COMAL COUNTY ENGINEER

License to Operate

On-site Sewage Treatment and Disposal Facility

Date Issued: 3/23/2006

Permit Number: 87734

Location Description: 193 Falling Hills-Lot 917, New Braunfels, TX 78132
Lot 917, River Chase Unit 6 Subdivision

Type of System: Aerobic Treatment with Surface Irrigation Discharge

License issued to: Home of the Hills

This license is authorization for the owner to operate and maintain a private facility at the location described in accordance to the rules and regulations for on-site sewerage facilities of Comal County, Texas, and the Texas Natural Resource Conservation Commission.

The license grants permission to operate the facility. It does not guarantee successful operation. It is the responsibility of the owner to maintain and operate the facility in a satisfactory manner.

Inspection and licensing of a facility indicates only that the facility meets certain minimum requirements. It does not impede any governmental entity in taking the proper steps to prevent or control pollution, to abate nuisance, or to protect the public health.

This license to operate is valid for an indefinite period. The holder may transfer it to a succeeding owner, provided the facility has not been remodeled and is functioning properly.

Licensing Authority

Comal County Environmental Health

Michael Taylor OS8497
ENVIRONMENTAL HEALTH INSPECTOR

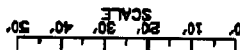
Bruce A. H. OS7722
ENVIRONMENTAL HEALTH COORDINATOR

CCEO
Done 12/23/06
COPY

P#87734
REVISED
RECEIVED

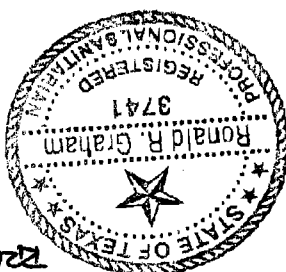
MAR 22 2006

ENVIRONMENTAL HEALTH

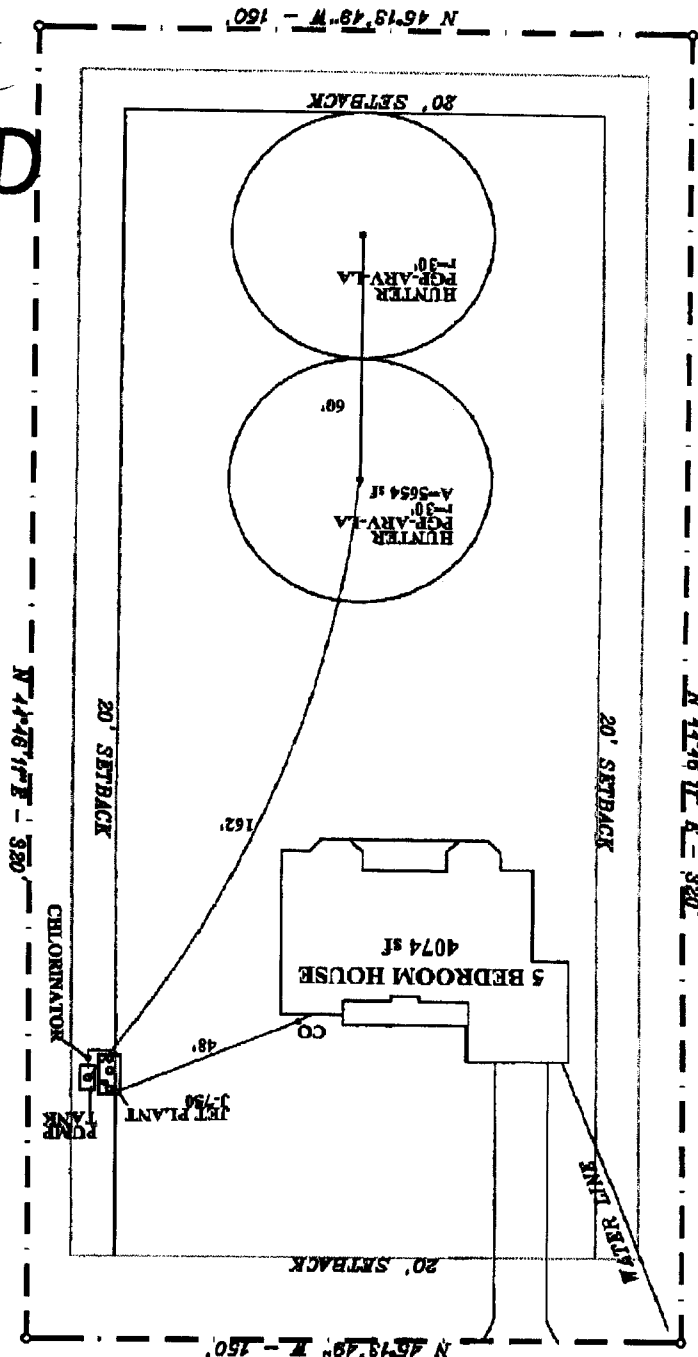


THIS DESIGN MEETS ALL OF THE REQUIREMENTS OF THE TEXAS COMMISSION ON ENVIRONMENTAL QUALITY OSSF REGULATIONS AND THE ORDERS OF COMAL COUNTY AND WILL NOT CAUSE A NUISANCE OR HEALTH HAZARD.

SYSTEM DESIGN
FOR
HOME OF THE HILLS SPEC
193 FALLING HILLS
LOT 917, UNIT 6
RIVER CHASE SUBDIVISION
COMAL COUNTY, TEXAS
BY
RONALD R. GRAHAM R.S. 3741
SOUTH TEXAS WASTEWATER TREATMENT
P.O. BOX 1344
BOHEMIA, TX 78006
DRAWING NO.: 243(R) DATE: 22 Feb 2006, R
ASBUILT: 21 MARCH 2006, CC



22 Mar 06



193 FALLING HILLS

LTSA-CC GF#

1229000791-6A

Doc# 200606028335

Return To:
ROGER D. JOHNSTON
193 FALLING HILLS
NEW BRAUNFELS TX 78132

Prepared By:
BLACK, MANN & GRAHAM, L.L.P.
4900 WOODWAY DRIVE, SUITE 650
HOUSTON, TEXAS 77056

[Space Above This Line For Recording Data]

NOTICE OF CONFIDENTIALITY RIGHTS:

If you are a natural person, you may remove or strike any of the following information from this instrument before it is filed for record in the public records: your social security number or your driver's license number.

WARRANTY DEED WITH VENDOR'S LIEN

MIN #:1001504-0506700066-8

THE STATE OF TEXAS

(X)

(X) KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF COMAL

(X)

THAT HOMES OF THE HILLS, INC., A TEXAS CORPORATION

, 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 ROGER D. JOHNSTON and LINDA S. JOHNSTON

, 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 one certain Promissory Note in the principal sum of One Hundred Thirty Thousand Dollars and no/100

, of even date

herewith, payable to the order of MILESTONE MORTGAGE CORPORATION

hereinafter called "Mortgagee," bearing interest at the rate therein provided; said Note containing the usual reasonable attorney's 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 L. B. HODGES

, Trustee; and

AP#:7354312

LN#: 09-34-710384

Warranty Deed With Vendor's Lien

9/97

VMP-970(TX) (0307) MW 07/03

VMP Mortgage Solutions (800)521-7291



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

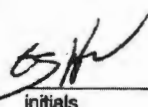
Grantor has GRANTED, SOLD and CONVEYED, and by these presents does GRANT, SELL and CONVEY unto said Grantee, the following described property, to-wit:

LOT 917, RIVER CHASE, UNIT SIX, COMAL COUNTY, TEXAS, ACCORDING TO THE MAP OR PLAT THEREOF: RECORDED IN VOLUME 14, PAGES 189-203, OF THE MAP AND PLAT RECORDS OF COMAL COUNTY, TEXAS.

Parcel ID Number: 450695091700

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.

initials _____ This conveyance is made subject to any and all valid and subsisting restrictions, easements, rights of way, ^{mineral}reservations, maintenance charges together with any lien securing said maintenance charges, zoning laws, ordinances of municipal and/or other governmental authorities, ~~covenants~~ 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.  initials

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 thereon shall have been fully paid according to the terms thereof, when this deed shall become absolute.

AP#: 7354312

LN#: 09-34-710384

EXECUTED this 1st day of July 2006



HOMES OF THE HILLS, INC., A TEXAS
CORPORATION

GRANTEE'S ADDRESS:
ROGER D. JOHNSTON
193 FALLING HILLS
NEW BRAUNFELS, TX 78132

STATE OF TEXAS

County of Comal

Before me Naomi M Flores, A Notary Public
HOMES OF THE HILLS, INC., A TEXAS CORPORATION

on this day personally appeared

known to me (or proved to me on the oath of _____ or through
Photo ID / Drivers License) to be the person whose name is subscribed to the foregoing
instrument and acknowledged to me that he/she/they executed the same for the purposes and consideration
therein expressed.

Given under my hand and seal of office this

6 day of July, 2006
Naomi M. Flores

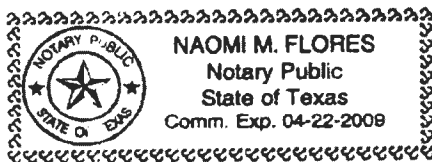
Notary Public

AP#: 7354312

LN#: 09-34-710384

970(TX) (0307)

Page 3 of 3



Doc# 200606028335
Pages 3
07/07/2006 9:07AM
Official Records of
COMAL COUNTY
JOY STREATER
COUNTY CLERK
Fees \$24.00



Doc# 200606028335