

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
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: 118251
Issued This Date: 02/12/2025
This permit is hereby given to: Pearson & Margaret Dabney

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

1046 SPARKMAN DR
BOERNE, TX 78006

Subdivision: Silver Hills
Unit: 1
Lot: 154
Block: na
Acreage: 1.3800

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.

REVISED

8:55 am, Feb 12, 2025

RECEIVED
By Kathy Griffin at 3:28 pm, Jan 02, 2025



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 12/2/24

Permit Number 118251

1. APPLICANT / AGENT INFORMATION

Owner Name	<u>Pearson Patricia Margaret Dabney</u>	Agent Name	<u>Maria Howland</u>
Mailing Address	<u>1016 Sparkman Dr</u>	Agent Address	<u>9131 Alpine Trak St</u>
City, State, Zip	<u>Boerne, TX, 78006</u>	City, State, Zip	<u>SA TX 78250</u>
Phone #	<u>512-771-7215</u>	Phone #	<u>210 389 8228</u>
Email	<u>contact@pearsonlabonylumes.com</u>	Email	<u>mhowlandost@yahoo.com</u>

2. LOCATION

Subdivision Name Silver Hills Unit 1 Lot 154 Block _____
 Acreage _____
 Survey Name / Abstract Number _____
 Address Sparkman Dr City Boerne State TX Zip 78006

3. TYPE OF DEVELOPMENT

- Single Family Residential
 - Type of Construction (House, Mobile, RV, Etc.) House
 - Number of Bedrooms 3
 - Indicate Sq Ft of Living Area 1,800
- 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: \$ 100,000 (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 *Patricia Dabney* Date 12/2/24
2/11/25



ON-SITE SEWAGE FACILITY APPLICATION

Planning Materials & Site Evaluation as Required Completed By Majid Howiatdost

System Description Spray Aerobic ~~septic~~ system

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

Tank Size(s) (Gallons) 600 GPD Absorption/Application Area (Sq Ft) ~~1,925~~ 3,925 Sq Ft

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 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.

Majid Howiatdost
Signature of Designer

12/16/24
Date



2/CB

THE COUNTY OF COMAL
STATE OF TEXAS

AFFIDAVIT

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 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):

Silver Hills Lot 154 Unit 1

The property is owned by (owner as per deed)

Pearson Dabney

This OSSF shall be covered by a continuous service policy 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 may be obtained from (insert name of permitting authority).

WITNESS BY HAND(S) ON THIS 3 DAY OF December, 2024.

Pearson Dabney
Owner(s) Printed Name(s)

[Signature]
Owner(s) Printed Signature(s)

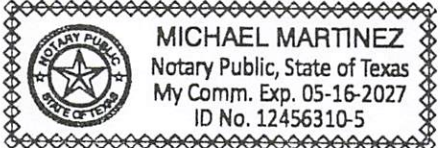
XXXXXXXXXXXXXXXXXX
Owner(s) Printed Name(s)

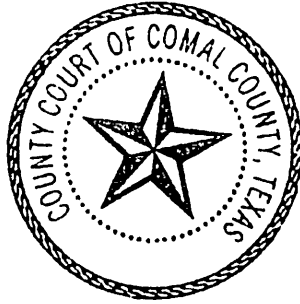
XXXXXXXXXXXXXXXXXX
Owner(s) Printed Signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 3 DAY OF

December, 2024.

[Signature]
Notary Public Signature





This page has been added to comply with the statutory requirement that the clerk shall stamp the recording information at the bottom of the last page.

This page becomes part of the document identified by the file clerk number affixed on preceding pages.

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
12/05/2024 09:09:36 AM
LAURA 2 Page(s)
202406036978



Bobbie Koepf



WASTEWATER TREATMENT SYSTEM MAINTENANCE CONTRACT

Customer	Residential	Initial Contract
Pearson Dabney LOT 2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Site Address	Agency	
1046 Sparkman Drive, Boerne, TX 78006	Comal County	
Email	Phone	Permit Number
pearsondabney@aol.com	(512) 771-7215	
System Details		
Treatment: Aerobic Surface Application Liquid Bleach / System: Clearstream Wastewater Systems 600 Max GPD		

MAINTENANCE AGREEMENT

I. General:

This work for hire agreement (hereinafter referred to as "Agreement") is entered into by and between the Client and Luna Environmental, LLC (hereinafter referred to as "Contractor"), located at 9595 Ranch Rd 12 Suite #1, Wimberley, TX 78676. By this agreement, Contractor agrees to render services, as described herein, and Client agrees to fulfill his/her/their responsibilities under the agreement as described herein.

II. Dates & Fees:

This agreement commences upon receipt by the Contractor of notice that the Local Regulatory Agency has given final approval of the installation (for a new or modified system), or on **11/25/2024** for an existing system, provided the Contractor has received payment in full of Fee(s) as agreed herein. The fees for this agreement are **\$450.00** and shall be prepaid per the payment terms outlined herein.

III. Renewal Terms:

The term of this Agreement is **2 year(s)** but in no case shall the Fee to the Contractor be for less than **one (1) year**. This Agreement is non-expiring and automatically renews without need for signing of any additional document(s) – provided Client continues to timely pay the Fee(s) when due. Agreements paid monthly are paid using Contractor’s system for automatic debit or automatic draft. Agreements that are prepaid will be invoiced by Contractor before the due date and must be timely paid by Client. If not timely paid before the due date, the Contractor has the right to terminate this Agreement.

IV. Services by Contractor:

1. Inspect and perform routine maintenance on the part with "On-Site Sewage Facility ("OSSF or "the system") in compliance with code, regulations, and/or rules of the Texas Commission on Environmental Quality ("TCEQ") and county in which the OSSF is located and the manufacturer’s requirements, at a frequency of approximately once every four (4) months.
2. Inspection, adjustment, and servicing of the mechanical, electrical, and other components to ensure proper functioning. This includes inspecting control panels, air pumps, air filters, diffusers, floats, and spray heads.
3. Effluent Inspection will include the following: effluent quality (color, turbidity, overflow, and odor), testing effluent chlorine and pH levels, when necessary, alarm function, filters, operation of effluent pump and chlorinator. Unless otherwise agreed to, Contractor does not provide chlorine. BOD and TSS annually on commercial accounts, additional charges apply.
4. Notify Client of any repairs needed to keep OSSF in proper working condition and up to regulatory standards. Items under warranty may be repaired while the technician is on-site. Replacement, Replenishment, and

Repairs are additional services not covered by the Fee. Regarding all such work, Contractor shall abide by Client's election in Section V of this agreement.

5. Report to the appropriate regulatory agency and to Client, as required by the State of Texas' on-site rules and, if required, TCEQ or County rules. All findings must be reported to the appropriate regulatory agency within 14 days.
6. Visit site within 48 hours of a service request.
7. Provide Customer Support line at (855) 560-9909

V. Client Responsibilities:

1. Maintain a current License to Operate and abide by the conditions and limitations of that license and all requirements for OSSF from the State and Local Regulatory Agency as well as manufacturer's recommendations.
2. Maintain disinfection unit and at all times provide proper and adequate chlorine supply or operating disinfection component, if OSSF is equipped with same.
3. Provide all necessary site, yard, or lawn maintenance and removal of obstacles, including dogs and other animals, as needed to allow the system and its components to function properly and to allow Contractor safe and easy access to all parts of the system and its components.
4. Maintain site drainage to prevent adverse effects on OSSF.
5. Provide for pumping of tanks, when and as suggested by Contractor, at Client's own expense. Typically, every 3 years.
6. Do not exceed the system's physical, hydraulic, or biological limitations
7. Notify Contractor within 24 hours of the occurrence of any and all alarms or problems with any component or with the system.
8. Be available by text, phone, or in person when the Contractor is on-site in case of required repair approvals or questions.
9. Promptly pay Contractor's bills, fees, and invoices in full.
10. Elect one of the following: Authorized

Yes, I authorize. If during the Contractor's time of the maintenance check any component of the system is found to need replacement, replenishment, or repair, then Client authorizes Contractor to perform the service per the above and bill or charge the Client for such additional services without further approval by Client so long as the service is \$150 or less and the Contractor has the necessary materials to perform the replacement, replenishment, or repair.

No, I do not authorize. If, during the Contractor's maintenance check, any component of the system is found to be in need of replacement, replenishment, or repair, Contractor will notify Client of repairs needed and, where feasible, provide an estimate of costs. No replacement, replenishment, or repairs will be performed without express approval of Client. Additional Service fees will apply for return visits to perform repairs.

VI. Authority

In signing this Agreement, the Client: (1) hereby affirms ownership to the Property as well as the OSSF that is the subject of this Agreement. (2) represents that he/she has authority to permit Contractor's entry upon property to monitor, service, or repair and agrees to hold Contractor and its agents harmless for entry upon such real property for these purposes, and (3) represents to have the authority to bind all owners of the property to the terms of this agreement, or to accept personal responsibility for these terms.

VII. Access By Contractor

Contractor is hereby granted access to the system and all related components for the purposes of performing the Services or Additional Services. Unless other arrangements have been made in advance in writing, Contractor's personnel may enter the property at reasonable times without any form of notice for the purpose of performing the Services or Additional Services. Contractor will require free, unrestricted access to the system and related components for the purpose of performing all work. If upon arrival at the site, Contractor determines that access is prevented, blocked, or restricted, Contractor is not required to perform any of the steps, and will be credited with completion of that maintenance check. Additional maintenance checks to complete the Services shall be billed to Client as an Additional Service.

VIII. Payment Terms:

The fee for this agreement only covers the services described herein. This fee does not cover equipment or labor for non-warranty repairs, labor for warranty repairs, or service charges resulting from unscheduled, Client requested trips to the Client’s OSSF. Payments not received within 30 days from the date of invoicing will be subject to a \$30.00 late penalty and or a 1.5% monthly carrying charge, whichever is greater. By signing this contract, the Client authorizes the Contractor to remove any parts which were installed but not paid for at the end of 30 days. The Client is still responsible for any labor costs associated with the installation and removal of said parts. All invoices are due upon receipt by Client. Under no condition shall prepayment of Fee, or the sum of monthly payments of Fee, be for less than **a one-year** term. After **2 year(s)**, prepaid agreements (other than monthly) may be prorated using monthly increments, less other charges as discussed elsewhere in this Agreement.

IX. Application or Transfer of Payment:

The Fee paid for this Agreement may transfer to the subsequent owner(s), however, this Agreement will not transfer. Client will advise subsequent owner(s) of the regulatory requirement for a replacement Agreement. Regulations require that replacement Agreements be signed and received within 30 days of transfer of ownership. Contractor will apply all funds received from Client first to any past-due obligations arising from this Agreement including late charges, returned check charges, and charges for repairs or services not paid within 10 days of invoicing. Unpaid balances on Client’s account may lead to the extension of the monthly drafting or debiting program, if applicable, to complete payment of Client’s account balance(s).

X. Termination of Agreement:

After a minimum of **2 year(s)**, in order to provide sufficient time to comply with the regulatory requirement for notices from the Contractor to the Local Regulatory Agency, this Agreement may be terminated for any reason by either party with a minimum 30 day written notice, without fault of the terminating party. Contractor shall be due a Fee equal to at least the first year and may also deduct for any other work performed by Contractor but not yet paid by Client, whether invoiced prior to termination or not. Contractor will notify the appropriate Local Regulatory Agency of this termination.

XI. Limitation of Liability:

In no event shall the Contractor be liable for indirect, consequential, incidental, or punitive damages, whether in contract, tort, or any other theory of liability. In no event shall the Contractor’s liability for the direct damages exceed payments by the Client under this agreement.

XII. Severability:

If any provision of this agreement shall be held to be invalid or unenforceable for any reason the remaining provisions shall continue to be held valid and enforceable. If a court finds that any provision of this agreement is invalid or unenforceable, by limiting such provision it would become valid and enforceable, then such provision shall be deemed to be written, construed, and enforced as so limited.

Pearson Dabney LOT 2

Luna Environmental / Logan Leppo

Signed by:

Customer Name

Maintenance Provider Name

LOGAN LEPPU

License # MP0002494

625CFB25572E472...

Customer Signature

Maintenance Provider Signature

Additional Comments / Special Terms

OSSF Soil & Site Evaluation

Page 1 (Soil & Site Evaluation)

Date Performed: 11 / 15 / 24

Property Owner: Pearson Dabney

Site Location: 1046 Sparkman Dr Boerne, TX 78006 Proposed Excavation Depth: 0-24"

REQUIREMENTS:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil borings 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 disposal field excavation depth. For surface disposal, the surface horizon must be evaluated. Describe each soil horizon and identify any restrictive features on this form. Indicate depths where features appear.

Soil Boring Number: <u>1</u>					
Depth (Feet)	Texture Class	Gravel Analysis (If Applicable)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
1 FT.					
2 FT.	<u>IV</u>	<u>< 30%</u>	<u>NONE</u>	<u>@ 16"</u>	<u>Rock</u>
3 FT.	<u>clay</u>				<u>@ 16"</u>
4 FT.	<u>loam</u>				
5 FT.					

Soil Boring Number: <u>2</u>					
Depth (Feet)	Texture Class	Gravel Analysis (If Applicable)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
1 FT.					
2 FT.	<u>IV</u>	<u>< 30%</u>	<u>NONE</u>	<u>@ 20"</u>	<u>Rock</u>
3 FT.	<u>clay</u>				<u>@ 20"</u>
4 FT.	<u>loam</u>				
5 FT.					

FEATURES OF SITE AREA

- Presence of 100 year flood zone Yes No
- Presence of upper water shed Yes No
- Presence of adjacent ponds, streams, water impoundments Yes No
- Existing or proposed water well in nearby area (within 150 feet) Yes No
- Ground Slope 1-2 %

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

[Signature]
 (Signature of person performing evaluation)
 Form # PA3/030204-Final

11/20/24
 (Date)

0538622
 Registration Number and Type



Higher Ratings LLC
Majid Howiatdost JR.
9131 Alpine Trail San Antonio TX, 78250
Designed for:
Pearson Dabney
AEROBIC SEPTIC SYSTEM
SPRAY IRRIGATION

Residential Site @
Site: 1046 Sparkman Dr
Boerne, TX 78006

This Design includes an attached drawing:
Dated 11-24-2024
Use a Clear Stream 500 GPD

Design Specifications:

This site will consist of a 3 Bedroom 1800 sq. ft. home with maximum daily load capacity of 240 Gal/day with water saving devices. The total load capacity on the system will be **240 GPD.**

Pump tank/chlorine contact chamber capacity:	Min: 500 Gal
Design application rate: Ra	0.064 gal/sq.ft./day
Soil Profile determined:	Clayloam Type III Bedrock @ 10'
Dosing cycle quantity:	100-110 Gallons
Number of dosing cycles per day:	3
Type of float switch:	Mercury Float Switch
Design pressure head:	25 to 45 PSI @ sprinkler head
Total length of supply pipe:	228 Ft.
Dosing Pump Capacity:	Myers Mod. Rustler or equivalent 12 GPM @ 25-45 PSI @ head
Chlorinate:	Installed @ inlet of pump tank

HIGHER RATINGS LLC
9131 ALPINE TRAILS SAN ANTONIO TX 78250
TEL. (210) 389-8228



Max slope of the field:	< 15 (%)
Means of preventing siphoning:	Gravity
Type of forced main required:	1" schedule 40 with four (4) sprinkler heads
Diameter of supply pipe:	1"
Pressure of adjusting valves to be installed:	Ball valve
Offsets:	Property lines, wells, easements, waterlines, structures, swimming pools, ponds, etc. Shall be strictly adhered to as required by the latest Texas Natural Resources Conservation Commission (TNRCC) construction standards.

Pump controls must have National Electrical Manufacturing Association (NEMA) Approval. A PVC union shall be placed above the pump to allow the easy pump removal.

Calculation of Field Size

A three (3) Bedroom 1,800 Sq. Ft. home with water saving devices allowed 240 GPD effluent flow.

Assume an application rate of 15.6 Sq.Ft. Per gallon per day.

$240/0.064 = 3,750$ Sq. Ft. Min needed

If four (4) sprinkler heads were installed that were capable of 2 GPM each, having a 180 degree radius of 25', the area is then calculated to be:

$3.14r^2 = 3.14(25)^2 \cdot 2 = 3,925$ Sq. Ft.

Total 3,925 Sq. Ft. Design

HIGHER RATINGS LLC
 9131 ALPINE TRAILS SAN ANTONIO TX 78250
 TEL. (210) 389-8228



Pipes and Fittings

All pipes and fittings in this system shall be schedule 40 PVC. All joints shall be sealed with approved PVC cement. The forced main shall be 1 inch in diameter. A Myers Rustler or equivalent high head submersible pump capable of providing at least 6 GPM and providing a 25+ psi head shall be utilized for pumping effluent. Pipe may run beneath driveways and sidewalks or up to surface improvements if it is Schedule 80 pipe or sleeved in Schedule 40 pipe.

Site Preparation

The area selected for irrigation shall be cleared of cedar and brush. Very little preparation is required. Sprayed area shall be provided with grass or other suitable ground cover.

Landscaping

The native vegetation in the distribution area should consist of low level shrubs, plains grass, bluestem or bermuda. The entire area of the spray must maintain a ground cover after construction. If any ground within the proposed surface application area does not have vegetation, that bare area shall be seeded or covered with sod before system start-up. The vegetation shall be capable of growth, before system start-up.

Provisions for Emergencies

A warning system shall be added to the pump tank on a separate circuit from the pump circuit to provide warning of a failure of the system. This aerobic system has a 24 month service agreement which includes emergency service (see attached copy of service contract).

Tank Sizes

A Clear Stream NC3 500 GPD Aerobic Treatment Unit or equivalent will be used.

Inspections

Inspections are to be conducted by the county in which the OSSF is located.

HIGHER RATINGS LLC
9131 ALPINE TRAILS SAN ANTONIO TX 78250
TEL. (210) 389-8228



RECEIVED

By Brenda Ritzen at 8:57 am, Feb 12, 2025



Higher Ratings LLC
Majid Howiatdost JR.
9131 Alpine Trail San Antonio TX, 78250
Designed for:
Pearson Dabney
NEW AEROBIC SEPTIC SYSTEM
SPRAY IRRIGATION

Feb 10, 2025

RE: Residential Septic System @ 1046 Sparkman Dr, Boerne, TX 78006
(Permit # 118251)--**Spray set back variance request**

To whom ever it may concern:

I am requesting a variance for the placement of the spray disposal area to be 10 feet from the property line. This variance is requested due to limited space and is in accordance with TCEQ rules Chapter 285 Table X, but is less than the 20' that Comal County regulations require.

Equivalent protection will be maintained by including a battery backup to the timer clock to assure that spray will only occur during predawn hours. In my professional opinion, this variance will not pose a threat to the environment or public health.

If there are any question or concerns, please contact me at (210) 389-8228 or by email at: mhowiatdost@yahoo.com.

Sincerely,

Majid Howiatdost Jr, R.S., E.I.T.







A handwritten signature in black ink, appearing to read 'Majid Howiatdost Jr', is written over a faint, large watermark that says 'HIGHER RATINGS LLC'.

HIGHER RATINGS LLC

9131 ALPINE TRAILS SAN ANTONIO TX 78250

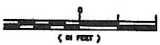
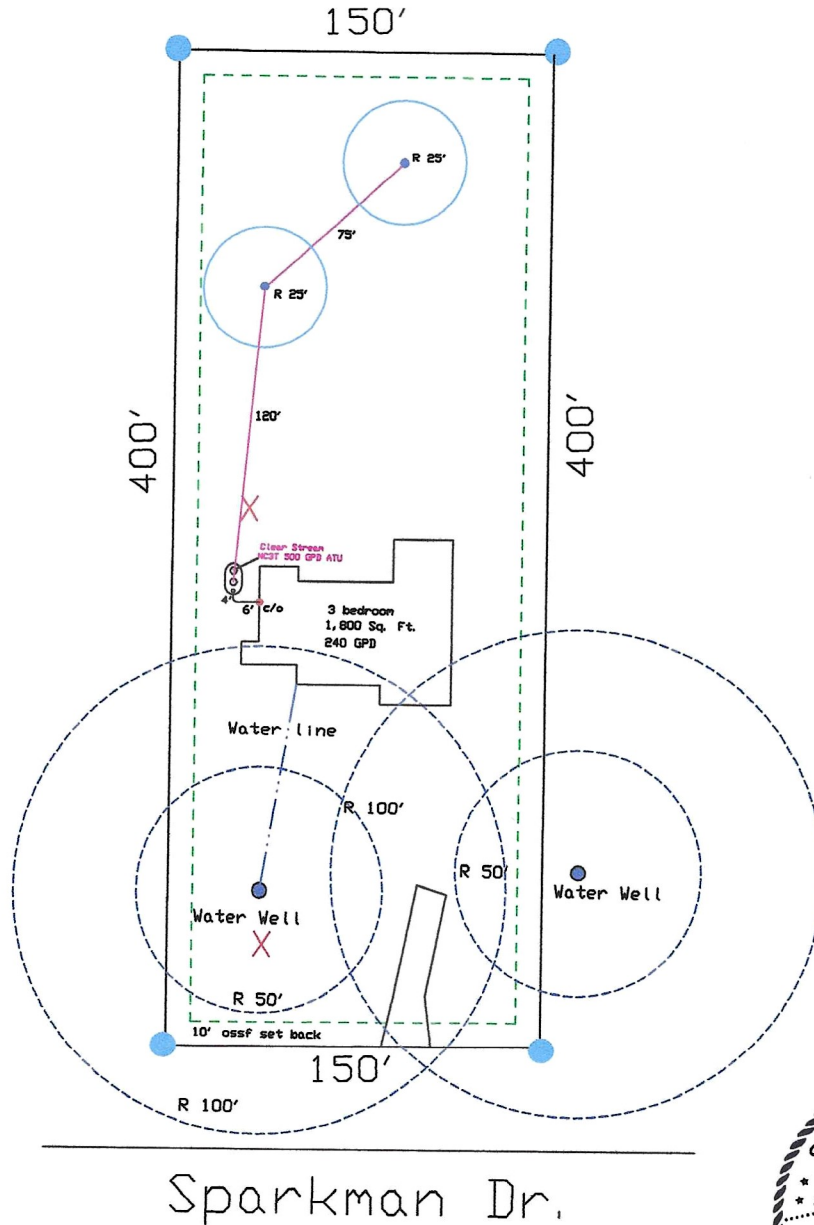
TEL. (210) 389-8228

MAP LEGEND

-  10' ossf set back
-  2 way Clean Out
-  property corners
-  spray head
-  Test holes
-  Water well

Clearstream NC3 500 GPD ATU
 Spray Area = 3,925 Sq Ft

REVISED
 8:56 am, Feb 12, 2025



1" = 70'



DATE: 11-24-2024
 JOB NO. 241184SF
 DRAWN BY: MAJD

TITLE: OSSF Design
 SHEET:

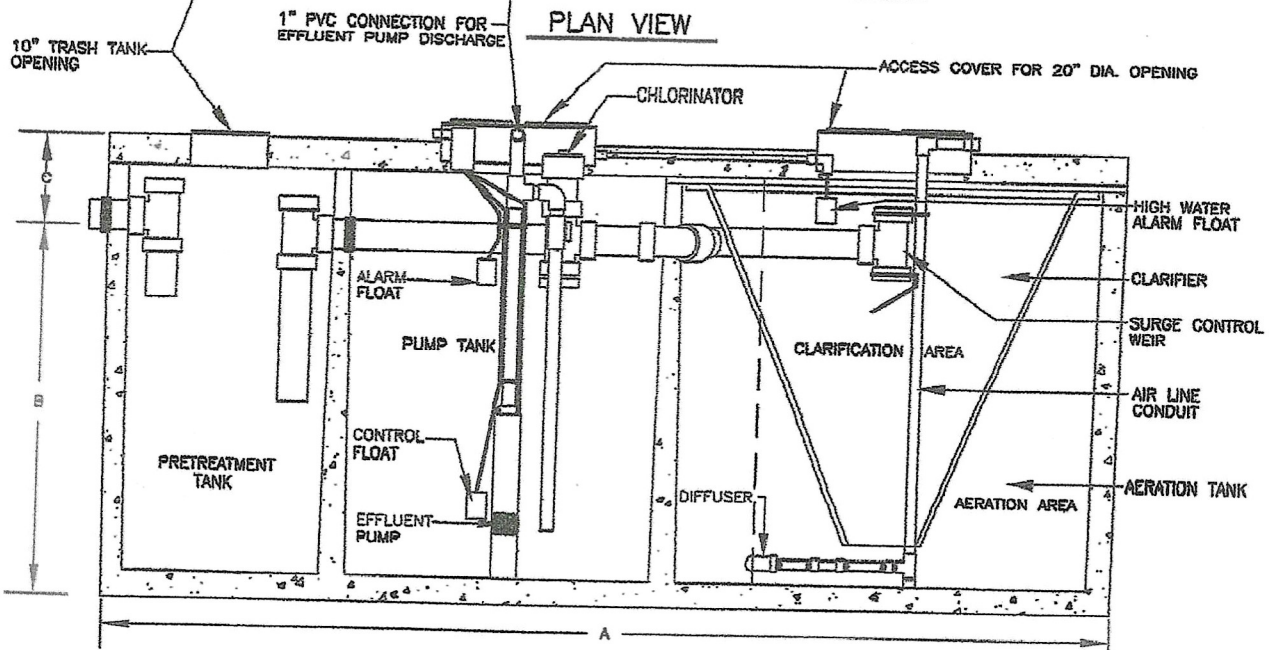
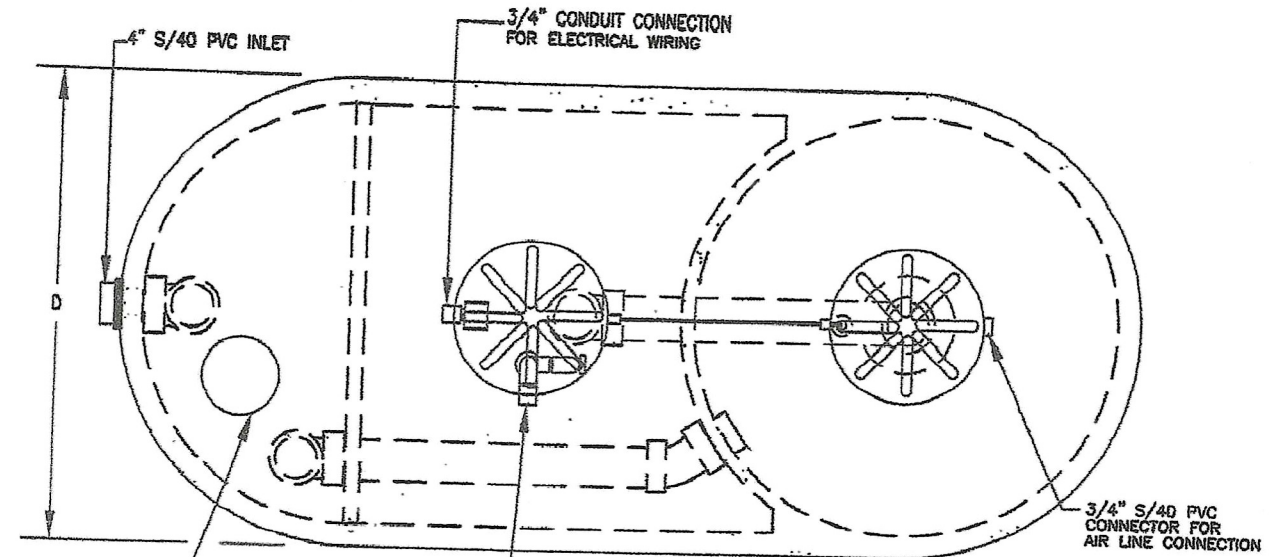
OSSF Design for 500760-SILVER HILLS1 Lot 154
 aka 1046 Sparkman Dr. Boerne TX 78006
 Pearson Dabney



Higher Ratings LLC

9131 Alpine Trail
 SAN ANTONIO, TEXAS 78250 TEL 210-369-8226

DESIGN DRAWINGS



MODEL NC3
SECTION

DIMENSIONAL DATA

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



M. Honatdoost Jr.

TANK NOTES:

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

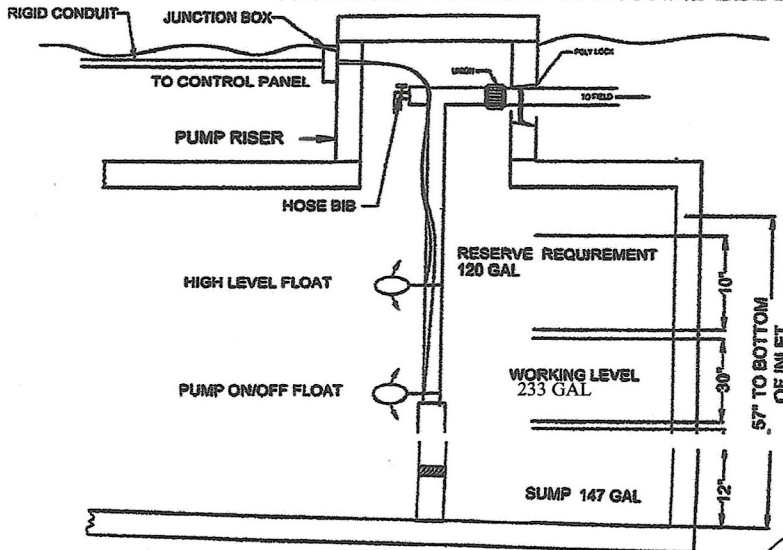
Tightlines to the tank shall be SCH-40 PVC.

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
CLEAR STREAM 500 NC3T 500 GAL PUMP TANK**

PROPLUS™

The PROPLUS™ adjustable arc and full-circle gear driven rotor comes standard with nine numerically coded interchangeable nozzles. Excellent nozzle performance delivers an exceptional fall out pattern. In independent testing by C.I.T., the PROPLUS™ delivered up to 90% uniform coverage.

Also Available: 12" High Pop, Shrub Head and Reclaimed Water models.

Tough, proven and advanced, the PROPLUS™ is the leader in it's class. Set it and forget it. Arc Memory Clutch returns the rotor to its preset position. Technology works for you.

MODELS

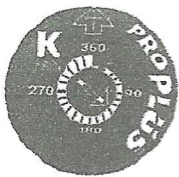
11003	ProPlus
11003-HP	ProPlus 12" High Pop
11003-SH	ProPlus Shrub Head

OTHER OPTIONS: ADD TO PART NUMBER

-CV	Check Valve
-LA	Low Angle Nozzle
-NN	No Nozzle
-RCW	ProPlus for Reclaimed Water w/Low Angle Nozzle

EASY ARC SETTING

Arc Selection 40° to Continuous 360°
Adjust From Left Start



HOW TO SPECIFY

11003	-RCW
Model Number	
	Description



K-Rain Manufacturing Corp.
1640 Australian Avenue
Riviera Beach, FL 33404 USA
+1 561 844-1002
FAX: +1 561 842-9493
1.800.735.7246 | www.krain.com

SPECIFICATIONS

- ▶ Inlet: 3/4" Threaded NPT
- ▶ Arc Adjustment Range: 40° to Continuous 360°
- ▶ Flow Range: .5 - 10.0 GPM
- ▶ Pressure Rating: 20 - 70 PSI
- ▶ Precipitation Rate: .06 to .50 Inches Per Hour (Depending on Spacing and Nozzle Used)
- ▶ Overall Height (Popped Down): 7 1/2" / 17" for High Pop
- ▶ Recommended Spacing: 28' to 44'
- ▶ Radius: 22' to 50'
- ▶ Nozzle Trajectory: 26°
- ▶ Low Angle Nozzle Trajectory: 12°
- ▶ Standard and Low Angle Nozzle: Included
- ▶ Riser Height: 5"

PERFORMANCE DATA

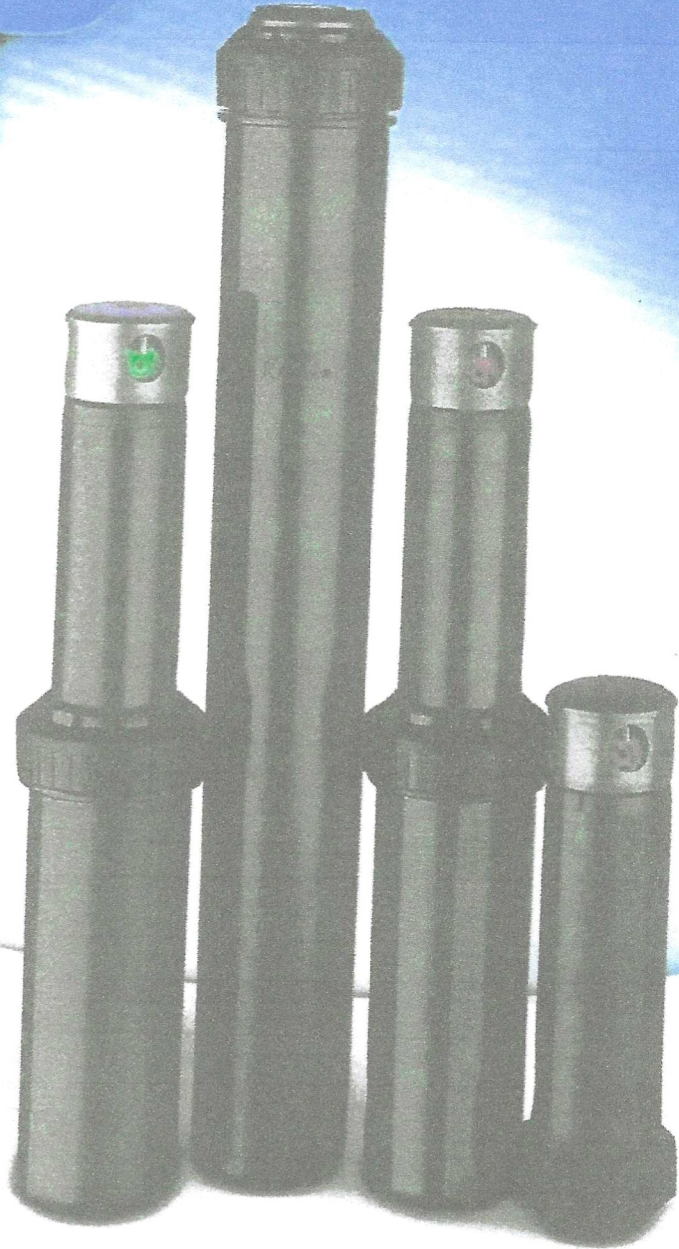
PERFORMANCE					METRIC				
NOZZLES	PRECIPITATION RATE (INCHES PER HOUR)	RADIUS (FEET)	SPACING (FEET)	FLOW (GPM)	NOZZLES	PRECIPITATION RATE (MM PER HOUR)	RADIUS (METERS)	SPACING (METERS)	FLOW (LPM)
#0.5	30	28'		.5	#0.5	206	2.0	8.5	1.89
	40	29'		.6		275	3.0	8.8	2.27
	50	29'		.7		345	3.5	8.8	2.65
	60	30'		.8		413	4.0	9.1	3.03
#0.75	30	29'		.7	#0.75	206	2.0	8.8	2.66
	40	30'		.8		275	3.0	9.1	3.03
	50	31'		.9		345	3.5	9.4	3.41
	60	32'		1.0		413	4.0	9.6	3.78
#1	30	32'		1.3	#1	206	2.0	9.8	4.92
	40	33'		1.5		275	3.0	10.1	5.69
	50	34'		1.6		345	3.5	10.4	6.08
	60	35'		1.8		413	4.0	10.7	6.81
#2	30	37'		2.4	#2	206	2.0	11.3	9.08
	40	40'		2.5		275	3.0	12.2	9.46
	50	42'		3.0		345	3.5	12.8	11.36
	60	43'		3.3		413	4.0	13.1	12.49
#2.5 PRE-INSTALLED	30	38'		2.5	#2.5 PRE-INSTALLED	206	2.04	11.6	9.46
	40	39'		2.8		275	2.72	11.9	10.69
	50	40'		3.2		345	3.40	12.2	12.11
	60	41'		3.5		413	4.08	12.5	13.25
#3	30	38'		3.6	#3	206	2.0	11.6	13.63
	40	39'		4.2		275	3.0	11.9	15.99
	50	41'		4.6		345	3.5	12.5	17.41
	60	42'		5.0		413	4.0	12.8	19.92
#4	30	42'		4.4	#4	206	2.0	13.1	15.65
	40	44'		5.1		275	3.0	13.4	19.90
	50	46'		5.6		345	3.5	14.0	21.19
	60	49'		5.9		413	4.0	14.9	22.33
#6	40	45'		5.9	#6	206	3.0	13.7	22.33
	50	46'		6.0		275	3.5	14.0	22.71
	60	48'		6.3		345	4.0	14.6	23.85
	70	49'		6.7		413	5.0	14.9	25.35
#8	40	42'		8.0	#8	206	3.0	12.8	30.23
	50	45'		8.5		275	3.5	13.7	32.12
	60	49'		9.5		345	4.0	14.6	35.95
	70	50'		10.0		413	5.0	15.3	37.85

LOW ANGLE DATA					METRIC				
NOZZLES	PRECIPITATION RATE (INCHES PER HOUR)	RADIUS (FEET)	SPACING (FEET)	FLOW (GPM)	NOZZLES	PRECIPITATION RATE (MM PER HOUR)	RADIUS (METERS)	SPACING (METERS)	FLOW (LPM)
#1	30	22'		1.2	#1	207	2.04	6.71	4.54
	40	24'		1.7		275	2.72	7.32	6.49
	50	25'		1.6		344	3.40	7.92	6.60
	60	28'		2.0		413	4.08	8.53	7.55
#3	30	29'		3.0	#3	207	2.04	8.84	11.34
	40	32'		3.4		275	2.72	9.75	11.72
	50	35'		3.6		344	3.40	10.67	13.23
	60	37'		3.8		413	4.08	11.58	14.38
#4	30	31'		3.4	#4	207	2.04	9.45	12.85
	40	34'		3.9		275	2.72	10.36	14.74
	50	37'		4.4		344	3.40	11.26	16.03
	60	38'		4.7		413	4.08	11.58	17.77
#6	40	35'		6.5	#6	275	2.72	11.58	24.57
	50	40'		7.3		344	3.40	12.19	27.59
	60	42'		8.0		413	4.08	12.80	30.24
	70	44'		8.6		482	4.76	13.41	32.51

Data represents test results in zero wind. Adjust for local conditions. Radius may be reduced with nozzle retention screw.

PROPLUS™

Or Equivalent



The ProPlus™ is packed with features that ensure reliability, saving the installer time, money and needless frustration.

- ▶ **Revolutionary Patented Easy Arc Set** – Simplified arc set allows for wet or dry adjustment in seconds.
- ▶ **6" Riser** – Perfect for grasses with thick thatch.
- ▶ **3/4" Inlet** – Replaces all standard rotors.
- ▶ **2M Adjustable or Continuous Rotation** – Provides a full range adjustment from 40° to a continuous full circle.
- ▶ **Patented Arc Set Degree Markings** – Clearly indicates the current watering pattern and simplifies arc set adjustment.
- ▶ **Arc Memory Glitch** – Prevents internal gear damage and returns rotor to its prior setting automatically if nozzle turret is forced past its stop.
- ▶ **Time Proven Patented Reversing Mechanism** – Assures continuous reverse and return...over a 20 year history.
- ▶ **Ratcheting Riser** – Allows for easy adjustment of your left starting position with a simple turn of the riser.
- ▶ **Rubber Cover** – Seals out dirt and increases product durability.
- ▶ **Wide Selection of Nozzles** – Including standard and low angle, provides flexibility in system design.
- ▶ **Optional Check Valve** – Prevents low head drainage.

K
RAIN®

**IRRIGATION SOLUTIONS
WORLDWIDE™**

From: Ritzen,Brenda
To: contact@pearsondabneyhomes.com; [Majid Howiatdost](mailto:Majid.Howiatdost)
Subject: Permit 118251
Date: Tuesday, February 4, 2025 11:48:00 AM
Attachments: [Page from 118251.pdf](#)
[image001.png](#)

**Re: Pearson & Margaret Dabney
Silver Hills Unit 1 Lot 154
Application for Permit for Authorization to Construct an On-Site
Sewage Facility (OSSF)**

Owner / Agent :

The following information is needed before I can continue processing the referenced permit submittal:

- ✓. **The owner name on the permit application must match the owner name as described on the recorded warranty deed.**
- ✓. **Both property owners must sign the permit application.**
- 3 ✓ **Maintain required 20 ft. setback from the edge of the spray areas to the property lines.**
4. **Revise as needed and resubmit.**

Thank you,



Brenda Ritzen
Environmental Health Coordinator
195 David Jonas Dr.
New Braunfels, TX 78132
DR:OS00007722
830-608-2090
www.cceo.org



COMAL COUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

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

VOID

Date 12/2/24

Permit Number 118251

1. APPLICANT / AGENT INFORMATION

Owner Name Pearson Dabney
Mailing Address 1016 Sparkman Dr
City, State, Zip Boerne, TX 78006
Phone # 512-711-7215
Email contact@pearsondabneyhomes.com

Agent Name Mario Howland
Agent Address 9131 Alpine Trak ST
City, State, Zip SA TX 78250
Phone # 210 389 8228
Email mHowlandost@yahoo.com

2. LOCATION

Subdivision Name Silver Hills Unit 1 Lot 154 Block _____
Survey Name / Abstract Number _____ Acreage _____
Address Sparkman Dr City Boerne State TX Zip 78006

3. TYPE OF DEVELOPMENT

Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1,800

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: \$ 100,000 (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

VOID

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]
Signature of Owner

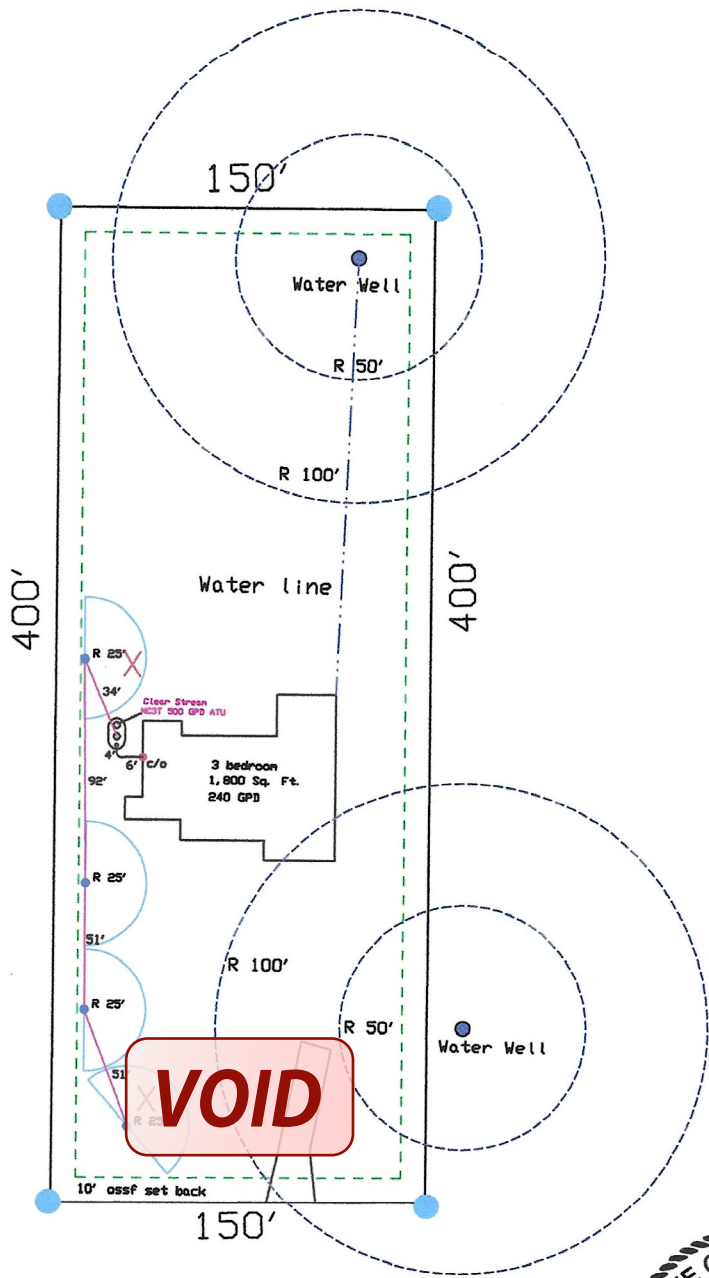
12/2/24
Date

MAP LEGEND

-  10' ossf set back
-  2 way Clean Out
-  property corners
-  spray head
-  Test holes
-  Water well

Clearstream NC3 500 GPD ATU
 Spray Area = 3,925 Sq Ft

VOID



Sparkman Dr.



1" = 70'



DATE: 11-24-2024
 JOB NO. 241164SP
 DRAWN BY: MLD
 TITLE: OSSF Design
 SHEET:

OSSF Design for 500760-SILVER HILLS Lot 154
 aka 1046 Sparkman Dr. Boerne TX 78006
 Pearson Dabney



Higher Ratings LLC

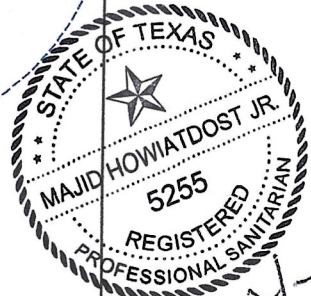
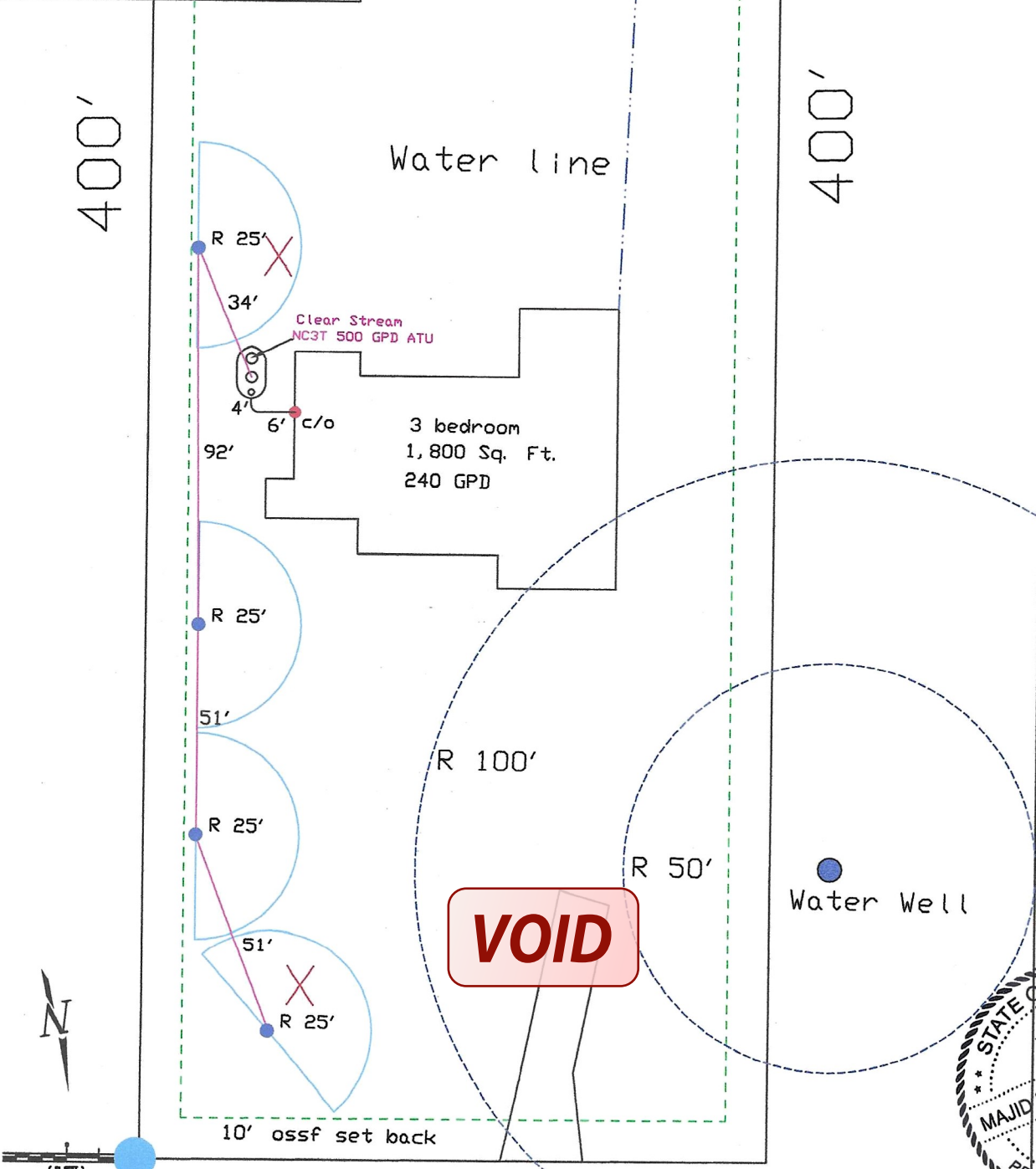
9131 Alpine Trail
 SAN ANTONIO, TEXAS 78250 TEL. 210-389-8228

MAP LEGEND

- 10' ossf set back
- 2 way Clean Out
- property corners
- spray head
- Test holes
- Water well

Blown up view of design.
 Clearstream NC3 500 GPD ATU
 Spray Area = 3,925 Sq Ft

VOID



M. Howatdost Jr.

DATE: 11-04-2004
 JOB NO. 2411245P
 DRAWN BY: MAND
 TITLE: OSSF Design
 SHEET:

OSSF Design for 500760-SILVER HILLS1 Lot 154
 aka 1048 Sparkman Dr. Boerne TX 78006
 Pearson Dabney



Higher Ratings LLC

9131 Alpine Trail
 SAN ANTONIO, TEXAS 78250
 TEL. 210-350-0226

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

WARRANTY DEED

Dated Effective as of: **June 28, 2023**

Grantor: **Patricia R. Dabney**

Grantor's Mailing Address:

130 Schoolhouse Rd
Driftwood, TX 78619

Grantee: **Pearson Dabney and Margaret E. Dabney**

Grantee's Mailing Address: **1016 Sparkman Drive
Boerne, Texas 78006**

Consideration:

Cash and other good and valuable consideration.

Property (including any improvements):

Lots 153, 154, and 155, in SILVER HILLS SUBDIVISION, UNIT 1, in the County of Comal and State of Texas, according to map or plat thereof recorded in Volume 2, Page 34, of the map and plat records of Comal County, Texas.

Reservations from Conveyance: **None**

Exceptions to Conveyance and Warranty:

All ad valorem taxes for the current and all subsequent years, zoning ordinances and utility district assessments, if any, applicable to and enforceable against the Property and all conditions, covenants, options, restrictions, easements, charges and liens for assessments, setbacks, encroachments, reservations, and mineral reservations effecting the Property that are shown in the Real Property Records of **Comal** County, Texas.

Grantor, for the Consideration and subject to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty, grants, sells, and conveys to Grantee the Property, together with all and singular the rights and appurtenances thereto in any way belonging, to have and to hold it to Grantee and Grantee's heirs, successors, and assigns forever. Grantor binds Grantor and Grantor's heirs and successors to warrant and forever defend all and singular the Property to Grantee and Grantee'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.

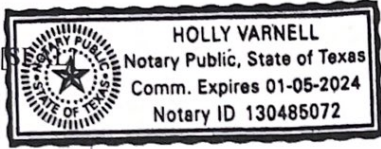
When the context requires, singular nouns and pronouns include the plural.

[Signature page follows]

Patricia Dabney

STATE OF TEXAS §
COUNTY OF HAYS §

This instrument was acknowledged before me on the 10TH day of July, 2023 by Patricia R. Dabney.



Holly Varnell
Notary Public, State of TEXAS

AFTER RECORDING RETURN TO:
Pearson Dabney and Margaret E. Dabney
1016 Sparkman Drive
Boerne, Texas 78006



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

		118251
<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

12/2/24

Date

_____ COMPLETE APPLICATION Check No. _____ Receipt No. _____

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