### **Comal County Environmental Health OSSF Inspection Sheet**

staller Name:	OSSF Installer #:	OSSF Installer #:			
1st Inspection Date:	2nd Inspection Date:	3rd Inspection Date:			
Inspector Name:	Inspector Name:	Inspector Name:			

Perm	it#:		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)(E) 285.32(b)(1)(E) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

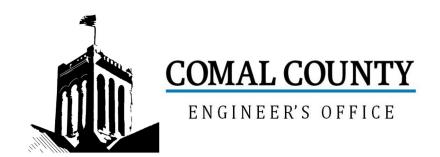
**Inspector Notes:** 

# Comal County Environmental Health OSSF Inspection Sheet

N-	December 41	A may	Citotiana	Net	101 1	204 1	7 mal 1
No.	Description SEPTIC TANK Tank(s) Clearly	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	Marked SEPTIC TANK IsingleTank, 2Compartments Provided withBaffle SEPTIC TANK Inlet Flowline Greater than3" and "T" Provided on Inlet and OutletSEPTIC TANK Septic Tank(s) MeetMinimum Requirements		285.32(b)(1) (E)285.91(2)285.32(b)(1) (F)285.32(b)(1)(E) (iii)285.32(b)(1)(E)(ii) (I)285.32(b)(1)(E) (i)285.32(b)(1)(E) (i)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (ii)285.32(b)(1) (B)285.32(b)(1) (A)285.32(b)(1)(E)(iv)				
I	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
11	SEPTIC TANK Secondary restraint system providedSEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
	SEPTIC TANK Tank Volume Installed						
12							
	PUMP TANK Volume Installed						
I	AEROBIC TREATMENT UNIT Size Installed						
14							
	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number						
15	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)				
12	DISPOSAL SYSTEM Evapo- transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				
18			203.33(a)(2)				

## Comal County Environmental Health OSSF Inspection Sheet

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	DISPOSAL SYSTEM Drip Irrigation	Allowei	Citations	Notes	131 шэр.	Ziiu iiisp.	Siu ilisp.
	DIST OSAL STSTEM DITP ITTIGATION		20E 22/a\/2\/A\ /E\				
			285.33(c)(3)(A)-(F)				
19	DISPOSAL SYSTEM Soil						
20	Substitution		285.33(d)(4)				
20	DISPOSAL SYSTEM Pumped						
	Effluent		285.33(a)(4) 285.33(a)(3)				
			285.33(a)(1)				
21			285.33(a)(2)				
21	DISPOSAL SYSTEM Gravelless Pipe						
	·		285.33(a)(3)				
			285.33(a)(2)				
			285.33(a)(4)				
			285.33(a)(1)				
22	DISPOSAL SYSTEM Mound						
	2.5. 35 IE 373 IEIV WIOGING		285.33(a)(3)				
			285.33(a)(1) 285.33(a)(2)				
			285.33(a)(4)				
23	DISPOSAL SYSTEM Other						
	(describe) (Approved Design)		285.33(d)(6)				
24			285.33(c)(4)				
	DRAINFIELD Absorptive Drainline						
	3" PVC or 4" PVC						
25							
	DRAINFIELD Area Installed						
26							
	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches						
	over entire excavation		285.33(b)(1)(A)(v)				
27							
	DRAINFIELD Excavation Width						
	DRAINFIELD Excavation Depth						
	DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media						
	DRAINFIELD Type of Porous Media						
28							
	DRAINFIELD Pipe and Gravel -		205 22/51/41/51				
29	Geotextile Fabric in Place		285.33(b)(1)(E)				
	DRAINFIELD Leaching Chambers						
	DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection						
	Port & Closed End Plates in Place		285.33(c)(2)				
	(per manufacturers spec.)		( - / ( - /				
30	LOW PRESSURE DISPOSAL						
	SYSTEM Adequate Trench Length						
	& Width, and Adequate		285.33(d)(1)(C)(i)				
	Separation Distance between						
31	Trenches						
	<u> </u>			ı		1	



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

Permit Number: 118332

Issued This Date: 03/07/2025

This permit is hereby given to: ALEXANDER B. & JULIE M. LUTZKY

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

311 INDIGO RUN

BULVERDE, TX 78163

Subdivision: COMAL TRACE

Unit: 3 Lot: 58

Block: 0

Acreage: 1.3500

#### APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Septic Tank

**Leaching Chambers** 

This permit gives permission for the construction of the above referenced on-site facility to commence. Installation must be completed by an installer holding a valid registration card from the Texas Commission on Environmental Quality (TCEQ). Installation and inspection must comply with current TCEQ and Comal County requirements.

Call (830) 608-2090 to schedule inspections.





#### **OSSF DEVELOPMENT APPLICATION CHECKLIST**

Staff will complete shaded items 118332

Date Received Initials Permit Number

#### Instructions:

	a check mark next to all items that apply. For items that do not apply, place "N/A". This OSSF Development Application ist <u>must</u> accompany the completed application.
OSSF	Permit
∑ c	ompleted Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate
∑ s	ite/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer
	lanning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist fa scaled design and all system specifications.
R	equired Permit Fee - See Attached Fee Schedule
∑ c	opy of Recorded Deed
S	urface 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.

180	01/27/2025		
Signature of Applicant	Date		
COMPLETE APPLICATION	INCOMPLETE APPLICATION		
Check No Receipt No	(Missing Items Circled, Application Refeused)		

Revised: September 2019





#### ON-SITE SEWAGE FACILITY APPLICATION

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

Date Dec	cember 9, 2024		Permit Nu	ımber 118332			
1. APPLICANT /	AGENT INFORMATION						
Owner Name	ALEXANDER BJORN LUTZKY & JULIE M LUTZKY	Agent Name		GREG JOHNSON, P.E			
Mailing Address_	311 INDIGO RUN DRIVE	Agent Address	170 HOLLOW OAK				
City, State, Zip	BULVERDE TEXAS 78163	City, State, Zip	NEW	BRAUNFELS TEXAS	78132		
Phone #	210-551-2435	Phone #		830-905-2778			
Email	ablutzky@hotmail.com	Email	gr	egjohnsonpe@yahoo.co	m		
2. LOCATION							
Subdivision Nam	e COMAL TRACE	Ur	nit 3	Lot 58 Blo	ck		
Survey Name / A	bstract Number	21		Acreage			
Address	311 INDIGO RUN DRIVE	City BULV	ERDE	State TX Zip	78163		
3. TYPE OF DEV		_					
Single Fam	ily Residential						
	onstruction (House, Mobile, RV, Etc.) EXISTIN	G HOUSE & DETAC	CHED LIVIN	NG			
	Bedrooms 4+1		THE BITT				
	Ft of Living Area 2400+500						
	Family Residential						
	aterials must show adequate land area for doubling	the required land pood	ad far keanten				
			ed for treatm	ent units and disposal ar	ea)		
Offices Fa	cility						
Postaurani	ctories, Churches, Schools, Parks, Etc Indicate Louisians, Theotore, Indicate Number of Sec	ate Number Of Occu	pants				
Hestaurani	ts, Lounges, Theaters - Indicate Number of Sea	ats					
Travel Trai	el, Hospital, Nursing Home - Indicate Number o	of Beds					
Travel Trai	ler/RV Parks - Indicate Number of Spaces						
Miscellane	ous						
	t of Construction: \$ 100,000						
	of the proposed OSSF located in the United Sta						
	No (If yes, owner must provide approval from USACE for		ements within	the USACE flowage easem	ent)		
Source of Water	er Public Private Well Rainwater	Collection					
4. SIGNATURE (							
<ul> <li>The completed ap facts. I certify tha property.</li> </ul>	lication, I certify that: plication and all additional information submitted do t I am the property owner or I possess the appropria	te land rights necessar	y to make the	e permitted improvement	s on said		
<ul> <li>Authorization is he site/soil evaluation</li> </ul>	ereby given to the permitting authority and designate n and inspection of private sewage facilities	ed agents to enter upor	the above o	described property for the	purpose of		
<ul> <li>I understand that by the Comal Cou</li> </ul>	a permit of authorization to construct will not be issuinty Flood Damage Prevention Order.  sent to the online posting/public release of my e-mai						
OloB.	5 Julie N. Jutapey	12/16/	24				
Signature of O	wilet	Date			Page 1 of		



#### **ON-SITE SEWAGE FACILITY APPLICATION**

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

Planning Materials & Site I	Evaluation as Required	Completed By		
System Description PR	COPRIETARY; SEPTIC	TANK AND LEACHING	G CHAMBERS & ABSORBTIVE DRAI	NFIELD
Size of Septic System Req	uired Based on Plannin	g Materials & Soil Evalua	ation	612 (Chamban)
Tank Size(s) (Gallons)		OMP. SEPTIC TANK 646)	Absorption/Application Area (Sq Ft)	612 (Chamber) 1006 (Pipe Gravel
Gallons Per Day (As Per TO	CEQ Table 111)	360		
(Sites generating more than 5	000 gallons per day are re	equired to obtain a permit th	rough TCEQ.)	
Is the property located ove	r the Edwards Recharg	e Zone? Yes X	No	
(if yes, the planning materials	must be completed by a F	Registered Sanitarian (R.S.)	or Professional Engineer (P.E.))	
Is there an existing TCEQ	approved WPAP for the	e property? 🔲 Yes 🔀	No	
(if yes, the R.S. or P.E. shall o	certify that the OSSF desig	gn complies with all provisio	ns of the existing WPAP.)	
Is there at least one acre p	er single family dwellin	g as per 285.40(c)(1)?	Yes No	
If there is no existing WPA	P, does the proposed d	levelopment activity requ	ire a TCEQ approved WPAP? Ye	es 🔀 No
			sions of the proposed WPAP. A Permit to (the appropriate regional office.)	Construct will not
Is the property located ove	r the Edwards Contribu	ting Zone? X Yes	No	
Is there an existing TCEQ	approval CZP for the pr	roperty? X Yes	No	
(if yes, the P.E. or R.S. shall o	certify that the OSSF desig	gn complies with all provisio	ns of the existing CZP.)	
If there is no existing CZP,	does the proposed dev	velopment activity require	a TCEQ approved CZP?  Yes [	No No
(if yes, the R.S. or P.E. shall issued for the proposed OSS			sions of the proposed CZP. A Permit to Coreg	instruct will not be
Is this property within an in	corporated city?	∕es ⊠ No	Sh X To	
If yes, indicate the city:			GREG W. JOHNSON	
			FIRM	#2585
By signing this application,	I certify that:			
_	/	to the best of my knowledge		
- I affirmatively consent to	the online posting/public re	elease of my e-mail address	associated with this permit application, as	s applicable.
/ <b>/</b>		De	cember 10, 2024	
Signature of Designer		Date		

## THE COUNTY OF COMAL STATE OF TEXAS

reservation Survey r

#### **CERTIFICATION OF SINGLE FAMILY DWELLING**

According to Texas Commission of Environmental Quality Rules for On-Site Sewage Facilities, this document is filed in the Deed Records of **COMAL COUNTY, TEXAS.** 

I

Before me this day appeared 311 INDIGO living space on this property	RUN DI	JULIE M		, being the owners of they further state that the Res	of the referenced property at idence and any additional
An OSSF requiring a Certific	cation of S	ingle Fam	ily Dwelling	, will be installed on the prope	erty described as:
3UNITB	LOCK_	58	_LOT	COMAL TRACE	SUBDIVISION
IF NOT IN SUBDIVISION:	A	CREAGE			SURVEY
The property is owned by	A	LEXAN	DER BJOR	RN LUTZKY & JULIE M	. LUTZKY
WITNESS MY HAND ON T	HIS	OF DAY	OF	DECEMBER , 20_2	4
DWNER (SIGNATURE)	-		OWNE	R (SIGNATURE)	_
SWORN TO AND SUBSCRI	IBED BEI	FORE ME	ON THIS	DAY OF DECEM	BER , 20_24 BY
ALEXANDER BJORN LUTZI DWNER NAME (PRINTED)				JULIE M. LUTZKY OWNER NAME (PRINTED)	)
Notary Public Signa	ature		***	SAMUEL PEDRAZA Notary Public, State of Texas Notary ID# 13167716-7	

**AUGUST 10, 2026** 

## ON-SITE SEWERAGE FACILITY SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed: December 09, 2024									
Site Location:	, <u>, , , , , , , , , , , , , , , , , , </u>	(	COMAL TRACE,	, UNIT 3, LOT 58					
Proposed Excavat	roposed Excavation Depth:18" to 24"								
Locations For subsu proposed	s of soil boring or durface disposal, soil lexcavation depth. I	s must be performed lug pits must be show I evaluations must be For surface disposal, and identify any restr	wn on the site drawi e performed to a dep , the surface horizon	ing. pth of at least two fo n must be evaluated	eet below the				
SOIL BORING	NUMBER	1							
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations			
0 1 2 3 4 5	III	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 48"	BROWN			
SOIL BORING	NUMBER	2							
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations			
0 1 2	SAME		AS		ABOVE				

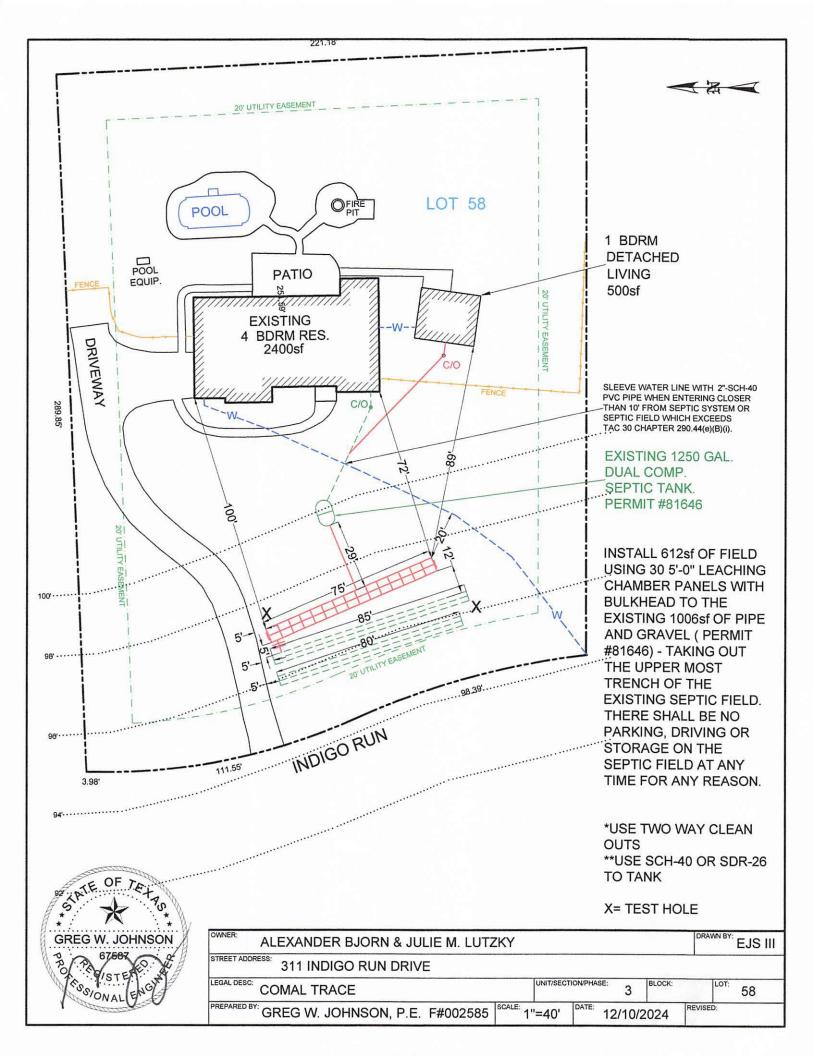
I certify that the findings of this report are based on my field observations and are accurate to the best of my ability.

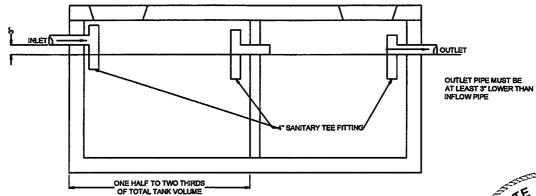
Greg W. Johnson, P.E. 67587-F2585, S.E. 11561

Date

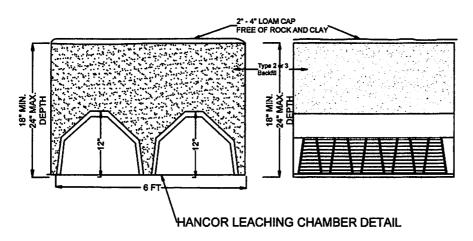
#### OSSF SOIL EVALUATION REPORT INFORMATION

Date: <u>December 10, 2024</u>	
Applicant Information:	Site Evaluator Information:
Name: ALEXANDER BJORN & JULIE M. LUTZKY	Name: Greg W. Johnson, P.E., R.S., S.E. 11561
Address: 311 INDIGO RUN DRIVE	Address: 170 Hollow Oak
City: BULVERDE State: TEXAS	City: New Braunfels State: Texas
Zip Code: 78163 Phone: (210) 551-2435	Zip Code: 78132 Phone & Fax: (830)905-2778
Property Location:  Lot 58 Unit 3 Blk Subd. COMAL TRACE  Street Address: 311 INDIGO RUN DRIVE	Installer Information: Name: Company:
City: BULVERDE Zip Code: 78163	Address:
Additional Info.:	City: State:
	Zip Code:Phone
Topography: Slope within proposed disposal area: Presence of 100 yr. Flood Zone: Existing or proposed water well in nearby area. Presence of adjacent ponds, streams, water impoundments Presence of upper water shed Organized sewage service available to lot  Design Calculations for Leaching Chambers: Commercial Q=GPD	YES NO_X YES NO_X YES NO_X YES NO_X
Residential Water conserving fixtures to be utilized? You Number of Bedrooms the septic system is sized for:4 Q gal/day = (Bedrooms +1) * 75 GPD Q = (4+1+ 1) * 75 - ( 20 %) =360 A = Q/Ra =360 /0.20 =1800sq. Tank Size = (~3 * Q) =1250 Gal. Dual Comp.	Total sq. ft. living area 2400+500  NOTE: 4 BDRM RES. + 1 BDRM DETACHED
Excavation Length & Width	
L = A/(W+2) (Pipe & Gravel) = 1006 / 4'	= <u>165'</u> of <u>4' WIDE</u>
L = 0.75A/(W+2) (Chambers) =/	= of
L = 0.75A-2W/(W+2) (Chambers) = 612 / 8'	=
I HAVE PERFORMED A THOROUGH INVESTIGATION AND SITE EVALUATOR IN ACCORDANCE WITH CHA (REGARDING RECHARGE FEATURES), TEXAS CON (EFFECTIVE DECEMBER 29, 2016).  GREG W. JOHNSON, P.E. 67587 - F#2585	PTER 285, SUBCHAPTER D, §285.30, & §285.40

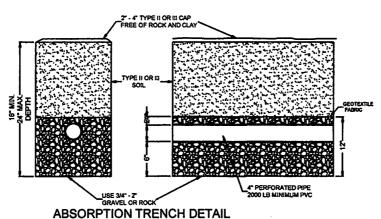


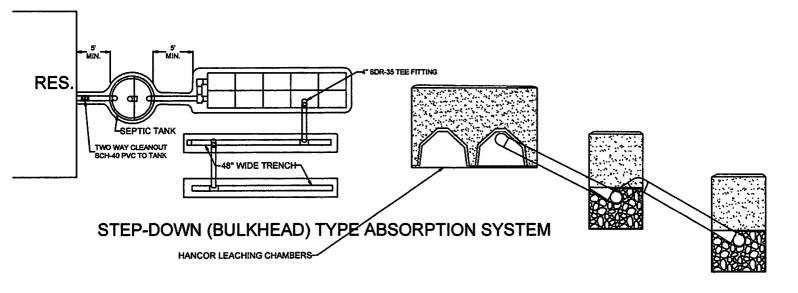


#### TYPICAL TWO COMPARTMENT SEPTIC TANK









# **CCEO COPY**



## Comal County

OFFICE OF COMAL COUNTY ENGINEER

#### License to Operate

On-site Sewage Treatment and Disposal Facility

Date Issued: 11/27/2000

Permit Number: 81646

Location Description: 311 Indigo Run, Bulverde, TX 78163

Lot 58, Block n /a, Comal Trace Unit 3

Type of System:

Septic Tank Treatment with Std Trenches/Beds Discharge

Permit issued to:

J. Long Builder

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

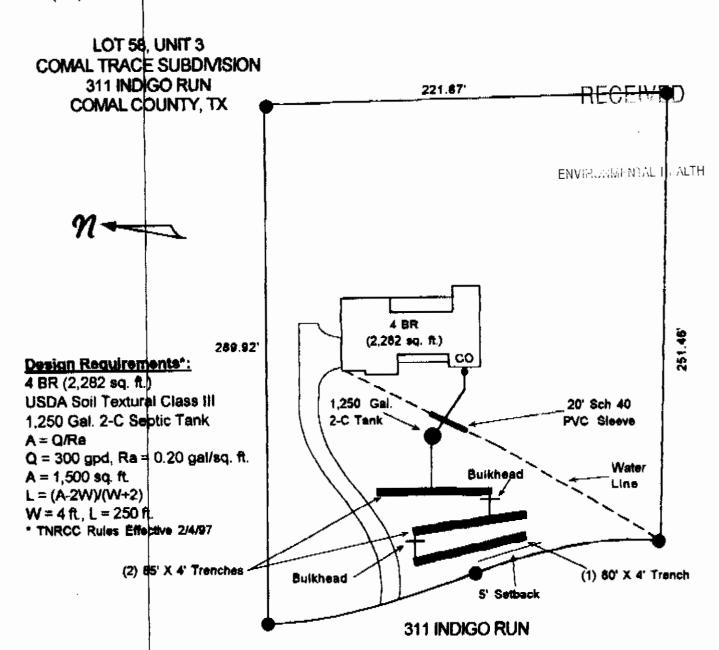
Comal County Environmental Health

CHRIS MENZEL

## Wastewater Consultants, Inc.

Chris H. Menzel, R.S., President 265 Danube Pass, Boerne, TX 78006

(Fax) (830) 336-2975



I hereby certify that this newsgie facility design submitted conforms to rules and guidance standards developed by the Texas Natural Resources Conservation Commission and the applicable county, and under normal conditions and proper installation, can be expected to function without creating a nuisance.

Scale: 1" = 50'

CHRIS H. MENZEL

REGISTERED PROFESSIONAL SANTIARIAN

RS. # 1183 DATE: 11-19-00

201506037887 09/17/2015 11:47:56 AM 1/3

ATCO-SA ATCO-S

\*This document is being re-recorded to correct the Volume # in the legal description

201506045834 11/12/2015 03:16:47 PM 1/3

#### WARRANTY DEED WITH VENDOR'S LIEN

LUTZKY Loan #: 601500D426 MIN: 101151701314850955 PIN: 18634

NOTICE OF CONFIDENTIALITY: 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.

THE STATE OF TEXAS

KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF COMAL

THAT DOUGLAS FREEMAN and MARY JO FREEMAN (hereinafter called "Grantors" whether one or more), for and in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable considerations cash in hand paid by ALEXANDER BJORN LUTZKY AND JULIE M LUTZKY HUSBAND AND WIFE whose address is 311 INDIGO RUN DR, BULVERDE, TX 78163-3176 (hereinafter called "Grantees" whether one or more), the receipt and sufficiency of which are hereby acknowledged and confessed, and the further consideration of the note in the principal sum of FOUR HUNDRED RIGHT THOUSAND THIRTY-FIVE AND 00/100 Dollars (\$408,035.00), payable to the order of PRIMELENDING VENTURES, LLC DBA HIGHLAND LOANSOURCE (hereinafter referred to as "Beneficiary") at the special instance and request of the Grantees herein, the receipt of which is hereby acknowledged and confessed, and as evidence of such advancement, the said Grantees herein have executed their note of even date herewith for said amount payable to the order of said Beneficiary, bearing interest at the rate therein provided, principal and interest being due and payable in monthly installments as therein set out, and providing for attorney's fees and acceleration of maturity at the rate and in the events therein set forth, which note is secured by the Vendor's Lien herein reserved and is additionally secured by a Deed of Trust of even date herewith, executed by the Grantees herein to ALLAN B. POLUNSKY, Trustee, reference to which is here made for all purposes; and in consideration of the payment of the sum above mentioned by the Beneficiary above mentioned, Grantors hereby transfer, set over, assign and convey unto said Beneficiary and assigns, the Vendor's Lien and Superior Title herein retained and reserved against the property and premises herein conveyed, in the same manner and to the same extent as if said note had been executed in Grantors' favor and by said Grantors assigned to the Beneficiary without recourse; have GRANTED, SOLD and CONVEYED, and by these presents do GRANT, SELL and CONVEY unto the said Grantees herein, the following described property, together with all improvements thereon, to-wit:

LOT 58 , COMAL TRACE SUBDIVISION, UNIT 3, COMAL COUNTY, TEXAS, ACCORDING

5876.16

Page 1 of 3

\*13

TO MAP OR PLAT THEROF RECORDED IN VOLUME XX PAGE(S) 89 OF THE MAP AND/OR PLAT RECORDS OF COMAL COUNTY, TEXAS

TO HAVE AND TO HOLD the above described premises, together with, all and singular, the rights and appurtenances thereto in any wise belonging, unto the said Grantees, their heirs and assigns forever. And Grantors do hereby bind themselves, their heirs, executors and administrators, to warrant and forever defend all and singular, the said premises unto the said Grantees, their 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 are assumed by Grantee. This conveyance is made and accepted subject to any and all validly existing restrictions, mineral reservations and interests, conditions, covenants, easements, and rights of way, if any, applicable to and enforceable against the above described property as now reflected by the records of the County Clerk in said County and State and to any applicable zoning laws or ordinances.

But it is expressly agreed and stipulated that the Vendor's Lien and the Superior Title are retained and reserved in favor of the payee in said note against the above described property, premises and improvements, until said note, and all interest thereon is fully paid according to the face and tenor, effect and reading thereof, when this deed shall become absolute.

When this deed is executed by one person or when the Grantee is one person, the instrument shall read as though pertinent verbs and pronouns were changed to correspond, and when executed by or to a corporation the words "heirs, executors and administrators" or "heirs and assigns" shall be construed to mean "successors and assigns".

THE STATE OF TEXAS: ('Olokoding's County of Beers Weld

This instrument was acknowledged before me on MARY JO FREEMAN.

pl. 15, 2015, by DOUGLAS FREEMAN and

KIMBERLY SIMMONS NOTARY PUBLIC STATE OF COLORADO

NOTARY ID 20074009888 My Commission Expires March 8, 2019 Notary Public, State of Texas: (60 kgs)

Notary's Name Printed:

My Commission Expires: 3.8.19

Return To: 311 INDIGO RUN DR BULVERDE, TX 78163-3176

**5876.16** 

Page 3 of 3

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
11/12/2015 03:16:47 PM
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Bobbie Koepp

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Bobbie Koepp, County Clerk
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Bobbie Koepp

#### Re: 311 Indigo Run septic design

From: Alexander Lutzky (ablutzky@hotmail.com)

To: gregjohnsonpe@yahoo.com

Date: Friday, December 6, 2024 at 02:34 PM CST

Good afternoon Steve,

Please see the attached documents.

- 1. Lutzky Customer Info Sheet
- 2. 311 Indigo Run Lot Survey
- 3. 311 Indigo Run Septic Permit (Current)
- 4. Lutzky-Guest Home Design
  - a. To be serviced by new line running to existing tank

Please let me know if you need a copy of the Recorded Deed as I will need to dig through some files to find that.

Standing by for questions and have a good weekend.

Alex 210-551-2435

From: Greg Johnson <gregjohnsonpe@yahoo.com>

Sent: Thursday, December 5, 2024 2:25 PM
To: Alexander Lutzky <ablutzky@hotmail.com>
Subject: Fw: 311 Indigo Run septic design

---- Forwarded Message ----

From: Greg Johnson <gregjohnsonpe@yahoo.com>
To: Alexander Lutzky <ablutzky@hotmail.com>
Sent: Friday, December 15, 2023 at 10:42:16 AM CST

Subject: 311 Indigo Run septic design

Items needed

Floor Plans / Site Plans Survey / Plat Recorded Deed Customer Info Sheet ( attached )

Thanks

Steve

Send for Greg W. Johnson, P.E., R.S.)

