

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)				

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



COMAL COUNTY

ENGINEER'S OFFICE

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

Permit Number: 118515
Issued This Date: 04/25/2025
This permit is hereby given to: OSCAR & MICHELL DAVILA REVOCABLE TRUST

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

2150 SUMMIT SKYWAY
NEW BRAUNFELS, TX 78132

Subdivision: INLAND ESTATES
Unit: 0
Lot: 41RB
Block: 0
Acreage: 1.4300

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.



COMAL COUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

REVISED

7:52 am, Apr 25, 2025

155 DAVIDSON DR
NEW BRAUNFELS, TX 78132
(830) 608-2090
WWW.CCEO.ORG

Date December 13, 2024

Permit Number 118515

1. APPLICANT / AGENT INFORMATION

Owner Name OSCAR & MICHELL DAVILA REVOCABLE TRUST
Mailing Address 2150 SUMMIT SKYWAY
City, State, Zip NEW BRAUNFELS TEXAS 78132
Phone # 210-857-0998
Email oscardavila7@yahoo.com

Agent Name GREG JOHNSON, P.E.
Agent Address 170 HOLLOW OAK
City, State, Zip NEW BRAUNFELS TEXAS 78132
Phone # 830-905-2778
Email gregjohnsonpe@yahoo.com

2. LOCATION

Subdivision Name INLAND ESTATES Unit Lot 41RB Block
Survey Name / Abstract Number Acreage
Address 2150 SUMMIT SKYWAY City NEW BRAUNFELS State TX Zip 78132

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) HOUSE + Intermittent Use RV

Number of Bedrooms 4

Indicate Sq Ft of Living Area 2800

☐ 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: \$ 600,000 (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 Collection

4. SIGNATURE OF OWNER

By signing this application, I certify that:

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

[Signature]
Signature of Owner

Michelle C. Davila 3-10-2025
Date



ON-SITE SEWAGE FACILITY APPLICATION

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

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) SOLAR AIR SAIITX800-1000PT Absorption/Application Area (Sq Ft) 5772

Gallons Per Day (As Per TCEQ Table 111) 340

(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

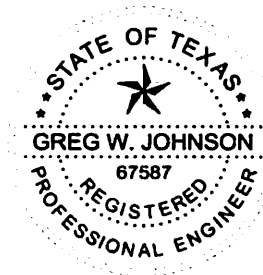
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP.)

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 UP has been approved by the appropriate reg

Is this property within an incorporated city? ☐ Yes ☒ No

If yes, indicate the city: _____



FIRM #2585

By signing this application, I certify that:

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

Signature of Designer

December 15, 2024
Date

AFFIDAVIT**THE COUNTY OF COMAL
STATE OF TEXAS****CERTIFICATION OF OSSF REQUIRING MAINTENANCE**

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

I

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

UNIT/PHASE/SECTION _____ BLOCK 41RB LOT _____ INLAND ESTATES _____ SUBDIVISION _____

IF NOT IN SUBDIVISION: _____ ACREAGE _____ SURVEY _____

The property is owned by (insert owner's full name): OSCAR AND MICHELL DAVILA REVOCABLE TRUST,
OSCAR DAVILA AND MICHELL COLLINS DAVILA AS CO-TRUSTEES

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

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

WITNESS BY HAND(S) ON THIS 10TH DAY OF March, 2025

X [Signature]

OSCAR DAVILA - TRUSTEE

X [Signature]

MICHELL COLLINS DAVILA - TRUSTEE

Owner(s) signature(s)

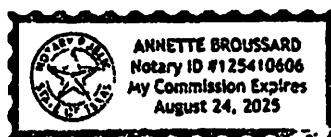
Owner (s) Printed name (s)

OSCAR & MICHELL DAVILA

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 10TH DAY OF

March, 2025

[Signature]
Notary Public Signature



Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
03/28/2025 01:00:49 PM
MARY 1 Pages(s)
202506008897



Bobbie Koepp

Countryside Construction, Inc.
300 Chapman Parkway, Canyon Lake, TX. 78133
Phone: 830-899-2615 or 1-888-379-3721 Fax: 830-899-6662
Septic System Service Agreement

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

Name: OSCAR & MICHELLI: DAVILA REVOCABLE TRUST Address: 2150 SUMMIT SKYWAY
Sub-Div./County: INLAND ESTATES / COMAL City, State, Zip Code NEW BRAUNFELS, TX 78132
Permit #: _____ TYPE, Model# & SIZE: SOLAR AIR SAI1800-1000I Serial #: _____
Phone: 210-857-0998

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

Legal Description: LOT 41RB, INLAND ESTATES, COMAL COUNTY

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

This contract will be in effect **FROM: LTO TO:** _____

Countryside Construction, Inc. will provide the following:

- An inspection every (4) four months which will include: Servicing of the mechanical & electrical components as necessary to insure system is functioning as engineer designed, pulling and cleaning the Norweco Brand aerator shaft, cleaning compressor air filters of other brands, check chlorine, conduct solids test to determine if system should be pumped, back flushing tubing for drip irrigation fields and checking sprinklers on above ground systems.
- 1) The property owner is responsible for "purchasing and keeping chlorine" in the chlorinator, (if applicable). If the chlorine test reveals "No Chlorine" in the system, the property owner may incur an additional cost.
- 2) If any improper operation is observed (which cannot be corrected at that time) the property owner will be notified immediately of the conditions and the estimated cost.
- 3) ANY PARTS, WARRANTY OR NON-WARRANTY, FREIGHT CHARGES, LABOR OR SERVICE CALLS NOT PAID IN FULL AT THE END OF (30) DAYS SHALL REMAIN THE PROPERTY OF COUNTRYSIDE CONSTRUCTION AND AUTHORIZES CONTRACTOR TO REMOVE AND REPOSSESS ANY PARTS INSTALLED. CLIENT FURTHER AGREES TO PAY ANY LABOR COST OF THE INSTALLATION AND REASONABLE COST OF REMOVAL OF SAID PARTS.
- 4) THE SIGNING OF THIS SERVICE AGREEMENT AUTHORIZES COUNTRYSIDE CONSTRUCTION TO ENTER THE PROPERTY TO EXECUTE ALL TERMS OF THIS CONTRACT.

Countryside Construction, Inc., will warranty installation of the septic system to be according to state and county regulations and the designs approved by the county. HOMEOWNER WILL BE RESPONSIBLE FOR SERVICE CALLS, LABOR AND SHIPPING COSTS ON ANY "WARRANTIED PARTS" EXCHANGED DURING WARRANTY. All other components will be according to manufacturer's warranties.

Important: As Countryside Construction, Inc. cannot control what or how much effluent goes into this septic system, we cannot warranty how the system will function. Refer to manufacturers or installer's instructions, for suggestions on septic operation. If necessary, between inspections, it is the property owner's responsibility to clean the micron filters on drip irrigation systems. This service agreement does not cover the cost of "service calls, labor or materials that are required or parts out of warranty, the failure to maintain electrical power to the system, sprinklers that are broken, leaking, stopped-up or otherwise mal-functioning; or sewage flows exceeding the hydraulic/organic design capabilities and the input of non-biodegradable materials (solvents, grease, oil, paints, etc.), or any usage contrary to the requirements as advised by authorized service representative. Laboratory test work is available at an additional cost. Chlorine, filters, or parts that are out of warranty are available at a reasonable cost.

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

Violations of the warranty also include: disconnecting the alarm, restricting ventilation to the aerator, overloading the system above its rated capacity; or flooding by external means. Rodent, insect or fire ant damage or any other form of unusual abuse is a violation. A renewal service contract should be "activated" (30) thirty days before expiration of existing contract. We will contact property owner prior to expiration of existing contract.

Served by: Countryside Construction Inc.
Walker Chapman - Installer's Licensee #OS0002929-OSSF Maintenance Provider Licensee #MP0000035

(X) Michelle Davila Print Name (X) DAVILA - TRUSTEES Date: _____
Property Owner Signature

(X) Walker Chapman Date: _____ Authorized Service Representative (revised 08/13/2020)

Greg W. Johnson, P.E.
170 Hollow Oak
New Braunfels, Texas 78132
830/905-2778

December 15, 2024

Comal County Office of Environmental Health
195 David Jonas Drive
New Braunfels, Texas 78132-3760

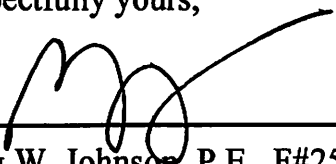
RE- Septic Design
2150 SUMMIT SKYWAY
INLAND ESTATES, LOT 41RB
NEW BRAUNFELS, TX 78132
DAVILA RESIDENCE

Brandon/Brenda,

Due to the lack of available application area it is necessary to have the setback from the property line to the spray at ten feet as required by TCEQ Chapter 285 rules Table X. I hereby request a variance to the twenty foot setback to property lines as required by Comal County Order and equivalent protection will be maintained by including a battery backup to the timer clock to assure sprayers to only spray during the predawn hours. In my professional opinion this variance will not pose a threat to the environment or public health.

If I can be of further assistance please contact me.

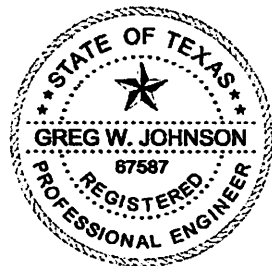
Respectfully yours,



Greg W. Johnson, P.E., F#2585

December 15, 2024

Date



ON-SITE SEWERAGE FACILITY SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed: December 13, 2024

Site Location: INLAND ESTATES, LOT 41RB

Proposed Excavation Depth: N/A

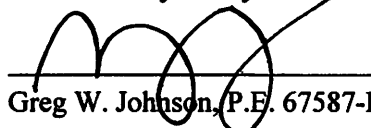
Requirements:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area.
Locations of soil boring or dug pits must be shown on the site drawing.
For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.
Describe each soil horizon and identify any restrictive features on the form. Indicate depths where features appear.

SOIL BORING NUMBER <u> </u> SURFACE EVALUATION						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	III	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 8"	BROWN
1						
2						
3						
4						
5						

SOIL BORING NUMBER <u> </u> SURFACE EVALUATION						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	SAME		AS		ABOVE	
1						
2						
3						
4						
5						

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


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

12/13/24
Date

OSSF SOIL EVALUATION REPORT INFORMATION

Date: December 16, 2024

Applicant Information:

OSCAR & MICHELL DAVILA REVOCABLE

Name: TRUST
Address: 2150 SUMMIT SKYWAY
City: NEW BRAUNFELS State: TEXAS
Zip Code: 78132 Phone: (210) 857-0998

Site Evaluator Information:

Name: Greg W. Johnson, P.E., R.S., S.E. 11561
Address: 170 Hollow Oak
City: New Braunfels State: Texas
Zip Code: 78132 Phone & Fax (830)905-2778

Property Location:

Lot 41RB Unit Blk Subd. INLAND ESTATES
Street Address: 2150 SUMMIT SKYWAY
City: NEW BRAUNFELS Zip Code: 78132
Additional Info.:

Installer Information:

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

Topography: Slope within proposed disposal area: 4 to 12 %

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

Design Calculations for Aerobic Treatment with Spray Irrigation:

Commercial

Q = GPD

Residential Water conserving fixtures to be utilized? Yes X No

Number of Bedrooms the septic system is sized for: 4 Total sq. ft. living area 2800

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

Q = (4 +1)*75-(20%)= 340

Trash Tank Size 376 Gal.

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

Req'd Application Area = Q/Ri = 340 / 0.064 = 5313 sq. ft.

Application Area Utilized = 5772 sq. ft.

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

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

Pump Tank Size = 778 Gal. 18.75 Gal/inch.

Reserve Requirement = 114 Gal. 1/3 day flow.

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

With Chlorinator NSF/TCEQ APPROVED

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

Two way cleanout

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

1" Sch-40 PVC discharge manifold

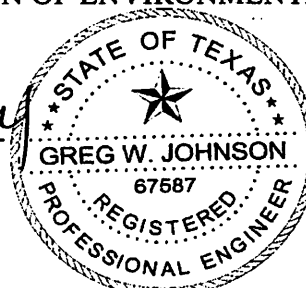
APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

EXPOSED ROCK WILL BE COVERED WITH SOIL .

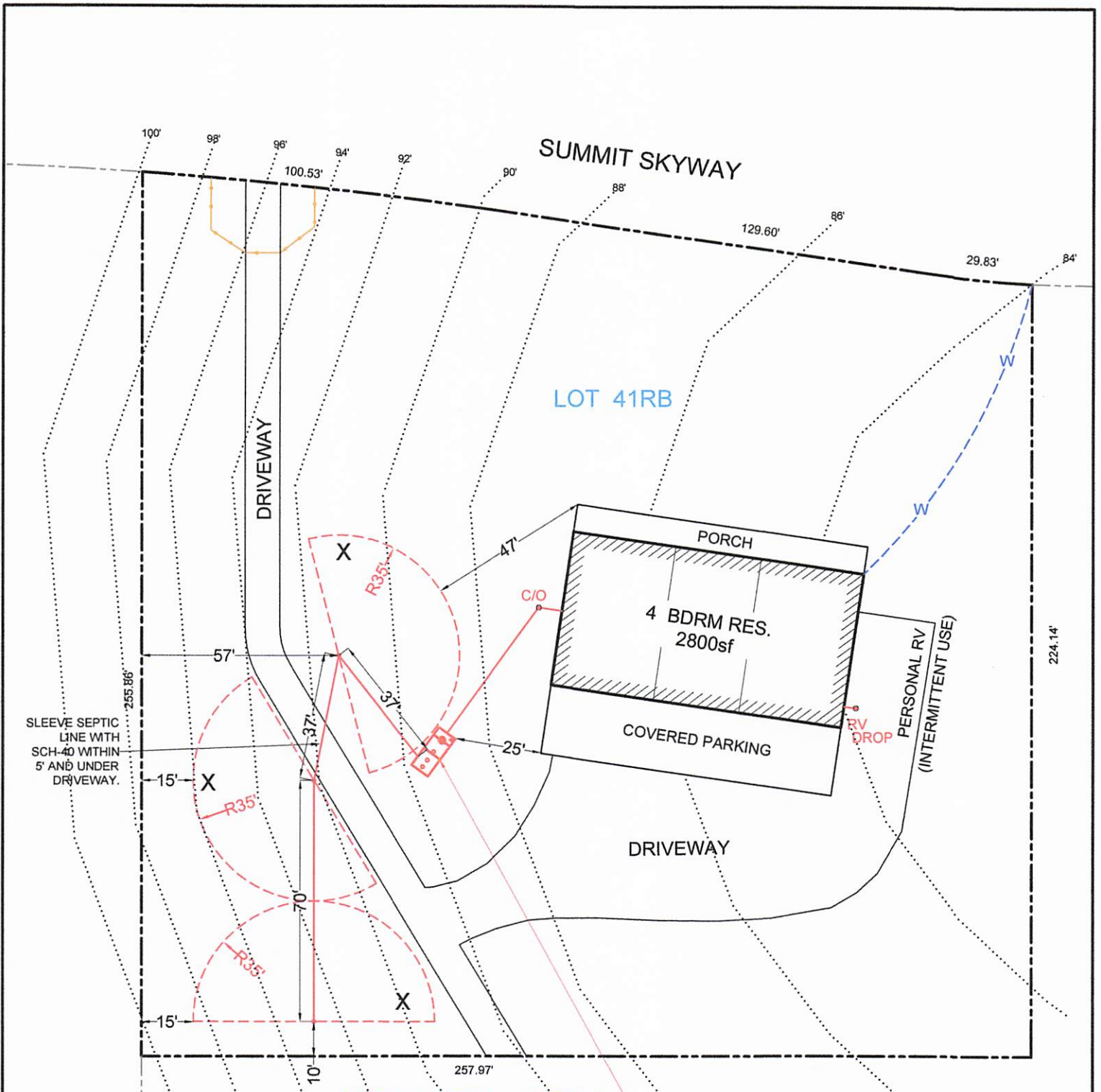
I HAVE PERFORMED A THOROUGH INVESTIGATION BEING A REGISTERED PROFESSIONAL ENGINEER AND SITE EVALUATOR IN ACCORDANCE WITH CHAPTER 285, SUBCHAPTER D, §285.30, & §285.40 (REGARDING RECHARGE FEATURES), TEXAS COMMISSION OF ENVIRONMENTAL QUALITY (EFFECTIVE DECEMBER 29, 2016)

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

12/16/24
DATE



FIRM #2585



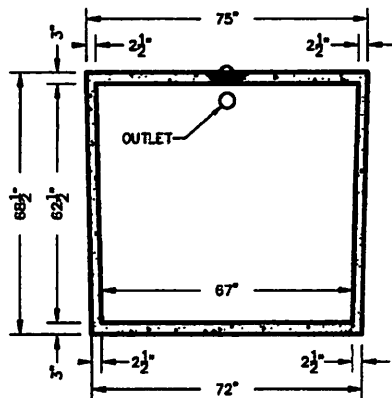
SPRAY AREA = 5772sf

X= TEST HOLES

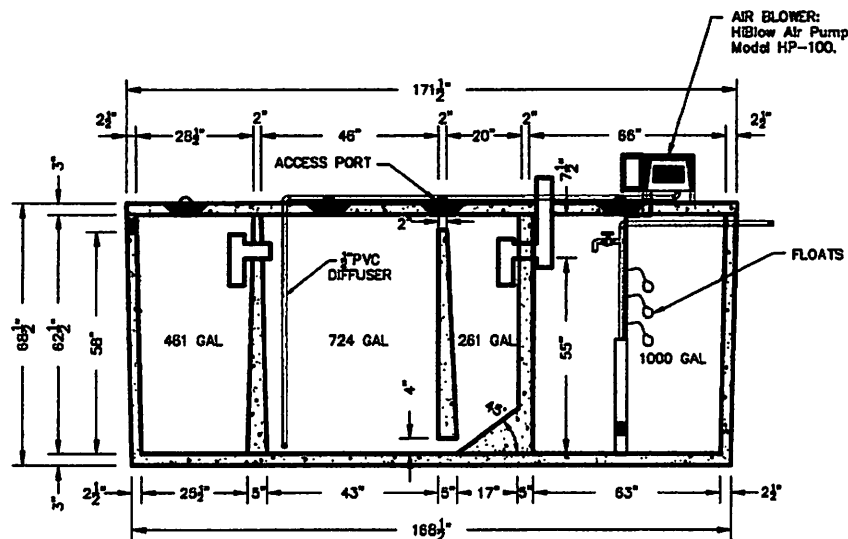
SOLAR AIR
SA II-TX800 - 1000PT
AEROBIC TREATMENT
PLANT



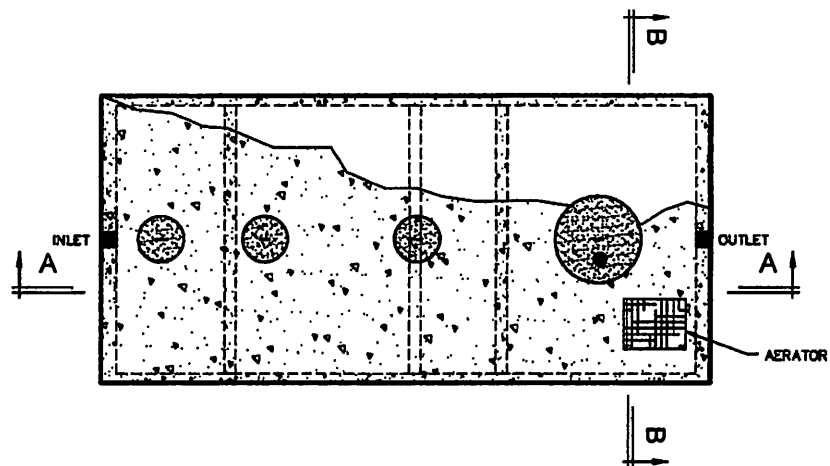
OWNER: OSCAR & MICHELL DAVILA REVOCABLE TRUST				DRAWN BY: EJS III		
STREET ADDRESS: 2150 SUMMIT SKYWAY						
LEGAL DESC: INLAND ESTATES			UNIT/SECTION/PHASE:		BLOCK:	LOT: 41RB
PREPARED BY: GREG W. JOHNSON, P.E. F#002585		SCALE: 1"=40'	DATE: 12/16/2024		REVISED:	



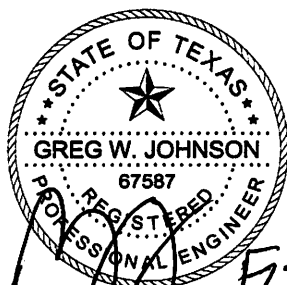
SECTION B-B



SECTION A-A



PLAN VIEW



Handwritten: F2585
12/15/24

DESIGNED: ESE	DATE: 12/15/24
CHECKED: ESE	DATE: 12/15/24
REVIEWED: ESE	DATE: 12/15/24
APPROVED: ESE	DATE: 12/15/24

MODEL SA800-1000PT
SEWER TREATMENT SYSTEM

SOLAR AEROBIC
6754 HWY 90 EAST
LAKE CHARLES, LA 70615
PHONE: (337) 439-0680

TREATMENT PLANT	
PROJECT	
SA-5	
JULY 2011	PERIOD -
REVISION	NONE

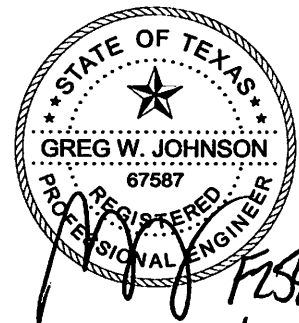
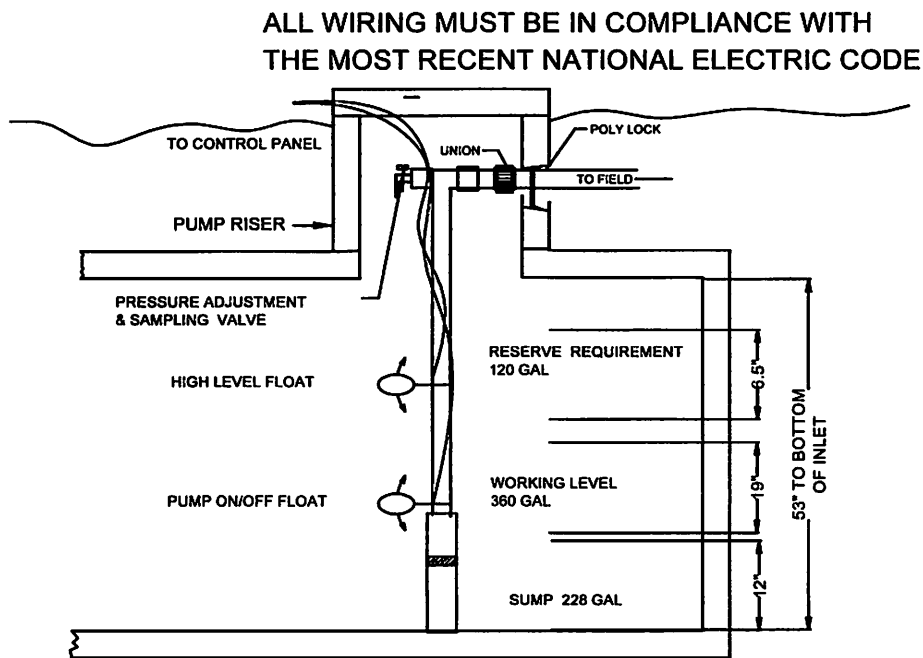
TANK NOTES:

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



F2585
12/15/24

TYPICAL PUMP TANK CONFIGURATION
1000 GAL PUMP TANK - SAITX-800 1000 PT

T3 / T35 Performance

Nozzle	Pressure PSI	Radius ft.	Flow gpm	Precip. in/hr	Precip. in/hr ▲	Metric				
						Pressure BAR	Radius m	Flow m ³ /hr	Precip. mm/hr	Precip. mm/hr ▲

SMARTANGLE 13° LOW ANGLE TRAJECTORY

2.0LA	30	29	1.6	0.37	0.42	2.1	8.8	0.36	9	11
	40	33	1.9	0.34	0.39	2.8	10.1	0.43	9	10
	50	34	2.1	0.35	0.40	3.4	10.4	0.48	9	10
2.5LA	30	31	2.1	0.42	0.49	2.1	9.4	0.48	11	12
	40	35	2.6	0.41	0.47	2.8	10.7	0.59	10	12
	50	36	2.9	0.43	0.50	3.4	11.0	0.66	11	13
3.5LA	30	31	2.7	0.54	0.62	2.1	9.4	0.61	14	16
	40	35	3.2	0.50	0.58	2.8	10.7	0.73	13	15
	50	37	3.5	0.49	0.57	3.4	11.3	0.79	13	14
4.5LA	30	33	3.0	0.53	0.61	2.1	10.1	0.68	13	16
	40	37	3.4	0.48	0.55	2.8	11.3	0.77	12	14
	50	37	4.1	0.58	0.67	3.4	11.3	0.93	15	17

FLOW+ NOZZLES 26° TRAJECTORY

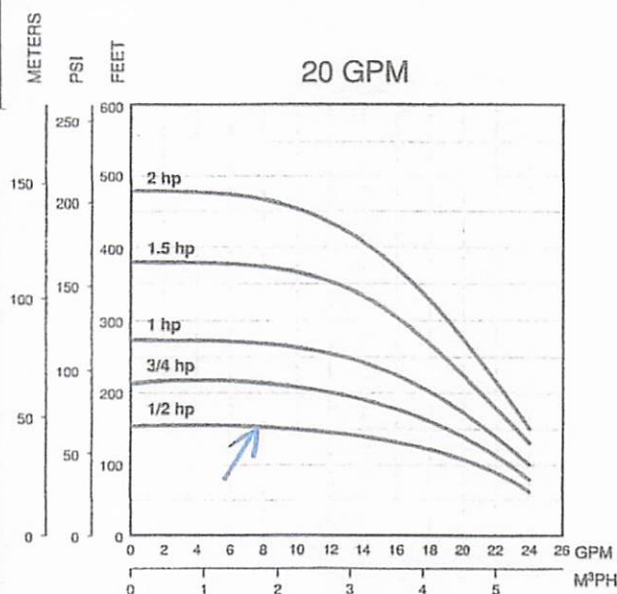
9	50	50	9.5	0.73	0.84	3.4	15.2	2.16	19	21
	60	54	10.8	0.71	0.82	4.1	16.5	2.45	18	21
	70	55	11.7	0.74	0.86	4.8	16.8	2.66	19	22
13	50	57	12.4	0.73	0.85	3.4	17.4	2.82	19	22
	60	59	13.8	0.76	0.88	4.1	18.0	3.13	19	22
	70	61	14.9	0.77	0.89	4.8	18.6	3.38	20	23

■ Square spacing based on 50% of diameter

▲ Triangular spacing based on 50% of diameter

Note: All precipitation rates are calculated for 180° operation.
Divide by 2 for full circle precipitation rates

Thermoplastic Performance



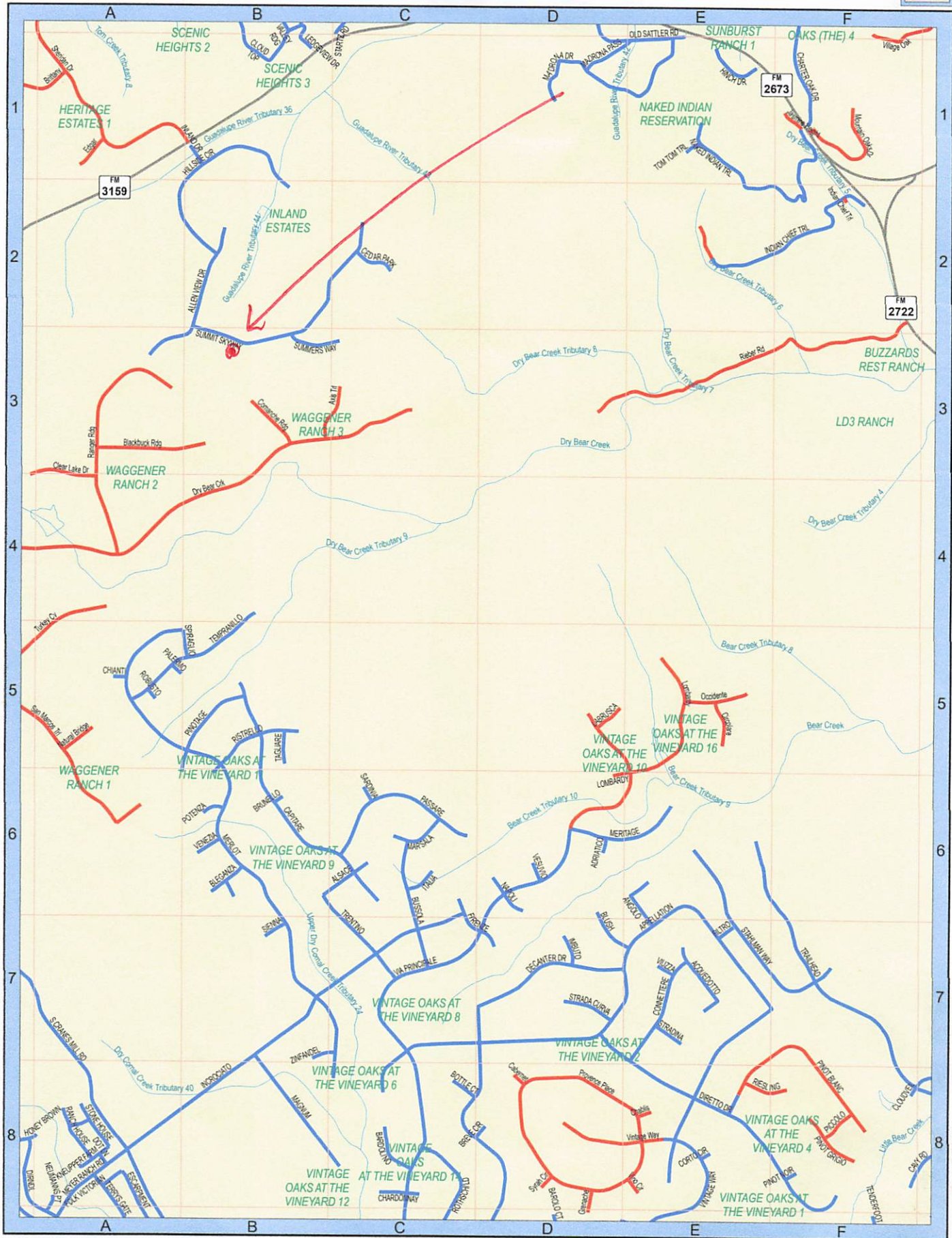
Thermoplastic Units Ordering Information

1/2 - 1.5 HP Single-Phase Units

Order No.	Model	GPM	HP	Volt	Wire	Wt.
94741005	10FE05P4-2W115	10	1/2	115	2	24
94741010	10FE05P4-2W230	10	1/2	230	2	24
94741015	10FE07P4-2W230	10	3/4	230	2	28
94741020	10FE1P4-2W230	10	1	230	2	31
94741025	10FE15P4-2W230	10	1.5	230	2	46
94742005	20FE05P4-2W115	20	1/2	115	2	25
94742010	20FE05P4-2W230	20	1/2	230	2	25
94742015	20FE07P4-2W230	20	3/4	230	2	28
94742020	20FE1P4-2W230	20	1	230	2	31
94742025	20FE15P4-2W230	20	1.5	230	2	40

Thermoplastic 1/2 - 2 HP Pump Ends

Order No.	Model	GPM	HP	Volt	Wire	Wt.
94751005	10FE05P4-PE	10	1/2	N/A	N/A	6
94751010	10FE07P4-PE	10	3/4	N/A	N/A	7
94751015	10FE1P4-PE	10	1	N/A	N/A	8
94751020	10FE15P4-PE	10	1.5	N/A	N/A	12
94752005	20FE05P4-PE	20	1/2	N/A	N/A	6
94752010	20FE07P4-PE	20	3/4	N/A	N/A	7
94752015	20FE1P4-PE	20	1	N/A	N/A	8
94752020	20FE15P4-PE	20	1.5	N/A	N/A	10
94752025	20FE2P4-PE	20	2	N/A	N/A	11



SEE PAGE 43



0 1,250 2,500
Feet


0 0.25 0.5
Miles

From: [Ritzen,Brenda](#)
To: ["oscardavila7@yahoo.com"; "\(gregjohnsonpe@yahoo.com\)"](#)
Subject: Permit 118515
Date: Wednesday, April 23, 2025 1:37:00 PM
Attachments: [image001.png](#)

**Re: Oscar & Michell Davila Revocable Trust
Inland Estates Lot 41RB
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:

1.  Add the intermittent use RV to the permit application.
2. 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 TREATMENT APPLICATION

VOID

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

Date December 13, 2024

Permit Number 118515

1. APPLICANT / AGENT INFORMATION

Owner Name OSCAR & MICHELL DAVILA REVOCABLE TRUST
Mailing Address 2150 SUMMIT SKYWAY
City, State, Zip NEW BRAUNFELS TEXAS 78132
Phone # 210-857-0998
Email oscardavila7@yahoo.com

Agent Name GREG JOHNSON, P.E.
Agent Address 170 HOLLOW OAK
City, State, Zip NEW BRAUNFELS TEXAS 78132
Phone # 830-905-2778
Email gregjohnsonpe@yahoo.com

2. LOCATION

Subdivision Name INLAND ESTATES Unit Lot 41RB Block
Survey Name / Abstract Number Acreage
Address 2150 SUMMIT SKYWAY City NEW BRAUNFELS State TX Zip 78132

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

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

Number of Bedrooms 4

Indicate Sq Ft of Living Area 2800

☐ 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

VOID

Estimated Cost of Construction: \$ 600,000 (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 Collection

4. SIGNATURE OF OWNER

By signing this application, I certify that:

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

[Signature]
Signature of Owner

Michelle C. Davila 3-10-2025
Date

4/m



201506047029 11/24/2015 08:18:23 AM 1/4

WARRANTY DEED

STATE OF TEXAS

(

COUNTY OF COMAL

(

Date: November 16, 2015

Grantors: OSCAR DAVILA and MICHELL DAVILA a/k/a MICHELL COLLINS DAVILA
2150 Summit Skyway
New Braunfels, Texas 78132
Comal County

Grantee: OSCAR DAVILA and MICHELL COLLINS DAVILA as Co-Trustees of the
OSCAR AND MICHELL DAVILA REVOCABLE TRUST
2150 Summit Skyway
New Braunfels, Texas 78132
Comal County

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

Property (including any improvements):

Tract One (1)

Lot 41, Inland Estates Subdivision, situated in Comal County, Texas, according to the plat thereof recorded in Volume 6, Pages 105-106, Map and Plat Records of Comal County, Texas.

Tract Two (2)

A 0.677 acres, more or less, of land area in the B.F. Smithson Survey No. 926, Abstract No. 849, Comal County, Texas, being that tract described as 0.677 acres in a deed to Clifford A. Manning et ux, recorded in Volume 339, Page 528 of the Deed Records of Comal County, Texas, and being more particularly described by metes and bounds as follows:

BEGINNING at a 1/2" iron rod set with plastic cap stamped "PRECISION SURVEYORS", in the south line of Summit Skyway (platted as Summit Ridge Drive) on the plat of Inland Estates Subdivision, recorded in Volume 6, Page 105 of the Plat Records of Comal County, Texas, at the common northeast corner of the Manning 0.677 acre tract and the northwest corner of Lot 42, Inland Estates Subdivision;

THENCE leaving the **PLACE OF BEGINNING** and the south line of Summit Skyway, with the common east line of the Manning 0.677 acre tract and the west line of Lot 42, S05°24'24"W 492.34 feet to a 1/2" iron rod found in the north line of Lot 115, Waggener Ranch, Section 2, recorded in Volume 15, Page 37 of the Plat Records of Comal County, Texas, at the common southeast corner of the Manning 0.677 acre tract and the southwest corner of Lot 42;

THENCE with the common south line of the Manning 0.677 acre tract and the north line of Lot 115, N84°30'50" 60.00 feet to a 1/2" iron rod found at the common southwest corner of the Manning 0.677 acre tract, the northwest corner of Lot 115, the northeast corner of Lot 114, Waggener Ranch, Section 2 and the southeast corner of Lot 41, Inland Estates Subdivision;

THENCE with the common west line of the Manning 0.677 acre tract and the east line of Lot 41, N05°24'24"E 492.33 feet to a calculated point in the south line of Summit Skyway, at the common northwest corner of the Manning 0.677 acre tract and the northeast corner of Lot 41;

THENCE with the common north line of the Manning 0.677 acre tract and the south line of Summit Skyway, in an easterly direction with a left breaking curve having a radius of 328.87 feet and an arc length of 60.08 feet to the **PLACE OF BEGINNING**.

There are contained within these metes and bounds 0.677 acres, more or less, of land area as prepared from public records and a survey made on the ground on December 7, 2012, by Precision Surveyors, Inc. of San Antonio, Texas. Bearings for this description are based on the plat of Inland Estates Subdivision, recorded in Volume 6, Page 105 of the Plat Records of Comal County, Texas.

Tract Three (3)

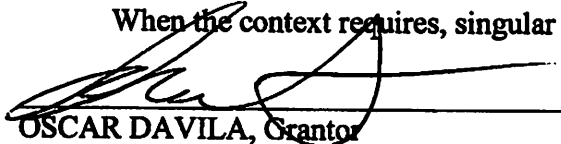
A tract of land containing 5.105 acres, being Lot 42 of Inland Estates Subdivision, a subdivision in Comal County, Texas, according to the map or plat thereof recorded in Volume 6, Pages 105-106 of the Comal County Map Records (C.C.M.R.), being the same tract recorded in the name of Stanley D. Springer and wife, Laura L. Springer, under Comal County Clerk's File (C.C.C.F.) No. 200906017231 and being more particularly described by metes and bounds as follows: (bearings based on said Volume 6, Pages 105-106 of the C.C.M.R.)

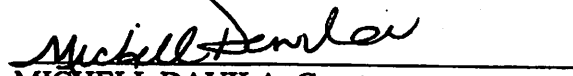
BEGINNING at an iron rod found on the southerly right-of-way line of Summit Skyway (platted as Summit Ridge Drive, 60 feet wide) being the northwest corner of said Lot 42 and being the northeast corner of a tract recorded in the name of Oscar Davila et ux under C.C.C.F. No. 201306000901 and being the northwesterly corner of this tract;

THENCE, with the said southerly right-of-way line of said Summit Skyway the following two (2) courses:

Grantor, for the Consideration stated above 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 when the claim is by, through, or under Grantor but not otherwise, 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.

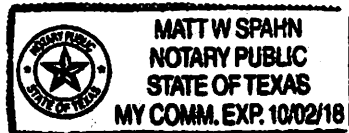

OSCAR DAVILA, Grantor


MICHELL DAVILA, Grantor
a/k/a MICHELL COLLINS DAVILA

STATE OF TEXAS)

COUNTY OF BEXAR)

This instrument was acknowledged before me on November 16, 2015, by OSCAR DAVILA and MICHELL DAVILA a/k/a MICHELL COLLINS DAVILA.




Notary Public, State of Texas

↓
PREPARED BY/ RETURN TO:
SPAHN LAW FIRM PLLC
3308 BROADWAY, SUITE 101
SAN ANTONIO, TX 78209
Tel: (210) 880-4012
Fax: (210) 853-2036

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
11/24/2015 08:18:23 AM
CASHTWO 4 Page(s)
201506047029







202406022408 07/26/2024 02:22:31 PM 1/3

VACATE AND REPLAT
(PLVR)

**NAME OF
SUBDIVISION:**

LOT 41R INLAND ESTATES

INTO

**LOTS 41RA, 41RB & 41RC
INLAND ESTATES**

Recorded in Doc No 202106009867

**PLAT MAP IMAGE(S) LOCATED IN PLAT MAP RECORDS
PREPARED IN THE OFFICE OF THE COMAL COUNTY CLERK**

BY:

Tracy Gelp
Deputy Clerk

FOR RECORDING PURPOSES

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
07/26/2024 02:22:31 PM
RE TRACY 3 Page(s)
202406022408



Bobbie Koepp



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

		118515
<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

03/29/2025

Date

___ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

INCOMPLETE APPLICATION
___ (Missing Items Circled, Application Refused)