Comal County Environmental Health
OSSF Inspection Sheet

Installer Name: Swoyer **OSSF Installer #:** OS0026238

1st Inspection Date: 10/17/25 **2nd Inspection Date:** _____ **3rd Inspection Date:** _____

Inspector Name: Corey Allen **Inspector Name:** _____ **Inspector Name:** _____

Permit#: 118619 **Address:** 12024 Canterbury

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	X	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)		X		
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	X	285.91(10) 285.30(b)(4) 285.31(d)		X		
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	X	285.32(a)(1)		X		
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	X	285.32(a)(3)		X		
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)	X	285.32(a)(5)		X		
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: **10/17/25 CA: Tank level no leaks operational remove brush within 10 ft of spray cover all**

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 SingleTank, 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) (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	x	285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)		x		
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 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)				
12	SEPTIC TANK Tank Volume Installed						
13	PUMP TANK Volume Installed						
14	AEROBIC TREATMENT UNIT Size Installed	x		600	x		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	x x		Maxx Air	x x		
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

Comal County Environmental Health
OSSF Inspection Sheet

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
19	DISPOSAL SYSTEM Drip Irrigation		285.33(c)(3)(A)-(F)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(4) 285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
24	DISPOSAL SYSTEM Other (describe) (Approved Design)	x	285.33(d)(6) 285.33(c)(4)	Surface Application	x		
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
OSSF Inspection Sheet

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.	X	285.32(c)(1)		X		
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	X X X			X X X		
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.	X			X		
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	X			X		

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?	X	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)		X		
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	X X X	285.33(d)(2)(G) (i)285.33(d)(2) (A)285.33(d)(2)(F)		X		
42	APPLICATION AREA Area Installed	X					
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:	118619
Issued This Date:	05/22/2025
This permit is hereby given to:	KYLE SCOTT ALON HAWKINS & KATHY LAWSON

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

12024 CANTERBURY RD
SPRING BRANCH, TX 78070

Subdivision:	WHISPERING HILLS
Unit:	0
Lot:	36
Block:	0
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.

RECEIVED
By Kathy Griffin at 8:20 am, May 06, 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 03/31/25 Permit Number 118619

1. APPLICANT / AGENT INFORMATION

Owner Name	Kyle Scott Alon Hawkins and Kathy Lawson	Agent Name	GREG W. JOHNSON, P.E.
Mailing Address	c/o 23011 FM 306	Agent Address	170 Hollow Oak
City, State, Zip	Canyon Lake, TX 78133	City, State, Zip	New Braunfels, TX 78132
Phone #	830-935-4936	Phone #	830-905-2778
Email	traci@psseptics.com	Email	gregjohnsonpe@yahoo.com

2. LOCATION

Subdivision Name WHISPERING HILLS Unit ____ Lot 36 Block ____

Survey Name / Abstract Number 560300 Acreage ____

Address 12024 CANTERBURY RD City SPRING BRANCH State TX Zip 78132

3. TYPE OF DEVELOPMENT

[X] Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1986

[ ] 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: $ 400,000 (Structure Only)

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

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

Source of Water [X] Public [ ] Private Well

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.

Kyle S. Hawkins Kathy C. Lawson 3/31/25

Signature of Owner Date

Revised January 2021

WHISPERING HILLS, LOT 36

COMALCOUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

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

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) MAXX AIR M600 Absorption/Application Area (Sq Ft) 4926

Gallons Per Day (As Per TCEQ Table 111) 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.)

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

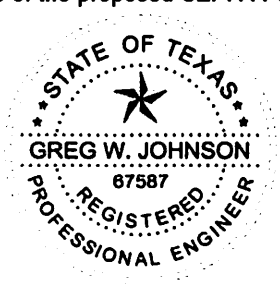
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP.)

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

April 4, 2025
Date

Revised March 2024

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 (OSSF's), 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 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):

____ **UNIT/PHASE/SECTION** ____ **BLOCK** 36 **LOT** WHISPERING HILLS **SUBDIVISION**

IF NOT IN SUBDIVISION: ____ **ACREAGE** ____ **SURVEY**

The property is owned by (insert owner's full name): Kyle Scott Alon Hawkins and Kathy Lawson

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 31 **DAY OF** March ,20 25

Kathy Lawson

Kyle Scott Alon Hawkins

Owner(s) signature(s)

Owner (s) Printed name (s)

Kyle Scott Alon Hawkins & Kathy Lawson **SWORN TO AND SUBSCRIBED BEFORE ME ON THIS** 31 **DAY OF** March ,20 25

Notary Public Signature

PARKER KING
My Notary ID # 135083459
Expires September 17, 2028

(Notary Seal Here)

THIS AREA FOR COMAL COUNTY CLERK RECORDING PURPOSES ONLY

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
05/01/2025 08:06:12 AM
MARY 1 Pages(s)
202506012617

Bobbie Koepp

REVISED
11:50 am, May 22, 2025

SEPTIC PUMPING & MAINTENANCE By Cody Young LLC

To: Kyle Scott Alon Hakins and Kathy Lawson

Site: 12024 Canterbury Rd, Spring Branch, TX 78070

County: Comal

Installer: Paul Swoyer Septics

Agency:

Mfg./Brand:

Level 1 Contract

This service contract for the On-Site Sewage-facility, (OSSF), located at the site stated above. OSSF is to be inspected and serviced at regular intervals under a licensed provider. Special emergency service is to be provided within 48 hours of notification by the homeowner or the owner's agent. The initial contract is for (2) years from the date of final septic system inspection. Renewals shall be for a period of 2 years at the current rate and remain in effect for the specified dates listed. From DATE LICENSE TO OPERATE IS ISSUED until 2 YEARS FROM LTO

Contract price $700

Service Program Includes:

1. Regular site inspection at 4-month intervals for residential septic system.
2. OSSF maintenance: check aerator components for proper operation, control panel, effluent pump, spray head/drip nozzle. Check Proprietary specific components. Check pumps, check spray heads, check, and clean any Filters, check bull run valves and any other valves. Flush drain field if needed.
3. Visual inspection of control panel, (when accessible).
4. Labor expenses required at the home to maintain, repair, or remove any part of the control center or mechanical aerator to be returned for factory repair.
5. Labor expenses required at the home to service, repair, or install any part of the control panel or aerator returned from factory.
6. All maintenance reports will be emailed to the permitting authority & customer within 14 days of inspection.

REVISED
11:50 am, May 22, 2025

Client Responsibilities:

1. Special service calls after the (at the 4-month intervals) stated in item #1.
2. BODs or TSS grab samples, (if needed).
3. Freight costs to and from factory, for component repair.
4. Costs for replacing damaged or missing parts and repairing any equipment not under any specified warranty.
5. Pumping out any or all the OSSF by a licensed waste hauler.
6. The Homeowner is responsible for maintaining the chlorinator and providing proper chlorine supply if required.
7. Securing pets so that maintenance functions can be performed safely for the technician, and the pet. If pets are present in the yard, and the owner is not on site to secure the animals, it is necessary to cancel the maintenance.
8. Securing pets so that maintenance functions can be performed safely for the technician, and the pet. If pets are present in the yard, and the owner is not on site to secure the animals, and it is necessary to cancel the maintenance, there will be a $75 trip charge.
9. Insuring access to the property, always to the maintenance provider. (Gates, chains with locks, codes, etc.)

Miscellaneous Provisions

1. This contract can be terminated by either party in writing, within 30 days' notice. Contracts that are terminated will include notification in writing to the Authority having Jurisdiction, the Manufacturer of the system, and the other party.

Homeowner: _____ Kathy Lawson Date: 3/31/25

Phone: 909-702-0955 Email: flowstoner@gmail.com

Maintenance Provider: Milo Young, License #MP0002338

_____

Septic Pumping & Maintenance by Cody Young

911 RR3404

Kingsland, TX 78639

(325)248-8740

ON-SITE SEWERAGE FACILITY
SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed: **April 03, 2025**

Site Location: **WHISPERING HILLS, LOT 36**

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 **SURFACE EVALUATION**

Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0 – 8"	**III**	**CLAY LOAM**	**N/A**	**NONE OBSERVED**	**LIMESTONE @ 8"**	**BROWN**
1						
2						
3						
4						
5						

SOIL BORING NUMBER **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

04/03/25
Date

OSSF SOIL EVALUATION REPORT INFORMATION

Date: April 04, 2025

Applicant Information:

KYLE SCOTT ALON HAWKINS & KATHY
Name: LAWSON
Address: c/o 23011 F.M. 306
City: CANYON LAKE State: TEXAS
Zip Code: 78133 Phone: (830) 935-4936

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 36 Unit ___ Blk ___ Subd. WHISPERING HILLS
Street Address: 12024 CANTERBURY ROAD
City: SPRING BRANCH Zip Code: 78070
Additional Info.: _____

Installer Information:

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

Topography: Slope within proposed disposal area: 8 to 15 %

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: 3 Total sq. ft. living area 1986
Q gal/day = (Bedrooms +1) * 75 GPD - (20% reduction for water conserving fixtures)
Q = (3 +1)*75-(20%)= 240
Trash Tank Size 353 Gal.
TCEQ Approved Aerobic Plant Size 600 G.P.D.
Req'd Application Area = Q/Ri = 240 / 0.064 = 3750 sq. ft.
Application Area Utilized = 4926 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 = 768 Gal. 14.5 Gal/inch.
Reserve Requirement = 80 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 .

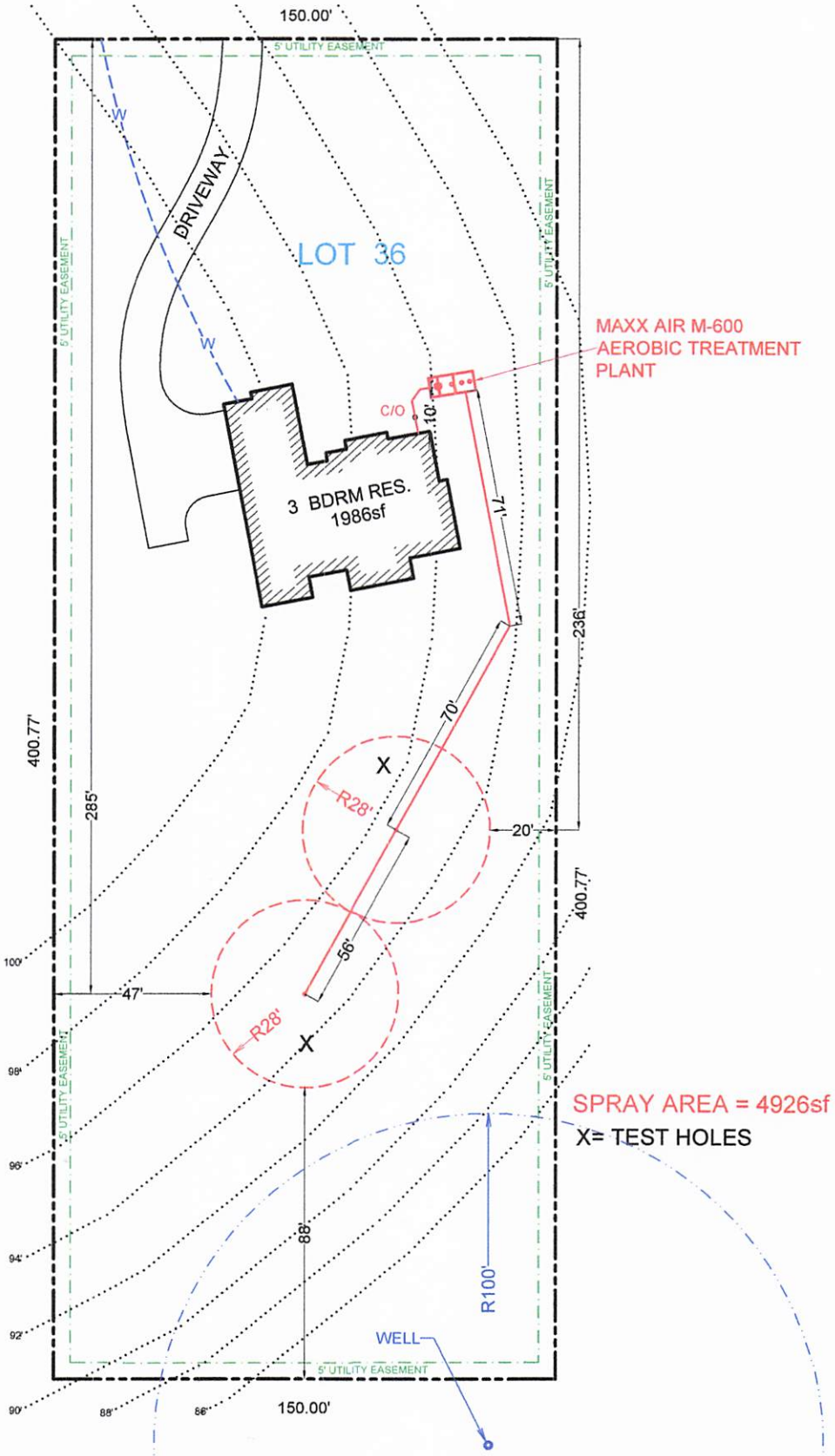
I HAVE PERFORMED A THOROUGH INVESTIGATION BEING A REGISTERED PROFESSIONAL ENGINEER AND SITE EVALUATOR IN ACCORDANCE WITH CHAPTER 285, SUBCHAPTER D, §285.30, & §285.40 (REGARDING RECHARGE FEATURES), TEXAS COMMISSION OF ENVIRONMENTAL QUALITY (EFFECTIVE DECEMBER 29, 2016)

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

04/04/25
DATE

FIRM #2585

CANTERBURY ROAD

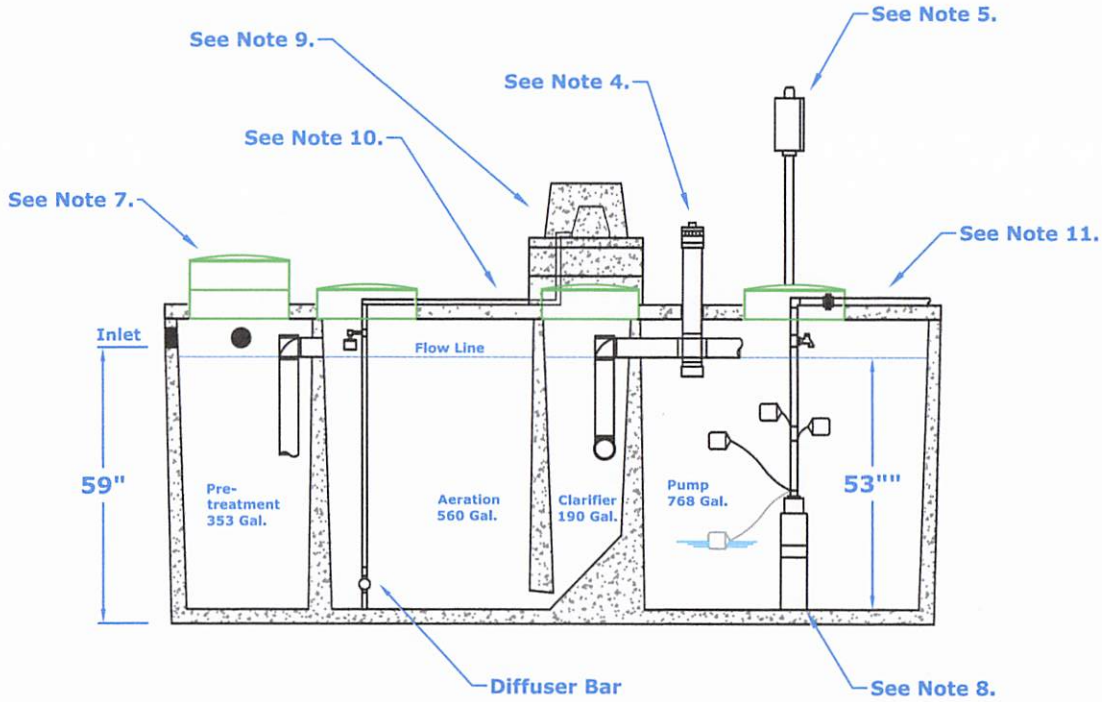


STATE OF TEXAS
GREG W. JOHNSON
67587
REGISTERED
PROFESSIONAL ENGINEER

OWNER: KYLE SCOTT ALON HAWKINS & KATHY LAWSON				DRAWN BY: EJS III	
STREET ADDRESS: 12024 CANTERBURY ROAD					
LEGAL DESC: WHISPERING HILLS		UNIT/SECTION/PHASE:	BLOCK:	LOT: 36	
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=50'	DATE: 4/4/2025	REVISED:		

GENERAL NOTES:

1. Plant structure material to be precast concrete and steel.
2. Weight = 14,900 lbs.
3. Treatment capacity is 600 GPD. BOD Loading = 1.62 lbs. per day.
4. Standard tablet chlorinator or Optional Liquid chlorinator. NSF approved chlorinators (tablet & liquid) available.
5. Control Center w/ Timer for night spray application. .
7. 20" Ø acess riser w/ lid (Typical 4). Optional extension risers available.
8. 20 GPM 1/2 HP, high head effluent pump.
9. Air Compressor w/ concrete housing.
10. 1/2" Sch. 40 PVC Air Line (Max. 50 Lft from Plant).
11. 1" Sch. 40 PVC pipe to distribution system provided by contractor.



DIMENSIONS:
Outside Height: 67"
Outside Width: 63"
Outside Length: 164"

MINIMUM EXCAVATION DIMENSIONS:
Width: 76"
Length: 176"

STATE OF TEXAS
GREG W. JOHNSON
67587
REGISTERED PROFESSIONAL ENGINEER

12585
04/03/25

Maxx Air M-600 (600 GPD) Aerobic Treatment Plant (Assembled)

Dec, 2013
By: A.S.

Scale:
* All Dimensions subject to allowable specification tolerances.

Dwg. #: ADV-B550-3

Advantage Wastewater Solutions llc

Advantage Wastewater Solutions llc.
444 A Old Hwy No 9
Comfort, TX 78013
830-995-3189
fax 830-995-4051

TANK NOTES:

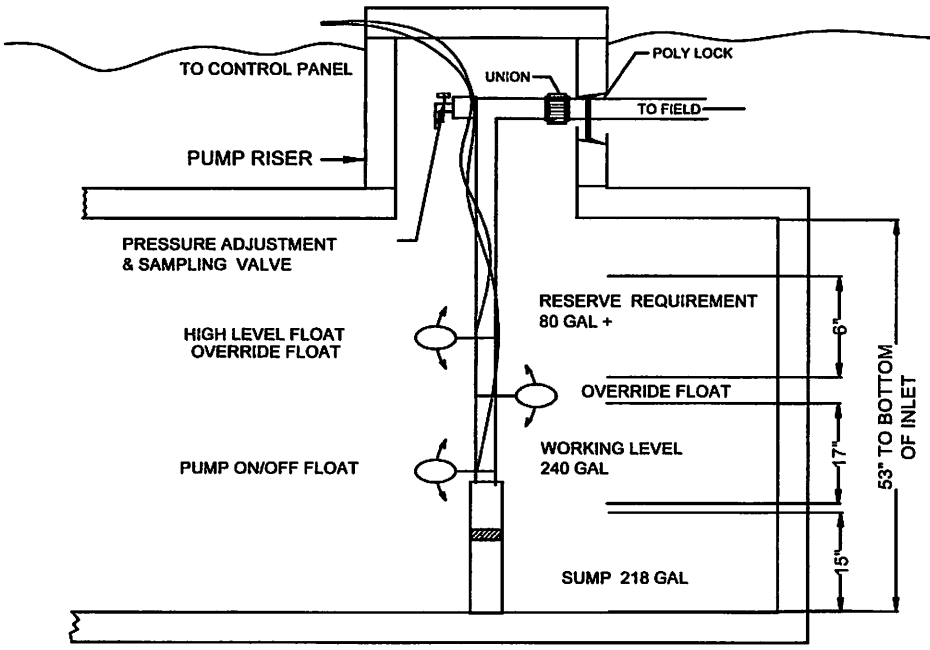
Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

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

ALL WIRING MUST BE IN COMPLIANCE WITH
THE MOST RECENT NATIONAL ELECTRIC CODE



STATE OF TEXAS
GREG W. JOHNSON
67587
REGISTERED
PROFESSIONAL ENGINEER

F-2585

04/03/25

TYPICAL PUMP TANK CONFIGURATION
MAXX AIR M600 768 GAL PUMP TANK

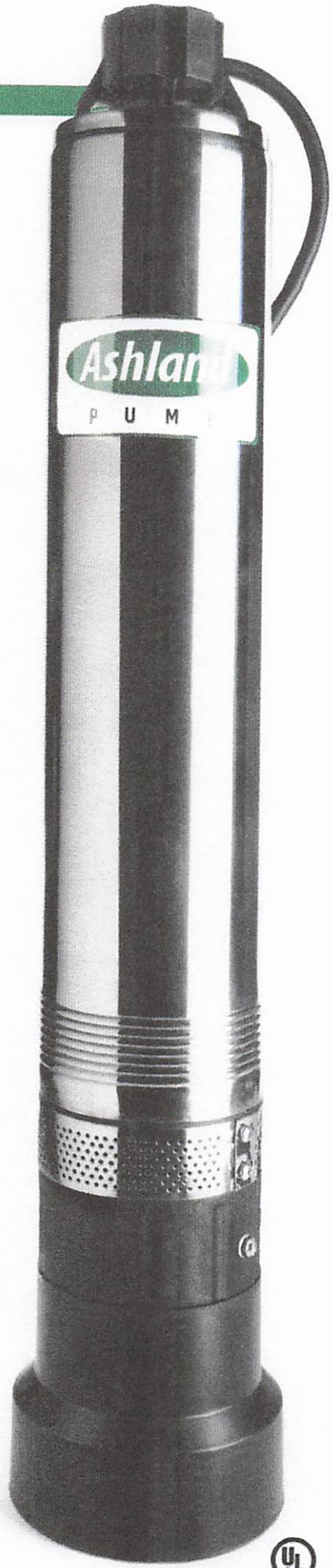
CISTERN PUMPS

CPM Series

Ashland Pump – CPM Series

The Ashland Pump CPM Series is designed to operate in filtered effluent/gray water applications. The bottom suction design allows for maximum drawdown of fluid and the hydraulic stages are able to pass 1/8" solids without damage to the pump.

Installations in cistern tanks, rain basin catchments or anywhere drawdown levels need to be maximized are ideal applications for the Ashland Pump CPM Series.



UL LISTED

APPLICATIONS

- Filtered Effluent Water Pumping
- Gray Water Pumping
- Water Feature / Aeration Applications
- Rain Water Basin Applications

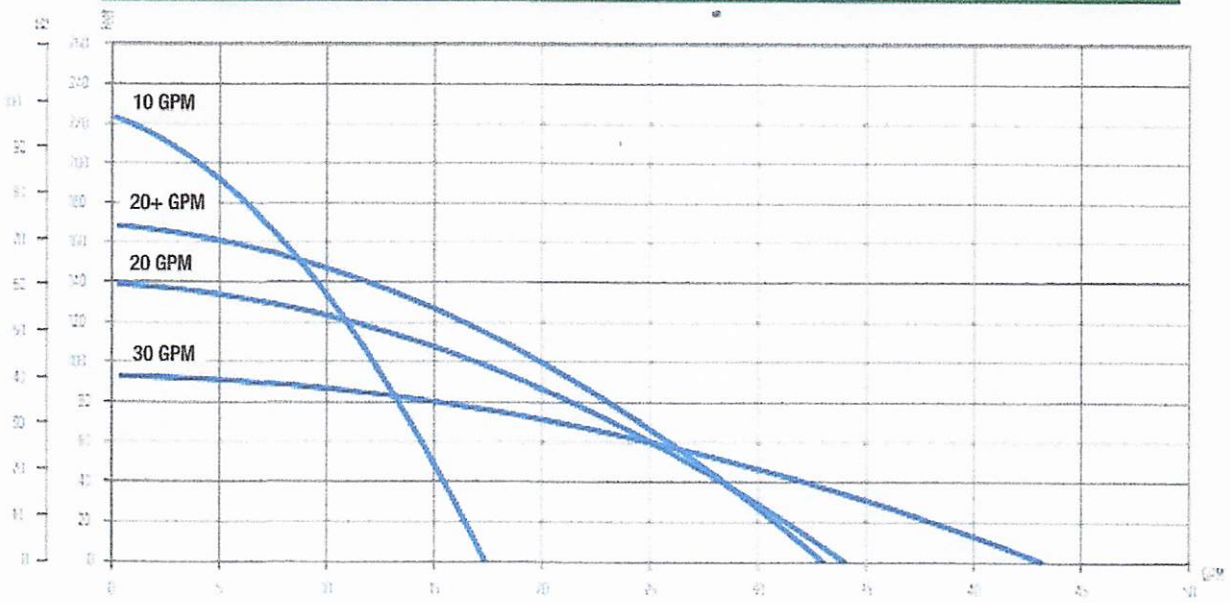
FEATURES

- Bottom suction design for maximum drawdown
- Able to pass 1/8" solids
- Available in 10, 20 and 30 GPM flow rates
- ½ HP, 115V and 230V single phase motors
- Heavy duty discharge with stainless steel internal threads
- 600 Volt, 10' SJOOW jacketed lead
- High shut-off pressure
- Quiet operation
- Standard removable base for stable mounting

ORDERING INFORMATION

CPM SERIES CISTERN PUMP						
Model/Order No.	GPM	HP	Voltage/Ph.	Stage Count	Length (in.)	Shipping Wt. (lbs.)
10CPM5-115	10	1/2	115/1	7	26	17
10CPM5-230	10		230/1	7	26	17
20CPM5-115	20		115/1	5	25	16
20CPM5-230	20		230/1	5	25	16
20+CPM5-115	20+		115/1	6	26	17
20+CPM5-230	20+		230/1	6	26	17
30CPM5-115	30		115/1	4	25	16
30CPM5-230	30		230/1	4	25	16

ASHLAND PUMP CPM SERIES CISTERN PUMP PERFORMANCE



K RAIN

Low Angle Performance Data

NOZZLE	PRESSURE			RADIUS		FLOW RATE		
	PSI	kPa	Bars	Ft.	M.	GPM	L/M	M³/H
#1.0	30	207	2.1	22	6.7	1.2	4.5	.27
	40	276	2.8	24	7.3	1.7	6.4	.39
	50	345	3.4	26	7.9	1.8	6.8	.41
	60	414	4.1	28	8.5	2.0	7.6	.45
#3.0	30	207	2.1	29	8.8	3.0	11.4	.68
	40	276	2.8	32	9.8	3.1	11.7	.70
	50	345	3.4	35	10.7	3.5	13.2	.80
	60	414	4.1	37	11.3	3.8	14.4	.86
#4.0	30	207	2.1	31	9.4	3.4	12.9	.77
	40	276	2.8	34	10.4	3.9	14.8	.89
	50	345	3.4	37	11.3	4.4	16.7	1.00
	60	414	4.1	38	11.6	4.7	17.8	1.07
#6.0	40	275	2.8	38	11.6	6.5	24.6	1.48
	50	344	3.4	40	12.2	7.3	27.7	1.66
	60	413	4.1	42	12.8	8.0	30.3	1.82
	70	482	4.8	44	13.4	8.6	32.6	1.96

*All precipitation rates calculated for 180° operation. For the precipitation rate for a 36

Ashland

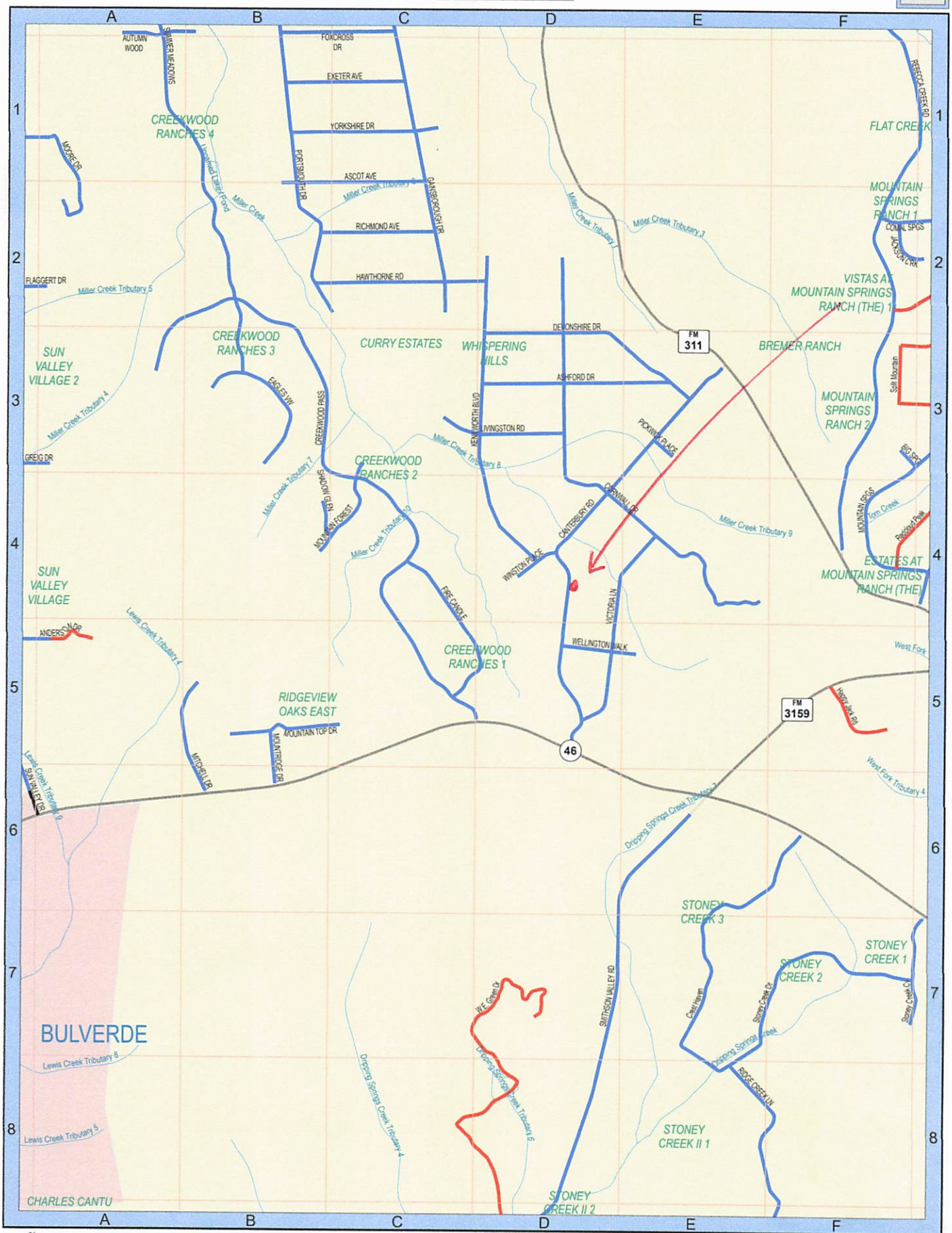
P U M P

Honest, Professional, Dependable

1899 Cottage Street, Ashland, Ohio 44805

Telephone: 855 281-6830 • Fax: 877 326-1994 • ashlandpump.com

↑ SEE PAGE27 ↑



SEE PAGE41

↓ SEE PAGE54 ↓

N W E S

0 1,250 2,500
Feet

0 0.25 0.5
Miles

Produced by the Comal County Engineer's Office - 7/17/2023

From: Ritzen,Brenda
To: Traci Field; "(gregjohnsonpe@yahoo.com)"
Subject: Permit 118619
Date: Wednesday, May 21, 2025 4:03:00 PM
Attachments: image001.png

Re: Kyle Scott Alon Hawkins & Kathy Lawson
Whispering Hills Lot 36
Application for Permit for Authorization to Construct an On-Site Sewage Facility (OSSF)

Traci / Greg :

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

1. **The 2 year initial maintenance contact must indicate that the start date of the contract shall be the date the "license to operate" is issued, instead of LTO.**
2. **Revise as needed and resubmit.**

Thank you,

COMAL COUNTY TEXAS

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

VOID

SEPTIC PUMPING & MAINTENANCE By Cody Young LLC

To: KYLE SCOTT ALON HAWKINS & KATHY LAWSON

WHISPERING HILLS, LOT 36

Site: 12024 CANTERBURY ROAD, SPRING BRANCH, TX 78070

County: COMAL

Installer: GORDON PAUL SWOYER

Agency: COMAL COUNTY ENGINEERS OFFICE

Mfg./Brand: MAXX AIR M-600

Level 1 Contract

This service contract for the On-Site Sewage-facility, (OSSF), located at the site stated above. OSSF is to be inspected and serviced at regular intervals under a licensed provider. Special emergency service is to be provided within 48 hours of notification by the homeowner or the owner's agent. The initial contract is for (2) years from the date of final septic system inspection. Renewals shall be for a period of 2 years at the current rate and remain in effect for the specified dates listed. From [illegible] until 2 YEARS FROM LTO

VOID

Contract price $700

Service Program Includes:

1. Regular site inspection at 4-month intervals for residential septic system.
2. OSSF maintenance: check aerator components for proper operation, control panel, effluent pump, spray head/drip nozzle. Check Proprietary specific components. Check pumps, check spray heads, check, and clean any Filters, check bull run valves and any other valves. Flush drain field if needed.
3. Visual inspection of control panel, (when accessible).
4. Labor expenses required at the home to maintain, repair, or remove any part of the control center or mechanical aerator to be returned for factory repair.
5. Labor expenses required at the home to service, repair, or install any part of the control panel or aerator returned from factory.
6. All maintenance reports will be emailed to the permitting authority & customer within 14 days of inspection.

VOID

Client Responsibilities:

1. Special service calls after the (at the 4-month intervals) stated in item #1.
2. BODs or TSS grab samples, (if needed).
3. Freight costs to and from factory, for component repair.
4. Costs for replacing damaged or missing parts and repairing any equipment not under any specified warranty.
5. Pumping out any or all the OSSF by a licensed waste hauler.
6. The Homeowner is responsible for maintaining the chlorinator and providing proper chlorine supply if required.
7. Securing pets so that maintenance functions can be performed safely for the technician, and the pet. If pets are present in the yard, and the owner is not on site to secure the animals, it is necessary to cancel the maintenance.
8. Securing pets so that maintenance functions can be performed safely for the technician, and the pet. If pets are present in the yard, and the owner is not on site to secure the animals, and it is necessary to cancel the maintenance, there will be a $75 trip charge.
9. Insuring access to the property, always to the maintenance provider. (Gates, chains with locks, codes, etc.)

Miscellaneous Provisions

1. This contract can be terminated by either party in writing within 30 days' notice. Contracts that are terminated will include notification in writing to the Authority having Jurisdiction, the Manufacturer of the system, and the other party.

VOID

Homeowner: _____ Date: 3/31/25

Phone: 909-702-0955 Email: flowstonerr@gmail.com

Maintenance Provider: Milo Young, License #MP0002338

_____

Septic Pumping & Maintenance by Cody Young

911 RR3404

Kingsland, TX 78639

(325)248-8740

FILED BY
ALAMO TITLE
gf# 4000142400278

202406021610 07/19/2024 11:23:47 AM 1/2

GENERAL WARRANTY DEED

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.

THE STATE OF TEXAS §

KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF COMAL §

THAT **MARIA AMALIA GARCIA TRUSTEE OF MARIA AMALIA GARCIA REVOCABLE TRUST**, hereinafter referred to as "Grantor" (whether one or more), for and in consideration of the sum of TEN AND NO/100 DOLLARS ($10.00) and other good and valuable consideration to the undersigned in hand paid by **KYLE SCOTT ALON HAWKINS AND KATHY LAWSON**, whose address is 3402 Flowstone Ln. Round Rock, TX 78681, hereinafter referred to as "Grantee" (whether one or more), the receipt and sufficiency of which is hereby acknowledged and confessed; have GRANTED, SOLD AND CONVEYED, and by these presents do GRANT, SELL AND CONVEY, unto said Grantee, the following described real property owned by Grantor, to-wit:

Lot 36, WHISPERING HILLS, COMAL County, Texas, according to the map or plat thereof recorded in Volume 4, Pages 20-27, Map and Plat Records, COMAL County, Texas.

TO HAVE AND TO HOLD the above described premises, together with all and singular the rights and appurtenances thereto in anywise belonging, unto the said Grantee, Grantee's heirs and assigns forever; and Grantor does hereby bind Grantor, Grantor's heirs and assigns, to WARRANT AND FOREVER DEFEND, all and singular the said premises unto the said Grantee, Grantee's heirs and assigns, against every person whomsoever lawfully claiming, or to claim the same, or any part thereof.

All taxes assessed against the Property for the current year have been prorated between the parties, and Grantee hereby assumes and agrees to pay such taxes in full.

This Deed is executed, delivered and accepted subject to all and singular any liens securing the payment of any debt created or assumed in connection herewith if such liens are described herein, ad valorem taxes for the current and all subsequent years, subsequent assessments for prior years due to changes in land usage or ownership, zoning ordinances, utility district assessments and standby fees, if any, restrictions, easements, covenants, and conditions applicable to and enforceable against the above described property, mineral and royalty reservations, maintenance fund liens, and any title or rights asserted by anyone, including, but not limited to, persons, corporations, governments or other entities to tidelands, or lands comprising the shores or beds of navigable or perennial rivers and streams, lakes, bays, gulfs or oceans, or to any land extending from the line of the harbor or bulkhead lines as established or changed by any government or to filled-in lands, or artificial islands, or to riparian rights or other statutory water rights, or the rights or interests of the State of Texas or the public generally in the area extending from the line of mean low tide to the line of vegetation or the right of access thereto, or right of easement along and across the same, if any, applicable to and enforceable against the above described property as shown by the records of the County Clerk of the County in which said real property is located.

When this Deed is executed by more than one person or when the Grantee is more than one person, the instrument shall read as though pertinent verbs, nouns and pronouns were changed correspondingly, and when executed by or to a legal entity other than a natural person, the words "heirs and assigns" shall be construed to mean "successors and assigns," Reference to any gender shall include either gender and, in the case of a legal entity other than a natural person, shall include the neuter gender, all as the case may be.

DATED the 19th day of July, 2024.

MARIA AMALIA GARCIA TRUSTEE OF MARIA AMALIA GARCIA REVOCABLE TRUST

THE STATE OF TX §

COUNTY OF Comal §

This instrument was acknowledged before me on the 19 day of July, 2024, by MARIA AMALIA GARCIA TRUSTEE OF MARIA AMALIA GARCIA REVOCABLE TRUST.

KIMBERLY J. FREEMAN
My Notary ID # 124893927
Expires April 14, 2028

Notary Public

Grantee's Mailing Address and Return Address:
KYLE SCOTT ALON HAWKINS
KATHY LAWSON

Prepared by:
The Laird Law Firm, P.C.
1512 Heights Blvd.
Houston, Texas 77008

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
07/19/2024 11:23:47 AM
MARY 2 Page(s)
202406021610

Bobbie Koepp

RECEIVED
By Kathy Griffin at 8:21 am, May 06, 2025

COMAL COUNTY
ENGINEER'S OFFICE

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

		118619
Date Received	*Initials*	*Permit Number*

Instructions:

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

OSSF Permit

☒ Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate

☒ Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer

☒ Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist of a scaled design and all system specifications.

☒ Required Permit Fee - See Attached Fee Schedule

☒ Copy of Recorded Deed

☒ Surface Application/Aerobic Treatment System

- ☒ Recorded Certification of OSSF Requiring Maintenance/Affidavit to the Public
- ☒ Signed Maintenance Contract with Effective Date as Issuance of License to Operate

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

Signature of Applicant

05/02/2025

Date

___ COMPLETE APPLICATION

Check No. _____ Receipt No._____

___ INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)

Revised: September 2019