

Comal County Environmental Health

OSSF Inspection Sheet

Installer Name: _____

OSSF Installer #: _____

1st Inspection Date: _____

2nd Inspection Date: _____

3rd Inspection Date: _____

Inspector Name: _____

Inspector Name: _____

Inspector Name: _____

Permit#:

Address:

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

Inspector Notes:

**Comal County Environmental Health
OSSF Inspection Sheet**

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

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

**Comal County Environmental Health
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No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart		285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3)(B) 285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)				
33	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.		285.32(c)(1)				
34	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions						
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
37	PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions						
38	PUMP TANK Secondary restraint system provided						
39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

**Comal County Environmental Health
OSSF Inspection Sheet**

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



COMAL COUNTY

ENGINEER'S OFFICE

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

Permit Number: 118773
Issued This Date: 07/21/2025
This permit is hereby given to: Wildcat Lending Fund One LP

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

109 UPPER RIVER PLACE
SPRING BRANCH, TX 78070

Subdivision: Mystic Shores
Unit: 21
Lot: 2270
Block: -
Acreage: 1.0300

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

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

Date _____

Permit Number _____

REVISED
11:56 am, Jul 21, 2025

1. APPLICANT / AGENT INFORMATION

Owner Name wildcat Lending Fund One LP
Mailing Address 4800 Dexter Dr
City, State, Zip Plano, TX 75093
Phone # _____
Email _____

Agent Name Doug Dowlearn R.S.
Agent Address 703 Oak Drive
City, State, Zip Blanco, TX 78606
Phone # 210-240-2101
Email txseptic@gmail.com

2. LOCATION

Subdivision Name Mystic Shores Unit 21 Lot 2270 Block _____
Survey Name / Abstract Number _____ Acreage 1.03
Address 109 Upper River Pl City Spring Branch State TX Zip 78133

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 2879

☐ 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: \$ 0 (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

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.

Gary Stedman
Signature of Owner

6/20/2025

Date

MAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH * * *
APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN
ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE

Planning Materials & Site Evaluation as Required Completed By _____

System Description _____

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

Tank Size(s) (Gallons) _____ Absorption/Application Area (Sq Ft) _____

Gallons Per Day (As Per TCEQ Table III) _____

(Sites generating more than 5000 gallons per day are required to obtain a permit through TCEQ.)

Is the property located over the Edwards Recharge Zone? ☐ Yes ☐ No

(If yes, the planning materials must be completed by a Registered Sanitarian (R.S.) or Professional Engineer (P.E.))

Is there an existing TCEQ approved WPAP for the property? ☐ Yes ☐ No

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

If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP? ☐ Yes ☐ No

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

Is the property located over the Edwards Contributing Zone? ☐ Yes ☐ No

Is there an existing TCEQ approval CZP for the property? ☐ Yes ☐ No

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

If there is no existing CZP, does the proposed development activity require a TCEQ approved CZP? ☐ Yes ☐ No

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

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

If yes, indicate the city: _____

By signing this application, I certify that:

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



Signature of Designer

Date

Page 2 of 2

1/CB



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COUNTY OF COMAL
STATE OF TEXAS

AFFIDAVIT TO THE PUBLIC

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

According to Texas Commission on Environmental Quality (TCEQ) 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, give the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety Code, requires owners to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

II
An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code § 285.91 (12) will be installed on the property described as (insert legal description):

MYSTIC SHORES 21, LOT 2270

The property is owned by (Insert owner's full name):

ATR FINANCIAL INTERESTS LLC

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 OSSF may be obtained from **Comal County Engineer's Office**.

WITNESS BY HAND(S) ON THIS 10th DAY OF APRIL

Owner(s) signature(s)

ANDRES MOLINA
(PRINTED NAME)

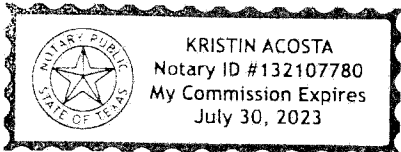
ANALISA
MEMBER

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 10 DAY OF April, 2022

Notary Public, State of Texas

Notary's Printed Name: Kristin Acosta

My Commission Expires: 07/30/2023



Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
04/11/2022 10:09:06 AM
LAURA 1 Page(s)
202206016716



Bobbie Koepf

Maintenance Service Provider
15188 FM 306
Canyon Lake, TX 78133
Office (830)964-2365



<u>SERVICE ADDRESS</u>	<u>Installer</u>	<u>TERM</u>
109 Upper River Pl	JR Avila	2 year

Routine Maintenance and Inspection Agreement

This Work for Hire Agreement (hereinafter referred to as this “Agreement”) is entered into by and between ; (referred to as “Client”) and Aerobic Services of South Texas (Thomas W. Hampton MP349) (hereinafter referred to as “Contractor”) are located at 15188 FM 306 Canyon Lake, Texas 78133 (830) 964-2365. By this Agreement, the Contractor agrees to render professional service, as described herein, and the Client agrees to fulfill the terms of this Agreement as described herein. This contract will provide for all required inspections, testing, and service for your Aerobic Treatment System. The policy will include the following:

1. 3 inspections a year (at least once every 4 months), this includes inspections of the entire aerobic system, adjustment, and servicing of the mechanical, electrical, and other applicable parts to ensure proper function. This includes inspecting the control panel, air pumps, air filters, and diffuser operation. Any alarm situation affecting the proper function of the Aerobic process will be addressed within a 48-hour time frame. Repair work on non-warranty parts will include price for parts & labor. The prices will be quoted before work is performed.
2. An effluent quality inspection consisting of a visual check for color, turbidity, scum overflow, and examination for odors. A test for chlorine residual and pH will be taken and reported as necessary.
3. If any improper operation is observed, that cannot be corrected during the service visit, you will be notified immediately in writing of the conditions and estimated date of correction.
4. If the system is a spray field application the Property Owner will be responsible for the chlorine. The chlorine must be filled before or during the service visit. Aerobic systems with a drip field do not require chlorine.
5. Any additional visits, inspections or sample collection required by specific Municipalities, Water/River Authorities, and County Agencies the TCEQ, or any other authorized regulatory agency in your jurisdiction will be covered by this policy. BOD and TSS testing is covered by this contract.

The Property Owner Manual must be strictly followed or warranties are subject to invalidation. Pumping of sludge build-up is not covered by this policy and will result in additional charges.

ACCESS BY CONTRACTOR

The Contractor or anyone authorized by the Contractor may enter the property at reasonable times without prior notice for the above-described Services. The contractor may access the System components including the tanks through excavation for evaluations if necessary. Soil is to be replaced with the excavated material as best as possible.

Termination of Agreement

Either party may terminate this agreement within ten days with a written notice in the event of substantial failure to perform under its terms by the other party without fault of the terminating party. If this Agreement is so terminated, the Contractor will immediately notify the appropriate health authority of the termination.

Limit of Liability

In no event shall the Contractor be liable for indirect, consequential, incidental, or punitive damages, whether in contract tort or any other theory. In no event shall the Contractor's liability for direct damages exceed the price for the services described in this Agreement.

Dispute Resolution

If a dispute between the Client and the Contractor arises that cannot be settled in good faith negotiations then the parties shall choose a mutually acceptable mediator and shall share the cost of the mediation services equally.

Entire Agreement

This Agreement contains the entire agreement of the parties, and there are no other promises or conditions in any other agreement either oral or written.

Severability

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

Property Owner

Wildcat Lending Fund One

Name

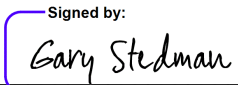
Email

johnnie@timelessluxuryhomes.com

Service Address

109 Upper River Pl, Spring Branch 78070

Phone

Signed by:

CCDE10FAF0DE4A9...
SIGNATURE

EFFECTIVE DATE _____

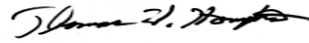
EXPIRED DATE _____

SERVICE PROVIDER

Aerobic Services of South Texas LLC.

15188 FM 306 Canyon Lake, TX 786133

(830) 964-2365



Signature of Service Provider and License #
[Thomas Hampton, OS0024597 / MP0000349]



**The effective date of this initial maintenance contract shall be the date the license to operate is issued.*

OSSF SOIL EVALUATION REPORT INFORMATION

Date: 4/1/2022

Applicant Information:

Name: Wildcat Lending Fund One LP

Address: 17803 La Cantera Terrace APT 6403

City, State & Zip Code: San Antonio, TX 78265

Phone:

Email:

Site Evaluator Information:

Name: Douglas R. Dowlearn

Company: D.A.D. Services, Inc.

Address: 703 Oak Drive

City, State & Zip: Blanco, TX 78606

Phone: (210)240-2101 **Fax:** (866)260-7687

Email: txseptic@gmail.com

Subdivision: Mystic Shores **Lot:** 2270 **Unit:** 21

Street/Road Address: 109 Upper River

City: Spring Branch **Zip:** 78070

Additional Info: Comal County

Installer Information:

Name:

Company:

Address:

City, State & Zip:

Phone:

Depth	Texture Class	Soil Texture	Structure (For Class III – blocky, platy or massive)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observation
Soil Boring #1 60"	III	0-12" Clay Loam 12"+ Limestone	Blocky	<30% Gravel	12"+ Limestone	None
Soil Boring #2 60"		Same as above				

DESIGN SPECIFICATIONS

Application Rate (RA): 0.064

OSSF is designed for: 4 BR 3310 Sq. Ft.

300 gallons per day

An aerobic treatment/spray disposal system is to be utilized based on the site evaluation.

4688 sq. ft. disposal area required

600 gallon/day aerobic tank required

Calculations: Absorption Area: $Q/RA = 300/0.064 = 4688$ Sq. Ft.

FEATURES OF SITE AREA

Presence of 100-year flood zone: NO

Existing or proposed water well in nearby area: NO

Presence of adjacent ponds, streams, water impoundments: NO

Presence of upper water shed: NO

Organized sewage service available to lot: NO

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability. The site evaluation and OSSF design are subject to approval by the TCEQ or the local authorized agent. The planning materials and the OSSF design should not be considered final until a permit to construct has been issued.

Site Evaluator:

NAME: Douglas R. Dowlearn, R.S.

Signature:



License No. OS9902 – Exp. 6/30/2023

TDH: #2432 – Exp. 2/28/2023

D.A.D SERVICES, INC.
DOUG DOWLEARN
703 OAK DRIVE, BLANCO, TX 78606
Designed for:
Wildcat Lending Fund One LP

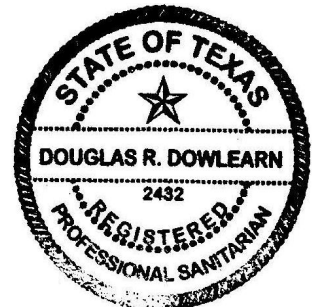
The installation site is at lot 2270 of the Mystic Shores 21 subdivision in Comal County, TX. The proposed OSSF will treat the wastewater from a 4 bedroom(3310 sf) residence. The proposed method of wastewater treatment is aerobic treatment with spray irrigation. This method was chosen because of unsuitable soil conditions.

PROPOSED SYSTEM:

A 4" PVC pipe will discharge from the residence to a pre-treatment tank, which flows into a 600 gpd aerobic treatment plant. The aerobic tank effluent flows to a 768 gallon storage/pump tank containing a liquid chlorinator and a single 20 gpm submersible pump. Distribution is through 3 K-Rain Gear Driven pop-up sprinklers, with low angle (13 degrees) spray nozzles spraying a radius of 28 feet at 40 psi. One sprinkler will spray 360 degrees of arc; Two sprinklers will spray 180 degrees of arc. An audio and visual alarm monitoring both high water and aerator failure will be placed in a noticeable location.

DESIGN SPECIFICATIONS:

Daily Waste Flow: 300 gpd
Application rate: 0.064
Application area required: $300/.064 = 4688$ ft. sq.
Application area utilized: 4926 sq. ft.
Pump tank reserve capacity: 100 gal minimum



Douglas R. Dowlearn

SYSTEM COMPONENTS:

SCH 40 PVC sewer line
1" purple PVC supply line
600 gpd aerobic treatment plant with manual controls
Liquid chlorinator
Pre-treatment tank and 768 gallon pump tank
3 K-Rain Gear Driven pop-up sprinklers

LANDSCAPING:

The native vegetation in the distribution area should consist of low level shrubs, plains grass, bluestem or bermuda. The entire area of the spray must maintain a ground cover after construction. In the event the natural cover is disturbed, a suitable ground cover must be installed on all excavated areas.

4:10 pm, Jul 24, 2025



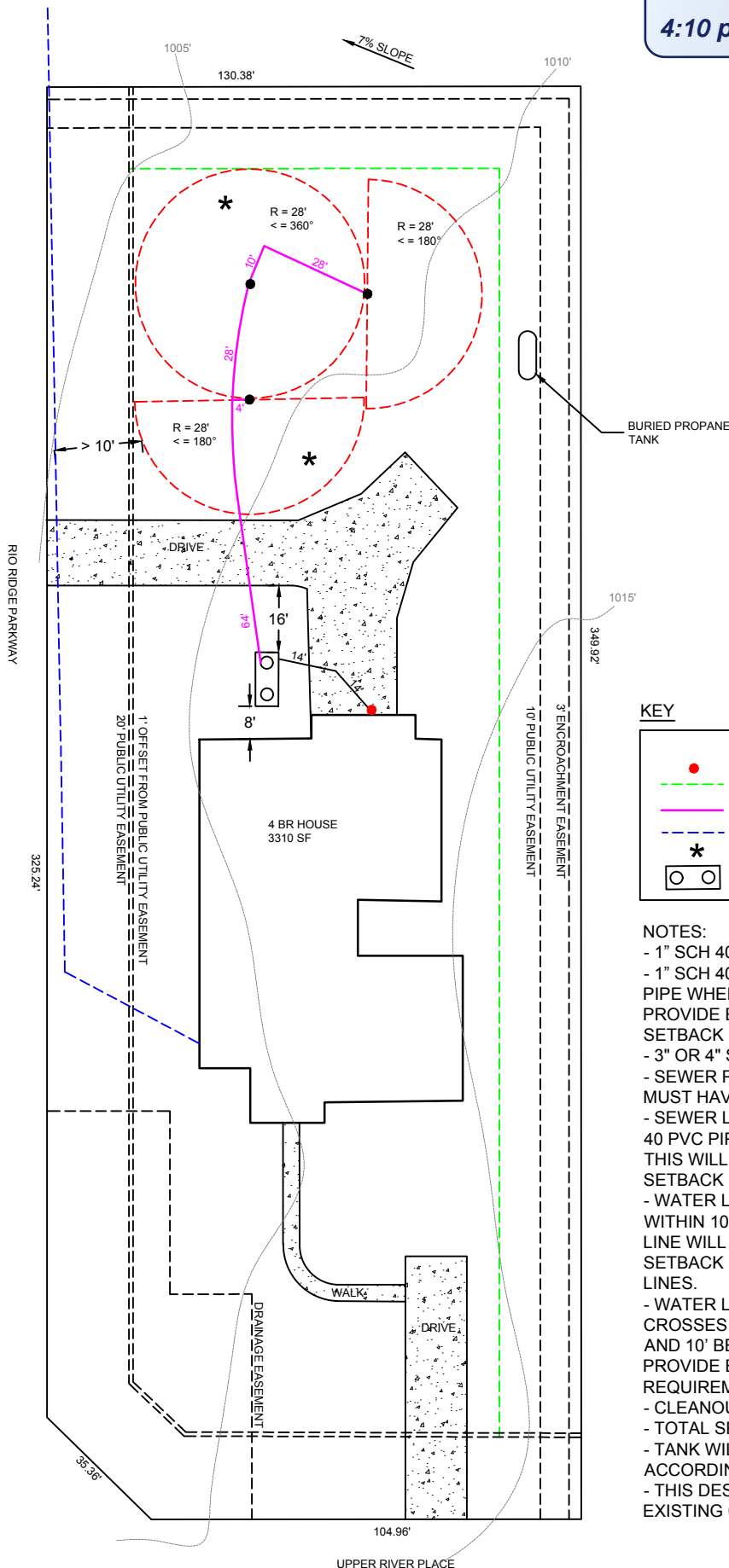
SCALE 1"= 40'

KEY

- 2 WAY CLEANOUT WITH A METAL COVER
- 20' OSSF SPRAY SETBACK
- 1" SCH 40 PVC PURPLE PIPE
- PROPOSED WATER LINE
- TEST HOLE
- 800 GPD AEROBIC TREATMENT UNIT

NOTES:

- 1" SCH 40 PURPLE PIPE TO ALL SPRAY HEADS.
- 1" SCH 40 PURPLE PIPE WILL BE SLEEVED IN SCH 40 PVC PIPE WHERE IT CROSSES DRIVE AND 5' BEYOND. THIS WILL PROVIDE EQUIVALENT PROTECTION FOR THE OSSF SETBACK REQUIREMENTS OF TAC 285.
- 3" OR 4" SCH 40 PVC PIPE FROM STRUCTURE TO TANK.
- SEWER PIPE CONNECTING THE STRUCTURE TO THE TANK MUST HAVE AT MINIMUM 1/8" FALL PER 1'.
- SEWER LINE WILL BE SCH 80 PVC OR SLEEVED WITH SCH 40 PVC PIPE WHERE IT CROSSES DRIVE AND 5' BEYOND. THIS WILL PROVIDE EQUIVALENT PROTECTION FOR THE SETBACK REQUIREMENTS OF TAC 285.
- WATER LINE WILL BE SLEEVED IN SCH 40 PIPE WHERE IT IS WITHIN 10' OF THE SEPTIC TANK. SLEEVEING THE WATER LINE WILL PROVIDE EQUIVALENT PROTECTION TO THE SETBACK REQUIREMENTS IN TAC 290 CONCERNING WATER LINES.
- WATER LINE WILL BE SLEEVED IN SCH 40 PIPE WHERE IT CROSSES THE 1" SCH 40 PURPLE PIPE AND SEWER LINE AND 10' BEYOND. SLEEVEING THE WATER LINE WILL PROVIDE EQUIVALENT PROTECTION TO THE SETBACK REQUIREMENTS IN TAC 290 CONCERNING WATER LINES.
- CLEANOUT WITHIN 3' OF STRUCTURE.
- TOTAL SPRAY AREA = 4926 SF.
- TANK WILL BE WATER TIGHT AND MANUFACTURED ACCORDING TO ASTM DESIGNATION: C 1227.
- THIS DESIGN MEETS THE OSSF REQUIREMENTS OF THE EXISTING C2P.

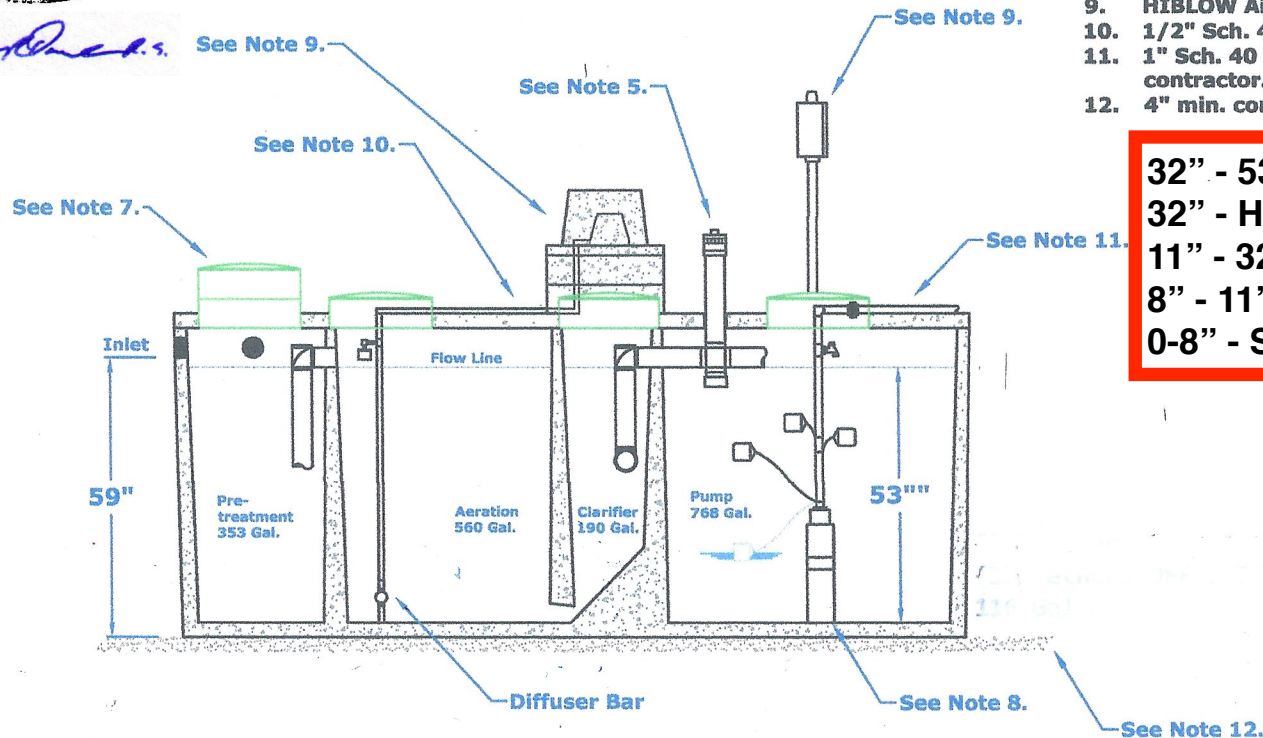


Assembly Details

OSSF



14.49 Gal per Inch



GENERAL NOTES:

1. Plant structure material to be precast concrete and steel.
2. Maximum burial depth is 30" from slab top to grade.
3. Weight = 14,900 lbs.
4. Treatment capacity is 600 GPD. Pump compartment set-up for a 360 GPD Flow Rate (4 bedroom, < 4,000 sq/ft living area). Please specify for additional set-up requirements. BOD Loading = 1.62 lbs. per day.
5. Standard tablet chlorinator or Optional Liquid chlorinator. NSF approved chlorinators (tablet & liquid) available.
6. Bio-Robix B-550 Control Center w/ Timer for night spray application. Optional Micro Dose (min/sec) timer available for drip applications. Electrical Requirement to be 115 Volts, 60 Hz, Single Phase, 30 AMP, Grounded Receptacle.
7. 20" Ø access riser w/ lid (Typical 4). Optional extension risers available.
8. 20 GPM 1/2 HP, high head effluent pump.
9. HIBLOW 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.
12. 4" min. compacted sand or gravel pad by Contractor

32" - 53" - Reserve - 304 Gal
32" - High Water Alarm Float
11" - 32" - Working Level - 304 Gal
8" - 11" - On/Off Tether - 44 Gal
0-8" - Sump - 116 Gal

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

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

NuWater B-550 (600 GPD)
Aerobic Treatment Plant (Assembled)

Model: B-550-PC-400PT

March, 2012 - Rev 1
 By: A.S.

Scale:
 * All Dimensions subject to allowable specification tolerances.

Dwg. #: ADV-B550-3

Advantage
 Wastewater Solutions Inc.

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

From: [Ritzen,Brenda](#)
To: ["Lauren Dowlearn"; JR](#)
Subject: RE: 118773.pdf
Date: Thursday, July 24, 2025 4:11:00 PM
Attachments: [image001.png](#)

Lauren,

The permit file has been updated.

Thank you,



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

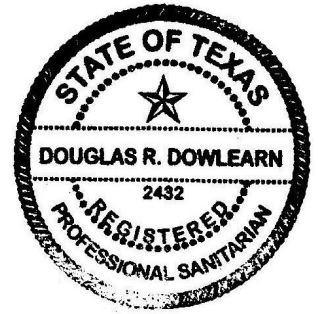
From: Lauren Dowlearn <txseptic@gmail.com>
Sent: Thursday, July 24, 2025 1:50 PM
To: Ritzen,Brenda <rabbjr@co.comal.tx.us>; JR <jravila@gvvc.com>
Subject: Re: 118773.pdf

This email originated from outside of the organization.
Do not click links or open attachments unless you recognize the sender and know the content is safe.
- Comal IT

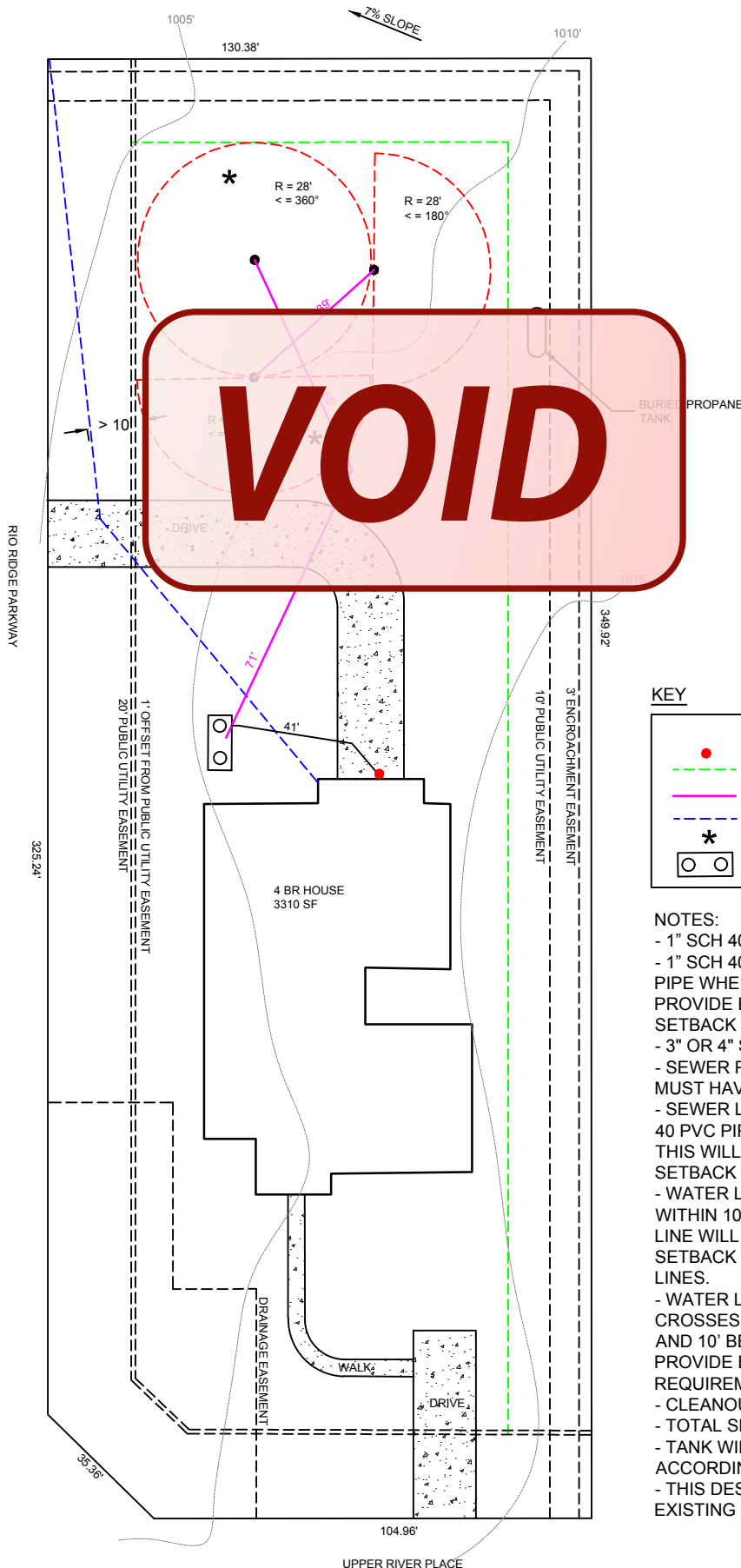
Good afternoon, please see attached as built.

Thank you,
Lauren Dowlearn
210-878-8100
D.A.D Services, Inc.
www.TexasSuperSeptic.com

On Mon, Jul 21, 2025 at 12:05 PM Ritzen,Brenda <rabbjr@co.comal.tx.us> wrote:



Douglas R. Dowlearn



Wildcat Lending Fund One LP
MYSTIC SHORES 21, LOT 2270
COMAL COUNTY/1.03 ACRES



SCALE 1"= 40'

KEY

	- 2 WAY CLEANOUT WITH A METAL COVER
	- 20' OSSF SPRAY SETBACK
	- 1" SCH 40 PVC PURPLE PIPE
	- PROPOSED WATER LINE
	- TEST HOLE
	- 800 GPD AEROBIC TREATMENT UNIT

NOTES:

- 1" SCH 40 PURPLE PIPE TO ALL SPRAY HEADS.
- 1" SCH 40 PURPLE PIPE WILL BE SLEEVED IN SCH 40 PVC PIPE WHERE IT CROSSES DRIVE AND 5' BEYOND. THIS WILL PROVIDE EQUIVALENT PROTECTION FOR THE OSSF SETBACK REQUIREMENTS OF TAC 285.
- 3" OR 4" SCH 40 PVC PIPE FROM STRUCTURE TO TANK.
- SEWER PIPE CONNECTING THE STRUCTURE TO THE TANK MUST HAVE AT MINIMUM 1/8" FALL PER 1'.
- SEWER LINE WILL BE SCH 80 PVC OR SLEEVED WITH SCH 40 PVC PIPE WHERE IT CROSSES DRIVE AND 5' BEYOND. THIS WILL PROVIDE EQUIVALENT PROTECTION FOR THE SETBACK REQUIREMENTS OF TAC 285.
- WATER LINE WILL BE SLEEVED IN SCH 40 PIPE WHERE IT IS WITHIN 10' OF THE SEPTIC TANK. SLEEVE THE WATER LINE WILL PROVIDE EQUIVALENT PROTECTION TO THE SETBACK REQUIREMENTS IN TAC 290 CONCERNING WATER LINES.
- WATER LINE WILL BE SLEEVED IN SCH 40 PIPE WHERE IT CROSSES THE 1" SCH 40 PURPLE PIPE AND SEWER LINE AND 10' BEYOND. SLEEVE THE WATER LINE WILL PROVIDE EQUIVALENT PROTECTION TO THE SETBACK REQUIREMENTS IN TAC 290 CONCERNING WATER LINES.
- CLEANOUT WITHIN 3' OF STRUCTURE.
- TOTAL SPRAY AREA = 4926 SF.
- TANK WILL BE WATER TIGHT AND MANUFACTURED ACCORDING TO ASTM DESIGNATION: C 1227.
- THIS DESIGN MEETS THE OSSF REQUIREMENTS OF THE EXISTING CZP.

From: [Ritzen,Brenda](#)
To: [Lauren Dowlearn](#)
Subject: Permit 118773
Date: Tuesday, July 15, 2025 5:03:00 PM
Attachments: [image001.png](#)

**Re: Wildcat Lending Fund One LP
Mystic Shores Unit 21 Lot 2270
Application for Permit for Authorization to Construct an On-Site
Sewage Facility (OSSF)**

Lauren :

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

- ✓ Add owner address information to the permit application.
- ✗ Maintain required 20 ft. setback from the edge of the spray areas to
the property lines.
- 3. 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

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."

SUBSTITUTE TRUSTEE'S DEED

Date: August 7, 2024

NOTE: Real Estate Note described as follows:

Date: December 29, 2023
Maker: Wildcat Lending Fund One, LP
Payee: ATR Financial Interests LLC
Original Principal Amount: \$618,000.00

DEED OF TRUST:

Date: December 29, 2023
Grantor: ATR Financial Interests LLC
Trustee: Michael E. Gillman
Beneficiary: Wildcat Lending Fund One, LP
Recorded: Doc. No. 202406000371 in the real property records of Comal County, Texas

LENDER: Wildcat Lending Fund One, LP

BORROWER: ATR Financial Interests LLC

PROPERTY: The real property described as follows:

Lot 2270 of MYSTIC SHORES UNIT TWENTY-ONE, a subdivision in Comal County, Texas, according to the plat recorded in Document No. 200706015710, of the Map and Plat Records of Comal County, Texas.

Together with all improvements, easements, personal property, intangibles, rents, revenues, contracts, and rights appurtenant to the real property, as described in the Deed of Trust.

SUBSTITUTE TRUSTEE: Cassie Martin

NOTICE OF SUBSTITUTE TRUSTEE'S SALE:

The Notice of Substitute Trustee's Sale dated July 12, 2024, filed with the County Clerk of Comal County, Texas, in compliance with Texas Property Code section 51.002 and with the Deed of Trust.

DATE/TIME AND PLACE OF SUBSTITUTE TRUSTEE'S SALE OF PROPERTY:

Date of Sale: August 6, 2024

Time of Sale: 10:07 o'clock A.M.

Place of Sale: Northeast porch of the historic Comal County Courthouse, 100 Main Plaza, New Braunfels, TX 78130, or if the preceding area is no longer the designated area, at the area most recently designated by the County Commissioner's Court.

Grantee: Wildcat Lending Fund One, LP

Grantee's Mailing Address: 4800 Dexter Drive
Plano, Texas 75093

Amount of Sale: Six Hundred Thousand and NO/100TH Dollars (\$600,000.00)

RECITALS

Grantor, owner of fee-simple interest in the Property, conveyed the Property to Trustee, in trust, to secure payment of the Note. Lender is the owner of the indebtedness evidenced by the Note, and the holder of the Note and the Deed of Trust lien under Texas Property Code section 51.002.

Default has occurred in the payment of the Note and in the performance of the obligations under the deed of Trust that secures the Note. Lender has appointed Substitute Trustee and requested that Substitute Trustee enforce the trust, as evidenced by the Appointment of Substitute Trustee filed with the County clerk in the county where the Property is located.

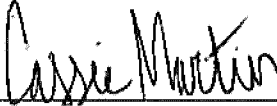
Substitute Trustee, either personally or by agent, served all notices required by statute in compliance with Texas Property Code section 51.002 and with the Deed of Trust to proceed with the sale.

Copies of the Notice of Substitute Trustee's Sale stating the time, place and terms of sale of the Property were posted and filed according to the requirements of the Deed of Trust and Texas Property Code section 51.002.

Lender and Substitute Trustee have satisfied all requirements of the Deed of Trust and applicable law for enforcement of the power of sale contained in the Deed of Trust and for the sale of the Property, and Substitute Trustee sold the Property ("Sale") to Grantee, who was the highest bidder at the public auction, for the Substitute Trustee's Sale Bid Amount.

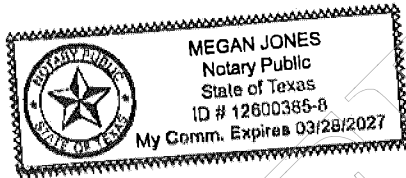
Therefore, I, as Substitute Trustee, by the authority conferred by Lender and by the Deed of Trust, for the consideration of the Substitute Trustee's Sale Bid Amount paid by Grantee, do hereby grant, sell, and convey the Property, together with all rights and appurtenances attached to it, to have and to hold, to Grantee and Grantee's heirs, executors, administrators, successors, or assigns forever. Substitute Trustee binds Grantor and Grantor's heirs, executors, administrators,

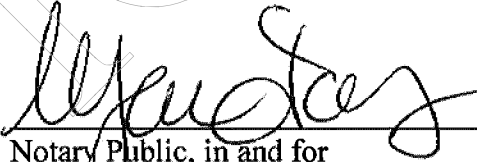
successors, and assigns to warrant and forever defend the Property against any person lawfully claiming or to claim the Property or any part of it, subject to any permitted exceptions to title described in the Deed of Trust. Except as expressly provided in this deed, Substitute Trustee has not made and does not make any covenants, representations, or warranties concerning the Property. The Property is sold and conveyed AS IS, WHERE IS, AND WITH ALL FAULTS.


CASSIE MARTIN,
Substitute Trustee

THE STATE OF TEXAS §
COUNTY OF Comal §

This instrument was acknowledged before me by Cassie Martin, Substitute Trustee on the
^{12th}
7th day of August 2024.




Notary Public, in and for
the State of Texas

**AFTER RECORDING,
PLEASE RETURN ORIGINAL TO:**

Dortch Lindstrom Livingston Law Group
2613 Dallas Parkway, Suite 220
Plano, Texas 75093

**Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
09/06/2024 04:04:36 PM
TERRI 3 Pages(s)
202406027077**





RECEIVED

By Kathy Griffin at 8:58 am, Jun 23, 2025



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

--	--

Date Received

Initials

118773

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

6/20/2025

Date

____ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

INCOMPLETE APPLICATION
____ (Missing Items Circled, Application Refused)