

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: 118863
Issued This Date: 08/07/2025
This permit is hereby given to: HAVEN BUILDERS, LLC

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

360 STARLING PASS
SPRING BRANCH, TX 78070

Subdivision: MYSTIC SHORES
Unit: 9
Lot: 1010
Block: 0
Acreage: 3.5700

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 July 18, 2024

Permit Number 118863

1. APPLICANT / AGENT INFORMATION

Owner Name HAVEN BUILDERS, LLC
Mailing Address 1341 PALMETTO PLACE
City, State, Zip SPRING BRANCH TEXAS 78070
Phone # 210-872-6445
Email araujo@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 MYSTIC SHORES Unit 9 Lot 1010 Block
Survey Name / Abstract Number Acreage
Address 360 STARLING PASS City SPRING BRANCH State TX Zip 78070

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

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

Number of Bedrooms 6

Indicate Sq Ft of Living Area 5212

☐ 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: \$ 1,000,000 (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 of Owner

Date

#118863

REVISED

10:42 am, Aug 13, 2025

MYSTIC SHORES, UNIT 9, LOT 1010

COMAL COUNTY
ENGINEER'S OFFICE**ON-SITE SEWAGE FACILITY APPLICATION**195 DAVID JONAS DR
NEW BRAUNFELS, TX 78132
(830) 608-2090
WWW.CCEO.ORGPlanning 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) FUJI CE7A 720 GPD & 1000 GAL PUMP Absorption/Application Area (Sq Ft) 6638Gallons Per Day (As Per TCEQ Table 111) 420

(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 ☐ NoIf 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 ☐ NoIs there an existing TCEQ approval CZP for the property? ☒ Yes ☐ No

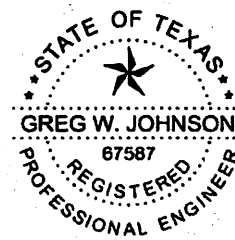
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP.)

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

Date

MAY 19, 2025

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)**:

9 UNIT/PHASE/SECTION _____ BLOCK 1010 LOT _____ MYSTIC SHORES _____ SUBDIVISION

IF NOT IN SUBDIVISION: _____ ACREAGE _____ SURVEY

The property is owned by (insert owner's full name): HAVEN BUILDERS, 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 the OSSF can be obtained from the Comal County Engineer's Office.

WITNESS BY HAND(S) ON THIS 9 DAY OF JULY, 2024

[Signature]
Owner(s) signature(s)

JORGE AROUJO - MANAGER

Owner (s) Printed name (s)

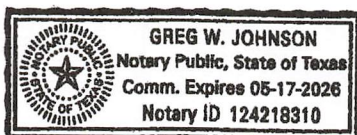
JORGE AROUJO

JULY

, 20 24

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 9 DAY OF

[Signature]
Notary Public Signature



**Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
07/16/2025 09:19:21 AM
PRISCILLA 1 Pages(s)
202506022105**



Bobbie Koepp



By Cody Young LLC

To: Haven Builders, LLC
360 Starling Pass
Spring Branch Tx 78070
Site: Mystic Shores U9 Lot 1010
County: COMAL
Installer: GORDON PAUL SWOYER
Agency: COMAL (CCEO)
Mfg./Brand: Max Air M-800 Aerobic Treatment Plant

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 LTO until 2 YEARS FROM LTO

Contract price \$700

LICENSE TO OPERATE

LICENSE TO OPERATE

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 ball 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.

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: X  Date: JULY 9, 2024

Phone: 210-872-6445 Email: araujojo@yahoo.com

Maintenance Provider: Milo Young, License #MP0002338



Septic Pumping & Maintenance by Cody Young

911 RR3404

Kingsland, TX 78639

(325)248-8740

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

MAY 19, 2025

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

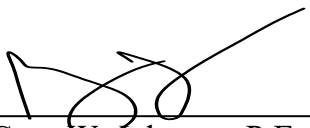
RE- SEPTIC DESIGN
360 STARLING PASS
MYSTIC SHORES, UNIT 9, LOT 1010
SPRING BRANCH, TX 78070
HAVEN BUILDERS, LLC

Brandon/Brenda,

The referenced property is located within the Edwards Aquifer Contributing Zone. This OSSF design will comply with requirements in the CZP.

Temporary erosion and sedimentation controls should be utilized as necessary prior to construction. If any sensitive feature (caves, solution cavities, sink holes, etc.) is discovered during construction, activities must be suspended immediately and the applicant or his agent must immediately notify the TCEQ Regional Office. After that operations can only proceed after the Executive Director approves required additional engineered impact plans.

Designed in accordance with Chapter 285, Subchapter D, §285.40, 285.41, & 285.42, Texas Commission on Environmental Quality (Effective December 29, 2016).


MAY 19, 2025

Greg W. Johnson, P.E. No. 67587 / F#2585
170 Hollow Oak
New Braunfels, Texas 78132 - 830/905-2778



**ON-SITE SEWERAGE FACILITY
SOIL EVALUATION REPORT INFORMATION**

Date Soil Survey Performed: July 22, 2024

Site Location: MYSTIC SHORES, UNIT 9, LOT 1010

Proposed Excavation Depth: N/A

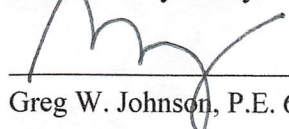
Requirements:

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

07/22/24
Date

OSSF SOIL EVALUATION REPORT INFORMATIONDate: August 13, 2025**Applicant Information:**

HAVEN BUILDERS, LLC, a Texas limited liability
 Name: _____ company
 Address: 1341 PALMETTO PLACE
 City: SPRING BRANCH State: TX
 Zip Code: 78070 Phone: 210-872-6445

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 1010 Unit 9 Blk _____ Subd. MYSTIC SHORES
 Street Address: 360 STARLING PASS
 City: SPRING BRANCH Zip Code: 78070
 Additional Info.: _____

Installer Information:

Name: GORDON PAUL SWOYER
 Company: PAUL SWOYER SEPTICS
 Address: 23011 FM 306
 City: CANYON LAKE State: TX
 Zip Code: 78133 Phone 830-935-4936

Topography: Slope within proposed disposal area: 10 %
 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: 6 Total sq. ft. living area 5212

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

Q = (6 +1)*75-(20%)= 420Trash Tank Size 397 Gal.TCEQ Approved Aerobic Plant Size 720 G.P.D.Req'd Application Area = Q/Ri = 420 / 0.064 = 6563 sq. ft.Application Area Utilized = 6638 sq. ft.Pump Requirement 9.3 Gpm @ 40 Psi (FRANKLIN 0.5 HP C1 series or equivalent)Dosing Cycle: _____ ON DEMAND or X TIMED TO DOSE IN PREDAWN HOURSPump Tank Size = 1000 Gal. VARIES Gal./inch.Reserve Requirement = 140 Gal. 1/3 day flow.

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

With Chlorinator

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

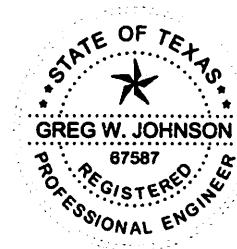
APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

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)

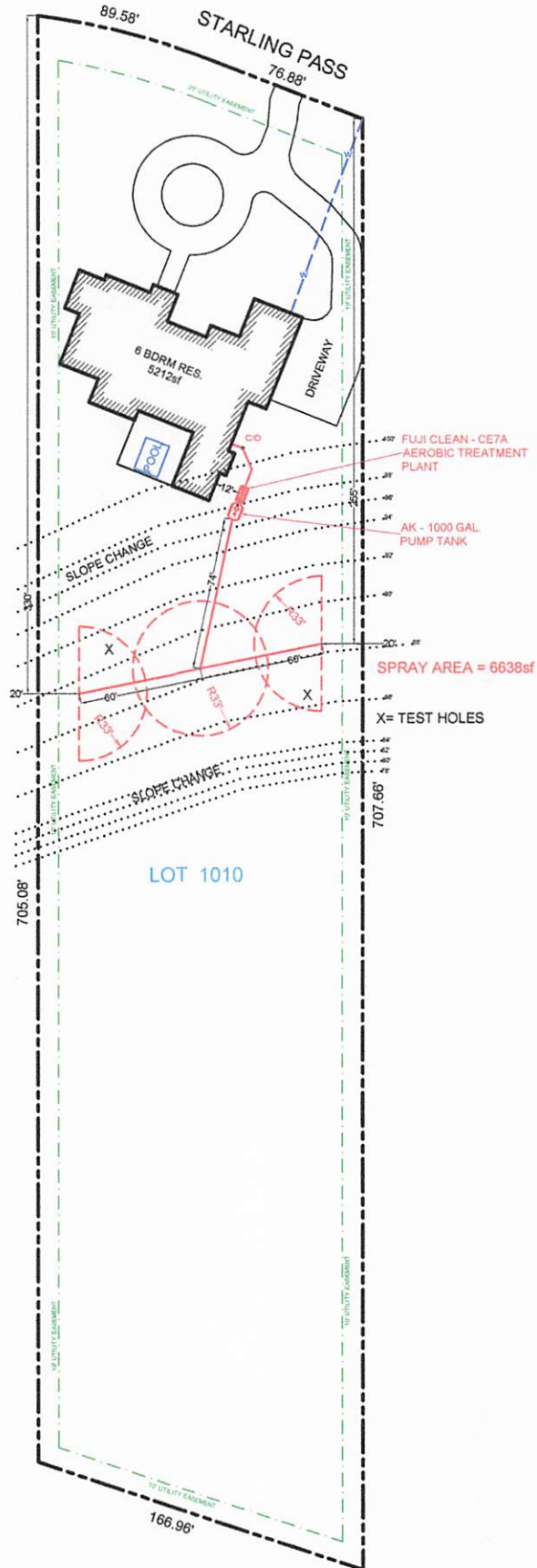

 GREG W. JOHNSON, P.E. F#002585 - S.E. 11561

08/13/25
 DATE



REVISED

10:43 am, Aug 13, 2025



OWNER: HAVEN BUILDERS, LLC.					DRAWN BY: EJS III	
STREET ADDRESS: 360 STARLING PASS						
LEGAL DESC: MYSTIC SHORES				UNIT/SECTION/PHASE: 9	BLOCK:	LOT: 1010
PREPARED BY: GREG W. JOHNSON, P.E. F#002585		SCALE: N.T.S.	DATE: 7/18/2024	3rd REVISION: 8/12/2025		

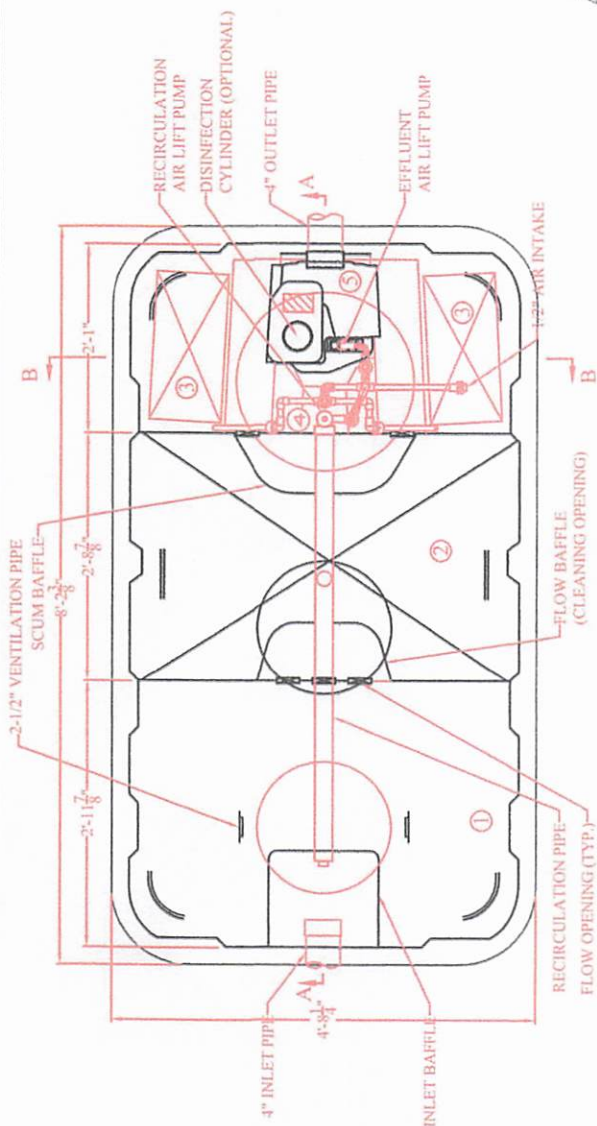
CHAMBER		Volume (gal)
①	Sedimentation Chamber	397
②	Anaerobic Filtration Chamber	396
③	Aerobic Contact Filtration Chamber	181
④	Storage Chamber	90
⑤	Disinfection Chamber	6
Total Volume		1069

SPECIFICATIONS			
Anaerobic Media	PP / PE	Filling Rate	32%
Board Type Aerobic Media	PVC / PP / PE	Filling Rate	17%
Aerobic Media	PP / PE	Filling Rate	55%
Blower	2.8 cfm		
Tank	FRP		
Piping	PVC / PP / PE		
Access Covers	Plastic / Cast Iron		
Disinfectant (Optional)	Chlorine Tablets		

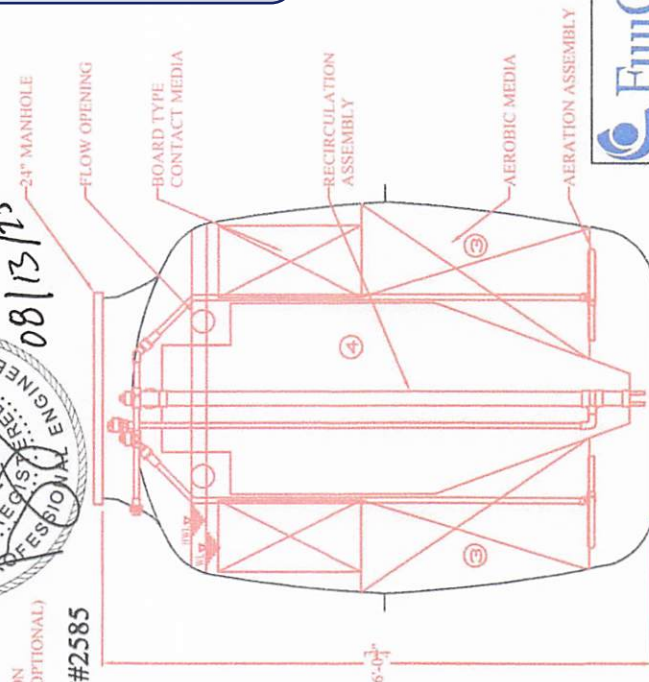


REVISED

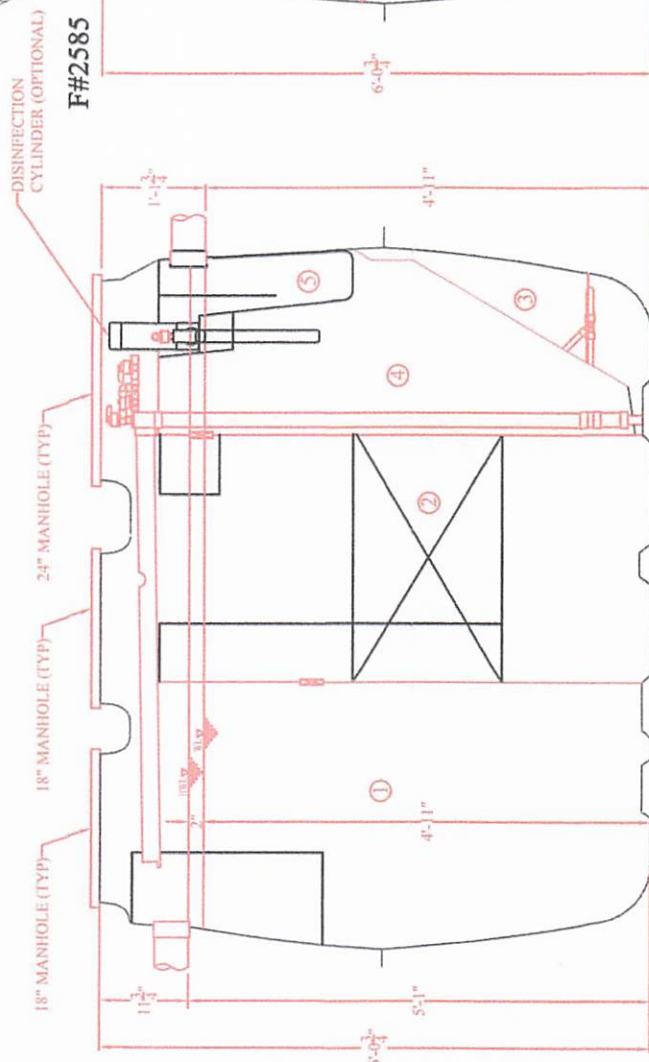
10:43 am, Aug 13, 2025



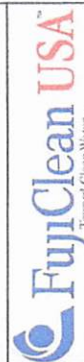
PLAN VIEW



SECTION B-B VIEW



SECTION A-A VIEW



FUJI CE7A 720 GPD

Structural Drawing

DATE: 07/01/2014 SCALE: 1/2" = 1"

REVISED

10:43 am, Aug 13, 2025

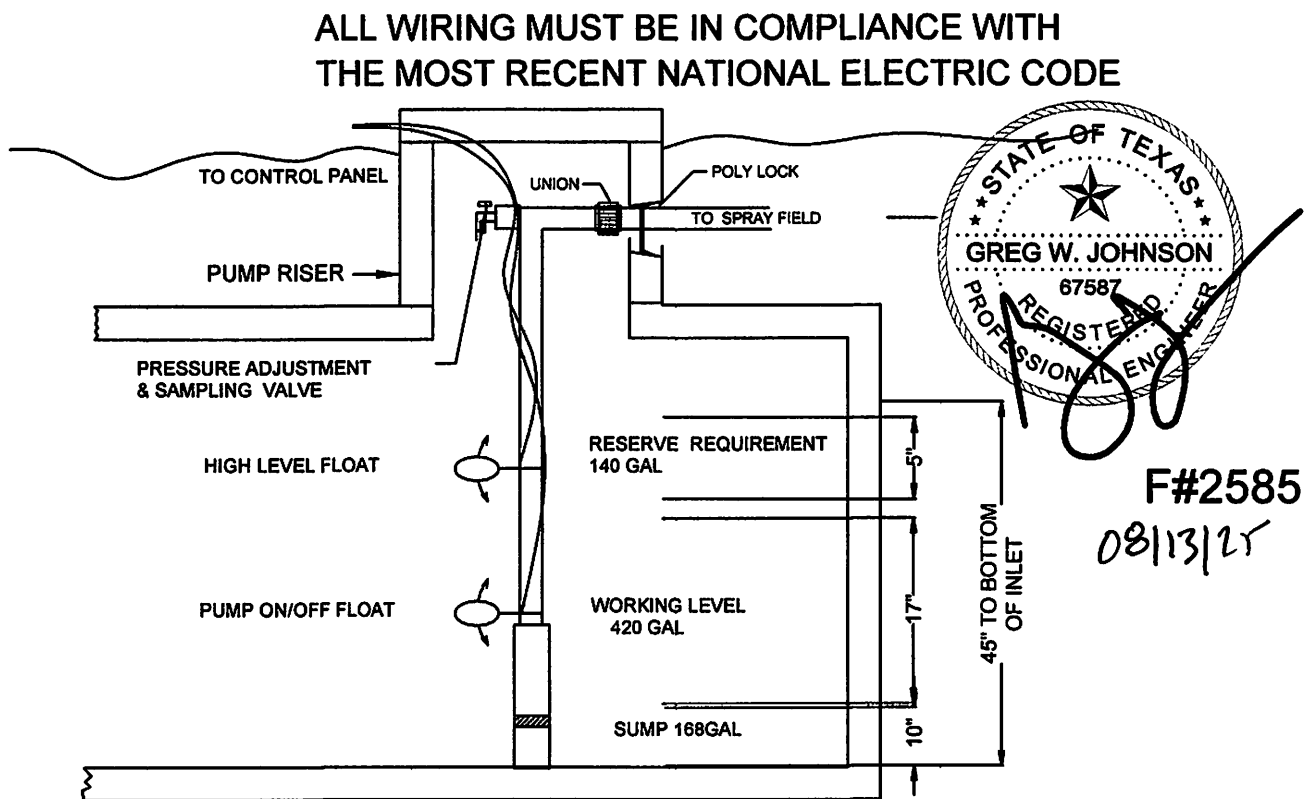
TANK NOTES:

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

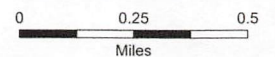
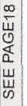
Tightlines to the tank shall be SCH-40 PVC.

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



**TYPICAL PUMP TANK CONFIGURATION
AK1000 GAL PUMP TANK**



Alamo Title Co. GF# 4000412200865 NW

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.

GENERAL WARRANTY DEED

STATE OF TEXAS

COUNTY OF COMAL

§
§
§

KNOW ALL MEN BY THESE PRESENTS:

Date: April 6, 2022

Grantor: JOE E. CONTRERAS and ELVIRA T. CONTRERAS, husband and wife

Grantor's Mailing Address:

25941 Goldfinch Trail

San Antonio, TX 78255

Bexar County

Grantee: HAVEN BUILDERS, LLC, a Texas limited liability company

Grantee's Mailing Address:

162 Hill Myna Ln

Spring Branch, TX 78070

Comal County

Consideration:

TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable consideration.

Property (including any improvements):

Lot 1010, MYSTIC SHORES, UNIT NINE, according to map or plat thereof recorded in Volume 14, Pages 157-159, Map and Plat Records of Comal County, Texas.

Reservations from Conveyance: None.

Exceptions to Conveyance and Warranty:

This conveyance is made and accepted subject to all validly existing conditions, restrictions, reservations, declarations, exceptions, easement grants, set-backs, assessments, maintenance and / or association charges and ordinances, affecting the property conveyed, if any, appearing in the public records; and all leases, grants, exceptions or reservations of coal, lignite, oil, gas and other minerals, together with all rights, privileges, and immunities relating thereto, appearing in the public records; and standby fees, taxes, and assessments by any

taxing authority for the 2022 tax year, and subsequent taxes and assessments by any taxing authority for prior years due to change in land usage or ownership.

Grantee, by its acceptance hereof, agrees to be solely responsible for payment of all ad valorem taxes pertaining to the Property for the calendar year 2022 and subsequent years.

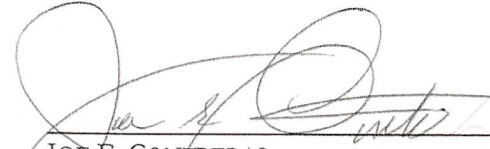
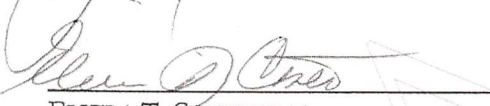
Grantor, for the Consideration and subject to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty, GRANTS, SELLS, and CONVEYS to Grantee the Property, together with all and singular the rights and appurtenances thereto in any way belonging, to have and to hold it to Grantee and Grantee's heirs, successors, and assigns forever. Grantor binds Grantor and Grantor's heirs and successors to WARRANT AND FOREVER DEFEND all and singular the Property to Grantee and Grantee's heirs, successors, and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, except as to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty.

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

[signature(s) on following page(s)]

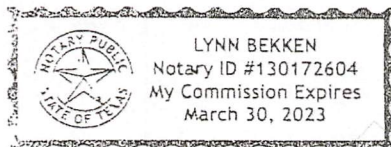
Executed effective as of the date first set forth herein.

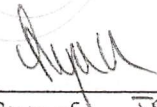
GRANTOR:


JOE E. CONTRERAS

ELVIRA T. CONTRERAS

STATE OF Texas §
COUNTY OF Bexar §

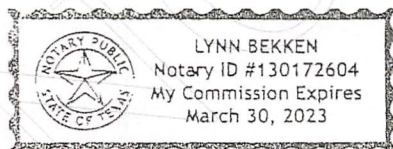
This instrument was acknowledged before me on April 6, 2022, by JOE E. CONTRERAS, an individual.

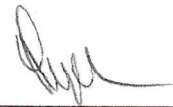



Notary Public, State of Texas

STATE OF Texas §
COUNTY OF Bexar §

This instrument was acknowledged before me on April 6, 2022, by ELVIRA T. CONTRERAS, an individual.




Notary Public, State of Texas

AFTER RECORDING RETURN TO:

HAVEN BUILDERS, LLC

**Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
04/06/2022 03:53:34 PM
TERRI 3 Pages(s)
202206016171**



Bobbie Koepp



COMAL COUNTY
ENGINEER'S OFFICE

VOID

MYSTIC SHORES, UNIT 9, LOT 1010

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

Planning Materials & Site Evaluation as Required by TCEQ

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 M800 Absorption/Application Area (Sq Ft) 6638

Gallons Per Day (As Per TCEQ Table 111) 420

(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

MAY 19, 2025
Date

OSSF SOIL EVALUATION REPORT INFORMATION

Date: May 19, 2025

Applicant Information:

HAVERN BUILDERS, LLC, a Texas limited liability
Name: company
Address: 1341 PALMETTO PLACE
City: SPRING BRANCH State: TX
Zip Code: 78070 Phone: 210-872-6445

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 1010 Unit 9 Blk Subd. MYSTIC SHORES
Street Address: 360 STARLING PASS
City: SPRING BRANCH Zip Code: 78070
Additional Info.:

Installer Information:

Name: GORDON PAUL SWOYER
Company: PAUL SWOYER SEPTICS
Address: 23011 FM 306
City: CANYON LAKE State: TX
Zip Code: 78133 Phone 830-935-4936

Topography: Slope within feet of area: %
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: 6 Total sq. ft. living area 5212

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

Q = (6 + 1) * 75 - (20%) = 420

Trash Tank Size 431 Gal.

TCEQ Approved Aerobic Plant Size 800 G.P.D.

Req'd Application Area = Q/Ri = 420 / 0.064 = 6563 sq. ft.

Application Area Utilized = 6638 sq. ft.

Pump Requirement 9.3 Gpm @ 41 Psi (FRANKLIN 0.5 HP C1 series or equivalent)

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

Pump Tank Size = 854 Gal. 16.1 Gal./inch.

Reserve Requirement = 140 Gal. 1/3 day flow.

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

With Chlorinator

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

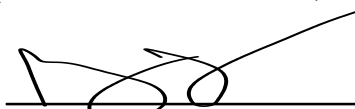
1" Sch-40 PVC discharge manifold

APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

EXPOSED ROCK WILL BE COVERED WITH SOIL

*

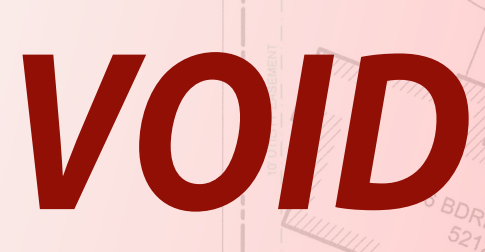
I HAVE PERFORMED A THOROUGH INVESTIGATION BEING A REGISTERED PROFESSIONAL ENGINEER
AND SITE EVALUATOR IN ACCORDANCE WITH CHAPTER 285, SUBCHAPTER D, §285.30, & §285.40
(REGARDING RECHARGE FEATURES), TEXAS COMMISSION OF ENVIRONMENTAL QUALITY
(EFFECTIVE DECEMBER 29, 2016)


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

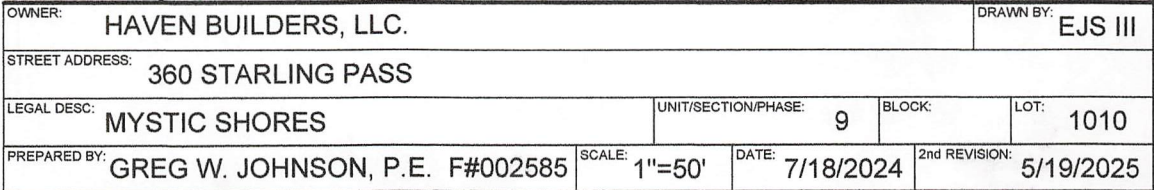
MAY 19, 2025

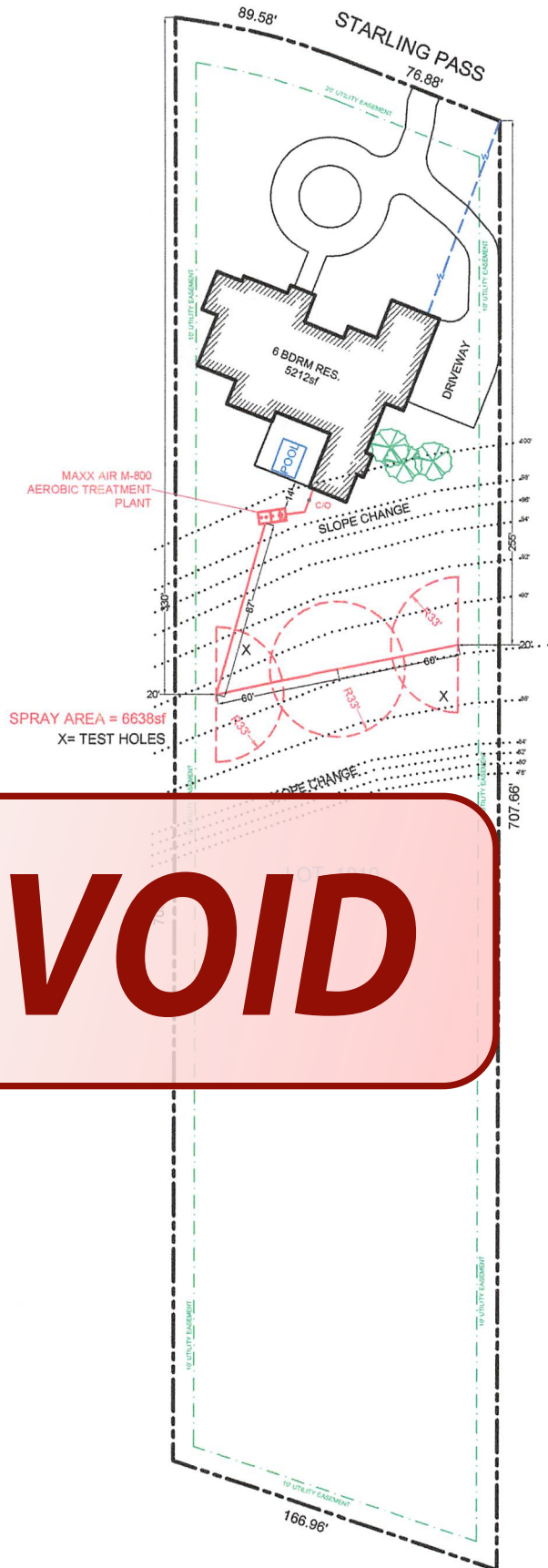
DATE





VOID





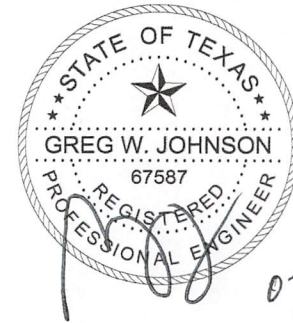
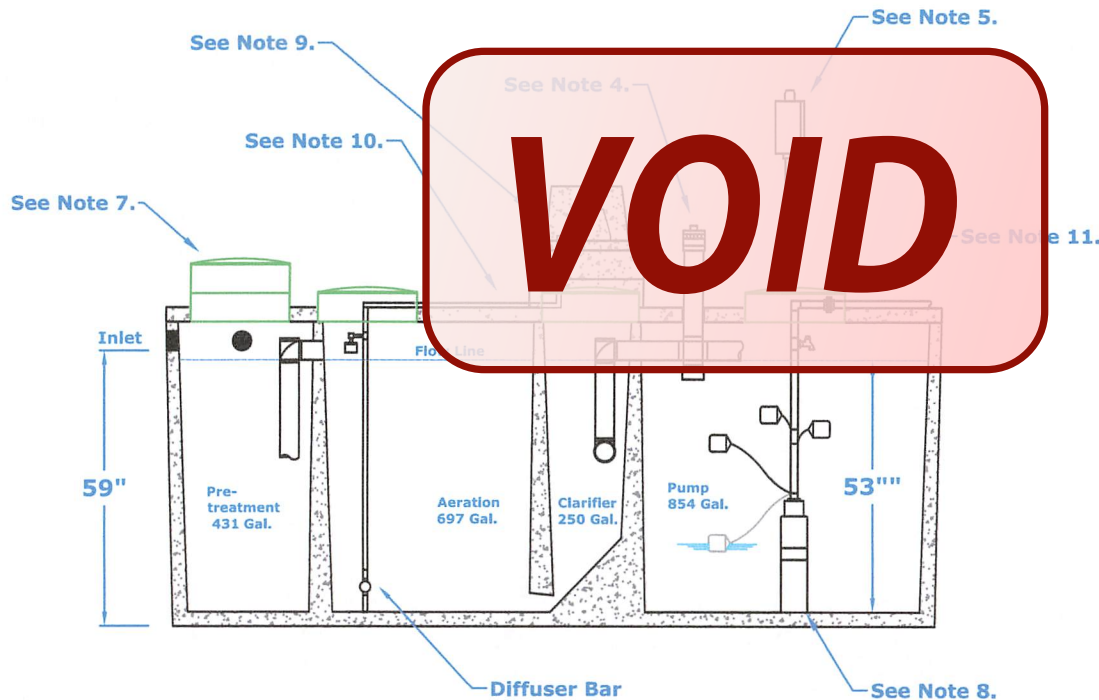
VOID



OWNER: HAVEN BUILDERS, LLC.					DRAWN BY: EJS III			
STREET ADDRESS: 360 STARLING PASS								
LEGAL DESC: MYSTIC SHORES				UNIT/SECTION/PHASE: 9		BLOCK:	LOT: 1010	
PREPARED BY: GREG W. JOHNSON, P.E. F#002585			SCALE: N.T.S.		DATE: 7/18/2024		2nd REVISION: 5/19/2025	

GENERAL NOTES:

1. Plant structure material to be precast concrete and steel.
2. Weight = 16,700 lbs.
3. Treatment capacity is 600 GPD. BOD Loading = 2.60 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 access 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.



F-2585

07/23/24

DIMENSIONS:

Outside Height: 67"
Outside Width: 75"
Outside Length: 164.5"

MINIMUM EXCAVATION DIMENSIONS:

Width: 87"
Length: 177"

**MAXX AIR M-800
Aerobic Treatment Plant (Assembled)**

March, 2010
By: A.S.

Scale:
* All Dimensions subject to allowable specification tolerances.

Dwg. #: ADV-B800-2



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

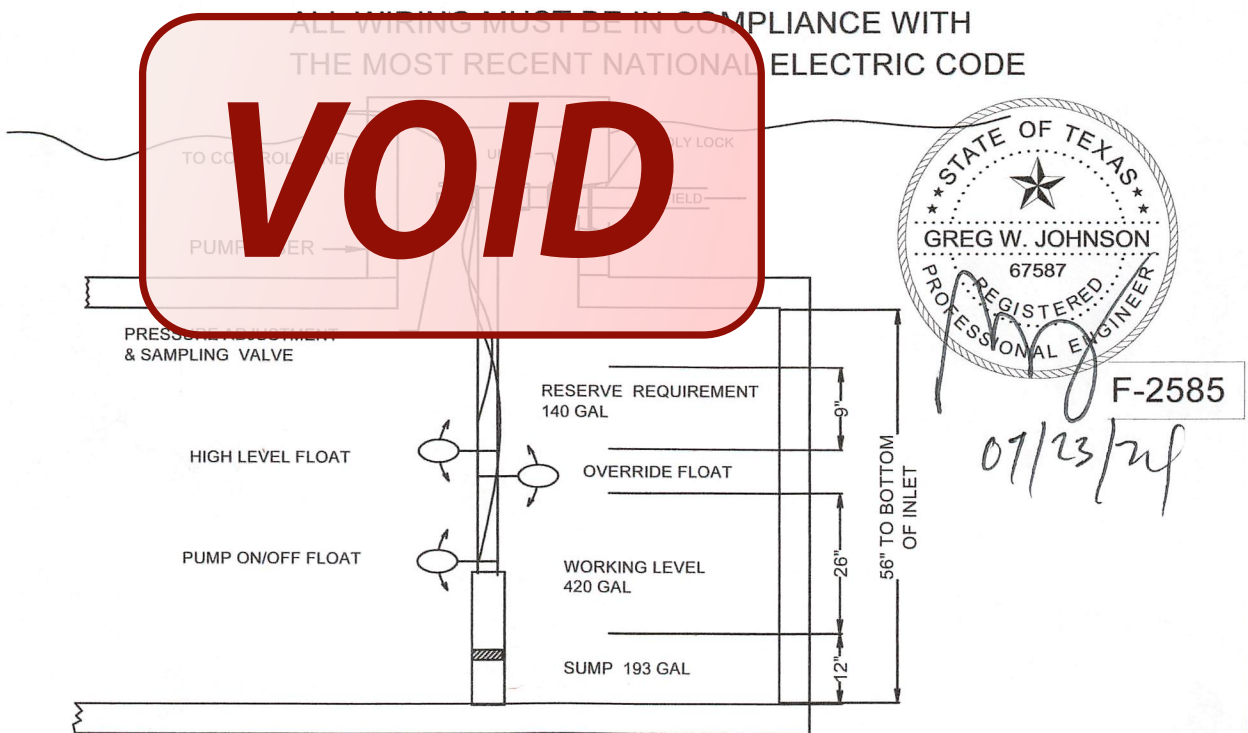
TANK NOTES:

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



TYPICAL PUMP TANK CONFIGURATION
MAXX AIR M-800 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.

APPLICATIONS

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

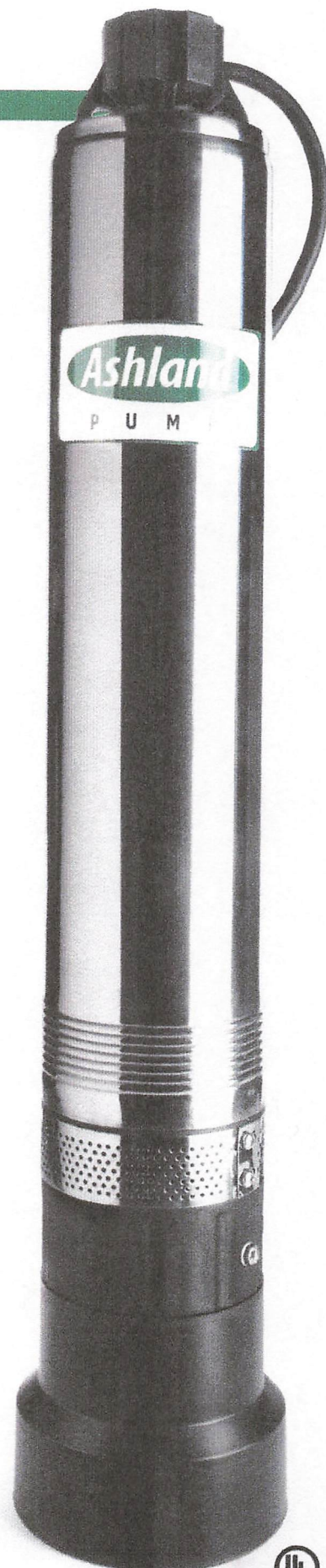
FEATURES

- Bottom suction design for maximum drawdown
- Able to pass 1/8" solids
- Available in 10, 20 and 30 GPM flow rates
- 1/2 HP, 115V and 230V single phase motors
- Heavy duty discharge with stainless steel internal threads
- 600 Volt, 10' SJ00W jacketed lead
- High shut-off pressure
- Quiet operation
- Standard removable base for stable mounting

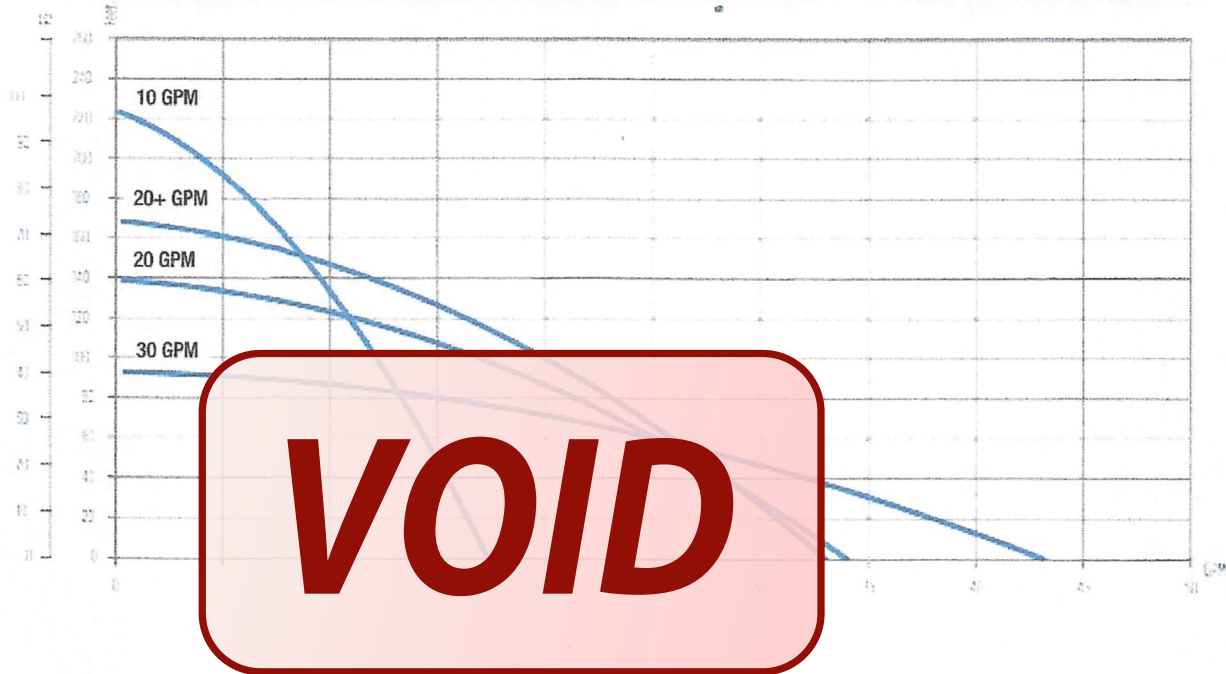
ORDERING INFORMATION

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

VOID



ASHLAND PUMP CPM SERIES CISTERN PUMP PERFORMANCE



Low Angle Performance Data

NOZZLE	PRESSURE			RADIUS		FLOW RATE		
	PSI	kPa	Bars	Ft.	M.	GPM	L/M	M ³ /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

K
RAIN

Ashland

P U M P

Honest, Professional, Dependable

1899 Cottage Street, Ashland, Ohio 44805

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

RECEIVED

By Kathy Griffin at 11:31 am, Jul 21, 2025



COMAL COUNTY

ENGINEER'S OFFICE

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

		118863
<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

07/17/2025

Date

___ COMPLETE APPLICATION

Check No. _____ Receipt No. _____

INCOMPLETE APPLICATION

___ (Missing Items Circled, Application Refused)