

# 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)<br>285.30(b)(1)(A)(iv)<br>285.30(b)(1)(A)(v)<br>285.30(b)(1)(A)(iii)<br>285.30(b)(1)(A)(ii)<br>285.30(b)(1)(A)(i)                                                                                                                                                           |       |           |           |           |
| 2   | SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards                              |        | 285.91(10)<br>285.30(b)(4)<br>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)<br>285.32(b)(1)(E)(iii)<br>285.32(b)(1)(E)(iv)<br>285.32(b)(1)(F)<br>285.32(b)(1)(B)<br>285.32(b)(1)(C)(i)<br>285.32(b)(1)(C)(ii)<br>285.32(b)(1)(D)<br>285.32(b)(1)(E)<br>285.32(b)(1)(A)<br>285.32(b)(1)(E)(ii)(II)<br>285.32(b)(1)(E)(i)<br>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)<br>(E) 285.91(2) 285.32(b)(1)<br>(F) 285.32(b)(1)(E)<br>(iii) 285.32(b)(1)(E)(ii)<br>(II) 285.32(b)(1)(E)(ii)<br>(I) 285.32(b)(1)(E)<br>(i) 285.32(b)(1)<br>(D) 285.32(b)(1)(C)<br>(ii) 285.32(b)(1)(C)<br>(i) 285.32(b)(1)<br>(B) 285.32(b)(1)<br>(A) 285.32(b)(1)(E)(iv) |       |           |           |           |
| 9   | ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used                                                                                                                                                                              |        | 285.32(b)(1)(F)<br>285.32(b)(1)(G)<br>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)<br>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<br>AEROBIC TREATMENT UNIT Model Number                                                                                                                                                                |        |                                                                                                                                                                                                                                                                                         |       |           |           |           |
| 16  | DISPOSAL SYSTEM Absorptive                                                                                                                                                                                                                |        | 285.33(a)(4)<br>285.33(a)(1)<br>285.33(a)(2)<br>285.33(a)(3)                                                                                                                                                                                                                            |       |           |           |           |
| 17  | DISPOSAL SYSTEM Leaching Chamber                                                                                                                                                                                                          |        | 285.33(a)(1)<br>285.33(a)(3)<br>285.33(a)(4)<br>285.33(a)(2)                                                                                                                                                                                                                            |       |           |           |           |
| 18  | DISPOSAL SYSTEM Evapo-transpirative                                                                                                                                                                                                       |        | 285.33(a)(3)<br>285.33(a)(4)<br>285.33(a)(1)<br>285.33(a)(2)                                                                                                                                                                                                                            |       |           |           |           |

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|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------------------------------------------------------------|-------|-----------|-----------|-----------|
| 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)<br>285.33(a)(3)<br>285.33(a)(1)<br>285.33(a)(2) |       |           |           |           |
| 22  | DISPOSAL SYSTEM Gravelless Pipe                                                                                                                                       |        | 285.33(a)(3)<br>285.33(a)(2)<br>285.33(a)(4)<br>285.33(a)(1) |       |           |           |           |
| 23  | DISPOSAL SYSTEM Mound                                                                                                                                                 |        | 285.33(a)(3)<br>285.33(a)(1)<br>285.33(a)(2)<br>285.33(a)(4) |       |           |           |           |
| 24  | DISPOSAL SYSTEM Other (describe) (Approved Design)                                                                                                                    |        | 285.33(d)(6)<br>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<br>DRAINFIELD Excavation Depth<br>DRAINFIELD Excavation Separation<br>DRAINFIELD Depth of Porous Media<br>DRAINFIELD Type of Porous Media |        |                                                              |       |           |           |           |
| 29  | DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place                                                                                                               |        | 285.33(b)(1)(E)                                              |       |           |           |           |
| 30  | DRAINFIELD Leaching Chambers<br>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)                                           |       |           |           |           |

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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<br>EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0%<br>EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom )<br>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<br>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)<br>285.33(b)(3)(A)<br>285.33(b)(3)(B)<br>285.91(13)<br>285.33(b)(3)(D)<br>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<br>AEROBIC TREATMENT UNIT Secondary restraint system provided<br>AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank<br>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<br>PUMP TANK Sampling Port Provided in the Treated Effluent Line<br>PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required<br>PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump                                                                                                                                                                                                                                            |        |                                                                                                           |       |           |           |           |
| 37  | PUMP TANK Inspection/Clean Out Port & Risers Provided<br>PUMP TANK Secondary restraint system provided<br>PUMP TANK Riser permanently fastened to lid or cast into tank<br>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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |        |                                                                                                           |       |           |           |           |

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| No. | Description                                                                                                                                                                                           | Answer | Citations                                                                                                                                                                                          | Notes | 1st Insp. | 2nd Insp. | 3rd Insp. |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------|-----------|-----------|
| 40  | APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?                                                                                                       |        | 285.33(d)(2)(G)(iii)(II)<br>285.33(d)(2)(G)(iii)(III)<br>285.33(d)(2)(G)(v)<br>285.33(d)(2)(G)(iii)<br>285.33(d)(2)(G)(iv)<br>285.33(d)(2)(G)(i)<br>285.33(d)(2)(G)(ii)<br>285.33(d)(2)(G)(iii)(I) |       |           |           |           |
| 41  | APPLICATION AREA Low Angle Nozzles Used / Pressure is as required<br>APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads?<br>APPLICATION AREA The Landscape Plan is as Designed |        | 285.33(d)(2)(G)<br>(i)285.33(d)(2)<br>(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

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## ENGINEER'S OFFICE

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

Permit Number: 118870  
Issued This Date: 09/02/2025  
This permit is hereby given to: Joseph & Rose Oldham

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

415 LETS ROLL DR  
FISCHER, TX 78623

Subdivision: Summit Estates at Fischer (The)  
Unit: 1  
Lot: 208  
Block: 0  
Acreage: 0.0000

#### 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 4:00 pm, Jul 21, 2025



**COMAL COUNTY**  
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION  
CHECKLIST**

Staff will complete shaded items

|  |  |
|--|--|
|  |  |
|--|--|

Date Received

Initials

|        |
|--------|
| 118871 |
|--------|

Permit Number

118870

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.

*Bucky Smith*

Signature of Applicant

6-27-25

Date

\_\_\_ COMPLETE APPLICATION

Check No. \_\_\_\_\_ Receipt No. \_\_\_\_\_

INCOMPLETE APPLICATION

(Missing Items Circled, Application Refused)



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 6-27-25

Permit Number 103871

118870

### 1. APPLICANT / AGENT INFORMATION

Owner Name Joseph & Rose Oldham  
Mailing Address 415 Lets Roll Dr  
City, State, Zip Fischer, TX 78623  
Phone # 512-618-0445 / 512-847-5329  
Email \_\_\_\_\_

Agent Name Bucky Smith  
Agent Address 202 Reimer Ave  
City, State, Zip San Marcos, TX 78666  
Phone # 512-644-6980  
Email smithsepticdesign@gmail.com

### 2. LOCATION

Subdivision Name Summit Estates Unit 1 Lot 208 Block \_\_\_\_\_  
Survey Name / Abstract Number \_\_\_\_\_ Acreage 1.05  
Address 415 Lets Roll Dr City Fischer State TX Zip 78623

### 3. TYPE OF DEVELOPMENT

☐ Single Family Residential  
Type of Construction (House, Mobile, RV, Etc.) \_\_\_\_\_

Number of Bedrooms 3  
Indicate Sq Ft of Living Area 42500

☐ 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: \$ \_\_\_\_\_ (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

### 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.

Rose Oldham Joe Oldham  
Signature of Owner

6-25-25  
Date



## ON-SITE SEWAGE FACILITY APPLICATION

Planning Materials & Site Evaluation as Required Completed By Corrie Smith

System Description aerobic spray (spray head relocation)

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

Tank Size(s) (Gallons) 500 GPD ATU Absorption/Application Area (Sq Ft) 3925

Gallons Per Day (As Per TCEQ Table III) 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 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.

Corrie Smith  
Signature of Designer

6-27-25  
Date

2  
C



201506044915 11/05/2015 11:43:56 AM 1/2

AFFIDAVIT TO THE PUBLIC

THE COUNTY OF COMAL  
STATE OF TEXAS

RECEIVED

NOV 05 2015

CERTIFICATION OF OSSF REQUIRING MAINTENANCE COUNTY ENGINEER

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 (commission) 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 the 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): Lot 208, The Summit

Estates at Fischer, Texas, Unit 1

The property is owned by (insert owner's full name): Joseph and Rose Oldham

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 Comal County Engineer's Office.

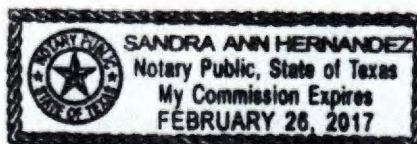
WITNESS BY HAND(S) ON THIS 5<sup>th</sup> DAY OF November, 2015

Rose Oldham

Owner(s) signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 5<sup>th</sup> DAY OF November, 2015

Sandra Ann Hernandez  
Notary Public, State of Texas





This page has been added to comply with the statutory requirement that the clerk shall stamp the recording information at the bottom of the last page.

This page becomes part of the document identified by the file clerk number affixed on preceding pages.

RECEIVED

NOV 05 2015

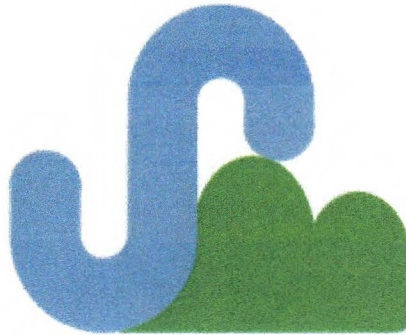
COUNTY ENGINEER

Filed and Recorded  
Official Public Records  
Bobbie Koepp, County Clerk  
Comal County, Texas  
11/05/2015 11:43:56 AM  
CASHTWO 2 Page(s)  
201506044915



*Bobbie Koepp*

# Smith Septic Design and Consultation



Designed for:  
Oldham Residence  
415 Lets Roll Dr  
Fischer, TX



GB 6-27-25

Design Report  
On-Site Sewage Facility  
Aerobic Wastewater Treatment System  
Utilizing Surface Spray Application

**Owner/Site Location:**

Oldham Residence  
415 Lets Roll Dr  
Fischer, TX



**Site Description & Evaluation:**

A site evaluation indicated that the site is suitable for an aerobic surface irrigation system. The spray area has a slope of less than 15% and there was no evidence of shallow groundwater. This project will utilize a public water supply as a water source. All portions of the proposed OSSF must maintain at least a 10' setback from all water lines. No portion of this property lies within the regulated floodplain. There were no recharge features found within 150' of the proposed OSSF. Minimum separation distances as stated in Chapter 285 (TCEQ) On-Site Sewage Facilities, must be maintained. This is an existing permitted system. The spray heads are being relocated to accommodate the addition of a sport court.

**Wastewater Design Flow:**

This design is for a 3 bedroom home <2500 square feet. Low flow fixtures will be utilized. System is designed for 240 gallons per day. .

**Aerobic Treatment System Description:**

This project will utilize a Nuwater B-550 ATU. Wastewater from the residence will flow to a 353 gallon trash tank followed by 600 gallon per day aeration treatment tank. Effluent from the aeration tank will flow through a NSF approved liquid chlorinator to an 768 gallon pump tank. The pump tank will discharge to sprinkler heads. The disposal area will consist of two 25 ft. 360 degree spray patterns This system is considered a package system and will be installed to manufacturer's instructions. This OSSF meets all the requirements of the existing CZP.

**RECEIVED**

By Brandon Olvera at 12:54 pm, Aug 25, 2025

Oldham Residence  
415 Lets Roll Drive  
Fischer, TX 78623

**LEGEND**

- A: Existing 3 Bedroom, Single Family Residence, < 2,500 Sq. Ft.
- B: 3" or 4" SCH 40 PVC Pipe with Two Way Clean Out
- C: NuWater Aerobic Treatment Unit, Model B-550
- D: 1" SCH 40 Purple PVC Pipe
- E: K-Rain Pro Plus Low Angle Spray Head, Nozzle #4, Radius @ 25'
- F: Waterline
- G: Sport Court
- H: Garage
- I: Driveway
- J: Existing Spray Head (to be removed)

**PROPERTY NOTES**

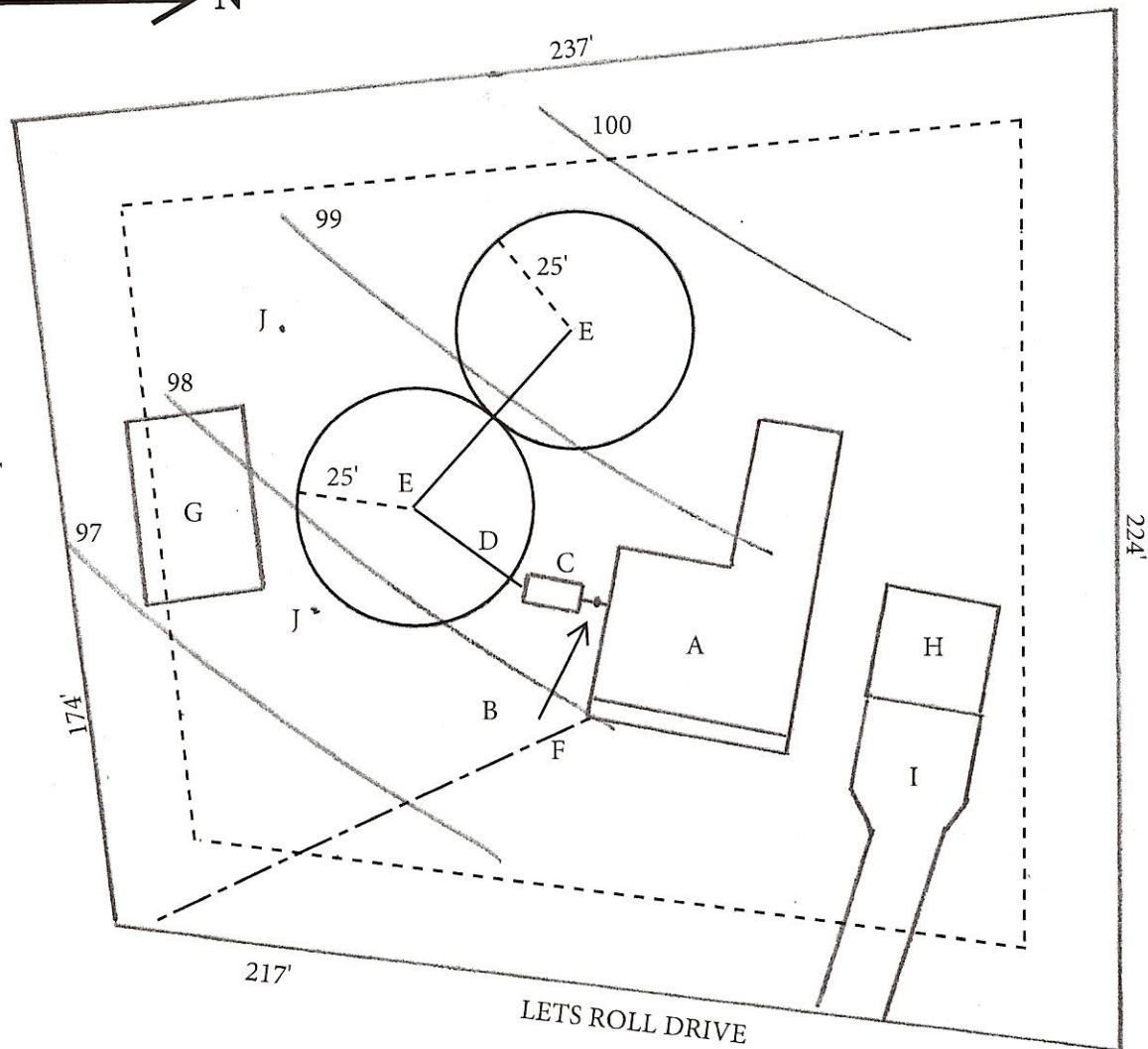
- 20' OSSF Setback on All Property Lines
- 5' Septic Tank Setback from Structure

*Tight Line = 7'*  
*Tank to 1st spray head = 30'*



*CS 8-25-25*

**SCALE**  
1 INCH = 40 FEET



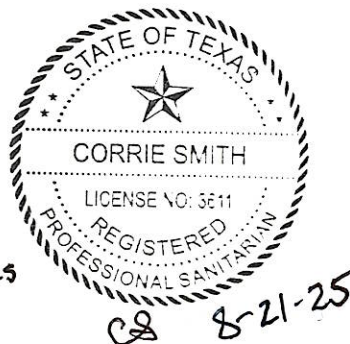
**RECEIVED**

By Brandon Olvera at 12:55 pm, Aug 25, 2025

# Assembly Details

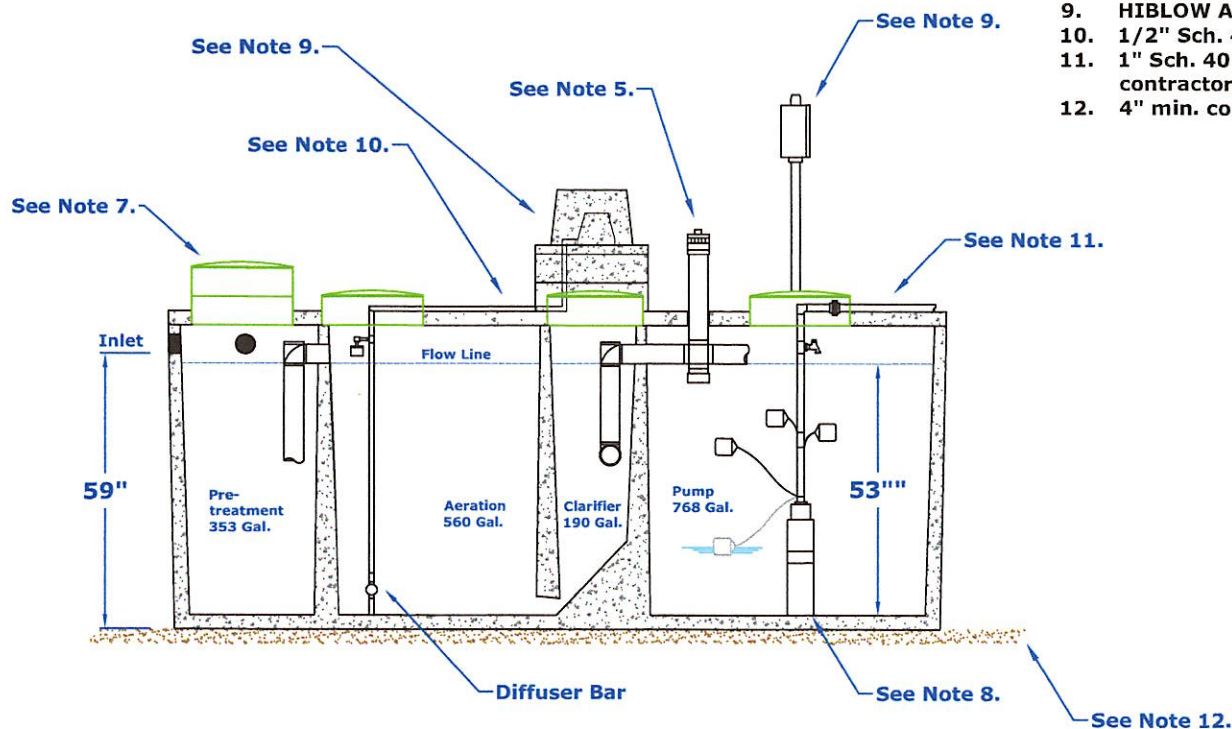
## OSSF

Pump off @ 6"  
 Pump on @ 10"  
 Alarm on @ 27"  
 Reserve above alarm = 376.74 gallons



### 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



### DIMENSIONS:

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

**Tough, proven and advanced.**

## Features

- Patented Top Arc Set – Allows for wet or dry adjustment in seconds
- Full arc range adjustment from 40° to continuous 360°
- Patented Arc Set Degree Markings – Clearly indicates current watering pattern & simplifies arc set adjustment
- Arc Memory Clutch – Prevents internal gear damage and returns rotor to its prior setting automatically if nozzle turret is forced past its stop
- Patented Reversing Mechanism – Ensures continuous reverse and return
- Ratcheting Riser – Allows for easy adjustment of the fixed starting position with a simple turn of the riser
- Rubber Cover – Seals out dirt, increases product durability
- Wide Selection of Nozzles – Including standard and low angle, provides flexibility in system design
- Replaces all standard 3/4" rotors
- Includes 5 Free Check Valve Assemblies Per Box

## Specifications

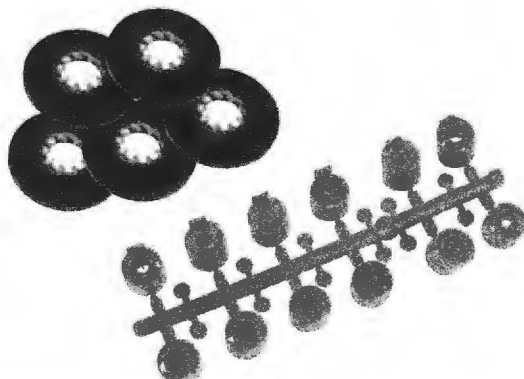
- Arc Adjustment Range: 40° to Continuous 360°
- Flow Range: 0.5 – 10.0 GPM (1,9 – 37,8 LPM)
- Operating Pressure Range: 20 – 70 PSI (1,4 – 4,8 bar)
- Recommended Pressure Range: 30 – 50 PSI (2,1 – 3,5 bar)
- Precipitation Rate: 0.12 – 0.88 in/hr (3 – 22 mm/hr) (depending on spacing and nozzle used)
- Radius: 22' – 50' (6,7 – 15,2 m)
- Nozzle Trajectory: 26°
- Low Angle Nozzle Trajectory: 12°
- Standard and Low Angle Nozzles Included

## Model

**11003** ProPlus®

## Accessories

See page 26-27



## Fast Facts

ALL INLET: 3/4" (1,9 CM) FEMALE THREAD NPT

4" Retracted height: 7 1/2" (19 cm)  
Riser height: 4 1/4" (10,8 cm)



## Easy Arc Setting

Arc Selection: 40° to continuous 360°  
Adjust from left start



## How to Specify with Options

| MODELS | OPTIONS                |
|--------|------------------------|
| 11003  | -CV ▶ Check Valve      |
|        | -LA ▶ Low angle Nozzle |
|        | -NN ▶ No Nozzle        |
|        | -RCW ▶ Reclaimed Water |

Examples: 11003-RCW-CV

**Performance Data - U.S.**

| NOZZLE                    | NO ADJUSTMENT |        |      |              |      |
|---------------------------|---------------|--------|------|--------------|------|
|                           | PRESSURE      | RADIUS | FLOW | PRECIP in/hr |      |
|                           | PSI           | FEET   | GPM  | ■            | ▲    |
| #0.5                      | 30            | 28     | 0.5  | 0.12         | 0.14 |
|                           | 40            | 29     | 0.6  | 0.14         | 0.16 |
|                           | 50            | 29     | 0.7  | 0.16         | 0.19 |
|                           | 60            | 30     | 0.8  | 0.17         | 0.20 |
| #0.75                     | 30            | 29     | 0.7  | 0.16         | 0.19 |
|                           | 40            | 30     | 0.8  | 0.17         | 0.20 |
|                           | 50            | 31     | 0.9  | 0.18         | 0.21 |
|                           | 60            | 32     | 1.0  | 0.19         | 0.22 |
| #1.0                      | 30            | 32     | 1.3  | 0.24         | 0.28 |
|                           | 40            | 33     | 1.5  | 0.27         | 0.31 |
|                           | 50            | 34     | 1.6  | 0.27         | 0.31 |
|                           | 60            | 35     | 1.8  | 0.28         | 0.33 |
| #2.0                      | 30            | 37     | 2.4  | 0.34         | 0.39 |
|                           | 40            | 40     | 2.5  | 0.30         | 0.35 |
|                           | 50            | 42     | 3.0  | 0.33         | 0.38 |
|                           | 60            | 43     | 3.3  | 0.34         | 0.40 |
| #2.5<br>Pre-<br>Installed | 30            | 38     | 2.5  | 0.33         | 0.38 |
|                           | 40            | 39     | 2.8  | 0.35         | 0.41 |
|                           | 50            | 40     | 3.2  | 0.39         | 0.44 |
|                           | 60            | 41     | 3.5  | 0.40         | 0.46 |
| #3.0                      | 30            | 38     | 3.6  | 0.48         | 0.55 |
|                           | 40            | 39     | 4.2  | 0.53         | 0.61 |
|                           | 50            | 41     | 4.6  | 0.53         | 0.61 |
|                           | 60            | 42     | 5.0  | 0.55         | 0.63 |
| #4.0                      | 30            | 43     | 4.4  | 0.46         | 0.53 |
|                           | 40            | 44     | 5.1  | 0.51         | 0.59 |
|                           | 50            | 46     | 5.6  | 0.51         | 0.59 |
|                           | 60            | 49     | 5.9  | 0.47         | 0.55 |
| #6.0                      | 40            | 45     | 5.9  | 0.56         | 0.65 |
|                           | 50            | 46     | 6.0  | 0.55         | 0.63 |
|                           | 60            | 48     | 6.3  | 0.53         | 0.61 |
|                           | 70            | 49     | 6.7  | 0.54         | 0.62 |
| #8.0                      | 40            | 42     | 8    | 0.87         | 1.01 |
|                           | 50            | 45     | 8.5  | 0.81         | 0.93 |
|                           | 60            | 49     | 9.5  | 0.76         | 0.88 |
|                           | 70            | 50     | 10   | 0.77         | 0.89 |

**Performance Data - Metric**

| NOZZLE                    | NO ADJUSTMENT |        |      |              |    |
|---------------------------|---------------|--------|------|--------------|----|
|                           | PRESSURE      | RADIUS | FLOW | PRECIP mm/hr |    |
|                           | BAR           | METER  | L/M  | ■            | ▲  |
| #0.5                      | 2,1           | 8,5    | 1,9  | 3            | 4  |
|                           | 2,8           | 8,8    | 2,3  | 3            | 4  |
|                           | 3,4           | 8,8    | 2,6  | 4            | 5  |
|                           | 4,1           | 9,1    | 3,0  | 4            | 5  |
| #0.75                     | 2,1           | 8,8    | 2,6  | 4            | 5  |
|                           | 2,8           | 9,1    | 3,0  | 4            | 5  |
|                           | 3,4           | 9,4    | 3,4  | 5            | 5  |
|                           | 4,1           | 9,8    | 3,8  | 5            | 6  |
| #1.0                      | 2,1           | 9,8    | 4,9  | 6            | 7  |
|                           | 2,8           | 10,1   | 5,7  | 7            | 8  |
|                           | 3,4           | 10,4   | 6,1  | 7            | 8  |
|                           | 4,1           | 10,7   | 6,8  | 7            | 8  |
| #2.0                      | 2,1           | 11,3   | 9,1  | 9            | 10 |
|                           | 2,8           | 12,2   | 9,5  | 8            | 9  |
|                           | 3,4           | 12,8   | 11,4 | 8            | 10 |
|                           | 4,1           | 13,1   | 12,5 | 9            | 10 |
| #2.5<br>Pre-<br>Installed | 2,1           | 11,6   | 9,5  | 8            | 10 |
|                           | 2,8           | 11,9   | 10,6 | 9            | 10 |
|                           | 3,4           | 12,2   | 12,1 | 10           | 11 |
|                           | 4,1           | 12,5   | 13,2 | 10           | 12 |
| #3.0                      | 2,1           | 11,6   | 13,6 | 12           | 14 |
|                           | 2,8           | 11,9   | 15,9 | 14           | 16 |
|                           | 3,4           | 12,5   | 17,4 | 13           | 15 |
|                           | 4,1           | 12,8   | 18,9 | 14           | 16 |
| #4.0                      | 2,1           | 13,1   | 16,7 | 12           | 13 |
|                           | 2,8           | 13,4   | 19,3 | 13           | 15 |
|                           | 3,4           | 14,0   | 21,2 | 13           | 15 |
|                           | 4,1           | 14,9   | 22,3 | 12           | 14 |
| #6.0                      | 2,8           | 13,7   | 22,3 | 14           | 16 |
|                           | 3,4           | 14,0   | 22,7 | 14           | 16 |
|                           | 4,1           | 14,6   | 23,8 | 13           | 15 |
|                           | 4,8           | 14,9   | 25,4 | 14           | 16 |
| #8.0                      | 2,8           | 12,8   | 30,3 | 22           | 26 |
|                           | 3,4           | 13,7   | 32,2 | 21           | 24 |
|                           | 4,1           | 14,9   | 36,0 | 19           | 22 |
|                           | 4,8           | 15,2   | 37,9 | 20           | 23 |

**Low Angle Performance Data - U.S.**

| NOZZLE | NO ADJUSTMENT |        |      |              |      |
|--------|---------------|--------|------|--------------|------|
|        | PRESSURE      | RADIUS | FLOW | PRECIP in/hr |      |
|        | PSI           | FEET   | GPM  | ■            | ▲    |
| #1.0   | 30            | 22     | 1.2  | 0.48         | 0.55 |
|        | 40            | 24     | 1.7  | 0.57         | 0.66 |
|        | 50            | 26     | 1.8  | 0.51         | 0.59 |
|        | 60            | 28     | 2.0  | 0.49         | 0.57 |
| #3.0   | 30            | 29     | 3.0  | 0.69         | 0.79 |
|        | 40            | 32     | 3.1  | 0.58         | 0.67 |
|        | 50            | 35     | 3.5  | 0.55         | 0.64 |
|        | 60            | 37     | 3.8  | 0.53         | 0.62 |
| #4.0   | 30            | 31     | 3.4  | 0.68         | 0.79 |
|        | 40            | 34     | 3.9  | 0.65         | 0.75 |
|        | 50            | 37     | 4.4  | 0.62         | 0.71 |
|        | 60            | 38     | 4.7  | 0.63         | 0.72 |
| #6.0   | 40            | 38     | 6.5  | 0.87         | 1.00 |
|        | 50            | 40     | 7.3  | 0.88         | 1.01 |
|        | 60            | 42     | 8.0  | 0.87         | 1.01 |
|        | 70            | 44     | 8.6  | 0.86         | 0.99 |

**Low Angle Performance Data - Metric**

| NOZZLE | NO ADJUSTMENT |        |      |              |    |
|--------|---------------|--------|------|--------------|----|
|        | PRESSURE      | RADIUS | FLOW | PRECIP mm/hr |    |
|        | PSI           | FEET   | GPM  | ■            | ▲  |
| #1.0   | 2,1           | 6,7    | 4,5  | 12           | 14 |
|        | 2,8           | 7,3    | 6,4  | 14           | 17 |
|        | 3,4           | 7,9    | 6,8  | 13           | 15 |
|        | 4,1           | 8,5    | 7,6  | 12           | 14 |
| #3.0   | 2,1           | 8,8    | 11,4 | 17           | 20 |
|        | 2,8           | 9,8    | 11,7 | 15           | 17 |
|        | 3,4           | 10,7   | 13,2 | 14           | 16 |
|        | 4,1           | 11,3   | 14,4 | 14           | 16 |
| #4.0   | 2,1           | 9,4    | 12,9 | 17           | 20 |
|        | 2,8           | 10,4   | 14,8 | 17           | 19 |
|        | 3,4           | 11,3   | 16,7 | 16           | 18 |
|        | 4,1           | 11,6   | 17,8 | 16           | 18 |
| #6.0   | 2,8           | 11,6   | 24,6 | 22           | 25 |
|        | 3,4           | 12,2   | 27,6 | 22           | 26 |
|        | 4,1           | 12,8   | 30,3 | 22           | 26 |
|        | 4,8           | 13,4   | 32,6 | 22           | 25 |

\*All precipitation rates calculated for 180° operation. For the precipitation rate for a 360° sprinkler, divide by 2.



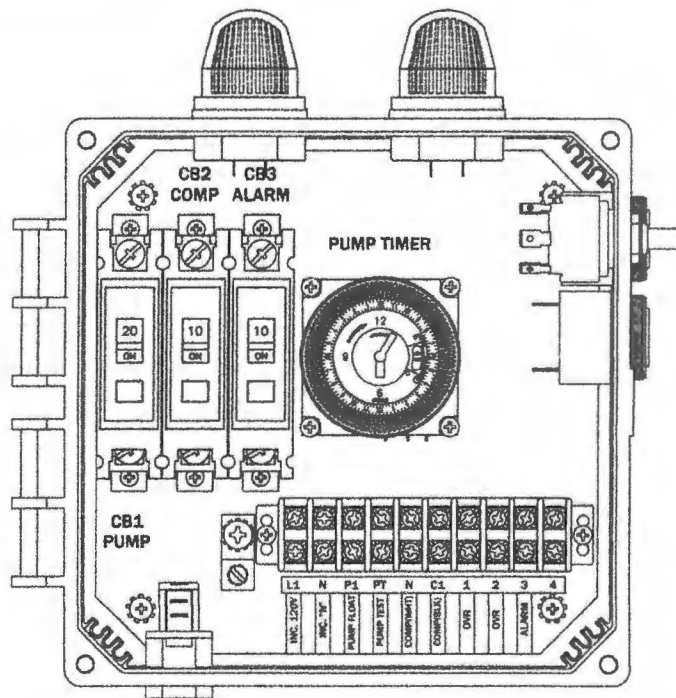


## CONTROL PANEL

### "A-AV" Model Aerobic Control Panel

#### Features & Benefits

- Circuit Breakers for Pump, Compressor & Alarm Circuits
- 24 Hr Timer w/15 minute intervals
- Large & Easy to Access Terminal Block
- Externally Mounted Run/Mute/Test Switch w/UV resistant sealing boot
- Externally Mounted Audible Alarm
- Rugged UV resistant Externally Mounted Alarm Light
- Durable Weather Resistant Hinged Poly Enclosure
- Labeled Back Panel
- Ground Lug
- Easily Replaceable Components
- Nema 4x Rating
- Color Coded Internal Wiring
- Built and Labeled to UL 508A Standard
- Works with most Aerobic Treatment Systems
- Provided with Wiring Schematic and Detailed Connection Diagram for Installer
- Mounting Feet for Enclosure
- Two year limited control panel warranty



**(50B138-BIO-A-AV SHOWN)**

NOTE: Comp. alarm switch located on enclosure door



#### Available Options

- Externally Mounted Pump Test Switch
- Externally Mounted Air Pressure Switch
- Auto-Dialer
- Locking Stainless Steel Latch
- Repeat Cycle Timer Option
- Mercury or Mechanical Float Switches for the Pump and High Water Alarm Circuits

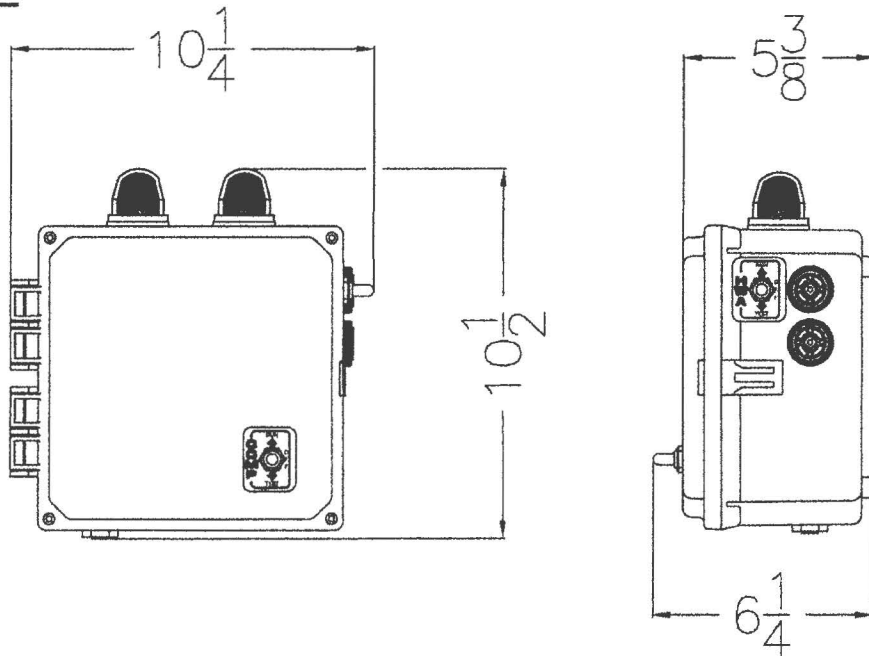


CS 6-27-25

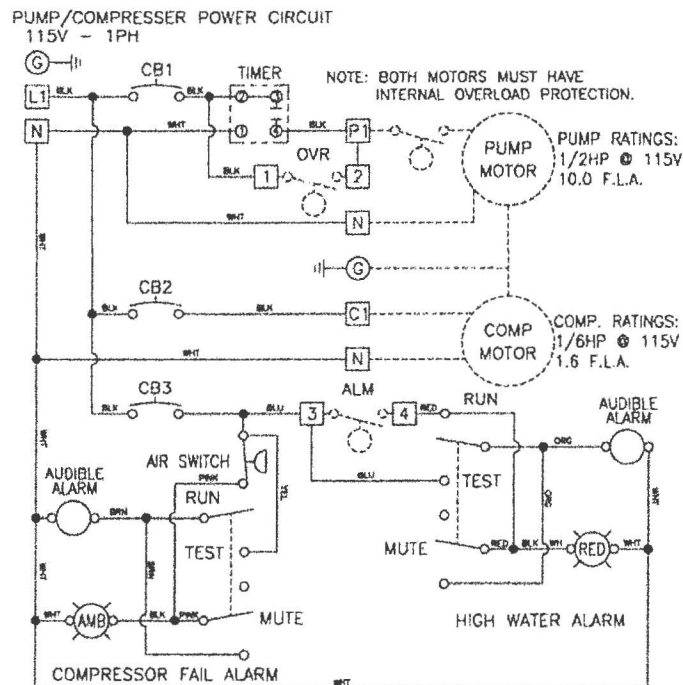
Note: Consult the factory for other available options. Also some options may require an increase in the enclosure size.

### "A-AV" Model Aerobic Control Panel

#### Panel Dimensions



#### Wiring Schematic



C8 6-27-25



CS 6-27-25

# C1 SERIES

## CISTERN PUMPS

Designed for use in gray water / filtered effluent service applications, the C1 Series cistern pump provides high performance and long life in less than ideal water conditions. The C1 Series pump is able to pass solids up to 1/8" without having a negative effect on the internal hydraulic components.

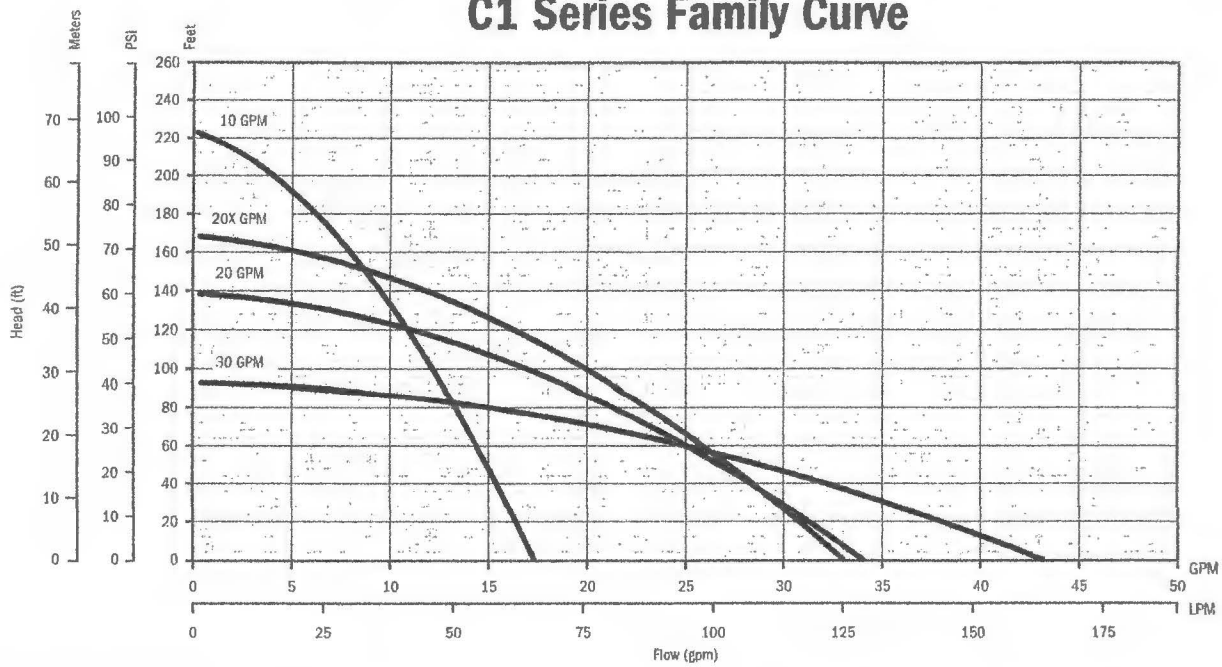
The pump's unique bottom suction design allows for maximum fluid drawdown without compromising durability or overall life, and it does not require the use of a flow induction sleeve. Intended specifically for use in a cistern or tank, C1 Series pumps are suitable for use in agricultural, residential, and commercial installations.



**Franklin Electric**

[franklinwater.com](http://franklinwater.com)

# C1 Series Family Curve



## FEATURES

- Supplied with a removable 5" base for secure and reliable mounting
- Bottom suction design
- Robust thermoplastic discharge head design resists breakage during installation and operation
- Single shell housing design provides a compact unit while ensuring cool and quiet operation
- Hydraulic components molded from high quality engineered thermoplastics
- Optimized hydraulic design allows for increased performance and decreased power usage
- All metal components are made of high grade stainless steel for corrosion resistance
- Available with a high quality 115 V or 230 V, 1/2 hp motor
- Fluid flows of 10, 20, and 30 gpm, with a max shut-off pressure of over 100 psi
- Heavy duty 600 V 10 foot SJ00W jacketed lead

## APPLICATIONS

- Gray water pumping
- Filtered effluent service water pumping
- Water reclamation projects such as pumping from rain catchment basins
- Aeration and other foundation or pond applications
- Agriculture and livestock water pumping



CS 6-27-25

## ORDERING INFORMATION

| C1 Series Pumps |     |       |       |                  |           |             |              |
|-----------------|-----|-------|-------|------------------|-----------|-------------|--------------|
| GPM             | HP  | Volts | Stage | Model No.        | Order No. | Length (in) | Weight (lbs) |
| 10              | 1/2 | 115   | 7     | 10C1-05P4-2W115  | 90301005  | 26          | 17           |
|                 |     | 230   | 7     | 10C1-05P4-2W230  | 90301010  | 26          | 17           |
| 20              |     | 115   | 5     | 20C1-05P4-2W115  | 90302005  | 25          | 16           |
|                 |     | 230   | 5     | 20C1-05P4-2W230  | 90302010  | 25          | 16           |
| 20X             |     | 115   | 6     | 20XC1-05P4-2W115 | 90302015  | 26          | 17           |
|                 |     | 230   | 6     | 20XC1-05P4-2W230 | 90302020  | 26          | 17           |
| 30              |     | 115   | 4     | 30C1-05P4-2W115  | 90303005  | 25          | 16           |
|                 |     | 230   | 4     | 30C1-05P4-2W230  | 90303010  | 25          | 16           |

Note: All units have 10 foot long SJ00W leads.

**Tank Notes:**

- The bottom of the excavation for the tanks shall be level and free of large rocks and debris.
- All tanks are to be set level on a layer, with a minimum thickness of 4 inches, of sand, sandy loam, clay loam, or pea gravel.
- Risers are required over all tank openings and must extend 2" above grade
- Risers shall be permanently fastened to the tank lid.
- The riser lid shall screw down and have a lock or weight 65lbs.
- A secondary plug, cap, or other suitable restraint system shall be provided below the riser cap.
- All openings in the tank must be properly sealed to prevent the escape of wastewater, or to prevent the infiltration of water.
- Tanks must be filled with water for 24-hours to test for leaks and structural integrity.
- The tanks must be set low enough to have fall of at least 1/8" per foot from house to tank.
- PVC pipe from house to tank must be at least Sch.40 or SDR 26.

**Additional Notes:**

- Install audio-visual alarm for aerator and pump on separate breakers.
- The high water and air compressor alarms shall be audio/visual and mounted in a place that can be easily seen and heard when the alarms are activated.
- A hose bib must be installed in pump tank at tank inspection port.
- The chlorinator must be constructed to allow a chlorine residual of 0.1mg/1 in the pump tank for the period of time between scheduled inspections. The disinfected effluent must obey the standards as stated in §285, TCEQ, On-Site Sewage Facilities. Approved disinfection methods using chlorinated tablets, must use calcium hypochlorite that is properly labeled for wastewater disinfections.

**Maintenance Requirements:**

- The applicant must furnish to the regulatory authority a valid maintenance contracts with a certified maintenance company before a permit will be issued.
- The maintenance company will verify that the system is operating properly and that they will provide on-going maintenance of the installation.
- The initial contract will be a minimum of 2 years.
- A maintenance contract will authorize the Maintenance Company to maintain and repair the system as needed.
- The owner must continuously maintain a signed written contract with a valid maintenance company and shall submit a copy of the contract to the permitting authority at least 30 days prior to the date service will cease.

**Affidavit:**

- The applicant must file a certified copy of an affidavit at the County Clerk's office and filed in reference to the real property deed on which the surface application system is to be installed.
- The affidavit will state that the property shall not be transferred to a new owner without:  
(1) The new owner being advised that the property contains a surface application system for wastewater disposal;



CS 6-27-15

- (2) The permit issued to the previous owner of the property being transferred to the new owner in accordance with §285.20(5) of the TCEQ OSS Rules, i.e.; the permit will be issued in the name of the owner of the OSSF. Permits shall be transferred to the new owner automatically upon legal sale of the OSSF. The transfer of an OSSF permit under this section shall occur upon actual transfer of the property on which the OSSF is located unless the ownership of the OSSF had been severed from the property.
- (3) The new owners submitting a valid maintenance contract to the permitting authority.

### Operation and Management Notes:

- The OSSF should not be treated as a normal city Sewer.
- Water conservation practices should be used at all times. Consult your local authorities for more information.
- Run the dishwasher with a full load whenever possible.
- Avoid running water continuously when brushing teeth, washing hands, or cleaning food and utensils.
- Repair any water leaks immediately, such as running toilets or leaky faucets.
- The owner is responsible for cleaning and pumping the septic tank, typically every 2 to 3 years depending on system usage.
- Do not use the toilet to dispose of tissue, feminine hygiene products, trash, cigarettes, etc.
- It is recommended that you do not use the garbage disposal and/or garbage grinders in the facility serviced by this system.
- Household chemicals should be used in moderation.
- According to §285, no water softener will be allowed to enter the OSSF.
- Chemical additives or the so-called enzymes should not be used during the operation of this system. Some of these additives may even be harmful to the facilities operation.
- Do not build driveways, storage buildings, decks, or other structures over the tank or disposal area.
- The OSSF must be protected from coming in contacts with vehicular traffic.
- A strong vegetative cover is essential for the proper operation of this system. The property owner is solely responsible for maintaining this vegetation. The irrigation area should be groomed by mowing on a regular basis.
- If you notice a problem with the spray patterns, or any of the alarms are activated, contact your maintenance provider immediately.
- Never place a greater wastewater load on your system than that prescribed by the design of the system **(240 gallons per day)**.

\*The proposed system has been designed generally following the minimum requirements under TCEQ §285 On-Site Sewage Facilities. The site evaluation and subsequent design are based on technical information currently available. The performance of the OSSF is not, and cannot be guaranteed even though all provisions of the Standards have been complied with. If failure should occur, additions to the OSSF may have to be made. In extreme cases a substitute system may be required. By accepting this design, the homeowner/contractor understands the aforementioned conditions, and agrees that the designer will not be liable for any more than the agreed upon design.



**ON-SITE SEWAGE FACILITY (OSSF)  
SITE EVALUATION FORM**

**1. OWNER INFORMATION:**

Property Owner's Full Legal Name: Oldham

**2. PROPERTY INFORMATION (the property or tract for which an Application has been submitted under the Hays County Development Regulations):**

911 street address for the Subject Property (if established):

City: Fischer

Zip Code: 78623

Legal description:

Lot: 208 Block: Subdivision: Sec: 1 Phase:

If not located in a subdivision: Survey:

Abstract:

Recorded (Vol/Page):

If a 911 street address has not yet been assigned to the Subject Property, the Applicant must contact the 911 Coordinator at (512) 393-2160 to obtain an address.

**3. SITE EVALUATION INFORMATION:**

Name of Site Evaluator: Corrie Smith

OS#: 0029488

Date Performed: 6-25-25

Proposed Excavation Depth: NA

**4. REQUIREMENTS:**

- At least two soil evaluations must be performed on the site at opposite ends of the proposed disposal area. Locations of soil evaluations must be shown on the application site drawing or designer's site drawing.
- For subsurface disposal, soil evaluations must be performed to a depth of at least 2 feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.
- Please describe each soil horizon and identify any restrictive features in the space provided below. Draw lines at the appropriate depths.

Soil Profile Hole Number: 1

| Depth (ft)   | Textural Class | Gravel Analysis | Drainage (Mottles/Water Table) | Restrictive Horizon | Observations                         |
|--------------|----------------|-----------------|--------------------------------|---------------------|--------------------------------------|
| 0            |                |                 |                                |                     |                                      |
| 1 <u>12"</u> | <u>IV</u>      | <u>L 30%</u>    | <u>—</u>                       | <u>rock</u>         | <u>Suitable for spray irrigation</u> |
| 2            |                |                 |                                |                     |                                      |
| 3            |                |                 |                                |                     |                                      |
| 4            |                |                 |                                |                     |                                      |
| 5            |                |                 |                                |                     |                                      |

| Soil Profile Hole Number: <u>2</u>    |                   |                    |                                      |                        |                                          |
|---------------------------------------|-------------------|--------------------|--------------------------------------|------------------------|------------------------------------------|
| Depth<br>(ft)                         | Textural<br>Class | Gravel<br>Analysis | Drainage<br>(Mottles/Water<br>Table) | Restrictive<br>Horizon | Observations                             |
| 0<br>1 <u>12"</u><br>2<br>3<br>4<br>5 | <u>IV</u>         | <u>430%</u>        | <u>—</u>                             | <u>rock</u>            | <u>suitable for spray<br/>irrigation</u> |

**5. FEATURES OF SITE AREA:**

Presence of 100 year flood zone

Presence of adjacent ponds, streams, water impoundments

Existing or proposed water well in nearby area

Organized sewage available to lot or tract

Recharge features within 150 feet

**This site is suitable for a standard On-Site Sewage Facility**

|                              |                                        |
|------------------------------|----------------------------------------|
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

6. I certify that the above statements are true and correct and are based on my own field observations.

Signature of Site Evaluator: X

Print Name: Corrie Smith

Date: 6-25-25



# COMAL COUNTY

## ENGINEER'S OFFICE

RE: ***415 Lets Roll Dr.***  
***Summit Estates 1***  
***Lot 208***

Dear Property Owner & Agent,

Thank you for your submission. We have reviewed the planning materials for the referenced permit application, and unfortunately, they are insufficient. To proceed with processing this permit, we require the following:

1. Planning materials state that there is a 1-bedroom less than 1000 sq.ft.
  -  1-bedroom detached living also needs to be on the application
  -  The Minimum GPD for a 3-bedroom home <2500sq.ft. and a 1-2Bedroom home <1500 sq.ft. per 285.91(3) is 420 GPD.
  -  Application page 2:
    - i. Minimum size for ATU per 285.91(2) would be 720 GPD.
-  2. Application and site plan state a NuWater 550.
  - a. Planning materials state NuWater 800
3. Site Plan:
  -  Show the location of the 1-bedroom detached living.
  -  Show the length of tightline.
  -  Show the length of distribution line.
-  4. Provide the signed and sealed pump tank details page.
5. Revise accordingly and resubmit.

If you have any questions, you can email me or call the office.

Thank You,

**| Brandon Olvera | Designated Representative OS0034792 |**

**| t: 830-608-2090 | e: [olverb@co.comal.tx.us](mailto:olverb@co.comal.tx.us) |**

## Olvera,Brandon

---

**From:** Olvera,Brandon  
**Sent:** Monday, August 25, 2025 1:01 PM  
**To:** Bucky Smith  
**Subject:** RE: 118870.pdf

Property Owner/Agent,  
File has been updated.

- ✓ 1. Site Plan:
  - ✓ a. Show the length of the tight line.
  - ✓ b. Show the link of the distribution lines.
2. Revise accordingly.

**| Brandon Olvera | Designated Representative OS0034792 |**  
**| t: 830-608-2090 | e: [olverb@co.comal.tx.us](mailto:olverb@co.comal.tx.us) |**

Design Report  
On-Site Sewage Facility  
Aerobic Wastewater Treatment System  
Utilizing Surface Spray Application

**Owner/Site Location:**

Oldham Residence

415 Lets Roll Dr

El Paso, TX



CD 6-27-25

**Site Description & Evaluation:**

A site evaluation indicated that the site is suitable for an aerobic surface irrigation system. The spray area has a slope of less than 15% and there was no evidence of shallow groundwater. This home will utilize a public sewer surface source. All portions of the OSSF must maintain at least a 3-foot depth from all water sources. A portion of the property within the regular floodplain. No structures are located within the floodplain portion of the spray field is. There were no recharge structures found within 150 feet of the proposed OSSF. Minimum separation is maintained as stated in Chapter 285 (Texas On-Site Sewage Facilities, must be maintained in an existing permitted system. The spray heads are being relocated to accommodate the addition of the new court.

**Wastewater Design Flow:**

This design is for a 3 bedroom home <2500 square feet and a 1 bedroom guest house < 1000 square feet..Low flow fixtures will be utilized. System is designed for 240 gallons per day. .

**Aerobic Treatment System Description:**

This residence will utilize a Nuwater B-800 ATU. Wastewater from the residence will flow to a 431 gallon trash tank followed by 800 gallon per day aeration treatment tank. Effluent from the aeration tank will flow through a NSF approved liquid chlorinator to an 854 gallon pump tank. The pump tank will discharge to sprinkler heads. The disposal area will consist of two 25 ft. 360 degree spray patterns This system is considered a package system and will be installed to manufacturer's instructions.. **This OSSF meets all the requirements of the existing CZP.**

# Assembly Details

OSSF

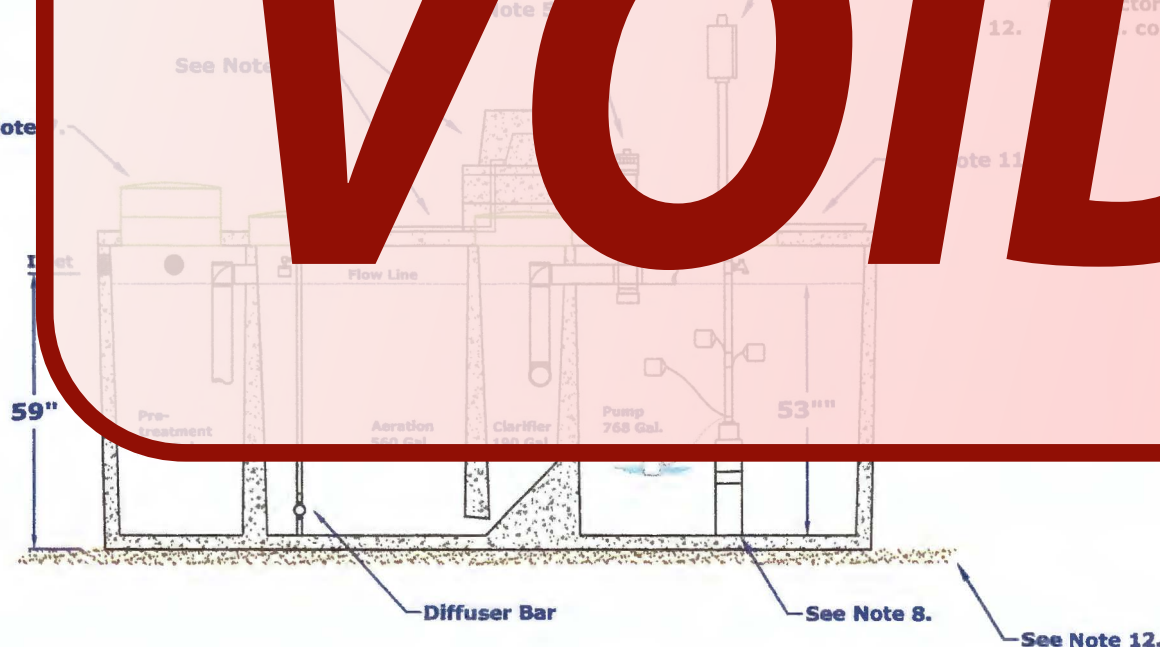


## GENERAL NOTES:

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.
5. Standard tablet chlorinator or Optional liquid chlorinator. NSF approved chlorinators (tablet & liquid) available.
6. Blo-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" Ø flush head effluent pump.
9. 1/2" H.P. pump w/ concrete housing (Max. 50 Lft from plant).
10. 1/2" H.P. pump (Max. 50 Lft from plant).
11. 1/2" H.P. pump (Max. 50 Lft from plant).
12. 1/2" H.P. pump (Max. 50 Lft from plant).

**VOID**

See Note 9.



## DIMENSIONS:

Outside Height: 67"  
Outside Width: 63"  
Outside Length: 166"

## 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-8550-3

**Advantage**  
Wastewater Solutions, Inc.

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

Oldham Residence  
415 Lets Roll Drive  
Fischer, TX 78623

### LEGEND

- A: Existing 3 Bedroom, Single Family Residence, < 2,500 Sq. Ft.  
B: 3" or 4" SCH 40 PVC Pipe with Two Way Clean Out  
C: NuWater Aerobic Treatment Unit, Model B-550  
D: 1" SCH 40 Purple PVC Pipe  
E: K-Rain Pro Plus Low Angle Spray Head, Nozzle #4, Radius @ 25'

- F: Waterline  
G: Sport Court  
H: Garage  
I: Driveway  
J: Existing Spray Head (to be removed)

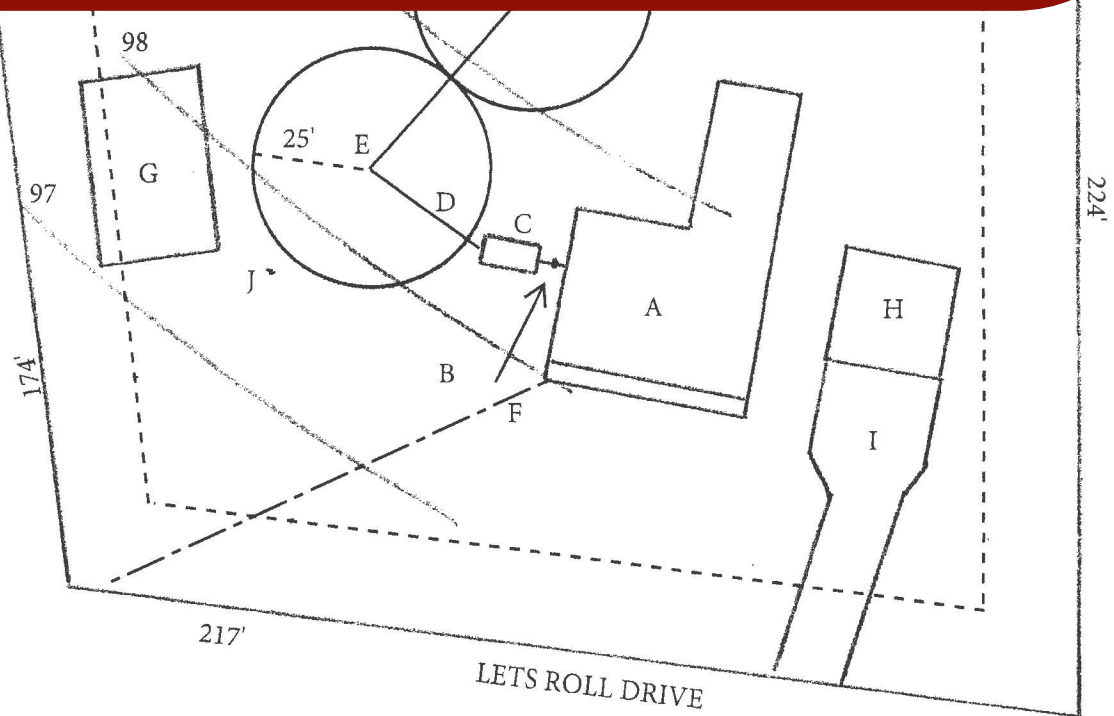
### PROPOSED NOTES

- 20' OSSP Back on All Property Lines  
5' Septic Setback from Structures

**VOID**



SCALE  
1 INCH = 40 FEET





Jfm

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**Date: October 16, 2015

Grantor: Xavier A. Perea, Jr, his sole and separate property

Grantor's Mailing Address:

25914 Timberline Dr  
San Antonio, TX 78620

Grantee: Joseph Oldham and Rose Oldham

Grantee's Mailing Address:

880 Wayside Dr  
Wimberley, TX 78676

Consideration: TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged.

Property (including any improvements):

**Lot 208, of THE SUMMIT ESTATES AT FISCHER, TEXAS, UNIT 1,** situated in Comal County, Texas, according to the Map or Plat thereof recorded in/under Volume 14, Pages 261-268, of the Map and Plat Records, Comal County, Texas.

Reservations from Conveyance: None

Exceptions to Conveyance and Warranty:

Liens, if any, described as part of the Consideration and any other liens described in this deed as being either assumed or subject to which title is taken; validly existing easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded and validly existing instruments, other than conveyances of the surface fee estate, that affect the Property; and taxes for the current year, which Grantee assumes and agrees to pay.

RECEIVED

NOV 05 2015

COUNTY ENGINEER

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.

  
Xavier A. Perea, Jr

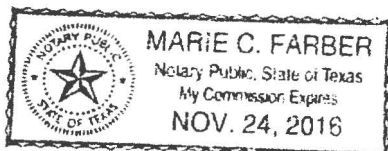
RECEIVED

NOV 05 2015

STATE OF TEXAS )  
COUNTY OF Hays )

COUNTY ENGINEER

This instrument was acknowledged before me October 16, 2015 by Xavier A. Perea, Jr.



  
Notary Public, State of Texas

Grantee's Address/Return to:

Joseph and Rose Oldham  
880 Wayside Dr  
Wimberley, TX 78676

After recording, please return to:

Gracy Title  
8015 North Shoal Creek Blvd., Suite 113  
Austin, TX 78757

GF#01247-48862-MF

2

Filed and Recorded  
Official Public Records  
Bobbie Koepp, County Clerk  
Comal County, Texas  
10/19/2015 09:28:41 AM  
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