

Comal County Environmental Health

OSSF Inspection Sheet

Installer Name: _____

OSSF Installer #: _____

1st Inspection Date: _____

2nd Inspection Date: _____

3rd Inspection Date: _____

Inspector Name: _____

Inspector Name: _____

Inspector Name: _____

Permit#:

Address:

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

Inspector Notes:

**Comal County Environmental Health
OSSF Inspection Sheet**

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

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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)				

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

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



COMAL COUNTY

ENGINEER'S OFFICE

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

Permit Number: 118880

Issued This Date: 08/22/2025

This permit is hereby given to: STEPANSKI LIVING TRUST, dated August 4, 2023

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

123 VISTA VIEW PLACE
SPRING BRANCH, TX 78070

Subdivision: MYSTIC SHORES

Unit: 20

Lot: 2211

Block: 0

Acreage: 3.0100

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

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

		118880
<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

07/26/2025

Date

___ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

INCOMPLETE APPLICATION (Missing Items Circled, Application Refused)
--



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

Permit Number 118880

Owner Name	STEPANSKI LIVING TRUST, dated August 4th 2023
Mailing Address	123 VISTA VIEW PLACE
City, State, Zip	SPRING BRANCH TEXAS 78070
Phone #	830-580-7248
Email	alan@halyardhome.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

Subdivision Name MYSTIC SHORES Unit 20 Lot 2211 Block
Survey Name / Abstract Number Acreage
Address 123 VISTA VIEW PLACE City SPRING BRANCH State TX Zip 78070

☒ Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) EXISTING HOUSE AND DETACHED LIVING

Number of Bedrooms 4+1

Indicate Sq Ft of Living Area 2642+999

☐ 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: \$ 200,000 (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 Coral 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.

X Robert Stepanek
Signature of Owner
Rau Stepanek

4/19/25
Date 4/19/25



COMALCOUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

MYSTIC SHORES, UNIT 20, LOT 2211

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

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

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) NUWATER B-550-PC (#109872) Absorption/Application Area (Sq Ft) 5772

Gallons Per Day (As Per TCEQ Table 111) 360

(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

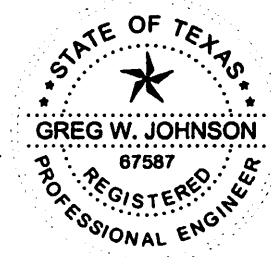
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP.)

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

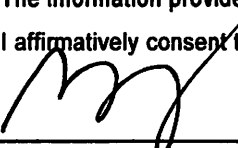
If yes, indicate the city: _____



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

March 25, 2025

Date

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

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities (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):

20 UNIT/PHASE/SECTION BLOCK 2211 LOT MYSTIC SHORES SUBDIVISION

IF NOT IN SUBDIVISION: ACREAGE SURVEY

The property is owned by (insert owner's full name): STEPANSKI LIVING TRUST, dated August 4th, 2023

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 19 DAY OF April, 20 25

X Robert Paul Stepanski
X Traci Lynn Stepanski

ROBERT PAUL STEPANSKI - Trustees

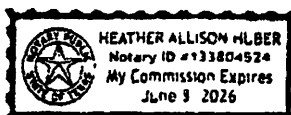
TRACI LYNN STEPANSKI - Trustee

Owner(s) signature(s)
ROBERT PAUL STEPANSKI &
TRACI LYNN STEPANSKI

Owner (s) Printed name (s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS April 19 DAY OF 20 25

Heather Allison Hilber
Notary Public Signature



**THE COUNTY OF COMAL
STATE OF TEXAS**

CERTIFICATION OF SINGLE FAMILY DWELLING

According to Texas Commission of Environmental Quality Rules for On-Site Sewage Facilities, this document is filed in the Deed Records of COMAL COUNTY, TEXAS.

I

ROBERT PAUL STEPANSKI & TRACI

Before me this day appeared LYNN STEPANSKI - Trustees, being the owners of the referenced property at 123 VISTA VIEW. They further state that the Residence and any additional living space on this property will be occupied only by a single family.

An OSSF requiring a Certification of Single Family Dwelling, will be installed on the property described as:

20 UNIT BLOCK 2211 LOT MYSTIC SHORES SUBDIVISION

IF NOT IN SUBDIVISION: ACREAGE SURVEY

The property is owned by STEPANSKI LIVING TRUST, dated August 4th, 2023

WITNESS MY HAND ON THIS 19 OF DAY OF April, 20 25.

X Robert Paul Stepanski
OWNER (SIGNATURE)

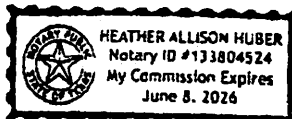
Traci Lynn Stepanski
OWNER (SIGNATURE)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 19 DAY OF April, 20 25 BY

ROBERT PAUL STEPANSKI - TRUSTEE
OWNER NAME (PRINTED)

TRACI LYNN STEPANSKI - TRUSTEE
OWNER NAME (PRINTED)

Heather Allison Huber
Notary Public Signature



Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
05/19/2025 08:53:21 AM
MARY 2 Pages(s)
202506014574



Bobbie Koepp

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

March 21, 2025

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

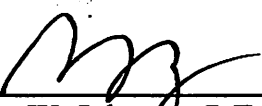
RE- SEPTIC DESIGN
123 VISTA VIEW PLACE
MYSTIC SHORES, UNIT 20, LOT 2211
SPRING BRANCH, TX 78070
STEPANSKI LIVING TURST, dated 8/4/2023

Brandon/Brenda,

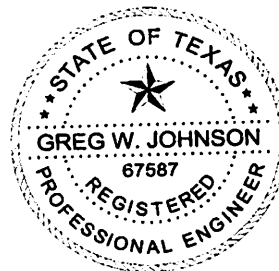
The referenced property is located within the Edwards Aquifer Contributing Zone. This OSSF design will comply with requirements in the CZP.

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).

 03/21/25

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: March 20, 2025

Site Location: MYSTIC SHORES, UNIT 20, LOT 2211

Proposed Excavation Depth: N/A

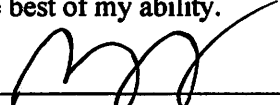
Requirements:

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 @ 10"	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.

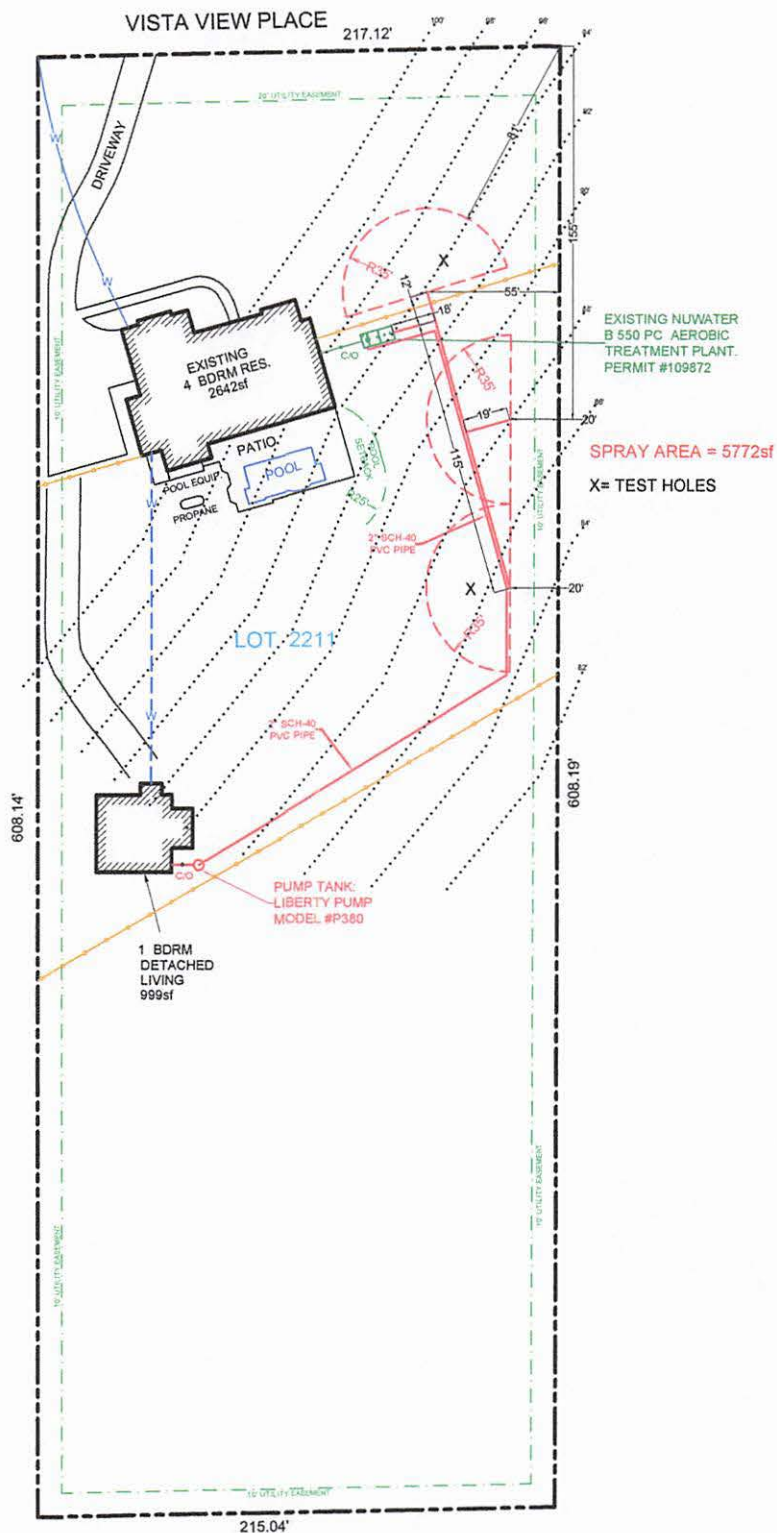


Greg W. Johnson, P.E. 67587-F2585, S.E. 11561

03/20/25

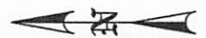
Date

NOTE:
EXISTING SEPTIC
FIELD TO BE
ABANDONED.



OWNER: The STEPANSKI LIVING TRUST Dated AUGUST 4, 2023				DRAWN BY: EJS III	
STREET ADDRESS: 123 VISTA VIEW PLACE					
LEGAL DESC: MYSTIC SHORES			UNIT/SECTION/PHASE: 20	BLOCK:	LOT: 2211
PREPARED BY: GREG W. JOHNSON, P.E. F#002585		SCALE: 1"=80'	DATE: 3/21/2025		REVISED:

VISTA VIEW PLACE



OWNER: The STEPANSKI LIVING TRUST Dated AUGUST 4, 2023		DRAWN BY: EJS III	
STREET ADDRESS: 123 VISTA VIEW PLACE			
LEGAL DESC: MYSTIC SHORES		UNIT/SECTION/PHASE: 20	BLOCK: LOT: 2211
PREPARED BY: GREG W. JOHNSON, P.E. F#002585		SCALE: 1"=50'	DATE: 3/21/2025 REVISED:

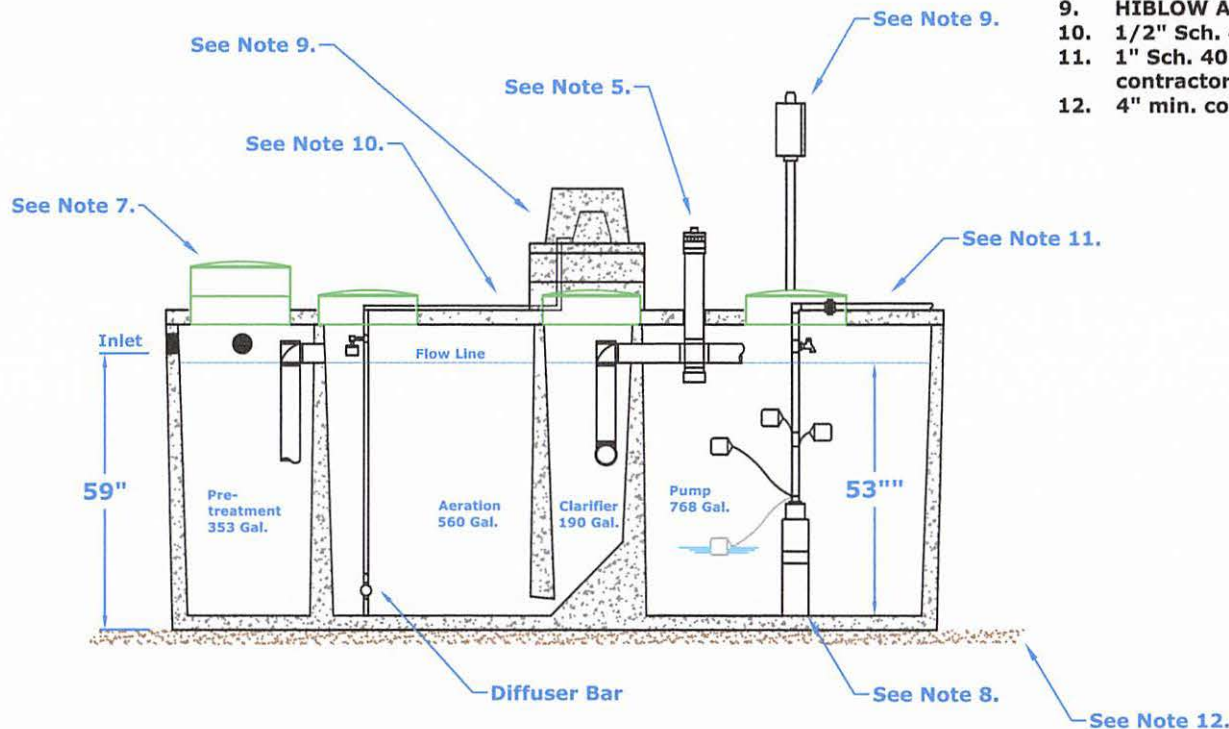
Assembly Details

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. 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

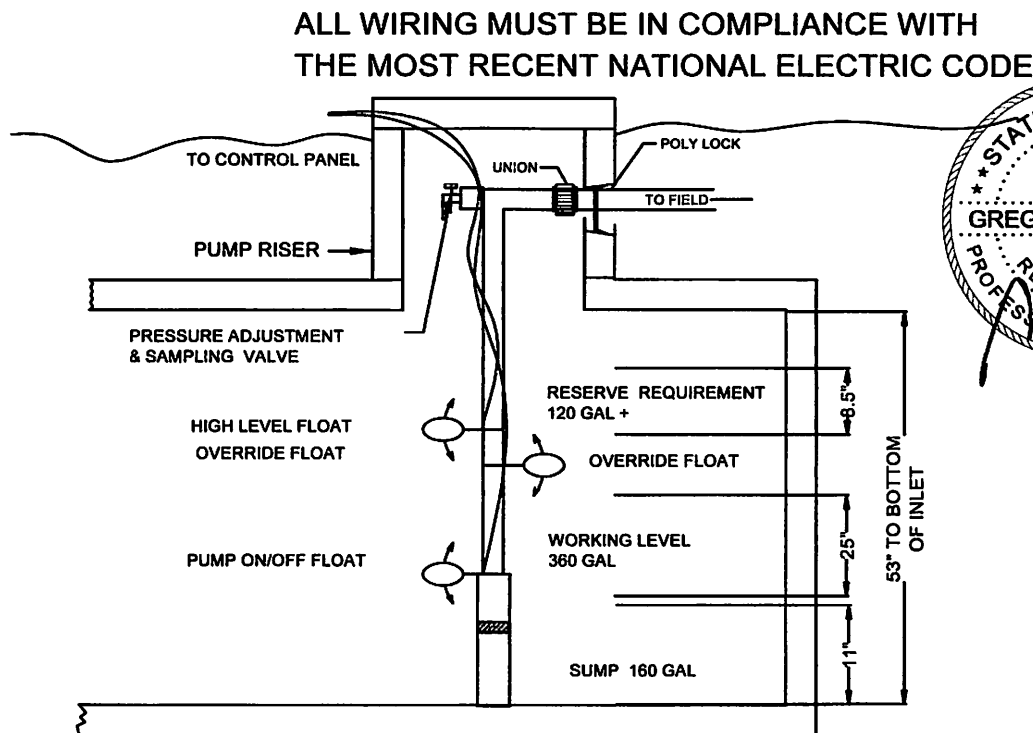
TANK NOTES:

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



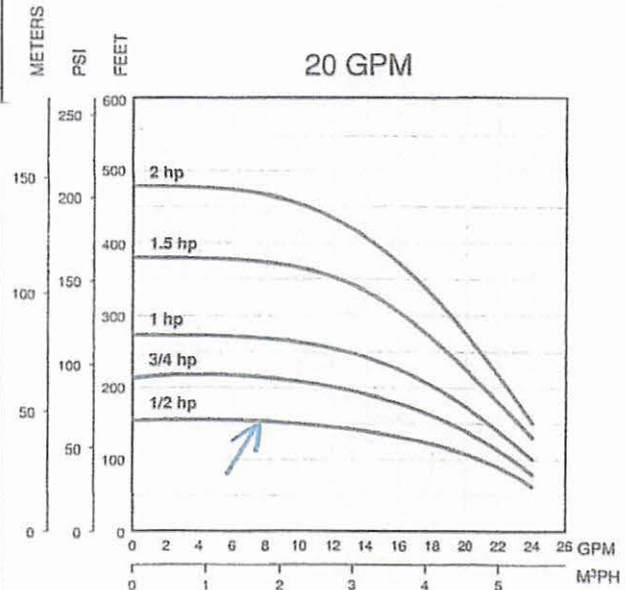
**TYPICAL PUMP TANK CONFIGURATION
NU-WATER 550PC -400PT 768 GAL PUMP TANK**

T3 / T35 Performance

						Metric				
Nozzle	Pressure PSI	Radius ft.	Flow gpm	Precipita in/hr	Precip. in/hr ▲	Pressure BAR	Radius m	Flow m ³ /hr	Precip. mm/hr ■	Precip. mm/hr ▲
SMARTANGLE 13° LOW ANGLE TRAJECTORY										
2.0LA	30	29	1.6	0.37	0.42	2.1	8.8	0.36	9	11
	40	33	1.9	0.34	0.39	2.8	10.1	0.43	9	10
	50	34	2.1	0.35	0.40	3.4	10.4	0.48	9	10
2.5LA	30	31	2.1	0.42	0.49	2.1	9.4	0.48	11	12
	40	35	2.6	0.41	0.47	2.8	10.7	0.59	10	12
	50	36	2.9	0.43	0.50	3.4	11.0	0.66	11	13
3.5LA	30	31	2.7	0.54	0.62	2.1	9.4	0.61	14	16
	40	35	3.2	0.50	0.58	2.8	10.7	0.73	13	15
	50	37	3.5	0.49	0.57	3.4	11.3	0.79	13	14
4.5LA	30	33	3.0	0.53	0.61	2.1	10.1	0.68	13	16
	40	37	3.4	0.48	0.55	2.8	11.3	0.77	12	14
	50	37	4.1	0.58	0.67	3.4	11.3	0.93	15	17
FLOW+ NOZZLES 26° TRAJECTORY										
9	50	50	9.5	0.73	0.84	3.4	15.2	2.16	19	21
	60	54	10.8	0.71	0.82	4.1	16.5	2.45	18	21
	70	55	11.7	0.74	0.86	4.8	16.8	2.66	19	22
13	50	57	12.4	0.73	0.85	3.4	17.4	2.82	19	22
	60	59	13.8	0.76	0.88	4.1	18.0	3.13	19	22
	70	61	14.9	0.77	0.89	4.8	18.6	3.38	20	23

■ Square spacing based on 50% of diameter
▲ Triangular spacing based on 50% of diameter
Note: All precipitation rates are calculated for 180° operation.
Divide by 2 for full circle precipitation rates

Thermoplastic Performance



Thermoplastic Units Ordering Information

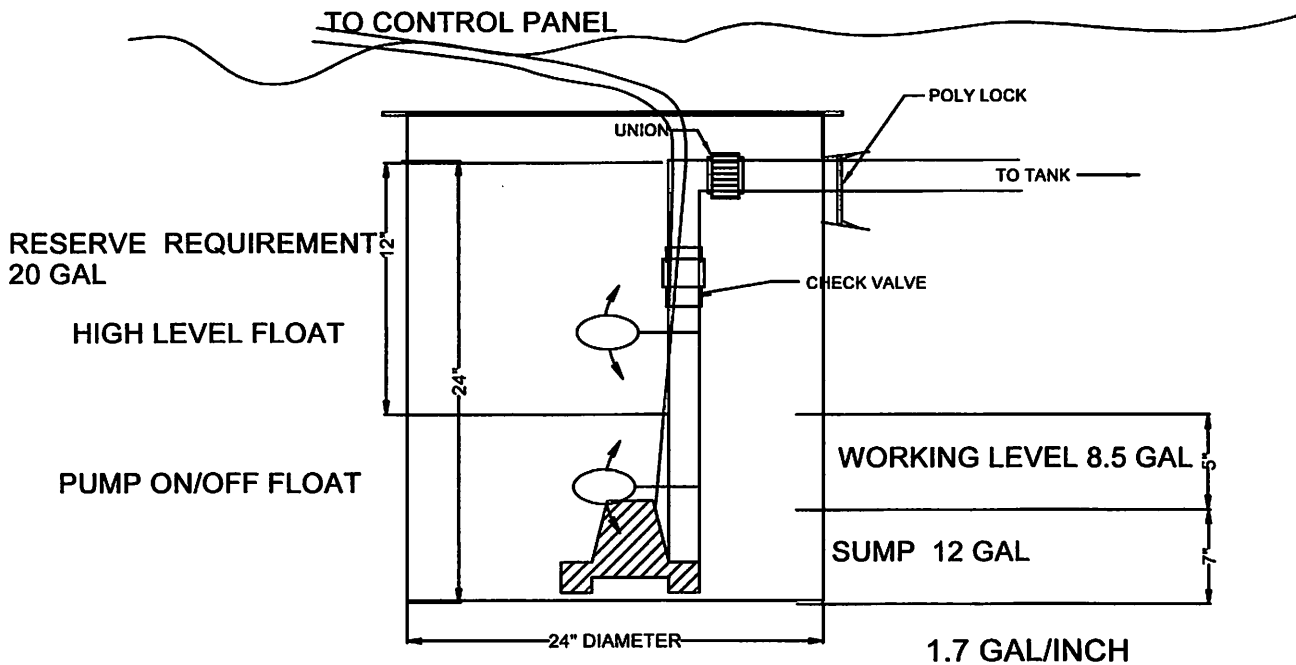
1/2 - 1.5 HP Single-Phase Units

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

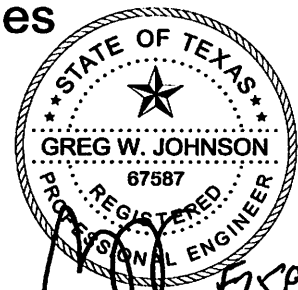
Thermoplastic 1/2 - 2 HP Pump Ends

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

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



TYPICAL PUMP TANK CONFIGURATION LIBERTY PUMPS PRO380 Series



Handwritten signature and date:
F2585
03/21/25

CCEO COPY



COMAL COUNTY

ENGINEER'S OFFICE

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: 11/21/2019 Permit Number: 109872

Location Description: 123 VISTA VIEW PLACE
SPRING BRANCH, TX 78070

Subdivision: Mystic Shores
Unit: 20
Lot: 2211
Block:
Acreage:

Type of System: Aerobic
Surface Irrigation

Issued to: Robert & Traci Stepanski

This license is authorization for the owner to operate and maintain a private facility at the location described in accordance to the rules and regulations for on-site sewerage facilities of Comal County, Texas, and the Texas Commission on Environmental Quality.

The license grants permission to operate the facility. It does not guarantee successful operation. It is the responsibility of the owner to maintain and operate the facility in a satisfactory manner.

Alterations to this permit including, but not limited to:

- Increase in the square feet of living area
- Increase in the number of bedrooms
- A change of use (i.e. residential to commercial)
- Relocation of system components (including the relocation of spray heads)
- Installation of landscaping
- Adding new structures to the system

may require a new permit. **It is the responsibility of the owner to apply for a new permit, if applicable.**

Inspection and licensing of a facility indicates only that the facility meets certain minimum requirements. It does not impede any governmental entity in taking the proper steps to prevent or control pollution, to abate nuisance, or to protect the public health.

This license to operate is valid for an indefinite period. The holder may transfer it to a succeeding owner, provided the facility has not been remodeled and is functioning properly.

Licensing Authority
Comal County Environmental Health


OS0034792
ENVIRONMENTAL HEALTH INSPECTOR


OS0007722
ENVIRONMENTAL HEALTH COORDINATOR

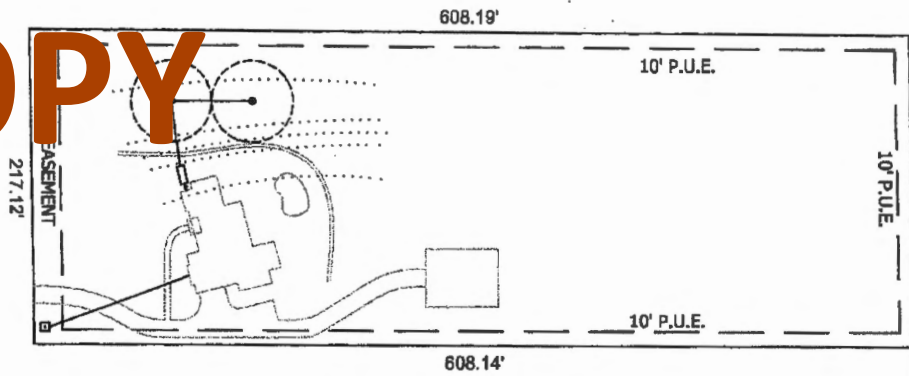
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RECEIVED

OCT 18 2019

COUNTY ENGINEER

LOT VIEW
SCALE: 1" = 120'



DETAIL VIEW
SCALE: 1" = 60'

CORRIE SMITH
RS # 3611
DR# 6532

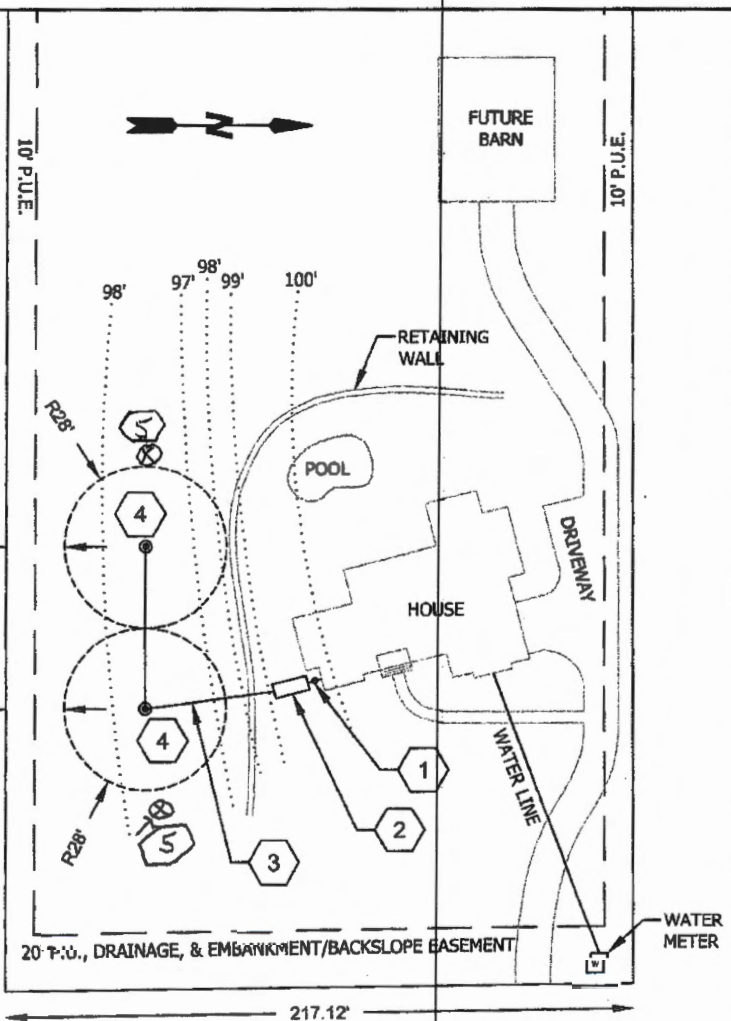
5-6-19

SYSTEM COMPONENTS:

- 1 5' SEWER LINE WITH SANITARY CLEANOUT
- 2 NuWater B-550 ATU
- 3 45' DISTRIBUTION LINE TO FIRST SPRINKLER HEAD
- 4 28' RADIUS SPRAY HEADS. 20' SETBACK FROM EDGE OF SPRAY RADIUS TO PROPERTY LINE.
- 5 Profile holes

NOTES:

1. RISERS TO GRADE ON ALL ACCESS PORTS.
2. PLANS MAY VARY SLIGHTLY BASED ON CONDITIONS FOUND IN THE FIELD.
3. ALL SEPARATIONS AND SETBACK REQUIREMENTS AS STATED IN CH. 285, TCEQ ON-SITE SEWAGE FACILITIES MUST BE MAINTAINED.



**SMITH SEPTIC DESIGN
AND CONSULTATION**

202 Reimer Ave
San Marcos, TX 78666
512-644-6980
smithsepticdesign@gmail.com



CUSTOMER
Stepanski Residence

SITE ADDRESS
123 Vista View Place
Spring Branch, TX

TITLE
SEPTIC DESIGN
PLAN

SCALE
As Noted

PROJECT No.
0133

DATE
.18 May 2019

SHEET No.
1 of 1

Grantors, for the consideration and subject to the reservations from and exceptions to

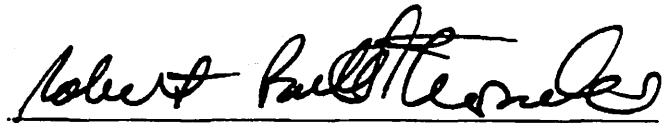
conveyance and warranty, grants, sells, and conveys to Grantee all of their interest in the property, together with all and singular the rights and appurtenances thereto in any wise belonging, to have and hold it to Grantee, Grantee's heirs, executors, administrators, successors, or assigns forever. Grantors bind Grantors and Grantor's heirs, executors, administrators, and successors to warrant and forever defend all and singular the property to Grantee and Grantee's heirs, executors, administrators, successors, and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, except as to the reservations from and exceptions to conveyance and warranty, when the claim is by, through, or under Grantors but not otherwise.

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

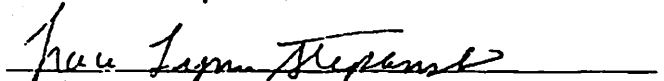
Grantee assumes all ad valorem taxes due on the property for the current year.

Marquardt Law Firm and its agents, representatives and employees have not conducted any examination of the title to the property and have not made any representations as to the validity, marketability, merchantability or indefeasibility of the title.

EXECUTED this 4th day of August, 2023.



Robert Paul Stepanski, Grantor




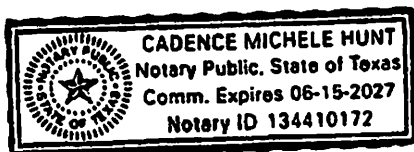
Traci Lynn Stepanski, Grantor

STATE OF TEXAS
COUNTY OF BEXAR

§
§

Before me, the undersigned authority, on this day personally appeared Robert Paul Stepanski and Traci Lynn Stepanski, who produced their driver's licenses issued by Texas that contained each of their photograph and signatures as identification thereby proving them to be the persons who's names are subscribed to the foregoing instrument as Grantors, and acknowledged to me that each of them executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office, on August 4th, 2023.


Notary Public, State of Texas

**GRANTEE'S ADDRESS FOR
TAX NOTICES:**

Robert Paul Stepanski and Traci
Lynn Stepanski, Trustees of the
Stepanski Living Trust
123 VISTA VIEW PL.
SPRING BRANCH, TEXAS
78070

PREPARED IN THE OFFICE OF:
MARQUARDT LAW FIRM, P.C.:
14603 Huebner Rd., Ste. 3801
San Antonio, Texas 78230
(210) 530-4278

WHEN RECORDED, RETURN TO:
MARQUARDT LAW FIRM, P.C.:
14603 Huebner Rd., Ste. 3801
San Antonio, Texas 78230
(210) 530-4278

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
08/07/2023 09:59:39 AM
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Bobbie Koepp

