staller Name:	OSSF Installer #:	
1st Inspection Date:	2nd Inspection Date:	3rd Inspection Date:
Inspector Name:	Inspector Name:	Inspector Name:

Perm	it#:		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)				
	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)		285.32(a)(5)				
5	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)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

**Inspector Notes:** 

N-	December 41	A mar	Citotiana	Net	1 at 1	2 m d 1	7 mal 1
No.	Description SEPTIC TANK Tank(s) Clearly	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	Marked SEPTIC TANK IsingleTank, 2Compartments Provided withBaffle SEPTIC TANK Inlet Flowline Greater than3" and "T" Provided on Inlet and OutletSEPTIC TANK Septic Tank(s) MeetMinimum Requirements		285.32(b)(1) (E)285.91(2)285.32(b)(1) (F)285.32(b)(1)(E) (iii)285.32(b)(1)(E)(ii) (I)285.32(b)(1)(E) (i)285.32(b)(1)(E) (i)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (ii)285.32(b)(1) (B)285.32(b)(1) (A)285.32(b)(1)(E)(iv)				
1	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
	SEPTIC TANK Secondary restraint system providedSEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
	SEPTIC TANK Tank Volume Installed						
12							
	PUMP TANK Volume Installed						
1	AEROBIC TREATMENT UNIT Size Installed						
14							
	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number						
15	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)				
18			203.33(a)(2)				

	O331 inspection sheet								
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.		
19	DISPOSAL SYSTEM Drip Irrigation		285.33(c)(3)(A)-(F)						
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)						
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(4) 285.33(a)(3) 285.33(a)(1) 285.33(a)(2)						
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)						
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)						
24	DISPOSAL SYSTEM Other (describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)						
	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC								
26	DRAINFIELD Area Installed								
	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)						
	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media								
	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)						
	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)						
	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)						

	I I			- 	<u> </u>	I	I
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)				
	AEROBIC TREATMENT UNIT IS Aerobic Unit Installed According to Approved Guidelines.		285.32(c)(1)				
	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						
	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
	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 PUMP TANK Inspection/Clean Out						
37	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  PUMP TANK Electrical						
	Connections in Approved Junction Boxes / Wiring Buried						

				-			
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	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)(iii) 285.33(d)(2)(G)(iii)(I)				
	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)				
	APPLICATION AREA Area Installed						
	PUMP TANK Meets Minimum Reserve Capacity Requirements						
	PUMP TANK Material Type & Manufacturer						
	PUMP TANK Type/Size of Pump Installed						



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

Permit Number: 118935

Issued This Date: 09/10/2025

This permit is hereby given to: MICHELLE & JAMES ROMERO

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

488 LONG MEADOW

SPRING BRANCH, TX 78070

Subdivision: RIVER CROSSING

Unit: 2

Lot: 407

Block: NA

Acreage: 1.0300

#### APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic

Surface Irrigation

This permit gives permission for the construction of the above referenced on-site facility to commence. Installation must be completed by an installer holding a valid registration card from the Texas Commission on Environmental Quality (TCEQ). Installation and inspection must comply with current TCEQ and County requirements.

Call (830) 608-2090 to schedule inspections.



# ON-SITE SEWAGE FACILITY APPLICATION

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

Date 6/27/2025		Permit No	umber	
1. APPLICANT / AGENT INFORMATION				
Owner Name MICHELLE L. & JAMES ROMERO	Agent Name	Nicholas Ko	olbe	
Mailing Address 488 LONG MEADOW	Agent Address	1825 FM 24	138	
City, State, Zip SPRING BRANCH TX 78070	City, State, Zip			
Phone # 710.326.7696	Phone #	830-708-90		
Email ML ROMERO Z911@ GMail.com	Email		Co@Gmail.com	Total At Mary
2. LOCATION				
Subdivision Name RIVER CROSSING	U	Init 2	Lot 407	Block NA
Survey Name / Abstract Number NA			Acreage	1.03
Address 488 LONG MEADOW	City SPRING BR	ANCH	State TX	Zip 78070
3. TYPE OF DEVELOPMENT		4	X/	
Single Family Residential				
Type of Construction (House, Mobile, RV, Etc.) HOUSE				
Number of Bedrooms 4		This is a		
Indicate Sq Ft of Living Area <4500				
Non-Single Family Residential				
(Planning materials must show adequate land area for doubling	the required land need	ded for treatm	ent units and disp	osal area)
Type of Facility			Tribuna dal	
Offices, Factories, Churches, Schools, Parks, Etc Indic	ate Number Of Occi	ınants		
Restaurants, Lounges, Theaters - Indicate Number of Se		-		
Hotel, Motel, Hospital, Nursing Home - Indicate Number				
	01 0000			
Travel Trailer/RV Parks - Indicate Number of Spaces		Auto a		
Miscellaneous				
Estimated Cost of Construction: \$ 650,000.00	(Structure Only)			
Is any portion of the proposed OSSF located in the United St				
Yes No (If yes, owner must provide approval from USACE	for proposed OSSF impro	vements within	the USACE flowage	e easement)
Source of Water Public Private Well Rainwa	ater			
4. SIGNATURE OF OWNER				
By signing this application, I certify that:  - The completed application and all additional information submitted do facts. I certify that I am the property owner or I possess the appropria	oes not contain any fals ate land rights necessa	se information iry to make the	and does not core e permitted improv	nceal any material vements on said
<ul> <li>property.</li> <li>Authorization is hereby given to the permitting authority and designate site/soil evaluation and inspection of private sewage facilities.</li> <li>I understand that a permit of authorization to construct will not be issued.</li> </ul>				
by the Comal County Flood Damage Prevention Order.  - I affirmatively consent to the online posting/public release of my e-ma				
Middelle Romero & Rome	8/2/2025			
Signature of Owner	Date	1111		Page 1 of



### **ON-SITE SEWAGE FACILITY APPLICATION**

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

Planning Materials & Site Evaluation as Required Completed By Nicholas Kolbe
System Description Aerobic Treatment with SPRAY IRRIGATION
Size of Septic System Required Based on Planning Materials & Soil Evaluation
Tank Size(s) (Gallons) 600 GPD ATU  Absorption/Application Area (Sq Ft) 5635 SQFT ABS.
Gallons Per Day (As Per TCEQ Table III) 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)? X 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? X 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?
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.
Hille Ille 8.15.75
Signature of Designer Date



#### AFFIDAVIT TO THE PUBLIC



Notary Public, State of Teess Comm. Exp. 04-23-2026 ID No. 13153900-3 <del>0000000000000000000</del>

202506026010 08/15/2025 10:53:37 AM 1/2

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.

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 this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

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 407, RIVER CROSSING, UNIT TWO SUBDIVISION LOCATED IN COMAL COUNTY TEXAS The property is owned by (insert owner's full name): James Romero and Michelle Romero 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 2 DAY OF AUGUST 20 25 Owner(s) signature(s) SWORN TO AND SUBSCRIBED BEFORE ME ON THIS DAY OF Hugust Notary Public. State of Texas MARCELA A VILLEGAS



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.

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
08/15/2025 10:53:37 AM
PRISCILLA 2 Page(s)
202506026010

Bobbie Koepp

### **Bulldog Septic Services**

5361 Gin Rd, Marion Tx 78124 Tel.: (830) 583-7867

Permit#		
Regulatory	Agency Comal	

#### **COMMERCIAL INSPECTION & MAINTENANCE AGREEMENT**

Regular and continuing Maintenance is the single most important key to the long-term safe and successful operation of surface application systems utilizing aerobic treatment plants. The OWNER of an aerobic wastewater treatment system is a VITALKEY to its success or failure and thereby they must accept their responsibilities of its upkeep and maintenance. Bulldog Septic Services hereby enters this maintenance contract to assist the Owner in keeping his/her aerobic system operating properly and safely; and, to keep the owner in compliance with the Texas Commission on Environmental Quality (TCEQ) regulations. (Title 30 Texas Administrative Code, Chapter 285)

INSPECTION OF IXEMS: Items to be inspected include aerators, alarms, chlorine supply and disinfection system, diffusers, distribution systems, drip emitters, sludge volume, chlorine residual, electrical circuitry, filters and pumps.

FREQUENCY OF MAINENANCE INSPECTION: Buildog Septic Services will perform maintenance inspections to the owner's aerobic wastewater treatment system three (3) times a year at approximately four (4) month intervals. On each report the owner receives, it will indicate when their next schedule maintenance inspection will occur.

REPORTS: A report will be generated during each visit with one (1) copy submitted to the required regulatory agency, one (1) copy sent to the owner of the system and the original maintained in our files. The report will indicate the date the inspection was performed, owners name and address, the items inspected, sampling test results for Chlorine Residual, comments, recommendations, and/or repairs performed.

SAMPLING: A Chlorine Residual sample will be conducted during each maintenance inspection visit. Results will be recorded on each report. For commercial systems only, each year, one (1) Biological Oxygen Demand (BOD) and one (1) Total Suspended Solids (TSS) sample will be taken for laboratory analysis. The owner is responsible for the laboratory cost for these tests. The test results will be submitted to the required regulatory agency. REPAIRS: The owner of the acrobic wastewater treatment system is responsible for any cost associated with the repair or replacement of the system's components. Any repairs and/or replacement costs will be discussed with and accepted by the owner prior to any work performed by Bulldog Septic Services. Bulldog Septic Services will respond to non-scheduled services within 24 hours. There is additional fee for non-scheduled visits and/or service calls.

FEES: The cost of a maintenance agreement for the system listed below is: S. 540 and is valid for 1 we year(s). Payment is due at the time of contract signing. Failure to make payment within ten (10) days of date of the contract constitutes a breach of contract, and the appropriate regulatory agency will be notified of the cancellation of the contract. This maintenance agreement does not cover the cost of customer-requested service calls, materials or labor that are due to system or component failure. Non-scheduled visits and/or service calls requested by the owner will be at an additional charge. Invoices are due upon completion of the work performed and/or receipt of invoices.

#### OWNER'S RESPONSIBILITIES:

- The owner of the Aerobic Treatment Unit must maintain sufficient chloring (tablets or liquid) in the disinfection system at all times.
- The owner must maintain an area free of overgrowth or vegetation around the Aerobic Treatment Unit and sprinklers.
- Make your property accessible (gate unlocked or key/combination provided), and dogs restrained during each visit.
- The owner must follow the manufacturer's recommendations for the system's proper operation, including restricting the disposal of non-biodegradable material, chemicals, solvents, thinners, fuels, grease, oils, etc. that can effect the systems performance and/or pollute the environment.
- The owner must have their system repaired or components replaced immediately by a Certified Provider as needed.
- The owner must have their Aerobic Treatment Unit pumped out by a licensed waste hauler when their system exceeds 65% sludge volume.
- Bulldog Septic Services will advise you when this is necessary by conducting a free annual 30 minute settleometer test.
- The owner should keep fire ants away from the Aerobic Treatment unit and its components. Any damage caused by fire ants is not covered
  under any warranty. Bulldog Septic Services reserves the right to refuse service to systems infested by fire ants. A Travel charge shall be made
  for return visits, due to fire ant infestation or animals not restrained.

This contract is v	alid from: License to (	Operate	through	2 years from License	to Operate
Manufacturer:	Model:			Serial Number:	
Owner's Name:	Michelle & James R	tamero Sit	e Address: _	488 Long Meadow	
Mailing Address:	488 Long Meadow,	Spring Bra	nch, TX	78070	
Telephone: 210	-326-7696	_ Cell Phone:		Work Phone:	
Email: mirome	ero2911@gmail.com		Call or Text	Before Each Visit? Yes No	Gate Code:
				WILL -	
—signed by: Michelle Romero		8/2/202	5	SITUAL	MP2739
Signature of Own		Date		Scott Platt, MP	TCEQ License

#### **OSSF Soil & Site Evaluation**

		0001 0011	se Dite Evaluation	J.I.L	6/25/2025		
Page 1 (Soil	& Site Ev	raluation)	D	ate Performed	l://		
Property Own	er: MICHE	ELLE L. & JAMES ROMERO		_			
REQUIREM At least borings or dug pi least two feet bel	ENTS: F two soil exca ts must be sh ow the propo	PROPERTY ID: 50173 Evations must be performed on the own on the site drawing. For subsed disposal field excavation depth identify any restrictive features	e site, at opposite ends obsurface disposal, soil eth. For surface disposa	of the proposed disvaluations must be	e performed to a depth of at zon must be evaluated.		
Soil Boring Number:	1 - 2	<b>*</b>					
Depth (Feet)	Texture Class	Gravel Analysis (If Applicable)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations		
1 FT.	IA-ROCK	GREATER THAN 30%	WELL DRAINED	ROCK	AEROBIC SPRAY		
2 FT.	AT SURF	(CE					
3 FT.							
4 FT.					-		
5 FT.							
Soil Boring Number: Depth (Feet)	Texture Class	Gravel Analysis (If Applicable)	Drainage (Mottles/	Restrictive Horizon	Observations		
1 1000			Water Table)				
1 FT.							
2 FT.							
3 FT.							
4 FT. 5 FT.							
5F1.							
Existing or pro Ground Slope	per water s jacent pond oposed water	d zone	in 150 feet)		☐ Yes ☒ No atte to the best of my		
11-11	1/1/10		6/27/2025	OS003698	7		
(Signature of person performing evaluation) (Date) Registration Number and Type Form # PA3/2-2004-Revised-Final							

Page 2 (Soil & Site Evaluation):	
age 2 (Boil & Bite Livaldation).	Date Performed://
Site Location: 488 Long Madow, Spring	
Schematic of Show:	Lot or Tract
Compass North, adjacent streets, property lines, prope swimming pools, water lines, and any other structures Location of existing or proposed water wells within 15 Indicate slope or provide contour lines from the structifield.  Location of soil boring or excavation pits (show locati Location of natural, constructed, or proposed drainage water impoundment areas, cut or fill bank, sharp slope Lot Size: or Acreage:	where known. 50 feet of the property.  ure to the farthest location of the proposed disposal on with respect to a known reference point).  ways (ditches, streams, ponds, lakes, rivers, etc.), as and breaks.
SITE DR	AWING
See Des	ign

#### Nicholas Kolbe, R.S., S.E.

1825 FM 2438 Seguin, Texas 78155 Mobile 830-708-9065 KolbeLandCo@gmail.com

June 27th, 2025

Comal County Office of Environmental Health 195 David Jonas Dr. New Braunfels TX 78132-3760

RE- Septic Design 488 Long Meadow LOT 470, RIVER CROSSING, UNIT TWO Spring Branch TX 78070

BRANDON/BRENDA,

Due to the lack of available application area, it is necessary to have the setback from the property line to the spray at ten feet as required by TCEQ Chapter 285 rules Table X. I hereby request a variance from the twenty-foot setback to property lines as required by Comal County Order and equivalent protection will be maintained by including a battery backup to the timer clock to assure sprayers to only spray during the predawn hours. In my professional opinion this variance will not pose a threat to the environment or public health.

If I can be of further assistance please contact me.

Respectfully,

Nicholas Ryan Kolbe, R.S. #5115

9.8.25

Nicholas Kolbe

Date

#### Nicholas Kolbe, R.S. 5115

1825 FM 2438

Seguin, Texas 78155

Mobile (830) 708-9065 KolbeLandCo@Gmail.com

#### **OSSF DESIGN**

Nicholas Kolbe

8-15-25

Owner: MICHELLE L. & JAMES ROMERO

Location: 488 LONG MEADOW, SPRING BRANCH TX 78070

Phone:

Date: 6/27/2025

Development: Residence with water saving devices Bedrooms: 4 Sq. Ft living: <4500

GPD = 360

Q: 360 gpd Soil: Type IA R<sub>i</sub>: 0.064 gall/ft<sup>2</sup>/day

System Type: Aerobic/Surface Application (AERIS 600)

Trash Tank: 478 gall Aerobic Tank: 461 gpd Pump Tank: 763 gall

Supply Line: Sch 40, 1" purple (~125') Check Valve Required: YES

Minimum Application Area (A): = 5625 ft<sup>2</sup> (A =  $Q/R_i$ )

Sprinklers: K-Rain Super Pro 10003-RCW

Number	Nozzle	PSI	Pattern	Radius	Area/head	GPM/head	$\mathbf{R}_{\mathrm{i}}$
S1	#4	30	360°	31 ft	3017.5 ft <sup>2</sup>	3.4	0.064
<b>S2</b>	#4	30	360°	31 ft	3014.5 ft <sup>2</sup>	3.4	0.064

Overlap Area: 400sqft Actual Application Area: 5635 ft<sup>2</sup> GPM: 6.8 GPM

Pump Requirements: 6.8 GPM @ 87.37ft TDH Pump Used: StaRite, 20 GPM ½ HP

Elevation Head = 15ft

• Pressure Head = 30 psi x 2.30 = 69ft

- Friction Head of 125ft of 1" Sch 40 = 125ft x 0.0269 = 3.37 ft
- Total Dynamic Head (TDH) = 15 + 69 + 3.37 = 87.37 (StaRite 20GPM ½ HP)
- Timer set to spray between 12:00 AM & 5:00 AM
- Liquid chlorinator required

All design criteria are in accordance with TCEQ, Title 30, TAC Chapter 285, Subchapter D, On-Site Sewage Facilities (Effective December 27, 2012). The above design was based on the best available information and should function properly under normal operating conditions. All changes or modifications made to design must be approved by the below signed designer.

132.50 oTH, VIL spale 40. B 5 10 U,E 132.50

A = 3" or 4" SCH 40 PVC with 2way Clean Out, 5' from home to tank

B = Aerobic Treatment Plant (600 GPD ATU)

C = 1" SCH 40 PVC, Purple, 124.5"

D = TWO NO. 4 K-RAIN SPRAY HEADS OPERATING AT 31' RADIUSES, 360 DEGREES.

#### **NOTES**

- The Designed OSSF is meant to accommodate a maximum flow of 360 GPD for a 4 bedroom less than 4500 sqft home WITH WATER SAVING DEVICES. Overuse of 360 GPD may result in system failure.
- Install a 2-way cleanout in a 3" or 4" tightline between the house and the tank, slope 1/8in/ft. Tightline shall be 3" or 4" SCH 40 PVC. Approx. 5' between tank and home (A).
- 3. ATU is a minimum 600 gpd ATU (B).
- 4. \*\* INSTALL A BACKFLOW PREVENTION VALVE AFTER THE PUMP ON THE 1.00" PURPLE SUPPLY LINE TO PREVENT SECONDAY TREATED EFFLUENT FROM FLOWING BACK INTO THE TANK WHEN THE PUMP SHUTS OFF \*\*
- 5. Supply line to sprinklers is purple 1" sch 40, 124.5' (C).
- S1-S2 are K-Rain Proplus low angle sprinklers with #4 nozzles operating @ 30psi, 31' radius. All operating at 360 degree radiuses. All sprinklers have a GPM flow of 3.4. Total GPM flow is 6.8.
- 7. There shall be no obstructions within 10' of the sprinkler heads.
- Audible & visual alarms, external disconnect within site of the pump tank, pump & alarms on separate breakers and external wiring in conduit are required.
- 9. Timer set to spray between 12:00 AM & 5:00 AM.
- 10. The reserve capacity (1/3) of the daily flow for this system is 120 gallons
- 11. Liquid chlorinator required.
- 12. Any excavations and/or exposed rock in the disposal area shall be covered with topsoil and seasonal grasses shall be seeded over the disposal rea in order to minimize run-off & erosion. Erosion cloth is acceptable.
- 13. No part of the septic system absorption field is within 150' of any sensitive recharge feature. No part of the On Site Sewage Facility treatment tank is within 50' of any sensitive recharge feature. Potable waterline to be sleeved in sch 40 PVC to 10' of any element of the OSSF system in order to provide the equivalent protection of a 10' separation in compliance with TAC Chapter 290, Subchapter D, Rules for Public Drinking Water Systems.
- 14. Waterline shall not run horizonal with any OSSF tightline or 1" purple SCH 40 Distribution line within 10'
- 15. Septic tank shall stay a minimum of 10' from all potable waterlines or above ground storage tanks.
- 16. Entirety of septic system is to stay within the setbacks and boundary lines of property as noted on design.
- 17. Design and details written and drawn herein were prepared with the best available information provided to the Registered Sanitarian by the landowner and by ground truth/evaluation.
- 18. SEE ATTACHED VARIANCE REQUEST FORM FOR SPRAY SETBACK VARIANCE REQUEST.

Contributing Zone Plan (CZP) Notes

THIS OSSF DESIGN ADHERES TO THE EXISTING CONTRIBUTING ZONE PLAN (CZP) FOR RIVER CROSSING UNIT 2-4 FILED MARCH 1, 2000 Legal: LOT 407, RIVER CROSSING, UNIT TWO IN COMAL COUNTY TEXAS

Pro. ID # 50173

Entirety of Property and Septic ARE NOT located within 100YR Flood Plain.
SITE PLAN & OSSF DESIGN:

Nicholas Kolbe

5115

Aufafthir Onal Santrate

MICHELLE L. & JAMES ROMERO 488 LONG MEADOW SPRING BRANCH TX 78070

Nicholas Kolbe, R.S. #5115

1825 FM 2438 Seguin, TX 78155 Date: 6/3/2025

Scale: 1"= 80'



### **Aeris Aerobics Gallon Per Chamber:**

Aeris Systems Chambers:	Trash	Aeration	Clarifier	Pump
D-500m	568	371	197	763
D-600m	478	461	197	763
D-750	355	584	197	763
D-840	552	601	205	919
D-1100	807	836	300	
D-1500		1532	388	



June 4, 2015

Matt Dulworth Aeris Aerobics 5021 SE McKinney Rice, TX 75155

Re: Calculation of BOD Removal

Dear Matt,

Aeris Aerobics has requested the maximum amount of BOD removed from their units on a daily basis. NSF/ANSI Standard 40 requires the BOD to average 300 mg/day or less. Based on 300 mg/day, the maximum daily load removed by your units is set forth below:

the state of the s		
	300 mg/L	
Unit	Capacity gpd	lbs/day
D-500	500	1.3
D-600	600	1.5
D-750	750	1.9
D-840	840	2.1
D-890	890	2.2
D-1100	1100	2.8
D-1250	1250	3.1
D-1500	1500	3.8

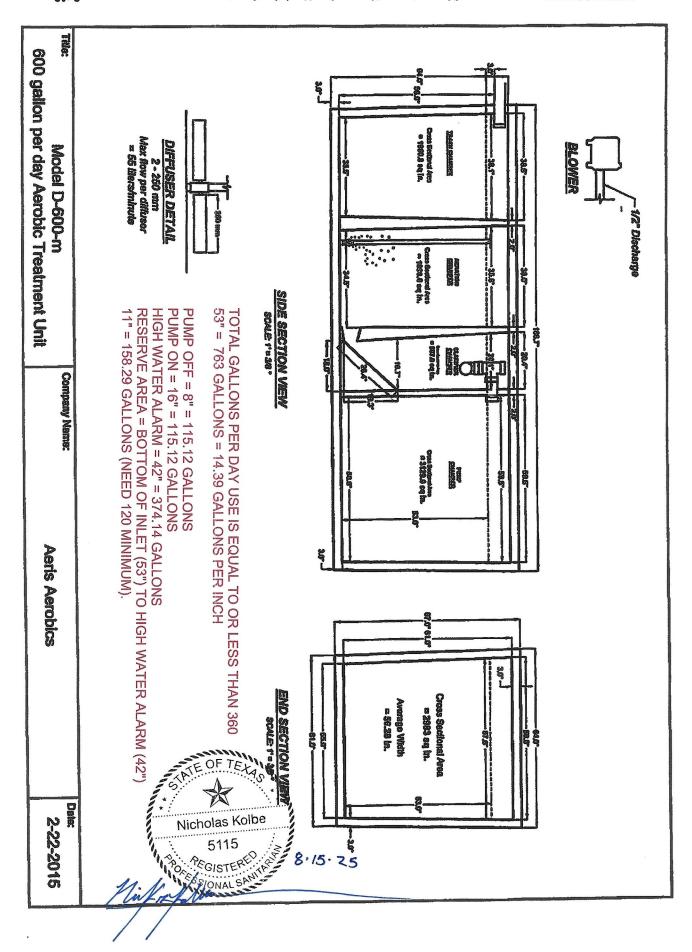
Should you have any questions in regard to this letter or require additional information, please do not hesitate to contact me.

Sincerely yours,

**Gulf Coast Testing, Inc.** 

William B. Daniel IV Program Manager

Correspondence.2015.06.04.8PE253 Daily Load Calculations



## STA-RITE ST.E.P Plus D Series

4" multi-stage submersible effluent pumps



The ST.E.P Plus D Series 4" submersible pump in 10, 20 and 30 GPM models dominate with superior "draw-down" capability.

The ST.E.P Plus D Series 4" submersible pump dominates with reduced amp draw.

The ST.E.P Plus D Series 4" submersible pump dominates with cooler and quieter operation.

#### APPLICATIONS

Clean and Gray Water... for residential, commercial, and agricultural use.

#### SPECIFICATIONS

**Motor** – Available in 115 or 230 volt versions. Dry-wound, double ball-bearing, double-seal and thermal overload protected, UL and CSA approved.

Shell - Stainless steel (300 grade)

**Discharge –** 1-1/4" Fiberglass-reinforced thermoplastic

Discharge Bearing - Nylatron®

Impellers - Acetel

Diffusers - Polycarbonate

**Suction Caps** – Polycarbonate with stainless steel wear ring

Thrust Pads - Proprietary spec.

**Shaft and Coupling -** Stainless steel 300 grade

**Intake** - Fiberglass-reinforced thermoplastic

Intake Screen - Stainless steel

Jacketed Cord - 600 Volt "SJOW" jacketed 10' leads, 2-wire with ground

Agency Listing - CSA

#### FEATURES

ST.E.P. Plus DOMINATES with a...

Proven Stage System – The proven SignaSeal staging system utilizes a patented ceramic wear surface. When incorporated with STA-RITE's "true" independent floating impellers, dominates with 1st-in-class performance, superior sand handling, and a thrust management staging system with industry exclusive "dryrun" capabilities.

Superior "draw-down" capability – The ST.E.P. Plus Dominates in this class with the lowest draw-down of 4-1/2" (a standard 4" NEMA submersible only draws-down to 13-1/2").

Reduced amp draw – The ST.E.P. Plus Dominates in this class with less energy consumption – over 25% less amp draw {9.5 amps vs. 12.7 amps, 115 volt) than a 4" NEMA submersible, reducing operating costs and extending the service life of float switch contacts.

Cooler and quieter operation – The ST.E.P. Plus Dominates by using the pumped liquid to cool the motor as it passes over the motor. The water passing over the motor dampens the motor noise, eliminating expensive "flow-inducer steeves" required when using a standard 4" NEMA submersible.

Impellers – Precision molded for perfect balance... ultra smooth for the highest performance and efficiency. Allows for .080" solids

**Shaft** – Positive drive, hexagonal 7/16" – 300-grade stainless steel shaft offers generous impeller drive surfaces.

Shaft bearing - Exclusive selflubricating Nylatron® bearing resists wear surface from sand and abrasives.

**Shell -** Corrosion resistant 300-grade stainless steel.

	1	MAN					
CATALOG NUMBER	НР	MAX. LOAD AMPS	VOLTS	PHASE/ CYCLES	CORD LENGTH	PALLET QUANTITY	WEIGH (LBS.)
10D0M05221	1/2	5.5	230	1/60	10'	80	16
10D0M05121	1/2	11.0	115	1/60	10'	80	16
20D0M05221	1/2	4.6	230	1/60	10'	80	16
20D0M05121	1/2	9.5	115	1/60	10'	80	16
30D0M05221	1/2	4.6	230	1/60	10'	80	16
30D0M05121	1/2	9.5	115	1/60	10'	80	16
20D0M05221+1	1/2	5.3	230	1/60	10'	80	16
20D0M05121+1	1/2	10.6	115	1/60	10'	80	16

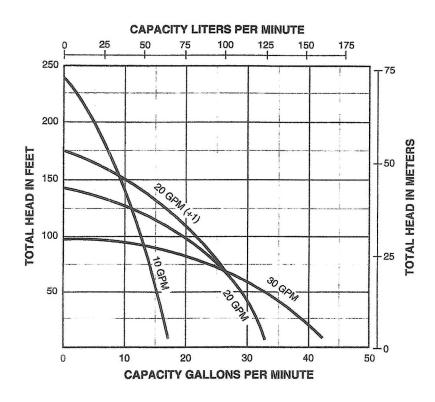
In order to provide the best products possible, specifications are subject to change.



## STA-RITE ST.E.P Plus D Series

4" multi-stage submersible effluent pumps

### PUMP PERFORMANCE



PUMP PERFO	RMANCE (CAI	PACITY	IN GAL	LONS P	ER MIN	UTE)							
PUMP	FLOW RATE						p	SI					
MODEL	(GPM)	0	10	20	30	40	50	60	70	80	90	100	110
10D0M05221	10			15.0	13.7	12.7	11.5	10.2	8.4	6.5	4.3	1.0	
10D0M05121	10			15.0	13.7	12.7	11.5	10.2	8.4	6.5	4.3	1.0	
20D0M05221	20			30.0	26.0	21.5	14.2	4.4					
20D0M05121	20			30.0	26.0	21.5	14.2	4.4					
30D0M05221	30		38.5	33.3	25.8	16							
30D0M05121	30		38.5	33.3	25.8	16							
20D0M05221+1	20 + 1			30	27.5	24	20	13.5	6				
20D0M05121+1	20 + 1			30	27.5	24	20	13.5	6				
PUMP PERFO	RMANCE (CA	PACITY	IN LITE	RS PER	MINUT	E)							
PUMP	FLOW RATE						B	AR			***************************************		
MODEL	(LPM)	.69	1.38	2.07	2.76	3.45	4.13	4.82	5.51	6.20	6.89	7.58	110
10D0M05221	37.85			56.8	51.9	48.1	43.5	38.6	31.8	24.6	16.3	3.8	
10D0M05121	37.85			56.8	51.9	48.1	43.5	38.6	31.8	24.6	16.3	3.8	
20D0M05221	75.7			113.6	98.4	81.4	53.7	16.7					
20D0M05121	75.7			113.6	98.4	81.4	53.7	16.7					
30D0M05221	113.55		145.7	126,0	97.7	60.6							
30D0M05121	113.55		145.7	126.0	97.7	60.6							
20D0M05221+1	75.7 + 1			113.4	103.9	90.7	75.6	51.0	22.6				
20D0M05121+1	75.7 + 1			113.4	103.9	90.7	75.6	51.0	22.6				

S11410WS

## **ProPlus™ Gear Driven Sprinkler Setting Instructions**

NOTE: The ProPlus is factory preset with a 90° arc setting, and includes a pre-installed #2.5 nozzle.

#### **CHANGING A NOZZLE**

#### 1 ▶ REMOVING THE NOZZLE RETENTION SCREW

Use your K-Key or a small flat blade screwdriver to remove the nozzle retention screw by turning counter-clockwise to remove and clockwise to re-install.

#### 2▶ PULL UP THE RISER

Insert the k-Key in the keyhole on the top of the nozzle turret and turn the key 1/4 turn to insure that the key does not slip out of the keyhole when you pull it up. Firmly pull up the entire spring-loaded riser to access the nozzle socket. Hold the riser assembly with one hand.

#### 3 ▶ REMOVING THE NOZZLE

With the nozzle retention screw removed, insert the K-Key into the slot directly under the nozzle "prongs" at the top of the mozzle. Now, turn the key 1/4 turn to "hook" the nozzle and pull the nozzle out.

#### **4** ► INSTALLING A NOZZLE

Press the desired nozzle into the nozzle socket. Make sure the nozzle number is visible and the nozzle "prongs" are up. Then, re-install the nozzle retention screw. **NOTE:** The nozzle retention screw is also a break-up screw and used to adjust the distance of the spray.

#### **SETTING THE ARC ADJUSTMENT**

#### **1 ▶ FINDING THE LEFT START POSITION**

Place your finger on the top center of the nozzle turret. Rotate the turret to the right until it stops and then back to the left until it stops. Notice the position of the nozzle arrow. This is the "Left Start" position. The sprinkler will begin spraying from this position and rotate clockwise until it reaches the right Adjustable Stop-Return Point.

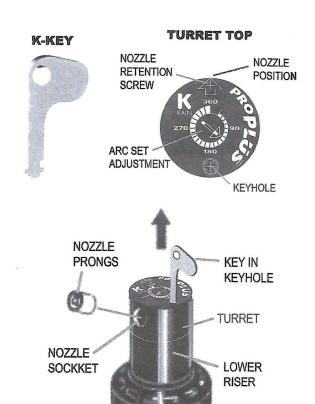
#### 2 PORIENTING THE LEFT START POSITION

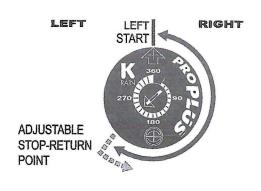
Insert the K-Key in the keyhole on the top of the nozzle turret and turn the key ¼ turn to insure that the key does not slip out of the keyhole when you pull it up. Being careful not to allow the nozzle turret to turn, firmly pull up the entire spring-loaded riser. Hold the lower riser assembly up with one hand. Now turn only the lower riser clockwise or counter-clockwise until the nozzle arrow is pointing where you want the sprinkler to begin spraying.

#### **3** ► CHANGING THE ARC

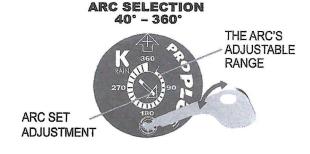
Insert the K-Key or a small flat blade screwdriver into the Arc Set Adjustment slot. Turn clockwise to increase the arc or counter-clockwise to decrease the arc.

WHEN SET AT 360°, THE PROPLUS WILL ROTATE CONTINUOUSLY IN A CLOCKWISE DIRECTION.





HOUSING CAN



## **ProPlus™ Gear Driven Sprinkler Setting Instructions**

#### SPRINKLER INSTALLATION

#### **1 ► INSTALL AND BURY**

Do not use pipe dope. Thread the sprinkler on the pipe. Bury the sprinkler flush to grade. **NOTE:** Gear driven sprinklers and pop-up sprays should not be installed on the same watering zone.

#### **2** ► INSPECTING THE FILTER

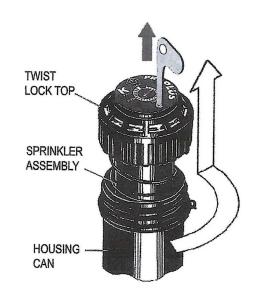
Unscrew the top and lift the complete sprinkler assembly out of the housing can. The filter is located on the bottom of the sprinkler assembly and can be easily pulled out, cleaned and re-installed.

#### **3** ► WINTERIZATION TIPS

When using an air compressor to remove water from the system please note the following:

- a. Do not exceed 30 PSI.
- Always introduce air into the system gradually to avoid air pressure surges. Sudden release of compressed air into the sprinkler can cause damage.
- c. Each zone should run no longer than 1 minute on air. Sprinklers turn 10 to 12 time faster on air than on water. Over spinning rotors on air can cause damage to the internal components.

PRECIP in/hr / mm/hr



#### **PERFORMANCE DATA**

NOZZLE PRESSURE RADIUS FLOW RATE

IVULLL		LOOU			Dios		W DAI		FUE	711 111/1	n / m	WILL
	PSI	kPa	Bars	Ft.	M.	<b>GPM</b>	L/M	M³/H	65	$\triangle$		$\triangle$
#0.5	30	207	2.1	28	8.5	0.5	1.9	0.11	0.12	0.14	3	4
	40	276	2.8	29	8.8	0.6	2.3	0.14	0.14	0.16	3	4
	50	345	3.5	29	8.8	0.7	2.7	0.16	0.16	0.19	4	5
	60	414	4.1	30	9.1	8.0	3.0	0.18	0.17	0.20	4	5
#0.75	30	207	2.1	29	8.8	0.7	2.7	0.16	0.16	0.19	4	5
	40	275	2.8	30	9.1	8.0	3.0	0.18	0.17	0.20	4	5
	50	344	3.4	31	9.4	0.9	3.4	0.20	0.18	0.21	5	5
	60	413	4.1	32	9.8	1.0	3.8	0.23	0.19	0.22	5	6
#1.0	30	207	2.1	32	9.8	1.3	4.9	0.30	0.24	0.28	6	7
	40	275	2.8	33	10.1	1.5	5.7	0.34	0.27	0.31	7	8
	50	344	3.4	34	10.4	1.6	6.1	0.36	0.27	0.31	7	8
	60	413	4.1	35	10.7	1.8	6.8	0.41	0.28	0.33	7	8
#2.0	30	207	2.1	37	11.3	2.4	9.1	0.55	0.34	0.39	9	10
	40	275	2.8	40	12.2	2.5	9.5	0.57	0.30	0.35	8	9
	50	344	3.4	42	12.8	3.0	11.4	0.68	0.33	0.38	8	10
	60	413	4.1	43	13.1	3.3	11.4	0.68	0.34	0.36	8	9
2.5	30	207	2.1	38	11.6	2.5	9.5	0.57	0.33	0.38	8	10
Pre-	40	275	2.8	39	11.9	2.8	10.6	0.64	0.35	0.41	9	10
installed	50	344	3.4	40	12.2	3.2	12.1	0.73	0.39	0.44	10	11
	60	413	4.1	41	12.5	3.5	13.3	0.80	0.40	0.46	10	12
#3.0	30	207	2.1	38	11.6	3.6	13.6	0.82	0.48	0.55	12	14
	40	275	2.8	39	11.9	4.2	15.9	0.96	0.53	0.61	14	16
	50	344	3.4	41	12.5	4.6	17.4	1.05	0.53	0.61	13	15
	60	413	4.1	42	12.8	5.0	19.0	1.14	0.55	0.63	14	16
#4.0	30	207	2.1	43	13.1	4.4	16.7	1.00	0.46	0.53	12	13
	40	275	2.8	44	13.4	5.1	19.3	1.16	0.51	0.59	13	15
	50	344	3.4	46	14.0	5.6	21.2	1.27	0.51	0.59	13	15
	60	413	4.1	49	14.9	5.9	22.4	1.34	0.47	0.55	12	14
#6.0	40	276	2.8	45	13.7	5.9	22.4	1.34	0.56	0.65	14	16
	50	344	3.4	46	14.0	6.0	22.7	1.36	0.55	0.63	14	16
	60	413	4.1	48	14.6	6.3	23.9	1.43	0.53	0.61	13	15
	70	482	4.8	49	14.9	6.7	25.4	1.52	0.54	0.62	14	16
#8.0	40	276	2.8	42	12.8	8.0	30.3	1.82	0.87	1.01	22	26
	50	344	3.4	45	13.7	8.5	32.2	1.93	0.81	0.93	21	24
	60	413	4.1	49	14.9	9.5	36.0	2.16	0.76	0.88	19	22
	70	482	4.8	50	15.2	10.0	37.9	2.27	0.77	0.89	20	23

#### LOW ANGLE PERFORMANCE DATA

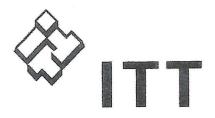
NOZZLE	PRI	ESSU	RE	RA	DIUS	FLOV	V RATE	Ξ	PREC	CIP in/h	r/mn	n/hr
	PSI	kPa	Bars	Ft.	M.	GPM	L/M	M³/H		A		$\triangle$
#1.0	30	207	2.1	22	6.7	1.2	4.5	.27	0.48	0.55	12	14
	40	276	2.8	24	7.3	1.7	6.4	.39	0.57	0.66	14	17
	50	345	3.4	26	7.9	1.8	6.8	.41	0.51	0.59	13	15
	60	414	4.1	28	8.5	2.0	7.6	.45	0.49	0.57	12	14
#3.0	30	207	2.1	29	8.8	3.0	11.4	.68	0.69	0.79	17	20
	40	276	2.8	32	9.8	3.1	11.7	.70	0.58	0.67	15	17
	50	345	3.4	35	10.7	3.5	13.2	.80	0.55	0.64	14	16
	60	414	4.1	37	11.3	3.8	14.4	.86	0.53	0.62	14	16
#4.0	30	207	2.1	31	9.4	3.4	12.9	.77	0.68	0.79	17	20
	40	276	2.8	34	10.4	3.9	14.8	.89	0.65	0.75	17	19
	50	345	3.4	37	11.3	4.4	16.7	1.00	0.62	0.71	16	18
	60	414	4.1	38	11.6	4.7	17.8	1.07	0.63	0.72	16	18
#6.0	40	275	2.8	38	11.6	6.5	24.6	1.48	0.87	1.00	22	25
	50	344	3.4	40	12.2	7.3	27.7	1.66	0.88	1.01	22	26
	60	413	4.1	42	12.8	8.0	30.3	1.82	0.87	1.01	22	26
	70	482	4.8	44	13.4	8.6	32.6	1.96	0.86	0.99	22	25

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



K-RAIN MANUFACTURING CORP. 1640 Australian Avenue Riviera Beach, FL 33404 USA PH: 561.844.1002 / 1.800.735.7246 FAX: 561.842.9493 www.krain.com

© K-RAIN Manufacturing Corp. Part Number: 1100519 Rev. 01



### **GOULDS PUMPS** Residential Water Systems

### **Friction Loss**

### SCH 40 - PLASTIC PIPE: FRICTION LOSS (IN FEET OF HEAD) PER 100 FT.

CO. 1	CDI	3/8"	1/2"	3/4"	1 <sup>n</sup>	11/4"	11/2"	2"	21/2"	3"	4"	6 <sup>n</sup>	8 <sub>n</sub>	10"
GPM	GPH	ft.	ft.	ft.	ft.	ft,	ft.	ft,	ft.	ft.	ft.	ft.	ft.	ft.
1	60	4,25	1.38	.356	.11									
2	120	15.13	4.83	1.21	.38	.10								
3	180	31.97	9.96	2.51	.77	.21	.10							
4	240	54.97	17.07	4.21	1.30	.35	.16							
5	300	84.41	25.76	6.33	1.92	.51	.24	- Company of the Comp						-
6	360		36.34	8.83	2.69	.71	.33	.10						
8	480		63.71	15.18	4,58	1.19	.55	.17						
10	600		97.52	25.98	6.88	1.78	,83	.25	.11					
15	900	****		49.68	14.63	3.75	1.74	.52	.22					
20	1,200			86.94	25.07	6.39	2,94	.86	.36	.13				
25	1,500				38.41	9.71	4.44	1.29	,54	.19				
30	1,800					13.62	6.26	1,81	.75	.26				
35	2,100					18.17	8.37	2.42	1,00	.35	.09			
40	2,400					23.55	10.70	3.11	1.28	.44	.12			
45	2,700	-				29.44	13.46	3.84	1,54	.55	.15			
50	3,000		1				16.45	4.67	1.93	.66	.17			
60	3,600		1				23.48	6.60	2.71	.93	,25			
70	4,200			İ				8.83	3,66	1.24	.33			
80	4,800		<b>†</b>	<u> </u>				11.43	4.67	1.58	.41			
90	5,400			1				14.26	5.82	1.98	.52			
100	6,000			İ					7.11	2.42	.63	.08		
125	7,500			l					10.83	3.80	.95	.13		
150	9,000			1						5.15	1.33	.18		
175	10,500			Ì						6.90	1.78	.23		-
200	12,000									8.90	2.27	.30		
250	15,000										3.36	.45	.12	
300	18,000								<u> </u>		4.85	.63	.17	
350	21,000						ļ				6.53	.84	.22	
400	24,000										ļ	1.08	.28	
500	30,000										<b></b>	1.66	.42	.14
550	33,000									ļ	<del> </del>	1.98	.50	.11
600	36,000										<del> </del>	2.35	.59	.19
700	42,000						<u> </u>			ļ	<u> </u>		.79	.20
800	48,000		T										1.02	.33
900	54,000	1				1			<u> </u>	<u> </u>	<u> </u>		1.27	.4
950	57,000		1							<u> </u>				.4
1000	60,000	1	1	1						1		<u> </u>		.5

NOTE: See page 5 for website addresses for pipe manufacturers—there are many types of new plastic pipe available now.

This Plat of RIVER CROSSING UNIT TWO has been submitted to and considered by the Commissioners Court of Comal County, Texas and is hereby approved for filling by said

Dated this IL day of Tebrusary A.D., 2000.

Court on Field. 11,

JOY STREATER, COUNTY CLERK COMAL COUNTY, TEXAS

By Charlette H. Boys

STATE OF TEXAS\*

I hereby certify that this plat is true and correct and was prepared from an actual survey of property made under my superyielom on the ground.

Kelly Miller Kelly Miller Registered, Professional Land Surveyor No. 2219

Sworn to and subscribed before me this the 11 day of Februery A.D., 2000.

Richard McDaniel

SURVEYOR FRO-TECH RECINEERING GROUP, Inc. Kelly Kilber, R.P.L.S. 100 E. San Arlonio St., Suite 100 San Marcas, Taxas 78866 (\$12) 353-3335

PLAN 5315 E0 14645 .Neceyority (sesenden) rentso (your pre) 1271-599 (pre)

KNOW ALL MEN BY TRESE PRESENTS.

wheneved this hand as down a limit plat and whose name is subscribed hereto, and in present or through a day uniforted open, hereby dedicates to the use of the public present or through a day uniforted open, thereby dedicates to the use of the public present of Street, berties, Moret, Abreat, Abreat, Carest, Abreat, Abreat, Caresternets, and Public places therefore the purposes and considerations therein expressed.

STATE OF TEXAS\*

# 2,00006004573

rossing A Subdivision of 477.11 acres, UNIT TWO

BETGE RE, the undersigned authority, appared lorders to Pettlerson, known to me to be the the error whase norms is subscribed to the torque particular, and accinositioged to me theth executed the same for the purposes and considerations therein expressed, and in the openity therein stated.

STATE OF TEXAS\*
COUNTY OF COMAL\*

Notey Public. State of Texas

My Commission Expires:

ITS GENERAL PARTNER SOUTHERLAND/RCR MANAGEMENT, INC. SCARLES D. PATTERSOM, PRESIDENT P.O. 80X 1629 WIMBERLEY, TEXAS 78676

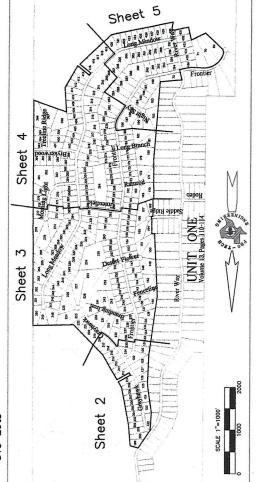
being 472.73 acres out of the William G. Strawn Survey No. 74 4.38 acres out of the

Jacob Moos Survey No. 852, Subdivision No. 1 Comal County, Texas

319 Lots

River Crossing

Location Map Not To Scale



ion is to be served by certified policy where apply systems.

In this subdivision shell be occupied until connected to a private orn-site sewage facility eit the united of Comel County for Private. Sewage Fechical private orn-site sewage facility are served and other between the companion of the county for Private Sewage Fechical sewage relations to other serve or odded but between the companion of the county for the county for the county of the

opproved under the unlea of Comol County for Privite Servage Tectilities.
Property enter are advised that they are responsible for mointenance of dedicated essentials on the property and that they man not utilities there are suppress destinated to their flattands (E.G. no enteriors, spells can't liefd, e.C.). Gronites of add dedicated essentials reserve the right receast a seath demonstrate the reserve the right of the country of the cou

of itsets on minimum twenty—five (23) foot building set—book line from road frontage.

I require be constructed endewer the last and obtainfor might—de-way without first inches the constructed between the last and obtainforment.

I require seeks within the tundence of first soundshines. A paper and the second of this soundshines. A paper on other soundship in the endership of the soundship of the second of the soundship of the second of the secon

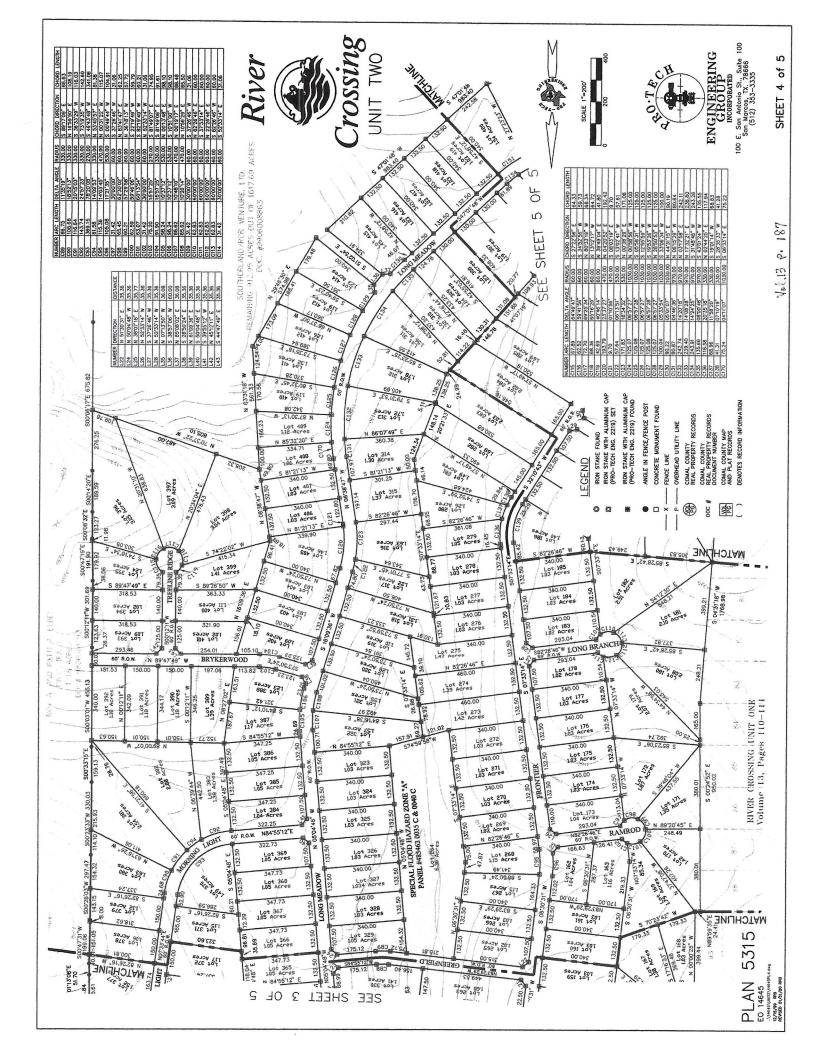
lifectly adjacent to State right-of-way, the Omer shall be responsible for adequate acand batherent measures for future noise militaging shall serve in the same of spreas and spreas for bute within Stev Coosing Boulevard will serve as ingreas and spreas for lots within

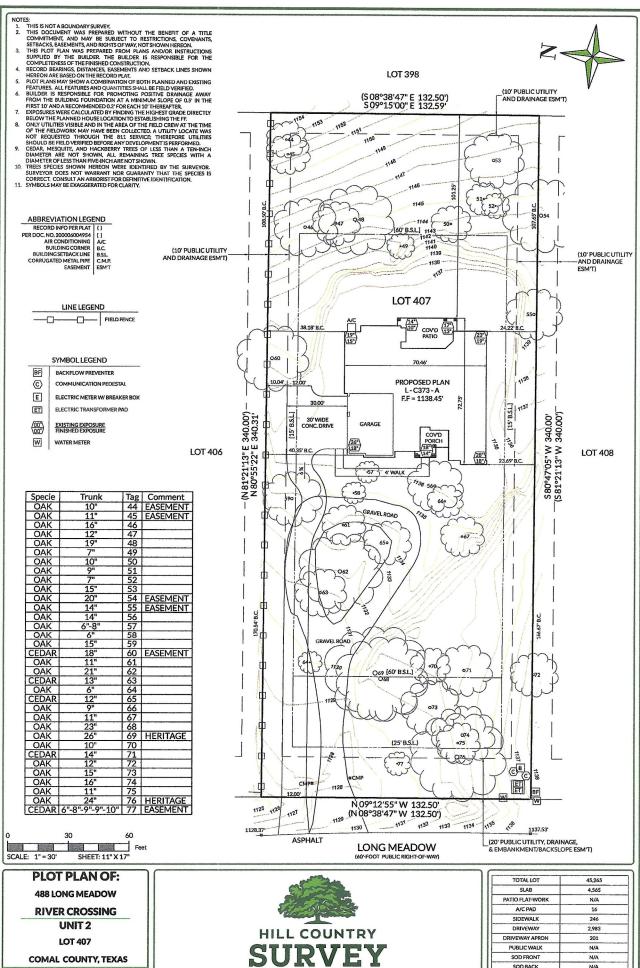
319 LOTS, BEING 438.18 ACRES, SAME BEING 433.80 ACRES OUT OF THE WILLIAM G, STRAMM SURVEY No. 74, AND 4-38 ACRES OUT OF THE JACOB MOOS SURVEY No. 852, SUBDIVISION No. 1

26,819 LINEAR FEET OF ROADS, BEING 38,93 ACRES OUT OF THE MILLIAM G, STRAWN SURVEY No. 74 DEDICATED TO THE PUBLIC AS RIGHT—OF—WAY COUNTY ROADS:



100 E. San Antonio St., Suite 100 San Marcos, TX. 78666 (512) 353-3335





JOB NO.: 25-7033

DATE: 5/21/25

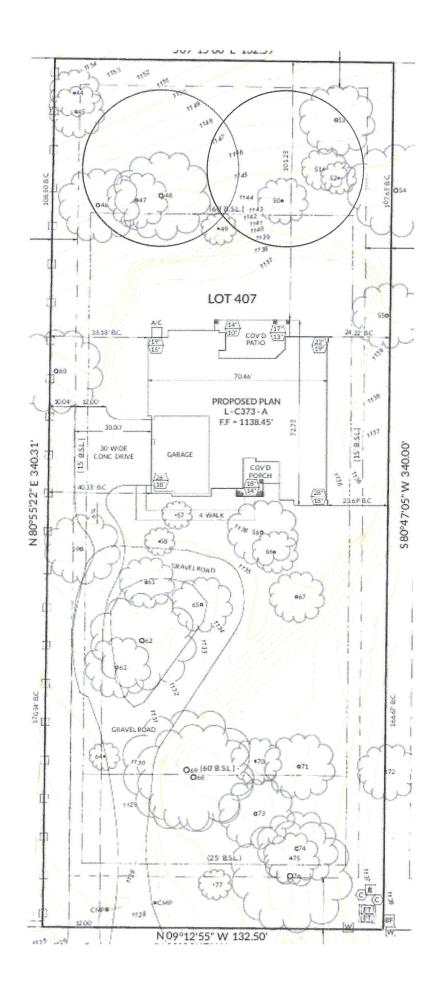
BUILDER: DAVID WEEKLEY HOMES

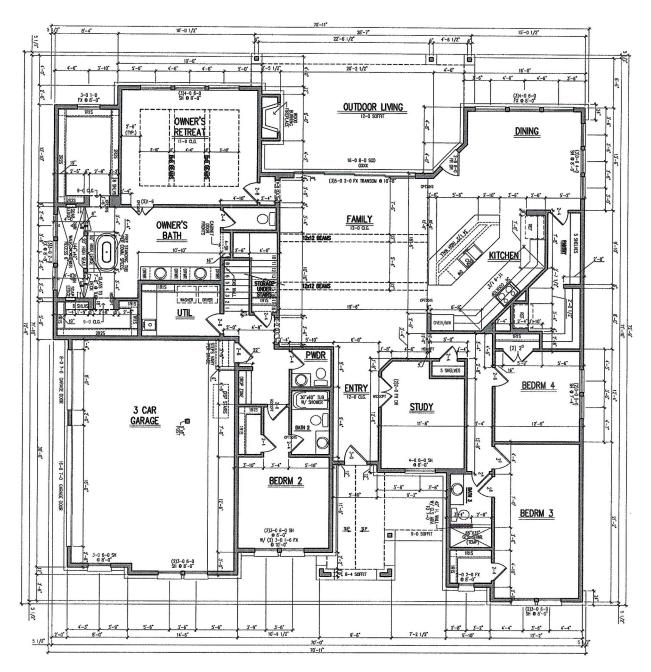
DRN.: RPS CKD.: FLD

CEN CO. TEX
TBPELS FIRM No. 10194731 117 JONATHAN DR. LIBERTY HILL, TX 78642

PHONE: (830)-438-3305

SOD BACK N/A IMPERVIOUS COVER 7,810 (17% DRIVEWAY SLOPE DRAINAGETYPE = N/A





FINISHED HEIGHT	TOTAL COVER	TOTAL SLAB	OUTDOOR LINNG	FRONT PORCH	3-CAR GARAGE	IST FLOOR LIVING	TOTAL SLAB SQUARE FOOTAGE	TOTAL LIVING	BONUS ROOM	IST FLOOR	LIVING SQUARE FOOTAGE
29' -	5288	4611	403	175	701	3332	QUARE FOC	4009	677	3332	ARE FOC
4 1/2"	SQFT	SQFT	S FI	SQ FT	SQ FT	SQ FT	TAGE	SQFT	SQ FT	SQ FT	TAGE

#### FIRST FLOOR

ADVANCED FRAMING: 2X6 WALLS AT EXTERIOR PERIMETER WALLS AND ALL INSULATED WALLS UNLESS NOTED OTHERWISE

NOTE: ALL 1ST FLR. CEILING HEIGHTS 10'-0" UNLESS NOTED OTHERWISE

Lot: 407

Blk: 02

Sect: N/A

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ROMERO	RESIDENCE
488 LON	<b>G MEADOW</b>
S.A.	BOYL

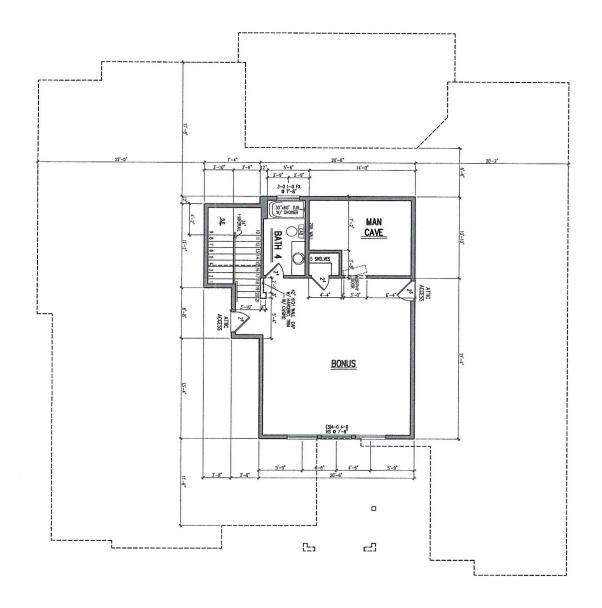
Proj. No.: 2402 Job No.: 0106

David Weekley Homes

H4 | Scale: 1/8" = 1'-0"

Date: 03.21.25 | Rev.: 5.13.25 MH

C Weekley Homes L.P. 2025
The measurements, dimensions, and othe specifications, shown on this document, are guidelines for construction use only. The actual specifications of the finished structure may vary. This document may not be relied on as a representation of what the complant directly will not kills.



2ND FLOOR

ADVANCED FRAMING: 2X6 WALLS AT EXTERIOR PERIMETER WALLS AND ALL INSULATED WALLS UNLESS NOTED OTHERWISE NOTE: ALL 2ND FLR. CEILING HEIGHTS 9'-0" UNLESS NOTED OTHERWISE

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ROMERO	RESIDENCE
488 LON	G MEADOW
S.A.	BOYL

Proj. No.: 2402 Job No.: 0106 Sect: N/A

David Wee	kley Homes	
H4 Date: 03 21 25	Scale: 1/8" = 1'-0"	
Date: 03 21 25	Rev 5 13 25 MH	

O Teeldey House L.P. 2025
The measurements, dimensions, and othe specifications, shown on this document, are guidelines for construction use only. The actual specifications of the finished structure may vary. This document may not be relied on as a representation of





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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.

### Survivorship Deed

Date: 4 Muary 31, 20 25

Grantor's name and address: Michelle L Alexander of 488 Long Meadow, Spring Branch, TX 78070

Grantee's name: Michelle L Romero, married, of 488 Long Meadow, Spring Branch, TX 78070, USA, and James Romero, married, of 488 Long Meadow, Spring Branch, TX 78070, USA

For and in consideration of the sum of \$10.00, and other good and valuable consideration paid to Michelle L Alexander, not married, of 488 Long Meadow, Spring Branch, TX 78070, (the "Grantor") paid by Michelle L Romero, of 488 Long Meadow, Spring Branch, TX 78070, USA and James Romero, of 488 Long Meadow, Spring Branch, TX 78070, USA, a married couple, (collectively the "Grantee") the Grantor does grant, sell, and convey the following described property, with general warranty covenants, unto the Grantee as joint tenants with full right of survivorship.

This conveyance includes all of the rights and appurtenances that belong to the property ownership and the Grantee may have and hold the property for him or herself and this conveyance inures to the Grantee, the Grantee's heirs, executors, administrators, successors or assigns forever.

The Grantor binds the Grantor and the Grantor's heirs, executors, administrators, and successors to warrant and forever defend all and singular the property to the Grantee 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 all of that certain tract or parcel of land described as follows:

Lot 407, RIVER CROSSING, UNIT TWO, an Addition in Comal County, Texas, according to the Map of Plat recorded in Volume 13, Pages 184-188, Map Records of Comal County, Texas.

The Grantor grants, to have and to hold, all of the Grantor's right, title, and interest, if any, in and to the above described property and premises to the Grantee, and to the Grantee's assigns forever, so that neither the Grantor nor the Grantor's heirs, legal representatives, or assigns will have, claim, or demand any right or title to the property, premises, or appurtenances, or any part thereof.

This conveyance is made subject to any and all valid and subsisting or recorded restrictions, conditions and covenants, easements, rights-of-way, prescriptive rights, whether of record or not, reservations including but not limited to oil and gas leases, mineral severances, interests, and royalty rights, maintenance charges, together with any lien securing the maintenance charges, zoning laws, ordinances of municipal or other governmental agencies or authorities, and conditions and covenants, if any, applicable to and enforceable against the property described above and as shown by the records of the county clerk of Comal County.

Words of any gender used in this Deed shall be held and construed to include any other gender, and words in the singular number shall be held to include the plural, and vice versa, unless the context requires otherwise. If this Deed is executed by or to a corporation or trustee the words "heirs, executors, and administrators" or "heirs and assigns" shall, with respect to the corporation or trustee, be construed to mean "successors and assigns."

The Grantor makes no warranty, express or implied, concerning the property's condition, need of repair, existence or absence of any defects, visible, hidden, latent or otherwise. The Grantor hereby disclaims any and all warranties, express or implied concerning the property's workmanship. The Grantor states that there are no implied warranties of any kind, including but not limited to warranties of merchantability or fitness for a particular purpose. The Grantor delivers the property to the Grantee "as is" and "with all faults."

Prepared by: Michelle L Alexander, 488 Long Meadow, Spring Branch, TX 78070

After recording return to: Michelle & James Romero, 205 Lone Falls Dr, Universal City, TX 78148, USA

IN WITNESS WHEREOF this deed was executed by the Grantor on this 31 day of January, 20 25.

Signed in the presence of:

Survivorship Deed	Page 3 of 4
	Michelle alexander
Witness signature	Michelle L Alexander

Witness name

### **Grantor Acknowledgement**

STATE OF TEXAS	
COUNTY OF bundalupe	
This instrument was acknowledged before me on	day of
Notary Public  My commission expires: 0 8/0 9/2025	PAUL HICKS Notary Public, State of Texas 8 My Comm. Exp. 08-09-2025 ID No. 13325804-4

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County Texas
01/31/2025 01:08:29 PM
TRACY 4 Page(s)
202506002959

Bobbie Koepp



Docusign Envelope ID: 188A413A-FB49-48D4-A3F3-B067EDA9EE95



### **ON-SITE SEWAGE FACILITY APPLICATION**

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

Date 6/27/2025		Permit Nun	11893 nber	5			
1. APPLICANT / AGENT INFORMATION							
Owner Name MICHELLE L. & JAMES ROMERO	Agent Name	Nicholas Kolk	oe .				
Mailing Address 488 LONG MEADOW	Agent Address			ss 1825 FM 2438			
City, State, Zip SPRING BRANCH TX 78070	City, State, Zip	SeguinTX 78155					
Phone # 710.326.7696	Phone #	830-708-9065					
Email ML ROMERO Z911@ GMail.com	Email	KolbeLandCo	@Gmail.com				
2. LOCATION							
Subdivision Name RIVER CROSSING	U	Init 2	Lot 407	Block NA			
Survey Name / Abstract Number NA			Acreage	1.03			
Address 488 LONG MEADOW	City SPRING BR	ANCH	State TX	Zip _78070			
3. TYPE OF DEVELOPMENT							
Single Family Residential							
Type of Construction (House, Mobile, RV, Etc.) HOUSE			Total Control of the				
Number of Bedrooms 4							
Indicate Sq Ft of Living Area <4500							
Non-Single Family Residential							
(Planning materials must show adequate land area for doubling th	e required land nee	ded for treatme	nt units and disp	osal area)			
Type of Facility							
Offices, Factories, Churches, Schools, Parks, Etc Indicat	e Number Of Occ	upants					
Restaurants, Lounges, Theaters - Indicate Number of Seat	s						
Hotel, Motel, Hospital, Nursing Home - Indicate Number of							
Travel Trailer/RV Parks - Indicate Number of Spaces							
Miscellaneous							
Estimated Cost of Construction: \$ 650,000.00	Structure Only)						
Is any portion of the proposed OSSF located in the United State	es Army Corps of	Engineers (U	SACE) flowage	easement?			
Yes No (If yes, owner must provide approval from USACE for	proposed OSSF impre	ovements within the	he USACE flowage	e easement)			
Source of Water   Public   Private Well   Rainwate	er						
4. SIGNATURE OF OWNER							
By signing this application, I certify that:  - The completed application and all additional information submitted doe facts. I certify that I am the property owner or I possess the appropriate	s not contain any fal e land rights necess	ise information a ary to make the	and does not cor permitted impro	nceal any material vements on said			
<ul> <li>property.</li> <li>Authorization is hereby given to the permitting authority and designated site/soil evaluation and inspection of private sewage facilities</li> <li>I understand that a permit of authorization to construct will not be issue by the Comal County Flood Damage Prevention Order.</li> </ul>	d until the Floodplai	n Administrator	has performed t	he reviews required			
- I affirmatively consent to the online posting/public release of my e-mail	address associated	with this permit	application, as	applicable.			
Michelle Romero	8/2/2025						
Signature of Owner	Date			Page 1 of 2			

#### Nicholas Kolbe, R.S., S.E.

1825 FM 2438 Seguin, Texas 78155 Mobile 830-708-9065 KolbeLandCo@gmail.com

June 27th, 2025

Comal County Office of Environmental Health 195 David Jonas Dr. New Braunfels TX 78132-3760

RE- Septic Design 488 Long Meadow LOT 470, RIVER CROSSING, UNIT TWO Spring Branch TX 78070

BRANDON/BRENDA,

Due to the lack of available application area, it is necessary to have the setback from the property line to the spray at ten feet as required by TCEQ Chapter 285 rules Table X. I hereby request a variance from the twenty-foot setback to property lines as required by Comal County Order and equivalent protection will be maintained by including a battery backup to the timer clock to assure sprayers to only spray during the predawn hours. In my professional opinion this variance will not pose a threat to the environment or public health.

If I can be of further assistance please contact me.

Respectfully,

Nicholas Ryan Kolbe, R.S. #5115

Date

Variance request needs to be signed and sealed as part of planning materials. 285.5.(2)



## OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

118935

	Date Received	Initials	Permit Number
nstructions: Place a check mark next to all items that apply. Checklist <b>must</b> accompany the completed appli	For items that do not apply, placication.	e "N/A". This	OSSF Development Application
OSSF Permit			
Completed Application for Permit for Author	orization to Construct an On-Site	Sewage Faci	ility and License to Operate
Site/Soil Evaluation Completed by a Certific	ed Site Evaluator or a Professior	nal Engineer	
Planning Materials of the OSSF as Require of a scaled design and all system specifical	ed by the TCEQ Rules for OSSF tions.	Chapter 285	Planning Materials shall consist
Required Permit Fee - See Attached Fee S	Schedule		
Copy of Recorded Deed			
Surface Application/Aerobic Treatment Sys	stem		
Recorded Certification of OSSF Req	uiring Maintenance/Affidavit to th	e Public	
Signed Maintenance Contract with E	ffective Date as Issuance of Lice	nse to Opera	te
affirm that I have provided all information re constitutes a completed OSSF Development		nent Applica	tion and that this application
Signed by: Michelle Romero		8/2/20	25
A711487587AA4C1 Signature of Applicant			Date
COMPLETE APPLICATION  Check No Receipt No	(Mis		ETE APPLICATION roled, Application Refeused)
L			Revised: September 2019