

Comal County Environmental Health

OSSF Inspection Sheet

Installer Name: Swoyer

OSSF Installer #: OS0026238

1st Inspection Date: 11/5/25

2nd Inspection Date: _____

3rd Inspection Date: _____

Inspector Name: Hendry

Inspector Name: _____

Inspector Name: _____

Permit#: 119016

Address: 1226 POWDER RIDGE RD

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	X	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)		X		
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	X	285.91(10) 285.30(b)(4) 285.31(d)		X		
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	X	285.32(a)(1)		X		
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	X	285.32(a)(3)		X		
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)	X	285.32(a)(5)		X		
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: 11/5/25 CH:

**Comal County Environmental Health
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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	X	285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)		X		
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	X		1000 gallon	X		
14	AEROBIC TREATMENT UNIT Size Installed	X			X		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	X X		Fuji Clean CE-7; as per design	X X		
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)	X	285.33(d)(6) 285.33(c)(4)	Surface spray	X		
25	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC						
26	DRAINFIELD Area Installed						
27	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
28	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
29	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
30	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.)		285.33(c)(2)				
31	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)				

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

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	X	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)		X		
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	X X	285.33(d)(2)(G) (i)285.33(d)(2) (A)285.33(d)(2)(F)		X X		
42	APPLICATION AREA Area Installed	X			X		
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: 119016
Issued This Date: 11/03/2025
This permit is hereby given to: DEWAYNE & JANET RITTENHOUSE

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

1226 POWDER RIDGE RD
NEW BRAUNFELS, TX 78132

Subdivision: VINTAGE OAKS AT THE VINEYARD
Unit: 28
Lot: 2172
Block: 0
Acreage: 1.9200

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

		119016
<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

09/11/2025

Date

___ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

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



Received
Brandon Mark Olvera
11/03/2025 11:27:04 AM

ATION

Date _____

Permit Number _____

1. APPLICANT / AGENT INFORMATION

Owner Name	<u>DEWAYNE & JANET RITTENHOUSE</u>	Agent Name	<u>GREG W. JOHNSON, P.E.</u>
Mailing Address	<u>c/o 23011 FM 306</u>	Agent Address	<u>170 Hollow Oak</u>
City, State, Zip	<u>Canyon Lake, TX 78133</u>	City, State, Zip	<u>New Braunfels, TX 78132</u>
Phone #	<u>830-935-4936</u>	Phone #	<u>830-905-2778</u>
Email	<u>traci@psseptics.com</u>	Email	<u>gregjohnsonpe@yahoo.com</u>

2. LOCATION

Subdivision Name VINTAGE OAKS AT THE VINEYARD Unit 28 Lot 2172 Block _____
Survey Name / Abstract Number _____ Acreage _____
Address 1226 POWDER RIDGE City NEW BRAUNFELS State TX Zip 78132

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

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

Number of Bedrooms 5

Indicate Sq Ft of Living Area 3855

☐ Non-Single Family Residential

(Planning materials must show adequate land area for doubling the required land needed for treatment units and disposal area)

Type of Facility _____

Offices, Factories, Churches, Schools, Parks, Etc. - Indicate Number Of Occupants _____

Restaurants, Lounges, Theaters - Indicate Number of Seats _____

Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds _____

Travel Trailer/RV Parks - Indicate Number of Spaces _____

Miscellaneous _____

Estimated Cost of Construction: \$ _____ (Structure Only)

Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement?

☐ Yes ☒ No (If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water ☐ Public ☐ Private Well

4. SIGNATURE OF OWNER

By signing this application, I certify that:

- The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property.
- Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities.
- I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Signature of Owner

8/11/25
Date



COMAL COUNTY
ENGINEER'S OFFICE

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 GREG W. JOHNSON, P.E.

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) FUJI CE7A & AK1000 PUMP Absorption/Application Area (Sq Ft) 5772

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

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

If yes, indicate the city: _____



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 [Signature]

Date August 12, 2025

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

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities (OSSF's), this document is filed in the Deed Records of Comal County, Texas.

I

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (TCEQ) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 5.013, gives the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety code, requires owner's to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

II

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

28 UNIT/PHASE/SECTION BLOCK 2172 LOT VINTAGE OAKS AT THE VINEYARD SUBDIVISION

IF NOT IN SUBDIVISION: ACREAGE SURVEY

The property is owned by (insert owner's full name): DEWAYNE & JANET RITTENHOUSE

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 11 DAY OF August, 2025

[Signature]
[Signature]
Owner(s) signature(s)

DEWAYNE RITTENHOUSE

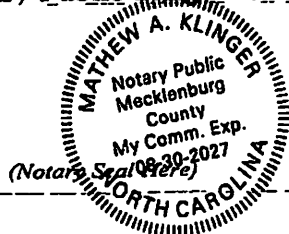
JANET RITTENHOUSE

Owner (s) Printed name (s)

August, 2025 SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 11th DAY OF

THIS AREA FOR COMAL COUNTY CLERK RECORDING PURPOSES ONLY

[Signature]
Notary Public Signature



**Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
08/25/2025 03:16:18 PM
PRISCILLA 1 Pages(s)
202506027232**



Bobbie Koepp



By Cody Young LLC

To: DEWAYNE & JANET RITTENHOUSE
VINTAGE OAKS AT THE VINEYARD, UNIT 28, LOT 2172

Site: 1226 POWDER RIDGE RD, NEW BRAUNFELS, TX 78132
County: COMAL
Installer: PAUL SWOYER SEPTICS
Agency: COMAL COUNTY CCEO
Mfg./Brand: FUJI CE7A

Level 1 Contract

This service contract for the On-Site Sewage-facility, (OSSF), located at the site stated above. OSSF is to be inspected and serviced at regular intervals under a licensed provider. Special emergency service is to be provided within 48 hours of notification by the homeowner or the owner's agent. The initial contract is for (2) years from the date of final septic system inspection. Renewals shall be for a period of 2 years at the current rate and remain in effect for the specified dates listed. From LICENSE TO OPERATE until 2 YEARS FROM LTO

Contract price \$700

(LICENSE TO OPERATE)

Service Program Includes:

1. Regular site inspection at 4-month intervals for residential septic system.
2. OSSF maintenance: check aerator components for proper operation, control panel, effluent pump, spray head/drip nozzle. Check Proprietary specific components. Check pumps, check spray heads, check, and clean any Filters, check bull run valves and any other valves. Flush drain field if needed.
3. Visual inspection of control panel, (when accessible).
4. Labor expenses required at the home to maintain, repair, or remove any part of the control center or mechanical aerator to be returned for factory repair.
5. Labor expenses required at the home to service, repair, or install any part of the control panel or aerator returned from factory.
6. All maintenance reports will be emailed to the permitting authority & customer within 14 days of inspection.

Client Responsibilities:

1. Special service calls after the (at the 4-month intervals) stated in item #1.
2. BODs or TSS grab samples, (if needed).
3. Freight costs to and from factory, for component repair.
4. Costs for replacing damaged or missing parts and repairing any equipment not under any specified warranty.
5. Pumping out any or all the OSSF by a licensed waste hauler.
6. The Homeowner is responsible for maintaining the chlorinator and providing proper chlorine supply if required.
7. Securing pets so that maintenance functions can be performed safely for the technician, and the pet. If pets are present in the yard, and the owner is not on site to secure the animals, it is necessary to cancel the maintenance.
8. Securing pets so that maintenance functions can be performed safely for the technician, and the pet. If pets are present in the yard, and the owner is not on site to secure the animals, and it is necessary to cancel the maintenance, there will be a \$75 trip charge.
9. Insuring access to the property, always to the maintenance provider. (Gates, chains with locks, codes, etc.)

Miscellaneous Provisions

1. This contract can be terminated by either party in writing, within 30 days' notice. Contracts that are terminated will include notification in writing to the Authority having Jurisdiction, the Manufacturer of the system, and the other party.

Homeowner Signature:  Date: 8/11/25

Phone: 703 819 1605 Email: J-Litterhouse@yahoo.com


Maintenance Provider: Cody T. Young, License #MP0002650

Septic Pumping & Maintenance by Cody Young

911 RR3404

Kingsland, TX 78639

(325)248-8740

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

August 12, 2025

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

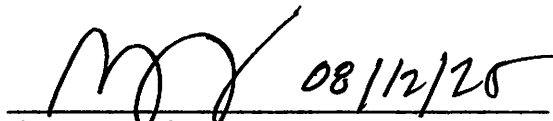
RE- SEPTIC DESIGN
1226 POWDER RIDGE RD
VINTAGE OAKS AT THE VINEYARD, UNIT 28, LOT 2172
NEW BRAUNFELS, TX 78132
RITTENHOUSE RESIDENCE

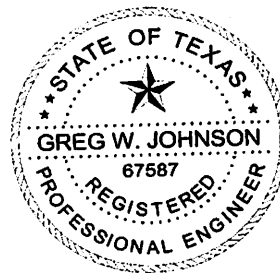
Brandon /Brenda,

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

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).


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: August 11, 2025

Site Location: VINTAGE OAKS at the VINEYARD, UNIT 28, LOT 2172

Proposed Excavation Depth: N/A

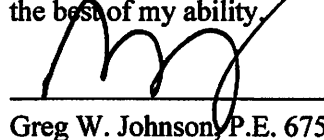
Requirements:

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 <u> </u>						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	IV	CLAY	N/A	NONE OBSERVED	LIMESTONE @ 4"	BROWN
1						
2						
3						
4						
5						

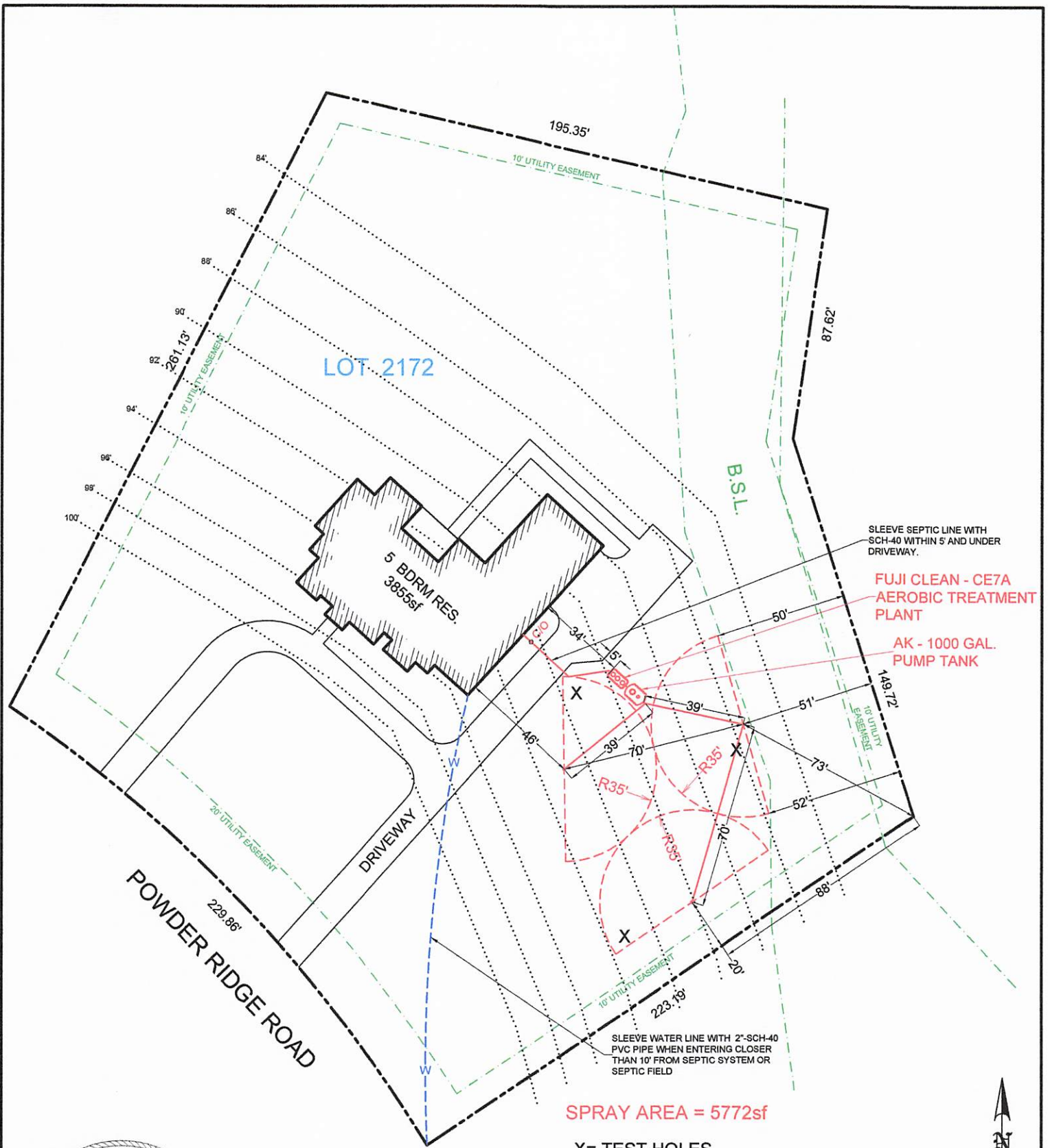
SOIL BORING NUMBER <u> </u> SURFACE EVALUATION <u> </u>						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	SAME		AS		ABOVE	
1						
2						
3						
4						
5						

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability.

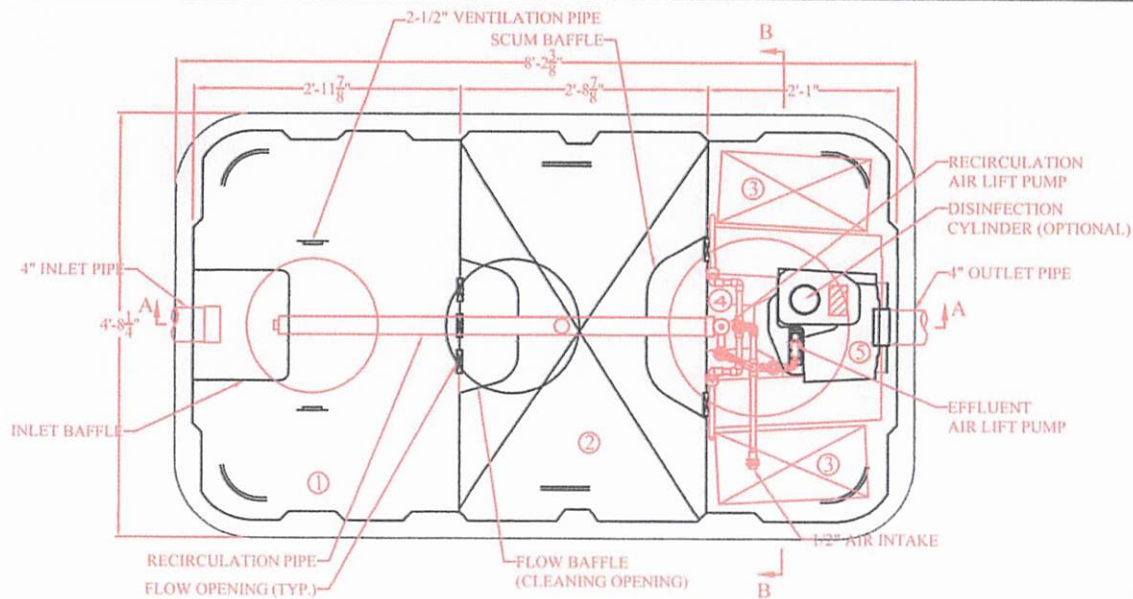

Greg W. Johnson, P.E. 67587-F2585, S.E. 11561

08/11/25
Date

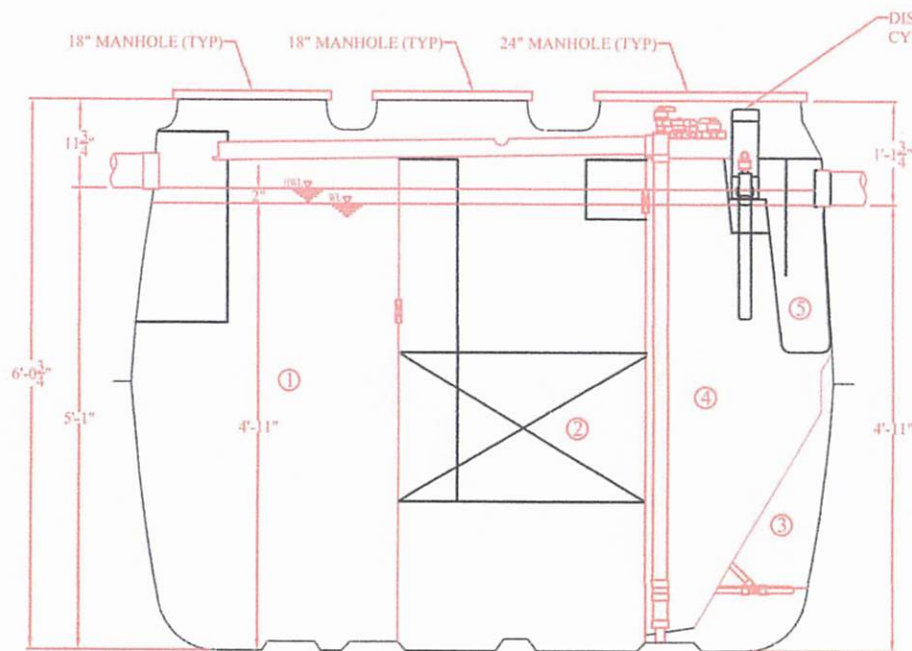
FIRM #2585



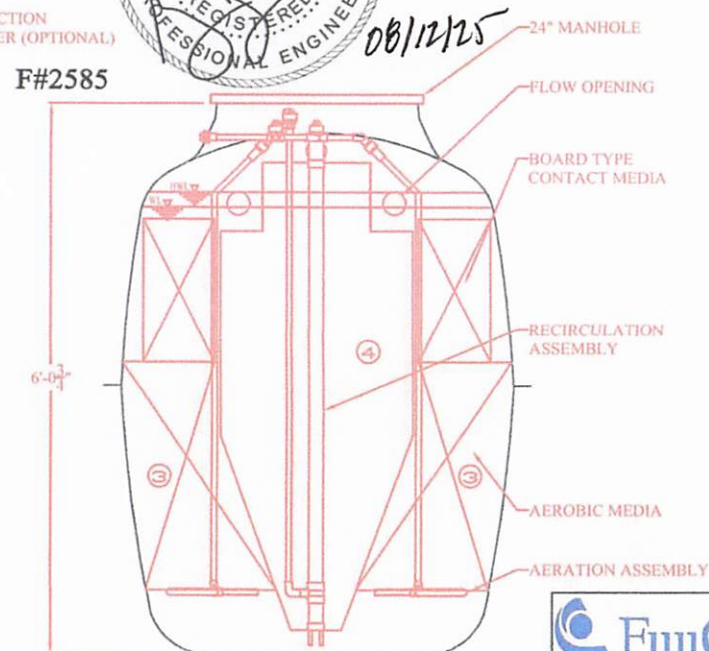
OWNER: DEWAYNE & JANET RITTENHOUSE				DRAWN BY: EJS III	
STREET ADDRESS: 1226 POWDER RIDGE ROAD					
LEGAL DESC: VINTAGE OAKS at the VINEYARD			UNIT/SECTION/PHASE: 28		BLOCK: LOT: 2172
PREPARED BY: GREG W. JOHNSON, P.E. F#002585		SCALE: 1"=50'		DATE: 8/12/2025	
REVISED:					



PLAN VIEW



SECTION A-A VIEW



SECTION B-B VIEW

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

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



F#2585

08/12/25

FujiClean USA
Toward Clean Water...

**FUJI CE7A 720 GPD
Structural Drawing**

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

TANK NOTES:

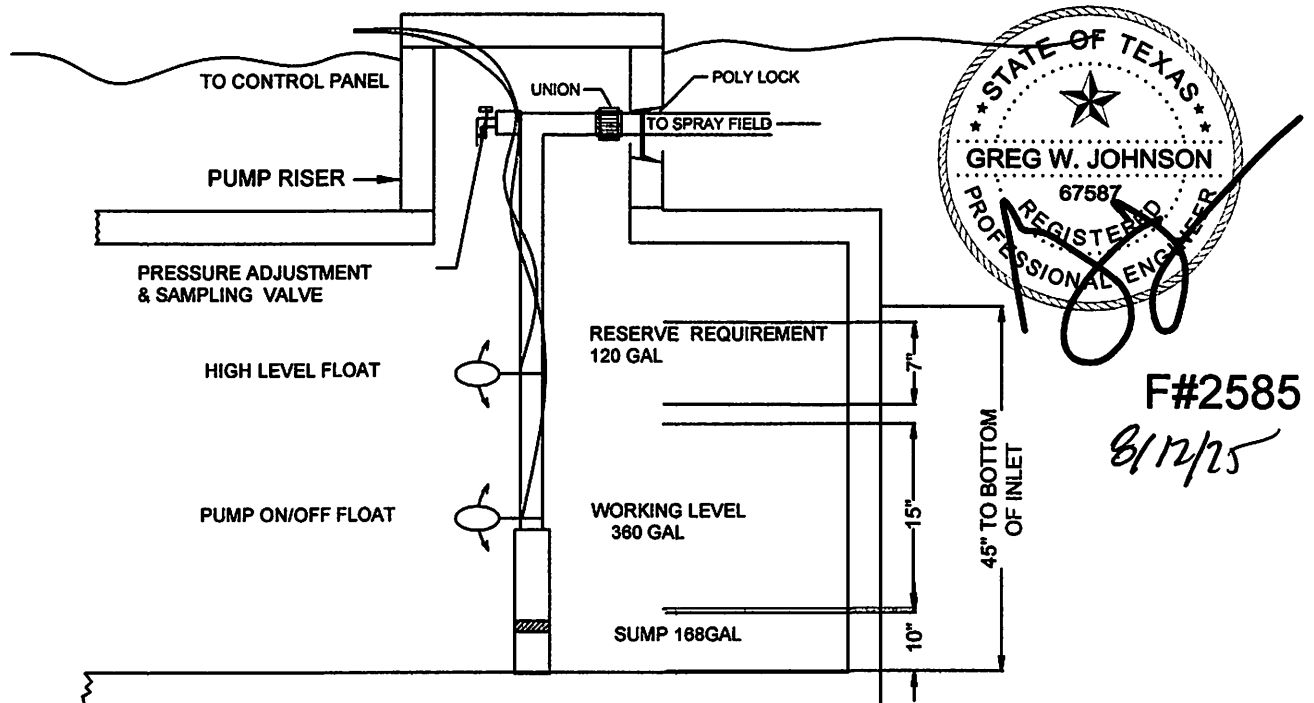
Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

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

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



TYPICAL PUMP TANK CONFIGURATION

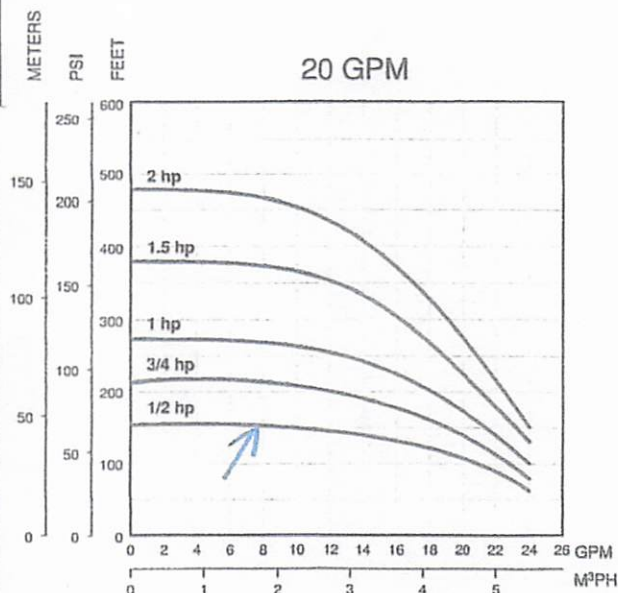
AK1000 GAL PUMP TANK

T3 / T35 Performance

						Metric				
Nozzle	Pressure PSI	Radius ft.	Flow gpm	Precipm 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



COMAL COUNTY

ENGINEER'S OFFICE

195 David Jonas Dr, New Braunfels, Texas 78132 (830)608-2090

Address: 1226 Powder Ridge

Legal Description: Vintage Oaks at the Vineyard 28, LOT 2172

Dear Property Owner & Agent,

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

119016.pdf Markup Summary 10-17-2025

Brandon Mark Olvera (1)



Subject: Group
Page Label: 2
Checkmark: Unchecked
Author: Brandon Mark Olvera
Date: 10/17/2025 4:05:39 PM



Both owners shown on the deed need to sign and date the application.



ON-SITE SEWAGE FACILITY APPLICATION

Date 8/11/25 Permit Number 119016

1. APPLICANT / AGENT INFORMATION

Owner Name DEWAYNE & JANET RITTENHOUSE Agent Name GREG W. JOHNSON, P.E.
Mailing Address c/o 23011 FM 306 Agent Address 170 Hollow Oak
City, State, Zip Canyon Lake, TX 78133 City, State, Zip New Braunfels, TX 78132
Phone # 830-935-4936 Phone # 830-905-2778
Email traci@psseptics.com Email gregjohnsonpe@yahoo.com

2. LOCATION

Subdivision Name ANTHONY OAKS Block 2172
Survey Name / Abstract Number 1226 POWELL BRIDGE Acreage 1.00
Address 1226 POWELL BRIDGE City NEW BRAUNFELS TX Zip 78132

3. TYPE OF DEVELOPMENT

- ☒ Single Family Residential
Type of Construction House, Mobile Home, etc. HOUSE
Number of Bedrooms 5
Indicate Sq Ft of Living Area 3855
☐ 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 Use _____
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: \$ 800,000 (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

4. SIGNATURE OF OWNER

By signing this application, I certify that:

- The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property.
- Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities..
- I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Both owners shown on the deed need to sign and date the application.

Signature of Owner [Signature]

Date 8/11/25



COMAL COUNTY

ENGINEER'S OFFICE

195 David Jonas Dr, New Braunfels, Texas 78132 (830)608-2090

Address: 1226 Powder Ridge

Legal Description: Vintage Oaks at the Vineyard 28, LOT 2172

Dear Property Owner & Agent,

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

119016.pdf Markup Summary 10-27-2025

Brandon Mark Olvera (1)



Subject: Group
Page Label: 2
Checkmark: Unchecked
Author: Brandon Mark Olvera
Date: 10/27/2025 9:21:17 AM



Planning materials and site plan
are for 5 bedroom.

ON-SITE SEWAGE FACILITY APPLICATION

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

Date _____

Permit Number _____

1. APPLICANT / AGENT INFORMATION

Owner Name DEWAYNE & JANET RITTENHOUSE
Mailing Address c/o 23011 FM 306
City, State, Zip Canyon Lake, TX 78133
Phone # 830-935-4936
Email traci@psseptic.com

Agent Name GREG W. JOHNSON, P.E.
Agent Address 170 Hollow Oak
City, State, Zip New Braunfels, TX 78132
Phone # 830-905-2778
Email gregjohnsonpe@yahoo.com

2. LOCATION

Subdivision Name VINTAGE OAKS AT THE VINEYARD Unit 28 Lot 2172 Block _____

Survey Name / Abstract Number _____ Acreage _____

Address 1226 POWDER RIDGE City NEW BRAUNFELS State TX Zip 78132

3. TYPE OF DEVELOPMENT

☐ Single Family Residential

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

Number of Bedrooms 4 Planning materials and site plan are for 5 bedroom.

Indicate Sq Ft of Living Area 3800

☐ Non-Single Family Residential

(Planning materials must show adequate area for down slope retention and retention for treatment and disposal area)

Type of Facility _____

Offices, Factories, Churches, Schools - Indicate Number of _____

Restaurants, Lounges, Theaters - Indicate Number of Seats _____

Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds _____

Travel Trailer/RV Parks - Indicate Number of Spaces _____

Miscellaneous _____

Estimated Cost of Construction: \$ _____ (Structure Only)

Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement?

☐ Yes ☒ No (If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water ☐ Public ☐ Private Well

4. SIGNATURE OF OWNER

By signing this application, I certify that:

- The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property.
- Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities.
- I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Signature of Owner

Date

8/11/25

NOTICE OF CONFIDENTIALITY RIGHTS: IF YOU ARE A NATURAL PERSON, YOU MAY REMOVE OR STRIKE ANY OR ALL OF THE FOLLOWING INFORMATION FROM ANY INSTRUMENT THAT TRANSFERS AN INTEREST IN REAL PROPERTY BEFORE IT IS FILED FOR RECORD IN THE PUBLIC RECORDS: YOUR SOCIAL SECURITY NUMBER OR YOUR DRIVER'S LICENSE NUMBER.

GENERAL WARRANTY DEED

THE STATE OF TEXAS §
COUNTY OF COMAL § KNOW ALL MEN BY THESE PRESENTS:

THAT GEOFF STEINBACH and wife, JENNIFER STEINBACH, hereinafter called Grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) cash and other good and valuable consideration in hand paid by DeWAYNE RITTENHOUSE and wife, JANET RITTENHOUSE, whose address is 11120 Crane Creek Drive, Charlotte, North Carolina, 28278, called Grantee, the receipt and sufficiency of which is hereby acknowledged;

HAS GRANTED, SOLD and CONVEYED, and by these presents does GRANT, SELL and CONVEY unto the said Grantee the following described property situated in Comal County, Texas, to-wit:

Lot 2172, VINTAGE OAKS AT THE VINEYARD, UNIT 28, Comal County, Texas, according to plat thereof recorded in Document No. 202006037730, Map and Plat Records of Comal County, Texas.

This conveyance is made subject to, all and singular, the restrictions, conditions, easements and covenants, applicable to and enforceable against the above described property as reflected by the records of the County Clerk of Comal County, Texas.

Taxes for the current year have been prorated and are thereafter assumed by Grantee.

TO HAVE AND TO HOLD the above described premises, together with, all and singular, the rights and appurtenances thereto in anywise belonging unto the said Grantee, Grantee's heirs, executors, administrators, successors, or assigns forever.

Grantor does hereby bind Grantor, Grantor's successors to warrant and forever defend, all and singular, the said premises unto the said Grantee, Grantee's heirs, executors, administrators, successors, and assigns against any person whomsoever claiming or to claim the same or any part thereof.

EFFECTIVE this the 15th day of November, 2024.

Geoff Steinbach

GEOFF STEINBACH

Jennifer Steinbach

JENNIFER STEINBACH

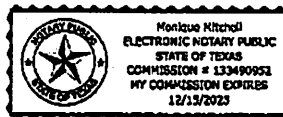
STATE OF Texas
COUNTY OF Tarrant

This instrument was acknowledged before me on the 14 day of November, 2024, by GEOFF STEINBACH and wife, JENNIFER STEINBACH.

Monique Mitchell

Notary Public, State of Texas

3086.DEEDS
New Braunfels Title Co (LB)
GF #NB-4807-24



Notarized online using audio-video communication

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
11/15/2024 10:54:35 AM
CHRISTY 2 Pages(s)
202406034927



Bobbie Koepp

