

Comal County Environmental Health

OSSF Inspection Sheet

Installer Name: Carl W Eoff

OSSF Installer #: OS0029546

1st Inspection Date: 10/20/25

2nd Inspection Date: _____

3rd Inspection Date: _____

Inspector Name: Hendry

Inspector Name: _____

Inspector Name: _____

Permit#: **119037**

Address: **805 SUNRISE TRL**

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: 10/20/25 CH: Tight line and tank good, operational, cover all, sleeved for driveway, sleeve water line within 10' of supply line, remove fire wood pile from spray area, previous tank pumped and crushed

**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						
14	AEROBIC TREATMENT UNIT Size Installed	X			X		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	X X		NuWater B-550; 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)				

**Comal County Environmental Health
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No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
19	DISPOSAL SYSTEM Drip Irrigation		285.33(c)(3)(A)-(F)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(4) 285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
24	DISPOSAL SYSTEM Other (describe) (Approved Design)	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: 119037
Issued This Date: 10/10/2025
This permit is hereby given to: Adam & Angela Kates

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

805 SUNRISE TRL
SPRING BRANCH, TX 78070

Subdivision: Guadalupe River Estates
Unit: N/A
Lot: 147
Block: N/A
Acreage: 3.1600

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.



COMAL COUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

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

Date _____

Permit Number 119037

1. APPLICANT / AGENT INFORMATION

Owner Name Adam & Angela Katz
Mailing Address 805 Sunrise Trail
City, State, Zip Spring Branch, TX 78070
Phone # 210-373-7911
Email adam.katz512@gmail.com

Agent Name Eoff Septic Services
Agent Address 420 Bear Creek Drive
City, State, Zip New Braunfels, TX 78132
Phone # 210-844-1885
Email keith.eismann@yahoo.com

2. LOCATION

Subdivision Name Guadalupe River Estates Unit N/A Lot 147 Block N/A
Survey Name / Abstract Number _____ Acreage 3.16
Address 805 Sunrise Trail City Spring Branch State TX Zip 78070

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

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

Number of Bedrooms 4

Indicate Sq Ft of Living Area 2404

☐ 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: \$ Existing Home (Structure Only)

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

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

Source of Water ☒ Public ☐ Private Well ☐ Rainwater

4. SIGNATURE OF OWNER

By signing this application, I certify that:

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

Adam & Angela West Katz
Signature of Owner(s)

9/17/25
Date



ON-SITE SEWAGE FACILITY APPLICATION

Planning Materials & Site Evaluation as Required Completed By Hoyt Seidensticker

System Description Aerobic with Surface 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) 5652

Gallons Per Day (As Per TCEQ Table III) 300

(Sites generating more than 5000 gallons per day are required to obtain a permit through TCEQ.)

Is the property located over the Edwards Recharge Zone? ☐ Yes ☒ No

(If yes, the planning materials must be completed by a Registered Sanitarian (R.S.) or Professional Engineer (P.E.))

Is there an existing TCEQ approved WPAP for the property? ☐ Yes ☒ No

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

Is there at least one acre per single family dwelling as per 285.40(c)(1)? ☒ Yes ☐ No

If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP? ☐ Yes ☒ No

(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct will not be issued for the proposed OSSF until the proposed WPAP has been approved by the appropriate regional office.)

Is the property located over the Edwards Contributing Zone? ☒ Yes ☐ No

Is there an existing TCEQ approval CZP for the property? ☐ Yes ☒ No

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

If there is no existing CZP, does the proposed development activity require a TCEQ approved CZP? ☐ Yes ☒ No

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

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

If yes, indicate the city: _____

By signing this application, I certify that:

- The information provided above is true and correct to the best of my knowledge.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Signature of Designer



Date

9-18-21

1/CB



202506030119 09/18/2025 03:31:47 PM 1/1

AFFIDAVIT TO THE PUBLIC

THE COUNTY OF Comal
STATE OF TEXAS

AFFIDAVIT

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

I

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (commission) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), §5.012 and §5.013, gives the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety Code, requires owners 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:

Lot 147, Guadalupe River Estates, According to the Map or Plat Recorded in Volume 5, Page 169, Comal County, Texas Map and Plat Records.

Property is Owned by: Adam & Angela Katz

This OSSF shall be covered by a continuous service policy 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 may be obtained from the County Environment Division.

WITNESS BY HAND(S) ON THIS 17 DAY OF September, 2025.

Adam Katz Owner Printed Name [Signature] Owner Signature

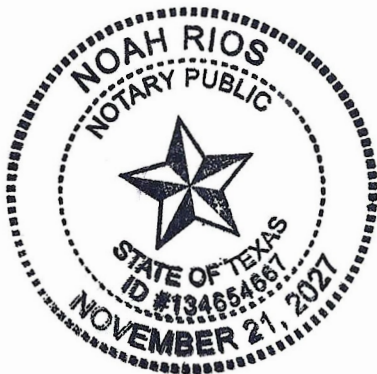
Angela West-Katz Owner Printed Name [Signature] Owner Signature

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 17 DAY OF SEPT., 2025.

[Signature] RUB

Notary Public, State of Texas Notary's Printed Name:

My Commission Expires: 11-21-27



Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
09/18/2025 03:31:47 PM
PRISCILLA 1 Page(s)
202506030119



Bobbie Koepf

On-Site Sewage Facility (OSSF) Maintenance Agreement

- i. **General:** This work for Hire Agreement (hereinafter referred to as "**Agreement**") is entered into by and between Adam & Angela Katz (hereinafter referred to as "**Client**") and Eoff Septic Services (hereinafter referred to as "**Contractor**"). By this Agreement, **Contractor** agrees to render services, as described herein, and the **Client** agrees to fulfill his/her responsibilities under this agreement as described herein.
- ii. **Effective Dates:** Unless otherwise stated below, this agreement commences on the date the Licenses to Operate (LTO), date as noted below or upon receipt of full payment and runs for two (2) Year(s).

Agreement Starting Date: (LTO Date) and Ending Date: (Two Years Thereafter).

- iii. **Services by Contractor:** Contractor will provide the following services (hereinafter referred to as the "Services"):
- a. In compliance with **Agency** (TCEQ and/or County) and manufacturer's requirements, inspect and perform routine maintenance on the On-Site Sewage Facility (hereinafter referred to as the "OSSF") three (3) times per years (Every 4 Months).
 - b. Report to the appropriate regulatory authority and to the **Client**, as is required by both the State's on-site rules and local **Agency's** rules, if more stringent. All findings must be reported to the local agency within 14 days.
 - c. If any components of the OSSF are found to be in need of repair during the inspection, the **Contractor** will notify the **Client** of the repairs needed and provide any associated materials and labor costs.
 - d. Visit site in response to **Client's** request(s) for unscheduled service(s) within two business days from the date of **Contractor's** receipt of **Client's** request. All unscheduled responses are in addition to the fee covered by the **Agreement** and will be billed to the **Client**.
 - e. Provide notification of arrival to site to the homeowner or to site personnel. Additionally, written notification will be left at the site with site personnel or e-mailed to the **Client** upon completion of inspection, as well as, forwarded to **Agency** within 14 days.
- iv. **Site Location:** The Services are to be performed at the property located at:
- Site Address: 805 Sunrise Trail, Spring Branch, TX 78070 OSSF Permit #: TBA
- v. **Payment(s):** The fee for this **Agreement** only covers the **Services** described herein. This fee does not cover equipment, parts or labor supplied for repairs or charges for unscheduled **Client** requested trips to the site. By signing this **Contract**, the **Client** is authorizing the **Contractor** to remove any parts which were installed but not paid for at the end of 30 days. The **Client** is still responsible for any labor costs associated with the installation and removal of said parts.
- vi. **Client's Responsibilities:** The **Client** is responsible for each and all of the following:
- a. Maintain chlorinator and provide proper chlorine supply, if OSSF is equipped with same.
 - b. Provide all necessary yard or lawn maintenance and removal of obstacles as needed to allow the OSSF to function properly, and to allow **Contractor** easy access to all parts of the OSSF.
 - c. Immediately notify **Contractor** and **Agency** of any and all problems with, including failure of the OSSF.
 - d. Upon receiving notification of services needed from the **Contractor**, it becomes the **Client's** responsibility to contact the **Contractor** to authorize the service. If the **Client** chooses to use a different contractor to perform the service, the **Client** is responsible for ensuring the **Contractor**

Client Initial: AK/AWK

Contractor Initial: [Signature]

holds the proper licenses (Installer II, Maintenance provider) and is certified by the manufacture. Also, the **Client** is responsible for ensuring proper notification is given to the **Agency**, as required by the State local Agency rules.

- e. **Clients** residing in Comal County should allow for samples at both the inlet and outlet to the OSSFF to be obtained by the **Contractor** for the purpose of evaluating, the OSSFs performance when requested by the **County**. If these samples are sent to a lab for testing, the **Client** will directly pay the lab for the cost of the testing plus pay the **Contractor** for all man-hours expending in providing this additional service at the current **Contractor's** labor rate.
 - f. Not allow backwash from water treatment or water conditioning equipment to enter the OSSF.
 - g. Maintain site drainage to prevent adverse effect on the OSSF.
 - h. Promptly and fully pay **Contractor's** bills, fee, or invoices are described herein.
- vii. **Access by Contractor:** **Contractor**, or personnel authorized by the **Contractor**, may enter the property at reasonable times without prior notice for the purpose of performing the above-described services. **Contractor** will require access to the OSSF electrical and physical components, including tanks, by means of manway or risers for the purpose of evaluations required by manufacture, and/or rules. If such manway or risers are not in place, excavation together with other labor and materials will be required, and will be billed to **Client** as an additional service. Any excavated soil is to be replaced as best as reasonable possible.
- viii. **Limits of Liability:** In no event shall the **Contractor** be liable for indirect, consequential, incidental or punitive damages, whether in contract tort of any other theory. In no event shall the **Contractor's** liability for damages exceed the price for the **Services** described in this **Agreement**.
- ix. **Entire Agreement:** this **Agreement** contains the entire **agreement** of the parties, and there are no other promises or conditions in any other **agreement**, oral or written.

Client and/or Authorized Client Agent:

Print Name:

Adam Katz / Angela West Katz

Signature:

Angela West Katz

Date:

9/17/25

Email Address:

adam.katz512@gmail.com

Phone Number:

(210) 373-7911

Site Address: 805 Sunrise Trail, Spring Branch, TX 78070 OSSF Permit #: TBA

Billing Address: _____

=====Contractor=====

C Eoff Services Inc. dba Eoff Septic Services
420 Bear Creek Drive
New Braunfels, TX 78132
210-844-1885

Signature:

[Signature]

Name/Title: Keith R. Eismann / CFO

Date:

9-16-25

OSSF Maintenance Provider Licenses # - MP0001745
OSSF Installer II Licenses # - OS00029546

ON-SITE SEWAGE FACILITY
Site Evaluation Report Information

Date: 9/2/2025

Applicant Information:

Name: Adam and Angela Katz

Address: 805 Sunrise Trail

City: Spring Branch State: Texas Zip: 78070

Phone: _____

Property Location:

Lot: 147 Block _____

Sub.: Gudalupe River Estates

Street/Road Address: 805 Sunrise Trail

City: Spring Branch State: Texas Zip: 78070

Unincorporated Area? Y or N y

Additional information _____

Site Evaluator Information:

Name: Hoyt Seidensticker

License OS0008771 Expires 8/31/2026

Company: Land Stewardship Services, LLC

Address: 124 Bristow Way

City: Boerne State: Texas Zip: 78006

Phone: (210) 414-6603

Email hoyt@landstewardshipservices.com

Installer information:

Name: Carl Eoff OS0029546

Company: Carl Eoff Services

Address: 420 Bear Creek Road

City: New Braunfels State: Texas Zip: 78132

Phone: (210) 669-6088 Fax: _____

Schematic of Lot or Tract

Show:

Compass North, adjacent streets, property lines, property lines, property dimensions, location of buildings, easements, water lines, and other surface improvements where known (drainage, patios, sidewalks).

Location of existing or proposed water wells within 150 feet of property.

Indicate slope or show contour lines from the structure to the farthest location of the proposed soil absorption or irrigation area.

Location of soil borings or dug pits (show location with respect to a known reference point).

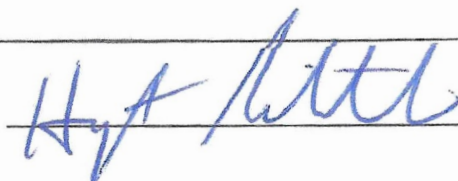
Location of natural, constructed, or proposed drainage ways, (streams, ponds, lakes, rivers, high tide of salt water bodies) water impoundments areas, cut or fill bank, sharp slopes and breaks.

SITE DRAWING

Lot Size: 3.16 acres

SEE ATTACHED

Signature of Site Evaluator



Site Evaluator License No OS0008771

ON-SITE SEWAGE FACILITY

Soil Evaluation Report Information

Date Soil Survey Performed: 9/2/2025

Site Location: 805 Sunrise Trail

Name of Site Evaluator: Hoyt Seidensticker Registration Number: OS0008771

Proposed Excavation Depth: n/a County: Comal

Requirements:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area.

Location of soil boring or dug pits must be shown on the site drawing.

For subsurface disposal, soil evaluation 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 feature on the form. Indicate depths where features appear.

Soil Boring Number <u>1</u>						
Depth (feet)	Texture Class	Soil Structure	Gravel Analysis	Drainage (Redox Features/ Water Table)	Restrictive Horizon	Observations (color, consistence)
0	III	Clay loam rock	<30%	none		Brown
1						
2 <u>20 in</u>						
3						
4						
5						

Soil Boring Number <u>2</u>						
Depth (feet)	Texture Class	Soil Structure	Gravel Analysis	Drainage (Redox Features/ Water Table)	Restrictive Horizon	Observations (color, consistence)
0	III	Clay loam rock	<30%	none		Brown
1						
2 <u>20 in</u>						
3						
4						
5						

Features of Site Area

Presence of 100 year flood zone Yes ☐ No ☒

Presence of adjacent ponds, streams, water improvements Yes ☐ No ☒

Existing or proposed water well in nearby area Yes ☐ No ☒

Organized sewage service available to lot or tract Yes ☐ No ☒

Recharge feature within 150 feet Yes ☐ No ☒

By my signature, I hereby certify that the information provided in this report is based on my site observations and are accurate to the best of my ability.

I understand that any misrepresentation of the information contained in this report may be grounds to revoke or suspend my license. The site evaluation

determined the site is suitable for a spray Distribution disposal system with Aerobic treatment

According to table XIII, the site is suitable for this proposed system. A copy of Table XIII has been given to the property owner to inform them of other alternatives based upon the result of this site evaluation

Hoyt Seidensticker
Signature of Site Evaluator

9-18-25
Date

9/18/2025

6:37 AM

Aerobic with Spray
Distribution System

ON-SITE SEWAGE FACILITY DESIGN CRITERIA

Adam and Angela Katz

Property Information:St. Address: 805 Sunrise TrailCity: Spring Branch State: TexasZip code: 78070**Predicted Quantity of Sewage (Q)**Water Saving Devices in Home (y/n): yesGallons/day (Q): 300Greywater included (yes/no): yes**Rate of Adsorption (Ra)**Application rate (g/sq. ft): 0.064Minimum Adsorptive Area (sq. ft.): 4687.5**Aerobic Unit**Required size of aerobic unit: 480 gpdPretreatment Tank (gallons): 353Class 1 Aerobic Unit: NuWater 550-PC-400PTPump tank total capacity (gal): 768Chlorination: Liquid installed in TankPump Switch operation: Float systemDosing cycle quantity (gals): VariedCycling time: night timePump size and capacity: Franklin E-Series 20 GPM**House Information**No. of Bedrooms: 4Sq. footage (Approx.): 2404gallons per day: 300Water Supply: public**Supply Line from House**Length of supply line (approx. ft): 15Type of supply line: SCH 40 PVCSize of Supply line (in): 3 or 4**Supply Line For Spray Irrigation System**Length of supply line (approx. ft): 145Type of supply line: SCH 40 PVCSize of supply line (in): 1**Disposal Area per this System** $\pi (30)^2 =$ 2826 $\pi (30)^2 =$ 2826==Total irrigated area (sq. ft.): 5652

All design criteria is in accordance with TCEQ, Title 30, TAC Chapter 285, Subchapter D, On-Site Sewage Facilities (Effective December 29, 2016). 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.

Hoyt Seidensticker
Hoyt Seidensticker, R.S. No. 3588

9-18-25
Date

Land Stewardship Services, LLC, 124 Bristow Way, Boerne, Texas 78006

Cell (210) 414-6603

hoyt@landstewardshipservices.com

Effective Immediately: If any change(s) are made that require a revision to this design, a \$150.00 fee will be assessed. This includes,

but not limited to, change(s) in the house size, number of bedrooms, location of house or one type of system to another.

9/18/2025

6:37 AM

Aerobic with Spray
Distribution System

ON-SITE SEWAGE FACILITY DESIGN CRITERIA

Adam and Angela Katz

Head Pressure

Elevation Head:	<u>4</u>
Pressure Head:	<u>92</u>
Friction Head:	<u>5.8</u>
Total head:	<u>101.8</u>

Sprinkler Head Information

K-Rain sprinkler head PROPLUS,
low angle nozzle

No. 3 @40psi	GPM:	<u>3.1</u>
Number of sprinkler heads:		<u>2</u>
Gallons per minute:		<u>6.2</u>

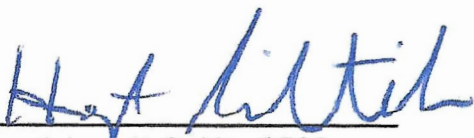
A class 1 aerobic wastewater treatment unit, chlorination and spray distribution system will be designed for this location. Wastewater from the residence will flow to a pretreatment/trash tank, then to the treatment unit. Treated effluent will be disinfected by a LBC Manufacturing "EZ-Tank" Gravity Flow Liquid Bleach Chlorinator in the pump tank, before being disposed of through above ground sprinkler heads. All warning systems shall be installed with the aerobic unit

Land acceptable for surface application shall have a flat terrain (with less than or equal to 15% slope). Sloped land (with greater than 15% slope) may be acceptable if it is properly landscaped and terraced to minimize runoff. There shall be nothing in the surface application area within ten feet of the sprinkler which would interfere with the uniform application of the effluent.

Areas that rock is exposed must be covered with a suitable amount of material acceptable to the inspecting authority. Areas that are bare or have been disturbed must be sodded with a type of vegetative cover or seeded erosion control blanket installed or seeded then an erosion control blanket laid over the area or an equivalent county approved method of cover prior to system operation.

At every inspection a Total Chlorine Residual test must be conducted and must be a minimum acceptable test of .1 mg/l residual in Pump Tank.

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9/18/2025

6:37 AM

Aerobic with Spray
Distribution System

ON-SITE SEWAGE FACILITY DESIGN CRITERIA

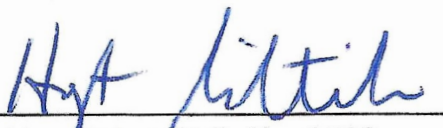
Adam and Angela Katz

A maintenance contract for the entire system must be established at time of installation with someone holding a license to maintain the installed aerobic system.

All tanks must have inspection or cleanout ports located on the tank top over all inlet and outlet devices. Each inspection or cleanout port must be offset to allow for pumping of the tank. The ports may be configured in any manner as long as the smallest dimension of the opening is at least 12 inches, and large enough to provide for maintenance and equipment removal. All inspection and cleanout ports shall have riser over the port openings, which extend to two inches above grade. A secondary plug, cap, or other suitable restraint system shall be provided below the riser cap to prevent tank entry if the cap is unknowingly damaged or removed

The risers shall have inside diameters which are equal to or larger than the inspection or cleanout ports. Risers must be permanently fastened to the tank lid or cast into the tank. The connection between the riser and the tank lid must be watertight. Risers must be fitted with removable watertight caps and protected against unauthorized intrusions by either a padlock, a cover that can be removed with specialized tools, a cover having a minimum net weight of 29.5 kilograms (65 pounds) set into a recess of the tank lid, or another means approved by the executive director. Risers and riser caps exposed to sunlight must have ultraviolet light protection. Risers must be able to withstand the pressures created by the surrounding soil.

All design criteria is in accordance with TCEQ, Title 30, TAC Chapter 285, Subchapter D, On-Site Sewage Facilities (Effective December 29, 2016). 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.



Hoyt Seidensticker, R.S. No. 3588

Land Stewardship Services, LLC, 124 Bristow Way, Boerne, Texas 78006

Cell (210) 414-6603

9-18-25
Date



hoyt@landstewardshipservices.com

Specs

Aerobic with Spray Distribution system

Adam And Angela Katz

Lot 147

Guadalupe River Estates

805 Sunrise Trail

Spring Branch, Texas 78070

Comal County

The referenced property is located within the Edwards Aquifer Contributing Zone. This property is exempt from a Contributing Zone Plan because it is not a regulated activity according to Chapter 213.5(h)(2) "exempt ... Does not exceed 20% impervious cover on the site." There is no recharge feature within 150' of the proposed septic system.

Effective September 1, 2023, inspection and cleanout ports shall have risers over the port opening, which extend to two inches above grade. A secondary plug, cap, or other suitable restraint system shall be provided below the riser cap to prevent tank entry if the cap is unknowingly damaged or removed.

The risers shall have inside diameters which are equal to or larger than the inspection or clean out ports. Risers must be permanently fastened to the tank lid or cast into the tank. The connection between the riser and the tank lid must be watertight. Risers must be fitted with removable watertight caps and protected against unauthorized intrusions by either a padlock, a cover that can be removed with specialized tools, a cover having a minimum net weight of 29.5 kilograms (65 pounds) set into a recess of the tank lid, or any other means approved by the executive director. Risers and riser caps exposed to sunlight must have ultraviolet light protection. Risers must be able to withstand the pressures created by the surrounding soil.

All pipes from the structures to the septic tank shall be no less than 1/8 inch fall per foot of pipe

Surface application should be done between the hours of 12:00 midnight and 5:00 a.m.

All external electrical lines must be in gray conduit

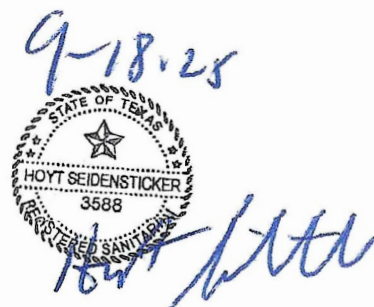
There shall be nothing in the surface application area within ten feet of the sprinkler which would interfere with the uniform application of the effluent

Areas that rock is exposed must be covered with a suitable amount of material. Areas that are bare or have been disturbed must be seeded or sodded with a mixture of rye and Bermuda grasses or other grass species prior to system operation.

Land acceptable for surface application shall have a flat terrain (less than to equal to 15% slope). Sloped land (with greater than 15% slope) may be acceptable if it is properly landscaped and terraced to minimize runoff.

100 yr flood plain does not exist on this tract

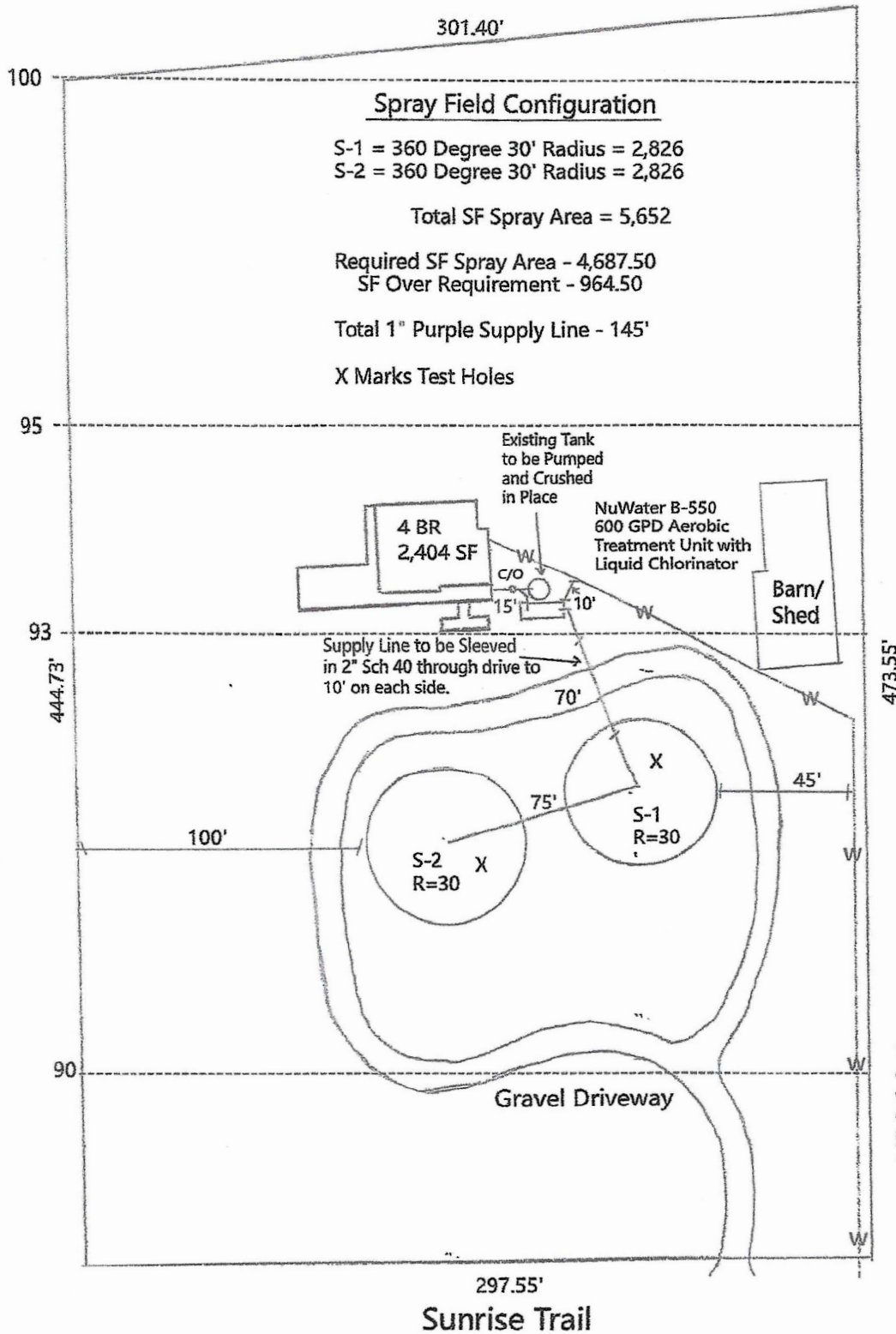
location of sprinkler heads may be adjusted in field to avoid obstacles



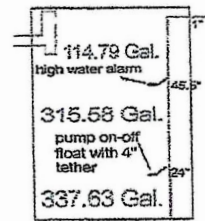
Adam & Angela Katz
 805 Sunrise Trail
 Spring Branch, TX 78070
 Lot 147
 Guadalupe River Estates
 3.16 Acres



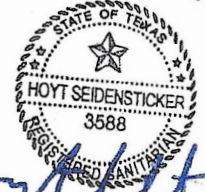
1' = 60'



**300 GPD
 Pump Float Settings**



9-18-25

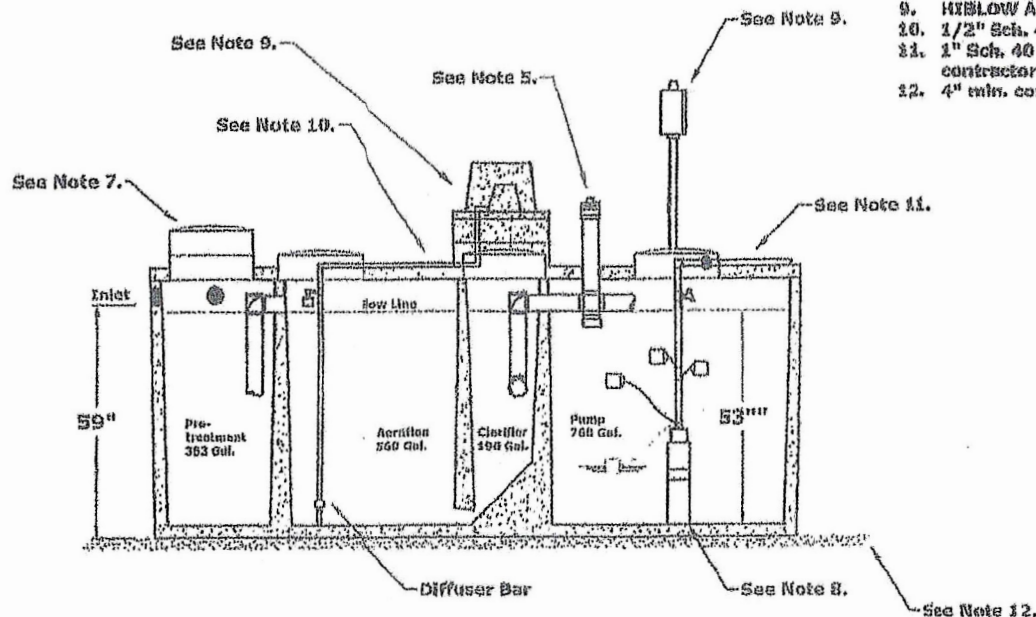


Hoyt Seidensticker

100 Yr. Flood Plain does not exist on this tract. This design complies with all provisions of Edwards Contributing Zone Plan and there is not a recharge feature within 150' of the OSSF

Assembly Details

OSSF



GENERAL NOTES:

1. Plant structure material to be precast concrete and steel.
2. Maximum burial depth is 30" from slab top to grade.
3. Weight = 14,900 lbs.
4. Treatment capacity is 600 GPD. Pump compartment set-up for a 360 GPD Flow Rate (4 bedroom, < 4,000 sq/ft living area). Please specify for additional set-up requirements. BOD Loading = 1.62 lbs. per day.
5. Standard tablet chlorinator or Optional Liquid chlorinator. NSF approved chlorinators (tablet & liquid) available.
6. Bio-Robix B-550 Control Center w/ Timer for night spray application. Optional Micro Dose (min/sec) timer available for drip applications. Electrical Requirement to be 115 Volts, 60 Hz, Single Phase, 30 AMP, Grounded Receptacle.
7. 20" Ø access riser w/ lid (Typical 4). Optional extension risers available.
8. 20 GPM 1/2 HP, high head effluent pump.
9. HTELOW Air Compressor w/ concrete housing.
10. 1/2" Sch. 40 PVC Air Line (Max. 50 Lft from Plant).
11. 1" Sch. 40 PVC pipe to distribution system provided by contractor.
12. 4" min. compacted sand or gravel pad by Contractor

DIMENSIONS:

Outside Height: 67"
Outside Width: 63"
Outside Length: 164"

MINIMUM EXCAVATION DIMENSIONS:

Width: 76"
Length: 176"

NuWater B-550 (600 GPD)
Aerobic Treatment Plant (Assembled)

Model: B-550-PC-400PT

March, 2012 - Rev 1.
By: A.S.

Scaler
All dimensions subject to site specific application
variations.

Dwg. #: ADV-B550-3

Advantage
Wastewater Solutions Inc.

Advantage Wastewater Solutions Inc.
444 A Old Hwy No 9
Confort, TX 78013
830-995-3389
Fax: 830-995-4951

Or Equivalent

BLASTER®

Filtered Effluent Pump

SPECIFICATIONS

Model	Flow Range GPM	Horsepower Range	Best Eff. GPM	Discharge Connection	Maximum Solids Size	Rotation ^①
8EB	1.5 - 10	½ - 1	7	1¼"	⅛" dia.	CCW
12EB	3 - 16	½ - 1½	10	1¼"	⅛" dia.	CCW
20EB	6 - 28	½ - 1½	18	1¼"	⅛" dia.	CCW
33EB	10 - 50	½ - 1½	33	1¼"	⅛" dia.	CCW
55EB	20 - 80	½ - 1½	55	1¼"	⅛" dia.	CCW

① Rotation is counterclockwise when observed from pump discharge end.

"EB" SERIES MATERIALS OF CONSTRUCTION

Part Name	Material
Discharge Head	Glass Filled Thermo-Plastic
Check Valve Poppet	Thermo-Plastic
Check Valve O-ring	E P Rubber
Bearing Spider - Upper	Glass Filled Polycarbonate
Bearing	Urethane
Klipring	AISI 301 SS
Diffuser	Glass Filled *
Impeller	Noryl™
Bowl	AISI 304 SS
Shim	AISI 304 SS
Spacer	AISI 304 SS, Powder Metal
Inlet Strainer	Glass Filled Thermo-Plastic
Motor Adapter	Glass Filled Thermo-Plastic
Casing	
Shaft	AISI 304 SS
Coupling	AISI 304 SS, Powder Metal

* 33EB and 55EB Glass Filled Polycarbonate

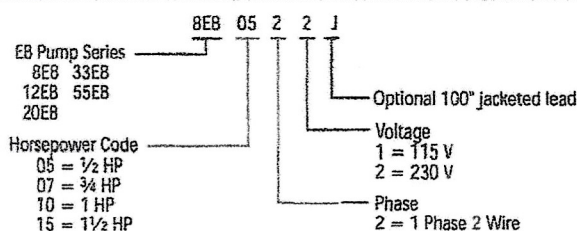


FEATURES

- **Designed for pumping filtered effluent from processed septic systems only.**
- **Field Serviceable:** Pump can be rebuilt in the field to like new condition with common tools and readily available spare parts.
- NOTE: The Model EB has left hand casing threads.
- **Powered for Continuous Operation:** All ratings are within the working limits of the motor as recommended by the motor manufacturer. Pump can be operated continuously without damage to the motor.
- **Metal Parts are Stainless Steel:** AISI types 301 and 304 are corrosion resistant.
- **Non-Metallic Parts are Effluent Compliant:** Impellers, diffusers constructed of glass filled polycarbonate or Noryl, engineered composites. Both materials are corrosion resistant.
- **Bearing Discharge Head:** State of the art engineered composite material for superior strength and corrosion resistance. Loop for safety line molded into head.
- **Motor Adapter:** State of the art engineered composite material with high rigidity to provide accurate alignment of liquid end to motor. Generous space for removal of motor mounting nuts with regular open-end wrench.
- **Bowls:** Stainless steel for strength and abrasive resistance.
- **100" 3 wire motor lead standard.**
- **Consult factory for recommendations involving long run cycles followed by short off cycles to assure proper motor cooling flows.**

- **Check Valve:** Built-in check valve assembly on 8, 12, 20 EB models. No check valve provided on 33 and 55 EB models.
- **Warranted for one year against failure due to workmanship and materials. Solids plugged pumps are not covered. Pumps used for liquids other than filtered effluent are not covered.**
- **Stainless Steel Casing:** Polished stainless steel is attractive and durable in the most corrosive effluent.
- **Hex Shaft Design:** Six sided shafts for positive impeller drive.
- **Inlet Strainer:** Molded suction strainer built into motor adapter.
- **Urethane Upper Bearings:** Fluted design for free passage of abrasives.
- **Franklin Electric Motor:**
 - Corrosion resistant stainless steel construction.
 - Built-in surge arrestor is provided on single phase motors.
 - Stainless steel splined shaft.
 - Hermetically sealed windings.
 - Replaceable motor lead assembly.
 - UL 778 and CSA recognized.
 - NEMA mounting dimensions.
- **Optional 100" jacketed power cord available.**
- **Agency Listings:** All complete pump/motor assemblies are UL778 and CSA listed. All Franklin Electric Motors are UL778 recognized.
- **All models have ⅜" diameter bypass in discharge head to ensure venting on start up.**

ORDER NUMBER CODE



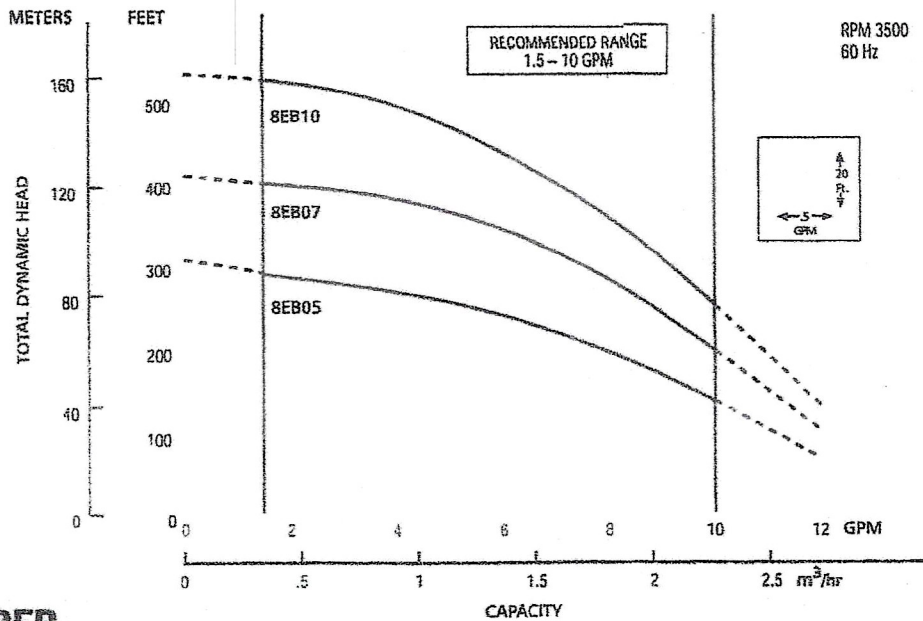
Underwriters Laboratories
File no. E174426



Canadian Standards Association
File no. 38549

Model 8EB

FILTERED EFFLUENT BLASTER.

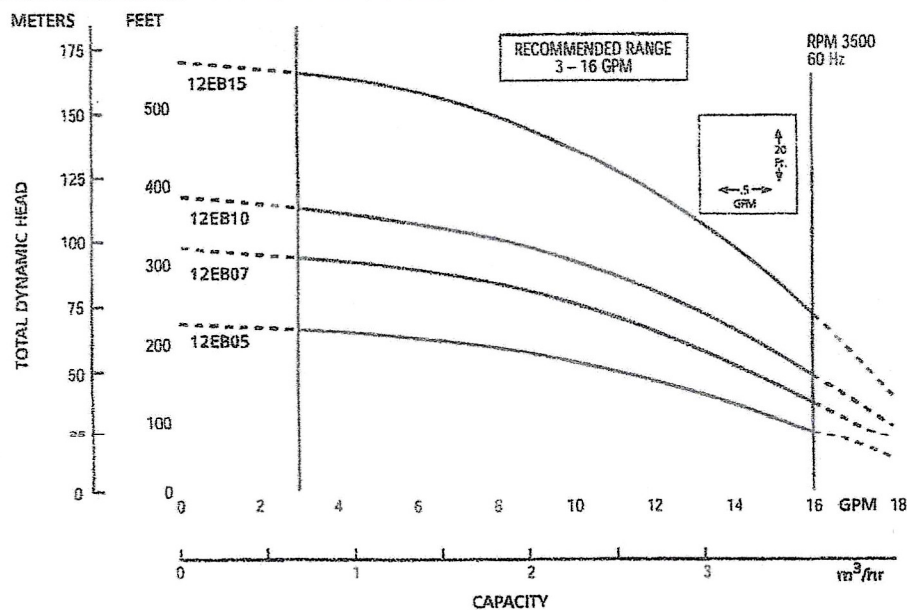


RECEIVED

OCT 29 2020

COUNTY ENGINEER

Model 12EB

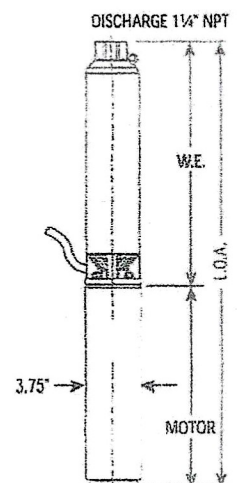


DIMENSIONS AND WEIGHTS

Order Number	HP	Phase	Stages	Length (inches)			Weight (lbs.)		
				W.E.①	Motor	L.O.A.②	W.E.	Motor	Total
8EB0522, 8EB0521	1/2	1	10	13.3	9.5	22.8	5	18	23
8EB0722	3/4	1	13	15.4	10.7	26.1	6	20	26
8EB1022	1	1	17	18.3	11.8	30.1	8	23	31
12EB0522, 12EB0521	1/2	1	7	11.0	9.5	20.5	4	18	22
12EB0722	3/4	1	10	13.0	10.7	23.7	5	20	25
12EB1022	1	1	12	14.4	11.8	26.2	6	23	29
12EB1522	1 1/2	1	17	17.9	15.1	33.0	8	31	39

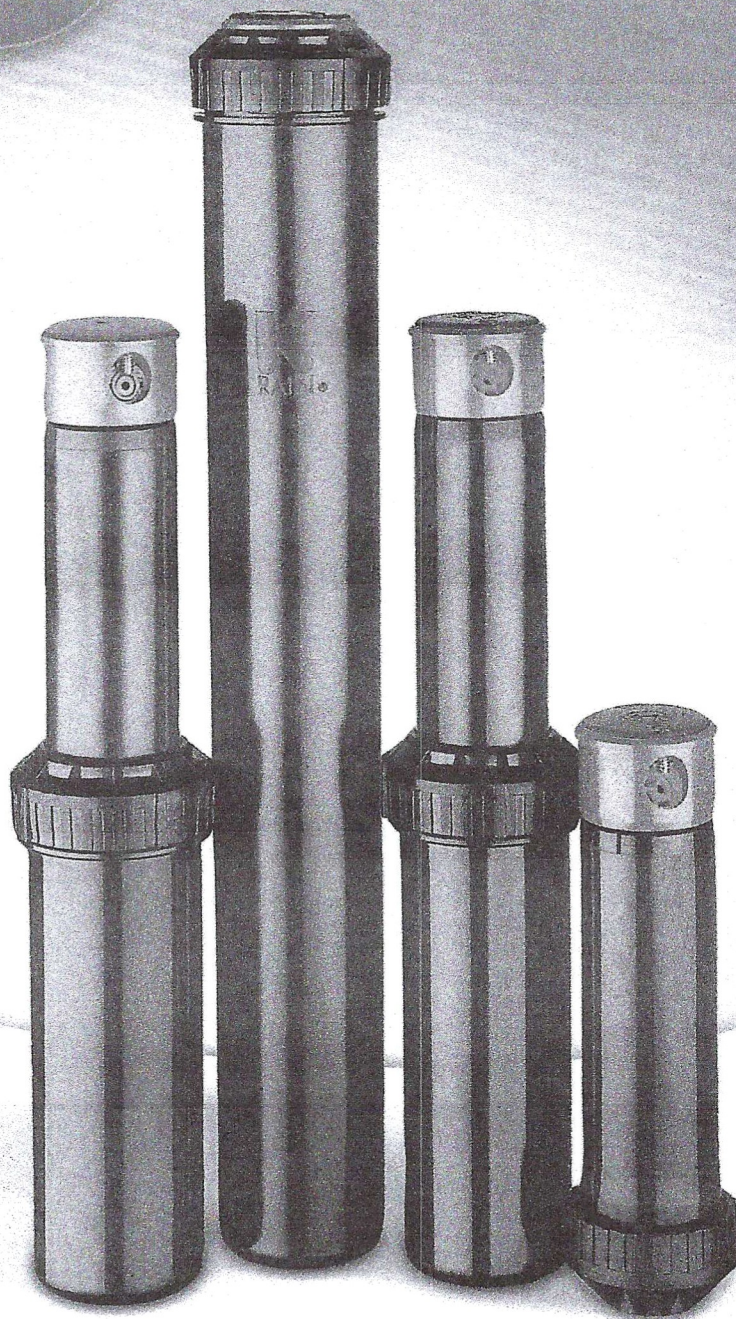
① W.E. = water end or pump without motor.

② L.O.A. = length of assembly - complete pump - water end and motor.



PROPLUS™

Or Equivalent



The ProPlus™ is packed with features that ensure reliability, saving the installer time, money and needless frustration.

- ▶ **Revolutionary Patented Easy Arc Set** – Simplified arc set allows for wet or dry adjustment in seconds.
- ▶ **5" Riser** – Perfect for grasses with thick thatch.
- ▶ **3/4" Inlet** – Replaces all standard rotors.
- ▶ **2N1 Adjustable or Continuous Rotation** – Provides a full range adjustment from 40° to a continuous full circle.
- ▶ **Patented Arc Set Degree Markings** – Clearly indicates the current watering pattern and simplifies arc set adjustment.
- ▶ **Arc Memory Clutch** – Prevents internal gear damage and returns rotor to its prior setting automatically if nozzle turret is forced past its stop.
- ▶ **Time Proven Patented Reversing Mechanism** – Assures continuous reverse and return...over a 20 year history.
- ▶ **Ratcheting Riser** – Allows for easy adjustment of your left starting position with a simple turn of the riser.
- ▶ **Rubber Cover** – Seals out dirt and increases product durability.
- ▶ **Wide Selection of Nozzles** – Including standard and low angle, provides flexibility in system design.
- ▶ **Optional Check Valve** – Prevents low head drainage.

K RAIN®

**IRRIGATION SOLUTIONS
WORLDWIDE™**

PROPLUS™

The **PROPLUS™** adjustable arc and full-circle gear driven rotor comes standard with nine numerically coded interchangeable nozzles. Excellent nozzle performance delivers an exceptional fall out pattern. In independent testing by C.I.T., the **PROPLUS™** delivered up to 90% uniform coverage.

Also Available: 12" High Pop, Shrub Head and Reclaimed Water models.

Tough, proven and advanced, the **PROPLUS™** is the leader in it's class. Set it and forget it. Arc Memory Clutch returns the rotor to its preset position. Technology works for you.

MODELS

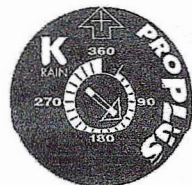
11003	ProPlus
11003-HP	ProPlus 12" High Pop
11003-SH	ProPlus Shrub Head

OTHER OPTIONS: ADD TO PART NUMBER

-CV	Check Valve
-LA	Low Angle Nozzle
-NN	No Nozzle
-RCW	ProPlus for Reclaimed Water w/Low Angle Nozzle

EASY ARC SETTING

Arc Selection 40° to Continuous 360°
Adjust From Left Start



HOW TO SPECIFY

11003	-RCW
Model Number	Description



K-Rain Manufacturing Corp.
1640 Australian Avenue
Riviera Beach, FL 33404 USA
+1 561 844-1002
FAX: +1 561 842-9493
1.800.735.7246 | www.krain.com

SPECIFICATIONS

- Inlet: 3/4" Threaded NPT
- Arc Adjustment Range: 40° to Continuous 360°
- Flow Range: .5 - 10.0 GPM
- Pressure Rating: 20 - 70 PSI
- Precipitation Rate: .06 to .50 Inches Per Hour (Depending on Spacing and Nozzle Used)
- Overall Height (Popped Down): 7 1/2" / 17" for High Pop
- Recommended Spacing: 28' to 44'
- Radius: 22' to 50'
- Nozzle Trajectory: 26°
- Low Angle Nozzle Trajectory: 12°
- Standard and Low Angle Nozzle: Included
- Riser Height: 5"

PERFORMANCE DATA

PERFORMANCE				METRIC			
NOZZLES	PRESSURE PSI	RADIUS FT	FLOW GPM	NOZZLES	PRESSURE KPA	RADIUS METERS	FLOW L/MIN
#0.5	30	28'	.5	#0.5	206	2.0	8.5
	40	29'	.6		275	3.0	8.8
	50	29'	.7		345	3.5	8.8
	60	30'	.8		413	4.0	9.1
#0.75	30	29'	.7	#0.75	206	2.0	8.8
	40	30'	.8		275	3.0	9.1
	50	31'	.9		345	3.5	9.4
	60	32'	1.0		413	4.0	9.8
#1	30	32'	1.3	#1	206	2.0	9.8
	40	33'	1.5		275	3.0	10.1
	50	34'	1.6		345	3.5	10.4
	60	35'	1.8		413	4.0	10.7
#2	30	37'	2.4	#2	206	2.0	11.3
	40	40'	2.5		275	3.0	12.2
	50	42'	3.0		345	3.5	12.8
	60	43'	3.3		413	4.0	13.1
#2.5	30	38'	2.5	#2.5	206	2.04	11.6
	40	39'	2.8		275	2.72	11.9
	50	40'	3.2		345	3.40	12.2
	60	41'	3.5		413	4.08	12.5
#3	30	38'	3.6	#3	206	2.0	11.6
	40	39'	4.2		275	3.0	11.9
	50	41'	4.6		345	3.5	12.5
	60	42'	5.0		413	4.0	12.8
#4	30	43'	4.4	#4	206	2.0	13.1
	40	44'	5.1		275	3.0	13.4
	50	46'	5.6		345	3.5	14.0
	60	49'	5.9		413	4.0	14.9
#6	40	45'	5.9	#6	206	3.0	13.7
	50	46'	6.0		275	3.5	14.0
	60	48'	6.3		345	4.0	14.6
	70	49'	6.7		413	5.0	14.9
#8	40	42'	8.0	#8	206	3.0	12.8
	50	45'	8.5		275	3.5	13.7
	60	49'	9.5		345	4.0	14.8
	70	50'	10.0		413	5.0	15.3

LOW ANGLE DATA

LOW ANGLE DATA				METRIC			
NOZZLES	PRESSURE PSI	RADIUS FT	FLOW GPM	NOZZLES	PRESSURE KPA	RADIUS METERS	FLOW L/MIN
#1	30	22'	1.2	#1	207	2.04	6.71
	40	24'	1.7		275	2.72	7.32
	50	26'	1.8		344	3.40	7.92
	60	28'	2.0		413	4.08	8.53
#3	30	29'	3.0	#3	207	2.04	8.84
	40	32'	3.1		275	2.72	9.75
	50	35'	3.5		344	3.40	10.67
	60	37'	3.8		413	4.08	11.58
#4	30	31'	3.4	#4	207	2.04	9.45
	40	34'	3.9		275	2.72	10.36
	50	37'	4.4		344	3.40	11.28
	60	38'	4.7		413	4.08	11.58
#6	40	38'	6.5	#6	275	2.72	11.58
	50	40'	7.3		344	3.40	12.19
	60	42'	8.0		413	4.08	12.80
	70	44'	8.6		482	4.76	13.41

Data represents test results in zero wind. Adjust for local conditions.
Radius may be reduced with nozzle retention screw.

Main Office

Return To:
ADAM SCOTT KATZ
805 Sunrise Trail
Spring Branch, TX 78070

3
/T
Prepared By:
Roxanne Baes
Market Street Mortgage Corporation
2650 McCormick Dr., Suite # 200
Clearwater, FL 33759

[Space Above This Line For Recording Data]

NOTICE OF CONFIDENTIALITY RIGHTS:

If you are a natural person, you may remove or strike any of the following information from this instrument before it is filed for record in the public records: your social security number or your driver's license number.

WARRANTY DEED WITH VENDOR'S LIEN

THE STATE OF TEXAS

)(

)(KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF Comal

)(

THAT LEONARD DE LA GARZA and CRYSTAL DE LA GARZA, HUSBAND AND WIFE

, hereinafter called "Grantor" (whether one or more), for and in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration to Grantor paid by ADAM SCOTT KATZ and ANGELA AILEEN W KATZ, HUSBAND AND WIFE

, hereinafter called "Grantee" (whether one or more), the receipt of which is hereby acknowledged and confessed, and the further consideration of the execution and delivery by Grantee of one certain Promissory Note in the principal sum of One Hundred Fifty Six Thousand Seven Hundred Fifty and no/100

, of even date

herewith, payable to the order of Market Street Mortgage Corporation
D/B/A Memorial Park Mortgage

hereinafter called "Mortgagee," bearing interest at the rate therein provided; said Note containing the usual reasonable attorney's fee clause and various acceleration of maturity clauses in case of default, and being secured by Vendor's Lien and superior title retained herein in favor of said Mortgagee, and being also secured by a Deed of Trust of even date herewith from Grantee to
Twila L. Grooms

, Trustee; and

KATZ5580204

5580204

0

Warranty Deed With Vendor's Lien

9/97

VMP-970(TX) (0307) MW 07/03

VMP Mortgage Solutions (800)521-7291

Page 1 of 3

Initials:



Handwritten signature/initials

WHEREAS, Mortgagee has, at the special instance and request of Grantee, paid to Grantor a portion of the purchase price of the property hereinafter described, as evidenced by the above-described Note, said Vendor's Lien and Deed of Trust lien against said property securing the payment of said Note are hereby assigned, transferred and delivered to Mortgagee, Grantor hereby conveying to said Mortgagee the said superior title to said property, subrogating said Mortgagee to all the rights and remedies of Grantor in the premises by virtue of said liens; and

Grantor has GRANTED, SOLD and CONVEYED, and by these presents does GRANT, SELL and CONVEY unto said Grantee, the following described property, to-wit:

ALL THAT CERTAIN TRACT OR PARCEL OF LAND LYING AND BEING SITUATED IN COMAL COUNTY, TEXAS, BEING KNOWN AND DESIGNATED AS LOT 147, GUADALUPE RIVER ESTATES, ACCORDING TO THE MAP OR PLAT RECORDED IN VOLUME 5, PAGE 169, COMAL COUNTY, TEXAS MAP AND PLAT RECORDS.

Parcel ID Number:

TO HAVE AND TO HOLD the above-described premises, together with all and singular, the rights and appurtenances thereunto in anywise belonging unto said Grantee, his heirs and assigns, forever. And Grantor does hereby bind himself, his heirs, executors and administrators, to warrant and forever defend all and singular the said premises unto said Grantee, his heirs and assigns, against every person whomsoever lawfully claiming or to claim the same or any part thereof.

Taxes for the current year have been prorated and their payment is assumed by Grantee.

This conveyance is made subject to any and all valid and subsisting restrictions, easements, rights of way, reservations, maintenance charges together with any lien securing said maintenance charges, zoning laws, ordinances of municipal and/or other governmental authorities, conditions and covenants, if any, applicable to and enforceable against the above-described property as shown by the records of the County Clerk of said County.

The use of any pronoun herein to refer to Grantor or Grantee shall be deemed a proper reference even though Grantor and/or Grantee may be an individual (either male or female), a corporation, a partnership or a group of two or more individuals, corporations and/or partnerships, and when 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 such corporation or trustee, be construed to mean "successors and assigns."

It is expressly agreed that the Vendor's Lien is retained in favor of the payee of said Note against the above-described property, premises and improvements, until said Note and all interest thereon shall have been fully paid according to the terms thereof, when this deed shall become absolute.

KATZ5580204

5580204

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VMP-970(TX) (0307)

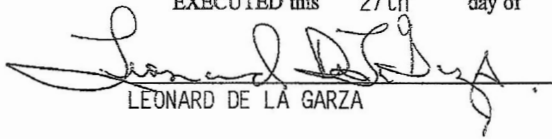
Page 2 of 3

Initials:

[Handwritten signatures and initials]

EXECUTED this 27th day of

August 2004


LEONARD DE LA GARZA


CRYSTAL DE LA GARZA

GRANTEE'S ADDRESS:
805 Sunrise Trail

, Spring Branch, TX 78070

STATE OF TEXAS

County of Brewer

Before me Vicki Novak
LEONARD DE LA GARZA and CRYSTAL DE LA GARZA

on this day personally appeared

known to me (or proved to me on the oath of

or through

) to be the person whose name is subscribed to the foregoing
instrument and acknowledged to me that he/she/they executed the same for the purposes and consideration
therein expressed.

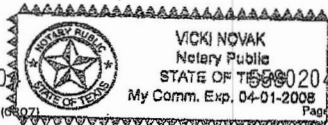
Given under my hand and seal of office this

27th day of

Notary Public

KATZ5580203

VME-970(TX) (0607)



Doc# 200406035173

Pages 3

8/18/2004 08:06:23 AM

Filed & Recorded in

Official Records of

COMAL COUNTY

JOY STREATER

COUNTY CLERK

Fees \$18.00

Doc# 200406035173



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

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Date Received

Initials

119037

Permit Number

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

9/17/25
Date

___ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

INCOMPLETE APPLICATION (Missing Items Circled, Application Refused)	
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