Comal County Environmental Health
OSSF Inspection Sheet

Installer Name: Tom Hampton **OSSF Installer #:** OS0024597

1st Inspection Date: 11/7/25 **2nd Inspection Date:** **3rd Inspection Date:**

Inspector Name: Gallegos **Inspector Name:** **Inspector Name:**

Permit#: 119057 **Address:** 1256 Adyson Ridge Dr

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: 11/7/25 EG:

Comal County Environmental Health
OSSF Inspection Sheet

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If SingleTank, 2Compartments Provided withBaffle SEPTIC TANK Inlet Flowline Greater than3" and " T " Provided on Inlet and OutletSEPTIC TANK Septic Tank(s) MeetMinimum Requirements		285.32(b)(1) (E)285.91(2)285.32(b)(1) (F)285.32(b)(1)(E) (iii)285.32(b)(1)(E)(ii) (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 providedSEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
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			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
OSSF Inspection Sheet

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
19	DISPOSAL SYSTEM Drip Irrigation		285.33(c)(3)(A)-(F)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(4) 285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
24	DISPOSAL SYSTEM Other (describe) (Approved Design)	x	285.33(d)(6) 285.33(c)(4)	Surface Application	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
OSSF Inspection Sheet

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		
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	X			X		

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 X	285.33(d)(2)(G) (i)285.33(d)(2) (A)285.33(d)(2)(F)		X		
42	APPLICATION AREA Area Installed	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:	119057
Issued This Date:	10/31/2025
This permit is hereby given to:	Kristopher & Angela Ball

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

1256 ADYSON RIDGE DR
CITY OF BULVERDE, TX 78163

Subdivision:	Centennial Ridge
Unit:	2
Lot:	80
Block:	1
Acreage:	0.0000

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System:	Aerobic
	Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.

RECEIVED
By Kathy Griffin at 2:03 pm, Sep 30, 2025

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 4/8/2025 Permit Number 119057

1. APPLICANT / AGENT INFORMATION

Owner Name	Kristopher & Angela Ball	Agent Name	Brian Erxleben, R.S. 3637
Mailing Address	42510 Oxford Forest Circle	Agent Address	562 S. Hwy 123 Bypass #128
City, State, Zip	Chantilly, VA 20152	City, State, Zip	Seguin, Texas 78155
Phone #	210-702-8766	Phone #	830-660-9133
Email	jaime@mykccustomhomes.com	Email	bandverx@gmail.com

2. LOCATION

Subdivision Name Centennial Ridge Unit 2 Lot 80 Block 1

Survey Name / Abstract Number _____ Acreage _____

Address 1256 Adyson Ridge Drive City Bulverde State Texas Zip 78163

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 4126

☐ 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: $ 900,000 (Structure Only)

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

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

Source of Water ☐ Public ☒ Private Well ☐ Rainwater

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.

X _____ 9-29-25

Signature of Owner Date

Angela Castañeda Ball

Revised January 2021

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 Brian Erxleben, R.S. 3637

System Description Aerobic Treatment/Surface Application

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

Tank Size(s) (Gallons) 600 gpd Absorption/Application Area (Sq Ft) 5654

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 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: Bulverde

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 4-8-25

Revised March 2024

JC

202506031258 09/29/2025 01:32:48 PM 1/2

THE COUNTY OF COMAL *
STATE OF TEXAS *

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities, 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 TCEQ 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 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:

UNIT *2* **BLOCK** *1* **LOT** *80* **SUBDIVISION** ***Centennial Ridge***

IF NOT IN SUBDIVISION: ACRES SURVEY

The property is owned by *Kristopher & Angela Ball*.

This OSSF shall 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 Environmental Health Department**.

WITNESS MY HAND ON THIS 29 DAY OF September, **2025.**

OWNER/AGENT NAME (SIGNATURE) **OWNER/AGENT NAME** (SIGNATURE)

Kristopher T. Ball — **OWNER/AGENT NAME** (PRINTED)

Angela M. Castaneda-Ball — **OWNER/AGENT NAME** (PRINTED)

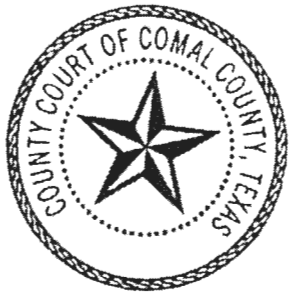
SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 29 DAY OF September, **2025**

Notary Public, State of Texas

Notary's Printed Name: Daniela Fadal

Commission Expires: 6-14-27

DANIELA FADAL
Notary ID #134406542
My Commission Expires
June 14, 2027



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

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

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
09/29/2025 01:32:48 PM
NANCY 2 Page(s)
202506031258

Bobbie Koepp

Created 7/27/15

Maintenance Service Provider
15188 FM 306
Canyon Lake, TX 78133
Office (830)964-2365

AEROBIC SERVICES

SERVICE ADDRESS	*Installer*	*TERM*
1256 Adyson Ridge Dr	ASST	2 year

Routine Maintenance and Inspection Agreement

This Work for Hire Agreement (hereinafter referred to as this "Agreement") is entered into by and between Kristopher & Angela Ball; (referred to as "Client") and Aerobic Services of South Texas (Thomas W. Hampton MP349) (hereinafter referred to as "Contractor") are located at 15188 FM 306 Canyon Lake, Texas 78133 (830) 964-2365. By this Agreement, the Contractor agrees to render professional service, as described herein, and the Client agrees to fulfill the terms of this Agreement as described herein. This contract will provide for all required inspections, testing, and service for your Aerobic Treatment System. The policy will include the following:

1. 3 inspections a year (at least once every 4 months), this includes inspections of the entire aerobic system, adjustment, and servicing of the mechanical, electrical, and other applicable parts to ensure proper function. This includes inspecting the control panel, air pumps, air filters, and diffuser operation. Any alarm situation affecting the proper function of the Aerobic process will be addressed within a 48-hour time frame. Repair work on non-warranty parts will include price for parts & labor. The prices will be quoted before work is performed.

2. An effluent quality inspection consisting of a visual check for color, turbidity, scum overflow, and examination for odors. A test for chlorine residual and pH will be taken and reported as necessary.

3. If any improper operation is observed, that cannot be corrected during the service visit, you will be notified immediately in writing of the conditions and estimated date of correction.

4. If the system is a spray field application the Property Owner will be responsible for the chlorine. The chlorine must be filled before or during the service visit. Aerobic systems with a drip field do not require chlorine.

5. Any additional visits, inspections or sample collection required by specific Municipalities, Water/River Authorities, and County Agencies the TCEQ, or any other authorized regulatory agency in your jurisdiction will be covered by this policy. BOD and TSS testing is covered by this contract.

The Property Owner Manual must be strictly followed or warranties are subject to invalidation. Pumping of sludge build-up is not covered by this policy and will result in additional charges.

ACCESS BY CONTRACTOR

The Contractor or anyone authorized by the Contractor may enter the property at reasonable times without prior notice for the above-described Services. The contractor may access the System components including the tanks through excavation for evaluations if necessary. Soil is to be replaced with the excavated material as best as possible.

Termination of Agreement

Either party may terminate this agreement within ten days with a written notice in the event of substantial failure to perform under its terms by the other party without fault of the terminating party. If this Agreement is so terminated, the Contractor will immediately notify the appropriate health authority of the termination.

Limit of Liability
In no event shall the Contractor be liable for indirect, consequential, incidental, or punitive damages, whether in contract tort or any other theory. In no event shall the Contractor's liability for direct damages exceed the price for the services described in this Agreement.

Dispute Resolution
If a dispute between the Client and the Contractor arises that cannot be settled in good faith negotiations then the parties shall choose a mutually acceptable mediator and shall share the cost of the mediation services equally.

Entire Agreement
This Agreement contains the entire agreement of the parties, and there are no other promises or conditions in any other agreement either oral or written.

Severability
If any provision of this Agreement shall be held to be invalid or unenforceable for any reason, the remaining provisions shall continue to be valid and enforceable. If a court finds that any provision of this agreement is invalid or unenforceable, but that by limiting such provision it would become valid and enforceable, then such provision shall be deemed to be written, construed, and enforced as so limited.

Property Owner
Kristopher & Angela Ball

Name
Kristopher & Angela Ball

Email
krisball281@gmail.com

Service Address
1256 Adyson Ridge

Phone
210-702-8766

K - T - B -

X Angela Marie Ball

SIGNATURE

SERVICE PROVIDER

Aerobic Services of South Texas LLC.

15188 FM 306 Canyon Lake, TX 786133

(830) 964-2365

Signature of Service Provider and License #
[Thomas Hampton, OS0024597 / MP0000349]

AEROBIC SERVICES

EFFECTIVE DATE _____

EXPIRED DATE _____

****The effective date of this initial maintenance contract shall be the date the license to operate is issued.***

OSSF SOIL EVALUATION REPORT INFORMATION
COMAL COUNTY

DATE: 4-8-25

Applicant Information:
Name: Kristopher & Angela Ball
Address: 42510 Oxford Forest Circle
City: Chantilly State: VA Zip: 20152
Ph: (210) 702-8766 Email: mike@mikecoker.net

Site Evaluator Information:
Name: Brian Erxleben
Address: 562 S. Hwy 123 Bypass #128
City: Seguin State: Texas Zip: 78155
Ph: (830) 660-9133 E-mail: bandverx@gmail.com

Property Location:
Lot: 80 Block: 1
Subdivision: Centennial Ridge, Unit 2
Street/Road Address: 1256 Adyson Ridge Drive
City: Bulverde State: TX Zip: 78163
Additional:

Installer Information:
Name: Tom Hampton, OS0024597
Company: Aerobics of South Texas
Address: 174 Lost Creek
City: Wimberley State: TX Zip: 78676
Ph: (210) 710-7282 Fax:

SCHEMATIC of LOT of TRACT

Show:

North arrow, adjacent streets, property lines, dimensions, location of buildings, easements,swimming pools, water lines, and other structures where known.
Location of existing or proposed water wells within 150 feet of property.
Indicate slope or provide contour lines from the structure to the farthest location for the proposed soil absorption or irrigation area.
Location of soil boring or dug pits (show with respect to a known reference point).
Location of drainage ways, water impoundment areas, cut or fills bank, sharp slopes and breaks.

Lot Size: 5.90 acres

SITE DRAWING

SEE SITE PLAN

FEATURES OF SITE AREA

Presence of 100 year flood zone	YES__ NO X	Presence of upper water shed	YES__NO X
Existing or proposed water well in nearby area	YES X NO__	Organized sewage service available to lot	YES__NO X
Presence of adjacent ponds, streams, water impoundments	YES__ NO X		

Site Evaluator:
NAME: BRIAN ERXLEBEN Signature: _____ License No: 11458

COMAL COUNTY ENVIRONMENTAL HEALTH DEPARTMENT
OSSF SOIL EVALUATION FORM

Owners Name: Kristopher & Angela Ball
Physical Address: 1256 Adyson Ridge Drive Bulverde, Texas 78163
Name of Site Evaluator: Brian Erxleben, S.E. #11458
Date Performed: 4-7-25 Proposed Excavation Depth: NA

Requirements:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil evaluation must be shown on the application site drawing or designer's site drawing

For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.

Please describe each soil horizon and identify any restrictive features in the space provided below. Draw lines at the appropriate depths.

SOIL BORING NUMBER 1 & 2

Depth (Feet)	Texture Class	Soil Texture	Structure (For Class III- blocky, platy or massive	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	**Type 4**	**Clay**	**N/A**	**None**	**None**	**Aerobic Spray**
1	**Rock**				**Yes**	
2						
3						
4						
5						

SOIL BORING NUMBER ____

Depth (Feet)	Texture Class	Soil Texture	Structure (For Class III- blocky, platy or massive	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0						
1						
2						
3						
4						
5						

FEATURES OF SITE AREA

Presence of 100 year flood zone	YES___NO_X___
Presence of adjacent ponds, streams, water impoundments	YES___NO_X_
Existing or proposed water well in nearby area	YES_X_ NO___
Organized sewage available to lot or tract	YES___NO_X___
Recharge features within 150 feet	YES___NO_X_

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

Signature of Site Evaluator

Date 4-8-25

Brian Erxleben, R.S., S.E.
562 S. Hwy 123 Bypass #128
Seguin, Texas 78155
Mobile (830) 660-9133 bandverx@gmail.com

OSSF DESIGN

Owner: **Kristopher & Angela Ball**
Location: **1256 Adyson Ridge Drive Bulverde, Texas 78163**
Phone: **(210) 702-8766**
Date: **4-8-25**

Development: **Residence with water saving devices** Bedrooms: **4** Sq. Ft: **4126**

Q: **360 gpd** Soil: **Type 4** R_i: **0.064 gall/ft^2/day**

System Type: **Aerobic/Surface Application (NuWater B-550, 600 gpd)**

Minimum Required ATU Treatment Capacity: **600 gpd**

Trash Tank: 353 gall Aerobic Tank: 600 gpd Pump Tank: 768 gall

Supply Line: **Sch 40, 1" purple (~200')** Check Valve Required: **No**

Minimum Application Area (A): 5625 ft^2 ($A = Q/R_i$)

Sprinklers: **K-Rain Proplus Low Angle**

Number	Nozzle	PSI	Pattern	Radius	Area/head	GPM/head	R_i
S1	**#4**	**30**	**360°**	**30 ft**	**2827 ft^2**	**3.4**	**0.064**
S2	**#4**	**30**	**360°**	**30 ft**	**2827 ft^2**	**3.4**	**0.064**

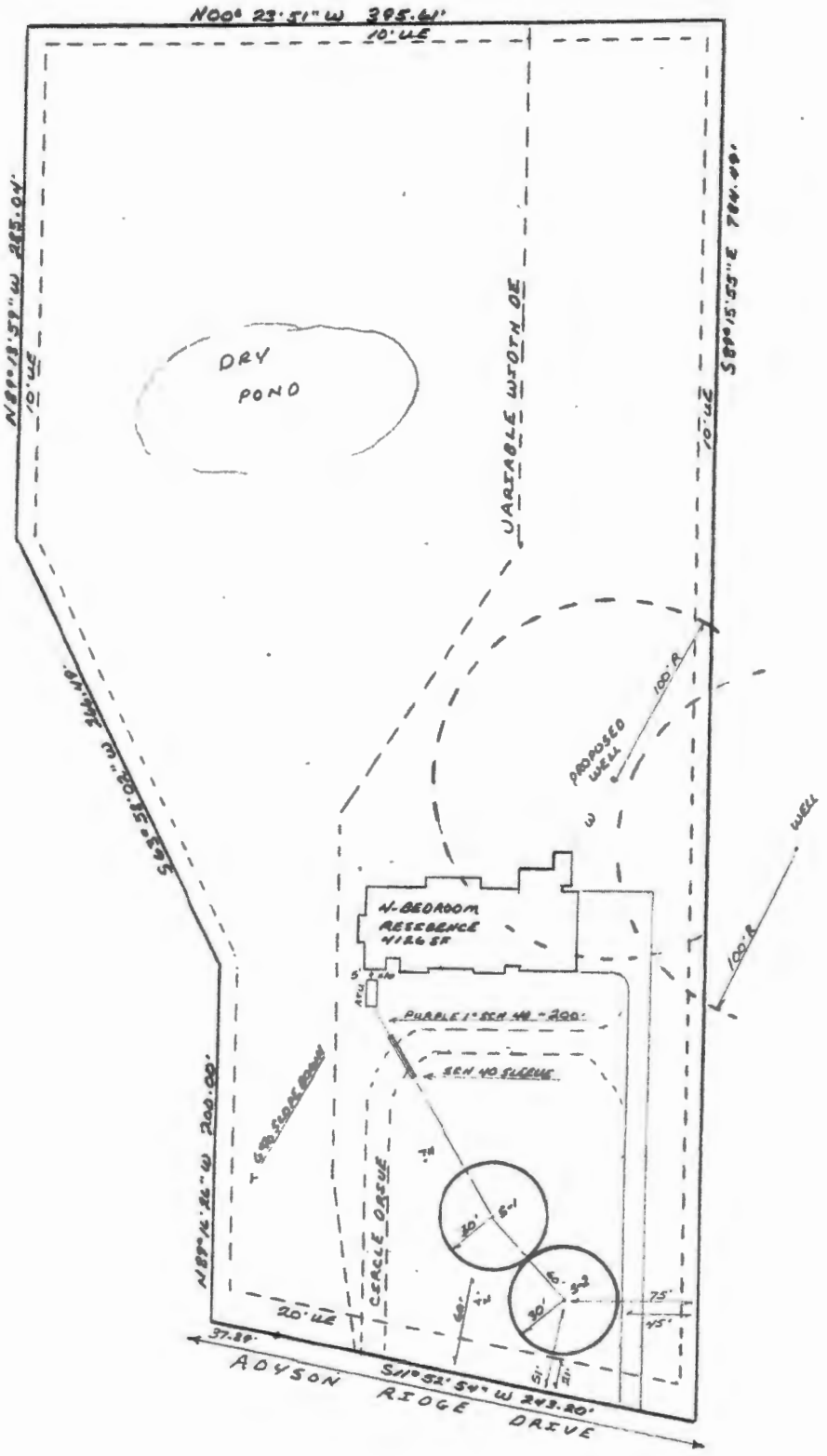
Overlap Area: 0 ft^2 Actual Application Area: **5654 ft^2** GPM: **6.8 GPM**

TDH Calculations:

Friction Head(H_f) = $\frac{1.2(10.4397)(L)(Q)^{1.85}}{(C)^{1.85}(D)^{4.8655}}$ = 15 ft

L = Length of equivalent pipe length (D) in feet
C = Hazen – Williams flow coefficient (150 for schedule 40)
Q = Flow rate, gpm
D = Internal pipe diameter, inches
Pressure Head (H_p) = 70 ft (2.31)(psi) Elevation Head (H_e) = 5 ft
TDH = **90 ft** ($H_f + H_p + H_e$)
Pump Requirements: **6.8 GPM @ 90 ft TDH** Pump Used: **StaRite 20 gpm, 0.50 HP**

- **Timer set to spray between 12:00 AM & 5:00 AM**
- **Liquid chlorinator**



4-8-25

STATE OF TEXAS
BRIAN C. ERXLEBEN
3637
REGISTERED
PROFESSIONAL SANITARIAN

LOT 80, BLOCK 1
CENTENNIAL RIDGE, UNIT 2
5.90 ACRES

PROPERTY IS LOCATED OUTSIDE OF THE 100-YEAR FLOODPLAIN AND WITHIN THE CONTRIBUTING ZONE. DESIGN COMPLIES WITH ALL OF THE PROVISIONS OF THE CURRENT CZP FOR THE SUBDIVISION.

NOTES:

1. Install a 2-way cleanout in a 3" or 4" sch 40 tightline from the house to the ATU, minimum slope 1/8 in/ft.
2. ATU is a NuWater B-550.
3. Supply line to the sprinklers is purple 1" sch 40. ***Line to be sleeved in sch 40 under and to 5' either side of a driveway in order to provide the equivalent protection of a 5' separation.***
4. S1 & S2 are K-Rain Proplus low angle sprinklers with #4 nozzles operating @ 30 psi, 360° pattern, 30' radius.
5. There shall be no obstruction within 10' of the sprinkler heads.
6. Audible & visual alarms, external disconnect within site of the pump tank, pump & alarms on separate breakers and external wiring in conduit are required.
7. Timer set to spray between 12:00 AM & 5:00 AM.
8. Liquid chlorinator.
9. Any excavations and/or exposed rock in the disposal area shall be covered with topsoil and seasonal grasses shall be seeded over the disposal area in order to minimize run-off & erosion.

SITE PLAN & OSSF DESIGN:

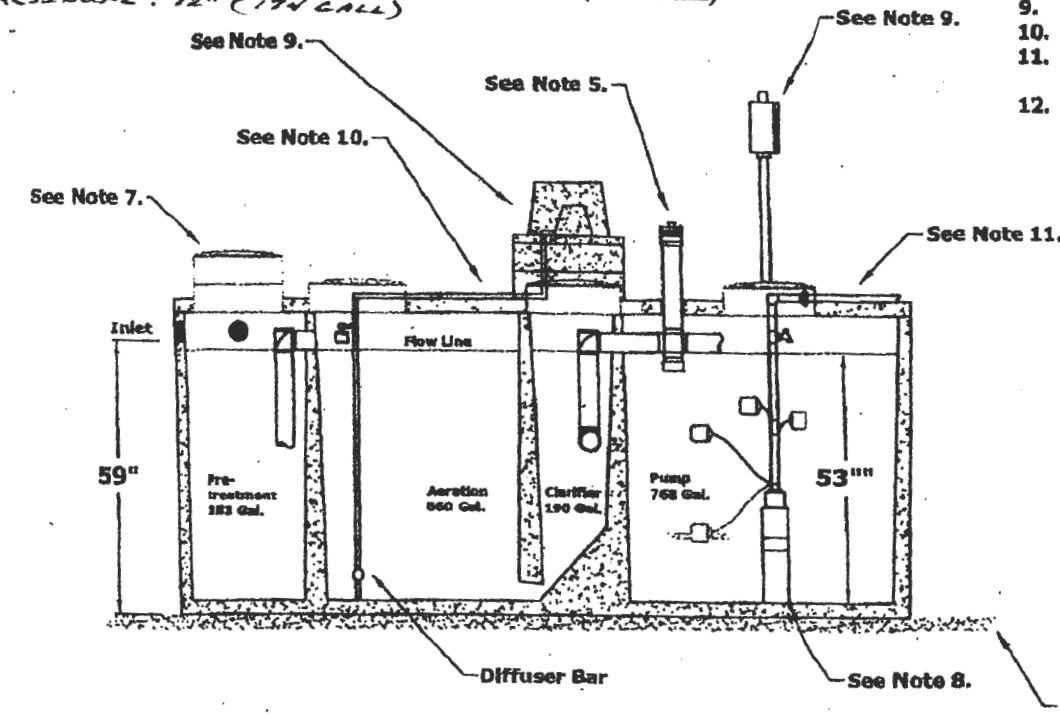
KRISTOPHER & ANGELA BALL 1256 ADYSON RIDGE DRIVE BULVERDE, TEXAS 78163	
BRIAN C. ERXLEBEN, R.S. 562 S. HWY 123 BYPASS #128 SEGUIN, TEXAS 78155 (830) 660-9133	DATE: 4-7-25 SCALE: 1" = 100'

Assembly Details

OSSF

4-8-25
STATE OF TEXAS
BRIAN C. ERXLEBEN
3637
REGISTERED
PROFESSIONAL SANITARIAN

Q'S UP TO 360 GPD
14.49 GALL/IN
HIGH WATER ALARM "ON" TO BOTTOM OF INLET: 9" (130 GALL)
PUMP "ON" TO HIGH WATER ALARM "ON": 25" (362 GALL)
RESIDUAL : 12" (174 GALL)



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 beedroom, < 4,000 sq/ft living aera). 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 acess riser w/ lid (Typical 4). Optional extension risers available.
8. 20 GPM 1/2 HP, high head effluent pump.
9. HIBLOW Air Compressor w/ concrete housing.
10. 1/2" Sch. 40 PVC Air Line (Max. 50 Lft from Plant).
11. 1" Sch. 40 PVC pipe to distribution system provided by contractor.
12. 4" min. compacted sand or gravel pad by Contractor

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

MINIMUM EXCAVATION DIMENSIONS:
Width: 76"
Length: 176"

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

Model: B-550-PC-400PT

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

Scales
* All Dimensions subject to allowable specification tolerances.

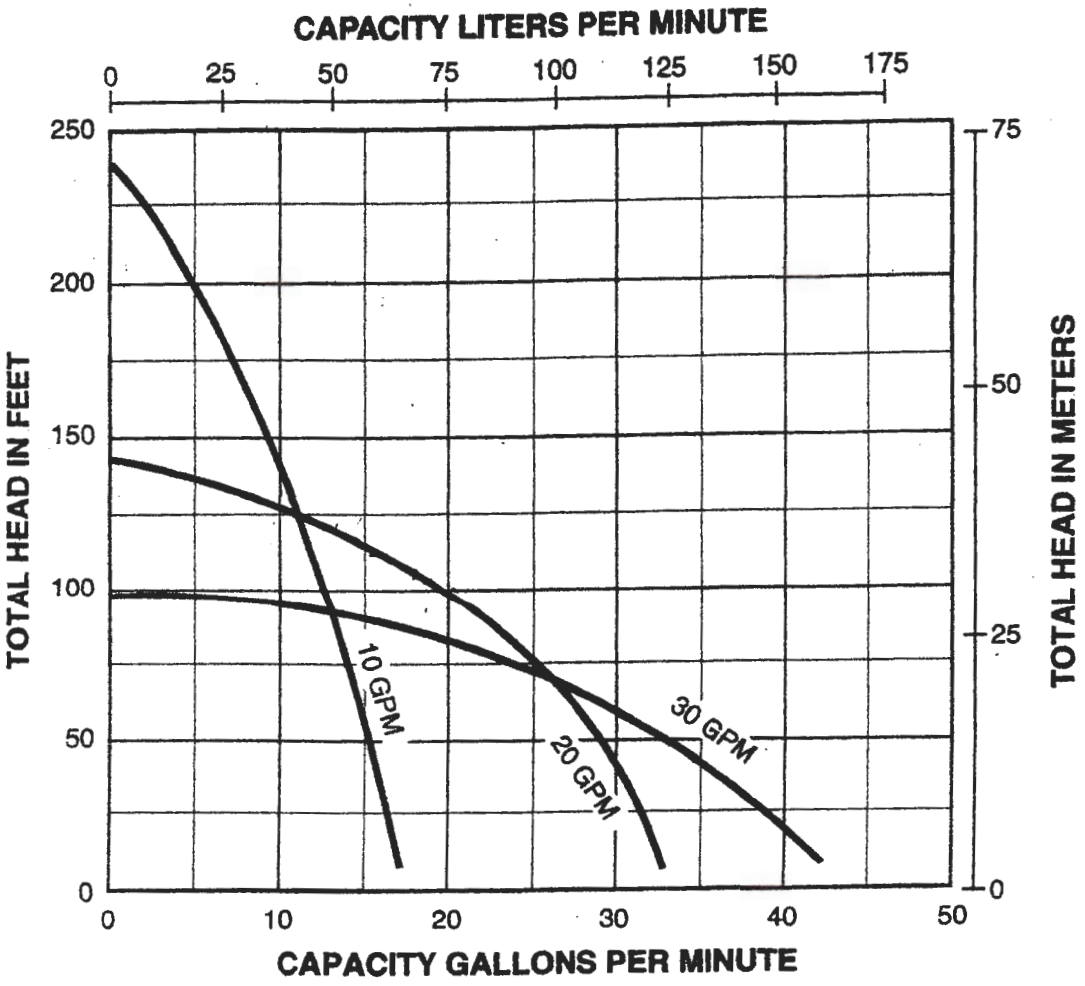
Dwg. #: ADV-B550-3

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

STA-RITE

4" multi-stage submersible pump

PUMP PERFORMANCE



PUMP PERFORMANCE

Pump Model	PSI											
	0	10	20	30	40	50	60	70	80	90	100	110
10DOM05121			15.0	13.7	12.7	11.5	10.2	8.4	6.5	4.3	1.0	
20DOM05121			30.0	26.0	21.5	14.2	4.4					
30DOM05121		38.5	33.3	25.8	16							

PUMP PERFORMANCE

Pump Model	Bar											
	0	.69	1.38	2.07	2.76	3.45	4.13	4.82	5.51	6.20	6.89	7.58
10DOM05121			56.8	51.9	48.1	43.5	38.6	31.8	24.6	16.3	3.8	
20DOM05121			113.6	98.4	81.4	53.7	16.7					
30DOM05121		145.7	126.0	97.7	60.6							

SPRINKLER INSTALLATION

7 INSTALL AND BURY

Thread the sprinkler onto the pipe. Bury the sprinkler flush to grade.

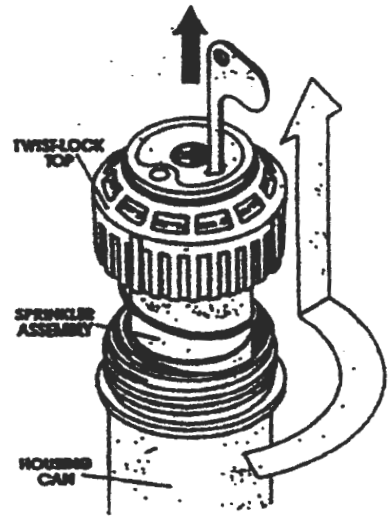
POINTING THE LEFT START

8 TURN THE CAN

You can orient the LEFT START position (the point where the sprinkler will begin spraying) by simply turning the entire sprinkler housing can on the pipe. Visually point the nozzle retention screw where you want it to begin spraying.

OR TURN THE LOWER PORTION OF THE RISER

Pull the riser up with your KEY. Grab the LOWER portion of the riser, and rotate it to orient the nozzle to the desired LEFT starting position. **IMPORTANT: DO NOT GRAB THE TOP PORTION OF THE RISER.**



9 INSPECTING THE FILTER

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

STANDARD NOZZLE PERFORMANCE CHART

Nozzle	PSI	Radius	GPM
#1	30	33'	1.0
	40	35	1.3
	50	38	1.4
	60	38'	1.5
#2	30	38'	2.1
	40	39'	2.5
	50	40'	3.0
	60	41'	3.1
#3	30	41'	2.8
	40	42'	3.3
	50	45'	3.6
	60	46'	4.2
#4	30	43'	3.9
	40	45'	4.5
	50	47'	5.4
	60	52'	5.8
#6	40	49'	6.2
	50	51'	7.0
	60	54'	7.9
	70	55'	8.1
#8	40	47'	8.0
	50	51'	8.9
	60	53'	9.6
	70	55'	10.6

LOW ANGLE NOZZLE PERFORMANCE CHART

Nozzle	PSI	Radius	GPM
#1	30	22'	1.5
	40	24'	1.7
	50	26'	1.8
	60	28'	2.0
#3	30	29'	3.0
	40	32'	3.1
	50	35'	3.5
	60	37'	3.8
#4	30	31'	3.4
	40	34'	3.9
	50	37'	4.4
	60	38'	4.7
#6	40	38'	6.5
	50	40'	7.3
	60	42'	8.0
	70	44'	8.6

DATA REPRESENTS TEST RESULTS IN ZERO WIND. ADJUST FOR LOCAL CONDITIONS. RADIUS MAY BE REDUCED WITH NOZZLE RETENTION SCREW.

PERMIT

PERMIT #: 2025-107

PROJECT ADDRESS: 1256 Adyson Ridge Drive NSFR

DESIGNATION: Residential

OWNER NAME: Kristopher & Angela Ball

PERMIT TYPE: New Single Family (Residential)

ISSUED TO (CONTRACTOR): KC Custom Homes - Ryan Castro
1206 Wild Rose Drive (830) 556-6767
billing@mykccustomhomes.com

Issued Date: June 09, 2025

Expiration Date: December 06, 2025

STIPULATIONS IF ANY:

THIS PERMIT MUST BE POSTED IN A CONSPICUOUS PLACE ON CONSTRUCTION SITE

PERMIT

INSPECTION INFORMATION

- TO SCHEDULE INSPECTIONS PLEASE REQUEST ONLINE VIA https://mgoconnect.org/cp/portal. Please schedule by 2pm for next day inspections.

- REQUIRED INSPECTIONS:

Required inspections are subject to change at the discrection of the Jurisdiction.

  - Electric Trench
  - Gas Rough In
  - Shear Wall/Exterior Sheathing
  - TML (Electrical - Temporary Meter Loop)
  - Water Service
  - Plumbing Rough
  - Foundation Pre Pour
  - Electrical Rough
  - Framing
  - Mechanical Rough
  - Plumbing Top Out
  - Insulation
  - Shower Pan
  - TOPS (Electrical - Temporary on Permanent Set
  - Gas Final
  - Building Final
  - Electrical Final
  - Mechanical Final
  - Plumbing Final

PERMIT

- For all other questions regarding building & permitting please contact:
    - Claudia Cardenas, ccardenas@bulverdetx.gov
    - Bailey Dorn, bdorn@bulverdetx.gov
    - Heath Edwards, hedwards@bulverdetx.gov

Independence Title/GF# 243732 -CLF/BP

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 WITH VENDOR'S LIEN

Date: November 18, 2024

Grantor: Rudolfo Zamora a/k/a Rudolfo Robert Zamora, Jr., a single person

Grantor's Mailing Address:

3046 Colorado Cove
San Antonio, Texas 78253

Grantee: Angela M. Castaneda Ball and Kristopher T. Ball, Wife and Husband, owning, occupying and claiming other property as homestead

Grantee's Mailing Address:

42510 Oxford Forest Circle
Chantilly, Virginia 20152

Consideration: TEN AND NO/100 DOLLARS and other good and valuable consideration and the further consideration of a note of even date that is in the principal amount of TWO HUNDRED NINETY-FIVE AND NO/100 ($295,000.00) DOLLARS and is executed by Grantee, payable to the order of RANDOLPH-BROOKS FEDERAL CREDIT UNION. The note is secured by a vendor's lien retained in favor of RANDOLPH-BROOKS FEDERAL CREDIT UNION in this deed and by a deed of trust of even date, from Grantee to Morton W. Baird II, Trustee.

Property (including any improvements):

Lot 80, Block 1, CENTENNIAL RIDGE, UNIT 2, situated in the City of Bulverde, Comal County, Texas, according to the map or plat thereof, recorded in Document No. 202006002309, Map and Plat Records, Comal County, Texas.

Reservations From and Exceptions to Conveyance and Warranty:

This conveyance is made and accepted subject to any and all restrictions, covenants, reservations, and easements, if any, relating to the hereinabove described property, but only to the extent they are still in effect, shown of record in the hereinabove mentioned County and State.

Current ad valorem taxes on said property having been prorated, the payment thereof is assumed by Grantee.

Grantor, for the consideration, receipt of which is acknowledged, and subject to the reservations from and exceptions to conveyance and warranty, grants, sells and conveys to Grantee the property, together with all and singular the rights and appurtenances thereto in any wise belonging, to have and hold it to Grantee, Grantee's heirs, executor, administrators, successors or assigns forever. Grantor binds Grantor and Grantor's heirs, executors, administrators and successors are hereby bound to warrant and forever defend all and singular the property to Grantee and Grantee's heirs, executors, administrators, successors and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, except as to the reservations from and exceptions to conveyance and warranty.

RANDOLPH-BROOKS FEDERAL CREDIT UNION at Grantee's request, having paid in cash to Grantor that portion of the purchase price of the property that is evidenced by the Note described, the Vendor's Lien and Superior Title to the Property are retained for the benefit of RANDOLPH-BROOKS FEDERAL CREDIT UNION and are transferred and assigned to RANDOLPH-BROOKS FEDERAL CREDIT UNION and its successors and assigns, without recourse on Grantor.

The Vendor's Lien against and Superior Title to the Property are retained until each Note described is fully paid according to its terms, at which time this Deed shall become absolute.

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

Rudolfo Zamora a/k/a Rudolfo Robert Zamora, Jr.

ACKNOWLEDGMENT

STATE OF TEXAS

COUNTY OF COMAL

This instrument was acknowledged before me on this 18 day of November 2024 by Rudolfo Zamora a/k/a Rudolfo Robert Zamora, Jr.

BRITTANY PHILLIPS
My Notary ID # 126000272
Expires May 6, 2027

Notary Public, State of Texas

PREPARED IN THE OFFICES OF:
Stevens & Malone, PLLC
P.O. Box 1744
Canyon Lake, Texas 78133

830.964.4426 – tel.
830.964.4426 – fax

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
11/21/2024 01:00:49 PM
TERRI 3 Pages(s)
202406035733

Bobbie Koepp

RECEIVED
By Kathy Griffin at 2:02 pm, Sep 30, 2025

COMAL COUNTY
ENGINEER'S OFFICE

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

Date Received	Initials	Permit Number
		119057

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.

K T B

Signature of Applicant

9-29-25
Date

___ COMPLETE APPLICATION

Check No. _____ Receipt No. _____

___ INCOMPLETE APPLICATION
(Missing Items Circled, Application Refeused)

Revised: September 2019

COMAL COUNTY

ENGINEER'S OFFICE

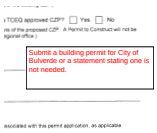
Address: 1256 Adyson Ridge Dr

Legal Description: Centennial Ridge Unit 2 Lot 80 Block 1

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:

119057.pdf Markup Summary

Efrain Gallegos (1)



Subject: Text Box
Page Label: 2
Author: Efrain Gallegos
Date: 10/21/2025 9:39:56 AM
Status:
Color:
Layer:
Space:

Submit a building permit for City of
Bulverde or a statement stating one is not needed.