

Comal County Environmental Health

OSSF Inspection Sheet

Installer Name: _____

OSSF Installer #: _____

1st Inspection Date: _____

2nd Inspection Date: _____

3rd Inspection Date: _____

Inspector Name: _____

Inspector Name: _____

Inspector Name: _____

Permit#:

Address:

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

Inspector Notes:

**Comal County Environmental Health
OSSF Inspection Sheet**

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

**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)		285.33(d)(6) 285.33(c)(4)				
25	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC						
26	DRAINFIELD Area Installed						
27	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
28	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
29	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
30	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.)		285.33(c)(2)				
31	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)				

**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.		285.32(c)(1)				
34	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions						
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
37	PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions						
38	PUMP TANK Secondary restraint system provided						
39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

**Comal County Environmental Health
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?		285.33(d)(2)(G)(iii)(II) 285.33(d)(2)(G)(iii)(III) 285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(I)				
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed		285.33(d)(2)(G) (i)285.33(d)(2) (A)285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



COMAL COUNTY

ENGINEER'S OFFICE

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

Permit Number: 119075
Issued This Date: 11/04/2025
This permit is hereby given to: Crystal Hernandez

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

153 THOMAS
CANYON LAKE, TX 78133

Subdivision: Tom Creek Hills
Unit: 1
Lot: 12 & 13
Block: 0
Acreage: 4.1300

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

Revised

Efrain Gallegos

10/31/2025 2:30:58 PM

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

Date 9-29-25

Permit Number 119075

1. APPLICANT / AGENT INFORMATION Charles Hernandez

Owner Name Crystal Hernandez

Agent Name Gene Mundahl / Aaron Jaquez-Arroyo

Mailing Address 1035 Sir Winston Dr

Agent Address P.O. Box 175716

City, State, Zip Canyon Lake, TX, 78133

City, State, Zip Austin, TX 78760

Phone # 210-214-9470

Phone # 512-326-1511

Email Crystal-Leatherwood@yahoo.com

Email improvements@airproaustin.com

2. LOCATION

Subdivision Name Tom Creek Hills 1 Unit 1 Lot 12413 Block

Survey Name / Abstract Number Acreage 4.13

Address 153 Thomas City Canyon Lake State TX Zip 78133

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

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

Number of Bedrooms 4

Indicate Sq Ft of Living Area 2040

☐ 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: \$ 110,000 (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.

Signature of Owner [Signature]

Date 9-29-25



ON-SITE SEWAGE FACILITY APPLICATION

Planning Materials & Site Evaluation as Required Completed By Johnathan Jaster

System Description Aerobic Treatment with Surface Application

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

Tank Size(s) (Gallons) 500 GPD Absorption/Application Area (Sq Ft) 4687.5

Gallons Per Day (As Per TCEQ Table III) 300 GPD

(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

10/01/2025

Date

Revised

Efrain Gallegos

11/04/2025 9:36:10 AM

119075-
Permit #



202506034920 10/30/2025 03 10 18 PM 1/1

AFFIDAVIT REGARDING CROSSING PROPERTY LINES

THE COUNTY OF Bexar
STATE OF TEXAS

The reason the manufactured home crosses the property line is due to the number of trees we would need to remove to keep all of the home on lot 13. We own both lots 13 and 12.

WITNESS BY HAND(S) ON THE 30 DAY OF October, 2025

[Signature] Crystal Hernandez
[Signature] Charlie Hernandez

Owner(s) signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS

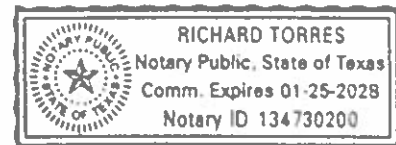
30 DAY OF October, 2025

Richard Torres

Notary Signature

Notary's Printed Name: Richard Torres

My Commission Expires: 01-25-2028



Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
10/30/2025 03:10:18 PM
NANCY 1 Page(s)
202506034920



Bobbie Koepp

Revised

Efrain Gallegos

10/31/2025 2:31:02 PM

AFFIDAVIT OF A SINGLE FAMILY RESIDENCE

THE COUNTY OF Bexar
STATE OF TEXAS

Before me, the undersigned authority, on this day personally appeared Crystal Hernandez
Charlie Hernandez, who after being duly sworn, upon
oath states that he/ she is the owner of record of those certain tracts or parcels of land lying and being
situated in Comal County, Texas, and being more particularly described as follows:

Lots 12 and 13, Tom CREEK HILLS, UNIT 1

The undersigned further states the following described structures EXISTING HOME (ADDRESSED
635 SIR WINSTON DR) AND MANUFACTURED HOME (ADDRESSED 153
THOMAS)

on the said residential property are for one family and are routinely used only by members of the household
of that one family.

WITNESS BY HAND(S) ON THE 30 DAY OF October, 2025

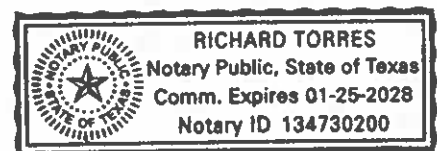
[Signature]

Owner(s) signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS
30 DAY OF October, 2025

Richard Torres
Notary Signature

Notary's Printed Name: Richard Torres
My Commission Expires: 01-25-2028



YC



202506031658 10/01/2025 01:11:23 PM 1/1

AFFIDAVIT TO THE PUBLIC

THE COUNTY OF COMAL
STATE OF TEXAS

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

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

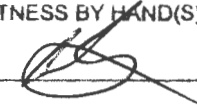
II
An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91(12) will be installed on the property described as (insert legal description):
Tom Creek Hills 2, Lot 13 + 12

The property is owned by (insert owner's full name): CHARLES LEWIS HERNANDEZ
CRYSTAL MICHELLE HERNANDEZ

This OSSF must be covered by a continuous maintenance contract for the first two years. After the initial two-year service policy, the owner of an aerobic treatment system for a single family residence shall either obtain a maintenance contract within 30 days or maintain the system personally.

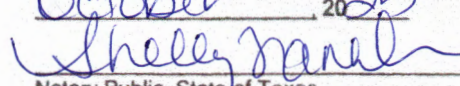
Upon sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the Comal County Engineer's Office.

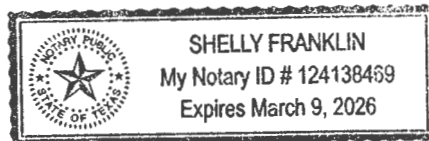
WITNESS BY HAND(S) ON THIS 1 DAY OF October, 2025



Owner(s) signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 1 DAY OF October, 2025


Notary Public, State of Texas



Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
10/01/2025 01:11:23 PM
TAMMY 1 Page(s)
202506031658





Revised

Efrain Gallegos

11/04/2025 9:30:03 AM

MAINTENANCE CONTRACT

Chapter 25 rules regulating On-Site Sewage facilities in Texas, this maintenance service company agrees to the following:

2. This contract authorizes Lorenzo Mendez to operate and maintain the System License to Operate located in Comal County, Permit # _____ for a period of 2 year(s) beginning 11/04/2025 and ending _____. This contract shall automatically renew annually thereafter on the same terms unless otherwise stated in writing 30 days prior to expiration. The Certified Service Technician L.M. is responsible for all required performances checks, testing and maintenance of your aerobic system as follows:
3. Three (3) routine site visits per year (at least once every 4 months), including evaluation, adjustment and servicing of the mechanical, electrical, and other applicable component parts to ensure that all equipment is functioning properly.
4. Visual check for color, turbidity, scum, and odors. An effluent sample will be tested for Total Chlorine residual and reported as required once every four (4) months.
5. If any improper or abnormal operation is observed which cannot be corrected at the time of the service visit, the property owner will receive a written notice of the existing conditions, corrective actions needed.
6. The Maintenance Company will respond to any/all system complaints within 24-48 hours.
7. Complete a performance report after each visit which includes all maintenance findings and test results, then submit copies within 14 days to the permitting authority and the property owner(s), and the original will be kept in the Service Company's file.
8. This maintenance contract does not cover damage to any portion of the system caused by misuse, abuse, or failure to maintain electrical power to the system. Also excessive flows that exceed the organic loading or hydraulic design capabilities of the system as well as occurrences such as natural disasters or severe weather conditions, sludge pumping, or disposal of non-biodegradable materials, oils, greases, chemicals, solvents, paints, etc., or any usage contrary to the requirements as listed in the system owner's manual.

Owner(s) Responsibilities

9. Maintain spray irrigation areas by cutting grass, deep debris clear of OSSF for easy access to system, and shall adhere to OSSF rules section 285.39 OSSF Maintenance and Management Practices. Property Owner
10. Maintain chlorinator by refilling with approved EPA wastewater chlorine tablets needed, and do not allow any backwash from water softeners or reverse osmosis filters to enter the OSSF system. Property Owner

Terms & Conditions

11. The Maintenance Company or anyone authorized by the service company may enter the property at reasonable hours without prior notice for the purpose of performing maintenance work on this aerobic system.
12. This agreement may be terminated by either party with the following stipulations. If the property owner terminates the agreement prior to expiration, then he/she agrees to pay the Maintenance Company a fee equal to one-half the cost of the service agreement. Upon expiration of this policy, the owner is required by law to continuously maintain a signed written contract with a valid maintenance company and shall provide the permitting authority with a copy of at least 30 days prior to the expiration of the previous contract. If the property owner or maintenance company desire to discontinue the maintenance contract, the maintenance company shall notify, in writing, the permitting authority at least 30 days prior to the date service will cease. If a maintenance company continues business, the owner shall within 30 days of the termination date, contract with another approved maintenance company and provide the permitting authority with a copy of the newly signed maintenance agreement.

- () 1 year maintenance contract
(☒) 2 year maintenance contract
() 3 year maintenance contract

Lorenzo Mendez
116 Cancun Ct.
Del Valle, TX 78617
Office 512-738-6023
Cell (512) 844-4799
Email Nancy-mendez21@hotmail.com
Installer # OS0019038
MP # 0001115

Location

153 Thomas

Canyon Lake, Tx

78133

CHARLES HERNANDEZ

Name (s) Print

Property Owner (s)

Signature (s)

Property Owner (s)

Lorenzo Mendez

Name (s) Print

Maintenance Company

Signature (s)

Owner/ Certified Technician

OSSF Soil & Site Evaluation

Date Performed: 09/22/2025

Property Owner: Hernandez, Charles Lewis & Crystal Michelle

Site Location: 153 Thomas, Canyon Lake, TX, 78133

Proposed Excavation Depth: 1 ft

REQUIREMENTS:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil borings or dug pits must be shown on the site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed disposal field excavation depth. For surface disposal, the surface horizon must be evaluated. Describe each soil horizon and identify any restrictive features on this form. Indicate depths where features appear.

Soil Boring Number: <u>1</u>					
Depth (Feet)	Texture Class	Gravel Analysis (If Applicable)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
1 FT.					
2 FT.					
3 FT.					
4 FT.	↓	↓	↓	↓	↓
5 FT.	III	< 30 %	none	clay	clay loam

Soil Boring Number: <u>2</u>					
Depth (Feet)	Texture Class	Gravel Analysis (If Applicable)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
1 FT.					
2 FT.					
3 FT.					
4 FT.	↓	↓	↓	↓	↓
5 FT.	III	< 30 %	none	clay	clay loam

FEATURES OF SITE AREA

Presence of 100 year flood zone

Presence of upper water shed

Presence of adjacent ponds, streams, water impoundments

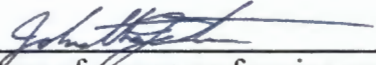
Existing or proposed water well in nearby area (within 150 feet)

Ground Slope

☒ Yes ☐ No
☐ Yes ☒ No
☐ Yes ☒ No
☒ Yes ☐ No

3 %

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


 (Signature of person performing evaluation)

10/03/2025
 (Date)

Site Evaluator OS0036952
 Registration Number and Type

ON-SITE SEWAGE FACILITY DESIGN

Aerobic Treatment with Surface Application

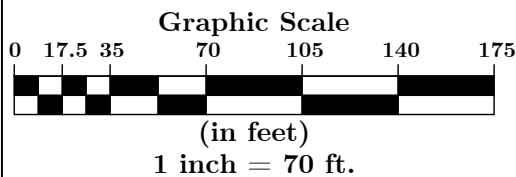


For

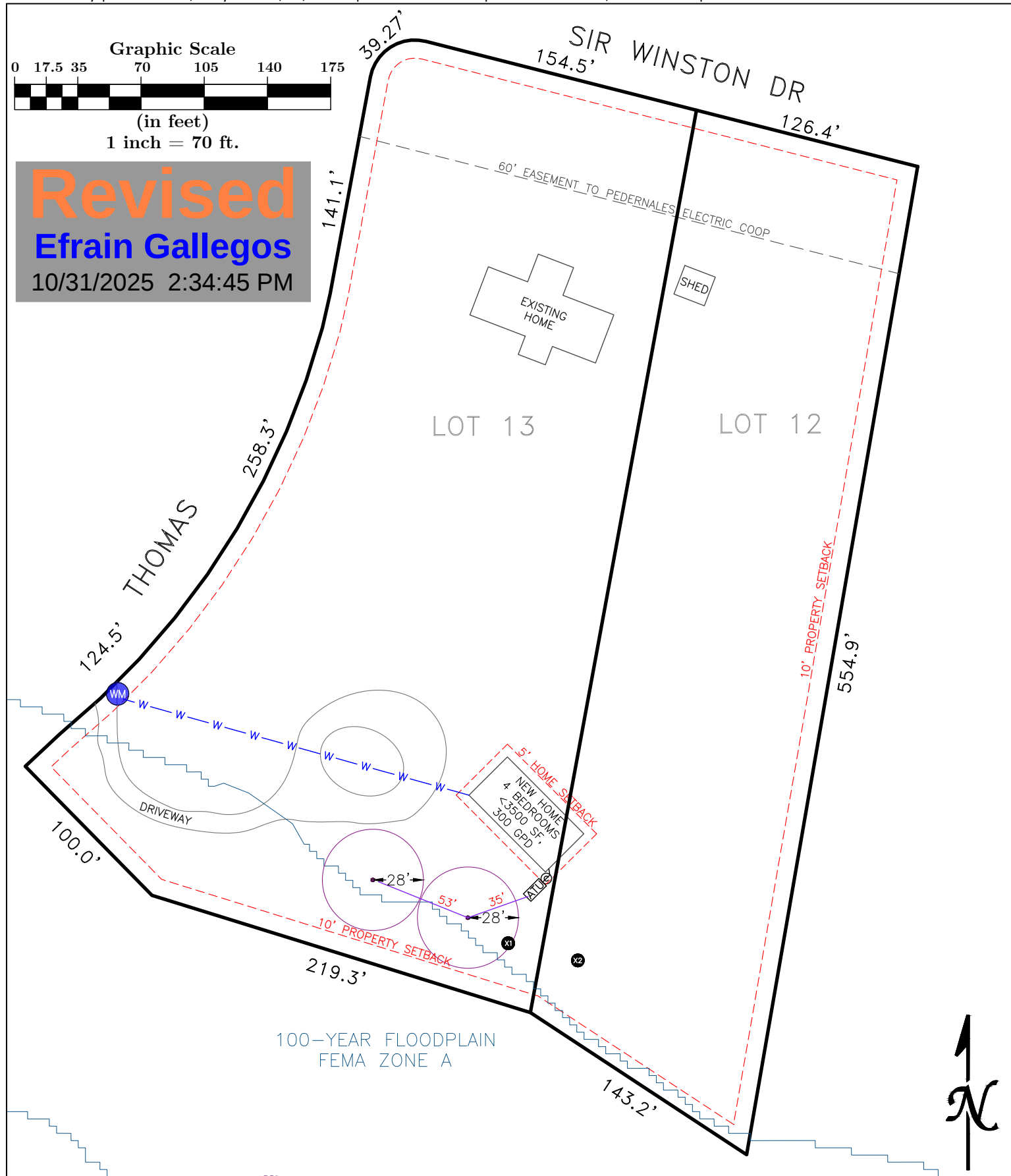
Hernandez, Charles Lewis & Crystal Michelle
153 Thomas, Canyon Lake, TX, 78133
Tom Creek Hills 1, Lots 13 & 12
2.40 & 1.73 Acres
Comal County
PID 66379

Designer

Johnathan Jaster
Registered Sanitarian Lic. No. 5124
275 Hoffman Rd, Bastrop, TX, 78602
(512) 878-9219
johnathan.jaster@gmail.com



Revised
Efrain Gallegos
10/31/2025 2:34:45 PM



DESIGNED BY

Johnathan Jaster

Registered Sanitarian # 5124

(512) 878-9219

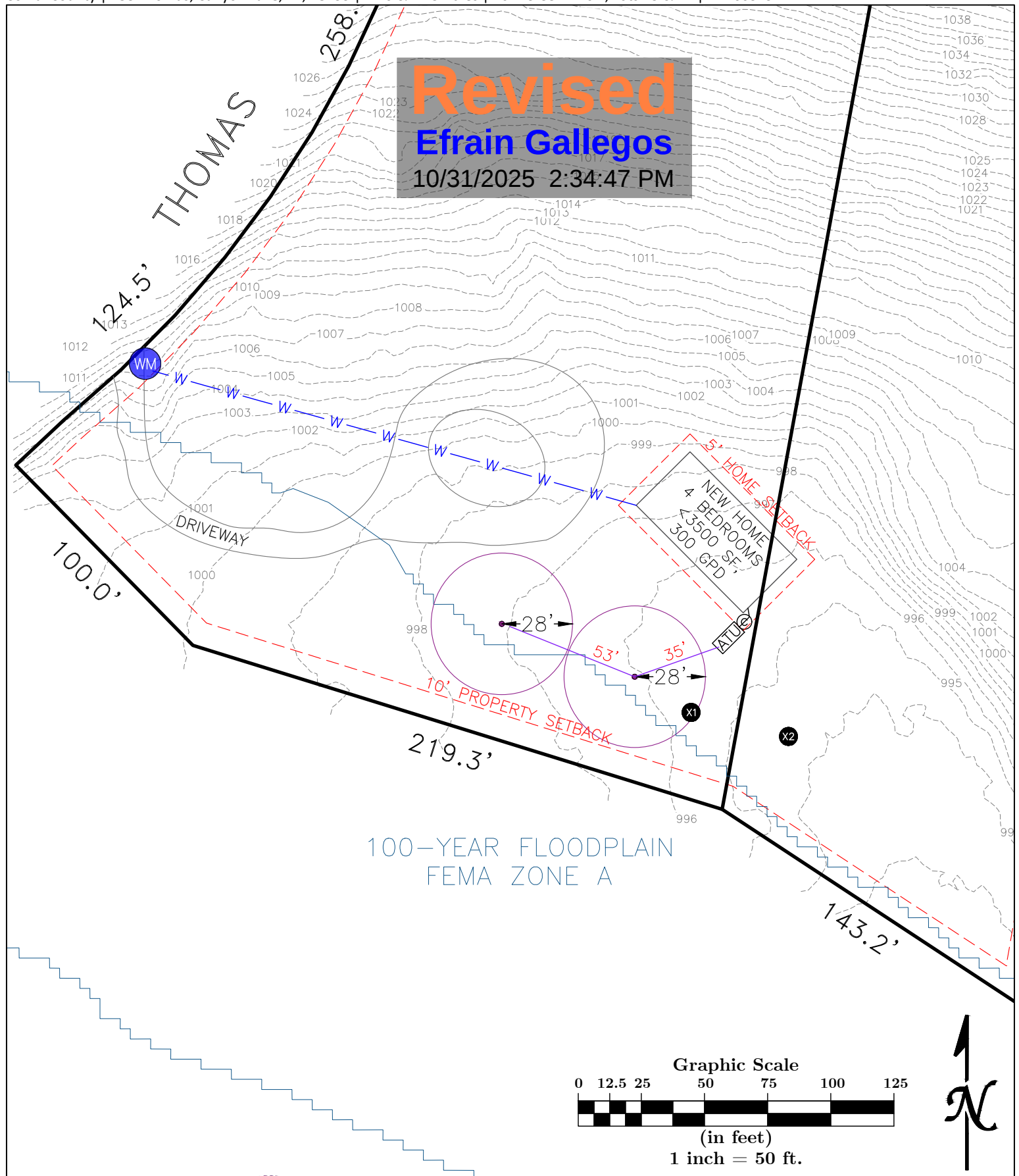
johnathan.jaster@gmail.com

275 Hoffman Rd, Bastrop, TX, 78602



LEGEND

- X1** Test Hole 1
- X2** Test Hole 2
- Sewer Pipe
3 or 4" SCH40 PVC
- ⊙** 2 Way C/O
- EFFLUENT LINE
1" SCH 40 PVC
- SPRAY AREA
- SPRINKLER NOZZLE
- ATU** Pro Flo 500 SLPT2
- W—** WATERLINE
- WM** WATER METER



DESIGNED BY

Johnathan Jaster

Registered Sanitarian # 5124

(512) 878-9219

johnathan.jaster@gmail.com

275 Hoffman Rd, Bastrop, TX, 78602



LEGEND



Test Hole 1



Test Hole 2



Sewer Pipe
3 or 4" SCH40 PVC



2 Way C/O



EFFLUENT LINE
1" SCH 40 PVC



SPRAY AREA



SPRINKLER NOZZLE



Pro Flo 500 SLPT2



WATERLINE



WATER METER

Department of Infrastructure
County Engineer's Office
3151 SE Inner Loop, Ste B
Georgetown, TX, 78626

Revised
Efrain Gallegos
10/31/2025 1:31:43 PM

Johnathan Jaster
275 Hoffman Rd,
Bastrop, TX, 78602
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31 October 2025

Variance Request for Spray Setback – 153 Thomas

I am formally requesting a variance to reduce the required spray area setback at the address of 153 Thomas, Canyon Lake, TX, 78133 from 20 feet to 10 feet. Due to the unique circumstances of this property, complying with the 20-ft setback that is set forth in the Comal OSSF Order is difficult. To ensure equal protection and to minimize any potential environmental impacts, a battery backup timer will be installed. This device will restrict the spray heads' operation exclusively to the hours of 12 am and 5 am. This variance, with the proposed mitigation, will not pose a threat to the environment or public health.

Please feel free to contact me with any questions.

Respectfully,
Johnathan Jaster, RS #5124



1 MATERIALS

- **ATU: Pro Flo 500 SLPT2**
 - includes a 397 gallon pretreatment compartment
 - includes a 768 gallon pump tank compartment
- Pump: Franklin C1 Series 20XC1-05P4-2W115
- Control panel: 50B223-PFT
- Timer: Intermatic FM/1 Series
 - 15 minute pin timer set to dose 1x nightly between midnight and 5 am
- Spray Heads: 2x K-Rain ProPlus 11003-RCW #3.0
- Sewer Pipe: 10 ft of 3" or 4" SCH 40 PVC Sewer Line
- Effluent Pipe: 110 ft of *purple* 1" SCH 40 PVC
- Unthreaded sampling port in pump tank
- Chlorinator: LBC Manufacturing "EZ-Tank"
- Chlorinator Alarm: N/A
- Air Alarm (audible & visible): Tecmark
- High Water Alarm (audible & visible)

2 FACILITIES

New Home

- Type: Single Family Residence
- Bedrooms: 4
- Size: <3500 SF
- Water Saving Fixtures: Yes
- Water Supply Type: Public Ground
- Daily Wastewater Flow (Q): 300 gpd



Total Flow Rate (Q) = 300 GPD

3 TANK CAPACITY

Minimum ATU Sizing for Single Family Residences, Combined Flows from Single Family Residences, or Multi-Unit Residential Developments

New Home: 4 bedrooms & less than <3501 SF = 480 GPD per Residential Unit

Proposed ATU: Pro Flo 500 SLPT2 (500 GPD aerobic unit)

4 SETBACK DISTANCES

Receptor	Tanks	Sewer Pipe	Drainfield
<i>Private Wells</i>	50	20	100
<i>Private Water Supply</i>	10	10 ¹	none
<i>Public Water Supply</i>	10	10	10
<i>Water Bodies</i>	50	20	50
<i>Foundations, Buildings, Surface Improvements, Property Lines, Swimming Pools, and Other Structures</i>	5	5 ^{2,3}	none ^{4,5,7}
<i>Slope Breaks and Seepage</i>	5	10	10
<i>Underground Easements</i>	1	1	1
<i>Overhead Easements⁶</i>	1	1	1
<i>EARZ Features</i>	50	50	150

Footnotes

1. Except at the connection to the structure. Private water lines crossing wastewater lines should be treated as public water line crossings (See 30 TAC Chapter 290).
2. Pipe may run beneath driveways, sidewalks, or up to surface improvements if it is SCH 80 or sleeved in SCH 40.
3. No setback for building foundations if pipe contains secondary effluent.
4. Property line setback is 20 ft, or 10 ft with night time only spray controlled by a commercial irrigation timer
5. Swimming pool setback is 25 ft.
6. No setback if permission granted by easement holder.
7. 10 ft from any residential or commercial structure.

5 DISPOSAL FIELD SIZING

Daily Flow Rate (Q): 300 gpd
 Application Rate (Ra) 0.064 gal/ft²/day
Minimum Area: 4687.50 ft²

Nozzle	Area ft ²	Radius ft	Rotation degrees	Flow Rate GPM	Pressure PSI
3.0	2461.76	28	360	3.0	30
3.0	2461.76	28	360	3.0	30
Total Area	4923.52		Total Flow	6.0	

6 DOSING

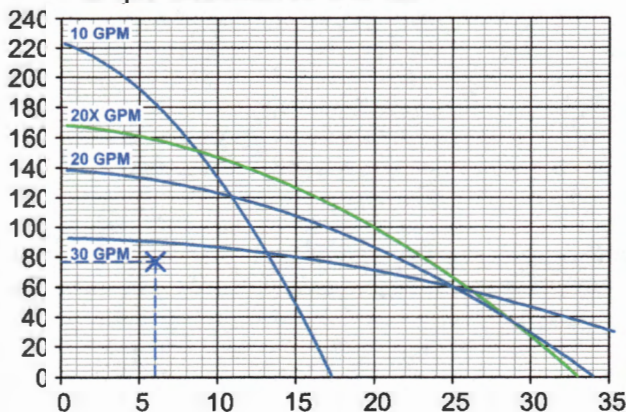
Doses 1 per night
 Flow Rate 6.0 gpm
 Dosing Volume 300.0 gal
 Dosing Time 50.0 min/dose

7 PUMP REQUIREMENTS

Pipe Size	1 in
Inner Diameter	1.029 in
Effluent Pipe Length	110 ft
Roughness Coefficient	150 (PVC)
Volumetric Flow Rate	6.0 gpm
Friction Head + 20% =	1.4 ft
Pressure Head =	69.3 ft
Elevation Head =	4.6 ft

Total Head = 75.3 ft ≈ 32.6 psi

Franklin C1 Series
 Pump Performance Curves

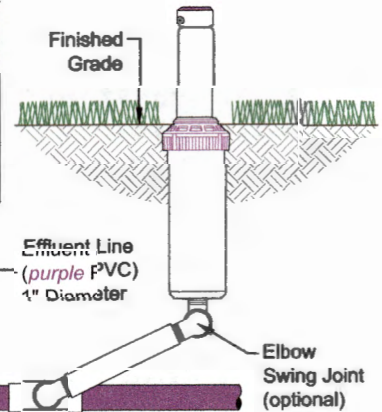


8 SPRAY HEADS

Low-Angle Nozzles

K-Rain ProPlus 11003-RCW

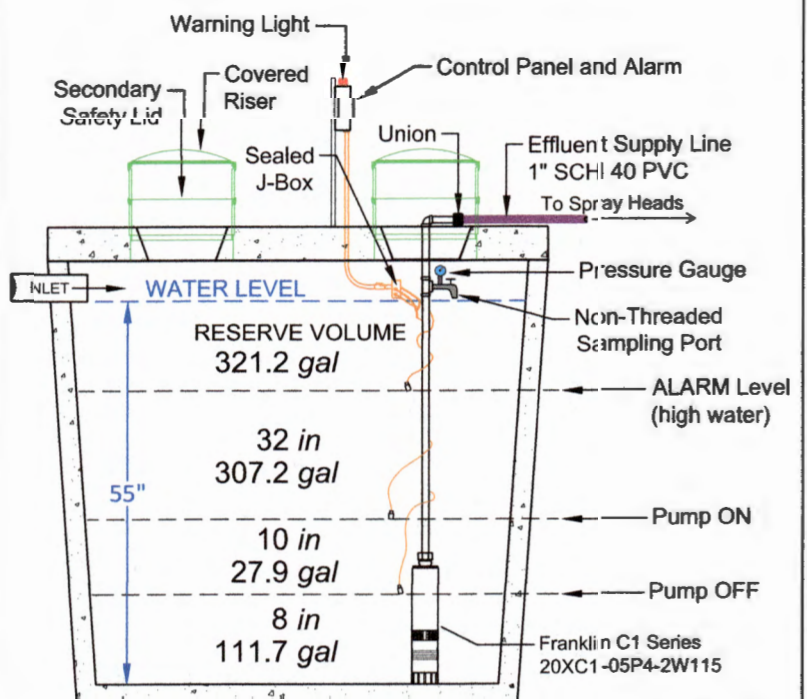
Nozzle	Pressure PSI	Radius ft	Flow Rate gpm
1.0	30	22	1.2
1.0	40	24	1.7
3.0	30	29	3.0
3.0	40	32	3.1
4.0	30	31	3.4
4.0	40	34	3.9
6.0	40	38	6.5



K RAIN MANUFACTURING
 www.krain.com

9 PUMP TANK & FLOAT SETTINGS

Volume	768 gal
Water Depth	55 in
Volume per Unit Height	13.96 gal/in



Minimum Reserve Volume: 1/3 days flow = (Q × 1/3) = 100 gal

10 INSTALLATION NOTES

• **Sewer Pipe:** A 4" solid-wall SCH 40 or SDR 26 PVC pipe will be installed between each tank and building utilizing the OSSF with a minimum downward slope of $\frac{1}{8}$ " per foot. A 2-way cleanout must be included in this line with additional cleanout plugs provided for long runs of pipe every 100 feet and within 5 feet of 90 degree bends. Sewer pipes may run beneath driveways, sidewalks, or surface improvements if it is SCH 80 or sleeved with SCH 40 pipe.

• **Backfill:** A minimum of 4 inches of sand, sandy loam, clay loam, or pea gravel that is free of any rocks larger than $\frac{1}{2}$ " in diameter shall be placed under and around all tanks. Unless approved by the permitting authority, tank excavations shall be left open until they have been inspected by the permitting authority. After inspection, tanks are to be backfilled with soil or pea gravel free of rocks greater than $\frac{1}{2}$ " in diameter. Class Ia, IV, and soils containing rock greater than $\frac{1}{2}$ " in diameter are strictly prohibited for use as backfill material.

All pipe from building to treatment facility and treatment facility to disposal field shall be bedded with a minimum of 4 inches of Class Ib, II, or III soils. Class Ia, IV, and soil containing rock greater than $\frac{1}{2}$ " in diameter are *strictly prohibited* for use as backfill material.

• **Risers:** All tanks shall have permanent watertight risers installed over all inspection and cleanout ports that extend to a minimum of 2 inches above grade. Riser caps must have some sort of lock or cover to prevent unauthorized access such as a padlock, a cover which requires tools for removal, or a cover weighing a minimum of 65 pounds set into the recess of the tank lid. A secondary plug, cap, or restraint shall be provided below the riser cap to prevent tank entry in the event the primary cap is unknowingly damaged or removed.

• **Tank Requirements:** The flowline of the inlet device in the first compartment of a two-compartment tank or the first tank in a series of tanks must be at least three inches higher than the outlet device. The inlet and outlet of each tank shall have "T" branch fittings that extend 25-50% below the liquid level. Tank baffles shall have openings, such as a slot or hole, that is 25-50% below the liquid level which also applies to "T"s that are fitted to the slot or hole.

• **Pump Tank:** An unthreaded sampling port shall be provided in the treated effluent discharge line within the pump tank. The pump tank shall also be equipped with an audible and visible high-water alarm and shall be wired to a separate circuit from the pump.

• A commercial irrigation timer will be used for the pump tank and is required to spray between midnight and 5 am.

• **Chlorinator:** The chlorinator may be in-line between the treatment and pump tank, or within the pump tank.

• **Vegetative Cover:** Immediately after completion of installation, it is the responsibility of the homeowner to seed the drainage field with vegetative cover and mow as necessary to maintain optimum growing conditions. Under no circumstances may food crops be planted in this area.

• **Potable waterlines must be at least 10 feet on either side from any OSSF components.**

11 AFFIDAVIT

Prior to issuance of a permit, a certified copy of an affidavit must be submitted to the County Clerk's office in Comal County. The affidavit is a recorded file in reference to the real property deed on which the surface application is installed on the property.

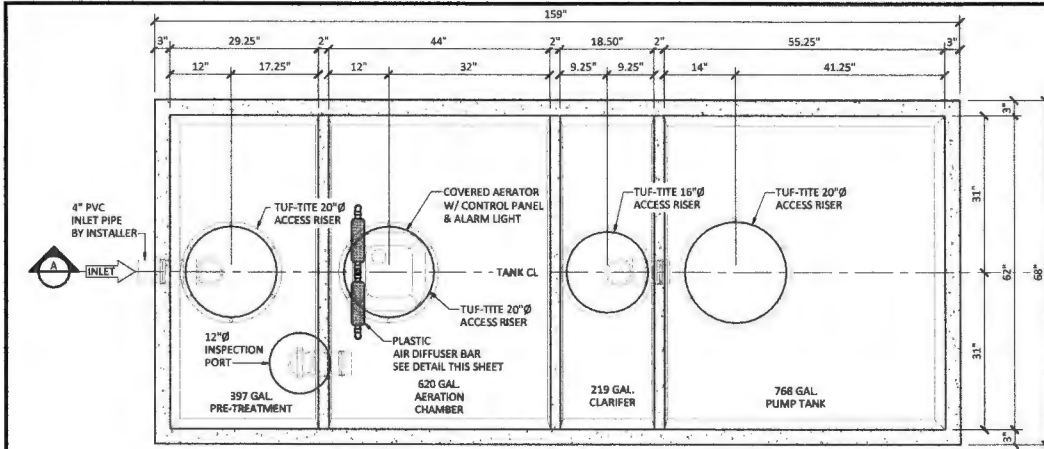
12 MAINTENANCE

1. The homeowner is primarily responsible for properly maintaining the aerobic treatment systems. The installer is responsible for providing the homeowner with installation manual(s) and instructing the homeowner on proper use and maintenance. The following provisions are required by the homeowner:
2. A maintenance contract must be maintained for the first 2 years by a licensed maintenance provider. The contract will meet the minimum requirements for testing and sample collection as detailed by State and/or County through a sampling port located in the discharge line within the pump tank.
3. Water saving devices shall be employed throughout the life of this OSSF system. If any water saving devices or components fail, it is the homeowner's responsibility to replace such devices with equal or better performance.
4. A constant supply of chlorine must be provided to the OSSF system.
5. The tank area will be free of ants and weeds. Mowing the spray area is crucial to prevent the ponding of water.
6. *Under no circumstances may any food crops be planted in the spray area.*
7. All faucets and toilets inside the home(s) must be maintained free of leaks.
8. Discharge of grease and use of garbage disposals are prohibited. Avoid water softeners as they may cause corrosion of electrical components and shorten the life span of pumps and floats.
9. Pretreatment tanks should be pumped every 3-5 years to avoid excessive sludge accumulation. Excess sludge build up reduces the storage volume of the tank and may damage the treatment unit.
10. If a problem arises or persists, such as alarms turning on or effluent backing up into the home(s) or facilities, call a licensed maintenance provider for consultation or repair service.

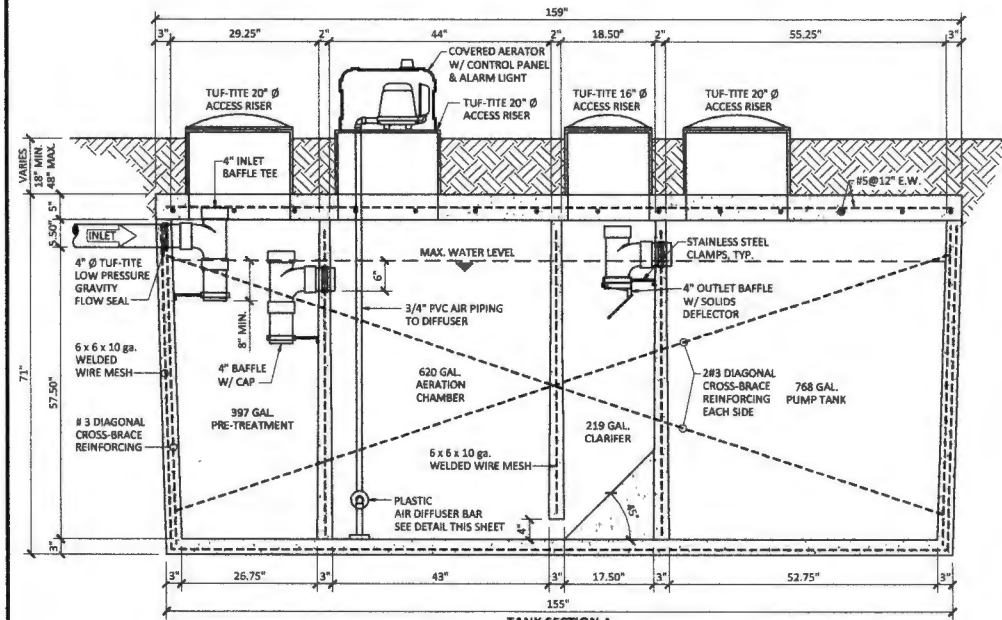


The following design is intended to meet the Comal On-Site Sewage Facilities and Regulations as well as Chapter 285 of Title 30 of the Texas Administration Code. The performance of this system cannot be guaranteed even though all provisions of 30 TAC 285 have been met or exceeded.

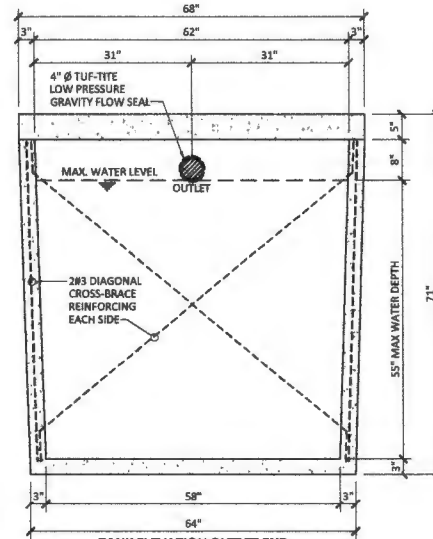
The location of sprinkler heads and other OSSF components may be subject to field adjustments to meet state and/or county setback requirements so long as they do not violate any required easements, setbacks, or total required drainfield area. Designer not responsible for damage to any above or below ground utilities.



TANK PLAN
SCALE: 1\"/>



TANK SECTION A
SCALE: 1\"/>



TANK ELEVATION OUTLET END
SCALE: 1\"/>

CONCRETE SPECIFICATIONS:

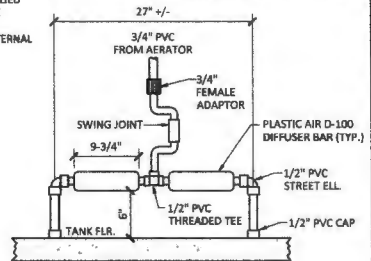
1. THE MINIMUM COMPRESSIVE STRENGTH SHALL BE 4500 psi @ 28 DAYS OF AGE.
2. THE CONCRETE COVER FOR REINFORCING BARS, MATS, OR FABRIC SHALL NOT BE LESS THAN 1 IN.

GENERAL NOTES:

1. THIS TANK IS TO BE BUILT AND INSTALLED PER THE CURRENT EDITION OF ASTM C1227-12 STANDARD SPECIFICATION FOR PRECAST CONCRETE SEPTIC TANKS.
2. ACCESS COVERS MAY BE BURIED BELOW GRADE W/ A MINIMUM 6\"/>
- 3. TANKS SHALL BE CLEARLY MARKED WITHIN 2'-0\"/>
- 4. EXPOSED ACCESS OPENINGS 12\"/>
- 5. ANY ACCESS OPENING 6\"/>
- 6. ALL INLET/OUTLET FITTINGS TO BE 4\"/>
- 7. BAFFLES OR TEES SHALL BE PLACED AT THE INFLUENT PIPE. SHALL EXTEND AT LEAST 8 IN. BELOW THE LIQUID LEVEL AND AT LEAST 5 IN. ABOVE THE LIQUID LEVEL. (BY INSTALLER)
- 8. THE MANUFACTURER IS REQUIRED TO DEMONSTRATE THAT FAILURE WILL NOT OCCUR BY PHYSICALLY APPLYING LOADS TO THE TANK. THE LOAD APPLIED SHALL BE 1.5 TIMES THE DESIGN DEAD LOAD. SUCH TESTING SHALL BE WITNESSED & CERTIFIED BY A REGISTERED PROFESSIONAL ENGINEER.
- 9. A 2-1/2\"/>

TANK DIMENSIONS		
TANK LENGTH (TOP)	159.00	in.
TANK LENGTH (BOTTOM)	155.00	in.
TANK WIDTH (TOP)	68.00	in.
TANK WIDTH (BOTTOM)	64.00	in.
TANK HEIGHT	71.00	in.
WALL THICKNESS	3.00	in.
FLOOR THICKNESS	3.00	in.
LID THICKNESS	5.00	in.
BOTTOM TO INLET	60.50	in.

TANK VOLUMES		
PRETREATMENT CAPACITY	397	gal.
AERATION CAPACITY	620	gal.
CLARIFIER CAPACITY	219	gal.
PUMP TANK CAPACITY	768	gal.
WATER DEPTH	55	in.
TANK CONCRETE VOLUME	86.72	FT ³
TANK LID CONCRETE VOLUME	27.65	FT ³
TANK WEIGHT (EMPTY)	13008	lbs.
LID WEIGHT	4148	lbs.
TOTAL TANK WEIGHT (EMPTY)	17156	lbs.



AIR DIFFUSER DETAIL
SCALE: 1\"/>

REVISIONS / ISSUANCE		
REF.	DATE	DESC.

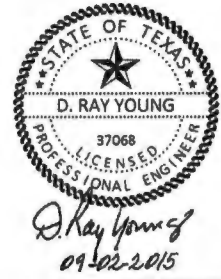
WATERENGINEERS, INC.
Water & Wastewater Treatment Consultants
TEXAS BOARD OF PROFESSIONAL ENGINEERS FIRM No. 2086
17280 HURFVISTE ROAD
CYPRESS, TEXAS 77429
TEL: 281-375-1333
FAX: 281-375-1333

PRO FLO AERobic SYSTEMS, LP
WASTEWATER TREATMENT SYSTEMS
20222 FM 382
WALLER, TEXAS 77484

AERobic WASTEWATER TREATMENT UNIT

MODEL No. **500 SLPT2**

DRAWN BY: J/LW
DATE: 9/2/2015
JOB No.: 4604.12
SHEET No.: **01 of 01**



FPS

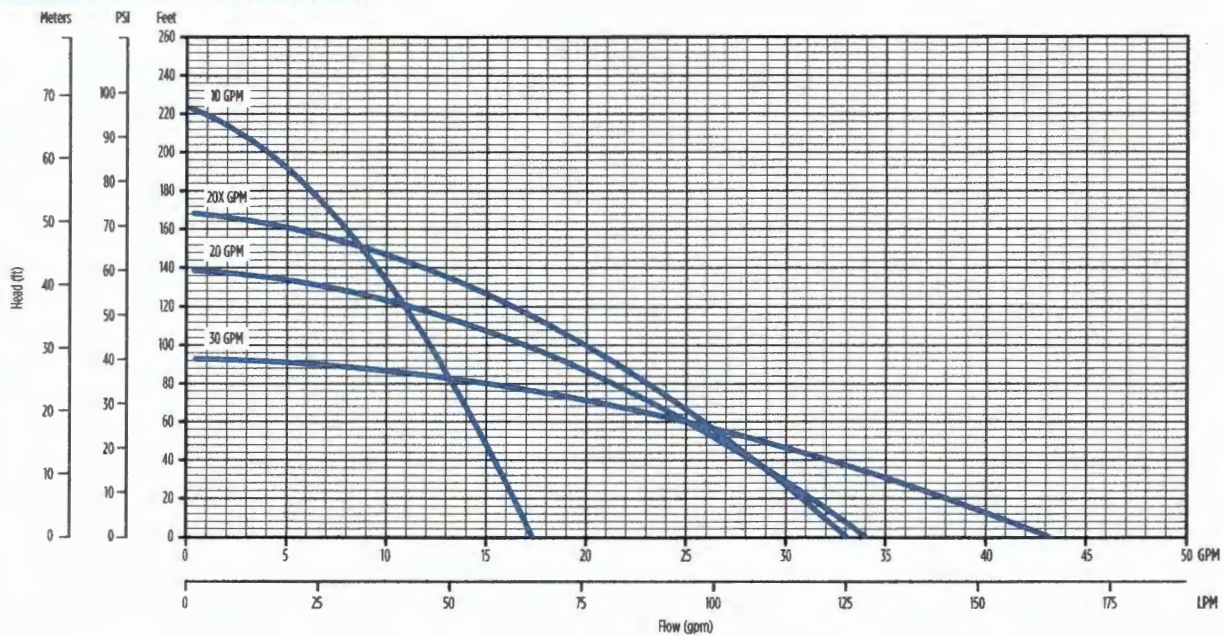
C1 SERIES

CISTERN PUMPS

Designed for use in gray water and filtered effluent service applications, the C1 Series cistern pump provides high performance and long life in less than ideal water conditions. Able to pass solids up to 1/8" without having a negative effect on the internal hydraulic components, the pump features a unique bottom suction design allowing for maximum fluid drawdown without compromising durability or overall life, and it does not require the use of a flow induction sleeve. Intended specifically for use in a cistern or tank, C1 Series pumps are suitable for use in agricultural, residential, and commercial installations



C1 SERIES FAMILY CURVE



FEATURES

- Supplied with a removable 5" base for secure and reliable mounting
- Bottom suction design
- Robust thermoplastic discharge head design resists breakage during installation and operation
- Standard backflow prevention through a built-in, but removable, check valve.
- Single shell housing design provides a compact unit while ensuring cool and quiet operation
- Hydraulic components molded from high quality engineered thermoplastics
- Optimized hydraulic design allows for increased performance and decreased power usage
- All metal components are made of high grade stainless steel for corrosion resistance
- Available with a high quality 115 V or 230 V, 1/2 hp motor
- Fluid flows of 10, 20, and 30 gpm, with a max shut-off pressure of over 100 psi
- Heavy-duty 300 V 10 foot SJ00W jacketed lead

APPLICATIONS

- Gray water pumping
- Filtered effluent service water pumping
- Water reclamation projects such as pumping from rain catchment basins
- Aeration and other foundation or pond applications
- Agriculture and livestock water pumping

ORDERING INFORMATION

GPM	HP	Flow	Flow	Model No.	Order No.	Height	Weight (lbs)
10	1/2	115	6	10C1-05P4-2W115	90301005	26	17
		230	6	10C1-05P4-2W230	90301010	26	17
20		115	4	20C1-05P4-2W115	90302005	25	16
		230	4	20C1-05P4-2W230	90302010	25	16
20X		115	5	20XC1-05P4-2W115	90302015	26	17
		230	5	20XC1-05P4-2W230	90302020	26	17
30		115	3	30C1-05P4-2W115	90303005	25	16
		230	3	30C1-05P4-2W230	90303010	25	16

NOTE: All units have 10 foot long SJ00W leads

PROPLUS™

Packed with features that ensure reliability,
saving the installer time and money on every job.

- **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, increases product durability.
- **Wide Selection of Nozzles** – Including standard and low angle, provides flexibility in system design.
- **Optional Check Valve** – Prevents low head drainage.



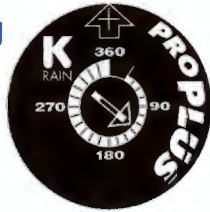
K-Rain Manufacturing Corp.

1640 Australian Avenue
Riviera Beach, FL 33404 USA
+1 561 844-1002
FAX: +1 561 842-9493

1.800.735.7246 | www.krain.com

Easy Arc Setting

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



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

How to Specify

Model Number	Description
11003	-RCW

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 Model)
- 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

NOZZLE	PRESSURE			RADIUS		FLOW RATE			PRECIP in/hr		PRECIP mm/hr	
	PSI	kPa	Bars	Ft.	M.	GPM	L/M	M ³ /H	■	▲	■	▲
#0.5	30	207	2.1	28	8.5	0.5	1.9	0.11	0.12	0.14	3	4
	40	276	2.8	29	8.8	0.6	2.3	0.14	0.14	0.16	3	4
	50	345	3.5	29	8.8	0.7	2.7	0.16	0.16	0.19	4	5
	60	414	4.1	30	9.1	0.8	3.0	0.18	0.17	0.20	4	5
#0.75	30	207	2.1	29	8.8	0.7	2.7	0.16	0.16	0.19	4	5
	40	275	2.8	30	9.1	0.8	3.0	0.18	0.17	0.20	4	5
	50	344	3.4	31	9.4	0.9	3.4	0.20	0.18	0.21	5	5
	60	413	4.1	32	9.8	1.0	3.8	0.23	0.19	0.22	5	6
#1.0	30	207	2.1	32	9.8	1.3	4.9	0.30	0.24	0.28	6	7
	40	275	2.8	33	10.1	1.5	5.7	0.34	0.27	0.31	7	8
	50	344	3.4	34	10.4	1.6	6.1	0.36	0.27	0.31	7	8
	60	413	4.1	35	10.7	1.8	6.8	0.41	0.28	0.33	7	8
#2.0	30	207	2.1	37	11.3	2.4	9.1	0.55	0.34	0.39	9	10
	40	275	2.8	40	12.2	2.5	9.5	0.57	0.30	0.35	8	9
	50	344	3.4	42	12.8	3.0	11.4	0.68	0.33	0.38	8	10
	60	413	4.1	43	13.1	3.3	11.4	0.68	0.34	0.38	8	9
2.5 Pre-installed	30	207	2.1	38	11.6	2.5	9.5	0.57	0.33	0.38	8	10
	40	275	2.8	39	11.9	2.8	10.6	0.64	0.35	0.41	9	10
	50	344	3.4	40	12.2	3.2	12.1	0.73	0.39	0.44	10	11
	60	413	4.1	41	12.5	3.5	13.3	0.80	0.40	0.46	10	12
#3.0	30	207	2.1	38	11.6	3.6	13.6	0.82	0.48	0.55	12	14
	40	275	2.8	39	11.9	4.2	15.9	0.96	0.53	0.61	14	16
	50	344	3.4	41	12.6	4.8	17.4	1.05	0.53	0.61	13	15
	60	413	4.1	42	12.8	5.0	19.0	1.14	0.55	0.63	14	16
#4.0	30	207	2.1	43	13.1	4.4	16.7	1.00	0.46	0.53	12	13
	40	275	2.8	44	13.4	5.1	19.3	1.16	0.51	0.59	13	15
	50	344	3.4	46	14.0	5.6	21.2	1.27	0.51	0.59	13	15
	60	413	4.1	49	14.9	5.9	22.4	1.34	0.47	0.55	12	14
#6.0	40	276	2.8	45	13.7	5.9	22.4	1.34	0.56	0.65	14	16
	50	344	3.4	46	14.0	6.0	22.7	1.36	0.55	0.63	14	16
	60	413	4.1	48	14.6	6.3	23.9	1.43	0.53	0.61	13	15
	70	482	4.8	49	14.9	6.7	25.4	1.52	0.54	0.62	14	16
#8.0	40	276	2.8	42	12.8	8.0	30.3	1.82	0.87	1.01	22	26
	50	344	3.4	45	13.7	8.5	32.2	1.93	0.81	0.93	21	24
	60	413	4.1	49	14.9	9.5	36.0	2.16	0.76	0.88	19	22
	70	482	4.8	50	15.2	10.0	37.9	2.27	0.77	0.89	20	23

Low Angle Performance Data

NOZZLE	PRESSURE			RADIUS		FLOW RATE			PRECIP in/hr		PRECIP mm/hr	
	PSI	kPa	Bars	Ft.	M.	GPM	L/M	M ³ /H	■	▲	■	▲
#1.0	30	207	2.1	22	6.7	1.2	4.5	.27	0.48	0.55	12	14
	40	276	2.8	24	7.3	1.7	6.4	.39	0.57	0.66	14	17
	50	345	3.4	26	7.9	1.8	6.8	.41	0.51	0.59	13	15
	60	414	4.1	28	8.5	2.0	7.6	.45	0.49	0.57	12	14
#3.0	30	207	2.1	29	8.8	3.0	11.4	.68	0.69	0.79	17	20
	40	276	2.8	32	9.8	3.1	11.7	.70	0.58	0.67	15	17
	50	345	3.4	35	10.7	3.5	13.2	.80	0.55	0.64	14	16
	60	414	4.1	37	11.3	3.8	14.4	.86	0.53	0.62	14	16
#4.0	30	207	2.1	31	9.4	3.4	12.9	.77	0.68	0.79	17	20
	40	276	2.8	34	10.4	3.9	14.8	.89	0.65	0.75	17	19
	50	345	3.4	37	11.3	4.4	16.7	1.00	0.62	0.71	16	18
	60	414	4.1	38	11.6	4.7	17.8	1.07	0.63	0.72	16	18
#6.0	40	276	2.8	38	11.6	6.5	24.6	1.48	0.87	1.00	22	26
	50	344	3.4	40	12.2	7.3	27.7	1.66	0.88	1.01	22	26
	60	413	4.1	42	12.8	8.0	30.3	1.82	0.87	1.01	22	26
	70	482	4.8	44	13.4	8.6	32.6	1.96	0.86	0.99	22	25

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

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.

Five StarGF#077486 **AM**

Gift Deed

Date: September 17, 2025

Grantor: Robert D. Leatherwood and Lu Lu Leatherwood, a/k/a Mary Carney Leatherwood, a married couple

Grantor's Mailing Address:

635 Sir Winston Dr.
Canyon Lake, Texas 78133

Grantee: Crystal Michelle Hernandez and Charles Lewis Hernandez, a married couple

Grantee's Mailing Address:

635 Sir Winston Dr.
Canyon Lake, Texas 78133

Consideration:

THE LOVE AND AFFECTION GRANTOR HAS FOR GRANTEE.

Property (including any improvements):

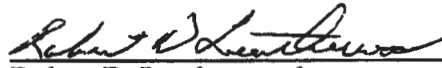
Lots 12 and 13, TOM CREEK HILLS, UNIT 1, situated in Comal County, Texas, according to plat thereof recorded in Volume 11, Pages 133-134, Map and Plat Records of Comal County, Texas.

Reservations from and Exceptions to Conveyance and Warranty:

Validly existing easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded and validly existing restrictions, reservations, covenants, conditions, oil and gas leases, mineral interests outstanding in persons other than Grantor, and other instruments, other than conveyances of the surface fee estate, that affect the property; validly existing rights of adjoining owners in any walls and fences situated on a common boundary; any discrepancies, conflicts, or shortages in area or boundary lines; any encroachments or overlapping of improvements; and any unpaid taxes for prior years, taxes for the current year, and taxes for subsequent years, the payment of all of which Grantee assumes and agrees to pay.

Grantor, for the consideration and subject to the Reservations from Conveyance and the 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 way belonging, to have and to hold it to Grantee and Grantee's heirs, successors, and assigns forever. Grantor binds Grantor and Grantor's heirs and successors to warrant and forever defend all and singular the Property to Grantee and Grantee's heirs, successors, and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, except as to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty.

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


Robert D. Leatherwood

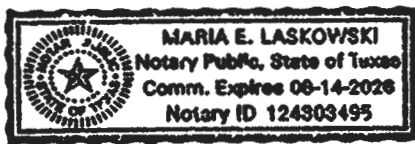
Lu Lu Leatherwood

ACKNOWLEDGMENT

STATE OF TEXAS

COUNTY OF Madeline §
§
§

This instrument was acknowledged before me on September 17, 2025 by Robert D. Leatherwood and Lu Lu Leatherwood.




Notary Public, State of Texas
Maria E. Laskowski
Printed Name of Notary Public

AFTER RECORDING RETURN TO:
FIVE STAR TITLE, LLC
304 N AUSTIN ST.
Seguin, Texas 78155

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
09/18/2025 04:08:17 PM
MARY 2 Pages(s)
202506030143





RECEIVED

By Kathy Griffin at 11:02 am, Oct 03, 2025



COMAL COUNTY
ENGINEER'S OFFICE

All owners from deed
to be on application
and sign.

ON-SITE SEWAGE FACILITY APPLICATION

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

Date 9-29-25

Permit Number 119075

1. APPLICANT / AGENT INFORMATION

Owner Name Crystal Hernandez
Mailing Address 635 Sir Winston Dr
City, State, Zip Canyon Lake, TX, 78133
Phone # 210-264-9470
Email Crystal-Leatherwood@yahoo.com

Agent Name Gene Mundahl / Aaron Jaquez-Arango
Agent Address P.O. Box 17576
City, State, Zip Austin, TX 78760
Phone # 512-326-1511
Email improvements@airproaustin.com

2. LOCATION

Subdivision Name Tom Creek Hills 1 Unit 1 Lot 12413 Block
Survey Name / Abstract Number Acreage 4.13
Address 153 Thomas State TX Zip 78133

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

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

Number of Bedrooms 4

Indicate Sq Ft of Living Area 2040

☐ 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: \$ 110,000 (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.

[Signature]
Signature of Owner

9-29-25
Date

MAINTENANCE CONTRACT

Start date should
state License to
Operate.

1. In consideration of prepayment of this Maintenance Contract one lump sum, and in accordance with the most current version of Chapter 25 rules regulating On-Site Sewage facilities in Texas, this maintenance service company agrees to the following:
2. This contract authorizes Lorenzo Mendez to operate and maintain the System located in Comal County, Permit # _____ for a period of 2 year(s) beginning _____ and ending _____. This contract shall automatically renew annually thereafter on the same terms unless otherwise stated in writing 30 days prior to expiration. The Certified Service Technician L.M. is responsible for all required performances checks, testing and maintenance of your aerobic system as follows:
3. Three (3) routine site visits per year (at least once every 4 months), including evaluation, adjustment and servicing of the mechanical, electrical, and other applicable component parts to ensure that all equipment is functioning properly.
4. Visual check for color, turbidity, scum, and odors. An event form will be used for total chlorine residual and reported as required once every four (4) months.
5. If any improper or abnormal operation is observed which cannot be corrected during the service visit, the property owner will receive a written notice of the existing conditions, corrective actions needed.
6. The Maintenance Company will respond to any call system complaints within 24-48 hours.
7. Complete a performance report after each visit which includes all maintenance findings and test results, then submit copies within 14 days to the permitting authority and the property owner(s), and the original will be kept in the Service Company's file.
8. This maintenance contract does not cover damage to any portion of the system caused by misuse, abuse, or failure to maintain electrical power to the system. Also excessive flows that exceed the organic loading or hydraulic design capabilities of the system as well as occurrences such as natural disasters or severe weather conditions, sludge pumping, or disposal of non-biodegradable materials, oils, greases, chemicals, solvents, paints, etc., or any usage contrary to the requirements as listed in the system owner's manual.

Owner(s) Responsibilities

9. Maintain spray irrigation areas by cutting grass, deep debris clear of OSSF for easy access to system, and shall adhere to OSSF rules section 285.39 OSSF Maintenance and Management Practices. Property Owner
10. Maintain chlorinator by refilling with approved EPA wastewater chlorine tablets needed, and do not allow any backwash from water softeners or reverse osmosis filters to enter the OSSF system. Property Owner

Terms & Conditions

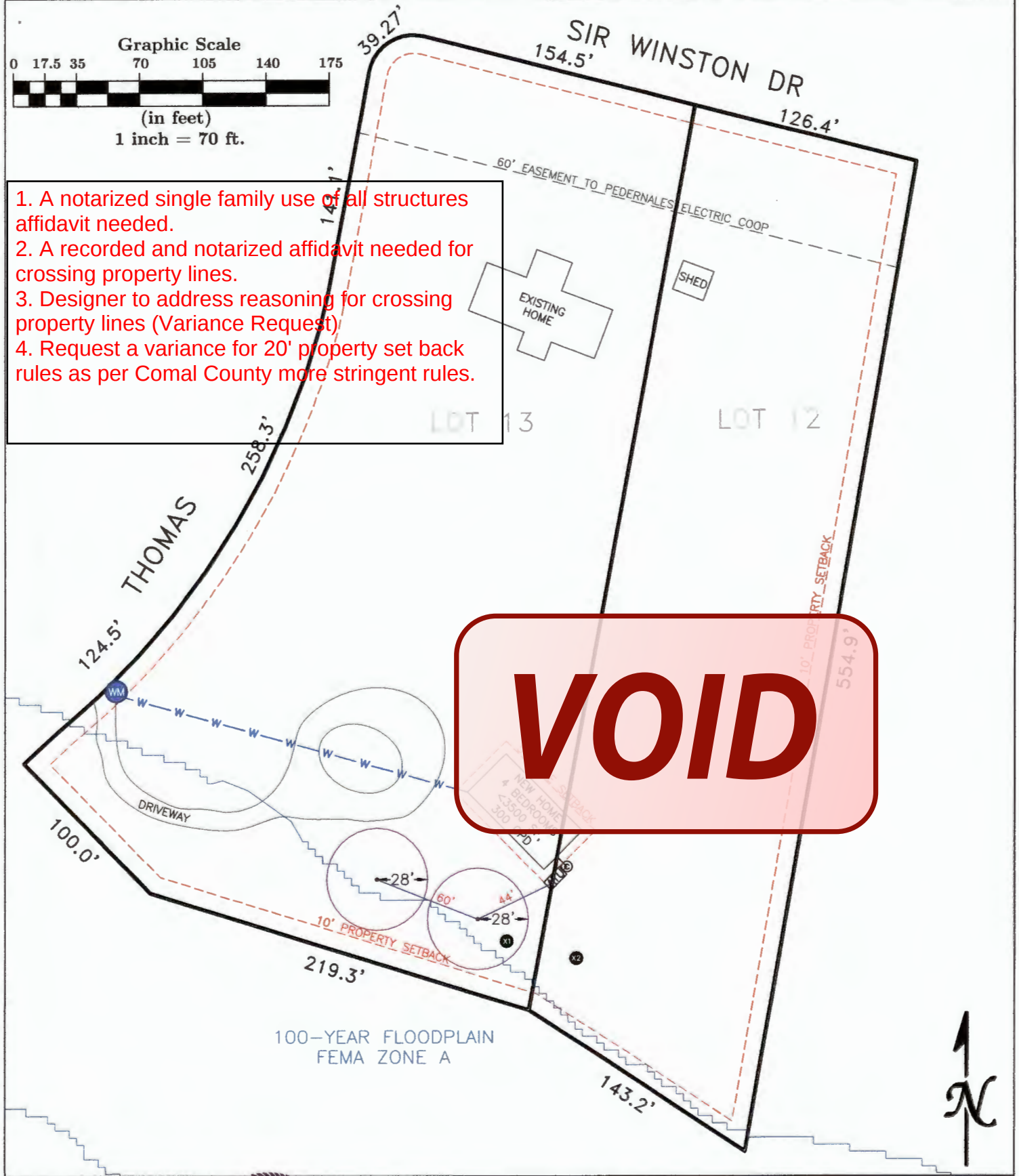
11. The Maintenance Company or anyone authorized by the service company may enter the property at reasonable hours without prior notice for the purpose of performing maintenance work on this aerobic system.
12. This agreement may be terminated by either party with the following stipulations. If the property owner terminates the agreement prior to expiration, then he/she agrees to pay the Maintenance Company a fee equal to one-half the cost of the service agreement. Upon expiration of this policy, the owner is required by law to continuously maintain a signed written contract with a valid maintenance company and shall provide the permitting authority with a copy of at least 30 days prior to the expiration of the previous contract. If the property owner or maintenance company desire to discontinue the maintenance contract, the maintenance company shall notify, in writing, the permitting authority at least 30 days prior to the date service will cease. If a maintenance company continues business, the owner shall within 30 days of the termination date, contract with another approved maintenance company and provide the permitting authority with a copy of the newly signed maintenance agreement.

- () 1 year maintenance contract
(☒) 2 year maintenance contract
() 3 year maintenance contract

Lorenzo Mendez
116 Cancun Ct
Del Valle, TX 78617
Office 512-738-6023
Cell (512) 844-4799
Email Nancy-mendez21@hotmail.com
Installer # OS0019038
MP # 0001115

Location
153 Thomas
Canyon Lake, Tx
78133

CHARLES HERNANDEZ Property Owner (s)
Name (s) Print
[Signature] Property Owner (s)
Signature (s)
Lorenzo Mendez Maintenance Company
Name (s) Print
Lorenzo Mendez Owner/ Certified Technician
Signature (s)



DESIGNED BY

Johnathan Jaster

Registered Sanitarian # 5124

(512) 878-9219

johnathan.jaster@gmail.com

275 Hoffman Rd, Bastrop, TX, 78602



LEGEND



Test Hole 1



Test Hole 2



Sewer Pipe
3 or 4" SCH40 PVC



2 Way C/O

EFFLUENT LINE
1" SCH 40 PVC

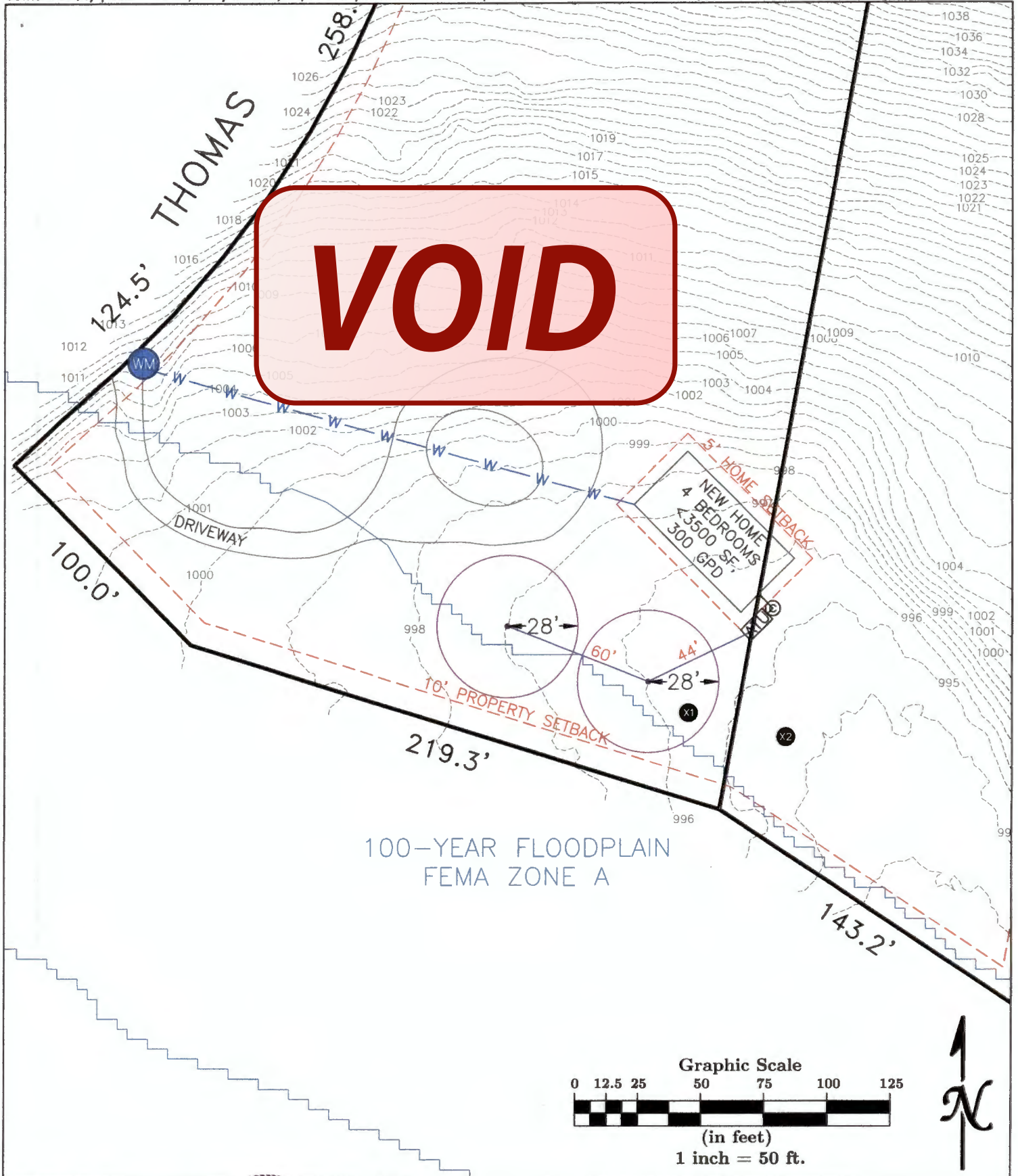
SPRAY AREA

SPRINKLER NOZZLE

ATU Pro Flo 500 SLPT2

WATERLINE

WATER METER



DESIGNED BY Johnathan Jaster Registered Sanitarian # 5124 (512) 878-9219 johnathan.jaster@gmail.com 275 Hoffman Rd, Bastrop, TX, 78602		LEGEND X1 Test Hole 1 X2 Test Hole 2 Sewer Pipe 3 or 4" SCH40 PVC 2 Way C/O	EFFLUENT LINE 1" SCH 40 PVC SPRAY AREA SPRINKLER NOZZLE ATU Pro Flo 500 SLPT2	WATERLINE WATER METER
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COMAL COUNTY

ENGINEER'S OFFICE

Address: _____

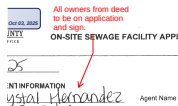
Legal Description: _____

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:

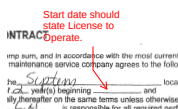
119075.pdf Markup Summary

Efrain Gallegos (3)



Subject: Callout
Page Label: 2
Author: Efrain Gallegos
Date: 10/30/2025 8:29:46 AM
Status:
Color: ■
Layer:
Space:

All owners from deed to be on application and sign.



Subject: Callout
Page Label: 5
Author: Efrain Gallegos
Date: 10/30/2025 8:53:51 AM
Status:
Color: ■
Layer:
Space:

Start date should state License to Operate.



COMAL COUNTY

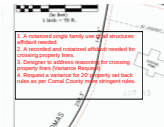
ENGINEER'S OFFICE

Address: _____

Legal Description: _____

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:



Subject: Text Box
Page Label: 8
Author: Efrain Gallegos
Date: 10/30/2025 9:13:04 AM
Status:
Color: ■
Layer:
Space:

- ✓ 1. A notarized single family use of all structures affidavit needed.
- ✓ 2. A recorded and notarized affidavit needed for crossing property lines.
- ~~3. Designer to address reasoning for crossing property lines (Variance Request)~~
- ✓ 4. Request a variance for 20' property set back rules as per Comal County more stringent rules.

From: [Griffin,Kathy](#)
To: crystal_leatherwood@yahoo.com
Subject: Floodplain Permit Required
Date: Friday, October 3, 2025 11:12:00 AM

Re: Proposed Development on Tom Creek Hills, Unit 1, Lots 12 & 13, known as 153 Thomas, within Comal County, Texas
OSSF Permit 119075

Dear Ms. Hernandez,

We have received a septic permit drawing that shows you wish to place a driveway on the referenced property in the regulatory floodplain. This lot is located partially within the special flood hazard area of Zone A as shown on the Comal County Flood Insurance Rate Map (Community Panel No. 485463 0235F), Effective Date September 2, 2009.

One of the basic criteria that must be met when constructing improvements within the floodplain is that improvements must not cause any adverse effect to the flood carrying capacity of the watercourse. We require an engineering analysis of what impact any improvements in the Regulatory Floodplain will have on the base flood elevation. This analysis must be prepared by a registered professional engineer and be submitted to our office for review. If the engineering analysis indicates that the proposed development will have no adverse impact on the base flood, we will issue a floodplain development permit.

The Comal County Environmental Health Office will withhold the issuance of a septic permit until this floodplain issue is in compliance. Please feel free to contact us if you have any questions or comments concerning any of the above.

Kathy Griffin, CFM
Floodplain Coordinator
Comal County Engineer's Office
830-608-2090
cceo.org



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

10-03-2025	BMO	119075	
Date Received	Initials	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

10.3.25

Date

___ COMPLETE APPLICATION

Check No. _____ Receipt No. _____

INCOMPLETE APPLICATION
____ (Missing Items Circled, Application Refused)