

## Ritzen, Brenda

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**From:** Ritzen, Brenda  
**Sent:** Tuesday, April 14, 2020 8:53 AM  
**To:** 'Brian and Vickie Erxleben'  
**Cc:** Pendley,Aaron  
**Subject:** RE: Permit #109396

Brian,

Your revision has been added to the permit file. Be advised no inspections of the OSSF installation have been completed. The owner must have their installer contact our office to request the required inspections.

Thank you,

Brenda Ritzen, OS0007722  
Environmental Health Coordinator  
Comal County Engineers Office  
195 David Jonas Drive  
New Braunfels, Texas 78132  
830-608-2090  
[www.cceo.org](http://www.cceo.org)

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**From:** Brian and Vickie Erxleben <bandverx@gmail.com>  
**Sent:** Monday, April 13, 2020 4:25 PM  
**To:** Ritzen, Brenda <rabbjr@co.comal.tx.us>  
**Cc:** Pendley,Aaron <pendla@co.comal.tx.us>  
**Subject:** Permit #109396

**This email originated from outside of the organization.**  
**Do not click links or open attachments unless you recognize the sender and know the content is safe.**

- Comal IT

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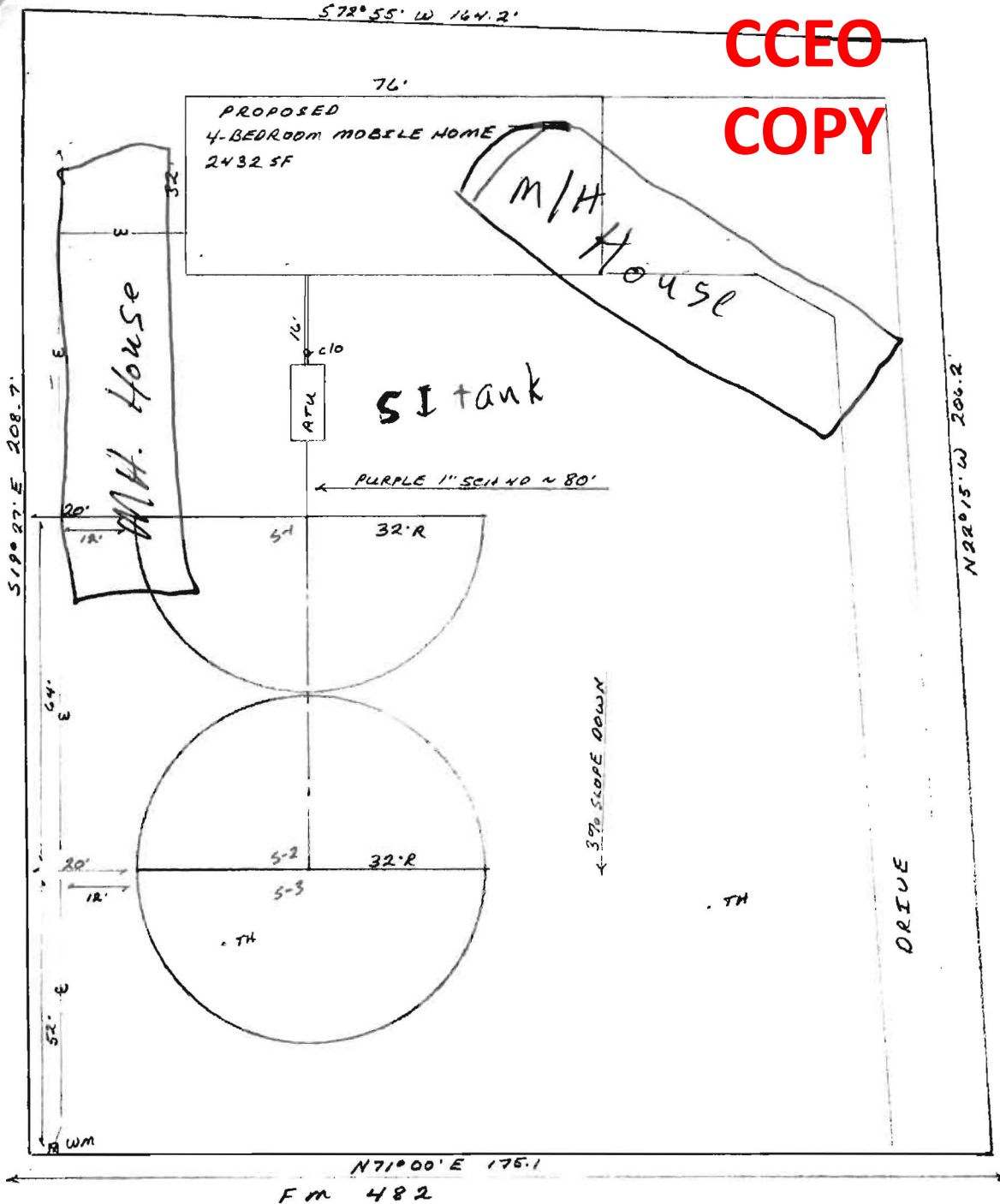
Brenda:

The original design was done in 2017 for a single 4-bedroom MH. There are now two mobile homes on site. Only the 3-bedroom 16' x 76' is connected to water. A 500 gpd ATU has been installed. This is revision changing the design to serve only the 3-bedroom MH. The other MH will not be connected to water and will not be connected to the ATU. That is on the design.

Thanks:

Brian

**CCEO  
COPY**



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**NOTES:**

1. A public sewer line is located within 300' of the home. However, it is located on the opposite side of the highway and NBU has determined that it would be cost prohibitive to bore under the highway and the owner will not be required to connect to the sewer.
2. Install a 2-way cleanout in a 3" sch 40 tightline from the house to the ATU, minimum slope 1/8 in/ft.
3. ATU is a minimum 500 gpd.
4. Supply line to the sprinklers is purple 1" sch 40.
5. S1-3 are K-Rain Proplus low angle sprinklers with #3 nozzles operating @ 40 psi, 180° pattern, 32' radius.
6. There shall be no obstruction within 10' of the sprinkler heads.
7. Audible & visual alarms, external disconnect within site of the pump tank, pump & alarms on separate breakers and external wiring in conduit are required.
8. Timer set to spray between 12:00 AM & 5:00 AM.
9. Liquid chlorinator.
10. 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.

0.809 ACRES  
JOHN THOMPSON, A-608

PROPERTY IS LOCATED OUTSIDE OF THE  
100-YEAR FLOODPLAIN AND THE EDWARDS  
AQUIFER RECHARGE ZONE.

**SITE PLAN & OSSF DESIGN:**

CINTHIA GORDILLO 4845 FM 482 NEW BRAUNFELS, TEXAS 78132	
BRIAN C. ERXLEBEN, R.S. 562 S. HWY 123 BYPASS #128 SEGUIN, TEXAS 78155 (830) 660-9133	DATE: 11-15-17 SCALE: 1" = 30'

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: V. Castro OSSF Installer #: OS0028417

1st Inspection Date: 3/6/20 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: \_\_\_\_\_

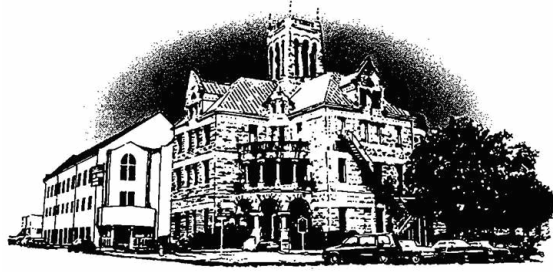
Inspector Name: mike T. Inspector Name: \_\_\_\_\_ Inspector Name: \_\_\_\_\_

Permit#: 109396 Address: 4845 F.M. 482

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)				

MT - 3/6/20

There are 2 min  
ow property that  
looks like living in  
Both



# Comal County

OFFICE OF COMAL COUNTY ENGINEER

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

Permit Number: 109396  
Issued This Date: 07/18/2019  
This permit is hereby given to: Cinthia Gordillo

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

4845 FM 482  
NEW BRAUNFELS, TX 78132

Subdivision: John Thompson Survey, Abstract 608

Unit:

Lot:

Block:

Acreage: 0.8100

### 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 OFFICE OF ENVIRONMENTAL HEALTH \*\*\***  
**APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN**  
**ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE**

Date 3/3/2019 Permit # 109396

Owner Name Cinthia Gordillo Agent Name Brian Erxleben, R.S.  
Mailing Address 5078 FM 482, Trailer 10 Agent Address 562 S. Hwy 123 Bypass #128  
City, State, Zip New Braunfels, Texas 78132 City, State, Zip Seguin, Texas 78155  
Phone # 512-825-5523 Phone # 830-660-9133  
Email myoliver@hotmail.com Email bandverx@gmail.com

All correspondence should be sent to:  Owner  Agent  Both Method:  Mail  Email

Subdivision Name N/A Unit \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

Acreage/Legal 0.809 Acres, John Thompson, A-608

Street Name/Address 4845 FM 482 City New Braunfels Zip 78132

**Type of Development:**

Single Family Residential  
Type of Construction (House, Mobile, RV, Etc.) Mobile home  
Number of Bedrooms 3  
Indicate Sq Ft of Living Area 1216

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Commercial or Institutional Facility  
(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 \_\_\_\_\_

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Estimated Cost of Construction: \$ 100,000 (Structure Only)

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

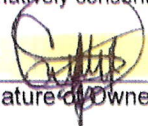
Yes  No (If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water  Public  Private Well

Are Water Saving Devices Being Utilized Within the Residence?  Yes  No

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.
- 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

07-16-19  
Date

**\* \* \* COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH \* \* \***  
**APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN**  
**ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE**

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) 500 gpd minimum Absorption/Application Area (Sq Ft) 3926

Gallons Per Day (As Per TCEQ Table III) 240

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

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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.))

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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.)

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

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

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

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

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

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

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

Is this property within an incorporated city?  Yes  No

If yes, indicate the city: \_\_\_\_\_

By signing this application, I certify that:

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

Signature of Designer

Date

Page 2 of 2

1/c



201906024354 07/16/2019 12:03:08 PM 1/1

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 BLOCK LOT SUBDIVISION

IF NOT IN SUBDIVISION: ACRES 0.809 SURVEY John Thompson ABSTRACT 608

The property is owned by Cinthia Gordillo.

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**.

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WITNESS MY HAND ON THIS 16th DAY OF July, 2019.

JUL 16 2019

OWNER/AGENT NAME (SIGNATURE)

COUNTY ENGINEER

Cinthia Gordillo

OWNER/AGENT NAME (PRINTED)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 16th DAY OF July, 2019

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
07/16/2019 12:03:08 PM  
CASHONE 1 Page(s)  
201906024354



Bobbie Koepf

Kathleen Griffin  
Notary Public, State of Texas

Notary's Printed Name: Kathleen Griffin



4-27-20

MJ Central Texas Septic, LLC

DBA MJ Septic

27552 Old Blanco Road
San Antonio, Texas 78260
(210) 875-3625 \* (210) 889-4606
mjseptic@satx.rr.com (email)

www.mjseptic.com

Aerobic Installation \* Aerobic Maintenance Contracts

Real Estate Inspections \* Cleaning/Pumping

Michael J. Long, MP 0001294 Licensed by T.C.E.Q.

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PROPERTY ADDRESS: 4845 FM 482 New Braunfels, Texas 78132

The Texas Commission on Environmental Quality (TCEQ) require all ATU's to be checked and maintained every four months for the life of the unit (some permitting authorities may stipulate this requirement, after the first two years after installation; call your county to inquire). Upon expiration of this contract, MJ Septic will offer a continuation of your maintenance contract to cover labor and routine maintenance/reports. Lab testing, if required, for coliform, TSS, BOD etc. are NOT included in this policy and applicable fees are the owner's responsibility.

MJ Septic will address all major concerns/complaints (excluding weekends & holidays) within 72 hours from the initial point of contact with homeowner(s).

- The annual fee on your contract includes the following: an inspection every four months (three times annually) which include inspecting the mechanical, electrical and other applicable components to ensure proper function.
Repairs I: If repairs or replacement of parts is needed during routine inspection, we will try to contact the homeowner for approval if we are able to repair onsite.
Repairs II: For ATU's under initial installation warranty (2 years from initial installation date) if warranted items are required to be replaced within 30 days of installation, part will be replaced with no fees, after 30 days there will be a \$75 warranty credit fee assessed on all parts.
Additional Service Calls/Charges: If a service call is required by homeowner/renter between regular inspections, a service call fee of \$75 (not including parts and/or cleaning/pumping) will be assessed.
Chlorine: The property owner is responsible for maintaining the chlorine supply. TCEQ regulation requires proper chlorination.
DO NOT USE POOL TABLETS (this can cause a volatile reaction)
Cleaning/Pumping: The cleaning/pumping of your ATU is not included in your maintenance contract.
Transfer of Property/Ownership: The fee of this maintenance contract is non-refundable, however is fully transferrable to the new owner(s).
Altering the system: Do not allow alteration to any part of the system or sprinkler head locations.
Violations of Warranty: Violations of the warranty include but are not limited to the following: turning off your system at any time, disconnecting the alarm; restricting airflow to the Air Compressor, overloading the system above its daily rated capacity, introducing excessive amounts of harmful matter (including harsh chemicals, cleaners, antibiotics, etc.) into the system or any other harmful usage of your OSSF/ATU.
Terms of Payment: Payment is due in full for the maintenance contract at time of signing.
Maintenance Tips/Owner Guide: Please read the attached Maintenance Tips/Owner Guide.

CIRCLE ONE CHOICE BELOW

Contract Verified (office use only)

Table with 4 columns: 1 YEAR (\$285), 2 YEAR (\$530), 3 YEAR (\$675), 2 YEAR INITIAL (Included in Installation). Includes text: Paid in Full at Sign Up, Non-Refundable, Does Not Include Additional Charges Noted Above. Homeowner(s) are NOT required to be present at inspections.

Acceptance of Maintenance Contract: The above prices, specifications, and conditions are satisfactory and are hereby accepted. MJ Septic is authorized to enter property to perform routine maintenance inspections as agreed. I have read and agree to the maintenance contract guidelines stated above and have also read and agree to comply with the Maintenance Tips/Owner Guide.

Accepted by Signature: [Signature] Printed Name: Cinthia Gordillo Email:
Phone Numbers: (Home) (Mr. Cell) (Mrs. Cell) 512-825-5523 (Work)

Subdivision: # of Occupants in Home: Gate Codes/Combination Locks, etc. Biting Dogs:
(MJ Septic will assess a \$75 service fee if we are not notified of gate code changes, biting dogs, etc.)

MJ Central Texas Septic, LLC Authorized Signature: Stephanie E. Perez

Date:





27552 Old Blanco Road  
San Antonio, Texas 78260  
(210) 875-3625  
[mjseptic@satx.rr.com](mailto:mjseptic@satx.rr.com)  
[www.mjseptic.com](http://www.mjseptic.com)

## Maintenance Tips/Owner Guide for your Aerobic System

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To keep your system functioning properly, regular maintenance is required. No matter how well the system is maintained or how well your aerobic system is designed and household usage, there will be parts that need to be replaced. Some are less expensive (and more common) like diffuser bars (if required, not all brands use diffusers), filters, sprinkler heads, airline, float switches, timers, audio and visual alarms, etc. Some are more expensive like sprinkler pumps, air compressors and septic tank cleanings, etc. With owning an aerobic system, you should expect to have parts replaced and it needing to be cleaned/pumped out. The life span of each part of your system will vary depending upon how many people use your system, how much water is used, what types of food you eat, what medicines are taken, the type of cleaning chemicals being used in the household, what you flush down the commode and of course the regular life expectancy for each functioning part, etc.

Some of the items checked during routine inspections that may need to be replaced or repaired according to their life span. These items include, but are not limited to: air compressor (aerator), a/c filters, filter pads, diffuser bars, sprinkler pumps (irrigation pumps), control panels, electrical circuit boards, float switches, timers, audio alarms, visual alarms, airline, photocell's, toggle switches, wires, junction boxes, risers and/or lids, sprinkler heads, chlorinators, etc.

Below are some recommendations that will help you keep maintenance costs down and will help your aerobic system function properly.

- **RED LIGHT ALARMS:** if your alarm turns on, don't panic (it usually isn't an emergency) Please call our office and schedule a service call with our office. If we are closed (after hours, weekends or holidays), please leave (1) voicemail at (210) 875-3625. You may also send a text to this number. You may email us to leave a request at [mjseptic@satx.rr.com](mailto:mjseptic@satx.rr.com) if you are unable to call or text. We will make a work order for the next available business day. During this time, you as the homeowner need to reduce all non-essential water usage. Don't wait days to report red light alarms!
- **POWER:** In the event of a red-light alarm or at any other time NEVER shut off the power to your system!
- **IRRIGATION SYSTEMS (lawn care) & ALTERATIONS TO THE SYSTEM:** Avoid spraying your irrigation system in the same areas as your septic spray areas. This will cause over saturation to the lawn. Homeowners, landscapers, irrigation and pool companies should NEVER replace or tamper with your aerobic system, including the spray heads. Doing such will void any warranties (if applicable) and may result in additional costs to the homeowner for necessary repairs to bring the system back into compliance. For any changes wanted or needed for swimming pools, decks, sport courts, patios or irrigation systems, it is the homeowner's responsibility to call MJ Septic, LLC at (210) 875-3625 to assist in taking the necessary measures to have alterations made. This usually requires the system to be redesigned by one of our septic designers and re-permitted with your respective county.

\*\* Do not build over any part of the aerobic system (the sprinklers can only be applied to natural vegetation surfaces!)

\*\* Do not landscape over any part of the aerobic system (trees, plants, flowers, etc.)

\*\* Do not allow ants to mound by any part of the aerobic system. Ant killer can be used to treat if mounds occur. (Ants will ruin electrical and void any warranties if applicable)

\*\* Keep all vegetation mowed and trimmed around the entire system, including the spray heads & spray area. If the technician cannot access the system due to overgrown grass, weeds, bushes, etc. there will be a service call charge assessed to return for inspection.

- **CHLORINE (tablets & liquid):** Never store your tablets near water heaters or in your water heater closet. Keep chlorine away from gas and electrical. It is always best to store it in a cool, dry and well ventilated area.  
**\*\* For tablet chlorinators:** use only chlorine that is designed to treat wastewater! Calcium Hypochlorite tablets are available at your local Home Depot or Lowe's. We do not sell them. NEVER USE SWIMMING POOL TABLETS! (mixing pool tablets with wastewater tablets could cause a dangerous volatile reaction. When the chlorinator is completely empty, do not add more than 4-5 tablets at a time to prevent the chlorinator from clogging.  
**\*\* For liquid chlorinators:** you may use liquid chlorine/bleach (same bleach used to wash whites) When the chlorinator is completely empty, add no more than 3 ½ gallons of liquid chlorine bleach at a time. We recommend 2-3 gallons monthly (this will vary depending on how much water is used in the home per month) Do not tamper with chlorinators! This will void any warranties (if applicable).
- An aerobic system should not be treated as city sewer. Economy in the use of water helps prevent overloading the system. Leaky faucets, running commodes, etc. should be guarded against as well. Avoid doing all of your laundry in the same day (try to space to 1-2 loads daily); surges of water entering the system can and will hydraulically overload the system and throw off the balance of bacteria, which will not allow your waste to break down properly.
- Items flushed down commodes and/or poured down the drains DO NOT disappear; they must be treated by the system! Aerobic systems are designed to treat domestic wastewater and most toilet paper (read labels). Things that can harm your system include, but are not limited to are: excessive use of garbage disposal (very light use is okay, only if necessary, otherwise it is strongly recommended against!) fat, grease, oils, too many cleaners, too much fabric softener, too much bleach, cigarette butts, baby wipes, facial wipes, cleaning wipes, any type of wipes, feminine products, paper towels, condoms, q-tips, paint, paint thinners, varnishes, drain cleaners, automatic toilet bowl cleaners, hair combs, pet hair, coffee grounds, fruit, fruit peels, fruit juices, cola, wine, salad oil, sugars, dental floss, any type of diapers, kitty litter, gauze bandages, unused medications, etc. Items such as these even though they may say "flushable" or "septic safe" can cause the homeowner unnecessary and avoidable expenses for repairs to the system, as well as additional expenses when cleaning out the tanks.
- We take sludge level readings at every routine inspection (every four months) unless the system has been shut off/power failure. We always recommend cleaning/pumping of the system when levels reach 10-12" of sludge. \*A typical/average household will need to have their system cleaned/pump every 2-5 years; this all depends on usage and WILL VARY per HOUSEHOLD! This fee is NOT included in your annual maintenance contract agreement.

**OSSF SOIL EVALUATION REPORT INFORMATION**  
**COMAL COUNTY**

**DATE: 11-15-17**

**Applicant Information:**

Name: Cynthia Gordillo  
Address: 5078 FM 482, Trailer 10  
City: New Braunfels State: Texas Zip: 78132  
Ph: (512) 825-5523 Fax:

**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: Block:  
Subdivision:  
Street/Road Address: 4845 FM 482  
City: New Braunfels State: TX Zip: 78132  
Additional: John Thompson, A-608

**Installer Information:**

Name: Kryscella Sanchez, OS0032655  
Company: Sanchez Septic Service  
Address: P.O. Box 655  
City: Elmendorf State: TX Zip: 78112  
Ph: (210) 478-9700 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: 0.809 acres

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**SITE DRAWING**

JUL 16 2019

**SEE SITE PLAN**

COUNTY ENGINEER

**FEATURES OF SITE AREA**

Presence of 100 year flood zone	YES ___ NO <u>X</u>	Presence of upper water shed	YES ___ NO <u>X</u>
Existing or proposed water well in nearby area	YES ___ NO <u>X</u>	Organized se/wage service available to lot	YES ___ NO <u>X</u>
Presence of adjacent ponds, streams, water impoundments	YES ___ NO <u>X</u>		

Site Evaluator:

NAME: BRIAN ERXLEBEN Signature:  License No: 11458

## COMAL COUNTY ENVIRONMENTAL HEALTH DEPARTMENT OSSF SOIL EVALUATION FORM

Owners Name: Cynthia Gordillo  
 Physical Address: 4845 FM 482 New Braunfels, Texas 78132  
 Name of Site Evaluator: Brian Erxleben, S.E. #11458  
 Date Performed: 11-10-17 Proposed Excavation Depth: N/A

**Requirements:**

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil 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 <u>1 &amp; 2</u>						
Depth (Feet)	Texture Class	Soil Texture	Structure (For Class III- blocky, platy or massive)	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0						<b>Aerobic Spray</b>
1						
2						
3	<b>Type 4</b>	<b>Clay</b>	<b>N/A</b>	<b>None</b>	<b>None</b>	
4						
5						
↓ 36"						

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						<div style="border: 1px solid black; padding: 5px; display: inline-block;">           RECEIVED            JUL 16 2019            COUNTY ENGINEER         </div>
1						
2						
3						
4						
5						

### FEATURES OF SITE AREA

Presence of 100 year flood zone	YES ___ NO <u>X</u>
Presence of adjacent ponds, streams, water impoundments	YES ___ NO <u>X</u>
Existing or proposed water well in nearby area	YES ___ NO <u>X</u>
Organized sewage available to lot or tract	YES ___ NO <u>X</u>
Recharge features within 150 feet	YES ___ NO <u>X</u>

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

Signature of Site Evaluator: \_\_\_\_\_

Date \_\_\_\_\_

*[Handwritten Signature]*

11-15-17

**REVISED**

8:37 am, Apr 14, 2020

**Brian Erxleben, R.S., S.E.**  
 562 S. Hwy 123 Bypass #128  
 Seguin, Texas 78155  
 Mobile (830) 660-9133 Fax (830) 372-3778

**OSSF DESIGN**

Owner: **Cynthia Gordillo**  
 Location: **4845 FM 482 New Braunfels, Texas 78132**  
 Phone: **(512) 825-5523**  
 Date: **4-13-20**

Development: **Mobile home with water saving devices** Bedrooms: **3** Sq. Ft: **1216**

Q: **240 gpd** Soil: **Type 4** R<sub>i</sub>: **0.064 gall/ft<sup>2</sup>/day**

System Type: **Aerobic/Surface Application (Pro Flo 500 SLPT 500 gpd)**

Minimum Required ATU Treatment Capacity: **500 gpd**

Trash Tank: 400 gall Aerobic Tank: 500 gpd Pump Tank: 771 gall

Supply Line: **Sch 40, 1" purple (~240')** Check Valve Required: **No**

Minimum Application Area (A): 3750 ft<sup>2</sup> (A = Q/R<sub>i</sub>)

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

Number	Nozzle	PSI	Pattern	Radius	Area/head	GPM/head	R <sub>i</sub>
<b>S1</b>	<b>#3</b>	<b>30</b>	<b>360°</b>	<b>25 ft</b>	<b>1963 ft<sup>2</sup></b>	<b>3.0</b>	<b>0.062</b>
<b>S2</b>	<b>#3</b>	<b>30</b>	<b>360°</b>	<b>25 ft</b>	<b>1963 ft<sup>2</sup></b>	<b>3.0</b>	<b>0.062</b>

Overlap Area: 0 Actual Application Area: **3926 ft<sup>2</sup>** GPM: **6.0 GPM**

TDH Calculations:

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

L = Length of equivalent pipe length (D) in feet

C = Hazen – Williams flow coefficient (150 for schedule 40)

Q = Flow rate, gpm

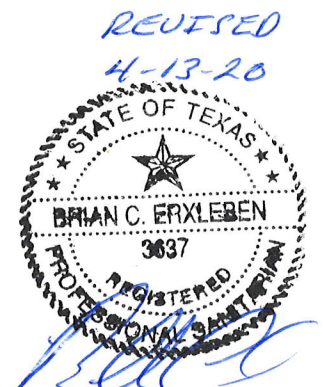
D = Internal pipe diameter, inches

Pressure Head (H<sub>p</sub>) = 70 ft (2.31)(psi) Elevation Head (H<sub>e</sub>) = 5 ft

TDH = **90 ft** (H<sub>f</sub> + H<sub>p</sub> + H<sub>e</sub>)

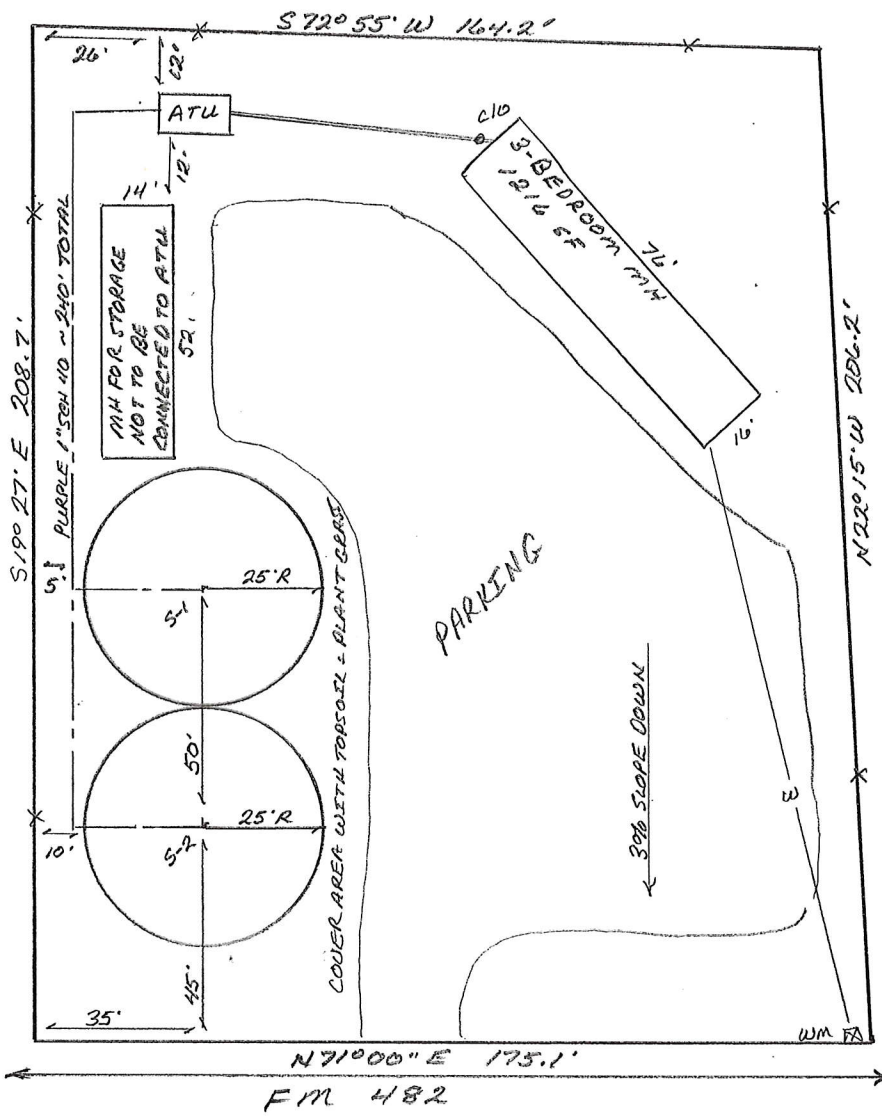
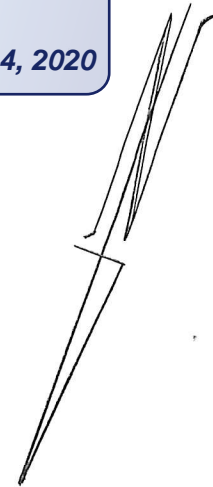
Pump Requirements: **6.0 GPM @ 90 ft TDH** Pump Used: **Sta-Rite 20DOM05121 20 gpm ½ HP**

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



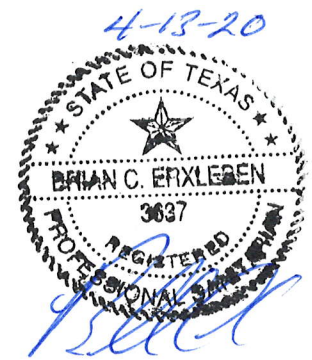
**REVISED**

8:37 am, Apr 14, 2020



**NOTES:**

1. A public sewer line is located within 300' of the home. However, it is located on the opposite side of the highway and NBU has determined that it would be cost prohibitive to bore under the highway and the owner will not be required to connect to the sewer.
2. Install a 2-way cleanout in a 3" sch 40 tightline from the house to the ATU, minimum slope 1/8 in/ft.
3. ATU is a minimum 500 gpd.
4. Supply line to the sprinklers is purple 1" sch 40.
5. S1-2 are K-Rain Proplus low angle sprinklers with #3 nozzles operating @ 30 psi, 360° pattern, 25' radius. Adequate space is not available to provide a 20' setback between the spray area and the property line. A variance is requested to locate the spray area 10' from the property line. A battery backup shall be installed in the control panel to insure that the timer does not lose power and that the system sprays only between the hours of 12:00 AM & 5:00 AM providing the equivalent protection of a 20' separation between the spray area and the property line.
6. There shall be no obstruction within 10' of the sprinkler heads.
7. Audible & visual alarms, external disconnect within site of the pump tank, pump & alarms on separate breakers and external wiring in conduit are required.
8. Timer set to spray between 12:00 AM & 5:00 AM.
9. Liquid chlorinator.
10. 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.



0.809 ACRES  
JOHN THOMPSON, A-608

PROPERTY IS LOCATED OUTSIDE OF THE  
100-YEAR FLOODPLAIN AND THE EDWARDS  
AQUIFER RECHARGE ZONE.

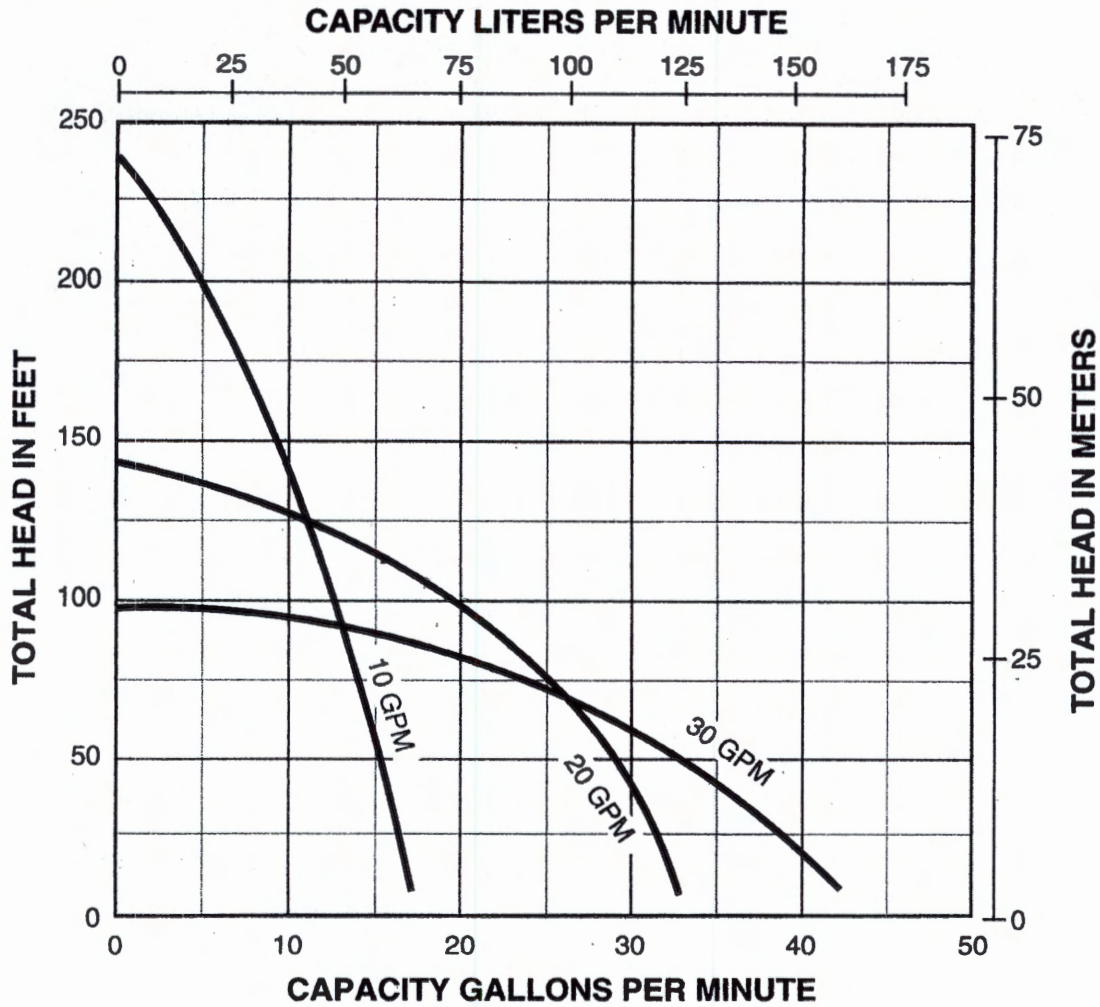
**SITE PLAN & OSSF DESIGN:**

CINTHIA GORDILLO 4845 FM 482 NEW BRAUNFELS, TEXAS 78132	
BRIAN C. ERXLEBEN, R.S. 562 S. HWY 123 BYPASS #128 SEGUIN, TEXAS 78155 (830) 660-9133	DATE: 4-13-20  SCALE: 1" = 40'



# 4" multi-stage submersible pump

## PUMP PERFORMANCE



### PUMP PERFORMANCE (Capacity in Gallons per Minute)

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 (Capacity in Liters per Minute)

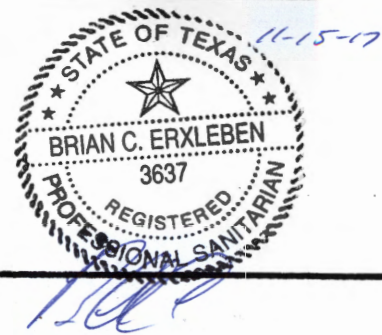
Pump Model	Bar											
	0	.69	1.38	2.07	2.76	3.45	4.13	4.82	5.51	6.20	6.89	7.58
10DOM05121			56.8	51.9	48.1	43.5	38.6	31.8	24.6	16.3	3.8	
20DOM05121			113.6	98.4	81.4	53.7	16.7					
30DOM05121		145.7	126.0	97.7	60.6							

Q'S UP TO 300 GPD

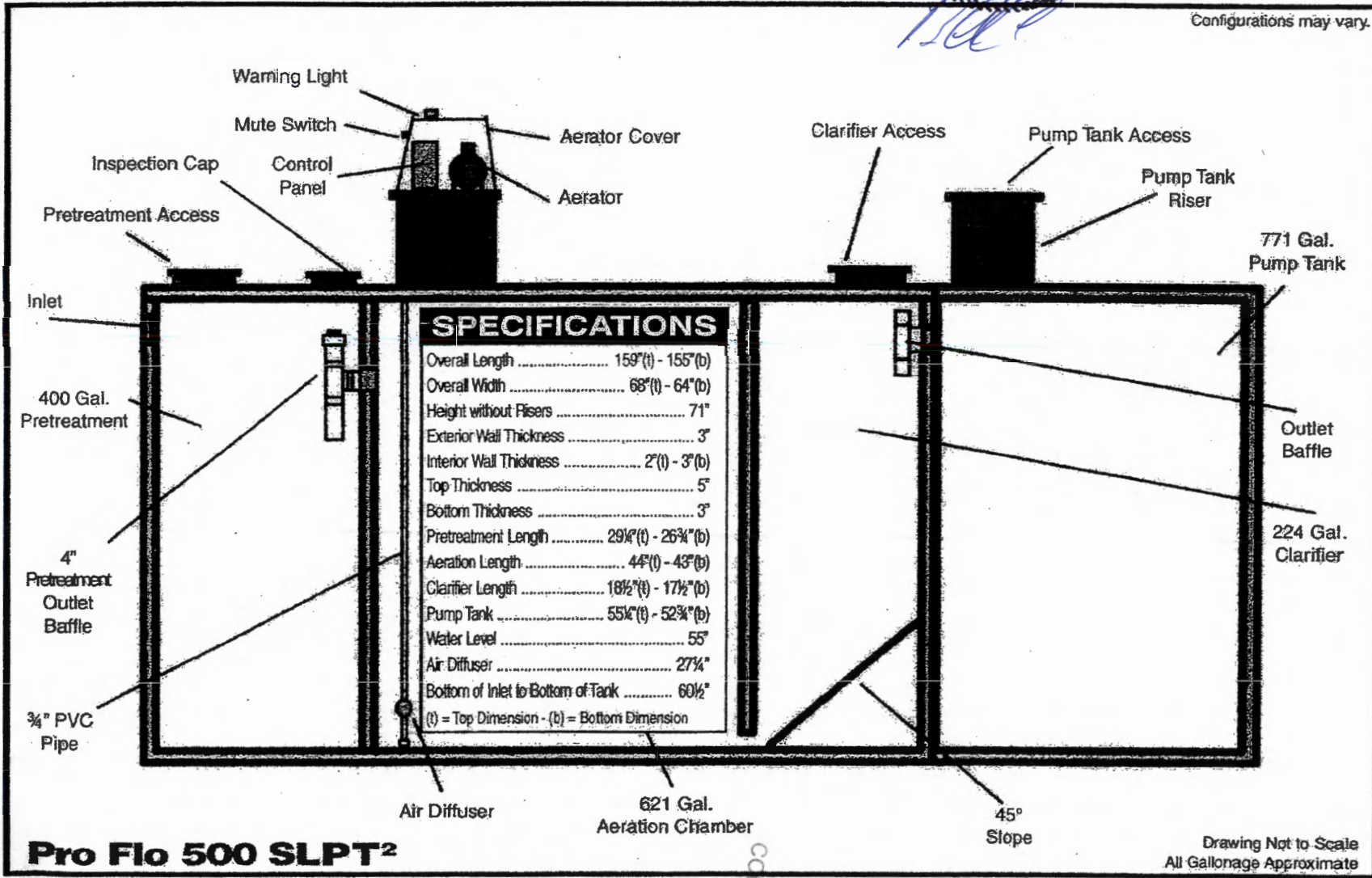
14.02 GALL/IN

MINIMUM "PUMP ON" TO "HIGH WATER ALARM ON": 22" (308 GALL)

MINIMUM "HIGH WATER ALARM ON" TO BOTTOM OF INLET: 8" (112 GALL)



Configurations may vary.



**Pro Flo 500 SLPT<sup>2</sup> System Diagram**

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**SPRINKLER INSTALLATION**

**7 INSTALL AND BURY**

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

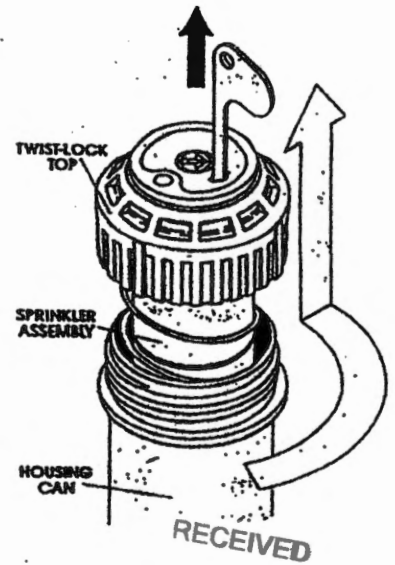
**POINTING THE LEFT START**

**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
#5	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
#5	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.

© 1996 K-Rain Mfg. Corp.



\* \* \* COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH \* \* \*  
APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN  
ON-SITE SEWAGE TREATMENT SYSTEM AND LICENSE TO OPERATE



Date 3/3/2019

Permit # 109396

Owner Name Cinthia Gordillo  
Mailing Address 5078 FM 482, Trailer 10  
City, State, Zip New Braunfels, Texas 78132  
Phone # 512-825-5523  
Email myoliver@hotmail.com

Agent Name Brian Erxleben, R.S.  
Agent Address 562 S. Hwy 123 Bypass #128  
City, State, Zip Seguin, Texas 78155  
Phone # 830-660-9133  
Email bandverx@gmail.com

All correspondence should be sent to:  Owner  Agent  Both Method:  Mail  Email

Subdivision Name N/A Unit \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

Acreage/Legal 0.809 Acres, John Thompson, A-608

Street Name/Address 4845 FM 482 City New Braunfels Zip 78132

**Type of Development:**

Single Family Residential

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

Number of Bedrooms 4

Indicate Sq Ft of Living Area 2432

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Commercial or Institutional Facility

COUNTY ENGINEER

(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: \$ 100,000 (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

Are Water Saving Devices Being Utilized Within the Residence?  Yes  No

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.
- 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

07-16-19  
Date

\* \* \* **COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH** \* \* \*  
APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN  
ON-SITE SEWAGE TREATMENT FACILITY AND LICENSE TO OPERATE

VOID

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) 500 gpd minimum Absorption/Application Area (Sq Ft) 4824

Gallons Per Day (As Per TCEQ Table III) 300

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

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

JUL 16 2019

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

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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.)

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

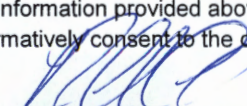
(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to Construct will not be issued for the proposed OSSF until the CZP has been approved by the appropriate regional office.)

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

3-3-19  
Date

Page 2 of 2

**Brian C. Erxleben, S.E.**  
 562 S. ... Pass #128  
 Seguin, Texas 78155  
 Mobile (830) 660-9133 Fax (830) 372-3778

**OSSF DESIGN**

Owner: **Cinthia Gordillo**  
 Location: **4845 FM 482 New Braunfels, Texas 78132**  
 Phone: **(512) 825-5523**  
 Date: **11-15-17**

Development: **Mobile home with water saving devices** Bedrooms: **4** Sq. Ft: **2432**

Q: **300 gpd** Soil: **Type 4** R<sub>i</sub>: **0.064 gall/ft<sup>2</sup>/day**

System Type: **Aerobic/Surface Application (Pro Flo 500 SLPT 500 gpd)**

Minimum Required ATU Treatment Capacity: **500 gpd**

Trash Tank: 400 gall Aerobic Tank: 500 gpd Pump Tank: 771 gall

Supply Line: **Sch 40, 1" purple (~80')** Check Valve Required: **No**

Minimum Application Area (A): 4688 ft<sup>2</sup> (A = Q/R<sub>i</sub>)

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 JUL 16 2019  
 COUNTY ENGINEER

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

Number	Nozzle	PSI	Pattern	Radius	Area/head	GPM/head	R <sub>i</sub>
S1	#3	40	180°	32 ft	1608 ft <sup>2</sup>	3.1	0.062
S2	#3	40	180°	32 ft	1608 ft <sup>2</sup>	3.1	0.062
S3	#3	40	180°	32 ft	1608 ft <sup>2</sup>	3.1	0.062

Overlap Area: 0 Actual Application Area: **4824 ft<sup>2</sup>** GPM: **9.3 GPM**

TDH Calculations:

$$\text{Friction Head}(H_f) = \frac{1.2(10.4397)(L)(Q)^{1.85}}{(C)^{1.85}(D)^{4.8655}} = 7 \text{ ft}$$

- 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<sub>p</sub>) = 93 ft (2.31)(psi) Elevation Head (H<sub>e</sub>) = 5 ft

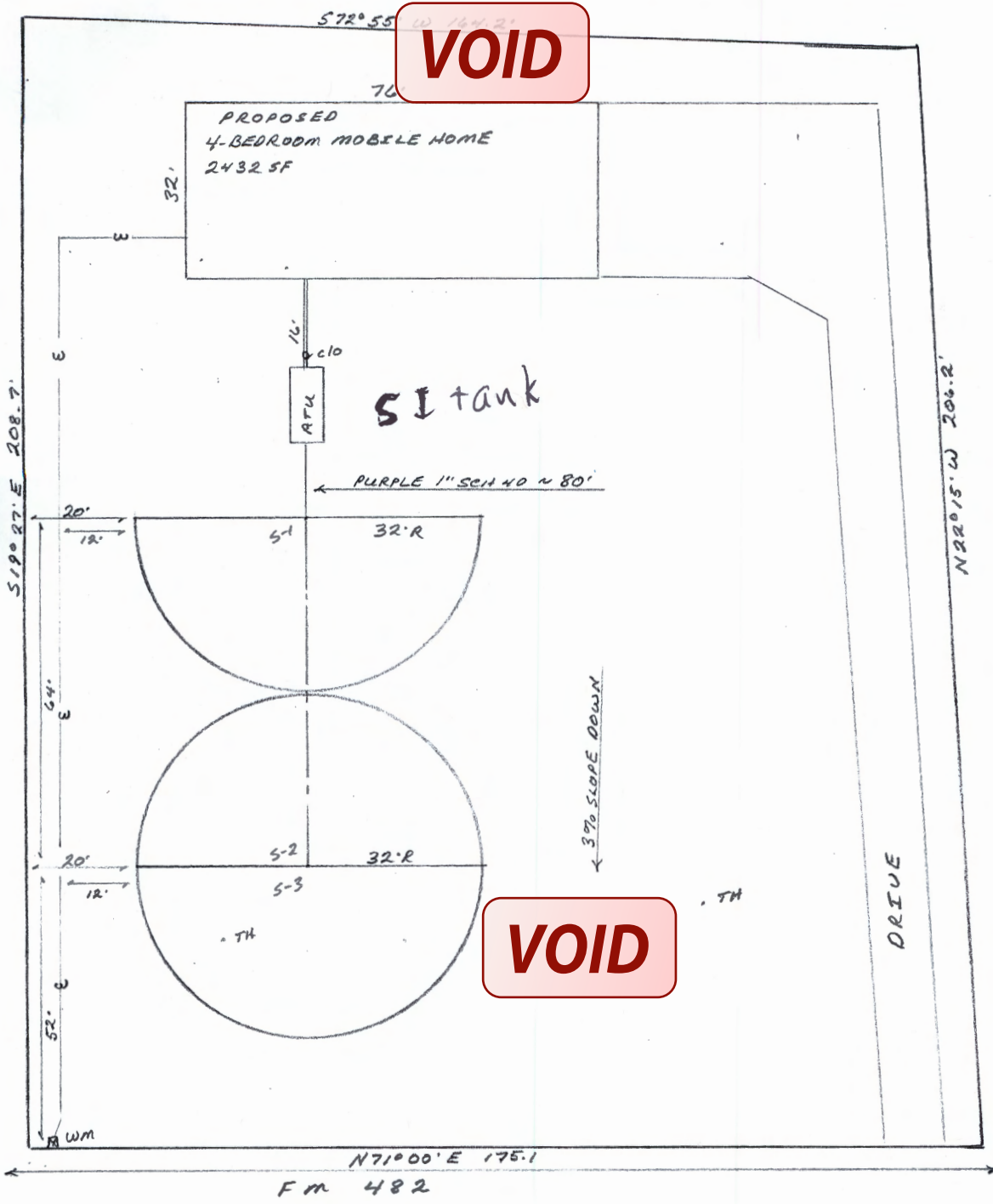
TDH = **105 ft** (H<sub>f</sub> + H<sub>p</sub> + H<sub>e</sub>)

Pump Requirements: **9.3 GPM @ 105 ft TDH** Pump Used: **Sta-Rite 20DOM05121 20 gpm ½ HP**

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



**VOID**



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JUL 16 2019

COUNTY ENGINEER



**VOID**

**NOTES:**

1. A public sewer line is located within 300' of the home. However, it is located on the opposite side of the highway and NBU has determined that it would be cost prohibitive to bore under the highway and the owner will not be required to connect to the sewer.
2. Install a 2-way cleanout in a 3" sch 40 tightline from the house to the ATU, minimum slope 1/8 in/ft.
3. ATU is a minimum 500 gpd.
4. Supply line to the sprinklers is purple 1" sch 40.
5. S1-3 are K-Rain Proplus low angle sprinklers with #3 nozzles operating @ 40 psi, 180° pattern, 32' radius.
6. There shall be no obstruction within 10' of the sprinkler heads.
7. Audible & visual alarms, external disconnect within site of the pump tank, pump & alarms on separate breakers and external wiring in conduit are required.
8. Timer set to spray between 12:00 AM & 5:00 AM.
9. Liquid chlorinator.
10. 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.

0.809 ACRES  
JOHN THOMPSON, A-608

PROPERTY IS LOCATED OUTSIDE OF THE  
100-YEAR FLOODPLAIN AND THE EDWARDS  
AQUIFER RECHARGE ZONE.

**SITE PLAN & OSSF DESIGN:**

CINTHIA GORDILLO 4845 FM 482 NEW BRAUNFELS, TEXAS 78132	
BRIAN C. ERXLEBEN, R.S. 562 S. HWY 123 BYPASS #128 SEGUIN, TEXAS 78155 (830) 660-9133	DATE: 11-15-17 SCALE: 1" = 30'

2/c



201406022330 06/30/2014 10:47:31 AM 1/2

**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.**

**Special Warranty Deed with Vendor's Lien**

**Date:** June 30, 2014

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JUL 16 2014

**Grantor:** James C. Stolte, owning and occupying other property as my homestead

**Grantor's Mailing Address:** 1155 Loop 337, New Braunfels, Comal County, Texas 78130

COUNTY ENGINEER

**Grantee:** Cinthia M Gordillo

**Grantee's Mailing Address:** 5078 FM 482 #10, New Braunfels, Comal County, Texas 78132

**Consideration:** Cash and a note of even date executed by Grantee and payable to the order of Grantor in the principal amount of Eighteen Thousand and No/100 Dollars (\$18,000.00). The note is secured by a first and superior vendor's lien and superior title retained in this deed and by a first-lien deed of trust of even date from Grantee to Frank B. Suhr, trustee.

**Property (including any improvements):**

0.809 Acre out of Abstract 608 of the John Thompson Survey Number 21 a/k/a Lot 6C, Comal County, Texas (Volume 131, Page 204 and Volume 140, Page 537) Tax Account No. 000000080302 and Document 201406022116 of the Deed Records, Comal County, Texas.

**Reservations from Conveyance:** SAVE AND EXCEPT Grantor hereby reserves unto themselves, their heirs, executors, administrators, assigns, and successors all mineral interests (including but not limited to all of the executive rights to all such mineral interests), and for as long thereafter as oil, gas or other hydrocarbons are produced from said mineral estate.

**Exceptions to Conveyance and Warranty:** Liens described as part of the Consideration and any other liens described in this deed to Grantors as being either assumed or subject to which title is taken; validly existing easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded and validly existing instruments, other than conveyances of the surface fee estate, that affect the Property ; and taxes for 2014, which Grantee assumes and agrees to pay, and subsequent assessments for that and prior years due to change in land usage, ownership, or both, the payment of which Grantee assumes.

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.

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 will become absolute.

As a material part of the Consideration for this deed, Grantor and Grantee agree that Grantee is taking the Property "AS IS" with any and all latent and patent defects and that there is no warranty by Grantor that the Property has a particular financial value or is fit for a particular purpose. Grantee acknowledges and stipulates that Grantee is not relying on any representation, statement, or other assertion with respect to the Property condition but is relying on Grantee's examination of the Property. Grantee takes the Property with the express understanding and stipulation that there are no express or implied warranties except for limited warranties of title set forth in this deed. Grantee's acceptance and recordation of this deed constitutes their agreement to these terms.

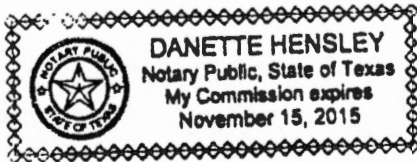
When the context requires, singular nouns and pronouns include the plural.

By: James C. Stolte  
James C. Stolte

STATE OF TEXAS §  
COUNTY OF COMAL §

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JUL 16 2019  
COUNTY ENGINEER

This instrument was acknowledged before me the 30 day of June, 2014 by James C. Stolte.



Danette Hensley  
Notary Public, State of Texas

Filed and Recorded  
Official Public Records  
Joy Streater, County Clerk  
Comal County, Texas  
06/30/2014 10:47:31 AM  
CONNIE 2 Page(s)  
201406022330



Joy Streater

ledged, and the further consideration of the execution and delivery by grantee of the following described note:

One certain promissory note of even date herewith, in the principal sum of Three Hundred Dollars (\$300.00), due and payable to the order of Martha W. Brucks, said note bearing interest at the rate of five per cent per annum, and payable as in said note set out, and secured by a Vendor's Lien hereinafter retained, against the property hereinafter described,

HAVE Granted, Sold and Conveyed, and by these presents do Grant, Sell and Convey, unto the said Maximo Aleman of Comal County, Texas, all that certain piece or parcel of land lying and situated in Comal County, Texas, containing 0.809 of an acre, being out of the John Thompson Survey No. 21, and out of the H. O. Brucks 7-acre tract conveyed by Gus A. Becker by deed dated November 11, 1937, recorded in Vol. 68, page 572, Comal County Deed Records, and being more particularly described by metes and bounds as follows:

BEGINNING at an iron pin in the Southeast line of Farm Road 482, set S. 71° 00' W. 357.4 feet from the original North corner of the H. O. Brucks 7-acre tract, set for the West corner of the Juan Noreiga one-acre tract, and for the North corner and beginning point of the herein conveyed 0.809 of an acre tract;

THENCE with the Southwest line of the said Noreiga tract, the Northeast line of this tract S. 19° 27' E. 208.7 feet to an iron pin set for the East corner of this tract;

THENCE S. 72° 55' W. 164.2 feet to an iron pin in the Southwest line of the H. O. Brucks 7-acre tract and for the South corner of this tract;

THENCE with the fence, the Southwest line of the said Brucks tract, N. 22° 15' W. 206.2 feet to an iron pin in the Southeast line of the aforesaid F. M. Road 482, set for the West corner of this tract;

THENCE with the Southeast line of the said F. M. Road 482, N. 71° 00' E. 175.1 feet to the place of beginning; according to survey made on the ground on January 31, 1962, by William J. Kolodzie, Deputy Surveyor.

TO HAVE AND TO HOLD the above described premises, together with all and singular the rights and appurtenances thereto in anywise belonging unto the said Maximo Aleman, his heirs and assigns forever, and I do hereby bind myself, my heirs, executors and administrators, to Warrant and Forever Defend, all and singular the said premises unto the said Maximo Aleman, his heirs and assigns, against every person whomsoever lawfully claiming, or to claim the same, or any part thereof.

But it is expressly agreed and stipulated that the Vendor's Lien is retained against the above described property, premises and improvements, until the above described note, and all interest thereon are fully paid, accord-

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

Items 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

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

RECEIVED  
JUL 16 2019  
COUNTY ENGINEER

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

\_\_\_\_\_  
Date

<input type="checkbox"/> COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

<input type="checkbox"/> INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)