License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: 01/26/2017  
Permit Number: 105368

Location Description: 559 E CLARK ST  
CANYON LAKE, TX 78133  
Subdivision: Canyon Lake Mobile Home Estates North  
Unit: 2  
Lot: 45  
Block:  
Acreage:  

Type of System: Septic Tank  
Leaching Chambers  

Issued to: Strad, LLC.  

This license is authorization for the owner to operate and maintain a private facility at the location described in accordance to the rules and regulations for on-site sewerage facilities of Comal County, Texas, and the Texas Commission on Environmental Quality.

The license grants permission to operate the facility. It does not guarantee successful operation. It is the responsibility of the owner to maintain and operate the facility in a satisfactory manner.

Alterations to this permit including, but not limited to:
- Increase in the square feet of living area
- Increase in the number of bedrooms
- A change of use (i.e. residential to commercial)
- Relocation of system components (including the relocation of spray heads)
- Installation of landscaping
- Adding new structures to the system

may require a new permit. **It is the responsibility of the owner to apply for a new permit, if applicable.**

Inspection and licensing of a facility indicates only that the facility meets certain minimum requirements. It does not impede any governmental entity in taking the proper steps to prevent or control pollution, to abate nuisance, or to protect the public health.

This license to operate is valid for an indefinite period. The holder may transfer it to a succeeding owner, provided the facility has not been remodeled and is functioning properly.

Licensing Authority

Comal County Environmental Health

[Signatures]

ENVIRONMENTAL HEALTH INSPECTOR  
ENVIRONMENTAL HEALTH COORDINATOR
Comal County OSSF Inspection Sheet

Permit#: 105368  Location: 559 E. Clark St.

Installer Name: M.A. Const/ Mike Batley  License # 050000243

1st Inspection: MT-1/13/17  2nd Inspection:  Final Inspection: MT-1/22/17

Are additional inspections required: ____________________________

Re-inspection fee owed: ____________________________  Re-inspection fee paid: ____________________________

Existing soil conditions:
Site/soil conditions match soil evaluation:  X  Notes: ____________________________

System Description:
Aerobic with spray:  X  Aerobic with drip emitters:  Low Pressure Dosing:  Absorptive drainfield:  
Evapotranspirative (ET) system:  Gravel-less drainfield piping:  Leaching chambers:  
Soil substitution drainfield:  other: ____________________________

Tank Inspection:
Tank set level & watertight:  X  Inlet/Outlet:  Tank Size or GPD:  750 gal.  Manuf./Brand:  
Model#:  Pump Tank Size:  Alarms/Audible & Visual:  Operational:  
Is timer required/provided?:  Chlorination required/provided?:  
Notes:  Tank off 2" back to house. Reset tank

System Installation:
Pipe check/house to tank:  Clean-out at structure/every 50 ft./@90's  Pipe check/tank to drainfield:  
(1/8"-ft., SDR 26 or Sch. 40)  Trenches/Excavations: Width/Depth:  Trenches/Excavations Level:  Pipe & Gravel:  
Slope within drainfield/spray area:  Leaching Chambers:  GeoTex:  
Spray irrigation purple pipe:  Spray irrigation area checked:  
Notes:  Last trench cut off top 1/2" under 36" depth.

Separation Distances
Prop. Lines:  Water lines: Water Wells: Bldgs/Driveway/Improvements:  Creek/Rivers/Ponds:  
Drainage Easements/Sharp Slopes:  If over Recharge Zone check for recharge features:  Are there water lines crossing tightlines/or within 10 feet of system?:  Have they been properly sleeved:  Are there sewer lines crossing under driveways, sidewalks, or within 5 ft. of surface improvements:  Have the sewer lines been properly sleeved?:  
Notes: ____________________________

Final Inspection:
Tank(s) Backfilled:  X  ET Systems Class II backfill & vegetative cover for transpiration in place:  
Surface application area properly landscaped/vegetation acceptable:  
Notes:  Covered

Size of Installed Drainfield/Spray Area:  900 sq. drainfield/panels.

Check here to confirm that service agreement has been received, entered and activated in CASST.
Comal County OSSF Inspection Sheet

Permit#: 105368 Location: 559 E. Clark st.

Installer Name: M.B. Const. / Mike Batey License #

(If more than one installer is used list them according to inspection)

1st Inspection: 1/13/17 2nd Inspection: 2nd Inspection:

Final Inspection: (inspector initials & date) (inspector initials & date)

Are additional inspections required:

Re-inspection fee owed: Re-inspection fee paid:

Existing soil conditions:
Site/soil conditions match soil evaluation: X Notes:

System Description:
Aerobic with spray: X Aerobic with drip emitters: X Low Pressure Dosing: X Absorptive drainfield: X
Evapotranspirative (ET) system: X Gravel-less drainfield piping: X Leaching chambers: X
Soil substitution drainfield: X other:

Tank Inspection:

Is timer required/provided?: X Chlorination required/provided?: X

Notes: Tank off 2" back to house. Reset timer

Maintenance Tag for Aerobic: ( )

System installation:
Pipe check/house to tank: X Clean-out at structure/every 50 ft./@90's X Pipe check/tank to drainfield: X

(1/8"-ft., SDR 26 or Sch. 40)
Trenches/Excavations: X Width/Depth: 4'6" Trenches/Excavations Level: X Pipe & Gravel: X
Slope within drainfield/spray area: X Leaching Chambers: X GeoTex: X
Spray irrigation purple pipe: X Spray irrigation area checked: X

Notes: Last trench cut off 2" under 84" depth.

Separation Distances
Drainage Easements/Sharp Slopes: If over Recharge Zone check for recharge features: X Are there water lines crossing tightlines/or within 10 feet of system?: X Have they been properly sleeved: X Are there sewer lines crossing under driveways, sidewalks, or within 5 ft. of surface improvements: X Have the sewer lines been properly sleeved?: X

Notes:

Final Inspection:
Tank(s) Backfilled: X System Backfilled: X ET Systems Class II backfill & vegetative cover for transpiration in place: X
Surface application area properly landscaped/vegetation acceptable:

Notes:

Size of Installed Drainfield/Spray Area:

X Check here to confirm that service agreement has been received, entered and activated in CASST.
Permit of Authorization to Construct an On-Site Sewage Facility
Permit Valid For One Year From Date Issued

Permit Number: 105368
Issued This Date: 01/04/2017
This permit is hereby given to: Strad, LLC.

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

559 E CLARK ST
CANYON LAKE, TX 78133
Subdivision: Canyon Lake Mobile Home Estates North
Unit: 2
Lot: 45
Block:
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Septic Tank
Leaching Chambers

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.
COUNTY OF COMAL COUNTY ENGINEER'S OFFICE

OSSF DEVELOPMENT APPLICATION CHECKLIST

RECEIVED
DEC 29 2016
COUNTY ENGINEER

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

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

COMPLETE APPLICATION
Check No._______ Receipt No._______

INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)
**COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH**

**APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE**

**COUNTY ENGINEER**

<table>
<thead>
<tr>
<th>Date</th>
<th>December 20, 2016</th>
<th>Permit #</th>
<th>105368</th>
</tr>
</thead>
</table>

**Owner Name** | STRAD, LLC          | Agent Name | GREG W. JOHNSON, P.E. |
|--------------|---------------------|------------|-----------------------|

**Mailing Address** | 3400 WELLBORN STREET, SUITE 409 | Agent Address | 170 HOLLOW OAK |
|-------------------|----------------------------------|---------------|--------------|

**City, State, Zip** | DALLAS, TX 75219 | City, State, Zip | NEW BRAUNFELS, TX 78132 |
|---------------------|-------------------|------------------|------------------------|

**Phone #** | (210) 504-6119 | Phone # | (830) 965-2778 |
|------------|-----------------|---------|----------------|

**Email** | rex@theblackbunsgroup.com | Email | gregjohnsontpe@yahoo.com |

All correspondence should be sent to: [ ] Owner  [ ] Agent  [ ] Both

**Subdivision Name** | CANYON LAKE MOBILE HOME ESTATES | Unit/Phase/Section | 2 |
|---------------------|----------------------------------|-------------------|----|

**Acreage/Legal**

<table>
<thead>
<tr>
<th>Street Name/Address</th>
<th>559 E. CLARK STREET</th>
<th>City</th>
<th>CANYON LAKE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Zip</th>
<th>78133</th>
</tr>
</thead>
</table>

**Type of Development:**

[ ] Single Family Residential

**Type of Construction (House, Mobile, RV, Etc.)** | MOBILE HOME

<table>
<thead>
<tr>
<th>Number of Bedrooms</th>
<th>3</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Indicate Sq Ft of Living Area</th>
<th>1320</th>
</tr>
</thead>
</table>

[ ] 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**

<table>
<thead>
<tr>
<th>Offices, Factories, Churches, Schools, Parks, Etc. - Indicate Number Of Occupants</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Restaurants, Lounges, Theaters - Indicate Number Of Seats</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Hotel, Motel, Hospital, Nursing Home - Indicate Number Of Beds</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Travel Trailer/RV Parks - Indicate Number of Spaces</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous</th>
<th></th>
</tr>
</thead>
</table>

**Estimated Cost of Construction:** $ 75,000 (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

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 also understand that a permit of authorization to construct will not be issued until the Flooding Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.

**Signature of Owner**

**Date**

198 David Jones Dr., New Braunfels, Texas 78132-3760 (830) 508-2090 Fax (830) 508-2076

Revised January 2016
**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  GREG W. JOHNSON, P.E.

System Description  PROPRIETARY: SEPTIC TANK AND LEACHING CHAMBERS

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

<table>
<thead>
<tr>
<th>Tank Size(s) (Gallons)</th>
<th>Absorption/Application Area (Sq Ft)</th>
</tr>
</thead>
<tbody>
<tr>
<td>750 GAL. DUAL COMP. SEPTIC TANK</td>
<td>900</td>
</tr>
</tbody>
</table>

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)

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.)

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

I certify that the information provided above is true and correct to the best of my knowledge.

March 6, 2015

195 David Jonas Dr., New Braunfels, Texas 78132-3760 (830) 608-2090 Fax (830) 608-2078

Page 2 of 2

Rev ised December 2013
Date Soil Survey Performed: March 05, 2015

Site Location: CANYON LAKE MOBILE HOME ESTATES NORTH, UNIT 2, LOT 45

Proposed Excavation Depth: 18" to 36"

Requirements:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil boring or dug pits must be shown on the site drawing.

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

Describe each soil horizon and identify any restrictive features on the form. Indicate depths where features appear.

<table>
<thead>
<tr>
<th>SOIL BORING NUMBER</th>
<th>1</th>
<th>Depth (Feet)</th>
<th>Texture Class</th>
<th>Soil Texture</th>
<th>Gravel Analysis</th>
<th>Drainage (Mottles/Water Table)</th>
<th>Restrictive Horizon</th>
<th>Observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>10&quot;</td>
<td>III</td>
<td>CLAY LOAM</td>
<td></td>
<td>N/A</td>
<td>NONE OBSERVED</td>
<td>NONE OBSERVED</td>
<td>TAN CALICHE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SOIL BORING NUMBER</th>
<th>2</th>
<th>Depth (Feet)</th>
<th>Texture Class</th>
<th>Soil Texture</th>
<th>Gravel Analysis</th>
<th>Drainage (Mottles/Water Table)</th>
<th>Restrictive Horizon</th>
<th>Observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>SAME</td>
<td></td>
<td></td>
<td></td>
<td>AS</td>
<td>ABOVE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

Date: 03/05/2015
OSSF SOIL EVALUATION REPORT INFORMATION

Date: March 06, 2015

Applicant Information:
Name: STRAD, LLC
Address: ___________________________
City: ___________________________ State: ___________________________
Zip Code: ____________ Phone: (512) 757-0095

Site Evaluator Information:
Name: Greg W. Johnson, P.E., R.S., S.E. 11561
Address: 170 Hollow Oak
City: New Braunfels State: Texas
Zip Code: 78132 Phone & Fax: (830)905-2778

Property Location:
Lot 45 Unit 2 Blk Subd. CANYON LAKE MOBILE HOME ESTATES NORTH
Street Address: 559 E. CLARK STREET
City: CANYON LAKE Zip Code: 78133
Additional Info.: ___________________________

Installer Information:
Name: ___________________________
Company: ___________________________
Address: ___________________________ State: ___________________________
City: ___________________________ State: ___________________________
Zip Code: ____________ Phone: ___________________________

Topography: Slope within proposed disposal area: 4 %
Presence of 100 yr. Flood Zone: YES NO X
Existing or proposed water well in nearby area: YES NO X
Presence of adjacent ponds, streams, water impoundments: YES NO X
Presence of upper water shed: YES NO X
Organized sewage service available to lot: YES NO X

Design Calculations for Leaching Chambers:
Commercial
Q = ___________ GPD

Residential Water conserving fixtures to be utilized? Yes X No
Number of Bedrooms the septic system is sized for: 3 Total sq. ft. living area 1320
Q gal/day = (Bedrooms +1) * 75 GPD
Q = (3 +1) * 75 - (20%) = 240

A = Q/Ra = 240 / 0.20 = 1200 sq. ft.

Tank Size = (-3 * Q) = 750 Gal. Dual Comp.

Excavation Length & Width
L = 0.75A/(W+2) (<3' Wide) = 900 / 5' = 180' of 3' WIDE 36 - 5' PANELS


GREG W. JOHNSON, P.E. 67587 - F#2585

DATE 03/06/2015
INSTALL 900sf OF FIELD USING 36 5'-0" LEACHING CHAMBER PANELS

*USE TWO WAY CLEAN OUT
**USE SCH-40 OR SDR-26 TO TANK

X= TEST HOLE

EAST CLARK STREET

LOT 45

3 BDRM RES. 1320sf

750 GAL. DUAL COMP SEPTIC TANK

SLEEVE WATER LINE WITH 2" SCH-40 PVC PIPE WHEN ENTERING CLOSER THAN 10' FROM SEPTIC SYSTEM OR SPRAY AREA.

STATE OF TEXAS

GREG W. JOHNSON
PROFESSIONAL ENGINEER

STRAD, LLC.

559 E. CLARK STREET

LEGAL DESC:
CANYON LAKE MOBILE HOME ESTATES NORTH

SCALE 1"=30' 3/6/2015 1/23/2017
SANITARY TEE FITTING

ONE HALF TO TWO THIRDS OF TOTAL TANK VOLUME

TYPICAL TWO COMPARTMENT SEPTIC TANK

2" - 4" LOAM CAP FREE OF ROCK AND CLAY

Type 2 or 3 Backfill

HANCOR ARC 36 LEACHING CHAMBER DETAIL

HANCOR ARC 36 PVC TO TANK

SEPTIC TANK

TWO WAY CLEANOUT SCH-40 PVC TO TANK
APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE

Date ______ March 6, 2015 ______

Owner Name: MICHAEL KULPAK
Mailing Address: P.O. Box 3147
City, State, Zip: CANYON LAKE, TX 78133
Phone #: (512) 757-0095
Email: gregjohnsonpe@yahoo.com

Agent Name: GREG W. JOHNSON, P.E.
Agent Address: 170 HOLLOW OAK
City, State, Zip: NEW BRAUNFELS, TEXAS 78132
Phone #: (830) 905-2778
Email: gregjohnsonpe@yahoo.com

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

Subdivision Name: CANYON LAKE MONTLHI HOME ESTATES NORTH
Unit/Phase/Section: 2 Lot 45 Block

Acreage/Legal: Street Name/Address: 559 E. CLARK STREET City: CANYON LAKE Zip: 78133

Type of Development:
☑ Single Family Residential
☐ Commercial or Institutional Facility

Type of Construction (House, Mobile, RV, Etc.) MOBILE HOME
Number of Bedrooms: 3
Indicate Sq Ft of Living Area: 1100

Source of Water: ☑ Public ☐ Private Well ☐ Other

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

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 also understand that a permit of authorization to construct will not be issued until the floodplain administrator has approved and released the development permit for this property.

Signature of Owner: __________________________ Date: March 6, 2015

195 David Jonas Dr., New Braunfels, Texas 78132-3760 (830) 608-2090 Fax (830) 608-2078 Revised December 2013
INSTALL 900sf OF FIELD USING 36 5'-0" LEACHING CHAMBER PANELS

*USE TWO WAY CLEAN OUT
**USE SCH-40 OR SDR-26 TO TANK

X = TEST HOLE

EAST CLARK STREET

750 GAL. DUAL COMP. SEPTIC TANK

SLEEVE WATER LINE WITH 2"-SCH-40 PVC PIPE WHEN ENTERING CLOSER THAN 10' FROM SEPTIC SYSTEM OR SPRAY AREA.

LOT 45

3 BDRM RES.

1106sf

RECEIVED
MAR 16 2015
COUNTY ENGINEER
INSTALL 900sf OF FIELD USING 36 5'-0" LEACHING CHAMBER PANELS

*USE TWO WAY CLEAN OUT
**USE SCH-40 OR SDR-26 TO TANK
X = TEST HOLE

EAST CLARK STREET

3 BDRM RES. 1320sf

750 GAL. DUAL COMP SEPTIC TANK

SLEEVE WATER LINE WITH 2" SCH-40 PVC PIPE WHEN ENTERING CLOSER THAN 10' FROM SEPTIC SYSTEM OR SPRAY AREA.

COUNTY ENGINEER

RECEIVED
DEC 29 2016
GENERAL WARRANTY DEED

PROVIDENCE TITLE COMPANY
GF NO. 132000632

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.

Date: November __, 2016

Grantor: Michael Kulcak, A Single Man

Grantor's Address (Including County):

P.O. Box 3147
Canyon Lake, TX 78133
Comal County

Grantee: STRAD, LLC

Grantee's Address (Including County):

3400 Welborn Street Suite 409
Dallas, TX 75219
Dallas County

Consideration: TEN AND NO/100---($10.00)---DOLLARS;
and other good and valuable considerations in hand paid by the GRANTEE herein named, the receipt of which is hereby acknowledged;

Property (Including any Improvements):

Lot 45, of Canyon Lake Mobile Home Estates North, Unit No. 2, a subdivision in Comal County, Texas, according to the plat recorded in Volume 4, Pages 86-88, of the Map and Plat Records of Comal County, Texas.
Reservations from Conveyance:

None.

Exceptions to Conveyance and Warranty:

Liens described as part of the Consideration and any other liens described in this deed 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 current year, which Grantor 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.

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

When the context requires, singular nouns and pronouns include the plural.
MADE EFFECTIVE THE DATE FIRST HEREIN ABOVE SPECIFIED.

Michael Kulcak

ACKNOWLEDGMENT

State of Texas

County of ___

Before me, the undersigned, on this day personally appeared Michael Kulcak known to me (or proved to me on the oath of ______________ or through ______________) to be the person(s) whose name(s) is/are subscribed to the foregoing instrument and acknowledged to me that he/she/they executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this ___ day of November, 2016.

JOLENE R. SUTTON
ID # 1633361
My Comm. Exp. April 07, 2017

Notary Public State of Texas

AFTER RECORDING RETURN TO:
STRAD, LLC
3400 Welborn Street Suite 409
Dallas, TX 75219

PREPARED IN THE LAW OFFICE OF:
Ramsey and Foster, PC
5001 Hwy 287 S. #105
Arlington, TX 76017

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
11/14/2016 12:52:23 PM
CHRISTY 3 Pages(s)
201606043273

Bobbie Koepp