

## Comal County

OFFICE OF COMAL COUNTY ENGINEER

### License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: **05/31/2019** Permit Number: **107981**

Location Description: **416 STARS AND STRIPES  
FISCHER, TX 78623**

Subdivision: **Summit Estates at Fischer**  
Unit: **1**  
Lot: **73**  
Block:  
Acreage:

Type of System: **Aerobic  
Drip Irrigation**

Issued to: **James & Alice Kaye**

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

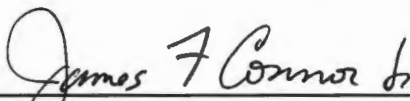
may require a new permit. **It is the responsibility of the owner to apply for a new permit, if applicable.**

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.

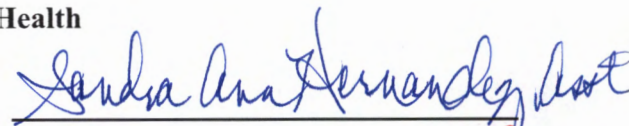
Licensing Authority

**Comal County Environmental Health**



ENVIRONMENTAL HEALTH INSPECTOR

OS0032485



ENVIRONMENTAL HEALTH COORDINATOR

05 05 19

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Myr Buyle OSSF Installer #: 05 0001569  
 1st Inspection Date: 5-24-19 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: 5-31-19 final  
 Inspector Name: Connor Inspector Name: \_\_\_\_\_ Inspector Name: Connor  
 Permit#: 107981 Address: 416 Stars: Strip Summit @ Fischer

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)				

*tank set level no leaks operational cover all covered 5-31-19 JC*

**Comal County Environmental Health  
OSSF Inspection Sheet**

*Final*

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)	<i>Covered</i>			/
42	APPLICATION AREA Area Installed	/		<i>Cover</i>	/		
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Greg Boyce OSSF Installer #: 05 0001569

1st Inspection Date: 5-24-19 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: \_\_\_\_\_

Inspector Name: Comer Inspector Name: \_\_\_\_\_ Inspector Name: \_\_\_\_\_

Permit#: 107981 Address: 416 Stars: Strip Summit @ Fischer

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)				

*tank set level no leaks operational cover all*

**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	/		<i>Agua Aire AA 500 Buchannon</i>	/		
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(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)		/		
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		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)				

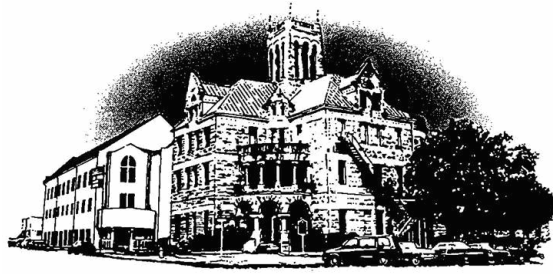
**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	<p>EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling</p> <p>EFFLUENT DISPOSAL SYSTEM Topographic Slopes &lt; 2.0%</p> <p>EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less &amp; an additional 400 ft. for each additional bedroom )</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. &amp; Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) &amp; Pipe Holes ( 3/16 - 1/4" dia. Hole Size ) 5 ft. Apart</p>		<p>285.33(b)(3)(A)</p> <p>285.33(b)(3)(A)</p> <p>285.33(b)(3)(B)</p> <p>285.91(13)</p> <p>285.33(b)(3)(D)</p> <p>285.33(b)(3)(F)</p>				
32							
33	AEROBIC TREATMENT UNIT is Aerobic Unit Installed According to Approved Guidelines.	/	285.32(c)(1)		/		
34	<p>AEROBIC TREATMENT UNIT Inspection/Clean Out Port &amp; Risers Provided</p> <p>AEROBIC TREATMENT UNIT Secondary restraint system provided</p> <p>AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank</p> <p>AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions</p>	<p>/</p> <p>✓</p> <p>/</p> <p>✓</p>			<p>/</p> <p>/</p> <p>/</p> <p>/</p>		
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.	/			/		
36	<p>PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials &amp; construction</p> <p>PUMP TANK Sampling Port Provided in the Treated Effluent Line</p> <p>PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required</p> <p>PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump</p>						
37	<p>PUMP TANK Inspection/Clean Out Port &amp; Risers Provided</p> <p>PUMP TANK Secondary restraint system provided</p> <p>PUMP TANK Riser permanently fastened to lid or cast into tank</p> <p>PUMP TANK Riser cap protected against unauthorized intrusions</p>						
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**

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42	APPLICATION AREA Area Installed	/		<i>Cover</i>	/		
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						





# 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: 107981  
Issued This Date: 09/19/2018  
This permit is hereby given to: James & Alice Kaye

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

416 STARS AND STRIPES  
FISCHER, TX 78623

Subdivision: Summit Estates at Fischer  
Unit: 1  
Lot: 73  
Block:  
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic  
Drip 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.

## TCEQ Search Licensing or Registration Information

### License Detail

To report a change of address, phone number, or email address, please fill out the form located at <http://www.tceq.texas.gov/licensing/forms/contactupdate>.

**CN:** CN601846769  
**Name:** BOYCE, GREG W  
**Address:** 207 GRANDE ST  
**City:** DRIFTWOOD  
**State:** TX  
**ZIP:** 78619-9702  
**County:** HAYS  
**Work Phone:** 512-858-2447

### License(s)

There were 2 licenses found.

Program	License Type and Level	License Number	Last Issued Date	Exp. Date	License Status	CE Hours
OSSFOL	OSSF INSTALLER II	OS0001569	09/04/2017	08/31/2020	CURRENT	0
OSSFOL	OSSF INSTALLER I	OS0011824	03/13/2000	08/10/2000	EXPIRED	N/A

**Note:** The number of CE hours needed in order to renew a license is based on the term (length) of each license. Please go to the program page for the license you hold to determine the number of CE hours needed and to view the latest information and renewal requirements for your license.

### Application(s) within the Last 2 Years

There were 1 applications found.

Program	Type and Level	App. Type	App. Status	App. Review Date	App. Expiration Date	Deficiency Letter Date	Total Hours
OSSFOL	OSSF INSTALLER II	RENEWAL	LICISSUED	09/04/2017	09/30/2017	No Deficiency	173

### Course(s)

There were 24 courses found. **Note:** You may see the same course listed multiple times. This occurs because the course counted towards multiple license programs.

Program	Course Title	Course Code	Hours	Date	Provider
LIOL	TRBLSHT & REPAIR ATU, CONTROLS, SPRAY OR DRIP	904	8.0	08/25/2017	ETS
LIOL	COMPETITIVE EDGE IN BUS 4 FINANCIAL SUC(CLASSROOM)	958	8.0	06/25/2014	ETS
LIOL	TRBLSHT & REPAIR ATU, CONTROLS, SPRAY OR DRIP	904	8.0	06/14/2011	ETS
OSSFOL	TRBLSHT & REPAIR ATU, CONTROLS, SPRAY OR DRIP	904	8.0	08/25/2017	ETS
OSSFOL	INSTALL, O&M OF SUBSURFACE DRIP DISPOSAL SYST(ETS)	1134	8.0	06/28/2017	ETS
OSSFOL	ON-SITE SEWAGE FACILITIES REFRESHER	850	8.0	04/19/2017	PER
OSSFOL	(ONLINE) SOIL & SITE BASICS (TXAGRILIFESEA GRANT)	923	8.0	08/06/2014	TCES-SGC
OSSFOL	COMPETITIVE EDGE IN BUS 4 FINANCIAL SUC(CLASSROOM)	958	8.0	06/25/2014	ETS
OSSFOL	ON-SITE SEWAGE FACILITIES REFRESHER	850	8.0	04/05/2014	PER
OSSFOL	(ONLINE) SOIL & SITE BASICS (TXAGRILIFESEA GRANT)	923	8.0	08/26/2011	TCES-SGC
OSSFOL	TRBLSHT & REPAIR ATU, CONTROLS, SPRAY OR DRIP	904	8.0	06/14/2011	ETS
OSSFOL	INSTALL, O&M OF SUBSURFACE DRIP DISPOSAL SYST(ETS)	1134	8.0	06/08/2011	ETS
OSSFOL	ON-SITE SEWAGE FACILITIES REFRESHER	850	8.0	08/08/2008	PER
OSSFOL	(ONLINE) SOIL & SITE BASICS (TXAGRILIFESEA GRANT)	923	8.0	07/30/2008	TCES-SGC
OSSFOL	(CRSPD) COMPETIT EDGE IN BUS 4 FINANC SUCC (OSSF)	229	8.0	08/31/2006	ETS
OSSFOL	(ONLINE) SOIL & SITE BASICS (TXAGRILIFESEA GRANT)	923	8.0	08/31/2006	TCES-SGC
OSSFOL	(ONLINE) SOIL & SITE BASICS (TXAGRILIFESEA GRANT)	923	8.0	08/31/2004	TCES-SGC
OSSFOL	INSTALL, O&M OF SUBSURFACE DRIP DISPOSAL SYST(ETS)	1134	8.0	06/19/2004	ETS
OSSFOL	ON-SITE SEWAGE FACILITIES REFRESHER	850	8.0	07/29/2002	PER
OSSFOL	EVALUATING SOILS FOR ON-SITE SEWAGE FACILITIES	849	8.0	08/10/2001	ENGITECH
OSSFOL	ON-SITE INSTALLER II	418	21.0	07/13/2000	TEEX ITSI
OSSFOL	OSSF BASICS, RULES AND PERMITTING REQUIREMENTS	790	2.0	02/12/2000	ETS
OSSFOL	UNDERSTANDING SOILS FOR TRTMT & DISPOSAL OF WW	791	6.0	02/12/2000	ETS

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

RECEIVED

AUG 15 2018

COUNTY ENGINEER

Items Date Received	Initials

107981
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
- Portion of Proposed OSSF Located in the United States Army Corps of Engineers (USACE) Flowage Easement
  - USACE Consent for proposed OSSF

I affirm that I have provided all information required for my OSSF Development Application and that this application constitutes a completed OSSF Development Application.

James A. Kaye  
 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**

Date \_\_\_\_\_ Permit # 10798

Owner Name JAMES A & ALICE E. KAYE Agent Name \_\_\_\_\_  
 Mailing Address 4 OYERBROOK CT. Agent Address \_\_\_\_\_ RECEIVED  
 City, State, Zip WIMBERLEY, TX 78676 City, State, Zip \_\_\_\_\_ SEP 05 2018  
 Phone # 512-560-0417 Phone # \_\_\_\_\_  
 Email JIM KAYE 100 @ YAHOO.COM Email \_\_\_\_\_ COUNTY ENGINEER

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

Subdivision Name <sup>THE</sup> SUMMIT ESTATES AT FISCHER Unit 1 Lot 73 Block \_\_\_\_\_  
 Acreage/Legal ONE ACRE  
 Street Name/Address 416 STARS & STRIPES City FISCHER Zip 78623

**Type of Development:**

Single Family Residential  
 Type of Construction (House, Mobile, RV, Etc.) HOUSE  
 Number of Bedrooms 3  
 Indicate Sq Ft of Living Area 2065

~~RECEIVED  
 AUG 15 2018  
 COUNTY ENGINEER~~

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 \_\_\_\_\_

Estimated Cost of Construction: \$ 250,000 (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.

James A. Kaye \_\_\_\_\_ Date 8/14/18  
 Signature of Owner

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

Highland Lakes Engineering@yahoo.com  
 Box 1164  
 Kingsland, TX 78639  
 TX. REG. #F8209

Planning Materials & Site Evaluation as Required Completed By Brad Shaw

System Description Aerobic Drip

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

Tank Size(s) (Gallons) 500g ATU Absorption/Application Area (Sq Ft) 1200sf

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

(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: \_\_\_\_\_

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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 [Signature]

HIGHLAND LAKES ENGINEERING @ YAHOO.COM Date 8/13/2018

1/c



201806032126 08/15/2018 10:40:08 AM 1/1

THE COUNTY OF COMAL  
STATE OF TEXAS

AFFIDAVIT

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.

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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 pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

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):

Approximately certain tract or parcel of land lying and being situated in Comal County, Texas, known and designated as Lot 73, THE SUMMIT ESTATES AT FISCHER, TEXAS, UNIT 1, a subdivision, according to map or plat recorded in Volume 14, Page(s) 261-268, of the Map and Plat Records of Comal County, Texas.

The property is owned by (insert owner's full name): JAMES A. KAYE  
& ALICE E. KAYE

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.

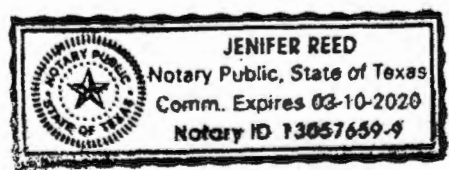
WITNESS BY HAND(S) ON THIS 14 DAY OF August, 2018

James A. Kaye  
Alice E. Kaye  
Owner(s) signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 14 DAY OF August, 2018

Jenifer Reed  
Notary Public, State of Texas

Notary's Printed Name: Jenifer Reed  
My Commission Expires: 03-10-2020



Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
08/15/2018 10:40:08 AM  
JESSICA 1 Page(s)  
201806032126

Bobbie Koepf



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COUNTY ENGINEER

Legend Enterprises, Inc.

<https://www.asklegend.com/>

PO Box 310

Marion, TX 78124

210-340-8700

[jhollis.legend@gmail.com](mailto:jhollis.legend@gmail.com)

SERVICE FORM



**Service Form**

**Preventive  
Maintenance (PM)  
Contract**

**Aerobic On-Site Sewage Facility (OSSF) System  
OSSF License #OS3502  
Maintenance Provider License #MP0000838**

**HOME OWNER /  
PROPERTY OWNER  
NAME**

Jim Kaye

**Address**

416 Stars & Stripes  
Fischer, Texas

**Zip Code**

78623

**County**

Comal

**Permit Number**

**Effective Date**

to be effective date License to Operate Issued

**Length of Contract**

2 Years

**Phone Number**

512-722-3516

**Email Address**

[jimkaye100@yahoo.com](mailto:jimkaye100@yahoo.com)

**Terms of Service**

This contract will provide for all required maintenance inspections and record keeping requirements of your Aerobic Treatment Unit (ATU). This policy will cover the following:

1. 3 inspections per year scheduled at intervals of every 4 months. Inspections will include observations of all components required to be checked and make minor adjustments as needed.
2. If any component is found to be inoperative which cannot be corrected by minor adjustments at the time of the service visit, you will be notified immediately in writing of the condition and given an estimated price for correction. The cost of such repairs and/or servicing of components of the system are not included in the PM Program.
3. The ATU owner is responsible for maintaining a chlorine residual of at least 1 mg/L in the treatment system. This can be accomplished by using liquid or tablet chlorine. Tablets must be those designed for wastewater use. **DO NOT USE SWIMMING POOL TABLETS.** Upon inspection, if the system needs liquid chlorine or tablets, the owner will be notified, and it will be reflected on the maintenance inspection report. If the customer fails in their responsibility to properly monitor and apply the chlorine, it could result in violation of statutes, requiring appropriate action to be taken.



**WARNINGS**

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A. The proper operation of this or any other home sewage system depends upon proper organic loading and the life of the microorganisms inside the system. Legend Enterprises, Inc., is not responsible for the in-field operation of the a system, other than the mechanical and structural workings of the plant itself. We cannot control the amount of harsh chemicals or other harmful substances that may be discharged into the system by occupants of a household. Visit the Texas Commission on Environmental Quality (teq.com) website for information regarding use of inappropriate items for aerobic systems.

B. Hydraulic overloading (flows in excess of design flow) may cause the sewage treatment system not to perform to the fullest capabilities.

C. Ants and bees have been shown to be destructive to the air pump and control panels. Regular care should be taken to prevent infestation of pests near the system. Damage or destruction caused by pests of this nature are not covered under the manufacturer's warranty.

D. Your State or Local Health Department may require other pieces of equipment to function separately or in conjunction with equipment manufactured by Legend Enterprises, Inc. Legend Enterprises, Inc., is not responsible for the mechanical or electrical safety of equipment it does not manufacture or supply with its Aerobic Treatment Unit. Particular care should be used in evaluating the electrical or mechanical safety of equipment manufactured by others. This may include, but not be limited to, electrical control panels or air pumps.

4. Any additional visits, inspections or sample collections required by specific Municipalities, Water/River Authorities, County Agencies, TCEQ, or any other regulatory agency in your jurisdiction will not be covered by this policy, and is not included in the PM Program.

5. The operation, maintenance and record keeping must be in compliance with HB2510. Upon request, we will provide you with the information contained in that bill, which relates to your ATU/OSSF. This provision requires unhampered access to the system for required inspections

**EMERGENCY SERVICE RESPONSE**

Upon notification that a system has gone in to alarm, Legend Plumbing & Septic will attempt to ascertain the severity of the alarm, and schedule service within 48 hours of notification to resolve the issue.

**THIS IS A SERVICE CONTRACT**

The service contract will automatically renew 1 year on Anniversary date if on recurring billing program, unless notified in writing 30 days prior to the renewal date. If length of contract is for One (1) or Two (2) years, you will be notified in writing 30 days prior to the expiration date for renewal. According to State Law, all owners of Aerobic Treatment Units must maintain a factory authorized service provider for the lifetime of the system. The manufacturer's ATU manual must be strictly followed or warranties are subject to invalidation. Pumping of any component of this system, for any reason, is not covered by this policy.

**HOME OWNER SIGNATURE**  
**MAINTENANCE PROVIDER SIGNATURE**

*James A. Kay*  
*Bret A. Bowman Pres*



# Soil and Site Evaluation Report

**SITE LOCATION (LOCAL DESCRIPTION & ROAD 9-1-1 ADDRESS)**

James Kaye 416 Stars and Stripes, Fischer, Tx Lot 73 Comal Co.

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**ON-SITE SEWAGE TREATMENT SYSTEM SITE EVALUATION REPORT FORM**

**Requirements:**

At least two profile holes must be dug at opposite ends of the proposed disposal area. Location of the profile holes must be shown on the design and they must be flagged at the site if necessary. For all OSSF types, soil must be evaluated to the depth of 5 feet. A licensed site evaluator must complete and describe EACH SOIL HORIZON and IDENTIFY ANY RESTRICTIVE FEATURES on this form. Indicate DEPTHS where features appear.

Estimation Number 1

Depth (feet & inches)	Soil Texture Classification	Gravel Analysis	Structure	Groundwater (moisture/water table)	Restrictive Horizons
0 - Ground Surface					
1 clay loam	III	10%	blocky	no	w/ cobble rock
2	III		"	no	no
3 clay loam	III	5%			
4	30" total depth				
5					

Estimation Number 2

Depth (feet & inches)	Soil Texture Classification	Gravel Analysis	Structure	Groundwater (moisture/water table)	Restrictive Horizons
0 - Ground Surface					
1 clay loam	III	10%	blocky	no	no
2			"	no	w/ cobble rock
3 clay loam	III	5%			no
4	30" total depth				
5					

Note: soil in both test holes based

PERCENTAGE OF SLOPE in OSSF DISPOSAL AREA 1%

**FEATURES OF SITE AREA**

- Four surface drainage on property under complex slope patterns YES \_\_\_\_\_ NO X
- Presence of floodplain (additional planning materials apply) YES \_\_\_\_\_ NO X
- Presence of adjacent ponds, streams, water impoundments YES \_\_\_\_\_ NO X
- Existing or proposed water well on site (15' setback) 100' SB YES \_\_\_\_\_ NO X
- Existing or proposed water well on adjacent property (15' setback) YES \_\_\_\_\_ NO X

IF YOU ANSWERED YES TO ANY OF THE ABOVE, ADDRESS THESE ISSUES WITHIN YOUR SITE PLAN AND/OR SPECIFICATIONS. Without the above information, there may be a delay in approval of your application.

\*\*\*I certify that the findings of this report are based on my field observations and are accurate to the best of my ability & knowledge, and in accordance with State of Texas and Tarrant County guidelines.\*\*\*

*Brady W. Shaw*  
Site Evaluator - Signature

PE #44268  
SE License No.

830-637-9584  
Phone

7/17/2018



APPENDIX G

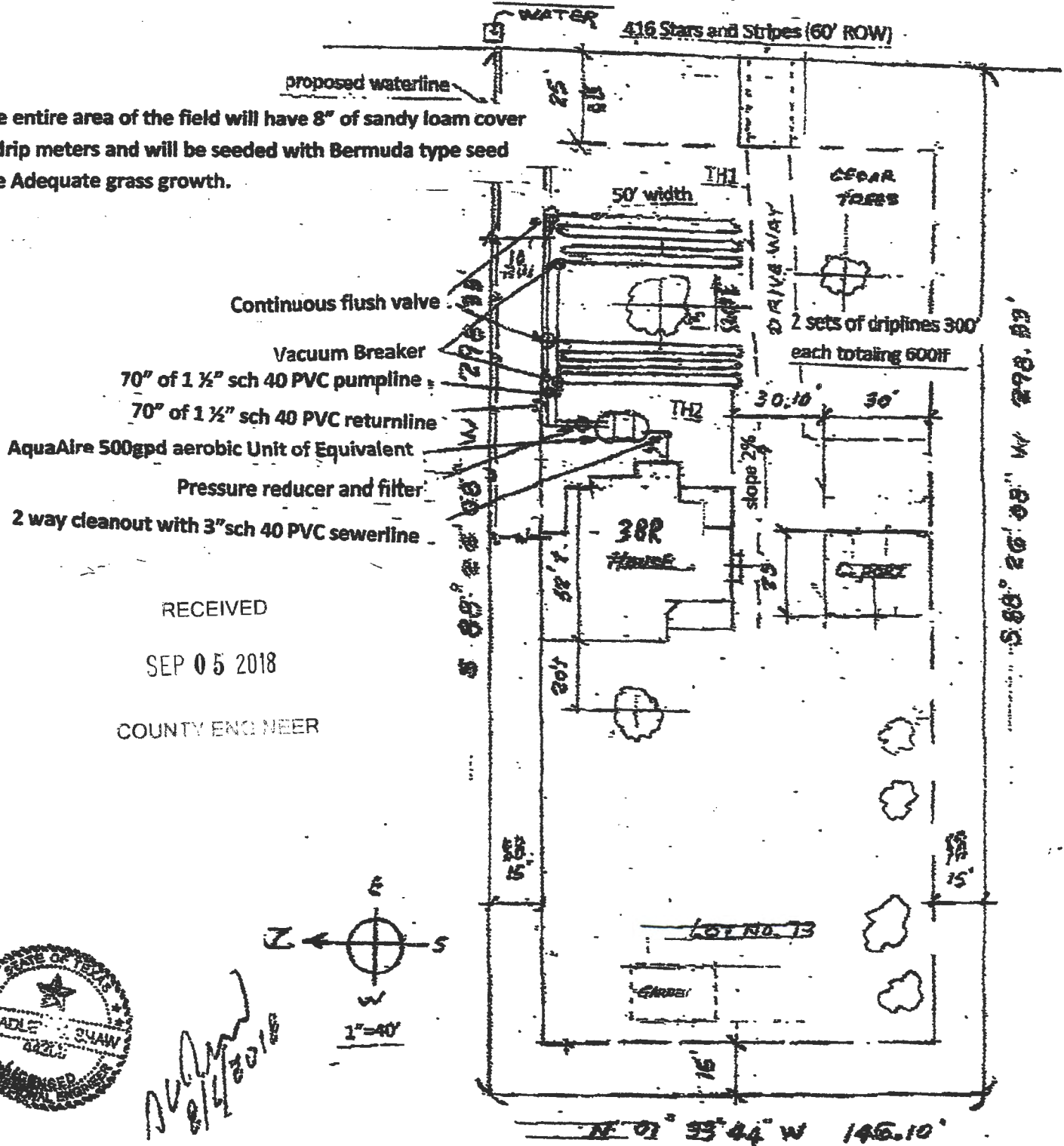
highlandlakes.engineering@yahoo.com  
Box 1164, Kingsland, TX 78639  
830-637-9584  
TX REG. F-9209

Proposed Aerobic Drip Septic system for: James Kaye Location: 416 Stars and Stripes, Fischer, TX  
 Summit Estates at Fischer Unit 1 of 73. This property is not located in the 100 year flood plain.

3 BR House= 300gpd/0.25=1200sf/4=300 emittersx2=600lf drip line. Use 2 zones @ 300' each

300 emitters x 0.6/60=3.0gpm + 2X1 flush=gpm Head=7'+40' PUMPLINE + 4.6 FILTER LOSS+58'  
 (25PCI)=74' head Use Starite dominator 20gpd pump (20gpm@100' head)

NOTE: The entire area of the field will have 8" of sandy loam cover over the drip meters and will be seeded with Bermuda type seed to achieve Adequate grass growth.



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*Handwritten signature and date: A. Swan 8/14/2018*

This septic system was designed according to the current CONSTRUCTION ORDINANCE and Guidelines of the  
 SEWERAGE FACILITIES of the TCEQ Chapter 285 and Guidelines of the  
 Local Designated Regulatory Authority. The aerial shown should be used as a guideline of navigation.  
 HIGHLAND LAKES ENGINEERS, BOX 1104, KINGLAND, TEXAS 78538 (915) 288-3659; BRAD SWAN, PE 347260

REVISED

9:57 am, Sep 19, 2018

107981



Handwritten notes: "N/A", "9/19/2018", "NETAKILM", "0.6 gph"

HighlandLakesEngineering@yahoo.com  
Box 1164  
Kingsland, TX 78639  
TX. REG. #F9209

Dripper Spacing		12"			18"			24"		
Dripper Flow Rate (GPH)		0.5	0.5	1.5	1.5	1.5	1.5	1.5	1.5	
Flushing Velocity (fps)		0.5	0.5	1.5	1.5	1.5	1.5	1.5	1.5	
Net Pressure (psi)	15	201/1461	171/1241	148/1119	275/217	235/191	194/164	337/263	289/233	241/201
	25	266/221	224/190	179/157	366/302	318/261	251/218	453/389	383/321	313/270
	35	316/269	262/229	218/187	437/370	385/316	295/260	543/455	455/391	389/324
	40	337/298	280/246	223/200	481/399	391/340	303/278	583/495	482/421	393/347
	45	358/318	296/261	235/212	497/427	413/362	331/296	619/527	517/449	415/369
Flow per 100' (GPM/GPH)		0.67/48	1.02/76	1.53/132	0.44/25.67	0.68/41	1.02/67	0.34/20	0.51/31	0.77/46

Additional flow of 1.2 GPM required per lateral to achieve 1.5 fps.  
Additional flow of 1.6 GPM required per lateral to achieve 2.0 fps.

MULTIPLE ZONE LAYOUT

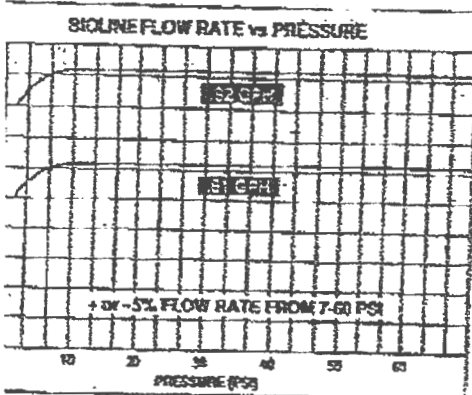
Multiple zone system with looping laterals:

- Used for a variety of reasons including when:
  - Single zone accumulated Bioline® lengths exceed recommended pump flow rate
  - Soils require additional resting time between dosings
  - There is a potential need for expansion of the system, which is common in commercial systems. Second or subsequent zone may be left out until needed
- Additional check valves are needed to isolate each zone on the flush line side. An additional air/vacuum relief valve should be installed before the check valve on each zone
- Zone changes are typically accomplished using an electric valve and controller
- Zone layouts may be parallel systems or may follow any of the scenarios discussed
- Zones should have similar flows
- Controller must be capable of operating a multi-zone system

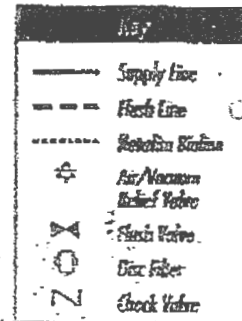
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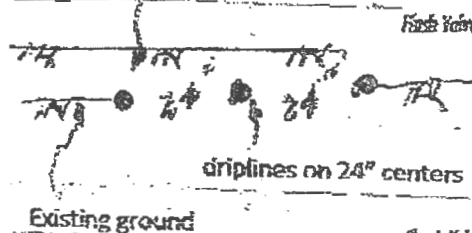
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0 and 7 psi, the Bioline® Dripper functions as a turbulent flow emitter, ensuring that the nominal design flow is not exceeded at system start-up.

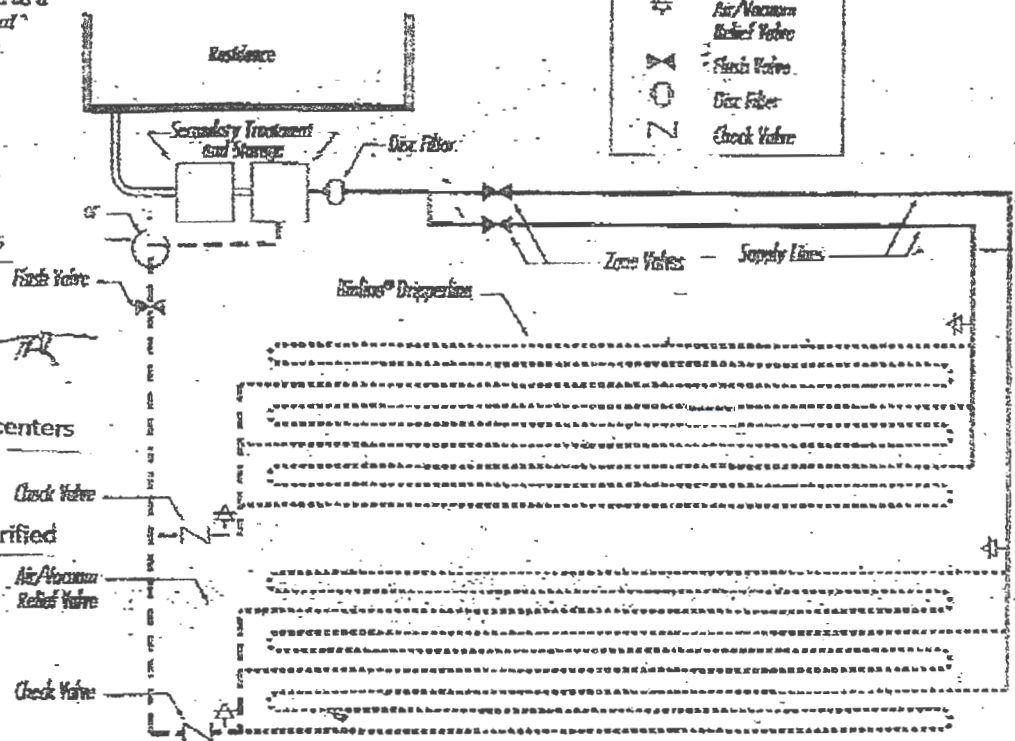


8" sandy loam cover over driplines



Note: ground surface should be scarified prior to placement of dripline.

Final surface should be seeded with winter rye/Bermuda mix



NOTICE TO SEPTIC OWNER

The septic system utilized by your house is approved and reviewed by the Regulating Authority prior to the revision or change. The septic system for your house is an aerobatic treatment type system that consists of a primary septic tank, an aerobatic unit, a pumping chamber and an irrigation type disposal area. THIS SYSTEM IS REQUIRED TO HAVE A MAINTENANCE CONTRACT WITH AN AUTHORIZED SERVICE COMPANY.

Primary Aerobic Unit receives sewage from the house and removes solids by aerobic action. It has an air pump that operates continuously and is provided continual maintenance from the maintenance provider. If problems arise, contact the provider, not Comal County.

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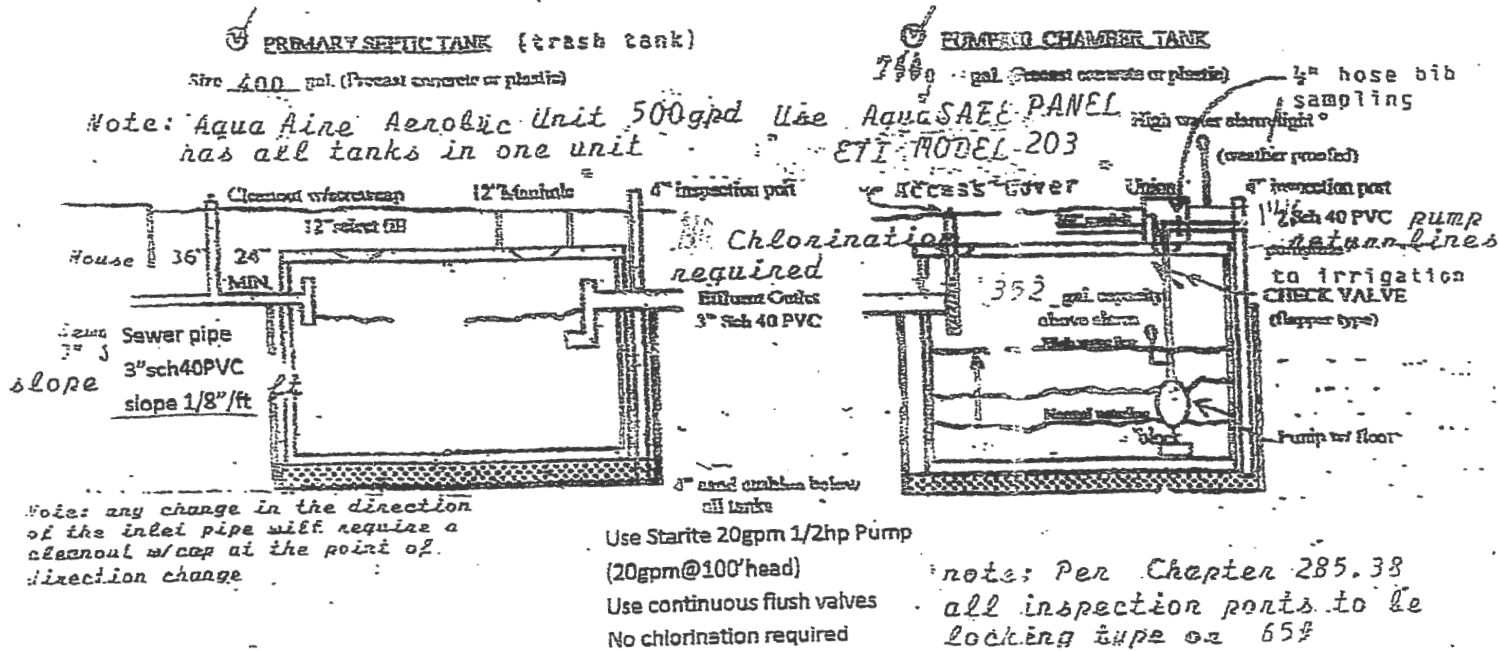
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**Pumping Chamber:** Receives effluent from the AEROBIC UNIT and sieves the effluent for distribution to the disposal field. This chamber has a submersible pump located within the tank. The pump usually lasts 3-5 years, depending on usage. When the pump needs repair, a high water alarm ( ) a light, ( ) a horn, ( ) a manual alarm activates, indicating the pump is not working. The home owner should cease the use of any of the plumbing facilities of the house until the pump is working properly. A repairman or serviceman should be contacted immediately. Do Not Contact Regulating Authority.

**Aerobic Treatment Unit:** A packaged unit consisting of an air compressor, pumps, filters and alarms in a tank. This unit should not be adjusted in anyway a licensed operator or maintenance contractor should be contacted if malfunctions occur.

**Disposal Field:** Consists of Drip Emitters preset for actual volume and pressure. No adjustment is necessary. The field should be covered with grass, shrubs or vegetation and maintained at all times.

NOTE: This septic system design was based on the use of water conservation plumbing fixtures and water conservation measures as recommended by the regulating authority. If the owner feels that water conservation cannot be achieved, it is recommended that the septic field size be increased to allow for increased water usage.



Separately fused circuits should be for the pump and alarm system. A spare pump should be kept readily available. Replacement should be done by the maintenance provider.

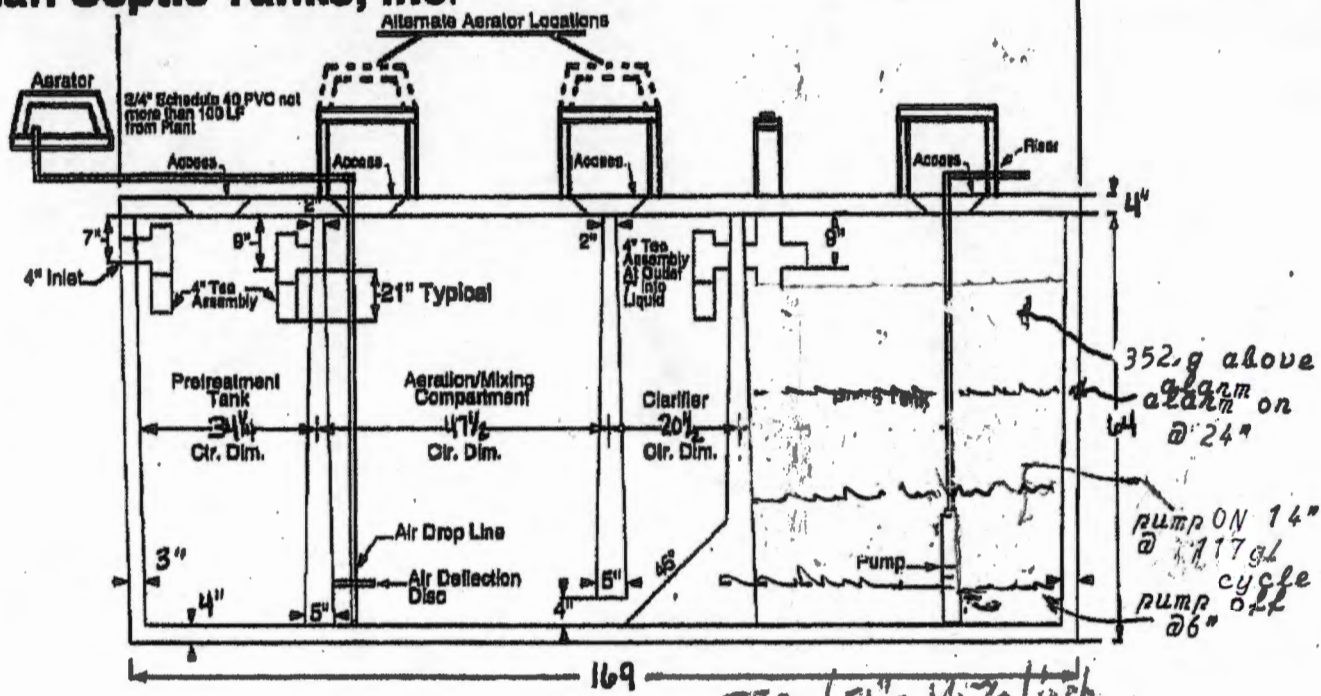
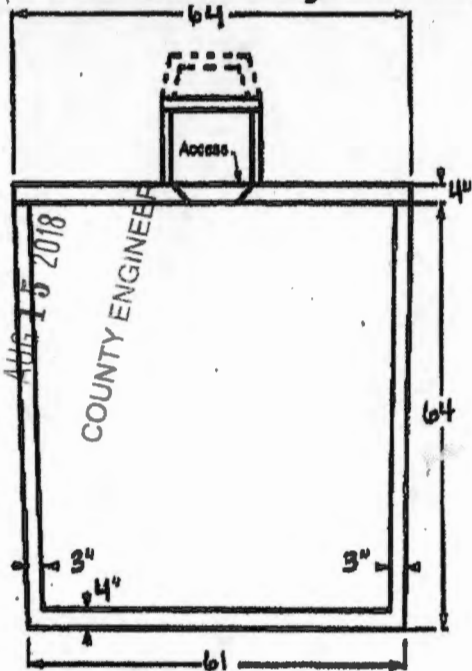
all wastewater piping bedded with 4" of Class I, II or III soils with less than 30% gravel and none of the gravel is allowed to exceed 1/2" in diameter.  
Notes: tanks to be backfilled with similar material

This site specific design has considered soil texture, topography, vegetative growth, and ground and runoff water conditions and in my opinion can be operated without creating threat or harm to any existing water supply, public health (pollution or nuisance)



# AquaAire Sewage Treatment System Model AA500-4075 One Piece with Lid Distributed by Buchanan Septic Tanks, Inc. \_\_\_\_\_ 172 \_\_\_\_\_

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$750\text{g} / 51" = 14.7\text{g}/\text{inch}$

Treatment Capacity	Total Volume	Aeration Volume	Clarifier Volume	Length	Width	Height	Inlet	Pre Tank Volume	Pump Tank Volume
500 GPD	748	560	183	172"	64"	68"	59"	400 Gal.	750 Gal.

### OPERATION

- The pump must be submerged at all times during normal operation. Do not run pump dry.
- Make sure that the float switches are set so that the pump stops before the pump runs dry or breaks suction. If necessary, adjust float switches to achieve this.
- The motor bearings are lubricated internally. No maintenance is required or possible on the pump.

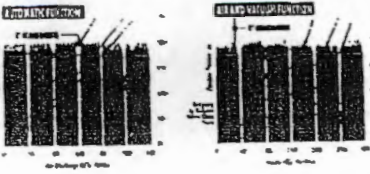
*Handwritten signature and date:*  
AUA  
8/15/2018

**Note:** Aqua Aire Concrete tank will not float if inundated with flood water. 18000# wt - 5590# (750g pumptank empty) = 12410# positive weight no buoyancy

**NETAFIM USA**

**Air Release and Vacuum Valves**

**Proven Design Provides More Air Release Capacity Than Other Valves of Similar Size**



- Applications**
- 1" and 2" Continuous Air/Vacuum Relief and Continuous Air Vent For release of large volumes of air pump and filtration stations, along mainline, at the end of mainlines
  - As high points in pipe networks
  - Every 1,000 feet along mainlines to curves and tees
  - At upstream side of manifolds
  - As combination use ideal for submain with 2" or 4" diameter
  - 1" Automatic Continuous Acting Air Vent For high spots where no accumulation
  - 1" & 2" Air Release and Vacuum Relief Valve Commonly used as downstream of valves, primarily in manifolds, to create vacuum caused by system draining
  - As sloping screen to prevent collapsing of pipes caused by vacuum when pipe networks drain

- Specifications**
- Maximum operating pressure
  - 2" combination: 200 psi, 2" NPT Male Connector
  - 1" combination: 200 psi, 1" NPT Male Connector
  - 1" & 2" Air and Vacuum Valve: 150 psi, 1" Male Connector Female Connector

- Product Advantages**
- Ensures maximum protection of pressurized waterline using system with proper sizing and placement
  - Hydrodynamic flow design allows water to flow as water fills the system, remains open when no pressure within 17 psi (allows quickly close when no pressure within 3 and)
  - Large capacity valves designed water hammer impact and fittings from cracking or bursting
  - Unique rolling steel hatches allows gradual opening and closing and self cleaning capability on 2" Combination and 1" Automatic
  - Made of corrosion-resistant thermoplastic with reinforced UV protected nylon for metal parts to rest in outside, no need for space ports
  - 5 year warranty



**3/4" & 1" Filter Specifications**

- ABS material - rated to 80 psi
- Engineering plastic models rated to 150 psi

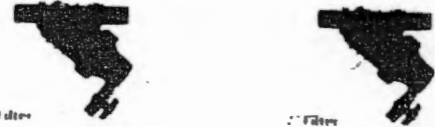


- 3/4" Filter**
- 3/4" NPT inlet & 3/4" NPT outlet
  - Large surface area available: 73.4 sq. in.
  - 150 psi working pressure

- 1" Filter**
- 1" NPT inlet & 1" NPT outlet
  - BSP thread available
  - Range to serve depth penetration: 2 1/2' & 4' & 6'
  - 150 psi working pressure

**1 1/2" & 2" Filter Specifications**

- Standard with 1/2" Water (Schedule 40) PVC
- Filter to serve are bonded to a reinforced stainless steel outer case to prevent collapse
- Made of high-strength engineered plastic and composite rated to 150 psi



- 1 1/2" Filter**
- 1 1/2" NPT inlet & 1 1/2" NPT outlet
  - BSP thread available
  - 150 psi working pressure

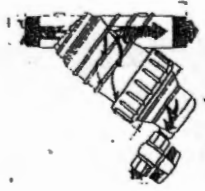
- 2" Filter**
- 2" NPT inlet & 2" NPT outlet
  - BSP thread available
  - 150 psi working pressure

www.netafim.com

2001 E. Highway Ave. Fresno, CA 93224  
 PO Box 100 Fresno, CA 93201  
 40800th St. Mendocino, CA 95501  
 2777 State Road 500 East Morris City, IL 61890

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 Irrigation Inc  
 AUG 15 2018

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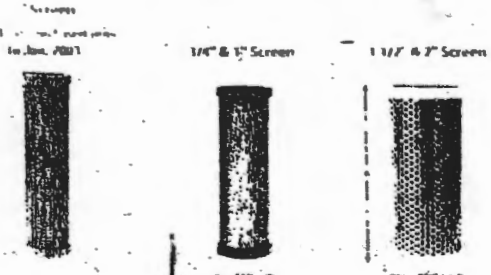


Housing Dimensions

	A		B		C	
	in	cm	in	cm	in	cm
3/4"	6.2	158.5	8.5	215.9	1	25.4
1"	6.8	173	9.5	241.3	1	25.4
1 1/2"	12	304.8	17	431.8	5.5	140
2"	17	431.8	19	482.6	5.5	140

Screen Dimensions

Size	A		B		C		Screen Material	Area of Filtration	
	in	cm	in	cm	in	cm		sq. in.	sq. cm
3/4" & 1"	5.25	133.0	1.78	45.2	1.6	40.6	STAINLESS STEEL	28.4	731.0
1 1/2" to 2"	6.25	158.8	1.78	45.2	1.6	40.6	STAINLESS STEEL	28.4	731.0
1 1/2" & 2"	7.25	184.1	3.5	88.9	3.2	81.3	STAINLESS STEEL	608	392.3



Screen Mesh/Micron Conversions

Mesh	30	50	100	200
micron	600	300	150	75
micron	510	300	150	75
micron	510	300	150	75

**BIOLINE DRIPPERLINE PART NUMBERS**

0.4 GPH	08WRAM.4-12V	0.4 gph Flow, 12" Drinker Spacing, 1,000 Foot Coil
	08WRAM.4-18V	0.4 gph Flow, 18" Drinker Spacing, 1,000 Foot Coil
	08WRAM.4-24V	0.4 gph Flow, 24" Drinker Spacing, 1,000 Foot Coil
0.6 GPH	08WRAM.6-12V	0.6 gph Flow, 12" Drinker Spacing, 1,000 Foot Coil
	08WRAM.6-18V	0.6 gph Flow, 18" Drinker Spacing, 1,000 Foot Coil
	08WRAM.6-24V	0.6 gph Flow, 24" Drinker Spacing, 1,000 Foot Coil
0.9 GPH	08WRAM.9-12V	0.9 gph Flow, 12" Drinker Spacing, 1,000 Foot Coil
	08WRAM.9-18V	0.9 gph Flow, 18" Drinker Spacing, 1,000 Foot Coil
	08WRAM.9-24V	0.9 gph Flow, 24" Drinker Spacing, 1,000 Foot Coil

Settings & flows... (Refer to Customer Service for Details.)

# Sta-Rite® High Head Multi-Stage Submersible Effluent Pumps

The new STEP Plus™ 4" submersible effluent pumps in 10 and 20 GPM models offer dependable performance and value for high pressure filtered effluent applications.

The 10 and 20 GPM are industry standard 3-3/4" in diameter.

These new STEP Plus™ pumps will handle "dry run" conditions where other manufacturers fail.

## Applications

Filtered Effluent...for residential, commercial and agricultural use.

## Specifications

**Shell**-Stainless Steel

**Discharge**-Fiberglass reinforced thermoplastic

**Discharge Bearing**-Nylatron®

**Impellers**-Delrin®

**Diffusers**-Polycarbonate

**Suction Caps**-Polycarbonate with stainless steel wear ring

**Thrust Pads**-Proprietary spec.

**Shaft and Coupling**-Stainless steel 300 grade

**Intake**-Fiberglass reinforced thermoplastic

**Intake Screen**-Polypropylene

**Agency Listing**-UL, SSPMA

**Jacketed Cord**-300 Volt "SJOW" jacketed 10' leads, 115 Volt, 2-wire with ground.

**Franklin Electric Motors**-Proven field operation

Model	HP	Max Lead Amps	Volts	Phase/Cycles	Cord Length
STEP 10	1/2	12.0	115	1/60	10'
STEP 20	1/2	12.0	115	1/60	10'

## Pump Performance

Model	Gallons/Liters per Min.	Head (Feet & Meters)	PSI
Step 10	0/0	255/78	110
	5/19	228/69	99
	10/38	170/52	74
	12.5/47	120/37	
Step 20	0/0	145/44	63
	7.5/28	132/40	57
	15/57	125/38	54
	20/76	112/34	48
	25/95	75/23	32

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## Features:

**Patented Staging System**-Proven SignaSeal™ staging system is designed with a corrosive resistant stainless steel wear surface, that when incorporated with our floating stack design, greatly reduces problems with abrasives, sand lock-up and running dry.

**Shaft**-Positive drive 300 grade stainless steel 7/16" hexagonal shaft.

**Discharge**-Fiberglass reinforced thermoplastic.

**Discharge Bearing**-Exclusive self-lubricating Nylatron® bearing resists wear from sand.

**Impellers**-Precision molded for perfect balance...ultra smooth for highest performance and efficiency. Allows for 1/8" solids.

**Shell**-Heavy walled corrosion resistant stainless steel. Threaded for easy servicing.

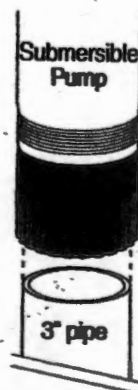
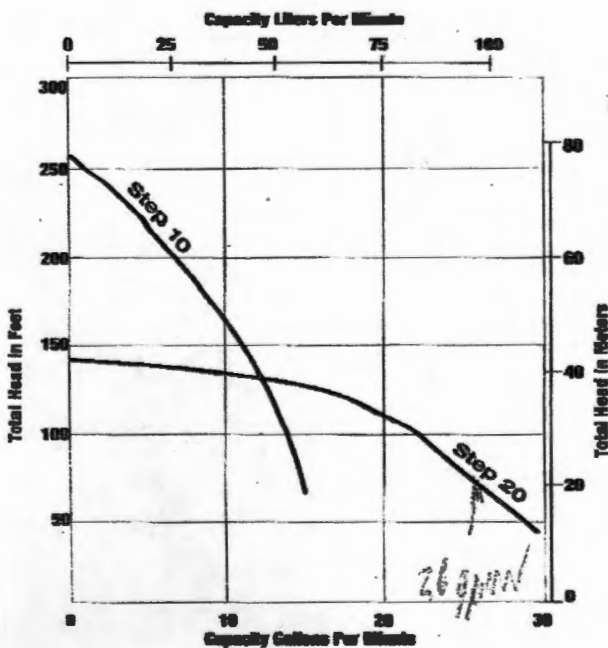


Figure 1: Insert a 3" PVC pipe in the bottom of the motor to enter the tank in the tank.

NETAFILM  
0.6 gph

Dripper Spacing	12"			18"			24"			
Dripper Flow Rate (GPH)	0.4	0.6	0.9	0.4	0.6	0.9	0.4	0.6	0.9	
Flushing Velocity (fps)	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	
Inlet Pressure (psi)	15	201/161	171/141	140/119	275/217	235/191	194/164	337/263	289/233	241/201
	25	266/221	222/190	179/157	366/302	308/261	251/218	453/369	383/321	313/270
	35	316/269	262/229	210/187	437/370	365/316	295/260	543/455	455/391	369/324
	40	337/290	280/246	223/200	469/399	391/340	313/278	583/493	487/421	393/347
	45	358/310	296/261	235/212	497/427	413/362	331/296	619/527	517/449	415/369
Flow per 100' (GPM/GPH)	0.67/40	1.02/61	1.53/92	0.44/26.67	0.68/41	1.02/61	0.34/20	0.51/31	0.77/46	

Additional flow of 1.2 GPM required per lateral to achieve 1.5 fps.  
Additional flow of 1.6 GPM required per lateral to achieve 2.0 fps.

### MULTIPLE ZONE LAYOUT

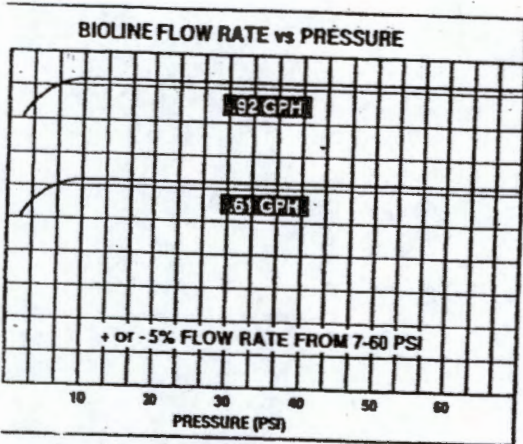
Multiple zone system with looping laterals:

- Used for a variety of reasons including when:
  - Single zone accumulated Bioline® lengths exceed recommended pump flow rate
  - Soils require additional resting time between dosings
  - There is a potential need for expansion of the system, which is common in commercial systems. Second or subsequent zone may be left out until needed
- Additional check valves are needed to isolate each zone on the flush line side. An additional air/vacuum relief valve should be installed before the check valve on each zone
- Zone changes are typically accomplished using an electric valve and controller
- Zone layouts may be parallel systems or may follow any of the scenarios discussed
- Zones should have similar flows
- Controller must be capable of operating a multi-zone system

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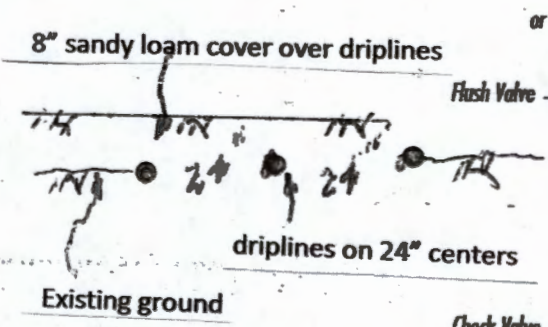
COUNTY ENGINEER



0 and 7 psi, the Bioline Dripper functions as a turbulent flow emitter, ensuring that the nominal design flow is not exceeded at system start-up.

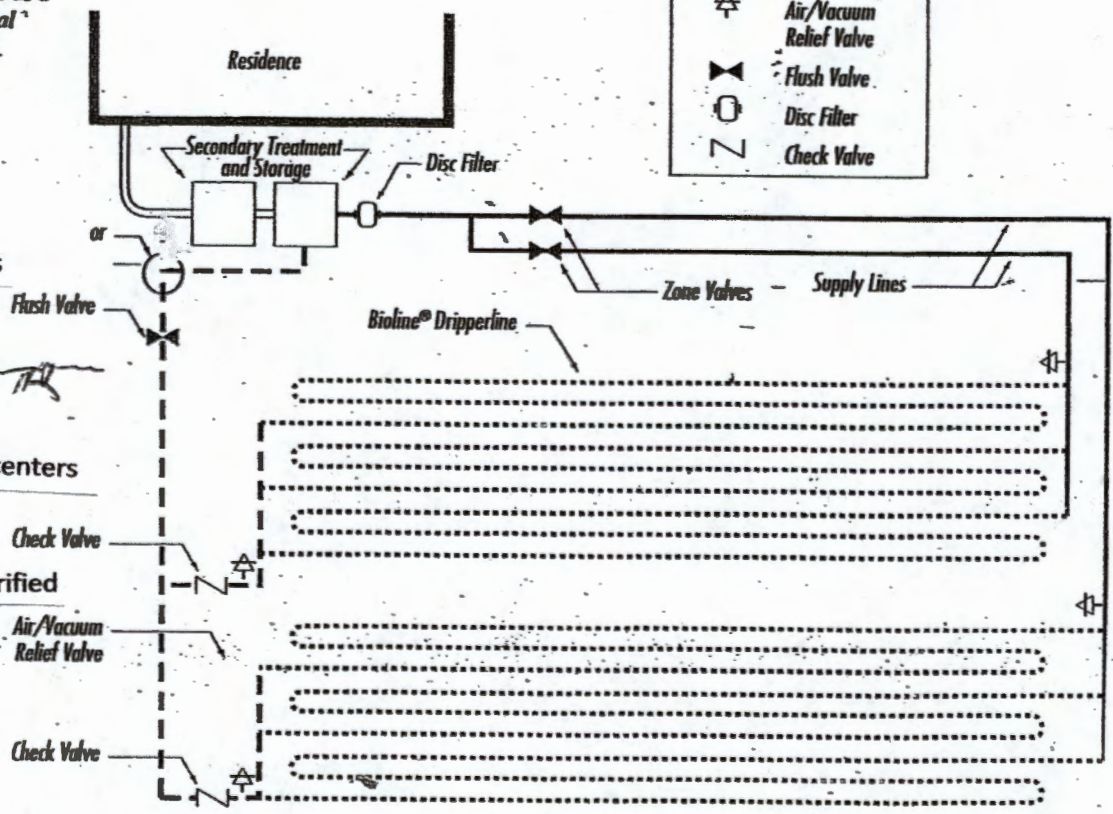
**Key**

- Supply Line
- - - Flush Line
- ..... Netafilm Bioline
- ⊕ Air/Vacuum Relief Valve
- ⊗ Flush Valve
- Disc Filter
- ⊥ Check Valve



Note: ground surface should be scarified prior to placement of dripline.

Final surface should be seeded with winter rye/Bermuda mix





INVOICE # 166714

INVOICE / CONTRACT

NO. 166714

PAY CODE

100



LEGEND PLUMBING & SEPTIC

PLUMBING & SEPTIC SPECIALISTS

P.O. 310  
Marion, TX 78124

(830) 303-3335  
(210) 340-8700

www.asklegend.com

"No job is too big or too small"

JOB PHONE 512-722-3576 DATE 8-14-2018

JOB LOCATION 416 STAIRS & STRIPES

CITY Fischer, TX 78623

Jim Kaye

OWNERS PHONE

BUSINESS PHONE

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BILL TO

ADDRESS Same

CITY, STATE, ZIP

DESCRIPTION OF WORK: 2 YEAR MTZE ON ATU SYSTEM PENDING INSTALL BY OTHERS. COMPLETE & EXECUTED COPY TO BE PROVIDED ONCE LICENSE TO OPERATE IS ISSUED WHEN SYSTEM IS INSTALLED. HOMEOWNER TO PROVIDE PERMIT NUMBER ONCE AUTHORIZATION TO CONSTRUCT IS ISSUED.

Water Pressure Test \_\_\_\_\_ PSI PERMIT REQUIRED YES  NO

SEE REVERSE SIDE FOR IMPORTANT ADDITIONAL TERMS

I hereby authorize the work described above and agree to the terms and conditions as stated below. I recognize that aged and deteriorated plumbing fixtures, piping, and appurtenances may no longer be serviceable, and I agree to hold Legend Plumbing & Septic (Legend) blameless for any damage or destruction to those items as a result of repair efforts. I agree to pay for all goods and services received, and authorize Legend to bill any of my credit card(s) for the goods and services. I agree to perform the obligations set forth in the applicable card holder agreement with the credit card user. A service charge of 1-1/2% per month (18% per annum) will be charged on all balances unpaid ten days after the date of Legend's invoice. \*Credit card charges will have a 3.79% convenience fee added.

PURCHASE ORDER STOCK

P.O. #

SIGNATURE X AUTH BY PHONE

REMOVE SCRAP  LEAVE SCRAP

Legend Plumbing & Septic is duly licensed by the Texas State Board of Plumbing Examiners, P.O. Box 4200, Austin TX 78765 1-800-845-6584 Texas Master Plumbers License #16126 RMP.

Cash  Check No. \_\_\_\_\_  Net 10 Days

Credit Card # 3715-878830-41019

\*3.79% convenience fee applies

Exp. Date: 02/20 Auth. # 8808-145798

SIGNATURE (I hereby acknowledge the satisfactory completion of the above described work.)

X

WARRANTY

• (MATERIAL) WE SUPPLY IS WARRANTED ACCORDING TO MANUFACTURER'S TERMS AND CONDITIONS UNLESS OTHERWISE SPECIFIED.  
• WORKMANSHIP IS WARRANTED FOR (0) OR 30 DAYS (CIRCLE ONE).

SERVICE VISIT	\$69.50
TASK LPS147	400.00
PROPOSAL	
LABOR	
MATERIALS / PRODUCTS	
TAX	33.00
TOTAL	433.00
*CONVENIENCE FEE	16.41
<b>TOTAL</b>	<b>449.41</b>

OFFICE COPY

hereby attest that I have received the above materials.

Bret Brown, S.M.

SERVICE TECHNICIAN'S SIGNATURE

Service Technician's Signature

SERVICE TECHS COMMENTS ON JOB

Thank you!

email - jimkaye100@yahoo.com


**From:** Ritzen, Brenda  
**To:** ["jimkaye100@yahoo.com"](mailto:jimkaye100@yahoo.com)  
**Subject:** Permit 107981  
**Date:** Thursday, September 06, 2018 10:31:00 AM  
**Attachments:** [Page from 107981.pdf](#)

---

Re: James & Alice E. Kaye  
The Summit Estates at Fischer, Texas unit 1 Lot 73  
Application for Permit for Authorization to Construct an On-Site sewage Facility

Mr. & Mrs. Kaye,

I have reviewed the revised planning materials submitted to our office September 5, 2018, and found the following information is needed:

-  The attached page of the planning materials must be signed by the designer.
- 2. Revise as needed and resubmit.

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)

NETAFILM  
0.6 gph

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SEP 05 2018

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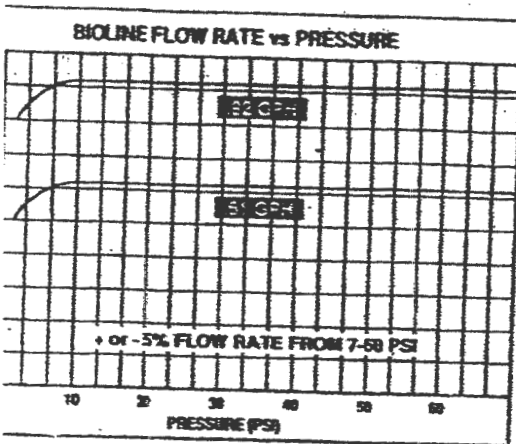
Dripper Spacing	12"			18"			24"		
Dripper Flow Rate (GPH)	0.4	0.6	0.9	0.4	0.6	0.9	0.4	0.6	0.9
Flushing Velocity (fps)	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0	1.5/2.0
	161	171 / 141	140 / 119	275 / 217	235 / 191	194 / 164	337 / 263	289 / 233	241 / 201
	221	222 / 190	179 / 157	366 / 302	308 / 261	251 / 218	453 / 369	383 / 321	313 / 270
	269	262 / 229	218 / 187	437 / 370	365 / 316	295 / 260	543 / 455	455 / 391	369 / 324
	290	288 / 246	223 / 200	469 / 399	391 / 340	313 / 278	583 / 493	487 / 421	393 / 347
	45	358 / 310	296 / 261	235 / 212	487 / 427	413 / 362	331 / 296	619 / 527	517 / 449
Flow per 100' (GPM/GPH)	0.67 / 40	1.02 / 61	1.53 / 92	0.44 / 26.67	0.68 / 41	1.02 / 61	0.34 / 20	0.51 / 31	0.77 / 46

Additional flow of 1.2 GPM required per lateral to achieve 1.5 fps.  
Additional flow of 1.6 GPM required per lateral to achieve 2.0 fps.

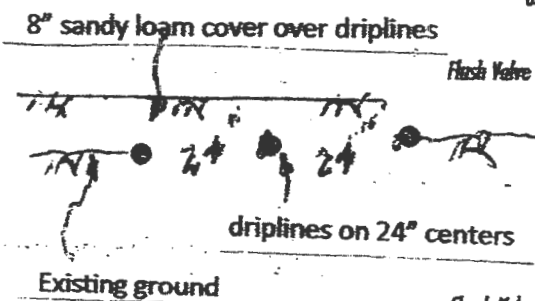
**MULTIPLE ZONE LAYOUT**

Multiple zone system with looping laterals:

- Used for a variety of reasons including when:
  - Single zone accumulated Bioline® lengths exceed recommended pump flow rate
  - Soils require additional resting time between dosings
  - There is a potential need for expansion of the system, which is common in commercial systems. Second or subsequent zone may be left out until needed
- Additional check valves are needed to isolate each zone on the flush line side. An additional air/vacuum relief valve should be installed before the check valve on each zone
- Zones can typically be accomplished using an electric valve and controller
- Zones can be parallel systems or may follow any of the scenarios discussed
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- Controller must be capable of operating a multi-zone system

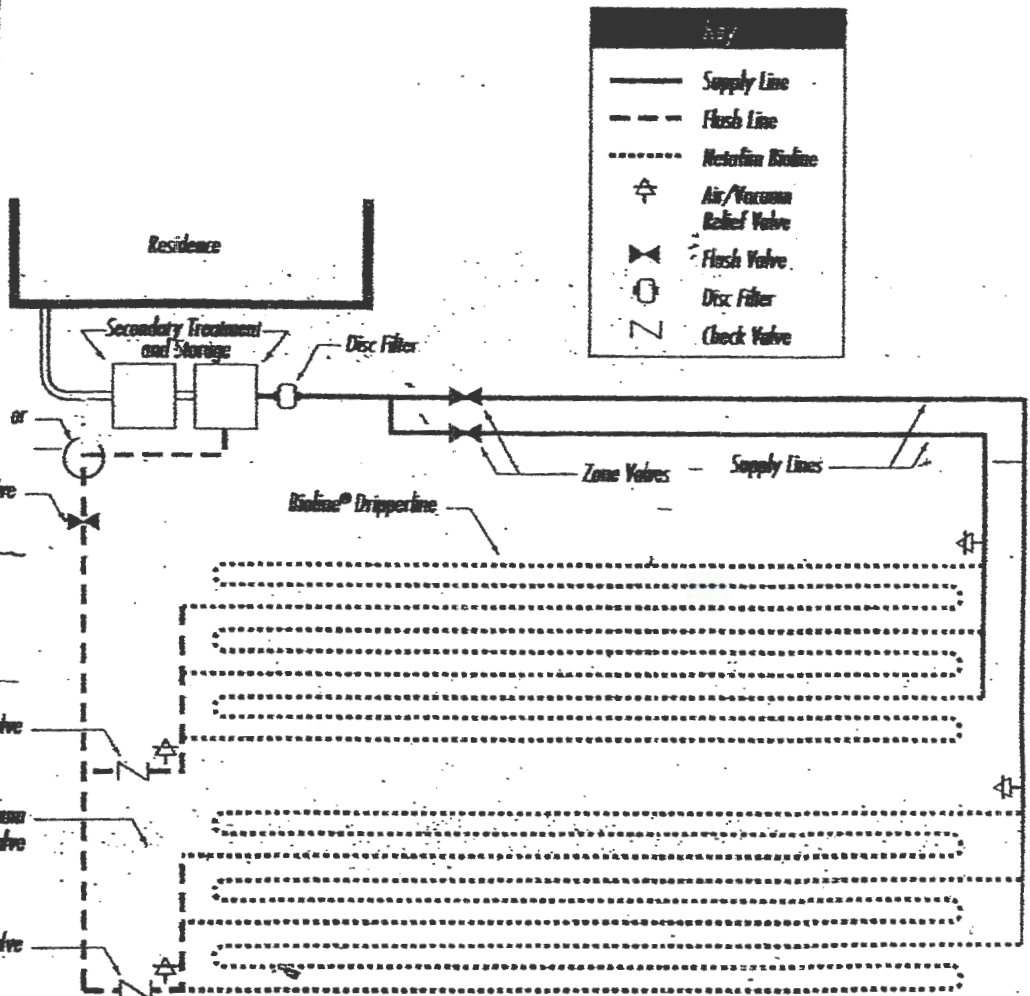


0 and 7 psi, the Bioline® Dripper functions as a turbulent flow emitter, ensuring that the nominal design flow is not exceeded at system start-up.



Note: ground surface should be scarified prior to placement of dripline.

Final surface should be seeded with winter rye/Bermuda mix









**From:** Ritzen, Brenda  
**To:** ["jimkaye100@yahoo.com"](mailto:jimkaye100@yahoo.com)  
**Subject:** Permit 107981  
**Date:** Thursday, August 23, 2018 2:57:00 PM  
**Attachments:** [Page from 107981.pdf](#)

---

Re: The Summit Estates at Fischer, Texas Unit 1 Lot 73  
Application for Permit for Authorization to Construct an On-Site Sewage Facility (OSSF)

Mr. & Mrs. Kaye,

The following information is needed before I can continue processing the referenced permit submittal:

1. The subdivision name on the permit application is incomplete.
-  2. The unit number is needed on the permit application.
-  3. Owner signature is needed on maintenance contract.
-  4. The maintenance contract must indicate the response time to emergencies.
-  5. Remove the RV and shop from the planning materials. We do not permit future construction. If the RV and shop are to discharge into the OSSF a new permit will be required.
-  6. Resubmit clear legible copies of the planning materials.
-  7. Submit installation specifications for the drip field.
8. Revise above as needed and resubmit.

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)

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

Date \_\_\_\_\_

Permit # 10798

Owner Name JAMES A & ALICE E. KAYE Agent Name \_\_\_\_\_  
Mailing Address 4 OVERBROOK CT. Agent Address \_\_\_\_\_  
City, State, Zip WIMBERLEY, TX 78654 City, State, Zip \_\_\_\_\_  
Phone # 512-560-0417 Phone # \_\_\_\_\_  
Email JIM KAYE 100 @ YAHOO.COM Email \_\_\_\_\_

**VOID**

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

Subdivision Name SUMMIT ESTATES AT FISCHER Unit \_\_\_\_\_ Lot 73 Block \_\_\_\_\_  
Acreage/Legal ONE ACRE  
Street Name/Address 416 STARS & STRIPES City FISCHER Zip 78623

**Type of Development:**

Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 2065

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 \_\_\_\_\_

Estimated Cost of Construction: \$ 250,000 (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.

James A. Kaye  
Signature of Owner

8/14/18  
Date

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**VOID**

Proposed Aerobic Drip Septic system for: James Kaye Location: 416 Stars and Stripes, Fischer, Tx  
 Summit Estates at Fischer Unit 1 Lot 73 **This property is not located in the 100 year flood plain**

3 BR House = 300gpd/0.25=1200sf/4=300 emittersx2=600lf dripline Use 2 zones @ 300' each  
 300 emitters x 0.6/60=3.0gpm + 2x1.6 flush=6.2gpm Head= 7' + 40' PUMPLINE + 4.6 FILTER LOSS+58'  
 (25PSI)= 74' head Use Starite dominator 20gpd pump (20gpm@100' head)

**VOID**

Note: Drip area to be seeded with Bermuda type seed to achieve Adequate grass growth

NOTE: THE ENTIRE AREA OF THE FIELD WILL HAVE 8" OF SANDY LOAM COVER OVER THE DRIP EMITTERS

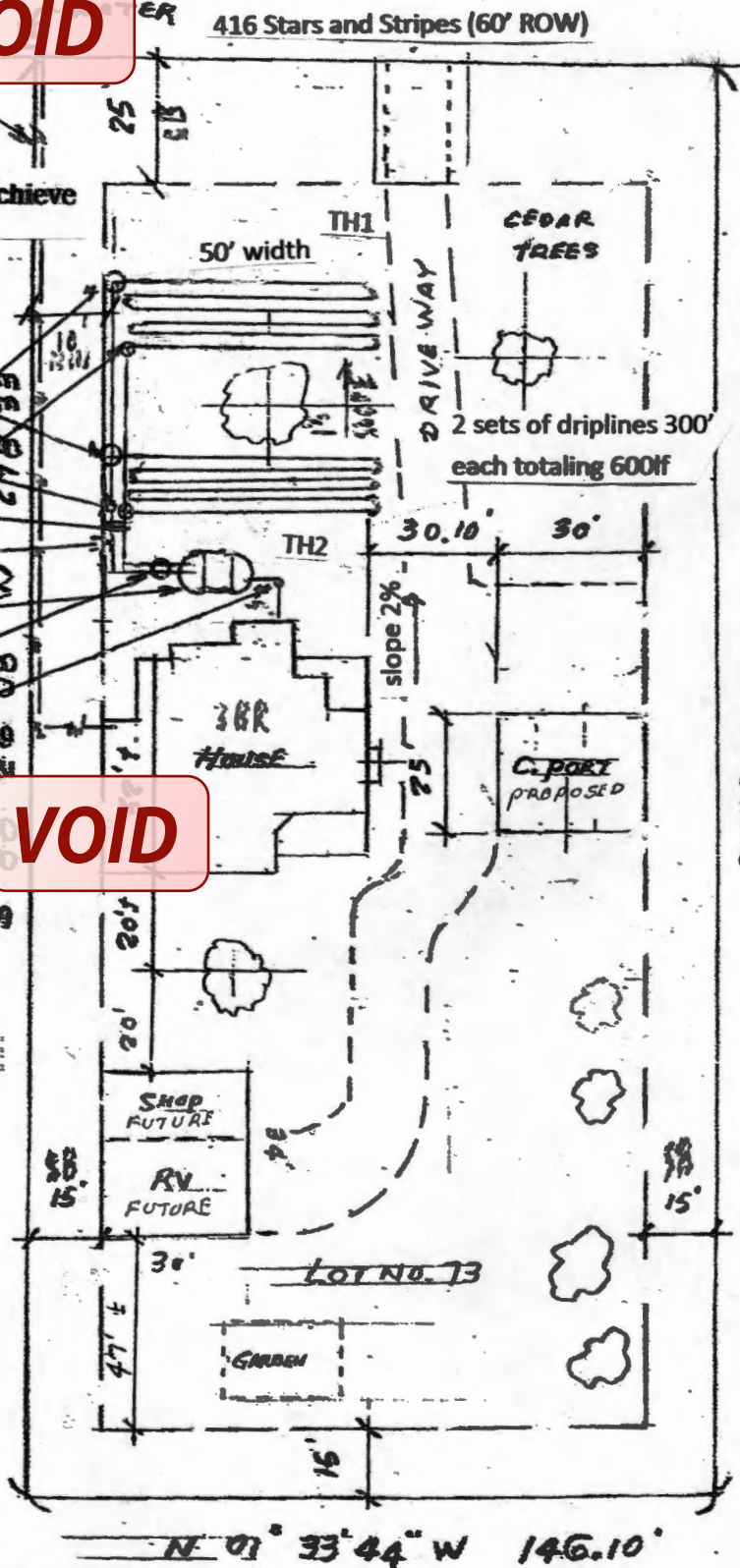
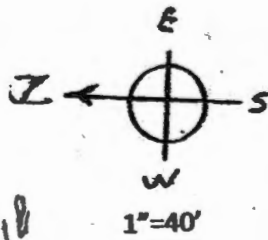
- continuous flush valve
- check breaker
- 70' of 1 1/2" sch 40 PVC pump line
- 70' of 1 1/2" sch 40 PVC return line
- AquaAire 500gpd aerobic Unit or Equivalent
- Pressure reducer and filter
- 2 way cleanout with 3" sch 40 PVC sewer line

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*Handwritten signature and date: BWA 8/14/2018*



This septic system was designed according to the current CONSTRUCTION STANDARDS AND SPECIFICATIONS for SEWERAGE FACILITIES of the TCEQ Chapter 285 and Guidelines of the Local Designated Regulatory Authority. The manual above should be used as a guideline of installation.  
 HIGHLAND LAKE'S ENGINEERING, BOX 1184, KINGSLAND, TEXAS 78639 (915) 388-3689 BRAD SHAW, PE 34/268



Legend Enterprises, Inc.  
 https://www.asklegend.com/  
 PO Box 310  
 Marion, TX 78124  
 210-340-8700  
 ihollis.legend@gmail.com

**VOID**

**SERVICE FORM**

**Service Form**

**Preventive Maintenance (PM) Contract**

**Aerobic On-Site Sewage Facility (OSSF) System**  
 OSSF License #OS3502  
 Maintenance Provider License #MP0000838

**HOME OWNER / PROPERTY OWNER NAME** Jim Kaye

**Address** 416 Stars & Stripes  
 Fischer, Texas

**Zip Code** 78623

**County** Comal

**Permit Number**

**Effective Date** To be effective date License to Operate Issued

**Length of Contract** 2 Years

**Phone Number** 512-722-3516

**Email Address** jimkaye100@yahoo.com

**Terms of Service** This contract will provide for all required maintenance inspections and record keeping requirements of your Aerobic Treatment Unit (ATU). This policy will cover the following:

**VOID**

1. 3 inspections per year scheduled at intervals of every 4 months. Inspections will include observations of all components required to be checked and make minor adjustments as needed.
2. If any component is found to be inoperative which cannot be corrected by minor adjustments at the time of the service visit, you will be notified immediately in writing of the condition and given an estimated price for correction. The cost of such repairs and/or servicing of components of the system are not included in the PM Program.
3. The ATU owner is responsible for maintaining a chlorine residual of at least 1.0 mg/l in the treatment system. This can be accomplished by using liquid chlorine or chlorine tablets. Tablets must be those designed for wastewater use. **DO NOT USE SWIMMING POOL TABLETS.** Upon inspection, if the system needs liquid chlorine or tablets, the owner will be notified, and it will be reflected on the maintenance inspection report. If the customer fails in their responsibility to properly monitor and apply the chlorine, it could result in violation of statutes, requiring appropriate action to be taken.

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**WARNINGS**

**VOID**

A. The proper operation of this or any other home sewage system depends upon proper organic loading and the life of the microorganisms in the system. Legend Enterprises, Inc., is not responsible for the installation of the system, other than the mechanical and structural workings of the plant itself. We cannot control the amount of harsh chemicals or other harmful substances that may be discharged into the system by occupants of a household. Visit the Texas Commission on Environmental Quality (teq.com) website for information regarding use of inappropriate items for aerobic systems.

B. Hydraulic overloading (flows in excess of design flow) may cause the sewage treatment system not to perform to the fullest capabilities.

C. Ants and bees have been shown to be destructive to the air pump and control panels. Regular care should be taken to prevent infestation of pests near the system. Damage or destruction caused by pests of this nature are not covered under the manufacturer's warranty.

D. Your State or Local Health Department may require other pieces of equipment to function separately or in conjunction with equipment manufactured by Legend Enterprises, Inc. Legend Enterprises, Inc., is not responsible for the mechanical or electrical safety of equipment it does not manufacture or supply with its Aerobic Treatment Unit. Particular care should be used in evaluating the electrical or mechanical safety of equipment manufactured by others. This may include, but not be limited to, electrical control panels or air pumps.

4. Any additional visits, inspections or sample collections required by specific Municipalities, Water/River Authorities, County Agencies, TCEQ, or any other regulatory agency in your jurisdiction will not be covered by this policy, and is not included in the PM Program.

5. The operation, maintenance and record keeping must be in compliance with HB2510. Upon request, we will provide you with the information contained in that bill, which relates to your ATU/OSSF. This provision requires unhampered access to the system for required inspections

**THIS IS A SERVICE CONTRACT**

The service contract will automatically renew 1 year on Anniversary date if on recurring billing program, unless notified in writing 30 days prior to the renewal date. If length of contract is for One (1) or Two (2) years, you will be notified in writing 30 days prior to the expiration date for renewal.

According to State law, all owners of Aerobic Treatment Units must hire an authorized service provider for the lifetime of the system. The ATU manual must be strictly followed or warranties are void. Pumping of any component of this system, for any reason, is not covered by this policy.

**VOID**

**MAINTENANCE PROVIDER SIGNATURE**

*Drew H. Downes*

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**INSTRUCTIONS TO SEPTIC OWNER**

The septic system utilized by your house is approved and reviewed by the Regulating Authority prior to the revision or change. The septic system for your house is an aerobic treatment type system that consists of a primary septic tank, an aerobic unit, a pumping chamber and an irrigation type disposal area. **THIS SYSTEM IS DESIGNED TO HAVE A MAINTENANCE CONTRACT WITH AN AUTHORIZED SERVICE COMPANY.**

Primary Aerobic Unit receives sewage from the house and removes solids by aerobic action. It has an air pump that operates continuously and is provided continual maintenance from the maintenance provider. If problems arise, contact the provider,

Not Comal County.

**VOID**

**Pumping Chamber:** Receives effluent (output) from septic tank. It has a submersible pump located within the tank. It has a float switch that will shut off the pump in the event of a high water alarm. It is provided with a manual alarm reset button. If the pump is not working properly, a repairman or serviceman should be contacted immediately. Do Not Contact Regulating Authority.

It stores the effluent for distribution to the disposal field. This chamber has a float switch, depending on usage. When the pump needs repair, a high water alarm pump is not working. The home owner should cease the use of any of the plumbing facilities of the house until the pump is working properly. A repairman or serviceman should be contacted immediately.

**Aerobic Treatment Unit:** A packaged unit consisting of an air compressor, pumps, filters and aeration in a tank. This unit should not be adjusted in anyway. A licensed operator or maintenance contractor should be contacted if malfunctions occur.

**Disposal Field:** Consists of Drip Emitters preset for actual volume and pressure. No adjustment is necessary. The field should be covered with grass, shrubs or vegetation and maintained at all times.

The following suggestions are made to extend the life of your septic system:

- 1) Do not put garbage down the drain. Do not use a garbage disposal.
- 2) Use low phosphate detergents.
- 3) Practice water conservation whenever possible.
- 4) Water softeners that are designed to recharge shall not discharge into the septic system. The brine created by these softeners will destroy septic system.

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**NOTE:** This septic system design was based on the use of water conservation plumbing fixtures and water conservation measures as recommended by the regulating authority. If the owner feels that water conservation cannot be achieved, it is recommended that the septic field size be increased to accommodate the increased water usage.

**VOID**

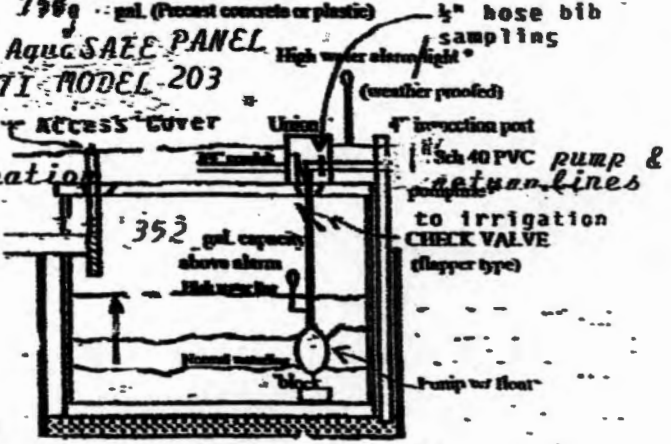
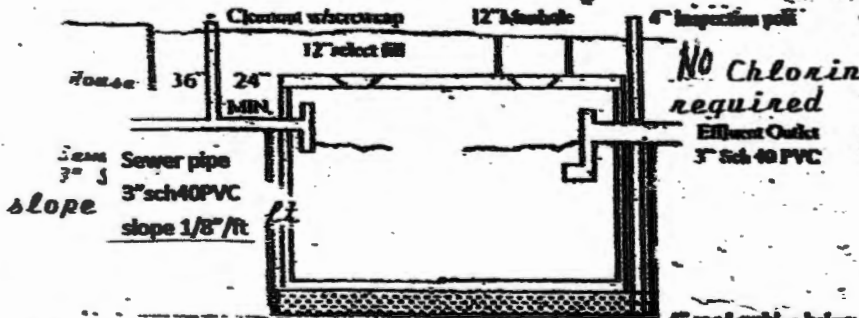
**PRIMARY SEPTIC TANK** (trash tank)

Size 400 gal. (Precast concrete or plastic)

Note: Aqua Aire Aerobic Unit 500gpd Use AquaSAFE PANEL ETI MODEL-203

**PUMPING CHAMBER TANK**

Size 750 gal. (Precast concrete or plastic)



Note: any change in the direction of the inlet pipe will require a cleanout w/cap at the point of direction change.

Use Starite 20gpm 1/2hp Pump (20gpm@100'head)  
Use continuous flush valves  
No chlorination required

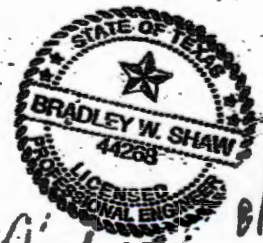
Note: Per Chapter 285.38 all inspection points to be locking type or 65#

Separately fused circuits should be for the pump and alarm system. A spare pump should be kept readily available. Replacement should be done by the maintenance provider.

all wastewater piping bedded with 4" of Class Ib, II or III soils with less than 30% gravel and none of the gravel is allowed to exceed 1/2" in diameter.

Note: tanks to be backfilled with similar material

This site specific design has considered soil texture, topography, vegetative growth, and ground and runoff water conditions and in my opinion can be operated without creating threat or harm to any existing water supply, public health (pollution or nuisance)



8/6/2018

LEGEND ENTERPRISES INC  
542 N WW WHITE RD  
SAN ANTONIO, 07/17/14 78219  
210-340-8700

LEGEND ENTERPRISES INC  
0010540008027342792000

Date: 08/14/2018 12:29:06 PM

CREDIT CARD SALE

AMERICAN EXPRESS  
CARD NUMBER: \*\*\*\*\*1019 K  
TRAN AMOUNT: \$449.41  
APPROVAL CD: 145798  
RECORD #: 000  
CLERK ID: Jhollis  
INVOICE #: 166714

X

\_\_\_\_\_  
Jim Kaye

I AGREE TO PAY THE ABOVE TOTAL AMOUNT  
ACCORDING TO THE CARD ISSUER AGREEMENT  
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

Thank you!

Merchant Copy

LEGEND ENTERPRISES INC  
542 N WW WHITE RD  
SAN ANTONIO, 07/17/14 78219  
210-340-8700

LEGEND ENTERPRISES INC

Date: 08/14/2018 12:29:06 PM

CREDIT CARD SALE

AMERICAN EXPRESS  
CARD NUMBER: \*\*\*\*\*1019 K  
TRAN AMOUNT: \$449.41  
APPROVAL CD: 145798  
RECORD #: 000  
CLERK ID: Jhollis  
INVOICE #: 166714

Thank you!

Customer Copy



9/15

# WARRANTY DEED WITH VENDOR'S LIEN

# COPY

THE STATE OF TEXAS )  
  ( KNOW ALL MEN BY THESE PRESENTS:  
COUNTY OF COMAL )

THAT, SUMMIT RESORT DEVELOPMENTS, INC., a Texas Corporation, of P.O. Box 2202, Canyon Lake, Comal County, Texas 78133-0009, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other valuable cash consideration to the undersigned paid by the Grantee herein named, the receipt of which is hereby acknowledged, and the further consideration of the execution and delivery by grantee of one certain promissory note of even date herewith in the principal sum of: Thirty eight thousand two hundred fifty and no/100 DOLLARS (\$38,250.00), payable to the order of SUMMIT RESORT DEVELOPMENTS, INC., a Texas Corporation as therein provided and bearing interest at the rate therein specified and providing for acceleration of maturity in event of default and for attorney's fees, the payment of which note is secured by the vendor's lien herein retained, and is additionally secured by a Deed of Trust of even date herewith to MICHELE BARNES, TRUSTEE, has GRANTED, SOLD AND CONVEYED, and by these presents does GRANT, SELL AND CONVEY unto: James A. Kaye and Alice E. Kaye, 4 Overbrook Ct, Wimberley, Hays County, Texas 78676 , all of the following described real property in Comal County, Texas to-wit:

RECEIVED  
AUG 15 2018  
COUNTY ENGINEER

All that certain tract or parcel of land lying and being situated in Comal County, Texas, known and designated as Lot 73, THE SUMMIT ESTATES AT FISCHER, TEXAS, UNIT 1, a subdivision, according to map or plat recorded in Volume 14, Page(s) 261-268, of the Map and Plat Records of Comal County, Texas.

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 grantee(s), their heirs and assigns forever; and it does hereby bind itself, its successors and assigns to WARRANT AND FOREVER DEFEND all and singular the said premises unto the said grantee(s) their, heirs and assigns, against every person whomsoever lawfully claiming or to claim the same or any part thereof.

**PS Septic Supply & Service**  
**23011 FM 306**  
**Canyon Lake, TX 78133**

Phone: (830) 850-0080  
Fax: (830) 935-4932

Printed:10/6/2022 Insp ID #:21525 Permit #:

**To: James Kaye**  
**416 Stars and Stripes**  
**Fischer, TX 78623**

Main Phone: (512) 560-0417  
Work:  
Cell Phone:  
Alt Cell:

Agency: Comal County  
County:  
Mfg / Brand: -

Customer ID: 4137  
Contract Dates: 1/21/2022 - 1/21/2024  
Scheduled Date: 9/21/2022 Inspection 2 of 6

GPS Coordinates: Latitude: 29.990130 Longitude: -98.266810

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 10/6/2022**

**Entered By: Nicole Loria**

**Method: Grab**

Copy emailed to Customer

Customer Emailed: 10/6/2022

**Technician: Not Assigned**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Sludge Levels**

**Filters: Operational**

**Irrigation Pumps: Operational**

**For Tank 2: N/A**

**Disinfection Device: Operational**

**Electric Circuits: Operational**

**Tank Lid / Riser: Secured**

**Distribution System: Operational**

**Insp. Port / Plug: Secured**

**Sprayfield Veg: Operational**

**Alarm: Operational**

**Comments**

**Service Completed**

- Scum on pretreatment 12 - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. - Copy emailed to the customer on 10/6/2022.

Site: 416 Stars and Stripes, Fischer, TX 78623

**Provider: *Christopher Ryan Seidensticker***  
***PS Septic Supply & Service***

License Info: MP0001708 Expires:

# Luna Environmental

4222 FM 482  
New Braunfels, TX 78132

(830) 312-8776

sherrie@lunaenvironmental.com

Printed:7/7/2023

Site: 416 Stars and Stripes, Fischer, TX 78623

Main Phone: 5125600417

**James Kaye**  
416 Stars and Stripes  
Fischer, TX 78623

Agency: Comal County

System Info: MFG: Brand:

Customer ID: 5536

Insp ID: 29737

## Visit Details

**Visit Date:** 7/6/2023

Entered By: Nicole Loria

GPS Lat: 29.990130 GPS Long: -98.266810

Scheduled Date: 5/21/2023

Contract Starts: 1/21/2022

Customer Emailed: 7/7/2023

Entered On: 7/7/2023

Contract Ends: 1/21/2024

## Visit Results

### Service Type: **Scheduled Inspection**

Count: Inspection 4 of 6

Method: **Grab**

License #

Expires

Technician: Logan Leppo

Provider: Luna Environmental, LLC

Service Completed

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Sludge Level Tank 2: N/A

Sludge Level Tank 3: 3

Sludge Level Tank 4: 1

Electric Circuits: Operational  
Distribution System: Operational  
Drip/Sprayfield Veg: Operational

Tank Lid / Riser: Secured

Insp. Port / Plug: Secured

Alarm: Operational

PSI Pressure: 3.0

## Comments

- Scum on pretreatment 6-air test field not triggering alarm-sending tech back to investigate 7/12 - Cleaned drip filter & backflushed drip field - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. - Copy emailed to the customer on 7/7/2023.