



Comal County

OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: 02/25/2019 Permit Number: 108073

Location Description: 846 PHANTOM RIDER TRL
SPRING BRANCH, TX 78070
Subdivision: Cypress Springs on the Guadalupe
Unit: 4
Lot: 314
Block:
Acreage:

Type of System: Aerobic
Surface Irrigation

Issued to: Vance & Beverly Lane

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

Michael Tays OS8497
ENVIRONMENTAL HEALTH INSPECTOR

Sandra Ann Hernandez, Asst.
ENVIRONMENTAL HEALTH COORDINATOR

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Mitchell Const. / OSSF Installer #: _____

1st Inspection Date: 1/30/19 2nd Inspection Date: _____ 3rd Inspection Date: 2/25/19

Inspector Name: Mike T. Inspector Name: _____ Inspector Name: Mike T.

Permit#: 108073 Address: Cypress Spring on the Guadalupe / 846 Phawton Road

| 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) | | 1/30/19 | | 2/25/19 |
| 2 | SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards | ✓ | 285.91(10) 285.30(b)(4) 285.31(d) | | | | |
| 3 | SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26) | ✓ | 285.32(a)(1) | | | | |
| 4 | SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot | ✓ | 285.32(a)(3) | | | | |
| 5 | SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends) | ✓ | 285.32(a)(5) | | | | |
| 6 | PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements | | 285.32(b)(1)(G)285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(A) 285.32(b)(1)(E)(ii)(ii) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(i) | | | | |
| 7 | PRETREATMENT Grease Interceptors if required for commercial | | 285.34(d) | | | | |

MT- 1/30/19
Tank set, leveled
operational ✓
Ready for cover.

MT- 2/25/19
Covered.

**Comal County Environmental Health
OSSF Inspection Sheet**

| Item | 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 | ✓ | | 600 | 1/30/19 | | 2/25/19 |
| 15 | AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number | ✓ | | Solarair | 1 | | 1 |
| 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)(4) 285.33(a)(3) 285.33(a)(1) | | | | |
| 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. |
|-----|--|--------|---|-------|-----------|-----------|-----------|
| | EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully; EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart | | 285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3)(B) 285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F) | | | | |
| 32 | AEROBIC TREATMENT UNIT is Aerobic Unit Installed, According to Approved Guidelines. | ✓ | 285.32(c)(1) | | 1/30/19 | | 2/25/19 |
| 33 | AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions | ✓ | | | | | |
| 34 | AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place. | ✓ | | | | | |
| 35 | PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump | | | | | | |
| 36 | PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions | | | | | | |
| 37 | PUMP TANK Secondary restraint system provided | | | | | | |
| 38 | | | | | | | |

**Comal County Environmental Health
OSSF Inspection Sheet**

| | | | | | |
|--|---|--|--|---------|---------|
| 39 PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried | ✓ | | | 4/30/19 | 2/25/19 |
|--|---|--|--|---------|---------|

**Comal County Environmental Health
OSSF Inspection Sheet**

| No. | Description | Answer | Citations | Notes | 1st Insp. | 2nd Insp. | 3rd Insp. |
|-----|---|--------|--|-------|-----------|-----------|-----------|
| 40 | APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple? | ✓ | 285.33(d)(2)(G)(iii)(i)285.33(d)(2)(G)(iii)(ii)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) | | 1/30/19 | | 2/25/19 |
| 41 | APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed | ✓ | 285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F) | | | | |
| 42 | APPLICATION AREA Area Installed | ✓ | | | | | |
| 43 | PUMP TANK Meets Minimum Reserve Capacity Requirements | | | | | | |
| 44 | PUMP TANK Material Type & Manufacturer | | | | | | |
| 45 | PUMP TANK Type/Size of Pump Installed | | | | | | |

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Mitchell Const. / OSSF Installer #: _____

1st Inspection Date: 1/30/19 2nd Inspection Date: _____ 3rd Inspection Date: _____

Inspector Name: Mike T. Inspector Name: _____ Inspector Name: _____

Permit#: 108073 Address: Cypress Spring on the Guadalupe / 846 Phawlow Rider

| 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) | | 11/30/19 | | |
| 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)(H) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(I) | | | | |
| 7 | PRETREATMENT Grease Interceptors if required for commercial | | 285.34(d) | | | | |

MT-1/30/19
Tank set, leveled
operational ✓
Ready For Cover.

**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 | ✓ | | 600 | 1/30/19 | | |
| 15 | AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number | ✓ | | Solenairne | | | |
| 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) | | | | |

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| 21 | DISPOSAL SYSTEM Pumped Effluent | | 285.33(a)(4) 285.33(a)(3) 285.33(a)(1) 285.33(a)(2) | | | | |
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| 24 | DISPOSAL SYSTEM Other (describe) (Approved Design) | | 285.33(d)(6) 285.33(c)(4) | | | | |
| 25 | DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC | | | | | | |
| 26 | DRAINFIELD Area Installed | | | | | | |
| 27 | DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation | | 285.33(b)(1)(A)(v) | | | | |
| 28 | DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media | | | | | | |
| 29 | DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place | | 285.33(b)(1)(E) | | | | |
| 30 | DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.) | | 285.33(c)(2) | | | | |
| 31 | LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches | | 285.33(d)(1)(C)(i) | | | | |

**Comal County Environmental Health
OSSF Inspection Sheet**

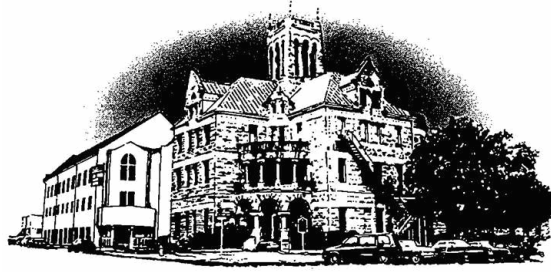
| No. | Description | Answer | Citations | Notes | 1st Insp. | 2nd Insp. | 3rd Insp. |
|-----|--|--------|--|-------|-----------|-----------|-----------|
| 32 | <p>EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling</p> <p>EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0%</p> <p>EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom)</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & 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> | | | | |
| 33 | <p>AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.</p> | ✓ | 285.32(c)(1) | | 1/30/19 | | |
| 34 | <p>AEROBIC TREATMENT UNIT Inspection/Clean Out Port & 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> | ✓ | | | | | |
| 35 | <p>AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.</p> | ✓ | | | | | |
| 36 | <p>PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & 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 & 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 | <p>PUMP TANK Secondary restraint system provided</p> | | | | | | |

Comal County Environmental Health
OSSF Inspection Sheet

| | | | | | | | |
|----|---|---|--|--|---------|--|--|
| 39 | PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried |  | | | 4/30/19 | | |
|----|---|---|--|--|---------|--|--|

**Comal County Environmental Health
OSSF Inspection Sheet**

| No. | Description | Answer | Citations | Notes | 1st Insp. | 2nd Insp. | 3rd Insp. |
|-----|---|--------|--|-------|-------------|-----------|-----------|
| 40 | APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple? | ✓ | 285.33(d)(2)(G)(iii)(II)285.33(d)(2)(G)(iii)(III)285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(I) | | 1/30/19 | | |
| 41 | APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed | ✓ | 285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F) | | | | |
| 42 | APPLICATION AREA Area Installed | | | | | | |
| 43 | PUMP TANK Meets Minimum Reserve Capacity Requirements | | | | | | |
| 44 | PUMP TANK Material Type & Manufacturer | | | | | | |
| 45 | PUMP TANK Type/Size of Pump Installed | | | | | | |



Comal County

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: 108073
Issued This Date: 09/10/2018
This permit is hereby given to: Vance & Beverly Lane

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

846 PHANTOM RIDER TRL
SPRING BRANCH, TX 78070

Subdivision: Cypress Springs on the Guadalupe
Unit: 4
Lot: 314
Block:
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.

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

Date _____

Permit # 168073

Owner Name Vance & Beverly Lane

Agent Name Douglas R. Dowlearn

Mailing Address 846 Phantom Rider Trail

Agent Address 703 Oak Drive

City, State, Zip Spring Branch, TX 78070

City, State, Zip Blanco, TX 78606

Phone # 432.528.4444

Phone # 210.240.2101

Email vancelane@gmail.com

Email lxseptic@gmail.com

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

Subdivision Name Cypress Springs on the Guadalupe Unit 4 Lot 314 Block _____

Acreage/Legal 5.0

Street Name/Address 846 Phantom Rider Trail City Spring Branch Zip 78070

Type of Development:

Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) Hobby shop/Garage

Number of Bedrooms 0

Indicate Sq Ft of Living Area 0

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: \$ 159,000 (Structure Only) Complete

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

Vancelane
Signature of Owner

8-31-18

Sign & Date

RECEIVED
SEP 04 2018
COUNTY ENGINEER

* * * **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 Douglas R. Dowlearn

System Description Aerobic Treatment with Spray Disposal

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

Tank Size(s) (Gallons) 600 gpd Absorption/Application Area (Sq Ft) 750 Required

Gallons Per Day (As Per TCEQ Table III) 48

(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: _____

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

8/14/18

Date

Page 2 of 2

1/CS



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AFFIDAVIT TO THE PUBLIC

COUNTY ENGINEER

THE COUNTY OF COMAL
STATE OF TEXAS

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

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 guaranteed 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):

Lot 314, Cypress Springs on the Guadalupe, Unit 4

The property is owned by (insert owner's full name)
Vance & Beverly Lane

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 30 DAY OF August 2018

Vance Lane
Beverly Lane
Owner(s) signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 30 DAY OF August 2018

J. J. Coetz
Notary Public, State of Texas
Notary's Printed Name J. J. Coetz
My Commission Expires 01-01-2021



Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
08/31/2018 09:59:35 AM
LAURA 1 Page(s)
201806034283



Bobbie Koepf

WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

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Regulatory Authority _____
Block Creek Aerobic Services, L.L.C.
444 A Old Hwy #9
Comfort, TX 78013
Off. (830) 995-3189
Fax. (830) 995-4051

Permit/License Number _____
Customer Vance & Beverly Lane
Site Address 846 Phantom Rider Trail
City Spring Branch Zip 78070
Mailing Address Same as above
County Comal Map # _____
Phone 432.528.4444
Email vancelane@gmail.com

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COUNTY ENG. PER

I. General: This Work for Hire Agreement (hereinafter referred to as "Agreement") is entered into by and between Vance & Beverly Lane (hereinafter referred to as "Customer") and Block Creek Aerobic Services, L.L.C. By this agreement, Block Creek Aerobic Services, L.L.C. and its employees (hereinafter inclusively referred to as "Contractor") agree to render services at the site address stated above, as described herein, and the Customer agrees to fulfill his/her responsibilities, as described herein.

II. Effective Date: Issue date of License to Operate and ends on 2 yrs from License to Operate

This Agreement commences on _____ for a total of two (2) years (initial agreement) or one (1) year (thereafter). If this is an initial agreement (new installation), the Customer shall notify the Contractor within two (2) business days of the system's first use to establish the date of commencement. If no notification is received by Contractor within ninety (90) days after completion of installation or where county authority mandates, the date of commencement will be the date the "License to operate" (Notice of Approval) was issued by the permitting authority. This agreement may or may not commence at the same time as any warranty period of installed equipment, but in no case shall it extend the specified warranty.

III. Termination of Agreement:
This Agreement may be terminated by either party for any reason, including for example, substantial failure of either party to perform in accordance with the terms of this Agreement, without fault or liability of the terminating party. The terminating party must provide written notice to the non-terminating party thirty (30) days prior to the termination of this Agreement. If this Agreement is terminated, Contractor will be paid at the rate of \$75.00 per hour for any work performed and for which compensation has not been received. After the deduction of all outstanding charges, any remaining monies from prepayment for services will be refunded to customer within thirty (30) days of termination of this Agreement. Either party terminating this Agreement for any reason, including non-renewal, shall notify in writing the equipment manufacturer and the appropriate regulatory agency a minimum of thirty (30) days prior to the date of such termination. Nonpayment of any kind shall be considered breach of contract and a termination of contract.

IV. Services:
Contractor will:
a. Inspect and perform routine upkeep on the On-Site Sewage Facility (hereinafter referred to as OSSF) as recommended by the treatment system manufacturer, and required by state and/or local regulation, for a total of three visits to site per year. The list of items checked at each visit shall be the: control panel, Electrical circuits, timer, Aeration including compressor and diffusers, CFM/PSI measured, lids safety pans, pump, compressor, sludge levels, and anything else required as per the manufacturer.
b. Provide a written record of visits to the site by means of an inspection tag attached to or contained in the control panel.
c. Repair or replace, if Contractor has the necessary materials at site, any component of the OSSF found to be failing or inoperative during the course of a routine monitoring visit. If such services are not covered by warranty, and the service(s) cost less than \$100.00, Customer hereby authorizes Contractor to perform the service(s) and bill Customer for said service(s). When service costs are greater than \$100.00, or if contractor does not have the necessary supplies at the site, Contractor will notify Customer of the required service(s) and the associated cost(s). Customer must notify Contractor of arrangements to affect repair of system within two (2) business days after said notification.
d. Provide sample collection and laboratory testing of TSS and BOD on a yearly basis (commercial systems only).
e. Forward copies of this Agreement and all reports to the regulatory agency and the Customer.
f. Visit site in response to Customer's request for unscheduled services within forty-eight (48) hours of the date of notification (weekends and holidays excluded) of said request. Unless otherwise covered by warranty, costs for such unscheduled responses will be billed to Customer.

VC
Customer's Initials



BS
Contractor's Initials

V. Disinfection:

 Not required; X required. The responsibility to maintain the disinfection device(s) and provide any necessary chemicals is that of the Customer.

VI. Electronic Monitoring:

Electronic Monitoring is not included in this Agreement.

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VII. Performance of Agreement:

Commencement of performance by Contractor under this Agreement is contingent on the following conditions:

SEP 04 2018

a. If this is an initial Agreement (new installation):

1. Contractor's receipt of a fully executed original copy or facsimile of this agreement and all documentation requested by Contractor.

If the above conditions are not met, Contractor is not obligated to perform any portion of this Agreement.

VIII. Customer's Responsibilities:

The customer is responsible for each and all of the following:

a. Provide all necessary yard or lawn maintenance and removal of all obstacles, including but not limited to dogs and other animals, vehicles, trees, brush, trash, or debris, as needed to allow the OSSF to function properly, and to allow Contractor safe and easy access to all parts of the OSSF.

b. Protect equipment from physical damage including but not limited to that damage caused by insects.

c. Maintain a current license to operate, and abide by the conditions and limitations of that license, and all requirements for and OSSF from the State and/or local regulatory agency, whichever requirements are more stringent, as well as the proprietary system's manufacturer recommendations.

d. Notify Contractor immediately of any and all alarms, and/or any and all problems with, including failure of, the OSSF.

e. Provide, upon request by Contractor, water usage records for the OSSF so that the Contractor can perform a proper evaluation of the performance of the OSSF.

f. Allow for samples at both the inlet and outlet of the OSSF to be obtained by Contractor for the purpose of evaluating the OSSF's performance. If these samples are taken to a laboratory for testing, with the exception of the service provided under Section IV (d) above, Customer agrees to pay Contractor for the sample collection and transportation, portal to portal, at a rate of \$1500 per hour, plus the associated fees for laboratory testing.

g. Prevent the backwash or flushing of water treatment or conditioning equipment from entering the OSSF.

h. Prevent the condensation from air conditioning or refrigeration units, or the drains of icemakers, from hydraulically overloading the aerobic treatment units. Drain lines may discharge into the surface application pump tank if approved by system designer.

i. Provide for pumping and cleaning of tanks and treatment units, when and as recommended by Contractor, at Customer's expense.

j. Maintain site drainage to prevent adverse effects on the OSSF.

k. Pay promptly and fully, all Contractor's fees, bills, or invoices as described herein.

IX. Access by Contractor:

Contractor is hereby granted an easement to the OSSF for the purpose of performing services described herein. Contractor may enter the property during Contractor's normal business hours and/or other reasonable hours without prior notice to Customer to perform the Services and/or repairs described herein. Contractor shall have access to the OSSF electrical and physical components. Tanks and treatment units shall be accessible by means of man ways, or risers and removable covers, for the purpose of evaluation as required by State and/or local rules and the proprietary system manufacturer. It is Customer's responsibility to keep lids exposed and accessible at all times.

X. Limit of Liability:

Contractor shall not be held liable for any incidental, consequential, or special damages, or for economic loss due to expense, or for loss of profits or income, or loss of use to Customer, whether in contract tort or any other theory. In no event shall Contractor be liable in an amount exceeding the total Fee for Services amount paid by Customer under this Agreement.

XI. Indemnification:

Customer (whether one or more) shall and does hereby agree to indemnify, hold harmless and defend Contractor and each of its successors, assigns, heirs, legal representatives, devisees, employees, agents and/or counsel (collectively "Indemnitees") from and against any and all liabilities, claims, damages, losses, liens, causes of action, suits, fines, judgments and other expenses (including, but not limited to, attorneys' fees and expenses and costs of investigation), of any kind, nature or description, (hereinafter collectively referred to as "Liabilities") arising out of, caused by, or resulting, in whole or in part, from this Agreement.

Customer's Initials



BS
Contractor's Initials

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THIS INDEMNIFICATION APPLIES EVEN IF SUCH LIABILITIES ARE CAUSED BY THE CONCURRENT OR CONTRIBUTORY NEGLIGENCE OR BY THE STRICT LIABILITY OF ANY INDEMNITEE.

COUNTY ENGINEER

Customer hereby waives its right of recourse as to any Indemnitee when Indemnification applies, and Customer shall require its insurer(s) to waive its their right of subrogation to the extent such action is required to render such waiver of subrogation effective. Customer shall be subrogated to Indemnitees with respect to all rights Indemnitees may have against third parties with respect to matters as to which Customer provides indemnity and or defense to Indemnitees. No Indemnification is provided to Indemnitees when the liability or loss results from (1) the sole responsibility of such Indemnitee; or, (2) the willful misconduct of such Indemnitee. Upon irrevocable acceptance of this Indemnification obligation, Customer, in its sole discretion, shall select and pay counsel to defend Indemnitees of and from any action that is subject to this Indemnification provision. Indemnitees hereby covenant not to compromise or settle any claim or cause of action for which Customer has provided Indemnification without the consent of Customer.

XII. Severability:

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

XIII. Fee for Services:

The Fee for Services does not include any fees for equipment, material, labor necessary for non-warranty repairs, unscheduled inspections, or Customer requested visits to the site.

XIV. Payment:

Full payment is due upon execution of this Agreement (Required of new Customer). For any other service(s) or repair(s) provided by Contractor the Customer shall pay the invoice(s) for said service(s) or repair(s) within thirty (30) days of the invoice date. The Contractor shall mail all invoices on the date of invoice. All payments not received within thirty (30) days from the invoice date will be subject to a \$29.00 late penalty and a 1.5% per month carrying charge, as well as any reasonable attorney's fees, and all collection and court costs incurred by Contractor in collection of unpaid debt(s). Contractor may terminate contract at any time for nonpayment for services. Any check returned to Contractor for any reason will be assessed a \$30.00 return check fee.

XV. Application or Transfer of payment:

The fees paid for this agreement may be transferred to subsequent property owners; however, this Agreement is not transferable. Customer shall advise the subsequent property owners of the State requirement that they sign a replacement agreement authorizing Contractor to perform the herein described Services, and accepting Customer's Responsibilities. This replacement Agreement must be signed and received in Contractor's offices within ten (10) business days of date of transfer of property ownership. Contractor will apply all funds received from Customer first to any past due obligation arising from this Agreement including late fees or penalties, return check fees, and/or charges for services or repairs not paid within thirty (30) days of invoice date. Any remaining monies shall be applied to the funding of the replacement Agreement. The consumption of funds in this manner may cause a reduction in the termination date of effective coverage per this Agreement. See Section IV.

XVI. Entire Agreement:

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

Brent Sidenstich

Block Creek Aerobic Services, LLC.
Contractor
MC# 0000042 and MC#0000062

Jance Lane 8-31-18

Customer Signature

Date

JL

Customer's Initials



BS

Contractor's Initials

OSSF SOIL EVALUATION REPORT INFORMATION

Date: 8/15/18

Applicant Information:

Name: Vance & Beverly Lane
Address: 846 Phantom Rider Trail
City, State & Zip Code: Spring Branch, TX 78070
Phone: 432.528.4444
Email: vancelane@gmail.com

Site Evaluator Information:

Name: Douglas R. Dowlearn
Company: D.A.D. Services, Inc.
Address: 703 Oak Drive
City, State & Zip: Blanco, TX 78606
Phone: (210)240-2101 Fax: (866)260-7687
Email: txseptic@gmail.com

Property Location:

Lot: 314 Unit: 4 Subdivision: Cypress Springs on
the Guadalupe
Street/Road Address: 846 Phantom Rider Trail
City: Spring Branch Zip: 78070
Additional Info: County

Installer Information:

Name: Doug Dowlearn
Company: D.A.D. Services, Inc.
Address:
City, State & Zip:
Phone: Fax:

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| Depth | Texture Class | Soil Texture | Structure (For Class III - blocky, platy or massive) | Drainage (Mottles/Water Table) | Restrictive Horizon | Observation |
|-----------------------|---------------|-----------------------------------|--|--------------------------------|---------------------|-------------|
| Soil Boring #1 60" | III | 0-12" Clay Loam 12"+ Limestone | Blocky | <30% Gravel | 12"+ Limestone | None |
| Soil Boring #2 60" | | Same as above | | | | |

DESIGN SPECIFICATIONS

Application Rate (RA): 0.064

OSSF is designed for: Personal shop for 4 people@12 gpd = 48 gpd

48 Gallons per day required

An aerobic treatment/spray disposal system is to be utilized based on the site evaluation.

750 sq. ft. disposal area required

500 gallon/day aerobic tank required

Calculations: Absorption Area: $Q/RA = 48/0.064 = 750$ Sq. Ft.

FEATURES OF SITE AREA

Presence of 100-year flood zone: NO

Existing or proposed water well in nearby area: YES

Presence of adjacent ponds, streams, water impoundments: NO

Presence of upper water shed: NO

Organized sewage service available to lot: NO

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability. The site evaluation and OSSF design are subject to approval by the TCEQ or the local authorized agent. The planning materials and the OSSF design should not be considered final until a permit to construct has been issued.

Site Evaluator:

NAME: Douglas R. Dowlearn, R.S.

License No. OS9902 - Exp. 6/30/2020

TDH: #2432 - Exp. 2/28/2019

Signature:



D.A.D SERVICES, INC.
DOUG DOWLEARN
703 OAK DRIVE, BLANCO, TX 78606
Designed for: Vance & Beverly Lane

The installation site is on Lot 314 of the Cypress Springs on the Guadalupe, Unit 4 Subdivision in Comal County, TX. The proposed OSSF will treat the wastewater from a 4 person private shop (2700 sq. ft.). The proposed method of wastewater treatment is aerobic treatment with spray irrigation. This method was chosen because of unsuitable soil conditions.

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PROPOSED SYSTEM:

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A 4" PVC pipe will discharge from the residence to a pre-treatment tank, which flows into a 600 gpd aerobic treatment plant. The aerobic tank effluent flows to a 768 gallon storage/pump tank containing a liquid chlorinator and a single 20 gpm submersible pump. Distribution is through 2 K-Rain Gear Driven pop-up sprinklers, with low angle (13 degrees) spray nozzles spraying a radius of 30 feet at <40 psi. Each sprinkler will spray 180 degrees of arc. An audio and visual alarm monitoring both high water and aerator failure will be placed in a noticeable location.

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DESIGN SPECIFICATIONS:

Daily Waste Flow: 48 gpd
Application rate: 0.064
Application area required: $48 / .064 = 750$ ft. sq.
Application area utilized: 2826 sq. ft.
Pump tank reserve capacity: 24 gal minimum



Douglas R. Dowlearn
8/15/18

SYSTEM COMPONENTS:

SCH 40 PVC sewer line
1" purple PVC supply line
600 gpd aerobic treatment plant with manual or timed controls
Liquid chlorinator
2 K-Rain Gear Driven Pop-up Sprinkler
Pre-tank and 768 gallon pump tank

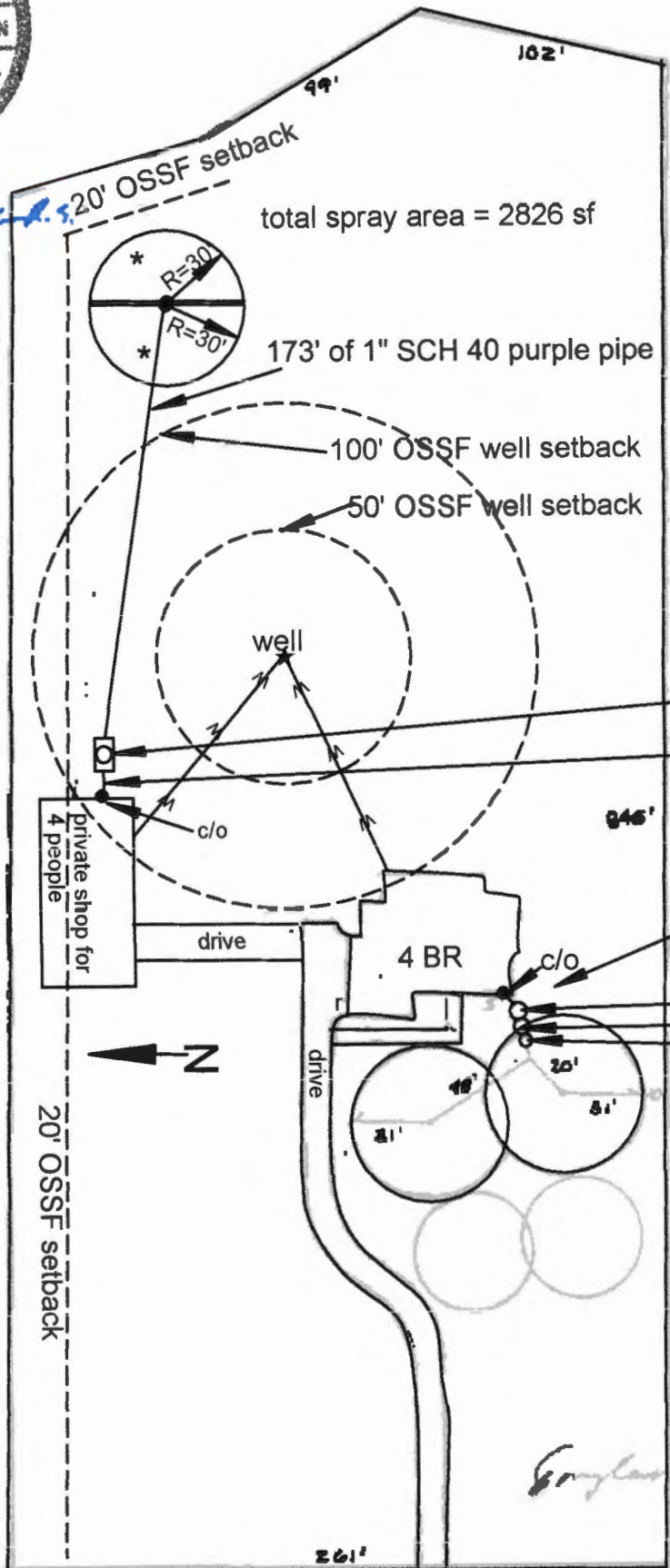
LANDSCAPING:

The native vegetation in the distribution area should consist of low level shrubs, plains grass, bluestem or bermuda. The entire area of the spray must be covered with a ground cover such as grass seed or sod prior to the final inspection. In the event the natural cover is disturbed, a suitable ground cover must be installed on all excavated areas.



Douglas R. Dowlearn
8/15/18

3% slope



total spray area = 2826 sf

173' of 1" SCH 40 purple pipe

100' OSSF well setback

50' OSSF well setback

well

Vance & Beverly Lane
846 Phantom Rider Trail
Spring Branch, TX 78070
Lot 314
Cypress Springs on the
Guadalupe - Unit 4
Comal County

1" = 70'

* = test holes

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New 600 GPD aerobic treatment unit

10' of 3" or 4" SCH 40 sewer pipe

existing OSSF septic system
for residence (permit # 77855)

500 gal. septic
500 gal hydroaction
750 gal lift

4 BR

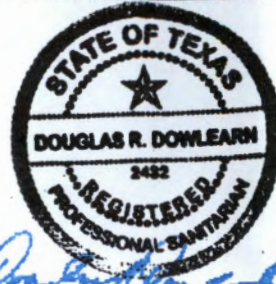
private shop for
4 people

20' OSSF setback

Douglas R. Dowlearn R.S.

Assembly Details

OSSF



Douglas R. Dowlearn, P.E.
8/31/18

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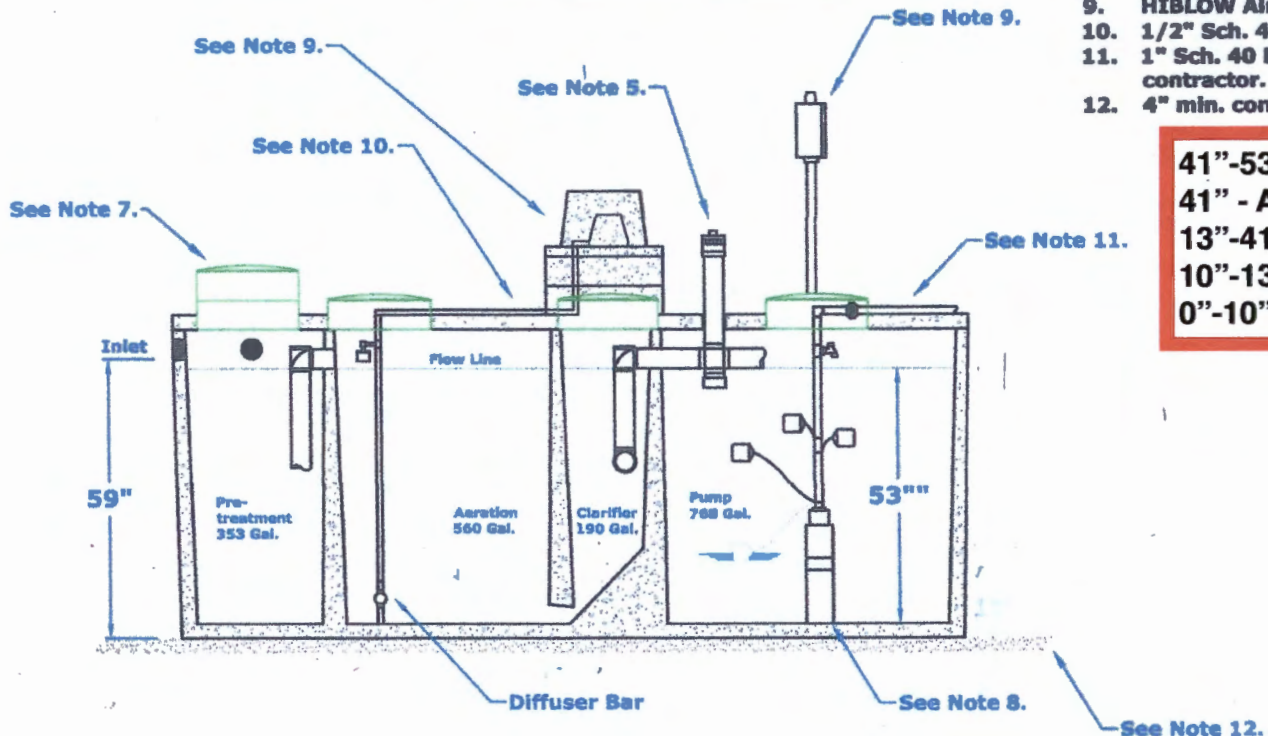
14.49 Gallons per inch

GENERAL NOTES:

1. Plant structure material to be precast concrete and steel.
2. Maximum burial depth is 30" from slab top to grade.
3. Weight = 14,900 lbs.
4. Treatment capacity is 600 GPD. Pump compartment set-up for a 360 GPD Flow Rate (4 bedroom, < 4,000 sq/ft living area). Please specify for additional set-up requirements. BOD Loading = 1.62 lbs. per day.
5. Standard tablet chlorinator or Optional Liquid chlorinator. NSF approved chlorinators (tablet & liquid) available.
6. Bio-Robix B-550 Control Center w/ Timer for night spray application. Optional Micro Dose (min/sec) timer available for drip applications. Electrical Requirement to be 115 Volts, 60 Hz, Single Phase, 30 AMP, Grounded Receptacle.
7. 20" Ø access riser w/ lid (Typical 4). Optional extension risers available.
8. 20 GPM 1/2 HP, high head effluent pump.
9. HIBLOW Air Compressor w/ concrete housing.
10. 1/2" Sch. 40 PVC Air Line (Max. 50 Lft from Plant).
11. 1" Sch. 40 PVC pipe to distribution system provided by contractor.
12. 4" min. compacted sand or gravel pad by Contractor

41"-53" - Reserve - 174 Gal
41" - Alarm
13"-41" - Working Level - 405 Gal
10"-13" - On/Off Tether - 44 Gal
0"-10" - Sump - 145 Gal

DIMENSIONS:
Outside Height: 67"
Outside Width: 63"
Outside Length: 164"
MINIMUM EXCAVATION DIMENSIONS:
Width: 76"
Length: 176"



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

Model: B-550-PC-400PT

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

Scale:
* All Dimensions subject to allowable specification tolerances.

Dwg. #: ADV-B550-3



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

1 NB 2/TC



NOTICE OF CONFIDENTIALITY RIGHTS: IF YOU ARE A NATURAL PERSON, YOU MAY REMOVE OR STRIKE ANY OR ALL OF THE FOLLOWING INFORMATION FROM ANY INSTRUMENT THAT TRANSFERS AN INTEREST IN REAL PROPERTY BEFORE IT IS FILED FOR RECORD IN THE PUBLIC RECORDS: YOUR SOCIAL SECURITY NUMBER OR YOUR DRIVER'S LICENSE NUMBER.

GENERAL WARRANTY DEED

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COUNTY ENGINEER

THE STATE OF TEXAS §
COUNTY OF COMAL §

KNOW ALL MEN BY THESE PRESENTS:

THAT **ROGER LEE BOOKER and wife, VERA M. BOOKER**, hereinafter called Grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) cash and other good and valuable consideration in hand paid by **VANCE LANE and wife, BEVERLY LANE**, hereinafter called Grantee, the receipt and sufficiency of which is hereby acknowledged;

HAS GRANTED, SOLD and CONVEYED, and by these presents does GRANT, SELL and CONVEY unto the said Grantee the following described property situated in Comal County, Texas, to-wit:

Lot 314, CYPRESS SPRINGS ON THE GUADALUPE, UNIT 4, a subdivision in Comal County, Texas, according to plat recorded in **Volume 11, page(s) 85-92**, Map and Plat Records of Comal County, Texas.

This conveyance is made subject to, all and singular, the restrictions, conditions, easements and covenants, if any, applicable to and enforceable against the above described property as reflected by the records of the County Clerk of Comal County, Texas.

Taxes for the current year have been prorated and are thereafter assumed by Grantee.

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, Grantee's heirs, executors, administrators, successors, or assigns forever.

Grantor does hereby bind Grantor, Grantor's heirs, executors, administrators, and successors to warrant and forever defend, all and singular, the said premises unto the said Grantee, Grantee's heirs, executors, administrators, successors, and assigns against any person whomsoever claiming or to claim the same or any part thereof.

DATED this the 20th day of June, 2014.

Roger Lee Booker

ROGER LEE BOOKER

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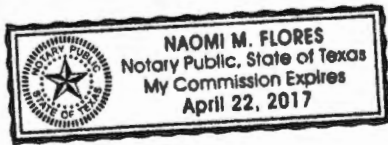
Vera M. Booker

VERA M. BOOKER

COUNTY CLERK

STATE OF TEXAS
COUNTY OF COMAL

This instrument was acknowledged before me on this the 20th day of June, 2014, by ROGER LEE BOOKER and wife, VERA M. BOOKER.



Naomi M. Flores

Notary Public, State of Texas

GRANTEE'S MAILING ADDRESS:

846 Phantom Rider Trail

Spring Branch, TX 78070

6275.deeds

Filed and Recorded
Official Public Records
Joy Streater, County Clerk
Comal County, Texas
06/25/2014 02:54:26 PM
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201406021854



Joy Streater

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133

MAILED

ENTERED

Phone: (830) 964-2365
 Fax: (830) 964-2659
 www.aerobicsservices.com
Permit #: 108073

Printed: 3/20/2019

To: Vance & Beverly Lane **Solar Aire**
846 Phantom Rider
Spring Branch, TX 78070

Tech: Not Assigned
 Brand/Mfg.: Solar Aire 600 LP0220 -
 System S/N:
 Aerator and S/N:

Contract: 2/25/2019 - 2/25/2021
 Inspections per year: 3
 Service Due: **6/25/2019**
 Alt Phone: 1

Site: 846 Phantom Rider Trail, Spring Branch
 Agency: Comal County Environmental Health
 County: Comal
 Subdivision: Cypress Spgs on the Guadalupe1

Phone: (432) 528-4444
 Cell:
 Work:

Inspection Type: Scheduled

| Item | Operational | Inoperative | N/A |
|-----------------------------|-------------|---------------|---------------|
| Aerator: | <u>/</u> | <u> </u> | <u> </u> |
| Irrigation pump: | <u>/</u> | <u> </u> | <u> </u> |
| Air compressor: | <u>/</u> | <u> </u> | <u> </u> |
| Disinfection device: | <u>/</u> | <u> </u> | <u> </u> |
| Chlorine supply: | <u>/</u> | <u> </u> | <u> </u> |
| Spray field vegetation: | <u>/</u> | <u> </u> | <u> </u> |
| Sprinkler / Drip backwash: | <u>/</u> | <u> </u> | <u> </u> |
| Controls/ Electric Circuits | <u>/</u> | <u> </u> | <u> </u> |

Air Pressure 40

Test Results and observations: (As Required)

Chlorine Residual: 0.06
 Test Method: dpd
 BOD: _____
 TSS: _____

Mixed Liquor
 Aeration 3
 Sludge Levels
 Clarifier 3
 Pump 2

Access Ports Secured **YES** / NO
 Repairs made: YES / **NO**

Repairs and Comments:

Inspector: Tom Hampton
 Tom Hampton VP
 MP349/OS24597

Date: 6-21-19

INSPECT Solar Aire ONLY
 Hydro Action also on property **do not service**

Area: 10
 GPS:

ID = 61115032

Appointment

846 Phantom Rider Trail, Spring Branch

Call on this 1st visit to
 Homeowner, Wants to be
 present on 1st inspection
 6-20-19

Aerobic Services of South Texas
 15188 FM 306
 Canyon Lake, TX 78133



MAILED
ENTERED

Phone: (830) 964-2365
 Fax: (830) 964-2659
 www.aerobicservices.com
Permit #: 108073

Printed: 9/24/2019

To: Vance & Beverly Lane Solar Aire
846 Phantom Rider
Spring Branch, TX 78070

Tech: Not Assigned
 Brand/Mfg.: Solar Aire 600 LP0220 -
 System S/N:
 Aerator and S/N:

Contract: 2/25/2019 - 2/25/2021
 Inspections per year: 3
 Service Due: 10/25/2019
 Alt Phone: 2

Site: 846 Phantom Rider Trail, Spring Branch
 Agency: Comal County Environmental Health
 County: Comal
 Subdivision: Cypress Spgs on the Guadalupe1

Phone: (432) 528-4444
 Cell:
 Work:

Inspection Type: Scheduled

| Item | Operational | Inoperative | N/A |
|-----------------------------|--------------|-------------|-----------|
| Aerator: | <u> </u> | <u> </u> | <u> </u> |
| Irrigation pump: | <u> </u> | <u> </u> | <u> </u> |
| Air compressor: | <u> </u> | <u> </u> | <u> </u> |
| Disinfection device: | <u> </u> | <u> </u> | <u> </u> |
| Chlorine supply: | <u> </u> | <u> </u> | <u> </u> |
| Spray field vegetation: | <u> </u> | <u> </u> | <u> </u> |
| Sprinkler / Drip backwash: | <u> </u> | <u> </u> | <u> </u> |
| Controls/ Electric Circuits | <u> </u> | <u> </u> | <u> </u> |

Air Pressure 50

Test Results and observations: (As Required)
 Chlorine Residual: 1.24
 Test Method: DPD
 BOD: _____
 TSS: _____
 Access Ports Secured YES/NO
 Repairs made: YES/NO

Mixed Liquor
 Aeration 0
 Sludge Levels
 Clarifier 12.5nt
 Pump 0

Repairs and Comments: Solar Aerobic on Left Side Behind Building

Inspector: Dakota
 Tom Hampton VP
 MP349/OS24597

Date: 10-23-19

INSPECT Solar Aire ONLY
 Hydro Action also on property do not service

Area: / 0
 GPS:
 ID = 61115032

846 Phantom Rider Trail, Spring Branch

RECEIVED
 OCT 29 2019
 COUNTY ENGINEER

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133

ENTERED



Phone: (830) 964-2365
Fax: (830) 964-2659
www.aerobicservices.com
Permit #: 108073

Printed: 12/20/2019

To: Vance & Beverly Lane Solar Aire
846 Phantom Rider
Spring Branch, TX 78070

Tech: Not Assigned
Brand/Mfg.: Solar Aire 600 LP0220 -
System S/N:
Aerator and S/N:

Site: 846 Phantom Rider Trail, Spring Branch
Agency: Comal County Environmental Health
County: Comal
Subdivision: Cypress Spgs on the Guadalupe1

Contract: 2/25/2019 - 2/25/2021
Inspections per year: 3
Service Due: 2/25/2020
Alt Phone: 3

Inspection Type: Scheduled

| Item | Operational | Inoperative | N/A |
|-----------------------------|-------------------------------------|--------------------------|--------------------------|
| Aerator: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Irrigation pump: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Air compressor: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Disinfection device: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Chlorine supply: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Spray field vegetation: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sprinkler / Drip backwash: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Controls/ Electric Circuits | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Air Pressure 65

Test Results and observations: (As Required)
Chlorine Residual: 1.00
Test Method: D&D
BOD: _____
TSS: _____
Access Ports Secured YES/NO
Repairs made: YES, NO

Mixed Liquor Aeration 0
Sludge Levels Clarifier 0
Pump 0

Repairs and Comments:

Inspector: Dakota
Tom Hampton VP
MP349/OS24597

Date: 3-2-20

INSPECT Solar Aire ONLY 3746gc
solar aerobic on left side behind bldg
Hydro Action also on property do not service

Area: / 0
GPS: ID = 61115032

846 Phantom Rider Trail, Spring Branch

RECEIVED
MAR 16 2020
COUNTY ENGINEER

ENTERED

MAILED

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133



Phone: (830) 964-2365
Fax: (830) 964-2659
www.aerobicservices.com
Permit #: 108073

Printed: 3/31/2020

To: Vance & Beverly Lane Solar Aire
846 Phantom Rider
Spring Branch, TX 78070

Tech: Not Assigned
Brand/Mfg.: Solar Aire 600 LP0220 -
System S/N:
Aerator and S/N:

Site: 846 Phantom Rider Trail, Spring Branch
Agency: Comal County Environmental Health
County: Comal
Subdivision: Cypress Spgs on the Guadalupe 1

Contract: 2/25/2019 - 2/25/2021
Inspections per year: 3
Service Due: 6/25/2020
Alt Phone: 4
Phone: (432) 528-4444
Cell:
Work:

Inspection Type: Scheduled

| Item | Operational | Inoperative | N/A |
|-----------------------------|-------------|--------------|-------------|
| Aerator: | <u>/</u> | <u> </u> | <u> </u> |
| Irrigation pump: | <u>/</u> | <u> </u> | <u> </u> |
| Air compressor: | <u>/</u> | <u> </u> | <u> </u> |
| Disinfection device: | <u>/</u> | <u> </u> | <u> </u> |
| Chlorine supply: | <u> </u> | <u>X / X</u> | <u> </u> |
| Spray field vegetation: | <u>/</u> | <u> </u> | <u> </u> |
| Sprinkler / Drip backwash: | <u>WWT</u> | <u> </u> | <u> </u> |
| Controls/ Electric Circuits | <u>/</u> | <u> </u> | <u> </u> |

Air Pressure 42

RECEIVED

JUL 9

Test Results and observations: (As Required)
Chlorine Residual: 0.06
Test Method: DPD
BOD:
TSS:
Access Ports Secured YES / NO
Repairs made: YES / NO

Mixed Liquor
Aeration 2
Sludge Levels
Clarifier 6
Pump 1

COUNTY ENGINEER

Repairs and Comments: * Needs liquid bleach *

Inspector: Seth
Tom Hampton VP
MP349/OS24597

Date: 7-10-20

INSPECT Solar Aire ONLY
~~solar aerobic on left side behind bldg~~
Hydro Action also on property **do not service**

Area: / 0
GPS: ID = 61115032

846 Phantom Rider Trail, Spring Branch

On The right side of building.

ENTERED



Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133

Phone: (830) 964-2365
Fax: (830) 964-2659
www.aerobicservices.com

To: Vance & Beverly Lane Solar Aire
846 Phantom Rider
Spring Branch, TX 78070

Printed: 5/5/2020
Site: 846 Phantom Rider Trail
Spring Branch, TX 78070
(432) 528-4444

Permit #: **108073** Customer ID: 61115032
Agency: Comal County Enviromental Health Comal County Enviromental Health Comal C Contract Dates: 2/25/2019 - 2/25/2021
County: Comal Sub: Cypress Spgs on the Guadalupe1 Scheduled Date: 6/25/2020
Mfg / Brand: - Solar Aire 600 LP0220
Treatment Type: Aerobic
Disposal: Surface Application

Service Type: Repair

Entered By: Belinda

Visit Date: 5/4/2020

Method: Grab

Technician: Dakota

Maint. Provider: Hampton, Thomas

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Tank Lid / Riser: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Alarm: Operational

Comments

- Technician Secured the Tank Lid and/or Riser prior to leaving location.
- kAdded 3 20" risers

Service Completed

Insp ID #:122213

Provider: *Thomas Hampton*

License #: MP0000349

Expires: 9/30/2020

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133

ENTERED



Phone: (830) 964-2365
 Fax: (830) 964-2659
 www.aerobicservices.com
Permit #: 108073

Printed: 9/22/2020

To: Vance & Beverly Lane Solar Aire
846 Phantom Rider
Spring Branch, TX 78070

Tech: Not Assigned
 Brand/Mfg.: Solar Aire 600 LP0220 -
 System S/N:
 Aerator and S/N:

Contract: 2/25/2019 - 2/25/2021
 Inspections per year: 3
 Service Due: **10/25/2020**

Phone: (432) 528-4444
 Cell:
 Work:

Alt Phone: 5

Site: 846 Phantom Rider Trail, Spring Branch
 Agency: Comal County Environmental Health
 County: Comal
 Subdivision: Cypress Spgs on the Guadalupe1

Inspection Type: Scheduled

| Item | Operational | Inoperative | N/A |
|-----------------------------|-------------|-------------|-------------|
| Aerator: | <u>/</u> | <u> </u> | <u> </u> |
| Irrigation pump: | <u>/</u> | <u> </u> | <u> </u> |
| Air compressor: | <u>/</u> | <u> </u> | <u> </u> |
| Disinfection device: | <u>/</u> | <u> </u> | <u> </u> |
| Chlorine supply: | <u>/</u> | <u> </u> | <u> </u> |
| Spray field vegetation: | <u>/</u> | <u> </u> | <u> </u> |
| Sprinkler / Drip backwash: | <u>/</u> | <u> </u> | <u> </u> |
| Controls/ Electric Circuits | <u>/</u> | <u> </u> | <u> </u> |

Air Pressure 50

Test Results and observations: (As Required)
 Chlorine Residual: 1.94
 Test Method: DPD
 BOD:
 TSS:

Mixed Liquor 4
 Aeration 4
 Sludge Levels 8
 Clarifier 8
 Pump 4

Access Ports Secured YES / NO
 Repairs made: YES / NO

Repairs and Comments:

Inspector: Mark A Torres
 Tom Hampton VP
 MP349/OS24597

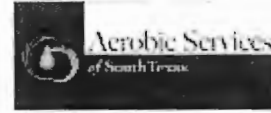
Date: 10-13-20

INSPECT Solar Aire ONLY 3746gc
solar aerobic on right side behind bldg
Hydro Action also on property do not service

Area: / 0
 GPS:
 ID = 61115032

846 Phantom Rider Trail, Spring Branch

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133



ENTERED

Phone: (830) 964-2365
 Fax: (830) 964-2659
 www.aerobicservices.com
Permit #: 77855

Printed: 12/17/2020

To: Vance Lane HYDRO ACTION
846 Phantom Rider Trail
Spring Branch, TX 78070

Tech: Not Assigned
 Brand/Mfg.: Hydro-Action - Hydro Action
 System S/N:
 Aerator and S/N:

Contract: 10/13/2020 - 10/13/2021
 Inspections per year: 3
 Service Due: **2/13/2021**
 Alt Phone: 2

Site: 846 Phantom Rider Trail, Spring Branch

Agency: Comal County Environmental Health
 County: Comal
 Subdivision: Cypress Springs

Phone: (432) 528-3333
 Cell: (432) 528-4444
 Work:

Inspection Type: Standard

| Item | Operational | Inoperative | N/A |
|-----------------------------|-------------------------------------|--------------------------|--------------------------|
| Aerator: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Irrigation pump: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Air compressor: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Disinfection device: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Chlorine supply: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Spray field vegetation: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sprinkler / Drip backwash: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Controls/ Electric Circuits | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Air Pressure 60

Test Results and observations: (As Required)
 Chlorine Residual: 0.22
 Test Method: DPD
 BOD: _____
 TSS: _____
 Access Ports Secured YES / NO
 Repairs made: YES / NO

Mixed Liquor
 Aeration _____
 Sludge Levels 36
 Clarifier _____
 Pump 0.2

Repairs and Comments:

Inspector: Tom Hampton
 Tom Hampton VP
 MP349/OS24597

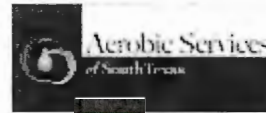
Date: 3-2-21

Gate code: **Please mail insp report

Area: / 0
 GPS: ID = 61112761

846 Phantom Rider Trail, Spring Branch

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133



ENTERED

Phone: (830) 964-2365
 Fax: (830) 964-2659
 www.aerobicservices.com
Permit #: 108073

Printed: 12/17/2020

To: Vance & Beverly Lane Solar Aire
846 Phantom Rider
Spring Branch, TX 78070

Tech: Not Assigned
 Brand/Mfg.: Solar Aire 600 LP0220 -
 System S/N:
 Aerator and S/N:

Site: 846 Phantom Rider Trail, Spring Branch
 Agency: Comal County Environmental Health
 County: Comal
 Subdivision: Cypress Spgs on the Guadalupe1

Contract: 2/25/2019 - 2/25/2021
 Inspections per year: 3
 Service Due: **2/25/2021**
 Alt Phone:

Inspection Type: Scheduled

| Item | Operational | Inoperative | N/A |
|-----------------------------|-------------|-------------|-----------|
| Aerator: | <u>/</u> | <u> </u> | <u> </u> |
| Irrigation pump: | <u>/</u> | <u> </u> | <u> </u> |
| Air compressor: | <u>/</u> | <u> </u> | <u> </u> |
| Disinfection device: | <u>/</u> | <u> </u> | <u> </u> |
| Chlorine supply: | <u>/</u> | <u> </u> | <u> </u> |
| Spray field vegetation: | <u>/</u> | <u> </u> | <u> </u> |
| Sprinkler / Drip backwash: | <u>/</u> | <u> </u> | <u> </u> |
| Controls/ Electric Circuits | <u>/</u> | <u> </u> | <u> </u> |

Air Pressure 70

Test Results and observations: (As Required)
 Chlorine Residual: 0.49
 Test Method: D&S
 BOD: _____
 TSS: _____
 Access Ports Secured YES/NO
 Repairs made: YES/NO

Mixed Liquor
 Aeration 12
 Sludge Levels
 Clarifier 0
 Pump 0

Repairs and Comments:

Inspector: Tom Hampton
 Tom Hampton VP
 MP349/OS24597

Date: 3-2-21

~~3-2-21~~
solar aerobic on right side behind bldg

Area: / 0
 GPS: ID = 61115032

846 Phantom Rider Trail, Spring Branch

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133

MAILED



Phone: (830) 964-2365

Fax: (830) 964-2659

www.aerobicservices.com

Customer ID

61115032

Contract Period

Start Date: 10/13/2021

End Date: 10/13/2022

(432) 528-4444

Email: vancelane@gmail.com

Permit: 108073

To: **Vance & Beverly Lane Solar Aire (new building)**
846 Phantom Rider
Spring Branch, TX 78070

Site: 846 Phantom Rider Trail, Spring Branch, TX 78070

County: Comal

Installer: Joe Mitchell Trucking

Agency: Comal County Environmental Health

Mfg/Brand: -Solar Aire 600 LP0220-

Aerobic Services of South Texas

3 visits per year - one every 4 months

**ROUTINE MAINTENANCE AND INSPECTION AGREEMENT
RENEWAL CONTRACT**

General

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

1. 3 inspections a year/services calls (at least one every 4 months), for a total of 3 over the one year period including inspection, adjustment and servicing of the mechanical, electrical and other applicable component parts to ensure proper function. This includes inspecting control panel, air pumps, air filters, diffuser operation. Any alarm situation affecting the proper function of the Aerobic process will be addressed within a 48-hour time frame. Repair work on non-warranty parts will include price for parts & labor. The prices will be quoted before work is performed.
2. An effluent quality inspection consisting of a visual check for color, turbidity, scum overflow and examination for odors. A test for chlorine residual and PH will be taken and reported as necessary.
3. If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified immediately in writing of the conditions and estimated date of correction.
4. The client is responsible for chlorine; Must be filled before or during the service visit.
5. Any additional visits, inspections or sample collection required by specific Municipalities, Water/River Authorities, County Agencies the TCEQ or any other authorized regulatory agency in your jurisdiction will be covered by this policy.

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

ACCESS BY CONTRACTOR

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

Termination of Agreement

as possible.

Termination of Agreement

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

Limit of Liability

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

Dispute Resolution

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

Entire Agreement

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

Severability

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

OWNER

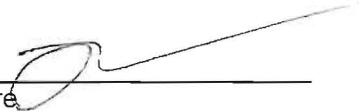
Vance Lane
Signature

Vance Lane
Printed

(432) 528-4444
Phone/ Date

SERVICE PROVIDER

Aerobic Services of South Texas Inc.
15188 FM 306
Canyon Lake, Tx 78133


Signature
Tom Hampton VP

License# OS0024597 / MP 349

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133



ENTER

Phone: (830) 964-2365
 Fax: (830) 964-2659
 www.aerobicservices.com
Permit #: 108073

Printed: 10/13/2021

To: Vance & Beverly Lane Solar Aire (new building)
846 Phantom Rider
Spring Branch, TX 78070

MAILED

Tech: Not Assigned
 Brand/Mfg.: Solar Aire 600 LP0220 -
 System S/N:
 Aerator and S/N:

Site: 846 Phantom Rider Trail, Spring Branch
 Agency: Comal County Environmental Health
 County: Comal
 Subdivision: Cypress Spgs on the Guadalupe1

Phone: (432) 528-4444
 Cell:
 Work:

Contract: 10/13/2021 - 10/13/2022
 Inspections per year: 3
 Service Due: 10/13/2021
 Alt Phone:

①

Inspection Type: 5th Annual

| Item | Operational | Inoperative | N/A |
|-----------------------------|-------------|-------------|-------------|
| Aerator: | <u>/</u> | <u> </u> | <u> </u> |
| Irrigation pump: | <u>/</u> | <u> </u> | <u> </u> |
| Air compressor: | <u>/</u> | <u> </u> | <u> </u> |
| Disinfection device: | <u>/</u> | <u> </u> | <u> </u> |
| Chlorine supply: | <u>/</u> | <u> </u> | <u> </u> |
| Spray field vegetation: | <u>/</u> | <u> </u> | <u> </u> |
| Sprinkler / Drip backwash: | <u>/</u> | <u> </u> | <u> </u> |
| Controls/ Electric Circuits | <u>/</u> | <u> </u> | <u> </u> |

Air Pressure 50

Test Results and observations: (As Required)
 Chlorine Residual: 1.59
 Test Method: dpm
 BOD:
 TSS:
 Access Ports Secured YES / NO
 Repairs made: YES / NO

Mixed Liquor Aeration 0
 Sludge Levels Clarifier 12
 Pump 0

Repairs and Comments:

Inspector: THK
 Tom Hampton VP
 MP349/OS24597

Date: 10-18-21

solar aerobic on right side behind bldg

Area: / 0
 GPS:

ID = 61115032

846 Phantom Rider Trail, Spring Branch

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133



Phone: (830) 964-2365
 Fax: (830) 964-2659
 www.aerobicservices.com
Permit #: 108073

Printed: 12/28/2021

To: Vance & Beverly Lane Solar Aire (new building)
846 Phantom Rider
Spring Branch, TX 78070

Tech: Not Assigned
 Brand/Mfg.: Solar Aire 600 LP0220 -
 System S/N:
 Aerator and S/N:

Site: 846 Phantom Rider Trail, Spring Branch
 Agency: Comal County Environmental Health
 County: Comal
 Subdivision: Cypress Spgs on the Guadalupe1

Contract: 10/13/2021 - 10/13/2022
 Inspections per year: 3
 Service Due: **2/13/2022**
 Alt Phone: 2
 Phone: (432) 528-4444
 Cell:
 Work:

Inspection Type: Scheduled

| Item | Operational | Inoperative | N/A | |
|-----------------------------|-------------------|-------------------|-------------------|------------------------|
| Aerator: | <u> </u> | <u> </u> | <u> </u> | Air Pressure <u>58</u> |
| Irrigation pump: | <u> </u> | <u> </u> | <u> </u> | |
| Air compressor: | <u> </u> | <u> </u> | <u> </u> | |
| Disinfection device: | <u> </u> | <u> </u> | <u> </u> | |
| Chlorine supply: | <u> </u> | <u> </u> | <u> </u> | |
| Spray field vegetation: | <u> </u> | <u> </u> | <u> </u> | |
| Sprinkler / Drip backwash: | <u> </u> | <u> </u> | <u> </u> | |
| Controls/ Electric Circuits | <u> </u> | <u> </u> | <u> </u> | |

Test Results and observations: (As Required)
 Chlorine Residual: 0.01
 Test Method: DPD
 BOD: _____
 TSS: _____
 Access Ports Secured YES / NO
 Repairs made: YES / NO

Mixed Liquor
 Aeration 0
 Sludge Levels
 Clarifier 0
 Pump 0

Repairs and Comments: NW IPT

Inspector: Dakota
 Tom Hampton VP
 MP349/OS24597

Date: 2/17/22

3746gc
solar aerobic on right side behind bldg

Area: / 0
 GPS: ID = 61115032

846 Phantom Rider Trail, Spring Branch

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133

MAILED



ENTERED

Printed: 3/23/2022

Phone: (830) 964-2365
 Fax: (830) 964-2659
 www.aerobicservices.com
Permit #: 108073

To: Vance & Beverly Lane Solar Aire (new building)
846 Phantom Rider
Spring Branch, TX 78070

Tech: Not Assigned
 Brand/Mfg.: Solar Aire 600 LP0220 -
 System S/N:
 Aerator and S/N:

Contract: 10/13/2021 - 10/13/2022
 Inspections per year: 3
 Service Due: 6/13/2022
 Alt Phone:

Site: 846 Phantom Rider Trail, Spring Branch

Agency: Comal County Environmental Health

County: Comal

Subdivision: Cypress Spgs on the Guadalupe1

Phone: (432) 528-4444

Cell:

Work:

3

Inspection Type: Scheduled

| Item | Operational | Inoperative | N/A |
|-----------------------------|-------------|-------------|-----------|
| Aerator: | <u>/</u> | <u> </u> | <u> </u> |
| Irrigation pump: | <u>/</u> | <u> </u> | <u> </u> |
| Air compressor: | <u>/</u> | <u> </u> | <u> </u> |
| Disinfection device: | <u>/</u> | <u> </u> | <u> </u> |
| Chlorine supply: | <u>/</u> | <u> </u> | <u> </u> |
| Spray field vegetation: | <u>/</u> | <u> </u> | <u> </u> |
| Sprinkler / Drip backwash: | <u>/</u> | <u> </u> | <u> </u> |
| Controls/ Electric Circuits | <u> </u> | <u> </u> | <u> </u> |

Air Pressure 140

1x Treatment

Test Results and observations: (As Required)

Chlorine Residual: 52

Test Method: DPD

BOD:

TSS:

Access Ports Secured YES / NO

Repairs made: YES / NO

Mixed Liquor Aeration 52
 Sludge Levels
 Clarifier 16
 Pump 4

Repairs and Comments:

Inspector: Jeff
 Tom Hampton VP
 MP349/OS24597

Date: 6/9/22

solar aerobic on right side behind bldg

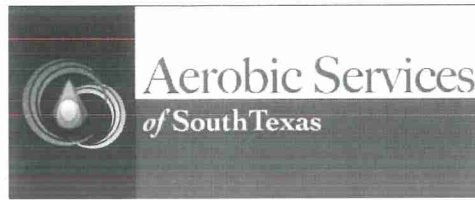
Area: / 0

GPS:

ID = 61115032

846 Phantom Rider Trail, Spring Branch

ROUTINE MAINTENANCE AND INSPECTION AGREEMENT



Vance & Beverly Lane Solar Aire New
846 Phantom Rider Trail
Spring Branch, TX 78070
P: (432) 528-4444

COUNTY: Comal

PERMIT: 108073

AGREEMENT LENGTH: 12 mos.

| DESCRIPTION | TERM | AMOUNT | TAX | TOTAL |
|------------------------------|----------------|--------|-----|--------|
| Residential Service Contract | 12/13/22 - '23 | 370.00 | | 370.00 |

GENERAL

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

- 1. 3 inspections per year (1 every 4 months), for a total of 3 over the one year period including inspection**, adjustment and servicing of the mechanical, electrical and other applicable component parts to ensure proper function. This includes inspecting control panel, air pumps, air filters, diffuser operation. Any alarm situation affecting the proper function of the Aerobic process will be addressed within a 48-hour time frame. Repair work on non-warranty parts will include price for parts & labor. The prices will be quoted before work is performed.
2. An effluent quality inspection consisting of a visual check for color, turbidity, scum overflow and examination for odors. A test for chlorine residual and PH will be taken and reported as necessary.
3. If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified immediately in writing of the conditions and estimated date of correction.
4. The client is responsible for chlorine. Must be filled before or during the service visit.
5. Any additional visits, inspections or sample collection required by specific Municipalities, Water/River Authorities, County Agencies the TCEQ or any other authorized regulatory agency in your jurisdiction will be covered by this policy.

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

ACCESS BY CONTRACTOR

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

Termination of Agreement

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

Limit of Liability

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

Dispute Resolution

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

Entire Agreement

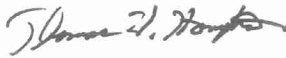
This Agreement contains the entire agreement of the parties, and there are no other promises or conditions in any other agreement either oral or written.

Severability

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

SERVICE PROVIDER

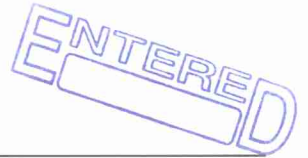
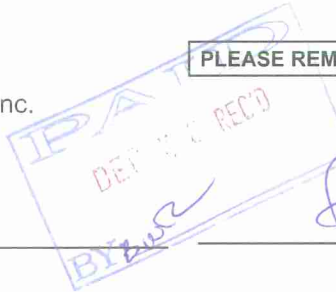
Aerobic Services of South Texas Inc.
15188 FM 306
Canyon Lake, Tx 78133



Signature

Tom Hampton VP

| | |
|--------------|--------|
| PLEASE REMIT | 370.00 |
|--------------|--------|



Customer Signature

License# OS0024597 / MP 349

*****To pay online, proceed to the "Billing" section in your Customer Portal**

IF MAILING YOUR RENEWAL: PLEASE RETURN THIS PORTION ALONG WITH YOUR PAYMENT For Service at: 846 Phantom Rider Trail, Spring Branch, TX 78070



Vance & Beverly Lane Solar Aire New

PERMIT: 108073

COUNTY: Comal

TERM: 12/13/22 - '23

AGREEMENT LENGTH: 12 mos.

| | |
|--------------|--------|
| PLEASE REMIT | 370.00 |
|--------------|--------|

Residential Service Contract

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133



(830) 964-2365
Fax: (830) 964-2659
www.aerobicservices.com

To: Vance & Beverly Lane Solar Aire New
846 Phantom Rider Trail
Spring Branch, TX 78070
Agency: CCEH
County: Comal
Permit No: 108073

Tech: Chris Bausch
Phone: (432) 528-4444 Date: 2023-01-06
Alt Ph: _____ Service Due: _____

Inspection Type: Scheduled

| Item | Operational | Inoperative | N/A |
|-------------------------------|-------------------------------------|--------------------------|--------------------------|
| Aerator: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Irrigation pump: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Air compressor: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Disinfection device: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Chlorine supply: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Spray field vegetation: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sprinkler / Drip backwash: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Controls / Electric Circuits: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Air Pressure: 62

Test Results and observations: (As Required)

Chlorine Residual: 0.03
Test Method: Dpd
BOD: _____
TSS: _____
Access Ports Secured: Yes / NO
Repairs Made: Yes / NO

Mixed Liquor Aeration: 0

Sludge Levels

Clarifier: 10
Pump: 0

Repairs and Comments:

CB

Inspector: _____ Date: 2023-01-06

Tom Hampton VP
MP349/OS24597

Aerobic Services of South Texas
15188 FM 306
Canyon Lake, TX 78133



Canyon Lake: (830) 964-2365
Bastrop: (512) 303-6922
 info@aerobicservices.com
 bastrop@aerobicservices.com
MP349 / OS24597
www.aerobicservices.com

To: Vance & Beverly Lane Solar Aire New
846 Phantom Rider Trail
Spring Branch, TX 78070
 Agency: Comal
 County: Comal
 Permit No: 108073

Tech: Marc
 Phone: (432) 528-4444 Date: 2023-10-13
 Alt Ph: _____ Service
 Due: _____

Inspection Type: Scheduled

| Item | Operational | Inoperative | N/A |
|-------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| Aerator: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Irrigation pump: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Air compressor: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Disinfection device: | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Chlorine supply: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Spray field vegetation: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sprinkler / Drip backwash: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Controls / Electric Circuits: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Air Pressure: 55

Test Results and Observations: (As Required)

Chlorine Residual: 0.08
 Test Method: Dpd
 BOD: _____
 TSS: _____

Mixed Liquor
 Aeration: 0

Sludge Levels
 Clarifier: 12
 Pump: 3

Access Ports Secured: Yes / NO
 Repairs Made: Yes / NO

Repairs and Comments:
 Everything is working as it should. No issues.

Inspector: _____ Date: 2023-10-13

Tom Hampton, VP
 MP349/OS24597

Aerobic Services
15188 FM 306
Canyon Lake, TX 78133



Canyon Lake: (830) 964-2365
Bastrop: (512) 303-6922
info@aerobicervices.com
bastrop@aerobicervices.com
MP349 / OS24597
www.aerobicervices.com

To: Vance & Beverly Lane Solar Aire New
846 Phantom Rider Trail
Spring Branch, TX 78070
Agency: _____
County: _____
Permit No: 108073

Tech: Seth
Phone: (432) 528-4444 Date: 2024-02-20
Alt Ph: _____ Service _____
Due: _____

Inspection Type: Scheduled.

| Item | Operational | Inoperative | N/A |
|-------------------------------|-------------|-------------|-----|
| Aerator: | [X] | [] | [] |
| Irrigation pump: | [X] | [] | [] |
| Air compressor: | [X] | [] | [] |
| Disinfection device: | [X] | [] | [] |
| Chlorine supply: | [X] | [] | [] |
| Spray field vegetation: | [X] | [] | [] |
| Sprinkler / Drip backwash: | [X] | [] | [] |
| Controls / Electric Circuits: | [X] | [] | [] |

Air Pressure: 44

Test Results and Observations: (As Required)

Chlorine Residual: 0.08
Test Method: Dpd
BOD: _____
TSS: _____

Mixed Liquor
Aeration: 0

Sludge Levels

Clarifier: 12
Pump: 0

Access Ports Secured: Yes [X] / NO []

Repairs Made: Yes [] / NO [X]

Repairs and Comments:

System is functioning as designed.

Inspector: _____

Date: 2024-02-20

Tom Hampton, VP
MP349/OS24597