



Comal County
OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: **01/08/2019** Permit Number: **108134**

Location Description: 2631 WEGNER RD
NEW BRAUNFELS, TX 78132
Subdivision: Royal Forest
Unit:
Lot: 7
Block:
Acreage:

Type of System: Aerobic
Surface Irrigation

Issued to: Jose & Ana Ortiz

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

James F. Conroy
ENVIRONMENTAL HEALTH INSPECTOR

OS0032485

Brenda A. [Signature]
ENVIRONMENTAL HEALTH COORDINATOR
OS0007722

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Countryside OSSF Installer #: 050002929
 1st Inspection Date: 11-29-18 2nd Inspection Date: _____ 3rd Inspection Date: 12-18-18 *final*
 Inspector Name: Comar Inspector Name: _____ Inspector Name: Comar
 Permit#: 108134 Address: 2631 Wegner Rd

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)	R.V. x 2	/		
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 operational cover
 covered 12-18-18

**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)(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)		/		
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						

*Cover
Covered*

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Countryside OSSF Installer #: 050002929

1st Inspection Date: 11-29-18 2nd Inspection Date: _____ 3rd Inspection Date: _____

Inspector Name: Connor Inspector Name: _____ Inspector Name: _____

Permit#: 108134 Address: 2631 Wegner Rd

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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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)	R.V. x 2	/		
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7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

tank set level operational 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	/			/		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	/		Noweco 600 GPD	/		
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)	<i>aerobic spray</i>	/		
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)				

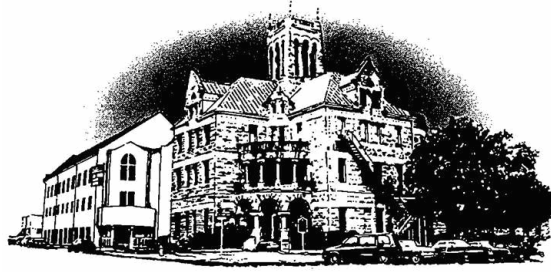
**Comal County Environmental Health
OSSF Inspection Sheet**

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)		/		
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>						
39	<p>PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried</p>	/			/		

**Comal County Environmental Health
OSSF Inspection Sheet**

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44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

Cover



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: 108134
Issued This Date: 09/27/2018
This permit is hereby given to: Jose & Ana Ortiz

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

2631 WEGNER RD
NEW BRAUNFELS, TX 78132

Subdivision: Royal Forest

Unit:

Lot: 7

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.

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

Items Date Received	Initials

108134
Permit Number

Instructions:

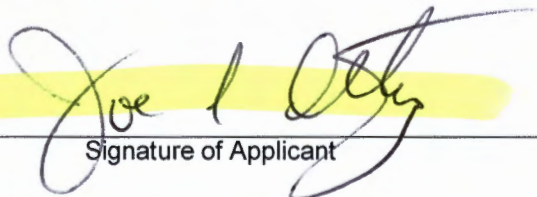
Place a check mark next to all items that apply. For items that do not apply, place "N/A". This OSSF Development Application Checklist **must** accompany the completed application.

OSSF Permit

- Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate
- Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer
- Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist of a scaled design and all system specifications.
- Required Permit Fee
- Copy of Recorded Deed
- Surface Application/Aerobic Treatment System
 - Recorded Certification of OSSF Requiring Maintenance/Affidavit to the Public
 - Signed Maintenance Contract with Effective Date as Issuance of License to Operate

RECEIVED
SEP 19 2018
COUNTY ENGINEER

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


Signature of Applicant

9/18/18
Date

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

<input type="checkbox"/> 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 9/10/2018

Permit # 108134

Owner Name Jose & Ana Ortiz
Mailing Address 8122 Chestnut Manor Drive
City, State, Zip Converse, Texas 78109
Phone # 210-887-3292
Email jloanaj@yahoo.com

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

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

Subdivision Name Royal Forest Unit _____ Lot 7 Block _____

Acreage/Legal _____

Street Name/Address 2631 Wegner Road City New Braunfels Zip 78132

Type of Development:

Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) Two RV's

Number of Bedrooms N/A

Indicate Sq Ft of Living Area N/A

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Commercial or Institutional Facility

(Planning materials must show adequate land area for doubling the required land needed for treatment units and disposal area)

Type of Facility _____

Offices, Factories, Churches, Schools, Parks, Etc. - Indicate Number Of Occupants _____

Restaurants, Lounges, Theaters - Indicate Number of Seats _____

Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds _____

Travel Trailer/RV Parks - Indicate Number of Spaces _____

Miscellaneous _____

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

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

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

Source of Water Public Private Well

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

By signing this application, I certify that:

- The completed application and all additional information submitted does not contain any false information and does not conceal any material facts.
- Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities..
- I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Jose & Ana Ortiz
Signature of Owner

9/10/18
Date

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

108134

Planning Materials & Site Evaluation as Required Completed By Brian Exleben, R.S. 3637

System Description Aerobic Treatment/Surface Application

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

Tank Size(s) (Gallons) 600 gpd Absorption/Application Area (Sq Ft) 6038

Gallons Per Day (As Per TCEQ Table III) 120

(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

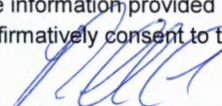
If yes, indicate the city: _____

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COUNTY ENGINEER

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

9-10-18
Date

Page 2 of 2

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SEP 19 2018

THE COUNTY OF COMAL *
STATE OF TEXAS

*

COUNTY ENGINEER

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities, this document is filed in the Deed Records of COMAL COUNTY, TEXAS.

I

The Texas Health and Safety Code, Chapter 366, authorizes the Texas Commission on Environmental Quality (commission) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 5.013, gives the TCEQ primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety Code, requires owners to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission that the appropriate OSSF was installed.

II

An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91(12) will be installed on the property described as:

UNIT	BLOCK	LOT 7	SUBDIVISION	<i>Royal Forest</i>
IF NOT IN SUBDIVISION: ACRES SURVEY				

The property is owned by Jose & Ana Ortiz.

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

Upon sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the **Comal County Environmental Health Department**.

WITNESS MY HAND ON THIS 18 DAY OF September, 2018.

Jose L. Ortiz
OWNER/AGENT NAME (SIGNATURE)

Jose L. Ortiz
OWNER/AGENT NAME (PRINTED)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 18 DAY OF September, 2018



Jordan N. Wunsch
Notary Public, State of Texas

Notary's Printed Name: Jordan nicole Wunsch

Commission Expires: June 23, 2019



This page has been added to comply with the statutory requirement that the clerk shall stamp the recording information at the bottom of the last page.

This page becomes part of the document identified by the file clerk number affixed on preceding pages.

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SEP 19 2018

COUNTY ENGINEER

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
09/19/2018 02:42:17 PM
JESSICA 2 Page(s)
201806037086



Bobbie Koepf

Countryside Construction, Inc.
300 Chapman Parkway, Canyon Lake, TX. 78133
Phone: 830-899-2615 or 1-888-379-3721 Fax: 830-899-6662
Septic System Service Agreement

In consideration of payment for this service contract, we will abide by and agree to its terms and conditions:

Name: Jose & Ana Ortiz **Address:** 2631 Wegner Road
Sub-Div./County: Comal **City, State-Zip:** New Braunfels, Texas 78132
Permit #: _____ **Model #:** Norweco 960-600 **Serial #:** _____
Phone #: 210-887-3292

Initial Two Year Service Agreement & Two Year Limited Warranty One Year Service Agreement RECEIVED

The effective date of this initial maintenance contract shall be the date the License to Operate is issued. SEP 19 2018

Legal Description: Lot 7, Royal Forest

COUNTY ENGINEER

This contract will be in effect FROM _____ TO _____ and will provide the following:

- A: An inspection/service call every (4) four months which will include: inspection, adjustments and servicing of the mechanical & electrical components as necessary to insure proper function of the system.
- B: An effluent quality inspection consisting of a visual check for color, turbidity, scum, overflow and odor.
- C: **The property owner is responsible for "purchasing and keeping chlorine" in the chlorinator, (if applicable). If the chlorine test reveals "No Chlorine" in the system, the property owner may incur an additional cost.**
- D: If any improper operation is observed (which cannot be corrected at that time) the property owner will be notified immediately of the conditions and the estimated cost.
- E: The response time to a complaint by the property owner regarding operation of the system, shall be within "48 hours," from the time of notification.
- F: **ANY PARTS, WARRANTY OR NON-WARRANTY, OR FREIGHT CHARGES, LABOR OR SERVICE CALLS DUE NOT PAID FOR REMAIN THE PROPERTY OF COUNTRYSIDE CONSTRUCTION AND COULD RESULT IN REPOSSION OF PARTS BY COUNTRYSIDE CONSTRUCTION.**
- G: **THE SIGNING OF THIS SERVICE AGREEMENT AUTHORIZES COUNTRYSIDE CONSTRUCTION TO ENTER THE PROPERTY TO EXECUTE ALL TERMS OF THIS CONTRACT.**

Countryside Construction, Inc., will warranty installation of the septic system to be according to state and county regulations and the designs approved by the county. **HOMEOWNER WILL BE RESPONSIBLE FOR SERVICE CALLS, LABOR AND SHIPPING COSTS ON ANY "WARRANTED PARTS" EXCHANGED DURING WARRANTY.** All other components will be according to manufacture's warranties.

Important: As Countryside Construction, Inc. **cannot control what or how much effluent** goes into this septic system, we **cannot warranty** how the system will function. Refer to manufacturers or installer's instructions, for suggestions on septic operation. This service agreement **does not** cover the cost of "Service Calls, Labor or Materials that are required or parts out of warranty, the failure to maintain electrical power to the system, sprinklers that are broken, leaking, stopped-up or otherwise mal-functioning; or sewage flows exceeding the hydraulic/organic design capabilities and the input of non-biodegradable materials (solvents, grease, oil, paints, etc.), or any usage contrary to the requirements as advised by authorized service representative. Laboratory test work is available at an additional cost. Chlorine, filters, or parts that are out of warranty are available at a reasonable cost.

This contract **does not** include the **pumping of a tank** or of any **compartment of a tank, or settlement of soil on or around any part of the system regardless of reason:**

Violations of the warranty also include: Disconnecting the alarm, restricting ventilation to the aerator, over loading the system above its rated capacity; or flooding by external means. Rodent, insect or Fire Ant damage or any other form of unusual abuse is a violation.

A renewal service contract **should be "Activated" (30) thirty days** before **expiration** of existing contract. We will contact property owner prior to expiration of existing contract.

Serviced by: Countryside Construction Inc.
Walker Chapman - Operator Licensee #2929

(X) Jose L Ortiz Print Name (X) JOSE L ORTIZ Date: 9/18/18
 Property Owner Signature
 (X) Walker Chapman Date: _____ Authorized Service Representative (revised 10/9/09)

OSSF SOIL EVALUATION REPORT INFORMATION
COMAL COUNTY

DATE: 7-7-18

Applicant Information:

Name: Jose & Ana Ortiz
Address: 8122 Chestnut Manor Drive
City: Converse State: Texas Zip: 78109
Ph: (210) 887-3292 Fax:

Site Evaluator Information:

Name: Brian Erxleben
Address: 562 S. Hwy 123 Bypass #128
City: Seguin State: Texas Zip: 78155
Ph: (830) 660-9133 E-mail: bandverx@gmail.com

Property Location:

Lot: 7 Block:
Subdivision: Royal Forest
Street/Road Address: 2631 Wegner Road
City: New Braunfels State: TX Zip: 78132
Additional:

Installer Information:

Name: Walker Chapman, OS0002929
Company: Countryside Construction
Address: 300 Chapman Parkway
City: Canyon Lake State: TX Zip: 78133
Ph: (830) 899-2615 Fax:

SCHEMATIC of LOT of TRACT

Show:

- North arrow, adjacent streets, property lines, dimensions, location of buildings, easements, swimming pools, water lines, and other structures where known.
- Location of existing or proposed water wells within 150 feet of property.
- Indicate slope or provide contour lines from the structure to the farthest location for the proposed soil absorption or irrigation area.
- Location of soil boring or dug pits (show with respect to a known reference point).
- Location of drainage ways, water impoundment areas, cut or fills bank, sharp slopes and breaks.

Lot Size: 2.23 acres

SITE DRAWING

SEE SITE PLAN

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FEATURES OF SITE AREA

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

Site Evaluator:

NAME: BRIAN ERXLEBEN Signature:  License No: 11458

COMAL COUNTY ENVIRONMENTAL HEALTH DEPARTMENT OSSF SOIL EVALUATION FORM

Owners Name: Jose & Ana Ortiz
 Physical Address: 2631 Wegner Road New Braunfels, Texas 78132
 Name of Site Evaluator: Brian Erxleben, S.E. #11458
 Date Performed: 7-6-18 Proposed Excavation Depth: N/A

Requirements:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil evaluation must be shown on the application site drawing or designer's site drawing
 For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.
 Please describe each soil horizon and identify any restrictive features in the space provided below. Draw lines at the appropriate depths.

SOIL BORING NUMBER <u>1 & 2</u>						
Depth (Feet)	Texture Class	Soil Texture	Structure (For Class III-blocky, platy or massive)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0	Rock				Yes	Aerobic Spray
1						
2						
3						
4						
5						

SOIL BORING NUMBER _____						
Depth (Feet)	Texture Class	Soil Texture	Structure (For Class III-blocky, platy or massive)	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0						
1						
2						
3						
4						
5						

FEATURES OF SITE AREA

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

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

Signature of Site Evaluator: _____

Date _____

[Handwritten Signature]

9-10-18

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

OSSF DESIGN

Owner: **Jose & Ana Ortiz**
Location: **2631 Wegner Road New Braunfels, Texas 78132**
Phone: **(210) 887-3292**
Date: **9-10-18**

Development: **Two RV's** Bedrooms: **N/A** Sq. Ft: **N/A** GPD/RV: **60**

Q: **120 gpd** Soil: **Type 4** R_i: **0.064 gall/ft²/day**

System Type: **Aerobic/Surface Application (Norweco 960-600 GPD with Pump Chamber)**

Minimum Required ATU Treatment Capacity: **400 gpd**

Trash Tank: 450 gall Aerobic Tank: 600 gpd Pump Tank: 994 gall

Supply Line: **Sch 40 1" purple (~200')** Check Valve Required: **No**

Minimum Application Area (A): **938 ft²** (A = Q/R_i)

Sprinklers: **Nelson 5500/6000 13° Trajectory**

Number	Nozzle	PSI	Pattern	Radius	Area/head	GPM/head	R _i
S1	#7	35	360°	31 ft	3019 ft ²	3.1	0.064
S2	#7	35	360°	31 ft	3019 ft ²	3.1	0.064

Overlap Area: 0 Actual Application Area: **6038 ft²** GPM: **6.2 GPM** RECEIVED

TDH Calculations:

$$\text{Friction Head}(H_f) = \frac{1.2(10.4397)(L)(Q)^{1.85}}{(C)^{1.85}(D)^{4.8655}} = 9 \text{ ft}$$

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

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

Q = Flow rate, gpm

D = Internal pipe diameter, inches

Pressure Head (H_p) = **81 ft (2.31)(psi)** Elevation Head (H_e) = **5 ft**

TDH = **94 ft (H_f + H_p + H_e)**

Pump Requirements: **6.2 GPM @ 95 ft TDH** Pump Used: **Norweco HB105**

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

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N43°10'E 180.5'

S46°30'E 602.80'

S46°30'E 602.80'

30% SLOPE DOWN



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9-10-18



LOT 7
ROYAL FOREST
2.23 ACRES

LOT IS LOCATED OUTSIDE OF THE 100-YEAR FLOODPLAIN AND WITHIN THE EDWARDS AQUIFER RECHARGE ZONE. THERE IS NO EXISTING WPAP FOR THIS SUBDIVISION. DEVELOPMENT IS A SINGLE FAMILY DWELLING WITH <20% IMPERVIOUS COVER AND A WPAP IS NOT REQUIRED.

NOTES:

1. Design is for two RV's.
2. Install a 2-way cleanout for each RV in a 3" sch 40 tightline to the ATU, minimum slope 1/8 in/ft.
3. ATU is a Norweco Singular Bio-Kinetic Model 960-600 with pump chamber.
4. Supply line to the sprinklers is purple 1" sch 40.
5. S1 and S2 are Hunter 6095 low angle sprinklers with #7 nozzles operating @ 35 psi, 360° pattern, 31' radius.
6. There shall be no obstruction within 10' of the sprinkler heads.
7. Audible & visual alarms, external disconnect within site of the pump tank, pump & alarms on separate breakers and external wiring in conduit are required.
8. Timer set to spray between 12:00 AM & 5:00 AM.
9. Tablet or liquid chlorinator.
10. Any excavations and/or exposed rock in the disposal area shall be covered with topsoil and seasonal grasses shall be seeded over the disposal area in order to minimize run-off & erosion.

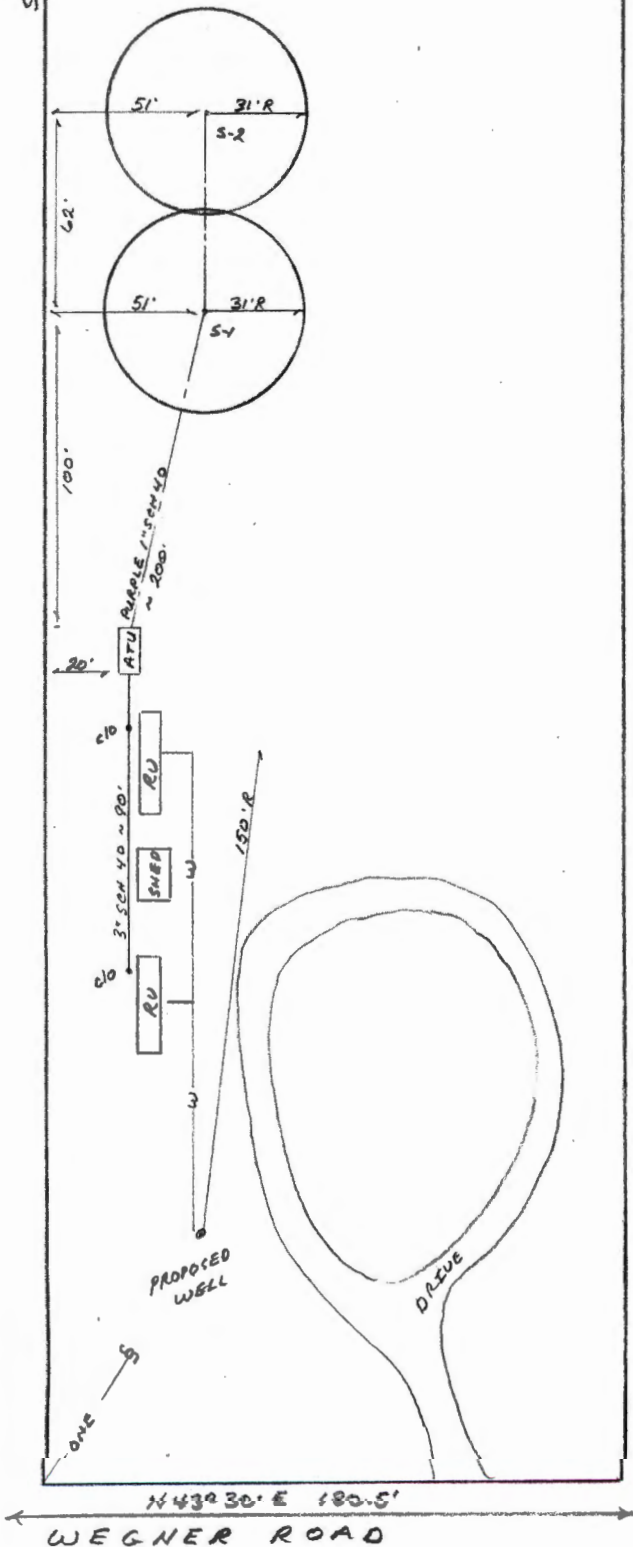
SITE PLAN & OSSF DESIGN:

JOSE & ANA ORTIZ
2631 WEGNER ROAD
NEW BRAUNFELS, TEXAS 78132

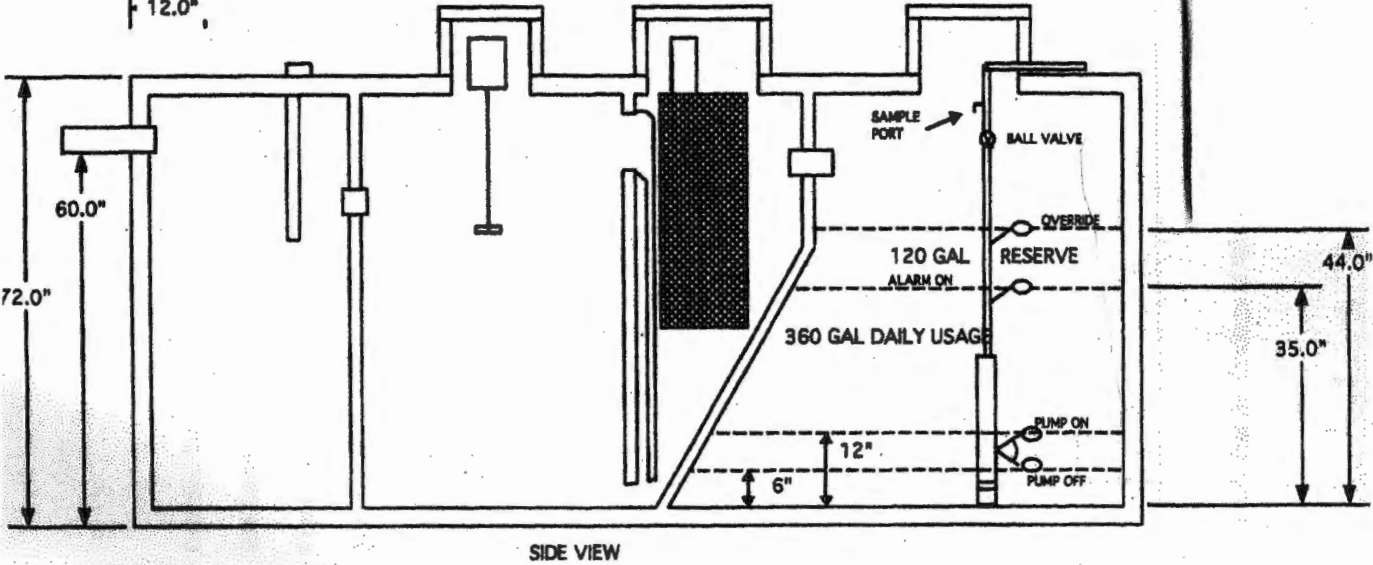
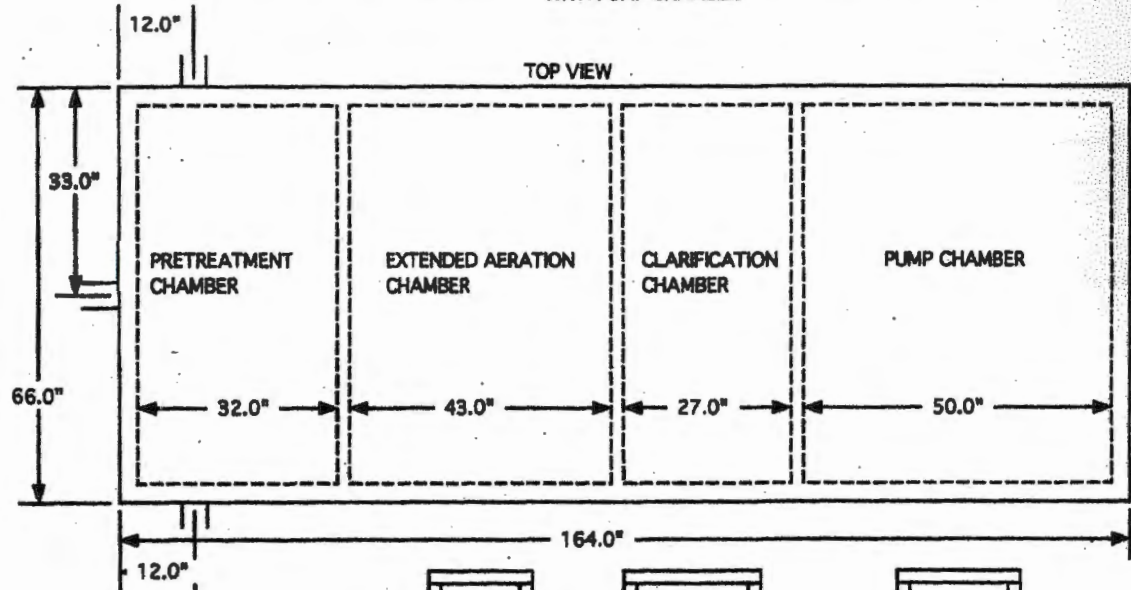
BRIAN C. ERXLEBEN, R.S.
562 S. HWY 123 BYPASS #128
SEGUIN, TEXAS 78155
(830) 660-9133

DATE: 9-10-18

SCALE: 1" = 60'



NORWECO SINGULAR BIO-KINETIC WASTEWATER TREATMENT SYSTEM MODEL 960-600 GPD
WITH PUMP CHAMBER



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fed

at the base of hillsides where risers are not appropriate and where liability is a concern

- Five-year warranty on materials and workmanship

Pressure	Max Radius	Min Radius	Discharge	Precipitation Rate ¹		Nozzle Number	Pressure		Max Radius	Min Radius	Discharge		Precipitation Rate ¹	
				IN/HR■	IN/HR▲		BAR	kPa			m	m	L/min	m ³ /hr
20	30	23	1.0	0.21	0.27	4	1.4	138	9.2	8.9	3.8	0.23	5.4	6.8
35	31	23	1.4	0.28	0.35		2.5	242	9.5	7.1	5.3	0.32	7.1	8.9
50	34	26	1.7	0.28	0.35		3.5	345	10.4	7.8	6.4	0.39	7.2	9.0
20	33	25	1.2	0.21	0.26	5	1.4	138	10.1	7.5	4.5	0.27	5.4	6.7
35	37	28	1.6	0.23	0.28		2.5	242	11.3	8.5	6.1	0.36	5.7	7.1
50	38	29	1.9	0.25	0.32		3.5	345	11.6	8.7	7.2	0.43	6.4	8.0
20	32	24	1.4	0.26	0.33	6	1.4	138	9.8	7.3	5.3	0.32	6.7	8.3
35	38	29	1.9	0.25	0.32		2.5	242	11.6	8.7	7.2	0.43	6.4	8.0
50	40	30	2.3	0.28	0.35		3.5	345	12.2	9.2	8.7	0.52	7.0	8.8
20	38	29	2.2	0.29	0.37	7	1.4	138	11.6	8.7	8.3	0.50	7.5	9.3
35	40	30	2.7	0.33	0.41		2.5	242	12.2	9.2	10.2	0.61	8.3	10.3
50	41	31	3.1	0.36	0.44		3.5	345	12.5	9.4	11.7	0.70	9.0	11.3
35	38	29	3.1	0.41	0.52	8	2.5	242	11.6	8.7	11.7	0.70	10.5	13.1
50	42	32	4.0	0.44	0.54		3.5	345	12.8	9.6	15.1	0.91	11.1	13.8
65	43	32	4.6	0.48	0.60		4.6	449	13.1	9.8	17.4	1.04	12.2	15.2
35	42	32	4.2	0.46	0.57	9	2.5	242	12.8	9.6	15.9	0.95	11.6	14.5
50	47	35	5.4	0.47	0.59		3.5	345	14.3	10.8	20.4	1.23	12.0	14.9
65	48	36	6.3	0.53	0.66		4.6	449	14.6	11.0	23.8	1.43	13.4	16.7
35	42	32	5.4	0.59	0.74	10	2.5	242	12.8	9.6	20.4	1.23	15.0	18.7
50	48	36	6.8	0.57	0.71		3.5	345	14.6	11.0	25.7	1.54	14.4	18.0
65	49	37	8.0	0.64	0.80		4.6	449	14.9	11.2	30.3	1.82	16.3	20.3
35	42	32	6.4	0.70	0.87	11	2.5	242	12.8	9.6	24.2	1.45	17.7	22.1
50	48	38	8.1	0.68	0.84		3.5	345	14.6	11.0	30.7	1.84	17.2	21.4
65	51	38	9.5	0.70	0.88		4.6	449	15.6	11.7	36.0	2.16	17.9	22.3

Pressure	Max Radius	Min Radius	Discharge	Precipitation Rate ¹		Nozzle Number	Pressure		Max Radius	Min Radius	Discharge		Precipitation Rate ¹	
				IN/HR■	IN/HR▲		BAR	kPa			m	m	L/min	m ³ /hr
20	26	20	0.9	0.26	0.32	4	1.4	138	7.9	5.9	3.4	0.20	6.5	8.1
35	33	25	1.3	0.23	0.29		2.5	242	10.1	7.5	4.9	0.30	5.8	7.3
50	34	26	1.5	0.25	0.31		3.5	345	10.4	7.8	5.7	0.34	6.3	7.9
20	26	20	1.1	0.31	0.39	5	1.4	138	7.9	5.9	4.2	0.25	8.0	9.9
35	33	25	1.4	0.25	0.31		2.5	242	10.1	7.5	5.3	0.32	6.3	7.8
50	35	26	1.7	0.27	0.33		3.5	345	10.7	8.0	6.4	0.39	6.8	8.5
20	26	20	1.4	0.40	0.50	6	1.4	138	7.9	5.9	5.3	0.32	10.1	12.6
35	33	25	1.9	0.34	0.42		2.5	242	10.1	7.5	7.2	0.43	8.5	10.6
50	36	27	2.3	0.34	0.43		3.5	345	11.0	8.2	8.7	0.52	8.7	10.8
20	31	23	2.5	0.50	0.62	7	1.4	138	9.5	7.1	9.5	0.57	12.7	15.9
35	35	26	3.1	0.49	0.61		2.5	242	10.7	8.0	11.7	0.70	12.4	15.4
50	37	28	3.5	0.49	0.61		3.5	345	11.3	8.5	13.2	0.79	12.5	15.6
35	32	24	3.2	0.60	0.75	8	2.5	242	9.8	7.3	12.1	0.73	15.3	19.1
50	38	29	4.0	0.53	0.67		3.5	345	11.6	8.7	15.1	0.91	13.8	16.9
65	39	29	4.7	0.60	0.74		4.6	449	11.9	8.9	17.8	1.07	15.1	18.9
35	34	26	3.9	0.65	0.81	9	2.5	242	10.4	7.8	14.8	0.89	16.5	20.6
50	37	28	4.9	0.69	0.86		3.5	345	11.3	8.5	18.5	1.11	17.5	21.8
65	40	30	5.7	0.69	0.86		4.6	449	12.2	9.2	21.6	1.29	17.4	21.7
35	33	25	5.1	0.90	1.12	10	2.5	242	10.1	7.5	19.3	1.16	22.9	28.8
50	39	29	6.4	0.81	1.01		3.5	345	11.9	8.9	24.2	1.45	20.6	25.7
65	42	32	7.5	0.82	1.02		4.6	449	12.8	9.6	28.4	1.70	20.8	25.9

¹ Precipitation rates for square and triangular spacing calculated at 50% of diameter for half-circle operation. Assumes zero wind for precipitation and radius. Adjust for local conditions.



PRO 6000 SERIES

Nozzle color ●

25° trajectory

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6095 LOW ANGLE

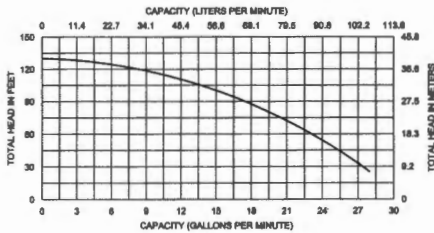
Nozzle color ●

13° trajectory

(optional for 6000 series only)

MODEL HB105 EFFLUENT PUMP

Designed specifically for pumping filtered effluent in high pressure applications, the Norweco Model HB105, 1/2 hp, 115 volt, single phase submersible pump delivers 15 gpm at 100' TDH.



FEATURES

- UL & CSA listed
- 10' jacketed power cord
- Stainless steel construction
- Built-in overload protection
- 1 1/4" NPT discharge
- Continuous duty motor
- Built-in surge protection
- Hermetically-sealed windings
- Versatile and efficient
- Built-in check valve
- Capacities to 28 gpm
- Heads to 125'
- Screened bottom intake



SPECIFICATIONS

The pump shall be a Norweco Model HB105 high head submersible pump, designed to handle filtered effluent and be capable of passing 1/16" spherical solids. The 115 volt, single phase, 60 cycle pump shall be capable of running dry for short durations without damage to the motor or pump end.

The pump motor shall be 1/2 horsepower rated and operate at 3450 RPM. The motor assembly shall consist of a corrosion resistant, all stainless steel exterior construction and incorporate a dual action starting switch to provide automatic torque reversal. An electrical surge and overload protector shall be attached to the top end of the motor windings and shall be wired in series to automatically cease operation when the winding temperature reaches 266° F. The 10' long motor power cord shall be 14-3 jacketed, type SJOW. The cable jacket shall be sealed at the motor entrance by means of a rubber compression washer and compression nut. The pump impeller shall be of the six vane enclosed type, constructed of engineered thermoplastic. The impeller shall have a hexagonal I.D. and be positively driven by a hexagonal 300 series stainless steel pump shaft. The pump shall be the product of a manufacturer having at least seven years experience in the construction of submersible pumps. The pump shall be warranted by the manufacturer against defects in material and workmanship for a period of one year under normal use and service.

NORWECO
NORWALK WASTEWATER EQUIPMENT COMPANY

220 REPUBLIC STREET
NORWALK, OHIO, USA 44857-1196
TELEPHONE (419) 668-4471
FAX (419) 663-5440
www.norweco.com

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PROGRESS THROUGH SERVICE SINCE 1906

V $\frac{2+1}{TC}$
Independence Title Company
GF# 1519492-NBF

201506026175_Pages: 3

General Warranty Deed

Notice of confidentiality rights: If you are a natural person, you may remove or strike any or all of the following information from any instrument that transfers an interest in real property before it is filed for record in the public records: your Social Security number or your driver's license number.

Date: June 30, 2015

Grantor: RICHARD C. GARZA and ANGELITA GARZA, husband and wife

Grantor's Mailing Address:

510 Rasa Drive
San Antonio, Texas 78227
Bexar County

Grantee: JOSE LUIS ORTIZ and ANA B. ORTIZ, husband and wife

Grantee's Mailing Address:

8122 Chestnut Manor Drive
Converse, Texas 78109
Bexar County

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Consideration: Cash and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged.

Property (including any improvements):

Lot 7,, ROYAL FOREST SUBDIVISION, according to the map or plat thereof, recorded in Volume 4, Page 4, Map and Plat Records, Comal County, Texas.

Reservations from Conveyance: None.

Exceptions to Conveyance and Warranty: Liens described as part of the Consideration and any other liens described in this deed as being either assumed or subject to which title is taken; validly existing easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded and validly existing restrictions, reservations, covenants, conditions, oil and gas leases, mineral interests, and water interests outstanding in persons other than Grantor, and other instruments, other than conveyances of the surface fee estate, that affect the Property; validly existing rights of adjoining owners in any walls and fences situated on a common boundary; any discrepancies, conflicts, or shortages in area or boundary lines; any encroachments or overlapping of improvements; and taxes for 2015, which Grantee assumes and agrees to pay, and subsequent assessments for that and prior years due to change in land usage, ownership, or both, the payment of



COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE, TX 78133

Phone: 830-899-2615
 Fax: 830-899-6662

TESTING AND REPORTING RECORD

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1 Inspection Date: **SEPTEMBER 1, 2019** Installed: **1/8/2019** Service Expires: **1/8/2021**

BILLING ADDRESS:

PHYSICAL ADDRESS:

JOSE ORTIZ
 281 WEGNER RD
 NEW BRAUNFELS, TX 78132

281 WEGNER RD
 NEW BRAUNFELS, TX 78132

TELEPHONE: 210-887-3292 *W. Long*
 ALT. PHONE: #

LOT: LT 7

PERMIT # 108134
 COUNTY: COMAL
 SN: 900001XS
 MAPSCO: NOT AVAILABLE

SUBDIVISION: ROYAL FORREST Manufacturer: N960SS-600

NOTES: **CLEAN EFFLUENT FILTER DURING JANUARY INSPECTION**
Has gate call ahead
 TYPE OF SYSTEM: SPRAY

Inspected Item:	Operational	Imperative
Aerators SCFM/Compressors PSI (Record Pressure Reading)	3.0	
Filters	-	
Irrigation Pumps	-	
Recirculation Pumps	NA	
Disinfection Device	-	
Chlorine Supply	-	
Electrical Circuits	-	
Distribution System	-	
Sprayfield Vegetation	-	
Back Flush Dip Held, if applicable	NA	
Other as Noted		
Access Posts are Secured	Yes	No

2 Action taken or Repairs or Needed repairs to system (list all components replaced):

CRD Aerator

CRD pump

CRD Floats

Alarm & Sprayers

CRD Chlorine

3 Tests required and results:

	Required		Results ng/l mpn/100ml or Trace	Test Method
	Yes	No		
BOD(Grab)				
TSS(Grab)				
Cl(Grab)	/		1.0	OTI
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: Richard 9

Date of completion: 9-9-19 Start Job Time: 10:55 Stop Job Time: 11:07

Maintenance Provider: Walter Chapman

COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE, TX 78133

Phone: 830-899-2615
 Fax: 830-899-6662

TESTING AND REPORTING RECORD

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: JANUARY 1, 2020 Installed: 1/8/2019 Service Expires: 1/8/2021

BILLING ADDRESS:
 JOSE ORTIZ
 2631 WEGNER RD
 NEW BRAUNFELS, TX 78132

PHYSICAL ADDRESS:
 2631 WEGNER RD
 NEW BRAUNFELS, TX 78132

TELEPHONE: 210-887-3292
 ALT. PHONE:

LOT: LT 7,

PERMIT#: 108134

COUNTY: COMAL

SN: 900001XS

MAPSCO: N/A

SUBDIVISION: ROYAL FORREST Manufacturer: N960SS-600

NOTES: CLEAN EFFLUENT FILTER DURING JANUARY INSPECTION

TYPE OF SYSTEM: SPRAY

Inspected Item: Operational Inoperative

Inspected Item:	Operational	Inoperative
Aerators		
SCFM/Compressors PSI		
Record Pressure Reading	2-0	
Filters	-	
Irrigation Pumps	-	
Recirculation Pumps	N/A	
Disinfection Device	-	
Chlorine Supply	-	
Electrical Circuits	-	-
Distribution System	-	
Sprayfield Vegetation	-	
Back Flush Drip Field, if applicable	N/A	
Other as Noted		

2. Action taken or Repairs or Needed repairs to system (list all components replaced):

Rodded Aerator
 cleaned Effluent Filter
 CK'd pump floats
 Alarms & Sprayers
 CK'd chlorine

SYSTEM OPERATING AS DESIGNED? Yes No

Access Pds are Secured

Yes

No

3. Tests required and results:

	Required		Results mg/l npr/100ml or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)		-		
Cl (Grab)	-		1-0	OTO
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: Richard

9

Date of completion: 2-18-20 Start Job Time: 9:50 Stop Job Time: 10:10

Maintenance Provider: Wolken Chapman

COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE, TX 78133

Phone: 830-899-2615
 Fax: 830-899-6662

TESTING AND REPORTING RECORD

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: MAY 1, 2020 Installed: 1/8/2019 Service Expires: 1/8/2021

BILLING ADDRESS:
 JOSE ORTIZ
 2631 WEGNER RD
 NEW BRAUNFELS, TX 78132

PHYSICAL ADDRESS:
 2631 WEGNER RD
 NEW BRAUNFELS, TX 78132

TELEPHONE: 210-887-3292
 ALT. PHONE:

LOT: LT 7,

PERMIT#: 108134

COUNTY: COMAL

SN: 900001XS

NAFSCO: N/A

SUBDIVISION: ROYAL FORREST MFG: N960SS-600

NOTES: CLEAN EFFLUENT FILTER DURING JANUARY INSPECTION

TYPE OF SYSTEM: SPRAY

Inspected Item:	Operational	Inoperative	2. Action taken or Repairs or Needed repairs to system (list all components replaced):
Aerators			
SCFM/Compressors PSI (Record Pressure Reading)	2.0		Rodded Aerator
Filters	-		
Irrigation Pumps	-		CKA pump
Recirculation Pumps	N/A		
Disinfection Device	-		Floats Alarms
Chlorine Supply	-		
Electrical Circuits	-		2 Sprayers
Distribution System	-		
Sprayfield Vegetation	-		CKB chlorine
Back Flush Drip Field, if applicable	N/A		
Other as Noted			
Access Posts are Secured			SYSTEM OPERATING AS DESIGNED? <input checked="" type="checkbox"/> Y/N
			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

3. Tests required and results:

	Required		Results mg/l mpn/100ml or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)				
Cl (Grab)	✓		1.0	OTO
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: Richard

9

Date of completion: 5/30/20 Start Job Time: _____ Stop Job Time: _____

Maintenance Provider: Wolfe Group

COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE, TX 78133

Phone: 830-899-2615
 Fax: 830-899-6662

TESTING AND REPORTING RECORD

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: **SEPTEMBER 1, 2020** Installed: 1/8/2019 Service Expires: 1/8/2021

BILLING ADDRESS:
JOSE ORTIZ
2631 WEGNER RD
NEW BRAUNFELS, TX 78132

PHYSICAL ADDRESS:
2631 WEGNER RD
NEW BRAUNFELS, TX 78132

TELEPHONE: **210-887-3292**
 ALT. PHONE:

LOT: **LT 7,**

PERMIT#: **108134**
 COUNTY: **COMAL**
 SN: **900001XS**
 MAPSCO: **N/A**

SUBDIVISION: **ROYAL FORREST** MFG: **N960SS-600**

NOTES: **CLEAN EFFLUENT FILTER DURING JANUARY INSPECTION**
 TYPE OF SYSTEM: **SPRAY**

Inspected Item:	Operational	Inoperative	2. Action taken or Repairs or Needed repairs to system (list all components replaced):
Aerators			
SCFM/Compressors PSI (Record Pressure Reading)	2.0		CKD pump
Filters	-		
Irrigation Pumps	-		CKD iterator
Recirculation Pumps	N/A		
Disinfection Device	-		CKD Sprayers
Chlorine Supply	-		
Electrical Circuits	-		CKD cubing
Distribution System	-		
Sprayfield Vegetation	-		(LOT)
Back Flush Drip Field, if applicable	N/A		
Other as Noted			
Address Posts are Secured			SYSTEM OPERATING AS DESIGNED <input checked="" type="checkbox"/> N

3. Tests required and results:

	Required		Results mg/l mpn/100ml or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)				
Cl (Grab)	-		1.0	OTO
Fecal Coliform				

Copies of this report have been forwarded to the following: **COMAL county / homeowner.**

Maintenance Technician: **Richard**

9

Date of completion: **10-29-20** Start Job Time: _____ Stop Job Time: _____

Maintenance Provider: **Walker Chapman**

COUNTRYSIDE CONSTRUCTION, INC.
800 CHAPMAN PARKWAY
CANYON LAKE, TX 78149

Phone: 830 849-2515
Fax: 830 899 6667

TESTING AND REPORTING RECORD

WA

2631 WEGNER RD
NEW BRAUNFELS, TX 78133

2631 WEGNER RD
NEW BRAUNFELS, TX 78133

PI2 update
210-885-7246

CLEAR EFFLUENT FILTER DURING TANK RE-INSPECTION
SPRAY

Inspected Item	2.0	cleared Filter
Inspected Item	=	Rodded Aerator
Inspected Item	NA	ckd pump
Inspected Item	=	Floats Alarms
Inspected Item	=	& Sprayers ckd
Inspected Item	=	chlorine
Inspected Item	NA	

SYSTEM OPERATING AS OF 2/5/21 6

Required	clear	gms
Actual	1.0	etc

Richard
2-5-21
Walkerby