

Comal County

OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: 03/20/2019 Permit Number: 108157

Location Description: 338 QUARTERHORSE LN FISCHER, TX 78623

Subdivision: Stallion Springs
Unit: 1
Lot: 19
Block:
Acreage:

Type of System: Aerobic Surface Irrigation

Issued to: Construction by Design, Inc.

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

[Signature]

ENVIRONMENTAL HEALTH INSPECTOR

[Signature]

ENVIRONMENTAL HEALTH COORDINATOR

OS 0025599

OS0034322

11:15

# Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Countryside Const OSSF Installer #: \_\_\_\_\_

1st Inspection Date: 3.5.19 2nd Inspection Date: 3.19.19 3rd Inspection Date: \_\_\_\_\_

Inspector Name: S Helms Inspector Name: Andrea R. Inspector Name: \_\_\_\_\_

Permit#: 908157 Address: 338 Quaterhouse Ln - Stallion Springs

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)		3.5.19		
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)				

3/5/19-SH

tank check - need revision.  
set & level of c/o + tank  
operational location before  
ready for sod final

3.19.19

Covered

**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)		3.5.19		
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			
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	✓		Clearstream			
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	✓			3.5.19		
26	DRAINFIELD Area Installed	✓		2000			
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 &lt; 2.0%</p> <p>EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less &amp; an additional 400 ft. for each additional bedroom )</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. &amp; Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) &amp; Pipe Holes ( 3/16 - 1/4" dia. Hole Size ) 5 ft. Apart</p>		<p>285.33(b)(3)(A)</p> <p>285.33(b)(3)(A)</p> <p>285.33(b)(3)(B)</p> <p>285.91(13)</p> <p>285.33(b)(3)(D)</p> <p>285.33(b)(3)(F)</p>				
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 &amp; Risers Provided.</p> <p>AEROBIC TREATMENT UNIT Secondary restraint system provided</p> <p>AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank</p> <p>AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions</p>	/				/	
35	<p>AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.</p>	✓			3.5.19		
36	<p>PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials &amp; construction</p> <p>PUMP TANK Sampling Port Provided in the Treated Effluent Line</p> <p>PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required</p> <p>PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump</p>						
37	<p>PUMP TANK Inspection/Clean Out Port &amp; Risers Provided</p> <p>PUMP TANK Secondary restraint system provided</p> <p>PUMP TANK Riser permanently fastened to lid or cast into tank</p> <p>PUMP TANK Riser cap protected against unauthorized intrusions</p>						
38	<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	✓			3.5.19		
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**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)				
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						

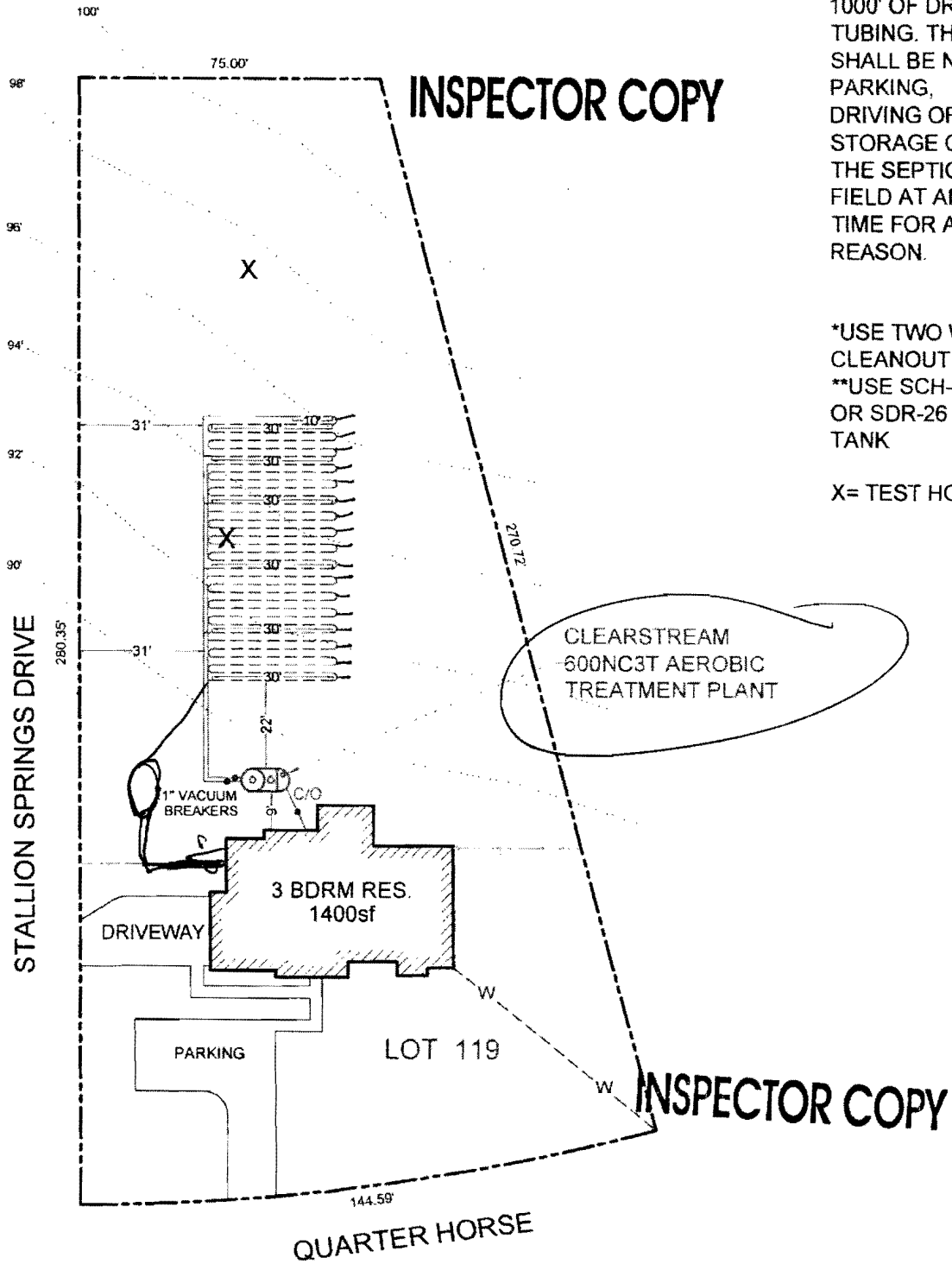
**REVISED**

8:49 am, Jan 22, 2019

INSTALL 2000sf OF FIELD USING 1000' OF DRIP TUBING. THERE SHALL BE NO PARKING, DRIVING OR STORAGE ON THE SEPTIC FIELD AT ANY TIME FOR ANY REASON.

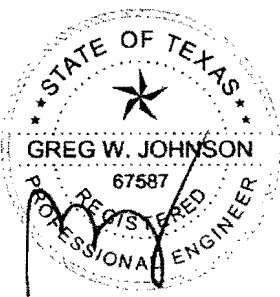
\*USE TWO WAY CLEANOUT  
\*\*USE SCH-40 OR SDR-26 TO TANK

X= TEST HOLE



**INSPECTOR COPY**

**INSPECTOR COPY**



OWNER: CONSTRUCTION by DESIGN, INC.		DRAWN BY: EJS III	
STREET ADDRESS: 338 QUARTER HORSE LANE			
LEGAL DESC: STALLION SPRINGS	UNIT/SECTION/PHASE: 1	BLOCK:	LOT: 19
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=40'	DATE: 7/20/2018	2nd REVISION: 1/7/2019



11:15

# Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Countypipe Const OSSF Installer #: \_\_\_\_\_

1st Inspection Date: 3.5.19 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: \_\_\_\_\_

Inspector Name: S Helmske Inspector Name: \_\_\_\_\_ Inspector Name: \_\_\_\_\_

Permit#: 908157 Address: 338 Quaterhouse Ln - Stallion Springs

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)				
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)				

3/5/19-SH

tank check - need revision.  
set & level of c/o + tank  
operational location before  
ready for sod final


**Comal County Environmental Health  
OSSF Inspection Sheet**

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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			
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	✓		Clearstream			
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
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OSSF Inspection Sheet**

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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	✓			3.5.19		
26	DRAINFIELD Area Installed	✓		2000			
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**

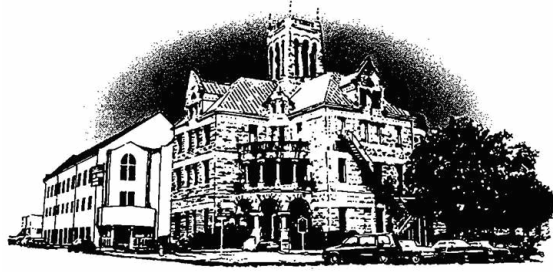
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33	<b>AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.</b>		285.32(c)(1)				
34	<b>AEROBIC TREATMENT UNIT Inspection/Clean Out Port &amp; Risers Provided</b> <b>AEROBIC TREATMENT UNIT Secondary restraint system provided</b> <b>AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank</b> <b>AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions</b>						
35	<b>AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.</b>				3.5.19		
36	<b>PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials &amp; construction</b> <b>PUMP TANK Sampling Port Provided in the Treated Effluent Line</b> <b>PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required</b> <b>PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump</b>						
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Comal County Environmental Health  
OSSF Inspection Sheet

39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried	✓			3.5.19		
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**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)				
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: 108157  
Issued This Date: 10/04/2018  
This permit is hereby given to: Construction by Design, Inc.

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

338 QUARTERHORSE LN  
FISCHER, TX 78623

Subdivision: Stallion Springs  
Unit: 1  
Lot: 19  
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.

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

Date September 18, 2018

Permit # 108157

Owner Name CONSTRUCTION BY DESIGN, INC., Agent Name GREG W. JOHNSON, P.E.
Mailing Address 614 S. BUSINESS IH 35, SUITE C Agent Address 170 HOLLOW OAK
City, State, Zip NEW BRAUNFELS, TX 78130 City, State, Zip NEW BRAUNFELS, TX 78132
Phone# 830-708-4288 Phone # (830) 905-2778
Email jwalne@earthlink.net Email gregjohnsonpe@yahoo.com

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

Subdivision Name STALLION SPRINGS Unit/Phase/Section 1 Lot 19 Block
Acreage/Legal
Street Name/Address 338 QUARTER HORSE LANE City FISCHER Zip 78623

Type of Development:

[X] Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1400

[ ] 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: \$ 185,000 (Structure Only)

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

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

Source of Water [X] Public [ ] Private Well

Are Water Saving Devices Being Utilized Within the Residence? [X] 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 also understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
-I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Signature of Owner [Handwritten Signature]

Date September 18, 2018



#108157

\*\*\* COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH \*\*\*

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

REVISED 8:47 am, Jan 22, 2019

Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.

System Description PROPRIETARY; AEROBIC TREATMENT AND DRIP IRRIGATION

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

Tank Size(s) (Gallons) CLEARSTREAM 600 NC3T Absorption/Application Area (Sq Ft) 2000

Gallons Per Day (As Per TCEQ Table III) 240

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

Is the property located over the Edwards Recharge Zone? [ ] Yes [X] 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 [X] 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? [X] Yes [ ] No

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

(if yes, the P.E. or R.S. 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 [X] No

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



FIRM #2585

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

Signature of Designer (Handwritten Signature)

Date July 20, 2018

**AFFIDAVIT**



201806037510 09/24/2018 11:24:14 AM 1/1

**THE COUNTY OF COMAL  
STATE OF TEXAS**

**CERTIFICATION OF OSSF REQUIRING MAINTENANCE**

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities (OSSF's), 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 (TCEQ) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 5.013, gives the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety code, requires owner's to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

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**II**

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):

SEP 24 2018

COUNTY ENGINEER  
SUBDIVISION

1 UNIT/PHASE/SECTION \_\_\_\_\_ BLOCK 19 LOT \_\_\_\_\_ STALLION ESTATES

IF NOT IN SUBDIVISION: \_\_\_\_\_ ACREAGE \_\_\_\_\_ SURVEY

The property is owned by (insert owner's full name): CONSTRUCTION BY DESIGN, INC., a Texas Corporation

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 18th DAY OF September, 2018

[Signature]  
Owner(s) signature(s)

\_\_\_\_\_  
JEFF WALNE - PRESIDENT  
Owner (s) Printed name (s)

JEFF WALNE  
September, 2018

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 18th DAY OF

[Signature]  
Notary Public Signature

THIS AREA FOR COMAL COUNTY CLERK RECORDING PURPOSES ONLY

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
09/24/2018 11:24:14 AM  
TERRI 1 Page(s)  
201806037510



(Notary Seal Here)



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: CONSTRUCTION BY DESIGN, a Texas Corporation Address: 338 QUARTER HORSE LANE  
Sub-Div./County: STALLION SPRINGS / COMAL City, State-Zip: FISCHER, TX 78623  
Permit #: \_\_\_\_\_ Model #: CLEARSTREAM 600NC3T Serial #: \_\_\_\_\_  
Phone #: 830-708-4288

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

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

Legal Description: STALLION SPRINGS, UNIT 1, LOT 19

This contract will be in effect FROM LTO 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.

RECEIVED

SEP 24 2018

COUNTY ENGINEER

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.

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

[Signature] Print Name  JEFF WALNE Date: SEPT. 18 2018

Walker Chapman Date: 9/18/18 Authorized Service Representative (revised 10/9/09)

**ON-SITE SEWERAGE FACILITY  
SOIL EVALUATION REPORT INFORMATION**

Date Soil Survey Performed: July 19, 2018

Site Location: STALLION SPRINGS, UNIT 1, LOT 19

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 boring or dug pits must be shown on the site drawing.

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

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

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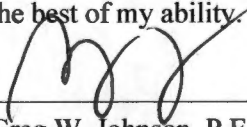
SEP 24 2018

COUNTY ENGINEER

SOIL BORING NUMBER		SURFACE EVALUATION				
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	III	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 6"	BROWN
6"						
1						
2						
3						
4						
5						

SOIL BORING NUMBER		SURFACE EVALUATION				
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	SAME		AS		ABOVE	
1						
2						
3						
4						
5						

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

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

07/19/18  
 \_\_\_\_\_  
 Date



**DRIP TUBING SYSTEM**  
DESIGNED FOR:  
CONSTRUCTION BY DESIGN, INC.  
614 S. BUSINESS IH 35, SUITE C  
NEW BRAUNFELS, TX 78130

**SITE DESCRIPTION:**

Located in Stallion Springs, Unit 1, Lot 19 at 338 Quarter Horse Lane, the proposed system will serve a three bedroom residence (1400sf.) situated in an area with shallow Type-III soil as described in the Soil Evaluation Report. An aerobic treatment plant utilizing drip irrigation was chosen as the most appropriate system to serve the conditions on this lot.

**PROPOSED SYSTEM:**

A 3-inch SCH-40 pipe discharges from the residence into a Clearstream 600gpd aerobic plant containing a 400-gallon pretreatment tank, an aerobic treatment plant, and a 700-gallon pump chamber containing a submersible (0.5 HP Clearstream P-20 or equivalent) well pump. The well pump is activated by a time controller allowing the distribution ten times per day with an 8 minute run time with float setting at 240 gallons. A high level audible and visual alarm will activate should the pump fail. Distribution is through a self flushing 100 micron disc filter (Arkal) then through a 1" SCH-40 manifold to a 2000 sf. drip tubing field, with *Netifim Bioline* drip lines set approximately two feet apart with **0.61 gph** emitters set every two feet, as per the attached schematic. A pressure regulator PMR-MF 30psi installed in the pump tank on the manifold to the field will maintain pressure at 30 psi.

A 1" SCH-40 return line is installed to continuously flush the system by cycling a 1" ball valve. Solids caught in the spin filter are flushed each cycle back to the trash tank. Vacuum breakers installed at the highest point on each manifold will prevent siphoning of effluent from higher to lower parts of the field. Field area will be scarified and built up with ~6" of Type II or Type III soil, then the drip tubing will be laid and capped with ~6" of Type II or Type III soil (**NOT SAND**). The field area will be sodded with grass prior to system startup. **Tank must have at grade risers on each opening with watertight caps that must be at least 65# or have a padlock or can only be removed with tools. A secondary plug, cap, or suitable restraint must be provided below riser cap to prevent tank entry should the cap be damaged or removed, in compliance with Chapter §285.38.**

**DESIGN SPECIFICATIONS:**

Daily waste flow: 240 GPD Table III

Pretreatment tank size: 400 Gal

Plant Size: Clearstream Model 600 NC3T 600gpd (TCEQ Approved)

Pump tank size: 700 Gal

Reserve capacity after High Level: 80 Gal (1/3 day Req'd)

Application Rate:  $R_a = 0.2$  gal/sf

Total absorption area:  $Q/R_a = 240$  GPD/ $0.20 = 1200$  sf. (Actual 2000 sf.)

Total linear feet drip tubing: 1000' *Netifim Bioline* drip tubing .61 GPH

Pump requirement: 500 emitters @ .61 gph @ 30 psi = 5.833 gpm

Pump Requirement (cont.): 0.5 HP Clearstream P-20 or equivalent submersible well pump

MINIMUM SCOUR VELOCITY (MSV) > 2 FPS

IN DRIP TUBING W/ NOM. DIA. 0.55" ID

$$\text{MSV} = 2 \text{ FPS } (\pi d^2 / 4) * 7.48 \text{ gal/cf} * 60 \text{ sec/min}$$

$$\text{MSV} = 2(3.14159((.55/12)^2)/4)*7.48*60$$

$$\text{MSV} = 1.5 \text{ gpm PER LINE} * 3 \text{ LINES} = 4.5 \text{ GPM MIN FLOW RATE}$$

IN RETURN MANIFOLD W/ NOM. DIA 1.049" ID

$$\text{MSV} = 2 \text{ FPS } (\pi d^2 / 4) * 7.48 \text{ gal/cf} * 60 \text{ sec/min}$$

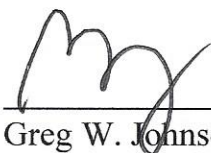
$$\text{MSV} = 2(3.14159((1.049/12)^2)/4)*7.48*60$$

$$\text{MSV} = 5.4 \text{ GPM}$$

### PIPE AND FITTINGS:

All pipes and fittings in this drip tubing system shall be 1" schedule 40 PVC. All joints shall be sealed with approved solvent-type PVC cement. Clipper type cutters are recommended to prevent PVC burrs during cutting of pipes causing possible plugging.

Designed in accordance with Chapter 285, Subchapter D, §285.30 and §285.40 Texas Commission On Environmental Quality. (Effective December 29, 2016)

 01/20/19

Greg W. Johnson, P.E. No. 67587 / F-2585  
170 Hollow Oak  
New Braunfels, Texas 78132  
830/905-2778

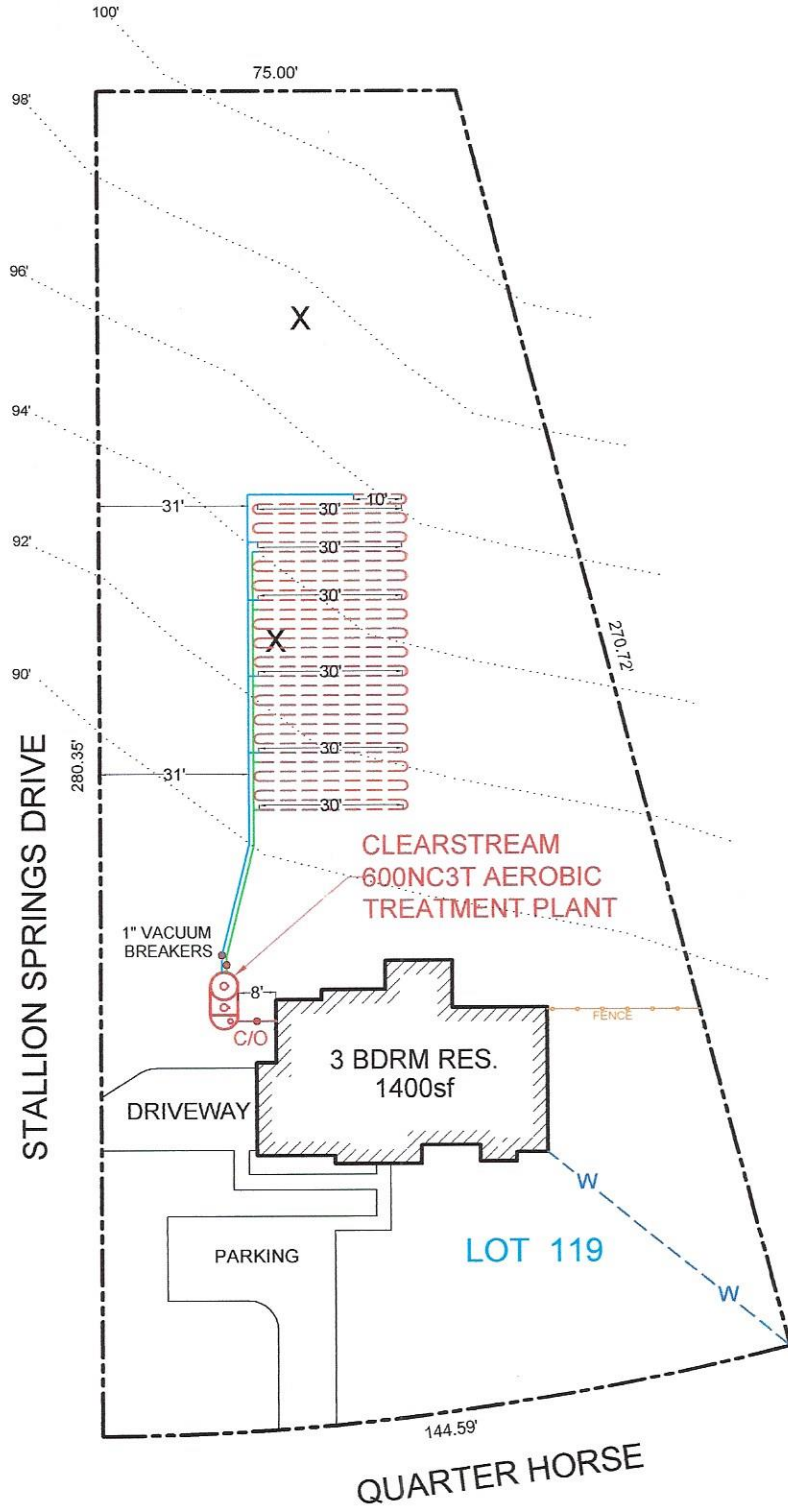


#108157

INSTALL 2000sf OF FIELD USING 1000' OF DRIP TUBING. THERE SHALL BE NO PARKING, DRIVING OR STORAGE ON THE SEPTIC FIELD AT ANY TIME FOR ANY REASON.

\*USE TWO WAY CLEANOUT  
\*\*USE SCH-40 OR SDR-26 TO TANK

X= TEST HOLE



OWNER: CONSTRUCTION by DESIGN, INC.		DRAWN BY: EJS III	
STREET ADDRESS: 338 QUARTER HORSE LANE			
LEGAL DESC: STALLION SPRINGS	UNIT/SECTION/PHASE: 1	BLOCK:	LOT: 19
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=40'	DATE: 7/20/2018	3rd REVISION: 3/5/2019



**TANK NOTES:**

Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

Tightlines to the tank shall be SCH-40 PVC.

A two way sanitary tee is required between residence and tank.

A minimum of 4" of sand, sandy loam, clay loam free of rock shall be placed under and around tanks

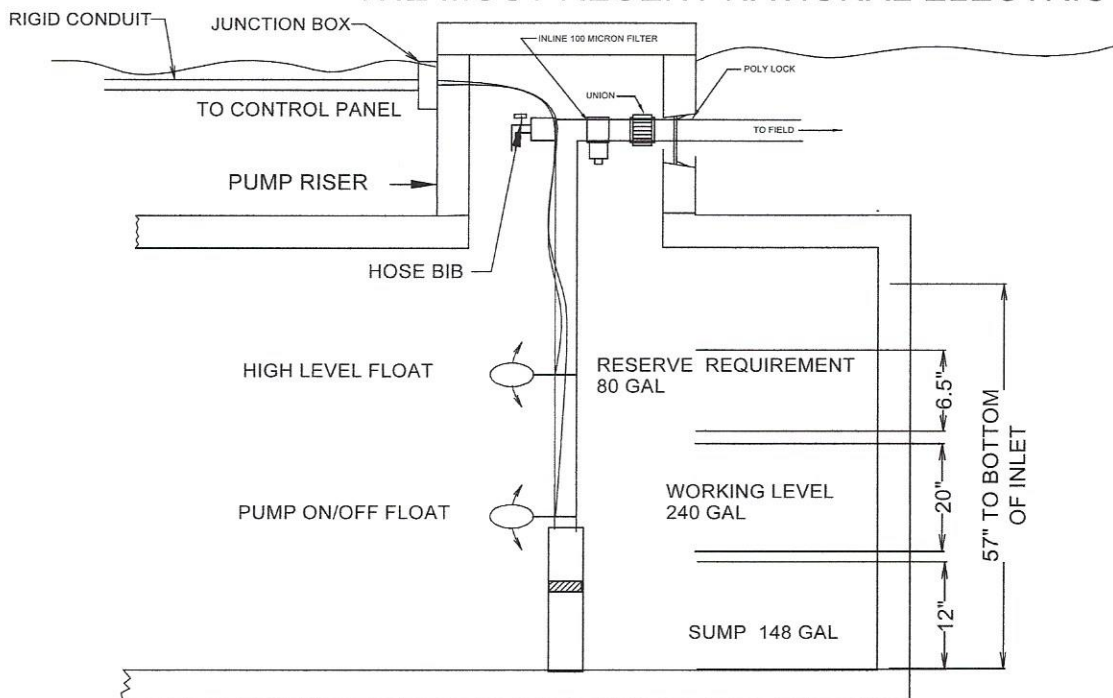
Tanks must be left uncovered and full of water for inspection by the permitting authority.



F-2585

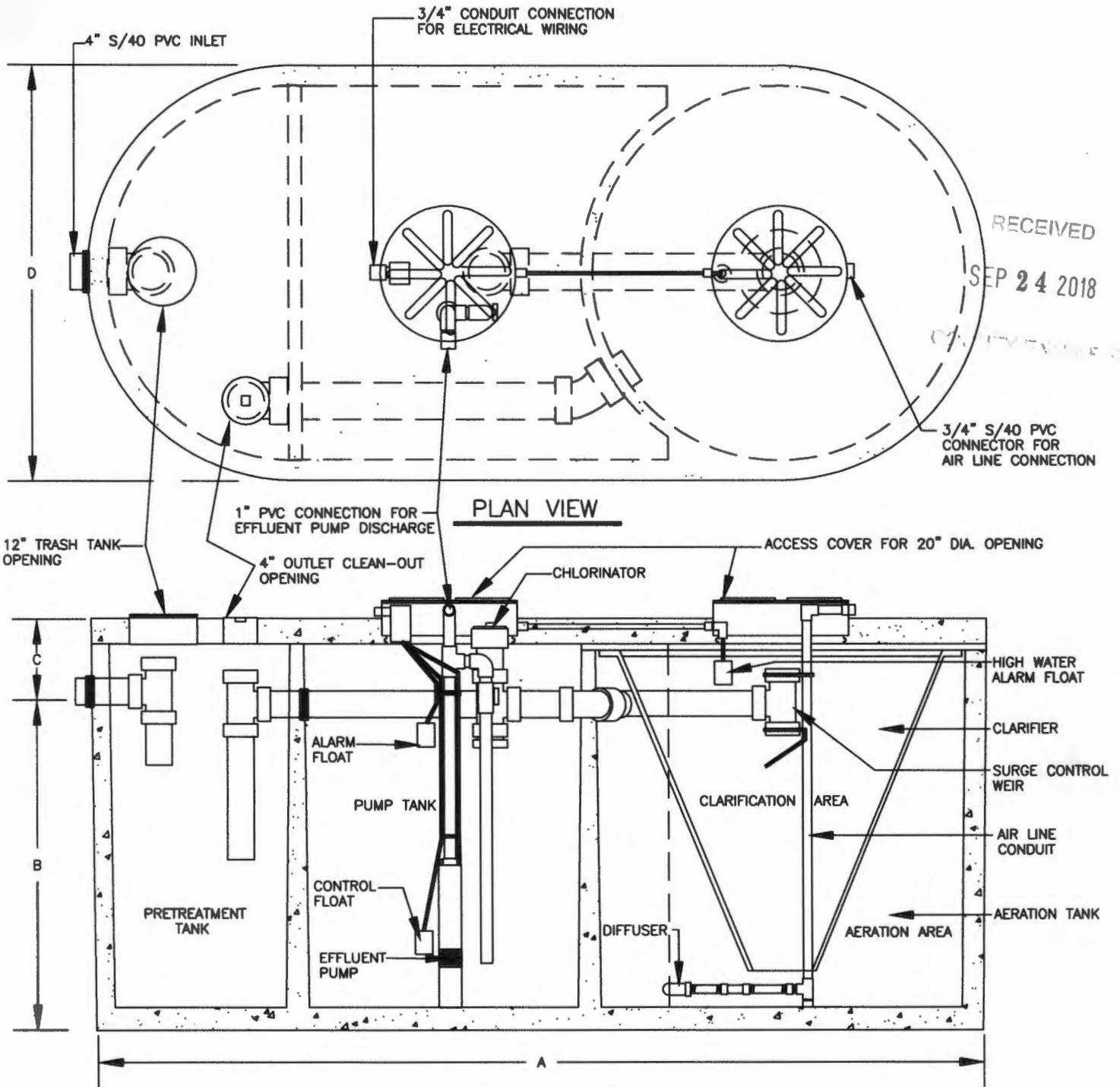
01/20/19

**ALL WIRING MUST BE IN COMPLIANCE WITH THE MOST RECENT NATIONAL ELECTRIC CODE**



**TYPICAL PUMP TANK CONFIGURATION  
CLEARSTREAM 600NC3T W/ 700 GAL PUMP TANK**

# DESIGN DRAWINGS



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**DIMENSIONAL DATA**

MODEL	A	B	C	D
500NC3-500	12'-2"	60"	10"	75"
500NC3-750	13'-5"	60"	10"	75"
600NC3	12'-7"	60"	10"	82"



F-2585

07/20/18

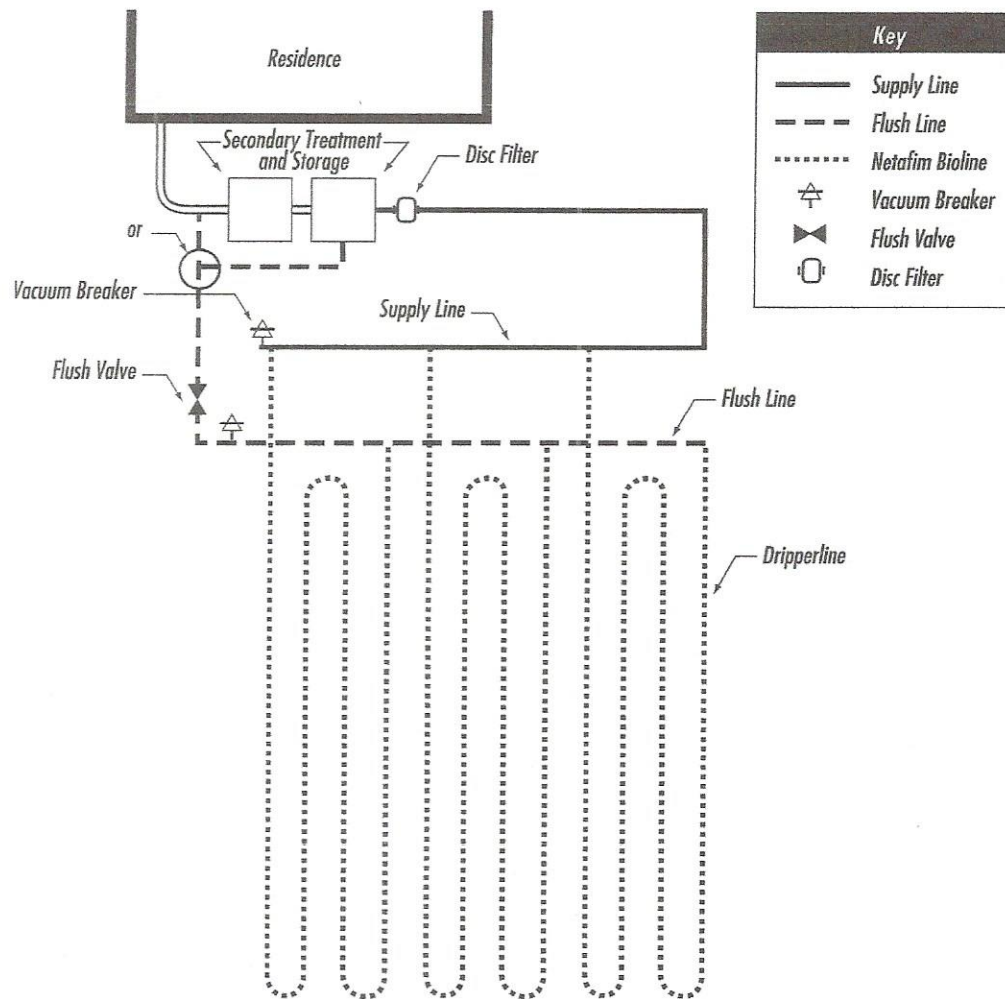
**NETAFIM WASTEWATER DISPERSAL SYSTEM DESIGN GUIDE**

**SAMPLE DESIGNS**

**SINGLE TRENCH LAYOUT**

Rectangular field with supply and flush manifold on same side and in same trench;

- Locate supply and flush manifold in same trench
- Dripperlines are looped at the end opposite the supply and flush manifolds
- The longest Bioline length should not exceed 400 ft. Drip fields 200 ft. in length might loop the Bioline once; drip dispersal fields under 100 ft. might be looped twice, as illustrated



**REVISED**

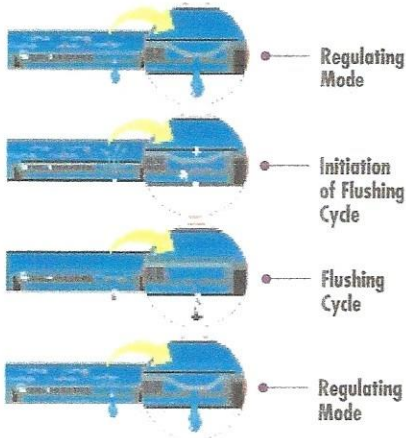
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# Bioline® Dripperline

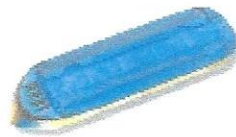


## Pressure Compensating Dripperline for Wastewater



BioLine's Self-Cleaning, Pressure Compensating Dripper is a fully self-contained unit molded to the interior wall of the dripper tubing.

As shown at left, BioLine is continuously self-cleaning during operation, not just at the beginning and end of a cycle. The result is dependable, clog free operation, year after year.



### Product Advantages

#### The Proven Performer

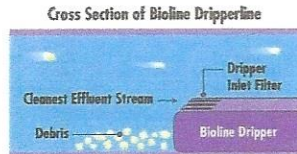
- Tens of millions of feet used in wastewater today.
- BioLine is permitted in every state allowing drip disposal.
- Backed by the largest, most quality-driven manufacturer of drip products in the U.S.
- Preferred choice of major wastewater designers and regulators.
- Proven track record of success for many years of hard use in wastewater applications.

#### Quality Manufacturing with Specifications Designed to Meet Your Needs

- Pressure compensating drippers assure the highest application uniformity - even on sloped or rolling terrain.
- Excellent uniformity with runs of 400 feet or more - reducing installation costs.
- Highest quality-control standards in the industry: Cv of 0.25 (coefficient of manufacturer's variation).
- A selection of flows and spacings to satisfy the designer's demand for almost any application rate.

#### Long-Term Reliability

- Protection against plugging:
  - Dripper inlet raised 0.27" above wall of tubing to prevent sediment from entering dripper.
  - Drippers impregnated with Vinyzene to prevent buildup of microbial slime.
  - Unique self-flushing mechanism passes small particles before they can build up.



#### Root Safe

- A physical barrier on each BioLine dripper helps prevent root intrusion.
- Protection never wears out - never depletes - releases nothing to the environment.
- Working reliably for up to 15 years in subsurface wastewater installations.
- Additional security of chemical root inhibition with Techfilter - supplies Trifluralin to the entire system, effectively inhibiting root growth to the dripper outlets.



### Applications

- For domestic strength wastewater disposal.
- Installed following a treatment process.
- Can be successfully used on straight septic effluent with proper design, filtration and operation.
- Suitable for reuse applications using municipally treated effluent designated for irrigation water.

### Specifications

Wall thickness (mil): 45\*

Nominal flow rates (GPH): .4, .6, .9\*

Common spacings: 12", 18", 24"\*

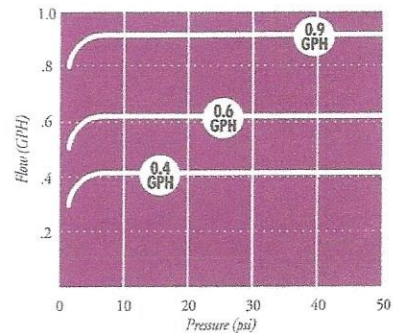
Recommended filtration: 120 mesh

Inside diameter: .570\*

Color: Purple tubing indicates non-potable source

\*Additional flows, spacings, and pipe sizes available by request. Please contact Netafim USA Customer Service for details.

**BIOLINE** Flow Rate vs. Pressure

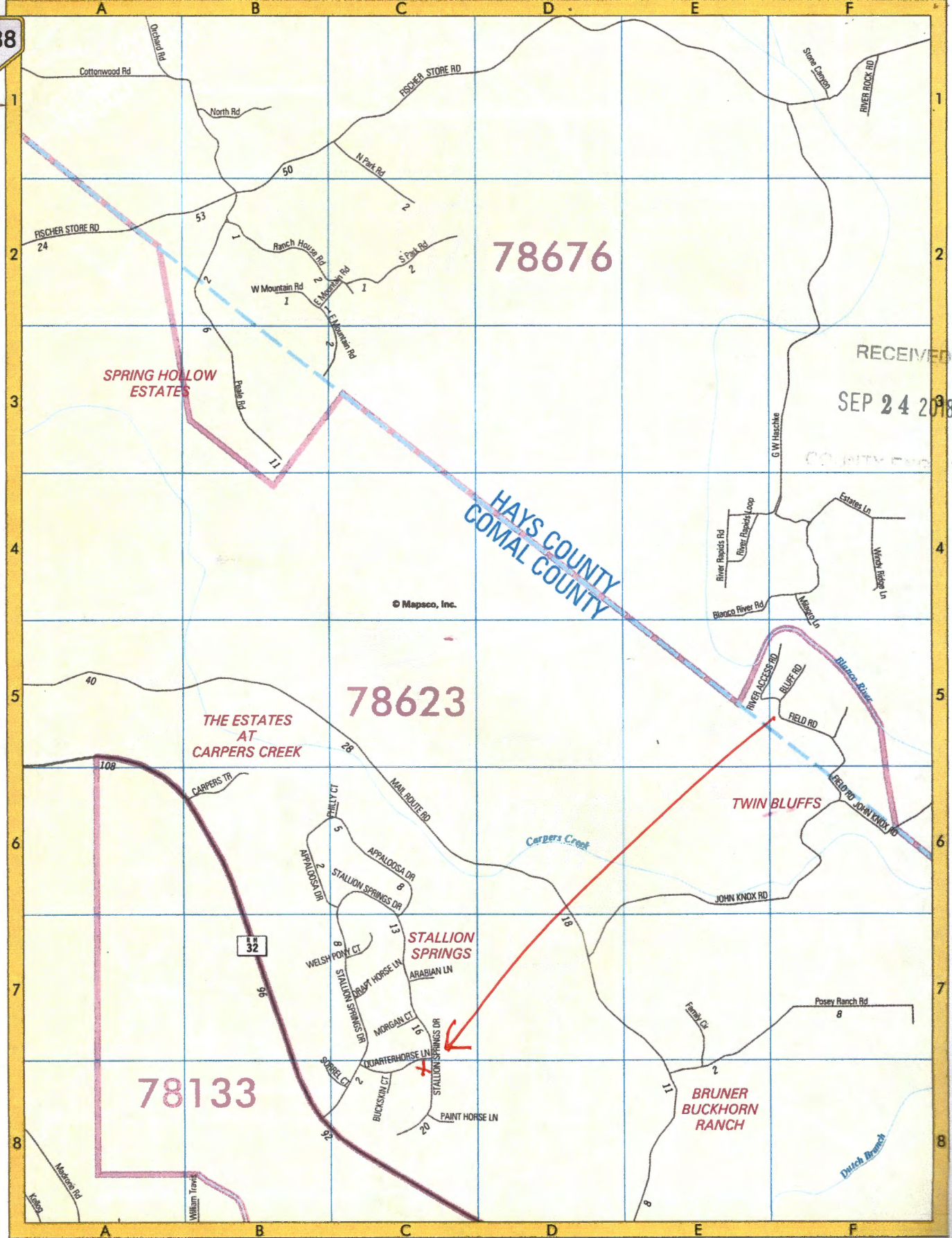


**NETAFIM USA**  
 5470 E. Home Ave. • Fresno, CA 93727  
 888.638.2346 • 559.453.6800  
 FAX 800.695.4753  
[www.netafimusa.com](http://www.netafimusa.com)

288

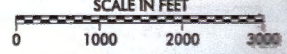


CONTINUED ON MAP 287



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SEP 24 2018  
COUNTY ENG

© Mapsco, Inc.



\*\*\* COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH \*\*\*

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

VOID

Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) CLEARSTREAM 600 NC3T Absorption/Application Area (Sq Ft) 4241

Gallons Per Day (As Per TCEQ Table III) 240

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

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

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

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SEP 24 2018

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.)

COUNTY ENGINEER

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 is approved by the appropriate regional office.)

VOID

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 P.E. or R.S. 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: \_\_\_\_\_



FIRM #2585

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

*[Handwritten Signature]*

Signature of Designer

July 20, 2018

Date

INSTALL 2000sf OF FIELD USING 1000' OF DRIP TUBING. THERE SHALL BE NO PARKING, DRIVING OR STORAGE ON THE SEPTIC FIELD AT ANY TIME FOR ANY REASON.

\*USE TWO WAY CLEANOUT  
\*\*USE SCH-40 OR SDR-26 TO TANK

X= TEST HOLE

**VOID**

**VOID**

CLEARSTREAM 600NC3T AEROBIC TREATMENT PLANT

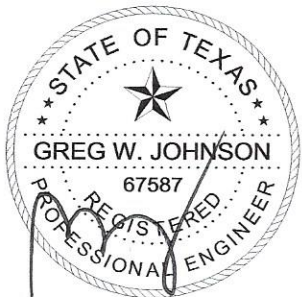
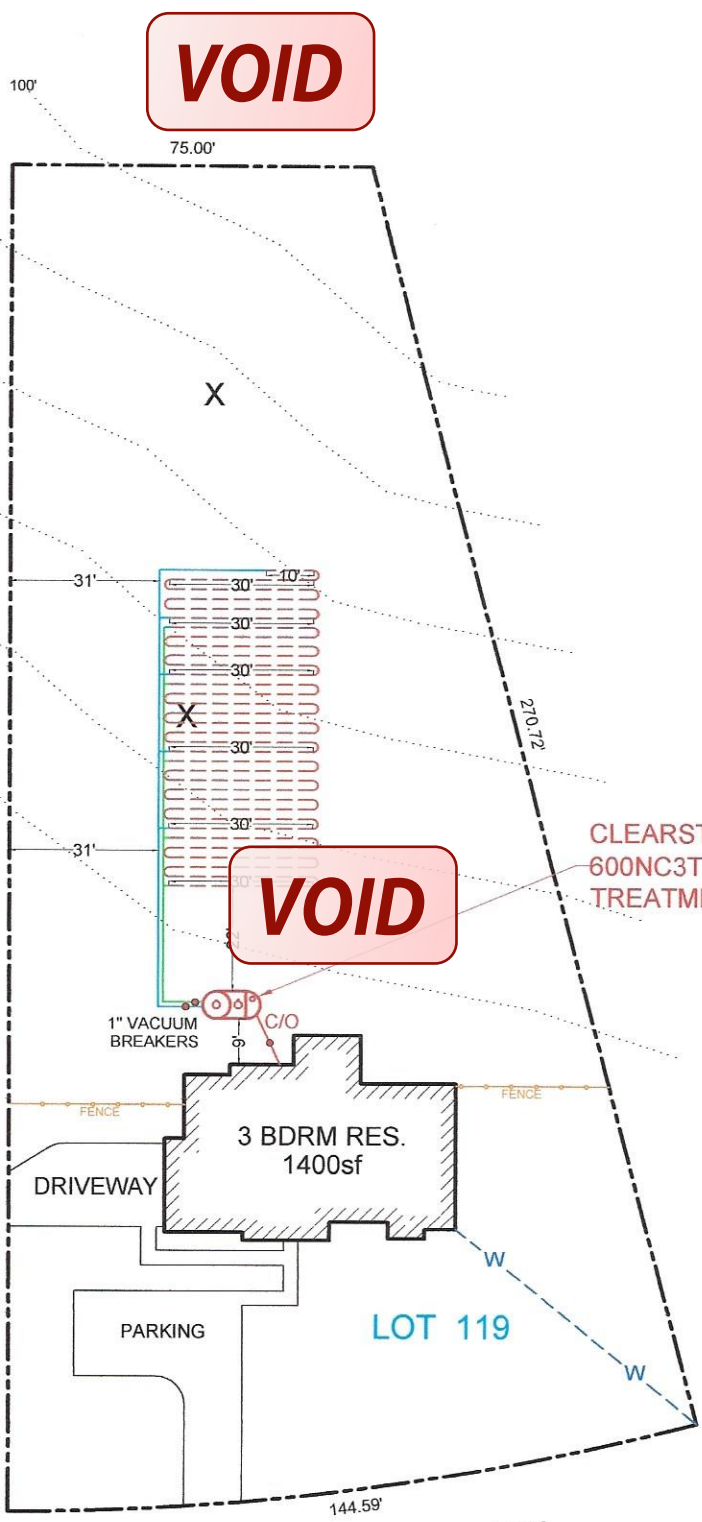
1" VACUUM BREAKERS C/O

3 BDRM RES. 1400sf

LOT 119

STALLION SPRINGS DRIVE

QUARTER HORSE

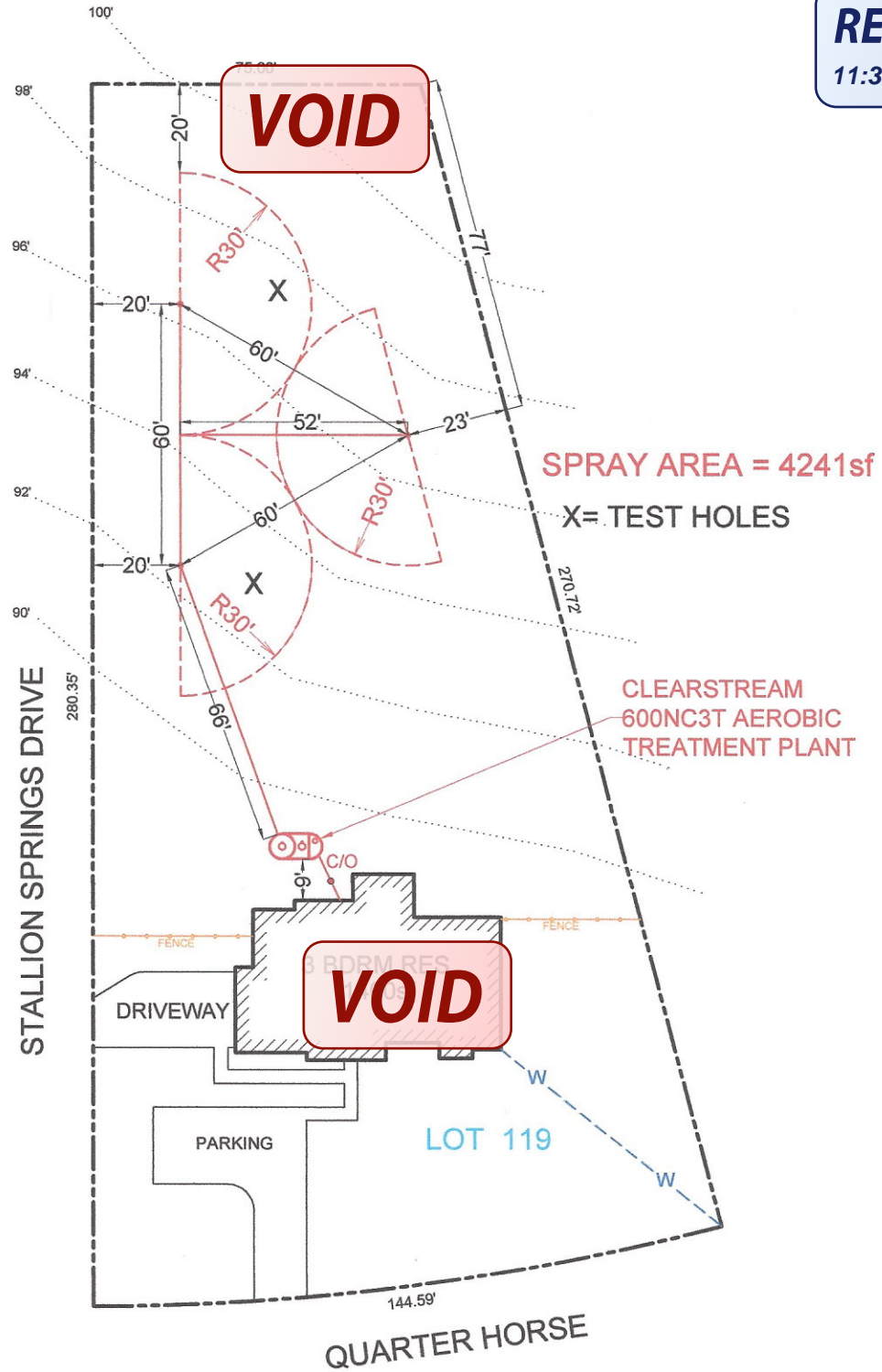


OWNER: CONSTRUCTION by DESIGN, INC.		DRAWN BY: EJS III	
STREET ADDRESS: 338 QUARTER HORSE LANE			
LEGAL DESC: STALLION SPRINGS	UNIT/SECTION/PHASE: 1	BLOCK:	LOT: 19
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=40'	DATE: 7/20/2018	2nd REVISION: 1/7/2019

#108151

**REVISED**

11:35 am, Oct 04, 2018



OWNER: CONSTRUCTION by DESIGN, INC.		DRAWN BY: EJS III	
STREET ADDRESS: 338 QUARTER HORSE LANE			
LEGAL DESC: STALLION SPRINGS	UNIT/SECTION/PHASE: 1	BLOCK:	LOT: 19
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=40'	DATE: 7/20/2018	REVISED: 10/3/2018



TANK NOTES:

Tanks must be set **VOID** minimum of 1/8" per foot fall from the residence.

Tightlines to the tank shall be SCH-40 PVC.

A two way sanitary tee is required between residence and tank.

A minimum of 4" of sand, sandy loam, clay loam free of rock shall be placed under and around tanks

Tanks must be left uncovered and full of water for inspection by the permitting authority.



F-2585

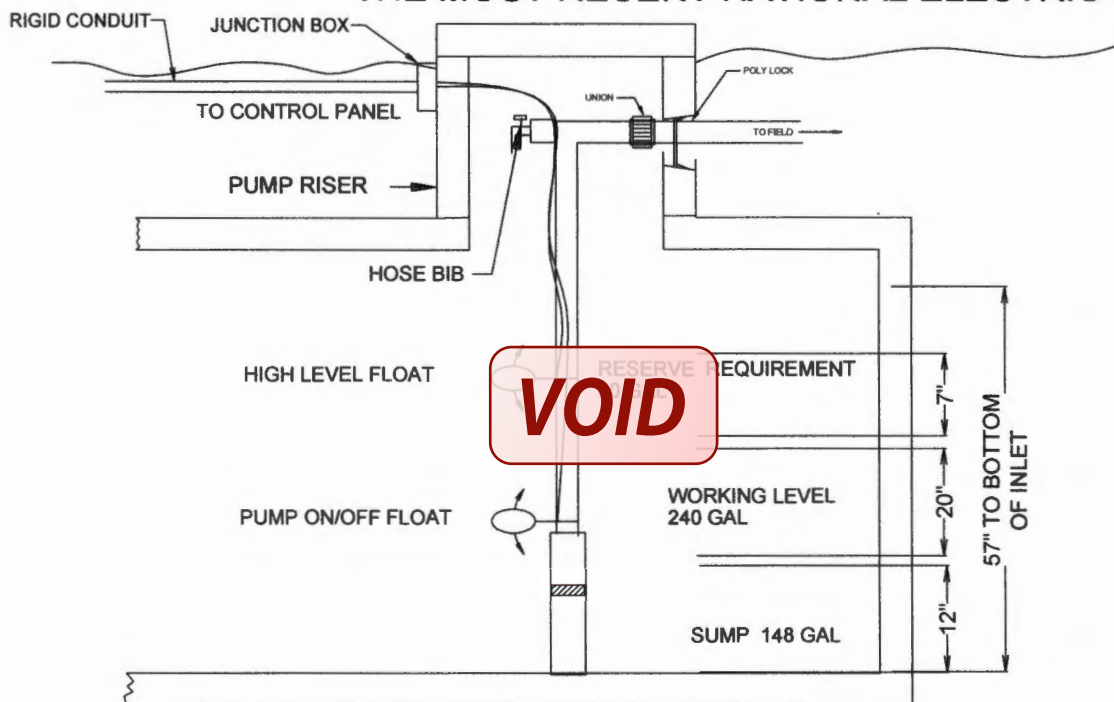
07/20/18

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SEP 24 2018

COUNTY ENGINEER

ALL WIRING MUST BE IN COMPLIANCE WITH THE MOST RECENT NATIONAL ELECTRIC CODE



TYPICAL PUMP TANK CONFIGURATION  
CLEARSTREAM 600NC3T W/ 700 GAL PUMP TANK

**From:** Ritzen, Brenda  
**To:** ["Greg Johnson"](#)  
**Subject:** Permit 108157  
**Date:** Thursday, September 27, 2018 1:36:00 PM  
**Attachments:** [Address Request Form.pdf](#)

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Re: Construction By Design, Inc.  
Stallion Springs Unit 1 Lot 19  
Application for Permit for Authorization to Construct an On-Site Sewage Facility

Greg,

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

- ✓ The owner name on the permit application must match the owner as described on the recorded deed. Remove dba Jeff Walne Homes from the owner name on the permit application.
2. A change of address is required to reflect the access off of Stallion Springs Dr. Please submit the attached Address Request Form.
3. Revise as needed and resubmit.

Thank you,

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

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

Date September 18, 2018

Permit # 108157

Owner Name CONSTRUCTION BY DESIGN, INC., dba Jeff Johnson Agent Name GREG W. JOHNSON, P.E.
Mailing Address 614 S. BUSINESS IH 35, SUITE C Agent Address 170 HOLLOW OAK
City, State, Zip NEW BRAUNFELS, TX 78130 City, State, Zip NEW BRAUNFELS, TX 78132
Phone# 830-708-4288 Phone # (830) 905-2778
Email jwalnc@earthlink.net Email gregjohnsonpe@yahoo.com



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

Subdivision Name STALLION SPRINGS Unit/Phase/Section 1 Lot 19 Block
Acreage/Legal
Street Name/Address 338 QUARTER HORSE LANE City FISCHER Zip 78623

Type of Development:

[X] Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1400

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COUNTY ENGINEER

[ ] Commercial or Institutional Facility

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

Type of Facility

Offices, Factories, Churches, Schools, Parks, Etc. Indicate Number of Occupants

Restaurants, Lounges, Theaters - Indicate Number of Seats

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

Travel Trailer/RV Parks - Indicate Number of Spaces

Miscellaneous



Estimated Cost of Construction: \$ 185,000 (Structure Only)

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

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

Source of Water [X] Public [ ] Private Well

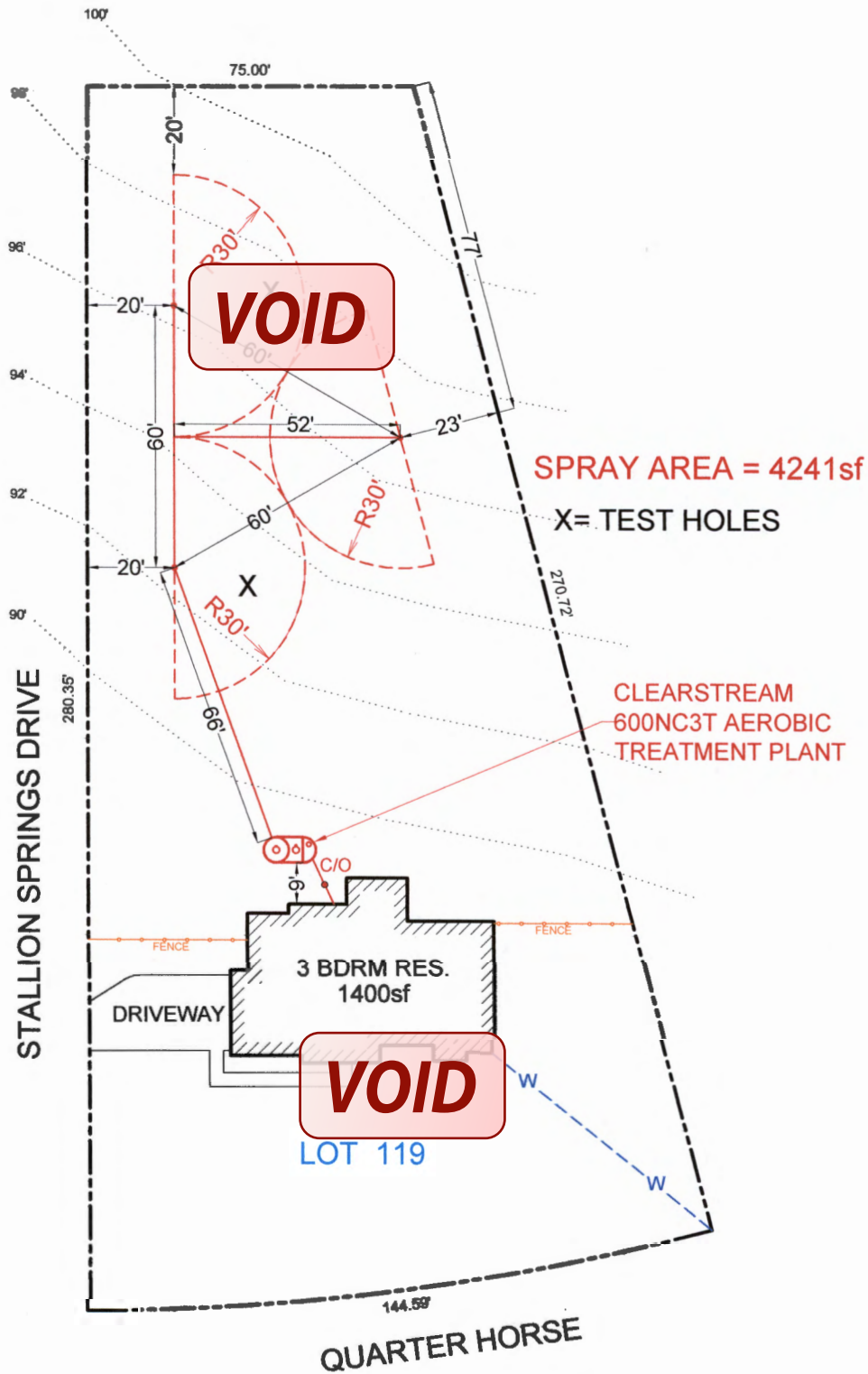
Are Water Saving Devices Being Utilized Within the Residence? [X] Yes [ ] No

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 also understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
-I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Signature of Owner

Date September 18, 2018



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OWNER: CONSTRUCTION by DESIGN, INC.		DRAWN BY: EJS III	
STREET ADDRESS: 338 QUARTER HORSE LANE			
LEGAL DESC: STALLION SPRINGS	UNIT/SECTION/PHASE: 1	BLOCK:	LOT: 19
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=40'	DATE: 7/20/2018	REVISED:



**From:** [Braun, Holly](#)  
**To:** [Ritzen, Brenda](#)  
**Subject:** OSSF 108157  
**Date:** Wednesday, September 26, 2018 3:52:31 PM  
**Attachments:** [AddressRequestForm.pdf](#)  
[image001.png](#)

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Brenda,

A change of address for OSSF Permit# 108157 is required to reflect the access off of STALLION SPRINGS DR. To move forward with the change of address the property owner will need to complete the attached Address Request Form.

Should you have any questions or require additional information, please contact our office at any time.

Sincerely,



**Holly Braun**  
Address Coordinator  
Comal County Engineer's Office  
195 David Jonas Drive  
New Braunfels, TX 78132  
O: 830-608-2090 | F: 830-643-3810  
[www.cceo.org](http://www.cceo.org)

**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**

**Date:** Oct. 31, 2017

**Grantor:** Bret Pels, a single person

**Grantor's Mailing Address:**

Bret Pels  
312 Sandy Cove  
Argyle, TX 76226  
Denton County

**Grantee:** Construction by Design, Inc., a Texas Corporation

**Grantee's Mailing Address:**

Construction by Design, Inc.  
614 S. Business IH-35, Ste. C  
New Braunfels, TX 78130  
Comal County

**Consideration:**

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

**Property (including any improvements):**

**LOT 19, STALLION SPRINGS, UNIT 1, COMAL COUNTY, TEXAS, ACCORDING TO MAP OR PLAT THEREOF RECORDED IN VOLUME 6, PAGE(S) 189, OF THE MAP AND/OR PLAT RECORDS OF COMAL COUNTY, TEXAS.**

**Reservations from Conveyance:** None

**Exceptions to Conveyance and Warranty:**

Validly existing easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded and validly existing instruments, other than conveyances of the surface fee estate, that affect the Property; and taxes for 2018, which Grantee assumes and agrees

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to pay, and subsequent assessments for that and prior years due to change in land usage, ownership, or both, the payment of which Grantee assumes.

Grantor, for the Consideration and subject to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty, grants, sells, and conveys to Grantee the Property, together with all and singular the rights and appurtenances thereto in any way belonging, to have and to hold it to Grantee and Grantee's heirs, successors, and assigns forever. Grantor binds Grantor and Grantor's heirs and successors to warrant and forever defend all and singular the Property to Grantee and Grantee's heirs, successors, and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, except as to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty.

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

*Bret Pels*

Bret Pels

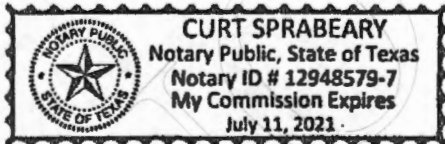
RECEIVED

SEP 24 2018

STATE OF TEXAS )

COUNTY OF DENTON )

This instrument was acknowledged before me on Oct. 31, 2017, by Bret Pels.



*Curt Sprabeary*  
Notary Public, State of Texas

PREPARED IN THE OFFICE OF:

STOKES LAW OFFICE PLLC  
132 W. Main Street  
Lewisville, TX 75057  
Tel: (972) 436-8141

Filed and Recorded  
Official Public Records  
Bobbie Koepp, County Clerk  
Comal County, Texas  
11/01/2017 03:31:45 PM  
JESSICA 2 Pages(s)  
201706048594

AFTER RECORDING RETURN TO:

Construction by Design, Inc.  
614 S. Business IH-35, Ste. C  
New Braunfels, TX 78130



*Bobbie Koepp*

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: JULY 20, 2019 Installed: 3/20/2019 Service Expires: 3/20/2021

BILLING ADDRESS:

PHYSICAL ADDRESS:

\* CONSTRUCTION BY DESIGN  
 338 QUARTER HORSE LANE  
 FISCHER, TX 78623

338 QUARTER HORSE LANE  
 FISCHER, TX 78623

TELEPHONE: 830-708-4288 (JEFF WALNE)  
 ALT. PHONE:

LOT: LT 19,

PERMIT #: 108157

COUNTY: COMAL

SN: 18040139

SUBDIVISION: STALLION SPRINGS

Manufacturer: CLEARSTRM 600NC3T

MAPSCO: NOT

AVAILABLE

NOTES:

TYPE OF SYSTEM: DRIP

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)	1-25		
Filters	1		
Irrigation Pumps	1		CHECKED Pump,
Recirculation Pumps	N/A		
Disinfection Device	1		Alarms, micron Filter,
Chlorine Supply	1		chlorine, FLOATS,
Electrical Circuits	1		
Distribution System	1		
Sprayfield Vegetation	N/A		compressor Filter
Back Flush Drip Field, if applicable	1		
Other as Noted	1		
Access Posts are Secured	Yes	No	

3. Tests required and results:

	Required		Results mg/l mprn/100mi or Trace	Test Method
	Yes	No		
BOD(Grab)				
TSS(Grab)		1	Clear	
Cl(Grab)	1			
Fecal Coliform				

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

Maintenance Technician: Thomas 11

Date of completion: 7-13-19 Start Job Time: 11:05 Stop Job Time: 11:20

Maintenance Provider: Walden Company



COUNTRY-SIDE CONSTRUCTION, INC.  
 300 CHAPMAN PARKWAY  
 CANYON LAKE, TX 75133  
 Phone: 830-899-2615  
 Fax: 830-899-6662

TESTING AND REPORTING RECORD

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

Inspected On: NOVEMBER 13, 2019 Inspected By: [Signature] 3072019

SITING ADDRESS: 338 QUARTER HORSE LANE  
 HOSCHER, TX 75023

RDNEY EBANKS  
 338 QUARTER HORSE LANE  
 HOSCHER, TX 75023

TELEPHONE: 214-391-0661

LOT # 11 29

PERMIT #

10/15/17  
 LOCAL  
 3040139  
 NOT AVAILABLE

SUBDIVISION: STALLION SPRINGS

Manufacturer: CLEARSTREAM CONCOCT

MASSCO

NOTES

TYPE OF SYSTEM: IRRI

Inspected Item: Operational / Inoperative

AIRLEAKS (See Compressor RA)

2 PSI

Cleaned filter on compressor.

Filter

Injection Point

Checked chlorine, checked pump.

Feeder/Injection Point

N/A

Deflection of Ice

floats + Drinfeld 50 + filter.

Chlorine Sample

Bacterial Analysis

Lead/Lead Acid System

Sprayfield Vegetation

N/A

Back Flush Time Field (if applicable)

Over a Period

Access Point is Secured

Yes / No

3 Tests required and results

Required / Results / Test

Required / Results / Test

FOU (Grab)

Grab

TEST (Grab)

Clear

1 (Grab)

0.0

Field Collection

Copy of this report has been forwarded to the following CONTACT COUNTY, JURISDICTION

Inspection Technician: Kyle H.

11

Date of completion: 11/26/19 Start Time: 3:00 Stop Time: 3:15

Inspection By: [Signature]

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: MARCH 20, 2020 Installed: 3/20/2019 Service Expires: 3/20/2021

BILLING ADDRESS:  
 RODNEY EUBANKS  
 338 QUARTER HORSE LANE  
 FISCHER, TX 78623

PHYSICAL ADDRESS:  
 338 QUARTER HORSE LANE  
 FISCHER, TX 78623

TELEPHONE: 210-391-0651  
 ALT. PHONE:

LOT: LT 19,

PERMIT# 108157

COUNTY: COMAL

SN: 18040139

MAPSCO: N/A

SUBDIVISION: STALLION SPRINGS

MFG: CLEARSTRM 600NC3T

NOTES:  
 TYPE OF SYSTEM: DRIP

Inspected Item:	Operational	Inoperative
Aerators		
SCFM/Compressors PSI		
Record Pressure Reading	1.25	
Filters	1	
Irrigation Pumps	1	
Recirculation Pumps	N/A	
Disinfection Device	1	
Chlorine Supply	1	
Electrical Circuits	1	
Distribution System	1	
Sprayfield Vegetation	N/A	
Back Flush Drip Field, if applicable	1	
Other as Noted	1	
Access Posts are Secured		

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

Checked pump,  
 Alarm,

SYSTEM OPERATING AS DESIGNED?  Yes  No

3. Tests required and results:

	Required		Results mg/l mpn/100mi or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)		1	clear	
Cl (Grab)	1			
Fecal Coliform				

please treat  
 FOR ANTS  
 inside DOG  
 House

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

Maintenance Technician: Thomas

11

Date of completion: 3/18/20 Start Job Time: \_\_\_\_\_ Stop Job Time: \_\_\_\_\_

Maintenance Provider: Walbu Chapman

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

Phone: 830-899-2614  
 Fax: 830-899-6662

TESTING AND REPORTING RECORD

Job Name & Location: \_\_\_\_\_

Project No.: \_\_\_\_\_

CLIENT ADDRESS  
 RODNEY BURANEC  
 336 QUARTER HORSE LANE  
 FISCHER, TX 78625

CLIENT ADDRESS  
 336 QUARTER HORSE LANE  
 FISCHER, TX 78625

TELEPHONE: 214-340-1111  
 FAX: 214-340-1111

TEST DATE: \_\_\_\_\_  
 TEST TIME: \_\_\_\_\_  
 TESTER: \_\_\_\_\_  
 WITNESS: \_\_\_\_\_

TESTER: \_\_\_\_\_

TESTER: \_\_\_\_\_

TESTER: \_\_\_\_\_

TESTER: \_\_\_\_\_

TESTER: \_\_\_\_\_

TESTER: \_\_\_\_\_

1.0

/

/

N/A

/

/

/

/

N/A

/

/

CHECKED pump,

Alarm, FLOATS,

MICRON, COMPRESSOR,

FLUSHED FIELD

SYSTEM OPERATING AS DESIGNED

(1.0)

required

results

Yes No

Required

1.0

BOF Size

BOF Size

BOF Size

BOF Size

CLEAR

Copies of this report have been forwarded to the following:

Name of Client: Thomas

Date of Test: 8/10/20 Time: 2:15

Time: 2:30

Name of Tester: 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.

Inspection Date: NOVEMBER 20 2020 Installed: 3/29/2019 Service Expires: 3/29/2021

BILLING ADDRESS  
 RODNEY EURANKS  
 338 QUARTER HORSE LANE  
 FISCHER, TX 78623

PRINCIPAL ADDRESS  
 338 QUARTER HORSE LANE  
 FISCHER TX 78623

TELEPHONE: 210-391-0451  
 ALT. PHONE

LIT. LT 19

SERVICES: 108157  
 COUNTY: COMAL  
 ZIP: 18040135  
 SERVICE: N/A

SUBDIVISION: STALLION SPRINGS UNIT: CLEARSTRM 600NC3T

NOTES  
 TYPE OF SYSTEM: DRTP

Inspected Item	Operational	Inoperative	2. Action taken to correct or needed repairs to system. If critical, components replaced
Aerators			
SPM, Compressors, P/T			
Record Pressure Reading	1.25		
Filters	/		
Irrigation Pumps	/		CHECKED PUMP,
Recirculation Pumps	N/A		Alarm, FLOATS,
Disinfection Device	/		MINOR FILTER,
Chlorine Supply	/		
Electrical Control	/		
Distribution System	/		
Sprayfield Vegetation	N/A		COMPRESSOR/FILTER
Back Flush Drain Field, as applicable	/		FIELD
Other as Noted	/		
3. SYSTEM OPERATING AS DESIGNED? <input checked="" type="radio"/> YES <input type="radio"/> NO			

4. Tests required and results.

Test	Required		Result (pg. 1 min. limit on time)	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)		/	CLEAR	
Cl (Grab)	/			
Fecal Coliform				

Copies of this report have been forwarded to the following COMAL county / home mail

Maintenance Technician: THOMAS

Date of completion: 12/3/20 Test Job Time: 3:05 Test Job Time: 3:20

Maintenance Address: WILSON CLAYTON

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

Phone: 830-899-2611  
 Fax: 830-899-6662

*Needs  
compressor*

**TESTING AND REPORTING RECORD**

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

1. Inspection Date: MARCH 20, 2021 Installed: 3/20/2019 Service Expires: 3/20/2021

BILLING ADDRESS:  
 RODNEY EUBANKS  
 338 QUARTER HORSE LANE  
 FISCHER, TX 78623

PHYSICAL ADDRESS:  
 338 QUARTER HORSE LANE  
 FISCHER, TX 78623

TELEPHONE: 210-391-0651  
 ALT. PHONE:

LOT: LT 19,

PERMIT#: 108157

COUNTY: COMAL

SN: 18040139

SUBDIVISION: STALLION SPRINGS

MPG: CLEARSTRM 600NC3T

MAPSCO: N/A

NOTES:  
 TYPE OF SYSTEM: DRIP

Inspected Item:	Operational	Inoperative
Aerators		
SCPM/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 Drip Field, if applicable	NA	
Other as noted		
Access Posts are Secured		

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

*Needs compressor*

*checked Pump*

*checked floats*

*set timer*

*checke Drip field*

SYSTEM OPERATING AS DESIGNED:  Yes

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	<i>Grab OTO</i>
Fecal Coliform	✓			

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

Maintenance Technician: *Ben*

3

Date of completion: *4-28-21* Start Job Time

Stop Job Time

Maintenance Provider: *Wilbur Enterprises*

**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: **RODNEY EUBANKS** Address: **338 QUARTER HORSE LANE**  
Sub-Div./County: **STALLION SPRINGS, COMAL** **FISCHER, TX 78623**  
Permit #: **108157 DRIP Model #: CLEARSTRM 600NC3T Serial #: 20060103**  
Phone: **972-896-9204, rodeubanks@yahoo.com**

( ) Initial Two Year Service Agreement  
& Two Year Limited Warranty

( x ) One Year Service Agreement  
\$320.00 + \$75.00 Analysis

Legal Description: LT 19, STALLION SPRINGS, COMAL

The effective date of the initial maintenance contract shall be the date the License to Operate is issued.  
For **\$320.00 + \$75.00 initial analysis**, this contract will be in effect FROM: 12/9/2021 to 12/9/2022 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, FREIGHT CHARGES, LABOR OR SERVICE CALLS NOT PAID IN FULL AT THE END OF (30) DAYS SHALL REMAIN THE PROPERTY OF COUNTRYSIDE CONSTRUCTION AND AUTHORIZES CONTRACTOR TO REMOVE AND REPOSSESS ANY PARTS INSTALLED. CLIENT FURTHER AGREES TO PAY ANY LABOR COST OF THE INSTALLATION AND REASONABLE COST OF REMOVAL OF SAID PARTS.**
- 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 "WARRANTIED PARTS" EXCHANGED DURING WARRANTY.** All other components will be according to manufacturer's warranties.

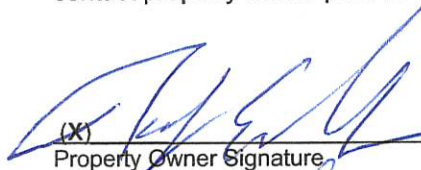
**Important:** As Countryside Construction, Inc. cannot control what or how much effluent goes into this septic system, we cannot warranty how the system will function. Refer to manufacturers or installer's instructions, for suggestions on septic operation. This service agreement **does not** cover the 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, overloading 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 - Installer's Licensee #SO0002929

(X)   
Property Owner Signature

Print Name (X) RODNEY EUBANKS Date: 9 DEC 2021

(X)  Date: 12-13-21 Authorized Service Representative (revised 10/9/09)

**PAID**  
#021  
12/13/21

**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: **APRIL 9, 2022** Installed: **3/20/2019** Service Expires: **3/20/2022**

**BILLING ADDRESS:**  
**RODNEY EUBANKS**  
**338 QUARTER HORSE LANE**  
**FISCHER, TX 78623**

**PHYSICAL ADDRESS:**  
**338 QUARTER HORSE LANE**  
**FISCHER, TX 78623**

**TELEPHONE: 972-896-9204**  
**ALT. PHONE:**

**LOT: LT 19,**

**PERMIT#: 108157**

**COUNTY: COMAL**

**SN: 20060103**

**SUBDIVISION: STALLION SPRINGS**  
**600NC3T**

**Manufacturer: CLEARSTRM**

**MAPSCO: N/A**

**NOTES: 5-11-21 REINSTALL NEW COMPRESSOR (REPLACES 18040139) WITH ONE YEAR WARRANTY**

**TYPE OF SYSTEM: DRIP**

**Inspected Item: Operational Inoperative**

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

2. Action taken or Repairs or Needed repairs to system (list all components replaced):  
 Pump and drum best good.  
 All floats work. D.I.C  
 Filter cleaned, compressor  
 filter cleaned.

**SYSTEM OPERATING AS DESIGNED? Y/N**

**Access Posts are Secured** (yes) **No**

3. Tests required and results:

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

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

**Maintenance Technician: Cayewell**

**10**

**Time of completion: APR 18 Start Job Time: 3:20pm Stop Job Time: 3:40pm**

**Maintenance Provider: Walker 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: JULY 20, 2022 Installed: 3/20/2019 Service Expires: 3/20/2022

BILLING ADDRESS:  
 RODNEY EURANKS  
 338 QUARTER HORSE LANE  
 FISCHER, TX 78623

PHYSICAL ADDRESS:  
 338 QUARTER HORSE LANE  
 FISCHER, TX 78623

TELEPHONE: 972-896-9204

LOT: LT 19,

PERMIT#: 108157

ALT. PHONE:

COUNTY: COMAL

GATE CODE:

SN: 20060103

SUBDIVISION: STALLION SPRINGS  
 600NCST

Manufacturer: CLEARSTRM

MAPSCO: N/A

NOTES: 5-11-21 REINSTALL NEW COMPRESSOR (REPLACES 18040139) WITH ONE YEAR WARRANTY

TYPE OF SYSTEM: DRIP

Inspected Item:	Operational	Inoperative
Aerators		
SCFM/Compressors PSI Record Pressure Reading	2.3 PSI	
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		
Access Posts are Secured		

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

pump and alarm test good.  
 All floats work, Disc filter  
 cleaned, Compressor filter  
 cleaned.

SYSTEM OPERATING AS DESIGNED? Y/N

Access Posts are Secured  Yes  No

3. Tests required and results:

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

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

Maintenance Technician: Cayenne

10

Date of completion: July 25 Start Job Time: 10:20 Am Stop Job Time: 10:41 am

Maintenance Provider: Walker Chapman