



## Comal County

OFFICE OF COMAL COUNTY ENGINEER

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

Issued This Date: **04/24/2019** Permit Number: **108218**

Location Description: 1179 PINNACLE PKWY  
NEW BRAUNFELS, TX 78132

Subdivision: The Pinnacle  
Unit:  
Lot: 168  
Block:  
Acreage:

Type of System: Aerobic  
Surface Irrigation

Issued to: Donovan L. Prince II

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.

ENVIRONMENTAL HEALTH INSPECTOR

Licensing Authority  
**Comal County Environmental Health**

ENVIRONMENTAL HEALTH COORDINATOR

OS0034322

OS0007722

# Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Swayzer

OSSF Installer #: 050026238

1st Inspection Date: 4.12.19

2nd Inspection Date: \_\_\_\_\_

3rd Inspection Date: \_\_\_\_\_

Inspector Name: Lincoln J.

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

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

Permit #: 108218

Address: 1M9 Pinnacle Drwy

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
1	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials	✓	285.31(a) 285.30(b)(1)(A)(iv) 285.30(b)(1)(A)(v) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(ii) 285.30(b)(1)(A)(i)		✓		
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	✓	285.91(10) 285.30(b)(4) 285.31(d)		✓		
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	✓	285.32(a)(1)		✓		
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	✓	285.32(a)(3)		✓		
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)	✓	285.32(a)(5)		✓		
6	PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(G)285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(A) 285.32(b)(1)(E)(ii)(ii) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(i)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

4.12.19  
Tank level. Set, operational  
no leaks. Cover all.

4.24.19  
all 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)				
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	/		ced	/		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	/		max Air	/		
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)(1) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
19	DISPOSAL SYSTEM Drip Irrigation		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
24	DISPOSAL SYSTEM Other (describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
25	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC						
26	DRAINFIELD Area Installed						
27	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
28	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
29	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
30	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.)		285.33(c)(2)				
31	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)				

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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>						
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>						
39	<p>PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried</p>						

## Comal County Environmental Health OSSF Inspection Sheet

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41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed		285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

# Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Swayer      OSSF Installer #: 050026238  
 1st Inspection Date: 4.12.19      2nd Inspection Date: \_\_\_\_\_      3rd Inspection Date: \_\_\_\_\_  
 Inspector Name: Amerson J.      Inspector Name: \_\_\_\_\_  
 Permit #: 108218      Address: 119 Pinnacle Pkwy

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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**Comal County Environmental Health  
OSSF Inspection Sheet**

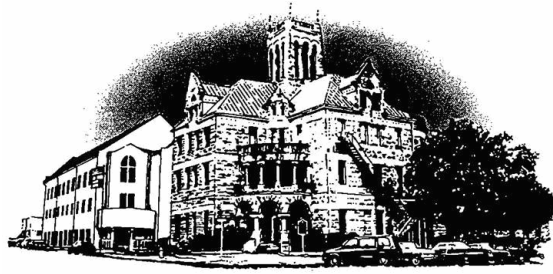
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45	PUMP TANK Type/Size of Pump Installed						



# 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: 108218  
Issued This Date: 10/16/2018  
This permit is hereby given to: Donovan L. Prince II

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

1179 PINNACLE PKWY  
NEW BRAUNFELS, TX 78132

Subdivision: The Pinnacle

Unit:

Lot: 168

Block:

Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic  
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.

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

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

Date September 26, 2018

Permit # 108218

Owner Name DONOVAN L PRINCE II  
Mailing Address 1318 SEA BREEZE  
City, State, Zip NEW BRAUNFELS TEXAS 78130  
Phone# 281-380-3942  
Email dlprince@swbell.net

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

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

Subdivision Name THE PINNACLE Unit/Phase/Section \_\_\_\_\_ Lot 168 Block \_\_\_\_\_  
Acreage/Legal \_\_\_\_\_  
Street Name/Address 1179 PINNACLE PKWY City NEW BRAUNFELS Zip 78132

Type of Development:

Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1931

RECEIVED  
OCT 11 2018

COUNTY ENGINEER

Commercial or Institutional Facility

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

Type of Facility \_\_\_\_\_

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

Restaurants, Lounges, Theaters - Indicate Number of Seats \_\_\_\_\_

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

Travel Trailer/RV Parks - Indicate Number of Spaces \_\_\_\_\_

Miscellaneous \_\_\_\_\_

Estimated Cost of Construction: \$ 350,000 (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 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.

Donovan L Prince II  
Signature of Owner

10/10/18  
Date

#108218

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

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

REVISED 9:24 am, Mar 27, 2019

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) MAXX AIR M-600 Absorption/Application Area (Sq Ft) 4825

Gallons Per Day (As Per TCEQ Table III) 300 (DESIGN RATE) (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? [X] 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? [X] 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 [X] 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 [ ] 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

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

September 28, 2018 Date

Greg W. Johnson, P.E.  
170 Hollow Oak  
New Braunfels, Texas 78132  
830/905-2778

September 28, 2018

Comal County Office of Environmental Health  
195 David Jonas Drive  
New Braunfels, Texas 78132-3760

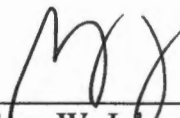
RE- SEPTIC DESIGN  
1179 PINNACLE PARKWAY  
THE PINNACLE, LOT 168  
NEW BRAUNFELS, TX 78132  
PRINCE RESIDENCE

Ms. Brenda Ritzen/Sandra Hernandez,

The referenced property is located within the Edwards Aquifer Recharge Zone. This OSSF design will comply with requirements in the WPAP.

Temporary erosion and sedimentation controls should be utilized as necessary prior to construction. If any sensitive feature (caves, solution cavities, sink holes, etc.) is discovered during construction, activities must be suspended immediately and the applicant or his agent must immediately notify the TCEQ Regional Office. After that operations can only proceed after the Executive Director approves required additional engineered impact plans.

Designed in accordance with Chapter 285, Subchapter D, §285.40, 285.41, & 285.42, Texas Commission on Environmental Quality (Effective December 29, 2016).

 09/28/18  
\_\_\_\_\_  
Greg W. Johnson, P.E. No. 67587 / F#2585  
170 Hollow Oak  
New Braunfels, Texas 78132 - 830/905-2778



2 Yes

# AFFIDAVIT



201806040294 10/11/2018 03:20:05 PM 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.

### 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):

UNIT/PHASE/SECTION \_\_\_\_\_ BLOCK 168 LOT \_\_\_\_\_ THE PINNACLE \_\_\_\_\_ SUBDIVISION

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

The property is owned by (insert owner's full name): DONOVAN L. PRINCE, II

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.

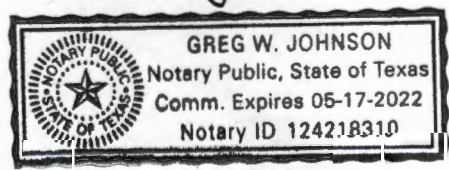
WITNESS BY HAND(S) ON THIS 11 DAY OF October, 2018

X [Signature]  
Owner(s) signature(s)

\_\_\_\_\_  
DONOVAN L. PRINCE, II  
Owner (s) Printed name (s)

DONOVAN L. PRINCE, II SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 11 DAY OF

October, 2018  
[Signature]  
Notary Public Signature



(Notary Seal Here)

THIS AREA FOR COMAL COUNTY CLERK RECORDING PURPOSES ONLY

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
10/11/2018 03:20:05 PM  
TERRI 1 Page(s)  
201806040294



Bobbie Koepf



WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

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

Permit/License Number \_\_\_\_\_  
Customer DONOVAN L. PRINCE, II  
Site Address 1179 PINNACLE PARKWAY  
City NEW BRAUNFELS, Zip 78132  
Mailing Address \_\_\_\_\_  
County COMAL Map # 391 B8  
Phone \_\_\_\_\_  
Email diprince@swbell.net

2 YEAR CONTRACT  
2 YEAR WARRANTY ON PARTS AND LABOR

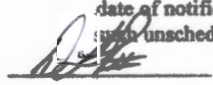
Subd/Legal: THE PINNACLE, LOT 168

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

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

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

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



BS

Customer's Initials



Contractor's Initials

**V. Disinfection:**

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

**VI. Electronic Monitoring:**

Electronic Monitoring is not included in this Agreement.

**VII. Performance of Agreement:**

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

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

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

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

**VIII. Customer's Responsibilities:**

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

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

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

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

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

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

f. Allow for samples at both the inlet and outlet of the OSSF to be obtained by Contractor for the purpose of evaluating the OSSF's performance. If these samples are taken to a laboratory for testing, with the exception of the service provided under Section IV (d) above, Customer agrees to pay Contractor for the sample collection and transportation, portal to portal, at a rate of \$35.00 per hour, plus the associated fees for laboratory testing.

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

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

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

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

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

**IX. Access by Contractor:**

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

**X. Limit of Liability:**

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

**XI. Indemnification:**

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

  
\_\_\_\_\_

Customer's Initials



BS

Contractor's Initials

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

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

**XII. Severability:**

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

**XIII. Fee for Services:**

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

**XIV. Payment:**

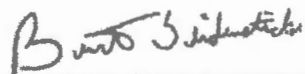
Full payment is due upon execution of this Agreement (Required of new Customer). For any other service(s) or repair(s) provided by Contractor the Customer shall pay the invoice(s) for said service(s) or repair(s) within thirty (30) days of the invoice date. The Contractor shall mail all invoices on the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

**XV. Application or Transfer of payment:**

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

**XVI. Entire Agreement:**

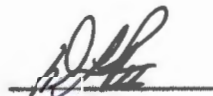
This agreement contains the entire Agreement of the parties, and there are no other conditions in any other agreement, oral or written.



Block Creek Aerobic Services, LLC,  
Contractor  
MC# 0000042 and MC#0000002

  
Customer Signature

10/11/18  
Date



Customer's Initials



BS

Contractor's Initials

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

Date Soil Survey Performed: September 27, 2018

Site Location: The PINNACLE, LOT 168

Proposed Excavation Depth: N/A

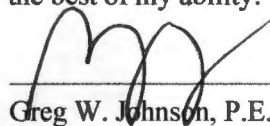
**Requirements:**

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.

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

09/27/18  
Date

**OSSF SOIL EVALUATION REPORT INFORMATION**

Date: September 28, 2018

**Applicant Information:**

Name: DONOVAN L. PRINCE II  
Address: 1318 SEA BREEZE  
City: NEW BRAUNFELS State: TEXAS  
Zip Code: 78130 Phone: (281) 380-3942

**Site Evaluator Information:**

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

**Property Location:**

Lot 168 Unit      Blk      Subd. The PINNACLE  
Street Address: 1179 PINNACLE PARKWAY  
City: NEW BRAUNFELS Zip Code: 78132  
Additional Info.:     

**Installer Information:**

Name:       
Company:       
Address:       
City:      State:       
Zip Code:      Phone     

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

**Design Calculations for Aerobic Treatment with Spray Irrigation:**

Commercial

Q =      GPD     

Residential Water conserving fixtures to be utilized? Yes X No     

Number of Bedrooms the septic system is sized for: 3 Total sq. ft. living area 1931

Q gal/day = (Bedrooms +1) \* 75 GPD - (20% reduction for water conserving fixtures)

Q = (3 +1)\*75-(20%)= 240 (300 Design Rate)

Trash Tank Size 353 Gal.

TCEQ Approved Aerobic Plant Size 600 G.P.D.

Req'd Application Area = Q/Ri = 300 / 0.064 = 4688 sq. ft.

Application Area Utilized = 4825 sq. ft.

Pump Requirement 12 Gpm @ 41 Psi (Redjacket 0.5 HP 18 G.P.M. series or equivalent)

Dosing Cycle:      ON DEMAND or X TIMED TO DOSE IN PREDAWN HOURS

Pump Tank Size = 768 Gal. 14.5 Gal/inch.

Reserve Requirement = 100 Gal. 1/3 day flow.

Alarms: Audible & Visual High Water Alarm & Visual Air Pump malfunction

With Chlorinator NSF/TCEQ APPROVED

SCH-40 or SDR-26 3" or 4" sewer line to tank

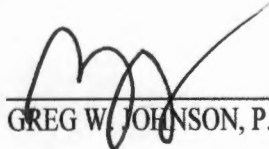
Two way cleanout

Pop-up rotary sprinkler heads w/ purple non-potable lids

1" Sch-40 PVC discharge manifold

APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

I HAVE PERFORMED A THOROUGH INVESTIGATION BEING A REGISTERED PROFESSIONAL ENGINEER AND SITE EVALUATOR IN ACCORDANCE WITH CHAPTER 285, SUBCHAPTER D, §285.30, & §285.40 (REGARDING RECHARGE FEATURES), TEXAS COMMISSION OF ENVIRONMENTAL QUALITY (EFFECTIVE DECEMBER 29, 2016)

  
GREG W. JOHNSON, P.E. F#002585 - S.E. 11561

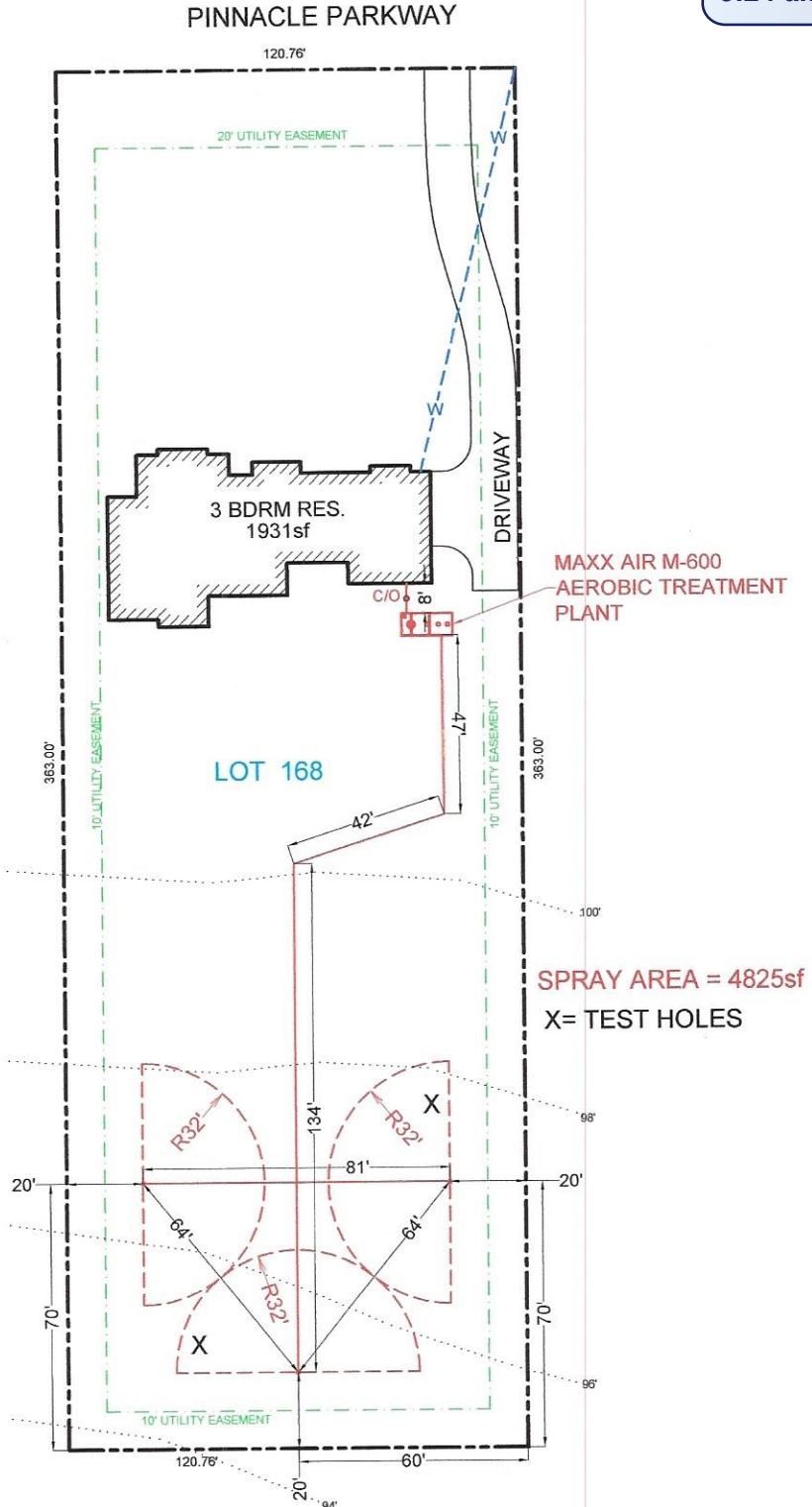
09/28/18  
DATE



FIRM #2585

**REVISED**

9:24 am, Mar 27, 2019



OWNER: DONOVAN L. PRINCE II		DRAWN BY: EJS III	
STREET ADDRESS: 1179 PINNACLE PARKWAY			
LEGAL DESC: The PINNACLE	UNIT/SECTION/PHASE:	BLOCK:	LOT: 168
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=50'	DATE: 9/28/2018	REVISED: 3/26/2019

**REVISED**

9:24 am, Mar 27, 2019

### TANK NOTES:

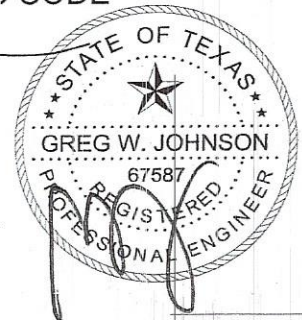
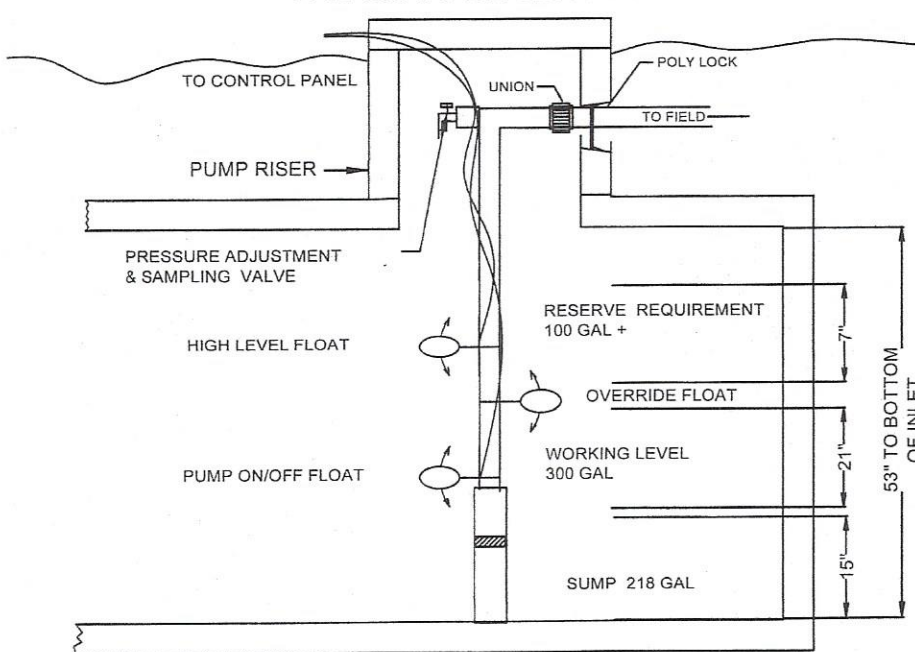
Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

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

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



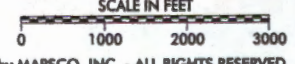
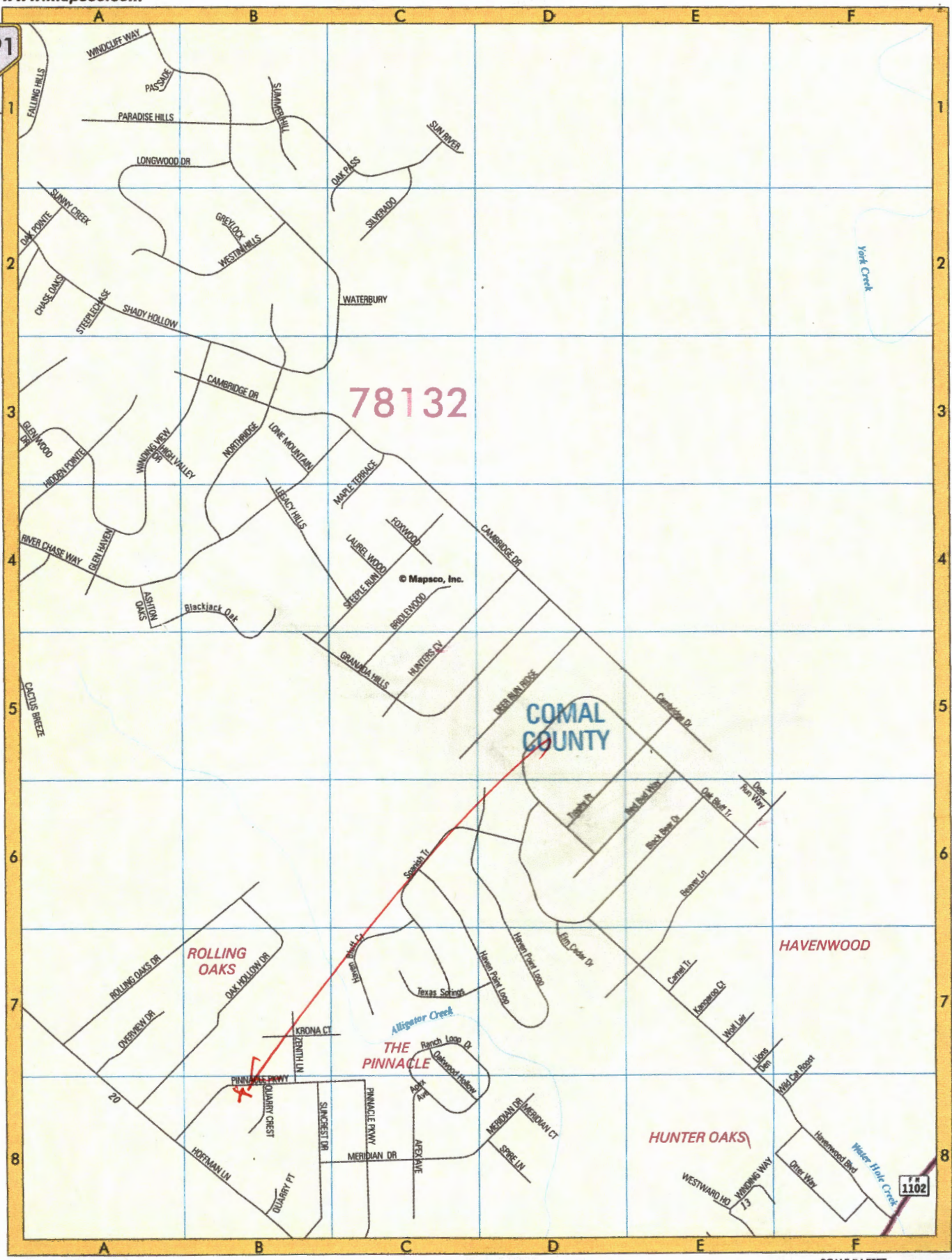
F-2585  
01/28/19

**TYPICAL PUMP TANK CONFIGURATION  
MAXX AIR M600 768 GAL PUMP TANK**

391



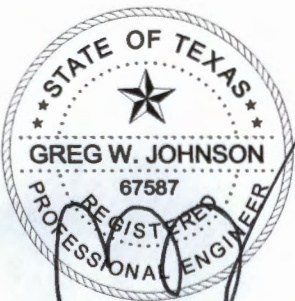
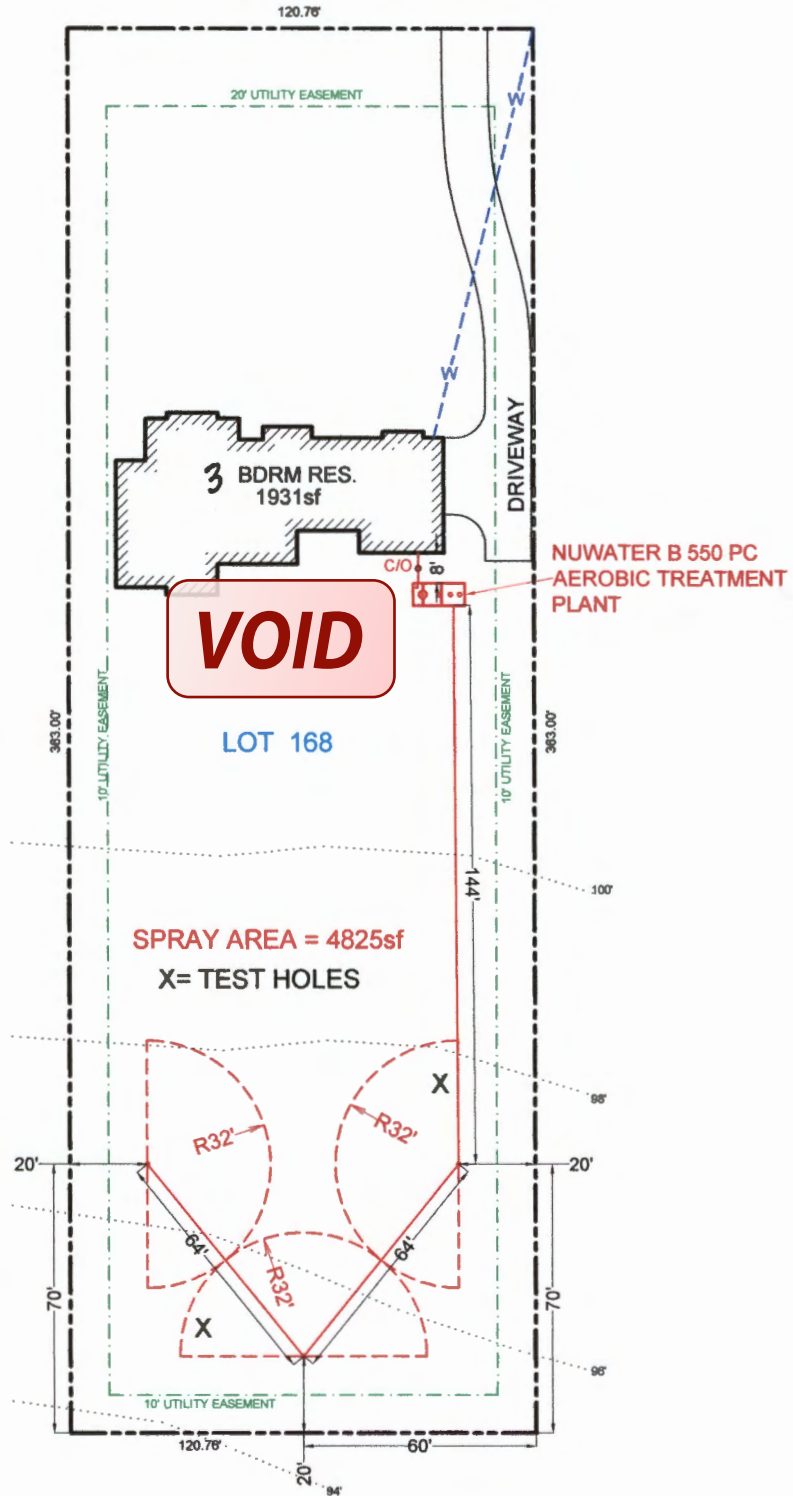
CONTINUED ON MAP 390





**VOID**

PINNACLE PARKWAY



OWNER:	DONOVAN L. PRINCE	<b>VOID</b>	DRAWN BY:	EJS III
STREET ADDRESS:	1179 PINNACLE PARKWAY			
LEGAL DESC:	The PINNACLE	UNIT/SECTION/PHASE:	BLOCK:	LOT: 168
PREPARED BY:	GREG W. JOHNSON, P.E. F#002585	SCALE:	1"=50'	DATE: 9/28/2018
				REVISED:

\*\*\* 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) NUWATER B-550-PC Absorption/Application Area (Sq Ft) 4825

Gallons Per Day (As Per TCEQ Table III) 300 (DESIGN LATE)

(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? [X] Yes [ ] No

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

VOID

Is there an existing TCEQ approved WPAP for the property? [ ] 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 [X] 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 [ ] 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:

VOID



FIRM #2585

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

September 28, 2018 Date

**VOID**

**TANK NOTES:**

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

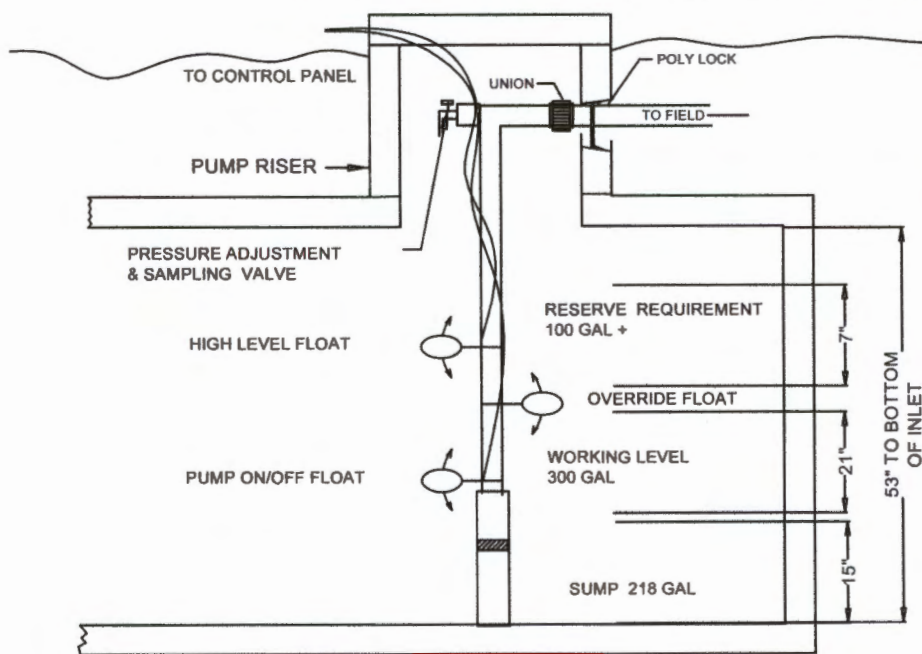
Tightlines to the tank shall be SCH-40 PVC.

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

**VOID**

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



F-2585  
09/27/18

**VOID**

TYPICAL PUMP TANK CONFIGURATION  
NU-WATER 550PC -400PT 768 GAL PUMP TANK

3/12



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**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.**

03025357C-DR

ERIC A. AGUIRRE, ET UX -TO- DONOVAN L. PRINCE II

**WARRANTY DEED**

**DATE:** February 24, 2017

**GRANTOR:** ERIC A. AGUIRRE and wife, LISA ANNE AGUIRRE A/K/A LISA AGUIRRE

**GRANTOR'S MAILING ADDRESS:** 107 Skytrail Drive, New Braunfels, Texas 78130 (Comal County)

**GRANTEE:** DONOVAN L. PRINCE II, a single person

**GRANTEE'S MAILING ADDRESS:** 1318 Sea Breeze, New Braunfels, Texas 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 168, THE PINNACLE, a Subdivision in Comal County, Texas, according to map or plat recorded in Volume 12, Page 359, Map and Plat Records, Comal County, Texas.

The Property is conveyed As Is with any defects, and without warranties except warranties of title and warranties in the contract between the parties, if any.

**RESERVATIONS FROM CONVEYANCE:** None

**EXCEPTIONS TO CONVEYANCE AND WARRANTY:** Validly existing easements, and rights-of-way, of record or not; all presently recorded and validly existing restrictions, reservations, covenants, conditions, oil and gas leases, mineral interests, 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 2017, 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.

Eric A. Aguirre

ERIC A. AGUIRRE

Lisa Anne Aguirre

LISA ANNE AGUIRRE A/K/A LISA AGUIRRE

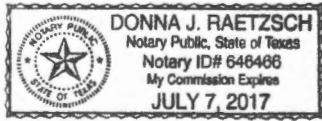
ACCEPTANCE BY GRANTEE:

Donovan L. Prince II  
DONOVAN L. PRINCE II

THE STATE OF TEXAS

COUNTY OF GUADALUPE

This instrument was acknowledged before me on the 24 day of Feb., 2017, by ERIC A. AGUIRRE.

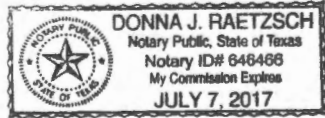


Donna J. Raetzsch  
Notary Public, State of Texas  
Notary's Name Printed: \_\_\_\_\_

THE STATE OF TEXAS

COUNTY OF GUADALUPE

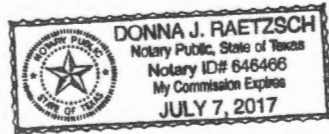
This instrument was acknowledged before me on the 24 day of Feb., 2017, by LISA ANNE AGUIRRE A/K/A LISA AGUIRRE.



Donna J. Raetzsch  
Notary Public, State of Texas  
Notary's Name Printed: \_\_\_\_\_

THE STATE OF TEXAS  
COUNTY OF GUADALUPE

This instrument was acknowledged before me on the 24 day of Feb, 2017, by  
DONOVAN L. PRINCE II.



  
Notary Public, State of Texas  
Notary's Name Printed: \_\_\_\_\_

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
03/02/2017 09:31:55 AM  
MEDINM 3 Page(s)  
201706008096



*Bobbie Koepf*

AFTER RECORDING RETURN TO:  
Seguin Title Company  
202 N. Camp St.  
Seguin, TX 78155

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

<i>items Date Received</i>	<i>initials</i>

<i>Permit Number</i>

Instructions:

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

OSSF Permit

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

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

  
 \_\_\_\_\_  
 Signature of Applicant

10/11/12  
 \_\_\_\_\_  
 Date

____ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

____ INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)

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

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

**Permit #: 108218**

**To: Lee Prince**  
**1179 PINNACLE PKWY**  
**New Braunfels, TX 78132**

Tech: Not Assigned  
 Brand/Mfg: MAXX AIR -  
 System S/N:  
 Aerator and S/N:

Site: 1179 PINNACLE PKWY, New Braunfels  
 Agency: Comal County  
 County:  
 Subdivision: The Pinnacle

Installed:  
 Phone:  
 Cell:  
 Work:

Contract: 4/24/2019 - 4/24/2022 |  
 Inspections per year: 3  
 Service Due: 8/24/2019  
 Alt Phone:  
 Warranty Ending:

Inspection Type: \_\_\_\_\_ Inspection # \_\_\_\_\_ of \_\_\_\_\_ for the contract year

Item	Operational	Inoperative	N/A		
Aerator:	_____	_____	_____ <input checked="" type="checkbox"/>	1	18
Irrigation pump:	_____ <input checked="" type="checkbox"/>	_____	_____ <input checked="" type="checkbox"/>		
Air compressor:	_____ <input checked="" type="checkbox"/>	_____	_____	2	0
Disinfection device:	_____ <input checked="" type="checkbox"/>	_____	_____		
Chlorine supply:	_____ <input checked="" type="checkbox"/>	_____	_____		
Spray field vegetation:	_____ <input checked="" type="checkbox"/>	_____	_____		
Sprinkler / Drip backwash:	_____ <input checked="" type="checkbox"/>	_____	_____	3	0
Photocell Test:	_____	_____	_____ <input checked="" type="checkbox"/>		
Autodialer:	_____	_____	_____ <input checked="" type="checkbox"/>		
Water Meter Reading: _____	CFM: _____	PSI: _____			

Test Results and observations: (As Required)

Fecal Coliform: \_\_\_\_\_  
 Chlorine Residual: \_\_\_\_\_ *.08*  
 Test Method: \_\_\_\_\_ *CRAB*  
 BOD: \_\_\_\_\_  
 TSS: \_\_\_\_\_  
 Commercial Lab: \_\_\_\_\_  
 Date Submitted: \_\_\_\_\_

Repairs made: Y / N

Repairs and Comments: \_\_\_\_\_ *SCUM 1/4*

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

*29.78128*  
*98.090757*

Area: 10  
 GPS: ID = 937

Printed 8/22/2019

1179 PINNACLE PKWY, New Braunfels



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

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

**Permit #: 108218**

**To: Lee Prince**  
**1179 PINNACLE PKWY**  
**New Braunfels, TX 78132**

Tech: Not Assigned  
 Brand/Mfg.: MAXX AIR -  
 System S/N:  
 Aerator and S/N:

Contract 4/24/2019 - 4/24/2022  
 Inspections per year: 3  
 Service Due: 12/24/2019  
 Alt Phone  
 Warranty Ending:

Site 1179 PINNACLE PKWY, New Braunfels  
 Agency Comal County  
 County:  
 Subdivision The Pinnacle

Installed:  
 Phone (281) 380-3942  
 Cell  
 Work

Inspection Type: \_\_\_\_\_ Inspection # \_\_\_\_\_ of \_\_\_\_\_ for the contract year

Item	Operational	Inoperative	N/A		
Aerator:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1	12
Irrigation pump:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Air compressor:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	0
Disinfection device:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Chlorine supply:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Spray field vegetation:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3	0
Sprinkler / Drip backwash:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Photocell Test:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Autodialer:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Water Meter Reading: _____	CFM: _____	PSI: _____			

Test Results and observations: (As Required)

Fecal Coliform: \_\_\_\_\_  
 Chlorine Residual: \_\_\_\_\_  
 Test Method: Crab  
 BOD: \_\_\_\_\_  
 TSS: \_\_\_\_\_  
 Commercial Lab: \_\_\_\_\_  
 Date Submitted: \_\_\_\_\_

Repairs made: Y / N

Repairs and Comments: gcu m 1

Inspector \_\_\_\_\_ Date: \_\_\_\_\_

Area: / 0  
 GPS: 29.78128 -98.09075 ID = 937

Printed 12/5/2019

1179 PINNACLE PKWY, New Braunfels

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

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

**To: Lee Prince**  
1179 PINNACLE PKWY  
New Braunfels, TX 78132

Printed:4/30/2020  
Site: 1179 PINNACLE PKWY  
New Braunfels, TX 78132  
(281) 380-3942

---

Permit #: **108218** Customer ID: 937  
Agency: Comal County Contract Dates: 4/24/2019 - 4/24/2022  
County: Sub: The Pinnacle Scheduled Date 4/24/2020 Inspection 3 of 9  
Mfg / Brand: - MAXX AIR  
Treatment Type: Aerobic  
Disposal: Surface Application GPS Coordinates - Latitude: 29.78128 Longitude: -98.090757

---

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 4/16/2020**

**Entered By: \_**

**Method: Grab**

**Technician: Ryan Seidensticker**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Sludge Levels**

**Filters: Operational**

**For Tank 1: 6"**

**Irrigation Pumps: Operational**

**For Tank 2: 2"**

**Disinfection Device: Operational**

**For Tank 3: 2"**

**Air Filter: Good**

**Tank Lid / Riser: Secured**

**Sprinkler Drip Backwash: Good**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Color: Good**

**Odor: Good**

**Alarm: Operational**

**Comments**

**Service Completed**

Scum on pretreatment 6" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

Insp ID #:4150

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

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

License Info: MP0001708 Expires:

License Info: MP0001708 Expires: 9/1/2023

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

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

To: Lee Prince  
1179 PINNACLE PKWY  
New Braunfels, TX 78132

Printed: 8/28/2020  
Site: 1179 PINNACLE PKWY  
New Braunfels, TX 78132  
(281) 380-3942

Permit #: **108218**

Agency: Comal County  
County:

Sub: The Pinnacle

Customer ID: 937

Contract Dates: 4/24/2019 - 4/24/2022

Scheduled Date: 8/24/2020

Inspection 4 of 9

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

GPS Coordinates - Latitude: 29.78128 Longitude: -98.090757

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

Visit Date: 8/26/2020

Entered By: \_

Method: Grab

Technician: Not Assigned

Maint. Provider: Ryan Seidensticker

Aerators: Operational

**Sludge Levels**

Filters: Operational

For Tank 1: 6

Irrigation Pumps: Operational

For Tank 2: 1

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: .2

Tank Lid / Riser: Secured

Sprinkler Drip Backwash: Good

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Color: Good

Odor: Good

Alarm: Operational

Comments

Service Completed

Scum on pretreatment:2" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

Insp ID #:5617

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

License Info: MP0001708 Expires:

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

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

**To: Lee Prince**  
**1179 PINNACLE PKWY**  
**New Braunfels, TX 78132**

Printed: 4/16/2021  
Site: 1179 PINNACLE PKWY  
New Braunfels, TX 78132  
(281) 380-3942

Permit #: **108218**

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: The Pinnacle

Customer ID: 937

Contract Dates: 4/24/2019 - 4/24/2022

Scheduled Date: 4/24/2021

Inspection 6 of 9

GPS Coordinates - Latitude: 29.78128 Longitude: -98.090757

**Service Type: Scheduled Inspection**

**Visit Date: 4/15/2021**

**Method: Grab**

**Technician: Not Assigned**

**Maint. Provider: Ryan Seidensticker**

This counts as a type of "Scheduled Inspection"

**Entered By: \_**

Copy emailed to Customer

Customer Emailed: 4/16/2021

**Aerators: Operational**

**Filters: Operational**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: 1.63**

**Sludge Levels**

**For Tank 1: 4"**

**For Tank 2: 0"**

**For Tank 3: 0"**

**Tank Lid / Riser: Secured**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Color: Good**

**Odor: Good**

**Alarm: Operational**

**Comments**

Scum on pretreatment: 2" - Need to remove fire ants from compressor/replaced spray head Technician Secured the Tank Lid and/or Riser prior to leaving location. - Copy emailed to the customer on 4/16/2021.

**Service Completed**

**Owner signature: \_\_\_\_\_**

Insp ID #:9057

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

License Info: MP0001708 Expires:

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

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

**To: Lee Prince**  
**1179 PINNACLE PKWY**  
**New Braunfels, TX 78132**

Printed: 7/27/2021  
Site: 1179 Pinnacle Parkway  
New Braunfels, TX 78132  
(281) 380-3942

Permit #: **108218**

Agency: Comal County  
County:

Sub: The Pinnacle

Customer ID: 937

Contract Dates: 4/24/2019 - 4/24/2022

Scheduled Date 8/24/2021

Inspection 7 of 9

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

GPS Coordinates - Latitude: 29.78128 Longitude: -98.090757

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 7/26/2021**

**Entered By: \_**

**Method: Grab**

**Technician: Ryan Seidensticker**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Sludge Levels**

**Filters: Operational**

**For Tank 1: 11**

**Irrigation Pumps: Operational**

**For Tank 2: 1**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: .2**

**Tank Lid / Riser: Secured**

**Sprinkler Drip Backwash: Good**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Color: Good**

**Odor: Good**

**Alarm: Operational**

**Comments**

**Service Completed**

Scum on pretreatment 2" M.A. - Technician Secured the Tank Lid and/or Riser prior to leaving location.

**Owner signature: \_\_\_\_\_**

Insp ID #: 11070

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

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

License Info: MP0001708 Expires:

License Info: MP0001708 Expires: 9/1/2023

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

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

**To: Lee Prince**  
**1179 PINNACLE PKWY**  
**New Braunfels, TX 78132**

Printed: 12/6/2021  
Site: 1179 Pinnacle Parkway  
New Braunfels, TX 78132  
(281) 380-3942

Permit #: **108218**

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: The Pinnacle

Customer ID: 937

Contract Dates: 4/24/2019 - 4/24/2022

Scheduled Date: 12/24/2021

Inspection 8 of 9

GPS Coordinates - Latitude: 29.78128 Longitude: -98.090757

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 12/3/2021**

**Entered By: Danielle Jordan**

**Method: Grab**

**Technician: Robert Podvin**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Filters: Operational**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: .001**

**Sludge Levels**

**For Tank 1: 20**

**For Tank 2: 24**

**For Tank 3: 8**

**Tank Lid / Riser: Secured**

**Sprinkler Drip Backwash: Good**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Color: Good**

**Odor: Good**

**Alarm: Operational**

**Comments**

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

**Service Completed**

Insp ID #:13445

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

License Info: MP0001708 Expires:

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

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

**To: Lee Prince**  
**1179 PINNACLE PKWY**  
**New Braunfels, TX 78132**

Printed:4/13/2022  
Site: 1179 Pinnacle Parkway  
New Braunfels, TX 78132  
(281) 380-3942

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Permit #: **108218** Customer ID: 937  
Agency: Comal County Contract Dates: 4/24/2019 - 4/24/2022  
County: Sub: The Pinnacle Scheduled Date: 4/24/2022 Inspection 9 of 9  
Mfg / Brand: - MAXX AIR  
Treatment Type: Aerobic  
Disposal: Surface Application GPS Coordinates - Latitude: 29.78128 Longitude: -98.090757

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**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 4/11/2022**

**Entered By: Michelle Irvin**

**Method: Grab**

**Technician: Nick Zigalo**

**Maint. Provider: Ryan Seidensticker**

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**Aerators:** Operational  
**Filters:** Operational  
**Irrigation Pumps:** Operational  
**Disinfection Device:** Operational  
**Chlorine Supply:** Operational  
**Chlorine Residual:** .03

**Sludge Levels**  
**For Tank 1:** 13  
**For Tank 2:** 9  
**For Tank 3:** 1

**Tank Lid / Riser:** Secured

**Sprinkler Drip Backwash:** Good

**Electric Circuits:** Operational  
**Distribution System:** Operational  
**Sprayfield Veg:** Operational

**Color:** Good  
**Odor:** Good

**Alarm:** Operational

**Comments**

Scum = 2" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

**Service Completed**

Insp ID #:16955

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

License Info: MP0001708 Expires:

License Info: MT0002016 Expires: 12/31/2023