



Comal County

OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: **05/31/2019**

Permit Number: **108255**

Location Description: **8418 ORCHARD GLEN
GARDEN RIDGE, TX 78266**

Subdivision: **The Woodlands of Garden Ridge**
Unit: **1**
Lot: **1**
Block: **1**
Acreage:

Type of System: **Aerobic
Surface Irrigation**

Issued to: **Chesmar Homes CT, Ltd.**

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

 **OS8497**
ENVIRONMENTAL HEALTH INSPECTOR

 **OS 0025599**
ENVIRONMENTAL HEALTH COORDINATOR

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: JB. Septic / Jim Blake OSSF Installer #: _____

1st Inspection Date: 5/20/19 2nd Inspection Date: _____ 3rd Inspection Date: 5/31/19

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

Permit#: 108255 Address: Woodlands of Garden Ridge / 8418 Orchard Glen

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)		5/20/19		5/31/19
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	✓	285.91(10) 285.30(b)(4) 285.31(d)				
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	✓	285.32(a)(1)				
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	✓	285.32(a)(3)				
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)	✓	285.32(a)(5)				
6	PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(G)285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(I) 285.32(b)(1)(C)(II) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(A) 285.32(b)(1)(E)(II)(II) 285.32(b)(1)(E)(I) 285.32(b)(1)(E)(II)(I)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

MT - 5/20/19
Tank set, leveled
operational ✓
Ready For Cover

MT - 5/31/19
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)				
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	steo / 19		5/31/19
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	✓		Clearstream			1
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

**Comal County Environmental Health
OSSF Inspection Sheet**

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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)				

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OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart	/	285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3)(B) 285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)		5/20/19		5/31/19
33	AEROBIC TREATMENT UNIT is Aerobic Unit Installed According to Approved Guidelines.	/	285.32(c)(1)				
34	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions	/					
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.	/					
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump	/					
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OSSF Inspection Sheet**

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42	APPLICATION AREA Area Installed	✓					
43	PUMP TANK Meets Minimum Reserve Capacity Requirements	✓		1200 gal. Single	5/20/19		
44	PUMP TANK Material Type & Manufacturer	✓		Clear stream			
45	PUMP TANK Type/Size of Pump Installed	✓					

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: JB. Septic / Jim Blake OSSF Installer #: _____

1st Inspection Date: 5/20/19 2nd Inspection Date: _____ 3rd Inspection Date: _____

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OSSF Inspection Sheet**

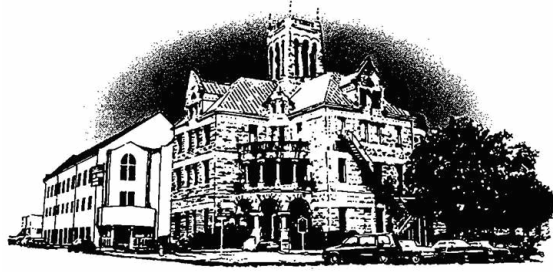
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OSSF Inspection Sheet**

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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: 108255
Issued This Date: 11/01/2018
This permit is hereby given to: Chesmar Homes CT, Ltd.

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

8418 ORCHARD GLEN
GARDEN RIDGE, TX 78266

Subdivision: The Woodlands of Garden Ridge
Unit: 1
Lot: 1
Block: 1
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.

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

Date _____ Permit # 108255
Owner Name Chesmar Homes CT, Ltd, a Texas
Agent Name JB Septic Systems, Inc
Owner Name limited Partnership
Agent Address P.O. Box 1609
Mailing Address 1846 N Loop 1604 W. Suite 200
City, State, Zip San Antonio, TX 78248
City, State, Zip Helotes, Texas 78023
Phone # 210-998-5610
Phone # 830-931-0292
Email rosie.meeks@chesmar.com
Email info@jbsepticssystemsinc.com

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

Subdivision Name The Woodlands of Garden Ridge Unit 1 Lot 1 Block 1
Acreage/Legal _____
Street Name/Address 8418 Orchard Glen City Garden Ridge Zip 78266

Type of Development:

Single Family Residential
Type of Construction (House, Mobile, RV, Etc.) House
Number of Bedrooms 5
Indicate Sq Ft of Living Area 3,774

Commercial or Institutional Facility
(Planning materials must show adequate land area for doubling the required land needed for treatment units and disposal)
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: \$ 334,236 (Structure Only)

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

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

Source of Water Public Private Well

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

By signing this application, I certify that:

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

[Signature]
Signature of Owner

10/16/18
Date

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

Planning Materials & Site Evaluation as Required Completed By Jim W. Blake, Sr. #2289

System Description Aerobic Treatment with Spray Irrigation

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

Tank Size(s) (Gallons) 500/600/1,200 Absorption/Application Area (Sq Ft) 5,654

Gallons Per Day (As Per TCEQ Table III) 360

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

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

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

Is there an existing TCEQ approved WPAP for the property? Yes No

(If yes, the R.S. or P.E. shall certify that the OSSF design complies with all provisions of the existing WPAP.)

If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP? Yes No

(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct will not be issued for the proposed OSSF until the proposed WPAP has been approved by the appropriate regional office.)

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

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

(If yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP.)

If there is no existing CZP, does the proposed development activity require a TCEQ approved CZP? Yes No

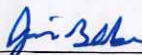
(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to Construct will not be issued for the proposed OSSF until the CZP has been approved by the appropriate regional office.)

Is this property within an incorporated city? Yes No

If yes, indicate the city: City Of Garden Ridge

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

10-30-18
Date

This Policy Does Not Include;

1. **Cost of Pumping Sludge From Unit If Necessary.**
2. **Cost of System Repair Due to Damage or Parts Failure Due to Neglect.**
3. **Cost of Replacement of "Normal Wear & Tear" Items During Routine Maintenance Visits.**

The Maintenance Company and the Owner agree to abide by the service policy as stated above.

MAINTENANCE COMPANY:

J.B. Septic Maintenance, Inc.
P.O. Box 1609
Helotes, Texas 78023
(830) 931-0292
(210) 414-6289

MANUFACTURER:

Clearstream Wastewater Systems, Inc.
P.O. Box 7568
Beaumont, Texas 77726-7568
(409) 755-1500

Installation Company:

J.B. Septic Systems, Inc.
P.O. Box 1609
Helotes, Texas 78023
(830) 931-0292

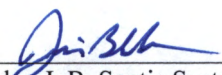
Permitting Authority:

Comal County Office of Environmental Health
195 David Jonas Drive
New Braunfels, TX 78132-3760
(830) 608-2094

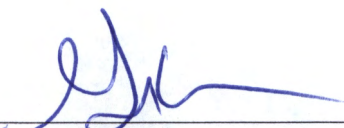
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Jim Blake, J. B. Septic Systems, Inc.



System Owner

Service Company Operator License Number: MP0000892

**J.B. Septic Systems, Inc.
Two-Year Initial Service Policy**

Page one

**System Owner:
Chesmar Homes CT, Ltd.**

Brand Name: Clearstream Wastewater System
System Name: Primary
Serial Number: _____
Model Number: _____
Permit Number: _____

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Site: Legal Description: 8418 Orchard Glen, Lot 1, Block 1
The Woods of Garden Ridge Unit 1, Comal County

J. B. Septic Maintenance, Inc. will inspect and service your Clearstream Aerobic Treatment Plant once every four months for a period of two years. The effective date of this initial maintenance contract shall be the date the License to Operate is issued.

Before this initial two-year service policy expires, JB Septic Maintenance, Inc will notify you. Upon renewal of the contract, a copy of the new contract shall be submitted to the permitting authority. If the property owner or maintenance company desire to discontinue the maintenance contract, the maintenance company shall notify, in writing, the permitting authority at least 30 days prior to the date service will cease.

Testing and Reporting

J.B. Septic Maintenance, Inc. shall test and report on this system as required by rule on the following:

1. An Inspection/Service Call every 4 months, which includes inspections, adjustment, and servicing of the mechanical and electrical component parts as necessary to ensure proper function.
2. An effluent quality inspection every 4 months, consisting of a visual check for color, turbidity, scum overflow, and an examination for odors.
3. A sample shall be pulled from the aeration tank every 4 months to determine if there is an excess of solids in the treatment plant. If the test results determine a need for solids removal, the user will be notified and the system will be pumped upon owner authorization.
4. If any improper operation is observed which cannot be corrected at the time, the user shall be notified immediately in writing of the conditions and the estimated date of correction.
5. If required, a chlorine residual test well be taken at each visit. (BOD and TSS annually on commercial only.) If a grab test is required, the Owner will be responsible for the cost of the grab test.

The owner is responsible for keeping chlorine (Bleach) in the chlorinator as well as the cost of the chlorine.

J.B. Septic Maintenance, Inc. has been certified by the manufacturer of your system, and will be responsible for fulfilling the requirements of this Maintenance Contract, as well as responding to any alarms and/or addressing any concerns by the owner of the system. Alarms and/or concerns will be addressed within 48 hours of the initial contact.

VIOLATIONS OF WARRANTY including shutting off the electric current to the system for more than 24 hours, disconnecting the alarm system, restricting ventilation to the aerator, overloading the system above its rated capacity, or introducing excessive amounts of harmful matter into the system, or any other form of unusual abuse.

2lc

AFFIDAVIT TO THE PUBLIC



201806041227 10/19/2018 02:41:45 PM 1/2

The County of Comal §
State of Texas §

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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.

COMAL COUNTY ENGINEER

I

The Texas Health & Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (commission) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 5.013, gives the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety Code, requires owner's to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

II

An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code § 285.91(12) will be installed on the property described as Lot 1, Block 1, The Woodlands of Garden Ridge Unit 1, a subdivision in Comal County, Texas, according to the plat thereof recorded in Document No. 201306045949, together with Affidavit of Correction recorded in Document No. 201406001093, and amended plat thereof, recorded in Document No. 201406036021, Map and plat Records of Comal County, Texas, together with all improvements thereon and all rights and appurtenances pertaining thereto, including, without limitation, any and all right, title and interest of Grantor in and to all roads, alleys, easements, streets, rights-of-way, and water courses adjacent to, abutting, or serving the Lots, strips and gores, rights of ingress and egress to the Lots, and all permits, approvals, privileges and entitlements appurtenant to the Lots.

The property is owned by Chesmar Homes CT, Ltd, a Texas limited Partnership

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.

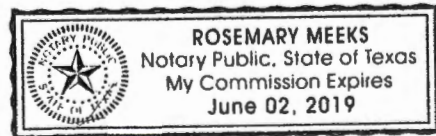
Upon sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the Comal County Engineer's Office.

WITNESS BY HAND(S) ON THIS 16th Day of October, 2018

[Signature]
Gilbert Barrera, Jr. Purchasing Manager
Chesmar Homes, Ct, Ltd.

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 16
DAY OF October, 2018.

[Signature]
Notary Public, State of Texas



Notary/s Printed Name: Rosemary Meeks
My Commission Expires: 6/2/19



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

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

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
10/19/2018 02:41:45 PM
JESSICA 2 Page(s)
201806041227



Bobbie Koepf

J. B. Septic Systems, Inc.

Jim W. Blake, Sr., RS 2289
P. O. Box 1609
Helotes, TX 78023

Telephone (830) 931-0292
Fax (830) 931-0409

October 4, 2018

Comal County Environmental Office
195 David Jonas Drive
New Braunfels, TX 78132-3760

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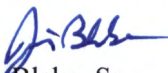
RE: Lot 1, Block 1, The Woodlands of Garden Ridge, Unit 1
(8418 Orchard Glen)

To Whom It May Concern:

I hereby certify that the On-Site Sewage Facility (OSSF) design for the above referenced property complies with all provisions of the proposed Water Protection Abatement Plan (WPAP), as approved by the Texas Commission on Environmental Quality (TCEQ).

Please contact me at the number listed above if you should have any desire to discuss this matter.

Sincerely,


Jim W. Blake, Sr.
JB Septic Systems, Inc.

J. B. Septic Systems, Inc.

Jim Blake Sr.
Registered Sanitarian
P.O. Box 1609
Helotes, Texas 78023

Telephone (830) 931-0292
Fax (830) 931-0409

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SITE EVALUATION

COUNTY ENGINEER

LOCATION: 8414 Orchard Glen, Lot 1, Block 1
The Woodlands of Garden Ridge Unit 1, Comal County

I. USDA County Soils Survey Classification: Medlin-Eckrant Association -MEC

II. Soil Analysis Sample: Two soil borings located in the proposed absorption area.
(Method and Location)

III. Soil Profile: 0 - 17" stony clay soil underlain by limestone
(Describe sample)

IV. Soil Texture Classification:
 Soil Class Ia Soil Class Ib Soil Class II Soil Class III X Soil Class IV

V. Soil Structure: Blocky

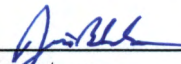
VI. Restrictive Horizons (Note any dense clay sub-soils, rock or fractured rock, depth of groundwater etc.): Rock

VII. Topography: 2% slope

VIII. Flood Hazard: On-Site Sewage Facility is not located in a flood prone area.

IX. Overall Site Suitability: This site is suitable for Aerobic Treatment with Spray Irrigation.

X. Recharge Zone: No.


Signature

October 4, 2018
Date

OS0010832
Registration #



REVISED

8:36 am, Nov 01, 2018

J.B. Septic Systems, Inc.

Jim Blake Sr.
Registered Sanitarian
P.O. Box 1609
Helotes, Texas 78023

Telephone (830) 931-0292
Fax (830) 931-0409

ON-SITE SEWAGE FACILITY DESIGN

FOR: Chesmar Homes CT, Ltd.
1846 N. Loop 1604 W., Suite 200
San Antonio, TX 78248

LOCATION: 8218 Orchard Glen
Lot 1, Block 1
The Woodlands of Garden Ridge, Unit 1
Comal County

DEVELOPMENT: Proposed five-bedroom residence with 3,774 sq. ft. living area.

ESTIMATE OF WATER CONSUMPTION: **360** gallons per day.

SEWAGE FACILITY DESCRIPTION: Clearstream Aerobic Treatment System with timer, chlorinator, sprinkler pump, and sprinkler heads covering a surface application area of 5,654 square feet. The timer is set for spray between midnight and 5:00 A.M.

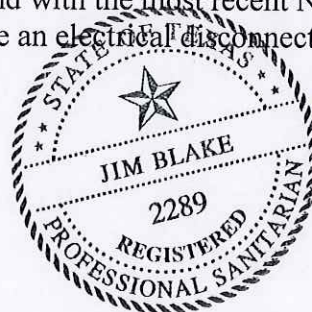
CALCULATION:

$$\begin{array}{l} \text{Application Area} \\ \text{Required} = \frac{\text{Flow}}{\text{Soil Appl. Rate}} = \frac{360 \text{ Gals./Day}}{.064 \text{ Gals./Sq.Ft./Day}} = 5,525 \text{ Sq. Ft.} \end{array}$$

ACTUAL APPLICATION AREA TO BE COVERED:

(Radius of Sprinkler Head) X (Radius of Sprinkler Head) X 3.14	=	Sq. Ft.
One Full circle sprinkler head with a 28 foot radius	=	2,461 Sq. Ft.
One Full circle sprinkler head with a 27 foot radius	=	2,289 Sq. Ft.
One ½ circle sprinkler head with a 24 foot radius	=	904 Sq. Ft.
Total	=	5,654 Sq. Ft.

ELECTRICAL WIRING – All wiring must be in complete compliance with 30 Texas Administrative Code 285.34(c) and with the most recent National Electric Code. All electrical components should have an electrical disconnect within direct vision.



Jim Blake

AEROBIC TREATMENT SYSTEM COMPONENTS AND REQUIREMENTS:

OCT 19 2018

1. Minimum 500 gallon **Pre-Treatment Tank**.
2. **Aerobic Treatment Unit** – 600 gallon TCEQ approved unit.
3. **Liquid Chlorinator** – Only E.P.A. approved chlorine (Bleach) for use with wastewater shall be used. It is the owner's responsibility to ensure that it is functioning properly and has chlorine **IN IT AT ALL TIMES**.
4. 1,200 gallon **Pump Tank** with a minimum ½ horsepower, 18 GPM well pump (P-20 pump or approved equivalent.)
5. **Sprinkler heads** must be impact or gear driven rotary design with a maximum inlet pressure of 40 PSI. Only low angle (13 degree trajectory) nozzles shall be used. All sprinkler heads shall be self-draining type so as to prevent in-line freezing. The exact location of sprinkler heads shall be coordinated between the installer and the property owner so that spray patterns shall not be blocked by trees, etc; a minimum of 10 feet shall be required between any sprinkler head and the base of a tree.
6. **SURFACE APPLICATION AREA** - The area to be sprayed shall have enough topsoil in place to cover the force lines and to support the growth of vegetation. This vegetation shall consist of grasses, evergreen shrubs, bushes, trees or landscaped beds containing mixed flora. Exposed surface rock in the application area shall be removed or covered with soil and seeded or grassed laid. Sloped land is acceptable if properly landscaped and terraced to minimize run-off. Distribution pipes and sprinkler heads must provide uniform distribution of treated effluent. The application rate must be adjusted so as to not produce run-off. Owners shall not allow driveways, fences, storage buildings, or other structures to be constructed over the treatment or disposal systems. Land that is used for growing food, gardens, orchards, or crops that may be used for human consumption, as well as unseeded bare ground, shall not be used for surface application. Exposed surface rock in the application area shall be removed or covered with soil and seeded or grassed laid.
7. **AFFIDAVIT** (signed and notarized) included with this design should be a permanent part of the real property deed. TCEQ requires that it give proper notification to future owners of the continuous maintenance and administrative requirements of this OSSF system.
8. **MAINTENANCE CONTRACT:**
At the time of system installation, the contractor will submit to the authorized agent, (County Inspector) a copy of the 2-Year Service Policy as required by the TCEQ. Maintenance Company will file a detailed report of the dates and findings of these inspections to the Authorized Agent. This will ensure periodic inspections (at least every 4 months) for system compliance with effluent standards. Correct testing/evaluation of the unit will include periodic measuring of residual chlorine levels and/or fecal coliform analysis, as required by TCEQ. Sludge accumulation will be monitored and the system owner will be notified when tanks require pumping.

NOTE: SEE ATTACHMENT for water treatment equipment and appliances installation requirements. The back flush or discharge from water treatment equipment may be discharged into an On-Site Sewage Facility as provided in this attachment. Effective April 28, 2004.

REMARKS: The contractor may make minor field adjustments to the system with approval of the county regulatory agency. The referenced site has been evaluated and the on-site sewerage facility has been designed generally following the requirements given by the Texas Commission on Environmental Quality and Comal County. The site evaluation and design are based upon technical information available today. The proper performance of any on-site sewerage facility cannot be guaranteed even though all provisions of the regulations have been met.

CERTIFICATION: I hereby certify that this sewage facility design submitted conforms to the Texas Commission on Environmental Quality and Comal County requirements, and with proper use, maintenance, and under normal climatic conditions can be expected to function without creating a nuisance.

DATE: October 4, 2018



Jim Blake

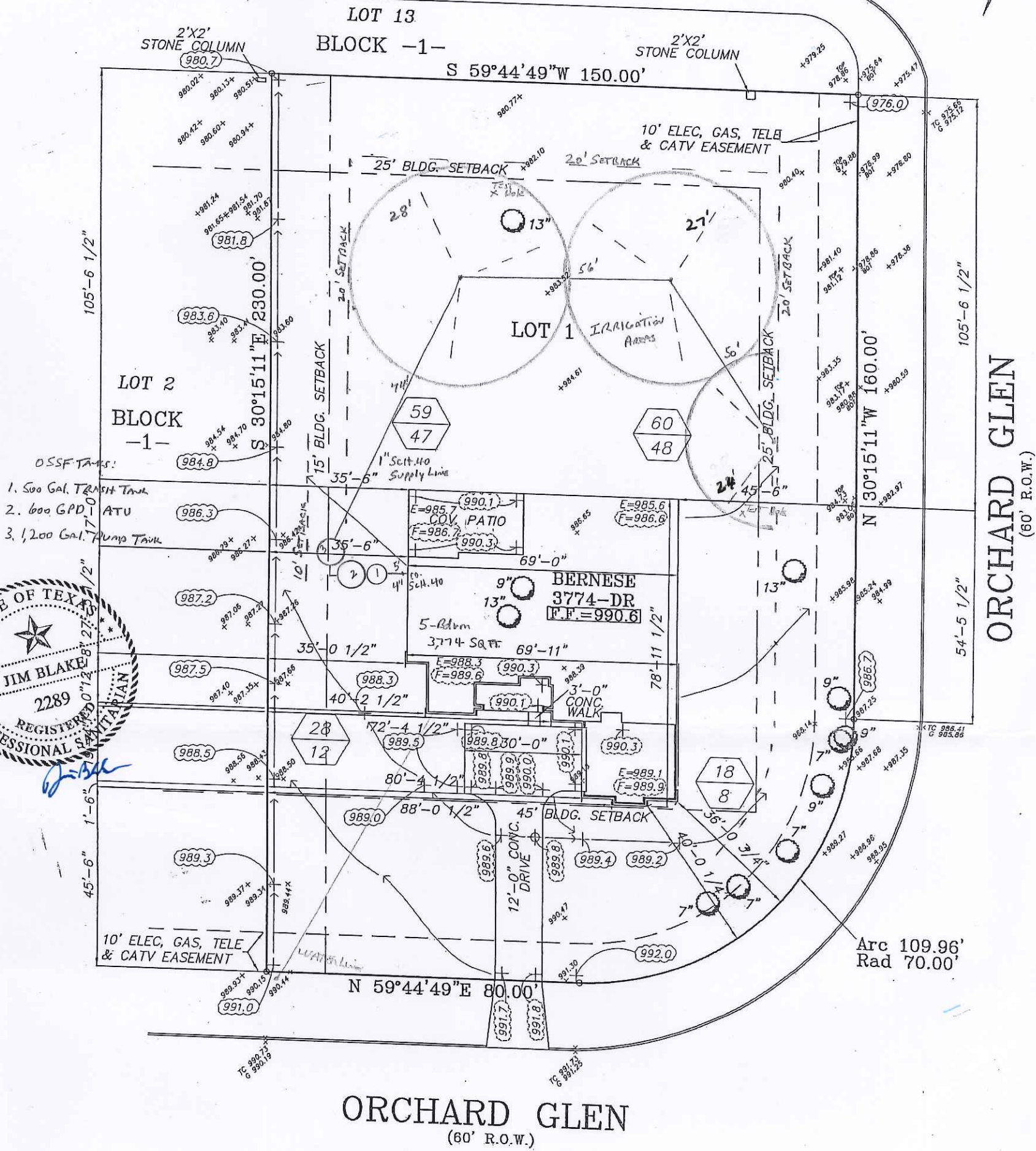
Jim Blake, Professional Sanitarian #2289

REVISED

8:41 am, Nov 01, 2018

GARDEN ARBOR

(VARIABLE WIDTH R.O.W.)



- OSSF TANKS:
1. 500 Gal. TRANSIT Tank
 2. 600 GPD ATU
 3. 1,200 Gal. Pump Tank

AVE. EXP. = 41"
 GRADING TYPE = "C"
TREE LEGEND
 ○ : OAK

FLAT WORK SQ. FOOTAGE	
LOT AREA =	33,448
SLAB AREA =	4,367
DRIVEWAY AREA =	1,353
ENTRY WALK AREA =	11

09/27/18 ADDED NEW FND. AAM.
 09/05/18 REVISED DRAINAGE. AP.
 08/21/18 ADDED DRAINAGE. AP.
 08/13/18 ADDED TOPO & TREES. AP.

PLOT PLAN
 DRAWN BY: AP
 SCALE: 1"=30'
 DATE: 08/13/2018

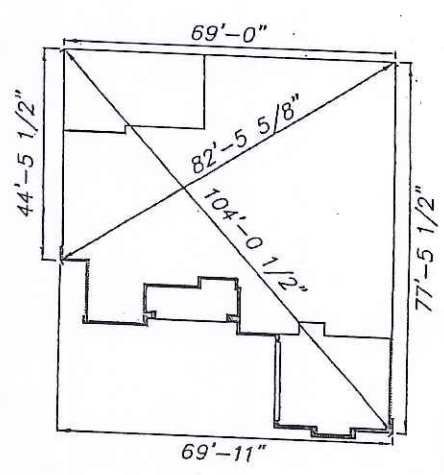
8418 ORCHARD GLEN
 LOT 1, BLK. 1
 THE WOODS OF GARDEN RIDGE, UNIT 1
 COMAL COUNTY, TEXAS

LOT COVERAGE	
LOT AREA:	
ALLOWABLE COVERAGE:	N/A
SLAB:	
DRIVEWAY:	5.7% SLOPE
PATIO/DECK:	PER SPECS.
WALK:	
TOTAL:	

JOB #
20181371
 SHEET
1 OF 1

SOUTH TEXAS ENGINEERING, INC.
 CIVIL-STRUCTURAL-ENVIRONMENTAL
 SURVEYING-LAND DEVELOPMENT
 REGISTRATION NO. F-4335
 4241 E. PIEDRAS DRIVE, SUITE 116
 SAN ANTONIO, TEXAS 78228-1422
 TEL (210) 736-2646
 FAX (210) 736-2359

CHESMAR HOMES



STATE MANDATED REGULATION CONCERNING AEROBIC SYSTEMS

NAME: Chesmar Homes CT, Ltd.
LOCATION: 8418 Orchard Glen, Garden Ridge, TX 78266
DATE: October 4, 2018

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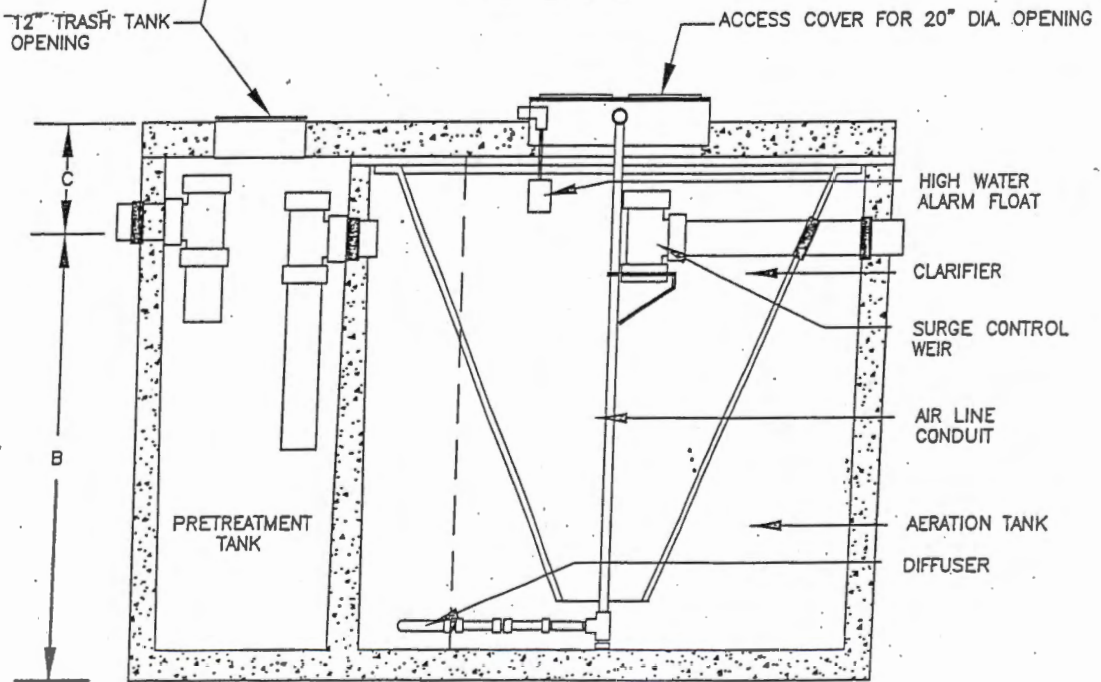
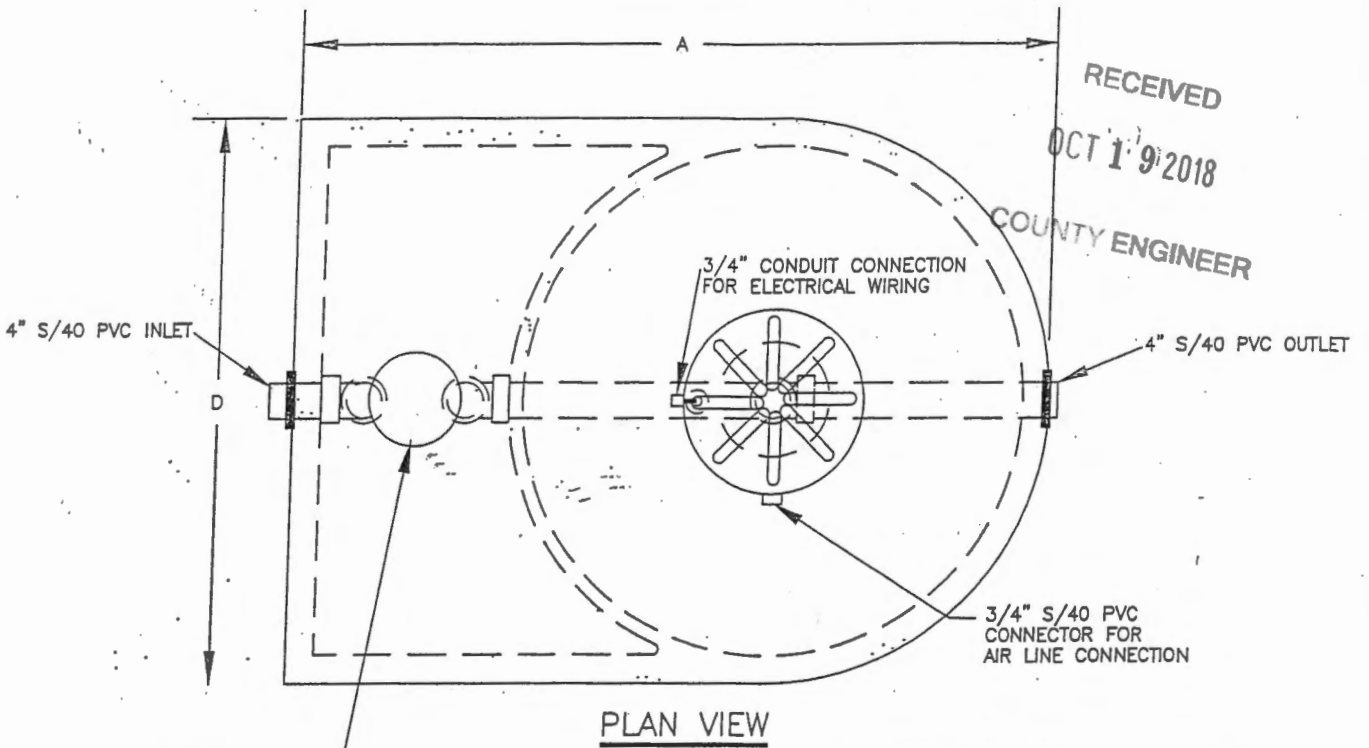
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As part of the installation of this system, the Texas Commission On Environmental Quality requires the following:

1. The property owner and the aerobic system maintenance contractor shall enter into a 2 year (minimum) full service maintenance contract in which the company will provide periodic inspections for system compliance with effluent standards. This contract will authorize the maintenance company to operate, maintain, and repair the system as needed. The costs of this service will be paid by the system's owner and may be included with the installation of the system. (See the attached Service Policy.)
2. The property owner shall submit an affidavit to the County Clerk's Office to be added to the Real Property Deed on which the surface application system is installed. (See the attached AFFIDAVIT TO THE PUBLIC.)
3. The maintenance company shall inspect this system as directed in the Service Policy and shall keep accurate records of their findings. These records shall be submitted to the County at the end of the first 2-year service life of the system.

DESIGN DRAWINGS

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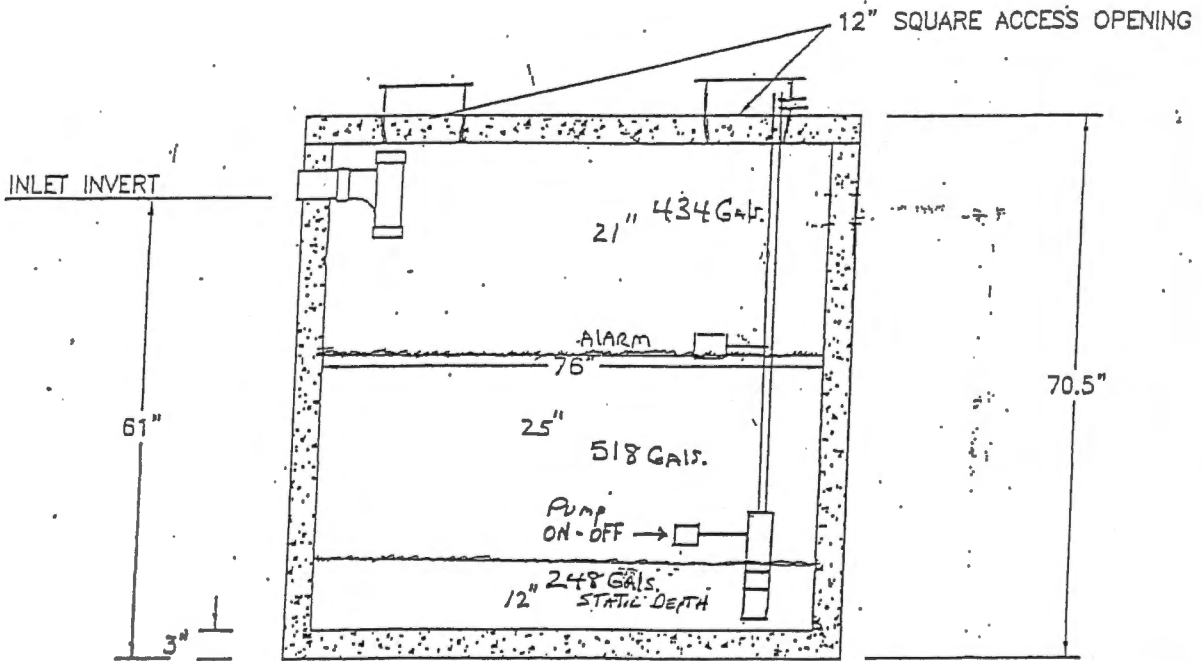
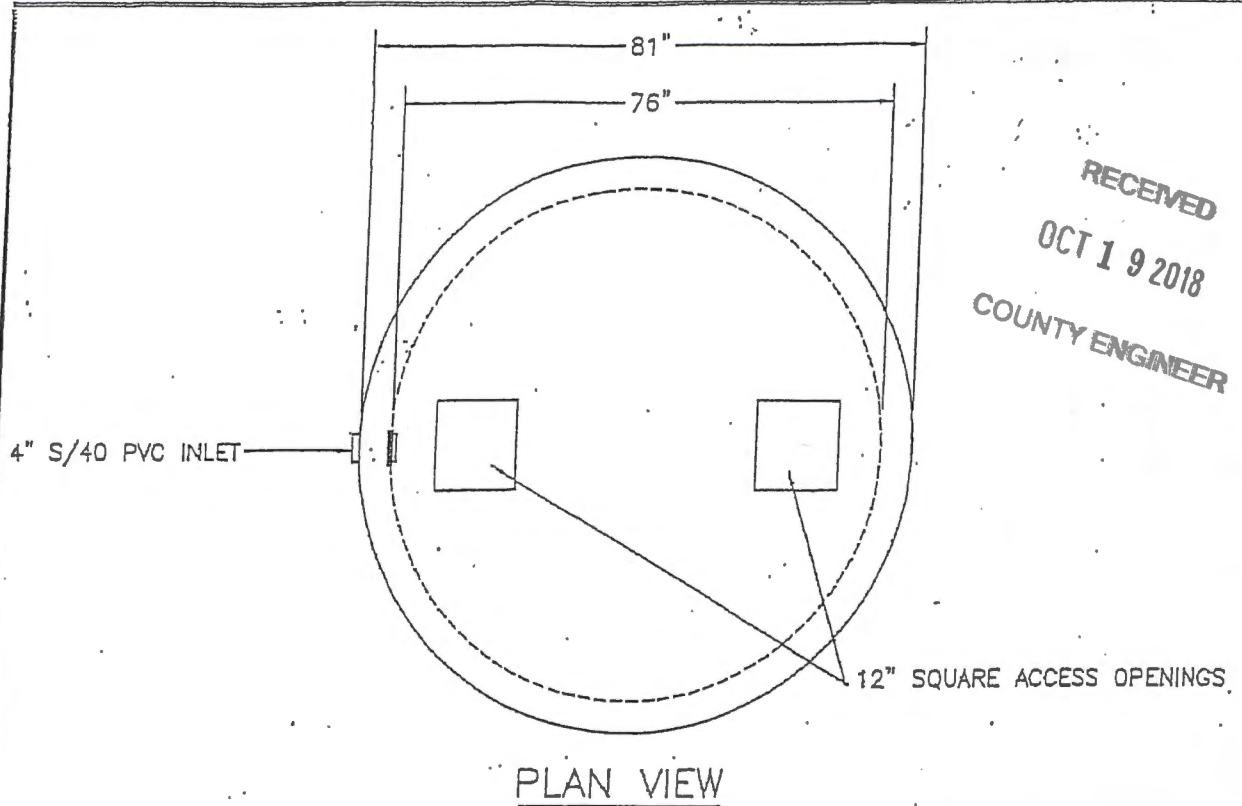


MODEL NC2
SECTION

DIMENSIONAL DATA

MODEL	A	B	C	D
500 NC2	104"	60"	10-1/2"	75"
600 NC2	107"	60"	10-1/2"	82"
750 NC2	107"	70"	10-1/2"	82"
800 NC2	107"	72"	8-1/2"	82"

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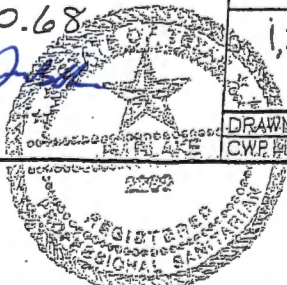
(TYP.) SECTION

NOTICE OF CONFIDENTIAL INFORMATION

Information contained herein is confidential and is the property of Clearstream Wastewater Systems, Inc. When furnished with a proposal, the recipient shall use it solely to evaluate the proposal. When furnished to a customer, it shall be used solely for purposes of inspection, installation, or maintenance. When furnished to a supplier, it shall be used solely in the performance of work contracted for by this company. The information shall not be used or disclosed by the recipient for any other purpose whatsoever. Clearstream Wastewater Systems, Inc. retains all patent and other rights including exclusive right of use. This drawing is copyrighted and is the exclusive property of Clearstream Wastewater Systems, Inc. © Clearstream Wastewater Systems, Inc.-2008

GALLONS/INCH
 20.68

John



CLEARSTREAM®
WASTEWATER SYSTEMS, INC.
 P.O. Box 9337 Beaumont, Texas 77708

1,200 GALLON PUMP TANK
 PRE-CAST CONCRETE

DRAWN: CWP	CHKD: JM	DATE: 6/08	REV: 0	REV DATE: 00/00	NUMBER: 10000804
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OWNER'S MANUAL

SERIES P20 4" SUBMERSIBLE PUMP

Two Wire, 1/2 HP, 115 Volt, 60 Hz

Installation • Operation

LIMITED WARRANTY

Clearstream warrants to the original consumer of the products listed below, that they will be free from defects in material and workmanship for the Warranty Period from the date of installation as noted.

<u>Product</u>	<u>Warranty Period</u>
4" Submersible Pump	2 year

Our warranty will not apply to any product that has been subject to negligence, misapplication, improper installation or maintenance.

Buyer's only remedy and Clearstream's only duty is to repair or replace defective products (at Clearstream's choice). Buyer agrees to pay all labor and shipping charges associated with this warranty and to request warranty service through the installing dealer as soon as a problem is discovered. If warranty service is requested after the Warranty Period has ended, it will not be honored.

CLEARSTREAM SHALL NOT BE LIABLE FOR ANY CONSEQUENTIAL, INCIDENTAL, OR CONTINGENT DAMAGES WHATSOEVER.

THE FOREGOING WARRANTIES ARE EXCLUSIVE AND IN LIEU OF ALL OTHER EXPRESS WARRANTIES. IMPLIED WARRANTIES, INCLUDING BUT NOT LIMITED TO THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, SHALL NOT EXTEND BEYOND THE WARRANTY PERIOD PROVIDED HEREIN.

Certain states do not permit the exclusion or limitation of incidental or consequential damages or the placing of limitations on the duration of an implied warranty, therefore, the limitations or exclusions herein may not apply. This warranty sets forth specific legal rights and obligations, however, additional rights may exist, which may vary from state to state.

Supersedes all previous publications.

Clearstream, P.O. Box 9337, Beaumont, TX 77709

CLEARSTREAM

P.O. Box 9337, Beaumont, TX 77709

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open. Start pump. *Slowly* open valve until the desired flow rate is reached. Final setting *must* be within pump's recommended operating range.

2. Make sure that the float switches are set so that the pump stops before the pump runs dry or breaks suction. If necessary, adjust float switches to achieve this.

3. The motor bearings are lubricated internally. No maintenance is required or possible on the pump or the motor.

OPERATION

1. The pump must be submerged at all times during normal operation. Do not run pump dry.

Table 1: Recommended Fusing Data
115 Volt/60 Hz/1 Phase 2-Wire Cable

HP	Voltz/Hz/ Phase	Motor Winding Resistance Ohms	Max Load Amps	Locked Rotor Amps	Fuse Size Standard/ Dual Element
1/2	115/60/1	1.0-1.3	12.0	64.8	30/15

Table 2: Power Supply Wire (Cable) Length in Feet
1 Phase, 2 Wire Cable, 60 Hz (Copper Wire Size - Service to motor)

Volts	HP	14 AWG	12 AWG	10 AWG	8 AWG	6 AWG	4 AWG	3 AWG	2 AWG	1 AWG	0 AWG
115	1/2	100	160	250	390	620	960	1190	1460	1780	2160

1. Maximum wire lengths shown maintain motor voltage at 95% of service entrance voltage, running at maximum nameplate amperes. If service entrance voltage will be at least motor nameplate voltage under normal load conditions, 50% additional length

is permissible for all sizes.

2. Sizes given are for copper wire. For aluminum wire go two sizes larger (i.e., if table lists #12 copper wire, use #10 aluminum wire.)

Motor Insulation Resistance Readings

Normal Ohm/Megohm readings for all motors, between all leads and ground. Set ohmmeter to 100K scale.

Condition of Motor and Leads	Ohm Value	Megohm Value
New motor, without power cable	20,000,000 (or more)	20.0
Used motor, which can be reinstalled in tank	10,000,000 (or more)	10.0
Motor in Tank - Readings are Power Cable plus Motor		
New Motor	2,000,000 (or more)	2.0
Motor in reasonably good condition	500,000 to 2,000,000	0.5-2.0
Motor which may be damaged or have damaged power cable <i>Do not pull motor for these reasons</i>	20,000 to 500,000	0.02-0.5
Motor definitely damaged or with damaged power cable <i>Pull motor and repair</i>	10,000 to 20,000	0.01-0.02
Failed motor or power cable — <i>Pull motor and repair</i>	Less than 10,000	0-0.01

Important Electrical Grounding Information

WARNING

Hazardous voltage. Can shock, burn, or kill. To reduce the risk of electrical shock during pump operation, ground and bond the pump and motor as follows:

- A. To reduce risk of electrical shock from metal parts of the assembly other than the pump, bond together all metal parts accessible at the tank top (including metal discharge pipe, metal tank top, and the like). Use a metal bonding conductor at least as large as the power cable conductors running down the well to the pump's motor.
- B. Clamp or weld (or both if necessary) this bonding conductor to the grounding means provided with the pump, which will be the equip-

ment-grounding terminal, the grounding conductor on the pump housing, or an equipment-grounding lead. The equipment-grounding lead, when provided, will be the conductor having green insulation; it may also have one or more yellow stripes.

- C. Ground the pump, motor, and any metallic conduit that carries power cable conductors. Ground these back to the service by connecting a copper conductor from the pump, motor, and conduit to the grounding screw provided within the supply-connection box wiring compartment. This conductor must be at least as large as the circuit conductors supplying the pump.

Save these instructions.

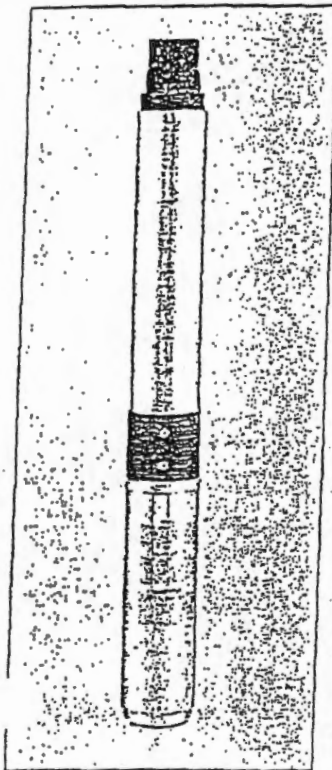
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CLEARSTREAM®
 WASTEWATER SYSTEMS, INC.

P20

Submersible Effluent Pump



GENERAL DESCRIPTION

The P20 multistage submersible effluent pump constructed from precision-engineered, corrosion-resistant materials, is an industry leader in high pressure effluent removal. The floating stack design resists abrasion wear and reduces motor bearing thrust loading. These pumps feature the patented Signa-Seal™ design, which provides dry running capability in the event of a system failure. This patented Signa-Seal design has no industry equal.

APPLICATIONS

Designed for pumping filtered effluent.

SPECIFICATIONS

Shell: stainless steel

Discharge: fiberglass-reinforced thermoplastic

Discharge bearing: Nylatron®

Intermediate bearing: (on larger units) polycarbonate, nitrile rubber, and stainless steel

Impellers: Delrin®

Diffusers: Lexan®

Suction caps: Lexan® with stainless steel insert

Thrust pads: proprietary spec.

Shaft and coupling: stainless steel

Intake: fiberglass-reinforced thermoplastic

Intake screen: polypropylene

Cable guard: stainless steel

Agency Listings: UL 778

FEATURES

■ Patented Staging System – Dur proven Signa-Seal™ staging system incorporates a harder-than-sand ceramic wear surface that when incorporated with our floating stack design, greatly reduces problems with abrasives, sand lock-up and running dry.

■ Discharge – Fiberglass-reinforced thermoplastic material for durability in aggressive water. Octagon-shaped to fit pipe wrench.

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

■ Intake – Fiberglass-reinforced thermoplastic material for durability in aggressive water.

■ Shaft – Positive drive from hexagonal heavy-duty 300 grade stainless steel.

■ Coupling – Stainless steel press fit to pump shaft. Couples to all standard NEMA motors.

■ Shell – Highest grade, heavy-walled corrosion-resistant stainless steel. Threaded for easy servicing.

■ Hardware – All screws, washers and nuts are corrosion-resistant 300 grade stainless steel.

■ Check Valve – Durable internal check valve.

■ Cable Guard – Corrosion-resistant stainless steel guard protects motor leads. Tapered ends prevent pump from catching on well.

■ Corrosion-proof intake screen

■ Franklin Electric Motor – 100% corrosion-resistant stainless steel construction. Constant lubrication through water-filled design. Hermetically-sealed stator assures moisture-free windings. Built-in surge arrester provided on 1/2 HP through 1-1/2 HP, single-phase pumps for added protection. All thrust absorbed by durable Kingsbury-type thrust bearing. Replaceable motor lead assembly. NEMA standard motors, 2- and 3-wire.

ORDERING INFORMATION

Model No.	HP	Max. Load Amps	Volts	Phase/Cycles	Cord Length
P20	1/2	12	115	1/60	100'

PERFORMANCE

Discharge Pressure PSI	57	52	44	33	19
Gallons Per Minute	10	15	20	25	30



This product is Listed to UL Standards for Safety by Underwriters Laboratories Inc. (UL).

© Nylatron is a registered trademark of Polymer Corp.

© Lexan is a registered trademark of General Electric Co.

© Delrin is a registered trademark of E.I. DuPont de Nemours and Co.

Specifications are subject to change without notice.



— NOTE —

We have a wide range of sump/sewage/effluent pumps to offer. If you need a catalog showing other available units, please contact your Clearstream representative.

PROPLUS® GEAR DRIVEN SPRINKLER SETTING INSTRUCTIONS

NOTE: All of our sprinklers are preset for you with a 90° arc setting, and include a pre-installed #2.5 nozzle.

CHANGING A NOZZLE

1 USE YOUR K-KEY

After you remove the nozzle retention screw with your K-Key, insert the K-Key into the keyhole on the top of the turret. Then, turn the K-Key 1/4 turn so it doesn't slip out of the hole when you pull it up.

2 PULL UP THE RISER

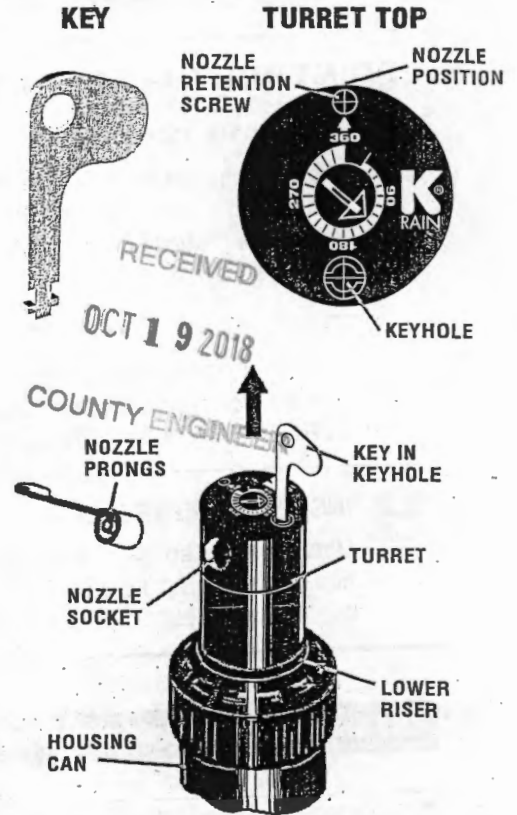
Firmly pull the entire spring loaded riser up with the K-Key to access the nozzle socket. Hold the riser up with one hand.

3 REMOVE THE NOZZLE

With the nozzle retention screw removed, insert the K-Key into the slot directly under the nozzle "prongs" at the top of the nozzle. Now, pivot your K-Key 1/4 of a turn to "hook" the nozzle and pull the nozzle out.

4 INSTALL A NOZZLE

Press the desired nozzle into the nozzle socket. Make sure the nozzle number is visible and the nozzle "prongs" are up. Then, re-install the nozzle retention screw. **NOTE:** The nozzle retention screw is also a break-up screw and adjusts the distance of the spray.



PROPLUS IS ADJUSTABLE AND CONTINUOUS 360° ALL IN ONE MODEL

SETTING THE ARC ADJUSTMENT (PRESET AT 90°)

5 FIND THE LEFT START POSITION

First, rotate the turret with your fingers around to the RIGHT (clockwise) until it stops. Then, rotate the turret around to the LEFT until it stops again. This is the LEFT START position. The sprinkler will begin spraying from this point and will rotate clockwise.



6 TO CHANGE THE ARC SETTING BEFORE INSTALLATION

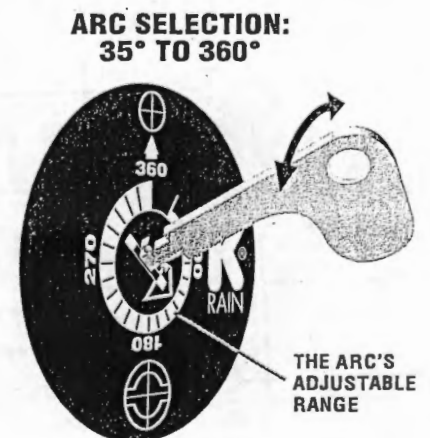
Follow step 5 above to find the LEFT START as a reference point. To INCREASE THE ARC, insert the K-Key into the arc indication ARROW SLOT at the center of the turret. While holding the turret with your fingers, turn the K-Key CLOCKWISE until the arc INDICATION ARROW POINTS TO the RIGHT STOPPING POINT.

WHEN SET AT 360°, PROPLUS WILL ROTATE CONTINUOUSLY IN A CLOCKWISE DIRECTION.

To DECREASE THE ARC, hold the turret steady and turn the K-Key COUNTERCLOCKWISE to the desired setting.

WITH THE SPRINKLER RUNNING

Follow step 2, hand-spinning the turret gently in the direction it is spraying. Once you have found the LEFT START as a reference point, following the directions to INCREASE THE ARC or DECREASE THE ARC as shown above.



§285.37. On-Site Sewage Facilities and Water Treatment Equipment and Appliances

(a) Water treatment equipment is defined as an appliance, which includes water softeners and reverse osmosis systems, used to:

- (1) alter the mineral content of water;
- (2) alter the microbiological content of water;
- (3) alter other substances found in water; or
- (4) purify water.

(b) Back flush or discharge from water treatment equipment installed on or after September 1, 2003, may be discharged into an on-site sewage facility (OSSF) as provided in this subsection.

(1) Water softener.

(A) The water softener must regenerate using a demand-initiated regeneration (DIR) control device. The water softener must be clearly labeled as being equipped with a DIR control device as follows:

- (i) the label shall be affixed to the outside of the water softener so the label can be easily inspected and read; and
- (ii) the label shall provide the name of the company that installed the water softener.

(B) A water softener may be connected to an OSSF with a non-standard or proprietary treatment system only as described in §285.32(c) and (d) of this title (relating to Criteria for Sewage Treatment Systems) if the water softener drain line:

- (i) bypasses the treatment system; and
- (ii) connects directly to a pump tank if the OSSF has a pump tank or directly to the pipe between the treatment system and the disposal system if no pump tank exists.

(C) An owner may continue to use a water softener that discharges to an OSSF and does not meet the requirements of subparagraph (A) of this paragraph if the water softener was installed before September 1, 2003. An owner must replace any water softener installed before September 1, 2003, with a water softener that meets the requirements of subparagraphs (A) and (B) of this paragraph at such time as:

- (i) an owner replaces the existing water softener; or
- (ii) an owner or installer installs, alters, constructs, or repairs an OSSF for the structure or property served by the existing water softener.

(2) Reverse osmosis system.

(A) Point-of-use (under sink unit) reverse osmosis systems. The back flush from a point-of-use reverse osmosis system may be discharged into an OSSF without including calculations of the back flush water volume in the OSSF planning materials.

(B) Point-of-entry (whole house unit) reverse osmosis systems. The back flush from a point-of-entry reverse osmosis system may be discharged into an OSSF if:

- (i) the owner can demonstrate that the point-of-entry reverse osmosis system does not cause hydraulic overloading of the OSSF; or
- (ii) the water volume from the point-of-entry reverse osmosis system is accounted for (added to the usage rate in §285.91(3) of this title (relating to Tables)) by providing calculations of the increase in wastewater volume with the OSSF planning materials.

(3) Water treatment equipment other than water softeners and reverse osmosis systems. If an owner uses water treatment equipment other than water softeners or reverse osmosis systems, the back flush from the water treatment equipment may be discharged into an OSSF if the water volume is added to the OSSF usage rate in §285.91(3) of this title. This water volume calculation must be provided with the OSSF planning materials.

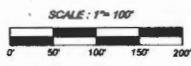
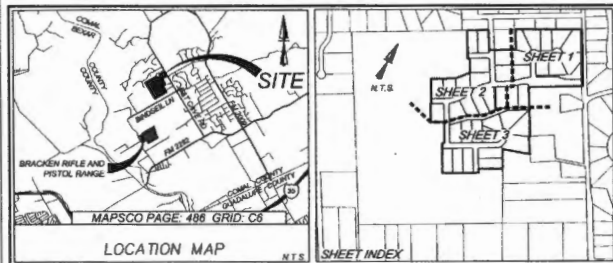
(c) Discharges from all water treatment equipment shall enter the OSSF system through an airgap or an airgap device as required in the Uniform Plumbing Code (2000).

Adopted April 7, 2004

Effective April 28, 2004

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OCT 19 2018

COUNTY ENGINEER



LEGEND

- P.L.R. = FOUND N' IRON ROD
- S.L.R. = MET' IRON ROD WITH BLUE CAP STAMPED 'NFW SURVEYING'
- R.O.W. = RIGHT-OF-WAY
- S.M.T. = SEWER
- C.P.R. = OFFICIAL PUBLIC RECORDS
- G.E.T.V.T.E. = GAS, ELECTRIC, TELEPHONE, CABLE T.V., BARRIERS
- B.S.L. = BUILDING SETBACK LINE
- - - - - = EXISTING CONFOURS

- NOTES:
1. 12" DIAMETER PEBBLE WITH A BLUE PLASTIC CAP STAMPED 'NFW SURVEYING' SET AT ALL CORNERS UNLESS OTHERWISE.
 2. MEASUREMENTS ARE BASED ON THE STATE PLANE COORDINATE SYSTEM ESTABLISHED FOR THE TEXAS SOUTH CENTRAL ZONE, NORTH AMERICAN DATUM (NAD) OF 1983.
 3. NO STRUCTURE, FENCES, WALLS OR OTHER OBSTRUCTIONS THAT IMPEDD DRAINAGE SHALL BE PLACED WITHIN THE LIMITS OF THE DRAINAGE EASEMENTS SHOWN ON THIS PLAT. NO LANDSCAPING OR OTHER TYPE OF MODIFICATIONS WHICH ALTER THE CROSS-SECTIONS OF THE DRAINAGE EASEMENTS, AS APPROVED, SHALL BE ALLOWED WITHOUT THE APPROVAL OF THE DIRECTOR OF PUBLIC WORKS. THE CITY OF GARDEN RIDGE AND COMAL COUNTY SHALL HAVE THE RIGHT OF ACCESS AND EGRESS OVER GRANTOR'S ADJACENT PROPERTY TO REMOVE ANY IMPEDING OBSTRUCTIONS PLACED WITHIN THE LIMITS OF SAID DRAINAGE EASEMENTS AND TO MAKE ANY MODIFICATIONS OR IMPROVEMENTS WITHIN SAID DRAINAGE EASEMENTS. ALL SAID DRAINAGE EASEMENTS WITHIN SAID LOTS SHALL BE PRIVATELY MAINTAINED BY PROPERTY OWNERS.
 4. THE COORDINATES SHOWN HEREON ARE GRID WITH A COMBINED SCALE FACTOR OF 1.00002.
 5. REFERENCED PROPERTY IS IN ZONE A. AREAS DETERMINED TO BE OUTSIDE THE 100-YEAR FLOODPLAIN AS SCALED FROM FEMA FLOOD MAP COMMUNITY PANEL NO. 48020C0187, DATED SEPTEMBER 2, 2008.

6. SELLING A PORTION OF THIS ADDITION BY METES AND BOUNDS IS A VIOLATION OF CITY ORDINANCE AND STATE LAW AND IS SUBJECT TO FINES AND WITHDRAWING OF UTILITIES AND BUILDING PERMITS.
7. ALL PRIVATE OPEN SPACE, COMMON AREAS, GREENBELT DRAINAGE EASEMENTS, ETC. ARE THE RESPONSIBILITY OF THE DEVELOPER OR ITS SUCCESSOR AND NOT THE RESPONSIBILITY OF THE CITY OF GARDEN RIDGE. THESE AREAS ARE DESIGNATED AS LOT 13, BLOCK 1, LOT 4, BLOCK 4.
8. ALL STREETS WITHIN THE SUBDIVISION ARE PRIVATE AND ARE THE RESPONSIBILITY OF THE DEVELOPER OR ITS SUCCESSOR AND NOT THE RESPONSIBILITY OF THE CITY OF GARDEN RIDGE.
9. WATER SERVICE SHALL BE PROVIDED BY THE CITY OF GARDEN RIDGE.
10. SEWER SERVICE SHALL BE PROVIDED BY PRIVATE SEPTIC SYSTEMS.
11. ELECTRIC SERVICE SHALL BE PROVIDED BY C.P.S. AND GAS SERVICE SHALL BE PROVIDED BY CENTER POINT ENERGY.
12. TELEPHONE/CABLE SERVICE TO BE PROVIDED BY AT&T AND/OR THE WIRELESS CABLE.
13. ADEQUATELY SIZED DETENTION PONDS APPROVED BY THE CITY OF GARDEN RIDGE WILL BE PROVIDED BY THE DEVELOPER PRIOR TO ANY RESIDENTIAL BUILDING PERMITS BEING ISSUED. MAINTENANCE OF THE DRAINAGE EASEMENTS AND DETENTION PONDS WILL BE THE SOLE RESPONSIBILITY OF THE DEVELOPER UNLESS SUCH PROPERTY IS DESIGNATED TO THE FOREST OF GARDEN RIDGE BY PROPERTY OWNERS ASSOCIATION.
14. LOT 13, BLOCK 1 AND LOT 4, BLOCK 4 SHALL BE DESIGNATED AS ELECTRIC, GAS, TELEPHONE, CABLE TV AND DRAINAGE EASEMENTS.

STATE OF TEXAS
COUNTY OF COMAL
CITY OF GARDEN RIDGE

THE OWNER(S) OF THE LAND SHOWN ON THIS PLAT, AND WHOSE NAME IS SUBSCRIBED HERETO, AND IN PERSON OR THROUGH A duly AUTHORIZED AGENT, DEDICATED TO GARDEN RIDGE, TEXAS, FOR USE OF THE PUBLIC FOREVER ALL WATER RIGHTS OF WAY WITHIN THE STREET RIGHT OF WAY AND ALL DRAINAGE AND WATER UTILITY EASEMENTS FOR THE PURPOSE AND CONSIDERATION THEREIN EXPRESSED.

THIS THE 4th day of October 2013

OWNER: DAPHNE DEVELOPMENT, L.L.C.
1202 W. BITTERS, BLDG 1 SUITE 1200
SAN ANTONIO, TX 78216
PHONE: 210-493-2811
FAX: 210-493-7828

STATE OF TEXAS
COUNTY OF COMAL
CITY OF GARDEN RIDGE

BEFORE ME, THE UNDERSIGNED AUTHORITY ON THIS DAY PERSONALLY APPEARED James V. Hatched KNOWN TO ME TO BE THE PERSON WHOSE NAME IS SUBSCRIBED TO THE FOREGOING INSTRUMENT, AND ACKNOWLEDGED TO ME THAT HE EXECUTED THE SAME FOR THE PURPOSES AND CONSIDERATIONS THEREIN EXPRESSED AND IN THE CAPACITY THEREIN STATED.

GIVEN UNDER MY HAND AND SEAL OF OFFICE THIS 4th day of October 2013

James V. Hatched
NOTARY PUBLIC

STATE OF TEXAS
COUNTY OF COMAL
CITY OF GARDEN RIDGE

I HEREBY CERTIFY THAT PROPER ENGINEERING CONSIDERATION HAS BEEN GIVEN THIS PLAT TO THE MATTERS OF STREETS, LOTS AND DRAINAGE LAYOUT.

REGISTERED PROFESSIONAL ENGINEER
GEORGE HERON, P.E.
NFW ENGINEERS

BEFORE ME, THE UNDERSIGNED AUTHORITY ON THIS DAY PERSONALLY APPEARED George Heron KNOWN TO ME TO BE THE PERSON WHOSE NAME IS SUBSCRIBED TO THE FOREGOING INSTRUMENT, AND ACKNOWLEDGED TO ME THAT HE EXECUTED THE SAME FOR THE PURPOSES AND CONSIDERATIONS THEREIN EXPRESSED AND IN THE CAPACITY THEREIN STATED.

GIVEN UNDER MY HAND AND SEAL OF OFFICE THIS 3rd day of October 2013

George Heron
NOTARY PUBLIC

STATE OF TEXAS
COUNTY OF COMAL
CITY OF GARDEN RIDGE

I HEREBY CERTIFY THAT THIS PLAT IS TRUE AND CORRECT AND WAS PREPARED FROM AN ACTUAL SURVEY OF THE PROPERTY AND MADE UNDER MY SUPERVISION ON THE GROUND.

TERESA A. SEIDEL
REGISTERED PROFESSIONAL LAND SURVEYOR NO. 5672
NFW SURVEYING, L.L.C.
14803 HALEMOR RD., BLDG 40
SAN ANTONIO, TEXAS 78230
PHONE: 210-478-8444
FAX: 210-478-2441

STATE OF TEXAS
COUNTY OF COMAL
CITY OF GARDEN RIDGE

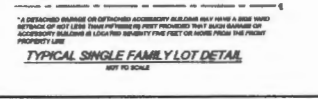
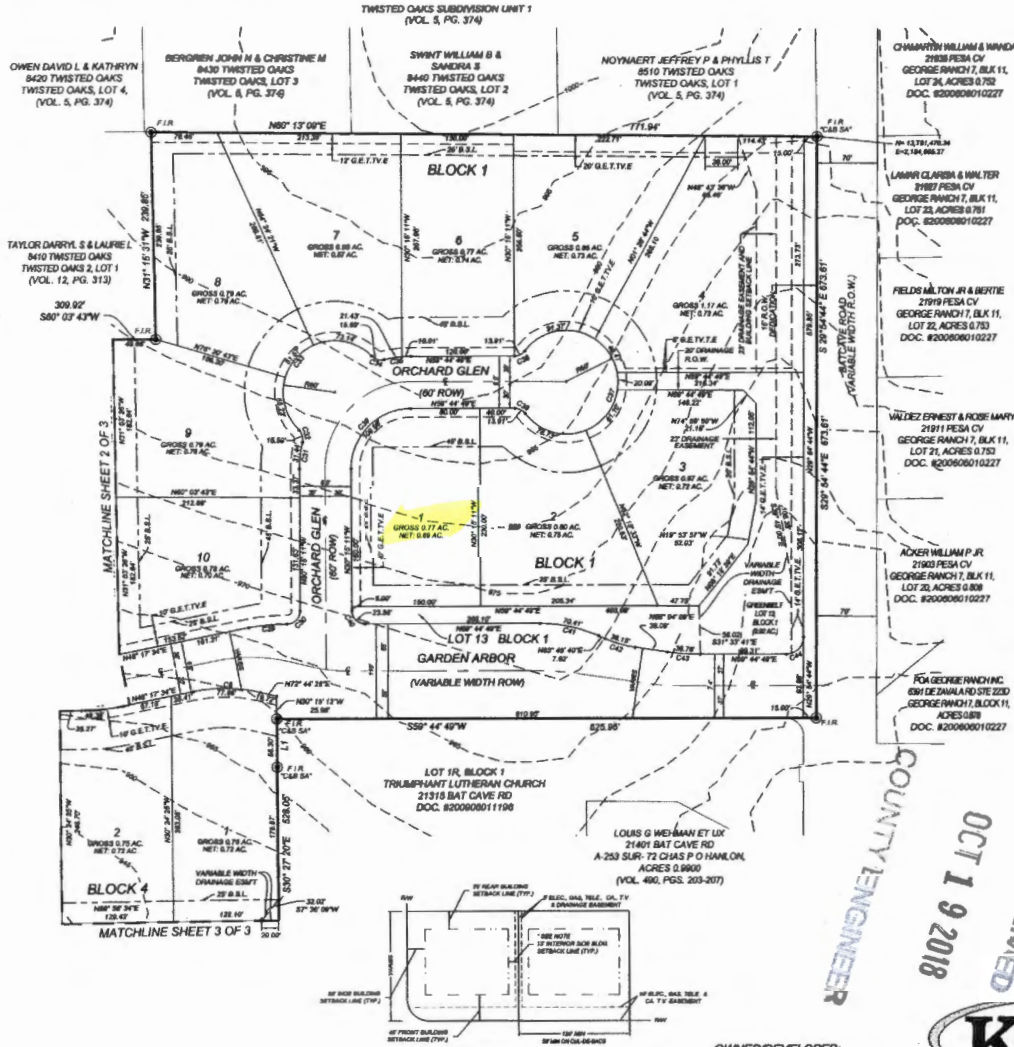
BEFORE ME, THE UNDERSIGNED AUTHORITY ON THIS DAY PERSONALLY APPEARED Teresa Seidel KNOWN TO ME TO BE THE PERSON WHOSE NAME IS SUBSCRIBED TO THE FOREGOING INSTRUMENT, AND ACKNOWLEDGED TO ME THAT HE EXECUTED THE SAME FOR THE PURPOSES AND CONSIDERATIONS THEREIN EXPRESSED AND IN THE CAPACITY THEREIN STATED.

GIVEN UNDER MY HAND AND SEAL OF OFFICE THIS 3rd day of October 2013

Teresa Seidel
NOTARY PUBLIC

THE CITY ENGINEER OF THE CITY OF GARDEN RIDGE, COMAL COUNTY, TEXAS, HEREBY CERTIFIES THAT THIS SUBDIVISION PLAT CONFORMS TO ALL THE REQUIREMENTS OF THE SUBDIVISION REGULATIONS OF THE CITY AS TO WHICH HIS APPROVAL IS REQUIRED.

John Adams 11/01/2013
CITY ENGINEER



OWNER/DEVELOPER:
DAPHNE DEVELOPMENT, L.L.C.
1202 W. BITTERS, BLDG 1 SUITE 1200
SAN ANTONIO, TX 78216
PHONE: 210-493-2811
FAX: 210-493-7828



STATE OF TEXAS
COUNTY OF COMAL
I, John Adams COUNTY CLERK OF SAID COUNTY, DO HEREBY CERTIFY THAT THE FOREGOING INSTRUMENT OF WRITING WITH THIS CERTIFICATE OF AUTHENTICATION WAS FILED FOR RECORD IN MY OFFICE ON THIS 4 day of November A.D. 2013 AT 11:00 AM IN THE RECORDS OF DEEDS AND PLATS OF SAID COUNTY, IN BOOK 600608010227 PAGE 1 IN TESTIMONY WHEREOF, WITNESS MY HAND AND OFFICIAL SEAL OF OFFICE IN THE CITY OF Garden Ridge A.D. 2013

BY: Ammy Kevill DEPUTY

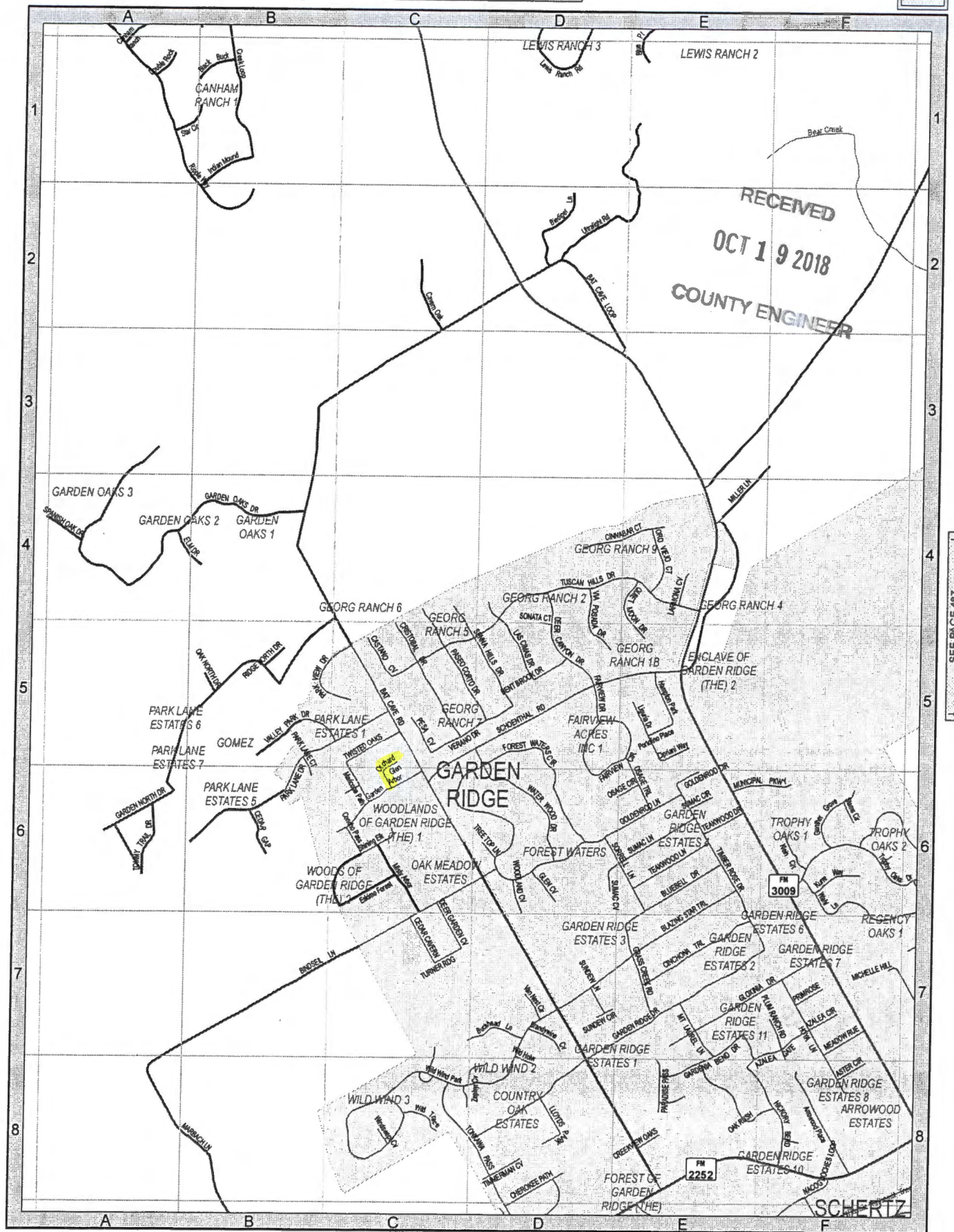
THIS PLAT OF THE WOODLANDS OF GARDEN RIDGE, UNIT 1 HAS BEEN SUBMITTED TO AND CONSIDERED BY THE CITY COUNCIL OF GARDEN RIDGE, TEXAS AND IS HEREBY APPROVED BY SUCH COUNCIL.

DATED THIS 15 day of August 2013

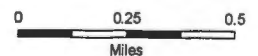
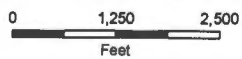
BY: John Adams
CITY SECRETARY

SUBDIVISION PLAT ESTABLISHING
THE WOODLANDS OF GARDEN RIDGE, UNIT 1

A 42.85 ACRE TRACT OF LAND, OUT OF A 101.14 ACRE TRACT OF LAND, SITUATED IN THE CITY OF GARDEN RIDGE OUT OF THE CHARLES P. HANLON SURVEY NO. 72, ABSTRACT NO. 182, COMAL COUNTY, TEXAS, AS CONVEYED TO DAPHNE DEVELOPMENT, L.L.C. RECORDED IN DOCUMENT NO. 2008080848 OF THE OFFICIAL PUBLIC RECORDS OF COMAL COUNTY, TEXAS.



SEE PAGE 487




From: Ritzen, Brenda
To: ["Info"](#)
Subject: Permit 108255
Date: Tuesday, October 23, 2018 12:44:00 PM

Re: Chesmar Homes CT, Ltd.
The Woodlands of Garden Ridge Unit 1 Lot 1
Application for Permit for Authorization to Construct an On-Site Sewage Facility

Grace,

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

-  1. Based on the dimensions of this property the two 360 spray heads must overlap. Indicate the correct separation distance between the spray heads and deduct the overlap area.
2. Revise as needed and resubmit.

Thank you,

Brenda Ritzen, OS0007722
Environmental Health Coordinator
Comal County Engineers Office
195 David Jonas Drive
New Braunfels, Texas 78132
830-608-2090
www.cceo.org

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

Planning Materials & Site Evaluation as Required by _____



By Jim W. Blake, Sr. #2289

RECEIVED

System Description Aerobic Treatment with Spray Irrigation

OCT 19 2018

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

COUNTY ENGINEER

Tank Size(s) (Gallons) 500/600/1,200

Absorption/Application Area (Sq Ft) 5,682

Gallons Per Day (As Per TCEQ Table III) 360

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

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

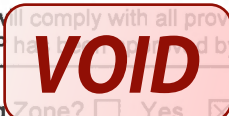
(If yes, the planning materials must be completed by a Registered Sanitarian (R.S.) or Professional Engineer (P.E.))

Is there an existing TCEQ approved WPAP for the property? Yes No

(If yes, the R.S. or P.E. shall certify that the OSSF design complies with all provisions of the existing WPAP.)

If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP? Yes No

(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct will not be issued for the proposed OSSF until the proposed WPAP has been approved by the appropriate regional office.)



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

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

(If yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP.)

If there is no existing CZP, does the proposed development activity require a TCEQ approved CZP? Yes No

(If yes, the R.S. or P.E. shall certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to Construct will not be issued for the proposed OSSF until the CZP has been approved by the appropriate regional office.)

Is this property within an incorporated city? Yes No

If yes, indicate the city: City Of Garden Ridge

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 _____

Date _____

10-16-18

Page 2 of 2

Jim Blake Sr.
Registered Sanitarian
P.O. Box 1609
Helotes, Texas 78023

VOID

J.B. Septic Systems, Inc.

Telephone (830) 931-0292
Fax (830) 931-0409

ON-SITE SEWAGE FACILITY DESIGN

RECEIVED

OCT 19 2018

FOR: Chesmar Homes CT, Ltd.
1846 N. Loop 1604 W., Suite 200
San Antonio, TX 78248

COUNTY ENGINEER

LOCATION: 8218 Orchard Glen
Lot 1, Block 1
The Woodlands of Garden Ridge, Unit 1
Comal County

DEVELOPMENT: Proposed five-bedroom residence with 3,774 sq. ft. living area.

ESTIMATE OF WATER CONSUMPTION: 360 gallons per day.

SEWAGE FACILITY DESCRIPTION: Clearstream Aerobic Treatment System with timer, chlorinator, sprinkler pump, and sprinkler heads covering a surface application area of 5,682 square feet. The timer is set for spray between midnight and 5:00 A.M.

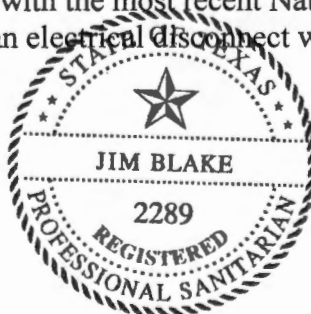
CALCULATION:

$$\text{Application Area Required} = \frac{\text{Flow}}{\text{Soil Appl. Rate}} = \frac{360 \text{ Gals./Day}}{.064 \text{ Gals./Sq.Ft./Day}} = 5,625 \text{ Sq. Ft.}$$

ACTUAL APPLICATION AREA TO BE COVERED:

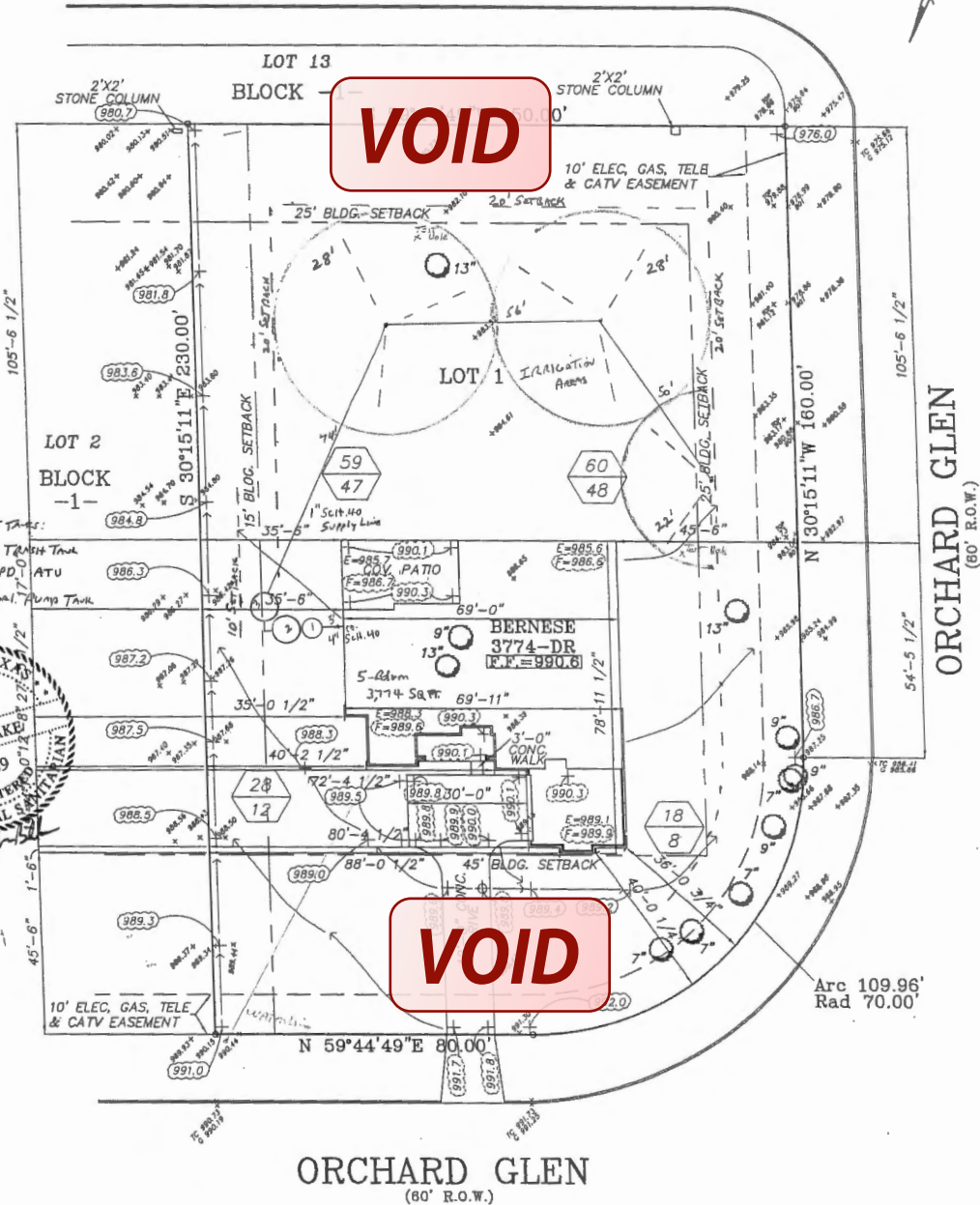
(Radius of Sprinkler Head) X (Radius of Sprinkler Head) X 3.14	=	Sq. Ft.
Two Full circle sprinkler heads, each one with a 28 foot radius	=	4,923 Sq. Ft.
One 1/2 circle sprinkler head with a 22 foot radius	=	759 Sq. Ft.
Total	=	5,682 Sq. Ft.

ELECTRICAL WIRING – All wiring must be in complete compliance with 30 Texas Administrative Code 285.34(c) and with the most recent National Electric Code. All electrical components should have an electrical disconnect within direct vision.



Jim Blake

GARDEN ARBOR (VARIABLE WIDTH R.O.W.)



- OFFSETS:
- 500 Gal. Tank
 - 600 GPD ATU
 - 1,200 Gal. Pump Tank

AVE. EXP. = 41"
GRADING TYPE = "C"
TREE LEGEND
○ : OAK

FLAT WORK SQ. FOOTAGE	
LOT AREA =	33,448
SLAB AREA =	4,367
DRIVEWAY AREA =	1,353
ENTRY WALK AREA =	11

09/27/18 ADDED NEW FND. AAM.
09/05/18 REVISED DRAINAGE. AP.
08/21/18 ADDED DRAINAGE. AP.
08/13/18 ADDED TOPO & TREES. AP.

COMALTY ENGINEER
OCT 19 2018
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PLOT PLAN
DRAWN BY: AP
SCALE: 1"=30'
DATE: 08/13/2018

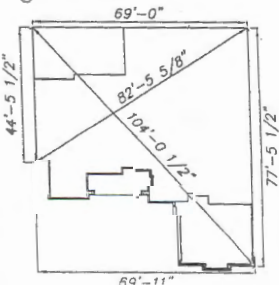
8418 ORCHARD GLEN
LOT 1, BLK. 1
THE WOODS OF GARDEN RIDGE, UNIT 1
COMAL COUNTY, TEXAS

LOT COVERAGE	
LOT AREA:	
ALLOWABLE COVERAGE:	N/A
SLAB:	
DRIVEWAY:	5.7% SLOPE
PATIO/DECK:	PER SPECS.
WALK:	
TOTAL:	

JOB #
20181371
SHEET
1 OF 1

SOUTH TEXAS ENGINEERING, INC.
CIVIL-STRUCTURAL-ENVIRONMENTAL
SURVEYING-LAND DEVELOPMENT
REGISTRATION NO. F-4335
4841 E. FREDAS DRIVE, SUITE 116
SAN ANTONIO, TEXAS 78220-1428
TEL (210) 795-2848
FAX (210) 795-2309

CHESMAR HOMES



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

SPECIAL WARRANTY DEED

Effective

Date: August 27, 2018

Grantor: Daphne Development, LLC, a Texas limited liability company

Grantor's Mailing Address (including county):

1202 W. Bitters, Bldg. 1, Suite 1200
San Antonio, Bexar County, Texas 78216

Grantee: Chesmar Homes CT, Ltd., a Texas limited partnership

Grantee's Mailing Address (including county):

1846 N. Loop 1604 W., Suite 200
San Antonio, Bexar County, Texas 78248

Consideration:

Ten Dollars and No/100 (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged and a Fifth Amended and Restated Note in the sum of \$50,000,000.00 dated October 27, 2016, executed by Grantee, and other entities, payable to the order of Texas Capital Bank, National Association. The promissory note is secured by a vendor's lien retained in favor of Grantor in this deed and a master deed of trust and security agreement recorded under instrument number 201006037904 and Supplemental Deed of Trust and Security Agreement, from Grantee to John Hudgens, Trustee

Property (including any improvements):

Lots 1 and 2, Block 1, The Woodlands of Garden Ridge, Unit 1, a subdivision in Comal County, Texas, according to the plat thereof recorded in Document No. 201306045949, together with Affidavit of Correction recorded in Document No. 201406001093, and amended plat thereof, recorded in Document No. 201406036021, Map and Plat Records of Comal

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OCT 19 2018
COUNTY ENGINEER

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OCT 19 2018
COUNTY ENGINEER

County, Texas, together with all improvements thereon and all rights and appurtenances pertaining thereto, including, without limitation, any and all right, title and interest of Grantor in and to all roads, alleys, easements, streets, rights-of-way, and water courses adjacent to, abutting, or serving the Lots, strips and gores, rights of ingress and egress to the Lots, and all permits, approvals, privileges and entitlements appurtenant to the Lots.

Exceptions to Conveyance and Warranty:

1. Standby fees, taxes and assessments by any taxing authority for the year 2018 and subsequent years.
2. The matters set forth in Exhibit "A" attached hereto and incorporated herein to the extent same currently exist and affect the Property or any portion thereof.

Grantor, for the Consideration and subject to 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 wise belonging, to have and hold it to Grantee, Grantee's heirs, executors, administrators, successors, or assigns forever. Grantor binds Grantor and Grantor's heirs, executors, administrators, and successors to warrant and forever defend all and singular the Property to Grantee and Grantee's heirs, executors, administrators, successors, and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, by, through or under Grantor but not otherwise, except as to the Exceptions to Conveyance and Warranty. Grantor and Grantee acknowledge that taxes for the current year have been prorated as of the date hereof, the payment of which Grantee assumes.

By acceptance of this deed, Grantee acknowledges and agrees that the only property conveyed hereby is the real property specifically described above, and that no easement or any other right, title or interest in and to any property other than the property described above is either expressly or implicitly conveyed or created by this deed. Without limitation of the foregoing, Grantee acknowledges and agrees that Grantee does not hereby acquire any express or implied easement or any other right, title or interest in and to any recreational property or facilities either owned by Grantor or located within the project commonly known as The Woodlands of Garden Ridge, and that there is no express or implied commitment that any such property or facility now or in the future located within The Woodlands of Garden Ridge shall continue in operation or existence.

It is expressly agreed and stipulated that a vendor's lien and superior title are retained and reserved against the Property until the above described note and all interest thereon are fully paid; the vendor's lien and superior title retained in this deed are transferred to Texas Capital Bank, National Association, without recourse on Grantor.

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OCT 19 2018
COUNTY ENGINEER

When this Deed is executed by more than one person, or when the Grantee is more than one person, the instrument shall read as though pertinent verbs, nouns and pronouns were exchanged correspondingly, and when executed by or to a legal entity other than a natural person, the words "heirs, executors and administrators" or "heirs and assigns" shall be construed to mean "successors and assigns." Reference to any gender shall include either gender and in the case of a legal entity other than a natural person, shall include the neuter gender, all as the case may be.

DAPHNE DEVELOPMENT, LLC, a Texas limited liability company

By: *Jaime L. Johnson*
Name: Jaime L. Johnson
Title: Vice President

STATE OF TEXAS §

COUNTY OF BEXAR §

This instrument was acknowledged before me on the 27 day of August, 2018, by **JAIME L. JOHNSON**, as Vice President of DAPHNE DEVELOPMENT, LLC, a Texas limited liability company, on behalf of said limited liability company.

Becky Thomas
Notary Public, State Of Texas



Return To:

Mr. Bart Swider
Chesmar Homes CT, Ltd.
1846 N. Loop 1604 W., Suite 200
San Antonio TX 78248

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EXHIBIT "A"
TO
SPECIAL WARRANTY DEED

1. Plat recorded in Document No. 201306045949, together with Affidavit of Correction recorded in Document No. 201406001093, and amended plat thereof, recorded in Document No. 201406036021, Map and Plat Records of Comal County, Texas. (All Lots)
2. Declaration of Covenants, Conditions and Restrictions for The Woodlands of Garden Ridge Subdivision, recorded in Document No. 201306046592, Official Public Records of Comal County, Texas. (All Lots)
3. Certificate of Secretary, recorded in Document No. 201306050075, Official Public Records of Comal County, Texas. (All Lots)
4. Woodlands of Garden Ridge Homeowners Association, Inc.'s Document Retention, Access, Production and Copying Policy, recorded in Document No. 201406013476, Official Public Records of Comal County, Texas. (All Lots)
5. Woodlands of Garden Ridge Homeowners Association, Inc.'s Collection Policy and Payment Plan Guidelines, recorded in Document No. 201406013477, Official Public Records of Comal County, Texas. (All Lots)
6. Management Certificate recorded in Document No. 201506010386, Official Public Records of Comal County, Texas. (All Lots)
7. 45 foot building line along the Northerly property line as shown on Plat recorded in Document No. 201306045949, together with Affidavit of Correction recorded in Document No. 201406001093, and amended plat thereof, recorded in Document No. 201406036021, Map and Plat Records of Comal County, Texas. (All Lots)
8. 25 foot building line along the Southerly property line as shown on Plat recorded in Document No. 201306045949, together with Affidavit of Correction recorded in Document No. 201406001093, and amended plat thereof, recorded in Document No. 201406036021, Map and Plat Records of Comal County, Texas. (All Lots)
9. 25 foot building line along the Westerly property line as shown on Plat recorded in Document No. 201306045949, together with Affidavit of Correction recorded in Document No. 201406001093, and amended plat thereof, recorded in Document

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OCT 19 2018

COUNTY ENGINEER

- No. 201406036021, Map and Plat Records of Comal County, Texas. (Lot 1, Block 1)
10. An easement 10 feet in width along the Westerly property line(s), as shown on Plat recorded in Document No. 201306045949, together with Affidavit of Correction recorded in Document No. 201406001093, and amended plat thereof, recorded in Document No. 201406036021, Map and Plat Records of Comal County, Texas. (Lot 1, Block 1)
 11. An easement 10 feet in width along the Northerly property line(s), as shown on Plat recorded in Document No. 201306045949, together with Affidavit of Correction recorded in Document No. 201406001093, and amended plat thereof, recorded in Document No. 201406036021, Map and Plat Records of Comal County, Texas. (All Lots)
 12. Electric Line Right-of-Way Agreement, granted to the City of San Antonio, recorded in Volume 210, Page 767, Deed Records of Comal County, Texas. (All Lots)
 13. Easement granted to Southwestern Bell Telephone Co., recorded in Document No. 199606009805, Official Records of Comal County, Texas. (All Lots)
 14. Easement agreement recorded in Document No. 201406041156, Official Records of Comal County, Texas. (All Lots)
 15. Easement agreement recorded in Document No. 201406041157, Official Records of Comal County, Texas. (All Lots)
 16. Easement agreement recorded in Document No. 201406041158, Official Records of Comal County, Texas. (All Lots)
 17. Covenants providing for assessments, charges and liens payable to The Woodlands of Garden Ridge Homeowners Association, Inc., as set forth in Document No. 201306046592, Official Public Records of Comal County, Texas. (All Lots)
 18. Lease for coal, lignite, oil, gas or other minerals, together with rights incident thereto, recorded at Volume 125, Page 108, Deed Records of Comal County, Texas. (All Lots)
 19. Lease for coal, lignite, oil, gas or other minerals, together with rights incident thereto, recorded at Volume 222, Page 887, Deed Records of Comal County, Texas. (All Lots)

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
08/28/2018 11:00:10 AM
JESSICA 5 Pages(s)
201806033773



Bobbie Koepp

**J.B. Septic Systems, Inc.
Two-Year Initial Service Policy**

System Owner:

Amanda Armstrong

Brand Name: Clearstream Wastewater System

System Name: Primary

Serial Number: 2310-06 NC 2TModel Number: 600 NC-2TPermit Number 108255Effective: 08/21/2019 thru 08/21/2021**Site Legal Description:**8418 Orchard Glen, Lot 1, Block 1, Unit 1The Woodlands of Garden Ridge, Comal County

J. B. Septic Maintenance, Inc. will inspect and service your Clearstream Aerobic Treatment Plant once every four months for a period of two years. The initial two-year service policy shall be effective for two years from the date the OSSF is first used. This initial two year Service Policy will be at no additional charge to the property owner as required by State guidelines.

Before this initial two-year service policy expires, JB Septic Maintenance, Inc will notify you. Upon renewal of the contract, a copy of the new contract shall be submitted to the permitting authority. If the property owner or maintenance company desire to discontinue the maintenance contract, the maintenance company shall notify, in writing, the permitting authority at least 30 days prior to the date service will cease.

Testing and Reporting

J.B. Septic Maintenance, Inc. shall test and report on this system as required by rule on the following:

1. An Inspection/Service Call every 4 months, which includes inspections, adjustment, and servicing of the mechanical and electrical component parts as necessary to ensure proper function.
2. An effluent quality inspection every 4 months, consisting of a visual check for color, turbidity, scum overflow, and an examination for odors.
3. A sample shall be pulled from the aeration tank every 4 months to determine if there is an excess of solids in the treatment plant. If the test results determine a need for solids removal, the user will be notified and the system will be pumped upon owner authorization.
4. If any improper operation is observed which cannot be corrected at the time, the user shall be notified immediately in writing of the conditions and the estimated date of correction.
5. If required, a chlorine residual test will be taken at each visit. (BOD and TSS annually on commercial only). If a grab test is required, the Owner will be responsible for the cost of the grab test.

The owner is responsible for keeping chlorine (Bleach) in the chlorinator as well as the cost of the chlorine.

J.B. Septic Maintenance, Inc. has been certified by the manufacturer of your system, and will be responsible for fulfilling the requirements of this Maintenance Contract, as well as responding to any alarms and/or addressing any concerns by the owner of the system. Alarms and/or concerns will be addressed within 48 hours of the initial contact.

VIOLATIONS OF WARRANTY including shutting off the electric current to the system for more than 24 hours, disconnecting the alarm system, restricting ventilation to the aerator, overloading the system above its rated capacity, or introducing excessive amounts of harmful matter into the system, or any other form of unusual abuse.

This Policy Does Not Include;

1. Cost of Pumping Sludge From Unit If Necessary.
2. Cost of System Repair Due to Damage or Parts Failure Due to Neglect.
3. Cost of Replacement of "Normal Wear & Tear" Items During Routine Maintenance Visits.

The Maintenance Company and the Owner agree to abide by the service policy as stated above.

MAINTENANCE COMPANY:

J.B. Septic Maintenance, Inc.
P.O. Box 1609
Helotes, Texas 78023
(830) 931-0292
(210) 414-6289

MANUFACTURER:

Clearstream Wastewater Systems, Inc.
P.O. Box 7568
Beaumont, Texas 77726-7568
(409) 755-1500

Installation Company:


J.B. Septic Systems, Inc.
P.O. Box 1609
Helotes, Texas 78023
(830) 931-0292

Permitting Authority:

Comal County Office of Environmental Health
195 David Jonas Drive
New Braunfels, Texas 78132-3760
(830) 608-2094



Jim Blake, J.B. Septic Systems, Inc.



System Owner

Service Company Operator License Number: MP0000892

Aerobic Septic System Inspection Report

Submitted by:

J. B. Septic Maintenance, Inc.

Contact: Jim Blake

Installation Date: 8/21/2019

Scheduled Report

Permit Number: 108255

This testing and reporting record shall be completed, signed and dated after each inspection. One copy shall be retained by the maintenance company. The second copy is to be sent to the local permitting authority and the third copy is to be sent to the system owner along with an invoice for services by the maintenance company.

1. Required frequency of visits is every months. Date of inspection visit: 1/17/2020

2. System inspected:

Owner: Amanda Armstrong

System Name: Primary

Property Address: 8418 Orchard Glen

Serial Num:

City, State., Zip Code: Garden Ridge, TX 78266

Brand Name: Clearstream

Inspected by: Chris Ethridge

Model Num:



(Signature)

Inspected Item	Operational	Inoperative	Not Applicable
Aerators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irrigation Pumps	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recirculation Pumps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Disinfection Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorine Supply	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Circuits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distribution System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprayfield Vegetation/Seedir	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Item (Specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Repairs to system (list all components replaced):

4. Tests required and results:

<u>Test</u>	<u>Required</u> <small>Check if YES</small>	<u>Results</u> <small>mg/l, mpn/100 ml, or trace</small>	<u>Test Method</u>
BOD (Grab)	<input type="checkbox"/>		
TSS (Grab)	<input type="checkbox"/>		
Cl ₂ (Grab)	<input checked="" type="checkbox"/>	0.2mg/L	DPD
Fecal Coliform	<input type="checkbox"/>		

5. Comments:

PT= 0 "
 ATU= 0 %
 TT= 1 " Lids secure at departure.

Aerobic Septic System Inspection Report

Submitted by:

J. B. Septic Maintenance, Inc.

Contact: Jim Blake

Installation Date: 8/21/2019

Scheduled Report

Permit Number: 108255

This testing and reporting record shall be completed, signed and dated after each inspection. One copy shall be retained by the maintenance company. The second copy is to be sent to the local permitting authority and the third copy is to be sent to the system owner along with an invoice for services by the maintenance company.

1. Required frequency of visits is every months.

Date of inspection visit: 3/23/2020

2. System inspected:

Owner: Amanda Armstrong

System Name: Primary

Property Address: 8418 Orchard Glen

Serial Num:

City, State., Zip Code: Garden Ridge, TX 78266

Brand Name: Clearstream

Inspected by: Chris Ethridge

Model Num:

(Signature)

Inspected Item	Operational	Inoperative	Not Applicable
Aerators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irrigation Pumps	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recirculation Pumps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Disinfection Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorine Supply	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Circuits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distribution System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprayfield Vegetation/Seedir	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Item (Specify)		<input type="checkbox"/>	<input type="checkbox"/>

3. Repairs to system (list all components replaced):

4. Tests required and results:

<u>Test</u>	<u>Required</u> <small>Check if YES</small>	<u>Results</u> <small>mg/l, mpn/100 ml, or trace</small>	<u>Test Method</u>
BOD (Grab)	<input type="checkbox"/>		
TSS (Grab)	<input type="checkbox"/>		
Cl ₂ (Grab)	<input checked="" type="checkbox"/>	0.2mg/L	DPD
Fecal Coliform	<input type="checkbox"/>		

5. Comments:

PT - 0"

ATU =0%

TT - 1" Lids secured at Departure

Aerobic Septic System Inspection Report

Submitted by:

J. B. Septic Maintenance, Inc.

Contact: Jim Blake

Installation Date: 8/21/2019

Scheduled Report

Permit Number: 108255

This testing and reporting record shall be completed, signed and dated after each inspection. One copy shall be retained by the maintenance company. The second copy is to be sent to the local permitting authority and the third copy is to be sent to the system owner along with an invoice for services by the maintenance company.

1. Required frequency of visits is every months. Date of inspection visit: 1/20/2021

2. System inspected:

Owner: Amanda Armstrong

System Name: Primary

Property Address: 8418 Orchard Glen

Serial Num:

City, State., Zip Code: Garden Ridge, TX 78266

Brand Name: Clearstream

Inspected by: Pete Prado

Model Num:


(Signature)

Inspected Item	Operational	Inoperative	Not Applicable
Aerators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irrigation Pumps	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recirculation Pumps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Disinfection Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorine Supply	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Circuits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distribution System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprayfield Vegetation/Seedir	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Item (Specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Repairs to system (list all components replaced):

4. Tests required and results:

<u>Test</u>	<u>Required</u> <small>Check if YES</small>	<u>Results</u> <small>mg/l, mpn/100 ml, or trace</small>	<u>Test Method</u>
BOD (Grab)	<input type="checkbox"/>		
TSS (Grab)	<input type="checkbox"/>		
Cl ₂ (Grab)	<input checked="" type="checkbox"/>	0.2mg/L	DPD
Fecal Coliform	<input type="checkbox"/>		

5. Comments:

PT= 2 "
ATU= 20 %
TT=1" Lids secure at departure

J.B. SEPTIC MAINTENANCE, INC.



SERVICE CONTRACT AGREEMENT

In consideration of the pre-payment of the annual fee of \$275.00 this licensed maintenance provider will provide the following services for your On-Site Sewage Facility.

- Routine service visits once every 4 months during the service period of one year from 08/21/2021 to 08/21/2022 on the Aerobic system indicated below.

Owner:	<u>Amanda Armstrong</u>	Phone No:	<u>(210) 601-0918</u>
System:	<u>Clearstream 600 NC 2T</u>	Permit:	<u>108255</u>
Address:	<u>8418 Orchard Glen</u>	Sub Division:	<u>The Woodlands of Garden Ridge</u>
City/County:	<u>GardenRidge/Comal</u>		

Service calls will include:

1. An effluent quality inspection consisting of a visual check for color and examination for odor.
2. Adjustment of any mechanical and electrical components that are out of order (Replacement of materials or parts is not covered).
3. Sampling of the settled solids in the aeration chamber.
4. Check chlorine residual when applicable.
5. Diffuser stones and air filters "normal wear and tear" items will be replaced as needed at an additional cost.
6. To avoid an additional trip charge, if your system needs a replacement part that is less than \$100.00, we will replace the part without authorization.

If any improper operation is observed which cannot be corrected at the time of the inspection, you shall be notified immediately in writing of the conditions and the estimated date and cost, if applicable, for correction.

At the conclusion of the service policy, J. B. Septic Maintenance, Inc. will make available, for purchase on an annual basis, a continuing service policy to cover labor for normal inspection and maintenance.

Owner / user operation instructions must be strictly followed. Also, it is the responsibility of the system owner to maintain chlorine in the system. The chlorine must be the appropriate type which is approved for waste water treatment.

J.B. Septic Maintenance, Inc. will be responsible for fulfilling the requirements of this Maintenance Contract, as well as responding to any alarms and/or addressing any concerns by the owner of the system. Alarms and/or concerns will be addressed within 48 hours of the initial contact.

Important: this service policy agreement does not cover the cost of service calls, labor or materials which are required or which are due to misuse or abuse of the system; failure to maintain electrical power to the system; disposal of non-biodegradable materials such as chemicals, solvents, grease, oil, paint, etc.; pumping of sludge build-up from the system; or any usage contrary to the requirements as stated in the "Operation Manual." Additional service, including replacement of components, laboratory test work, and pumping of tanks will be done upon customer authorization and at an additional charge.

OWNER

A. Armstrong
Signature

Date: 12 July 2021

SERVICE DEALER

[Signature]
J.B. Septic Maintenance, Inc.

Aerobic Septic System Inspection Report

Submitted by:

J. B. Septic Maintenance, Inc.

Contact: Jim Blake

Installation Date: 8/21/2019

Scheduled Report

Permit Number: 108255

This testing and reporting record shall be completed, signed and dated after each inspection. One copy shall be retained by the maintenance company. The second copy is to be sent to the local permitting authority and the third copy is to be sent to the system owner along with an invoice for services by the maintenance company.

1. Required frequency of visits is every months. Date of inspection visit: 10/19/2021

2. System inspected:

Owner: Amanda Armstrong

System Name: Primary

Property Address: 8418 Orchard Glen

Serial Num:

City, State., Zip Code: Garden Ridge, TX 78266

Brand Name: Clearstream

Inspected by: Marco Rodriguez

Model Num:

(Signature)

Inspected Item	Operational	Inoperative	Not Applicable
Aerators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irrigation Pumps	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recirculation Pumps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Disinfection Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorine Supply	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Circuits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distribution System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprayfield Vegetation/Seedir	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Item (Specify)		<input type="checkbox"/>	<input type="checkbox"/>

3. Repairs to system (list all components replaced):
Replaced air compressor & 1 sprinkler head.

4. Tests required and results:

<u>Test</u>	<u>Required</u> <small>Check if YES</small>	<u>Results</u> <small>mg/l, mpn/100 ml, or trace</small>	<u>Test Method</u>
BOD (Grab)	<input type="checkbox"/>		
TSS (Grab)	<input type="checkbox"/>		
Cl ₂ (Grab)	<input checked="" type="checkbox"/>	0.2mg/L	DPD
Fecal Coliform	<input type="checkbox"/>		

5. Comments:

PT= 0 "
ATU= 25 %
TT= " Lids secure at departure.

Aerobic Septic System Inspection Report

Submitted by:

J. B. Septic Maintenance, Inc.

Contact: Jim Blake

Installation Date: 8/21/2019

Scheduled Report

Permit Number: 108255

This testing and reporting record shall be completed, signed and dated after each inspection. One copy shall be retained by the maintenance company. The second copy is to be sent to the local permitting authority and the third copy is to be sent to the system owner along with an invoice for services by the maintenance company.

1. Required frequency of visits is ~~every~~ 4 months. Date of inspection visit: 1/5/2022

2. System inspected:

Owner: Amanda Armstrong

System Name: Primary

Property Address: 8418 Orchard Glen

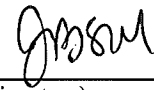
Serial Num:

City, State., Zip Code: Garden Ridge, TX 78266

Brand Name: Clearstream

Inspected by: Zoltan Juhasz

Model Num:



(Signature)

Inspected Item	Operational	Inoperative	Not Applicable
Aerators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irrigation Pumps	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recirculation Pumps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Disinfection Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorine Supply	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Circuits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distribution System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprayfield Vegetation/Seedir	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Item (Specify)		<input type="checkbox"/>	<input type="checkbox"/>

3. Repairs to system (list all components replaced):

4. Tests required and results:

<u>Test</u>	<u>Required</u> <small>Check if YES</small>	<u>Results</u> <small>mg/l, mpn/100 ml, or trace</small>	<u>Test Method</u>
BOD (Grab)	<input type="checkbox"/>		
TSS (Grab)	<input type="checkbox"/>		
Cl ₂ (Grab)	<input checked="" type="checkbox"/>	0.2 mg/L	DPD
Fecal Coliform	<input type="checkbox"/>		

5. Comments:

PT= 0 "

ATU= 20 %

TT= 4" Lids secure at departure.

Aerobic Septic System Inspection Report

Submitted by:

J. B. Septic Maintenance, Inc.

Contact: Jim Blake

Installation Date: 8/21/2019

Scheduled Report

Permit Number: 108255

This testing and reporting record shall be completed, signed and dated after each inspection. One copy shall be retained by the maintenance company. The second copy is to be sent to the local permitting authority and the third copy is to be sent to the system owner along with an invoice for services by the maintenance company.

1. Required frequency of visits is every 4 months. Date of inspection visit: 12/22/2023

2. System inspected:

Owner: Amanda Armstrong

System Name: Primary

Property Address: 8418 Orchard Glen

Serial Num:

City, State., Zip Code: Garden Ridge, TX 78266

Brand Name: Clearstream

Inspected by: Jose J Roman

Model Num:

(Signature)

Inspected Item	Operational	Inoperative	Not Applicable
Aerators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irrigation Pumps	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recirculation Pumps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Disinfection Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorine Supply	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Circuits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distribution System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprayfield Vegetation/Seedir	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Item (Specify)		<input type="checkbox"/>	<input type="checkbox"/>

3. Repairs to system (list all components replaced):

4. Tests required and results:

<u>Test</u>	<u>Required</u> <small>Check if YES</small>	<u>Results</u> <small>mg/l, mpn/100 ml, or trace</small>	<u>Test Method</u>
BOD (Grab)	<input type="checkbox"/>		
TSS (Grab)	<input type="checkbox"/>		
Cl ₂ (Grab)	<input type="checkbox"/>		
Fecal Coliform	<input type="checkbox"/>		

5. Comments:

PT= 0"

ATU= 20%

TT= 6" Lids Secured at Departure

Aerobic Septic System Inspection Report

Submitted by:

J. B. Septic Maintenance, Inc.

Contact: Jim Blake

Installation Date: 8/21/2019

Scheduled Report

Permit Number: 108255

This testing and reporting record shall be completed, signed and dated after each inspection. One copy shall be retained by the maintenance company. The second copy is to be sent to the local permitting authority and the third copy is to be sent to the system owner along with an invoice for services by the maintenance company.

1. Required frequency of visits is every 4 months. Date of inspection visit: 12/22/2023

2. System inspected:

Owner: Amanda Armstrong

System Name: Primary

Property Address: 8418 Orchard Glen

Serial Num:

City, State., Zip Code: Garden Ridge, TX 78266

Brand Name: Clearstream

Inspected by: Jose J Roman

Model Num:

(Signature)

Inspected Item	Operational	Inoperative	Not Applicable
Aerators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irrigation Pumps	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recirculation Pumps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Disinfection Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorine Supply	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Circuits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distribution System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprayfield Vegetation/Seedir	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Item (Specify)		<input type="checkbox"/>	<input type="checkbox"/>

3. Repairs to system (list all components replaced):

4. Tests required and results:

<u>Test</u>	<u>Required</u> <small>Check if YES</small>	<u>Results</u> <small>mg/l, mpn/100 ml, or trace</small>	<u>Test Method</u>
BOD (Grab)	<input type="checkbox"/>		
TSS (Grab)	<input type="checkbox"/>		
Cl ₂ (Grab)	<input type="checkbox"/>		
Fecal Coliform	<input type="checkbox"/>		

5. Comments:

PT= 0"

ATU= 20%

TT= 6" Lids Secured at Departure

2110

Aerobic Septic System Inspection Report JUL 16 2024

Submitted by:

J. B. Septic Maintenance, Inc.

SCANNED

Contact: Jim Blake

Installation Date: 8/21/2019

Scheduled Report

Permit Number: 108255

This testing and reporting record shall be completed, signed and dated after each inspection. One copy shall be retained by the maintenance company. The second copy is to be sent to the local permitting authority and the third copy is to be sent to the system owner along with an invoice for services by the maintenance company.

1. Required frequency of visits is ~~every~~ 4 months. Date of inspection visit: 6/26/2024

2. System inspected:

Owner: Amanda Armstrong

System Name: Primary

Property Address: 8418 Orchard Glen

Serial Num:

City, State., Zip Code: Garden Ridge, TX 78266

Brand Name: Clearstream

Inspected by: Jose J Roman

Model Num:

(Signature)

Inspected Item	Operational	Inoperative	Not Applicable
Aerators	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irrigation Pumps	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recirculation Pumps	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Disinfection Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorine Supply	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Circuits	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distribution System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprayfield Vegetation/Seedir	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Item (Specify)		<input type="checkbox"/>	<input type="checkbox"/>

3. Repairs to system (list all components replaced):

4. Tests required and results:

Test	Required Check if YES	Results mg/l, mpn/100 ml, or trace	Test Method
BOD (Grab)	<input type="checkbox"/>	_____	_____
TSS (Grab)	<input type="checkbox"/>	_____	_____
Cl ₂ (Grab)	<input type="checkbox"/>	_____	_____
Fecal Coliform	<input type="checkbox"/>	_____	_____

5. Comments:

PT= 0"

ATU= 0 %

TT= 0" Lids secure at departure.