

Comal County  
OFFICE OF COMAL COUNTY ENGINEER

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

Issued This Date: 03/06/2019 Permit Number: 108409

Location Description: 1403 COTTONWOOD RD  
FISCHER, TX 78623

Subdivision: Rancho del Lago  
Unit: 11  
Lot: 116  
Block:  
Acreage:

Type of System: Aerobic  
Surface Irrigation

Issued to: Eugene Moore, Jr., LLC

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**

  
ENVIRONMENTAL HEALTH INSPECTOR

  
ENVIRONMENTAL HEALTH COORDINATOR  
OS 0025599

11:45

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: David Barker OSSF Installer #: 050008287

1st Inspection Date: 2.26.19 2nd Inspection Date: 3/6/19 3rd Inspection Date: \_\_\_\_\_

Inspector Name: S. Helmke Inspector Name: S Helmke Inspector Name: \_\_\_\_\_

Permit#: 108409 Address: 1403 Cottonwood - Rancho Del Lago

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
1	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials	✓	285.31(a) 285.30(b)(1)(A)(iv) 285.30(b)(1)(A)(v) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(ii) 285.30(b)(1)(A)(i)		2.26.19		
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)				

2.26.19 - SH

3/6/19 - SH

tank set, level

Covered

operational.

ready for cover

Need revision for type of tank - revision received

**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)		226.19		
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used	✓	285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
10	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped	✓	285.38(d)				
11	SEPTIC TANK Secondary restraint system provided SEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions	✓	285.38(d) 285.38(e)				
12	SEPTIC TANK Tank Volume Installed	✓					
13	PUMP TANK Volume Installed	✓					
14	AEROBIC TREATMENT UNIT Size Installed	✓		600			
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	✓		Solar Air instead of Hoot			
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

**Comal County Environmental Health  
OSSF Inspection Sheet**

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

**Comal County Environmental Health  
OSSF Inspection Sheet**

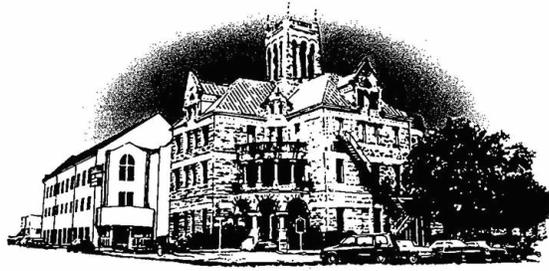
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	<p>EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling</p> <p>EFFLUENT DISPOSAL SYSTEM Topographic Slopes &lt; 2.0%</p> <p>EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less &amp; an additional 400 ft. for each additional bedroom )</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. &amp; Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) &amp; Pipe Holes ( 3/16 - 1/4" dia. Hole Size ) 5 ft. Apart</p>		<p>285.33(b)(3)(A)</p> <p>285.33(b)(3)(A)</p> <p>285.33(b)(3)(B)</p> <p>285.91(13)</p> <p>285.33(b)(3)(D)</p> <p>285.33(b)(3)(F)</p>				
33	<p>AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.</p>	✓	285.32(c)(1)		2.26.19		
34	<p>AEROBIC TREATMENT UNIT Inspection/Clean Out Port &amp; Risers Provided</p> <p>AEROBIC TREATMENT UNIT Secondary restraint system provided</p> <p>AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank</p> <p>AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions</p>						
35	<p>AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.</p>	✓			2.26.19		
36	<p>PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials &amp; construction</p> <p>PUMP TANK Sampling Port Provided in the Treated Effluent Line</p> <p>PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required</p> <p>PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump</p>						
37	<p>PUMP TANK Inspection/Clean Out Port &amp; Risers Provided</p> <p>PUMP TANK Secondary restraint system provided</p> <p>PUMP TANK Riser permanently fastened to lid or cast into tank</p> <p>PUMP TANK Riser cap protected against unauthorized intrusions</p>						
38	<p>PUMP TANK Secondary restraint system provided</p>						

Comal County Environmental Health  
OSSF Inspection Sheet

39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried	✓			2.20.19		
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**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	✓	285.33(d)(2)(G)(iii)(I)285.33(d)(2)(G)(iii)(II)285.33(d)(2)(G)(iii)(III)285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(I)		2-26-19		
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed	✓	285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)	Covered		3/6/19	
42	APPLICATION AREA Area Installed	✓		3 @ 3750			
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



# Comal County

OFFICE OF COMAL COUNTY ENGINEER

## **Permit of Authorization to Construct an On-Site Sewage Facility Permit Valid For One Year From Date Issued**

Permit Number: 108409  
Issued This Date: 12/05/2018  
This permit is hereby given to: Eugene Moore, Jr., LLC

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

1403 COTTONWOOD RD  
FISCHER, TX 78623

Subdivision: Rancho del Lago  
Unit: 11  
Lot: 116  
Block:  
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic  
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

items	Date Received
	Initials

Permit Number

Instructions:

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

OSSF Permit

Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate

Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer

Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist of a scaled design and all system specifications.

Required Permit Fee

Copy of Recorded Deed

Surface Application/Aerobic Treatment System

Recorded Certification of OSSF Requiring Maintenance/Affidavit to the Public

Signed Maintenance Contract with Effective Date as Issuance of License to Operate

RECEIVED  
 NOV 28 2018  
 COUNTY ENGINEER

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

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

\_\_\_\_\_  
Date

___ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

___ INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)

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

Date 10/08/18

Permit # 108409

Owner Name Eugene Moore, Jr., LLC  
Mailing Address 423 Neches Branch  
City, State, Zip San Antonio, Tx. 78258  
Phone # 210-822-8900  
Email emoorej@satx.rr.com

Agent Name John J. Haag, P.E.  
Agent Address 15831 Secret Trail  
City, State, Zip San Antonio, Tx. 78247  
Phone # 210-705-4268  
Email jhaag@satx.rr.com

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

Subdivision Name Rancho del Lago Unit 11 Lot 116 Block \_\_\_\_\_  
Acreage/Legal 0.501  
Street Name/Address 1403 Cottonwood Dr. City Fischer Zip 78623

**Type of Development:**

Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1650

Commercial or Institutional Facility

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

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

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

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

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

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

Miscellaneous \_\_\_\_\_

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

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

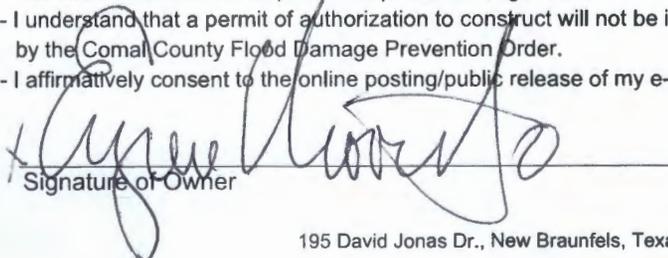
Yes  No (If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

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 of Owner

11/13/2018  
Date

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NOV 28 2018

COUNTY ENGINEER

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

Planning Materials & Site Evaluation as Required Completed By John J. Haag, P.E.

System Description Proprietary aerobic treatment with surface spray disposal

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

Tank Size(s) (Gallons) 500 gpd min. Absorption/Application Area (Sq Ft) 3750 min.

Gallons Per Day (As Per TCEQ Table III) 240

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

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

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

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

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

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

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

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

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

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

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

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

Is this property within an incorporated city?  Yes  No

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

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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.

*John J. Haag, P.E.*  
Signature of Designer

11/26/10  
Date

1/08



201806045427 11/27/2018 01:46:18 PM 1/1

THE COUNTY OF COMAL

STATE OF TEXAS

**CERTIFICATION OF OSSF REQUIRING MAINTENANCE**

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

I

The Texas Health and Safety Code, Chapter 366 authorizes the TCEQ to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 5.013, gives the TCEQ primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The TCEQ, 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 TCEQ 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 TCEQ of the suitability of this OSSF, nor does it constitute any guarantee by the TCEQ that the appropriate OSSF was installed.

II

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

Legal Description: Lot 116, Rancho del Lago, Phase XI

This property is owned by: Eugene Moore, Jr., LLC

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 system for a single family residence shall either obtain a maintenance contract within 30 days or maintain the system personally.

The owner will, upon any sale or transfer of the above-described property, request a transfer of the permit for the OSSF to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from Comal County.

WITNESS BY HAND(S) ON THIS 13 DAY OF November 2018

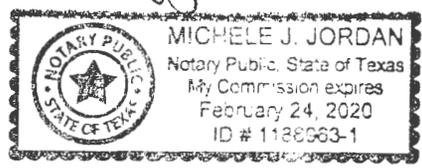
*Eugene Moore, Jr.*  
Eugene Moore, Jr., Owner

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SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 13 DAY OF November 2018

COUNTY ENGINEER

*Michele Jordan*  
Notary Public, State of Texas



Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
11/27/2018 01:46:18 PM  
LAURA 1 Page(s)  
201806045427  
*Bobbie Koepf*



# Rocky Ridge Septic



## TREATMENT SYSTEM INITIAL SERVICE POLICY

This Service Policy ("Agreement") entered into this        day of       , by and between Eugene Moore, Jr., LLC ("Home Owner") and Rocky Ridge Septic ("Service Provider"). Service Provider agrees to operate and maintain the Hoot Aerobic System located at Lot 116, Rancho del Lago, Phase XI (legal description only) Permit #        for the period of two (2) years beginning        and ending       , pursuant to the terms below:

This Agreement will provide for all required inspections, testing and service of your HOOT Aerobic Treatment System. Service Provider and Home Owner agree to the following:

1. Service Provider shall perform 3 inspections a year/service calls (at least one every 4 months), for a total of 1 over the two-year period including inspection, adjustment and servicing of the mechanical, electrical and other applicable component parts to ensure proper function. This includes inspecting the control panel, air pumps, air filters, diffuser operation, and replacing or repairing any component not found to be functioning correctly.
2. Such inspections shall include an effluent quality inspection consisting of a visual check for color, turbidity, scum overflow and examination for odors. A test for chlorine residual and pH will be taken and reported as necessary.
3. If any improper operation is observed by Service Provider, which cannot be corrected at the time of the service visit, Home Owner will be notified immediately in writing of the conditions and estimated date of correction.
4. Home Owner agrees to maintain a chlorine residual of at least 0.1 mg/L in the pump tank for surface irrigation systems. This can be accomplished by using chlorine tablets designed for wastewater use, NOT SWIMMING POOL TABLETS. Upon inspection by Service Provider, if the system needs chlorine tablets the Service Provider will add them and charge the Home Owner.
5. In the event that the Home Owner fails in their responsibility to add the chlorine tablets, it shall be considered a breach of this Agreement and the Home Owner's duties as agreed to in the Hoot Homeowners Manual. Additionally, such failure may be considered an unlawful act in some jurisdictions, and Service Provider will contact the appropriate governmental authorities to report such violation.  
Initials of Service Provider        Initials of Homeowner
6. Home Owner agrees to maintain a factory authorized service provider for the lifetime of the system, as required by state law applicable to aerobic systems. Service Provider agrees to make available, for purchase on an annual basis, a continuing service policy to cover labor for normal inspection, maintenance and repair.
7. Service Provider agrees that within 48 hours of a request for service, Home Owner's system will be visited by the Service Provider listed below or their authorized agent. If there are any items which need correction that can not be immediately remedied, the service provider will inform the Home Owner, in writing, of the conditions and the estimated repair date.
8. Any additional visits, inspections or sample collections required by specific Municipalities, Water/River Authorities, County Agencies the State or any other regulatory agency in your jurisdiction will be covered by this Agreement.

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COUNTY ENGINEER

**Disclaimer:** The HOOT Homeowners Manual must be strictly followed or all warranties are subject to invalidation. Pumping of sludge build-up, for reasons other than due to warranted mechanical failure, are not covered by this Agreement and will result in additional charges. By signing this Agreement, both Service Provider and Homeowner agree to the terms contain herein. Further, By signing this Agreement, both the Service Provider and the Home Owner swear that the Home Owner has received a copy of the Homeowners Manual and the Service Provider has made a reasonable effort to explain all pertinent information to the Homeowner

**Home Owner agrees that HOOT Aerobic Systems, Inc. is not a party to this Agreement, and shall bear no responsibility for service or any terms, obligations, or duties contained herein.**

**HOME OWNER**

Eugene Moore, Jr., LLC  
 Name         
 423 Neches Branch  
 Address         
 San Antonio, Tx. 78258  
 City         
 210-822-8900  
 Phone         
 Signature of Home Owner       

**SERVICE PROVIDER**

Dave Barker  
 Name of Service Company Representative         
 2449 Rocky Ridge Loop  
 Address         
 Canyon Lake, TX 78133  
 City         
 830-935-2750  
 Phone         
 Signature of Service Provider and License #       

THIS BOX MUST BE COMPLETED BY THE SERVICE PROVIDER

HOOT Model #        Blower/Panel Serial #        HOOT Mold #       

White Copy - Home Owner    Yellow Copy - Installer    Pink Copy HOOT    Goldenrod Copy - Regulatory Agency    Rev 5/05

\* The effective date of this initial maintenance contract shall be the date the license to operate is issued.



# HAAG ENGINEERING CONSULTANTS

15831 Secret Trails • San Antonio, Texas 78247 • Tel: (210) 705-4268 • Fax: (210) 855-8383 • Email: [jhaag@satx.rr.com](mailto:jhaag@satx.rr.com)

November 8, 2018

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

RE: Septic Setback Variance Request  
Lot 116, Rancho del Lago, Phase XI

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NOV 28 2018

COUNTY ENGINEER

Dear Sandra:

Due to the lack of available spray application area, it is necessary to have the setback from the property line to the edge of spray area at ten feet as required by TCEQ Chapter 385 rules Table X. I hereby request a variance to the twenty foot setback to the property line(s) as required by Comal County Order and an equivalent protection will be maintained by adding a battery backup to the timer clock to ensure sprayers only spray during the pre-dawn hours. In my professional opinion, this variance will not pose a threat to the environment or public health.

Sincerely,



11/08/18

Haag Engineering Consultants, Inc.  
Firm No.: F-5789

## ON-SITE SEWAGE FACILITY (OSSF) SITE EVALUATION FORM

<b>1. OWNER INFORMATION</b>	
Property Owner's Full Legal Name: Eugene Moore, Jr., LLC	

<b>2. PROPERTY INFORMATION</b>				
City: Fischer			Zip Code: 78623	
Legal Description:				
Lot: 116	Block:	Subdivision: Rancho del Lago	Sec:	Unit: 11
If not located in subdivision: Survey:				
Abstract:			Recorded (Vol/Pg):	

<b>3. SITE EVALUATION INFORMATION:</b>	
Name of Site Evaluator: John J. Haag	PE #: 90158
Date Performed: 09/27/18	Proposed Excavation Depth: Surface

**4. REQUIREMENTS:**

- At least two soil evaluations must be performed on the site at opposite ends of the proposed disposal area. Locations of soil evaluations must be shown on the application site drawing or designer's site drawing.
- For subsurface disposal, soil evaluations must be performed to a depth of at least 2 feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.

Soil Profile Hole Number: 1					
Depth (ft.)	Textural Class	Gravel Analysis	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0	Rock	<30%	No	Yes	Limestone @ surface      <div style="text-align: right;"> <b>RECEIVED</b>   <b>NOV 28 2018</b>   <b>COUNTY ENGINEER</b> </div>
1					
2					
3					
4					
5					

## ON-SITE SEWAGE FACILITY (OSSF) SITE EVALUATION FORM

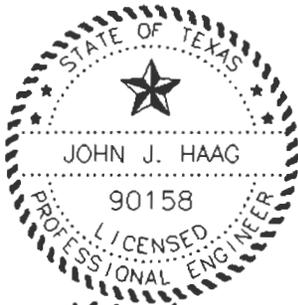
Soil Profile Hole Number: 2					
Depth (ft.)	Textural Class	Gravel Analysis	Drainage (Mottles/Water Table)	Restrictive Horizon	Observations
0	III	<30%	No	Yes	Clay loam to 6" then limestone
1					
2					
3					
4					
5					

**5. FEATURES OF SITE AREA:**

- Presence of 100 year flood zone:  Yes  No
- Presence of adjacent ponds, streams or water impoundments  Yes  No
- Existing or proposed water well in nearby area  Yes  No
- Organized sewage available to lot or tract  Yes  No
- Recharge features within 150 feet  Yes  No (None observed)

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

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*J. J. Haag, P.E.*

09/27/18

Haag Engineering Consultants, Inc.  
Firm: F-5789

**REVISED**  
10:10 am, Feb 27, 2019

**Aerobic With Surface Disposal**

by Felix I. Bernal, P.E. (c) 2002 - 2013

SITE EVALUATION PERFORMED ON: 27-Sep-18 by John J. Haag, P.E.



Date: 02/27/19  
 APPLICANT: Eugene Moore, Jr.  
 MAILING ADDRESS: 423 Neches Branch  
 CITY, ST, ZIP San Antonio, Tx. 78258  
 CONTRACTOR  
 SITE ADDRESS: 1403 Cottonwood  
 CITY, ST, ZIP Fischer, Texas 78623  
 LEGAL DESCRIPTION: Lot 116, Rancho del Lago 12  
 WATER SOURCE: Public

SOIL TYPE 3 AT SLOPE OF <15% BEDROOMS 3 Sq. Ft. 1650  
 Normally Required 300 GPD 300 GPD

WATER SAVING DEVICES? Y  
 APPLICATION RATE = 0.064 GALLONS PER SQ. FT. PER DAY  
 USAGE FLOW = 240 GALLONS PER DAY WHICH IS 80% OF 300 GPD  
 SEPTIC TANK VOLUME = 750 GALLONS TWO COMPARTMENT TANK REQUIRED  
 RESERVE CAPACITY = 80 (8 HOURS USAGE AFTER HIGH LEVEL ALARM)

AREA REQUIRED = 3,750 SQ. FT. OF ABSORPTION AREA OR 0.09 ACRES  
**WITHOUT WATER SAVING DEVICES** 4,688 SQ. FT. OF ABSORPTION AREA OR 0.11 ACRES

Use a 600 GPD Treatment Plant Model SA600 by Solar Aerobic  
 Nozzle # PSI (K-Rain ProPlus Low Angle Sprinkler Nozzle)

3 30 PSI WITH A 29 FOOT RADIUS AND 3.0  
 GPM/ SPRINKLER WITH A TOTAL OF 4.5 GPM FOR THE SYSTEM

**AREA COVERED BY PROPOSED SPRINKLER HEADS**

LINEAR FEET OF DISTRIBUTION = 276.0 FT. OF 1 INCH SCH-40 PURPLE PIPE 150 C (HAZEN-WILLIAMS)  
 SPACE BETWEEN SPRINKLER HEADS = 29 FT

3 SPRINKLERS FOR A DOSE TIME OF 53 MINUTES  
 WITH ANGLE OF DISTRIBUTION = 360 AREA PER SPRINKLER = 2,642 sf  
 OF ABSORPTION AREA

SPRINKLERS	LENGTH OF PIPE	Dist. Angle	Flow GPM	Q GPM	Hf ft of head	Area
3	196 FT	180	1.5	4.500	3.07	1321.0
2	30 FT	180	1.5	3.000	0.22	1321.0
1	50 FT	180	1.5	1.500	0.10	1321.0
0			0	0.000	0.00	0.0
0			0	0.000	0.00	0.0
0			0	0.000	0.00	0.0
0			0	0.000	0.00	0.0
0			0	0.000	0.00	0.0
0			0	0.000	0.00	0.0
0			0	0.000	0.00	0.0
SUM=	276 feet of pipe		4.500		3.40 ft of head	3963.0 sf Provided

fittings factor 1.20  
 4.08 ft of head  
 Hf for Dist Line 4.3271022 ft of head

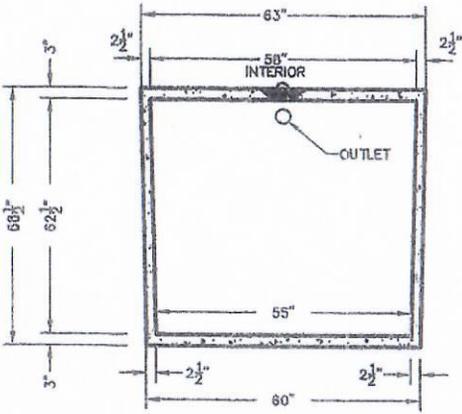
(Note: 0.4335= 62.424/144 for water at 39.2°F)  
 30.00 psi divided by 0.4335 = 69.20 ft of head  
 elevation difference 18.00 ft of head  
 head required for sprinkling 95.61 ft of head  
 pressure required for sprinkling 41.45 psi



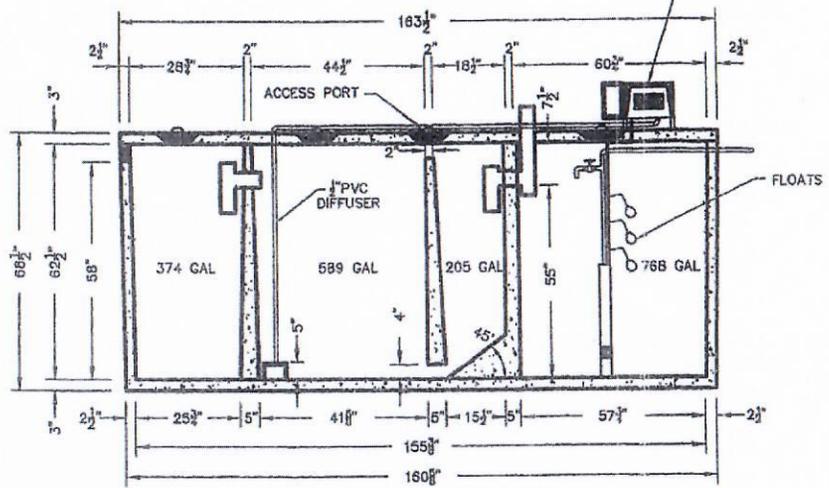
**REVISED**

10:44 am, Feb 27, 2019

DESIGNER	ESC
DRAWN	ESC
REVISION	



SECTION B-B

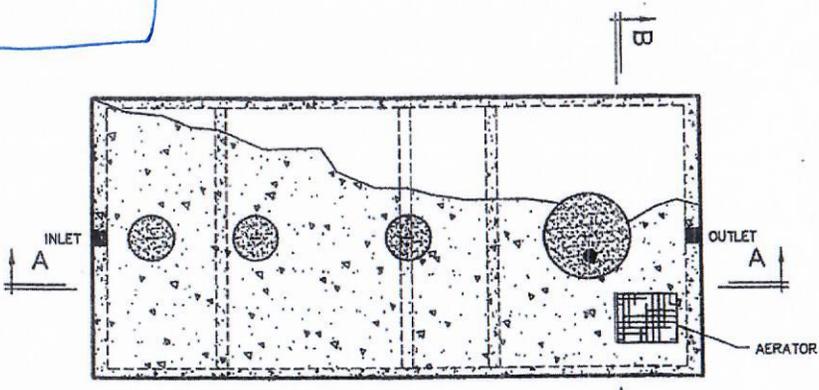


SECTION A-A

Pump float settings for min. 240 gpd design flow and min. 80 gal reserve:  
 Pump off position: 12" above tank bott. (approx. 166 gal.)  
 Pump on position: 30" above tank bott. (approx. 419 gal)  
 Alarm on position: 36" above tank bott. (approx. 502 gal)  
 Approx. 265 gal. reserve at 55" above tank bott.



*John J. Haag, P.E.*  
 01/29/19



PLAN VIEW

MODEL SA600-768PT  
 SEWER TREATMENT SYSTEM

SOLAR AEROBIC  
 6754 HWY 90 EAST  
 LAKE CHARLES, LA 70615  
 PHONE: (337) 439-0680

TREATMENT PLANT
NO. SA-3
JULY 2011
PROJECT

# C1 SERIES

## CISTERN PUMPS

Designed for use in gray water / filtered effluent service applications, the C1 Series cistern pump provides high performance and long life in less than ideal water conditions. The C1 Series pump is able to pass solids up to 1/8" without having a negative effect on the internal hydraulic components.

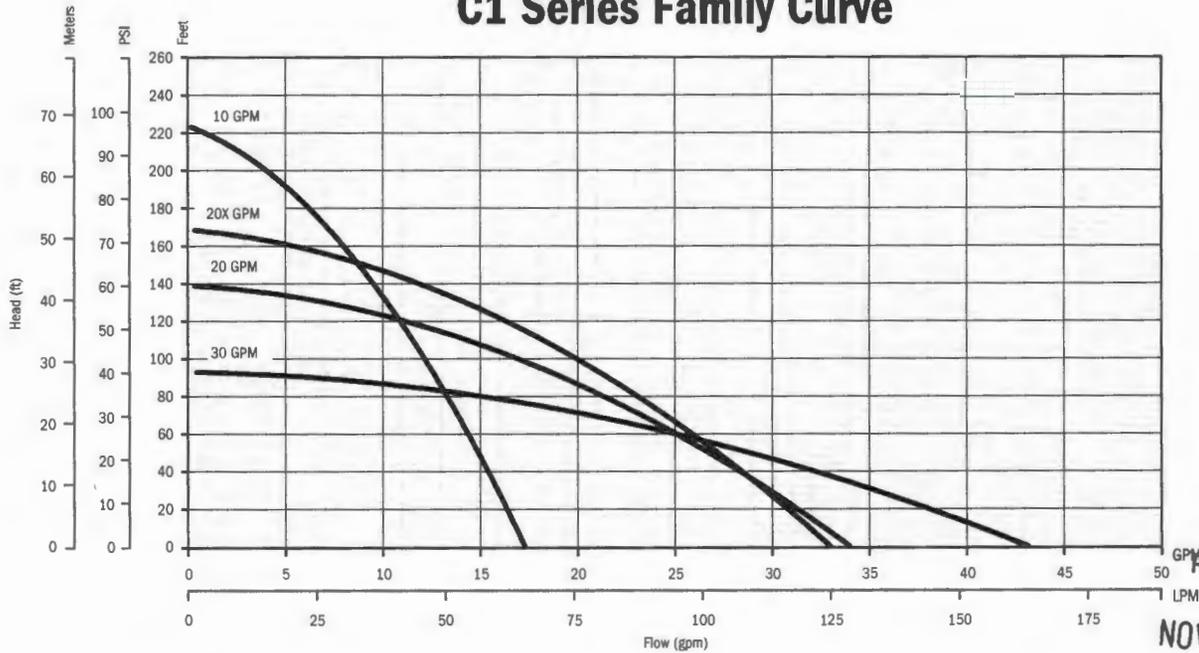
The pump's unique bottom suction design allows for maximum fluid drawdown without compromising durability or overall life, and it does not require the use of a flow induction sleeve. Intended specifically for use in a cistern or tank, C1 Series pumps are suitable for use in agricultural, residential, and commercial installations.



**Franklin Electric**

[franklinwater.com](http://franklinwater.com)

# C1 Series Family Curve



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## FEATURES

- Supplied with a removable 5" base for secure and reliable mounting
- Bottom suction design
- Robust thermoplastic discharge head design resists breakage during installation and operation
- Single shell housing design provides a compact unit while ensuring cool and quiet operation
- Hydraulic components molded from high quality engineered thermoplastics
- Optimized hydraulic design allows for increased performance and decreased power usage
- All metal components are made of high grade stainless steel for corrosion resistance
- Available with a high quality 115 V or 230 V, 1/2 hp motor
- Fluid flows of 10, 20, and 30 gpm, with a max shut-off pressure of over 100 psi
- Heavy duty 600 V 10 foot SJ00W jacketed lead

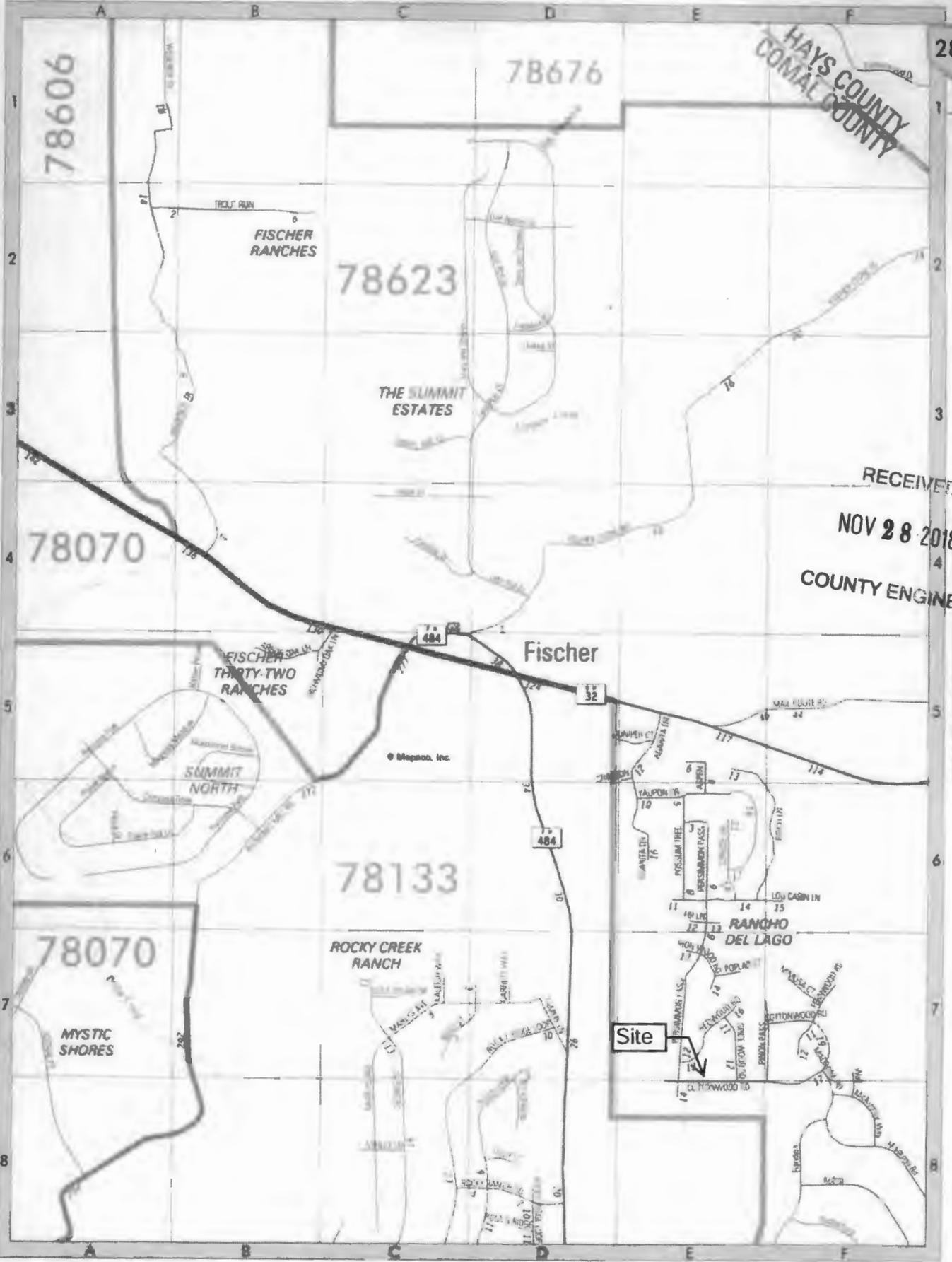
## APPLICATIONS

- Gray water pumping
- Filtered effluent service water pumping
- Water reclamation projects such as pumping from rain catchment basins
- Aeration and other foundation or pond applications
- Agriculture and livestock water pumping

## ORDERING INFORMATION

C1 Series Pumps							
GPM	HP	Volts	Stage	Model No.	Order No.	Length (in)	Weight (lbs)
10	1/2	115	7	10C1-05P4-2W115	90301005	26	17
		230	7	10C1-05P4-2W230	90301010	26	17
20		115	5	20C1-05P4-2W115	90302005	25	16
		230	5	20C1-05P4-2W230	90302010	25	16
20X		115	6	20XC1-05P4-2W115	90302015	26	17
		230	6	20XC1-05P4-2W230	90302020	26	17
30		115	4	30C1-05P4-2W115	90303005	25	16
		230	4	30C1-05P4-2W230	90303010	25	16

Note: All units have 10 foot long SJ00W leads.



287

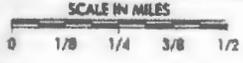
HAYS COUNTY  
COMAL COUNTY

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CONTINUED ON MAP 296



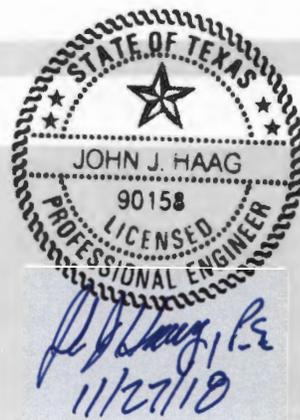
**Aerobic With Surface Disposal**

by Felix Bernal, P.E. (c) 2002 - 2013

SITE EVALUATION PERFORMED ON:



by John J. Haag, P.E.



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COUNTY ENGINEER

Date: 11/27/18  
 APPLICANT: Eugene Moore, Jr.  
 MAILING ADDRESS: 423 Neches Branch  
 CITY, ST, ZIP San Antonio, Tx. 78258  
 CONTRACTOR  
 SITE ADDRESS: 1403 Cottonwood  
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 AREA REQUIRED = 3,750 SQ. FT. OF ABSORPTION AREA OR 0.09 ACRES  
**WITHOUT WATER SAVING DEVICES** 4,688 SQ. FT. OF ABSORPTION AREA OR 0.11 ACRES  
 Use a 500 GPD Treatment Plant Model LA-500 by Hoot  
 Nozzle # PSI (K-Rain ProPlus Low Angle Sprinkler Nozzle)  
 3 30 PSI WITH A 29 FOOT RADIUS AND 3.0

GPM/ SPRINKLER WITH A TOTAL OF 4.5 GPM FOR THE SYSTEM

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0			0	0.000	0.00	0.0
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0			0	0.000	0.00	0.0
0			0	0.000	0.00	0.0
0			0	0.000	0.00	0.0
0			0	0.000	0.00	0.0



SUM= 276 feet of pipe 4.500 3.40 ft of head 3963.0 sf Provided

fittings factor 1.20  
 4.08 ft of head  
 Hf for Dist Line 4.3271022 ft of head

(Note: 0.4335= 62.424/144 for water at 39.2°F)

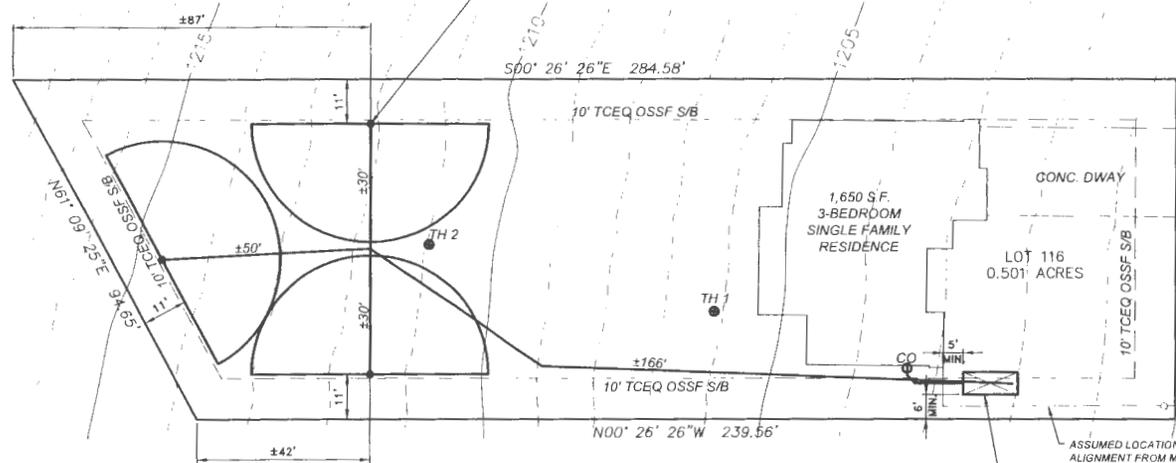
30.00 psi divided by 0.4335 =	69.20 ft of head
elevation difference	18.00 ft of head
head required for sprinkling	95.61 ft of head
pressure required for sprinkling	41.45 psi

GENERAL NOTES

- NO VEHICULAR TRAFFIC IS ALLOWED ON ANY PORTION OF THE DISPOSAL SYSTEM, UNLESS THE DESIGN SPECIFIES OTHERWISE
- PIPE ALIGNMENT TO THE DISPOSAL BEDS MAY BE ALTERED AS REQUIRED. ANY CHANGE FROM THE PLANS MUST BE APPROVED BY THE ENGINEER AND THE APPROPRIATE GOVERNMENTAL AGENCIES
- CONTRACTOR SHALL PROTECT TREES WHICH ARE NOT IN THE EXCAVATED CONSTRUCTION AREAS. CONTRACTOR SHALL MINIMIZE ROOT DAMAGE AND REASONABLY ADHERE TO THE DESIGN
- CONTRACTOR IS RESPONSIBLE FOR VERIFYING A MINIMUM OF 1/4" PER FOOT OF FALL FROM THE BUILDING TO THE SEPTIC TANK
- NO AUTOMATIC SPRINKLER SYSTEM SHALL BE INSTALLED OVER THE DISPOSAL AREAS. ANY WATERING IN THESE AREAS SHALL BE DONE BY HAND AND ONLY WHEN REQUIRED TO MAINTAIN GRASS COVER
- ALL CONSTRUCTION SHALL CONFORM TO THE RULES AND REGULATIONS OF THE APPROPRIATE AUTHORITY - TEXAS COMMISSION ON ENVIRONMENTAL QUALITY (TCEQ) AND ANY APPLICABLE LOCAL BUILDING AND SAFETY CODES
- CONTRACTOR SHALL BE RESPONSIBLE FOR LOCATING AND VERIFYING THE LOCATION OF ALL EXISTING UNDERGROUND UTILITIES THAT MAY BE AFFECTED BY THE CONSTRUCTION OF THIS SYSTEM
- SPRAY APPLICATION AREAS SHALL BE COVERED WITH PERENNIAL GRASSES TO TAKE ADVANTAGE OF TRANSPARATION. IF GRASSES ARE USED WHICH HAVE DORMANT PERIODS, STEPS SHOULD BE TAKEN TO PROVIDE SOME TYPE OF VEGETATION ON THE BEDS DURING THESE PERIODS
- RECOMMENDED COVERAGE
  - BERMUDA 1 LB/1000 SF
  - RYE 10 LB/1000 SF
  - OR ST. AUGUSTINE SOD
- SPRAY APPLICATION AREAS MUST BE MOWED AT REGULAR INTERVALS FAILURE TO PROPERLY MAINTAIN VEGETATION COVER MAY RESULT IN SYSTEM FAILURE AND SHALL BE THE RESPONSIBILITY OF THE OWNER
- ALL PIPES SHALL BE SCHEDULE 40 PVC OR APPROVED EQUAL, UNLESS NOTED OTHERWISE. ALL JOINTS SHALL BE CLEANED WITH THE APPROPRIATE SOLVENT AND GLUED IN ACCORDANCE WITH THE MANUFACTURER'S RECOMMENDATION
- ALL POTABLE WATER LINES SHALL BE A MINIMUM OF 10 FEET FROM ANY DISPOSAL SYSTEM OR SEWERAGE PIPE. THE CONTRACTOR SHALL NOTIFY THE ENGINEER OF WATER LINES LESS THAN 10 FEET FROM THE DISPOSAL AREA
- HIGH WATER ALARM SHALL BE LOCATED IN A NOTICEABLE LOCATION. THE ALARM SHALL BE A VISUAL AND AUDIBLE ALARM AND WIRED ON A SEPARATE CIRCUIT FROM THE PUMPS. ALL EXTERIOR CONTROLS AND CONNECTIONS SHALL BE ENCLOSED IN A WEATHER-PROOF HOUSING. ELECTRICAL CONSTRUCTION SHALL COMPLY WITH ALL LOCAL ELECTRICAL AND BUILDING CODES
- NO EXCAVATION IS PERMITTED NEAR THE DISPOSAL AREAS THAT WILL RESULT IN THE NONCOMPLIANCE OF APPLICABLE SETBACKS STATED IN THE RULES AND REGULATIONS OF THE APPROPRIATE AUTHORITY
- ONLY GOOD QUALITY SANDY LOAM SHALL BE APPLIED OVER THE DISPOSAL AREAS. CLAY LOAM IS UNACCEPTABLE AND WILL CAUSE SYSTEM FAILURE. SANDY LOAM SHALL BE DEFINED AS SHOWN IN TABLE VI (USDA SOIL TEXTURAL CLASSIFICATIONS) OF THE RULES AND REGULATIONS OF THE TCEQ. THE INSTALLER IS RESPONSIBLE FOR VERIFYING THE QUALITY OF EACH LOAD OF LOAM PLACED ON THE SYSTEM
- STORM WATER (RAINFALL RUNOFF) SHOULD NOT BE ALLOWED TO FLOW OVER THE DISPOSAL FIELDS OR THE TANKS. DIVERSION BERMS, SWALES AND/OR RAIN GUTTERS SHOULD BE INSTALLED AS NECESSARY TO PREVENT SUCH RUNOFF
- THE CONTRACTOR IS RESPONSIBLE FOR STAKING AND VERIFYING THE GRADES PRIOR TO EXCAVATION. ANY DISCREPANCIES OF MORE THAN 5 INCHES SHALL BE REPORTED TO THE ENGINEER PRIOR TO EXCAVATION. THE CONTRACTOR SHALL NOT DEVIATE FROM THESE PLANS WITHOUT THE WRITTEN CONSENT OF THE APPROPRIATE AUTHORITY AND THE ENGINEER
- WATER SUFFERS SHALL NOT BE CONNECTED TO THE SEPTIC TANK
- CONTRACTOR SHALL REPORT TO THE ENGINEER ANY ELEVATION DIFFERENCES GREATER THAN 4 FEET BETWEEN THE HIGHEST AND LOWEST TRENCH IN THE FIELD. THIS SHOULD BE CHECKED PRIOR TO INSTALLING THE LATERALS AND MANIFOLD
- THIS DISPOSAL SYSTEM HAS BEEN DESIGNED TO OPERATE PROPERLY AT SPECIFICATIONS NOTED IN THESE PLANS. ALTERATIONS TO THE SYSTEM BY THE OWNER, INCLUDING BUT NOT LIMITED TO: LANDSCAPING, DRAINAGE BUILDING AND/OR WATER USAGE, MAY CAUSE PREMATURE FAILURE AND SHALL BE THE SOLE RESPONSIBILITY OF THE OWNER
- CONTRACTOR SHALL BE RESPONSIBLE FOR VERIFYING ALL PLUMBING FIXTURES ARE CONNECTED TO THE DESIGNATED SEPTIC TANK(S). LOW FLOW TOILETS (1.6 GAL), SHOWERHEADS AND FAUCETS SHALL BE USED IN THE STRUCTURES
- CONTRACTOR SHALL BE RESPONSIBLE FOR JOBSITE SAFETY AND PROTECTION OF THE PUBLIC FROM INJURY DURING CONSTRUCTION. THE OWNER SHALL BE RESPONSIBLE FOR THE PREVENTION OF PERSONAL INJURY TO ANYONE ON OR NEAR THE DISPOSAL SYSTEM
- CONTRACTOR SHALL BE RESPONSIBLE TO ENSURE THAT ALL TANKS HAVE ADEQUATE STRENGTH AND INTEGRITY TO PERFORM SATISFACTORILY AS SHOWN ON THESE PLANS
- THE WASTEWATER FLOW TO THE SEPTIC SYSTEM SHALL NOT EXCEED THE DESIGN FLOW SHOWN ON THIS PLAN

VOID

1 OF 3 - PROP. #3 - 29'R  
SPRINKLER (K RAIN PRO PLUS MODEL 11003 - RCW).  
MIN. COVERAGE AREA = 3,750 SF  
ACTUAL COVERAGE AREA = 3,963 SF



COTTONWOOD

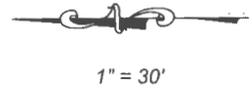
PROP. HOOT LA-500  
AEROBIC TANK WITH  
FRANKLIN 20 GPM PUMP

ASSUMED LOCATION OF WATER SERVICE ALIGNMENT FROM METER TO HOUSE. NOTE WATER SERVICE LINE SHALL BE SLEEVED WITH SCH. 40 PVC WHEREVER IT IS 10' OR CLOSER TO PROPOSED OSSF DISPOSAL AREA LIMITS AND/OR ANY SYSTEM COMPONENT(S). EXTEND PVC SLEEVING 10' MIN. BEYOND EACH SIDE OF OSSF DISPOSAL AREA LIMITS AND/OR SYSTEM COMPONENTS.

VOID

- ADDL. NOTES
- SPRINKLER OPERATION SHALL BE TIMED TO DOSE BETWEEN MIDNIGHT AND 5:00 a.m.
  - A BATTERY BACKUP TO THE TIMER CLOCK SHALL BE INSTALLED TO ENSURE DOSING ONLY OCCURS BETWEEN MIDNIGHT AND 5:00 a.m.
  - DESIGN DAILY WASTEWATER FLOW = 240 GPD (WATER SAVING DEVICES WERE ASSUMED FOR SEPTIC SYSTEM DESIGN)
  - TOPOGRAPHIC DATA SOURCE: FEMA 2011 DATA
  - THE OSSF INSTALLER SHALL FIELD VERIFY ALL PROPERTY LINE LOCATIONS THAT THIS DESIGN REFERENCES PRIOR TO ANY OSSF INSTALLATIONS

SLOPE NOTE  
INSTALLER SHALL CUT OR FILL EXIST. GROUND WITHIN SPRAY DISPOSAL LIMITS SO THAT TOP OF FINISHED GROUND SLOPES WITHIN SAID LIMITS DO NOT EXCEED 15%



*J.J. Haag, P.E.*  
11/27/18

**OSSF LAYOUT  
LOT 116, COTTONWOOD DR.  
RANCHO DEL LAGO 11  
FISCHER, TEXAS**

NOTE: OSSF IS NOT WITHIN FEMA 100 YEAR FLOODPLAIN.  
OSSF IS NOT WITHIN THE EDWARDS AQUIFER RECHARGE ZONE.

SITE EVALUATION BY JOHN J. HAAG, P.E. ON 09/27/18

DRAWN BY: J.J.H.  
CHECKED BY: J.J.H.  
DATE: 11/27/18  
JOB NO. BARR18031

SHEET 1 OF 1

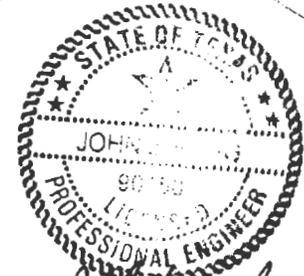
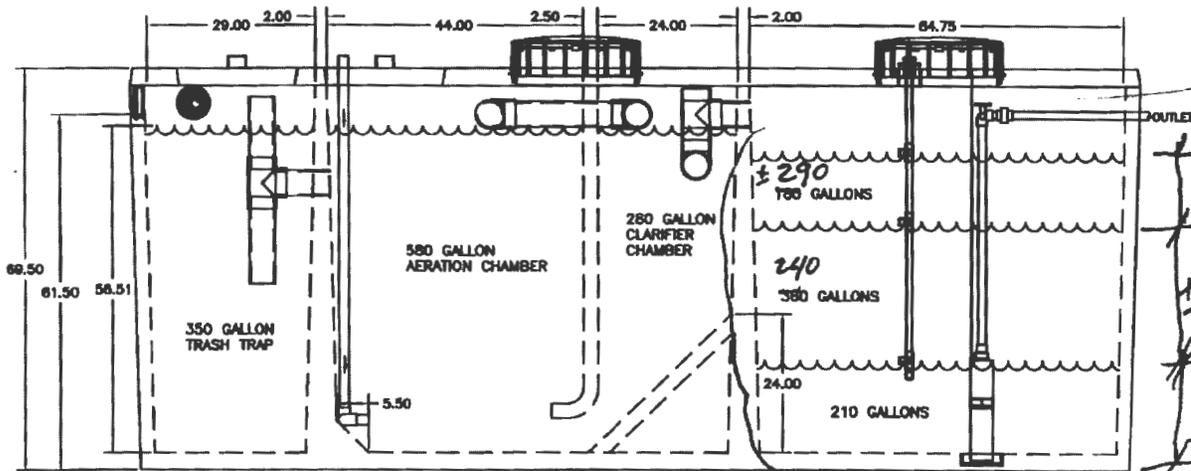
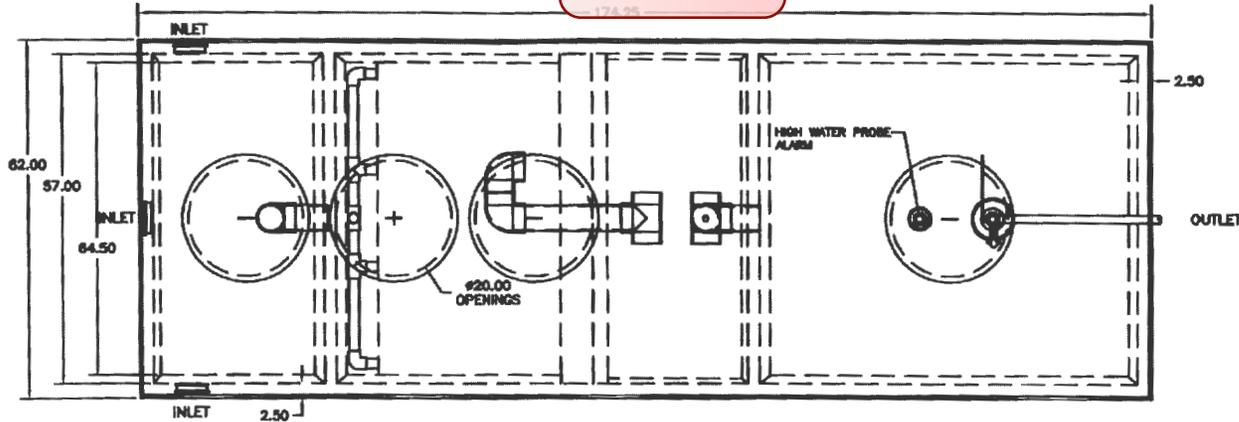
**HAAG ENGINEERING CONSULTANTS**

15831 SECRET TRAILS  
SAN ANTONIO, TEXAS 78247  
FIRM: F-5789  
TEL: (210) 705-4268  
FAX: (210) 855-8383  
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REVISIONS	DESCRIPTION	DATE



± 19"

± 18"

± 15"

*[Handwritten Signature]*

02/08/18

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PROPERTY ENGINEER

**HOOT SYSTEMS, LLC**

THIS DRAWING IS THE PROPRIETARY PROPERTY OF HOOT SYSTEMS LLC. REPRODUCTION, DISCLOSURE OR USE OF ANY PART OF THIS DRAWING OR ANY INFORMATION THEREIN IS EXPRESSLY PROHIBITED WITHOUT PRIOR WRITTEN CONSENT OF HOOT SYSTEMS LLC.

DESCRIPTION: HOOT SYSTEMS LA HOOT 850 LA-500				PART #
DATE: 7-21-2013	DRAWN BY: AY	CHECK BY: RS	SCALE: N.T.S.	HOOT LA-500

FILED BY ATC  
SPRING BRANCH

GF# 4000131800577

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

**General Warranty Deed**

THE STATE OF TEXAS §

KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF COMAL §

Executed on date of acknowledgement to be Effective on: August 16, 2018.

Grantor: JERRY L. HILBURN and wife, KATHY S. HILBURN

Grantor's Mailing Address: 1405 Ponderosa Drive, New Braunfels, Comal County, Texas 78130 COUNTY ENGINEER

Grantee: **EUGENE MOORE, JR., LLC**

Grantee's Mailing Address: 423 Neches Branch, San Antonio, Bexar County, Texas 78258

Consideration: TEN DOLLARS (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged.

Property (including any improvements): **Lot 116, Rancho Del Lago, Phase 11, Comal County, Texas, according to the map or plat thereof recorded in Volume 8, Pages 192-194, Map and Plat Records, Comal County, Texas.**

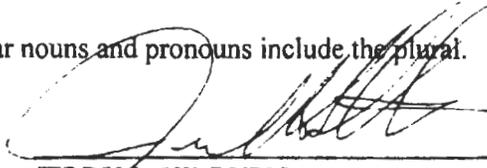
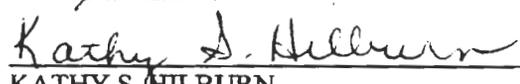
Reservations from Conveyance: None.

Exceptions to Conveyance and Warranty: All presently recorded restrictions, reservations, easements, covenants and conditions that affect the property and taxes for the current year, the payment of which Grantee assumes.

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

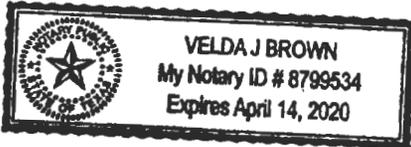
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When the context requires, singular nouns and pronouns include the plural.

  
\_\_\_\_\_  
JERRY L. HILBURN  
  
\_\_\_\_\_  
KATHY S. HILBURN

THE STATE OF TEXAS \*  
COUNTY OF Comal \*

This instrument was acknowledged before me on this the 10th day of Aug, 2018, by JERRY L. HILBURN.

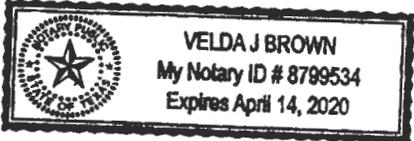


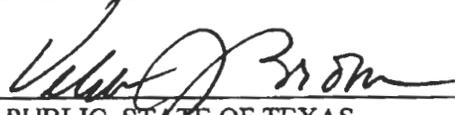
  
\_\_\_\_\_  
NOTARY PUBLIC, STATE OF TEXAS  
Notary's Name Printed: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

RECEIVED  
NOV 28 2018  
COUNTY ENGINEER

THE STATE OF TEXAS \*  
COUNTY OF Comal \*

This instrument was acknowledged before me on this the 10th day of Aug, 2018, by KATHY S. HILBURN.



  
\_\_\_\_\_  
NOTARY PUBLIC, STATE OF TEXAS  
Notary's Name Printed: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

AFTER RECORDING RETURN TO:  
ALAMO TITLE COMPANY  
GF No. 4000131800577

PREPARED IN THE LAW OFFICE OF:  
KRISTEN QUINNEY PORTER, LLC  
P.O. Box 312643  
New Braunfels, Texas 78131-2643

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
08/20/2018 08:50:34 AM  
LAURA 2 Pages(s)  
201806032574



*Bobbie Koepf*

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 7-24-19

2. System inspection: Property Owner: MOORE  
 Property address: 1403 COMANWOOD  
 Permit number: 108409  
 Person Performing Inspection: D BARKER  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured:  Yes  No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	ok	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

4. Tests required and results:

<u>Test</u>	<u>Required</u> Yes-No	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	
Fecal Coli form	—	0.1

5. General comments:

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 11-21-19

2. System inspection: Property Owner: MORSE  
 Property address: 1403 COTTAGEWOOD  
 Permit number: 108409  
 Person Performing Inspection: D BARKER  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured:  Yes  No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	<u>OK</u>	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted	—	

3. Repairs to system: \_\_\_\_\_

4. Tests required and results:

<u>Test</u>	<u>Required</u> Yes-No	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	<u>OK</u>
Fecal Coll form	—	

5. General comments:

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 3-31-20

2. System inspection: Property Owner: MOORE  
 Property address: 1403 COTTENWOOD  
 Permit number: 108409  
 Person Performing Inspection: LL9000  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured: Yes No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	<u>OK</u>	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

4. Tests required and results:

<u>Test</u>	<u>Required Yes-No</u>	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	<u>0.1</u>
Fecal Coli form	—	

5. General comments:

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 7-23-20
2. System inspection: Property Owner: MORRE  
 Property address: 1403 COTTONWOOD  
 Permit number: 108409  
 Person Performing Inspection: L L GORDON  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured: Yes No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	<u>OK</u>	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted	—	

3. Repairs to system: ADJUSTED SANITIZER PRESSURE

4. Tests required and results:

<u>Test</u>	<u>Required</u> Yes-No	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	<u>OK</u>
Fecal Coli form	—	

5. General comments:

\_\_\_\_\_

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 12-1-20

2. System inspection: Property Owner: MADRE  
 Property address: 1403 COTTAGEWOOD  
 Permit number: 108409  
 Person Performing Inspection: L LEBBO  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured: Yes No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	<u>on</u>	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

4. Tests required and results:

<u>Test</u>	<u>Required Yes-No</u>	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	
Fecal Coli form	—	<u>0.1</u>

5. General comments:

# ROCKY RIDGE SEPTIC LLC

2449 Rocky Ridge Loop  
Canyon Lake Texas. 78133

830-935-2750 Home  
830-935-2753 Fax

Lynwood Lawson  
1403 Cottonwood  
Fischer Tx 78623

Site: 1403 Cottonwood  
Permit# 108409

Contract Start Date: 3-6-21 Contract End Date: 3-6-22

### ROUTINE MAINTENANCE AND INSPECTION AGREEMENT

This work for hire is entered into and between ( client ) residing at 1403 Cottonwood and David Barker (contractor) located at 2449 Rocky Ridge Loop, Canyon Lake TX. 78133. (830-935-2750). By this agreement the contractor agrees to render professional service and the client agrees to fulfill the terms of this agreement. This agreement will provide to all required inspections, testing, and services for your Aerobic Treatment System. This agreement will provide:

1. 3 inspections per year (at least one every four months) for a total of 3 over the one year period. These inspections will include inspecting control panel, air pumps, diffuser operation, and replacing or repairing any component not functioning properly. Any alarm situation affecting the proper operation of the aerobic treatment process will be addressed within a 48 hour period.
2. An effluent quality inspection consisting of a visual check for color, turbidity, scum overflow, and examination for odor. A test for chlorine residual and ph will be taken and reported as necessary.
3. If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified in writing of the estimated date of repair.
4. Customer is responsible for chlorine tablets or liquid chlorine. Customer is responsible for cost of replacement parts plus labor.
5. Any additional visits, inspections or sample collection required by specific Municipalities, water/river authorities, County Agencies, the TCEQ, or any other regulatory agency will not be covered by this agreement.

At the conclusion of this agreement, our company will make available for purchase on an annual basis, a continuing service agreement  
The manufactures homeowners' manual must be strictly adhered to or warranties are subject to invalidation.  
Pumping of sludge build up is not covered by this agreement

### ACCESS BY CONTRACTOR

The contractor or anyone authorized by the contractor may enter the property at reasonable times without prior notice for the purpose of the above mentioned services. The contractor may access the system components including the tank by means of excavation for the purpose of evaluation if necessary. Soil is to be replaced as best as possible.

Payment: The client will pay the contractor for services in the amount of \$200.00. This will be payable in one lump sum upon acceptance of this agreement.

### TERMINATION

Either party may terminate this agreement within 10 days of written notice in event of substantial failure to perform by either party. If this agreement is terminated, the contractor will notify the appropriate agency.

HOMEOWNER

Melissa Lawson  
Signature \_\_\_\_\_ Date 2-22-2021  
Phone \_\_\_\_\_

8309354312

SERVICE PROVIDER Signature [Signature] Date 2-10-21

Rocky Ridge Septic (830) 935-2750  
2449 Rocky Ridge Loop  
Canyon Lake Tx.78133

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 3-5-21
2. System inspection: Property Owner: LAWSON  
 Property address: 1403 COTTONWOOD  
 Permit number: 108409  
 Person Performing Inspection: LLGDDO  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured: Yes No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	<u>OK</u>	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

4. Tests required and results:

<u>Test</u>	<u>Required</u> Yes-No	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	<u>0.1</u>
Fecal Coli form	—	

5. General comments:

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 7-23-21

2. System inspection: Property Owner: LAWSON  
 Property address: 1403 COTHRANWOOD  
 Permit number: 108409  
 Person Performing Inspection: LLSPOO  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured: Yes No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	<u>OK</u>	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

### 4. Tests required and results:

<u>Test</u>	<u>Required Yes-No</u>	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	<u>0.2</u>
Fecal Coli form	—	

5. General comments:

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 7-23-21

2. System inspection: Property Owner: LAWSON  
 Property address: 1403 COTTONWOOD  
 Permit number: 108409  
 Person Performing Inspection: LLSPP  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured: Yes No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	<u>OK</u>	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

### 4. Tests required and results:

<u>Test</u>	<u>Required Yes-No</u>	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	<u>0.2</u>
Fecal Coli form	—	

5. General comments:

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 7-23-21

2. System inspection: Property Owner: LAWSON  
 Property address: 1403 COTTONWOOD  
 Permit number: 108409  
 Person Performing Inspection: LLSPP  
 Signature: [Signature]

Scheduled Insp. Service Order, Repair, Other

All access ports secured: Yes No

<u>Inspected Item</u>	<u>Operational</u>	<u>Nonoperational</u>
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	<u>OK</u>	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

4. Tests required and results:

<u>Test</u>	<u>Required Yes-No</u>	<u>Result</u>
BOD	—	
TSS	—	
Cl1	—	<u>0.2</u>
Fecal Coli form	—	

5. General comments:

# ROCKY RIDGE SEPTIC

## AEROBIC SERVICE AND INSPECTION FORM

1. Actual date of test: 11-4-21

2. System inspection: Property Owner: LANSON  
 Property address: 1403 COTTAGEWOOD  
 Permit number: 108409  
 Person Performing Inspection: D. BARKER  
 Signature: [Signature]

### Scheduled Insp. Service Order, Repair, Other

All access ports secured:  Yes  No

Inspected Item	Operational	Nonoperational
Aerators	—	
Filters	—	
Irrigation Pumps	—	
Disinfection Device	—	
Chlorine Supply	OK	
Electrical Circuits	—	
Distribution System	—	
Spray field	—	
Other as noted		

3. Repairs to system: \_\_\_\_\_

4. Tests required and results:

Test	Required		Result
	Yes	No	
BOD	—	—	
TSS	—	—	
Chlorine	—	—	0.2
Fecal Coli form	—	—	

5. General comments: \_\_\_\_\_