

## Comal County

OFFICE OF COMAL COUNTY ENGINEER

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

Issued This Date: **02/21/2019** Permit Number: **108447**

Location Description: **2215 SAN JOSE WAY  
CANYON LAKE, TX 78133**

Subdivision: **Cordova Bend at Canyon Lake**  
Unit: **1**  
Lot: **69**  
Block:  
Acreage:

Type of System: **Aerobic  
Surface Irrigation**

Issued to: **Michael P & Sandra J Wing**

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**

*Heidi Leanne Heimerl* **050031545**  
ENVIRONMENTAL HEALTH INSPECTOR

*Sandra Ann Fernandez* **050025599**  
ENVIRONMENTAL HEALTH COORDINATOR

11:30

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Paul Swager OSSF Installer #: \_\_\_\_\_  
 1st Inspection Date: 1/29/19 2nd Inspection Date: 2.13.19 3rd Inspection Date: 2-21-19  
 Inspector Name: S. Helmske Inspector Name: Mike T. Inspector Name: Shelly H  
 Permit#: 108447 Address: 2215 San Jose way - Cridmore Bend @ CL

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)		1/29/19		
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)	need sewer pipe from house to tank installed & sleeved		see notes 2.13.19	
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)				

1/29/19 - SH  
 tank set level  
 operational  
 sewer line from house needs to be installed & sleeved

2.13.19  
 ready for final  
 after this  
 ↓  
 sleeve needs  
 extended on  
 both sides still.

2/21/19 - SH  
 sleeved

**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)		1/29/19 1		
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	✓		Maxx Air			
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(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)				
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>	✓			1/29/19		
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						
----	---	--	--	--	--	--	--

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	✓	285.33(d)(2)(G)(iii)(ii)285.33(d)(2)(G)(iii)(iii)285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(i)		1/29/29		
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed	✓	285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed	✓		2 @ 5654 sq ft			
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



11:30

# Comal County Environmental Health

## OSSF Inspection Sheet

Installer Name: Paul Swager

OSSF Installer #: \_\_\_\_\_

1st Inspection Date: 1/29/19

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

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

Inspector Name: S. Helmke

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

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

Permit#: 108447Address: 2215 San Jose Way - Cindera Bend @ CL

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)		1/29/19		
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)	need sewer pipe from house to tank installed & sleeved			
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)(iii)(I)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

1/29/19 - SH

tank set level  
operational

ready for final  
after this



sewer line from house needs to be installed & sleeved



**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)		1/29/19		
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	✓		Maxx Air			
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(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**

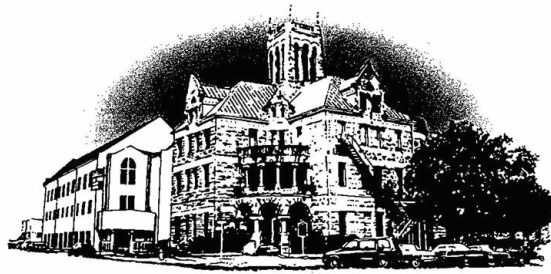
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	<p>EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling</p> <p>EFFLUENT DISPOSAL SYSTEM Topographic Slopes &lt; 2.0%</p> <p>EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less &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)				
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>	✓			1/29/19		
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						
----	---	--	--	--	--	--	--

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	✓	285.33(d)(2)(G)(iii)(II)285.33(d)(2)(G)(iii)(III)285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(I)		1/29/19		
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)				
42	APPLICATION AREA Area Installed	✓		2 @ 5654 sq ft			
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: 108447  
Issued This Date: 12/18/2018  
This permit is hereby given to: Michael P & Sandra J Wing

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

2215 SAN JOSE WAY  
CANYON LAKE, TX 78133

Subdivision: Cordova Bend at Canyon Lake  
Unit: 1  
Lot: 69  
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  
DEC 06 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

**REVISED**

1:54 pm, Dec 18, 2018

Date September 25, 2018

Permit # 108447

Owner Name MICHAEL P & SANDRA J WING  
Mailing Address c/o 23011 FM 306  
City, State, Zip CANYON LAKE TEXAS 78133  
Phone# 830-935-4936  
Email ashley@paulswoyerseptics.com

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

All correspondence should be sent to: ☐ Owner ☒ Agent ☐ Both

Method: ☐ Mail ☒ Email

Subdivision Name CORDOVA BEND AT CANYON LAKE Unit/Phase/Section 1 Lot 69 Block

Acreage/Legal

Street Name/Address 2215 SAN JOSE WAY City CANYON LAKE Zip 78133

**Type of Development:**

☒ Single Family Residential

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

Number of Bedrooms 4

Indicate Sq Ft of Living Area 3018

☐ Commercial or Institutional Facility

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

Type of Facility

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

Restaurants, Lounges, Theaters - Indicate Number of Seats

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

Travel Trailer/RV Parks - Indicate Number of Spaces

Miscellaneous

Estimated Cost of Construction: \$ 350,000 (Structure Only)

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

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

Source of Water ☒ Public ☐ Private Well

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

By signing this application, I certify that:

- the completed application and all additional information submitted does not contain any false information and does not conceal any material facts.  
- Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities.

- I also understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.

- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

[Signature]  
Signature of Owner

11/30/2018  
Date

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

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

1:55 pm, Dec 18, 2018

Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) MAXX AIR M600 Absorption/Application Area (Sq Ft) 5654Gallons Per Day (As Per TCEQ Table III) 300 + 20 GALLONS

(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 ☐ NoIs there an existing TCEQ approval CZP for the property? ☒ Yes ☐ No

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

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

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

Is this property within an incorporated city? ☐ Yes ☒ No

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

**FIRM #2585**

By signing this application, I certify that:

- The information provided above is true and correct to the best of my knowledge.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable

Signature of Designer

September 27, 2018  
Date



# AFFIDAVIT



201806046682 12/06/2018 01:46:26 PM 1/1

THE COUNTY OF COMAL  
STATE OF TEXAS

## CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

I

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

II

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

1 UNIT PHASE/SECTION BLOCK 69 LOT CORDOVA BEND AT CANYON LAKESUBDIVISION

IF NOT IN SUBDIVISION: ACREAGE SURVEY

The property is owned by (insert owner's full name): MICHAEL P. WING & SANDRA J. WING

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.

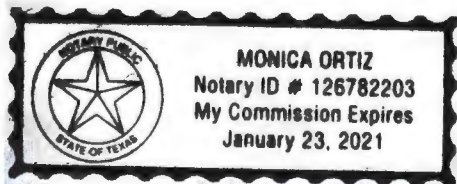
WITNESS BY HAND(S) ON THIS 30 DAY OF November, 20 18

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

*Michael P. Wing Sandra J. Wing*  
Owner (s) Printed name (s)

MICHAEL P. + SANDRA J. WING SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 30 DAY OF November, 20 18

*Monica Ortiz*  
Notary Public Signature



(Notary Seal Here)

THIS  
Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
12/06/2018 01:46:26 PM  
TERRI 1 Page(s)  
201806046682



*Bobbie Koepf*

USES ONLY

RECEIVED  
DEC 06 2018  
COUNTY ENGINEER



PAUL SWOYER SEPTIC SUPPLY &  
SERVICE

23011 FM 306

CANYON LAKE, TX 78133

RECEIVED

DEC 06 2018

COUNTY ENGINEER

MP#0001708

CHRISTOPHER RYAN SEIDENSTICKER

**PROPERTY LEGAL DESCRIPTION:**

CORDOVA BEND AT CANYON LAKE, UNIT 1, LOT 69

**Customer:** MICHAEL P. WING & SANDRA J. WING

**Site Address:** 2215 SAN JOSE WAY

**City/State:** CANYON LAKE **Zip:** 78133

**County:** COMAL **Permit#:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**I. General:** This On-Site Sewage Facility Service Agreement (hereinafter referred to as "Agreement") is entered into by and between MICHAEL P. & SANDRA J. WING (hereinafter referred to as "Client") and PS Supply & Service LLC. (hereinafter referred to as "Contractor"). By this agreement, Contractor agrees to render services, as described herein (the "Services"), and the client agrees to fulfill his/her/their responsibilities under this agreement herein.

**II. Effective Dates:** This agreement commences on the date of License to Operate is issued for Three (3) years.

Date of License to Operate: LTO Last Date of Service: 3 yrs from LTO

**III. Services by Contractor:** Contractor will provide the following Services:

1. Inspect and perform routine maintenance on the On-Site Sewage Facility ("OSSF") in compliance with the code, regulations, and/or rules of the Texas Commission on Environmental Quality ("TCEQ") and county in which the OSSF is located (the "County") and the manufacturer's requirements, at a frequency of approximately once every four (4) months.
2. Report to the appropriate regulatory authority and to Client, as required by the State of Texas' on-site rules and, if required, TCEQ or County rules. All findings must be reported to the appropriate regulatory authority within 14 days.
3. Notify Client and repair any components of the OSSF that are found to be in need of repair during the inspection. If warranty, you just do it. If not, Client will be responsible. Repairs will be made so brought up to compliance and bill forward.
4. Visit site in response to Client's request for unscheduled service within two business days from the date of Contractor's actual receipt of Client's request. Unscheduled service visits are not included in the fee agreement herein and will be billed to the client in addition to fees under this Agreement.
5. Provide notification of arrival to site to the Client or to site personnel. Additionally, Contractor will leave written notification of the visit at the site or with site personnel upon completion of inspection, and forward such notice to the appropriate regulatory authority within fourteen (14) days.

**IV. Payment(s):** Client shall pay to Contractor included w septic for the Services describe herein (the "Inspection and Routine Maintenance Fee"), excepting those described in Section III (4), or Section IX, herein. The Fee does not include equipment, parts or labor supplied for anything beyond routine inspection and routine maintenance. Payments for such additional services are due at the time services are provided or rendered. Payments not received within thirty (30) days from the due date will be subject the greater of a \$20.00 late penalty or 1.5% carrying charge on the original balance for each month or portion thereof a balance in past due. If for any reason such charges are found to be usurious by a court of competent jurisdiction, such charges shall be reduced to the maximum allowable by law. By signing this contract, Client authorizes Contractor to remove any parts installed, but not paid in full at the end of the thirty (30) days. Client agrees to pay for any labor cost associated with the installation and the reasonable cost of removal of said parts.

Client: [Signature]

Contractor: [Signature]



RECEIVED  
DEC 06 2018

COUNTY ENGINEER

**V. Client's Responsibilities:** Client is responsible for each and all of the following:

1. To maintain chlorinator and provide proper chlorine supply, if OSSF is so equipped.
2. To provide all necessary yard or lawn maintenance and removal of obstacles as needed to allow the OSSF to function properly, and to allow Contractor ready access to all parts of the OSSF.
3. To maintain a current license to operate, and abide by the conditions and limitations of that license and all requirements for on-site sewage facilities from the State and local regulatory agency.
4. To maintain the OSSF in accordance with manufacturer's recommendations.
5. To immediately notify Contractor and Agency of any and all problems with, the OSSF, including failure thereof.
6. Upon receipt of any written notification of required services from Contractor, to contact Contractor and authorize the required service. If Client elects a different contractor to perform the required service, Client is responsible for ensuring the substitute contractor holds the proper license (Installer II) and is certified by the manufacturer. Additionally, Client shall be responsible for ensuring proper notification is given to the appropriate regulatory authority, as required by the State and/or local regulatory authority rules.
7. To provide Contractor with water usage records, upon request, for evaluation by Contractor of the OSSF performance.
8. To pay required sampling charges for samples collected for testing (e.g. Biological Oxygen Demand/Total Suspended Solids ("BOD/TSS") that may be required on the OSSF.
9. To prevent backwash from water treatment or water conditioning equipment to enter the OSSF.
10. To provide, at Client's expense, for pumping of tanks as needed.
11. To maintain site drainage sufficient to prevent adverse effects on the OSSF.
12. To promptly and fully pay Contractor's bills, fees, or invoices as described herein.

**VI. Access by Contractor:** Client agrees to allow Contractor, or personnel authorized by the Contractor, to enter the property at reasonable times without prior notice for the purpose of performing the Services described herein. Such entry shall include access to the OSSF electrical and physical components, including tanks, by means of manways or risers for the purpose of evaluations required by the manufacturer, and/or regulatory authority rules. If such manways or risers are not in place, Client shall allow and be responsible for payment of required excavation, including labor and materials, necessary to allow access to the OSSF or any required components. Such excavation shall be billed at the rate of \$75.00 per hour for labor, plus materials billed at list price. Contractor shall make only those efforts reasonable under the circumstances to replace excavated soil.

**VII. Application or Transfer of Payment:** The fees paid for this agreement may transfer to any subsequent owner(s) of the property on which the OSSF is located. The subsequent owner(s) must sign a similar agreement authorizing Contractor to perform the above-described Services, and accepting Client's responsibilities. The replacement Agreement must be signed and received within 30 days of transfer of ownership. Contractor will apply all funds received from Client first to any past due obligations arising from this Agreement including late charges, return check charges, and charges for repairs or services not paid within 30 days of invoicing. The consumption of the payment in this manner may lead to termination of the agreement by Contractor.

**VIII. Termination of Agreement:** This agreement may be terminated by either party with 30 days written notice. If this agreement is so terminated by Client, Contractor shall be paid at the rate of \$75.00 per hour for any work performed or required, but not yet paid. If terminated by Contractor, all amounts outstanding shall be due within thirty days of termination. The party terminating will immediately notify the other party, the equipment manufacturer, and the regulatory agency of the termination.

**IX. Limitation of Liability:** In no event shall Contractor be liable for indirect, consequential, incidental or punitive damages, whether in contract, tort, or any other theory of liability. In no event shall the Contractor's liability for direct damages exceed payments by the Client under this Agreement.

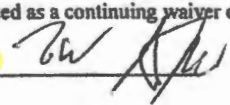
**X. Severability and Reformation:** If any provision in this Agreement shall be held to be invalid or unenforceable for any reason, it shall be reformed to the minimum extent necessary to effect the intent of the Parties. If any provision is such that it cannot reasonably be reformed, it shall be struck from this Agreement and the remaining provisions shall continue to be valid and enforceable.

**XI. Performance of Agreement:** Commencement of performance by Contractor under this agreement is contingent on the following conditions: (1) Contractor receiving a fully executed original copy of this agreement. (2) Contractor receiving payment in full of the fee(s) described herein. If the above conditions are not met, then Contractor is from any obligation to perform any portion of this agreement.

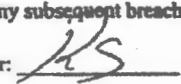
**XII. Modification.** This Agreement may not be changed or modified except by an instrument in writing, signed by both Contractor and Client.

**XIII. Waiver.** Except as otherwise noted in this Agreement, the waiver by other party of a breach of any provision of this Agreement shall not operate or be construed as a continuing waiver or as a consent to or waiver of any subsequent breach hereof.

Client:



Contractor:



RECEIVED  
DEC 06 2018

COUNTY ENGINEER

**XIV. Headings.** The Article and Section headings in this Agreement are for the convenience of reference only and do not constitute a part of this Agreement and shall not be deemed to limit or affect any of the provisions hereof.

**XV. GOVERNING LAW AND CHOICE OF VENUE.** EACH OF THE PARTIES HERETO HEREBY CONSENTS TO THE EXCLUSIVE JURISDICTION OF THE COURTS OF THE STATE OF TEXAS, COUNTY OF COMAL, AND TO THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF TEXAS - SAN ANTONIO DIVISION, AS WELL AS TO THE JURISDICTION OF ALL COURTS TO WHICH AN APPEAL MAY BE TAKEN FROM SUCH COURTS, FOR THE PURPOSE OF ANY SUIT, ACTION, OR OTHER PROCEEDING ARISING OUT OF, OR IN CONNECTION WITH, THIS AGREEMENT OR ANY OF THE TRANSACTIONS CONTEMPLATED HEREBY, INCLUDING, WITHOUT LIMITATION, ANY PROCEEDING RELATING TO ANCILLARY MEASURES IN AID OF ARBITRATION, PROVISIONAL REMEDIES AND INTERIM RELIEF, OR ANY PROCEEDING TO ENFORCE ANY ARBITRAL DECISION OR AWARD. EACH PARTY HERETO EXPRESSLY WAIVES ANY AND ALL RIGHTS TO BRING ANY SUIT, ACTION, OR OTHER PROCEEDING IN OR BEFORE ANY COURT OR TRIBUNAL OTHER THAN COURTS OF THE STATE OF TEXAS, COUNTY OF COMAL, AND COVENANTS THAT IT SHALL NOT SEEK IN ANY MANNER TO PROSECUTE OR DEFEND ANY DISPUTE OTHER THAN AS SET FORTH IN THIS ARTICLE XVI OR TO CHALLENGE OR SET ASIDE ANY DECISION, AWARD, OR JUDGMENT OBTAINED IN ACCORDANCE WITH THE PROVISIONS HEREOF. EACH OF THE PARTIES HERETO HEREBY EXPRESSLY WAIVES ANY AND ALL OBJECTIONS IT MAY HAVE TO VENUE, INCLUDING, WITHOUT LIMITATION, THE INCONVENIENCE OF SUCH FORUM, IN ANY OF SUCH COURTS.

**XVI. JURY TRIAL WAIVER.** THE PARTIES HEREBY UNCONDITIONALLY WAIVE THEIR RIGHT TO A JURY TRIAL OF ANY AND ALL CLAIMS OR CAUSES OF ACTION ARISING FROM OR RELATING TO THEIR RELATIONSHIP. THE PARTIES ACKNOWLEDGE THAT A RIGHT TO A JURY IS A CONSTITUTIONAL RIGHT, THAT THEY HAVE HAD AN OPPORTUNITY TO CONSULT WITH INDEPENDENT COUNSEL, AND THAT THIS JURY WAIVER HAS BEEN ENTERED INTO KNOWINGLY AND VOLUNTARILY BY ALL PARTIES TO THIS AGREEMENT. IN THE EVENT OF LITIGATION, THIS AGREEMENT MAY BE FILED AS A WRITTEN CONSENT TO A TRIAL BY THE COURT.

Approved by Contractor:

MP#0001708

CHRISTOPHER RYAN SEIDENSTICKER

Approved by Client:

**XVII. Reservation of Rights.** Contractor reserves all rights not specifically granted herein.

**XVIII. Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original but all of which together will constitute one and the same instrument.

**XIX. Counsel.** Contractor has previously recommended that Client engage counsel to assist him/her/it in reviewing this Agreement and all other matters relating to it. Contractor and Client shall each bear his/her/its own costs and expenses in connection with the negotiation and documentation of this Agreement.

**XX. Entire Agreement:** This agreement contains the entire agreement of the parties, and there are no promises or conditions in any other agreement, oral or written. The Parties expressly disclaim reliance on any prior statements, oral or written, by either party not expressly provided for herein.

Client:

Contractor:

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

September 27, 2018

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

RE- SEPTIC DESIGN  
2215 SAN JOSE WAY  
CORDOVA BEND AT CANYON LAKE, UNIT 1, LOT 69  
CANYON LAKE, TX 78133  
WING RESIDENCE

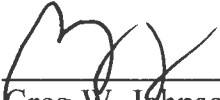
RECEIVED  
DEC 06 2018  
COUNTY ENGINEER

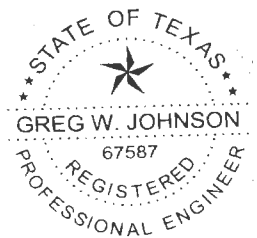
Ms. Brenda Ritzen/Sandra Hernandez,

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

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

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

 09/27/18  
\_\_\_\_\_  
Greg W. Johnson, P.E. No. 67587 / F#2585  
170 Hollow Oak  
New Braunfels, Texas 78132 - 830/905-2778





# ON-SITE SEWERAGE FACILITY SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed: September 26, 2018

Site Location: CORDOVA BEND at CANYON LAKE, UNIT 1, LOT 69

Proposed Excavation Depth: N/A

RECEIVED  
DEC 06 2018

**Requirements:**

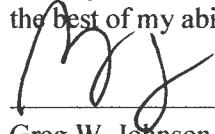
At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area.  
Locations of soil boring or dug pits must be shown on the site drawing.  
For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.  
Describe each soil horizon and identify any restrictive features on the form. Indicate depths where features appear.

COUNTY ENGINEER

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

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

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



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

09/26/18  
Date

**FIRM #2585**

MAXX AIR M-600  
AEROBIC TREATMENT  
PLANT

SLEEVE SEPTIC LINE WITH  
SCH-40 WITHIN 5' AND UNDER  
DRIVEWAY AND DUE TO THE  
PROXIMITY FOUNDATION.

LOT 69

RECEIVED

DEC 06 2018

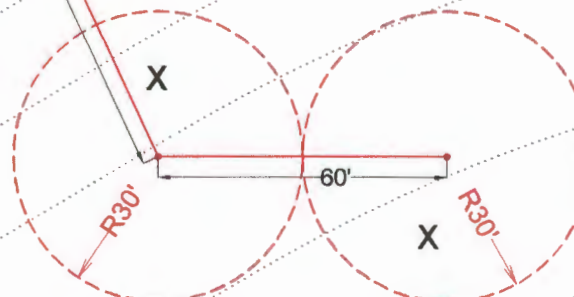
COUNTY ENGINEER

52'  
5'  
GARAGE with  
BATHROOM  
(20 GPD)

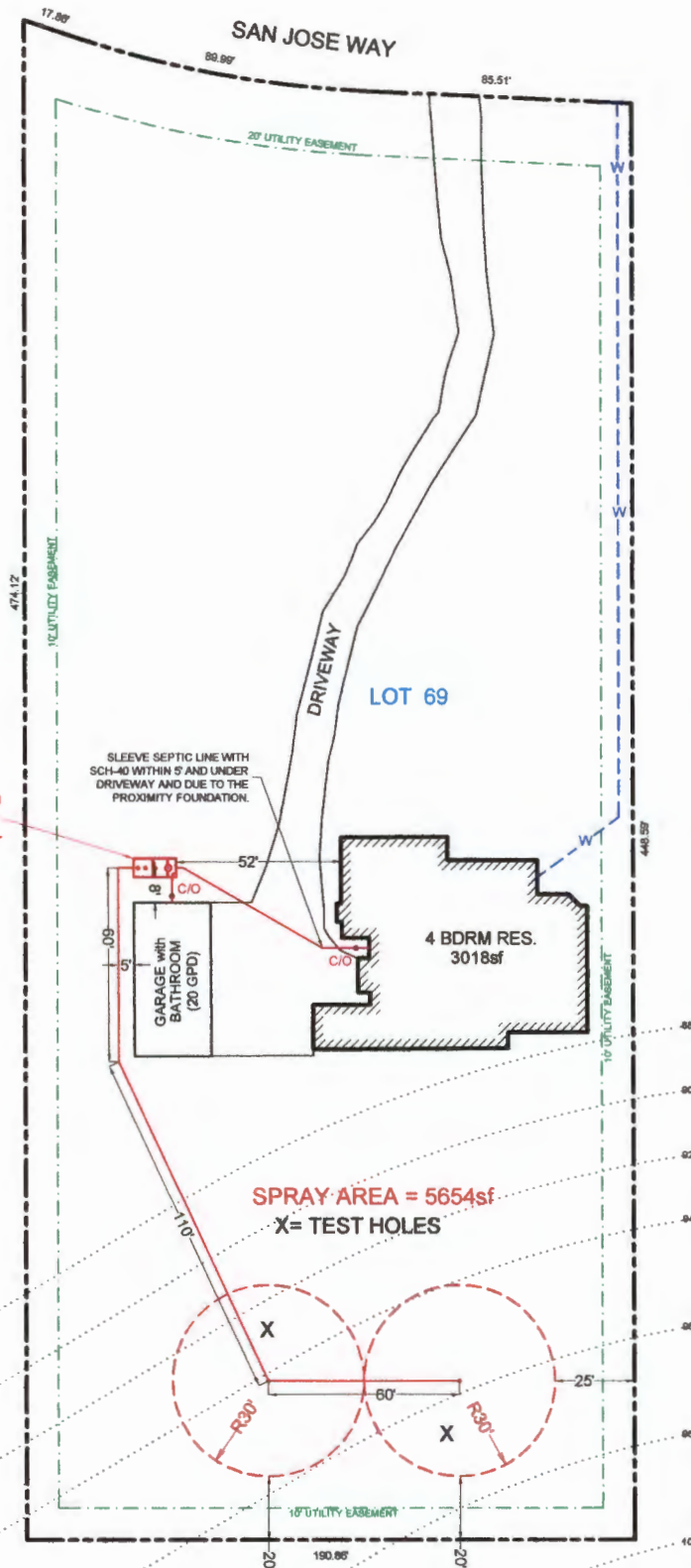
4 BDRM RES.  
3018sf

SPRAY AREA = 5654sf

X= TEST HOLES



OWNER: MICHAEL P. & SANDRA J. WING		DRAWN BY: EJS III	
STREET ADDRESS: 2215 SAN JOSE WAY			
LEGAL DESC: CORDOVA BEND at CANYON LAKE	UNIT/SECTION/PHASE: 1	BLOCK: 1	LOT: 69
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=40'	DATE: 9/27/2018	REVISED:



RECEIVED

DEC 06 2018

COUNTY ENGINEER



OWNER: MICHAEL P. & SANDRA J. WING		DRAWN BY: EJS III	
STREET ADDRESS: 2215 SAN JOSE WAY			
LEGAL DESC: CORDOVA BEND at CANYON LAKE	UNIT/SECTION/PHASE: 1	BLOCK:	LOT: 69
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=60'	DATE: 9/27/2018	REVISED:



## TANK NOTES:

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

Tightlines to the tank shall be SCH-40 PVC.

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

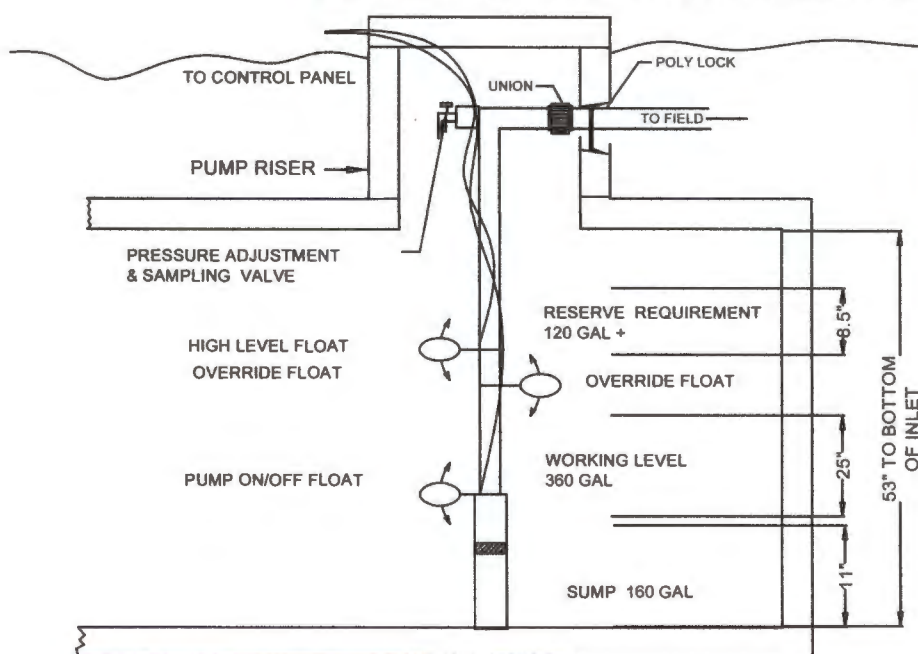
A minimum of 4" of sand, sandy loam, clay loam free of rock shall be placed under and around tanks

RECEIVED

DEC 06 2018

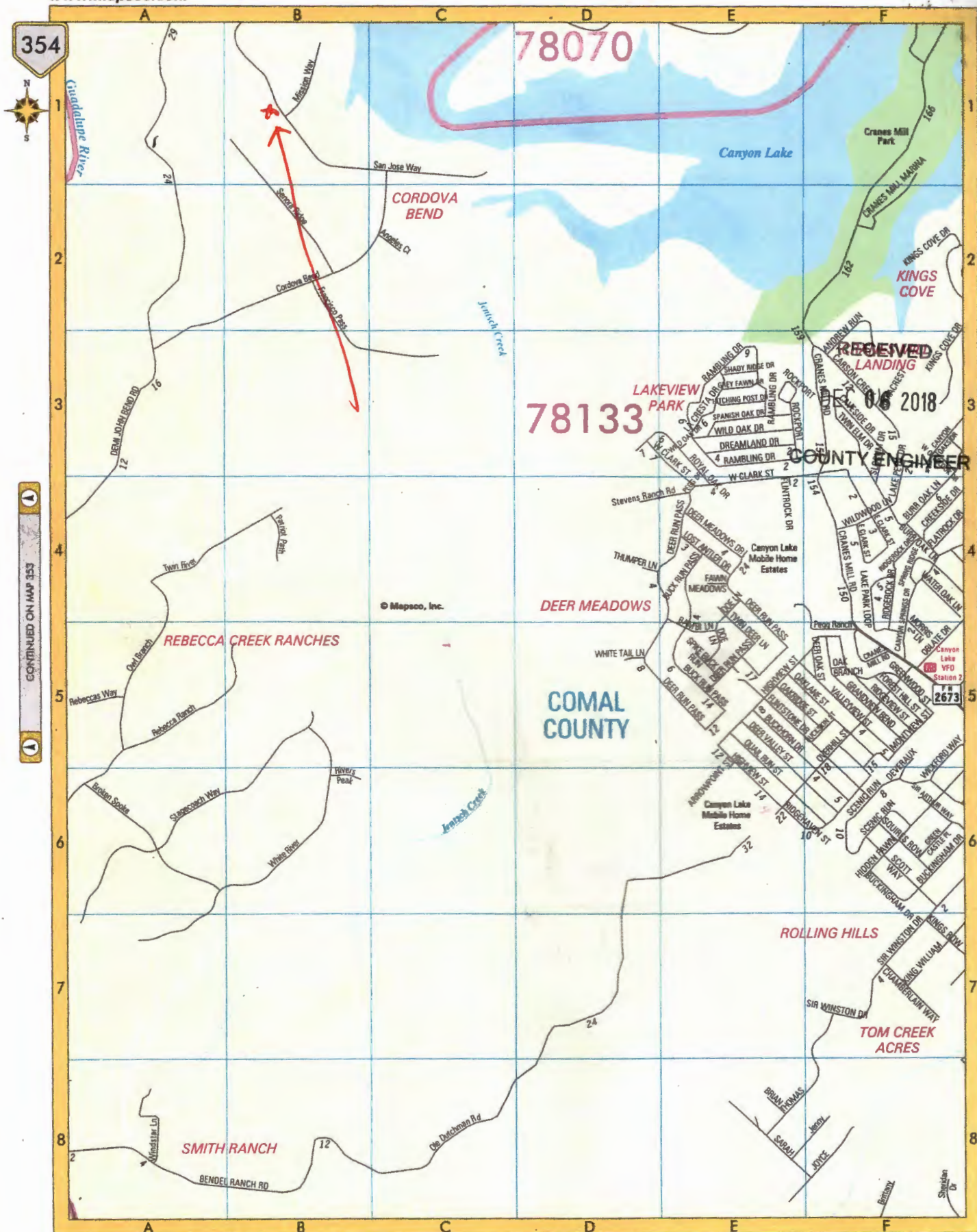
COUNTY ENGINEER

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



09/27/18

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



CONTINUED ON MAP 333


**Ritzen, Brenda**

---

**From:** Ritzen, Brenda  
**Sent:** Monday, December 17, 2018 3:37 PM  
**To:** 'Greg Johnson'  
**Subject:** Permit 108447  
**Attachments:** Pages from 108447.pdf

Greg,

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

- 1  Revise the attached pages of the permit application to include the garage.

Thank you,

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



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

Permit # 108447

# VOID

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

**Method:** ☐ Mail ☒ Email

Acreage/Legal

Street Name/Address	2215 SAN JOSE WAY	City	CANYON LAKE	Zip	78133
---------------------	-------------------	------	-------------	-----	-------

## RECEIVED

DEC 06 2018

Indicate Sq Ft of Living Area 3018

COUNTY ENGINEER

# VOID

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

**Miscellaneous**

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

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

- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Signature of Owner Sandra Glen

11/30/2018  
Date

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

**VOID**

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

Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) MAXX AIR M600 Absorption/Application Area (Sq Ft) 5654Gallons Per Day (As Per TCEQ Table III) 300

(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 is approved by the appropriate regional office.)

**VOID****RECEIVED**Is the property located over the Edwards Contributing Zone? ☒ Yes ☐ No**DEC 06 2018**Is there an existing TCEQ approval CZP for the property? ☒ Yes ☐ No

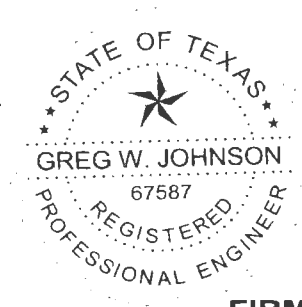
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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

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

Is this property within an incorporated city? ☐ Yes ☒ No

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

**FIRM #2585**

By signing this application, I certify that:

- The information provided above is true and correct to the best of my knowledge.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable

Signature of Designer

September 27, 2018

Date

→ New Br. Title Co.  
G.F. # 075674 NBT %

Doc# 200706026205

4  
T  
①2

RECEIVED  
DEC 06 2018  
COUNTY ENGINEER

Notice of confidentiality rights: If you are a natural person, you may remove or strike any or all 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 WITH VENDOR'S LIEN IN FAVOR OF THIRD PARTY FROM CORDOVA BEND, LTD. TO MICHAEL P. WING AND SANDRA J. WING.

THE STATE OF TEXAS                   \*  
COUNTY OF COMAL                   \*                   KNOW ALL MEN BY THESE PRESENTS:

That CORDOVA BEND, LTD., a Texas Limited Partnership, acting herein by and through, CORDOVA BEND GP, LLC, a Texas Limited Liability Company, its General Partner, acting herein through the undersigned authorized Manager, GARY V. WOODS, of 755 E. Mulberry Ave., Suite 600, San Antonio, Bexar County, Texas 78212, hereinafter called Grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other valuable consideration to it in hand paid by MICHAEL P. WING, and wife, SANDRA J. WING, of 19600 Greenview Place, Tinley Park, IL 60487, hereinafter called Grantee, receipt of which is hereby acknowledged and confessed; and the further consideration of the execution and delivery by the said Grantee of one certain promissory note of even date herewith in the principal sum of NINETY ONE THOUSAND AND NO/100 DOLLARS (\$91,000.00), payable to the order of BANK OF AMERICA, N.A., it's successors and assigns, 1400 Best Plaza Drive, Richmond, VA 23227, hereinafter called Mortgagee, said note being payable in installments as in said note contained and bearing interest at the rate therein specified and providing for attorney's fees and acceleration of maturity at the rate and in the events therein set forth

and payment of said note being secured by vendor's lien and superior title retained herein in favor of said Mortgagee, and by Deed of Trust of even date herewith from Grantee to PRLAP, INC., Trustee, to which reference is hereby made for all purposes; and,

WHEREAS, Mortgagee has, at the special instance and request of said Grantee, paid to Grantor herein NINETY ONE THOUSAND AND NO/100 DOLLARS (\$91,000.00) of the purchase money for the property hereinafter described, as represented by the above described note, the vendor's lien against said property securing the payment of said note, is without recourse upon Grantor herein, hereby assigned, transferred and delivered to Mortgagee, the Grantor hereby conveying to said Mortgagee the said superior title to said property, and subrogating the said Mortgagee unto all the rights and remedies of Grantor in the premises by virtue of said note and liens, has GRANTED, SOLD and CONVEYED, and by these presents does GRANT, SELL and CONVEY, unto the said Grantee, the following described property, to-wit:

Lot 69, CORDOVA BEND AT CANYON LAKE, UNIT ONE, according to plat recorded under Clerk's Doc# 200606023875, in the Official Public Records of Comal County, Texas.

TO HAVE AND TO HOLD the above described premises, together with all and singular the rights and appurtenances thereto in anywise belonging, unto the said Grantee, Grantee's heirs and assigns forever and Grantor does hereby bind itself, its successors and assigns to WARRANT AND FOREVER DEFEND all and singular the said premises unto the said Grantee, Grantee's heirs and assigns, against every person

RECEIVED  
DEC 06 2018  
COUNTY ENGINEER

whomsoever lawfully claiming or to claim the same or any part thereof, by, through or under Grantor, but not otherwise. Taxes for the current year have been prorated as of the date of closing.

THIS CONVEYANCE IS MADE AND ACCEPTED SUBJECT to taxes for the current year and all restrictions, covenants, conditions, easements, reservations and other instruments that affect the property and to all zoning laws, regulations, outstanding mineral interests and ordinances of municipal and/or other governmental authorities that affect the property.

But it is expressly agreed and stipulated that the vendor's lien, as well as superior title in and to said property, is retained in favor of the payee in said note against the above described property, premises and improvements, until said note, and all interest thereon is fully paid according to the face and tenor, effect and reading thereof, when this Deed shall become absolute.

EXECUTED on the date of the acknowledgment, but EFFECTIVE as of the 5<sup>th</sup> day of June, 2007.

CORDOVA BEND, LTD., a Texas  
Limited Partnership by CORDOVA  
BEND GP, LLC, a Texas Limited  
Liability Company, General Partner

By: Gary V. Woods  
GARY V. WOODS, Manager

RECEIVED  
DEC 06 2018  
COUNTY ENGINEER

THE STATE OF TEXAS •  
COUNTY OF BEXAR •

This instrument was acknowledged before me, on this the 5 day of June, 2007, by GARY V. WOODS, Manager of CORDOVA BEND GP, LLC, a Texas Limited Liability Company, General Partner of CORDOVA BEND, LTD., a Texas Limited Partnership, in the capacity therein stated, on behalf of said company.



AFTER RECORDING RETURN TO:  
NEW BRAUNFELS TITLE COMPANY  
GF#075674NBT

Margie Fernandez  
NOTARY PUBLIC, STATE OF TEXAS  
Notary's Printed Name:  
Margie Fernandez  
My Commission Expires: 10/02/2007

PREPARED IN THE LAW OFFICE OF:  
BOB R. KIESLING, P.C.  
P. O. Box 311686  
New Braunfels, TX 78131-1686

RECEIVED  
DEC 06 2018  
COUNTY ENGINEER

Doc# 200706026205  
8 Pages 4  
06/21/2007 3:31PM  
Official Records of  
COMAL COUNTY  
JOY STREATER  
COUNTY CLERK  
Fees \$28.00

A circular stamp with a star in the center, followed by the handwritten signature "Joy Streater".

Doc# 200706026205



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

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

Permit #: 108447

To: Paul Swoyer Septics, LLC  
2215 San Jose Way  
Canyon Lake, TX 78133

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

Site: 2215 San Jose Way, Canyon Lake  
Agency: Comal County  
County:  
Subdivision: Cordova Bend at Canyon Lake

Installed:  
Phone:  
Cell  
Work

Contract: 2/21/2019 - 2/21/2022  
Inspections per year: 3  
Service Due: 6/21/2019  
Alt Phone:  
Warranty Ending:

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

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

1 18✓  
2 0✓  
3 0✓

Test Results and observations: (As Required)

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

Repairs made: Y / N

Repairs and Comments: \_\_\_\_\_  
\_\_\_\_\_

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

29.891154✓  
98.327654✓

Area: / 0  
GPS

ID = 814

Printed 7/3/2019

2215 San Jose Way, Canyon Lake



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

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

Permit #: 108447

To: Home Owner  
2215 San Jose Way  
Canyon Lake, TX 78133

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

Site 2215 San Jose Way, Canyon Lake  
Agency: Comal County  
County  
Subdivision: Cordova Bend at Canyon Lake

Installed  
Phone:  
Cell:  
Work:

Contract: 2/21/2019 - 2/21/2022  
Inspections per year: 3  
Service Due: 10/21/2019  
Alt Phone:  
Warranty Ending:

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

Item	Operational	Inoperative	N/A
Aerator:	_____	_____	_____
Irrigation pump:	_____	_____	_____
Air compressor:	_____	_____	_____
Disinfection device:	_____	_____	_____
Chlorine supply:	_____	_____	_____
Spray field vegetation:	_____	_____	_____
Sprinkler / Drip backwash:	_____	_____	_____
Photocell Test:	_____	_____	_____
Autodialer:	_____	_____	_____
Water Meter Reading:	_____ CFM:	_____ PSI:	_____

Test Results and observations: (As Required)

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

Repairs made: Y / N

Repairs and Comments:

NO leaks code late code: 6985  
NO backflow code

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

Area: / 0  
GPS: 29.891154 -98.3276 ID = 814

Printed 10/21/2019

2215 San Jose Way, Canyon Lake

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

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

**To: Mike Wang**  
**2215 San Jose Way**  
**Canyon Lake, TX 78133**

Printed: 10/25/2019  
Site: 2215 San Jose Way  
Canyon Lake, TX 78133  
(830) 730-0927

---

Permit #: <b>108447</b>	Customer ID: 814
Agency: Comal County	Contract Dates: 2/21/2019 - 2/21/2022
County:	Scheduled Date: 10/21/2019
Mfg / Brand: - MAXX AIR	Inspection: 2 of 9
Treatment Type: Aerobic	
Disposal: Surface Application	GPS Coordinates - Latitude: 29.891154 Longitude: -98.327654

---

**Service Type: Scheduled Inspection**

☒ This counts as a type of "Scheduled Inspection"

**Visit Date: 10/24/2019**

**Entered By: Noelle Sjodin**

**Method: Grab**

**Technician: Ryan Seidensticker**

**Maint. Provider: Ryan Seidensticker**

---

**Sludge Levels**

Filters: Operational  
Irrigation Pumps: Operational  
Disinfection Device: Operational  
Chlorine Supply: Operational  
Chlorine Residual: .19

For Tank 1: 13"  
For Tank 2: 0"  
For Tank 3: 8-10"

**Air Filter: Good**

**Tank Lid / Riser: Secured**

**Sprinkler Drip Backwash: Good**

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

Color: Good  
Odor: Good

**Alarm: Operational**

**Comments**

☒ **Service Completed**

Scum on pretreatment: 1/4" - Sprinklers have low pressure. Pump keeps getting clogged and is slowly draining - Highly recommend pump tank be pumped out - Please contact us after pumping is complete so we can send our technician back out to evaluate - Technician Secured the Tank Lid and/or Riser prior to leaving location.

Insp ID #: 2484

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

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

License #: MP0001708

License #: MP0001708

Expires: 9/1/2023

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

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

Permit #: 108447

To: Mike Wing  
2215 San Jose Way  
Canyon Lake, TX 78133

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

Site: 2215 San Jose Way, Canyon Lake  
Agency: Comal County  
County:  
Subdivision: Cordova Bend at Canyon Lake

Installed:  
Phone: (830) 730-0927  
Cell:  
Work:

Contract: 2/21/2019 - 2/21/2022  
Inspections per year: 3  
Service Due: 2/21/2020  
Alt Phone:  
Warranty Ending:

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

Item	Operational	Inoperative	N/A
Aerator:	_____	_____	_____ 1
Irrigation pump:	_____	_____	_____
Air compressor:	_____	_____	_____
Disinfection device:	_____	_____	_____
Chlorine supply:	_____	_____	_____
Spray field vegetation:	_____	_____	_____
Sprinkler / Drip backwash:	_____	_____	_____
Photocell Test:	_____	_____	_____
Autodialer:	_____	_____	_____
Water Meter Reading: _____ CFM: _____ PSI: _____	_____	_____	_____

1-24  
2-0  
3-0

Test Results and observations: (As Required)

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

Repairs made: Y / N

Repairs and Comments:

Sum 4"

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

Gate code: 6985

Area: / 0  
GPS: 29.891154 -98.3276 ID = 814

Printed: 2/21/2020

2215 San Jose Way, Canyon Lake

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

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

Permit #: 108447

To: Mike Wing  
2215 San Jose Way  
Canyon Lake, TX 78133

Site: 2215 San Jose Way, Canyon Lake  
Agency: Comal County  
County:  
Subdivision: Cordova Bend at Canyon Lake

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

Installed  
Phone: (830) 730-0927  
Cell:  
Work:

Contract: 2/21/2019 - 2/21/2022  
Inspections per year: 3  
Service Due: 6/21/2020  
Alt Phone  
Warranty Ending

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

Item	Operational	Inoperative	N/A	
Aerator:	<u>1</u>	<u>      </u>	<u>1</u>	1 = 19
Irrigation pump:	<u>1</u>	<u>      </u>	<u>      </u>	
Air compressor:	<u>1</u>	<u>      </u>	<u>      </u>	
Disinfection device:	<u>1</u>	<u>      </u>	<u>      </u>	2 = 11
Chlorine supply:	<u>1</u>	<u>      </u>	<u>      </u>	
Spray field vegetation:	<u>1</u>	<u>      </u>	<u>      </u>	
Sprinkler / Drip backwash:	<u>1</u>	<u>      </u>	<u>      </u>	
Photocell Test:	<u>      </u>	<u>      </u>	<u>1</u>	3 = 1
Autodialer:	<u>      </u>	<u>      </u>	<u>1</u>	
Water Meter Reading: _____ CFM: _____ PSI: _____				

Test Results and observations: (As Required)

Fecal Coliform: \_\_\_\_\_  
Chlorine Residual: 0.17  
Test Method: \_\_\_\_\_  
BOD: \_\_\_\_\_  
TSS: \_\_\_\_\_  
Commercial Lab: \_\_\_\_\_  
Date Submitted: \_\_\_\_\_

Repairs made: Y / N

Repairs and Comments:

SC 44-2

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

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

Gate code: 6985

Area: / 0  
GPS 29 891154 -98 3276 ID = 814

Printed: 6/25/2020

2215 San Jose Way, Canyon Lake

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

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

To: Mike Wing  
2215 San Jose Way  
Canyon Lake, TX 78133

Printed: 10/20/2020  
Site: 2215 San Jose Way  
Canyon Lake, TX 78133  
(830) 730-0927

Permit #: **108447**

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Cordova Bend at Canyon Lake

Customer ID: 814

Contract Dates: 2/21/2019 - 2/21/2022

Scheduled Date: 10/21/2020

Inspection 5 of 9

GPS Coordinates - Latitude: 29.891154 Longitude: -98.327654

**Service Type: Scheduled Inspection**

☒ This counts as a type of "Scheduled Inspection"

**Visit Date: 10/19/2020**

**Entered By: \_**

**Method: Grab**

**Technician: Ryan Seidensticker**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Filters: Operational**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: 0.7mg/L**

**Sludge Levels**

**For Tank 1: 20**

**For Tank 2: 10**

**For Tank 3: 1**

**Tank Lid / Riser: Secured**

**Sprinkler Drip Backwash: Good**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Color: Good**

**Odor: Good**

**Alarm: Operational**

**Comments**

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

☒ **Service Completed**

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

Insp ID #:6249

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

License Info: MP0001708 Expires:

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

License Info: MP0001708 Expires: 9/1/2023

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

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

**To: Mike Wing**  
**2215 San Jose Way**  
**Canyon Lake, TX 78133**

Printed: 3/4/2021  
Site: 2215 San Jose Way  
Canyon Lake, TX 78133  
(830) 730-0927

Permit #: **108447**

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Cordova Bend at Canyon Lake

Customer ID: 814

Contract Dates: 2/21/2019 - 2/21/2022

Scheduled Date 2/21/2021

Inspection 6 of 9

GPS Coordinates - Latitude: 29.891154 Longitude: -98.327654

**Service Type: Scheduled Inspection**

**Visit Date: 3/2/2021**

**Method: Grab**

**Technician: Ryan Seidensticker**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Filters: Operational**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: 0.15**

**Sludge Levels**

**For Tank 1: 28**

**For Tank 3: 2**

☒ This counts as a type of "Scheduled Inspection"

**Entered By: \_**

**Tank Lid / Riser: Secured**

**Sprinkler Drip Backwash: Good**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Color: Good**

**Odor: Good**

**Alarm: Operational**

**Comments**

Scum on pretreatment: 3" M.D - Technician Secured the Tank Lid and/or Riser prior to leaving location.

☒ **Service Completed**

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

Insp ID #: 8263

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

License Info: MP0001708 Expires:

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

License Info: MP0001708 Expires: 9/1/2023



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

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

To: Mike Wing  
2215 San Jose Way  
Canyon Lake, TX 78133

Printed: 6/10/2021  
Site: 2215 San Jose Way  
Canyon Lake, TX 78133  
(830) 730-0927

Permit #: **108447**

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Cordova Bend at Canyon Lake

Customer ID: 814

Contract Dates: 2/21/2019 - 2/21/2022

Scheduled Date: 6/21/2021

Inspection 7 of 9

GPS Coordinates - Latitude: 29.891154 Longitude: -98.327654

**Service Type: Scheduled Inspection**

**Visit Date: 6/9/2021**

**Method: Grab**

**Technician: Nick Zigalo**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Filters: Operational**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: 0.01**

**Sludge Levels**

**For Tank 1: 10**

**For Tank 2: 12**

☒ This counts as a type of "Scheduled Inspection"

**Entered By: \_**

**Tank Lid / Riser: Secured**

**Sprinkler Drip Backwash: Good**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Color: Good**

**Odor: Good**

**Alarm: Operational**

**Comments**

Scum on pretreatment:1" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

☒ **Service Completed**

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

Insp ID #: 10217

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

License Info: MP0001708 Expires:

License Info: MT0002016 Expires: 12/31/2023

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

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

**To: Mike Wing**  
**2215 San Jose Way**  
**Canyon Lake, TX 78133**

Printed: 10/25/2021  
Site: 2215 San Jose Way  
Canyon Lake, TX 78133  
(830) 730-0927

---

Permit #: <b>108447</b>	Customer ID: 814
Agency: Comal County	Contract Dates: 2/21/2019 - 2/21/2022
County:	Scheduled Date: 2/21/2022
Mfg / Brand: - MAXX AIR	Inspection 8 of 9
Treatment Type: Aerobic	
Disposal: Surface Application	
Sub: Cordova Bend at Canyon Lake	GPS Coordinates - Latitude: 29.891154 Longitude: -98.327654

---

**Service Type: Scheduled Inspection**

☒ This counts as a type of "Scheduled Inspection"

**Visit Date: 10/25/2021**

**Entered By: \_**

**Method: Grab**

☒ Copy emailed to Customer  
Customer Emailed: 10/25/2021

**Technician:** Not Assigned

**Maint. Provider:** Ryan Seidensticker

---

**Aerators:** Operational  
**Filters:** Operational  
**Irrigation Pumps:** Operational  
**Disinfection Device:** Operational  
**Chlorine Supply:** Operational  
**Chlorine Residual:** 0.1mg/L

**Sludge Levels**  
**For Tank 1: 5**

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

**Tank Lid / Riser:** Secured  
**Insp. Port / Plug:** Secured

**Alarm:** Operational

**Comments**

☒ **Service Completed**

Scum on pretreatment 3" - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. - Copy emailed to the customer on 10/25/2021.

Insp ID #:12487

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

License Info: MP0001708 Expires:



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

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

**To: Mike Wing**  
**2215 San Jose Way**  
**Canyon Lake, TX 78133**

Printed:10/20/2021  
Site: 2215 San Jose Way  
Canyon Lake, TX 78133  
(830) 730-0927

---

Permit #: <b>108447</b>	Customer ID: 814
Agency: Comal County	Contract Dates: 2/21/2019 - 2/21/2022
County:	Scheduled Date: 10/21/2021 Inspection 8 of 9
Mfg / Brand: - MAXX AIR	Sub: Cordova Bend at Canyon Lake
Treatment Type: Aerobic	
Disposal: Surface Application	GPS Coordinates - Latitude: 29.891154 Longitude: -98.327654

---

**Service Type: Scheduled Inspection**

☒ This counts as a type of "Scheduled Inspection"

**Visit Date: 10/20/2021**

**Entered By: \_**

**Method: Grab**

☒ Copy emailed to Customer  
Customer Emailed: 10/20/2021

**Technician:** Not Assigned

**Maint. Provider:** Ryan Seidensticker

---

**Chlorine Residual:** NA

**Comments**

☒ **Service Completed**

No access, dog in the yard. Please contact our office to set up a reinspection - Copy emailed to the customer on 10/20/2021.

Insp ID #:12474

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

License Info: MP0001708 Expires:

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

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

**To: Mike Wing**  
**2215 San Jose Way**  
**Canyon Lake, TX 78133**

Printed: 2/16/2022  
Site: 2215 San Jose Way  
Canyon Lake, TX 78133  
(830) 730-0927

---

Permit #: <b>108447</b>	Customer ID: 814
Agency: Comal County	Contract Dates: 2/21/2019 - 2/21/2022
County:	Scheduled Date: 2/21/2022
Mfg / Brand: - MAXX AIR	Inspection 9 of 9
Treatment Type: Aerobic	
Disposal: Surface Application	GPS Coordinates - Latitude: 29.891154 Longitude: -98.327654

---

**Service Type: Scheduled Inspection**

☒ This counts as a type of "Scheduled Inspection"

**Visit Date: 2/15/2022**

**Entered By: Michelle Irvin**

**Method: Grab**

**Technician: Michale Albers**

**Maint. Provider: Ryan Seidensticker**

---

**Aerators:** Operational  
**Filters:** Operational  
**Irrigation Pumps:** Operational  
**Disinfection Device:** Operational  
**Chlorine Supply:** Operational  
**Chlorine Residual:** .01

**Sludge Levels**  
**For Tank 1: 4**

**Tank Lid / Riser: Secured**

**Sprinkler Drip Backwash: Good**

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

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

**Alarm:** Operational

**Comments**

☒ **Service Completed**

Scum = 10" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

Insp ID #:15436

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

License Info: MP0001708 Expires:

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

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

Printed: 12/20/2022 Insp ID #: 24061

Permit #: **108447**

**To: Mike Wing**  
**2215 San Jose Way**  
**Canyon Lake, TX 78133**

Main Phone: (830) 730-0927

Work:

Cell Phone:

Alt Cell:

Customer ID: 814

Contract Dates: 8/22/2022 - 8/22/2023

Scheduled Date: 12/22/2022

Inspection 1 of 3

Installed: 2/21/2019

Warranty End: 2/21/2022

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Sub: Cordova Bend at Canyon Lake

Treatment Type: Aerobic

Disposal: Surface Application

GPS Coordinates: Latitude: 29.891154 Longitude: -98.327654

**Service Type: Scheduled Inspection**

**Visit Date: 12/19/2022**

**Method: Grab**

**Technician: Not Assigned**

**Maint. Provider: Ryan Seidensticker**

☒ This counts as a type of "Scheduled Inspection"

**Entered By: Nicole Loria**

☒ Copy emailed to Customer

Customer Emailed: 12/20/2022

**Aerators: Operational**

**Filters: Operational**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: .16**

**Sludge Levels**

**For Tank 1: 4**

**For Tank 2: N/A**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Tank Lid / Riser: Secured**

**Insp. Port / Plug: Secured**

**Alarm: Operational**

**Comments**

☒ **Service Completed**

- Scum on pretreatment 6 - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. - Copy emailed to the customer on 12/20/2022.

Site: 2215 San Jose Way, Canyon Lake, TX 78133

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

License Info: MP0001708 Expires:

- Scum on pretreatment 15 - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. - Copy emailed to the customer on 8/30/2023.

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

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

Printed: 4/27/2023

Insp ID #: 27867

Permit #: **108447**

**To: Mike Wing**  
**2215 San Jose Way**  
**Canyon Lake, TX 78133**

Main Phone: (830) 730-0927

Work:

Cell Phone:

Alt Cell:

Customer ID: 814

Contract Dates: 8/22/2022 - 8/22/2023

Scheduled Date: 4/22/2023

Inspection 2 of 3

Installed: 2/21/2019

Warranty End: 2/21/2022

Agency: Comal County

County: Comal County

Mfg / Brand: - MAXX AIR

Sub: Cordova Bend at Canyon Lake

Treatment Type: Aerobic

Disposal: Surface Application

GPS Coordinates: Latitude: 29.891154 Longitude: -98.327654

**Service Type: Scheduled Inspection**

☒ This counts as a type of "Scheduled Inspection"

**Entered By: Julie Feibelman**

**Visit Date: 4/26/2023**

**Method: Grab**

**Technician: Carlos Barrera**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Filters: Operational**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: .08**

**Sludge Levels**

**For Tank 1: 12**

**For Tank 2: NA**

**For Tank 3: 30**

**For Tank 4: 5**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Tank Lid / Riser: Secured**

**Insp. Port / Plug: Secured**

**Alarm: Operational**

**Comments**

☒ **Service Completed**

- Scum on pretreatment-12 - Checked floats, sprayers, chlorine & timer. - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving.

Site: 2215 San Jose Way, Canyon Lake, TX 78133

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

License Info: MP0001708 Expires: