

Comal County office of comal county engineer

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date:	04/25/2019		Permit Number:	108534
Location Description:	1330 ESTATE NEW BRAUNI	DR FELS, TX 78132		
	Subdivision: Unit: Lot: Block: Acreage:	Summit Extension 6 314		
Type of System:	Aerobic Surface Irrigation	on		
Issued to:	Hill Country Sk	xy Design Group, 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.

ENVIRONMENTAL HEALTH INSPECTOR



Licensing Authority Comal County Environmental Health

ENVIRONMENTAL HEALTH COORDINATOR

			nvironmental He pection Sheet	alth		
Installer Name: MICHINU 1st Inspection Date: 3. Inspector Name: And Ve	20.19		OSSF Installer # OSOC	28417 Ind Inspection Date: Inspector Name:		
Permit#: 108534		Address: 1330 €	estate Dr.			
Description SITE AND SOIL CONDITIONS & SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials	Anwser	Citations 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)	Notes	Istin	nsp. 2nd Insj	p. 3rd Ins
SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	/	285.91(10) 285.30(b)(4) 285.31(d)				
SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	/	285.32(a)(1)		/	/	
SEWER PIPE Slope from the Sewer to the Tank at least 1/8 inch Per Foot	/	285.32(a)(3)		/		
SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)	/	285.32(a)(5)		/	/	
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)(F) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C)(ii) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E)(ii)(ii) 285.32(b)(1)(E)(ii)(ii) 285.32(b)(1)(E)(ii)(ii)				
PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				
3.20.19 Tank sct.len JO leaks.com male or cover arras	rel.	operational	÷.	N.	R5.	19

5 3 7

No.	Description	Anwser	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If SingleTank, 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)(1) 285.32(b)(1)(E)(ii)(1) 285.32(b)(1)(E)(ii) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C)(ii) 285.32(b)(1)(A) 285.32(b)(1)(E)(iv)				
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
10	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)				
11	SEPTIC TANK Tank Volume Installed						
12	PUMP TANK Volume Installed						
13	AEROBIC TREATMENT UNIT Size Installed	1		(200)	~		191
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	/		Monator			
	DISPOSAL SYSTEM Absorptive		285.33(a)(1) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
16	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
17	DISPOSAL SYSTEM Evapo- transpirative		285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

No.	Description	Anwser	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)				
	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				
22	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
23	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						
	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
27	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
28	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
29	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)				
30	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)				

No. Description	Anwser	Citations	Notes	1st insp.	2nd Insp.	3rd Insp.
EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart		285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3)(B) 285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)				
AEROBIC TREATMENT UNIT IS Aerobic Unit Installed According to Approved Guidelines.	/	285.32(c)(1)		(
AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions	1			(
AEROBIC TREATMENT UNIT Chlorinator Properly Installed with 35 Chlorine Tablets in Place.	/			/		
PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on 36 Separate Circuit From Pump						
PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions			-			
37 PUMP TANK Secondary restraint 38 system provided						
PUMP TANK Electrical Connections in Approved Junction 39 Boxes / Wiring Buried						

No	Description	Anwser	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	/	285.33(d)(2)(G)(iii)(II)285.3 3(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)		/		
40	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)	Servis.	/	//	
42	APPLICATION AREA Area Installed	1			all	V	
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer	Sector 1					
45	PUMP TANK Type/Size of Pump Installed						

		Comal County E OSSF Ins	pection Sheet				
Installer Name: MCCINC	Cus	stro	OSSF Installer #:	002841	Ŧ		
1st Inspection Date: 3.		2nd Inspection Dat			Date:		
Inspector Name: and re	ng	Inspector Name:	~	Inspector	Name:		
Permit#: 108534		Address: 1330 €	estate Dr.				
No. Description SITE AND SOIL CONDITIONS &	Anwser	Citations 285.31(a)	Notes		1st Insp.	2nd Insp.	3rd Insp.
SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials		285.30(b)(1)(A)(iv) 285.30(b)(1)(A)(iv) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(ii)			/		
SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	/	285.91(10) 285.30(b)(4) 285.31(d)					
SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	/	285.32(a)(1)			/		
SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	/	285.32(a)(3)					
SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)	/	285.32(a)(5)					
S 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)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C) 285.32(b)(1)(E) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II)					
6 PRETREATMENT Grease Interceptors if required for 7 commercial		285.34(d)					

3.20.19 Tank set. level. operational NO leaks. cover lines : think. ternale or cover lines : think. ternale or cover large rocks in spray

Description	Anwser	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
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)				
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PUMP TANK Volume Installed						
AEROBIC TREATMENT UNIT Size Installed	1		(100)	~		
AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model 5 Number			Nonvater			
DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
6 DISPOSAL SYSTEM Leaching Chamber 7		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
DISPOSAL SYSTEM Evapo- transpirative		285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

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	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions	/			(
	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.	/			/		
	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
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38	PUMP TANK Secondary restraint system provided PUMP TANK Electrical	1					
39	Connections in Approved Junction Boxes / Wiring Buried						

No.	Description	Anwser	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?		285.33(d)(2)(G)(iii)(II)285.3 3(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)				
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41	APPLICATION AREA LOW Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed		285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)	Servis.			
	APPLICATION AREA Area Installed						
42							
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
43	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:	108534
Issued This Date:	01/02/2019
This permit is hereby given to:	Hill Country Sky Design Group, LLC

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

1330 ESTATE DR NEW BRAUNFELS, TX 78132

Subdivision:Summit ExtensionUnit:6Lot:314Block: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 County requirements.

Call (830) 608-2090 to schedule inspections.

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

Date		Permit #	108534
Owner Name Hill Country Sky Design Group, LLC	Agent Name	Douglas R. Dowlea	rm, R.S.
Mailing Address 2068 Rebecca Ridge	Agent Address	703 Oak Drive	
City. State, Zip Canyon Lake, TX 78133	City, State, Zip	Bianco, TX 78608	
Phone # 830,515.8711	Phone #	210.240.2101	
Email hillcountryskydesign@gmail.com	Email	txseptic@gmail.com	m
All correspondence should be sent to: Owner A	gent 🔀 Both	Method:	Mail 🔄 Email
Subdivision Name Summit Extension Phase 6	Unit	Lot 314	Block
Acreage/Legal 1.033	Hoan I'm 19		
Street Name/Address 1330 Estate Drive	City New	Braunfels	Zip 78132
Type of Development:			
Single Family Residential		RECE	EIVED
Type of Construction (House, Mobile, RV, Etc.) House		DEC 81	2010
Number of Bedrooms 3			2010
Indicate Sq Ft of Living Area 1933		COUNTY EN	NG
Commercial or Institutional Facility			
(Planning materials must show adequate land area for doubling the	required land neede	d for treatment units a	and disposal area)
Type of Facility			
Offices, Factories, Churches, Schools, Parks, Etc Indicate	Number Of Occu	pants	
Restaurants, Lounges, Theaters - Indicate Number of Seats			
Hotel, Motel, Hospital, Nursing Home - Indicate Number of			
Travel Trailer/RV Parks - Indicate Number of Spaces			
Miscellaneous			
Estimated Cost of Construction: \$220,000 (Structure) Is any portion of the proposed OSSF located in the United Sta		Complete f Engineers (USAC	E) flowage easement?
Yes X No (If yes, owner must provide approval from USACE for	or proposed OSSF imp	provements within the U	SACE flowage easement)
Source of Water 🐼 Public 🔲 Private Well			
Are Water Saving Devices Being Utilized Within the Residence?	Yes IN	lo	
By signing this application, I certify that: - The completed application and all additional information submitted do facts. - Authorization is hereby given to the permitting authority and designate site/soil evaluation and inspection of private sewage facilities I understand that a permit of authorization to construct will not be issue by the Comal County Flood Damage Prevention Order. I affirmatively consent to the online posting/public release of my e-ma HIL Country Sky Design Group L Signature of Owner	ed agents to enter u red until the Floodpl il address associate j	pon the above descri ain Administrator has	ibed property for the purpose of a performed the reviews required
	Lais		Date

Revised July 2

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

Planning Materials & Site Evaluation as Required Completed B	y Douglas R. Dowlearn
System Description Aerobic with spray distribution	
Size of Septic System Required Based on Planning Materials &	Soil Evaluation
Tank Size(s) (Gallons) 600 GPD	Absorption/Application Area (Sq Ft) 3750 Required
Gallons Per Day (As Per TCEQ Table III) 240	RECEIVED
(Sites generating more than 5000 gallons per day are required to obtai	in a permit through TCEQ.)
is the property located over the Edwards Recharge Zone?	—
(If yes, the planning materials must be completed by a Registered San	itarian (R.S.) or Professional Engineer (P.E.)OUNTY ENGINEER
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 wit	h all provisions of the existing WPAP.)
If there is no existing WPAP, does the proposed development a	activity require a TCEQ approved WPAP? 🔲 Yes 😿 No
(If yes, the R.S. or P.E. shall certify that the OSSF design will comply we be issued for the proposed OSSF until the proposed WPAP has been a	with all provisions of the proposed WPAP. A Permit to Construct will not 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 wit	th all provisions of the existing CZP.)
If there is no existing CZP, does the proposed development act	ivity require a TCEQ approved CZP? 📋 Yes 😿 No
(If yes, the R.S. or P.E. shall certify that the OSSF design will comply v issued for the proposed OSSF until the CZP has been approved by the	with all provisions of the proposed CZP. A Permit to Construct will not be appropriate regional office.)
Is this property within an incorporated city? Yes No	
If yes, indicate the city:	

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.

2.5. Signature of Designer

12/12/18 Date

Page 2 of 2



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DEC 21 2018

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Babbie Keepp

AFFIDAVIT TO THE PUBLIC

THE COUNTY OF COMAL STATE OF TEXAS

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

According to Texas Commission on Environmental Quality Rules for On-Site Severage Facilitie (OSSF's), this document is filled in the Deed Records of Cornel County, Texas.

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on. Environmental Quality (commission) to regulate on-site sowage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 5.019, gives the commission primary responsibility for implementing the laws of the State of Texas and § 5.019. the Texas Water Code (TWC), § 5.012 and § 5.013, gives the commission primary responsionly 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 hotice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidevit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidevit 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. by the commission that the appropriate OSSF was installed.

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):

330 Estate Drive, New Brownhels Texas 78132 of 314 Summit Extension Is according to the so, of thet Phase 6 an

1)++1

addition

+0

or plat thereof recorded in Volume 9. The property is owned by (peser owner's full name): Country SKU Design Group LbC. 2068 Rebecca Ris a comal Cas 2 & Canyon Lake TX 7813 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 OBSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the Comat County Engineer's Office.

WITNESS BY HAND(S) ON THIS 20/8 DAYOF JARRETT WADE DAVID TWADDLE NOTARY PUBLIC STATE OF TEYAS MY COMM. EXP. 07/28/2020 Owner(s) algorithme(c) NOTARY ID 13075564-5 SWORN TO AND SUBSCRIBED BEFORE ME ON THIS DAYOF Verember ,20/8 Filed and Recorded Official Public Records Notary Public, State of Texas Bobbie Koepp. County Clerk Comal County, Texas streff Wader Notary's Printed Name: Ivid / weld he My Commission East July 1/26/2018 03:19:41 PM 70.70 AURA 1 Page(s) 201806045348

RECORDER'S MEMORANDUM THIS DOCUMENT WAS OF POOR QUALITY AT THE TIME OF RECORDING AND MAY NOT REPRODUCE

WASTEWATER TREATMENT FACILITYY MONITORING AGREEMENT

OUNTY ENGINEER Permit/License Number Customer Hill Country Design Group Site Address 1330 Estate Dr City New Browne 15 Zip (Y 78 132 **Regulatory Authority** Block Creek Aerobic Services, LLC 444 A Old Hwy #9 City New BrownfelszipTY Canyon Lake 78133 Mailing Address 2068 Rebenca Ardge Comfort, TX 78013 Off. (830) 995-3189 Map # County Lomal Fax. (830) 995-4051 Phone (830) 515-871 2 year contra SKY design @gmail.com year warranty on Parts Email hill cour -14

and Labor I. <u>General</u>: This Work for Hire Agreement (hereinafter referred to as "Agreement") is entered into by and between <u>H ill Country Design Group LLC</u> (hereinafter referred to as "Customer") and Block Creek Aerobic Services, LLC. By this agreement, Block Creek Aerobic Services, LLC and its employees (hereinafter inclusively referred to as "Contractor") agree to render services at the site address stated above, as described herein, and the Customer agrees to fulfill his/ber/their responsibilities, as described herein.

Issue date of License to Operate

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

III. Termination of Agreement:

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

IV. Services:

Contractor will:

a. Inspect and perform routine upkeep on the On-Site Sewage Facility (hereinafter referred to as OSSF) as recommended by the treatment system manufacturer, and required by state and/or local regulation, for a total of three visits to site per year. The list of items checked at each visit shall be the: control panel, Electrical circuits, timer, Aeration including compressor and diffusers, CFM/PSI measured, lids safety pans, pump, compressor, sludge levels, and anything else required as per the manufacturer.

b. Provide a written record of visits to the site by means of an inspection tag attached to or contained in the control panel.

c. Repair or replace, if Contractor has the necessary materials at site, any component of the OSSF found to be failing or inoperative during the course of a routine monitoring visit. If such services are not covered by warranty, and the service(s) cost less than \$100.00, Castomer hereby authorizes Contractor to perform the service(s) and bill Customer for said service(s). When service costs are greater than \$100.00, or if contractor does not have the necessary supplies at the site, Contractor will notify Customer of the required service(s) and the associated cost(s). Customer must notify Contractor of arrangements to affect repair of system with in two (2) business days after said notification.

d. Provide sample collection and laboratory testing of TSS and BOD on a yearly basis (commercial systems

only).

e. Forward copies of this Agreement and all reports to the regulatory agency and the Customer.

f. Visit site in response to Customer's request for unscheduled services within forty-eight (48) hours of the date of notification (weekends and holidays excluded) of said request. Unless otherwise covered by warranty, costs for such unscheduled responses will be billed to Customer.

V. Disinfection:

BS

DEC 21 2018

Customer's Initials Contractor's Initials

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

VI. Electronic Monitoring:

Electronic Monitoring is not included in this Agreement.

VII. Performance of Agreement:

COUNTY ENGINEER Commencement of performance by Contractor under this Agreement is contingent on the following conditions: a. If this is an initial Agreement (new installation):

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

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

VIII. Customer's Responsibilities:

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

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

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

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

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

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

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

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

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

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

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

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

IX. Access by Contractor:

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

X. Limit of Liability:

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

XI. Indemnification:

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

BS

Customer's Initials Contractor's Initials DEC 21 2018

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

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

XII. Severability:

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

XIII. Fee for Services:

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

XIV. Payment:

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

XV. Application or Transfer of payment:

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

XVL Entire Agreement:

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

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

Customer's Initials Contractor's Initials

Customer Signature Date

BS

OSSF SOIL EVALUATION REPORT INFORMATION

Date: 12/17/18 Applicant Information: Name: Hill Country Sky Design Group, LLC c/o Maria Oranday Address: 2068 Rebecca Ridge City, State & Zip Code: New Braunfels, TX 78132 Phone: 830.515.8711 Email: hillcountryskydesign@gmail.com hillcountryseptics@gmail.com Site Evaluator Information: Name: Douglas R. Dowlearn Company: D.A.D. Services, Inc. Address: 703 Oak Drive City, State & Zip: Blanco, TX 78606 Phone: (210)240-2101 Fax: (866)260-7687 Email: txseptic@gmail.com DEC 21 2018

COUNTY ENGINEER

Property Location: Lot: 314 Subdivision: Summit Extension Phase 6 Street/Road Address: 1330 Estate Drive City: New Braunfels Zip: 78132 Additional Info: Comal County/1.033 Acres Installer Information: Name: Company: Hill Country Septics Address: City, State & Zip: Phone: Fax:

Depth	Texture Class	Soil Texture	Structure (For Class III – blocky, platy or massive)	Drainage (Mottles/Water Table	Restrictive Horizon	Observation
Soil Boring #1 60"	III	0-12" Clay Loam 12"+ Limestone	Blocky	<30% Gravel	12"+ Limestone	None
Soil Boring #2		Same as above				

60"

DESIGN SPECIFICATIONS

Application Rate (RA): 0.064 OSSF is designed for: 3 BR (1933 Sq. Ft.) 240 Gallons per day required An aerobic treatment/spray disposal system is to be utilized based on the site evaluation. 3750 sq. ft. disposal area required 600 gallon/day aerobic tank required Calculations: Absorption Area: Q/RA= 240/0.064= 3750 Sq. Ft.

FEATURES OF SITE AREA

Presence of 100-year flood zone: NO Existing or proposed water well in nearby area: NO Presence of adjacent ponds, streams, water impoundments: NO Presence of upper water shed: NO Organized sewage service available to lot: NO

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability. The site evaluation and OSSF design are subject to approval by the TCEQ or the local authorized agent. The planning materials and the OSSF design should not be considered final until a permit to construct has been issued.

Site Evaluator: NAME: Douglas R. Dowlearn, R.S.

Don Ren Ducks.

Signature:

License No. OS9902 - Exp. 6/30/2020 TDH: #2432 - Exp. 2/28/2019

D.A.D SERVICES, INC. DOUG DOWLEARN 703 OAK DRIVE, BLANCO, TX 78606 Designed for: Hill Country Sky Design Group, LLC c/o Maria Orand ODUNTY ENGLICE

The installation site is on Lot 314 of the Summit Extension Phase 6 Subdivision in Comal County, TX. The proposed OSSF will treat the wastewater from a 3 Bedroom (1933 sq. ft.) residence. The proposed method of wastewater treatment is aerobic treatment with spray irrigation. This method was chosen because of unsuitable soil conditions.

PROPOSED SYSTEM:

A 4" PVC pipe will discharge from the residence to a pre-treatment tank, which flows into a 600 gpd aerobic treatment plant. The aerobic tank effluent flows to a 768 gallon storage/pump tank containing a liquid chlorinator and a single 20 gpm submersible pump. Distribution is through 2 K-Rain Gear Driven pop-up sprinklers, with low angle (13 degrees) spray nozzles spraying a radius of 35 feet at <40 psi. Each sprinkler will spray 180 degrees of arc. An audio and visual alarm monitoring both high water and aerator failure will be placed in a noticeable location.

DESIGN SPECIFICATIONS:

Daily Waste Flow: 240 gpd Application rate: 0.064 Application area required: 240/.064 = 3750 ft. sq. Application area utilized: 3846 sq. ft. Pump tank reserve capacity: 120 gal minimum

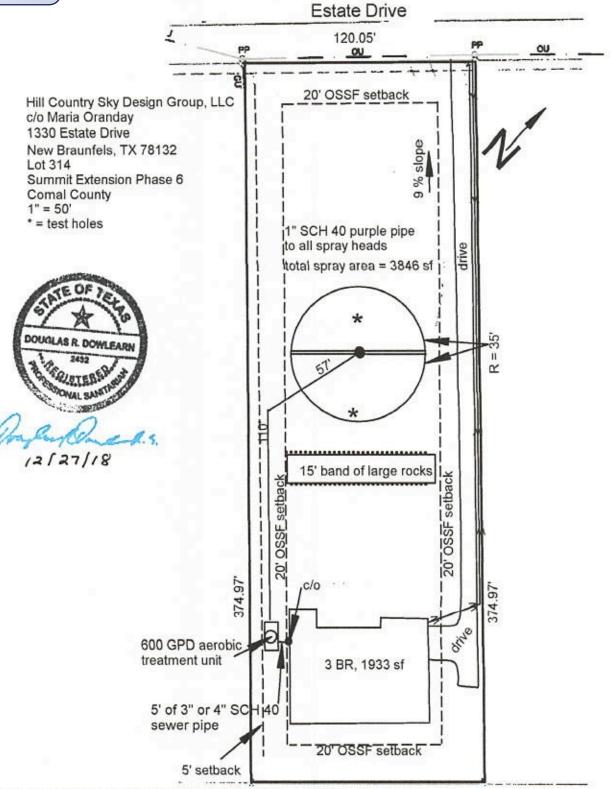


SYSTEM COMPONENTS:

SCH 40 PVC sewer line 1" purple PVC supply line 600 gpd aerobic treatment plant with manual or timed controls Liquid chlorinator 2 K-Rain Gear Driven Pop-up Sprinkler Pre-tank and 768 gallon pump tank

LANDSCAPING:

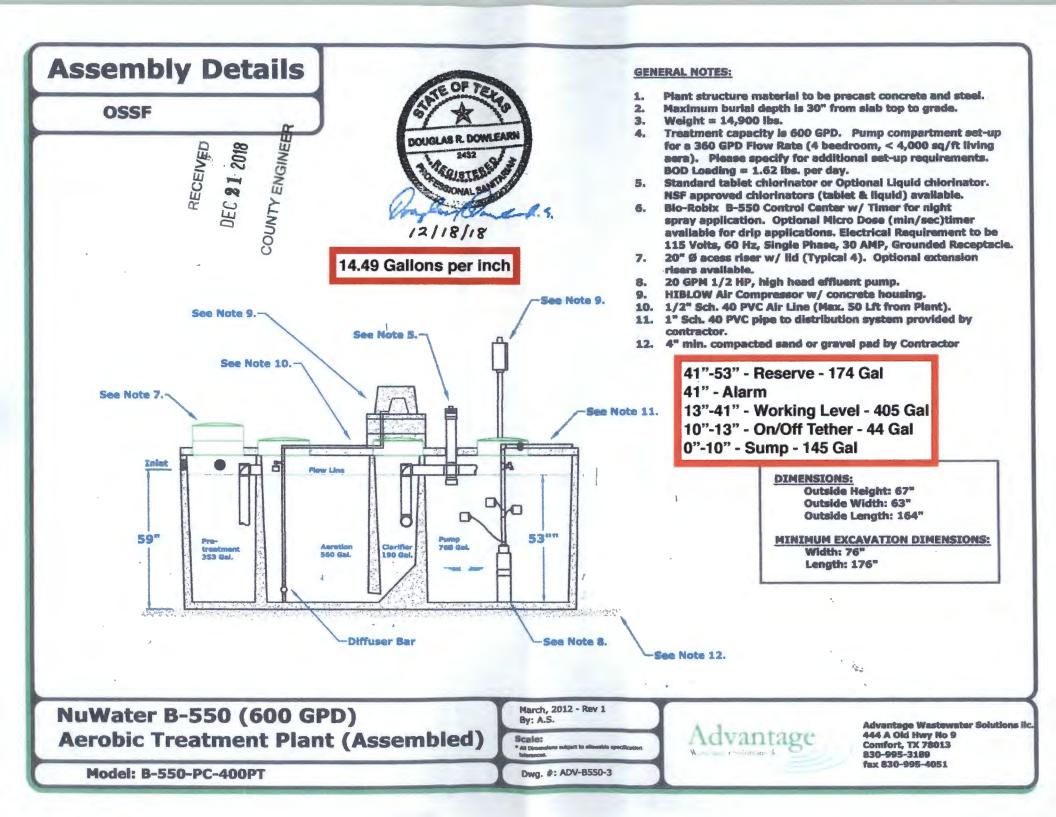
The native vegetation in the distribution area should consist of low level shrubs, plains grass, bluestem or bermuda. The entire area of the spray must be covered with a ground cover such as grass seed or sod prior to the final inspection. In the event the natural cover is disturbed, a suitable ground cover must be installed on all excavated areas.



Note: water line will be sleeved with SCH 40 under drive and 10' beyond to provide equivalent protection for OSSF setback requirements of TAC 285

Note: WPAP exemption 213.5 h(2) An individual land owner who seeks to construct his/her own single family residence or associated residential structures on the site is exempt from the Edwards Aquifer protection program application requirements under this section, provided that he/she does not exceed 20% impervious cover on the site.

Note: No recharge features were within 150' of the proposed OSSF



Hernandez, Sandra

From:	Hernandez, Sandra
Sent:	Thursday, December 27, 2018 12:52 PM
То:	'doug dowlearn'
Subject:	108534
Subject:	108534

RE: Summit Extension, Phase 6, Lot 314

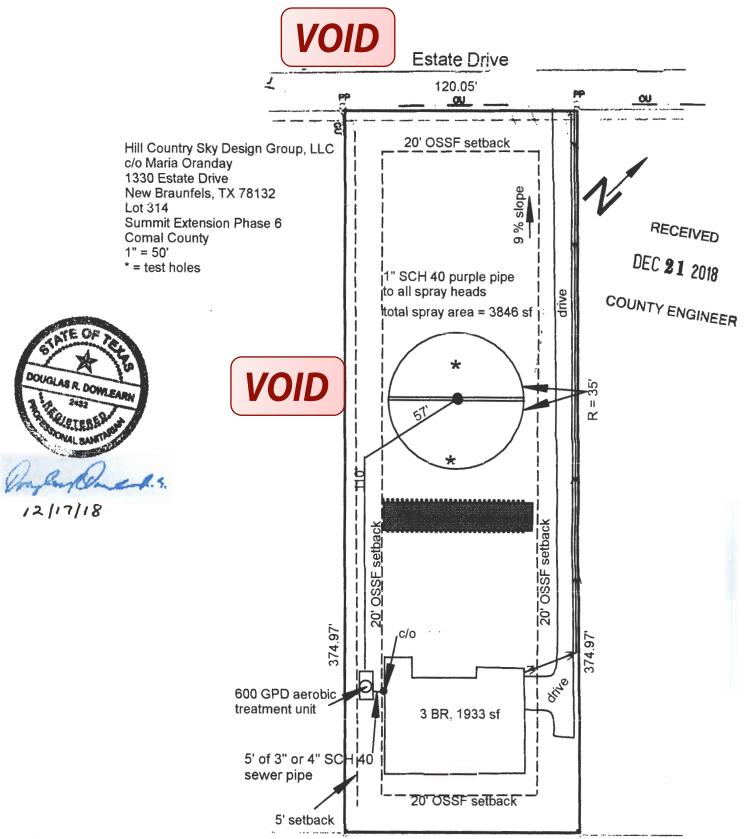
Doug,

We received planning materials for the referenced permit application on December 21, 2018 and found those planning materials to be deficient. In order to continue processing this permit, we need the following information:

V It appears that there is a blacked out area on the site plan. Indicate what this area represents, and resubmit to our office.

If you have any questions, you can email me or call the office.

Thank you, Sandra



Note: water line will be sleeved with SCH 40 under drive and 10' beyond to provide equivalent protection for OSSF setback requirements of TAC 285

Note: WPAP exemption 213.5 h(2) An individ residence or associated residential structures program application requirements under this cover on the site. **Seeks to cons** pt from the Ec at he/she doe

seeks to construct his/her own single family pt from the Edwards Aquifer protection at he/she does not exceed 20% impervious

Note: No recharge features were within 150' of the proposed OSSF

GENERAL WARRANTY DEED

PROVIDENCE TITLE COMPANY GF NO. 128000956

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.

Date: May 3, 2018

DEC 21 2018

Grantor: Arthur E. Martinez, Jr. and Lucille G. Guerra-Martinez, Husband and Wife

COUNTY ENGINE

Grantor's Address (including County):

1568 Estate Drive New Braunfels, TX 78132 Comal County

Grantee: Hill Country Sky Design Group LLC

Grantee's Address (including County):

2068 Rebecca Ridge Canyon Lake, TX 78133 Comal County

Consideration: TEN AND NO/100 (\$10.00) DOLLARS; and other good and valuable considerations in hand paid by the GRANTEE herein named, the receipt of which is hereby acknowledged;

Property (including any improvements):

1330 Estate Drive, New Braunfels, Texas 78132, also known as:

Being Lot 314, of Summit Extension Phase 6, an addition to Comal County, Texas, according to the map or plat thereof recorded in Volume 9, Page 50, of the Plat Records, Comal County, Texas.

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COUNTY ENGINEER

Reservations from Conveyance:

None.

Exceptions to Conveyance and Warranty:

Liens described as part of the Consideration and any other liens described in this deed as being either assumed or subject to which title is taken; validly existing easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded and validly existing instruments, other than conveyances of the surface fee estate, that affect the Property; and taxes for current year, which Grantee assumes and agrees to pay.

Grantor, for the Consideration and subject to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty, grants, selis, 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.

Current ad valorem taxes on said property having been prorated, the payment thereof is assumed by Grantee.

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

General Warranty Deed

Page 2 of 3

128000958

MADE EFFECTIVE THE DATE FIRST HEREINABOVE SPECIFIED.

Lucille G. Guerra

RECEIVED

DEC 21 2018

COUNTY ENGINEER

ACKNOWLEDGMENT

State of Texas 8 § angl County of ŝ

Before me, the undersigned, on this day personally appeared Arthur E. Martinez, Jr. and Lucitle G. Guerra-Martinez known to me (or proved to me on the oath of _______ or through _______) to be the person(s) whose name(s) is/are subscribed to the foregoing instrument and acknowledged to me that he/she/they executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this _3___ day of May, 2018.



AFTER RECORDING RETURN TO: Hill Country Sky Design Group LLC 2068 Rebecca Ridge Canyon Lake, TX 78133

malio

Notary Public, State of Texas My Commission Expires:

PREPARED IN THE LAW OFFICE OF: Ramsey & Foster, PC 5001 Hwy 287 S. #105 Arlington, TX 76017

Page 3 of 3

ACKNOWLEDGMENT

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DEC 21 2018

State of Texas County of Comal

COUNTY ENGINEER

Before me, Carolyn Sebbert, on this day personally appeared Lucille G Guerra-Martinez proved to me through $\underline{A:e+u+e}$ \underline{TD} to be the same person whose name is subscribed to the foregoing instrument and acknowledged to me that she executed the same for the purposes and consideration therein expressed.

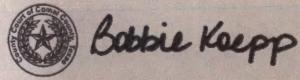
Given under my hand and seal of office this 4th day of May, 20018



Carolyn Stewart

Notary Public, State of Texas

Filed and Recorded Official Public Records Bobbie Koepp, County Clerk Comal County, Texas 05/04/2018 04:22:23 PM CHRISTY 4 Pages(s) 201806017391



COUNTY ENGINEER'S OFFICE COUNTY OF COMAL **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** X Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate X Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer X Planning Matenals of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Matenals shall consist of a scaled design and all system specifications PECEIVED X **Recuired Permit Fee** DEC 21 2018 X Copy of Recorded Deed **USUNTY ENGINEER** X Surface Application/Aerobic Treatment System X Recorded Certification of OSSF Requiring Maintenance/Affidavit to the Public X Signed Maintenance Contract with Effective Date as Issuance of License to Operate N/A Portion of Proposed OSSF Located in the United States Army Corps of Engineers (USACE) Flowage Easement N/A USACE Consent for proposed OSSF I affirm that I have provided all information required for my OSSF Development Application and that this application constitutes a completed OSSF Development Application. Hill Country Sky Design Group IL sister 12/18/2018 **INCOMPLETE APPLICATION COMPLETE APPLICATION** Check No.____ Receipt No. (Missing Items Circled, Application Refused)

Phone: (830) 995-3189 Fax: (830) 995-4051

To: Home Owner 1330 Estate Dr New Braunfels, TX 78132

Permit #: 108534

Agency: Comal County County: Comal Sub: Mfg / Brand: Advantage Wastewater LLC - Nu Water Treatment Type: Aerobic With Chlorine System S/N: 34494 Disposal: Surface Application

Service Type: Scheduled Inspection

Visit Date: 9/4/2019 Method: Grab Technician: Alex Seidensticker Maint. Provider: Burt Seidensticker Aerators: Operational Filters: Operational

Irrigation Pumps: <u>Operational</u> Disinfection Device: <u>Operational</u> Chlorine Supply: <u>Operational</u> Chlorine Residual: <u>0.95mg/L</u> Sludge Levels For Tank 1: 24" For Tank 2: 0" For Tank 3: 0"

Time In: 9:35

Air Filter: Good

Tank Lid / Riser: Secured

PSI Pressure: 3.0

Electric Circuits: <u>Operational</u> Distribution System: <u>Operational</u> Sprayfield Veg: <u>Operational</u>

Alarm: Operational

Color: Good Odor: Good

Comments

- Technician Secured the Tank Lid and/or Riser prior to leaving location. - Scum in pretreatment is 6". Low bleach add bleach. - Secured system in the on position with a lock bolt

Insp ID #:82601

Service Completed

Provider: Burt Seidensticker

Technician: Alex Seidensticker

License #. MP0001961

Expires: 9/30/2021

CFM: 2.6

pex

License #: MP0000002

Printed:9/4/2019 Site: 1330 Estate Dr New Braunfels, TX 78132

Contract Dates: 4/25/2019 - 4/25/2021 Scheduled Date: 8/25/2019 Inspection 1 of 6 Installed: 2/19/2019 Warranty End: 2/19/2021 GPS Coordinates - Latitude: 29.84092 Longitude: -98.14381 Inspection

Customer ID: 6494

Entered By: Alex Seidensticker

Phone: (830) 995-3189 Fax: (830) 995-4051

To: Home Owner 1330 Estate Dr New Braunfels, TX 78132

Printed:11/27/2019 Site: 1330 Estate Dr New Braunfels, TX 78132

Permit #: 108534	·		mer ID: 6494	de la constante por est
Agency: Comal County		Contract	Dates: 4/25/2019 - 4	4/25/2021
County: Comal	Sub:	Schedule	ed Date 12/25/2019	Inspection 2 of 6
Mfg / Brand: Advantage Wastewater	LC - Nu Water			installed: 2/19/2019
Treatment Type: Aerobic With Chlorine	System S/N: 34494		W	arranty End: 2/19/2021
Disposal: Surface Application		GPS Coordinates - La	ititude: 29,84092 Lo	ngitude: -98.14381
Service Type: <u>Scheduled I</u>	nspection			f "Scheduled Inspection"
Visit Date: <u>11/27/2019</u>	Time In: <u>925</u>	Out: <u>940</u>	tered By: Billy Duf	
Method: Grab				
Technician: Billy Duff				
Maint. Provider: Rudy Carson				
Aerators: Operational	Sludge Levels			
Filters: Operational	For Tank 1			
Irrigation Pumps: Operational	For Tank 2			
Disinfection Device: Operational	For Tank 3			
Chlorine Supply: Operational				CFM: 3.0
Chlorine Residual: <u>1</u>				
	Tank Lid / Ris	on Socierad		
		er. <u>Decureu</u>		
Electric Circuits: Operational				
Distribution System: Operational	Co	lor: Good		
Sprayfield Veg: Operational		lor: Good		
Alarm: Operational	PSI Press	ure: <u>3.0</u>		
Comments				Service Completed
- Technician Secured the Tank Lid a	nd/or Riser prior to leavin	g location Cleaned compl	ressor filter - pretre	eat scum 4" - reset
timer - bleach needs to be added (3g	al) - Secured system in t	he on position with a lock b	olt - Please compl	ete customer
information sheet and return to office	so we can better serve y	ou in the future. Thanks		
Owner signature:				Insp ID #:86666
Provider: Rudy Car	son	Technician: Billy Duff		
License #: MP0002036		License #: MT0001357	Exp	ires: 5/31/2020

of Carsan-

Rudy Carson

> Phone: (830) 995-3189 Fax: (830) 995-4051

To: Home Owner 1330 Estate Dr New Braunfels, TX 78132 Printed:4/7/2020 Site: 1330 Estate Dr New Braunfels, TX 78132

			The second se
	Cor	tract Dates: 4/25/2011	9 - 4/25/2021
Sub:	Sche	eduled Date: 4/25/202	0 Inspection 3 of
LC - Nu Water			Installed: 2/19/2019
System S/N: 34494			Warranty End: 2/19/2021
	GPS Coordinates	- Latitude: 29.84092	Longitude: -98.14381
spection	5		e of "Scheduled Inspection"
Time In: 11:00am	Out: 11:10am	Entered By: Jose	Luis Ramos
Sludge Levels			· · · · · · · · · · · · · · · · · · ·
	a		
	-		
			CFM: 2.6
Air Filter:	Good		
Tank Lid / Riser:	Secured		
	0		
	and the second se		
Udor:	<u>G000</u>		
PSI Pressure	3.6		
			Service Completed
e pump tank recommended	by TOWA. Rest tim	er. Add bleach soor	a is due to covid 19 Due n Cleaned compressor
	LC - Nu Water System S/N: 34494 Inspection Time In: <u>11:00am</u> Sludge Levels For Tank 1: <u>ni</u> For Tank 2: <u>ni</u> For Tank 2: <u>ni</u> For Tank 3: <u>0</u> Air Filter: Tank Lid / Riser: Color: Odor: PSI Pressure: Ind/or Riser prior to leaving loge	Sub: LC - Nu Water System S/N: 34494 GPS Coordinates ISPECTION Time In: 11:00am Out: 11:10am Out: 11:10am Sludge Levels For Tank 1: na For Tank 2: na For Tank 2: na For Tank 3: 0' Air Filter: Good Color: Good Odor: Good Odor: Good PSI Pressure: 3.6 ht/or Riser prior to leaving location Scum in p	Sub: LC - Nu Water System S/N: 34494 GPS Coordinates - Latitude: 29.84092 Ispection Time In: 11:00am Out: 11:10am Out: 11:10am Sludge Levels For Tank 1: na For Tank 2: na For Tank 3: 0 Air Filter: Good Tank Lid / Riser: Secured Color: Good Odor: Good

Insp ID #:91774

Provider: Rudy Carson

Technician: Jose Luis Ramos

License #: MP0002036

Caris **Rudy Carson**

License #: MT0001770

Expires: 9/30/2022

Phone: (830) 995-3189 Fax: (830) 995-4051 To: Home Owner Printed:8/17/2020 Site: 1330 Estate Dr 1330 Estate Dr New Braunfels, TX 78132 New Braunfels, TX 78132 Customer ID: 6494 Permit #: 108534 Contract Dates: 4/25/2019 - 4/25/2021 Agency: Comal County Scheduled Date: 8/25/2020 Inspection 4 of 6 County: Comal Sub: Installed: 2/19/2019 Mfg / Brand: Advantage Wastewater LLC - Nu Water Warranty End: 2/19/2021 Treatment Type: Aerobic With Chlorine System S/N: 34494 Disposal: Surface Application GPS Coordinates - Latitude: 29.84092 Longitude: -98.14381 This counts as a type of "Scheduled Inspection" Service Type: Scheduled Inspection Entered By: Michael S Looney Visit Date: 8/17/2020 Time In: 3:40 Out: 3:55 Method: Grab Technician: Not Assigned Maint. Provider: Rudy Carson Aerators: Operational Sludge Levels Filters: Operational For Tank 1: n/a Irrigation Pumps: Operational For Tank 2: n/a **Disinfection Device: Operational** For Tank 3: 0" Chlorine Supply: Operational CFM: 2.5 Chlorine Residual: 2.20 Air Filter: Good Tank Lid / Riser: Secured Electric Circuits: Operational Distribution System: Operational Color: Good Sprayfield Veg: Operational Odor: Good Alarm: Operational ✓ Service Completed Comments - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Cleaned compressor filter - Due to Covid -19 We are only Opening the pump tank recommended by TOWA. Checked sprinklers. Secured in place with a lockbolt. Insp ID #:96843 **Owner signature:** Provider: Rudy Carson

License #: MP0002036

Rudy Carson

Phone: (830) 995-3189 Fax: (830) 995-4051

To: Home Owner 1330 Estate Dr New Braunfels, TX 78132

Printed:12/16/2020 Site: 1330 Estate Dr New Braunfels, TX 78132

Permit #: 108534			Customer ID	6494	
Agency: Comal County			Contract Dates	4/25/2019	- 4/25/2021
County: Comal	Sub:		Scheduled Date	12/25/202	Inspection 5 of 6
Mfg / Brand: Advantage Wastewater					Installed: 2/19/2019
Treatment Type: Aerobic With Chlorine	System S/N: 34494				Warranty End: 2/19/2021
Disposal: Surface Application		GPS Coordi	nates - Latitude:	29.84092	Longitude: -98.14381
Service Type: Scheduled	Inspection				e of "Scheduled Inspection"
Visit Date: 12/16/2020	Time In: <u>11:40am</u>	Out: <u>11:50am</u>	Entered	By: Alejan	idro Gonzalez
Method: Grab					
Technician: Alejandro Gonza	alez				
Maint. Provider: Rudy Carson					
Aerators: Operational	Sludge Levels				
Filters: Operational	For Tank 1:	12			
Irrigation Pumps: Operational	For Tank 2:				
Disinfection Device: Operational	For Tank 3:	0"			
Chlorine Supply: Operational					
Chlorine Residual: <u>1.2mg/L</u>					
	Air Filter	: Good			
	Tank Lid / Rise	: Secured			
Electric Circuits: Operational					
Distribution System: Operational	Color	: Good			
Sprayfield Veg: Operational		: Good			
	Ouol	. 0000			
Alarm: Operational					
Comments					Service Completed
- Technician Secured the Tank Lid a	nd/or Riser prior to leaving I	ocation. 4" of so	cum in pretreatr	nent Cle	
Reset timer Secured system in the	e on position with a lock bolt				

Insp ID #:102999

Provider:

License #: MP0002036

Rudy Carson

Technician: Alejandro Gonzalez

License #: MT0000996

Expires:

Routs

Rudy Carson

Alfait

Phone: (830) 995-3189 Fax: (830) 995-4051

Printed:4/5/2021 Site: 1330 Estate Dr

To: Home Owner 1330 Estate Dr New Braunfels, TX 78132

Permit #: 108534

County: Comal

Agency: Comal County

New Braunfels, TX 78132 Customer ID: 6494 Contract Dates: 4/25/2019 - 4/25/2021 Scheduled Date: 4/25/2021 Inspection 6 of 6 Installed: 2/19/2019

Mfg / Brand: Advantage Wastewater LLC - Nu Water Treatment Type: Aerobic With Chlorine System S/N: 34494 Disposal: Surface Application Service Type: Scheduled Inspection

Sub:

Warranty End: 2/19/2021

Entered By: Michael S Looney

GPS Coordinates - Latitude: 29.84092 Longitude: -98.14381 This counts as a type of "Scheduled Inspection"

Visit Date: 4/5/2021 Time In: 12:10 Method: Grab Technician: Michael S Looney Maint. Provider: Rudy Carson Aerators: Operational Filters: Operational Irrigation Pumps: Operational **Disinfection Device:** Operational Chlorine Supply: Operational Chlorine Residual: 1mg/L

Sludge Levels For Tank 1: 14" For Tank 2: 20" For Tank 3: 0"

Air Filter: Good

Out: 12:25

Turbidity: Good Tank Lid / Riser: Secured

Electric Circuits: Operational Distribution System: Operational Color: Good Sprayfield Veg: Operational Odor: Good

Alarm: Operational

Comments

Service Completed

CFM: 3.0

- Technician Secured the Tank Lid and/or Riser prior to leaving location. - Cleaned compressor filter. Scum in pretreatment is 6". Checked sprinklers. Reset timer. Contact the office to set up homeowner contact info, so we can better service you in the future

Insp ID #:107204



Technician: Michael S Looney

License # MT0001616

Expires

License #: MP0002036



Canyon Lake: (830) 964-2365 Bastrop: (512) 303-6922 info@aerobicservices.com

bastrop@aerobicservices.com

MP349 / OS24597 www.aerobicservices.com

To:	Thoma	as McSherry		Tech:	Marc	
	1330 E	Estate Dr		Phone:	706) 580-5427	Date: 2024-06-19
	New B	Braunfels, TX 78	3132		(512) 703-7094	Service
Agency:	CCEO)			,	Due:
County:	Comal					
Permit No:	10853	4				
Inspection Ty	/pe:	Scheduled				
<u>ltem</u>			Operational	Inoperative	Not Present	
Aerator:			[X]	[]	[]	<u>Air Pressure:</u> 80
Irrigation Pu	mp:		[X]	[]	[]	
Air Compres	sor:		[X]	[]	[]	
Pump Scree	n:		[X]	[]	[]	
Chlorinator:			[X]	[]	[]	
Spray Field	Vegetatio	on:	[X]	[]	[]	
Filters:			[X]	[]	[]	
Sprinkler / D	rip Back	wash:	[X]	[]	[]	
Controls / El	ectric Ci	rcuits:	[X]	[]	[]	

Test Results and Observations: (As Required)

Chlorine Residual (ppm):	0.12	
Test Method:	Dpd	
BOD:		
TSS:		
Tank Lids Secured:	Yes [X] / NO []	
Pump Out Needed:	Yes [] / NO [X]	
Repairs Made	Yes [X] / NO []	

Aeration: 48 Sludge Levels

Mixed Liquor: all measurements in inches

Clarifier:	36
Pump:	4

Repairs and Comments:

Upon arrival system was in aeration alarm. Thomas compressor was bad and needed to be replaced. Got approval to install an hp 60 compressor. Did full inspection. No other issues found.

MSL

Inspector:

Tom Hampton, VP MP349/OS24597 Date: 2024-06-19