

Comal County

OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: 05/02/2019 Permit Number: 108563

Location Description: 176 RED ROSE ST
SPRING BRANCH, TX 78070

Subdivision: Mystic Shores
Unit: 4
Lot: 379
Block:
Acreage:

Type of System: Aerobic
Surface Irrigation

Issued to: JLP Builders, Inc.

This license is authorization for the owner to operate and maintain a private facility at the location described in accordance to the rules and regulations for on-site sewerage facilities of Comal County, Texas, and the Texas Commission on Environmental Quality.

The license grants permission to operate the facility. It does not guarantee successful operation. It is the responsibility of the owner to maintain and operate the facility in a satisfactory manner.

Alterations to this permit including, but not limited to:

- Increase in the square feet of living area
- Increase in the number of bedrooms
- A change of use (i.e. residential to commercial)
- Relocation of system components (including the relocation of spray heads)
- Installation of landscaping
- Adding new structures to the system

may require a new permit. **It is the responsibility of the owner to apply for a new permit, if applicable.**

Inspection and licensing of a facility indicates only that the facility meets certain minimum requirements. It does not impede any governmental entity in taking the proper steps to prevent or control pollution, to abate nuisance, or to protect the public health.

This license to operate is valid for an indefinite period. The holder may transfer it to a succeeding owner, provided the facility has not been remodeled and is functioning properly.

Licensing Authority

Comal County Environmental Health


ENVIRONMENTAL HEALTH INSPECTOR


ENVIRONMENTAL HEALTH COORDINATOR
6699700 SO
OS 0025599

OS0034322

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: SWAYNE OSSF Installer #: OS 0026232
 1st Inspection Date: 4.23.19 2nd Inspection Date: 5.2.19 3rd Inspection Date: _____
 Inspector Name: Andrew B. Inspector Name: ARB Inspector Name: _____
 Permit#: 108563 Address: 176 Red Rose St.

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

4.23.19

Tank level, set. operation. no leaks
Cover or remove rocks / brush.

5.2.19

Covered.
spray area
geol.

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If Single Tank, 2 Compartments Provided with Baffle SEPTIC TANK Inlet Flowline Greater than 3" and "T" Provided on Inlet and Outlet SEPTIC TANK Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(E) 285.91(2) 285.32(b)(1)(F) 285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(I) 285.32(b)(1)(E)(i) 285.32(b)(1)(D) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C)(i) 285.32(b)(1)(B) 285.32(b)(1)(A) 285.32(b)(1)(E)(iv)				
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
10	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
11	SEPTIC TANK Secondary restraint system provided SEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
12	SEPTIC TANK Tank Volume Installed						
13	PUMP TANK Volume Installed						
14	AEROBIC TREATMENT UNIT Size Installed	✓		Good	✓		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	✓		max	✓		
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)(3) 285.33(a)(1) 285.33(a)(2)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
24	DISPOSAL SYSTEM Other (describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
25	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC						
26	DRAINFIELD Area Installed						
27	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
28	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
29	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
30	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.)		285.33(c)(2)				
31	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)				

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OSSF Inspection Sheet**

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

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42	APPLICATION AREA Area Installed	✓				✓	
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

Comal County Environmental Health

OSSF Inspection Sheet

Installer Name: Swampy OSSF Installer #: OS 0026232

1st Inspection Date: 4.23.19 2nd Inspection Date: _____ 3rd Inspection Date: _____

Inspector Name: Andrea B. Inspector Name: _____ Inspector Name: _____

Permit#: 108563 Address: 176 Red Rose St.

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


**Comal County Environmental Health
OSSF Inspection Sheet**

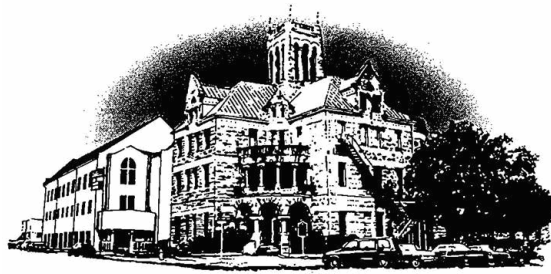
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OSSF Inspection Sheet**

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42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



Comal County

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: 108563
Issued This Date: 01/08/2019
This permit is hereby given to: JLP Builders, Inc.

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

176 RED ROSE ST
SPRING BRANCH, TX 78070

Subdivision: Mystic Shores
Unit: 4
Lot: 379
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/FLOODPLAIN 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/Floodplain Development Application Checklist must accompany 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
- ☐ 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

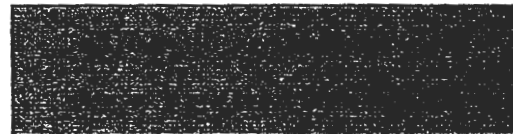
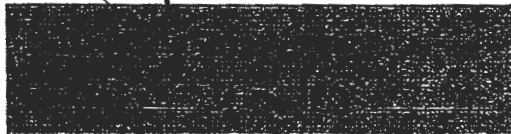
Floodplain Development Permit

- ☐ Property in Incorporated City
- ☒ Completed Application
- ☐ Boundary Map Indicating Location of Proposed Improvements
- ☐ Copy of Recorded Deed
- ☐ Required Permit Fee

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



Signature of Applicant20 Nov 14

Date

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

APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN

ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE

Date 20 Nov 18 Permit # 108563
 Owner Name JCP BUILDERS INC. Agent Name FRANK AGUIRRE
 Mailing Address 8013 312053 Agent Address 16159 OLD STABLE RD
 City, State, Zip N. B. TX 78131 City, State, Zip San Antonio TX 78247
 Phone # 210 422 7024 Phone # 210 275 7866
 Email JPAUL@BUILDWITHJCP.COM Email FRANKSEPTIC45@gmail.com

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

Subdivision Name MYSTIC SIDINGS Unit 4 Lot 399 Block _____

Acreage/Legal _____

Street Name/Address 176 RED ROSE City _____ Zip _____

Type of Development:

☒ Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 2315

RECEIVED

DEC 26 2018

COUNTY ENGINEER

☐ Commercial or Institutional Facility

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

Type of Facility _____

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

Restaurants, Lounges, Theaters - Indicate Number of Seats _____

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

Travel Trailer/RV Parks - Indicate Number of Spaces _____

Miscellaneous _____

Estimated Cost of Construction: \$ 100,000 (Structure Only)

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

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

Source of Water ☒ Public ☐ Private Well

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

By signing this application, I certify that:

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

[Signature]
Signature of Owner

20 Nov 18
Date

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

Planning Materials & Site Evaluation as Required Completed By F. Aguirre

System Description 1-2-4/5 SRA

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

Tank Size(s) (Gallons) 500 **600R Maxx Air** Absorption/Application Area (Sq Ft) 4155

Gallons Per Day (As Per TCEQ Table III) 240

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

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

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

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

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

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

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

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

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

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

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

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

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

If yes, indicate the city: _____

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 [Signature]

Date 20 Nov 18

Page 2 of 2

Ritzen, Brenda

From: Frank Aguirre <frankseptic45@gmail.com>
Sent: Tuesday, January 8, 2019 9:28 AM
To: Ritzen, Brenda
Subject: Re: Permit 108563

Brenda: Jimmie is the owner of Pogue & Co.
How, EXACTLY, do you want business owners to sign their name for the affidavit of a property that is owned by their company?
Thanx,
frank (signing my name as owner of 'septic systems express')

On Tue, Jan 8, 2019 at 8:14 AM Frank Aguirre <frankseptic45@gmail.com> wrote:

Will do, thank you. f

On Mon, Jan 7, 2019 at 4:09 PM Ritzen, Brenda <rabbjr@co.comal.tx.us> wrote:

Re: JLP Builders, Inc.

Mystic Shores Unit 4 Lot 379

Application for Permit for Authorization to Construct an On-Site Sewage Facility

Frank,

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

1. The owner name on the Affidavit to the Public doesn't match the owner name as indicated on the recorded deed.
2. Revise as needed and resubmit.

Thank you,

Brenda Ritzen, OS0007722

Environmental Health Coordinator

Comal County Engineers Office

195 David Jonas Drive

New Braunfels, Texas 78132

830-608-2090

www.cceo.org

--

I PLEDGE ALLEGIANCE TO THE FLAG OF THE UNITED STATES OF AMERICA AND TO THE REPUBLIC FOR WHICH IT STANDS, ONE NATION UNDER GOD,
INDIVISIBLE, WITH LIBERTY AND JUSTICE FOR ALL. **fa**

--

I PLEDGE ALLEGIANCE TO THE FLAG OF THE UNITED STATES OF AMERICA AND TO THE REPUBLIC FOR WHICH IT STANDS, ONE NATION UNDER GOD,
INDIVISIBLE, WITH LIBERTY AND JUSTICE FOR ALL. **fa**

Property deed: See application forms

ATU affidavit:

Jim Aguirre

201806048238 12/20/2018 10:55:58 AM 1/1

AFFIDAVIT TO THE PUBLIC
THE COUNTY OF COMAL STATE OF TEXAS
CERTIFICATION OF ON-SITE SEWAGE FACILITIES REQUIRING MAINTENANCE.

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

The Texas Health & Safety Code, Chap. 366, authorizes TCEQ to regulate OSSF's. Additionally, the Texas Water Code, Para. 5.012 and 5.013, gives TCEQ primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. TCEQ, under the authority of the TWC and the Texas Health and Safety Code, requires owner's to provide notice to the public that certain types of OSSF's are located on specific pieces of property. To achieve this notice, TCEQ requires a deed recording. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This deed certification is not a representation or warranty by TCEQ of the suitability of this OSSF, nor does it constitute any guarantee by TCEQ 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:

176 RED ROSE DR. L-379, U-4
ASTIC SHORES
The property is owned by: (owner's full name) JIMMIE L. POGUE

This OSSF must be covered by a continuous maintenance contract. All maintenance on this OSSF must be performed by an approved maintenance company and a signed maintenance contract must be submitted to COMAL County or permitting authority within 30 days after the property has been transferred.

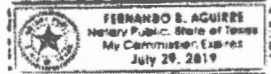
The owner will, upon any sale or transfer of the above-described property, request a transfer of the permit for the OSSF to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from COMAL County or permitting authority.

WITNESS MY/OUR HAND[S] ON THIS 20 day of Nov 2018

[Signature] JIMMIE L. POGUE

SWORN TO AND SUBSCRIBED BEFORE ME on this 20 day of Nov 2018

[Signature]
Notary Public, State of Texas



Notary's printed name: FERNANDO S. AGUIRRE
My commission expires: 29 JUL 2019

Filed and Recorded
Official Public Records
Bobbie Koerpp, County Clerk
Comal County, Texas
12/20/2018 10:55:58 AM
TERRI 1 Page(s)
201806048238

[Signature] Bobbie Koerpp

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

POOR QUALITY

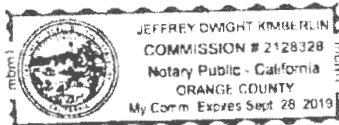
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
 County of ORANGE)
 On 10/09/2018 before me, JEFFREY DWIGHT KIMBERLIN, Notary Public
 Date Here Insert Name and Title of the Officer
 personally appeared MALCOLM CHARLES WORTH &
 Name(s) of Signer(s)
JANA CHARLES WORTH

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature [Signature]
 Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____
 Document Date: _____ Number of Pages: _____
 Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator
☐ Other: _____
 Signer Is Representing: _____

Signer's Name: _____
☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator
☐ Other: _____
 Signer Is Representing: _____

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Filed and Recorded
 Official Public Records
 Bobbie Koepf, County Clerk
 Comal County, Texas
 10/11/2018 11:45:40 AM
 TERRI 4 Page(s)
 201806040189



Bobbie Koepf



PAUL SWOYER SEPTIC SUPPLY &
SERVICE
23011 FM 306
CANYON LAKE, TX 78133

MP#0001708

CHRISTOPHER RYAN SEIDENSTICKER

PROPERTY LEGAL DESCRIPTION:

C-3079 U-4
Mystic Slough

Customer: JCP BUILDERS, INC

Site Address: 176 CEDROSE

City/State: IL TX

Zip:

County:

Permit#:

Phone Number: 2104227024

E-mail: JROGUE@JCPBUILTHITP.COM

I. General: This On-Site Sewage Facility Service Agreement (hereinafter referred to as "Agreement") is entered into by and between _____ (hereinafter referred to as "Contractor") and PS Supply & Service LLC (hereinafter referred to as "Client"). 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: _____ Last Date of Service: _____

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 _____, 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:

Contractor:

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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 consummation 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: _____



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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:

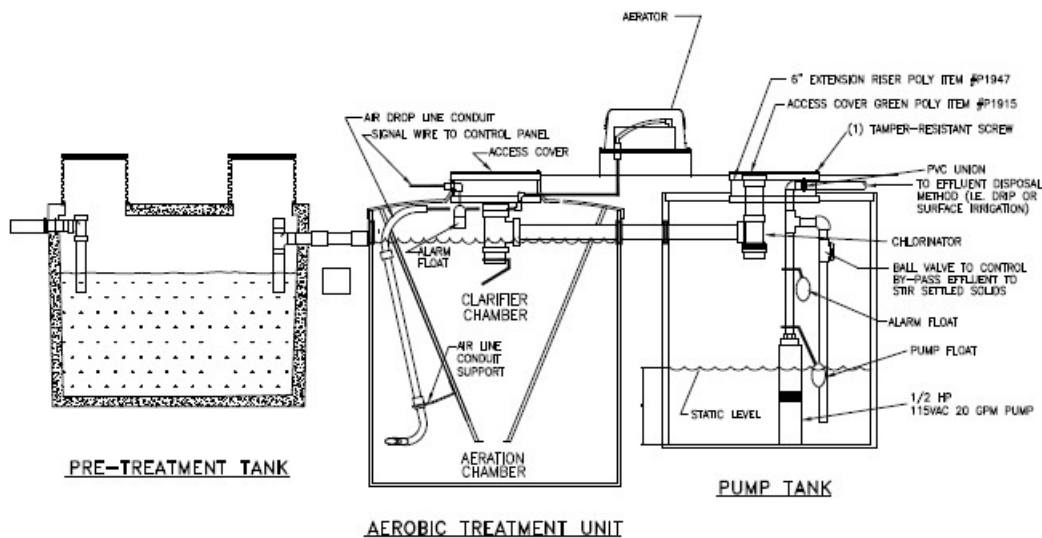
Contractor:

It is the opinion of this designer that both state and local jurisdiction requirements represent MINIMUM government regulations that may or may not result in a septic system that meets the property owner's EXPECTATIONS of it providing dependable, long-lasting service. Therefore, the property owner should consider some of the many UPGRADES that are available from the INDUSTRY and the MANUFACTURER'S side of the project. As part of the "best practices" thrust, ALL septic systems of all types can deliver long-lasting, dependable service IF and ONLY IF the owner of the system includes these three items:

- Management - The sewage that is sent to the system must be within both its quantitative and qualitative design limits.*
- Monitoring - Every system must be closely watched for any signs of failure. The best monitoring includes specific measurements of its various characteristics.*
- Maintenance - The system must be properly maintained on a regularly scheduled basis by a qualified and licensed person.*

Chemical characteristics: The parameters of typical residential-strength sewage are: BOD-140, TSS - 75, FOG - 15, DO - .5, pH - 7 and temp 59.

Generic cross-section of a typical ATU:



It is the owner's responsibility to ensure that the aerobic treatment unit is under a PAID contract with a licensed "maintenance provider. The unit must be checked and tested ONCE EVERY 4 MONTHS [Regulation #285.91 (4)] for the life of the unit and test results shall be submitted to the local septic inspector.

I hereby certify that this design conforms to both TCEQ and local regulations for On-Site Sewage Facilities and, with proper use, maintenance, and under normal climatic conditions, can be expected to function without creating a nuisance.

Sincerely,

Frank Aguirre

Frank Aguirre, Registered Sanitarian, Lic. 994, SE 10807, DR 30400

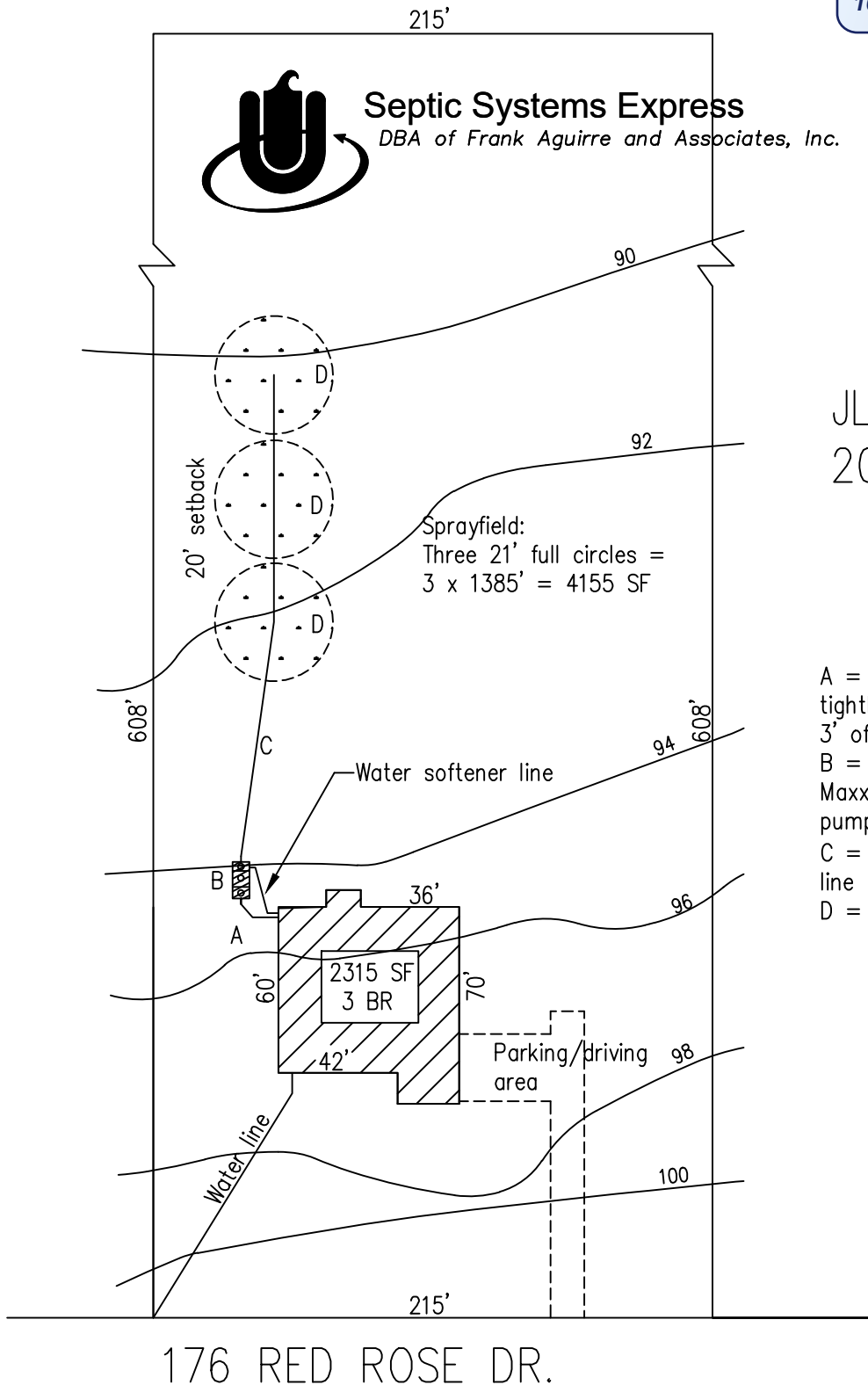
REVISED

10:52 am, Apr 18, 2019



JLP BUILDERS, INC.
20 NOV 2018
(Revision of 18 Ap 2019)

A = $\pm 12'$ of 4" pvc, Sch. 40,
tightline with a cleanout within
3' of the house
B = Pre-treatment tank, 600R
Maxx air ATU, chlorinator and
pump tank
C = $\pm 170'$ of 1" pvc supply
line
D = 21' radius full circle spray



176 RED ROSE DR.

Note: The contractor may make field adjustments to the system so as to better fit specific site conditions. All angles, lengths and locations shown are approximate and are adjustable during the

Frank Aguirre



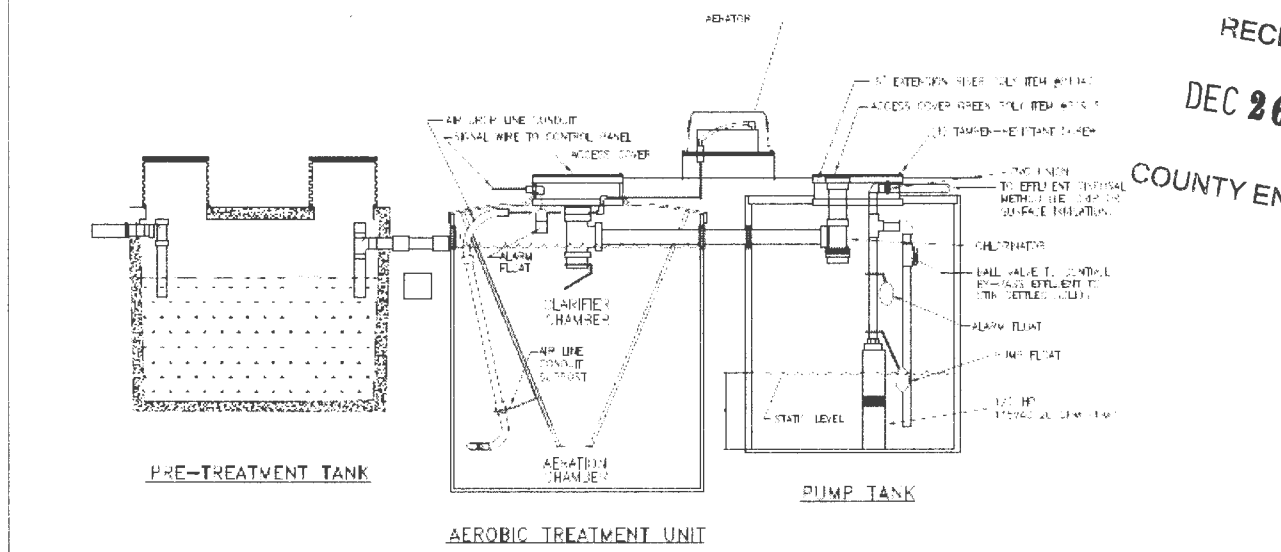
RS 994
OS10807
DR 30400
L-379,U-4
MysticShores

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- Monitoring** - Every system must be closely watched for any signs of failure. The best monitoring includes specific measurements of its various characteristics.
- Maintenance** - The system must be properly maintained on a regularly scheduled basis by a qualified and licensed person.

Chemical characteristics: The parameters of typical residential-strength sewage are: BOD-140, TSS - 75, FOG - 15, DO - .5, pH - 7 and temp 59.

Generic cross-section of a typical ATU:



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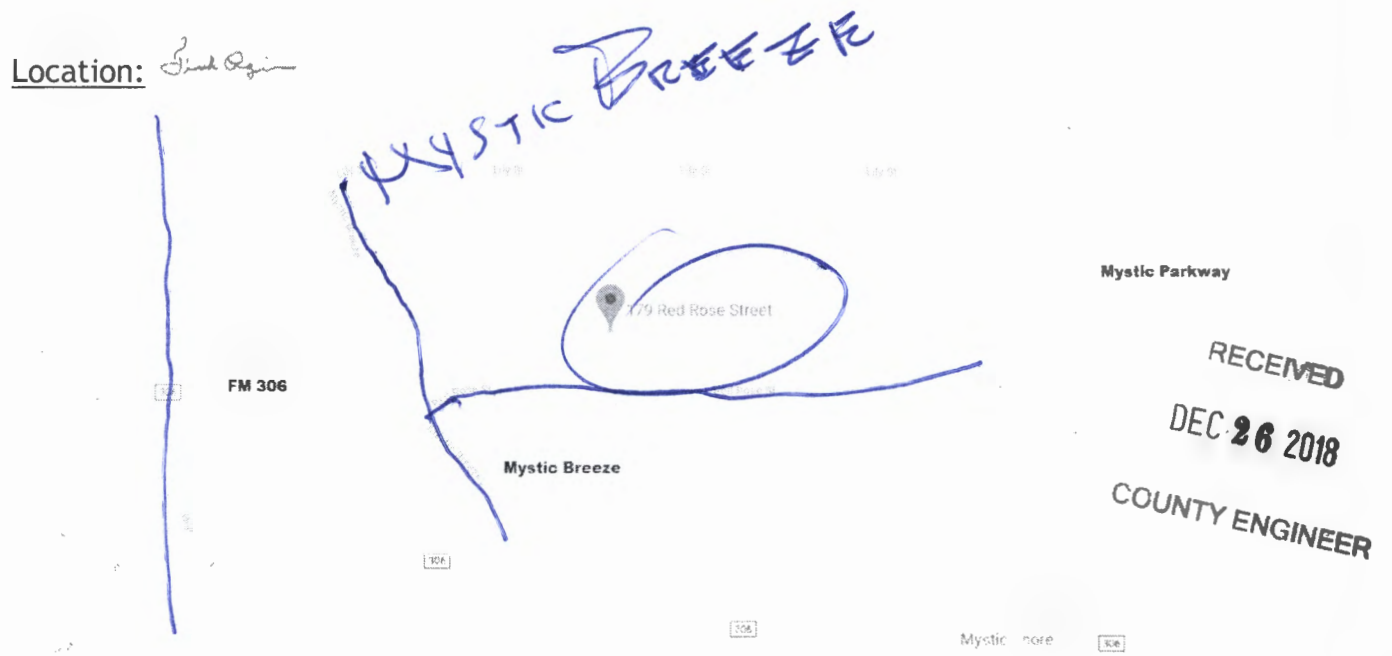
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I hereby certify that this design conforms to both TCEQ and local regulations for On-Site Sewage Facilities and, with proper use, maintenance, and under normal climatic conditions, can be expected to function without creating a nuisance.

Sincerely,

Frank Aguirre, Registered Sanitarian, Lic. 994, SE 10807, DR 30400

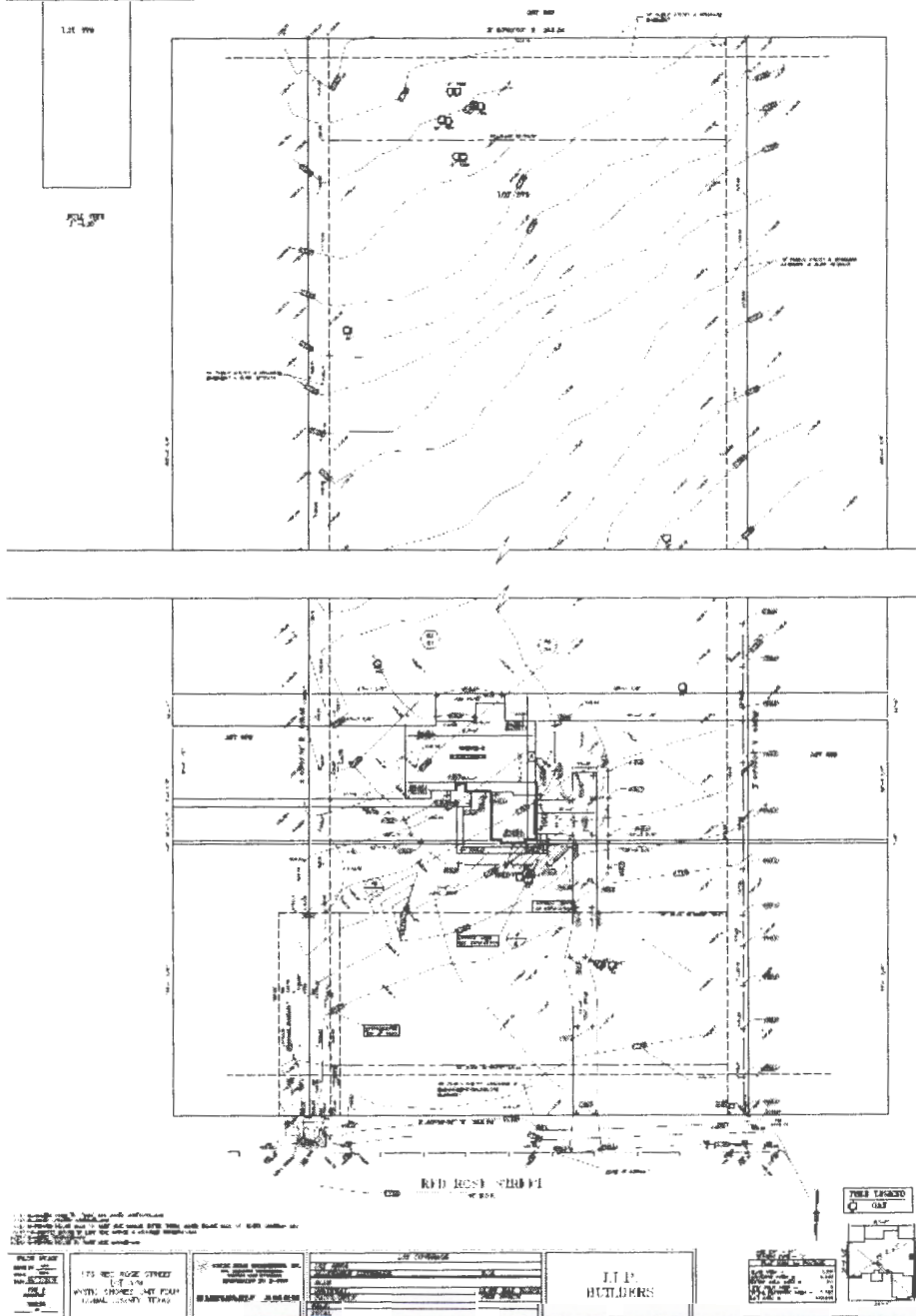
Location: *Franklin*



Flood zone/Aquifer map:



Property plat: Land O' Lakes



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

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

VOID

Planning Materials & Site Evaluation as Required by

System Description

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

Tank Size(s) (Gallons)

500

Absorption/Application Area (Sq Ft)

4155

Gallons Per Day (As Per TCEQ Table III)

240

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

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

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

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

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

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

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

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

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

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

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

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

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

If yes, indicate the city:

By signing this application, I certify that:

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

Signature of Designer

Date

Page 2 of 2

VOID



Frank Septic Systems Express
Excellent Septic Service and Inspection

16159 Old Stable Rd.
Frank Aguirre, R.S.

San Antonio, Texas 78247-4490
210.275.7866

frankseptic45@gmail.com

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PLANNING MATERIALS FOR A SEPTIC SYSTEM IN COMAL COUNTY

DATE, FIELD WORK: 20 Nov 2018

THE PLAYERS:

Property owner: JLP Builders, Inc., P.O. Box 312053, New Braunfels, Texas 78131,
(210)422-7024, JPogue@BuildwithJLP.com

Site Evaluator: Frank Aguirre, SE, #10807

Designer: Frank Aguirre, R.S., Lic. 994

Installer: Paul Swoyer, 830-935-4936

Septic system design review & inspections: Comal County: Brenda Ritzen or Sandra
Hernandez, 830.608.2090

THE PROPERTY:

Street numerical address: 176 Red

Legal description: Lot 379, Unit 4, Mystic Shores

VOID

Contributing zone: The property is on the Contributing zone and the septic system
design complies with all the provisions of the existing CZP.

THE PROPOSED PROJECT:

A single family residence, 2315 SF, 3 BR

THE ESTIMATED SEWAGE PRODUCTION CHARACTERISTICS:

Hydraulic loading estimated at 240 gpd, sized, by regulations, to a 3 BR home.

Organic loading estimated at 140 to 300 mg/l BOD with traces of FOG and TSS
(residential strength)

DESCRIPTION OF PROPOSED MONITORING OF SEWAGE CHARACTERISTICS:

Hydraulic loading as the major portion of the water meter reading.

TARGET FINAL EFFLUENT PARAMETERS:

Hydraulic loading less than the estimated loading on ANY GIVEN DAY.

Organic loading: BOD and TSS of less than 65 mg/l

WATER SOURCE: CLWS

SITE EVALUATION DATA:

A. This certifies that proper soil analysis procedures were followed.

B. Soils at this site are Class IV and are not suitable with respect to texture.

VOID

C. The overall site suitability is not appropriate for a Standard on-site wastewater system.

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OVERALL SEPTIC SYSTEM COMPONENTS:

Collection: (It is crucial that all sewer drops exiting this home/building be as shallow as possible, still meeting elevation plumbing requirements in the slab. This design assumes a shallow sewer drop exit.) About 10' of tightline from the house to the ATU with a cleanout within 3' of the house.

Pre-treatment: Single compartment (trash) tank in front of the ATU

Treatment: 500 gpd ATU (aerobic treatment unit) with disinfection

The system to be installed must be done so in STRICT ACCORDANCE WITH ALL MANUFACTURER'S RECOMMENDATIONS by a Class II septic system installer.

Water pump requirements: Must overcome an elevation head of 6', a friction head of 8' and a maximum head at the spray head of 45' for a total head of 59'. It shall operate the spray heads at two application times (operated by a control box using a timer) - 12 midnight and 4 am cycles of 120 gal. each cycle. At 12 gpm, each cycle shall run for 10 minutes.

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Supply line size: 1"

Sprayheads: K-rain 1303 RCW or equal

Recycling: The required spray area for this size of residence is 3750 SF.

The actual spray shall be 4155 SF and shall consist of three 21' full circle sprays for a total of 1 gpm.

The spray area shall be covered with grasses, evergreen shrubs, bushes, trees or landscaped beds containing mixed vegetation.

Float Switch Placements

Actual liquid measurements:

60" depth, 60" length, 60" width, dividing by 12 to go to "feet":

5' depth, 5' length, 5' width

Capacity, in CF, = $5' \times 5' \times 5' = 125 \text{ CF} \times 7.48 \text{ gal/CF} = 935 \text{ gal}$ (Actual tank capacity)

$\frac{935 \text{ gal}}{60" \text{ depth}} = 15.58 \text{ gal/inch}$

Volume needed for a single dose = $240 \text{ gal} / 2 = 120 \text{ gal}$.

$\frac{120 \text{ gal}}{15.58 \text{ gal/in}} = 8"$ needed between the "Off" and "On" switches

Volume needed between the "On" and "Alarm" switches = 1 day's volume =

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240 gal

$\frac{240 \text{ gal}}{15.58 \text{ gal/in}} = 15''$ needed between the "On" and "Alarm" switches

Volume required above the "alarm" switch = $\frac{1}{3}$ day's volume = 80 gal.

$\frac{80 \text{ gal.}}{15.58 \text{ gal/in}} = 6''$ needed above the "alarm" switch

Locations of float switches:

Distance between the OFF and ON switches = 8"

+ Distance between the ON and Alarm switches = 15"

+ Distance between the Alarm switch and Inlet = 6"

Minimum working depth required = 29"

Actual working depth available = 60"

+Min. height needed above floor of tank for the OFF switch = 8"

Minimum tank depth from Inlet to bottom of tank = 37"

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CODE COMPLIANCE

Everyone realizes that the *QUALITY of sewage* from a restaurant is more to treat than that from a residence, because of the presence of FOG - fats, oils and greases. But not enough attention is given to the fact that HOME sewage can also include high FOG contents from cosmetics, bath oils, suntan lotion, etc. in addition to cooking greases and food scraps. Medications taken by persons living in the home, bleaches and non-eaten plastics and paper can also play havoc with the septic system.

Technical note: Home sewage should have no higher than 60 mg/l in Total Suspended Solids, 20 mg/l in FOG and 300 mg/l in BOD. Exceeding any of these limits can cause serious damage and malfunction to the septic system, in addition to that causes my more VOLUME of sewage than that for which the system was designed.

Aerobic Treatment Units (ATU's) must be approved by the TCEQ and installed, managed, monitored and maintained in accordance with manufacturer's recommendations. All wiring and piping must be in accordance with Ch. 285, septic system regulations, as a MINIMUM.

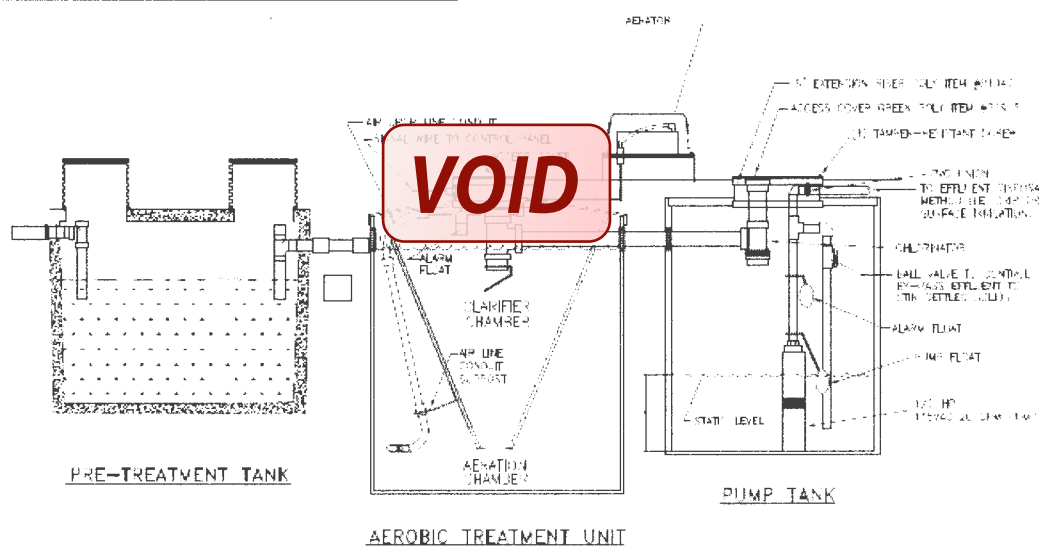
It is not within the scope of this document to cite all the engineering and construction standards that apply to this project. This is a PERFORMANCE design that is modeled to meet...

1. All septic regulations of the Texas Commission On Environment Quality, Chap. 285, version of 28 Dec 2012, and
2. All construction standards that are generally accepted with the septic system industry, and
3. All requirements as stated by the local inspection jurisdiction in which the property sits.

BEST PRACTICES

- Management - The sewage that is sent to the system must be within both its quantitative and qualitative design limits.*
- Monitoring - Every system must be closely watched for any signs of failure. The best monitoring includes specific measurements of its various characteristics.*
- Maintenance - The system must be properly maintained on a regularly scheduled basis by a qualified and licensed person.*

Generic cross-section of a typical ATU:



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It is the owner's responsibility to ensure that the aerobic treatment unit is under a PAID contract with a licensed "maintenance provider. The unit must be checked and tested ONCE EVERY 4 MONTHS [Regulation #285.91 (4)] for the life of the unit and test results shall be submitted to the local septic inspector.

I hereby certify that this design conforms to both TCEQ and local regulations for On-Site Sewage Facilities and, with proper use, maintenance, and under normal climatic conditions, can be expected to function without creating a nuisance.

Sincerely,

Frank Ogden

Frank Aguirre, Registered Sanitarian, Lic. 994, SE 10807, DR 30400

VOID



Septic Systems Express

DBA of Frank Aguirre and Associates, Inc.



1" = 60'

JLP BUILDERS, INC.

20 NOV 2018

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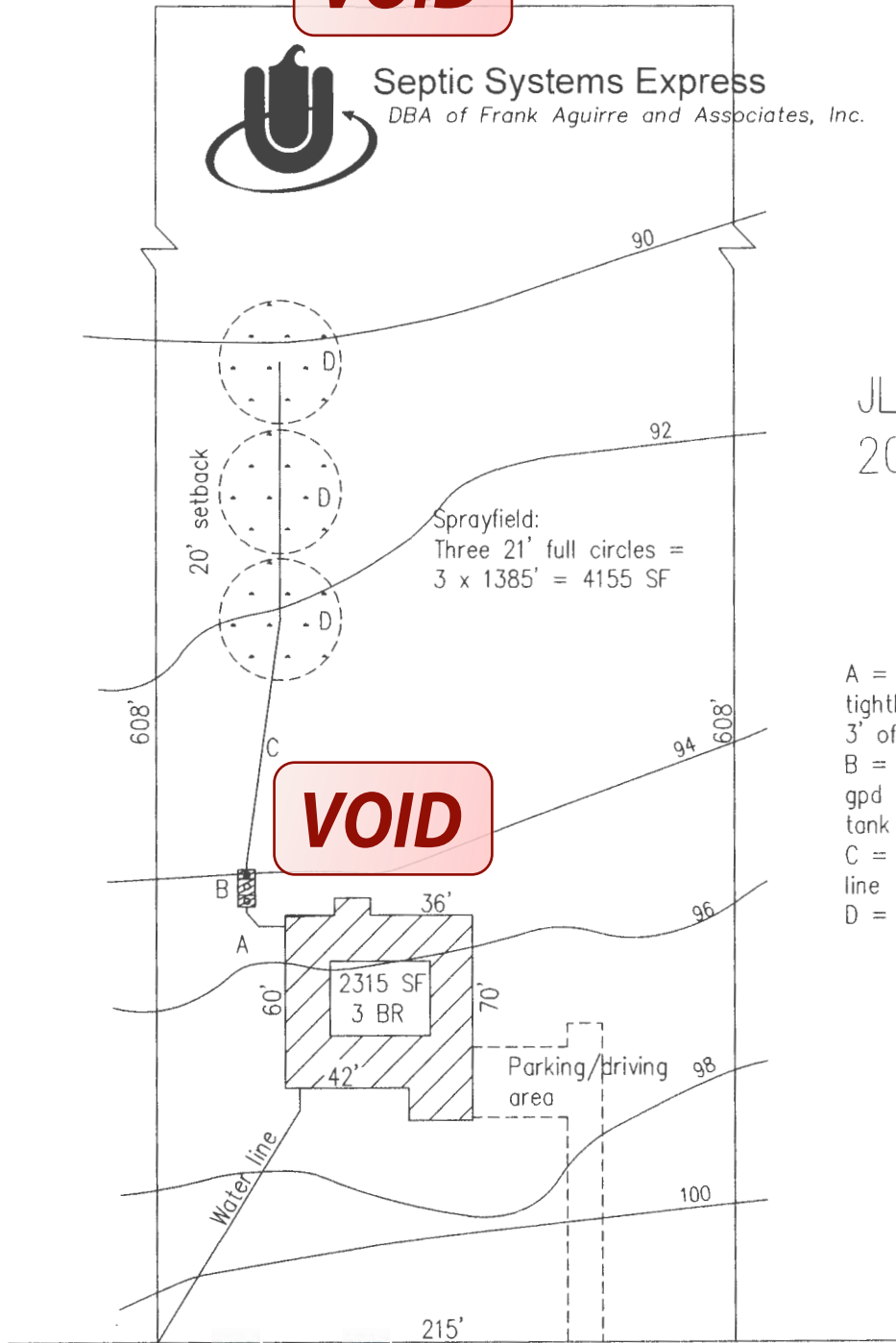
A = ± 12' of 4" pvc, Sch. 40,
tightline with a cleanout within
3' of the house

B = Pre-treatment tank, 500
gpd ATU, chlorinator and pump
tank

C = ± 170' of 1" pvc supply
line

D = 21' radius full circle spray

VOID



176 RED ROSE DR.

Note: The contractor may make field adjustments to the system so as to better fit specific site conditions. All angles, lengths and locations shown are approximate and are adjustable during the

Frank Aguirre



RS 994

OS10807

DR 30400

L-379,U-4

MysticShores

Ritzen, Brenda

From: Ritzen, Brenda
Sent: Monday, January 7, 2019 4:09 PM
To: 'Frank Aguirre'
Subject: Permit 108563

Re: JLP Builders, Inc.
Mystic Shores Unit 4 Lot 379
Application for Permit for Authorization to Construct an On-Site Sewage Facility

Frank,

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

1. The owner name on the Affidavit to the Public doesn't match the owner name as indicated on the recorded deed.
2. Revise as needed and resubmit.

Thank you,

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

POOR QUALITY

176 Red Rose

201806040189 10/11/2018 11:45:40 AM 1/4

176 Red Rose

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 AND/OR YOUR DRIVER'S LICENSE NUMBER.

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WARRANTY DEED WITH VENDOR'S LIEN

DATE: OCTOBER 5, 2018

GRANTOR: MALCOLM CHARLESWORTH and spouse, JANA CHARLESWORTH

GRANTOR'S MAILING ADDRESS (including county):

1903 Lindaver Lane
San Antonio, Bexar County, Texas 78260

GRANTEE: **JLP BUILDERS, INC.**, a Texas corporation, acting under Assumed Name Certificate of
VOGUE & COMPANY, a Texas corporation, dated July 14, 2017

GRANTEE'S MAILING ADDRESS (including county):

15403 Capri Lane
Selma, Bexar County, Texas 78154

CONSIDERATION:

Ten Dollars (\$10.00) and other good and valuable consideration and the execution and delivery by the Grantee herein of Grantee's one certain Promissory Note of even date herewith in the principal amount of **\$277,730.00**, payable to the order of **THE FIRST NATIONAL BANK OF SONORA, TEXAS DBA SONORA BANK**, as therein provided. Said Note bearing interest at the rate therein specified and containing the usual clauses relating to acceleration of maturity and attorney's fees in event of default. Said Note secured by a Vendor's Lien, **TO THE EXTENT OF \$22,141.59**, retained in this Deed and by a Deed of Trust of even date from Grantee herein to KYLE J. BARTON, Trustee, against the herein described property; AND IN CONSIDERATION OF THE ADVANCEMENT OF SAID SUM TO THE GRANTOR HEREIN, THE SAID VENDOR'S LIEN AND SUPERIOR TITLE ARE HEREBY TRANSFERRED AND ASSIGNED UNTO THE FIRST NATIONAL BANK OF SONORA, TEXAS DBA SONORA BANK, which has a mailing address of 1570 River Road, Boerne, Kendall County, TX 78006, without recourse on Grantor.

PROPERTY (including any improvements):

Lot 379, MYSTIC SHORES, UNIT FOUR, situated in Comal County, Texas, according to Plat thereof recorded in Volume 13, Page 393-397, Map and Plat Records of Comal County, Texas.

RESERVATIONS FROM CONVEYANCE:

POOR QUALITY

- b. Rights of tenants, as tenants only, under unrecorded leases or rental agreements.
- c. The following easement(s) and/or building line(s) affecting the subject property as shown on Map or Plat recorded in Volume 13, Page 393, Map or Plat Records, Comal County, Texas and as shown on survey by Steven Lee Wright, R.P.L.S. No. 4823, dated September 11, 2018.

50 foot building line along the North and South property line(s).

30 foot drainage easement located on each side of the centerline of all natural drainage courses, per plat note.

25 foot building line along the North property line(s).

20 foot public utility, drainage and embankment/backslope easement along the North property line(s).

15 foot by 100 foot drainage easement located in the Northeast corner of subject property line(s).

10 foot public utility and drainage easement along the East, West and South property line(s).

25 foot building line along the East and West property line(s).

3 foot encroachment easement along the East, West, and South property line(s).

- d. The terms, provisions, easements, covenants, restrictions and lien for assessments as shown in Restrictions recorded in County Clerk's File No(s). 200106017570, 200206027138, 200406026218, 200406026220, 200606021273, 200906011412, 200906011419, 200906011422, 201006009684, 201006042987, 201106039454, 201206001747, 201206001748, 201206001749, 201206001750, 201206001788, 201206011273, 201306002315, 201306014464, 201306014469, 201306035796, 201306041907, 201306042528, 20140601189, 201406013825, 201406016700, 201406035596, 201406014261, 201506003266, 201506010439, 201506035161, 201506046205, 201506046206, 201606014792, 201606028381, 201606035657, 201706014158, 201706030535, 201706044532, 201706046477, 201706047588 and 201806027644, Real Property Records, Comal County, Texas; when taken with all Amendments and/or Supplements thereto. Said lien is subordinate to any purchase money lien or the renewal and extension thereof.
- e. Easement as created in instrument executed by Bluegreen Southwest One, L.P. to Pedernales Electric Cooperative, Inc., i. dated June 14, 2001, filed June 20, 2001, recorded in County Clerk's File No. 200106019934, Real Property Records, Comal County, Texas.
- f. Those restrictive covenants recorded in Volume 13, Page 393, Plat Records, Comal County, Texas and in County Clerk's File No(s). 200106017570, 200206027138, 200406026218, 200406026220, 200606021273, 200906011412, 200906011419, 200906011422, 201006009684, 201006042987, 201106039454, 201206001747, 201206001748, 201206001749, 201206001750, 201206001788, 201206011273, 201306002315, 201306014464, 201306014469, 201306035796, 201306041907, 201306042528, 20140601189, 201406013825, 201406016700, 201406035596, 201406014261, 201506003266, 201506010439, 201506035161, 201506046205, 201506046206, 201606014792, 201606028381, 201606035657, 201706014158, 201706030535, 201706044532, 201706046477, 201706047588 and 201806027644, Real Property Records, Comal County, Texas, but omitting any covenant, condition or restriction, if any, based on race, color, religion, sex, handicap, familial status, or national origin unless and only to the extent that the covenant, condition or restriction (a) is exempt under Title 42 of the United States Code, or (b) relates to handicap, but does not discriminate against handicapped persons.

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POOR QUALITY

the rights and appurtenances thereto in any wise belonging, to have and hold it to Grantee, Grantee's heirs, executors, administrators, successors, or assigns forever. Grantor binds Grantor and Grantor's heirs, executors, administrators, and successors to warrant and forever defend all and singular the property to Grantee and Grantee's heirs, executors, administrators, successors, and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, except as to the reservations from conveyance and exceptions to conveyance and warranty.

The vendor's lien against and superior title to the property are retained until the above note described is fully paid according to its terms, at which time this deed shall become absolute.

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


MALCOLM CHARLESWORTH


JANA CHARLESWORTH

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STATE OF TEXAS #

COUNTY OF _____ #

This instrument was acknowledged before me on the _____ day of _____, 2018, by MALCOLM CHARLESWORTH.

SEE ATTACHED

Notary Public, State of Texas

STATE OF TEXAS #

COUNTY OF _____ #

This instrument was acknowledged before me on the _____ day of _____, 2018, by JANA CHARLESWORTH.

SEE ATTACHED

Notary Public, State of Texas

AFTER RECORDING RETURN TO:

SONORA BANK
ATTN: LOAN DEPT.
P.O. BOX 1855
BOERNE, TEXAS 78006

PREPARED IN THE LAW OFFICE OF:

KURTIS S. RUDKIN
616 E. BLANCO RD., SUITE 202B
BOERNE, TEXAS 78006

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

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

Permit #: 108563

To: Julianna Watnen
176 RED ROSE STREET
SPRING BRANCH, TX 78070

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

Site: 176 RED ROSE STREET, SPRING BRANCH

Agency: Comal County
County:
Subdivision: Mystic Shores

Installed:
Phone: (941) 524-5827
Cell:
Work:

Contract 5/2/2019 - 5/2/2022
Inspections per year: 3
Service Due: 9/2/2019
Alt Phone:
Warranty Ending:

Inspection Type: _____ Inspection # _____ of _____ for the contract year

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

Test Results and observations: (As Required)

Fecal Coliform: _____
Chlorine Residual: .01
Test Method: Armb
BOD: _____
TSS: _____
Commercial Lab: _____
Date Submitted: _____

Repairs made: Y / N

Repairs and Comments: scum 2" need to add bleach

Inspector: _____ Date: _____

[Signature]

Area / 0
GPS

ID = 1029

Printed 9/18/2019

176 RED ROSE STREET, SPRING BRANCH

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

Phone: (830) 850-0080

Fax: (830) 935-4932

To: Julianna Watnen
176 RED ROSE STREET
SPRING BRANCH, TX 78070

Printed: 9/8/2020

Site: 176 RED ROSE STREET
SPRING BRANCH, TX 78070

(941) 524-5827

Permit #: **108563**

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Mystic Shores

Customer ID: 1029

Contract Dates: 5/2/2019 - 5/2/2022

Scheduled Date: 9/2/2020

Inspection 4 of 9

GPS Coordinates - Latitude: 29.9431 Longitude: -98.3288

Service Type: Scheduled Inspection

☒ This counts as a type of "Scheduled Inspection"

Visit Date: 9/4/2020

Entered By: _

Method: Grab

Technician: Ryan Seidensticker

Maint. Provider: Ryan Seidensticker

Comments

No access

☒ **Service Completed**

Insp ID #: 5733

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

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

Permit #: 108563

To: Julianna Watnen
176 RED ROSE STREET
SPRING BRANCH, TX 78070

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

Site: 176 RED ROSE STREET, SPRING BRANCH
Agency: Comal County
County:
Subdivision: Mystic Shores

Installed:
Phone: (941) 524-5827
Cell:
Work:
Contract: 5/2/2019 - 5/2/2022
Inspections per year: 3
Service Due: 5/2/2020
Alt Phone:
Warranty Ending:

Inspection Type: _____ Inspection # _____ of _____ for the contract year

Item	Operational	Inoperative	N/A	
Aerator:	<u>1</u>	<u> </u>	<u> </u>	<u>1 > 22</u>
Irrigation pump:	<u>1</u>	<u> </u>	<u> </u>	
Air compressor:	<u>1</u>	<u> </u>	<u> </u>	<u>2 = 23</u>
Disinfection device:	<u>1</u>	<u> </u>	<u> </u>	
Chlorine supply:	<u>1</u>	<u> </u>	<u> </u>	<u>3 = 4</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>	
Autodialer:	<u> </u>	<u> </u>	<u>1</u>	
Water Meter Reading:	CFM: <u> </u>	PSI: <u> </u>		

Test Results and observations: (As Required)

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

Repairs made: Y / N

Repairs and Comments:

SC 4 m = 3

Inspector: J. Watnen

Date:

Area: 10
GPS: 29 9431 -98 3288 ID = 1029

Printed 6/1/2020

176 RED ROSE STREET, SPRING BRANCH

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

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

To: Julianna Watnen
176 RED ROSE STREET
SPRING BRANCH, TX 78070

Printed: 5/4/2021
Site: 176 RED ROSE STREET
SPRING BRANCH, TX 78070
(941) 524-5827

Permit #: **108563**

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Mystic Shores

Customer ID: 1029

Contract Dates: 5/2/2019 - 5/2/2022

Scheduled Date 5/2/2021

Inspection 6 of 9

GPS Coordinates - Latitude: 29.9431 Longitude: -98.3288

Service Type: Scheduled Inspection

Visit Date: 5/3/2021

Method: Grab

Technician: Ryan Seidensticker

Maint. Provider: Ryan Seidensticker

☒ This counts as a type of "Scheduled Inspection"

Entered By: _

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: 0.19

Sludge Levels

For Tank 1: 13

For Tank 2: 22

For Tank 3: 11

☒ **Pumping Needed**

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: 13" M.W - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Tank needs Pumping.

Owner signature: _____

Insp ID #: 9421

**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: Julianna Watnen
176 RED ROSE STREET
SPRING BRANCH, TX 78070

Printed: 9/17/2021
Site: 176 RED ROSE STREET
SPRING BRANCH, TX 78070
(941) 524-5827

Permit #: **108563**

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Mystic Shores

Customer ID: 1029

Contract Dates: 5/2/2019 - 5/2/2022

Scheduled Date 9/2/2021

Inspection 7 of 9

GPS Coordinates - Latitude: 29.9431 Longitude: -98.3288

Service Type: Scheduled Inspection

Visit Date: 9/16/2021

Method: Grab

Technician: Nick Zigalo

Maint. Provider: Ryan Seidensticker

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: 0.04

Sludge Levels

For Tank 1: 16

For Tank 2: 20

For Tank 3: 4

☒ This counts as a type of "Scheduled Inspection"

Entered By: Danielle Jordan

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

☒ **Service Completed**

Insp ID #: 11884

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: Julianna Watnen
176 RED ROSE STREET
SPRING BRANCH, TX 78070

Printed: 1/28/2022
Site: 176 RED ROSE STREET
SPRING BRANCH, TX 78070
(941) 524-5827

Permit #: **108563**

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Mystic Shores

Customer ID: 1029

Contract Dates: 5/2/2019 - 5/2/2022

Scheduled Date: 1/2/2022

Inspection 8 of 9

GPS Coordinates - Latitude: 29.9431 Longitude: -98.3288

Service Type: Scheduled Inspection

☒ This counts as a type of "Scheduled Inspection"

Visit Date: 1/28/2022

Entered By: _

Method: Grab

Technician: Not Assigned

Maint. Provider: Ryan Seidensticker

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: .21

Sludge Levels

For Tank 1: 14

For Tank 2: 26

For Tank 3: 2

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 10"

Scum on clarifier 16"

pumping recommended due to sludge and scum buildup, please contact our office - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving.

Insp ID #:14893

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: Julianna Watnen
176 RED ROSE STREET
SPRING BRANCH, TX 78070

Printed: 5/10/2022
Site: 176 RED ROSE STREET
SPRING BRANCH, TX 78070
(941) 524-5827

Permit #: **108563**

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Mystic Shores

Customer ID: 1029

Contract Dates: 5/2/2019 - 5/2/2022

Scheduled Date: 5/2/2022

Inspection 9 of 9

GPS Coordinates - Latitude: 29.9431 Longitude: -98.3288

Service Type: Scheduled Inspection

☒ This counts as a type of "Scheduled Inspection"

Visit Date: 5/9/2022

Entered By: Michelle Irvin

Method: Grab

Technician: Not Assigned

Maint. Provider: Ryan Seidensticker

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: .15

Sludge Levels

For Tank 1: 10

For Tank 2: 4

For Tank 3: 2

Tank Lid / Riser: Secured

Sprinkler Drip Backwash: Good

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Color: Good

Odor: Good

Alarm: Operational

Comments

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

☒ **Service Completed**

Insp ID #:17526

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

License Info: MP0001708 Expires:

Luna Environmental

4222 FM 482

New Braunfels, TX 78132

(830) 312-8776

sherrie@lunaenvironmental.com

Printed:10/30/2023

Permit: 108563

Site: 176 Red Rose Street, Spring Branch, TX 78070

Main Phone: 8305000715

Cell Phone: 8305000251

Julianna & Quintin Santiago

176 Red Rose Street

Spring Branch, TX 78070

Agency: Comal County

County: Comal

Subdivision: Mystic Shores

System Info: MFG: Brand: MAXX AIR

Customer ID: 2428

Treatment Type: Aerobic

Disposal Type: Surface Application

Insp ID: 34403

Installed: 5/2/2019

Warranty Expiration: 5/2/2021

Visit Details

Visit Date: 10/13/2023

Entered By: Ryan Seidensticker

GPS Lat: 29.9431 GPS Long: -98.3288

Scheduled Date: 8/31/2023

Contract Starts: 7/15/2023

Customer Emailed: 10/30/2023

Entered On: 10/13/2023

Contract Ends: 7/15/2025

Visit Results

Service Type: Scheduled Inspection

Count: Inspection 1 of 6

Method: Grab

License #

Expires

Technician: Luke Campbell

MT0002614

9/30/2026

Provider: Luna Environmental, LLC

☒ Service Completed

Aerators: Operational

Sludge Level Tank 1: 6

Filters: Operational

Sludge Level Tank 3: 12

Irrigation Pumps: Operational

Sludge Level Tank 4: 2

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: .1

Tank Lid / Riser: Secured

Insp. Port / Plug: Secured

Electric Circuits: Operational

Distribution System: Operational

Drip/Sprayfield Veg: Operational

Alarm: Operational

PSI Pressure: 2.6

Comments

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 10/30/2023.