



Comal County

OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: 02/21/2019 Permit Number: 108591

Location Description: 1229 MAGNUM NEW BRAUNFELS, TX 78132
Subdivision: Vintage Oaks at the Vineyard
Unit: 6
Lot: 1003
Block:
Acreage:

Type of System: Aerobic Surface Irrigation

Issued to: Century Land Holdings, II, LLC D/B/A Century LH II, LLC

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

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

Alterations to this permit including, but not limited to:

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

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

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

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

Licensing Authority
Comal County Environmental Health

Michael Lopez OS8497
ENVIRONMENTAL HEALTH INSPECTOR

Sandra Ann Hernandez, Asst.
ENVIRONMENTAL HEALTH COORDINATOR
OS 0025599

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: J.B. Septic / Jim Blake      OSSF Installer #: 080018531  
 1st Inspection Date: 2/15/19      2nd Inspection Date: 2-15-19      3rd Inspection Date: \_\_\_\_\_  
 Inspector Name: Mike T.      Inspector Name: Mike T.      Inspector Name: \_\_\_\_\_  
 Permit#: 108591      Address: Vintage Oaks / 1229 Magnum Dr.

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)		2/15/19		
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	✓	285.91(10) 285.30(b)(4) 285.31(d)				
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	✓	285.32(a)(1)				
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	✓	285.32(a)(3)				
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)	✓	285.32(a)(5)				
6	PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(G)285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(A) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(I)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

MT-2/15/19  
 Tank set, leveled  
 Leave tanks open (wet)  
 Operational ✓  
 Cover or remove rock in spray

2-15-19 MT  
 Covered w/o  
 Tank check.  
 call installer.

**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	✓		1200 gal	2/5/19		
14	AEROBIC TREATMENT UNIT Size Installed	✓		600			
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	✓		Cleanstream			
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
19	DISPOSAL SYSTEM Drip Irrigation		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(4) 285.33(a)(3) 285.33(a)(1) 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)				

**Comal County Environmental Health  
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)		2/5/19		
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	✓					
37	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	✓					
38	PUMP TANK Secondary restraint system provided	✓					

Comal County Environmental Health  
OSSF Inspection Sheet

39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried				2/5/19		
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**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	✓	285.33(d)(2)(G)(iii)(II)285.33(d)(2)(G)(iii)(III)285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(I)		2/5/19 		
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed	✓	285.33(d)(2)(G)(I) 285.33(d)(2)(A) 285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements	✓		1200 gal single	2/5/19		
44	PUMP TANK Material Type & Manufacturer	✓		Concrete / Clearstream			
45	PUMP TANK Type/Size of Pump Installed	✓		1200 gal. Concrete			

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: J.B. Septic / Jim Blake OSSF Installer #: \_\_\_\_\_

1st Inspection Date: 2/5/19 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: \_\_\_\_\_

Inspector Name: Mike T. Inspector Name: \_\_\_\_\_ Inspector Name: \_\_\_\_\_

Permit#: 108591 Address: Vintage Oaks / 1229 Magnum Dr.

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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MT-2/5/19

Tank set, leveled  
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33	<p>AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.</p>	✓	285.32(c)(1)		2/5/19		
34	<p>AEROBIC TREATMENT UNIT Inspection/Clean Out Port &amp; Risers Provided</p> <p>AEROBIC TREATMENT UNIT Secondary restraint system provided</p> <p>AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank</p> <p>AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions</p>	✓					
35	<p>AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.</p>	✓					
36	<p>PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials &amp; construction</p> <p>PUMP TANK Sampling Port Provided in the Treated Effluent Line</p> <p>PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required</p> <p>PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump</p>	✓					
37	<p>PUMP TANK Inspection/Clean Out Port &amp; Risers Provided</p> <p>PUMP TANK Secondary restraint system provided</p> <p>PUMP TANK Riser permanently fastened to lid or cast into tank</p> <p>PUMP TANK Riser cap protected against unauthorized intrusions</p>	✓					
38	<p>PUMP TANK Secondary restraint system provided</p>	✓					

Comal County Environmental Health  
OSSF Inspection Sheet

39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried				2/5/19		
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**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	✓	285.33(d)(2)(G)(iii)(II)285.33(d)(2)(G)(iii)(III)285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(I)		2/5/19 		
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42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements	✓		1200 gal single	2/5/19		
44	PUMP TANK Material Type & Manufacturer	✓		Concrete / Cleanstream			
45	PUMP TANK Type/Size of Pump Installed	✓		1200 gal. Concrete			



# 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: 108591  
Issued This Date: 01/10/2019  
This permit is hereby given to: Century Land Holdings, II, LLC D/B/A Century LH II, LLC

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

1229 MAGNUM  
NEW BRAUNFELS, TX 78132

Subdivision: Vintage Oaks at the Vineyard  
Unit: 6  
Lot: 1003  
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.

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

Date \_\_\_\_\_ Permit # 108591  
 Owner Name Century Land Holdings, II, LLC, a Colorado limited liability company, D/B/A Century LH II, LLC Agent Name JB Septic Systems, Inc  
 Mailing Address 6500 River Place Blvd. Building 2, Suite 200 Agent Address P.O. Box 1609  
 City, State, Zip Austin TX 78730 City, State, Zip Helotes, Texas 78023  
 Phone # 512-271-3825 Phone # 830-931-0292  
 Email mary.limmons@centurycommunities.com Email info@jbsepticssystemsincc.com

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

Subdivision Name Vintage Oaks at the Vineyard Unit 6 Lot 1003 Block \_\_\_\_\_  
 Acreage/Legal \_\_\_\_\_  
 Street Name/Address 1229 Magnum City New Braunfels Zip 78132

**Type of Development:**

Single Family Residential  
 Type of Construction (House, Mobile, RV, Etc.) House  
 Number of Bedrooms 4  
 Indicate Sq Ft of Living Area 3,844

RECEIVED  
**DEC 31 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: \$ 350,000 (Structure Only)

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

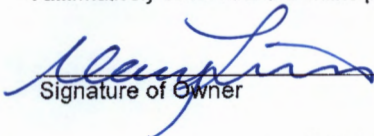
Yes  No (If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water  Public  Private Well

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

By signing this application, I certify that:

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

  
 Signature of Owner

12/14/18  
 Date

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

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

System Description Aerobic Treatment with Spray Irrigation

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

Tank Size(s) (Gallons) 500/600/1,200 Absorption/Application Area (Sq Ft) 5,652

Gallons Per Day (As Per TCEQ Table III) 360

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

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

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

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

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

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

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

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

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

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

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

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

Is this property within an incorporated city?  Yes  No

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

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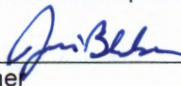
DEC 31 2018

COUNTY ENGINEER

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 12-28-18

Page 2 of 2



2/c

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The County of Comal §  
State of Texas §

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CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

COUNTY ENGINEER

I

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

II

An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code § 285.91(12) will be installed on the property described as Tract 2: Lot 1003, Vintage Oaks at the Vineyard, Unit 6, an addition to Comal County, Texas and according to the plat of the development filed of record in Document No. 201306051565, Map and Plat Records of Comal County, Texas.

The property is owned by Century Land Holdings, II, LLC a Colorado limited liability company, D/B/A Century LH II, LLC

This OSSF must be covered by a continuous maintenance contract for the first two years. After the initial two-year service policy, the owner of an aerobic treatment system for a single family residence shall either obtain a maintenance contract within 30 days or maintain the system personally.

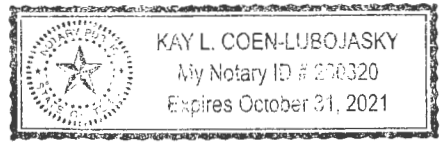
Upon sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the Comal County Engineer's Office.

WITNESS BY HAND(S) ON THIS 14<sup>th</sup> Day of December, 2018

Mary Timmons  
Mary Timmons, New Home Sales Coordinator  
Central Texas, Century LH II, LLC

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 14<sup>th</sup>  
DAY OF December, 2018

Kayl Coen-Lubojsky  
Notary Public, State of Texas



Notary/s Printed Name: KAYL COEN-LUBOJASKY  
My Commission Expires: 10 31 2021



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

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

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
12/28/2018 04:25:08 PM  
JESSICA 2 Page(s)  
201806049126



*Bobbie Koepf*

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

Page one

**System Owner:  
Century Land Holdings II, LLC**

Brand Name: Clearstream Wastewater System  
System Name: Primary  
Serial Number: \_\_\_\_\_  
Model Number: \_\_\_\_\_  
Permit Number: \_\_\_\_\_

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COUNTY ENGINEER

Site: Legal Description: 1229 Magnum, Lot 1003  
Vintage Oaks at the Vineyard, Unit 6, Comal County

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

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

**Testing and Reporting**

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

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

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

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

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

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Page Two

COUNTY ENGINEER

This Policy Does Not Include;

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

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

**MAINTENANCE COMPANY:**

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

**MANUFACTURER:**

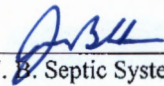
Clearstream Wastewater Systems, Inc.  
P.O. Box 7568  
Beaumont, Texas 77726-7568  
(409) 755-1500

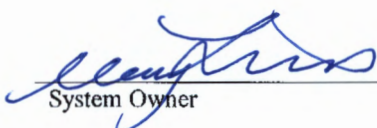
**Installation Company:**

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

**Permitting Authority:**

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

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

  
\_\_\_\_\_  
System Owner

Service Company Operator License Number: MP0000892

**J. B. Septic Systems, Inc.**

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

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**DEC 31 2018**

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

**COUNTY ENGINEER**

November 26, 2018

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

RE: Lot 1003, Vintage Oaks at the Vineyard, Unit 6  
(1229 Magnum)

To Whom It May Concern:

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

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

Sincerely,



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

# J. B. Septic Systems, Inc.

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

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

## SITE EVALUATION

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LOCATION: Lot 1003, Vintage Oaks at the Vineyard, Unit 6 COUNTY ENGINEER  
(1229 Magnum) Comal County

I. USDA County Soils Survey Classification: (DtD) Comfort-Rock Outcrop Complex

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

III. Soil Profile: 0 – 10" clay soil with stones underlain by limestone  
(Describe sample)

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

V. Soil Structure: Blocky

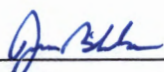
VI. Restrictive Horizons (Note any dense clay sub-soils, rock or fractured rock, depth of groundwater etc.): Rock at approximately 10"

VII. Topography: 2-3 % slope

VIII. Flood Hazard: No

IX. Overall Site Suitability: The site is Suitable for Aerobic Treatment with Spray Irrigation.

X. Recharge Zone: Yes. No recharge features found within 150 Ft. of OSSF site.

  
Signature

November 26, 2018  
Date

OS0010832  
Registration #



**J.B. Septic Systems, Inc.**

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

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

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**ON-SITE SEWAGE FACILITY DESIGN**

COUNTY ENGINEER

FOR: Century LH II, LLC  
6500 River Place Blvd., Building 2, Suite 200  
Austin, TX 78730

LOCATION: 1229 Magnum  
Lot 1003  
Vintage Oaks at the Vineyard, Unit 6  
Comal County

DEVELOPMENT: Proposed Four-bedroom residence with 3,844 sq. ft. living area.

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

SEWAGE FACILITY DESCRIPTION: Clearstream Aerobic Treatment System with timer, chlorinator, sprinkler pump, and sprinkler heads covering a surface application area of 5,652 square feet. The timer is set for spray between midnight and 5:00 A.M.

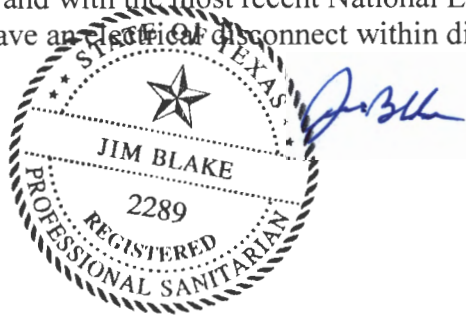
**CALCULATION:**

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

**ACTUAL APPLICATION AREA TO BE COVERED:**

$$\begin{array}{l} (\text{Radius of Sprinkler Head}) \times (\text{Radius of Sprinkler Head}) \times 3.14 = \text{Sq. Ft.} \\ \text{Two Full circle sprinkler heads, each one with a 30 foot radius} = \underline{5,652 \text{ Sq. Ft.}} \\ \text{Total} = \underline{5,652 \text{ Sq. Ft.}} \end{array}$$

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



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**AEROBIC TREATMENT SYSTEM COMPONENTS AND REQUIREMENTS:**

COUNTY ENGINEER

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

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

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

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

**DATE:** November 26, 2018

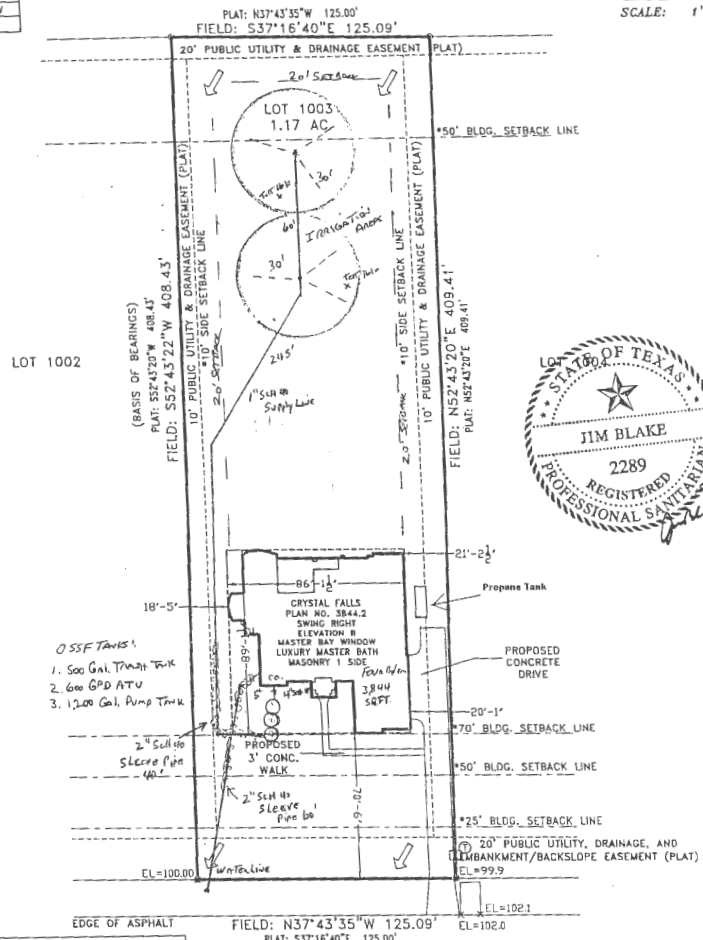
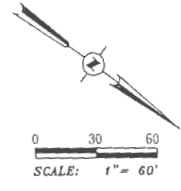
  
\_\_\_\_\_  
**Jim Blake, Professional Sanitarian #2289**





LOT COVERAGE	
TOTAL LOT AREA	51,114 SQ.FT.
SOD AREA FRONT	N/A SQ.FT.
SOD AREA REAR	N/A SQ.FT.
SLAB	5,484 SQ.FT.
DRIVEWAY	1,670 SQ.FT.
DRIVEWAY APRON	253 SQ.FT.
ENTRY WALK	227 SQ.FT.
PUBLIC WALK	N/A SQ.FT.
FENCE	N/A LINEAR FT.
HOUSE ORIENT.	SW/NW
IMP. COVERAGE	11.9 %

BRAND, TROY C. & PATRICIA L.,  
47.239 AC. (VOL. 49747, PG. 6) OPRCCT



At the point where the OSSF sprinkler supply line and the water supply line cross or come within 10 Ft. of each other, equivalent protection will be provided by installing a sleeve pipe on both lines, a minimum distance to create the equivalent of a 10 Ft. separation. The sleeve pipe will be 2" schedule 40.

(ADDRESS: 1229)  
**MAGNUM**  
(60' RIGHT-OF-WAY)



STATE OF TEXAS  
COUNTY OF COMAL  
I hereby certify that the above plot is true and correct according to an actual survey made on the ground under my supervision and that there are no visible encroachments or encroachments of buildings on adjoining property, and that all buildings are wholly located on this property except as shown above and that all corners have been located as indicated above on the date on this plot.

This 20th day of FEBRUARY, 2018 A.D.

- NOTE:
- THIS PROPOSED SITE PLAN IS NOT A BOUNDARY SURVEY, AND IS PREPARED FOR ILLUSTRATION PURPOSES ONLY.
  - \*RESTRICTIONS SHOWN ARE PER BUILDER.
  - ALL FLATWORK TO BE DETERMINED BY BUILDER.
  - DRAINAGE FLOW SHOWN IS APPROXIMATE PER THE RECORDED SUBDIVISION PLAT.

Revised: 02/20/2018  
This supersedes survey drawing dated: 07/07/2017  
Revisions: House Plan Changed  
SAUL V. CASTILLO  
REGISTERED PROFESSIONAL LAND SURVEYOR No. 6192

PLAT LEGEND	
●	1/2" IRON ROD FOUND
○	1/2" IRON ROD SET
□	ELECTRIC BOX
⊕	TELEPHONE RISER
EL=	SPOT ELEVATION

DATE: 02/20/2018	REVISIONS:
D.B. C.S.	
S.B. ---	

PREPARED FOR CENTURY HOMES

**CROSS BRANCH SURVEYING**  
3219 EDENWALK  
SAN ANTONIO, TEXAS 78217  
(210) 828-1102  
T.B.P.L.S. TRM REG. NO. 10180700

**FINAL PLOT PLAN**  
1229 MAGNUM,  
LOT 1003,  
VINTAGE OAKS AT THE VINEYARD,  
UNIT 6  
COMAL COUNTY, TEXAS

W.O. No. 17-21A  
COUNTY ENGINEER

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STATE MANDATED REGULATION CONCERNING AEROBIC SYSTEMS

NAME: Century LH II, LLC  
LOCATION: 1229 Magnum, New Braunfels, TX 78132  
DATE: November 26, 2018

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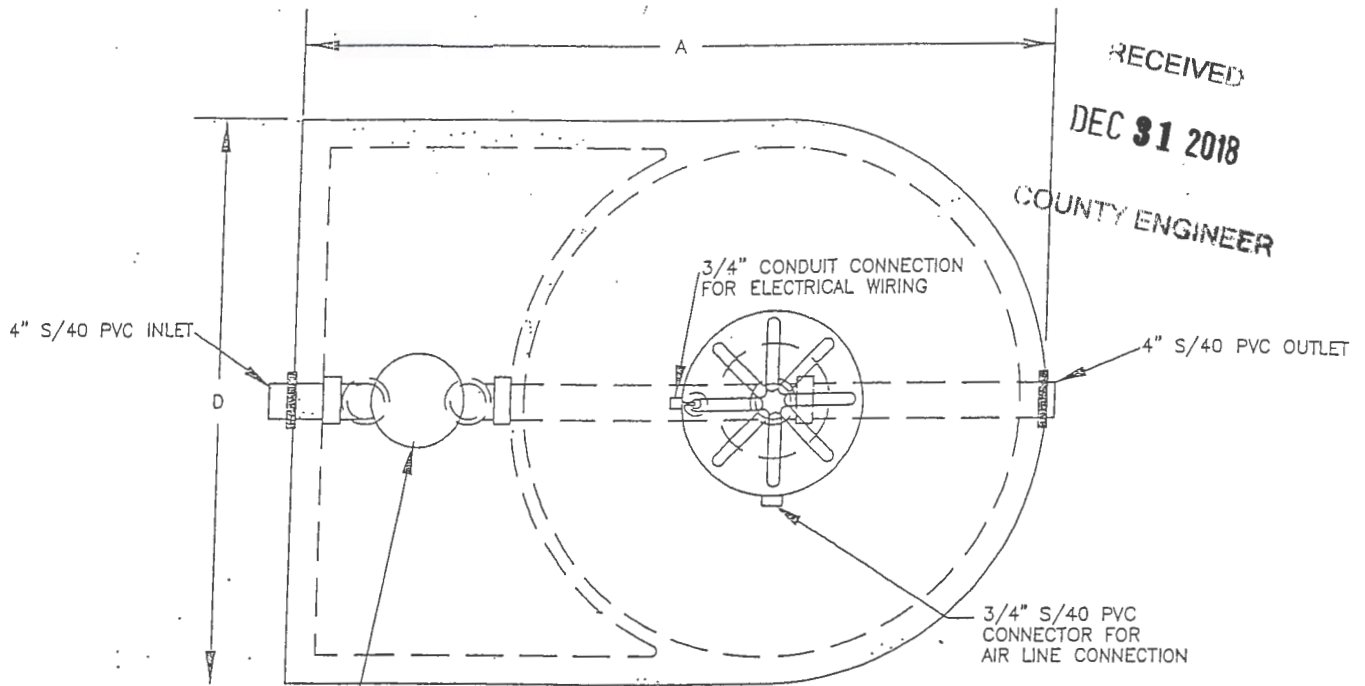
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As part of the installation of this system, the Texas Commission On Environmental **COUNTY ENGINEER**  
Quality requires the following:

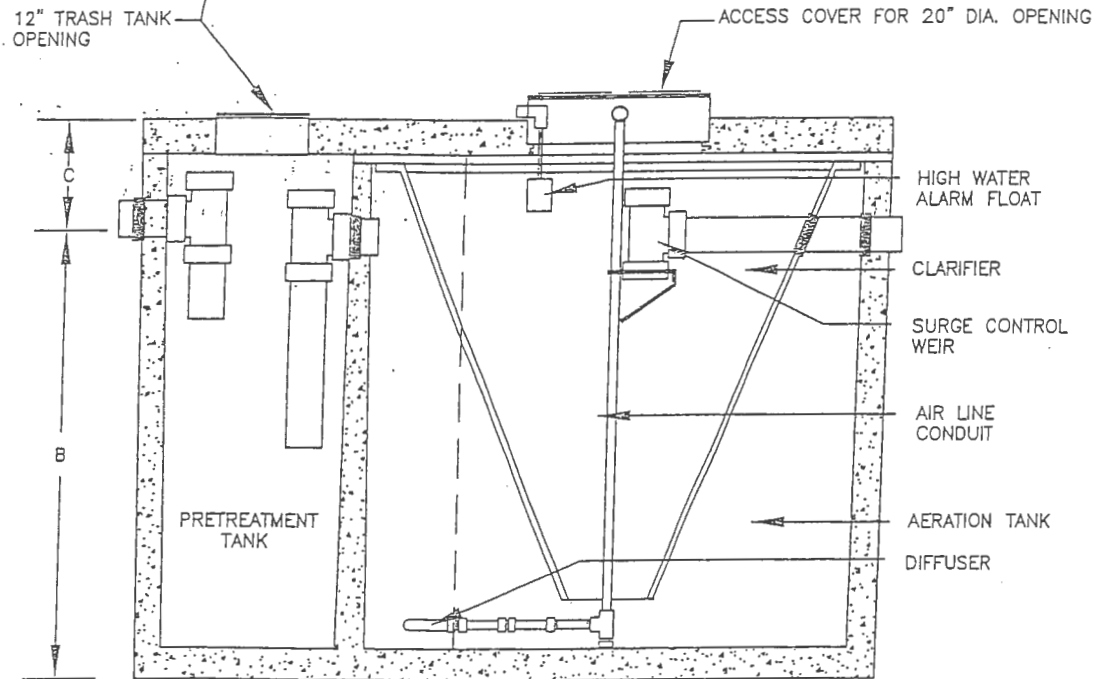
1. The property owner and the aerobic system maintenance contractor shall enter into a 2 year (minimum) full service maintenance contract in which the company will provide periodic inspections for system compliance with effluent standards. This contract will authorize the maintenance company to operate,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

DESIGN DRAWINGS

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PLAN VIEW

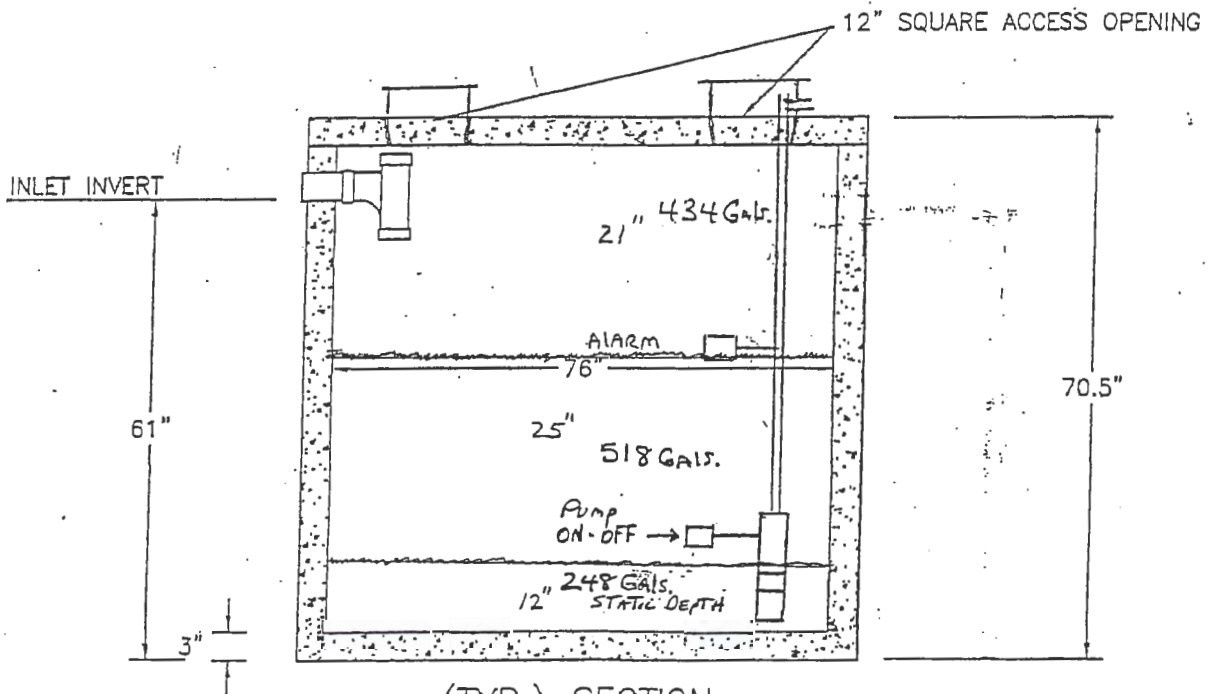
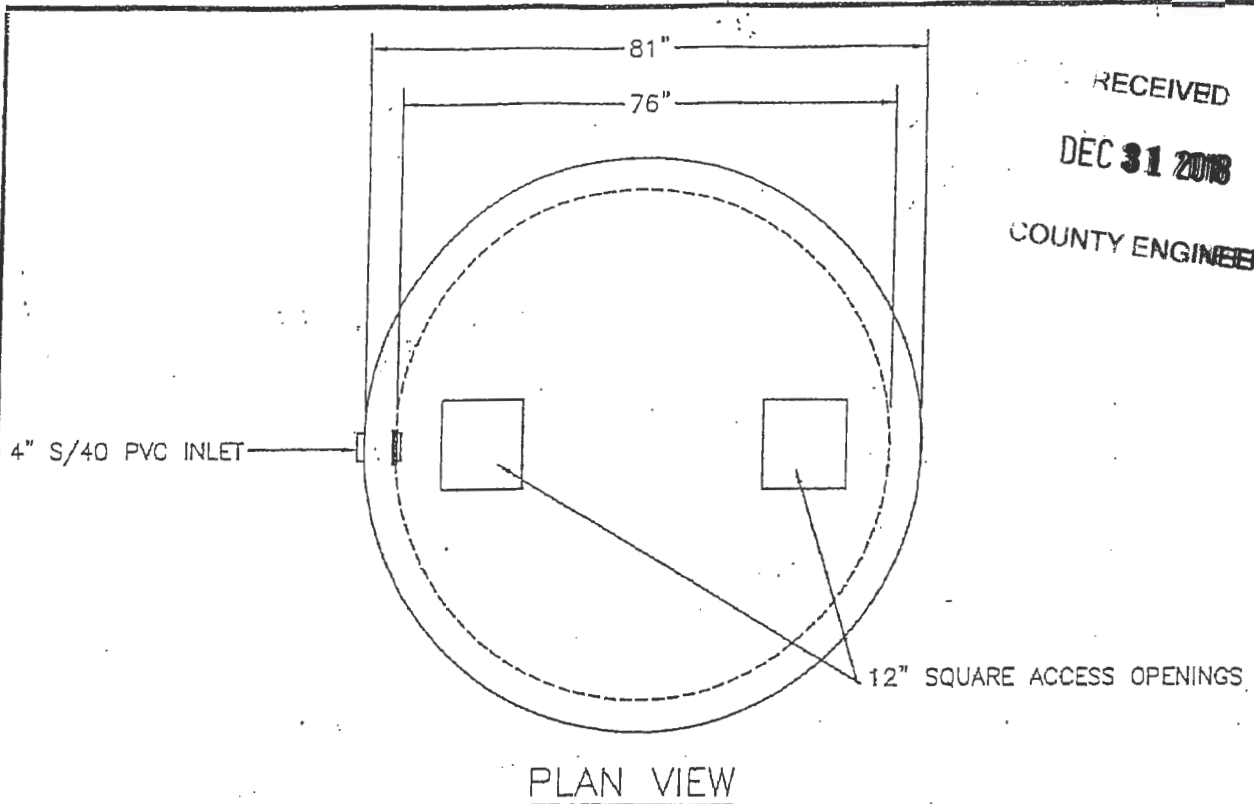


MODEL NC2  
 SECTION

DIMENSIONAL DATA

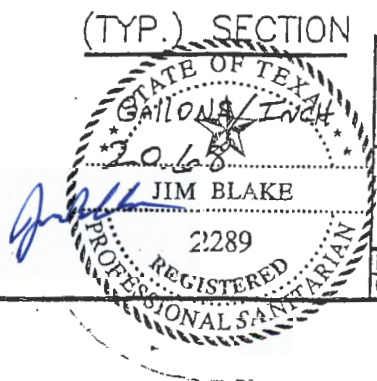
MODEL	A	B	C	D
500 NC2	104"	60"	10-1/2"	75"
600 NC2	107"	60"	10-1/2"	82"
750 NC2	107"	70"	10-1/2"	82"
800 NC2	107"	72"	8-1/2"	82"

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NOTICE OF CONFIDENTIAL INFORMATION

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



**CLEARSTREAM®**  
 WASTEWATER SYSTEMS, INC.  
 P.O. Box 8337 Beaumont, Texas 77709

1,200 GALLON PUMP TANK  
 PRE-CAST CONCRETE

DRAWN: CWP	CHKD: JM	DATE: 5/08	REV: 0	REV. DATE: 00/00	NUMBER: 10000804
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# OWNER'S MANUAL

## SERIES P20 4" SUBMERSIBLE PUMP

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

Installation • Operation

### LIMITED WARRANTY

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

Product	Warranty Period
4" Submersible Pump	2 year

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

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

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

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

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

Supersedes all previous publications.

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

CLEARSTREAM

P.O. Box 9337, Beaumont, TX 77709

DEC 31 2018

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

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

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

**OPERATION**

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

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

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

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

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

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

is permissible for all sizes.

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

**Motor Insulation Resistance Readings**

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

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

**Important Electrical Grounding Information**

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

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

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

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

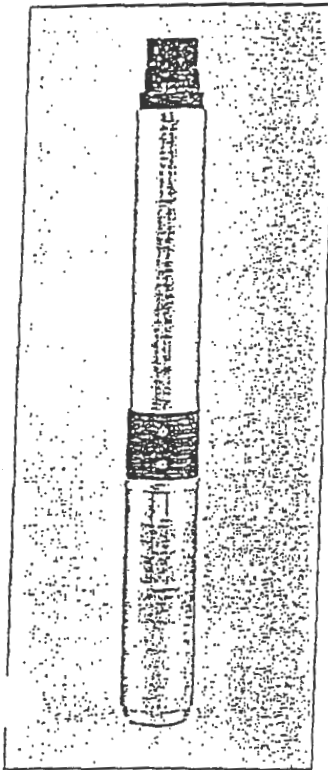
**Save these instructions.**

COUNTY ENGINEER

**CLEARSTREAM®**  
WASTEWATER SYSTEMS, INC.

**P20**

**Submersible Effluent Pump**



**GENERAL DESCRIPTION**

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

**APPLICATIONS**

Designed for pumping filtered effluent.

**SPECIFICATIONS**

- Shell: stainless steel
- Discharge: fiberglass-reinforced thermoplastic
- Discharge bearing: Nylatron®
- Intermediate bearing: (on larger units) polycarbonate, nitrile rubber, and stainless steel
- Impellers: Delrin®
- Diffusers: Lexan®
- Suction caps: Lexan® with stainless steel insert
- Thrust pads: proprietary spec.
- Shaft and coupling: stainless steel
- Intake: fiberglass-reinforced thermoplastic
- Intake screen: polypropylene
- Cable guard: stainless steel
- Agency Listings: UL 778

**FEATURES**

- Patented Staging System – Our proven Signa-Seal™ staging system incorporates a harder-than-sand ceramic wear surface that when incorporated with our floating stack design, greatly reduces problems with abrasives, sand lock-up and running dry.
- Discharge – Fiberglass-reinforced thermoplastic material for durability in aggressive water. Octagon-shaped to fit pipe wrench.
- Discharge Bearing – Exclusive self-lubricating Nylatron® bearing resists wear from sand.
- Intake – Fiberglass-reinforced thermoplastic material for durability in aggressive water.
- Shaft – Positive drive from hexagonal heavy-duty 300 grade stainless steel.
- Coupling – Stainless steel press fit to pump shaft. Couples to all standard NEMA motors.
- Shell – Highest grade, heavy-walled corrosion-resistant stainless steel. Threaded for easy servicing.
- Hardware – All screws, washers and nuts are corrosion-resistant 300 grade stainless steel.
- Check Valve – Durable internal check valve.
- Cable Guard – Corrosion-resistant stainless steel guard protects motor leads. Tapered ends prevent pump from catching on well.
- Corrosion-proof intake screen
- Franklin Electric Motor – 100% corrosion-resistant stainless steel construction. Constant lubrication through water-filled design. Hermetically-sealed stator assures moisture-free windings. Built-in surge arrester provided on 1/2 HP through 1-1/2 HP, single-phase pumps for added protection. All thrust absorbed by durable Kingsbury-type thrust bearing. Replaceable motor lead assembly. NEMA standard motors, 2- and 3-wire.

**ORDERING INFORMATION**

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

**PERFORMANCE**

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



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

- © Nylatron is a registered trademark of Polymer Corp.
- © Lexan is a registered trademark of General Electric Co.
- © Delrin is a registered trademark of E.I. DuPont de Nemours and Co.

Specifications are subject to change without notice.



**— NOTE —**

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

# PROPLUS® GEAR DRIVEN SPRINKLER SETTING INSTRUCTIONS

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

## CHANGING A NOZZLE

### 1 USE YOUR K-KEY

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

### 2 PULL UP THE RISER

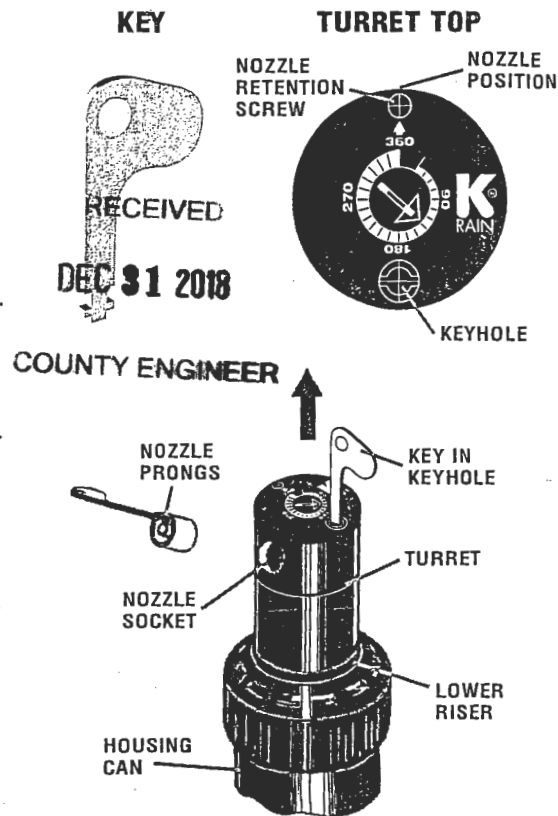
Firmly pull the entire spring loaded riser up with the K-Key to access the nozzle socket. Hold the riser up with one hand.

### 3 REMOVE THE NOZZLE

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

### 4 INSTALL A NOZZLE

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

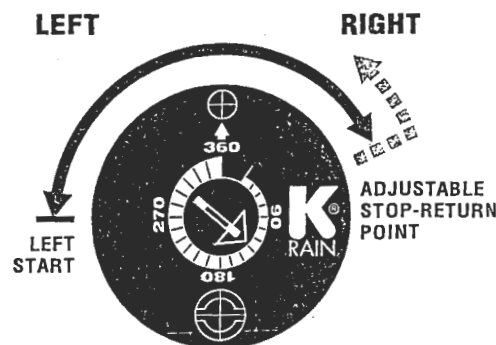


## PROPLUS IS ADJUSTABLE AND CONTINUOUS 360° ALL IN ONE MODEL

### SETTING THE ARC ADJUSTMENT (PRESET AT 90°)

### 5 FIND THE LEFT START POSITION

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



### 6 TO CHANGE THE ARC SETTING BEFORE INSTALLATION

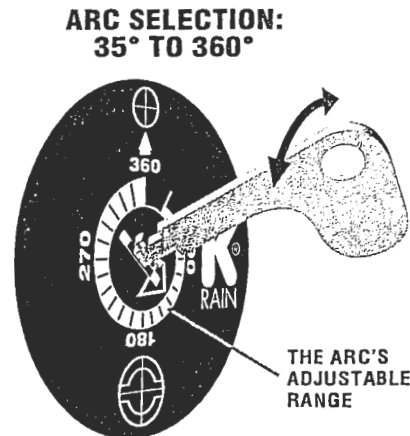
Follow step 5 above to find the **LEFT START** as a reference point. To **INCREASE THE ARC**, insert the K-Key into the arc indication **ARROW SLOT** at the center of the turret. While holding the turret with your fingers, turn the K-Key **CLOCKWISE** until the arc **INDICATION ARROW** points to the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

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

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

### WITH THE SPRINKLER RUNNING

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





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

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

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

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

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(1) Water softener.

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

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

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

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

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

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

(2) Reverse osmosis system.

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

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

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

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

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

Adopted April 7, 2004

Effective April 28, 2004



# VINTAGE OAKS

Texas Hill Country

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COUNTY ENGINEER

1 to 14 Acre Homesites Available

830-224-2688

VintageOaksTexas.com



\*Note: Map is marked with lot numbers, not addresses.

FILED BY  
PRESIDIO TITLE  
2-16-88 JFD

201606040901 10/28/2016 08:13:49 AM 1/4

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.

SPECIAL WARRANTY DEED

THE STATE OF TEXAS

§

KNOW ALL MEN BY THESE PRESENTS:

§

COUNTY OF COMAL

§

Grantor: SOUTHSTAR AT VINTAGE OAKS, LLC  
P. O. Box 630105  
Irving, Texas 75063-0105

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COUNTY ENGINEER

Grantee: CENTURY LAND HOLDINGS, II, LLC, a Colorado limited liability company,  
D/B/A CENTURY LH II, LLC  
8390 E. Crescent Parkway, Suite 650  
Greenwood Village, Colorado 80111

That Grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) cash and other good and valuable consideration to it in hand paid by Grantee, the receipt of which is hereby acknowledged and confessed has GRANTED, SOLD and CONVEYED, and by these presents does GRANT, SELL and CONVEY, unto the Grantee, the Property described herein to wit:

TRACT 1: Lot 999, VINTAGE OAKS AT THE VINEYARD, UNIT 6, an addition to Comal County, Texas and according to the plat of the development filed of record in Document #201306051565, Map and Plat Records of Comal County, Texas

TRACT 2: Lot 1003, VINTAGE OAKS AT THE VINEYARD, UNIT 6, an addition to Comal County, Texas and according to the plat of the development filed of record in Document #201306051565, Map and Plat Records of Comal County, Texas

TRACT 3: Lot 1004, VINTAGE OAKS AT THE VINEYARD, UNIT 6, an addition to Comal County, Texas and according to the plat of the development filed of record in Document #201306051565, Map and Plat Records of Comal County, Texas

TRACT 4: Lot 1012, VINTAGE OAKS AT THE VINEYARD, UNIT 6, an addition to Comal County, Texas and according to the plat of the development filed of record in Document #201306051565, Map and Plat Records of Comal County, Texas

TRACT 5: Lot 1030, VINTAGE OAKS AT THE VINEYARD, UNIT 6, an addition to Comal County, Texas and according to the plat of the development filed of record in Document #201306051565, Map and Plat Records of Comal County, Texas

(TRACT 1, TRACT 2, TRACT 3, TRACT 4 and TRACT 5 hereinafter collectively referred to as "Property").

TO HAVE AND TO HOLD the Property, together with all and singular the rights and appurtenances thereto in anyway belonging, unto Grantee, its heirs and assigns

forever; and Grantor does hereby bind itself, its heirs, successors and assigns, to WARRANT AND FOREVER DEFEND all and singular the Property unto the Grantee, its heirs and assigns, against every person whomsoever lawfully claiming or to claim the same or any part thereof, when the claim is by, through or under Grantor, but not otherwise.

IT IS expressly UNDERSTOOD, ACKNOWLEDGED and AGREED that Grantor hereby RESERVES and EXCEPTS from this conveyance all oil, gas and other minerals of any type or form including all other rights appurtenant to the minerals and the mineral estate owned by Grantor, and does not transfer the minerals and the appurtenant rights thereto to Grantee.

IT IS further UNDERSTOOD, ACKNOWLEDGED and AGREED that Grantor hereby grants exclusive use of the surface to the Grantee and hereby waives all rights to the surface of the Property being conveyed in this Special Warranty Deed including all rights of ingress and egress and any right or any permitted uses Grantor may have as the owner of all or an undivided portion of the mineral estate in the Property as well as waiving the right to use, occupy or place any fixtures, equipment, building, or other structure on the surface of the Property in connection with the exploration or development of the mineral estate thereunder.

THIS CONVEYANCE IS MADE AND ACCEPTED by Grantee SUBJECT TO (i) taxes for the current year, which have been prorated as of the date of closing, the payment of which Grantee assumes; (ii) all subsequent tax assessments for the current year the payment of which Grantee assumes; (iii) the Declaration of Conditions, Covenants and Restrictions for Vintage Oaks at the Vineyard filed in the Official Real Property Records, Comal County, Texas, all other restrictions, covenants, conditions, easements, reservations, leases, mineral severances, and other instruments that affect the Property and as may be shown in the public records of Comal County, Texas; (iv) all zoning laws, regulations and ordinances of municipal and/or other governmental authorities that affect the Property and (v) the items listed below as Permitted Exceptions:

1. Subject to the Declaration of Conditions, Covenants and Restrictions for Vintage Oaks at the Vineyard, recorded at Clerk's Document #200706000771, annexed by Document #201306051741, Document #201106044284, Document #201406032083, Document #201406036864, Document #201406037322, Document #201606000890, Document #201606020343, Document #201606034480, Document #201606034595 and the Assignment of Declarant Rights filed at Document #201206016339, Official Real Property Records, Comal County, Texas.

2. Subject to those items, restrictions, building setback lines, easements and Notes shown on the plat recorded in Document #201306051565, Official Map and Plat Records of Comal County, Texas as well as those setbacks included in the Declaration of Conditions, Covenants and Restrictions and/or Design Guidelines for Vintage Oaks at the Vineyard;

- (a.) Subject to a 50-foot building setback line from the front and rear property lines;

- (b.) Subject to a 10-foot side property line building setback except on corner lots wherein the street-side corner shall have a 25-foot setback;

- (c.) Subject to a 10-foot wide Public Utility and Drainage

easement adjacent to all non-street lot lines.

(d.) Subject to Public Utility Easement, 20 feet from the front property line and 10 feet from the side and rear property lines.

(e.) Public Drainage and Public Embankment/Backslope Easement adjacent to all street right of way lines.

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3. Subject to Easement and Right-of-Way as provided in instrument recorded in Volume 73, Page 101, Deed Records of Comal County, Texas.

4. Electric Easement granted to New Braunfels Utilities by instrument dated October 26, 1998, recorded under Document #9806025937, Official Public Records, Comal County, Texas;

5. Maintenance Easement for Drainage Easements as provided by instrument recorded Document #201406020804, Official Public Records, Comal County, Texas (Lots 999 and 1030);

6. Deed Recordation Affidavit concerning Edwards Aquifer Protection Plan as provided in instrument recorded under Clerk's Document #200706020092, Official Public Records, Comal County, Texas.

7. Seller hereby RESERVES and EXCEPTS all oil, gas and other minerals of every kind and character in, on and under the Property together with all rights appurtenant thereto.


GRANTEE has purchased the foregoing Property, "AS IS," "WHERE IS," and "WITH ALL FAULTS." Except with respect to claims arising from covenants, agreements, representations and warranties expressly contained in the Purchase and Sale Agreement, GRANTEE hereby waives and fully releases GRANTOR and its affiliates, parent companies, partners, and their respective owners, employees, representatives and agents, from any and all claims that it may now have or hereafter acquire against GRANTOR or its affiliates, parent companies, partners, or their respective owners, employees, representatives and agents, for any cost, loss, liability, damage, expense, demand, action or cause of action arising from, related to or affecting the Property. GRANTEE further acknowledges and agrees that this release shall be given full force and effect according to each of its expressed terms and provisions, including those relating to unknown and unsuspected claims, damages and causes of action.

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

EXECUTED on the 26 day of October, 2016.

SOUTHSTAR AT VINTAGE OAKS, LLC

By: \_\_\_\_\_

  
Thad Rutherford,  
Sr. Vice President - Operations

SOUTHSTAR AT VINTAGE OAKS, LLC

TO

CENTURY LAND HOLDINGS, II, LLC

**ACKNOWLEDGMENT**

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STATE OF TEXAS           §  
  §  
COUNTY OF Trawis       §

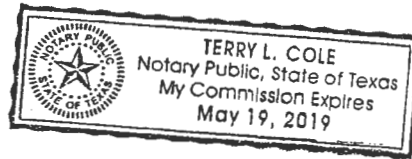
COUNTY ENGINEER

This instrument was acknowledged before me on the 26 day of October, 2016, by Thad Rutherford, Senior Vice President – Operations of SOUTHSTAR AT VINTAGE OAKS, LLC, Grantor in above Special Warranty Deed.

*Terry L. Cole*

NOTARY PUBLIC, STATE OF TEXAS

AFTER RECORDING RETURN TO:



Filed and Recorded  
Official Public Records  
Bobbie Koepp, County Clerk  
Comal County, Texas  
10/28/2016 08:13:49 AM  
LAURA 4 Pages(s)  
201606040901



*Bobbie Koepp*

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

**System Owner:**  
Krystal Smith

Brand Name: Clearstream Wastewater System  
System Name: Primary  
Serial Number: 2289-06 NC 2T  
Model Number: 600 NC 2T  
Permit Number: 108391  
Effective: 6/21/2019 thru 6/21/2021

**Site Legal Description** 1229 Magnum, Lot 1003, Unit 6  
Vintage Oaks at the Vineyard, Comal County

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

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

**Testing and Reporting**

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

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

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

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

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

**This Policy Does Not Include;**

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

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

**MAINTENANCE COMPANY:**

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

**MANUFACTURER:**


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

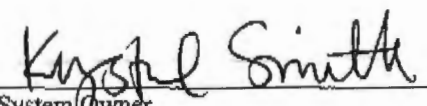
**Installation Company:**

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

**Permitting Authority:**

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

  
 \_\_\_\_\_  
 Jim Blake, Sr., J. B. Septic Maintenance, Inc.

  
 \_\_\_\_\_  
 System Owner

\_\_\_\_\_  
 System Owner

Service Company Operator License Number: MP0000892



# Aerobic Septic System Inspection Report

Submitted by:

**J. B. Septic Maintenance, Inc.**

Contact: Jim Blake

Installation Date: 6/21/2019

**Scheduled Report**

Permit Number: 108591

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

1. Required frequency of visits is every 4 months. Date of inspection visit: 10/24/2019

2. System inspected:

Owner: Krystal Smith

System Name: Primary

Property Address: 1229 Magnum

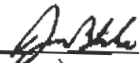
Serial Num: 2289-06 NC 2T

City, State., Zip Code: New Braunfels, TX 78132

Brand Name: AquaKlear

Inspected by: Victor Alvarado

Model Num: 600 NC 2T

  
\_\_\_\_\_  
(Signature)

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

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

4. Tests required and results:

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

5. Comments:

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

# Aerobic Septic System Inspection Report

Submitted by:

**J. B. Septic Maintenance, Inc.**

Contact: Jim Blake

Installation Date: 6/21/2019

**Scheduled Report**

Permit Number: 108591

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

1. Required frequency of visits is every months. Date of inspection visit: 2/18/2020

2. System inspected:

Owner: Krystal Smith

System Name: Primary

Property Address: 1229 Magnum

Serial Num: 2289-06 NC 2T

City, State., ZipCode: New Braunfels, TX 78132

Brand Name: AquaKlear

Inspected by: Victor Alvarado

Model Num: 600 NC 2T

*[Signature]*  
(Signature)

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

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

4. Tests required and results:

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

5. Comments:

PT= 0"  
ATU= 0%  
TT= 1/4"    Lids Secure at Departure.

# Aerobic Septic System Inspection Report

Submitted by:

**J. B. Septic Maintenance, Inc.**

Contact: Jim Blake

Installation Date: 6/21/2019

**Scheduled Report**

Permit Number: 108591

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

1. Required frequency of visits is every 4 months. Date of inspection visit: 3/16/2021

2. System inspected:

Owner: Krystal Smith

System Name: Primary

Property Address: 1229 Magnum

Serial Num: 2289-06 NC 2T

City, State., ZipCode: New Braunfels, TX 78132

Brand Name: AquaKlear

Inspected by: Isaac Prado

Model Num: 600 NC 2T

*JIPSM*  
(Signature)

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

3. Repairs to system (list all components replaced):  
Replaced air compressor & diffuser stone.

4. Tests required and results:

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

5. Comments:

PT= 2 "  
ATU= 10 %  
TT= 2 " Lids secure at departure

# J.B. SEPTIC MAINTENANCE, INC.



## SERVICE CONTRACT AGREEMENT

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

- Routine service visits once every 4 months during the service period of one year from 06/21/2021 to 06/21/2022 on the Aerobic system indicated below.

Owner:	<u>Krystal Smith</u>	Phone No:	<u>(361) 243-2230</u>
System:	<u>Clearstream 600 NC-2T</u>	Permit:	<u>108591</u>
Address:	<u>1229 Magnum</u>	Sub Division:	<u>Vintage Oaks at the Vineyard</u>
City/County:	<u>New Braunfels/Comal</u>		

### Service calls will include:

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

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

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

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

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

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

OWNER  
  
Signature

Date: 5/17/21

SERVICE DEALER  
  
J.B. Septic Maintenance, Inc.



# Aerobic Septic System Inspection Report

Submitted by:

**J. B. Septic Maintenance, Inc.**

Contact: Jim Blake

Installation Date: 6/21/2019

**Scheduled Report**

Permit Number: 108591

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

1. Required frequency of visits is every 4 months. Date of inspection visit: 10/20/2021

2. System inspected:

Owner: Krystal & Ashley Smith

System Name: Primary

Property Address: 1229 Magnum

Serial Num: 2289-06 NC 2T

City, State., Zip Code: New Braunfels, TX 78132

Brand Name: AquaKlear

Inspected by: Victor Alvarado

Model Num: 600 NC 2T

(Signature)

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

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

4. Tests required and results:

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

5. Comments:

PT= 2"  
 ATU= 15 %  
 TT=1" Lids secure at departure

**Aerobic Services of South Texas**  
**15188 FM 306**  
**Canyon Lake, TX 78133**



**(830) 964-2365**  
**Fax: (830) 964-2659**  
**www.aerobicservices.com**

To: Krystal Smith  
1229 Magnum  
New Braunfels, TX 78132  
Agency: CCEH  
County: Comal  
Permit No: 108591

Tech: Chris Bausch  
Phone: (361) 242-2230 Date: 2022-12-14  
Alt Ph: \_\_\_\_\_ Service Due: \_\_\_\_\_

Inspection Type: 1x inspection

Item	Operational	Inoperative	N/A	
<b>Aerator:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Air Pressure: 84</b>
<b>Irrigation pump:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Air compressor:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Disinfection device:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Chlorine supply:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Spray field vegetation:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Sprinkler / Drip backwash:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Controls / Electric Circuits:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Test Results and observations: (As Required)**

Chlorine Residual: 0.01  
Test Method: Dpd  
BOD: \_\_\_\_\_  
TSS: \_\_\_\_\_  
Access Ports Secured: Yes [X] / NO [ ]  
Repairs Made: Yes [X] / NO [ ]

Mixed Liquor Aeration: -

**Sludge Levels**  
Clarifier: 0  
Pump: 5

Repairs and Comments:  
Rewired floats and reconnected bleach supply line.

*CB*

Inspector: \_\_\_\_\_ Date: 2022-12-14

Tom Hampton VP  
MP349/OS24597

# WORK ORDER

**Aerobic Services of South Texas**  
**15188 FM 306**  
**Canyon Lake, TX 78133**  
**(830) 964-2365**  
**www.aerobicservices.com**



<b>Customer ID</b>		<b>Scheduled</b>		<b>Serviced</b>	
174537		12/14/22			
<b>Customer Name and SITE Address</b>			<b>Contact</b>	<b>Customer Email Address</b>	
<b>Krystal Smith</b> <b>1229 Magnum</b> <b>New Braunfels, TX</b> Mailing: 1229 Magnum, New Braunfels TX 78132			Krystal Smith	krystal@nextlevelortho.com	
			<b>Main Phone</b>	<b>Secondary Phone</b>	
			(361) 242-2230		
<b>System Permit #</b>	<b>Brand of System</b>				
108591	CS 600				
<b>Work Order Type</b>	<b>Assigned Technician</b>		<b>HEALTH DEPT</b>		
1x insp & Repair	Chris		CCEH		
<b>DESCRIPTION OF THE WORK ORDER (REASON OF CALL)</b>					
1x inspection and repair. Home inspector stated the float switches are not wired properly. Please verify and call Krystal for any costs over the \$165.00. CC on file.					
<b>RESULTS OF THE WORK ORDER</b>					
1x inspection, and rewired floats correctly.					
<b>DIRECTIONS OR INSTRUCTIONS TO THE TECHNICIAN</b>					

\_\_\_\_\_ Date: 12/14/22 \_\_\_\_\_ C \_\_\_\_\_  
 Customer's Signature Employee's Signature

# Aerobic Septic System Inspection Report

Submitted by:

**J. B. Septic Maintenance, Inc.**

Contact: Jim Blake

Installation Date: 6/21/2019

**Scheduled Report**

Permit Number: 108591

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

1. Required frequency of visits is every months. Date of inspection visit: 10/18/2022

2. System inspected:

Owner: Krystal & Ashley Smith

System Name: Primary

Property Address: 1229 Magnum

Serial Num: 2289-06 NC 2T

City, State., Zip Code: New Braunfels, TX 78132

Brand Name: Clearstream

Inspected by: Zoltan Juhasz

Model Num: 600 NC 2T

*Zoltan Juhasz*  
(Signature)

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

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

4. Tests required and results:

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

5. Comments:

PT = "  
 ATU = %  
 TT = " Lids secured at departure.