



COMAL COUNTY
ENGINEER'S OFFICE

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: **10/15/2019** Permit Number: **108992**

Location Description: **8223 FOXCROSS DR
SPRING BRANCH, TX 78070**

Subdivision: **Whispering Hills**
Unit:
Lot: **457**
Block:
Acreage:

Type of System: **Aerobic
Surface Irrigation**

Issued to: **Acequia Properties, 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


OS0034792
ENVIRONMENTAL HEALTH INSPECTOR


OS0007722
ENVIRONMENTAL HEALTH COORDINATOR

Final

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Varhol Const. / Dennis Varhol OSSF Installer #: _____

1st Inspection Date: 10/11/19 2nd Inspection Date: _____ 3rd Inspection Date: 10-15-19

Inspector Name: Mike T. Inspector Name: _____ Inspector Name: B. O'Leary

Permit#: 108992 Address: Whispering Hills / 8223 Foxcross 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)		10/11/19		10-15-19
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)(iii) 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- 10/11/19
Tank set, leveled
operational ✓
ready for cover

10-15-19 BMO
Covered

**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)				10-15-14
10	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
11	SEPTIC TANK Secondary restraint system provided SEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
12	SEPTIC TANK Tank Volume Installed						
13	PUMP TANK Volume Installed						
14	AEROBIC TREATMENT UNIT Size Installed	✓		600	10/11/19		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	✓		Wu Water			
16	DISPOSAL SYSTEM Absorptive		285.33(d)(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)				

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OSSF Inspection Sheet**

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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 Teaching 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.
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33	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.	✓	285.32(c)(1)		10/11/19		10-15-9
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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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						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Varhol Const. / Dennis Varhol OSSF Installer #: _____

1st Inspection Date: 10/11/19 2nd Inspection Date: _____ 3rd Inspection Date: _____

Inspector Name: mike T. Inspector Name: _____ Inspector Name: _____

Permit#: 108992 Address: Whispering Hills / 8223 Foxcross Dr

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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: 108992
Issued This Date: 04/22/2019
This permit is hereby given to: Acequia Properties, LLC

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

8223 FOXCROSS DR
SPRING BRANCH, TX 78070

Subdivision: Whispering Hills

Unit:

Lot: 457

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.

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

Date April 4, 2019

Permit # 108992

Owner Name ACEQUIA PROPERTIES LLC
Mailing Address PO BOX 156
City, State, Zip BULVERDE TEXAS 78163
Phone# 830-609-7955
Email clint.rostedt@gmail.com

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

All correspondence should be sent to: [] Owner [X] Agent [] Both

Method: [] Mail [X] Email

Subdivision Name WHISPERING HILLS Unit/Phase/Section Lot 457 Block

Acreage/Legal

Street Name/Address 8223 FOXCROSS DRIVE City SPRING BRANCH Zip 78070

Type of Development:

[X] Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1990

RECEIVED APR 11 2019

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 [X] No (if yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water [] Public [X] Private Well

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

By signing this application, I certify that:

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

Signature of Owner

Date 4/10/2019

Signature of Owner

Date

#108992

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

REVISED

8:13 am, Apr 22, 2019

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

Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) NUWATER B-550-PC Absorption/Application Area (Sq Ft) 4825

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

Is this property within an incorporated city? Yes No

If yes, indicate the city: _____



FIRM #2585

By signing this application, I certify that:

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

[Signature]
Signature of Designer

April 9, 2019
Date

2
Yes

AFFIDAVIT

THE COUNTY OF COMAL
STATE OF TEXAS



201906012204 04/11/2019 01:51:50 PM 1/1

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

I

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

II

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

UNIT/PHASE/SECTION _____ BLOCK 457 LOT _____ WHISPERING HILLS _____ SUBDIVISION

IF NOT IN SUBDIVISION: _____ ACREAGE _____ SURVEY _____

The property is owned by (insert owner's full name):

ACEQUIA PROPERTIES, LLC

APRIL

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.

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APR 11 2019

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.

COUNTY ENGINEER

WITNESS BY HAND(S) ON THIS 10 DAY OF APRIL, 2019

[Signature]

Owner(s) signature(s)

CLINTON ROSTEDT

Clinton Rostedt, Acequia Properties LLC

Owner (s) Printed name (s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 10 DAY OF

APRIL, 2019

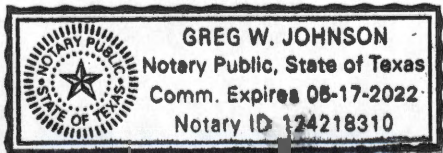
[Signature]

Notary Public Signature

THIS AREA

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
04/11/2019 01:51:50 PM
TERRI 1 Page(s)
201906012204

ONLY



(Notary Seal Here)



Bobbie Koepf

WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

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Regulatory Authority COMAL
Block Creek Aerobic Services, LLC
444 A Old Hwy #9
Comfort, TX 78013
Off. (830) 995-3189
Fax. (830) 995-4051

Permit/License Number _____
Customer ACEQUIA PROPERTIES, LLC
Site Address 8223 FOXCROSS DRIVE
City SPRING BRANCH, TX Zip 78070
Mailing Address _____
County COMAL Map # 353
Phone _____
Email _____

COUNTY ENGINEER

2 YEAR CONTRACT
2 YEAR WARRANTY ON PARTS AND LABOR

Subd/Legal: WHISPERING HILLS, LOT 457

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

II. Effective Date:

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

III. Termination of Agreement:

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

IV. Services:

Contractor will:

- a. Inspect and perform routine upkeep on the On-Site Sewage Facility (hereinafter referred to as OSSF) as recommended by the treatment system manufacturer, and required by state and/or local regulation, for a total of three visits to site per year. The list of items checked at each visit shall be the: control panel, Electrical circuits, timer, Aeration including compressor and diffusers, CFM/PSI measured, lids safety pans, pump, compressor, sludge levels, and anything else required as per the manufacturer.
- b. Provide a written record of visits to the site by means of an inspection tag attached to or contained in the control panel.
- c. Repair or replace, if Contractor has the necessary materials at site, any component of the OSSF found to be failing or inoperative during the course of a routine monitoring visit. If such services are not covered by warranty, and the service(s) cost less than \$100.00, Customer hereby authorizes Contractor to perform the service(s) and bill Customer for said service(s). When service costs are greater than \$100.00, or if contractor does not have the necessary supplies at the site, Contractor will notify Customer of the required service(s) and the associated cost(s). Customer must notify Contractor of arrangements to affect repair of system within two (2) business days after said notification.
- d. Provide sample collection and laboratory testing of TSS and BOD on a yearly basis (commercial systems only).
- e. Forward copies of this Agreement and all reports to the regulatory agency and the Customer.
- f. Visit site in response to Customer's request for unscheduled services within forty-eight (48) hours of the date of notification (weekends and holidays excluded) of said request. Unless otherwise covered by warranty, costs for such unscheduled responses will be billed to Customer.

CMR
Customer's Initials



BS
Contractor's Initials

V. Disinfection:

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

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VI. Electronic Monitoring:

Electronic Monitoring is not included in this Agreement.

APR 11 2019

VII. Performance of Agreement:

Commencement of performance by Contractor under this Agreement is contingent on the following conditions:

COUNTY ENGINEER

a. If this is an initial Agreement (new installation):

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

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

VIII. Customer's Responsibilities:

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

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

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

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

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

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

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

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

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

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

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

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

IX. Access by Contractor:

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

X. Limit of Liability:

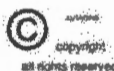
Contractor shall not be held liable for any incidental, consequential, or special damages, or for economic loss due to expense, or for loss of profits or income, or loss of use to Customer, whether in contract tort or any other theory. In no event shall Contractor be liable in an amount exceeding the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

XI. Indemnification:

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

CUR

Customer's Initials



BS

Contractor's Initials

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

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

XII. Severability:

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

XIII. Fee for Services:

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

XIV. Payment:

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

XV. Application or Transfer of payment:

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

XVI. Entire Agreement:

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

Brent S. Lindstedt
Block Creek Aerobic Services, LLC,
Contractor
MC# 0000042 and MC#0000002

Clint Kater 4/10/2019
Customer Signature Date

CLR
Customer's initials



BS
Contractor's Initials

OSSF SOIL EVALUATION REPORT INFORMATION

Date: April 09, 2019

Applicant Information:

Name: ACEQUIA PROPERTIES, LLC.
Address: P.O. BOX 156
City: BULVERDE State: TEXAS
Zip Code: 78163 Phone: (830) 609-7955

Site Evaluator Information:

Name: Greg W. Johnson, P.E., R.S., S.E. 11561
Address: 170 Hollow Oak
City: New Braunfels State: Texas
Zip Code: 78132 Phone & Fax (830)905-2778

Property Location:

Lot 457 Unit Blk Subd. WHISPERING HILLS
Street Address: 8223 FOXCROSS DRIVE
City: SPRING BRANCH Zip Code: 78070
Additional Info.:

Installer Information:

Name:
Company:
Address:
City: State:
Zip Code: Phone

Topography: Slope within proposed disposal area: 6 %
Presence of 100 yr. Flood Zone: YES NO X
Existing or proposed water well in nearby area: YES X NO >100'
Presence of adjacent ponds, streams, water impoundments: YES NO X
Presence of upper water shed: YES NO X
Organized sewage service available to lot: YES NO X

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Design Calculations for Aerobic Treatment with Spray Irrigation:

Commercial

Q = GPD

Residential Water conserving fixtures to be utilized? Yes X No

Number of Bedrooms the septic system is sized for: 3 Total sq. ft. living area 1990

Q gal/day = (Bedrooms +1) * 75 GPD - (20% reduction for water conserving fixtures)

Q = (3 +1)*75-(20%)= 240

Trash Tank Size 353 Gal.

TCEQ Approved Aerobic Plant Size 600 G.P.D.

Req'd Application Area = Q/Ri = 240 / 0.064 = 3750 sq. ft.

Application Area Utilized = 4825 sq. ft.

Pump Requirement 12 Gpm @ 41 Psi (Redjacket 0.5 HP 18 G.P.M. series or equivalent)

Dosing Cycle: ON DEMAND or X TIMED TO DOSE IN PREDAWN HOURS

Pump Tank Size = 768 Gal. 14.5 Gal/inch.

Reserve Requirement = 80 Gal. 1/3 day flow.

Alarms: Audible & Visual High Water Alarm & Visual Air Pump malfunction

With Chlorinator NSF/TCEQ APPROVED

SCH-40 or SDR-26 3" or 4" sewer line to tank

Two way cleanout

Pop-up rotary sprinkler heads w/ purple non-potable lids

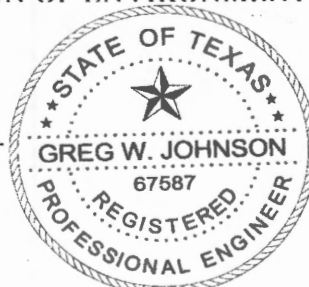
1" Sch-40 PVC discharge manifold

APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

I HAVE PERFORMED A THOROUGH INVESTIGATION BEING A REGISTERED PROFESSIONAL ENGINEER AND SITE EVALUATOR IN ACCORDANCE WITH CHAPTER 285, SUBCHAPTER D, §285.30, & §285.40 (REGARDING RECHARGE FEATURES), TEXAS COMMISSION OF ENVIRONMENTAL QUALITY (EFFECTIVE DECEMBER 29, 2016)

GREG W. JOHNSON, P.E. F#002585 - S.E. 11561

04/09/19
DATE



FIRM #2585

**ON-SITE SEWERAGE FACILITY
SOIL EVALUATION REPORT INFORMATION**

Date Soil Survey Performed: April 08, 2019

Site Location: WHISPERING HILLS, LOT 457

Proposed Excavation Depth: N/A

Requirements:

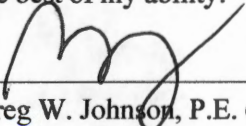
At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil boring or dug pits must be shown on the site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation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

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SOIL BORING NUMBER		SURFACE EVALUATION				
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	III	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 8"	BROWN
1						
2						
3						
4						
5						

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

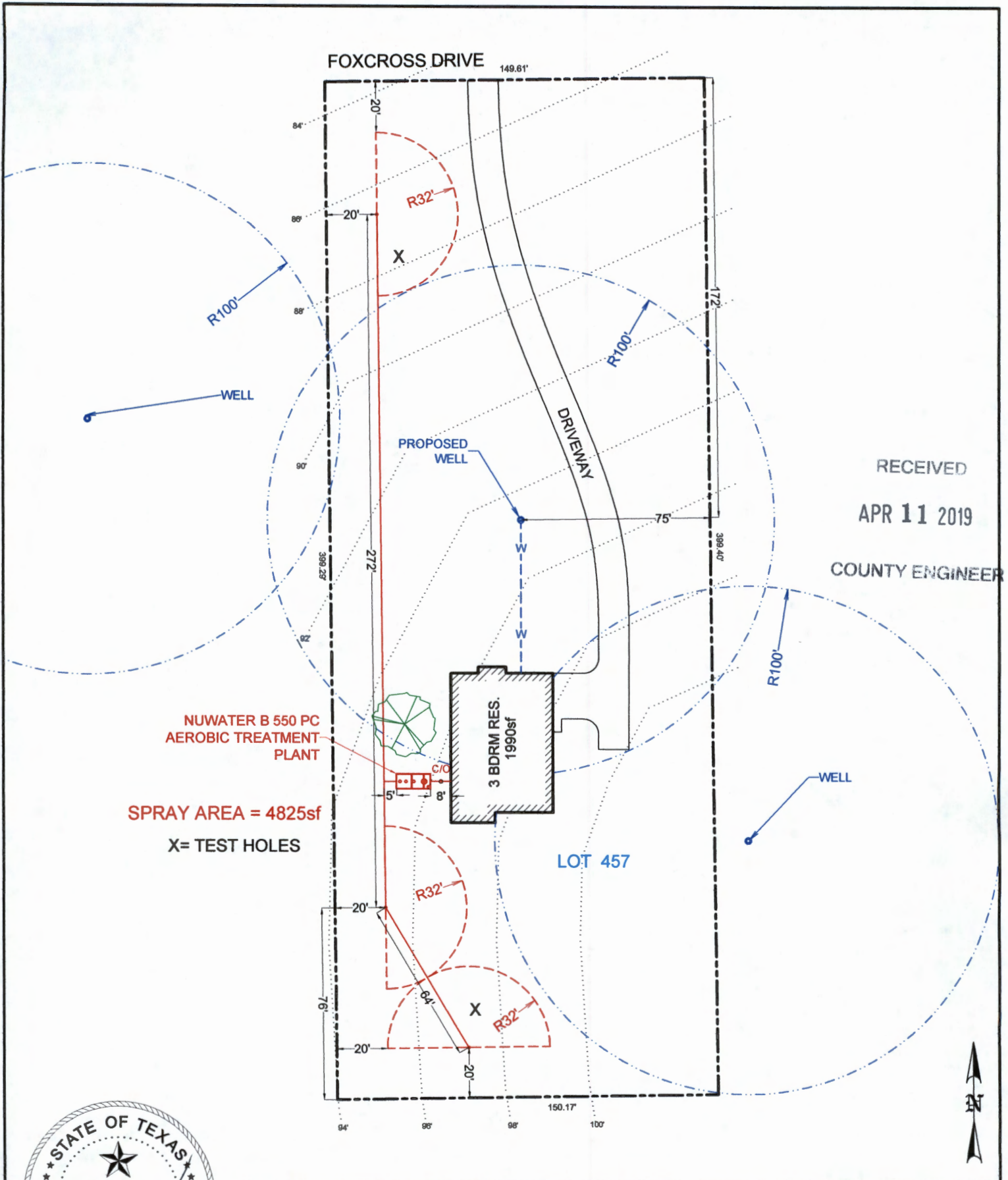
I certify that the findings of this report are based on my field observations and are accurate to the best of my ability.


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

04/08/19
Date

FOXCROSS DRIVE

149.61'

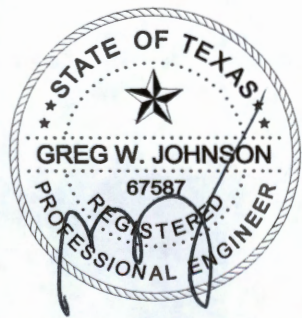


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NUWATER B 550 PC
 AEROBIC TREATMENT
 PLANT
 SPRAY AREA = 4825sf
 X= TEST HOLES

3 BDRM RES.
 1990sf

LOT 457



OWNER: ACEQUIA PROPERTIES, LLC.		DRAWN BY: EJS III	
STREET ADDRESS: 8223 FOX CROSS DRIVE			
LEGAL DESC: WHISPERING HILLS	UNIT/SECTION/PHASE:	BLOCK:	LOT: 457
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=50'	DATE: 4/9/2019	REVISED:

TANK NOTES:

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

Tightlines to the tank shall be SCH-40 PVC.

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

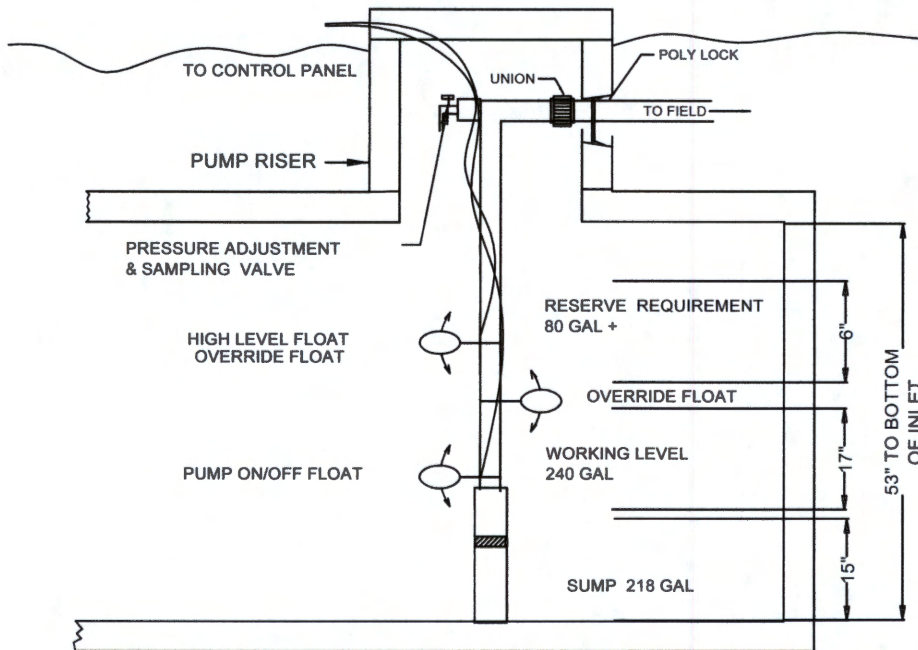
A minimum of 4" of sand, sandy loam, clay loam free of rock shall be placed under and around tanks

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

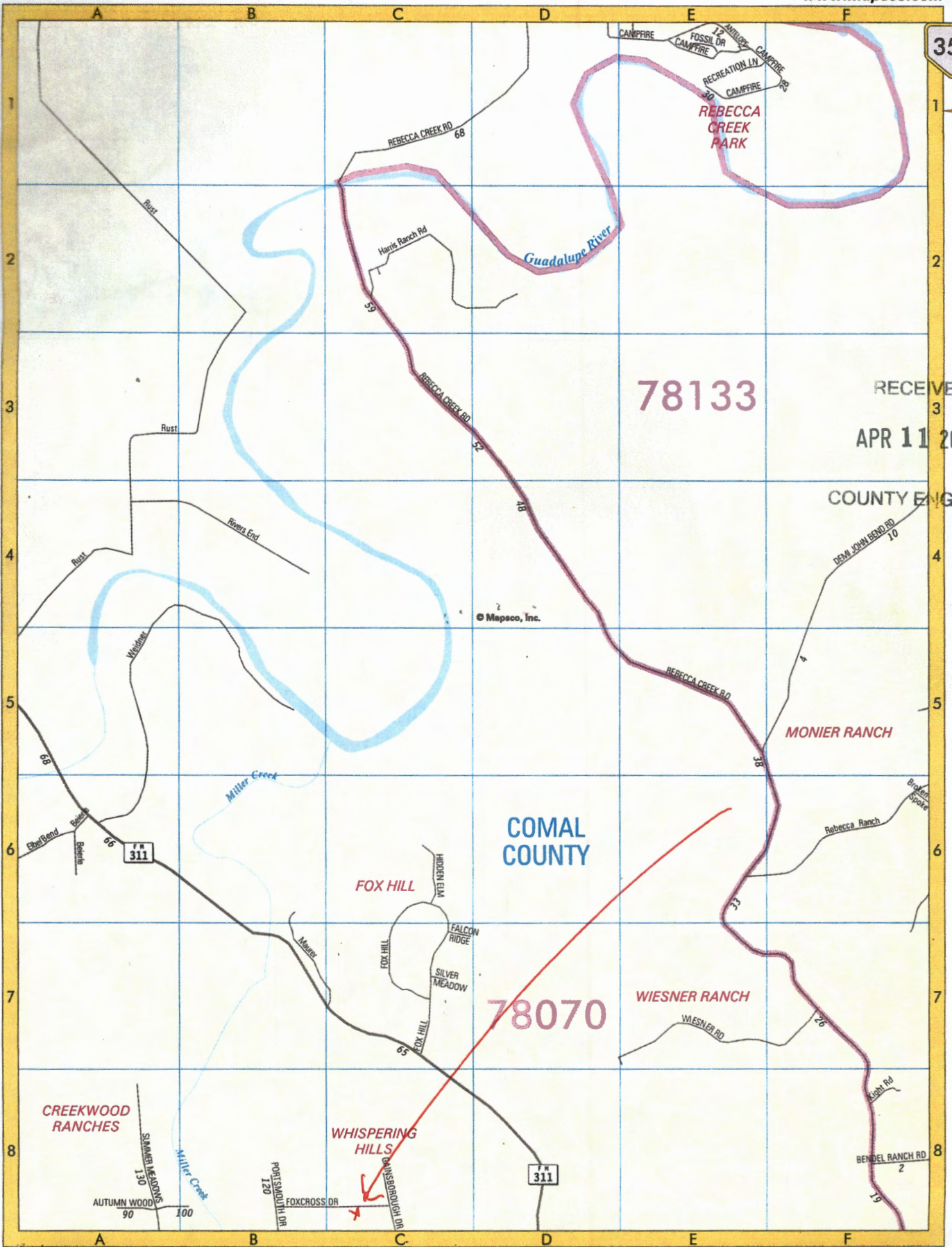


F-2585

04/9/19

**TYPICAL PUMP TANK CONFIGURATION
NU-WATER 550PC -400PT 768 GAL PUMP TANK**

353



78133

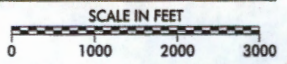
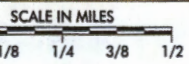
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COMAL COUNTY

78070

CONTINUED ON MAP 354




Hernandez, Sandra

From: Hernandez, Sandra
Sent: Tuesday, April 16, 2019 1:19 PM
To: 'Greg Johnson'
Subject: 108992 deficiency comment
Attachments: Pages from 108992-3.pdf

RE: Whispering Hills, Lot 457

Greg,

We received planning materials for the referenced permit application on April 11, 2019 and found those planning materials to be deficient. In order to continue processing this permit, we need the following:

 Sign your permit application and resubmit to our office.

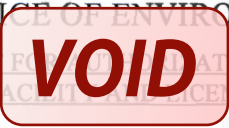
If you have any questions, you can email me or call the office.

Thank you,

*Sandra Ann Hernandez
Environmental Health Asst.
Comal County Engineer's Office
cceo.org
830-608-2090 (Ext. 3156)*

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

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



Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) NUWATER B-550-PC Absorption/Application Area (Sq Ft) 4825

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

Is this property within an incorporated city? Yes No

If yes, indicate the city: _____

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FIRM #2585

By signing this application, I certify that:

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



April 9, 2019

Signature of Designer

Date

ORIGINAL 74 RS
NB

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NOTICE OF CONFIDENTIALITY RIGHTS: IF YOU ARE A NATURAL PERSON, YOU MAY REMOVE OR STRIKE ANY OR ALL OF THE FOLLOWING INFORMATION FROM ANY INSTRUMENT THAT TRANSFERS AN INTEREST IN REAL PROPERTY BEFORE IT IS FILED FOR RECORD IN THE PUBLIC RECORDS: YOUR SOCIAL SECURITY NUMBER OR YOUR DRIVER'S LICENSE NUMBER.

GENERAL WARRANTY DEED

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

THAT **JOSE T. AVALOS and wife, CARMEN L. AVALOS**, hereinafter called Grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) cash and other good and valuable consideration in hand paid by **ACEQUIA PROPERTIES, LLC**, hereinafter called Grantee, the receipt and sufficiency of which is hereby acknowledged;

HAS GRANTED, SOLD and CONVEYED, and by these presents does GRANT, SELL and CONVEY unto the said Grantee the following described property situated in Comal County, Texas, to-wit:

Lot 457 of WHISPERING HILLS, a subdivision in Comal County, Texas, according to the plat recorded in **Volume 4, pages 20-27** of the Map and Plat Records of Comal County, Texas.

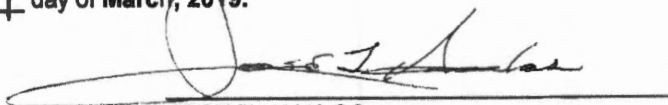
This conveyance is made subject to, all and singular, the restrictions, conditions, easements and covenants, if any, applicable to and enforceable against the above described property as reflected by the records of the County Clerk of Comal County, Texas.

Taxes for the current year have been prorated and are thereafter assumed by Grantee.

TO HAVE AND TO HOLD the above described premises, together with, all and singular, the rights and appurtenances thereto in anywise belonging unto the said Grantee, Grantee's heirs, executors, administrators, successors, or assigns forever.

Grantor does hereby bind Grantor, Grantor's heirs, executors, administrators, and successors to warrant and forever defend, all and singular, the said premises unto the said Grantee, Grantee's heirs, executors, administrators, successors, and assigns against any person whomsoever claiming or to claim the same or any part thereof.

DATED this the 14 day of March, 2019.



JOSE T. AVALOS

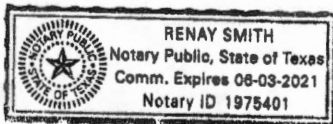


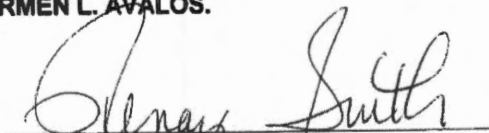
CARMEN L. AVALOS

STATE OF TEXAS
COUNTY OF COMAL

§
§

This instrument was acknowledged before me on this the 14 day of March, 2019, by JOSE T. AVALOS and wife, CARMEN L. AVALOS.




Notary Public, State of Texas

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GRANTEE'S MAILING ADDRESS:

1101 Portsmouth Dr.
Spring Branch, Tx 78070-6419

8647b.deeds
Old Republic Title Co. (RS)
GF #6714NB

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
03/14/2019 10:00:15 AM
LAURA 2 Pages(s)
201906008598





OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

<i>items Date Received</i>	<i>initials</i>

<i>Permit Number</i>

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Instructions:

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

OSSF Permit

- Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate
- Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer
- Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist of a scaled design and all system specifications.
- Required Permit Fee
- Copy of Recorded Deed
- Surface Application/Aerobic Treatment System
 - Recorded Certification of OSSF Requiring Maintenance/Affidavit to the Public
 - Signed Maintenance Contract with Effective Date as Issuance of License to Operate

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



Signature of Applicant

04/11/19

Date

COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

INCOMPLETE APPLICATION	
(Missing Items Circled, Application Refused)	

Block Creek Concrete Products, LLC
444 A Old Hwy No 9
Comfort, TX 78013

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

To: Home Owner
8223 Foxcross dr
Spring Branch, TX 78070

Printed: 2/4/2020
Site: 8223 Foxcross dr
Spring Branch, TX 78070

Permit #: **108992**

Agency: Comal County
County: Comal

Sub:

Mfg / Brand: Advantage Wastewater LLC - Nu Water

Treatment Type: Aerobic With Chlorine System S/N: 37837
Disposal: Surface Application

Customer ID: 6777

Contract Dates: 10/15/2019 - 10/15/2021

Scheduled Date: 2/15/2020

Inspection 1 of 6

Installed: 10/10/2019

Warranty End: 10/10/2021

Aerator S/N: 4013

GPS Coordinates - Latitude: 29.840236 Longitude: -98.366780

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: 2/4/2020

Time In: 115pm

Out: 135pm

Entered By: Anthony Jesus Soto

Method: Grab

Technician: Anthony Jesus Soto

Maint. Provider: Rudy Carson

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: 0.89mg/L

Sludge Levels

For Tank 1: 0"

For Tank 2: 0"

For Tank 3: 0"

CFM: 2.2

Air Filter: Good

Tank Lid / Riser: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Color: Good

Odor: Good

Alarm: Operational

PSI Pressure: 3.5

Comments

Service Completed

- Technician Secured the Tank Lid and/or Riser prior to leaving location. Reset timer. - Cleaned compressor filter. - Secured system in the on position with a lock bolt. Please add bleach to reservoir, very ow.

Insp ID #: 89368

Provider: **Rudy Carson**

Technician: *Anthony Jesus Soto*

License #: MP0002036

License #: MT0001771

Expires: 9/30/2022



Rudy Carson



Block Creek Concrete Products, LLC
444 A Old Hwy No 9
Comfort, TX 78013

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

To: Home Owner
8223 Foxcross dr
Spring Branch, TX 78070

Printed: 5/28/2020
Site: 8223 Foxcross dr
Spring Branch, TX 78070

Permit #: **108992**

Agency: Comal County

County: Comal

Sub:

Mfg / Brand: Advantage Wastewater LLC - Nu Water

Treatment Type: Aerobic With Chlorine System S/N: 37837

Disposal: Surface Application

Customer ID: 6777

Contract Dates: 10/15/2019 - 10/15/2021

Scheduled Date: 6/15/2020

Inspection 2 of 6

Installed: 10/10/2019

Warranty End: 10/10/2021

Aerator S/N: 4013

GPS Coordinates - Latitude: 29.840236 Longitude: -98.368780

Service Type: Scheduled Inspection

Visit Date: 5/28/2020

Time In: 2:10

Out: 2:20

Method: Grab

Technician: Michael S Looney

Maint. Provider: Rudy Carson

Aerators: Operational

Sludge Levels

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

For Tank 3: 4"

Chlorine Supply: Operational

Chlorine Residual: 0.42

CFM: 2.5

Tank Lid / Riser: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Alarm: Operational

PSI Pressure: 3.5

Comments

- Attention:- Technician Secured the Tank Lid and/or Riser prior to leaving location. Added screws to safety pan in pump tank. Homeowner can contact office to register information pertaining to system for more convenient inspections in the future.

Service Completed

nsp ID #: 94187


Provider: **Rudy Carson**

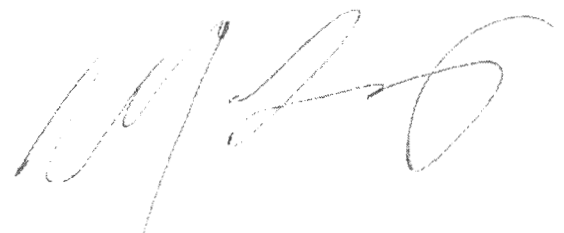
Technician: *Michael S Looney*

License #: MP0002036

License #: MT0001616

Expires.


Rudy Carson



Block Creek Concrete Products, LLC
444 A Old Hwy No 9
Comfort, TX 78013

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

To: Home Owner
8223 Foxcross dr
Spring Branch, TX 78070

Printed: 10/19/2020
Site: 8223 Foxcross dr
Spring Branch, TX 78070

Permit #: **108992**

Agency: Comal County
County: Comal Sub:
Mfg / Brand: Advantage Wastewater LLC - Nu Water
Treatment Type: Aerobic With Chlorine System S/N: 37837
Disposal: Surface Application

Customer ID: 6777
Contract Dates: 10/15/2019 - 10/15/2021
Scheduled Date: 10/15/2020 Inspection 3 of 6
Installed: 10/10/2019
Aerator S/N: 4013 Warranty End: 10/10/2021
GPS Coordinates - Latitude: 29.840236 Longitude: -98.368780

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"
Entered By: Joseph A Crowder

Visit Date: 10/19/2020 Time In: 1:45 Out: 2:09

Method: Grab

Technician: Joseph A Crowder

Maint. Provider: Rudy Carson

Aerators: Operational
Filters: Operational
Irrigation Pumps: Operational
Disinfection Device: Operational
Chlorine Supply: Operational
Chlorine Residual: 0.5mg/L

Sludge Levels
For Tank 1: 14
For Tank 2: 0'
For Tank 3: 0'

CFM: 2.6

Air Filter: Good

Tank Lid / Riser: Secured

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

Color: Good
Odor: Good

Alarm: Operational

PSI Pressure: 3.2

Comments

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

Service Completed

Insp ID #: 100444

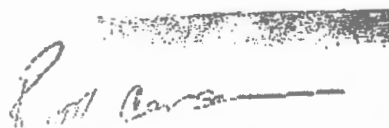
Provider: **Rudy Carson**

Technician: **Joseph A Crowder**

License #: MP0002036

License #: MT0001769

Expires: 9/30/2022


Rudy Carson



Block Creek Concrete Products, LLC
444 A Old Hwy No 9
Comfort, TX 78013

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

To: Home Owner
8223 Foxcross dr
Spring Branch, TX 78070

Printed: 2/9/2021
Site: 8223 Foxcross dr
Spring Branch, TX 78070

Permit #: **108992**

Agency: Comal County
County: Comal Sub:
Mfg / Brand: Advantage Wastewater LLC - Nu Water
Treatment Type: Aerobic With Chlorine System S/N: 37837
Disposal: Surface Application

Customer ID: 6777
Contract Dates: 10/15/2019 - 10/15/2021
Scheduled Date: 2/15/2021 Inspection 4 of 6
Installed: 10/10/2019
Aerator S/N: 4013 Warranty End: 10/10/2021
GPS Coordinates - Latitude: 29.840236 Longitude: -98.368780

Service Type: Scheduled Inspection

✓ This counts as a type of "Scheduled Inspection"

Visit Date: 2/9/2021

Time In: 12:00pm

Out: 12:15pm

Entered By: Ronnie W Krampota

Method: Grab

Technician: Ronnie W Krampota

Maint. Provider: Burt Seidensticker

Chlorine Residual: n/a

Comments

✓ **Service Completed**

Could not inspect due to dogs in the yard -- Please complete customer information sheet and return to office so we can better serve you in the future. Call office to provide contact information and schedule inspection.
Thank you

Insp ID #: 105360

Provider: *Burt Seidensticker*

Technician: Ronnie W Krampota

License #: MP0000002

License #: MT0001175

Expires: 7/31/2023



Block Creek Concrete Products, LLC
444 A Old Hwy No 9
Comfort, TX 78013

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

To: Home Owner
8223 Foxcross dr
Spring Branch, TX 78070

Printed: 7/6/2021
Site: 8223 Foxcross dr
Spring Branch, TX 78070

Permit #: **108992**
Agency: Comal County
County: Comal Sub:
Mfg / Brand: Advantage Wastewater LLC - Nu Water
Treatment Type: Aerobic With Chlorine System S/N: 37837
Disposal: Surface Application

Customer ID: 6777
Contract Dates: 10/15/2019 - 10/15/2021
Scheduled Date: 6/15/2021 Inspection 5 of 6
Installed: 10/10/2019
Aerator S/N: 4013 Warranty End: 10/10/2021
GPS Coordinates - Latitude: 29.840236 Longitude: -98.368780

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: 7/6/2021

Entered By: Michael S Looney

Method: Grab

Technician: Michael S Looney

Maint. Provider: Rudy Carson

Sludge Levels

For Tank 1: n/a
For Tank 2: n/a
For Tank 3: n/a

Chlorine Residual: n/a

Comments

technician cannot access the system in order to complete inspection. Please contact the office in order to set up homeowner contact information to help us better service you in the future

Service Completed

Insp ID #: 110859

Provider: Rudy Carson

Technician: Michael S Looney

License #: MP0002036

License #: MT0001616

Expires



Block Creek Concrete Products, LLC
444 A Old Hwy No 9
Comfort, TX 78013

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

To: Home Owner
8223 Foxcross dr
Spring Branch, TX 78070

Printed:10/21/2021
Site: 8223 Foxcross dr
Spring Branch, TX 78070

Permit #: **108992** Customer ID: 6777
Agency: Comal County Contract Dates: 10/15/2019 - 10/15/2021
County: Comal Sub: Scheduled Date 10/15/2021 Inspection 6 of 6
Mfg / Brand: Advantage Wastewater LLC - Nu Water Installed: 10/10/2019
Treatment Type: Aerobic With Chlorine System S/N: 37837 Aerator S/N: 4013 Warranty End: 10/10/2021
Disposal: Surface Application GPS Coordinates - Latitude: 29.840236 Longitude: -98.368780

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: 10/21/2021

Time In: 340pm

Out: 3550pm

Entered By: Ronnie W Krampota

Method: Grab

Technician: Ronnie W Krampota

Maint. Provider: Rudy Carson

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: n/a

Tank Lid / Riser: Declined

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Alarm: Operational

Comments

- Customer Declined technician request to secure the tank lid. - Unable to inspect due to no gate access and dogs - Please complete customer information sheet and return to office so we can better serve you in the future. Thanks

Service Completed

Insp ID #:115355

Provider: **Rudy Carson**

Technician: Ronnie W Krampota

License #: MP0002036

License #: MT0001175

Expires: 7/31/2023

