



Comal County  
OFFICE OF COMAL COUNTY ENGINEER

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

Issued This Date: **05/30/2019** Permit Number: **109058**

Location Description: 15100 CRANES MILL RD  
CANYON LAKE, TX 78133  
Subdivision: Canyon Lake Mobile Home Estate North  
Unit: 2  
Lot: A&B  
Block:  
Acreage:

Type of System: Aerobic  
Surface Irrigation

Issued to: Jerry L. & Robin G. Stroud

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 Tays*  
**OS8497**  
ENVIRONMENTAL HEALTH INSPECTOR

*Bruce A. [Signature]*  
**OS007722**  
ENVIRONMENTAL HEALTH COORDINATOR

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Winters      OSSF Installer #: \_\_\_\_\_  
 1st Inspection Date: 5/23/19      2nd Inspection Date: \_\_\_\_\_      3rd Inspection Date: 5/30/19  
 Inspector Name: Mike T.      Inspector Name: \_\_\_\_\_      Inspector Name: Mike T.  
 Permit#: 109058      Address: 15100 Carnes Mill Rd.

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)		5/23/19		5/30/19
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-5/23/19  
 Tank set, leveled  
 operational ✓  
 Ready for cover  
 remove or cover rock

MT-5/30/19  
 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	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	5/23/19		5/20/19
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	✓		SolarAire			
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
19	DISPOSAL SYSTEM Drip Irrigation		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
24	DISPOSAL SYSTEM Other (describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
25	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC						
26	DRAINFIELD Area Installed						
27	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
28	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
29	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
30	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.)		285.33(c)(2)				
31	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)				

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	<p>EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling</p> <p>EFFLUENT DISPOSAL SYSTEM Topographic Slopes &lt; 2.0%</p> <p>EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less &amp; an additional 400 ft. for each additional bedroom )</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. &amp; Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) &amp; Pipe Holes ( 3/16 - 1/4" dia. Hole Size ) 5 ft. Apart</p>		<p>285.33(b)(3)(A)</p> <p>285.33(b)(3)(A)</p> <p>285.33(b)(3)(B)</p> <p>285.91(13)</p> <p>285.33(b)(3)(D)</p> <p>285.33(b)(3)(F)</p>				
33	<p>AEROBIC TREATMENT UNIT is Aerobic Unit Installed According to Approved Guidelines.</p>	✓	285.32(c)(1)		5/23/19		5/30/19
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>						
39	<p>PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried</p>						

**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)		5/23/19		5/30/19
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						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Winters OSSF Installer #: \_\_\_\_\_

1st Inspection Date: 5/23/19 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: \_\_\_\_\_

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

Permit#: 109058 Address: 15100 Cranes Mill Rd.

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)		5/23/19		
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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)				
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MT-5/23/19

Tank set, leveled  
operational ✓  
Ready for cover  
Remove or cover rock  
in spray.

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OSSF Inspection Sheet**

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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: 109058  
Issued This Date: 05/03/2019  
This permit is hereby given to: Jerry L. & Robin G. Stroud

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

15100 CRANES MILL RD  
CANYON LAKE, TX 78133

Subdivision: Canyon Lake Mobile Home Estate North  
Unit: 2  
Lot: A&B  
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 18, 2019

Permit # 109058

Owner Name JERRY L & ROBIN G STROUD
Mailing Address 172 CREEKSIDE VILLA
City, State, Zip KYLE TEXAS 78640
Phone# 214-906-3791
Email robingstroud@yahoo.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 CANYON LAKE MOBILE HOME ESTATES NORTH Unit/Phase/Section 2 Lot A & B Block
Acreage/Legal
Street Name/Address 15100 CRANES MILL ROAD City CANYON LAKE Zip 78133

Type of Development:

[X] Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) MOBILE HOME
Number of Bedrooms 3
Indicate Sq Ft of Living Area 1568

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APR 26 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: \$ 150,000 (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 [X] Public [ ] 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 Robin G. Stroud Date 4/25/19

\*\*\* 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 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) SOLAR AIR SA600LP Absorption/Application Area (Sq Ft) 4035

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)

RECEIVED

APR 26 2019

Is the property located over the Edwards Recharge Zone? [ ] Yes [X] No

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

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

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

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



FIRM #2585

By signing this application, I certify that:

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

Signature of Designer (Handwritten Signature)

Date April 19, 2019

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

April 20, 2019

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

RECEIVED  
APR 26 2019  
COUNTY ENGINEER

RE- Septic Design  
15100 CRANES MILL ROAD  
CANYON LAKE MOBILE ESTATES NORTH, U2, Lot A&B  
CANYON LAKE, TX 78133  
STROUD RESIDENCE

Ms. Ritzen/Hernandez,

Due to the lack of available application area it is necessary to have the setback from the property line to the spray at ten feet as required by TCEQ Chapter 285 rules Table X. I hereby request a variance to the twenty foot setback to property lines as required by Comal County Order and equivalent protection will be maintained by including a battery backup to the timer clock to assure sprayers to only spray during the predawn hours. In my professional opinion this variance will not pose a threat to the environment or public health.

If I can be of further assistance please contact me.

Respectfully yours,



Greg W. Johnson, P.E., F#2585

04/20/19  
Date



AFFIDAVIT



201906014120 04/26/2019 10:39:54 AM 1/2

*JWS*

THE COUNTY OF COMAL  
STATE OF TEXAS

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

I

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

II

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

2 UNIT/PHASE/SECTION \_\_\_\_\_ BLOCK A & B LOT CANYON LAKE MOBILE HOMES ESTATES NORTH SUBDIVISION

IF NOT IN SUBDIVISION: \_\_\_\_\_ ACREAGE \_\_\_\_\_ SURVEY \_\_\_\_\_

The property is owned by (insert owner's full name): JERRY L. STROUD & ROBIN G. STROUD

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 25 DAY OF April, 2019

*[Signature]*  
Robin G. Stroud

Owner(s) signature(s)

Jerry Stroud  
Robin G. Stroud

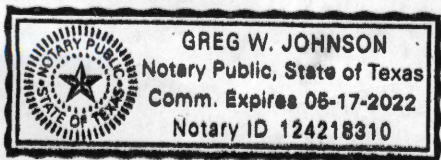
Owner (s) Printed name (s)

Jerry L. + Robin G. Stroud  
APRIL, 2019

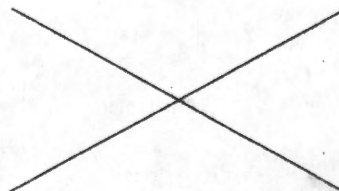
SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 25 DAY OF

THIS AREA FOR COMAL COUNTY CLERK RECORDING PURPOSES ONLY

*[Signature]*  
Notary Public Signature



(Notary Seal Here)





# AFFIDAVIT TO THE PUBLIC

THE COUNTY OF COMAL §  
STATE OF TEXAS §

**JERRY L. STROUD & ROBIN G. STROUD**

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_ who after being by me duly sworn, upon oath state that they are the owner of record of that certain tract or parcel of land lying and being situated in Comal County, Texas, and being more particularly described as follows:

2 UNIT/PHASE/SECTION \_\_\_\_\_ BLOCK A & B LOT CANYON LAKE MOBILE HOMES ESTATES NORTH SUBDIVISION

IF NOT IN SUBDIVISION: \_\_\_\_\_ ACREAGE \_\_\_\_\_ SURVEY

The undersigned further state that the on-site sewage facility for the referenced properties crosses the boundary between the properties. These properties cannot be sold separately and must be sold as one. Any buyer or transferee is hereby notified of this requirement. RECEIVED

APR 26 2019

WITNESS MY/OUR HAND(S) on this 25 day of April, 2019.

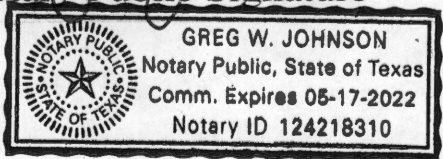
[Signature]  
JERRY L. STROUD

[Signature]  
ROBIN G. STROUD


COUNTY ENGINEER

SWORN TO AND SUBSCRIBED BEFORE ME on this 25 day of April, 2019.

[Signature]  
Notary Public Signature



(Notary Seal)

Filed and Recorded  
Official Public Records  
Bobbie Koepp, County Clerk  
Comal County, Texas  
04/26/2019 10:39:54 AM  
TERRI 2 Page(s)  
201906014120  
 Bobbie Koepp

DAVID WINTERS SEPTICS, LLC  
PO BOX 195  
SPRING BRANCH, TEXAS 78070  
830-935-2477 OFFICE  
830-935-2470 FAX  
[winters3@gvvc.com](mailto:winters3@gvvc.com)

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COUNTY ENGINEER

### Routine Maintenance and Inspection Agreement

This Work for Hire Agreement (hereinafter referred to as this "Agreement") is entered into by and between \_\_\_\_\_ (referred to as "Client") and David Winters Septics, LLC, Inc. (hereinafter referred to as "Contractor") located at 15100 Cranes Mill Road / CL Mobile Homes Estates North, U2, Lot A&B. Date beginning on LTO and contract ending on \_\_\_\_\_. By this Agreement the Contractor agrees to render professional service, as described herein, and the Client agrees to fulfill the terms of this Agreement as described herein.

This contract will provide for all required inspections, testing and service for your Aerobic Treatment System. The policy will include the following:

1. Three (6) inspections per year/service calls (at least one every four months), for a total of 6 over the two year period. Including inspection, adjustment and servicing of the mechanical, electrical and other applicable component parts to ensure proper function. This includes inspecting control panel, air pumps, air filters, diffuser operation, and replacing or repairing any component not found to be functioning correctly. Any alarm situations affecting the proper function of the Aerobic, process will be addressed within a 48 hour time frame. After the contract for the one year service agreement expires, work on the remaining warranty does not include labor prices. Repair work on non-warranty parts will include price for labor and parts. The prices will be quoted before work is performed.
2. An effluent quality inspection consisting of a visual check of color, turbidity, scum overflow and examination for odors. A test for chlorine residual and pH will be taken and reported as necessary.
3. If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified immediately in writing of the conditions and estimated date of correction.
4. The Client is responsible for the chlorine tablets; they must be filled before or during the service visit.
5. Any additional visits, inspections or sample collection required by specific Municipalities, Water/River Authorities, and County Agencies the TCEQ or any other authorized regulatory agency in your jurisdiction will be covered by this policy.

At the conclusion of the initial service policy, our company will make available, for purchase on an annual basis, a continuing service policy cover NORMAL inspection, maintenance and repair.

The Homeowners Manual must be strictly followed or warranties are subject invalidation. Pumping of sludge build up is not covered by this policy and will result in additional charges.

This agreement does not cover any labor or parts for items which must be replaced due to acts of God, ie, lightning strikes, high winds, flooding, freezing.

This agreement DOES NOT COVER materials or parts which must be replaced due to misuse or abuse of the system. These include but are not limited to: Sewage flows exceeding the recommended daily hydraulic design capabilities. Disposal of Non-Biodegradable materials, such as chemicals, grease or oil, sanitary napkins, tampons, baby wipes, disposable diapers. Clogs in the line between the house and the tank.

This agreement DOES NOT COVER LABOR OR PARTS for out of warranty items.

#### ACCESS BY CONTRACTOR

The contractor or anyone authorized by the contractor may enter the property at reasonable times without prior notice for the purpose of service described above.

#### PAYMENT FOR SERVICES

The client will pay compensation to the contractor for the services in the amount of \_\_\_\_\_. This compensation shall be payable in one lump sum payment upon acceptance of this agreement. Payments not received within 30 days of the above described due date will be subject to a \$25.00 late penalty.

**TERMINATION OF THIS AGREEMENT**

Either party may terminate this agreement within 10 days of written notice in the event of substantial failure to perform in accordance with its terms by other party without fault of the terminating party. If this agreement is terminated, the contractor will immediately notify the appropriate health authority.

**LIMIT OF LIABILITY**

The Contractor will not be liable for indirect, consequential, incidental or punitive damages, whether in contract or any other theory. In no event shall the Contractor's liability for direct damages exceed the price for the services described in this agreement.

Permit # \_\_\_\_\_

The effective date of this initial maintenance contract shall be the date the license to operate is issued.

Owner

Contractor

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APR 26 2019

JERRY L. & ROBIN G. STROUD

David Winters Septics, LLC

Name

PO Box 195

15100 CRANES MILL ROAD

Address

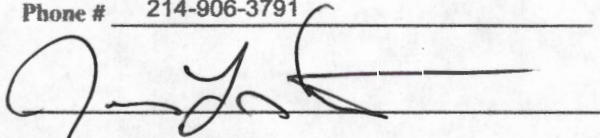
Spring Branch, Texas 78070

CANYON LAKE, TX 78133

City, State

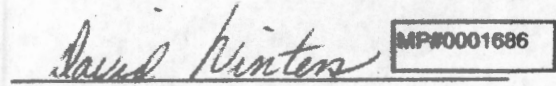
Office #830-935-2477 - Fax # 830-935-2470

Phone # 214-906-3791



Signature of Home Owner

Robin G. Stroud



Signature of Contractor

MP#0001686

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

Date Soil Survey Performed: April 18, 2019

Site Location: CANYON LAKE MOBILE HOME ESTATES NORTH, UNIT 2, LOTS "A" & "B"

Proposed Excavation Depth: N/A

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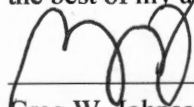
**Requirements:**

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.

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 @ 4"	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

09/18/19  
\_\_\_\_\_  
Date

**OSSF SOIL EVALUATION REPORT INFORMATION**

Date: April 19, 2019

**Applicant Information:**

Name: JERRY L. & ROBIN G. STROUD  
Address: 172 CREEKSIDE VILLA  
City: KYLE State: TEXAS  
Zip Code: 78640 Phone: (214) 906-3791

**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 <sup>SEE BELOW</sup> Unit 2 Blk \_\_\_\_\_ Subd. CANYON LAKE MOBILE HOME ESTATES NORTH  
Street Address: 15100 CRANES MILL ROAD  
City: CANYON LAKE Zip Code: 78133  
Additional Info.: LOTS "A" & "B"

**Installer Information:**

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_ Phone RECEIVED

**Topography:** Slope within proposed disposal area: 4 to 10 %  
Presence of 100 yr. Flood Zone: YES \_\_\_ NO X  
Existing or proposed water well in nearby area: YES \_\_\_ NO X  
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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COUNTY ENGINEER

**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 1568

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

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

Trash Tank Size 376 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 = 4035 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 = 778 Gal. 18.75 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

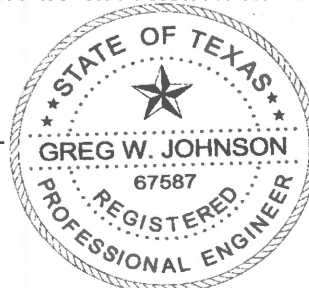
1" Sch-40 PVC discharge manifold

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

4/19/19  
DATE

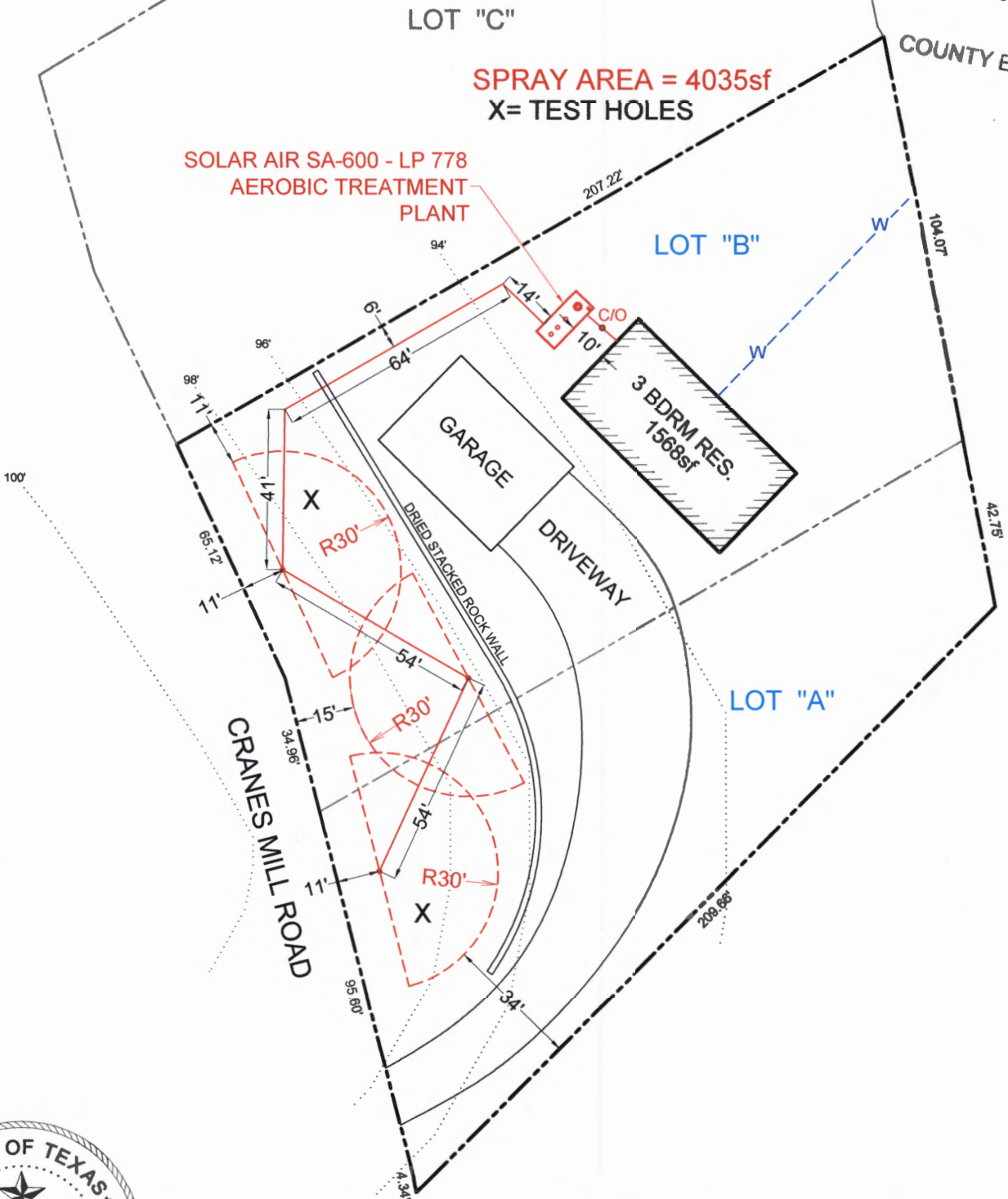


FIRM #2585

NOTE:  
 NO OSSF SYSTEM CAN BE INSTALLED ON  
 THE SAME PROPERTY AS THE SINGLE  
 FAMILY DWELLING, DUE TO PLACEMENT  
 OF HOUSE AND SIZE OF LOT. JERRY L. &  
 ROBIN G. STROUD OWNS BOTH  
 PROPERTIES.

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OWNER: JERRY L. & ROBIN G. STROUD		DRAWN BY: EJS III	
STREET ADDRESS: 15100 CRANES MILL ROAD			
LEGAL DESC: CANYON LAKE MOBILE HOME ESTATES NORTH	UNIT/SECTION/PHASE: 2	BLOCK:	LOT: A & B
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=40'	DATE: 4/19/2019	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.

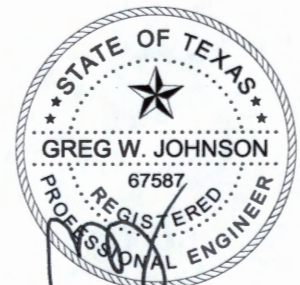
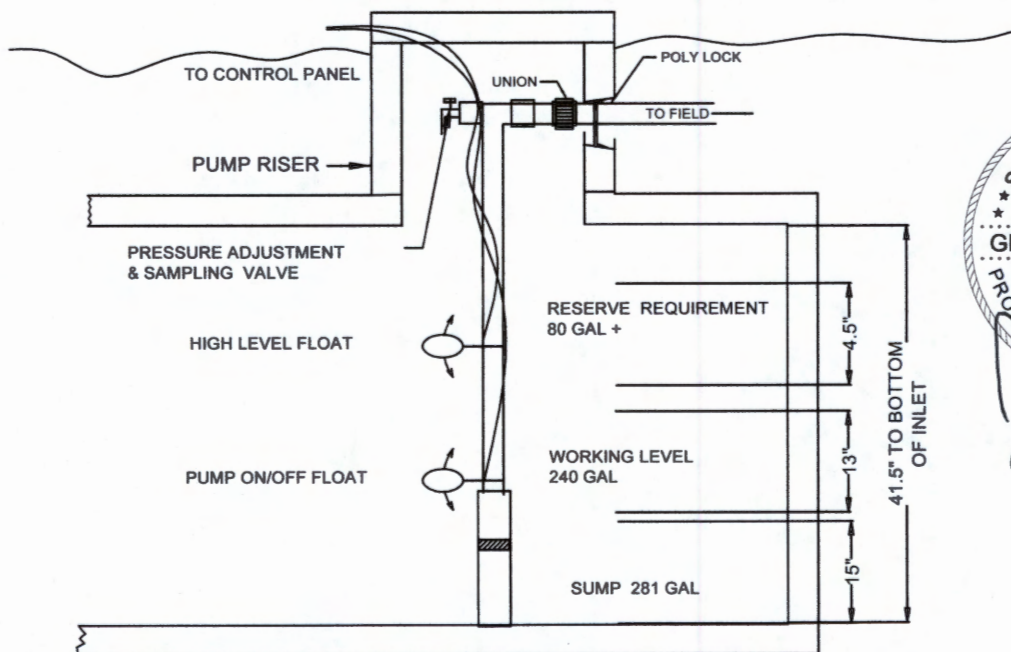
A minimum of 4" of sand, sandy loam, clay loam free of rock shall be placed under and around tanks

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COUNTY ENGINEER

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



F#2585

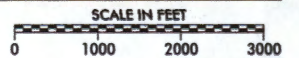
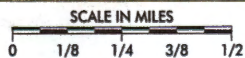
04/18/19

TYPICAL PUMP TANK CONFIGURATION  
SOLAR-AIR SA-600 LP 778 GAL PUMP TANK

354



CONTINUED ON MAP 353





NEW BRAUNFELS TITLE CO.  
CANYON LAKE OFFICE  
GF# 087008 NBI

**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.**

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APR 26 2019

**GENERAL WARRANTY DEED**

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

THAT DAVID L. ROSECRANS and wife, KAREN M. KNIGHT, 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 JERRY L. STROUD and wife, ROBIN G. STROUD, 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:

**Lots A and B, CANYON LAKE MOBILE HOME ESTATES NORTH UNIT NO. 2, a subdivision in Comal County, Texas, according to map or plat recorded in Volume 4, Page 86, Map and Plat Records, 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 7 day of May, 2018.

David L. Rosecrans  
DAVID L. ROSECRANS  
Karen M. Knight  
KAREN M. KNIGHT

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COUNTY ENGINEER

STATE OF TEXAS  
COUNTY OF Comal

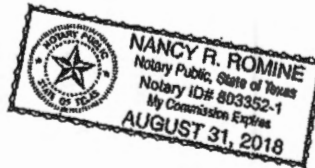
§  
§

This instrument was acknowledged before me on this the 7 day of 2018, 2018, by DAVID L. ROSECRANS and wife, KAREN M. KNIGHT.

Nancy R. Romine  
Notary Public in and for the State of Texas

Grantee's Mailing Address:

178 Craxside Villa  
Ryle, TX 78640



9162.Deeds  
New Braunfels Title Co (NR)  
GF 87008NBT

Filed and Recorded  
Official Public Records  
Bobbie Koepp, County Clerk  
Comal County, Texas  
05/08/2018 01:19:42 PM  
LAURA 2 Pages(s)  
201806017704



Bobbie Koepp

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

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

<i>Permit Number</i>

Instructions:

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

OSSF Permit

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

RECEIVED  
 APR 26 to 2019  
 COUNTY ENGINEER

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

  
 \_\_\_\_\_  
 Signature of Applicant

04/26/19  
 \_\_\_\_\_  
 Date

___ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

___ INCOMPLETE APPLICATION	
(Missing Items Circled, Application Refused)	