

Comal County

OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: **07/22/2019** Permit Number: **109345**

Location Description: **256 TOUCAN DR
SPRING BRANCH, TX 78070**

Subdivision: **Mystic Shores**
Unit: **17**
Lot: **1260**
Block:
Acreage:

Type of System: **Aerobic
Surface Irrigation**

Issued to: **Jan & Micaela Winiecki**

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

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

Alterations to this permit including, but not limited to:

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


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

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

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

Licensing Authority

Comal County Environmental Health


ENVIRONMENTAL HEALTH INSPECTOR

OS0032485


ENVIRONMENTAL HEALTH COORDINATOR
OS 0025599

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: TYLER MASON OSSF Installer #: 050033556
 1st Inspection Date: 7-15-19 -FALL 2nd Inspection Date: 7-17-19 3rd Inspection Date: 7-22-19
 Inspector Name: CONNOR Inspector Name: CONNOR Inspector Name: CONNOR
 Permit#: 109345 Address: 256 TOUCAN DR / MYSTIC SHORES

No.	Description	Answer	Options	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)(vi) 285.30(b)(1)(A)(vii) 285.30(b)(1)(A)(viii)		/		
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)				

7-15-19 M
 NO INSPECTION. TANK
 WASNT FULL.

7-17-19 JL
 TANK SET, LEVELLED
 OPERATIONAL. COVER

7-22-19 JC
 COVERED

**Comal County Environmental Health
OSSF Inspection Sheet**

	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40		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)				
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 30 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: TYLER MASON OSSF Installer #: 050033556
 1st Inspection Date: 7-15-19 - FAIL 2nd Inspection Date: 7-17-19 3rd Inspection Date: _____
 Inspector Name: CONNOR Inspector Name: CONNOR Inspector Name: _____
 Permit#: 109345 Address: 256 TOUCAN DR. / MYSTIC SHORES

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

7-15-19
 NO INSPECTION. TANK
 WASNT FULL.

7-17-19 JL
 TANK SET, LEVELED
 OPERATIONAL - COVER

**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	✓			✓		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	✓		MUWATER 600	✓		
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)(1) 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(c)(3)(A)-(F)				
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)	AEROBIC SPRAY	✓		
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**

Item	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 < 2.0%</p> <p>EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom)</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully</p> <p>EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & 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)		✓		
34	<p>AEROBIC TREATMENT UNIT Inspection/Clean Out Port & 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 & 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 & 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)		✓		
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: TYLER MASON OSSF Installer #: 050033556

1st Inspection Date: 7-15-19 - FAIL 2nd Inspection Date: _____ 3rd Inspection Date: _____

Inspector Name: CONNOR Inspector Name: _____ Inspector Name: _____

Permit#: 109345 Address: 256 TOUCAN DR. / MYSTIC STORES

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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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)				
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7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

7-15-19
NO INSPECTION, TANK
WASNT FULL.

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
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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)				
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14	AEROBIC TREATMENT UNIT Size Installed						
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number						
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
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**Comal County Environmental Health
OSSF Inspection Sheet**

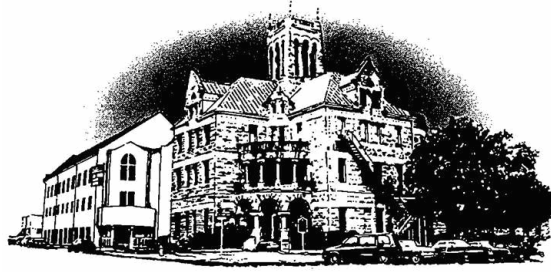
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**Comal County Environmental Health
OSSF Inspection Sheet**

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



Comal County

OFFICE OF COMAL COUNTY ENGINEER

Permit of Authorization to Construct an On-Site Sewage Facility Permit Valid For One Year From Date Issued

Permit Number: 109345
Issued This Date: 07/10/2019
This permit is hereby given to: Jan & Micaela Winiecki

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

256 TOUCAN DR
SPRING BRANCH, TX 78070

Subdivision: Mystic Shores
Unit: 17
Lot: 1260
Block:
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic
Surface Irrigation

This permit gives permission for the construction of the above referenced on-site facility to commence. Installation must be completed by an installer holding a valid registration card from the Texas Commission on Environmental Quality (TCEQ). Installation and inspection must comply with current TCEQ and Comal County requirements.

Call (830) 608-2090 to schedule inspections.

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

Items Date Received	Initials

Permit Number

Instructions:

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

OSSF Permit

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

Portion of Proposed OSSF Located in the United States Army Corps of Engineers (USACE) Flowage Easement

USACE Consent for proposed OSSF

JUL 01 2019
RECEIVED
JUL 01 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

Sign + Date

6-21-2019
Date

COMPLETE APPLICATION

Check No. _____ Receipt No. _____

INCOMPLETE APPLICATION

(Missing Items Circled, Application Refused)

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

Date _____

Permit # 109345

Owner Name Jan & Micaela Winiacki
 Mailing Address 1726 Ravenna Avenue
 City, State, Zip Wilmington, CA 97044
 Phone # 830.837.0050 (Tyler Mason)
 Email tyler@buildingwithar.com

Agent Name Douglas R. Dowlearn
 Agent Address 703 Oak Drive
 City, State, Zip Blanco, TX 78608
 Phone # 210.240.2101
 Email txseptic@gmail.com

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

Subdivision Name Mystic Shores Unit 17 Lot 1260 Block _____
 Acreage/Legal 1.04
 Street Name/Address 256 Toucan Drive City Spring Branch Zip 78070

Type of Development:

Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 1900

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Non-Single Family Residential

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(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: \$ 185,000.00 (Structure Only) **Complete**

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

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

Source of Water Public Private Well

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

By signing this application, I certify that:

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

[Signature]
 Signature of Owner

6-21-2019
 Date

Sign Date

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

Planning Materials & Site Evaluation as Required Completed By Douglas R. Dowlearn

System Description Aerobic Treatment with Spray Disposal

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

Tank Size(s) (Gallons) 600 Absorption/Application Area (Sq Ft) 3750 Required

Gallons Per Day (As Per TCEQ Table III) 240

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

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

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

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

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

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

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

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

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

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

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

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

Is this property within an incorporated city? Yes No

If yes, indicate the city: _____

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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.

Douglas R. Dowlearn
Signature of Designer

6/20/19

Date

Page 2 of 2

1/e



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AFFIDAVIT TO THE PUBLIC

**THE COUNTY OF COMAL
STATE OF TEXAS**

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

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

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): _____

Lot 1260, Mystic Shores, Unit Seventeen

The property is owned by (insert owner's full name): _____
Jan & Micaela Winiecki

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 20 DAY OF June, 2019

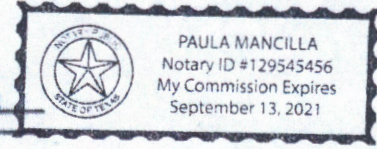
[Signature]
Micaela Winiecki
Owner(s) signature(s)

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SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 20 DAY OF June, 2019

[Signature]
Notary Public, State of Texas

Notary's Printed Name: Paula Mancilla
My Commission Expires: 9/13/21



Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
06/21/2019 04:02:38 PM
CHRISTY 1 Page(s)
201906021435



Bobbie Koepf

WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

Regulatory Authority _____
A&R Construction LLC
2102 Oak Valley Drive
New Braunfels TX, 78132
Off. (830) 837-0050

Permit/License Number _____
Customer Jan & Micaela Winiacki
Site Address 256 Toucan Drive
City Spring Branch Zip 78070
Mailing Address Same as above
County Comal Map # _____
Phone 310-251-8756
Email jan.winiacki@sbcglobal.net

I. General: This Work for Hire Agreement (hereinafter referred to as "Agreement") is entered into by and between Jan & Micaela Winiacki (hereinafter referred to as "Customer") and A&R Construction, LLC. By this agreement, A&R Construction, 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.

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II. Effective Date:

This Agreement commences on _____ LTO _____ and ends on _____ (2 years thereafter) _____ for a total of two (2) years (initial agreement) or one (1) year (thereafter). 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.

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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.
- 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.

V. Disinfection:


Customer's Initials

Tm
Contractor's Initials

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

VI. Electronic Monitoring:

Electronic Monitoring is not included in this Agreement.

VII. Performance of Agreement:

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

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

1. 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 Customers responsibility to keep lids exposed and accessible at all times.

X. Limit of Liability:

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

XI. Indemnification:

Customer (whether one or more) shall and does hereby agree to indemnify, hold harmless and 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.


Customer's Initials

Tm
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.

A&R Construction, LLC,
Contractor
MP#0002228

Customer's Initials

Customer Signature

Date

Tm
Contractor's Initials

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OSSF SOIL EVALUATION REPORT INFORMATION

Date: 6/24/19

Applicant Information:

Name: Jan & Micaela Winiecki c/o Tyler Mason
Address: 1726 Ravenna Avenue
City, State & Zip Code: Wilmington, CA 97044
Phone: 830.837.0050 (Tyler Mason)
Email: tyler@buildingwithar.com

Site Evaluator Information:

Name: Douglas R. Dowlearn
Company: D.A.D. Services, Inc.
Address: 703 Oak Drive
City, State & Zip: Blanco, TX 78606
Phone: (210)240-2101 Fax: (866)260-7687
Email: txseptic@gmail.com

Property Location:

Lot: 1260 Subdivision: Mystic Shores Unit 17
Street/Road Address: 256 Toucan Drive
City: Spring Branch Zip: 78070
Additional Info: Comal County/1.04 Acres

Installer Information:

Name:
Company: A & R Construction LLC
Address:
City, State & Zip:
Phone: Fax:

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

DESIGN SPECIFICATIONS

Application Rate (RA): 0.064

OSSF is designed for: 3 BR (1900 sq. ft.)
240 Gallons per day required

An aerobic treatment/spray disposal system is to be utilized based on the site evaluation.
3750 sq. ft. disposal area required
600 gallon/day aerobic tank required

Calculations: Absorption Area: $Q/RA = 240/0.064 = 3750$ Sq. Ft.

FEATURES OF SITE AREA

Presence of 100-year flood zone: NO

Existing or proposed water well in nearby area: NO

Presence of adjacent ponds, streams, water impoundments: NO

Presence of upper water shed: NO

Organized sewage service available to lot: NO

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

Site Evaluator:

NAME: Douglas R. Dowlearn, R.S.

License No. OS9902 - Exp. 6/30/2020

TDH: #2432 - Exp. 2/28/2021

Signature:



D.A.D SERVICES, INC.
DOUG DOWLEARN
703 OAK DRIVE, BLANCO, TX 78606
Designed for: Jan & Micaela Winiecki c/o Tyler Mason

The installation site is on Lot 1260 of the Mystic Shores Unit 17 Subdivision in Comal County, TX. The proposed OSSF will treat the wastewater from a 3 Bedroom (1900 sq. ft.) residence. The proposed method of wastewater treatment is aerobic treatment with spray irrigation. This method was chosen because of unsuitable soil conditions.

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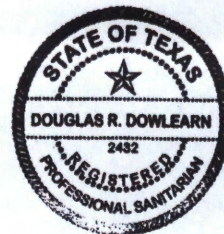
PROPOSED SYSTEM:

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

DESIGN SPECIFICATIONS:

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



Douglas R. Dowlearn
6/24/19

SYSTEM COMPONENTS:

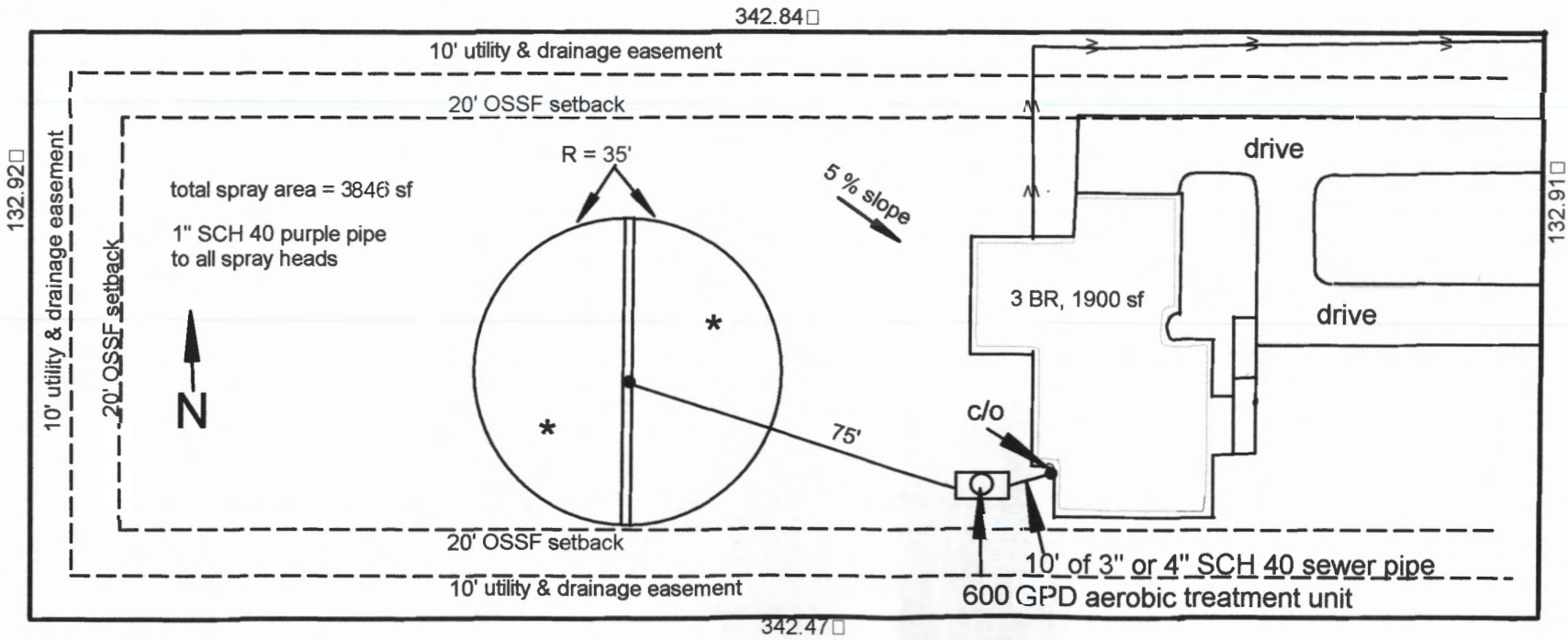
SCH 40 PVC sewer line
1" purple PVC supply line
600 gpd aerobic treatment plant with manual or timed controls
Liquid chlorinator
2 K-Rain Gear Driven Pop-up Sprinkler
Pre-tank and 768 gallon pump tank

LANDSCAPING:

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

Jan & Micaela Winiecki
 c/o Tyler Mason
 256 Toucan Drive
 Spring Branch, TX 78070
 Lot 1260 Mystic Shores, Unit 17
 Comal County
 1" = 40'
 * = test holes

Handwritten signature
 6/24/19



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Assembly Details

OSSF

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Douglas R. Dowlearn
6126119

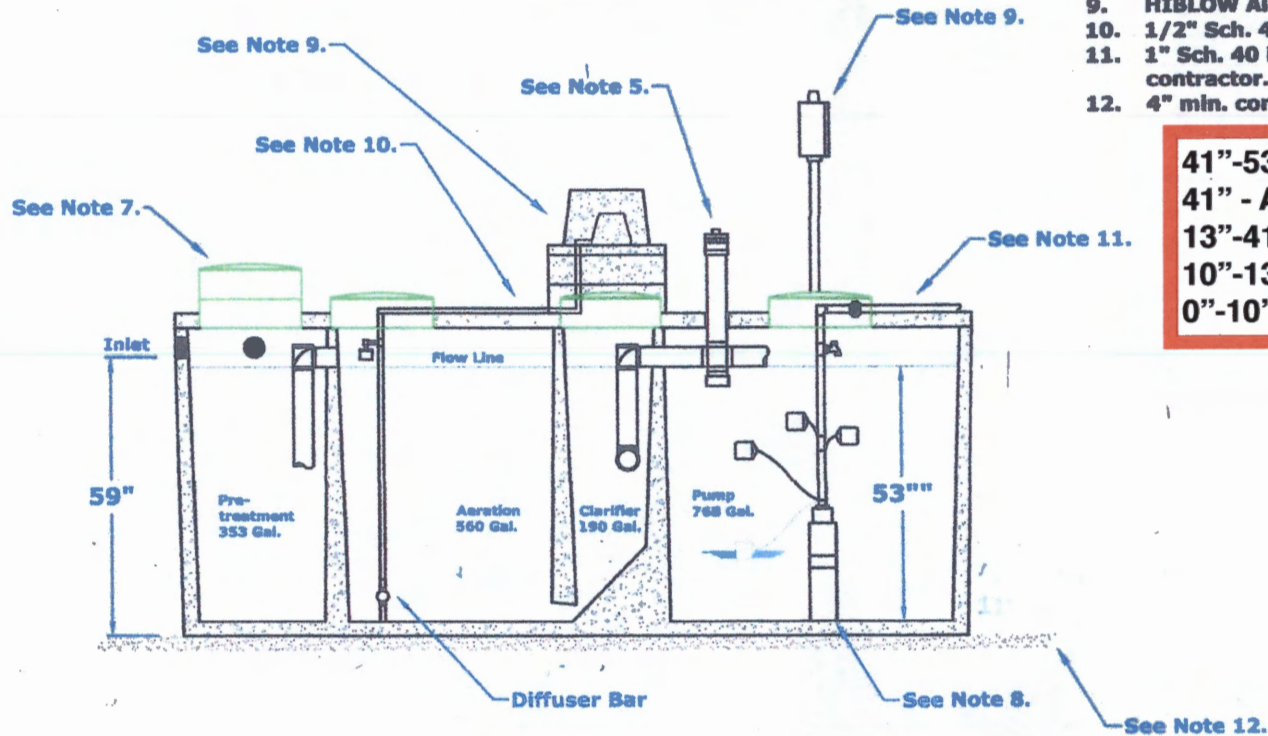
14.49 Gallons per inch

GENERAL NOTES:

1. Plant structure material to be precast concrete and steel.
2. Maximum burial depth is 30" from slab top to grade.
3. Weight = 14,900 lbs.
4. Treatment capacity is 600 GPD. Pump compartment set-up for a 360 GPD Flow Rate (4 bedroom, < 4,000 sq/ft living area). Please specify for additional set-up requirements. BOD Loading = 1.62 lbs. per day.
5. Standard tablet chlorinator or Optional Liquid chlorinator. NSF approved chlorinators (tablet & liquid) available.
6. Bio-Robix B-550 Control Center w/ Timer for night spray application. Optional Micro Dose (min/sec) timer available for drip applications. Electrical Requirement to be 115 Volts, 60 Hz, Single Phase, 30 AMP, Grounded Receptacle.
7. 20" Ø access riser w/ lid (Typical 4). Optional extension risers available.
8. 20 GPM 1/2 HP, high head effluent pump.
9. HIBLOW Air Compressor w/ concrete housing.
10. 1/2" Sch. 40 PVC Air Line (Max. 50 Lft from Plant).
11. 1" Sch. 40 PVC pipe to distribution system provided by contractor.
12. 4" min. compacted sand or gravel pad by Contractor

41"-53" - Reserve - 174 Gal
41" - Alarm
13"-41" - Working Level - 405 Gal
10"-13" - On/Off Tether - 44 Gal
0"-10" - Sump - 145 Gal

DIMENSIONS:
 Outside Height: 67"
 Outside Width: 63"
 Outside Length: 164"
MINIMUM EXCAVATION DIMENSIONS:
 Width: 76"
 Length: 176"



NuWater B-550 (600 GPD) Aerobic Treatment Plant (Assembled)

Model: B-550-PC-400PT

March, 2012 - Rev 1
 By: A.S.

Scale:
 * All Dimensions subject to allowable specification tolerances.

Dwg. #: ADV-B550-3



Advantage Wastewater Solutions llc.
 444 A Old Hwy No 9
 Comfort, TX 78013
 830-995-3189
 fax 830-995-4051

Allegiance Title GF #1878450-ALCH

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

Date: February 24, 2018

Grantor: Rudolph D. Gonzalez and Virginia L. Gonzalez, husband and wife

Grantor's Mailing Address: 9303 Cliff Way Street, San Antonio, Texas 75250

Grantee: **Jan Winiccki** and **Micacla Winiccki**

Grantee's Mailing Address: 1726 Rabenna Ave., Wilmington, CA 97044

Consideration: Ten Dollars (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged.

Property (including any improvements):

LOT 1260, MYSTIC SHORES, UNIT SEVENTEEN, COMAL COUNTY, TEXAS ACCORDING TO THE MAP OR PLAT THEREOF RECORDED UNDER COUNTY CLERK'S FILE NO. 200606022555, OFFICIAL PUBLIC RECORDS, COMAL COUNTY, TEXAS.

Reservations from Conveyance: None.

Exceptions to Conveyance and Warranty: Liens described as part of the Consideration and any other liens described in this deed as being either assumed or subject to which title is taken; validly existing easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded and validly existing instruments, other than conveyances of the surface fee estate, that affect the Property; and taxes for 2018 and subsequent years, which Grantee assumes and agrees to pay.

Grantor, for the Consideration and subject to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty, grants, sells, and conveys to Grantee the Property, together with all and singular the rights and appurtenances thereto in any way belonging, to have and to hold it to Grantee and Grantee's heirs, successors, and assigns forever. Grantor binds Grantor and Grantor's heirs and successors to warrant and forever defend all and singular the Property to Grantee and Grantee's heirs, successors, and assigns against every person whomsoever

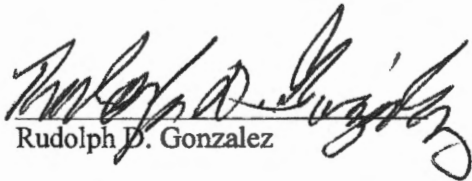
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lawfully claiming or to claim the same or any part thereof, except as to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty.

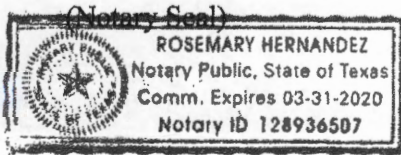
When the context requires, singular nouns and pronouns include the plural.

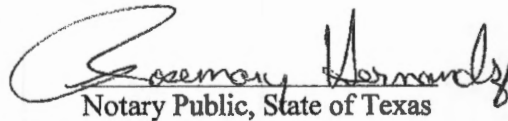

Rudolph D. Gonzalez


Virginia L. Gonzalez

STATE OF TEXAS
COUNTY OF HARRIS

This instrument was acknowledged before me on February 26th, 2018, by Rudolph D. Gonzalez and Virginia L. Gonzalez.




Notary Public, State of Texas

Prepared by:
Dawn Enoch Moore, P.C.
6030 Sherry Lane
Dallas, Texas 75225
214/373-3500

After recording return to:
Jan Winiacki
1726 Rabenna Ave.
Wilmington, CA 90744

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
02/27/2018 11:13:12 AM
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A&R Construction
2102 Oak Valley Drive
New Braunfels, TX 78132

Phone: (830) 837-0050

www.buildingwithar.com tyler@buildingwithar.com

To: **Jan and Micaela Winiecki**
256 Toucan DR
Spring Branch, TX 78070

Printed: 1/3/2020
Site: 256 Toucan DR
Spring Branch, TX 78070

Permit #: **109345**
Agency: Comal County
County: Comal
Mfg / Brand: NU water -
Treatment Type: Aerobic
Disposal: Surface Application

Customer ID: 11
Contract Dates: 7/22/2019 - 7/22/2021
Scheduled Date: 12/21/2019 Inspection 1 of 6
Installed: 7/20/2019
Warranty End: 7/22/2019

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: **12/21/2019** Time In: 11:14 am Out: 11:30 am

Entered By: Tyler Mason

Method: **Grab**

Technician: Tyler

Maint. Provider: Tyler Mason

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: 0mg/L

Sludge Levels

For Tank 1: 4"

Surge Weir Seal: Good

Turbidity: Good

Tank Lid / Riser: Secured

Insp. Port / Plug: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Color: Good

Odor: Good

Alarm: Operational

OK System Light: Op

Comments

Service Completed

Cutomer needs to add Chlorine - Attention: Chlorine Residual reading was ZERO - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. - Attention: Chlorine Residual reading was ZERO

Insp ID #:19

A&R Construction
2102 Oak Valley Drive
New Braunfels, TX 78132

Phone: (830) 837-0050

www.buildingwithar.com tyler@buildingwithar.com

To: Jan and Micaela Winiecki
256 Toucan DR
Spring Branch, TX 78070

Printed: 1/3/2020
Site: 256 Toucan DR
Spring Branch, TX 78070

Permit #: **109345**
Agency: Comal County
County: Comal
Mfg / Brand: NU water -
Treatment Type: Aerobic
Disposal: Surface Application

Customer ID: 11
Contract Dates: 7/22/2019 - 7/22/2021
Scheduled Date: 12/21/2019 Inspection 1 of 6
Installed: 7/20/2019
Warranty End: 7/22/2019

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: **12/21/2019** Time In: 11:14 am Out: 11:30 am

Entered By: Tyler Mason

Method: Grab

Technician: Tyler

Maint. Provider: Tyler Mason

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: 0mg/L

Sludge Levels

For Tank 1: 4"

Surge Weir Seal: Good

Turbidity: Good

Tank Lid / Riser: Secured

Insp. Port / Plug: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Color: Good

Odor: Good

Alarm: Operational

OK System Light: Op

Comments

Service Completed

Cutomer needs to add Chlorine - Attention: Chlorine Residual reading was ZERO - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. - Attention: Chlorine Residual reading was ZERO

Insp ID #: 19

A&R Construction
2102 Oak Valley Drive
New Braunfels, TX 78132

Phone: (830) 837-0050

www.buildingwithar.com tyler@buildingwithar.com

To: **Jan and Micaela Winiecki**
256 Toucan DR
Spring Branch, TX 78070

Printed: 4/21/2020
Site: 256 Toucan DR
Spring Branch, TX 78070

Permit #: **109345**
Agency: Comal County
County: Comal
Mfg / Brand: NU water -
Treatment Type: Aerobic
Disposal: Surface Application

Customer ID: 11
Contract Dates: 7/22/2019 - 7/22/2021
Scheduled Date 4/21/2020 Inspection 2 of 6
Installed: 7/20/2019
Warranty End: 7/22/2019

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: 4/20/2020

Time In: 11:45am

Out: 11:58am

Entered By: Tyler Mason

Method: Grab

Technician: Not Assigned

Maint. Provider: Tyler Mason

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: 0.0

Sludge Levels

For Tank 1: 12

For Tank 3: 2

Turbidity: Good

Tank Lid / Riser: Secured

Insp. Port / Plug: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Color: Good

Odor: Good

Alarm: Operational

Comments

Service Completed

- Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. - Attention: Chlorine Residual reading was ZERO

Insp ID #61

License #: MP0002228

Expires: 5/31/2022

A&R Construction
2102 Oak Valley Drive
New Braunfels, TX 78132

Phone: (830) 837-0050

www.buildingwithar.com tyler@buildingwithar.com

To: Jan and Micaela Winiacki
256 Toucan DR
Spring Branch, TX 78070

Printed: 8/23/2020
Site: 256 Toucan DR
Spring Branch, TX 78070

Permit #: **109345**
Agency: Comal County
County: Comal
Mfg / Brand: Nu-Water -
Treatment Type: Aerobic
Disposal: Surface Application

Customer ID: 11
Contract Dates: 7/22/2019 - 7/22/2021
Scheduled Date: 8/21/2020 Inspection 3 of 6
Installed: 7/20/2019
Warranty End: 7/22/2019

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: 8/21/2020 Time In: 10:45 am Out: 11:00 am

Entered By: Tyler Mason

Method: Grab

Technician: Tyler Mason

Maint. Provider: Tyler Mason

Aerators: Operational
Filters: Operational
Irrigation Pumps: Operational
Disinfection Device: Operational
Chlorine Supply: Operational
Chlorine Residual: .4

Sludge Levels
For Tank 1: 14

Surge Weir Seal: Good

Turbidity: Good
Tank Lid / Riser: Secured
Insp. Port / Plug: Secured

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

Color: Good
Odor: Good

Alarm: Operational

OK System Light: Op

Comments

Service Completed

- Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving.

Inspection ID #: 98

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
1363 Comino Alto
Canyon Lake, TX 78133

Printed: 9/10/2020
Site: 1363 Comino Alto
Canyon Lake, TX 78133

Permit #: **110640**
Agency: Comal County
County: Comal Sub:
Mfg / Brand: Advantage Wastewater LLC - Nu Water
Treatment Type: Aerobic With Chlorine System S/N: 39638
Disposal: Surface Application

Customer ID: 7019
Contract Dates: 5/7/2020 - 5/7/2022
Scheduled Date: 9/7/2020 Inspection 1 of 6
Installed: 4/24/2020
Warranty End: 4/24/2022
GPS Coordinates - Latitude: 29.927176 Longitude: -98.148192

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: 9/10/2020

Time In: 9:30am

Out: 9:43am

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: 0.30mg/L

Sludge Levels

For Tank 1: n/a

For Tank 2: n/a

For Tank 3: 0"

Tank Lid / Riser: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Alarm: Operational

Comments

- Technician Secured the Tank Lid and/or Riser prior to leaving location. - Secured system in the on position with a lock bolt - Reset timer - Checked sprinklers - Gave customer orientation - Customer needs to add bleach - Due to Covid -19 We are only Opening the pump tank recommended by TOWA

Service Completed

Insp ID #: 98381

Provider: Rudy Carson

Technician: Ronnie W Krampota

License #: MP0002036

License #: MT0001175

Expires: 7/31/2023


Rudy Carson



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2102 Oak Valley Drive
New Braunfels, TX 78132

Phone: (830) 837-0050

www.buildingwithar.com tyler@buildingwithar.com

To: **Jan and Micaela Winiecki**
256 Toucan DR
Spring Branch, TX 78070

Printed: 4/25/2021
Site: 256 Toucan Dr
Spring Branch, TX 78070

Permit #: **109345**
Agency: Comal County
County: Comal
Mfg / Brand: Nu-Water -
Treatment Type: Aerobic
Disposal: Surface Application

Customer ID: 11
Contract Dates: 7/22/2019 - 7/22/2021
Scheduled Date: 4/21/2021 Inspection 5 of 6
Installed: 7/20/2019
Warranty End: 7/22/2019

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: **4/7/2021**

Time In: 1:00 pm

Out: 1:10 pm

Entered By: Tyler Mason

Copy emailed to Customer

Customer Emailed: 4/25/2021

Method: **Grab**

Technician: Not Assigned

Maint. Provider: Tyler Mason

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: 0.1 mg/L

Sludge Levels

For Tank 1: 6

Turbidity: Good

Tank Lid / Riser: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Color: Good

Odor: Good

Alarm: Operational

Comments

- Technician Secured the Tank Lid and/or Riser prior to leaving location. - Copy emailed to the customer on 4/25/2021.

Service Completed

Insp ID #: 289