

Comal County

OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: **07/29/2019** Permit Number: **109369**

Location Description: **1465 HILLCREST FOREST
CANYON LAKE, TX 78133**

Subdivision: Canyon Lake Forest
Unit: 1
Lot: 26
Block:
Acreage:

Type of System: **Aerobic
Drip Irrigation**

Issued to: **Shelton Eubanks**

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

James F. Couch

ENVIRONMENTAL HEALTH INSPECTOR

OS0032485

Sandra Ann Hernandez, Asst.

ENVIRONMENTAL HEALTH COORDINATOR

33 0025599

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Baker Septic Bill Baker OSSF Installer #: 050032864
 1st Inspection Date: 7/23/19 2nd Inspection Date: _____ 3rd Inspection Date: 7-29-19 final
 Inspector Name: Mike T. Inspector Name: _____ Inspector Name: Connor
 Permit#: 109369 Address: C.L. Forest / 1465 Hillcrest Forest

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)		7/23/19		
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	/	285.91(10) 285.30(b)(4) 285.31(d)				
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	/	285.32(a)(1)				
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	/	285.32(a)(3)				
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)	/	285.32(a)(5)				
6	PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(G) 285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(A) 285.32(b)(1)(E)(ii)(iii) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(i)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				-

MT-7/23/19
 Tank set, leveled
 operational ✓
 Ready For Cover.

JC 7-29-19
 covered

**Comal County Environmental Health
OSSF Inspection Sheet**

final

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)(II) 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)		7/23/A		
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)	<i>per plan</i>			
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: Baker Septic Bill Baker OSSF Installer #: _____

1st Inspection Date: 7/23/19 2nd Inspection Date: _____ 3rd Inspection Date: _____

Inspector Name: Mike T. Inspector Name: _____ Inspector Name: _____

Permit#: 109369 Address: C.L. Forest / 1465 Hillcrest Forest

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)		7/23/19		
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-7/23/19

Tank set, leveled
operational ✓
Ready For 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	✓		600	7/23/19		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	✓		ProFlo LP			
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**

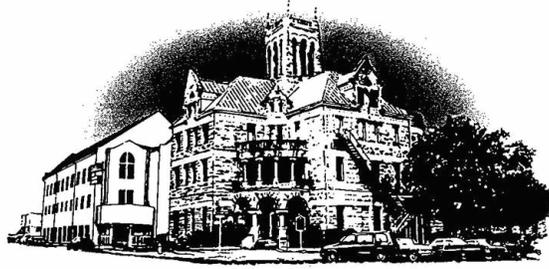
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
19	DISPOSAL SYSTEM Drip Irrigation		285.33(c)(3)(A)-(F)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 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)				
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 < 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)		7/23/19		
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**

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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: 109369
Issued This Date: 07/11/2019
This permit is hereby given to: Shelton Eubanks

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

1465 HILLCREST FOREST
CANYON LAKE, TX 78133

Subdivision: Canyon Lake Forest
Unit: 1
Lot: 26
Block:
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic
Drip 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

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

N/A USACE Consent for proposed OSSF

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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

Signature Date

7-2-2019

Date

<input type="checkbox"/> COMPLETE APPLICATION
Check No. _____ Receipt No. _____

<input type="checkbox"/> 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 # 169369

Owner Name Shelton Eubanks
Mailing Address 136 Iron Horse
City, State, Zip New Braunfels, TX 78132
Phone # 512.557.1831
Email sheltoneubanks@hotmail.com

Agent Name Douglas R. Dowlearn
Agent Address 703 Oak Drive
City, State, Zip Blanco, TX 78606
Phone # 210.240.2101
Email txseptic@gmail.com

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

Subdivision Name Canyon Lake Forest Unit 1 Lot 26 Block _____

Acreage/Legal .2066 Acres

Street Name/Address 1465 Hillcrest Forest City Canyon Lake Zip 78133

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Type of Development:

Single Family Residential

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

Number of Bedrooms 5

Indicate Sq Ft of Living Area 2218

COUNTY ENGINEER

Non-Single Family Residential

(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: \$ Existing (Structure Only)

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

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

Source of Water Public Private Well

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

By signing this application, I certify that:

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

[Signature]
Signature of Owner

7-2-2019
Date

Signature
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 Drip Disposal

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

Tank Size(s) (Gallons) 600 gpd Absorption/Application Area (Sq Ft) 1800 Required

Gallons Per Day (As Per TCEQ Table III) 360

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

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

JUL 08 2019

(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 No

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

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

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

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

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

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

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

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

Is this property within an incorporated city? Yes No

If yes, indicate the city: _____

By signing this application, I certify that:

- The information provided above is true and correct to the best of my knowledge.

- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.



Signature of Designer

6/21/19

Date

Page 2 of 2

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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 368 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 owners 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 39 Texas Administrative Code §285.91(12) will be installed on the property described as (insert legal description)

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Lot 26, Canyon Lake Forest, Unit No. 1

JUL 08 2019

COUNTY ENGINEER

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

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 2nd DAY OF July 2019

[Signature]

Owner(s) signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 2nd DAY OF

July 2019

[Signature]
Notary Public, State of Texas

Notary's Printed Name: Anita Aleman

My Commission Expires: 10/16/19



Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
07/02/2019 12:18:52 PM
CHRISTY 1 Page(s)
201906022826



Bobbie Koepf

Baker Septic Service, LLC
15375 Cranes Mill Rd., Canyon Lake, TX 78133
830-899-2971

JUL 08 2019

COUNTY ENGINEER

Septic System Service Agreement

In consideration of payment for this service contract, we will abide by and agree to its terms and conditions:

Name: Shelton Eubanks Address: 1465 Hillcrest Forest
Subdivision/County: Canyon Lake Forest Lot 24 City, State, Zip: Canyon Lake, TX 78133
Permit # _____ Model # _____ Serial # _____

Phone: 512-557-1831
() Initial Two Year Service Agreement
& Two Year Limited Warranty

() One Year Service Agreement

RENEWAL _____ NAME TRANSFER _____ ANALYSIS _____

Legal Description:

The Effective date of this initial maintenance contract shall be the date the License to Operate is issued.

For \$ _____ this contract will be in effect FROM LITTO - 2/4/19 and will provide the following:

1. An inspection/service call every (4) four months which will include: inspection, adjustments and servicing of the mechanical & electrical components as necessary to insure proper function of the system.
2. An effluent quality inspection consisting of a visual check for color, turbidity, scum, overflow and odor.
3. THE PROPERTY OWNER IS RESPONSIBLE FOR PURCHASING AND KEEPING CHLORINE IN THE CHLORINATOR (IF APPLICABLE). IF THE CHLORINE TEST REVEALS "NO CHLORINE" IN THE SYSTEM, THE PROPERTY OWNER MAY INCURE AN ADDITIONAL COST.
4. If any improper operation is observed (which cannot be corrected at that time) the property owner will be notified immediately of the conditions and the estimated cost.
5. The response time to a complaint by the property owner regarding operation of the system, shall be within 48 hours, from the time of notification. One service call a year, if needed, will be provided with no cost to property owner.
6. ANY PARTS, WARRANTY OR NON-WARRANTY, FREIGHT CHARGES, LABOR OR SERVICE CALLS DUE NOT PAID FOR REMAIN THE PROPERTY OF BAKER SEPTIC SERVICE, LLC AND COULD RESULT IN REPOSSESSION OF PARTS BY BAKER SEPTIC SERVICE, LLC.
7. THE SINGING OF THIS SERVICE AGREEMENT QUTHORIZES BAKER SEPTIC SERVICE, LLC TO ENTER THE PROPEY TO EXECUTE ALL TERMS OF THIS CONTRACT.

BAKER SEPTIC SERVICE, LLC, WILL WARRANTY INSTALLAION of the septic system according to state and county regulations and the designs approved by the county. HOMEOWNER WILL BE RESPONSIDE FOR SERVICE CALL, LABOR, AND SHIPPING COSTS ON ANY "WARRANTED PARTS" EXCHANGED DURING WARRANTY. All other component will be according to manufacturer's warranties.

IMPORTANT: As Baker Septic Service, LLC cannot control what or how much effluent goes into this septic system, we cannot warranty how the system will function. Refer to manufacturers or installers instructions for suggestions on septic operation. This service agreement does not cover the cost of service call, labor or materials that are required or parts out of warranty, the failure to maintain electrical power to the system, sprinklers that are broken, leaking, stopped-up or otherwise mal-functioning; or sewage flows exceeding the hydraulic/organic design capabilities and the input of non-biodegradable materials (solvent, grease, oil, paints, etc.), or any usage contrary to the requirements as advised by authorized service representative. Laboratory test work is available at an additional coast. Chlorine, filters, or parts that are out of warranty are available at a reasonable cost.

This contract does not include the pumping of a tank or of any compartment of a tank, or settlement of soil on or around any part of the system regardless of reason:

Violations of the warranty also include: Disconnecting the alarm, restricting ventilation to the aerator, over loading the system above its rated capacity; or flooding by external means. Rodent, insect or fire Ant damage or any other form of unusual abuse is a violation.

A renewal service contract should be activated (30) thirty days before expiration of existing contract. We will contact property owner prior to expiration of existing contract.

Serviced by: Baker Septic Service, LLC
Maintenance Provider: [Signature]

(X) [Signature]
Property Owner Signature

Print Name (X) Shelton Eubanks

Date: 7-1-2019

(X) William Baker

Date: 7-1-2019 Authorized Service Representative

OSSF SOIL EVALUATION REPORT INFORMATION

Date: 7/1/19

Applicant Information:

Name: Shelton Eubanks

Address: 136 Iron Horse

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

Phone: 512.557.1831

Email: sheltoneubanks@hotmail.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: 26 Subdivision: Canyon Lake Forest, Unit No. 1

Street/Road Address: 1465 Hillcrest Forest

City: Canyon Lake Zip: 78133

Additional Info: Comal County/.2066 Acres

Installer Information:

Name:

Company:

Address:

City, State & Zip:

Phone: Fax:

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 12"+ Limestone	Blocky	<30% Gravel	12"+ Limestone	None
Soil Boring #2 60"		Same as above				

DESIGN SPECIFICATIONS

Application Rate (RA): 0.2

OSSF is designed for: 5 BR (2218 Sq. Ft.)

360 Gallons per day required

An aerobic treatment/drip disposal system is to be utilized based on the site evaluation.

1800 sq. ft. disposal area required

600 gallon/day aerobic tank required

Calculations: Absorption Area: $Q/RA = 360/0.2 = 1800$ 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. 059902 - Exp. 6/30/2020

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

Signature:



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JUL 08 2019

COUNTY ENGINEER

D.A.D SERVICES, INC.
DOUG DOWLEARN
703 OAK DRIVE, BLANCO, TX 78606
Designed for: Shelton Eubanks

The installation site is on Lot 26 of the Canyon Lake Forest, Unit No. 1 Subdivision in Comal County, TX. The proposed OSSF will treat the wastewater from a 5 Bedroom (2218 sq. ft.) residence. The proposed method of wastewater treatment is aerobic treatment with drip irrigation. This method was chosen because of unsuitable soil conditions.

PROPOSED SYSTEM:

A 4" PVC pipe will discharge from the residence to a pre-treatment tank, which flows into a 600 gpd aerobic treatment plant. The pump is activated by a time controller allowing the distribution 8 times per day with a 7 minute run time with float switches set to pump 360 gallons per day. A high level audible and visual alarm will activate should the pump fail. Distribution from the pump is through a self flushing 100 mesh spin filter then through a 1" SCH-40 manifold to a 900 L.F. drip tubing field, with drip lines set approximately two feet apart with 0.61 emitters set every two feet, as per the attached schematic. A pressure gauge and hose bib installed in the pump tank on the manifold to the field will maintain pressure at 30 to 50 psi. A 1" SCH-40 return line is installed to periodically flush the system by cycling a 1" ball valve. Solids caught in the spin filter are flushed each cycle back to the pump tank. Vacuum breakers installed at the highest point on each manifold will prevent siphoning of effluent from higher to lower parts of the field. The placement of the drip tubing will be on soil that has been roughed up and 2" of Class II added; the tubing will be covered with 6" of Class II soil.

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DESIGN SPECIFICATIONS:

Daily Waste Flow: 360 gpd
Application rate: 0.2
Application area required: $360/.2 = 1800$ ft. sq.
Application area utilized: 1800 sq. ft.
Pump tank reserve capacity: 180 gal minimum

COUNTY ENGINEER



Douglas R. Dowlearn
7/1/19

SYSTEM COMPONENTS:

SCH 40 PVC sewer line
1" purple PVC supply line
600 gpd aerobic treatment plant with manual or timed controls
Liquid chlorinator
Pump tank
Pretreatment 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 drip disposal must be covered with a ground cover such as grass seed or sod prior to the final inspection. The drip disposal tubing will be laid on top of roughed up soil covered with 2" of Class II soil; the tubing will then be covered with 6" of Class II soil. In the event the natural cover is disturbed, a suitable ground cover must be installed on all excavated areas.



Douglas R. Dowlearn
7/1/19

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REVISED
1:38 pm, Jul 11, 2019

Dowlern

7/11/19

900 L.F of drip tubing spaced 2' apart
18 rows @ 50' per row

5 % slope

600 GPD aerobic
treatment unit

18' of 3" or 4" SCH 40
sewer pipe

c/o

pump & crush existing
septic tank or pump and
fill with concrete slurry
(#67356)

deck

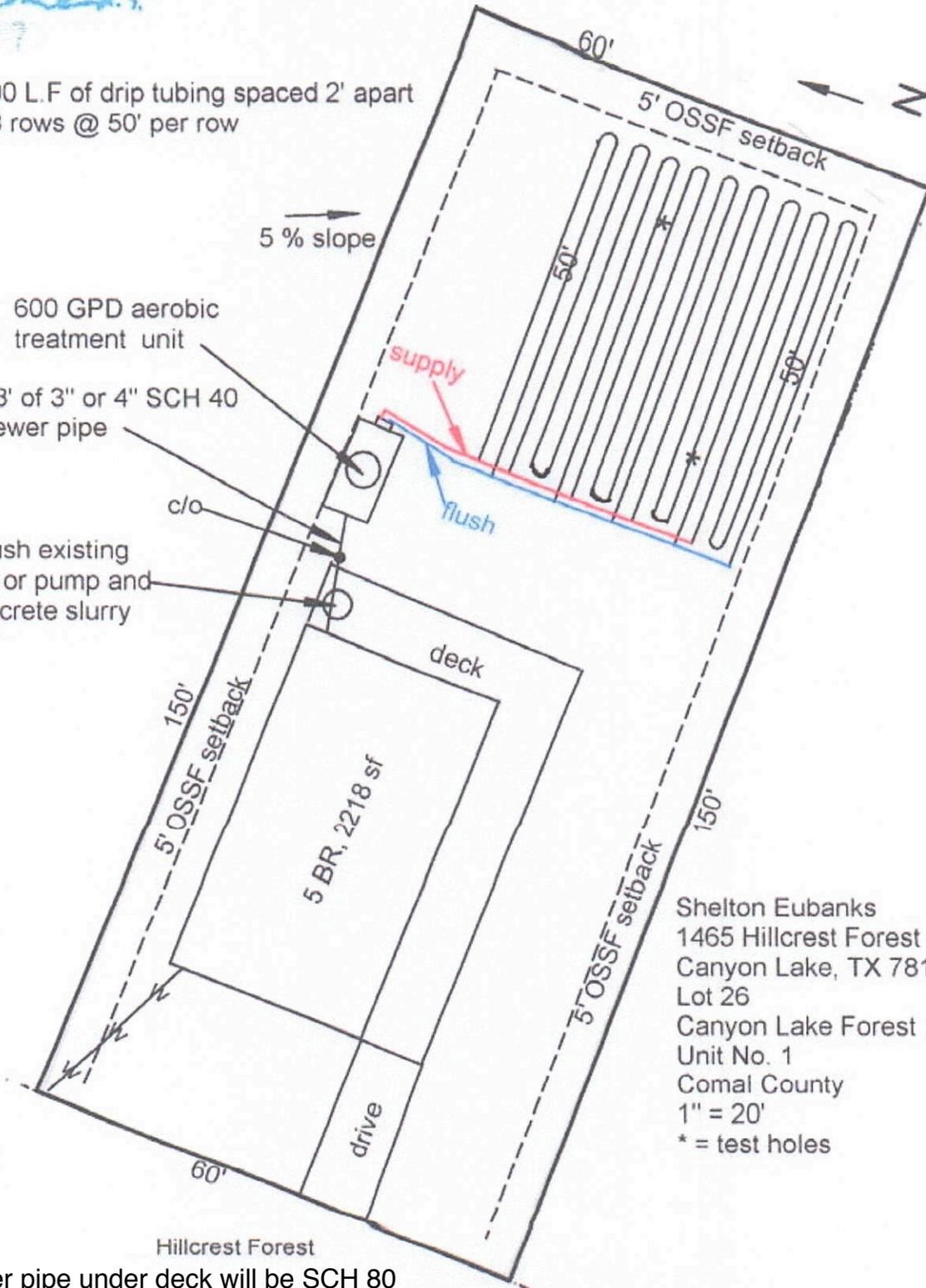
5 BR, 2218 sf

drive

Hillcrest Forest

Shelton Eubanks
1465 Hillcrest Forest
Canyon Lake, TX 78133
Lot 26
Canyon Lake Forest
Unit No. 1
Comal County
1" = 20'
* = test holes

Note: Sewer pipe under deck will be SCH 80
or sleeved in SCH 40 to provide equivalent
protection for OSSF setback requirements of
TAC 285





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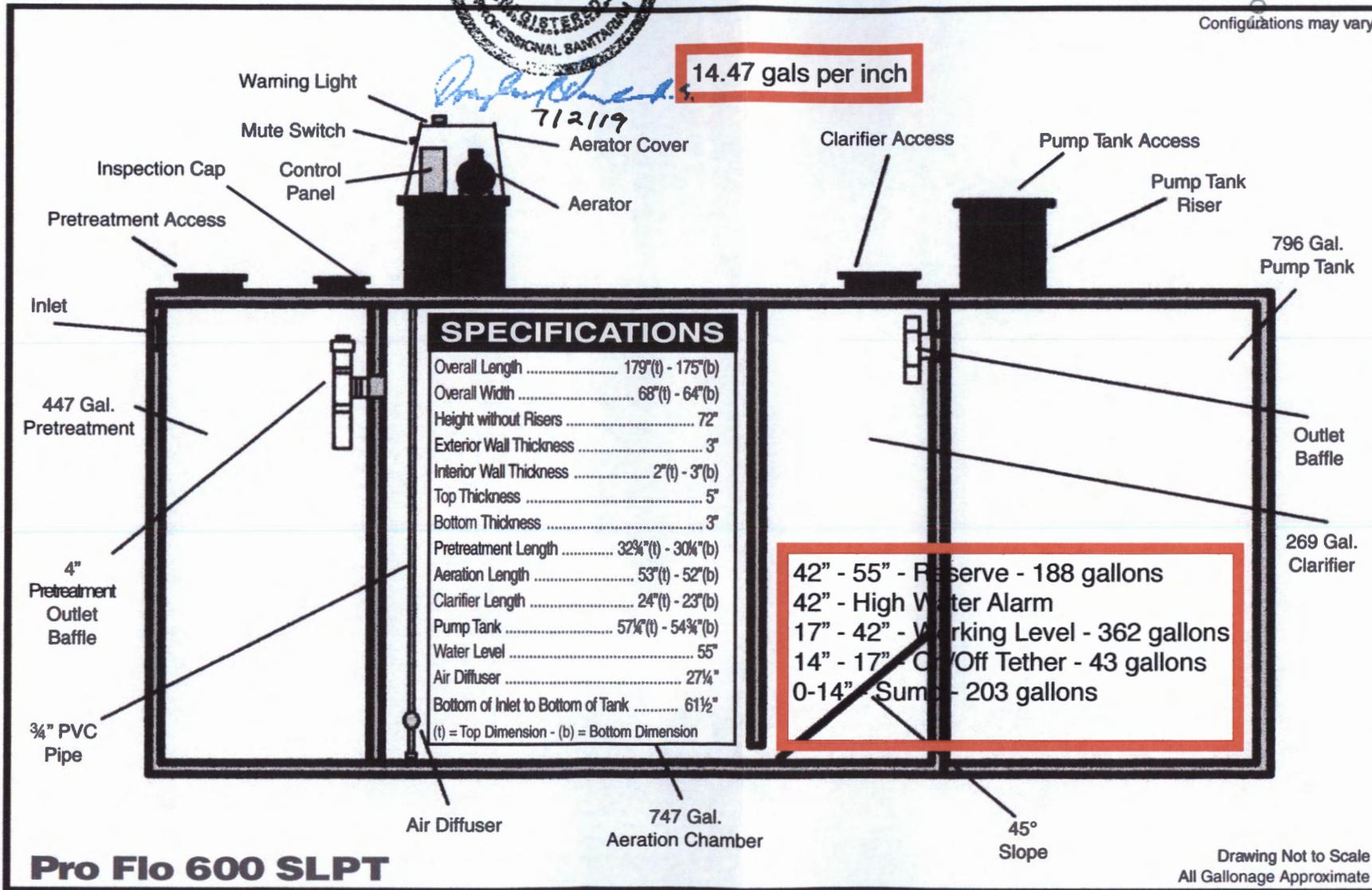
JUL 08 2019

COUNTY ENGINEER

Configurations may vary.

14.47 gals per inch

Douglas R. Dowlearn
712119



Pro Flo 600 SLPT

Drawing Not to Scale
All Gallonage Approximate

Pro Flo 600 SLPT System Diagram

Ritzen, Brenda

From: Ritzen, Brenda
Sent: Thursday, July 11, 2019 1:17 PM
To: 'sheltoneubanks@hotmail.com'
Cc: 'doug dowlearn'
Subject: Permit 109369

Re: Shelton Eubanks
Canyon Lake Forest Unit 1 Lot 26
Application for Permit for Authorization to Construct an On-Site Sewage Facility

Dear property owner & agent,

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

-  Provide equivalent protection for the sewer pipe under the deck.
2. Revise as needed and resubmit.

Thank you,

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



VOID

Douglas R. Dowlearn

7/11/19

900 L.F of drip tubing spaced 2' apart
18 rows @ 50' per row

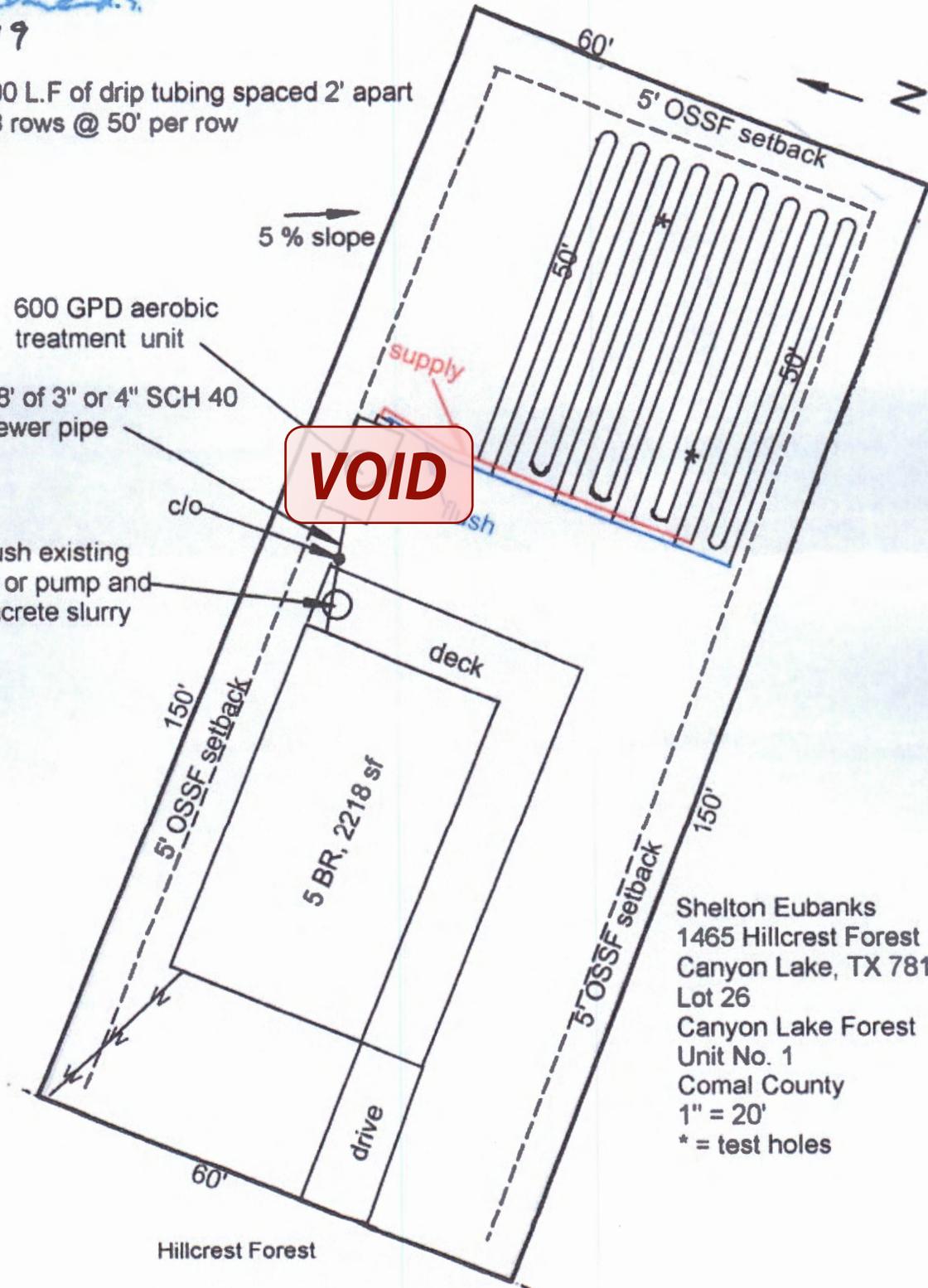
5 % slope

600 GPD aerobic
treatment unit

18' of 3" or 4" SCH 40
sewer pipe

VOID

pump & crush existing
septic tank or pump and
fill with concrete slurry
(#67356)



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COUNTY ENGINE

Shelton Eubanks
1465 Hillcrest Forest
Canyon Lake, TX 78133
Lot 26
Canyon Lake Forest
Unit No. 1
Comal County
1" = 20'
* = test holes

Hillcrest Forest

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

SPECIAL WARRANTY DEED

Date: September 14, 2018

Grantor: GOLDLINE INVESTMENTS, LLC, a Texas limited liability company

JUL 08 2019

Grantor's Mailing Address: P.O. Box 8331, San Antonio, TX 78208

COUNTY ENGINEER

Grantee: SHELTON EUBANKS

Grantee's Mailing Address, and after Recording, Return to: 136 Iron Horse,
New Braunfels, TX 78132

Consideration:

Cash and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged.

Property (including any improvements):

Lot 26, Canyon Lake Forest, Unit No. 1, according to the map or plat thereof recorded in Volume 1, Pages 53-54, of the Map and Plat Records of Comal County, Texas

Reservations from Conveyance: None

Exceptions to Conveyance and Warranty: 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, which Grantee assumes and agrees to pay, and subsequent assessments for that and prior years due to change in land usage, ownership, or both, the payment of which Grantee assumes.

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 lawfully claiming or to claim the same or any part thereof, when the claim is by, through or under Grantor, but not otherwise, except as to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty.

The Contract between Grantor as the Seller and Grantee as the Buyer, if any, may contain limitations as to warranty or other agreed matters; to the extent that such Contract provides for limitations or other agreed matters that will survive the closing and this conveyance, then such limitations or other agreed matters are hereby deemed incorporated by reference. The warranty of title contained in this Deed is hereby expressly excluded from the limitations or other agreed matters referenced in this paragraph.

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

GOLDLINE INVESTMENTS, LLC,
a Texas limited liability company

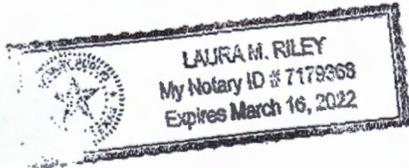
By: *Dustin O'neil*
~~Carlos Garcia~~, Authorized Signor
DUSTIN O'NEIL

STATE OF TEXAS)

COUNTY OF BEXAR)

2121 *Dustin O'neil*

This instrument was acknowledged before me on September 14, 2018, by Carlos Garcia, Authorized Signor for GOLDLINE INVESTMENTS, LLC, a Texas limited liability company, on behalf of said company.



Laura M. Riley
Notary Public, State of Texas

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JUL 08 2019
COUNTY ENGINEER

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
09/25/2018 04:20:32 PM
CSCHUL 2 Pages(s)
201806037749



Bobbie Koepf

Baker Septic Service, LLC
 15375 Cranes Mill Rd., Canyon Lake, TX 78133
 830-899-2971

Testing and Reporting Record

This Testing and Reporting Record shall be completed, signed, and dated at time of inspection.

Inspection Due Date: 1/4/20 Installed: 7/29/19 Service expires: 7/29/21

Billing Address: SAME

Physical Address: Gubanks
1465 Hillcrest Frst.
CANYON LAKE, TX
78133

Telephone: 512-557-1831
 Alt. Phone:

Lot: 26

Permit # 109369
 County: Comal
 SN:

Subdivision: CANYON LAKE FOREST
 NOTES:

TYPE OF SYSTEM: AEROBIC DRIP SYSTEM

Inspected Item: Operational Inoperative

Inspected Item	Operational	Inoperative
Aerators SCFM/ Compressors PSI (Record Pressure Reading)	✓	2.8
Filters	✓	
Irrigation Pumps	✓	
Disinfection Device	✓	
Chlorine Supply	✓	
Electrical Circuits	✓	
Distribution System	✓	
Sprayfield Vegetation	✓	
Back Flush Drip Field, if applicable	✓	
Other as Noted		

Action taken, Repairs or Needed repairs to system (list all components replaced):
CHECKED FLOATS, BACK FLUSHED SYSTEM, CLEANED DISC AND COMPRESSOR FILTERS, CHECKED PSI ON COMPRESSOR, CHECKED FLEC.
SYSTEM OPERATIONAL

Access Lids are Secured Yes No

TESTS REQUIRED AND RESULTS:

	Required		Results Mg/Impn/100mi or Trace	Test Method
	YES	NO		
BOD (Grab)				
TSS (Grab)		✓	1%	
C1 (Grab)		✓	DRIP	
Fecal Coliform				

Copies of this report have been forwarded to the following: CUSTOMER & COUNTY

Maintenance Technician: DAN NICHOLS M70001435

Date of Completion: 1-6-20 Start Job Time: 2:00 Stop Job Time: 2:40

Maintenance Provider: William Baker

Baker Septic Service, LLC
15375 Cranes Mill Rd., Canyon Lake, TX 78133
830-899-2971

Septic System Service Agreement

In consideration of payment for this service contract, we will abide by and agree to its terms and conditions:

Name: JOEY EDWARDS Address: 1465 HILLCREST FOREST
Subdivision/ County: CANYON LAKE FOREST City, State, Zip: CANYON LAKE TX 78133
Permit # 109369 Model # Serial #
Phone: 254-498-9072

() Initial Two Year Service Agreement () One Year Service Agreement
& Two Year Limited Warranty

RENEWAL _____ NAME TRANSFER ANALYSIS _____

Legal Description:

The Effective date of this initial maintenance contract shall be the date the License to Operate is issued.

For \$ this contract will be in effect FROM / / - / / and will provide the following:

1. An inspection/service call every (4) four months which will include: inspection, adjustments and servicing of the mechanical & electrical components as necessary to insure proper function of the system.
2. An effluent quality inspection consisting of a visual check for color, turbidity, scum, overflow and odor.
3. THE PROPERTY OWNER IS RESPONSIBLE FOR PURCHASING AND KEEPING CHLORINE IN THE CHLORINATOR (IF APPLICABLE). IF THE CHLORINE TEST REVEALS "NO CHLORINE" IN THE SYSTEM, THE PROPERTY OWNER MAY INCURE AN ADDITIONAL COST.
4. If any improper operation is observed (which cannot be corrected at that time) the property owner will be notified immediately of the conditions and the estimated cost.
5. The response time to a complaint by the property owner regarding operation of the system, shall be within 48 hours from the time of notification. One service call a year, if needed, will be provided with no cost to property owner.
6. ANY PARTS, WARRANTY OR NON-WARRANTY, FREIGHT CHARGES, LABOR OR SERVICE CALLS DUE NOT PAID FOR REMAIN THE PROPERTY OF BAKER SEPTIC SERVICE, LLC AND COULD RESULT IN REPOSSESSION OF PARTS BY BAKER SEPTIC SERVICE, LLC.
7. THE SINGING OF THIS SERVICE AGREEMENT QUTHORIZES BAKER SEPTIC SERVICE, LLC TO ENTER THE PROPEY TO EXECUTE ALL TERMS OF THIS CONTRACT.

BAKER SEPTIC SERVICE, LLC, WILL WARRANTY INSTALLAION of the septic system according to state and county regulations and the designs approved by the county. HOMEOWNER WILL BE RESPONSIBE FOR SERVICE CALL, LABOR, AND SHIPPING COSTS ON ANY "WARRANTED PARTS" EXCHANGED DURING WARRANTY. All other component will be according to manufacturer's warranties.

IMPORTANT: As Baker Septic Service, LLC cannot control what or how much effluent goes into this septic system, we cannot warranty how the system will function. Refer to manufacturers or installers instructions for suggestions on septic operation. This service agreement does not cover the cost of service call, labor or materials that are required or parts out of warranty, the failure to maintain electrical power to the system, sprinklers that are broken, leaking, stopped-up or otherwise mal-functioning; or sewage flows exceeding the hydraulic/organic design capabilities and the input of non-biodegradable materials (solvent, grease, oil, paints, etc.), or any usage contrary to the requirements as advised by authorized service representative. Laboratory test work is available at an additional coast. Chlorine, filters, or parts that are out of warranty are available at a reasonable cost.

This contract does not include the pumping of a tank or of any compartment of a tank, or settlement of soil on or around any part of the system regardless of reason:

Violations of the warranty also include: Disconnecting the alarm, restricting ventilation to the aerator, over loading the system above its rated capacity; or flooding by external means. Rodent, insect or Fire Ant damage or any other form of unusual abuse is a violation.

A renewal service contract should be activated (30) thirty days before expiration of existing contract. We will contact property owner prior to expiration of existing contract.

Serviced by: Baker Septic Service, LLC
Maintenance Provider: MP 0002099
(x) Joe Edwards Print Name (X) Joe Edwards Date: 01 Aug 2020
Property Owner Signature
(x) W. Edwards Date: 8-3-2020 Authorized Service Representative

Baker Septic Service, LLC
 15375 Cranes Mill Rd., Canyon Lake, TX 78133
 830-899-2971

Testing and Reporting Record

This Testing and Reporting Record shall be completed, signed, and dated at time of inspection.

Inspection Due Date: 8-1-20 Installed: 7-29-19 Service expires: 7-29-21

Billing Address: SAME

Physical Address:
1465 HILLCREST FOREST
CANYON LAKE TX 78133
JOEY EDWARDS

Telephone: 254-498-9072
 Alt. Phone:

Lot: 26

Permit # 109369
 County: COMAL
 SN:

Subdivision: CANYON LAKE FOREST

NOTES:

TYPE OF SYSTEM: AEROBIC DRIP SYSTEM

Inspected Item: Operational Inoperative

Inspected Item	Operational	Inoperative
Aerators SCFM/ Compressors PSI (Record Pressure Reading)	✓	2.0
Filters	✓	
Irrigation Pumps	✓	
Disinfection Device	-	
Chlorine Supply	-	
Electrical Circuits	✓	
Distribution System	✓	
Sprayfield Vegetation	✓	
Back Flush Drip Field, if applicable	✓	
Other as Noted	-	

Action taken, Repairs or Needed repairs to system (list all components replaced):
CHECKED FLOATS, BACK FLUSHED SYSTEM, CLEANED DISC & COMPRESSOR FILTERS
CHECKED PSI ON COMPRESSOR CHECKED ELKC.
SYSTEM OPERATIONAL

Access Lids are Secured (Yes) No

TESTS REQUIRED AND RESULTS:

	Required		Results Mg/Lmpn/100ml or Trace	Test Method
	YES	NO		
BOD (Grab)				
TSS (Grab)	✓		1% DRIP	SLUDGE JUDGE
Cl (Grab)		✓		
Focal Coliform				

Copies of this report have been forwarded to the following: CUSTOMER & COUNTY

Maintenance Technician: DAN NICHOLS MT 0001435

Date of Completion: 8-1-20 Start Job Time: 8:50 Stop Job Time: 9:00

Maintenance Provider: William Baker MPO 2002009

Baker Septic Service, LLC
 15375 Cranes Mill Rd., Canyon Lake, TX 78133
 830-899-2971

Testing and Reporting Record

This Testing and Reporting Record shall be completed, signed, and dated at time of inspection.

Inspection Due Date: 12-16-20 Installed: 7-29-19 Service expires: 7-29-21

Billing Address: SAME

Physical Address:
1465 HILLCREST FOREST
CANYON LAKE TX 78133
JOEY EDWARDS

Telephone: 254-498-9072
 Alt. Phone:

Lot: 26

Permit # 109369
 County: COMAL
 SN:

Subdivision: CANYON LAKE FOREST

NOTES:

TYPE OF SYSTEM: PRO FLO DRIP SYSTEM

Inspected Item:

Operational Inoperative

Aerators SCFM/ Compressors PSI (Record Pressure Reading)	✓	2.0
Filters	✓	
Irrigation Pumps	✓	
Disinfection Device	-	
Chlorine Supply	-	
Electrical Circuits	✓	
Distribution System	✓	
Sprayfield Vegetation	✓	
Back Flush Drip Field, if applicable	✓	
Other as Noted	-	
Access Lids are Secured	<u>Yes</u>	No

Action taken, Repairs or Needed repairs to system (list all components replaced):
CHECKED FLOATS, BACK FLUSHED SYSTEM, CLEANED DISC & COMPRESSOR FILTERS
CHECKED PSI ON COMPRESSOR
CHECKED ELEC.

SYSTEM OPERATIONAL

TESTS REQUIRED AND RESULTS:

	Required		Results Mg/lmpn/100mi or Trace	Test Method
	YES	NO		
BOD (Grab)				
TSS (Grab)	✓		1%	SLODGE JUDGE
Cl (Grab)		✓	DRIP	
Fecal Coliform				

Copies of this report have been forwarded to the following: CUSTOMER & COUNTY

Maintenance Technician: DAN NICHOLS M7 0001435
 Date of Completion: 12-16-20 Start Job Time: 2:20 Stop Job Time: 2:50

Maintenance Provider: William Baker M70002099

Baker Septic Service, LLC
 15375 Cranes Mill Rd., Canyon Lake, TX 78133
 830-899-2971

Testing and Reporting Record

This Testing and Reporting Record shall be completed, signed, and dated at time of inspection.

Inspection Due Date: 7.19.21 Installed: 7.29.19 Service expires: 7.29.21

Billing Address: SAME

Physical Address:

1465 HILLCREST FOREST
CANYON LAKE, TX 78133
JOEY EDWARDS

Telephone: 254.498.9072
 Alt. Phone:

lot: 26

Permit # 109369
 County: COMAL
 SN:

Subdivision: CANYON LAKE FOREST

NOTES:

TYPE OF SYSTEM: PRO FLO DRIP SYSTEM

Inspected Item:

Operational

Inoperative

Aerators SCFM/ Compressors PSI (Record Pressure Reading)	<input checked="" type="checkbox"/>	3.2 PSI
Filters	<input checked="" type="checkbox"/>	
Irrigation Pumps	<input checked="" type="checkbox"/>	30 PSI
Disinfection Device	<input type="checkbox"/>	
Chlorine Supply	<input type="checkbox"/>	
Electrical Circuits	<input checked="" type="checkbox"/>	
Distribution System	<input checked="" type="checkbox"/>	
Sprayfield Vegetation	<input checked="" type="checkbox"/>	
Back Flush Drip Field, if applicable	<input checked="" type="checkbox"/>	
Other as Noted	<input checked="" type="checkbox"/>	

Action taken, Repairs or Needed repairs to system (list all components replaced):

CK FLOATS & ALARMS
CK PSI ON COMPRESSOR &
CLEAN FILTER
CLEAN DISC FILTER & PUMP
SCREEN
BACKFLUSH SYSTEM
CK ELEC

SYSTEM OPERATIONAL

Access Lids are Secured

Yes

No

TESTS REQUIRED AND RESULTS:

	Required		Results Mg/1mpn/100mi or Trace	Test Method
	YES	NO		
BOD (Grab)				
TSS (Grab)	<input checked="" type="checkbox"/>		<u>176</u>	<u>SLUDGE</u>
C1 (Grab)		<input checked="" type="checkbox"/>	<u>DRIP</u>	<u>JUDGE</u>
Fecal Coliform				

Copies of this report have been forwarded to the following: CUSTOMER & COUNTY

Maintenance Technician: MARTIN PASCARELLA MT 000 2064

Date of Completion: 7.19.21 Start Job Time: 9:00 AM Stop Job Time: 10:00 AM

Maintenance Provider: W. H. Baker 1120052099

Baker Septic Service, LLC
 15375 Cranes Mill Rd., Canyon Lake, TX 78133
 830-899-2971

Testing and Reporting Record

This Testing and Reporting Record shall be completed, signed, and dated at time of inspection.

Inspection Due Date: 4.9.21 Installed: 7.29.19 Service expires: 7.29.21

Billing Address: SAME

Physical Address:
1465 HILLCREST FOREST
CANYON LAKE, TX 78133
JOEY EDWARDS

Telephone: 254.498.9072
 Alt. Phone:

Lot: 26 Permit # 109369
 County: COMAL
 SN:

Subdivision: CANYON LAKE FOREST
 NOTES:

TYPE OF SYSTEM: PRO FLO DRIP SYSTEM

Inspected Item: Operational Inoperative

Aerators SCFM/ Compressors PSI (Record Pressure Reading)	✓	3.0 PSI
Filters	✓	
Irrigation Pumps	✓	30 PSI
Disinfection Device	—	
Chlorine Supply	—	
Electrical Circuits	✓	
Distribution System	✓	
Sprayfield Vegetation	✓	
Back Flush Drip Field, if applicable	✓	
Other as Noted		

Action taken, Repairs or Needed repairs to system (list all components replaced):
CK FLOATS & ALARMS
BACKFLUSHED SYSTEM
CLEANED DISC FILTER
CK PSI ON COMPRESSOR &
CLEANED FILTER
CK ELEC
SYSTEM OPERATIONAL

Access Lids are Secured Yes No

TESTS REQUIRED AND RESULTS:

	Required		Results	Test
	YES	NO	Mg/1mpn/100mi or Trace	Method
BOD (Grab)				
TSS (Grab)	✓		1%	SLUDGE JUDGE
C1 (Grab)		✓	DRIP	
Fecal Coliform				

Copies of this report have been forwarded to the following: CUSTOMER & COUNTY

Maintenance Technician: MARTIN PASCARELLA MT 0002064

Date of Completion: 4.9.21 Start Job Time: 8:30 AM Stop Job Time: 9:15 AM

Maintenance Provider: William Baker MPO 0002092