

Comal County
OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: 07/25/2019 Permit Number: 109375

Location Description: 1102 COLLEEN DR
CANYON LAKE, TX 78133
Subdivision: Canyon Lake Village West
Unit: 4
Lot: 14
Block:
Acreage:

Type of System: Aerobic
Surface Irrigation

Issued to: Rebecca Y. Counts & Leslie P. Counts

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:

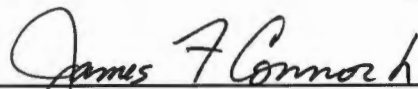
- Increase in the square feet of living area
- Increase in the number of bedrooms
- A change of use (i.e. residential to commercial)
- Relocation of system components (including the relocation of spray heads)
- Installation of landscaping
- Adding new structures to the system

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: Academics of South Texas / Tom Hampton OSSF Installer #: _____

1st Inspection Date: 7/23/19 2nd Inspection Date: _____ 3rd Inspection Date: 7-25-19

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

Permit#: 109375 Address: C. E. Village West / 1102 Colleen Dr.

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
1	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials	/	285.31(a) 285.30(b)(1)(A)(iv) 285.30(b)(1)(A)(v) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(ii) 285.30(b)(1)(A)(i)		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)(H) 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 sat, leveled
operational ✓
Ready For Cover

7-25-19 JC
COVERED

**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)		7/23/19 		
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed	 	285.33(d)(2)(G)(I) 285.33(d)(2)(A) 285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Acadmic of South Texas / Tom Hampton OSSF Installer #: _____

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

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

Permit#: 109375 Address: C.L. Village West / 1102 Colleen Dr.

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
1	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials	/	285.31(a) 285.30(b)(1)(A)(iv) 285.30(b)(1)(A)(v) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(ii) 285.30(b)(1)(A)(i)		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)				
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MT- 7/23/19

Tank sat, 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	✓		Solanair 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**

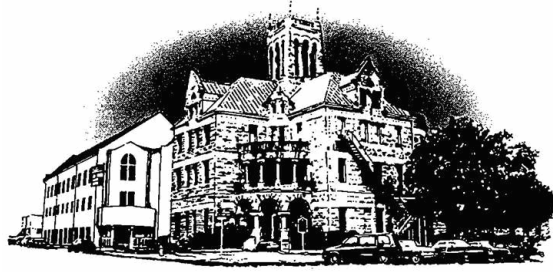
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
19	DISPOSAL SYSTEM Drip Irrigation		285.33(c)(3)(A)-(F)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 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	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart		285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3)(B) 285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)				
33	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.	✓	285.32(c)(1)		7/23/19		
34	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions	✓					
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.	✓					
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
37	PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions						
38	PUMP TANK Secondary restraint system provided						
39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

**Comal County Environmental Health
OSSF Inspection Sheet**

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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: 109375
Issued This Date: 07/12/2019
This permit is hereby given to: Rebecca Y. Counts & Leslie P. Counts

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

1102 COLLEEN DR
CANYON LAKE, TX 78133

Subdivision: Canyon Lake Village West
Unit: 4
Lot: 14
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

RECEIVED

109395
Permit Number

JUL 09 2019

Instructions:

COUNTY ENGINEER

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

OSSF Permit

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

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



 Signature of Applicant

07/9/19

 Date

___ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

___ INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)

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

Date June 17, 2019

Permit # 109375

Owner Name REBECCA Y COUNTS & LESLIE P COUNTS
Mailing Address c/o 15188 FM 306
City, State, Zip CANYON LAKE TEXAS 78133
Phone# (830) 964-2365
Email tom@aerobicservices.com

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

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

Method: [] Mail [X] Email

Subdivision Name CANYON LAKE VILLAGE WEST Unit/Phase/Section 4 Lot 14 Block

Acreage/Legal

Street Name/Address 1102 COLLEEN DRIVE City CANYON LAKE Zip 78133

Type of Development:

[X] Single Family Residential

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

JUL 09 2019

Number of Bedrooms 3

Indicate Sq Ft of Living Area 2400

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

Source of Water [X] Public [] Private Well

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

By signing this application, I certify that:

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

Signature of Owner (Handwritten signature)

Signature of Owner (Handwritten signature)

Date 7/3/19

#109375

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

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

REVISED 12:42 pm, Jul 19, 2019

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

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) SOLAR AIR SA600LP Absorption/Application Area (Sq Ft) 4569

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 [X] 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 [X] No

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

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

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

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

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

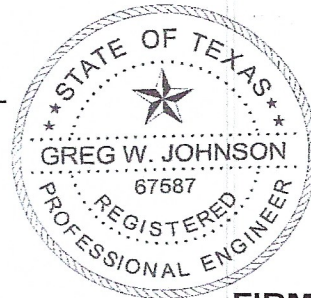
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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

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

Is this property within an incorporated city? [] Yes [X] No

If yes, indicate the city:



FIRM #2585

By signing this application, I certify that:

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

Signature of Designer (Handwritten signature)

Date June 18, 2019

AFFIDAVIT



201906023380 07/09/2019 01:41:17 PM 1/1

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.

RECEIVED

I

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

JUL 09 2019

COMAL COUNTY ENGINEER

II

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

4 UNIT/PHASE/SECTION _____ BLOCK 14 LOT CANYON LAKE VILLAGE WEST SUBDIVISION

IF NOT IN SUBDIVISION: _____ ACREAGE _____ SURVEY

The property is owned by (insert owner's full name): REBECCA Y. COUNTS & LESLIE P. COUNTS

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 3rd DAY OF July, 20 19

X *[Signature]*

Owner(s) signature(s)

+ *Rebecca Counts*

Owner (s) Printed name (s)

Rebecca Y. COUNTS & LESLIE P. COUNTS

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 3rd DAY OF

July, 20 19

[Signature]
Notary Public Signature



(Notary Seal Here)

THIS AREA FOR COMAL COUNTY CLERK RECORDING PURPOSES ONLY

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
07/09/2019 01:41:17 PM
TERRI 1 Page(s)
201906023380



Bobbie Koepf

ASST
Thompson
7-1-19

15188 FM 306
Canyon Lake, TX 78133
Phone (830)964-2365 Fax (830) 964-2659



RECEIVED

JUL 09 2019

JUL 09 2019

Routine Maintenance and Inspection Agreement

General COUNTY ENGINEER

COUNTY ENGINEER

This Work for Hire Agreement (hereinafter referred to as this "Agreement") is entered into by and between REBECCA Y. & LESLIE P. COUNTS (referred to as "Client") and Aerobic Services of South Texas (Thomas W. Hampton MP 349) (hereinafter referred to as "Contractor") located at 15188 FM 306, Texas 78133 (830) 964-2365. By this Agreement the Contractor agrees to render professional service, as described herein, and the Client agrees to fulfill the terms of this Agreement as described herein.

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

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

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

ACCESS BY CONTRACTOR

The Contractor or anyone authorized by the Contractor may enter the property at reasonable times without prior notice for the purpose of the above described Services. The contractor may access the System components including the tanks by means of excavation for the purpose of evaluations if necessary. Soil Is to be replaced with the excavated material as best as possible.

Termination of Agreement

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

Limit of Liability

In no event shall the Contractor be liable for indirect, consequential, incidental or punitive damages, whether in contract tort or any other theory. In no event shall the Contractor's liability for direct damages exceed the price for the services described in this Agreement.

Dispute Resolution

If a dispute between the Client and the Designer arises that cannot be settled in good faith negotiations then the parties shall choose a mutually acceptable arbitrator and shall share the cost of the arbitration services equally.

RECEIVED
JUL 09 2019
COUNTY ENGINEER

Entire Agreement

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

Severability

If any provision of this Agreement 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 this 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.

Legal Description: CANYON LAKE VILLAGE WEST, UNIT 4, LOT 14

Property Address: 1102 COLLEEN DRIVE

HOME OWNER

SERVICE PROVIDER

REBECCA Y. & LESLIE P. COUNTS

Name
1102 COLLEEN DRIVE

Address
CANYON LAKE, TX 78133

City, State
210-363-21094

Phone
[Signature]

Signature of Home Owner
[Signature]

Aerobic Services of South Texas Inc.

Name
15188 FM 306

Address
Canyon Lake, Texas 78133

City, State
(830) 964 - 2365

Phone
[Signature] OS0024597/MP349

Signature of Service Provider and License #
Thomas Hampton

EFFECTIVE DATE _____ EXPIRED DATE _____ INSTALLED _____

Model # _____

Blower/Panel Serial # _____

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

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

Date Soil Survey Performed: June 17, 2019

Site Location: CANYON LAKE VILLAGE WEST, UNIT 4, LOT 14

Proposed Excavation Depth: N/A

RECEIVED

JUL 09 2019

Requirements:

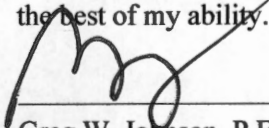
At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil boring or dug pits must be shown on the site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation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

COUNTY ENGINEER

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

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

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



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

06/17/19

 Date

OSSF SOIL EVALUATION REPORT INFORMATION

REVISED
12:42 pm, Jul 19, 2019

Date: June 18, 2019

Applicant Information:

Name: REBECCA Y. & LESLIE P. COUNTS
Address: c/o 15188 F.M. 306
City: CANYON LAKE State: TEXAS
Zip Code: 78133 Phone: (830) 964-2365

Site Evaluator Information:

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

Property Location:

Lot 14 Unit 4 Blk Subd. CANYON LAKE VILLAGE WEST
Street Address: 1102 COLLEEN DRIVE
City: CANYON LAKE Zip Code: 78133
Additional Info.:

Installer Information:

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

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

Design Calculations for Aerobic Treatment with Spray Irrigation:

Commercial

Q = GPD

Residential Water conserving fixtures to be utilized? Yes X No

Number of Bedrooms the septic system is sized for: 3 Total sq. ft. living area 2400

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

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

Trash Tank Size 376 Gal.

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

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

Application Area Utilized = 4569 sq. ft.

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

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

Pump Tank Size = 778 Gal. 18.75 Gal/inch.

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

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

With Chlorinator NSF/TCEQ APPROVED

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

Two way cleanout

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

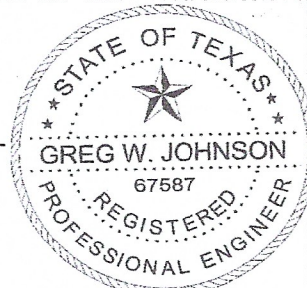
1" Sch-40 PVC discharge manifold

APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

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

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

06/18/19
DATE

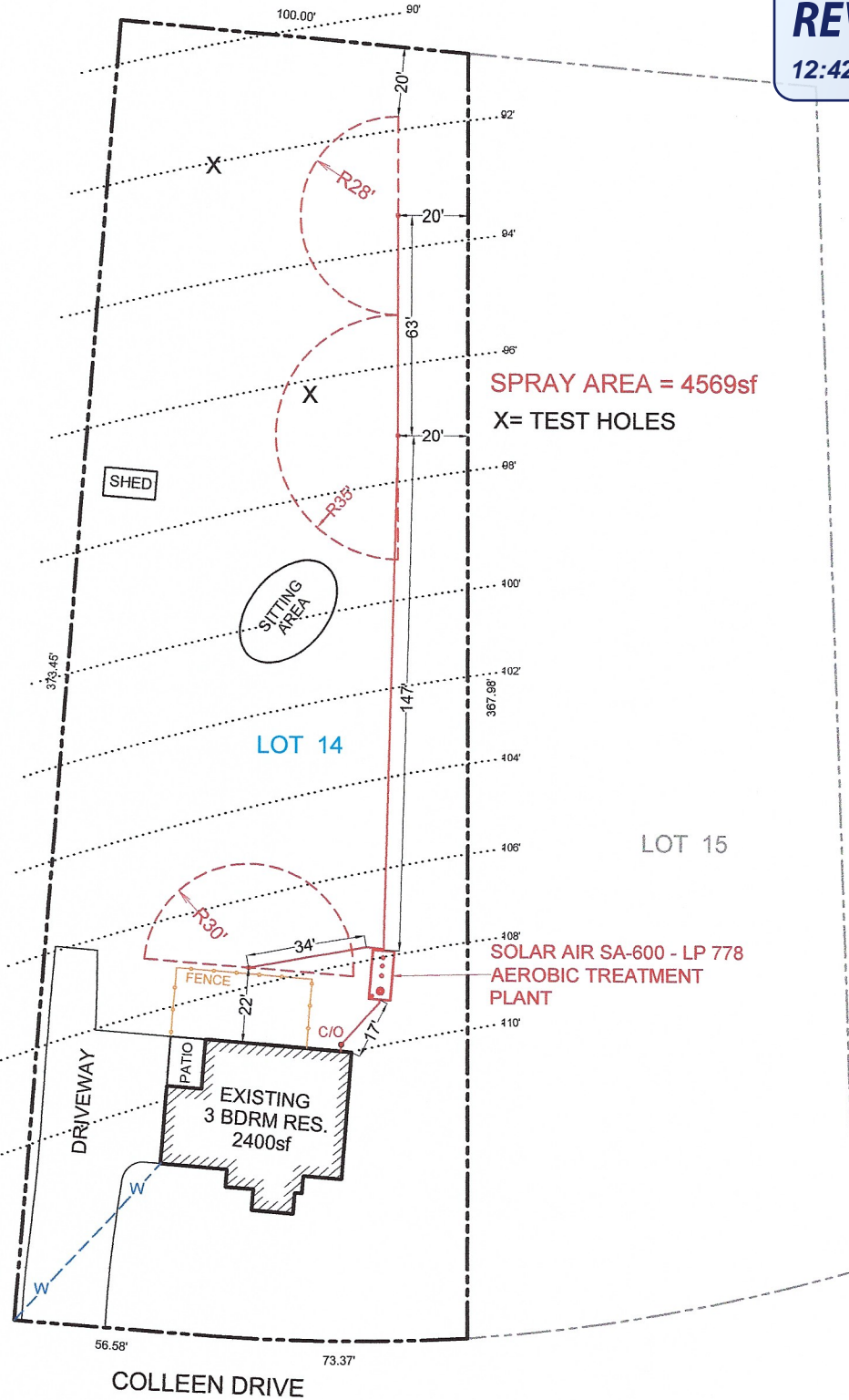


FIRM #2585

#109375

REVISED
12:42 pm, Jul 19, 2019

NOTE:
EXISTING SEPTIC
TANK TO BE
PUMPED, CRUSHED
AND BACK FILLED.
EXISTING SEPTIC
SYSTEM TO BE
ABANDONED



OWNER: REBECCA Y. & LESLIE P. COUNTS		DRAWN BY: EJS III	
STREET ADDRESS: 1102 COLLEEN DRIVE			
LEGAL DESC: CANYON LAKE VILLAGE WEST	UNIT/SECTION/PHASE: 4	BLOCK:	LOT: 14
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=50'	DATE: 6/18/2019	REVISED: 7/18/2019

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JUL 09 2019

COUNTY ENGINEER

TANK NOTES:

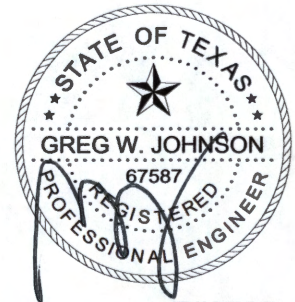
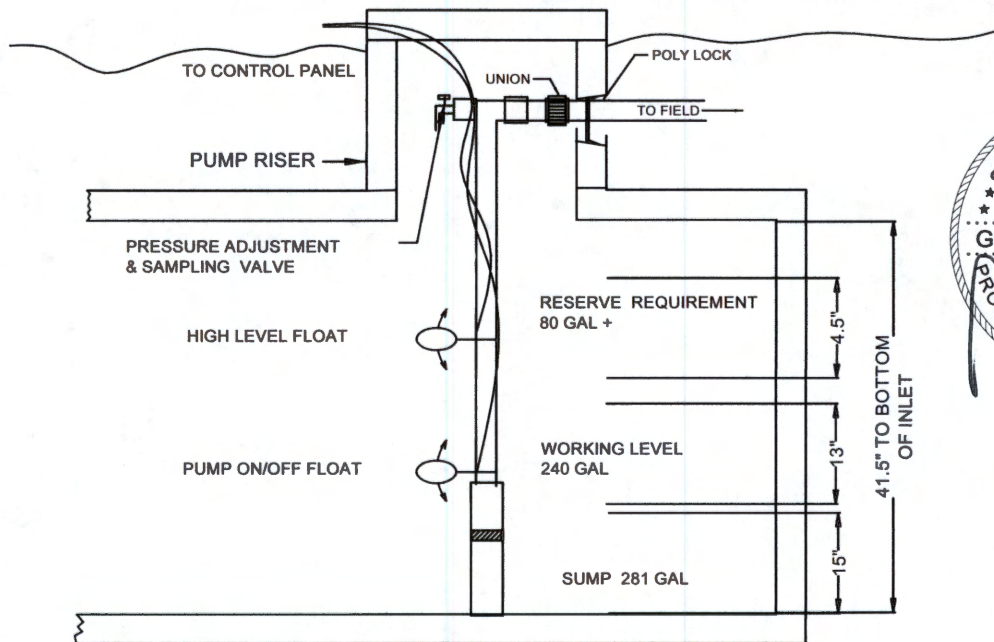
Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

Tightlines to the tank shall be SCH-40 PVC.

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

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

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



F#2585

06/10/19

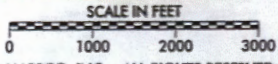
TYPICAL PUMP TANK CONFIGURATION
SOLAR-AIR SA-600 LP 778 GAL PUMP TANK



RECEIVED
JUL 09 2019
COUNTY ENGINEER
Jacobs Creek Park

78133

78132



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

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

VOID

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

System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) SOLAR AIR SA600LP Absorption/Application Area (Sq Ft) 4926

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Gallons Per Day (As Per TCEQ Table III) 240

JUL 09 2019

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

COUNTY ENGINEER

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 complies with all provisions of the proposed WPAP. A Permit to Construct will not be issued for the proposed OSSF until the proposed WPAP is approved by the appropriate regional office.)

VOID

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

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

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

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

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

Is this property within an incorporated city? Yes No

If yes, indicate the city: _____



FIRM #2585

By signing this application, I certify that:

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

Signature of Designer (Handwritten Signature)

Date June 18, 2019

OSSF SOIL EVALUATION REPORT INFORMATION

VOID

Date: June 18, 2019

Applicant Information:

Name: REBECCA Y. & LESLIE P. COUNTS
Address: c/o 15188 F.M. 306
City: CANYON LAKE State: TEXAS
Zip Code: 78133 Phone: (830) 964-2365

Site Evaluator Information:

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

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Lot 14 Unit 4 Blk Subd. CANYON LAKE VILLAGE WEST
Street Address: 1102 COLLEEN DRIVE
City: CANYON LAKE Zip Code: 78133
Additional Info.:

Installer Information:

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Company:
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City: State:
Zip Code: Phone

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

RECEIVED

JUL 09 2019

Design Calculations for Aerobic Treatment with Spray Irrigation:

Commercial

Q = GPD COUNTY ENGINEER

Residential Water conserving fixtures to be utilized? Yes X No

Number of Bedrooms the septic system is sized for: 3 Total sq. ft. living area 2400

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

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With Chlorinator NSF/TCEQ APPROVED

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

Two way cleanout

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

1" Sch-40 PVC discharge manifold

APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

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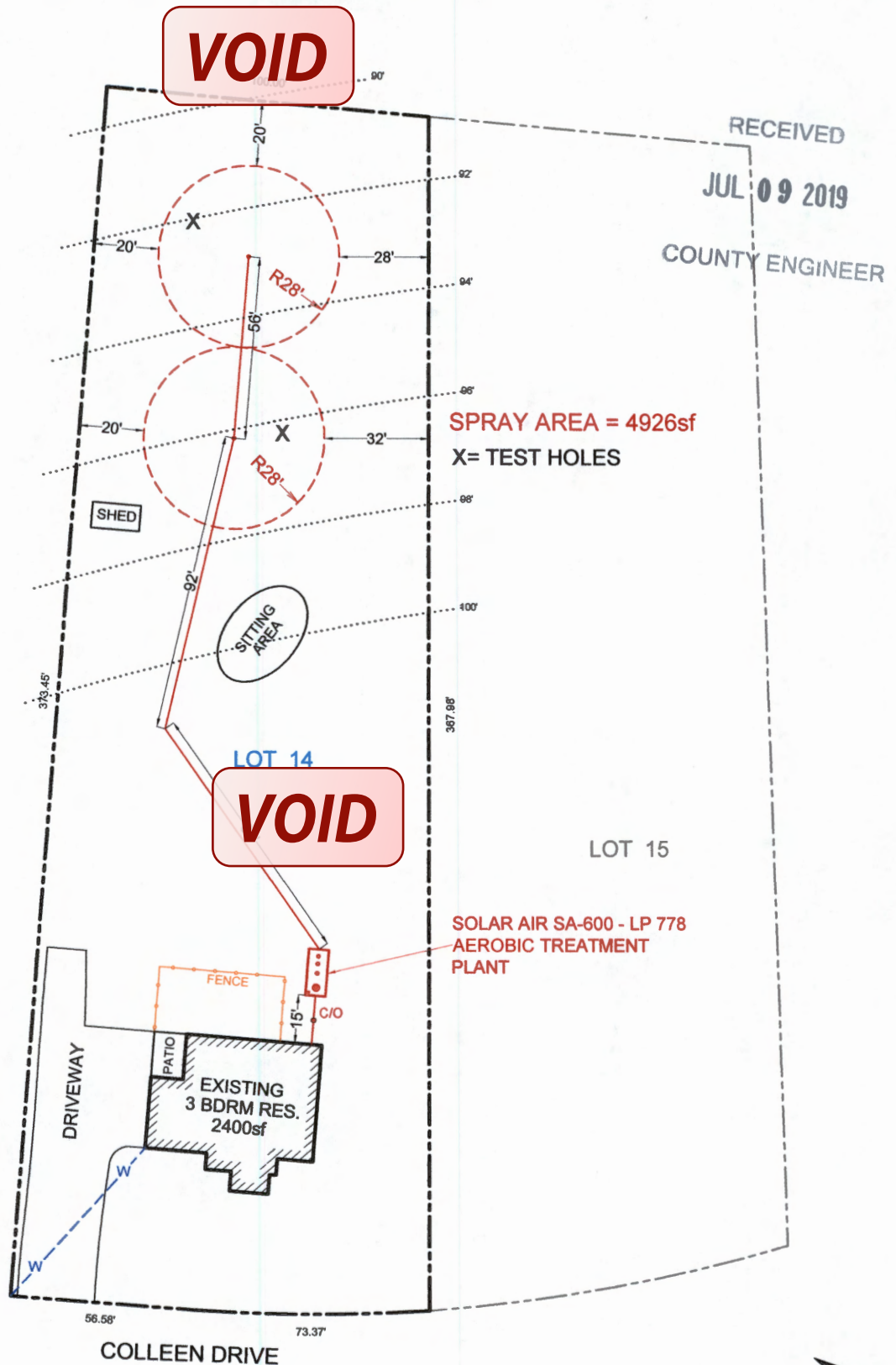
Signature of Greg W. Johnson
GREG W. JOHNSON, P.E. F#002585 - S.E. 11561

06/18/19
DATE



FIRM #2585

NOTE:
 EXISTING SEPTIC
 TANK TO BE
 PUMPED, CRUSHED
 AND BACK FILLED.
 EXISTING SEPTIC
 SYSTEM TO BE
 ABANDONED



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 JUL 09 2019
 COUNTY ENGINEER



OWNER: REBECCA Y. & LESLIE P. COUNTS		DRAWN BY: EJS III	
STREET ADDRESS: 1102 COLLEEN DRIVE			
LEGAL DESC: CANYON LAKE VILLAGE WEST	UNIT/SECTION/PHASE: 4	BLOCK:	LOT: 14
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=50'	DATE: 6/18/2019	REVISED:



4/TC

Independence Title Company
GF# 1709923-NBP

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JUL 09 2019

COUNTY ENGINEER

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 RESERVING VENDOR'S LIEN IN FAVOR OF THIRD PARTY

THE STATE OF TEXAS

§

KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF COMAL

§

THAT **TOMMY LYNN JONES** and wife, **ANNA MARIE JONES**, hereinafter called Grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) cash and other good and valuable consideration in hand paid by **REBECCA Y. COUNTS** and **LESLIE P. COUNTS**, hereinafter called Grantee, the receipt and sufficiency of which is hereby acknowledged and confessed, and the further consideration of the execution and delivery by Grantee of one certain Promissory Note of even date herewith in the principal sum of **TWO HUNDRED TWENTY-TWO THOUSAND, TWO HUNDRED TWENTY-TWO AND NO/100 (\$222,222.00) DOLLARS**, payable to the order of **GATEWAY MORTGAGE GROUP, L.L.C.**, hereinafter called Mortgagee, said Note being payable as therein provided, bearing interest at the rate therein specified, providing for attorney's fees and acceleration of maturity at the rate and in the events therein set forth, and payment of said Note being secured by a vendor's lien and superior title retained

herein in favor of said Mortgagee and by Deed of Trust of even date herewith from Grantee to **M. KEITH STITT, Trustee**, to which reference is hereby made for all purposes; and,

WHEREAS, Mortgagee has, at the special instance and request of said Grantee herein, paid to Grantor herein **\$222,222.00** of the purchase money for the property hereinafter described as represented by the above described Note, said Note, together with the vendor's lien and Deed of Trust Lien against said property securing the payment of said Note is, without recourse upon the Grantor herein, hereby assigned, transferred and delivered to Mortgagee, the Grantor hereby conveying to the said Mortgagee the said superior title to said property, and subrogating the said Mortgagee unto all the rights and remedies of Grantor in the premises by virtue of said Note and liens; the indebtedness evidenced by said Note being due and payable as therein provided, both principal and interest being due and payable at the office of **GATEWAY MORTGAGE GROUP, LLC;**

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

Lot 14, CANYON LAKE VILLAGE WEST, UNIT 4 SUBDIVISION, according to the map or plat thereof, recorded in **Volume 5, page 30,** Map and Plat Records, Comal County, Texas.

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


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


It is expressly agreed and stipulated that a vendor's lien is retained in favor of the payee in said Note against the above described property, premises and improvements, until said Note, and all interest thereon, is fully paid according to the face and tenor, effect and reading thereof, when this deed shall become absolute.

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

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

DATED this 21st day of April, 2017.



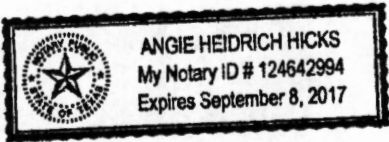
TOMMY LYNN JONES


ANNA MARIE JONES

STATE OF TEXAS
COUNTY OF COMAL

§
§

This instrument was acknowledged before me on this the 21st day of **April**, 2017, by **TOMMY LYNN JONES and wife, ANNA MARIE JONES.**



Angie Heidrich Hicks

Notary Public, State of Texas

GRANTEE'S MAILING ADDRESS:

1102 Collier Dr.
Canyon Lake, TX
78133

48.DEEDS
Independence Title Co. (AH)
GF #1709923-NBF

4

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
04/25/2017 02:19:43 PM
CHRISTY 4 Page(s)
201706022179



Bobbie Koepf

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

MAILED



morning to host

ENTERED

(830) 964-2365
Fax: (830) 964-2659
www.aerobicservices.com
Permit #: **746-2019**

To: **Les & Becky Counts**
1102 Colleen Drive
Canyon Lake, TX 78133

Tech: Not Assigned
Brand/Mfg.: Solar Aerobic 600 LP -
System S/N:
Aerator and S/N:

109375

Site: 1102 Colleen Drive, Canyon Lake
Agency: Comal County Environmental Health
County: Comal
Subdivision: Village West

Contract: 7/25/2019 - 7/25/2021
Inspections per year: 3
Service Due: 7/25/2019
Alt Phone:
Warranty Ending: 7/22/2021

Installed: 7/22/2019
Phone: (936) 554-0689
Cell: (210) 363-2694
Work:

Inspection Type: *1st Insp*

Item	Operational	Inoperative	N/A
Aerator:	<u><i>/</i></u>	<u> </u>	<u> </u>
Irrigation pump:	<u> </u>	<u> </u>	<u> </u>
Air compressor:	<u> </u>	<u> </u>	<u> </u>
Disinfection device:	<u> </u>	<u> </u>	<u> </u>
Chlorine supply:	<u> </u>	<u> </u>	<u> </u>
Spray field vegetation:	<u> </u>	<u> </u>	<u> </u>
Sprinkler / Drip backwash:	<u> </u>	<u> </u>	<u> </u>
Controls/ Electric Circuits	<u> </u>	<u> </u>	<u> </u>

Air Pressure *55*

Test Results and observations: (As Required)
Chlorine Residual: *0.00*
Test Method: *DP*
BOD: _____
TSS: _____
Access Ports Secured *YES* / NO
Repairs made: *YES* / NO

Mixed Liquor Aeration *0*
Sludge Levels
Clarifier *8*
Pump *8*

Repairs and Comments:

Inspector: *Tom Hampton*
Tom Hampton VP
MP349/OS24597

Date: *7-26-19*

take manuals on 1st insp.

Area: / 0
GPS:

ID = 61115198

Printed: 7/25/2019

1102 Colleen Drive, Canyon Lake

DO Walk Thru

Call day before

RECEIVED

AUG 05 2019

COUNTY ENGINEER

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



MAILED

ENTERED

To: Les & Becky Counts
1102 Colleen Drive
Canyon Lake, TX 78133

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

Printed: 8/7/2019
Site: 1102 Colleen Drive
Canyon Lake, TX 78133
(936) 554-0689

Permit #: ~~046-2019~~ 109375 Customer ID: 61115198
Agency: Comal County Environmental Health Comal County Environmental Health Comal C Contract Dates: 7/25/2019 - 7/25/2021
County: Comal Sub: Village West Scheduled Date: 11/25/2019
Mfg / Brand: - Solar Aerobic 600 LP Installed: 7/22/2019
Treatment Type: Aerobic Warranty End: 7/22/2021
Disposal: Surface Application

Service Type: Repair

Entered By: Lisa Bybee

Visit Date: 8/6/2019

Method: Grab

Technician: Ricky Nieto

Maint. Provider: Hampton, Thomas

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

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.
No breakes in PVC, fully functional

Service Completed

Insp ID #: 116641

Provider: *Thomas Hampton*

License #: MP0000349

Expires: 9/30/2020

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AUG 12 2019

COUNTY ENGINEER

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



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

Printed: 9/24/2019



Permit #: ~~746-2019~~

109375

To: Les & Becky Counts
 1102 Colleen Drive
 Canyon Lake, TX 78133

Tech: Not Assigned
 Brand/Mfg.: Solar Aerobic 600 LP -
 System S/N:
 Aerator and S/N:

Site: 1102 Colleen Drive, Canyon Lake
 Agency: Comal County Environmental Health
 County: Comal
 Subdivision: Village West

Installed: 7/22/2019
 Phone: (936) 554-0689
 Cell: (210) 363-2694
 Work:

Contract: 7/25/2019 - 7/25/2021
 Inspections per year: 3
 Service Due: 11/25/2019
 Alt Phone:

(2)

Inspection Type: Scheduled

Item	Operational	Inoperative	N/A
Aerator:	<u> </u>	<u> </u>	<u> </u>
Irrigation pump:	<u> </u>	<u> </u>	<u> </u>
Air compressor:	<u> </u>	<u> </u>	<u> </u>
Disinfection device:	<u> </u>	<u> </u>	<u> </u>
Chlorine supply:	<u> </u>	<u> </u>	<u> </u>
Spray field vegetation:	<u> </u>	<u> </u>	<u> </u>
Sprinkler / Drip backwash:	<u> </u>	<u> </u>	<u> </u>
Controls/ Electric Circuits	<u> </u>	<u> </u>	<u> </u>

Air Pressure 60

Test Results and observations: (As Required)
 Chlorine Residual: 1.37
 Test Method: DPO
 BOD: _____
 TSS: _____
 Access Ports Secured: YES / NO
 Repairs made: YES / NO

Mixed Liquor Aeration /
 Sludge Levels Clarifier /
 Pump /

Repairs and Comments:

RECEIVED

DEC 09 2019

Inspector: Dakota
 Tom Hampton VP
 MP349/OS24597

Date: 11-27-19

COUNTY ENGINEER

Area: / 0
 GPS: ID = 61115198

1102 Colleen Drive, Canyon Lake

ENTERED

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



Phone: (830) 964-2365
Fax: (830) 964-2659
www.aerobicservices.com
Permit #: ~~748-2019~~

Printed: 12/20/2019

To: **Les & Becky Counts**
1102 Colleen Drive
Canyon Lake, TX 78133

Tech: Not Assigned
Brand/Mfg.: Solar Aerobic 600 LP - **109375**
System S/N:
Aerator and S/N:

Site: 1102 Colleen Drive, Canyon Lake
Agency: Comal County Environmental Health
County: Comal
Subdivision: Village West

Contract: 7/25/2019 - 7/25/2021
Inspections per year: 3
Service Due: **3/25/2020**
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Work: 3

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Item	Operational	Inoperative	N/A
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Chlorine supply:	<u>/</u>	<u> </u>	<u> </u>
Spray field vegetation:	<u>/</u>	<u> </u>	<u> </u>
Sprinkler / Drip backwash:	<u>/</u>	<u> </u>	<u> </u>
Controls/ Electric Circuits	<u>/</u>	<u> </u>	<u> </u>

Air Pressure -10

Test Results and observations: (As Required)
Chlorine Residual: 0.18
Test Method: DPO
BOD:
TSS:
Access Ports Secured YES / NO
Repairs made: YES / NO

Mixed Liquor
Aeration
Sludge Levels
Clarifier
Pump 3

Repairs and Comments:
~~Opened pump tank~~
Entered, flowers pots make it difficult to access side. Did not want to risk lifting pots and losing soil.

Inspector: Kicky
Tom Hampton VP
MP349/OS24597

Date: 3/10/20

Area: / 0
GPS: ID = 61115198

1102 Colleen Drive, Canyon Lake

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

ENTERED



Phone: (830) 964-2365
Fax: (830) 964-2659
www.aerobicsservices.com

Permit #: 109375

Printed: 7/8/2020

To: **Les & Becky Counts**
1102 Colleen Drive
Canyon Lake, TX 78133

Tech: Not Assigned
Brand/Mfg.: Solar Aerobic 600 LP -
System S/N:
Aerator and S/N:

Site: 1102 Colleen Drive, Canyon Lake
Agency: Comal County Environmental Health
County: Comal
Subdivision: Village West

Installed: 7/22/2019
Phone: (936) 554-0689
Cell: (210) 363-2694
Work:
Contract: 7/25/2019 - 7/25/2021
Inspections per year: 3
Service Due: 7/25/2020
Alt Phone: 4

Inspection Type: Scheduled

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

Air Pressure 74

Test Results and observations: (As Required)
Chlorine Residual: 0.73
Test Method: DPO
BOD: _____
TSS: _____
Access Ports Secured YES / NO
Repairs made: YES / NO

Mixed Liquor
Aeration
Sludge Levels
Clarifier
Pump

Repairs and Comments:

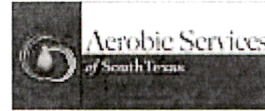
Inspector: Ricky
Tom Hampton VP
MP349/OS24597

Date: 8/4/20

Area: / 0
GPS: ID = 61115198

1102 Colleen Drive, Canyon Lake

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



ENTERED

Printed: 9/22/2020

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

Permit #: ~~02402019~~

109375

To: Les & Becky Counts
1102 Colleen Drive
Canyon Lake, TX 78133

MAILED

Tech: Not Assigned
 Brand/Mfg.: Solar Aerobic 600 LP -
 System S/N:
 Aerator and S/N:

Site: 1102 Colleen Drive, Canyon Lake
 Agency: Comal County Environmental Health
 County: Comal
 Subdivision: Village West

Installed: 7/22/2019
 Phone: (936) 554-0689
 Cell: (210) 363-2694
 Work:

Contract: 7/25/2019 - 7/25/2021
 Inspections per year: 3
 Service Due: 11/25/2020
 Alt Phone: 5

Inspection Type: Scheduled

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

Air Pressure 60

Test Results and observations: (As Required)
 Chlorine Residual: 0.2
 Test Method: D22
 BOD: _____
 TSS: _____
 Access Ports Secured YES / NO YES
 Repairs made: YES / NO NO

Mixed Liquor Aeration 0
 Sludge Levels Clarifier 12
 Pump 3

Repairs and Comments:

Inspector: Tom Hampton
 Tom Hampton VP
 MP349/OS24597

Date: 11/16/20

Area: / 0
 GPS: ID = 61115198

1102 Colleen Drive, Canyon Lake