

Comal County

OFFICE OF COMAL COUNTY ENGINEER

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: **08/26/2019** Permit Number: **109416**

Location Description: 1306 LIVE OAK DR
SPRING BRANCH, TX 78070

Subdivision: Cypress Cove

Unit: 4

Lot: 96

Block:

Acreage:

Type of System: Aerobic
Drip Irrigation

Issued to: Janysek Builders, LLC

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

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

Alterations to this permit including, but not limited to:

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

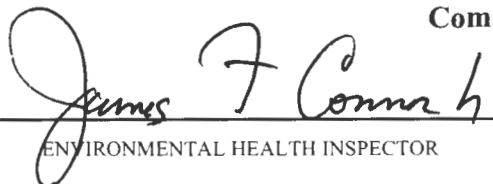
may require a new permit. **It is the responsibility of the owner to apply for a new permit, if applicable.**

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

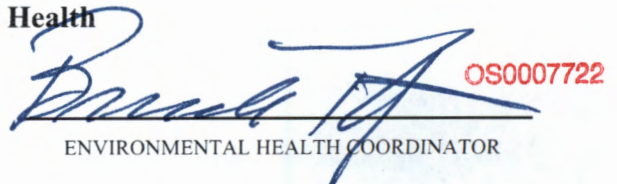
This license to operate is valid for an indefinite period. The holder may transfer it to a succeeding owner, provided the facility has not been remodeled and is functioning properly.

Licensing Authority

Comal County Environmental Health


ENVIRONMENTAL HEALTH INSPECTOR

OS0032485


ENVIRONMENTAL HEALTH COORDINATOR

OS0007722



Comal County Environmental Health OSSF Inspection Sheet

Installer Name: CountrySide OSSF Installer #: OS 00002929
 1st Inspection Date: 08-07-19 2nd Inspection Date: 8-20-19 3rd Inspection Date: 8-26-19
 Inspector Name: Conrad Inspector Name: Conrad Inspector Name: Conrad
 Permit #: 109416 Address: 1306 Live Oak Dr Cypress Cove

No.	Description	Answer	Chapters	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)(ii) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(i)		/		
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards	/	285.91(10) 285.30(b)(4) 285.31(d)		/		
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	/	285.32(a)(1)		/		
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	/	285.32(a)(3)		/		
5	SEWER PIPE Two Way Sanitary - Type Cleanout Property 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(a) 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)				

*Tank set level no leaks cover tank
8-20-19 - JC operational, installed per plan*

*Covered
JC 8-26-19*

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Amesox	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)(f) 285.32(b)(1)(D) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C)(i) 285.32(b)(1)(B) 285.32(b)(1)(A) 285.32(b)(1)(E)(iv)				
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
10	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
11	SEPTIC TANK Secondary restraint system provided SEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
12	SEPTIC TANK Tank Volume Installed						
13	PUMP TANK Volume Installed						
14	AEROBIC TREATMENT UNIT Size Installed						
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number			clearstream 600			
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Approved	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)		/		
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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No.	Description	Answer	Questions	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Inlet Sprinkler Heads & Valve Covers Color Coated 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)			✓	✓
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	✓		<i>per plan</i>		✓	
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

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Comal County Environmental Health OSSF Inspection Sheet

Installer Name: CountrySide OSSF Installer #: OS 0002929

1st Inspection Date: 08-07-19 2nd Inspection Date: 8-20-19 3rd Inspection Date: _____

Inspector Name: Connor Inspector Name: Connor Inspector Name: _____

Permit#: 109416 Address: 1306 Live Oak Dr Cypress Cove

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

*tank set level no leaks cover tank
8-20-19- JC operational, installed per plan*

**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						
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14	AEROBIC TREATMENT UNIT Size Installed						
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number			Clearstream 600			
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
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**Comal County Environmental Health
OSSF Inspection Sheet**

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20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
24	DISPOSAL SYSTEM Other (describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
25	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC						
26	DRAINFIELD Area Installed						
27	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
28	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
29	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
30	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates In Place (per manufacturers spec.)		285.33(c)(2)				
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OSSF Inspection Sheet**

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	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.	/	285.32(c)(1)		/		
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	<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>	/			/		
34							
	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
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	<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>						
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**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	✓	285.33(d)(2)(G)(iii)(ii)285.33(d)(2)(G)(iii)(iii)285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(i)			✓	
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed		285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed	✓		<i>per plan</i>		✓	
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

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Comal County Environmental Health OSSF Inspection Sheet

Installer Name: CountrySide OSSF Installer #: OS 2929

1st Inspection Date: 08-07-19 2nd Inspection Date: _____ 3rd Inspection Date: _____

Inspector Name: Connor Inspector Name: _____ Inspector Name: _____

Permit#: 109416 Address: 1306 Live Oak Dr Cypress Cove

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3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)	/	285.32(a)(1)		/		
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot	/	285.32(a)(3)		/		
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tank set level no leaks cover tank

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OSSF Inspection Sheet**

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9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
10	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
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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)				
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 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	Connections in Approved Junction Boxes / Wiring Buried						

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?		285.33(d)(2)(G)(iii)(II)285.33(d)(2)(G)(iii)(III)285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(I)				
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed		285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



Comal County

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: 109416
Issued This Date: 07/25/2019
This permit is hereby given to: Janysek Builders, LLC

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

1306 LIVE OAK DR
SPRING BRANCH, TX 78070

Subdivision: Cypress Cove
Unit: 4
Lot: 96
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.

REVISED

8:52 am, Jul 25, 2019

COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH * * *

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

Date July 10, 2019

Permit # 109416

Owner Name JANYSEK BUILDERS, LLC
Mailing Address 104 WOODLAKE DRIVE
City, State, Zip MCQUEENEY TEXAS 78123
Phone# 830-708-4987
Email norbertjanysek@att.net

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 Agent Both

Method: Mail Email

Subdivision Name CYPRESS COVE Unit/Phase/Section SEC 4 Lot 96 Block _____
Acreage/Legal _____
Street Name/Address 1306 LIVE OAK DRIVE City SPRING BRANCH Zip 78070

Type of Development:

Single Family Residential

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

Number of Bedrooms 2

Indicate Sq Ft of Living Area 1016

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: \$ 160,000 (Structure Only)

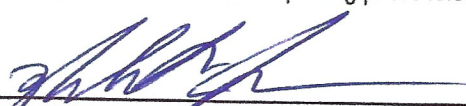
Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement?
 Yes No (if yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

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 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

7/17/19
Date

#109416

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

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

REVISED 12:06 pm, Aug 16, 2019

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

System Description PROPRIETARY; AEROBIC TREATMENT AND DRIP TUBING

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

Tank Size(s) (Gallons) CLEARSTREAM 600NC3T Absorption/Application Area (Sq Ft) 1552

Gallons Per Day (As Per TCEQ Table III) 180

(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 July 11, 2019

AFFIDAVIT



201906024554 07/17/2019 11:55:17 AM 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.

I

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

II

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

4 UNIT/PHASE/SECTION BLOCK 96 LOT CYPRESS COVE SUBDIVISION

IF NOT IN SUBDIVISION: ACREAGE SURVEY

The property is owned by (insert owner's full name): JANYSEK BUILDERS, LLC

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.

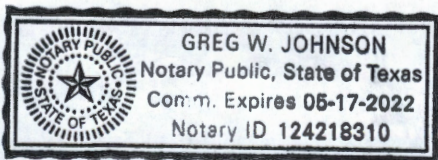
WITNESS BY HAND(S) ON THIS 17 DAY OF July, 20 19

Owner(s) signature(s)

NORBERT JANYSEK - MANAGER
Owner (s) Printed name (s)

NORBERT JANYSEK SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 17 DAY OF July, 20 19

Notary Public Signature



(Notary Seal Here)

THIS AREA IS FOR COMAL COUNTY CLERK RECORDING PURPOSES ONLY

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
07/17/2019 11:55:17 AM
TERRI 1 Page(s)
201906024554



Bobbie Koepf

Countryside Construction, Inc.
300 Chapman Parkway, Canyon Lake, TX. 78133
Phone: 830-899-2615 or 1-888-379-3721 Fax: 830-899-6662
Septic System Service Agreement

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

Name: JANYSEK BUILDERS, LLC Address: 1306 LIVE OAK DRIVE
Sub-Div./County: CYPRESS COVE / COMAL City, State-Zip: SPRING BRANCH, TEXAS 78070
Permit #: _____ Model #: NORWECO 960 600 Serial #: _____
Phone #: 830-708-4987

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

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

Legal Description: CYPRESS COVE SEC 4 LOT 96

This contract will be in effect FROM LTO TO _____ and will provide the following:

- A: 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.
- B: An effluent quality inspection consisting of a visual check for color, turbidity, scum, overflow and odor.
- C: **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 incur an additional cost.**
- D: 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.
- E: 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.
- F: **ANY PARTS, WARRANTY OR NON-WARRANTY, OR FREIGHT CHARGES, LABOR OR SERVICE CALLS DUE NOT PAID FOR REMAIN THE PROPERTY OF COUNTRYSIDE CONSTRUCTION AND COULD RESULT IN REPOSSION OF PARTS BY COUNTRYSIDE CONSTRUCTION.**
- G: **THE SIGNING OF THIS SERVICE AGREEMENT AUTHORIZES COUNTRYSIDE CONSTRUCTION TO ENTER THE PROPERTY TO EXECUTE ALL TERMS OF THIS CONTRACT.**

Countryside Construction, Inc., will warranty installation of the septic system to be according to state and county regulations and the designs approved by the county. **HOMEOWNER WILL BE RESPONSIBLE FOR SERVICE CALLS, LABOR AND SHIPPING COSTS ON ANY "WARRANTED PARTS" EXCHANGED DURING WARRANTY.** All other components will be according to manufacture's warranties.


Important: As Countryside Construction, Inc. **cannot control** what or how much effluent goes into this septic system, we **cannot warranty** how the system will function. Refer to manufacturers or installer's instructions, for suggestions on septic operation. This service agreement **does not** cover the cost of "**Service Calls, 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 (solvents, 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 cost. Chlorine, filters, or parts that are out of warranty are available at a reasonable cost.

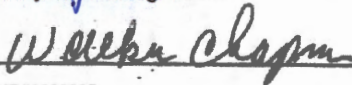
This contract **does not** include the **pumping of a tank** or of any **compartment of a tank, or settlement of soil on or around any part of the system regardless of reason:**

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: *Countryside Construction Inc.*
Walker Chapman - Operator Licensee #2929

 Print Name Norbert Janysek Date: 7/17/19
Property Owner Signature

 Date: 7/17/19 Authorized Service Representative (revised 10/9/09)

RECEIVED
JUL 17 2019
COUNTY ENGINEER

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

Date Soil Survey Performed: July 10, 2019

Site Location: CYPRESS COVE, SECTION 4, LOT 96

Proposed Excavation Depth: N/A

Requirements:

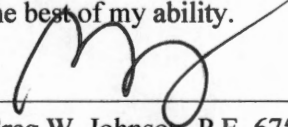
At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil boring or dug pits must be shown on the site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation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

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 @ 6"	BROWN
1						
2						
3						
4						
5						

RECEIVED
JUL 17 2019
COUNTY ENGINEER

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

07/10/19

Date

OSSF SOIL EVALUATION REPORT INFORMATION

Date: July 11, 2019

Applicant Information:

Name: JANYSEK BUILDERS, LLC.
Address: 104 WOODLAKE DRIVE
City: McQUEENEY State: TEXAS
Zip Code: 78123 Phone: (830) 708-4987

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:

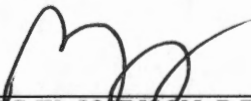
Lot 96 Unit 4 Blk Subd. CYPRESS COVE
Street Address: 1306 LIVE OAK DRIVE
City: SPRING BRANCH Zip Code: 78070
Additional Info.:

Installer Information:

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

Topography: Slope within proposed disposal area: 3 %
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

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



GREG W. JOHNSON, P.E. 67587 - S.E. 11561

07/11/19

DATE



FIRM #2585

REVISED

12:06 pm, Aug 16, 2019

DRIP TUBING SYSTEM
DESIGNED FOR:
JANYSEK BUILDERS, LLC
104 WOODLAKE DRIVE
MCQUEENY, TX 78123

SITE DESCRIPTION:

Located in the Cypress Cove, Section 4, Lot 96, at 1306 Live Oak Drive, the proposed system will serve a two bedroom residence (1016 sf.) situated in an area with shallow Type-III soil as described in the Soil Evaluation Report. An aerobic treatment plant utilizing drip irrigation was chosen as the most appropriate system to serve the conditions on this lot.

PROPOSED SYSTEM:

A 3-inch SCH-40 pipe discharges from the residence into a Clearstream 600 NC3T 600gpd aerobic plant containing a 400-gallon pretreatment tank, an aerobic treatment plant, and a 700-gallon pump chamber containing a submersible well pump. The well pump is activated by a time controller allowing the distribution ten times per day with an 8 minute run time with float setting at 180 gallons. A high level audible and visual alarm will activate should the pump fail. Distribution is through a self flushing 100 micron disc filter (Arkal) then through a 1" SCH-40 manifold to a 1552 sf. drip tubing field, with *Netifim Bioline* drip lines set approximately two feet apart with **0.61 gph** emitters set every two feet, as per the attached schematic. A pressure regulator PMR-MF 30psi installed in the pump tank on the manifold to the field will maintain pressure at 30 psi. A 1" SCH-40 return line is installed to continuously flush the system by cycling a 1" ball valve. Solids caught in the disk filter are flushed each cycle back to the trash tank. Vacuum breakers installed at the highest point on each manifold will prevent siphoning of effluent from higher to lower parts of the field. Field area will be scarified and built up with ~6" of Type II or Type III soil, then the drip tubing will be laid and capped with ~6" of Type II or Type III soil (**NOT SAND**). The field area will be sodded with grass prior to system startup. **Tank must have at grade risers on each opening with watertight caps that must be at least 65# or have a padlock or can only be removed with tools. A secondary plug, cap, or suitable restraint must be provided below riser cap to prevent tank entry should the cap be damaged or removed, in compliance with Chapter §285.38.**

DESIGN SPECIFICATIONS:

Daily waste flow: 180 GPD Table III

Pretreatment tank size: 400 Gal

Plant Size: Clearstream 600 NC3T 600 gpd (TCEQ Approved)

Pump tank size: 700 Gal

Reserve capacity after High Level: 60 Gal (>1/3 day Req'd)

REVISED

12:06 pm, Aug 16, 2019

Application Rate: Ra = 0.2 gal/sf

Total absorption area: Q/Ra = 180 GPD/0.20 = 900 sf. (Actual 1552 sf.)

Total linear feet drip tubing: 776 *Netifim Bioline* drip tubing .61 GPH

Pump requirement: ~~378~~ emitters @ .61 gph @ 30 psi = 3.945 gpm

Pump Requirement (cont.): 0.5 HP Clearstream P-20 or equivalent submersible well pump

Pump Tank Calculations: 700 Gal (12.28 gal/in.)

Volume below working level = 12" = 1481 gal

Working level = 180 gal = 150"

Reserve Requirement = >1/3 day = 60 gal. = 5"

MINIMUM SCOUR VELOCITY (MSV) > 2 FPS

IN DRIP TUBING W/ NOM. DIA. 0.55" ID

MSV = 2 FPS $(\pi d^2)/4 * 7.48 \text{ gal/cf} * 60 \text{ sec/min}$

MSV = $2(3.14159((.55/12)^2)/4) * 7.48 * 60$

MSV = 1.5 gpm MIN FLOW RATE x 2 = 3 gpm

IN RETURN MANIFOLD W/ NOM. DIA 1.049" ID

MSV = 2 FPS $(\pi d^2)/4 * 7.48 \text{ gal/cf} * 60 \text{ sec/min}$

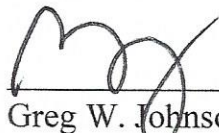
MSV = $2(3.14159((1.049/12)^2)/4) * 7.48 * 60$

MSV = 5.4 GPM

PIPE AND FITTINGS:

All pipes and fittings in this drip tubing system shall be 1" schedule 40 PVC. All joints shall be sealed with approved solvent-type PVC cement. Clipper type cutters are recommended to prevent PVC burrs during cutting of pipes causing possible plugging. Drip tubing 0.61 gph drip tubing to be used in field.

Designed in accordance with Chapter 285, Subchapter D, §285.30 and §285.40 Texas Commission on Environmental Quality (Effective December 29, 2016)

 07/11/19

Greg W. Johnson, P.E. No. 67587 - F-2585

170 Hollow Oak

New Braunfels, Texas 78132

830/905-2778



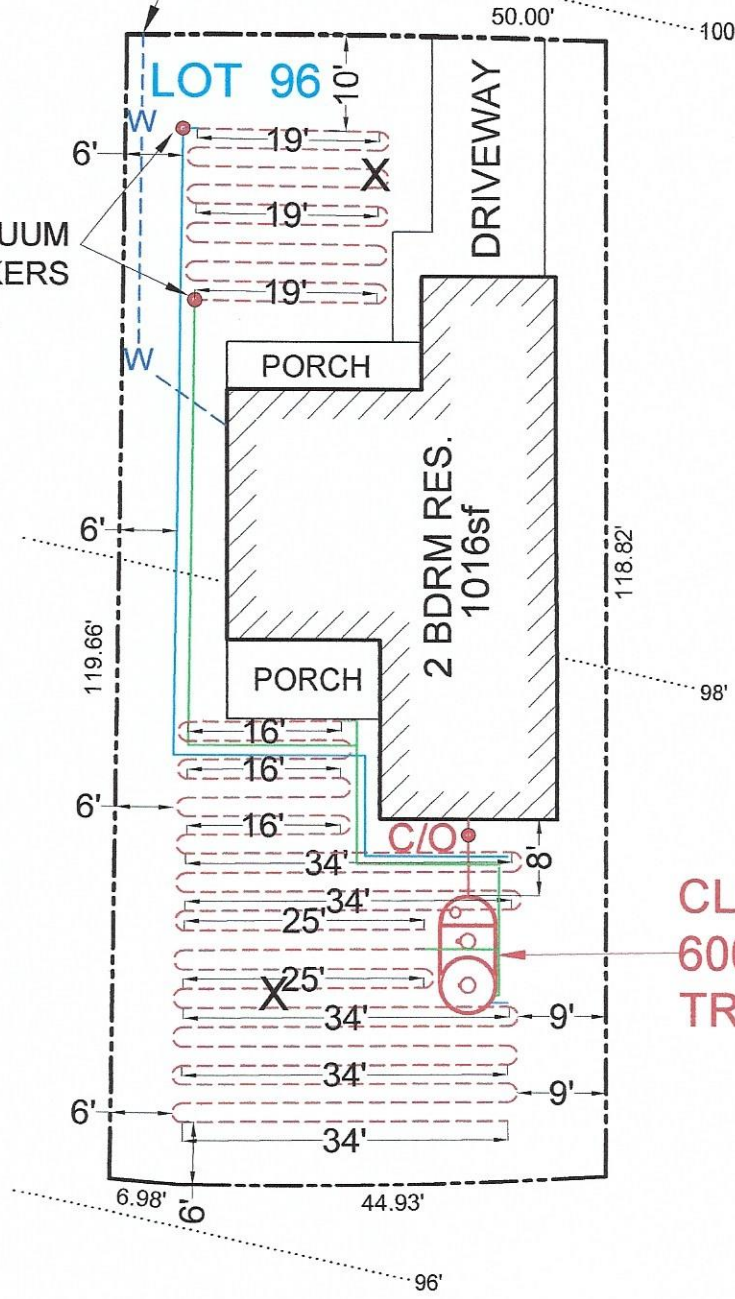
REVISED

12:07 pm, Aug 16, 2019

SLEEVE WATER LINE WITH 2"-SCH-40 PVC PIPE WHEN ENTERING CLOSER THAN 10' FROM SEPTIC SYSTEM OR SEPTIC FIELD.

LIVE OAK DRIVE

1" VACUUM BREAKERS



**CLEARSTREAM
600NC3T AEROBIC
TREATMENT PLANT**

INSTALL 1552sf OF FIELD USING 776' OF DRIP TUBING. THERE SHALL BE NO PARKING, DRIVING OR STORAGE ON THE SEPTIC FIELD AT ANY TIME FOR ANY REASON.

*USE TWO WAY CLEAN OUT
**USE SCH-40 OR SDR-26 TO TANK

X= TEST HOLE



OWNER: JANYSEK BUILDERS, LLC.		DRAWN BY: EJS III	
STREET ADDRESS: 1306 LIVE OAK DRIVE			
LEGAL DESC: CYPRESS COVE	UNIT/SECTION/PHASE: 4	BLOCK:	LOT: 96
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=20'	DATE: 7/11/2019	REVISED: 8/16/2019

TANK NOTES:

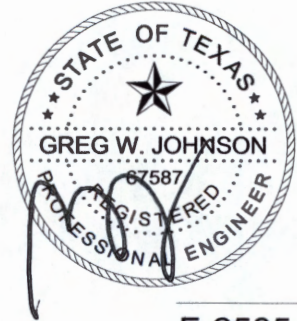
Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

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

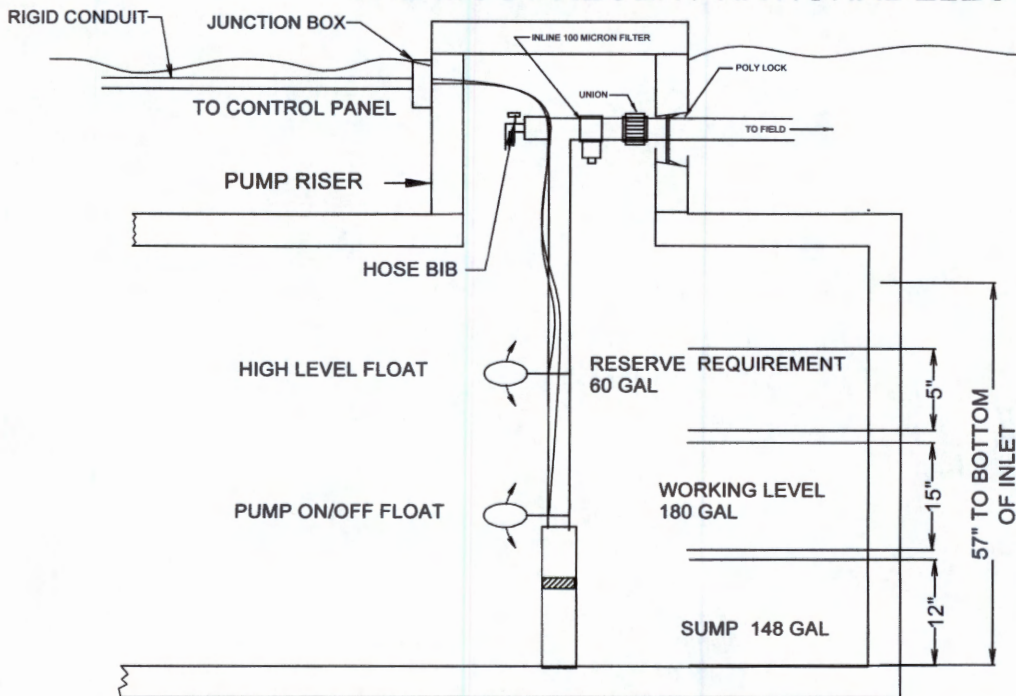
Tanks must be left uncovered and full of water for inspection by the permitting authority.



F-2585

07/11/19

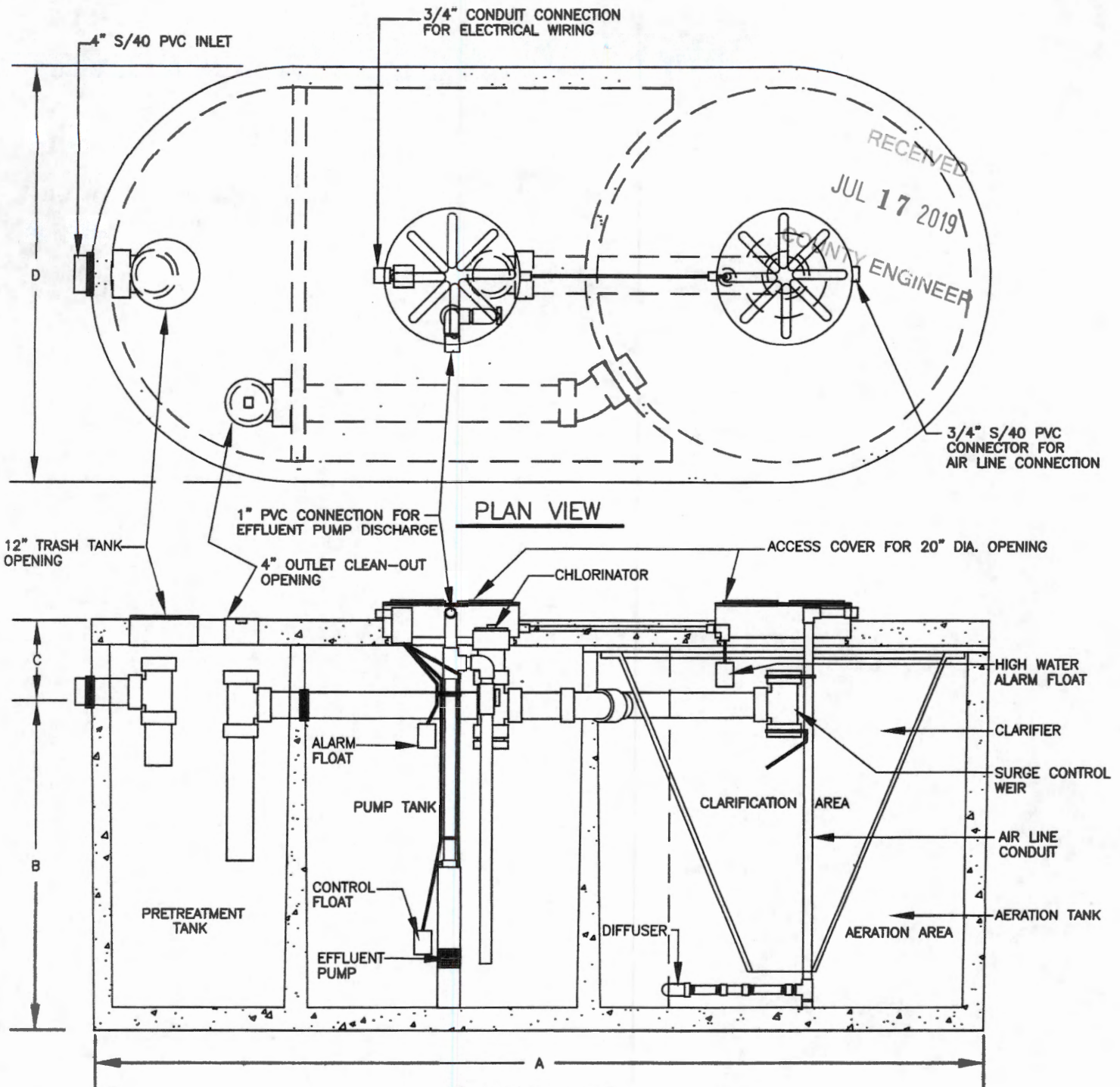
ALL WIRING MUST BE IN COMPLIANCE WITH THE MOST RECENT NATIONAL ELECTRIC CODE



RECEIVED
JUL 17 2019
COUNTY ENGINEER

**TYPICAL PUMP TANK CONFIGURATION
CLEARSTREAM 600NC3T W/ 700 GAL PUMP TANK**

DESIGN DRAWINGS



MODEL NC3
SECTION

DIMENSIONAL DATA

MODEL	A	B	C	D
500NC3-500	12'-2"	60"	10"	75"
500NC3-750	13'-5"	60"	10"	75"
600NC3	12'-7"	60"	10"	82"



F-2585

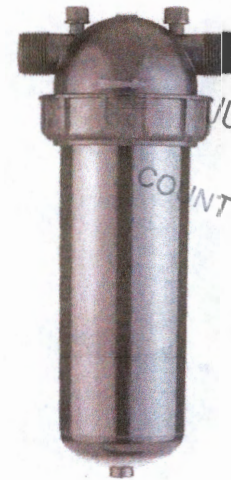
12/19/18

Arkal 1" Super Filter

Catalog No. 1102 0 _ _ _

Features

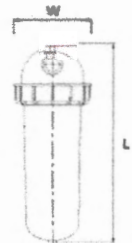
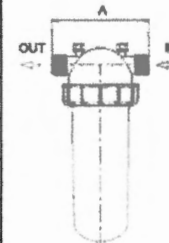
- ♦ A "T" shaped filter with two 1" male threads.
- ♦ A "T" volume filter for in-line installation on 1" pipelines.
- ♦ The filter prevents clogging due to its enlarged filtering area that collects sediments and particles.
- ♦ Manufactured entirely from fiber reinforced plastic.
- ♦ A cylindrical column of grooved discs constitutes the filter element.
- ♦ Spring keeps the discs compressed.
- ♦ Screw-on filter cover.
- ♦ Filter discs are available in various filtration grades.



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Technical Data

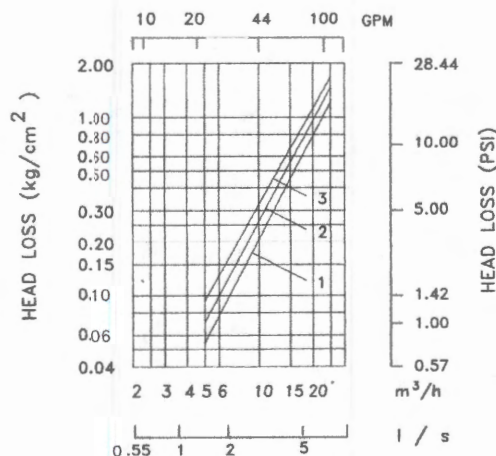
Inlet/outlet diameter	1" BSPT (male)	1" NPT (male)
	25.0 mm – nominal diameter	
	33.6 mm – pipe diameter (O. D.)	
Maximum pressure	10 atm	145 psi
Maximum flow rate	8 m ³ /h (1.7 l/sec)	35 gpm
General filtration area	500 cm ²	77.5 in ²
Filtration volume	600 cm ³	37 in ³
Filter length L	340 mm	13 13/32"
Filter width W	130 mm	5 3/32"
Distance between end connections A	158 mm	6 7/32"
Weight	1.420 kg	3.13 lbs.
Maximum temperature	70° C	158 °F
pH	5-11	5-11



Filtration Grades

- Blue (400 micron / 40 mesh)
- Yellow (200 micron / 80 mesh)
- Red (130 micron / 120 mesh)
- Black (100 micron / 140 mesh)
- Green (55 micron)

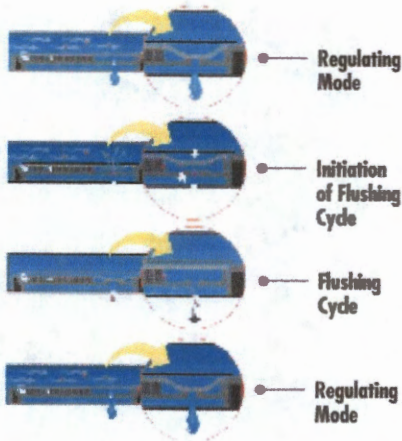
Head Loss Chart





Bioline® Dripperline

Pressure Compensating Dripperline for Wastewater



Bioline's Self-Cleaning, Pressure Compensating Dripper is a fully self-contained unit molded to the interior wall of the dripper tubing.

As shown at left, Bioline is continuously self-cleaning during operation, not just at the beginning and end of a cycle. The result is dependable, dog free operation, year after year.



Product Advantages

The Proven Performer

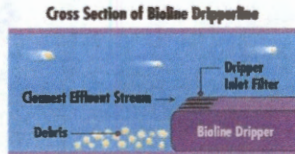
- Tens of millions of feet used in wastewater today.
- Bioline is permitted in every state allowing drip disposal.
- Backed by the largest, most quality-driven manufacturer of drip products in the U.S.
- Preferred choice of major wastewater designers and regulators.
- Proven track record of success for many years of hard use in wastewater applications.

Quality Manufacturing with Specifications Designed to Meet Your Needs

- Pressure compensating drippers assure the highest application uniformity - even on sloped or rolling terrain.
- Excellent uniformity with runs of 400 feet or more - reducing installation costs.
- Highest quality-control standards in the industry: Cv of 0.25 (coefficient of manufacturer's variation).
- A selection of flows and spacings to satisfy the designer's demand for almost any application rate.

Long-Term Reliability

- Protection against plugging:
 - Dripper inlet raised 0.27" above wall of tubing to prevent sediment from entering dripper.
 - Drippers impregnated with Vinyzene to prevent buildup of microbial slime.
 - Unique self-flushing mechanism passes small particles before they can build up.



Root Safe

- A physical barrier on each Bioline dripper helps prevent root intrusion.
- Protection never wears out - never depletes - releases nothing to the environment.
- Working reliably for up to 15 years in subsurface wastewater installations.
- Additional security of chemical root inhibition with Techfilter - supplies Trifluralin to the entire system, effectively inhibiting root growth to the dripper outlets.



Applications

- For domestic strength wastewater disposal.
- Installed following a treatment process.
- Can be successfully used on straight septic effluent with proper design, filtration and operation.
- Suitable for reuse applications using municipally treated effluent designated for irrigation water.

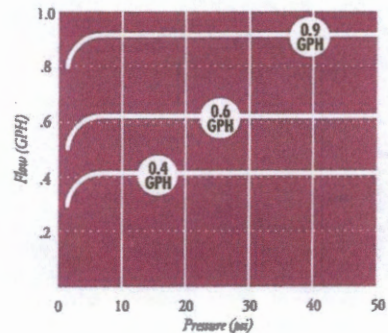
Specifications

Wall thickness (mil): 45*
 Nominal flow rates (GPH): .4, .6, .9*
 Common spacings: 12", 18", 24"*
 Recommended filtration: 120 mesh
 Inside diameter: .570*

Color: Purple tubing indicates non-potable source

*Additional flows, spacings, and pipe sizes available by request. Please contact Netafim USA Customer Service for details.

BIOLINE Flow Rate vs. Pressure



NETAFIM USA
 5470 E. Home Ave. • Fresno, CA 93727
 888.638.2346 • 559.453.6800
 FAX 800.695.4753
www.netafimusa.com

NETAFIM WASTEWATER DISPERSAL SYSTEM DESIGN GUIDE

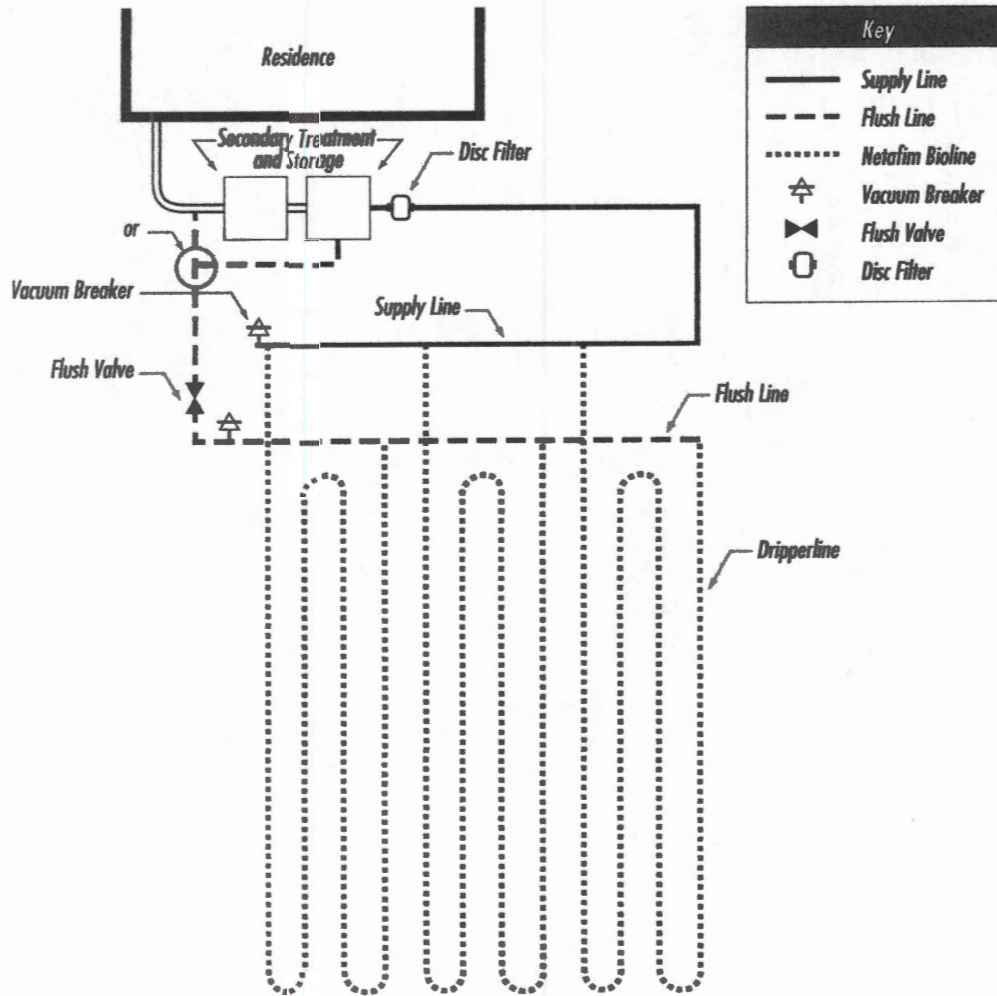
SAMPLE DESIGNS

SINGLE TRENCH LAYOUT

Rectangular field with supply and flush manifold on same side and in same trench;

- Locate supply and flush manifold in same trench
- Dripperlines are looped at the end opposite the supply and flush manifolds
- The longest Bioline length should not exceed 400 ft. Drip fields 200 ft. in length might loop the Bioline once; drip dispersal fields under 100 ft. might be looped twice, as illustrated

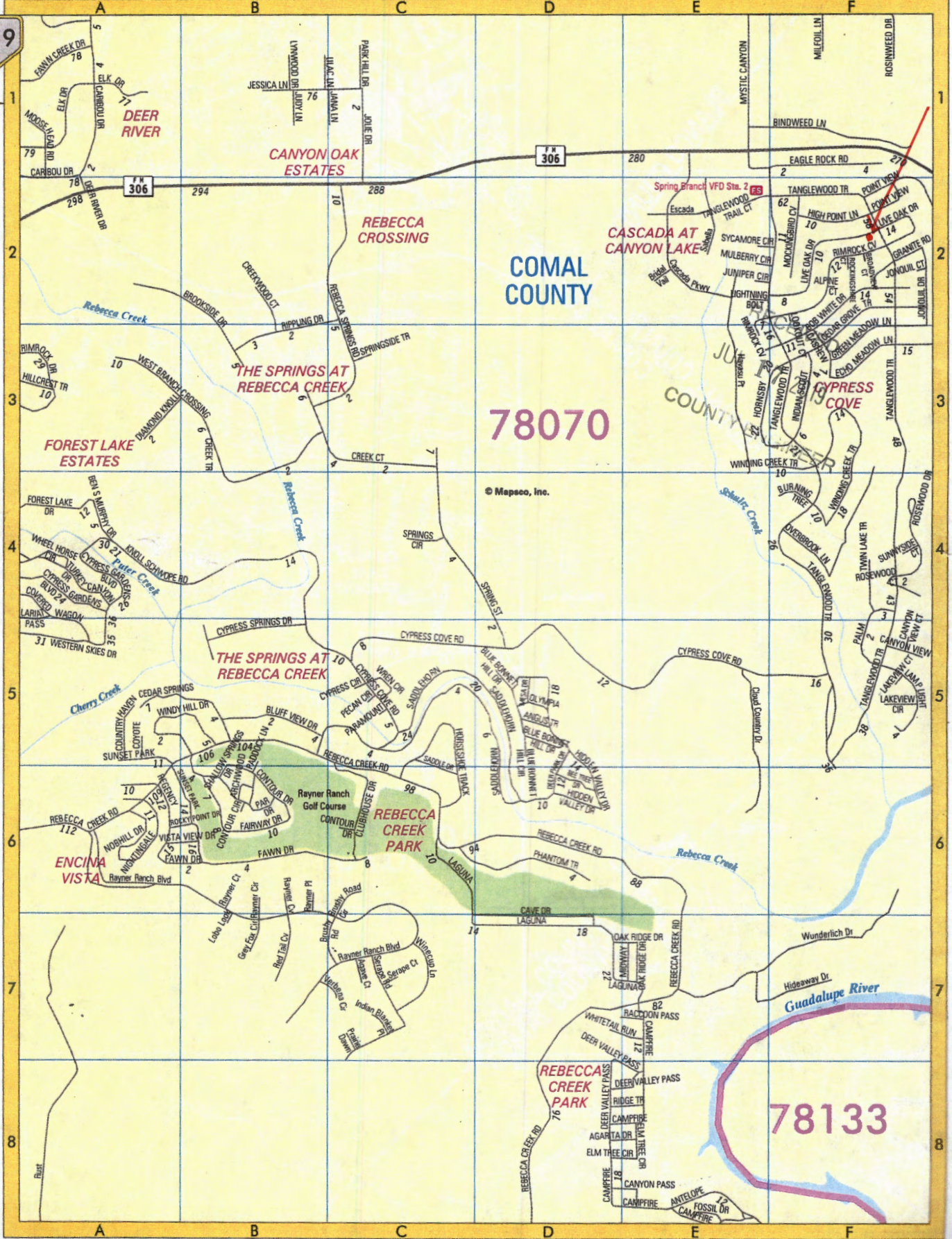
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319

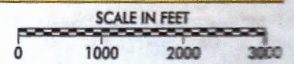
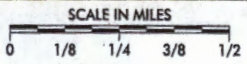


CONTINUED ON MAP 318



78070

78133



*** 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 by _____ GREG W. JOHNSON, P.E.

System Description _____ PROPRIETARY; AEROBIC TREATMENT AND DRIP TUBING

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

Tank Size(s) (Gallons) _____ CLEARSTREAM 600NC3T Absorption/Application Area (Sq Ft) _____ 1500

Gallons Per Day (As Per TCEQ Table III) _____ 180

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

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

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

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

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

VOID

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.)

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

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

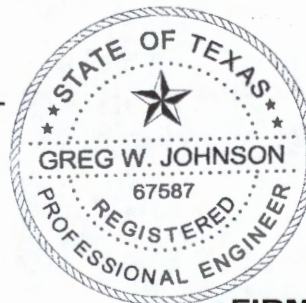
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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

VOID

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 July 11, 2019

VOID

**DRIP TUBING SYSTEM
DESIGNED FOR:
JANYSEK BUILDERS, LLC
104 WOODLAKE DRIVE
MCQUEENY, TX 78123**

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SITE DESCRIPTION:

Located in the Cypress Cove, Section 4, Lot 96, at 1306 Live Oak Drive, the proposed system will serve a two bedroom residence (1016 sf.) situated in an area with shallow Type-III soil as described in the Soil Evaluation Report. An aerobic treatment plant utilizing drip irrigation was chosen as the most appropriate system to serve the conditions on this lot.

PROPOSED SYSTEM:

A 3-inch SCH-40 pipe discharges from the residence into a Clearstream 600 NC3T 600gpd aerobic plant containing a 400-gallon pretreatment tank, an aerobic treatment plant, and a 700-gallon pump chamber containing a submersible well pump. The well pump is activated by a time controller allowing the distribution of 180 gallons per day with an 8 minute run time with float setting at 180 gallons. A high level audible and visual alarm will activate should the pump fail. Distribution is through a self flushing 100 micron disc filter (Arkal) then through a 1" SCH-40 manifold to a 1500 sf. drip tubing field, with *Netifim Bioline* drip lines set approximately two feet apart with **0.61 gph** emitters set every two feet, as per the attached schematic. A pressure regulator PMR.-MF 30psi installed in the pump tank on the manifold to the field will maintain pressure at 30 psi. A 1" SCH-40 return line is installed to continuously flush the system by cycling a 1" ball valve. Solids caught in the disk filter are flushed each cycle back to the trash tank. Vacuum breakers installed at the highest point on each manifold will prevent siphoning of effluent from higher to lower parts of the field. Field area will be scarified and built up with ~6" of Type II or Type III soil, then the drip tubing will be laid and capped with ~6" of Type II or Type III soil (**NOT SAND**). The field area will be sodded with grass prior to system startup. **Tank must have at grade risers on each opening with watertight caps that must be at least 65# or have a padlock or can only be removed with tools. A secondary plug, cap, or suitable restraint must be provided below riser cap to prevent tank entry should the cap be damaged or removed, in compliance with Chapter §285.38.**

VOID

DESIGN SPECIFICATIONS:

Daily waste flow: 180 GPD Table III
Pretreatment tank size: 400 Gal
Plant Size: Clearstream 600 NC3T 500 gpd (TCEQ Approved)
Pump tank size: 700 Gal
Reserve capacity after High Level: 60 Gal (>1/3 day Req'd)

VOID

Application Rate: Ra = 0.2 gal/sf

Total absorption area: Q/Ra = 180 GPD/0.20 = 900 sf. (Actual 1500 sf.)

Total linear feet drip tubing: 750' *Netifim Bioline* drip tubing .61 GPH

Pump requirement: 375 emitters @ .61 gph @ 30 psi = 3.8125 gpm

Pump Requirement (cont.): 0.5 HP Clearstream P-20 or equivalent submersible well pump

Pump Tank Calculations: 700 Gal (12.28 gal/in.)

Volume below working level = 12" = 1481 gal

Working level = 180 gal = 150"

Reserve Requirement = >1/3 day = 60 gal. = 5"

MINIMUM SCOUR VELOCITY (MSV) > 2 FPS

IN DRIP TUBING W/ NOM. DIA. 0.55" ID

MSV = 2 FPS ((ID+2)/4)*7.48 gal/cf*60 sec/min

MSV = 2(3.14159((.55/12)+2)/4)*7.48*60

MSV = 1.5 gpm MIN **VOID** x 2 = 3 gpm

IN RETURN MANIFOLD W/ NOM. DIA 1.049" ID

MSV = 2 FPS ((ID+2)/4)*7.48 gal/cf*60 sec/min

MSV = 2(3.14159((1.049/12)+2)/4)*7.48*60

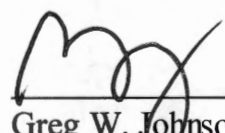
MSV = 5.4 GPM

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PIPE AND FITTINGS:

All pipes and fittings in this drip tubing system shall be 1" schedule 40 PVC. All joints shall be sealed with approved solvent-type PVC cement. Clipper type cutters are recommended to prevent PVC burrs during cutting of pipes causing possible plugging. Drip tubing 0.61 gph drip tubing to be used in field.

Designed in accordance with Chapter 285, Subchapter D, §285.30 and §285.40 Texas Commission on Environmental Quality (Effective December 29, 2016)

 07/11/19

Greg W. Johnson, P.E. No. 67587 - F-2585
170 Hollow Oak
New Braunfels, Texas 78132
830/905-2778

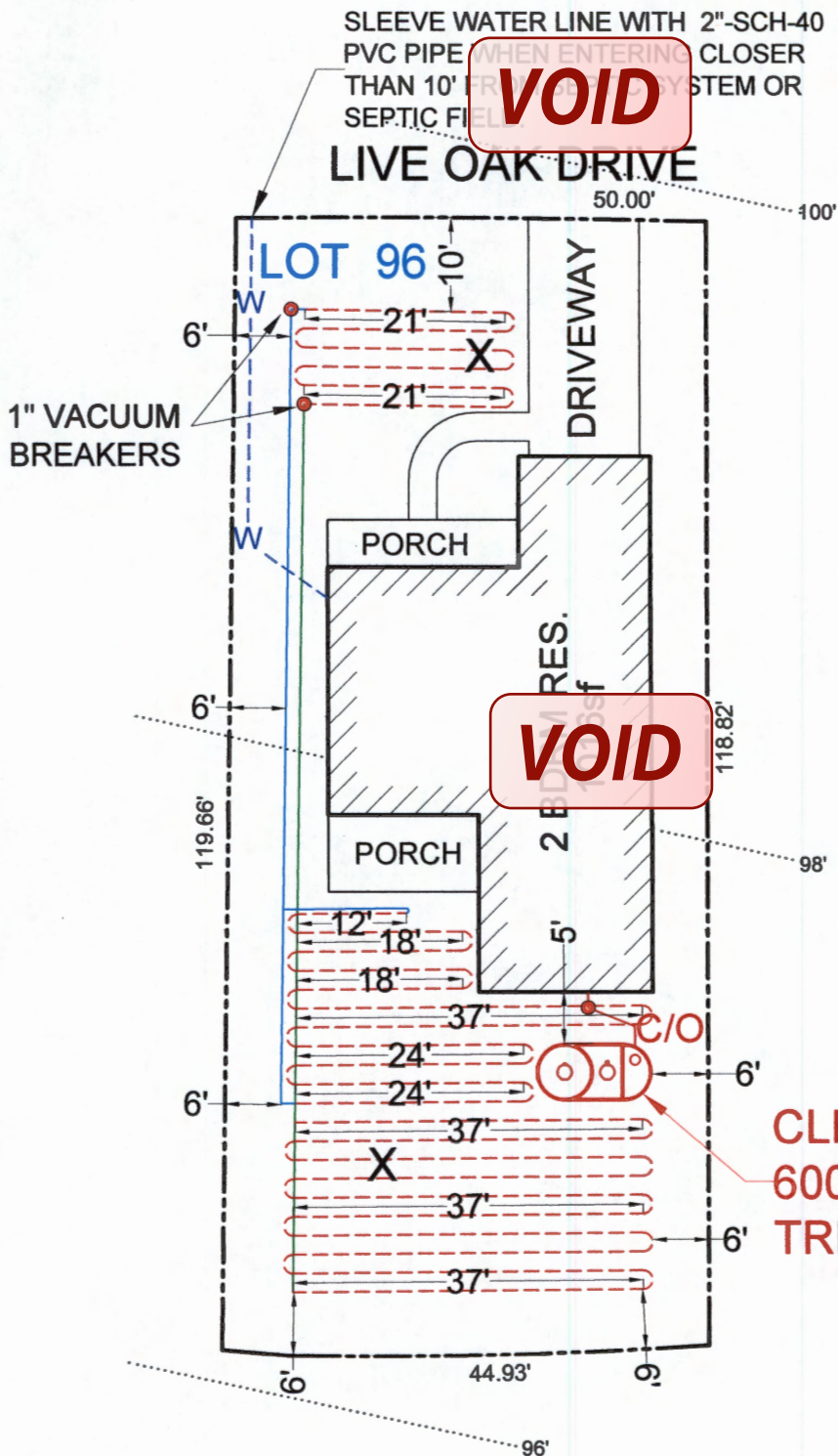


INSTALL 1500sf OF FIELD USING 750' OF DRIP TUBING. THERE SHALL BE NO PARKING, DRIVING OR STORAGE ON THE SEPTIC FIELD AT ANY TIME FOR ANY REASON.

*USE TWO WAY CLEAN OUT
**USE SCH-40 OR SDR-26 TO TANK

X= TEST HOLE

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OWNER:	JANYSEK BUILDERS, LLC.	DRAWN BY:	EJS III					
STREET ADDRESS:	1306 LIVE OAK DRIVE							
LEGAL DESC:	CYPRESS	UNIT/SECTION/PHASE:	4	BLOCK:		LOT:	96	
PREPARED BY:	GREG W. JOHNSON	#002585	SCALE:	1"=20'	DATE:	7/11/2019	REVISED:	

VOID



Hernandez, Sandra

From: Hernandez, Sandra
Sent: Wednesday, July 24, 2019 3:19 PM
To: 'Greg Johnson'
Subject: 109416 deficiency comment

RE: Cypress Cove, Section 4, Lot 96

Greg,

We received planning materials for the referenced property on July 17, 2019 and found those planning materials to be deficient. In order to continue processing this permit, we need the following information:

- ✓ Per TCEQ rules and regulations, the usage rate required for a 3-bdrm, 1016 square foot house is 240 gallons per day. Revise accordingly and resubmit.

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

Thank you,

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

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

Date July 10, 2019

VOID

Permit # 109416

Owner Name JANYSEK BUILDERS, LLC Agent Name GREG W. JOHNSON, P.E.
Mailing Address 104 WOODLAKE DRIVE Agent Address 170 HOLLOW OAK
City, State, Zip MCQUEENEY TEXAS 78123 City, State, Zip NEW BRAUNFELS, TX 78132
Phone# 830-708-4987 Phone # (830) 905-2778
Email norbertjanysek@att.net Email gregjohnsonpe@yahoo.com

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

Subdivision Name CYPRESS COVE Unit/Phase/Section SEC 4 Lot 96 Block
Acreage/Legal
Street Name/Address 1306 LIVE OAK DRIVE City SPRING BRANCH Zip 78070

Type of Development:

[X] Single Family Residential
Type of Construction (House, Mobile, RV, Etc.) HOUSE
Number of Bedrooms 3
Indicate Sq Ft of Living Area 1016

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[] 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: \$ 160,000 (Structure Only)
Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement?
[] Yes [X] No (if yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water [X] Public [] Private Well
Are Water Saving Devices Being Utilized Within the Residence? [X] Yes [] No

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

Signature of Owner

VOID

Date 7/17/19

Notice of confidentiality rights: If you are a natural person, you may remove or strike any or all of the following information from any instrument that transfers an interest in real property before it is filed for record in the public records: your Social Security number or your driver's license number.

General Warranty Deed

THE STATE OF TEXAS §

KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF COMAL §

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COUNTY ENGINEER

Executed on date of acknowledgement to be Effective on: November 20, 2018.

Grantor: **Tri-Built Services, Inc., a Texas corporation**

Grantor's Mailing Address: 20540 Hwy 46 West, Suite 115, PMB 441, Spring Branch, Comal County, Texas 78070

Grantee: **Janysek Builders, LLC**

Grantee's Mailing Address: 104 Woodlake Drive, McQueeney, Guadalupe County, Texas 78123

Consideration: TEN DOLLARS (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged.

Property (including any improvements): **Lots 96, 97 and 98, Cypress Cove, Section 4, situated in Comal County, Texas, according to the plat thereof recorded in Volume 1, Pages 69-70, Map and Plat Records of Comal County, Texas.**

Reservations from Conveyance: None.

Exceptions to Conveyance and Warranty: All presently recorded restrictions, reservations, easements, covenants and conditions that affect the property and taxes for the current year, 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, except as to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty.

POOR QUALITY

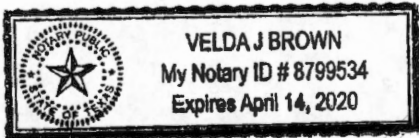
When the context requires, singular nouns and pronouns include the plural.

Tri-Built Services, Inc., a Texas corporation

By: _____
Printed Name: Jason Gallon
Title: President

THE STATE OF TEXAS *
COUNTY OF Comal *

This instrument was acknowledged before me on this the 20th day of Nov, 2018, by Jason Gallon, President of Tri-Built Services, Inc., a Texas corporation, in the capacity therein stated on behalf of said corporation.



Velda J Brown
NOTARY PUBLIC, STATE OF TEXAS

AFTER RECORDING RETURN TO:
ALAMO TITLE COMPANY
GF No. 4000131800870

PREPARED IN THE LAW OFFICE OF:
KRISTEN QUINNEY PORTER, LLC
P.O. Box 312643
New Braunfels, Texas 78131-2643

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
11/20/2018 04:04:36 PM
TERRI 2 Pages(s)
201806044991



Bobbie Koepf

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

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

<i>Permit Number</i>

Instructions:

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

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 COUNTY ENGINEER

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

07/17/19

Date

___ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

___ INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)

COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE, TX 78133

Phone: 830-899-2615
 Fax: 830-899-6662

TESTING AND REPORTING RECORD

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: DECEMBER 26, 2019 Installed: 8/26/2019 Service Expires: 8/26/2021

BILLING ADDRESS:
 DAVID JANYSSEK
 104 WOODLAKE DR
 McQUEENEY, TX 78123

PHYSICAL ADDRESS:
 1306 LIVE OAK DR
 SPRING BRANCH, TX 78070

TELEPHONE: 830-822-3373
 ALT. PHONE:

LOT: LT 96,

PERMIT#: 109416

COUNTY: COMAL

SN: 19020337

SUBDIVISION: CYPRESS COVE

Manufacturer: CLEARSTREAM-600

MAPSCO: N/A

NOTES:

TYPE OF SYSTEM: DRIP

Inspected Item: Operational Inoperative

Inspected Item:	Operational	Inoperative
Aerators		
SCFM/Compressors PSI		
Record Pressure Reading	2 psi	
Filters	/	
Irrigation Pumps	/	
Recirculation Pumps	N/A	
Disinfection Device	/	
Chlorine Supply	/	
Electrical Circuits	/	
Distribution System	/	
Sprayfield Vegetation	N/A	
Back Flush Drip Field, if applicable	/	
Other as Noted		

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

Cleaned filter on Compressor

Checked pump, floats and

Dripfield. Cleaned micron

filter.

SYSTEM OPERATING AS DESIGNED? Y/N

Access Posts are Secured

Yes

No

3. Tests required and results:

	Required		Results mg/l mpn/100mi or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)		/	Clear	Grab
Cl (Grab)	/		0.0	OTO
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: Kyle

13

Date of completion: 12/23/19 Start Job Time: 12:40 Stop Job Time: 12:50

Maintenance Provider: Walker Chapman

COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE, TX 78133

Phone: 830-899-2615
 Fax: 830-899-6662

TESTING AND REPORTING RECORD

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: APRIL 26, 2020 Installed: 8/26/2019 Service Expires: 8/26/2021

BILLING ADDRESS:
 DAVID JANYSEK
 104 WOODLAKE DR
 McQUEENEY, TX 78123

PHYSICAL ADDRESS:
 1306 LIVE OAK DR
 SPRING BRANCH, TX 78070

TELEPHONE: 830-822-3373
 ALT. PHONE:

LOT: LT 96,

PERMIT#: 109416
 COUNTY: COMAL
 SN: 19020337
 MAPSCO: N/A

SUBDIVISION: CYPRESS COVE MFG: CLEARSTREAM-600

NOTES:
 TYPE OF SYSTEM: DRIP

Inspected Item:	Operational	Inoperative
Aerators		
SCFM/Compressors PSI (Record Pressure Reading)	3psi	
Filters	/	
Irrigation Pumps	/	
Recirculation Pumps	N/A	
Disinfection Device	/	
Chlorine Supply	/	
Electrical Circuits	/	
Distribution System	/	
Sprayfield Vegetation	/	
Back Flush Drip Field, if applicable	N/A	
Other as Noted		

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

Cleaned filter on Compressor
Checked Chlorine. Checked pump
Flats + Sprinklers. Set
time.

Access Posts are Secured Yes No

3. Tests required and results:

	Required		Results mg/l mpn/100ml or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)		/	CLEAR	Grab
Cl (Grab)	/		1.0	ATO
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: Kyle 13

Date of completion: 5/7/20 Start Job Time: _____ Stop Job Time: _____

Maintenance Provider: Walsh Construction

COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE, TX 78133

Phone: 830-899-2615
 Fax: 830-899-6662

TESTING AND REPORTING RECORD

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: AUGUST 26, 2020 Installed: 8/26/2019 Service Expires: 8/26/2021

BILLING ADDRESS:
 DAVID JANYSK
 104 WOODLAKE DR
 MCQUEENEY, TX 78123

PHYSICAL ADDRESS:
 1306 LIVE OAK DR
 SPRING BRANCH, TX 78070

TELEPHONE: 830-822-3373
 ALT. PHONE:

LOT: LT 96,

PERMIT#: 109416

COUNTY: COMAL

SN: 19020337

MAPSCO: N/A

SUBDIVISION: CYPRESS COVE MFG: CLEARSTREAM-600

NOTES:
 TYPE OF SYSTEM: DRIP

Inspected Item:	Operational	Inoperative
Aerators 3CFM/Compressors P81 (Record Pressure Reading)	3 psi	
Filters	/	
Irrigation Pumps	/	
Recirculation Pumps	N/A	
Disinfection Device	/	
Chlorine Supply	/	
Electrical Circuits	/	
Distribution System	/	
Sprayfield Vegetation	/	
Back Flush Drip Field, if applicable	N/A	
Other as Noted		

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

Cleaned filter on compressor.
Checked pump, floats and
Dripfield. Cleaned micron filter.

SYSTEM OPERATING AS DESIGNED? Y/N

Access Posts are Secured Yes No

3. Tests required and results:

	Required		Results mg/l mpn/100mi or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)		/	clear	Grab
Cl (Grab)	/		0.0	OTO
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: Kyle

13

Date of completion: 9.8.20 Start Job Time: 9:29 Stop Job Time: 9:40

Maintenance Provider: Walburn Copman

COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE, TX 78133

Phone: 830-899-2615
 Fax: 830-899-5662

TESTING AND REPORTING RECORD

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: DECEMBER 26, 2020 Installed: 8/26/2019 Service Expires: 8/26/2021

BILLING ADDRESS:
 DAVID JANYSK
 104 WOODLAKE DR
 McQUEENEY, TX 78123

PHYSICAL ADDRESS:
 1306 LIVE OAK DR
 SPRING BRANCH, TX 78070

TELEPHONE: 830-822-3373
 ALT. PHONE:

LOT: LT 96,

PERMIT#: 109416

COUNTY: COMAL

SN: 19020337

SUBDIVISION: CYPRESS COVE

MFG: CLEARSTREAM-600

MAPSCO: N/A

NOTES:

TYPE OF SYSTEM: DRIP

Inspected Item:	Operational	Inoperative
Aerators		
SCFM/Compressors PSI (Record Pressure Reading)	3psi	
Filters	/	
Irrigation Pumps	/	
Recirculation Pumps	N/A	
Disinfection Device	/	
Chlorine Supply	/	
Electrical Circuits	/	
Distribution System	/	
Sprayfield Vegetation	N/A	
Back Flush Drip Field, if applicable	/	
Other as Noted		

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

Rotted Aerators Cleaned Filter on

Compressor. Checked Chlorine.

Cleaned Micron Filter. Checked

Dripfield.

SYSTEM OPERATING AS DESIGNED? Y/N

Access Posts are Secured Yes No

3. Tests required and results:

	Required		Results mg/l mpn/100mi or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)		/	Clear	Grab
Cl (Grab)	/		0.0	OTO
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: Kjh

13

Date of completion: 11/16/20 Start Job Time: _____ Stop Job Time: _____

Maintenance Provider: Water Corporation

COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE TX 78133

Phone: 830-899-2611
 Fax: 830-899-6667

TESTING AND REPORTING RECORD

The Testing and Reporting Record Form is completed, signed and dated after each test.

Installation Date: APRIL 26 2011 Operational: 6/26 2011 Release Date: 6/28 2011

BUILDING ADDRESS:
 DAVID JANYSKY
 104 WOODLAKE DR
 McQUEENEY, TX 78123

TRUSTEE ADDRESS:
 1396 LIVE OAK DR
 SPRING BRANCH, TX 75070

TELEPHONE: 830-800-6373
 ALT. PHONE:

LOT: LT 36.

TRFNO: 109116
 COUNTY: COMAL
 ZIP: 78030

SUBDIVISION: CYPRESS COVE FF CLEARSTREAM 600

TRFNO: N/A

NOTE:
 TYPE OF SYSTEM: DRIP

Inspected Item	Operational	Impairative	Remarks
Pressure Regulator			
Pressure Control Valve			
Pressure Sensor	3psi		Cleaned filter on Compressor
Filters	-		
Irrigation Pump	-		Checked and Cleaned Micron
Permeation Pump	N/A		filter checked pump, floats
Disinfection Device	/		and Drip field.
Waterline Supply	/		
Electrical Control	/		
Distribution System	/		
Sprayable Waterline	/		
Back Flush Drip Field	N/A		
Other as Noted			
System Operating as Designed			Yes

Tests required and results:

Test	Required		Result	Test Method
	Yes	No		
BOD Grab				
TSS Grab				
Cl Grab	/		Clear lid	Grab
Fecal Coliform				050

Copies of this report have been forwarded to the following: COMAL County, in accordance with the rules and regulations of the Texas Department of Health.

Maintenance Test Date: 6/21
 Date of Installation: 5-16-21
 Maintenance Provider: Walker Chapman

COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE, TX 78133

Phone: 830-899-2515
 Fax: 830-899-5552

TESTING AND REPORTING RECORD

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: AUGUST 26, 2021 Installed: 8/26/2019 Service Expires: 8/26/2021

BILLING ADDRESS:
 DAVID JANYSEK
 104 WOODLAKE DR
 McQUEENEY, TX 78123

PHYSICAL ADDRESS:
 1306 LIVE OAK DR
 SPRING BRANCH, TX 78070

TELEPHONE: 830-822-9373
 ALT. PHONE:

LOT: LT 96,

PERMIT#: 109416

COUNTY: COMAL

SN: 19020337

SUBDIVISION: CYPRESS COVE

MFG: CLEARSTREAM-600

MAPSCO: N/A

NOTES:

TYPE OF SYSTEM: DRIP

Inspected Item:	Operational	Inoperative
Asarators		
SCFM/Compressors PSI (Record Pressure Reading)	3psi	
Filters	/	
Irrigation Pumps	/	
Recirculation Pumps	N/A	
Disinfection Device	/	
Chlorine Supply	/	
Electrical Circuits	/	
Distribution System	/	
Sprayfield Vegetation	N/A	
Back Flush Drip Field, if applicable	N/A ✓	
Other as Noted		
Access Posts are Secured		

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

Cleaned filter on Compressor.
 Cleaned micron filter, checked pump, floats and ^{Drip Field} sprinklers.
 Set timer.

SYSTEM OPERATING AS DESIGNED? Y/N

Yes

No

3. Tests required and results:

	Required		Results mg/l mpn/100ml or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)		/	Clear	Grab
Cl (Grab)	/		1.0	OTD
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: lfb

13

Date of completion: 9.20.21 Start Job Time: 1:22 Stop Job Time: 1:35

Maintenance Provider: wellbychampion

COUNTRYSIDE CONSTRUCTION, INC.
 300 CHAPMAN PARKWAY
 CANYON LAKE, TX 78133

Phone: 830-899-2615
 Fax: 830-899-6662

TESTING AND REPORTING RECORD

This Testing and Reporting Record shall be completed, signed and dated after each inspection.

1. Inspection Date: DECEMBER 26, 2021 Installed: 8/26/2019 Service Expires: 8/26/2021

BILLING ADDRESS:
 DAVID JANYSEK
 104 WOODLAKE DR
 MCQUEENEY, TX 78123

PHYSICAL ADDRESS:
 1306 LIVE OAK DR
 SPRING BRANCH, TX 78070

TELEPHONE: 830-822-3373
 ALT. PHONE:

LOT: LT 96,

PERMIT#: 109416
 COUNTY: COMAL
 SN: 19020337
 MAPSCO: N/A

SUBDIVISION: CYPRESS COVE MFG: CLEARSTREAM-600

NOTES:
 TYPE OF SYSTEM: DRIP

Inspected Item:	Operational	Inoperative
Aerators		
SCFM/Compressors PSI (Record Pressure Reading)	2.5	
Filters	/	
Irrigation Pumps	/	
Recirculation Pumps	N/A	
Disinfection Device	/	
Chlorine Supply	/	
Electrical Circuits	/	
Distribution System	/	
Sprayfield Vegetation	N/A	
Back Flush Drip Field, if applicable	/	
Other as Noted	/	
Access Posts are Secured		

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

CHECKED PUMP,
 ALARMS, FLOATS,
 FILTER, FIELD,
 COMPRESSOR / FILTER

SYSTEM OPERATING AS DESIGNED? Yes No

3. Tests required and results:

	Required		Results mg/l mpn/100mi or Trace	Test Method
	Yes	No		
BOD (Grab)				
TSS (Grab)		/		
Cl (Grab)	/			
Fecal Coliform				

Copies of this report have been forwarded to the following: COMAL county / homeowner.

Maintenance Technician: Thomas

Date of completion: 2/21/22 Start Job Time: _____ Stop Job Time: _____

Maintenance Provider: Walker Chapin

WORK ORDER

Aerobic Services

15188 FM 306, Canyon Lake, TX 78133

Canyon Lake: (830) 964-2365 | Bastrop:

(512) 303-6922

www.aerobicservices.com



Customer ID	Scheduled	Serviced
192767	2024-06-03	

Customer Name and Site Address	Contact	Customer Email Address
Lisa Whited 1306 Live Oak Dr. Canyon Lake, TX Mailing: 1306 Live Oak Dr., Canyon Lake TX 78133	Lisa Whited	info@aerobicservices.com
	Main Phone	Secondary Phone
	(737) 900-8871	

System Permit #	Brand of System
109416	Clearstream

Work Order Type	Assigned Technician	HEALTH DEPT
Alarm	Nick	Comal

DESCRIPTION OF THE WORK ORDER (REASON OF CALL)

System not operational, lightning strike power outage.

RESULTS OF WORK ORDER

Power outage from lightning resulted in burned out components, system needed a new effluent pump a new aeration pump and new light bulb, replaced compressor and effluent pump, dug up junction box and wired new pump into system, system fully operant draining out, system alarm is operational. No drip filter for drip system, call our office for quote on installing drip filter or any other issues you have with the system thank you.

DIRECTIONS / INSTRUCTIONS FOR THE TECHNICIAN

Date: 2024-06-03

Customer's Signature

Employee's Signature