



# COMAL COUNTY

## ENGINEER'S OFFICE

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

Issued This Date: **01/21/2020** Permit Number: **109453**

Location Description: 143 GLADIOLA ST  
SPRING BRANCH, TX 78070

Subdivision: Mystic Shores  
Unit: 4  
Lot: 461  
Block:  
Acreage:

Type of System: Aerobic  
Surface Irrigation

Issued to: Corby Peterson & Lauren Peterson

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

QS0034792

  
ENVIRONMENTAL HEALTH INSPECTOR

  
ENVIRONMENTAL HEALTH COORDINATOR

OS 0025599



**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	X	285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)		X		01-21-20
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	X			X		
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number	X X		MAXX AIR M 600	X X		
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)	X	285.33(d)(6) 285.33(c)(4)	AEROBIC SPRAY	X		01-21-20
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)				

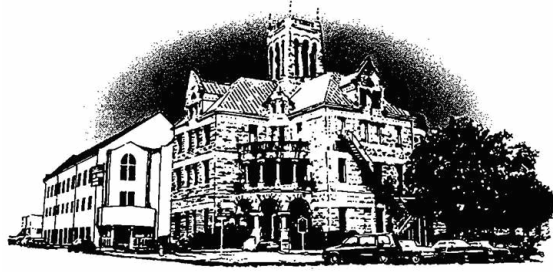
**Comal County Environmental Health  
OSSF Inspection Sheet**

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.	X	285.32(c)(1)		X		01-21-20
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	X X X X			X X X X		
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.	X			X		
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	X			X		

**Comal County Environmental Health  
OSSF Inspection Sheet**

**Final**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	X	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)		X		01-21-20
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	X  X	285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)		X  X		
42	APPLICATION AREA Area Installed	X			X		
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: 109453  
Issued This Date: 07/31/2019  
This permit is hereby given to: Corby Peterson & Lauren Peterson

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

143 GLADIOLA ST  
SPRING BRANCH, TX 78070

Subdivision: Mystic Shores  
Unit: 4  
Lot: 461  
Block:  
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic  
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

items Date Received	initials

Permit Number

Instructions:

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

OSSF Permit

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

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

07/24/19  
 \_\_\_\_\_  
 Date

____ COMPLETE APPLICATION	
Check No. _____	Receipt No. _____

____ INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)



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

Date 6/25/19

Permit # 109453

Owner Name CORBY PETERSON & LAUREN PETERSON  
Mailing Address c/o 23011 FM 306  
City, State, Zip Canyon Lake, TX 78133  
Phone # 830-935-4936  
Email paul@paulswoyerseptics.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  Agent  Both Method:  Mail  Email

Subdivision Name MYSTIC SHORES Unit 4 Lot 461 Block \_\_\_\_\_

Acreage/Legal \_\_\_\_\_

Street Name/Address 143 GLADIOLA STREET City SPRING BRANCH Zip 78070

**Type of Development:**

Single Family Residential

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

Number of Bedrooms 4

Indicate Sq Ft of Living Area 2086

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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: \$ 100,000 (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 understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

[Signature]  
Signature of Owner

6-25-19  
Date

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

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

Planning Materials & Site Evaluation as Required Completed By 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) MAXX AIR M600 Absorption/Application Area (Sq Ft) 5654

Gallons Per Day (As Per TCEQ Table III) 300

(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? [X] Yes [ ] No

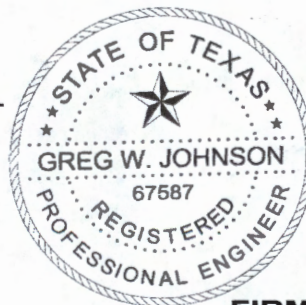
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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 [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 13, 2019

AFFIDAVIT



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THE COUNTY OF COMAL  
STATE OF TEXAS

Yes

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):

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4

UNIT/PHASE/SECTION \_\_\_\_\_ BLOCK 461 LOT \_\_\_\_\_ MYSTIC SHORES

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

The property is owned by (insert owner's full name): CORBY PETERSON & LAUREN PETERSON

This OSSF must be covered by a continuous maintenance contract for the first two years. After the initial two-year service policy, the owner of an aerobic treatment system for a single family residence shall either obtain a maintenance contract within 30 days or maintain the system personally.

Upon sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF can be obtained from the Comal County Engineer's Office.

WITNESS BY HAND(S) ON THIS 25<sup>th</sup> DAY OF June, 2019

X [Signature]

CORBY PETERSON

X [Signature]

LAUREN PETERSON

Owner(s) signature(s)

Owner (s) Printed name (s)

CORBY + LAUREN PETERSON

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 25<sup>th</sup> DAY OF

June, 2019

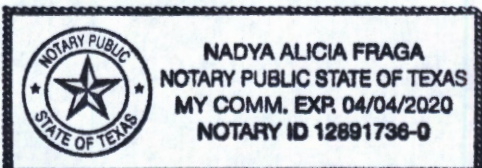
[Signature]  
Notary Public Signature

THIS AREA FOR COMAL COUNTY CLERK RECORDING PURPOSES ONLY

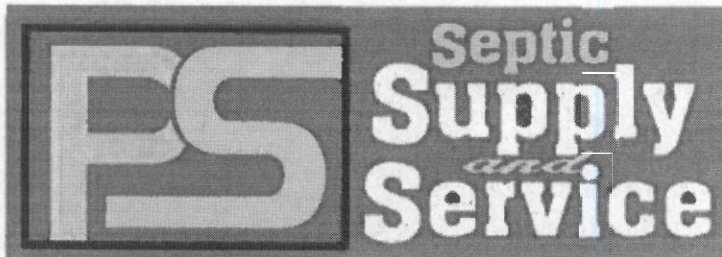
Filed and Recorded  
Official Public Records  
Bobbie Koepp, County Clerk  
Comal County, Texas  
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Bobbie Koepp



(Notary Seal Here)



PAUL SWOYER SEPTIC SUPPLY & SERVICE
23011 FM 306
CANYON LAKE, TX 78133

MP#0001708
CHRISTOPHER RYAN SEIDENSTICKER

PROPERTY LEGAL DESCRIPTION:

MYSTIC SHORES, UNIT 4, LOT 461

Customer: CORBY PETERSON & LAUREN PETERSON

Site Address: 143 GLADIOLA STREET

City/State: SPRING BRANCH, TX Zip: 78070

County: COMAL Permit#:

Phone Number:

E-mail:

I. General: This On-Site Sewage Facility Service Agreement (hereinafter referred to as "Agreement") is entered into by and between CORBY PETERSON & LAUREN PETERSON (hereinafter referred to as "Client") and PS Supply & Service LLC. (hereinafter referred to as "Contractor"). By this agreement, Contractor agrees to render services, as described herein (the "Services"), and the client agrees to fulfill his/her/their responsibilities under this agreement herein.

II. Effective Dates: This agreement commences on the date of License to Operate is issued for Three (3) years.

Date of License to Operate: LTO Last Date of Service: 3 yrs from LTO

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III. Services by Contractor: Contractor will provide the following Services:

- 1. Inspect and perform routine maintenance on the On-Site Sewage Facility ("OSSF") in compliance with the code, regulations, and/or rules of the Texas Commission on Environmental Quality ("TCEQ") and county in which the OSSF is located (the "County") and the manufacturer's requirements, at a frequency of approximately once every four (4) months.
2. Report to the appropriate regulatory authority and to Client, as required by the State of Texas' on-site rules and, if required, TCEQ or County rules. All findings must be reported to the appropriate regulatory authority within 14 days.
3. Notify Client and repair any component of the OSSF that are found to be in need of repair during the inspection. If warranty, you just do it. If not, Client will be responsible. Repairs will be made so brought up to compliance and bill forward.
4. Visit site in response to Client's request for unscheduled service within two business days from the date of Contractor's actual receipt of Client's request. Unscheduled service visits are not included in the fee agreement herein and will be billed to the client in addition to fees under this Agreement.
5. Provide notification of arrival to site to the Client or to site personnel. Additionally, Contractor will leave written notification of the visit at the site or with site personnel upon completion of inspection, and forward such notice to the appropriate regulatory authority within fourteen (14) days.

IV. Payment(s): Client shall pay to Contractor included w/ septic for the Services describe herein (the "Inspection and Routine Maintenance Fee"), excepting those described in Section III (4), or Section IX, herein. The Fee does not include equipment, parts or labor supplied for anything beyond routine inspection and routine maintenance. Payments for such additional services are due at the time services are provided or rendered. Payments not received within thirty (30) days from the due date will be subject the greater of a \$20.00 late penalty or 1.5% carrying charge on the original balance for each month or portion thereof a balance in past due. If for any reason such charges are found to be usurious by a court of competent jurisdiction, such charges shall be reduced to the maximum allowable by law. By signing this contract, Client authorizes Contractor to remove any parts installed, but not paid in full at the end of the thirty (30) days. Client agrees to pay for any labor cost associated with the installation and the reasonable cost of removal of said parts.

Client: [Signature]

Contractor: [Signature]

**V. Client's Responsibilities:** Client is responsible for each and all of the following:

1. To maintain chlorinator and provide proper chlorine supply, if OSSF is so equipped.
2. To provide all necessary yard or lawn maintenance and removal of obstacles as needed to allow the OSSF to function properly, and to allow Contractor ready access to all parts of the OSSF.
3. To maintain a current license to operate, and abide by the conditions and limitations of that license and all requirements for on-site sewage facilities from the State and local regulatory agency.
4. To maintain the OSSF in accordance with manufacturer's recommendations.
5. To immediately notify Contractor and Agency of any and all problems with, the OSSF, including failure thereof.
6. Upon receipt of any written notification of required services from Contractor, to contact Contractor and authorize the required service. If Client elects a different contractor to perform the required service, Client is responsible for ensuring the substitute contractor holds the proper license (Installer II) and is certified by the manufacturer. Additionally, Client shall be responsible for ensuring proper notification is given to the appropriate regulatory authority, as required by the State and/or local regulatory authority rules.
7. To provide Contractor with water usage records, upon request, for evaluation by Contractor of the OSSF performance.
8. To pay required sampling charges for samples collected for testing (e.g. Biological Oxygen Demand/Total Suspended Solids ("BOD/TSS")) that may be required on the OSSF.
9. To prevent backwash from water treatment or water conditioning equipment to enter the OSSF.
10. To provide, at Client's expense, for pumping of tanks as needed.
11. To maintain site drainage sufficient to prevent adverse effects on the OSSF.
12. To promptly and fully pay Contractor's bills, fees, or invoices as described herein.

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**VI. Access by Contractor:** Client agrees to allow Contractor, or personnel authorized by the Contractor, to enter the property at reasonable times without prior notice for the purpose of performing the Services described herein. Such entry shall include access to the OSSF electrical and physical components, including tanks, by means of manways or risers for the purpose of evaluations required by the manufacturer, and/or regulatory authority rules. If such manways or risers are not in place, Client shall allow and be responsible for payment of required excavation, including labor and materials, necessary to allow access to the OSSF or any required components. Such excavation shall be billed at the rate of \$75.00 per hour for labor, plus materials billed at list price. Contractor shall make only those efforts reasonable under the circumstances to replace excavated soil.

**VII. Application or Transfer of Payment:** The fees paid for this agreement may transfer to any subsequent owner(s) of the property on which the OSSF is located. The subsequent owner(s) must sign a similar agreement authorizing Contractor to perform the above-described Services, and accepting Client's responsibilities. The replacement Agreement must be signed and received within 30 days of transfer of ownership. Contractor will apply all funds received from Client first to any past due obligations arising from this Agreement including late charges, return check charges, and charges for repairs or services not paid within 30 days of invoicing. The consumption of the payment in this manner may lead to termination of the agreement by Contractor

**VIII. Termination of Agreement:** This agreement may be terminated by either party with 30 days written notice. If this agreement is so terminated by Client, Contractor shall be paid at the rate of \$75.00 per hour for any work performed or required, but not yet paid. If terminated by Contractor, all amounts outstanding shall be due within thirty days of termination. The party terminating will immediately notify the other party, the equipment manufacturer, and the regulatory agency of the termination.

**IX. Limitation of Liability:** In no event shall Contractor be liable for indirect, consequential, incidental or punitive damages, whether in contract, tort, or any other theory of liability. In no event shall the Contractor's liability for direct damages exceed payments by the Client under this Agreement.

**X. Severability and Reformation:** If any provision in this Agreement shall be held to be invalid or unenforceable for any reason, it shall be reformed to the minimum extent necessary to effect the intent of the Parties. If any provision is such that it cannot reasonably be reformed, it shall be struck from this Agreement and the remaining provisions shall continue to be valid and enforceable.

**XI. Performance of Agreement:** Commencement of performance by Contractor under this agreement is contingent on the following conditions: (1) Contractor receiving a fully executed original copy of this agreement. (2) Contractor receiving payment in full of the fee(s) described herein. If the above conditions are not met, then Contractor is from any obligation to perform any portion of this agreement.

**XII. Modification.** This Agreement may not be changed or modified except by an instrument in writing, signed by both Contractor and Client.

**XIII. Waiver.** Except as otherwise noted in this Agreement, the waiver by other party of a breach of any provision of this Agreement shall not operate or be construed as a continuing waiver or as a consent to or waiver of any subsequent breach hereof.

Client:                                   


Contractor:                                   


**XIV. Headings.** The Article and Section headings in this Agreement are for the convenience of reference only and do not constitute a part of this Agreement and shall not be deemed to limit or affect any of the provisions hereof.

**XV. GOVERNING LAW AND CHOICE OF VENUE.** EACH OF THE PARTIES HERETO HEREBY CONSENTS TO THE EXCLUSIVE JURISDICTION OF THE COURTS OF THE STATE OF TEXAS, COUNTY OF COMAL, AND TO THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF TEXAS – SAN ANTONIO DIVISION, AS WELL AS TO THE JURISDICTION OF ALL COURTS TO WHICH AN APPEAL MAY BE TAKEN FROM SUCH COURTS, FOR THE PURPOSE OF ANY SUIT, ACTION, OR OTHER PROCEEDING ARISING OUT OF, OR IN CONNECTION WITH, THIS AGREEMENT OR ANY OF THE TRANSACTIONS CONTEMPLATED HEREBY, INCLUDING, WITHOUT LIMITATION, ANY PROCEEDING RELATING TO ANCILLARY MEASURES IN AID OF ARBITRATION, PROVISIONAL REMEDIES AND INTERIM RELIEF, OR ANY PROCEEDING TO ENFORCE ANY ARBITRAL DECISION OR AWARD. EACH PARTY HERETO EXPRESSLY WAIVES ANY AND ALL RIGHTS TO BRING ANY SUIT, ACTION, OR OTHER PROCEEDING IN OR BEFORE ANY COURT OR TRIBUNAL OTHER THAN COURTS OF THE STATE OF TEXAS, COUNTY OF COMAL, AND COVENANTS THAT IT SHALL NOT SEEK IN ANY MANNER TO PROSECUTE OR DEFEND ANY DISPUTE OTHER THAN AS SET FORTH IN THIS ARTICLE XVI OR TO CHALLENGE OR SET ASIDE ANY DECISION, AWARD, OR JUDGMENT OBTAINED IN ACCORDANCE WITH THE PROVISIONS HEREOF. EACH OF THE PARTIES HERETO HEREBY EXPRESSLY WAIVES ANY AND ALL OBJECTIONS IT MAY HAVE TO VENUE, INCLUDING, WITHOUT LIMITATION, THE INCONVENIENCE OF SUCH FORUM, IN ANY OF SUCH COURTS.

**XVI. JURY TRIAL WAIVER. THE PARTIES HEREBY UNCONDITIONALLY WAIVE THEIR RIGHT TO A JURY TRIAL OF ANY AND ALL CLAIMS OR CAUSES OF ACTION ARISING FROM OR RELATING TO THEIR RELATIONSHIP. THE PARTIES ACKNOWLEDGE THAT A RIGHT TO A JURY IS A CONSTITUTIONAL RIGHT, THAT THEY HAVE HAD AN OPPORTUNITY TO CONSULT WITH INDEPENDENT COUNSEL, AND THAT THIS JURY WAIVER HAS BEEN ENTERED INTO KNOWINGLY AND VOLUNTARILY BY ALL PARTIES TO THIS AGREEMENT. IN THE EVENT OF LITIGATION, THIS AGREEMENT MAY BE FILED AS A WRITTEN CONSENT TO A TRIAL BY THE COURT.**

Approved by Contractor: 

MP#0001708  
CHRISTOPHER RYAN SEIDENSTICKER

Approved by Client: 

**XVII. Reservation of Rights.** Contractor reserves all rights not specifically granted herein.

**XVIII. Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original but all of which together will constitute one and the same instrument.


**XIX. Counsel.** Contractor has previously recommended that Client engage counsel to assist him/her/it in reviewing this Agreement and all other matters relating to it. Contractor and Client shall each bear his/her/its own costs and expenses in connection with the negotiation and documentation of this Agreement.


**XX. Entire Agreement:** This agreement contains the entire agreement of the parties, and there are no promises or conditions in any other agreement, oral or written. The Parties expressly disclaim reliance on any prior statements, oral or written, by either party not expressly provided for herein.

RECEIVED

JUL 24 2019

COUNTY ENGINEER

Client: 

Contractor: 

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

July 13, 2019

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

RE- SEPTIC DESIGN  
143 GLADIOLA STREET  
MYSTIC SHORES, UNIT 4, LOT 461  
SPRING BRANCH, TX 78070  
PETERSON RESIDENCE

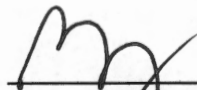
RECEIVED  
JUL 24 2019  
COUNTY ENGINEER

Ms. Brenda Ritzen/Sandra Hernandez,

The referenced property is located within the Edwards Aquifer Contributing Zone. This OSSF design will comply with requirements in the CZP.

Temporary erosion and sedimentation controls should be utilized as necessary prior to construction. If any sensitive feature (caves, solution cavities, sink holes, etc.) is discovered during construction, activities must be suspended immediately and the applicant or his agent must immediately notify the TCEQ Regional Office. After that operations can only proceed after the Executive Director approves required additional engineered impact plans.

Designed in accordance with Chapter 285, Subchapter D, §285.40, 285.41, & 285.42, Texas Commission on Environmental Quality (Effective December 29, 2016).

 07/13/19  
\_\_\_\_\_  
Greg W. Johnson, P.E. No. 67587 / F#2585  
170 Hollow Oak  
New Braunfels, Texas 78132 - 830/905-2778



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

Date Soil Survey Performed: July 12, 2019

Site Location: MYSTIC SHORES, UNIT 4, LOT 461

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.

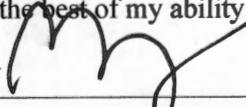
Describe each soil horizon and identify any restrictive features on the form. Indicate depths where features appear.

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JUL 24 2019  
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 @ 6"	BROWN
6"						
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

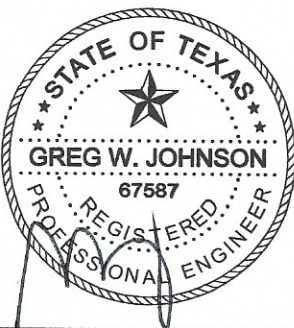
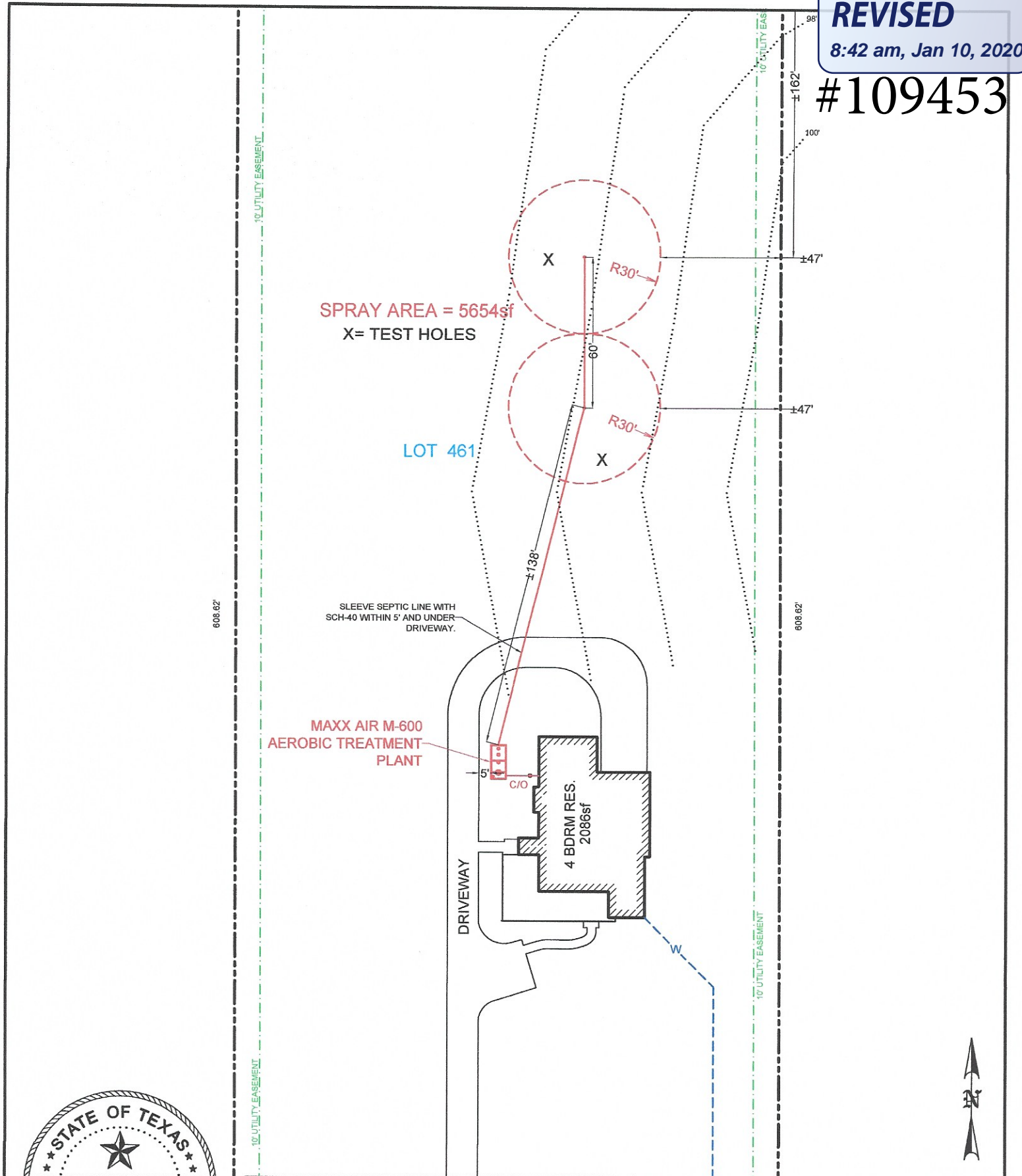
07/12/19  
\_\_\_\_\_  
Date





**REVISED**  
8:42 am, Jan 10, 2020

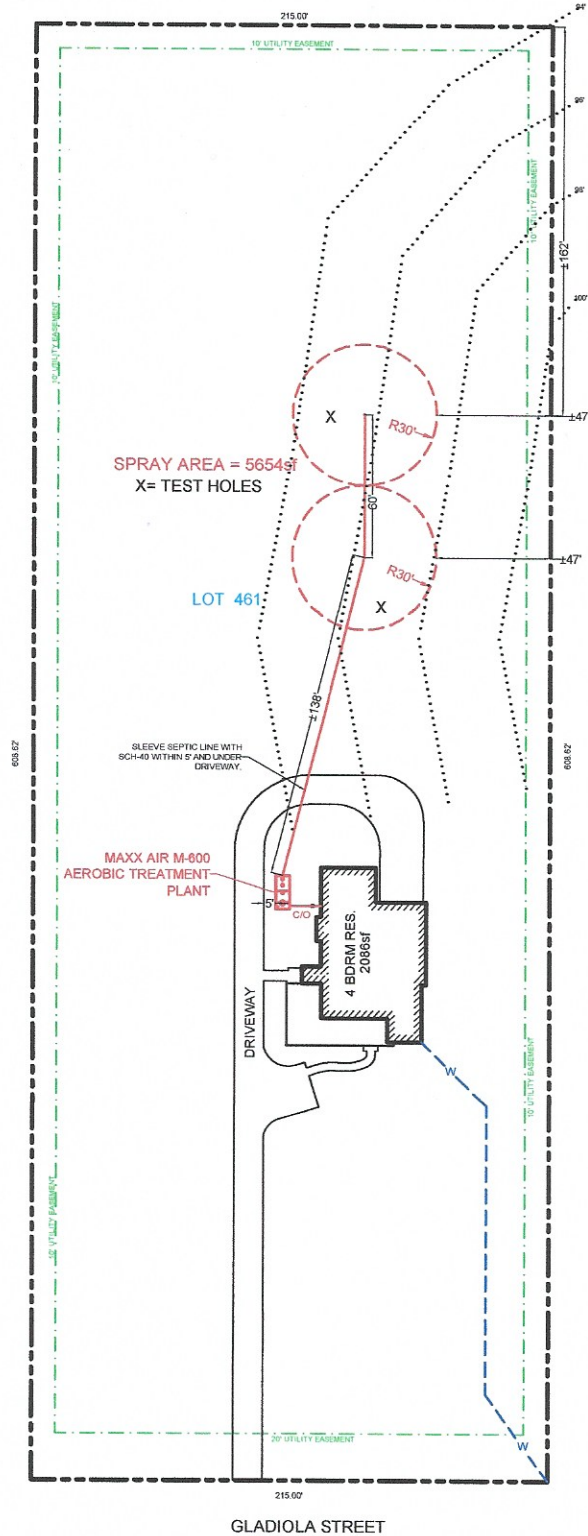
**#109453**



OWNER: CORBY & LAUREN PETERSON		DRAWN BY: EJS III	
STREET ADDRESS: 143 GLADIOLA STREET			
LEGAL DESC: MYSTIC SHORES	UNIT/SECTION/PHASE: 4	BLOCK:	LOT: 461
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=50'	DATE: 7/15/2019	2nd REVISION: 1/9/2020

#109453

**REVISED**  
8:42 am, Jan 10, 2020



OWNER: CORBY & LAUREN PETERSON		DRAWN BY: EJS III	
STREET ADDRESS: 143 GLADIOLA STREET			
LEGAL DESC: MYSTIC SHORES	UNIT/SECTION/PHASE: 4	BLOCK:	LOT: 461
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=80'	DATE: 7/15/2019	2nd REVISION: 1/9/2020

## TANK NOTES:

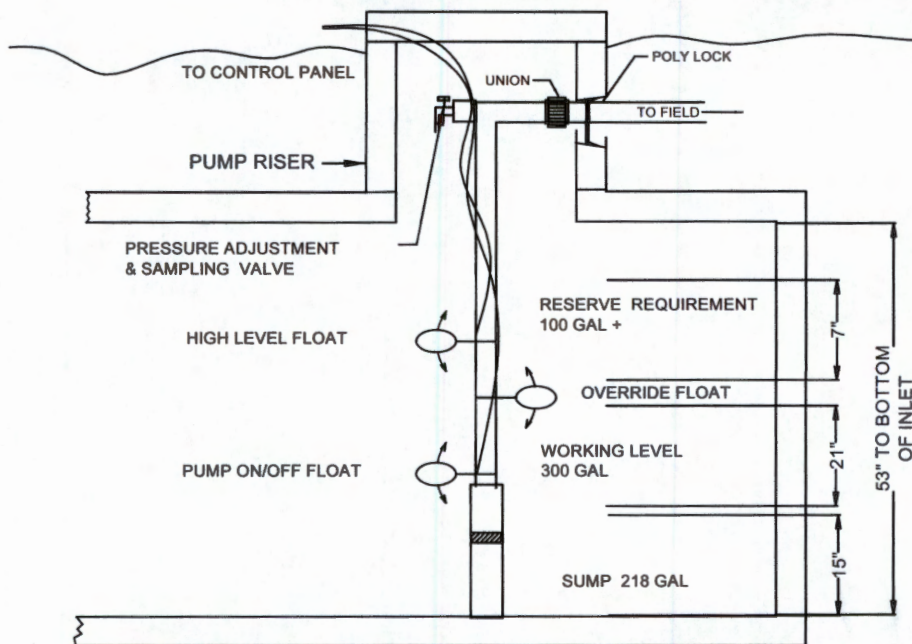
Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

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



RECEIVED

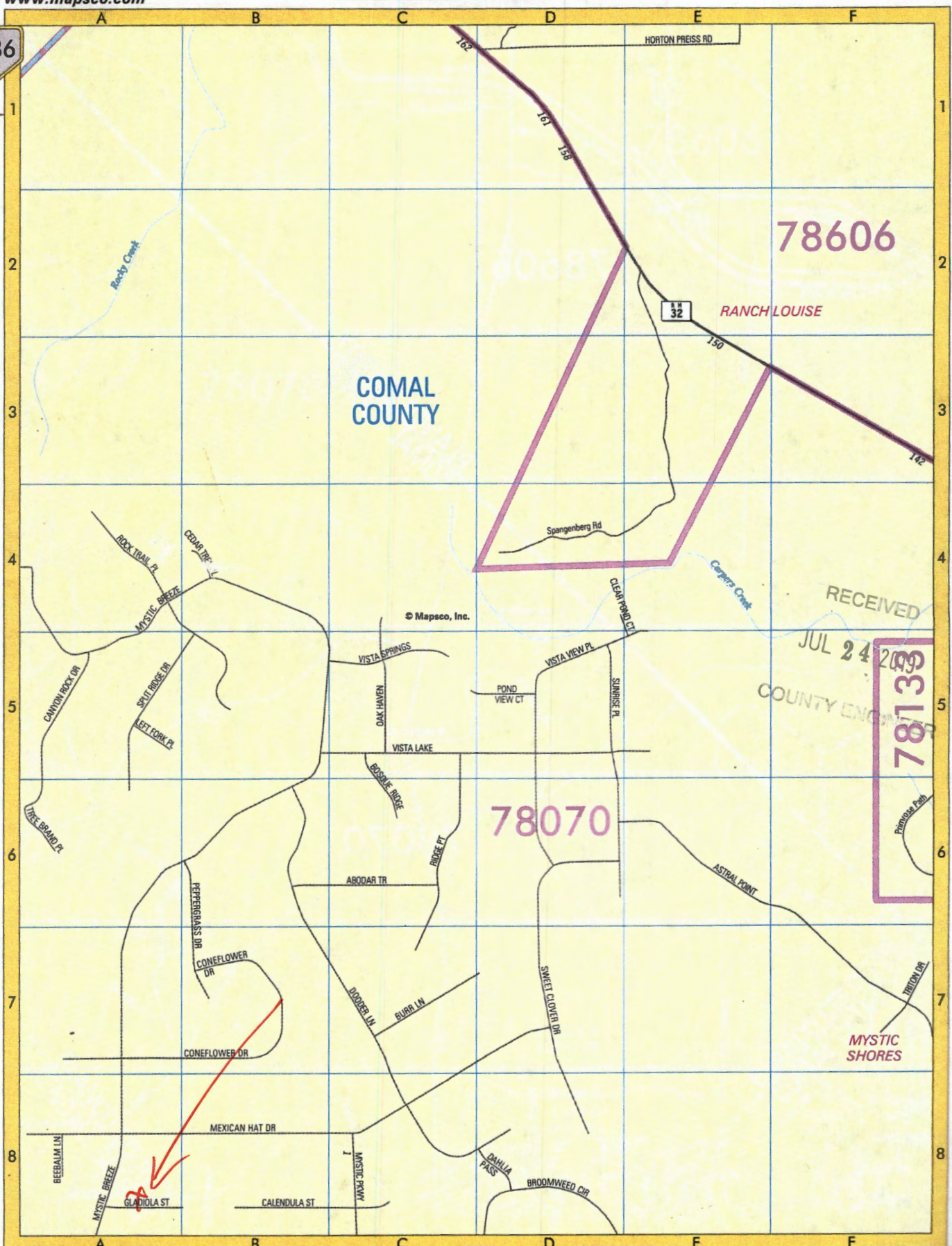
JUL 24 2019

F-2585

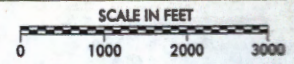
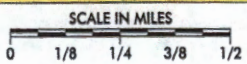
07/13/19

**TYPICAL PUMP TANK CONFIGURATION  
MAXX AIR M600 768 GAL PUMP TANK**

286



CONTINUED ON MAP 285

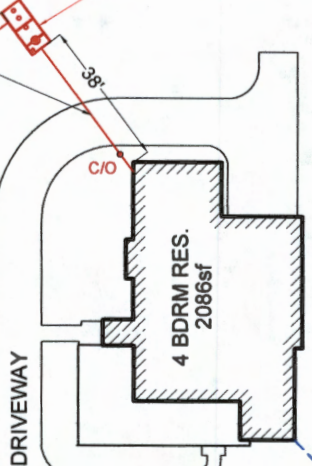


**VOID**

LOT 461

MAXX AIR M-600  
AEROBIC TREATMENT  
PLANT

SLEEVE SEPTIC  
LINE WITH  
SCH-40 WITHIN  
5' AND UNDER  
DRIVEWAY.



SPRAY AREA = 5654sf  
X = TEST HOLES

**VOID**

RECEIVED  
JUL 24 2019  
COUNTY ENGINEER

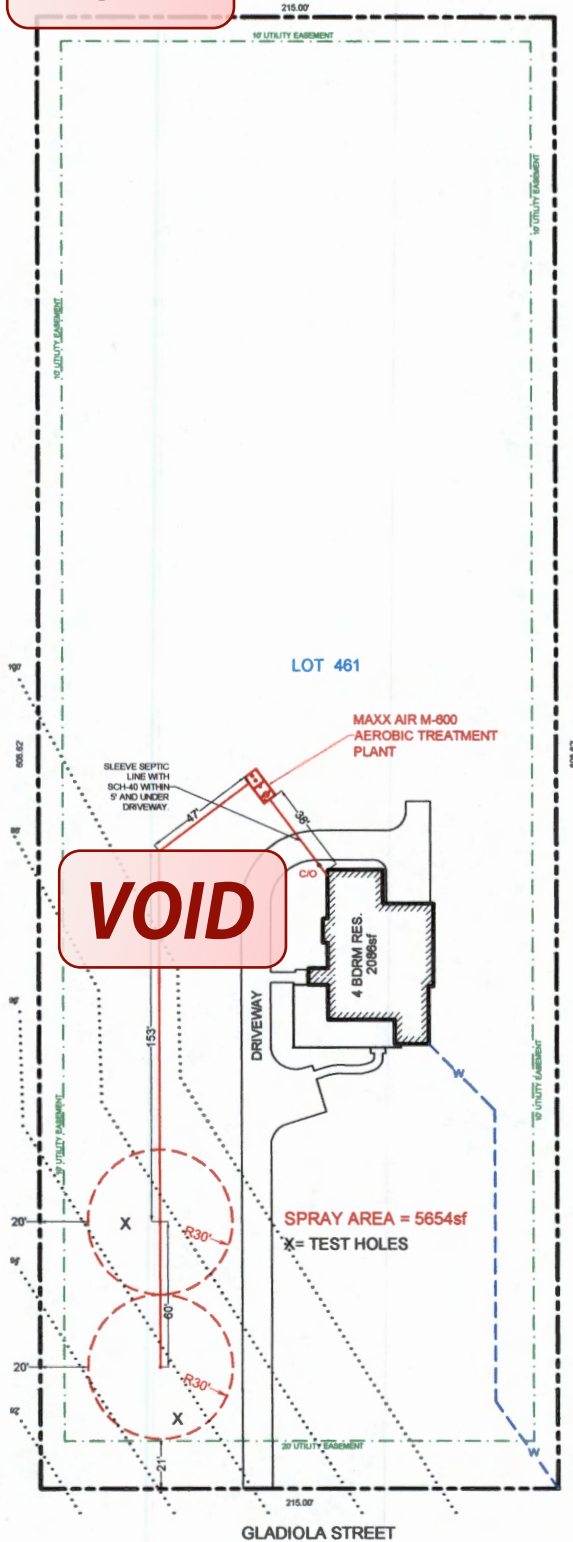
GLADIOLA STREET



OWNER: CORBY & LAUREN PETERSON		DRAWN BY: EJS III	
STREET ADDRESS: 143 GLADIOLA STREET			
LEGAL DESC: MYSTIC SHORES	UNIT/SECTION/PHASE: 4	BLOCK:	LOT: 461
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=50'	DATE: 7/15/2019	REVISED: 7/16/2019



**VOID**



**VOID**

RECEIVED  
JUL 24 2019  
COUNTY ENGINEER



OWNER: CORBY & LAUREN PETERSON		DRAWN BY: EJS III	
STREET ADDRESS: 143 GLADIOLA STREET			
LEGAL DESC: MYSTIC SHORES	UNIT/SECTION/PHASE: 4	BLOCK:	LOT: 461
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=80'	DATE: 7/15/2019	REVISED: 7/16/2019

CTOT  
19-402640-BV

**General Warranty Deed**

**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.

Date: March 15, 2019

Grantor: Willie Haigler and Wanda Diahann Haigler, husband and wife

Grantor's Mailing Address: 14802 Winston Fall Lane, Humble TX 77396

Grantee: **Corby Peterson and Lauren Peterson**, husband and wife

Grantee's Mailing Address: PO Box 353, Driftwood, TX 78619-4

Consideration: the sum of TEN DOLLARS (\$10.00) cash, and other good and valuable consideration

Property (including any improvements):

**Lot 461, Mystic Shores, Unit 4**, an Addition in Comal County, Texas, according to the Map or Plat thereof recorded in Volume 13, Page 393-397, Map and Plat Records of Comal County, Texas.

Reservations from Conveyance: None

Exceptions to Conveyance and Warranty:

This conveyance is made and accepted subject to all restrictions, encumbrances, easements, covenants, and conditions relating to the Property filed for record in Comal County, Texas.

Grantor, for the Consideration, and subject to the Reservations from 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 to Grantee and Grantee's successors and assigns forever. Grantor binds Grantor and Grantor's successors and assigns to warranty and forever defend all and singular the Property to Grantee and Grantee's 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.

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

RECEIVED  
JUL 24 2019  
COUNTY ENGINEER

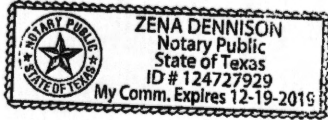


EXECUTED this 15 day of March, 2019.

Willie Haigler  
Willie Haigler  
Wanda Diahann Haigler  
Wanda Diahann Haigler

THE STATE OF Texas §  
COUNTY OF Harris §

Before me, a Notary Public, the foregoing instrument was acknowledged on 15 day of March, 2019 by Willie Haigler and Wanda Diahann Haigler who personally appeared before me, and who is known to me through TPLS to be the person(s) who executed it for the purposes and consideration expressed therein, and in the capacity stated.



[Signature]  
NOTARY PUBLIC, STATE OF  
Texas

AFTER RECORDING, RETURN TO:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PREPARED IN THE LAW OFFICE OF  
Shaddock & Associates, P. C.  
2400 N. Dallas Parkway, Ste. 560  
Plano, Texas 75093

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
03/18/2019 10:30:10 AM  
TERRI 2 Pages(s)  
201906008892

 Bobbie Koepf

**PS Septic Supply & Service**  
23011 FM 306  
Canyon Lake, TX 78133

**Phone: (830) 850-0080**  
**Fax: (830) 935-4932**

**To: Corby Peterson**  
143 Gladiola Street  
Spring Branch, TX 78070

Printed: 9/8/2020  
Site: 143 Gladiola Street  
Spring Branch, TX 78070

---

Permit #: <b>109453</b>	Customer ID: 1739
Agency: Comal County	Contract Dates: 1/21/2020 - 1/21/2023
County: Comal County	Scheduled Date: 9/21/2020
Mfg / Brand: - MAXX AIR	Inspection 2 of 9
Treatment Type: Aerobic	
Disposal: Surface Application	GPS Coordinates - Latitude: 29.951069 Longitude: -98.331585

---

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 9/4/2020**

**Entered By: \_**

**Method: Grab**

**Technician: Ryan Seidensticker**

**Maint. Provider: Ryan Seidensticker**

---

**Comments**  
No access

**Service Completed**

Insp ID #: 5734

**Provider: Christopher Ryan Seidensticker**  
**PS Septic Supply & Service**

**Technician: Christopher Ryan Seidensticker**  
**PS Septic Supply & Service**

License Info: MP0001708 Expires:

License Info: MP0001708 Expires: 9/1/2023

**PS Septic Supply & Service**  
**23011 FM 306**  
**Canyon Lake, TX 78133**

(830) 850-0080  
 Fax: (830) 935-4932

**Permit #: 109453**

**To: Corby Peterson**  
**143 Gladiola Street**  
**Spring Branch, TX 78070**

Tech: Not Assigned  
 Brand/Mfg.: MAXX AIR -  
 System S/N:  
 Aerator and S/N:

Contract: 1/21/2020 - 1/21/2023  
 Inspections per year: 3  
 Service Due: 5/21/2020  
 Alt Phone:  
 Warranty Ending:

Site: 143 Gladiola Street, Spring Branch  
 Agency: Comal County  
 County: Comal County  
 Subdivision: Mystic Shores

Installed:  
 Phone:  
 Cell:  
 Work:

Inspection Type: \_\_\_\_\_ Inspection # \_\_\_\_\_ of \_\_\_\_\_ for the contract year

Item	Operational	Inoperative	N/A
Aerator:	_____	_____	_____
Irrigation pump:	_____	_____	_____
Air compressor:	_____	_____	_____
Disinfection device:	_____	_____	_____
Chlorine supply:	_____	_____	_____
Spray field vegetation:	_____	_____	_____
Sprinkler / Drip backwash:	_____	_____	_____
Photocell Test:	_____	_____	_____
Autodialer:	_____	_____	_____
Water Meter Reading: _____ CFM: _____ PSI: _____			

Test Results and observations: (As Required)

Fecal Coliform: \_\_\_\_\_  
 Chlorine Residual: \_\_\_\_\_  
 Test Method: \_\_\_\_\_  
 BOD: \_\_\_\_\_  
 TSS: \_\_\_\_\_  
 Commercial Lab: \_\_\_\_\_  
 Date Submitted: \_\_\_\_\_

Repairs made: Y/N

Repairs and Comments:

*NO access due to gate NO code  
 or phone number*

Inspector: *[Signature]* Date: \_\_\_\_\_

Area: 10  
 GPS: 29.951069 -98.3315 ID = 1739

Printed: 6/1/2020

143 Gladiola Street, Spring Branch

**PS Septic Supply & Service**  
23011 FM 306  
Canyon Lake, TX 78133

**Phone: (830) 850-0080**  
**Fax: (830) 935-4932**

**To: Corby Peterson**  
143 Gladiola Street  
Spring Branch, TX 78070

Printed: 1/15/2021  
Site: 143 Gladiola Street  
Spring Branch, TX 78070

---

Permit #: **109453**

Agency: Comal County

County: Comal County

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Mystic Shores

Customer ID: 1739

Contract Dates: 1/21/2020 - 1/21/2023

Scheduled Date 1/21/2021

Inspection 3 of 9

GPS Coordinates - Latitude: 29.950327 Longitude: -98.331604

---

**Service Type: Scheduled Inspection**

**Visit Date: 1/14/2021**

**Method: Grab**

**Technician:** Ryan Seidensticker

**Maint. Provider:** Ryan Seidensticker

---

This counts as a type of "Scheduled Inspection"

**Entered By:** \_

**Comments**

No access. M.D

**Service Completed**

**Owner signature:** \_\_\_\_\_

Insp ID #: 7563

**Provider:** *Christopher Ryan Seidensticker*  
*PS Septic Supply & Service*

**Technician:** *Christopher Ryan Seidensticker*  
*PS Septic Supply & Service*

License Info: MP0001708 Expires:

License Info: MP0001708 Expires: 9/1/2023

**PS Septic Supply & Service**  
23011 FM 306  
Canyon Lake, TX 78133

**Phone: (830) 850-0080**  
**Fax: (830) 935-4932**

**To: Corby Peterson**  
143 Gladiola Street  
Spring Branch, TX 78070

Printed: 5/4/2021  
Site: 143 Gladiola Street  
Spring Branch, TX 78070

---

Permit #: **109453**

Agency: Comal County

County: Comal County

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Mystic Shores

Customer ID: 1739

Contract Dates: 1/21/2020 - 1/21/2023

Scheduled Date 5/21/2021

GPS Coordinates - Latitude: 29.950327 Longitude: -98.331604

---

**Service Type: Repair**

**Visit Date: 5/3/2021**

**Method: Grab**

**Technician:** Ryan Seidensticker

**Maint. Provider:** Ryan Seidensticker

---

**Entered By:** \_

**Comments**

No access - sent letter

**Service Completed**

**Owner signature:** \_\_\_\_\_

Insp ID #:9423

**Provider:** *Christopher Ryan Seidensticker*  
*PS Septic Supply & Service*

License Info: MP0001708 Expires:

**Technician:** *Christopher Ryan Seidensticker*  
*PS Septic Supply & Service*

License Info: MP0001708 Expires: 9/1/2023

**PS Septic Supply & Service**  
23011 FM 306  
Canyon Lake, TX 78133

**Phone: (830) 850-0080**  
**Fax: (830) 935-4932**

**To: Corby Peterson**  
143 Gladiola Street  
Spring Branch, TX 78070

Printed: 9/17/2021  
Site: 143 Gladiola Street  
Spring Branch, TX 78070

Permit #: <b>109453</b>	Customer ID: 1739
Agency: Comal County	Contract Dates: 1/21/2020 - 1/21/2023
County: Comal County	Scheduled Date 9/21/2021
Mfg / Brand: - MAXX AIR	Inspection 4 of 9
Treatment Type: Aerobic	
Disposal: Surface Application	GPS Coordinates - Latitude: 29.950327 Longitude: -98.331604

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 9/16/2021**

**Entered By: Danielle Jordan**

**Method: Grab**

**Technician: Nick Zigalo**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Sludge Levels**

**Filters: Operational**

**For Tank 1: 21**

**Irrigation Pumps: Operational**

**For Tank 2: 24**

**Disinfection Device: Operational**

**For Tank 3: 2**

**Chlorine Supply: Operational**

**Chlorine Residual: 0.02**

**Tank Lid / Riser: Secured**

**Sprinkler Drip Backwash: Good**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Color: Good**

**Odor: Good**

**Alarm: Operational**

**Comments**

**Service Completed**

Scum on pretreatment 6" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

**Owner signature: \_\_\_\_\_**

Insp ID #: 11885

**Provider: Christopher Ryan Seidensticker**  
**PS Septic Supply & Service**

License Info: MP0001708 Expires:

License Info: MT0002016 Expires: 12/31/2023

**PS Septic Supply & Service**  
**23011 FM 306**  
**Canyon Lake, TX 78133**

**Phone: (830) 850-0080**  
**Fax: (830) 935-4932**

**To: Corby Peterson**  
**143 Gladiola Street**  
**Spring Branch, TX 78070**

Printed: 1/28/2022  
Site: 143 Gladiola Street  
Spring Branch, TX 78070

---

Permit #: **109453** Customer ID: 1739  
Agency: Comal County Contract Dates: 1/21/2020 - 1/21/2023  
County: Comal County Sub: Mystic Shores Scheduled Date: 1/21/2022 Inspection 5 of 9  
Mfg / Brand: - MAXX AIR  
Treatment Type: Aerobic  
Disposal: Surface Application GPS Coordinates - Latitude: 29.950327 Longitude: -98.331604

---

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 1/28/2022**

**Entered By: \_**

**Method: Grab**

**Technician: Not Assigned**

**Maint. Provider: Ryan Seidensticker**

---

**Aerators: Operational**

**Sludge Levels**

**Filters: Operational**

**For Tank 1: 14**

**Irrigation Pumps: Operational**

**For Tank 2: 10**

**Disinfection Device: Operational**

**For Tank 3: 6**

**Chlorine Supply: Operational**

**Chlorine Residual: .02**

**Tank Lid / Riser: Secured**

**Insp. Port / Plug: Secured**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Alarm: Operational**

**Comments**

**Service Completed**

Scum on pretreatment 13" system needs pumping due to sludge and scum buildup - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving.

Insp ID #:14896

**Provider: *Christopher Ryan Seidensticker***  
***PS Septic Supply & Service***

License Info: MP0001708 Expires:

**PS Septic Supply & Service**  
23011 FM 306  
Canyon Lake, TX 78133

**Phone: (830) 850-0080**  
**Fax: (830) 935-4932**

**To: Corby & Lauren Peterson**  
143 Gladiola Street  
Spring Branch, TX 78070

Printed:5/25/2022  
Site: 143 Gladiola Street  
Spring Branch, TX 78070  
(210) 527-4546

---

Permit #: **109453** Customer ID: 1739  
Agency: Comal County Contract Dates: 1/21/2020 - 1/21/2023  
County: Comal County Sub: Mystic Shores Scheduled Date: 9/21/2022 Inspection 7 of 9  
Mfg / Brand: - MAXX AIR  
Treatment Type: Aerobic  
Disposal: Surface Application GPS Coordinates - Latitude: 29.950327 Longitude: -98.331604

---

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 5/23/2022**

**Entered By: Michelle Irvin**

**Method: Grab**

**Technician: Chris Zigalo**

**Maint. Provider: Ryan Seidensticker**

---

**Aerators: Operational**  
**Filters: Operational**  
**Irrigation Pumps: Operational**  
**Disinfection Device: Operational**  
**Chlorine Supply: Operational**  
**Chlorine Residual: .1**

**Sludge Levels**  
**For Tank 1: 12**  
**For Tank 2: 2**  
**For Tank 3: 1**

**Tank Lid / Riser: Secured**

**Sprinkler Drip Backwash: Good**

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

**Color: Good**  
**Odor: Good**

**Alarm: Operational**

**Comments**

Scum = 3" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

**Service Completed**

Insp ID #:17986

**Provider: *Christopher Ryan Seidensticker***  
***PS Septic Supply & Service***

License Info: MP0001708 Expires:

License Info: MT001878 Expires: 7/31/2023



**PS Septic Supply & Service**  
**23011 FM 306**  
**Canyon Lake, TX 78133**

Phone: (830) 850-0080  
Fax: (830) 935-4932

Printed: 10/4/2022      Insp ID #: 21405

Permit #: **109453**

**To: Corby & Lauren Peterson**  
**143 Gladiola Street**  
**Spring Branch, TX 78070**

Main Phone: (210) 527-4546  
Work:  
Cell Phone:  
Alt Cell:

Agency: Comal County  
County: Comal County  
Mfg / Brand: - MAXX AIR  
Treatment Type: Aerobic  
Disposal: Surface Application

Sub: Mystic Shores

Customer ID: 1739  
Contract Dates: 1/21/2020 - 1/21/2023

Scheduled Date: 9/21/2022      Inspection 8 of 9

Installed: 1/21/2020  
Warranty End: 1/21/2023

GPS Coordinates: Latitude: 29.950327      Longitude: -98.331604

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"  
**Entered By: Nicole Loria**

**Visit Date: 10/4/2022**

**Method: Grab**

**Technician: Not Assigned**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Filters: Operational**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: 1.4**

**Sludge Levels**

**For Tank 1: 1**

**For Tank 2: N/A**

**For Tank 3: 20**

**For Tank 4: 6**

**Electric Circuits: Operational**

**Distribution System: Operational**

**Sprayfield Veg: Operational**

**Tank Lid / Riser: Secured**

**Insp. Port / Plug: Secured**

**Alarm: Operational**

**Comments**

**Service Completed**

- Scum on pretreatment 6 - Installed bolt on switch-replaced on broken spray head - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving.

Site: 143 Gladiola Street, Spring Branch, TX 78070

**Provider: *Christopher Ryan Seidensticker***  
***PS Septic Supply & Service***

License Info: MP0001708 Expires:

**PS Septic Supply & Service**  
**23011 FM 306**  
**Canyon Lake, TX 78133**

Phone: (830) 850-0080  
Fax: (830) 935-4932

Printed: 2/9/2023

Insp ID #: 25420

Permit #: **109453**

**To: Corby & Lauren Peterson**  
**143 Gladiola Street**  
**Spring Branch, TX 78070**

Main Phone: (210) 527-4546

Work:

Cell Phone:

Alt Cell:

Customer ID: 1739

Contract Dates: 1/21/2020 - 1/21/2023

Scheduled Date: 1/21/2023

Inspection 9 of 9

Installed: 1/21/2020

Warranty End: 1/21/2023

Agency: Comal County

County: Comal County

Mfg / Brand: - MAXX AIR

Sub: Mystic Shores

Treatment Type: Aerobic

Disposal: Surface Application

GPS Coordinates: Latitude: 29.950327 Longitude: -98.331604

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Entered By: Ashley Spitzenberger**

**Visit Date: 2/8/2023**

Copy emailed to Customer

Customer Emailed: 2/9/2023

**Method: Grab**

**Technician: Mike Hobbs**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Sludge Levels**

**Filters: Operational**

**Irrigation Pumps: Operational**

**For Tank 2: NA**

**Disinfection Device: Operational**

**For Tank 3: 12**

**Chlorine Supply: Operational**

**Chlorine Residual: .08**

**Electric Circuits: Operational**

**Tank Lid / Riser: Secured**

**Distribution System: Operational**

**Insp. Port / Plug: Secured**

**Sprayfield Veg: Operational**

**Alarm: Operational**

**Service Completed**

**Comments**

- Scum on pretreatment 6 - Service contract expired on 01/21/23. Please call office to renew - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. - Copy emailed to the customer on 2/9/2023.

Site: 143 Gladiola Street, Spring Branch, TX 78070

**Provider: Christopher Ryan Seidensticker**  
**PS Septic Supply & Service**

License Info: MP0001708 Expires: