



# COMAL COUNTY

## ENGINEER'S OFFICE

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

Issued This Date: 01/28/2020 Permit Number: 110136

Location Description: 20 SUN VALLEY DR  
SPRING BRANCH, TX 78070  
Subdivision: Sun Valley Village  
Unit:  
Lot: 51  
Block:  
Acreage:

Type of System: Aerobic  
Surface Irrigation

Issued to: Michael Rutherford & Christina Rutherford

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

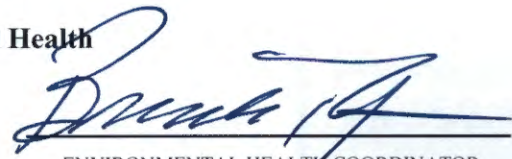
may require a new permit. **It is the responsibility of the owner to apply for a new permit, if applicable.**

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

  
OS8497  
ENVIRONMENTAL HEALTH INSPECTOR

  
ENVIRONMENTAL HEALTH COORDINATOR

OS0007722

**RECEIVED**

By Brenda Ritzen at 3:46 pm, Nov 06, 2024

3/08



202406033589 11/04/2024 01:15:11 PM 1/3

**AFFIDAVIT TO THE PUBLIC**

THE COUNTY OF COMAL  
STATE OF TEXAS

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_  
Michael and Christina Rutherford, who after being duly sworn, upon oath  
states that he/she is the owner of record of those certain tracts or parcels of land lying and  
being situated in Comal County, Texas, and being more particularly described as follows:

Lot 51 Large Part 3.277 acres See attached survey  
Lot 51 Small Part .58 acres

The undersigned further states that the on-site sewage facility for the referenced properties  
crosses the boundary between the described properties. These properties cannot be sold  
separately and must be sold as one. Any buyer or transferee is hereby notified of this  
requirement.

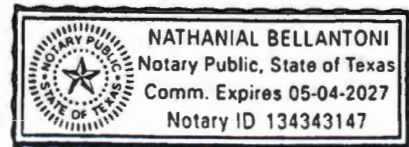
WITNESS BY HAND(S) ON THE 1 DAY OF November  
20~~24~~

[Signature] Michael Rutherford  
[Signature] Christina Rutherford  
Owner(s) signature(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS  
DAY OF November 1, 20~~24~~

[Signature]  
Notary Public, State of Texas

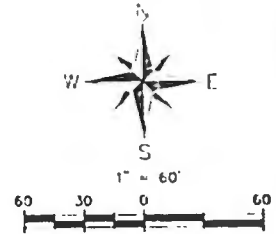
Notary's Printed Name: Nathaniel Bellantoni  
My Commission Expires: 05-04-2027



- Instructions:
- 1) Document must be completed and Property Owner(s) signature(s) notarized,
  - 2) Record completed document in the Comal County Clerk's Office,
  - 3) Submit copy of recorded document to the Comal County Office of Environmental Health

SURVEY SHOWING A 0.58 ACRE TRACT OF LAND OUT OF LOT 51, SUN VALLEY VILLAGE  
RECORDED IN VOLUME 4, PAGES 14-15, MAP & PLAT RECORDS, COMAL COUNTY, TEXAS

**RECEIVED**  
By Brenda Ritzen at 3:46 pm, Nov 06, 2024

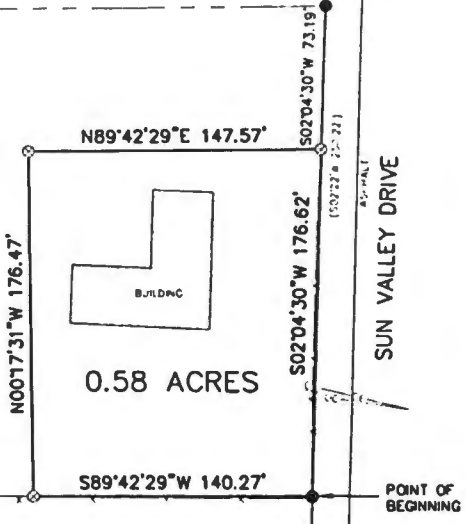


LOT 50

LOT 51  
(1.27 ACRES)

LOT 52

PER COMAL CAD  
CRAIG R. EIBEL, ET AL  
P.O. 74777



N89°42'29"E 419.45'  
(60' ± 5.8" ± 5.8')

**GENERAL SURVEY NOTES**

- 1) THIS SURVEY WAS PERFORMED AT THE REQUEST OF LAYLA RUTHERFORD FOR A TRUST. IF OWNERSHIP CHANGES, THE TRACT SHOWN HEREON MAY NOT MEET THE THEN CURRENT COMAL COUNTY SUBDIVISION REQUIREMENTS. THIS SURVEY WAS NOT PRESENTED TO ANY GOVERNMENTAL AGENCY OR STAFF FOR THEIR REVIEW REGARDING CONFORMANCE TO COMAL COUNTY RULES AND REGULATIONS REGARDING PROPERTY DIMENSIONS.
- 2) BASIS OF BEARING: TEXAS STATE PLANE COORDINATE SYSTEM, SOUTH CENTRAL ZONE, NAD83.
- 3) THIS SURVEY WAS DONE WITHOUT THE BENEFIT OF A TITLE COMMITMENT. THEREFORE ALL SETBACKS, EASEMENTS, COVENANTS, ENCUMBRANCES, ZONING OR LAND USE REGULATIONS MAY NOT BE SHOWN HEREON. THE SURVEYOR DID NOT COMPLETE AN ABSTRACT OF TITLE.
- 4) ONLY APPARENT UTILITIES WERE LOCATED, SHOWN AND IDENTIFIED TO THE BEST OF THE SURVEYOR'S KNOWLEDGE. NO ATTEMPT HAS BEEN MADE AS PART OF THIS SURVEY TO SHOW THE EXISTENCE, SIZE, DEPTH, CONDITION OR LOCATION OF ANY UNDERGROUND UTILITIES. FOR INFORMATION REGARDING UTILITIES PLEASE CONTACT THE APPROPRIATE AGENCY REGULATION VALVES AND SPRINKLER HEADS, IF ANY, NOT LOCATED BY THIS SURVEY OR SHOWN HEREON.
- 5) ADJOINERS ARE SHOWN FOR INFORMATIONAL PURPOSES ONLY.
- 6) A METES AND BOUNDS DESCRIPTION WAS PREPARED BY SEPARATE DOCUMENT.

- LEGEND**
- ( ) MOUND CALL PER PLAT
  - SET 1/2" IRON ROD W/ A YELLOW "WCR" PLASTIC CAP
  - FOUND 1/2" IRON ROD (UNLESS OTHERWISE NOTED)
  - ⊙ CALCULATED POINT
  - ⊘ POWER POLE
  - X — WIRE FENCE
  - CH — OVERHEAD ELECTRIC
  - CC — OVERHEAD COMMUNICATION

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE ON THE GROUND AND THAT THIS PLAT COMPLETELY REPRESENTS THE FACTS FOUND AT THE TIME OF THIS SURVEY.

*Christopher Jurica*  
11/03/2019  
CHRISTOPHER JURICA  
REGISTERED PROFESSIONAL LAND SURVEYOR 65344  
NPL56344@MAIL.COM 512-618-7672



**WCR**  
LAND SURVEYING  
P.O. BOX 481 D. ANCO, TX 78605  
512 618-7672 NPL56344@MAIL.COM  
TSPLS FIRM #10194155

JOB NO 1276-19	DATE 10/24/2019
DRAWN BY CAJ	CHECKED BY CAJ
SHEET 1 OF 1	

**RECEIVED**

By Brenda Ritzen at 3:46 pm, Nov 06, 2024



This page has been added to comply with the statutory requirement that the clerk shall stamp the recording information at the bottom of the last page.

This page becomes part of the document identified by the file clerk number affixed on preceding pages.

Filed and Recorded  
Official Public Records  
Bobbie Koepp, County Clerk  
Comal County, Texas  
11/04/2024 01:15:11 PM  
LAURA 3 Page(s)  
202406033589



*Bobbie Koepp*

**RECEIVED**  
By Brenda Ritzen at 3:47 pm, Nov 06, 2024

# Gerard Rickhoff

20130470201

COUNTY CLERK



BEXAR COUNTY

## ASSUMED NAME CERTIFICATE

FOR AN UNINCORPORATED BUSINESS OR PROFESSIONAL NAME OTHER THAN A LIMITED PARTNERSHIP, REGISTERED LIMITED LIABILITY COMPANY

PURSUANT TO THE PROVISIONS OF CHAPTER 71, BUSINESS AND COMMERCE CODE OF THE STATE OF TEXAS, THE UNDERSIGNED CERTIFIES THE FOLLOWING:

<u>ASSUMED NAME</u>	<u>BUSINESS ADDRESS</u>
<u>QUICK PERFORMANCE CYCLES</u>	<u>14590 Toepperwein</u> <u>San Antonio, Tx 78233</u>

BUSINESS OR PROFESSIONAL SERVICE IS BEING/WILL BE CONDUCTED/RENDERED AS A:

- A.  PROPRIETORSHIP
- B.  SOLE PRACTITIONER
- C.  PARTNERSHIP
- D.  REAL ESTATE INVESTMENT TRUST
- E.  JOINT STOCK COMPANY
- F.  OTHER FORM OF UNINCORPORATED BUSINESS OR PROFESSIONAL ASSOCIATION OR ENTITY OTHER THAN LIMITED PARTNERSHIP, LIMITED LIABILITY COMPANY, OR REGISTERED LIMITED LIABILITY PARTNERSHIP. (SPECIFY): \_\_\_\_\_

<u>REGISTRANT'S NAME(S)</u>	<u>RESIDENCE ADDRESS(ES)</u>
<u>Michael Alan Rutherford</u>	<u>same as above</u>
_____	_____
_____	_____

THE PERIOD, NOT TO EXCEED TEN YEARS, DURING WHICH THE ASSUMED NAME WILL BE USED, IS FROM THE DATE FILED WITH THE COUNTY CLERK.

IN TESTIMONY WHERE OF Michael Alan Rutherford HAVE HEREUNTO SET MY HAND(S) THIS THE AUG 02 2013 DAY OF AUGUST, AS DEPUTY CLERK OF THE COUNTY OF BEXAR, TEXAS.

Michael Alan Rutherford  
Michael Alan Rutherford

SIGNATURES

AUG 02 2013  
GERARD RICKHOFF  
COUNTY CLERK  
BEXAR COUNTY, TEXAS

STATE OF TEXAS §  
COUNTY OF BEXAR §

BEFORE ME THE UNDERSIGNED AUTHORITY, ON THIS DAY PERSONALLY APPEARED Michael Alan Rutherford

KNOWN TO ME TO BE THE PERSON(S) WHO'S NAME(S) IS/ARE SUBSCRIBED TO THE FOREGOING CERTIFICATE AND ACKNOWLEDGE TO ME THAT HE EXECUTED THE SAME FOR THE PURPOSE AND CONSIDERATION THEREIN EXPRESSED.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, THIS THE AUG 02 2013 DAY OF AUGUST, A.D. 2013

**RECEIVED**

By Brenda Ritzen at 3:47 pm, Nov 06, 2024

Form 401

Secretary of State  
P.O. Box 13697  
Austin, TX 78711-3697  
FAX: 512/463-5709



Filed in the Office of the  
Secretary of State of Texas  
Filing #: 801848743 07/29/2021  
Document #: 1068740870003  
Image Generated Electronically  
for Web Filing

Filing Fee: See Instructions

**Statement of Change of  
Registered Office/Agent**

**Entity Information**

The name of the entity is:

**Quick Performance Cycles LLC**

The file number issued to the entity by the secretary of state is: **801848743**

The registered agent and registered office of the entity as currently shown on the records of the secretary of state are:

**MICHAEL RUTHERFORD**

**14590 TOEPPERWEIN RD, SAN ANTONIO, TX, USA 78233**

**Change to Registered Agent/Registered Office**

The following changes are made to the registered agent and/or office information of the named entity:

**Registered Agent Change**

A. The new registered agent is an organization by the name of:

OR

B. The new registered agent is an individual resident of the state whose name is:

**CHRISTINA RUTHERFORD**

**Registered Office Change**

C. The business address of the registered agent and the registered office address is changed to:

**20 SUN VALLEY DR, SPRING BRANCH, TX, USA 78070**

The street address of the registered office as stated in this instrument is the same as the registered agent's business address.

**Consent of Registered Agent**

A. A copy of the consent of registered agent is attached.

B. The consent of the registered agent is maintained by the entity.

**Statement of Approval**

The change specified in this statement has been authorized by the entity in the manner required by the BOC or in the manner required by the law governing the filing entity, as applicable.

**Effectiveness of Filing**

A. This document becomes effective when the document is filed by the secretary of state.

B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of its filing by the secretary of state. The delayed effective date is:

**Execution**

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Date: **July 29, 2021**

**MICHAEL RUTHERFORD**

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Paul Swoyer OSSF Installer #: OS0026238

1st Inspection Date: 01-21-2020 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: 1/28/20

Inspector Name: B. Olvera Inspector Name: \_\_\_\_\_ Inspector Name: Mike T.

Permit#: 110136 Address: 20 Sun Valley Dr. / Sun Valley Village

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	01-21-20	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)		01-21-20		1/28/20
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards		285.91(10) 285.30(b)(4) 285.31(d)				
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)		285.32(a)(1)				
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot		285.32(a)(3)				
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)		285.32(a)(5)				
6	PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(G)285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(A) 285.32(b)(1)(E)(ii)(III) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(I)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

01-21-2020 BMO

MT-1/28/20

Tank Set Level No Leaks  
Operational  
Ready for Cover  
Remove brush from last  
spray area

*Covered &  
Brush Removed.*

**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	01-21-20	285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)		01-21-20		1/28/20
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			??? 800			1/28/20
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number			??? Maxx Aire			
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				



**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
19	DISPOSAL SYSTEM Drip Irrigation		285.33(c)(3)(A)-(F)				
20	DISPOSAL SYSTEM Soil Substitution		285.33(d)(4)				
21	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(3) 285.33(a)(1) 285.33(a)(2)				
22	DISPOSAL SYSTEM Gravelless Pipe		285.33(a)(3) 285.33(a)(2) 285.33(a)(4) 285.33(a)(1)				
23	DISPOSAL SYSTEM Mound		285.33(a)(3) 285.33(a)(1) 285.33(a)(2) 285.33(a)(4)				
24	DISPOSAL SYSTEM Other (describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
25	DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC						
26	DRAINFIELD Area Installed						
27	DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
28	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media						
29	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
30	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.)		285.33(c)(2)				
31	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches		285.33(d)(1)(C)(i)				

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field ( 1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom ) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes ( 3/16 - 1/4" dia. Hole Size ) 5 ft. Apart		285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3)(B) 285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)				
33	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.	01-21-20	285.32(c)(1)		01-21-20		1/28/20
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						
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti-Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
37	PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions						
38	PUMP TANK Secondary restraint system provided						
39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	01-21-20	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)		01-21-20		1/28/20
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		285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed	✓					
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: Paul Swoyer OSSF Installer #: OS0026238

1st Inspection Date: 01-21-2020 2nd Inspection Date: \_\_\_\_\_ 3rd Inspection Date: \_\_\_\_\_

Inspector Name: B.Olvera Inspector Name: \_\_\_\_\_ Inspector Name: \_\_\_\_\_

Permit#: 110136 Address: 20 Sun Valley Dr. / Sun Valley Village

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01-21-2020 BMO

Tank Set Level No Leaks  
Operational  
Ready for Cover  
Remove brush from last  
spray area

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9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used	01-21-20	285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)		01-21-20		
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**Comal County Environmental Health  
OSSF Inspection Sheet**

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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.	01-21-20	285.32(c)(1)		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						
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
37	PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions						
38	PUMP TANK Secondary restraint system provided						
39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	01-21-20	285.33(d)(2)(G)(iii)(I)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)		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		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

ENGINEER'S OFFICE

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

Permit Number: 110136  
Issued This Date: 12/19/2019  
This permit is hereby given to: Michael Rutherford & Christina Rutherford

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

20 SUN VALLEY DR  
SPRING BRANCH, TX 78070

Subdivision: Sun Valley Village  
Unit:  
Lot: 51  
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.

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

Date 11-19-19

Permit # 110136

Owner Name	<u>MICHAEL RUTHERFORD &amp; CHRISTINA RUTHERFORD</u>	Agent Name	<u>GREG W. JOHNSON, P.E.</u>
Mailing Address	<u>c/o 23011 FM 306</u>	Agent Address	<u>170 Hollow Oak</u>
City, State, Zip	<u>Canyon Lake, TX 78133</u>	City, State, Zip	<u>New Braunfels, TX 78132</u>
Phone #	<u>830-935-4936</u>	Phone #	<u>830-905-2778</u>
Email	<u>katelyn@paulswoyerseptics.com</u>	Email	<u>gregjohnsonpe@yahoo.com</u>

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

Subdivision Name SUN VALLEY VILLAGE Unit \_\_\_\_\_ Lot 51 Block \_\_\_\_\_  
 Acreage/Legal \_\_\_\_\_  
 Street Name/Address 20 SUN VALLEY DRIVE City SPRING BRANCH Zip 78070

**Type of Development:**

Single Family Residential

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

Number of Bedrooms \_\_\_\_\_

Indicate Sq Ft of Living Area \_\_\_\_\_

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 MOTORCYCLE REPAIR SHOP

Offices, Factories, Churches, Schools, Parks, Etc. - Indicate Number Of Occupants 3

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: \$ \$102,000 (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.

*Ma Kelly*  
 Signature of Owner

11-19-19  
 Date

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\*\*\* 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 M800 Absorption/Application Area (Sq Ft) 8482

Gallons Per Day (As Per TCEQ Table III) 480 (DESIGN RATE)

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

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

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

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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 [ ] 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 December 10, 2019

**AFFIDAVIT**

THE COUNTY OF COMAL  
STATE OF TEXAS



201906045738 12/18/2019 11:53:36 AM 1/1

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.

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**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):**

UNIT/PHASE/SECTION \_\_\_\_\_ BLOCK 51 LOT \_\_\_\_\_ SUN VALLEY VILLAGE \_\_\_\_\_ SUBDIVISION

IF NOT IN SUBDIVISION: 3.2 ACREAGE \_\_\_\_\_ SURVEY

The property is owned by **(insert owner's full name):** MICHAEL RUTHERFORD & CHRISTINA RUTHERFORD

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 21 DAY OF November, 2019

X Michael Rutherford

MICHAEL RUTHERFORD

X Christina Rutherford

CHRISTINA RUTHERFORD

Owner(s) signature(s)

Owner (s) Printed name (s)

Michael + Christina Rutherford SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 21 DAY OF

November, 2019

[Signature]  
Notary Public Signature



(Notary Seal Here)

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
12/18/2019 11:53:36 AM  
TERRI 1 Page(s)  
201906045738

URPOSES ONLY



Bobbie Koepf



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

MP#0001708

CHRISTOPHER RYAN SEIDENSTICKER

**PROPERTY LEGAL DESCRIPTION:**

SUN VALLEY VILLAGE, LOT 51

**Customer:** MICHAEL RUTHERFORD & CHRISTINA RUTHERFORD

**Site Address:** 20 SUN VALLEY DRIVE

**City/State:** SPRING BRANCH, TEXAS **Zip:** 78070

**County:** COMAL **Permit#:**

**Phone Number:** 210-279-8205

**E-mail:** layla1459@gmail.com

**I. General:** This On-Site Sewage Facility Service Agreement (hereinafter referred to as "Agreement") is entered into by and between MICHAEL RUTHERFORD & CHRISTINA RUTHERFORD, (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.

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

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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 components 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: MR CR

Contractor: PS

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**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.

**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:

M. Q. CR

Contractor:

KS

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**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.

Client:

Contractor:

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

Date Soil Survey Performed: December 09, 2019

Site Location: SUN VALLEY VILLAGE, LOT 51

Proposed Excavation Depth: N/A

**Requirements:**

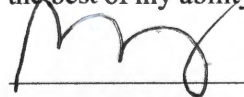
At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil boring or dug pits must be shown on the site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation 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 @ 12"	BROWN	
1							12"
2							
3							
4							
5							

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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

12/09/19  
\_\_\_\_\_  
Date



OSSF SOIL EVALUATION REPORT INFORMATION

#110136

Date: December 10, 2019

**Applicant Information:**

Name: MICHAEL & CHRISTINA RUTHERFORD  
Address: c/o 23011 F.M. 306  
City: CANYON LAKE State: TEXAS  
Zip Code: 78133 Phone: (830) 935-4936

**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

**REVISED**  
8:10 am, Dec 19, 2019

**Property Location:**

Lot 51 Unit      Blk      Subd. SUN VALLEY VILLAGE  
Street Address: 20 SUN VALLEY 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: 4 %

Presence of 100 yr. Flood Zone: YES      NO X  
Existing or proposed water well in nearby area. YES X NO      >100' (EXISTING)  
Presence of adjacent ponds, streams, water impoundments YES      NO X  
Presence of upper water shed YES      NO X  
Organized sewage service available to lot YES      NO X

**Design Calculations for Aerobic Treatment with Spray Irrigation:**

Commercial

Q =      GPD MOTORCYCLE SHOP with 3 EMPLOYEES @ 12 GPD EACH = 36 GPD USING 480 GPD

Residential Water conserving fixtures to be utilized? Yes X No     

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

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

Q = (     +1)\*75-(20%)= 480

Trash Tank Size 431 Gal.

TCEQ Approved Aerobic Plant Size 800 G.P.D.

Req'd Application Area = Q/Ri = 480 / 0.064 = 7500 sq. ft.

Application Area Utilized = 8482 sq. ft.

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

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

Pump Tank Size = 854 Gal. 16.1 Gal/inch.

Reserve Requirement = 160 Gal. 1/3 day flow.

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

With Chlorinator NSF/TCEQ APPROVED

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

Two way cleanout

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

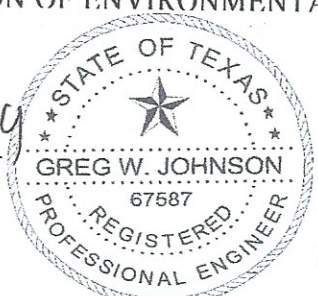
1" Sch-40 PVC discharge manifold

APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

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

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

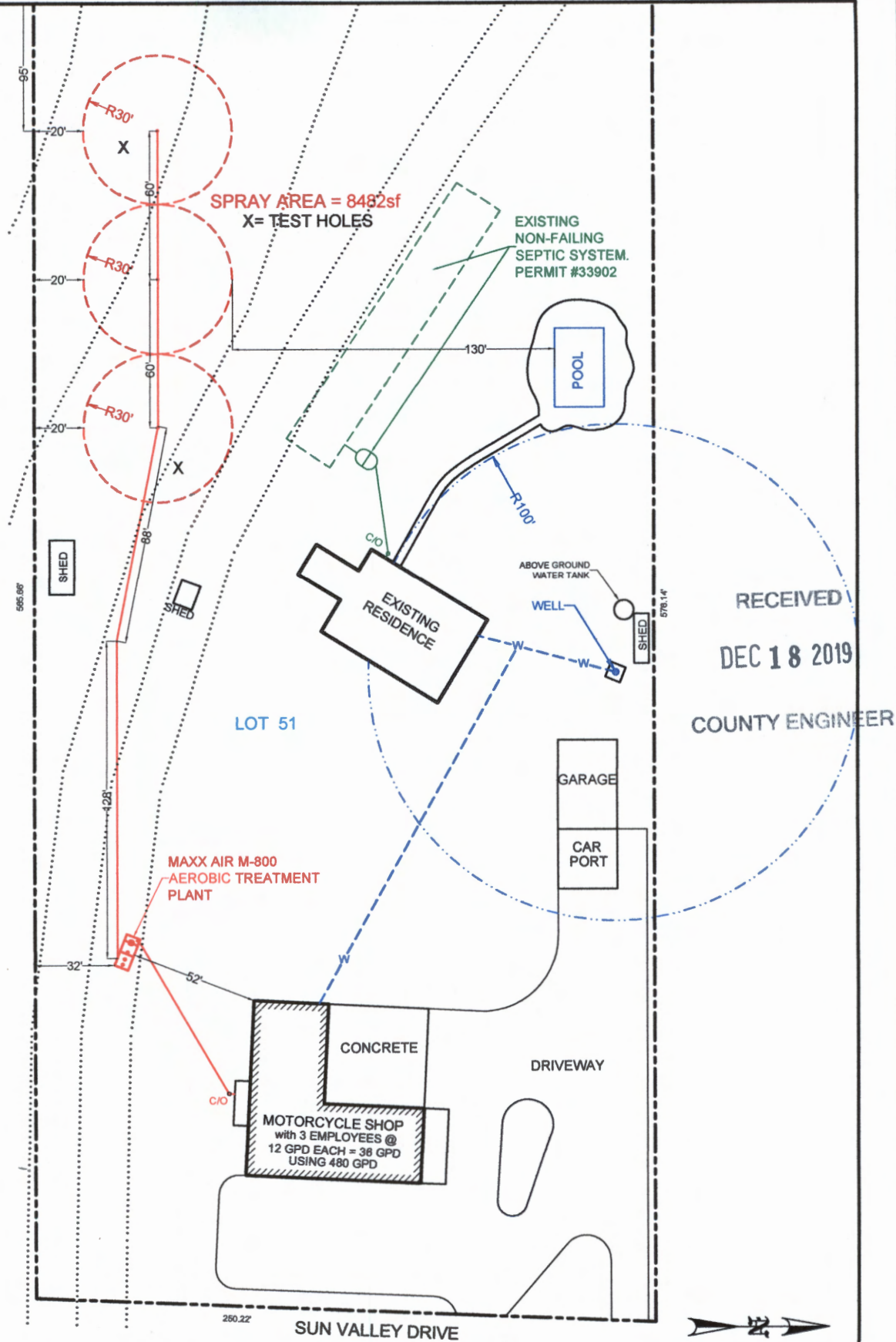
12/10/19  
DATE



FIRM #2585

\*Design includes  
Doubling of field  
and treatment.

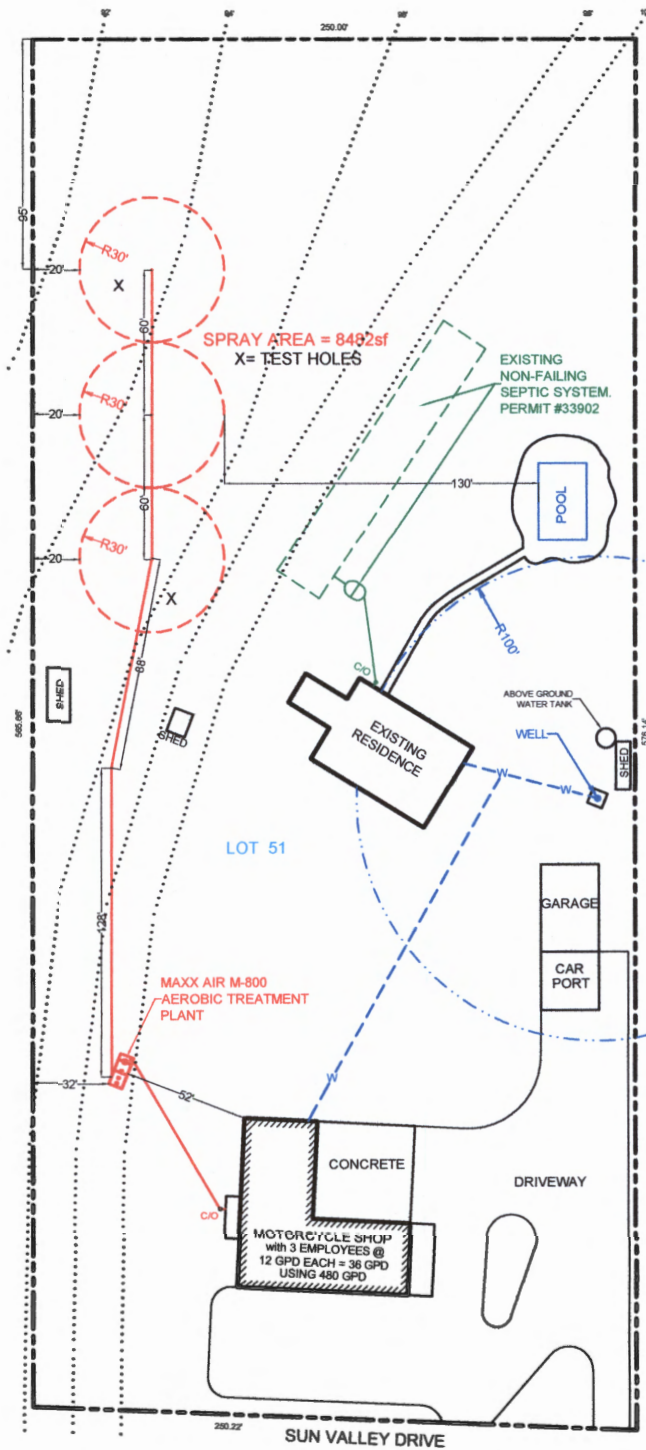
# #110136



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 DEC 18 2019  
 COUNTY ENGINEER



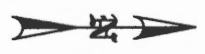
OWNER: MICHAEL & CHRISTINA RUTHERFORD		DRAWN BY: EJS III	
STREET ADDRESS: 20 SUN VALLEY DRIVE			
LEGAL DESC: SUN VALLEY VILLAGE	UNIT/SECTION/PHASE:	BLOCK:	LOT: 51
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1"=60'	DATE: 12/10/2019	REVISED:



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COUNTY ENGINEER



OWNER: MICHAEL & CHRISTINA RUTHERFORD		DRAWN BY: EJS III	
STREET ADDRESS: 20 SUN VALLEY DRIVE			
LEGAL DESC: SUN VALLEY VILLAGE	UNIT/SECTION/PHASE:	BLOCK:	LOT: 51
PREPARED BY: GREG W. JOHNSON, P.E. F#002585	SCALE: 1" = 30'	DATE: 12/10/2019	REVISED:



## 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.

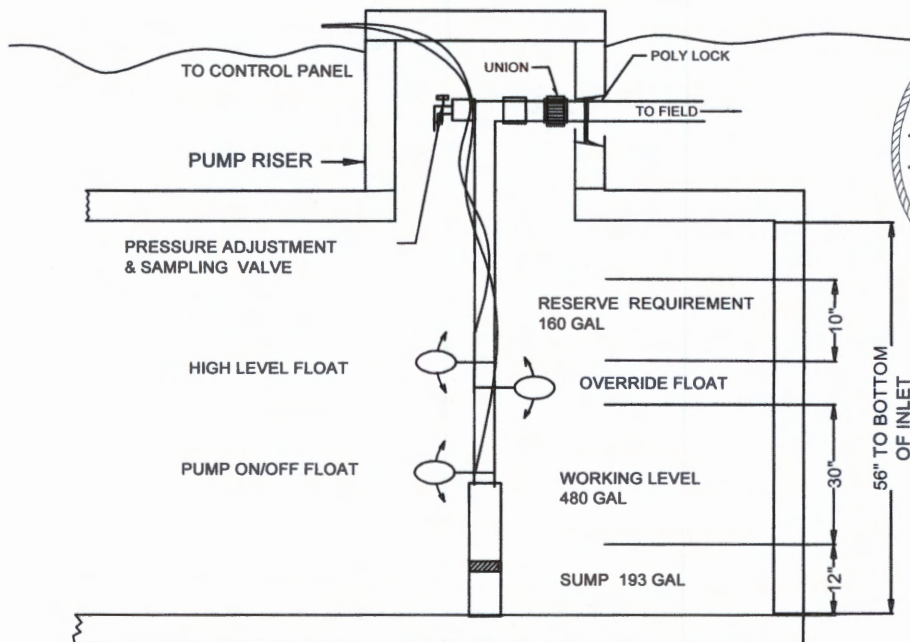
A minimum of 4" of sand, sandy loam, clay loam free of rock shall be placed under and around tanks

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

COUNTY ENGINEER



**TYPICAL PUMP TANK CONFIGURATION  
MAXX AIR-M800 PUMP TANK**



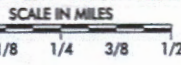
384



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COMAL COUNTY ENGINEER

CONTINUED ON MAP 385



## Hernandez, Sandra

---

**From:** Hernandez, Sandra  
**Sent:** Wednesday, December 18, 2019 4:08 PM  
**To:** 'Greg Johnson'  
**Subject:** 110136 deficiency comment

RE: Sun Valley Village, Lot 51

Greg,

We received planning materials for the referenced permit application on December 18, 2019 and found those planning materials to be deficient. In order to continue processing this permit, we need the following:

- ✓ Comal County rules and regulations require that new non-single family residential structures show adequate land area for doubling the required land needed for the treatment units and disposal area.

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)*

OSSF SOIL EVALUATION REPORT INFORMATION

Date: December 10, 2019
Applicant Information:

VOID

Site Evaluator Information:

Name: MICHAEL & CHRISTINA RUTHERFORD
Address: c/o 23011 F.M. 306
City: CANYON LAKE State: TEXAS
Zip Code: 78133 Phone: (830) 935-4936

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 51 Unit Blk Subd. SUN VALLEY VILLAGE
Street Address: 20 SUN VALLEY 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: 4 %

Presence of 100 yr. Flood Zone: YES NO X

Existing or proposed water well in nearby area. YES X NO >100' (EXISTING)

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

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Design Calculations for Aerobic Treatment with Spray Irrigation:

COUNTY ENGINEER

Commercial

Q = GPD MOTORCYCLE SHOP with 3 EMPLOYEES @ 12 GPD EACH = 36 GPD USING 480 GPD

Residential Water conserving fixtures to be utilized? Yes X No

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

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

Q = (+1)\*75-(20%)= 480

Trash Tank Size 431 Gal.

TCEQ Approved Aerobic Plant Size 800 G.P.D.

Req'd Application Area = Q/Ri = 480 / 0.064 = 7500 sq. ft.

Application Area Utilized = 8482 sq. ft.

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

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

Pump Tank Size = 854 Gal. 16.1 Gal/inch.

Reserve Requirement = 160 Gal. 1/3 day flow.

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

With Chlorinator NSF/TCEQ APPROVED

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

Two way cleanout

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

1" Sch-40 PVC discharge manifold

APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

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

Handwritten signature of Greg W. Johnson

VOID

12/10/19 DATE



FIRM #2585

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

Filed  
4/30/74

PERMIT NO 33902

**CCEO**  
**COPY**

APPLICATION FOR SEPTIC TANK PERMIT  
Comal County, Texas

(To be completed and submitted in Duplicate)

NAME and LOCATION of SUBDIVISION where Septic Tank is to be installed \_\_\_\_\_

SUN VALLEY VILLAGE

UNIT NO. \_\_\_\_\_ BLOCK NO. \_\_\_\_\_ LOT NO 51

Dimensions of Property: 3.4 ACRES

Description of Structure

No. Bedrooms 3 No. Baths \_\_\_\_\_ Disposal \_\_\_\_\_ W. Machine \_\_\_\_\_

Size of Septic System 12,000 Gal. No. Feet Laterals 165' / 36"

Date 4-29-74

AVILA CONSTRUCTION  
Signature of Sanitary Facility Contractor

SR#1 BOX 100 F-1 N.B.  
Address

C.S. EDWARDS  
OWNER

1474 Austin Hwy. #44 SA.  
Address

NOTE: For other information to be submitted in connection with this application, see the requirements outlined in Section VI, Texas Water Quality Board ORDER NO. 70-0730-12.

Approved \_\_\_\_\_ Date \_\_\_\_\_



**CCEO  
COPY**

COMAL COUNTY HEALTH DEPARTMENT  
PERCOLATION TEST

Procedure with a few changes: As outlined in "A GUIDE TO THE DISPOSAL OF HOUSEHOLD SEWAGE", published by Texas State Department of Health.

1. Name of Subdivision or Location of Property \_\_\_\_\_

SUN VALLEY VILLAGE

2. UNIT NO. \_\_\_\_\_ BLOCK NO. \_\_\_\_\_ LOT NO. 51

3. Total Area of Lot 3 ACRES

4. Check Zone of Lot: Buffer Zone  Recharge Zone \_\_\_\_\_

5. Surface slope characteristics of Lot (in feet): 6' / 100'

6. Type of Soil: SOME SOIL CALICHE IN LATERALS AREA

Procedures of test to be made according to pages 12 & 13, Item 5 of "THE GUIDE" with exceptions as stated on this or attached page.

TEST HOLES	DEPTH OF HOLE	RATE OF PERCOLATION	
1.	<u>22"</u>	<u>10 MIN / INCH</u>	I certify that consideration of surface and subsurface soil conditions and the required Texas State Department of Health standards for engineering design of septic tank systems have been duly employed. Further, I certify that a septic tank installation to serve the dwelling unit(s) for the property described can be expected to function without creating a nuisance or a public health hazard. DATE OF TEST <u>29 AUGUST 1972</u> Person performing test <u>[Signature]</u> <u>H. L. BLANFORD</u> Title <u>P.E.</u> Reg # <u>32090</u>
2.	<u>23"</u>	<u>10 " / "</u>	
3.	_____	_____	
4.	_____	_____	
5.	_____	_____	
6.	_____	_____	

3-BA TRAILER

SKETCH OF LOT AND LOCATION OF TEST ON BACK PAGE

RECOMMEND 1000-GAL TANK  
165' / 36" LATERALS

[OVER]

**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. 2

NATCF # 14791-19-01859

**GENERAL WARRANTY DEED**

Date: September 6, 2019

Grantor: Thomas L. Wilmoth and wife, Zoe Ann Wilmoth

Grantor's Mailing Address: 1605 BAHAMA DR  
SEABROOK, TX 77586

Grantee: Michael Rutherford and wife, Christina Rutherford

Grantee's Mailing Address: 20 Sun Valley Dr.  
Spring Branch, TX 78070

**Consideration:**

Ten and No/100 Dollars (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged.

**Property (including any improvements):**

**LOT 51, SUN VALLEY VILLAGE, A SUBDIVISION IN COMAL COUNTY, TEXAS, ACCORDING TO THE MAP OR PLAT THEREOF RECORDED IN VOLUME 4, PAGE 14, MAP AND PLAT RECORDS OF COMAL COUNTY, TEXAS**

**Reservations from Conveyance and Warranty:** None

**Exceptions to Conveyance and Warranty:**

This conveyance is made and accepted subject to any and all valid easements and rights-of-way of record, all presently recorded restrictions, reservations, covenants, conditions and other instruments other than liens and conveyances, filed of record, to the extent, if any, that they are valid and subsisting against the Property or any part thereof.

Grantor, for the consideration and subject to the reservations from and 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 wise belonging, to have and hold it to Grantee, Grantee's heirs, executors and administrators forever. Grantor binds Grantor and Grantor's heirs, executors and administrators to warrant 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 and exceptions to conveyance and warranty.

Ad valorem taxes and assessments attributable to the year 2019 have been prorated between Grantor and Grantee as of the date of this General Warranty Deed and Grantee hereby expressly assumes and agrees to pay the same for the current year and subsequent years.

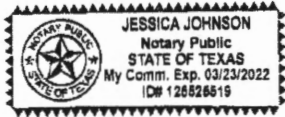
When the context requires, singular nouns and pronouns include the plural.

GRANTOR:  
Thomas L. Wilmoth  
Thomas L. Wilmoth  
Zoe Ann Wilmoth  
Zoe Ann Wilmoth

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THE STATE OF TEXAS §  
§  
COUNTY OF BEXAR §

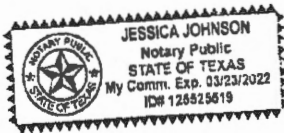
The foregoing instrument was acknowledged before me this 16 day of September 2019 by Thomas L. Wilmoth, in his individual capacity.



*[Signature]*  
\_\_\_\_\_  
Notary Public, State of Texas

THE STATE OF TEXAS §  
§  
COUNTY OF BEXAR §

The foregoing instrument was acknowledged before me this 16 day of September 2019 by Zoe Ann Wilmoth, in her individual capacity.



*[Signature]*  
\_\_\_\_\_  
Notary Public, State of Texas

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**AFTER RECORDING, PLEASE RETURN TO:**

North American Title Company  
Attn: Jessica Johnson  
4630 N. Loop 1604 West, Ste. 116  
San Antonio, Texas 78249

Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
09/09/2019 04:06:25 PM  
LAURA 2 Pages(s)  
201906032057



*Bobbie Koepf*



**COMAL COUNTY**  
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION  
CHECKLIST**

*Staff will complete shaded items*

<i>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.

**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 - See Attached Fee Schedule
- 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

12/18/19

\_\_\_\_\_  
Date

___ COMPLETE APPLICATION Check No. _____ Receipt No. _____
---

INCOMPLETE APPLICATION (Missing Items Circled, Application Refeused)
---

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

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

**Permit #: 110136**

**To: Michael Rutherford**  
**20 Sun Valley Drive**  
**Spring Branch, TX 78070**

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

Contract: 1/28/2020 - 1/28/2023  
 Inspections per year: 3  
 Service Due: 5/28/2020  
 Alt Phone:  
 Warranty Ending

Site: 20 Sun Valley Drive, Spring Branch

Agency Comal County  
 County Comal County  
 Subdivision Sun Valley Village

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:

*was off could not do insp showing up the system  
 due to power being incorrect*

Inspector: *JRH* Date: \_\_\_\_\_

Area: 10  
 GPS: 29.809063 -98.3873 ID = 1734

Printed 5/26/2020

20 Sun Valley Drive, Spring Branch

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

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

**To: Michael Rutherford**  
20 Sun Valley Drive  
Spring Branch, TX 78070

Printed: 9/21/2020  
Site: 20 Sun Valley Drive  
Spring Branch, TX 78070

Permit #: **110136**

Agency: Comal County

County: Comal County

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Sun Valley Village

Customer ID: 1734

Contract Dates: 1/28/2020 - 1/28/2023

Scheduled Date: 9/28/2020

Inspection 2 of 9

GPS Coordinates - Latitude: 29.809063 Longitude: -98.387315

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 9/18/2020**

**Entered By: \_**

**Method: Grab**

**Technician: Ryan Seidensticker**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Sludge Levels**

**Filters: Operational**

**For Tank 1: 8**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: 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 on pretreatment:0" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

**Service Completed**

Insp ID #:5901

**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: Michael Rutherford**  
20 Sun Valley Drive  
Spring Branch, TX 78070

Printed: 1/14/2021  
Site: 20 Sun Valley Drive  
Spring Branch, TX 78070

Permit #: **110136**

Agency: Comal County

County: Comal County

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Sun Valley Village

GPS Coordinates - Latitude: 29.818246 Longitude: -98.367574

Customer ID: 1734

Contract Dates: 1/28/2020 - 1/28/2023

Scheduled Date 1/28/2021

Inspection 3 of 9

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 1/13/2021**

**Entered By: \_**

**Method: Grab**

**Technician: Ryan Seidensticker**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Filters: Operational**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: 0.11**

**Sludge Levels**

**For Tank 1: 16**

**For Tank 3: 2**

**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 on pretreatment:1" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

**Service Completed**

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

Insp ID #:7529

**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: Michael Rutherford**  
20 Sun Valley Drive  
Spring Branch, TX 78070

Printed:5/3/2021  
Site: 20 Sun Valley Drive  
Spring Branch, TX 78070

Permit #: **110136**

Customer ID: 1734

Agency: Comal County

Contract Dates: 1/28/2020 - 1/28/2023

County: Comal County

Sub: Sun Valley Village

Scheduled Date 5/28/2021

Inspection 4 of 9

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

GPS Coordinates - Latitude: 29.818246 Longitude: -98.367574

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 4/30/2021**

**Entered By: \_**

**Method: Grab**

**Technician: Landon Gronvold**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Sludge Levels**

**Filters: Operational**

**For Tank 1: 10**

**Irrigation Pumps: Operational**

**For Tank 3: 1**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: 0.2mg/L**

**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:1/2" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

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

Insp ID #:9381

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

License Info: MP0001708 Expires:

License Info: MT0001995 Expires: 10/31/2021



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

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

**To: Michael Rutherford**  
20 Sun Valley Drive  
Spring Branch, TX 78070

Printed: 9/1/2021  
Site: 20 Sun Valley Drive  
Spring Branch, TX 78070

Permit #: **110136**

Agency: Comal County

County: Comal County

Mfg / Brand: - MAXX AIR

Treatment Type: Aerobic

Disposal: Surface Application

Sub: Sun Valley Village

Customer ID: 1734

Contract Dates: 1/28/2020 - 1/28/2023

Scheduled Date 9/28/2021

Inspection 5 of 9

GPS Coordinates - Latitude: 29.818246 Longitude: -98.367574

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 8/30/2021**

**Entered By: Danielle Jordan**

**Method: Grab**

**Technician: Ryan Seidensticker**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Filters: Operational**

**Irrigation Pumps: Operational**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: .001**

**Sludge Levels**

**For Tank 1: 6**

**For Tank 2: 3**

**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 on pretreatment 0" R.P. - Technician Secured the Tank Lid and/or Riser prior to leaving location.

**Service Completed**

Insp ID #: 11595

**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: Michael Rutherford**  
**20 Sun Valley Drive**  
**Spring Branch, TX 78070**

Printed: 1/31/2022  
Site: 20 Sun Valley Drive  
Spring Branch, TX 78070

---

Permit #: **110136** Customer ID: 1734  
Agency: Comal County Contract Dates: 1/28/2020 - 1/28/2023  
County: Comal County Sub: Sun Valley Village Scheduled Date: 1/28/2022 Inspection 6 of 9  
Mfg / Brand: - MAXX AIR  
Treatment Type: Aerobic  
Disposal: Surface Application GPS Coordinates - Latitude: 29.809094 Longitude: -98.387826

---

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 1/31/2022**

**Entered By: \_**

**Method: Grab**

**Technician: Not Assigned**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Sludge Levels**

**Filters: Operational**

**For Tank 1: 6**

**Irrigation Pumps: Operational**

**For Tank 2: 2**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: .04**

**Electric Circuits: Operational**

**Tank Lid / Riser: Secured**

**Distribution System: Operational**

**Insp. Port / Plug: Secured**

**Sprayfield Veg: Operational**

**Alarm: Operational**

**Comments**

**Service Completed**

Scum on pretreatment 3" - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving.

Insp ID #: 14916

**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: Michael Rutherford**  
**20 Sun Valley Drive**  
**Spring Branch, TX 78070**

Printed:5/13/2022  
Site: 20 Sun Valley Drive  
Spring Branch, TX 78070  
(830) 885-4000

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Permit #: **110136** Customer ID: 1734  
Agency: Comal County Contract Dates: 1/28/2020 - 1/28/2023  
County: Comal County Sub: Sun Valley Village Scheduled Date: 5/28/2022 Inspection 7 of 9  
Mfg / Brand: - MAXX AIR  
Treatment Type: Aerobic  
Disposal: Surface Application GPS Coordinates - Latitude: 29.809094 Longitude: -98.387826

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**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Visit Date: 5/12/2022**

**Entered By: Michelle Irvin**

**Method: Grab**

**Technician: Not Assigned**

**Maint. Provider: Ryan Seidensticker**

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**Aerators: Operational**  
**Filters: Operational**  
**Irrigation Pumps: Operational**  
**Disinfection Device: Operational**  
**Chlorine Supply: Operational**  
**Chlorine Residual: .01**

**Sludge Levels**  
**For Tank 1: 8**

**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 = 1" - Technician Secured the Tank Lid and/or Riser prior to leaving location.

**Service Completed**

Insp ID #:17740

**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:9/30/2022 Insp ID #:21357

Permit #: **110136**

**To: Michael Rutherford**  
**20 Sun Valley Drive**  
**Spring Branch, TX 78070**

Main Phone: (830) 885-4000  
Work:  
Cell Phone:  
Alt Cell:

Customer ID: 1734

Contract Dates: 1/28/2020 - 1/28/2023

Scheduled Date: 9/28/2022

Inspection 8 of 9

Agency: Comal County

County: Comal County

Mfg / Brand: - MAXX AIR

Sub: Sun Valley Village

Treatment Type: Aerobic

Disposal: Surface Application

GPS Coordinates: Latitude: 29.809094 Longitude: -98.387826

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Entered By: Nicole Loria**

**Visit Date: 9/30/2022**

Copy emailed to Customer

Customer Emailed: 9/30/2022

**Method: Grab**

**Technician: Not Assigned**

**Maint. Provider: Ryan Seidensticker**

**Aerators: Operational**

**Sludge Levels**

**Filters: Operational**

**For Tank 1: 6**

**Irrigation Pumps: Operational**

**For Tank 2: N/A**

**Disinfection Device: Operational**

**Chlorine Supply: Operational**

**Chlorine Residual: 0.00**

**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 2 - Red switch secure-no bleach in system - 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 9/30/2022.

Site: 20 Sun Valley Drive, Spring Branch, TX 78070

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

License Info: MP0001708 Expires:



# WASTEWATER TREATMENT SYSTEM MAINTENANCE CONTRACT

Customer

Michael Rutherford

Residential



Initial Contract



Site Address

20 Sun Valley Drive, Spring Branch, TX 78070

Agency

Comal County

Email

quickperformancecycles@gmail.com

Phone

(830) 885-4000

Permit Number

110136

System Details

Treatment: Aerobic Surface Application Liquid Bleach / System: MAXX AIR 800 Max GPD

## AGREEMENT

### I. General:

This work for hire agreement (hereinafter referred to as "Agreement") is entered into by and between the Client and Luna Environmental, LLC (hereinafter referred to as "Contractor"), located at 4222 FM 482 New Braunfels, Texas 78132. By this agreement, Contractor agrees to render services, as described herein, and Client agrees to fulfill his/her/their responsibilities under the agreement as described herein.

### II. Dates & Fees:

This agreement provides maintenance from **1/28/2024** to **1/28/2025** for a total fee of **\$295.00**

### III. Services by Contractor:

1. Inspect and perform routine maintenance on the On-Site Sewage Facility ("OSSF") in compliance with code, regulations, and/or rules of the Texas Commission on Environmental Quality ("TCEQ") and county in which the OSSF is located and the manufacturer's requirements, at a frequency of approximately once every four (4) months.
2. Inspection, adjustment, and servicing of the mechanical, electrical, and other components to ensure proper functioning. This includes inspecting control panels, air pumps, air filters, diffusers, floats, and spray heads.
3. Effluent Inspection will include the following: effluent quality (color, turbidity, overflow, and odor), testing effluent chlorine and pH levels, when necessary, alarm function, filters, operation of effluent pump and chlorinator. Unless otherwise agreed to, Contractor does not provide chlorine. BOD and TSS annually on commercial accounts, additional charges apply.
4. Notify Client of any repairs needed to keep OSSF in proper working condition and up to regulatory standards. Items under warranty may be repaired while the technician is on-site. Additional charges may apply for labor and service calls. Repair quotes of non-warranty items must be approved by Client before work is performed.
5. 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.
6. Visit site within 48 hours of a service request.
7. Provide Customer Support line at 855-560-9909.

**IV. Client Responsibilities:**

1. Maintain Chlorinator and proper chlorine supply, unless otherwise specified.
2. Provide all necessary lawn or yard maintenance and remove all obstructions, including dogs and other animals as needed to allow the OSSF to function properly and the Contractor easy and safe access to all parts of
3. Immediately notify Contractor of any alarms or system problems.
4. Have tanks pumped out as directed by manufacturer, typically every 3 years.
5. Be available by text, phone, or in person when the Contractor is on site in case of required repair approvals or questions.
6. Maintain site drainage to prevent adverse effects on OSSF.
7. Promptly pay Contractor's bills, fees, and invoices in full.

**V. Access By Contractor:**

Access By Contractor: The contractor or anyone authorized by the contractor may enter the property at reasonable times without prior notice for the purpose of repairs and services described herein.

**VI. Termination of This Agreement:**

Either party may terminate this agreement with 30 days' written notice in the event of the other party's substantive failure to perform in accordance with this agreement without fault of the terminating party. Is this agreement is terminated, the Contractor will notify the appropriate regulatory authority.

**VII. Limitation of Liability:**

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

**VIII. Payment Terms:**

The fee for this agreement only covers the services described herein. This fee does not cover equipment or labor for non-warranty repairs, labor for warranty repairs, or service charges resulting from unscheduled, Client requested trips to the Client's OSSF. Payments not received within 30 days from the date of invoicing will be subject to a \$30.00 late penalty and or a 1.5% monthly carrying charge, whichever is greater. By signing this contract, the Client authorizes the Contractor to remove any parts which were installed but not paid for at the end of 30 days. The Client is still responsible for any labor costs associated with the installation and removal of said parts. All invoices are due upon receipt by Client.

**IX. Severability:**

If any provision of this agreement shall be held to be invalid or unenforceable for any reason the remaining provisions shall continue to be held valid and enforceable. If a court finds that any provision of this agreement is invalid or unenforceable, by limiting such provision it would become valid and enforceable, then such provision shall be deemed to be written, construed, and enforced as so limited.

Michael Rutherford

Luna Environmental / Ryan Seidensticker

DocuSigned by: Customer Name  
*Michael Rutherford*  
B8D84BFE2C064AA...

Customer Signature

Maintenance Provider Name

*Ryan Seidensticker* License # MP0001708

Maintenance Provider Signature

Additional Comments / Special Terms

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

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

Printed: 1/16/2023      Insp ID #: 24773

Permit #: **110136**

**To: Michael Rutherford**  
**20 Sun Valley Drive**  
**Spring Branch, TX 78070**

Main Phone: (830) 885-4000  
Work:  
Cell Phone:  
Alt Cell:

Customer ID: 1734

Contract Dates: 1/28/2020 - 1/28/2023

Scheduled Date: 1/28/2023

Inspection 9 of 9

Agency: Comal County  
County: Comal County  
Mfg / Brand: - MAXX AIR

Sub: Sun Valley Village

Treatment Type: Aerobic

Disposal: Surface Application

GPS Coordinates: Latitude: 29.809094 Longitude: -98.387826

**Service Type: Scheduled Inspection**

This counts as a type of "Scheduled Inspection"

**Entered By: Nick Zigalo**

**Visit Date: 1/13/2023**

Copy emailed to Customer

Customer Emailed: 1/16/2023

**Method: Grab**

**Technician: Nick Zigalo**

**Maint. Provider: Ryan Seidensticker**

**Aerators:** Operational

**Sludge Levels**

**Filters:** Operational

**For Tank 1: 13**

**Irrigation Pumps:** Operational

**For Tank 3: 9**

**Disinfection Device:** Operational

**For Tank 4: 1**

**Chlorine Supply:** Operational

**Chlorine Residual: 0.06**

**Electric Circuits:** Operational

**Tank Lid / Riser:** Secured

**Distribution System:** Operational

**Insp. Port / Plug:** Secured

**Sprayfield Veg:** Operational

**Alarm:** Operational

**Comments**

**Service Completed**

scum in trash tank is 1" - 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 1/16/2023.

Site: 20 Sun Valley Drive, Spring Branch, TX 78070

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

License Info: MP0001708 Expires:

License Info: MT0002016 Expires: 12/31/2023

# Luna Environmental

4222 FM 482

New Braunfels, TX 78132

(830) 312-8776

sherrie@lunaenvironmental.com

Printed:6/24/2023

**Permit: 110136**

Site: 20 Sun Valley Drive, Spring Branch, TX 78070

Main Phone: 8308854000

**Michael Rutherford**  
20 Sun Valley Drive  
Spring Branch, TX 78070

Agency: Comal County  
County: Comal County  
Subdivision: Sun Valley Village

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System Info: MFG:            Brand: MAXX AIR Customer ID: 3133  
Treatment Type: Aerobic Disposal Type: Surface Application Insp ID: 29451  
Installed: 1/28/2020 Warranty Expiration: 1/28/2023  
Visit Details <----->  
**Visit Date: 6/21/2023** Entered By: Nicole Loria GPS Lat: 29.809094 GPS Long: -98.387826  
Scheduled Date: 5/28/2023 Contract Starts: 1/28/2023 Customer Emailed: 6/24/2023  
Entered On: 6/24/2023 Contract Ends: 1/28/2024

Visit Results

**Service Type: Scheduled Inspection**  
Count: Inspection 1 of 3  
Method: Grab License # Expires  
Technician: Not Assigned  
Provider: Luna Environmental, LLC  Service Completed

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Aerators: Operational Sludge Level Tank 1: 6  
Filters: Operational Sludge Level Tank 2: N/A  
Irrigation Pumps: Operational  
Disinfection Device: Operational  
Chlorine Supply: Operational  
Chlorine Residual: .01

Electric Circuits: Operational Tank Lid / Riser: Secured  
Distribution System: Operational Insp. Port / Plug: Secured  
Drip/Sprayfield Veg: Operational

Alarm: Operational PSI Pressure: 2.3

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Comments

- Scum on pretreatment 1-air compressor rebuild - 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 6/24/2023.