

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

Issued This Date:	12/02/2021		Permit Number:	111924
Location Description:	456 THUNDE SPRING BRAN			
	Subdivision: Unit: Lot: Block: Acreage:	Comal Hills 1 264 4		
Type of System:	Aerobic Drip Irrigation			
Issued to:	CR Phoenix En	terprises, LLC		

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

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

Alterations to this permit including, but not limited to:

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

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

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

This license to operate is valid for an indefinite period. The holder may transfer it to a succeeding owner, provided the

Licensing Authority Comal County Environmental Health

CENVIRONMENTAL HEALTH INSPECTOR OS0032485

ENVIRONMENTAL HEALTH COORDINATOR



Installer Name:	OSSF Installer #:	
1st Inspection Date:	2nd Inspection Date:	3rd Inspection Date:
Inspector Name:	Inspector Name:	Inspector Name:

Permit#: Address: No. Description Answer Citations 1st Insp. 2nd Insp. 3rd Insp. Notes SITE AND SOIL CONDITIONS & 285.31(a) SETBACK DISTANCES Site and Soil 285.30(b)(1)(A)(iv) Conditions Consistent with Submitted Planning Materials 285.30(b)(1)(A)(v) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(ii) 285.30(b)(1)(A)(i) SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback 285.91(10) Distances 285.30(b)(4) Meet Minimum Standards 285.31(d) SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, 285.32(a)(1) SDR 26) 3 SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per 285.32(a)(3) Foot SEWER PIPE Two Way Sanitary -Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 285.32(a)(5) degree bends) PRETREATMENT Installed (if required) TCEQ Approved List 285.32(b)(1)(G) PRETREATMENT Septic Tank(s) 285.32(b)(1)(E)(iii) Meet Minimum Requirements 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(A) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(I) 6 PRETREATMENT Grease Interceptors if required for 285.34(d) commercial

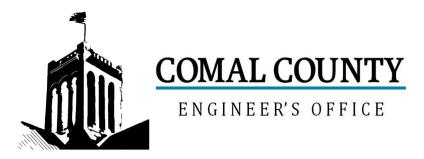
**Inspector Notes:** 

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If SingleTank, 2Compartments Provided withBaffle SEPTIC TANK Inlet Flowline Greater than3" and " T " Provided on Inlet and OutletSEPTIC TANK Septic Tank(s) MeetMinimum 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) (I)285.32(b)(1)(E)(ii) (I)285.32(b)(1)(E) (i)285.32(b)(1)(C) (ii)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)				
	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
	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 providedSEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
	SEPTIC TANK Tank Volume Installed						
	PUMP TANK Volume Installed						
	AEROBIC TREATMENT UNIT Size Installed						
14	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number						
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)				

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	DISPOSAL SYSTEM Drip Irrigation						
			285.33(c)(3)(A)-(F)				
19							
	DISPOSAL SYSTEM Soil		205 22(4)(4)				
20	Substitution		285.33(d)(4)				
	DISPOSAL SYSTEM Pumped Effluent		285.33(a)(4)				
			285.33(a)(3) 285.33(a)(1)				
24			285.33(a)(1) 285.33(a)(2)				
21	DISPOSAL SYSTEM Gravelless Pipe						
			285.33(a)(3)				
			285.33(a)(2)				
			285.33(a)(4) 285.33(a)(1)				
22							
	DISPOSAL SYSTEM Mound		285.33(a)(3)				
			285.33(a)(1)				
			285.33(a)(2) 285.33(a)(4)				
23	DISPOSAL SYSTEM Other						
	(describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
24			265.55(0)(4)				
	DRAINFIELD Absorptive Drainline 3" PVC						
	or 4" PVC						
25	DRAINFIELD Area Installed						
26							
	DRAINFIELD Level to within 1 inch						
	per 25 feet and within 3 inches over entire excavation		285.33(b)(1)(A)(v)				
27							
	DRAINFIELD Excavation Width						
	DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation						
	DRAINFIELD Depth of Porous Media						
	DRAINFIELD Type of Porous Media						
28							
	DRAINFIELD Pipe and Gravel -		205 22/5//4//5/				
29	Geotextile Fabric in Place		285.33(b)(1)(E)				
	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End						
	Plates w/Splash Plate, Inspection						
	Port & Closed End Plates in Place		285.33(c)(2)				
	(per manufacturers spec.)						
30							
	LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length						
	& Width, and Adequate		285.33(d)(1)(C)(i)				
	Separation Distance between						
31	Trenches						

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom ) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size ) 5 ft. Apart		285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3) (B)285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)				
33	AEROBIC TREATMENT UNIT IS Aerobic Unit Installed According to Approved Guidelines.		285.32(c)(1)				
34	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions						
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
	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						
	PUMP TANK Secondary restraint system provided						
	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?		285.33(d)(2)(G)(iii)(II) 285.33(d)(2)(G)(iii)(III) 285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iv) 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)				
	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						
	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



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

Permit Number:	111924
Issued This Date:	01/22/2021
This permit is hereby given to:	CR Phoenix Enterprises, LLC

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

## 456 THUNDERHEAD DR SPRING BRANCH, TX 78070

Subdivision:Comal HillsUnit:1Lot:264Block:4Acreage:

## APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System:

Aerobic Drip Irrigation

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

Call (830) 608-2090 to schedule inspections.

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

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

Date Janu	uary 11, 2021 CR PHOENIX ENTERPRISES, LLC dba		P	ermit #	111924	1	
Owner Name	HAVENBROOK HOMES	- Agent Name		GREG W.	. JOHNSON, P.E.		
Mailing Address	17310 FM 306 BOX 1	Agent Address			LLOW OAK	<	
City, State, Zip	CANYON LAKE TEXAS 78133	City, State, Zip	NI	EW BRAU	NFELS, TX	78132	
Phone#	830-935-2098	Phone #		(830	) 905-2778		
Email	lars@havenbrooktx.com	- Email		gregjohnso	npe@yahoo.	com	
		-					
All correspondence	e should be sent to: 🗌 Owner 🛛 Agent	Both	Method:	Mail	🛛 Email		
Subdivision Name	COMAL HILLS Unit/Phas	se/Section 1	Lot	264	Block	4	
Acreage/Legal							
Street Name/Addr	ess 456 THUNDERHEAD DRIVE	City SP	RING BRA	NCH	Zip	78070	
Type of Developn	nent:						
Single Family F	Residential					RECEIVED	
Type of Con	struction (House, Mobile, RV, Etc.)	HOUSE					
Number of E	Bedrooms3					JAN 20 2021	
Indicate Sq	Ft of Living Area 1289				COU	NTY ENGINEER	
(Planning materi Type of Fac Offices, Fac Restaurants Hotel, Mote	ctories, Churches, Schools, Parks, Etc Indic s, Lounges, Theaters - Indicate Number of Se I, Hospital, Nursing Home - Indicate Number er/RV Parks - Indicate Number of Spaces	cate Number Of O	ccupants		and disposa		
Estimated Cost of	Construction: \$250,000 (Structu	ire Only)					
	he proposed OSSF located in the United Stat		-		-		
🗌 Yes 🛛 No	(if yes, owner must provide approval from USACE for p	proposed OSSF impro	ovements wit	hin the USA	ACE flowage e	asement)	
	Public Private Well Rainwater Co Devices Being Utilized Within the Residence		0				
<ul> <li>I certify that I am the</li> <li>Authorization is here site/soil evaluation a</li> <li>I also understand that by the Comal County</li> </ul>	tion, I certify that: cation and all additional information submitted does not property owner or I possess the appropriate land rights by given to the permitting authority and designated age and inspection of private sewage facilities. at a permit of authorization to construct will not be issue Flood Damage Prevention Order. In to the online posting/public release of my e-mail addr	s necessary to make the ints to enter upon the a d until the Floodplain / ess associated with the	ne permitted above descri Administrato	improvemer bed propert r has perforr	nts on said pro y for the purpo med the review	perty. se of	
		11181	LOLI			Desit 10	
Signature of Owner	195 David Jonas Dr., New Braunfeis, Texas	Date 78132-3760 (830) 608-	2090 Fax (8	30) 608-207:	8	Page 1 of 2 Revised February 2020	

195 David Jonas Dr., New Braunfeis, Texas 78132-3760 (830) 608-2090 Fax (830) 608-2078

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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

\$ystem Description       PROPRIETARY; AEROBIC TREATMENT AND DRIP TUBING         Size of Septio System Required Based on Planning Materials & Soil Evaluation         Tank Size(a) (Gallons)       NUWATER B-550-PC         Absorption/Application Area (Sq FI)       2000         Gallons Per Day (As Per TCEQ Table III)       240         (Sites generating more than 5000 gallons per day are required to obtain a permit through TCEQ)       RECEIVED         (If yes, the planning materials must be completed by a Registered Santarian (R.S.) or Professional Engineer (P.E.))       JAN 2 0 2021         Is there an existing TCEQ approved WPAP for the property?       Yes       No         (If yes, the R.S. or P. E. shall certify that the OSSF design complex with all provisions of the existing WPAP.)       COUNTY ENGINEER         If there is no existing TCEQ approved CZP for the property?       Yes       No         (If yes, the R.S. or R.S. shall certify that the OSSF design will comply with all provisions of the existing CZP.       Yes       No         (If yes, the P.E. or R.S. shall certify that the OSSF design will comply with all provisions of the property CZP?       Yes       No         (If yes, the P.E. or R.S. shall certify that the OSSF design will comply with all provisions of the existing 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 proporated CSF until the CZP	Planning Materials & Site Ev	valuation as Required Completed By GREG W. JOHNSON, P.E.	
Tank Size(s) (Gallons)       NUWATER B-550-PC       Absorption/Application Area (Sq Ft)       200         Callons Per Day (As Per TCEQ Table III)       _2.0	System Description	PROPRIETARY; AEROBIC TREATMENT AND DRIP TO	UBING
Tails State(s) (califorie)	Size of Septic System Requi	ired Based on Planning Materials & Soil Evaluation	
(Sites generating more than 5000 gallons per day are required to obtain a permit through TCEQ)         Is the property located over the Edwards Recharge Zone?       Yes       No       RECEIVED         JAN 2 0 2021       JAN 2 0 2021       JAN 2 0 2021       JAN 2 0 2021         Is there an existing TCEQ approved WPAP for the property?       Yes       No       COUNTY ENGINEE         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?       Yes       No         If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP?       Yes       No         Its the property located over the Edwards Contributing Zone?       Yes       No         Is there an existing TCEQ approval CZP for the property?       Yes       No         (if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the proposed CZP A Permit to construct will)         not be issued for 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)       No         If there is no existing CZP, does the proposed development activity require a TCEQ approved CZP. A Permit to construct will)       N	Tank Size(s) (Gallons)	NUWATER B-550-PC Absorption/Application Area (Sq Ft)	2000
Is the planning materials must be completed by a Registered Sanitarian (R S) or Professional Engineer (P.E.))       JAN 20 2021         Is there an existing TCEQ approved WPAP for the property? ☐ Yes ☐ No       COUNTY ENGINER         If yes, the R.S. or P. E. shall certify that the OSSF design comples with all provisions of the existing WPAP.)       COUNTY ENGINER         If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP? ☐ Yes ☐ No       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.)       No         Is there an existing TCEQ approval CZP for the property? ☐ Yes ☐ No       No         Is the P.E. or R.S. shall certify that the OSSF design comples with all provisions of the existing CZP)       Yes ☐ No         (If yes, the P.E. or R.S. shall certify that the OSSF design complex with all provisions of the existing CZP)       Yes ☐ No         (If yes, the P.E. or R.S. shall certify that the OSSF design complex with all provisions of the proposed CZP. A Permit to construct will)       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)       No         (If yes, indicate the city:			
JAN 2 0 2021 Is there an existing TCEQ approved WPAP for the property? ☐ Yes ☐ No COUNTY ENGINER (if yes, the R. S. or P. E. shall certify that the OSSF design complies with all provisions of the existing WPAP.) (if yes, the R.S. or P. E. shall certify that the OSSF design will comply with all provisions of the proposed WPAP? ☐ Yes ☐ No (if yes, the R.S. or P. E. shall certify that the OSSF design will comply with all provisions of the proposed WPAP. A Permit to Construct will not be issued for the proposed OSSF until the proposed WPAP has been approved by the appropriate regional office.) Is the property located over the Edwards Contributing Zone? ☐ Yes ☐ No (if yes, the P.E. or R.S. shall certify that the OSSF design will comply 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? ☐ 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? ☐ 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? ☐ 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? ☐ Yes ☐ No (if yes, the P.E. or R.S. shall certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to construct will) not be issued for the proposed OSSF until the CZP has been approved by the appropriate regional office.) Is this property within an incorporated city? ☐ Yes ☐ No (if yes, indicate the city:	is the property located over	the Edwards Recharge Zone? 🗌 Yes 🛛 🕅 No	RECEIVED
(If yes, the R. S. or P. E. shall certify that the OSSF design complex with all provisions of the existing WPAP.)       COUNTY ENGINER         If there is no existing WPAP, does the proposed development activity require a TCEQ approved WPAP?       Yes       No         If there an existing TCEQ approval CZP for the proposed WPAP has been approved by the appropriate regional office.)       No         Is there an existing TCEQ approval CZP for 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 complex with all provisions of the existing CZP)       Yes       No         (if yes, the P.E. or R.S. shall certify that the OSSF design complex with all provisions of the existing CZP)       Yes       No         (if yes, the P.E. or R.S. shall certify that the OSSF design complex with all provisions of the proposed 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?       Yes       No         Is this property within an incorporated city?       Yes       No         If yes, indicate the city:	(If yes, the planning materials m	must be completed by a Registered Sanitarian (R.S.) or Professional Engineer	(P.E.)) JAN <b>20</b> 2021
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Is there an existing TCEQ approval CZP for the property? ☐ Yes  No (if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP) If there is no existing CZP, does the proposed development activity require a TCEQ approved CZP? ☐ Yes  No (if yes, the P.E. or R.S. shall certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to construct will) not be issued for the proposed OSSF until the CZP has been approved by the appropriate regional office.) Is this property within an incorporated city? ☐ Yes  No If yes, indicate the city: 	(If yes, the R.S. or P. E. shall ce	ertify that the OSSF design will comply with all provisions of the proposed WPA	AP. A Permit to Construct will
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)       Yes       No         (if yes, the P.E. or R.S. shall certify that the OSSF design will comply with all provisions of the proposed CZP. A Permit to construct will) not be issued for the proposed OSSF until the CZP has been approved by the appropriate regional office.)       Is this property within an incorporated city?       Yes       No         If yes, indicate the city:	is the property located over	the Edwards Contributing Zone? 🛛 Yes 🗌 No	
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If yes, indicate the city: GREG W. JOHNSON 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 January 19, 2021	(if yes, the P.E. or R.S. shall cer	rtify that the OSSF design will comply with all provisions of the proposed CZP. A	A Permit to construct will)
GREG W. JOHNSON 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 January 19, 2021	Is this property within ar	n incorporated city? Yes No	F .
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 January 19, 2021	If yes, indicate the city:		<b>*</b>
Soronal ENG 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			SON E
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		SSIONAL EN	GINK
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     January 19, 2021			FIRM #2585
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     January 19, 2021		112 - AL - A	
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable January 19, 2021		•	
			cation, as applicable
Signature of Designer Date Page 2 of 2	_(()		
195 David Jonas Dr., New Braunfels, Texas 78132-3760 (830) 608-2090 Fax (830) 608-2078 Revised July 2018			

Ve.



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THE COUNTY OF COMAL STATE OF TEXAS

## CERTIFICATION OF OSSF REQUIRING MAINTENANCE

	According to Texas Comm	ission on Enviro	onmenta	al Quality Ru	lles for On-Site Sewage Facilitie	25
	(OSSF's), this document is	s filed in the Dec	ed Recc	ords of Coma	l County, Texas.	
	the Texas Water Code (TV for implementing the laws carry out its powers and d TWC and the Texas Healt certain types of OSSFs ar commission requires a rec recording to the OSSF per warranty by the commissi	FCEQ) to regul WC), § 5.012 and s of the State of uties under the th and Safety co- re located on spe- orded affidavit. rmitting authorition of the suitability	ate on- d § 5.0 Texas r TWC. ode, req ecific p Addition ty. This illity of t	site sewage 13, gives the relating to wa The commiss uires owner's ieces of proponally, the ow recorded affithis OSSF, n	he Texas Commission on facilities (OSSFs). Additionall commission primary responsibi ater and adopting rules necessar sion, under the authority of the s to provide notice to the public perty. To achieve this notice, the wner must provide proof of the fidavit is not a representation or or does it constitute any guarante	that RECEIVED
	by the commission that th	e appropriate O	SSF wa II	is installed.		
	An OSSF requiring a mai §285.91(12) will be insta		ct, acco		Texas Administrative Code sert legal description):	COUNTY ENGINEER
1	UNIT/PHASE/SECTION	BLOCK	264	LOT	COMAL HILLS	SUBDIVISION
IF N						
	The property is owned by	(insert owner's	s full na	ame):	HOENIX ENTERPRISES, LLC, db	a Havenbrook Homes
	the initial two-year servic residence shall either ob personally. Upon sale or transfer of transferred to the buyer of	e policy, the ow tain a maintenar the above-descr or new owner. A	ibed pro	an aerobic tre tract within 3 operty, the p of the planni	ontract for the first two years. A eatment system for a single famil 30 days or maintain the system ermit for the OSSF shall be ng materials for the OSSF can b	ly
	obtained from the Comal WITNESS BY HAND(S)	• •		6	,20 <u>21</u>	
•	Owner(s) signature(s)			CHA	) Printed name (s)	ber
	CHAD RUTTE	<u>,20 21</u> SV	WORN		BSCRIBED BEFORE ME ON TI	
	Notary Public Sig				Filed and Recorded Official Public Records Bobbie Koepp, County Cl	
	GREG W. JO Notary Public, Sta Comm. Expires ( Notary ID 124	ate of Texas 05-17-2022			Comal County, Texas 01/19/2021 01:27:55 PM CHRISTY 1 Page(s) 202106003329	
	(Notary Seal He.	rien.k			Babbie Ko	upp

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

Date Soil Survey Performed: January 14, 2021

Site Location:

COMAL HILLS, UNIT 1, BLOCK 4, LOT 264

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.

SO	SOIL BORING NUMBER SURFACE EVALUATION										
	Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations				
0 1 2 3	6''	111	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 6"	BROWN				
4											

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

01/14/2021

## **OSSF SOIL EVALUATION REPORT INFORMATION**

Date: January 15, 2021	
Applicant Information:	Site Evaluator Information:
Name: <u>CR PHOENIX ENTERPRISES, LLC. db8 HAVENBROOK HOMES</u>	Name: Greg W. Johnson, P.E., R.S. S.E. 11561
Address: 17310 F.M. 306 BOX #1	Address: 170 Hollow Oak
City: CANYON LAKE State: TEXAS	City: <u>New Braunfels</u> State: <u>Texas</u>
Zip Code: Phone: (830) 935-2098	Zip Code: <u>78132</u> Phone & Fax (830)905-2778
Property Location:	Installer Information:
Lot 264 Unit 1 Blk 4 Subd. COMAL HILLS	Name:
Street Address: 256 THUNDERHEAD DRIVE	Company:
City: SPRING BRANCH Zip Code: 78070	Address:
Additional Info.:	City: State:
	Zip Code: Phone
<b>Topography:</b> Slope within proposed disposal area: Presence of 100 yr. Flood Zone: Existing or proposed water well in nearby area. Presence of adjacent ponds, streams, water impoundments Presence of upper water shed Organized sewage service available to lot	3       %         YESNO_X         YESNO_X         YESNO_X         YESNO_X         YESNO_X

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JAN 20 2021

COUNTY ENGINEER

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

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

2021 01/15 DAI JOHNSON GREG W PROK ESSIONAL

**FIRM #2585** 

## **DRIP TUBING SYSTEM DESIGNED FOR:** CR PHOENIX ENTERPRISES, LLC 17310 FM 306, BOX 1 CANYON LAKE, TX 78133

RECEIVED

JAN 20 2021

## **SITE DESCRIPTION:**

COUNTY ENGINEER Located in Comal Hills, Unit 1, Block 4, Lot 264, at 456 Thunderhead Drive, the proposed system will serve a three bedroom residence (1289 sf.) situated in an area with shallow Type-III soil as described in the Soil Evaluation Report. An aerobic treatment plant utilizing drip irrigation was chosen as the most appropriate system to serve the conditions on this lot.

## **PROPOSED SYSTEM:**

A 3-inch SCH-40 pipe discharges from the residence into a NuWater B-550PC-400PT 600gpd aerobic plant containing a 353-gallon pretreatment tank, an aerobic treatment plant, and a 768-gallon pump chamber containing a submersible well pump. The well pump is activated by a time controller allowing the distribution ten times per day with an 8 minute run time with float setting at 300 gallons. A high level audible and visual alarm will activate should the pump fail. Distribution is through a self flushing 100 micron disc filter (Arkal) then through a 1" SCH-40 manifold to a 2000 sf. drip tubing field, with Netifim Bioline drip lines set approximately two feet apart with 0.61 gph emitters set every two feet, as per the attached schematic. A pressure regulator PMR-MF 30psi installed in the pump tank on the manifold to the field will maintain pressure at 30 psi. A 1" SCH-40 return line is installed to periodically flush the system by cycling a 1" ball valve. Solids caught in the disk filter are flushed each cycle back to the trash tank. Vacuum breakers installed at the highest point on each manifold will prevent siphoning of effluent from higher to lower parts of the field. Field area will be scarified and built up with  $\sim 6$ " of Type II or Type III soil, then the drip tubing will be laid and capped with ~6" of Type II or Type III soil (NOT SAND). (Drip field over tank will have a minimum of 12" soil between tank and drip lines.) The field area will be sodded with grass prior to system startup. Tank must have at grade risers on each opening with watertight caps that must be at least 65# or have a padlock or can only be removed with tools. A secondary plug, cap, or suitable restraint must be provided below riser cap to prevent tank entry should the cap be damaged or removed, in compliance with Chapter §285.38.

## **DESIGN SPECIFICATIONS:**

Daily waste flow: 240 GPD Table III Pretreatment tank size: 353Gal Plant Size: NuWater B-550 600 gpd (TCEQ Approved) Pump tank size: 768Gal Reserve capacity after High Level: 80 Gal (>1/3 day Req'd)

Application Rate: Ra = 0.2 gal/sf Total absorption area: Q/Ra = 240 GPD/0.20 = 1200 sf. (Actual 2000 sf.) Total linear feet drip tubing: 1000' <i>Netifim Bioline</i> drip tubing .61 GPH Pump requirement: 500 emitters @ .61 gph @ 30 psi = 5.0833 gpm Pump Requirement (cont.): Franklin C1 20XC1-05P4-W115 submersible well volume: 50-70 gal. Pump Tank Calculations: 768 Gal (14.5 gal/in.)	pump Dosing
Volume below working level = $12''= 218$ gal	
Working level = $240$ gal = $17''$	
Reserve Requirement = $>1/3$ day = 80 gal. = 6"	
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MINIMUM SCOUR VELOCITY (MSV) > 2 FPS	1334
IN DRIP TUBING W/ NOM. DIA. 0.55" ID	JAN 202021
$MSV = 2 FPS (\Pi d \uparrow 2)/4*7.48 gal/cf*60 sec/min$	
$\mathbf{MSV} = 2(3.14159((.55/12)^{\dagger}2)/4) * 7.48*60$	COUNTY ENGINEER
MSV = 1.5 gpm MIN FLOW RATE x 4 = 6.0 gpm	
IN RETURN MANIFOLD W/ NOM. DIA 1.049" ID	
$MSV = 2 FPS (\Pi d^{2})/4*7.48 gal/cf*60 sec/min$	
$\mathbf{MSV} = 2(3.14159((1.049/12)^{\dagger}2)/4) * 7.48*60$	
MSV = 5.4  GPM	

## **<u>PIPE AND FITTINGS</u>**:

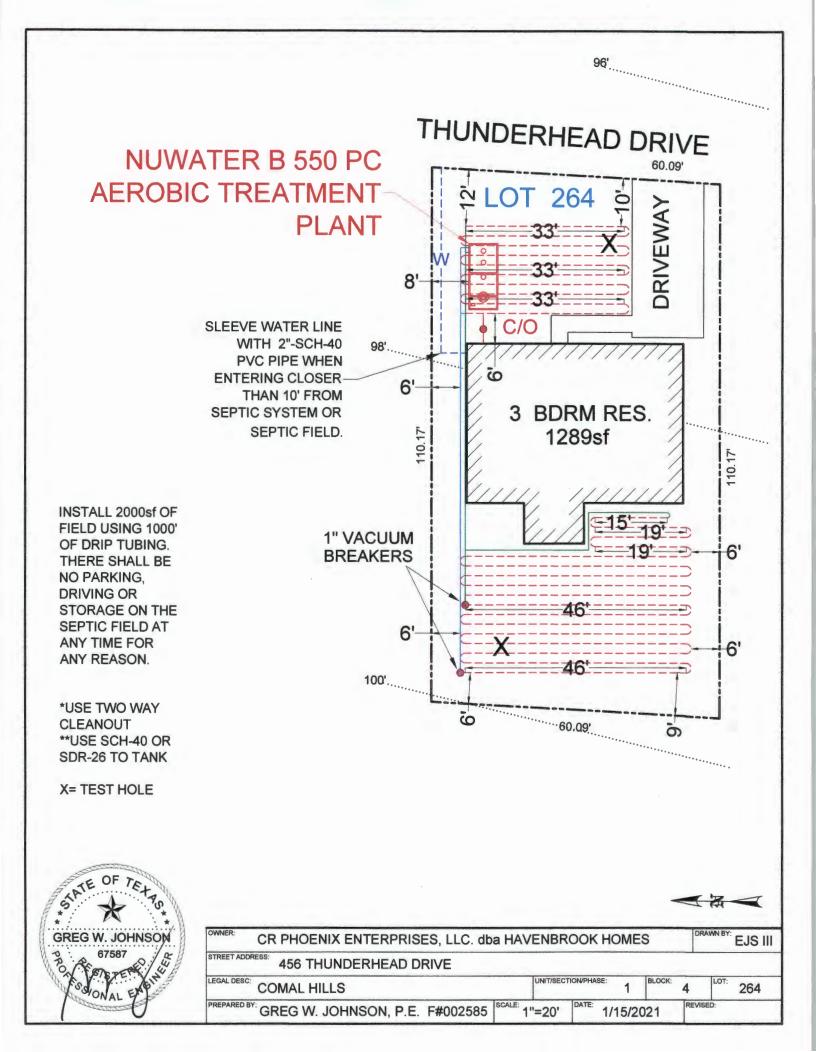
All pipes and fittings in this drip tubing system shall be 1" schedule 40 PVC. All joints shall be sealed with approved solvent-type PVC cement. Clipper type cutters are recommended to prevent PVC burrs during cutting of pipes causing possible plugging. Drip tubing 0.61 gph drip tubing to be used in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

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

01/15/2021 No. 67587 - F-2585 Greg W. Johnson, P.E.

Grég W. Johnson P.E. No. 67587 - F-2 170 Hollow Oak New Braunfels, Texas 78132 830/905-2778





TANK NOTES:

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

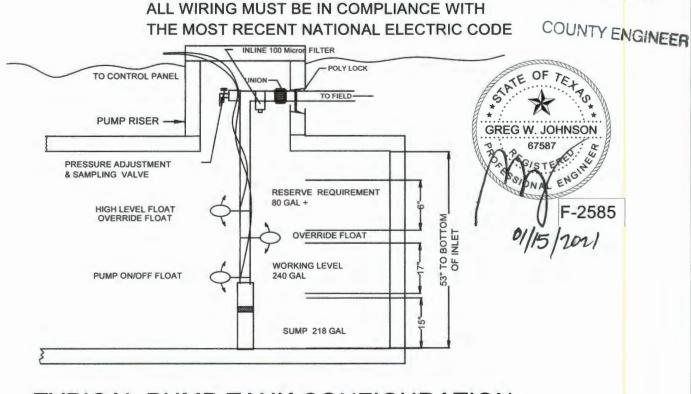
Tightlines to the tank shall be SCH-40 PVC.

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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## TYPICAL PUMP TANK CONFIGURATION NU-WATER 550PC -400PT 768 GAL PUMP TANK

## **Arkal 1" Super Filter**

## Catalog No. 1102 0\_\_\_

#### Features

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

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#### **Technical Data**

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

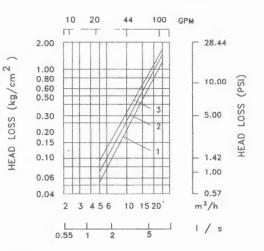
## COUNTY ENGINEER



#### **Filtration Grades**

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

#### **Head Loss Chart**

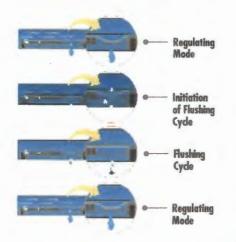


Disc filter, irrigation systems, irrigationglobal.com

# **NETAFIM**

## Bioline Dripperline

### Pressure Compensating Dripperline for Wastewater



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

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



#### **Product Advantages**

#### The Proven Performen

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

#### Quality Manufacturing with Specifications Designed to Meet Your Needs

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

#### Long-Term Reliability

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

#### **Root Safe**

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



#### Applications

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

#### **Specifications**

Wall thickness (mil): 45\*

Nominal flow rates (GPH): .4, .6, .9\*

Common spacings: 12", 18", 24"\*

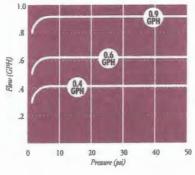
Recommended filtration: 120 mesh RECEIVED

Inside diameter: .570\*

Color: Purple tubing indicates non-pgAWe 2 0 2021 source

SOURCE \*Additional flows, spacings, and pipe sizes available by request. Please contact Netafim USA Customer SOCOUNTY ENGINEER

### **BIOLINE** Flow Rate vs. Pressure





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



**Cross Section of Bioline Dripperline** 

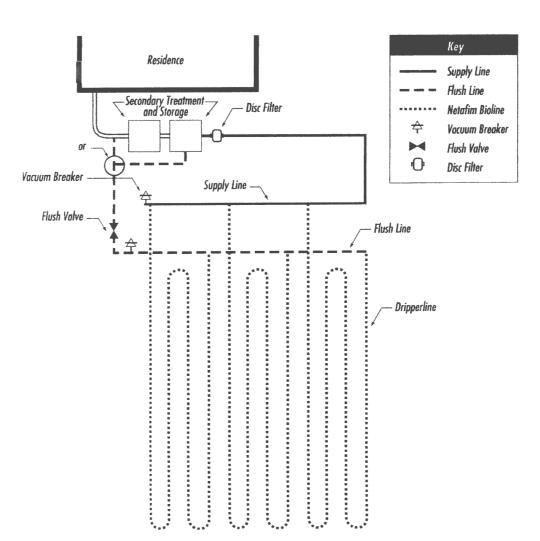
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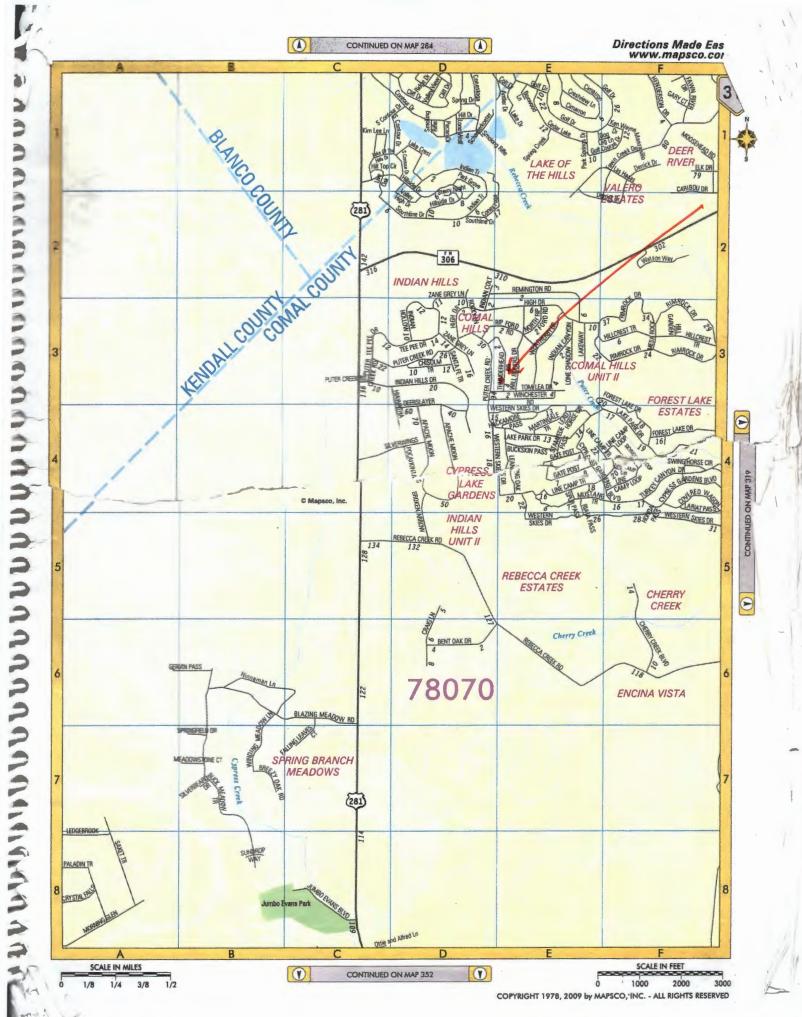
#### SAMPLE DESIGNS

#### SINGLE TRENCH LAYOUT

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

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





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#### WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

00141		<i>z u</i> 2021
Regulatory Authority COMAL	Permit/License Number	
Block Creek Aerobic Services, LLC	Customer CR PHOENIX ENTERPRISES, LLC	0.0
444 A Old Hwy #9	Site Address 456 THUNDERHEAD DRIVE	COUNTY
Comfort, TX 78013	City SPRING BRANCHZip 78070	
Off. (830) 995-3189	Mailing Address 17310 FM 306, Box 1, Cany	on Lake, TX 7813:
Fax. (830) 995-4051	County COMAL Map # 318 E3	
	Phone 830-935-2098	
2 YEAR CONTRACT	Email lars@havenbrooktx.com	
2 YEAR WARRANTY ON PARTS AND LABOR		
	SUBDIVISION/LEGAL: COMAL HILLS, UNIT	1, BLOCK 4, LOT 264.

**I. General:** This Work for Hire Agreement (hereinafter referred to as "Agreement") is entered into by and between <u>CR PHOENIX ENTERPRISES, LLC</u> (hereinafter referred to as "Customer") and Block Creek Aerobic Services, LLC. By this agreement, Block Creek Aerobic Services, LLC and its employees (hereinafter inclusively referred to as "Contractor") agree to render services at the site address stated above, as described herein, and the Customer agrees to fulfill his/her/their responsibilities, as described herein.

#### II. Effective Date:

This Agreement commences on LTO \_\_\_\_\_\_\_and ends on \_\_\_\_\_\_\_ for a total of two (2) years (initial agreement) or one (1) year (thereafter). If this is an initial agreement (new installation), the Customer shall notify the Contractor within two (2) business days of the system's first use to establish the date of commencement. If no notification is received by Contractor within ninety (90) day::s after completion of installation or where county authority mandates, the date of commencement will be the date the "License to operate" (Notice of Approval) was issued by the permitting authority. This agreement may or may not commence at the same time as any warranty period of installed equipment, but in no case shall it extend the specified warranty.

#### **III. Termination of Agreement:**

This Agreement may be terminated by either party for any reason, including for example, substantial failure of either party to perform in accordance with the terms of this Agreement, without fault or liability of the terminating party. The terminating party must provide written notice to the non-terminating party thirty (30) days prior to the termination of this Agreement. If this Agreement is terminated, Contractor will be paid at the rate of \$75.00 per hour for any work performed and for which compensation has not been received. After the deduction of all outstanding charges, any remaining monies from prepayment for services will be refunded to customer within thirty (30) days of termination of this Agreement. Either party terminating this Agreement for any reason, including non-renewal, shall notify in writing the equipment manufacturer and the appropriate regulatory agency a minimum of thirty (30) days prior to the date of such termination. Nonpayment of any kind shall be considered breach of contract and a termination of contract.

#### IV. Services:

Contractor will:

a. Inspect and perform routine upkeep on the On-Site Sewage Facility (hereinafter referred to as OSSF) as recommended by the treatment system manufacturer, and required by state and/or local regulation, for a total of three visits to site per year. The list of items checked at each visit shall be the: control panel, Electrical circuits, timer, Aeration including compressor and diffusers, CFM/PSI measured, lids safety pans, pump, compressor, sludge levels, and anything else required as per the manufacturer.

b. Provide a written record of visits to the site by means of an inspection tag attached to or contained in the control panel.

c. Repair or replace, if Contractor has the necessary materials at site, any component of the OSSF found to be failing or inoperative during the course of a routine monitoring visit. If such services are not covered by warranty, and the service(s) cost less than \$100.00. Customer hereby authorizes Contractor to perform the service(s) and bill Customer for said service(s). When service costs are greater than \$100.00, or if contractor does not have the necessary supplies at the site. Contractor will notify Customer of the required service(s) and the associated cost(s). Customer must notify Contractor of arrangements to affect repair of system with in two (2) business days after said notification.

d. Provide sample collection and laboratory testing of TSS and BOD on a yearly basis (commercial systems only).

e. Forward copies of this Agreement and all reports to the regulatory agency and the Customer.





BS

Contractor's Initials

**Customer's Initials** 

f. Visit site in response to Customer's request for unscheduled services within forty-eight (48) hours of the date of notification (weekends and holidays excluded) of said request. Unless otherwise covered by warranty, costs for such unscheduled responses will be billed to Customer.

#### V. Disinfection:

X Not required; \_\_\_\_\_\_required. The responsibility to maintain the disinfection device(s) and provide any necessary chemicals is that of the Customer.

#### VI. Electronic Monitoring:

Electronic Monitoring is not included in this Agreement.

#### VII. Performance of Agreement:

Commencement of performance by Contractor under this Agreement is contingent on the following conditions: a. If this is an initial Agreement (new installation):

this is an initial Agreement (new instanation

I. Contractor's receipt of a fully executed original copy or facsimile of this agreement and all documentation requested by Contractor.

If the above conditions are not met, Contractor is not obligated to perform any portion of this Agreement.

#### VIII. Customer's Responsibilities:

The customer is responsible for each and all of the following:

a. Provide all necessary yard or lawn maintenance and removal of all obstacles, including but not limited to dogs and other animals, vehicles, trees, brush, trash, or debris, as needed to allow the OSSF to function properly, and to allow Contractor safe and easy access to all parts of the OSSF.

b. Protect equipment from physical damage including but not limited to that damage caused by insects.

c. Maintain a current license to operate, and abide by the conditions and limitations of that license, and all requirements for and OSSF from the State and/or local regulatory agency, whichever requirements are more stringent, as well as the proprietary system's manufacturer recommendations.

d. Notify Contactor immediately of any and all alarms, and/or any and all problems with, including failure of, the OSSF.

e. Provide, upon request by Contractor, water usage records for the OSSF so that the Contractor can perform a proper evaluation of the performance of the OSSF.

f. Allow for samples at both the inlet and outlet of the OSSF to be obtained by Contractor for the purpose of evaluating the OSSF's performance. If these samples are taken to a laboratory for testing, with the exception of the service provided under Section IV (d) above, Customer agrees to pay Contractor for the sample collection and transportation, portal to portal, at a rate of \$35.00 per hour, plus the associated fees for laboratory testing.

g. Prevent the backwash or flushing of water treatment or conditioning equipment from entering the OSSF.

h. Prevent the condensation from air conditioning or refrigeration units, or the drains of icemakers, from hydraulically overloading the aerobic treatment units. Drain lines may discharge into the surface application pump tank if approved by system designer.

i. Provide for pumping and cleaning of tanks and treatment units, when and as recommended by Contactor, at Customer's expense.

j. Maintain site drainage to prevent adverse effects on the OSSF.

k. Pay promptly and fully, all Contractor's fees, bills, or invoices as described herein.

#### IX. Access by Contractor:

Contractor is hereby granted an easement to the OSSF for the purpose of performing services described herein. Contractor may enter the property during Contractor's normal business hours and/or other reasonable hours without prior notice to Customer to perform the Services and/or repairs described herein. Contractor shall have access to the OSSF electrical and physical components. Tanks and treatment units shall be accessible by means of man ways, or risers and removable covers, for the purpose of evaluation as required by State and/or local rules and the proprietary system manufacturer. It is Customers responsibility to keep lids exposed and accessible at all times.

#### X. Limit of Liability:

Contractor shall not be held liable for any incidental, consequential, or special damages, or for economic loss due to expense, or for loss of profits or income, or loss of use to Customer, whether in contract tort or any other theory. In no event shall Contractor be liable in an amount exceeding the total Fee for Services amount paid by Customer under this Agreement.

#### XI. Indemnification:

Customer (whether one or more) shall and does hereby agree to indemnify, hold harmless and defend Contractor and each of its successors, assigns, heirs, legal representatives, devisees, employees, agents and/or counsel (collectively "Indemnitees") from and against any and all liabilities, claims, damages, losses, liens, causes of action, suits, fines, judgments and other expenses (including, but not limited to, attorneys' fees and expenses and costs of investigation), of any kind, nature or



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Customer's Initials

Contractor's Initials

description, (hereinafter collectively referred to as "Liabilities") arising out of, caused by, or resulting, in whole or in part, from this Agreement.

## THIS INDEMNITIFCATION APPLIES EVEN IF SUCH LIABILITIES ARE CAUSED BY THE CONCURRENT OR CONTRIBUTORY NEGLIGENCE OR BY THE STRICT LIABILITY OF ANY INDEMNITEE.

Customer hereby waives its right of recourse as to any Indemnitee when Indemnification applies, and Customer shall require its insurer(s) to waive its/their right of subrogation to the extent such action is required to render such waiver of subrogation effective. Customer shall be subrogated to Indemnitees with respect to all rights Indemnitees may have against third parties with respect to matters as to which Customer provides indemnity and/or defense to Indemnitees. No Indemnification is provided to Indemnitees when the liability or loss results from (1) the sole responsibility of such Indemnitee: or, (2) the willful misconduct of such Indemnitee. Upon irrevocable acceptance of this Indemnification obligation. Customer, in its sole discretion, shall select and pay counsel to defend Indemnitees of and from any action that is subject to this Indemnification provision. Indemnitees hereby covenant not to compromise or settle any claim or cause of action for which Customer has provided Indemnification without the consent of Customer.

#### XII. Severability:

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

#### XIII. Fee for Services:

The Fee for Services does not include any fees for equipment, material, labor necessary for non-warranty repairs, unscheduled inspections, or Customer requested visits to the site.

#### XIV. Payment:

Full payment is due upon execution of this Agreement (Required of new Customer). For any other service(s) or repair(s) provided by Contractor the Customer shall pay the invoice(s) for said service(s) or repair(s) within thirty (30) days of the invoice date. The Contractor shall mail all invoices on the date of invoice. All payments not received within thirty (30) days from the invoice date will be subject to a \$29.00 late penalty and a 1.5% per month carrying charge, as well as any reasonable attorney's fees, and all collection and court costs incurred by Contractor in collection of unpaid debt(s). Contractor may terminate contract at any time for nonpayment for services. Any check returned to Contractor for any reason will be assessed a \$30.00 return check fee.

#### XV. Application or Transfer of payment:

The fees paid for this agreement may be transferred to subsequent property owner(s); however, this Agreement is not transferable. Customer shall advise the subsequent property owner(s) of the State requirement that they sign a replacement agreement authorizing Contractor to perform the herein described Services, and accepting Customer's Responsibilities. This replacement Agreement must be signed and received in Contractor's offices within ten (10) business days of date of transfer of property ownership. Contractor will apply all funds received from Customer first to any past due obligation arising from this Agreement including late fees or penalties, return check fees, and/or charges for services or repairs not paid within thirty (30) days of invoice date. Any remaining monies shall be applied to the funding of the replacement Agreement. The consumption of funds in this manner may cause a reduction in the termination date of effective coverage per this Agreement. See Section IV.

#### XVI. Entire Agreement:

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

unto S. industich Customer Signature Date

Block Creek Aerobic Services, LLC, Contractor MC# 0000042 and MC#0000002



Customer's Initials

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BS

RECEIVED

JAN 20 2021

UNTY ENGINEE

Contractor's Initials

Alamo Title Company 4000082004526 LR

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

#### **General Warranty Deed**

Date: September 25, 2020

Grantor: Legacy Land Company, LLC, a Minnesota limited liability company

**Grantor's Mailing Address:** 

Legacy Land Company, LLC 5115 Excelsior Blvd, #370 St Louise Prk, Minnesota 55416 RECEIVED

JAN 20 2021

COUNTY ENGINEER

Grantee: CR PhoenixEnterprises, LLC dba Havenbrook Homes, a Texas limited liability company

**Grantee's Mailing Address:** 

CR PhoenixEnterprises, LLC dba Havenbrook Homes P. O. Box 1554 Canyon Lake, Texas 78133

#### **Consideration:**

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

#### Property (including any improvements):

Lot 264, Block 4, Comal Hills, Unit No. 1, an addition in Comal County, Texas, according to plat thereof recorded in Volume 2, Pages 53-54, Map and Plat Records of Comal County, Texas.

#### **Reservations from Conveyance:**

None

#### **Exceptions to Conveyance and Warranty:**

Validly existing easements, rights-of-way, and prescriptive rights, whether of record or not; all presently recorded and validly existing instruments, other than conveyances of the surface fee estate, that affect the Property; and taxes for 2020, which Grantee assumes and agrees to pay, and subsequent assessments for that and prior years due to change in land usage, ownership, or both, the payment of which Grantee assumes.

Grantor, for the Consideration and subject to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty, grants, sells, and conveys to Grantee the Property, together with all and singular the rights and appurtenances thereto in any way belonging, to have and to hold it to Grantee and Grantee's heirs, successors, and assigns forever. Grantor binds Grantor and Grantor's heirs and successors to warrant and forever defend all and singular the Property to Grantee and Grantee's heirs, successors, and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof, 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.

Legacy Land Company, LLC, a Minnesota limited liability company,

Peter Bonahoom, Manager

COMEY ENGINEER

RECEIVED

**2 0** 2021

STATE OF <u>MENNESOTA</u>) COUNTY OF <u>CARVER</u>)

This instrument was acknowledged before me on <u>Scrember 25</u>, 2020, by Peter Bonahoom, a Manager of Legacy Land Company, LLC, on behalf of Legacy Land Company, LLC, a limited liability company.



Notary Public, State of Minn shta My commission expires: 1/31/2024

PREPARED IN THE OFFICE OF:

David L. Ricker P. O. Box 1571 Boerne, Texas 78006 Tel: (210) 737-6097 Fax: (210) 690-3635

#### AFTER RECORDING RETURN TO:

Alamo Title Company 434 N. Loop 1604 West, #2208 San Antonio, Texas 78232 Filed and Recorded Official Public Records Bobbic Koepp, County Clerk Comal County, Texas 10/01/2020 08:54:07 AM LAURA 2 Pages(s) 202006042768



Block Creek Concrete Products, LLC 444 A Old Hwy No 9 Comfort, TX 78013

> Phone: (830) 995-3189 Fax: (830) 995-4051

To: Home Owner Printed:4/11/2022 Site: 456 Thunderhead Dr 456 Thunderhead Dr Spring Branch, TX 78070 Spring Branch, TX 78070 Customer ID: 7826 Permit #: 111924 Contract Dates: 12/3/2021 - 12/3/2023 Agency: Comal County Scheduled Date: 4/3/2022 Inspection 3 of 6 County: Comal Sub: Mfg / Brand: Advantage Wastewater LLC - Nu Water Installed: 9/23/2021 Treatment Type: Aerobic With Chlorine Warranty End: 9/23/2023 Disposal: Drip Emitters GPS Coordinates - Latitude: 29.93078 Longitude: -98.39991 ✓ This counts as a type of "Scheduled Inspection" Service Type: Scheduled Inspection Entered By: Jose Ramos Visit Date: 4/11/2022 Time In: 335p Out: 358p Method: Grab Technician: Jose Ramos Maint. Provider: Rudy Carson Aerators: Operational Sludge Levels Filters: Operational For Tank 1: 20" For Tank 2: 0" Irrigation Pumps: Operational **Disinfection Device:** Operational For Tank 3: 0" CFM: 3.0 Air Filter: Good Turbidity: Good Tank Lid / Riser: Secured Insp. Port / Plug: Secured Electric Circuits: Operational Distribution System: Operational Color: Good Sprayfield Veg: Operational Odor: Good **PSI Pressure: 3.0** Alarm: Operational Comments Service Completed - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. - Cleaned compressor filter - Scum in pretreatment is 1". Cleaned dripper filter. Insp ID #:123528 Technician: Jose Ramos Provider: Rudy Carson

License #: MP0002036

License #: MT0001770

Expires: 9/1/2022

Phone: (830) 995-3189 Fax: (830) 995-4051

To: Home Owner 456 Thunderhead Spring Branch, TX			Printed:8/4/2022 Insp ID #:128556	Main Phone: Work: Cell Phone: Alt Cell:
Permit #: <b>111924</b> Agency: Comal County County: Comal Mfg / Brand: Advantage Was Treatment Type: Aerobic With Ch Disposal: Drip Emitters		GI	Customer Contract Dates: 12/3/2 Scheduled Date: 8/3/202 PS Coordinates: Latitude: 29.9307	22 Inspection 4 of 6 Installed: 9/23/2021 Warranty End: 9/23/2023
Service Type: Schedu	iled Inspection			ype of "Scheduled Inspection"
Visit Date: 8/4/202		Out: <u>354</u>	Entered By: Jos	e Ramos
Method: <u>Grab</u> Technician: Jose Ram Maint. Provider: Rudy Car				
Aerators: Operat Filters: Operat Irrigation Pumps: Operat Disinfection Device: Operat	ional For T ional For T	<u>evels</u> ank 1: <u>18"</u> ank 2: <u>6"</u> ank 3: <u>0"</u>		
		Floats: <u>OP</u> Timer: <u>OP</u>		CFM: <u>2.4</u>
Electric Circuits: <u>Opera</u> Distribution System: <u>Opera</u> Sprayfield Veg: <u>Opera</u>	tional Insp. Port	Riser: <u>Secured</u> / Plug: <u>Secured</u>		
Alarm: Opera	tional			
Comments - Technician Secured the Tar Cleaned compressor filter	nk Lid and/or Riser prior to leavin cleaned dripper filter. Tank 1 sc	ng location Inspe um 2".		✓ Service Completed Secured prior to leaving. ead Dr, Spring Branch, TX 78070
Provider: Rudy C	Carson	Technician: Jos	se Ramos	
License Info: MP0002036 Expire		License Info: MT00	01770 Expires: 9/1/2022	

Phone: (830) 995-3189 Fax: (830) 995-4051

To: Home Owner 456 Thunderhead Dr Spring Branch, TX 78070		Printed:5/6/2023 Insp ID #:139616	Main Phone: Work: Cell Phone: Alt Cell:
Permit #: <b>111924</b> Agency: Comal County County: Comal Mfg / Brand: Advantage Wastewater LLC - Nu Water Treatment Type: Aerobic With Chlorine Disposal: Drip Emitters		Customer II Contract Dates: 12/3/20 Scheduled Date: 4/3/2023 GPS Coordinates: Latitude: 29.93078	21 - 12/3/2023 Inspection 6 of 6 Installed: 9/23/2021 Warranty End: 9/23/2023
Service Type: <u>Scheduled Inspection</u>		This counts as a typ Enterod Pre Nool	e of "Scheduled Inspection"
Visit Date: 5/6/2023 Time In: Method: Grab Technician: Alejandro Gonzalez Maint. Provider: Rudy Carson	<u>1023</u> Out: <u>1042</u>	Entered By: Noel	<u>J Aleman</u>
Aerators: <u>Operational</u> Filters: <u>Operational</u> Irrigation Pumps: <u>Operational</u> Disinfection Device: <u>Operational</u>	Sludge Levels For Tank 1: <u>6"</u> For Tank 2: <u>10"</u> For Tank 3: <u>0"</u> Floats: <u>OP</u> Timer: <u>OP</u>		
Electric Circuits: <u>Operational</u> Distribution System: <u>Operational</u> Sprayfield Veg: <u>Operational</u>	ank Lid / Riser: <u>Secured</u>		
Alarm: Operational			
Comments - Technician Secured the Tank Lid and/or Riser prior Cleaned drip filter and back flushed drip field. We do not have your contact information on file. Plea the future. THANKS			
		Site: 456 Thunderhead	Dr, Spring Branch, TX 78070
Provider: Rudy Carson	Technician: A	lejandro Gonzale	Z
License Info: MP0002036 Expires: 11/30/2025		00996 Expires: 1/31/2025	

To: Jamas Ohas

Phone: (830) 995-3189 Fax: (830) 995-4051

456 Thunderhead Dr Spring Branch, TX 78070		Printed:9/5/2023 Main Phone: (210) 241-0920 Insp ID #:144282 Work: Cell Phone: Alt Cell:
Permit #: <b>111924</b> Agency: Comal County County: Comal Mfg / Brand: Advantage Wastewater LLC Treatment Type: Aerobic With Chlorine Disposal: Drip Emitters		Customer ID: 7826 Contract Dates: 12/3/2021 - 12/3/2023 Scheduled Date: 8/3/2023 Inspection 7 of Installed: 9/23/2021 Warranty End: 9/23/2023 GPS Coordinates: Latitude: 29.93078 Longitude: -98.39991
Service Type: <u>Scheduled Insp</u> Visit Date: <u>9/5/2023</u> Method: <u>Grab</u> Technician: Ronnie W Krampota Maint. Provider: Rudy Carson	Dection Time In: <u>1100am</u> Out: <u>1</u>	✓ This counts as a type of "Scheduled Inspection"
Aerators: <u>Operational</u> Filters: <u>Operational</u> Irrigation Pumps: <u>Operational</u> Disinfection Device: <u>Operational</u>	<u>Sludge Levels</u> For Tank 1: <u>11</u> For Tank 2: <u>10</u> For Tank 3: <u>3</u>	
	Floats: <u>OP</u> Timer: <u>OP</u> Air Filter: <u>Good</u>	<u>d</u>
Electric Circuits: <u>Operational</u> Distribution System: <u>Operational</u> Sprayfield Veg: <u>Operational</u> Alarm: <u>Operational</u>	Tank Lid / Riser: <u>Secu</u> Color: <u>Good</u> Odor: <u>Good</u>	1

#### Comments

Service Completed

- Technician Secured the Tank Lid and/or Riser prior to leaving location. - Secured system in the on position with a lock bolt - Cleaned drip filter and back flushed drip filed - Closed valve - Cleaned compressor filter - Scum in pretreatment is 4" - Red light on due to cloged drip filter - Cleaned drip filter and pump screen - Alarm will go off when the water level returns to normal level - The drip filter should be

Site: 456 Thunderhead Dr, Spring Branch, TX 78070

Provider:

Rudy Carson

License Info: MP0002036 Expires: 11/30/2025

Technician: Ronnie W Krampota

License Info: M#0001175 Expires: 7/31/2023

To: James Chase

456 Thunderhead Dr Spring Branch, TX 78070 Phone: (830) 995-3189 Fax: (830) 995-4051

Customer ID: 7826

**Contract Period** Start Date: 12/3/2023 End Date: 12/3/2025

Main Phone: (210) 241-0920 Cell Phones: (210) 382-1195

Permit #: 111924

Site: 456 Thunderhead Dr, Spring Branch, TX 78070 County: Comal Installer: Varhol Agency: Comal County Mfg/Brand: Advantage Wastewater LLC-Nu Water-49135

Block Creek Aerobic Services, LLC 3 visits per year - one every 4 months 600 gallons per day

This is to Certify that the above RESIDENTIAL sewage system has an INITIAL inspections agreement per Texas Commission on Environmental Quality (TCEQ) standards for on site sewerage facilities as required.

Inspection reports by the above service company will be filed with the authorized agency as required by the TCEQ regulations. A weather proof tag or label will be attached to the controller showing the month that each inspection was made.

Items included on the Inspection Report generally include aerators, filters, irrigation pump, air compressor, disinfection device, chlorine supply, OK System light, spray field vegetation, probe, sprinkler or drip backwash.

We will visit your site within 48 hours of you notifying us of a problem Date: 11-13-23 Certified Inspector: Rudy

Date Printed: 11/13/2023

Installed: 9/23/2021 Warranty End: 9/23/2023

Printed:12/13/2023 Insp ID #:14980	09		Phone: (830) 995-3189 Fax: (830) 995-4051
To: James Chase 456 Thunderhead Dr Spring Branch, TX 7807( Agency: Comal County County: Comal Mfg / Brand: Advantage Wastewater LL Treatment Type: Aerobic With Chlorine S Disposal: Drip Emitters	-C - Nu Water	Con Scheo	mit #: <b>111924</b> Main Phone: (210) 241-0920 Work: Cell Phone: (210) 382-1195 Alt Cell: Customer ID: 7826 tract Dates: 12/3/2023 - 12/3/2025 stuled Date: 12/3/2023 Inspection 1 of 6 Installed: 9/23/2021 Warranty End: 9/23/2023 : Latitude: 29.930542 Longitude: -98.399800
Service Type: <u>Scheduled Ins</u> Visit Date: <u>12/13/2023</u> Method: <u>Grab</u> Technician: Alejandro Gonzalez Maint. Provider: Rudy Carson	Time In: <u>10:41</u> Out: <u>10:52</u>		This counts as a type of "Scheduled Inspection" Entered By: <u>Trenton L Soldan</u>
Aerators: <u>Operational</u> Filters: <u>Operational</u> Irrigation Pumps: <u>Operational</u> Disinfection Device: <u>Operational</u>	<u>Sludge Levels</u> For Tank 1: <u>18"</u> For Tank 2: <u>6"</u> For Tank 3: <u>0"</u> Floats: <u>OP</u> Timer: <u>OP</u>		Turbidity: <u>Good</u>
Electric Circuits: <u>Operational</u> Distribution System: <u>Operational</u> Sprayfield Veg: <u>Operational</u> Alarm: <u>Operational</u>	Tank Lid / Riser: <u>Secured</u> Color: <u>Good</u> Odor: <u>Good</u>		
Comments - Technician Secured the Tank Lid and/ Cleaned drip filter and back flushed drip	or Riser prior to leaving location Cle	aned compresso	Service Completed r filter - Scum in pretreatment is 4" -
		Sit	e: 456 Thunderhead Dr, Spring Branch, TX 78070
Provider: Rudy Carso	ON Technician:	Alejandro	Gonzalez
License Info: MP0002036 Expires: 11/30/202		0000996 Expires:	

Block Creek Aerobic Services, LLC

444 A Old Hwy No 9 Comfort, TX 78013

Printed:3/27/2024

### Permit: 111924

### Site: 456 Thunderhead Dr, Spring Branch, TX 78070 Main Phone: 2102410920 Cell Phone: 2103821195

James Chase 456 Thunderhead Dr Spring Branch, TX 78070

Agency: Comal County County: Comal

Treatment Type: Aerobic With Chlori	astewater LLC Brand: Nu Water ne Disposal Type: Drip Emitter	ç	Customer ID: 7826
Installed: <u>9/23/2021</u> /isit Details	Warranty Expiration: <u>9/23/2023</u>	System S/N: <u>49135</u>	Insp ID: <u>156286</u>
Visit Date: <u>3/27/2024</u> Scheduled Date: <u>4/3/2024</u> Entered On: <u>3/27/2024</u> isit Results	Entered By: Kaleb Hernandez Time In: <u>1220</u> Time Out: <u>1237</u>	Contract Starts: <u>12/3/2023</u> Contract Ends: <u>12/3/2025</u>	GPS Lat: 29.930542 GPS Long: -98.39980
Service Type: <u>Scheduled In</u> Count: <u>Inspection 2 of 6</u> Method: <u>Grab</u> Technician: <u>Kaleb Hernandez</u> Provider: <u>Rudy Carson</u>	<u>Spection</u> License # <u>MT0002671</u> <u>MP0002036</u>	Expires <u>1/31/2027</u> 11/30/2025	Service Completed
Aerators: <u>Operational</u> Filters: <u>Operational</u> Irrigation Pumps: <u>Operational</u> Disinfection Device: <u>Operational</u>	Sludge Level Tai Sludge Level Tai Sludge Level Tai	nk 2: <u>18''</u>	Turbidity: Good
	Air Fi	lter: Good	
Electric Circuits: Operational Distribution System: Operational	Tank Lid / Ri	iser: <u>Secured</u>	
Drip/Sprayfield Veg: Operational		olor: <u>Good</u> dor: <u>Good</u>	
Alarm: Operational			

- Scum in pretreatment is 4" - Cleaned compressor filter - Cleaned drip filter and back flushed drip field - Technician Secured the Tank Lid and/or Riser prior to leaving location.

Provider:

Rudy Carsen

License: Number: MP0002036 Exp: 11/30/2025

Technician: Kaleb Hernandez

License: Number: MT0002671 Exp: 1/31/2027

## Block Creek Aerobic Services, LLC

444 A Old Hwy No 9 Comfort, TX 78013

Printed:9/10/2024

## Permit: 111924

## Site: 456 Thunderhead Dr, Spring Branch, TX 78070

Main Phone: 2102410920 Cell Phone: 2103821195

James Chase 456 Thunderhead Dr Spring Branch, TX 78070

Agency: Comal County County: Comal

System Info: MFG: Advantage Wa			Customer ID: 7826
Treatment Type: <u>Aerobic With Chlorir</u>	wither the last the second the second second		Insp ID: 163158
Installed: <u>9/23/2021</u> isit Details	Warranty Expiration: <u>9/23/2023</u>	System S/N: <u>49135</u>	
Visit Date: <u>9/10/202</u> 4	Entered By: Nicholas R Zigalo		GPS Lat: 29.930542 GPS Long: -98.3998
Scheduled Date: 8/3/2024	(	Contract Starts: <u>12/3/2023</u>	0.1111
Entered On: 9/10/2024	Contract Ends: <u>12/3/2025</u>		
isit Results			
Service Type: Scheduled Ins	spection		
Count: Inspection 3 of 6			
Method: Grab	License #	Expires	
Technician: Nicholas R Zigalo	MT0002016	12/31/2026	
Provider: Rudy Carson	MP0002036	11/30/2025	<ul> <li>Service Completed</li> </ul>
Aerators: Operational	Cludge Lough Tow		
Filters: Operational	Sludge Level Tan Sludge Level Tan		
Irrigation Pumps: Operational	Sludge Level Tan		
Disinfection Device: Operational			
	Floa	ats: <u>OP</u>	
	Tin	ner: <u>OP</u>	
	Tank Lid / Ris	ser: Secured	
Electric Circuits: Operational		<u>secureu</u>	
Distribution System: Operational			
Drip/Sprayfield Veg: Operational			
Alarm: Operational			
Operational			
omments			

- Scum in pretreatment is 4" - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Cleaned compressor filter - Cleaned drip filter and back flushed drip field

Provider:

Rudy Carson

License: Number: MP0002036 Exp: 11/30/2025

Technician: Nicholas R Zigalo

License: Number: MT0002016 Exp: 12/31/2026