



COMAL COUNTY

ENGINEER'S OFFICE

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: 09/20/2022 Permit Number: 113857

Location Description: 469 WEST OVERLOOK DR
CANYON LAKE, TX 78133

Subdivision: CANYON SPRING RESORT
Unit: 5
Lot: 1, 2, 3
Block: 68
Acreage: 0.0000

Type of System: Aerobic
Drip Irrigation

Issued to: DIG:B, LLC

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

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

Alterations to this permit including, but not limited to:

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

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

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

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

Licensing Authority
Comal County Environmental Health

OS0036769

ENVIRONMENTAL HEALTH INSPECTOR

Assistant
OS0034792

ENVIRONMENTAL HEALTH COORDINATOR

Comal County Environmental Health

OSSF Inspection Sheet

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

Inspector Notes:

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If Single Tank, 2 Compartments Provided with Baffle SEPTIC TANK Inlet Flowline Greater than 3" and " T " Provided on Inlet and Outlet SEPTIC TANK Septic Tank(s) Meet Minimum Requirements		285.32(b)(1) (E) 285.91(2) 285.32(b)(1) (F) 285.32(b)(1)(E) (iii) 285.32(b)(1)(E)(ii) (II) 285.32(b)(1)(E)(ii) (I) 285.32(b)(1)(E) (i) 285.32(b)(1) (D) 285.32(b)(1)(C) (ii) 285.32(b)(1)(C) (i) 285.32(b)(1) (B) 285.32(b)(1) (A) 285.32(b)(1)(E)(iv)				
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
10	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
11	SEPTIC TANK Secondary restraint system provided SEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
12	SEPTIC TANK Tank Volume Installed						
13	PUMP TANK Volume Installed						
14	AEROBIC TREATMENT UNIT Size Installed						
15	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 Drip Irrigation		285.33(c)(3)(A)-(F)				

6/27/22 CA: Need revision to curlex need second structure and tightline re inspection fee needed.

9/13/22 CA: Covered need revision to curlex.

9/20/22 CA: Revision Received.

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart		285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3)(B) 285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)				
33	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.		285.32(c)(1)				
34	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions						
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
37	PUMP TANK 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?		285.33(d)(2)(G)(iii)(II) 285.33(d)(2)(G)(iii)(III) 285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(I)				
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed		285.33(d)(2)(G) (i)285.33(d)(2) (A)285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



COMAL COUNTY

ENGINEER'S OFFICE

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

Permit Number: 113857
Issued This Date: 01/11/2022
This permit is hereby given to: DIG:B, LLC

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

469 WEST OVERLOOK DR
CANYON LAKE, TX 78133

Subdivision: CANYON SPRING RESORT
Unit: 5
Lot: 1, 2, 3
Block: 68
Acreage: 0.0000

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.

RECEIVED

By KG at 12:38 pm, Jan 10, 2022



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

--	--

Date Received

Initials

113857

Permit Number

Instructions:

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

OSSF Permit

- ☒ Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate
- ☒ Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer
- ☒ Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist of a scaled design and all system specifications.
- ☒ Required Permit Fee - 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

Date

___ COMPLETE APPLICATION

Check No. _____ Receipt No. _____

INCOMPLETE APPLICATION

___ (Missing Items Circled, Application Refeused)



COMAL COUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

REVISED

10:35 am, Aug 24, 2022

195 DAVID JONAS DR
NEW BRAUNFELS, TX 78132
(830) 608-2090

WWW.CCEO.ORG

Date September 15, 2021

Permit Number 113857

1. APPLICANT / AGENT INFORMATION

Owner Name DIGB, LLC
Mailing Address 7631 W. HWY 290, #427
City, State, Zip AUSTIN, TX 78736
Phone # 361-243-1292
Email laseymarie@gmail.com

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

2. LOCATION

Subdivision Name CANYON SPRINGS RESORT Unit 5 Lot 1, 2, & 3 Block 68
Survey Name / Abstract Number _____ Acreage _____
Address 469 WEST OVERLOOK DRIVE City CANYON LAKE State TX Zip 78133

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

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

Number of Bedrooms 3

Indicate Sq Ft of Living Area 800

☐ Non-Single Family Residential

(Planning materials must show adequate land area for doubling the required land needed for treatment units and disposal area)

Type of Facility _____

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

Restaurants, Lounges, Theaters - Indicate Number of Seats _____

Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds _____

Travel Trailer/RV Parks - Indicate Number of Spaces _____

Miscellaneous _____

Estimated Cost of Construction: \$ 120,000 (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 ☐ Rainwater Collection

4. SIGNATURE OF OWNER

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. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property.
- Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities..
- I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

[Signature]
Signature of Owner

12.28.21
Date

113857

* * * COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH

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

2:53 pm, Apr 07, 2022

Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.System Description PROPRIETARY; AEROBIC TREATMENT AND DRIP TUBING

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

Tank Size(s) (Gallons) MAXX AIR M-600 Absorption/Application Area (Sq Ft) 2500Gallons Per Day (As Per TCEQ Table III) 300

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

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

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

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

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

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

(If yes, the R.S. or P. E. shall certify that the OSSF design 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 ☐ NoIs there an existing TCEQ approval CZP for the property? ☐ Yes ☒ No

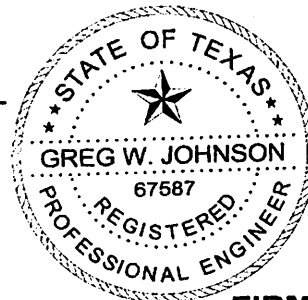
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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

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

Is this property within an incorporated city? ☐ Yes ☒ No

If yes, indicate the city: _____

**FIRM #2585**

By signing this application, I certify that:

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

Signature of Designer [Signature]Date September 15, 2021

AFFIDAVIT**THE COUNTY OF COMAL
STATE OF TEXAS****CERTIFICATION OF OSSF REQUIRING MAINTENANCE**

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities (OSSF's), this document is filed in the Deed Records of Comal County, Texas.

I

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

II

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

5 UNIT/PHASE/SECTION 68 BLOCK 1,2,3 LOT CANYON SPRINGS RESORT SUBDIVISION

IF NOT IN SUBDIVISION: _____ ACREAGE _____ SURVEY

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

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

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

WITNESS BY HAND(S) ON THIS 28th DAY OF December, 2021

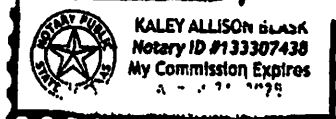
x Craig
Owner(s) signature(s)

Craig Hoverman - Manager
Owner (s) Printed name (s)

craig Hoverman
December 21

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 28th DAY OF

[Signature]
Notary Public Signature



AFFIDAVIT TO THE PUBLIC

THE COUNTY OF COMAL §
STATE OF TEXAS §

Before me, the undersigned authority, on this day personally appeared Craig Hoverman w/ DIG:B, LLC, who after being by me duly sworn, upon oath state that they are the owner of record of that certain tract or parcel of land lying and being situated in Comal County, Texas, and being more particularly described as follows:

5 UNIT/PHASE/SECTION 68 BLOCK 1,2,&3 LOT CANYON SPRINGS RESORT SUBDIVISION

IF NOT IN SUBDIVISION: _____ ACREAGE _____ SURVEY

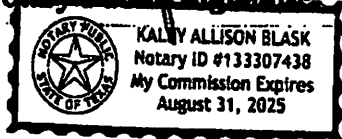
The undersigned further state that the on-site sewage facility for the referenced properties crosses the boundary between the properties. These properties cannot be sold separately and must be sold as one. Any buyer or transferee is hereby notified of this requirement.

WITNESS MY/OUR HAND(S) on this 28th day of December, 20 21.

x Craig _____ Craig Hoverman - Manager

SWORN TO AND SUBSCRIBED BEFORE ME on this 28th day of December, 20 21.

Kathy Allison Blask
Notary Public Signature



Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
01/04/2022 11:43:36 AM
TERRI 2 Pages(s)
202206000449



Bobbie Koepp

THE COUNTY OF COMAL
STATE OF TEXAS

CERTIFICATION OF SINGLE FAMILY DWELLING

According to Texas Commission of Environmental Quality Rules for On-Site Sewage Facilities, this document is filed in the Deed Records of COMAL COUNTY, TEXAS.

Before me this day appeared Craig Hoverman DIG:B, LLC, being the owners of the referenced property at 469 WEST OVERLOOK DRIVE. They further state that the Residence and any additional living space on this property will be occupied only by a single family.

An OSSF requiring a Certification of Single Family Dwelling, will be installed on the property described as:

5 UNIT 68 BLOCK 1, 2, & 3 LOT CANYON SPRINGS RESORT SUBDIVISION

IF NOT IN SUBDIVISION: _____ ACREAGE _____ SURVEY _____

The property is owned by DIG:B, LLC

WITNESS MY HAND ON THIS 28th OF DAY OF December, 20 21.

Craig Hoverman
OWNER (SIGNATURE)

OWNER (SIGNATURE)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 28th DAY OF December, 20 21 BY

Craig Hoverman - Manager
OWNER NAME (PRINTED)

OWNER NAME (PRINTED)

Notary Public Signature



KALEY ALLISON BLASK
Notary ID #133307438
My Commission Expires
August 31, 2025

(Notary Seal)

WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

Regulatory Authority COMAL
Block Creek Aerobic Services, LLC
444 A Old Hwy #9
Comfort, TX 78013
Off. (830) 995-3189
Fax. (830) 995-4051

2 YEAR CONTRACT
2 YEAR WARRANTY ON PARTS AND LABOR

Permit/License Number _____
Customer DIG:B, LLC
Site Address 469 WEST OVERLOOK DRIVE
City CANYON LAKE, TX 78133
Mailing Address 7631 W. HWY 290, #427, AUSTIN, TX 78736
County COMAL Map # 354 F3
Phone 361-243-1292
Email laseymarie@gmail.com

SUBDIVISION/LEGAL: CANYON SPRINGS RESORT, UNIT 5,
BLOCK 68, LOT 1, 2, & 3

I. General: This Work for Hire Agreement (hereinafter referred to as "Agreement") is entered into by and between DIG:B, LLC (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) days 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:

- 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.
- Provide a written record of visits to the site by means of an inspection tag attached to or contained in the control panel.
- 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 within two (2) business days after said notification.
- Provide sample collection and laboratory testing of TSS and BOD on a yearly basis (commercial systems only).
- Forward copies of this Agreement and all reports to the regulatory agency and the Customer.


Customer's Initials



BS

Contractor'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:

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):

1. 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 Contractor 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 Contractor, 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 Customer's 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


Customer's Initials



BS

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 INDEMNIFICATION 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:

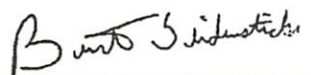
Full payment is due upon execution of this Agreement (Required of new Customer). For any other service(s) or repair(s) provided by Contractor the Customer shall pay the invoice(s) for said service(s) or repair(s) within thirty (30) days of the invoice date. The Contractor shall mail all invoices on the 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.


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



Customer's Initials


Customer Signature

12.28.21
Date

©
copyright
all rights reserved

BS

Contractor's Initials

ON-SITE SEWERAGE FACILITY SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed: April 15, 2021

Site Location: CANYON SPRINGS RESORT, UNIT 5, BLOCK 68, LOTS 1, 2, 3

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.

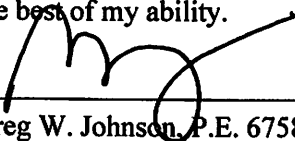
For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated.

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

SOIL BORING NUMBER <u> </u> SURFACE EVALUATION <u> </u>						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	III	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 18"	BROWN
1						
2						
3						
4						
5						

SOIL BORING NUMBER <u> </u> SURFACE EVALUATION <u> </u>						
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

04/15/2021
Date

OSSF SOIL EVALUATION REPORT INFORMATION

Date: September 15, 2021

Applicant Information:

Name: DIG:B, LLC.
Address: 7631 W. HWY 290 #427
City: AUSTIN State: TEXAS
Zip Code: 78736 Phone: (361) 243-1292

Site Evaluator Information:

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

Property Location:


Lot ^{SEE BELOW} Unit 5 Blk 68 Subd. CANYON SPRINGS RESORT
Street Address: 469 WESTOVERLOOK DRIVE
City: CANYON LAKE Zip Code: 78133
Additional Info.: LOTS 1, 2, 3

Installer Information:

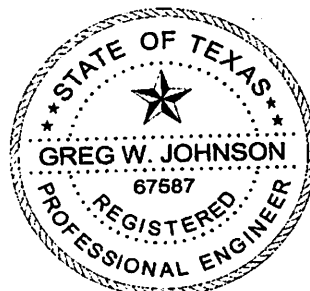
Name: _____
Company: _____
Address: _____
City: _____ State: _____
Zip Code: _____ Phone _____

Topography: Slope within proposed disposal area: 3 %
Presence of 100 yr. Flood Zone: YES _____ NO X
Existing or proposed water well in nearby area. YES _____ NO X
Presence of adjacent ponds, streams, water impoundments YES _____ NO X
Presence of upper water shed YES _____ NO X
Organized sewage service available to lot YES _____ NO X

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


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

09/15/2021
DATE



FIRM #2585

#113857

REVISED

8:55 am, Sep 14, 2022

DRIP TUBING SYSTEM
DESIGNED FOR:
DIG:B, LLC
7631 W. HWY 290, #427
AUSTIN, TEXAS 78736

SITE DESCRIPTION:

Located in Canyon Springs Resort, Unit 5, Block 68, Lot 1,2, & 3, on 469 West Overlook Drive, the proposed system will serve a one bedroom residence (800 sf) and personal RV situated in an area with 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 or 4 inch SCH-40 pipe discharges from the residence and RV into a Maxx Air M600 600 gpd aerobic treatment plant containing a 353 gal. pretreatment chamber and a 768 gal. pump chamber. The effluent after processing gravity feeds into the pump chamber. The pump chamber contains a 0.5 HP Franklin C1-Series-20XC105P4-2W115 submersible pump or equivalent. The well pump is activated by mercury floats and a timer set to cycle eight times per day with a tank operating level from 50-70 gallons. A high level audible and visual alarm will activate should the pump fail. Distribution is through a self flushing 100 micron Arkal 1" Super Filter, disk filter " filter then through a 1" SCH-40 manifold to a 2500 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 Model PMR30MF 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 Arkal disk filter are flushed each cycle back to the trash tank. Agricultural Products, Inc. (Model #VBK-1) 1" PVC vacuum breakers installed at the highest point on each manifold will prevent siphoning of effluent from higher to lower parts of the field. Prior to installing tubing the entire field must be scarified and built up with two inches of Type II or III soil. Drip tubing will be laid and the entire field area will be capped with 6" of loamy soil (Type 2 or 3 - **NOT SAND**). The field area will be covered with Curlex erosion control blankets and heavily seeded or sodded with grass with hearty grass such as Bermuda, St. Augustine, etc. prior to system startup.

Tanks 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:

Q = 300 gpd Design Rate - 1 bedroom Residence & Personal RV = 220 gpd (Table III)
Pretreatment tank size: 353 Gal

Plant Size: Maxx Air M600- 600 GPD (TCEQ Approved)

Pump tank size: 768 Gal

Reserve capacity after High Level: 100 gal. (1/3 day usage)

Application Rate: $R_a = 0.2$ gal/sf

Total absorption area: $Q/R_a = 300 \text{ GPD}/0.20 = 1500 \text{ sf.}$ (Actual 2500 sf.)

Total linear feet drip tubing: 1250' *Netifim Bioline* drip tubing .61 GPH

Pump requirement: 625 emitters @ 0.61 gph @ 30 psi = 6.354 gpm

Pump: 0.5 HP Franklin C1-Series-20XC105P4-2W115 submersible pump or equivalent.

Dosing volume: 50-70 gal.

Pump Tank Calculations: 768 Gal (14.5 gal/in.)

Volume below working level = 15" = 218 gal

Working level = 300 gal = 21"

Reserve Requirement = 1 day = 100 gal. = 7"

MINIMUM SCOUR VELOCITY (MSV) > 2 FPS

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

$MSV = 2 \text{ FPS } (\pi d^5 / 2) / 4 * 7.48 \text{ gal/cf} * 60 \text{ sec/min}$

$MSV = 2(3.14159((.55/12)^5 / 2) / 4) * 7.48 * 60$

$MSV = 1.5 \text{ gpm MIN FLOW RATE} \times 4 \text{ lines} = 6 \text{ gpm}$

IN RETURN MANIFOLD W/ NOM. DIA 1.049" ID

$MSV = 2 \text{ FPS } (\pi d^5 / 2) / 4 * 7.48 \text{ gal/cf} * 60 \text{ sec/min}$

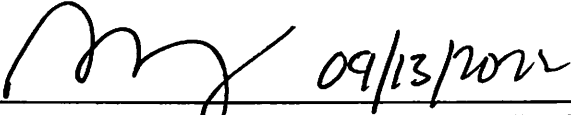
$MSV = 2(3.14159((1.049/12)^5 / 2) / 4) * 7.48 * 60$

$MSV = 5.4 \text{ GPM}$

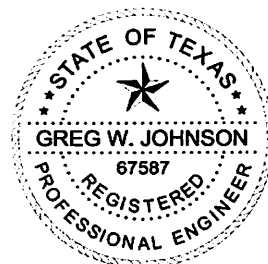
PIPE AND FITTINGS:

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

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



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



NOTE:
NO OSSF SYSTEM CAN BE INSTALLED ON
THE SAME PROPERTY AS THE SINGLE
FAMILY DWELLING, DUE TO PLACEMENT OF
HOUSE AND SIZE OF LOT. DIG:B, LLC.
OWNS ALL THREE PROPERTIES.

#113857

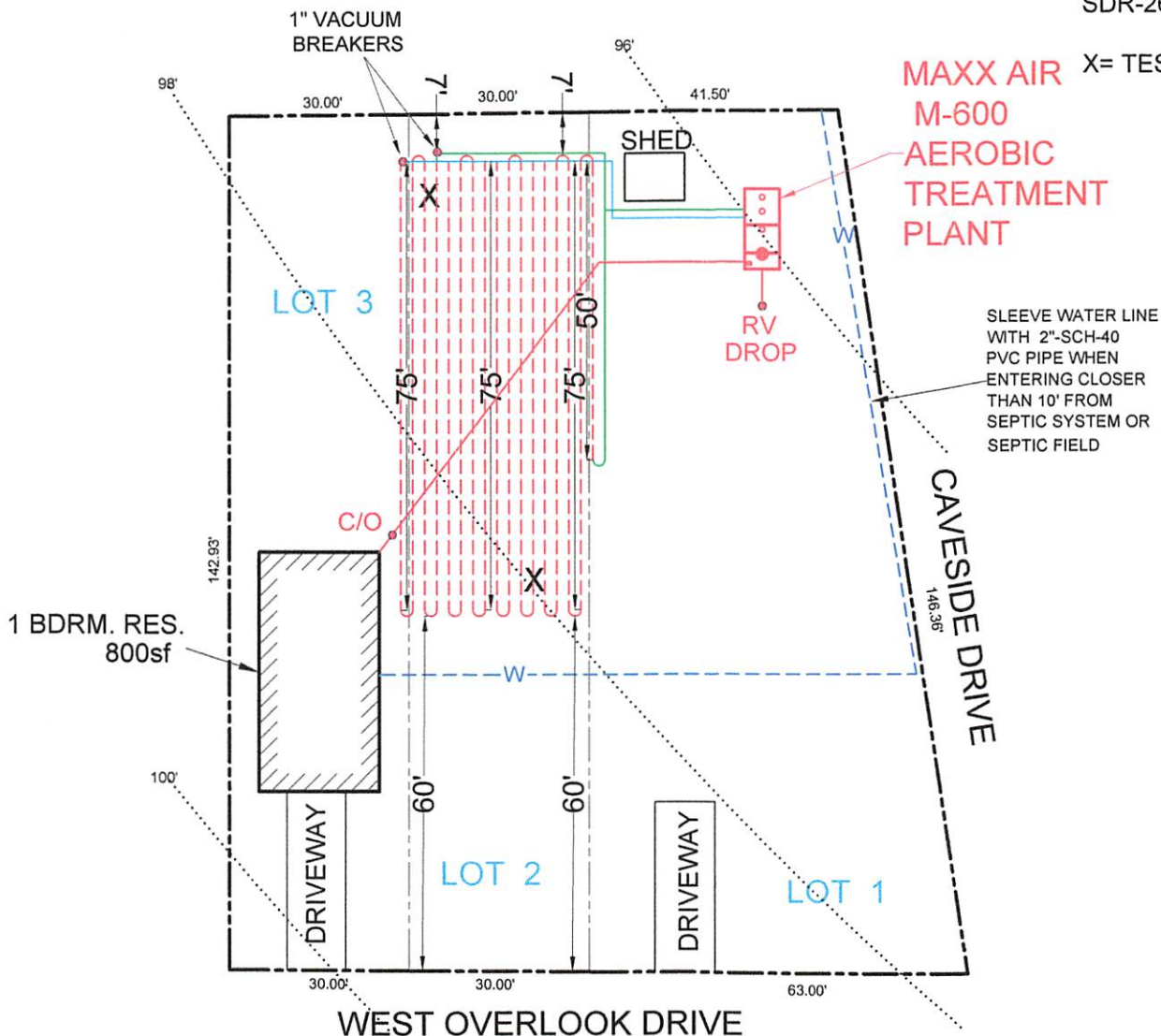
REVISED

7:57 am, Sep 20, 2022

INSTALL 2500sf OF
FIELD USING 1250'
OF DRIP TUBING.
THERE SHALL BE
NO PARKING,
DRIVING OR
STORAGE ON THE
SEPTIC FIELD AT
ANY TIME FOR ANY
REASON.

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

X= TEST HOLE



OWNER: DIG:B, LLC.				DRAWN BY: EJS III			
STREET ADDRESS: 469 WEST OVERLOOK DRIVE							
LEGAL DESC: CANYON SPRINGS RESORT				UNIT/SECTION/PHASE: 5		BLOCK: 68	LOT: 1,2,3
PREPARED BY: GREG W. JOHNSON, P.E. F#002585		SCALE: 1"=30'		DATE: 4/16/2021		3rd REVISION: 9/7/2022	

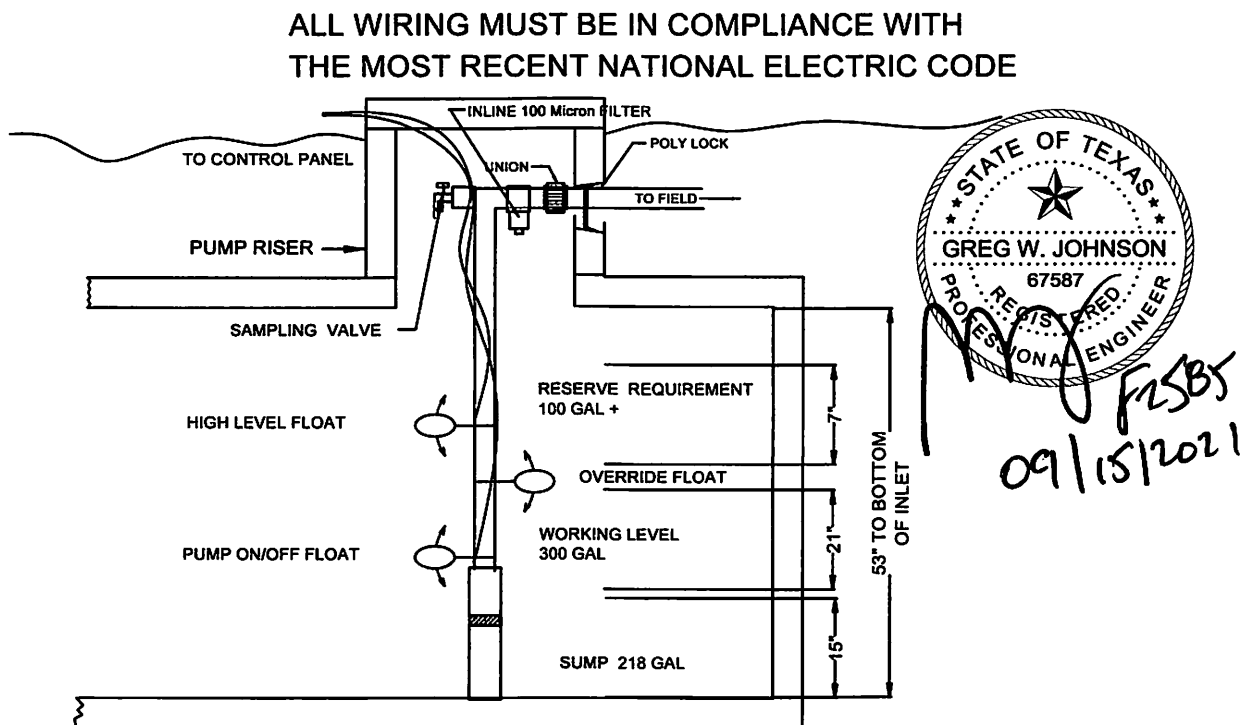
TANK NOTES:

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



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

From: [Ritzen, Brenda](#)
To: ["Greg Johnson"](#); [Helmke, Shelly K.](#)
Cc: [Katelyn Neumann](#); [Traci Field](#)
Subject: RE: OSSF P#113857 for 469 West Overlook Drive
Date: Tuesday, September 20, 2022 7:59:00 AM
Attachments: [image001.png](#)

Greg,

The permit file has been updated. The installer will need to contract our office when ready for final inspection.

Thank you,



Brenda Ritzen

Environmental Health Coordinator
195 David Jonas Dr.
New Braunfels, TX 78132
DR:OS00007722
830-608-2090
www.cceo.org

From: Greg Johnson <gregjohnsonpe@yahoo.com>
Sent: Tuesday, September 20, 2022 7:54 AM
To: Helmke, Shelly K. <helmks@co.comal.tx.us>; Ritzen, Brenda <rabbjr@co.comal.tx.us>
Cc: Katelyn Neumann <katelyn@psseptics.com>; Traci Field <traci@psseptics.com>
Subject: Re: OSSF P#113857 for 469 West Overlook Drive

This email originated from outside of the organization.

Do not click links or open attachments unless you recognize the sender and know the content is safe.

- Comal IT

REVISED TO REMOVE DETACHED LIVING NOTE.
THX,
GREG

Send for Greg W. Johnson, P.E., R.S.)

170 Hollow Oak

New Braunfels, TX 78132

From: [Ritzen, Brenda](#)
To: ["Greg Johnson"](#)
Cc: [Kyle Krohn](#); [Katelyn Neumann](#); [Traci Field](#)
Subject: RE: 4659 West Overlook Dr - Dig:B #113857
Date: Wednesday, August 24, 2022 10:43:00 AM
Attachments: [image001.png](#)

Greg,

If the 1 bedroom will now serve as the single family residence, please revise the description.

Thank you,



Brenda Ritzen
Environmental Health Coordinator
195 David Jonas Dr.
New Braunfels, TX 78132
DR:OS00007722
830-608-2090
www.cceo.org

From: Greg Johnson <gregjohnsonpe@yahoo.com>
Sent: Wednesday, August 24, 2022 8:24 AM
To: Ritzen, Brenda <rabbjr@co.comal.tx.us>
Cc: Kyle Krohn <kyle@psseptics.com>; Katelyn Neumann <katelyn@psseptics.com>; Traci Field <traci@psseptics.com>
Subject: 4659 West Overlook Dr - Dig:B #113857

This email originated from outside of the organization.

Do not click links or open attachments unless you recognize the sender and know the content is safe.

- Comal IT

Revised.
Thanks,
Greg

Send for Greg W. Johnson, P.E., R.S.)

170 Hollow Oak

New Braunfels, TX 78132

NOTE:
NO OSSF SYSTEM CAN BE INSTALLED ON
THE SAME PROPERTY AS THE SINGLE
FAMILY DWELLING, DUE TO PLACEMENT OF
HOUSE AND SIZE OF LOT. DIG:B, LLC.
OWNS ALL THREE PROPERTIES.

VOID REVISED

10:35 am, Aug 24, 2022

INSTALL 2500sf OF
FIELD USING 1250'
OF DRIP TUBING.
THERE SHALL BE
NO PARKING,
DRIVING OR
STORAGE ON THE
SEPTIC FIELD AT
ANY TIME FOR ANY
REASON.

*USE TWO WAY
CLEANOUTS

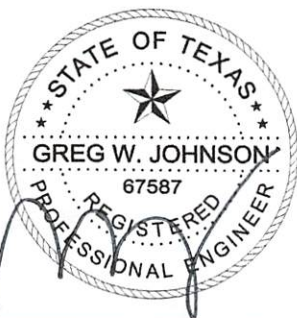
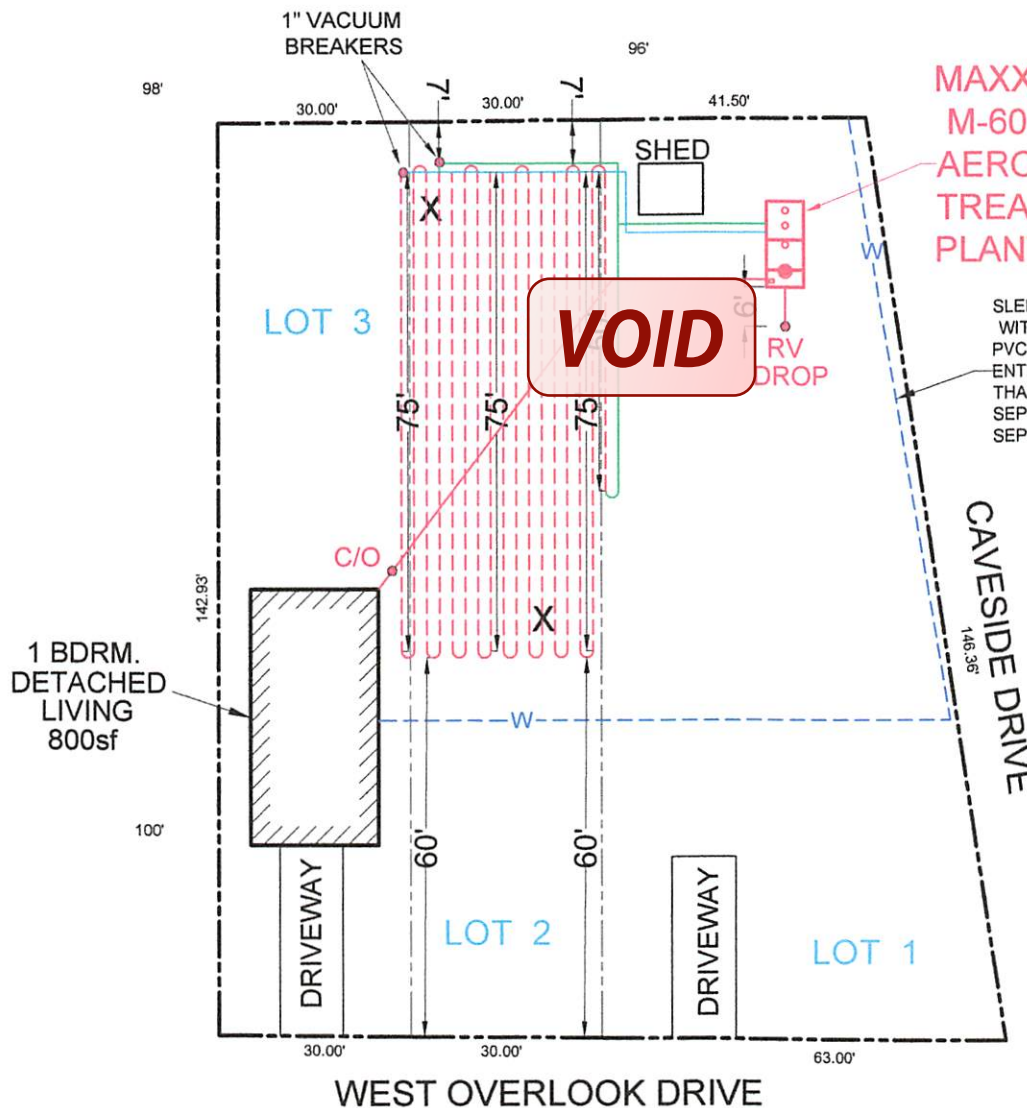
**USE SCH-40 OR
SDR-26 TO TANK

X= TEST HOLE

MAXX AIR
M-600
AEROBIC
TREATMENT
PLANT

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

CAVESIDE DRIVE



OWNER: DIG:B, LLC.					DRAWN BY: EJS III	
STREET ADDRESS: 469 WEST OVERLOOK DRIVE						
LEGAL DESC: CANYON SPRINGS RESORT				UNIT/SECTION/PHASE: 5	BLOCK: 68	LOT: 1,2,3
PREPARED BY: GREG W. JOHNSON, P.E. F#002585		SCALE: 1"=30'	DATE: 4/16/2021		3rd REVISION: 8/23/2022	

VOID**DRIP TUBING SYSTEM**

DESIGNED FOR:

DIG:B, LLC

7631 W. HWY 290, #427

AUSTIN, TEXAS 78736

SITE DESCRIPTION:

Located in Canyon Springs Resort, Unit 5, Block 68, Lot 1,2, & 3, on 469 West Overlook Drive, the proposed system will serve a one bedroom residence (800 sf) and personal RV situated in an area with 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 or 4 inch SCH-40 pipe discharges from the residence and RV into a Maxx Air M600 600 gpd aerobic treatment plant containing a 353 gal. pretreatment chamber and a 768 gal. pump chamber. The effluent after processing gravity feeds into the pump chamber. The pump chamber contains a 0.5 HP Franklin C1-Series-20XC105P4-2W115 submersible pump or equivalent. The well pump is activated by mercury floats and a timer set to cycle eight times per day with a tank operating level from 50-70 gallons. A high level audible and visual alarm will activate should the pump fail. Distribution is through a self flushing 100 micron Arkal 1" Super Filter, disk filter " filter then through a 1" SCH-40 manifold to a 2500 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 Model PMR30MF 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 Arkal disk filter are flushed each cycle back to the trash tank. Agricultural Products, Inc. (Model #VBK-1) 1" PVC vacuum breakers installed at the highest point on each manifold will prevent siphoning of effluent from higher to lower parts of the field. Prior to installing tubing the entire field must be scarified and built up with two inches of Type II or III soil. Drip tubing will be laid and the entire field area will be capped with 6" of loamy soil (Type 2 or 3 - **NOT SAND**). The field area will be sodded with grass with hearty grass such as Bermuda, St. Augustine, etc. prior to system startup.

Tanks 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:

Q = 300 gpd Design Rate - 1 bedroom Residence & Personal RV = 220 gpd (Table III)

Pretreatment tank size: 353 Gal

Plant Size: Maxx Air M600- 600 GPD (TCEQ Approved)

VOID

REVISED

10:35 am, Aug 24, 2022

Pump tank size: 768 Gal

Reserve capacity after High Level: 100 gal. (1/3 day usage)

Application Rate: $R_a = 0.2$ gal/sf

Total absorption area: $Q/R_a = 300 \text{ GPD}/0.20 = 1500 \text{ sf}$. (Actual 2500 sf.)

Total linear feet drip tubing: 1250' *Netifim Bioline* drip tubing .61 GPH

Pump requirement: 625 emitters @ 0.61 gph @ 30 psi = 6.354 gpm

Pump: 0.5 HP Franklin C1-Series-20XC105P4-2W115 submersible pump or equivalent.

Dosing volume: 50-70 gal.

Pump Tank Calculations: 768 Gal (14.5 gal/in.)

Volume below working level = 15" = 218 gal

Working level = 300 gal = 21"

Reserve Requirement = 1 day = 100 gal. = 7"

MINIMUM SCOUR VELOCITY (MSV) > 2 FPS

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

$MSV = 2 \text{ FPS } (\pi d^5/2)/4 * 7.48 \text{ gal/cf} * 60 \text{ sec/min}$

$MSV = 2(3.14159((.55/12)^5/2)/4) * 7.48 * 60$

$MSV = 1.5 \text{ gpm MIN FLOW RATE} \times 4 \text{ lines} = 6 \text{ gpm}$

IN RETURN MANIFOLD W/ NOM. DIA 1.049" ID

$MSV = 2 \text{ FPS } (\pi d^5/2)/4 * 7.48 \text{ gal/cf} * 60 \text{ sec/min}$


$MSV = 2(3.14159((1.049/12)^5/2)/4) * 7.48 * 60$

$MSV = 5.4 \text{ GPM}$

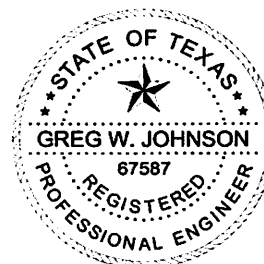
PIPE AND FITTINGS:

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

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

 08/24/2022

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



From: Ritzen, Brenda
To: ["Greg Johnson"](#)
Cc: [Katelyn Neumann](#); [Traci Field](#)
Subject: RE: 469 WEST OVERLOOK DR - DIG:B #113857
Date: Monday, April 11, 2022 10:33:00 AM
Attachments: [image001.png](#)

Greg,

The permit tank detail sheet in the permit file is for a Nu-Water.

Thank you,



Brenda Ritzen
Environmental Health Coordinator
195 David Jonas Dr.
New Braunfels, TX 78132
DR:OS00007722
830-608-2090
www.cceo.org

From: Greg Johnson <gregjohnsonpe@yahoo.com>
Sent: Sunday, April 10, 2022 7:50 AM
To: Ritzen, Brenda <rabbjr@co.comal.tx.us>
Cc: Katelyn Neumann <katelyn@psseptics.com>; Traci Field <traci@psseptics.com>
Subject: Re: 469 WEST OVERLOOK DR - DIG:B #113857

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- Comal IT

See attached.

Thx,
Greg

Send for Greg W. Johnson, P.E., R.S.)

170 Hollow Oak

New Braunfels, TX 78132

From: Ritzen, Brenda
To: ["Greg Johnson"](#)
Cc: [Katelyn Neumann](#); [Traci Field](#)
Subject: RE: 469 WEST OVERLOOK DR - DIG:B #113857
Date: Thursday, April 7, 2022 2:58:00 PM
Attachments: [image001.png](#)
[Pages from 113857.pdf](#)

Greg,

The system spec sheet and pump tank detail will also need to be updated to the Maxx Air ATU.

Thank you,



Brenda Ritzen
Environmental Health Coordinator
195 David Jonas Dr.
New Braunfels, TX 78132
DR:OS00007722
830-608-2090
www.cceo.org

From: Greg Johnson <gregjohnsonpe@yahoo.com>
Sent: Thursday, April 7, 2022 12:36 PM
To: Ritzen, Brenda <rabbjr@co.comal.tx.us>
Cc: Katelyn Neumann <katelyn@psseptics.com>; Traci Field <traci@psseptics.com>
Subject: 469 WEST OVERLOOK DR - DIG:B #113857

This email originated from outside of the organization.

Do not click links or open attachments unless you recognize the sender and know the content is safe.

- Comal IT

REVISED.
THX,
GREG

Send for Greg W. Johnson, P.E., R.S.)

170 Hollow Oak

New Braunfels, TX 78132



COMAL COUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE TREATMENT SYSTEM APPLICATION

VOID

195 DAVID JONAS DR
NEW BRAUNFELS, TX 78132
(830) 608-2090
WWW.CCEO.ORG

Date September 15, 2021Permit Number 113857

1. APPLICANT / AGENT INFORMATION

Owner Name DI4B, LLC
Mailing Address 7631 W. HWY 290, #427
City, State, Zip AUSTIN, TX 78736
Phone # 361-243-1292
Email laseymarie@gmail.com

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

2. LOCATION

Subdivision Name CANYON SPRINGS RESORT Unit 5 Lot 1, 2, & 3 Block 68

Survey Name / Abstract Number _____ Acreage _____

Address 469 WEST OVERLOOK DRIVE City CANYON LAKE State TX Zip 78133

3. TYPE OF DEVELOPMENT

☒ Single Family ResidentialType of Construction (House, Mobile, RV, Etc.) HOUSE & DETACHED LIVINGNumber of Bedrooms 3 + 1Indicate Sq Ft of Living Area 1980 + 800☐ Non-Single Family Residential

(Planning materials must show adequate land area for doubling the required land needed for treatment units and disposal area)

Type of Facility _____

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

Restaurants, Lounges, Theaters - Indicate Number of Seats _____

Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds _____

Travel Trailer/RV Parks - Indicate Number of Spaces _____

Miscellaneous _____

VOID

Estimated Cost of Construction: \$ 350,000 (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 ☐ Rainwater Collection

4. SIGNATURE OF OWNER

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. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property.
- Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities..
- I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Signature of Owner

Date

12.28.21

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

APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN
ON-SITE SEWAGE TREATMENT FACILITY AND LICENSE TO OPERATE**VOID**Planning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.System Description PROPRIETARY; AEROBIC TREATMENT AND DRIP TUBING

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

Tank Size(s) (Gallons) NUWATER B-550-PC Absorption/Application Area (Sq Ft) 2500Gallons Per Day (As Per TCEQ Table III) 300

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

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

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

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

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

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

(If yes, the R.S. or P. E. shall certify that the OSSF design 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 ☐ NoIs there an existing TCEQ approval CZP for the property? ☐ Yes ☒ No

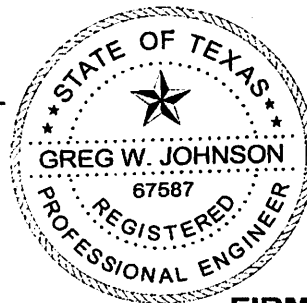
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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

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

Is this property within an incorporated city? ☐ Yes ☒ No

If yes, indicate the city: _____

**FIRM #2585**

By signing this application, I certify that:

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

Signature of Designer

September 15, 2021
Date

#113857

VOID**REVISED**

10:31 am, Apr 11, 2022

DRIP TUBING SYSTEM

DESIGNED FOR:

DIG:B, LLC

7631 W. HWY 290, #427

AUSTIN, TEXAS 78736

SITE DESCRIPTION:

Located in Canyon Springs Resort, Unit 5, Block 68, Lot 1,2, & 3, on 469 West Overlook Drive, the proposed system will serve a three bedroom residence (1980 sf.) & one bedroom detached living (800 sf) situated in an area with 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 or 4 inch SCH-40 pipe discharges from the residence and detached living into a Maxx Air M600 600 gpd aerobic treatment plant containing a 353 gal. pretreatment chamber and a 768 gal. pump chamber. The effluent after processing gravity feeds into the pump chamber.

The pump chamber contains a 0.5 HP Franklin C1-Series-20XC105P4-2W115 submersible pump or equivalent. The well pump is activated by mercury floats and a timer set to cycle eight times per day with a tank operating at 50-70 gallons. A high level audible and visual alarm will activate should the pump fail. Distribution is through a self flushing 100 micron Arkal 1" Super Filter, disk filter " filter then through a 1" SCH-40 manifold to a 2500 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 Model PMR30MF 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 Arkal disk filter are flushed each cycle back to the trash tank. Agricultural Products, Inc. (Model #VBK-1) 1" PVC vacuum breakers installed at the highest point on each manifold will prevent siphoning of effluent from higher to lower parts of the field. Prior to installing tubing the entire field must be scarified and built up with two inches of Type II or III soil. Drip tubing will be laid and the entire field area will be capped with 6" of loamy soil (Type 2 or 3 - **NOT SAND**). The field area will be sodded with grass with hearty grass such as Bermuda, St. Augustine, etc. prior to system startup.

Tanks 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:

Q = 300 gallons per day - 3 bedroom residence & 1 bedroom detached living (Table III)

Pretreatment tank size: 353 Gal

VOID

REVISED

10:31 am, Apr 11, 2022

Plant Size: Maxx Air M600- 600 GPD (TCEQ Approved)
Pump tank size: 768 Gal
Reserve capacity after High Level: 100 gal. (1/3 day usage)
Application Rate: $R_a = 0.2 \text{ gal/sf}$
Total absorption area: $Q/R_a = 300 \text{ GPD}/0.20 = 1500 \text{ sf}$. (Actual 2500 sf.)
Total linear feet drip tubing: 1250' *Netifim Bioline* drip tubing .61 GPH
Pump requirement: 625 emitters @ 0.61 gph @ 30 psi = 6.354 gpm
Pump: 0.5 HP Franklin C1-Series-20XC105P4-2W115 submersible pump or equivalent.
Dosing volume: 50-70 gal.

Pump Tank Calculations: 768 Gal (14.5 gal/in.)
Volume below working level = 15" = 218 gal
Working level = 300 gal = 21"
Reserve Requirement = 1 day = 100 gal. = 7"

MINIMUM SCOUR VELOCITY (MSV) > 2 FPS
IN DRIP TUBING W/ NOM. DIA. 0.55" ID

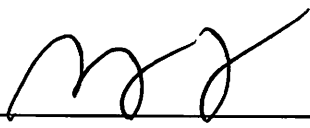
$MSV = 2 \text{ FPS } (\Pi d^3 / 4) * 7.48 \text{ gal/cf} * 60 \text{ sec/min}$
 $MSV = 2(3.14159((.55/12)^3 / 4) * 7.48 * 60$
 $MSV = 1.5 \text{ gpm MIN FLOW RATE} \times 4 \text{ lines} = 6 \text{ gpm}$

IN RETURN MANIFOLD W/ NOM. DIA. 1.049" ID
 $MSV = 2 \text{ FPS } (\Pi d^3 / 4) * 7.48 \text{ gal/cf} * 60 \text{ sec/min}$
 $MSV = 2(3.14159((1.049/12)^3 / 4) * 7.48 * 60$
 $MSV = 5.4 \text{ GPM}$

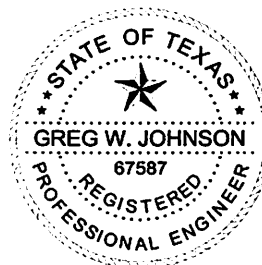
PIPE AND FITTINGS:

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

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



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



DRIP TUBING SYSTEM

VOID FOR:
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7631 W. HWY 290, #427
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SITE DESCRIPTION:

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Pump: 0.5 HP Franklin C1-Series-20XC105P4-2W115 submersible pump or equivalent.

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Pump Tank Calculations: 768 Gal (14.5 gal/in.)

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

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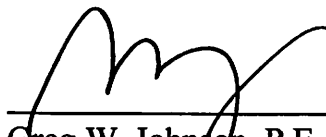
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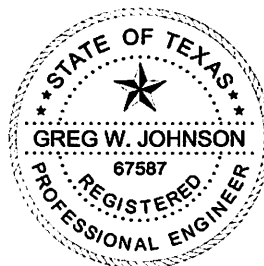
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 09/15/2021

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



NOTE:
NO OSSF SYSTEM CAN BE INSTALLED ON
THE SAME PROPERTY AS THE SINGLE
FAMILY DWELLING, DUE TO PLACEMENT OF
HOUSE AND SIZE OF LOT. DIG:B, LLC.
OWNS ALL THREE PROPERTIES.

REVISED

2:53 pm, Apr 07, 2022

INSTALL 2500sf OF
FIELD USING 1250'
OF DRIP TUBING.
THERE SHALL BE
NO PARKING,
DRIVING OR
STORAGE ON THE
SEPTIC FIELD AT
ANY TIME FOR ANY
REASON.

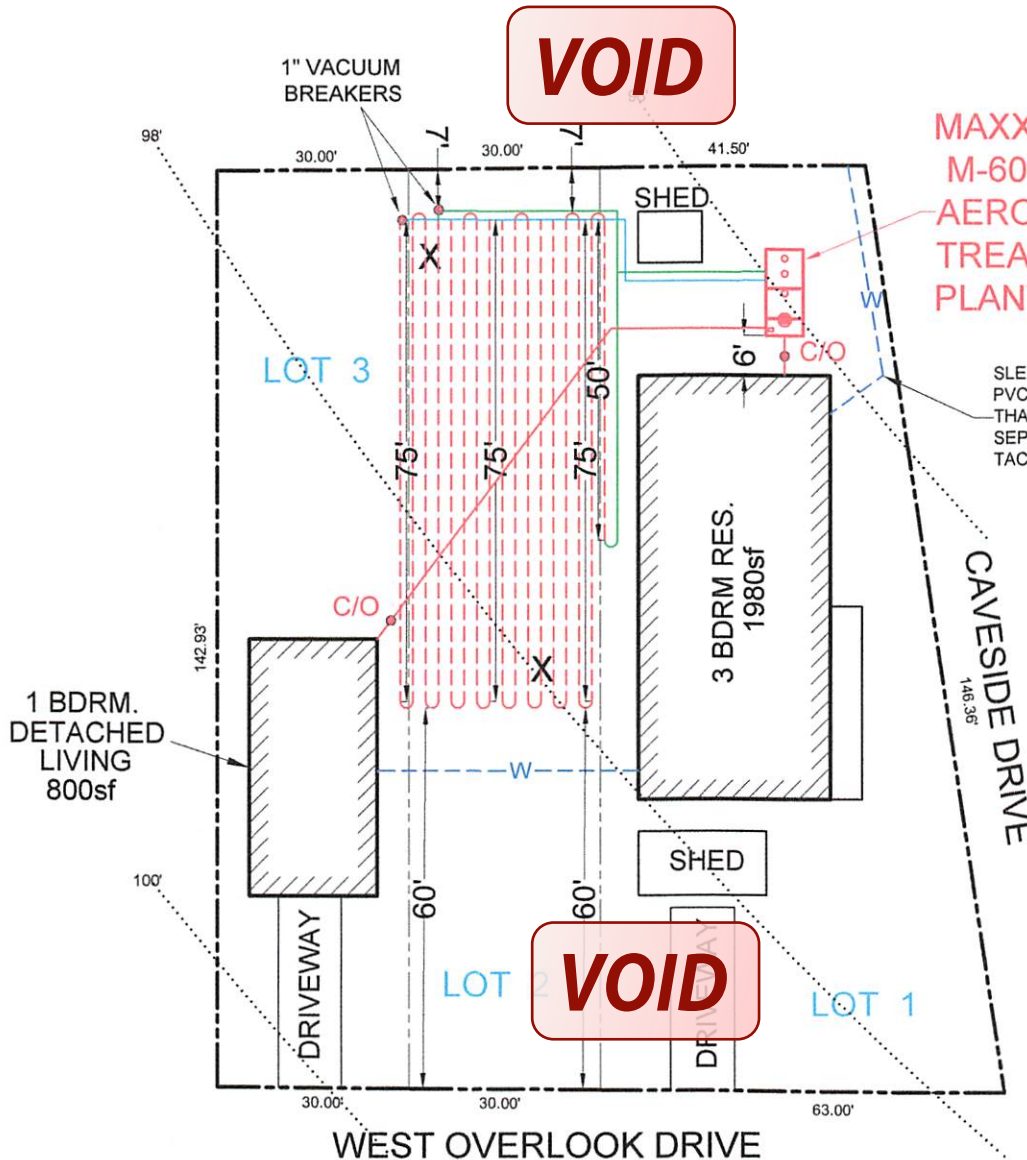
*USE TWO WAY
CLEANOUTS
**USE SCH-40 OR
SDR-26 TO TANK

X= TEST HOLE

MAXX AIR
M-600
AEROBIC
TREATMENT
PLANT

SLEEVE WATER LINE WITH 2"-SCH-40
PVC PIPE WHEN ENTERING CLOSER
THAN 10' FROM SEPTIC SYSTEM OR
SEPTIC FIELD WHICH EXCEEDS
TAC 30 CHAPTER 290.44(e)(B)(i).

CAVESIDE DRIVE



OWNER: DIG:B, LLC.					DRAWN BY: EJS III	
STREET ADDRESS: 469 WEST OVERLOOK DRIVE						
LEGAL DESC: CANYON SPRINGS RESORT				UNIT/SECTION/PHASE: 5	BLOCK: 68	LOT: 1,2,3
PREPARED BY: GREG W. JOHNSON, P.E. F#002585		SCALE: 1"=30'	DATE: 4/16/2021	2nd REVISION: 4/7/2022		

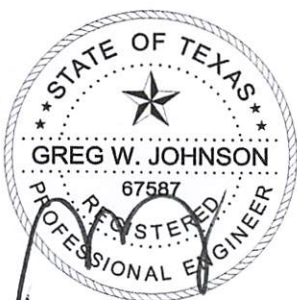
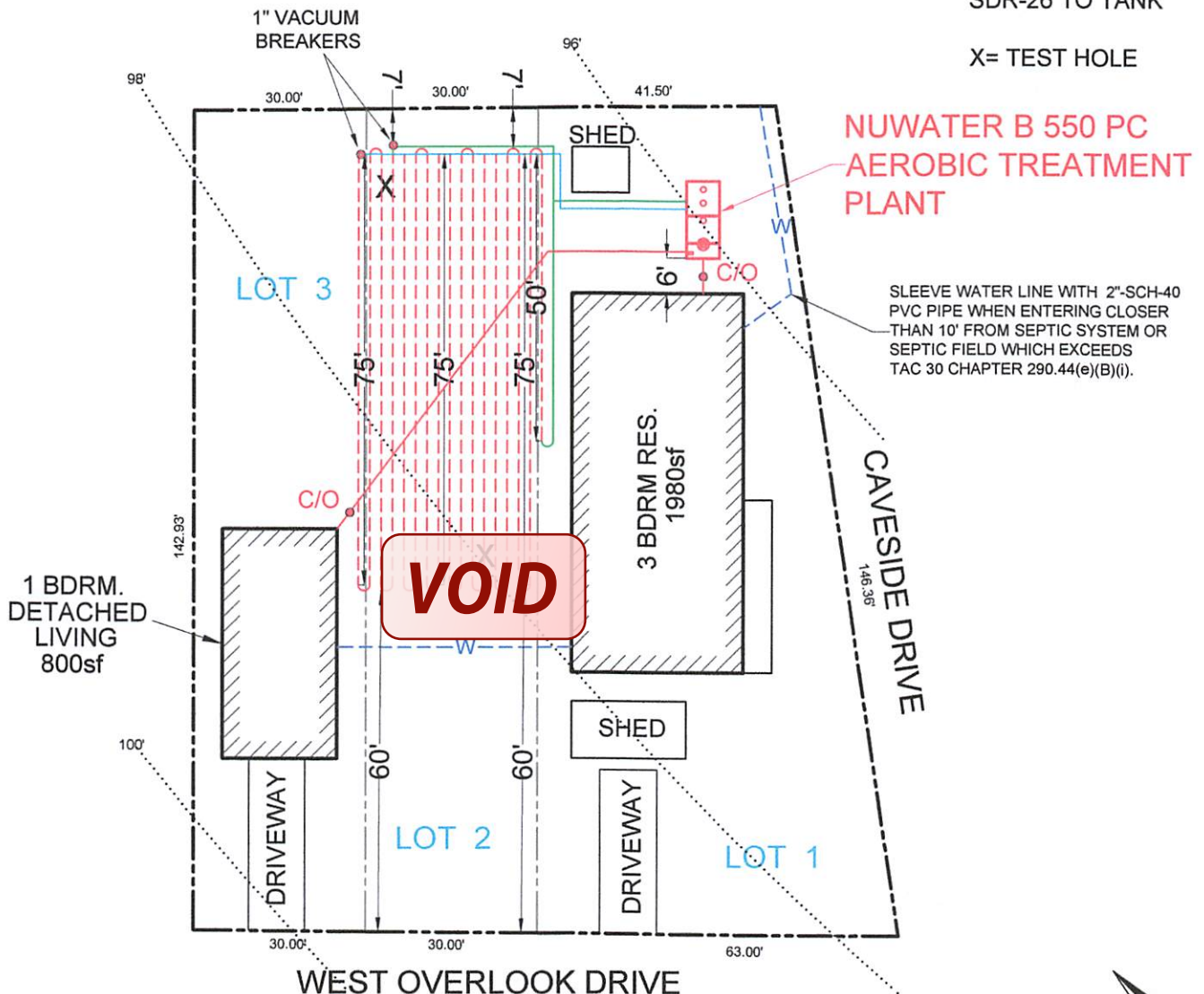
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VOID

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**USE SCH-40 OR
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STREET ADDRESS: 469 WEST OVERLOOK DRIVE							
LEGAL DESC: CANYON SPRINGS RESORT				UNIT/SECTION/PHASE: 5		BLOCK: 68	LOT: 1,2,3
PREPARED BY: GREG W. JOHNSON, P.E. F#002585			SCALE: 1"=30'		DATE: 4/16/2021		REVISED: 9/15/2021

Arkal 1" Super Filter

Catalog No. 1102 0 _ _ _

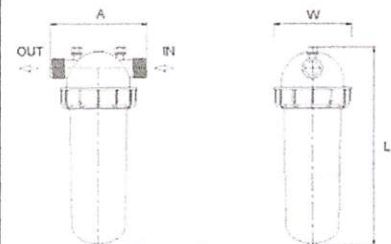
Features

- ♦ 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.



Technical Data

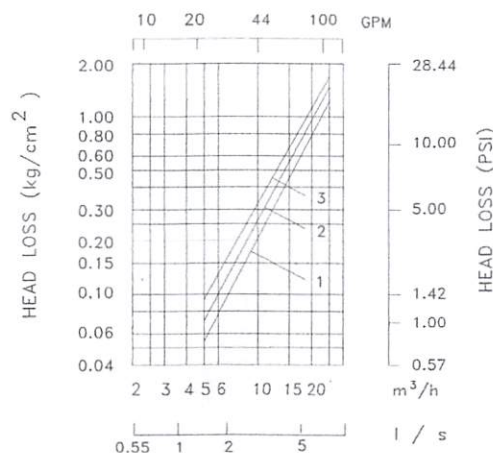
Inlet/outlet diameter	1" BSPT (male)	1" NPT (male)
	25.0 mm – nominal diameter	
	33.6 mm – pipe diameter (O. D.)	
Maximum pressure	10 atm	145 psi
Maximum flow rate	8 m ³ /h (1.7 l/sec)	35 gpm
General filtration area	500 cm ²	77.5 in ²
Filtration volume	600 cm ³	37 in ³
Filter length L	340 mm	13 13/32"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



Filtration Grades

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

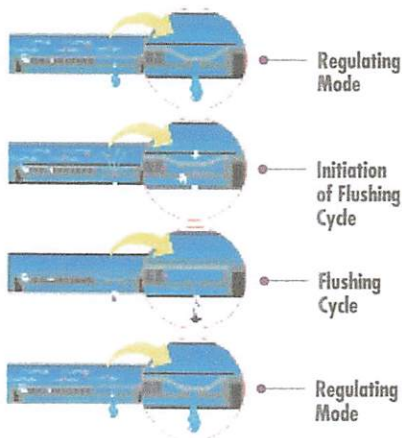
Head Loss Chart





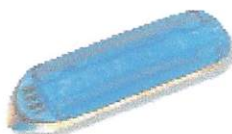
Bioline® Dripperline

Pressure Compensating Dripperline for Wastewater



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

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



Product Advantages

The Proven Performer

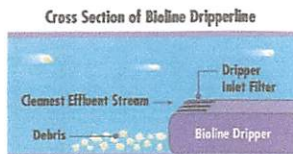
- Tens of millions of feet used in wastewater today.
- Bioline is permitted in every state allowing drip disposal.
- Backed by the largest, most quality-driven manufacturer of drip products in the U.S.
- Preferred choice of major wastewater designers and regulators.
- Proven track record of success for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

Quality Manufacturing with Specifications Designed to Meet Your Needs

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

Long-Term Reliability

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



Root Safe

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



Applications

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

Specifications

Wall thickness (mil): 45*

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

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

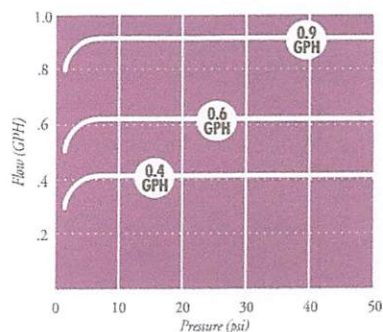
Recommended filtration: 120 mesh

Inside diameter: .570"

Color: Purple tubing indicates non-potable source

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

BIOLINE Flow Rate vs. Pressure



NETAFIM USA

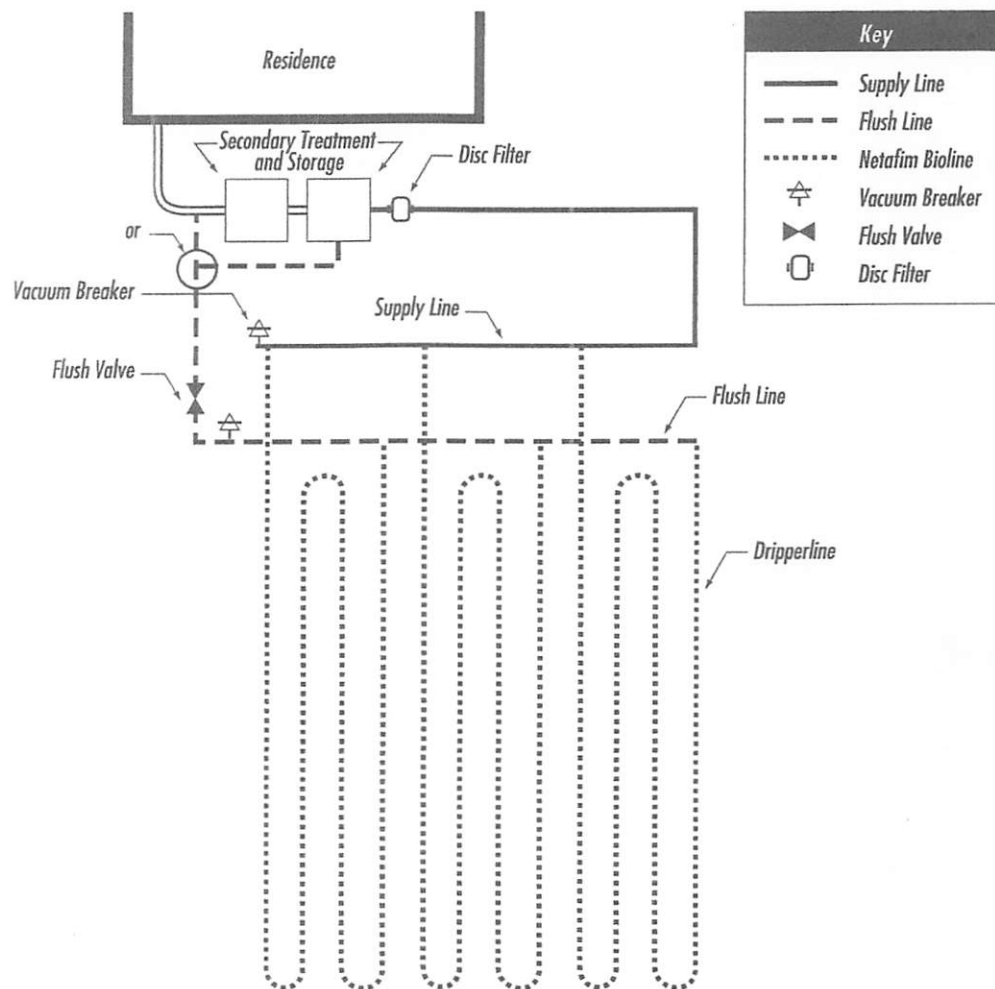
5470 E. Home Ave. • Fresno, CA 93727
888.638.2346 • 559.453.6800
FAX 800.695.4753
www.netafimusa.com

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





FILED BY
ALAMO TITLE
gr # 400013000743

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

General Warranty Deed

THE STATE OF TEXAS §

KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF COMAL §

Executed on date of acknowledgement to be Effective: October 13, 2020

Grantor: **BIA Investments, LLC**

Grantor's Mailing Address: 415 Country Ln. San Antonio, TX 78209

Grantee: **DIG:B, LLC**

Grantee's Mailing Address: 414 West Annie St., Austin, Travis County, Texas 78704

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

Property (including any improvements): **Lot 1, 2 and 3, Block 68, Canyon Springs Resort, Unit 5, situated in Comal County, Texas, according to plat thereof recorded in Volume 8, Pages 13-14, Map and Plat Records of Comal County, Texas.**

Reservations from Conveyance: None.

Exceptions to Conveyance and Warranty: All presently recorded restrictions, reservations, easements, covenants and conditions that affect the property and taxes for the current year, the payment of which Grantee assumes.

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

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

BIA Investments, LLC

By: [Signature]

Printed Name: Howard J Smith

Title: MANAGER

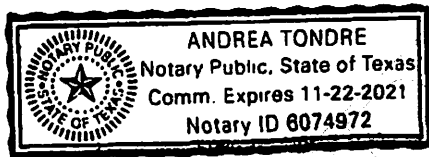
By: _____

Printed Name: _____

Title: _____

THE STATE OF TEXAS *
COUNTY OF Comal *

This instrument was acknowledged before me on this the 13th day of Oct., 2020, by Howard J Smith, manager of BIA Investments, LLC, in the capacity therein stated.



[Signature: Andrea Tondre]
Notary Public, State of Texas

THE STATE OF TEXAS *
COUNTY OF _____ *

This instrument was acknowledged before me on this the _____ day of _____, 2020, by _____, _____ of BIA Investments, LLC, in the capacity therein stated.

Notary Public, State of Texas

AFTER RECORDING RETURN TO:

Alamo Title Company
GF No. 4000132000743

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
10/19/2020 09:08:38 AM
TERRI 2 Pages(s)
202006046110

PREPARED IN THE LAW OFFICE OF:

Kristen Quinney Porter, LLC
P.O. Box 312643
New Braunfels, Texas 78131-2643



[Signature: Bobbie Koepp]

Luna Environmental

4222 FM 482

New Braunfels, TX 78132

(830) 312-8776

sherrie@lunaenvironmental.com

Printed:8/1/2023

Permit: 113857

Site: 469 West Overlook Dr, Canyon Lake, TX 78133

Main Phone: 7372623372

Lasey Sertuche

469 West Overlook Dr

Canyon Lake, TX 78133

Agency: Comal County

County: Comal County

Subdivision: Canyon Springs Resort

System Info: MFG: Brand: MAXX AIR

Customer ID: 6544

Treatment Type: Aerobic

Disposal Type: Drip Emitters

Insp ID: 30698

Installed: 9/20/2022

Warranty Expiration: 9/20/2025

Visit Details

Visit Date: 7/31/2023

Entered By: Nicole Loria

GPS Lat: 29.87468 GPS Long: -98.29037

Scheduled Date: 5/20/2023

Contract Starts: 9/20/2022

Customer Emailed: 8/1/2023

Entered On: 8/1/2023

Contract Ends: 9/20/2025

Visit Results

Service Type: Scheduled Inspection

Count: Inspection 2 of 9

Method: Grab

License #

Expires

Technician: Not Assigned

Provider: Luna Environmental, LLC

☒ Service Completed

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Sludge Level Tank 2: N/A

Electric Circuits: Operational

Distribution System: Operational

Drip/Sprayfield Veg: Operational

Tank Lid / Riser: Secured

Insp. Port / Plug: Secured

Alarm: Operational

PSI Pressure: 2.5

Comments

- Scum on pretreatment 0 - Cleaned drip filter & backflushed drip field - 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 8/1/2023.

Luna Environmental

4222 FM 482

New Braunfels, TX 78132

(830) 312-8776

sherrie@lunaenvironmental.com

Printed:11/4/2023

Permit: 113857

Site: 469 West Overlook Dr, Canyon Lake, TX 78133

Main Phone: 7372623372

Lasey Sertuche

469 West Overlook Dr

Canyon Lake, TX 78133

Agency: Comal County

County: Comal County

Subdivision: Canyon Springs Resort

System Info: MFG: <u>Brand: MAXX AIR</u>	Customer ID: <u>6544</u>
Treatment Type: <u>Aerobic</u>	Disposal Type: <u>Drip Emitters</u>
Installed: <u>9/20/2022</u>	Warranty Expiration: <u>9/20/2025</u>
Insp ID: <u>35131</u>	

Visit Details

Visit Date: <u>10/24/2023</u>	Entered By: Nicole Loria	GPS Lat: 29.87468 GPS Long: -98.29037
Scheduled Date: <u>9/20/2023</u>	Contract Starts: <u>9/20/2022</u>	Customer Emailed: <u>11/4/2023</u>
Entered On: <u>11/4/2023</u>	Contract Ends: <u>9/20/2025</u>	

Visit Results

Service Type: Scheduled Inspection

Count: Inspection 3 of 9

Method: Grab

Technician: Luke Campbell

License #

MT0002614

Expires

9/30/2026

Provider: Luna Environmental, LLC

☒ Service Completed

Aerators: <u>Operational</u>	Sludge Level Tank 1: <u>4</u>
Filters: <u>Operational</u>	Sludge Level Tank 2: <u>N/A</u>
Irrigation Pumps: <u>Operational</u>	
Disinfection Device: <u>Operational</u>	

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

Alarm: Operational

PSI Pressure: 2.8

Comments

- Scum on pretreatment 0 - Cleaned drip filter & backflushed drip field - 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 11/4/2023.

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

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

Printed: 1/23/2023

Insp ID #: 24944

Permit #: **113857**

To: Home Owner
469 West Overlook Dr
Canyon Lake, TX 78133

Main Phone:

Work:

Cell Phone:

Alt Cell:

Customer ID: 5145

Contract Dates: 9/20/2022 - 9/20/2025

Scheduled Date: 1/20/2023

Inspection 1 of 9

Installed: 9/20/2022

Warranty End: 9/20/2025

Agency: Comal County

County:

Mfg / Brand: - MAXX AIR

Sub: Canyon Springs Resort

Treatment Type: Aerobic

Disposal: Drip Emitters

GPS Coordinates: Latitude: 29.87468 Longitude: -98.29037

Service Type: Scheduled Inspection

☒ This counts as a type of "Scheduled Inspection"

Entered By: Nick Zigalo

Visit Date: 1/20/2023

Method: Grab

Technician: Nick Zigalo

Maint. Provider: Ryan Seidensticker

Aerators: Operational

Filters: Operational

Irrigation Pumps: Operational

Disinfection Device: Operational

Sludge Levels

For Tank 1: 12

For Tank 3: 6

For Tank 4: 1

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Tank Lid / Riser: Secured

Insp. Port / Plug: Secured

Alarm: Operational

Comments

☒ **Service Completed**

scum in trash tank is 0" - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Inspection Port Plug was noted as Secured prior to leaving. cleaned filter

Site: 469 West Overlook Dr, Canyon Lake, TX 78133

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

License Info: MP0001708 Expires:

License Info: MT0002016 Expires: 12/31/2023