



COMAL COUNTY

ENGINEER'S OFFICE

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: **05/25/2022** Permit Number: **114453**

Location Description: **341 WOODWIND DR
CANYON LAKE, TX 78133**

Subdivision: **TANGLEWOOD SHORES**
Unit: **0**
Lot: **241**
Block: **0**
Acreage: **0.0000**

Type of System: **Aerobic
Surface Irrigation**

Issued to: **DOROTHY CRANFILL**

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:

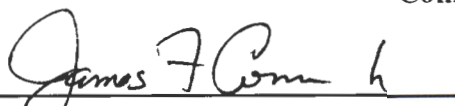
- Increase in the square feet of living area
- Increase in the number of bedrooms
- A change of use (i.e. residential to commercial)
- Relocation of system components (including the relocation of spray heads)
- Installation of landscaping
- Adding new structures to the system

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


ENVIRONMENTAL HEALTH INSPECTOR
OS0032485


ENVIRONMENTAL HEALTH COORDINATOR

OS0034792

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 Evapo-transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

**Comal County Environmental Health
OSSF Inspection Sheet**

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

**Comal County Environmental Health
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
32	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart		285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3)(B)285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)				
33	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.		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: 114453
Issued This Date: 05/09/2022
This permit is hereby given to: DOROTHY CRANFILL

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

341 WOODWIND DR
CANYON LAKE, TX 78133

Subdivision: TANGLEWOOD SHORES
Unit: 0
Lot: 241
Block: 0
Acreage: 0.0000

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.



COMAL COUNTY
ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

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

Date April 1, 2022

Permit Number 114453

1. APPLICANT / AGENT INFORMATION

Owner Name DOROTHY G. CRANFILL
Mailing Address 1337 HEDGESTONE
City, State, Zip CANYON LAKE TEXAS 78133
Phone # 830-822-5576
Email darryl@txcranfill.com

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

2. LOCATION

Subdivision Name TANGLEWOOD SHORES Unit Lot 241 Block
Survey Name / Abstract Number Acreage
Address 341 WOODWIND DRIVE City CANYON LAKE State TX Zip 78133

3. TYPE OF DEVELOPMENT

☒ Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) 2 PERSONAL RV SITES

Number of Bedrooms

Indicate Sq Ft of Living Area

☐ Non-Single Family Residential

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

Type of Facility

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: \$ 50,000 (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.

Dorothy Cranfill
Signature of Owner

4/27/2022
Date

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

APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN
ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATEPlanning Materials & Site Evaluation as Required Completed By GREG W. JOHNSON, P.E.System Description PROPRIETARY; AEROBIC TREATMENT AND SURFACE IRRIGATION

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

Tank Size(s) (Gallons) CLEARSTREAM 600NC3T Absorption/Application Area (Sq Ft) 1413Gallons Per Day (As Per TCEQ Table III) 80

(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

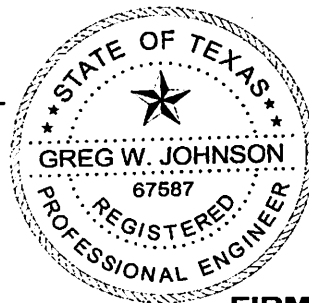
(if yes, the P.E. or R.S. shall certify that the OSSF design complies with all provisions of the existing CZP)

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

Date

April 10, 2022

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):

_____ UNIT/PHASE/SECTION _____ BLOCK 241 LOT _____ TANGLEWOOD SHORES _____ SUBDIVISION

IF NOT IN SUBDIVISION: _____ ACREAGE _____ SURVEY

The property is owned by (insert owner's full name): DOROTHY G. CRANFILL

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 27 DAY OF April, 2022

Dorothy Cranfill

Owner(s) signature(s)

DOROTHY G. CRANFILL

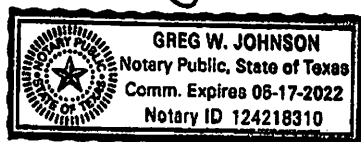
Owner (s) Printed name (s)

DOROTHY G. CRANFILL

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 27 DAY OF

April, 2022

[Signature]
Notary Public Signature



Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
04/27/2022 11:49:10 AM
LAURA 1 Pages(s)
202206019708



Bobbie Koepp

(Notary Seal)

TANGLEWOOD SHORES, LOT 241
341 WOODWIND DRIVE
CANYON LAKE, TX 78133

Septic Savvy Aerobic Service
Maintenance Provider Lic.# MP 0001595
P.O. Box 2613
Canyon Lake, Texas 78133
830-743-5001

Permit #: _____ Model: CLEARSTREAM NC3T Serial #: _____
Name: Dorothy CRANFILL Address: 1337 HEDGESTONE, CANYON LAKE, TX 78133
County: COMAL City, State, Zip Code: CANYON LAKE, TX 78133

The initial maintenance agreement start date, shall be the issue date of the License to Operate.

Contract effective dates: Starting _____, Ending _____

Providing the following:

A: Inspection every 4th month, which includes servicing and adjustments of mechanical and electrical components as necessary for the proper function of the aerobic septic system.

B: Inspection of effluent quality consisting of a visual check for color, turbidity, odor, scum and Overflow.

C: The property owner is responsible for purchasing and keeping chlorine in the system (If applicable).

D: If any improper operation of the aerobic septic system is observed, the homeowner will be notified of the conditions and any estimated cost to repair.

E: The response time to a complaint regarding the proper operation of the aerobic septic system shall be within 72 hours from the time of notification by the home owner/property owner.

F: The home owner / property owner is responsible for service call, labor and/or shipping costs on ALL warranted and non-warranted parts exchanged.

G: The signing of this service agreement authorizes Septic Savvy Aerobic Service Rep, to enter the property to execute ALL terms of this service agreement.

IMPORTANT: Since I cannot control what or how much effluent enters the ATU, I cannot warranty how the system will function.

1. This maintenance agreement DOES NOT cover the costs of service calls, labor, materials or parts out of warranty; the failure to maintain electrical power to the system; sprinklers that are broken, leaking, stopped up or mal-functioning; sewage flows exceeding the hydraulic/organic design capabilities; the input of non-biodegradable materials (solvents, grease, oil, paints) or any usage contrary to the requirements as advised by authorized service representative. Laboratory test work is available for an additional cost.

2. This maintenance agreement does not include pumping out the system or any of its compartments; The settlement of soil on or around any part of the system.

Violations of the warranty include: Disconnecting the alarm(s), restricting ventilation to the aerator, overloading the system above its rated capacity, flooding by external means. Rodent, insect, fire ant damage or any other form of unusual abuse.

Property owner Signature Dorothy Cranfill Print name DOROTHY CRANFILL
Date 4/27/2022
Maintenance Provider Signature M. David J. Richards Date 29 April 2022

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

April 11, 2022

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

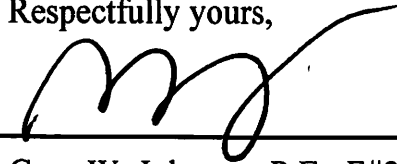
RE- Septic Design
341 WOODWIND DRIVE
TANGLEWOOD SHORES, LOT 241
CANYON LAKE, TX 78133
CRANFILL RESIDENCE

Brandon/Brenda,

Due to the lack of available application area it is necessary to have the setback from the property line to the spray at ten feet as required by TCEQ Chapter 285 rules Table X. I hereby request a variance to the twenty foot setback to property lines as required by Comal County Order and equivalent protection will be maintained by including a battery backup to the timer clock to assure sprayers to only spray during the predawn hours. In my professional opinion this variance will not pose a threat to the environment or public health.

If I can be of further assistance please contact me.

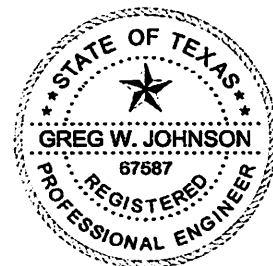
Respectfully yours,



Greg W. Johnson, P.E., F#2585

April 11, 2022

Date



ON-SITE SEWERAGE FACILITY SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed: April 04, 2022

Site Location: TANGLEWOOD SHORES, LOT 241

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						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	III	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 8"	BROWN
1						
2						
3						
4						
5						

SOIL BORING NUMBER <u> </u> SURFACE EVALUATION						
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	SAME		AS		ABOVE	
1						
2						
3						
4						
5						

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability.


Greg W. Johnson, P.E. 67587-F2585, S.E. 11561

04/04/2022
Date

OSSF SOIL EVALUATION REPORT INFORMATION

Date: April 11, 2022

Applicant Information:

Name: DOROTHY G. CRANFILL
Address: 1337 HEDGESTONE
City: CANYON LAKE State: TEXAS
Zip Code: 78133 Phone: (830) 822-5576

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 241 Unit Blk Subd. TANGLEWOOD SHORES
Street Address: 341 WOODWIND DRIVE
City: CANYON LAKE Zip Code: 78133
Additional Info.:

Installer Information:

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

Topography: Slope within proposed disposal area: 10 to 12 %

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

Design Calculations for Aerobic Treatment with Spray Irrigation:

Commercial

Q = GPD

Residential Water conserving fixtures to be utilized? Yes X No

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

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

Q = (+1)*75-(20%) = 80

Trash Tank Size 400 Gal.

**NOTE: 2 - PERSONAL RV SITES @ 40 GPD
EACH = 80 GPD**

TCEQ Approved Aerobic Plant Size 600 G.P.D.

Req'd Application Area = Q/Ri = 80 / 0.064 = 1250 sq. ft.

Application Area Utilized = 1413 sq. ft.

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

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

Pump Tank Size = 700 Gal. 12.3 Gal/inch.

Reserve Requirement = 27 Gal. 1/3 day flow.

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

With Chlorinator NSF/TCEQ APPROVED

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

Two way cleanout

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

1" Sch-40 PVC discharge manifold

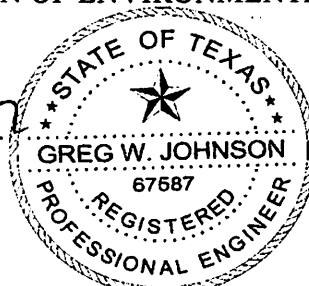
APPLICATION AREA SHOULD BE SEEDED AND MAINTAINED WITH VEGETATION.

EXPOSED ROCK WILL BE COVERED WITH SOIL OR MULCH.

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

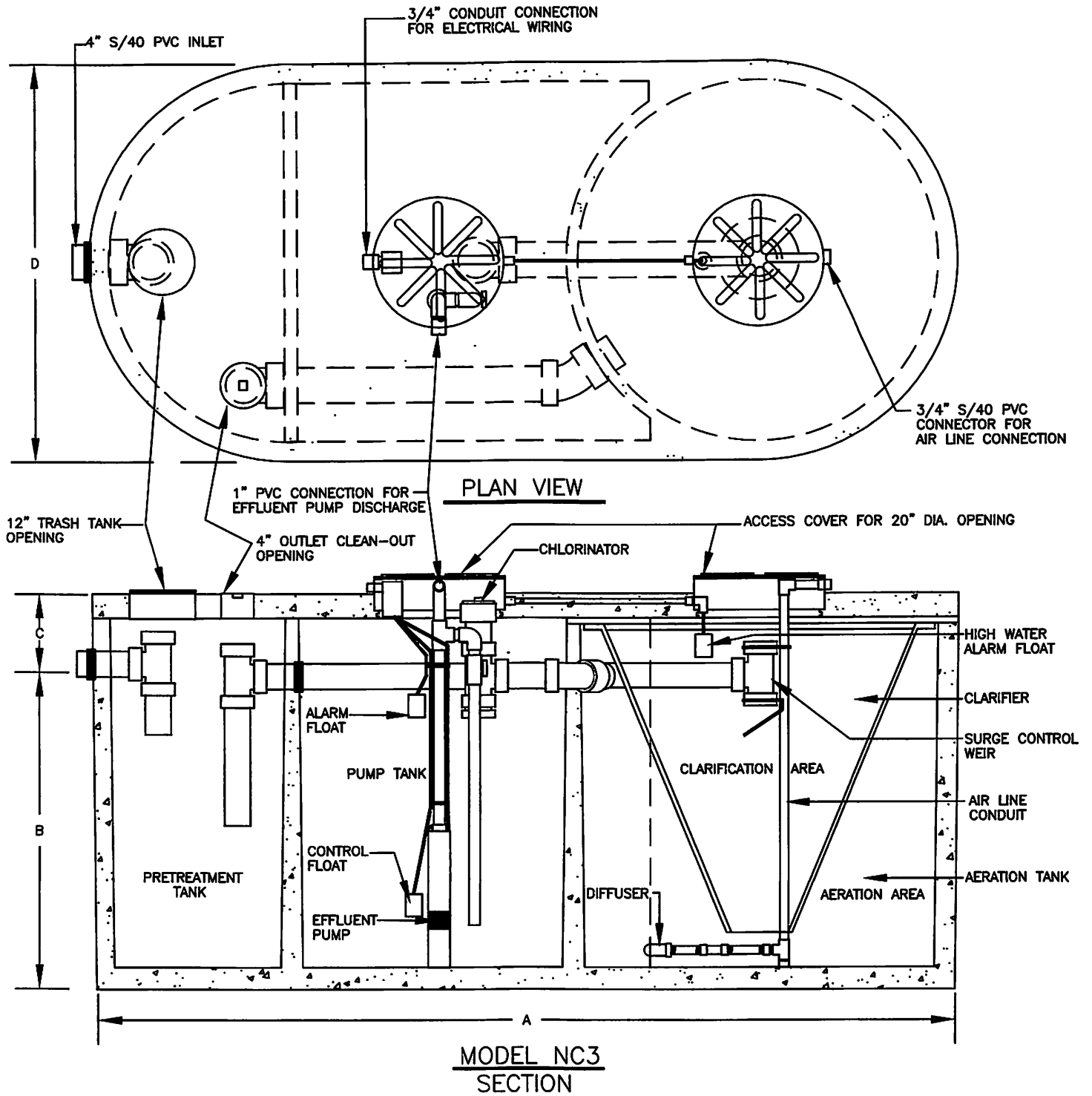
GREG W. JOHNSON, P.E. F#002585 - S.E. 11561

04/01/2022
DATE



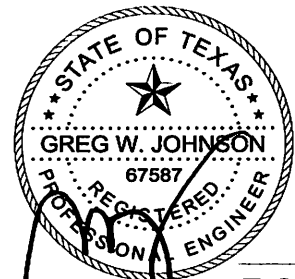
FIRM #2585

DESIGN DRAWINGS



DIMENSIONAL DATA

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



F-2585

04/10/2022

TANK NOTES:

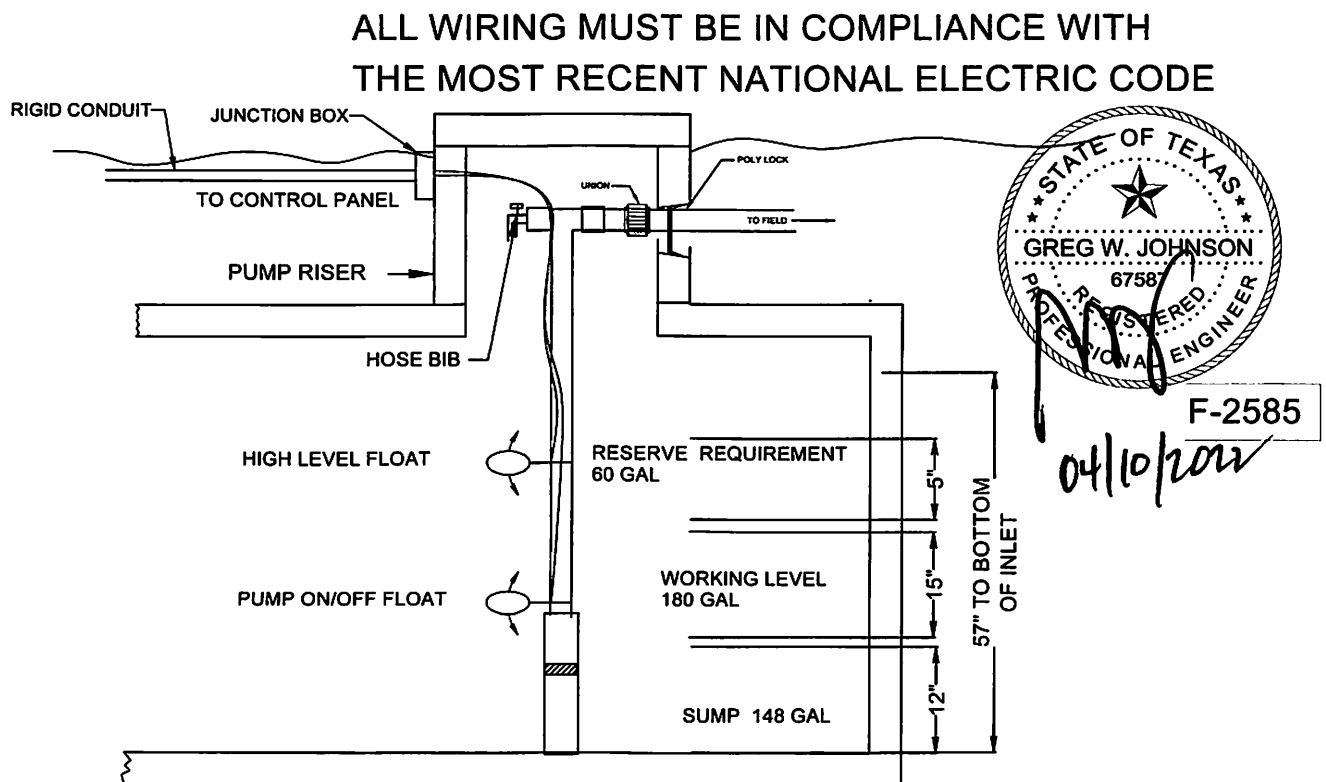
Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

Tightlines to the tank shall be SCH-40 PVC.

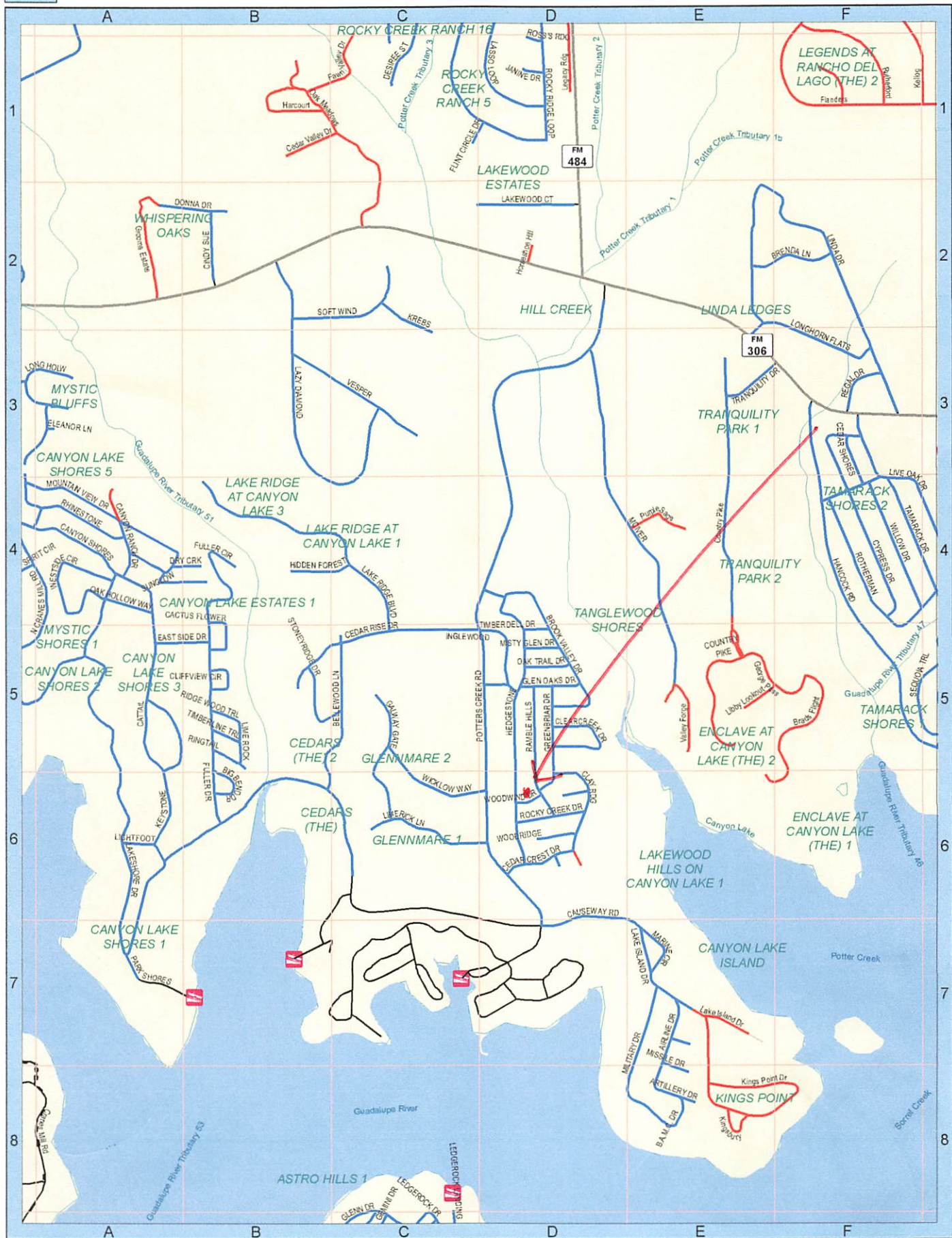
A two way sanitary tee is required between residence and tank.

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

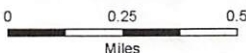
Tanks must be left uncovered and full of water for inspection by the permitting authority.



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



SEE PAGE 19



RELEASE OF LIEN

DATE: July 8, 1996

NOTE:

DATE: July 26, 1991

ORIGINAL AMOUNT: \$7,000.00

MAKER: Le ROY CRANFILL, SR and wife, DOROTHY G. CRANFILL

PAYEE: JESSE D. GOMILLION

HOLDER OF NOTE AND LIEN: JESSE D. GOMILLION

HOLDER'S MAILING ADDRESS: 7575 Katy Freeway, No. 112,
(INCLUDING COUNTY) Houston, Texas 77024

NOTE AND LIEN ARE DESCRIBED IN THE FOLLOWING DOCUMENTS, RECORDED IN:

Warranty Deed with Vendor's Lien dated July 26, 1991 filed for record in Volume 774, Page 750-751 of the Official Public Records of Comal County, Texas

Deed of Trust dated July 26, 1991 filed for record in Volume 774, Page 752-756 of the Official Public Records of Comal County, Texas.

PROPERTY (INCLUDING ANY IMPROVEMENTS) SUBJECT TO LIEN:

All that certain tracts or parcels of land lying and being situated in Comal County, Texas, being known and designated as Lots 239, 240, 241, and 242, TANGLEWOOD SHORES SUBDIVISION, situated in Comal County, Texas, according to plat thereof recorded in Volume 4, Page 63, of the Map and Plat Records of Comal County, Texas together with all improvements located thereon including the 1981 Walden "Double-wide" Mobile Home being 52' X 14' and 52' X 14', with Serial Nos. 12310392A and 12310392B.

Holder of the Note acknowledges its payment and releases the property from the lien.

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


 JESSE D. GOMILLION

STATE OF

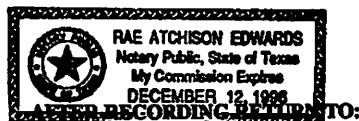
§

COUNTY OF

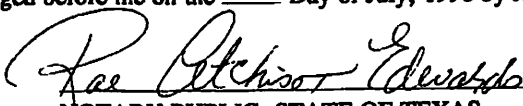
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§

This instrument was acknowledged before me on the 11th Day of July, 1996 by JESSE D. GOMILLION.



Edwin K. Nolan
P.O. Box 2017
Canyon Lake, TX 78130
Telephone: (210) 964-3007
r296


 NOTARY PUBLIC, STATE OF TEXAS

PREPARED IN THE LAW OFFICES OF:

Edwin K. Nolan
P.O. Box 2017
Canyon Lake, TX 78130
Telephone: (210) 964-3007

Doc# 9606014676
Pages: 1
Date : 07-23-1996
Time : 09:30:41 A.M.
Filed & Recorded in
Official Records
of COMAL County, TX.
JOY STREATER
COUNTY CLERK

DOC# 9606014676



202206018837 04/22/2022 09:14:48 AM 1/13



202206018632 04/21/2022 08:46:36 AM 1/6

**AFFIDAVIT OF HEIRSHIP
FOR****LEROY CRANFILL, SR.**** Re-recorded to attach
Exhibit "A" **

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.

STATE OF TEXAS**COUNTY OF COMAL****KNOW ALL MEN BY THESE PRESENTS**

Before me, the undersigned authority, on this day personally appeared LeRoy Cranfill, Jr. ("Affiant") who, being first duly sworn, upon his oath, states the following:

1. My name is LeRoy Cranfill, Jr., and I live at 1249 Clearcreek Drive, Canyon Lake, Texas 78133. I am personally familiar with the family and marital history of LeRoy Cranfill, Sr. ("Decedent") and I have personal knowledge of the facts stated in this affidavit. I was a son of the decedent.
2. I am the son of LeRoy Cranfill, Sr., and I have known him all of my life. LeRoy Cranfill, Sr. was born on June 17, 1933, and died on or about February 21, 2022, in New Braunfels, Comal County, Texas 78133. At the time of decedent's death, decedent's residence was 1337 Hedgestone, Canyon Lake, Texas 78133.
3. Decedent's marital history was as follows: Decedent was married to Dorothy Gene (Hale) Cranfill on April 19, 1952. The marriage ended in Decedent's death.
4. The following children were either born or adopted of the decedent, during decedent's current marriage:

LeRoy Cranfill, Jr., born March 1, 1953

Mother: Dorothy Gene (Hale) Cranfill

Brenda K. Pratt, born January 28, 1955

Mother: Dorothy Gene (Hale) Cranfill

Michael W. Cranfill, born November 5, 1956

Mother: Dorothy Gene (Hale) Cranfill

Dennis W. Cranfill, born June 12, 1960

Mother: Dorothy Gene (Hale) Cranfill

Darryl R. Cranfill, born March 22, 1963

Mother: Dorothy Gene (Hale) Cranfill

Lisa G. Chappell, born June 17, 1973

Mother: Dorothy Gene (Hale) Cranfill

5. The following children were born or adopted outside of the decedent's marriage at the time of death: None.
6. The following persons have knowledge regarding the Decedent, the identity of Decedent's children: Elvis Wilson and Norman Ralph Chappell.
7. The decedent died leaving a Last Will and Testament; however, there has been no administration, and none is intended. A copy of said Last Will and Testament is attached to this Affidavit as Exhibit A.
8. The decedent left no unpaid debts, or any unpaid taxes owed to either the State of Texas or the United States, including Estate or Income Taxes.
9. The decedent did not receive Medicaid benefits during decedent's life. As a consequence, the decedent's estate is not subject to a claim by the State of Texas under the Medicaid Estate Recovery Program (aka "MERP"). I have obtained a Certification from the Texas Department of Aging and Disability Services stating that there are no pending MERP claims against the decedent's estate.
10. To the best of my knowledge, at the time of decedent's death, decedent owned an interest in the following real property:

All those certain tracts or parcels of land lying and being situated in Comal County, Texas, being known and designated as Lots 239, 240, 241, and 242, Tanglewood Shores Subdivision, according to map or plat recorded in Vol. 4, page 63 of the Map and Plat Records of Comal County, Texas, together with all improvements located thereon including the 1981 Walden "Double-wide" Mobile Home being 52' X 14' and 52" X 14', with Serial Nos. 12310392 A and 12310392 B.
11. The heir to the above described property at the time of decedent's death is: Dorothy Gene (Hale) Cranfill.

12. I am aware of the penalties of perjury under Federal Law, which includes the execution of a false affidavit, pursuant to 18 U.S.C.S. §1621 wherein it is provided that anyone found guilty shall not be fined more than \$2,000 or imprisoned not more than five (5) years or both. I am aware that perjury in the execution of a false affidavit is also a criminal act pursuant to section 37.02 of the Texas penal Code. I am aware that, under Section 32.46 of the Texas Penal Code, a person commits an offense if, with intent to defraud or harm any person, they, by deception, cause another to sign or execute any document affecting property or service of the pecuniary interest of any person, and that an offense under Section is a felony of the third degree, which is punishable by a fine of Ten Thousand Dollars (\$10,000.00) and confinement in the Texas Department of Corrections for a term of not more than ten (10) years or less than two (2) years.

IN WITNESS WHEREOF, I have hereunto set my hand on this the 14th day of April, 2022.


LeRoy Cranfill, Jr.

STATE OF TEXAS

§

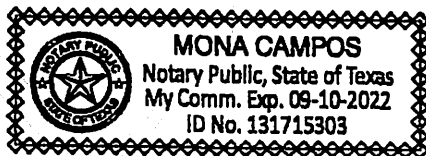
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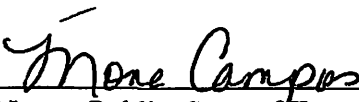
COUNTY OF COMAL

§

Before me, the undersigned Notary Public, on this day personally appeared LeRoy Cranfill, Jr., either known to me or proved to me through proper documentation of identification to be the person whose name is subscribed to the foregoing Affidavit of Heirship and acknowledged to me that he executed the same for the purposes and consideration therein express.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this 14th day of April, 2022.



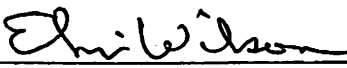

Notary Public, State of Texas

VERIFICATION

Before me, the undersigned authority, on this day personally appeared Elvis Wilson ("Affiant") who, being first duly sworn, upon his oath, stated the following:

My name is Elvis Wilson. I am above the age of eighteen years of age, and I am competent to make this Affidavit. I am personally familiar with the family and marital history of LeRoy Cranfill, Sr. ("Decedent") and I have personal knowledge of the facts stated in this Affidavit. I was a friend of the Decedent and knew him approximately 17 years. That based upon my personal knowledge of the Decedent, his family history and financial situation, the statements of fact contained in this Affidavit are true and correct.

IN WITNESS WHEREOF, I have hereunto set my hand on this the 15 day of April, 2022.



Elvis Wilson

STATE OF TEXAS

§

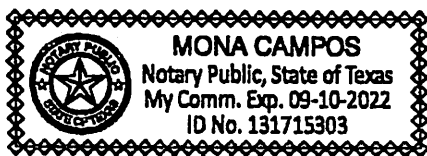
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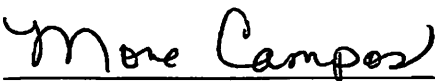
COUNTY OF COMAL

§

Before me, the undersigned Notary Public, on this day personally appeared Elvis Wilson, either known to me or proved to me through proper documentation of identification to be the person whose name is subscribed to the foregoing Affidavit of Heirship and acknowledged to me that he executed the same for the purposes and consideration therein express.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this 15 day of April, 2022.






Notary Public, State of Texas

VERIFICATION

Before me, the undersigned authority, on this day personally appeared Norman Ralph Chappell ("Affiant") who, being first duly sworn, upon his oath, stated the following:

My name is Norman Ralph Chappell. I am above the age of eighteen years of age, and I am competent to make this Affidavit. I am personally familiar with the family and marital history of LeRoy Cranfill, Sr. ("Decedent") and I have personal knowledge of the facts stated in this Affidavit. I was a of the Decedent and knew him approximately 80 years. That based upon my personal knowledge of the Decedent, his family history and financial situation, the statements of fact contained in this Affidavit are true and correct.

IN WITNESS WHEREOF, I have hereunto set my hand on this the 14th day of April, 2022.



Norman Ralph Chappell

STATE OF TEXAS

§

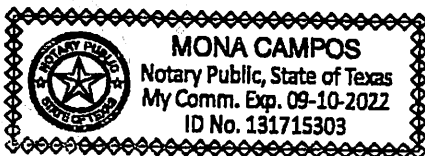
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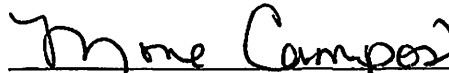
COUNTY OF COMAL

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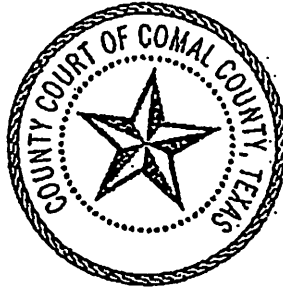
Before me, the undersigned Notary Public, on this day personally appeared Norman Ralph Chappell, either known to me or proved to me through proper documentation of identification to be the person whose name is subscribed to the foregoing Affidavit of Heirship and acknowledged to me that he executed the same for the purposes and consideration therein express.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this 14th day of April, 2022.





Notary Public, State of Texas



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

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

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
04/21/2022 08:46:36 AM
TERRI 6 Page(s)
202206018632



Bobbie Koepp

LAST WILL AND TESTAMENT
OF
LeROY CRANFILL

I, **LeRoy Cranfill**, of Canyon Lake, Texas, revoke my former Wills and Codicils and declare this to be my *Last Will and Testament*.

ARTICLE I
IDENTIFICATION OF FAMILY

I am married to Dorothy G. Cranfill and all references in this Will to "my spouse" are references to Dorothy G. Cranfill.

The names of my children are LeRoy Cranfill, Jr., Brenda K. Pratt, Michael W. Cranfill, Dennis W. Cranfill, Darryl R. Cranfill, and Lisa G. Cranfill. All references in this Will to "my children" are references to the above-named children.

ARTICLE II
PAYMENTS OF DEBTS AND EXPENSES

I direct that my just debts, funeral expenses, and expenses of last illness be first paid from my estate.

//
//
//
//
//
//
//
//
//
//

Testator's Initials:

LRC

Witnesses' Initials:

BC
EXHIBIT
"A"

WRC

D.G.

ARTICLE III
DISPOSITION OF PROPERTY

Residuary Estate. I direct that my residuary estate be distributed to my spouse, **Dorothy G. Cranfill**. If my spouse does not survive me, my residuary estate shall be distributed to my children in equal shares. If a child of mine does not survive me, such deceased child's share shall be distributed in equal shares to the children of such deceased child who survive me, by right of representation. If a child of mine does not survive me and has no children who survive me, such deceased child's share shall be distributed in equal shares to my other children, if any, or to their respective children by right of representation. If no child of mine survives me, and if none of my deceased children are survived by children, my residuary estate shall be distributed to my heirs-at-law, their identities and respective shares to be determined under the laws of the State of Texas, then in effect, relating to the succession of separate property that is not attributable to a predeceased spouse, as if I had died intestate at the time fixed for distribution under this provision.

ARTICLE IV
NOMINATION OF EXECUTOR

I nominate LeRoy Cranfill, Jr., of Harlingen, Texas, as the Executor, without bond or security. If such person or entity does not serve for any reason, I nominate Brenda K. Pratt, of Canyon Lake, Texas, to be the Executor, without bond or security.

ARTICLE V
EXECUTOR POWERS

My Executor, in addition to other powers and authority granted by law or necessary or appropriate for proper administration, shall have the right and power to lease, sell, mortgage, or otherwise encumber any real or personal property that may be included in my estate, without order of court and without notice to anyone.

Testator's Initials:

DL

Witnesses' Initials:

LC

MBL

D.G.

My Executor shall have the right to administer my estate using "informal", "unsupervised", or "independent" probate or equivalent legislation designed to operate without unnecessary intervention by the probate court.

ARTICLE VI MISCELLANEOUS PROVISIONS

A. Paragraph Titles and Gender

The titles given to the paragraphs of this Will are inserted for reference purposes only and are not to be considered as forming a part of this Will in interpreting its provisions. All words used in this Will in any gender shall extend to and include all genders, and any singular words shall include the plural expression, and vice versa, specifically including "child" and "children", when the context or facts so require, and any pronouns shall be taken to refer to the person or persons intended regardless of gender or number.

B. Thirty Day survival Requirement

For the purposes of determining the appropriate distributions under this Will, no person or organization shall be deemed to have survived me unless such person or entity is also surviving on the thirtieth day after the date of my death.

C. Common Disaster

If my spouse and I die under circumstances such that there is no clear or convincing evidence as to the order of our deaths, or if it is difficult or impractical to determine which person survived the death of the other person, it shall, for the purpose of distribution of my life insurance, property passing under any Trust or other contracts, if any, and property passing

Testator's Initials:

TR

Witnesses' Initials:

RC

MBL

D.J.

under this Will, be conclusively presumed that I predeceased my spouse, and notwithstanding any other provision of this Will, my spouse (or my spouse's estate as the case may be) shall receive the distribution to which my spouse would otherwise be entitled to receive without regard to a survivorship requirement, if any.

D. Liability of Fiduciary

No fiduciary who is a natural person shall, in the absence of fraudulent conduct or bad faith, be liable individually to any beneficiary of my estate, and my estate shall indemnify such natural person from any and all claims or expenses in connection with or arising out of that fiduciary's good faith actions or nonactions as the fiduciary, except for such actions or nonactions which constitute fraudulent conduct or bad faith.

E. Beneficiary Disputes

If any bequest requires that the bequest be distributed between or among two or more beneficiaries, the specific items of property comprising the respective shares shall be determined by such beneficiaries if they can agree, and if not, by my Executor.

IN WITNESS WHEREOF, I have subscribed my name below, this 29 day of March, 1999.

Testator Signature:

LeRoy Cranfill

LeRoy Cranfill

Testator's Initials:

LC

Witnesses' Initials:

HC

MBC

DJP

We, the undersigned, hereby certify that the above instrument, which consists of five (5) pages, including the page(s) which contain the witness signatures, was signed in our sight and presence by LeRoy Cranfill (the "Testator"), who declared this instrument to be his Last Will and Testament and we, at the Testator's request and in the Testator's sight and presence, and in the sight and presence of each other, do hereby subscribe our names as witnesses on the date shown above.

Witness Signature: Norman Ralph Chappell

Name: NORMAN RALPH CHAPPELL
City: CANYON LAKE
State: TEXAS 78133

Witness Signature: Linda Chappell

Name: LINDA CHAPPELL
City: CANYON LAKE
State: TEXAS 78133

Witness Signature: Daniel Jennings

Name: Daniel Jennings
City: Canyon Lake
State: TEXAS

Testator's Initials: LR

Witnesses' Initials: RC NRC DJ

AFFIDAVIT

STATE OF TEXAS
COUNTY OF COMAL

Before me, the undersigned, on this day personally appeared LeRoy Cranfill, Norman Ralph Chappell and Linda Chappell and Daniel Jennings known to me to be the Testator and the witnesses, respectively, whose names are signed to the foregoing instrument. All of these persons were first duly sworn by me. LeRoy Cranfill, the Testator, declared to me and to the witnesses, in my presence, that the foregoing instrument is the Testator's Will and that the Testator willingly signed and executed such instrument (or expressly directed another person to sign the instrument for the Testator in the Testator's presence) in the presence of the witnesses, as the Testator's free and voluntary act for the purposes expressed in the instrument. Each of the witnesses declared in the presence and hearing of the Testator that the foregoing instrument was executed and acknowledged by the Testator as the Testator's Will in their presence and that they, in the Testator's presence, hearing and sight and at the Testator's request, and in the presence of each other, did subscribe their names to the instrument as attesting witnesses on the date of the instrument, and that to the best of the witness' knowledge, the Testator was eighteen years of age or older, of sound mind, under no constraint or undue influence, and the witnesses were of adult age and otherwise competent to be witnesses.

LeRoy Cranfill
LeRoy Cranfill, Testator

Witness Signature: Norman Ralph Chappell

Name: NORMAN RALPH CHAPPELL
City: CANYON LAKE
State: TEXAS 78133

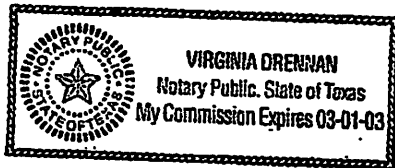
Witness Signature: Linda Chappell

Name: LINDA CHAPPELL
City: CANYON LAKE
State: TEX 78133

Witness Signature: Daniel Jennings

Name: Daniel Jennings
City: 651 Lazy Oaks Dr.
State: Canyon Lake, TX 78133

Subscribed, sworn to and acknowledged before me by LeRoy Cranfill, the Testator, and
subscribed and sworn to before me by Normay Lapp Chappell and
Linda Chappell and Daniel Jennings
Witnesses, this 29 day of March, 1999.



Virginia Drennan
Notary Public, or other officer authorized to take
and certify acknowledgements and administer oaths

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
04/22/2022 09:14:48 AM
TERRI 13 Page(s)
202206018837



Bobbie Koepp

RECEIVED

By KG at 11:39 am, May 02, 2022



COMAL COUNTY
ENGINEER'S OFFICE

**OSSF DEVELOPMENT APPLICATION
CHECKLIST**

Staff will complete shaded items

--	--

Date Received

Initials

114453

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

5/1/2022

Date

___ COMPLETE APPLICATION

Check No. _____ Receipt No. _____

INCOMPLETE APPLICATION

___ (Missing Items Circled, Application Refeused)

System Inspection

Septic Savvy Aerobic Service

P.O.Box 2613

Canyonlake, Texas 78133

Maintenance Provider License # 0001595

(830)743-5001

Inspect Date: 5 October 2022

Property description: Dorothy Cranfil / Unit 0, Lot 241, B/K O

Permit #: 114453 County: Comal Zip code: 78133

Septic Description: clearstream/spray Serial #: _____

Address: 341 Woodwind Dr Phone #: _____

Aeration: 5 psi backpressure Problems/Repairs: _____

Filtration: operational _____

Pumps: operational _____

Disinfection: chlor tabs present _____

Distribution: sprayers operational _____

Controller: Timer, Air, Used Flares - operational _____

Triggered By: flares operational _____

Other Tests and Results:

BOD (Y) (N) N/A TSS (Y) (N) N/A

Fecal Coliform (Y) (N) N/A Chlorine (Y) (N) 1.0 ppm

Checkup performed by: Michael J. Richards

Maintenance Provider: Michael J. Richards

System Inspection

Septic Savvy Aerobic Service

Maintenance Provider License # 0001595

P.O.Box 2613

(830) 743-5001

Canyonlake, Texas 78133

Inspect Date: 7 September 2022

Property description: Lot 241, BIKO Unit 0 / Tanglewood Shores

Permit #: 114453 County: Comal Zip code: 78133

Septic Description: Clearstream 600/Spray Serial #: 29865-06

Address: 341 Woodward Dr. Phone #: _____

Aeration: .5 psi Problems/Repairs: _____

Filtration: Clarifier Cone _____

Pumps: Operational _____

Disinfection: Chlor tabs present _____

Distribution: sprinklers operational _____

Controller: Operational _____

Triggered By: Floods/timer operational _____

Other Tests and Results:

BOD (Y) (N) _____ TSS (Y) (N) _____

Fecal Coliform (Y) (N) _____ Chlorine (Y) (N) 1.0 ppm

Checkup performed by: Michael J. Richards

Maintenance Provider: Michael J. Richards

System Inspection

Septic Savvy Aerobic Service

P.O. Box 2613

Canyonlake, Texas 78133

Maintenance Provider License # 0001595

(830) 743-5001

Inspect Date: 17 February 2023

Property description: Lot 241 (Cypresswood Shores) / Cranfill
Permit #: 114453 County: Comal Zip code: 78133
Septic Description: Clearstream 600 / Spray Serial #: 29865-06
Address: 341 Woodwind Dr. Phone #: _____

Aeration: 1.0 psi backpressure Problems/Repairs: Cleaned Compressor
Filtration: Clarifier Filter.
Pumps: Operational
Disinfection: Tabs present.
Distribution: Sprays Operational.
Controller: Operational.
Triggered By: Floats Operational.

Other Tests and Results:

BOD (Y) (N) _____ TSS (Y) (N) _____
Fecal Coliform (Y) (N) _____ Chlorine (Y) (N) 1.0 ppm.

Checkup performed by: Michael Richards
Maintenance Provider: Michael Richards