



COMAL COUNTY

ENGINEER'S OFFICE

License to Operate On-Site Sewage Treatment and Disposal Facility

Issued This Date: 11/22/2022 Permit Number: 114864

Location Description: 164 OBSCURE WAY
SPRING BRANCH, TX 78070

Subdivision: The Peninsula at Mystic Shores
Unit: 1
Lot: 559
Block: 0
Acreage: 0.0000

Type of System: Aerobic
Surface Irrigation

Issued to: Hoyt Seidensticker

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:

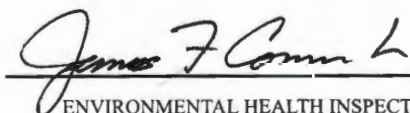
- Increase in the square feet of living area
- Increase in the number of bedrooms
- A change of use (i.e. residential to commercial)
- Relocation of system components (including the relocation of spray heads)
- Installation of landscaping
- Adding new structures to the system

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


ENVIRONMENTAL HEALTH INSPECTOR

OS0032485


ENVIRONMENTAL HEALTH COORDINATOR

OS0007722

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: 114864
Issued This Date: 07/25/2022
This permit is hereby given to: Hoyt Seidensticker

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

164 OBSCURE WAY
SPRING BRANCH, TX 78070

Subdivision: The Peninsula at Mystic Shores
Unit: 1
Lot: 559
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.

RECEIVED

By Kathy Griffin at 12:50 pm, Jul 08, 2022



COMAL COUNTY
ENGINEER'S OFFICE

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

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Date Received

Initials

114864

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.

Rene R

Signature of Applicant

11-13-21

Date

___ COMPLETE APPLICATION
Check No. _____ Receipt No. _____

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

RECEIVED

By Kathy Griffin at 12:51 pm, Jul 08, 2022



ENGINEER'S OFFICE

ON-SITE SEWAGE FACILITY APPLICATION

114864 renewal of

112626 195 DAVID JONAS DR
NEW BRAUNFELS, TX 78132
(830) 608-2090
WWW.CCEO.ORG

Date 11-13-2021

Permit Number 112626

1. APPLICANT / AGENT INFORMATION

Owner Name Rene Pinos and Ernestina Guzman Agent Name Hoyt Seidantile
Mailing Address 164 Obscure Way Agent Address _____
City, State, Zip Spring Branch, TX 78070 City, State, Zip _____
Phone # 650-630-3516 Phone # 210 414 6607
Email rene050@yahoo.com Email hoyt@landstewardship.com

2. LOCATION

Subdivision Name The Peninsula at Mystic Shores Unit 1 Lot 559 Block _____
Survey Name / Abstract Number _____ Acreage _____
Address 164 Obscure Way City Spring Branch State Tx Zip 78070

3. TYPE OF DEVELOPMENT

Single Family Residential

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

Number of Bedrooms 4

Indicate Sq Ft of Living Area 3466

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: \$ _____ (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

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.

Rene Pinos
Signature of Owner

11-13-21
Date

Planning Materials & Site Evaluation as Required Completed By Hoyt Seidenthal

System Description Aerobic with Spray Distribution

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

Tank Size(s) (Gallons) 600 GPD ATU Absorption/Application Area (Sq Ft) 7923.52

Gallons Per Day (As Per TCEQ Table III) 300

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

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

Is there an existing TCEQ approval CZP for the property? Yes No

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

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

(If yes, the R.S. or P.E. 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: _____

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.

Hoyt Seidenthal
Signature of Designer

7-7-22
Date

YCB/M



Affidavit to the Public

THE COUNTY OF Comal
STATE OF TEXAS

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

Before me, the undersigned authority, on this day personally appeared Rene Rios who, after being, by me, duly sworn, upon oath states that he/she is 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:

Legal Description of property is as follows:

Lot 559, The Peninsula at Mystic Sages I 164 Obscure Way

An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91(12) will be installed on the property.

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (commission) 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 owners 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.

This OSSF must be covered by a continuous service policy 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 may be obtained from (Comal County).

Signed by my/our hand(s) on this 14 Day of November, 2021

Signature [Signature]

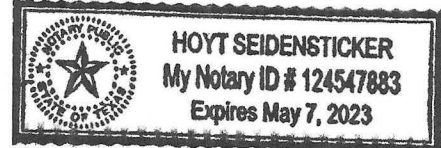
Print Name Rene Rios

Sworn to and subscribed to before Notary Public, in and for the state of Texas and

WITNESS MY HAND AND OFFICIAL SEAL THIS THE 14 DAY OF November, 2021.

Hoyst Seidensticker
Notary Public, State of Texas
Commission Expires: _____

Filed and Recorded
Official Public Records
Bobbie Koepf, County Clerk
Comal County, Texas
12/22/2021 01:10:51 PM
NANCY 1 Page(s)
202106065461



Bobbie Koepf

MJ Central Texas Septic, LLC
DBA MJ Septic

27552 Old Blanco Road
 San Antonio, Texas 78260
 (210) 875-3625 * (210) 889-4606
 mjseptic@satx.rr.com (email)
 www.mjseptic.com

Aerobic Installation * Aerobic Maintenance Contracts
 Real Estate Inspections * Cleaning/Pumping

Michael J. Long, MP 0001294 Licensed by T.C.E.Q.

PROPERTY ADDRESS: _____

164 Obscure Way

The Texas Commission on Environmental Quality (TCEQ) require all ATU's to be checked and maintained every four months for the life of the unit (some permitting authorities may stipulate this requirement, after the first two years after installation; call your county to inquire). Upon expiration of this contract, MJ Septic will offer a continuation of your maintenance contract to cover labor and routine maintenance/reports. Lab testing, if required, for coliform, TSS, BOD etc. are NOT included in this policy and applicable fees are the owner's responsibility. MJ Septic will inspect and service your ATU once every 4 months for the duration of your 2-year initial contract. For a new single family dwelling, this is the date of installation, required by state guidelines dated June 13, 2001. For an existing single family dwelling, this is the date the notice of approval is issued by your permitting authority. The effective date of this maintenance contract shall be the date the LTO (license to operate) is issued.

MJ Septic will address all major concerns/complaints (excluding weekends & holidays) within 72 hours from the initial point of contact with homeowner(s).

- **The annual fee on your contract includes the following:** an inspection every four months (three times annually) which include inspecting the mechanical, electrical and other applicable components to ensure proper function. The annual fee does not include any parts, cleaning/pumping, chlorine/bleach (tablets or liquid), additional service calls or additional testing that may be required by any regulating authority. If for any reason, we are unable to obtain access to your property or system to perform a service check, you may be charged a \$75 service call for re-scheduling. It is very important that we have all proper gate codes, combination locks etc. to inspect your system.
- **Repairs I:** If repairs or replacement of parts is needed during routine inspection, we will try to contact the homeowner for approval if we are able to repair onsite. If we are unable to repair/replace parts onsite, client will be notified via email and/or USPS that repairs/replacement of parts is needed. All MAJOR part replacements come with a 2-year warranty (see notes below). There will be a \$75 warranty credit fee assessed on all parts. Warranted items will only be honored when a valid maintenance contract is in effect with MJ Septic. If the contract has a lapse, ALL WARRANTED items are VOIDED.
- **Repairs II:** For ATU's under initial installation warranty (2 years from initial installation date) if warranted items are required to be replaced within 30 days of installation, part will be replaced with no fees, after 30 days there will be a \$75 warranty credit fee assessed on all parts. Warranted items will only be honored when a valid maintenance contract is in effect with MJ Septic.
- **Additional Service Calls/Charges:** If a service call is required by homeowner/renter between regular inspections, a service call fee of \$75 (not including parts and/or cleaning/pumping) will be assessed. We may waive this fee at our discretion. These calls include but are not limited to the following: red light alarms, high water alarms, chlorinator checks, leaky airlines, timer adjustments, spray head adjustments and system power failure.
- **Chlorine:** The property owner is responsible for maintaining the chlorine supply. TCEQ regulation requires proper chlorination. For liquid chlorinators, homeowners are to add 2-3 gallons of liquid chlorine/bleach per month. (if the chlorinator is completely empty, DO NOT add more than 3 1/2 gallons of liquid chlorine/bleach at a time) For tablet chlorinators, homeowners can purchase Calcium Hypochlorite tablets at their local Home Depot or Lowe's.
DO NOT USE POOL TABLETS (this can cause a volatile reaction)
- **Cleaning/Pumping:** The cleaning/pumping of your ATU is not included in your maintenance contract. We always recommend pumping between 10-12" of sludge. *A typical/average household will need to have their system pumped every 2-5 years; this all depends on usage and will vary per household*
- **Transfer of Property/Ownership:** The fee of this maintenance contract is non-refundable, however is fully transferrable to the new owner(s). If this policy is sold within the contract period, the signing party is responsible for all repairs unless the new homeowner(s) information is provided before repairs are made and transfer contract is signed (by new homeowner) and returned to us. The new homeowner(s) will be required to meet for a walk-through orientation with one of our technicians during their first visit of their transfer contract. **RENTAL HOMES:** The PROPERTY OWNER is responsible for all fees associated with this contract. Renters will be required to have a walk-through orientation during their first visit to ensure proper usage, etc.
- **Altering the system:** Do not allow alteration to any part of the system or sprinkler head locations. Alterations would put the system out of compliance and would cause the property owner additional expense to bring the system back into compliance. Any use of another company to make repairs to the system will violate any warranties and be considered as a breach of this maintenance contract. If client chooses to purchase and use their own parts, MJ Septic will not install nor work on these parts.
- **Violations of Warranty:** *Violations of the warranty include but are not limited to the following: turning off your system at any time, disconnecting the alarm; restricting airflow to the Air Compressor, overloading the system above its daily rated capacity, introducing excessive amounts of harmful matter (including harsh chemicals, cleaners, antibiotics, etc.) into the system or any other harmful usage of your OSSF/ATU. Refusing to Clean/Pump Out Septic when recommended and/or replacing necessary parts as needed. Necessary treatment of ants. Homeowner must keep grass, weeds and plants trimmed and clear of tank access points, control panel, Air Compressor, etc. Moving sprinkler lines without proper documentation, etc. Building over septic tank, lids, etc.*
- **Terms of Payment:** Payment is due in full for the maintenance contract at time of signing. Payment for parts, repairs, cleaning/pumping, service calls, etc. are due prior to or at time of service, unless otherwise specifically noted. If payment is not received within ten (10) business days of service date, a 1.5% finance charge will be assessed per month. If payment is delinquent, your next service check/maintenance contract may be cancelled. If payment is more than 90 days past due, contract will be cancelled and we will send to collections.
- **Maintenance Tips/Owner Guide:** Please read the attached Maintenance Tips/Owner Guide. Following these easy steps can help prevent unnecessary and avoidable expenses to the homeowner(s). Please initial here that you've received a copy of this document: _____ (keep the maintenance tips/guide for your reference)

CIRCLE ONE CHOICE BELOW

Contract Verified (office use only) _____

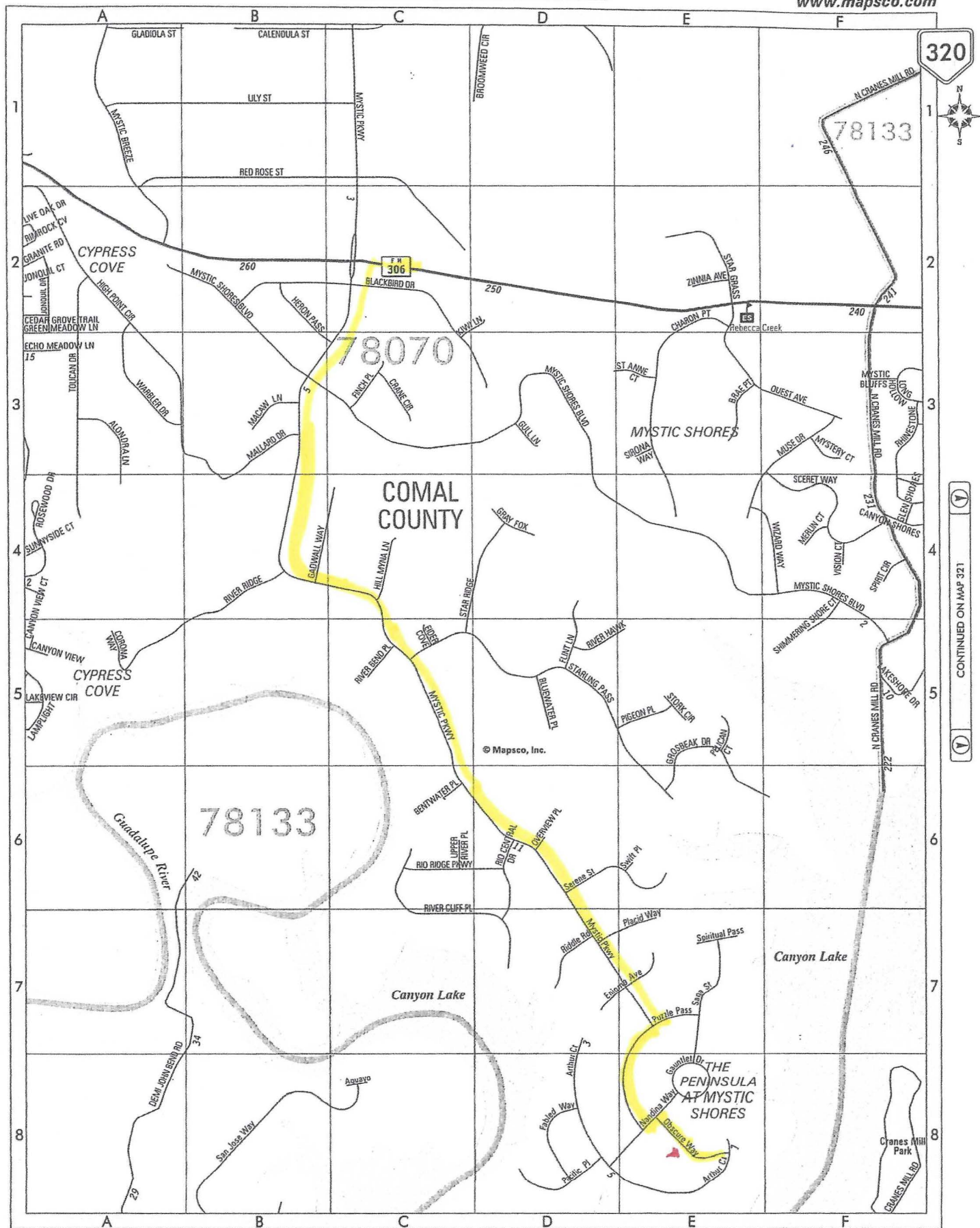
1 YEAR	2 YEAR	3 YEAR	2 YEAR INITIAL	Paid in Full at Sign Up, Non-Refundable, Does Not Include Additional Charges Noted Above. Homeowner(s) are NOT required to be present at inspections. They will receive phone call notification the day of service and a door hanger will be left if no one is home. Reports emailed/mailed within a few business days.
\$285	\$530	\$675	Included in Installation	

Acceptance of Maintenance Contract: The above prices, specifications, and conditions are satisfactory and are hereby accepted. MJ Septic is authorized to enter property to perform routine maintenance inspections as agreed. I have read and agree to the maintenance contract guidelines stated above and have also read and agree to comply with the Maintenance Tips/Owner Guide.

Accepted by Signature: *Rene Rioz* Printed Name: *Rene Rioz* Email: *reneoso@yahoo.com*
 Phone Numbers: (Home) *650-630-3510* (Mr. Cell) *630-630-7832* (Mrs. Cell) _____ (Work) _____
 Subdivision: *Mystic Shores Peninsula* # of Occupants in Home: *5* Gate Codes/Combination Locks, etc. _____ Biting Dogs: *NO*
 (MJ Septic will assess a \$75 service fee if we are not notified of gate code changes, biting dogs, etc.)

MJ Central Texas Septic, LLC Authorized Signature: *Stephanie E. Perez*

Date: *11-13-2021*



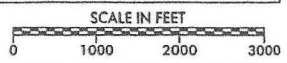
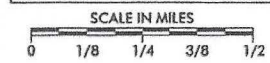
320

78133

306

78070

78133



ON-SITE SEWAGE FACILITY
Site Evaluation Report Information

Date: 7/7/2022

Applicant Information:

Name: Rene Rios and Ernestina Guzman
Address: 164 Obscure Way
City: Spring Branch State: Texas Zip: 78070
Phone: 650-630-3510

Property Location:

Lot: 559 Block
Sub.: The Peninsula at Mystic Shores
Street/Road Address: 164 Obscure Way
City: Spring Branch State: Texas Zip: 78070
Unincorporated Area? Y or N y
Additional information

Site Evaluator Information:

Name: Hoyt Seidensticker
License OS0008771 Expires 8/31/2023
Company: Land Stewardship Services, LLC
Address: 124 Bristow Way
City: Boerne State: Texas Zip: 78006
Phone: (210) 414-6603
Email hoyt@landstewardshipservices.com

Installer information:

Name: Michael Long
License OS0023596
Company: MJ Central Texas Septic
Address: 27552 Old Blanco Road
City: SA State: Texas Zip: 78260
Phone: (210) 875-3625 Fax:


Schematic of Lot or Tract

Show:

Compass North, adjacent streets, property lines, property lines, property dimensions, location of buildings, easements, water lines, and other surface improvements where known (drainage, patios, sidewalks).
Location of existing or proposed water wells within 150 feet of property.
Indicate slope or show contour lines from the structure to the farthest location of the proposed soil absorption or irrigation area.
Location of soil borings or dug pits (show location with respect to a known reference point).
Location of natural, constructed, or proposed drainage ways, (streams, ponds, lakes, rivers, high tide of salt water bodies) water impoundments areas, cut or fill bank, sharp slopes and breaks.

SITE DRAWING Lot Size: _____ acres

SEE ATTACHED

Signature of Site Evaluator  Site Evaluator License No: OS0008771

ON-SITE SEWAGE FACILITY Soil Evaluation Report Information

Date Soil Survey Performed: 6/2/2022

Site Location: 164 Obscure Way

Name of Site Evaluator: Hoyt Seidensticker Registration Number: OS0008771

Proposed Excavation Depth: n/a County: Comal

Requirements:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area.

Location of soil boring or dug pits must be shown on the site drawing.

For subsurface disposal, soil evaluation 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 feature on the form. Indicate depths where features appear.

Soil Boring Number <u>1</u>						
Depth (feet)	Texture Class	Soil Structure	Gravel Analysis	Drainage (Redox Features/ Water Table)	Restrictive Horizon	Observations (color, consistence)
0 _____	III	Clay loam rock	<30%	none	yes, rock	Brown
1 <u>12 in</u> _____						
2 _____						
3 _____						
4 _____						
5 _____						
Soil Boring Number <u>2</u>						
Depth (feet)	Texture Class	Soil Structure	Gravel Analysis	Drainage (Redox Features/ Water Table)	Restrictive Horizon	Observations (color, consistence)
0 _____	III	Clay loam rock	<30%	none	yes, rock	Brown
1 <u>12 in</u> _____						
2 _____						
3 _____						
4 _____						
5 _____						

Features of Site Area

Presence of 100 year flood zone Yes ___ No x

Presence of adjacent ponds, streams, water improvements Yes ___ No x

Existing or proposed water well in nearby area Yes ___ No x

Organized sewage service available to lot or tract Yes ___ No x

Recharge feature within 150 feet Yes ___ No x

By my signature, I hereby certify that the information provided in this report is based on my site observations and are accurate to the best of my ability.

I understand that any misrepresentation of the information contained in this report may be grounds to revoke or suspend my license. The site evaluation

determined the site is suitable for a Spray Distribution disposal system with Aerobic treatment

According to table XIII, the site is suitable for this proposed system. A copy of Table XIII has been given to the property owner to inform them of

other alternatives based upon the result of this site evaluation

Hoyt Seidensticker
Signature of Site Evaluator

7-7-22
Date

7/7/2022
10:35 AM

Aerobic with Spray
Distribution System

ON-SITE SEWAGE FACILITY DESIGN CRITERIA

Rene Rios and Ernestina Guzman

Head Pressure

Elevation Head:	<u>4</u>
Pressure Head:	<u>92</u>
Friction Head:	<u>7.48</u>
Total head:	<u>103.5</u>

Sprinkler Head Information

K-Rain sprinkler head PROPLUS, low angle nozzle	
No. 3 @40psi	GPM: <u>3.1</u>
Number of sprinkler heads:	<u>2</u>
Gallons per minute:	<u>6.2</u>

A class 1 aerobic wastewater treatment unit, chlorination and spray distribution system will be designed for this location. Wastewater from the residence will flow to a pretreatment/trash tank, then to the treatment unit. Treated effluent will be disinfected by a Econo-Chlor 200-1500 Unit in the pump tank, before being disposed of through above ground sprinkler heads. All warning systems shall be installed with the aerobic unit

Land acceptable for surface application shall have a flat terrain (with less than or equal to 15% slope). Sloped land (with greater than 15% slope) may be acceptable if it is properly landscaped and terraced to minimize runoff. There shall be nothing in the surface application area within ten feet of the sprinkler which would interfere with the uniform application of the effluent.

Areas that rock is exposed must be covered with a suitable amount of material acceptable to the inspecting authority. Areas that are bare or have been disturbed must be seeded or sodded with a mixture of rye and bermuda grasses or other grass species prior to system operation.

A maintenance contract for the entire system must be established at time of installation with someone holding a license to maintain the installed aerobic system.

At every inspection a Total Chlorine Residual test must be conducted on the effluent in the pump tank and must be a minimum acceptable level of .1 mg/l residual.

All design criteria is in accordance with TCEQ, Title 30, TAC Chapter 285, Subchapter D, On-Site Sewage Facilities (Effective December 27, 2012). The above design was based on the best available information and should function properly under normal operating conditions. All changes or modifications made to design must be approved by the below signed designer.



Hoyt Seidensticker, R.S. No. 3588



Date

Land Stewardship Services, LLC, 124 Bristow Way, Boerne, Texas 78006

Cell (210) 414-6603,

hoyt@landstewardshipservices.com



Permit 114864

Scale 1" = 50'

REVISED

8:37 am, Nov 21, 2022

Any water from the irrigation system that is applied to the surface of the area utilized by the on-site sewage facility system shall be controlled on a separate irrigation zone or zones so as to allow complete control of any irrigation to that area so that there will not be excess water that would prevent the on-site sewage facilities system from operation effectively.

All irrigation piping and valves shall meet the separation distance from the on-site sewage facilities system as required for a private water line in 285.91(10) of this title (relating to Tables), concerning the minimum required separation distances for on-site sewage facilities.

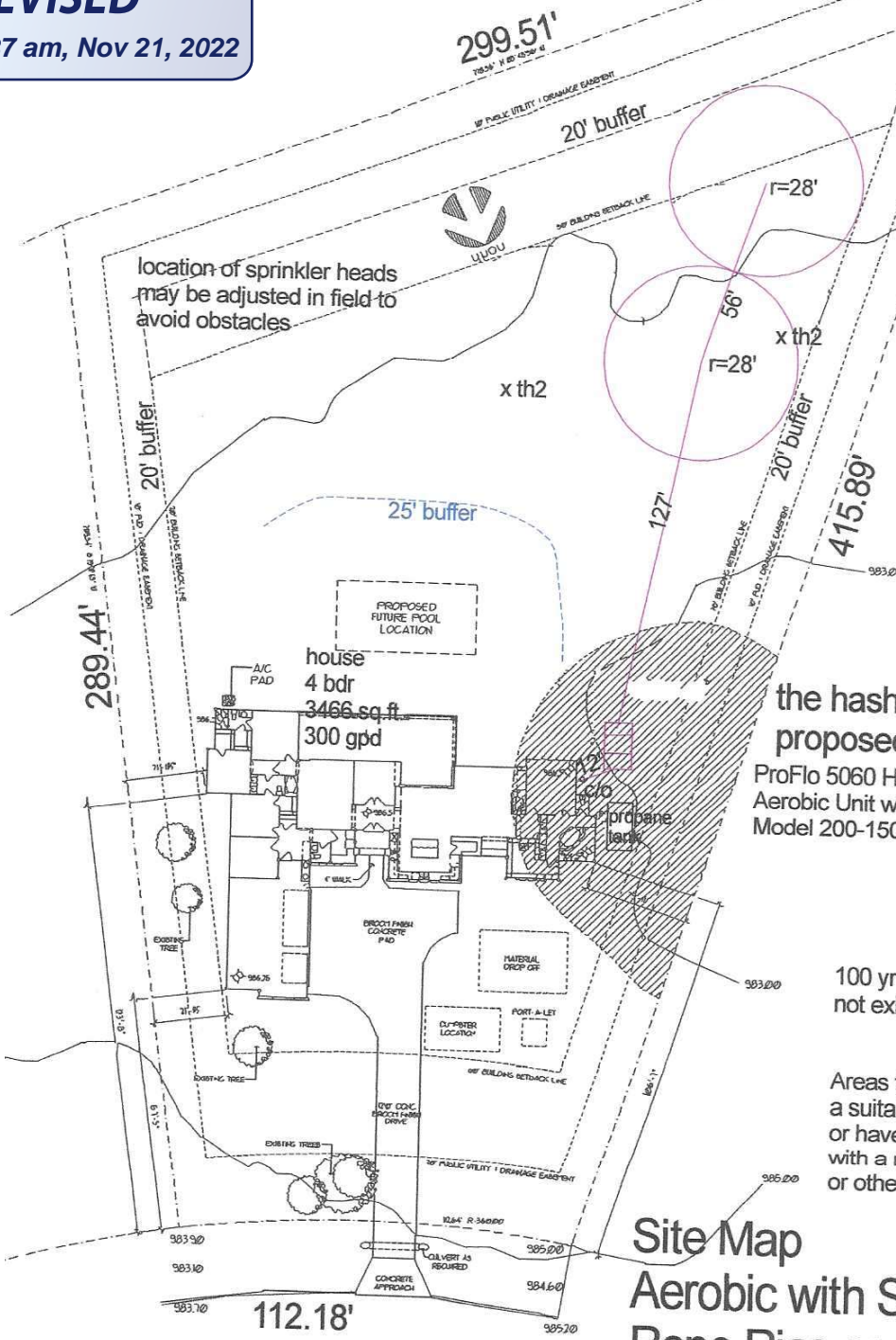
The irrigation system is designated a health hazard and any connections using a private or public potable water source shall be connected to the water source through a reduced pressure principle backflow prevention assemble as defined in 344.50 of this title (relating to backflow prevention methods).

Risers must be permanently fastened to the tank lid or cast into the tank. The connection between the riser and the tank lid must be watertight. Risers must be fitted with removable watertight caps and protected against unauthorized intrusions by either a padlock, a cover that can be removed with specialized tools, a cover having a minimum net weight of 29.5 kilograms (65 pounds) set into a recess of the tank lid, or any other means approved by the executive director.

Land acceptable for surface application shall have a flat terrain (less than or equal to 15% slope). Sloped land (with greater than 15% slope) may be acceptable if it is properly landscaped and terraced to minimize runoff. Surface application should be done between the hours of 12:00 midnight and 5:00 a.m.

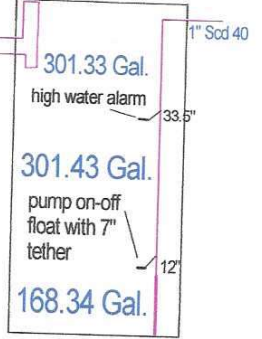
All external electrical lines must be in gray conduit

There shall be nothing in the surface application area within ten feet of the sprinkler which would interfere with the uniform application of the effluent



the hashmark area is the proposed cut and fill area

ProFlo 5060 HCSP 600 gpd
Aerobic Unit with Econo-Chlor
Model 200-1500 Chlorine Dispenser

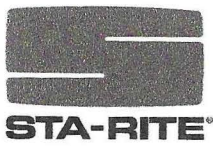


100 yr flood plain does not exist on this tract

Areas that rock is exposed must be covered with a suitable amount of material. Areas that are bare or have been disturbed must be seeded or sodded with a mixture of rye and bermuda grasses or other grass species prior to system operation.

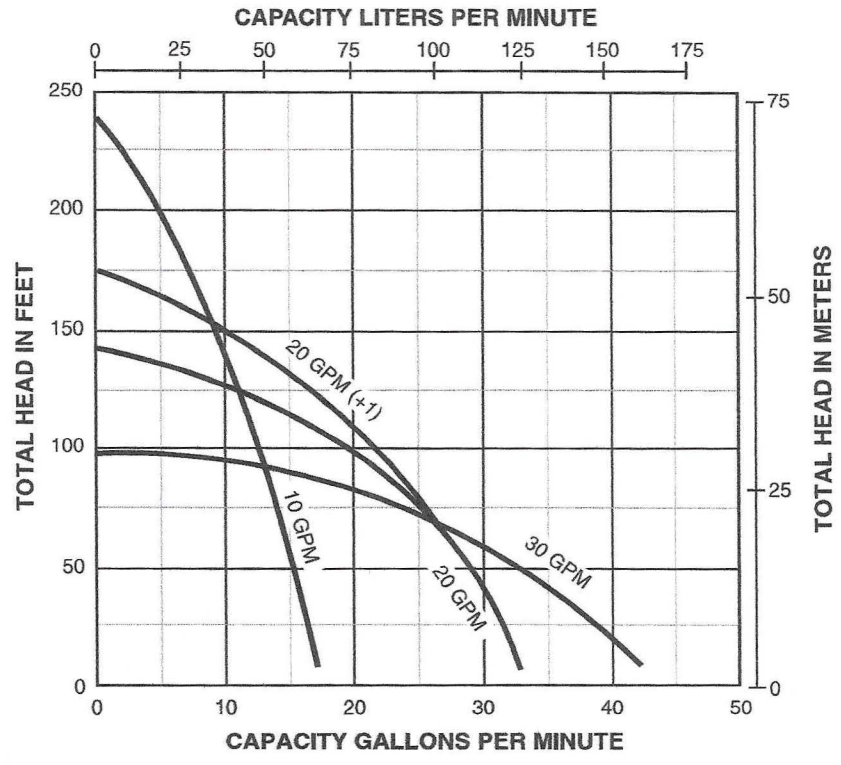
Site Map
Aerobic with Spray Distribution system
Rene Rios and Ernestina Guzman
lot 559, The Peninsula at Mystic Shores
164 Obscure Way
Spring Branch, Texas 78070
Comal county

11-18-22
HOYT SEIDENSTICKER
3598
Hoyt Seidensticker



4" multi-stage submersible pump

PUMP PERFORMANCE



PUMP PERFORMANCE (Capacity in Gallons per Minute)

Pump Model	Flow Rate (GPM)	PSI											
		0	10	20	30	40	50	60	70	80	90	100	110
10DOM05221	10			15.0	13.7	12.7	11.5	10.2	8.4	6.5	4.3	1.0	
10DOM05121	10			15.0	13.7	12.7	11.5	10.2	8.4	6.5	4.3	1.0	
20DOM05221	20			30.0	26.0	21.5	14.2	4.4					
20DOM05121	20			30.0	26.0	21.5	14.2	4.4					
30DOM05221	30		38.5	33.3	25.8	16							
30DOM05121	30		38.5	33.3	25.8	16							
20DOM05221+1	20 + 1			30	27.5	24	20	13.5	6				
20DOM05121+1	20 + 1			30	27.5	24	20	13.5	6				

PUMP PERFORMANCE (Capacity in Liters per Minute)

Pump Model	Flow Rate (LPM)	Bar											
		0	.69	1.38	2.07	2.76	3.45	4.13	4.82	5.51	6.20	6.89	7.58
10DOM05221	37.85		56.8	51.9	48.1	43.5	38.6	31.8	24.6	16.3	3.8		
10DOM05121	37.85		56.8	51.9	48.1	43.5	38.6	31.8	24.6	16.3	3.8		
20DOM05221	75.7		113.6	98.4	81.4	53.7	16.7						
20DOM05121	75.7		113.6	98.4	81.4	53.7	16.7						
30DOM05221	113.55	145.7	126.0	97.7	60.6								
30DOM05121	113.55	145.7	126.0	97.7	60.6								
20DOM05221+1	75.7 + 1			113.4	103.9	90.7	75.6	51.0	22.6				
20DOM05121+1	75.7 + 1			113.4	103.9	90.7	75.6	51.0	22.6				

PROPLUS™

The **PROPLUS™** adjustable arc and full-circle gear driven rotor comes standard with nine numerically coded interchangeable nozzles. Excellent nozzle performance delivers an exceptional fall out pattern. In independent testing by C.I.T., the **PROPLUS™** delivered up to 90% uniform coverage.

Also Available: 12" High Pop, Shrub Head and Reclaimed Water models.

Tough, proven and advanced, the **PROPLUS™** is the leader in it's class. Set it and forget it. Arc Memory Clutch returns the rotor to its preset position. Technology works for you.

MODELS

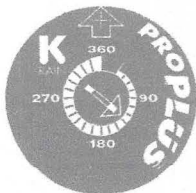
- 11003** ProPlus
- 11003-HP** ProPlus 12" High Pop
- 11003-SH** ProPlus Shrub Head

OTHER OPTIONS: ADD TO PART NUMBER

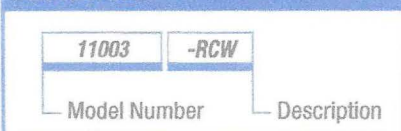
- CV** Check Valve
- LA** Low Angle Nozzle
- NN** No Nozzle
- RCW** ProPlus for Reclaimed Water w/Low Angle Nozzle

EASY ARC SETTING

Arc Selection 40° to Continuous 360°
Adjust From Left Start



HOW TO SPECIFY



K-Rain Manufacturing Corp.
1640 Australian Avenue
Riviera Beach, FL 33404 USA
+1 561 844-1002
FAX: +1 561 842-9493

1.800.735.7246 | www.krain.com

SPECIFICATIONS

- ▶ Inlet: 3/4" Threaded NPT
- ▶ Arc Adjustment Range: 40° to Continuous 360°
- ▶ Flow Range: .5 - 10.0 GPM
- ▶ Pressure Rating: 20 - 70 PSI
- ▶ Precipitation Rate: .06 to .50 Inches Per Hour (Depending on Spacing and Nozzle Used)
- ▶ Overall Height (Popped Down): 7 1/2" / 17" for High Pop
- ▶ Recommended Spacing: 28' to 44'
- ▶ Radius: 22' to 50'
- ▶ Nozzle Trajectory: 26°
- ▶ Low Angle Nozzle Trajectory: 12°
- ▶ Standard and Low Angle Nozzle: Included
- ▶ Riser Height: 5"

PERFORMANCE DATA

PERFORMANCE			
NOZZLES	PRESSURE PSI	RADIUS FT.	FLOW GPM
#0.5	30	28'	.5
	40	29'	.6
	50	29'	.7
	60	30'	.8
#0.75	30	29'	.7
	40	30'	.8
	50	31'	.9
	60	32'	1.0
#1	30	32'	1.3
	40	33'	1.5
	50	34'	1.6
	60	35'	1.8
#2	30	37'	2.4
	40	40'	2.5
	50	42'	3.0
	60	43'	3.3
#2.5 PRE-INSTALLED	30	38'	2.5
	40	39'	2.8
	50	40'	3.2
	60	41'	3.5
#3	30	38'	3.6
	40	39'	4.2
	50	41'	4.6
	60	42'	5.0
#4	30	43'	4.4
	40	44'	5.1
	50	46'	5.6
	60	49'	5.9
#6	40	45'	5.9
	50	46'	6.0
	60	48'	6.3
	70	49'	6.7
#8	40	42'	8.0
	50	45'	8.5
	60	49'	9.5
	70	50'	10.0

METRIC					
NOZZLES	PRESSURE KPA	PRESSURE BARS	RADIUS METERS	FLOW L/M	FLOW M3/H
#0.5	206	2.0	8.5	1.89	.11
	275	3.0	8.8	2.27	.14
	345	3.5	8.8	2.65	.16
	413	4.0	9.1	3.03	.18
#0.75	206	2.0	8.8	2.65	.16
	275	3.0	9.1	3.03	.18
	345	3.5	9.4	3.41	.20
	413	4.0	9.8	3.79	.23
#1	206	2.0	9.8	4.92	.30
	275	3.0	10.1	5.68	.34
	345	3.5	10.4	6.05	.36
	413	4.0	10.7	6.81	.41
#2	206	2.0	11.3	9.08	.54
	275	3.0	12.2	9.46	.56
	345	3.5	12.8	11.35	.68
	413	4.0	13.1	12.49	.75
#2.5 PRE-INSTALLED	206	2.04	11.6	9.46	.57
	275	2.72	11.9	10.60	.64
	345	3.40	12.2	12.11	.73
	413	4.08	12.5	13.25	.79
#3	206	2.0	11.6	13.63	.81
	275	3.0	11.9	15.89	.95
	345	3.5	12.5	17.41	1.04
	413	4.0	12.8	18.92	1.13
#4	206	2.0	13.1	16.65	.99
	275	3.0	13.4	19.30	1.15
	345	3.5	14.0	21.19	1.27
	413	4.0	14.9	22.33	1.33
#6	206	3.0	13.7	22.33	1.33
	275	3.5	14.0	22.71	1.36
	345	4.0	14.6	23.85	1.43
	413	5.0	14.9	25.35	1.52
#8	206	3.0	12.8	30.28	1.81
	275	3.5	13.7	32.12	1.92
	345	4.0	14.8	35.95	2.15
	413	5.0	15.3	37.85	2.27

LOW ANGLE DATA			
NOZZLES	PRESSURE PSI	RADIUS FT.	FLOW GPM
#1	30	22'	1.2
	40	24'	1.7
	50	26'	1.8
	60	28'	2.0
#3	30	29'	3.0
	40	32'	3.1
	50	35'	3.5
	60	37'	3.8
#4	30	31'	3.4
	40	34'	3.9
	50	37'	4.4
	60	38'	4.7
#6	40	38'	6.5
	50	40'	7.3
	60	42'	8.0
	70	44'	8.6

METRIC					
NOZZLES	PRESSURE KPA	PRESSURE BARS	RADIUS METERS	FLOW L/M	FLOW M3/H
#1	207	2.04	6.71	4.54	.27
	275	2.72	7.32	6.43	.39
	344	3.40	7.92	6.80	.41
	413	4.08	8.53	7.56	.46
#3	207	2.04	8.84	11.34	.68
	275	2.72	9.75	11.72	.71
	344	3.40	10.67	13.23	.80
	413	4.08	11.58	14.36	.87
#4	207	2.04	9.45	12.85	.78
	275	2.72	10.36	14.74	.89
	344	3.40	11.28	16.63	1.00
	413	4.08	11.58	17.77	1.07
#6	275	2.72	11.58	24.57	1.48
	344	3.40	12.19	27.59	1.76
	413	4.08	12.80	30.24	1.82
	482	4.76	13.41	32.51	1.96

Data represents test results in zero wind. Adjust for local conditions.
Radius may be reduced with nozzle retention screw.

Scale 1" = 50'

Any water from the irrigation system that is applied to the surface of the area utilized by the on-site sewage facility system shall be controlled on a separate irrigation zone or zones so as to allow complete control of any irrigation to that area so that there will not be excess water that would prevent the on-site sewage facilities system from operation effectively.

All irrigation piping and valves shall meet the separation distance from the on-site sewage facilities system as required for a private water line in 285.91(10) of this title (relating to Tables), concerning the minimum required separation distances for on-site sewage facilities.

The irrigation system is designated a health hazard and any connections using a private or public potable water source shall be connected to the water source through a reduced pressure principle backflow prevention assemble as defined in 344.50 of this title (relating to backflow prevention methods).

Risers must be permanently fastened to the tank lid or cast into the tank. The connection between the riser and the tank lid must be watertight. Risers must be fitted with removable watertight caps and protected against unauthorized intrusions by either a padlock, a cover that can be removed with specialized tools, a cover having a minimum net weight of 29.5 kilograms (65 pounds) set into a recess of the tank lid, or any other means approved by the executive director.

Land acceptable for surface application shall have a flat terrain (less than to equal to 15% slope). Sloped land (with greater than 15% slope) may be acceptable if it is properly landscaped and terraced to minimize runoff.

Surface application should be done between the hours of 12:00 midnight and 5:00 a.m.

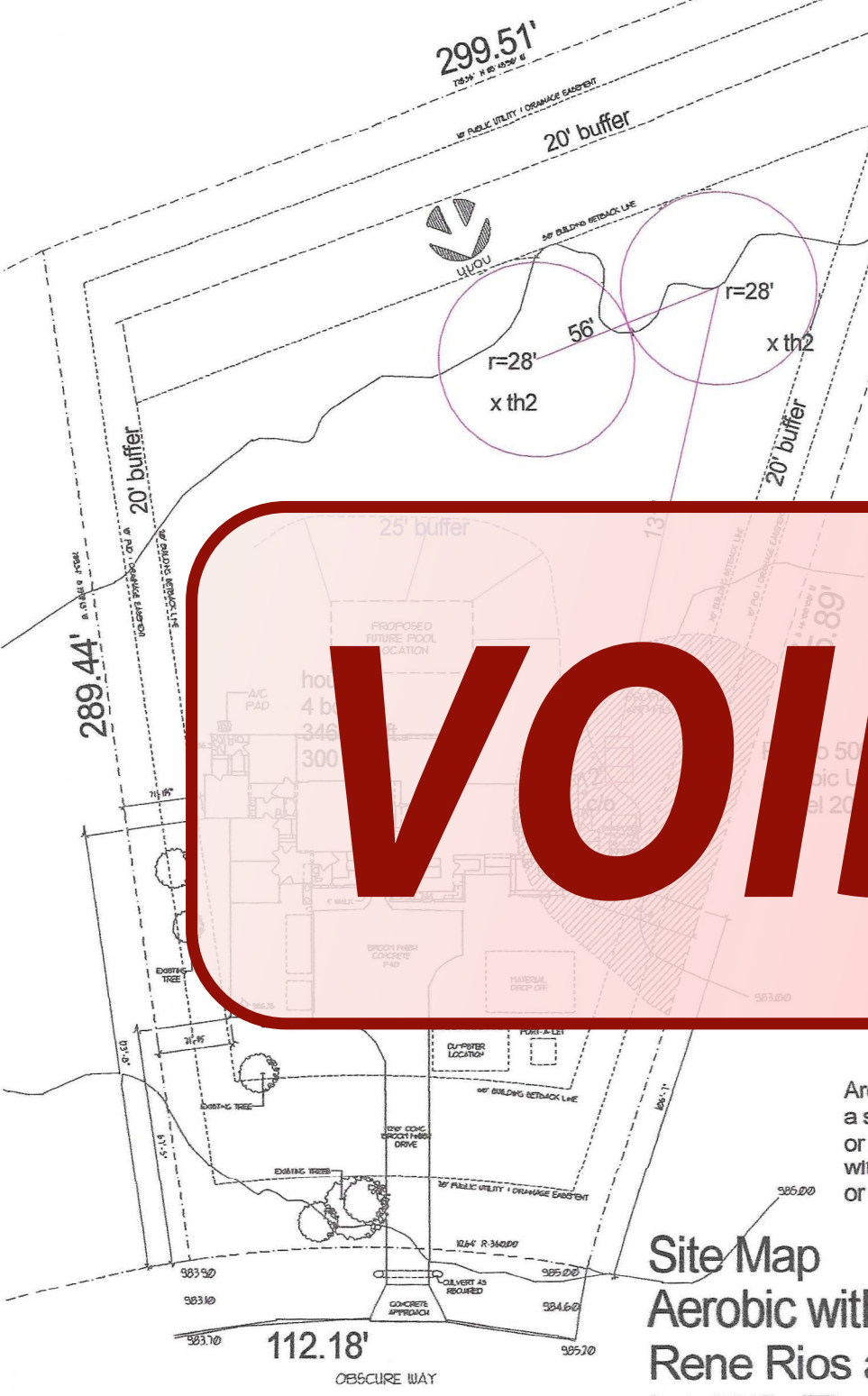
All external electrical lines must be in gray conduit

There shall be nothing in the surface application area within ten feet of the sprinkler which would interfere with the uniform application of the effluent

wood plain does not exist on this tract

location of sprinkler heads may be adjusted field to avoid obstacles

Areas that rock is exposed must be covered with a suitable amount of material. Areas that are bare or have been disturbed must be seeded or sodded with a mixture of rye and bermuda grasses or other grass species prior to system operation.



VOID

1622
HOYT SEIDENSTICKER
REGISTERED SANITARIAN
3588
Hoyt Seidensticker

Site Map
Aerobic with Spray Distribution system
Rene Rios and Ernestina Guzman
lot 559, The Peninsula at Mystic Shores
164 Obscure Way
Spring Branch, Texas 78070
Comal county

Olvera,Brandon

From: Olvera,Brandon
Sent: Tuesday, July 19, 2022 2:08 PM
To: 'Hoyt Seidensticker'; 'reneoso@yahoo.com'
Subject: 112626

RE: 164 Obscure Way The Peninsula at Mystic Shores

Property Owner & Agent,

We received planning materials for the referenced permit application on 07-08-2022 and found those planning materials to be deficient. In order to continue processing this permit, we need the following:

- ✓. What is the hashmark area on the design?
- ✓. Pump tank details needs to need to sign and sealed.
- ✓. Indicate the 1/3 day reserve capacity
4. Revise accordingly and resubmit.

If you have any questions, you can email me or call the office.

Thank You,

Brandon Olvera | Designated Representative | Comal County | www.cceo.org

195 David Jonas Dr, New Braunfels, TX-78132 | t: 830-608-2090 | f: 830-608-2078 | e: olverb@co.comal.tx.us

Permit 114864

REVISED

9:35 am, Jul 22, 2022

Scale 1" = 50'

Any water from the irrigation system that is applied to the surface of the area utilized by the on-site sewage facility system shall be controlled on a separate irrigation zone or zones so as to allow complete control of any irrigation to that area so that there will not be excess water that would prevent the on-site sewage facilities system from operation effectively.

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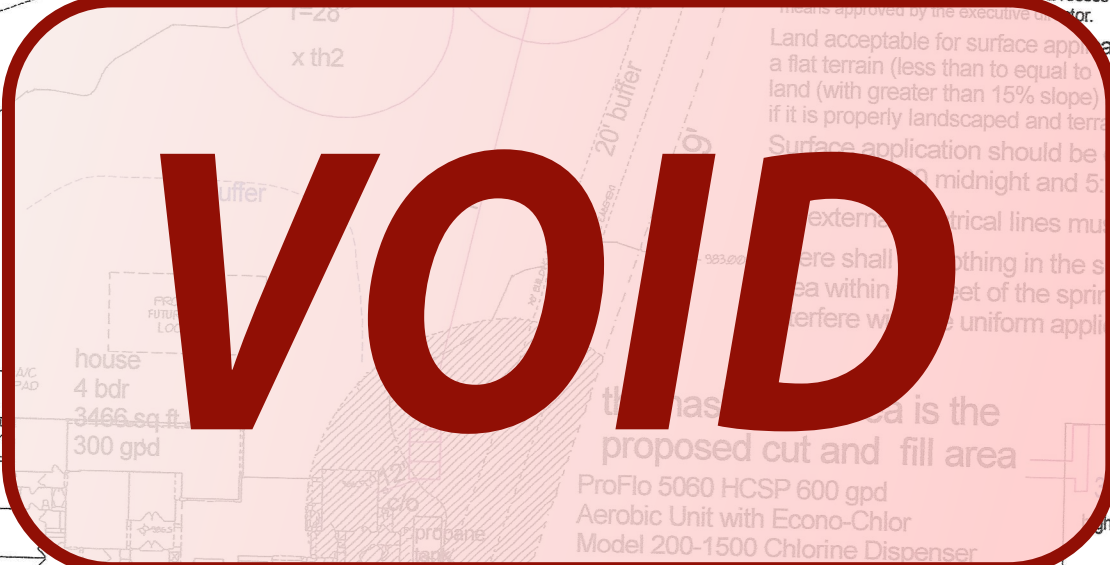
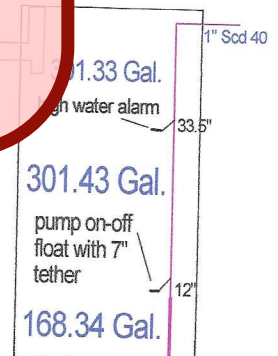
External electrical lines must be in gray conduit. There shall be nothing in the surface application area within the wet of the sprinkler which would interfere with the uniform application of the effluent.

100 yr flood plain does not exist on this tract

Areas that rock is exposed must be covered with a suitable amount of material. Areas that are bare or have been disturbed must be seeded or sodded with a mixture of rye and bermuda grasses or other grass species prior to system operation.

Site Map

Aerobic with Spray Distribution system
Rene Rios and Ernestina Guzman
lot 559, The Peninsula at Mystic Shores
164 Obscure Way
Spring Branch, Texas 78070
Comal county



location of sprinkler heads may be adjusted in field to avoid obstacles

20' buffer

299.51'

20' buffer



56'

r=28'

289.44'

20' buffer

house
4 bdr
3466 sq ft
300 gpd

BROOK FARM CONCRETE PAD

MATERIAL DROP OFF

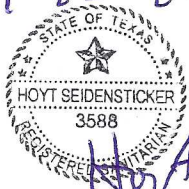
PORT-A-LET

DIFFUSER LOCATION

112.18'

OBSCURE WAY

7-22-22



Hoyt Seidensticker

Olvera,Brandon

From: Olvera,Brandon
Sent: Monday, November 21, 2022 8:28 AM
To: 'Hoyt Seidensticker'; STEPHANIE Perez
Cc: lawrence.jaramillo12@yahoo.com; Allen,Corey; catherine Jefferson; Admin Assistant 2
Subject: RE: 115268
Attachments: Pages from 115268.pdf

Hoyt,

I have attached the page that need to be addressed. The pump tank details page is for a 500 GPD ATU. The minimum requirement is 600GPD. Revise accordingly and resubmit.

Thank You,

Brandon Olvera | Designated Representative | Comal County | www.cceo.org

195 David Jonas Dr, New Braunfels, TX-78132 | t: 830-608-2090 | f: 830-608-2078 | e: olverb@co.comal.tx.us

From: Hoyt Seidensticker <hoyt@landstewardshipservices.com>
Sent: Saturday, November 19, 2022 6:01 AM
To: Olvera,Brandon <Olverb@co.comal.tx.us>; STEPHANIE Perez <mjseptic@mjseptic.com>
Cc: lawrence.jaramillo12@yahoo.com; Allen,Corey <Allenc@co.comal.tx.us>; catherine Jefferson <cat@mjseptic.com>; Admin Assistant 2 <adminassist@mjseptic.com>
Subject: Re: 115268

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

sorry about that, here is the corrected site map with the correct float settings

Hoyt Seidensticker
hoyt@landstewardshipservices.com

Please note my new email and mailing address

Land Stewardship Services, LLC
124 Bristow Way
Boerne, TX 78006

On Fri, Nov 18, 2022 at 4:32 PM Olvera,Brandon <Olverb@co.comal.tx.us> wrote:

Good Afternoon,

The pump tank details page is for a 500 GPD ATU. The minimum requirement is 600GPD. Revise accordingly and resubmit.

Thank You,

Brandon Olvera | Designated Representative | Comal County | www.cceo.org

195 David Jonas Dr, New Braunfels, TX-78132 | **t:** 830-608-2090 | **f:** 830-608-2078 | **e:** olverb@co.comal.tx.us

FILED BY ATC
SPRING BRANCH
OF #

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.

Deed of Gift

THE STATE OF TEXAS §
 KNOW ALL MEN BY THESE PRESENTS:
COUNTY OF COMAL §

Executed on date of acknowledgement to be Effective: January 8, 2021

Grantor: **Amador Raya Rios, Sr., a single person**

Grantor's Mailing Address: 2747 Devonshire Ave., Redwood City, San Mateo County, California 94063

Grantee: **Rene Rios and spouse, Ernestina Guzman**

Grantee's Mailing Address: ⁷³⁹ Hillside Loop, Canyon Lake, Comal County, Texas 78131

Consideration: Love of, and affection for, Grantee

Property (including any improvements): All of my undivided right, title and interest in

Lot 559, The Peninsula at Mystic Shores, Unit One, situated in Comal County, Texas, according to map or plat thereof recorded in Volume 14, Pages 8-11, 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 whosoever lawfully claiming or to claim the same or any part thereof when the claim is by, through, or under Grantor but not otherwise, except as to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty.

FILED BY ATC
SPRING BRANCH

GF # Courtesy
Rios

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.

Deed of Gift

THE STATE OF TEXAS §
COUNTY OF COMAL §

KNOW ALL MEN BY THESE PRESENTS:

Executed on date of acknowledgement to be Effective: January 2, ²⁰²¹2020

Grantor: **Amador Raya Rios, Sr., a single person**

Grantor's Mailing Address: 2747 Devonshire Ave., Redwood City, San Mateo County, California 94063

Grantee: **Rene Rios and spouse, Ernestina Guzman**

Grantee's Mailing Address: ⁷³⁹ Hillside Loop, Canyon Lake, Comal County, Texas 78133

Consideration: Love of, and affection for, Grantee

Property (including any improvements): All of my undivided right, title and interest in:

Lot 559, The Peninsula at Mystic Shores, Unit One, situated in Comal County, Texas, according to map or plat thereof recorded in Volume 14, Pages 8-11, 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.

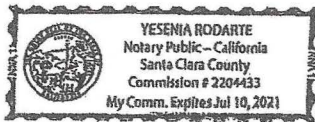
Grantor, for the Consideration and subject to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty, grants, sells, and conveys to Grantee the Property, together with all and singular the rights and appurtenances thereto in any way belonging, to have and to hold it to Grantee 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 when the claim is by, through, or under Grantor but not otherwise, except as to the Reservations from Conveyance and the Exceptions to Conveyance and Warranty.

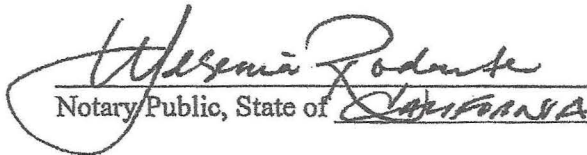
When the context requires, singular nouns and pronouns include the plural.


Amador Raya Rios, Sr.

THE STATE OF CALIFORNIA
COUNTY OF SAN MATEO*

This instrument was acknowledged before me on this the 2nd day of January 4th 2020, by Amador Raya Rios, Sr. AMADOR RIOS RAYA 2021




Notary Public, State of CALIFORNIA

AFTER RECORDING RETURN TO:
Alamo Title Company

PREPARED IN THE LAW OFFICE OF:
Kristen Quinney Porter, LLC
P.O. Box 312643
New Braunfels, Texas 78131-2643

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

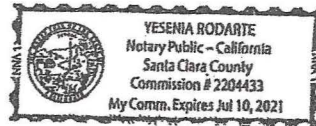
State of California
County of SAN MATEO)

On JANUARY 02, 2021 before me, YESENIA RODARTE, NOTARY PUBLIC
(insert name and title of the officer)

personally appeared AMADOR RIOS RAYA
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/hers/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature *Yesenia Rodarte* (Seal)

ATTACHED TO: DEED OF GIFT
RE: LOT 559, THE PENINSULA AT MYSTIC SHORES,
UNIT ONE, SITUATED IN COLIAR COUNTY, TEXAS.

MJ Septic, LLC
1328 W Borgfeld
San Antonio, TX 78260

Phone: (210) 875-3625

www.mjseptic.com mjseptic@mjseptic.com

To: **Rene & Tina Rios**
164 Obscure Way
Spring Branch, TX 78070

Printed: 7/28/2023
Site: 164 Obscure Way
Spring Branch, TX 78070
(650) 630-7832

Permit #: **114864** Customer ID: 7766
Agency: Comal County Environmental Health Contract Dates: 11/22/2022 - 11/22/2025
County: Comal Scheduled Date: 7/22/2023 Inspection 2 of 9
Mfg / Brand: Pro Flo Aerobic Systems, LP - Pro Flo Aerobic Systems, LP Installed: 11/22/2022
Treatment Type: Aerobic Warranty End: 11/22/2025
Disposal: Surface Application

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: 7/7/2023

Time In: 1:11 pm

Out: 1:21 pm

Entered By: Brianna Perez

Method: Other

Copy emailed to Customer
Customer Emailed: 7/14/2023

Technician: Steve Chavarria

Copy emailed to the Agency
Agency Emailed: 7/28/2023

Maint. Provider: Michael J. Long

Aerators: Operational

Sludge Levels

Filters: Operational

For Tank 1: 5"

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: 0.1mg/L

Tank Lid / Riser: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Alarm: Operational

Comments

Service Completed

- Tech reset your timer. - Technician Secured the Tank Lid and/or Riser prior to leaving location. - *Septic tank cleaning is recommended between 10 and 12 inches of sludge in the pump tank (tank 1) or unless otherwise recommended by technician for other reasons such as full trash tank, etc.* - *This inspection report is not valid for any real estate transactions* - Copy emailed to the customer on 7/14/2023.

Insp ID #:53431

Provider: Michael J. Long

License Info: MP0001294 Expires: 8/31/2025

MJ Septic, LLC
1328 W Borgfeld
San Antonio, TX 78260

Phone: (210) 875-3625

www.mjseptic.com mjseptic@mjseptic.com

To: **Rene & Tina Rios**
164 Obscure Way
Spring Branch, TX 78070

Printed: 7/28/2023
Site: 164 Obscure Way
Spring Branch, TX 78070
(650) 630-7832

Permit #: **114864** Customer ID: 7766
Agency: Comal County Environmental Health Contract Dates: 11/22/2022 - 11/22/2025
County: Comal Scheduled Date: 3/22/2023 Inspection 1 of 9
Mfg / Brand: Pro Flo Aerobic Systems, LP - Pro Flo Aerobic Systems, LP Installed: 11/22/2022
Treatment Type: Aerobic Warranty End: 11/22/2025
Disposal: Surface Application

Service Type: Scheduled Inspection

This counts as a type of "Scheduled Inspection"

Visit Date: **3/15/2023** Time In: 10:20 am Out: 10:53 am

Entered By: Audrey Miller

Method: Other

Copy emailed to Customer
Customer Emailed: 3/18/2023

Technician: Roy Garza

Copy emailed to the Agency
Agency Emailed: 7/28/2023

Maint. Provider: Michael J. Long

Aerators: Operational

Sludge Levels

Filters: Operational

For Tank 1: 1"

Irrigation Pumps: Operational

Disinfection Device: Operational

Chlorine Supply: Operational

Chlorine Residual: 0.1mg/L

Chlorinator: Op

Tank Lid / Riser: Secured

Electric Circuits: Operational

Distribution System: Operational

Sprayfield Veg: Operational

Alarm: Operational

Comments

Service Completed

- Technician Secured the Tank Lid and/or Riser prior to leaving location. - *Septic tank cleaning is recommended between 10 and 12 inches of sludge in the pump tank (tank 1) or unless otherwise recommended by technician for other reasons such as full trash tank, etc.* - *This inspection report is not valid for any real estate transactions* - Copy emailed to the customer on 3/18/2023.

Insp ID #:50872

Provider: *Michael J. Long*

License Info: MP0001294 Expires: 8/31/2025