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

| Perm | it#: | | 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) | | | | |
| | SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends) | | 285.32(a)(5) | | | | |
| 5 | 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)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) | | | | |
| 7 | PRETREATMENT Grease Interceptors if required for commercial | | 285.34(d) | | | | |

Inspector Notes:

| N- | December 41 | A mar | Citotiana | Net | 1 at 1 | 2 m d 1 | 7 mal 1 |
|-----|---|--------|--|-------|-----------|-----------|-----------|
| No. | Description SEPTIC TANK Tank(s) Clearly | Answer | Citations | Notes | 1st Insp. | 2nd Insp. | 3rd Insp. |
| 8 | Marked SEPTIC TANK IsingleTank, 2Compartments Provided withBaffle SEPTIC TANK Inlet Flowline Greater than3" and "T" Provided on Inlet and OutletSEPTIC TANK Septic Tank(s) MeetMinimum Requirements | | 285.32(b)(1) (E)285.91(2)285.32(b)(1) (F)285.32(b)(1)(E) (iii)285.32(b)(1)(E)(ii) (I)285.32(b)(1)(E) (i)285.32(b)(1)(E) (i)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (ii)285.32(b)(1) (B)285.32(b)(1) (A)285.32(b)(1)(E)(iv) | | | | |
| 1 | ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used | | 285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b) | | | | |
| | SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped | | 285.38(d) | | | | |
| | SEPTIC TANK Secondary restraint system providedSEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions | | 285.38(d) 285.38(e) | | | | |
| | SEPTIC TANK Tank Volume Installed | | | | | | |
| 12 | | | | | | | |
| | PUMP TANK Volume Installed | | | | | | |
| 1 | AEROBIC TREATMENT UNIT Size Installed | | | | | | |
| 14 | | | | | | | |
| | AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number | | | | | | |
| 15 | 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) | | | | |
| 18 | | | 203.33(a)(2) | | | | |

| | _ , . | | | - - | | | |
|-----|---|--------|--|--------|-----------|-----------|-----------|
| 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) | | | | |
| | DRAINFIELD Absorptive Drainline 3" PVC or 4" PVC | | | | | | |
| 26 | DRAINFIELD Area Installed | | | | | | |
| | DRAINFIELD Level to within 1 inch per 25 feet and within 3 inches over entire excavation | | 285.33(b)(1)(A)(v) | | | | |
| | DRAINFIELD Excavation Width DRAINFIELD Excavation Depth DRAINFIELD Excavation Separation DRAINFIELD Depth of Porous Media DRAINFIELD Type of Porous Media | | | | | | |
| | DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place | | 285.33(b)(1)(E) | | | | |
| | DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End Plates w/Splash Plate, Inspection Port & Closed End Plates in Place (per manufacturers spec.) | | 285.33(c)(2) | | | | |
| | LOW PRESSURE DISPOSAL SYSTEM Adequate Trench Length & Width, and Adequate Separation Distance between Trenches | | 285.33(d)(1)(C)(i) | | | | |

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|-----|---|--------|---|-------|-----------|-----------|-----------|
| 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) | | | | |
| | AEROBIC TREATMENT UNIT IS Aerobic Unit Installed According to Approved Guidelines. | | 285.32(c)(1) | | | | |
| | 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 | | | | | | |
| | AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place. | | | | | | |
| | PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump PUMP TANK Inspection/Clean Out | | | | | | |
| 37 | 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 PUMP TANK Electrical | | | | | | |
| | Connections in Approved Junction Boxes / Wiring Buried | | | | | | |

| | · · · · · · · · · · · · · · · · · · · | | | | | | | | |
|-----|---|--------|---|-------|-----------|-----------|-----------|--|--|
| No. | Description | Answer | Citations | Notes | 1st Insp. | 2nd Insp. | 3rd Insp. | | |
| | APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple? | | 285.33(d)(2)(G)(iii)(II) 285.33(d)(2)(G)(iii)(III) 285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iii)(I) | | | | | | |
| | APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed | | 285.33(d)(2)(G) (i)285.33(d)(2) (A)285.33(d)(2)(F) | | | | | | |
| | APPLICATION AREA Area Installed | | | | | | | | |
| | PUMP TANK Meets Minimum Reserve Capacity Requirements | | | | | | | | |
| | PUMP TANK Material Type & Manufacturer | | | | | | | | |
| | PUMP TANK Type/Size of Pump Installed | | | | | | | | |



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

Permit Number: 118628

Issued This Date: 06/11/2025

This permit is hereby given to: Trel & Aliena Hanson

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

945 MALBEC LOOP

CANYON LAKE, TX 78133

Subdivision: Alto Lago

Unit: 1

Lot: 27

Block: -

Acreage: 1.5100

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic

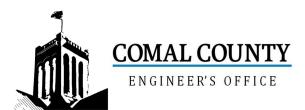
Surface Irrigation

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.



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OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded items

Initials

118628

Permit Number

| Instructions: Place a check mark next to all items that apply. For items that do not Checklist <u>must</u> accompany the completed application. | apply, place "N/A". This OSSF Development 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 | a Professional Engineer |
| Planning Materials of the OSSF as Required by the TCEQ Rule of a scaled design and all system specifications. | s for OSSF Chapter 285. Planning Materials shall consist |
| Required Permit Fee - See Attached Fee Schedule | |
| Copy of Recorded Deed | |
| Surface Application/Aerobic Treatment System | |
| Recorded Certification of OSSF Requiring Maintenance/A | ffidavit to the Public |
| Signed Maintenance Contract with Effective Date as Issua | ance of License to Operate |
| I affirm that I have provided all information required for my OSS constitutes a completed OSSF Development Application. | F Development Application and that this application |
| Signature of Applicant | Date |
| COMPLETE APPLICATION Check No Receipt No | INCOMPLETE APPLICATION —— (Missing Items Circled, Application Refeused) |
| | _ , , , _ , |

Date Received

Revised: September 2019





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

| Date Permit Number | | | | | |
|--------------------|--|---------------------------|---------------|---------------------|------------------------|
| 1. APPLICANT | / AGENT INFORMATION | | | | |
| Owner Name | Trel Hanson and Aliena Hanson | Agent Name | Doug Dov | vlearn R.S. | |
| Mailing Address | s 132 Blazing Meadow #321 | Agent Address | PO BOX | 212 | |
| City, State, Zip | Spring Branch Tx 78070 | _ City, State, Zip | Bulverde, | TX 78163 | |
| Phone # | 2108337463 | Phone # | 210-878-8 | 3100 | |
| Email | Hanson.Trel@gmail.com | _ Email | TXSEPTI | C@GMAIL.COM | 1 |
| 2. LOCATION | | | | | |
| Subdivision Na | me Alto Lago | \ | Jnit 1 | Lot <u>27</u> | Block |
| Survey Name / | Abstract Number | | | Acreag | e <u>1.51</u> |
| Address 945 M | | | | | Zip <u>78133</u> |
| 3. TYPE OF DE | EVELOPMENT | | | | |
| 🗶 Single Fa | mily Residential | | | | |
| Type of C | Construction (House, Mobile, RV, Etc.) <u>HOUSE</u> | <u> </u> | | | |
| Number | of Bedrooms <u>5</u> | | | | |
| Indicate S | Sq Ft of Living Area <u>3111</u> | | | | |
| Non-Singl | le Family Residential | | | | |
| (Planning | materials must show adequate land area for doubli | ng the required land nee | eded for trea | ntment units and di | sposal area) |
| Type of F | Facility | | | | |
| Offices, F | Factories, Churches, Schools, Parks, Etc Inc | dicate Number Of Occ | upants | | |
| Restaura | nts, Lounges, Theaters - Indicate Number of S | Seats | | | |
| Hotel, Mo | otel, Hospital, Nursing Home - Indicate Numbe | | | | |
| | ailer/RV Parks - Indicate Number of Spaces _ | | | | |
| Miscellan | | | | | |
| | | | | | |
| Estimated Co | ost of Construction: \$400,000 | (Structure Only) | | | |
| Is any portion | of the proposed OSSF located in the United | – States Army Corps of | Engineers | (USACE) flowa | ge easement? |
| Yes 🗶 | No (If yes, owner must provide approval from USAC | E for proposed OSSF impro | ovements wit | hin the USACE flows | age easement) |
| Source of Wa | ıter 😠 Public 🔲 Private Well 🦳 Rain | water | | | |
| 4. SIGNATURE | OF OWNER | | | | |
| | oplication, I certify that: | | | | |
| | application and all additional information submitted nat I am the property owner or I possess the approp | | | | |
| | hereby given to the permitting authority and design | nated agents to enter upo | on the abov | e described prope | rty for the purpose of |

- I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required

- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

site/soil evaluation and inspection of private sewage facilities..

by the Comal County Flood Damage Prevention Order.

Date



Signature of Designer



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

| Planning Materials & Site Evaluation as Required Completed By Doug Dowlearn R.S. |
|--|
| System Description Aerobic with spray disposal |
| Size of Septic System Required Based on Planning Materials & Soil Evaluation |
| Tank Size(s) (Gallons) 600 Absorption/Application Area (Sq Ft) 5625 |
| Gallons Per Day (As Per TCEQ Table III) |
| |
| 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? TYes V |
| (If yes, the R.S. or P.E. shall certify that the OSSF design complies with all provisions of the existing WPAP.) |
| Is there at least one acre per single family dwelling as per 285.40(c)(1)? 🗸 Yes 🔲 No |
| 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. |
| Donald S. 5/7/2025 |

Date

COUNTY OF COMAL STATE OF TEXAS

AFFIDAVIT TO THE PUBLIC

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

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

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, give 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.

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)

Alto Lago, Unit 1, Lot 27

The property is owned by (Insert owner's full name)

Trel Hanson and Aliena Hanson

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 OSSF may be obtained from Comal County Engineer's Office.

| WITNESS BY MAND(S) ON THIS 28 DAY OF | 4pn1, 2005. |
|---|---|
| Meden | TPE HAnson aver |
| alienshanson | Aliena Hanson lowner |
| Owner(s) signature(s) | (PRINTED NAME) /TITLE |
| SWORN TO AND SUBSCRIBED BEFORE ME ON THIS | |
| Notary Public, State of Texas Notary's Printed Name: Monica M. Keller My Commission Expires: 2-24-202 | MONICA M. KELLEY Notary Public, State of Texas Comm. Evolves 02-24-2028 |

Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
05/07/2025 01:58:31 PM
MARY 1 Pages(s)
202506013426

Notary ID 130553346



WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

| Regulatory Authority | Permit/License Number |
|--|---|
| Block Creek Aerobic Services, LLC | Customer Trel and Aliena Hanson |
| 444 A Old Hwy #9 | Site Address 945 Malbec Loop |
| Comfort, TX 78013 | City Canyon Lake Zip 78133 |
| Off. (830) 995-3189 | Mailing Address |
| Fax. (830) 995-4051 | CountyMap # |
| | Phone |
| | Email |
| Trel and Aliena Hanson (hereinaft LLC. By this agreement, Block Creek Aerobic Service) | ther referred to as "Agreement") is entered into by and between er referred to as "Customer") and Block Creek Aerobic Services, ces, LLC and its employees (hereinafter inclusively referred to as stated above, as described herein, and the Customer agrees to fulfill |
| II. Effective Date: This Agreement commences on Date LTO | is Issued and ends on 2 yrs from Date of LTO |
| for a total of two (2) years (initial agreement) or one (1) Customer shall notify the Contractor within two (2) commencement. If no notification is received by Contra county authority mandates, the date of commencement with | year (thereafter). If this is an initial agreement (new installation), the business days of the system's first use to establish the date of ctor within ninety (90) days after completion of installation or where II be the date the "License to operate" (Notice of Approval) was issued not commence at the same time as any warranty period of installed |
| III. Termination of Agreement: | |
| party to perform in accordance with the terms of this terminating party must provide written notice to the no Agreement. If this Agreement is terminated, Contractor of the toron which compensation has not been received. After the prepayment for services will be refunded to customer we terminating this Agreement for any reason, including not | arty for any reason, including for example, substantial failure of either Agreement, without fault or liability of the terminating party. The in-terminating party thirty (30) days prior to the termination of this will be paid at the rate of \$75.00 per hour for any work performed and ne deduction of all outstanding charges, any remaining monies from ithin thirty (30) days of termination of this Agreement. Either party in-renewal, shall notify in writing the equipment manufacturer and the tays prior to the date of such termination. Nonpayment of any kind shall ract. |
| IV. Services: | |
| Contractor will: | 4 0 6' 6 |
| recommended by the treatment system manufactivisits to site per year. The list of items check Aeration including compressor and diffusers, C and anything else required as per the manufacture. | o on the On-Site Sewage Facility (hereinafter referred to as OSSF) as turer, and required by state and/or local regulation, for a total of three ted at each visit shall be the: control panel, Electrical circuits, timer, FM/PSI measured, lids safety pans, pump, compressor, sludge levels, etc. |
| | the site by means of an inspection tag attached to or contained in the |
| failing or inoperative during the course of a rout the service(s) cost less than \$100.00, Custom Customer for said service(s). When service cost supplies at the site, Contractor will notify Cust must notify Contractor of arrangements to affect d. Provide sample collection and labo | the necessary materials at site, any component of the OSSF found to be time monitoring visit. If such services are not covered by warranty, and her hereby authorizes Contractor to perform the service(s) and bill as are greater than \$100.00, or if contractor does not have the necessary momer of the required service(s) and the associated cost(s). Customer repair of system with in two (2) business days after said notification. ratory testing of TSS and BOD on a yearly basis (commercial systems |
| only). | nd all reports to the regulatory agency and the Customer |
| f. Visit site in response to Customer's | nd all reports to the regulatory agency and the Customer. s request for unscheduled services within forty-eight (48) hours of the luded) of said request. Unless otherwise covered by warranty, costs for stomer. |
| V. Disinfection: | |
| 4 AH | RC |

all rights reserved

Customer's Initials

Contractor's Initials

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

VI. Electronic Monitoring:

Electronic Monitoring is not included in this Agreement.

VII. Performance of Agreement:

Commencement of performance by Contractor under this Agreement is contingent on the following conditions:

a. If this is an initial Agreement (new installation):

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

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

VIII. Customer's Responsibilities:

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

- a. Provide all necessary yard or lawn maintenance and removal of all obstacles, including but not limited to dogs and other animals, vehicles, trees, brush, trash, or debris, as needed to allow the OSSF to function properly, and to allow Contractor safe and easy access to all parts of the OSSF.
 - b. Protect equipment from physical damage including but not limited to that damage caused by insects.
- c. Maintain a current license to operate, and abide by the conditions and limitations of that license, and all requirements for and OSSF from the State and/or local regulatory agency, whichever requirements are more stringent, as well as the proprietary system's manufacturer recommendations.
- d. Notify Contactor immediately of any and all alarms, and/or any and all problems with, including failure of,
- e. Provide, upon request by Contractor, water usage records for the OSSF so that the Contractor can perform a proper evaluation of the performance of the OSSF.
- f. Allow for samples at both the inlet and outlet of the OSSF to be obtained by Contractor for the purpose of evaluating the OSSF's performance. If these samples are taken to a laboratory for testing, with the exception of the service provided under Section IV (d) above, Customer agrees to pay Contractor for the sample collection and transportation, portal to portal, at a rate of \$35.00 per hour, plus the associated fees for laboratory testing.
 - g. Prevent the backwash or flushing of water treatment or conditioning equipment from entering the OSSF.
- h. Prevent the condensation from air conditioning or refrigeration units, or the drains of icemakers, from hydraulically overloading the aerobic treatment units. Drain lines may discharge into the surface application pump tank if approved by system designer.
- i. Provide for pumping and cleaning of tanks and treatment units, when and as recommended by Contactor, at Customer's expense.
 - i. Maintain site drainage to prevent adverse effects on the OSSF.
 - k. Pay promptly and fully, all Contractor's fees, bills, or invoices as described herein.

IX. Access by Contractor:

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

X. Limit of Liability:

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

XI. Indemnification:

Customer (whether one or more) shall and does hereby agree to indemnify, hold harmless and defend Contractor and each of its successors, assigns, heirs, legal representatives, devisees, employees, agents and/or counsel (collectively "Indemnitees") from and against any and all liabilities, claims, damages, losses, liens, causes of action, suits, fines, judgments and other expenses (including, but not limited to, attorneys' fees and expenses and costs of investigation), of any kind, nature or description, (hereinafter collectively referred to as "Liabilities") arising out of, caused by, or resulting, in whole or in part, from this Agreement.

copyright all rights reserved

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

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

XII. Severability:

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

XIII. Fee for Services:

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

XIV. Payment:

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

XV. Application or Transfer of payment:

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

XVI. Entire Agreement:

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

written.

Rudy Carson

Block Creek Aerobic Services, LLC,

Contractor MP# 0002036

> convright all rights reserved

RC

OSSF SOIL EVALUATION REPORT INFORMATION

Date: 5/7/2025 **Applicant Information:**

Name: Trel Hanson

Address: 132 Blazing Meadow #321

City, State & Zip Code: Spring Branch, TX 78070

Email:

Property Location:

Subdivision: Alto Lago **Unit:** 1 **Lot:** 27

Street/Road Address: 945 Malbec Loop

City: Canyon Lake **Zip:** 78133 **Additional Info:** Comal County

Site Evaluator Information: Name: Doug Dowlearn

Company: D.A.D. Services, Inc. Address: 703 Oak Drive

City, State & Zip: Blanco, TX 78606

Phone: (210)240-2101 Fax: (866)260-7687

Email: txseptic@gmail.com

Installer Information:

| Depth | Texture Class | Soil Texture | Structure (For Class III – blocky, platy or massive) | Drainage (Mottles/Water Table | Restrictive Horizon | Observation |
|--------------------|------------------|-----------------------------------|---|--|------------------------|-------------|
| Soil Boring #1 60" | III | 0-17" Clay Loam 12"+ Limestone | Blocky | <30% Gravel | 17"+Limestone | N/A |
| Soil Boring #2 60" | Same as above | | | | | |

DESIGN SPECIFICATIONS

Application Rate (RA): 0.064

OSSF is designed for: 5 bedroom 3111 Sq. Ft House

360 gallons per day

An aerobic with spray disposal system is to be utilized based on the site evaluation.

5625 sq. ft. disposal area required

600 gallon per day aerobic treatment unit

Calculations: Absorption Area: Q/RA=360/0.064=5625 Sq., Ft.

FEATURES OF SITE AREA

Presence of 100-year flood zone: NO Presence of upper water shed: NO

Existing or proposed water well in nearby area: NO

Organized sewage service available to lot: NO

Presence of adjacent ponds, streams, water impoundments: NO

I certify that the findings of this report are based on my field observations and are accurate to the best of my ability. The site evaluation and OSSF design are subject to approval by the TCEQ or the local authorized agent. The planning materials and the OSSF design should not be considered final until a permit to construct has been issued.

Site Evaluator:

NAME: Douglas Dowlearn

On Restance 1.5.

Signature:

License No. OS9902 Exp. 6/30/2026

TDH: #2432 Exp. 2/28/2027

D.A.D SERVICES, INC.

DOUG DOWLEARN

PO BOX 212. BULVERDE, TX 78163

Designed for: Trel and Aliena Hanson

The installation site is at lot 27 of the Alto Lago 1 subdivision in Comal County, TX. The proposed OSSF will treat the wastewater from a 5 Bedroom (3111 sq. ft.) residence. The proposed method of wastewater treatment is aerobic treatment with spray irrigation. This method was chosen because of unsuitable soil conditions.

PROPOSED SYSTEM:

A 3" or 4" PVC pipe will discharge from the residence to a pre-treatment tank, which flows into a 600 gpd aerobic treatment plant. The aerobic tank effluent flows to a 768 gallon storage/pump tank containing a liquid chlorinator and a single 20 gpm submersible pump. Distribution is set to spray in the pre-dawn hours of midnight to 5:00 am through 2 K-Rain Gear Driven pop-up sprinklers, with low angle (13 degrees) spray nozzles spraying at 40 psi. Each sprinkler will spray a radius of 30 feet and 360 degrees of arc. An audio and visual alarm monitoring both high water and aerator failure will be placed in a noticeable location.

DESIGN SPECIFICATIONS:

Daily Waste Flow: 360 gpd Application rate: 0.064

Application area required: 360/.064 = 5625 sq. ft

Application area utilized: 5654 sq. ft.

Pump tank reserve capacity: 120 gal minimum

SYSTEM COMPONENTS:

SCH 40 PVC sewer line NuWater B-550

353-gallon Pretreatment tank

600 GPD Aerobic Treatment Unit

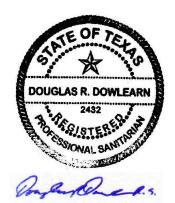
768-gallon Pump tank with timed controls set to spray in the pre-dawn hours of midnight to 5:00 am

C-1 20X, Model no. 20XC1-05P4-2W115 (or equivalent) submersible pump

Liquid chlorinator

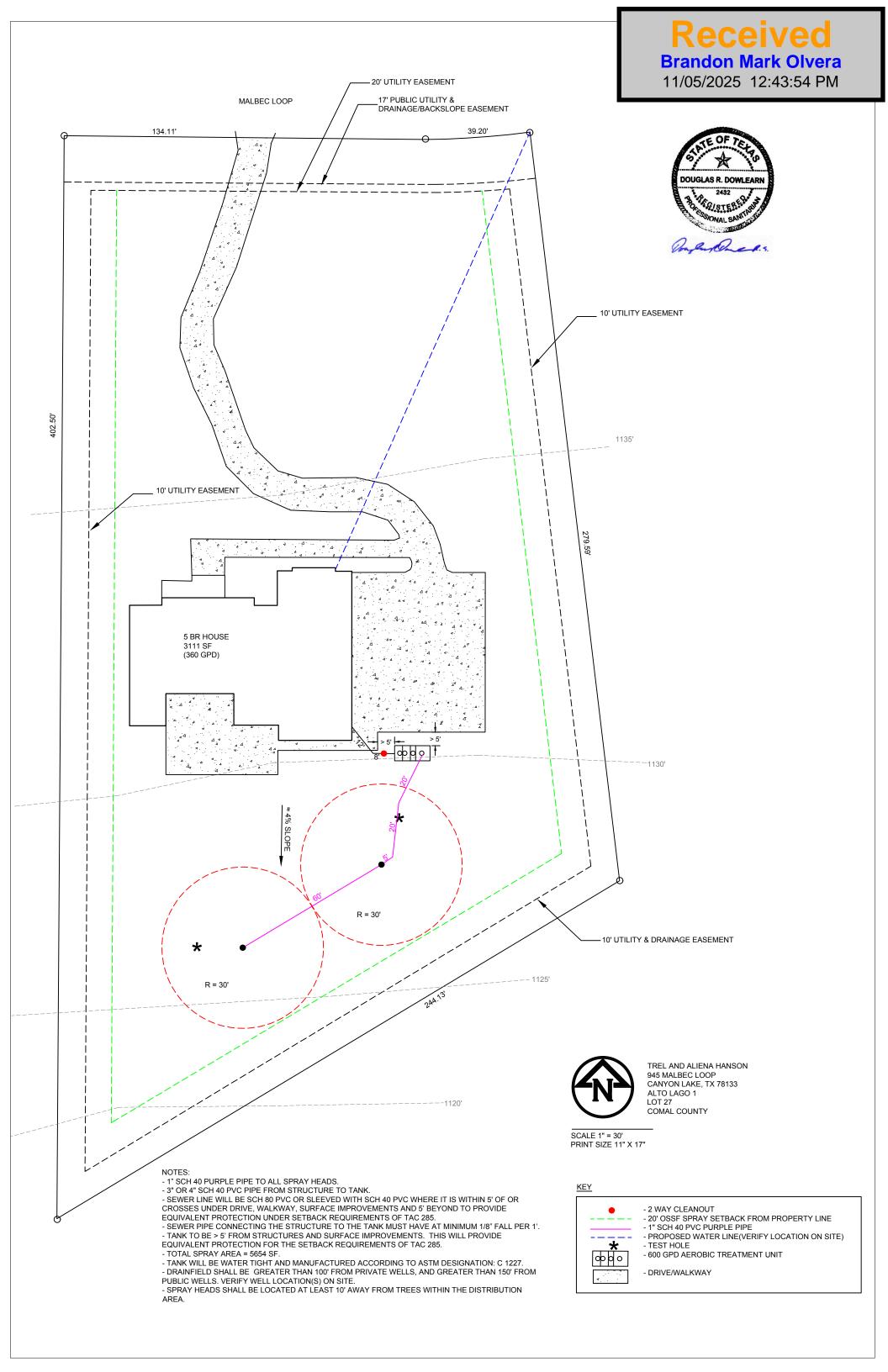
1" purple PVC supply line

2 K-Rain Gear Driven pop-up sprinklers



LANDSCAPING:

The entire surface application area must consist of an area with vegetation capable of growth, before system start up. In the event the surface application area does not have vegetation capable of growth, the bare area shall be seeded or sodded. If the non-vegetative area consists of rock or caliche, 3" of class II or III soil, capable of growing and sustaining vegetative growth, will be added before it is seeded or sodded.



Assembly Details

OSSF

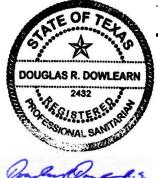
43" - 53" - RESERVE - 144.9 GAL

12" - 43" - PUMP ON TO ALARM ON - 449.19 GAL 10" - 12" - PUMP OFF TO PUMP ON - 28.89 GAL

0 - 10" - SUMP- 144.9 GAL

NOTE: SET ON A TIMER TO DOSE IN PRE DAWN HOURS OF MIDNIGHT TO 5 A.M.







See Note 9. See Note 9. See Note 5. See Note 10.-See Note 7. See Note 11. Inlet Ō 59" 53"" Clarifier 190 Gal. Aeration 353 Gal.

Diffuser Bar

GENERAL NOTES:

- Plant structure material to be precast concrete and steel.
- Maximum burial depth is 30" from slab top to grade.
- Weight = 14,900 lbs.
- Treatment capacity is 600 GPD. Pump compartment set-up for a 360 GPD Flow Rate (4 beedroom, < 4,000 sq/ft living aera). Please specify for additional set-up requirements. BOD Loading = 1.62 lbs. per day.
- Standard tablet chlorinator or Optional Liquid chlorinator. NSF approved chlorinators (tablet & liquid) available.
- Bio-Robix B-550 Control Center w/ Timer for night spray application. Optional Micro Dose (min/sec)timer available for drip applications. Electrical Requirement to be 115 Volts, 60 Hz, Single Phase, 30 AMP, Grounded Receptacle.
- 20" Ø acess riser w/ lid (Typical 4). Optional extension risers available.
- 20 GPM 1/2 HP, high head effluent pump.
- HIBLOW Air Compressor w/ concrete housing.
- 10. 1/2" Sch. 40 PVC Air Line (Max. 50 Lft from Plant).
- 11. 1" Sch. 40 PVC pipe to distribution system provided by contractor.
- 12. 4" min. compacted sand or gravel pad by Contractor

WORKING LEVEL = 53" 14.49 GAL/INCH

DIMENSIONS:

Outside Height: 67" Outside Width: 63" Outside Length: 164"

MINIMUM EXCAVATION DIMENSIONS:

Width: 76" Length: 176"

See Note 12.

NuWater B-550 (600 GPD) **Aerobic Treatment Plant (Assembled)**

Model: B-550-PC-400PT

March, 2012 - Rev 1 By: A.S.

Scale:

See Note 8.

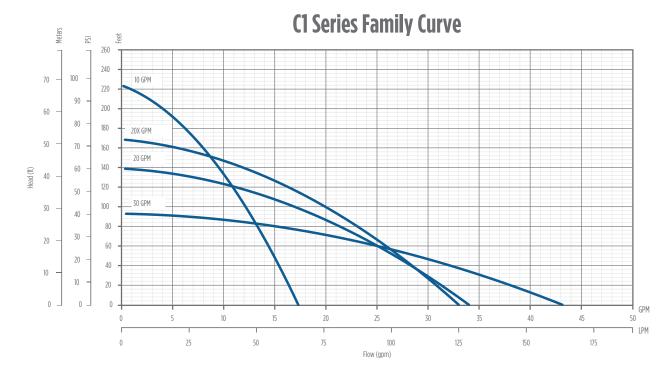
Dwg. #: ADV-B550-3



Advantage Wastewater Solutions Ilc. 444 A Old Hwy No 9 Comfort, TX 78013 830-995-3189 fax 830-995-4051







FEATURES

- Supplied with a removable 5" base for secure and reliable mounting
- Bottom suction design
- Robust thermoplastic discharge head design resists breakage during installation and operation
- Single shell housing design provides a compact unit while ensuring cool and guiet operation
- Hydraulic components molded from high quality engineered thermoplastics
- Optimized hydraulic design allows for increased performance and decreased power usage
- All metal components are made of high grade stainless steel for corrosion resistance
- Available with a high quality 115 V or 230 V, ½ hp motor
- Fluid flows of 10, 20, and 30 gpm, with a max shut-off pressure of over 100 psi
- Heavy duty 600 V 10 foot SJ00W jacketed lead

APPLICATIONS

- Gray water pumping
- Filtered effluent service water pumping
- Water reclamation projects such as pumping from rain catchment basins
- Aeration and other foundation or pond applications
- Agriculture and livestock water pumping

ORDERING INFORMATION

| C1 Series Pumps | | | | | | | | |
|-----------------|-----|-------|-------|------------------|-----------|-------------|--------------|--|
| GPM | HP | Volts | Stage | Model No. | Order No. | Length (in) | Weight (lbs) | |
| 10 | 1/2 | 115 | 7 | 10C1-05P4-2W115 | 90301005 | 26 | 17 | |
| | | 230 | 7 | 10C1-05P4-2W230 | 90301010 | 26 | 17 | |
| 20 20X 30 | | 115 | 5 | 20C1-05P4-2W115 | 90302005 | 25 | 16 | |
| | | 230 | 5 | 20C1-05P4-2W230 | 90302010 | 25 | 16 | |
| | | 115 | 6 | 20XC1-05P4-2W115 | 90302015 | 26 | 17 | |
| | | 230 | 6 | Z0XCI-05P4-ZWZ30 | 90302020 | Zb | 17 | |
| | | 115 | 4 | 30C1-05P4-2W115 | 90303005 | 25 | 16 | |
| | | 230 | 4 | 30C1-05P4-2W230 | 90303010 | 25 | 16 | |

Note: All units have 10 foot long SJ00W leads.



franklinwater.com M1698 07-14



RE: 945 Malbec Loop Alto Lago 1 Lot 27

Dear Property Owner & Agent,

Thank you for your submission. We have reviewed the planning materials for the referenced permit application. To proceed with processing this permit, we require the following:



Both owners shown on the deed need to be on the application.

- a. Both need to sign the application.
- 2. Revise accordingly and resubmit.

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

Thank You,

Brandon Olvera Designated Representative OS0034792

Comal County | www.cceo.org | f: 830-608-2078 | e: olverb@co.comal.tx.us |



ON-SITE SEWAGE FACILITY APPLICATION

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

110620

| | Permit Number | |
|---|-----------------------------|-------------------|
| I. APPLICANT / AGENT INFORMATION | | |
| Owner Name | | |
| Mailing Address | | |
| City, State, Zip | | |
| Phone # | | |
| Email | Email | |
| 2. LOCATION | | |
| Subdivisio Name | Unit Lot | |
| Survey ame / Abstract Number | | creage |
| Addres | City State | Zip |
| 8. TYPI OF DEVELOPMENT | | |
| Single Family Residual | | |
| Tipe of Construction buse, M RV, | | |
| Number of Bedrooi | | |
| Indicate Sq Ft of Liver rea | | |
| N n-Single Family R | | |
| (F anning materials mu | doubli equire need reatment | nd disposal area) |
| T pe of Facility | | |
| Offices, Factories, Churches, Schools, Parks, E | | |
| R staurants, Lounges, Theaters - Indicate Num | | |
| Hot Motel, Hospital, Nursing Home - Indicate | Number of Beds | |
| Travel | | |
| Miscellaneous | | |

- Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of

- I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required

- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Signature of Owner

site/soil evaluation and inspection of private sewage facilities..

by the Comal County Flood Damage Prevention Order.

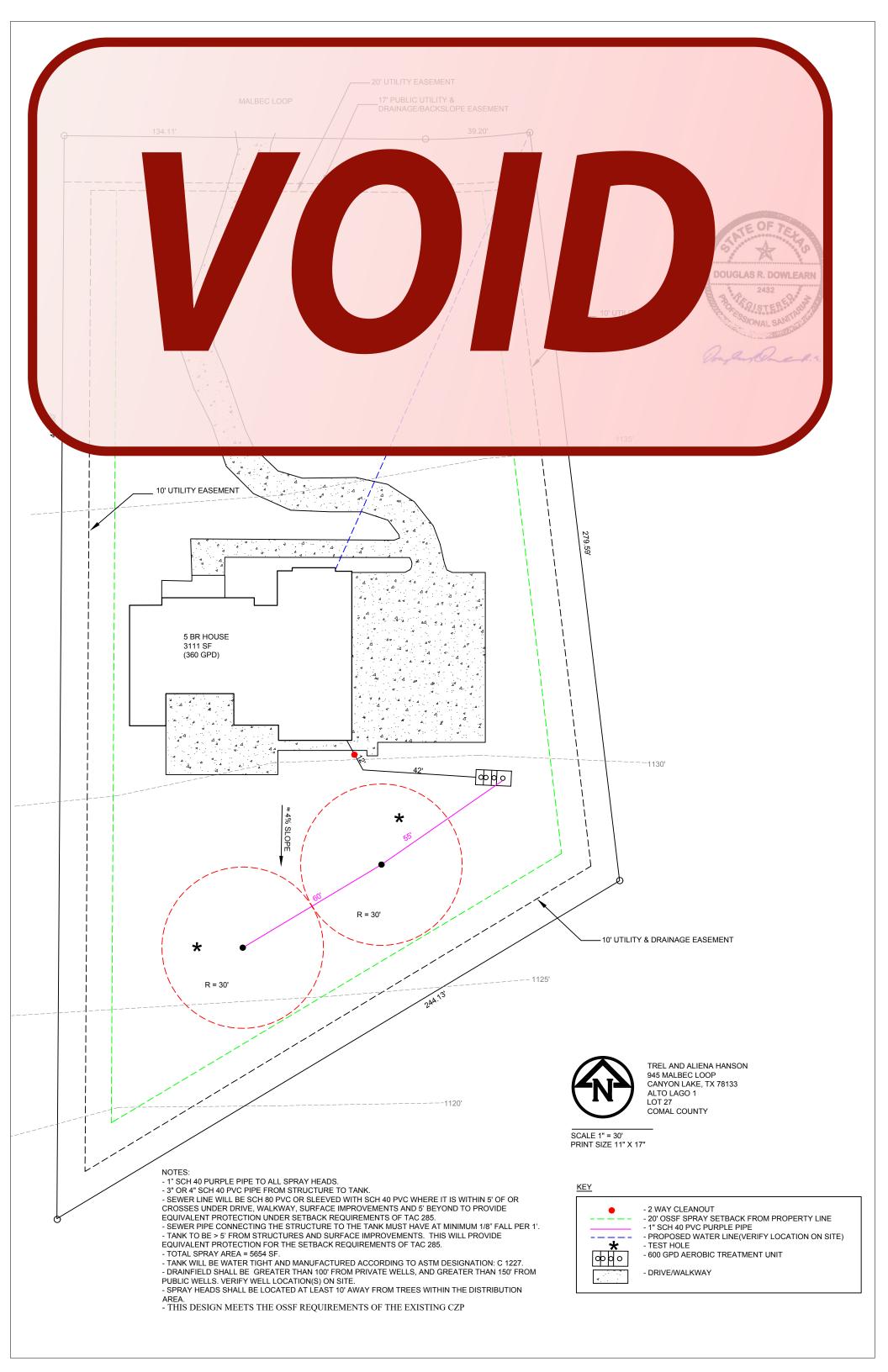
Date



ON-SITE SEWAGE FACILITY APPLICATION

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

| Planning Materials & Site Evaluation as Required Completed By | | | | | | | | |
|---|---|--|--|--|--|--|--|--|
| System Description | | | | | | | | |
| Size of Septic System Required Based on Planning Material | s & Soil Evaluation | | | | | | | |
| Tank Size(s) (Gallons) | Absorption/Application Area (Sq Ft) | | | | | | | |
| Gallons Per Day (As Per TCEQ Table III) (Sites generating more than 5000 gallons per day are required to obtain a permit through TCEQ.) | | | | | | | | |
| | | | | | | | | |
| (If yes, the anning 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.) | | | | | | | |
| Is the e at least one at single far religions (elling) | (c)(1)? | | | | | | | |
| If there is no existing W does the pose slopme | nt a requ CEC oved WP Yes N | | | | | | | |
| (If yes the R.S. or P.E. show tify the DSSF will complete iss ed for the proposed F un't proposed AP has be | | | | | | | | |
| Is the property located or /ards Cor g Zone? | | | | | | | | |
| Is the e an existing TCEC val CZP for the p | Yes | | | | | | | |
| (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 (If yes, the US, or P.E. shall certify that the OSSF design will comp | bly with all provisions of the proposed CZP. A Permit to Construction will not be | | | | | | | |
| issued for the proposed Ooor and the OZr has been approved by | , | | | | | | | |
| 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. y e-mail address associated with this permit application, as applicable. | | | | | | | |
| O O O | , application in the politic application, as application | | | | | | | |
| Signature of Designer | Date | | | | | | | |



Independence Title/GF# 2500352 -SBSA/ KY

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

Warranty Deed with Vendor's Lien

Date: January 22, 2025

Grantor: Russell Price and Natalie Price, husband and wife

Grantor's Mailing Address:

4030 Sweetwater Drive, College Station, TX 77845

Grantee: Trel Hanson and Aliena Hanson, husband and wife

Grantee's Mailing address: 945 Malbec Loop, Canyon Lake, Comal County, Texas 78133

Consideration: Ten and No/100 (\$10.00) Dollars and other good and valuable consideration to the undersigned paid by the Grantee herein named, the receipt of which is hereby acknowledged, and for the further consideration of the execution and delivery by said grantee of that one certain promissory note herewith in the principal sum of One Hundred Twelve Thousand and 00/100 Dollars (\$112,000.00) payable to the order of Security Service Federal Credit Union upon terms and bearing interest as therein provided, and providing for the acceleration of maturity in the event of default and for attorney's fee, the payment of which note is secured by the vendor's lien herein retained and is additionally secured by a Deed of Trust herewith to Ruth W. Garner, Trustee.

Property (including any improvements): Lot 27, ALTO LAGO, UNIT 1, situated in Comal County, Texas, according to the map or plat thereof, recorded in Document No. 201606049273, Map and Plat Records, Comal County, Texas.

Reservations from and Exceptions to Conveyance and Warranty: This conveyance, however, is made and accepted subject to the following matters, to the extent same are in effect at this time: any and all restrictions, covenants, assessments, reservations, outstanding mineral interests held by third parties, conditions, and easements, if any, relating to the hereinabove described property, but only to the extent they are still in effect and shown of record in the hereinabove mentioned County and State or to the extent that they are apparent upon reasonable inspection of the property; and to all zoning laws, regulations and ordinances of municipal and/or other governmental authorities, if any, but only to the extent they are still in effect and relating to the hereinabove described property.

The Contract between Grantor as the Seller and Grantee as the Buyer, if any, may contain limitations as to warranty or other agreed matters; to the extent that the Contract provides for any such limitations or other agreed matters to survive closing and this conveyance, then such limitations or other agreed matters are hereby deemed incorporated by reference. The warranty of title contained in this Deed is hereby expressly excluded from the limitations or other agreed matters referenced in this paragraph.

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

Page 1 of 2 2500352-SBSA Conveyance and the Exceptions to Conveyance and Warranty.

Security Service Federal Credit Union at the instance and request of the Grantee herein, having advanced and paid in cash to the Grantor herein that portion of the purchase price of the herein described property, as is evidenced by the hereinbefore described \$112,000.00 note. The first and superior Vendor's Lien, as well as the Superior Title to said property is retained herein for the benefit of the said Security Service Federal Credit Union, its successors or assigns and shall have the right to release said Vendor's Lien upon the payment of said Note. The Vendor's Lien against and superior title to the property are retained until each note described is fully paid according to its term, at which time this deed will become absolute.

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

Russell Price

Natalie Price

STATE OF TEXAS

COUNTY OF ____

This instrument was acknowledged before me on this _____ day of January 2025, by Russell Price.

Notary Public, State of Texas

STATE OF TEXAS

COUNTY OF _____ Dallas

This instrument was acknowledged before me on this _____ 28th day of January 2025, by Natalie Price.

Jerry Durftey

Notary Public, State of Texas

Electronically signed and notarized online using the Proof platform.

AFTER RECORDING RETURN TO: Trel Hanson and Aliena Hanson 945 Malbec Loop Canyon Lake, Texas 78133

Page 2 of 2 2500352-SBSA ID NUMBER

132849453

COMMISSION EXPIRES

January 5, 2029

Conveyance and the Exceptions to Conveyance and Warranty.

Security Service Federal Credit Union at the instance and request of the Grantee herein, having advanced and paid in cash to the Grantor herein that portion of the purchase price of the herein described property, as is evidenced by the hereinbefore described \$112,000.00 note. The first and superior Vendor's Lien, as well as the Superior Title to said property is retained herein for the benefit of the said Security Service Federal Credit Union, its successors or assigns and shall have the right to release said Vendor's Lien upon the payment of said Note. The Vendor's Lien against and superior title to the property are retained until each note described is fully paid according to its term, at which time this deed will become absolute.

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

| R-UGGOI Price | |
|---|---|
| Russell Price | Natalie Price |
| | |
| STATE OF TEXAS | |
| COUNTY OF Denton | |
| This instrument was acknowledged before me of Russell Price. | on this 28th day of January 2025, by |
| ID NUMBER 13327757 COMMISSION E August 18, 2 | Brock Repec |
| STATE OF TEXAS | Electronically signed and notarized online using the Proof platforn |
| COUNTY OF | |
| This instrument was acknowledged before me of Natalie Price. | on this day of January 2025, by |
| | |
| Filed and Recorded Official Public Records | |
| Bobbie Koepp, County C Comal County, Texas 01/30/2025 01:11:28 PM | |

AFTER RECORDING RETURN TO:

Trel Hanson and Aliena Hanson

Canyon Lake, Texas 78133

945 Malbec Loop

Page 2 of 2 2500352-SBSA

TERRI 3 Pages(s)

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