

Comal County office of comal county engineer

License to Operate On-site Sewage Treatment and Disposal Facility

Date Issued: 11/30/2010

Permit Number: 92941

Location Description:	30430 Huntington Circle, Bulverde, TX 78163
	Lot 106, Rim Rock Ranch Unit 1 Subdivision
Type of System:	Aerobic Treatment with Surface Irrigation Discharge
License issued to:	Keith/Samantha Jupe

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 Natural Resource Conservation Commission.

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.

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 OS0023773 HEALTH INSPECTOR S 00255

This "License-Operate" report was printed on 11/30/2010 by ComalCounty Environmental Health, , operator, using CASST Ver.2.1

System Profile

Printed: Tuesday, November 30, 2010

System is installed at:

30430 Huntington Circle Bulverde, TX 78163 Comal County Permit Number: 92941 System Name: Primary Brand Name: Hoot 500AN Model: Serial Number:

Owner Information:

Keith/Samantha Jupe 30430 Huntington Circle Bulverde, TX 78163 Home Phone: (210)290-1645

The original contract for installation was written on <u>.</u> This system was installed by: <u>.</u> The installation date was <u>11/30/2010</u>. This system is to be inspected every <u>4</u> months. The most recent inspection for this system occured on <u>.</u> The next scheduled inspection for this system is due on <u>3/30/2011</u>.

Permitting Agency:

Comal County Environmental Health 195 David Jonas Drive New Braunfels, TX 78132-3760 Contact: Sandra Hernandez. Assistant Env. Health Coord Phone: (830) 608-2090 Fax: (830) 608-2078

Installation Company Info:

Randy Batey

Maintenance Company Info:

Aerobic Services of South Texas 1528 E Common St. Suite 10 New Braunfels, TX 78130 Operator: Tom Hampton

Fax: (830) 608-2078

Date Comp. Visit Type

Most Recent Visits and Results Description of Repairs

Property Notes: S1 - 11/24/10 S2 - 11/30/10

System Notes:

2 full @ 30'

This "System Profile" report was printed on 11/30/2010 by Comal County Environmental Health, operator, using CASST Ver 21

1153 FM 2673 RECEIVED Canyon Lake, TX 78133 OCT 22 2010^{Phone} (830)964-2365 Fax (830) 964-2659

COUNTY ENGINEER

Routine Maintenance and Inspection Agreement

General

This Work for Hire Agreement (hereinafter referred to as this "Agreement") is entered into by and between <u>Kith A Jupe & Somer A</u> (referred to as "Client") and Aerobic Services of South Texas (hereinafter referred to as "Contractor") located at 1153 FM 2673, Texas 78133 (830) 964-2365. By this Agreement the Contractor agrees to render professional service, as described herein, and the Client agrees to fulfill the terms of this Agreement as described herein.

This contract will provide for all required inspections, testing and service for your Aerobic Treatment System. The policy will include the following:

1. 3 inspections a year/services calls (at least one every 4 months), for a total of 6 over the **two year period** including inspection, adjustment and servicing of the mechanical, electrical and other applicable component parts to ensure proper function. This includes inspecting control panel, air pumps, air filters, diffuser operation, and replacing or repairing any component not found to be functioning correctly. Any alarm situation affecting the proper function of the Aerobic process will be address within a 48-hour time Frame. After the contract for the two year services agreement expires, work on the remaining warranty does not include labor prices. Repair work on non-warranty parts will include price for parts & labor. The prices will be quoted before work is performed.

2. An effluent quality inspection consisting of a visual check for color, turbidity, scum overflow and examination for odors. A test for chlorine residual and pH will be taken and reported as necessary.

3. If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified immediately in writing of the conditions and estimated date of correction.

4. The customer is responsible for the chlorine tablets; they must be filled before or during the service visit.

5. Any additional visits, inspections or sample collection required by specific Municipalities, Water/River Authorities, and County Agencies the TCEQ or any other authorized regulatory agency in your jurisdiction will be covered by this policy.

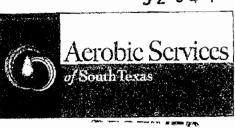
At the conclusion of the initial service policy, our company will make available, for purchase on an annual basis, a continuing service policy to cover labor for normal inspection, maintenance and repair.

The Homeowners Manual must be strictly followed or warranties are subject to invalidation. Pumping of sludge build-up is not covered by this policy and will result in additional charges.

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ACCESS BY CONTRACTOR

The Contractor or anyone authorized by the Contractor may enter the property at reasonable times without prior notice for the purpose of the above described Services. The contractor may access the System components including the tanks by means of excavation for the purpose of evaluations if necessary. Soil Is to be replaced with the excavated material as best as possible.





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COUNTY ENGINEER

Payment for Services

The Client will pay compensation to the Contractor for the Services in the amount of \$400.00 (Four Hundred Dollars). This compensation shall be payable in one lump sum payment upon acceptance of this agreement Payments not received within 30 days of the above described due date will be subject to a \$20.00 late penalty on a 15% per month carrying charge, which ever is greater.

Termination of Agreement

Either party may terminate this agreement within ten days written notice in the event of substantial failure to perform in accordance with its terms by the other party without fault of the terminating party. If this Agreement is so terminated, the Contractor will immediately notify the appropriate health authority of the 2010 termination.

Limit of Liability

COUNTY ENGINEER.

In no event shall the Contractor be liable for indirect, consequential, incidental or punitive damages, whether in contract tort or any other theory. In no event shall the Contractor's liability for direct damages exceed the price for the services described in this Agreement.

Dispute Resolution

If a dispute between the Client and the Designer arises that cannot be settled in good faith negotiations then the parties shall choose a mutually acceptable arbitrator and shall share the cost of the arbitration services equally.

Entire Agreement

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

Severability

If any provision of this Agreement 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 this 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, construct, and enforced as so limited.

HOME OWNER ILE ITH Jupe & Sanaika UPE Name 30430 HUNTINGTON CIRCLE Address KULVERDE, TX 78163 City, State 290-1645 Phone Signature of Home Owner	SERVICE PROVIDER <u>Aerobic Services of South Texas Inc.</u> Name <u>1528 E. Common St. Ste 10</u> Address <u>New Braunfels, Texas 78132</u> City, State <u>830-627-1785</u> Phone Phone Thomas Hampton Signature of Service Provider and License #
EFFECTIVE DATEEXPIRED DATE	INSTALLED
Model#	Blower/Panel Serial #
The effective date of this initial maintenance c	ontract shall be the date license to operate is issued.
# TRIM ROCK RANCH U 30430 HUNTINGTON	NITILOTIO6
30430 HUNTINGTON	CIRCE
사망한다. 경험을 다 있는 것은 것이다. 이 가장은 가지가 되었다. 이 가장은 가지 않는 것이다. 특별 경제 전 가지 같은 것이다. 것은 것이 같은 것이 있는 것이 같은 것이 하는 것이다.	

92941

Permit#: 9294 Location: 30430 HUNFINGTON CitCle (Rim Rock)
Installer Name: X, BateX (if more than one installer is used list them according to inspection)
1 st Inspection: 1 a 4 1 0 5 3 (inspector initials & date) 2 nd Inspection: Final Inspection: 1//30/10 5 3 (inspector initials & date) Are additional inspections required: 2 nd Inspection: (inspector initials & date) Final Inspection: 1//30/10 5 3 (inspector initials & date)
Re-inspection fee owed: Re-inspection fee paid:
Existing soil conditions: Site/soil conditions match soil evaluation: Notes:
System Description: Aerobic with spray: Aerobic with drip emitters: Low Pressure Dosing: Absorptive drainfield: Evapotranspirative (ET) system: Gravel-less drainfield piping: Leaching chambers: Soil substitution drainfield: other:
Tank Inspection: pre 400 Tank set level & watertight // Inlet/Outlet: // Tank Size or GPD: 500 Manuf./Brand: 400 Model#: 500 a N Pump Tank Size: 760 Alarms/Audible & Visual: 450 Is timer required/provided?: 100 Alarms/Audible & Visual: 450 Notes: 100 100
Maintenance Tag for Aerobic: (195) 9e006, 500
System installation: Pipe check/house to tank // Clean-out at structure/every 50 ft./@90's Pipe check/tank to drainfield: // Clean-out at structure/every 50 ft./@90's Trenches/Excavations: Width/Depth: Trenches/Excavations Level: Pipe & Gravel: Slope within drainfield/spray area: O/ Leaching Chambers:
Separation Distances Prop. Lines: <u>0</u> KWater lines: <u>N</u> Water Wells <u>M</u> Bldgs/Driveway/Improvements <u>K</u> Creeks/Rivers/Ponds <u>M</u> Drainage Easements/Sharp Slopes: <u>0</u> K If over Recharge Zone check for recharge features: <u>N</u> Are there water lines crossing tightlines/or within 10 feet of system?: <u>N</u> Have they been properly sleeved: <u>M</u> Are there sewer lines crossing under driveways, sidewalks, or within 5 ft. of surface improvements: <u>N</u> Have the sewer lines been properly sleeved?: <u>M</u>
Final Inspection: Tank(s) Backfilled: System Backfilled: ET Systems Class II backfill & vegetative cover for transpiration in place. Surface application area properly landscaped/vegetation acceptable: Notes:
Size of Installed Drainfield/Spray Area: 5655 SF $2 \text{ Full } 230'$ Check here to confirm that service agreement has been received, entered and activated in CASST. SUCS

	OSSF PERMIT	INFORMATION SHI	EET
Date of Permit Application	Permit Number	Date of OSSF Approval	Date of Flood Plain Approval
10.21.10	92941	11-1-10	10-22-10
LOCATION: Rim	Rock Ranch	U. [K. 106	
IF A FLOOD PLAIN	V PERMIT IS NOT R	ECEIVED GIVE REAS	ON:
IS A BUILDING PE	RMIT REQUIRED?	N <i>D</i> receiv	ED?
PRELIMINARY INS		120	
PLANNING MATE	RIALS REVIEWED	BY: 1 1	
RULES/CHECK OF			NOT MEET TCEQ 15 His Site Reparge Zoke:
	INS	PECTOR COPY	
	<u>NOTES 7</u>	<u>FO INSPECTOR</u>	

COUNTY OF COMAL

COUNTY ENGINEER'S OFFICE

OSSF/FLOOD PLAIN DEVELOPMENT APPLICATION CHECKLIST

Staff will complete sl	haded items
Date Received	Initials
92921	ϕ
Permit Number	RECEIVED

Instructions:

OCT 2 1 2010

Place a check mark next to all items that apply. For items that do not apply, place "N/A". This OSSF Permit Application Completion Form **must** accompany 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

Surface Application/Aerobic Treatment System

Recorded Certification of OSSF Requiring Maintenance/Affidavit to the Public

Floodplain Development Permit



Completed Application

Boundary Map Indicating Location of Proposed Improvements

Copy of Recorded Deed

Required Permit Fee







Comal County office of comal county engineer

PERMIT OF AUTHORIZATION TO CONSTRUCT AN ON-SITE SEWAGE FACILITY PERMIT VALID FOR ONE YEAR FROM DATE ISSUED

Permit Number: 92941

Issued this date: November 1, 2010

This Permit is hereby given to: Keith/Samantha Jupe

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

30430 Huntington Circle, Bulverde, TX 78163 Lot 106, Rim Rock Ranch Unit 1 Subdivision

APPROVED MIMNIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic Treatment with Surface Irrigation Discharge

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 Natural Resource Conservation Commission (TNRCC). Installation and inspection must comply with current TNRCC and Comal County requirements.

Call (830) 608-2090 to schedule inspections.

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	C	OMAL C	JNTY OF	FICE OF E	NVIRONM	TAL HEA	ALTH	RECEIVED
	0	APPLICA	ATION FOR PEL	RMIT FOR AU	THORIZATION	TO CONSTRUCT		NOV 01 2010
		-	ON-SITE SEWA	GE FACILITY	AND LICENSE 1			
Date	August	19, 2010				Permi		UNTY ENGINEER
Owner Name			& SAMANTHA		Agent Name			
			8 CACTUS LOC		-	s <u>170 HOLLO</u>		
			DNIO, TEXAS 7		•	P NEW BRAUN		<u>S 78132</u>
			10) 290-1645			# <u>(830) 905-27</u>	78	0.(1
			to: 🛄 Owner		Both		90	941
Subdivision N					M ROCK RANC	<u></u>	NEV/	en
			106				KE V I	
Street Name/	Address	30430	HUNTINGTON	CIRCLE	City	BULVERDE	Zip	78163
						DOLIVERDE	L ih	/8105
			ards Recharge be completed b		/	S.) or Profession	al Engineer	(P.E.)
-	-		WPAP for the	-		/		,,
	-					sions of the exist	ing WPAP.	
If yes, the R.S.	or P.E.	shall certify the	hat the OSSF o	tesign will con	nply with all pro	TCEQ approved visions of the provisions been approved	oposed WPA	P. A Permit to
Type of Develo	opment:	Sites generati	ing more than !	5000 gallons p	per day are requ	uired to obtain pe	ermitting thro	ough the Texas
Commission or	n Enviro	nmental Quali	ty.					-
🔀 Single Fam	ily Resid	lential Typ	e of Constructi	on (House, M	obile, RV, Etc.)		HOME	
3 # of Bed	irooms li	ndicate SqFt o	of Living Area	2467	Gallons	Per Day (As Per 1	CEQ Table	240
Commercia	al Type	of Facility			Gallons	Per Day (As Per 1	CEQ Table	(11)
Offices, Factori	ies, Chu	rches, School	is, Parks, Etc	Indicate Num	ber Of Occupa	nts		
Hotel, Motel, He	lospital, I	Nursing Home	e - Indicate Nun	nber of Beds				
Travel Trailer/R	₹V Parks	- Indicate Nu	mber of Space	5		·····		
Miscellaneous								
Source of Water	r 🛛 Pi	ublic Priv	vate Well					
Planning Materi	iais & Si	te Evaluation	as Required C	ompleted By	GREG W. JOH	NSON, P.E 6	7587-F2585	*
System Descript	tion	PROPRIE	ETARY;		AEROBIC TREA	TMENT WITH SI	PRAY IRRIG	ATION
Size of Septic S	iystem R	equired Base	d on Planning l	Materials & So	il Evaluation			
Tank Size(s) (G	ailons)	HOOT	500-AN, CP	Absorp	tion/Applicatio	n Area (SqFt)	56	55
Are Water Savin	ig Devic	es Being Utiliz	zed Within the	Residence?	Yes 🗋 No	,		
any material facts property for the put	s. Authoria urpose of be issued	zation is hereby site/soil evalua until the floodp	v given to the per tion and inspect plain administrate HAC	mitting authorit ion of private se or has approved	y and designated wage facilities. I and released the	ntain any false info I agents to enter u also understand th e development per 1090 Fax (830) 608-20	pon the above nat a permit o mit for this pre	e described authorization to
		.	······································		-			18 (1 programma (1 programma)

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AFFIDAVIT

THE COUNTY OF COMAL STATE OF TEXAS

10/21/2010 10:55:30 AM 1/2 6035034

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CERTIFICATION OF OSSF REQUIRING MAINTENANCE

OCT 2 1 2010

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities (OSSEID) this document is filed in the Deed Records of Comal County, Texas, COUNTY ENGINEER (OSSF's), 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 (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 owner's to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

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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):

LOT 106, RIM ROCK RANCH, SECTION ONE, CONSISTING OF 3.50 AS SHOWN BY THE RECODED PLAT COVERING SUCH LOT RECORDED IN THE MAP OR PLAT RECORDS OF COMAL COUNTY TEXAS. VOLUME 12 PAGES 16-120.

The property is owned by (insert owner's full name): KEITH A. JUPE & SAMANTHA K. JUPE

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

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

DAY OF UCTOPSIL .20 10 WITNESS BY HAND(S) ON THIS FITH JUPE Owner(s) signature(s) SWORN TO AND SUBSCRIBED BEFORE ME ON THIS DAY OF 20 10 BETTY J FITER Notary Public, State of Texas My Comm 1 11/05 Dece Notary's Printed Name: Expires JETTER My Commission Expires December 21, 2012

92941



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OCT 2 1 2010 COUNTY ENGINEER

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

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

> Filed and Recorded Official Public Records Joy Streater, County Clerk Comal County, Texas 10/21/2010 10.55:30 AM KATHY 201006035034

Dey Streater

OSSF SOIL EVALUATION REPORT INFORMATION

92941

Date: August 19, 2010	
	e Evaluator Information:
Name: KEITH A. JUPE & SAMANTHA K. JUPE N	Jame: Greg W. Johnson, P.E., R.S., S.E. 11561
Address: c/o 20818 CACTUS LOOP A	ddress: 170 Hollow Oak
City: SAN ANTONIO State: TEXAS C	ity: New Braunfels State: Texas
Zip Code:78258 Phone:(210) 290-1645 Z	ip Code: <u>78132</u> Phone & Fax (830)905-2778
Property Location:	Installer Information:
Lot 106 Unit 1 Blk Subd. RIM ROCK RANCH	Name:
Street Address: <u>30430 HUNTINGTON CIRCLE</u>	Company:
City: BULVERDE Zip Code: 78163	Address:
Additional Info.:	City: State: Zip Code: Phone
	Zip Code: Phone
Topography: Slope within proposed disposal area:	<u> </u>
Presence of 100 yr. Flood Zone:	YESNO_X BECEWED
Existing or proposed water well in nearby area.	
Presence of adjacent ponds, streams, water impoundments	YES NO X 0CT 2 1 2010
Presence of upper water shed	
Organized sewage service available to lot	YESNO_X COUNTY ENGINEER
Design Calculations for Aerobic Treatment with Spray	
Commercial	ATT BWOOD
Q = GPD	
Residential Water conserving fixtures to be utilized? Yes	X No
Number of Bedrooms the septic system is sized for: 3	Total sa ft living area 2467
Q gal/day = (Bedrooms +1) * 75 GPD - (20% reduction fo	r water conserving fixtures)
Q = (3 + 1)*75-(20%) = 240	
Trash Tank Size 400 Gal.	D
TCEQ Approved Aerobic Plant Size <u>500</u> G.P	.D 2750
	= <u>3750</u> sq. ft.
Application Area Utilized = 5655 sq. ft.	shot 0.5 HD 19 C D M series series (sel a)
Pump Requirement <u>12</u> Gpm @ <u>41</u> Psi (Redja	(ED TO DOSE DUPPEDANCE HOURS
Dosing Cycle:ON DEMAND or TIN	IED TO DOSE IN PREDAWN HOURS
Pump Tank Size = $\frac{760}{100}$ Gal. $\frac{14.6}{100}$ Gal/i	nch.
Reserve Requirement = 180 Gal. 1/3 day flow.	
Alarms: Audible & Visual High Water Alarm & Visual A	r Pump malfunction
With Chlorinator	
SCH-40 or SDR-26 3" or 4" sewer line to tank Two way cleanout	
Pop-up rotary sprinkler heads w/ purple non-potable lids	
1" Sch-40 PVC discharge manifold	
APPLICATION AREA SHOULD BE SEEDED AND MAI	NTAINED WITH VEGETATION
I HAVE PERFORMED A THOROUGH INVESTIGATION B	EING A REGISTERED PROFESSIONAL ENGINEER
AND SITE EVALUATOR IN ACCORDANCE WITH CHAP	ГЕR 285, SUBCHAPTER D, §285.30, & §285.40
(REGARDING RECHARGE FEATURES), TEXAS COM	MISSION OF ENVIRONMENTAL QUALITY
(EFFECTIVE SEPTEMBER 11,2008)	STATE STATE
Λ .	
12 09/1	9/2010 GREG W. JOHNSON
	67587 67587
GREG W. JOHNSON, P.E. F#002585 - S.E. 11561 D	An E
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ON-SITE SEWERAGE FACILITY SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed: August 19, 2010

Site Location:

RIM ROCK RANCH, SECTION 1, LOT 106

Proposed Excavation Depth: N/A

Requirements:

At least two soil excavations must be performed on the site, at opposite ends of the proposed disposal area. Locations of soil boring or dug pits must be shown on the site drawing. For subsurface disposal, soil evaluations must be performed to a depth of at least two feet below the proposed excavation depth. For surface disposal, the surface horizon must be evaluated. Describe each soil horizon and identify any restrictive features on the form. Indicate depths where features appear.

SOIL BORING NUMBER SURFACE EVALUATION

<u> </u>							
	Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0 1	12"	Ш	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 12"	BROWN
2							
4							
5							

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

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

nson, P.E. 67587-F2585, S.E. 11561 Greg

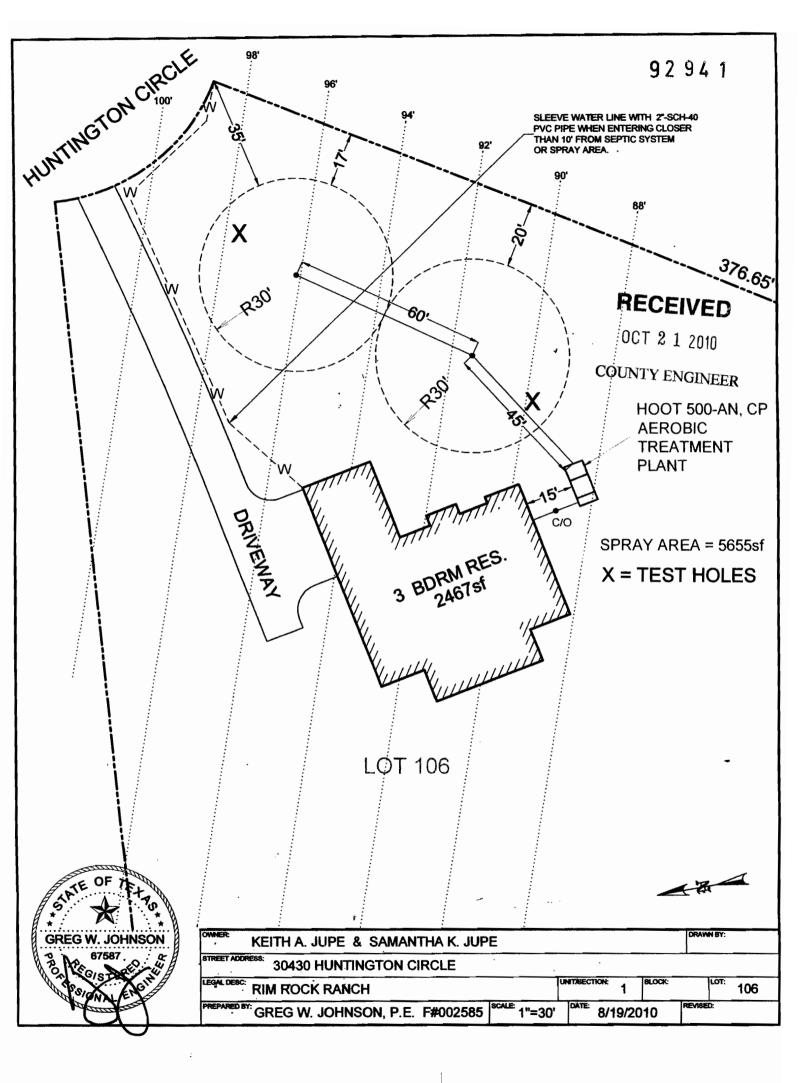
08/19/2010

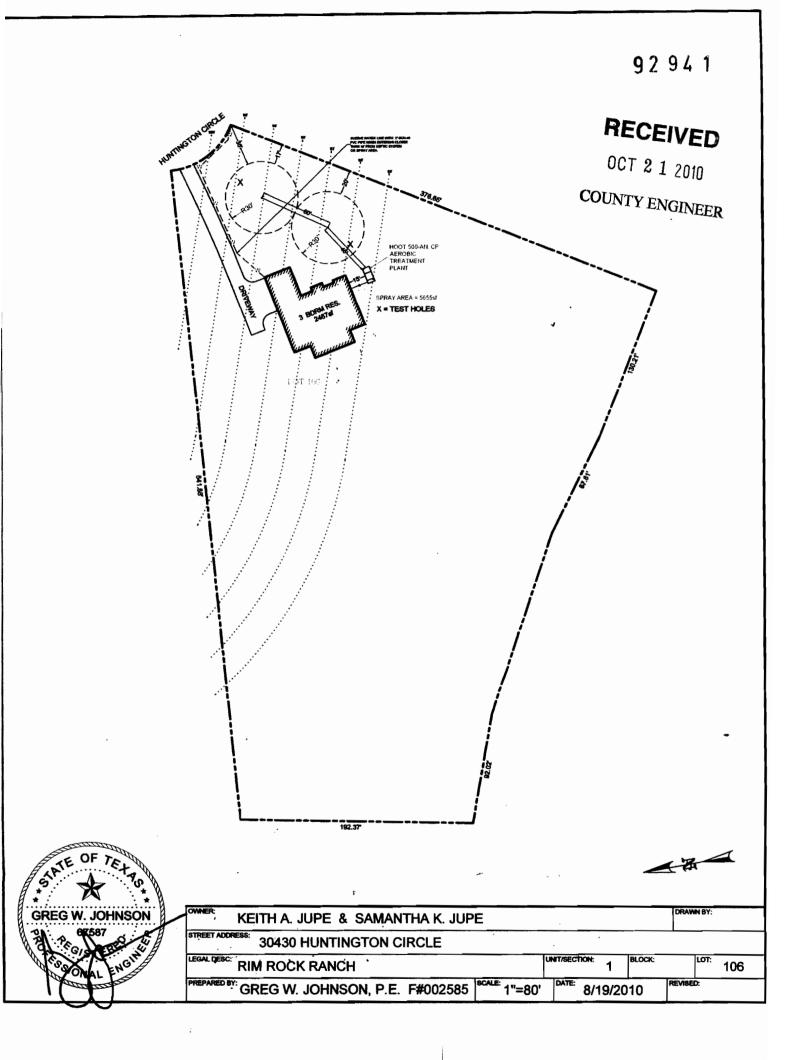
OCT 2 1 2010

COUNTY ENGINEER

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92941





Ritzen, Brenda

From: Sent: To: Subject: Ritzen, Brenda Friday, October 29, 2010 10:22 AM 'gregjohnsonpe@yahoo.com' Permit 92941

Re: Keith A. & Samantha K. Jupe Rim Rock Ranch Unit 1 Lot 106

Dear Greg,

The following is needed before the permit to construct the referenced permit can be issued:

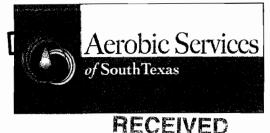
1. According to Comal County GIS, this site is not located over the Edwards Aquifer Recharge Zone. Please correct the application accordingly and resubmit.

Thank you for your attention in this matter.

Brenda Ritzen Environmental Health Coordinator Comal County Engineers Office 195 David Jonas Drive New Braunfels, Texas 78132-3706 830-608-2090 www.cceo.org

92941

1153 FM 2673 Canyon Lake, TX 78133 ØV (Phone (830)964-2365 Fax (830) 964-2659



Routine Maintenance and Inspection Agreement

OCT 2 1 2010

General

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This contract will provide for all required inspections, testing and service for your Aerobic Treatment System. The policy will include the following:

1. 3 inspections a year/services calls (at least one every 4 months), for a total of 6 over the two year period including inspection, adjustment and servicing of the mechanical, electrical and other applicable component parts to ensure proper function. This includes inspecting control panel, air pumps, air filters, diffuser operation, and replacing or repairing any component not found to be functioning correctly. Any alarm situation affecting the proper function of the Aerobic process will be address within a 48-hour time

Frame. After the contract for the two year services agreement expires, work on the remaining warranty does not include labor prices. Repair work on non-warranty parts will include price for parts & labor. The prices will be quoted before work is performed.

2. An effluent quality inspection consisting of a visual check for color, turbidity, scum overflow and examination for odors. A test for chlorine residual and pH will be taken and reported as necessary.

3. If any improper operation is observed, which cannot be corrected at the time of the service visit, you will be notified immediately in writing of the conditions and estimated date of correction.

4. The customer is responsible for the chlorine tablets; they must be filled before or during the service visit.

5. Any additional visits, inspections or sample collection required by specific Municipalities, Water/River Authorities, and County Agencies the TCEQ or any other authorized regulatory agency in your jurisdiction will be covered by this policy.

At the conclusion of the initial service policy, our company will make available, for purchase on an annual basis, a continuing service policy to cover labor for normal inspection, maintenance and repair.

The Homeowners Manual must be strictly followed or warranties are subject to invalidation. Pumping of sludge build-up is not covered by this policy and will result in additional charges.

ACCESS BY CONTRACTOR

The Contractor or anyone authorized by the Contractor may enter the property at reasonable times without prior notice for the purpose of the above described Services. The contractor may access the System components including the tanks by means of excavation for the purpose of evaluations if necessary. Soil Is to be replaced with the excavated material as best as possible.

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Payment for Services

The Client will pay compensation to the Contractor for the Services in the amount of \$400.00 (Four Hundred Dollars). This compensation shall be payable in one lump sum payment upon acceptance of this agreement Payments not received within 30 days of the above described due date will be subject to a \$20.00 late penalty or a 15% per month carrying charge, which ever is greater.

Termination of Agreement

Either party may terminate this agreement within ten days written notice in the event of substantial failure to perform in accordance with its terms by the other party without fault of the terminating party. If this Agreement is so terminated, the Contractor will immediately notify the appropriate health authority of the 2010 termination.

Limit of Liability

COUNTY ENGLAEER

In no event shall the Contractor be liable for indirect, consequential, incidental or punitive damages, whether in contract tort or any other theory. In no event shall the Contractor's liability for direct damages exceed the price for the services described in this Agreement.

Dispute Resolution

If a dispute between the Client and the Designer arises that cannot be settled in good faith negotiations then the parties shall choose a mutually acceptable arbitrator and shall share the cost of the arbitration services equally.

Entire Agreement

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

Severability

If any provision of this Agreement 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 this 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.

HOME OWNER	SERVICE PROVIDER
KETTH Jupe & Samaitha UPE Name 30430 HUNTING TON CIRCLE Address BULUERDE, TX 78163 City, State (210) 290-1645 Phone Phone March Annan that March Signature of Home Owner	Aerobic Services of South Texas Inc. Name <u>1528 E. Common St. Ste 10</u> Address <u>New Braunfels, Texas 78132</u> City, State <u>830-627-1785</u> Phone OS0024597 Thomas Hampton Signature of Service Provider and License #
EFFECTIVE DATEEXPIRED DATE	INSTALLED
Model #	Blower/Panel Serial #
	ontract shall be the date license to operate is issued.
& RIM ROCK RANCH UI	NITILOT106
# RIM ROCK RANCH UN 30430 HUNTINGTON	CIRCE 3VOID

COMAL C__JNTY OFFICE OF ENVIRONM _____ TAL HEALTH

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

<u>ON- SITE SEWAGE FACILITY</u>	<u>AND LICENSE TO OPERATE</u> 92941
Date August 19, 2010	Permit #
Owner Name KEITH A. JUPE & SAMANTHA K. JUPE	Agent Name GREG W. JOHNSON, P.E 67587 *
Mailing Address c/o 20818 CACTUS LOOP	Agent Address 170 HOLLOW OAK *
City, State, Zip SAN ANTONIO, TEXAS 78258	City, State, Zip NEW BRAUNFELS, TEXAS 78132 *
Phone # (210) 290-1645	Phone # (830) 90 RECEIVED
All correspondence should be sent to: Owner Agent	□ Both OCT 2 1 2010
Subdivision Name R	IM ROCK RANCH
Unit Lot106 Block	$\rightarrow \lor \rightarrow \lor$
Acreage/Legal	
Street Name/Address 30430 HUNTINGTON CIRCLE	City BULVERDE Zip 78163
Is the property located over the Edwards Recharge Zone?	
Is there an existing TCEQ approved WPAP for the property?	
If there is no existing WPAP, does the proposed development a If yes, the R.S. or P.E. shall certify that the OSSF design will co Construct will not be issued for the proposed OSSF until the pro office.	mply with all provisions of the proposed WPAP. A Permit to
Type of Development: Sites generating more than 5000 gallons Commission on Environmental Quality.	per day are required to obtain permitting through the Texas
Single Family Residential Type of Construction (House, M	Mobile, RV, Etc.) HOME
3 # of Bedrooms Indicate SqFt of Living Area2467	Gailons Per Day (As Per TCEQ Table 111) 240
Commercial Type of Facility	Galions Per Day (As Per TCEQ Table 111)
Offices, Factories, Churches, Schools, Parks, Etc Indicate Nu	mber 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	QVOID
Miscellaneous	
Source of Water 🛛 Public 🗌 Private Well	
Planning Materials & Site Evaluation as Required Completed By	GREG W. JOHNSON, P.E 67587-F2585 *
System Description PROPRIETARY;	AEROBIC TREATMENT WITH SPRAY IRRIGATION
Size of Septic System Required Based on Planning Materials & S	Soil Evaluation
Tank Size(s) (Gallons) HOOT 500-AN, CP Abso	rption/Application Area (SqFt) 5655
Are Water Saving Devices Being Utilized Within the Residence?	Yes No
I certify that the completed application and all additional information sub any material facts. Authorization is hereby given to the permitting autho property for the purpose of site/soil evaluation and inspection of private construct will not be issued until the floodplain administrator has approve with the floodplain administrator has approve Signature of Owner 195 David Jonas Dr., New Braunfels, Texas 78	rity and designated agents to enter upon the above described sewage facilities. I also understand that a permit of authorization to ed and released the development permit for this property.



2/2010 03:24:51 PM 1/3 GENERAL WARRANTY DEED

Date: May 8, 2010

Grantor: JoEtta Jupe RECEIVED

Grantor's Mailing Address:

731 Slumber Pass San Antonio, Texas 78260 COUNTY ENGINEER

OCT 2 1 2010

Grantees: Keith A. Jupe Samantha K. Jupe As Joint Tenants with Right of Survivorship

Grantee's Mailing Address:	731 Slumber Pass
_	San Antonio, Texas 78260

Consideration:

Ten and No/100 Dollars (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged.

Property (including any improvements):

Lot 106, of RIM ROCK, Section 1, consisting of 3.50 as shown by the recorded plat covering such Lot recorded in the pat or map records of Comal County, Texas.

Reservations from and Exceptions to Conveyance and Warranty:

All instruments filed of record affecting the property.

Grantor, for the consideration and subject to the reservations from and exceptions to conveyance and warranty, grants, sells, and conveys to Grantees, as Joint Tenants with Right of Survivorship, the property, together with all and singular the rights and appurtenances thereto in any wise belonging, to have and hold it to Grantees forever. Grantor binds Grantor and Grantor's heirs and executors to warrant and forever defend all and singular the property to Grantees and Grantees' successors and assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof.

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

GRANTOR:

1

AFTER RECORDING, PLEASE RETURN TO:

Eric A. Pullen Pulman, Cappuccio, Pullen & Benson, LLP 2161 N.W. Military Highway Suite 400 San Antonio, Texas 78213

RECEIVED

OCT 2 1 2010

COUNTY ENGINEER

¹ Filed and Recorded Official Public Records Joy Streater, County Clerk Comal County, Texas 05/12/2010 03:24:51 PM CASHFOUR 201006015513

Juy Streater

THE STATE OF TEXAS § COUNTY OF BEXAR §

This instrument was acknowledged before me on the 8th day of May 2010 by JoEtta Jupe.

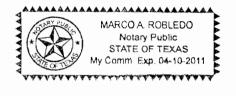
Maro

Notary Public in and for the State of Texas

RECEIVED

OCT 2 1 2010

COUNTY ENGINEER





Comal County office of comal county engineer

EXEMPTION CERTIFICATE

COMAL COUNTY FLOODPLAIN DEVELOPMENT PERMIT

PERMIT # 92941

und underhöldende, öffelsen an 1% meldennamk (1% inkelsend) til hand alst linde und - disperiditionenderseten (daskrunden) i a deskisklumenengen i a

LOCATION: Rim Rock Ranch, Section 1

Lot: 106FIRM Panel No.0405FDated: September 2, 2009

THIS APPLICATION HAS BEEN REVIEWED BY THE COMAL COUNTY ENGINEERS OFFICE, AND IT IS THEIR DETERMINATION THAT THE PROPOSED DEVELOPMENT IS:

Located within Zone X, and is NOT located within a Special Flood Hazard Area (SFHA)

THE COUNTY ADMINISTRATOR HAS REVIEWED THE PLANS AND MAKES THE FOLLOWING COMMENTS:

THIS CERTIFICATE EXEMPTS THE APPLICANT FROM DEVELOPMENT STANDARDS REQUIRED BY THE COMAL COUNTY FLOOD DAMAGE PREVENTION ORDER. WORK IS HEREBY AUTHORIZED TO PROCEED.

- THIS PERMIT IS VOID IF THE PERMITTED CONSTRUCTION HAS NOT COMMENCED WITHIN 1 YEAR FROM DATE OF ISSUANCE
- THIS PERMIT IS VOID IF THE PERMITTED CONSTRUCTION HAS NOT COMMENCED AND A FEMA MAP REVISION AFFECTING FLOODPLAINS WITHIN THE PERMITTED PROPERTY HAS BEEN ADOPTED
- THIS PERMIT IS VOID IF THE FOUNDATION FOR A RESIDENTIAL OR COMMERCIAL STRUCTURE HAS NOT BEEN COMPLETED WITHIN I YEAR FROM DATE OF ISSUANCE
- THIS PERMIT IS VOID IF THE FOUNDATION FOR A RESIDENTIAL OR COMMERCIAL STRUCTURE HAS NOT BEEN COMPLETED AND A FEMA MAP REVISION A FFECTING FLOODPLAINS WITHIN THE PERMITTED PROPERTY HAS BEEN ADOPTED

DATE: 10-22-10 SIGNED

RECEIVED

Aerobic Services of Sout 1153 FM 2673	h Texas	
Canyon Lake, TX 78133	3 RAFE	Aerobic Services, COUNTY ENGINEER
	IUI ž 2 701:	
	101 44 701	6/24/2011 Phone: (830) 964-2365
		Fax: (830) 954-2659
Te: Keith & Samantha luce		num acrobicservices com Per nifilo - 97911
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Agen - Handis - op 11	Comal Envire, Hearth	the second second
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Inspection Car Schee	lifed	
lem	a and a second	2 * - 3
Actator Irrigation putor	🦿 👘	
Air compress :		
Disinfection de see		
Chlorine supply	-	Serverand: Mit
Spray field veg-tare Sprinkler / Drip Lack a sh		
Controls/ Electric Circuits		
	an regalized of	or dige as it is
Chlorine Residual Test Method:	0.0	Aeration Clarifier
BOD:	- VGFC	Funp A
TSS:		
Access Ports Secured JABS / NO Repairs made: YES NO)	
Repairs and Comments:		
	>	
nspector:	Date: 07/	loo lu
Fom Hampton	Date. 011	
OS24597		(10, 0)
		Area: 1 419 Db
		GPS: ./. ID = 61111898

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Aerobic Services of South Te 1153 FM 2673 Canyon Lake, TX 78133		WALLER NOV 18 2011	Acrol of South	bic Services
To: Keith & Samantha Jupe 30430 Huntington Bulverde, TX 78163	یا جارے ماری با رہے	B Sy	rstem S/N: 23295 erator S/N: 23295 Contrac	Phone: (830) 964-2365 Fax: (830) 964-2659 www.aerobicservices.com loot Aerobic Systems Inc. et: 11/30/2010 - 11/30/2012 spections per year: 3
Agency: Comal County Enviromental H County: Comal Subdivision: Rim Rock Ranch Inspection Type: <u>Schedul</u>	Installed:	Phone: (210 Cell: Work:	0) 290-1645 g	Service Due: 11/30/2011 Other:
			Sludge Levels Aeration Clarifier ump W_A	RECEIVED NOV 2 1 2011 COUNITY ENGINEER
Inspector: Tom Hampton MP349/OS24597	Date:	//////////////////////////////////////		= 61111898

30430 Huntington, Bulverde

Aerobic Services of Sc	outh Texas	藏得礼。	n E Friteit			
1153 FM 2673 Canyon Lake, TX 78133		MAR 23 2012		Aerobic Services		
To: Keith & Samantha Jup 30430 Huntington Bulverde, TX 78163	e	و مشکارک از نسب و جدار از اس و مسید		PermitNo:	92941 Hoot - Hoot Aei 23295	Phone: (830) 964-2365 Fax: (830) 964-2659 www.aerobicservices.com robic Systems Inc.
Agency: Comal County Environ County: Comal Subdivision: Rim Rock Ranch	/	Installed:	Phone: (Cell: Work:	(210) 290-1645	Contract: 11, Inspec	/30/2010 - 11/30/2012 tions per year: 3 te Due: 3/30/2012
Inspection Type:	edule_				REC	EIVED
Item Aerator: Irrigation pump:	Operational	Inoperative	N/A			6 2012
Air compressor: Disinfection device: Chlorine supply: Spray field vegetation: Sprinkler / Drip backwash: Controls/ Electric Circuits						ENGINEER
Test Results and observation Chlorine Residual: Test Method: BOD: TSS: Access Ports Secured YES/ N Repairs made: YES NO	/	Dois 6 IPD		Sludge Leve Aeration _ Clarifier _ Pump _/ <		ders
Repairs and Comments: Needs 1-12	" and 1-	- 20" Riser				
Inspector: Tom Hampton VP MP349/OS24597)2	Date:	///:2	2_		
WIP349/0324557			Area: GPS:	/ 419 C6	ID = 6111	1898
			30430	Huntington, Bulv	erde	

Aerobic Services of South Texas 1153 FM 2673 Canyon Lake, TX 78133		()	fra de ser		
		/-,\	16 0 5 2017		obic Services thTexaz
		ı	.*	6/28/2012	Phone: (830) 964-2365 Fax: (830) 964-2659 www.aerobicservices.com
To: Keith & Samantha Jup 30430 Huntington Bulverde, TX 78163	0e			PermitNo: 92941 Brand/Mfg.: Hoot - System S/N: 23295 Aerator S/N: 23295	Hoot Aerobic Systems Inc.
Agency: Comal County Environ County: Comal Subdivision: Rim Rock Ranch		Installed:	Phone: Cell: Work:	(210) 290-1645	tract: 11/30/2010 - 11/30/2012 Inspections per year: 3 Service Due: 7/30/2012 Other: 5
Item	Operational	Inoperative	N/A		
Aerator: Irrigation pump: Air compressor:					
Disinfection device: Chlorine supply: Spray field vegetation: Sprinkler / Drip backwash: Controls/ Electric Circuits					
Test Results and observation Chlorine Residual: Test Method: BOD: TSS: Access Ports Secured (ES / I Repairs made: YES / NO	N/A 			Sludge Levels Aeration Clarifier Pump	HA
Repairs and Comments:	ids no	r exp	lese		
Inspector: Iom Hampton VP MP349/0S24597	2	Date:	7/30/12		
111 575 (527557)			Area	: / 419 C6 :	D = 61111898

30430 Huntington, Bulverde

Aerobic Services of S 1153 FM 2673 Canyon Lake, TX 781			AILED 3 0 2012	Aerob of South	pic Services Texas
To: Keith & Samantha Ju 30430 Huntington (Bulverde, TX 78163		ت ترتب را بر بر		10/30/2012 PermitNo: 92941 Brand/Mfg.: Hoot - Ho System S/N: 23295 Aerator S/N: 23295	
Agency: Comal County Enviro County: Comal Subdivision: Rim Rock Ranch Inspection Type: Sch	101	Installed:	Phone: Cell: Work:	(210) 290-1645	ct: 11/30/2010 - 11/30/2012 nspections per year: 3 Service Due: 11/30/2012 Other:
Item Aerator: Irrigation pump: Air compressor: Disinfection device: Chlorine supply: Spray field vegetation: Sprinkler / Drip backwash: Controls/ Electric Circuits Test Results and observatio Chlorine Residual:	Operational	Inoperative	N/A	Sludge Levels Aeration Clarifier	RECEIVED DEC 0.5 2012 COUNTY ENGINEER
Test Method: BOD: TSS: Access Ports Secured (FS / Repairs made: YES / NO Repairs and Comments: Inspector: Tom Hampton VP MP349/OS24597	NO		ervice 1/26/12	Pump <u>NA</u>	
			Area: GPS:	/ 419 C6	= 61111898

30430 Huntington, Bulverde

MJ Central Texas Septic

830-438-3849

p.10

MJ Septic, LLC 28009 Wooded Acres San Antonio, TX 78260

Phone: (210) 875-3625 Fax: (830) 438-3849

www.mjseptic.com mjseptic@sabc.rr.com

To: Mr. Keith Jupe 30430 Huntington Circle Bulverde, TX 78163

Permit #: 92941

Agency: Comel County Environmental Heelth County: Comal Sub: Rim Rock Ranch Mfg / Brand: Hoot Systems, LLC - Hoot Systems, LLC Treatment Type: Aerobic **Disposal: Surface Application**

Service Type: Initial Inspection

Visit Date: 9/4/2014

Method: Other

Technician: Roy Hemandez Maint. Provider: Michael J. Long

Aerators: Corrected on site

Filters: Operational Inigation Pumps: Operational Disinfection Device: Operational Chlorine Supply: Operational Chierine Residual: 0.1 mg/L

Studge Levels For Tank 1: 4" For Tank 2: 0" For Tank 3: 0*

Tank Lid / Riser: Secured

Electric Circuits: Operational Distribution System: Operational Sprayfield Veg: Operational

Alarm: Operational

Comments

- Tank Lld was noted as Secured prior to leaving. - Cleaned Filters and Reset Timer

Service Completed

Printed: 10/20/2014

Provider: Michael J. Long License: MP0001294 Expires: 8/31/2016

Site: 30430 Huntington Circle Bulverda, TX 78163 (210) 378-5851

Customer ID: 1012 Contract Dates: 8/4/2014 - 8/4/2015

Scheduled Date: 1/4/2015

Aerator S/N: AC 0314001157

Entered By: Stephanie E. Perez

MJ Septic, LLC

28009 Wooded Acres San Antonio, TX 78260

Phone: (210) 875-3625 Fax: (830) 438-3849 www.mjseptic.com mjseptic@satx.rr.com

Time In: 1:28 pm

To: Mr. Keith Jupe 30430 Huntington Circle Bulverde, TX 78163

Permit #: 92941

Agency: Comal County Environmental Health Sub: Rim Rock Ranch County: Comal Mfg / Brand: Hoot Systems, LLC - Hoot Systems, LLC Treatment Type: Aerobic System S/N: 0314001157 **Disposal: Surface Application**

Service Type: Scheduled Inspection

Visit Date: 12/30/2014 Method: Other

Technician: Dale Pearson

Maint. Provider: Michael J. Long

Aerators: Operational Filters: Operational Irrigation Pumps: Operational Disinfection Device: Operational Chlorine Supply: Operational Chlorine Residual: 0.1 mg/L

Sludge Levels For Tank 1: 1-2"

For Tank 2: 0" For Tank 3: 0"

Tank Lid / Riser: Secured

Electric Circuits: Operational Distribution System: Operational Sprayfield Veg: Operational

Alarm: Operational

Comments

- Tank Lid was noted as Secured prior to leaving

- Service Tag Left on Door - Copy emailed to the customer on 12/30/2014.

Service Completed

Site: 30430 Huntington Circle Bulverde, TX 78163 (210) 378-5851

Customer ID: 1012 Contract Dates: 9/4/2014 - 9/4/2015 Scheduled Date: 1/4/2015

Inspection 1 of 3

✓ This counts as a type of "Scheduled Inspection" Entered By: MariBelle Flores Copy emailed to Customer Customer Emailed: 12/30/2014

Printed: 12/31/2014

License: MP0001294 Expires: 8/31/2016

8309954051

p.6

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

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

To: Stephanie Leahbarry 30430 Huntington circle Bulverde, TX 78163		Site: 3	0430 Huntington circle Bulverde, TX 78163
			(401) 487-7729
Permit #: 92941		Customer ID: 3985	
Agency: Comal County		Contract Dates: 3/1/2016 - 3/1/20	018
County: Coma!	Sub:	Scheduled Date: 7/1/2016	Inspection 1 of 6
Mig / Brand: - Hoot	012.		
Treatment Type: Aerobic With Chlorine	System S/N: Serial 23295		
Disposal: Surface Application		GPS Coordinates - Latitude: 29.74757 Longitu	ude: -98.36777
Service Type: Scheduled	Inspection	This counts as a type of "So	cheduled inspection"
Visit Date: 7/21/2016		Entered By: Andrew T M	ау
Method: Grab			
Technician: Andrew T May			
Maint. Provider: Ryan Seidenstic	ker		
Aerators: Operational	Sludge Levels		
Filters: Operational	For Tank 1: N/A		
Irrigation Pumps: Operational	For Tank 2: 0"		
Disinfection Device: Operational	For Tank 3 : <u>0"</u>		
Chlorine Supply: Operational		CFI	W: <u>2.7</u>
Chlorine Residual: <u>.01</u>			
	Air Filter: Go	ood	
Chlorinator: Op			
	Tank Lid / Riser: <u>Se</u>	ecured	
Electric Circuits: Operational			
Distribution System: Operational	Calary C	and	
Sprayfield Veg: Operational	Color: <u>G</u> Odor: G		
		000	
Alarm: Operational	PSI Pressure: 2.5	<u>9</u>	
Comments		🖌 :	Service Completed

- Tank Lid was noted as Secured prior to leaving. Checked alarms reset timer pretreatment is buried - Secured system in the on position with a lock bolt - Cleaned compressor filter

Provider: Ryan Seidensticker

Expires: 4/30/2017

Insp ID #:38824 Printed 7/21/2016

8309954051

p.20

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

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

To: Stephanie Leahbarry 30430 Huntington circle Bulverde, TX 78163			Site: 34	0430 Huntington circle Buiverde, TX 78183
				(401) 487-7729
Peret# 92941	and the second		ustomer iD: 3985	
Agency: Comal County		ean	act Dates: 3/1/2016 - 3/1/20	18
*County: Comal	Sub		duled Date: 11/1/2016	Inspection 2 of 6
Mfg / Brand: - Hoot				
Treatment Type: Aerobic With Chlorine	System S/N: Serial 23295			
Disposal: Surface Application		GPS Coordinates	- Lalitude: 29.74757 Longitu	de: -98.36777
Service Type: Scheduled I	nspection	2	This counts as a type of "Sci	heduled Inspection"
Visit Date: 11/15/2016			Entered By: Alex Seidens	sticker
Method: Grab				
Technician: Alex Seidenstick	er			
Maint. Provider: Ryan Seidenstick	(TT) (TT)			
Aerators: <u>Operational</u> Fitters: Operational	Sludge Levels For Tank 1: n/a"			
Imigation Pumps: Operational	For Tank 1: <u>104</u>			
Disinfection Device: Operational	For Tank 3: 0			
Chlorine Supply: Operational	101 Tutik 0. <u>0</u> _		CEM	I: <u>2.0</u>
Chlorine Residual: 0.6 mg/L			Of M	1, <u>2.0</u>
	Air Filter: G	000		
	Tank Lid / Riser: <u>Se</u>	ecured		
Electric Circuits: Operational				
Distribution System: Operational	Color: G	ood		
Sprayfield Veg: Operational	Odor: G			
Alarm: Operational	PSI Pressure: 2.	8		
Comments			<u>₩</u> , s	Service Completed
T	- di - Disse - dis ta bas una la sei	Classed as	manager filler Observed	Sico Ant Mound

- Technician Secured the Tank Lid and/or Riser prior to leaving location, - Cleaned compressor filter - Observed Fire Ant Mound that were active - Secured system in the on position with a lock bolt. Acid was diffuser .checked sprinklers

Insp ID #:42951 Printed: 11/15/2016



yan

Block Creek Concrete 444 A Old Hwy No 9 Comfort, TX 78013	e Products, LLC	
		Phone: (830) 995-3189 Fax: (830) 995-4051
To: Stephanie Leahba 30430 Huntington Bulverde, TX 781	circle	Site: 30430 Huntington circle Bulverde, TX 78163 (401) 487-7729
		Customer ID: 3985
Permit #: 92941		Contract Dates: 3/1/2016 - 3/1/2018
Agency: Comal County County: Comal Mfg / Brand: ~ Hoot	Sub:	Scheduled Date: 3/1/2017 Inspection 3 of 6
Treatment Type: Aerobic With Cr Disposal: Surface Applica		GPS Coordinates - Latitude: 29.74757 Longitude: -98.36777
		This counts as a type of "Scheduled Inspection"
Service Type: Schedu		Entered By: Michael Prosise
Visit Date: 4/3/201	7 Time In: 4:55	Out: 5:20
Method: Grab	hand the second s	
Techniclan: Michael P Maint, Provider: Burt Seide		
and the second course the second s		en e
Aerators: <u>Operal</u> Filters: <u>Operal</u>		a
Irrigation Pumps: Operat		
Disinfection Device: Operat		
Chlorine Supply: Operal	tional	CFM: <u>3.2</u>
Chlorine Residual: .37	Air Filter	: Good
	Tank Lid / Riser	Secured
Flastric Circultor Opera		- Secured
Electric Circuits: <u>Opera</u> Distribution System: <u>Opera</u> Sprayfield Veg: <u>Opera</u>	tional	
	tional PSI Pressure	
Alarm: Opera Comments	tional PSI Pressure	
- Tank Lid was noted as Secu all the chambers of your syste	em. You have riser/risers lids that an	Service Completed pressor filter To properly inspect your system we need to look in e burried. Please expose them so we can properly inspect your . Pretreatment lid burried, clarification and pump tank need risers.
1-12" 1-20".		
		But Siductichi Insp ID #:47101 Printed:4/3/2017
		· · · · · · · · · · ·
		. 111
		xelli
61.q	1204266058	Apr 05 17 09:36a Block creek

p.30

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

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

To: Stephanie Leahbarry 30430 Huntington circle Bulverde, TX 78163	•		Site: 30430 Huntington circle Butverde, TX 78163
			(401) 487-7729
Permit #: 92941		Customer ID: 3985	
Agency: Comal County		Contract Dates: 3/1/2016	- 3/1/2018
County: Cornal Mfg / Brand: - Hoot	Sub:	Scheduled Date: 7/1/2017	Inspection 4 of 6
Treatment Type: Aerobic With Chiorine Disposal: Surface Application	System S/N: Serial 23295	GPS Coordinates - Latitude: 29.74757	Longitude: -98.36777
Service Type: Scheduled	Inspection	This counts as a typ	e of "Scheduled Inspection"
Visit Date: 6/27/2017 Method: Grab	Time in: <u>130</u>	Out: 225 Entered By: Alex 3	Seidensticker
Technician: Alex Seidenstick Maint. Provider: Burt Seidenstick			
Aerators: <u>Operational</u> Filters: <u>Operational</u> Irrigation Pumps: <u>Operational</u>	<u>Sludge Levels</u> For Tank 1: <u>0'</u> For Tank 2: <u>0'</u>		an un presir
Disinfection Device: <u>Operational</u> Chlorine Supply: <u>Operational</u> Chlorine Residual: <u>.01mg/L</u>	For Tank 3: <u>0</u>		CFM: 2.0
	Air Filter:	Good	
	Tank Lld / Riser:	Secured	
Electric Circuits: Operational			
Distribution System: Operational Sprayfield Veg: Operational	Color: Odor:		
Alarm: Operational	PSI Pressure:	3.0	
- Tank Lid was noted as Secured pri	ior to leaving Cleaned comp	ressor filter. Replaced screws.	Service Completed

Insp ID #:51049 Printed:6/27/2017

Bout Sidested

30430 Huntington circle Bulverde, TX 78163			Site: 304	30 Huntington circle Bulverde, TX 78163
			11.71.71.71.71.71.71.71.71.71.71.71.71.7	(401) 487-7729
Permit #: 92941			Customer ID: 3985	· · · · · · · · · · · · · · · · · · ·
Agency: Comal County			Contract Dates: 3/1/2016 - 3/1/2018	
County: Comal	Sub:		Scheduled Date: 11/1/2017	Inspection 5 of 6
Mfg / Brand: - Hoot				
Treatment Type: Aerobic With Chlorine Disposal: Surface Application	System S/N: Serial 23295	CDC Coord	incton (citudo: 20 74757 (capitudo	00 26777
		GPS 60010	linates - Latitude: 29.74757 Longitude	
Service Type: Scheduled I	nspection		This counts as a type of "Sche Entered By: <u>Alex Seidensti</u>	
Visit Date: <u>11/8/2017</u>	Time In: 9:25 AM	Out: <u>9:55 AM</u>	Entered By: Alex Seidensti	<u>ukei</u>
Method: Grab				
Technician: Alex Seidenstick	er			
Maint, Provider: Burt Seidenstick	er			
Aerators: Operational	Sludge Levels			
Filters: Operational	For Tank 1:	N/A		
Irrigation Pumps: Operational	For Tank 2:	Add, to the second		
Disinfection Device: Operational	For Tank 3:	and the second se		
Chlorine Supply: Operational			CFM;	2.0
Chlorine Residual: .7				
	Tank Lid / Rise	r: Secured		
Electric Circuits: Operational				
Distribution System: Operational	0-1-	r: Good		
Sprayfield Veg: Operational		or: <u>Good</u>		
Alarm: Operational	PSI Pressu	re: 3.0		
Comments	·	- · · · · · · · · · · · · · · · · · · ·	LI 50	rvice Completed

Insp ID #:55912 Printed:11/8/2017

Technician: Alex Seidensticker

License: MP0001961 Expires: 9/30/2018

Alex

Provider: Bart Seidensticker

License: MP0000002

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Bouto Siducted

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

To: James Jackson Site: 30430 Huntington circle 30430 Huntington circle Bulverde, TX 78163 Bulverde, TX 78163 (210) 497-3715 Customer ID: 3985 Permit #: 92941 Contract Dates: 3/1/2016 - 3/1/2018 Agency: Comal County Inspection 6 of 6 Scheduled Date: 3/1/2018 County: Comal Sub: Mfg / Brand: - Hoot Treatment Type: Aerobic With Chlorine System S/N: Serial 23295 **Disposal: Surface Application** GPS Coordinates - Latitude: 29.74757 Longitude: -98.36777 This counts as a type of "Scheduled Inspection" Service Type: Scheduled Inspection Entered By: David H Collyer Visit Date: 2/26/2018 Time In: 12:00 PM Out: 12:25 PM Method: Grab Technician: David H Collver Maint, Provider: Burt Seidensticker Aerators: Operational Sludge Levels Filters: Operational For Tank 1: n/a Irrigation Pumps: Operational For Tank 2: 28" Disinfection Device: Operational For Tank 3: 0" Chlorine Supply: Operational CFM: 2.0 Chlorine Residual: 1.1 Tank Lid / Riser: Secured Electric Circuits: Operational Distribution System: Operational Color: Good Sprayfield Veg: Operational Odor: Good PSI Pressure: 3.0 Alarm: Operational Service Completed Comments - Technician Secured the Tank Lid and/or Riser prior to leaving location. - Cleaned compressor filter - New tag Insp ID #:60257

Provider: Burt Seidensticker

License: MP0000002

Burto Siduction

Printed:2/26/2018 Technician: David # Collyer License: MT0001402 Expires:

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

Site: 30430 Huntington circle

Printed:7/25/2018

Bulverde, TX 78163 (210) 497-3715

Inspection 1 of 3

To: James Jackson 30430 Huntington circle Bulverde, TX 78163

Permit #: 92941

Agency: Comal County County: Comai Mfg / Brand: - Hoot Treatment Type: Aerobic With Chlorine System S/N: Serial 23295 Disposal: Surface Application

Sub:

Service Type: Scheduled Inspection

Visit Date: 7/25/2018

Method: Grab

Technician: Alejandro Gonzalez Maint. Provider: Burt Seidensticker

Aerators: Operational Filters: Operational Irrigation Pumps: Operational **Disinfection Device:** Operational Chlorine Supply: Operational Chlorine Residual: .86

Sludge Levels For Tank 1: n/a For Tank 2: 36

Tank Lid / Riser: Secured

Electric Circuits: Operational Distribution System: Operational Sprayfield Veg: Operational

Color: Good Odor: Good

Alarm: Operational

Comments

Service Completed

- Technician Secured the Tank Lid and/or Riser prior to leaving location. - Changed filter on compressor- upon arrival yellow light was on due to bad compressor. Customer approved rebuild of hp80- acid washed diffuser- could not locate sprinklers. Talked to home owner and he did not know where they are located.

Insp ID #:65960

Provider: Burt Seidensticker

License #: MP0000002

Technician: Alejandro Gonzalez

Customer ID: 3985

Scheduled Date: 7/1/2018

Contract Dates: 3/1/2018 - 3/1/2019

GPS Coordinates - Latitude: 29.74757 Longitude: -98.36777

This counts as a type of "Scheduled Inspection"

Entered By: Alejandro Gonzalez

License #: MT0000996

Expires:

Burn Silvet

Alth of

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ı						(830) 995-3189 (830) 995-4051
	To: James Jackson 30430 Huntington circle Bulverde, TX 78163					Printed:11/6/2018 0 Huntington circle Bulverde, TX 78163
						(210) 497-3715
D	ermit #: 92941			Customer ID:	3985	
	gency: Comal County			Contract Dates:	3/1/2018 - 3/1/2019	and the second
	County: Comal	Sub:		Scheduled Date:	11/1/2018	Inspection 2 of 3
	Mfg / Brand: - Hoot					
T	eatment Type: Aerobic With Chlorine Disposal: Surface Application	System S/N: Serial 23295	GPS Coordi	nates - Latitude: 2	29.74757 Longitude:	-98 36777
			01 0 00010		s as a type of "Sched	and the second
	Service Type: Scheduled 1	nspection		-	ly: <u>Harley S. Piper</u>	uleo mopecalon
	Visit Date: <u>11/6/2018</u>	Time In: 9:37am	Out: <u>10:01am</u>	Lintered D	y. <u>maney o. r sper</u>	
	Method: Grab					
	Technician: Harley S. Piper					
	Maint. Provider: Burt Seidenstick	er				
•••	Aerators: Operational	Sludge Levels				
	Filters: Operational	For Tank 1:	N/A			
	Irrigation Pumps: Operational	For Tank 2:				
	Disinfection Device: Operational	For Tank 3:	<u></u>	,		
	Chlorine Supply: <u>Operational</u> Chlorine Residual: <u>.56</u>				CFM: 2	<u>.6</u>
		Air Filter	Good			
		Tank Lid / Riser	: <u>Secured</u>			
	Electric Circuits: Operational					
	Distribution System: Operational					
1	Sprayfield Veg: Operational		: Good			
		Odor	: <u>Good</u>			
		PSI Pressure	. 36			
	Alarm: Operational	rairiessuie	* <u>A'N</u>			ine Committeed
-	comments Technician Secured the Tank Lid a osition with a lock bolt - pretreat is l		ocation Clean	ed compressor f	Not you and	ice Completed em in the on
	Owner signature:	анары			an and a start and provide a start star	Insp ID #:70115
F	rovider: Bart Seidensticker	Т	echnician: _{#a}	rley S. Piper		
	License #: MP0000002		License #: MTO	001484	Expires: 1/29/	2021
			16.1	/h / .		
			[mm]	P. Jeffer		
	AT	5 Sidentich		19		

Burto Siductiche

Date: 10/11/2019

To: James Jackson 30430 Huntington Circle Bulverde, TX 78163

Phone: (210) 497-3715 Subdivision: Site: 30430 Huntington Circle, Bulverde, TX 78163 County: Comal Installer: Agency: Comal County Mfg/Brand: / Hoot Phone: (830) 995-3189 Fax: (830) 995-4051

Permit #: 92941

Contract Period

Start Date: 7/10/2019 End Date: 7/10/2020

Block Creek Concrete Products, LLC 3 visits per year - one every 4 months

Map Key: ID: 3985

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

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

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

We will visit your site within 48 hours of you notifying us of a problem

10-11-19 S. Industerhe and Date: Certified Inspecto

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

Site: 30430 Huntington circle

Printed:10/15/2019

Bulverde, TX 78163

(210) 497-3715

Inspection 4 of 3

To: James Jackson 30430 Huntington circle Bulverde, TX 78163

Permit #: 92941

-Agency:-Comal County County: Comal Sub: Mfg / Brand: - Hoot Treatment Type: Aerobic With Chlorine System S/N: Serial 23295 **Disposal: Surface Application**

Service Type: Scheduled Inspection

Visit Date: 10/15/2019

Method: Grab

Technician: Alejandro Gonzalez Maint, Provider: Burt Seidensticker

Aerators: Operational Filters: Operational Irrigation Pumps: Operational **Disinfection Device:** Operational **Chlorine Supply:** Operational Chlorine Residual: 0.1mg/L

Sludge Levels For Tank 1: n/a For Tank 2: 34 For Tank 3: 4

Air Filter: Good

Tank Lid / Riser: Secured

Electric Circuits: Operational **Distribution System: Operational** Sprayfield Veg: Operational

Comments

Color: Good Odor: Good

Alarm: Operational

PSI Pressure: 2.2

Service Completed

- Technician Secured the Tank Lid and/or Riser prior to leaving location. Pretreatment is burried talked to owner about exposing so we can install risers. Owner also would like compressor, control pannel, and lids raised due to him adding more dirt to vard, Would like for us to see if all work is possible and what we need in order to do work, will call office to schedual. Sprinklers do not spray due to lines being clogged with dirt, tried flushing out but would not spray. Owner will call installers to get them to reroute lines and possibly install new spray lines.

Insp ID #:84382

Provider: Burt Seidensticker

#: MP0000002

5. industicky

Technician: Alejaudro Gouzalez

Customer ID: 3985

Scheduled Date:

Contract Dates: 3/1/2018 - 3/1/2019

GPS Coordinates - Latitude: 29.74757 Longitude: -98.36777

This counts as a type of "Scheduled Inspection"

CFM: 2.0

Entered By: Alejandro Gonzalez

License #: MT0000996

Expires:

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

Printed:2/27/2020 To: James Jackson Site: 30430 Huntington Circle **30430 Huntington Circle** Bulverde, TX 78163 Bulverde, TX 78163 (210) 497-3715 Customer ID: 3985 Permit #: 92941 Contract Dates: 7/10/2019 - 7/10/2020 Agency: Comal County Scheduled Date: 3/10/2020 Inspection 1 of 3 County: Comal Sub: Mfg / Brand: - Hoot Treatment Type: Aerobic With Chlorine System S/N: Serial 23295 **Disposal:** Surface Application GPS Coordinates - Latitude: 29.74757 Longitude: -98.36777 This counts as a type of "Scheduled Inspection" Service Type: Scheduled Inspection Entered By: Anthony Jesus Soto Visit Date: 2/27/2020 Time In: 214pm Out: 2440m1 Nethod: Grab Technic: an: Anthony Jesus Soto Maint. Proviider: Rudy Carson Aprators: Operational Sludge Levels Filters: Operational For Tank 1: na For Tank 2: 6" Irrigaton Pumps: Operational For Tank 3: 0" **Disinfection Device:** Operational Chlorine Supply: Operational CFM: 2.2 Chlorine Residual: 0.1mg/L Air Filter: Good Tank Lid / Riser: Secured Electric Circuits: Operational Distribution System: Operational Color: Good Sprayfield Veg: Operational Odor: Good PSI Pressure: 3.5 Alarm: Operational Service Completed Comments - Technician Secured the Tank Lid and/or Riser prior to leaving location. Resset timer. - Secured system in the on position with a lock bolt. Pretreatment is burried. Could not check sprayer due to low waer level in pump tank. - Risers need to be added please contact office for scheduling and questions.

Insp ID #:90246

Technician: Anthony Jesus Soto

Provider: Rudy Carson

Rudy Carson

Licens #: MT0001771

Expires: 9/30/2022

Anthony 8str

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

To: James Jackson 30430 Huntington Circle Bulverde, TX 78163				Site:	Printed:7/23/2020 30430 Huntington Circle Bulverde, TX 78163
					(210) 497-3715
Permit #: 92941			Customer ID:	3985	
Agency: Comal County			Contract Dates:	7/10/2019 - 7/1	0/2020
County: Comal	Sub:		Scheduled Date:	7/10/2020	Inspection 2 of 3
Mfg / Brand: - Hoot	Custom CAL Custol 02005				
Treatment Type: Aerobic With Chlorine Disposal: Surface Application	System S/N: Serial 23295	GPS Coord	inates - Latitude:	29.74757 Long	itude: -98.36777
Service Type: Scheduled I	nspection		This coun	ts as a type of "	Scheduled Inspection"
Visit Date: 7/23/2020	Time In: 2:50pm	Out: 3:04pm	Entered	By: Ronnie W	Krampota
Method: Grab					
Technician: Ronnie W Kramp	ota				
Maint. Provider: Rudy Carson					
Aerators: Operational	Sludge Levels				
Filters: Operational	For Tank 1:	N/A			
Irrigation Pumps: Operational	For Tank 2:				
Disinfection Device: Operational	For Tank 3:	0"			
Chlorine Supply: Operational Chlorine Residual: 0.33mg/L				C	FM: <u>1.8</u>
	Air Filte	er Good			
Electric Circuits: <u>Operational</u> Distribution System: <u>Operational</u>	Tank Lid / Rise	r: <u>Secured</u> r: Good			
Sprayfield Veg: Operational		r: Good			
Alarm: Operational	PSI Pressur	e: <u>3.2</u>			
Comments					Service Completed
- Technician Secured the Tank Lid at needs to add bleach it is low - Tank of contact office for scheduling and que	1 pretreatment is buried an				
					Insp ID #:96091
Provider: Rudy Cars	son	fechnician : Ro	nnie W Krampo	ta	
License #: MP0002036		License #: MTC	0001175	Expire	s: 7/31/2023
of Carson 1/	\mathcal{D}_{h}				
Rudy Carson	Y				

			SAFE Customer ID:0052	
	AN	AEROBIC ANCE PROVIDER & SEPTIC SERVICE	For Office Use:	
AEROBIC		ance PROVIDER & SEPTIC SERVICE u.SanAerobic.com	Permit No. <u>92941</u>	
			Brand / MFG / Model: <u>HOOT 500AN</u>	
			System Serial No. <u>N/A</u>	
2020 SERVICE C	ONTF	RACT v 3.0	Gate Code:	
This Agreement for Service between San Aerobic ("Service Provic		"Agreement") is hereby made on t	his <u>2nd</u> day of <u>April</u> , 2021, b	y and
SAN AEROBIC	and	JAMES JACKSON	("Own	1er"),
29540.SLUMBERWOOD_ FAIR OAKS RANCH, TX 78015		Owner/Owner's Rep Name	Company (If Commercial Contract)	
(210) 260-6587 SERVICE@SANAEROBIC.COM		30430 HUNTINGTO	N CIR	
TCEQ #MP0001901 TCEQ #OS0034608 TCEQ #MT0001542 TCEQ #MT0001763		Property Address		
		BULVERDE, TX 782	63	
**SERVICE CALL FEES NEVER APPLY UNDER THIS CONTRACT		City, State & Zip		
		(210) 497-3715	COMAL	
		Phone Alt. Phone/Fax	County / Permitting Agency	
			RIM ROCK	
		JAMESPJACKSON@MAC.0		
		Email	Subdivision	

collectively referred to herein as the "Parties" and individually as the, or a "Party". This Agreement shall not be entered into, nor commence until the day of LTO (License to Operate) issuance, if said system is new and awaiting license/permit; or for an existing, licensed system, this Agreement shall commence on the date chosen by Owner and designated in *paragraph 1B* on the second page of this Agreement.

WHEREAS, Owner desires to obtain the services of Service Provider; and

WHEREAS, Service Provider agrees to provide to Owner the services he/she so desires (the "Services");

NOW, THEREFORE, the Parties agree that Owner shall obtain and Service Provider shall provide the subject Services pursuant to the following terms and conditions:

TERMS AND CONDITIONS

1. SERVICES

- A. Owner and Service Provider hereby acknowledge and agree that Service Provider shall provide to Owner the following Services, in accordance with the terms and conditions of this Agreement as follows:
 - i. As maintenance provider for Owner's aerobic system, San Aerobic must provide and perform a complete system inspection, as required by County and Texas State Law, every four (4) months. Inspections include the following:
 - a.) Visual inspection by TCEQ licensed Maintenance Provider or Maintenance Tech.
 - b.) Sludge measurements of all accessible chambers (sludge measurements will be noted on every report).
 - c.) Determination if pumping is needed.
 - d.) Adjustments of electrical and mechanical equipment.
 - e.) Testing of sprinkler system, aerator, discharge pump and alarms.
 - f.) Filter and diffuser cleaning (if needed).
 - g.) Chlorine residual testing.

- h.) Attending to any misc. problems or issues which will need to be noted on inspection report and brought to Owner's attention.
- ii. San Aerobic is responsible for concluding every inspection with a written report of all findings, measurements and relevant observations, to be faxed to the appropriate county in a timely manner. A copy of the same report will be left with the Owner.

iii.	Owner's address and/or Bil	ling address:	Same as Property Address Above	
	Alternate Addres	s:		
	City	State	Zip code	

- B. Owner (or Owner's Representative) and Service Provider hereby acknowledge and agree that this Service Contract shall commence on the <u>2nd</u> day of <u>April</u>, 2021 {which shall be the day of LTO (License to Operate) issuance, if system is new and previously unlicensed}, and cease in completion on the <u>2nd</u> day of <u>April</u>, 20<u>23</u> (the "Completion Date").
 - i. This Service Contract shall cover a term of: ONE TWO FOUR FOUR YEARS
- C. An inspection of Owner's system will initiate upon the signing of this Agreement; thereafter inspections will occur every four (4) months (or every 2 months, if commercial system) from commencement date until either the expiration of this Agreement or renewal thereof.
 - i. Prior to an inspection, Service Provider will contact Owner by means of phone or email, in order to schedule the inspection. If Owner does not require advance notice, the Service Provider or Maintenance Tech can automatically arrive on or around due date and commence the inspection, without bother to Owner, as Owner is not required to be on premises, nor needed for any reason to complete the inspection. **Please let your service technician know if you do not require prior notification of inspections.**
- D. If this Service Contract covers a residential property, it includes an initial inspection upon signing this Agreement; and three (3) required inspections per year, every four months. If the designated property is commercial, then this Service Contract includes six (6) inspections per year, unless otherwise noted; there are exceptions, or properties which are classified as "Special" and, by law, require a different number of inspections. Often times, a very small business, would of course be "Commercial" Property, but only require the standard three (3) yearly inspections, typically required for a residential property. Any "Special Contracts" will be designated as such within this Service Contract, its terms defined and described in notations and/or in an addendum to this Service Contract.
- E. This Service Contract DOES NOT INCLUDE:
 - i. The cost of components needed to repair system, if and when repairs are needed.
 - ii. The cost of labor and time required to repair system, if and when repairs are necessary.
 - The costs of chlorine tablets or bleach service, as THIS IS A MONTHLY RESPONSIBILITY OF THE OWNER, TO OBTAIN CHLORINE TABS/BLEACH AND ADD TO SYSTEM. If requested, Service Provider can demonstrate to Owner, the correct procedure on maintaining system's chlorine/bleach supply.
 - iv. The cost of pumping system, when pumping is required and/or advised.
 - V. Any service/repairs required due to misuse or negligence.
 - vi. The cost of any laboratory testing.
 - vii. Service calls.

2. PRICING AND PAYMENT OF SERVICES

A. The cost for most single-system residences is \$300.00 for One (1) year; \$500.00 for Two (2) years; or \$800 for Four (4) years. More complex systems such as Norweco systems cost \$350.00 for One (1) year; \$600.00 for Two (2) years; or \$1,000 for Four (4) years. For residences with more than one septic system, these amounts would be multiplied by the number of systems existing on the property. Some residences shall be considered "Special Residences", and therefore will be quoted a price by Service Provider. The cost for businesses, schools, churches, or any other commercial property is dependent upon the number of inspections required per year, as some are

monthly, others being bi-monthly, every four (4) months, or every two (2) months—totaling six (6) inspections per year. Service Provider will quote a price for each commercial system. New systems installed by Rob Wise Construction qualify for half price: One (1) year for \$125.00 or Two (2) years for \$200.00.

- i. The agreed cost of this Service Contract is <u>\$ 500.00</u>; Payment in full is required upon both Parties signing this Agreement.
- B. System components, including but not limited to; pumps; compressors; aerators, sprinkler heads, tree floats, etc.; are not covered under this Agreement. If a component fails & needs repair or replacement, the Owner will be responsible for the cost of said component & its installation. Owner will be quoted and must approve repair costs before Service commences. On large jobs, a price will be quoted and agreed upon between parties prior to commencement.
- C. Owner and Service Provider hereby acknowledge and agree that Owner shall pay any and all invoices received from Service Provider by way of check, certified check, money order, credit card, cash, PayPal, or by such other means as Owner and Service Provider may agree in writing.

***SERVICE CALL FEES NEVER APPLY TO THIS CONTRACT

3. SERVICE CALLS & NECESSARY REPAIRS

If Owner has an alarm going off or some sort of emergency which requires immediate assistance, Service Provider will respond within twelve (12) hours at the most; and usually be able to get out to the system within 1-2 hours. There are no service call fees, even in an emergency type situation. If Owner's system needs adjustment (i.e. timer or sprinkler adjustment), but there is no immediate urgency, then Service Provider will respond with in 4 days. The ONLY time a service call fee would be charged, is if Owner insists on immediate service, despite there being no mechanical urgency.

Sometimes during a routine inspection or service call, safety issues arise. An example would be a cracked or broken lid that needs to be repaired or replaced right away. In this case, and in this case only, it would be necessary for the Service Provider to go ahead and make the necessary repairs, with or without prior notification to the Owner. This is the only time a Service would be rendered without the knowledge or consent of the Owner. In this type of situation, the Service Provider will leave an invoice at Owner's residence, detailing the charges and repairs made and/or parts replaced.

4. LIMITATION OF LIABILITY

- A. Subject to Owner's obligation to pay the Service Fee to Service Provider, either of the Parties liability in contract, tort, or otherwise (including negligence) arising directly out of or in connection with this Agreement or the performance or observance of either Party's obligations under this Agreement and every applicable part hereof shall be limited to the aggregate amount of the Service Fee of this Agreement.
- B. To the extent permitted by applicable law and subject to Owner's obligation to pay the Service Fee to Service Provider, in no event shall either Party be liable for any loss of profits, goodwill, loss of business, loss of data, or any other indirect or consequential loss or damage whatsoever.
- C. Nothing contained in Paragraph 5.B shall serve to limit or exclude either party's liability for death or personal injury arising from each Party's own negligence.

5. REPRESENTATIONS AND WARRANTIES

- A. Service Provider hereby represents and warrants to Owner that it shall perform any and all Services for Owner with reasonable care and skill and that the Services provided to Owner as contemplated in this Agreement shall not infringe or violate any intellectual property rights or other rights of any third parties.
- B. If Owner is, at any time, unsatisfied with any of the Services provided, the entire Fee of this Service Contract will be refunded, minus an appropriate fee for any inspections already performed. The cost of an inspection is the cost of the Service Contract Fee divided by the number of inspections it includes.

6. TRANFER OF OWNERSHIP

In the case that Owner is selling his/her property during the Maintenance period designated per this Agreement, Owner is not entitled to a refund of the Service Contract Fee. Instead, the remainder of Service Contract transfers to new Owner upon payment of a \$30 transfer fee.

7. MISCELLANEOUS

- A. Owner and Service Provider hereby acknowledge and agree that this Agreement shall become effective on the date first above written and shall continue, in full force and effect, unless and until it is terminated by either of the Parties hereto.
 - i. Either Party may terminate this Agreement upon written notice to the other Party if either Party to this Agreement is in breach of any of its obligations contained in this Agreement, and such breach is not remedied within fifteen (15) business days of written notice from the other Party.
 - Service Provider reserves the right to terminate this Agreement for any reason he deems appropriate or necessary; in which case the Service Contract Fee will be refunded in part or whole, depending on number of inspections already completed by Service Provider. The amount refunded shall be equal to the Service Contract Fee, minus the cost of individual inspection (if one or more have been completed), multiplied by the number of completed inspections. Cost per inspection is calculated by dividing Service Contract Fee divided by number of inspections required. In the case Service Provider chooses to terminate this Agreement, Owner shall be notified in writing.
- B. **MODIFICATION:** No modification of, or amendment to, this Agreement, nor any waiver of any rights under the Agreement, shall be effective unless in writing signed by the Party to be charged; and the waiver of any breach or default shall not constitute a waiver of any other right hereunder or any subsequent breach or default.
- C. **RELATIONSHIP OF THE PARTIES:** Owner and Service Provider hereby acknowledge and agree that as to the Services performed by Service Provider under this Agreement, Service Provider's employees, agents, and/or subcontractors shall be independent contractors of Service Provider. Nothing contained in this Agreement shall be deemed to create a partnership, joint venture, or relationship or otherwise between the Parties.
- D. **ENTIRE AGREEMENT:** This Agreement constitutes the entire agreement between Owner and Service Provider in respect of the subject matter herein and supersedes all previous negotiations, understandings, and agreements, verbal or written, with respect to any matters referred to herein. No amendment, change, qualification, waiver, cancellation, or termination of this Agreement shall be effective or binding unless executed in writing by the Party to be bound thereby. The failure at any time of any Party to insist upon strict performance of any provision of this Agreement shall not limit the ability of that Party to insist at any future time whatsoever upon the performance of the same or any other provision (except insofar as that Party may have given a valid and effective waiver and release).
- E. **COUNTERPARTS:** This Agreement may be executed in any number of counterparts, and by facsimile, and by email, each of which shall be considered an original and all of which, taken together, shall constitute one and the same instrument.
- F. **INSURANCE & HOME WARRANTY COMPANIES:** The Service Provider will provide service to those whose property has been insured, and furthermore being repaired or replaced by an insurance company.

HOWEVER, Service Provider will not work directly with an Owner who involves, or is represented by, a Home Warranty Company as a third party that may be ultimately financially responsible for any services performed on Owner's property by Service Provider; and that insists on paying Service Provider directly, instead of reimbursing Owner, after Owner has paid Service Provider. If an Owner has a Home Warranty Contract on item(s) which needs repair or replacement and wishes to employ the services of Service Provider, the Service Provider will engage in such services, provided that the Owner agrees to pay Service Provider in full upon completion of said job (or by due date mutually agreed upon prior to the rendering of services), out of his/her own pocket. Service Provider will not work directly with the Home Warranty Company in any manner, nor wait to be paid by such company, rather than being paid upon completion of services by Owner. Service Provider will provide job estimates/quotes to Home Warranty Company; However, Owner is fully financially obligated to pay Service Provider, in full, in a timely manner, regardless of whether or he/she has been reimbursed by Home Warranty Company. Obtaining reimbursement or payment for said "covered" services, from Home Warranty Company, is entirely between said company and Owner of property, and has no bearing on the prompt and full payment by Owner to Service Provider.

Owner MUST PAY Service Provider in full by due date; and Owner who is relying on, expecting and/or waiting for a Home Warranty Company to reimburse money paid to Service Provider, is doing so at his/her OWN RISK.

G. GATE CODES OR SPECIAL INSTRUCTIONS:

IN WITNESS WHEREOF, Owner and Service Provider have hereby signed and executed this Agreement as of the day and year first above written; and Agreement will become "active" and officially commence as of the date designated on page 2, paragraph 1B.

OWNER Owner/Owner's Rep Signature 50

Owner's Name (Printed)

SERVICE PROVIDER

Kristopher Wise SAN AEROBIC TCEQ Maintenance Provider License No. MP0001901

RETURN THIS CONTRACT via EMAIL to: SERVICE@SANAEROBIC.COM

SAN AEROBIC <u>WWW,SANAEROBIC.COM</u> (210) 260-6587