

## Comal County Environmental Health OSSF Inspection Sheet

Installer Name: JAJ Construction OSSF Installer #: OS0020500

1st Inspection Date: 04-30-2020 2nd Inspection Date: 5/11/21 3rd Inspection Date: \_\_\_\_\_

Inspector Name: B.Olvera Inspector Name: Connor Inspector Name: \_\_\_\_\_

Permit#: 110578 Address: 1291 Regency / Rebecca Crreek Park

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	04-30-20	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)		04-30-20		
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards		285.91(10) 285.30(b)(4) 285.31(d)				
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)		285.32(a)(1)				
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot		285.32(a)(3)				
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)		285.32(a)(5)				
6	PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(G)285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(A) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(i) 285.32(b)(1)(E)(ii)(I)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

04-30-2020 BMO      5/11/21    JC    no house

Tank Set Level No Leaks  
Operational  
Ready for Cover  
No House

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	SEPTIC TANK Tank(s) Clearly Marked SEPTIC TANK If Single Tank, 2 Compartments Provided with Baffle SEPTIC TANK Inlet Flowline Greater than 3" and " T " Provided on Inlet and Outlet SEPTIC TANK Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(E) 285.91(2) 285.32(b)(1)(F) 285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(I) 285.32(b)(1)(E)(i) 285.32(b)(1)(D) 285.32(b)(1)(C)(ii) 285.32(b)(1)(C)(i) 285.32(b)(1)(B) 285.32(b)(1)(A) 285.32(b)(1)(E)(iv)				
9	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used	04-30-20	285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)		04-30-20		
10	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
11	SEPTIC TANK Secondary restraint system provided SEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
12	SEPTIC TANK Tank Volume Installed						
13	PUMP TANK Volume Installed						
14	AEROBIC TREATMENT UNIT Size Installed			600			
15	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number			NuWater			
16	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo-transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				

**Comal County Environmental Health  
OSSF Inspection Sheet**

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

**Comal County Environmental Health  
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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)				
33	AEROBIC TREATMENT UNIT Is Aerobic Unit Installed According to Approved Guidelines.	04-30-20	285.32(c)(1)		04-30-20		
34	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions						
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.						
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump						
37	PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions						
38	PUMP TANK Secondary restraint system provided						
39	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried						

**Comal County Environmental Health  
OSSF Inspection Sheet**

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
40	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?	04-30-20	285.33(d)(2)(G)(iii)(II)285.33(d)(2)(G)(iii)(III)285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(ii) 285.33(d)(2)(G)(iii)(I)		04-30-20		
41	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed		285.33(d)(2)(G)(i) 285.33(d)(2)(A) 285.33(d)(2)(F)				
42	APPLICATION AREA Area Installed						
43	PUMP TANK Meets Minimum Reserve Capacity Requirements						
44	PUMP TANK Material Type & Manufacturer						
45	PUMP TANK Type/Size of Pump Installed						



# COMAL COUNTY

ENGINEER'S OFFICE

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

Permit Number: 110578  
Issued This Date: 03/31/2020  
This permit is hereby given to: Maricela Tellez

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

1291 REGENCY  
SPRING BRANCH, TX 78070

Subdivision: Rebecca Creek Park  
Unit: First Filing  
Lot: 13  
Block: 7  
Acreage:

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic  
Surface Irrigation

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

Call (830) 608-2090 to schedule inspections.

\*\*\* COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH \*\*\*  
APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN  
ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE

Date \_\_\_\_\_ Permit # 110578

Owner Name Maricela Tellez Agent Name Hoyt S. Dentler  
Mailing Address 1120 Ridgewood Dr Agent Address \_\_\_\_\_  
City, State, Zip Bulverde, TX 78163 City, State, Zip \_\_\_\_\_  
Phone # 210 303 1330 Phone # 210 414 6603  
Email mtellez98@outlook.com Email hoyt@grt.com

All correspondence should be sent to:  Owner  Agent  Both Method:  Mail  Email

Subdivision Name First Filling Rebecca Creek Park Unit \_\_\_\_\_ Lot 13 Block 7

Acreage/Legal \_\_\_\_\_

Street Name/Address 1291 Regency City Spring Branch Zip 78020

**Type of Development:**

Single Family Residential

Type of Construction (House, Mobile, RV, Etc.) Double Wide Manufactured Home

Number of Bedrooms 3

Indicate Sq Ft of Living Area 22500

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Non-Single Family Residential

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

Type of Facility \_\_\_\_\_

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

Restaurants, Lounges, Theaters - Indicate Number of Seats \_\_\_\_\_

Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds \_\_\_\_\_

Travel Trailer/RV Parks - Indicate Number of Spaces \_\_\_\_\_

Miscellaneous \_\_\_\_\_

Estimated Cost of Construction: \$ 60,000 (Structure Only)

Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement?

Yes  No (If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement)

Source of Water  Public  Private Well

Are Water Saving Devices Being Utilized Within the Residence?  Yes  No

By signing this application, I certify that:

- The completed application and all additional information submitted does not contain any false information and does not conceal any material facts.
- Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities..
- I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order.
- I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.

Maricela Tellez  
Signature of Owner

01-31-20  
Date

\*\*\* COMAL COUNTY OFFICE OF ENVIRONMENTAL HEALTH \*\*\*  
APPLICATION FOR PERMIT FOR AUTHORIZATION TO CONSTRUCT AN  
ON-SITE SEWAGE FACILITY AND LICENSE TO OPERATE

Planning Materials & Site Evaluation as Required Completed By Hoyt Seidensticker

System Description Aerobic with Spray Distribution

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

Tank Size(s) (Gallons) 600 GPD Unit Absorption/Application Area (Sq Ft) 3961.11

Gallons Per Day (As Per TCEQ Table III) 240

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

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

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

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

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

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

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

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

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

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

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

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

Is this property within an incorporated city?  Yes  No

If yes, indicate the city: \_\_\_\_\_

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By signing this application, I certify that:

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

Signature of Designer Hoyt Seidensticker

Date 3-18-2020



ON-SITE SEWAGE FACILITY  
Site Evaluation Report Information

Date: 1/31/2020

**Site Evaluator Information:**

**Applicant Information:**

Name: Hoyt Seidensticker

Name: Maricela Tellez

License OS0008771 Expires 8/31/2020

Address: 1120 Ridgeway Drive

Company: Land Stewardship Services, LLC

City: Bulverde State: Texas

Zip: 78163 Address: 27115 Bent Trail

Phone: 210-303-1330

City: Boerne State: Texas Zip: 78006

Phone: (210) 414-6603 Fax: \_\_\_\_\_

**Property Location:**

Lot: 13 Block: 7 Sub.: First Filling Rebecca Creek Park

**Installer information:**

Street/Road Address: 1291 Regency

Name: Unknown

City: Spring Branch State: Texas

Zip: 78070 Company: \_\_\_\_\_

Unincorporated Area? Y or N

y

Address: \_\_\_\_\_

Additional information \_\_\_\_\_

City: \_\_\_\_\_ State: Texas Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Schematic of Lot or Tract**

**Show:**

Compass North, adjacent streets, property lines, property lines, property dimensions, location of building easements, water lines, and other surface improvements where known (drainage, patios, sidewalks).

Location of existing or proposed water wells within 150 feet of property.

Indicate slope or show contour lines from the structure to the farthest location of the proposed soil absorption or irrigation area.

Location of soil borings or dug pits (show location with respect to a known reference point).

Location of natural, constructed, or proposed drainage ways, (streams, ponds, lakes, rivers,

high tide of salt water bodies) water impoundments areas, cut or fill bank, sharp slopes and breaks.

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**SITE DRAWING**

Lot Size: \_\_\_\_\_ acres

SEE ATTACHED

Signature of Site Evaluator



Site Evaluator License No: OS0008771

# ON-SITE SEWAGE FACILITY Soil Evaluation Report Information

Date Soil Survey Performed: 1/31/2020  
 Site Location: 1291 Regency  
 Name of Site Evaluator: Hoyt Seidensticker Registration Number: QS0008771  
 Proposed Excavation Depth: n/a County: Comal

**Requirements:**

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

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

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### Features of Site Area

- Presence of 100 year flood zone Yes \_\_\_ No x
- Presence of adjacent ponds, streams, water improvements Yes \_\_\_ No x
- Existing or proposed water well in nearby area Yes \_\_\_ No x
- Organized sewage service available to lot or tract Yes \_\_\_ No x
- Recharge feature within 150 feet Yes \_\_\_ No x

By my signature, I hereby certify that the information provided in this report is based on my site observations and are accurate to the best of my ability.  
 I understand that any misrepresentation of the information contained in this report may be grounds to revoke or suspend my license. The site evaluation determined the site is suitable for a spray Distribution disposal system with Aerobic treatment  
 According to table XIII, the site is suitable for this proposed system. A copy of Table XIII has been given to the property owner to inform them of other alternatives based upon the result of this site evaluation

Hoyt Seidensticker  
 Signature of Site Evaluator

3-18-2020  
 Date

YCB



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THE COUNTY OF COMAL  
STATE OF TEXAS

AFFIDAVIT

COUNTY ENGINEER

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

I

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (TCEQ) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), §5.012 and §5.013, gives the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety Code, requires 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.

II

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

Lot 13, Block 7, First Filling, Rebecca Creek Park

The property is owned by (owner as per deed) Maricela Tellez

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

Upon sale or transfer of the above-described property, the permit for the OSSF shall be transferred to the buyer or new owner. A copy of the planning materials for the OSSF may be obtained from (insert name of permitting authority).

WITNESS BY HAND(S) ON THIS 31 DAY OF January, 2020.

X Maricela Tellez Leon  
Owner(s) signature(s)

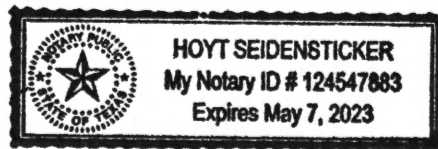
X Maricela Tellez Leon  
Owner (s) Printed Name(s)

Owner(s) signature(s)

Owner (s) Printed Name(s)

SWORN TO AND SUBSCRIBED BEFORE ME ON THIS 31 DAY OF January, 2020.

Hytt Seidensticker  
Notary Public Signature



Filed and Recorded  
Official Public Records  
Bobbie Koepf, County Clerk  
Comal County, Texas  
03/19/2020 03:56:33 PM  
LAURA 1 Page(s)  
202006010884

Bobbie Koepf

WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

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

Permit/License Number \_\_\_\_\_  
Customer Maricela Teitez  
Site Address 1291 Regency, Spring Branch, TX 78070  
City \_\_\_\_\_ Zip \_\_\_\_\_  
Mailing Address 1120 Ridgewood, Pine Bluff, AR 71667  
County Conz Map # \_\_\_\_\_  
Phone 210 303 1770  
Email \_\_\_\_\_

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**I. General:** This Work for Hire Agreement (hereinafter referred to as "Agreement") is entered into by and between Maricela Teitez (hereinafter referred to as "Customer") and Block Creek Aerobic Services, LLC. By this agreement, Block Creek Aerobic Services, LLC and its employees (hereinafter inclusively referred to as "Contractor") agree to render services at the site address stated above, as described herein, and the Customer agrees to fulfill his/her/their responsibilities, as described herein. MAR 28 2020  
COUNTY ENGINEER

**II. Effective Date:**

This Agreement commences on LTO and ends on \_\_\_\_\_ for a total of two (2) years (initial agreement) or one (1) year (thereafter). If this is an initial agreement (new installation), the Customer shall notify the Contractor within two (2) business days of the system's first use to establish the date of commencement. If no notification is received by Contractor within ninety (90) days after completion of installation or where county authority mandates, the date of commencement will be the date the "License to operate" (Notice of Approval) was issued by the permitting authority. This agreement may or may not commence at the same time as any warranty period of installed equipment, but in no case shall it extend the specified warranty.

**III. Termination of Agreement:**

This Agreement may be terminated by either party for any reason, including for example, substantial failure of either party to perform in accordance with the terms of this Agreement, without fault or liability of the terminating party. The terminating party must provide written notice to the non-terminating party thirty (30) days prior to the termination of this Agreement. If this Agreement is terminated, Contractor will be paid at the rate of \$75.00 per hour for any work performed and for which compensation has not been received. After the deduction of all outstanding charges, any remaining monies from prepayment for services will be refunded to customer within thirty (30) days of termination of this Agreement. Either party terminating this Agreement for any reason, including non-renewal, shall notify in writing the equipment manufacturer and the appropriate regulatory agency a minimum of thirty (30) days prior to the date of such termination. Nonpayment of any kind shall be considered breach of contract and a termination of contract.

**IV. Services:**

Contractor will:

- a. Inspect and perform routine upkeep on the On-Site Sewage Facility (hereinafter referred to as OSSF) as recommended by the treatment system manufacturer, and required by state and/or local regulation, for a total of three visits to site per year. The list of items checked at each visit shall be the: control panel, Electrical circuits, timer, Aeration including compressor and diffusers, CFM/PSI measured, lids safety pans, pump, compressor, sludge levels, and anything else required as per the manufacturer.
- b. Provide a written record of visits to the site by means of an inspection tag attached to or contained in the control panel.
- c. Repair or replace, if Contractor has the necessary materials at site, any component of the OSSF found to be failing or inoperative during the course of a routine monitoring visit. If such services are not covered by warranty, and the service(s) cost less than \$100.00, Customer hereby authorizes Contractor to perform the service(s) and bill Customer for said service(s). When service costs are greater than \$100.00, or if contractor does not have the necessary supplies at the site, Contractor will notify Customer of the required service(s) and the associated cost(s). Customer must notify Contractor of arrangements to affect repair of system with in two (2) business days after said notification.
- d. Provide sample collection and laboratory testing of TSS and BOD on a yearly basis (commercial systems only).
- e. Forward copies of this Agreement and all reports to the regulatory agency and the Customer.
- f. Visit site in response to Customer's request for unscheduled services within forty-eight (48) hours of the date of notification (weekends and holidays excluded) of said request. Unless otherwise covered by warranty, costs for such unscheduled responses will be billed to Customer.

**V. Disinfection:**

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

dMTL  
Customer's Initials

BS  
Contractor's Initials

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**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 Contractor immediately of any and all alarms, and/or any and all problems with, including failure of, the OSSF.

e. Provide, upon request by Contractor, water usage records for the OSSF so that the Contractor can perform a proper evaluation of the performance of the OSSF.

f. Allow for samples at both the inlet and outlet of the OSSF to be obtained by Contractor for the purpose of evaluating the OSSF's performance. If these samples are taken to a laboratory for testing, with the exception of the service provided under Section IV (d) above, Customer agrees to pay Contractor for the sample collection and transportation, portal to portal, at a rate of \$35.00 per hour, plus the associated fees for laboratory testing.

g. Prevent the backwash or flushing of water treatment or conditioning equipment from entering the OSSF.

h. Prevent the condensation from air conditioning or refrigeration units, or the drains of icemakers, from hydraulically overloading the aerobic treatment units. Drain lines may discharge into the surface application pump tank if approved by system designer.

i. Provide for pumping and cleaning of tanks and treatment units, when and as recommended by Contractor, at Customer's expense.

j. Maintain site drainage to prevent adverse effects on the OSSF.

k. Pay promptly and fully, all Contractor's fees, bills, or invoices as described herein.

**IX. Access by Contractor:**

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

**X. Limit of Liability:**

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

**XI. Indemnification:**

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

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

MTL  
Customer's Initials

BS  
Contractor's Initials

MAR 28 2020

COUNTY ENGINEER

Customer hereby waives its right of recourse as to any Indemnatee 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 Indemnatee; or, (2) the willful misconduct of such Indemnatee. Upon irrevocable acceptance of this Indemnification obligation, Customer, in its sole discretion, shall select and pay counsel to defend Indemnitees of and from any action that is subject to this Indemnification provision. Indemnitees hereby covenant not to compromise or settle any claim or cause of action for which Customer has provided Indemnification without the consent of Customer.

**XII. Severability:**

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

**XIII. Fee for Services:**

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

**XIV. Payment:**

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

**XV. Application or Transfer of payment:**

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

**XVI. Entire Agreement:**

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

*Burt S. Indestick*

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

*Mareela Jellz Acin*

Customer Signature

Date

MTL  
Customer's Initials

BS  
Contractor's Initials

3/18/2020  
6:50 AM  
Aerobic with Spray  
Distribution System

# ON-SITE SEWAGE FACILITY DESIGN CRITERIA

Maricela Tellez

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### Property Information:

St. Address: 1291 Regency  
City: Spring Branch State: Texas  
Zip code: 78070

### Predicted Quantity of Sewage (Q)

Water Saving Devices in Home (y/n): yes  
Gallons/day (Q): 240  
Greywater included (yes/no): yes

### Rate of Adsorption (Ra)

Application rate (g/sq. ft): 0.064  
Minimum Adsorptive Area (sq. ft.): 3750

### Aerobic Unit

Required size of aerobic unit: 360 gpd  
Pretreatment Tank (gallons): 353  
Class 1 Aerobic Unit: NuWater 550-PC-400PT  
Pump tank total capacity (gal): 768  
Chlorination: Liquid installed in Tank  
Pump Switch operation: Float system  
Dosing cycle quantity (gals): Varied  
Cycling time: night time  
Pump size and capacity: Franklin E-Series 20 GPM

### House Information

No. of Bedrooms: 2  
Sq. footage (Approx.): <2500  
gallons per day 240  
Water Supply: public

### Supply Line from House

Length of supply line (approx. ft): 5  
Type of supply line: SCH 40 PVC  
Size of Supply line (in): 3 or 4

### Supply Line For Spray Irrigation System

Length of supply line (approx. ft): 151  
Type of supply line: SCH 40 PVC  
Size of supply line (in): 1

### Disposal Area per this System

$\pi (29)^2/2 = 1320.37$   
 $\pi (29)^2/2 = 1320.37$   
 $\pi (29)^2/2 = 1320.37$

Total irrigated area (sq. ft.): 3961.11

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

Hoyt Seidensticker  
Hoyt Seidensticker, R.S. No. 3588  
Land Stewardship Services, LLC, 27115 Bent Trail, Boerne, Texas 78006  
Cell (210) 414-6603,

3-18-2020  
Date



Effective Immediately: If any change(s) are made that require a revision to this design, a \$150.00 fee will be assessed. This includes, but not limited to, change(s) in the house size, number of bedrooms, location of house or one type of system to another.

3/18/2020

6:50 AM

Aerobic with Spray  
Distribution System

# ON-SITE SEWAGE FACILITY DESIGN CRITERIA

Maricela Tellez

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## Head Pressure

Elevation Head:	<u>4</u>
Pressure Head:	<u>92</u>
Friction Head:	<u>6.04</u>
Total head:	<u>102</u>

## Sprinkler Head Information

K-Rain sprinkler head PROPLUS, COUNTY ENGINEER

low angle nozzle

No. 3 @40psi                      GPM: 3.1

Number of sprinkler heads: 3

Gallons per minute: 9.3

A class 1 aerobic wastewater treatment unit, chlorination and spray distribution system will be designed for this location. Wastewater from the residence will flow to a pretreatment/trash tank, then to the treatment unit. Treated effluent will be disinfected by a LBC Manufacturing "EZ-Tank" Gravity Flow Liquid Bleach Chlorinator in the pump tank, before being disposed of through above ground sprinkler heads. All warning systems shall be installed with the aerobic unit

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

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

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

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

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

Hoyt Seidensticker, R.S. No. 3588

Land Stewardship Services, LLC, 27115 Bent Trail, Boerne, Texas 78006

Cell (210) 414-6603,

3-18-2020

Date





site Map

Scale 1" = 30'

Aerobic with Spray Distribution system

Maricela Tellez

lot 13, BLock 7

First Filling Rebecca Creek Park

1291 Regency

Spring Branch, Texas 78070

Comal County

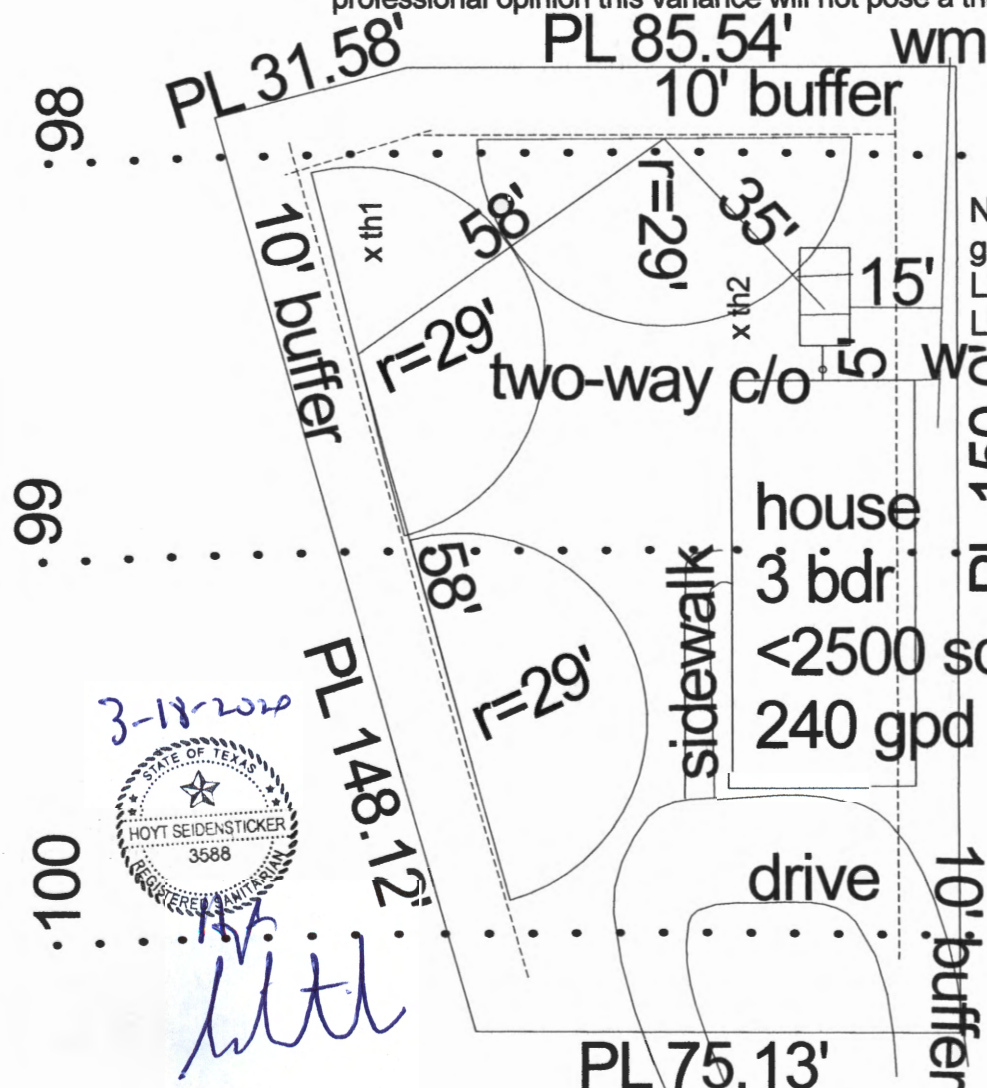
Risers must be permanently fastened to the tank lid or cast into the tank. The connection between the riser and the tank lid must be watertight. Risers must be fitted with removable watertight caps and protected against unauthorized intrusions by either a padlock, a cover that can be removed with specialized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

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

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

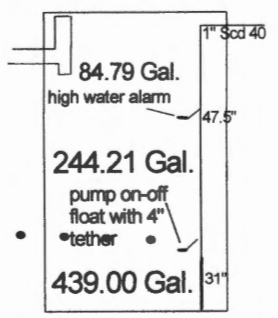
Surface application should be done between the hours of 12:00 midnight and 5:00 a.m.

I hereby request a variance to the 20 foot setback to property lines as required by Comal County Order to a 10' setback to property lines as required by TCEQ, Chapter 285 and equivalent protection will be maintained by adding a battery backup to the timer clock or photo cell activated timer to assure sprayers to only spray during the predawn hours. In my professional opinion this variance will not pose a threat to the environment or public health.



All external electrical lines must be in gray conduit RECEIVED

NuWater 550-PC-400PT 600 MAR 28 2020 gpd Aerobic Unit with a LBC "EZ-Tank" Gravity Flow COUNTY ENGINEER Liquid Chlorinator



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

This design complies with all provisions of the existing Edwards Contributing Zone Plan and their is not a recharge feature within 150' of the proposed septic system.

100 yr flood plain does not exist on this tract

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



Handwritten signature and date 3-18-2020.

Regency

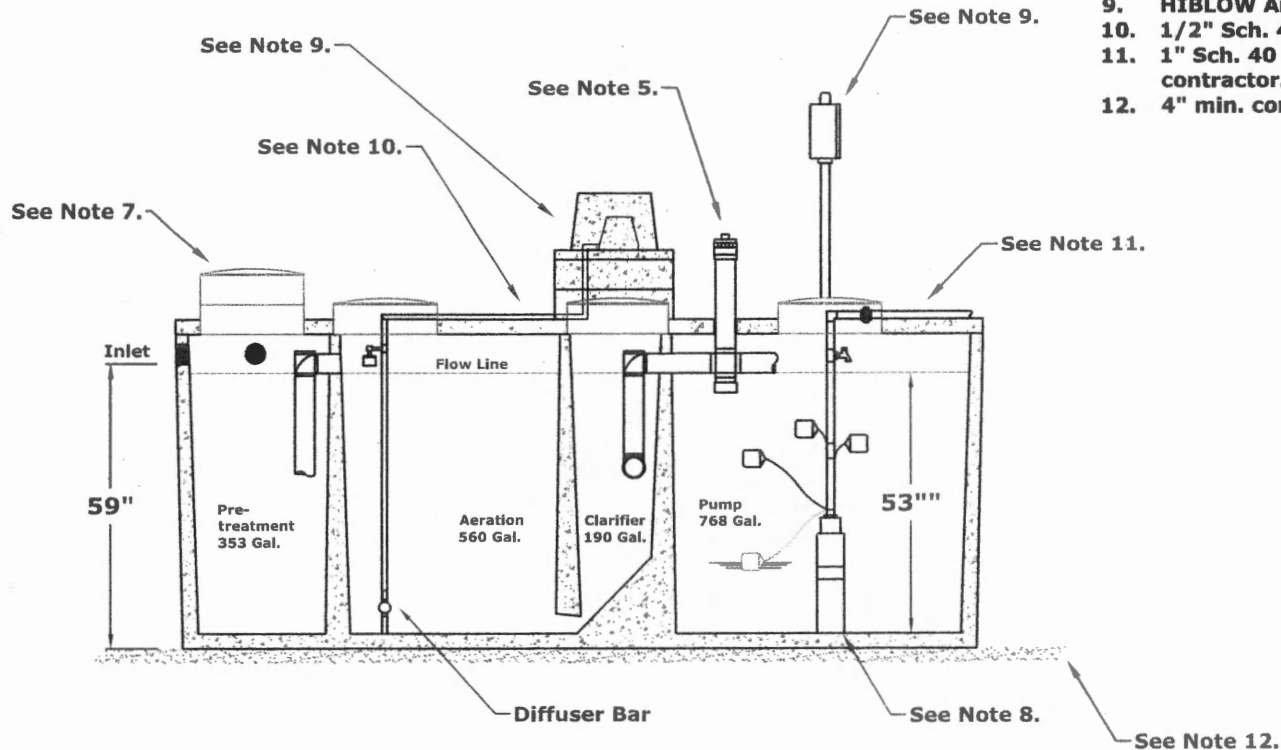
# Assembly Details

OSSF

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## GENERAL NOTES:

1. Plant structure material to be precast concrete and steel.
2. Maximum burial depth is 30" from slab top to grade.
3. Weight = 14,900 lbs.
4. Treatment capacity is 600 GPD. Pump compartment set-up for a 360 GPD Flow Rate (4 bedroom, < 4,000 sq/ft living area). Please specify for additional set-up requirements. BOD Loading = 1.62 lbs. per day.
5. Standard tablet chlorinator or Optional Liquid chlorinator. NSF approved chlorinators (tablet & liquid) available.
6. 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.
7. 20" Ø access riser w/ lid (Typical 4). Optional extension risers available.
8. 20 GPM 1/2 HP, high head effluent pump.
9. 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



### DIMENSIONS:

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

### MINIMUM EXCAVATION DIMENSIONS:

Width: 76"  
Length: 176"

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

Model: B-550-PC-400PT

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

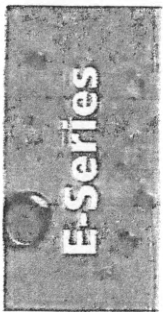
#### Scale:

\* All Dimensions subject to allowable specification tolerances.

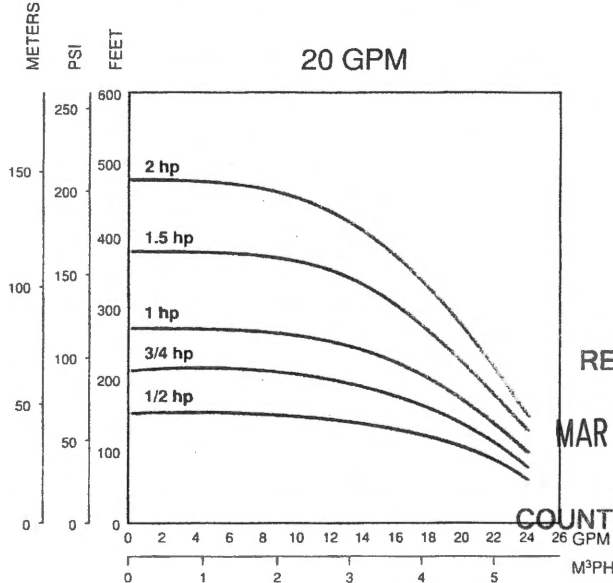
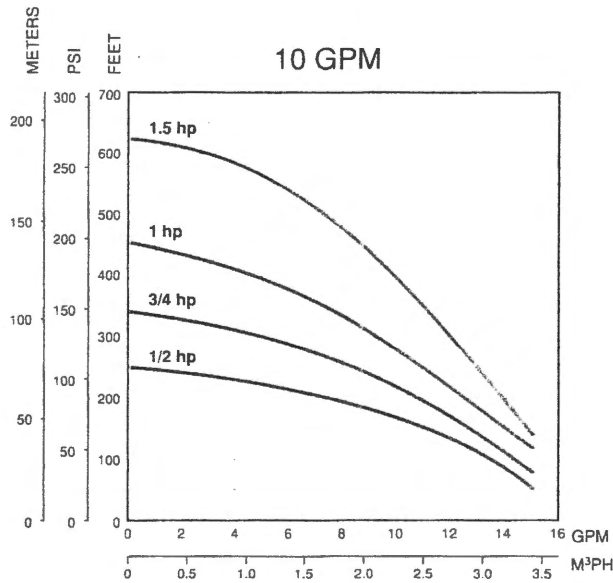
Dwg. #: ADV-B550-3

**Advantage**  
Wastewater Solutions llc

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



## Thermoplastic Performance



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## Thermoplastic Units Ordering Information

1/2 - 1.5 HP Single-Phase Units						
Order No.	Model	GPM	HP	Volt	Wire	Wt.
94741005	10FE05P4-2W115	10	1/2	115	2	24
94741010	10FE05P4-2W230	10	1/2	230	2	24
94741015	10FE07P4-2W230	10	3/4	230	2	28
94741020	10FE1P4-2W230	10	1	230	2	31
94741025	10FE15P4-2W230	10	1.5	230	2	46
94742005	* 20FE05P4-2W115 *	20	1/2	115	2	25
94742010	20FE05P4-2W230	20	1/2	230	2	25
94742015	20FE07P4-2W230	20	3/4	230	2	28
94742020	20FE1P4-2W230	20	1	230	2	31
94742025	20FE15P4-2W230	20	1.5	230	2	40

Thermoplastic 1/2 - 2 HP Pump Ends						
Order No.	Model	GPM	HP	Volt	Wire	Wt.
94751005	10FE05P4-PE	10	1/2	N/A	N/A	6
94751010	10FE07P4-PE	10	3/4	N/A	N/A	7
94751015	10FE1P4-PE	10	1	N/A	N/A	8
94751020	10FE15P4-PE	10	1.5	N/A	N/A	12
94752005	20FE05P4-PE	20	1/2	N/A	N/A	6
94752010	20FE07P4-PE	20	3/4	N/A	N/A	7
94752015	20FE1P4-PE	20	1	N/A	N/A	8
94752020	20FE15P4-PE	20	1.5	N/A	N/A	10
94752025	20FE2P4-PE	20	2	N/A	N/A	11

# FPS E series

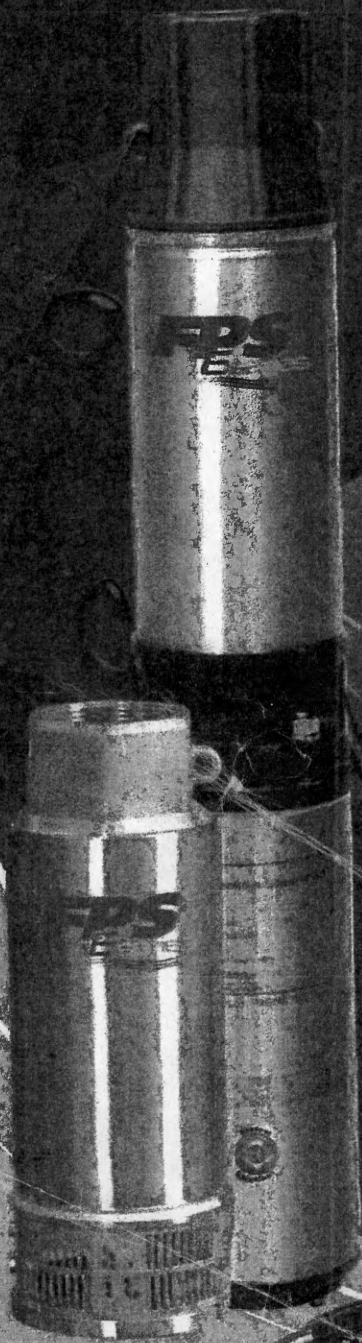
## High Head Filtered Effluent Pump


### Applications:

- Filtered Effluent Service
- Aeration
- Ornamental Fountains/Waterfalls

### Features:

- Ideal for filtered effluent pumping applications.
  - Stainless Steel or Thermoplastic discharge and motor bracket are tough and non-corrosive. Both materials are highly resistant to damage by minerals, metals and other substances typically found in water.
  - Heavy duty, 300 volt, 10' SJ00W motor leads.
  - Ceramic bearing sleeve has time proven durability for years of reliable service.
  - Hex rubber bearing has extra large surface assuring shaft stability and multiple flow channels keeping particles away from bearing surfaces.
  - Proven Noryl<sup>®</sup> staging allows close tolerances and increased performance.
  - Stainless steel up thrust washer prevents excessive wear in severe applications.
  - Removable built in check valve.
  - Powered by Franklin Electric submersible motor.
- Noryl is a Registered Trademark of G.E.



 **Franklin Electric**

# PROPLUS™

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

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

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

## MODELS

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

OTHER OPTIONS: ADD TO PART NUMBER

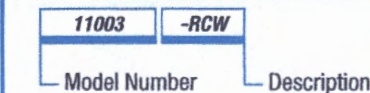
- CV Check Valve
- LA Low Angle Nozzle
- NN No Nozzle
- RCW ProPlus for Reclaimed Water w/Low Angle Nozzle

## EASY ARC SETTING

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



### HOW TO SPECIFY



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

1.800.735.7246 | www.krain.com

## SPECIFICATIONS

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

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## PERFORMANCE DATA

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

METRIC			
NOZZLES	PRESSURE KPA	RADIUS METERS	FLOW L/M MIN
#0.5	206	2.0	8.5
	275	3.0	8.8
	345	3.5	8.8
	413	4.0	9.1
#0.75	206	2.0	8.8
	275	3.0	9.1
	345	3.5	9.4
	413	4.0	9.8
#1	206	2.0	9.8
	275	3.0	10.1
	345	3.5	10.4
	413	4.0	10.7
#2	206	2.0	11.3
	275	3.0	12.2
	345	3.5	12.8
	413	4.0	13.1
#2.5 PRE-INSTALLED	206	2.04	11.6
	275	2.72	11.9
	345	3.40	12.2
	413	4.08	12.5
#3	206	2.0	11.6
	275	3.0	11.9
	345	3.5	12.5
	413	4.0	12.8
#4	206	2.0	13.1
	275	3.0	13.4
	345	3.5	14.0
	413	4.0	14.9
#6	206	3.0	13.7
	275	3.5	14.0
	345	4.0	14.6
	413	5.0	14.9
#8	206	3.0	12.8
	275	3.5	13.7
	345	4.0	14.8
	413	5.0	15.3

## LOW ANGLE DATA

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

## METRIC

NOZZLES	PRESSURE KPA	RADIUS METERS	FLOW L/M MIN
#1	207	2.04	6.71
	275	2.72	7.32
	344	3.40	7.92
	413	4.08	8.53
#3	207	2.04	8.84
	275	2.72	9.75
	344	3.40	10.67
	413	4.08	11.58
#4	207	2.04	9.45
	275	2.72	10.36
	344	3.40	11.28
	413	4.08	11.58
#6	275	2.72	11.58
	344	3.40	12.19
	413	4.08	12.80
	482	4.76	13.41

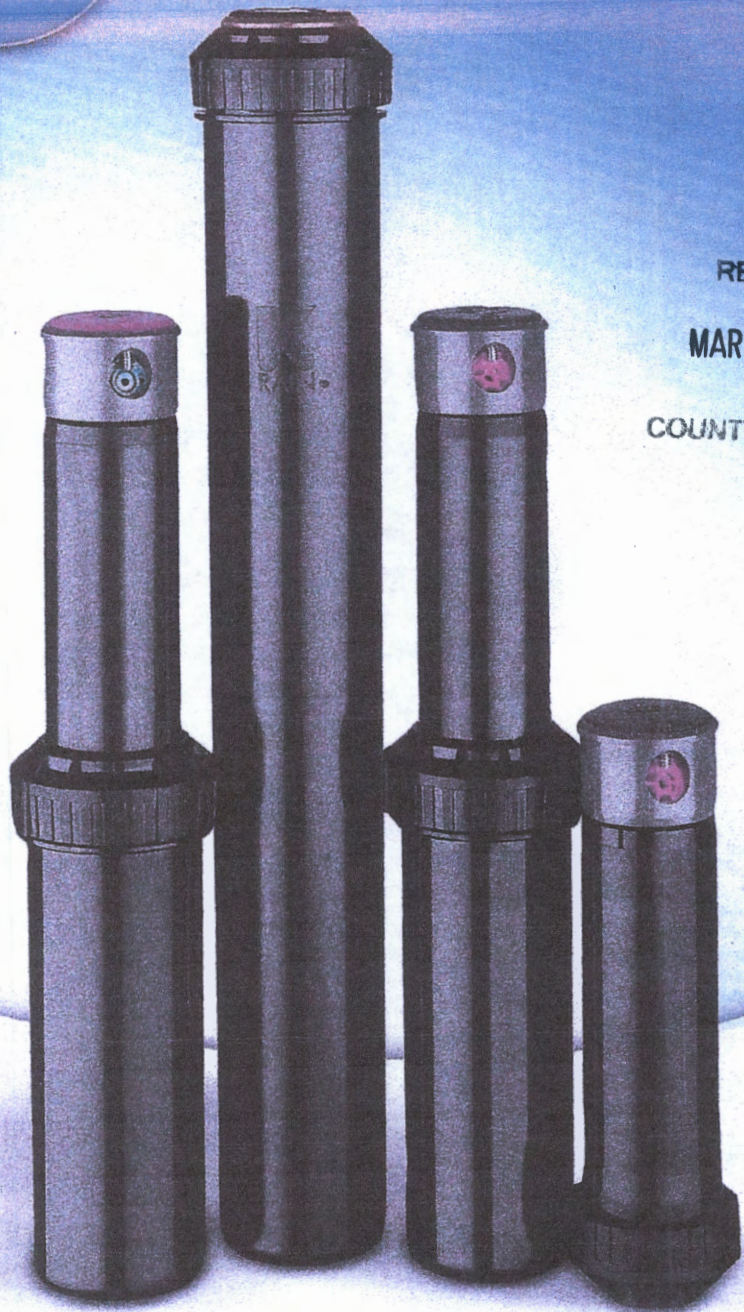
Data represents test results in zero wind. Adjust for local conditions.  
Radius may be reduced with nozzle retention screw.

# PROPLUS™

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*The ProPlus™ is packed with features that ensure reliability, saving the installer time, money and needless frustration.*

- ▶ **Revolutionary Patented Easy Arc Set** – Simplified arc set allows for wet or dry adjustment in seconds.
- ▶ **5" Riser** – Perfect for grasses with thick thatch.
- ▶ **3/4" Inlet** – Replaces all standard rotors.
- ▶ **2N1 Adjustable or Continuous Rotation** – Provides a full range adjustment from 40° to a continuous full circle.
- ▶ **Patented Arc Set Degree Markings** – Clearly indicates the current watering pattern and simplifies arc set adjustment.
- ▶ **Arc Memory Clutch** – Prevents internal gear damage and returns rotor to its prior setting automatically if nozzle turret is forced past its stop.
- ▶ **Time Proven Patented Reversing Mechanism** – Assures continuous reverse and return...over a 20 year history.
- ▶ **Ratcheting Riser** – Allows for easy adjustment of your left starting position with a simple turn of the riser.
- ▶ **Rubber Cover** – Seals out dirt and increases product durability.
- ▶ **Wide Selection of Nozzles** – Including standard and low angle, provides flexibility in system design.
- ▶ **Optional Check Valve** – Prevents low head drainage.

**K**  
**RAIN.**

**IRRIGATION SOLUTIONS  
WORLDWIDE™**

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②  
3+1  
TC

**NOTICE OF CONFIDENTIALITY RIGHTS: IF YOU ARE A NATURAL PERSON, YOU MAY REMOVE OR STRIKE ANY OR ALL OF THE FOLLOWING INFORMATION FROM ANY INSTRUMENT THAT TRANSFERS AN INTEREST IN REAL PROPERTY BEFORE IT IS FILED FOR RECORD IN THE PUBLIC RECORDS: YOUR SOCIAL SECURITY NUMBER OR YOUR DRIVER'S LICENSE NUMBER.**

**GENERAL WARRANTY DEED RETAINING A VENDOR'S LIEN**

STATE OF TEXAS §  
COUNTY OF COMAL §

KNOW ALL MEN BY THESE PRESENTS:

THAT **KRISTY A. ROBINSON**, not joined herein by my spouse because the herein conveyed property forms no part of any property claimed as homestead, hereinafter called Grantor, for and in consideration of the sum of TEN AND NO/100 (\$10.00) DOLLARS cash and other good and valuable consideration in hand paid by **MARICELA TELLEZ**, a single person whose address is 1120 Ridgeway Drive, Bulverde, Texas 78163, hereinafter called Grantee, the receipt and sufficiency of which is hereby acknowledged and confessed, and the further consideration of the execution and delivery by Grantee herein of one certain Promissory Note in the principal sum of **ELEVEN THOUSAND, NINE HUNDRED AND NO/00 (\$11,900.00) DOLLARS**, of even date herewith, payable to the order of **KRISTY A. ROBINSON**, bearing interest as therein stated, payable as it accrues, the principal and interest thereof being due and payable as therein provided, said Notes containing the usual various accelerating maturity and attorney's fee clauses in case of default and being secured by a vendor's lien retained herein upon the hereinafter described and conveyed property, and being also secured by a Deed of Trust of even date herewith to **STEVE D. TAYLOR, Trustee**, to which

HAS GRANTED, SOLD and CONVEYED, and by these presents does GRANT, SELL and CONVEY unto the said Grantee, the following described property, to-wit:

**Lot 13, Block 7, FIRST FILING, REBECCA CREEK PARK SUBDIVISION, Comal County, Texas, being that property more particularly described in Volume 626, page 411, of the Deed Records, Comal County, Texas.**


This conveyance is made subject to, all and singular, the restrictions, conditions, easements and covenants, if any, applicable to and enforceable against the above described property as reflected by the records of the County Clerk of Comal County, Texas.

It is expressly agreed and stipulated that a vendor's lien is retained in favor of the payee in said Note against the above described property, premises and improvements, until said Note, and all interest thereon, is fully paid according to the face and tenor, effect and reading thereof, when this deed shall become absolute.

TO HAVE AND TO HOLD the above described premises, together with, all and singular, the rights and appurtenances thereto in anywise belonging unto the said Grantee, Grantee's heirs and assigns forever.

Grantor does hereby bind Grantor, Grantor's heirs, executors, administrators and successors to warrant and forever defend, all and singular, the said premises unto the said Grantee, Grantee's heirs, executors, administrators, successors and assigns, against every person whomsoever claiming or to claim the same or any part thereof.

DATED this the 25<sup>th</sup> day of **February, 2015**

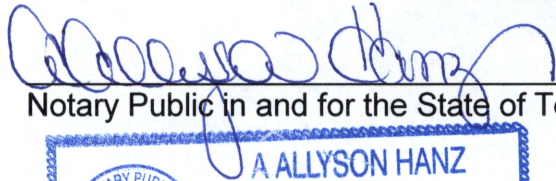
  
**KRISTY A. ROBINSON**



STATE OF TEXAS  
COUNTY OF COMAL

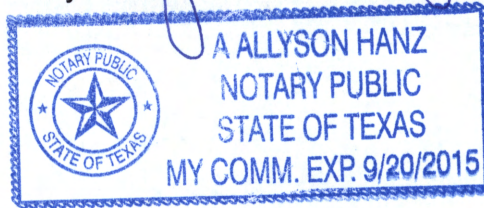
§  
§

This instrument was acknowledged before me on this the 25<sup>th</sup> day of **February**,  
**2015**, by **KRISTY A. ROBINSON**.



Notary Public in and for the State of Texas.

3.DEEDS



**FILED AND RECORDED**

RECEIVED

**MAR 28 2020**

**COUNTY ENGINEER**

Instrument Number: *201506008203*

Recording Fee: 34.00

Number Of Pages: 4

Filing and Recording Date: 03/06/2015 4:20PM

Deputy: LAURA JENDRUSCH

I hereby certify that this instrument was FILED on the date and time stamped hereon and RECORDED in the OFFICIAL PUBLIC RECORDS of Comal County, Texas.



*Bobbie Koepf*

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**Bobbie Koepf**, County Clerk  
Comal County, Texas

NOTICE: It is a crime to intentionally or knowingly file a fraudulent court record or instrument with the clerk.

**DO NOT DESTROY** - *Warning, this document is part of the Official Public Record.*

OSSF DEVELOPMENT APPLICATION CHECKLIST

Staff will complete shaded

Items Date Received	Initials

Permit Number RECEIVED

MAR 28 2020

Instructions:

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

OSSF Permit

Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate

Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer

Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist of a scaled design and all system specifications.

Required Permit Fee - See Attached Fee Schedule

Copy of Recorded Deed

Surface Application/Aerobic Treatment System

Recorded Certification of OSSF Requiring Maintenance/Affidavit to the Public

Signed Maintenance Contract with Effective Date as Issuance of License to Operate

I affirm that I have provided all information required for my OSSF Development Application and that this application constitutes a completed OSSF Development Application.

Mareala Selby Acin  
Signature of Applicant

01-31-20  
Date

<input checked="" type="checkbox"/> COMPLETE APPLICATION
Check No. _____ Receipt No. _____

<input type="checkbox"/> INCOMPLETE APPLICATION
(Missing Items Circled, Application Refused)



**COMAL COUNTY**  
ENGINEER'S OFFICE

**FLOODPLAIN DEVELOPMENT  
PERMIT CHECKLIST**

Staff will complete shaded items

<i>Date Received</i>	<i>Initials</i>	<i>Permit Number</i>

Name CCD Meyer Ranch, LLC

Address 13809 Research Blvd., Suite 745

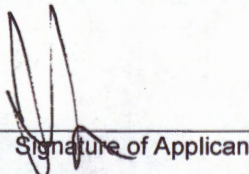
Austin, TX 78750

Instructions:

Place a check mark next to all items that apply. This Floodplain Development Permit Checklist **must** accompany the completed application.

- Completed Floodplain Development Permit Application
- Copy of Recorded Deed
- Boundary map indicating the location of proposed improvements.
- Required Permit Fee - \$40

I affirm that I have provided all information required for my Floodplain Development Permit and that this application constitutes a completed Floodplain Development Permit Application.

  
Signature of Applicant

3/5/20  
Date

<input type="checkbox"/> COMPLETE APPLICATION Check No. _____ Receipt No. _____
--

<input type="checkbox"/> INCOMPLETE APPLICATION (Missing Items Circled, Application Refused)
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