



INFORMATION ABOUT ON-SITE SEWER FACILITY

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CONCERNING THE PROPERTY AT 362 Kruse Hill Drive, Fredericksburg, TX 78624

A. DESCRIPTION OF ON-SITE SEWER FACILITY ON PROPERTY:

- (1) Type of Treatment System: ☒ Septic Tank ☐ Aerobic Treatment ☐ Unknown
☐ _____
- (2) Type of Distribution System: _____ ☐ Unknown
- (3) Approximate Location of Drain Field or Distribution System: _____ ☐ Unknown
Southwest of Barn
- (4) Installer: _____ ☐ Unknown
- (5) Approximate Age: 9 years ☐ Unknown

B. MAINTENANCE INFORMATION:

- (1) Is Seller aware of any maintenance contract in effect for the on-site sewer facility? ☐ Yes ☒ No
If yes, name of maintenance contractor: _____
Phone: _____ contract expiration date: _____
(Maintenance contracts must be in effect to operate aerobic treatment and certain non-standard on-site sewer facilities.)
- (2) Approximate date any tanks were last pumped? 2014
- (3) Is Seller aware of any defect or malfunction in the on-site sewer facility? ☐ Yes ☒ No
If yes, explain: _____
- (4) Does Seller have manufacturer or warranty information available for review? ☐ Yes ☒ No

C. PLANNING MATERIALS, PERMITS, AND CONTRACTS:

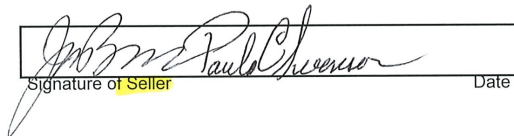
- (1) The following items concerning the on-site sewer facility are attached:
☐ planning materials ☐ permit for original installation ☐ final inspection when OSSF was installed
☐ maintenance contract ☐ manufacturer information ☐ warranty information ☐ _____
- (2) "Planning materials" are the supporting materials that describe the on-site sewer facility that are submitted to the permitting authority in order to obtain a permit to install the on-site sewer facility.
- (3) It may be necessary for a buyer to have the permit to operate an on-site sewer facility transferred to the buyer.

D. INFORMATION FROM GOVERNMENTAL AGENCIES: Pamphlets describing on-site sewer facilities are available from the Texas Agricultural Extension Service. Information in the following table was obtained from Texas Commission on Environmental Quality (TCEQ) on 10/24/2002. The table estimates daily wastewater usage rates. Actual water usage data or other methods for calculating may be used if accurate and acceptable to TCEQ.

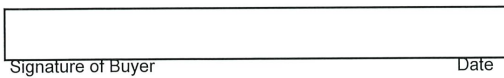
<u>Facility</u>	<u>Usage (gal/day)</u> <u>without water-</u> <u>saving devices</u>	<u>Usage (gal/day)</u> <u>with water-</u> <u>saving devices</u>
Single family dwelling (1-2 bedrooms; less than 1,500 sf)	225	180
Single family dwelling (3 bedrooms; less than 2,500 sf)	300	240
Single family dwelling (4 bedrooms; less than 3,500 sf)	375	300
Single family dwelling (5 bedrooms; less than 4,500 sf)	450	360
Single family dwelling (6 bedrooms; less than 5,500 sf)	525	420
Mobile home, condo, or townhouse (1-2 bedroom)	225	180
Mobile home, condo, or townhouse (each add'l bedroom)	75	60

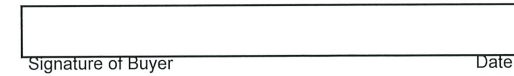
This document is not a substitute for any inspections or warranties. This document was completed to the best of Seller's knowledge and belief on the date signed. Seller and real estate agents are not experts about on-site sewer facilities. Buyer is encouraged to have the on-site sewer facility inspected by an inspector of Buyer's choice.


Signature of Seller Date


Signature of Seller Date

Receipt acknowledged by:


Signature of Buyer Date


Signature of Buyer Date



Main Home

Gillespie County Application for On-Site Sewage Facility
(Permit application is good for 1 year from purchase date)

Permit # 6710Date: 2/6/14Fee: 150.00Reason for Permit (Circle one): New Construction System Replacement System RepairName of Landowner: Bruunman (Last) John (First) H (MI)Mailing Address: 200 Clyde Run (Street # and name) Fredericksburg, VA (City & State) 26024 (Zip code)Physical Address/Location of new septic system: 302 Kruse Hill Rd (Street # and name)
Fredericksburg VA (City & State) 26024 (Zip code)Daytime Phone Number(s): 890 997-9861 Cell Number(s): 870 285-2154Legal Description: Volume: _____ Page: _____ Gillespie County Tax I. D. #: RSubdivision Name: Cool Water Ranch Lot 17 Blk _____ Phase _____ Tract _____

Abstract # _____ Survey Name and # _____

Total Acreage: 12.5 ☒ Private Well ☐ Public Well (Supplier's Name) _____Name & license # of person installing the septic system: MORALEZ SEPTIC LLC Benjamin Ball 30478 (OS#)Information on a Single Family Residence: ☐ House ☐ Mobile Home ☐ Manufactured
Total Square Footage of Living Area: ☐ <1500 ☐ <2500 ☐ <3500 ☒ >4500
of bedrooms 3 # of bathrooms (Full) 2 (Half) 1 Does it have or will it have water saving devices such as, low flush toilets, reduced flow shower heads or faucets, pressure reducing valves and/or faucet aerators? ☒ Yes ☐ No Water Softener (Demand-Initiated Regeneration) ☐ Yes ☒ NoIs the water softener plumbed separate from the OSSF: Y or N Circle Y or N

Information on a Non-Single Family Residence or Commercial/Institutional Facility (including Multi-family residences) Describe usage: _____

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given to Gillespie County OSSF Department to enter upon the above described property for the purpose of soil/site evaluation and investigation of an on-site sewage facility.

[Signature] (Signature of Landowner) 12 Feb 2013 (Date)

Office use only:
Daily wastewater usage rate: Q= 360 (gallons/day).
☒ Site Evaluation
☒ Planning Materials submitted by: ☒ Installer ☐ P. E. ☐ R. S.
☐ Development Plans required for Subdivisions, Manufactured Housing Communities, Multi-Unit Residential Development, Business Parks, or other similar uses (i.e. B&B Rental, R. V. Park)
☐ Floodplain
For Aerobic Treatment units and non-standard treatment (if applicable):
☐ Affidavit to the Public
☐ Two-year maintenance contract
☒ AUTHORIZATION TO CONSTRUCT Date: FEB 6, 2014

Certification of Approval
Final Inspection Permit # 6710

Date: 2/26/2014

Approved by: DOMINGO SANCHEZ
Domingo Sanchez

- I. Sewer (House Drain): ☐ 3" Sch 40 ☒ 4" Sch 40 ☐ Other: _____
Slope of sewer pipe to tank ☒ minimum of 1/8"/ft.
☒ Cleanouts every 50 ft. and within 5 ft. of 90° bends
100

- II. Treatment: ☒ Conventional Tanks ☐ Aerobic ☐ Other: _____

TANKS SIZE AND COMPARTMENTS	SERIAL#	RISER	MANUFACTURER
1. <u>750/s</u>	<u>-</u>	Y/N	<u>BLACK CREEK CONCRETE PROD</u>
2. <u>550/s</u>	<u>-</u>	Y/N	<u>" " " "</u>
3. _____	_____	Y/N	<u>" " " "</u>
4. _____	_____	Y/N	<u>" " " "</u>

- III. Disposal Field: ☒ Conventional Gravel ☐ Leaching Chambers (Brand) _____
☐ Low-Pressure Pipe ☐ Mounds ☐ Gravel-Less Pipe ☐ Pressure Emitters (drip)
☐ ET Beds ☐ Other: _____

Subsurface Disposal:		SQUARE FEET	
LENGTH OF TRENCH	WIDTH	HEIGHT OF MEDIA	CREDIT AREA=LENGTH X
CREDIT			
1. <u>360</u> ft.	<u>3</u> ft.	<u>1</u> ft.	<u>5</u> ft. <u>1800</u> Sq. ft.
2. <u>130</u> ft.	<u>12</u> ft.	<u>1</u> ft.	<u>14</u> ft. <u>1820</u> Sq. ft.

- IV. Surface Disposal (Application):
Loading Rate: _____ Area Required in Sq. ft. _____
Area Designed in Sq. ft. _____

Timer installed-----Y/N
Anti-siphon Hole used-----Y/N
Check valve used-----Y/N

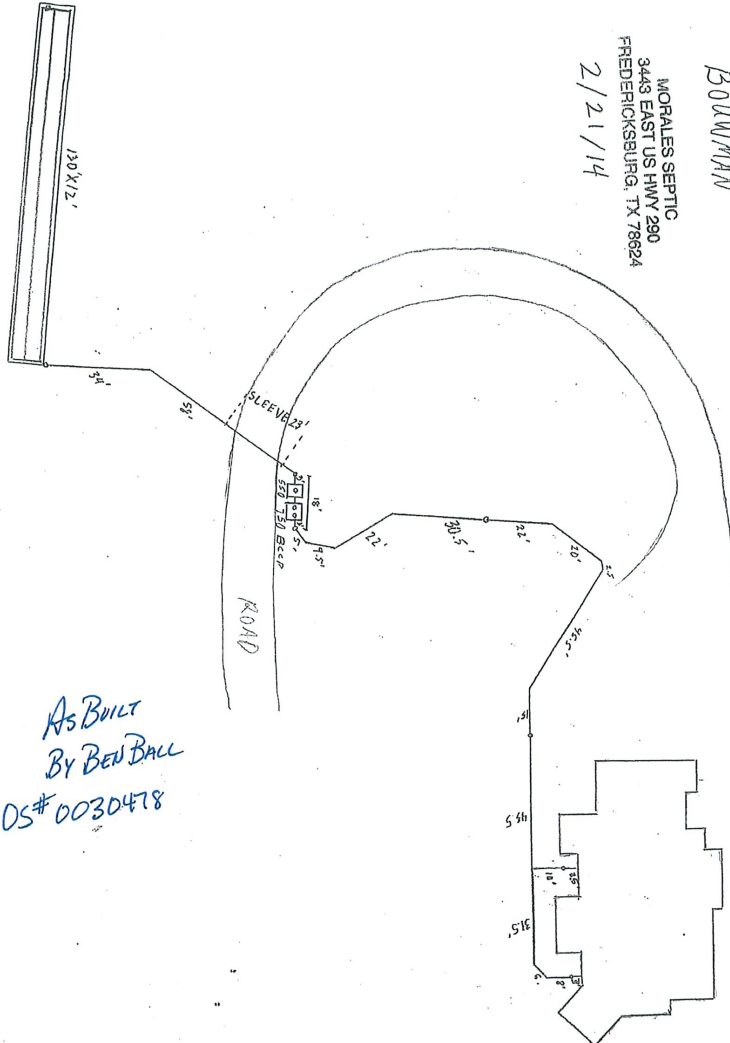
- V. Map of System: GPS UTM 14 R _____
Not to Scale

SEE AS BUILT BY BEN BALL 2/26/14

BOWMAN

MORALES SEPTIC
3448 EAST US HWY 290
FREDERICKSBURG, TX 78624

2/21/14



As BUILT
By BEN BALL
DS# 0030478

Guest Home



Gillespie County Application for an On-Site Sewage Facility
(Application valid for one year from purchase)

Permit # 5679

Date: 11/21/07

Fee: 150.00

Reason for Permit (circle one): New Construction System Replacement System Repair

(Last) (First) (Middle Initial)

Name of Landowner: John H Bowman & Paula C Swenson

Mailing Address: 206 Clyde Run

Physical Address: same 362 Kruse Hill Dr.

Daytime Phone Number(s): 830 997-9661 Cell 830 285-2154

Legal Description: Vol. 20071927 Page N/A GCAD Tax I.D. R# 90302

Subdivision Name: Cool Water Ranch Lot 17 Bk Phase

Abstract # 1255 Survey Name and #

Acres 12.55 ☒ Private Well ☐ Public Well (Suppliers Name)

Installer: MORALES SEPTIC OS# 310

☐ Information on Single Family Residence: ☐ House ☐ Mobile Home ☐ Manufactured
Total Square Feet of Living Area: ☒ < 1500 ☐ < 2500 ☐ < 3500 ☐ < 4500 ☐
Of Bedrooms: 0, # of Baths (Full): 1 (Half) 0 Water saving devices (circle) Yes or No
Water softener (Demand-Initiated Regeneration) Yes or No Plumbed separate from the OSSF: Yes or No

☒ Information on Non-Single Family Residence or Commercial/Institutional (including multi-family residences)
Describe Usage: Bar, auto parts & workshop & guest house
with 1 bath & not more than 1500 Sq. Ft.

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given to Gillespie County OSSF Department to enter upon the above describe property for the purpose of soil/site evaluation and investigation of an on-site sewage facility.

[Signature] (Signature of Owner) 3 Oct 2007 (Date)

Office use only:
Daily wastewater usage rate: Q = 60 (gallons/day) CAST EC 11/21/07
☒ Site Evaluation ☐ Professional Engineer ☐ Registered Sanitarian
☒ Planning Materials submitted by: ☒ Installer ☐ Professional Engineer ☐ Registered Sanitarian
☐ Development Plans required for Subdivisions, Manufactured Housing Communities, Multi-Unit Residential Development, Business Parks, or other similar uses (i.e. B&B's, Rentals, R.V. Parks)
☐ Floodplain
For Aerobic Treatment units and non-standard treatment (if applicable):
☐ Affidavit
☐ Two-year maintenance contract
☒ Authorization to Construct Date: 11/26/07

SCANNED

MAY 13 2008

10302

Certification of Approval
Final Inspection Permit # 5679

Date: Dec 5, 2007 Approved By: Dwight C. Boos

- I. Sewer (House Drain): ☐ 3 inch Sch 40 ☒ 4 inch Sch 40 ☐ Other: _____
 Slope of sewer pipe to tank ☒ minimum of 1/8 inch/foot
 Elevation difference from house stub out to tank _____
☒ Clean-outs every 50 feet and within 5 feet of 90 degree bends

- II. Treatment: ☒ Conventional Tanks ☐ Aerobic ☐ Other: _____
 TANKS SIZE AND COMPARTMENTS SERIAL # RISER MANUFACTURE
 1. 750/2C NA Y/N Black Creek Concrete Prod.
 2. _____ _____ Y/N _____
 3. _____ _____ Y/N _____
 4. _____ _____ Y/N _____
 5. _____ _____ Y/N _____

- III. Disposal Field: ☒ Conventional Gravel ☐ Leaching Chambers (Brand) _____
☐ Low-Pressure Pipe ☐ Mounds ☐ Gravel-Less Pipe ☐ Pressure Emitters (drip) _____
☐ ET Beds ☐ Other: _____

Subsurface Disposal:		SQUARE FEET	
LENGTH OF TRENCH	WIDTH	CREDIT	AREA=LENGTH X
CREDIT			
1. <u>68</u> ft.	<u>3</u> ft.	<u>1</u> ft.	<u>5</u> ft. <u>340</u> Sq. ft.
2. _____ ft.	_____ ft.	_____ ft.	_____ Sq. ft.

- IV. Surface Disposal (Application):
 Loading Rate: _____ Area Required in Sq. Ft. _____
 Area Designed in Sq. Ft. _____
 Timer installed _____ Yes or No
 Anti-siphon Hole used _____ Yes or No
 Check valve used _____ Yes or No

- V. Map of System: GPS UTM-14 R 0524116
3353633
 Not to Scale

