



# Notice of Intent (NOI) for Concentrated Animal Feeding Operations under the TPDES General Permit (TXG920000)

**TCEQ Office Use Only**  
Permit No.:

**IMPORTANT:**

- Use the attached **INSTRUCTIONS** when completing this form.
- After completing this form, use the attached **CUSTOMER CHECKLIST** to make certain all items are complete and accurate.
- Missing, illegible, or inaccurate items may delay final acknowledgment or coverage under the general permit.



Get coverage faster than mailing the paper NOI and pay a lower application fee by filing online through ePermits.

You can renew or terminate an existing permit, or submit a Notice of Change through ePermits. Sign up at <https://www6.tceq.texas.gov/steers/>

**Application Fee**

You must pay the NOI Application Fee to TCEQ for the application to be considered complete. See the instructions.

1. Check the Fee Paid:
- New permit for a facility not currently authorized - \$350
  - Significant Expansion - \$350
  - Renewal of an existing permit - \*\$100
  - Change in Permittee of existing permit - \$100

\*Fee is \$75 if applying through ePermits.

2. Provide your payment information below for us to verify payment of the application fee:

Check/Money Order or Voucher No.	Name Printed on Check:
----------------------------------	------------------------

**Application Type**

Select the application and provide the permit number if required.

- New permit for facility not currently authorized.
  - Technical Report (Form TCEQ-20111-CAFO Technical Report) is attached to this NOI Yes
- Significant Expansion of a currently authorized facility under Permit Number:
  - Technical Report (Form TCEQ-20111-CAFO Technical Report) is attached to this NOI Yes
- Renewal\* of existing Permit Number:
- Change in Permittee of existing Permit Number:

**\*Please note:** The renewed general permit requires the owner to apply for coverage. The application form must include the Owner as an applicant and may include the Operator as a co-applicant with the Owner. Changes to the permittee may be made at the time the permit is renewed. New Land Management Units (LMUs) and Retention Control Structures (RCSs) may be added and currently authorized LMUs and RCSs may be removed at the time the permit is renewed.

**A. OWNER (Applicant)**

The owner of the CAFO is required to apply for the permit. If there are more than one owner then each entity must complete this section, see page 7 for additional space for co-applicants.

1. If the applicant is currently registered with TCEQ, what is the Customer Number (CN) issued to this Applicant?

([Search Central Registry](#)) CN

2. What is the Legal Name of the entity (applicant) applying for this permit?

*(The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.)*

3. What is the name and title of the person signing the application?

(The person must be an official "Responsible Authority" meeting signatory requirements in 30 TAC 305.44(a).)

Name:	Title:
-------	--------

4. What is the applicant's mailing address as recognized by the **US Postal Service?** ([verify at USPS.com](#))

Address:	Suite No./Bldg. No./Mail Code:
----------	--------------------------------

City:	State:	ZIP Code:
-------	--------	-----------

Country Mailing Information (if outside USA).	Country Code:	Postal Code:
---	---------------	--------------

5. Phone No.:	Extension:
---------------	------------

6. Fax No.:	E-mail Address:
-------------	-----------------

7. Indicate the type of Customer:					
Individual Corporation	State Government	Other Government	Sole Proprietorship-D.B.A.	Federal Government	County Government
			Other:	Limited Partnership	General Partnership
				City Government	
8. Independent Owner:                      Yes                      No (If governmental entity, subsidiary, or part of a larger corporation, check "No".)					
9. Number of Employees:                      0-20;                      21-100;                      101-250;                      251-500; or                      501 or higher					
10. Customer Business Tax and Filing Numbers ( <i>This item is not applicable to individuals, governments, general partnerships, or sole proprietors.</i> ) <b>REQUIRED</b> for corporations and limited partnerships					
State Franchise Tax ID Number:			Federal Tax ID:		
TX SOS Charter (filing) Number:			DUNS Number (if known):		
<b>B. OPERATOR (Applicant)</b>					
The operator of the CAFO may apply as a co-permittee with the owner. If there are more than one operator then each entity must complete this section, see page 7 for additional space to enter co-applicants.					
Is the facility owned by one person and operated by another?                      Yes – fill out section B                      No – go to section C					
1. If the applicant is currently registered with TCEQ, what is the Customer Number (CN) issued to this Applicant? <b>(Search Central Registry)</b> CN					
2. What is the Legal Name of the entity (applicant) applying for this permit?  <i>(The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.)</i>					
3. What is the name and title of the person signing the application? (The person must be an official "Responsible Authority" meeting signatory requirements in 30 TAC 305.44(a).)					
Name:			Title:		
4. What is the applicant's mailing address as recognized by the US Postal Service? <b>(verify at <a href="http://USPS.com">USPS.com</a>)</b>					
Address:			Suite No./Bldg. No./Mail Code:		
City:		State:		ZIP Code:	
Country Mailing Information (if outside USA).			Country Code:		Postal Code:
5. Phone No.:			Extension:		
6. Fax No.:			E-mail Address:		
7. Indicate the type of Customer:					
Individual Corporation	State Government	Other Government	Sole Proprietorship-D.B.A.	Federal Government	County Government
			Other:	Limited Partnership	General Partnership
				City Government	
8. Independent Operator:                      Yes                      No (If governmental entity, subsidiary, or part of a larger corporation, check "No".)					
9. Number of Employees:                      0-20;                      21-100;                      101-250;                      251-500; or                      501 or higher					
10. Customer Business Tax and Filing Numbers ( <i>This item is not applicable to individuals, government, general partnerships, or sole proprietors.</i> ) <b>REQUIRED</b> for corporations and limited partnerships					
State Franchise Tax ID Number:			Federal Tax ID:		
TX SOS Charter (filing) Number:			DUNS Number (if known):		
<b>C. BILLING ADDRESS</b>					
The Permittee(s) is responsible for paying the annual fee. The annual fee will be assessed to permits <b>active on September 1 of each year</b> . TCEQ will send a bill to the address provided in this section. The Permittee(s) is responsible for terminating the permit when it is no longer needed.					
1. Billing Mailing Address:			Suite No./Bldg. No./Mail Code:		
City:		State:		ZIP Code:	
2. Country Mailing Information (if outside USA). Territory:			Country Code:		Postal Code:
3. Billing Contact (Attn or C/O):					
4. Phone No.: (                      )			Extension:		
5. Fax No.: (                      )			E-mail Address:		

<b>D. APPLICATION CONTACT</b>			
If TCEQ needs additional information regarding this application, who should be contacted?			
1. Name:	Title:	Company:	
2. Address:	Suite No./Bldg. No./Mail Code:		
City:	State:	ZIP Code:	
3. Phone No.:	Extension:		
4. Fax No.:	E-mail Address:		
<b>E. REGULATED ENTITY (RE) INFORMATION FOR THE SITE</b>			
1. If the site is currently registered with TCEQ, what is the RN? RN		<b>(Search <a href="#">Central Registry</a>)</b>	
2. Name of Site (the name as known by the community where this facility/project is located):			
3. Identify the county where the site is located:			
4. Latitude:	N	Longitude:	W
5. What is the primary business of this entity? In your own words, briefly describe the primary business of the Regulated Entity: (Do not repeat the SIC and NAICS code)			
6. Does the site have a physical address as recognized by the US Postal Service?      Yes      No <b>If Yes</b> , complete <b>Section a</b> for a physical address. <b>If No</b> , complete <b>Section b</b> for site location information.			
<b>Section a:</b> Enter the physical address for the site. <b>(verify it with <a href="#">USPS.com</a> or other delivery source)</b>			
Street Number:		Street Name:	
City:		ZIP Code:	
<b>Section b:</b> Enter the site location information.			
If no physical address (Street Number & Street Name), provide a written location access description to the site:  (Ex.: located 2 miles west from intersection of Hwy 290 & IH35 accessible on Hwy 290 South)			
City where the site is located or, if not in a city, what is the nearest city:		ZIP Code where site is located:	
<b>Site Mailing Address</b> (address for receiving mail at this site)			
7. What is the site mailing address as recognized by the <b>US Postal Service</b> ? <b>(verify at <a href="#">USPS.com</a>)</b>			
Is the RN mailing address the same as the Operator or Owner?      Owner      Operator      No - provide the address below.			
Street Number:		Street Name:	
City:	State:	ZIP Code:	
<b>F. GENERAL CHARACTERISTICS</b>			
1. Is the facility currently in operation?      Yes      No If "No," any previous authorized CAFO that renews their authorization must be operational within 18 months of the general permit issuance date to avoid revocation of this authorization.			
2. Is the facility located on Indian Country Lands?      Yes      No If "Yes," you must apply for a permit with the EPA Region VI, as this application will be denied.			
3. Is the facility located in a protection zone of a sole source drinking water supply?      Yes      No      NA-Dry Litter Poultry Facility If "Yes," you must apply for an individual permit, as this application will be denied.			
4. What is the authorization type that you are seeking? (See the general permit for definition of types.) State Only-CAFO      TPDES Large CAFO      TPDES Medium CAFO      TPDES Small CAFO			
5. Has a Pollution Prevention Plan been prepared as required in the general permit?      Yes      No If "No," coverage may be denied as the PPP is required at the time the NOI is submitted to TCEQ.			
6. What is the name of the receiving water body?			
7. What is the segment number(s) of the receiving water body?			
<b>Nutrient Management Plan (NMP)</b>			
8. Is this facility required to develop and implement a NMP? Yes - Answer a or b below.      No - Not applicable for State Only-CAFO			
a. For a new facility, when will the NMP be implemented?			
b. For a renewal or significant expansion, what is the date of the last review or revision of the NMP? This date must be within the last 12 months.			





**H. CERTIFICATION FOR WATER QUALITY AUTHORIZATION**

**Owner Operator Certification (Required):**

A signature is required for each Applicant applying as co-permittee. If multiple applicant's, you must make additional copies of this section.

I, \_\_\_\_\_  
Typed or printed name *(Required & must be legible)* \_\_\_\_\_  
Title *(Required & legible)*

certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under [30 Texas Administrative Code §305.44](#) to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Use blue ink)

**Owner Operator Certification (Required):** (Required only if more than one applicant applying as co-permittee.):

A signature is required for each applicant applying as co-permittee. If multiple applicant's, you must make additional copies of section.

I, \_\_\_\_\_  
Typed or printed name *(Required & must be legible)* \_\_\_\_\_  
Title *(Required & legible)*

certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under [30 Texas Administrative Code §305.44](#) to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Use blue ink)

**I. CERTIFICATION FOR AIR STANDARD PERMIT FOR ANIMAL FEEDING OPERATION**

**(Required if requesting authorization under the Air Standard Permit.)**

**Owner Operator Certification** (Required if requesting coverage under the Air Standard Permit):

A signature is required for each Applicant applying as co-permittee. If multiple applicants, you must make additional copies of this section.

I, \_\_\_\_\_  
Typed or printed name *(Required & must be legible)* \_\_\_\_\_ Title *(Required & legible)*

I am requesting coverage under the Air Standard Permit for Animal Feeding Operations located in 30 TAC Subchapter 321, Subchapter B. I have read the requirements for this air standard permit. I hereby certify that this facility will be constructed and operated in accordance with the requirements of this air standard permit. I will also maintain the documentation required to show compliance with the air standard permit on-site.

The signature below confirms that I have knowledge of the facts included in this application and that these facts are true and correct to the best of my knowledge and belief. I further state that to the best of my knowledge and belief, the project for which application is made will not in any way violate any provision of the Texas Water Code (TWC), chapter 7; Texas Clean Air Act (TCAA), as amended, or any of the air quality rules and regulations of the Texas Commission on Environmental Quality or any local governmental ordinance or resolution enacted pursuant to the TCAA. I further state that I have read and understand TWC statements or representations in this application, and TWC Section 7.187 pertaining to CRIMINAL PENALTIES.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Use blue ink)

**Owner Operator Certification** (Required only if more than one applicant applying as co-permittee.):

A signature is required for each applicant applying as co-permittee. If multiple applicant's, you must make additional copies of this section.

I, \_\_\_\_\_  
Typed or printed name *(Required & must be legible)* \_\_\_\_\_ Title *(Required & legible)*

I am requesting coverage under the Air Standard Permit for Animal Feeding Operations located in 30 TAC Subchapter 321, Subchapter B. I have read the requirements for this air standard permit. I hereby certify that this facility will be constructed and operated in accordance with the requirements of this air standard permit. I will also maintain the documentation required to show compliance with the air standard permit on-site.

The signature below confirms that I have knowledge of the facts included in this application and that these facts are true and correct to the best of my knowledge and belief. I further state that to the best of my knowledge and belief, the project for which application is made will not in any way violate any provision of the Texas Water Code (TWC), chapter 7; Texas Clean Air Act (TCAA), as amended, or any of the air quality rules and regulations of the Texas Commission on Environmental Quality or any local governmental ordinance or resolution enacted pursuant to the TCAA. I further state that I have read and understand TWC statements or representations in this application, and TWC Section 7.187 pertaining to CRIMINAL PENALTIES.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Use blue ink)

<b>Additional Co-Applicants</b>			
For additional co-applicants, use this page and attach to the NOI.			
Is this applicant applying as the Owner or Operator:		OWNER	OPERATOR
1. If the applicant is currently registered with TCEQ, what is the Customer Number (CN) issued to this Applicant? <b>(Search Central Registry)</b> CN			
2. What is the Legal Name of the entity (applicant) applying for this permit?  <i>(The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.)</i>			
3. What is the name and title of the person signing the application? (The person must be an official "Responsible Authority" meeting signatory requirements in TAC 305.44(a).)			
Name: Titl		e:	
4. What is the applicant's mailing address as recognized by the <b>US Postal Service?</b> <b>(verify at USPS.com)</b>			
Address:		Suite No./Bldg. No./Mail Code:	
City:	State:	ZIP Code:	
Country Mailing Information (if outside USA).		Country Code:	Postal Code:
5. Phone No.: ( )		Extension:	
6. Fax No.: ( )		E-mail Address:	
7. Indicate the type of Customer:			
Individual	Sole Proprietorship-D.B.A.	Limited Partnership	
Corporation	Federal Government	General Partnership	
State Government	County Government	City Government	
Other Government	Other:		
8. Independent Operator:		Yes No (If governmental entity, subsidiary, or part of a larger corporation, check "No".)	
9. Number of Employees:		0-20; 21-100; 101-250; 251-500; or 501 or higher	
10. Customer Business Tax and Filing Numbers <i>(This item is not applicable to individuals, governments, general partnerships, or sole proprietors.)</i> <b>REQUIRED</b> for corporations and limited partnerships.			
State Franchise Tax ID Number:		Federal Tax ID:	
TX SOS Charter (filing) Number:		DUNS Number (if known):	
<b>Additional Co-Applicants</b>			
Is this applicant applying as the Owner or Operator:		OWNER	OPERATOR
1. If the applicant is currently registered with TCEQ, what is the Customer Number (CN) issued to this Applicant? <b>(Search Central Registry)</b> CN			
2. What is the Legal Name of the entity (applicant) applying for this permit?  <i>(The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.)</i>			
3. What is the name and title of the person signing the application? (The person must be an official "Responsible Authority" meeting signatory requirements in TAC 305.44(a).)			
Name: Titl		e:	
4. What is the applicant's mailing address as recognized by the <b>US Postal Service?</b> <b>(verify at USPS.com)</b>			
Address:		Suite No./Bldg. No./Mail Code:	
City:	State:	ZIP Code:	
Country Mailing Information (if outside USA).		Country Code:	Postal Code:
5. Phone No.: ( )		Extension:	
6. Fax No.: ( )		E-mail Address:	
7. Indicate the type of Customer:			
Individual	Sole Proprietorship-D.B.A.	Limited Partnership	
Corporation	Federal Government	General Partnership	
State Government	County Government	City Government	
Other Government	Other:		
8. Independent Operator:		Yes No (If governmental entity, subsidiary, or part of a larger corporation, check "No".)	
9. Number of Employees:		0-20; 21-100; 101-250; 251-500; or 501 or higher	
10. Customer Business Tax and Filing Numbers <i>(This item is not applicable to individuals, governments, general partnerships, or sole proprietors.)</i> <b>REQUIRED</b> for corporations and limited partnerships.			
State Franchise Tax ID Number:		Federal Tax ID:	
TX SOS Charter (filing) Number:		DUNS Number (if known):	

Did you complete everything? Use this checklist to be sure!

Are you ready to mail your form to TCEQ? Go to the General Information Section of the Instructions for mailing addresses.

Have you also mailed your check and Payment Submittal Form to the Cashier's office? Go to the end of this document for the Payment

Customer GP Notice of Intent Checklist <b>TXG920000</b>	
√	This checklist is for use by the applicant to ensure a complete application. Missing information may result in denial of coverage under the permit. (See NOI Process description in the Instructions)
	Application Fee was sent to TCEQ's Cashiers's Office and the check information is listed, or the EPAY payment voucher is attached.
	Application type is selected. The permit number is provided – if for an existing authorized facility. The technical report is attached for new and significant expansion applications.
APPLICANT	OWNER (AND OPERATOR IF APPLICABLE) INFORMATION - Confirm each item is complete for each applicant: √ Customer Number (CN) issued by TCEQ Central Registry Legal Name as filed to do business in Texas (Call TX SOS 512/463-5555) Owner/Operator Mailing Address is complete & verifiable with USPS. <a href="http://www.usps.com">www.usps.com</a> Phone Numbers/E-mail Address Type of Owner/Operator (Entity Type) Independent Owner/Operator Number of Employees For Corporations or Limited Partnerships – Tax ID and SOS Filing numbers
	BILLING ADDRESS is complete & verifiable with USPS. <a href="http://www.usps.com">www.usps.com</a> If there is more than one applicant, the applicant responsible for receiving the invoice and making the payment is provided.
	REGULATED ENTITY (RE) INFORMATION ON PROJECT OR SITE - Confirm each item is complete: √ Regulated Entity Reference Number (RN) (if site is already regulated by TCEQ) Site/Project Name County(ies) Latitude and Longitude <a href="http://www.tceq.usgs.gov/TopographicMapViewer/">TCEQ USGS Topographic Map Viewer</a> or <a href="http://www.terraserver.com/">http://www.terraserver.com/</a> Business description Site/Project (RE) Physical Address or Location Information Please do not use a rural route or post office box for a site location Site Mailing Address (complete & verifiable with USPS <a href="http://www.usps.com">www.usps.com</a> )
	GENERAL CHARACTERISTICS - Confirm each item is complete: √ Facility operation status Facility is not on Indian country lands. Facility is not located in a protected zone of a sole source drinking water supply. Authorization type is provided. PPP has been prepared. Receiving Water Body and Segment Number Nutrient Management Plan implementation and revision date Animal Type and Head Count – currently authorized and/or proposed Manure, Sludge, & Wastewater Production and Use information LMU information if applicable. RCS information Air Authorization Type Air Standard Permit information – if applicable USGS Map Site Map – showing all RCSs listed LMU Map – showing all LMUs listed
CERTIFICATION	Certification statements have been checked indicating “Yes” Water Quality Certification statements have been signed by all applicants. Signature meets <a href="http://www.tceq.texas.gov/legislation/tac/30544.htm">30 Texas Administrative Code (TAC) §305.44</a> . It is original and has been provided for all applicants. Air Standard Permit Certification statements have been signed by all applicants.

**General Information and Instructions  
for  
Concentrated Animal Feeding Operations  
under the TPDES General Permit (TXG920000)**

**GENERAL INFORMATION**

Where to Send the Notice of Intent (NOI):

**BY REGULAR U.S. MAIL**

Texas Commission on Environmental Quality  
Applications Review & Processing Team (MC148)  
P.O. Box 13087  
Austin, TX 78711-3087

**BY OVERNIGHT/EXPRESS MAIL**

Texas Commission on Environmental Quality  
Applications Review & Processing Team (MC148)  
12100 Park 35 Circle  
Austin, TX 78753

TCEQ Contact list:

Application Processing Questions relating to the status and form requirements:	512/239-4671
Technical Questions relating to the general permit:	512/239-4671
Environmental Law Division:	512/239-0600
Records Management for obtaining copies of forms submitted to TCEQ:	512/239-0900
Information Services for obtaining reports from program data bases (as available):	512/239-DATA (3282)
Financial Administration's Cashier's office:	512/239-0357 or 512/239-0187

Notice of Intent Process:

When your NOI is received by the program, the form will be processed as follows:

- 1. Administrative Review:** Each item on the form will be reviewed for a complete response. In addition, the owner's and, if applicable, the operator's legal name must be verified with Texas Secretary of State as valid and active (if applicable). The address(s) on the form must be verified with the US Postal service as an address receiving regular mail delivery. Never give an overnight/express mailing address.
- 2. Notice of Deficiency:** If an item is incomplete or not verifiable as indicated above, a notice of deficiency (NOD) will be mailed to the applicant's contact indicated in Section D of the NOI. The applicant will have 30 days to respond to the NOD. The response will be reviewed for completeness.
- 3. Technical Review:** Applications for a new facility or significant expansion of a currently authorized facility will be reviewed by technical staff when the administrative review is determined complete. If a technical item is incomplete or not verifiable, a NOD will be sent to the applicant's contact indicated in Section D of the NOI. The applicant will have 30 days to respond to the NOD. The response will be reviewed for technical completeness.
- 4. Acknowledgment of Coverage:** An Acknowledgment Certificate will be mailed to the applicant. This certificate acknowledges coverage under the general permit.  
-or-  
**Denial of Coverage:** If the applicant fails to respond to the NOD or the response is inadequate, coverage under the general permit may be denied. If coverage is denied, the applicant will be notified.

**General Permit (Your Permit)**

Coverage under the general permit begins **as stated in the general permit**. You should have a copy of your general permit when submitting your application. You may view and print the general permit TXG920000 for which you are seeking coverage under, on the TCEQ web site [www.tceq.texas.gov](http://www.tceq.texas.gov)

**General Permit Forms**



**ePermits online application forms**

Get coverage faster than mailing the paper NOI or NOT. You can:

- renew an existing permit
- terminate an existing permit
- submit a Notice of Change

Sign up at <http://www.tceq.texas.gov/permitting/steers/steers.html>

Pay a lower application fee by filing online through ePermits.

**Paper forms**

The Notice of Intent (NOI), Notice of Termination (NOT) form TCEQ-20343, and Notice of Change (NOC) form TCEQ-20511 with instructions are available in Adobe Acrobat PDF format on the TCEQ web site [www.tceq.texas.gov](http://www.tceq.texas.gov)

### Change in Permittee

Authorizations under the general permit are not transferrable. If the permittee or one of the co-permittees changes, the current permittee(s) must submit a Notice of Intent and the previous permittee(s) must submit a Notice of Termination. The forms must be submitted no later than 10 days prior to the change. Please note that a letter will not make a change in permittee(s) effective.

### TCEQ Central Registry Core Data Form

The Core Data Form has been incorporated into this form. **Do not send a core data form to TCEQ.**

After final acknowledgment of coverage under the general permit, the program will assign a Customer Number (CN) and Regulated Entity Number (RN). You can find the information on the Central Registry web site at <http://www12.tceq.texas.gov/crpub/>. You can search by the RN, CN or Name (Permittee), or by your permit number under the search field labeled "Additional ID". Capitalize all letters in the permit number.

The Customer (Permittee) is responsible for providing consistent information to the TCEQ, and for updating all CN and RN data for all authorizations as changes occur. For General Permits, a Notice of Change form must be submitted to the program area.

### Application Fee associated with a General Permit NOI

The general permit refers to an application fee that may be made by check or money order, payable to TCEQ, or through EPAY (electronic payment) through the web.

This fee is required to be paid at the time the NOI is submitted. Failure to submit payment at the time the application is filed will cause delays in acknowledgment or denial of coverage under the general permit.

- **Mailed Payments:**

Payment must be mailed under separate cover at one of the addresses below using the attached Application Fee submittal form.

**(DO NOT SEND A COPY OF THE NOI WITH THE APPLICATION FEE SUBMITTAL FORM)**

**BY REGULAR U.S. MAIL**

Texas Commission on Environmental Quality  
Financial Administration Division  
Cashier's Office, MC-214 Cashier  
P.O. Box 13088  
Austin, TX 78711-3088

**BY OVERNIGHT/EXPRESS MAIL**

Texas Commission on Environmental Quality  
Financial Administration Division  
's Office, MC-214  
12100 Park 35 Circle  
Austin, TX 78753

- **ePAY Electronic Payment:**

Go to [www.tceq.state.tx.us/epay](http://www.tceq.state.tx.us/epay)

When making the payment you must select Water Quality, then select the fee category:

For Existing (Renewal or Change in Permittee applications): "General Permit Existing CAFO Wastewater Discharge Application"

For New/Significant Expansion: "General Permit New/Significant Expansion CAFO Wastewater Discharge Application"

You must include a copy of the payment voucher with your NOI. Your NOI will not be considered complete without the payment voucher.

### Annual Water Quality Fee

This is a fee that is assessed to permittees with an active authorization under the general permit on September 1 of each year.

The permittee will receive an invoice for payment of the annual fee in November of each year. If there are co-permittees, the billing statement will be mailed to the permittee identified on the NOI for receiving the statement. The payment will be due 30 days from the invoice date. A 5% penalty will be assessed if the payment is received by TCEQ after the due date. Annual fee assessments cannot be waived as long as the authorization under the general permit is active on September 1. It's important for the operator to submit a Notice of Termination (NOT) when coverage under the general permit is no longer required. A NOT is effective on the postmarked date of mailing the form to TCEQ. It is recommended that the NOT be mailed using a method that documents the date mailed.

- **Mailed Payments:**

You must return your payment with the billing coupon provided with the billing statement that TCEQ mails to you.

- **EPAY Electronic Payment:**

Go to [www.tceq.state.tx.us/epay](http://www.tceq.state.tx.us/epay)

You must enter your account number provided at the top portion of your billing statement. Payment methods include MasterCard, Visa, and electronic check payment (ACH).

## INSTRUCTIONS FOR FILLING OUT THE NOI FORM

### A. OWNER and B. OPERATOR if applicable (As defined in the general permit.)

The owner of a facility must be the applicant identified on the application for authorization. If the facility is owned by one person and operated by another, the operator may be a co-applicant.

For a renewal, the application form must include the Owner as an applicant and may include the Operator as a co-applicant with the Owner. Changes to the permittee may be made at the time the permit is renewed.

#### 1. TCEQ Issued Customer Number (CN)

TCEQ's Central Registry will assign each customer a number that begins with "CN," followed by nine digits. **This is not a permit number**, registration number, or license number.

- If this customer has not been assigned a Customer Reference Number, leave the space for the Customer Reference Number blank.
- If this customer has already been assigned this number, enter the applicant's Customer Reference Number in the space provided.

#### 2. Legal Name

Provide the legal name of the facility owner/operator, as authorized to do business in Texas. The name must be provided exactly as filed with the Texas Secretary of State (SOS), or on other legal documents forming the entity, that is filed in the county where doing business. You may contact the SOS at 512/463-5555, or go to <http://www.sos.state.tx.us/corp/contact.shtml> for more information related to filing in Texas. If filed in the county where doing business, the legal name must be as it is filed on legal documents with the county. If the applicant is a sole proprietor, the applicant must submit the application under the individual's name.

3. Name and Title of person signing the Notice of Intent application form, which is referred to as the "Responsible Authority". Signature meets [30 Texas Administrative Code \(TAC\) §305.44](#). If the applicant is an individual or sole proprietor then it is the individual owner. See signatory requirements for further information by entity type.

#### 4. Mailing Address

Provide a complete mailing address for receiving mail from the TCEQ. The address must be verifiable with the US Postal Service at [www.usps.com](http://www.usps.com), for regular mail delivery (not overnight express mail). If you find that the address is not verifiable using the USPS web search, please indicate the address is used by the USPS for regular mail delivery.

#### 5. Phone Number

This number should correspond to this customer's mailing address given earlier. Enter the area code and phone number here. Leave "Extension" blank if this customer's phone system lacks this feature.

#### 6. Fax Number and E-mail Address

This number and E-mail address should correspond to operator's mailing address provided earlier. (Optional Information)

#### 7. Type of Entity

Check only one box that identifies the type of entity. Use the descriptions below to identify the appropriate entity type:

Individual - is a customer who has not established a business, but conducts an activity that needs to be regulated by the TCEQ.

Sole Proprietorship - D.B.A - is a customer that is owned by only one person and has not been incorporated. The applicant must submit the application under the individual's name. This business may:

- be under the person's name
- have its own name ("doing business as" or D.B.A.)
- have any number of employees

Partnership - is a customer that is established as a partnership as defined by the Texas Secretary of State's Office.

- is legally filed as a general partner in the county where doing business (not a Limited Partnership)

#### Limited Partnership

- is recognized as a Limited Partnership by the Texas Secretary of State (not a general partnership)
- has proper operating authority to operate in Texas.

Corporation - the customer meets all of these conditions:

- is a legally incorporated entity under the laws of any state or country
- is recognized as a corporation by the Texas Secretary of State
- has proper operating authority to operate in Texas.

Government - federal, state, county, or city government (as appropriate).

- The customer is either an agency of one of these levels of government or the governmental body itself.

Other - is Estate, Trust, etc.

- The customer does not fit one of the above descriptions. Enter a short description of the type of customer in the blank provided.

#### 8. Independent Operator

Check "No" if this customer is a subsidiary, part of a larger company, or is a governmental entity. Otherwise, check "Yes."

#### 9. Number of Employees

Check one box to show the number of employees for this customer's entire company, at all locations. This is not necessarily the number of employees at the site named in the NOI.

10. Customer Business Tax and Filing Numbers. This item is <i>required</i> for corporations and limited partnerships, and not applicable to individuals, governments, general partnerships, or sole proprietors.
State Franchise Tax ID Number Corporations and limited liability companies that operate in Texas are issued a franchise tax identification number. If this customer is a corporation or limited liability company, enter this number here. <b>Do not provide social security numbers.</b>
Federal Tax ID All businesses, except for some small sole proprietors, individuals, or general partnerships should have a federal taxpayer identification number (TIN). Enter this number here. Use no prefixes, dashes, or hyphens. <b>Do not provide social security numbers.</b>
TX SOS Charter (filing) Number Corporations and limited partnerships required to register with the Texas Secretary of State are issued a charter or filing number. You may obtain further information by calling SOS at 512/463-5555.
DUNS Number Most businesses have a DUNS (Data Universal Numbering System) number issued by Dun and Bradstreet Corp. If this customer has one, enter it here.
<b>B. OPERATOR</b> See instructions for Section A above.
<b>C. BILLING ADDRESS</b>
An annual fee is assessed for each permitted facility holding an active authorization under the general permit on September 1 of each year. Provide the complete mailing address where the annual fee invoice should be mailed. Verify the address with the USPS. It must be an address for delivery of regular mail, not overnight express mail. Also, provide a phone number of the permittee's representative responsible for payment of the invoice.  Country Mailing Information If this address is outside the United States, enter the territory name, country code, and any non-ZIP mailing codes or other non-U.S. Postal Service features here. If this address is inside the United States, leave these spaces blank.
<b>D. APPLICATION CONTACT</b>
Provide the name, title and communication information of the person that TCEQ can contact for additional information regarding this application. <b>If the application is missing information and there is no contact person to call, the application may be denied.</b>
<b>E. REGULATED ENTITY (RE) INFORMATION FOR THE SITE</b>
1. <a href="#">Regulated Entity Reference Number</a> (RN) This is a number issued by TCEQ's Central Registry to sites (a location where a regulated activity occurs) regulated by TCEQ. This is not a permit number, registration number, or license number. <ul style="list-style-type: none"> <li>• If this Regulated Entity has not been assigned a Regulated Entity Number, leave this space blank.</li> <li>• If this customer has been assigned this number, enter the Regulated Entity Number.</li> </ul>
2. Site/Project Name/Regulated Entity If the site is already regulated by TCEQ, use the same name as on the existing <a href="#">Regulated Entity Reference Number</a> (RN).  If new, provide the name of the site as known by the public in the area where the site is located. The name you provide on this application will be used in the TCEQ Central Registry as the Regulated Entity.
3. Identify the County where the site is located. If the site covers more than one county, provide the county that is most affected by the authorized activity and list the additional county(s) as secondary.
4. Latitude and Longitude Enter the latitude and longitude of the site in either degrees, minutes, and seconds or decimal form. For help obtaining the latitude and longitude, go to: <a href="#">TCEQ USGS Topographic Map Viewer</a> or <a href="http://www.terraserver.com/">http://www.terraserver.com/</a>
5. Description of Activity Regulated In your own words, briefly describe the primary business being conducted at the site. (A description specific to what you are doing that requires this authorization - Do not repeat the SIC Code(s).)
6. Site/Project (RE) Physical Address/Location  <b>Section a:</b> Enter the complete physical address of where the site is located. This must be a street number and street name for a complete physical address. This address must be validated through US Postal Service or your local police (911 service) as a valid address. Please confirm this to be a complete and valid address. In some rural areas, new addresses are being assigned to replace rural route addresses.  <b>Please do not use a rural route or post office box for a site location.</b>  <b>Section b:</b> If a site does not have an actual physical address that includes a street number and street name, then provide a complete written location access description. For example: "The site is located 2 miles west from intersection of Hwy 290 & IH35, located on the southwest corner of the Hwy 290 South bound lane."  Enter the city and zip code where the site is located. If not located within a city, determine if the facility lies with the extra-territorial jurisdiction of a city and enter the name of that city and zip code. If neither applies, enter the nearest city and zip code.
<b>SITE MAILING ADDRESS</b>
7. Provide a complete mailing address to be used by TCEQ for receiving mail at the site. In most cases, the address is the same as the permittee. If so, simply place a check mark in the box. If you provide a different address, please verify the address with USPS as instructed above for the site mailing address.
<b>F. GENERAL CHARACTERISTICS</b>

<p><b>1. Operational Status of CAFO</b> If an existing authorized CAFO that renews their authorization is not operational within 18 months of the general permit issuance date, the authorization will be revoked by TCEQ. Upon written request to the TCEQ Water Quality Division, the executive director may grant an extension to this requirement.</p>																																																						
<p><b>2. Indian Country Lands</b> If your site is located on Indian Country Lands, the TCEQ does not have authority to process your application. You must obtain authorization through EPA, Region VI, Dallas. Do not submit this form to TCEQ.</p>																																																						
<p><b>3. Protection Zone of Sole Source Drinking Water Supply</b> Any CAFO where any part of the production area of the CAFO is located or proposed to be located within the protection zone of a sole-source surface drinking water supply, except where the operation does not use a liquid waste handling system (dry litter poultry), must apply for an individual permit.</p>																																																						
<p><b>4. Authorization Type</b> Indicate if you are seeking a State Only-CAFO, TPDES Large-CAFO, TPDES Medium-CAFO or TPDES Small-CAFO as defined in the general permit:</p> <p><b>TPDES Large CAFO:</b> Any AFO which stables and confines and feeds or maintains for a total of 45 days or more in any 12-month period equal to or more than the numbers of animals specified in any of the categories in item 9, Animal Information.</p> <p><b>TPDES Medium CAFO:</b> Any AFO that discharges pollutants into water in the state, either through a man-made ditch, flushing system, or other similar man-made device, or directly into water in the state, with the number of animals in item 9, Animal Information.</p> <p><b>TPDES Small CAFO:</b> Any AFO that is designated by the executive director as a CAFO because it is a significant contributor of pollutants into water in the state and is not a large or medium CAFO.</p> <p><b>State-only CAFO:</b> An AFO that falls within the range of animals for a Medium CAFO and that is either located in the Dairy Outreach Program Area (DOPA) (Erath, Bosque, Hamilton, Comanche, Johnson, Hopkins, Wood, and Rains Counties), or designated by the executive director as a CAFO because it is a significant contributor of pollutants into water in the state.</p>																																																						
<p><b>5. Pollution Prevention Plan (PPP)</b> Indicate whether or not a PPP has been developed to meet the requirements for the General Permit by entering yes or no. If marking No, coverage may be denied as the PPP is required at the time the NOI is submitted to TCEQ. This plan must be available for a TCEQ investigator to review on request. Specific requirements for the development of the plan can be found in the general permit.</p>																																																						
<p><b>6. Identify the classified segment name of the water body where the potential discharge will reach.</b></p>																																																						
<p><b>7. Identify the classified segment number (Required).</b> Go to the link to find the segment number of the classified water body where wastewater will flow <a href="http://www.tceq.texas.gov/compliance/monitoring/water/quality/data/wqm/viewer/viewer.html">http://www.tceq.texas.gov/compliance/monitoring/water/quality/data/wqm/viewer/viewer.html</a>. For assistance, you may call the technical staff at 512/239-4671.</p>																																																						
<p><b>8. A nutrient management plan is only required for Large CAFOs and New Sources.</b> If you are an existing State Only CAFO, check the box indicating "not applicable". If the CAFO is proposed, enter the estimated implementation date. For existing CAFOs, enter the last revision date. This date must be within the last 12 months.</p>																																																						
<p><b>9. Animal Information</b> The chart below lists all animal types and head counts as specified in the general permit.</p> <table border="1"> <thead> <tr> <th>CAFO Type:</th> <th>TPDES Large CAFO</th> <th>TPDES Medium CAFO</th> <th>TPDES Small CAFO</th> <th>State-only CAFO*</th> </tr> <tr> <th>Animal Type</th> <th>Head Count Range</th> <th>Head Count Range</th> <th>Head Count Range</th> <th>Head Count Range</th> </tr> </thead> <tbody> <tr> <td>cattle other than mature dairy cattle or veal calves. Cattle includes but is not limited to heifers, steers, bulls and cow/calf pairs</td> <td>&gt;= 1,000</td> <td>300 to 999</td> <td>&lt; 300</td> <td>300 to 999</td> </tr> <tr> <td>mature dairy cattle (whether milking or dry cows)</td> <td>&gt;= 700</td> <td>200 to 699</td> <td>&lt; 200</td> <td>200 to 699</td> </tr> <tr> <td>veal calves</td> <td>&gt;= 1,000</td> <td>300 to 999</td> <td>&lt; 300</td> <td>300 to 999</td> </tr> <tr> <td>swine each weighing 55 pounds or more</td> <td>&gt;= 2,500</td> <td>750 to 2,499</td> <td>&lt; 750</td> <td>750 to 2,499</td> </tr> <tr> <td>swine each weighing less than 55 pounds</td> <td>&gt;= 10,000</td> <td>3,000 to 9,999</td> <td>&lt; 3,000</td> <td>3,000 to 9,999</td> </tr> <tr> <td>Horses</td> <td>&gt;= 500</td> <td>150 to 499</td> <td>&lt; 150</td> <td>150 to 499</td> </tr> <tr> <td>sheep or lambs</td> <td>&gt;= 10,000</td> <td>3,000 to 9,999</td> <td>&lt; 3,000</td> <td>3,000 to 9,999</td> </tr> <tr> <td>turkeys</td> <td>&gt;= 55,000</td> <td>16,500 to 54,999</td> <td>&lt; 16,500</td> <td>16,500 to 54,999</td> </tr> </tbody> </table>					CAFO Type:	TPDES Large CAFO	TPDES Medium CAFO	TPDES Small CAFO	State-only CAFO*	Animal Type	Head Count Range	Head Count Range	Head Count Range	Head Count Range	cattle other than mature dairy cattle or veal calves. Cattle includes but is not limited to heifers, steers, bulls and cow/calf pairs	>= 1,000	300 to 999	< 300	300 to 999	mature dairy cattle (whether milking or dry cows)	>= 700	200 to 699	< 200	200 to 699	veal calves	>= 1,000	300 to 999	< 300	300 to 999	swine each weighing 55 pounds or more	>= 2,500	750 to 2,499	< 750	750 to 2,499	swine each weighing less than 55 pounds	>= 10,000	3,000 to 9,999	< 3,000	3,000 to 9,999	Horses	>= 500	150 to 499	< 150	150 to 499	sheep or lambs	>= 10,000	3,000 to 9,999	< 3,000	3,000 to 9,999	turkeys	>= 55,000	16,500 to 54,999	< 16,500	16,500 to 54,999
CAFO Type:	TPDES Large CAFO	TPDES Medium CAFO	TPDES Small CAFO	State-only CAFO*																																																		
Animal Type	Head Count Range	Head Count Range	Head Count Range	Head Count Range																																																		
cattle other than mature dairy cattle or veal calves. Cattle includes but is not limited to heifers, steers, bulls and cow/calf pairs	>= 1,000	300 to 999	< 300	300 to 999																																																		
mature dairy cattle (whether milking or dry cows)	>= 700	200 to 699	< 200	200 to 699																																																		
veal calves	>= 1,000	300 to 999	< 300	300 to 999																																																		
swine each weighing 55 pounds or more	>= 2,500	750 to 2,499	< 750	750 to 2,499																																																		
swine each weighing less than 55 pounds	>= 10,000	3,000 to 9,999	< 3,000	3,000 to 9,999																																																		
Horses	>= 500	150 to 499	< 150	150 to 499																																																		
sheep or lambs	>= 10,000	3,000 to 9,999	< 3,000	3,000 to 9,999																																																		
turkeys	>= 55,000	16,500 to 54,999	< 16,500	16,500 to 54,999																																																		

chickens/boilers (other than laying hens if the operation does not use a liquid waste handling system)	>= 125,000	37,500 to 124,999	< 37,500	37,500 to 124,999
laying hens (if the operation uses liquid waste handling system)	>= 30,000	9,000 to 29,999	< 9,000	9,000 to 29,999
laying hens (if the operation does not use a liquid waste handling system)	>= 82,000	25,000 to 81,999	< 25,000	25,000 to 81,999
ducks (if the operation uses a liquid waste handling system)	>= 5,000	1,500 to 4,999	< 1,500	1,500 to 4,999
ducks (if the operation does not use a liquid waste handling system)	>= 30,000	10,000 to 29,999	< 10,000 ducks	10,000 to 29,999

\*State-only CAFOs are defined as AFOs which are located in the dairy outreach program area (DOPA) or designated by executive as a CAFO. The DOPA includes the following counties: Erath, Bosque, Hamilton, Comanche, Johnson, Hopkins, Wood, and Rains.

**Animal Type:**

- Check the box for the type of animals that will be confined at this facility.
- If your animal type is of the swine species please mark one of the boxes indicating weight of swine at the facility. Check the box for 55 lbs or more if your facility contains swine that weigh greater than 55 pounds, and provide the number of swine that weigh 55 lbs or more. Check the box for under 55 lbs if your facility contains swine that weigh less than 55 pounds, and provide the number of swine that weigh less than 55 lbs. Check the box for both if your facility contains swine that weigh both greater and less than 55 pounds.
- If your animal type is Dairy Cattle, provide the total number of dairy cattle and the number of milking cattle.

For New NOIs, provide the proposed maximum capacity under the general permit as the “**Number Proposed**”.

For Significant Expansion NOIs, provide the proposed maximum capacity under the general permit as the “**Number Proposed**” and provide the currently authorized information.

For Renewals, provide the currently authorized information.

**Manure, Sludge, and/or Wastewater Production and Use**

10. Identify the type of storage for the manure and/or wastewater by indicating if it is temporary storage (less than 30 days) and/or storage of more than 30 days.

11. - 12. Provide the total amount of manure (in tons) and wastewater (in acre-feet) projected to be generated annually by the facility.

13. If the applicant’s facility is going to transfer manure, sludge, and/or wastewater off-site annually to other persons, provide the estimated annual quantity in tons of manure and acre-feet of wastewater that the applicant plans to transfer off-site.

14. If not land applying describe alternative use(s) of manure, sludge, and or wastewater (e.g., composting, pelletizing, energy generation, contract hauler, etc.).

15. Identify if manure, sludge, and wastewater generated by the facility is to be land applied, if so complete the table listing the total number of Land Management Units (LMU), the total number of acres for each LMU, and the estimated application rate for each LMU. Please attach additional pages if your facility contains more than six land management units.

**16. Retention Control Structures (RCS)**

For a CAFO that does not use RCSs, check the “Not Applicable” box.

For CAFO that uses RCSs, indicate if they act in-series. For each RCS list the name used to identify the RCS, the type of structure (i.e. treatment lagoon, holding pond, evaporation pond, or other), provide the total days of storage for each RCS, the required capacity, and the acreage of the drainage area. If your facility has more than six RCSs please attach additional pages.

17. All animal feeding operations, regardless of size, are required to obtain air quality authorization under the Texas Clean Air Act, Texas Health and Safety Code, Chapter 382, Subchapter C. Air quality authorization may be obtained by one of the following:

1) Permit By Rule, Chapter 106, Subchapter F (relating to animal confinement) -This is typically used for the smaller operations and dry litter poultry operations. Certain poultry operations require registration with a PI-7 through the Air Permits Division.

2) Individual permits under Chapter 116 - This is one option to authorize facilities that cannot meet the permit by rule. The permit is processed by the Air Permits Division. For details, contact the Air Permits Division and request assistance on agricultural permitting for New Source Review at 512/239-1240.

3) Air Standard Permit for Animal Feeding Operations - Requirements for this authorization are located in Chapter 321, Subchapter B. Facilities which meet all of the requirements are eligible for coverage. If the facility cannot meet all the requirements, then coverage should be obtained under 1 or 2.

If you have existing air quality authorization, provide the air permit or registration number.

18. An original **USGS Topographic Map** with scale showing the specific location of the production area and property boundaries is required. For existing authorized facilities, a high quality copy of a topographic map may be used in lieu of the original map.

19. The site map shall show the production area and include, at a minimum, pens and open lots, barns, berms, permanent manure storage areas, composting areas, control facilities including RCSs, water wells (abandoned and in use), surface water in the state, and dead animal burial site.

20. The LMU map shall include, at a minimum, the following information: 1) the boundary and acreage of each LMU, 2) all buffer zones required by this permit, 3) the location of the production area, 4) water wells, abandoned and in use, which are on-site or within 500 feet of the facility boundary, 5) all surface water in the state located on-site and within one mile of the property boundary, and 6) the facility boundary.

#### **G. CERTIFICATIONS**

Failure to indicate "Yes" to ALL of the certification items may result in denial of coverage under the general permit.

#### **H. CERTIFICATION FOR WATER QUALITY AUTHORIZATION**

The certification must bear an original signature of a person meeting the signatory requirements specified under 30 Texas Administrative Code (TAC) §305.44.

##### **IF YOU ARE A CORPORATION:**

The regulation that controls who may sign an NOI or similar form is 30 Texas Administrative Code §305.44(a)(1) (see below). According to this code provision, any corporate representative may sign an NOI or similar form so long as the authority to sign such a document has been delegated to that person in accordance with corporate procedures. By signing the NOI or similar form, you are certifying that such authority has been delegated to you. The TCEQ may request documentation evidencing such authority.

##### **IF YOU ARE A MUNICIPALITY OR OTHER GOVERNMENT ENTITY:**

The regulation that controls who may sign an NOI or similar form is 30 Texas Administrative Code §305.44(a)(3) (see below). According to this code provision, only a ranking elected official or principal executive officer may sign an NOI or similar form. Persons such as the City Mayor or County Commissioner will be considered ranking elected officials. In order to identify the principal executive officer of your government entity, it may be beneficial to consult your city charter, county or city ordinances, or the Texas statute(s) under which your government entity was formed. An NOI or similar document that is signed by a government official who is not a ranking elected official or principal executive officer does not conform to §305.44(a)(3). The signatory requirement may not be delegated to a government representative other than those identified in the regulation. By signing the NOI or similar form, you are certifying that you are either a ranking elected official or principal executive officer as required by the administrative code. Documentation demonstrating your position as a ranking elected official or principal executive officer may be requested by the TCEQ.

If you have any questions or need additional information concerning the signatory requirements discussed above, please contact the Texas Commission on Environmental Quality's Environmental Law Division at 512/239-0600.

#### **30 Texas Administrative Code**

##### **§305.44. Signatories to Applications.**

(a) All applications shall be signed as follows.

(1) For a corporation, the application shall be signed by a responsible corporate officer. For purposes of this paragraph, a responsible corporate officer means a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation; or the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures. Corporate procedures governing authority to sign permit or post-closure order applications may provide for assignment or delegation to applicable corporate positions rather than to specific individuals.

(2) For a partnership or sole proprietorship, the application shall be signed by a general partner or the proprietor, respectively.

(3) For a municipality, state, federal, or other public agency, the application shall be signed by either a principal executive officer or a ranking elected official. For purposes of this paragraph, a principal executive officer of a federal agency includes the chief executive officer of the agency, or a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., regional administrator of the EPA).

#### **I. CERTIFICATION FOR AIR STANDARD PERMIT FOR ANIMAL FEEDING OPERATIONS**

Each permittee must sign and date this certification statement if requesting authorization under the Air Standard Permit for Animal Feeding Operations. If you are not requesting air authorization through this NOI, then there is no need to sign the certification.

##### **Additional Co-Applicants**

For additional co-applicants, use page 7 and attach to the NOI. To fill out page 7, see instructions for Section A above. If there is more than one owner, or more than one operator, then each entity must complete an additional co-applicant section.

If renewing a permit, the application form must include the Owner as an applicant and may include the Operator as a co-applicant with the Owner. Changes to the permittee may be made at the time the permit is renewed.

**Texas Commission on Environmental Quality  
General Permit Payment Submittal Form**

Avoid delays by paying online at <https://www6.tceq.texas.gov/epay>

Use this form to submit your Application Fee only if you are mailing your payment.

- Complete items 1 through 5 below:
- Staple your check in the space provided at the bottom of this document.
- **Do not** mail this form with your NOI form.
- **Do not** mail this form to the same address as your NOI.

**Mail this form and your check to:**

BY REGULAR U.S. MAIL

Texas Commission on Environmental Quality  
Financial Administration Division  
Cashier's Office, MC-214  
P.O. Box 13088  
Austin, TX 78711-3088

BY OVERNIGHT/EXPRESS MAIL

Texas Commission on Environmental Quality  
Financial Administration Division  
Cashier's Office, MC-214  
12100 Park 35 Circle  
Austin, TX 78753

Fee Code: **GPA**      General

Permit: TXG920000

1. Check / Money Order No:

2. Amount of Check/Money Order:

3. Date of Check or Money Order:

4. Name on Check or Money Order:

**5. NOI INFORMATION**

If the check is for more than one NOI, list each Project/Site (RE) Name and Physical Address exactly as provided on the NOI. **DO NOT SUBMIT A COPY OF THE NOI WITH THIS FORM AS IT COULD CAUSE DUPLICATE PERMIT ENTRIES.**

See Attached List of Sites (If more space is needed, you may attach a list.)

Project/Site (RE) Name:

Project/Site (RE) Physical Address:

**Staple Check In This Space**



**Notice of Intent (NOI) for Concentrated Animal Feeding Operations under the  
TPDES General Permit (TXG920000)**

**Technical Report for New and Significant Expansions**

**A. Pollutant Sources Management.**

1. Place a check in the box beside each potential pollutant source identified on the facility.
 

Manure	Silage stockpiles	Pesticides	Dead animals
Sludge	Compost	Inorganic fertilizers	Other _____
Wastewater	Feed/Bedding	Lubricants	
Dust	Fuel storage tanks	Bulk cleaning chemicals	
2. For each potential pollutant source, provide the management practices utilized. Provide an attachment if more space is needed.

Potential Pollutant Source	Best Management Practice

**B. Retention Control Structure (RCS).**      Not Applicable for Dry Litter Poultry CAFOs

1. Is any part of the production area located in the 100 year flood plain?      Yes    No
2. Are any playa lakes used for RCSs?    Yes    No
3. Provide the designed volumes for each RCS according to the design calculations and constructed capacities certified by the licensed Texas Professional Engineer. Provide an attachment if more space is needed.

Volume Allocations for RCS(s) (Acre-feet)							
RCS #	Design Rainfall Event Runoff	Process Generated Wastewater	Minimum Treatment Volume	Sludge Accumulation	Water Balance	Required Capacity	Constructed or Proposed Capacity

**C. Land Application.**

Provide the following information concerning land application activities on the facility:

1. What is the Critical Phosphorus Threshold, based on the location of the facility?    200 ppm    350 ppm
2. Total number of acres available for land application: \_\_\_\_\_
3. Provide the proposed crop and yield goal for each LMU. Provide an attachment if more space is needed.

LMU #	Crop 1	Crop 2	Yield Goal	LMU #	Crop 1	Crop 2	Yield Goal

**D. Public Notice Information.**

The applicant must file with the Chief Clerk a copy of an affidavit of the publication within 60 days of receiving the written instructions from the Office of Chief Clerk.

1. Name and address of person responsible for publishing notice of the Executive Director's Preliminary Decision on the NOI and Technical Report:

Name:

Address:

Phone Number:

2. Name and address of a public location where the NOI, Executive Director's Technical Summary, and CAFO General Permit may be reviewed by the public.

Name of Place:

Address of Place:

County of Place:

**E. Attachments.**

Attach the following documents to this Technical Report:

1. Maps

- i. Vicinity map
- ii. Runoff Control map
- iii. NRCS Soil map

2. Professional Certifications

- i. Recharge Feature Certification with supporting documents
- ii. RCS Design Calculations
- iii. RCS Hydrologic Connection (for significant expansions only)
- iv. RCS Constructed Capacity (for significant expansions only)

3. Land Application Not Applicable for New CAFOs.

- i. Copy of previous year's annual soil sampling analyses
- ii. Nutrient Utilization Plan (if required). If the Nutrient Utilization Plan has already been approved by the TCEQ, include the approval letter.

4. Air Standard Permit Summary Not requesting air authorization under the air standard permit.

- i. Area Land Use map. This map must identify property lines, permanent odor sources, and distances and direction to any occupied residence or business structure, school (including associated recreational areas), structure containing a place of worship, or public park within one-mile radius of the permanent odor sources at the AFO. The map shall include the north arrow, scale of map, buffer distances, and date that the map was generated and the date that the distances were verified.
- ii. Odor Control Plan. Please provide if you selected an option with an odor control plan in Section E.20.a of the NOI.
- iii. Written Consent (if you are using consent letters in lieu of the buffer distance).



## Notice of Intent (NOI) for Concentrated Animal Feeding Operations under the TPDES General Permit (TXG920000)

### Technical Report Instructions for New and Significant Expansions

#### A. Pollutant Sources and Management.

1. Place a check in the box beside each potential pollutant source identified on the facility.
2. For each potential pollutant source, provide the management practices utilized. Management practices should address the collection, storage, and final disposition of each potential pollutant source.

#### B. Retention Control Structures (RCSs).

1. The 100 year flood plain is defined as any land area that is subject to a 1.0% or greater chance of flooding in any given year from any source. The Federal Emergency Management Agency (FEMA) has maps for most counties that may be used to determine if the control facilities are located in the 100 year flood plain. To obtain FEMA maps go to <http://www.fema.gov/> or call the FEMA Region VI office in Denton, Texas at (940) 898-5399.
2. Provide the designed volumes for each RCS according to the design calculations and RCS capacities which have been certified by the licensed Texas professional engineer. The certified documents should be located in your pollution prevention plan as required by the general permit. If the RCS has not been constructed, insert the proposed capacity. The constructed or proposed capacity must be equal to or greater than the required capacity. All volumes must be noted in acre-feet.

#### C. Land Application.

1. For areas where the average annual rainfall is 25 inches or less and erosion control is adequate to keep erosion at the soil loss tolerance (T) or less and the closest edge of the field is more than one mile from a named stream, the critical Phosphorus Threshold is 350 parts per million (ppm). For all other areas of the state, the Critical Phosphorus Threshold is 200 ppm.
2. Indicate the total number of acres on-site and off-site that are available for land application. Areas that are buffered should not be included in the total acres.
3. For each Land Management Unit (LMU) provide the proposed crop and yield goal.

#### D. Public Notice Information.

The Office of Chief Clerk will send the person responsible for publishing notice, the notice of the Executive Director's Preliminary Decision on the NOI and Technical Report, for publishing in a newspaper in the country in which the CAFO is located or proposed to be located.

1. Provide the name and address of the person responsible for publishing notice of the executive director's preliminary decision on the NOI and Technical Report. The person identified will receive the notice and instructions for publishing.
2. Provide the name and address of a public building where the NOI, Executive Director's Technical Summary, and CAFO General Permit will be available for review and copying by the public. The public building must be in the county where the CAFO is or will be located

#### E. Attachments.

1. Maps
  - i. Vicinity Map: This map must be a general highway map that shows the location of the CAFO in relation to the nearest town or the nearest intersection of two major (non-county) roads. All roads should be labeled.
  - ii. Runoff Control Map: This map must show the direction of runoff flow in the production area.
  - iii. NRCS Soil Map. This map must show the location of the production area and LMUs in relation to the soil types located on the facility.

2. Professional Certifications. These documents must be certified by a licensed Texas professional engineer or licensed Texas professional geoscientist, in accordance with the general permit. They will be located in the Pollution Prevention Plan. The Recharge Feature Certification and supporting documents must include the following :
  - i. Documentation of the sources and methods used to identify recharge features.
  - ii. Documentation of the method used to identify and document any previously unidentified recharge features found during construction of the facility.
  - iii. Any pertinent records of maps obtained from the sources searched for recharge features. At a minimum, these sources must include:
    1. Railroad Commission of Texas;
    2. a Groundwater Conservation District, if applicable;
    3. Texas Water Development Board;
    4. Texas Commission on Environmental Quality;
    5. Natural Resources Conservation Service;
    6. previous owner of site, if available; and
    7. on-site inspection.
  - iv. If recharge features are found on the property the applicant must submit a plan signed and sealed by a licensed Texas professional engineer or licensed Texas professional geoscientist to prevent impacts to an aquifer from any recharge feature present.
  - v. Narrative description of site specific geology, soils, hydrology, and subsurface geology.
  - vi. Map identifying all recharge features with appropriate buffers.
  - vii. Drillers well logs (if available) for wells on-site and within 500 feet of the property boundary.
  - viii. Parts of the Pollution Prevention Plan required under Part III.A TXG920000 including:
    1. Part 4 (b) Soil Erosion;
    2. Part 4 (c) Well Protection Requirements;
    3. Part 4 (e) 100-year Floodplain;
    4. Part 11 (b) (7) Backflow Prevention;
    5. Part 11 (e) (1) Surface Water and Watercourses Buffer, (2) Sink Holes, and (3) Impaired Water Bodies; and
    6. Part 15 (c) Groundwater Monitoring Plan (if applicable).
3. Land Application.
  - i. For significant expansions, provide a copy of the previous year's annual soil sampling analyses.
  - ii. If the soil phosphorus concentration exceeds the Critical Phosphorus Threshold, submit a Nutrient Utilization Plan. If the Nutrient Utilization Plan has already been submitted and approved by the TCEQ, include the approval letter.
4. Air Standard Permit Summary. These attachments are only required if you are requesting air authorization under the air standard permit.
  - i. Area Land Use map. This map must identify property lines, permanent odor sources, and distances and direction to any occupied residence or business structure, school (including associated recreational areas), structures containing a place of worship, or public park within a one-mile radius of the permanent odor sources at the CAFO. The map shall include a north arrow, scale of map, buffer distances, and date that the map was generated and the date that the distances were verified.
  - ii. Odor Control Plan. Please provide if you selected an option with an odor control plan in Section E.20.a of the NOI.
  - iii. Written Consent. Provide these if you are using consent letters in lieu of the buffer distance. Requirements for written consent letters can be found in 30 TAC 321.43(j) (2) (D).