



Quarterly Sludge Summary Report Form

(Class B)

- Note 1:** If your site has more than one land application field, please submit a separate form for each field.
Note 2: Please place this sheet at the top of your Quarterly Sludge Report.
Note 3: If you operate other registered/permited sludge land application sites, a form should be submitted for each site.
Note 4: Please send a copy of this sheet and all attachments to the TCEQ regional office in your area.

For TCEQ Quarter 3rd Reporting period from March 1st, 2013 to May 31st, 2013

PERMIT NO.: 04950 DATE: 6/14/2013

NAME OF PERMITTEE: Terra Renewal Services, Inc.

MAILING ADDRESS: PO Box 3036
Russellville, AR 72811

Contact Name: Marcus Tilley Telephone No: 479-668-4035

Field Number (if any): _____ (Submit separate form for each field, if site has two or more fields)

- | | | |
|---|-------------|--------------------|
| 1. Class B Sewage Sludge Land Applied: | <u>0.00</u> | dry tons / quarter |
| 2. Treated Domestic Septage - Land Applied: | <u>0.00</u> | gallons / quarter |
| Method used to treat Domestic Septage: | <u>N/A</u> | |
| 3. Water Treatment Plant Sludge - Land Applied: | <u>0.00</u> | dry tons / quarter |
| 4. Class A sludge land applied : | <u>0.00</u> | dry tons / quarter |
| a. Acreage used for Sludge Application/disposal at this site: | <u>0.00</u> | acres |
| b. Site Vegetation (such as grass type etc) and # of cuttings: | _____ | |
| c. Does any of the sludge you have generated or received DOES NOT MEET concentration limits for any of the metals listed in Table 3 of "30 TAC §312.43 (b)"? Yes _____ No _____ | | |
| d. Site location: Latitude: _____, Longitude: _____ | | |
| e. Site physical address: | _____ | |

Sewage Sludge Only - Please attach information regarding the following items:

- * Please note the following information should be provided in computer-generated report format:
 * Please place check mark before each item below to indicate that the item is attached to this report.

- | | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | 1. Metal concentration, pathogen analysis data and vector attraction certifications of sludge for each source. |
| <input checked="" type="checkbox"/> | 2. Provide a list containing the name and permit number of each source of sludge. |
| <input checked="" type="checkbox"/> | 3. Date of delivery of each load of sludge land applied. |
| <input checked="" type="checkbox"/> | 4. Date of land application of each load of sludge. |
| <input checked="" type="checkbox"/> | 5. The cumulative metal loading rates for any metals as listed in Table 2 of 30 TAC §312.43 (b)?" |
| <input checked="" type="checkbox"/> | 6. The suggested agronomic rate for the class B sludge. |

PLEASE MAIL THE COMPLETED QUARTERLY REPORT TO :

Texas Commission on Environmental Quality
 Municipal Permits Team (MC 148)
 Wastewater Permitting Section
 P.O. Box 13087
 Austin, TX 78711-3087