



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 <u>2nd</u> Reporting period from <u>Dec 1, 2013</u> to <u>Feb. 28, 2014</u>	
PERMIT NO.: <u>WQ 4989</u>	DATE: <u>3-14-2014</u>
NAME OF PERMITTEE: <u>Terra Renewal Services, Inc.</u>	
MAILING ADDRESS: <u>P.O. Box 399</u> <u>Dardanelle, AR 72834</u>	
Contact Name: <u>Marcus Tilley</u>	Telephone No: <u>479-668-4035</u>

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

1. Class B Sewage Sludge Land Applied: _____ 0.00 dry tons / quarter
2. Treated Domestic Septage - Land Applied: _____ 0.00 gallons / quarter
 Method used to treat Domestic Septage: _____ N/A
3. Water Treatment Plant Sludge - Land Applied: _____ 0.00 dry tons / quarter
4. Class A sludge land applied: _____ 0.00 dry tons / quarter
 - a. Acreage used for Sludge Application/disposal at this site: _____ 0.00 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.

- _____ 1. Metal concentration, pathogen analysis data and vector attraction certifications of sludge for each source.
- _____ 2. Provide a list containing the name and permit number of each source of sludge.
- _____ 3. Date of delivery of each load of sludge land applied.
- _____ 4. Date of land application of each load of sludge.
- _____ 5. The cumulative metal loading rates for any metals as listed in Table 2 of 30 TAC §312.43 (b)?"
- _____ 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