

# HEARING REQUEST(S) / REQUESTS FOR RECONSIDERATION

**Name:** City of Star Harbor

**Agenda Date:** June 1, 2022

**TCEQ Docket No.** 2022-0325-MWD

**TCEQ ID No.** WQ0016017001

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*Contact the Commissioners' Agenda Coordinator with questions (512) 239-3300.*

<b>Backup Material</b>	<b>Filed</b>	<b>Not Filed</b>
<a href="#">Agenda Setting Letter</a>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<a href="#">Request(s)</a>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<a href="#">Executive Director's Response to Comment(s)</a>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<a href="#">Draft Permit / Technical Information</a>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Applicant's Response to Request(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<a href="#">Executive Director's Response to Request(s)</a>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<a href="#">Public Interest Counsel's Response to Request(s)</a>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<a href="#">Protestants' Reply to Response(s)</a>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
<a href="#">REVISED Draft Permit / Technical Information</a>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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