TEXAS COMMISSION ON ENVIRONMENTAL QUALITY
DOMESTIC WASTEWATER PERMIT APPLICATION
FOR A
TEXAS POLLUTANT DISCHASRGE ELIMINATION SYSTEM PERMIT

FOR

WILLIAMSON COUNTY MUNICIPAL UTILITY DISTRICT NO. 44 WASTEWATER TREATMENT PLANT

MARCH 2022

PREPARED FOR

THE VANTAGE AUSTIN LLC
5900 BALCONES DRIVE, SUITE 100
AUSTIN, TEXAS 78731

PREPARED BY

LJA Engineering, Inc.
7500 RIALTO BLVD
BUILDING II, SUITE 100
Austin, Texas 78735
(512) 439-4700

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

April 15, 2022

Ms. Lauren Crone, P.E.
Project Manager
LJA Engineering Inc.
7500 Rialto Boulevard Building II, Suite 100
Austin, Texas 78735

Re: Application for Proposed Permit No. WQ0016132001 (EPA I.D TX 0142603)
To be Issued to The Vantage Austin LLC
CN606001055, RN111467338

Dear Ms. Crone:

We have received the application for the above referenced permit, and it is currently under review. Your attention to the following items is requested before we can declare the application administratively complete. Please submit one original and two copies (including a cover letter) of the complete response. (You can email your response to my attention).

1. Section II, item 17 and 18 on page 1 of the Core Data Form (CDF). These items were left blank. However, it is needed. Please complete page 1 of the CDF.

2. Section 1, item C on page 14 of the Administrative Report 1.1: We are unable to locate the 4sets of labels or readable/writable CD with the materials received. Please provide either four sets of labels, or CD, or email the Microsoft Word document containing the mailing labels and a separate the cross-referenced mailing list of the affected landowners.

3. The following is a portion of the Notice of Receipt of Application and Intent to Obtain a Water Quality Permit which contains information relevant to your application. Please read it carefully and indicate if it contains any errors or omissions. The complete notice will be sent to you once the application is declared administratively complete.

   The Vantage Austin LLC, 5900 Balcones Drive, Suite 100, Austin, Texas 78731, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016132001 (EPA I.D. No. TX0142603) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 450,000 gallons per day. The domestic wastewater treatment facility will be located approximately 1 mile north of the intersection of County Road 140 and County Road 194, in Williamson County, Texas 78759. The discharge route will be from the plant site to East Fork Ranger Branch, thence to Ranger Branch, thence to Berry Creek, thence to the San Gabriel River. TCEQ received this application on March 25, 2022. The permit application is available for viewing and copying at Weir City Hall, 2205 South

Main Street, Weir, Texas. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application. https://tceq.maps.arcgis.com/apps/webappviewer/index.html?id=db5bac44afbc468bbddd360f8168250f&marker=-97.60621%2C30.69343&level=12

Further information may also be obtained from The Vantage Austin LLC at the address stated above or by calling Mr. Daniel Ryan, P.E., Vice President, LJA Engineering Inc., at 512-439-4700.

Please submit the complete response, addressed to my attention by April 29, 2022. If you should have any questions, please do not hesitate to call me at (512) 239-4912.

Sincerely,

Abesha Michael

Abesha H. Michael
Applications Review and Processing Team (MC148)
Water Quality Division
Texas Commission of Environmental Quality

cc: Mr. Daniel Ryan, P.E., Vice President, LJA Engineering Inc., 7500 Rialto Boulevard, Building II, Suite 100, Austin, Texas 78735

TCEQ Core Data Form

TCEQ Use Only

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (*If other is checked please describe in space provided.*)

☒ New Permit, Registration or Authorization (*Core Data Form should be submitted with the program application.*)

☐ Renewal (*Core Data Form should be submitted with the renewal form*) ☐ Other

2. Customer Reference Number *(if issued)*	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number *(if issued)*
CN 606001055		RN

SECTION II: Customer Information

4. General Customer Information | **5. Effective Date for Customer Information Updates** (mm/dd/yyyy)

☐ New Customer ☐ Update to Customer Information ☐ Change in Regulated Entity Ownership
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)

The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).

6. Customer Legal Name (*If an individual, print last name first: eg: Doe, John*) *If new Customer, enter previous Customer below:*

The Vantage Austin LLC

7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number *(if applicable)*
0804434355	32083204324		

11. Type of Customer: ☐ Corporation ☐ Individual Partnership: ☐ General ☐ Limited
Government: ☐ City ☐ County ☐ Federal ☐ State ☐ Other ☐ Sole Proprietorship ☒ Other: Limited Liability Company

12. Number of Employees
☒ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher

13. Independently Owned and Operated?
☒ **Yes** ☐ **No**

14. Customer Role (Proposed or Actual) – *as it relates to the Regulated Entity listed on this form. Please check one of the following*

☒ Owner ☐ Operator ☐ Owner & Operator
☐ Occupational Licensee ☐ Responsible Party ☐ Voluntary Cleanup Applicant ☐ Other:

15. Mailing Address:

5900 Balcones Dr. Ste. 100

City	State	ZIP	ZIP + 4
Austin	TX	78731	

16. Country Mailing Information (*if outside USA*)

17. E-Mail Address (*if applicable*)
seshuyal@gmail.com

18. Telephone Number	19. Extension or Code	20. Fax Number (*if applicable*)
(248) 894-3530		( ) -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (*If 'New Regulated Entity" is selected below this form should be accompanied by a permit application*)

☒ New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information

The Regulated Entity Name submitted may be updated in order to meet TCEQ Agency Data Standards (removal of organizational endings such as Inc, LP, or LLC).

22. Regulated Entity Name (*Enter name of the site where the regulated action is taking place.*)

Williamson County Municipal Utility District No.44 Wastewater Treatment Plant

Your transaction is complete. Thank you for using TCEQ ePay.

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the TCEQ ePay system. Print this receipt and the vouchers for your records. An email receipt has also been sent.

Transaction Information

Trace Number: 582EA000485025
Date: 03/25/2022 09:04 AM
Payment Method: CC - Authorization 0000025058
ePay Actor: LAUREN CRONE
Actor Email: lcrone@lja.com
IP: 170.55.94.226
TCEQ Amount: $1,250.00
Texas.gov Price: $1,278.38*

* This service is provided by Texas.gov, the official website of Texas. The price of this service includes funds that support the ongoing operations and enhancements of Texas.gov, which is provided by a third party in partnership with the State.

Payment Contact Information

Name: JOHN CLARK
Company: LJA ENGINEERING INC
Address: 3600 W SAM HOUSTON PKWY S, HOUSTON, TX 77042
Phone: 512-439-4700

Cart Items

Click on the voucher number to see the voucher details.

Voucher	Fee Description	AR Number	Amount
570133	WW PERMIT - FACILITY WITH FLOW >= .25 & < .50 MGD - NEW AND MAJOR AMENDMENTS		$1,200.00
570134	30 TAC 305.53B WQ NOTIFICATION FEE		$50.00
		TCEQ Amount:	$1,250.00

ePay Again Exit ePay

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the TCEQ ePay system. Print this receipt for your records.

TABLE OF CONTENTS

EXHIBIT 1

ADMINISTRATIVE REPORTS 1.0 AND 1.1

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT: The Vantage Austin LLC

PERMIT NUMBER: Click here to enter text

Indicate if each of the following items is included in your application.

	Y	N		Y	N
Administrative Report 1.0	☒	☐	Original USGS Map	☒	☐
Administrative Report 1.1	☒	☐	Affected Landowners Map	☒	☐
SPIF	☒	☐	Landowner Disk or Labels	☒	☐
Core Data Form	☒	☐	Buffer Zone Map	☒	☐
Technical Report 1.0	☒	☐	Flow Diagram	☒	☐
Technical Report 1.1	☒	☐	Site Drawing	☒	☐
Worksheet 2.0	☒	☐	Original Photographs	☒	☐
Worksheet 2.1	☐	☒	Design Calculations	☒	☐
Worksheet 3.0	☐	☒	Solids Management Plan	☒	☐
Worksheet 3.1	☐	☒	Water Balance	☐	☒
Worksheet 3.2	☐	☒			
Worksheet 3.3	☐	☒			
Worksheet 4.0	☐	☒			
Worksheet 5.0	☐	☒			
Worksheet 6.0	☐	☒			
Worksheet 7.0	☐	☒			

For TCEQ Use Only

Segment Number _____County _____
Expiration Date _____Region _____
Permit Number _____

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

APPLICATION FOR A DOMESTIC WASTEWATER PERMIT ADMINISTRATIVE REPORT 1.0

If you have questions about completing this form please contact the Applications Review and Processing Team at 512-239-4671.

Section 1. Application Fees (Instructions Page 29)

Indicate the amount submitted for the application fee (check only one).

Flow	New/Major Amendment	Renewal
<0.05 MGD	$350.00 ☐	$315.00 ☐
≥0.05 but <0.10 MGD	$550.00 ☐	$515.00 ☐
≥0.10 but <0.25 MGD	$850.00 ☐	$815.00 ☐
≥0.25 but <0.50 MGD	$1,250.00 ☒	$1,215.00 ☐
≥0.50 but <1.0 MGD	$1,650.00 ☐	$1,615.00 ☐
≥1.0 MGD	$2,050.00 ☐	$2,015.00 ☐

Minor Amendment (for any flow) $150.00 ☐

Payment Information:

Mailed Check/Money Order Number: Click here to enter text

Check/Money Order Amount: $1,250

Name Printed on Check: TCEQ

EPAY Voucher Number: Click here to enter text

Copy of Payment Voucher enclosed? Yes ☐

Section 2. Type of Application (Instructions Page 29)

☒ New TPDES

☐ Major Amendment *with* Renewal

☐ Major Amendment *without* Renewal

☐ Renewal without changes

☐ New TLAP

☐ Minor Amendment *with* Renewal

☐ Minor Amendment *without* Renewal

☐ Minor Modification of permit

For amendments or modifications, describe the proposed changes: Click here to enter text.

For existing permits:

Permit Number: WQ00 Click here to enter text

EPA I.D. (TPDES only): TX Click here to enter text

Expiration Date: Click here to enter text.

Section 3. Facility Owner (Applicant) and Co-Applicant Information (Instructions Page 29)

A. The owner of the facility must apply for the permit.

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

The Vantage Austin LLC

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

If the applicant is currently a customer with the TCEQ, what is the Customer Number (CN)? You may search for your CN on the TCEQ website at http://www15.tceq.texas.gov/crpub/

CN: Click here to enter text.

What is the name and title of the person signing the application? The person must be an executive official meeting signatory requirements in *30 TAC § 305.44*.

Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Seshu Yalamanchili

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text.

Title: Owner

B. Co-applicant information. Complete this section only if another person or entity is required to apply as a co-permittee.

What is the Legal Name of the co-applicant applying for this permit?

Click here to enter text.

(The legal name must be spelled exactly as filed with the TX SOS, with the County, or in the legal documents forming the entity.)

If the co-applicant is currently a customer with the TCEQ, what is the Customer Number (CN)? You may search for your CN on the TCEQ website at: http://www15.tceq.texas.gov/crpub/

CN: Click here to enter text.

What is the name and title of the person signing the application? The person must be an executive official meeting signatory requirements in *30 TAC § 305.44*.

Prefix (Mr., Ms., Miss): Click here to enter text.

First and Last Name: Click here to enter text.

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text.

Title: Click here to enter text.

Provide a brief description of the need for a co-permittee: Click here to enter text.

C. Core Data Form

Complete the Core Data Form for each customer and include as an attachment. If the customer type selected on the Core Data Form is **Individual**, complete **Attachment 1** of Administrative Report 1.0.

Attachment: Appendix A

Section 4. Application Contact Information (Instructions Page 30)

This is the person(s) TCEQ will contact if additional information is needed about this application. Provide a contact for administrative questions and technical questions.

A. Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Daniel Ryan

Credential (P.E, P.G., Ph.D., etc.): P.E.

Title: Vice President

Organization Name: LJA Engineering

Mailing Address: 7500 Rialto Blvd. Building II. Suite 100

City, State, Zip Code: Austin, TX 78735

Phone No.: 512-439-4700 Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: dryan@lja.com

Check one or both: ☒ Administrative Contact ☒ Technical Contact

B. Prefix (Mr., Ms., Miss): Ms.

First and Last Name: Lauren Crone

Credential (P.E, P.G., Ph.D., etc.): P.E.

Title: Project Manager

Organization Name: LJA Engineering

Mailing Address: 7500 Rialto Blvd. Building II, Suite 100

City, State, Zip Code: Austin, TX 78735

Phone No.: 512-439-4700 Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: lcrone@lja.com

Check one or both: ☒ Administrative Contact ☒ Technical Contact

Section 5. Permit Contact Information (Instructions Page 30)

Provide two names of individuals that can be contacted throughout the permit term.

A. Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Daniel Ryan

Credential (P.E, P.G., Ph.D., etc.): P.E.

Title: Vice President

Organization Name: LJA Engineering

Mailing Address: 7500 Rialto Blvd. Building II. Suite 100

City, State, Zip Code: Austin, TX 78735

Phone No.: 512-439-4700 Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: dryan@lja.com

B. Prefix (Mr., Ms., Miss): Ms.

First and Last Name: Lauren Crone

Credential (P.E, P.G., Ph.D., etc.): P.E.

Title: Project Manager

Organization Name: LJA Engineering

Mailing Address: 7500 Rialto Blvd. Building II, Suite 100

City, State, Zip Code: Austin, TX 78735

Phone No.: 512-439-4700 Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: lcrone@lja.com

Section 6. Billing Information (Instructions Page 30)

The permittee is responsible for paying the annual fee. The annual fee will be assessed to permits ***in effect on September 1 of each year***. The TCEQ will send a bill to the address provided in this section. The permittee is responsible for terminating the permit when it is no longer needed (using form TCEQ-20029).

Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Seshu Yalamanchili

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text.

Title: Owner

Organization Name: The Vantage Austin LLC

Mailing Address: 5900 Balcones Dr. Ste. 100

City, State, Zip Code: Austin, TX 78731

Phone No.: Click here to enter text. Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: Click here to enter text.

Section 7. DMR/MER Contact Information (Instructions Page 31)

Provide the name and complete mailing address of the person delegated to receive and submit Discharge Monitoring Reports (EPA 3320-1) or maintain Monthly Effluent Reports.

Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Seshu Yalamanchili

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text.

Title: Owner

Organization Name: The Vantage Austin LLC

Mailing Address: 5900 Balcones Dr. Ste. 100

City, State, Zip Code: Austin, TX 78731

Phone No.: Click here to enter text. Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: Click here to enter text.

DMR data is required to be submitted electronically. Create an account at: https://www.tceq.texas.gov/permitting/netdmr/netdmr.html.

Section 8. Public Notice Information (Instructions Page 31)

A. Individual Publishing the Notices

Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Daniel Ryan

Credential (P.E, P.G., Ph.D., etc.): P.E.

Title: Vice President

Organization Name: LJA Engineering

Mailing Address: 7500 Rialto Blvd. Building II, Suite 100

City, State, Zip Code: Austin, TX 78735

Phone No.: 512-439-4700 Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: dryan@lja.com

B. Method for Receiving Notice of Receipt and Intent to Obtain a Water Quality Permit Package

Indicate by a check mark the preferred method for receiving the first notice and instructions:

☒ E-mail Address

☐ Fax

☐ Regular Mail

C. Contact person to be listed in the Notices

Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Daniel Ryan

Credential (P.E, P.G., Ph.D., etc.): P.E.

Title: Vice President

Organization Name: LJA Engineering

Phone No.: 512-439-4700 Ext.: Click here to enter text

E-mail: dryan@lja.com

D. Public Viewing Information

If the facility or outfall is located in more than one county, a public viewing place for each county must be provided.

Public building name: City of Weir City Hall

Location within the building: Front Desk

Physical Address of Building: 2205 S Main Street

City: Weir County: Williamson County

Contact Name: Veronica Garner

Phone No.: 512-863-7984 Ext.: Click here to enter text

E. Bilingual Notice Requirements:

This information **is required** for **new, major amendment, and renewal applications**. It is not required for minor amendment or minor modification applications.

This section of the application is only used to determine if alternative language notices will be needed. Complete instructions on publishing the alternative language notices will be in your public notice package.

Please call the bilingual/ESL coordinator at the nearest elementary and middle schools and obtain the following information to determine whether an alternative language notices are required.

1. Is a bilingual education program required by the Texas Education Code at the elementary or middle school nearest to the facility or proposed facility?

   ☒ Yes ☐ No

   If **no**, publication of an alternative language notice is not required; **skip to** Section 9 below.

2. Are the students who attend either the elementary school or the middle school enrolled in a bilingual education program at that school?

   ☒ Yes ☐ No

3. Do the students at these schools attend a bilingual education program at another location?

   ☐ Yes ☒ No

4. Would the school be required to provide a bilingual education program but the school has waived out of this requirement under 19 TAC §89.1205(g)?

   ☐ Yes ☒ No

5. If the answer is yes to question 1, 2, 3, or 4, public notices in an alternative language are required. Which language is required by the bilingual program? Spanish

Section 9. Regulated Entity and Permitted Site Information (Instructions Page 33)

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. **RN** Click here to enter text

Search the TCEQ's Central Registry at http://www15.tceq.texas.gov/crpub/ to determine if the site is currently regulated by TCEQ.

B. Name of project or site (the name known by the community where located):

Williamson County M.U.D. No.44 Wastewater Treatment Plant

C. Owner of treatment facility: The Vantage Austin LLC

Ownership of Facility: ☐ Public ☒ Private ☐ Both ☐ Federal

D. Owner of land where treatment facility is or will be:

Prefix (Mr., Ms., Miss): Click here to enter text

First and Last Name: The Vantage Austin LLC

Mailing Address: 5900 Balcones Dr. Ste. 100

City, State, Zip Code: Austin, TX 78731

Phone No.: Click here to enter text E-mail Address: Click here to enter text

If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions.

Attachment: Click here to enter text

E. Owner of effluent disposal site:

Prefix (Mr., Ms., Miss): Click here to enter text

First and Last Name: Click here to enter text

Mailing Address: Click here to enter text

City, State, Zip Code: Click here to enter text

Phone No.: Click here to enter text E-mail Address: Click here to enter text

If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions.

Attachment: Click here to enter text

F. Owner of sewage sludge disposal site (if authorization is requested for sludge disposal on property owned or controlled by the applicant):

Prefix (Mr., Ms., Miss): Click here to enter text.

First and Last Name: Click here to enter text.

Mailing Address: Click here to enter text.

City, State, Zip Code: Click here to enter text.

Phone No.: Click here to enter text. E-mail Address: Click here to enter text.

If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions.

Attachment: Click here to enter text.

Section 10. TPDES Discharge Information (Instructions Page 34)

A. Is the wastewater treatment facility location in the existing permit accurate?

☐ Yes ☐ No

If **no**, **or a new permit application**, please give an accurate description:

New Permit: The proposed WWTP is located approximately 1 mile North of the intersection of county roads 194 and 140. The project is South of county road 149 and West of FM 1105, and located in Williamson County.

B. Are the point(s) of discharge and the discharge route(s) in the existing permit correct?

☐ Yes ☐ No

If **no**, **or a new or amendment permit application**, provide an accurate description of the point of discharge and the discharge route to the nearest classified segment as defined in 30 TAC Chapter 307:

New Permit: From the proposed treatment plant, effluent will be discharged into the East Fork Ranger Branch, then Ranger Branch, and then into Berry Creek (Stream Segment 1248A).

City nearest the outfall(s): Weir

County in which the outfalls(s) is/are located: Williamson County

Outfall Latitude: 30.695937 Longitude: -97.60599

C. Is or will the treated wastewater discharge to a city, county, or state highway right-of-way, or a flood control district drainage ditch?

☐ Yes ☒ No

If **yes**, indicate by a check mark if:

☐ Authorization granted ☐ Authorization pending

For **new and amendment** applications, provide copies of letters that show proof of contact and the approval letter upon receipt.

Attachment: Click here to enter text.

D. For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge.

N/A

Section 11. TLAP Disposal Information (Instructions Page 36)

A. For TLAPs, is the location of the effluent disposal site in the existing permit accurate?

☐ Yes ☐ No

If **no, or a new or amendment permit application**, provide an accurate description of the disposal site location:

Click here to enter text.

B. City nearest the disposal site: Click here to enter text.

C. County in which the disposal site is located: Click here to enter text.

D. Disposal Site Latitude: Click here to enter text. Longitude: Click here to enter text.

E. For **TLAPs**, describe the routing of effluent from the treatment facility to the disposal site:

Click here to enter text.

F. For **TLAPs**, please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained:

Click here to enter text.

Section 12. Miscellaneous Information (Instructions Page 37)

A. Is the facility located on or does the treated effluent cross American Indian Land?

☐ Yes ☒ No

B. If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?

☐ Yes ☐ No ☒ Not Applicable

If No, or if a new onsite sludge disposal authorization is being requested in this permit

application, provide an accurate location description of the sewage sludge disposal site.

Click here to enter text

C. Did any person formerly employed by the TCEQ represent your company and get paid for service regarding this application?

☐ Yes ☒ No

If yes, list each person formerly employed by the TCEQ who represented your company and was paid for service regarding the application:

Click here to enter text

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If **yes**, provide the following information:

Account number: Click here to enter text Amount past due: Click here to enter text

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If **yes**, please provide the following information:

Enforcement order number: Click here to enter text Amount past due: Click here to enter text

Section 13. Attachments (Instructions Page 38)

Indicate which attachments are included with the Administrative Report. Check all that apply:

☐ Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant.

☒ Original full-size USGS Topographic Map with the following information:

- Applicant's property boundary
- Treatment facility boundary
- Labeled point of discharge for each discharge point (TPDES only)
- Highlighted discharge route for each discharge point (TPDES only)
- Onsite sewage sludge disposal site (if applicable)
- Effluent disposal site boundaries (TLAP only)
- New and future construction (if applicable)
- 1 mile radius information

- 3 miles downstream information (TPDES only)
- All ponds.

☐ Attachment 1 for Individuals as co-applicants

☐ Other Attachments. Please specify: Appendix A – Core Data Form

Appendix B – USGS Map

Appendix C – Affected Landowner Map

Appendix D – Original Photographs

Appendix E – Buffer Zone Map

Appendix F – SPIF Map

Appendix G – Process Flow Diagram

Appendix H – Site Drawing

Appendix I – Design Calculations

Appendix J – FEMA Flood Maps

Appendix K – Wind Rose

Appendix L – Sewage Solids Management Plan

Appendix M – Regionalization Analysis

Section 14. Signature Page (Instructions Page 39)

If co-applicants are necessary, each entity must submit an original, separate signature page.

Permit Number:

Applicant: The Vantage Austin LLC

Certification:

I 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.

Signatory name (typed or printed): Seshu Yalamanchili

Signatory title: Owner

Signature: S.R. Yalamanchili Date: 03/21/2022

(Use blue ink)

Subscribed and Sworn to before me by the said Seshu Yalamanchili

on this 21st day of March, 2022.

My commission expires on the 20th day of May, 2022.

Notary Public

PATRICK HIGLEY NOTARY PUBLIC STATE OF TEXAS ID# 129825411 EXPIRES 5-20-2022

[SEAL]

Williamson County, Texas

DOMESTIC ADMINISTRATIVE REPORT 1.1

The following information is required for new and amendment applications.

Section 1. Affected Landowner Information (Instructions Page 41)

A. Indicate by a check mark that the landowners map or drawing, with scale, includes the following information, as applicable:

- ☒ The applicant's property boundaries
- ☒ The facility site boundaries within the applicant's property boundaries
- ☒ The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone
- ☒ The property boundaries of all landowners surrounding the applicant's property (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
- ☒ The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream
- ☒ The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge
- ☐ The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides
- ☐ The boundaries of the effluent disposal site (for example, irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property
- ☐ The property boundaries of all landowners surrounding the effluent disposal site
- ☐ The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners surrounding the applicant's property boundaries where the sewage sludge land application site is located
- ☐ The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (for example, sludge surface disposal site or sludge monofill) is located

B. ☒ Indicate by a check mark that a separate list with the landowners' names and mailing addresses cross-referenced to the landowner's map has been provided.

C. Indicate by a check mark in which format the landowners list is submitted:

☐ Readable/Writeable CD ☒ Four sets of labels

D. Provide the source of the landowners' names and mailing addresses: Williamson Central Appraisal District

E. As required by *Texas Water Code § 5.115*, is any permanent school fund land affected by this application?

☐ Yes ☒ No

If **yes**, provide the location and foreseeable impacts and effects this application has on the land(s):

Click here to enter text.

Section 2. Original Photographs (Instructions Page 44)

Provide original ground level photographs. Indicate with checkmarks that the following information is provided.

☒ At least one original photograph of the new or expanded treatment unit location

☒ At least two photographs of the existing/proposed point of discharge and as much area downstream (photo 1) and upstream (photo 2) as can be captured. If the discharge is to an open water body (e.g., lake, bay), the point of discharge should be in the right or left edge of each photograph showing the open water and with as much area on each respective side of the discharge as can be captured.

☒ At least one photograph of the existing/proposed effluent disposal site

☒ A plot plan or map showing the location and direction of each photograph

Section 3. Buffer Zone Map (Instructions Page 44)

A. Buffer zone map. Provide a buffer zone map on 8.5 x 11-inch paper with all of the following information. The applicant's property line and the buffer zone line may be distinguished by using dashes or symbols and appropriate labels.

- The applicant's property boundary;
- The required buffer zone; and
- Each treatment unit; and
- The distance from each treatment unit to the property boundaries.

B. Buffer zone compliance method. Indicate how the buffer zone requirements will be met. Check all that apply.

☒ Ownership

☐ Restrictive easement

☐ Nuisance odor control

☐ Variance

C. Unsuitable site characteristics. Does the facility comply with the requirements regarding unsuitable site characteristic found in 30 TAC § 309.13(a) through (d)?

☒ Yes ☐ No

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: _____Renewal _____Major Amendment ____Minor Amendment _____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

_____ Texas Historical Commission _____ U.S. Fish and Wildlife

_____ Texas Parks and Wildlife Department _____ U.S. Army Corps of Engineers

This form applies to TPDES permit applications only. (Instructions, Page 53)

The SPIF must be completed as a separate document. The TCEQ will mail a copy of the SPIF to each agency as required by the TCEQ agreement with EPA. If any of the items are not completely addressed or further information is needed, you will be contacted to provide the information before the permit is issued. Each item must be completely addressed.

Do not refer to a response of any item in the permit application form. Each attachment must be provided with this form separately from the administrative report of the application. The application will not be declared administratively complete without this form being completed in its entirety including all attachments.

The following applies to all applications:

1. Permittee: The Vantage Austin LLC

   Permit No. WQ00 Click here to enter text EPA ID No. TX Click here to enter text

   Address of the project (or a location description that includes street/highway, city/vicinity, and county):

   The proposed WWTP is located approximately 1 mile North of the intersection of county roads 194 and 140, in Williamson County, Texas 78626.

Provide the name, address, phone and fax number of an individual that can be contacted to answer specific questions about the property.

Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Daniel Ryan

Credential (P.E, P.G., Ph.D., etc.): P.E.

Title: Vice President

Mailing Address: 7500 Rialto Blvd. Building II, Suite 100

City, State, Zip Code: Austin, TX 78735

Phone No.: 512-439-4700 Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: dryan@lja.com

2. List the county in which the facility is located: Williamson County
3. If the property is publicly owned and the owner is different than the permittee/applicant, please list the owner of the property.

Click here to enter text.

4. Provide a description of the effluent discharge route. The discharge route must follow the flow of effluent from the point of discharge to the nearest major watercourse (from the point of discharge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify the classified segment number.

New Permit: From the proposed treatment plant, effluent will be discharged into the East Fork Ranger Branch, then Ranger Branch, and then into Berry Creek (Stream Segment 1248A). .

5. Please provide a separate 7.5-minute USGS quadrangle map with the project boundaries plotted and a general location map showing the project area. Please highlight the discharge route from the point of discharge for a distance of one mile downstream. (This map is required in addition to the map in the administrative report).

Provide original photographs of any structures 50 years or older on the property.

Does your project involve any of the following? Check all that apply.

- ☒ Proposed access roads, utility lines, construction easements
- ☐ Visual effects that could damage or detract from a historic property's integrity
- ☐ Vibration effects during construction or as a result of project design
- ☒ Additional phases of development that are planned for the future
- ☐ Sealing caves, fractures, sinkholes, other karst features

☐ Disturbance of vegetation or wetlands

6. List proposed construction impact (surface acres to be impacted, depth of excavation, sealing of caves, or other karst features):

Approximately 395 acres to be impacted through construction of subdivision improvements. No planned sealing of caves or other features.

7. Describe existing disturbances, vegetation, and land use:

Farmland

THE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR AMENDMENTS TO TPDES PERMITS

8. List construction dates of all buildings and structures on the property:

N/A

9. Provide a brief history of the property, and name of the architect/builder, if known.

Property is undeveloped and has been used for farming. No builder has been identified however, the proposed single-family development will include one or more production builders.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION

DOMESTIC TECHNICAL REPORT 1.0

The Following Is Required For All Applications

Renewal, New, And Amendment

Section 1. Permitted or Proposed Flows (Instructions Page 51)

A. Existing/Interim I Phase

Design Flow (MGD): 0.15

2-Hr Peak Flow (MGD): 0.60

Estimated construction start date: 1/1/2023

Estimated waste disposal start date: 6/1/2023

B. Interim II Phase

Design Flow (MGD): 0.30

2-Hr Peak Flow (MGD): 1.20

Estimated construction start date: 1/1/2024

Estimated waste disposal start date: 6/1/2024

C. Final Phase

Design Flow (MGD): 0.45

2-Hr Peak Flow (MGD): 1.35

Estimated construction start date: 1/1/2025

Estimated waste disposal start date: 6/1/2025

D. Current operating phase: N/A New WWTP

Provide the startup date of the facility: Click here to enter text.

Section 2. Treatment Process (Instructions Page 51)

A. Treatment process description

Provide a detailed description of the treatment process. **Include the type of**

treatment plant, mode of operation, and all treatment units. Start with the plant's head works and finish with the point of discharge. Include all sludge processing and drying units. **If more than one phase exists or is proposed in the permit, a description of *each phase* must be provided**. Process description:

The facility is to be constructed in three phases with a total design flow of 450,000 gpd. Each phase will treat 150,000 gpd. Each phase will operate as a suspended-growth activated sludge process in the membrane bioreactor process. The treatment units include a bar screen, anoxic/equalization basin, pre-aeration basin, membrane trains and effluent disinfection. Wastewater will be pumped into the plant where it will enter the aeration basin through a bar screen. The influent will then pass through the aeration zone and flow into a basin containing the membrane trains. From there, the effluent will flow to a chlorine contact basin for disinfection. This facility will also utilize a digester for sludge holding, prior to haul off.

Port or pipe diameter at the discharge point, in inches: 8 inches

B. Treatment Units

In Table 1.0(1), provide the treatment unit type, the number of units, and dimensions (length, width, depth) **of each treatment unit, accounting for *all* phases of operation**.

Table 1.0(1) – Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Anoxic Aerobic Tank	3 (1 per phase)	14' x 35.2' x 10.5'
Aeration Tank	3 (1 per phase)	16' x 35.2' x 10.5'
MBR Basin	3 (1per phase)	8' x 17' x 10.5'
Chlorine Contact	3 (1 per phase)	50.5' x 3' x 7'

C. Process flow diagrams

Provide flow diagrams for the existing facilities and **each** proposed phase of construction.

Attachment: APPENDIX G

Section 3. Site Drawing (Instructions Page 52)

Provide a site drawing for the facility that shows the following:

- The boundaries of the treatment facility;
- The boundaries of the area served by the treatment facility;
- If land disposal of effluent, the boundaries of the disposal site and all storage/holding ponds; and
- If sludge disposal is authorized in the permit, the boundaries of the land application or disposal site.

Attachment: APPENDIX H

Provide the name and a description of the area served by the treatment facility.

Weir Tract: A 1,100 lot single-family residential subdivision, as well as an additional 730 LUEs for commercial and multifamily use.

Section 4. Unbuilt Phases (Instructions Page 52)

Is the application for a renewal of a permit that contains an unbuilt phase or phases?

Yes ☐ No ☒

If yes, does the existing permit contain a phase that has not been constructed within five years of being authorized by the TCEQ?

Yes ☐ No ☐

If yes, provide a detailed discussion regarding the continued need for the unbuilt phase. Failure to provide sufficient justification may result in the Executive Director recommending denial of the unbuilt phase or phases.

Click here to enter text

Section 5. Closure Plans (Instructions Page 53)

Have any treatment units been taken out of service permanently, or will any units be taken out of service in the next five years?

Yes ☐ No ☒

If yes, was a closure plan submitted to the TCEQ?

Yes ☐ No ☐

If yes, provide a brief description of the closure and the date of plan approval.

Click here to enter text

Section 6. Permit Specific Requirements (Instructions Page 53)

For applicants with an existing permit, check the *Other Requirements* or *Special Provisions* of the permit.

A. Summary transmittal

Have plans and specifications been approved for the existing facilities and each proposed phase?

Yes ☐ No ☒

If yes, provide the date(s) of approval for each phase: Click here to enter text

Provide information, including dates, on any actions taken to meet a requirement or provision pertaining to the submission of a summary transmittal letter. Provide a copy of an approval letter from the TCEQ, if applicable.

Click here to enter text

B. Buffer zones

Have the buffer zone requirements been met?

Yes ☒ No ☐

Provide information below, including dates, on any actions taken to meet the conditions of the buffer zone. If available, provide any new documentation

relevant to maintaining the buffer zones.

150’ Buffer around the treatment plant.

C. Other actions required by the current permit

Does the *Other Requirements* or *Special Provisions* section in the existing permit require submission of any other information or other required actions? Examples include Notification of Completion, progress reports, soil monitoring data, etc.

Yes ☐ No ☒

If yes, provide information below on the status of any actions taken to meet the conditions of an *Other Requirement* or *Special Provision*.

Click here to enter text.

D. Grit and grease treatment

1. Acceptance of grit and grease waste

Does the facility have a grit and/or grease processing facility onsite that treats and decants or accepts transported loads of grit and grease waste that are discharged directly to the wastewater treatment plant prior to any treatment?

Yes ☐ No ☒

If No, stop here and continue with Subsection E. Stormwater Management.

2. Grit and grease processing

Describe below how the grit and grease waste is treated at the facility. In your description, include how and where the grit and grease is introduced to the treatment works and how it is separated or processed. Provide a flow diagram showing how grit and grease is processed at the facility.

Click here to enter text.

3. Grit disposal

Does the facility have a Municipal Solid Waste (MSW) registration or permit for grit disposal?

Yes ☐ No ☐

If No, contact the TCEQ Municipal Solid Waste team at 512-239-0000. Note: A registration or permit is required for grit disposal. Grit shall not be combined with treatment plant sludge. See the instruction booklet for additional information on grit disposal requirements and restrictions.

Describe the method of grit disposal.

Click here to enter text.

4. Grease and decanted liquid disposal

Note: A registration or permit is required for grease disposal. Grease shall not be combined with treatment plant sludge. For more information, contact the TCEQ Municipal Solid Waste team at 512-239-0000.

Describe how the decant and grease are treated and disposed of after grit separation.

Click here to enter text.

E. Stormwater management

1. Applicability

Does the facility have a design flow of 1.0 MGD or greater in any phase?

Yes ☐ No ☒

Does the facility have an approved pretreatment program, under 40 CFR Part 403?

Yes ☐ No ☒

If no to both of the above, then skip to Subsection F, Other Wastes Received.

2. MSGP coverage

Is the stormwater runoff from the WWTP and dedicated lands for sewage disposal currently permitted under the TPDES Multi-Sector General Permit (MSGP), TXR050000?

Yes ☐ No ☐

If yes, please provide MSGP Authorization Number and skip to Subsection F, Other Wastes Received:

TXR05 Click here to enter text or TXRNE Click here to enter text

If no, do you intend to seek coverage under TXR050000?

Yes ☐ No ☐

3. Conditional exclusion

Alternatively, do you intend to apply for a conditional exclusion from permitting based TXR050000 (Multi Sector General Permit) Part II B.2 or TXR050000 (Multi Sector General Permit) Part V, Sector T 3(b)?

Yes ☐ No ☐

If yes, please explain below then proceed to Subsection F, Other Wastes Received:

Click here to enter text

4. Existing coverage in individual permit

Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit?

Yes ☐ No ☐

If yes, provide a description of stormwater runoff management practices at the site that are authorized in the wastewater permit then skip to Subsection F, Other Wastes Received.

Click here to enter text.

5. Zero stormwater discharge

Do you intend to have no discharge of stormwater via use of evaporation or other means?

Yes ☐ No ☐

If yes, explain below then skip to Subsection F. Other Wastes Received.

Click here to enter text.

Note: If there is a potential to discharge any stormwater to surface water in the state as the result of any storm event, then permit coverage is required under the MSGP or an individual discharge permit. This requirement applies to all areas of facilities with treatment plants or systems that treat, store, recycle, or reclaim domestic sewage, wastewater or sewage sludge (including dedicated lands for sewage sludge disposal located within the onsite property boundaries) that meet the applicability criteria of above. You have the option of obtaining coverage under the MSGP for direct discharges, (recommended), or obtaining coverage under this individual permit.

6. Request for coverage in individual permit

Are you requesting coverage of stormwater discharges associated with your treatment plant under this individual permit?

Yes ☐ No ☐

If yes, provide a description of stormwater runoff management practices at the site for which you are requesting authorization in this individual wastewater permit and describe whether you intend to comingle this discharge with your treated effluent or discharge it via a separate dedicated stormwater outfall. Please also indicate if you intend to divert stormwater to the treatment plant headworks and indirectly discharge it to water in the state.

Click here to enter text.

Note: Direct stormwater discharges to waters in the state authorized through this individual permit will require the development and implementation of a stormwater pollution prevention plan (SWPPP) and will be subject to additional monitoring and reporting requirements. Indirect discharges of stormwater via headworks recycling will require compliance with all individual permit requirements including 2-hour peak flow limitations. All stormwater discharge authorization requests will require additional information during the technical review of your application.

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?
Yes ☐ No ☐

If yes, a Sewage Sludge Solids Management Plan is required. See Example 5 in the instructions.

G. Other wastes received including sludge from other WWTPs and septic waste

1. Acceptance of sludge from other WWTPs

Does the facility accept or will it accept sludge from other treatment plants at the facility site?
Yes ☐ No ☒

If yes, attach sewage sludge solids management plan. See Example 5 of the instructions.

In addition, provide the date that the plant started accepting sludge or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an estimate of the BOD_5 concentration of the sludge, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click here to enter text.

Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

Yes ☐ No ☒

If yes, does the facility have a Type V processing unit?

Yes ☐ No ☒

If yes, does the unit have a Municipal Solid Waste permit?

Yes ☐ No ☒

If yes to any of the above, provide a the date that the plant started accepting septic waste, or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD_5 concentration of the septic waste, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click here to enter text.

Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.

3. Acceptance of other wastes (not including septic, grease, grit, or RCRA, CERCLA or as discharged by IUs listed in Worksheet 6)

Is the facility accepting or will it accept wastes that are not domestic in nature excluding the categories listed above?

Yes ☐ No ☒

If yes, provide the date that the plant started accepting the waste, an estimate how much waste is accepted on a monthly basis (gallons or millions of gallons), a description of the entities generating the waste, and any distinguishing chemical or other physical characteristic of the waste. Also note if this information has or has not changed since the last permit action.

Click here to enter text.

Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 58)

Is the facility in operation?

Yes ☐ No ☒

If no, this section is not applicable. Proceed to Section 8.

If yes, provide effluent analysis data for the listed pollutants. ***Wastewater treatment facilities*** complete Table 1.0(2). W***ater treatment facilities*** discharging filter backwash water, complete Table 1.0(3).

Note: The sample date must be within 1 year of application submission.

Table 1.0(2) - Pollutant Analysis for Wastewater Treatment Facilities

Pollutant	**Average Conc.**	**Max Conc.**	**No. of Samples**	**Sample Type**	**Sample Date/Time**
$CBOD_5$, mg/l					
Total Suspended Solids, mg/l					
Ammonia Nitrogen, mg/l					
Nitrate Nitrogen, mg/l					
Total Kjeldahl Nitrogen, mg/l					
Sulfate, mg/l					
Chloride, mg/l					
Total Phosphorus, mg/l					
pH, standard units					
Dissolved Oxygen*, mg/l					
Chlorine Residual, mg/l					
E.coli (CFU/100ml) freshwater					
Entercocci (CFU/100ml)					

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity, µmohs/cm, †					
Oil & Grease, mg/l					
Alkalinity ($CaCO_3$)*, mg/l					

*TPDES permits only

†TLAP permits only

Table 1.0(3) - Pollutant Analysis for Water Treatment Facilities

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Total Suspended Solids, mg/l					
Total Dissolved Solids, mg/l					
pH, standard units					
Fluoride, mg/l					
Aluminum, mg/l					
Alkalinity ($CaCO_3$), mg/l					

Section 8. Facility Operator (Instructions Page 60)

Facility Operator Name: Crossroads Utility Services

Facility Operator's License Classification and Level: OC0000144

Facility Operator's License Number:

Section 9. Sewage Sludge Management and Disposal (Instructions Page 60)

A. Sludge disposal method

Identify the current or anticipated sludge disposal method or methods from the

following list. Check all that apply.

☐ Permitted landfill

☐ Permitted or Registered land application site for beneficial use

☐ Land application for beneficial use authorized in the wastewater permit

☐ Permitted sludge processing facility

☐ Marketing and distribution as authorized in the wastewater permit

☐ Composting as authorized in the wastewater permit

☐ Permitted surface disposal site (sludge monofill)

☐ Surface disposal site (sludge monofill) authorized in the wastewater permit

☒ Transported to another permitted wastewater treatment plant or permitted sludge processing facility. If you selected this method, a written statement or contractual agreement from the wastewater treatment plant or permitted sludge processing facility accepting the sludge must be included with this application.

☐ Other: Click here to enter text.

B. Sludge disposal site

Disposal site name: Click here to enter text.

TCEQ permit or registration number: Click here to enter text.

County where disposal site is located: Click here to enter text.

C. Sludge transportation method

Method of transportation (truck, train, pipe, other): Truck

Name of the hauler: Captex

Hauler registration number: 20745

Sludge is transported as a:

Liquid ☒ semi-liquid ☐ semi-solid ☐ solid ☐

Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 60)

A. Beneficial use authorization

Does the existing permit include authorization for land application of sewage sludge for beneficial use?

Yes ☐ No ☒

If yes, are you requesting to continue this authorization to land apply sewage sludge for beneficial use?

Yes ☐ No ☐

If yes, is the completed **Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451)** attached to this permit application (see the instructions for details)?

Yes ☐ No ☐

B. Sludge processing authorization

Does the existing permit include authorization for any of the following sludge processing, storage or disposal options?

Sludge Composting	Yes ☐	No ☒
Marketing and Distribution of sludge	Yes ☐	No ☒
Sludge Surface Disposal or Sludge Monofill	Yes ☐	No ☒
Temporary storage in sludge lagoons	Yes ☐	No ☒

If yes to any of the above sludge options and the applicant is requesting to continue this authorization, is the completed **Domestic Wastewater Permit Application: Sewage Sludge Technical Report (TCEQ Form No. 10056)** attached to this permit application?

Yes ☐ No ☐

Section 11. Sewage Sludge Lagoons (Instructions Page 61)

Does this facility include sewage sludge lagoons?

Yes ☐ No ☒

If yes, complete the remainder of this section. If no, proceed to Section 12.

A. Location information

The following maps are required to be submitted as part of the application. For each map, provide the Attachment Number.

- Original General Highway (County) Map:

  Attachment: Click here to enter text.
- USDA Natural Resources Conservation Service Soil Map:

  Attachment: Click here to enter text.
- Federal Emergency Management Map:

  Attachment: Click here to enter text.
- Site map:

  Attachment: Click here to enter text.

Discuss in a description if any of the following exist within the lagoon area. Check all that apply.

- ☐ Overlap a designated 100-year frequency flood plain
- ☐ Soils with flooding classification
- ☐ Overlap an unstable area
- ☐ Wetlands
- ☐ Located less than 60 meters from a fault
- ☐ None of the above

Attachment: Click here to enter text.

If a portion of the lagoon(s) is located within the 100-year frequency flood plain, provide the protective measures to be utilized including type and size of protective structures:

Click here to enter text.

B. Temporary storage information

Provide the results for the pollutant screening of sludge lagoons. These results are in addition to pollutant results in Section 7 of Technical Report 1.0.

Nitrate Nitrogen, mg/kg: Click here to enter text.

Total Kjeldahl Nitrogen, mg/kg: Click here to enter text.

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: Click here to enter text.

Phosphorus, mg/kg: Click here to enter text.

Potassium, mg/kg: Click here to enter text.

pH, standard units: Click here to enter text.

Ammonia Nitrogen mg/kg: Click here to enter text.

Arsenic: Click here to enter text.

Cadmium: Click here to enter text.

Chromium: Click here to enter text.

Copper: Click here to enter text.

Lead: Click here to enter text.

Mercury: Click here to enter text.

Molybdenum: Click here to enter text.

Nickel: Click here to enter text.

Selenium: Click here to enter text.

Zinc: Click here to enter text.

Total PCBs: Click here to enter text.

Provide the following information:

Volume and frequency of sludge to the lagoon(s): Click here to enter text.

Total dry tons stored in the lagoons(s) per 365-day period: Click here to enter text.

Total dry tons stored in the lagoons(s) over the life of the unit: Click here to enter text.

C. Liner information

Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of $1x10^{-7}$ cm/sec?

Yes ☐ No ☐

If yes, describe the liner below. Please note that a liner is required.

Click here to enter text.

D. Site development plan

Provide a detailed description of the methods used to deposit sludge in the

lagoon(s):

Click here to enter text

Attach the following documents to the application.

- Plan view and cross-section of the sludge lagoon(s)

  Attachment: Click here to enter text

- Copy of the closure plan

  Attachment: Click here to enter text

- Copy of deed recordation for the site

  Attachment: Click here to enter text

- Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons

  Attachment: Click here to enter text

- Description of the method of controlling infiltration of groundwater and surface water from entering the site

  Attachment: Click here to enter text

- Procedures to prevent the occurrence of nuisance conditions

  Attachment: Click here to enter text

E. Groundwater monitoring

Is groundwater monitoring currently conducted at this site, or are any wells available for groundwater monitoring, or are groundwater monitoring data otherwise available for the sludge lagoon(s)?

Yes ☐ No ☐

If groundwater monitoring data are available, provide a copy. Provide a profile of soil types encountered down to the groundwater table and the depth to the shallowest groundwater as a separate attachment.

Attachment: Click here to enter text

Section 12. Authorizations/Compliance/Enforcement

(Instructions Page 63)

A. Additional authorizations

Does the permittee have additional authorizations for this facility, such as reuse authorization, sludge permit, etc?

Yes ☐ No ☒

If yes, provide the TCEQ authorization number and description of the authorization:

Click here to enter text

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

Yes ☐ No ☒

Is the permittee required to meet an implementation schedule for compliance or enforcement?

Yes ☐ No ☒

If yes to either question, provide a brief summary of the enforcement, the implementation schedule, and the current status:

Click here to enter text

Section 13. RCRA/CERCLA Wastes (Instructions Page 63)

A. RCRA hazardous wastes

Has the facility received in the past three years, does it currently receive, or will it receive RCRA hazardous waste?

Yes ☐ No ☒

B. Remediation activity wastewater

Has the facility received in the past three years, does it currently receive, or will it receive CERCLA wastewater, RCRA remediation/corrective action wastewater or other remediation activity wastewater?

Yes ☐ No ☒

C. Details about wastes received

If yes to either Subsection A or B above, provide detailed information concerning these wastes with the application.

Attachment: Click here to enter text.

Section 14. Laboratory Accreditation (Instructions Page 64)

All laboratory tests performed must meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*, which includes the following general exemptions from National Environmental Laboratory Accreditation Program (NELAP) certification requirements:

- The laboratory is an in-house laboratory and is:
  - periodically inspected by the TCEQ; or
  - located in another state and is accredited or inspected by that state; or
  - performing work for another company with a unit located in the same site; or
  - performing pro bono work for a governmental agency or charitable organization.
- The laboratory is accredited under federal law.
- The data are needed for emergency-response activities, and a laboratory accredited under the Texas Laboratory Accreditation Program is not available.
- The laboratory supplies data for which the TCEQ does not offer accreditation.

The applicant should review *30 TAC Chapter 25* for specific requirements.

The following certification statement shall be signed and submitted with every application. See the *Signature Page* section in the Instructions, for a list of designated representatives who may sign the certification.

CERTIFICATION:

I certify that all laboratory tests submitted with this application meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification.*

Printed Name: Seshu Yalamanchili

Title: Owner

Signature: S. R. Yalamanchili

Date: 03/21/2022

DOMESTIC TECHNICAL REPORT 1.1

The following is required for new and amendment applications

Section 1. Justification for Permit (Instructions Page 66)

A. Justification of permit need

Provide a detailed discussion regarding the need for any phase(s) not currently permitted. Failure to provide sufficient justification may result in the Executive Director recommending denial of the proposed phase(s) or permit.

The wastewater treatment plant will serve the proposed residential development. Based on easement and right of way limitations, no route exists from this site to an organized wastewater treatment facility. The use of a central collection treatment and disposal system is being preferred to an equivalent number of private residential septic tank/drain field units. Design flows are based on Living Unit Equivalents (LUEs) or connections associated with the service area. A basis of 245 gallons of wastewater per day per connection (maximum 30-day wet weather average) was assumed for flow projections. The ultimate flow is based on the total number of houses to be built (1,100 houses) and an additional 730 LUEs for other uses. The total flow needed at full build out would be 1,830 connections x 245 gal/day/connection = 450,000 gal/day assumed.

B. Regionalization of facilities

Provide the following information concerning the potential for regionalization of domestic wastewater treatment facilities:

1. Municipally incorporated areas

If the applicant is a city, then Item 1 is not applicable. Proceed to Item 2 Utility CCN areas.

Is any portion of the proposed service area located in an incorporated city?

Yes ☐ No ☒ Not Applicable ☐

If yes, within the city limits of: Click here to enter text

If yes, attach correspondence from the city.

Attachment: Click here to enter text

If consent to provide service is available from the city, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the city versus the cost of the proposed facility or expansion attached.

Attachment: Click here to enter text

2. Utility CCN areas

Is any portion of the proposed service area located inside another utility's CCN area?

Yes ☐ No ☒

If yes, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the CCN facilities versus the cost of the proposed facility or expansion.

Attachment: Click here to enter text.

3. Nearby WWTPs or collection systems

Are there any domestic permitted wastewater treatment facilities or collection systems located within a three-mile radius of the proposed facility?

Yes ☒ No ☐

If yes, attach a list of these facilities that includes the permittee's name and permit number, and an area map showing the location of these facilities.

Attachment: City of Georgetown - Permit 10489-005

If yes, attach copies of your certified letters to these facilities **and** their response letters concerning connection with their system.

Attachment: Attachment M

Does a permitted domestic wastewater treatment facility or a collection system located within three (3) miles of the proposed facility currently have the capacity to accept or is willing to expand to accept the volume of wastewater proposed in this application?

Yes ☒ No ☐

If yes, attach an analysis of expenditures required to connect to a permitted wastewater treatment facility or collection system located within 3 miles versus the cost of the proposed facility or expansion.

Attachment: Attachment M

Section 2. Organic Loading (Instructions Page 67)

Is this facility in operation?

Yes ☐ No ☒

If no, proceed to Item B, Proposed Organic Loading.

If yes, provide organic loading information in Item A, Current Organic Loading

A. Current organic loading

Facility Design Flow (flow being requested in application): Click here to enter text.

Average Influent Organic Strength or BOD_5 Concentration in mg/l: Click here to enter text.

Average Influent Loading (lbs/day = total average flow X average BOD_5 conc. X 8.34): Click here to enter text.

Provide the source of the average organic strength or BOD_5 concentration.

Click here to enter text.

B. Proposed organic loading

This table must be completed if this application is for a facility that is not in operation or if this application is to request an increased flow that will impact organic loading.

Table 1.1(1) – Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD_5 Concentration (mg/l)
Municipality		
Subdivision	0.45	400
Trailer park – transient		
Mobile home park		
School with cafeteria and showers		
School with cafeteria,		

Source	Total Average Flow (MGD)	Influent BOD_5 Concentration (mg/l)
no showers		
Recreational park, overnight use		
Recreational park, day use		
Office building or factory		
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources	0.45	400
AVERAGE BOD_5 from all sources		

Section 3. Proposed Effluent Quality and Disinfection (Instructions Page 68)

A. Existing/Interim I Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 5

Total Suspended Solids, mg/l: 5

Ammonia Nitrogen, mg/l: 2

Total Phosphorus, mg/l: 0.5

Dissolved Oxygen, mg/l: 5

Other: Click here to enter text.

B. Interim II Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 5

Total Suspended Solids, mg/l: 5

Ammonia Nitrogen, mg/l: 2

Total Phosphorus, mg/l: 0.5

Dissolved Oxygen, mg/l: 5

Other: Click here to enter text.

C. Final Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 5

Total Suspended Solids, mg/l: 5

Ammonia Nitrogen, mg/l: 2

Total Phosphorus, mg/l: 0.5

Dissolved Oxygen, mg/l: 5

Other: Click here to enter text.

D. Disinfection Method

Identify the proposed method of disinfection.

☒ Chlorine: 1 mg/l after 20 minutes detention time at peak flow

Dechlorination process: Click here to enter text.

☐ Ultraviolet Light: Click here to enter text. seconds contact time at peak flow

☐ Other: Click here to enter text.

Section 4. Design Calculations (Instructions Page 68)

Attach design calculations and plant features for each proposed phase. Example 4 of the instructions includes sample design calculations and plant features.

Attachment: APPENDIX I

Section 5. Facility Site (Instructions Page 68)

A. 100-year floodplain

Will the proposed facilities be located above the 100-year frequency flood level?

Yes ☒ No ☐

If no, describe measures used to protect the facility during a flood event. Include a site map showing the location of the treatment plant within the 100-year frequency flood level. If applicable, provide the size and types of protective structures.

Click here to enter text

Provide the source(s) used to determine 100-year frequency flood plain.

FEMA MAP: 48491C0315F and 48491C0325F (APPENDIX J)

For a new or expansion of a facility, will a wetland or part of a wetland be filled?

Yes ☐ No ☒

If yes, has the applicant applied for a US Corps of Engineers 404 Dredge and Fill Permit?

Yes ☐ No ☐

If yes, provide the permit number: Click here to enter text

If no, provide the approximate date you anticipate submitting your application to the Corps: Click here to enter text

B. Wind rose

Attach a wind rose. **Attachment**: APPENDIX K

Section 6. Permit Authorization for Sewage Sludge Disposal (Instructions Page 69)

A. Beneficial use authorization

Are you requesting to include authorization to land apply sewage sludge for beneficial use on property located adjacent to the wastewater treatment facility under the wastewater permit?

Yes ☐ No ☒

If yes, attach the completed Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451)

Attachment: Click here to enter text.

B. Sludge processing authorization

Identify the sludge processing, storage or disposal options that will be conducted at the wastewater treatment facility:

☐ Sludge Composting

☐ Marketing and Distribution of sludge

☐ Sludge Surface Disposal or Sludge Monofill

If any of the above sludge options are selected, attach a completed DOMESTIC WASTEWATER PERMIT APPLICATION: SEWAGE SLUDGE TECHNICAL REPORT (TCEQ Form No. 10056).

Attachment: Click here to enter text.

Section 7. Sewage Sludge Solids Management Plan (Instructions Page 69)

Attach a solids management plan to the application.

Attachment: APPENDIX L

The sewage sludge solids management plan must contain the following information:

- Treatment units and processes dimensions and capacities
- Solids generated at 100, 75, 50, and 25 percent of design flow
- Mixed liquor suspended solids operating range at design and projected actual flow
- Quantity of solids to be removed and a schedule for solids removal
- Identification and ownership of the ultimate sludge disposal site
- For facultative lagoons, design life calculations, monitoring well locations and depths, and the ultimate disposal method for the sludge from the facultative lagoon

An example of a sewage sludge solids management plan has been included as Example 5 of the instructions.

DOMESTIC TECHNICAL REPORT WORKSHEET 2.0

RECEIVING WATERS

The following is required for all TPDES permit applications

Section 1. Domestic Drinking Water Supply (Instructions Page 73)

Is there a surface water intake for domestic drinking water supply located within 5 miles downstream from the point or proposed point of discharge?

Yes ☐ No ☒

If yes, provide the following:
Owner of the drinking water supply: Click here to enter text.

Distance and direction to the intake: Click here to enter text.

Attach a USGS map that identifies the location of the intake.

Attachment: Click here to enter text.

Section 2. Discharge into Tidally Affected Waters (Instructions Page 73)

Does the facility discharge into tidally affected waters?

Yes ☐ No ☒

If yes, complete the remainder of this section. If no, proceed to Section 3.

A. Receiving water outfall

Width of the receiving water at the outfall, in feet: Click here to enter text.

B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

Yes ☐ No ☐

If yes, provide the distance and direction from outfall(s).

Click here to enter text.

C. Sea grasses

Are there any sea grasses within the vicinity of the point of discharge?

Yes ☐ No ☐

If yes, provide the distance and direction from the outfall(s).

Click here to enter text

Section 3. Classified Segments (Instructions Page 73)

Is the discharge directly into (or within 300 feet of) a classified segment?

Yes ☐ No ☒

If yes, this Worksheet is complete.

If no, complete Sections 4 and 5 of this Worksheet.

Section 4. Description of Immediate Receiving Waters (Instructions Page 75)

Name of the immediate receiving waters: East Fork Ranger Branch

A. Receiving water type

Identify the appropriate description of the receiving waters.

☒ Stream

☐ Freshwater Swamp or Marsh

☐ Lake or Pond

Surface area, in acres: Click here to enter text

Average depth of the entire water body, in feet: Click here to enter text

Average depth of water body within a 500-foot radius of discharge point, in feet: Click here to enter text

☐ Man-made Channel or Ditch

☐ Open Bay

☐ Tidal Stream, Bayou, or Marsh

☐ Other, specify: Click here to enter text.

B. Flow characteristics

If a stream, man-made channel or ditch was checked above, provide the following. For existing discharges, check one of the following that best characterizes the area *upstream* of the discharge. For new discharges, characterize the area *downstream* of the discharge (check one).

☒ Intermittent - dry for at least one week during most years

☐ Intermittent with Perennial Pools - enduring pools with sufficient habitat to maintain significant aquatic life uses

☐ Perennial - normally flowing

Check the method used to characterize the area upstream (or downstream for new dischargers).

☐ USGS flow records

☐ Historical observation by adjacent landowners

☒ Personal observation

☐ Other, specify: Click here to enter text.

C. Downstream perennial confluences

List the names of all perennial streams that join the receiving water within three miles downstream of the discharge point.

Berry Creek & San Gabriel River

D. Downstream characteristics

Do the receiving water characteristics change within three miles downstream of the discharge (e.g., natural or man-made dams, ponds, reservoirs, etc.)?

Yes ☒ No ☐

If yes, discuss how.

Eats Fork Ranger Branch flows into Ranger Br that flows into Berry Creek and then flows into the San Gabriel River

E. Normal dry weather characteristics

Provide general observations of the water body during normal dry weather conditions.

Both Berry Creek and the San Gabriel River are perennial and remain full year-round.

Date and time of observation: 03/03/2022

Was the water body influenced by stormwater runoff during observations?

Yes ☐ No ☒

Section 5. General Characteristics of the Waterbody (Instructions Page 74)

A. Upstream influences

Is the immediate receiving water upstream of the discharge or proposed discharge site influenced by any of the following? Check all that apply.

- ☐ Oil field activities
- ☐ Upstream discharges
- ☐ Septic tanks
- ☐ Urban runoff
- ☒ Agricultural runoff
- ☐ Other(s), specify Click here to enter text

B. Waterbody uses

Observed or evidences of the following uses. Check all that apply.

- ☒ Livestock watering
- ☐ Irrigation withdrawal
- ☐ Fishing
- ☐ Contact recreation
- ☐ Non-contact recreation
- ☐ Navigation

☐ Domestic water supply ☐ Industrial water supply

☐ Park activities ☐ Other(s), specify Click here to enter text.

C. Waterbody aesthetics

Check one of the following that best describes the aesthetics of the receiving water and the surrounding area.

☐ Wilderness: outstanding natural beauty; usually wooded or unpastured area; water clarity exceptional

☒ Natural Area: trees and/or native vegetation; some development evident (from fields, pastures, dwellings); water clarity discolored

☐ Common Setting: not offensive; developed but uncluttered; water may be colored or turbid

☐ Offensive: stream does not enhance aesthetics; cluttered; highly developed; dumping areas; water discolored

EXHIBIT 2

DOMESTIC TECHNICAL REPORT 1.0 AND 1.1

DOMESTIC WORKSHEETS 2.0 AND 2.1

APPENDIX A

CORE DATA FORM

TCEQ Core Data Form

TCEQ Use Only

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (*If other is checked please describe in space provided.*)

☒ New Permit, Registration or Authorization (*Core Data Form should be submitted with the program application.*)

☐ Renewal (*Core Data Form should be submitted with the renewal form*) ☐ Other

2. Customer Reference Number *(if issued)*	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number *(if issued)*
CN 606001055		RN

SECTION II: Customer Information

4. General Customer Information | **5. Effective Date for Customer Information Updates** (mm/dd/yyyy)

☐ New Customer ☐ Update to Customer Information ☐ Change in Regulated Entity Ownership
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)

The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).

6. Customer Legal Name (*If an individual, print last name first: eg: Doe, John*) *If new Customer, enter previous Customer below:*

The Vantage Austin LLC

7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number *(if applicable)*
0804434355	32083204324		

11. Type of Customer: ☐ Corporation ☐ Individual Partnership: ☐ General ☐ Limited
Government: ☐ City ☐ County ☐ Federal ☐ State ☐ Other ☐ Sole Proprietorship ☒ Other: Limited Liability Company

12. Number of Employees
☒ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher

13. Independently Owned and Operated?
☒ **Yes** ☐ **No**

14. Customer Role (Proposed or Actual) – *as it relates to the Regulated Entity listed on this form. Please check one of the following*

☒ Owner ☐ Operator ☐ Owner & Operator
☐ Occupational Licensee ☐ Responsible Party ☐ Voluntary Cleanup Applicant ☐ Other:

15. Mailing Address:

5900 Balcones Dr. Ste. 100

City	State	ZIP	ZIP + 4
Austin	TX	78731	

16. Country Mailing Information *(if outside USA)*	17. E-Mail Address *(if applicable)*
	seshuyal@gmail.com

18. Telephone Number	19. Extension or Code	20. Fax Number *(if applicable)*
(248) 894-3530		( ) -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (*If 'New Regulated Entity" is selected below this form should be accompanied by a permit application*)

☒ New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information

The Regulated Entity Name submitted may be updated in order to meet TCEQ Agency Data Standards (removal of organizational endings such as Inc, LP, or LLC).

22. Regulated Entity Name (*Enter name of the site where the regulated action is taking place.*)

Williamson County Municipal Utility District No.44 Wastewater Treatment Plant

23. Street Address of the Regulated Entity: *(No PO Boxes)*							
	City		State		ZIP		ZIP + 4	
24. County	Williamson County						

Enter Physical Location Description if no street address is provided.

25. Description to Physical Location:	The property is Approximatley 1 mile North of the intersection of county roads 194 and 140.

26. Nearest City	State	Nearest ZIP Code
Weir	TX	78759

27. Latitude (N) In Decimal:	30.69343		28. Longitude (W) In Decimal:	-97.60621	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
30	41	36.34	-97	36	22.36

29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)	31. Primary NAICS Code (5 or 6 digits)	32. Secondary NAICS Code (5 or 6 digits)
4952		22132	

33. What is the Primary Business of this entity? *(Do not repeat the SIC or NAICS description.)*

34. Mailing Address:	5900 Balcones Dr. Ste. 100						
	City	Austin	State	TX	ZIP	78731	ZIP + 4

35. E-Mail Address:			
36. Telephone Number	37. Extension or Code	38. Fax Number *(if applicable)*	
( ) -		( ) -	

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☐ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
☐ Voluntary Cleanup	☒ Waste Water	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:

SECTION IV: Preparer Information

40. Name:	Daniel Ryan	41. Title:	Vice President

42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(512) 439-4700		( ) -	dryan@lja.com

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:	The Vantage Austin LLC	Job Title:	Owner
Name *(In Print)*:	Seshu Yalamanchili	Phone:	(248 894-3530
Signature:	S. R. Yalamanchili	Date:	03/21/2022

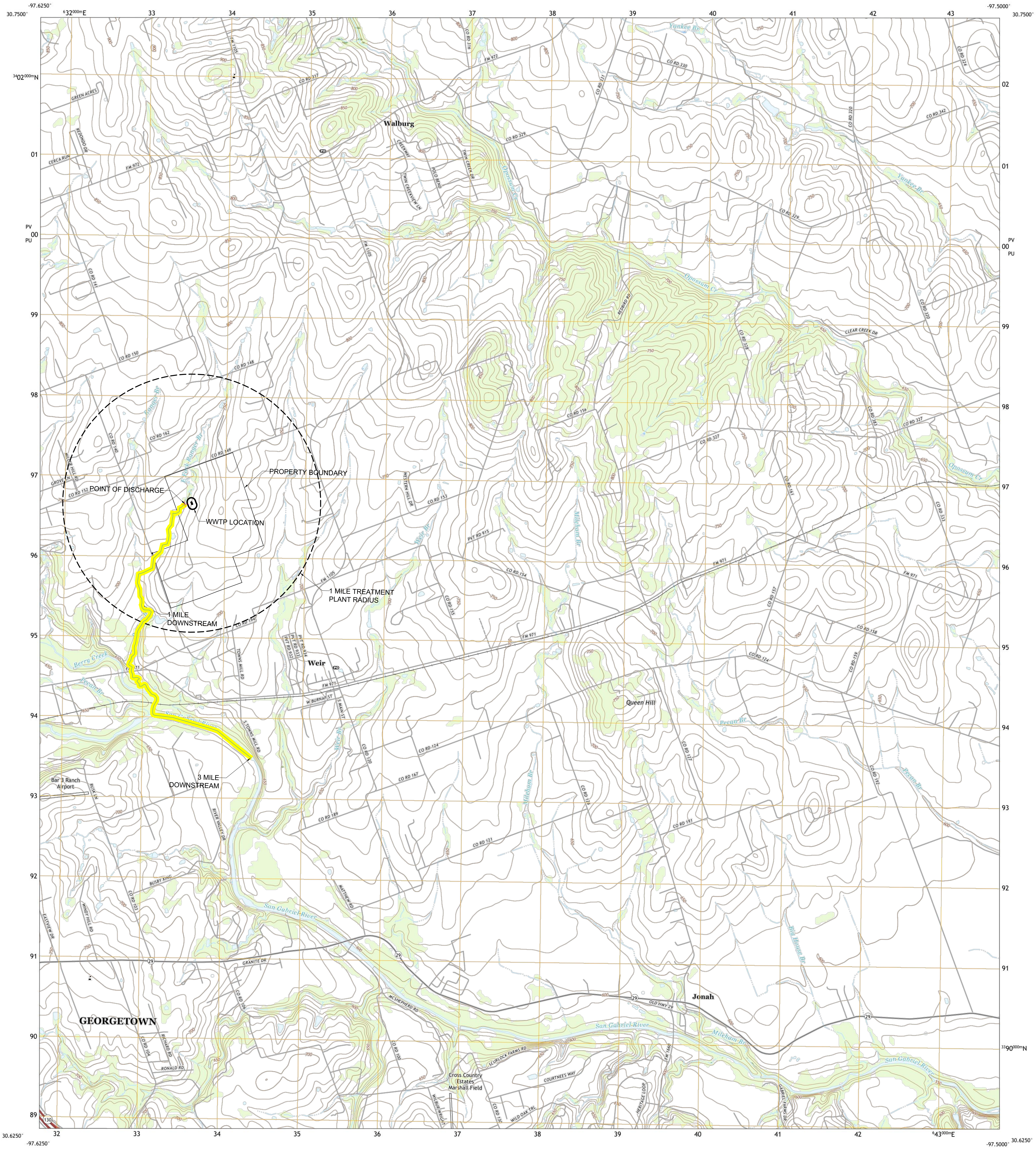
APPENDIX B

USGS MAP

U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY

The National Map
US Topo

WEIR QUADRANGLE
TEXAS - WILLIAMSON COUNTY
7.5-MINUTE SERIES



Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Projection and 1 000-meter grid:Universal Transverse Mercator, Zone 14R

This map is not a legal document. Boundaries may be generalized for this map scale. Private lands within government reservations may not be shown. Obtain permission before entering private lands.

Imagery....................NAIP, August 2016 - November 2016
Roads....................U.S. Census Bureau, 2015
Names....................GNIS, 1979 - 2018
Hydrography....................National Hydrography Dataset, 2002 - 2016
Contours....................National Elevation Dataset, 2002 - 2004
Boundaries....................Multiple sources; see metadata file 2016 - 2017
Wetlands....................FWS National Wetlands Inventory 1982

UTM GRID AND 2019 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

MN GN 0°44′ 13 MILS 3°35′ 64 MILS

U.S. National Grid
100,000 - m Square ID
PV
PU
Grid Zone Designation 14R

SCALE 1:24 000

KILOMETERS · METERS · MILES · FEET

CONTOUR INTERVAL 10 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard, 2011.
A metadata file associated with this product is draft version 0.6.18

QUADRANGLE LOCATION

1	2	3
4	5	
6	7	8

1 Cobbs Cavern
2 Jarrell
3 Bartlett
4 Georgetown
5 Granger
6 Round Rock
7 Hutto
8 Taylor

ADJOINING QUADRANGLES

ROAD CLASSIFICATION
Expressway · Local Connector
Secondary Hwy · Local Road
Ramp · 4WD
Interstate Route · US Route · State Route

WEIR, TX
2019

LJA Engineering, Inc.
1100 NE Loop 410
Suite 850
San Antonio, Texas 78209
Phone 210.503.2700
Fax 210.503.2749
FRN - F-1386

WILLIAMSON COUNTY M.U.D. 44

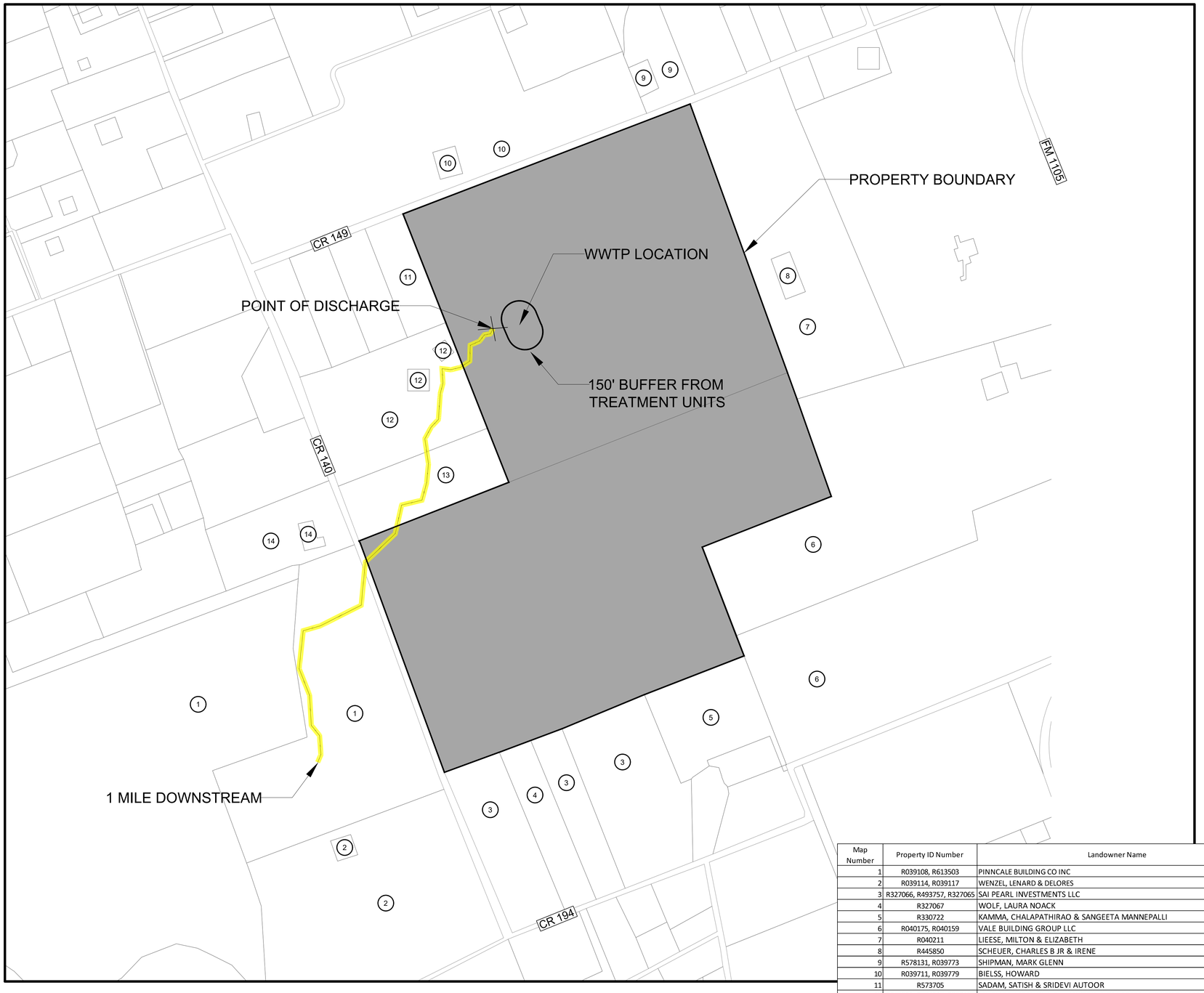
THE VANTAGE AUSTIN LLC

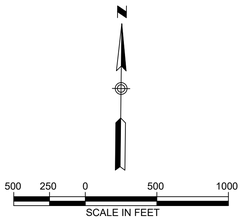
USGS QUADRANGLE MAP

I:\A491\TPDES Submittal\Submittal\USGS Quad+Buffer.dwg

APPENDIX C

AFFECTED LANDOWNERS MAP AND LIST





Map Number	Property ID Number	Landowner Name	Landowner Address (1)	Landowner Address (2)
1	R039108, R613503	PINNCALE BUILDING CO INC	723 W UNIVERSITY AVE STE 110-292	GEORGETOWN, TX 78626
2	R039114, R039117	WENZEL, LENARD & DELORES	201 CR 140	GEORGETOWN, TX 78626
3	R327066, R493757, R327065	SAI PEARL INVESTMENTS LLC	2400 LOUIS HENNA BLVD 301	ROUND ROCK, TX 78664
4	R327067	WOLF, LAURA NOACK	2713 PINEHURST DR	HARLINGEN, TX 78550
5	R330722	KAMMA, CHALAPATHIRAO & SANGEETA MANNEPALLI	107 FAROLA CV	ROUND ROCK, TX 78681
6	R040175, R040159	VALE BUILDING GROUP LLC	PO BOX 460	FLORENCE, TX 76527
7	R040211	LIEESE, MILTON & ELIZABETH	1086 BOOTYS CROSSING RD	GEORGETOWN, TX 78628
8	R445850	SCHEUER, CHARLES B JR & IRENE	850 CR 149	GEORGETOWN, TX 78626
9	R578131, R039773	SHIPMAN, MARK GLENN	757 CR 149	GEORGETOWN, TX 78626
10	R039711, R039779	BIELSS, HOWARD	5207 AVE G	AUSTIN, TX 78751
11	R573705	SADAM, SATISH & SRIDEVI AUTOOR	2826 COOL RIVER LP	ROUND ROCK, TX 78665
12	R360201, R324210, R337190	MUELLER MARVIN A & MARJORIE A TRUSTEES MULLER FAMILY TRUST	1010 CR 140	GEORGETOWN, TX 78626
13	R337402	MUELLER DOUGLAS NEILL (LE)	900 CR 140	GEORGETOWN, TX 78626
14	R039692, R039771	HANUSCH DAVID W & BERBARA LOUISE TRUSTEES HANUSCH FAMILY TRUST	785 CR 140	GEORGETOWN, TX 78626

ADJACENT PROPERTY OWNERS MAP

WILLIAMSON COUNTY M.U.D. 44

THE VANTAGE AUSTIN LLC

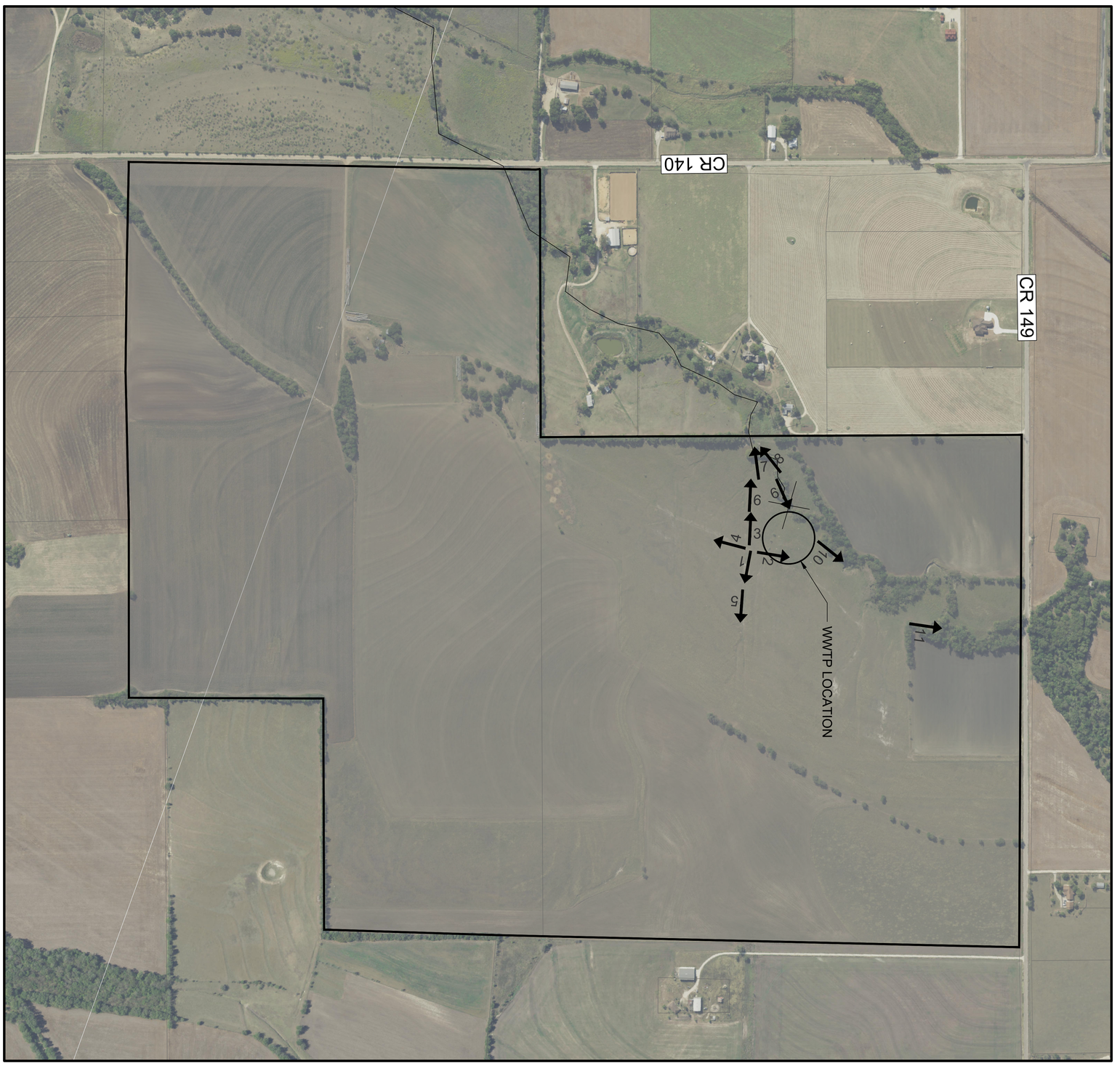
LJA Engineering, Inc.
1100 NE Loop 410
Suite 450
San Antonio, Texas 78209
Phone 210.503.2700
Fax 210.503.2749
FRN - F-1386

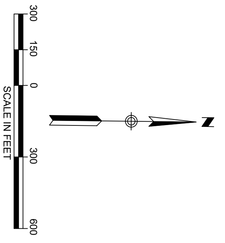
I:\A491\TPDES Submittal\Submittal\Property Owners.dwg

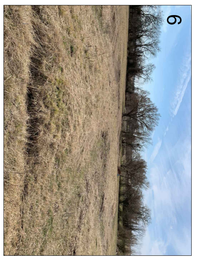
000066

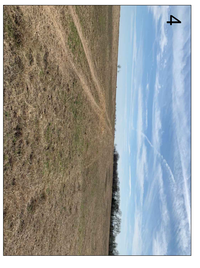
APPENDIX D

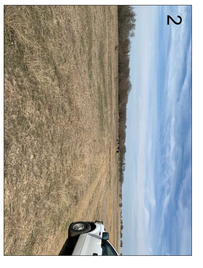
ORIGINAL PHOTOGRAPHS

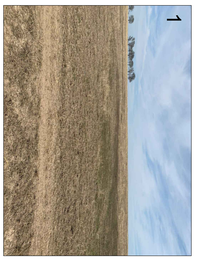












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1 OF 1

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WILLIAMSON COUNTY M.U.D. 44

THE VANTAGE AUSTIN LLC

PHOTO LOCATION MAP

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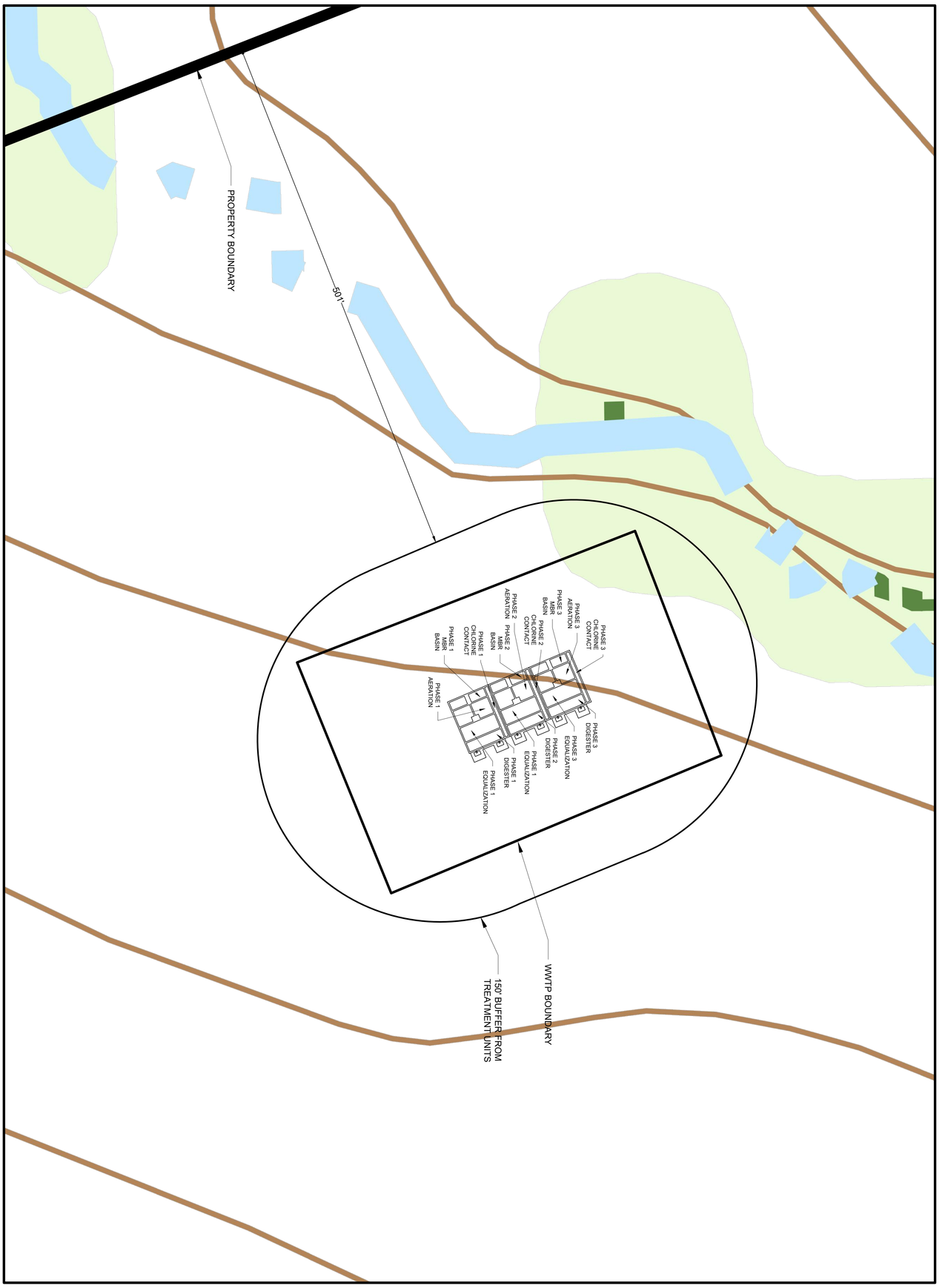
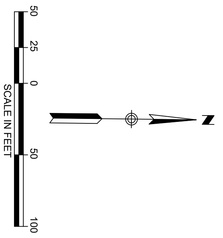
APPENDIX E

BUFFER ZONE MAP





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WILLIAMSON COUNTY M.U.D. 44

THE VANTAGE AUSTIN LLC

BUFFER ZONE MAP

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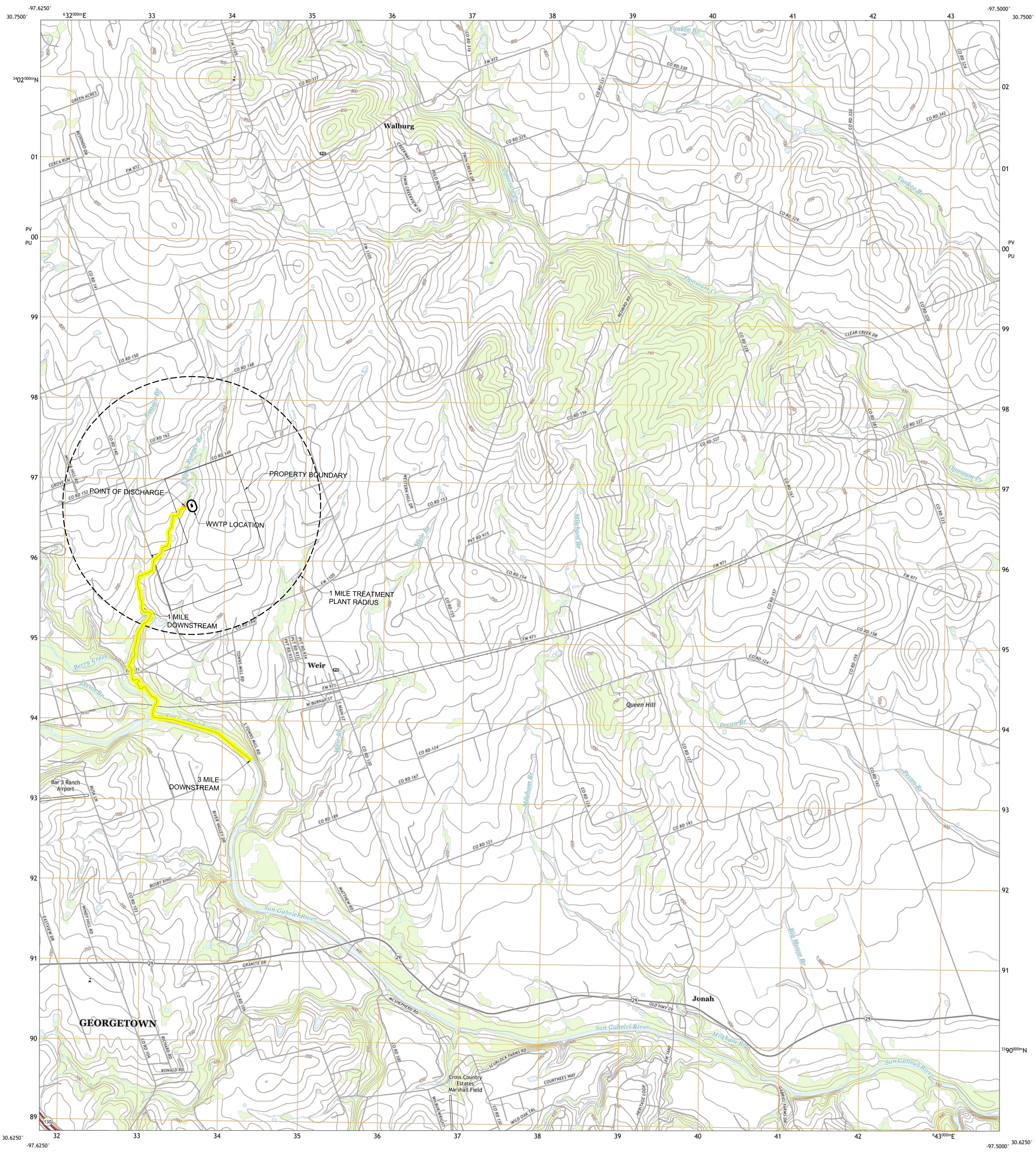
APPENDIX F

SPIF USGS MAP

U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY

The National Map US Topo

WEIR QUADRANGLE
TEXAS - WILLIAMSON COUNTY
7.5-MINUTE SERIES



Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Projection and 1 000-meter grid:Universal Transverse Mercator, Zone 14R
This map is not a legal document. Boundaries may be generalized for this map scale. Private lands within government reservations may not be shown. Obtain permission before entering private lands.

Imagery....NAIP, August 2016 - November 2016
Roads....U.S. Census Bureau, 2015
Names....GNIS, 1979 - 2018
Hydrography....National Hydrography Dataset, 2002 - 2016
Contours....National Elevation Dataset, 2002 - 2004
Boundaries....Multiple sources; see metadata file 2016 - 2017
Wetlands....FWS National Wetlands Inventory 1982

UTM GRID AND 2019 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

SCALE 1:24 000

CONTOUR INTERVAL 10 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard, 2011.
A metadata file associated with this product is draft version 0.6.18

QUADRANGLE LOCATION

1 Cobbs Cavern
2 Jarrell
3 Bartlett
4 Georgetown
5 Granger
6 Round Rock
7 Hutto
8 Taylor

ADJOINING QUADRANGLES

ROAD CLASSIFICATION
Expressway — Local Connector
Secondary Hwy — Local Road
Ramp — 4WD
Interstate Route — US Route — State Route

WEIR, TX
2019

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WILLIAMSON COUNTY M.U.D. 44

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USGS QUADRANGLE MAP

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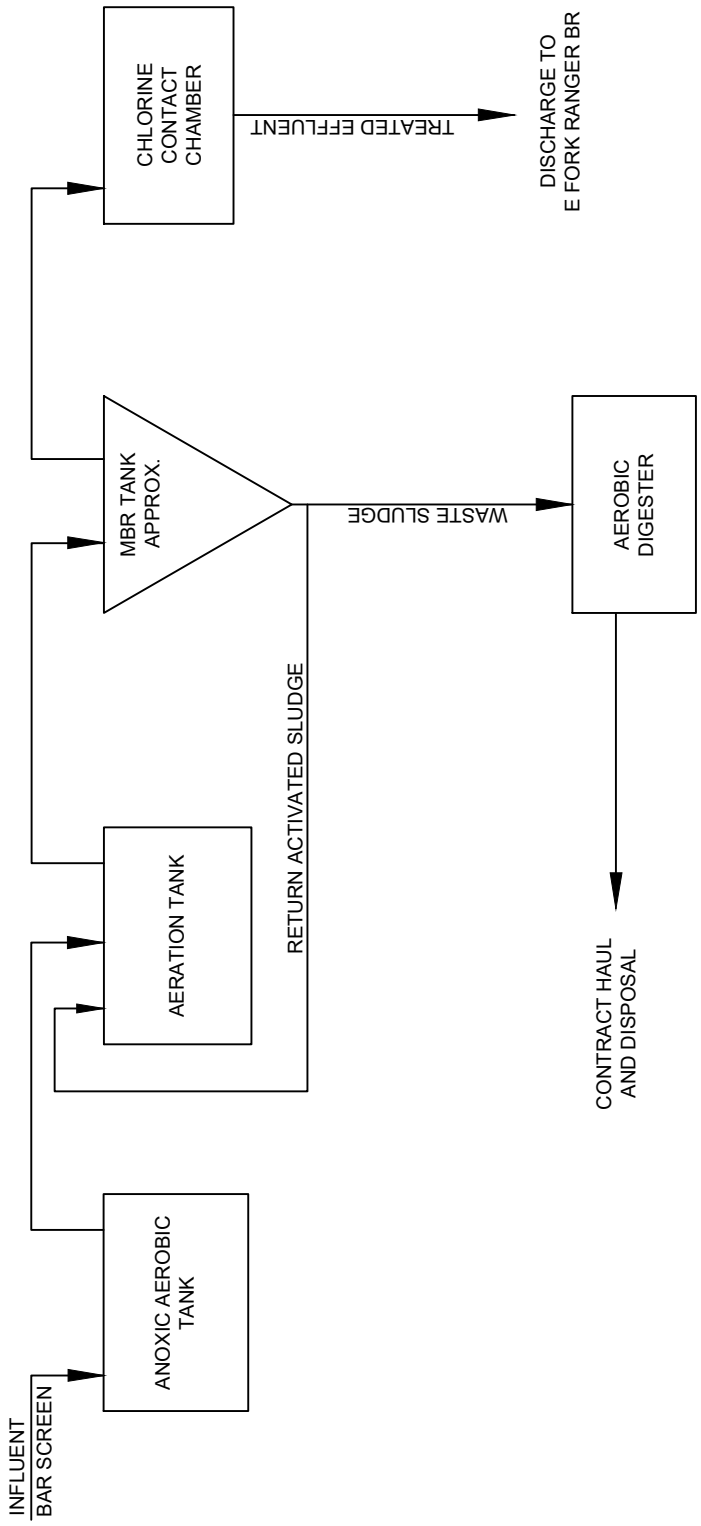
APPENDIX G

PROCESS FLOW DIAGRAM

FOR PLANNING PURPOSES ONLY



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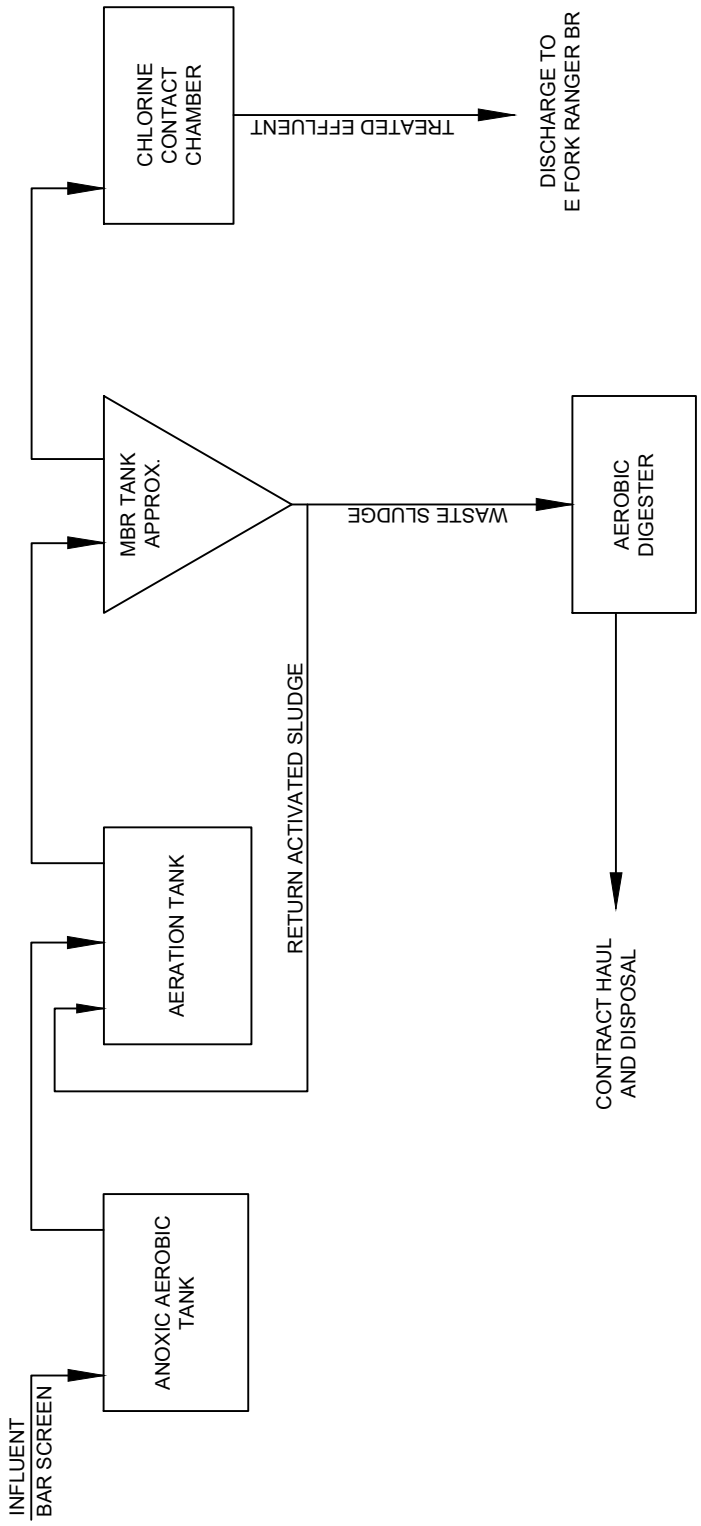
WILLIAMSON M.U.D. 44

PHASE 1
FLOW DIAGRAM

FOR PLANNING PURPOSES ONLY



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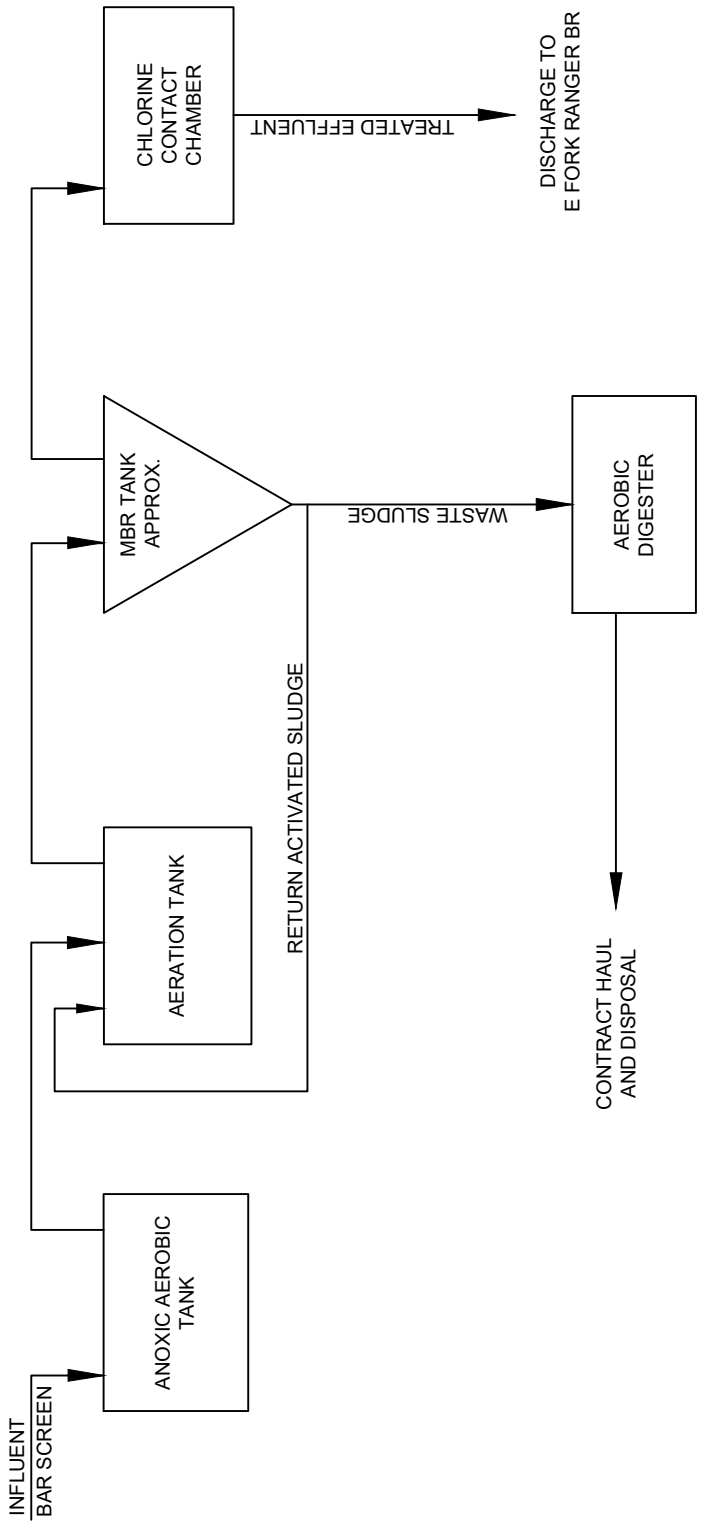
PHASE 2
FLOW DIAGRAM

FOR PLANNING PURPOSES ONLY



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WILLIAMSON M.U.D. 44

PHASE 3
FLOW DIAGRAM

PROJECT NAME: Williamson County MUD No 44

Phase 3

PARAMETER		Value		
Operation Type		Suction		
Equalize Flow		Yes		
MBR ADF		454	m3/d	
MBR PDF		908	m3/d	
Plant PHF		2392.99	m3/d	
MBR AADF		0.092	MGD	
MBR MMADF		**0.15**	MGD	
MBR PDF		0.3	MGD	
Plant PHF		439	GPM	
MBR Peaking Factor		2.0		
Plant PHF Factor		3.0		
Min WW Temp		18	°C	
Max WW Temp		35	°C	
Yield		0.769	lbTSS/lbBOD5	
% Nitrogen in WAS		6.50%		
Residual DO		2.0	mg/L	
Plant Max F:M Ratio		0.1		

Influent Wastewater Characteristics					
Parameter		Conc	Unit	Load	Unit
CBOD5		400	mg/L	400	lb/day
TSS		300	mg/L	300	lb/day
TKN		40	mg/L	40	lb/day
NH3		29	mg/L	28.6	lb/day
NO3		0	mg/L	0	lb/day
TN		40	mg/L	40	lb/day
Total P		12	mg/L	12	lb/day

Permitted Effluent Wastewater Limits					
Parameter		Conc	Unit	Load	Unit
CBOD5		5	mg/L	5	lb/day
TSS		5	mg/L	5	lb/day
TKN		10	mg/L	10	lb/day
NH3		2	mg/L	2	lb/day
NO3		10	mg/L	10	lb/day
TN		20	mg/L	20	lb/day
Total P		0.5	mg/L	0.5	lb/day

MBR Design		
Parameter	Value	
Effective Membrane Area	7.53	ft2
Target Flux	14	gfd
Number of Membranes	1423	
Membranes Per Unit	300	NPH
Required Number of Membrane Units	4.74	
Actual Number of Membrane Units	5.00	
Actual (design) Flux	13.3	gfd
Basin Length	8	ft
Number of Basins	2	
Basin Width	17	ft
Side Water Depth	10.5	ft
Basin Volume	10681	gal
Total MBR Volume	21363	gal

Nitrification Process Calculations		
Parameter	Value	
MBR MLSS	11000	mg/L
MLVSS/MLSS	0.8	
Nitrification Rate	0.027	lbN/lbSS*day
Recommended Safety Factor	25%	
Net Nitrification Load	20	lb/day
Required BOD Aeration Volume	48870	gal
Required Aearation Volume	48870	gal
Actual Aeration Volume	50266	gal

Chlorine Contact Basin Design		
Detention Time	20	min at PHF
Required Basin Size	5854	gal
Required Basin Size	783	cubic feet
Actual Basin Provided Length	**50.5**	
Width	**3**	ft
SWD	**7**	ft
Basin Volume	967	ft
Basin Surface Volume	7235	cf, ea
Chlorine Contact Basin Airflow	15	gal
Airflow Required	1.94	SCFM/1000 cf
SCFM/diffuser	3	SCFM
Number of Headers	1	
SCFM per header	1.94	
Diffusers per Header	1	
Total # of Diffusers	1	

Digester Design Parameters		
BOD Removed	395	lb/day
WAS Sludge Production	304	lb sludge/day
Chemical Sludge Production	33	lb sludge/day
Total Sludge Production	337	lb sludge/day
Sludge Concentration	2%	lb dry solids/lb sludge
Sludge Flow	2022.80	gal sludge/day
WAS Volatile Fraction	75%	
Desired final sludge concentration	4%	
Actual Plant Discharge	728	gal sludge/day
Required Digester Volume	23303	gal
Actual Digester Volume	**24858**	gal

PROJECT NAME: Williamson County MUD No 44

Phase 2

PARAMETER		Value		
Operation Type		Suction		
Equalize Flow		Yes		
MBR ADF		454	m3/d	
MBR PDF		908	m3/d	
Plant PHF		2392.99	m3/d	
MBR AADF		0.092	MGD	
MBR MMADF		**0.15**	MGD	
MBR PDF		0.3	MGD	
Plant PHF		439	GPM	
MBR Peaking Factor		2.0		
Plant PHF Factor		3.0		
Min WW Temp		18	°C	
Max WW Temp		35	°C	
Yield		0.769	lbTSS/lbBOD5	
% Nitrogen in WAS		6.50%		
Residual DO		2.0	mg/L	
Plant Max F:M Ratio		0.1		

Influent Wastewater Characteristics					
Parameter		Conc	Unit	Load	Unit
CBOD5		400	mg/L	400	lb/day
TSS		300	mg/L	300	lb/day
TKN		40	mg/L	40	lb/day
NH3		29	mg/L	28.6	lb/day
NO3		0	mg/L	0	lb/day
TN		40	mg/L	40	lb/day
Total P		12	mg/L	12	lb/day

Permitted Effluent Wastewater Limits					
Parameter		Conc	Unit	Load	Unit
CBOD5		5	mg/L	5	lb/day
TSS		5	mg/L	5	lb/day
TKN		10	mg/L	10	lb/day
NH3		2	mg/L	2	lb/day
NO3		10	mg/L	10	lb/day
TN		20	mg/L	20	lb/day
Total P		0.5	mg/L	0.5	lb/day

MBR Design		
Parameter	Value	
Effective Membrane Area	7.53	ft2
Target Flux	14	gfd
Number of Membranes	1423	
Membranes Per Unit	300	NPH
Required Number of Membrane Units	4.74	
Actual Number of Membrane Units	5.00	
Actual (design) Flux	13.3	gfd
Basin Length	8	ft
Number of Basins	2	
Basin Width	17	ft
Side Water Depth	10.5	ft
Basin Volume	10681	gal
Total MBR Volume	21363	gal

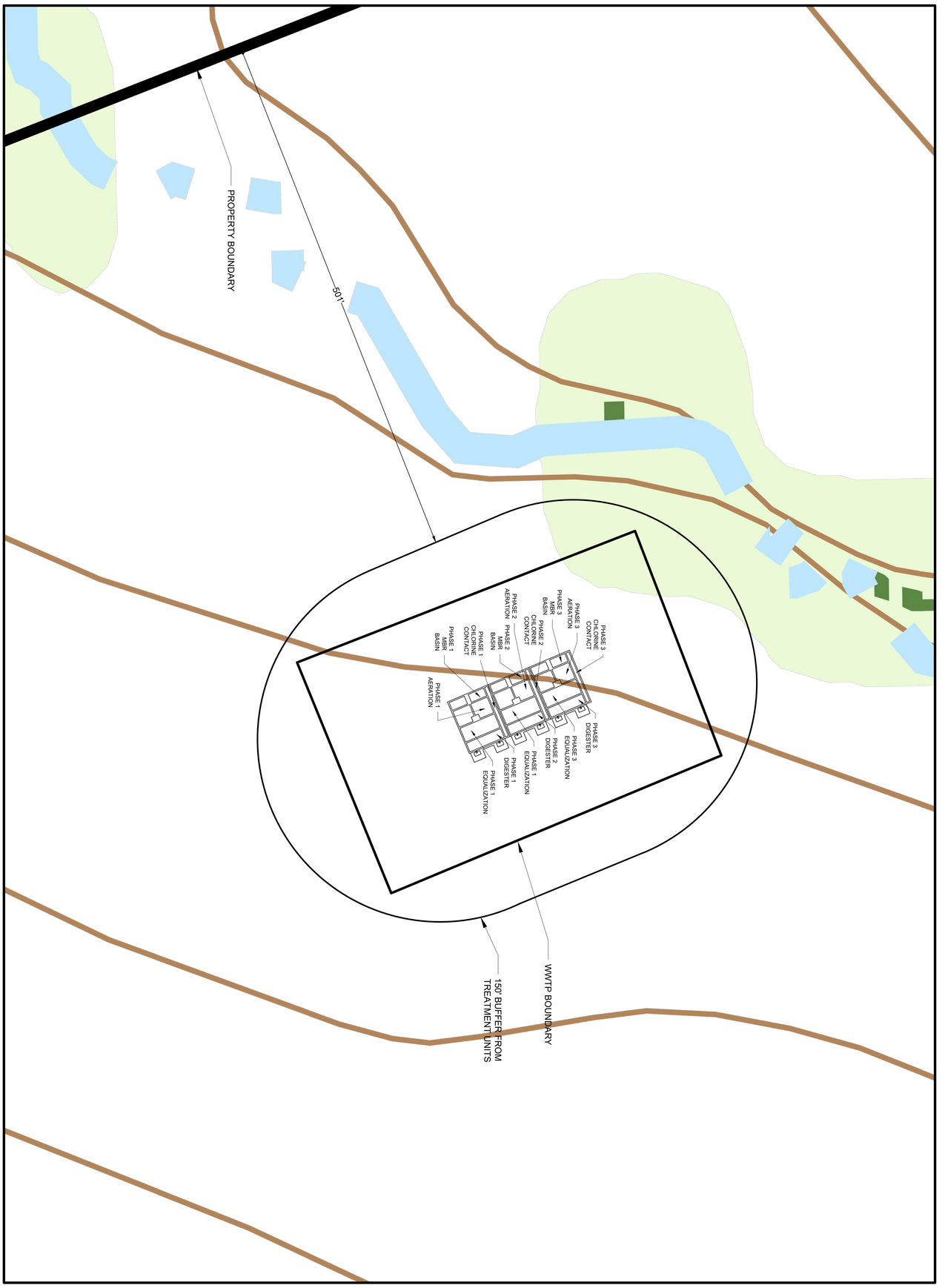
Nitrification Process Calculations		
Parameter	Value	
MBR MLSS	11000	mg/L
MLVSS/MLSS	0.8	
Nitrification Rate	0.027	lbN/lbSS*day
Recommended Safety Factor	25%	
Net Nitrification Load	20	lb/day
Required BOD Aeration Volume	48870	gal
Required Aearation Volume	48870	gal
Actual Aeration Volume	50266	gal

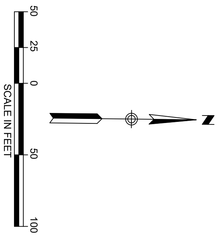
Chlorine Contact Basin Design		
Detention Time	20	min at PHF
Required Basin Size	5854	gal
Required Basin Size	783	cubic feet
Actual Basin Provided Length	**50.5**	
Width	**3**	ft
SWD	**7**	ft
Basin Volume	967	ft
Basin Surface Volume	7235	cf, ea
Chlorine Contact Basin Airflow	15	gal
Airflow Required	1.94	SCFM/1000 cf
SCFM/diffuser	3	SCFM
Number of Headers	1	
SCFM per header	1.94	
Diffusers per Header	1	
Total # of Diffusers	1	

Digester Design Parameters		
BOD Removed	395	lb/day
WAS Sludge Production	304	lb sludge/day
Chemical Sludge Production	33	lb sludge/day
Total Sludge Production	337	lb sludge/day
Sludge Concentration	2%	lb dry solids/lb sludge
Sludge Flow	2022.80	gal sludge/day
WAS Volatile Fraction	75%	
Desired final sludge concentration	4%	
Actual Plant Discharge	728	gal sludge/day
Required Digester Volume	23303	gal
Actual Digester Volume	**24858**	gal

APPENDIX H

SITE DRAWING





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WILLIAMSON COUNTY M.U.D. 44

THE VANTAGE AUSTIN LLC

BUFFER ZONE MAP

000084

APPENDIX I

DESIGN CALCULATIONS

Williamson MUD No.44 - WWTP FLOW PHASES

Phase 1			Phase 2			Phase 3		
Assumptions			**Assumptions**			**Assumptions**		
Average Flow per LUE =	245	gpd	Average Flow per LUE =	245	gpd	Average Flow per LUE =	245	gpd
Average Density	3	LUEs/Ac	Average Density	3	LUEs/Ac	Average Density	3	LUEs/Ac
I/I for Wet Peak	750	gpd/Ac	I/I for Wet Peak	750	gpd/Ac	I/I for Wet Peak	750	gpd/Ac
LUEs	610		LUEs	1,220		LUEs	1,830	
Average Daily Flow	**149,450**	gpd	Average Daily Flow	**298,900**	gpd	Average Daily Flow	**448,350**	gpd
	104	gpm	Average Daily Flow	208	gpm	Average Daily Flow	311	gpm
Dry Peaking Factor	3.56		Dry Peaking Factor	3.31		Dry Peaking Factor	3.14	
Peak Dry Flow	370	gpm	Peak Dry Flow	686	gpm	Peak Dry Flow	979	gpm
Service Area	132	acres	Service Area	132	acres	Service Area	131	acres
I/I for Peak Wet	99,000	gpd	I/I for Peak Wet	99,000	gpd	I/I for Peak Wet	98,250	gpd
	69	gpm		69	gpm		68	gpm
Total Peak Wet Flow	439	gpm	Total Peak Wet Flow	755	gpm	Total Peak Wet Flow	1,047	gpm
Minimum Flow Factor	0.22		Minimum Flow Factor	0.25		Minimum Flow Factor	0.27	
Minimum Flow	22	gpm	Minimum Flow	52	gpm	Minimum Flow	84	gpm

PROJECT NAME: Williamson County MUD No 44

Phase 1

PARAMETER		Value		
Operation Type		Suction		
Equalize Flow		Yes		
MBR ADF		454	m3/d	
MBR PDF		908	m3/d	
Plant PHF		2392.99	m3/d	
MBR AADF		0.092	MGD	
MBR MMADF		**0.15**	MGD	
MBR PDF		0.3	MGD	
Plant PHF		439	GPM	
MBR Peaking Factor		2.0		
Plant PHF Factor		3.0		
Min WW Temp		18	°C	
Max WW Temp		35	°C	
Yield		0.769	lbTSS/lbBOD5	
% Nitrogen in WAS		6.50%		
Residual DO		2.0	mg/L	
Plant Max F:M Ratio		0.1		

Influent Wastewater Characteristics					
Parameter		Conc	Unit	Load	Unit
CBOD5		400	mg/L	400	lb/day
TSS		300	mg/L	300	lb/day
TKN		40	mg/L	40	lb/day
NH3		29	mg/L	28.6	lb/day
NO3		0	mg/L	0	lb/day
TN		40	mg/L	40	lb/day
Total P		12	mg/L	12	lb/day

Permitted Effluent Wastewater Limits					
Parameter		Conc	Unit	Load	Unit
CBOD5		5	mg/L	5	lb/day
TSS		5	mg/L	5	lb/day
TKN		10	mg/L	10	lb/day
NH3		2	mg/L	2	lb/day
NO3		10	mg/L	10	lb/day
TN		20	mg/L	20	lb/day
Total P		0.5	mg/L	0.5	lb/day

MBR Design		
Parameter	Value	
Effective Membrane Area	7.53	ft2
Target Flux	14	gfd
Number of Membranes	1423	
Membranes Per Unit	300	NPH
Required Number of Membrane Units	4.74	
Actual Number of Membrane Units	5.00	
Actual (design) Flux	13.3	gfd
Basin Length	8	ft
Number of Basins	2	
Basin Width	17	ft
Side Water Depth	10.5	ft
Basin Volume	10681	gal
Total MBR Volume	21363	gal

Nitrification Process Calculations		
Parameter	Value	
MBR MLSS	11000	mg/L
MLVSS/MLSS	0.8	
Nitrification Rate	0.027	lbN/lbSS*day
Recommended Safety Factor	25%	
Net Nitrification Load	20	lb/day
Required BOD Aeration Volume	48870	gal
Required Aearation Volume	48870	gal
Actual Aeration Volume	50266	gal

Chlorine Contact Basin Design		
Detention Time	20	min at PHF
Required Basin Size	5854	gal
Required Basin Size	783	cubic feet
Actual Basin Provided Length	**50.5**	
Width	**3**	ft
SWD	**7**	ft
Basin Volume	967	ft
Basin Surface Volume	7235	cf, ea
Chlorine Contact Basin Airflow	15	gal
Airflow Required	1.94	SCFM/1000 cf
SCFM/diffuser	3	SCFM
Number of Headers	1	
SCFM per header	1.94	
Diffusers per Header	1	
Total # of Diffusers	1	

Digester Design Parameters		
BOD Removed	395	lb/day
WAS Sludge Production	304	lb sludge/day
Chemical Sludge Production	33	lb sludge/day
Total Sludge Production	337	lb sludge/day
Sludge Concentration	2%	lb dry solids/lb sludge
Sludge Flow	2022.80	gal sludge/day
WAS Volatile Fraction	75%	
Desired final sludge concentration	4%	
Actual Plant Discharge	728	gal sludge/day
Required Digester Volume	23303	gal
Actual Digester Volume	**24858**	gal

PROJECT NAME: Williamson County MUD No 44

Phase 2

PARAMETER		Value		
Operation Type		Suction		
Equalize Flow		Yes		
MBR ADF		454	m3/d	
MBR PDF		908	m3/d	
Plant PHF		4116	m3/d	
MBR AADF		0.092	MGD	
MBR MMADF		**0.3**	MGD	
MBR PDF		0.6	MGD	
Plant PHF		755	GPM	
MBR Peaking Factor		2.0		
Plant PHF Factor		3.0		
Min WW Temp		18	°C	
Max WW Temp		35	°C	
Yield		0.769	lbTSS/lbBOD5	
% Nitrogen in WAS		6.50%		
Residual DO		2.0	mg/L	
Plant Max F:M Ratio		0.1		

Influent Wastewater Characteristics					
Parameter		Conc	Unit	Load	Unit
CBOD5		400	mg/L	400	lb/day
TSS		300	mg/L	300	lb/day
TKN		40	mg/L	40	lb/day
NH3		29	mg/L	28.6	lb/day
NO3		0	mg/L	0	lb/day
TN		40	mg/L	40	lb/day
Total P		12	mg/L	12	lb/day

Permitted Effluent Wastewater Limits					
Parameter		Conc	Unit	Load	Unit
CBOD5		5	mg/L	5	lb/day
TSS		5	mg/L	5	lb/day
TKN		10	mg/L	10	lb/day
NH3		2	mg/L	2	lb/day
NO3		10	mg/L	10	lb/day
TN		20	mg/L	20	lb/day
Total P		0.5	mg/L	0.5	lb/day

MBR Design		
Parameter	Value	
Effective Membrane Area	7.53	ft2
Target Flux	14	gfd
Number of Membranes	2846	
Membranes Per Unit	300	NPH
Required Number of Membrane Units	9.49	
Actual Number of Membrane Units	10.00	
Actual (design) Flux	13.3	gfd
Basin Length	8	ft
Number of Basins	2	
Basin Width	17	ft
Side Water Depth	10.5	ft
Basin Volume	21363	gal
Total MBR Volume	42726	gal

Nitrification Process Calculations		
Parameter	Value	
MBR MLSS	11000	mg/L
MLVSS/MLSS	0.8	
Nitrification Rate	0.027	lbN/lbSS*day
Recommended Safety Factor	25%	
Net Nitrification Load	20	lb/day
Required BOD Aeration Volume	94688	gal
Required Aearation Volume	94688	gal
Actual Aeration Volume	100532	gal

Chlorine Contact Basin Design		
Detention Time	20	min at PHF
Required Basin Size	10069	gal
Required Basin Size	1346	cubic feet
Actual Basin Provided Length	**50.5**	
Width	**3**	ft
SWD	**7**	ft
Basin Volume	1934	ft
Basin Surface Volume	7235	cf, ea
Chlorine Contact Basin Airflow	15	gal
Airflow Required	1.94	SCFM/1000 cf
SCFM/diffuser	3	SCFM
Number of Headers	1	
SCFM per header	1.94	
Diffusers per Header	1	
Total # of Diffusers	1	

Digester Design Parameters		
BOD Removed	395	lb/day
WAS Sludge Production	304	lb sludge/day
Chemical Sludge Production	33	lb sludge/day
Total Sludge Production	337	lb sludge/day
Sludge Concentration	2%	lb dry solids/lb sludge
Sludge Flow	2022.80	gal sludge/day
WAS Volatile Fraction	75%	
Desired final sludge concentration	4%	
Actual Plant Discharge	728	gal sludge/day
Required Digester Volume	46605	gal
Actual Digester Volume	**49716**	gal

PROJECT NAME: Williamson County MUD No 44

Phase 3

PARAMETER		Value		
Operation Type		Suction		
Equalize Flow		Yes		
MBR ADF		454	m3/d	
MBR PDF		908	m3/d	
Plant PHF		5707	m3/d	
MBR AADF		0.092	MGD	
MBR MMADF		**0.45**	MGD	
MBR PDF		0.9	MGD	
Plant PHF		1047	GPM	
MBR Peaking Factor		2.0		
Plant PHF Factor		3.0		
Min WW Temp		18	°C	
Max WW Temp		35	°C	
Yield		0.769	lbTSS/lbBOD5	
% Nitrogen in WAS		6.50%		
Residual DO		2.0	mg/L	
Plant Max F:M Ratio		0.1		

Influent Wastewater Characteristics					
Parameter		Conc	Unit	Load	Unit
CBOD5		400	mg/L	400	lb/day
TSS		300	mg/L	300	lb/day
TKN		40	mg/L	40	lb/day
NH3		29	mg/L	28.6	lb/day
NO3		0	mg/L	0	lb/day
TN		40	mg/L	40	lb/day
Total P		12	mg/L	12	lb/day

Permitted Effluent Wastewater Limits					
Parameter		Conc	Unit	Load	Unit
CBOD5		5	mg/L	5	lb/day
TSS		5	mg/L	5	lb/day
TKN		10	mg/L	10	lb/day
NH3		2	mg/L	2	lb/day
NO3		10	mg/L	10	lb/day
TN		20	mg/L	20	lb/day
Total P		0.5	mg/L	0.5	lb/day

MBR Design		
Parameter	Value	
Effective Membrane Area	7.53	ft2
Target Flux	14	gfd
Number of Membranes	4269	
Membranes Per Unit	300	NPH
Required Number of Membrane Units	14.23	
Actual Number of Membrane Units	15.00	
Actual (design) Flux	13.3	gfd
Basin Length	8	ft
Number of Basins	2	
Basin Width	17	ft
Side Water Depth	10.5	ft
Basin Volume	32044	gal
Total MBR Volume	64089	gal

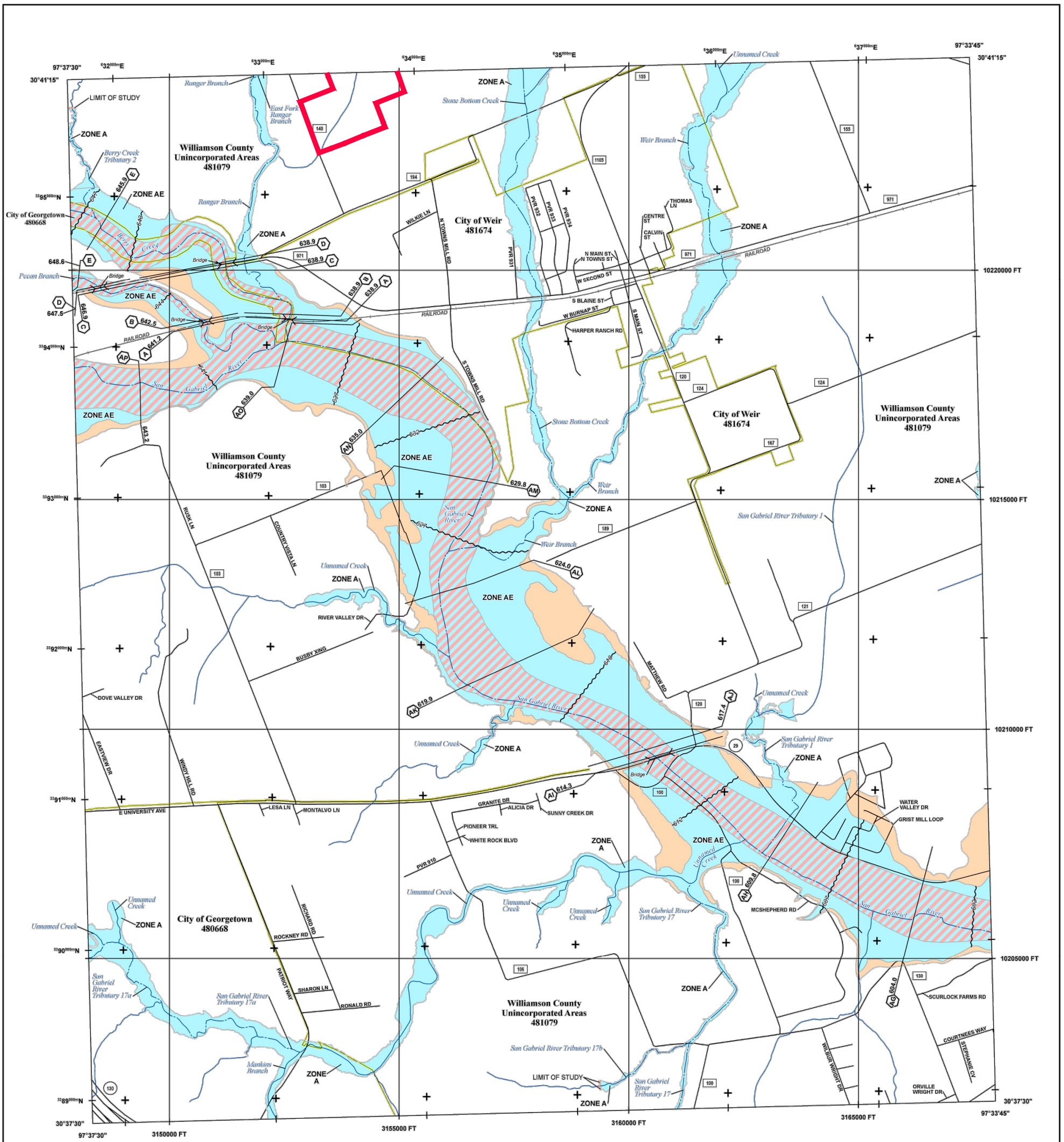
Nitrification Process Calculations		
Parameter	Value	
MBR MLSS	11000	mg/L
MLVSS/MLSS	0.8	
Nitrification Rate	0.027	lbN/lbSS*day
Recommended Safety Factor	25%	
Net Nitrification Load	20	lb/day
Required BOD Aeration Volume	140507	gal
Required Aearation Volume	140507	gal
Actual Aeration Volume	150798	gal

Chlorine Contact Basin Design		
Detention Time	20	min at PHF
Required Basin Size	13963	gal
Required Basin Size	1867	cubic feet
Actual Basin Provided Length	**50.5**	
Width	**3**	ft
SWD	**7**	ft
Basin Volume	2901	ft
Basin Surface Volume	7235	cf, ea
Chlorine Contact Basin Airflow	15	gal
Airflow Required	1.94	SCFM/1000 cf
SCFM/diffuser	3	SCFM
Number of Headers	1	
SCFM per header	1.94	
Diffusers per Header	1	
Total # of Diffusers	1	

Digester Design Parameters		
BOD Removed	395	lb/day
WAS Sludge Production	304	lb sludge/day
Chemical Sludge Production	33	lb sludge/day
Total Sludge Production	337	lb sludge/day
Sludge Concentration	2%	lb dry solids/lb sludge
Sludge Flow	2022.80	gal sludge/day
WAS Volatile Fraction	75%	
Desired final sludge concentration	4%	
Actual Plant Discharge	728	gal sludge/day
Required Digester Volume	69908	gal
Actual Digester Volume	**74574**	gal

APPENDIX J

FEMA FLOOD MAPS



FLOOD HAZARD INFORMATION

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

THE INFORMATION DEPICTED ON THIS MAP AND SUPPORTING DOCUMENTATION ARE ALSO AVAILABLE IN DIGITAL FORMAT AT HTTPS://MSC.FEMA.GOV

SPECIAL FLOOD HAZARD AREAS
- Without Base Flood Elevation (BFE) *Zone A,V, A99*
- With BFE or Depth *Zone AE, AO, AH, VE, AR*
- Regulatory Floodway

OTHER AREAS OF FLOOD HAZARD
- 0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile *Zone X*
- Future Conditions 1% Annual Chance Flood Hazard *Zone X*
- Area with Reduced Flood Risk due to Levee See Notes. *Zone X*
- Area with Flood Risk due to Levee *Zone D*

OTHER AREAS
- NO SCREEN Area of Minimal Flood Hazard *Zone X*
- Area of Undetermined Flood Hazard *Zone D*

GENERAL STRUCTURES
- Channel, Culvert, or Storm Sewer
- Levee, Dike, or Floodwall

OTHER FEATURES
- 18.2 / 17.5 Cross Sections with 1% Annual Chance Water Surface Elevation
- Coastal Transect
- Coastal Transect Baseline
- Profile Baseline
- Hydrographic Feature
- 513 Base Flood Elevation Line (BFE)
- Limit of Study
- Jurisdiction Boundary

NOTES TO USERS

For information and questions about this Flood Insurance Rate Map (FIRM), available products associated with this FIRM, including historic versions, the current map date for each FIRM panel, how to order products, or the National Flood Insurance Program (NFIP) in general, please call the FEMA Map Information eXchange at 1-877-FEMA-MAP (1-877-336-2627) or visit the FEMA Flood Map Service Center website at https://msc.fema.gov. Available products may include previously issued Letters of Map Change, a Flood Insurance Study Report, and/or digital versions of this map. Many of these products can be ordered or obtained directly from the website.

Communities annexing land on adjacent FIRM panels must obtain a current copy of the adjacent panel as well as the current FIRM Index. These may be ordered directly from the Flood Map Service Center at the number listed above.

For community and countywide map dates refer to the Flood Insurance Study Report for this jurisdiction.

To determine if flood insurance is available in this community, contact your Insurance agent or call the National Flood Insurance Program at 1-800-638-6620.

Base map information shown on this FIRM was derived from digital data obtained from Texas Natural Resource Information Systems (TNRIS), dated 2000; United States Census Bureau, dated 2015; United States Geological Survey, dated 2005; and the Williamson County Geographic Information Systems (GIS) Department, dated 2014 and 2017.

SCALE

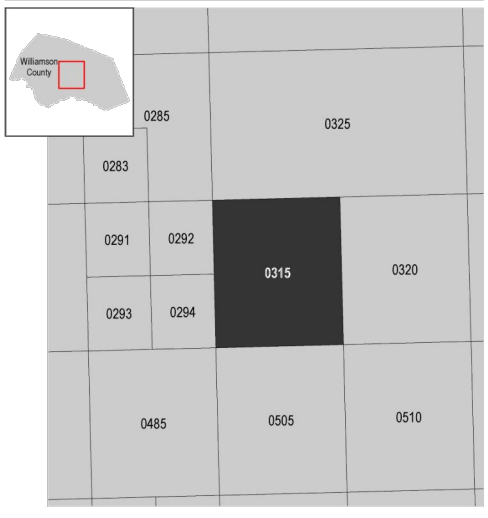
Map Projection:
Texas State Plane Central (FIPS ZONE 4203); North American Datum 1983; Western Hemisphere; Vertical Datum: NAVD 88

1 inch = 1,000 feet 1:12,000

0 1,000 2,000 4,000 feet

0 250 500 1,000 meters

PANEL LOCATOR



FEMA National Flood Insurance Program

NATIONAL FLOOD INSURANCE PROGRAM
FLOOD INSURANCE RATE MAP

WILLIAMSON COUNTY, TEXAS
and Incorporated Areas

PANEL 315 OF 750

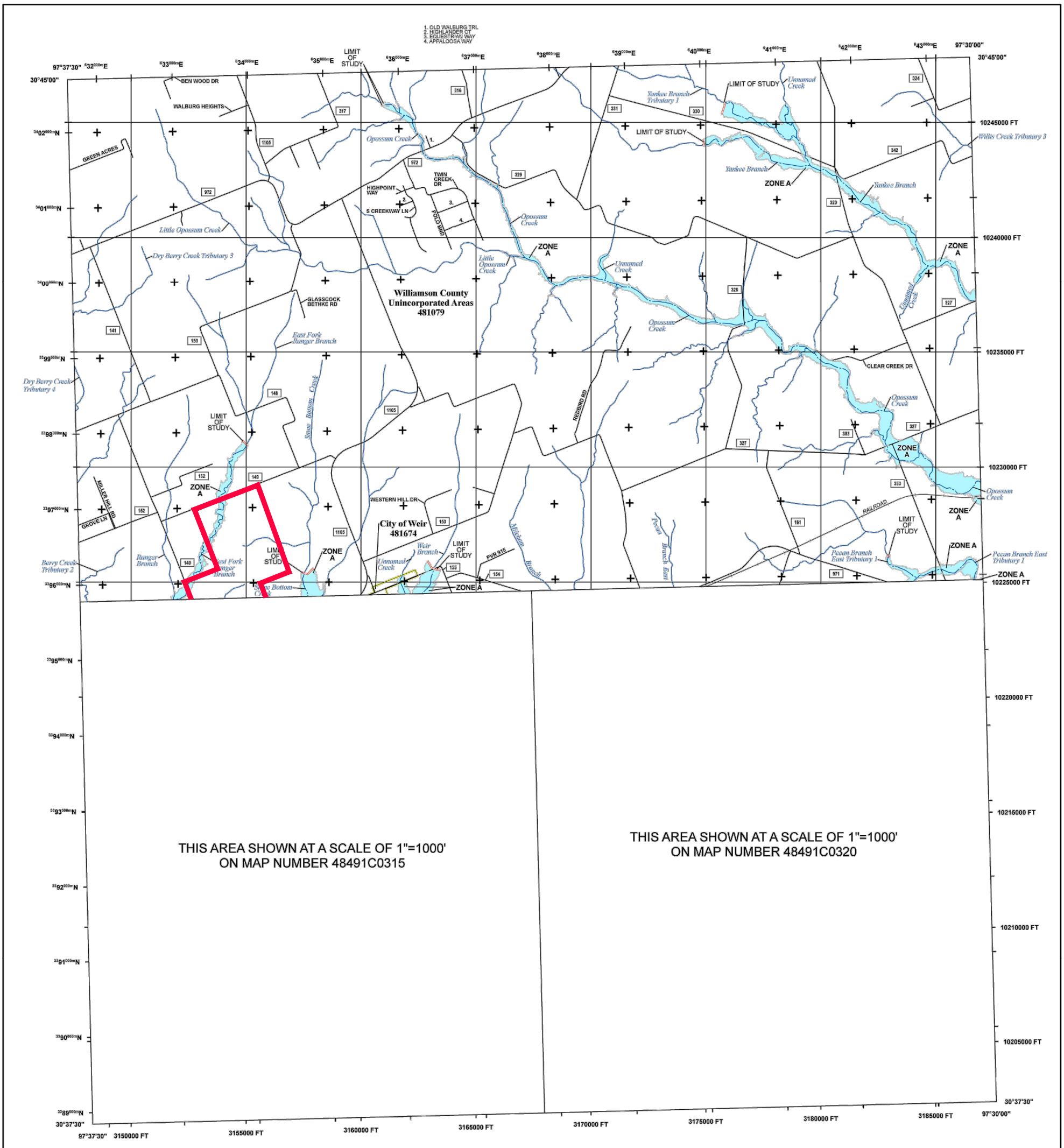
Panel Contains:

COMMUNITY	NUMBER	PANEL	SUFFIX
GEORGETOWN, CITY OF	480668	0315	F
WEIR, CITY OF	481674	0315	F
WILLIAMSON COUNTY	481079	0315	F

VERSION NUMBER
2.3.3.3

MAP NUMBER
48491C0315F

MAP REVISED
DECEMBER 20, 2019



FLOOD HAZARD INFORMATION

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

THE INFORMATION DEPICTED ON THIS MAP AND SUPPORTING DOCUMENTATION ARE ALSO AVAILABLE IN DIGITAL FORMAT AT HTTPS://MSC.FEMA.GOV

SPECIAL FLOOD HAZARD AREAS	Without Base Flood Elevation (BFE) Zone A,V, A99
	With BFE or Depth Zone AE, AO, AH, VE, AR
	Regulatory Floodway
	0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone X
	Future Conditions 1% Annual Chance Flood Hazard Zone X
	Area with Reduced Flood Risk due to Levee See Notes. Zone X
OTHER AREAS OF FLOOD HAZARD	Area with Flood Risk due to Levee Zone D
	NO SCREEN Area of Minimal Flood Hazard Zone X
OTHER AREAS	Area of Undetermined Flood Hazard Zone D
GENERAL STRUCTURES	Channel, Culvert, or Storm Sewer
	Levee, Dike, or Floodwall
	E 18.2 / 17.5 Cross Sections with 1% Annual Chance Water Surface Elevation
	8 Coastal Transect
	Coastal Transect Baseline
	Profile Baseline
	Hydrographic Feature
	513 Base Flood Elevation Line (BFE)
OTHER FEATURES	Limit of Study
	Jurisdiction Boundary

NOTES TO USERS

For information and questions about this Flood Insurance Rate Map (FIRM), available products associated with this FIRM, including historic versions, the current map date for each FIRM panel, how to order products, or the National Flood Insurance Program (NFIP) in general, please call the FEMA Map Information eXchange at 1-877-FEMA-MAP (1-877-336-2627) or visit the FEMA Flood Map Service Center website at https://msc.fema.gov. Available products may include previously issued Letters of Map Change, a Flood Insurance Study Report, and/or digital versions of this map. Many of these products can be ordered or obtained directly from the website.

Communities annexing land on adjacent FIRM panels must obtain a current copy of the adjacent panel as well as the current FIRM Index. These may be ordered directly from the Flood Map Service Center at the number listed above.

For community and countywide map dates refer to the Flood Insurance Study Report for this jurisdiction.

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Base map information shown on this FIRM was derived from digital data obtained from Texas Natural Resource Information Systems (TNRIS), dated 2000; United States Census Bureau, dated 2015; United States Geological Survey, dated 2005; and the Williamson County Geographic Information Systems (GIS) Department, dated 2014 and 2017.

SCALE

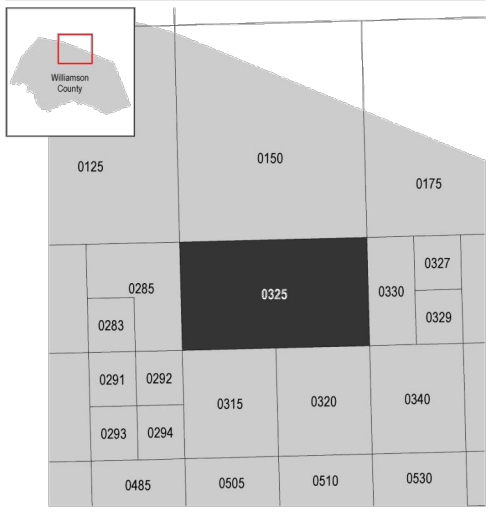
Map Projection:
Texas State Plane Central (FIPS ZONE 4203); North American Datum 1983; Western Hemisphere; Vertical Datum: NAVD 88

1 inch = 2,000 feet 1:24,000

0 2,000 4,000 8,000 feet

0 500 1,000 2,000 meters

PANEL LOCATOR



FEMA National Flood Insurance Program

NATIONAL FLOOD INSURANCE PROGRAM
FLOOD INSURANCE RATE MAP

WILLIAMSON COUNTY, TEXAS
and Incorporated Areas

PANEL 325 OF 750

Panel Contains:

COMMUNITY	NUMBER	PANEL	SUFFIX
WEIR, CITY OF	481674	0325	F
WILLIAMSON COUNTY	481079	0325	F

VERSION NUMBER
2.3.3.3

MAP NUMBER
48491C0325F

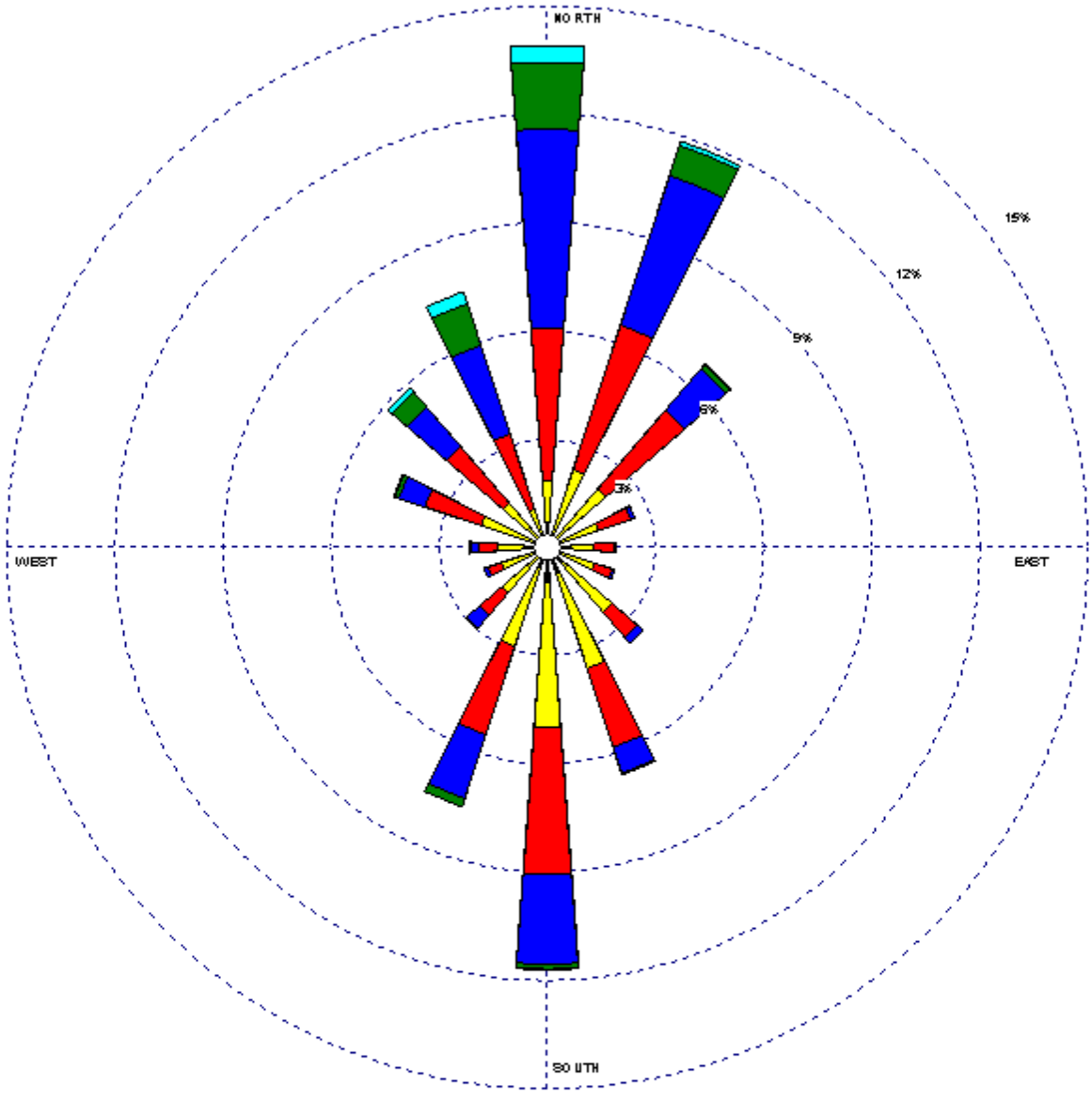
MAP REVISED
DECEMBER 20, 2019

APPENDIX K

WIND ROSE

WIND ROSE PLOT

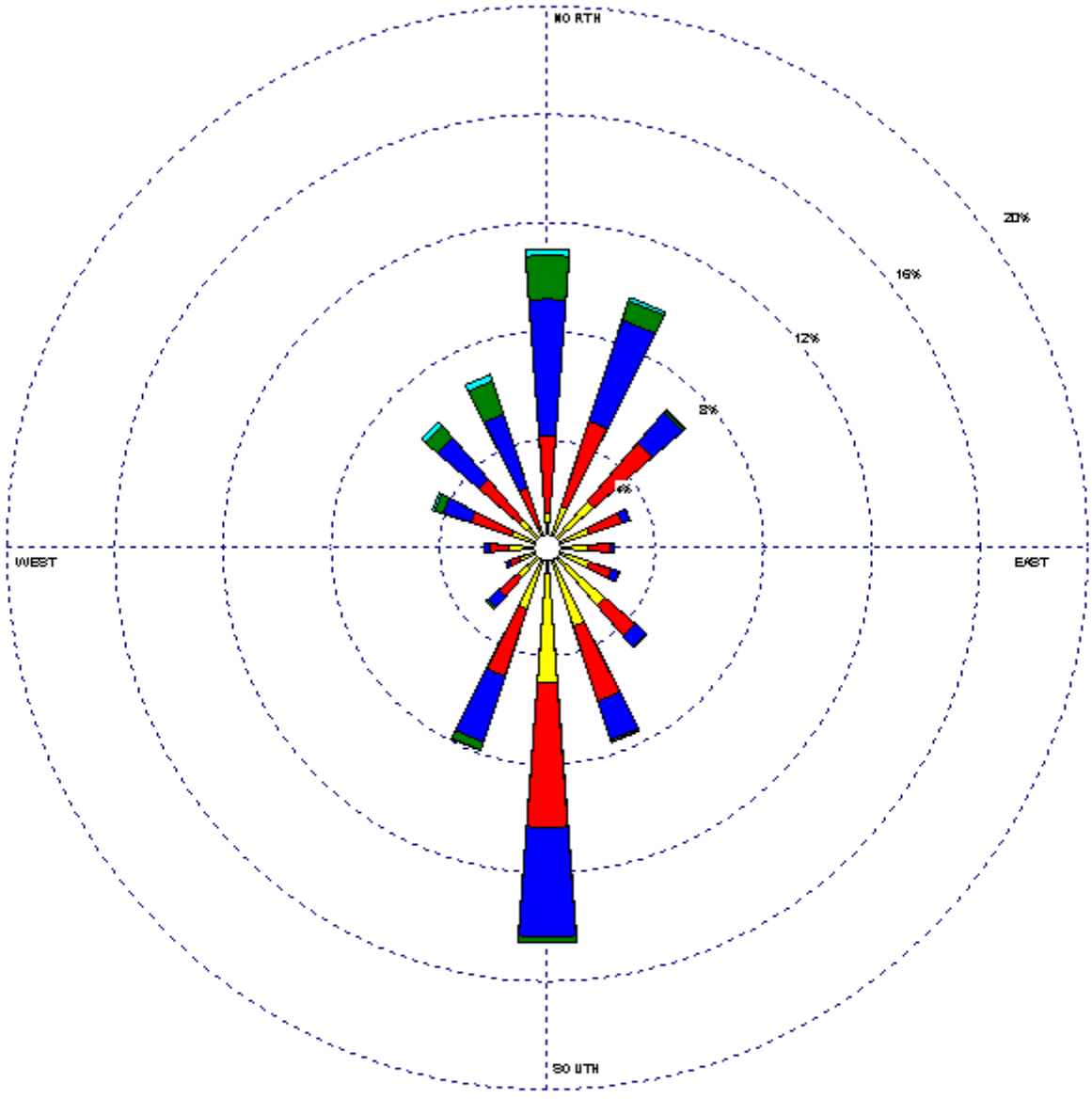
Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



Wind Speed (m/s) > 11.06 8.49 - 11.06 5.40 - 8.49 3.34 - 5.40 1.80 - 3.34 0.51 - 1.80	MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS
	DISPLAY Wind Speed	UNIT m/s	COMMENTS
	AVG. WIND SPEED 4.60 m/s	CALM WINDS 6.83%	
	ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 Jan 1 - Jan 31 Midnight - 11 PM	

WIND ROSE PLOT

Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



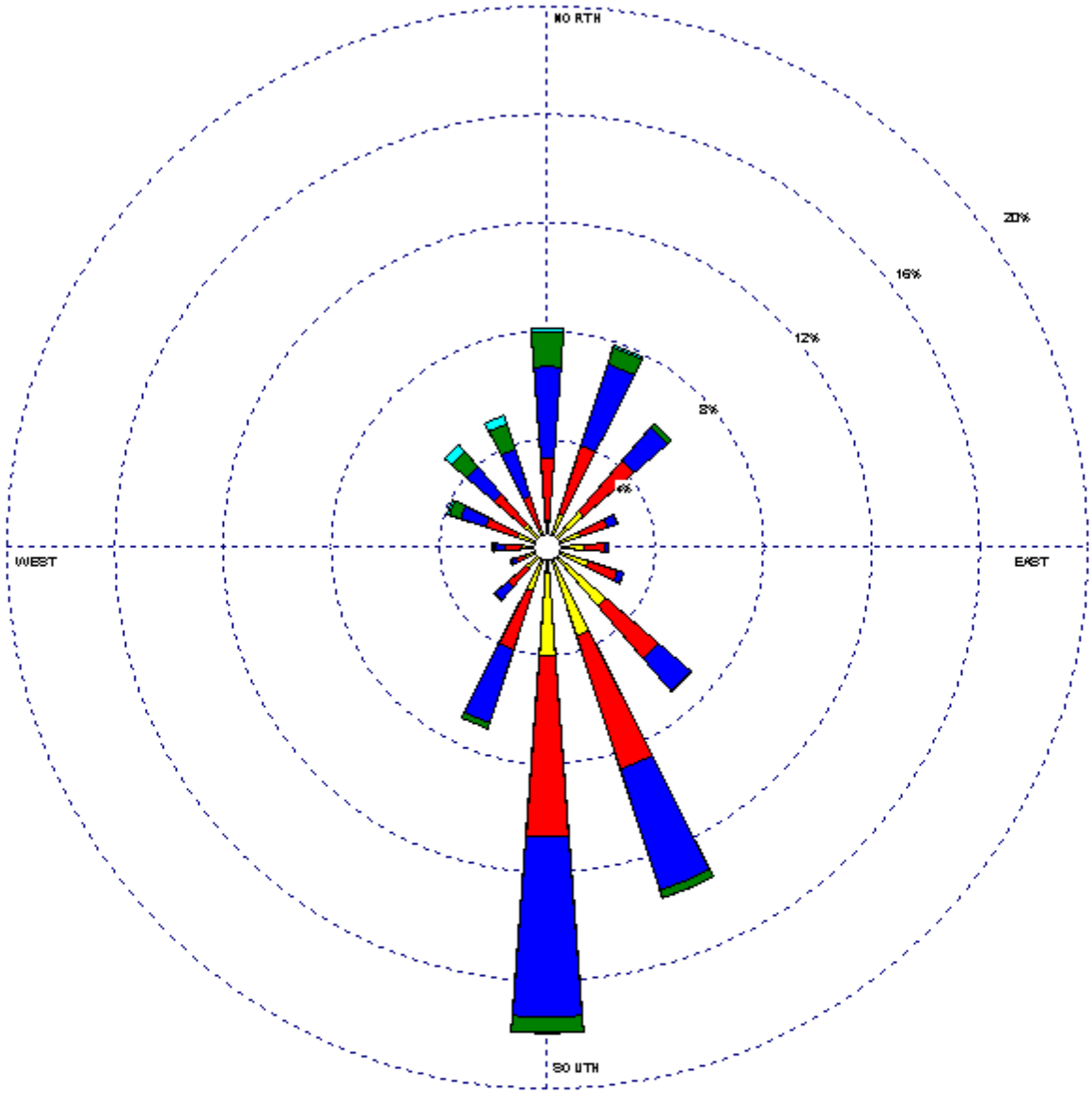
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS	
DISPLAY Wind Speed	UNIT m/s	COMMENTS	
AVG. WIND SPEED 4.77 m/s	CALM WINDS 4.67%		
ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 Feb 1 - Feb 29 Midnight - 11 PM		

WIND ROSE PLOT

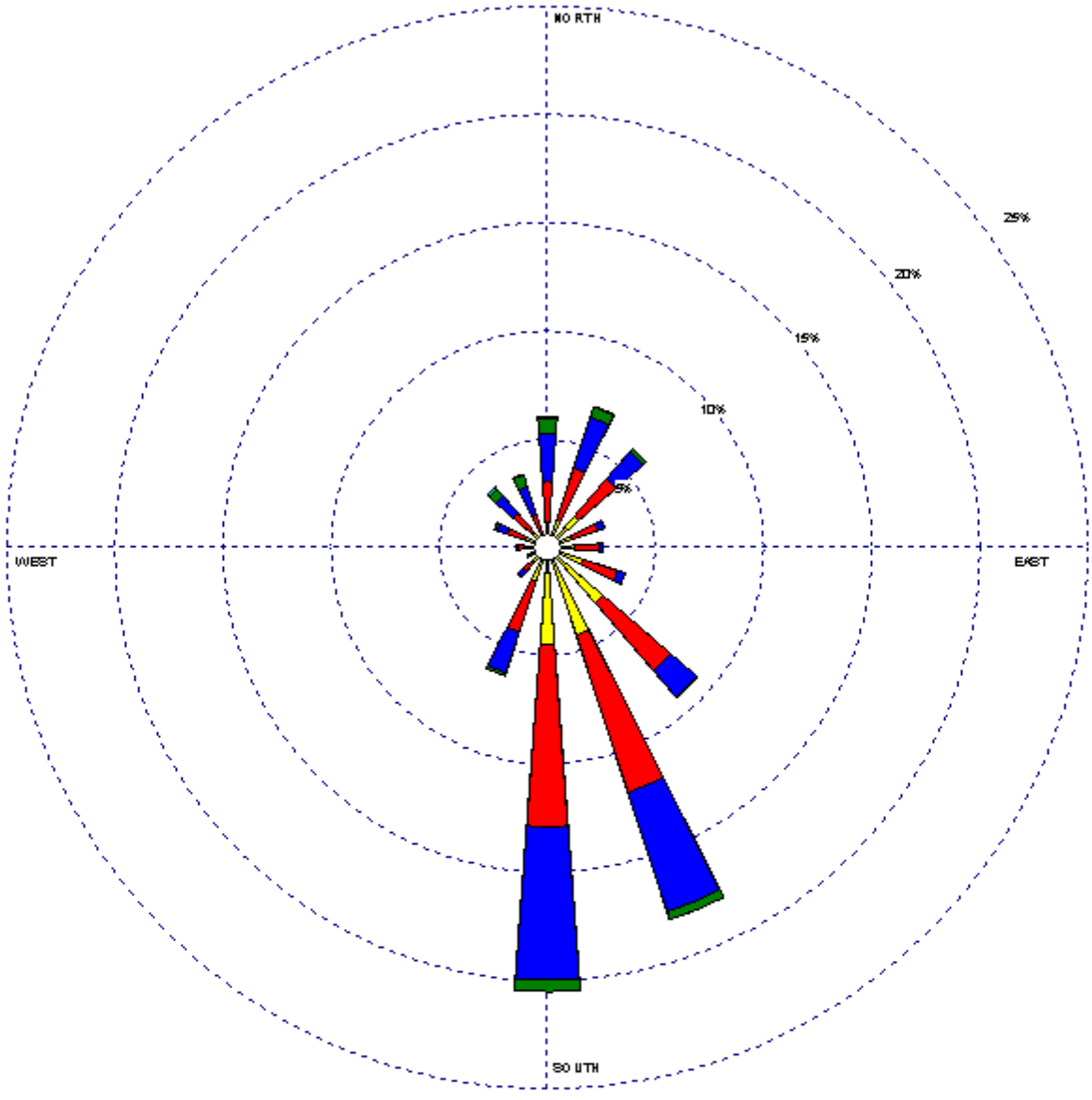
Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



Wind Speed (m/s) > 11.06 8.49 - 11.06 5.40 - 8.49 3.34 - 5.40 1.80 - 3.34 0.51 - 1.80	MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS
	DISPLAY Wind Speed	UNIT m/s	COMMENTS
	AVG. WIND SPEED 4.97 m/s	CALM WINDS 3.99%	
	ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 Mar 1 - Mar 31 Midnight - 11 PM	

WIND ROSE PLOT

Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



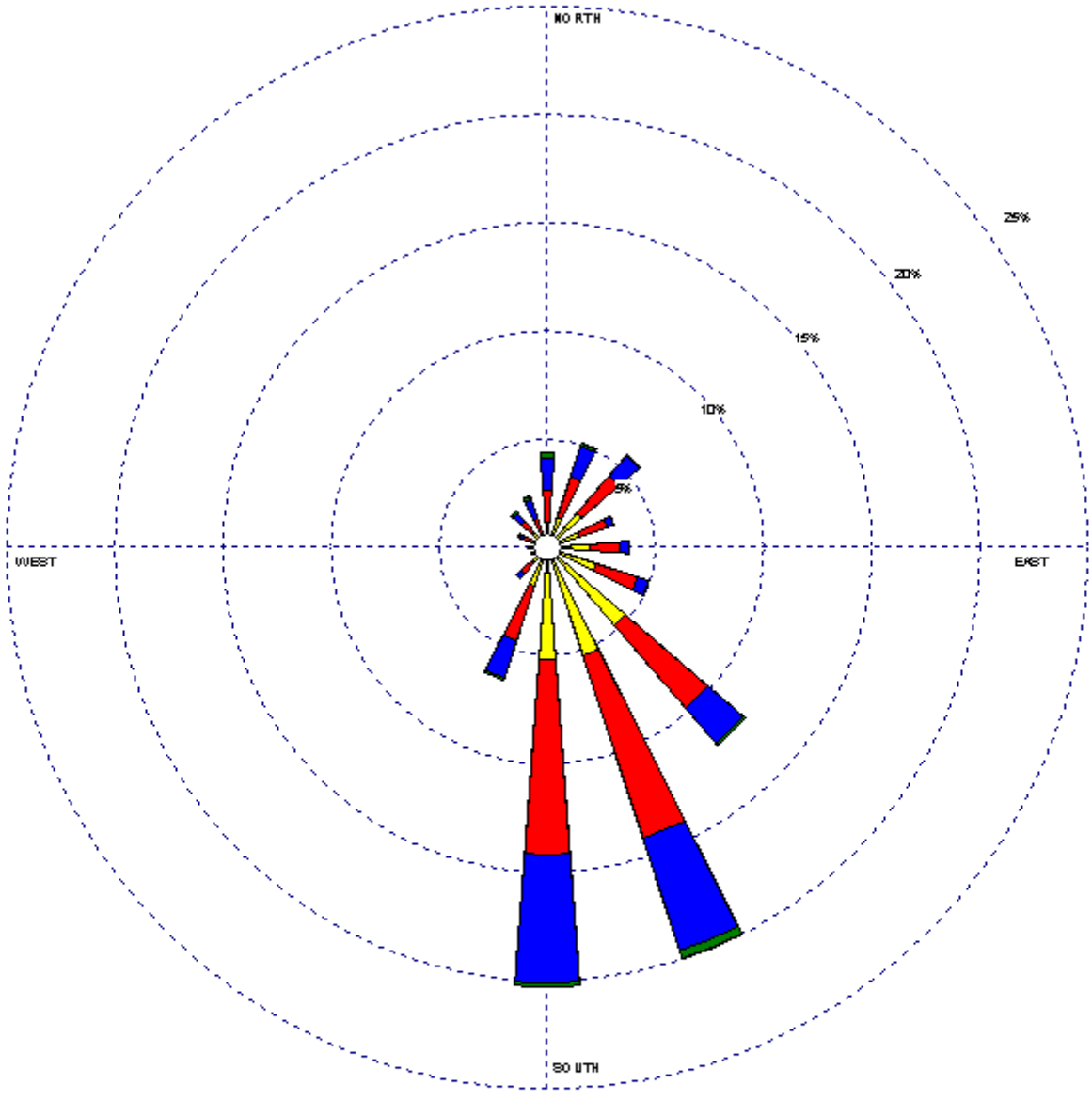
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER	DATE	COMPANY NAME
Sara West	8/29/2002	USDA-ARS
DISPLAY: Wind Speed	UNIT: m/s	COMMENTS
AVG. WIND SPEED: 4.68 m/s	CALM WINDS: 3.55%	
ORIENTATION: Direction (blowing from)	PLOT YEAR-DATE-TIME: 1961 Apr 1 - Apr 30 Midnight - 11 PM	

WIND ROSE PLOT

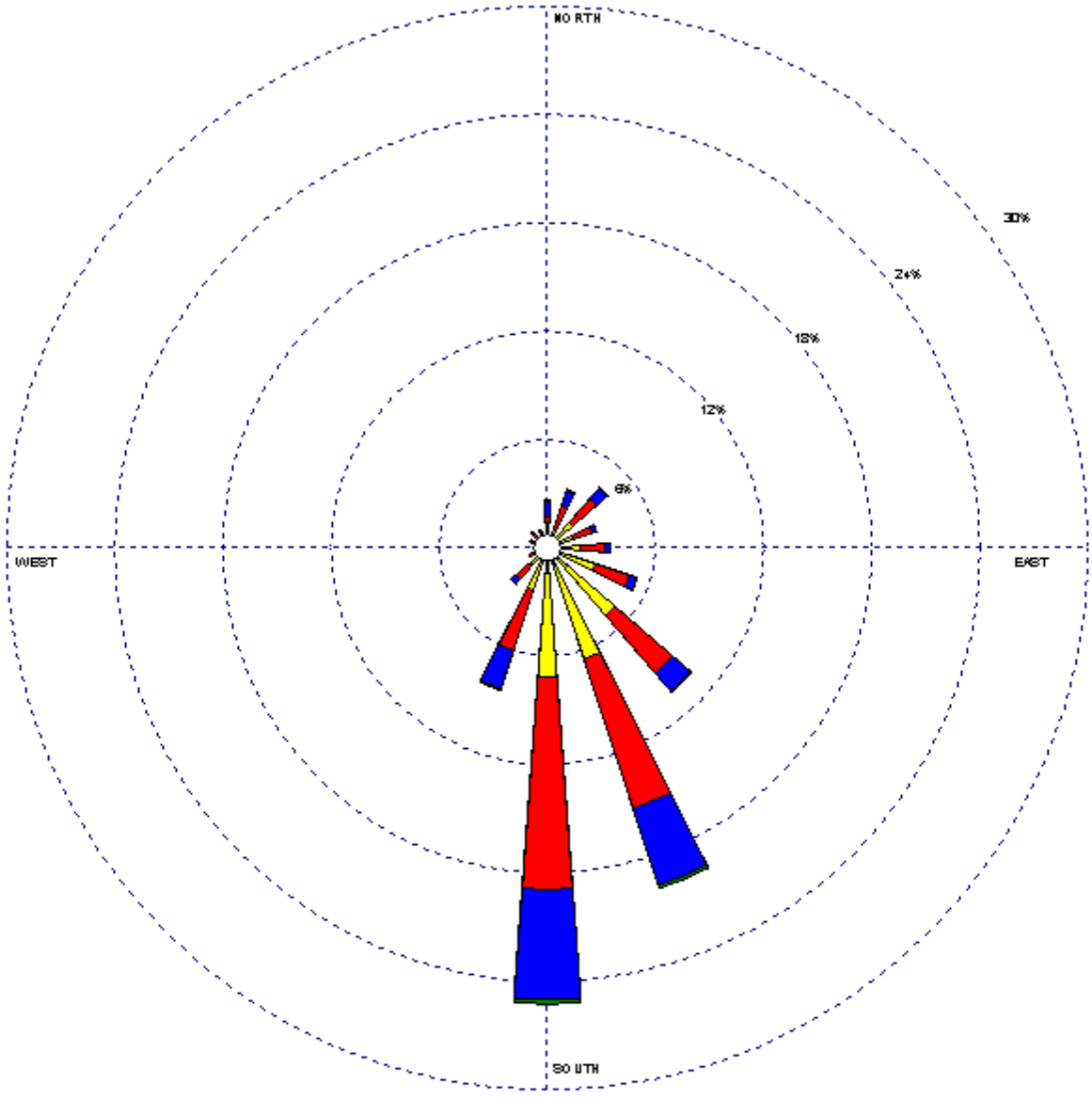
Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



Wind Speed (m/s) > 11.06 8.49 - 11.06 5.40 - 8.49 3.34 - 5.40 1.80 - 3.34 0.51 - 1.80	MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS
	DISPLAY Wind Speed	UNIT m/s	COMMENTS
	AVG. WIND SPEED 4.33 m/s	CALM WINDS 4.23%	
	ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 May 1 - May 31 Midnight - 11 PM	

WIND ROSE PLOT

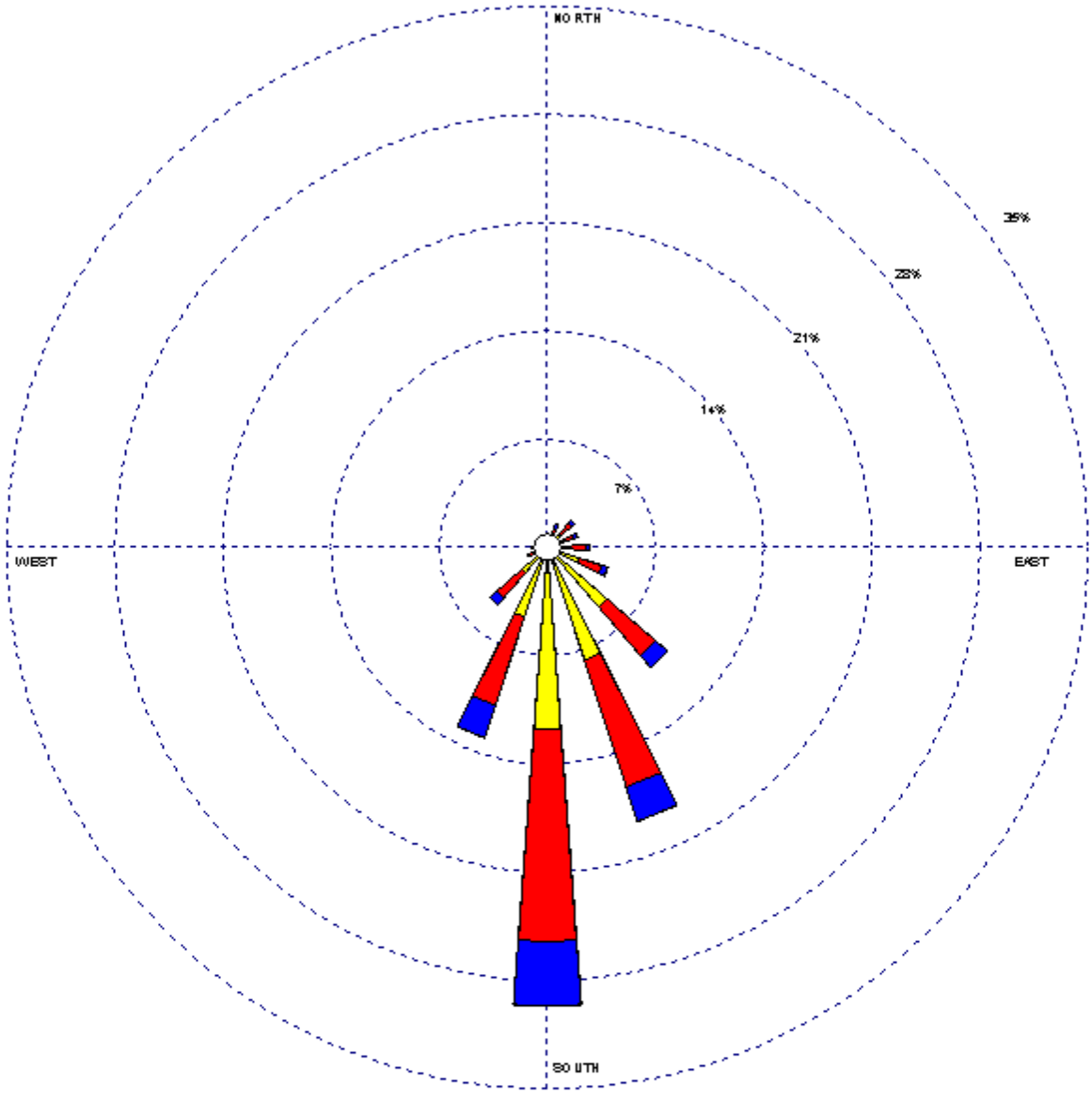
Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



Wind Speed (m/s) > 11.06 8.49 - 11.06 5.40 - 8.49 3.34 - 5.40 1.80 - 3.34 0.51 - 1.80	MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS
	DISPLAY Wind Speed	UNIT m/s	COMMENTS
	AVG. WIND SPEED 4.08 m/s	CALM WINDS 6.01%	
	ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 Jun 1 - Jun 30 Midnight - 11 PM	

WIND ROSE PLOT

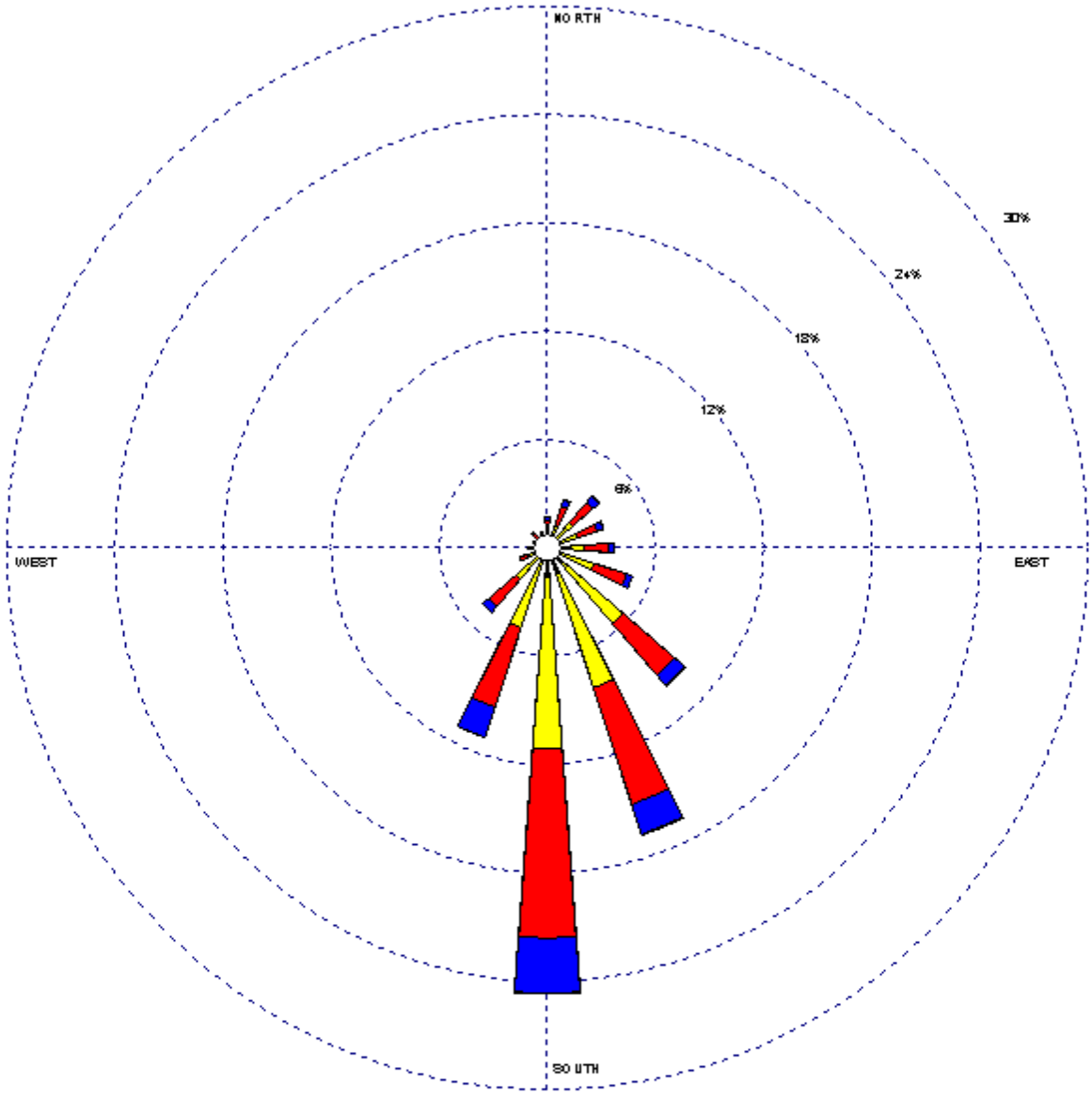
Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



Wind Speed (m/s) > 11.06 8.49 - 11.06 5.40 - 8.49 3.34 - 5.40 1.80 - 3.34 0.51 - 1.80	MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS
	DISPLAY Wind Speed	UNIT m/s	COMMENTS
	AVG. WIND SPEED 3.74 m/s	CALM WINDS 5.14%	
	ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 Jul 1 - Jul 31 Midnight - 11 PM	

WIND ROSE PLOT

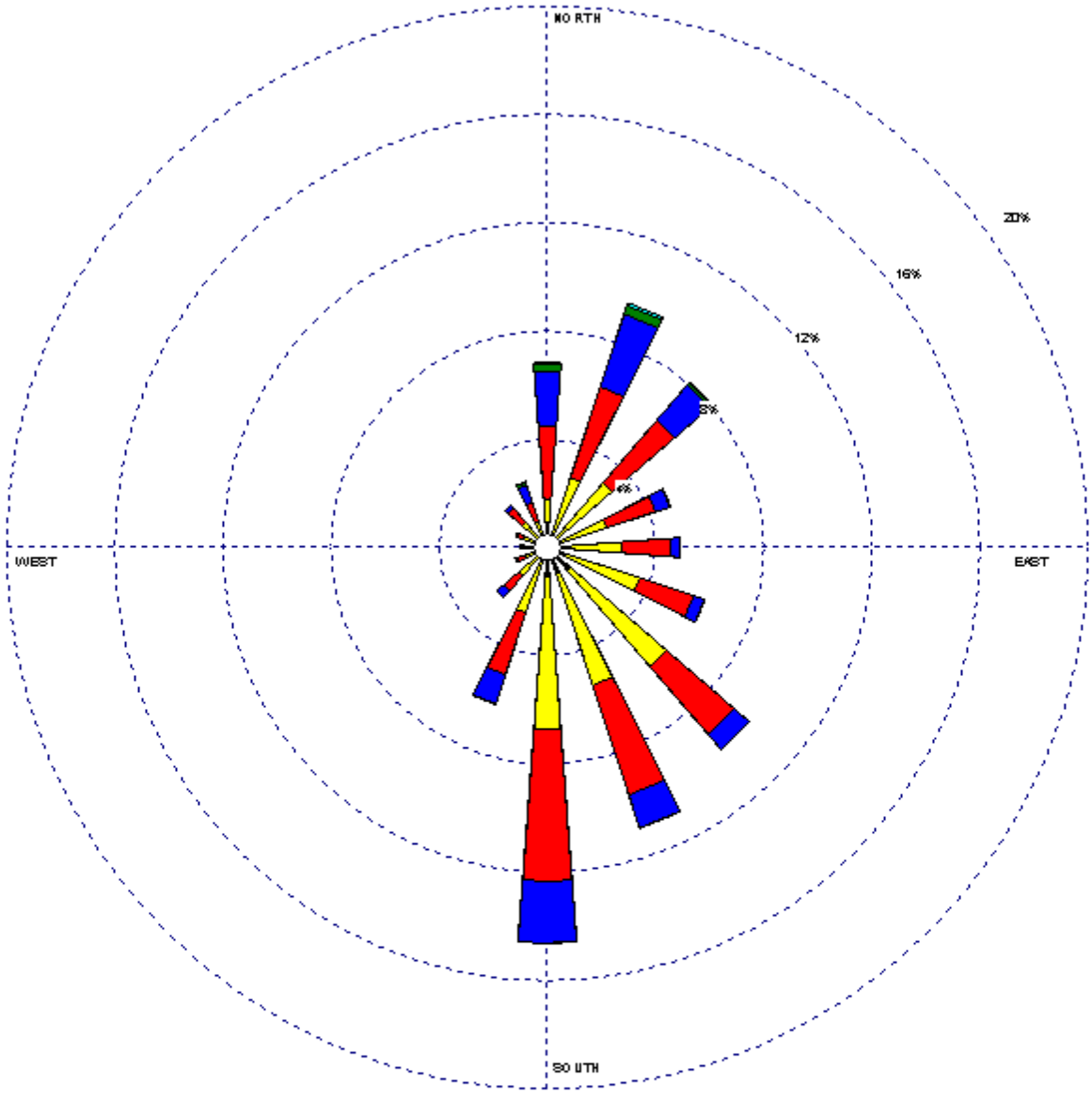
Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



Wind Speed (m/s) > 11.06 8.49 - 11.06 5.40 - 8.49 3.34 - 5.40 1.80 - 3.34 0.51 - 1.80	MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS
	DISPLAY Wind Speed	UNIT m/s	COMMENTS
	AVG. WIND SPEED 3.58 m/s	CALM WINDS 6.33%	
	ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 Aug 1 - Aug 31 Midnight - 11 PM	

WIND ROSE PLOT

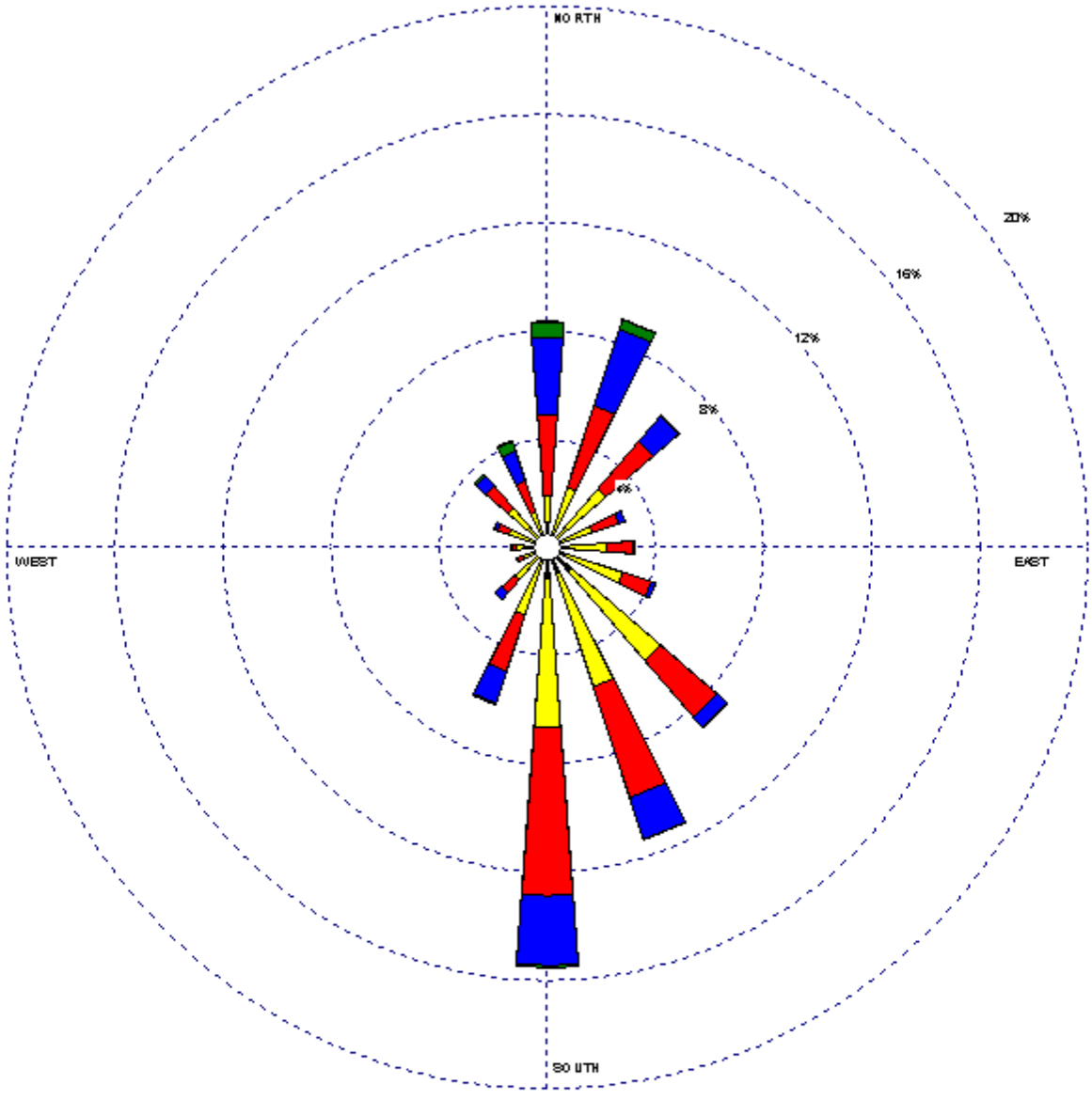
Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



Wind Speed (m/s) > 11.06 8.49 - 11.06 5.40 - 8.49 3.34 - 5.40 1.80 - 3.34 0.51 - 1.80	MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS
	DISPLAY Wind Speed	UNIT m/s	COMMENTS
	AVG. WIND SPEED 3.83 m/s	CALM WINDS 7.55%	
	ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 Sep 1 - Sep 30 Midnight - 11 PM	

WIND ROSE PLOT

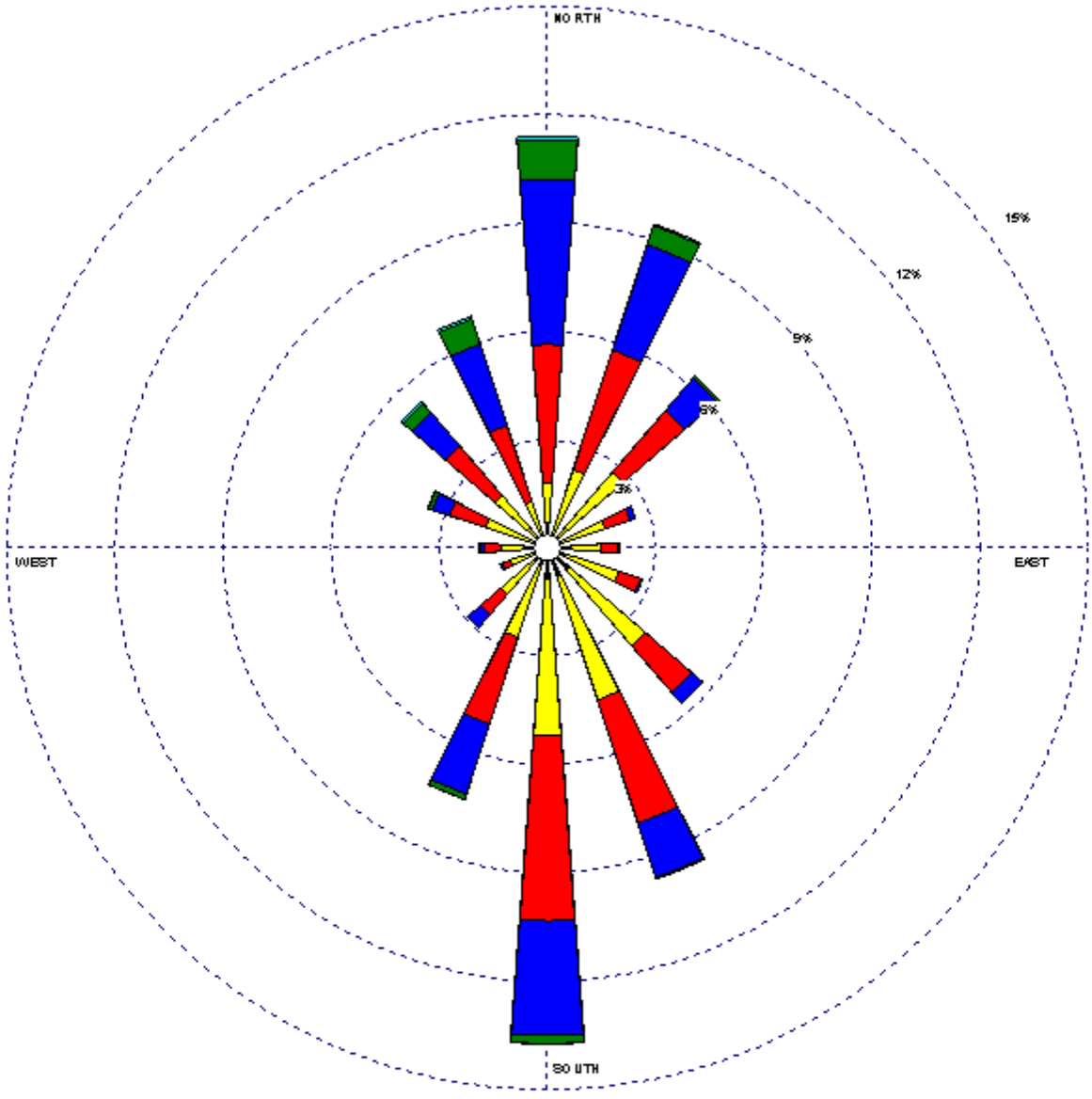
Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



Wind Speed (m/s) > 11.06 8.49 - 11.06 5.40 - 8.49 3.34 - 5.40 1.80 - 3.34 0.51 - 1.80	MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS
	DISPLAY Wind Speed	UNIT m/s	COMMENTS
	AVG. WIND SPEED 3.87 m/s	CALM WINDS 8.97%	
	ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 Oct 1 - Oct 31 Midnight - 11 PM	

WIND ROSE PLOT

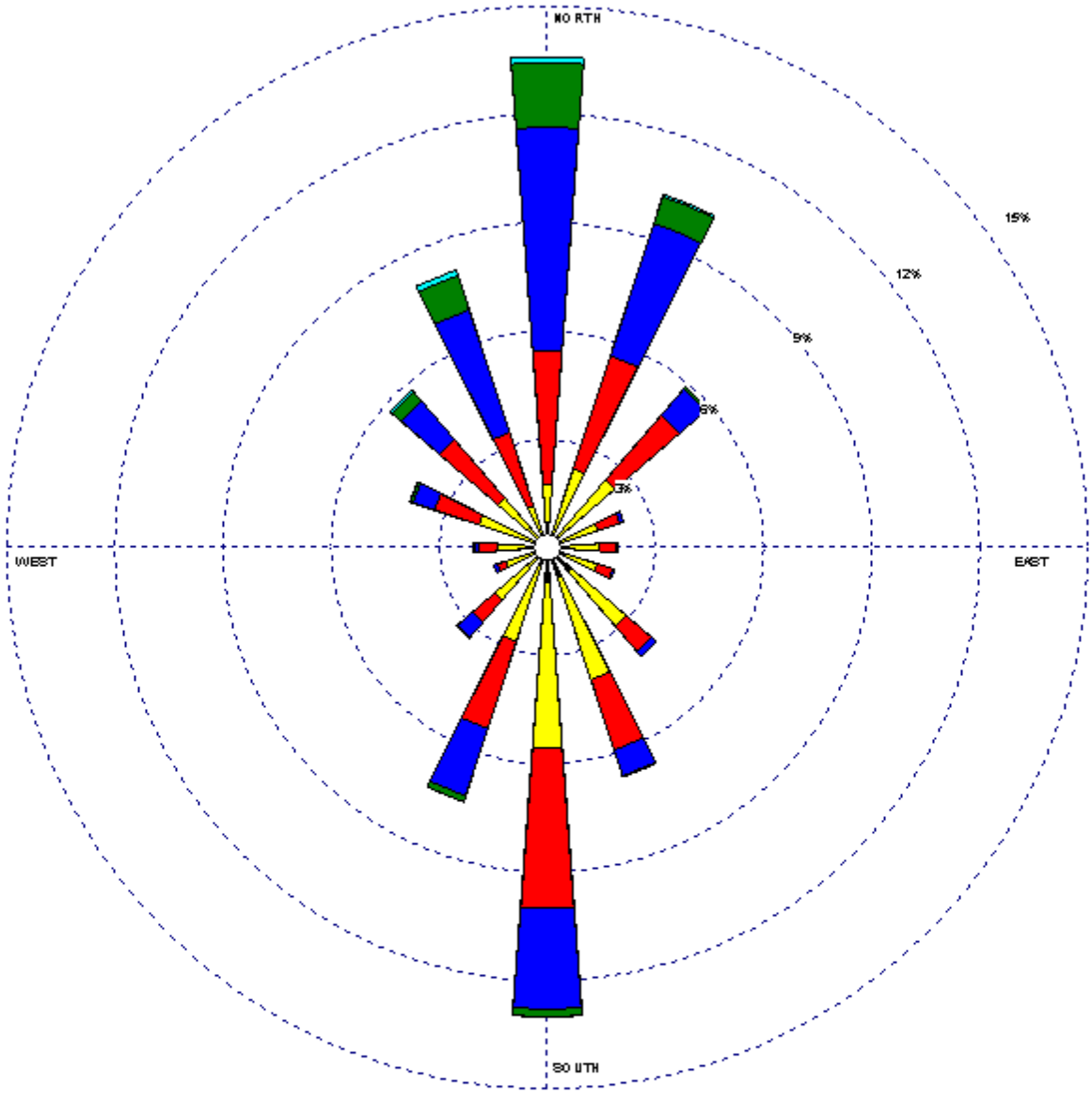
Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



Wind Speed (m/s) > 11.06 8.49 - 11.06 5.40 - 8.49 3.34 - 5.40 1.80 - 3.34 0.51 - 1.80	MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS
	DISPLAY Wind Speed	UNIT m/s	COMMENTS
	AVG. WIND SPEED 4.28 m/s	CALM WINDS 7.24%	
	ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 Nov 1 - Nov 30 Midnight - 11 PM	

WIND ROSE PLOT

Station #13958 - AUSTIN/MUNICIPAL ARPT, TX



Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER	DATE	COMPANY NAME
Sara West	8/29/2002	USDA-ARS
DISPLAY: Wind Speed	UNIT: m/s	COMMENTS
AVG. WIND SPEED: 4.47 m/s	CALM WINDS: 8.07%	
ORIENTATION: Direction (blowing from)	PLOT YEAR-DATE-TIME: 1961 Dec 1 - Dec 31 Midnight - 11 PM	

APPENDIX L

SEWAGE SOLIDS MANAGEMENT PLAN

First Phase

Design Flow	Vol Dig	Percentage	Flow	P_x	$P_{x\ (ss)}$	Q_{Sldg}	HRT_{Sldg}
gpd	*ft^3 (gal)*		*gpd*	*lbs VSS/day*	*lbs SS/day*	*gpd*	*days*
150,000	8,000	25%	37,500	33	41	614	97
		50%	75,000	66	82	1,229	49
	59,840	75%	112,500	98	123	1,843	32
		100%	150,000	131	164	2,458	24

Interim Phase

Design Flow	Vol Dig	Percentage	Flow	P_x	$P_{x\ (ss)}$	Q_{Sldg}	HRT_{Sldg}
gpd	*ft^3 (gal)*		*gpd*	*lbs VSS/day*	*lbs SS/day*	*gpd*	*days*
300,000	16,000	25%	75,000	66	82	1,229	49
		50%	150,000	131	164	2,458	24
	119,680	75%	225,000	197	246	3,687	16
		100%	300,000	262	328	4,916	12

Final Phase

Design Flow	Vol Dig	Percentage	Flow	P_x	$P_{x\ (ss)}$	Q_{Sldg}	HRT_{Sldg}
gpd	*ft^3 (gal)*		*gpd*	*lbs VSS/day*	*lbs SS/day*	*gpd*	*days*
450,000	24,000	25%	112,500	98	123	1,843	32
		50%	225,000	197	246	3,687	16
	179,520	75%	337,500	295	369	5,530	11
		100%	450,000	394	492	7,373	8

Sludge will be wasted from the clarifier underflow to the digester. Sludge will stay in the digester with the decant returned to the headworks of the plant. Sludge will be removed from the digester on a schedule approximate to the HRT of the digester. The liquid sludge will be hauled by truck to the City of Austin's Walnut Creek Wastewater Treatment Plant for further treatment.

APPENDIX M

REGIONALIZATION ANALYSIS

Appendix M – Regionalization (10054 Pages 21-22 of 80, pages 64-65 of 10053 Instructions)

In accordance with TCEQ policy, applicant requested service availability from the City of Georgetown, which has a system located within 3 miles, via email and subsequently through certified mail. The City has responded to the email saying it would not serve.

Furthermore, the analysis under B. 3. Of the instructions was completed showing a cost analysis of service from the City of Georgetown and providing a new facility, including a map and cost estimates. Even if the City of Georgetown were willing to serve, which they have indicated they are not, the cost difference indicates that service by a new facility is more economical.

CR 149

CR 140

PROPOSED WWTP LOCATION

REGIONAL LS LOCATION

6,500 LF 12" FORCE MAIN

POTENTIAL CONNECTION
TO CITY OF GEORGETOWN SYSTEM

CR 194

FM 971

N

400 200 0 400 800

SCALE IN FEET

CITY OF GEORGETOWN
EXISTING WWTP ROUTE
LOCATION MAP

WILLIAMSON COUNTY M.U.D. 44

THE VANTAGE AUSTIN LLC

LJA Engineering, Inc.
1100 NE Loop 410
Suite 800
San Antonio, Texas 78209
Phone 210.503.2700
Fax 210.503.2749
FRN - F-1386

1 OF 1

000116

I:\A491\TPDES Submittal\Submittal\Offsite Utilities.dwg

LJA Engineering, Inc.

395 Acre Weir Property (On-Site WWTP)

Project:	395 Ac Weir Property	Date:	3/15/2021
Client:	The Vantage Austin LLC	By:	D. Ryan

				On-Site Wastewater System	
	WASTEWATER IMPROVEMENTS	Unit	Cost/Unit		Cost
WW-1	Influent Lift Station	EA.	$400,000.00	1	$400,000.00
WW-2	450,000 gal/day WWTP	EA.	$6,500,000.00	1	$6,500,000.00
WW-3	WWTP Access Drive	EA.	$100,000.00	1	$100,000.00
				SUBTOTAL	**$7,000,000.00**

SUBTOTAL		**$7,000,000.00**
10% Contingency		**$700,000.00**
12% Engineering and Surveying		**$840,000.00**
Grand Total		**$8,540,000.00**

Engineering, Inc.

395 Acre Weir Property (City of Georgetown Service)

Project: 395 Ac Weir Property
Client: The Vantage Austin LLC

Date: 3/15/2021
By: D. Ryan

				Connection to City of Georgetown WWTP	
	WASTEWATER IMPROVEMENTS	Unit	Cost/Unit	Quantity	Cost
WW-1	Regional Lift Station	EA.	$1,500,000.00	1	$1,500,000.00
WW-2	12" Force Main	LF	$250.00	6,500	$1,625,000.00
WW-3	Easement Acquisition	LF	$75.00	6,500	$487,500.00
WW-4	Bore & Encased Crossing of CR 140	LF	$750.00	200	$150,000.00
WW-5	Bore & Encased Crossing FM 971	LF	$750.00	200	$150,000.00
WW-6	Connect to Existing WWTP Influent Line	LS	$75,000.00	1	$75,000.00
				SUBTOTAL	**$3,987,500.00**

SUBTOTAL		**$3,987,500.00**
10% Contingency		**$398,750.00**
12% Engineering and Surveying		**$478,500.00**
Impact Fees ($3,115 per Meter)		**$5,700,450.00**
Grand Total		**$10,565,200.00**

Cost of Service Difference (On-site vs City of Georgetown)	**($2,025,200.00)**

THE AL LAW GROUP

David J. Tuckfield
12400 W. Highway 71, Suite 350-150
Austin, Texas 78738

Partner
(512) 576-2481
Fax: (512) 366-9949

March 21, 2022

Via certified mail 7016 0600 0000 2947 0512

Wesley Wright, PE
Systems Engineering Director
City of Georgetown Municipal Complex
300-1 Industrial Ave.
Georgetown, TX 78627

Re: *Application by The Vantage Austin, LLC, for a new Texas Pollutant Discharge Elimination System Permit for property within Williamson County MUD No.44*

Dear Mr. Wright:

The purpose of this letter is simply to confirm via certified mail that That the City of Georgetown does not have any interest in providing wastewater service to the 395-acre tract shown on the attached map. I am aware that you already stated that the City has no interest in doing so (see attached email dated December 8, 2021), but I am just following-up with this confirmation.

If my understanding is incorrect, please let me know at your earliest convenience.

Sincerely,

David Tuckfield
Partner
The AL Law Group, PLLC
12400 West Highway 71
Suite 350-150
Austin, TX 78738
(512) 576-2481
dtuckfield@allawgp.com

From: Wesley Wright <Wesley.Wright@georgetown.org>
Sent: Wednesday, December 8, 2021 5:22 PM
To: Daniel Ryan
Cc: David Munk; Lua Saluone
Subject: RE: [EXTERNAL] Wastewater Service - Property off
Attachments: 395AC_WeirTract.pdf

[EXTERNAL EMAIL]

Wastewater service is a benefit provided by Georgetown [almost] exclusively to in-city, Georgetown residents.

I'm sorry, but the City of Georgetown has no interest in providing wastewater service to properties in Weir's ETJ or city limits.

Wesley Wright, PE
Systems Engineering Director
City of Georgetown Municipal Complex
300-1 Industrial Ave.
Georgetown, TX 78627
Phone: 512-931-7672
Email: wesley.wright@georgetown.org

Trust : Professionalism : Teamwork : Communication : Work/Life Balance

The Systems Engineering Department's mission is to facilitate system maintenance and growth for our stakeholders through ownership and exceptional engineering services.

From: Daniel Ryan <dryan@lja.com>
Sent: Wednesday, December 8, 2021 4:43 PM
To: Wesley Wright <Wesley.Wright@georgetown.org>
Subject: [EXTERNAL] Wastewater Service - Property off

[EXTERNAL EMAIL]

Hi Wesley – I apologize for emailing you and if there is someone else in your group you would prefer I initiate contact with, please let me know.

I have a property located just outside Georgetown's ETJ to the east by Weir and am trying to figure out if there is any possibility of obtaining either wholesale or retail service from Georgetown. The water provider is Jonah SUD as the property is in their water CCN but it is not in anyone's wastewater CCN.

Thanks for your help, and please let me know if you would have any time to discuss.

Daniel Ryan, P.E.
LJA Engineering, Inc.
TBPE Firm No. F-1386
7500 Rialto Boulevard
Building II, Suite 100
Austin, TX 78735
Ph: 512-439-4702

DISCOVERY TRACT WIL23

395 AC COUNTY ROAD 140

APPROX. 395 AC.

CITY OF WEIR ETJ (APPROX. 104.6 AC.)
UNINCORPORATED WILLIAMSON COUNTY (APPROX. 290.4 AC.)

MUNICIPALITY EXHIBIT

DECEMBER 2021

LEGEND

- DISCOVERY TRACT
- CITY OF GEORGETOWN
- CITY OF WEIR
- CITY OF GEORGETOWN ETJ
- CITY OF WEIR ETJ

DATA SOURCE: CITY OF GEORGETOWN LIMITS AND ETJ - CITY OF GEORGETOWN, CITY OF WEIR LIMITS AND ETJ - CITY OF WEIR

N
W E
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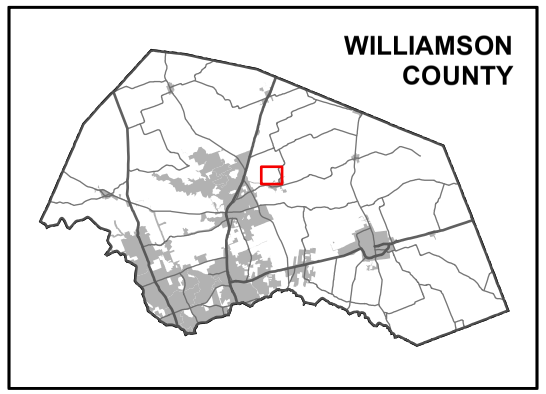
0 500 1,000 2,000 FEET



AERIAL PHOTOGRAPH DATE: NAIP 2020

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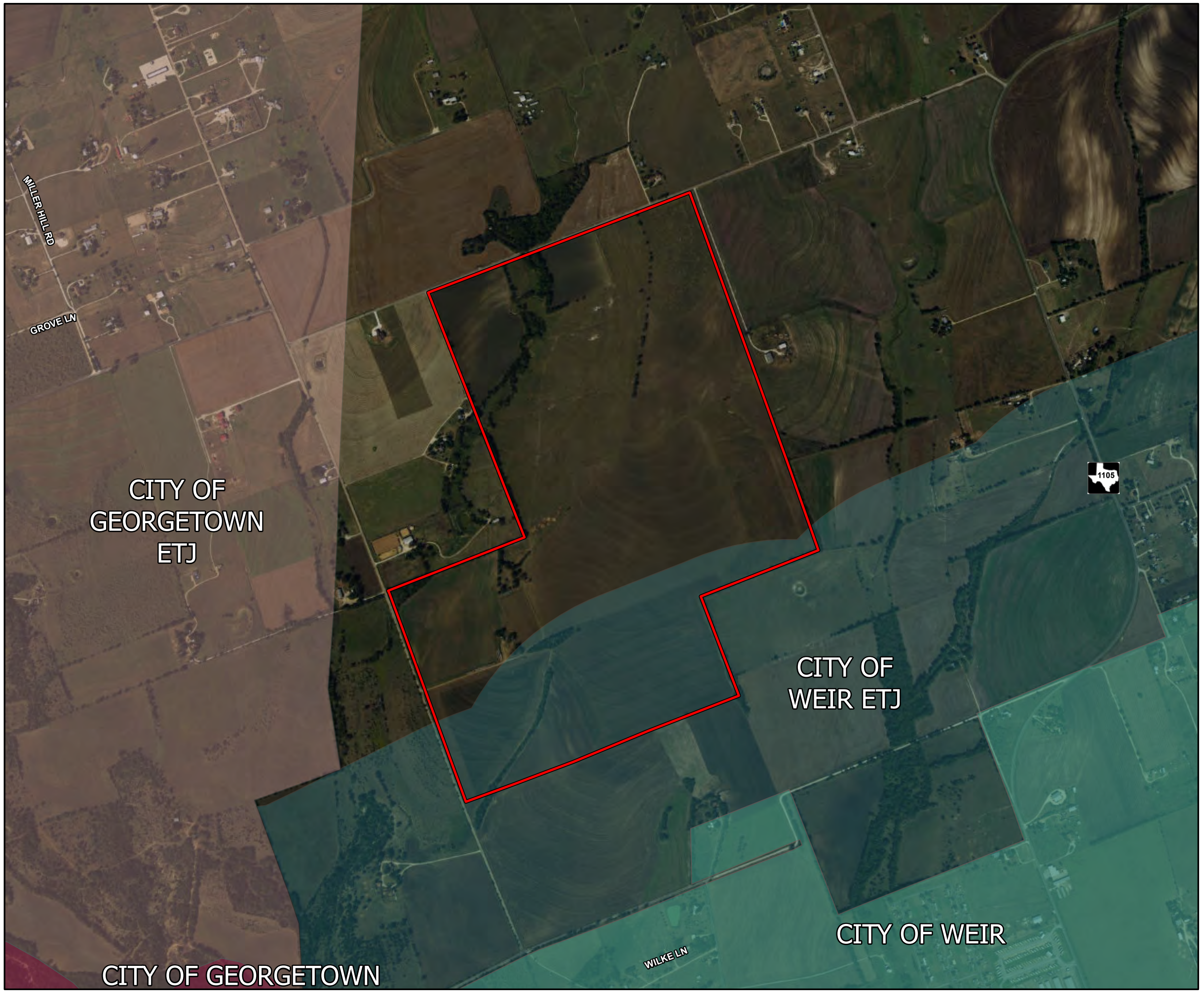
LJA ENGINEERING
7500 Rialto Boulevard, Building 2, Suite 100
Austin, Texas 78735
Phone 512.439.4732 TBPE F-1386
LJA.com TBPLS 10194382

Path: K:\GIS\Discovery\Projects\WIL22\WIL22.aprx



7016 0600 0000 2947 0512

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Georgetown, TX 78626

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☐ Return Receipt (electronic) $	$0.00	
☐ Certified Mail Restricted Delivery $	$0.00	Postmark Here
☐ Adult Signature Required $	$0.00	
☐ Adult Signature Restricted Delivery $		
Postage $	$0.58	
Total Postage and Fees $	$7.38	03/21/2022

LAKE TRAVIS BRANCH 78734-8666
MAR 21 2022
USPS

Sent To Wesley Wright, City of Georgetown

Street and Apt. No., or PO Box No. 300-1 Industrial Ave.

City, State, ZIP+4® Georgetown, TX 78627

PS Form 3800, April 2015 PSN 7530-02-000-9047 **See Reverse for Instructions**