### **TPDES Permit New Application Submittal**

#### Submitted to:

Texas Commission on Environmental Quality
Application Review & Processing Team (MC-148)
P.O. Box 13087
Austin, Texas 78711-3087

For:

Gilden Blackburn & Tim Carter Parker County, TX 76087

Owner:

Gilden Blackburn & Tim Carter 8131 Old Brock Road Brock, TX 76087

Issue Date: March 8, 2022

Prepared Either By or Under the Direction of Jeffrey D. Hunter, P.E



### consulting environmental engineers, inc.

Main Office:

150 N. Harbin Drive – Suite 408 Stephenville, TX 76401 Phone: (254) 968-8130

Fax: (254) 968-8134 Registered Firm: F-2323 Branch Office: 11504 PR 7440 Wolfforth, TX 79382 Phone: (817) 504-8390 www.ceeinc.org

email: ceeinc@ceeinc.org



#### Registered Firm: F-2323

### consulting environmental engineers, inc.

Main Office:

150 N. Harbin Drive – Suite 408 Stephenville, TX 76401 Phone: (254) 968-8130 Fax: (254) 968-8134

Wolfforth, TX 79382
Phone: (817) 504-8390
www.ceeinc.org

**Branch Office:** 

11504 PR 7440

email: ceeinc@ceeinc.org

### **PROJECT SUMMARY**

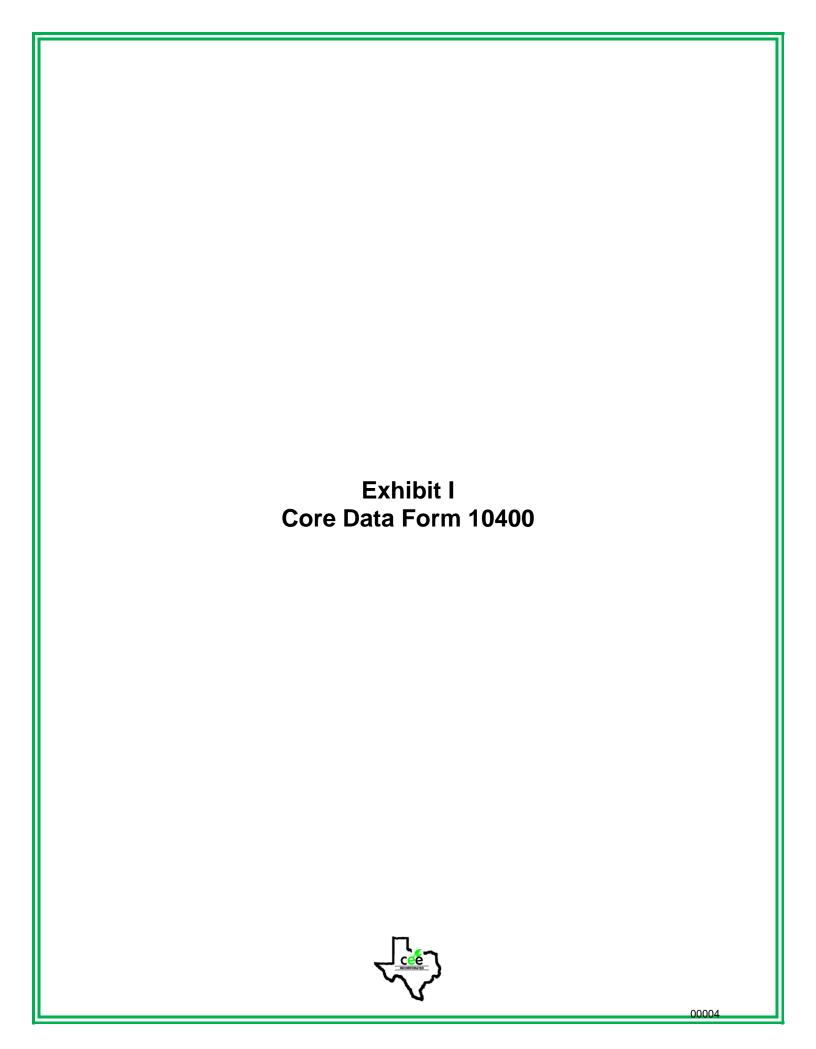
Gilden Blackburn and Tim Carter are submitting this application for a new TPDES permit to service the proposed Brock Spur development that will consist of 3 fast food restaurants, 2 dine in restaurants, a grocery store, and up to 80 duplexes. Based on 30 TAC 217.32 (a)(3) this development will require 75,000 GPD. The property the WWTP is located on is bound by Interstate 20 on the north, a residence and pasture land on the east, Brock Spur Road on the west, and a residence and Brock Spur Road on the south.

The proposed system is not located within the boundaries of any sewer CCN's. One wastewater treatment facility was found to be within the three-mile radius. A request for service was sent out on September 22, 2021 to Oak Creek RV Park and they declined service.

# Brock Spur WWTP Exhibit Cross Reference

Exhibit I.D.	<u>Description</u>	Reference
l.	Core Data Form 10400	Section 3 (C) page 4 of 22
II.	Topographic Map	Item 13, page 11 of 22
III.	Affected Landowners Map	Item 1 (a), page 13 of 22
IV.	Affected Landowners Cross Reference	Item 1 (b), page 13 of 22
V.	Affected Landowners Disk	Item 1 (c), page 13 of 22
VI.	Photographs	Item 2, page 14 of 22
VII.	Photograph Location Map	Item 2, page 14 of 22
VIII.	Buffer Zone Map	Item 3 (a), page 14 of 22
IX.	SPIF Topographic Map	Item 5, page 16 of 22
X.	Flow Diagram	Item 2 (c), page 2 of 80
XI.	Site Drawing	Item 3, page 3 of 80
XII.	Close Proximity WWTP Data	Item 3, page 22 of 80
XIII.	Design Calculations	Item 4, page 24 of 80
XIV.	Flood Plain Map	Item 5 (a), page 25 of 80
XV.	Wind Rose	Item 5 (b), page 25 of 80
XVI.	Sewage Sludge Solids Management	Item 7, page 26 of 80
XVII.	Copy of Check	
XVIII.	Water Easement	
XIX.	Domestic Administrative Report Form 1005	3
XX.	Domestic Technical Report Form 10054	







TCEQ Use Only

## **TCEQ Core Data Form**

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

<b>SECTIO</b>	N I: General Inform	<u>nation</u>								
	for Submission (If other is a									
⊠ New F	Permit, Registration or Author	ization (Core Da	nta Form s	hould be su	bmitte	ed with	the program a	application	on.)	
	val (Core Data Form should L		h the rene	wal form)		Otl	ner			
2. Custom	er Reference Number (if iss		Follow this	link to search		Regu	lated Entity R	Referenc	e Number	(if issued)
CN 605845346 for CN or RN numbers in Central Registry**				RN				•		
<b>SECTION</b>	N II: Customer Info	ormation								
4. General	Customer Information	5. Effective D	ate for Co	ustomer Inf	orma	tion U	pdates (mm/d	ld/yyyy)	11/2	9/2021
☐ New Cu		⊠ Up	date to Cu	ustomer Info	rmati	on	☐ Ch	nange in	Regulated	Entity Ownership
☐ Change i	n Legal Name (Verifiable wit	h the Texas Sec	retary of S	State or Tex	as Co	mptrol	ler of Public Ad	ccounts)		
The Custo	omer Name submitted	here may be	update	d automa	tical	ly ba	sed on wha	t is cu	rrent and	d active with the
	cretary of State (SOS)				c Ac	cour	its (CPA).			
6. Custome	r Legal Name (If an individual	, print last name fi	rst: eg: Doe	e, John)		<u>If ne</u>	w Customer, en	nter previ	ous Custon	ner below:
Blackbur	n, Gilden Blair									
7. TX SOS/0	PA Filing Number	8. TX State Ta	<b>X ID</b> (11 dig	jits)		9. Fe	ederal Tax ID	(9 digits)	10. DUN	IS Number (if applicable)
						10000				(ii applicable)
11. Type of	11. Type of Customer: Corporation Individual Partnership: General Limited									
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15. Mailing	8131 Old Brock Roa	aa								
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	City Brock		State	TX	ZIF	7	6087		ZIP + 4	
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40 Talanka	- N - I				ckbı	urngl	@aol.com			
18. Telephon		19	. Extension	on or Code			20. Fax N	Number	(if applicat	ole)
(817)56	5-5255						( )	) -		
<b>ECTION</b>	III: Regulated Ent	ity Inform:	ation							
21. General R	egulated Entity Information			y" is selecte	d belo	w this	form should be	e accom	panied by	a permit application)
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22. Regulated	Entity Name (Enter name of	the site where the	regulated	action is takir	ng plac	e.)				
Brock Spur					3	,				

	T									
23. Street Address of		7	-							
the Regulated Entity: (No PO Boxes)		<b></b>								
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24. County	Parker						4			
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26. Nearest City	777					State		N	earest Z	IP Code
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27. Latitude (N) In Decin	nal:	32.69922	8	28.	Longitude	(W) In Deci	mal:	-97.954	147	
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				8131 (	Old Brock R	oad				
34. Mailing Address:										
Address.	City	Brock	State	TX	ZIP	760	)87	ZIP + 4	ı	
35. E-Mail Address:			341 - 79	blac	kburngb@a	ol.com				
36. Telepho	ne Number	r	37. Extensi	on or Cod	9	38. I	ax Nur	nber <i>(if ap)</i>	olicable	
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9. TCEQ Programs and ID orm. See the Core Data Form in	Numbers (	Check all Program	ms and write in the peance.	ermits/regist	ation number	s that will be	affected l	by the update	es submit	ted on this
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1										
Municipal Solid Waste	☐ New So	ource Review Air	OSSF		☐ Petrol	eum Storage	Tank	☐ PWS		
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☐ Voluntary Cleanup		Water	☐ Wastewater /	Agriculture	☐ Water	Rights		Other:		
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SECTION IV: Pre	parer In	iformation	<u>1</u>							
40. Charles P. Gi	llespie	-		41. Title	: Pres	ident				
42. Telephone Number 4	3. Ext./Cod	le 44. Fa	ax Number	45. E-I	Mail Address	8				
(254) 968-8130		(254	1)968-8134	ceein	c@ceeing	c.org				
ECTION V: Autl	horized	Signature								
6. By my signature below,				e informatio		n this form	is true a	nd complete	e, and th	at 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:	Consulting Environmental Engineers, Inc. Job Title: Presider				7
Name (In Print):	Charles P. Gillespie			Phone:	( 254 ) 968- 8130
Signature:	Chalr P. Allam	7 9		Date:	3-7-22

TCEQ Use Only



### **TCEQ Core Data Form**

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

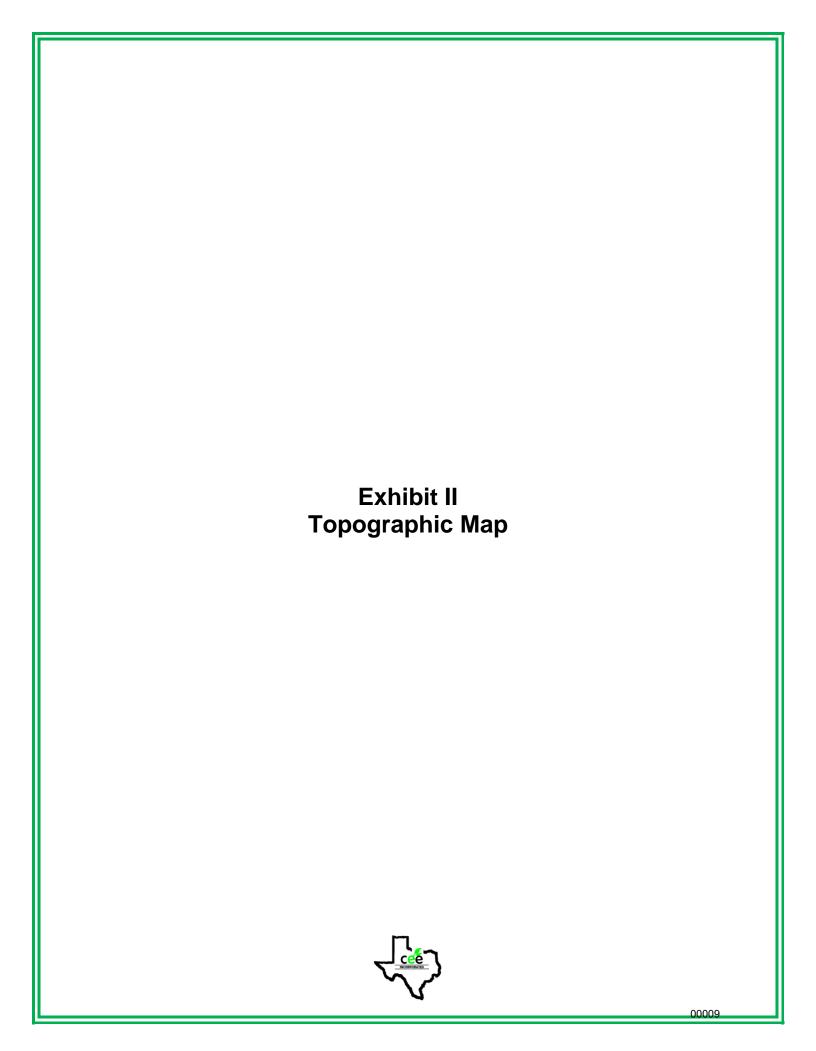
SECTION I: General Information

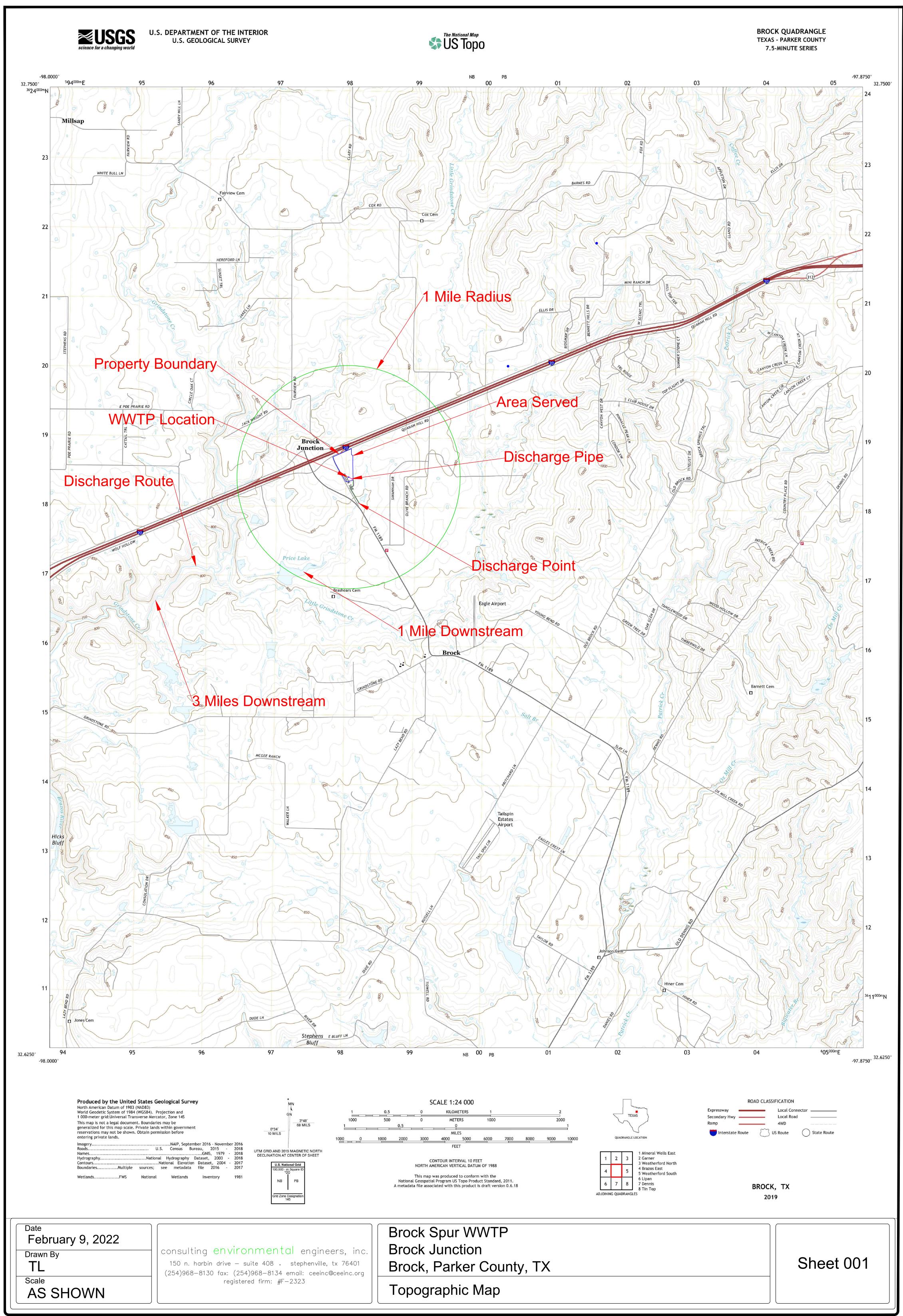
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Occupatio	nal Licens	ee Respon	nsible Party	□ V	oluntary C	leanup	Applic	cant	Other:		
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15. Mailing Address:											
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18. Telephor	e Numbe	r	19	9. Extensi	on or Coo	de			20. Fax Number	(if applicab	le)
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New Regulation     New	ılated Enti	ty 🔲 Update t	o Regulated Ent	ity Name	Upo	date to	Regula	ated E	Entity Information		
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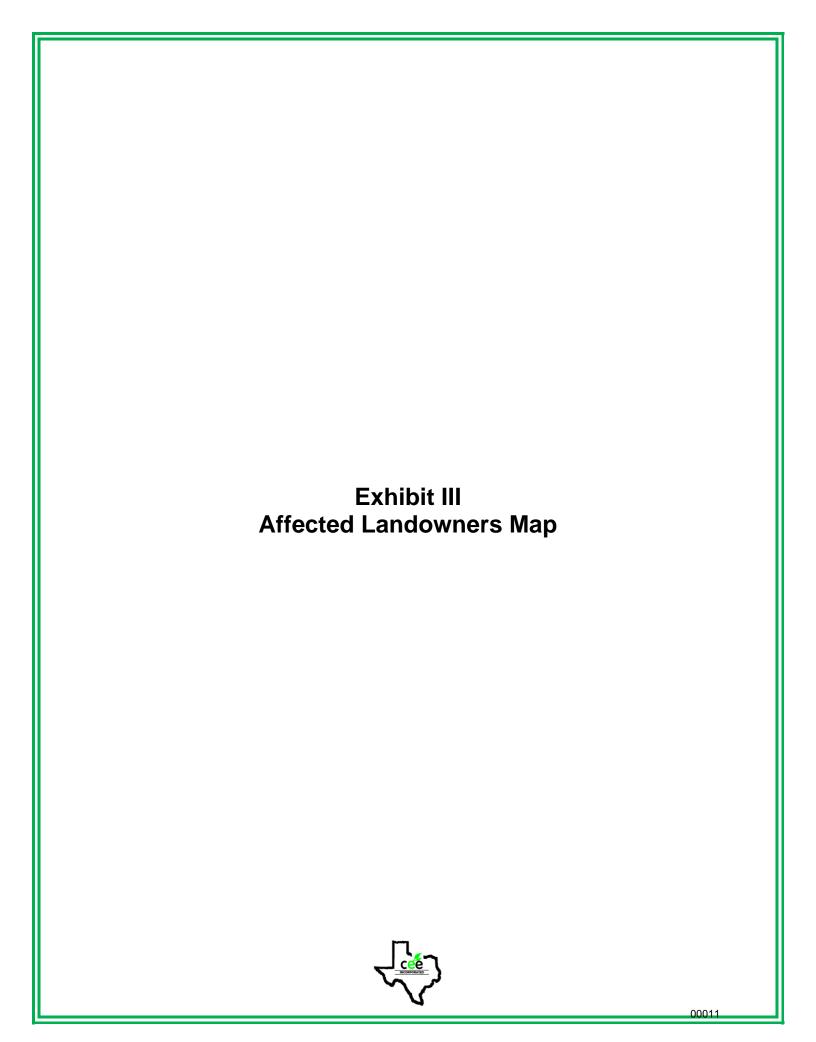
23. Street Address of the Regulated Entity:				2°							
(No PO Boxes)	City		State		ZIP		ZIP + 4				
24. County	Parker										
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25. Description to			65 ft to the sou				anah Hill R	d. and Brock			
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26. Nearest City	•		•			State	Nea	rest ZIP Code			
Brock						TX	760	087			
27. Latitude (N) In Decin	nal:	32.69922	8	28. L	ongitude (\	V) In Decimal:	-97.9541	47			
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29. Primary SIC Code (4	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				221320							
33. What is the Primary			(Do not repeat the SIC		cription.)						
Provide wastewater	utilities	to the Broo	k Spur develor								
24 Mailing				8131 OI	d Brock Ro	ad					
34. Mailing Address:											
Address.	City	Brock	State	TX	ZIP	76087	ZIP + 4				
35. E-Mail Address				black	burngb@ad	ol.com					
36. Telepho	one Numbe	r	37. Extension	on or Code		38. Fax Nu	mber (if appli	icable)			
(817)	65-5255					(	) -				
9. TCEQ Programs and ID orm. See the Core Data Form i				ermits/registra	tion numbers	that will be affected	by the updates	submitted on this			
☐ Dam Safety	☐ Distric	ets	☐ Edwards Aqu	iifer	☐ Emissions Inventory Air		☐ Industrial Hazardous Waste				
☐ Municipal Solid Waste	☐ New S	Source Review A	ir OSSF		☐ Petrole	um Storage Tank	PWS				
Sludge	Storm	Water	☐ Title V Air		Tires		Used Oil				
☐ Voluntary Cleanup	Waste Water		Agriculture	griculture Water Rights		Other:					
SECTION IV: Pre	parer I	<u>nformatio</u>	<u>n</u>								
40. Name: Charles P. G.	illespie			41. Title:	Presi	dent					
42. Telephone Number	43. Ext./Co	de 44. F	ax Number	45. E-M	ail Address						
(254) 968-8130		(25	4)968-8134	ceeinc	@ceeinc	.org					
SECTION V: Aut	horized	Signature	2								
<b>6.</b> 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			

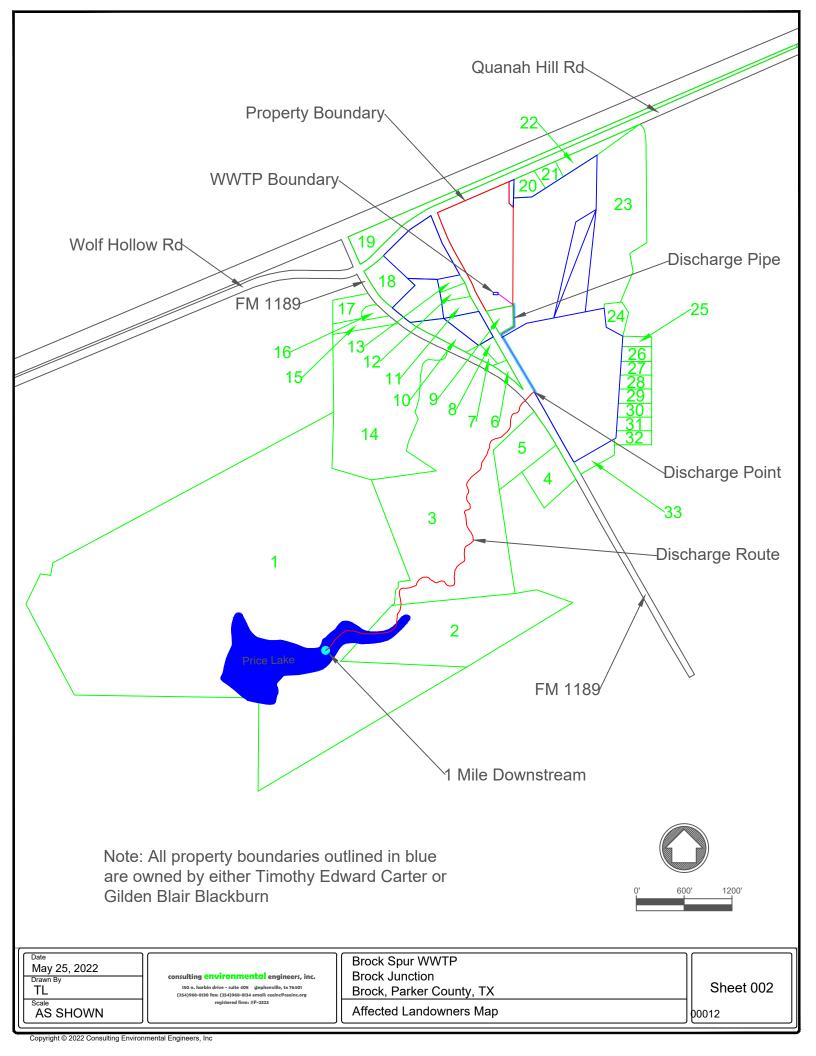
signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

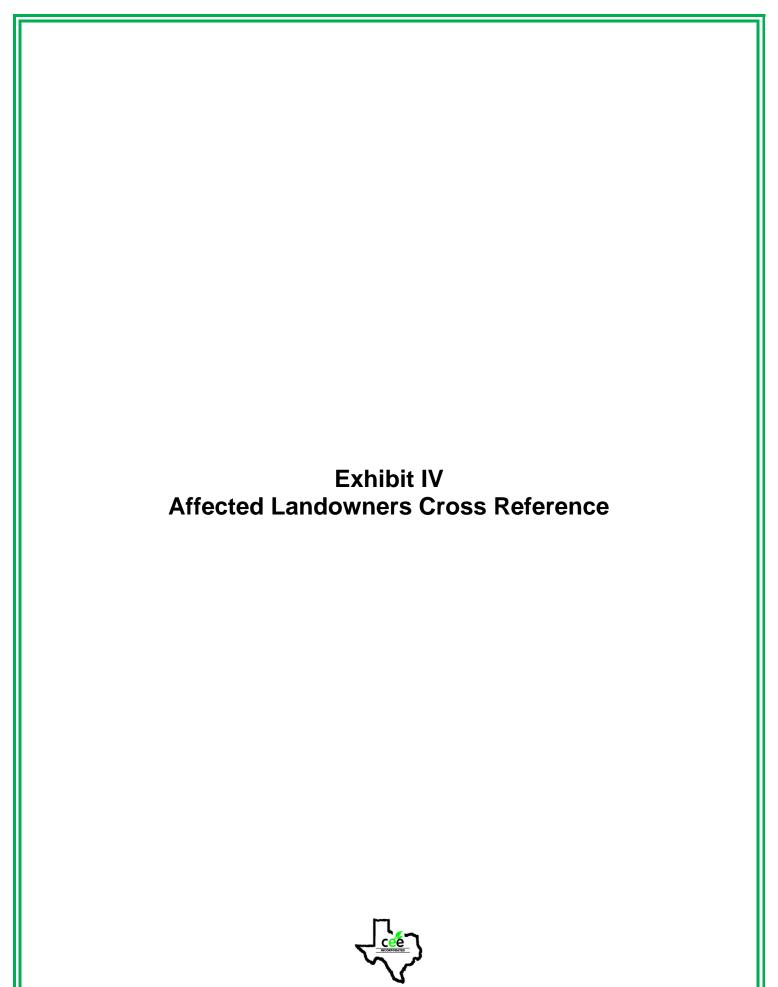
Company:	Consulting Environmental Engineers, Inc.	Job Title:	Presiden	President				
Name (In Print):	Charles P. Gillespie			Phone:	( 254 ) 968- <b>8130</b>			
Signature:	The P. Allmin			Date:	5/27/22			











#### Brock Spur Wastewater Permit Application Affected Landowners Cross Reference Exhibit IV

- 1. Bartlett Ranch West, LLC. 2050 Meriwether Rd. Pike Road, AL 36064
- 2. Carole J & GLB Brashear, LLC. 12801 N Central Expressway. Dallas, TX 75243
- 3. FM 1189, LLC. 3655 Lazy Bend Rd. Millsap, TX 76066
- 4. Jones Harvie Wilson Estate of Horn Margaret 120 Horn Lane Millsap, TX 76066
- 5. C.W. Wyler Sr. 3401 FM 1189 Brock, TX 76087
- 6. Parker County Special Utility District 500 Brock Spur Millsap, TX 76066
- 7. Lifecare EMS Station 4 444 Brock Spur Millsap, TX 76066
- 8. Lifecare EMS Station 4 444 Brock Spur Millsap, TX 76066
- 9. William C. & Denise N. Burks 401 Brock Spur Millsap, TX 76066
- 10. To whom it may concern 411 FM 1189 Weatherford, TX 76066
- 11. Kim Lorna Hull 306 Brock Spur Millsap, TX 76066

#### 12. Jon M. Barnett 2912 Ranger Hwy Weatherford, TX 76088

#### 13. Diane A. Thornhill PO Box 992 Weatherford, TX 76086

#### 14. FM 1189, LLC 3655 Lazy Bend Rd Millsap, TX 76066

#### 15. Series A 1189 Storage, LLC PO Box 227 Dennis, TX 76439

#### 16. Ronald L. & Sandra L. Hognestad Co Trustees PO Box 2379 Weatherford, TX 76086

# 17. Series A EGHB Investments, LLC PO Box 227 Dennis, TX 76439

#### 18. Sonic Drive-In 301 FM 1189 Brock, TX 76087

#### 19. Texas Department of Transportation 125 E 11<sup>th</sup> St Austin, TX 78701

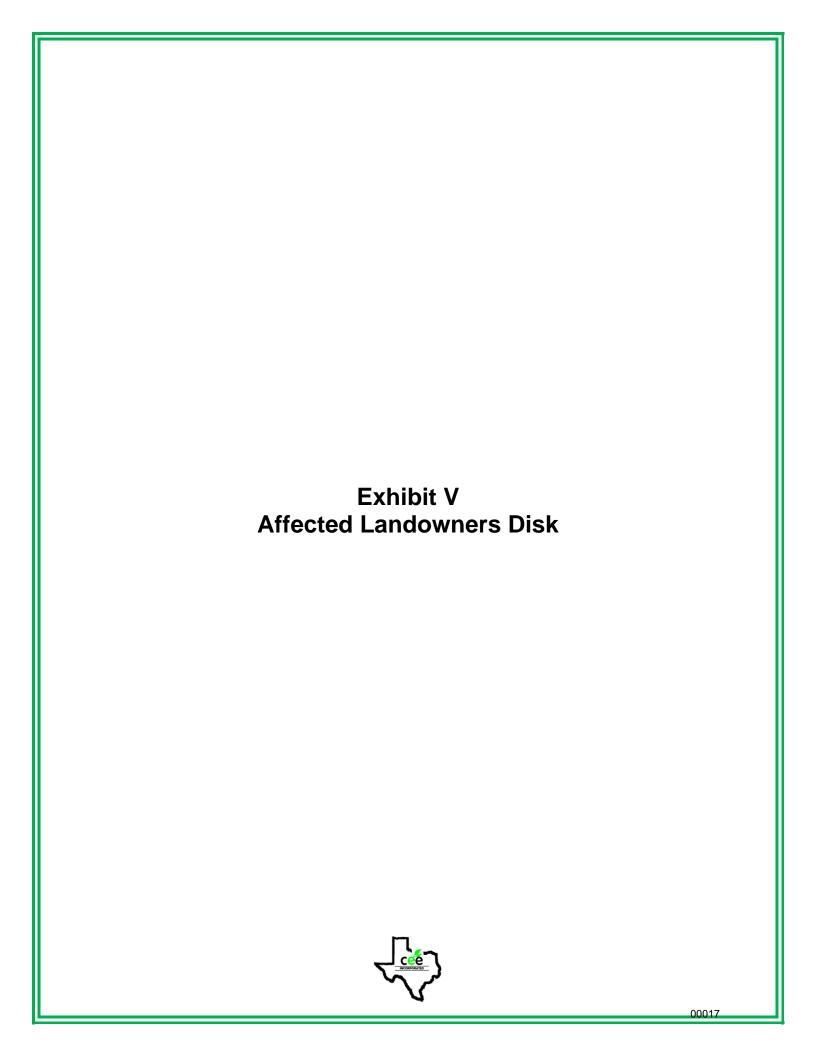
#### 20. Brazos Valley, LLC PO Box 79 Dublin, TX 76446

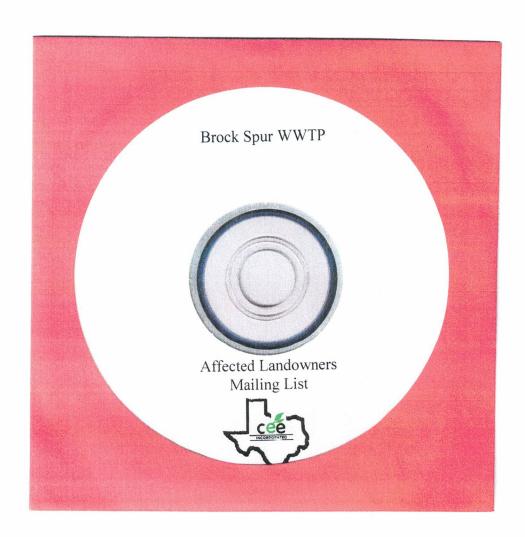
#### 21. Linda Kelley 7123 Quanah Hill Rd Weatherford, TX 76087

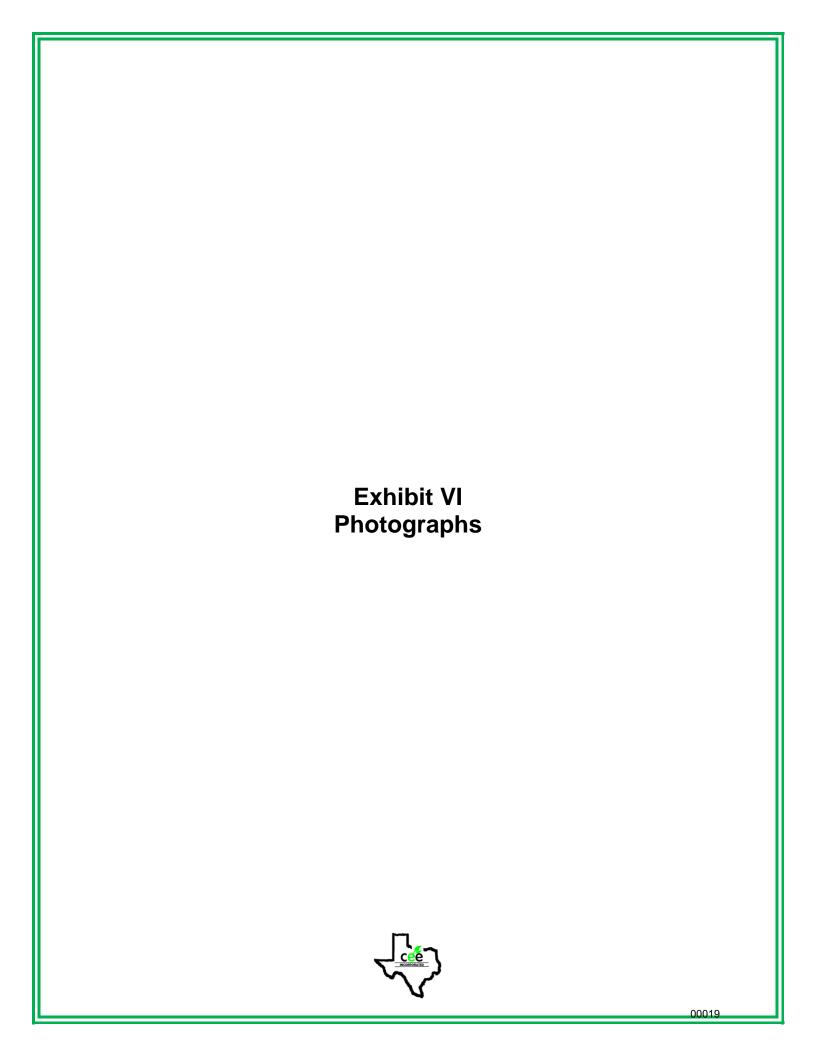
#### 22. Robert L. Cole 7025 Quanah Hill Rd Weatherford, TX 76087

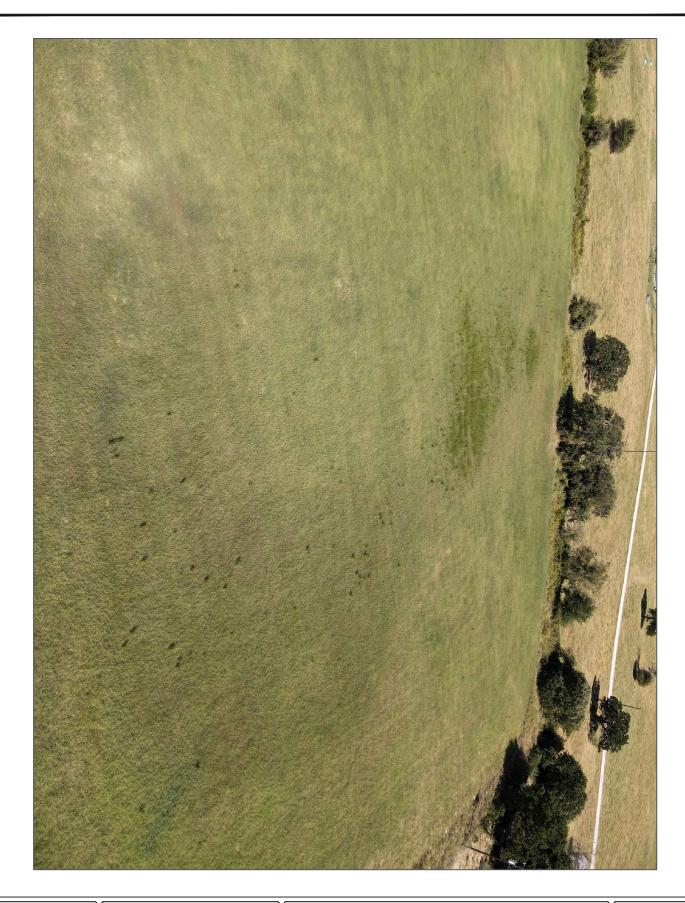
#### 23. XTO Energy, Inc. PO Box 64106 Spring, TX 77387

- 24. Tisha Louise McDonald 6827 Quanah Hill Rd Weatherford, TX 76087
- 25. Timothy & Barbara Easter 157 Savannah Dr Weatherford, TX 76087
- 26. Jeremy & Heather Renee Hamscher 153 Savannah Dr Brock, TX 76087
- 27. Percy R. & Kathryn Whitmire 149 Savannah Dr Brock, TX 76087
- 28. Joe B. Raymond 145 Savannah Dr Weatherford, TX 76087
- 29. Mary Elizabeth Lubke 141 Savannah Dr Weatherford, TX 76087
- 30. Timothy J. & Jennifer Duggin 137 Savannah Dr Weatherford, TX 76087
- 31. Cheryl Haralson Crudup 133 Savannah Dr Weatherford, TX 76087
- 32. Michael K. Wylie 129 Savannah Dr Weatherford, TX 76087
- 33. Justin Wade Perales 125 Savannah Dr Weatherford, TX 76087









Date February 9, 2022

Drawn By TL Scale NTS consulting environmental engineers, inc. 150 n. harbin drive – suite 408 s. stephenville, tx 76401 (254)988-81316 (ar. (254)988-8134 email: coeinc@ceinc.org registered firm: #F-2323 Brock Spur WWTP
Brock Junction
Brock, Parker County, TX
WWTP Site Location Photo

Sheet 003

## Upstream



## Downstream



Date February 9, 2022

Drawn By

Scale NTS

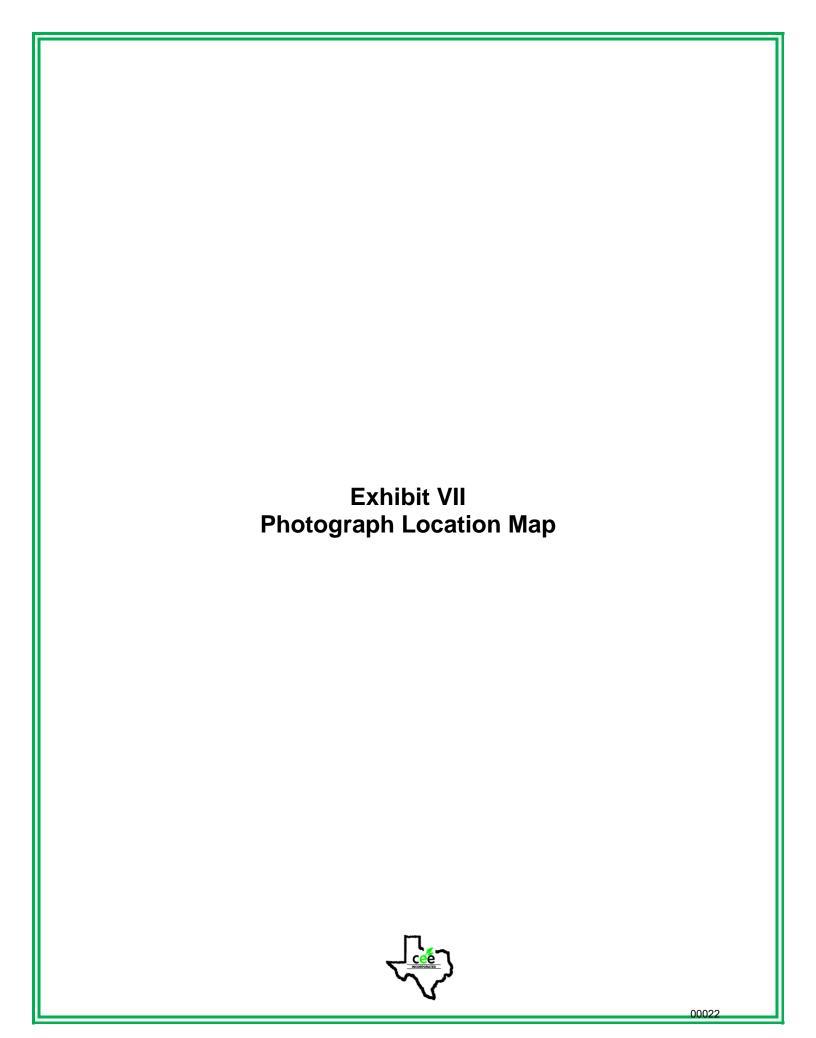
consulting environmental engineers, inc.

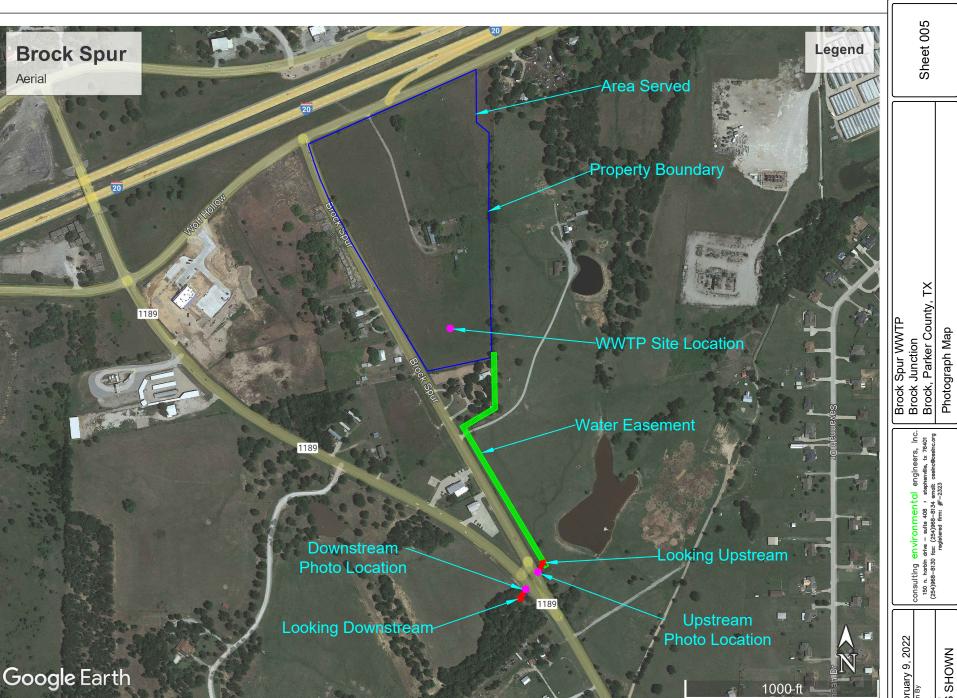
150 n. harbin drive - suite 408 - stephenville, tx 76401
(254)968-8130 fax: (254)968-8134 email: ceeinc@ceeinc.org
registered firm: #F-2323

Brock Spur WWTP Brock Junction Brock, Parker County, TX

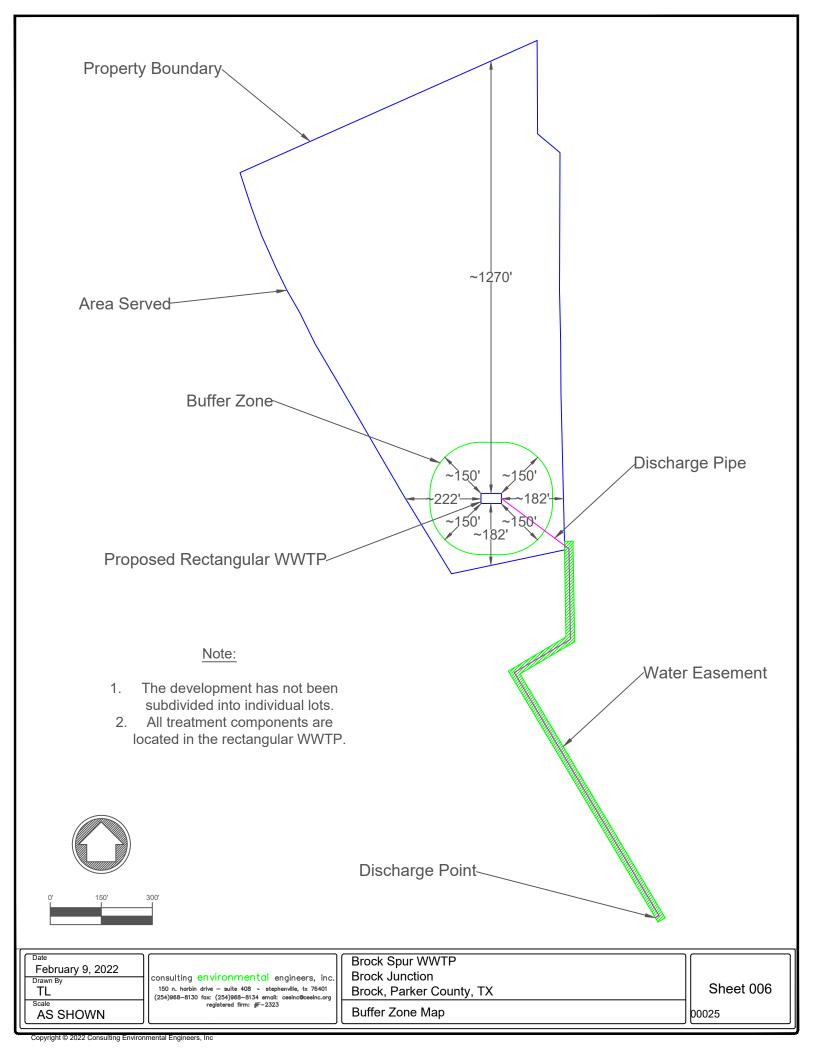
Upstream and Downstream Photos

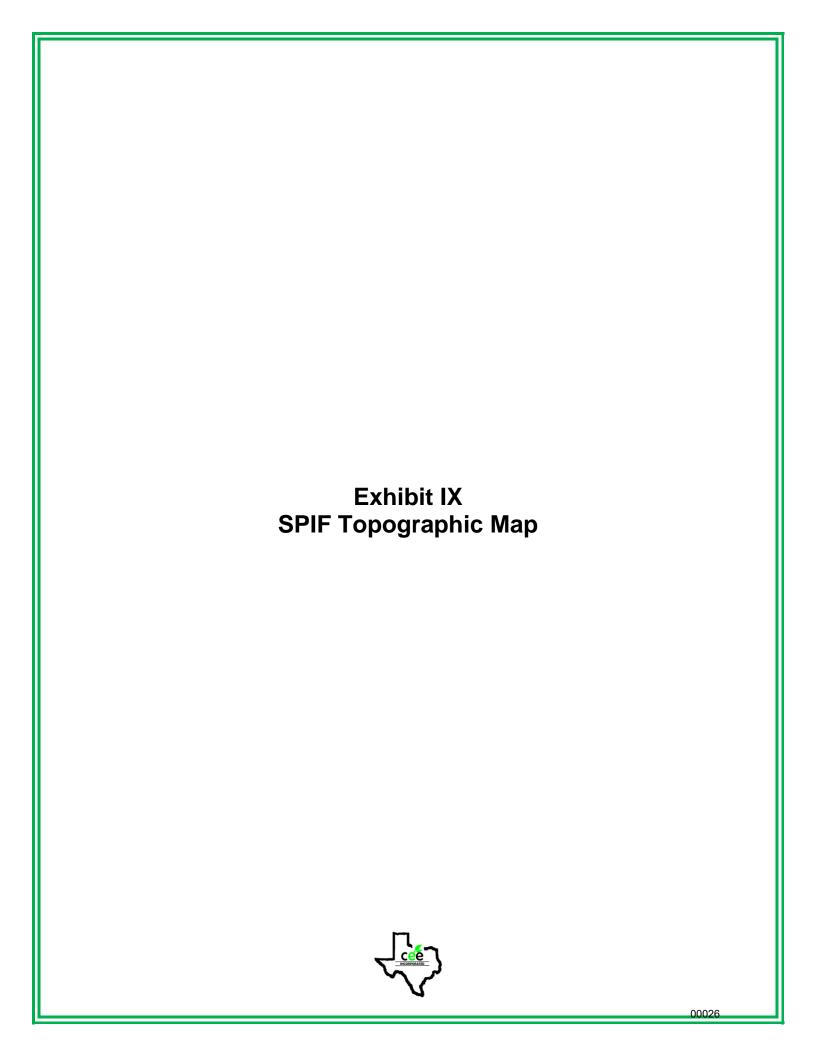
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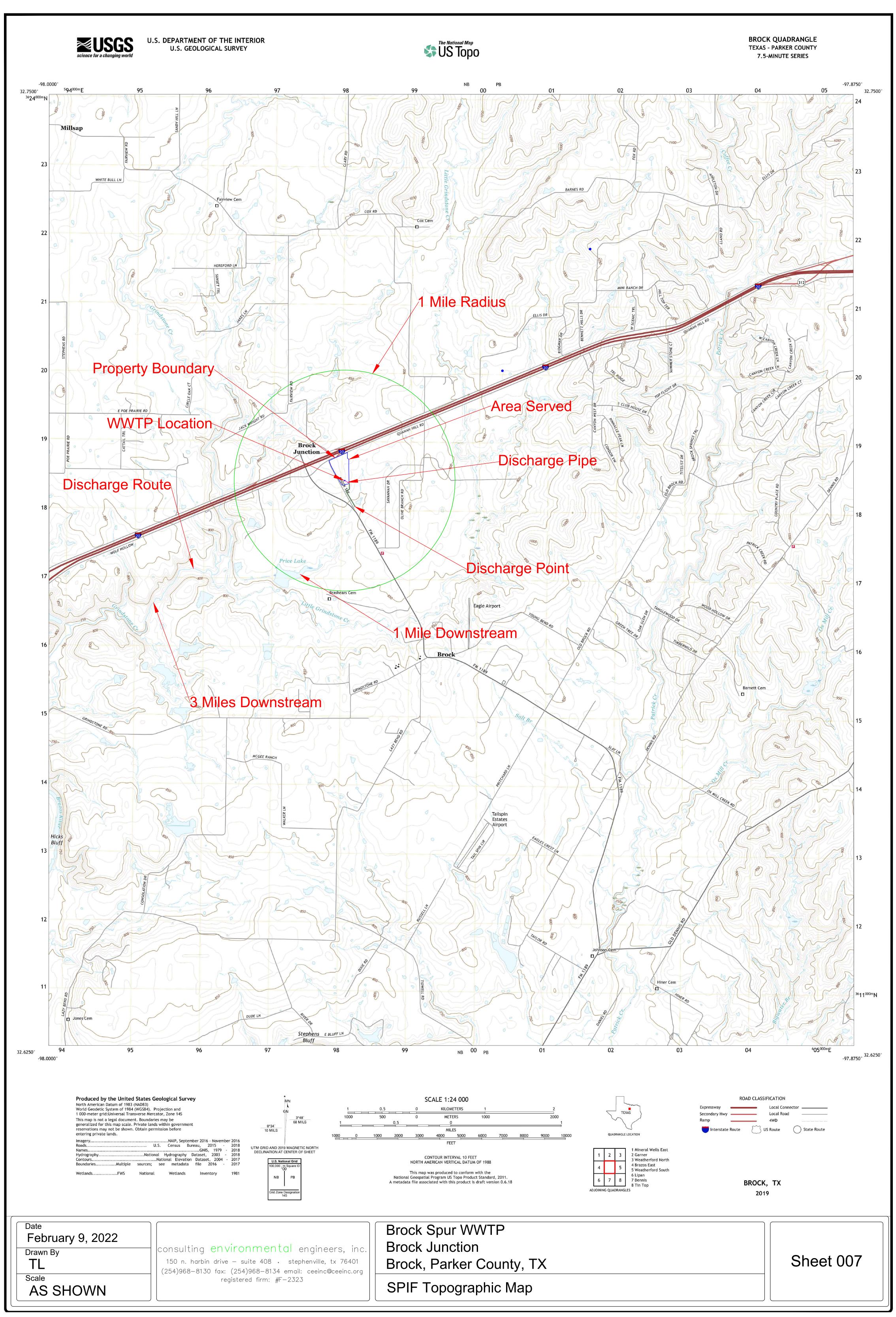


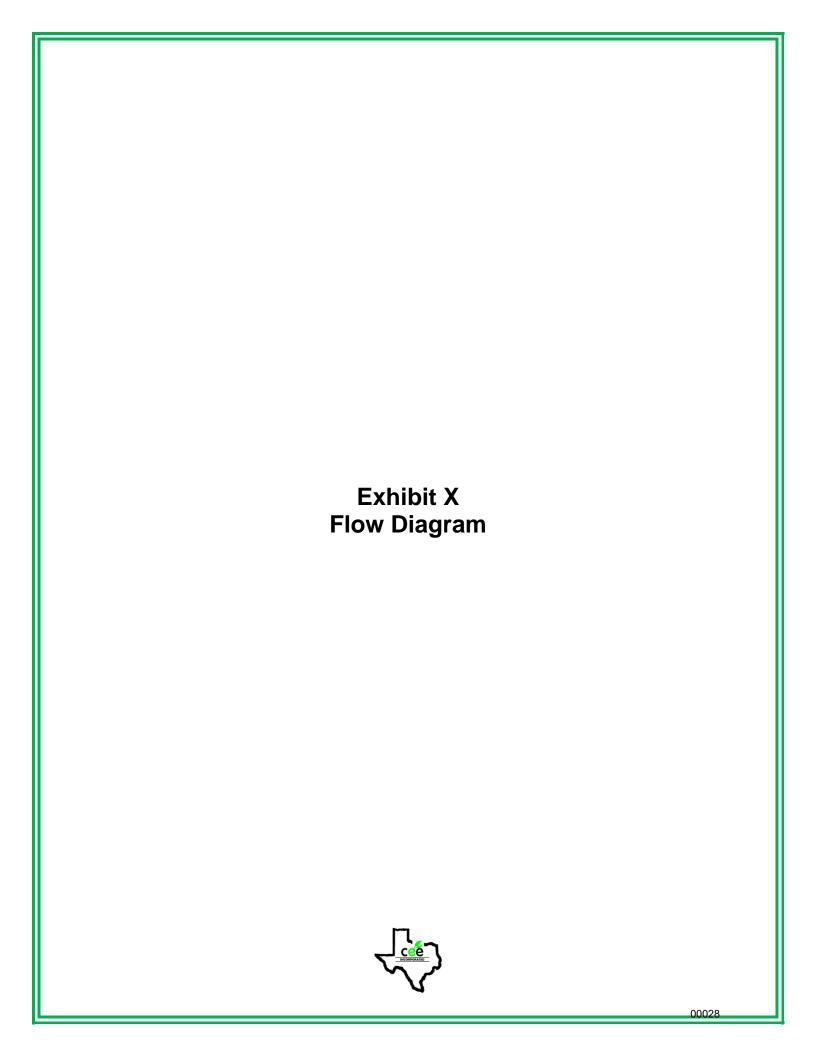


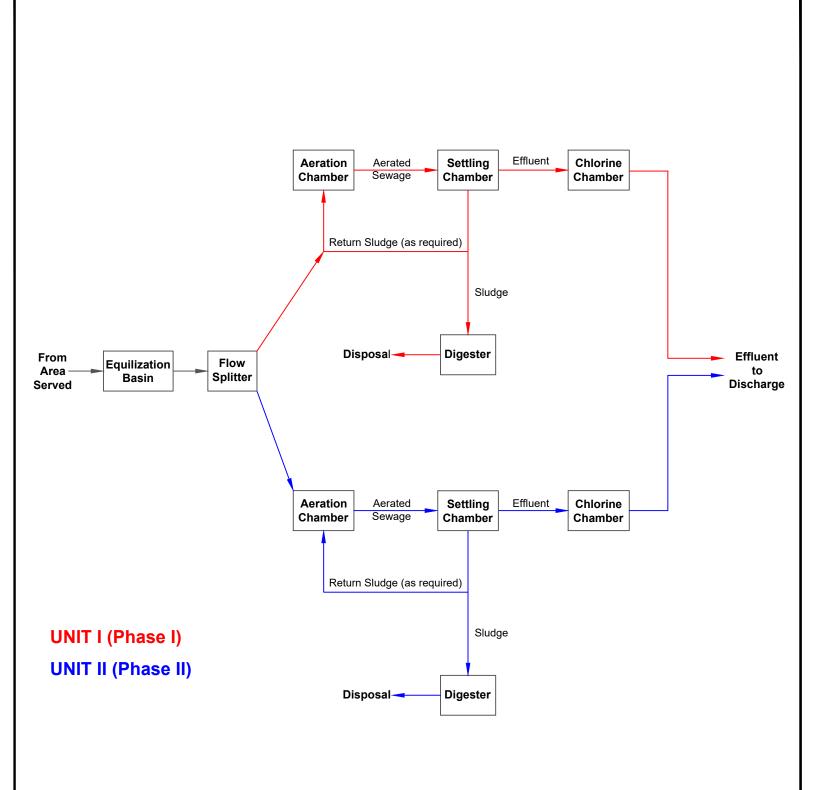


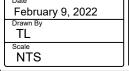










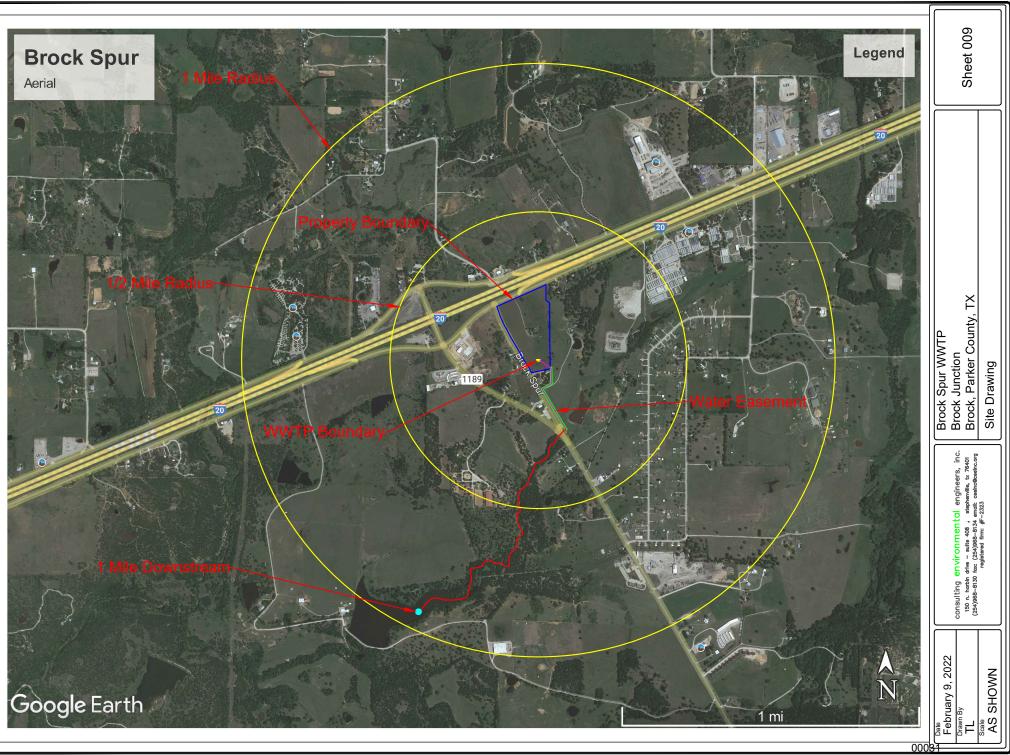


consulting environmental engineers, inc.
150 n. harbin drive – suite 408 . stephenville, tx 76401
(254)968-8130 fax: (254)968-8134 email: ceeinc@ceeinc.org
registered firm: #F-2323

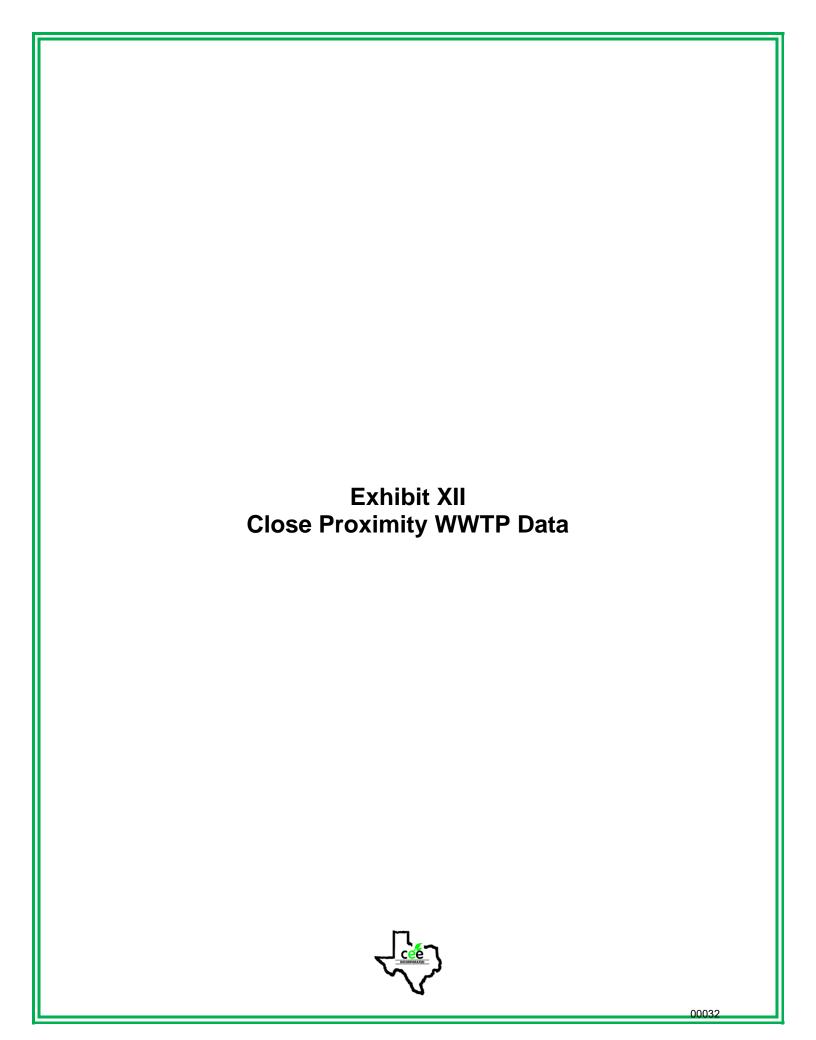
Brock Spur WWTP
Brock Junction
Brock, Parker County, TX
Flow Diagram

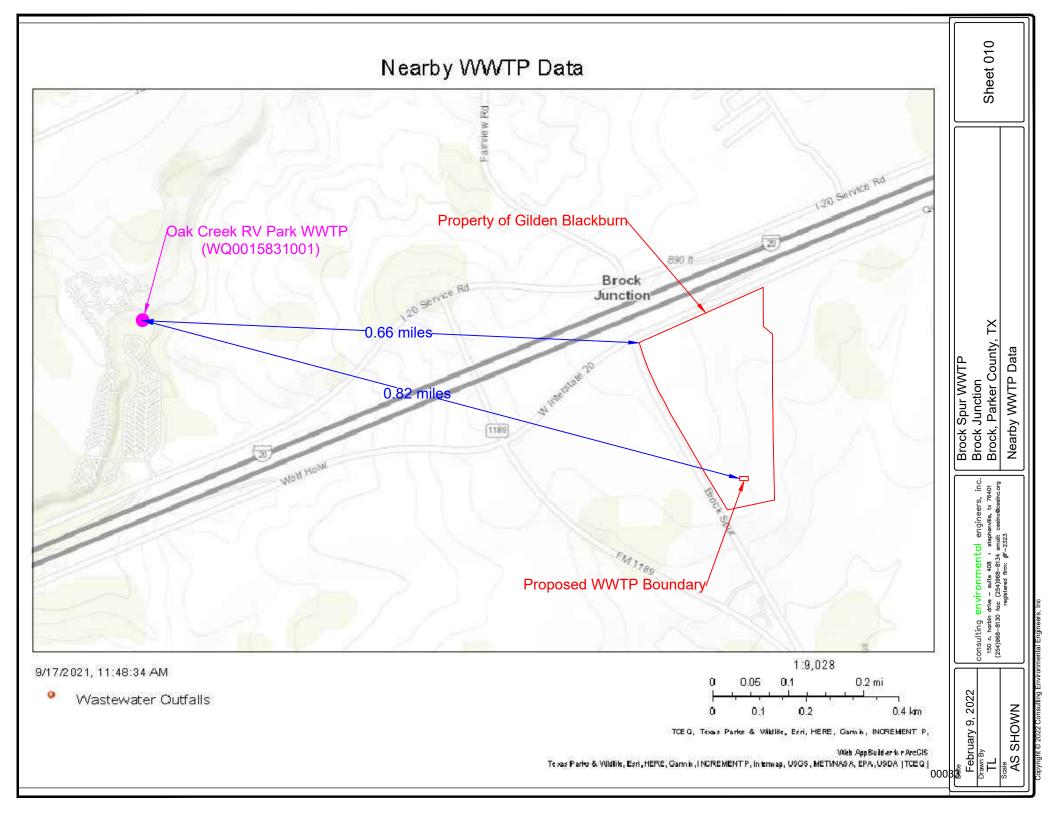
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### consulting environmental engineers, inc.

150 n. harbin drive – suite 408 • stephenville, tx 76401 phone: (254) 968-8130 fax: (254) 968-8134 email: ceeinc@ceeinc.org registered firm: #F-2323

September 22, 2021 Oak Creek RV Park 7652 W Interstate 20 Weatherford, TX 76088

Attention:

Dear Sir:

Sincerely.

Gilden Blackburn is applying to obtain approval from the Texas Commission on Environmental Quality (TCEQ) to install and operate a Wastewater Treatment System to service a proposed development. The property is located approximately 0.82 miles southeast of your permitted wastewater treatment facility. The client plans to provide public wastewater service to serve only the proposed development.

Furthermore, based on current information provided by the Texas Commission on Environmental Quality (TCEQ) it appears that the Oak Creek RV Park is permitted for a wastewater treatment facility located within the three-mile radius of the proposed wastewater treatment facility. TCEQ requires that a formal request for service be made to any public sewer supply system that is within that radius. Gilden Blackburn will not be applying for a CCN and will not be selling wastewater service to the public; the proposed wastewater system will be strictly utilized to service the proposed development. I have attached a site map that depicts the proposed location and the proximity to your current location.

We would appreciate your indicating Oak Creek RV Park's response to this request on the bottom of this letter and returning it via email to ceeinc@ceeinc.org or via mail to Consulting Environmental Engineers Inc., 150 N. Harbin Drive, Suite 408, Stephenville, Texas 76401 at your earliest convenience.

hala P Allaga III
Charles P. Gillespie III
President
Attachment: Site Location Map
Oak Creek RV Park: Please check one (✓)
does wish to provide wastewater service to Gilden Blackburn and does not consent to Gilden Blackburn providing wastewater service to only this location.
does not wish to provide service to Gilden Blackburn and we consent to Gilden Blackburn providing wastewater service to only this location.
Comments:
Signed by:
Signed for: Oak Creek RV Park
Date: 9/2 7/2/



#### **DESIGN CALCULATIONS**

Influent Quality Characteristics – The raw sewage characteristics used for design purposes are as follows:

<u>Parameter</u>	Concentration
$BOD_5$	800 mg/L
TSS	20 mg/L

Influent Flow Characteristics – The hydraulic design of the facility must ensure that the facility will operate under the most extreme conditions anticipated. The facility process and hydraulic design for this facility are as follows:

**Table (1) – Design Calculations** 

Flow	Gallons Per Day	Gallons Per Minute		
Average Daily Flow (Qave)	37,500	26.04		
Peak 2-Hour Flow (Q <sub>pk</sub> )	150,000	104.17		

Loading	Pounds Per Day
$\mathrm{BOD}_5$	250
TSS	243.95

Process Design – The treatment facility will be designed to produce an effluent quality in compliance with the proposed permitted parameters of:

$$CBOD_5 = 20mg/L$$
;  $TSS = 20mg/L$ ;  $DO = 4.0mg/L$ ;

 $Cl_2$  Residual = 1 to 4 mg/L after 20 minutes detention time at peak flow.

In order to achieve the required removal efficiencies, the activated sludge process operated in the conventional mode with nitrification has been chosen. The 7-day low reactor temperature is 15°. The anticipated operating ranges for MLSS and RAS are 3,000 mg/L, respectively. Other assumptions include a single stage aerobic digester with supernatant decant and digester solids concentration of 2%.

# **Design Calculations**

**Table (1) - Design Calculations** 

Flow	GPD	GPM
Average Daily Flow (Q <sub>ave</sub> )	37,500	26.04
Peak 2-Hour Flow (Q <sub>pk</sub> )	150,000	104.17

Loading	lbs/day
BOD5	250
TSS	243.95

Table (2) - Aeration Basin

Aeration Basin	TCEQ Requires	Actual Provided
Organic loading rate (lbs/day/1000 ft <sup>3</sup> )	25.00	24.29
Total aeration volume (ft <sup>3</sup> )	16660.00	16672.50

Table (3) - Clarifier

Clarifier	TCEQ Requires	Actual Provided
Surface loading rate (Q <sub>pk</sub> ) (gallons/day/ft <sup>2</sup> )	1,200 (Max)	848.85
Detention time (Q <sub>pk</sub> ) (hr)	1.8 (Min)	2.20
Surface area (ft <sup>2</sup> )	166.73	176.71
Volume (ft <sup>3</sup> )	1333.84	1943.81
Side - water depth (ft)	8 (Min)	11.00
Maximum weir loading (Q <sub>pk</sub> ) (gallons/day/ft)	800 (Min)	900.00
Diameter (ft)	14.57	15.00
Weir length (ft)	39.49	40.84

Table (4) - Aerobic Digester

Aerobic Digester	TCEQ Requires	Actual Provided
MCRT at 15°C (days)	60 (Min)	60.00
Digester volume (ft <sup>3</sup> )	4998.00	5023.13

# **Design Calculations**

Table (5) - Chlorine Contact Chamber

Chlorine Contact Chamber	TCEQ Requires	Actual Provided
Detention time (Q <sub>pk</sub> ) (minutes)	20.00	20.00
Volume (Q <sub>pk</sub> ) (ft <sup>3</sup> )	279.00	280.00

#### Table (6) - Aeration Basin

Aeration Basin	TCEQ Requires	Actual Provided
Aeration requirements (ft <sup>3</sup> /min)	555.00	555.00
Oxygen required (lb O <sub>2</sub> /lb BOD <sub>5</sub> )	1.20	1.20

#### Table (7) - Sludge Digester

Sludge Digester	TCEQ Requires	Actual Provided
Air supply required for digestion (ft <sup>3</sup> /min)	100.00	100.00

#### **DESIGN CALCULATIONS**

Influent Quality Characteristics – The raw sewage characteristics used for design purposes are as follows:

<u>Parameter</u>	Concentration
$BOD_5$	800 mg/L
TSS	20 mg/L

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In order to achieve the required removal efficiencies, the activated sludge process operated in the conventional mode with nitrification has been chosen. The 7-day low reactor temperature is 15°. The anticipated operating ranges for MLSS and RAS are 3,000 mg/L, respectively. Other assumptions include a single stage aerobic digester with supernatant decant and digester solids concentration of 2%.

# **Design Calculations**

**Table (1) - Design Calculations** 

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Surface loading rate (Q <sub>pk</sub> ) (gallons/day/ft <sup>2</sup> )	1,200 (Max)	848.85
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Aerobic Digester	TCEQ Requires	Actual Provided
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Digester volume (ft <sup>3</sup> )	4998.00	5023.13

# **Design Calculations**

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Chlorine Contact Chamber	TCEQ Requires	Actual Provided
Detention time (Q <sub>pk</sub> ) (minutes)	20.00	20.00
Volume (Q <sub>pk</sub> ) (ft <sup>3</sup> )	279.00	280.00

#### Table (6) - Aeration Basin

Aeration Basin	TCEQ Requires	Actual Provided
Aeration requirements (ft <sup>3</sup> /min)	555.00	555.00
Oxygen required (lb O <sub>2</sub> /lb BOD <sub>5</sub> )	1.20	1.20

#### Table (7) - Sludge Digester

Sludge Digester	TCEQ Requires	Actual Provided
Air supply required for digestion (ft <sup>3</sup> /min)	100.00	100.00

# Brock Spur WWTP Phase I

## **Extended Aeration - Design Spreadsheet**

#### **INPUT**

$$ADF$$
 (average daily flow) =  $\frac{37,500}{day}$ 

$$BOD$$
 (biochemical oxygen demand) = 800  $\frac{mg}{f}$ 

#### **OUTPUT**

#### I Daily Average Organic Load

$$\underline{lbs}$$
  $\underline{BOD}$  250  $\underline{lbs}/\underline{day}$  ADF X 8.33 gallon X 1,000,000 lbs.

#### II Peak Flow Organic Load

#### **III** Minimum Clarifier Detention Diameter

#### IV Peak Flow Clarifier Design Diameter

# Brock Spur WWTP Phase I

#### V Digester Volume

$$\frac{20 \text{ } ft^3}{lb/day}$$
 × daily average organic load (above Item I) = 4,998  $ft^3$  Digester Length 46.76  $ft$ 

#### VI Chlorine Tank Volume

(Minimum=3')

#### VII Aeration Basin Sizing

daily average organic load (above Item I) 
$$\times \frac{day}{15 \ lbs} \times 1,000 \ ft^3 =$$
 **16,660**  $ft^3$  **Basin Length 155.88304**  $ft$ 

#### VIII Air Supply For Aeration

daily average organic load (above Item1) 
$$X$$
 Ib BOD  $\frac{2.22}{min}$   $\frac{ft^3}{min}$ 

#### IX Air Supply For Digestion

digester volume (above Item VII) X 1,000 
$$\frac{30 \text{ min}}{\text{ft}^3}$$
 100  $\frac{\text{ft}^3}{\text{min}}$ 

#### X Total Air Required

air supply for aeration (above itemVIII) + air supply for digestion (above item IX) +  $40 \text{ ft}^3 / \text{min}$  (air lifts) 695  $ft^3 / \text{min}$ 

# Brock Spur WWTP Phase II

## **Extended Aeration - Design Spreadsheet**

#### **INPUT**

$$ADF$$
 (average daily flow) =  $\frac{37,500}{day}$ 

$$BOD$$
 (biochemical oxygen demand) = 800  $\frac{mg}{f}$ 

#### **OUTPUT**

#### I Daily Average Organic Load

$$\underline{lbs}$$
  $\underline{BOD}$  250  $\underline{lbs}/\underline{day}$  ADF X 8.33 gallon X 1,000,000 lbs.

#### II Peak Flow Organic Load

#### **III** Minimum Clarifier Detention Diameter

#### IV Peak Flow Clarifier Design Diameter

# Brock Spur WWTP Phase II

#### V Digester Volume

$$\frac{20 \text{ } ft^3}{lb/day}$$
 × daily average organic load (above Item I) = 4,998  $ft^3$  Digester Length 46.76  $ft$ 

#### VI Chlorine Tank Volume

(Minimum=3')

#### VII Aeration Basin Sizing

daily average organic load (above Item I) 
$$\times \frac{day}{15 \ lbs} \times 1,000 \ ft^3 =$$
 **16,660**  $ft^3$  **Basin Length 155.88304**  $ft$ 

#### VIII Air Supply For Aeration

#### IX Air Supply For Digestion

digester volume (above Item VII) X 1,000 
$$\frac{30 \text{ min}}{\text{ft}^3}$$
 100  $\frac{\text{ft}^3}{\text{min}}$ 

#### X Total Air Required

air supply for aeration (above itemVIII) + air supply for digestion (above item IX) +  $40 \text{ ft}^3 / \text{min}$  (air lifts) 695  $ft^3 / \text{min}$ 

#### PLANT DESIGN FEATURES

#### A. STANDBY POWER SYSTEM

The owner will use a portable standby power system that will be capable of providing sufficient power to operate the following units:

- 1. 2 Lift Station pumps
- 2. 2 -Blower Units
- 3. Final Clarifier
- 4. Chlorination System
- 5. Lighting Panels, Metering and Control Equipment

With the standby power system, the facility should be capable of meeting discharge permit parameters under any expected outage event.

#### B. ALARM FEATURE

The plant will be equipped with an audible and visual alarm. The alarms will activate under the following conditions:

- 1. Power Outage
- 2. Lift Station High Level
- 3. Aeration Basin High Level
- 4. Final Clarifier Torque Overload
- 5. Chlorine Leak Detection

#### C. DESIGN FEATURES FOR OPERATING FLEXIBILITY

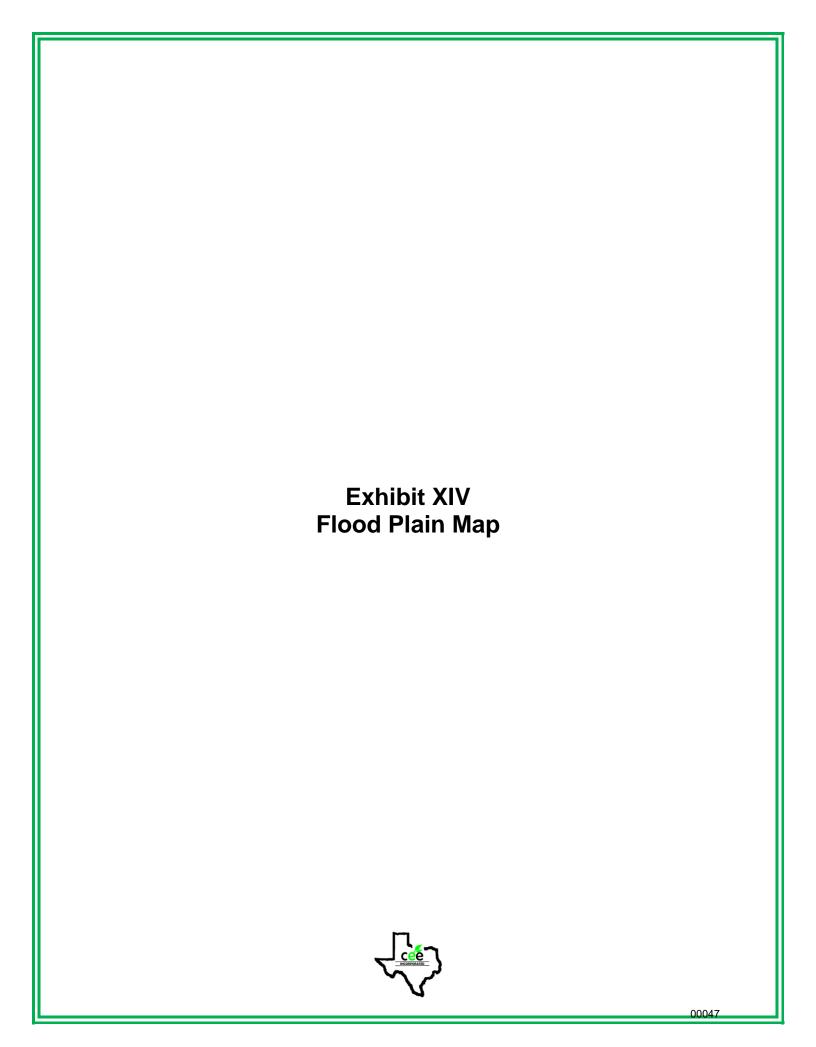
All features on the treatment plant have two redundant systems. When one is out of service we can temporarily operate on one system since it is designed for four times the average daily flow.

#### D. EQUIPMENT DUPLICITY

- 1. LIFT STATION: Two lift station pumps are to be installed with one required to meet peak flow conditions. Level switches automatically start the second pump if the one pump does not meet demand or fails to come on line.
- 2. BLOWERS: Two blowers will be installed with one designed to meet the required aeration rate. Backup operation for these units is manual.
- 3. The overall intention is to have two systems that give us flexibility and capability to provide uninterrupted service.

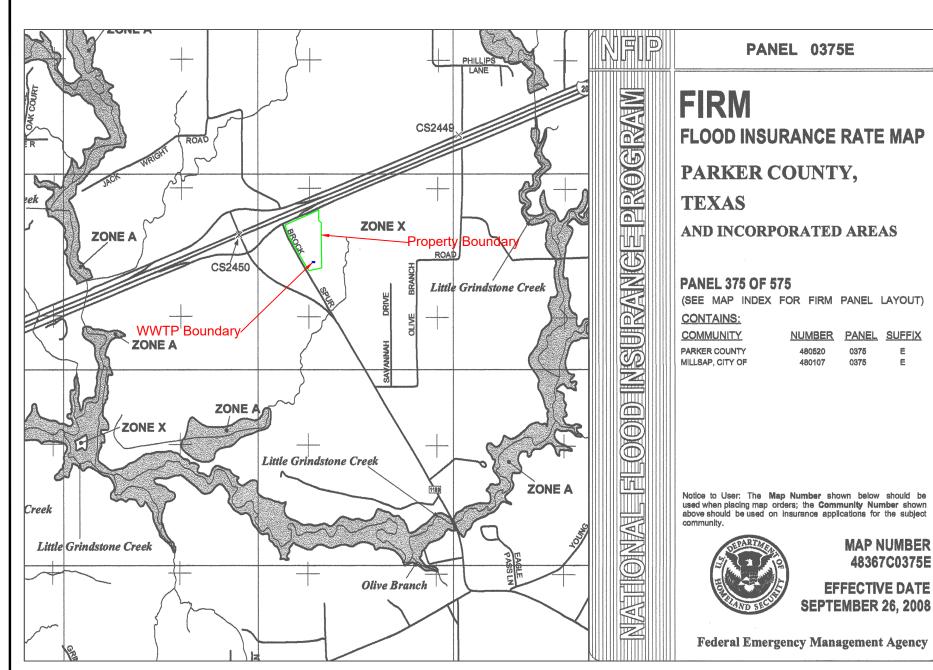
#### E. OVERFLOW PREVENTION:

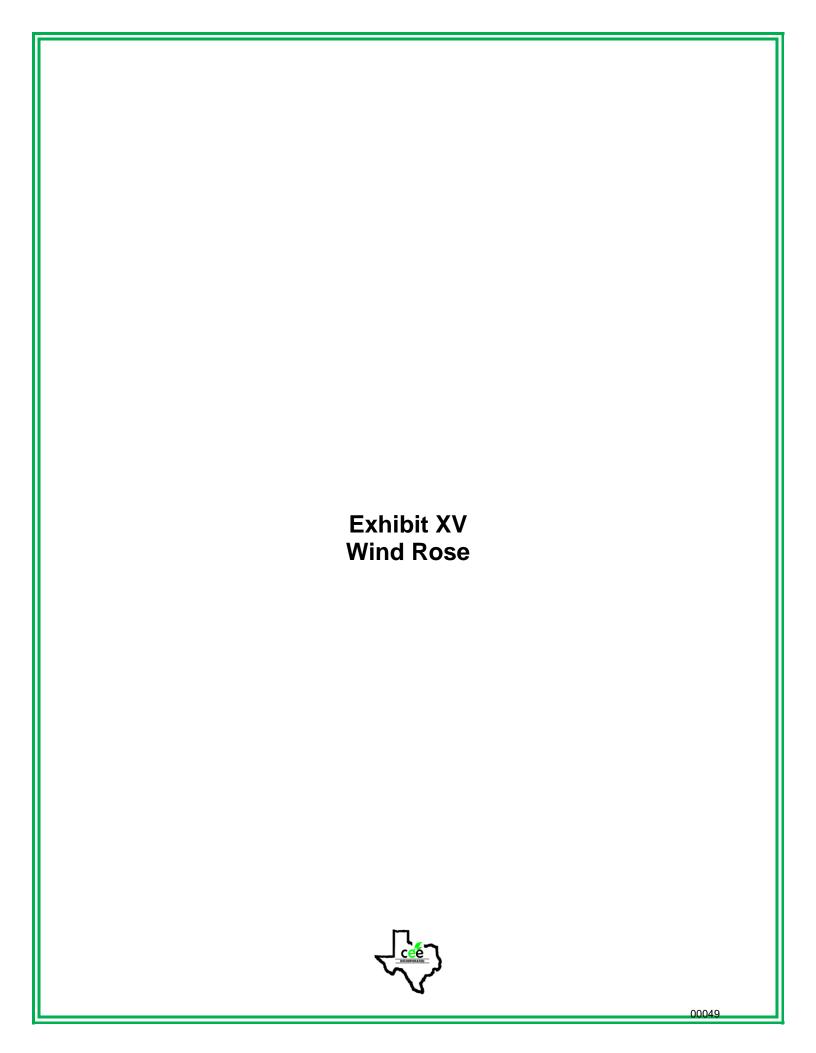
The plant lift station is equipped with equipment duplicity to prevent overflow. Other portions of the unit are designed with free board, which allow time for eliminating any blockage problem or diversion of flow to the equalization basin.

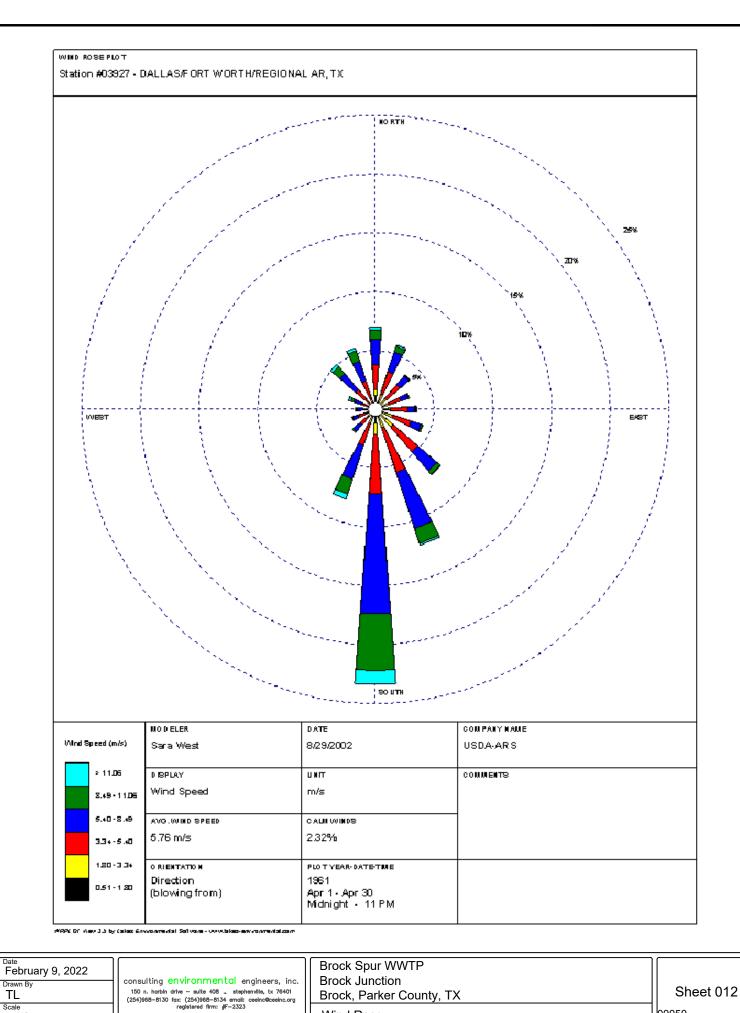


February 9, 2022

AS SHOWN





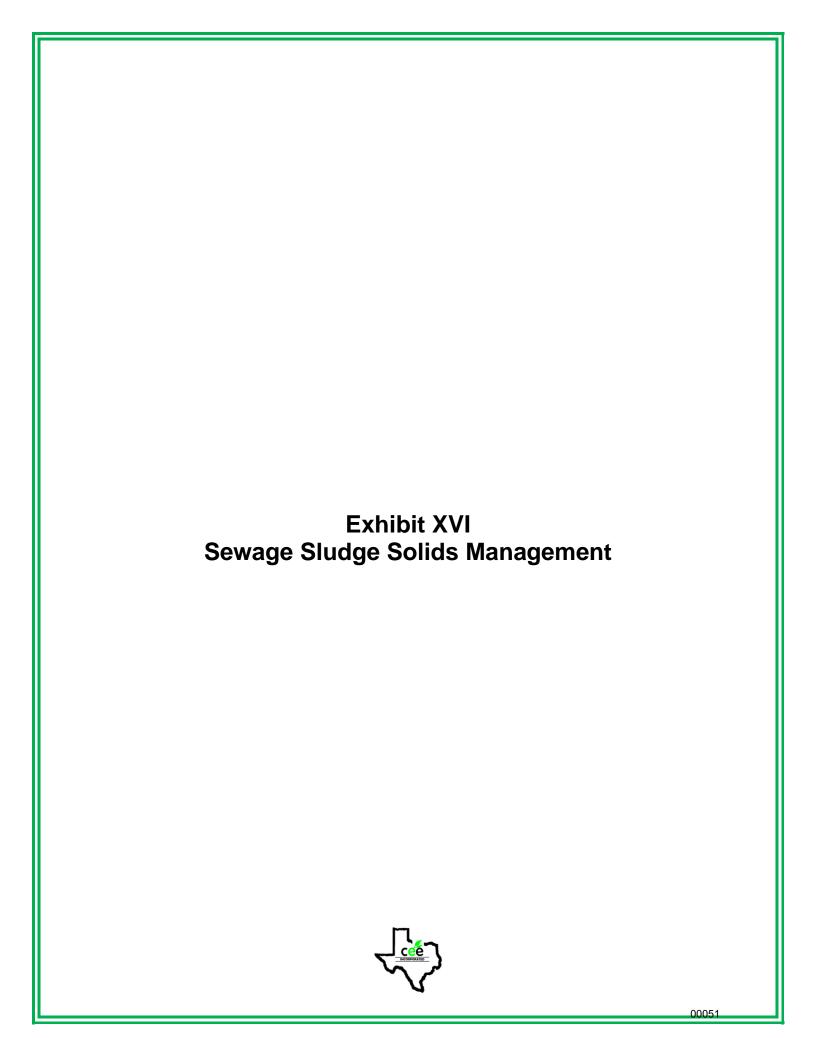


Wind Rose

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NTS





#### consulting environmental engineers, inc.

Main Office: 150 N. Harbin Drive – Suite 408 Stephenville, TX 76401 Phone: (254) 968-8130

Fax: (254) 968-8134

email: ceeinc@ceeinc.org

Branch Office: 11504 PR 7440 Wolfforth, TX 79382 Phone: (817) 504-8390 www.ceeinc.org

## Sludge Management Calculation Sheet

Permittee 1 Brock Spur WWTP - Phase I

Influent BOD 2 800 mg/l

Effluent BOD 3 20 mg/l

Average Daily Flow 4 37,500 gallon/day

Influent TSS 5 \_\_\_\_\_ mg/l

Average Daily Organic Load 6 250.00 lbs/day

Required Digester Volume 7 4998 cubic feet

BOD Removal 8 243.95 lbs/day

Solids Generated		100%	75%	50%	25%
BOD Removed	9	243.95	182.96	121.97	60.99
Non-Volatile TSS	10	6.25	4.69	3.12	1.56
Solids Produced (lbs)	11	121.97	91.48	60.99	30.49
Total Wet Sludge	12	3205.50	2404.13	1602.75	801.38
Volume of Wet Sludge (cubic ft)	13	51.45	38.58	25.72	12.86
Sludge Storage Available	14	97.2	129.5	194.3	388.6

Sludge will be wasted from the RAS flow stream to the aerobic digester. Sludge solids will be stabilized in the digester; supernatant will be decanted from the digester and returned to the facility headworks for treatment.

Liquid digested sludge will be removed from the digester for disposal on a regular basis as required. The calculated mean cell residence time for the digester storage volume of 20,000 gallons will be approximately 20 days at 100% capacity. Generated waste will be hauled by an approved transporter to a permitted site.



#### consulting environmental engineers, inc.

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Fax: (254) 968-8134 email: ceeinc@ceeinc.org

Branch Office: 11504 PR 7440 Wolfforth, TX 79382 Phone: (817) 504-8390 www.ceeinc.org

## Sludge Management Calculation Sheet

Permittee 1 Brock Spur WWTP - Phase II

Influent BOD 2 800 mg/l

Effluent BOD 3 20 mg/l

Average Daily Flow 4 37,500 gallon/day

Influent TSS 5 20 mg/l

Average Daily Organic Load 6 250.00 lbs/day

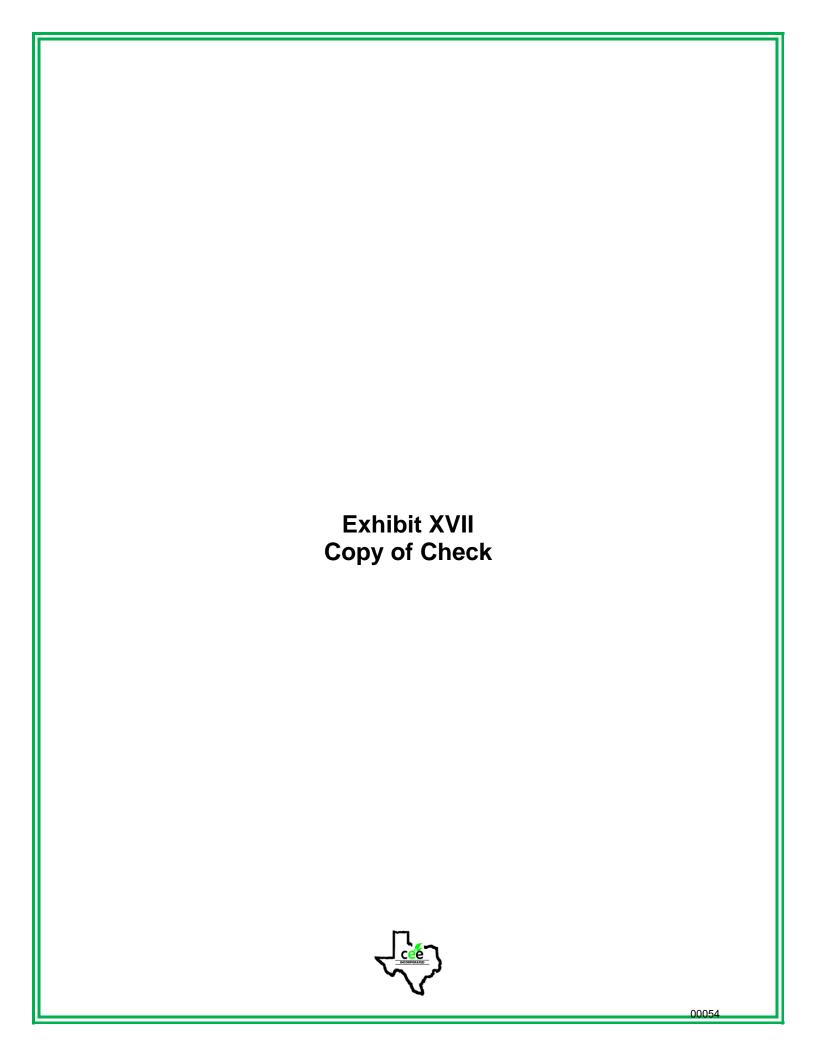
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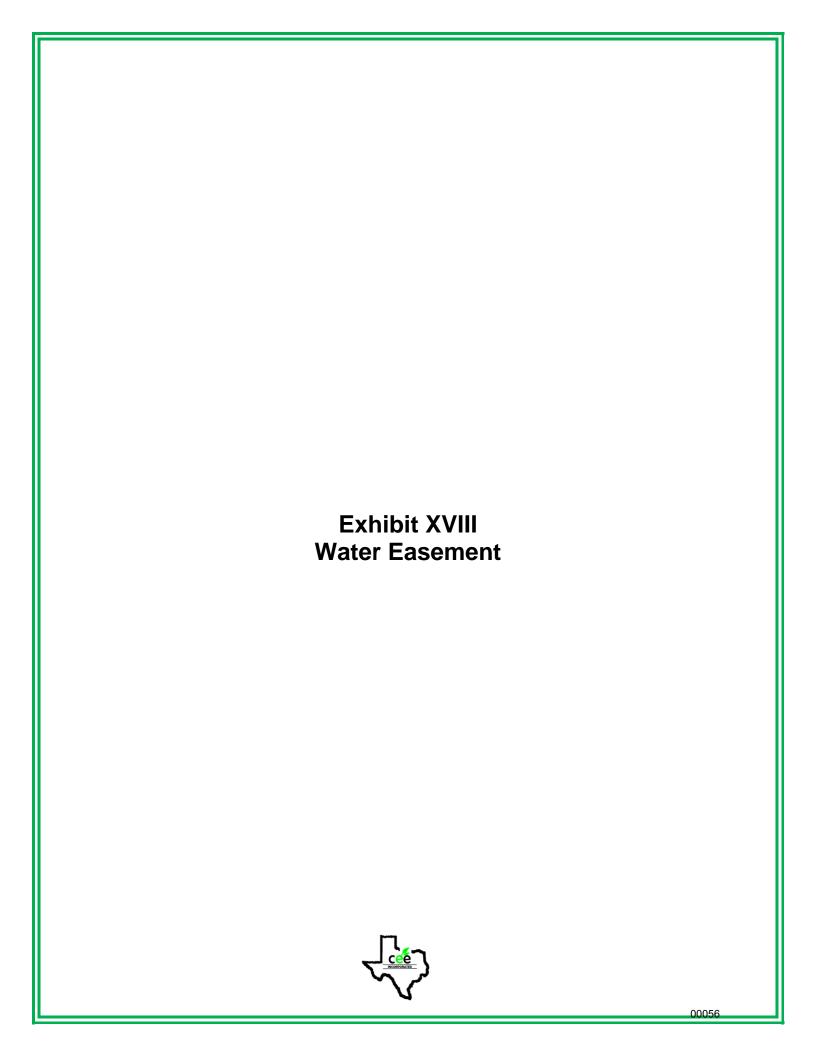
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BLACKBURN RANCH GIL BLACKBURN	5628 88-112/1113
8131 OLD BROCK RD. BROCK, TX 76087	2-17-22 84 Date BICHECK ARMOR
Pay to the TGEQ	\$ 550. 0
FIVE hundred	fifty 100 Dollars of Photo Safe Deposit Details on Delais Delais on Delais Delais on D
FÍRST FINANCIAL BANK.	1 2700
For BROCK Spur &	ernit Sil/Strl
111130112215628#84	



STATE OF TEXAS

COUNTY OF PARKER &

DATE:

2

November 16, 2021

GRANTOR:

Timothy E. Carter and Mary F. Carter

GRANTOR'S MAILING ADDRESS: 1260 Lazy Bend Road

Millsap, TX 76066

GRANTEE: Gil Blackbum/Blackbum Ranches LLC

GRANTEE'S MAILING ADDRESS: PROVIDE ADDRESS

PROVIDE ADDRESS

CONSIDERATION: The provision of utility service and/or other benefits inuring to GRANTOR and/or Ten and No/100's dollars (\$10.00) and other good and valuable consideration, the receipt and sufficiency of some consideration deemed valuable to GRANTOR being hereby expressly acknowledged and accepted by GRANTOR.

The EASEMENT PROPERTY is a tract of land consisting of [EASEMENT SIZE IN ACRES] acres, more or less, more particularly described in the attached Exhibit A, legal description and Exhibit B, graphic depiction of the proposed utility casement, incorporated herein for all purposes.

The EASEMENT PROPERTY shall include the exclusive right to use of the subsurface below and air space above for the PURPOSE herein stated.

PROJECT: Construction of a single pipeline, up to 18" in diameter, for conveyance and temporary storage of wastewater facilities and related materials, consisting of all necessary or desirable appurtenances and equipment, including but not limited to, manholes, valves, and other facilities whether made of wood, metal, or other materials. All permanent facilities shall be located underground or at grade.

GRANT: GRANTOR, for the CONSIDERATION received by GRANTOR, hereby grants, sells, and conveys to GRANTEE an EASEMENT appurtenant and Right-of-Way in, upon, and across the EASEMENT PROPERTY, together with all and singular the rights and appurtenances thereto in any way belonging, to have and to hold it to GRANTEE's successors and assigns forever. GRANTOR also grants the GRANTEE the right and authority to license, permit or otherwise agree to the joint use or occupancy of the line system, or facilities by any other person or entity for electrification.

PURPOSE: The EASEMENT, right of way, rights, and privileges herein granted shall be used for the purpose of constructing, placing, operating, maintaining, reconstructing, replacing, relocating (within the EASEMENT PROPERTY), reconstituting, changing the size or nature of, rebuilding, upgrading, removing, inspecting, patrolling, and/or repairing the PROJECT or any part of the PROJECT, and making connections therewith to the purpose shall also include use of the EASEMENT, right of way, rights and privileges granted herein for any use directly related to the PROJECT or financing of the PROJECT, including but not limited to performing archeological, historical, environmental, or other studies. GRANTEE shall have the right of ingress and egress to and across the easement. GRANTEE shall have the right to maintain the easement area from obstructions of trees, shrubs, bushes, brush, and vegetation.

ACCESS: GRANTOR shall have the right of pedestrian, equipment, and vehicular ingress and egress at all times upon and across the EASEMENT, and such other uses that do not interfere with GRANTEE's rights berein.

TERM: The EASEMENT and access rights granted herein, as well as the covenants made herein, shall be perpetual and appurtenant to the land, unless unused or abandoned by the GRANTEE for a period of 10 years.

DAMAGES: It is understood and agreed that the CONSIDERATION received by GRANTOR includes adequate compensation for all damages for the initial construction of the PROJECT. GRANTEE shall remain liable for damages caused in violation of this section and for damages to any structures, improvements, trees, shrubs, bushes, brush, or vegetation adjacent to or nearby the EASEMENT PROPERY. GRANTEE shall be liable for any damages to improvements due to construction and maintenance of the PROJECT. GRANTEE shall restore all improvements and vegetation damaged due to construction and maintenance of the PROJECT to the same or better condition in which they existed prior to damage.

MINERALS: GRANTOR expressly reserves all oil, gas, and other minerals owned by GRANTOR, in, on and under the EASEMENT PROPERY, provided that the GRANTOR shall not be permitted to and shall not allow any party to drill or excavate for minerals on or from the surface of the EASEMENT PROPERTY, but GRANTOR may extract oil, gas or other minerals from and under the EASEMENT PROPERTY by directional drilling or other means which do not interfere with or disturb GRANTEE's use of the EASEMENT PROPERTY.

OWNERSHIP: GRANTOR agrees that all utility appurtenances and facilities installed upon the EASEMENT PROPERTY shall at all times remain the property of the GRANTEE and is removable at the option of the GRANTEE.

ASSIGNMENT AND MISCELLANEOUS: This instrument, and the terms and conditions contained herein, shall inure to the benefit of and be binding upon GRANTEE and GRANTOR, and their respective heirs, personal representatives, successors, and assigns. When the context requires, singular nouns and pronouns include the plural. When appropriate, the term "GRANTEE" includes the employees, contractors, and authorized agents of GRANTEE.

WARRANTY: GRANTOR warrants and shall forever defend the EASEMENT PROPERTY to GRANTEE against anyone lawfully claiming or to claim the EASEMENT PROPERTY or any part thereof.

GRANTOR-

GRANTOR SIGNATURE

ORANTOR PRINTED NAME

STATE OF TEXAS

20

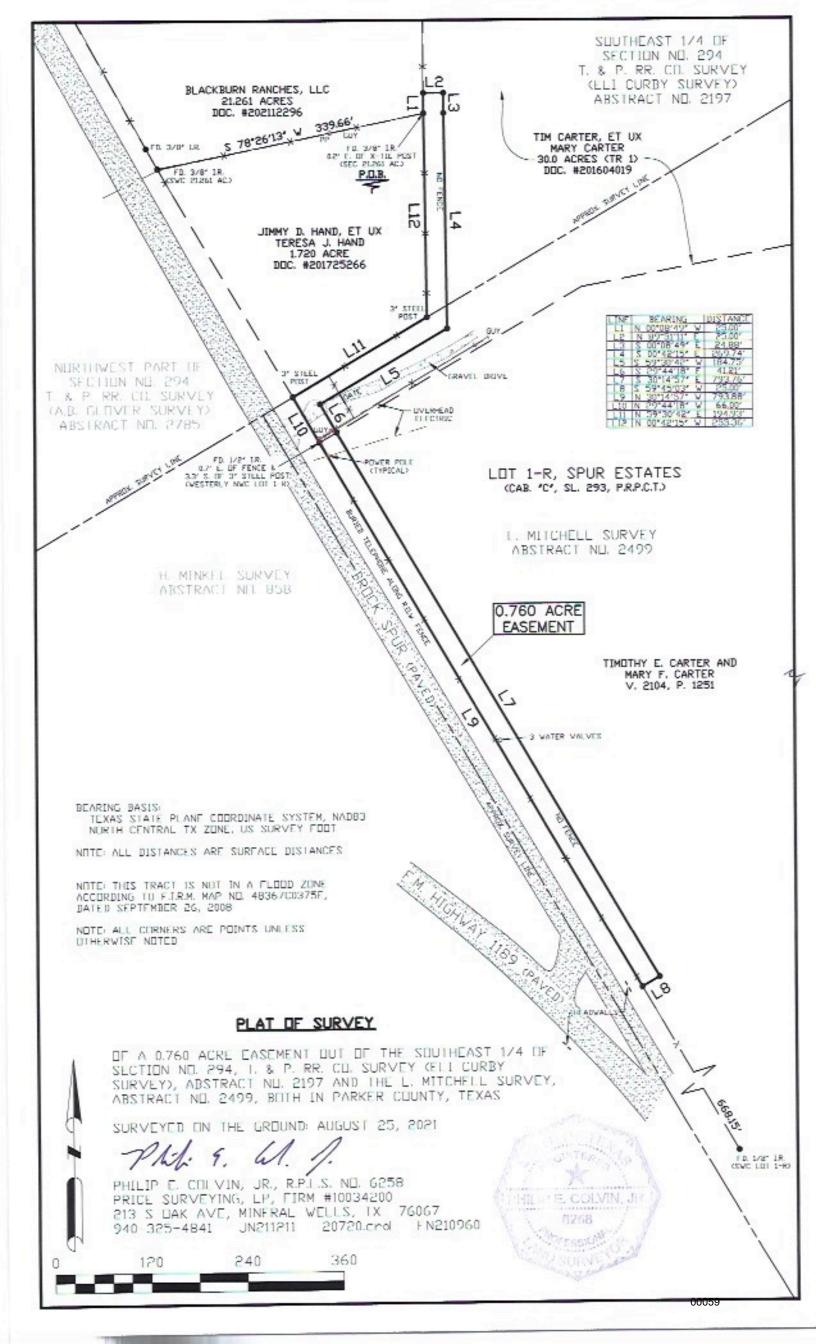
COUNTY OF PARKER §

BEFORE ME, the undersigned authority, in and for said County, on this day personally appeared instrument, and acknowledged to me that he executed the same for the purposes and considerations therein expressed, and in capacity therein stated.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, this 18

Kim Ora Ora Price

Notary Public in and for the State of Texa



## LEGAL DESCRIPTION

Of a 0.760 acre easement out of the Southeast 1/4 of Section No. 294, T. & P. RR. Co. Survey (Eli Curby Survey), Abstract No. 2197 and the L. Mitchell Survey, Abstract No. 2499, both in Parker County, Texas; being part of a certain 30.0 acres tract (Tract 1) described in Document No. 201604019 of the Official Public Records of Parker County, Texas, and part of Lot 1-R of Spur Estates, according to plat recorded in Cabinet C, Slide 293 of the Plat Records of Parker County, Texas; and being further described by metes and bounds as follows:

Beginning at a found 3/8" iron rod in the west line of said 30.0 acres tract and at the southeast corner of a certain 21.261 acres tract described in Document No. 202112296 of said Official Public Records and at the northeast corner of a certain 1.720 acres tract described in Document No. 201725266 of said Official Public Records for the beginning corner of this easement. Whence the most easterly northeast corner of the A.B. Glover Survey, Abstract No. 2785, is called to bear N. 00 deg. 08 min. 55 sec. W. 1962.76.

Thence N. 00 deg. 08 min. 49 sec. W. 25.00 feet along the west line of said 30.0 acres tract to a point in the east line of said 21.261 acres tract for the most northerly northwest corner of this easement.

Thence N. 89 deg. 51 min. 11 sec. E. 25.00 feet to a point for the northeast corner of this easement.

Thence S. 00 deg. 08 min. 49 sec. E. 24.88 feet to a point for a corner of this easement.

Thence S. 00 deg. 42 min. 15 sec. E. 269.74 feet to a point for a corner of this easement.

Thence S. 59 dcg. 30 min. 42 sec. W. 184.75 feet to a point for an ell corner of this easement.

Thence S. 29 deg. 44 min. 18 sec. E. 41.21 feet to a point in the south line of said 30.0 acres tract and in the north line of said Lot 1-R for a corner of this easement.

Thence S. 30 deg. 14 min. 57 sec. E. 793.76 feet to a point for the southeast corner of this easement.

Thence S. 59 deg. 45 min, 03 sec. W. 25.00 feet to a point in the east right of way line of Brock Spur (paved) and in the west line of said Lot 1-R for the southwest corner of this easement. Whence a found 1/2" iron rod at the southwest corner of said Lot 1-R bears S. 30 deg. 14 min. 57 sec. E. 668.15 feet.

Thence along the east right of way line of said Brock Spur the following courses and distances:

- N. 30 deg. 14 min. 57 sec. W. 793.88 feet to a found 1/2" iron rod at the most westerly northwest corner of said Lot 1-R and at the southwest corner of said 30.0 acres tract for a corner of this easement
- N. 29 deg. 44 min. 18 sec. W. 66,00 feet to a 3" steel post at the most westerly northwest corner of said 30.0 acres tract and at the southwest corner of said 1.720 acres tract for the most westerly northwest corner of this easement

Thence N. 59 deg. 30 min. 42 sec. E. 194,93 feet to a 3" steel post at the southeast corner of said 1.720 acres tract for an ell corner of this and said 30.0 acres tract

Thence N. 00 deg, 42 min. 15 sec. W. 255.36 feet to the place of beginning.

(Bearing Basis: Texas State Plane Coordinate System, NAD83, North Central Texas Zone)

SURVEYED ON THE GROUND: AUGUST 25, 2021

PHILIP E. COLVIN, JR., R.P.L.S. NO. 6258 PRICE SURVEYING, LP, FIRM #10034200

Plip 9. W. J.

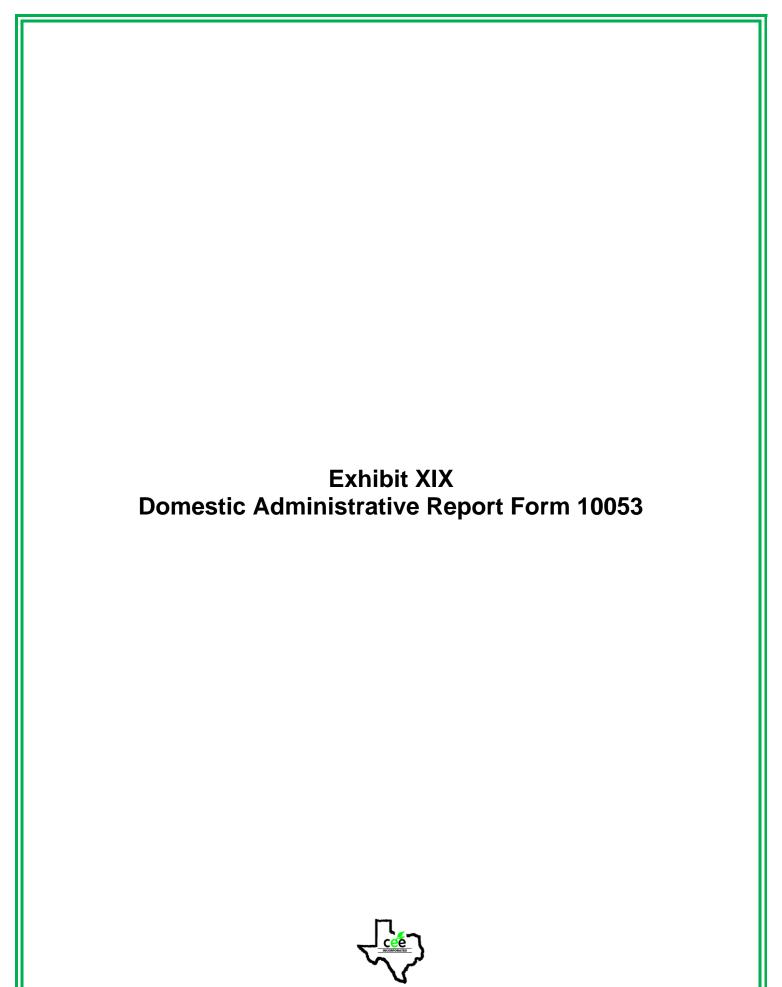
213 S OAK AVE, MINERAL WELLS, TX 76067 JN211211 20720.crd FN210960 940-325-4841

ED AND RECORDED

OFFICIAL PUBLIC RECORDS

11/18/2021 01:26 PM Fee: 38.00 Lila Deakle, County Clerk Parker County, Texas EASEMENT

00060



# TCFQ

APPLICANT: Gilden Blackburn & Tim Carter

## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

# DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

PERMIT NUMBER:		r text.			
Indicate if each of the following	g iten	ns is include	d in your application.		
	Y	N		Y	N
Administrative Report 1.0	$\boxtimes$		Original USGS Map	$\boxtimes$	
Administrative Report 1.1	$\boxtimes$		Affected Landowners Map	$\boxtimes$	
SPIF	$\boxtimes$		Landowner Disk or Labels	$\boxtimes$	
Core Data Form	$\boxtimes$		Buffer Zone Map	$\boxtimes$	
Technical Report 1.0	$\boxtimes$		Flow Diagram	$\boxtimes$	
Technical Report 1.1	$\boxtimes$		Site Drawing	$\boxtimes$	
Worksheet 2.0	$\boxtimes$		Original Photographs	$\boxtimes$	
Worksheet 2.1		$\boxtimes$	Design Calculations	$\boxtimes$	
Worksheet 3.0		$\boxtimes$	Solids Management Plan	$\boxtimes$	
Worksheet 3.1		$\boxtimes$	Water Balance		$\boxtimes$
Worksheet 3.2		$\boxtimes$			
Worksheet 3.3		$\boxtimes$			
Worksheet 4.0					
Worksheet 5.0		$\boxtimes$			
Worksheet 6.0		$\boxtimes$			
Worksheet 7.0		$\boxtimes$			
For TCEQ Use Only					
Segment Number Expiration Date Permit Number			_County _Region		_



#### 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 □			
$\geq 0.05 \text{ but } < 0.10$	MGD \$550.00 ⊠	\$515.00 □			
$\geq$ 0.10 but < 0.25	5 MGD \$850.00 □	\$815.00 □			
$\geq$ 0.25 but < 0.50	MGD \$1,250.00 □	\$1,215.00 □			
$\geq$ 0.50 but <1.0	MGD \$1,650.00 □	\$1,615.00 □			
≥1.0 MGD	\$2,050.00 □	\$2,015.00			
Minor Amendmen	nt (for any flow) \$150.00 □				
Payment Informa	ation:				
Mailed	Check/Money Order Number: 5628				

Check/Money Order Number: <u>5628</u> Check/Money Order Amount: \$550.00

Name Printed on Check: Gil Blackburn

**EPAY** Voucher Number:

Copy of Payment Voucher enclosed? Yes □

Section 2. Type of Application (Instructions Page 29)							
$\boxtimes$	New TPDES		New TLAP				
	Major Amendment <u>with</u> Renewal		Minor Amendment with Renewal				
	Major Amendment <u>without</u> Renewal		Minor Amendment <u>without</u> Renewal				
	Renewal without changes		Minor Modification of permit				
For amendments or modifications, describe the proposed changes:							
For existing permits:							
Peri	Permit Number: WQ00						
EPA I.D. (TPDES only): TX							

Exp	ira	tion	Da	ate:

# 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?

Gilden Blackburn

(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 <a href="http://www15.tceq.texas.gov/crpub/">http://www15.tceq.texas.gov/crpub/</a>

CN:

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: Gilden Blackburn

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

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?

Tim Carter

(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: <a href="http://www15.tceq.texas.gov/crpub/">http://www15.tceq.texas.gov/crpub/</a>

CN:

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: Tim Carter

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

Title: Owner

Provide a brief description of the need for a co-permittee: Both applicants own land

adjacent to each other and have elected to develop both properties. The WWTP is located on property owned by Gilden Blackburn, but there is no available discharge point on that specific property. Therefore, Tim Carter has granted an easement to Gilden Blackburn and has elected to split the costs of the WWTP benefitting both parties.

#### 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: <u>I</u>

## 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.

Α.	Prefix (Mr., Ms., Miss): Mr.		
	First and Last Name: <u>Gilden Blackburn</u>		
	Credential (P.E, P.G., Ph.D., etc.):		
	Title: <u>Owner</u>		
	Organization Name:		
	Mailing Address: 8131 Old Brock Rd.		
	City, State, Zip Code: <u>Brock, TX 76087</u>		
	Phone No.: <u>817–565–5255</u> Ext.:	Fax No.:	
	E-mail Address: <u>blackburng</u> b@aol.com		
	Check one or both: 🛛 Administrative Contact		Technical Contact
В.	Prefix (Mr., Ms., Miss): <u>Mr.</u>		
	First and Last Name: <u>Charles Gillespie</u>		
	Credential (P.E, P.G., Ph.D., etc.):		
	Title: <u>President</u>		
	Organization Name: Consulting Environmental Engineer	s, Inc.	
	Mailing Address: <u>150 N. Harbin Dr. Suite 408</u>		
	City, State, Zip Code: <u>Stephenville, TX 76401</u>		
	Phone No.: <u>254-968-8130</u> Ext.:	Fax No.:	
	E-mail Address: <u>ceeinc@ceeinc.org</u>		
	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: Gilden Blackburn

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

Title: Owner

Organization Name:

Mailing Address: <u>8131 Old Brock Rd.</u> City, State, Zip Code: <u>Brock, TX 76087</u>

Phone No.: 817-565-5255 Ext.: Fax No.:

E-mail Address: blackburngb@aol.com

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

First and Last Name: <u>Tim Carter</u>

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

Title: Owner

Organization Name:

Mailing Address: 1260 Lazy Bend Rd.

City, State, Zip Code: Millsap, TX 76066

Phone No.: 817-613-7951 Ext.: Fax No.:

E-mail Address: tcdozerservice@hotmail.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 TCEO-20029).

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

First and Last Name: Gilden Blackburn

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

Title: Owner

Organization Name:

Mailing Address: <u>8131 Old Brock Rd.</u> City, State, Zip Code: <u>Brock, TX 76087</u>

Phone No.: 817–565–5255 Ext.: Fax No.:

E-mail Address: blackburngb@aol.com

#### 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.

Fax No.:

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

First and Last Name: Gilden Blackburn

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

Title: Owner

Organization Name:

Mailing Address: <u>8131 Old Brock Rd.</u> City, State, Zip Code: <u>Brock, TX 76087</u>

Phone No.: <u>817–565–5255</u> Ext.:

E-mail Address: <u>blackburngb@aol.com</u>

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: Charles Gillespie

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

Title: President

Organization Name: Consulting Environmental Engineers, Inc.

Mailing Address: <u>150 N. Harbin Dr. Suite 408</u> City, State, Zip Code: <u>Stephenville</u>, <u>TX 76401</u>

Phone No.: <u>254–968–8130</u> Ext.: Fax No.:

E-mail Address: <a href="mailto:ceeinc@ceeinc.org">ceeinc@ceeinc.org</a>

# 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): <u>Mr.</u>
	First and Last Name: <u>Gilden Blackburn</u>
	Credential (P.E, P.G., Ph.D., etc.):
	Title: Owner
	Organization Name: Wick here to enter text
	Phone No.: <u>817–565–5255</u> Ext.:
	E-mail: <u>blackburngb@aol.com</u>
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: Weatherford City Hall
	Location within the building:
	Physical Address of Building: <u>303 Palo Pinto St.</u>
	City: <u>Weatherford</u> County: <u>Parker</u>
	Contact Name: <u>Krista Peacock</u>
	Phone No.: <u>817–598–4102</u> Ext.:
E.	Bilingual Notice Requirements:
	This information <b>is required</b> for <b>new, major amendment, and renewal applications</b> . 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 <b>no</b> , publication of an alternative language notice is not required; <b>skip to</b> 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	$\boxtimes$	]	No								
	4.									a bilingu r 19 TAC			ogram l	but the scho	ool
				Yes	$\boxtimes$	]	No								
	5.									4, publiche biling				ive languag	e are
Se	cti	ion 9 Pag			ted I	n	tity ar	nd Pe	rm	nitted S	Site In	forma	tion (	Instruction	ons
Α.		the si this s			tly reg	ula	ated by	TCEQ,	pro	ovide the	e Regula	ated Enti	ty Num	iber (RN) iss	sued
				TCEQ's currently					<u>)://</u>	<u>/www15.</u>	tceq.tex	xas.gov/o	<u>crpub/</u>	to determin	ie if
B.	Na	me o	f p	roject or	site (t	he	name k	known ]	by	the com	munity	where lo	cated):		
	Bro	ock S	<u>pu</u>	<u>r Project</u>											
C.	Ov	vner (	of t	treatmen	t facili	ty:	<u>Gilden</u>	Blackb	ur	n & Tim	<u>Carter</u>				
	Ov	vners	hip	of Facil	ity: □		Public	$\boxtimes$		Private		Both		Federal	
D.	Ov	vner o	of l	and whe	re trea	ıtm	ient fac	ility is	or	will be:					
	Pre	efix (1	Mr.	, Ms., Mi	ss): <u>Mr</u>	•									
	Fir	st an	d I	ast Nam	e: <u>Gild</u>	en	Blackb	<u>urn</u>							
	Ma	iling	Ac	ldress: <u>8</u>	131 Ol	d F	Brock R	<u>d.</u>							
	Cit	ty, Sta	ate,	, Zip Coc	le: <u>Bro</u>	ck,	TX 760	<u> 187</u>							
	Ph	one N	lo:	: <u>817-56</u>	<u>5-525</u>	<u>5</u>		E-ma	ail .	Address:	<u>blackb</u>	urngb@a	aol.com	Ţ	
		reem	ent	or deed	record					he facilit nstructio		r or co–a	pplicar	it, attach a	lease
		Atta	ch	ment: <u>XV</u>	<u>/III</u>										
Е.	Ov	vner (	of e	effluent	dispos	al s	site:								
	Pre	efix (1	Mr.	, Ms., Mi	ss):					t.					
	Fir	st an	d I	ast Nam	e: Clic										
	Ma	iling	Ac	ldress:				r text.							
	Cit	ty, Sta	ate,	, Zip Coc	le: Clic										
	Ph	one N	lo.:	Click he			er text.	E-ma	ail .	Address:	Click l			ct.	
										he facilit nstructio		r or co-a	pplicar	nt, attach a	lease

	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):
	First and Last Name:
	Mailing Address: Makhamanan Mailing Address:
	City, State, Zip Code:
	Phone No.: E-mail Address:
	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
Se	ection 10. TPDES Discharge Information (Instructions Page 34)
	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: Approximately 1,265 ft to the southeast of the intersection of Quanah Hill Rd. and Brock Spur Rd. and approximately 1,516 ft to the northwest of the intersection of Brock Spur Rd. and FM 1189 in Parker County.
В.	Are the point(s) of discharge and the discharge route(s) in the existing permit correct?  \[ \subseteq \text{ Yes} \subseteq \text{ No} \]
	If <b>no</b> , <b>or a new or amendment permit application</b> , 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: The effluent will flow to an unnamed tributary, thence to Price Lake, thence to an unnamed tributary, thence to an unclassified segment of Grindstone Creek, thence to the Brazos River classified segment 1206.
	City nearest the outfall(s): <u>Brock</u>
	County in which the outfalls(s) is/are located: <u>Parker</u>
	Outfall Latitude: <u>32.699228</u> Longitude: <u>-97.954147</u>
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 <b>yes</b> , indicate by a check mark if:
	☐ Authorization granted ☐ Authorization pending

Attachment:  D. For all applications involving an average daily discharge of 5 MGD or more, provided names of all counties located within 100 statute miles downstream of the point discharge.  Section 11. TLAP Disposal Information (Instructions Page 36)  A. For TLAPs, is the location of the effluent disposal site in the existing permit according in the existing permit according in the existing permit application, provide an accurate descript disposal site location:  B. City nearest the disposal site:  C. County in which the disposal site is located:  D. Disposal Site Latitude:  Longitude:  E. For TLAPs, describe the routing of effluent from the treatment facility to the disposal site is located:	at(s) of
names of all counties located within 100 statute miles downstream of the point discharge.  Section 11. TLAP Disposal Information (Instructions Page 36)  A. For TLAPs, is the location of the effluent disposal site in the existing permit acc  Yes No  If no, or a new or amendment permit application, provide an accurate descript disposal site location:  B. City nearest the disposal site:  C. County in which the disposal site is located:  D. Disposal Site Latitude:  Longitude:	at(s) of
A. For TLAPs, is the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the location of the effluent disposal site in the existing permit according to the effluent disposal site in the existing permit according to the effluent disposal site in the existing permit according to the effluent disposal site in the existing permit according to the effluent disposal site in the existing permit according to the effluent disposal site in the existing permit according to the effluent disposal site in the existing permit according to the effluent disposal site in the exist according to the effluent dispo	
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☐ Yes ☐ No  If no, or a new or amendment permit application, provide an accurate descript disposal site location:  B. City nearest the disposal site:  C. County in which the disposal site is located:  D. Disposal Site Latitude:  Longitude:	
If no, or a new or amendment permit application, provide an accurate descript disposal site location:  B. City nearest the disposal site:  C. County in which the disposal site is located:  D. Disposal Site Latitude:  Longitude:	ption of the
disposal site location:  B. City nearest the disposal site:  C. County in which the disposal site is located:  D. Disposal Site Latitude:  Longitude:	ption of the
<ul><li>C. County in which the disposal site is located:</li><li>D. Disposal Site Latitude:</li><li>Longitude:</li></ul>	
<ul><li>C. County in which the disposal site is located:</li><li>D. Disposal Site Latitude:</li><li>Longitude:</li></ul>	
<ul><li>C. County in which the disposal site is located:</li><li>D. Disposal Site Latitude:</li><li>Longitude:</li></ul>	
<b>D.</b> Disposal Site Latitude: Longitude:	
•	
E. For TLAPs, describe the routing of effluent from the treatment facility to the di	er text.
Click here to enter text.	disposal site:
<b>F.</b> For <b>TLAPs</b> , please identify the nearest watercourse to the disposal site to which runoff might flow if not contained:	ch rainfall
Click here to enter text.	
Section 12. Miscellaneous Information (Instructions Page 37)	
Section 12. Miscendificous information inistructions rage 577	
(	
A. Is the facility located on or does the treated effluent cross American Indian Land	.nd?
<u> </u>	nd?
A. Is the facility located on or does the treated effluent cross American Indian Land	

	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
	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 <b>yes</b> , provide the following information:
	Account number: Amount past due:
Е.	Do you owe any penalties to the TCEQ?
	□ Yes ⊠ No
	If <b>yes</b> , please provide the following information:
	Enforcement order number: Amount past due:
Se	ction 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:

## Section 14. Signature Page (Instructions Page 39)

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

Permit Number: New Permit

Applicant: Gilden Blair Blackburn

Certification:

County, Texas

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): Gilden Blair Blackburn
Signatory title: <u>Owner</u>
Signature:
(Use blue ink)
Subscribed and Sworn to before me by the said Gilden Blair Blackburn on this
$\mathcal{L}_{\mathcal{L}}}}}}}}}}$

[SEAL]

lotary Public

## Section 14. Signature Page (Instructions Page 39)

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

Permit Number: New Permit

Applicant: Timothy Edward Carter

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): <u>Timothy Edward Carter</u>

(Use blue ink)

Signatory title: Owner

Subscribed and Sworn to before	me by the	said_Ti	no thy	Edward carter
on this 18	day of		0	<u>,</u> 20 2 Z .
My commission expires on the	25	_day of	may	, 20 <u>25</u> .

Signature: Limothy Edward Contro Date: 5-18-22

Notary Public

County, Texas

[SEAL]

#### **DOMESTIC ADMINISTRATIVE REPORT 1.1**

The following information is required for new and amendment applications.

## Section 1. Affected Landowner Information (Instructions Page 41)

Α.		cate by a check mark that the landowners map or drawing, with scale, includes the owing information, as applicable:
	$\boxtimes$	The applicant's property boundaries
	$\boxtimes$	The facility site boundaries within the applicant's property boundaries
	$\boxtimes$	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: it 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
	$\boxtimes$	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
В.	⊠ addı	Indicate by a check mark that a separate list with the landowners' names and mailing resses cross–referenced to the landowner's map has been provided.
C.	Indi	cate by a check mark in which format the landowners list is submitted:
		☑ Readable/Writeable CD □ Four sets of labels
D.		vide the source of the landowners' names and mailing addresses: <u>Parker CAD Online</u> ractive Map
Е.		equired by $\it Texas\ Water\ Code\ \S\ 5.115$ , is any permanent school fund land affected by this lication?
		□ Yes ⊠ No

	If <b>ye</b> land	s, provide the location and foreseeable impacts and effects this application has on the (s):
	Clic	k here to enter text.
S	acti	on 2. Original Photographs (Instructions Page 44)
Pro	ovide	original ground level photographs. Indicate with checkmarks that the following tion is provided.
	$\boxtimes$	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
	$\boxtimes$	A plot plan or map showing the location and direction of each photograph
S	ectio	on 3. Buffer Zone Map (Instructions Page 44)
Α.	info	er zone map. Provide a buffer zone map on $8.5 \times 11$ -inch paper with all of the following mation. The applicant's property line and the buffer zone line may be distinguished by g 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.
В.		er zone compliance method. Indicate how the buffer zone requirements will be met. ck all that apply.
		☑ Ownership
		Restrictive easement
		Nuisance odor control
		1 Variance
C.		uitable site characteristics. Does the facility comply with the requirements regarding uitable 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:RenewalMajor AmendmentMinor AmendmentNew
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.
<b>Do not refer to a response of any item in the permit application form.</b> 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 ir its entirety including all attachments.
The following applies to all applications:
1. Permittee: <u>Gilden Blackburn</u>
Permit No. WQ00
Address of the project (or a location description that includes street/highway, city/vicinity, and county):
Approximately 1,265 ft to the southeast of the intersection of Quanah Hill Rd. and Brock Spur Rd. and approximately 1,516 ft to the northwest of the intersection of Brock Spur Rd. and FM 1189 in Parker County.

	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: <u>Gilden Blackburn</u>
	Credential (P.E, P.G., Ph.D., etc.):
	Title: Owner
	Mailing Address: 8131 Old Brock Rd.
	City, State, Zip Code: <u>Brock, TX 76087</u>
	Phone No.: 817–565–5255 Ext.: Fax No.:
	E-mail Address: <u>blackburngb@aol.com</u>
2.	List the county in which the facility is located: <u>Parker</u>
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.
	Click here to enter text.
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
	$\square$ 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 o	f vegetation or wetlands
6.	6. List proposed constru of caves, or other kars	ction impact (surface acres to be impacted, depth of excavation, sealing of teatures):
	Click here to enter to	
7.		ırbances, vegetation, and land use:
	Pasture Land	
	THE FOLLOWING ITEMS A	PPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR PERMITS
8.	8. <u>List construction date</u>	s of all buildings and structures on the property:
	HOR HAPA TO AHRAP II	
9.	9. Provide a brief history	of the property, and name of the architect/builder, if known.
	Click here to enter to	

#### WATER QUALITY PERMIT

#### PAYMENT SUBMITTAL FORM

Use this form to submit the Application Fee, if the mailing the payment.

- Complete items 1 through 5 below.
- Staple the check or money order in the space provided at the bottom of this document.
- Do not mail this form with the application form.
- Do not mail this form to the same address as the application.
- Do not submit a copy of the application with this form as it could cause duplicate permit entries.

#### Mail this form and the check or money order to:

BY REGULAR U.S. MAIL

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

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

#### Fee Code: WQP Waste Permit No:

1. Check or Money Order Number: 5628

2. Check or Money Order Amount: \$550.00

3. Date of Check or Money Order: 2/17/2022

4. Name on Check or Money Order: Gil Blackburn

5. APPLICATION INFORMATION

Name of Project or Site: Brock Spur Project

Physical Address of Project or Site: <u>Approximately 1,265 ft to the southeast of the intersection of Quanah Hill Rd. and Brock Spur Rd. and approximately 1,516 ft to the northwest of the intersection of Brock Spur Rd. and FM 1189 in Parker County.</u>

If the check is for more than one application, attach a list which includes the name of each Project or Site (RE) and Physical Address, exactly as provided on the application.

#### Staple Check or Money Order in This Space

#### THIS PAGE INTENTIONALLY LEFT BLANK

#### **ATTACHMENT 1**

#### INDIVIDUAL INFORMATION

## Section 1. Individual Information (Instructions Page 50)

Complete this attachment if the facility applicant or co-applicant is an individual. Make additional copies of this attachment if both are individuals.

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

Full legal name (first, middle, last): Gilden Blair Blackburn

Driver's License or State Identification Number: 01198316

Date of Birth: <u>05/20/1949</u>

Mailing Address: 8131 Old Brock Rd.

City, State, and Zip Code: <u>Brock, TX 76087</u>

Phone Number: <u>817–565–5255</u> Fax Number:

E-mail Address: blackburngb@aol.com

CN: 605845346

#### For Commission Use Only:

**Customer Number:** 

Regulated Entity Number:

Permit Number:

#### **ATTACHMENT 1**

#### INDIVIDUAL INFORMATION

## Section 1. Individual Information (Instructions Page 50)

Complete this attachment if the facility applicant or co-applicant is an individual. Make additional copies of this attachment if both are individuals.

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

Full legal name (first, middle, last): <u>Timothy Edward Carter</u>

Driver's License or State Identification Number: 09740239

Date of Birth: <u>08/14/1963</u>

Mailing Address: 1260 Lazy Bend Rd.

City, State, and Zip Code: Millsap, TX 76066

Phone Number: <u>817–613–7951</u> Fax Number:

E-mail Address: <a href="mailto:tcdozerservice@hotmail.com">tcdozerservice@hotmail.com</a>

CN:

#### For Commission Use Only:

**Customer Number:** 

Regulated Entity Number:

Permit Number:

#### CHECKLIST OF COMMON DEFICIENCIES

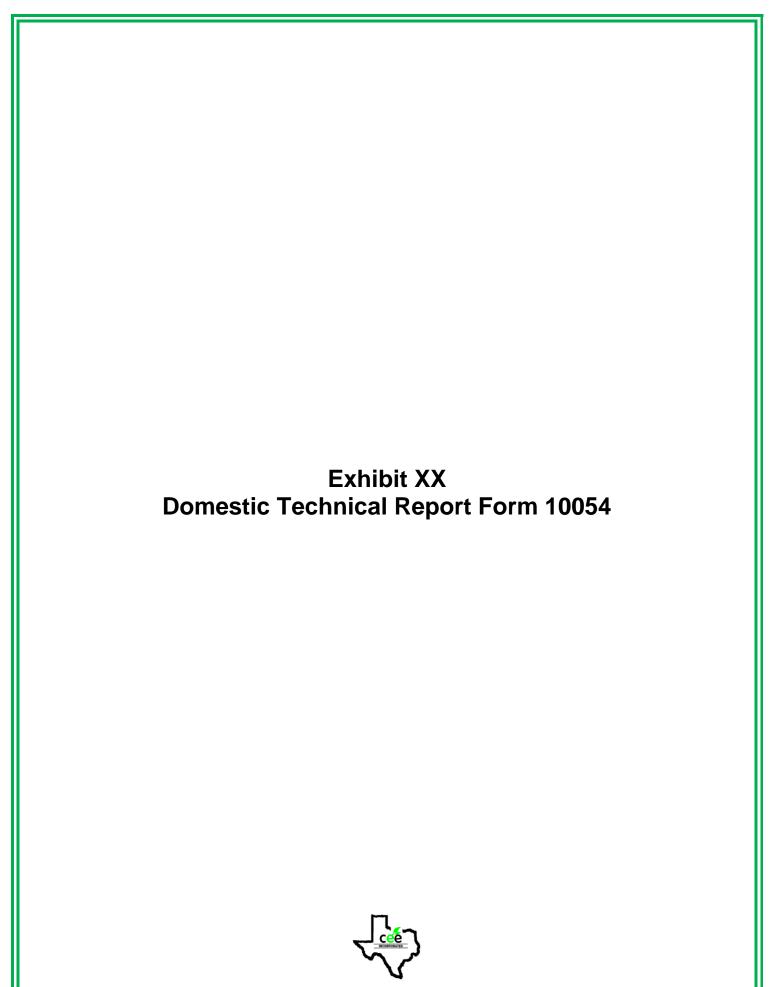
Below is a list of common deficiencies found during the administrative review of domestic wastewater permit applications. To ensure the timely processing of this application, please review the items below and indicate by checking Yes that each item is complete and in accordance applicable rules at 30 TAC Chapters 21, 281, and 305. If an item is not required this application, indicate by checking N/A where appropriate. Please do not submit the application until the items below have been addressed.

	$\boxtimes$	Voc
Correct and Current Industrial Wastewater Permit Application Forms (TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or later.)		Yes
Water Quality Permit Payment Submittal Form (Page 19) (Original payment sent to TCEQ Revenue Section. See instructions for mailing address.)		Yes
7.5 Minute USGS Quadrangle Topographic Map Attached (Full–size map if seeking "New" permit. 8½ x 11 acceptable for Renewals and Amendments)		Yes
Current/Non-Expired, Executed Lease Agreement or Easement Attached $\ oxdots$ N/A		Yes
Landowners Map $\square$ N/A (See instructions for landowner requirements)	$\boxtimes$	Yes

#### Things to Know:

- All the items shown on the map must be labeled.
- The applicant's complete property boundaries must be delineated which includes boundaries of contiguous property owned by the applicant.
- The applicant cannot be its own adjacent landowner. You must identify the landowners immediately adjacent to their property, regardless of how far they are from the actual facility.
- If the applicant's property is adjacent to a road, creek, or stream, the landowners on the opposite side must be identified. Although the properties are not adjacent to applicant's property boundary, they are considered potentially affected landowners. If the adjacent road is a divided highway as identified on the USGS topographic map, the applicant does not have to identify the landowners on the opposite side of the highway.

,				
Landowners Cross Reference List (See instructions for landowner requirements)		N/A	$\boxtimes$	Yes
Landowners Labels or CD–RW attached (See instructions for landowner requirements)		N/A	$\boxtimes$	Yes
Original signature per 30 TAC § 305.44 – Blue Ink Preferred (If signature page is not signed by an elected official or principle executive a copy of signature authority/delegation letter must be attached)	officer	,	$\boxtimes$	Yes





## 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): 0.0375

2-Hr Peak Flow (MGD): <u>0.150</u>

Estimated construction start date: 02/28/2023

Estimated waste disposal start date: <u>03/28/2023</u>

#### **B.** Interim II Phase

Design Flow (MGD):

2-Hr Peak Flow (MGD):

Estimated construction start date:

Estimated waste disposal start date:

#### C. Final Phase

Design Flow (MGD): 0.075

2-Hr Peak Flow (MGD): <u>0.300</u>

Estimated construction start date: 02/28/2024

Estimated waste disposal start date: 03/28/2024

## D. Current operating phase: Proposed

Provide the startup date of the facility: 3/28/2023

## 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:

Interim I – Effluent will flow from source, to an equalization basin, then to a flow splitter. From there, the effluent will flow to Interim I Phase prepackaged activated sludge plant using continuous aeration treatment. Sewage passes through a bar screen to an aeration chamber and then to a clarifier. Sludge is transferred to a holding chamber and supernatant is moved through a chlorine contact chamber to discharge. Final Phase – Effluent will flow from source, to an equalization basin, then to a flow splitter. From there, the effluent will flow to the Final Phase prepackaged activated sludge plant using continuous aeration treatment. Sewage passes through a bar screen to an aeration chamber and then to a clarifier. Sludge is transferred to a holding chamber and supernatant is moved through a chlorine contact chamber to discharge.

Port or pipe diameter at the discharge point, in inches:  $\underline{4}$ 

#### **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.

Treatment Unit Type	Number of	Dimensions (L x W x D)
	Units	
Aeration Basin	2	60' x 11.25' x 9.5'
Digester	2	18' x 11.25' x 9.5'
Clarifier (Round)	2	15' diameter
Chlorine Chamber	2	5' x 11.25' x 9.5'

Table 1.0(1) - Treatment Units

#### C. Process flow diagrams

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

Attachment: X

### 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: XI

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

The facility will provide wastewater services to the proposed Brock Spur development which will consist of the following: 5 restaurants, 1 grocery store, and approximately 75–80 duplexes.

Section 4. Unbuilt Phases	(Instructions	Page 52)
---------------------------	---------------	----------

section 4. Official triases (instructions rage 32)
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 <i>Other Requirements</i> or <i>Special Provisions</i> of the permit.
A. Summary transmittal
Have plans and specifications been approved for the existing facilities and each proposed phase? Yes $\square$ No $\boxtimes$
If yes, provide the date(s) of approval for each phase:
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.

The proposed WWTP will be located at least 150' inside the property boundary and as shown in Exhibit VI (Photographs), there are no residential structures located within 150' of the proposed plant location. The area where the plant will be located at is undeveloped pasture land.

#### 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 ⊠ <u>New Permit</u>
, , .	information below on the status of any actions taken to meet of an Other Requirement or Special Provision.
lick 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
<b>If No</b> , 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.
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 □ N	No ⊠
<b>If no to both of</b> Received.	<b>the above</b> , then skip to Subsection F, Other Wastes
2. MSGP cove	erage
disposal current (MSGP), TXR050	er runoff from the WWTP and dedicated lands for sewage tly permitted under the TPDES Multi–Sector General Permit 0000?
Other Wastes Re	
TXR05	or TXRNE
If no, do you int	tend to seek coverage under TXR050000?
Yes 🗆 💮 1	No □
3. Conditiona	al exclusion
permitting based TXR050000 (Mu	o you intend to apply for a conditional exclusion from d TXR050000 (Multi Sector General Permit) Part II B.2 or llti Sector General Permit) Part V, Sector T 3(b)?
If yes, please ex	xplain below then proceed to Subsection F, Other Wastes
Received:	
Click here to e	ater text
4. Existing co	overage in individual permit
TPDES or TLAP 1	nter discharge currently permitted through this individual permit? No 🗆
	a description of stormwater runoff management practices at authorized in the wastewater permit then skip to Subsection Received.

Click here to e	
5. Zero storr	nwater discharge
other means?	to have no discharge of stormwater via use of evaporation or No $\square$
If yes, explain	pelow then skip to Subsection F. Other Wastes Received.

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 storm	water discharges	associated	with you
treatment plant un	der 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 $\square$ No $\boxtimes$
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

TCEQ-10054 (06/01/2017) Domestic Wastewater Permit Application, Technical Reports

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 □ Νο □ **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 BOD₅ concentration of the septic waste, and the design BOD<sub>5</sub> concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action. 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.

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

Is the facility in operation?

Chlorine Residual, mg/l

Entercocci (CFU/100ml)

Electrical Conductivity,

saltwater

µmohs/cm, †

*E.coli* (CFU/100ml) freshwater

Total Dissolved Solids, mg/l

Yes □ No ⊠					
If no, this section is not appli	icable. Pro	ceed to S	Section 8.		
<b>If yes</b> , provide effluent analy <i>treatment facilities</i> complete discharging filter backwash w	Table 1.0	(2). <b>Wate</b>	er treatmen		
Note: The sample date must be		•			
Table 1.0(2) – Pollutar	<u>it <i>Analysis</i></u> Average	s for Was   Max	stewater Tr No. of	<i>reatment .</i>   Sample	<i>Facilities</i> Sample
Pollutant	Conc.	Conc.	Samples	Type	Date/Time
CBOD <sub>5</sub> , 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					

TCEQ-10054 (06/01/2017) Domestic Wastewater Permit Application, Technical Reports

Pollutant	Average	Max	No. of	Sample	Sample
Tonutant	Conc.	Conc.	Samples	Type	Date/Time
Oil & Grease, mg/l					
Alkalinity (CaCO <sub>3</sub> )*, mg/l					

<sup>\*</sup>TPDES permits only

†TLAP permits only

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

Pollutant	Average	Max	No. of	Sample	Sample
Pollutalit	Conc.	Conc.	Samples	Type	Date/Time
Total Suspended Solids, mg/l					
Total Dissolved Solids, mg/l					
pH, standard units					
Fluoride, mg/l					
Aluminum, mg/l					
Alkalinity (CaCO <sub>3</sub> ), mg/l					

## Section 8. Facility Operator (Instructions Page 60)

Facility Operator Name:	<u>Licensed</u>	<u>Operator</u>	<u>will be</u>	<u>determined</u>	<u>upon</u>	<u>permit</u>
approval.						

Facility Operator's License Classification and Level:	

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

$\square$ Land application for beneficial use authorized in the wastewater permit
☐ Permitted sludge processing facility
$\square$ 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.
a other.
B. Sludge disposal site
Disposal site name: <u>To be determined upon permit approval.</u>
TCEQ permit or registration number:
County where disposal site is located:
C. Sludge transportation method
Method of transportation (truck, train, pipe, other): <u>To be determined upon</u>
permit approval.
Name of the hauler:
Hauler registration number:
Sludge is transported as a:
Liquid $\square$ semi-liquid $\boxtimes$ semi-solid $\square$ solid $\square$

Section 10. Permit Authorization for Sewage Sludge Disposal

## (Instructions Page 60)

#### A. Beneficial use authorization

or land app	lication of sewage
rization to	land apply sewage
	ial Land Use of rmit application (see
or any of th	ne following sludge
Yes □	No 🗵
mestic Wa	is requesting to stewater Permit No. 10056)
Instructio	ons Page 61)
ַ	rization to  For Benefic I to this pe  Or any of the  Yes   Yes   Yes   Yes   applicant  mestic Was  CEQ Form

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: Mick have 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:
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:
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:
Total Kjeldahl Nitrogen, mg/kg:
Total Nitrogen (=nitrate nitrogen + TKN), mg/kg:
Phosphorus, mg/kg:
Potassium, mg/kg:

pH, standard units:
Ammonia Nitrogen mg/kg:
Arsenic: Mak here to enter text
Cadmium: Hick 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: Mak here to enter text
Nickel: Click here to enter text
Selenium: Click here to enter text
Zinc: Click here to enter text
Total PCBs: High hore to enter text.
Provide the following information:  Volume and frequency of sludge to the lagoon(s):
Total dry tons stored in the lagoons(s) per 365–day period:
Total dry tons stored in the lagoons(s) over the life of the unit:
C. Liner information
Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of $1x10^{-7}$ cm/sec? Yes $\square$ No $\square$
If yes, describe the liner below. Please note that a liner is required.

## 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.
<ul> <li>Plan view and cross-section of the sludge lagoon(s)</li> </ul>
Attachment: Click here to enter text
• Copy of the closure plan
Attachment: Click here to enter text.
<ul> <li>Copy of deed recordation for the site</li> </ul>
Attachment: Hick here to enter text
<ul> <li>Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons</li> </ul>
Attachment:
• Description of the method of controlling infiltration of groundwater and surface water from entering the site
Attachment: Make to the text of the text o
<ul> <li>Procedures to prevent the occurrence of nuisance conditions</li> </ul>
Attachment:
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 $\square$ No $\square$
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: Wick 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 ⊠
<b>If yes</b> , 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 $\square$ No $\boxtimes$
Is the permittee required to meet an implementation schedule for compliance or enforcement?  Yes □ No ☒
<b>If yes</b> 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 $\square$ No $\boxtimes$

## C. Details about wastes received

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

Attachment:

## 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:
  - o 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: Gilden Blair Blackburn

Title: Owner

D. Griere

Date:

TCEQ-10054 (06/01/2017)

Domestic Wastewater Permit Application. Technical Reports

Page 20 of 81

#### 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: Timothy Edward Carter

Title: Owner

Signature: Simothy Edward Carton Date: 5-25-22

#### 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 proposed 94–acre Brock Spur development will serve 5 restaurants, 1 grocery store, and approximately 75–80 duplexes. Assuming full capacity of the development, an estimated daily wastewater flow rate of 75,000 GPD was calculated. The property does not have access to a municipal treatment system and septic systems are not an ecologically sound alternative. Construction on the development is proposed to begin in February of 2023. The estimated construction date on the WWTP is 02/28/2023 and the estimated waste disposal start date is 02/31/2023. The development will also not be subdivided into individual lots and an estimate of 15–20 duplexes will be constructed each month while the restaurants and grocery store will be constructed within approximately 8–10 months. Lastly, the population growth for the area will allow for the facility to be constructed and operated in the next 5 years.

#### 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:
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:

## 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: Clock 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: XII

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

Attachment: XII

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:

ction 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):
enter text.
Average Influent Organic Strength or BOD <sub>5</sub> Concentration in mg/l:
here to enter text.
Average Influent Loading (lbs/day = total average flow X average BOD <sub>5</sub>
conc. X 8.34):
Provide the source of the average organic strength or BOD <sub>5</sub> 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 <sub>5</sub> Concentration (mg/l)	
Municipality			
Subdivision	.020	300	
Trailer park - transient			

Source	Total Average Flow (MGD)	Influent BOD <sub>5</sub> Concentration (mg/l)
Mobile home park		
School with cafeteria and showers		
School with cafeteria, no showers		
Recreational park, overnight use		
Recreational park, day use		
Office building or factory		
Motel		
Restaurant	0.048	1000
Hospital		
Nursing home		
Other	0.007	300
TOTAL FLOW from all sources	.075	
AVERAGE BOD₅ from all sources		800

# 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:  $\underline{20}$ 

Total Suspended Solids, mg/l: <u>20</u>

Ammonia Nitrogen, mg/l: N/A

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: 2

Other: N/A

#### B. Interim II Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 20

Total Suspended Solids, mg/l: <u>20</u>

Ammonia Nitrogen, mg/l: N/A

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: 2

Other: N/A

#### C. Final Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 20

Total Suspended Solids, mg/l: 20

Ammonia Nitrogen, mg/l: <u>N/A</u>

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: <u>2</u>

Other: N/A

#### D. Disinfection Method

Identify the proposed method of disinfection.

$\boxtimes$	Chlorine: $\underline{1}$ mg/l after $\underline{20}$ minutes detention time at peak flow
	Dechlorination process:

Ultraviolet Light:	seconds contact	time at peak
flow		

□ Other:		
----------	--	--

## 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: XIII

Section	5.	<b>Facility</b>	Site	(Instruct	ions	Page	68)
---------	----	-----------------	------	-----------	------	------	-----

etion 3.1 dentry 51te (instructions 1 age 50)
A. 100-year floodplain
Will the proposed facilities be located <u>above</u> the 100-year frequency flood level?
Yes ⊠ No □
<b>If no</b> , 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 No. 48367C0375E
For a new or expansion of a facility, will a wetland or part of a wetland be filled?
Yes □ No ⊠
<b>If yes</b> , has the applicant applied for a US Corps of Engineers 404 Dredge and Fill Permit?
Yes □ No □
If yes, provide the permit number:
<b>If no,</b> provide the approximate date you anticipate submitting your application to the Corps:
B. Wind rose
Attach a wind rose. <b>Attachment</b> : <u>XV</u>

## 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:

#### 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:

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

Attach a solids management plan to the application.

Attachment: XV

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:
Distance and direction to the intake:
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:
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.
ection 3. Classified Segments (Instructions Page 73)
the discharge directly into (or within 300 feet of) a classified segment?
Yes □ No ⊠
<b>yes</b> , this Worksheet is complete.
<b>no</b> , complete Sections 4 and 5 of this Worksheet.
ection 4. Description of Immediate Receiving Waters
(Instructions Page 75)
Name of the immediate receiving waters: <u>Grindstone Creek</u>
A. Receiving water type
Identify the appropriate description of the receiving waters.
⊠ Stream
☐ Freshwater Swamp or Marsh
Treshwater Swamp of Marsh
□ Lake or Pond
Surface area, in acres:
Average depth of the entire water body, in feet:
(CNT)
Average depth of water body within a 500–foot radius of discharge
point, in feet:
☐ Man-made Channel or Ditch

Is

If

If

□ Open Bay
□ Tidal Stream, Bayou, or Marsh
□ Other, specify: □ Other
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 <i>upstream</i> of the discharge. For new discharges, characterize the area <i>downstream</i> 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.  Grindstone Creek.
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 $\square$ No $\boxtimes$
If yes, discuss how.

-					
Click l	nere to enter text				
E. Normal dry weather characteristics  Provide general observations of the vector body during normal dry weather					
Provide general observations of the water body during normal dry weather conditions.					
The w	ater body is dry.				
	nd time of observation: $9/23$ , water body influenced by s  Yes $\square$ No $\boxtimes$		<u>1 3:00 PM</u> water runoff during observations?		
F	Page 74)	stics	of the Waterbody (Instructions		
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		Urban runoff		
	Upstream discharges	$\boxtimes$	Agricultural runoff		
tex	Septic tanks		Other(s), specify		
B. V	Vaterbody uses				
Observ	ed or evidences of the follow	ing u	ises. Check all that apply.		
$\boxtimes$	Livestock watering		Contact recreation		
	Irrigation withdrawal		Non-contact recreation		
	Fishing		Navigation		

	Domestic water supply		Industrial water supply			
	Park activities		Other(s), specify			
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					
$\boxtimes$	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					