WINSTEAD

Austin | Charlotte | Dallas | Fort Worth | Houston | New York | San Antonio | The Woodlands

2728 N. Harwood Street
Suite 500
Dallas, TX 75201

214.745.5400 OFFICE
214.745.5390 FAX
winstead.com

Scott Eidman
direct dial: 214.745.5484
email: seidman@winstead.com

April 29, 2024

Ms. Mehgan Taack
Office of the Chief Clerk (MC 105)
Texas Commission on Environmental Quality
P.O. Box 13087
Austin, Texas 78711-3087

Re: Application by Camden Parc MUD of Rockwall County for new TPDES Permit No. WQ0016036001; TCEQ Docket No. 2023-0954-MWD

Pursuant to 30 TAC § 80.118(d), enclosed herewith are two duplicates of the original application filed by Camden Parc MUD of Rockwall County with Bates numbering for inclusion in the administrative record. I appreciate your attention to this request. Please do not hesitate to contact me if you have questions.

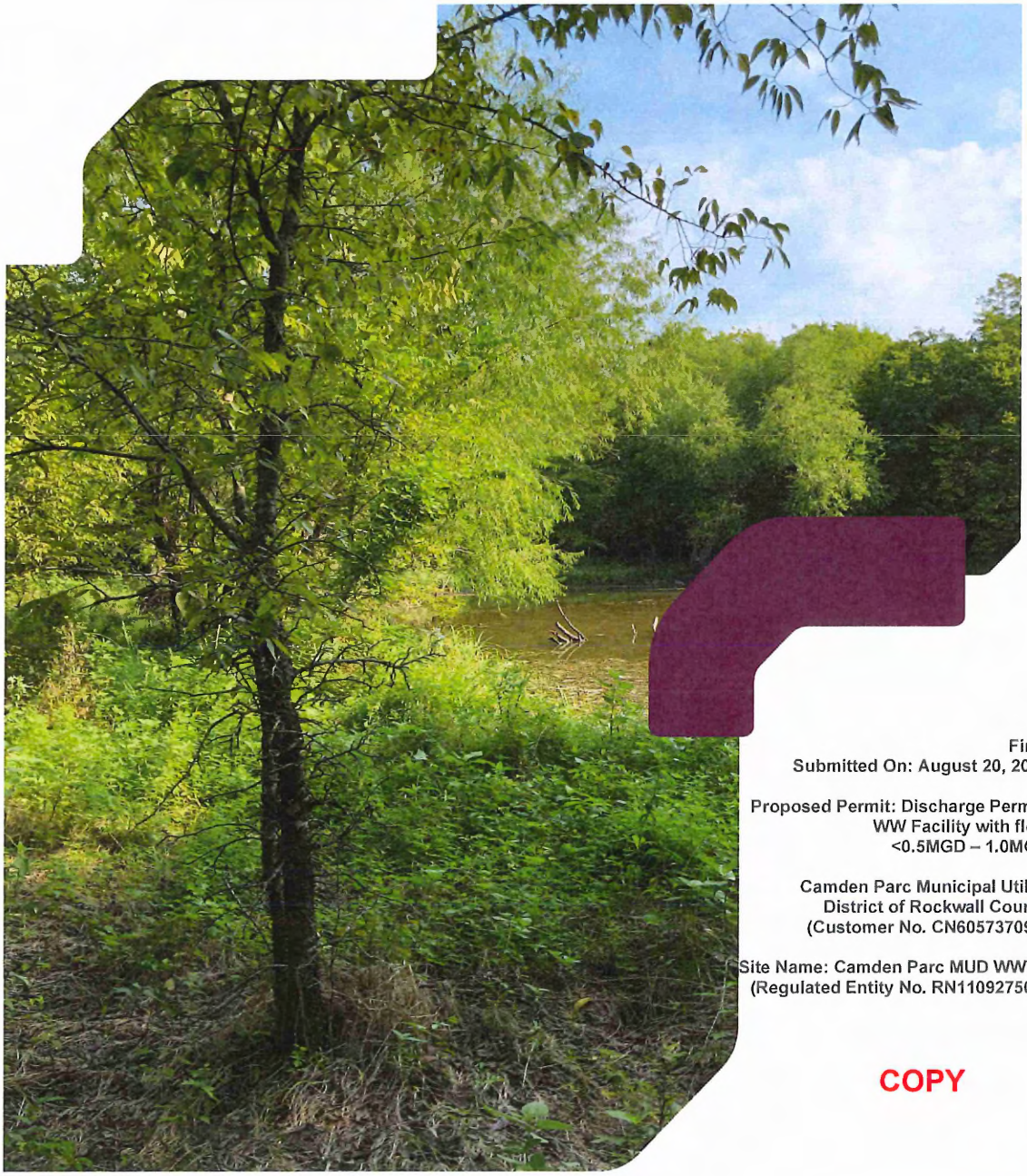
Sincerely,

Scott W. Eidman

Enclosure

CAMDEN PARC MUNICIPAL UTILITY DISTRICT OF ROCKWALL COUNTY

TCEQ Discharge Permit Application



Final
Submitted On: August 20, 2021

Proposed Permit: Discharge Permit: WW Facility with flow <0.5MGD – 1.0MGD

Camden Parc Municipal Utility District of Rockwall County (Customer No. CN605737097)

Site Name: Camden Parc MUD WWTP (Regulated Entity No. RN110927506)

COPY

rpsgroup.com

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT:

PERMIT NUMBER:

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

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

For TCEQ Use Only

Segment Number _____ County _____
Expiration Date _____ Region _____
Permit Number _____

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

APPLICATION FOR A DOMESTIC WASTEWATER PERMIT ADMINISTRATIVE REPORT 1.0

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

Section 1. Application Fees (Instructions Page 29)

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

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

Minor Amendment (for any flow) $150.00 ☐

Payment Information:

Mailed Check/Money Order Number:

Check/Money Order Amount:

Name Printed on Check:

EPAY Voucher Number:

Copy of Payment Voucher enclosed? Yes ☐

Section 2. Type of Application (Instructions Page 29)

☒ New TPDES

☐ New TLAP

☐ Major Amendment *with* Renewal

☐ Minor Amendment *with* Renewal

☐ Major Amendment *without* Renewal

☐ Minor Amendment *without* Renewal

☐ Renewal without changes

☐ Minor Modification of permit

For amendments or modifications, describe the proposed changes:

For existing permits:

Permit Number: WQ00

EPA I.D. (TPDES only): TX

Expiration Date:

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?

Camden Parc Municipal Utility District of Rockwall County

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

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

CN: 605737097

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: Tom Kailey

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

Title: President, Board of Directors

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?

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

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

CN:

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):

First and Last Name:

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

Title:

Provide a brief description of the need for a co-permittee:

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: 1

Section 4. Application Contact Information (Instructions Page 30)

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

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

First and Last Name: MT Akavizadeh

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

Title: Manager

Organization Name: Venture Anna 48, LLC

Mailing Address: 12801 N Central Expy, Suite 1650

City, State, Zip Code: Dallas, TX 75243

Phone No.: (214) 972-3870 Ext.: Fax No.:

E-mail Address: tedzadeh@mtaco.com

Check one or both: ☒ Administrative Contact ☐ Technical Contact

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

First and Last Name: Kyle Hogue

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

Title: Water Team Lead

Organization Name: RPS

Mailing Address: 5810 Tennyson Pkwy, Suite 280

City, State, Zip Code: Plano, TX 75024

Phone No.: (972) 202-4242 Ext.: Fax No.:

E-mail Address: kyle.hogue@rpsgroup.com

Check one or both: ☐ Administrative Contact ☒ Technical Contact

Section 5. Permit Contact Information (Instructions Page 30)

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

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

First and Last Name: MT Akavizadeh

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

Title: Manager

Organization Name: Venture Anna 48, LLC

Mailing Address: 12801 N Central Expy, Suite 1650

City, State, Zip Code: Dallas, TX 75243

Phone No.: (214) 972-3870 Ext.: Fax No.:

E-mail Address: tedzadeh@mtaco.com

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

First and Last Name: Kyle Hogue

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

Title: Water Team Lead

Organization Name: RPS

Mailing Address: 5810 Tennyson Pkwy, Suite 280

City, State, Zip Code: Plano, TX 75024

Phone No.: (972) 202-4242 Ext.: Fax No.:

E-mail Address: kyle.hogue@rpsgroup.com

Section 6. Billing Information (Instructions Page 30)

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

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

First and Last Name: MT Akavizadeh

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

Title: Manager

Organization Name: Venture Anna 48, LLC

Mailing Address: 12801 N Central Expy, Suite 1650

City, State, Zip Code: Dallas, TX 75243

Phone No.: (214) 972-3870 Ext.: Fax No.:

E-mail Address: tedzadeh@mtaco.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.

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

First and Last Name: MT Akavizadeh

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

Title: Manager

Organization Name: Venture Anna 48, LLC

Mailing Address: 12801 N Central Expy, Suite 1650

City, State, Zip Code: Dallas, TX 75243

Phone No.: (214) 972-3870 Ext.: Fax No.:

E-mail Address: tedzadeh@mtaco.com

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: MT Akavizadeh

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

Title: Manager

Organization Name: Venture Anna 48, LLC

Mailing Address: 12801 N Central Expy, Suite 1650

City, State, Zip Code: Dallas, TX 75243

Phone No.: (214) 972-3870 Ext.: Fax No.:

E-mail Address: tedzadeh@mtaco.com

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

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

☒ E-mail Address

☐ Fax

☐ Regular Mail

C. Contact person to be listed in the Notices

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

First and Last Name: MT Akavizadeh

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

Title: Manager

Organization Name: Venture Anna 48, LLC

Phone No.: (214) 972-3870 Ext.:

E-mail: tedzadeh@mtaco.com

D. Public Viewing Information

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

Public building name: Royse City City Hall

Location within the building: Notice board outside and inside the building by the front door

Physical Address of Building: 305 N Arch St, Royse City, TX 75189

City: Royse City County: Rockwall

Contact Name: Administration Front Desk

Phone No.: (972) 636-2250 Ext.:

E. Bilingual Notice Requirements:

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

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

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

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

   ☐ Yes ☒ No

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

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

   ☐ Yes ☐ No

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

   ☐ Yes ☐ No

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

   ☐ Yes ☐ No

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

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

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. **RN**110927506

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

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

Rockwall County

C. Owner of treatment facility: Camden Parc Municipal Utility District of Rockwall County

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

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

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

First and Last Name: Camden Parc Municipal Utility District of Rockwall County

Mailing Address: 12801 N Central Expy, Suite 1650

City, State, Zip Code: Dallas, TX 75243

Phone No.: (214) 972-3870 E-mail Address: tedzadeh@mtaco.com

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: N/A

E. Owner of effluent disposal site:

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

First and Last Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A E-mail Address: N/A

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: N/A

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): N/A

First and Last Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A E-mail Address: N/A

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: N/A

Section 10. TPDES Discharge Information (Instructions Page 34)

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

☐ Yes ☒ No

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

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

☐ Yes ☒ No

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

The point of discharge will be Parker Creek at Pioneer Rd., 7,700 ft South of FM 407 and 5,500 ft East of Hwy 287. The discharge route is from the plant site 650 ft to Parker Creek; thence to the South Fork of the Sabine River Segment No. 0507G; thence to Lake Tawakoni Segment 0507.

City nearest the outfall(s): Royse City

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

Outfall Latitude: 32°55'13.23"N Longitude: - 96°19'36.30"W

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

Attachment:

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

N/A

Section 11. TLAP Disposal Information (Instructions Page 36)

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

☐ Yes ☐ No

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

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:

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

Section 12. Miscellaneous Information (Instructions Page 37)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

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

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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

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

Account number: Amount past due:

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

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

Enforcement order number: Amount past due:

Section 13. Attachments (Instructions Page 38)

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

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

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

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

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

☐ Attachment 1 for Individuals as co-applicants

☐ Other Attachments. Please specify: For Application for a Domestic Wastewater Permit Administrative Report 1.0: Attachment 1: Core Data Form; Attachment 2: USGS Topographic Map; For Domestic Administrative Report 1.1: Attachment 3 Affected Landowner Information; Attachment 4: Original Photographs; Attachment 5: Buffer Zone Map; Attachment 6: 7.5 Minute Quadrangle Map for Supplemental Permit Information (SPIF); For Domestic Technical Report 1.0: Attachment 7: Process Flow Diagram; Attachment 8: Site Layout; For Domestic Technical Report 1.1: Attachment 9: Nearby WWTPs; Attachment 10: Design Calculations; Attachment 11: Wind Rose; Attachment 12: Sewage Sludge Solids Management Plan; Attachment 13: Sludge Agreement

Section 14. Signature Page (Instructions Page 39)

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

Permit Number: N/A

Applicant: Camden Parc Municipal Utility District

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): Tom Kailey

Signatory title: President, Board of Directors

Signature: Tom Kailey (Use blue ink) Date: 11/11/21

Subscribed and Sworn to before me by the said Thomas Kailey

on this 17th day of November, 2021.

My commission expires on the 19th day of September, 2024.

Richard Lee Allen Jr
Notary Public

RICHARD LEE ALLEN JR
Notary Public
STATE OF TEXAS
ID# [illegible]-3
My Comm. Exp. Sept. 19, 2024

(SEAL)

Collin
County, Texas

DOMESTIC ADMINISTRATIVE REPORT 1.1

The following information is required for new and amendment applications.

Section 1. Affected Landowner Information (Instructions Page 41)

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

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

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

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

☐ Readable/Writeable CD ☒ Four sets of labels

D. Provide the source of the landowners' names and mailing addresses: Rockwall County Appraisal District

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

☐ Yes ☒ No

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

Section 2. Original Photographs (Instructions Page 44)

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

- ☒ At least one original photograph of the new or expanded treatment unit location
- ☒ At least two photographs of the existing/proposed point of discharge and as much area downstream (photo 1) and upstream (photo 2) as can be captured. If the discharge is to an open water body (e.g., lake, bay), the point of discharge should be in the right or left edge of each photograph showing the open water and with as much area on each respective side of the discharge as can be captured.
- ☒ At least one photograph of the existing/proposed effluent disposal site
- ☒ A plot plan or map showing the location and direction of each photograph

Section 3. Buffer Zone Map (Instructions Page 44)

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

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

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

- ☒ Ownership
- ☐ Restrictive easement
- ☐ Nuisance odor control
- ☐ Variance

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

☒ Yes ☐ No

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: _____Renewal _____Major Amendment ____Minor Amendment _____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

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

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

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

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

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

The following applies to all applications:

1. Permittee: Camden Parc Municipal Utility District of Rockwall County

   Permit No. WQ00 N/A EPA ID No. TX

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

   Approximately 4,500 feet northeast of the intersection of FM 548 and N Munson Road in Rockwall County, Texas.

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: MT Akavizadeh

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

Title: Manager

Mailing Address: 12801 N Central Expy, Suite 1650

City, State, Zip Code: Dallas, TX 75243

Phone No.: (214) 972-3870 Ext.: Fax No.:

E-mail Address: tedzadeh@mtaco.com

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

N/A

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.

The point of discharge will be Parker Creek at Pioneer Rd., 7,700 ft South of FM 407 and 5,500 ft East of Hwy 287. The discharge route is from the plant site 650 ft to Parker Creek; thence to the South Fork of the Sabine River Segment No. 0507G; thence to Lake Tawakoni Segment 0507.

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

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

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

☐ Proposed access roads, utility lines, construction easements

☐ Visual effects that could damage or detract from a historic property's integrity

☒ Vibration effects during construction or as a result of project design

☒ Additional phases of development that are planned for the future

☐ Sealing caves, fractures, sinkholes, other karst features

☒ Disturbance of vegetation or wetlands

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

Approximately 3 acres will be impacted by the construction of this project. The depth of excavation ranges between 6 inches and 16 ft.

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

The existing trees and brush will need to be cleared in order for the site to be filled and excavated to achieve the intended final grade.

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

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

Construction on the wastewater treatment plant is scheduled to begin in June 2022 and conclude in.February 2023.

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

There are currently trees and brush at this site and no buildings.

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:
2. Check or Money Order Amount: $ 1,650.00
3. Date of Check or Money Order:
4. Name on Check or Money Order:
5. APPLICATION INFORMATION

   Name of Project or Site: Camden Parc Municipal Utility District WWTP

   Physical Address of Project or Site: 32.920089, -96.327285

   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):

Full legal name (first, middle, last):

Driver's License or State Identification Number:

Date of Birth:

Mailing Address:

City, State, and Zip Code:

Phone Number: Fax Number:

E-mail Address:

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.

Core Data Form (TCEQ Form No. 10400) ☐ Yes
(Required for all applications types. Must be completed in its entirety and signed. Note: Form may be signed by applicant representative.)

Correct and Current Industrial Wastewater Permit Application Forms ☐ Yes
(TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or later.)

Water Quality Permit Payment Submittal Form (Page 19) ☐ Yes
(Original payment sent to TCEQ Revenue Section. See instructions for mailing address.)

7.5 Minute USGS Quadrangle Topographic Map Attached ☒ Yes
(Full-size map if seeking "New" permit. 8 ½ x 11 acceptable for Renewals and Amendments)

Current/Non-Expired, Executed Lease Agreement or Easement Attached ☐ N/A ☐ Yes

Landowners Map ☐ N/A ☐ Yes
(See instructions for landowner requirements)

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 ☐ N/A ☒ Yes
(See instructions for landowner requirements)

Landowners Labels or CD-RW attached ☐ N/A ☒ Yes
(See instructions for landowner requirements)

Original signature per 30 TAC § 305.44 – Blue Ink Preferred ☐ Yes
(If signature page is not signed by an elected official or principle executive officer, a copy of signature authority/delegation letter must be attached)

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): 0.55

2-Hr Peak Flow (MGD): 2.20

Estimated construction start date: June 2022

Estimated waste disposal start date: February 2023

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):

2-Hr Peak Flow (MGD):

Estimated construction start date:

Estimated waste disposal start date:

D. Current operating phase: N/A

Provide the startup date of the facility:

Section 2. Treatment Process (Instructions Page 51)

A. Treatment process description

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

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

The proposed treatment plant will be a field-erected wastewater treatment plant with a design capacity of 0.55 MGD and is to be constructed in one phase. It will consist of a manual bar screen, splitter box to two modular units in parallel, each consisting of an aeration basin, an aerobic digester and a secondary clarifier. The supernatant from each clarifier then flows to a common chlorine contact chamber, and a sodium hypochlorite feed system. Aeration for the system will be provided by three 1,658 cfm blowers with one serving as a redundant blower. The sludge will be hauled off to a different processing facility.

Port or pipe diameter at the discharge point, in inches: 14

B. Treatment Units

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

Table 1.0(1) - Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Aeration Basin	2	Vol = 16,382 CF; Side Water Depth (SWD) = 15'
Aerobic Digesters	2	Vol = 11,486 CF; SWD = 15'
Secondary Clarifier	2	35' Diameter; SWD = 13'
Chlorine Contact Chamber	1	L = 34'; W = 12'; SWD = 10'; Vol = 4085 CF

C. Process flow diagrams

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

construction.

Attachment: 7

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: 8

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

The treatment facility will serve a future residential area to be Camden Homes of Rockwall that will be located east of FM 548 between Greenshaw Road on the north side and N Munson Road on the south side, in Royse City, Texas, in Rockwall County.

Section 4. Unbuilt Phases (Instructions Page 52)

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

Yes ☐ No ☒

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

Yes ☐ No ☐

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

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.

Section 6. Permit Specific Requirements (Instructions Page 53)

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

A. Summary transmittal

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

Yes ☐ No ☒

If yes, provide the date(s) of approval for each phase:

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.

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 buffer zone requirements will be met by ownership as the applicant owns the area surrounding the treatment facility and will meet buffer zone requirements.

C. Other actions required by the current permit

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

Yes ☐ No ☒

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

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.

3. Grit disposal

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

Yes ☐ No ☐

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

Describe the method of grit disposal.

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.

E. Stormwater management

1. Applicability

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

Yes ☐ No ☒

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

Yes ☐ No ☒

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

2. MSGP coverage

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

Yes ☐ No ☐

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

TXR05 or TXRNE

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

Yes ☐ No ☐

3. Conditional exclusion

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

Yes ☐ No ☐

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

4. Existing coverage in individual permit

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

Yes ☐ No ☐

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

5. Zero stormwater discharge

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

Yes ☐ No ☐

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

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

6. Request for coverage in individual permit

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

Yes ☐ No ☐

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

the treatment plant headworks and indirectly discharge it to water in the state.

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

F. Discharges to the Lake Houston Watershed

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

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

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

1. Acceptance of sludge from other WWTPs

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

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

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

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

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

Yes ☐ No ☒

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

Yes ☐ No ☐

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

Yes ☐ No ☐

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

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?

Yes ☐ No ☒

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

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Entercocci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity, µmohs/cm, †					
Oil & Grease, mg/l					
Alkalinity ($CaCO_3$)*, mg/l					

*TPDES permits only

†TLAP permits only

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

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

Section 8. Facility Operator (Instructions Page 60)

Facility Operator Name: To be determined - currently under negotiation.

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
- ☐ Land application for beneficial use authorized in the wastewater permit
- ☐ Permitted sludge processing facility
- ☐ Marketing and distribution as authorized in the wastewater permit
- ☐ Composting as authorized in the wastewater permit
- ☐ Permitted surface disposal site (sludge monofill)
- ☐ Surface disposal site (sludge monofill) authorized in the wastewater permit
- ☒ Transported to another permitted wastewater treatment plant or permitted sludge processing facility. If you selected this method, a written statement or contractual agreement from the wastewater treatment plant or permitted sludge processing facility accepting the sludge must be included with this application.
- ☐ Other:

B. Sludge disposal site

Disposal site name: City of Italy WWTP - pending negotiations.

TCEQ permit or registration number: TX123056

County where disposal site is located: Ellis

C. Sludge transportation method

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

Name of the hauler: Bowman Environmental Enterprises, LLC - pending

negotiations.

Hauler registration number: Sludge Transporter Number: 2010; TCEQ Registration Number: XLG TR 23623

Sludge is transported as a:

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

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

A. Beneficial use authorization

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

Yes ☐ No ☒

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

Yes ☐ No ☐

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

Yes ☐ No ☐

B. Sludge processing authorization

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

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

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

Yes ☐ No ☐

Section 11. Sewage Sludge Lagoons (Instructions Page 61)

Does this facility include sewage sludge lagoons?

Yes ☐ No ☒

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

A. Location information

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

- Original General Highway (County) Map:

  Attachment:

- USDA Natural Resources Conservation Service Soil Map:

  Attachment:

- Federal Emergency Management Map:

  Attachment:

- Site map:

  Attachment:

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:

Cadmium:

Chromium:

Copper:

Lead:

Mercury:

Molybdenum:

Nickel:

Selenium:

Zinc:

Total PCBs:

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 ☐ No ☐

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):

Attach the following documents to the application.

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

  Attachment:
- Copy of the closure plan

  Attachment:
- Copy of deed recordation for the site

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

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

  Attachment:
- Procedures to prevent the occurrence of nuisance conditions

  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 ☐ No ☐

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

Attachment:

Section 12. Authorizations/Compliance/Enforcement (Instructions Page 63)

A. Additional authorizations

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

Yes ☐ No ☒

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

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

Yes ☐ No ☒

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

Yes ☐ No ☒

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

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

A. RCRA hazardous wastes

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

Yes ☐ No ☒

B. Remediation activity wastewater

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

Yes ☐ No ☒

C. Details about wastes received

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

Attachment:

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: N/A

Title:

Signature: _____

Date: _____

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.

A new development is proposed to be located east of FM 548 between Greenshaw Road on the north side and N Munson Road on the south side, in Royse City, Texas, in Rockwall County. The development is planned to be approximately 893 lots on a tract of land approximately 325 acres. Royse City WWTP, which is the nearest, is located approximately 0.5 miles from the proposed Camden Parc MUD WWTP but. Therefore, the proposed plan is to design and construct a WWTP on site and discharge the final effluent to Parker Creek. The sludge will be hauled to a different facility for processing after undergoing aerobic digestion. We are seeking a discharge permit for a design flow of 0.55 MGD to be constructed in one phase. Construction is scheduled to begin in June of 2022 and conclude in February of 2023. The field-erected treatment plant will have two modular units, each comprised of a 16,382 CF aeration basin with a side water depth (SWD) of 15', a 11,486 CF aerobic digester, one 26' with a SWD of 15', and a 35' diameter secondary clarifier with a 13' SWD, and the effluent from both clarifiers would flow to a common 34' L X 12' W X 10' SWD (4,085 CF) chlorine contact chamber. Table 1.0(1) – Treatment Units in Technical Report 1.0 Section 2.B of this report summarizes the type and number of units.

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:

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:

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: 9

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

Attachment: 9

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:

Section 2. Organic Loading (Instructions Page 67)

Is this facility in operation?

Yes ☐ No ☒

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

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

A. Current organic loading

Facility Design Flow (flow being requested in application):

Average Influent Organic Strength or BOD_5 Concentration in mg/l:

Average Influent Loading (lbs/day = total average flow X average BOD_5 conc. X 8.34):

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

B. Proposed organic loading

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

Table 1.1(1) – Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD_5 Concentration (mg/l)
Municipality		
Subdivision	0.55	250
Trailer park – transient		

Source	Total Average Flow (MGD)	Influent BOD_5 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		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources		
AVERAGE BOD_5 from all sources		

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

A. Existing/Interim I Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: 20

Ammonia Nitrogen, mg/l: N/A

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: 4

Other: N/A

B. Interim II Phase Design Effluent Quality

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

Total Suspended Solids, mg/l:

Ammonia Nitrogen, mg/l:

Total Phosphorus, mg/l:

Dissolved Oxygen, mg/l:

Other:

C. Final Phase Design Effluent Quality

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

Total Suspended Solids, mg/l:

Ammonia Nitrogen, mg/l:

Total Phosphorus, mg/l:

Dissolved Oxygen, mg/l:

Other:

D. Disinfection Method

Identify the proposed method of disinfection.

☒ Chlorine: 0.5 mg/l after 20 minutes detention time at peak flow

Dechlorination process: None

☐ 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: 10

Section 5. Facility Site (Instructions Page 68)

A. 100-year floodplain

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

Yes ☐ No ☒

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

The site will be graded such that the ground elevation will be above the flood elevation of 507 as shown in Attachment 14. Additionally, since the proposed treatment plant will be a field-erected type wastewater treatment plant, the treatment units are located above grade, which would protect from inundation.

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

FEMA Map 48397C0065L

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

Yes ☐ No ☒

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

Yes ☐ No ☐

If yes, provide the permit number:

If no, provide the approximate date you anticipate submitting your application to the Corps:

B. Wind rose

Attach a wind rose. **Attachment:** 11

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: 12

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:

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).

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).

Section 3. Classified Segments (Instructions Page 73)

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

Yes ☐ No ☒

If yes, this Worksheet is complete.

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

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

Name of the immediate receiving waters: Parker Creek

A. Receiving water type

Identify the appropriate description of the receiving waters.

☒ Stream

☐ Freshwater Swamp or Marsh

☐ Lake or Pond

Surface area, in acres:

Average depth of the entire water body, in feet:

Average depth of water body within a 500-foot radius of discharge point, in feet:

☐ Man-made Channel or Ditch

☐ Open Bay

☐ Tidal Stream, Bayou, or Marsh

☐ Other, specify:

B. Flow characteristics

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

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

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

☒ Perennial - normally flowing

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

☐ USGS flow records

☐ Historical observation by adjacent landowners

☒ Personal observation

☐ Other, specify:

C. Downstream perennial confluences

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

Discharge point at Parker Creek; joined downstream by Klutts Branch; Parker Creek joins Sabine Creek, which joins the South Fork of Sabine River Segment No. 0507G (Unclassified).

D. Downstream characteristics

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

Yes ☐ No ☒

If yes, discuss how.

E. Normal dry weather characteristics

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

The stream still flows during normal dry weather conditions (See Original Photographs in Attachment 04a).

Date and time of observation: 08/05/2021 at 10:00 AM.

Was the water body influenced by stormwater runoff during observations?

Yes ☐ No ☒

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

A. Upstream influences

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

- ☐ Oil field activities
- ☐ Upstream discharges
- ☐ Septic tanks
- ☒ Urban runoff
- ☒ Agricultural runoff
- ☐ Other(s), specify

B. Waterbody uses

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

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

☐ Domestic water supply ☐ Industrial water supply

☐ Park activities ☐ Other(s), specify

C. Waterbody aesthetics

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

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

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

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

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

DOMESTIC WORKSHEET 6.0

INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works (POTWs)

Section 1. All POTWs (Instructions Page 99)

A. Industrial users

Provide the number of each of the following types of industrial users (IUs) that discharge to your POTW and the daily flows from each user. See the Instructions for definitions of Categorical IUs, Significant IUs – non-categorical, and Other IUs.

If there are no users, enter 0 (zero).

Categorical IUs:

Number of IUs: 0

Average Daily Flows, in MGD: N/A

Significant IUs – non-categorical:

Number of IUs: 0

Average Daily Flows, in MGD: N/A

Other IUs:

Number of IUs: 0

Average Daily Flows, in MGD: N/A

B. Treatment plant interference

In the past three years, has your POTW experienced treatment plant interference (see instructions)?

Yes ☐ No ☒

If yes, identify the dates, duration, description of interference, and probable cause(s) and possible source(s) of each interference event. Include the names of the IUs that may have caused the interference.

C. Treatment plant pass through

In the past three years, has your POTW experienced pass through (see instructions)?

Yes ☐ No ☒

If yes, identify the dates, duration, a description of the pollutants passing through the treatment plant, and probable cause(s) and possible source(s) of each pass through event. Include the names of the IUs that may have caused pass through.

D. Pretreatment program

Does your POTW have an approved pretreatment program?

Yes ☐ No ☒

If yes, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

Yes ☐ No ☐

If yes, complete Section 2.c. and 2.d. only, and skip Section 3.

If no to either question above, skip Section 2 and complete Section 3 for each significant industrial user and categorical industrial user.

Section 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 100)

A. Substantial modifications

Have there been any **substantial modifications** to the approved pretreatment program that have not been submitted to the TCEQ for approval according to *40 CFR §403.18*?

Yes ☐ No ☐

If yes, identify the modifications that have not been submitted to TCEQ, including the purpose of the modification.

B. Non-substantial modifications

Have there been any **non-substantial modifications** to the approved pretreatment program that have not been submitted to TCEQ for review and acceptance?

Yes ☐ No ☐

If yes, identify all non-substantial modifications that have not been submitted to TCEQ, including the purpose of the modification.

C. Effluent parameters above the MAL

In Table 6.0(1), list all parameters measured above the MAL in the POTW's effluent monitoring during the last three years. Submit an attachment if necessary.

Table 6.0(1) – Parameters Above the MAL

Pollutant	Concentration	MAL	Units	Date

D. Industrial user interruptions

Has any SIU, CIU, or other IU caused or contributed to any problems (excluding interferences or pass throughs) at your POTW in the past three years?

Yes ☐ No ☐

If yes, identify the industry, describe each episode, including dates, duration, description of the problems, and probable pollutants.

Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 100)

A. General information

Company Name: N/A - No industrial users.

SIC Code:

Telephone number: Fax number:

Contact name:

Address:

City, State, and Zip Code:

B. Process information

Describe the industrial processes or other activities that affect or contribute to the SIU(s) or CIU(s) discharge (i.e., process and non-process wastewater).

N/A

C. Product and service information

Provide a description of the principal product(s) or services performed.

N/A

D. Flow rate information

See the Instructions for definitions of "process" and "non-process wastewater."

Process Wastewater:

Discharge, in gallons/day: N/A

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: N/A

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

E. Pretreatment standards

Is the SIU or CIU subject to technically based local limits as defined in the instructions?

Yes ☐ No ☒

Is the SIU or CIU subject to categorical pretreatment standards found in *40 CFR Parts 405–471*?

Yes ☐ No ☒

If subject to categorical pretreatment standards, indicate the applicable category and subcategory for each categorical process.

Category: N/A
Subcategories:

Category:
Subcategories:

Category:
Subcategories:

Category:
Subcategories:

Category:
Subcategories:

F. Industrial user interruptions

Has the SIU or CIU caused or contributed to any problems (e.g., interferences, pass through, odors, corrosion, blockages) at your POTW in the past three years?

Yes ☐ No ☒

If yes, identify the SIU, describe each episode, including dates, duration, description of problems, and probable pollutants.

ATTACHMENTS

TCEQ Core Data Form

TCEQ Use Only

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

SECTION I: General Information

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

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

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

2. Customer Reference Number *(if issued)*	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number *(if issued)*
CN 605737097		RN 110927506

SECTION II: Customer Information

4. General Customer Information	5. Effective Date for Customer Information Updates (mm/dd/yyyy)	8/10/2021

☐ New Customer ☒ Update to Customer Information ☐ Change in Regulated Entity Ownership

☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)

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

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

Camden Parc Municipal Utility District of Rockwall County

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

11. Type of Customer: ☐ Corporation ☐ Individual Partnership: ☐ General ☐ Limited

Government: ☐ City ☐ County ☐ Federal ☐ State ☒ Other ☐ Sole Proprietorship ☐ Other:

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

13. Independently Owned and Operated? ☐ Yes ☒ No

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

☒ Owner ☐ Operator ☐ Owner & Operator

☐ Occupational Licensee ☐ Responsible Party ☐ Voluntary Cleanup Applicant ☐ Other:

15. Mailing Address: 12801 N Central Expy, Suite 1650

City	Dallas	State	TX	ZIP	75243	ZIP + 4	1875

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

18. Telephone Number	19. Extension or Code	20. Fax Number *(if applicable)*
(214) 972-3870		( ) -

SECTION III: Regulated Entity Information

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

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

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

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

Rockwall County

23. Street Address of the Regulated Entity: *(No PO Boxes)*	See Description of Physical Location in Fields 25 and 26.							
	City	Royse City	State	TX	ZIP	75189	ZIP + 4	5416
24. County	Rockwall							

Enter Physical Location Description if no street address is provided.

25. Description to Physical Location:	Approximately 4,500 feet northeast of the intersection of FM 548 and N Munson Road in Rockwall County, Texas.

26. Nearest City	State	Nearest ZIP Code
Royse City	TX	75189

27. Latitude (N) In Decimal:	32.920089		28. Longitude (W) In Decimal:	-96.327285	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
32	55	12.3	-96	19	38.2

29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)	31. Primary NAICS Code (5 or 6 digits)	32. Secondary NAICS Code (5 or 6 digits)
4952		221320	

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

Provide residential wastewater service

34. Mailing Address:	12801 N Central Expy, Suite 1650							
	City	Dallas	State	TX	ZIP	75243	ZIP + 4	1875

35. E-Mail Address:	tedzadeh@mtaco.com

36. Telephone Number	37. Extension or Code	38. Fax Number *(if applicable)*
(214) 972-3870		( ) -

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

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

SECTION IV: Preparer Information

40. Name:	Kyle Hogue	41. Title:	Water Team Lead

42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(469) 677-3005		( ) -	kyle.hogue@rpsgroup.com

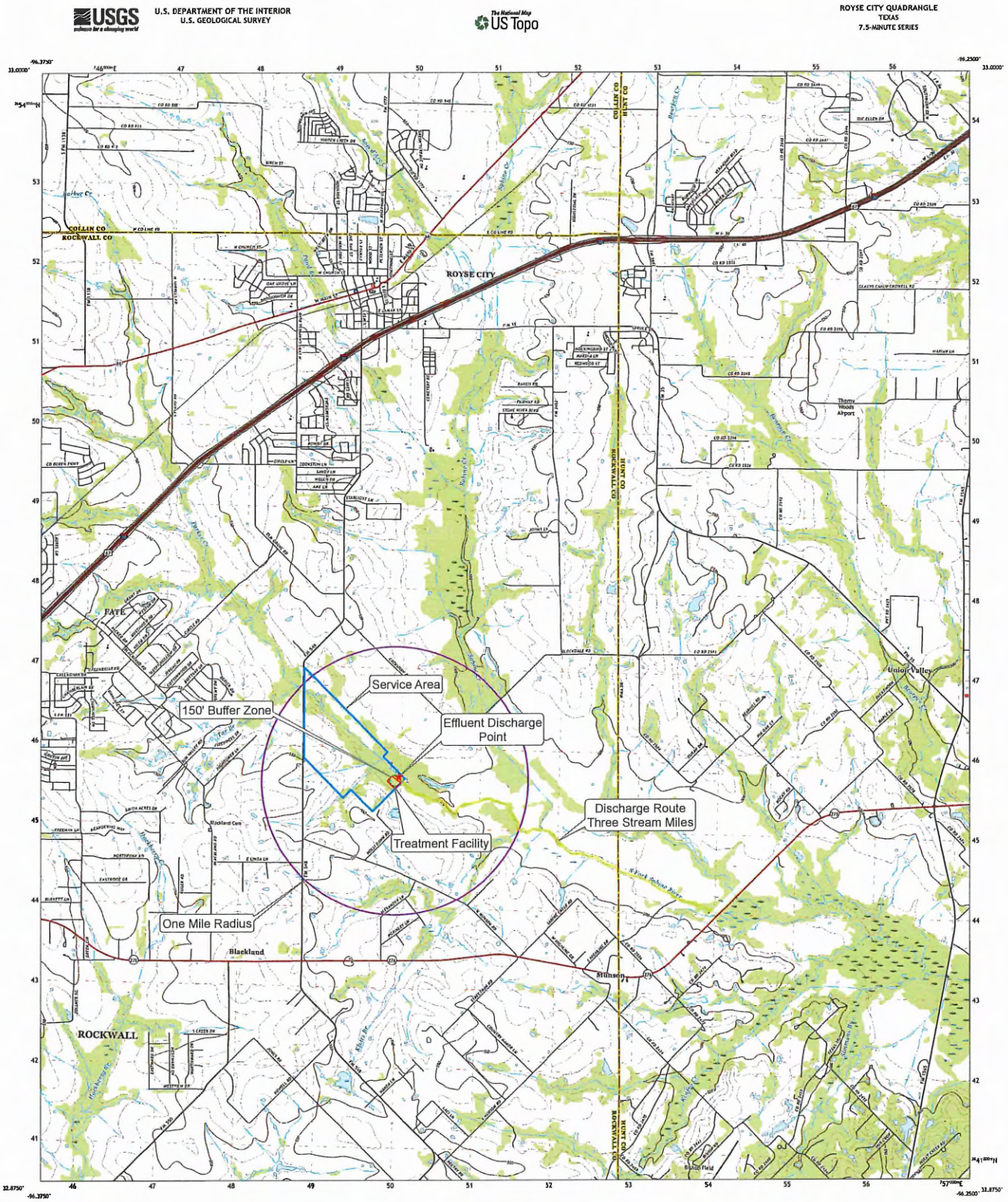
SECTION V: Authorized Signature

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

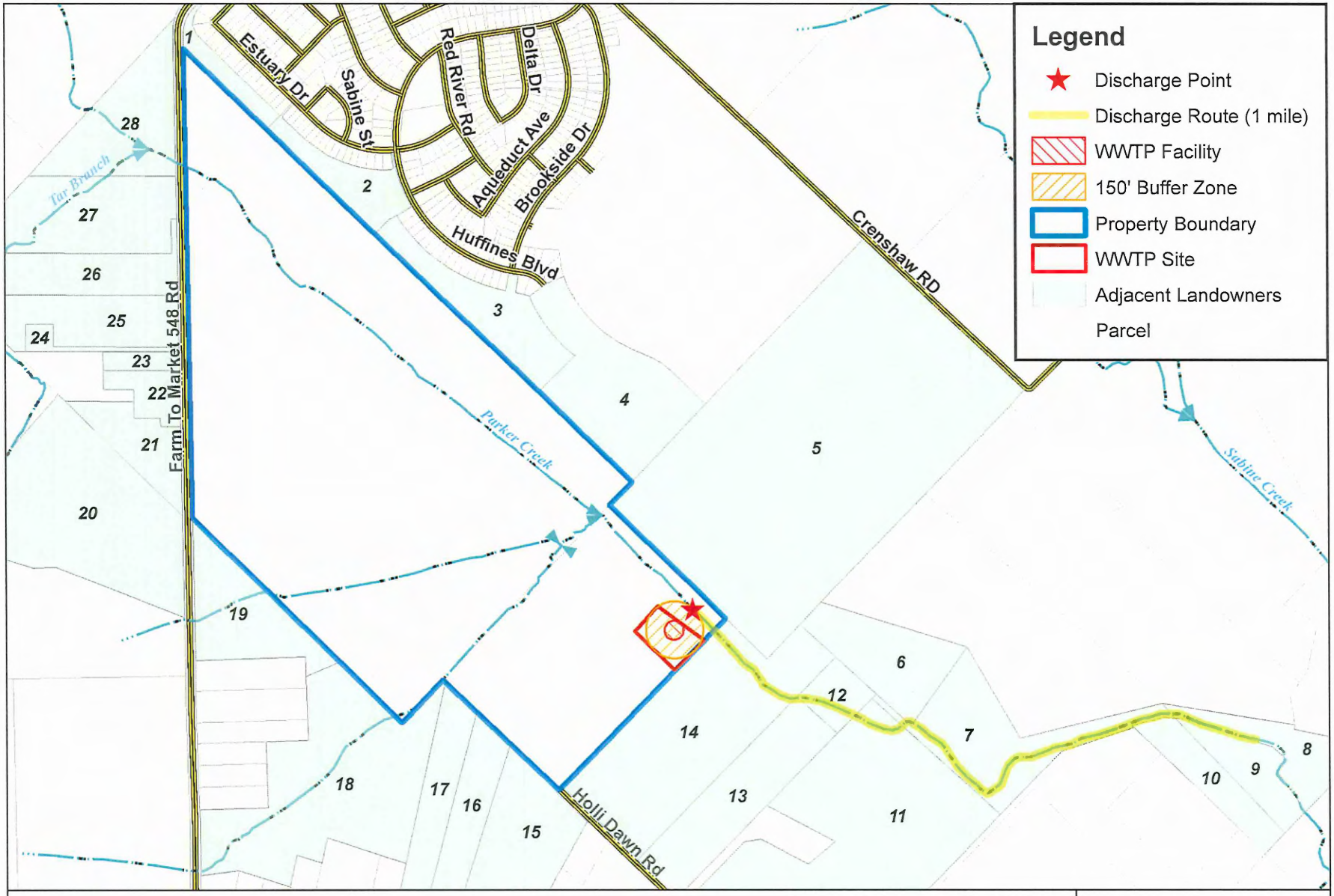
Company:	Camden Parc Municipal Utility District of Rockwall County	Job Title:	Manager		
Name *(In Print)*:	M.T. Akavizadeh			Phone:	(214) 972- 3870

Signature:		Date:	11/12/2021

ATTACHMENT 2: 7.5 MINUTE QUADRANGLE MAP



000068



RPS MAKING COMPLEX EASY
Texas PE Firm Reg. #F-929
2777 North Stemmons Freeway, Suite 1102, Dallas, Texas 75207
T +1 214 951 0807 E usinfrastructure@rpsgroup.com

N W E S

0 1,000 2,000 Feet

Affected Landowner Information

RPS PROJ. NO.: 007711	ATTACHMENT
SCALE: 1 " = 1,000 '	3
DATE: 11/12/2021	

000069

Attachment 3

Addresses Associated with ID Number on Landowner Map

Affected Landowner Map ID Number	Mailing Address
1	WATERSCAPE HOMEOWNERS ASSOCIATION INC. 1800 PRESTON PARK BLVD PLANO, TX 75093
2	WATERSCAPE HOMEOWNERS ASSOCIATION INC. 1800 PRESTON PARK BLVD PLANO, TX 75093
3	WATERSCAPE HOMEOWNERS ASSOCIATION INC. 1800 PRESTON PARK BLVD PLANO, TX 75093
4	WATERSCAPE DEVELOPMENT LLC 8200 DOUGLAS DALLAS, TX 75225
5	WATERSCAPE 4 LLC 8200 DOUGLAS AVENUE DALLAS, TX 75225
6	ROBERT C & EDITH L CARSON 700 HOLLI DAWN ROYSE CITY, TX 75189-5416
7	EDWIN R & SARAH T WALKER 744 SABINE CREEK RD ROYSE CITY, TX 75189
8	EDWIN R & SARAH T WALKER 744 SABINE CREEK RD ROYSE CITY, TX 75189
9	JASON, NICOLE, GARY, AND KENETA HARVEY 1076 N MUNSON RD ROYSE CITY, TX 75189
10	JASON, NICOLE, GARY, AND KENETA HARVEY 1076 N MUNSON RD ROYSE CITY, TX 75189

11	KAREN MILAN 455 HOLLI DAWN ROYSE CITY, TX 75189-5328
12	ROBERT C & EDITH L CARSON 700 HOLLI DAWN ROYSE CITY, TX 75189-5416
13	ROBERT C & EDITH L CARSON 700 HOLLI DAWN ROYSE CITY, TX 75189-5416
14	ROBERT C & EDITH L CARSON 700 HOLLI DAWN ROYSE CITY, TX 75189-5416
15	MELANIE A LITLE 5919 CANTERVIEW DR DALLAS, TX 75228
16	DAVID N & MARQUETTA COCKING 450 N MUNSON ROAD ROYSE CITY, TX 75189
17	SHEILA AND ROBERT PAUL EVANS 404 N MUNSON RD ROYSE CITY, TX 75189
18	VENTURE ANNA 48 LLC 9400 NORTH CENTRAL EXPRESSWAY SUITE 475, DALLAS, TX, 75231
19	VENTURE ANNA 48 LLC 9400 NORTH CENTRAL EXPRESSWAY SUITE 475, DALLAS, TX, 75231
20	JOHNSON VIRGINIA AND KATHRYN BASS 39 GREGG RD KRUM, TX 76249
21	BARDIN ROBERT E & DAPHNE A FIKES 2529 DORRINGTON DR DALLAS TX 75228-5953
22	ROYSE CITY BEACH LLC ATTN ROBERT BARDIN 2529 DORRINGTON ROAD DALLAS, TX 75228
23	DAVIS ANITA CHERI 5152 S FM 548 ROYSE CITY, TX 75189

24	EDGE GARY W 5126 FM 548 ROYSE CITY, TX 75189
25	EDGE GARY W 5126 FM 548 ROYSE CITY, TX 75189
26	BOULOS LLC 3134 MARKET CENTER DR ROCKWALL, TX 75032
27	HERNANDEZ EDUARDO 11558 STRAIGHT TRIBUTE SAN ANTONIO, TX 78254
28	WADE JUSTIN & ANGELA 105 JAMES STREET FATE, TX 75189

Notes:

1. Source of addresses is the Rockwall County Appraisal District property search website: https://propaccess.trueautomation.com/clientdb/?cid=42
2. No permanent school fund land is affected by this application

WATERSCAPE HOMEOWNERS
ASSOCIATION INC.
1800 PRESTON PARK BLVD
PLANO, TX 75093

WATERSCAPE DEVELOPMENT LLC
8200 DOUGLAS
DALLAS, TX 75225

EDWIN R & SARAH T WALKER
744 SABINE CREEK RD
ROYSE CITY, TX 75189

JASON, NICOLE, GARY, AND KENETA
HARVEY
1076 N MUNSON RD
ROYSE CITY, TX 75189

ROBERT C & EDITH L CARSON
700 HOLLI DAWN
ROYSE CITY, TX 75189-5416

DAVID N & MARQUETTA COCKING
450 N MUNSON ROAD
ROYSE CITY, TX 75189

VENTURE ANNA 48 LLC
9400 NORTH CENTRAL EXPRESSWAY
SUITE 475, DALLAS, TX, 75231

ROYSE CITY BEACH LLC
ATTN ROBERT BARDIN
2529 DORRINGTON ROAD
DALLAS, TX 75228

EDGE GARY W
5126 FM 548
ROYSE CITY, TX 75189

WADE JUSTIN & ANGELA
105 JAMES STREET
FATE, TX 75189

WATERSCAPE HOMEOWNERS
ASSOCIATION INC.
1800 PRESTON PARK BLVD
PLANO, TX 75093

WATERSCAPE DEVELOPMENT LLC
8200 DOUGLAS
DALLAS, TX 75225

EDWIN R & SARAH T WALKER
744 SABINE CREEK RD
ROYSE CITY, TX 75189

KAREN MILAN
455 HOLLI DAWN
ROYSE CITY, TX 75189-5328

ROBERT C & EDITH L CARSON
700 HOLLI DAWN
ROYSE CITY, TX 75189-5416

SHEILA AND ROBERT PAUL EVANS
404 N MUNSON RD
ROYSE CITY, TX 75189

JOHNSON VIRGINIA AND KATHRYN
BASS
39 GREGG RD
KRUM, TX 76249

DAVIS ANITA CHERI
5152 S FM 548
ROYSE CITY, TX 75189

BOULOS LLC
3134 MARKET CENTER DR
ROCKWALL, TX 75032

WATERSCAPE HOMEOWNERS
ASSOCIATION INC.
1800 PRESTON PARK BLVD
PLANO, TX 75093

ROBERT C & EDITH L CARSON
700 HOLLI DAWN
ROYSE CITY, TX 75189-5416

JASON, NICOLE, GARY, AND KENETA
HARVEY
1076 N MUNSON RD
ROYSE CITY, TX 75189

ROBERT C & EDITH L CARSON
700 HOLLI DAWN
ROYSE CITY, TX 75189-5416

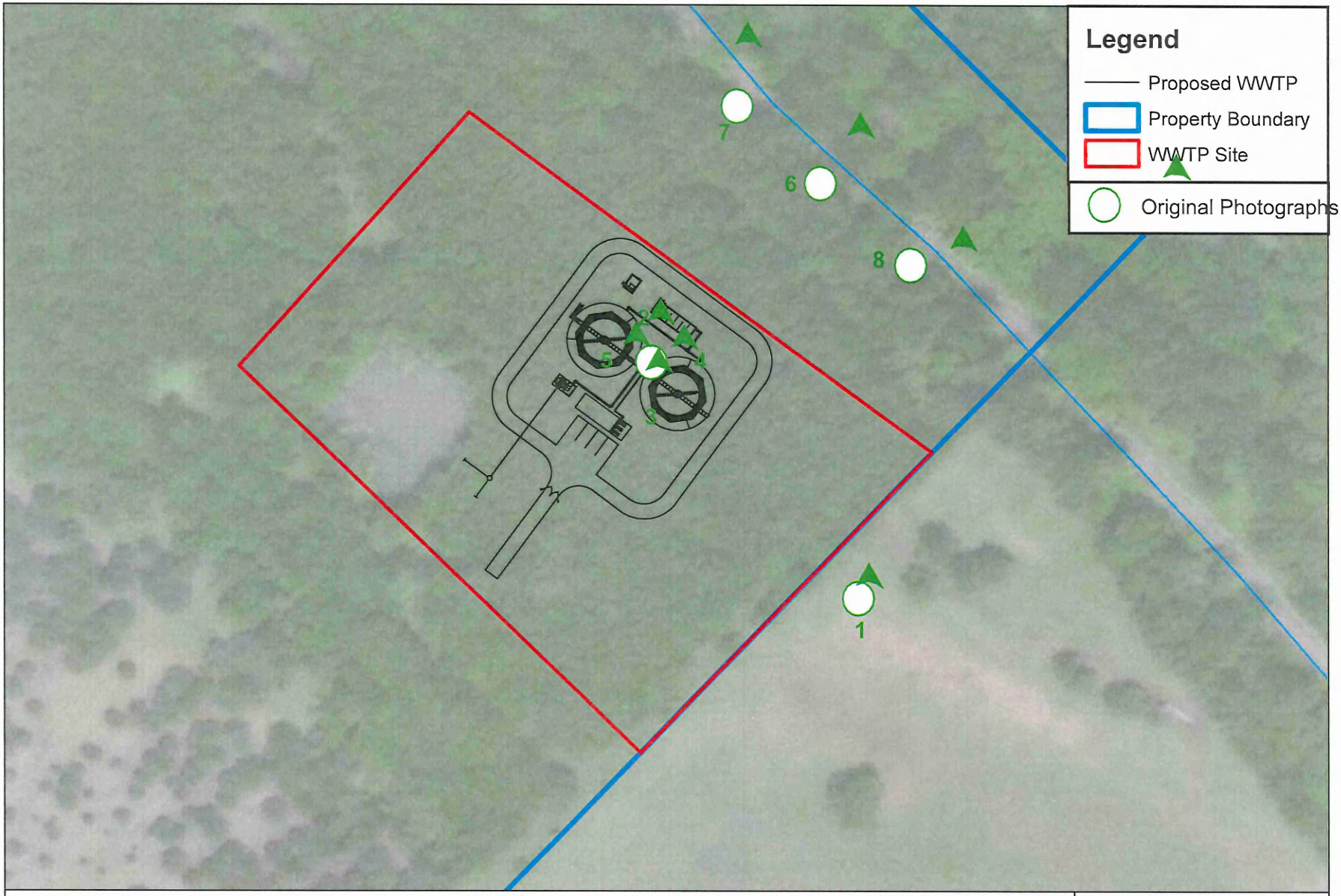
MELANIE A LITLE
5919 CANTERVIEW DR
DALLAS, TX 75228

VENTURE ANNA 48 LLC
9400 NORTH CENTRAL EXPRESSWAY
SUITE 475, DALLAS, TX, 75231

BARDIN ROBERT E & DAPHNE A FIKES
2529 DORRINGTON DR
DALLAS TX 75228-5953

EDGE GARY W
5126 FM 548
ROYSE CITY, TX 75189

HERNANDEZ EDUARDO
11558 STRAIGHT TRIBUTE
SAN ANTONIO, TX 78254



RPS MAKING COMPLEX EASY

Texas PE Firm Reg. #F-929

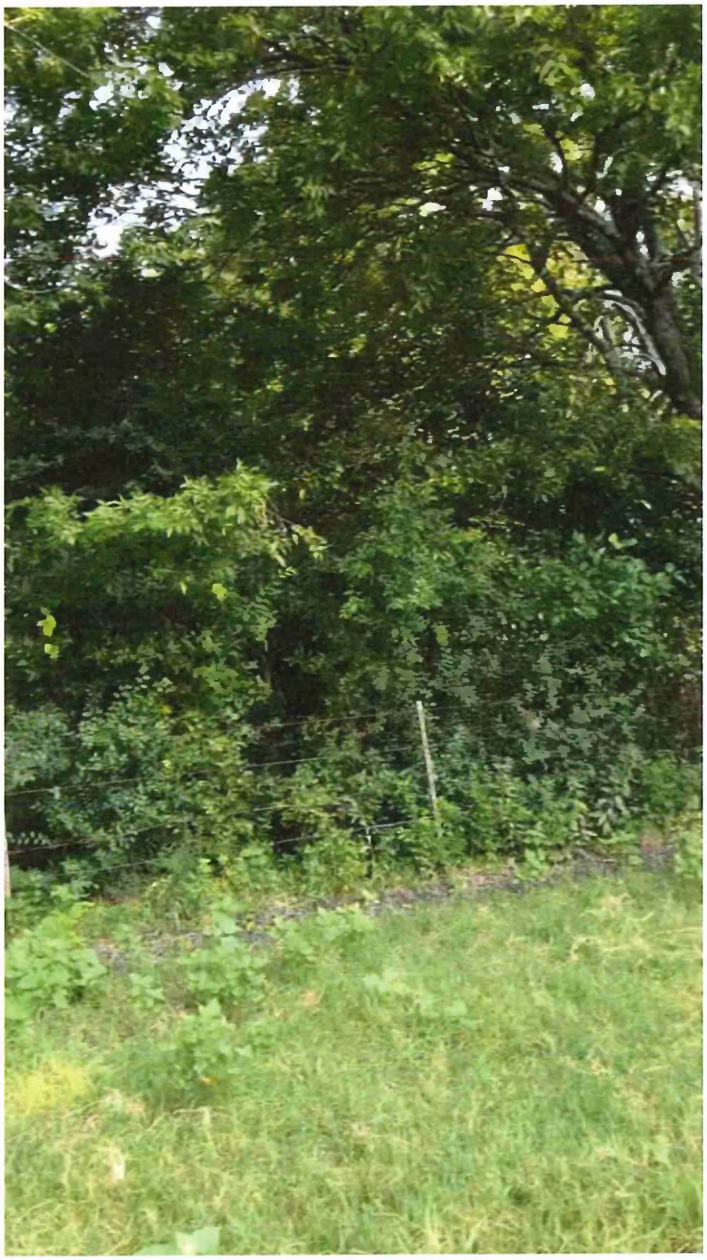
2777 North Stemmons Freeway, Suite 1102, Dallas, Texas 75207
T +1 214 951 0807 E usinfrastructure@rpsgroup.com

N
W E
S

0 50 100 Feet

Original Photographs

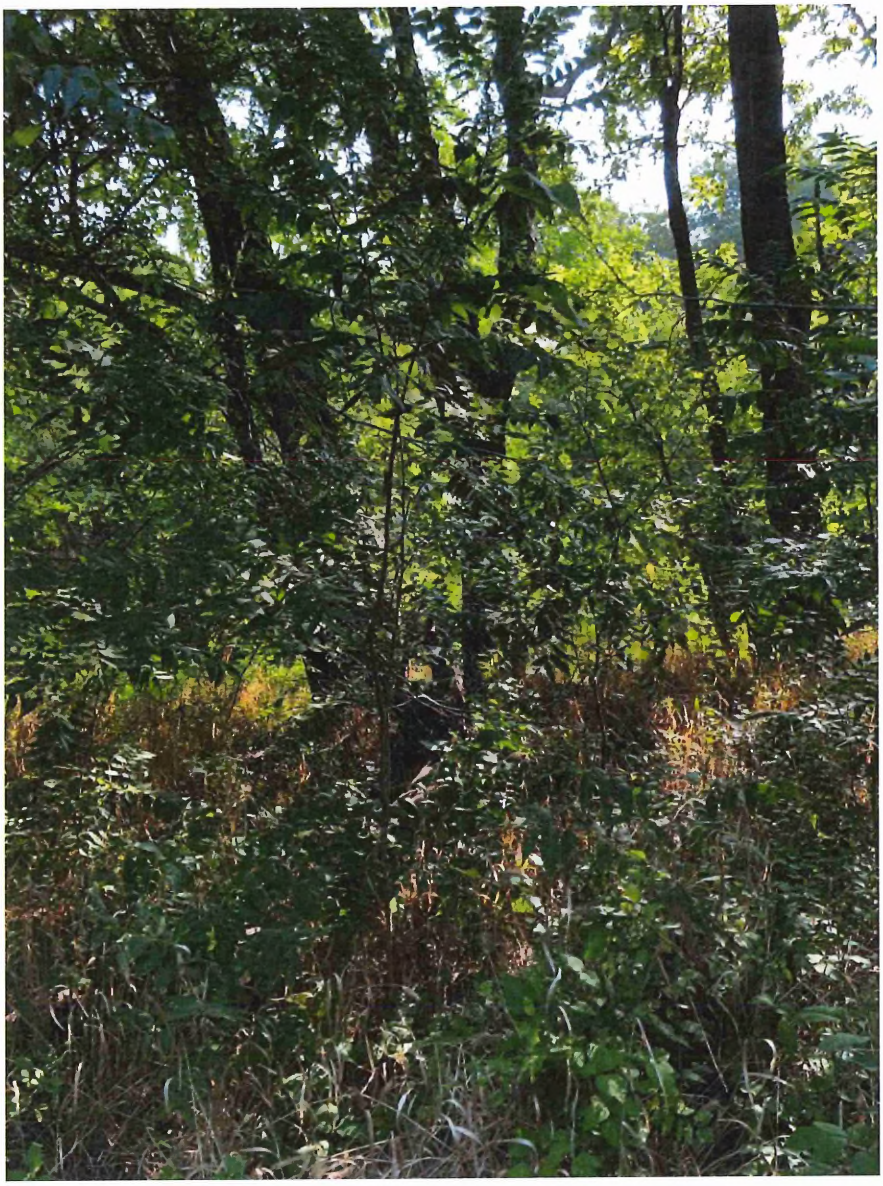
RPS PROJ. NO.: 007711	ATTACHMENT 4
SCALE: 1 " = 100 '	
DATE: 08/06/2021	



Original Photograph 1 (2021) – WWTP Site from Property Boundary

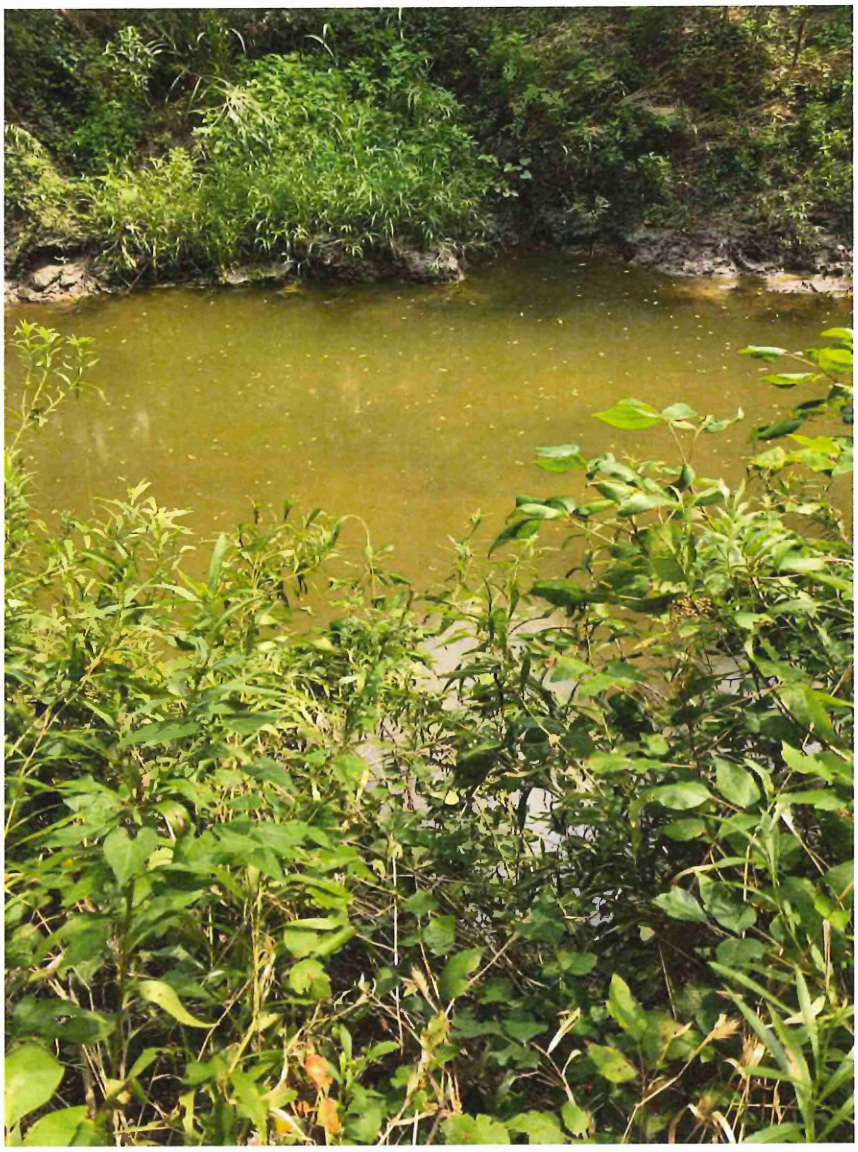
Original Photograph 2 (2021) – View North from WWTP Site

Original Photograph 3 (2021) – View South from WWTP Site



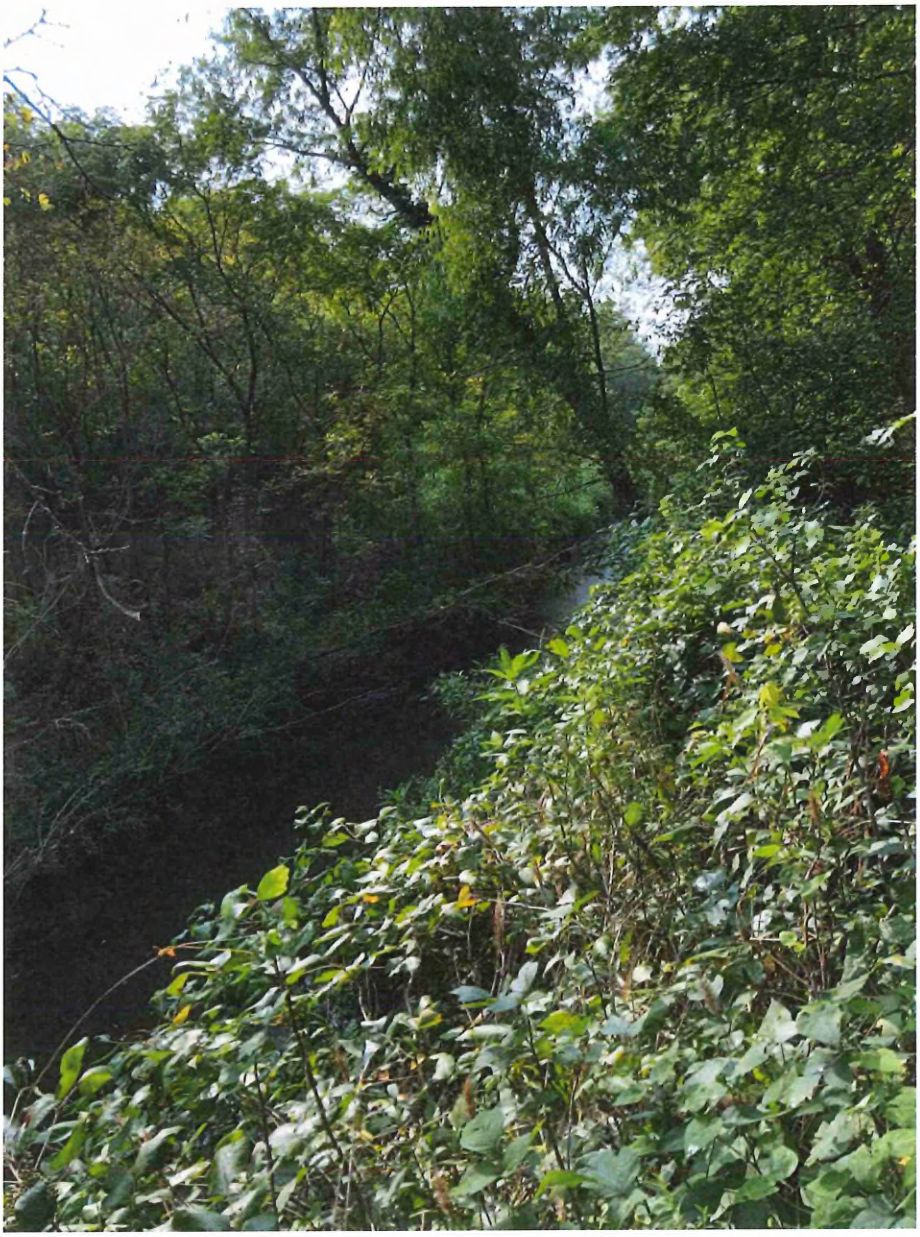
Original Photograph 4 (2021) – View East from WWTP Site

Original Photograph 5 (2021) – View West from WWTP Site

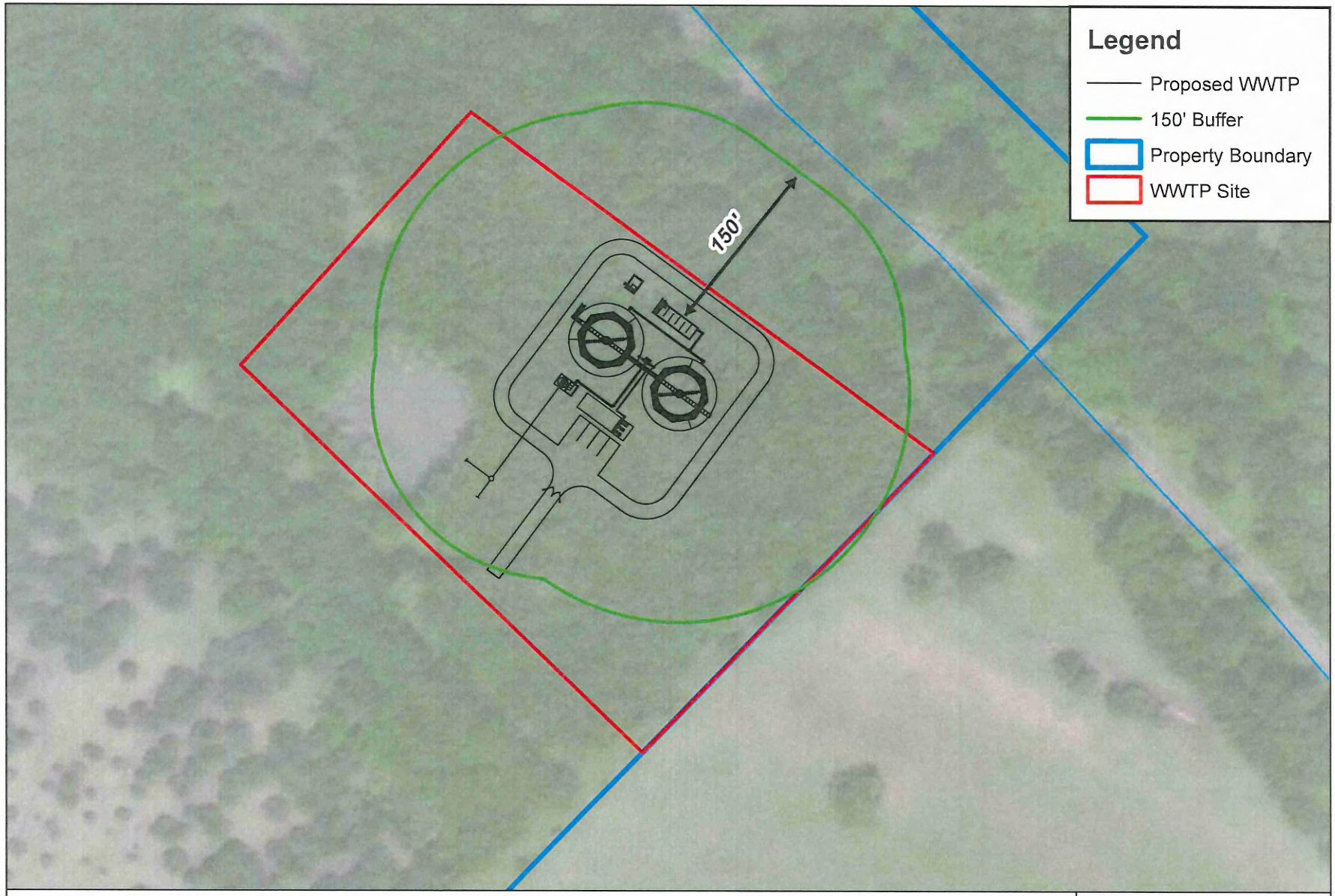


Original Photograph 6 (2021) – Discharge Point

Original Photograph 7 (2021) – Upstream of Discharge Point



Original Photograph 8 (2021) – Downstream of Discharge Point



RPS MAKING COMPLEX EASY
Texas PE Firm Reg. #F-929
2777 North Stemmons Freeway, Suite 1102, Dallas, Texas 75207
T +1 214 951 0807 E usinfrastructure@rpsgroup.com

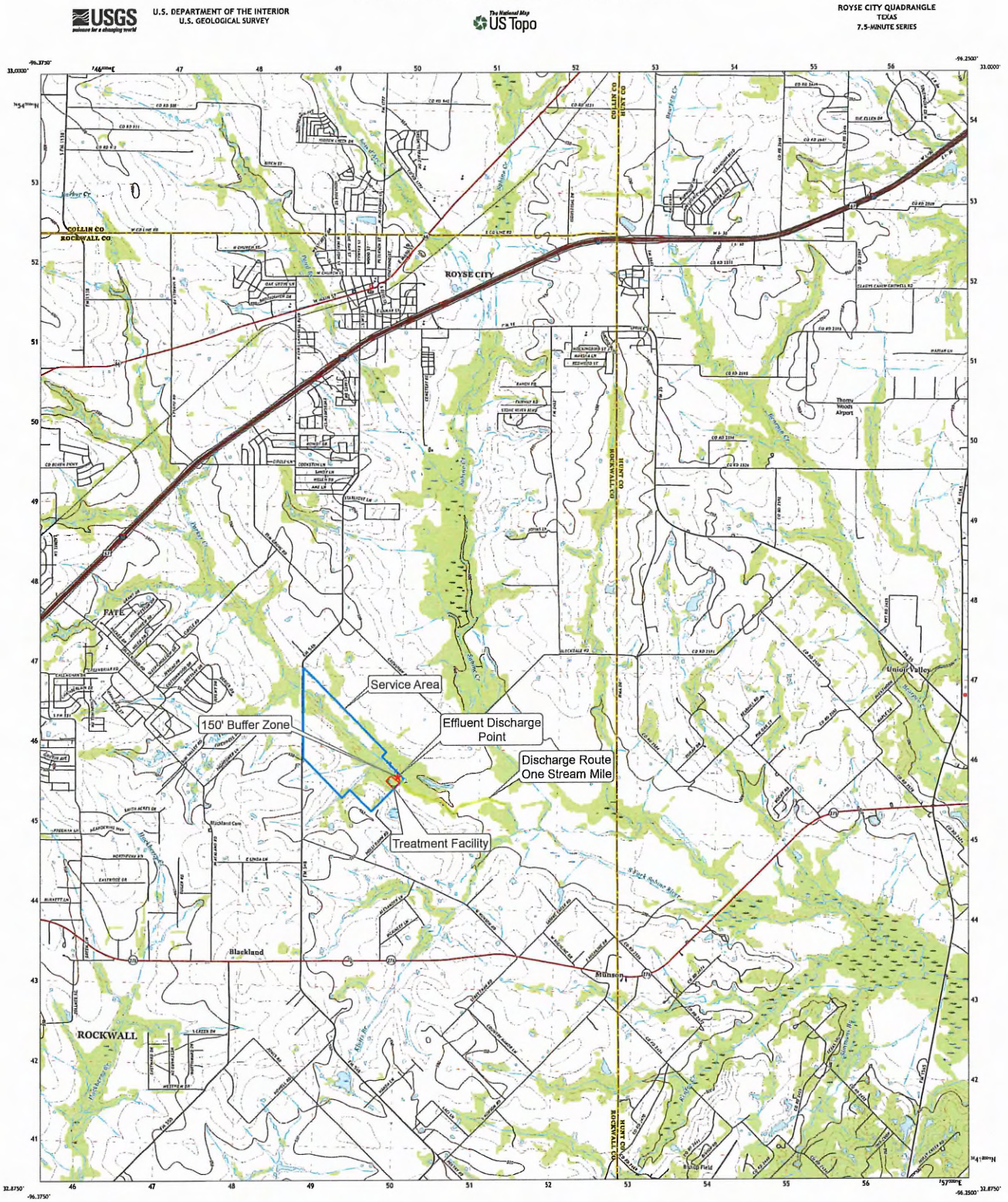
N
W E
S

0 50 100 Feet

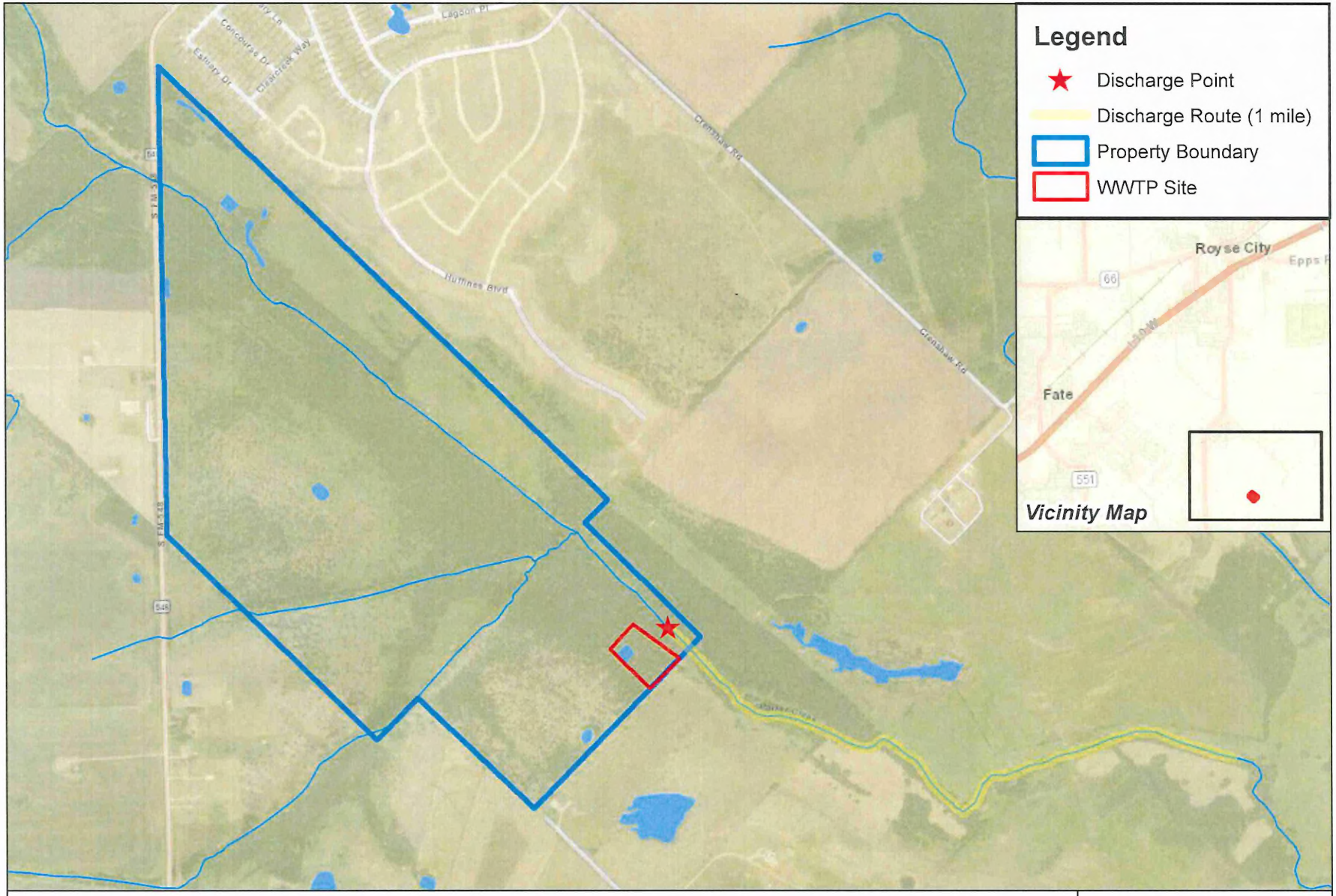
Buffer Zone Map

RPS PROJ. NO.: 007711	ATTACHMENT 5
SCALE: 1 " = 100 '	
DATE: 08/06/2021	

ATTACHMENT 6: 7.5 MINUTE QUADRANGLE MAP FOR SPIF



000084



Texas PE Firm Reg. #F-929

2777 North Stemmons Freeway, Suite 1102, Dallas, Texas 75207
T +1 214 951 0807 E usinfrastructure@rpsgroup.com

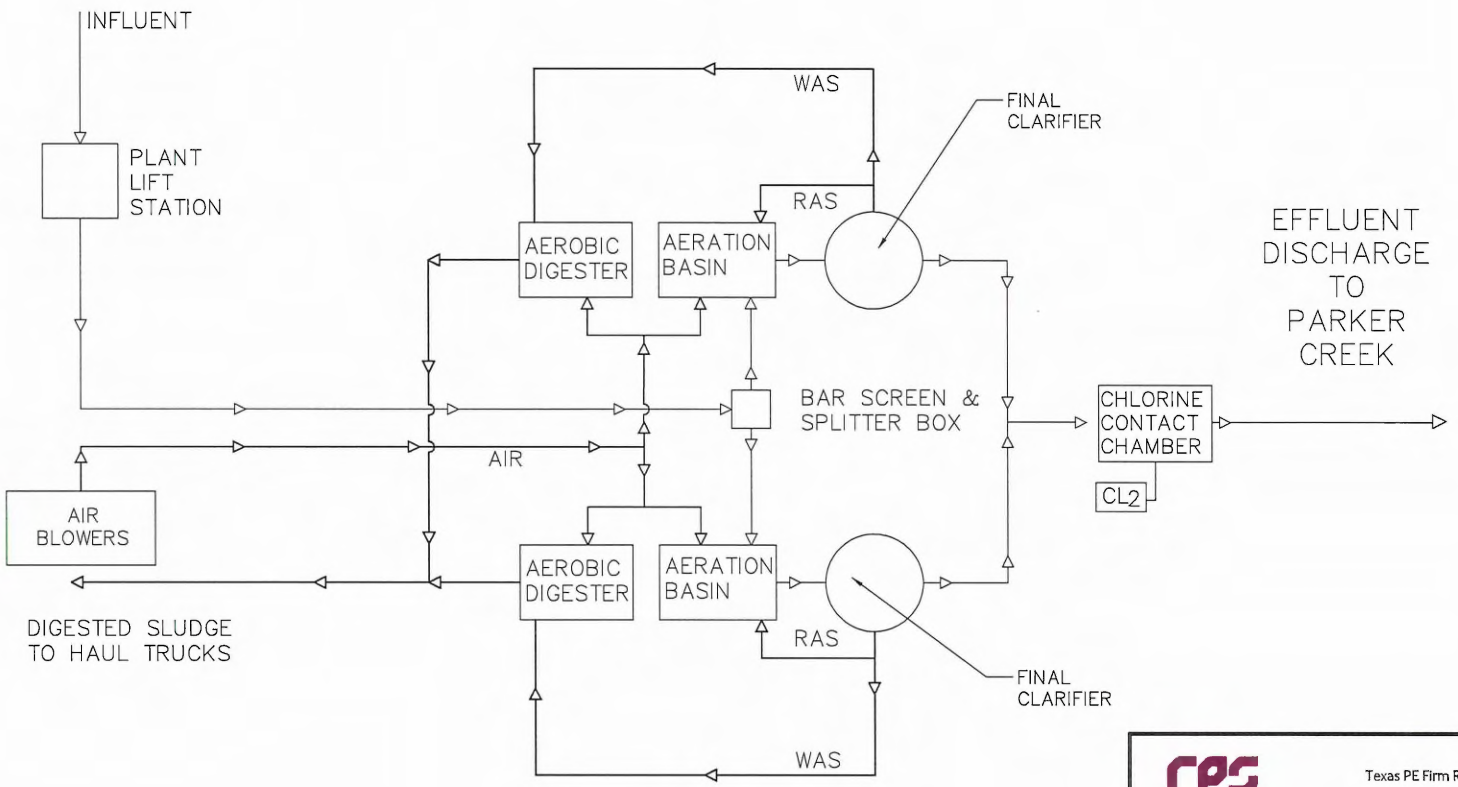
N W E S

0 1,000 2,000 Feet

Location Map

RPS PROJ. NO.: 007711	ATTACHMENT 6
SCALE: 1 " = 1,000 '	
DATE: 08/06/2021	

J:\007811 Camden Royse City MUD Application\07.00 CADD\Exhibits\Site Layout EX.dwg Aug 12 2021



rps

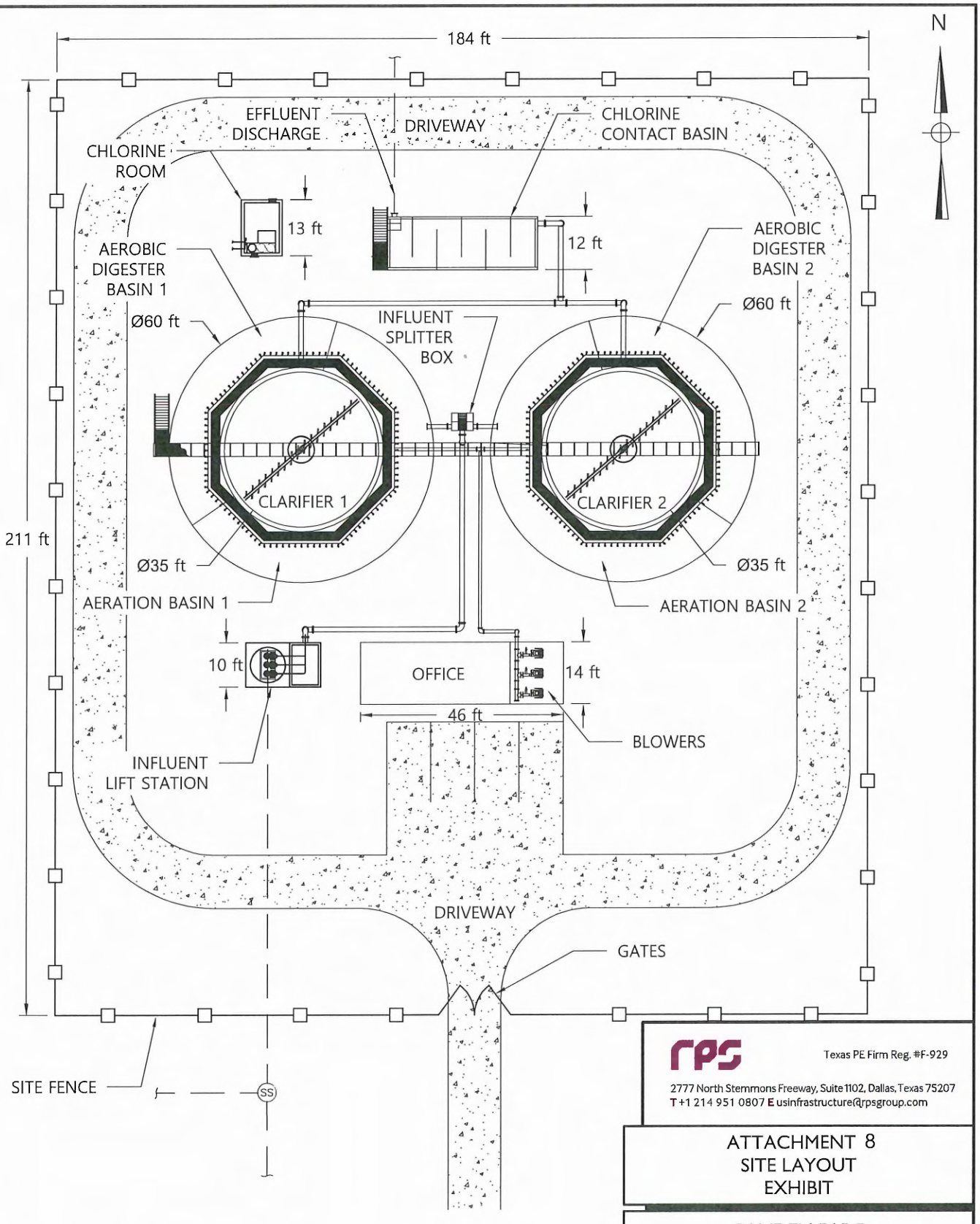
Texas PE Firm Reg. #F-929

2777 North Stemmons Freeway, Suite 1102, Dallas, Texas 75207
T +1 214 951 0807 E usinfrastructure@rpsgroup.com

ATTACHMENT 7
PROCESS FLOW DIAGRAM
EXHIBIT

CAMDEN PARC
MUNICIPAL UTILITY DISTRICT
ROCKWALL, TX

RPS Proj. No: 007811	Exhibit 7
Scale: CUSTOM	
Date: 08/13/2021	



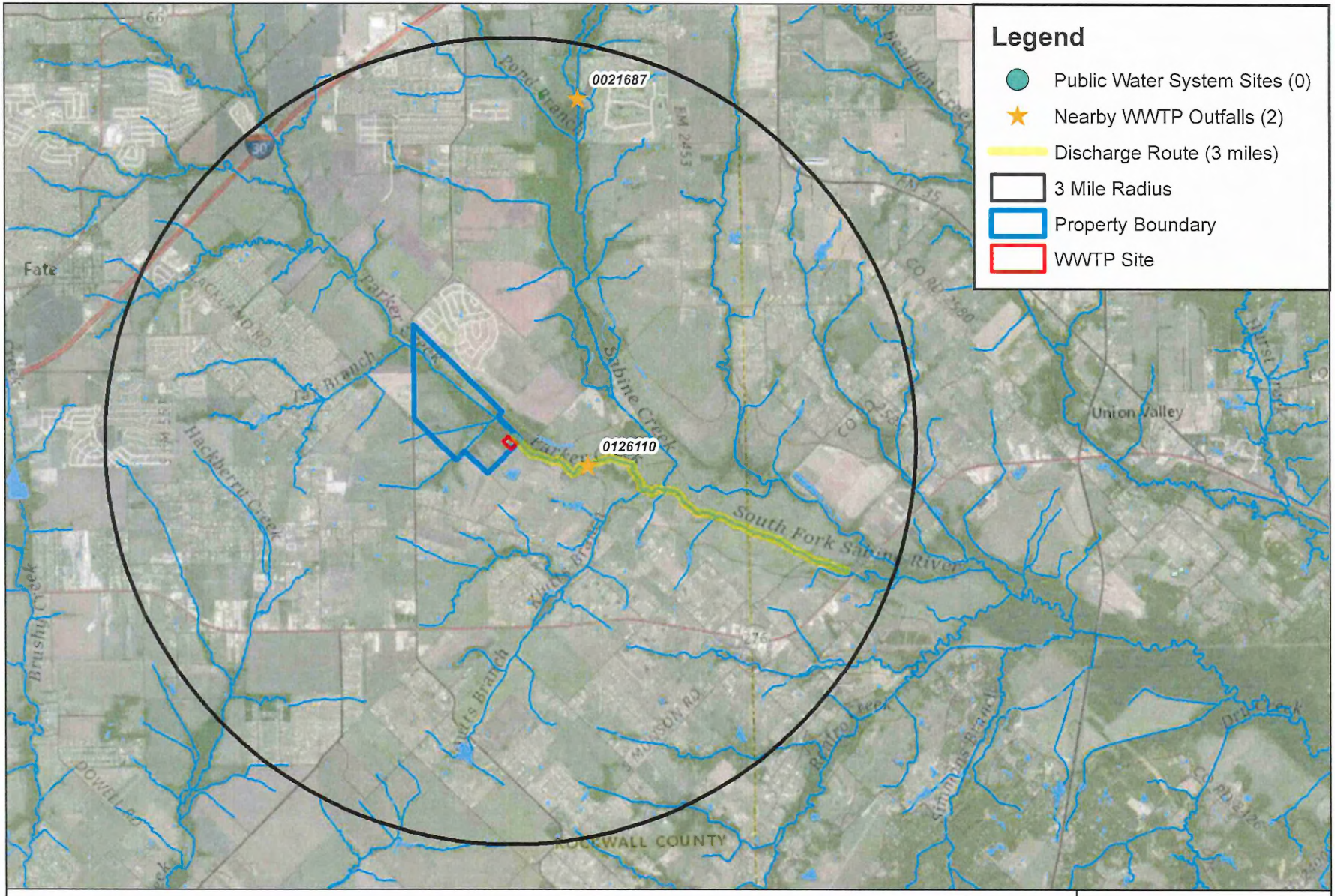
rps
Texas PE Firm Reg. #F-929
2777 North Stemmons Freeway, Suite 1102, Dallas, Texas 75207
T +1 214 951 0807 E usinfrastructure@rpsgroup.com

ATTACHMENT 8
SITE LAYOUT
EXHIBIT

CAMDEN PARC
MUNICIPAL UTILITY DISTRICT
ROCKWALL, TX

RPS Proj. No: 007811	Exhibit 8
Scale: 1" = 30'	
Date: 08/13/2021	

J:\007811 Camden Royse City MUD Application\07.00 CADD\Exhibits\Site Layout EX.dwg Aug 13, 2021



RPS MAKING COMPLEX EASY
Texas PE Firm Reg. #F-929
2777 North Stemmons Freeway, Suite 1102, Dallas, Texas 75207
T +1 214 951 0807 E usinfrastructure@rpsgroup.com

Nearby WWTPs and Water Wells

RPS PROJ. NO.: 007711	ATTACHMENT 9
SCALE: 1 " = 5,000 '	
DATE: 08/06/2021	

Attachment 9

Nearby WWTPs or Collection Systems

Wastewater Treatment Facilities within three-mile radius of proposed facility:

Permittee Name	NPDES Permit Number	Facility Design Flow (MGD)
Royse City	TX0021687	0.50
North Texas Municipal Water District	TX0126110	3.00

The identified WWTPs that are located within 3 miles from the location of the proposed treatment facility have a permitted design flow of 500,000 GPD and 3,000,000 GPD. The proposed treatment facility for this permit will have a design flow of 550,000 GPD. The potential to connect to the Royse City WWTP was not considered due to the lack of collector systems between the proposed treatment plant and the Royce City plant. Connection to the Sabine Creek plant operated by North Texas Municipal Water District was considered but was not possible as the Camden Parc MUD of Rockwall County is not a member of the District and neither of the adjacent cities (Royse City and Fate) were amenable to sponsoring the New Fairview MUD to allow it to tie into the NTWMD collection system. The next pages of Attachment 9 consist of correspondence with these facilities.

Via e-mail: rmartin@winstead.com

Mr. Ross Martin
Winstead
2728 N. Harwood
Suite 500
Dallas, Texas 75201

Re: Wastewater Service for 1833 ESFCs in Camden Parc Municipal Utility District

Dear Mr. Martin,

The City of Fate is in receipt of your letter dated April 14, 2021, requesting that the City provide wastewater service to the Camden Parc Municipal Utility District in order to serve the 1,833 equivalent single-family connections ("ESFCs") within the District that will require wastewater service. As you know, the City of Fate and the City of Royse City have funded over $25 million in construction of the Parker Creek sewer line and improvements to the Sabine Creek Regional Wastewater Treatment Plant in order to provide wastewater capacity to our rapidly growing communities. Starting in 2022, the two will embark on another $45 million plant expansion. After review of your request and discussions with the City of Royse City, the City of Fate must respectfully decline to provide wastewater service to the Camden Parc Municipal Utility District for its development.

With kind regards,

Michael Kovacs
City Manager

cc: Brenda N. McDonald, City Attorney (*via e-mail*)

Nancy Lundie

From: Kyle Hogue
Sent: Friday, August 13, 2021 2:20 PM
To: Nancy Lundie
Subject: FW: Proposed Development in Royse City ETJ

Denial from NTMWD

Kyle Hogue, PE
Team Leader – Water
RPS | North America
T +1 972 202 4242
E kyle.hogue@rpsgroup.com

From: Shela Chowdhury <schowdhury@NTMWD.COM>
Sent: Tuesday, March 30, 2021 8:18 AM
To: Kyle Hogue <Kyle.Hogue@rpsgroup.com>
Cc: Yanbo Li <yli@NTMWD.COM>
Subject: RE: Proposed Development in Royse City ETJ

Kyle,
Thanks for checking in. We internally reviewed the options and unfortunately NTMWD is unable to directly contract with Camden MUD at this time. The District does not have any existing contracts with MUD/SUD's and those contracts usually never price out in favor of the developer.

The Parker Creek interceptor is the NTMWD owned interceptor that the property is adjacent to. This interceptor is paid for by the Cities of Royse City and Fate. I would recommend you reach out to either participant to engage and negotiate a customer contract directly. The City of Rockwall has shown interest in participating into this interceptor, but Rockwall has not yet signed any contract with the District to discharge wastewater flows into this interceptor.

Let me know if you have any questions. Apologize we could not be of more help at this time.

Regards,
Shela

Shela R. Chowdhury, PE
NTMWD Planning
505 E. Brown St, Wylie TX
Tel: 469-626-4718
Cell: 617-504-4962

From: Kyle Hogue <Kyle.Hogue@rpsgroup.com>
Sent: Tuesday, March 30, 2021 8:10 AM
To: Shela Chowdhury <schowdhury@NTMWD.COM>
Subject: RE: Proposed Development in Royse City ETJ

Good morning Shela –

I have a meeting with our client on this and other projects this morning. I just wanted to follow up on this request and see if there was anything new to report from the District's end?

Thanks in advance.

Kyle Hogue, PE
Team Leader – Water
RPS | North America
T +1 214 951 0807
E kyle.hogue@rpsgroup.com

From: Shela Chowdhury <schowdhury@NTMWD.COM>
Sent: Thursday, March 25, 2021 4:12 PM
To: Kyle Hogue <Kyle.Hogue@rpsgroup.com>
Cc: Yanbo Li <yli@NTMWD.COM>
Subject: RE: Proposed Development in Royse City ETJ

Kyle,
Thanks for the update. We have also reached out to a few of our contacts and waiting to hear back. We are still not sure which of our member City to reach out to for service to this area.

Will keep you posted.
Thanks,
Shela

Shela R. Chowdhury, PE
NTMWD Planning
505 E. Brown St, Wylie TX
Tel: 469-626-4718
Cell: 617-504-4962

From: Kyle Hogue <Kyle.Hogue@rpsgroup.com>
Sent: Thursday, March 25, 2021 3:59 PM
To: Shela Chowdhury <schowdhury@NTMWD.COM>
Subject: RE: Proposed Development in Royse City ETJ

Good afternoon Shela –

I spoke with Planning Director for the City of Rockwall, Ryan Miller, later in the day Tuesday who could not confirm whether they had a sewer CCN. He stated they had whatever they needed in place to provide service within the city limits but they were not necessarily responsible for providing sewer to our property as it is currently unincorporated. He did confirm our property is in the Rockwall ETJ and that there had been earlier discussions with Royse City about 'releasing' the property which Rockwall City Council was not willing to do.

With regards to the Sabine Creek WWTP, Mr. Miller reports that it currently only serves Fate and Royse City. However he reports Rockwall has plans to participate in the expansion of the Sabine Creek facility.

Just wanted to check in and see if you have found anything else out on your end regarding our options for arrangements with NTMWD.

Thanks in advance and please let me know if you need anything else from me.

Kyle Hogue, PE
Team Leader – Water
RPS | North America
T +1 214 951 0807
E kyle.hogue@rpsgroup.com

From: Shela Chowdhury <schowdhury@NTMWD.COM>
Sent: Monday, March 22, 2021 6:04 PM
To: Kyle Hogue <Kyle.Hogue@rpsgroup.com>
Subject: RE: Proposed Development in Royse City ETJ

Kyle,
I'm available at 10a tomorrow.
Thanks,
Shela

From: Kyle Hogue <Kyle.Hogue@rpsgroup.com>
Sent: Monday, March 22, 2021 5:15 PM
To: Shela Chowdhury <schowdhury@NTMWD.COM>
Subject: RE: Proposed Development in Royse City ETJ

Good afternoon Shela –

Just wanted to check in and give you an update on my research on this one. Turns out this property is not located within a sewer CCN. We are just outside of the Fate and Royse City CCN, within the Rockwall ETJ but my understanding is Rockwall does not have a sewer CCN.

Would you have some time to chat tomorrow morning to discuss next steps?

Thanks in advance.

Kyle Hogue, PE
Team Leader – Water
RPS | North America
T +1 214 951 0807
E kyle.hogue@rpsgroup.com

From: Shela Chowdhury <schowdhury@NTMWD.COM>
Sent: Thursday, March 11, 2021 12:52 PM
To: Kyle Hogue <Kyle.Hogue@rpsgroup.com>
Cc: Kevin McNeely <kmcneely@NTMWD.COM>; Yanbo Li <yli@NTMWD.COM>; Carlos Flores <cflores@NTMWD.COM>
Subject: RE: Proposed Development in Royse City ETJ

Thanks for the update Kyle,
Let us know the correct CCN jurisdiction.
Shela

Shela R. Chowdhury, PE
NTMWD Planning
505 E. Brown St, Wylie TX
Tel: 469-626-4718
Cell: 617-504-4962

From: Kyle Hogue <Kyle.Hogue@rpsgroup.com>
Sent: Thursday, March 11, 2021 9:22 AM
To: Shela Chowdhury <schowdhury@NTMWD.COM>
Subject: RE: Proposed Development in Royse City ETJ

Good morning Shela –

Thank you again for your time yesterday to discuss this request. Below are my responses to your requests:

- Per the PUC's on-line maps, this property is bordered by but not included in the Fate or Royse City CCN. I have attached a map illustrating these borders, the Camden MUD property and location of the Sabine Creek WWTP. I am currently searching for more current resources and will keep you posted.
- The average daily flow for this development at build out is approximately 350,000 GPD with a peak flow just over 550,000 GPD. I have a meeting with the developer tomorrow and can discuss his plans for phasing to respond to the last part of this question.

I do realize I have not provided the complete information you have requested but I wanted to update you and get the info I do have back to you ASAP.

Please let me know if there is anything additional you need from me in light of this information.

Thanks in advance.

Kyle Hogue, PE
Team Leader – Water
RPS | North America
T +1 214 951 0807
E kyle.hogue@rpsgroup.com

From: Shela Chowdhury <schowdhury@NTMWD.COM>
Sent: Wednesday, March 10, 2021 4:06 PM
To: Kyle Hogue <Kyle.Hogue@rpsgroup.com>
Cc: Kevin McNeely <kmcneely@NTMWD.COM>; Yanbo Li <yli@NTMWD.COM>; Carlos Flores <cflores@NTMWD.COM>
Subject: FW: Proposed Development in Royse City ETJ

Kyle,
Appreciate touching base with you today regarding the proposed wastewater connection. As discussed, there were a couple of things for you to confirm before we can proceed:

- Confirm who owns the Sewer CCN for this parcel. PUC TX may have maps, but sometimes those are not current.
- Send projected Avg Daily Flows and Peak Flows for this development for both first day of connection and buildout.

Thanks for reaching out to us.

Regards,
Shela

Shela R. Chowdhury, PE
NTMWD Planning
505 E. Brown St, Wylie TX
Tel: 469-626-4718
Cell: 617-504-4962

From: Kevin McNeely <kmcneely@NTMWD.COM>
Sent: Tuesday, March 9, 2021 1:14 PM
To: Shela Chowdhury <schowdhury@NTMWD.COM>
Subject: FW: Proposed Development in Royse City ETJ

Here are some files associated with the previous email I sent you.

Kevin McNeely
Development Coordinator
North Texas Municipal Water District
505 East Brown Street | Wylie, Texas 75098
Office 469-626-4750

From: Kyle Hogue <Kyle.Hogue@rpsgroup.com>
Sent: Tuesday, March 9, 2021 12:13 PM
To: Kevin McNeely <kmcneely@NTMWD.COM>
Subject: Proposed Development in Royse City ETJ

Kevin –

Thanks for taking a couple minutes to discuss this project with me a bit ago. I have attached a PDF of the subdivision layout as well as an aerial showing the Sabine Creek WWTP and where I believe at least some of the NTMWD facilities are located on or adjacent to our property. Please feel free to forward these to Sheila for discussion and all of my contact info is listed below.

Thanks in advance and please let me know if you have any questions.

Kyle Hogue, PE
Team Leader – Water
RPS | North America
2777 North Stemmons Freeway, Suite 1102
Dallas, TX 75207, USA
T +1 214 951 0807
D +1 469 677 3005 **M** +1 214 695 1922
E kyle.hogue@rpsgroup.com

Internet communications are not secure and RPS is not responsible for their abuse by third parties, any alteration or corruption in transmission or for any loss or damage caused by a virus or by any other means.

RPS Group Plc web link: http://www.rpsgroup.com

This e-mail message and any attached file is the property of the sender and is sent in confidence to the addressee only.

Internet communications are not secure and RPS is not responsible for their abuse by third parties, any alteration or corruption in transmission or for any loss or damage caused by a virus or by any other means.

RPS Group Plc web link: http://www.rpsgroup.com

This e-mail message and any attached file is the property of the sender and is sent in confidence to the addressee only.

Internet communications are not secure and RPS is not responsible for their abuse by third parties, any alteration or corruption in transmission or for any loss or damage caused by a virus or by any other means.

RPS Group Plc web link: http://www.rpsgroup.com

This e-mail message and any attached file is the property of the sender and is sent in confidence to the addressee only.

Internet communications are not secure and RPS is not responsible for their abuse by third parties, any alteration or corruption in transmission or for any loss or damage caused by a virus or by any other means.

RPS Group Plc web link: http://www.rpsgroup.com

This e-mail message and any attached file is the property of the sender and is sent in confidence to the addressee only.

Internet communications are not secure and RPS is not responsible for their abuse by third parties, any alteration or corruption in transmission or for any loss or damage caused by a virus or by any other means.

RPS Group Plc web link: http://www.rpsgroup.com

Attachment 10

Design Calculations

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

Parameter	Concentration
BOD_5	250mg/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:

Flow	**Gallons Per Day**	**Gallons Per Minute**
Average Daily Flow (Q_{ave})	550,000	382.0
Peak 2-Hour Flow (Q_{pk})	2,200,000	1,527.8
Loading	**Pounds Per Day**	
BOD_5	1,147.5	

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

Process: Conventional activated sludge process

BOD_5 = 20 mg/L; TSS = 20 mg/L

Treatment Units

Table 1: Aeration Basin

Aeration Basin	TCEQ Requires	Actual Provided
Organic Loading Rate (lbs/day/1000 ft^3)	35	35
Total Aeration Volume (ft^3)	32,764 (2 – 16,382 ft^3 Aeration Basins)	32,764 (2 – 16,382 ft^3 Aeration Basins)

Table 2: Clarifier

Clarifier	TCEQ Requires	Actual Provided
Surface Loading Rate (Q_{pk}) (gallons/day/ft^2)	1,200 (Max)	1,143
Detention Time (Q_{pk}) (hr)	1.8 (Min)	2.0
Surface Area (ft^2)	1,833	1,924
Volume (ft^3)	23,833	25,015
Side-Water Depth (ft)	13	13
Diameter (ft)	2 – 35 ft Diameter Tanks	2 – 35 ft Diameter Tanks

Table 3: Aerobic Digester

Aerobic Digester	TCEQ Requires	Actual Provided
MCRT at 20°C (days)	40 (Min)	40.7
WAS solids production (ppd)	Not Specified	1,404
Digested sludge solids production (ppd)	Not Specified	842
Required solids in digester (lbs)	Not Specified	28,615
Digester Volume (ft^3)	Not Specified	22,935 (2 – 11,468 ft^3 Digesters)

Table 4: Chlorine Contact Chamber

Chlorine Contact Tank	TCEQ Requires	Actual Provided
Detention time (Q_{pk}) (minutes)	20	20
Volume (Q_{pk}) (ft^3)	4,085	4,085

Attachment 10

Facility Design Requirements

Emergency Power Requirements

The treatment facility will incorporate an on-site automatically starting generator capable of continuously operating all critical wastewater treatment system units. The fuel tank will be sized for a run time of 24 hours. This generator will provide sufficient power for the following units:

1. 3 – Influent Lift Station Pumps (Meet firm capacity with two pumps)
2. 3 – Blowers for aeration and airlift pump (Meet firm capacity with two blowers)
3. 2 – Final Clarifier Sludge Scrapers
4. Chlorination System
5. Effluent Metering Station
6. Lighting Panels and Control Equipment

An automatic transfer switch will be included to transfer electrical loads to the generator during an outage. The blowers and disinfection system will automatically restart during a power outage and upon transfer back to the main power source. The lift station pumps will be controlled by wet level.

Alarm Features

The facility will be equipped with a Supervisory Control and Data Acquisition (SCADA) system to monitor the operation of all critical treatment units. The control room will include a computer of the treatment units that will indicate status and alarm conditions. The computer system will include an auto dialer to alert facility personnel of the following conditions:

1. Power Outage
2. Phase Failure
3. Influent Lift Station Wet Well High Level
4. Blower Failure
5. Final Clarifier Torque Overload

The auto dialer will store prerecorded messages concerning each alarm condition and the procedure to be followed and will call members of facility personnel until the alarm condition is acknowledged. The influent lift station and final clarifiers will also be equipped with local alarm lights for high level and high torque respectively.

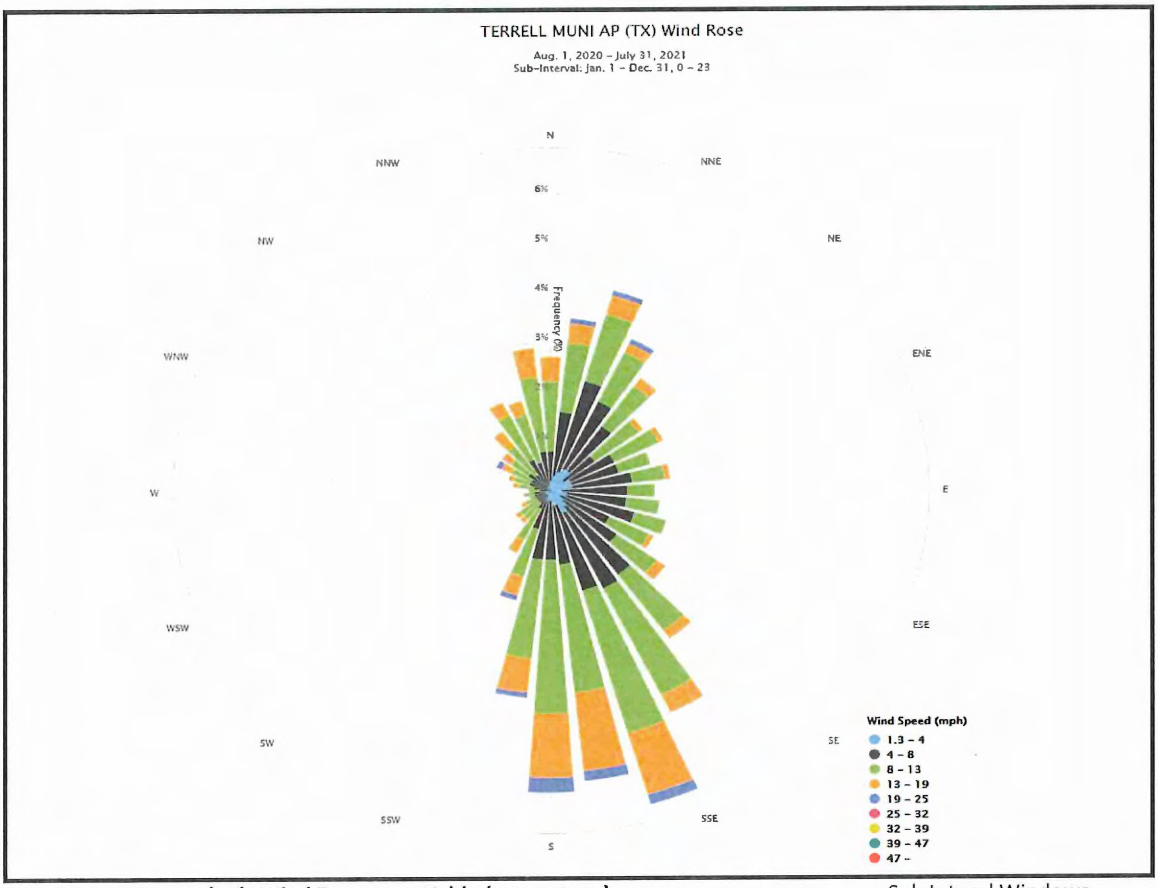
Design Features for Reliability and Operating Flexibility

1. Influent Lift Station: The influent lift station will include three submersible pumps sized to meet peak flow pumping capacity with the largest unit out of service. Level switches will automatically start and stop the pumps based on influent flows and rising and falling wet well levels. High wet well level will result in an alarm condition.
2. Aeration Basins: Two aeration basins will be included, each capable of continuous operation. Piping and valves will be included to allow each unit to be individually isolated for draining, cleaning or repairs.
3. Clarifier: Two clarifies will be included, each capable of continuous operation. Piping and valves will be included to allow each unit to be individually isolated for draining, cleaning or repairs.
4. Digester: Two digesters will be included, each capable of continuous operation. Piping and valves will be included to allow each unit to be individually isolated for draining, cleaning or repairs.

Overflow Prevention

The following design features will be used to prevent the overflow of wastewater from treatment units.

1. The facility design includes a peaking factor of 4.0 to insure adequate hydraulic capacity.
2. The influent lift station will be designed with the capacity to pump peak flow with the largest single pump out of service.
3. The facility hydraulic design, including piping, channels, weirs, troughs and other features, will be size to allow the 2-hour peak flow to pass through the facility without exceeding minimum freeboard requirements with any single treatment unit out of service.



TERRELL MUNI AP (TX)- Wind Frequency Table (percentage)

					Sub Interal Windows	
					Start	End
Latitude:	32.7100	Start Date:	Aug. 1, 2020			
Longitude:	-96.2672	End Date:	July 31, 2021	Date	Jan. 1	Dec. 31
Elevation:	475 ft.	# of Days:	365 of 365	Hour	0	24
Element:	Mean Wind Speed		# obs of poss: 8542 of 8760			

(Greater than or equal to initial interval value and Less than ending interval value.)

Range (mph)	0	10	20	30	40	50	60	70	80	90	100	110	120	130	140	150	160	170	180
1.3 - 4	0.2	0.3	0.4	0.5	0.5	0.3	0.4	0.4	0.4	0.2	0.3	0.3	0.2	0.3	0.4	0.5	0.3	0.3	0.2
4 - 8	0.6	1.3	1.9	1.5	1.1	0.7	0.9	0.9	1.1	1.2	1.1	1.3	1	1.2	1.7	1.7	1.8	1.2	1.2
8 - 13	1.4	1.4	1.4	1.1	1	1	0.9	0.6	0.6	0.5	0.6	0.6	0.8	0.9	1.4	2.4	3	2.6	3.1
13 - 19	0.5	0.4	0.4	0.2	0.2	0.1	0.1	0	0.1	0	0	0	0.1	0.2	0.2	0.4	1.3	1.6	1.3
19 - 25	0	0.1	0.1	0.1	0	0	0	0	0	0	0	0	0	0	0	0	0.2	0.2	0.3
25 - 32	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total(%)	2.6	3.3	4.1	3.4	2.7	2.2	2.3	2	2.2	2	2	2.2	2.2	2.6	3.6	5.1	6.5	5.9	6.1
Calm (<1.3)																			
Ave. Speed	9.7	8.6	8.1	7.6	7.5	7.8	7	6.6	6.6	6.5	6.6	6.6	7.2	7.4	7.5	8.2	10.1	11	10.6

Range (mph)	190	200	210	220	230	240	250	260	270	280	290	300	310	320	330	340	350	Total
1.3 - 4	0.2	0.2	0	0.1	0.1	0.1	0.1	0.1	0	0	0	0.1	0.1	0	0.1	0.1	0.1	8
4 - 8	1.2	0.6	0.4	0.2	0.2	0.2	0.2	0.2	0.2	0.3	0.4	0.3	0.4	0.4	0.6	0.5	0.7	30
8 - 13	2	1	0.7	0.4	0.4	0.2	0.1	0.2	0.2	0.3	0.3	0.4	0.4	0.7	1	1	1.5	36.3
13 - 19	0.7	0.4	0.3	0.1	0.1	0.1	0	0	0	0.1	0.1	0.2	0.2	0.4	0.3	0.3	0.6	10.8
19 - 25	0.1	0.1	0	0	0	0	0	0	0	0	0	0.1	0	0	0	0	0	1.6
25 - 32	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.2
Total(%)	4.2	2.3	1.5	0.9	0.7	0.5	0.4	0.5	0.6	0.7	0.8	1.1	1.2	1.5	2	1.9	2.9	86.8
Calm (<1.3)																		13.1
Ave. Speed	9.8	10	10.4	9.1	9.3	8.9	9.1	8.7	9	10.2	9.4	10.1	9	10.6	9.4	9.5	10.2	7.7

rps MAKING COMPLEX EASY
Texas PE Firm Reg. #F-929
2777 North Stemmons Freeway, Suite 1102, Dallas, Texas 75207
T +1 214 951 0807 E usinfrastructure@rpsgroup.com

ATTACHMENT 11
WIND ROSE
CAMDEN PARC
MUNICIPAL UTILITY DISTRICT
ROCKWALL, TX

August 2021

Attachment 12

Sewage Sludge Solids Management Plan

Influent Design Flow = 0.55 mgd

Influent BOD Concentration = 250 mg/L

Aerobic Digester Volume = 171,554 gallons

Table 1: Sludge Production

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Pounds Influent BOD5	1147	860	573	287
Pounds of Digested Dry Sludge Produced*	401	301	201	100
Pounds of Wet Sludge Produced	20068	15051	10034	5017
Gallons of Wet Sludge Produced	2406	1805	1203	602

***Assuming 0.35 pounds of digested dry sludge produced per pound of influent BOD_5 at average temperatures and 2.0% solids concentration in the digester.**

Sludge solids will be stabilized in the digester; supernatant will be decanted from the digester and continue treatment process.

Table 2: Sludge Removal Schedule

Removal Schedule (days)	100% Flow	75% Flow	50% Flow	25% Flow
Days between Sludge Removal	50	67	100	200

Liquid digested sludge will be removed from the digester for disposal on a regular basis as required. The calculated mean cell residence time (MCRT) for the digester storage volume of 171,554 gallons will be approximately 50 days at 100% capacity and annual average digested sludge production of 401 ppd. The digested sludge will be transported by registered hauler, Bowman Environmental, Registration No. 2010 to City of Italy WWTP, Permit No. TX123056 in Ellis County.

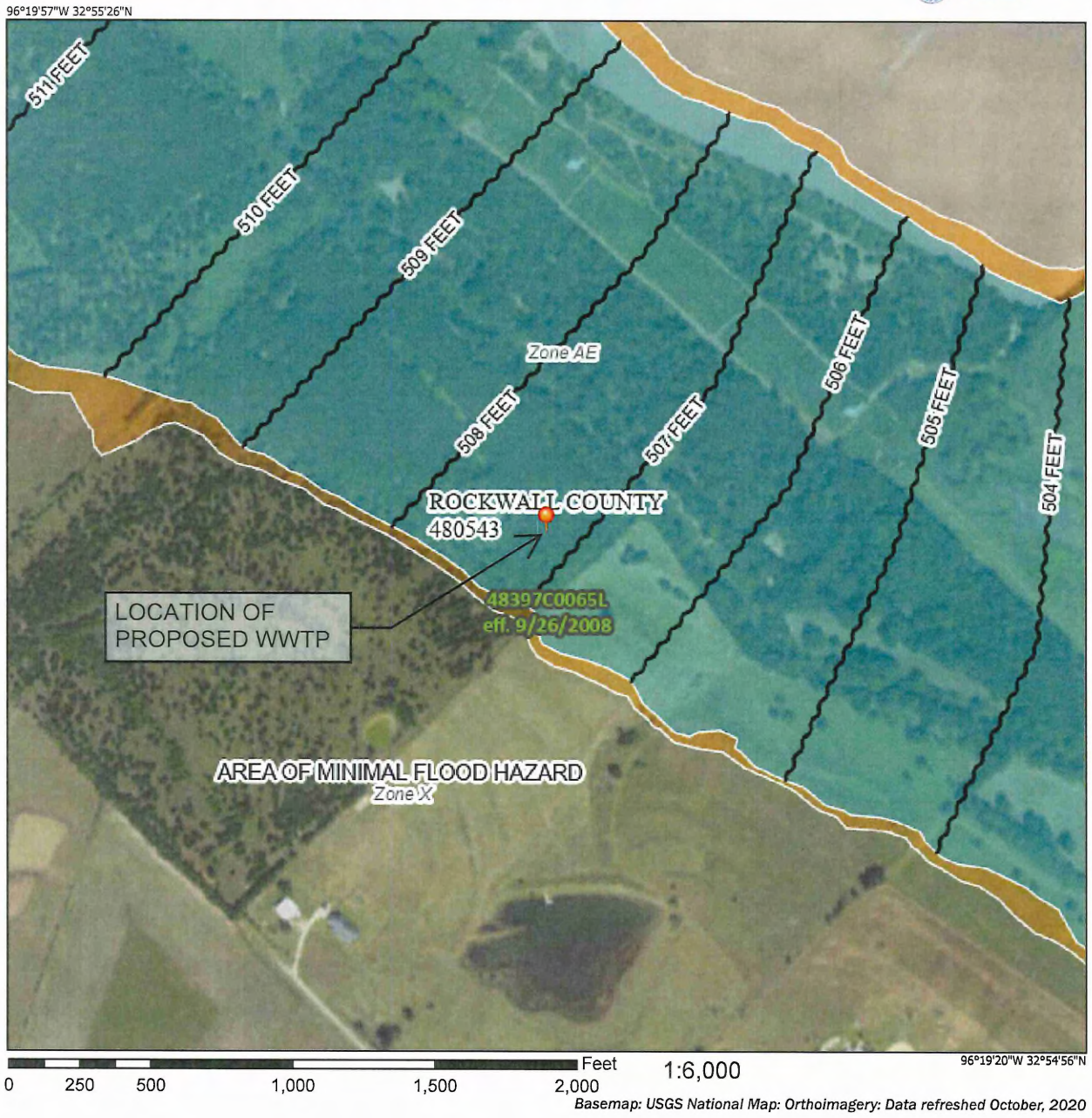
Commented [NL1]: Language from New Fairview. Need sludge disposal arrangement for Royse City.

ATTACHMENT 13:SLUDGE AGREEMENT WITH BOWMAN ENVIRONMENTAL ENTERPRISES, LLC PENDING NEGOTIATIONS

ATTACHMENT 14

National Flood Hazard Layer FIRMette

FEMA



Basemap: USGS National Map: Orthoimagery: Data refreshed October, 2020

Legend

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

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

N

The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 8/13/2021 at 3:50 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.