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

FOR

LOCKHART LANDING WASTEWATER TREATMENT PLANT

APRIL 2022

PREPARED FOR

GREENWODD VENTURES GROUP, LLC 101 PARKLANE BOULEVARD, SUITE 102 SUGAR LAND, TEXAS 77478

Prepared by

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



4/13/22, 1:24 PM TCEQ ePay

Ouestions or Comments >>

Sign Out **Shopping Cart** Select Fee **Search Transactions**

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

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

Transaction Information

Trace Number: 582EA000487918

Date: 04/13/2022 01:22 PM

Payment Method: CC - Authorization 0000013637

ePay Actor: LAUREN CRONE Actor Email: lcrone@lja.com **IP:** 170.55.94.226

TCEQ Amount: \$1,650.00 **Texas.gov Price:** \$1,687.38*

Payment Contact Information

Name: JOHN CLARK

Company: LJA ENGINEERING INC

Address: 3600 W SAM HOUSTON PKWY S, HOUSTON, TX 77042

Phone: 512-439-4700

Cart Items

Click on the voucher number to see the voucher details.

Voucher	Fee Description	AR Number	Amount
573287	WW PERMIT - FACILITY WITH FLOW >= .50 & < 1.0 MGD - NEW AND MAJOR AMENDMENTS		\$1,600.00
573288	30 TAC 305.53B WQ NOTIFICATION FEE	TCEQ Amount:	\$50.00 \$1,650.00

ePay Again Exit ePay

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

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May 25, 2022

Leah Whallon Applications Review and Processing Team Water Quality Division – TCEQ, MC 148 12100 Park 35 Circle Austin, Texas 78753

Re: Lockhart Landing WWTP

Proposed by Greenwood Ventures Group LLC

Application No. WQ0016148001

LJA Project No. A474

Dear Ms. Whallon:

Please find the responses related to the permit application for Lockhart Landing WWTP received May 20, 2022 below.

1. Section II, Item no. 17 of the Core Data Form. Please provide an email address for the customer.

Response: Please see the updated Core Data Form.

2. Section III, Item no. 25 of the Core Data Form. Please provide a revised physical description that uses an accurate distance from the nearest intersection. The location of the coordinates listed for the facility location is approximately 1.87 miles southwest of the intersection of County Road 214 and US Hwy 183.

Response: Please see the updated Core Data Form.

- 3. Section III, Item no. 26 of the Core Data Form. Please revise the nearest ZIP code to the facility. The proposed facility location is within zip code 78644. Response: Please see the updated Core Data Form.
- 4. Section 6 of Administrative Report 1.0. Please provide an email address for the billing contact.

Response: An email address has been provided in Section 6.

5. Section 10, Item A of Administrative Report 1.0. Please revise the proposed facility location description as discussed in no. 2 of this letter.

Response: The location has been updated in Section 10.

6. Section 14 pf the Administrative Report. Please provide an original wet-ink signature. Response: The wet-ink signature has been added to Section 14.



7. Section 1, Item A of Administrative Report 1.1. Affected Landowner Information. Please provide a revised landowners map that includes the point of discharge and highlighted discharge route for one mile downstream.

Response: The discharge route has been added to the Affected Landowner map.

8. Section 1, Item B of Administrative Report 1.1. Affected Landowner Information. Please provide the separate cross-referenced landowners list with the landowner names and mailing addresses.

Response: A separate affected landowner list has been included with this update.

- 9. Section 1, Item C of Administrative Report 1.1 Affected Landowner Information. No mailing labels were found with the application. Please provide either four copies of mailing labels or a Microsoft Word document containing the landowners list formatted for mailing labels. Response: Four copies of address labels are included in this update.
- 10. Supplemental Permit Information Form (SPIF) Item no. 1. Please revise the proposed facility location description as discussed in no. 2 of this letter.

 Response: The facility location included on the SPIF has been updated.
- 11. The following is a portion of the Notice of Receipt of Application and Intent to Obtain a Water Quality Permit (NORI) which contains information relevant to your application. Please read it carefully and indicate if it contains any errors or omissions. The complete notice 3illi be sent to you once the application is declared administratively complete.

 Response: No errors were found in the NORI.
- 12. Section 8, Item E No. 5 of Administrative Report 1.0 indicates that public notices in Spanish are required. After confirming the portion of the NORI contained in this letter does not contain any errors or omissions, please use the attached template to translate the NORI into Spanish. Only the

Response: The Spanish NORI is attached.

- 13. Please see the attached Plain Language Summary (PLS) Template to provide a plain language summary in English. Please provide in a Microsoft Word document. Response: A print of the English PLS is included with this update. The Word document will be emailed separately.
- 14. Please use the attached PLS Spanish template to translate the plain language summary into Spanish. Please provide the translated Spanish PLS in a Microsoft Word document. Response: A print of the Spanish PLS is included with this update. The Word document will be emailed separately.



Should you have any questions or need any additional information, please do not hesitate to call.

Sincerely,

Lauren Crone, P.E.



Jon Niermann, *Chairman*Emily Lindley, *Commissioner*Bobby Janecka, *Commissioner*Toby Baker, *Executive Director*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

May 20, 2022

Mr. Daniel Ryan, P.E. LJA Engineering, Inc. 7500 Rialto Boulevard, Suite 100 Austin, Texas 78735

VIA EMAIL

Re:

Application to Obtain Permit No. WQ0016148001 Proposed by Greenwood Ventures Group LLC CN606011039, RN111484846

Dear Mr. Ryan:

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

- Section II, Item no. 17 of the Core Data Form Please provide an email address for the customer.
- Section III, Item no. 25 of the Core Data Form
 Please provide a revised physical location description that uses an accurate distance
 from the nearest intersection. The location of the coordinates listed for the facility
 location is approximately 1.87 miles southwest of the intersection of County Road 214
 and U.S. Highway 183.
- 3. Section III, Item no. 26 of the Core Data Form Please revise the nearest ZIP code to the facility. The proposed facility location is within ZIP code 78644.
- 4. Section 6 of Administrative Report 1.0 Please provide an email address for the billing contact.
- 5. Section 10, Item, Item A of Administrative Report 1.0 Please revise the proposed facility location description as discussed in no. 2 of this letter.
- 6. Section 14 of Administrative Report 1.0 Please provide an original wet-ink signature page.
- 7. Section 1, Item A of Administrative Report 1.1 Affected Landowner Information Please provide a revised landowners map that includes the point of discharge and highlighted discharge route for one mile downstream.

Mr. Daniel Ryan, P.E. Page 2 May 20, 2022 Permit No. WQ0016148001

- 8. Section 1, Item B of Administrative Report 1.1 Affected Landowner Information Please provide the separate cross-referenced landowners list with the landowner names and mailing addresses.
- 9. Section 1, Item C of Administrative Report 1.1 Affected Landowner Information No mailing labels were found with the application. Please provide either four copies of mailing labels or a Microsoft Word document containing the landowners list formatted for mailing labels.
- 10. Supplemental Permit Information Form (SPIF), Item no. 1
 Please revise the proposed facility location description as discussed in no. 2 of this letter.
- 11. The following is a portion of the Notice of Receipt of Application and Intent to Obtain a Water Quality Permit (NORI) which contains information relevant to your application. Please read it carefully and indicate if it contains any errors or omissions. The complete notice will be sent to you once the application is declared administratively complete.

APPLICATION. Greenwood Ventures Group LLC, 101 Parklane Boulevard, Suite 102, Sugar Land, Texas 77478, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016148001 (EPA I.D. No. TX0142794) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 975,000 gallons per day. The domestic wastewater treatment facility will be located approximately 1.87 miles southwest of County Road 214 and U.S. Highway 183, in Caldwell County, Texas 78644 (pending response). The discharge route will be from the plant site to an unnamed tributary; thence to West Fork Plum Creek; thence to Plum Creek. TCEQ received this application on April 20, 2022. The permit application is available for viewing and copying at Lockhart City Hall, 308 West San Antonio Street, Lockhart, Texas. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

https://tceq.maps.arcgis.com/apps/webappviewer/index.html?id=db5bac44afbc468bbddd360f8168250f&marker=-97.700833%2C29.796111&level=12

Further information may also be obtained from Greenwood Ventures Group LLC at the address stated above or by calling Mr. Daniel Ryan, P.E., LJA Engineering, Inc., at 512-439-4700.

New rule requirements under Title 30 Texas Administrative Code (TAC) Chapter 39 relating to public notices have been implemented. The deficiencies listed below are new items that need to be provided to meet the alternative language requirements.

- 12. Section 8, Item E, No. 5 of Administrative Report 1.0 indicates that public notices in Spanish are required. After confirming the portion of the NORI contained in this letter does not contain any errors or omissions, please use the attached template to translate the NORI into Spanish. Only the first and last paragraphs are unique to this application and require translation. Please provide the translated Spanish NORI in a Microsoft Word document.
- 13. Please use the attached Plain Language Summary (PLS) Template to provide a plain language summary in English. Please provide the PLS in a Microsoft Word document.

Mr. Daniel Ryan, P.E. Page 3 May 20, 2022 Permit No. WQ0016148001

14. Section 8, Item E, No. 5 of Administrative Report 1.0 indicates that public notices in Spanish are required. Please use the attached PLS Spanish template to translate the plain language summary into Spanish. Please provide the translated Spanish PLS in a Microsoft Word document.

Please submit the complete response, addressed to my attention by June 3, 2022. If you should have any questions, please do not hesitate to call me at (512) 239-0084.

Sincerely,

Leah Whallon

Application Review and Processing Team (MC 148)

Water Quality Division

Texas Commission on Environmental Quality

Jean Whallor

Enclosures:

Attachment 1 - Municipal Discharge New Spanish NORI

Attachment 2 - Municipal TPDES and TLAP PLS Form

Attachment 3 - Municipal TPDES and TLAP PLS Form (Spanish)



TCEQ Use Or	ılv
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TCEQ Core Data Form

S	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.)												
											program applicati	on.)	
	Renewal (Core Data Form should be submitted with the renewal form)												
	2. Custome	r Referer	nce Number <i>(if Iss</i>	ued)	Follow	v this li	ink to s	earch	3.	Regulate	ed Entity Reference	e Number	(if issued)
	CN for CN or RN numbers in Central Registry** RN												
S	SECTION II: Customer Information												
	4. General C	ustomer	Information	5. Effectiv	e Date f	or Cu	stome	er Infor	mat	ion Upd	ates (mm/dd/yyyy)		
	□ New Customer □ Update to Customer Information □ Change in Regulated Entity Ownership												
											of Public Accounts		
												rrent and	l active with the
-			of State (SOS)						Acc	counts	(CPA).		
-	6. Customer	Legal Na	ame (If an individual	, print last nar	ne first: e	g: Doe	, John)			If new C	ustomer, enter prev	ious Custon	ner below:
	Greenwood Ventures Group, LLC												
	7. TX SOS/CPA Filing Number 8. TX State Tax ID (11 digits) 9. Federal Tax ID (9 digits) 10. DUNS Number (#applic							S Number (if applicable)					
L	08044262	50		3208301	1356								
	11. Type of Customer: Corporation Individual Partnership: General Limited												
	Government: City County Federal State Other Sole Proprietorship Other: Limited Liability Company							ompany					
	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:												
	211 E 7 th St. Ste. 620												
	15. Mailing Address:							-					
L	City Austin				State TX				ZIP 78701		ZIP+4		
L	16. Country I	Mailing Ir	formation (if outsid	e USA)				17. E-	Mai	l Addres	S (if applicable)		
L	mark@ashtongreydev.com												
18. Telephone Number 19. Extension or						on or (Code	20. Fax Number (if applicable)				ble)	
	(713)875-0009 () .												
SI	SECTION III: Regulated Entity Information												
							y" is se	elected i	belo	w this fo	rm should be accor	mpanied by	a permit application)
-1-	New Regu				` _						Entity Information		
	The Regula of organiza	ited En	tity Name subr endings such a	nitted may s Inc, LP,	be up or LL(date C).	d in (order	to r	neet T	CEQ Agency D	ata Stand	lards (removal
	22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)												

Lockhart Landing Wastewater Treatment Plant

23. Street Addres																
the Regulated Er (No PO Boxes)	ntity:	6 11		1			T									
24. County		City	J	11.00			State			ZIP			ZI	P+4	The same of the sa	
z-r. County		Calo		II Co			-ti Di-ti	If	-4							
25. Description to Physical Location: The property is approximately 1.87 miles southwest and County Road 214 in Caldwell County, Texas.									ersect	ion of	f Hwy 18:	3				
26. Nearest City State									Nea	rest ZIP Co	de					
Lockhart									TX				78644			
27. Latitude (N) In	ı Decim	al:		29.7	96248			28	. Lor	ngitude (V	V) In D	ecimal:	-97.	70073	31	
Degrees		Minutes				Seco	onds	· De	grees			Minutes			Seconds	
29			4	47			46.49			-97			42		2.63	
29. Primary SIC C	ode (4 d	figits)	30.	Secon	dary SIC	Co	de (4 digits)	31. Primary NAICS Code (5 or 6 digits) 32. Secondary NAICS C				CS Code				
4952								22132)							
33. What is the Pr																
To treat and d	ispose	of do	ome	estic v	vastew	ate	r from the	propose	ed s	ubdivis	on.					
34 Mailing								211 E	7 th :	St. Ste. 62	0					
34. Mailing Address:																
Address.		Cit	у		Austin		State	TX		ZIP		78701	ZI	P+4		
35. E-Mail Address:																
36. Telephone Number 37.					37. Extensio	n or Cod	le		3	8. Fax Nu	mber <i>(i</i>	f applic	cable)			
(713) 875-9						() -										
9. 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 rm. See the Core Data Form instructions for additional guidance.							his									
Dam Safety		Dis	stricts	5			Edwards Aqui	fer	[Emissio	ns Inve	ntory Air	☐ In	dustrial	Hazardous W	aste
		· ·							E Poteslaum Stanna							
Municipal Solid W	aste	Ne	w So	ource Re	view Air	OSSF			Petroleum Stora			orage Tank PWS		WS		
Sludge		Storm Water			+	7 Title V Air		Tires					Used Oil			
						☐ Title V Air			Littes				U osed Oil			
☐ Voluntary Cleanup)	⊠ Wa	aste V	Nater		☐ Wastewater Agric			culture			ts Cthe		ther:		
							Wastewater Agriculture Water Rights					L. J Otier.				
ECTION IV:	Pre	arer	·In	form	ation								•			
lo. Name: Daniel I	Ryan,	P.E.						41. Title: Vice President								
42. Telephone Number 43. Ext./Code 44. Fax Number					45. E-Mail Address											
(512)439-4700 () -					dryan@lja.com											
ECTION V:	Auth	oriz	ed S	Sign	ature											
ECTION V: Authorized Signature 6. 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 gnature 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 entified in field 39.																
Company:	Greenw	ood Ve	enture	es Gro	ıp, LLC			Job Tit	le:	Manag	er					
Name (In Print):	Shaun '	Vembut	ty	7							Ph	one:	(713)	875 - 0 (009	
Signature:	A	W	7								Da	te:	4-	-13	, - 22	
											I.				000010	

First and Last Name: <u>Daniel Ryan</u> Credential (P.E. P.G., Ph.D., etc.): P.E.

Title: Vice President

Organization Name: LJA Engineering, Inc.

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

City, State, Zip Code: Austin, TX 78735

Phone No.: 512-439-4700 Ext.:

Fax No.:

E-mail Address: dryan@lja.com

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

First and Last Name: <u>Lauren Crone</u> Credential (P.E, P.G., Ph.D., etc.): <u>P.E.</u>

Title: Project Manager

Organization Name: LIA Engineering, Inc.

Mailing Address: 7500 Rialto Blvd., Building II, Suite100

City, State, Zip Code: Austin, TX 78735

Phone No.: 512-439-4700 Ext.:

Fax No.:

Fax No.:

E-mail Address: lcrone@lja.com

Section 6. Billing Information (Instructions Page 30)

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

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

First and Last Name: Shaun Vembutty

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

Title: Manager

Organization Name: <u>Greenwood Ventures Group, LLC</u> Mailing Address: <u>101 Parklane Boulevard, Suite 102</u>

City, State, Zip Code: Sugar Land, Texas 77478

Phone No.: 281-221-2699 Ext.:

E-mail Address: mark@ashtongreydev.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.

000011

Prefix (Mr., Ms., Miss): First and Last Name: Mailing Address: City, State, Zip Code: Phone No.: E-mail Address: If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions. Attachment: Pection 10. TPDES Discharge Information (Instructions Page 34) Is the wastewater treatment facility location in the existing permit accurate? Yes No If no, or a new permit application, please give an accurate description: New Permit: The proposed WWTP is located approximately 1.87 miles Southwest of the intersection of Hwy 183 and County Road 214 in Caldwell County, Texas.
Mailing Address: City, State, Zip Code: Phone No.: E-mail Address: If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions. Attachment: Cotion 10. TPDES Discharge Information (Instructions Page 34) Is the wastewater treatment facility location in the existing permit accurate? Yes No If no, or a new permit application, please give an accurate description: New Permit: The proposed WWTP is located approximately 1.87 miles Southwest of the
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If no , or a new permit application , please give an accurate description: New Permit: The proposed WWTP is located approximately 1.87 miles Southwest of the
New Permit: The proposed WWTP is located approximately 1.87 miles Southwest of the
New Permit: The proposed WWTP is located approximately 1.87 miles Southwest of the intersection of Hwy 183 and County Road 214 in Caldwell County, Texas.
I care to see y so that y see a see
Are the point(s) of discharge and the discharge route(s) in the existing permit correct?
□ Yes □ No
If no , or a new or amendment permit application , provide an accurate description of the point of discharge and the discharge route to the nearest classified segment as defined in
30 TAC Chapter 307:
New Permit: From the proposed treatment plant, effluent will be discharged into an onsite pond which is conveyed to West Fort Plum Creek. West Fort Plum Creek then flows
to the South to a junction with Plum Creek (Segment 1810), which then connects to the
San Marcos River (Segment 1808) at the Caldwell/Gonzales County Line.
City nearest the outfall(s): <u>Lockhart</u>
County in which the outfalls(s) is/are located: <u>Caldwell</u>
Outfall Latitude: <u>29.796248</u> Longitude: <u>-97.700731</u>
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:
\square Authorization granted \square Authorization pending

Section 14. Signature Page (Instructions Page 39)

page.
Permit Number:
Applicant: Greenwood Ventures Group, LLC
Certification:
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.
I further certify that I am authorized under 30 Texas Administrative Code § 305.44 to sign and submit this document, and can provide documentation in proof of such authorization upon request.
Signatory name (typed or printed): <u>Shaun Vembutty</u>
Signatory title: <u>Manager</u>
Signature:
(Use blue ink)
Subscribed and Sworn to before me by the said <u>Sudharchan Vembutty</u> on this <u>day of April</u> , 20 2 2 My commission expires on the <u>22 day of April</u> , 20 2 2
Notary Public [SEAL] SHAHBAZ ANWAR Notary Public, State of Texas County, Texas Notary ID 13063060-0

Section 14. Laboratory Accreditation (Instructions Page 64)

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

- The laboratory is an in-house laboratory and is:
 - o periodically inspected by the TCEO; or
 - located in another state and is accredited or inspected by that state; or
 - o performing work for another company with a unit located in the same site; or
 - o 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: Shaun Vembutty

Title: Manager

Signature: $\frac{1}{12-22}$ Date: $\frac{1}{12-22}$

Map Number	Property ID Number	Landowner Name	Landowner Address (1)	Landowner Address (2)
1	32245, 37983	LINDSEY LARRY J	1635 WESTWOOD BD	I OCKHABI TV 78644
2	37270, 73801, 13380, 120627 MCMINN WILLIAM CORY	MCMINN WILLIAM CORY	1114 WESTWOOD BD	LOCKHAN IN 10044
m	43939	LEMONS DENVER IOF	1202 WEST WOOD NO	LUCKHAKI IX /8644
			1303 WEST WOOD RD	LOCKHART TX 78644
1		CYRIEK JOHN P	1301 WESTWOOD RD	LOCKHART TX 78644
2		OLSEN ERNESTINE & JENS	874 GRAHAM RD	LOCKHART TX 78644
9		GRAHAM DONALD F & LOUISE C REV. LIV. TR.	905 GRAHAM RD	LOCKHART TX 78644
7		DOYLE JERRY	832 FM 671	LOCKHART TX 78644
∞	23455	O'KEEFE ROBERT & SUSAN	350 GOLDRUSH CIR	WIMBERIY TX 78676
6	32372	MURCHISON-BASS WANDA GAIL	135 WEST FORK RD	I OCKHART TX 78644
10	22505	VINKLAREK SUSAN E	8901 BROOK HILL LN	FORT WORTH TY 76344
11	22492	BONNELL RALPH E & JANICE D	6802 MANZANITA	ALISTIN TX 78759
12	22487	TWARDOWSKI RAYMOND J	126 CANYON OAKS DR	SAN ANTONIO VE COCOS
13	33645	TIMMS NICKY	715 SIERRA DR	LOCKHADT TV 705.44
14	40674	MATTHEWS TAMMY M & JAMES R	689 SIERBA DE	LOCKHARI IX 78644
15	45256	SIERRA FRICA H	SOU SIEMING DIV	LUCNITARI IA 78644
71		STATE THE STATE OF	PU BUX 62	SAN MARCOS TX 78667
TO		LORIEZ FELIX A	101 QUAIL RIDGE DR	KYLE TX 78640
1/1		NULL	NULL	NULL
20		MARTINEZ JUAN CARLOS & BONILLA GLENDA PATRICIA VELASQUEZ	5000 GOOD WOOD DR APT B	AUSTIN TX 78744
19	91146	BRADFORD JUSTIN & PAULA	130 PECANWOOD N	KYI F TX 78640
20	81539	BAUMBACH KEN & KRISTI	222 HIDDEN HOLLOW	I OCKHART TY 78644
21	81538, 81537	JONES STEVE & DEBBIE	229 HIDDEN HOLLOW	LOCKHADT TV 20644
22	81535	KEATON KERRI & JAMES	334 W MEDLOCK DR LINIT C102	DUDENIN AZ OLOGA
23	81534	LAMMERS MICHAEL I & DENISE M	OZO CDANICH OAKE BLOS	FINERIA AZ 65013
24	81533	HAVERDA BENIAMIN & CTEDIANIE	970 SPAINISH UARS BLVD	LOCKHART TX 78644
20	01116	- 1	1018 SPANISH OAKD BLVD	LOCKHART TX 78644
3 2	CHITC COST	SAINDOVAL INIARIO ALBERTO	15590 FM 1660	TAYLOR TX 76574
Q7	145/4, 16323	CE STEPHENS PROPERTIES LLC	680 WESTWOOD RD	LOCKLABT TV 70CAA

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:						
Application type:RenewalMajor Amend	lmentNinor AmendmentNew					
County: Seg	gment 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					
<u> This form applies to TPDES permit applications or</u>	<u>ıly.</u> (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 pefore the permit is issued. Each item must be completely addressed.						
Do not refer to a response of any item in the permone provided with this form separately from the admapplication will not be declared administratively conts entirety including all attachments.	inistrative report of the application. The					
The following applies to all applications:						
l. Permittee: <u>Greenwood Ventures Group, LLC</u>						
Permit No. WQ00	EPA ID No. TX					
Address of the project (or a location description and county):	that includes street/highway, city/vicinity,					
The proposed property is located approximately 1.87 Highway 183 in Caldwell County Texas 78644.	miles southwest of County Road 214 and US					
L						

Comisión de Calidad Ambiental del Estado de Texas



AVISO DE RECIBO DE LA SOLICITUD Y EL INTENTO DE OBTENER PERMISO PARA LA CALIDAD DEL AGUA

PERMISO PROPUES	TO NO. W	Qoo
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SOLICITUD. Greenwood Ventures Group LLC, 101 Parklane Boulevard, Suite 102, Sugar Land, Texas 77478, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016148001 (EPA I.D. No. TX0142794) del Sistema de Eliminación de Descargas de Contaminantes de Texas (TPDES)para autorizar la descarga de aguas residuales tratadas en un volumen que no sobrepasa un flujo promedio diario de 975,000 galones por día. La planta está ubicada aproximadamente 1.87 millas al suroeste de County Road 214 y U.S. Highway 183, en el condado de Caldwell, Texas. La ruta de descarga será desde el sitio de la planta hasta un afluente sin nombre; de allí a West Fork Plum Creek; de allí a Plum Creek. La TCEQ recibió esta solicitud el 20 de abril de 2022. La solicitud para el permiso está disponible para leerla y copiarla en Lockhart City Hall, 308 West San Antonio Street, Lockhart, Texas. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporciona como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

https://tceq.maps.arcgis.com/apps/webappviewer/index.html?id=db5bac44afbc468bbddd36of816825of&marker=-97.700833%2C29.796111&level=12

[Include the following non-italicized sentence if the facility is located in the Coastal Management Program boundary. The Coastal Management Program boundary is the area along the Texas Coast of the Gulf of México as depicted on the map in 31 TAC §503.1 and includes part or all of the following counties: Cameron, Willacy, Kenedy, Kleberg, Nueces, San Patricio, Aransas, Refugio, Calhoun, Victoria, Jackson, Matagorda, Brazoria, Galveston, Harris, Chambers, Jefferson y Orange.] El Director Ejecutivo de la TCEQ ha revisado esta medida para ver si está de acuerdo con los objetivos y las regulaciones del Programa de Administración Costero de Texas (CMP) de acuerdo con las regulaciones del Consejo Coordinador de la Costa (CCC) y ha determinado que la acción es conforme con las metas y regulaciones pertinentes del CMP.

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y emitirá una Decisión Preliminar sobre la solicitud. El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.

COMENTARIO PUBLICO / REUNION PUBLICA. Usted puede presentar

comentarios públicos o pedir una reunión pública sobre esta solicitud. El propósito de una reunión pública es dar la oportunidad de presentar comentarios o hacer preguntas acerca de la solicitud. La TCEQ realiza una reunión pública si el Director Ejecutivo determina que hay un grado de interés público suficiente en la solicitud o si un legislador local lo pide. Una reunión pública no es una audiencia administrativa de lo contencioso.

OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO.

Después del plazo para presentar comentarios públicos, el Director Ejecutivo considerará todos los comentarios apropiados y preparará una respuesta a todo los comentarios públicos esenciales, pertinentes, o significativos. A menos que la solicitud haya sido referida directamente a una audiencia administrativa de lo contencioso, la respuesta a los comentarios y la decisión del Director Ejecutivo sobre la solicitud serán enviados por correo a todos los que presentaron un comentario público y a las personas que están en la lista para recibir avisos sobre esta solicitud. Si se reciben comentarios, el aviso también proveerá instrucciones para pedir una reconsideración de la decisión del Director Ejecutivo y para pedir una audiencia administrativa de lo contencioso. Una audiencia administrativa de lo contencioso es un procedimiento legal similar a un procedimiento legal civil en un tribunal de distrito del estado.

PARA SOLICITAR UNA AUDIENCIA DE CASO IMPUGNADO, USTED DEBE INCLUIR EN SU SOLICITUD LOS SIGUIENTES DATOS: su nombre, dirección, y número de teléfono; el nombre del solicitante y número del permiso; la ubicación y distancia de su propiedad/actividad con respecto a la instalación; una descripción específica de la forma cómo usted sería afectado adversamente por el sitio de una manera no común al público en general; una lista de todas las cuestiones de hecho en disputa que usted presente durante el período de comentarios; y la declaración "[Yo/nosotros] solicito/solicitamos una audiencia de caso impugnado". Si presenta la petición para una audiencia de caso impugnado de parte de un grupo o asociación, debe identificar una persona que representa al grupo para recibir correspondencia en el futuro; identificar el nombre y la dirección de un miembro del grupo que sería afectado adversamente por la planta o la actividad propuesta; proveer la información indicada anteriormente con respecto a la ubicación del miembro afectado y su distancia de la planta o actividad propuesta; explicar cómo y porqué el miembro sería afectado; y explicar cómo los intereses que el grupo desea proteger son pertinentes al propósito del grupo.

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión. La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados posteriormente. Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios.

LISTA DE CORREO. Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la solicitud. Ademas, puede pedir que la TCEQ ponga su nombre en una or mas de las listas

correos siguientes (1) la lista de correo permanente para recibir los avisos de el solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envia por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

CONTACTOS E INFORMACIÓN A LA AGENCIA. Todos los comentarios públicos y solicitudes deben ser presentadas electrónicamente vía http://www14.tceq.texas.gov/epic/eComment/ o por escrito dirigidos a la Comisión de Texas de Calidad Ambiental, Oficial de la Secretaría (Office of Chief Clerk), MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Tenga en cuenta que cualquier información personal que usted proporcione, incluyendo su nombre, número de teléfono, dirección de correo electrónico y dirección física pasarán a formar parte del registro público de la Agencia. Para obtener más información acerca de esta solicitud de permiso o el proceso de permisos, llame al programa de educación pública de la TCEQ, gratis, al 1-800-687-4040. Si desea información en Español, puede llamar al 1-800-687-4040.

También se puede obtener información de Greenwood Ventures Group LLC a la dirección indicada arriba o llamando al Daniel Ryan, P.E., LJA Engineering, Inc., al 512-439-4700.

Fecha de emisión	[Date	notice	issued i
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Plain Language Summary - TPDES New Application

Greenwood Ventures Group LLC (CN606011039) proposes to operate the Lockhart Landing Wastewater Treatment Plant (RN111484846), an activated sludge process plant operated in the extended aeration mode. The facility will be located approximately 1.87 miles southwest of the intersection of County Road 214 and U.S. Highway 183, in Caldwell County, Texas 78644.

This application is for a new application to discharge at a daily average flow of 975,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand ($CBOD_5$), total suspended solids (TSS), ammonia nitrogen (NH_3 -N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater will be treated in an activated sludge process plant and the treatment units will include a bar screen, aeration basins, clarifiers, and chlorine contact chambers. A sludge digester will also be used for sludge holding prior to haul off.

PLANTILLA EN ESPAÑOL PARA SOLICITUDES NUEVAS/RENOVACIONES/ENMIENDAS TPDES o TLAP

AGUAS RESIDUALES DOMÉSTICAS

Greenwood Ventures Group LLC (CN606011039) propone operar la planta de tratamiento de aguas residuales de Lockhart Landing (RN111484846), una planta de proceso de lodos activados operada en el modo de aireación extendida. La instalación estará ubicada aproximadamente a 1.87 millas al suroeste de la intersección de County Road 214 y US Highway 183, en el condado de Caldwell, Texas 78644.

Esta solicitud es para una nueva solicitud para descargar a un flujo promedio diario de 975,000 galones por día de aguas residuales domesticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de (CBOD5) de cinco días, solidos suspendidos totales (TSS), nitrógeno amoniacal (NH3-N) y Escherichia coli. Los contaminantes potenciales adicionales se incluyen en el Informe técnico nacional 1.0, Sección 7. Análisis de contaminantes de efluentes tratados en el paquete de solicitud de permisos. Las aguas residuales domesticas serán tratadas en una planta de proceso de lodos activados y las unidades de tratamiento contaran con tamiz de aireación, clarificadores y cámaras de contacto de cloro. También se utilizara un digestor de lodos para retener los lodos antes de transportarlos.

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DOMESTIC TECHNICAL REPORT 1.0

DOMESTIC WORKSHEETS 2.0 AND 2.1

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APPENDIX B: USGS MAP

APPENDIX C: AFFECTED LANDOWNER MAP AND LIST

APPENDIX D: ORIGINAL PHOTOGRAPHS

APPENDIX E: BUFFER ZONE MAP

APPENDIX F: SPIF MAP

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EXHIBIT 1ADMINISTRATIVE REPORTS 1.0 AND 1.1

TCFO

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

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



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

APPLICATION FOR A DOMESTIC WASTEWATER PERMIT ADMINISTRATIVE REPORT 1.0

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

Section 1. Application Fees (Instructions Page 29)

Indicate the amount submitted for the application fee (check only one).							
Flow <0.05 MGD ≥0.05 but <0.10 MGD	New/Major Amendn \$350.00 □ \$550.00 □	nent Renewal \$315.00 □ \$515.00 □					
≥0.10 but <0.25 MGD ≥0.25 but <0.50 MGD ≥0.50 but <1.0 MGD	\$850.00 \(\square\) \$1,250.00 \(\square\) \$1,650.00 \(\square\)	\$815.00 □ \$815.00 □ \$1,215.00 □ \$1,615.00 □					
≥1.0 MGD Minor Amendment (for any flow	\$2,050.00 □	\$2,015.00 □					
Payment Information:) \$130.00 <u></u>						
	ey Order Number:	k here to enter text.					
Check/Mone	ey Order Amount: <u>\$1,6</u>	50.00					
Name Printe	ed on Check: <u>TCEQ</u>						
EPAY Voucher Nu	mber: Click here to en	tor text					
Copy of Payment Vouche	r enclosed?	Yes □					
Section 2. Type of Application (Instructions Page 29)							
		New TLAP					
☐ Major Amendment <u>with</u> Ren	newal	Minor Amendment with Renewal					
☐ Major Amendment <u>without</u>	Renewal \square	Minor Amendment without Renewal					
☐ Renewal without changes		Minor Modification of permit					
For amendments or modification	For amendments or modifications, describe the proposed changes:						
For existing permits:							
Permit Number: WQ00	to enter text.						
EPA I.D. (TPDES only): TX	ere to enter text.						

	Expi	iration	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?

Greenwood Ventures Group, LLC

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

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

CN: Click here to enter text.

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

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

First and Last Name: Shaun Vembutty

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

Title: Manager

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: Elick here to enter text

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

Prefix (Mr., Ms., Miss):

First and Last Name:

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

Title: Click here to

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: Appendix A

Section 4. Application Contact Information (Instructions Page 30)

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

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

First and Last Name: <u>Daniel Ryan</u> Credential (P.E, P.G., Ph.D., etc.): <u>P.E.</u>

Title: Vice President

Organization Name: LJA Engineering

Mailing Address: <u>7500 Rialto Blvd. Building II. Suite 100</u>

City, State, Zip Code: Austin, TX 78735

Phone No.: <u>512-439-4700</u> Ext.: Fax No.:

E-mail Address: dryan@lja.com

Check one or both:

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

First and Last Name: <u>Lauren Crone</u> Credential (P.E, P.G., Ph.D., etc.): <u>P.E.</u>

Title: <u>Project Manager</u>

Organization Name: LJA Engineering

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

City, State, Zip Code: Austin, TX 78735

Phone No.: <u>512-439-4700</u> Ext.: Fax No.:

E-mail Address: lcrone@lja.com

Check one or both:

Administrative Contact

Technical Contact

Section 5. Permit Contact Information (Instructions Page 30)

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

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

First and Last Name: <u>Daniel Ryan</u>

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

Title: Vice President

Organization Name: LJA Engineering, Inc.

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

City, State, Zip Code: Austin, TX 78735

Phone No.: 512-439-4700 Ext.: Fax No.:

E-mail Address: <u>dryan@lja.com</u>

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

First and Last Name: <u>Lauren Crone</u> Credential (P.E, P.G., Ph.D., etc.): <u>P.E.</u>

Title: Project Manager

Organization Name: LJA Engineering, Inc.

Mailing Address: <u>7500 Rialto Blvd.</u>, <u>Building II</u>, <u>Suite100</u>

City, State, Zip Code: Austin, TX 78735

Phone No.: <u>512-439-4700</u> Ext.: Fax No.:

E-mail Address: lcrone@lja.com

Section 6. Billing Information (Instructions Page 30)

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

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

First and Last Name: Shaun Vembutty

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

Title: Manager

Organization Name: <u>Greenwood Ventures Group, LLC</u> Mailing Address: <u>101 Parklane Boulevard, Suite 102</u>

City, State, Zip Code: Sugar Land, Texas 77478

Phone No.: <u>281-221-2699</u> Ext.: Fax No.:

E-mail Address: mark@ashtongreydev.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): <u>Mr.</u>

First and Last Name: Shaun Vembutty

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

Title: Manager

Organization Name: <u>Greenwood Ventures Group, LLC</u> Mailing Address: <u>101 Parklane Boulevard, Suite 102</u>

City, State, Zip Code: Sugar Land, Texas, 77478

Phone No.: <u>281-221-2699</u> Ext.: Fax No.:

E-mail Address:

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: <u>Daniel Ryan</u>

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

Title: Vice President

Organization Name: <u>LJA Engineering</u>

Mailing Address: <u>7500 Rialto Blvd. Building II, Suite 100</u>

City, State, Zip Code: Austin, TX 78735

Phone No.: <u>512-439-4700</u> Ext.: Fax No.:

E-mail Address: dryan@lja.com

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

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

□ Fax

□ Regular Mail

C. Contact person to be listed in the Notices

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

First and Last Name: Daniel Ryan

	Cr	edential	(P.E, P.G., Pl	h.D., 6	etc.): <u>P.E.</u>
	Tit	le: <u>Vice</u>	<u>President</u>		
	Or	ganizati	ion Name: <u>L</u>]	A En	gineering
	Ph	one No.	: <u>512-439-47</u>	<u>700</u> Ex	xt.: Click here to enter text.
	E-r	nail: <u>dr</u> y	<u>/an@lja.com</u>		
D.	Pu	blic Vie	wing Inform	natio	n
	•	•	ity or outfall ist be provid		cated in more than one county, a public viewing place for each
	Pu	blic buil	lding name:	City o	of Lockhart City Hall
	Lo	cation w	vithin the bu	ildin	g: <u>Development Servces</u>
	Ph	ysical A	ddress of Bu	ıildin	g: <u>308 W San Antonio Street</u>
	Cit	y: <u>Lockl</u>	<u>nart</u>		County: <u>Caldwell County</u>
	Co	ntact Na	ame:		enter text.
	Ph	one No.	: <u>512-398-34</u>	161 Ex	xt.: Click here to enter text.
E.	Bil	ingual l	Notice Requ	irem	ents:
					d for new, major amendment, and renewal applications . It is endment or minor modification applications.
	be	needed		nstru	ion is only used to determine if alternative language notices will ctions on publishing the alternative language notices will be in
	ob				L coordinator at the nearest elementary and middle schools and lation to determine whether an alternative language notices are
	1.				program required by the Texas Education Code at the hool nearest to the facility or proposed facility?
		\boxtimes	Yes		No
		If no , p	oublication o	of an a	alternative language notice is not required; skip to Section 9
	2.				end either the elementary school or the middle school enrolled in ogram at that school?
		\boxtimes	Yes		No
	3.	Do the location		these	e schools attend a bilingual education program at another
			Yes		No

	4.		the schoo lived out o							gram l	out the scho	ool
			Yes	\boxtimes	No							
	5.		answer is y ed. Which	_							ive languag	e are
Se	cti	ion 9.	Regulat	ed En	tity ar	ıd Perr	nitted S	ite In	format	ion (Instruction	ons
		Page			•					Ì		
Α.		the site this site		ly regula	ated by	TCEQ, pi	ovide the	Regula	ated Entit	y Num	iber (RN) iss	sued
			e TCEQ's C currently				<u>/www15.</u> 1	tceq.tex	<u>as.gov/c</u>	rpub/	to determin	e if
В.	Na	me of p	project or s	site (the	name k	known by	the com	nunity	where lo	cated):		
	<u>Lo</u>	<u>ckhart I</u>	Landing									
C.	Ov	vner of	treatment	facility:	Greenv	vood Ver	itures Gro	up, LLO	<u>-</u>			
	Ov	vnershij	p of Facilit	y: 🖂	Public		Private		Both		Federal	
D.	Ov	vner of	land wher	e treatm	nent fac	ility is or	will be:					
	Pro	efix (Mr	., Ms., Miss	s): Click			kt.					
	Fir	st and l	Last Name	: <u>Greenv</u>	wood Ve	entures C	Group, LLC	<u>-</u>				
	Ma	ailing Ao	ddress: <u>10</u>	1 Parkla	ne Bou	levard, Sı	<u>uite 102</u>					
	Cit	ty, State	e, Zip Code	: <u>Sugar</u>	<u>Land, T</u>	exas 774	<u>78</u>					
	Ph	one No.	.: <u>281-221-</u>	<u> 2699</u>		E-mail	Address:				t.	
			lowner is r t or deed r		-		-		r or co-ap	plican	t, attach a l	ease
		Attach	ment:			text.						
Ε.	Ov	vner of	effluent di	sposal s	site:							
	Pre	efix (Mr	., Ms., Miss	s): Click			kt.					
	Fir	st and l	Last Name	Click h								
	Ma	ailing Ao	ddress:			r text.						
	Cit	ty, State	e, Zip Code	Click h			t.					
	Ph	one No.	Click her		er text.	E-mail	Address:				t.	
			lowner is r t or deed r						r or co-ap	plican	t, attach a l	ease
		Attach	ment:			text.						

F.	Owner of sewage sludge disposal site (if authorization is requested for sludge disposal on property owned or controlled by the applicant):
	Prefix (Mr., Ms., Miss):
	First and Last Name:
	Mailing Address:
	City, State, Zip Code:
	Phone No.: E-mail Address:
	If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions.
	Attachment: Wick here to enter text
Se	ection 10. TPDES Discharge Information (Instructions Page 34)
A.	Is the wastewater treatment facility location in the existing permit accurate?
	□ Yes □ No
	If no , or a new permit application , please give an accurate description:
	New Permit: The proposed WWTP is located approximately 1.87 miles Southwest of the intersection of Hwy 183 and County Road 214 in Caldwell County, Texas.
В.	Are the point(s) of discharge and the discharge route(s) in the existing permit correct?
	□ Yes □ No
	If no , or a new or amendment permit application , provide an accurate description of the point of discharge and the discharge route to the nearest classified segment as defined in 30 TAC Chapter 307:
	New Permit: From the proposed treatment plant, effluent will be discharged into an onsite pond which is conveyed to West Fort Plum Creek. West Fort Plum Creek then flows to the South to a junction with Plum Creek (Segment 1810), which then connects to the San Marcos River (Segment 1808) at the Caldwell/Gonzales County Line.
	City nearest the outfall(s): <u>Lockhart</u>
	County in which the outfalls(s) is/are located: <u>Caldwell</u>
	Outfall Latitude: <u>29.796248</u> Longitude: <u>-97.700731</u>
C.	Is or will the treated wastewater discharge to a city, county, or state highway right-of-way, or a flood control district drainage ditch?
	□ Yes ⊠ No
	If 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
Se	ection 11. TLAP Disposal Information (Instructions Page 36)
Α.	For TLAPs, is the location of the effluent disposal site in the existing permit accurate? \Box Yes \Box No
	If no, or a new or amendment permit application , provide an accurate description of the disposal site location:
	Click here to enter text.
B.	City nearest the disposal site:
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:
	Click here to enter text.
F.	For TLAPs , please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained:
	Click here to enter text.
Se	ection 12. Miscellaneous Information (Instructions Page 37)
A.	Is the facility located on or does the treated effluent cross American Indian Land?
	□ Yes ⊠ No
В.	If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?
	□ Yes □ No ⊠ Not Applicable
	If No, or if a new onsite sludge disposal authorization is being requested in this permit

	application, provide an accurate location description of the sewage sludge disposal site.
	Click here to enter text.
С.	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:
	lick here to enter text
D.	Do you owe any fees to the TCEQ?
	□ Yes ⊠ No
	If yes , provide the following information:
	Account number: Amount past due:
Ε.	Do you owe any penalties to the TCEQ?
	□ Yes ⊠ No
	If yes , please provide the following information:
	Enforcement order number: Amount past due:
Ç ₀	ction 13 Attachments (Instructions Page 38)

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:

Section 14. Signature Page (Instructions Page 39)

If co-applicants are necessary, each entity must submit an original, separate signature page. Permit Number: Applicant: Greenwood Ventures Group, LLC Certification: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true. accurate. and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that I am authorized under 30 Texas Administrative Code § 305.44 to sign and submit this document, and can provide documentation in proof of such authorization upon request. Signatory name (typed or printed): Shaun Vembutty Signatory title: Manager Signature: Date: (Use blue ink) Subscribed and Sworn to before me by the said <u>Sudharchan Vembutty</u> on this <u>13 h</u> day of <u>April</u>, 20 2 2.

My commission expires on the <u>22 h</u> day of <u>April</u> . 20 2 2 [SEAL] SHAHBAZ ANWAR Notary Public, State of Texas

Comm. Expires 04-22-2022 Notary ID 13063060-0

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:		
	\boxtimes	The applicant's property boundaries	
	\boxtimes	The facility site boundaries within the applicant's property boundaries	
	\boxtimes	The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone	
		The property boundaries of all landowners surrounding the applicant's property (Note: it the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)	
	\boxtimes	The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream	
	\boxtimes	The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge	
		The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides	
		The boundaries of the effluent disposal site (for example, irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property	
		The property boundaries of all landowners surrounding the effluent disposal site	
		The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners surrounding the applicant's property boundaries where the sewage sludge land application site is located	
		The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (for example, sludge surface disposal site or sludge monofill) is located	
B.	⊠ addı	Indicate by a check mark that a separate list with the landowners' names and mailing resses cross-referenced to the landowner's map has been provided.	
C.	Indi	cate by a check mark in which format the landowners list is submitted:	
		Readable/Writeable CD 🗵 Four sets of labels	
D.		ride the source of the landowners' names and mailing addresses: <u>Caldwell Central</u> raisal <u>District</u>	
E.		equired by $Texas\ Water\ Code\ \S\ 5.115$, is any permanent school fund land affected by this lication?	
	Ī	□ Yes ⊠ No	

	If y e	es, provide the location and foreseeable impacts and effects this application has on the (s):
	Cli	ek here to enter text.
Se	ecti	on 2. Original Photographs (Instructions Page 44)
		original ground level photographs. Indicate with checkmarks that the following ation is provided.
	\boxtimes	At least one original photograph of the new or expanded treatment unit location
		At least two photographs of the existing/proposed point of discharge and as much area downstream (photo 1) and upstream (photo 2) as can be captured. If the discharge is to an open water body (e.g., lake, bay), the point of discharge should be in the right or left edge of each photograph showing the open water and with as much area on each respective side of the discharge as can be captured.
	\boxtimes	At least one photograph of the existing/proposed effluent disposal site
	\boxtimes	A plot plan or map showing the location and direction of each photograph
Se	ecti	on 3. Buffer Zone Map (Instructions Page 44)
A.	info	er zone map. Provide a buffer zone map on 8.5×11 -inch paper with all of the following rmation. The applicant's property line and the buffer zone line may be distinguished by g dashes or symbols and appropriate labels.
	•	
В.		er zone compliance method. Indicate how the buffer zone requirements will be met. ck all that apply.
		☑ Ownership
		Restrictive easement
		Nuisance odor control
] Variance
C.		uitable site characteristics. Does the facility comply with the requirements regarding uitable site characteristic found in 30 TAC § 309.13(a) through (d)?
		☑ Yes □ No

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:		
Application type:RenewalMajor Amend	lmentNinor AmendmentNew	
County: Seg	gment 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	
<u> This form applies to TPDES permit applications or</u>	<u>ıly.</u> (Instructions, Page 53)	
The SPIF must be completed as a separate documen each agency as required by the TCEQ agreement wit addressed or further information is needed, you wil pefore the permit is issued. Each item must be comp	h EPA. If any of the items are not completely l be contacted to provide the information	
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 ts entirety including all attachments.		
The following applies to all applications:		
l. Permittee: <u>Greenwood Ventures Group, LLC</u>		
Permit No. WQ00	EPA ID No. TX	
Address of the project (or a location description and county):	that includes street/highway, city/vicinity,	
The proposed property is located approximately 1.87 Highway 183 in Caldwell County Texas 78644.	miles southwest of County Road 214 and US	
L		

answer specific questions about the property.		
Prefix (Mr., Ms., Miss): Mr.		
First and Last Name: <u>Daniel Ryan</u>		
Credential (P.E, P.G., Ph.D., etc.): <u>P.E.</u>		
Title: <u>Vice President</u>		
Mailing Address: 7500 Rialto Blvd. Building II, Suite 100		
City, State, Zip Code: <u>Austin, TX 78735</u>		
Phone No.: <u>512-439-4700</u> Ext.: Fax No.:		
E-mail Address: <u>dryan@lja.com</u>		
List the county in which the facility is located: <u>Caldwell County</u>		
If the property is publicly owned and the owner is different than the permittee/applicant, please list the owner of the property.		
Click here to enter text		
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.		
From the proposed treatment plant, effluent will be discharged into an onsite pond which		
is conveyed to West Fort Plum Creek. West Fort Plum Creek then flows to the South to a junction with Plum Creek (Segment 1810), which then connects to the San Marcos River		
(Segment 1808) at the Caldwell/Gonzales County Line.		
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		

2.3.

4.

5.

	☐ 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 1200 acres to be impacted through construction of subdivision
	improvements. No planned sealing of caves or other features.
7.	Describe existing disturbances, vegetation, and land use:
	Farming Land and Residential
	E FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR MENDMENTS TO TPDES PERMITS
8.	List construction dates of all buildings and structures on the property:
	Residential – 1930, Residential – 2000, Residential – 2001, Residential – 2005, Miscellaneous - 2001
9.	Provide a brief history of the property, and name of the architect/builder, if known.
	Property is mostly undeveloped with some residential property owned by McDonald Family trust.

EXHIBIT 2

DOMESTIC TECHNICAL REPORT 1.0 AND 1.1

DOMESTIC WORKSHEETS 2.0 AND 2.1



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): <u>0.325</u>

2-Hr Peak Flow (MGD): <u>1.30</u>

Estimated construction start date: <u>7/1/2023</u>

Estimated waste disposal start date: 12/1/2023

B. Interim II Phase

Design Flow (MGD): 0.65

2-Hr Peak Flow (MGD): 2.60

Estimated construction start date: 7/1/2024

Estimated waste disposal start date: <u>12/1/2024</u>

C. Final Phase

Design Flow (MGD): 0.975

2-Hr Peak Flow (MGD): <u>3.90</u>

Estimated construction start date: 7/1/2025

Estimated waste disposal start date: 12/1/2025

D. Current operating phase: N/A New WWTP

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 facility is to be constructed in three phases with a total design flow of 975,000 gpd. Each phase will each treat 325,000 gpd. Each phase will operate as a suspended-growth activated sludge process in the extended aeration mode. The treatment units include a bar screen, aeration basin, clarifier, chlorine contact basin and an aerobic digester. Wastewater will be pumped into the plant where it will enter the aeration basin through a bar screen. The influent will then pass through the aeration zone and flow into a clarifier. From the clarifier, the effluent will flow to a chlorine contact basin for disinfection. This facility will also utilize a digester for sludge holding, prior to haul off.

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

B. Treatment Units

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

Table 1.0(1) - Treatment Units

Treatment Unit Type	Number of	Dimensions (L x W x D)
	Units	
AERATION BASIN	3 (1 per phase)	Phase 1: 61.5'L x 44'W x 10'D
		Phase 2: 61.5'L x 44'W x 10'D
		Phase 3: 61.5'L x 44'W x 10'D
CLARIFIER	3 (1 per phase)	Phase 1: 31' DIA x 10' D
		Phase 2: 31' DIA x 10' D
		Phase 3: 31' DIA x 10' D
AEROBIC DIGESTER	3 (1 per phase)	Phase 1: 18.5'L x 44'W x 10'D
		Phase 2: 18.5'L x 44'W x 10'D
		Phase 3: 18.5'L x 44'W x 10'D
CHLORINE CONTACT	3 (1 per phase)	Phase 1: 4.5'L x 44'W x 10'D
CHAMBER		Phase 2: 4.5'L x 44'W x 10'D
		Phase 3: 4.5'L x 44'W x 10'D

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: <u>APPENDIX H</u>

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

1200 Acre Lockhart Tract: A 3,975 lot single-family residential subdivision.	
,	

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.
Click here to enter text.
Section 6. Permit Specific Requirements (Instructions Page 53)
For applicants with an existing permit, check the <i>Other Requirements</i> or <i>Special Provisions</i> of the permit.
A. Summary transmittal
Have plans and specifications been approved for the existing facilities and each proposed phase? Yes \square No \boxtimes
If yes, provide the date(s) of approval for each phase:
Provide information, including dates, on any actions taken to meet a requirement or provision pertaining to the submission of a summary transmittal letter. Provide a copy of an approval letter from the TCEQ, if applicable.
Click here to enter text.
B. Buffer zones
Have the buffer zone requirements been met? Yes ⊠ No □
Provide information below, including dates, on any actions taken to meet the

conditions of the buffer zone. If available, provide any new documentation

relevant to maintaining the buffer zones.
150' Buffer around the treatment plant.
C. Other actions required by the current permit
Does the <i>Other Requirements</i> or <i>Special Provisions</i> 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 \square No \boxtimes
If yes, provide information below on the status of any actions taken to meet the conditions of an <i>Other Requirement</i> or <i>Special Provision</i> .
Click here to enter text.
D. Grit and grease treatment
1. Acceptance of grit and grease waste
Does the facility have a grit and/or grease processing facility onsite that treats and decants or accepts transported loads of grit and grease waste that are discharged directly to the wastewater treatment plant prior to any

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

2. Grit and grease processing

No ⊠

treatment? Yes □

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

Click here to enter text.
3. Grit disposal
Does the facility have a Municipal Solid Waste (MSW) registration or permit for grit disposal? Yes No
If No , contact the TCEQ Municipal Solid Waste team at 512-239-0000. Note: A registration or permit is required for grit disposal. Grit shall not be combined with treatment plant sludge. See the instruction booklet for additional information on grit disposal requirements and restrictions.
Describe the method of grit disposal.
4. Grease and decanted liquid disposal
Note: A registration or permit is required for grease disposal. Grease shall not be combined with treatment plant sludge. For more information, contact the TCEQ Municipal Solid Waste team at 512-239-0000.
Describe how the decant and grease are treated and disposed of after grit separation.
Click here to enter text.
E. Stormwater management
1. Applicability
Does the facility have a design flow of 1.0 MGD or greater in any phase?
Yes □ No ⊠
Does the facility have an approved pretreatment program, under 40 CFR Part 403?

Yes □ No ⊠
If no to both of the above , then skip to Subsection F, Other Wastes Received.
2. MSGP coverage
Is the stormwater runoff from the WWTP and dedicated lands for sewage disposal currently permitted under the TPDES Multi-Sector General Permit (MSGP), TXR050000? Yes \square No \square
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:
Click here to enter text
4. Existing coverage in individual permit
Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit? Yes No
If yes , provide a description of stormwater runoff management practices at the site that are authorized in the wastewater permit then skip to Subsection

F, Other Wastes Received.

Click here to	
5. Zero stor	mwater discharge
Do you intend other means? Yes □	to have no discharge of stormwater via use of evaporation or No \square
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 yo	ur
treatment plant under this individual permit?	

Yes □ No □

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

Click here to enter text.
Note: Direct stormwater discharges to waters in the state authorized through this individual permit will require the development and implementation of a stormwater pollution prevention plan (SWPPP) and will be subject to additional monitoring and reporting requirements. Indirect discharges of stormwater via headworks recycling will require compliance with all individual permit requirements including 2-hour peak flow limitations. All stormwater discharge authorization requests will require additional information during the technical review of your application.
F. Discharges to the Lake Houston Watershed
Does the facility discharge in the Lake Houston watershed? Yes \square No \boxtimes
If yes, a Sewage Sludge Solids Management Plan is required. See Example 5 in the instructions.
G. Other wastes received including sludge from other WWTPs and septic waste
1. Acceptance of sludge from other WWTPs
Does the facility accept or will it accept sludge from other treatment plants at the facility site? Yes \square No \boxtimes
If yes, attach sewage sludge solids management plan. See Example 5 of the instructions.
In addition, provide the date that the plant started accepting sludge or is anticipated to start accepting sludge, an estimate of monthly sludge
acceptance (gallons or millions of gallons), an estimate of the BOD ₅
concentration of the sludge, and the design BOD ₅ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.
Click here to enter text.

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

2. Accept	ance of septic waste
Is the facil	ity accepting or will it accept septic waste?
Yes □	No ⊠
If yes, doe	s the facility have a Type V processing unit?
Yes □	No ⊠
If yes , doe	s the unit have a Municipal Solid Waste permit?
Yes □	No ⊠
accepting s estimate o an estimat BOD ₅ cond this inform	ny of the above, provide a the date that the plant started septic waste, or is anticipated to start accepting septic waste, an f monthly septic waste acceptance (gallons or millions of gallons) e of the BOD₅ concentration of the septic waste, and the design centration of the influent from the collection system. Also note if nation has or has not changed since the last permit action.
	nits that accept sludge from other wastewater treatment plants quired to have influent flow and organic loading monitoring.
=	ance of other wastes (not including septic, grease, grit RA, CERCLA or as discharged by IUs listed in heet 6)

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.

Is the facility accepting or will it accept wastes that are not domestic in

nature excluding the categories listed above?

No ⊠

Yes □

Click here to enter text.		

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

Is the facility in operation? Yes \square No \boxtimes

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	Max	No. of	Sample	Sample
Pollutalit	Conc.	Conc.	Samples	Type	Date/Time
CBOD ₅ , mg/l					
Total Suspended Solids, mg/l					
Ammonia Nitrogen, mg/l					
Nitrate Nitrogen, mg/l					
Total Kjeldahl Nitrogen, mg/l					
Sulfate, mg/l					
Chloride, mg/l					
Total Phosphorus, mg/l					
pH, standard units					
Dissolved Oxygen*, mg/l					
Chlorine Residual, mg/l					
E.coli (CFU/100ml) freshwater					
Entercocci (CFU/100ml)					

Pollutant	Average	Max	No. of	Sample	Sample
ronutant	Conc.	Conc.	Samples	Type	Date/Time
saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity,					
μmohs/cm, †					
Oil & Grease, mg/l					
Alkalinity (CaCO ₃)*, mg/l					

^{*}TPDES permits only

†TLAP permits only

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

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

Section 8. Facility Operator (Instructions Page 60)

Facility Operator Name:	
-------------------------	--

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

IOHOW	ing list. Check all that apply.					
	Permitted landfill					
	Permitted or Registered land application site for beneficial use					
	Land application for beneficial use authorized in the wastewater permit					
	Permitted sludge processing facility					
	Marketing and distribution as authorized in the wastewater permit					
	Composting as authorized in the wastewater permit					
	Permitted surface disposal site (sludge monofill)					
	Surface disposal site (sludge monofill) authorized in the wastewater					
	permit					
	Transported to another permitted wastewater treatment plant or permitted sludge processing facility. If you selected this method, a written statement or contractual agreement from the wastewater treatment plant or permitted sludge processing facility accepting the sludge must be included with this application.					
	Other: Click here to enter text					
В. 3	Sludge disposal site					
	sal site name:					
TCEQ	permit or registration number:					
County	y where disposal site is located:					
C. :	Sludge transportation method					
Metho	d of transportation (truck, train, pipe, other): <u>Truck</u>					
Name	of the hauler: <u>Captex</u>					
Hauler	registration number: <u>20745</u>					
Sludge	e 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 is sludge for beneficial use? Yes No	for land appl	lication of sewage		
If yes , are you requesting to continue this authors sludge for beneficial use? Yes □ No □	orization to l	land apply sewage		
If yes, is the completed Application for Permit Sewage Sludge (TCEQ Form No. 10451) attached the instructions for details)? Yes No				
B. Sludge processing authorization				
Does the existing permit include authorization in	for any of th	e 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	(Instructio	ons Page 61)		
Does this facility include sewage sludge lago	ons?			
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: Mak here to enter text
 USDA Natural Resources Conservation Service Soil Map:
Attachment:
• Federal Emergency Management Map:
Attachment: Click here to enter text
• 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: Click here to enter text
If a portion of the lagoon(s) is located within the 100-year frequency flood plain, provide the protective measures to be utilized including type and size of protective structures:
B. Temporary storage information Provide the results for the pollutant screening of sludge lagoons. These result 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:
· , o, o

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

D. Site development plan

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

lagoon(s):
Click here to enter text.
Attach the following documents to the application.
 Plan view and cross-section of the sludge lagoon(s)
Attachment: Wick hore to enter text
Copy of the closure plan
Attachment:
 Copy of deed recordation for the site
Attachment: Mck here to enter text.
 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: Makhare to enter text
 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

A. Additional authorizations
Does the permittee have additional authorizations for this facility, such as reuse authorization, sludge permit, etc? Yes \square No \boxtimes
If yes , provide the TCEQ authorization number and description of the authorization:
Click here to enter text
B. Permittee enforcement status
Is the permittee currently under enforcement for this facility? Yes \square No \boxtimes
Is the permittee required to meet an implementation schedule for compliance or enforcement? Yes □ No ☒
If yes to either question, provide a brief summary of the enforcement, the implementation schedule, and the current status:
Click here to enter text.
Section 13. RCRA/CERCLA Wastes (Instructions Page 63)

A. RCRA hazardous wastes

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

Yes □ No ⊠

B. Remediation activity wastewater

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

Yes □ No ⊠

C. Details about wastes received

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

Attachment:	Click here to	

Section 14. Laboratory Accreditation (Instructions Page 64)

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

- The laboratory is an in-house laboratory and is:
 - o periodically inspected by the TCEQ; or
 - located in another state and is accredited or inspected by that state; or
 - o performing work for another company with a unit located in the same site; or
 - o 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: Shaun Vembutty

Title: Manager

Signature: $\sqrt{-13-22}$

DOMESTIC TECHNICAL REPORT 1.1

The following is required for new and amendment applications

Section 1. Justification for Permit (Instructions Page 66)

A. Justification of permit need

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

The wastewater treatment plant will serve the proposed residential development. Based on easement and right of way limitations, no route exists from this site to an organized wastewater treatment facility. The use of a central collection treatment and disposal system is being preferred to an equivalent number of private residential septic tank/drain field units. Design flows are based on Living Unit Equivalents (LUEs) or connections associated with the service area. A basis of 245 gallons of wastewater per day per connection (maximum 30-day wet weather average) was assumed for flow projections. The ultimate flow is based on the total number of houses to be built (3,975 houses). The total flow needed at full build out would be 3,975 connections x 245 gal/day/connection = 975,000 gal/day assumed.

B. Regionalization of facilities

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

1. Municipally incorporated areas

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

Is any	portion	of the propo	osed service	area located	d in an inc	corporated
city?						
	Yes □	No ⊠	Not Applica	able □		

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: Makheren order text
3. Nearby WWTPs or collection systems
Are there any domestic permitted wastewater treatment facilities or collection systems located within a three-mile radius of the proposed facility? Yes \square No \boxtimes
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:
If yes , attach copies of your certified letters to these facilities and their response letters concerning connection with their system.
Attachment: Click here to enter text
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: Wick here to enter text
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 LoadingA. Current organic loadingFacility Design Flow (flow being requested in application):

Average Influent Organic Strength or BOD₅ Concentration in mg/l:

Average Influent Loading (lbs/day = total average flow X average BOD₅ conc. X 8.34):

Provide the source of the average organic strength or BOD₅ 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	0.975	400
Trailer park - transient		
Mobile home park		
School with cafeteria and showers		
School with cafeteria,		
,		

Source	Total Average Flow (MGD)	Influent BOD ₅ Concentration (mg/l)
no showers		
Recreational park, overnight use		
Recreational park, day use		
Office building or factory		
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources	0.975	400
AVERAGE BOD ₅ from all sources		

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

A. Existing/Interim I Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: $\underline{10}$

Total Suspended Solids, mg/l: <u>15</u>

Ammonia Nitrogen, mg/l: 2

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: <u>5.0</u>

Other: Click here to enter text.
B. Interim II Phase Design Effluent Quality
Biochemical Oxygen Demand (5-day), mg/l: <u>10</u>
Total Suspended Solids, mg/l: <u>15</u>
Ammonia Nitrogen, mg/l: <u>2</u>
Total Phosphorus, mg/l: <u>N/A</u>
Dissolved Oxygen, mg/l: <u>5.0</u>
Other: Click here to enter text.
C. Final Phase Design Effluent Quality
Biochemical Oxygen Demand (5-day), mg/l: <u>10</u>
Total Suspended Solids, mg/l: <u>15</u>
Ammonia Nitrogen, mg/l: <u>2</u>
Total Phosphorus, mg/l: <u>N/A</u>
Dissolved Oxygen, mg/l: <u>5.0</u>
Other: Click here to enter text.
D. Disinfection Method
Identify the proposed method of disinfection.
\boxtimes Chlorine: $\underline{1}$ mg/l after $\underline{20}$ minutes detention time at peak flow
Dechlorination process:
□ Ultraviolet Light: seconds contact time at peak flow
□ Other: Click here to enter text

Section 4. Design Calculations (Instructions Page 68)

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

Attachment: <u>APPENDIX I</u>

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. Provide the source(s) used to determine 100-year frequency flood plain. FEMA MAP: 48055C0250E (APPENDIX J) For a new or expansion of a facility, will a wetland or part of a wetland be filled? Yes □ No ⊠ If yes, has the applicant applied for a US Corps of Engineers 404 Dredge and Fill Permit? Yes □ No □ **If yes**, provide the permit number:

B. Wind rose

Attach a wind rose. **Attachment**: <u>APPENDIX K</u>

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

If no, provide the approximate date you anticipate submitting your

A. Beneficial use authorization

application to the Corps:

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 (TCEO Form No. 10056).

Attachment:

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

Attach a solids management plan to the application.

Attachment: <u>APPENDIX L</u>

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

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

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

DOMESTIC TECHNICAL REPORT WORKSHEET 2.0

RECEIVING WATERS

The following is required for all TPDES permit applications

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

Is there a surface water intake for domestic drinking water supply located within 5 miles downstream from the point or proposed point of discharge? Yes No
If yes , provide the following: Owner of the drinking water supply:
Distance and direction to the intake:
Attach a USGS map that identifies the location of the intake.
Attachment: Click here to enter text.
Section 2. Discharge into Tidally Affected Waters (Instructions Page 73)
Does the facility discharge into tidally affected waters?
Yes □ No ⊠
If yes, complete the remainder of this section. If no, proceed to Section 3.
A. Receiving water outfall
Width of the receiving water at the outfall, in feet:
B. Oyster waters
Are there oyster waters in the vicinity of the discharge?
Yes □ No □
If yes, provide the distance and direction from outfall(s).
Click here to enter text.

C. Sea grasses
Are there any sea grasses within the vicinity of the point of discharge?
Yes □ No □
If yes, provide the distance and direction from the outfall(s).
Click here to enter text
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: West Fork Plum 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: Click here to enter text	
B. Flow characteristics	
If a stream, man-made channel or ditch was checked above, provide the following. For existing discharges, check one of the following that best characterizes the area <i>upstream</i> of the discharge. For new discharges, characterize the area <i>downstream</i> of the discharge (check one). Intermittent - dry for at least one week during most years	
☐ Intermittent with Perennial Pools - enduring pools with sufficient habitat to maintain significant aquatic life uses	
☐ Perennial - normally flowing	
Check the method used to characterize the area upstream (or downstream for new dischargers). USGS flow records	
☐ Historical observation by adjacent landowners	
□ Personal observation	
□ Other, specify: Click here to enter text	
C. Downstream perennial confluences	
List the names of all perennial streams that join the receiving water within three miles downstream of the discharge point. N/A - None within 3 miles of discharge point.	
D. Downstream characteristics	
Do the receiving water characteristics change within three miles downstream of the discharge (e.g., natural or man-made dams, ponds, reservoirs, etc.)? Yes \square No \boxtimes)f
If yes, discuss how.	

Click l	nere to enter text.		
	Normal dry weather chara		
conditi	O	ne wate	r body during normal dry weather
	s an intermittent stream themain full year round.	nat is fro	equently dry with some stock tanks
	nd time of observation: 03 e water body influenced by Yes \square No \boxtimes		22 water runoff during observations?
F	n 5. General Characte Page 74) Jpstream influences	ristics	of the Waterbody (Instructions
			m of the discharge or proposed ollowing? Check all that apply.
	Oil field activities		Urban runoff
	Upstream discharges	\boxtimes	Agricultural runoff
tex	Septic tanks		Other(s), specify
B. V	Vaterbody uses		
Observ	ed or evidences of the foll	owing u	ises. Check all that apply.
\boxtimes	Livestock watering		Contact recreation
	Irrigation withdrawal		Non-contact recreation
	Fishing		Navigation

	Domestic water supply		Industrial water supply
	Park activities		Other(s), specify
c. v	Vaterbody aesthetics		
	eck one of the following that eiving water and the surroun		describes the aesthetics of the area.
	Wilderness: outstanding na area; water clarity exception		beauty; usually wooded or unpastured
\boxtimes			e vegetation; some development dwellings); water clarity discolored
	Common Setting: not offens be colored or turbid	sive;	developed but uncluttered; water may
	Offensive: stream does not developed; dumping areas		nce aesthetics; cluttered; highly er discolored

APPENDIX A CORE DATA FORM



		D	
TCEO	Core	Data)	Form

TCEQ Use Only

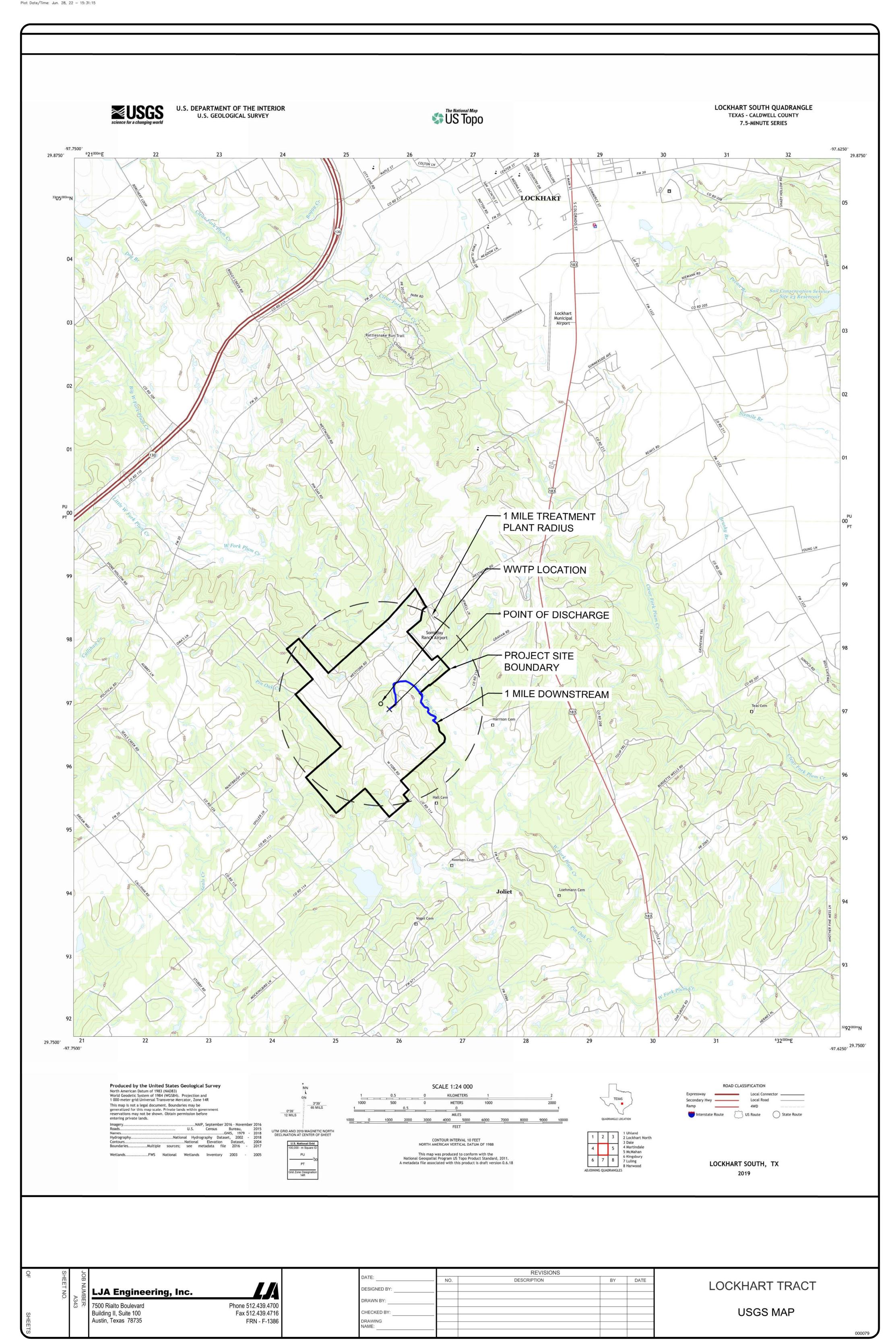
For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

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) 3. Regulated Entity Reference Number (if issued) Follow this link to search for CN or RN numbers in CN RN Central Registry** SECTION H: Customer Information 4. General Customer Information 5. Effective Date for Customer Information Updates (mm/dd/yyyy) 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: Greenwood Ventures Group, LLC 7. TX SOS/CPA Filing Number 8. TX State Tax ID (11 digits) 9. Federal Tax ID (9 digits) 10. DUNS Number (if applicable) 0804426250 32083011356 Corporation 11. Type of Customer: ☐ Individual Partnership: ☐ General ☐ Limited Government: City County Federal State Other Other: Limited Liability Company ☐ Sole Proprietorship 12. Number of Employees 13. Independently Owned and Operated? □ 0-20 □ 21-100 ✓ Yes 101-250 **251-500** 501 and higher ☐ 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: 211 E 7th St. Ste. 620 15. Mailing Address: State ZIP ZIP+4 City TX78701 Austin 17. E-Mail Address (if applicable) 16. Country Mailing Information (if outside USA) mark@ashtongreydev.com 18. Telephone Number 19. Extension or Code 20. Fax Number (if applicable) (713)875-0009 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.) Lockhart Landing Wastewater Treatment Plant

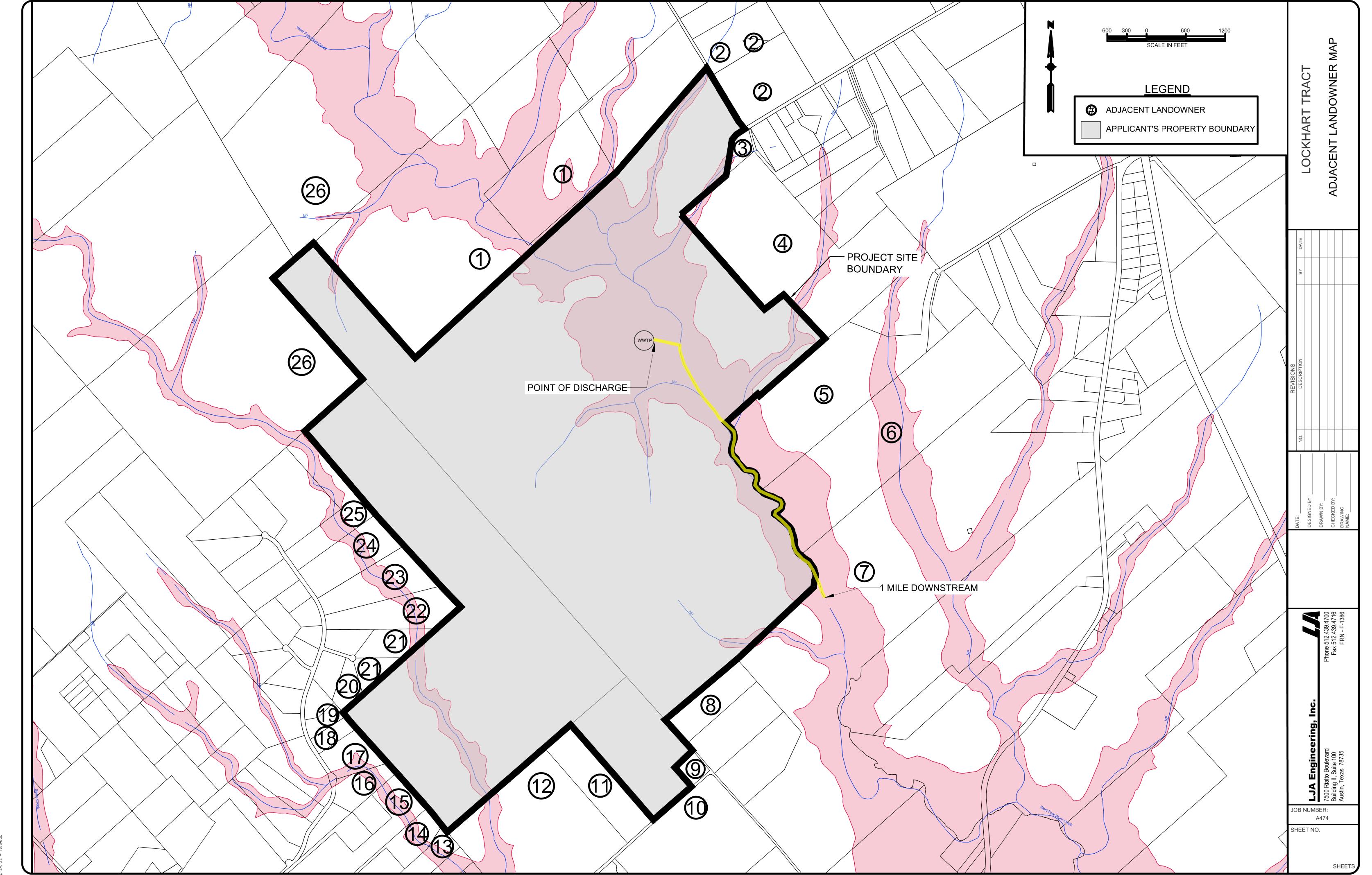
23. Street Address the Regulated Enti						· · · · · · · · · · · · · · · · · · ·				
(No PO Boxes)	City			State		ZIP			ZIP + 4	
24. County		lwell Cour	ntv							
	1			cation Description	on if no st	eet add	ress is pr	ovided.		
25. Description to Physical Location:	1 7	property is	s appr	oximately 1.8 4 in Caldwell	37 miles	south	west of		rsection o	of Hwy 183
26. Nearest City	1						State)	Ne	arest ZIP Code
Lockhart							TX			78644
27. Latitude (N) In	Decimal:	29.79	6248		28. L	ongitud	le (W) In I	Decimal:	-97.7007	'31
Degrees	Minutes		S	econds	Degre	es		Minutes		Seconds
29		47		46.49		-97		'	42	2.63
29. Primary SIC Co	ode (4 digits)	30, Seconda	ary SIC	Code (4 digits)	31. Prima (5 or 6 digit	-	S Code	32. S (5 or 6	econdary NA digits)	AICS Code
4952					22132					
33. What is the Pri				Do not repeat the SIC						
To treat and dis	spose of d	omestic wa	astewa	ter from the p	proposed	subdi	vision.			
34. Mailing					211 E 7	th St. Sto	e. 620			
Address:										T
		ty Aı	ustin	State	TX	ZIP		78701	ZIP + 4	
35. E-Mail Add										
36. Te	elephone Nu	nber		37. Extension	n or Code			38. Fax Nu	mber <i>(if app</i>	licable)
9. TCEQ Programs a	(713) 875-9 and ID Numb	ers Check all F	Programs	and write in the per	mits/registra	tion numb	pers that wi	(Il be affected	by the updates	s submitted on this
Dam Safety		istricts	a guidant	Edwards Aquit	fer	□ Fm	issions Inv	entory Air	Industria	al Hazardous Waste
							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
☐ Municipal Solid Wa	ste N	ew Source Rev	iew Air	OSSF		☐ Pet	roleum Sto	rage Tank	PWS	
Sludge	□ Si	torm Water		☐ Title V Air		☐ Tire	es		Used Oi	I
☐ Voluntary Cleanup	⊠w	aste Water		☐ Wastewater A	griculture	☐ Wa	ter Rights		Other:	
					-					···
SECTION IV:	Prepare	r Informa	ation							
40. Name: Daniel R										
42. Telephone Numi	ber 43. Ext.	/Code	44. Fax	Number	45. E-M	ail Addr	ess			
(512)439-4700			()	-	dryan	@lja.c	om			
SECTION V:	Authoriz	ed Signa	ture							
6. By my signature b gnature authority to s lentified in field 39.	elow, I certif	y, to the best o	of my kn							
	Greenwood V	entures Group	o. LLC		Job Title	. Тм	anager			
	Shaun Vembu		, ==0					hone:	(713)875-	0000
Signature:	110	1					_	late:	/1 15	3-22

APPENDIX B

USGS MAP



APPENDIX C AFFECTED LANDOWNERS MAP AND LIST



Map Number	Property ID Number	Landowner Name	Landowner Address (1)	Landowner Address (2)
1	R039108, R613503	LINDSEY LARRY J	1635 WESTWOOD RD	LOCKHART TX 78644
2	R039114, R039117	MCMINN WILLIAM CORY	1114 WESTWOOD RD	LOCKHART TX 78644
3	R327066, R493757, R327065	LEMONS DENVER JOE	1303 WESTWOOD RD	LOCKHART TX 78644
4	R327067	CYRIER JOHN P	1301 WESTWOOD RD	LOCKHART TX 78644
5	R330722	OLSEN ERNESTINE & JENS	874 GRAHAM RD	LOCKHART TX 78644
6	R040175, R040159	GRAHAM DONALD F & LOUISE C REV. LIV. TR.	905 GRAHAM RD	LOCKHART TX 78644
7	R040211	DOYLE JERRY	832 FM 671	LOCKHART TX 78644
8	R445850	O'KEEFE ROBERT & SUSAN	350 GOLDRUSH CIR	WIMBERLY TX 78676
9	R578131, R039773	MURCHISON-BASS WANDA GAIL	135 WEST FORK RD	LOCKHART TX 78644
10	R039711, R039779	VINKLAREK SUSAN E	8901 BROOK HILL LN	FORT WORTH TX 76244
11	R573705	BONNELL RALPH E & JANICE D	6802 MANZANITA	AUSTIN TX 78759
12	R360201, R324210, R337190	TWARDOWSKI RAYMOND J	126 CANYON OAKS DR	SAN ANTONIO TX 78232
13	R337402	TIMMS NICKY	715 SIERRA DR	LOCKHART TX 78644
14	R039692, R039771	MATTHEWS TAMMY M & JAMES R	689 SIERRA DR	LOCKHART TX 78644
		SIERRA ERICA H	PO BOX 62	SAN MARCOS TX 78667
		CORTEZ FELIX A	101 QUAIL RIDGE DR	KYLE TX 78640
		NULL	NULL	NULL
		MARTINEZ JUAN CARLOS & BONILLA GLENDA PATRICIA VELASQUEZ	5000 GOOD WOOD DR APT B	AUSTIN TX 78744
		BRADFORD JUSTIN & PAULA	130 PECANWOOD N	KYLE TX 78640
		BAUMBACH KEN & KRISTI	222 HIDDEN HOLLOW	LOCKHART TX 78644
		JONES STEVE & DEBBIE	229 HIDDEN HOLLOW	LOCKHART TX 78644
		KEATON KERRI & JAMES	334 W MEDLOCK DR UNIT C102	PHOENIX AZ 85013
		LAMMERS MICHAEL J & DENISE M	970 SPANISH OAKS BLVD	LOCKHART TX 78644
		HAVERDA BENJAMIN & STEPHANIE	1018 SPANISH OAKD BLVD	LOCKHART TX 78644
		SANDOVAL MARIO ALBERTO	15590 FM 1660	TAYLOR TX 76574
		CE STEPHENS PROPERTIES LLC	680 WESTWOOD RD	LOCKHART TX 78644
		CE STEFFICIO FROM ENTES ELC	OGG WEST WOOD ND	20011/411 1/ 70044

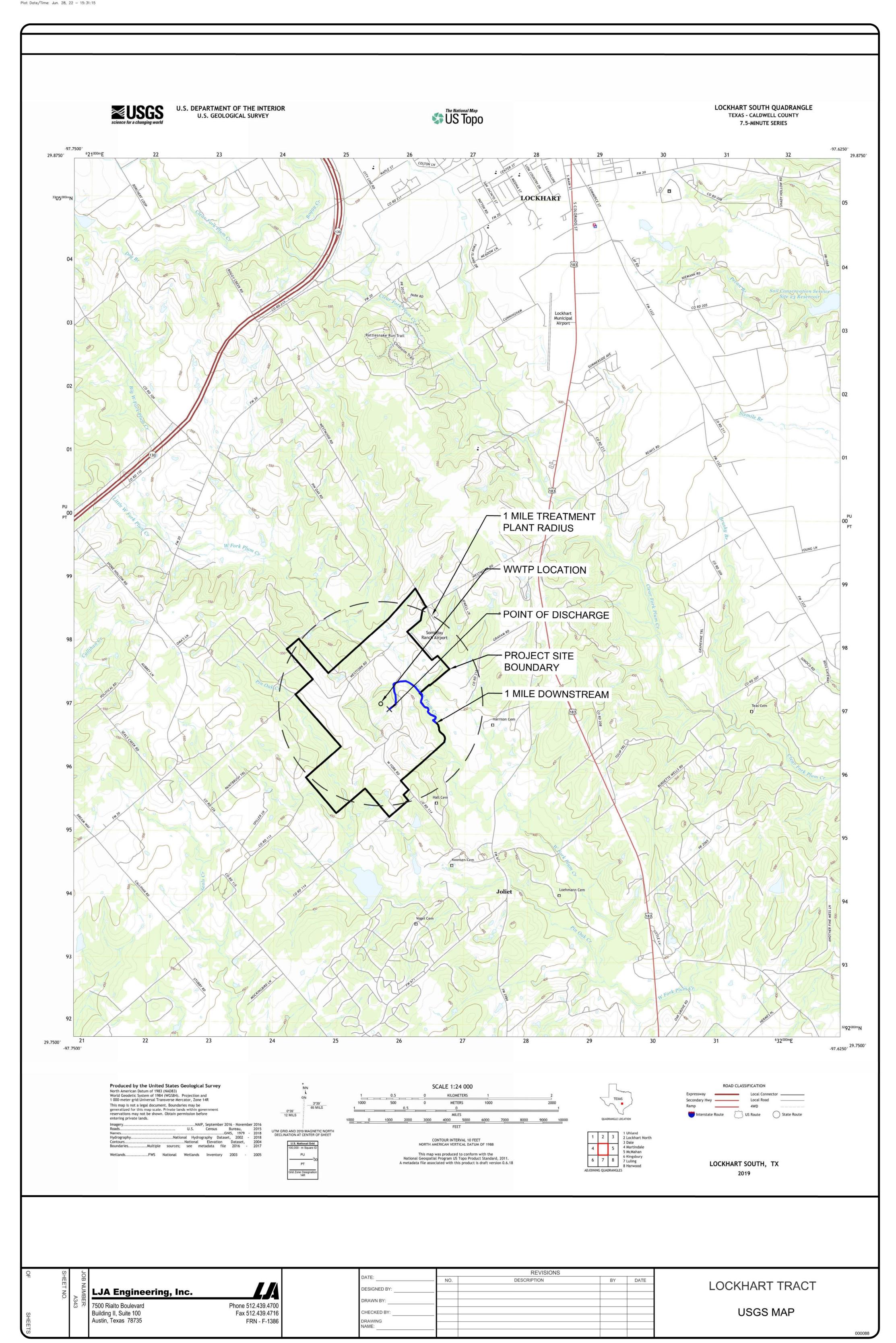
APPENDIX DORIGINAL PHOTOGRAPHS

W: \A474\Lockhart\WWTP Application\exhibits
er: Icrone

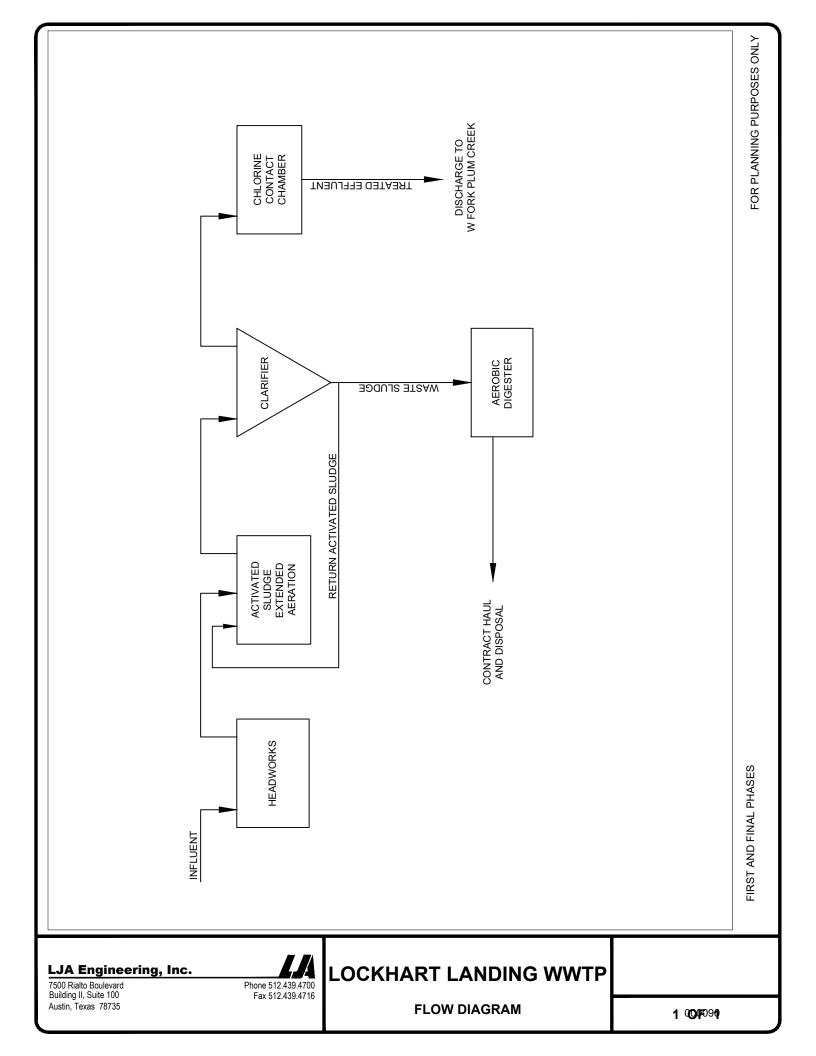
APPENDIX EBUFFER ZONE MAP

APPENDIX F

SPIF USGS MAP

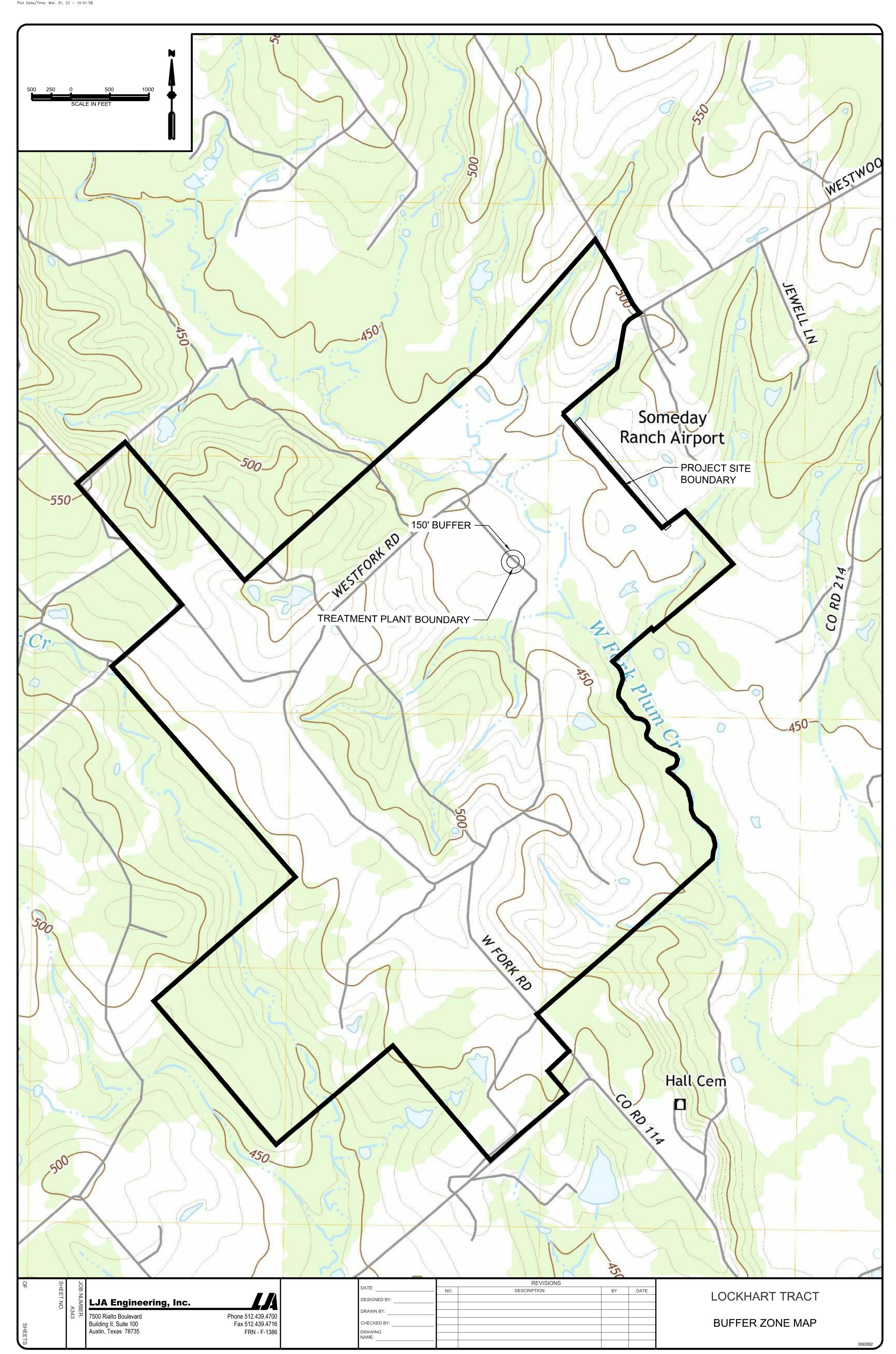


APPENDIX G PROCESS FLOW DIAGRAM



APPENDIX H

SITE DRAWING



APPENDIX I

DESIGN CALCULATIONS

Lockhart Landing - WWTP FLOW PHASES

Phase 1		Phase 2		Phase 3	
<u>Assumptions</u>		<u>Assumptions</u>		<u>Assumptions</u>	
Average Flow per LUE =	245 gpd	Average Flow per LUE =	245 gpd	Average Flow per LUE =	245 gpd
Average Density	3 LUEs/Ac	Average Density	3 LUEs/Ac	Average Density	3 LUEs/Ac
I/I for Wet Peak	750 gpd/Ac	I/I for Wet Peak	750 gpd/Ac	I/I for Wet Peak	750 gpd/Ac
LUEs	1,325	LUEs	2,650	LUEs	3,975
Average Daily Flow	324,625 gpd	Average Daily Flow	649,250 gpd	Average Daily Flow	973,875 gpd
	225 gpm	Average Daily Flow	451 gpm	Average Daily Flow	676 gpm
Dry Peaking Factor	3.27	Dry Peaking Factor	2.99	Dry Peaking Factor	2.81
Peak Dry Flow	738 gpm	Peak Dry Flow	1,347 gpm	Peak Dry Flow	1,901 gpm
Service Area	400 acres	Service Area	400 acres	Service Area	400 acres
I/I for Peak Wet	300,000 gpd	I/I for Peak Wet	300,000 gpd	I/I for Peak Wet	300,000 gpd
	208 gpm		208 gpm		208 gpm
Total Peak Wet Flow	947 gpm	Total Peak Wet Flow	1,555 gpm	Total Peak Wet Flow	2,109 gpm
Minimum Flow Factor	0.25	Minimum Flow Factor	0.29	Minimum Flow Factor	0.31
Minimum Flow	57 gpm	Minimum Flow	131 gpm	Minimum Flow	212 gpm

Lockhart Landing Extended Air Process Design (TCEQ Checklist)

(Criteria)

Phase 1 Design Flow (from Summary Sheet) 0.325 mgd Peak Flow (from Summary Sheet) 1.063 mgd Design Organic Load 400 lb BOD / day **Clarifier Design** 900 gpd/ft² Maximum Surface Loading @ Peak Flow Minimum Detention Time @ Peak Flow 2 hrs Maximum Surface Loading @ Design Flow 450 gpd/ft² Minimum Detention Time @ Design Flow 4 hrs 1181.1 ft² Surface Area Required (Peak Flow) 722.2 ft² Surface Area Required (Design Flow) 11,843 ft³ Volume Required (Peak Flow) 7,242 ft³ Volume Required (Design Flow) Depth Required (Peak Flow) 10.0 ft Depth Required (Design Flow) 10.0 ft 400.0 gpd/ft² Maximum Return Sludge Underflow Rate Minimum Return Sludge Underflow Rate 200.0 gpd/ft² (Calculations) Note - Min SWD is 8 ft, 10 ft if area > 1250 ft² Proposed Sidewater Depth 10 ft Proposed Clarifier Diameter 31 ft 755 ft² Clarifier Surface Area

> 7,548 ft³ Clarifier Volume

Maximum Return Sludge Underflow Rate 210 gpm Minimum Return Sludge Underflow Rate 105 gpm

RAS Line Size (min 3 ft/sec velocity) 4 inches

Aeration System Des (Criteria)	ign		
(Ontena)	Organic Loading Actual Design Load	15 lb BOD/day/1000 400 lb BOD/day	ft ³
	Required Volume	26667 ft ³	
	Required Air Flow	scf / Ib BOD (assumes 4.0% transfer 3200 efficiency)	
(Calculations)	Г		Note - Min SWD is
	Proposed Sidewater Depth	10 ft	8 ft
	Surface Area	2,667 ft ²	
	Air Flow	889 scfm	
Aerobic Digester Des	ign		
(Gillella)	Volume Required or	20 ft ³ /lb BOD 15 days SRT	
	Air Required	30 scfm/ 1000 ft ³ volu	ume
(Calculations)	Proposed Volume	8,000 ft ³	
	Proposed Sidewater Depth	10 ft	
	Surface Area	800 ft ²	
	Required Air Flow	240 scfm	
Chlorine Contact Des	ign		
(Criteria)	Minimum Contact Time	20 minutes @ Peak I	Flow
(Calculations)	Proposed Volume	1,974 ft ³	
	Proposed Sidewater Depth	10 ft	
	Surface Area	197 ft²	

Bullseye Type Plant Summary	Depth	Area	Degrees of Arc	Actual Area
Aeration Basin	10	2,667	265	2,696
Clarifier	10	755	N/A	755
Chlorine Contact	10	197	15	153
Digester	10	800	80	814
Total		4,419	360	4,418

Lockhart Landing Extended Air Process Design (TCEQ Checklist)

Phase 2

Design Flow (from Summary Sheet) 0.650 mgd
Peak Flow (from Summary Sheet) 1.939 mgd
Design Organic Load 400 lb BOD / day

Clarifier Design

(Criteria)

Maximum Surface Loading @ Peak Flow 900 gpd/ft²
Minimum Detention Time @ Peak Flow 2 hrs

Maximum Surface Loading @ Design Flow 450 gpd/ft² Minimum Detention Time @ Design Flow 4 hrs

Surface Area Required (Peak Flow) 2154.4 ft² Surface Area Required (Design Flow) 1444.4 ft²

> Volume Required (Peak Flow) 21,602 ft³ Volume Required (Design Flow) 14,483 ft³

Depth Required (Peak Flow) 10.0 ft Depth Required (Design Flow) 10.0 ft

Maximum Return Sludge Underflow Rate 400.0 gpd/ft²
Minimum Return Sludge Underflow Rate 200.0 gpd/ft²

(Calculations)

Proposed Sidewater Depth 10 ft

Note - Min SWD is 8 ft, 10 ft if area > 1250 ft²

Proposed Clarifier Diameter 43 ft

Clarifier Surface Area 1,452 ft2

Clarifier Volume 14,522 ft³

Maximum Return Sludge Underflow Rate 403 gpm Minimum Return Sludge Underflow Rate 202 gpm

RAS Line Size (min 3 ft/sec velocity) 4 inches

Aeration System Design (Criteria)		
Organic Loa Actual Design		
Required Vo	ume 26667 ft ³	
Required Air	scf / lb BOI (assumes 4 transfer Flow 3200 efficiency)	
(Calculations)		Note - Min SWD is
Proposed Sidewater D		8 ft
Surface	Area 2,667 ft ²	
Air	low 889 scfm	
Aerobic Digester Design (Criteria)		
Volume Requ	ired 20 ft³ / lb BOD or 15 days SRT	
Air Req	ired 30 scfm/ 1000	ft ³ volume
(Calculations) Proposed Vo	ume 8,000 ft ³	
Proposed Sidewater D	epth 10 ft	
Surface	Area 800 ft²	
Required Air	Flow 240 scfm	
Chlorine Contact Design		
(Criteria) Minimum Contact	ime 20 minutes @	Peak Flow
(Calculations) Proposed Vo	ume 3,600 ft ³	
Proposed Sidewater D	epth 10 ft	
Surface	Area 360 ft ²	

Bullseye Type Plant Summary	Depth	Area	Degrees of Arc	Actual Area
Aeration Basin	10	2,667	265	3,108
Clarifier	10	1,452	N/A	1,452
Chlorine Contact	10	360	15	176
Digester	10	800	80	938
Total		5,279	360	5,675

Lockhart Landing Extended Air Process Design (TCEQ Checklist)

Phase 3

Design Flow (from Summary Sheet) 0.975 mgd Peak Flow (from Summary Sheet) 2.737 mgd

Design Organic Load 400 lb BOD / day

Clarifier Design

(Criteria)

Maximum Surface Loading @ Peak Flow 900 gpd/ft²
Minimum Detention Time @ Peak Flow 2 hrs

Maximum Surface Loading @ Design Flow 450 gpd/ft²
Minimum Detention Time @ Design Flow 4 hrs

Surface Area Required (Peak Flow) 3041.2 ft² Surface Area Required (Design Flow) 2166.67 ft²

> Volume Required (Peak Flow) 30,494 ft³ Volume Required (Design Flow) 21,725 ft³

Depth Required (Peak Flow) 10.0 ft Depth Required (Design Flow) 10.0 ft

Maximum Return Sludge Underflow Rate 400.0 gpd/ft²
Minimum Return Sludge Underflow Rate 200.0 gpd/ft²

(Calculations)

Proposed Sidewater Depth 10 ft

Note - Min SWD is 8 ft, 10 ft if area > 1250 ft²

Proposed Clarifier Diameter 53 ft

Clarifier Volume 22,062 ft³

Maximum Return Sludge Underflow Rate 613 gpm Minimum Return Sludge Underflow Rate 306 gpm

Clarifier Surface Area

RAS Line Size (min 3 ft/sec velocity) 4 inches

Aeration System Design

(Criteria)

Organic Loading 15 lb BOD/day/1000 ft³ Actual Design Load 400 lb BOD/day

2,206 ft²

Required Volume 26667 ft³

scf / lb BOD (assumes 4.0% transfer

Required Air Flow 3200 efficiency)

(Calculations)

	Proposed Sidewater Depth	10 ft	Note - Min SWD is 8 ft
	Surface Area	2,667 ft ²	
	Air Flow	889 scfm	
Aerobic Digester De (Criteria)	esign		
,	Volume Required or	20 ft ³ / lb BOD 15 days SRT	
	Air Required	30 scfm/ 1000 ft ³ vo	olume
(Calculations)	Proposed Volume	8,000 ft ³	
	Proposed Sidewater Depth	10 ft	
	Surface Area	800 ft ²	
	Required Air Flow	240 scfm	
Chlorine Contact De (Criteria)	esign		
	Minimum Contact Time	20 minutes @ Peak	< Flow
(Calculations)	Proposed Volume	5,082 ft ³	
	Proposed Sidewater Depth	10 ft	
	Surface Area	508 ft ²	

Bullseye Type Plant Summary	Depth	Area	Degrees of Arc	Actual Area
Aeration Basin	10	2,667	265	3,059
Clarifier	10	2,206	N/A	2,206
Chlorine Contact	10	508	15	173
Digester	10	800	80	923
Total		6,181	360	6,362

APPENDIX J

FEMA FLOOD MAPS

NOTES TO USERS

This map is for use in administering the National Flood Insurance Program. I does not necessarily identify all areas subject to flooding, particularly from local drainage sources of small size. The community map repository should be consulted for possible updated or additional flood hazard information.

To obtain more detailed information in areas where Base Flood Elevations (BFEs) and/or floodways have been determined, users are encouraged to consult the Flood Profiles and Floodway Data and/or Summary of Stillwater Elevations tables contained within the Flood Insurance Study (FIS) report that accompanies this FIRM. Users should be aware that BFEs shown on the FIRM represent rounded whole-foot elevations. These BFEs are intended for flood insurance rating purposes only and should not be used as the sole source of flood elevation information. Accordingly, flood elevation data presented in the FIS report should be utilized in conjunction with the FIRM for purposes of construction and/or floodplain management.

Coastal Base Flood Elevations shown on this map apply only landward of 0.0' North American Vertical Datum of 1988 (NAVD 88). Users of this FIRM should be aware that coastal flood elevations are also provided in the Summary of Stillwater Elevations table in the Flood Insurance Study report for this jurisdiction. Elevations shown in the Summary of Stillwater Elevations table should be used for construction and/or floodplain management purposes when they are higher than the elevations shown on this FIRM.

Boundaries of the **floodways** were computed at cross sections and interpolated between cross sections. The floodways were based on hydraulic considerations with regard to requirements of the National Flood Insurance Program. Floodway widths and other pertinent floodway data are provided in the Flood Insurance Study report for this jurisdiction.

Certain areas not in Special Flood Hazard Areas may be protected by flood control structures. Refer to Section 2.4 "Flood Protection Measures" of the Flood Insurance Study report for information on flood control structures for this jurisdiction.

The **projection** used in the preparation of this map was Plane south central zone (FIPSZONE 4204). The horizontal datum was NAD83. GRS1980 spheroid. Differences in datum, spheroid, projection or State Plane zones used in the production of FIRMs for adjacent jurisdictions may result in slight positional differences in map features across jurisdiction boundaries. These differences do not affect the accuracy of the FIRM.

Flood elevations on this map are referenced to the North American Vertical Datum of 1988. These flood elevations must be compared to structure and ground elevations referenced to the same vertical datum. For information regarding conversion between the National Geodetic Vertical Datum of 1929 and the North American Vertical Datum of 1988, visit the National Geodetic Survey website at http://www.ngs.noaa.gov/ or contact the National Geodetic Survey at the following address:

NGS Information Services NOAA, N/NGS12 National Geodetic Survey SSMC-3, #9202 1315 East-West Highway Silver Spring, MD 20910-3282

To obtain current elevation, description, and/or location information for bench marks shown on this map, please contact the Information Services Branch of the National Geodetic Survey at (301) 713-3242, or visit its website at http://www.ngs.noaa.gov/.

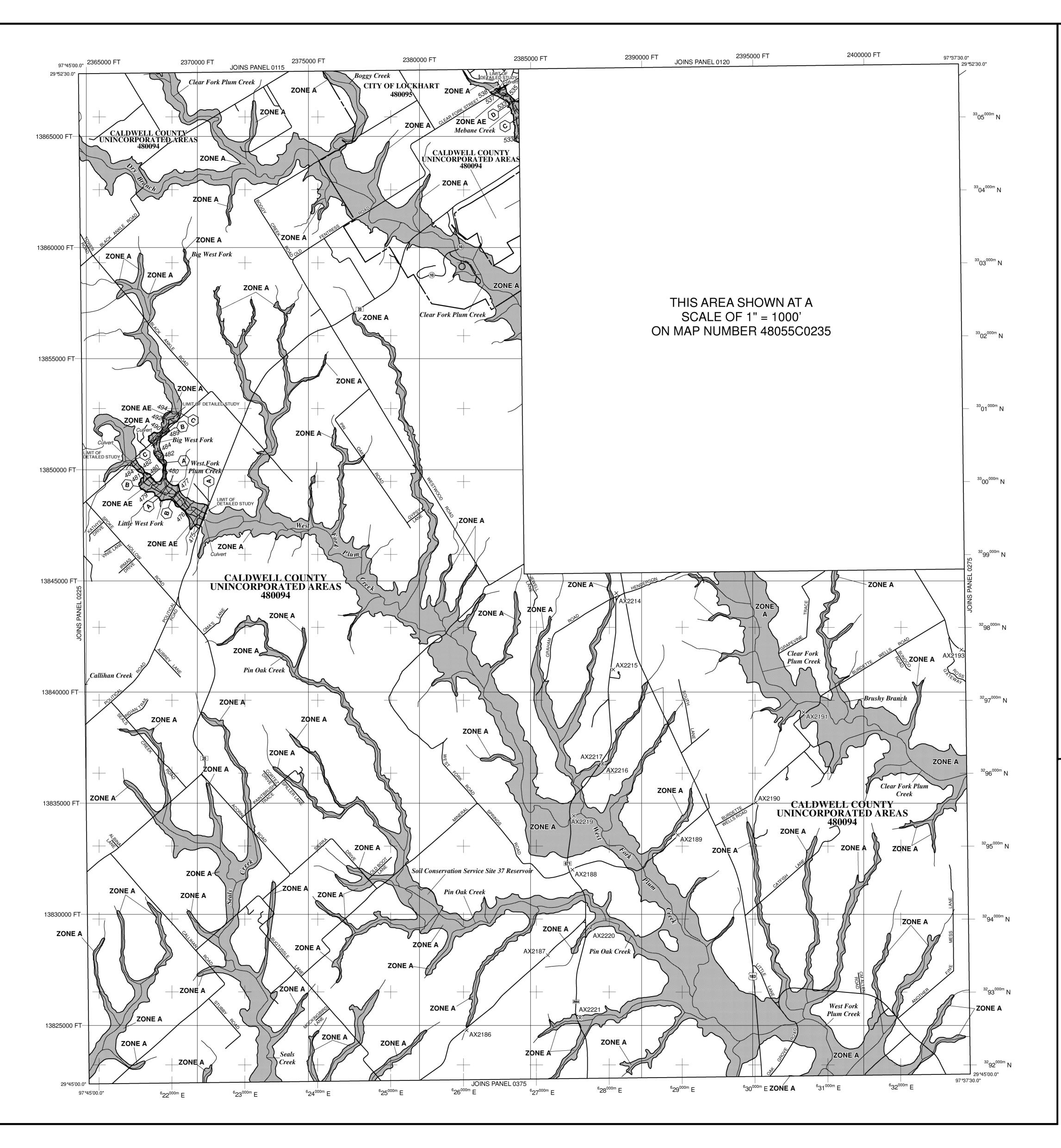
Base map information shown on this FIRM was provided in digital format by the Texas Natural Resource Information System (TNRIS). This information was photogrammetrically compiled at a scale of at least 1:24,000 from aerial photography dated 2004.

This map reflects more detailed and up-to-date stream channel configurations than those shown on the previous FIRM for this jurisdiction. The floodplains and floodways that were transferred from the previous FIRM may have been adjusted to conform to these new stream channel configurations. As a result, the Flood Profiles and Floodway Data tables in the Flood Insurance Study report (which contains authoritative hydraulic data) may reflect stream channel distances that differ from what is shown on this map.

Corporate limits shown on this map are based on the best data available at the time of publication. Because changes due to annexations or de-annexation may have occurred after this map was published, map users should contact appropriate community officials to verify current corporate limit locations.

Please refer to the separately printed Map Index for an overview map of the county showing the layout of map panels; community map repository addresses; and a Listing of Communities table containing National Flood Insurance Program dates for each community as well as a listing of the panels on which each community is located.

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



LEGEND

SPECIAL FLOOD HAZARD AREAS (SFHAs) SUBJECT TO INUNDATION BY THE 1% ANNUAL CHANCE FLOOD

The 1% annual chance flood (100-year flood), also known as the base flood, is the flood that has a 1% chance of being equaled or exceeded in any given year. The Special Flood Hazard Area is the area subject to flooding by the 1% annual chance flood. Areas of Special Flood Hazard include Zones A, AE, AH, AO, AR, A99, V and VE. The Base Flood Elevation is the water-surface elevation of the 1% annual chance flood.

No Base Flood Elevations determined. Base Flood Elevations determined.

Flood depths of 1 to 3 feet (usually areas of ponding); Base Flood Flood depths of 1 to 3 feet (usually sheet flow on sloping terrain); average depths determined. For areas of alluvial fan flooding, velocities

chance flood by a flood control system that was subsequently decertified. Zone AR indicates that the former flood control system is being restored to provide protection from the 1% annual chance or Area to be protected from 1% annual chance flood by a Federal

Special Flood Hazard Area formerly protected from the 1% annual

Coastal flood zone with velocity hazard (wave action); Base Flood

flood protection system under construction; no Base Flood Elevations Coastal flood zone with velocity hazard (wave action); no Base Flood Elevations determined.

FLOODWAY AREAS IN ZONE AE

The floodway is the channel of a stream plus any adjacent floodplain areas that must be kept free of encroachment so that the 1% annual chance flood can be carried without substantial increases in flood heights.

OTHER FLOOD AREAS

Elevations determined.

Areas of 0.2% annual chance flood; areas of 1% annual chance flood with average depths of less than 1 foot or with drainage areas less than 1 square mile; and areas protected by levees from 1% annual chance

OTHER AREAS

Areas determined to be outside the 0.2% annual chance floodplain. Areas in which flood hazards are undetermined, but possible.

COASTAL BARRIER RESOURCES SYSTEM (CBRS) AREAS

OTHERWISE PROTECTED AREAS (OPAs)

CBRS areas and OPAs are normally located within or adjacent to Special Flood Hazard Areas. Floodplain boundary

Floodway boundary - Zone D boundary ••••• CBRS and OPA boundary Boundary dividing Special Flood Hazard Areas of different Base Flood Elevations, flood depths or flood velocities. **Sale Proof** Base Flood Elevation line and value; elevation in feet*

Base Flood Elevation value where uniform within zone; elevation in feet* * Referenced to the North American Vertical Datum of 1988 (NAVD 88)

6000000 FT

(23)----(23)

Geographic coordinates referenced to the North American 97 °07'30", 32 °22'30" Datum of 1983 (NAD 83) 1000-meter Universal Transverse Mercator grid ticks, zone 14 5000-foot grid values: Texas State Plane coordinate

system, south central zone (FIPSZONE 4204), Conformal Conic Bench mark (see explanation in Notes to Users section of

M1.5 MAP REPOSITORIES

this FIRM panel)

Refer to Map Repositories list on Map Index EFFECTIVE DATE OF COUNTYWIDE

FLOOD INSURANCE RATE MAP June 19, 2012 EFFECTIVE DATE(S) OF REVISION(S) TO THIS PANEL

For community map revision history prior to countywide mapping, refer to the Community Map History table located in the Flood Insurance Study report for this jurisdiction.

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

MAP SCALE 1" = 2000'

 ■ METERS PANEL 0250E

FIRM

FLOOD INSURANCE RATE MAP CALDWELL COUNTY,

TEXAS

AND INCORPORATED AREAS

PANEL 250 OF 425

(SEE MAP INDEX FOR FIRM PANEL LAYOUT) **CONTAINS:** NUMBER PANEL SUFFIX

0250

0250

COMMUNITY CALDWELL COUNTY 480094 LOCKHART, CITY OF 480095

Notice to User: The Map Number shown below should be used when placing map orders; the Community Number shown above should be used on insurance applications for the subject



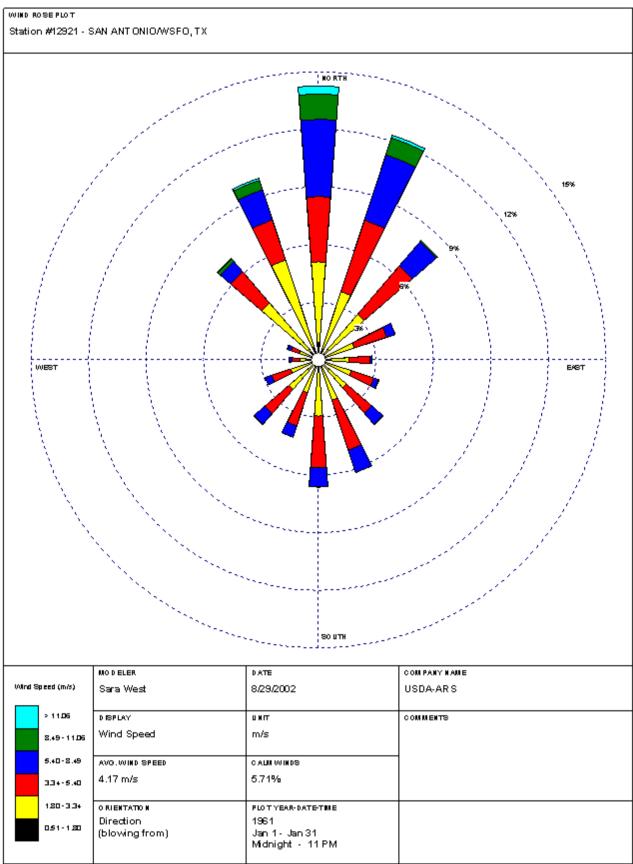
48055C0250E **EFFECTIVE DATE JUNE 19, 2012**

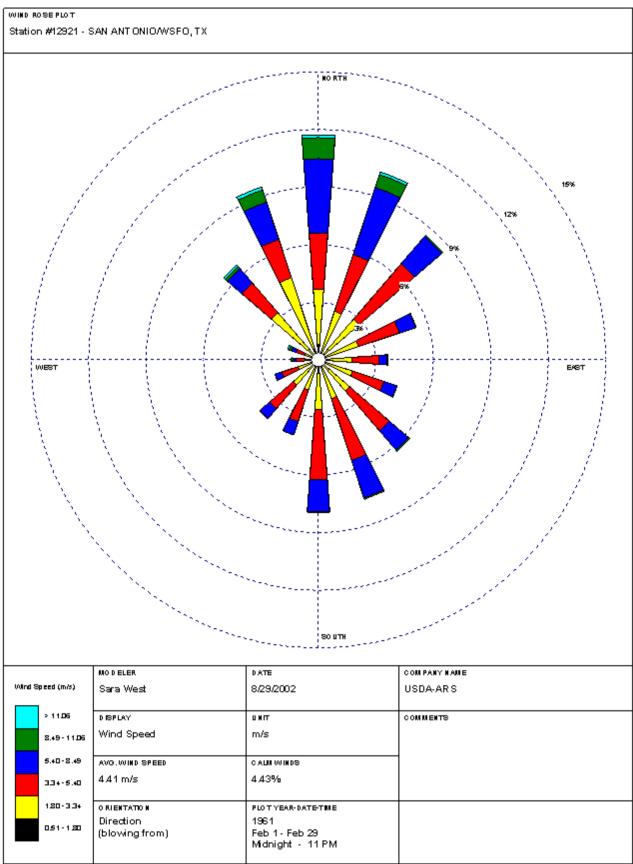
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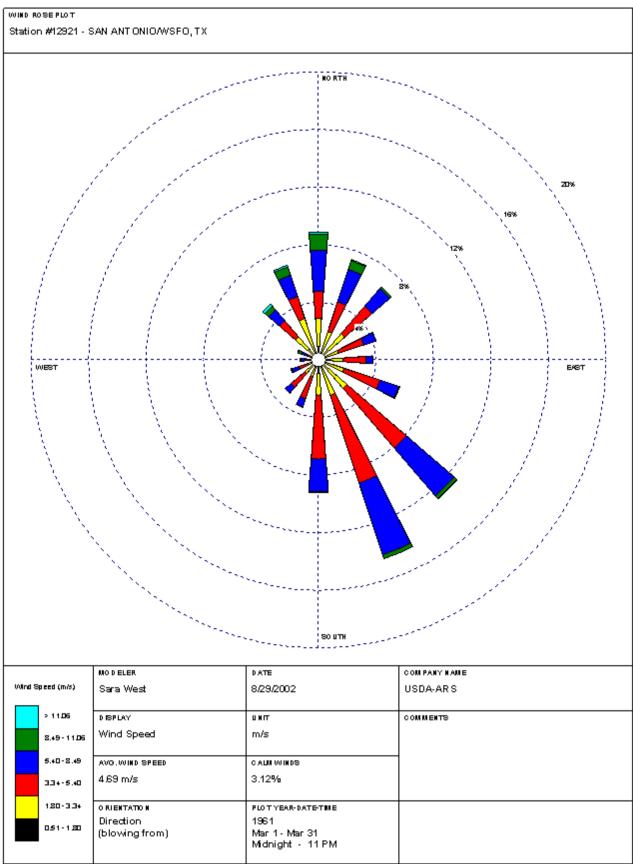
Federal Emergency Management Agency

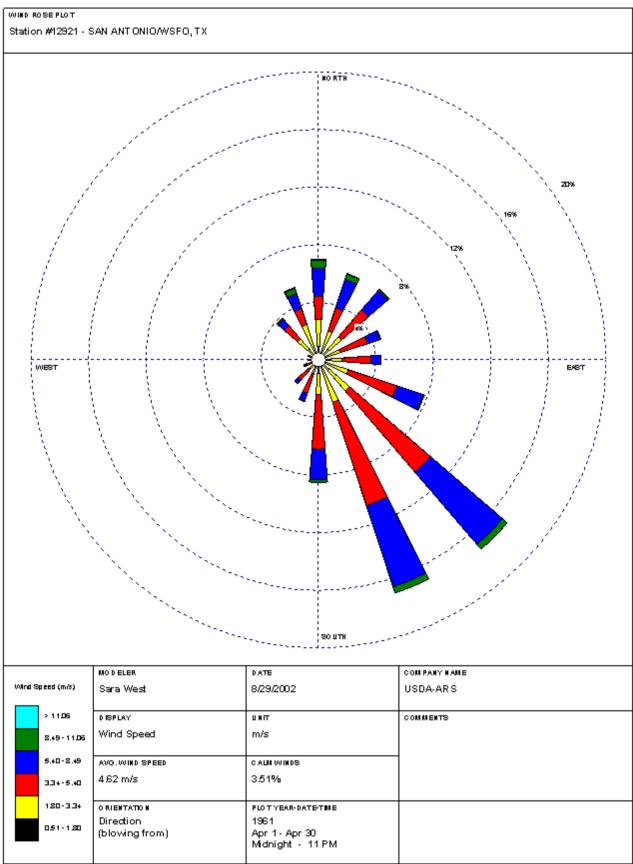
APPENDIX K

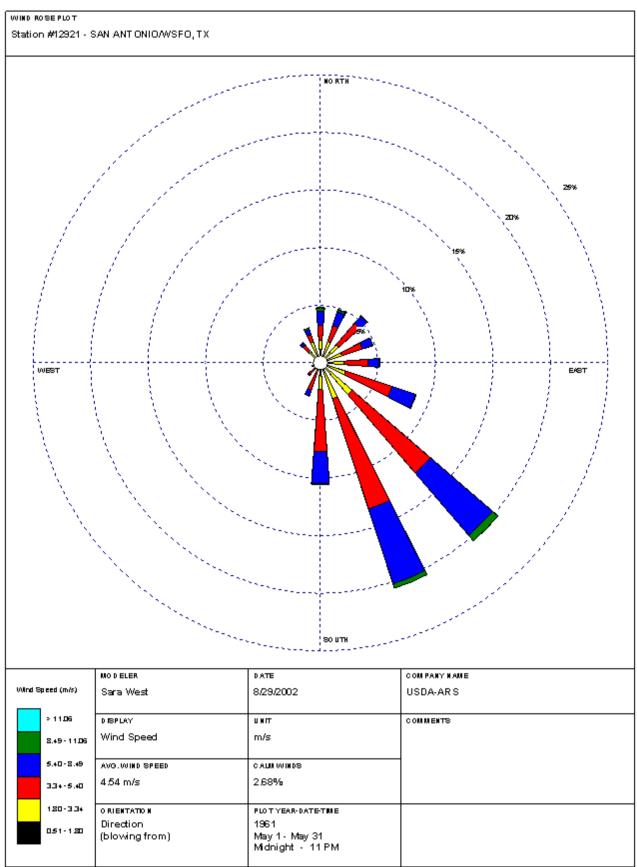
WIND ROSE

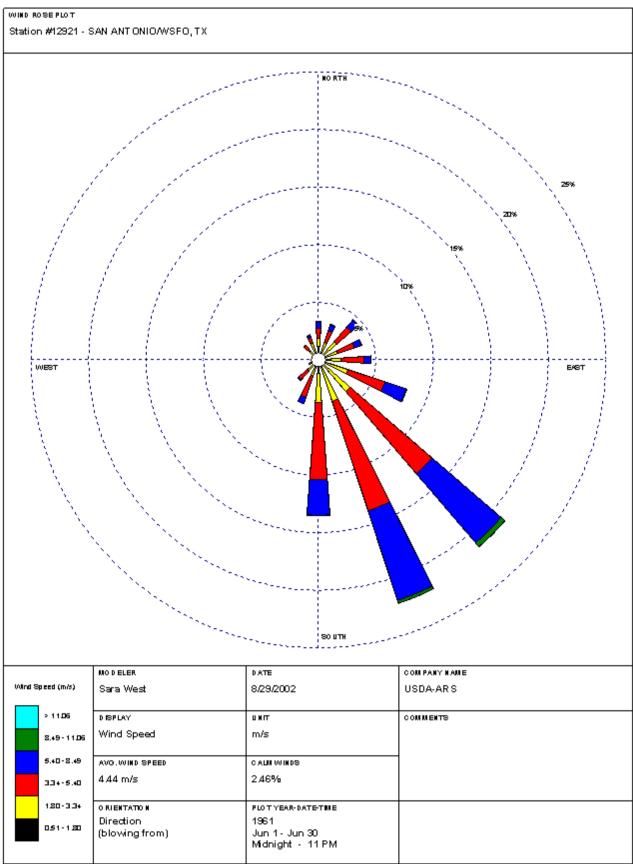


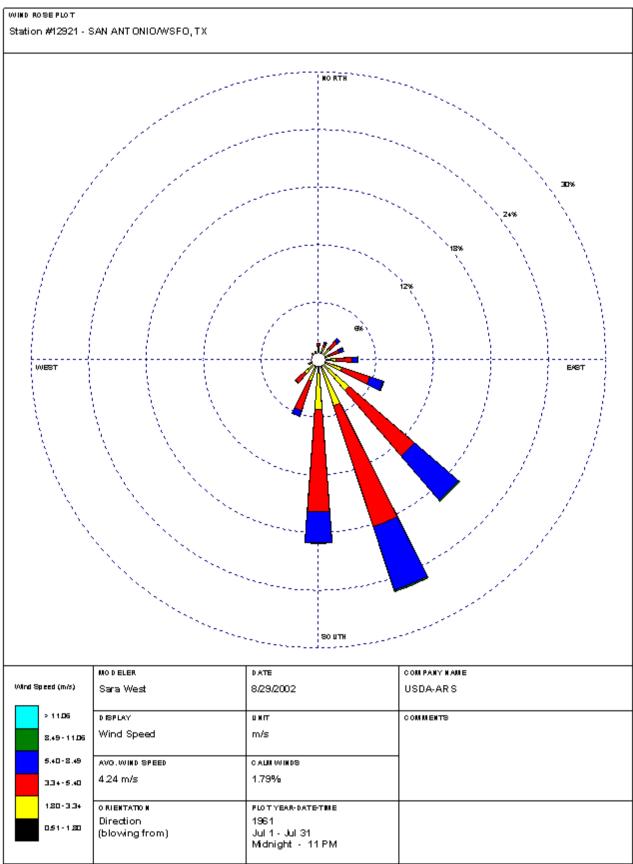


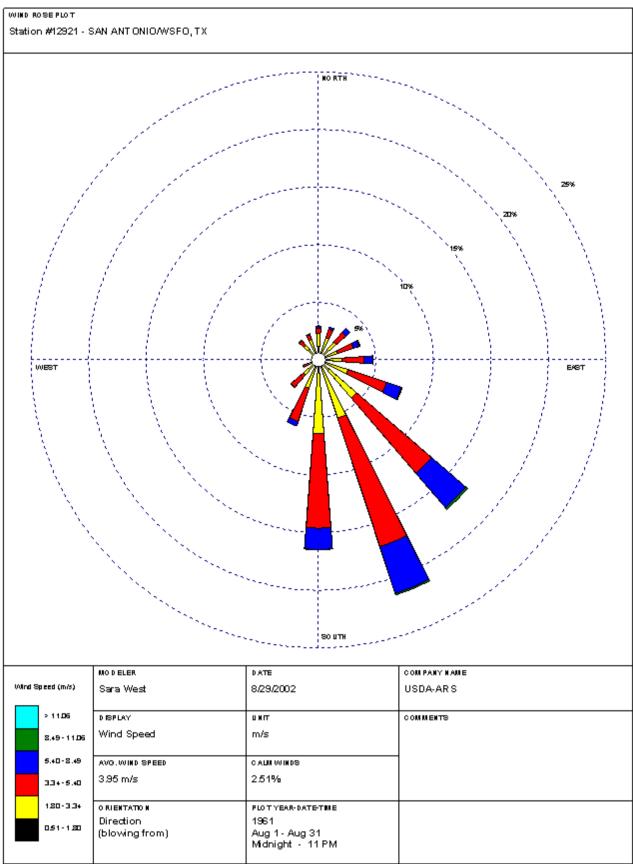


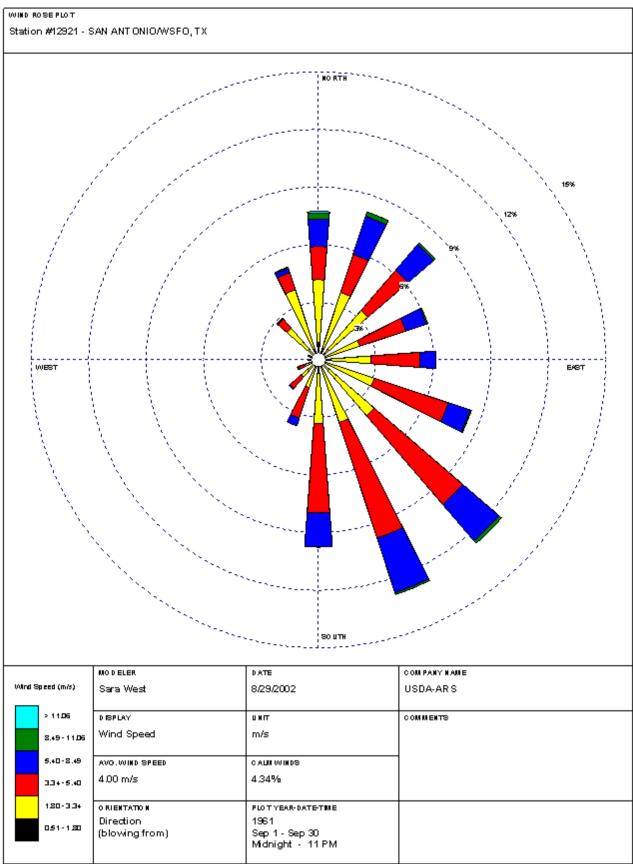


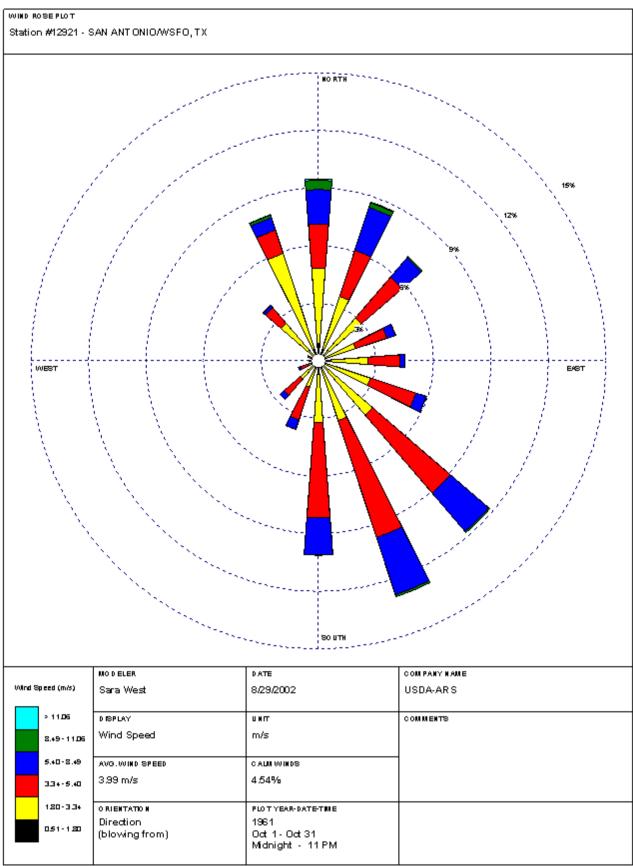


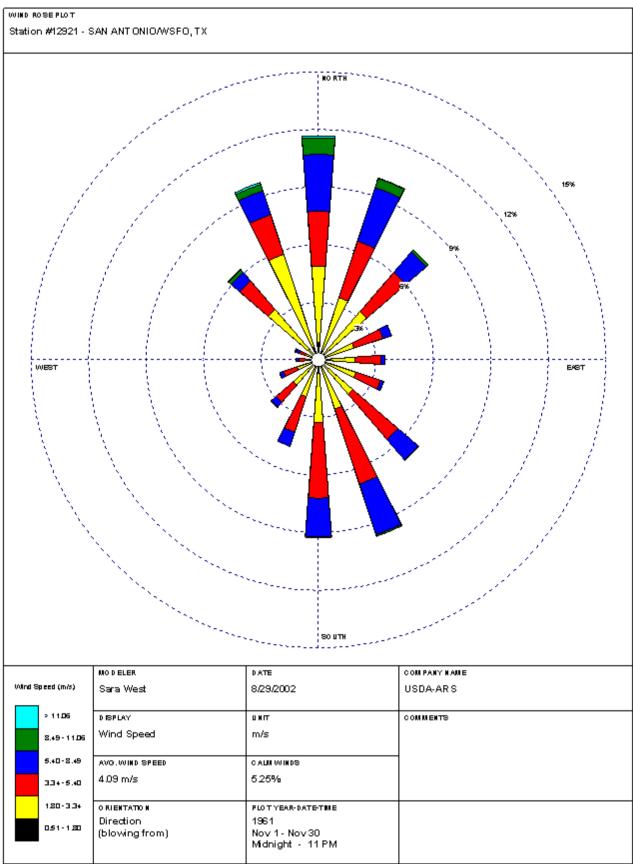


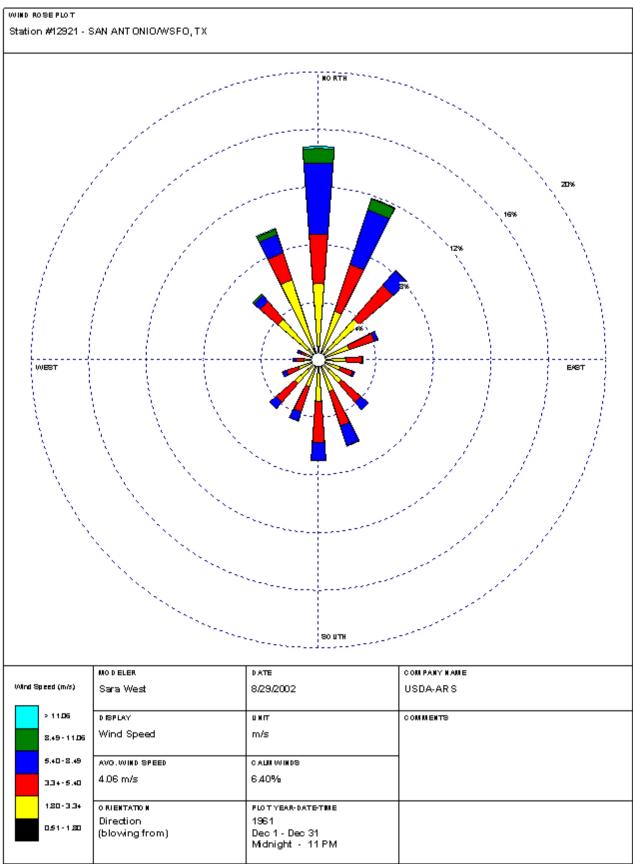












APPENDIX L

SEWAGE SOLIDS MANAGEMENT PLAN

First Phase

Design Flow	Vol Dig	Percentage	Flow	P _x	P _{x (ss)}	Q_{Sldg}	HRT _{Sldg}
gpd	ft³ (gal)		gpd	lbs VSS/day	lbs SS/day	gpd	days
325,000	8,000	25%	81,250	71	89	1,331	45
		50%	162,500	142	178	2,663	22
	59,840	75%	243,750	213	266	3,994	15
		100%	325,000	284	355	5,325	11

Interim Phase

Design Flow	Vol Dig	Percentage	Flow	P _x	P _{x (ss)}	Q_{Sldg}	HRT _{Sldg}
gpd	ft³ (gal)		gpd	lbs VSS/day	lbs SS/day	gpd	days
650,000	16,000	25%	162,500	142	178	2,663	22
		50%	325,000	284	355	5,325	11
	119,680	75%	487,500	426	533	7,988	7
		100%	650,000	568	711	10,651	6

Final Phase

Design Flow	Vol Dig	Percentage	Flow	P _x	P _{x (ss)}	Q _{Sldg}	HRT _{Sldg}
gpd	ft³ (gal)		gpd	lbs VSS/day	lbs SS/day	gpd	days
975,000	24,000	25%	243,750	213	266	3,994	15
		50%	487,500	426	533	7,988	7
	179,520	75%	731,250	640	799	11,982	5
		100%	975,000	853	1,066	15,976	4

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