Notice of Intent (NOI) for Discharges from Aquaculture Facilities under TPDES General Permit (TXG130000)

**IMPORTANT:**

Use the [INSTRUCTIONS](#INSTRUCTIONS) to fill out each question in this form.

Once processed, your permit authorization can be viewed at: <http://www.tceq.texas.gov/goto/wq-dpa>

**APPLICATION FEE:**

You must pay the **$100** Application Fee to TCEQ for the application to be complete.

Payment and NOI must be mailed to separate addresses.

You can pay online:

Go to <http://www.tceq.texas.gov/goto/epay>

Select Fee Type: GENERAL PERMIT WASTEWATER DISCHARGE APPLICATION

**Provide your payment information below, for verification of payment**

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

 Check/Money Order Amount: Click here to enter text.

 Name Printed on Check: Click here to enter text.

EPAY Voucher Number: Click here to enter text.

 Copy of Payment Voucher enclosed? Yes [ ]

**REASON FOR APPLICATION:**

**Select the reason you are submitting this application:**

[ ]   New authorization

[ ]   Change in owner or operator for authorization number: TXG13 Click here to enter text.

[ ]   Renewal of authorization number: TXG13 Click here to enter

# Section 1. Owner (Applicant)

If there is more than one owner, complete Attachment A for each additional owner.

1. If the applicant is currently a customer with TCEQ, what is the Customer Number (CN) issued to this entity? CN Click here to enter text.
2. What is the Legal Name of the entity (applicant) applying for this permit? (The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.)

Click here to enter text.

1. Complete and attach a Core Data Form (TCEQ-10400) for this customer.

# Section 2. OPERATOR (Applicant)

If there is more than one operator, complete Attachment A for each additional operator.

Is the Operator the same as the Owner?

 [ ]   Yes, go to Section 3)

 [ ]   No, complete section below

1. If the applicant is currently a customer with TCEQ, what is the Customer Number (CN) issued to this entity? CN Click here to enter text.
2. What is the Legal Name of the entity (applicant) applying for this permit? (The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.)

Click here to enter text.

1. Complete and attach a Core Data Form (TCEQ-10400) for this customer.

# Section 3. ANNUAL BILLING CONTACT

The applicant is responsible for paying the annual fee. The annual fee will be assessed to permits active on September 1 of each year. TCEQ will send a bill to the address provided in this section. The applicant is responsible for terminating the permit when it is no longer needed.

Is the billing contact and contact information the same as the Owner or the Operator identified in Section 1) or Section 2) above?

[ ]   Yes, specify which applicant on the line below and go to Section 4)

Click here to enter text.

[ ]   No, complete section below

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

First and Last Name: Click here to enter text. Suffix: Click here to enter text.

Title: Click here to enter text. Credentials: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text.

Email: Click here to enter text.

Mailing Address: Click here to enter text.

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

# Section 4. APPLICATION CONTACT

This is the person TCEQ will contact if additional information is needed about this application.

Is the application contact and contact information the same as the Owner or Operator identified in Section 1) or Section 2) above?

[ ]   Yes, specify which applicant on the line below and go to Section 5)

Click here to enter text.

[ ]   No, complete section below

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

First and Last Name: Click here to enter text. Suffix: Click here to enter text.

Title: Click here to enter text. Credentials: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text.

Email: Click here to enter text.

Mailing Address: Click here to enter text.

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

#  Section 5. REGULATED ENTITY (RE) INFORMATION ON PROJECT OR SITE

1. If this is an existing permitted site, what is the Regulated Entity Number (RN) issued to this site? RN Click here to enter text.
2. Name of project or site as known by the local community:

Click here to enter text.

# Section 6. GENERAL CHARACTERISTICS

1. Is this site located on Indian Country Lands?

[ ]   Yes, do not submit this application form. You must obtain authorization through EPA, Region 6.

[ ]   No, continue to item b).

1. Authorization Type: See instructions to determine authorization type.

[ ]    State Only Level II (Land Application or Evaporation)

[ ]    TPDES Level II (Discharge)

[ ]    TPDES Level III (Discharge)

[ ]    TPDES Level IV (Discharge)

[ ]    TPDES Level V (Discharge)

1. Species Type:

[ ]   Shrimp Research in the Coastal Zone (non-commercial)

[ ]   Oysters in a Net Pen System

[ ]   Cold Water Aquatic Species (trout or salmon)

[ ]   Warm Water Aquatic Species (aquatic species other than those listed above)

1. What is the specific species of fish or other organism produced? Click here to enter text.
2. For cold water species: What is the feeding rate, in pounds of food per calendar month of maximum feeding? Click here to enter text.
3. For oysters in a net pen system: Provide the following information:
	1. What is the latitude for the net pen system? Click here to enter text.
	2. What is the longitude for the net pen system? Click here to enter text.
	3. What is the name of the water body where the net pen system is located?

Click here to enter text.

* 1. What is the segment number of the classified water body where the net pen system is located?

Click here to enter text.

1. Annual Harvest Weight

For existing facilities, what is the annual harvest weight from the last two years of production? Click here to enter text.

For new facilities, what is the harvest weight the facility is designed to produce each year? Click here to enter text.

1. Production Unit Type. Select each type of structure or system used and provide the requested information about each type.

[ ]    Ponds: How many? Click here to enter text. Total Surface Acres: Click here to enter text.

[ ]    Raceways: How many? Click here to enter text.

[ ]    Tanks: How many? Click here to enter text.

[ ]    Net Pen System: How many nets, screens, cages, trays, etc? Click here to enter text. Briefly describe (such as nets, screens, cages, trays, etc): Click here to enter text.

[ ]    Other Structures: How many? Click here to enter text. Briefly describe: Click here to enter text.

[ ]    Recirculating Systems: How many? Click here to enter text.

[ ]    Flow-Through Systems: How many? Click here to enter text.

1. Edwards Aquifer Rule

Is the discharge or potential discharge within the Recharge Zone, Contributing Zone, within the Contributing Zone within the Transition Zone, or zero to ten (0 to 10) miles upstream of the Recharge Zone of the Edwards Aquifer?

[ ]   Yes, please note that a site specific authorization approved by the Executive Director under the Edwards Aquifer Protection Program (30 TAC Chapter 213) is required.

[ ]   No

1. Topographic Map

Attach an original USGS topographical map showing a three mile radius from the facility property/lease boundaries. Clearly delineate the property/lease boundaries, the outfall locations, production units, and irrigation areas.

1. Land Application Information. This item only applies to State Only Level II. If your facility is TPDES Level II, TPDES Level III, TPDES Level IV, or TPDES Level V, skip to item l)
2. What is the name of the first water body to receive the potential discharge? Click here to enter text.
3. What is the segment number of the classified water body that the potential discharge will eventually reach? Click here to enter text.
4. Discharge Information. This item only applies to TPDES Level II, TPDES Level III, and TPDES Level IV. If your facility is State Only Level II or TPDES Level V, skip to Section 7.
5. How many days per year will the facility discharge wastewater? Click here to enter text.
6. What is the estimated volume of wastewater discharge, in gallons per day? Click here to enter text.
7. Is the wastewater treated prior to discharge? [ ]    Yes [ ]    No

If yes, briefly describe the wastewater treatment process: Click here to enter text.

1. Outfall Information. For each point of discharge (aka outfall) provide the requested information. If there are more than 2 outfalls, complete Attachment B.

Outfall Number 001

* 1. What is the latitude for this outfall? Click here to enter text.
	2. What is the longitude for this outfall? Click here to enter text.
	3. What is the name of the first water body to receive the discharge?

Click here to enter text.

* 1. What is the segment number of the classified water body that the discharge will eventually reach?

Click here to enter text.

* 1. Provide a complete description of the discharge route from the outfall to the nearest classified segment:

Click here to enter text.

* 1. Does this outfall discharge into a perennial stream? [ ]    Yes [ ]    No

If yes, Select the perennial stream’s headwater flow.

[ ]   less than 2.5 cubic feet per second

[ ]   greater than 2.5 cubic feet per second

Outfall Number 002

* 1. What is the latitude for this outfall? Click here to enter text.
	2. What is the longitude for this outfall? Click here to enter text.
	3. What is the name of the first water body to receive the discharge?

Click here to enter text.

* 1. What is the segment number of the classified water body that the discharge will eventually reach?

Click here to enter text.

* 1. Provide a complete description of the discharge route from the outfall to the nearest classified segment:

Click here to enter text.

* 1. Does this outfall discharge into a perennial stream? [ ]    Yes [ ]    No

If yes, Select the perennial stream’s headwater flow.

[ ]   less than 2.5 cubic feet per second

[ ]   greater than 2.5 cubic feet per second

1. Contact for Discharge Monitoring Reports (EPA 3320-1). Provide the name and contact information of the person responsible for submitting Discharge Monitoring Report Forms.

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

First and Last Name: Click here to enter text. Suffix: Click here to enter text.

Title: Click here to enter text. Credentials: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text.

Email: Click here to enter text.

Mailing Address: Click here to enter text.

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

You can submit DMR data online at: <https://netdmr.tceq.texas.gov/netdmr-web/public/login.htm>

# Section 7. CERTIFICATION

|  |  |
| --- | --- |
| I certify that I have obtained a copy and understand the terms and conditions of the General Permit TXG130000.  | Yes [ ]    |
| I certify that the activities at this site qualify for coverage under the general permit TXG130000.  | Yes [ ]    |
| I understand that a Notice of Termination (NOT) must be submitted when this authorization is no longer needed.  | Yes [ ]    |
| I understand that permits active on September 1st of each year will be assessed an Annual Water Quality Fee.  | Yes [ ]    |
| I certify that the full legal name of the entity applying for this permit has been provided and is legally authorized to do business in Texas.  | Yes [ ]    |

## Owner Certification:

Owner Signatory Name: Click here to enter text.

Owner Signatory Title: Click here to enter text.

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.

Signature (use blue ink): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_

## Operator Certification:

Operator Signatory Name: Click here to enter text.

Operator Signatory Title: Click here to enter text.

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.

Signature (use blue ink): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_

Attachment A

Co-Applicant Information and Certification

Use this page to provide information and certification if there is more than one owner or operator.

Is this co-applicant an owner or operator? Owner [ ]    Operator [ ]

1. If the co-applicant is currently a customer with TCEQ, what is the Customer Number (CN) issued to this entity? CN Click here to enter text.
2. What is the Legal Name of the entity applying for this permit? (The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.)

Click here to enter text.

1. Complete and attach a Core Data Form (TCEQ-10400) for this customer.

## Co-Applicant Certification:

Co-Applicant Signatory Name: Click here to enter text.

Co-Applicant Signatory Title: Click here to enter text.

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 §305.44to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signature (use blue ink): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_

Attachment B

Outfall Information

Use this page if your facility has more than 2 outfalls. For each additional outfall, provide the requested information. Number each additional outfall consecutively (003, 004, 005, etc). Make additional copies of this page as necessary.

Outfall Number Click here to enter text.

1. What is the latitude for this outfall? Click here to enter text.
2. What is the longitude for this outfall? Click here to enter text.
3. What is the name of the first water body to receive the discharge? Click here to enter text.
4. What is the segment number of the classified water body that the discharge will eventually reach? Click here to enter text.
5. Provide a complete description of the discharge route from the outfall to the nearest classified segment: Click here to enter text.
	1. Does this outfall discharge into a perennial stream? [ ]    Yes [ ]    No

If yes, Select the perennial stream’s headwater flow.

[ ]   less than 2.5 cubic feet per second

[ ]   greater than 2.5 cubic feet per second

Outfall Number Click here to enter text.

1. What is the latitude for this outfall? Click here to enter text.
2. What is the longitude for this outfall? Click here to enter text.
3. What is the name of the first water body to receive the discharge? Click here to enter text.
4. What is the segment number of the classified water body that the discharge will eventually reach? Click here to enter text.
5. Provide a complete description of the discharge route from the outfall to the nearest classified segment: Click here to enter text.
	1. Does this outfall discharge into a perennial stream? [ ]    Yes [ ]    No

If yes, Select the perennial stream’s headwater flow.

[ ]   less than 2.5 cubic feet per second

[ ]   greater than 2.5 cubic feet per second

Texas Commission on Environmental Quality

General Permit Payment Submittal Form

**Use this form to submit your Application Fee only if you are mailing your payment.**

Complete items 1 through 5 below.

Staple your check in the space provided at the bottom of this document.

Do not mail this form with your NOI form.

Do not mail this form to the same address as your NOI.

**Mail this form and your check to:**

BY REGULAR U.S. MAIL

Texas Commission on Environmental Quality

Financial Administration Division

Cashier’s Office, MC-214

P.O. Box 13088

Austin, TX 78711-3088

BY OVERNIGHT/EXPRESS MAIL

Texas Commission on Environmental Quality

Financial Administration Division

Cashier’s Office, MC-214

12100 Park 35 Circle

Austin, TX 78753

Fee Code: GPA General Permit: TXG13

Check / Money Order No: Click here to enter text.

Amount of Check/Money Order: Click here to enter text.

Date of Check or Money Order: Click here to enter text.

Name on Check or Money Order: Click here to enter text.

NOI INFORMATION

If the check is for more than one NOI, list each Project/Site (RE) Name and Physical Address exactly as provided on the NOI. DO NOT SUBMIT A COPY OF THE NOI WITH THIS FORM AS IT COULD CAUSE DUPLICATE PERMIT ENTRIES.

If more space is needed, you may attach a list.

Project/Site (RE) Name: Click here to enter text.

Project/Site (RE) Physical Address: Click here to enter text.

Staple Check in This Space

Instructions for Notice of Intent (NOI) for Aquaculture Facilites under TPDES General Permit TXG130000

# GENERAL INFORMATION

## Where to Send the Notice of Intent (NOI)

**BY REGULAR U.S. MAIL:**

Texas Commission on Environmental Quality

Water Quality Division (MC-148)

P.O. Box 13087

Austin, Texas 78711-3087

**BY OVERNIGHT/EXPRESS MAIL:**

Texas Commission on Environmental Quality

Water Quality Division (MC-148)

12100 Park 35 Circle

Austin, TX 78753

## Application Fee

The application fee of $100 is required to be paid at the time the NOI is submitted. Failure to submit payment at the time the application is filed will cause delays in acknowledgment or denial of coverage under the general permit. Payment of the fee may be made by check or money order, payable to TCEQ, or through EPAY (electronic payment through the web).

**Mailed Payments:**

 Use the attached General Permit Payment Submittal Form. The application fee is submitted to a different address than the NOI. Read the General Permit Payment Submittal Form for further instructions.

**ePAY Electronic Payment:** <http://www.tceq.texas.gov/epay>

When making the payment you must select Water Quality, and then select the fee category “General Permit Wastewater Discharge Application”. You must include a copy of the payment voucher with your NOI. Your NOI will not be considered complete without the payment voucher.

## TCEQ Contact List

Application – status and form questions: 512-239-4671

Technical questions: 512-239-4671

Environmental Law Division: 512-239-0600

Records Management - obtain copies of forms: 512-239-0900

Reports from databases (as available): 512-239-DATA (3282)

Cashier’s office: 512-239-0357 or 512-239-0187

## Notice of Intent Process

When your Core Data Form and NOI are received by the program, the forms will be processed as follows:

1. **Administrative Review**: Each item on the forms will be reviewed for a complete response. In addition, the operator’s legal name must be verified with Texas Secretary of State as valid and active (if applicable). The address(s) on the Core Data form must be verified with the US Postal service as receiving regular mail delivery. Do not give an overnight/express mailing address.
2. **Notice of Deficiency:** If an item is incomplete or not verifiable as indicated above, a notice of deficiency (NOD) will be mailed to the operator. The operator will have 30 days to respond to the NOD. The response will be reviewed for completeness.
3. **Acknowledgment of Coverage:** An Acknowledgment Certificate will be mailed to the operator. This certificate acknowledges coverage under the general permit.

or

**Denial of Coverage:** If the operator fails to respond to the NOD or the response is inadequate, coverage under the general permit may be denied. If coverage is denied, the operator will be notified.

## General Permit (Your Permit)

Coverage under the general permit begins when the applicant is issued an authorization certificate.

You should have a copy of your general permit when submitting your application. You may view and print your permit for which you are seeking coverage, on the TCEQ website [http://www.tceq.texas.gov](http://www.tceq.texas.gov/). Search using keyword TXG130000.

## New Applicant, Change in Permittee or Permittee Information

If NOI is for a new customer and/or permittee information changes, completion and submittal of a Core Data form is required.

Authorizations under the general permit are not transferable. If the permittee(s) changes, the present permittee must submit a Notice of Termination (NOT) and the new operator must submit a Notice of Intent and a Core Data Form. The NOT and NOI must be submitted no later than 10 days prior to the change in status.

## Annual Water Quality Fee

This fee is assessed to permittees with an active authorization under the general permit on September 1 of each year. The designated billing contact will receive an invoice for payment of the annual fee in November of each year. The payment will be due 30 days from the invoice.

A 5% penalty will be assessed if the payment is not received by TCEQ by the due date. Annual fee assessments cannot be waived as long as the authorization under the general permit is active on September 1.

It is important for the permittees to submit a NOT when coverage under the general permit is no longer required. A NOT is effective on the postmarked date of mailing the form to TCEQ. It is recommended that the NOT be mailed using a method that documents the date mailed and received by TCEQ.

# INSTRUCTIONS FOR FILLING OUT THE FORM

**Change in Permittee(s):** Provide the authorization number. This number will begin with TXG13. Do not use TXG130000, that is the general permit number not your authorization number.

Please note that authorizations under a general permit are not transferable. If the permittee(s) changes, the present permittee must submit a Notice of Termination (NOT) and the new permittee must submit an NOI and a Core Data Form. The NOT and NOI must be submitted not later than 10 days prior to the change in status. If the NOI is for a different permittee, the NOI will be processed as a new permit.

**Renewal of General Permit:** Upon issuance of a renewed general permit, dischargers holding active authorizations under the expired general are required to submit a Notice of Intent to continue coverage. If a new NOI is not submitted by the deadline specified by TCEQ, existing permits under the expired general permit will be considered expired on that date.

Provide the authorization number. This number will begin with TXG13. Do not use TXG130000, that is the general permit number not your authorization number. If the permit number provided was terminated or denied, or was not provided, a new permit number will be issued.

## Section 1. and 2. Owner and Operator (Applicant)

If there is more than one owner or operator, complete Attachment A for each additional owner and operator.

1. **Customer Number (CN)**

TCEQ assigns each customer a number that begins with CN, followed by nine digits. This is not a permit number, registration number, or license number. If the applicant is an existing TCEQ customer, the Customer Number is available at the following website: <http://www15.tceq.texas.gov/crpub/>. If the applicant is not an existing TCEQ customer, leave the space for CN blank.

1. **Legal Name of Applicant**

Provide the current legal name of the applicant. The name must be provided exactly as filed with the Texas Secretary of State, or on the legal documents forming the entity as filed with the county. If filed in the county, provide a copy of the legal documents showing the legal name.

1. **Core Data Form**

Complete and attach a Core Data Form (TCEQ-10400) for each customer.

## Section 3. Annual Billing Contact

An annual fee is assessed to each operator holding active authorization under the general permit on September 1 of each year.

Provide the contact name and complete mailing address where the annual fee invoice should be mailed. Verify the address with the USPS. It must be an address for delivery of regular mail, not overnight express mail. Also, provide a phone of the operator’s representative responsible for payment of invoice.

The phone number should provide contact to the individual responsible for paying the annual fee.

The fax number and e-mail address are optional and should correspond to the individual responsible for paying the annual fee.

## Section 4. Application Contact

Provide the name, title and contact information of the person that TCEQ can contact for additional information regarding this application.

## Section 5. Regulated Entity (RE) Information on Project or Site

1. **Regulated Entity Reference Number (RN)**

The RN is issued by TCEQ to sites where an activity is regulated by TCEQ. This is not a permit number, registration number, or license number. Search TCEQ’s Central Registry to see if the site has an assigned RN at <http://www15.tceq.texas.gov/crpub/>. If this regulated entity has not been assigned an RN, leave this space blank.

If the site of your business is part of a larger business site, an RN may already be assigned for the larger site. Use the RN assigned for the larger site.

If the site is found, provide the assigned RN and provide the information for the site to be authorized through this application. The site information for this authorization may vary from the larger site information.

An example is a chemical plant where a unit is owned or operated by a separate corporation that is accessible by the same physical address of your unit or facility. Other examples include industrial parks identified by one common address but different corporations have control of defined areas within the site. In both cases, an RN would be assigned for the physical address location and the permitted sites would be identified separately under the same RN.

1. **Name of the Project or Site**

Provide the name of the site or project as known by the public in the area where the site is located. The name you provide on this application will be used in the TCEQ Central Registry as the Regulated Entity name.

## Section 6. General Characteristics

1. **Indian Country Lands**

 If your site is located on Indian Country Lands, the TCEQ does not have authority to process your application. You must obtain authorization through EPA, Region 6, in Dallas. Do not submit this application form to TCEQ.

1. **Authorization Type**

**If the facility is a commercial shrimp facility in the coastal zone the facility does not qualify for coverage under this general permit. An individual permit is required.**

**Select the authorization type for your facility.**

**State Only Level II (land application or evaporation): Select this level if you only dispose of wastewater by land application or evaporation.**

**TPDES Level II (discharge)**

1. Cold Water Species: discharge <30 days per yr; or produce <20,000 lb per yr and feeds <5,000 lbs monthly
2. Warm Water Species: discharge <30 days per yr, or produce <100,000 lb per yr

**TPDES Level III (discharge)**

1. **Cold Water Species: discharge 30 or more days per yr; and either produce >19,999 lb per yr, or feeds >4999 lbs monthly**
2. **Warm Water Species: discharge 30 or more days per yr, and produce >99,999 lb per yr**
3. **Shrimp Research (Non-Commercial) in Coastal Zone: discharge <60 days per yr, daily max flow <5 MGD, and total month flow <12.5 MGD**

**TPDES Level IV (discharge): Select this level if you meet the thresholds of Level III and produce 100,000 pounds or more of aquatic animals per year in a flow-through system or recirculating system.**

**TPDES Level V (Discharge): Select this level if your aquaculture facility produces oysters in a net pen system.**

1. **Species Type**

Select the type of species at your facility.

1. **Identify the specific species of fish or other organism produced.**
2. **For cold water species, provide the feeding rate, in pounds of food per calendar month of maximum feeding.**
3. **For oysters in a net pen system, provide the latitude and longitude for the net pen system, and the waterbody name and segment number where the net pen system is located.**
4. **Annual Harvest Weight**

**Harvest weight is defined as the live animal weight, including viscera, skin, scales, shells, fins, appendages, etc.**

**For existing facilities, provide the annual harvest weight for each of the last 2 years.**

**For new facilities, provide the harvest weight the facility is designed to produce annually.**

1. **Production Unit Type**

**Select the type of production unit. Provide the requested information for each production unit type.**

1. **Edwards Aquifer Rule**

See maps on the TCEQ website at <http://www.tceq.state.tx.us/field/eapp/viewer.html> to determine if the site is located within either of these zones. If the answer is Yes, the discharge or potential discharge is within the Recharge Zone, Contributing Zone, within the Contributing Zone within the Transition Zone of the Edwards Aquifer, or zero to 10 (0 to 10) miles upstream of the Recharge Zone of the Edwards Aquifer. A site specific authorization approved by the Executive Director under the Edwards Aquifer Protection Program (30 TAC Chapter 213) is required prior to discharging.

1. **Topographic Map**

Attach an original USGS topographical map showing a three mile radius from the facility property/lease boundaries. Clearly delineate the property/lease boundaries, the outfall locations, production units, and irrigation areas.

1. **Land Application Information.**
2. **Identify the first water body that the discharge or potential discharge will reach. This may include a drainage ditch, unnamed tributary, or a named creek, lake, or river.**
3. **Identify the segment number where the discharge or potential discharge will eventually reach. The segment number of the classified water body can be found at:** <http://www.tceq.texas.gov/publications/gi/gi-316/>**.**
4. **Discharge Information**
5. Identify the number of days each year that the facility will discharge wastewater.
6. Provide the estimated discharge volume in gallons per day.
7. Identify whether or not wastewater is treated prior to discharge and if so, explain the treatment process.
8. Outfall Information. Complete this item for the first 2 outfalls. If your facility has more than 2 outfalls, complete Attachment B.
9. Provide the Latitude for the outfall.
10. Provide the Longitude for the outfall
11. Identify the first water body that the discharge will reach. This may include a drainage ditch, unnamed tributary, or a named creek, lake, or river.
12. Identify the segment number where the discharge will eventually reach. The segment number of the classified water body can be found at: <http://www.tceq.texas.gov/publications/gi/gi-316/>.
13. Provide a complete description of the discharge route from the outfall to the nearest classified segment. Two examples of a discharge route are: (1) through a six-inch pipe to a county drainage ditch; thence to Apple Creek; thence to the Brazos River, or; (2) to an unnamed tributary of Joe Creek; thence to Joe Creek; thence to Quail Creek; thence to the Doe Lake. For assistance, you may call the technical staff at 512-239-4671.
14. Identify whether the discharge is into a perennial stream. If yes, select the stream’s headwater flow.
15. **DMR Contact.**

Provide the name and contact information for the person responsible for submitting DMRs. You can submit DMR data online at:

<https://netdmr.tceq.texas.gov/netdmr-web/public/login.htm>

## Section 7. Certifications

Failure to indicate “Yes” to ALL of the certification items may result in denial of coverage under the general permit.

The certification must bear an original signature of a person meeting the signatory requirements specified under 30 Texas Administrative Code §305.44.

IF YOU ARE A CORPORATION:

The regulation that controls who may sign an application form is 30 Texas Administrative Code §305.44(a), which is provided below. According to this code provision, any corporate representative may sign an NOI or similar form so long as the authority to sign such a document has been delegated to that person in accordance with corporate procedures. By signing the NOI or similar form, you are certifying that such authority has been delegated to you. The TCEQ may request documentation evidencing such authority.

IF YOU ARE A MUNICIPALITY OR OTHER GOVERNMENT ENTITY:

The regulation that controls who may sign an NOI or similar form is 30 Texas Administrative Code §305.44(a), which is provided below. According to this code provision, only a ranking elected official or principal executive officer may sign an NOI or similar form. Persons such as the City Mayor or County Commissioner will be considered ranking elected officials. In order to identify the principal executive officer of your government entity, it may be beneficial to consult your city charter, county or city ordinances, or the Texas statutes under which your government entity was formed. An NOI or similar document that is signed by a government official who is not a ranking elected official or principal executive officer does not conform to §305.44(a) (3). The signatory requirement may not be delegated to a government representative other than those identified in the regulation. By signing the NOI or similar form, you are certifying that you are either a ranking elected official or principal executive officer as required by the administrative code. Documentation demonstrating your position as a ranking elected official or principal executive officer may be requested by the TCEQ.

If you have any questions or need additional information concerning the signatory requirements discussed above, please contact the Texas Commission on Environmental Quality’s Environmental Law Division at 512-239-0600.

30 Texas Administrative Code §305.44. Signatories to Applications

(a) All applications shall be signed as follows.

(1) For a corporation, the application shall be signed by a responsible corporate officer. For purposes of this paragraph, a responsible corporate officer means a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation; or the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding $25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures. Corporate procedures governing authority to sign permit or post-closure order applications may provide for assignment or delegation to applicable corporate positions rather than to specific individuals.

(2) For a partnership or sole proprietorship, the application shall be signed by a general partner or the proprietor, respectively.

(3) For a municipality, state, federal, or other public agency, the application shall be signed by either a principal executive officer or a ranking elected official. For purposes of this paragraph, a principal executive officer of a federal agency includes the chief executive officer of the agency, or a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., regional administrator of the EPA).