



Administrative Package Cover Page

This file contains the following documents:

1. Summary of application (in plain language)
 - English
 - Alternative Language (Spanish)
 2. First Notice (NORI-Notice of Receipt of Application and Intent to Obtain a Permit)
 - English
 - Alternative Language (Spanish)
 3. Application materials
-



Portada de Paquete Administrativo

Este archivo contiene los siguientes documentos:

1. Resumen en lenguaje sencillo (PLS, por sus siglas en inglés) de la actividad propuesta
 - Inglés
 - Idioma alternativo (español)
2. Primer aviso (NORI, por sus siglas en inglés)
 - Inglés
 - Idioma alternativo (español)
3. Solicitud original



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

Plain Language Summary Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

Applicants should use this template to develop a plain language summary as required by Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H. Applicants may modify the template as necessary to accurately describe their facility as long as the summary includes the following information: (1) the function of the proposed plant or facility; (2) the expected output of the proposed plant or facility; (3) the expected pollutants that may be emitted or discharged by the proposed plant or facility; and (4) how the applicant will control those pollutants, so that the proposed plant will not have an adverse impact on human health or the environment.

Fill in the highlighted areas below to describe your facility and application in plain language. Instructions and examples are provided below. Make any other edits necessary to improve readability or grammar and to comply with the rule requirements.

If you are subject to the alternative language notice requirements in 30 TAC Section 39.426, **you must provide a translated copy of the completed plain language summary in the appropriate alternative language as part of your application package.** For your convenience, a Spanish template has been provided below.

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS Enter 'INDUSTRIAL' or 'DOMESTIC' here WASTEWATER/STORMWATER

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal enforceable representation of the permit application.

Valley By Products, Inc. (CN600502579) operates Valley By Products, Inc. WWTP (RN100820042), an industrial wastewater treatment facility. The facility is located at 7740 Kiely Road, in Vinton, El Paso County, Texas 79821. Request for renewal of permit authorizing disposal of 0.002 MGD of industrial wastewater annually. This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain BOD(5), Oil and Grease and Ammonia-Nitrogen.. Industrial wastewater is treated by aeration lagoon and evaporation ponds.

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

AGUAS RESIDUALES Introduzca 'INDUSTRIALES' o 'DOMÉSTICAS' aquí /AGUAS PLUVIALES

El siguiente resumen se proporciona para esta solicitud de permiso de calidad del agua pendiente que está siendo revisada por la Comisión de Calidad Ambiental de Texas según lo requerido por el Capítulo 39 del Código Administrativo de Texas 30. La información proporcionada en este resumen puede cambiar durante la revisión técnica de la solicitud y no es una representación ejecutiva fedérale de la solicitud de permiso.

Valley By Products, Inc. (CN600502579) opera Valley By Products, Inc. WWTP (RN100820042), una instalación de tratamiento de aguas residuales industriales. La instalación está ubicada en 7740 Kiely Road, en Vinton, Condado de El Paso, Texas 79821. Solicitud de renovación de permiso que autoriza la eliminación de 0.002 MGD de aguas residuales industriales anualmente. Este permiso no autorizará una descarga de contaminantes al agua del estado.

Se espera que las descargas de la instalación contengan BOD(5), Aceite y Grasa y Nitrógeno Amoniacal. Las aguas residuales industriales se tratan mediante laguna de aireación y estanques de evaporación.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



NOTICE OF RECEIPT OF APPLICATION AND INTENT TO OBTAIN WATER QUALITY PERMIT RENEWAL

PERMIT NO. WQ0001243000

APPLICATION. Valley By Products, Inc., P.O. Box 628, Canutillo, Texas 79835, which owns a meat rendering facility, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Land Application Permit (TLAP) No. WQ0001243000 to authorize the disposal of treated wastewater at a volume not to exceed a daily average flow of 2,000 gallons per day via evaporation. The facility and disposal area are located at 7740 Kiely Road, in El Paso County, Texas 79821. TCEQ received this application on August 6, 2025. The permit application will be available for viewing and copying at Jenna Welch & Laura Bush Community Library at EPCC, 6701 South Desert Boulevard, El Paso, in El Paso County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications>. 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://gisweb.tceq.texas.gov/LocationMapper/?marker=-106.590833,31.946944&level=18>

ALTERNATIVE LANGUAGE NOTICE. Alternative language notice in Spanish is available at: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications>. El aviso de idioma alternativo en español está disponible en <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications>.

ADDITIONAL NOTICE. TCEQ's Executive Director has determined the application is administratively complete and will conduct a technical review of the application. After technical review of the application is complete, the Executive Director may prepare a draft permit and will issue a preliminary decision on the application. **Notice of the Application and Preliminary Decision will be published and mailed to those who are on the county-wide mailing list and to those who are on the mailing list for this application. That notice will contain the deadline for submitting public comments.**

PUBLIC COMMENT / PUBLIC MEETING. You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the opportunity to submit comments or to ask questions about the application. TCEQ will hold a public meeting if the Executive Director determines that there is a significant degree of public interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

OPPORTUNITY FOR A CONTESTED CASE HEARING. After the deadline for submitting public comments, the Executive Director will consider all timely comments and prepare a response to all relevant and material, or significant public comments. **Unless the application is directly referred for a contested case hearing, the response to comments, and the Executive Director's decision on the application, will be mailed to everyone who submitted public comments and to those persons who are on the mailing list for this application.** If comments are received, the mailing will also provide instructions for requesting reconsideration of the Executive Director's decision and for requesting a contested case hearing. A contested case hearing is a legal proceeding similar to a civil trial in state district court.

TO REQUEST A CONTESTED CASE HEARING, YOU MUST INCLUDE THE FOLLOWING ITEMS IN YOUR REQUEST: your name, address, phone number; applicant's name and proposed permit number; the location and distance of your property/activities relative to the proposed facility; a specific description of how you would be adversely affected by the facility in a way not common to the general public; a list of all disputed issues of fact that you submit during the comment period and, the statement "[I/we] request a contested case hearing." If the request for contested case hearing is filed on behalf of a group or association, the request must designate the group's representative for receiving future correspondence; identify by name and physical address an individual member of the group who would be adversely affected by the proposed facility or activity; provide the information discussed above regarding the affected member's location and distance from the facility or activity; explain how and why the member would be affected; and explain how the interests the group seeks to protect are relevant to the group's purpose.

Following the close of all applicable comment and request periods, the Executive Director will forward the application and any requests for reconsideration or for a contested case hearing to the TCEQ Commissioners for their consideration at a scheduled Commission meeting.

The Commission may only grant a request for a contested case hearing on issues the requestor submitted in their timely comments that were not subsequently withdrawn. **If a hearing is granted, the subject of a hearing will be limited to disputed issues of fact or mixed questions of fact and law relating to relevant and material water quality concerns submitted during the comment period.**

TCEQ may act on an application to renew a permit for discharge of wastewater without providing an opportunity for a contested case hearing if certain criteria are met.

MAILING LIST. If you submit public comments, a request for a contested case hearing or a reconsideration of the Executive Director's decision, you will be added to the mailing list for this specific application to receive future public notices mailed by the Office of the Chief Clerk. In addition, you may request to be placed on: (1) the permanent mailing list for a specific applicant name and permit number; and/or (2) the mailing list for a specific county. If you wish to be placed on the permanent and/or the county mailing list, clearly specify which list(s) and send your request to TCEQ Office of the Chief Clerk at the address below.

INFORMATION AVAILABLE ONLINE. For details about the status of the application, visit the Commissioners' Integrated Database at www.tceq.texas.gov/goto/cid. Search the database using the permit number for this application, which is provided at the top of this notice.

AGENCY CONTACTS AND INFORMATION. All public comments and requests must be submitted either electronically at <https://www14.tceq.texas.gov/epic/eComment/>, or in writing to the Texas Commission on Environmental Quality, Office of the Chief Clerk, MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Please be aware that any contact information you provide, including your name, phone number, email address and physical address will become part of the agency's public record. For more information about this permit application or the permitting process, please call the TCEQ Public Education Program, Toll Free, at 1-800-687-4040 or visit their website at www.tceq.texas.gov/goto/pep. Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from Valley By Products, Inc. at the address stated above or by calling Ms. Natalie Jerome, President, at 915-877-3131.

Issuance Date: September 9, 2025

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO NO. WQ0001243000

SOLICITUD. Valley By Products, Inc., P.O. Box 628, Canutillo, Texas 79835, que posee una instalación de procesamiento de carne, ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) para renovar el Permiso No. WQ0001243000 para la Aplicación en Terrenos de Texas autorizar la eliminación de aguas residuales tratadas en un volumen que no exceda un flujo promedio diario de 2,000 galones por día mediante la evaporación. La instalación y el sitio de disposición están ubicadas en 7740 Kiely Road, en el Condado de El Paso, Texas 79821. La TCEQ recibió esta solicitud el 6 de agosto de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en la Biblioteca de la Comunidad Jenna Welch & Laura Bush en EPCC, 6701 South Desert Boulevard, El Paso, en el Condado de El Paso, Texas antes de la fecha de publicación de este aviso en el periódico. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications>.

Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-106.590833,31.946944&level=18>

AVISO DE IDIOMA ALTERNATIVO. El aviso de idioma alternativo en español está disponible en <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tlap-applications>.

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. Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de una audiencia administrativa de lo contencioso.**

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. Además, puede pedir que la TCEQ ponga su nombre en una o más de las listas

correos siguientes (1) la lista de correo permanente para recibir los avisos del 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 agregue su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

INFORMACIÓN DISPONIBLE EN LÍNEA. Para detalles sobre el estado de la solicitud, favor de visitar la Base de Datos Integrada de los Comisionados en www.tceq.texas.gov/goto/cid. Para buscar en la base de datos, utilizar el número de permiso para esta solicitud que aparece en la parte superior de este aviso.

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 adicional de Valley By Products, Inc. a la dirección indicada arriba o llamando a la Srta. Natalie Jerome, Presidente, al 915-877-7179.

Fecha de emisión 9 de septiembre de 2025



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

INDUSTRIAL WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the industrial wastewater permit application.

APPLICANT NAME: Valley By Products, Inc.

PERMIT NUMBER (If new, leave blank): WQ00 01243000

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

	Y	N		Y	N
Administrative Report 1.0	☒	☐	Worksheet 8.0	☐	☒
Administrative Report 1.1	☐	☒	Worksheet 9.0	☐	☒
SPIF	☐	☒	Worksheet 10.0	☐	☒
Core Data Form	☒	☐	Worksheet 11.0	☐	☒
Summary of Application (PLS)	☒	☐	Worksheet 11.1	☐	☒
Public Involvement Plan Form	☐	☒	Worksheet 11.2	☐	☒
Technical Report 1.0	☒	☐	Worksheet 11.3	☐	☒
Worksheet 1.0	☐	☒	Original USGS Map	☒	☐
Worksheet 2.0	☐	☒	Affected Landowners Map	☐	☒
Worksheet 3.0	☒	☐	Landowner Disk or Labels	☐	☒
Worksheet 3.1	☐	☒	Flow Diagram	☒	☐
Worksheet 3.2	☐	☒	Site Drawing	☒	☐
Worksheet 3.3	☐	☒	Original Photographs	☐	☒
Worksheet 4.0	☐	☒	Design Calculations	☐	☒
Worksheet 4.1	☐	☒	Solids Management Plan	☐	☒
Worksheet 5.0	☐	☒	Water Balance	☐	☒
Worksheet 6.0	☐	☒			
Worksheet 7.0	☐	☒			

For TCEQ Use Only

Segment Number _____ County _____
Expiration Date _____ Region _____

Permit Number _____



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

INDUSTRIAL WASTEWATER PERMIT APPLICATION

ADMINISTRATIVE REPORT 1.0

This report is required for all applications for TPDES permits and TLAPs, except applications for oil and gas extraction operations subject to 40 CFR Part 435. Contact the Applications Review and Processing Team at 512-239-4671 with any questions about completing this report. Applications for oil and gas extraction operations subject to 40 CFR Part 435 must use Oil and Gas Exploration and Production Administrative Report ([TCEQ Form-20893 and 20893-inst¹](#)).

Item 1. Application Information and Fees (Instructions, Page 26)

a. Complete each field with the requested information, if applicable.

Applicant Name: Valley By Products, Inc.

Permit No.: WQ0001243000

EPA ID No.: TX0Click to enter text.

Expiration Date: 9/1/2025

b. Check the box next to the appropriate authorization type.

☒ Industrial Wastewater (wastewater and stormwater)

☐ Industrial Stormwater (stormwater only)

☐ Reverse Osmosis Water Treatment (reverse osmosis water treatment wastewaters only)

c. Check the box next to the appropriate facility status.

☒ Active

☐ Inactive

d. Check the box next to the appropriate permit type.

☐ TPDES Permit

☒ TLAP

☐ TPDES with TLAP component

e. Check the box next to the appropriate application type.

☐ New

☐ Renewal with changes

☒ Renewal without changes

☐ Major amendment with renewal

☐ Major amendment without renewal

☐ Minor amendment without renewal

☐ Minor modification without renewal

f. If applying for an amendment or modification, describe the request: Click to enter text.

For TCEQ Use Only

Segment Number _____ County _____

Expiration Date _____ Region _____

Permit Number _____

¹ https://www.tceq.texas.gov/publications/search_forms.html

g. Application Fee

EPA Classification	New	Major Amend. (with or without renewal)	Renewal (with or without changes)	Minor Amend. / Minor Mod. (without renewal)
Minor facility not subject to EPA categorical effluent guidelines (40 CFR Parts 400-471)	☐ \$350	☐ \$350	☒ \$315	☐ \$150
Minor facility subject to EPA categorical effluent guidelines (40 CFR Parts 400-471)	☐ \$1,250	☐ \$1,250	☐ \$1,215	☐ \$150
Major facility	N/A ²	☐ \$2,050	☐ \$2,015	☐ \$450

h. Payment Information

Mailed

Check or money order No.: [Click to enter text.](#)

Check or money order amt.: [Click to enter text.](#)

Named printed on check or money order: [Click to enter text.](#)

Epay

Voucher number: 777477/777478

Copy of voucher attachment: F

Item 2. Applicant Information (Instructions, Pages 26)

a. Customer Number, if applicant is an existing customer: CN600502579

Note: Locate the customer number using the [TCEO's Central Registry Customer Search](#)³.

b. Legal name of the entity (applicant) applying for this permit: Valley By Products, Inc.

Note: The owner of the facility must apply for the permit. The legal name must be spelled exactly as filed with the TX SOS, Texas Comptroller of Public Accounts, County, or in the legal documents forming the entity.

c. Name and title of the person signing the application. (**Note:** The person must be an executive official that meets signatory requirements in 30 TAC § 305.44.)

Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: [Click to enter text.](#)

d. Will the applicant have overall financial responsibility for the facility?

☒ Yes ☐ No

² All facilities are designated as minors until formally classified as a major by EPA.

³ <https://www15.tceq.texas.gov/crpub/index.cfm?fuseaction=cust.CustSearch>

Note: The entity with overall financial responsibility for the facility must apply as a co-applicant, if not the facility owner.

Item 3. Co-applicant Information (Instructions, Page 27)

☒ Check this box if there is no co-applicant.; otherwise, complete the below questions.

a. Legal name of the entity (co-applicant) applying for this permit: Click to enter text.

Note: The legal name must be spelled exactly as filed with the TX SOS, Texas Comptroller of Public Accounts, County, or in the legal documents forming the entity.

b. Customer Number (if applicant is an existing customer): CNClick to enter text.

Note: Locate the customer number using the TCEQ's Central Registry Customer Search.

c. Name and title of the person signing the application. (**Note:** The person must be an executive official that meets signatory requirements in 30 TAC § 305.44.)

Prefix: Click to enter text.

Full Name (Last/First Name): Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

d. Will the co-applicant have overall financial responsibility for the facility?

☐ Yes ☐ No

Note: The entity with overall financial responsibility for the facility must apply as a co-applicant, if not the facility owner.

Item 4. Core Data Form (Instructions, Pages 27)

a. Complete and attach one Core Data Form (TCEQ Form 10400) for each customer (applicant and co-applicant(s)). If the customer type selected on the Core Data Form is Individual, complete Attachment 1 of the Administrative Report. Attachment: D

Item 5. Application Contact Information (Instructions, Page 27)

Provide names of two individuals who can be contacted about this application. Indicate if the individual can be contacted about administrative or technical information, or both.

a. ☒ Administrative Contact . ☐ Technical Contact

Prefix: Ms. Full Name (Last/First Name): Landsman, Stephanie

Title: Click to enter text. Credential: Click to enter text.

Organization Name: Landsman Environmental LLC

Mailing Address: 9597 Jones Road #962

City/State/Zip: Jersey Village, TX 77065

Phone No: 281-658-5899

Email: stephanie@landsmanenviro.com

b. ☒ Administrative Contact ☒ Technical Contact

Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Mailing Address: P.O Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-7179

Email: njerome0714@gmail.com

Attachment: Click to enter text.

Item 6. Permit Contact Information (Instructions, Page 28)

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

a. Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-7179

Email: njerome0714@gmail.com

b. Prefix: Click to enter text. Full Name (Last/First Name):

Title: Click to enter text.

Credential: Click to enter text.

Organization Name: Click to enter text.

Mailing Address: Click to enter text.

City/State/Zip: Click to enter text.

Phone No: Click to enter text. Email: Click to enter text.

Attachment: Click to enter text.

Item 7. Billing Contact Information (Instructions, Page 28)

The permittee is responsible for paying the annual fee. The annual fee will be assessed for 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 (form TCEQ-20029).

Provide the complete mailing address where the annual fee invoice should be mailed and the name and phone number of the permittee's representative responsible for payment of the invoice.

Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-7179

Email: njerome0714@gmail.com

Item 8. DMR/MER Contact Information (Instructions, Page 28)

Provide the name and mailing address of the person delegated to receive and submit DMRs or MERs. **Note:** DMR data must be submitted through the NetDMR system. An electronic reporting account can be established once the facility has obtained the permit number.

Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-7179

Email: njerome0714@gmail.com

Item 9. Notice Information (Instructions, Pages 28)

a. Individual Publishing the Notices

Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-7179

Email: njerome0714@gmail.com

b. Method for Receiving Notice of Receipt and Intent to Obtain a Water Quality Permit Package (only for NORI, NAPD will be sent via regular mail)

☒ E-mail: njerome0714@gmail.com

☐ Fax: Click to enter text.

☐ Regular Mail (USPS)

Mailing Address: Click to enter text.

City/State/Zip Code: Click to enter text.

c. Contact in the Notice

Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Phone No: 915-877-7179

Email: njerome0714@gmail.com

d. Public Viewing Location Information

Note: If the facility or outfall is located in more than one county, provide a public viewing place for each county.

Public building name: EPCC Library Location within the building: Click to enter text.

Physical Address of Building: 6701 S. Desert Blvd

City: El Paso County: El Paso

e. Bilingual Notice Requirements

This information is required for new, major amendment, minor amendment or minor modification, and renewal applications.

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

Call the bilingual/ESL coordinator at the nearest elementary and middle schools and obtain the following information to determine if an alternative language notice(s) is required.

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

☒ Yes ☐ No

If no, publication of an alternative language notice is not required; skip to Item 8 (Regulated Entity and Permitted Site Information.)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No ☐ N/A

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

- f. Summary of Application in Plain Language Template – Complete and attach the Summary of Application in Plain Language Template (TCEQ Form 20972), also known as the plain language summary or PLS. Attachment: E
- g. Complete and attach one Public Involvement Plan (PIP) Form (TCEQ Form 20960) for each application for a new permit or major amendment. Attachment: N/A

Item 10. Regulated Entity and Permitted Site Information (Instructions Page 29)

- a. TCEQ issued Regulated Entity Number (RN), if available: RN100820042

Note: If your business site is part of a larger business site, a Regulated Entity Number (RN) may already be assigned for the larger site. Use the RN assigned for the larger site. Search the TCEQ's Central Registry to determine the RN or to see if the larger site may already be registered as a Regulated Entity. If the site is found, provide the assigned RN.

- b. Name of project or site (name known by the community where located): Valley By Products, Inc.

- c. Is the location address of the facility in the existing permit the same?

☒ Yes ☐ No ☐ N/A (new permit)

Note: If the facility is located in Bexar, Comal, Hays, Kinney, Medina, Travis, Uvalde, or Williamson County, additional information concerning protection of the Edwards Aquifer may be required.

- d. Owner of treatment facility:

Prefix: Click to enter text.

Full Name (Last/First Name): Click to enter text.

or Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-7179

Email: njerome0714@gmail.com

e. Ownership of facility: ☐ Public ☒ Private ☐ Both ☐ Federal

f. Owner of land where treatment facility is or will be: [Click to enter text.](#)

Prefix: [Click to enter text.](#) Full Name (Last/First Name): [Click to enter text.](#)

or Organization Name: [Valley By Products, Inc.](#)

Mailing Address: [P.O. Box 628](#)

City/State/Zip: [Canutillo, TX 79835](#)

Phone No: [915-877-7179](#)

Email: [njerome0714@gmail.com](#)

Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years (In some cases, a lease may not suffice - see instructions). Attachment: [Click to enter text.](#)

g. Owner of effluent TLAP disposal site (if applicable): Prefix: [Click to enter text.](#) Full Name (Last/First Name): [Click to enter text.](#)

or Organization Name: [Valley By Products, Inc.](#)

Mailing Address: [P.O. Box 628](#)

City/State/Zip: [Canutillo, TX 79835](#)

Phone No: [915-877-7179](#)

Email: [njerome0714@gmail.com](#)

Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years. Attachment: [Click to enter text.](#)

h. Owner of sewage sludge disposal site (if applicable):

Prefix: [N/A](#)

Full Name (Last/First Name): [Click to enter text.](#)

or Organization Name: [Click to enter text.](#)

Mailing Address: [Click to enter text.](#)

City/State/Zip: [Click to enter text.](#)

Phone No: [Click to enter text.](#) Email: [Click to enter text.](#)

Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years. Attachment: [Click to enter text.](#)

Item 11. TDPES Discharge/TLAP Disposal Information (Instructions, Page 31)

a. Is the facility located on or does the treated effluent cross Native American Land?

☐ Yes ☒ No

b. Attach an original full size USGS Topographic Map (or an 8.5"×11" reproduced portion for renewal or amendment applications) with all required information. Check the box next to each item below to confirm it has been included on the map.

☒ One-mile radius

☐ Three-miles downstream information

☒ Applicant's property boundaries

☒ Treatment facility boundaries

☒ Labeled point(s) of discharge

☐ Highlighted discharge route(s)

☒ Effluent disposal site boundaries

☒ All wastewater ponds

☐ Sewage sludge disposal site

☐ New and future construction

Attachment: [Click to enter text.](#)

- c. Is the location of the sewage sludge disposal site in the existing permit accurate?
☐ Yes ☐ No or New Permit
If no, or a new application, provide an accurate location description: [Click to enter text.](#)
- d. Are the point(s) of discharge in the existing permit correct?
☒ Yes ☐ No or New Permit
If no, or a new application, provide an accurate location description: [Click to enter text.](#)
- e. Are the discharge route(s) in the existing permit correct?
☐ Yes ☐ No or New Permit
If no, or a new permit, provide an accurate description of the discharge route: [Click to enter text.](#)
- f. City nearest the outfall(s): [Click to enter text.](#)
- g. County in which the outfalls(s) is/are located: [El Paso](#)
- h. 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, attach copies of letters that show proof of contact and provide the approval letter upon receipt. Attachment: [Click to enter text.](#)
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: [Click to enter text.](#)
- i. For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
☒ Yes ☐ No or New Permit ☐ [Click to enter text.](#)
If no, or a new application, provide an accurate location description: [Click to enter text.](#)
- j. City nearest the disposal site: [Vinton](#)
- k. County in which the disposal site is located: [El Paso](#)
- l. For TLAPs, describe how effluent is/will be routed from the treatment facility to the disposal site: [Click to enter text.](#)
- m. For TLAPs, identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: [Rio Grande River](#)

Item 12. Miscellaneous Information (Instructions, Page 33)

- a. 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: [Click to enter text.](#)

- b. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

Account no.: [Click to enter text.](#)

Total amount due: [Click to enter text.](#)

- c. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

Enforcement order no.: [Click to enter text.](#)

Amount due: [Click to enter text.](#)

Item 13. Signature Page (Instructions, Page 33)

Permit No: WQ0001243000

Applicant Name: Valley By Products, Inc.

Certification: I, Natalie Jerome, 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): Natalie Jerome

Signatory title: President

Signature: _____

(Use blue ink)

Date: 07-31-25

Subscribed and Sworn to before me by the said NATALIE JEROME
on this 31st day of July, 2025.

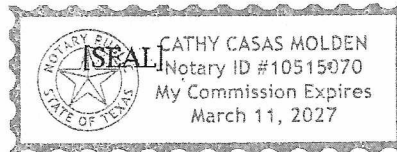
My commission expires on the 11th day of March, 2027.

Cathy Casas Molden

Notary Public

EL PASO

County, Texas



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



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

INDUSTRIAL WASTEWATER PERMIT APPLICATION

TECHNICAL REPORT 1.0

The following information is **required** for all applications for a TLAP or an individual TPDES discharge permit.

For **additional information** or clarification on the requested information, please refer to the [Instructions for Completing the Industrial Wastewater Permit Application](https://www.tceq.texas.gov/permitting/wastewater/industrial/TPDES_industrial_wastewater_steps.html)¹ available on the TCEQ website. Please contact the Industrial Permits Team at 512-239-4671 with any questions about this form.

If more than one outfall is included in the application, provide applicable information for each individual outfall. **If an item does not apply to the facility, enter N/A** to indicate that the item has been considered. Include separate reports or additional sheets as **clearly cross-referenced attachments** and provide the attachment number in the space provided for the item the attachment addresses.

NOTE: This application is for an industrial wastewater permit only. Additional authorizations from the TCEQ Waste Permits Division or the TCEQ Air Permits Division may be needed.

Item 1. Facility/Site Information (Instructions, Page 39)

- a. Describe the general nature of the business and type(s) of industrial and commercial activities. Include all applicable SIC codes (up to 4).

Animal rendering. Facility accepts waste meat products and cooking oils. Facility does NOT accept dead stock.

- b. Describe all wastewater-generating processes at the facility.

- 1) Pressure wash water. The facility surfaces (primarily the floors) are cleaned on a regular basis to remove oily buildup. Wash water is supplied from an on-site well. Wash water flows to the oil/water separator or is collected in trench drains and pumped out to a holding tank. 2) Lye-treated water for barrel cleaning. Barrels and buckets are cleaned in lye-treated water to remove oily residue. Lye-treated water is also poured onto oily surfaces to augment pressure washing. The barrel wash water is periodically drained into the oil/water separator. 3) Boiler blowdown. The boiler is blown down daily. Steam generation is needed to heat oil tanks. Additional boiler blowdown also occurs during the twice weekly cooking events. The blowdown is directed to a primary equalization tank. 4) Water from processing yellow cooking grease. Yellow Grease is heated to separate liquid water (decant) and drained daily into the oil/water separator.

¹

https://www.tceq.texas.gov/permitting/wastewater/industrial/TPDES_industrial_wastewater_steps.html

- c. Provide a list of raw materials, major intermediates, and final products handled at the facility.

Materials List

Raw Materials	Intermediate Products	Final Products
Cooking grease	None	Yellow grease

Attachment: Click to enter text.

- d. Attach a facility map (drawn to scale) with the following information:

- Production areas, maintenance areas, materials-handling areas, waste-disposal areas, and water intake structures.
- The location of each unit of the WWTP including the location of wastewater collection sumps, impoundments, outfalls, and sampling points, if significantly different from outfall locations.

Attachment: C

- e. Is this a new permit application for an existing facility?

☐ Yes ☒ No

If **yes**, provide background discussion: Click to enter text.

- f. Is/will the treatment facility/disposal site be located above the 100-year frequency flood level.

☒ Yes ☐ No

List source(s) used to determine 100-year frequency flood plain: FEMA FIRM No. 4802120025

If **no**, provide the elevation of the 100-year frequency flood plain and describe what protective measures are used/proposed to prevent flooding (including tail water and rainfall run-on controls) of the treatment facility and disposal area: Click to enter text.

Attachment: I

- g. For **new** or **major amendment** permit applications, will any construction operations result in a discharge of fill material into a water in the state?

☐ Yes ☐ No ☒ N/A (renewal only)

- h. If **yes** to Item 1.g, has the applicant applied for a USACE CWA Chapter 404 Dredge and Fill permit?

☐ Yes ☐ No

If **yes**, provide the permit number: [Click to enter text.](#)

If **no**, provide an approximate date of application submittal to the USACE: [Click to enter text.](#)

Item 2. Treatment System (Instructions, Page 40)

- a. List any physical, chemical, or biological treatment process(es) used/proposed to treat wastewater at this facility. Include a description of each treatment process, starting with initial treatment and finishing with the outfall/point of disposal.

All wastewater from the facility will be collected into a primary flow equalization tank. This tank serves several purposes: odor control; limits surging (so the Dissolved Air Flotation (DAF) unit can be fed at a continuous rate); mixing (to keep waste composition for the DAF feed consistent); allows the DAF to be operated during normal business hours. The primary equalization tank is equipped with an emergency overflow. Wastewater will be pumped from the primary equalization tank to the DAF. The DAF uses air to float grease to the surface and skim it off. A polymer based coagulant and (iron based) flocculent will be added to the DAF influent to enhance oil and grease removal and control odors. Wastewater overflow from the DAF will rain into a secondary equalization tank. The secondary equalization tank allows the operator to control the rate of discharge into the aeration pond and add caustic for pH control. Wastewater is treated in an aeration lagoon. The aeration lagoon also serves as the primary evaporation system by using surface aerator/splashes. The aeration basin converts organic carbon into microbial biomass. Excess treated wastewater from the aeration lagoon flows into an evaporation pond. There are two evaporation ponds. The ponds will be cycled every year. One evaporation pond will be allowed to dry out while the other receive excess treated wastewater. Dried (biomass) solids will be manually removed and taken off-site for proper disposal.

- b. Attach a flow schematic **with a water balance** showing all sources of water and wastewater flow into the facility, wastewater flow into and from each treatment unit, and wastewater flow to each outfall/point of disposal.

Attachment: C

Item 3. Impoundments (Instructions, Page 40)

Does the facility use or plan to use any wastewater impoundments (e.g., lagoons or ponds?)

☒ Yes ☐ No

If **no**, proceed to Item 4. If **yes**, complete **Item 3.a** for **existing** impoundments and **Items 3.a - 3.e** for **new or proposed** impoundments. **NOTE:** See instructions, Pages 40-42, for additional information on the attachments required by Items 3.a - 3.e.

- a. Complete the table with the following information for each existing, new, or proposed impoundment. Attach additional copies of the Impoundment Information table, if needed.

Use Designation: Indicate the use designation for each impoundment as Treatment (T), Disposal (D), Containment (C), or Evaporation (E).

Associated Outfall Number: Provide an outfall number if a discharge occurs or will occur.

Liner Type: Indicate the liner type as Compacted clay liner (C), In-situ clay liner (I), Synthetic/plastic/rubber liner (S), or Alternate liner (A). **NOTE:** See instructions for further detail on liner specifications. If an alternate liner (A) is selected, include an attachment that provides a description of the alternate liner and any additional technical information necessary for an evaluation.

Leak Detection System: If any leak detection systems are in place/planned, enter Y for yes. Otherwise, enter N for no.

Groundwater Monitoring Wells and Data: If groundwater monitoring wells are in place/planned, enter Y for yes. Otherwise, enter N for no. Attach any existing groundwater monitoring data.

Dimensions: Provide the dimensions, freeboard, surface area, storage capacity of the impoundments, and the maximum depth (not including freeboard). For impoundments with irregular shapes, submit surface area instead of length and width.

Compliance with 40 CFR Part 257, Subpart D: If the impoundment is required to be in compliance with 40 CFR Part 257, Subpart D, enter Y for yes. Otherwise, enter N for no.

Date of Construction: Enter the date construction of the impoundment commenced (mm/dd/yy).

Impoundment Information

Parameter	Pond #	Pond #	Pond #	Pond #
Use Designation: (T) (D) (C) or (E)	T	E	E	C
Associated Outfall Number	1	2a	2b	3
Liner Type (C) (I) (S) or (A)	S	S	S	Concrete
Alt. Liner Attachment Reference	N/A	N/A	N/A	N/A
Leak Detection System, Y/N	Y	Y	Y	Y
Groundwater Monitoring Wells, Y/N	N			
Groundwater Monitoring Data Attachment	N/A			
Pond Bottom Located Above The Seasonal High-Water Table, Y/N				
Length (ft)	67	140	140	45
Width (ft)	67	68	68	30.5
Max Depth From Water Surface (ft), Not Including Freeboard	5	1	1	3.5
Freeboard (ft)	2	2	2	1
Surface Area (acres)	0.080	0.283	0.283	0.032
Storage Capacity (gallons)	115,750	200,000	200,00	30,900
40 CFR Part 257, Subpart D, Y/N	N			
Date of Construction	1/10/1996			

Attachment: Click to enter text.

The following information (Items 3.b – 3.e) is required only for **new or proposed** impoundments.

- b. For new or proposed impoundments, attach any available information on the following items. If attached, check **yes** in the appropriate box. Otherwise, check **no** or **not yet designed**.

1. Liner data

☐ Yes ☐ No ☐ Not yet designed

2. Leak detection system or groundwater monitoring data

☐ Yes ☐ No ☐ Not yet designed

3. Groundwater impacts

☐ Yes ☐ No ☐ Not yet designed

NOTE: Item b.3 is required if the bottom of the pond is not above the seasonal high-water table in the shallowest water-bearing zone.

Attachment: Click to enter text.

For TLAP applications: Items 3.c – 3.e are not required, continue to Item 4.

- c. Attach a USGS map or a color copy of original quality and scale which accurately locates and identifies all known water supply wells and monitor wells within ½-mile of the impoundments.

Attachment: Click to enter text.

- d. Attach copies of State Water Well Reports (e.g., driller's logs, completion data, etc.), and data on depths to groundwater for all known water supply wells including a description of how the depths to groundwater were obtained.

Attachment: Click to enter text.

- e. Attach information pertaining to the groundwater, soils, geology, pond liner, etc. used to assess the potential for migration of wastes from the impoundments or the potential for contamination of groundwater or surface water.

Attachment: Click to enter text.

Item 4. Outfall/Disposal Method Information (Instructions, Page 42)

Complete the following tables to describe the location and wastewater discharge or disposal operations for each outfall for discharge, and for each point of disposal for TLAP operations.

If there are more outfalls/points of disposal at the facility than the spaces provided, copies of pages 6 and/or numbered accordingly (i.e., page 6a, 6b, etc.) may be used to provide information on the additional outfalls.

For TLAP applications: Indicate the disposal method and each individual irrigation area I, evaporation pond E, or subsurface drainage system S by providing the appropriate letter designation for the disposal method followed by a numerical designation for each disposal area in the space provided for **Outfall** number (e.g. E1 for evaporation pond 1, I2 for irrigation area No. 2, etc.).

Outfall Longitude and Latitude

Outfall No.	Latitude (Decimal Degrees)	Longitude (Decimal Degrees)
1	31.946887	-106.590986
2	31.946281	-106.590154

Outfall Location Description

Outfall No.	Location Description
1	South of tank farm
2	Evaporation pond

Description of Sampling Point(s) (if different from Outfall location)

Outfall No.	Description of sampling point
1	Surface water is samples
2	Dedicated valve that can be opened to collect a sample

Outfall Flow Information - Permitted and Proposed

Outfall No.	Permitted Daily Avg Flow (MGD)	Permitted Daily Max Flow (MGD)	Proposed Daily Avg Flow (MGD)	Proposed Daily Max Flow (MGD)	Anticipated Discharge Date (mm/dd/yy)
1	0.002	0.0024			
2	0.002	0.0024			

Outfall Discharge - Method and Measurement

Outfall No.	Pumped Discharge? Y/N	Gravity Discharge? Y/N	Type of Flow Measurement Device Used
1	N	Y	Flow meter
2	Y	N	Flow meter

Outfall Discharge - Flow Characteristics

Outfall No.	Intermittent Discharge? Y/N	Continuous Discharge? Y/N	Seasonal Discharge? Y/N	Discharge Duration (hrs/day)	Discharge Duration (days/mo)	Discharge Duration (mo/yr)
1	N	N	Y	8	24	12
2	N	N	Y	1	5	12

Outfall Wastestream Contributions

Outfall No. 1

Contributing Wastestream	Volume (MGD)	Percent (%) of Total Flow
Equalization Tank	0.0024	100

Outfall No. 2

Contributing Wastestream	Volume (MGD)	Percent (%) of Total Flow
Flow from aeration pond	0.002	100

Outfall No. Click to enter text.

Contributing Wastestream	Volume (MGD)	Percent (%) of Total Flow

Attachment: Click to enter text.

Item 5. Blowdown and Once-Through Cooling Water Discharges (Instructions, Page 43)

a. Indicate if the facility currently or proposes to:

- ☐ Yes ☐ No Use cooling towers that discharge blowdown or other wastestreams
- ☒ Yes ☐ No Use boilers that discharge blowdown or other wastestreams
- ☐ Yes ☐ No Discharge once-through cooling water

NOTE: If the facility uses or plans to use cooling towers or once-through cooling water, Item 12 is required.

b. If **yes** to any of the above, attach an SDS with the following information for each chemical additive.

- Manufacturers Product Identification Number
- Product use (e.g., biocide, fungicide, corrosion inhibitor, etc.)
- Chemical composition including CASRN for each ingredient
- Classify product as non-persistent, persistent, or bioaccumulative
- Product or active ingredient half-life
- Frequency of product use (e.g., 2 hours/day once every two weeks)
- Product toxicity data specific to fish and aquatic invertebrate organisms
- Concentration of whole product or active ingredient, as appropriate, in wastestream.

In addition to each SDS, attach a summary of the above information for each specific wastestream and the associated chemical additives. Specify which outfalls are affected.

Attachment: G

c. Cooling Towers and Boilers

If the facility currently or proposes to use cooling towers or boilers that discharge blowdown or other wastestreams to the outfall(s), complete the following table.

Cooling Towers and Boilers

Type of Unit	Number of Units	Daily Avg Blowdown (gallons/day)	Daily Max Blowdown (gallons/day)
Cooling Towers			
Boilers	2	55	350

Item 6. Stormwater Management (Instructions, Page 44)

Will any existing/proposed outfalls discharge stormwater associated with industrial activities, as defined at 40 CFR § 122.26(b)(14), commingled with any other wastestream?

- ☐ Yes ☒ No

If **yes**, briefly describe the industrial processes and activities that occur outdoors or in a manner which may result in exposure of the activities or materials to stormwater: Click to enter text.

Item 7. Domestic Sewage, Sewage Sludge, and Septage Management and Disposal (Instructions, Page 44)

Domestic Sewage - Waste and wastewater from humans or household operations that is discharged to a wastewater collection system or otherwise enters a treatment works.

- a. Check the box next to the appropriate method of domestic sewage and domestic sewage sludge treatment or disposal. Complete Worksheet 5.0 or Item 7.b if directed to do so.
- ☐ Domestic sewage is routed (i.e., connected to or transported to) to a WWTP permitted to receive domestic sewage for treatment, disposal, or both. Complete Item 7.b.
 - ☒ Domestic sewage disposed of by an on-site septic tank and drainfield system. Complete Item 7.b.
 - ☐ Domestic and industrial treatment sludge ARE commingled prior to use or disposal.
 - ☐ Industrial wastewater and domestic sewage are treated separately, and the respective sludge IS NOT commingled prior to sludge use or disposal. Complete Worksheet 5.0.
 - ☐ Facility is a POTW. Complete Worksheet 5.0.
 - ☐ Domestic sewage is not generated on-site.
 - ☐ Other (e.g., portable toilets), specify and Complete Item 7.b: Click to enter text.
- b. Provide the name and TCEQ, NPDES, or TPDES Permit No. of the waste-disposal facility which receives the domestic sewage/septage. If hauled by motorized vehicle, provide the name and TCEQ Registration No. of the hauler.

Domestic Sewage Plant/Hauler Name

Plant/Hauler Name	Permit/Registration No.
Valley By Products, Inc.	SigTr22760

Item 8. Improvements or Compliance/Enforcement Requirements (Instructions, Page 45)

- a. Is the permittee currently required to meet any implementation schedule for compliance or enforcement?
- ☐ Yes ☒ No
- b. Has the permittee completed or planned for any improvements or construction projects?
- ☐ Yes ☒ No
- c. If **yes** to either 8.a or 8.b, provide a brief summary of the requirements and a status update: Click to enter text.

Item 9. Toxicity Testing (Instructions, Page 45)

Have any biological tests for acute or chronic toxicity been made on any of the discharges or on a receiving water in relation to the discharge within the last three years?

☐ Yes ☒ No

If **yes**, identify the tests and describe their purposes: Click to enter text.

Additionally, attach a copy of all tests performed which **have not** been submitted to the TCEQ or EPA. **Attachment:** Click to enter text.

Item 10. Off-Site/Third Party Wastes (Instructions, Page 45)

a. Does or will the facility receive wastes from off-site sources for treatment at the facility, disposal on-site via land application, or discharge via a permitted outfall?

☐ Yes ☒ No

If **yes**, provide responses to Items 10.b through 10.d below.

If **no**, proceed to Item 11.

b. Attach the following information to the application:

- List of wastes received (including volumes, characterization, and capability with on-site wastes).
- Identify the sources of wastes received (including the legal name and addresses of the generators).
- Description of the relationship of waste source(s) with the facility's activities.

Attachment: Click to enter text.

c. Is or will wastewater from another TCEQ, NPDES, or TPDES permitted facility commingled with this facility's wastewater after final treatment and prior to discharge via the final outfall/point of disposal?

☐ Yes ☐ No

If **yes**, provide the name, address, and TCEQ, NPDES, or TPDES permit number of the contributing facility and a copy of any agreements or contracts relating to this activity.

Attachment: Click to enter text.

d. Is this facility a POTW that accepts/will accept process wastewater from any SIU and has/is required to have an approved pretreatment program under the NPDES/TPDES program?

☐ Yes ☐ No

If **yes**, **Worksheet 6.0** of this application is required.

Item 11. Radioactive Materials (Instructions, Page 46)

a. Are/will radioactive materials be mined, used, stored, or processed at this facility?

☐ Yes ☒ No

If **yes**, use the following table to provide the results of one analysis of the effluent for all radioactive materials that may be present. Provide results in pCi/L.

Radioactive Materials Mined, Used, Stored, or Processed

Radioactive Material Name	Concentration (pCi/L)

- b. Does the applicant or anyone at the facility have any knowledge or reason to believe that radioactive materials may be present in the discharge, including naturally occurring radioactive materials in the source waters or on the facility property?

☐ Yes ☐ No

If **yes**, use the following table to provide the results of one analysis of the effluent for all radioactive materials that may be present. Provide results in pCi/L. Do not include information provided in response to Item 11.a.

Radioactive Materials Present in the Discharge

Radioactive Material Name	Concentration (pCi/L)

Item 12. Cooling Water (Instructions, Page 46)

- a. Does the facility use or propose to use water for cooling purposes?

☐ Yes

☒ No

☐ Decommissioned: Click to enter text.

☐ To Be Decommissioned: Click to enter text.

If **yes**, complete Items 12.b thru 12.f. If **no**, stop here.

If **decommissioned**, provide the date operation ceased and stop here.

If to **be decommissioned**, provide the date operation is anticipated to cease and stop here.

- b. Cooling water is/will be obtained from a groundwater source (e.g., on-site well).

☐ Yes ☐ No

If **yes**, stop here. If **no**, continue.

c. Cooling Water Supplier

1. Provide the name of the owner(s) and operator(s) for the CWIS that supplies or will supply water for cooling purposes to the facility.

Cooling Water Intake Structure(s) Owner(s) and Operator(s)

CWIS ID				
Owner				
Operator				

2. Cooling water is/will be obtained from a Public Water Supplier (PWS)

☐ No ☐ Yes; PWS No.: Click to enter text.

If **no**, continue. If **yes**, provide the PWS Registration No. and stop here.

3. Cooling water is/will be obtained from a reclaimed water source?

☐ No ☐ Yes; Auth No.: Click to enter text.

If **no**, continue. If **yes**, provide the Reuse Authorization No. and stop here.

4. Cooling water is/will be obtained from an Independent Supplier

☐ No ☐ Yes; AIF: Click to enter text.

If **no**, proceed to Item 12.d. If **yes**, provide the actual intake flow of the Independent Supplier's CWIS that is/will be used to provide water for cooling purposes and proceed.

d. 316(b) General Criteria

1. The CWIS(s) used to provide water for cooling purposes to the facility has or will have a cumulative design intake flow of 2 MGD or greater.

☐ Yes ☐ No

2. At least 25% of the total water withdrawn by the CWIS(s) is/will be used at the facility exclusively for cooling purposes on an annual average basis.

☐ Yes ☐ No

3. The CWIS(s) withdraw(s)/propose(s) to withdraw water for cooling purposes from surface waters that meet the definition of Waters of the United States in 40 CFR § 122.2.

☐ Yes ☐ No. Explanation: Click to enter text.

If **no**, provide an explanation of how the waterbody does not meet the definition of Waters of the United States in 40 CFR § 122.2.

If **yes** to all three questions in Item 12.d, the facility **meets** the minimum criteria to be subject to the full requirements of Section 316(b) of the CWA. Proceed to **Item 12.f**.

If **no** to any of the questions in Item 12.d, the facility **does not meet** the minimum criteria to be subject to the full requirements of Section 316(b) of the CWA; however, a determination is required based upon BPJ. Proceed to **Item 12.e**.

- e. The facility does not meet the minimum requirements to be subject to the fill requirements of Section 316(b) **and uses/proposes to use cooling towers.**

☐ Yes ☐ No

If **yes**, stop here. If **no**, complete Worksheet 11.0, Items 1.a, 1.b.1-3 and 6, 2.b.1, and 3.a to allow for a determination based upon BPJ.

f. Oil and Gas Exploration and Production

1. The facility is subject to requirements at 40 CFR Part 435, Subparts A or D.

☐ Yes ☐ No

If **yes**, continue. If **no**, skip to Item 12.g.

2. The facility is an existing facility as defined at 40 CFR § 125.92(k) or a new unit at an existing facility as defined at 40 CFR § 125.92(u).

☐ Yes ☐ No

If **yes**, complete Worksheet 11.0, Items 1.a, 1.b.1-3 and 6, 2.b.1, and 3.a to allow for a determination based upon BPJ. If **no**, skip to Item 12.g.3.

g. Compliance Phase and Track Selection

1. Phase I – New facility subject to 40 CFR Part 125, Subpart I

☐ Yes ☐ No

If **yes**, check the box next to the compliance track selection, attach the requested information, and complete Worksheet 11.0, Items 2 and 3, and Worksheet 11.2.

- ☐ Track I – AIF greater than 2 MGD, but less than 10 MGD

- Attach information required by 40 CFR §§ 125.86(b)(2)-(4).

- ☐ Track I – AIF greater than 10 MGD

- Attach information required by 40 CFR § 125.86(b).

- ☐ Track II

- Attach information required by 40 CFR § 125.86(c).

Attachment: Click to enter text.

2. Phase II – Existing facility subject to 40 CFR Part 125, Subpart J

☐ Yes ☐ No

If **yes**, complete Worksheets 11.0 through 11.3, as applicable.

3. Phase III – New facility subject to 40 CFR Part 125, Subpart N

☐ Yes ☐ No

If **yes**, check the box next to the compliance track selection and provide the requested information.

- ☐ Track I – Fixed facility

- Attach information required by 40 CFR § 125.136(b) and complete Worksheet 11.0, Items 2 and 3, and Worksheet 11.2.

☐ Track I – Not a fixed facility

- Attach information required by 40 CFR § 125.136(b) and complete Worksheet 11.0, Item 2 (except CWIS latitude/longitude under Item 2.a).

☐ Track II – Fixed facility

- Attach information required by 40 CFR § 125.136(c) and complete Worksheet 11.0, Items 2 and 3.

Attachment: Click to enter text.

Item 13. Permit Change Requests (Instructions, Page 48)

This item is only applicable to existing permitted facilities.

a. Is the facility requesting a **major amendment** of an existing permit?

☐ Yes ☒ No

If **yes**, list each request individually and provide the following information: 1) detailed information regarding the scope of each request and 2) a justification for each request. Attach any supplemental information or additional data to support each request.

Click to enter text.

b. Is the facility requesting any **minor amendments** to the permit?

☐ Yes ☒ No

If **yes**, list and describe each change individually.

Click to enter text.

c. Is the facility requesting any **minor modifications** to the permit?

☐ Yes ☒ No

If **yes**, list and describe each change individually.

Click to enter text.

Item 14. Laboratory Accreditation (Instructions, Page 49)

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

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

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

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

CERTIFICATION:

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

Printed Name: Natalie Jerome

Title: President

Signature: _____

Date: 07-31-25

INDUSTRIAL WASTEWATER PERMIT APPLICATION WORKSHEET 3.0: LAND APPLICATION OF EFFLUENT

This worksheet is required for all applications for a permit to disposal of wastewater by land application (i.e., TLAP)).

Item 1. Type of Disposal System (Instructions, Page 69)

Check the box next to the type of land disposal requested by this application:

- | | |
|--|---|
| ☐ Irrigation | ☐ Subsurface application |
| ☒ Evaporation | ☐ Subsurface soils absorption |
| ☐ Evapotranspiration beds | ☐ Surface application |
| ☐ Drip irrigation system | ☐ Other, specify: Click to enter text. |

Item 2. Land Application Area (Instructions, Page 69)

Land Application Area Information

Effluent Application (gallons/day)	Irrigation Acreage (acres)	Describe land use & indicate type(s) of crop(s)	Public Access? (Y/N)

Item 3. Annual Cropping Plan (Instructions, Page 69)

Attach the required cropping plan that includes each of the following:

- Cool and warm season plant species
- Breakdown of acreage and percent of total acreage for each crop
- Crop growing season
- Harvesting method/number of harvests
- Minimum/maximum harvest height
- Crop yield goals
- Soils map
- Nitrogen requirements per crop
- Additional fertilizer requirements
- Supplemental watering requirements
- Crop salt tolerances
- Justification for not removing existing vegetation to be irrigated

Attachment:

Item 4. Well and Map Information (Instructions, Page 70)

a. Check each box to confirm the required information is shown and labeled on the attached USGS map:

- ☒ The exact boundaries of the land application area
- ☒ On-site buildings
- ☒ Waste-disposal or treatment facilities
- ☐ Effluent storage and tailwater control facilities
- ☐ Buffer zones
- ☐ All surface waters in the state onsite and within 500 feet of the property boundaries
- ☒ All water wells within ½-mile of the disposal site, wastewater ponds, or property boundaries
- ☐ All springs and seeps onsite and within 500 feet of the property boundaries

Attachment: [H](#)

b. List and cross reference all water wells located on or within 500 feet of the disposal site, wastewater ponds, or property boundaries in the following table. Attach additional pages as necessary to include all of the wells.

Well and Map Information Table

Well ID	Well Use	Producing? Y/N/U	Open, cased, capped, or plugged?	Proposed Best Management Practice

Attachment: [Click to enter text.](#)

c. Groundwater monitoring wells or lysimeters are/will be installed around the land application site or wastewater ponds.

☐ Yes ☒ No

If **yes**, provide the existing/proposed location of the monitoring wells or lysimeters on the site map attached for Item 4.a. Additionally, attach information on the depth of the wells or lysimeters, sampling schedule, and monitoring parameters for TCEQ review, possible modification, and approval.

Attachment: [Click to enter text.](#)

d. Attach a short groundwater technical report using *30 TAC § 309.20(a)(4)* as guidance.

Attachment:

Item 5. Soil Map and Soil Information (Instructions, Page 71)

Check each box to confirm that the following information is attached:

- a. ☐ USDA NRCS Soil Survey Map depicting the area to be used for land application with the locations identified by fields and crops.
- b. ☐ Breakdown of acreage and percent of total acreage for each soil type.
- c. ☐ Copies of laboratory soil analyses. Attachment: [Click to enter text.](#)

Item 6. Effluent Monitoring Data (Instructions, Page 72)

- a. Completion of Table 14 is required for all renewal and major amendment applications. Complete the table with monitoring data for the previous two years for all parameters regulated in the current permit. An additional table has been provided with blank headers for parameters regulated in the current permit which are not listed in Table 14.

Table 14 for Outfall No.: [Click to enter text.](#) Samples are (check one): ☐ Composite ☐ Grab

Date (mo/yr)	Daily Avg Flow (gpd)	BOD5 (mg/L)	TSS (mg/L)	Nitrogen (mg/L)	Conductivity (mmhos/cm)	Total acres irrigated	Hydraulic Application rate (acre-feet/month)

Item 7. Pollutant Analysis (Instructions, Page 72)

- Provide the date range of all sampling events conducted to obtain the analytical data submitted with this application (e.g., 05/01/2018-05/30/2018): [Click to enter text.](#)
- ☐ Check the box to confirm all samples were collected no more than 12 months prior to the date of application submittal.
- Complete Tables 15 and 16.

Table 15 for Outfall No.: [Click to enter text.](#) Samples are (check one): ☐ Composite ☐ Grab

Pollutant	Sample 1 (mg/L)	Sample 2 (mg/L)	Sample 3 (mg/L)	Sample 4 (mg/L)
BOD (5-day)				
CBOD (5-day)				
Chemical oxygen demand				
Total organic carbon				
Dissolved oxygen				
Ammonia nitrogen				
Total suspended solids				
Nitrate nitrogen				
Total organic nitrogen				
Total phosphorus				
Oil and grease				
Total residual chlorine				
Total dissolved solids				
Sulfate				
Chloride				
Fluoride				
Total alkalinity (mg/L as CaCO ₃)				
Temperature (°F)				
pH (standard units)				

Table 16 for Outfall No.: [Click to enter text.](#) Samples are (check one): ☐ Composite ☐ Grab

Pollutant	Sample 1 (µg/L)	Sample 2 (µg/L)	Sample 3 (µg/L)	Sample 4 (µg/L)	MAL (µg/L)
Aluminum, total					2.5
Antimony, total					5
Arsenic, total					0.5
Barium, total					3

Pollutant	Sample 1 (µg/L)	Sample 2 (µg/L)	Sample 3 (µg/L)	Sample 4 (µg/L)	MAL (µg/L)
Beryllium, total					0.5
Cadmium, total					1
Chromium, total					3
Chromium, hexavalent					3
Chromium, trivalent					N/A
Copper, total					2
Cyanide, available					2/10
Lead, total					0.5
Mercury, total					0.005/0.0005
Nickel, total					2
Selenium, total					5
Silver, total					0.5
Thallium, total					0.5
Zinc, total					5.0

Attachment Index

<i>Attachment</i>	<i>Title</i>
A	Original USGS Topographic Map
B	Site Drawing
C	Flow/Facility Diagrams
D	Core Data Form
E	PLS
F	Fee Receipts
G	MSDS
H	Well Information
I	FEMA Map

Attachment A

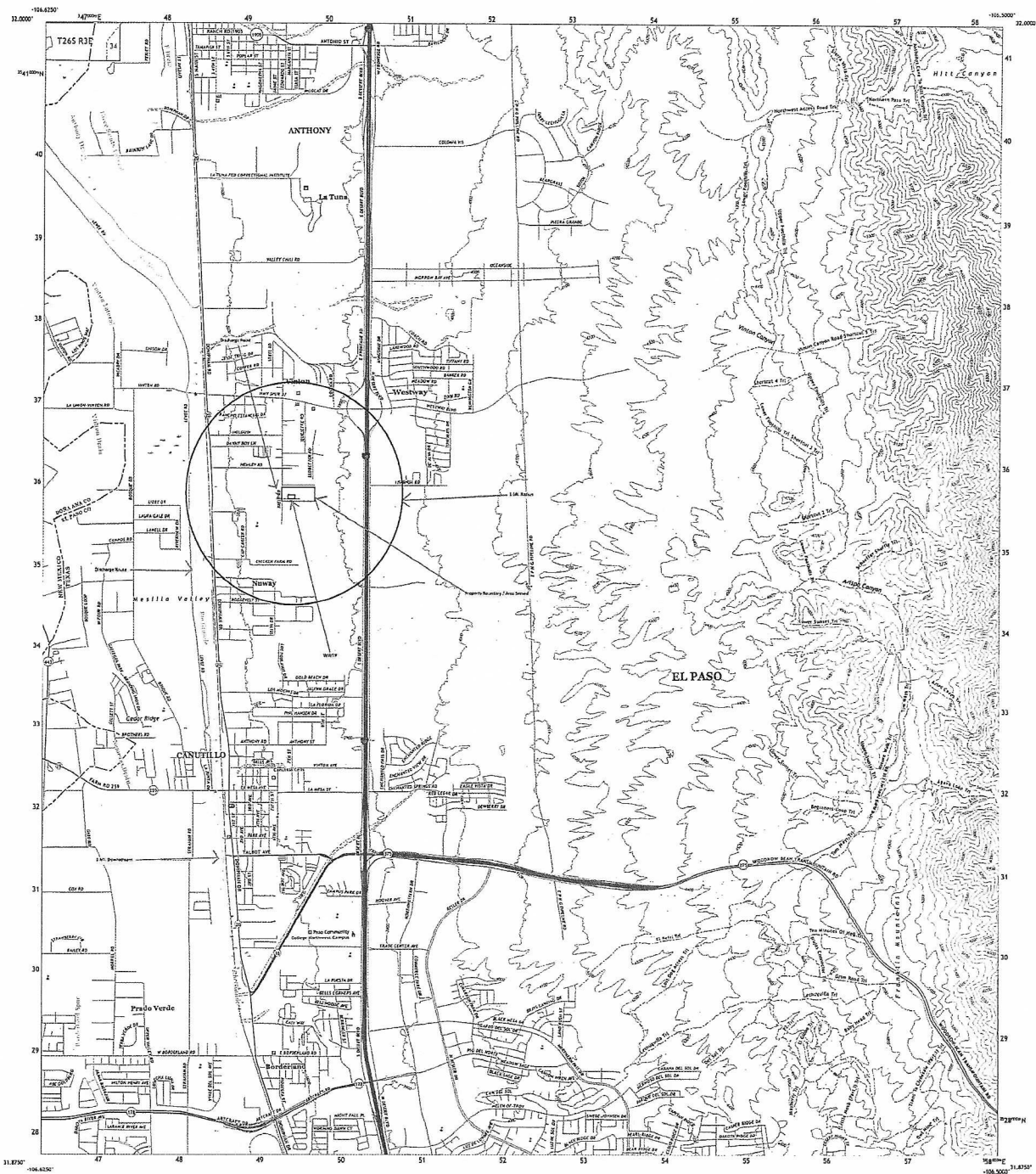
Original USGS Topographic Map



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



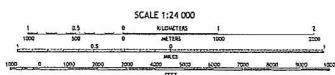
CANUTILLO QUADRANGLE
TEXAS - NEW MEXICO
7.5-MINUTE SERIES



Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)
Vertical datum: Mean Sea Level (MSL)
This map is not a legal document. Boundary lines may be
generalized for the map scale. Please check official government
records for the most accurate information. Obtain permission before
reproducing or distributing this map.

Source: 1997, August 2014, September 2020
Data: 1997, August 2014, September 2020
Projection: UTM
Datum: NAD83
Zone: 14N
Units: Meters
Scale: 1:24,000
Version: 1.0
Date: 2020



SCALE 1:24,000
CONTOUR INTERVAL: 20 FEET
VERTICAL DATUM: MEAN SEA LEVEL (MSL)
This map was produced to conform with the
National Geospatial Program on US Topographic Standards.



1	2	3
4	5	6
7	8	9

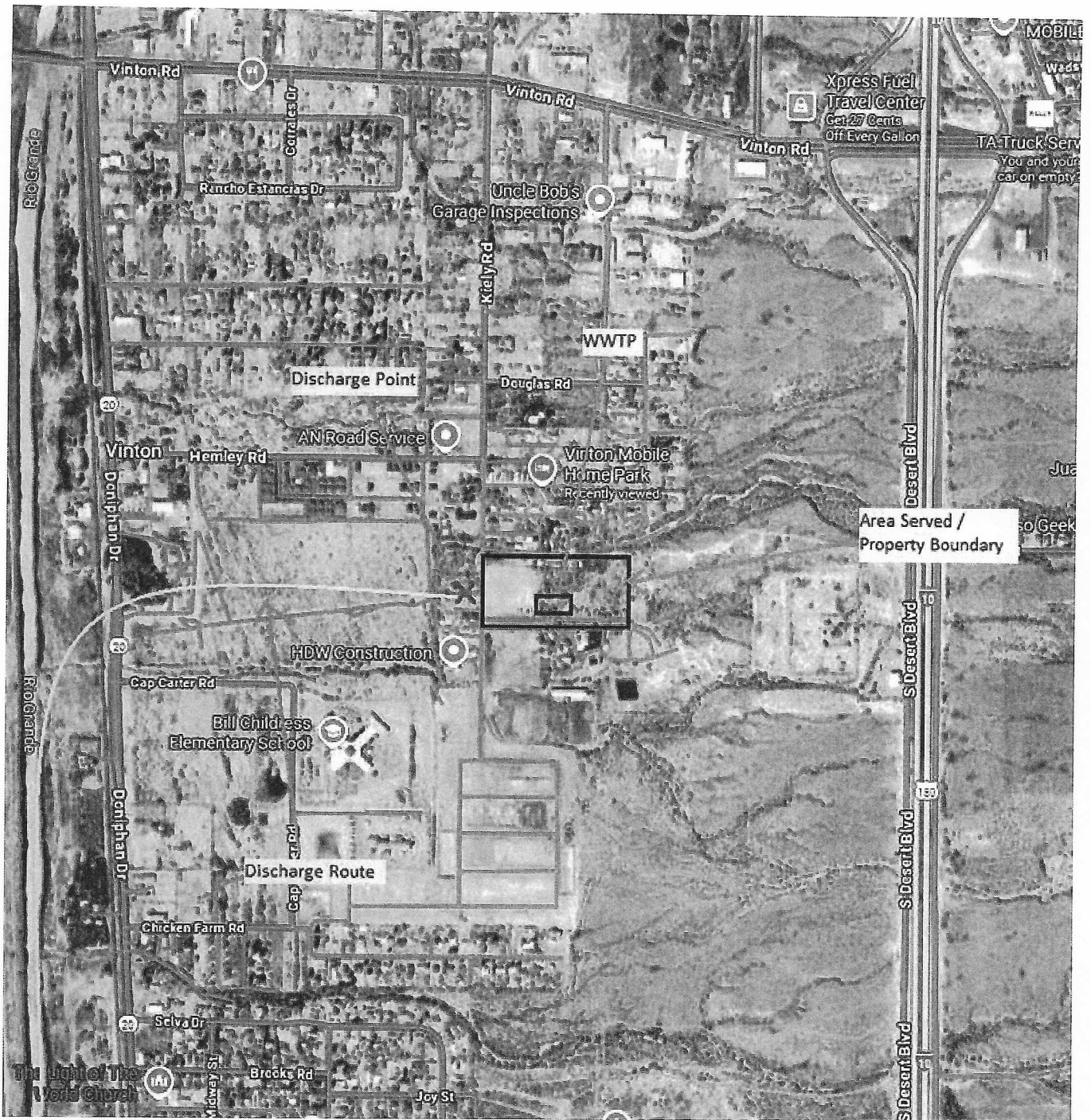
ROAD CLASSIFICATION	
Expressway	Local Connector
Interstate	Local Road
Artery	Artery
Collector	US Road
Minor Road	State Road

CANUTILLO, TX, NM
2022



Attachment B

Site Drawing



Valley By Products, Inc.

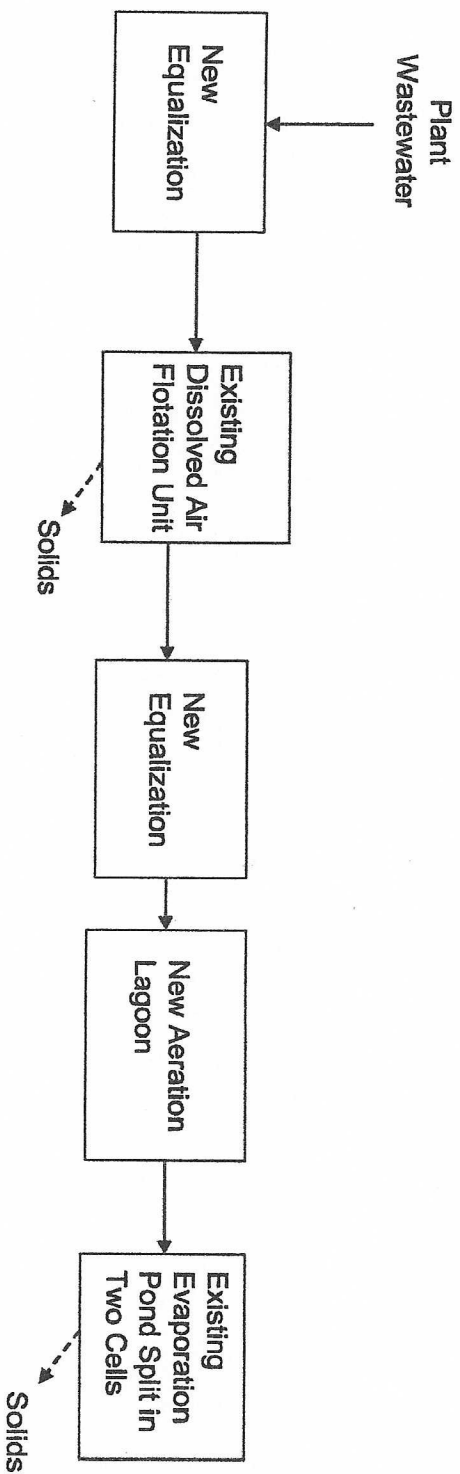
WQ0001243000

August 2025

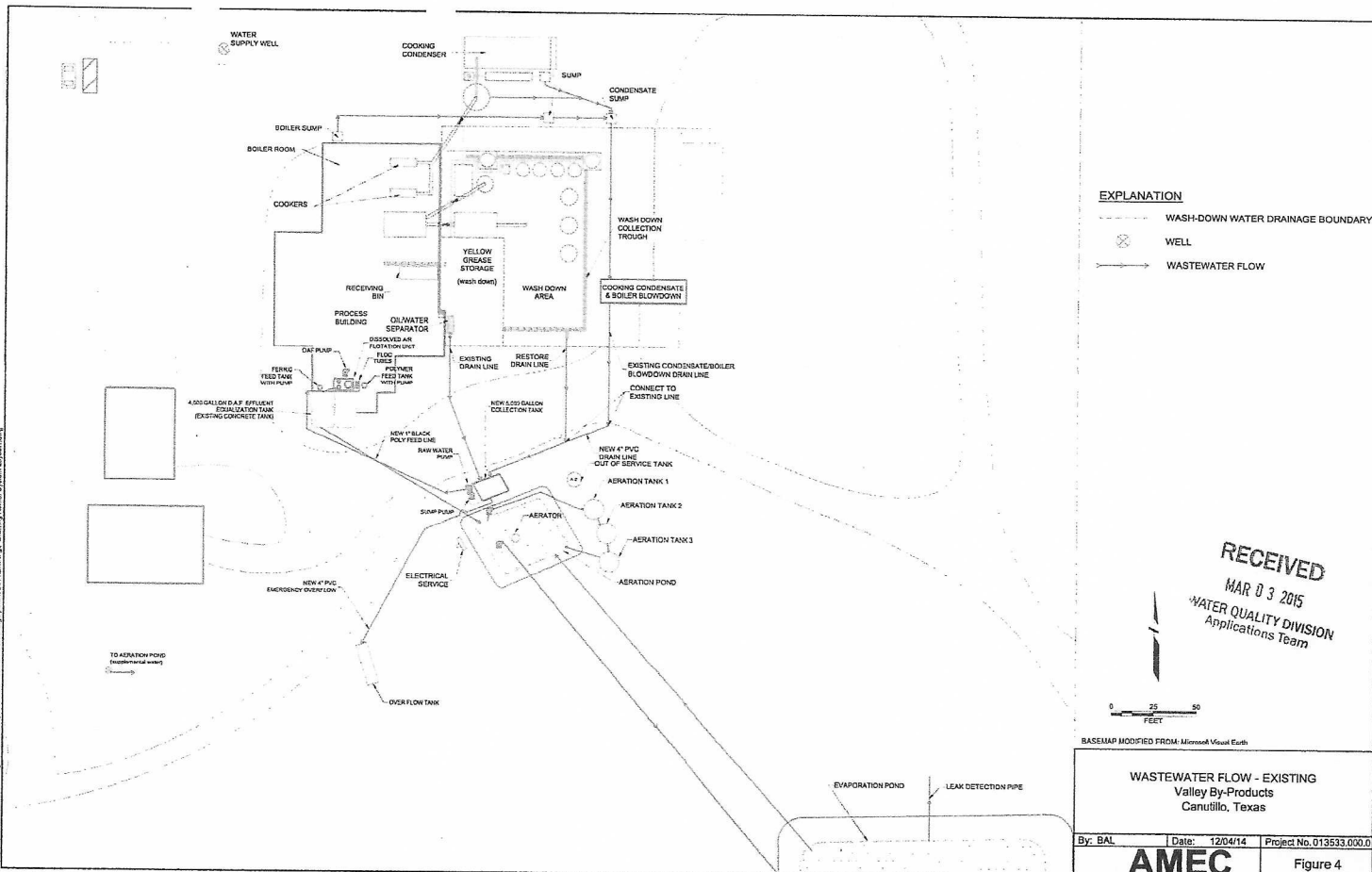


Attachment C

Flow/ Facility Diagrams



FigureTR-2A:
Block Flow Diagram of Proposed
Treatment Design for Valley By-Products



Attachment D

Core Data Form



TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
☐ New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
☒ Renewal (Core Data Form should be submitted with the renewal form)		☐ Other
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN 600502579		RN 100820042

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)		
☐ New Customer ☐ Update to Customer Information ☐ Change in Regulated Entity Ownership				
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)				
<i>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).</i>				
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)			<i>If new Customer, enter previous Customer below:</i>	
Valley By Products, Inc.				
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)	
0137689400	17427631613	74-2763161		
11. Type of Customer:	☒ Corporation	☐ Individual	Partnership: ☐ General ☐ Limited	
Government: ☐ City ☐ County ☐ Federal ☐ Local ☐ State ☐ Other		☐ Sole Proprietorship	☐ Other:	
12. Number of Employees		13. Independently Owned and Operated?		
☒ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher		☒ 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 ☐ Other:				
☐ Occupational Licensee ☐ Responsible Party ☐ VCP/BSA Applicant				
15. Mailing Address:	P.O. Box 628			
	City	Canutillo	State	TX
	ZIP	79835	ZIP + 4	
16. Country Mailing Information (if outside USA)		17. E-Mail Address (if applicable)		
		njerome0714@gmail.com		

18. Telephone Number (915) 877-3131	19. Extension or Code	20. Fax Number (if applicable) () -
---	------------------------------	--

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If "New Regulated Entity" is selected, a new permit application is also required.) ☐ New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.) Valley By Products, Inc.								
23. Street Address of the Regulated Entity: (No PO Boxes)	7740 Kiely Road, approximately 4,000 feet east-southeast of the intersection of State Highway 20 and Hemley Road							
	City	Vinton	State	TX	ZIP	79821	ZIP + 4	
24. County	El Paso							

If no Street Address is provided, fields 25-28 are required.

25. Description to Physical Location:								
26. Nearest City				State		Nearest ZIP Code		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		31.94614			28. Longitude (W) In Decimal:		-106.59009	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
29. Primary SIC Code (4 digits)		30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)		
2077				311613				
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.) Wastewater Treatment								
34. Mailing Address:		P.O. Box 628						
		City	Canutillo	State	TX	ZIP	79835	ZIP + 4
35. E-Mail Address:		njerome0714@gmail.com						
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)		
(915) 877-3131						() -		

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

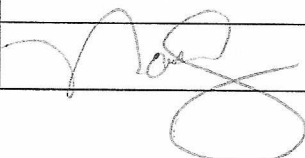
☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☐ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
☐ Voluntary Cleanup	☒ Wastewater	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:
	WQ0001243000			

SECTION IV: Preparer Information

40. Name:	Stephanie Landsman		41. Title:	Wastewater Specialist
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address	
(281) 658-5899		() -	stephanie@landsmanenviro.com	

SECTION V: Authorized Signature

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

Company:	Valley By Products, Inc.	Job Title:	President
Name (In Print):	Natalie Jerome	Phone:	(915) 877- 3131
Signature:			Date:
			07-31-25

Attachment E

PLS



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

Plain Language Summary Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

Applicants should use this template to develop a plain language summary as required by Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H. Applicants may modify the template as necessary to accurately describe their facility as long as the summary includes the following information: (1) the function of the proposed plant or facility; (2) the expected output of the proposed plant or facility; (3) the expected pollutants that may be emitted or discharged by the proposed plant or facility; and (4) how the applicant will control those pollutants, so that the proposed plant will not have an adverse impact on human health or the environment.

Fill in the highlighted areas below to describe your facility and application in plain language. Instructions and examples are provided below. Make any other edits necessary to improve readability or grammar and to comply with the rule requirements.

If you are subject to the alternative language notice requirements in 30 TAC Section 39.426, **you must provide a translated copy of the completed plain language summary in the appropriate alternative language as part of your application package**. For your convenience, a Spanish template has been provided below.

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS Enter 'INDUSTRIAL' or 'DOMESTIC' here WASTEWATER/STORMWATER

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal enforceable representation of the permit application.

Valley By Products, Inc. (CN600502579) operates Valley By Products, Inc. WWTP (RN100820042), an industrial wastewater treatment facility. The facility is located at 7740 Kiely Road, in Vinton, El Paso County, Texas 79821. Request for renewal of permit authorizing disposal of 0.002 MGD of industrial wastewater annually. This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain BOD(5), Oil and Grease and Ammonia-Nitrogen.. Industrial wastewater is treated by aeration lagoon and evaporation ponds.

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

AGUAS RESIDUALES Introduzca 'INDUSTRIALES' o 'DOMÉSTICAS' aquí /**AGUAS PLUVIALES**

El siguiente resumen se proporciona para esta solicitud de permiso de calidad del agua pendiente que está siendo revisada por la Comisión de Calidad Ambiental de Texas según lo requerido por el Capítulo 39 del Código Administrativo de Texas 30. La información proporcionada en este resumen puede cambiar durante la revisión técnica de la solicitud y no es una representación ejecutiva fedérale de la solicitud de permiso.

Valley By Products, Inc. (CN600502579) opera Valley By Products, Inc. WWTP (RN100820042), una instalación de tratamiento de aguas residuales industriales. La instalación está ubicada en 7740 Kiely Road, en Vinton, Condado de El Paso, Texas 79821. Solicitud de renovación de permiso que autoriza la eliminación de 0.002 MGD de aguas residuales industriales anualmente. Este permiso no autorizará una descarga de contaminantes al agua del estado.

Se espera que las descargas de la instalación contengan BOD(5), Aceite y Grasa y Nitrógeno Amoniacal. Las aguas residuales industriales se tratan mediante laguna de aireación y estanques de evaporación.

Attachment F

Fee Receipts



Natalie Jerome <njerome0714@gmail.com>

TCEQ ePay Receipt for 582EA000678968

1 message

steers@tceq.texas.gov <steers@tceq.texas.gov>
To: njerome0714@gmail.com

Thu, Jul 31, 2025 at 1:32 PM

This is an automated message from the TCEQ ePay system. Please do not reply.

Trace Number: 582EA000678968

Date: 07/31/2025 03:32 PM

Payment Method: ACH - Authorization 0000000000

TCEQ Amount: \$315.00

Texas.gov Fee: \$0.00

Texas.gov Price: \$315.00*

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

Actor: NATALIE JEROME
Email: njerome0714@gmail.com

Payment Contact: NATALIE JEROME
Phone: 915-877-3131
Company: VALLEY BY PRODUCTS INC
Address: 7740 SOUTH KIELY RD, VINTON, TX 79821

Fees Paid:

Fee Description	AR Number	Amount
-----------------	-----------	--------

WW PERMIT - MINOR FACILITY NOT SUBJECT TO 40 CFR 400-471 - RENEWAL		\$300.00
--	--	----------

30 TAC 305.53B WQ RENEWAL NOTIFICATION FEE		\$15.00
--	--	---------

TCEQ Amount: \$315.00

Voucher: 777477

Trace Number: 582EA000678968

Date: 07/31/2025 03:32 PM

Payment Method: ACH - Authorization 0000000000

Voucher Amount: \$300.00

Fee Paid: WW PERMIT - MINOR FACILITY NOT SUBJECT TO 40 CFR 400-471 - RENEWAL

RN Number: RN108378639

Site Name: VALLEY BY PRODUCTS INC

Site Address: 7740 SOUTH KIELY RD, VINTON, TX 79821

CN Number: CN600502579

Customer Name: VALLEY BY PRODUCTS INC

State Franchise Tax ID: 17427631613

Customer Address: P O BOX 628, CANUTILLO, TX 79835

Program Area ID: 0001243000

Voucher: 777478

Trace Number: 582EA000678968

Date: 07/31/2025 03:32 PM

Payment Method: ACH - Authorization 0000000000

Voucher Amount: \$15.00

Fee Paid: 30 TAC 305.53B WQ RENEWAL NOTIFICATION FEE

To print out a copy of the receipt and vouchers for this transaction

Attachment G

MSDS

MATERIAL SAFETY DATA SHEET**16. OTHER INFORMATION**

All information appearing herein is based upon data obtained from the manufacturer and/or recognized technical sources. While the information is believed to be accurate, Alpha Labs makes no representations as to its accuracy or sufficiency. Conditions of use are beyond Alpha Labs control and therefore users are responsible to verify this data under their own operating conditions to determine whether the product is suitable for their particular purposes and they assume all risks of their use, handling and disposal of the product, or from the publication or use of, or relation upon, information contained herein. This information relates only to the product designated herein, and does not relate to its use in combination with any other material or in any other process.

MATERIAL SAFETY DATA SHEETAlpha 630
Page 3**11. TOXICOLOGICAL INFORMATION**

INGESTION: LD50 (mouse) 820 mg/kg

DERMAL: None established

CARCINOGENITY: This material is not considered to be a carcinogen by the National Toxicology Program, the International Agency for Research on Cancer, or the Occupational Safety and Health Administration.

12. ECOLOGICAL INFORMATION**AQUATIC ECOTOXICITY DATA:**

Fish: LC50 (24 hr.) (Mosquito fish) 2600 mg/L (sodium sulfite)

Invertebrates: No data available

Plants: No data available

13. DISPOSAL PROCEDURES

Reuse or reprocess if possible. Dispose of all waste and contaminated equipment in accordance with all applicable federal, state and local health and environmental regulations.

14. TRANSPORTATION INFORMATION

SHIPPING NAME:	Water clarifying, purifying or softening compound
HAZARD CLASS:	Non hazardous
PACKING GROUP:	Not applicable
UN NUMBER:	Not applicable
D.O.T. REPORTABLE QUANTITY:	None
HAZARDOUS SUBSTANCES:	Not regulated
TRANSPORT LABEL:	Not regulated

15. REGULATORY INFORMATION

Product classification under Sections 311 and 312 of SARA Title III
Sodium Sulfite - Immediate Health Hazard

NFPA HAZARD RATING:	Health:	1
	Fire:	0
	Reactivity:	0

POOR QUALITY ORIGINAL

MATERIAL SAFETY DATA SHEET

Alpha 630

Page 2

6. ACCIDENTAL RELEASE MEASURES

Leaks should be stopped. Spills should be contained and cleaned up immediately. Do not mix this product with acids or oxidizers. All clean-up material should be removed and placed in approved containers, labeled and stored in a safe place to await proper treatment or disposal. Only trained and properly protected personnel should be involved in spill cleanup operations.

7. HANDLING & STORAGE PRECAUTIONS

Store and handle in accordance with all current regulations and standards. Prevent eye and skin contact. Do not breathe mists. Avoid storing next to strong acids. Should be stored in clean, dry areas. Keep separated from incompatible substances.

8. EXPOSURE CONTROLS & PERSONAL PROTECTION

VENTILATION: Control airborne concentrations below the exposure guideline. Good general ventilation sufficient for most operations.

RESPIRATORY PROTECTION: In misty atmospheres, use an approved mist respirator. If respiratory irritation is experienced, use an approved air-purifying respirator.

SKIN PROTECTION: Use protective clothing impervious to this material. Selection of specific items such as gloves, boots, apron, and hardhat with face-shield or full-body suit will depend on operation. Remove contaminated clothing immediately, wash skin area with soap and water, and launder clothing before reuse.

EYE PROTECTION: Use chemical goggles. Full-face shield in addition to goggles may be desirable to protect face. Maintain eyewash and safety shower at or near work area.

9. PHYSICAL DATA

APPEARANCE AND ODOR:	Dark brown, clear liquid; slight odor
BOILING POINT:	Not available
FREEZING POINT:	Not available
VAPOR PRESSURE:	Not available
VAPOR DENSITY:	Not applicable
SOLUBILITY IN WATER:	Water solution
pH:	10.5
SPECIFIC GRAVITY:	1.16

10. REACTIVITY DATA

STABILITY: Material is stable.

CONDITIONS TO AVOID: None.

INCOMPATIBILITY: Strong oxidizers and acids.

HAZARDOUS DECOMPOSITION PRODUCTS: Burning may produce sulfur oxides.

HAZARDOUS POLYMERIZATION: Will not occur.

POOR QUALITY ORIGINAL

MATERIAL SAFETY DATA SHEETAlpha 630
Page 1**1. PRODUCT NAME AND COMPANY INFORMATION**

PRODUCT NAME: Alpha 630
Alpha Labs
1505 Buddy Holly Avenue
Lubbock, TX 79401
806-744-1960

Effective Date: September 1, 2009
Supersedes: January 3, 2005

2. COMPONENT INFORMATION

<u>Material</u>	<u>C.A.S. No.</u>	<u>%</u>	<u>OSHA PEL</u>	<u>ACGIH TLV</u>
Sodium Sulfite	7757-83-7	10 - 15	None	None
Sodium Lignosulfonate	68131-31-7	< 5	15 mg/m ³	15 mg/m ³

3. HEALTH HAZARD DATA

EYE: May cause irritation, redness and pain.

SKIN CONTACT: May cause irritation.

SKIN ABSORPTION: No data.

INGESTION: May irritate gastrointestinal tract. Large doses may result in circulatory disturbances, diarrhea and central nervous system depression. May cause severe allergic reaction in some asthmatics and sulfite sensitive individuals.

INHALATION: Inhalation may cause irritation to the mucous membranes of the upper respiratory tract.

SYSTEMIC & OTHER EFFECTS: No relevant information found.

4. FIRST AID

EYES: Immediately flush eyes with large amounts of water for at least 15 minutes, holding lids apart to ensure flushing of the entire surface. Get medical attention.

SKIN: Immediately wash contaminated areas with plenty of soap and water for 15 minutes. Remove contaminated clothing and footwear and wash clothing before reuse. Get medical attention if irritation develops or persists.

INGESTION: Never give anything by mouth to an unconscious person. Induce vomiting immediately as directed by medical personnel. Get medical attention immediately.

INHALATION: Remove to fresh air if effects occur. Get immediate medical attention if signs of suffocation, irritation or other symptoms develop.

5. FIRE FIGHTING INFORMATION

FLASH POINT: None

METHOD USED: Not Applicable

FLAMMABLE LIMITS: Not Applicable

EXTINGUISHING MEDIA: This product is not combustible. Water spray may be used in areas where this product is stored.

FIRE & EXPLOSION HAZARDS: None

FIRE-FIGHTING EQUIPMENT: Wear self-contained (positive-pressure if available) breathing apparatus and full protective clothing.

POOR QUALITY ORIGINAL

MATERIAL SAFETY DATA SHEETAlpha 455
Page 4**15. REGULATORY INFORMATION**

Product classification under Sections 311 and 312 of SARA Title III
Sodium Hydroxide - Immediate Health Hazard

NFPA HAZARD RATING: Health: 2
Fire: 0
Reactivity: 0

16. OTHER INFORMATION

All information appearing herein is based upon data obtained from the manufacturer and/or recognized technical sources. While the information is believed to be accurate, Alpha Labs makes no representations as to its accuracy or sufficiency. Conditions of use are beyond Alpha Labs control and therefore users are responsible to verify this data under their own operating conditions to determine whether the product is suitable for their particular purposes and they assume all risks of their use, handling and disposal of the product, or from the publication or use of, or relation upon, information contained herein. This information relates only to the product designated herein, and does not relate to its use in combination with any other material or in any other process.

POOR QUALITY ORIGINAL

MATERIAL SAFETY DATA SHEETAlpha 455
Page 3**10. REACTIVITY DATA**

STABILITY: Material is stable

CONDITIONS TO AVOID: None

INCOMPATIBILITY: Acids, halogenated compounds, prolonged contact with aluminum, brass, bronze, copper, lead, tin, zinc or other alkali sensitive metals or alloys.

HAZARDOUS DECOMPOSITION PRODUCTS: None.

HAZARDOUS POLYMERIZATION: Will not occur.

11. TOXICOLOGICAL INFORMATION

INGESTION: LD50 (rat) 220 mg/kg (Sodium Hydroxide)

ACUTE DERMAL LD50: (rabbit) 1350 mg/kg (Sodium Hydroxide)

CARCINOGENITY: This material is not considered to be a carcinogen by the National Toxicology Program, the International Agency for Research on Cancer, or the Occupational Safety and Health Administration.

12. ECOLOGICAL INFORMATION

AQUATIC ECOTOXICITY DATA:

Sodium Hydroxide Fish: LC50 (24 hr.) (Brook trout) 25 mg/L
 Invertebrates: EC50 (48 hr.) (Shrimp) 100 mg/L
 Plants: No data available

13. DISPOSAL PROCEDURES

Reuse or reprocess if possible. Dispose of all waste and contaminated equipment in accordance with all applicable federal, state and local health and environmental regulations.

14. TRANSPORTATION INFORMATION

SHIPPING NAME:	Corrosive Liquid, Basic, Inorganic, N.O.S. (Sodium Hydroxide)
HAZARD CLASS:	8
PACKING GROUP:	II
UN NUMBER:	3266
D.O.T. REPORTABLE QUANTITY:	1000
HAZARDOUS SUBSTANCES:	Sodium Hydroxide
TRANSPORT LABEL:	Corrosive

POOR QUALITY ORIGINAL

MATERIAL SAFETY DATA SHEET

Alpha 455

Page 2

5. FIRE FIGHTING INFORMATION

FLASH POINT: None

METHOD USED: Not Applicable

FLAMMABLE LIMITS: Non-flammable

EXTINGUISHING MEDIA: Non-combustible

FIRE & EXPLOSION HAZARDS: Negligible fire hazard.

FIRE-FIGHTING EQUIPMENT: Wear self-contained (positive-pressure if available) breathing apparatus and full protective clothing.

6. ACCIDENTAL RELEASE MEASURES

Leaks should be stopped. Spills should be contained and cleaned up immediately. Neutralize traces of material with any dilute inorganic acid such as hydrochloric, sulfuric, or acetic acid. All clean-up material should be removed and placed in approved containers, labeled and stored in a safe place to await proper treatment or disposal. Only trained and properly protected personnel should be involved in spill cleanup operations.

7. HANDLING & STORAGE PRECAUTIONS

Store and handle in accordance with all current regulations and standards. Prevent eye and skin contact. Do not breathe mists. Avoid storing next to strong acids. Should be stored in clean, dry areas. Keep separated from incompatible substances.

8. EXPOSURE CONTROLS & PERSONAL PROTECTION

VENTILATION: Control airborne concentrations below the exposure guideline. Good general ventilation sufficient for most operations.

RESPIRATORY PROTECTION: In misty atmospheres, use an approved mist respirator. If respiratory irritation is experienced, use an approved air-purifying respirator.

SKIN PROTECTION: Use protective clothing impervious to this material. Selection of specific items such as gloves, boots, apron, and hardhat with face-shield or full-body suit will depend on operation. Remove contaminated clothing immediately, wash skin area with soap and water, and launder clothing before reuse.

EYE PROTECTION: Use chemical goggles. Full-face shield in addition to goggles may be desirable to protect face. Maintain eyewash and safety shower at or near work area.

9. PHYSICAL DATA

APPEARANCE AND ODOR:	Dark brown, clear liquid; slight odor
BOILING POINT:	Approximately 293F
FREEZING POINT:	Approximately 58F
VAPOR PRESSURE:	Not available
VAPOR DENSITY:	Not applicable
SOLUBILITY IN WATER:	Water solution
pH:	> 12.0
SPECIFIC GRAVITY:	1.28

POOR QUALITY ORIGINAL

MATERIAL SAFETY DATA SHEETAlpha 455
Page 1**1. PRODUCT NAME AND COMPANY INFORMATION**

PRODUCT NAME: Alpha 455
Alpha Labs
1505 Buddy Holly Avenue
Lubbock, TX 79401
806-744-1960

Effective Date: September 1, 2009
Supersedes: January 3, 2005

2. COMPONENT INFORMATION

Material	C.A.S. No.	%	OSHA PEL	ACGIH TLV
Sodium Hydroxide	1310-73-2	< 30	2 mg/m ³	2 mg/m ³
Sodium Aluminate	1302-42-7	< 10	2 mg/m ³	2 mg/m ³
Sodium Lignosulfonate	68131-31-7	< 1	15 mg/m ³	15 mg/m ³

3. HEALTH HAZARD DATA

STATEMENT OF HAZARD: May cause burns to eyes, skin, and mucous membranes.

EYE: Contact can cause severe damage including burns and blindness.

SKIN CONTACT: Corrosive. Contact may cause burns and tissue destruction.

SKIN ABSORPTION: A single prolonged skin exposure is not likely to result in absorption of harmful amounts.

INGESTION: Corrosive. Severe burns and complete tissue perforation of mucous membranes of mouth, throat and stomach.

INHALATION: Exposure to vapor, mist or liquid can produce burns of the respiratory tract.

SYSTEMIC & OTHER EFFECTS: No relevant information found.

4. FIRST AID

EYES: In case of eye contact, wash eyes immediately and continuously for 15 minutes, holding lids apart to ensure flushing of entire area. Washing eyes within several seconds is essential to achieve maximum effectiveness. Get medical attention immediately.

SKIN: Immediate continued and thorough washing in flowing water for 15 minutes is imperative while removing contaminated clothing. Get medical attention immediately. Wash contaminated clothing before reuse. Destroy contaminated shoes.

INGESTION: Never give anything by mouth to an unconscious person. Do not induce vomiting. Give large amounts of water or milk if available. Get medical attention immediately.

INHALATION: Remove to fresh air if effects occur. Get medical attention.

POOR QUALITY ORIGINAL

Attachment H

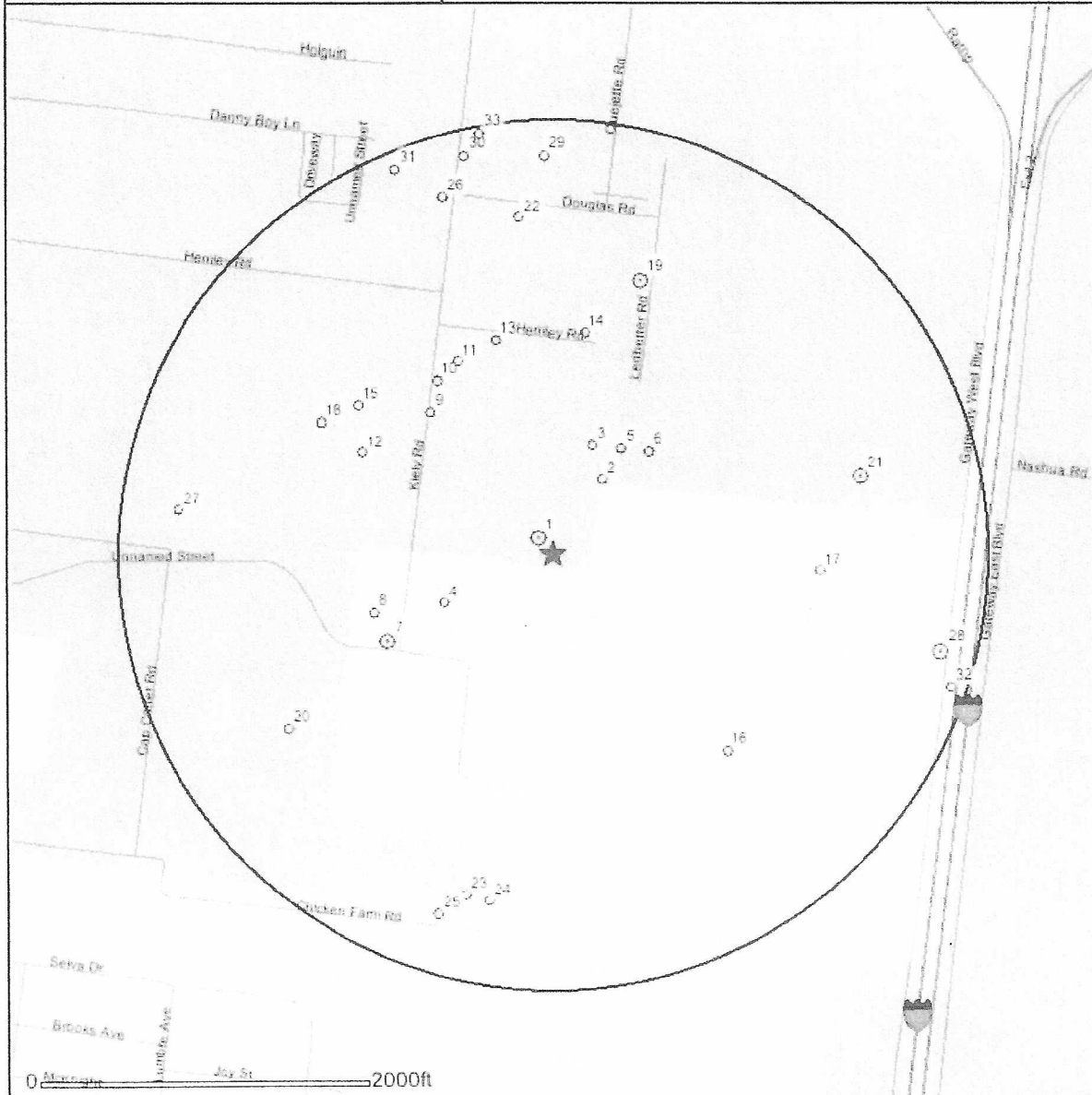
Well Information



BANKS
ENVIRONMENTAL DATA
A DIVISION OF THE BANKS GROUP

Water Well Report™

Map of Wells within 0.5 Mile(s)



★ Site	⊞ Park	□ County
○ Well	⌚ School	□ State
⊙ Cluster	⌚ Cemetery	□ Urban Area
⌚ Limited Access Hwy	■ Building	□ Open Space
⌚ Primary Highway	⌚ Railroad	□ Educational/Religious
⌚ Secondary Highway	⌚ Church	□ Water Bodies
⌚ Bypass	⌚ Train	□ Multihousehold
⌚ Hospital	⌚ Bridge	□ Military
✈ Airport	⌚ Tower	□ Custodial Facility

One inch = 0.19 miles

Valley By-Products

Banks Environmental Data
1601 Rio Grande Suite 500 Austin, Texas 78701
PH 512-478-0059 FAX 512-478-1433
E-Mail: banks@banksinfo.com



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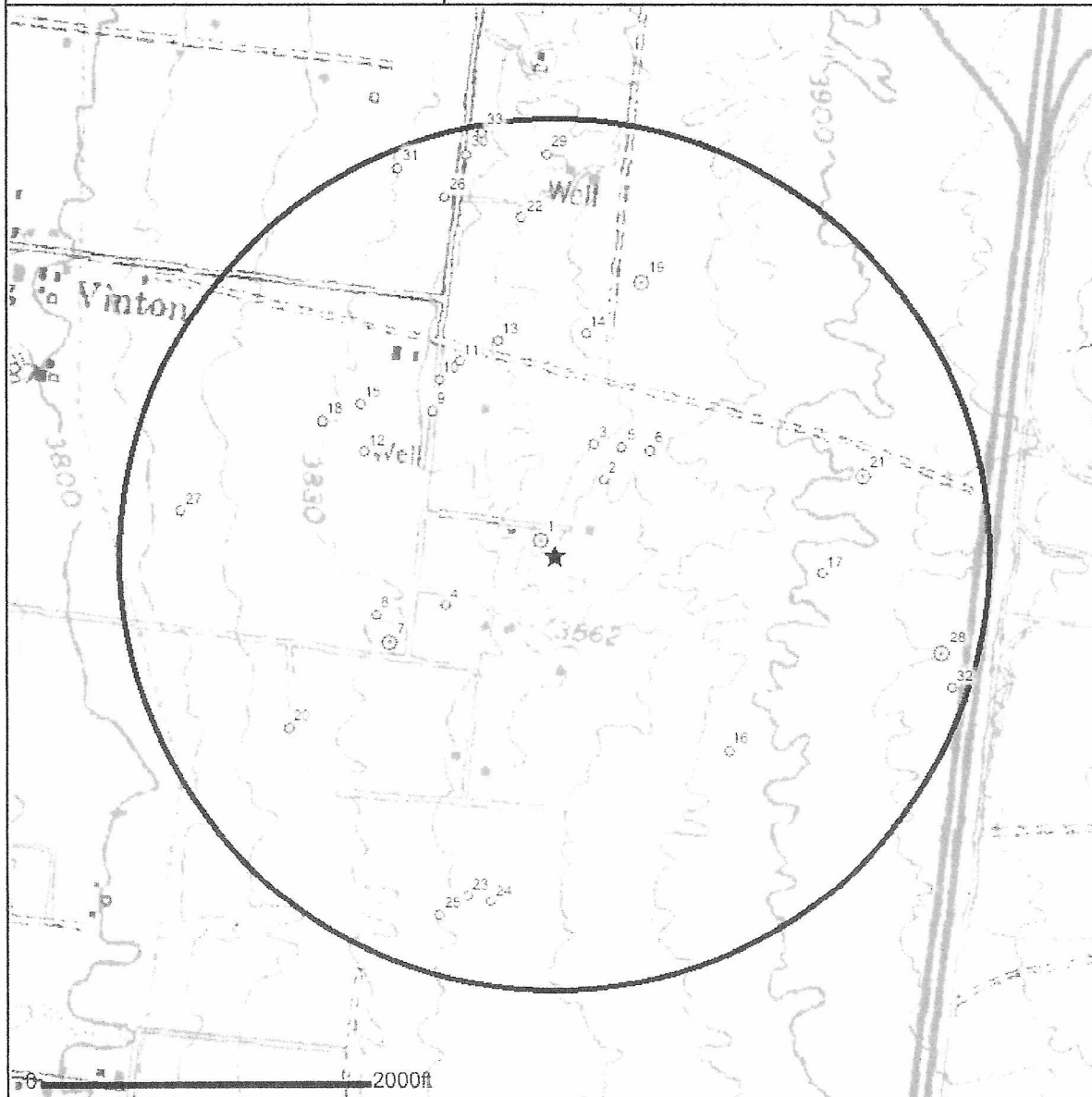
WATER QUALITY DIVISION
Applications Team



BANKS
ENVIRONMENTAL DATA
A DIVISION OF THE BANKS GROUP

Water Well Report™
on USGS Topo

Map of Wells within 0.5 Mile(s)



- ★ Subject Site
- Site
- ⊙ Cluster
- Existing Road
- State Line
- County Line
- Unimproved Road

One inch = 0.19 miles

Valley By-Products

Banks Environmental Data
1601 Rio Grande Suite 500 Austin, Texas 78701
PH 512-478-0059 FAX 512-478-1433
E-Mail: banks@banksinfo.com

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MAR 03 2015

WATER QUALITY DIVISION
Applications Team



Water Well Report TM

DETAILS

Map #	State ID	Owner of Well	Type of Well	Depth Drilled	Completion Date	Longitude	Latitude	Driller's Log
1	49-04-463	Casuco	INDUSTRIAL	180	1/1/1969	-106.59138	31.94694	View
1	49-04-494	Western Recycling	INDUSTRIAL	480	1/1/1985	-106.59111	31.94722	View
1	49-04-462	Casuco	INDUSTRIAL	250	6/5/1974	-106.59138	31.94722	View
2	G0710177D	VALLEY BY-PRODUCTS INC	Public Supply	0		-106.59027	31.94833	View
3	G0710177A	VALLEY BY-PRODUCTS INC	Public Supply	480		-106.59055	31.94888	
4	49-04-4	Upper Valley Wrecking	Domestic	150	4/25/1994	-106.59306	31.94597	View
5	G0710177B	VALLEY BY-PRODUCTS INC	Public Supply	480		-106.58999	31.94888	
6	G0710177C	VALLEY BY-PRODUCTS INC	Public Supply	480		-106.58944	31.94888	
7	49-04-4G	Nick Abraham	Industrial	200	8/31/1972	-106.59408	31.94523	View
7	49-04-1R	Bill Naron	Irrigation	210	5/13/1973	-106.59434	31.94521	View
8	49-04-4	Loyd C Woolf	Domestic	180	1/10/1976	-106.5944	31.94567	View
9	49-12-5	Irene Barriga	Domestic	220	8/4/1998	-106.59376	31.94911	View
10	49-04-4	Don Sims	Domestic	240	2/24/1975	-106.59369	31.94964	View
11	49-04-493	Vinton Mobile Home	PUBLIC SUPPLY	245	1/1/1980	-106.59333	31.95	View
12	49-04-440	M. Hernandez,	IRRIGATION	170	1/1/1953	-106.59499	31.94833	View
13	49-04-4	Elisio Herrera	Domestic	145		-106.59265	31.95041	View
14	G0710071A	VINTON MOBILE HOME PARK	Public Supply	245	1/1/1980	-106.59095	31.9507	View
15	49-04-4	W.M. Stockton	Domestic	150	7/2/1976	-106.59518	31.94909	View
16	49-04-4	Mr. Tom Brown	Domestic	84	11/2/1972	-106.58723	31.94408	View
17	49-04-441	U. S. Geological	n/a	874	1/1/1953	-106.58583	31.94722	View
18	49-04-4	Mr. J.K Bowden	Domestic	103	9/10/1969	-106.59587	31.94874	View
19	49-04-449	Villa Alegre Estates	PUBLIC SUPPLY	424	4/25/1991	-106.58999	31.95166	View
19	G0710169A	VILLA ALEGRE ESTATES	Public Supply	420	4/25/1991	-106.58993	31.9517	View
20	49-04-436	M. Hernandez, V. M.	IRRIGATION	190		-106.59583	31.94361	View
21	49-04-498	EPWU	UNUSED	300	2/17/2003	-106.58527	31.94888	View
21	49-04-499	EPWU	UNUSED	660	2/17/2003	-106.58527	31.94888	View
22	49-04-459	Ann Powers	DOMESTIC	189		-106.59249	31.9525	View
23	G0710050B	HILLSIDE WATER WORKS	Public Supply	235	1/1/1954	-106.59199	31.9412	View
24	G0710050C	HILLSIDE WATER WORKS	Public Supply	221		-106.59153	31.94116	
25	49-04-487	Hillside Mobile Home	PUBLIC SUPPLY	235	1/1/1954	-106.59249	31.94083	View
26	49-04-1	Reynunio Lueero	Domestic	180	9/5/1973	-106.59401	31.95269	View
27	49-04-4	Arvil D Wright	Domestic	142	4/19/1977	-106.59845	31.94702	View
28	G0710189A	ZEBRA SHOW BAR	Public Supply	280	2/15/2006	-106.58346	31.94603	View
28	WIID161120	Dr. Manvel Hernandez	Domestic	280	2/15/2006	-106.58333	31.94611	View

1601 Rio Grande Suite 500 Austin, Texas 78701
PH 512.478.0059 FAX 512.478.1433 E-mail banks@banksinfo.com



Water Well ReportTM

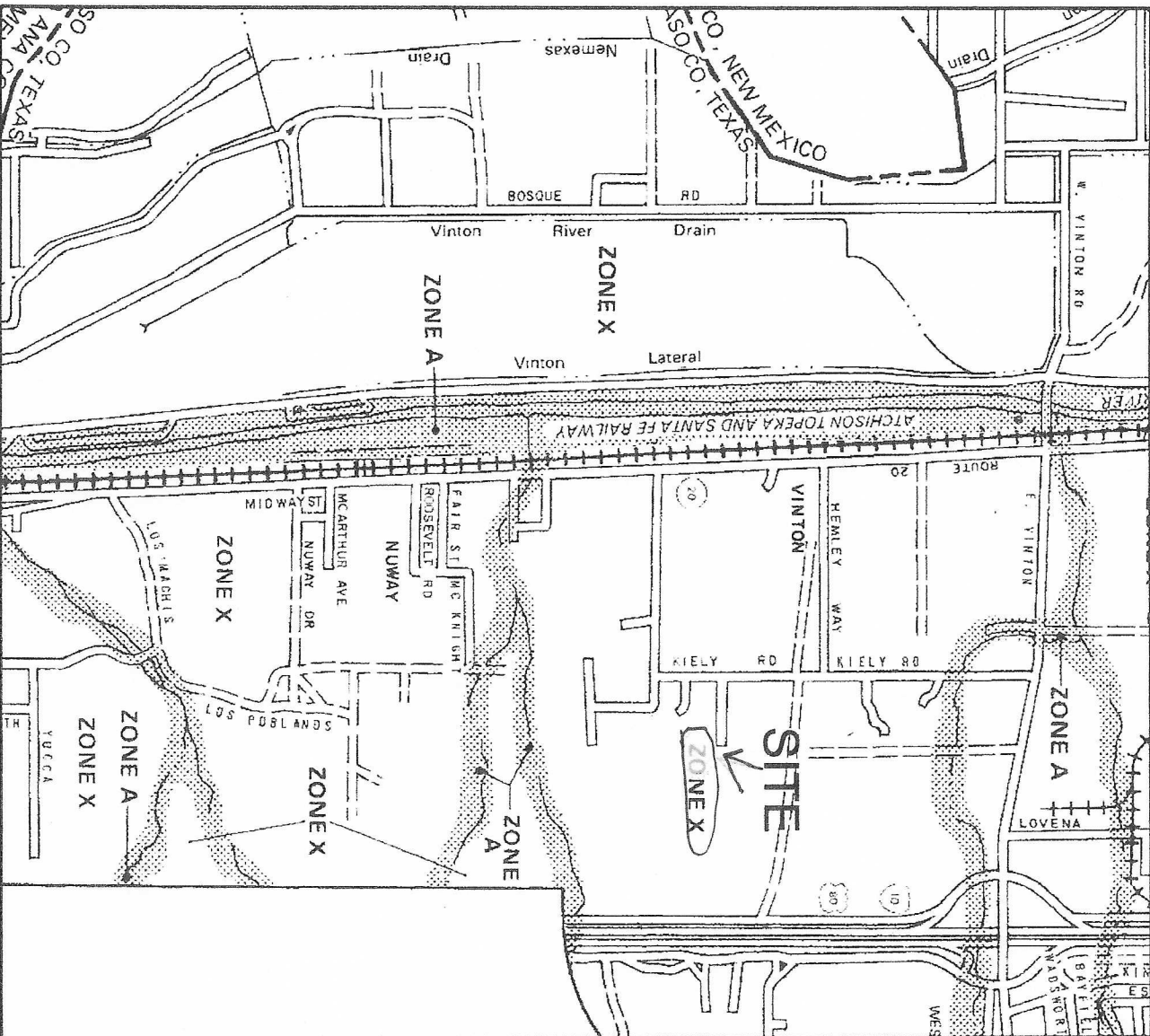
DETAILS

Map #	State ID	Owner of Well	Type of Well	Depth Drilled	Completion Date	Longitude	Latitude	Driller's Log
29	49-04-4	Eddy Howell	Domestic	211	2/10/1978	-106.59214	31.95357	View
30	49-04-4	Pete Schnieder	Domestic	198	7/10/1979	-106.59369	31.95341	View
31	49-04-439	Donald Kelly	IRRIGATION	135	1/1/1952	-106.59499	31.95305	View
32	49-04-506	McKee Construction Co.	n/a	224	1/11/1957	-106.58305	31.94555	View
33	49-04-4	Auador Quintina	Domestic	184	11/1/1978	-106.59344	31.9538	View

1601 Rio Grande Suite 500 Austin, Texas 78701
PH 512.478.0059 FAX 512.478.1433 E-mail banks@banksinfo.com

Attachment I

FEMA Map



APPROXIMATE SCALE

2000 0 2000 FEET

Zone X - Area determined to be outside of the 500-year flood plain.

NATIONAL FLOOD INSURANCE PROGRAM

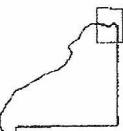
FIRM

FLOOD INSURANCE RATE MAP

**EL PASO COUNTY,
TEXAS
UNINCORPORATED AREAS**

PANEL 25 OF 375

(SEE MAP INDEX FOR PANELS NOT PRINTED)



PANEL LOCATION

COMMUNITY-PANEL NUMBER

480212 0025 B

RECEIVED
SEPTEMBER 4, 1991

MAR 03 2015

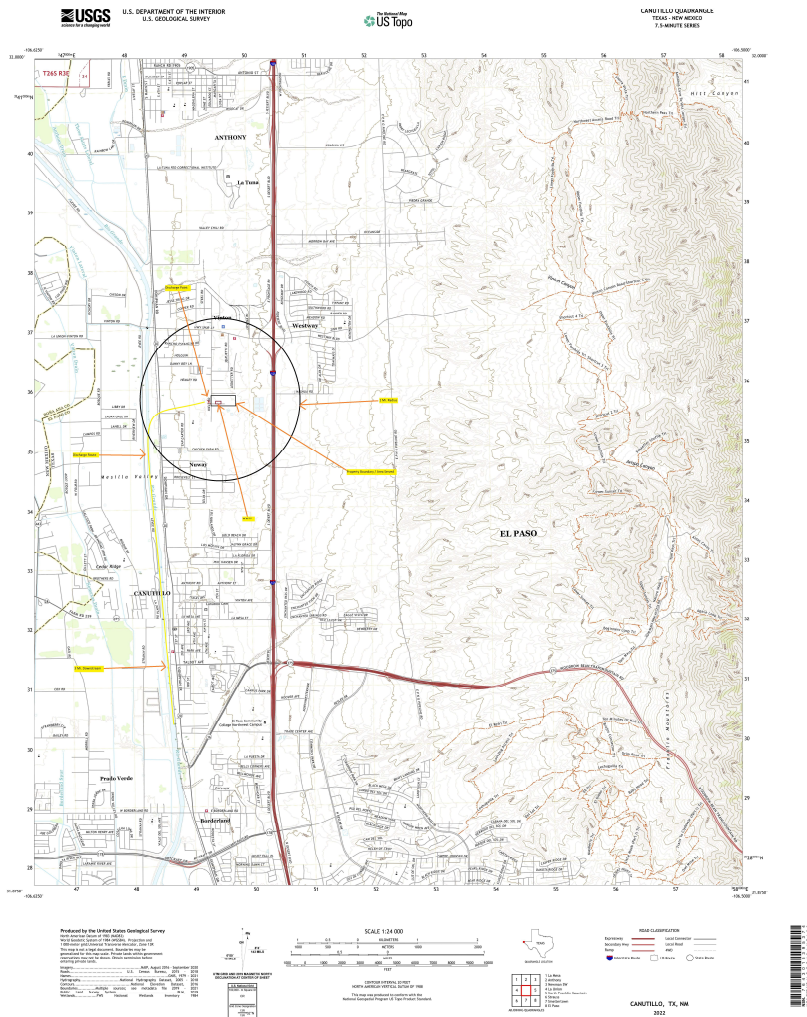
WATER QUALITY DIVISION
Federal Emergency Management Agency
Applications 1593m

This is an official copy of a portion of the above referenced flood map. It was extracted using FIRM On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov

Candice Calhoun

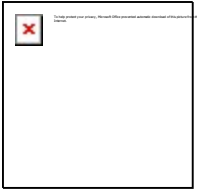
From: Stephanie Landsman <stephanie@landsmanenviro.com>
Sent: Sunday, August 17, 2025 7:55 AM
To: Candice Calhoun
Subject: Valley By Products, Inc. WQ0001243000 NOD Response
Attachments: 10400-2022.docx; Valley By Products Revised Application Pages.pdf

Attached is the Core Data Form and application pages for the phone number change. Also attached is an original copy of the topoquad with everything clearly marked. The phone number in the final paragraph of the NORI should also be changed to: 915-877-3131.



--
Stephanie Landsman
Wastewater Specialist
Landsman Environmental LLC
9597 Jones Road #962
Jersey Village, TX 77065

(281)-658-5899





TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
☐ New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
☒ Renewal (Core Data Form should be submitted with the renewal form)		☐ Other
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN 600502579		RN 100820042

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)						
☐ New Customer		☐ Update to Customer Information						
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)		☐ Change in Regulated Entity Ownership						
<i>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).</i>								
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John) <i>If new Customer, enter previous Customer below:</i>								
Valley By Products, Inc.								
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)					
0137689400	17427631613							
11. Type of Customer:	☐ Corporation	☐ Individual	Partnership: ☐ General ☐ Limited					
Government: ☐ City ☐ County ☐ Federal ☐ Local ☐ State ☐ Other	☐ Sole Proprietorship	☐ Other:						
12. Number of Employees		13. Independently Owned and Operated?						
☐ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher		☒ 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						
☐ Occupational Licensee		☒ Owner & Operator						
☐ Responsible Party		☐ VCP/BSA Applicant						
☐ Other:								
15. Mailing Address:	P.O. Box 628							
	City	Canutillo	State	TX	ZIP	79835	ZIP + 4	
16. Country Mailing Information (if outside USA)					17. E-Mail Address (if applicable)			
					njerome0714@gmail.com			
18. Telephone Number			19. Extension or Code		20. Fax Number (if applicable)			
(915) 877-3131					() -			

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected, a new permit application is also required.)	
☐ New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information	
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>	
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)	
Valley By Products, Inc.	

23. Street Address of the Regulated Entity: <i>(No PO Boxes)</i>	7740 Kiely Road, approximately 4,000 feet east-southeast of the intersection of State Highway 20 and Hemley Road						
	City	Vinton	State	TX	ZIP	79821	ZIP + 4
24. County	El Paso						

If no Street Address is provided, fields 25-28 are required.

25. Description to Physical Location:								
26. Nearest City					State			Nearest ZIP Code
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:	31.94614			28. Longitude (W) In Decimal:	-106.59009			
Degrees	Minutes	Seconds		Degrees	Minutes	Seconds		
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)			
2077			311613					
33. What is the Primary Business of this entity? <i>(Do not repeat the SIC or NAICS description.)</i>								
Wastewater Treatment								
34. Mailing Address:	P.O. Box 628							
	City	Canutillo	State	TX	ZIP	79835	ZIP + 4	
35. E-Mail Address:	njerome0714@gmail.com							
36. Telephone Number	37. Extension or Code		38. Fax Number (if applicable)					
(915) 877-3131			() -					

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

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☐ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
☐ Voluntary Cleanup	☒ Wastewater	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:
WQ0001243000				

SECTION IV: Preparer Information

40. Name:	Stephanie Landsman		41. Title:	Wastewater Specialist
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address	
(281) 658-5899		() -	stephanie@landsmanenviro.com	

SECTION V: Authorized Signature

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

Company:	Valley By Products, Inc.	Job Title:	President
Name (In Print):	Natalie Jerome	Phone:	(915) 877- 7179
Signature:		Date:	

Phone No: 915-877-3131

Email: njerome0714@gmail.com

Attachment: Click to enter text.

Item 6. Permit Contact Information (Instructions, Page 28)

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

a. Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-7179

Email: njerome0714@gmail.com

b. Prefix: Ms. Full Name (Last/First Name): Jerome, Virgie L.

Title: Vice President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-3131

Email: njerome0714@gmail.com

Attachment: Click to enter text.

Item 7. Billing Contact Information (Instructions, Page 28)

The permittee is responsible for paying the annual fee. The annual fee will be assessed for 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 (form TCEQ-20029).

Provide the complete mailing address where the annual fee invoice should be mailed and the name and phone number of the permittee's representative responsible for payment of the invoice.

Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-3131

Email: njerome0714@gmail.com

Item 8. DMR/MER Contact Information (Instructions, Page 28)

Provide the name and mailing address of the person delegated to receive and submit DMRs or MERs. **Note:** DMR data must be submitted through the NetDMR system. An electronic reporting account can be established once the facility has obtained the permit number.

Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-3131

Email: njerome0714@gmail.com

Item 9. Notice Information (Instructions, Pages 28)

a. Individual Publishing the Notices

Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-3131

Email: njerome0714@gmail.com

b. Method for Receiving Notice of Receipt and Intent to Obtain a Water Quality Permit Package (only for NORI, NAPD will be sent via regular mail)

☒ E-mail: njerome0714@gmail.com

☐ Fax: Click to enter text.

☐ Regular Mail (USPS)

Mailing Address: Click to enter text.

City/State/Zip Code: Click to enter text.

c. Contact in the Notice

Prefix: Ms. Full Name (Last/First Name): Jerome, Natalie

Title: President

Credential: Click to enter text.

Organization Name: Valley By Products, Inc.

Phone No: 915-877-3131

Email: njerome0714@gmail.com

d. Public Viewing Location Information

Note: If the facility or outfall is located in more than one county, provide a public viewing place for each county.

Public building name: EPCC Library Location within the building: Click to enter text.

Physical Address of Building: 6701 S. Desert Blvd

City: El Paso County: El Paso

e. Bilingual Notice Requirements

This information is required for new, major amendment, minor amendment or minor modification, and renewal applications.

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

Call the bilingual/ESL coordinator at the nearest elementary and middle schools and obtain the following information to determine if an alternative language notice(s) is required.

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

☒ Yes ☐ No

If no, publication of an alternative language notice is not required; skip to Item 8 (Regulated Entity and Permitted Site Information.)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No ☐ N/A

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

- f. Summary of Application in Plain Language Template – Complete and attach the Summary of Application in Plain Language Template (TCEQ Form 20972), also known as the plain language summary or PLS. Attachment: E
- g. Complete and attach one Public Involvement Plan (PIP) Form (TCEQ Form 20960) for each application for a new permit or major amendment. Attachment: N/A

Item 10. Regulated Entity and Permitted Site Information (Instructions Page 29)

- a. TCEQ issued Regulated Entity Number (RN), if available: RN100820042

Note: If your business site is part of a larger business site, a Regulated Entity Number (RN) may already be assigned for the larger site. Use the RN assigned for the larger site. Search the TCEQ's Central Registry to determine the RN or to see if the larger site may already be registered as a Regulated Entity. If the site is found, provide the assigned RN.

- b. Name of project or site (name known by the community where located): Valley By Products, Inc.

- c. Is the location address of the facility in the existing permit the same?

☒ Yes ☐ No ☐ N/A (new permit)

Note: If the facility is located in Bexar, Comal, Hays, Kinney, Medina, Travis, Uvalde, or Williamson County, additional information concerning protection of the Edwards Aquifer may be required.

- d. Owner of treatment facility:

Prefix: Click to enter text. Full Name (Last/First Name): Click to enter text.

or Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-3131

Email: njerome0714@gmail.com

e. Ownership of facility: ☐ Public ☒ Private ☐ Both ☐ Federal

f. Owner of land where treatment facility is or will be: [Click to enter text.](#)

Prefix: [Click to enter text.](#) Full Name (Last/First Name): [Click to enter text.](#)

or Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-3131

Email: njerome0714@gmail.com

Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years (In some cases, a lease may not suffice - see instructions). Attachment: [Click to enter text.](#)

g. Owner of effluent TLAP disposal site (if applicable): Prefix: [Click to enter text.](#) Full Name (Last/First Name): [Click to enter text.](#)

or Organization Name: Valley By Products, Inc.

Mailing Address: P.O. Box 628

City/State/Zip: Canutillo, TX 79835

Phone No: 915-877-3131

Email: njerome0714@gmail.com

Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years. Attachment: [Click to enter text.](#)

h. Owner of sewage sludge disposal site (if applicable):

Prefix: N/A

Full Name (Last/First Name): [Click to enter text.](#)

or Organization Name: [Click to enter text.](#)

Mailing Address: [Click to enter text.](#)

City/State/Zip: [Click to enter text.](#)

Phone No: [Click to enter text.](#) Email: [Click to enter text.](#)

Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years. Attachment: [Click to enter text.](#)

Item 11. TDPES Discharge/TLAP Disposal Information (Instructions, Page 31)

a. Is the facility located on or does the treated effluent cross Native American Land?

☐ Yes ☒ No

b. Attach an original full size USGS Topographic Map (or an 8.5"×11" reproduced portion for renewal or amendment applications) with all required information. Check the box next to each item below to confirm it has been included on the map.

☒ One-mile radius

☐ Three-miles downstream information

☒ Applicant's property boundaries

☒ Treatment facility boundaries

☒ Labeled point(s) of discharge

☐ Highlighted discharge route(s)

☒ Effluent disposal site boundaries

☒ All wastewater ponds

☐ Sewage sludge disposal site

☐ New and future construction

Attachment: [Click to enter text.](#)

Candice Calhoun

From: Stephanie Landsman <stephanie@landsmanenviro.com>
Sent: Monday, August 18, 2025 3:29 PM
To: Candice Calhoun
Subject: Re: Valley By Products, Inc. WQ0001243000 NOD Response
Attachments: ValleyTopo.pdf

On Mon, Aug 18, 2025 at 8:13 AM Stephanie Landsman <stephanie@landsmanenviro.com> wrote:
I'll get that done today.

On Mon, Aug 18, 2025 at 8:04 AM Candice Calhoun <Candice.Calhoun@tceq.texas.gov> wrote:

Stephanie,

Thank you, the response for items 1 is sufficient. I have updated the last 4 digits of the phone number listed in the last paragraph of the NORI. Also, please provide the USGS map in a PDF format.

Regards,

Candice Courville

License & Permit Specialist



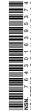
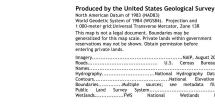
ARP Team | Water Quality Division

Texas Commission on Environmental
Quality

512-239-4312

candice.calhoun@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at
www.tceq.texas.gov/customersurvey



Erwin Madrid

From: Erwin Madrid
Sent: Tuesday, September 2, 2025 2:04 PM
To: Stephanie Landsman
Cc: Candice Calhoun; njerome0714@gmail.com
Subject: Application for Permit No. WQ0001243000 – Notice of Deficiency 30-Day Will Return Letter
Attachments: WQ0001243000_Will Return Ltr.pdf
Importance: High

Dear applicant,

The attached Notice of Deficiency 30-Day Will Return Letter was mailed on **September 2, 2025**, requesting additional information needed to declare the application administratively complete. Please mail an original and two copies (with a cover letter) of the complete response by **October 2, 2025**.

Regards,

Erwin Madrid
Team Lead
ARP Team | Water Quality Division
512-239-2191
Texas Commission on Environmental Quality



Please consider whether it is necessary to print this e-mail.

Candice Calhoun

From: Stephanie Landsman <stephanie@landsmanenviro.com>
Sent: Thursday, September 4, 2025 4:22 AM
To: Candice Calhoun
Subject: Re: Valley By Products NOD WQ0001243000
Attachments: Valley By Products Spanish WQ TLAP renew.docx

NORI is attached.

On Tue, Sep 2, 2025 at 2:21 PM Candice Calhoun <Candice.Calhoun@tceq.texas.gov> wrote:

Good afternoon, Stephanie,

Thank you for reaching out. The only thing that I have not received is the Translated NORI. Everything else on the NOD has been addressed.

Please let me know if you have any questions.

Regards,

Candice Courville

License & Permit Specialist

ARP Team | Water Quality Division

Texas Commission on Environmental
Quality

512-239-4312

candice.calhoun@tceq.texas.gov



How is our customer service? Fill out our online customer satisfaction survey at www.tceq.texas.gov/customersurvey

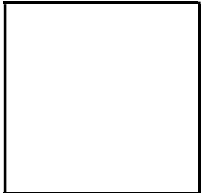
From: Stephanie Landsman <stephanie@landsmanenviro.com>
Sent: Tuesday, September 2, 2025 2:17 PM
To: Candice Calhoun <Candice.Calhoun@tceq.texas.gov>; Natalie Jerome <njerome0714@gmail.com>
Subject: Valley By Products NOD

I thought this had been answered except for the pollutant analysis which they are having done. Could you please help me by telling me what I have not submitted?

Thanks.

--

Stephanie Landsman
Wastewater Specialist
Landsman Environmental LLC
9597 Jones Road #962
Jersey Village, TX 77065
(281)-658-5899



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Stephanie Landsman
Wastewater Specialist
Landsman Environmental LLC
9597 Jones Road #962
Jersey Village, TX 77065

(281)-658-5899

