



# **Administrative Package Cover Page**

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1. Summary of application (in plain language)
2. Application Materials



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

# SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

## Summary of Application (in plain language) 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 of your facility and application as required by Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H. You may modify the template as necessary to accurately describe your 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 you 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. After filling in the information for your facility delete these instructions.

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 INDUSTRIAL 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.*

Monument Chemical Port Arthur, LLC (CN604105007) operates Monument Chemical Port Arthur, LLC (RN100640283), an organic chemical vacuum distillation facility. The facility is located at 2450 South Gulfway Drive, in Port Arthur, Jefferson County, Texas 77640. Monument Chemical Port Arthur, LLC has applied to the Texas Commission on Environmental Quality (TCEQ) for a minor amendment of Texas Pollutant Discharge Elimination System (TPDES) Permit Number WQ0003544000, which authorizes the discharge of treated process wastewater, process area stormwater, utility wastewater (non-contact cooling water, boiler blowdown, and firewater test waters), and stormwater (including stormwater from diked tankfarm areas) at a daily average flow not to exceed 100,000 gallons per day via Outfall 001. The permit application is available for viewing and copying at the Port Arthur Public Library, 4615 9th Avenue, Port Arthur, TX. 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

exact location, refer to the application. <https://arcg.is/0iKS9v>. This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain biochemical oxygen demand (BOD5), organic carbon, suspended solids, and various organics from manufacturing operations that are associated with 40 CFR 414, Subpart G. Monument Chemical Port Arthur, LLC generates byproduct water, washwaters, contact and non-contact stormwater, non-contact cooling water, boiler blowdown, and firewater test waters which are treated by *gravity separation, solids filtration, reduction of organic chemicals, using microbes with aeration, and activated carbon polishing, if necessary. Process wastewater is discharged in batches if it meets effluent limitations, otherwise it is commercially disposed of by a licensed contractor. Non-contact water is not treated prior to discharge. Process and non-contact waters are commingled at a junction sump and monitoring samples are taken prior to discharge via Outfall 001.*

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

### AGUAS RESIDUALES INDUSTRIALES /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.*

Monument Chemical Port Arthur, LLC (CN604105007) opera Monument Chemical Port Arthur, LLC RN100640283, una instalación de destilación al vacío de productos químicos orgánicos. La instalación está ubicada en 2450 South Gulfway Drive, en Port Arthur, en Port Arthur, Condado de Jefferson, Texas 77640. Monument Chemical Port Arthur, LLC ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) una modificación menor del Permiso Número del Sistema de eliminación de descargas de contaminantes de Texas (TPDES) Número de permiso WQ0003544000, que autoriza la descarga de aguas residuales de proceso tratadas, aguas pluviales del área de proceso, aguas residuales de servicios públicos (agua de enfriamiento sin contacto, purga de calderas y aguas de prueba de agua contra incendios) y aguas pluviales (incluidas las aguas pluviales de áreas de tanques con diques) a un flujo promedio diario que no exceda los 100,000 galones por día a través del Desagüe 001. La solicitud de permiso está disponible para ver y copiar en la Biblioteca Pública de Port Arthur, 4615 9th Avenue, Port Arthur, TX. Este enlace a un mapa electrónico de la ubicación general del sitio o instalación se proporciona como cortesía pública y no como parte de la solicitud o aviso. Para conocer la ubicación exacta, consulte la aplicación. <https://arcg.is/OiKS9v>. Este permiso no autorizará una descarga de contaminantes en el agua en el estado.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno (DBO5), carbono orgánico, sólidos suspendidos y varios compuestos orgánicos de las operaciones de fabricación que están asociadas con 40 CFR 414, Subparte G. Monument Chemical Port Arthur, LLC genera subproductos de agua, aguas de lavado, aguas pluviales con y sin contacto, agua de refrigeración sin contacto, purga de calderas y aguas de prueba de agua contra incendios que se están tratado por separación por gravedad, filtración de sólidos, reducción de productos químicos orgánicos, uso de microbios con aireación y pulido con carbón activado, si es necesario. Las aguas residuales del proceso se descargan en lotes si cumplen con los límites de efluentes; de lo contrario, un contratista autorizado las elimina comercialmente. El agua sin contacto no se trata antes de la descarga. Las aguas de proceso y sin contacto se mezclan en un sumidero de unión y se toman muestras de control antes de la descarga a través del Emisario 001.



## INSTRUCTIONS

1. Enter the name of applicant in this section. The applicant name should match the name associated with the customer number.
2. Enter the Customer Number in this section. Each Individual or Organization is issued a unique 11-digit identification number called a CN (e.g. CN123456789).
3. Choose “operates” in this section for existing facility applications or choose “proposes to operate” for new facility applications.
4. Enter the name of the facility in this section. The facility name should match the name associated with the regulated entity number.
5. Enter the Regulated Entity number in this section. Each site location is issued a unique 11-digit identification number called an RN (e.g. RN123456789).
6. Choose the appropriate article (a or an) to complete the sentence.
7. Enter a description of the facility in this section. For example: steam electric generating facility, nitrogenous fertilizer manufacturing facility, etc.
8. Choose “is” for an existing facility or “will be” for a new facility.
9. Enter the location of the facility in this section.
10. Enter the City nearest the facility in this section.
11. Enter the County nearest the facility in this section.
12. Enter the zip code for the facility address in this section.
13. Enter a summary of the application request in this section. For example: renewal to discharge 25,000 gallons per day of treated domestic wastewater, new application to discharge process wastewater and stormwater on an intermittent and flow-variable basis, or major amendment to reduce monitoring frequency for pH, etc. If more than one outfall is included in the application, provide applicable information for each individual outfall.
14. List all pollutants expected in the discharge from this facility in this section. If applicable, refer to the pollutants from any federal numeric effluent limitations that apply to your facility.
15. Enter the discharge types from your facility in this section (e.g., stormwater, process wastewater, once through cooling water, etc.)
16. Choose the appropriate verb tense to complete the sentence.
17. Enter a description of the wastewater treatment used at your facility. Include a description of each process, starting with initial treatment and finishing with the outfall/point of disposal. Use additional lines for individual discharge types if necessary.

Questions or comments concerning this form may be directed to the Water Quality Division's Application Review and Processing Team by email at [WQ-ARPTeam@tceq.texas.gov](mailto:WQ-ARPTeam@tceq.texas.gov) or by phone at (512) 239-4671.

### **Example 1: Industrial Wastewater TPDES Application (ENGLISH)**

*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 are not federal enforceable representations of the permit application.*

ABC Corporation (CN600000000) operates the Starr Power Station (RN10000000000), a two-unit gas-fired electric generating facility. Unit 1 has a generating capacity of 393 megawatts (MWs) and Unit 2 has a generating capacity of 528 MWs. The facility is located at 1356 Starr Street, near the City of Austin, Travis County, Texas 78753.

This application is for a renewal to discharge 870,000,000 gallons per day of once through cooling water, auxiliary cooling water, and also authorizes the following waste streams monitored inside the facility (internal outfalls) before it is mixed with the other wastewaters authorized for discharge via main Outfall 001, referred to as “previously monitored effluents” (low-volume wastewater, metal-cleaning waste, and stormwater (from diked oil storage area yards and storm drains)) via Outfall 001. Low-volume waste sources, metal-cleaning waste, and stormwater drains on a continuous and flow-variable basis via internal Outfall 101.

The discharge of once through cooling water via Outfall 001 and low-volume waste and metal-cleaning waste via Outfall 101 from this facility is subject to federal effluent limitation guidelines at 40 CFR Part 423. The pollutants expected from these discharges based on 40 CFR Part 423 are: free available chlorine, total residual chlorine, total suspended solids, oil and grease, total iron, total copper, and pH. Temperature is also expected from these discharges. Additional potential pollutants are included in the Industrial Wastewater Application Technical Report, Worksheet 2.0.

Cooling water and boiler make-up water are supplied by Lake Starr Reservoir. The City of Austin municipal water plant (CN600000000, PWS 00000) supplies the facility’s potable water and serves as an alternate source of boiler make-up water. Water from the Lake Starr Reservoir is withdrawn at the intake structure and treated with sodium hypochlorite to prevent biofouling and sodium bromide as a chlorine enhancer to improve efficacy and then passed through condensers and auxiliary equipment on a once-through basis to cool equipment and condense exhaust steam.

Low-volume wastewater from blowdown of boiler Units 1 and 2 and metal-cleaning wastes receive no treatment prior to discharge via Outfall 101. Plant floor and equipment drains and stormwater runoff from diked oil storage areas, yards, and storm drains are routed through an oil and water separator prior to discharge via Outfall 101. Domestic wastewater, blowdown, and backwash water from the service water filter, clarifier, and sand filter are routed to the Starr Creek Domestic Sewage Treatment Plant, TPDES Permit No. WQ0010000001, for treatment and disposal. Metal-cleaning waste from equipment cleaning is generally disposed of off-site.

## **Example 2: Domestic Wastewater TPDES Renewal application**

*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 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.*

The City of Texas (CN000000000) operates the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the complete mix mode. The facility is located at 123 Texas Street, near the City of More Texas, Texas County, Texas 71234.

This application is for a renewal to discharge at an annual average flow of 1,200,000 gallons per day of treated domestic wastewater via Outfalls 001 and 002.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, a grit chamber, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.

## **Example 3: Domestic Wastewater TPDES New Application**

*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 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.*

The City of Texas (CN000000000) proposes to operate the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the extended aeration mode. The facility will be located at 123 Texas Street, in the City of More Texas, Texas County, Texas 71234.

This application is for a new application to discharge at a daily average flow of 200,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include a bar screen, a grit chamber, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.

## **Example 4: Domestic Wastewater TLAP Renewal application**

*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 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations*

*of the permit application.*

The City of Texas (CN000000000) operates the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the complete mix mode. The facility is located at 123 Texas Street, near the City of More Texas, Texas County, Texas 71234.

This application is for a renewal to dispose a daily average flow not to exceed 76,500 gallons per day of treated domestic wastewater via public access subsurface drip irrigation system with a minimum area of 32 acres. This permit will not authorize a discharge of pollutants into water in the state.

Land application of domestic wastewater from the facility are expected to contain five-day biochemical oxygen demand (BOD<sub>5</sub>), total suspended solids (TSS), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, an equalization basin, an aeration basin, a final clarifier, an aerobic sludge digester, tertiary filters, and a chlorine contact chamber. In addition, the facility includes a temporary storage that equals to at least three days of the daily average flow.



Monument Chemical Port Arthur, LLC.

PO Box 1421  
Port Arthur, TX 77641

Via Express/Overnight Mail: Fedex 8813 7544 8615

Executive Director  
Applications Review and Processing Team, MC-148  
Texas Commission on Environmental Quality  
12100 Park 35 Circle  
Austin, Texas 78753

Reference: Minor Amendment Application for TPDES Permit # WQ0003544000

Dear Sir/Madam:

Monument Chemical Port Arthur, LLC (formerly known as KMTEx) is requesting a minor amendment clarify and correct the language for permit condition related to site's flow measurement device and frequency as TCEQ had agreed in February 2020 (attachment E). However, inadvertently it was left out in 2024 renewed permit. Also please note that this is a minor amendment as discussed with Mr. Matthew Kennington and as per minor amendments instruction (page 49, item #13) only parts of the application which is applicable to this minor amendment request are included in this application. Therefore, the following are included in the attached application:

- A copy of Fee Voucher
- Updated and duly signed Administrative Report 1.0,
- Updated/duly signed core data form
- Updated page 14 (of the previous Technical Report), item 13 reflecting/describing minor amendment has included.

There is no change in other parts of the technical report which was submitted in the recent renewal in February 2023, so it is attached only as reference only.

If you have any questions, please contact me on 281-507-3223 or via email at [ndave@monumentchemical.com](mailto:ndave@monumentchemical.com)

Sincerely,

*NSDave*  
Narayan Dave  
Global Environmental Leader

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

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

**Transaction Information**

**Trace Number:** 582EA000666599  
**Date:** 05/05/2025 12:27 PM  
**Payment Method:** CC - Authorization 0000044693  
**ePay Actor:** TAYLOR LOUGH  
**Actor Email:** tlough@monumentchemical.com  
**IP:** 170.85.100.175  
**TCEQ Amount:** \$150.00  
**Texas.gov Price:** \$153.63\*

\* 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.

**Payment Contact Information**

**Name:** IAN QUINN  
**Company:** MONUMENT CHEMICAL PORT ARTHUR LLC  
**Address:** 2450 S GULFWAY DRIVE, PORT ARTHUR, TX 77640  
**Phone:** 409-984-1402

**Cart Items**

Click on the voucher number to see the voucher details.

Voucher	Fee Description	AR Number	Amount
765204	WW PERMIT - MINOR FACILITY SUBJECT TO 40 CFR 400-471 - MINOR AMENDMENT		\$100.00
765205	30 TAC 305.53B WQ NOTIFICATION FEE		\$50.00
<b>TCEQ Amount:</b>			<b>\$150.00</b>

[ePay Again](#)[Exit ePay](#)

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





TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## INDUSTRIAL WASTEWATER PERMIT APPLICATION CHECKLIST

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

APPLICANT NAME: Monument Chemical Port Arthur, LLC

PERMIT NUMBER (If new, leave blank): WQ000 3544000

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

	Y	N		Y	N
Administrative Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 8.0	<input type="checkbox"/>	<input type="checkbox"/>
Administrative Report 1.1	<input type="checkbox"/>	<input type="checkbox"/>	Worksheet 9.0	<input type="checkbox"/>	<input type="checkbox"/>
SPIF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 10.0	<input type="checkbox"/>	<input type="checkbox"/>
Core Data Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.0	<input type="checkbox"/>	<input type="checkbox"/>
Public Involvement Plan Form	<input type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.1	<input type="checkbox"/>	<input type="checkbox"/>
Plain Language Summary	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.2	<input type="checkbox"/>	<input type="checkbox"/>
Technical Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.3	<input type="checkbox"/>	<input type="checkbox"/>
Worksheet 1.0	<input type="checkbox"/>	<input type="checkbox"/>	Original USGS Map	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 2.0	<input type="checkbox"/>	<input type="checkbox"/>	Affected Landowners Map	<input type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.0	<input type="checkbox"/>	<input type="checkbox"/>	Landowner Disk or Labels	<input type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.1	<input type="checkbox"/>	<input type="checkbox"/>	Flow Diagram	<input type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.2	<input type="checkbox"/>	<input type="checkbox"/>	Site Drawing	<input type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.3	<input type="checkbox"/>	<input type="checkbox"/>	Original Photographs	<input type="checkbox"/>	<input type="checkbox"/>
Worksheet 4.0	<input type="checkbox"/>	<input type="checkbox"/>	Design Calculations	<input type="checkbox"/>	<input type="checkbox"/>
Worksheet 4.1	<input type="checkbox"/>	<input type="checkbox"/>	Solids Management Plan	<input type="checkbox"/>	<input type="checkbox"/>
Worksheet 5.0	<input type="checkbox"/>	<input type="checkbox"/>	Water Balance	<input type="checkbox"/>	<input type="checkbox"/>
Worksheet 6.0	<input type="checkbox"/>	<input type="checkbox"/>			
Worksheet 7.0	<input type="checkbox"/>	<input type="checkbox"/>			

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 the Oil and Gas Exploration and Production Administrative Report ([TCEQ Form-20893 and 20893-inst<sup>1</sup>](#)).

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

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

Applicant Name: Monument Chemical Port Arthur, LLC

Permit No.: WQ0003544000

EPA ID No.: TX0116360

Expiration Date: January 5, 2029

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

☒ Industrial Wastewater (wastewater and stormwater)

☐ Industrial Stormwater (stormwater 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: Clarifying permit language to accurately reflect site's flow measuring device, sample type, and sample frequency to which TCEQ agreed in February 2020 (Attachment E); however, it was not reflected in the 2024 permit renewal. Additionally, including a provision to account for high tide conditions and revising the description of rainfall data collection to better align with the site's stormwater permit.

<sup>1</sup> [https://www.tceq.texas.gov/publications/search\\_forms.html](https://www.tceq.texas.gov/publications/search_forms.html)



For TCEQ Use Only

Segment Number \_\_\_\_\_ County \_\_\_\_\_

Expiration Date \_\_\_\_\_ Region \_\_\_\_\_

Permit Number \_\_\_\_\_

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)	<input type="checkbox"/> \$350	<input type="checkbox"/> \$350	<input type="checkbox"/> \$315	<input type="checkbox"/> \$150
Minor facility subject to EPA categorical effluent guidelines (40 CFR Parts 400-471)	<input type="checkbox"/> \$1,250	<input type="checkbox"/> \$1,250	<input type="checkbox"/> \$1,215	<input checked="" type="checkbox"/> \$150
Major facility	N/A <sup>2</sup>	<input type="checkbox"/> \$2,050	<input type="checkbox"/> \$2,015	<input type="checkbox"/> \$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: 765204 and 765205

Copy of voucher attachment: See Attached

## Item 2. Applicant Information (Instructions, Pages 26)

a. Customer Number, if applicant is an existing customer: CN604105007

**Note:** Locate the customer number using the [TCEQ's Central Registry Customer Search](#)<sup>3</sup>.

b. Legal name of the entity (applicant) applying for this permit: Monument Chemical Port Arthur, LLC

**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: Mr. Full Name (Last/First Name): Griffith/Kurt

Title: Director of Operations

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

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

<sup>2</sup> All facilities are designated as minors until formally classified as a major by EPA.

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

☒ Yes ☐ No

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 one Core Data Form (TCEQ Form 10400) for each customer (applicant and co-applicant(s)) and include as an attachment. If the customer type selected on the Core Data Form is Individual, complete Attachment 1 of the Administrative Report. Attachment: Attachment A

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

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

a. ☒ Administrative Contact . ☒ Technical Contact

Prefix: Mr. Full Name (Last/First Name): Dave/Narayan

Title: Global Environmental Leader

Credential: Click to enter text.

Organization Name: Monument Chemical Port Arthur, LLC

Mailing Address: P.O Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (832)376-2046

Email: ndave@monumentchemical.com

b. ☒ Administrative Contact ☐ Technical Contact

Prefix: Ms. Full Name (Last/First Name): Lough/Taylor

Title: Site Environmental Specialist

Credential: Click to enter text.



Organization Name: Monument Chemical Port Arthur, LLC

Mailing Address: P.O Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (409)984-1425

Email: Tlough@monumentchemical.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: Mr. Full Name (Last/First Name): Dave/Narayan

Title: Global Environmental Leader

Credential: Click to enter text.

Organization Name: Monument Chemical Port Arthur, LLC

Mailing Address: P.O Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (832)376-2046

Email: ndave@monumentchemical.com

b. Prefix: Ms. Full Name (Last/First Name): Lough/Taylor

Title: Site Environmental Specialist

Credential: Click to enter text.

Organization Name: Monument Chemical Port Arthur, LLC

Mailing Address: P.O Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (409)984-1425

Email: Tlough@monumentchemical.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: Mr. Full Name (Last/First Name): Quinn/Ian

Title: Site Leader

Credential: Click to enter text.

Organization Name: Monument Chemical Port Arthur, LLC

Mailing Address: P.O Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (832)376-2046

Email: Iquinn@monumentchemical.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): Lough/Taylor

Title: Site Environmental Specialist

Credential: Click to enter text.

Organization Name: Monument Chemical Port Arthur, LLC

Mailing Address: P.O Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (409)984-1425

Email: Tlough@monumentchemical.com

## Item 9. Notice Information (Instructions, Pages 28)

### a. Individual Publishing the Notices

Prefix: Mr. Full Name (Last/First Name): Dave/Narayan

Title: Global Environmental Leader

Credential: Click to enter text.

Organization Name: Monument Chemical Port Arthur, LLC

Mailing Address: P.O Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (832) 376-2046

Email: ndave@monumentchemical.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: ndave@monumentchemical.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: Mr. Full Name (Last/First Name): Dave/Narayan

Title: Global Environmental Leader

Credential: Click to enter text.

Organization Name: Monument Chemical Port Arthur, LLC

Phone No: (832) 376-2046

Email: ndave@monumentchemical.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: City of Port Arthur Public Library Location within the building: Foyer/Entrance

Physical Address of Building: 4615 9th Avenue

City: Port Arthur County: Jefferson

### 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. Plain Language Summary Template – Complete the Plain Language Summary (TCEQ Form 20972) and include as an attachment. Attachment: Attachment B
- g. Complete one Public Involvement Plan (PIP) Form (TCEQ Form 20960) for each application for a new permit or major amendment and include as an attachment. Attachment: N/A

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

- a. TCEQ issued Regulated Entity Number (RN), if available: RN100640283  
**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 (the name known by the community where located): Monument Chemical Port Arthur, LLC
- 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: Monument Chemical Port Arthur, LLC  
 Mailing Address: P.O Box 1421 City/State/Zip: Port Arthur/TX/77641  
 Phone No: (409) 994-4200 Email: Click to enter text.

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: [Monument Chemical Port Arthur, LLC](#)

Mailing Address: [P.O. Box 1421](#)

City/State/Zip: [Port Arthur/TX/77641](#)

Phone No: [\(409\) 994-4200](#)

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 (In some cases, a lease may not suffice - see instructions). Attachment: [Click to enter text.](#)

g. Owner of effluent TLAP disposal site (if applicable): [Click to enter text.](#)

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

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

Prefix: [Click to enter text.](#) 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. TD PES 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: [Attachment C](#)



- 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): [Port Arthur](#)
- g. County in which the outfalls(s) is/are located: [Jefferson](#)
- 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: [Click to enter text.](#)
- k. County in which the disposal site is located: [Click to enter text.](#)
- 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: [Click to enter text.](#)



## 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: WQ0003544000

Applicant Name: Monument Chemical Port Arthur, LLC

Certification: I, Kurt Griffith, 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): Kurt Griffith

Signatory title: Director of Operations

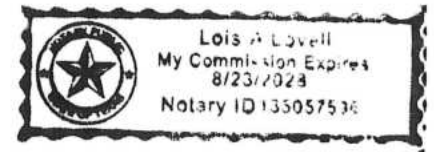
Signature: KC Griffith  
(Use blue ink)

Date: 5-13-2025

Subscribed and Sworn to before me by the said Kurt Griffith  
on this 13 day of May, 20 25.  
My commission expires on the 23 day of August, 20 28.

Lois A. Lovell  
Notary Public

[SEAL]



Harris  
County, Texas

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



# INDUSTRIAL WASTEWATER PERMIT APPLICATION

## SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

This form applies to TPDES permit applications only. Complete and attach the Supplemental Permit information Form (SPIF) (TCEQ Form 20971).

**Attachment:** Attachment D

## INDUSTRIAL WASTEWATER PERMIT APPLICATION CHECKLIST OF COMMON DEFICIENCIES

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

- ☒ Core Data Form (TCEQ Form No. 10400)  
*(Required for all applications types. Must be completed in its entirety and signed.  
Note: Form may be signed by applicant representative.)*
- ☒ Correct and Current Industrial Wastewater Permit Application Forms  
*(TCEQ Form Nos. 10055 and 10411. Version dated 5/10/2019 or later.)*
- ☐ Water Quality Permit Payment Submittal Form (Page 14)  
*(Original payment sent to TCEQ Revenue Section. See instructions for mailing address.)*
- ☒ 7.5 Minute USGS Quadrangle Topographic Map Attached  
*(Full-size map if seeking "New" permit.  
8 ½ x 11 acceptable for Renewals and Amendments.)*
- ☒ N/A ☐ Current/Non-Expired, Executed Lease Agreement or Easement Attached
- ☒ N/A ☐ Landowners Map  
*(See instructions for landowner requirements.)*

### Things to Know:

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

- ☒ N/A ☐ Landowners Cross Reference List  
*(See instructions for landowner requirements.)*
- ☒ N/A ☐ Landowners Labels or CD-RW attached  
*(See instructions for landowner requirements.)*
- ☐ Original signature per 30 TAC § 305.44 – Blue Ink Preferred  
*(If signature page is not signed by an elected official or principle executive officer,*

*a copy of signature authority/delegation letter must be attached.)*

☒ Plain Language Summary

## Technical Report



# TECHNICAL REPORT 1.0

## INDUSTRIAL

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, refer to the [Instructions for Completing the Industrial Wastewater Permit Application](#)<sup>1</sup> available on the TCEQ website.

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.

### 1. FACILITY/SITE INFORMATION (Instructions, Pages 39-40)

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

Monument Chemical Port Arthur, LLC provides toll processing of specialty and nutritional compounds, vacuum distillation and recovery of fluids including petrochemical, specialty chemicals, oleochemicals, agricultural chemicals and food grade chemicals. Primarily, organic chemical feedstocks are received into tankage from barge, tank truck and/or railcar; processed in distillation columns to meet specifications; and loaded out into barge, tank truck, or rail car.

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

Boiler blowdown; non-contact cooling tower water; Stormwater (contact and non-contact) primarily from diked tank farm areas; Process wastewater generated primarily from rinsing equipment (e.g. columns, vessels, piping) after completing a production campaign.

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<sup>1</sup> [https://www.tceq.texas.gov/permitting/wastewater/industrial/TPDES\\_industrial\\_wastewater\\_steps.html](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
Fatty Acids	Component separation only	High-purity acids & alcohols
Amines	Component separation only	High-purity amines
Glycols	Component separation only	High-purity glycols
Solvents, organic	Component separation only	High-purity solvents
Oils	To	Dibasic esters
Amines, Organic Acids	To	Amides
Diene, Alkene	To	Cyclic Hydrocarbons

**Attachment:** 


- 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:**

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

☐ Yes ☒ No

If **yes**, provide background discussion: 

- 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: Jefferson County Engineer & FEMA Flood Insurance Rate Map No. 485499-0045E Panel 45

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: N/A


**Attachment:** 

- 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

- 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: 

If **no**, provide an approximate date of application submittal to the USACE: 



## 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.

Wastewater collected at Monument Chemical Port Arthur is stored in diked areas and one or more onsite storage tanks. The wastewater varies, but usual contaminants are C1-C10 alcohols/acids, oil & grease, BOD and COD. Wastewater quantity varies, depending on rainfall and maintenance activity (i.e., tank cleaning), but is usually between 7-12 MM gals. /yr. The wastewater is commercially disposed by a licensed contractor or discharged untreated when it meets criteria. Treatment, if necessary, consists of gravity separation, solids filtration, and activated carbon polishing. Process wastewater may also be hauled off-site as co-product to a third party. Typical boiler and cooling tower treatment chemicals are used to treat the water used in the boiler and cooling tower processes.

- 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:** E

## 3. IMPOUNDMENTS (Instructions, Pages 40-42)

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:

**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)				
Associated Outfall Number				
Liner Type (C) (I) (S) or (A)				
Alt. Liner Attachment Reference				
Leak Detection System, Y/N				
Groundwater Monitoring Wells, Y/N				
Groundwater Monitoring Data Attachment				
Pond Bottom Located Above The Seasonal High-Water Table, Y/N				
Length (ft)				
Width (ft)				
Max Depth From Water Surface (ft), Not Including Freeboard				
Freeboard (ft)				
Surface Area (acres)				
Storage Capacity (gallons)				
40 CFR Part 257, Subpart D, Y/N				
Date of Construction				

**Impoundment Information**

Parameter	Pond #	Pond #	Pond #	Pond #
Use Designation: (T) (D) (C) or (E)				
Associated Outfall Number				
Liner Type (C) (I) (S) or (A)				
Alt. Liner Attachment Reference				
Leak Detection System, Y/N				
Groundwater Monitoring Wells, Y/N				
Groundwater Monitoring Data Attachment				
Pond Bottom Located Above The Seasonal High-Water Table, Y/N				
Length (ft)				
Width (ft)				
Max Depth From Water Surface (ft), not including freeboard				
Freeboard (ft)				
Surface Area (acres)				
Storage Capacity (gallons)				
40 CFR Part 257, Subpart D, Y/N				
Date of Construction				

**Attachment:** N/A

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**.

i. Liner data

☐ Yes      ☐ No      ☐ Not yet designed

ii. Leak detection system or groundwater monitoring data

☐ Yes      ☐ No      ☐ Not yet designed

iii. Groundwater impacts

☐ Yes      ☐ No      ☐ Not yet designed

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

**Attachment:** N/A

**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 1/2-mile of the impoundments.

**Attachment:** N/A

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:** Attachment 123

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:** Attachment 123

#### **4. OUTFALL/DISPOSAL METHOD INFORMATION (Instructions, Pages 42-43)**

Complete the following tables to describe the location and wastewater discharge or disposal operations for each outfall for discharge operations, 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 Latitude and Longitude**

Outfall Number	Latitude-decimal degrees	Longitude-decimal degrees
001	29.827778	-93.9625

**Outfall Location Description**

Outfall Number	Location Description
001	By the dock, via a 20" pipe discharging to the West Basin of the Intracoastal Waterway.

**Description of Sampling Points (if different from Outfall location)**

Outfall Number	Description of Sampling Point

**Outfall Flow Information – Permitted and Proposed**

Outfall Number	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)
001	0.100	0.200	0.100	0.200	currently

**Outfall Discharge – Method and Measurement**

Outfall Number	Pumped Discharge? Y/N	Gravity Discharge? Y/N	Type of Flow Measurement Device Used
001	Y	N	Gradiated Weir

**Outfall Discharge – Flow Characteristics**

Outfall Number	Intermittent Discharge? Y/N	Continuous Discharge? Y/N	Seasonal Discharge? Y/N	Discharge Duration (hrs/day)	Discharge Duration (days/mo)	Discharge Duration (mo/yr)
001	N	Y	N	24	31	12

## Wastestream Contributions

Outfall No.: 001

Contributing Wastestreams	Volume (MGD)	% of Total Flow
Boiler Blowdown	0.010 Contin. (C)	30-40
Non-contact cooling tower blowdown	0.015 varies (C, Int.)	30-60
Stormwater (plant runoff, tank farm discharge	Varies (Int.)	0-60

Outfall No.: 002

Contributing Wastestreams	Volume (MGD)	% of Total Flow

Outfall No.: 003

Contributing Wastestreams	Volume (MGD)	% of Total Flow

Attachment: 004

## 5. BLOWDOWN AND ONCE-THROUGH COOLING WATER DISCHARGES (Instructions, Page 44)

- a. Does the facility use/propose to use any cooling towers which discharge blowdown or other wastestreams to the outfall(s)?

☒ Yes ☐ No

**NOTE:** If the facility uses or plans to use cooling towers, Item 12 **is required**.

- b. Does the facility use or plan to use any boilers that discharge blowdown or other wastestreams to the outfall(s)?

☒ Yes ☐ No

- c. Does or will the facility discharge once-through cooling water to the outfall(s)?

☒ Yes ☐ No

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

- d. If **yes** to Items 5.a, 5.b, **or** 5.c, attach the 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.

Attach a summary of this information in addition to the submittal of the SDS for each specific wastestream and the associated chemical additives and specify which outfalls are affected.

### Attachment:

- e. Cooling Towers and Boilers

If **yes** to either Item 5.a **or** 5.b, complete the following table.

### Cooling Towers and Boilers

Type of Unit	Number of Units	Dly Avg Blowdown (gallons/day)	Dly Max Blowdown (gallons/day)
Cooling Towers	1	50,000	100,000
Boilers	1	50,000	100,000

## 6. STORMWATER MANAGEMENT (Instructions, Page 44)

Are there any existing/proposed outfalls which 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 some manner which may result in exposure of the activities or materials to stormwater: \*Maintenance and operation of organic



product storage tanks, pipelines, pumps and associated equipment could expose storm water contamination; \*Batch discharges from the microbiological treatment tank during rainfall events could expose stormwater to low levels of contamination; \*Cooling Tower and/or boiler blowdown during a rainfall event could expose stormwater to low levels of contamination.

## 7. DOMESTIC SEWAGE, SEWAGE SLUDGE, AND SEPTAGE MANAGEMENT AND DISPOSAL (Instructions, Page 45)

**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:** 2020-05-15-2021
- 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.
City of Orange	RN105230627

## 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:

## 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: **Attachment: 10055-001-001**

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

**Attachment:** **10055-001-001**

## 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:** **10055-001-001**

- 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:** **10055-001-001**

- 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.o** of this application **is required**.

## 11. RADIOACTIVE MATERIALS (Instructions, Pages 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	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	Concentration (pCi/L)

## 12. COOLING WATER (Instructions, Pages 46-47)

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

☒ Yes ☐ No

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

- 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

- i. 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	N/A			
Owner	N/A			
Operator	N/A			

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

☒ Yes ☐ No

If **no**, continue. If **yes**, provide the PWS Registration No. and stop here: PWS No. Account Number: 64665-94234

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

☐ Yes ☐ No

If **no**, continue. If **yes**, provide the Reuse Authorization No. and stop here: 715-4490612

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

☐ Yes ☐ No

If **yes**, provide the actual intake flow of the Independent Supplier's CWIS that is/will be used to provide water for cooling purposes to the facility and proceed: **12.12.2**

If **no**, proceed to Item 12.d.

d. 316(b) General Criteria

i. 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

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

☐ Yes ☐ No

iii. 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

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: **12.12.2**

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.o, Items 1(a), 1(b)(i-iii) and (vi), 2(b)(i), and 3(a) to allow for a determination based upon BPJ.

f. Oil and Gas Exploration and Production

i. 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.

ii. 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.o, Items 1(a), 1(b)(i-iii) and (vi), 2(b)(i), and 3(a) to allow for a determination based upon BPJ. If **no**, skip to Item 12.g.iii.

g. Compliance Phase and Track Selection

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

☐ Yes ☐ No

If **yes**, check the box next to the facility's 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:** ☐

ii. 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.

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

☐ Yes ☐ No

If **yes**, check the box next to the facility's 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 the CWIS latitude and 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:** ☐

## 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.

TCEQ agreed in February 2020 (see attachment E) on weir box as WW flow monitoring device prior to WW permit renewal. The language got inadvertently missed during the renewal, therefore requesting administrative amendment. See Attachment E for proposed language for the following:

1. Effluent Limitations and Monitoring Requirements – Update Daily Average and Measurement Frequency to proposed “1/day”
2. Effluent Limitations and Monitoring Requirements – Update Daily Max Sample Type to proposed “Instantaneous”
3. Other Requirements Condition 5 – Update “flow meter” to proposed “an effluent flow measuring device or other acceptable means by which effluent flow may be determined”
4. Other Requirements Condition 5 – Update “shall maintain a permanent rain gage at the plant site” to proposed “shall maintain an on-site rain gauge, a representative weather station, or subject to TCEQ’s approval, an alternative means of compliance”
5. Other Requirements Condition 5 – Propose adding language “High tide conditions shall be documented whenever these conditions may impact flow or sample accuracy.”

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

☐ Yes ☒ No

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



## WORKSHEET 1.0

### EPA CATEGORICAL EFFLUENT GUIDELINES

This worksheet **is required** for all applications for TPDES permits for discharges of wastewaters subject to EPA categorical effluent limitation guidelines (ELGs).

#### 1. CATEGORICAL INDUSTRIES (Instructions, Pages 50-52)

Is this facility subject to any of the 40 CFR categorical ELGs outlined on page 53 of the instructions?

☒ Yes      ☐ No

If **no**, this worksheet is not required. If **yes**, provide the appropriate information in the table below.

##### 40 CFR Effluent Guidelines

Industry	40 CFR Part
Organic chemicals, plastic, and synthetic fibers	414

#### 2. PRODUCTION/PROCESS DATA (Instructions, Page 54)

**NOTE:** For all TPDES permit applications requesting individual permit coverage for discharges of oil and gas exploration and production wastewater (discharges into or adjacent to water in the state, falling under the Oil and Gas Extraction Effluent Guidelines – 40 CFR Part 435), see Worksheet 12.0, Item 2 instead.

##### a. Production Data

Provide the appropriate data for effluent guidelines with production-based effluent limitations.

##### Production Data

Subcategory	Actual Quantity/Day	Design Quantity/Day	Units
F-Commodity Organic Chemicals	0-100,000*	350,000**	lb
G-bulk Organic Chemicals	0-100,000*	350,000**	lb
H-Specialty Organic Chemicals	0-100,000*	350,000**	lb
*varies based on market demand			
**Total reactor capacity			

**b. Organic Chemicals, Plastics, and Synthetic Fibers Manufacturing Data (40 CFR Part 414)**

Provide each applicable subpart and the percent of total production. Provide data for metal-bearing and cyanide-bearing wastestreams, as required by 40 CFR Part 414, Appendices A and B.

**Percentages of Total Production**

Subcategory	Percent of Total Production	Appendix A and B - Metal	Appendix A – Cyanide
F-Commodity Organic Chemicals	0-30%*		
G-bulk Organic Chemicals	0-30%*		
H-Specialty Organic Chemicals	0-30%*		
*varies based on market demand			

**c. Refineries (40 CFR Part 419)**

Provide the applicable subcategory and a brief justification.

N/A

**3. PROCESS/NON-PROCESS WASTEWATER FLOWS (Instructions, Page 54)**

Provide a breakdown of wastewater flow(s) generated by the facility, including both process and non-process wastewater flow(s). Specify which wastewater flows are to be authorized for discharge under this permit and the disposal practices for wastewater flows, excluding domestic, which are not to be authorized for discharge under this permit.

-Boiler blowdown; -Non-contact cooling water; -Storm water (contact and non-contact) primarily from diked tank farm areas; - Process wastewater generated primarily from rinsing equipment (e.g., columns, vessels, piping) after completing a production campaign.

#### 4. NEW SOURCE DETERMINATION (Instructions, Page 54)

Provide a list of all wastewater-generating processes subject to EPA categorical ELGs, identify the appropriate guideline Part and Subpart, and provide the date the process/construction commenced.

##### Wastewater-generating Processes Subject to Effluent Guidelines

Process	EPA Guideline: Part	EPA Guideline: Subpart	Date Process/ Construction Commenced
Organic chemical, plastics, and synthetic fibers	414	F	Property purchased from Chevron in 1989. Distillation process began in 1992.
Organic chemical, plastics, and synthetic fibers	414	G	Property purchased from Chevron in 1989. Distillation process began in 1992.
Organic chemical, plastics, and synthetic fibers	414	H	Property purchased from Chevron in 1989. Distillation process began in 1992.



## WORKSHEET 2.0 POLLUTANT ANALYSES REQUIREMENTS

Worksheet 2.0 **is required** for all applications submitted for a TPDES permit. Worksheet 2.0 is not required for applications for a permit to dispose of all wastewater by land disposal or for discharges solely of stormwater associated with industrial activities.

### 1. LABORATORY ACCREDITATION (Instructions, Page 56)

Effective July 1, 2008, all laboratory tests performed must meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification* with the following general exemptions:

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

Review *30 TAC Chapter 25* for specific requirements. The following certification statement shall be signed and submitted with every application. See Instructions, Page 34, for a list of approved signatories.

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

  
(Signature)

### 2. GENERAL TESTING REQUIREMENTS (Instructions, Pages 56-58)

- a. 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): 01/09/2023 – 02/08/23; Any results not yet entered will be shared when they become available.
- b. ☒ Check the box to confirm all samples were collected no more than 12 months prior to the date of application submittal.
- c. Read the general testing requirements in the instructions for important information about sampling, test methods, and MALs. If a contact laboratory was used, attach a list which includes the name, contact information, and pollutants analyzed for each laboratory/firm. **Attachment:** G

### 3. SPECIFIC TESTING REQUIREMENTS (Instructions, Pages 58-69)

Attach correspondence from TCEQ approving submittal of less than the required number of samples, if applicable. **Attachment:** N/A



**TABLE 1 and TABLE 2 (Instructions, Page 58)**

**Completion of Tables 1 and 2 is required for all external outfalls for all TPDES permit applications.**

**Table 1 for Outfall No.: 001**

**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)	<2.0	<4.0	<2.0	
CBOD (5-day)	<2.0	<4.0	<2.0	
Chemical oxygen demand	38	49	38	
Total organic carbon	11.1	14.3	16.2	
Dissolved oxygen	6.6	6.1	7.2	
Ammonia nitrogen	<0.20	<0.20	0.22	
Total suspended solids	<2.0	2.0	<2.0	
Nitrate nitrogen	0.38	0.41	0.63	
Total organic nitrogen	<2.0	1.03	1.10	
Total phosphorus	0.45	1.60	1.94	
Oil and grease	<2.2	<2.2	<2.3	
Total residual chlorine	<0.02	0.02	0.08	
Total dissolved solids	180	204	174	
Sulfate	21.9	28.9	24.5	
Chloride	48.0	74.0	51	
Fluoride	1.26	0.95	1.06	
Total alkalinity (mg/L as CaCO <sub>3</sub> )	38	42	33	36
Temperature (°F)	60.8	71.1	59.2	
pH (standard units)	7.3	7.2	7.1	

**Table 2 for Outfall No.: 001**

**Samples are (check one):** ☐ Composites ☒ Grabs

Pollutant	Sample 1 (µg/L)	Sample 2 (µg/L)	Sample 3 (µg/L)	Sample 4 (µg/L)	MAL (µg/L)
Aluminum, total	20.6	49.7	41.5		2.5
Antimony, total	<5	<5.00	<5.00		5
Arsenic, total	0.53	0.73	0.64		0.5
Barium, total	48.6	51.1	49.0		3
Beryllium, total	<0.5	<0.50	<0.50		0.5
Cadmium, total	<1	<1.00	<1.00		1
Chromium, total	<3	<3.00	<3		3
Chromium, hexavalent	<3	<3	<3		3
Chromium, trivalent	<3	<3	<3		N/A
Copper, total	4.27	5.14	3.53		2
Cyanide, available	3.7	3.1	4.5	<1.6	2/10
Lead, total	<0.5	<0.50	<0.50		0.5

Pollutant	Sample 1 (µg/L)	Sample 2 (µg/L)	Sample 3 (µg/L)	Sample 4 (µg/L)	MAL (µg/L)
Mercury, total	0.00389	<0.00976	0.00127	0.00486	0.005/0.0005
Nickel, total	2.22	<2	<2.00	2.21	2
Selenium, total	<5	<5	<5.00	<5	5
Silver, total	<0.50	<0.50	<0.50	<0.5	0.5
Thallium, total	<0.50	<0.50	<0.50	<0.5	0.5
Zinc, total	134	16.5	25.1	22.3	5.0

**TABLE 3 (Instructions, Page 58)**

**Completion** of Table 3 **is required** for all **external outfalls** which discharge process wastewater.

**Partial completion** of Table 3 **is required** for all **external outfalls** which discharge non-process wastewater and stormwater associated with industrial activities commingled with other wastestreams (see instructions for additional guidance).

**Table 3 for Outfall No.: 001**

**Samples are (check one):** ☐ Composites ☒ Grabs

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Acrylonitrile	<20	<20	<20		50
Anthracene	<5	<5	<5		10
Benzene	19	36	39		10
Benzidine	<5	<5	<5		50
Benzo(a)anthracene	<5	<5	<5		5
Benzo(a)pyrene	<5	<5	<5		5
Bis(2-chloroethyl)ether	<5	<5	<5		10
Bis(2-ethylhexyl)phthalate	<5	<5	<5		10
Bromodichloromethane [Dichlorobromomethane]	<5	<5	<5		10
Bromoform	<5	<5	<5		10
Carbon tetrachloride	<2	<2	<2		2
Chlorobenzene	<5	<5	<5		10
Chlorodibromomethane [Dibromochloromethane]	<5	<5	<5		10
Chloroform	<4	<4	<4		10
Chrysene	<5	<5	<5		5
m-Cresol [3-Methylphenol]	<5	<5	<5		10
o-Cresol [2-Methylphenol]	<5	<5	<5		10
p-Cresol [4-Methylphenol]	<5	<5	<5		10
1,2-Dibromoethane	<5	<5	<5		10
m-Dichlorobenzene [1,3-Dichlorobenzene]	<5	<5	<5		10
o-Dichlorobenzene [1,2-Dichlorobenzene]	<5	<5	<5		10

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
p-Dichlorobenzene [1,4-Dichlorobenzene]	<5	<5	<5		10
3,3'-Dichlorobenzidine	<5	<5	<5		5
1,2-Dichloroethane	<5	<5	<5		10
1,1-Dichloroethene [1,1-Dichloroethylene]	<5	<5	<5		10
Dichloromethane [Methylene chloride]	<5	<5	<5		20
1,2-Dichloropropane	<5	<5	<5		10
1,3-Dichloropropene [1,3-Dichloropropylene]	<5	<5	<5		10
2,4-Dimethylphenol	<5	<5	<5		10
Di-n-Butyl phthalate	<5	<5	<5		10
Ethylbenzene	<5	<5	5		10
Fluoride	1,260	950	1,060		500
Hexachlorobenzene	<5	<5	<5		5
Hexachlorobutadiene	<2	<2	<2		10
Hexachlorocyclopentadiene	<5	<5	<5		10
Hexachloroethane	<2	<2	<2		20
Methyl ethyl ketone	<5	<5	<5		50
Nitrobenzene	<5	<5	<5		10
N-Nitrosodiethylamine	<5	<5	<5		20
N-Nitroso-di-n-butylamine	<5	<5	<5		20
Nonylphenol	<5	<5	<5		333
Pentachlorobenzene	<5	<5	<5		20
Pentachlorophenol	<5	<5	<5		5
Phenanthrene	<5	<5	<5		10
Polychlorinated biphenyls (PCBs) (**)	<0.2	<0.2	<0.02		0.2
Pyridine	<5	<5	<5		20
1,2,4,5-Tetrachlorobenzene	<5	<5	<5		20
1,1,2,2-Tetrachloroethane	<5	<5	<5		10
Tetrachloroethene [Tetrachloroethylene]	<5	<5	<5		10
Toluene	7	15	18		10
1,1,1-Trichloroethane	<5	<5	<5		10
1,1,2-Trichloroethane	<5	<5	<5		10
Trichloroethene [Trichloroethylene]	<5	<5	<5		10
2,4,5-Trichlorophenol	<5	<5	<5		50
TTHM (Total trihalomethanes)	<5	<5	<5		10



Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Vinyl chloride	<5	<5	<5		10

(\*) Indicate units if different from µg/L.

(\*\*) Total of detects for PCB-1242, PCB-1254, PCB-1221, PCB-1232, PCB-1248, PCB-1260, and PCB-1016. If all non-detects, enter the highest non-detect preceded by a "<".

#### TABLE 4 (Instructions, Pages 58-59)

Partial completion of Table 4 **is required** for each **external outfall** based on the conditions below.

##### a. Tributyltin

Is this facility an industrial/commercial facility which currently or proposes to directly dispose of wastewater from the types of operations listed below or a domestic facility which currently or proposes to receive wastewater from the types of industrial/commercial operations listed below?

☐ Yes ☒ No

If **yes**, check the box next to each of the following criteria which apply and provide the appropriate testing results in Table 4 below (check all that apply).

- ☐ Manufacturers and formulators of tributyltin or related compounds.
- ☐ Painting of ships, boats and marine structures.
- ☐ Ship and boat building and repairing.
- ☐ Ship and boat cleaning, salvage, wrecking and scaling.
- ☐ Operation and maintenance of marine cargo handling facilities and marinas.
- ☐ Facilities engaged in wood preserving.
- ☐ Any other industrial/commercial facility for which tributyltin is known to be present, or for which there is any reason to believe that tributyltin may be present in the effluent.

##### b. Enterococci (discharge to saltwater)

- i. This facility discharges/proposes to discharge directly into saltwater receiving waters **and** Enterococci bacteria are expected to be present in the discharge based on facility processes.

☐ Yes ☒ No

- ii. Domestic wastewater is/will be discharged.

☐ Yes ☒ No

If **yes to either** question, provide the appropriate testing results in Table 4 below.

##### c. E. coli (discharge to freshwater)

- i. This facility discharges/proposes to discharge directly into freshwater receiving waters **and** *E. coli* bacteria are expected to be present in the discharge based on facility processes.

☐ Yes ☒ No

- ii. Domestic wastewater is/will be discharged.

☐ Yes ☒ No

If **yes to either** question, provide the appropriate testing results in Table 4 below.



Table 4 for Outfall No.:

Samples are (check one): ☐ Composites ☐ Grabs

Pollutant	Sample 1	Sample 2	Sample 3	Sample 4	MAL
Tributyltin (µg/L)					0.010
Enterococci (cfu or MPN/100 mL)					N/A
<i>E. coli</i> (cfu or MPN/100 mL)					N/A

**TABLE 5 (Instructions, Page 59)**

**Completion of Table 5 is required** for all **external outfalls** which discharge process wastewater from a facility which manufactures or formulates pesticides or herbicides or other wastewaters which may contain pesticides or herbicides.

If this facility does not/will not manufacture or formulate pesticides or herbicides and does not/will not discharge other wastewaters which may contain pesticides or herbicides, check N/A.

☐ N/A

Table 5 for Outfall No.:

Samples are (check one): ☐ Composites ☐ Grabs

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Aldrin					0.01
Carbaryl					5
Chlordane					0.2
Chlorpyrifos					0.05
4,4'-DDD					0.1
4,4'-DDE					0.1
4,4'-DDT					0.02
2,4-D					0.7
Danitol [Fenpropathrin]					—
Demeton					0.20
Diazinon					0.5/0.1
Dicofol [Kelthane]					1
Dieldrin					0.02
Diuron					0.090
Endosulfan I ( <i>alpha</i> )					0.01
Endosulfan II ( <i>beta</i> )					0.02
Endosulfan sulfate					0.1
Endrin					0.02
Guthion [Azinphos methyl]					0.1
Heptachlor					0.01
Heptachlor epoxide					0.01
Hexachlorocyclohexane ( <i>alpha</i> )					0.05
Hexachlorocyclohexane ( <i>beta</i> )					0.05
Hexachlorocyclohexane ( <i>gamma</i> ) [Lindane]					0.05
Hexachlorophene					10

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Malathion					0.1
Methoxychlor					2.0
Mirex					0.02
Parathion (ethyl)					0.1
Toxaphene					0.3
2,4,5-TP [Silvex]					0.3

\* Indicate units if different from µg/L.

## TABLE 6 (Instructions, Page 59)

Completion of Table 6 is required for all external outfalls.

Table 6 for Outfall No.: **001**

Samples are (check one): ☐ Composites ☒ Grabs

Pollutants	Believed Present	Believed Absent	Sample 1 (mg/L)	Sample 2 (mg/L)	Sample 3 (mg/L)	Sample 4 (mg/L)	MAL (µg/L)*
Bromide	<input checked="" type="checkbox"/>	<input type="checkbox"/>					400
Color (PCU)	<input checked="" type="checkbox"/>	<input type="checkbox"/>					—
Nitrate-Nitrite (as N)	<input checked="" type="checkbox"/>	<input type="checkbox"/>					—
Sulfide (as S)	<input checked="" type="checkbox"/>	<input type="checkbox"/>					—
Sulfite (as SO <sub>3</sub> )	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Surfactants	<input checked="" type="checkbox"/>	<input type="checkbox"/>					—
Boron, total	<input checked="" type="checkbox"/>	<input type="checkbox"/>					20
Cobalt, total	<input checked="" type="checkbox"/>	<input type="checkbox"/>					0.3
Iron, total	<input checked="" type="checkbox"/>	<input type="checkbox"/>					7
Magnesium, total	<input checked="" type="checkbox"/>	<input type="checkbox"/>					20
Manganese, total	<input checked="" type="checkbox"/>	<input type="checkbox"/>					0.5
Molybdenum, total	<input checked="" type="checkbox"/>	<input type="checkbox"/>					1
Tin, total	<input checked="" type="checkbox"/>	<input type="checkbox"/>					5
Titanium, total	<input checked="" type="checkbox"/>	<input type="checkbox"/>					30

\* Indicate units if different from µg/L.

## TABLE 7 (Instructions, Page 60)

Check the box next to any of the industrial categories applicable to this facility. If no categories are applicable, check N/A. If GC/MS testing is required, check the box provided to confirm the testing results for the appropriate parameters are provided with the application.

☐ N/A

**Table 7 for Applicable Industrial Categories**

Industrial Category	40 CFR Part	Volatiles Table 8	Acids Table 9	Bases/Neutrals Table 10	Pesticides Table 11
<input type="checkbox"/> Adhesives and Sealants		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Aluminum Forming	467	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Auto and Other Laundries		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Battery Manufacturing	461	<input type="checkbox"/> Yes	No	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Coal Mining	434	No	No	No	No
<input type="checkbox"/> Coil Coating	465	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Copper Forming	468	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Electric and Electronic Components	469	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Electroplating	413	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Explosives Manufacturing	457	No	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Foundries		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Gum and Wood Chemicals - Subparts A,B,C,E	454	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No	No
<input type="checkbox"/> Gum and Wood Chemicals - Subparts D,F	454	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Inorganic Chemicals Manufacturing	415	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Iron and Steel Manufacturing	420	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Leather Tanning and Finishing	425	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Mechanical Products Manufacturing		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Nonferrous Metals Manufacturing	421,471	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Oil and Gas Extraction - Subparts A, D, E, F, G, H	435	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Ore Mining - Subpart B	440	No	<input type="checkbox"/> Yes	No	No
<input checked="" type="checkbox"/> Organic Chemicals Manufacturing	414	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes
<input type="checkbox"/> Paint and Ink Formulation	446,447	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Pesticides	455	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Petroleum Refining	419	<input type="checkbox"/> Yes	No	No	No
<input type="checkbox"/> Pharmaceutical Preparations	439	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Photographic Equipment and Supplies	459	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Plastic and Synthetic Materials Manufacturing	414	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Plastic Processing	463	<input type="checkbox"/> Yes	No	No	No
<input type="checkbox"/> Porcelain Enameling	466	No	No	No	No
<input type="checkbox"/> Printing and Publishing		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Pulp and Paperboard Mills - Subpart C	430	<input type="checkbox"/> *	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> Yes
<input type="checkbox"/> Pulp and Paperboard Mills - Subparts F, K	430	<input type="checkbox"/> *	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> *
<input type="checkbox"/> Pulp and Paperboard Mills - Subparts A, B, D, G, H	430	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> *
<input type="checkbox"/> Pulp and Paperboard Mills - Subparts I, J, L	430	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> Yes
<input type="checkbox"/> Pulp and Paperboard Mills - Subpart E	430	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> *
<input type="checkbox"/> Rubber Processing	428	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Soap and Detergent Manufacturing	417	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Steam Electric Power Plants	423	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No	No
<input type="checkbox"/> Textile Mills (Not Subpart C)	410	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Timber Products Processing	429	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

\* Test if believed present.



## TABLES 8, 9, 10, and 11 (Instructions, Page 60)

Completion of Tables 8, 9, 10, and 11 **is required** as specified in Table 7 for all **external outfalls** that contain process wastewater.

Completion of Tables 8, 9, 10, and 11 **may be required** for types of industry not specified in Table 7 for specific parameters that are believed to be present in the wastewater.

**Table 8 for Outfall No.: 001 : Volatile Compounds**

Samples are (check one): ☐ Composites ☒ Grabs

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Acrolein	<20	<20	<20		50
Acrylonitrile	<20	<20	<20		50
Benzene	19	36	39		10
Bromoform	<5	<5	<5		10
Carbon tetrachloride	<2	<2	<2		2
Chlorobenzene	<5	<5	<5		10
Chlorodibromomethane	<5	<5	<5		10
Chloroethane	<5	<5	<5		50
2-Chloroethylvinyl ether	<5	<5	<5		10
Chloroform	<4	<4	<4		10
Dichlorobromomethane [Bromodichloromethane]	<5	<5	<5		10
1,1-Dichloroethane	<5	<5	<5		10
1,2-Dichloroethane	<5	<5	<5		10
1,1-Dichloroethylene [1,1-Dichloroethene]	<5	<5	<5		10
1,2-Dichloropropane	<5	<5	<5		10
1,3-Dichloropropylene [1,3-Dichloropropene]	<5	<5	<5		10
Ethylbenzene	<5	<5	5		10
Methyl bromide [Bromomethane]	<5	<5	<5		50
Methyl chloride [Chloromethane]	<5	<5	<5		50
Methylene chloride [Dichloromethane]	<5	<5	<5		20
1,1,2,2-Tetrachloroethane	<5	<5	<5		10
Tetrachloroethylene [Tetrachloroethene]	<5	<5	<5		10
Toluene	7	15	18		10
1,2-Trans-dichloroethylene [1,2-Trans-dichloroethene]	<4	<4	<4		10
1,1,1-Trichloroethane	<5	<5	<5		10
1,1,2-Trichloroethane	<5	<5	<5		10
Trichloroethylene [Trichloroethene]	<5	<5	<5		10
Vinyl chloride	<5	<5	<5		10

\* Indicate units if different from µg/L.



**Table 9 for Outfall No.: 001 : Acid Compounds**Samples are (check one): ☐ Composites ☒ Grabs

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
2-Chlorophenol	<5	<5	<5		10
2,4-Dichlorophenol	<5	<5	<5		10
2,4-Dimethylphenol	<5	<5	<5		10
4,6-Dinitro-o-cresol	<11	<10	<10		50
2,4-Dinitrophenol	<11	<10	<10		50
2-Nitrophenol	<5	<5	<5		20
4-Nitrophenol	<11	<10	<10		50
p-Chloro-m-cresol	<5	<5	<5		10
Pentachlorophenol	<5	<5	<5		5
Phenol	<2	<2	<2		10
2,4,6-Trichlorophenol	<5	<5	<5		10

\* Indicate units if different from µg/L.

**Table 10 for Outfall No.: 001 : Base/Neutral Compounds**Samples are (check one): ☐ Composites ☒ Grabs

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Acenaphthene	<5	<5	<5		10
Acenaphthylene	<5	<5	<5		10
Anthracene	<5	<5	<5		10
Benzidine	<5	<5	<5		50
Benzo(a)anthracene	<5	<5	<5		5
Benzo(a)pyrene	<5	<5	<5		5
3,4-Benzo(a)fluoranthene [Benzo(b)fluoranthene]	<5	<5	<5		10
Benzo(ghi)perylene	<5	<5	<5		20
Benzo(k)fluoranthene	<5	<5	<5		5
Bis(2-chloroethoxy)methane	<5	<5	<5		10
Bis(2-chloroethyl)ether	<5	<5	<5		10
Bis(2-chloroisopropyl)ether	<5	<5	<5		10
Bis(2-ethylhexyl)phthalate	<5	<5	<5		10
4-Bromophenyl phenyl ether	<5	<5	<5		10
Butylbenzyl phthalate	<5	<5	<5		10
2-Chloronaphthalene	<5	<5	<5		10
4-Chlorophenyl phenyl ether	<5	<5	<5		10
Chrysene	<5	<5	<5		5
Dibenzo(a,h)anthracene	<5	<5	<5		5
1,2-Dichlorobenzene [o-Dichlorobenzene]	<5	<5	<5		10
1,3-Dichlorobenzene [m-Dichlorobenzene]	<5	<5	<5		10
1,4-Dichlorobenzene [p-Dichlorobenzene]	<5	<5	<5		10
3,3'-Dichlorobenzidine	<5	<5	<5		5

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Diethyl phthalate	<5	<5	<5		10
Dimethyl phthalate	<2	<2	<2		10
Di-n-butyl phthalate	<5	<5	<5		10
2,4-Dinitrotoluene	<5	<5	<5		10
2,6-Dinitrotoluene	<5	<5	<5		10
Di-n-octyl phthalate	<5	<5	<5		10
1,2-Diphenylhydrazine (as Azobenzene)	<5	<5	<5		20
Fluoranthene	<5	<5	<5		10
Fluorene	<5	<5	<5		10
Hexachlorobenzene	<5	<5	<5		5
Hexachlorobutadiene	<2	<2	<2		10
Hexachlorocyclopentadiene	<5	<5	<5		10
Hexachloroethane	<2	<2	<2		20
Indeno(1,2,3-cd)pyrene	<5	<5	<5		5
Isophorone	<5	<5	<5		10
Naphthalene	<2	<2	<2		10
Nitrobenzene	<5	<5	<5		10
N-Nitrosodimethylamine	<5	<5	<5		50
N-Nitrosodi-n-propylamine	<5	<5	<5		20
N-Nitrosodiphenylamine	<5	<5	<5		20
Phenanthrene	<5	<5	<5		10
Pyrene	<5	<5	<5		10
1,2,4-Trichlorobenzene	<5	<5	<5		10

\* Indicate units if different from µg/L.

**Table 11 for Outfall No.: 001 : Pesticides**

**Samples are (check one):** ☐ Composites ☒ Grabs

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Aldrin	<0.006	<0.006	<0.012		0.01
alpha-BHC [alpha-Hexachlorocyclohexane]	<0.004	<0.003	<0.007		0.05
beta-BHC [beta-Hexachlorocyclohexane]	<0.003	<0.004	<0.007		0.05
gamma-BHC [gamma-Hexachlorocyclohexane]	<0.004	<0.004	<0.008		0.05
delta-BHC [delta-Hexachlorocyclohexane]	<0.006	<0.006	<0.012		0.05
Chlordane	<0.038	<0.037	<0.075		0.2
4,4'-DDT	<0.004	<0.004	<0.008		0.02
4,4'-DDE	<0.005	<0.004	<0.009		0.1
4,4'-DDD	<0.003	<0.003	<0.007		0.1
Dieldrin	<0.006	<0.006	<0.013		0.02
Endosulfan I (alpha)	<0.01	<0.01	<0.013		0.01
Endosulfan II (beta)	<0.006	<0.006	<0.012		0.02
Endosulfan sulfate	<0.005	<0.005	<0.010		0.1

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Endrin	<0.006	<0.006	<0.013		0.02
Endrin aldehyde	<0.009	<0.008	<0.017		0.1
Heptachlor	<0.003	<0.003	<0.007		0.01
Heptachlor epoxide	<0.007	<0.007	<0.013		0.01
PCB 1242	<0.099	<0.096	<0.097		0.2
PCB 1254	<0.191	<0.185	<0.187		0.2
PCB 1221	<0.379	<0.368	<0.371		0.2
PCB 1232	<0.154	<0.149	<0.150		0.2
PCB 1248	<0.230	<0.224	<0.226		0.2
PCB 1260	<0.191	<0.106	<0.107		0.2
PCB 1016	<0.159	<0.154	<0.155		0.2
Toxaphene	<0.162	<0.157	<0.317		0.3

\* Indicate units if different from µg/L.

**Attachment:** [REDACTED]

## TABLE 12 (DIOXINS/FURAN COMPOUNDS)

Complete of Table 12 **is required** for **external outfalls**, as directed below. (Instructions, Pages 60-61)

- a. Indicate which compound(s) are manufactured or used at the facility and provide a brief description of the conditions of its/their presence at the facility (check all that apply).

- ☐ 2,4,5-trichlorophenoxy acetic acid (2,4,5-T) CASRN 93-76-5
- ☐ 2-(2,4,5-trichlorophenoxy) propanoic acid (Silvex, 2,4,5-TP) CASRN 93-72-1
- ☐ 2-(2,4,5-trichlorophenoxy) ethyl 2,2-dichloropropionate (Erbon) CASRN 136-25-4
- ☐ o,o-dimethyl o-(2,4,5-trichlorophenyl) phosphorothioate (Ronnell) CASRN 299-84-3
- ☐ 2,4,5-trichlorophenol (TCP) CASRN 95-95-4
- ☐ hexachlorophene (HCP) CASRN 70-30-4
- ☒ None of the above

Description: [REDACTED]

- b. Does the applicant or anyone at the facility know or have any reason to believe that 2,3,7,8-tetrachlorodibenzo-p-dioxin (TCDD) or any congeners of TCDD may be present in the effluent proposed for discharge?

- ☐ Yes ☒ No

Description: [REDACTED]

If **yes** to either Items a **or** b, complete Table 12 as instructed.

Samples are (check one): ☐ Composites ☐ Grabs

Compound	Toxicity Equivalent Factors	Wastewater Concentration (ppq)	Wastewater Toxicity Equivalents (ppq)	Sludge Concentration (ppt)	Sludge Toxicity Equivalents (ppt)	MAL (ppq)
2,3,7,8-TCDD	1					10
1,2,3,7,8-PeCDD	1.0					50
2,3,7,8-HxCDDs	0.1					50
1,2,3,4,6,7,8-HpCDD	0.01					50
2,3,7,8-TCDF	0.1					10
1,2,3,7,8-PeCDF	0.03					50
2,3,4,7,8-PeCDF	0.3					50
2,3,7,8-HxCDFs	0.1					50
2,3,4,7,8-HpCDFs	0.01					50
OCDD	0.0003					100
OCDF	0.0003					100
PCB 77	0.0001					500
PCB 81	0.0003					500
PCB 126	0.1					500
PCB 169	0.03					500
Total						

Complete Table 13 **is required** for all **external outfalls** as directed below. (Instructions, Page 61)

- ☐
- Yes
- ☒
- No

Table 13 for Outfall No.: 1200000000

Pollutant	CASRN	Sample 1 (µg/L)	Sample 2 (µg/L)	Sample 3 (µg/L)	Sample 4 (µg/L)	Analytical Method



## WORKSHEET 4.0 RECEIVING WATERS

This worksheet **is required** for all TPDES permit applications.

### 1. DOMESTIC DRINKING WATER SUPPLY (Instructions, Page 81)

- a. There is a surface water intake for domestic drinking water supply located within 5 (five) miles downstream from the point/proposed point of discharge.

☐ Yes      ☒ No

If **no**, stop here and proceed to Item 2. If **yes**, provide the following information:

i. The legal name of the owner of the drinking water supply intake: FLORIAN'S

v. The distance and direction from the outfall to the drinking water supply intake: 1.5 miles north

- b. Locate and identify the intake on the USGS 7.5-minute topographic map provided for Administrative Report 1.0.

☐ Check this box to confirm the above requested information is provided.

### 2. DISCHARGE INTO TIDALLY INFLUENCED WATERS (Instructions, Page 81)

If the discharge is to tidally influenced waters, complete this section. Otherwise, proceed to Item 3.

- a. Width of the receiving water at the outfall: >1000 feet

- b. Are there oyster reefs in the vicinity of the discharge?

☒ Yes      ☐ No

If **yes**, provide the distance and direction from the outfall(s) to the oyster reefs: Approximately six (6) miles south downstream of Outfall 001.

- c. Are there sea grasses within the vicinity of the point of discharge?

☐ Yes      ☒ No

If **yes**, provide the distance and direction from the outfall(s) to the grasses: CLASSIFIED SEGMENT (Instructions, Page 81)

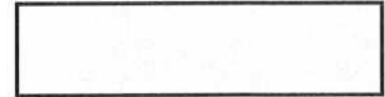
The discharge is/will be directly into (or within 300 feet of) a classified segment.

☒ Yes      ☐ No

If **yes**, stop here. It is not necessary to complete Items 4 and 5 of this worksheet or Worksheet 4.1.

If **no**, complete Items 4 and 5 and Worksheet 4.1 may be required.

Attachment A  
Core Data Form



TCEQ Use Only

# 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

<b>1. Reason for Submission</b> (If other is checked please describe in space provided.)		
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input checked="" type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input type="checkbox"/> Other
<b>2. Customer Reference Number</b> (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	<b>3. Regulated Entity Reference Number</b> (if issued)
CN 604008565		RN 100640283

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (mm/dd/yyyy)	
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input checked="" type="checkbox"/> Change in Regulated Entity Ownership			
<input checked="" type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)			
The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).			
<b>6. Customer Legal Name</b> (If an individual, print last name first: eg: Doe, John)		If new Customer, enter previous Customer below:	
Monument Chemical Port Arthur, LLC		KMTX, LLC	
<b>7. TX SOS/CPA Filing Number</b>	<b>8. TX State Tax ID</b> (11 digits)	<b>9. Federal Tax ID</b> (9 digits)	<b>10. DUNS Number</b> (if applicable)
0801608857	32048186509		
<b>11. Type of Customer:</b>		Partnership: <input type="checkbox"/> General <input checked="" type="checkbox"/> Limited	
<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other:	
<b>12. Number of Employees</b>		<b>13. Independently Owned and Operated?</b>	
<input type="checkbox"/> 0-20 <input checked="" type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>14. Customer Role</b> (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following			
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:			
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant			
<b>15. Mailing Address:</b>			
P O Box 1421			
City: Port Arthur State: TX ZIP: 77641 ZIP + 4: 1421			
<b>16. Country Mailing Information</b> (if outside USA)		<b>17. E-Mail Address</b> (if applicable)	
<b>18. Telephone Number</b>	<b>19. Extension or Code</b>	<b>20. Fax Number</b> (if applicable)	
( 409 ) 985-4200		( ) -	

## SECTION III: Regulated Entity Information

<b>21. General Regulated Entity Information</b> (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

*The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such*

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

Monument Chemical Port Arthur, LLC

**23. Street Address of  
the Regulated Entity:**

(No PO Boxes)

2450 South Sulway Drive

**City**

Port Arthur

**State**

**TX**

**ZIP**

77640

**ZIP + 4**

**24. County**

Jefferson

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

**25. Description to  
Physical Location:**

**26. Nearest City**

**State**

**Nearest ZIP Code**

*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).*

**27. Latitude (N) In Decimal:**

29.827886

**28. Longitude (W) In Decimal:**

-93.963589

Degrees

Minutes

Seconds

Degrees

Minutes

Seconds

**29. Primary SIC Code**

**30. Secondary SIC Code**

**31. Primary NAICS Code**

**32. Secondary NAICS Code**

(4 digits)

(4 digits)

(5 or 6 digits)

(5 or 6 digits)

2869

325199

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

**34. Mailing**

**Address:**

P.O Box 1421

**City**

Port Arthur

**State**

**TX**

**ZIP**

77641

**ZIP + 4**

**35. E-Mail Address:**

ndave@monumentchemical.com

**36. Telephone Number**

**37. Extension or Code**

**38. Fax Number** (if applicable)

( 832 ) 376-2046

( ) -

**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.



<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input checked="" type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:
	WQ0003544000			

## SECTION IV: Preparer Information

40. Name:	Narayan Dave	41. Title:	Global Environmental Leader
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
( 832 ) 376-2046		( ) -	ndave@monumentchemical.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:	Monument Chemical Port Arthur, LLC	Job Title:	Director of operations
Name (In Print):	Kurt Griffith	Phone:	( ) -
Signature:	K.C. Griffith	Date:	5/13/2025

Attachment B  
Plain Language Summary

---

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

This template is a guide to assist applicant's in developing a plain language summary as required by [30 Texas Administrative Code Chapter 39 Subchapter H](#). Applicant's 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 Texas Administrative Code §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 INDUSTRIAL 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 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.*

Monument Chemical Port Arthur, LLC (CN604105007 ) operates Monument Chemical Port Arthur, LLC RN100640283. an oranic chemical vacuum distillation facility. The facility is located at 2450 South Gulfway Drive, in Port Arthur, Jefferson County, Texas 77640. Monument Chemical Port Arthur, LLC has applied to the Texas Commission on Environmental Quality (TCEQ) for a renewal of Texas Pollutant Discharge Elimination System (TPDES) Permit Number WQ0003544000, which authorizes the discharge of treated process wastewater, process area stormwater, utility wastewater (non-contact cooling water, boiler blowdown, and firewater test waters), and stormwater (including stormwater from diked tankfarm areas) at a daily average flow not to exceed 10,000 gallons per day via Outfall 001. The permit application is available for viewing and copying at the Port Arthur Public Library, 4615 9<sup>th</sup> Avenue, Port Arthur, TX. 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 exact location, refer to the application. <https://arcg.is/0iKS9v>

Discharges from the facility are expected to contain biochemical oxygen demand (BOD5), organic carbon, suspended solids, and various organics from manufacturing operations that are associated with 40 CFR 414, Subpart G. Monument Chemical Port Arthur, LLC generates byproduct water, washwaters, contact and non-contact stormwater, non-contact cooling water, boiler blowdown, and firewater test waters which are treated by *gravity separation, solids filtration, reduction of organic chemicals, using microbes with aeration, and activated carbon polishing, if necessary. Process wastewater is discharged in batches if it meets effluent limitations, otherwise it is commercially disposed of by a licensed contractor. Non-contact water is not treated prior to discharge. Process and non-contact waters are commingled at a junction sump and monitoring samples are taken prior to discharge via Outfall 001.*



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

### AGUAS RESIDUALES INDUSTRIALES/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 son representaciones federales exigibles de la solicitud de permiso.*

Monument Chemical Port Arthur, LLC (CN604105007) opera Monument Chemical Port Arthur, LLC RN100640283, una instalación de destilación al vacío de productos químicos orgánicos. La instalación está ubicada en 2450 South Gulfway Drive, en Port Arthur, condado de Jefferson, Texas 77640. Monument Chemical Port Arthur, LLC ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) una renovación del Sistema de eliminación de descargas de contaminantes de Texas (TPDES) Número de permiso WQ0003544000, que autoriza la descarga de aguas residuales de proceso tratadas, aguas pluviales del área de proceso, aguas residuales de servicios públicos (agua de enfriamiento sin contacto, purga de calderas y aguas de prueba de agua contra incendios) y aguas pluviales (incluidas las aguas pluviales de áreas de tanques con diques) a un flujo promedio diario que no exceda los 10,000 galones por día a través del Desagüe 001. La solicitud de permiso está disponible para ver y copiar en la Biblioteca Pública de Port Arthur, 4615 9th Avenue, Port Arthur, TX. Este enlace a un mapa electrónico de la ubicación general del sitio o instalación se proporciona como cortesía pública y no como parte de la solicitud o aviso. Para conocer la ubicación exacta, consulte la aplicación. <https://arccg.is/0iKS9v>

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno (DBO5), carbono orgánico, sólidos suspendidos y varios compuestos orgánicos de las operaciones de fabricación que están asociadas con 40 CFR 414, Subparte G. Monument Chemical Port Arthur, LLC genera subproductos de agua, aguas de lavado, aguas pluviales con y sin contacto, agua de refrigeración sin contacto, purga de calderas y aguas de prueba de agua contra incendios que se tratan por separación por gravedad, filtración de sólidos, reducción de productos químicos orgánicos, uso de microbios con aireación y pulido con carbón activado, si es necesario. Las aguas residuales del proceso se descargan en lotes si cumplen con los límites de efluentes; de lo contrario, un contratista autorizado las elimina comercialmente. El agua sin contacto no se trata antes de la descarga. Las aguas de proceso y sin contacto se mezclan en un sumidero de unión y se toman muestras de control antes de la descarga a través del Emisario 001.



Attachment C  
7.5 Minute Topographic Map



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

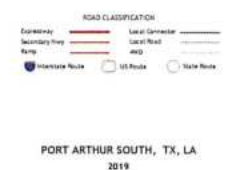
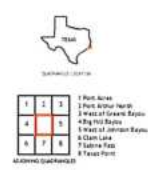
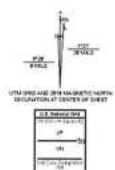


PORT ARTHUR SOUTH QUADRANGLE  
TEXAS - LOUISIANA  
7.5-MINUTE SERIES



Produced by the United States Geological Survey  
North American Datum of 1983 (NAD83)  
World Geodetic System of 1984 (WGS84) Projection and  
1:250,000 scale and contour interval. Contour interval is  
100 feet. The map is not a legal document. Boundary lines are  
generated for this map only. Private lands under government  
management may not be shown. Shaded areas indicate  
existing private lands.

Legend:  
UTM Zone 18Q, August 2011, November 2016  
Scale: U.S. Census Bureau, 2011 - 2017  
Map: National Hydrography Dataset, 2011 - 2016  
Contour: National Hydrography Dataset, 2011 - 2016  
Boundary: National Hydrography Dataset, 2011 - 2016  
Public Land Survey System: see metadata file 2011 - 2017  
Water: FWS National Wetlands Inventory, 1998 - 2012



PORT ARTHUR SOUTH, TX, LA  
2019



Attachment D  
Supplemental Permit Information Form

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

### FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

#### TCEQ USE ONLY:

Application type: \_\_\_\_Renewal \_\_\_\_Major Amendment X Minor Amendment \_\_\_\_New

County: Jefferson Segment Number: \_\_\_\_\_

Admin Complete Date: \_\_\_\_\_

Agency Receiving SPIF:

\_\_\_\_ Texas Historical Commission

\_\_\_\_ U.S. Fish and Wildlife

\_\_\_\_ Texas Parks and Wildlife Department

\_\_\_\_ U.S. Army Corps of Engineers

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

Complete this form as a separate document. TCEQ will mail a copy to each agency as required by our agreement with EPA. If any of the items are not completely addressed or further information is needed, we will contact you to provide the information before issuing the permit. Address each item completely.

**Do not refer to your response to any item in the permit application form.** Provide each attachment for this form separately from the Administrative Report of the application. The application will not be declared administratively complete without this SPIF form being completed in its entirety including all attachments. Questions or comments concerning this form may be directed to the Water Quality Division's Application Review and Processing Team by email at [WQ-ARPTeam@tceq.texas.gov](mailto:WQ-ARPTeam@tceq.texas.gov) or by phone at (512) 239-4671.

The following applies to all applications:

1. Permittee: Monument Chemical Port Arthur, LLC

Permit No. WQ0003544000

EPA ID No. TX0116360

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

2450 South Gulfway Drive, Port Arthur, Jefferson County



Provide the name, address, phone and fax number of an individual that can be contacted to answer specific questions about the property.

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

First and Last Name: Narayan Dave

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

Title: Global Environmental Manager

Mailing Address: P.O. Box 1421

City, State, Zip Code: Port Arthur, TX, 77641

Phone No.: (832) 376-2046 Ext.:  Fax No.:

E-mail Address: ndave@monumentchemical.com

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

N/A

4. Provide a description of the effluent discharge route. The discharge route must follow the flow of effluent from the point of discharge to the nearest major watercourse (from the point of discharge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify the classified segment number.

From the plant site through a 20" pipe to the West Turning Basin of the Intracoastal Waterway, thence to the Sabine-Neches Canal Tidal in Segment No. 0703 of the Neches-Trinity Coastal Basin

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

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

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

- ☐ Proposed access roads, utility lines, construction easements
- ☐ Visual effects that could damage or detract from a historic property's integrity
- ☐ Vibration effects during construction or as a result of project design
- ☐ Additional phases of development that are planned for the future
- ☐ Sealing caves, fractures, sinkholes, other karst features

☐ Disturbance of vegetation or wetlands

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

N/A

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

N/A

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

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

N/A

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

N/A

Attachment E  
Permit Language Proposal

**From:** Shannon Gibson [<mailto:Shannon.Gibson@tceq.texas.gov>]  
**Sent:** Tuesday, February 04, 2020 3:20 PM  
**To:** John Thibodeaux <[John.Thibodeaux@tceq.texas.gov](mailto:John.Thibodeaux@tceq.texas.gov)>  
**Cc:** Hailey V. Cofty <[hcofty@wcmgroup.com](mailto:hcofty@wcmgroup.com)>; Alison Davis <[adavis@wcmgroup.com](mailto:adavis@wcmgroup.com)>  
**Subject:** RE: KMTEX, LLC TPDES No. WQ0003544000

Good afternoon John,

Sorry we have not been able to touch base, but I am following up on Permit No. WQ0003544000 for KMTEX, LLC.

The permittee indicated in their permit application that a weir would be used to estimate the flow discharged via Outfall 001; however, the draft was mistakenly issued specifying a meter. The Wastewater Permitting Section concurs that the flow measurement requirements should be reviewed and resolved during the next permit action.

Please let me know if I can provide anything further at this time.

Best Regards,  
Shannon Gibson  
Environmental Permit Specialist  
Industrial Wastewater Permitting - MC 148  
Texas Commission on Environmental Quality  
P.O. Box 13087  
Austin, Texas 78711-3087  
(512) 239 – 4284

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[www.tceq.texas.gov/customersurvey](http://www.tceq.texas.gov/customersurvey)



**From:** Alison Davis <[adavis@wcmgroup.com](mailto:adavis@wcmgroup.com)>  
**Sent:** Monday, February 3, 2020 12:50 PM  
**To:** Shannon Gibson <[Shannon.Gibson@tceq.texas.gov](mailto:Shannon.Gibson@tceq.texas.gov)>



**Cc:** Hailey V. Cofty <[hcofty@wcmgroup.com](mailto:hcofty@wcmgroup.com)>; John Thibodeaux <[John.Thibodeaux@tceq.texas.gov](mailto:John.Thibodeaux@tceq.texas.gov)>  
**Subject:** RE: KMTEX, LLC TPDES No. WQ0003544000

Shannon,

Have you had any luck getting ahold of John Thibodeaux at the TCEQ Region?

The resolution of this investigation item is due date to the region Wednesday, February 5, 2020.

Thanks,

**Alison Davis**

**The WCM Group, Inc.**

Office: 281-446-7070

Direct: 281-964-3448

Cell: 281-702-8574

[adavis@wcmgroup.com](mailto:adavis@wcmgroup.com)

---

**From:** Alison Davis  
**Sent:** Wednesday, January 22, 2020 9:17 AM  
**To:** Shannon Gibson <[Shannon.Gibson@tceq.texas.gov](mailto:Shannon.Gibson@tceq.texas.gov)>  
**Cc:** Hailey V. Cofty <[hcofty@wcmgroup.com](mailto:hcofty@wcmgroup.com)>  
**Subject:** RE: KMTEX, LLC TPDES No. WQ0003544000

Shannon,

Thanks you for following up. The resolution of this investigation item is due date to the region February 5, 2020.

Thanks again,

Alison

---

**From:** Shannon Gibson [<mailto:Shannon.Gibson@tceq.texas.gov>]  
**Sent:** Wednesday, January 22, 2020 7:28 AM  
**To:** Alison Davis <[adavis@wcmgroup.com](mailto:adavis@wcmgroup.com)>  
**Cc:** Hailey V. Cofty <[hcofty@wcmgroup.com](mailto:hcofty@wcmgroup.com)>  
**Subject:** RE: KMTEX, LLC TPDES No. WQ0003544000

Good morning Allison,

Many apologies but I have not sent this letter yet as John and I have not been able to touch base.

I am hoping to speak with him today and will include you on any letter/email sent to him regarding permitting's position on the flow meter issue; however, I will keep you updated on any further delays.

Best Regards,  
Shannon Gibson  
Environmental Permit Specialist  
Industrial Wastewater Permitting - MC 148  
Texas Commission on Environmental Quality  
P.O. Box 13087  
Austin, Texas 78711-3087  
(512) 239 – 4284

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[www.tceq.texas.gov/customersurvey](http://www.tceq.texas.gov/customersurvey)



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**From:** Alison Davis <[adavis@wcmgroup.com](mailto:adavis@wcmgroup.com)>  
**Sent:** Thursday, January 16, 2020 11:43 AM  
**To:** Shannon Gibson <[Shannon.Gibson@tceq.texas.gov](mailto:Shannon.Gibson@tceq.texas.gov)>  
**Cc:** Hailey V. Cofty <[hcofty@wcmgroup.com](mailto:hcofty@wcmgroup.com)>  
**Subject:** RE: KMTEX, LLC TPDES No. WQ0003544000

Shannon,

The inspector, John Thibodeaux, contacted me since sending this e-mail. He stated that a letter from the permitting team identifying that the flow meter requirements need to be reviewed and resolved during the next permit action would be sufficient to consider the current permit violation satisfied.

I am in the office all day today and tomorrow. Please do not hesitate to contact me with any questions or to discuss.

Thanks,

Alison

---

**From:** Alison Davis  
**Sent:** Thursday, January 16, 2020 10:52 AM  
**To:** Shannon Gibson <[Shannon.Gibson@tceq.texas.gov](mailto:Shannon.Gibson@tceq.texas.gov)>  
**Cc:** Hailey Cofty ([hcofty@wcmgroup.com](mailto:hcofty@wcmgroup.com)) <[hcofty@wcmgroup.com](mailto:hcofty@wcmgroup.com)>

**Subject:** KMTEX, LLC TPDES No. WQ0003544000

Shannon,

Before the holidays we had a brief conversation regarding the flow meter requirement (Other Requirement No. 5) and the Effluent Limitations and Monitoring Requirements for flow (frequency – continuous; type-weir) identified in the KMTEX, LLC TPDES No. WQ0003544000.

As I mentioned before the TCEQ Beaumont Region 10 Office conducted an investigation and identified that the facility is in violation of the permit for not having a flow meter (Other Requirement No 5.). The Outfall is located subgrade, typically a very low flow from a 20 in pipe, influenced by tides, and heavy rainfall events (stormwater from the surrounding area resulting in flooding/ Outfall is under water). Based on all these factors, a flow meter at Outfall 001 is not feasible. Please advise on how to resolve this permit requirement since installing a flow meter is costly and is unlikely to provide accurate data given the facility specific concerns identified herein.

Thanks,

**Alison Davis**

**The WCM Group, Inc.**

Office: 281-446-7070

Direct: 281-964-3448

Cell: 281-702-8574

[adavis@wcmgroup.com](mailto:adavis@wcmgroup.com)

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# EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

Outfall Number 001

- During the period beginning upon the date of permit issuance and lasting through the date of permit expiration, the permittee is authorized to discharge treated process wastewater, process area stormwater, utility wastewater (non-contact cooling water, boiler blowdown, and firewater test waters), and stormwater (including stormwater from diked tank farm areas) subject to the following effluent limitations:

The daily average flow of effluent shall not exceed 0.10 million gallons per day (MGD). The daily maximum flow shall not exceed 0.20 MGD.

Effluent Characteristics	Discharge Limitations				Minimum Self-Monitoring Requirements	
	Daily Average lbs/day	mg/L	Daily Maximum lbs/day	mg/L	Single Grab mg/L	Report Daily Average and Daily Maximum Measurement Frequency Sample Type
Flow	0.10 MGD		0.20 MGD		N/A	1 continuous Record 2
Biochemical Oxygen Demand (5-day)	9.28	30	23.78	90	90	1/week <sup>1</sup> Grab
Chemical Oxygen Demand	N/A	N/A	N/A	200	200	1/week <sup>1</sup> Grab
Total Suspended Solids <sup>3</sup>	16.69	30	48.48	100	100	1/week <sup>1</sup> Grab
Oil and Grease	N/A	N/A	N/A	15	15	1/week <sup>1</sup> Grab
Zinc, Total	N/A	0.21	N/A	0.44	0.44	1/week <sup>1</sup> Grab
Acenaphthene	0.0025	N/A	0.0062	N/A	0.018	1/year <sup>1</sup> Grab
Acenaphthylene	0.0025	N/A	0.0062	N/A	0.018	1/year <sup>1</sup> Grab
Acrylonitrile	0.012	N/A	0.031	N/A	0.087	1/year <sup>1</sup> Grab
Anthracene	0.0025	N/A	0.0062	N/A	0.018	1/year <sup>1</sup> Grab
Benzene	0.008	N/A	0.018	N/A	0.050	1/year <sup>1</sup> Grab
Benzo(a)anthracene	0.00071	N/A	0.0015	N/A	0.005	1/year <sup>1</sup> Grab
3,4-Benzofluoranthene	0.0026	N/A	0.0063	N/A	0.018	1/year <sup>1</sup> Grab
Benzo(k)fluoranthene	0.0025	N/A	0.0062	N/A	0.018	1/year <sup>1</sup> Grab
Benzo(a)pyrene	0.000071	N/A	0.00015	N/A	0.005	1/year <sup>1</sup> Grab
Bis(2-ethylhexyl) phthalate	0.013	N/A	0.034	N/A	0.097	1/year <sup>1</sup> Grab
Carbon Tetrachloride	0.019	N/A	0.050	N/A	0.143	1/year <sup>1</sup> Grab
Chlorobenzene	0.019	N/A	0.050	N/A	0.143	1/year <sup>1</sup> Grab
Chloroethane	0.015	N/A	0.039	N/A	0.111	1/year <sup>1</sup> Grab
Chloroform	0.015	N/A	0.043	N/A	0.122	1/year <sup>1</sup> Grab
Chrysene	0.0025	N/A	0.0062	N/A	0.018	1/year <sup>1</sup> Grab
Di-n-butyl phthalate	0.0026	N/A	0.006	N/A	0.016	1/year <sup>1</sup> Grab
1,2-Dichlorobenzene	0.026	N/A	0.10	N/A	0.298	1/year <sup>1</sup> Grab
1,3-Dichlorobenzene	0.019	N/A	0.050	N/A	0.143	1/year <sup>1</sup> Grab
1,4-Dichlorobenzene	0.019	N/A	0.050	N/A	0.143	1/year <sup>1</sup> Grab
1,1-Dichloroethane	0.0029	N/A	0.0078	N/A	0.022	1/year <sup>1</sup> Grab

Number: 1

Proposed: 1/day

Number: 2

Proposed: Instantaneous

5. The permittee shall <sup>1</sup>~~continuously record flow via a flow meter~~ at Outfall 001. Compliance with the flow limitations established at Outfall 001 on page 2 of this permit will be based upon days in which there is dry weather flow only. For the purpose of this permit, dry weather flow is defined as days in which the total flow at Outfall 001 consists of any of the following sources: process wastewater, utility wastewater, and stormwater runoff resulting from rainfall less than 0.1 inches in a 24-hour period. The permittee <sup>2</sup>~~shall maintain a permanent rain gage at the plant site and keep daily records of rainfall and the resulting flow at Outfall 001.~~ Flow at Outfall 001 during days when the rainfall exceeds 0.1 inch during any 24-hour period must not be used in calculating the daily average or daily maximum flows to be submitted on the monthly effluent report forms <sup>3</sup>
6. The permittee shall provide written notification to the TCEQ Industrial Permits Team (MC 148) and the Region 10 Office of any change in the method by which the facility obtains water for cooling purposes. This notification must be submitted 30 days prior to any such change and must include a description of the planned changes. The TCEQ may, upon review of the notification, reopen the permit to include additional terms and conditions as necessary.

Number: 1

---

Proposed: The permittee shall record flow via an effluent flow measuring device or other acceptable means by which effluent flow may be determined at Outfall 001.

Number: 2

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Proposed: The permittee shall maintain an on-site rain gauge, a representative weather station, or subject to TCEQ's approval, an alternative means of compliance. Daily records of rainfall and the resulting flow at Outfall 001 shall be documented and maintained.

Number: 3

---

Proposed Addition: High tide conditions shall be documented whenever these conditions may impact sample accuracy. Flow measurements shall be documented at the next available opportunity to ensure representative results.

## Candice Calhoun

---

**From:** Dave, Narayan <ndave@monumentchemical.com>  
**Sent:** Thursday, June 5, 2025 12:27 PM  
**To:** Candice Calhoun  
**Cc:** Lough, Taylor  
**Subject:** RE: Application to Amend Permit No. WQ0003544000 - Notice of Deficiency  
**Attachments:** MCPA- Updated Amin Report - 2025 Minor Amendment Application.docx; MCPA-20972\_Plain Language Summary.docx; MCPA - - Topo Map 1 Mile Radius.pdf

Candice,

As requested, and per our conversation, please find the attached items.

1. Administrative report on the current version of TCEQ form number 10411.
2. Updated Plain Language Summary (PLS) – Removed the reference of renewal and updated discharge rate matching with the approved permit.
3. The USGS map showing the applicant's property boundary, facility boundary, one-mile radius, point of discharge, or the highlighted discharge route for three stream miles or until it reaches a classified segment.

I trust this helps finalize the application, making it complete and ready for technical review.

Thank you so much for your great help and guidance throughout the process.

Regards,  
Narayan

---

**From:** Candice Calhoun <Candice.Calhoun@tceq.texas.gov>  
**Sent:** Friday, May 23, 2025 9:51 AM  
**To:** Lough, Taylor <tlough@monumentchemical.com>  
**Cc:** Dave, Narayan <ndave@monumentchemical.com>  
**Subject:** [EXT] Application to Amend Permit No. WQ0003544000 - Notice of Deficiency  
**Importance:** High

Good morning, Ms. Lough,

The attached Notice of Deficiency (NOD) letter dated May 23, 2025, requests additional information needed to declare the application administratively complete. Please send complete response to my attention no later than June 6, 2025.

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](mailto:candice.calhoun@tceq.texas.gov)

How is our customer service? Fill out our online customer satisfaction survey at  
[www.tceq.texas.gov/customersurvey](http://www.tceq.texas.gov/customersurvey)



REVISION DATE:	
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## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

# SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

## Summary of Application (in plain language) 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 of your facility and application as required by Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H. You may modify the template as necessary to accurately describe your 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 you 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. After filling in the information for your facility delete these instructions.

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 INDUSTRIAL 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.*

Monument Chemical Port Arthur, LLC (CN604105007) operates Monument Chemical Port Arthur, LLC (RN100640283), an organic chemical vacuum distillation facility. The facility is located at 2450 South Gulfway Drive, in Port Arthur, Jefferson County, Texas 77640. Monument Chemical Port Arthur, LLC has applied to the Texas Commission on Environmental Quality (TCEQ) for a minor amendment of Texas Pollutant Discharge Elimination System (TPDES) Permit Number WQ0003544000, which authorizes the discharge of treated process wastewater, process area stormwater, utility wastewater (non-contact cooling water, boiler blowdown, and firewater test waters), and stormwater (including stormwater from diked tankfarm areas) at a daily average flow not to exceed 100,000 gallons per day via Outfall 001. The permit application is available for viewing and copying at the Port Arthur Public Library, 4615 9th Avenue, Port Arthur, TX. 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

exact location, refer to the application. <https://arcg.is/0iKS9v>. This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain biochemical oxygen demand (BOD5), organic carbon, suspended solids, and various organics from manufacturing operations that are associated with 40 CFR 414, Subpart G. Monument Chemical Port Arthur, LLC generates byproduct water, washwaters, contact and non-contact stormwater, non-contact cooling water, boiler blowdown, and firewater test waters which are treated by *gravity separation, solids filtration, reduction of organic chemicals, using microbes with aeration, and activated carbon polishing, if necessary. Process wastewater is discharged in batches if it meets effluent limitations, otherwise it is commercially disposed of by a licensed contractor. Non-contact water is not treated prior to discharge. Process and non-contact waters are commingled at a junction sump and monitoring samples are taken prior to discharge via Outfall 001.*

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

### AGUAS RESIDUALES INDUSTRIALES /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.*

Monument Chemical Port Arthur, LLC (CN604105007) opera Monument Chemical Port Arthur, LLC RN100640283, una instalación de destilación al vacío de productos químicos orgánicos. La instalación está ubicada en 2450 South Gulfway Drive, en Port Arthur, en Port Arthur, Condado de Jefferson, Texas 77640. Monument Chemical Port Arthur, LLC ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) una modificación menor del Permiso Número del Sistema de eliminación de descargas de contaminantes de Texas (TPDES) Número de permiso WQ0003544000, que autoriza la descarga de aguas residuales de proceso tratadas, aguas pluviales del área de proceso, aguas residuales de servicios públicos (agua de enfriamiento sin contacto, purga de calderas y aguas de prueba de agua contra incendios) y aguas pluviales (incluidas las aguas pluviales de áreas de tanques con diques) a un flujo promedio diario que no exceda los 100,000 galones por día a través del Desagüe 001. La solicitud de permiso está disponible para ver y copiar en la Biblioteca Pública de Port Arthur, 4615 9th Avenue, Port Arthur, TX. Este enlace a un mapa electrónico de la ubicación general del sitio o instalación se proporciona como cortesía pública y no como parte de la solicitud o aviso. Para conocer la ubicación exacta, consulte la aplicación. <https://arcg.is/OiKS9v>. Este permiso no autorizará una descarga de contaminantes en el agua en el estado.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno (DBO5), carbono orgánico, sólidos suspendidos y varios compuestos orgánicos de las operaciones de fabricación que están asociadas con 40 CFR 414, Subparte G. Monument Chemical Port Arthur, LLC genera subproductos de agua, aguas de lavado, aguas pluviales con y sin contacto, agua de refrigeración sin contacto, purga de calderas y aguas de prueba de agua contra incendios que se están tratado por separación por gravedad, filtración de sólidos, reducción de productos químicos orgánicos, uso de microbios con aireación y pulido con carbón activado, si es necesario. Las aguas residuales del proceso se descargan en lotes si cumplen con los límites de efluentes; de lo contrario, un contratista autorizado las elimina comercialmente. El agua sin contacto no se trata antes de la descarga. Las aguas de proceso y sin contacto se mezclan en un sumidero de unión y se toman muestras de control antes de la descarga a través del Emisario 001.



## INSTRUCTIONS

1. Enter the name of applicant in this section. The applicant name should match the name associated with the customer number.
2. Enter the Customer Number in this section. Each Individual or Organization is issued a unique 11-digit identification number called a CN (e.g. CN123456789).
3. Choose “operates” in this section for existing facility applications or choose “proposes to operate” for new facility applications.
4. Enter the name of the facility in this section. The facility name should match the name associated with the regulated entity number.
5. Enter the Regulated Entity number in this section. Each site location is issued a unique 11-digit identification number called an RN (e.g. RN123456789).
6. Choose the appropriate article (a or an) to complete the sentence.
7. Enter a description of the facility in this section. For example: steam electric generating facility, nitrogenous fertilizer manufacturing facility, etc.
8. Choose “is” for an existing facility or “will be” for a new facility.
9. Enter the location of the facility in this section.
10. Enter the City nearest the facility in this section.
11. Enter the County nearest the facility in this section.
12. Enter the zip code for the facility address in this section.
13. Enter a summary of the application request in this section. For example: renewal to discharge 25,000 gallons per day of treated domestic wastewater, new application to discharge process wastewater and stormwater on an intermittent and flow-variable basis, or major amendment to reduce monitoring frequency for pH, etc. If more than one outfall is included in the application, provide applicable information for each individual outfall.
14. List all pollutants expected in the discharge from this facility in this section. If applicable, refer to the pollutants from any federal numeric effluent limitations that apply to your facility.
15. Enter the discharge types from your facility in this section (e.g., stormwater, process wastewater, once through cooling water, etc.)
16. Choose the appropriate verb tense to complete the sentence.
17. Enter a description of the wastewater treatment used at your facility. Include a description of each process, starting with initial treatment and finishing with the outfall/point of disposal. Use additional lines for individual discharge types if necessary.

Questions or comments concerning this form may be directed to the Water Quality Division's Application Review and Processing Team by email at [WQ-ARPTeam@tceq.texas.gov](mailto:WQ-ARPTeam@tceq.texas.gov) or by phone at (512) 239-4671.

### **Example 1: Industrial Wastewater TPDES Application (ENGLISH)**

*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 are not federal enforceable representations of the permit application.*

ABC Corporation (CN600000000) operates the Starr Power Station (RN10000000000), a two-unit gas-fired electric generating facility. Unit 1 has a generating capacity of 393 megawatts (MWs) and Unit 2 has a generating capacity of 528 MWs. The facility is located at 1356 Starr Street, near the City of Austin, Travis County, Texas 78753.

This application is for a renewal to discharge 870,000,000 gallons per day of once through cooling water, auxiliary cooling water, and also authorizes the following waste streams monitored inside the facility (internal outfalls) before it is mixed with the other wastewaters authorized for discharge via main Outfall 001, referred to as “previously monitored effluents” (low-volume wastewater, metal-cleaning waste, and stormwater (from diked oil storage area yards and storm drains)) via Outfall 001. Low-volume waste sources, metal-cleaning waste, and stormwater drains on a continuous and flow-variable basis via internal Outfall 101.

The discharge of once through cooling water via Outfall 001 and low-volume waste and metal-cleaning waste via Outfall 101 from this facility is subject to federal effluent limitation guidelines at 40 CFR Part 423. The pollutants expected from these discharges based on 40 CFR Part 423 are: free available chlorine, total residual chlorine, total suspended solids, oil and grease, total iron, total copper, and pH. Temperature is also expected from these discharges. Additional potential pollutants are included in the Industrial Wastewater Application Technical Report, Worksheet 2.0.

Cooling water and boiler make-up water are supplied by Lake Starr Reservoir. The City of Austin municipal water plant (CN600000000, PWS 00000) supplies the facility’s potable water and serves as an alternate source of boiler make-up water. Water from the Lake Starr Reservoir is withdrawn at the intake structure and treated with sodium hypochlorite to prevent biofouling and sodium bromide as a chlorine enhancer to improve efficacy and then passed through condensers and auxiliary equipment on a once-through basis to cool equipment and condense exhaust steam.

Low-volume wastewater from blowdown of boiler Units 1 and 2 and metal-cleaning wastes receive no treatment prior to discharge via Outfall 101. Plant floor and equipment drains and stormwater runoff from diked oil storage areas, yards, and storm drains are routed through an oil and water separator prior to discharge via Outfall 101. Domestic wastewater, blowdown, and backwash water from the service water filter, clarifier, and sand filter are routed to the Starr Creek Domestic Sewage Treatment Plant, TPDES Permit No. WQ0010000001, for treatment and disposal. Metal-cleaning waste from equipment cleaning is generally disposed of off-site.

## **Example 2: Domestic Wastewater TPDES Renewal application**

*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 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.*

The City of Texas (CN000000000) operates the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the complete mix mode. The facility is located at 123 Texas Street, near the City of More Texas, Texas County, Texas 71234.

This application is for a renewal to discharge at an annual average flow of 1,200,000 gallons per day of treated domestic wastewater via Outfalls 001 and 002.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, a grit chamber, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.

## **Example 3: Domestic Wastewater TPDES New Application**

*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 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.*

The City of Texas (CN000000000) proposes to operate the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the extended aeration mode. The facility will be located at 123 Texas Street, in the City of More Texas, Texas County, Texas 71234.

This application is for a new application to discharge at a daily average flow of 200,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include a bar screen, a grit chamber, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.

## **Example 4: Domestic Wastewater TLAP Renewal application**

*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 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations*

*of the permit application.*

The City of Texas (CN000000000) operates the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the complete mix mode. The facility is located at 123 Texas Street, near the City of More Texas, Texas County, Texas 71234.

This application is for a renewal to dispose a daily average flow not to exceed 76,500 gallons per day of treated domestic wastewater via public access subsurface drip irrigation system with a minimum area of 32 acres. This permit will not authorize a discharge of pollutants into water in the state.

Land application of domestic wastewater from the facility are expected to contain five-day biochemical oxygen demand (BOD<sub>5</sub>), total suspended solids (TSS), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, an equalization basin, an aeration basin, a final clarifier, an aerobic sludge digester, tertiary filters, and a chlorine contact chamber. In addition, the facility includes a temporary storage that equals to at least three days of the daily average flow.





## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

# INDUSTRIAL WASTEWATER PERMIT APPLICATION CHECKLIST

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

APPLICANT NAME: Monument Chemical Port Arthur, LLC

PERMIT NUMBER (If new, leave blank): WQ0003544000

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

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

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-inst<sup>1</sup>](#)).

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

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

Applicant Name: Monument Chemical Port Arthur, LLC

Permit No.: WQ0003544000

EPA ID No.: TX0116360

Expiration Date: January 5, 2029

- 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: Clarifying permit language to accurately reflect site's flow measuring device, sample type, and sample frequency to which TCEQ agreed in February 2020 (Attachment E); however, it was not reflected in the 2024 permit renewal. Additionally, including a provision to account for high tide conditions and revising the description of rainfall data collection to better align with the site's stormwater permit.

<sup>1</sup> [https://www.tceq.texas.gov/publications/search\\_forms.html](https://www.tceq.texas.gov/publications/search_forms.html)

For TCEQ Use Only

Segment Number \_\_\_\_\_ County \_\_\_\_\_

Expiration Date \_\_\_\_\_ Region \_\_\_\_\_

Permit Number \_\_\_\_\_

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)	<input type="checkbox"/> \$350	<input type="checkbox"/> \$350	<input type="checkbox"/> \$315	<input type="checkbox"/> \$150
Minor facility subject to EPA categorical effluent guidelines (40 CFR Parts 400-471)	<input type="checkbox"/> \$1,250	<input type="checkbox"/> \$1,250	<input type="checkbox"/> \$1,215	<input checked="" type="checkbox"/> \$150
Major facility	N/A <sup>2</sup>	<input type="checkbox"/> \$2,050	<input type="checkbox"/> \$2,015	<input type="checkbox"/> \$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: 765204 and 765205

Copy of voucher attachment: See Attached

## Item 2. Applicant Information (Instructions, Pages 26)

a. Customer Number, if applicant is an existing customer: CN604105007

**Note:** Locate the customer number using the [TCEQ's Central Registry Customer Search](#)<sup>3</sup>.

b. Legal name of the entity (applicant) applying for this permit: Monument Chemical Port Arthur, LLC.

**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: Mr. Full Name (Last/First Name): Griffith/Kurt

Title: Director of Operations

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

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

☒ Yes ☐ No

<sup>2</sup> All facilities are designated as minors until formally classified as a major by EPA.

<sup>3</sup> <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: [Attachment A.](#)

### 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: Mr.      Full Name (Last/First Name): Dave/Narayan

Title: Global Environmental Leader

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

Organization Name: Monument Chemical Port Arthur, LLC.

Mailing Address: P.O. Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (832) 376-2046

Email: ndave@monumentchemical.com

b. ☒ Administrative Contact      ☐ Technical Contact

Prefix: Ms.      Full Name (Last/First Name): Lough/Taylor

Title: Site Environmental Specialist

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

Organization Name: Monument Chemical Port Arthur, LLC.

Mailing Address: P.O. Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (409) 984-1425 Email: Tlough@monumentchemical.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: Mr. Full Name (Last/First Name): Dave/Narayan  
Title: Global Environmental Leader Credential: [Click to enter text.](#)  
Organization Name: Monument Chemical Port Arthur, LLC.  
Mailing Address: P.O. Box 1421 City/State/Zip: Port Arthur/TX/77641  
Phone No: (832) 376-2046 Email: ndave@monumentchemical.com
- b. Prefix: Ms. Full Name (Last/First Name): Lough/Taylor  
Title: Site Environmental Specialist Credential: [Click to enter text.](#)  
Organization Name: Monument Chemical Port Arthur, LLC.  
Mailing Address: P.O. Box 1421 City/State/Zip: Port Arthur/TX/77641  
Phone No: (409) 984-1425 Email: Tlough@monumentchemical.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: Mr. Full Name (Last/First Name): Quinn/Ian  
Title: Site Leader Credential: [Click to enter text.](#)  
Organization Name: Monument Chemical Port Arthur, LLC  
Mailing Address: P.O. Box 1421 City/State/Zip: Port Arthur/TX/77641  
Phone No: (832) 376-2046 Email: Iquinn@monumentchemical.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): Lough/Taylor  
Title: Site Environmental Specialist Credential: [Click to enter text.](#)  
Organization Name: Monument Chemical Port Arthur, LLC  
Mailing Address: P.O. Box 1421 City/State/Zip: Port Arthur/TX/77641  
Phone No: (409) 984-1425 Email: Tlough@monumentchemical.com

## Item 9. Notice Information (Instructions, Pages 28)

### a. Individual Publishing the Notices

Prefix: Mr. Full Name (Last/First Name): Dave/Narayan

Title: Global Environmental Leader Credential: Click to enter text.

Organization Name: Monument Chemical Port Arthur, LLC

Mailing Address: P.O. Box 1421 City/State/Zip: Port Arthur/TX/77641

Phone No: (832) 376-2046 Email: ndave@monumentchemical.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: ndave@monumentchemical.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: Mr. Full Name (Last/First Name): Dave/Narayan

Title: Global Environmental Leader Credential: Click to enter text.

Organization Name: Monument Chemical Port Arthur, LLC

Phone No: (832) 376-2046 Email: ndave@monumentchemical.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: City of Port Arthur Public Library Location within the building: Foyer/Entrance

Physical Address of Building: 4615 9th Avenue

City: Port Arthur County: Jefferson

### 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: Attachment B

- 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: RN100640283

**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): Monument Chemical Port Arthur, LLC

- 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: Monument Chemical Port Arthur, LLC

Mailing Address: P.O. Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (409) 994-4200

Email: Click to enter text.

- 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: Monument Chemical Port Arthur, LLC

Mailing Address: P.O. Box 1421

City/State/Zip: Port Arthur/TX/77641

Phone No: (409) 994-4200 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 (In some cases, a lease may not suffice - see instructions). Attachment: [Click to enter text.](#)

g. Owner of effluent TLAP disposal site (if applicable): [Click to enter text.](#)

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

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

Prefix: [Click to enter text.](#) 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: C

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): Port Arthur

- g. County in which the outfalls(s) is/are located: Jefferson

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

- k. County in which the disposal site is located: [Click to enter text.](#)

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

## 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: WQ0003544000

Applicant Name: Click to enter text.

Certification: I, Kurt Griffith, 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): Kurt Griffith

Signatory title: Director of Operations

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Use blue ink)

Subscribed and Sworn to before me by the said \_\_\_\_\_  
on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
My commission expires on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

[SEAL]

\_\_\_\_\_  
County, Texas

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



# INDUSTRIAL WASTEWATER PERMIT APPLICATION

## ADMINISTRATIVE REPORT 1.1

The following information is required for new and amendment applications.

### Item 1. Affected Landowner Information (Instructions, Page 35)

- a. Attach a landowner map or drawing, with scale, as applicable. Check the box next to each item to confirm it has been provided.
- ☐ The applicant's property boundaries.
  - ☐ The facility site boundaries within the applicant's property boundaries.
  - ☐ The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone.
  - ☐ The property boundaries of all landowners surrounding the applicant's property. (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
  - ☐ The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream.
  - ☐ The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge.
  - ☐ The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides.
  - ☐ The boundaries of the effluent disposal site (e.g., irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property.
  - ☐ The property boundaries of all landowners surrounding the applicant's property boundaries where the effluent disposal site is located.
  - ☐ The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners within one-quarter mile of the applicant's property boundaries where the sewage sludge land application site is located.
  - ☐ The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (e.g., sludge surface disposal site or sludge monofil) is located.

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

- b. ☐ that the landowners list has also been provided as mailing labels in electronic format (Avery 5160).
- c. Check this box to confirm a separate list with the landowners' names and mailing addresses cross-referenced to the landowner's map has been provided. Provide the source of the landowners' names and mailing addresses: [Click to enter text.](#)
- e. As required by Texas Water Code § 5.115, is any permanent school fund land affected by this application?
- ☐ Yes ☐ No

If yes, provide the location and foreseeable impacts and effects this application has on the land(s): [Click to enter text.](#)

## **Item 2. Original Photographs (Instructions, Page 37)**

Provide original ground level photographs. Check the box next to each of the following items to indicate it is included.

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

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

# **INDUSTRIAL WASTEWATER PERMIT APPLICATION**

## **SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)**

This form applies to TPDES permit applications only. Complete and attach the Supplemental Permit information Form (SPIF) (TCEQ Form 20971).

**Attachment:** D

# WATER QUALITY PERMIT

## PAYMENT SUBMITTAL FORM

Use this form to submit the Application Fee, if mailing the payment. (Instructions, Page 36-37)

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

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

*BY REGULAR U.S. MAIL*

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

*BY OVERNIGHT/EXPRESS MAIL*

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

**Fee Code:** WQP      **Permit No:** WQ000 [Click to enter text.](#)

1. Check or Money Order Number: [Click to enter text.](#)
2. Check or Money Order Amount: [Click to enter text.](#)
3. Date of Check or Money Order: [Click to enter text.](#)
4. Name on Check or Money Order: [Click to enter text.](#)
5. APPLICATION INFORMATION

Name of Project or Site: [Click to enter text.](#)

Physical Address of Project or Site: [Click to enter text.](#)

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

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

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



# ATTACHMENT 1

## INDIVIDUAL INFORMATION

### Item 1. Individual information (Instructions, Page 38)

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

Prefix (Mr., Ms., or Miss): [Click to enter text.](#)

Full legal name (first, middle, and last): [Click to enter text.](#)

Driver's License or State Identification Number: [Click to enter text.](#)

Date of Birth: [Click to enter text.](#)

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

City, State, and Zip Code: [Click to enter text.](#)

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

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

E-mail Address: [Click to enter text.](#)

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

# INDUSTRIAL WASTEWATER PERMIT APPLICATION CHECKLIST OF COMMON DEFICIENCIES

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

- ☒ Core Data Form (TCEQ Form No. 10400)  
*(Required for all applications types. Must be completed in its entirety and signed.  
Note: Form may be signed by applicant representative.)*
- ☒ Correct and Current Industrial Wastewater Permit Application Forms  
*(TCEQ Form Nos. 10055 and 10411. Version dated 5/10/2019 or later.)*
- ☐ Water Quality Permit Payment Submittal Form (Page 14)  
*(Original payment sent to TCEQ Revenue Section. See instructions for mailing address.)*
- ☒ 7.5 Minute USGS Quadrangle Topographic Map Attached  
*(Full-size map if seeking "New" permit.  
8 ½ x 11 acceptable for Renewals and Amendments.)*
- ☒ N/A ☐ Current/Non-Expired, Executed Lease Agreement or Easement Attached
- ☒ N/A ☐ Landowners Map  
*(See instructions for landowner requirements.)*

## Things to Know:

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

- ☒ N/A ☐ Landowners Labels and Cross Reference List  
*(See instructions for landowner requirements.)*
- ☐ Electronic Application Submittal  
*(See application submittal requirements on page 23 of the instructions.)*
- ☐ Original signature per 30 TAC § 305.44 – Blue Ink Preferred  
*(If signature page is not signed by an elected official or principle executive officer,  
a copy of signature authority/delegation letter must be attached.)*

- ☒ Summary of Application (in Plain Language)