



# Technical Package Cover Page

## **This file contains the following documents:**

1. Summary of application (in plain language)
  - English
  - Alternative Language (Spanish)
2. First notice (NORI-Notice of Receipt of Application and Intent to Obtain a Permit)
  - English
  - Alternative Language (Spanish)
3. Second notice (NAPD-Notice of Preliminary Decision)
  - English
  - Alternative Language (Spanish)
4. Application materials \*
5. Draft permit \*
6. Technical summary or fact sheet \*

\* **NOTE:** This application was declared Administratively Complete before June 1, 2024. The application materials, draft permit, and technical summary or fact sheet are available for review at the Public Viewing Location provided in the NAPD.

## **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.*

Pilgrim's Pride Corporation (CN601276660 ) operates the Pilgrim's Pride Southwest Wastewater Treatment Plant RN102184041, a wastewater treatment plant treating industrial wastewater from poultry processing operations and a number of private residences. The facility is located at 664 FM 127 W, in Mt. Pleasant, Titus County, Texas 75455. This application is for a renewal of Wastewater Permit W0003017000 to discharge 3,500,000 gallons per day of treated effluent via Outfall 001.

Discharges from the facility are expected to contain pollutants listed in 40 CFR Part 432 including: 5-day biochemical oxygen demand, fecal coliform, oil and grease, total suspended solids, ammonia, total nitrogen, pH, and temperature. Additional potential pollutants from this discharge are included in the Industrial Wastewater Application Technical Report, Worksheet 2.0. Wastewater treated at this facility consists of a combination of process wastewaters from poultry first and further processing and protein conversion (rendering) operations along with industrial stormwater discharges from these operations and sanitary wastewater from a small number of private residences. Wastewater from these sources is treated by initial screening, biological treatment via anaerobic, anoxic/oxic, and aeration basins/lagoons, final clarification, tertiary filtration, chlorination, and dechlorination prior to discharge.

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

### **AGUAS RESIDUALES INDUSTRIALES/AGUAS PLUVIALES**

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0010037004

**APPLICATION.** City of Baird, 328 Market Street, Baird, Texas 79504, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0010037004 (EPA I.D. No. TX0125121) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 6,000 gallons per day. The water treatment facility is located at 240 Walnut Street, Baird, in Callahan County, Texas 79504. The discharge route is from the plant site to an unnamed ditch; thence to an unnamed tributary; thence to TP lake; thence unnamed tributary; thence to Mexia Creek; thence to Deep Creek; thence to Hubbard Creek; thence to Hubbard Creek Reservoir. TCEQ received this application on March 1, 2024. The permit application will be available for viewing and copying at Baird City Hall, 328 Market Street, Baird, Texas prior to the date this notice is published in the newspaper. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-99.392443,32.392825&level=18>

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

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

**OPPORTUNITY FOR A CONTESTED CASE HEARING.** After the deadline for submitting public comments, the Executive Director will consider all timely comments and prepare a response to all relevant and material, or significant public comments. **Unless the application is directly referred for a contested case hearing, the response to comments, and the Executive Director's decision on the application, will be mailed to everyone who**

**submitted public comments and to those persons who are on the mailing list for this application. If comments are received, the mailing will also provide instructions for requesting reconsideration of the Executive Director's decision and for requesting a contested case hearing.** A contested case hearing is a legal proceeding similar to a civil trial in state district court.

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

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

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

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

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

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

**AGENCY CONTACTS AND INFORMATION.** All public comments and requests must be submitted either electronically at <https://www14.tceq.texas.gov/epic/eComment/>, or in writing to the Texas Commission on Environmental Quality, Office of the Chief Clerk, MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Please be aware that any contact information you provide, including your name, phone number, email address and physical address will

become part of the agency's public record. For more information about this permit application or the permitting process, please call the TCEQ Public Education Program, Toll Free, at 1-800-687-4040 or visit their website at [www.tceq.texas.gov/goto/pep](http://www.tceq.texas.gov/goto/pep). Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from City of Baird at the address stated above or by calling Ms. Lori Higgins at 325-584-1212.

Issuance Date: April 19, 2024

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



## NOTICE OF APPLICATION AND PRELIMINARY DECISION FOR TPDES PERMIT FOR WASTEWATER

### RENEWAL

**PERMIT NO. WQ0010037004**

**APPLICATION AND PRELIMINARY DECISION.** City of Baird, 328 Market Street, Baird, Texas 79504, has applied to the Texas Commission on Environmental Quality (TCEQ) for a renewal of Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0010037004 which authorizes the discharge of treated filter backwash effluent from a water treatment plant at a daily average flow not to exceed 6,000 gallons per day. TCEQ received this application on March 1, 2024.

The facility is located at 240 Walnut Street, City of Baird, Callahan County, Texas 79504. The treated effluent is discharged to an unnamed ditch; thence to an unnamed tributary; thence to TP lake; thence to unnamed tributary; thence to Mexia Creek; thence to Deep Creek; thence to Hubbard Creek; thence to Hubbard Creek Reservoir in Segment No. 1233 of the Brazos River Basin. The unclassified receiving water uses are minimal aquatic life use for unnamed ditch and limited aquatic life use for unnamed tributary. The designated uses for Segment No. 1233 are high aquatic life use, public water supply, industrial water supply, oyster waters, navigation, and primary contact recreation. All determinations are preliminary and subject to additional review and/or revisions. This link to an electronic map of the site or facility's general location is provided as a public courtesy and is not part of the application or notice. For the exact location, refer to the application.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-99.3925,32.392777&level=18>

The TCEQ Executive Director has completed the technical review of the application and prepared a draft permit. The draft permit, if approved, would establish the conditions under which the facility must operate. The Executive Director has made a preliminary decision that this permit, if issued, meets all statutory and regulatory requirements. The permit application, Executive Director's preliminary decision, and draft permit are available for viewing and copying at Baird City Hall, 328 Market Street, Baird, Texas. The application, including any updates, and associated notices are available electronically at the following webpage:

<https://www.tceq.texas.gov/permitting/wastewater/tpdes-applications>.

**ALTERNATIVE LANGUAGE NOTICE.** Alternative language notice in Spanish is available at <https://www.tceq.texas.gov/permitting/wastewater/plain-language-summaries-and-public-notices>. El aviso de idioma alternativo en español está disponible en <https://www.tceq.texas.gov/permitting/wastewater/plain-language-summaries-and-public-notices>.

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

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

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

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

The Commission may only grant a request for a contested case hearing on issues the requestor submitted in their timely comments that were not subsequently withdrawn. **If a hearing is granted, the subject of a hearing will be limited to disputed issues of fact or mixed questions of fact and law relating to relevant and material water quality concerns submitted during the comment period. TCEQ may act on an application to renew a permit for discharge of wastewater without providing an opportunity for a contested case hearing if certain criteria are met.**

**EXECUTIVE DIRECTOR ACTION.** The Executive Director may issue final approval of the application unless a timely contested case hearing request or request for reconsideration is filed. If a timely hearing request or request for reconsideration is filed, the Executive Director will not issue final approval of the permit and will forward the application and request to the TCEQ Commissioners for their consideration at a scheduled Commission meeting.



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

**All written public comments and public meeting requests must be submitted to the Office of the Chief Clerk, MC 105, Texas Commission on Environmental Quality, P.O. Box 13087, Austin, TX 78711-3087 or electronically at [www.tceq.texas.gov/goto/comment](http://www.tceq.texas.gov/goto/comment) within 30 days from the date of newspaper publication of this notice.**

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

**AGENCY CONTACTS AND INFORMATION.** Public comments and requests must be submitted either electronically at [www.tceq.texas.gov/goto/comment](http://www.tceq.texas.gov/goto/comment), or in writing to the Texas Commission on Environmental Quality, Office of the Chief Clerk, MC 105, P.O. Box 13087, Austin, Texas 78711-3087. Any personal information you submit to the TCEQ will become part of the agency's record; this includes email addresses. For more information about this permit application or the permitting process, please call the TCEQ Public Education Program, Toll Free, at 1-800-687-4040 or visit their website at [www.tceq.texas.gov/goto/pep](http://www.tceq.texas.gov/goto/pep). Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from City of Baird at the address stated above or by calling Ms. Lori Higgins at 325-584-1212.

Issuance Date: October 7, 2024





TPDES PERMIT NO.  
WQ0010037004  
*[For TCEQ office use only - EPA I.D.  
No. TX0125121]*

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY  
P.O. Box 13087  
Austin, Texas 78711-3087

This is a renewal that replaces TPDES  
Permit No. WQ0010037004 issued on  
September 12, 2019.

PERMIT TO DISCHARGE WASTES

under provisions of  
Section 402 of the Clean Water Act  
and Chapter 26 of the Texas Water Code

City of Baird

whose mailing address is

328 Market Street  
Baird, Texas 79504

is authorized to treat and discharge filter backwash wastes from the City of Baird Water Treatment Facility, SIC Code 4941

located at 240 Walnut Street, City of Baird, Callahan County, Texas 79504

to an unnamed ditch; thence to an unnamed tributary; thence to TP lake; thence to unnamed tributary; thence to Mexia Creek; thence to Deep Creek; thence to Hubbard Creek; thence to Hubbard Creek Reservoir in Segment No. 1233 of the Brazos River Basin

only according to effluent limitations, monitoring requirements, and other conditions set forth in this permit, as well as the rules of the Texas Commission on Environmental Quality (TCEQ), the laws of the State of Texas, and other orders of the TCEQ. The issuance of this permit does not grant to the permittee the right to use private or public property for conveyance of wastewater along the discharge route described in this permit. This includes, but is not limited to, property belonging to any individual, partnership, corporation or other entity. Neither does this permit authorize any invasion of personal rights nor any violation of federal, state, or local laws or regulations. It is the responsibility of the permittee to acquire property rights as may be necessary to use the discharge route.

This permit shall expire at midnight, **five years from the date of issuance.**

ISSUED DATE:

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For the Commission

INTERIM EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTSOutfall Number 001

1. During the period beginning upon the date of issuance and lasting through the date of expiration, the permittee is authorized to discharge subject to the following effluent limitations:

The daily average flow of effluent shall not exceed 0.006 million gallons per day (MGD)

<u>Effluent Characteristic</u>	<u>Discharge Limitations</u>				<u>Min. Self-Monitoring Requirements</u>	
	Daily Avg mg/l (lbs/day)	7-day Avg mg/l	Daily Max mg/l	Single Grab mg/l	Report Daily Avg. & Daily Max. Measurement Frequency	Sample Type
Flow, MGD	Report	N/A	Report	N/A	Five/week	Instantaneous
Total Suspended Solids	25 (1.3)	35	45	65	One/week	Composite*

\* The composite sample must consist of at least three portions collected over a period of not less than two hours. In the case of intermittent discharges of less than two hours duration, the composite sample must consist of at least three portions collected over the duration of the discharge. This provision supersedes the definitions in standard permit conditions No. 3a on page 4 of this permit.

2. The pH shall not be less than 6.0 standard units nor greater than 9.0 standard units and shall be monitored once per month by grab sample.
3. There shall be no discharge of floating solids or visible foam in other than trace amounts and no discharge of visible oil.
4. Effluent monitoring samples shall be taken at the following location(s): Following the final treatment unit.

## DEFINITIONS AND STANDARD PERMIT CONDITIONS

As required by Title 30 Texas Administrative Code (TAC) Chapter 305, certain regulations appear as standard conditions in waste discharge permits. 30 TAC § 305.121 - 305.129 (relating to Permit Characteristics and Conditions) as promulgated under the Texas Water Code (TWC) §§ 5.103 and 5.105, and the Texas Health and Safety Code (THSC) §§ 361.017 and 361.024(a), establish the characteristics and standards for waste discharge permits, including sewage sludge, and those sections of 40 Code of Federal Regulations (CFR) Part 122 adopted by reference by the Commission. The following text includes these conditions and incorporates them into this permit. All definitions in TWC § 26.001 and 30 TAC Chapter 305 shall apply to this permit and are incorporated by reference. Some specific definitions of words or phrases used in this permit are as follows:

### 1. Flow Measurements

- a. Annual average flow - the arithmetic average of all daily flow determinations taken within the preceding 12 consecutive calendar months. The annual average flow determination shall consist of daily flow volume determinations made by a totalizing meter, charted on a chart recorder and limited to major domestic wastewater discharge facilities with one million gallons per day or greater permitted flow.
- b. Daily average flow - the arithmetic average of all determinations of the daily flow within a period of one calendar month. The daily average flow determination shall consist of determinations made on at least four separate days. If instantaneous measurements are used to determine the daily flow, the determination shall be the arithmetic average of all instantaneous measurements taken during that month. Daily average flow determination for intermittent discharges shall consist of a minimum of three flow determinations on days of discharge.
- c. Daily maximum flow - the highest total flow for any 24-hour period in a calendar month.
- d. Instantaneous flow - the measured flow during the minimum time required to interpret the flow measuring device.
- e. 2-hour peak flow (domestic wastewater treatment plants) - the maximum flow sustained for a two-hour period during the period of daily discharge. The average of multiple measurements of instantaneous maximum flow within a two-hour period may be used to calculate the 2-hour peak flow.
- f. Maximum 2-hour peak flow (domestic wastewater treatment plants) - the highest 2-hour peak flow for any 24-hour period in a calendar month.

### 2. Concentration Measurements

- a. Daily average concentration - the arithmetic average of all effluent samples, composite or grab as required by this permit, within a period of one calendar month, consisting of at least four separate representative measurements.
  - i. For domestic wastewater treatment plants - When four samples are not available in a calendar month, the arithmetic average (weighted by flow) of all values in the previous four consecutive month period consisting of at least four measurements shall be utilized as the daily average concentration.

- ii. For all other wastewater treatment plants - When four samples are not available in a calendar month, the arithmetic average (weighted by flow) of all values taken during the month shall be utilized as the daily average concentration.
- b. 7-day average concentration - the arithmetic average of all effluent samples, composite or grab as required by this permit, within a period of one calendar week, Sunday through Saturday.
- c. Daily maximum concentration - the maximum concentration measured on a single day, by the sample type specified in the permit, within a period of one calendar month.
- d. Daily discharge - the discharge of a pollutant measured during a calendar day or any 24-hour period that reasonably represents the calendar day for purposes of sampling. For pollutants with limitations expressed in terms of mass, the daily discharge is calculated as the total mass of the pollutant discharged over the sampling day. For pollutants with limitations expressed in other units of measurement, the daily discharge is calculated as the average measurement of the pollutant over the sampling day.

The daily discharge determination of concentration made using a composite sample shall be the concentration of the composite sample. When grab samples are used, the daily discharge determination of concentration shall be the arithmetic average (weighted by flow value) of all samples collected during that day.

- e. Bacteria concentration (*E. coli* or Enterococci) - Colony Forming Units (CFU) or Most Probable Number (MPN) of bacteria per 100 milliliters effluent. The daily average bacteria concentration is a geometric mean of the values for the effluent samples collected in a calendar month. The geometric mean shall be determined by calculating the  $n$ th root of the product of all measurements made in a calendar month, where  $n$  equals the number of measurements made; or, computed as the antilogarithm of the arithmetic mean of the logarithms of all measurements made in a calendar month. For any measurement of bacteria equaling zero, a substituted value of one shall be made for input into either computation method. If specified, the 7-day average for bacteria is the geometric mean of the values for all effluent samples collected during a calendar week.
  - f. Daily average loading (lbs/day) - the arithmetic average of all daily discharge loading calculations during a period of one calendar month. These calculations must be made for each day of the month that a parameter is analyzed. The daily discharge, in terms of mass (lbs/day), is calculated as (Flow, MGD x Concentration, mg/l x 8.34).
  - g. Daily maximum loading (lbs/day) - the highest daily discharge, in terms of mass (lbs/day), within a period of one calendar month.
3. Sample Type
- a. Composite sample - For domestic wastewater, a composite sample is a sample made up of a minimum of three effluent portions collected in a continuous 24-hour period or during the period of daily discharge if less than 24 hours, and combined in volumes proportional to flow, and collected at the intervals required by 30 TAC § 319.9 (a). For industrial wastewater, a composite sample is a sample made up of a minimum of three effluent portions collected in a continuous 24-hour period or during the period of daily discharge if less than 24 hours, and combined in volumes proportional to flow, and collected at the intervals required by 30 TAC § 319.9 (b).

- b. Grab sample - an individual sample collected in less than 15 minutes.
- 4. Treatment Facility (facility) - wastewater facilities used in the conveyance, storage, treatment, recycling, reclamation and/or disposal of domestic sewage, industrial wastes, agricultural wastes, recreational wastes, or other wastes including sludge handling or disposal facilities under the jurisdiction of the Commission.
- 5. The term "sewage sludge" is defined as solid, semi-solid, or liquid residue generated during the treatment of domestic sewage in 30 TAC Chapter 312. This includes the solids that have not been classified as hazardous waste separated from wastewater by unit processes.
- 6. Bypass - the intentional diversion of a waste stream from any portion of a treatment facility.

## **MONITORING AND REPORTING REQUIREMENTS**

### **1. Self-Reporting**

Monitoring results shall be provided at the intervals specified in the permit. Unless otherwise specified in this permit or otherwise ordered by the Commission, the permittee shall conduct effluent sampling and reporting in accordance with 30 TAC §§ 319.4 - 319.12. Unless otherwise specified, effluent monitoring data shall be submitted each month, to the Compliance Monitoring Team of the Enforcement Division (MC 224), by the 20<sup>th</sup> day of the following month for each discharge which is described by this permit whether or not a discharge is made for that month. Monitoring results must be reported on an approved self-report form that is signed and certified as required by Monitoring and Reporting Requirements No. 10.

As provided by state law, the permittee is subject to administrative, civil and criminal penalties, as applicable, for negligently or knowingly violating the Clean Water Act (CWA); TWC §§ 26, 27, and 28; and THSC § 361, including but not limited to knowingly making any false statement, representation, or certification on any report, record, or other document submitted or required to be maintained under this permit, including monitoring reports or reports of compliance or noncompliance, or falsifying, tampering with or knowingly rendering inaccurate any monitoring device or method required by this permit or violating any other requirement imposed by state or federal regulations.

### **2. Test Procedures**

- a. Unless otherwise specified in this permit, test procedures for the analysis of pollutants shall comply with procedures specified in 30 TAC §§ 319.11 - 319.12. Measurements, tests, and calculations shall be accurately accomplished in a representative manner.
- b. All laboratory tests submitted to demonstrate compliance with this permit must meet the requirements of 30 TAC § 25, Environmental Testing Laboratory Accreditation and Certification.

### **3. Records of Results**

- a. Monitoring samples and measurements shall be taken at times and in a manner so as to be representative of the monitored activity.
- b. Except for records of monitoring information required by this permit related to the

permittee's sewage sludge use and disposal activities, which shall be retained for a period of at least five years (or longer as required by 40 CFR Part 503), monitoring and reporting records, including strip charts and records of calibration and maintenance, copies of all records required by this permit, records of all data used to complete the application for this permit, and the certification required by 40 CFR § 264.73(b)(9) shall be retained at the facility site, or shall be readily available for review by a TCEQ representative for a period of three years from the date of the record or sample, measurement, report, application or certification. This period shall be extended at the request of the Executive Director.

- c. Records of monitoring activities shall include the following:
  - i. date, time and place of sample or measurement;
  - ii. identity of individual who collected the sample or made the measurement.
  - iii. date and time of analysis;
  - iv. identity of the individual and laboratory who performed the analysis;
  - v. the technique or method of analysis; and
  - vi. the results of the analysis or measurement and quality assurance/quality control records.

The period during which records are required to be kept shall be automatically extended to the date of the final disposition of any administrative or judicial enforcement action that may be instituted against the permittee.

#### 4. Additional Monitoring by Permittee

If the permittee monitors any pollutant at the location(s) designated herein more frequently than required by this permit using approved analytical methods as specified above, all results of such monitoring shall be included in the calculation and reporting of the values submitted on the approved self-report form. Increased frequency of sampling shall be indicated on the self-report form.

#### 5. Calibration of Instruments

All automatic flow measuring or recording devices and all totalizing meters for measuring flows shall be accurately calibrated by a trained person at plant start-up and as often thereafter as necessary to ensure accuracy, but not less often than annually unless authorized by the Executive Director for a longer period. Such person shall verify in writing that the device is operating properly and giving accurate results. Copies of the verification shall be retained at the facility site and/or shall be readily available for review by a TCEQ representative for a period of three years.

#### 6. Compliance Schedule Reports

Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule of the permit shall be submitted no later than 14 days following each schedule date to the Regional Office and the Compliance Monitoring Team of the Enforcement Division (MC 224).

#### 7. Noncompliance Notification

- a. In accordance with 30 TAC § 305.125(9) any noncompliance which may endanger human health or safety, or the environment shall be reported by the permittee to the TCEQ. Except as allowed by 30 TAC § 305.132, report of such information shall be provided orally or by facsimile transmission (FAX) to the Regional Office within 24 hours of becoming aware of the noncompliance. A written submission of such information shall also be provided by the permittee to the Regional Office and the Compliance Monitoring Team of the Enforcement Division (MC 224) within five working days of becoming aware of the noncompliance. The written submission shall contain a description of the noncompliance and its cause; the potential danger to human health or safety, or the environment; the period of noncompliance, including exact dates and times; if the noncompliance has not been corrected, the time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent recurrence of the noncompliance, and to mitigate its adverse effects.
  - b. The following violations shall be reported under Monitoring and Reporting Requirement 7.a.:
    - i. Unauthorized discharges as defined in Permit Condition 2(g).
    - ii. Any unanticipated bypass that exceeds any effluent limitation in the permit.
    - iii. Violation of a permitted maximum daily discharge limitation for pollutants listed specifically in the Other Requirements section of an Industrial TPDES permit.
  - c. In addition to the above, any effluent violation which deviates from the permitted effluent limitation by more than 40% shall be reported by the permittee in writing to the Regional Office and the Compliance Monitoring Team of the Enforcement Division (MC 224) within 5 working days of becoming aware of the noncompliance.
  - d. Any noncompliance other than that specified in this section, or any required information not submitted or submitted incorrectly, shall be reported to the Compliance Monitoring Team of the Enforcement Division (MC 224) as promptly as possible. For effluent limitation violations, noncompliances shall be reported on the approved self-report form.
8. In accordance with the procedures described in 30 TAC §§ 35.301 - 35.303 (relating to Water Quality Emergency and Temporary Orders) if the permittee knows in advance of the need for a bypass, it shall submit prior notice by applying for such authorization.

9. Changes in Discharges of Toxic Substances

All existing manufacturing, commercial, mining, and silvicultural permittees shall notify the Regional Office, orally or by facsimile transmission within 24 hours, and both the Regional Office and the Compliance Monitoring Team of the Enforcement Division (MC 224) in writing within five (5) working days, after becoming aware of or having reason to believe:

- a. That any activity has occurred or will occur which would result in the discharge, on a routine or frequent basis, of any toxic pollutant listed at 40 CFR Part 122, Appendix D, Tables II and III (excluding Total Phenols) which is not limited in the permit, if that discharge will exceed the highest of the following "notification levels":
  - i. One hundred micrograms per liter (100 µg/L);
  - ii. Two hundred micrograms per liter (200 µg/L) for acrolein and acrylonitrile; five



- hundred micrograms per liter (500 µg/L) for 2,4-dinitrophenol and for 2-methyl-4,6-dinitrophenol; and one milligram per liter (1 mg/L) for antimony;
- iii. Five (5) times the maximum concentration value reported for that pollutant in the permit application; or
  - iv. The level established by the TCEQ.
- b. That any activity has occurred or will occur which would result in any discharge, on a nonroutine or infrequent basis, of a toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following “notification levels”:
- i. Five hundred micrograms per liter (500 µg/L);
  - ii. One milligram per liter (1 mg/L) for antimony;
  - iii. Ten (10) times the maximum concentration value reported for that pollutant in the permit application; or
  - iv. The level established by the TCEQ.

#### 10. Signatories to Reports

All reports and other information requested by the Executive Director shall be signed by the person and in the manner required by 30 TAC § 305.128 (relating to Signatories to Reports).

11. All POTWs must provide adequate notice to the Executive Director of the following:
- a. Any new introduction of pollutants into the POTW from an indirect discharger which would be subject to CWA § 301 or § 306 if it were directly discharging those pollutants;
  - b. Any substantial change in the volume or character of pollutants being introduced into that POTW by a source introducing pollutants into the POTW at the time of issuance of the permit; and
  - c. For the purpose of this paragraph, adequate notice shall include information on:
    - i. The quality and quantity of effluent introduced into the POTW; and
    - ii. Any anticipated impact of the change on the quantity or quality of effluent to be discharged from the POTW.

### PERMIT CONDITIONS

#### 1. General

- a. When the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in an application or in any report to the Executive Director, it shall promptly submit such facts or information.
- b. This permit is granted on the basis of the information supplied and representations made by the permittee during action on an application, and relying upon the accuracy and completeness of that information and those representations. After notice and opportunity for a hearing, this permit may be modified, suspended, or revoked, in whole or in part, in accordance with 30 TAC Chapter 305, Subchapter D, during its term for

good cause including, but not limited to, the following:

- i. Violation of any terms or conditions of this permit;
  - ii. Obtaining this permit by misrepresentation or failure to disclose fully all relevant facts; or
  - iii. A change in any condition that requires either a temporary or permanent reduction or elimination of the authorized discharge.
- c. The permittee shall furnish to the Executive Director, upon request and within a reasonable time, any information to determine whether cause exists for amending, revoking, suspending or terminating the permit. The permittee shall also furnish to the Executive Director, upon request, copies of records required to be kept by the permit.

## 2. Compliance

- a. Acceptance of the permit by the person to whom it is issued constitutes acknowledgment and agreement that such person will comply with all the terms and conditions embodied in the permit, and the rules and other orders of the Commission.
- b. The permittee has a duty to comply with all conditions of the permit. Failure to comply with any permit condition constitutes a violation of the permit and the Texas Water Code or the Texas Health and Safety Code, and is grounds for enforcement action, for permit amendment, revocation, or suspension, or for denial of a permit renewal application or an application for a permit for another facility.
- c. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of the permit.
- d. The permittee shall take all reasonable steps to minimize or prevent any discharge or sludge use or disposal or other permit violation that has a reasonable likelihood of adversely affecting human health or the environment.
- e. Authorization from the Commission is required before beginning any change in the permitted facility or activity that may result in noncompliance with any permit requirements.
- f. A permit may be amended, suspended and reissued, or revoked for cause in accordance with 30 TAC §§ 305.62 and 305.66 and TWC§ 7.302. The filing of a request by the permittee for a permit amendment, suspension and reissuance, or termination, or a notification of planned changes or anticipated noncompliance, does not stay any permit condition.
- g. There shall be no unauthorized discharge of wastewater or any other waste. For the purpose of this permit, an unauthorized discharge is considered to be any discharge of wastewater into or adjacent to water in the state at any location not permitted as an outfall or otherwise defined in the Other Requirements section of this permit.
- h. In accordance with 30 TAC § 305.535(a), the permittee may allow any bypass to occur

from a TPDES permitted facility which does not cause permitted effluent limitations to be exceeded or an unauthorized discharge to occur, but only if the bypass is also for essential maintenance to assure efficient operation.

- i. The permittee is subject to administrative, civil, and criminal penalties, as applicable, under TWC §§ 7.051 - 7.075 (relating to Administrative Penalties), 7.101 - 7.111 (relating to Civil Penalties), and 7.141 - 7.202 (relating to Criminal Offenses and Penalties) for violations including, but not limited to, negligently or knowingly violating the federal CWA §§ 301, 302, 306, 307, 308, 318, or 405, or any condition or limitation implementing any sections in a permit issued under the CWA § 402, or any requirement imposed in a pretreatment program approved under the CWA §§ 402 (a)(3) or 402 (b)(8).

### 3. Inspections and Entry

- a. Inspection and entry shall be allowed as prescribed in the TWC Chapters 26, 27, and 28, and THSC § 361.
- b. The members of the Commission and employees and agents of the Commission are entitled to enter any public or private property at any reasonable time for the purpose of inspecting and investigating conditions relating to the quality of water in the state or the compliance with any rule, regulation, permit or other order of the Commission. Members, employees, or agents of the Commission and Commission contractors are entitled to enter public or private property at any reasonable time to investigate or monitor or, if the responsible party is not responsive or there is an immediate danger to public health or the environment, to remove or remediate a condition related to the quality of water in the state. Members, employees, Commission contractors, or agents acting under this authority who enter private property shall observe the establishment's rules and regulations concerning safety, internal security, and fire protection, and if the property has management in residence, shall notify management or the person then in charge of his presence and shall exhibit proper credentials. If any member, employee, Commission contractor, or agent is refused the right to enter in or on public or private property under this authority, the Executive Director may invoke the remedies authorized in TWC § 7.002. The statement above, that Commission entry shall occur in accordance with an establishment's rules and regulations concerning safety, internal security, and fire protection, is not grounds for denial or restriction of entry to any part of the facility, but merely describes the Commission's duty to observe appropriate rules and regulations during an inspection.

### 4. Permit Amendment and/or Renewal

- a. The permittee shall give notice to the Executive Director as soon as possible of any planned physical alterations or additions to the permitted facility if such alterations or additions would require a permit amendment or result in a violation of permit requirements. Notice shall also be required under this paragraph when:
  - i. The alteration or addition to a permitted facility may meet one of the criteria for determining whether a facility is a new source in accordance with 30 TAC § 305.534 (relating to New Sources and New Dischargers); or
  - ii. The alteration or addition could significantly change the nature or increase the quantity of pollutants discharged. This notification applies to pollutants that are

subject neither to effluent limitations in the permit, nor to notification requirements in Monitoring and Reporting Requirements No. 9; or

- iii. The alteration or addition results in a significant change in the permittee's sludge use or disposal practices, and such alteration, addition, or change may justify the application of permit conditions that are different from or absent in the existing permit, including notification of additional use or disposal sites not reported during the permit application process or not reported pursuant to an approved land application plan.
- b. Prior to any facility modifications, additions, or expansions that will increase the plant capacity beyond the permitted flow, the permittee must apply for and obtain proper authorization from the Commission before commencing construction.
- c. The permittee must apply for an amendment or renewal at least 180 days prior to expiration of the existing permit in order to continue a permitted activity after the expiration date of the permit. If an application is submitted prior to the expiration date of the permit, the existing permit shall remain in effect until the application is approved, denied, or returned. If the application is returned or denied, authorization to continue such activity shall terminate upon the effective date of the action. If an application is not submitted prior to the expiration date of the permit, the permit shall expire and authorization to continue such activity shall terminate.
- d. Prior to accepting or generating wastes which are not described in the permit application or which would result in a significant change in the quantity or quality of the existing discharge, the permittee must report the proposed changes to the Commission. The permittee must apply for a permit amendment reflecting any necessary changes in permit conditions, including effluent limitations for pollutants not identified and limited by this permit.
- e. In accordance with the TWC § 26.029(b), after a public hearing, notice of which shall be given to the permittee, the Commission may require the permittee, from time to time, for good cause, in accordance with applicable laws, to conform to new or additional conditions.
- f. If any toxic effluent standard or prohibition (including any schedule of compliance specified in such effluent standard or prohibition) is promulgated under CWA § 307(a) for a toxic pollutant which is present in the discharge and that standard or prohibition is more stringent than any limitation on the pollutant in this permit, this permit shall be modified or revoked and reissued to conform to the toxic effluent standard or prohibition. The permittee shall comply with effluent standards or prohibitions established under CWA § 307(a) for toxic pollutants within the time provided in the regulations that established those standards or prohibitions, even if the permit has not yet been modified to incorporate the requirement.

## 5. Permit Transfer

- a. Prior to any transfer of this permit, Commission approval must be obtained. The Commission shall be notified in writing of any change in control or ownership of facilities authorized by this permit. Such notification should be sent to the Applications Review and Processing Team (MC 148) of the Water Quality Division.

- b. A permit may be transferred only according to the provisions of 30 TAC § 305.64 (relating to Transfer of Permits) and 30 TAC § 50.133 (relating to Executive Director Action on Application or WQMP update).

6. Relationship to Hazardous Waste Activities

This permit does not authorize any activity of hazardous waste storage, processing, or disposal that requires a permit or other authorization pursuant to the Texas Health and Safety Code.

7. Relationship to Water Rights

Disposal of treated effluent by any means other than discharge directly to water in the state must be specifically authorized in this permit and may require a permit pursuant to TWC Chapter 11.

8. Property Rights

A permit does not convey any property rights of any sort, or any exclusive privilege.

9. Permit Enforceability

The conditions of this permit are severable, and if any provision of this permit, or the application of any provision of this permit to any circumstances, is held invalid, the application of such provision to other circumstances, and the remainder of this permit, shall not be affected thereby.

10. Relationship to Permit Application

The application pursuant to which the permit has been issued is incorporated herein; provided, however, that in the event of a conflict between the provisions of this permit and the application, the provisions of the permit shall control.

11. Notice of Bankruptcy.

- a. Each permittee shall notify the Executive Director, in writing, immediately following the filing of a voluntary or involuntary petition for bankruptcy under any chapter of Title 11 (Bankruptcy) of the United States Code (11 USC) by or against:
  - i. the permittee;
  - ii. an entity (as that term is defined in 11 USC, § 101(14)) controlling the permittee or listing the permit or permittee as property of the estate; or
  - iii. an affiliate (as that term is defined in 11 USC, § 101(2)) of the permittee.
- b. This notification must indicate:
  - i. the name of the permittee;
  - ii. the permit number(s);
  - iii. the bankruptcy court in which the petition for bankruptcy was filed; and
  - iv. the date of filing of the petition.

**OPERATIONAL REQUIREMENTS**

1. The permittee shall at all times ensure that the facility and all of its systems of collection, treatment, and disposal are properly operated and maintained. This includes, but is not limited to, the regular, periodic examination of wastewater solids within the treatment plant by the operator in order to maintain an appropriate quantity and quality of solids inventory as described in the various operator training manuals and according to accepted industry standards for process control. Process control, maintenance, and operations records shall be retained at the facility site, or shall be readily available for review by a TCEQ representative, for a period of three years.
2. Upon request by the Executive Director, the permittee shall take appropriate samples and provide proper analysis in order to demonstrate compliance with Commission rules. Unless otherwise specified in this permit or otherwise ordered by the Commission, the permittee shall comply with all applicable provisions of 30 TAC Chapter 312 concerning sewage sludge use and disposal and 30 TAC §§ 319.21 - 319.29 concerning the discharge of certain hazardous metals.
3. Domestic wastewater treatment facilities shall comply with the following provisions:
  - a. The permittee shall notify the Municipal Permits Team, Wastewater Permitting Section (MC 148) of the Water Quality Division, in writing, of any facility expansion at least 90 days prior to conducting such activity.
  - b. The permittee shall submit a closure plan for review and approval to the Municipal Permits Team, Wastewater Permitting Section (MC 148) of the Water Quality Division, for any closure activity at least 90 days prior to conducting such activity. Closure is the act of permanently taking a waste management unit or treatment facility out of service and includes the permanent removal from service of any pit, tank, pond, lagoon, surface impoundment and/or other treatment unit regulated by this permit.
4. The permittee is responsible for installing prior to plant start-up, and subsequently maintaining, adequate safeguards to prevent the discharge of untreated or inadequately treated wastes during electrical power failures by means of alternate power sources, standby generators, and/or retention of inadequately treated wastewater.
5. Unless otherwise specified, the permittee shall provide a readily accessible sampling point and, where applicable, an effluent flow measuring device or other acceptable means by which effluent flow may be determined.
6. The permittee shall remit an annual water quality fee to the Commission as required by 30 TAC Chapter 21. Failure to pay the fee may result in revocation of this permit under TWC § 7.302(b)(6).
7. Documentation

For all written notifications to the Commission required of the permittee by this permit, the permittee shall keep and make available a copy of each such notification under the same conditions as self-monitoring data are required to be kept and made available. Except for information required for TPDES permit applications, effluent data, including effluent data in permits, draft permits and permit applications, and other information specified as not

confidential in 30 TAC §§ 1.5(d), any information submitted pursuant to this permit may be claimed as confidential by the submitter. Any such claim must be asserted in the manner prescribed in the application form or by stamping the words confidential business information on each page containing such information. If no claim is made at the time of submission, information may be made available to the public without further notice. If the Commission or Executive Director agrees with the designation of confidentiality, the TCEQ will not provide the information for public inspection unless required by the Texas Attorney General or a court pursuant to an open records request. If the Executive Director does not agree with the designation of confidentiality, the person submitting the information will be notified.

8. Facilities that generate domestic wastewater shall comply with the following provisions; domestic wastewater treatment facilities at permitted industrial sites are excluded.
  - a. Whenever flow measurements for any domestic sewage treatment facility reach 75% of the permitted daily average or annual average flow for three consecutive months, the permittee must initiate engineering and financial planning for expansion and/or upgrading of the domestic wastewater treatment and/or collection facilities. Whenever the flow reaches 90% of the permitted daily average or annual average flow for three consecutive months, the permittee shall obtain necessary authorization from the Commission to commence construction of the necessary additional treatment and/or collection facilities. In the case of a domestic wastewater treatment facility which reaches 75% of the permitted daily average or annual average flow for three consecutive months, and the planned population to be served or the quantity of waste produced is not expected to exceed the design limitations of the treatment facility, the permittee shall submit an engineering report supporting this claim to the Executive Director of the Commission.

If in the judgment of the Executive Director the population to be served will not cause permit noncompliance, then the requirement of this section may be waived. To be effective, any waiver must be in writing and signed by the Director of the Enforcement Division (MC 219) of the Commission, and such waiver of these requirements will be reviewed upon expiration of the existing permit; however, any such waiver shall not be interpreted as condoning or excusing any violation of any permit parameter.

- b. The plans and specifications for domestic sewage collection and treatment works associated with any domestic permit must be approved by the Commission and failure to secure approval before commencing construction of such works or making a discharge is a violation of this permit and each day is an additional violation until approval has been secured.
  - c. Permits for domestic wastewater treatment plants are granted subject to the policy of the Commission to encourage the development of area-wide waste collection, treatment, and disposal systems. The Commission reserves the right to amend any domestic wastewater permit in accordance with applicable procedural requirements to require the system covered by this permit to be integrated into an area-wide system, should such be developed; to require the delivery of the wastes authorized to be collected in, treated by or discharged from said system, to such area-wide system; or to amend this permit in any other particular to effectuate the Commission's policy. Such amendments may be made when the changes required are advisable for water quality control purposes and are feasible on the basis of waste treatment technology, engineering, financial, and



related considerations existing at the time the changes are required, exclusive of the loss of investment in or revenues from any then existing or proposed waste collection, treatment or disposal system.

9. Domestic wastewater treatment plants shall be operated and maintained by sewage plant operators holding a valid certificate of competency at the required level as defined in 30 TAC Chapter 30.
10. For Publicly Owned Treatment Works (POTWs), the 30-day average (or monthly average) percent removal for BOD and TSS shall not be less than 85%, unless otherwise authorized by this permit.
11. Facilities that generate industrial solid waste as defined in 30 TAC § 335.1 shall comply with these provisions:
  - a. Any solid waste, as defined in 30 TAC § 335.1 (including but not limited to such wastes as garbage, refuse, sludge from a waste treatment, water supply treatment plant or air pollution control facility, discarded materials, discarded materials to be recycled, whether the waste is solid, liquid, or semisolid), generated by the permittee during the management and treatment of wastewater, must be managed in accordance with all applicable provisions of 30 TAC Chapter 335, relating to Industrial Solid Waste Management.
  - b. Industrial wastewater that is being collected, accumulated, stored, or processed before discharge through any final discharge outfall, specified by this permit, is considered to be industrial solid waste until the wastewater passes through the actual point source discharge and must be managed in accordance with all applicable provisions of 30 TAC Chapter 335.
  - c. The permittee shall provide written notification, pursuant to the requirements of 30 TAC § 335.8(b)(1), to the Environmental Cleanup Section (MC 127) of the Remediation Division informing the Commission of any closure activity involving an Industrial Solid Waste Management Unit, at least 90 days prior to conducting such an activity.
  - d. Construction of any industrial solid waste management unit requires the prior written notification of the proposed activity to the Registration and Reporting Section (MC 129) of the Registration, Review, and Reporting Division. No person shall dispose of industrial solid waste, including sludge or other solids from wastewater treatment processes, prior to fulfilling the deed recordation requirements of 30 TAC § 335.5.
  - e. The term “industrial solid waste management unit” means a landfill, surface impoundment, waste-pile, industrial furnace, incinerator, cement kiln, injection well, container, drum, salt dome waste containment cavern, or any other structure vessel, appurtenance, or other improvement on land used to manage industrial solid waste.
  - f. The permittee shall keep management records for all sludge (or other waste) removed from any wastewater treatment process. These records shall fulfill all applicable requirements of 30 TAC § 335 and must include the following, as it pertains to wastewater treatment and discharge:
    - i. Volume of waste and date(s) generated from treatment process;
    - ii. Volume of waste disposed of on-site or shipped off-site;

- iii. Date(s) of disposal;
- iv. Identity of hauler or transporter;
- v. Location of disposal site; and
- vi. Method of final disposal.

The above records shall be maintained on a monthly basis. The records shall be retained at the facility site, or shall be readily available for review by authorized representatives of the TCEQ for at least five years.

12. For industrial facilities to which the requirements of 30 TAC § 335 do not apply, sludge and solid wastes, including tank cleaning and contaminated solids for disposal, shall be disposed of in accordance with THSC § 361.

TCEQ Revision 08/2008

**SLUDGE PROVISIONS**

The permittee is authorized to dispose of water treatment sludge only at a Texas Commission on Environmental Quality (TCEQ) registered or permitted land application site, commercial land application site or co-disposal landfill authorized to accept water treatment plant sludge.

**The disposal of water treatment sludge by land application on property owned, leased or under the direct control of the permittee is a violation of the permit unless the site is permitted or registered with the TCEQ. This provision does not authorize Distribution and Marketing of sludge.**

**SECTION I. REQUIREMENTS APPLYING TO ALL WATER TREATMENT SLUDGE LAND APPLICATION****A. General Requirements**

1. The permittee shall handle and dispose of water treatment sludge in accordance with 30 TAC Chapter 312 Subchapter F and all other applicable state and federal regulations to protect public health and the environment from any reasonably anticipated adverse effects due to any toxic pollutants that may be present. The permittee shall ensure that the water treatment sludge meets the requirements in 40 CFR Part 257 concerning the quality of water treatment sludge disposed of by land application.
2. The permittee shall provide necessary information to the parties who receive the water treatment sludge to assure compliance with these regulations.

**B. Operation Requirements and Regulated Management Conditions for Water Treatment Sludge**

The operation and maintenance of a water treatment sludge disposal site must be in accordance with 30 TAC Chapter 312 Subchapter F and 40 CFR Part 257 as it relates to solid waste disposal. Specifically, land application of water treatment sludge shall meet the following requirements.

1. Land application of water treatment sludge shall not cause or contribute to the harm of a threatened or endangered species of plant, fish, or wildlife or result in the destruction or adverse modification of the critical habitat of a threatened or endangered species after application to agricultural land.
2. Land application of water treatment sludge shall not restrict the flow of the base flood, reduce the temporary water storage capacity of the flood plain, or result in washout of solid waste.
3. Land application of water treatment sludge shall be disposed of by a method and under conditions that prevents runoff beyond the active application area and protects the quality of the surface water.

4. Land application of water treatment sludge disposal shall not contaminate an underground drinking water source beyond the site boundary, as specified in 40 CFR 257.3-4.
5. Land application of water treatment sludge disposal practices shall not allow uncontrolled public access so as to expose the public to potential health and safety hazards at the disposal site.

### C. Testing Requirements

1. Water treatment sludge shall be tested once during the term of this permit in accordance with the method specified in both 40 CFR Part 261, Appendix II and 40 CFR Part 268, Appendix I [Toxicity Characteristic Leaching Procedure (TCLP)] or other method, which receives the prior approval of the TCEQ for the contaminants listed in Table 1 of 40 CFR Section 261.24. Water treatment sludge failing this test shall be managed according to RCRA standards for generators of hazardous waste, and the waste's disposition must be in accordance with all applicable requirements for hazardous waste processing, storage, or disposal.

Following failure of any TCLP test, the management or disposal of water treatment sludge at a facility other than an authorized hazardous waste processing, storage, or disposal facility shall be prohibited until such time as the permittee can demonstrate the sludge no longer exhibits the hazardous waste toxicity characteristics (as demonstrated by the results of the TCLP tests). A written report shall be provided to both the TCEQ Registration and Reporting Section (MC 129) of the Permitting and Registration Support Division and the Regional Director (**MC Region 3**) within 7 days after failing the TCLP Test. The report shall contain test results, certification that unauthorized waste management has stopped, and a summary of alternative disposal plans that comply with RCRA standards for the management of hazardous waste. The report shall be addressed to: Director, Registration and Reporting Section (MC 129) of the Permitting and Registration Support Division, Texas Commission on Environmental Quality, P.O. Box 13087, Austin, Texas 78711-3087. In addition, the permittee shall prepare an annual report on the results of all sludge toxicity testing. The reporting period is from September 1 of previous year to August 31 of the current year. This annual report shall be submitted to the TCEQ Regional Office (**MC Region 3**) and the Compliance Monitoring Team (MC 224) of the Enforcement Division by September 30 of each year.

2. Water treatment sludge shall be tested as needed, in accordance with the requirements of 30 TAC Chapter 312. The following pollutant limits shall apply to disposal of water treatment sludge on land used for the production of food chain crops.
  - a. Cadmium - Disposal of water treatment sludge on a site within three feet of the surface of land used for the production of food chain crops shall not exist or occur, unless in compliance with all requirements of the following paragraphs (i) or (ii).
    - i. (A) The pH of the water treatment sludge and soil mixture must be 6.5 or greater at the time of each application of sludge, except for water treatment sludge containing cadmium concentrations of 2

mg/kg (dry weight) or less.

- (B) The annual application rate for cadmium in sludge shall not exceed 0.5 kilograms per hectare.
- (C) The maximum cumulative application rate of cadmium, in kg/ha based on background soil pH, from sludge does not exceed the following levels:

<u>Background Soil pH</u>	<u>Soil Cation Exchange Capacity (CEC)</u> <u>meq/100 g of soil</u>		
	<u>0 - 5</u>	<u>5 - 15</u>	<u>&gt;15</u>
pH < 6.5	5	5	5
pH > 6.5	5	10	20

- (D) The maximum cumulative application rate of cadmium from sludge on soils with a background pH of less than 6.5 shall not exceed the values listed in the table below, provided that the pH of the **sludge and soil mixture** is adjusted to and maintained at 6.5 or greater whenever food chain crops are grown.

<u>Parameter</u>	<u>Soil Cation Exchange Capacity (CEC)</u> <u>meq/100 g of soil</u>		
	<u>0 - 5</u>	<u>5 - 15</u>	<u>&gt;15</u>
Cadmium, kg/ha	5	10	20

- ii. (A) The only food chain crop produced is animal feed.
  - (B) The pH of the sludge and soil mixture is 6.5 or greater at the time of sludge application or at the time the crop is planted, whichever occurs later, and this pH level is maintained whenever food chain crops are grown.
  - (C) A facility operating plan which demonstrates how the animal feed will be distributed to preclude ingestion by humans and describes the measures to be taken to safeguard against possible health hazards from cadmium entering the food chain, which may result from alternative land uses must be developed.
  - (D) Future property owners are notified by a stipulation in the land record or property deed which states that the property has received sludge at high cadmium application rates and that food chain crops should not be grown, due to a possible health hazard.
- b. Polychlorinated Biphenyls (PCBs) - Water treatment sludge containing concentrations of PCBs equal to or greater than 10 mg/kg (dry weight) is incorporated into the soil when applied to land used for producing animal feed, including pasture crops for animals raised for milk. Incorporation of

the solid waste into the soil is not required if it is assured that the PCBs content is less than 0.2 mg/kg (actual weight) in animal feed or less than 1.5 mg/kg (fat basis) in milk.

**D. Record Keeping Requirements**

The permittee, pursuant to 30 TAC Section 312 Subchapter F shall retain a record of all water treatment sludge testing performed and the concentration of Cadmium and PCBs and shall retain the information for a minimum of five (5) years. Records shall be readily available for review or submittal to the Executive Director upon request.

**E. Reporting Requirements**

The permittee shall report the following information annually to the TCEQ and the Compliance Monitoring Team (MC 224) of the Enforcement Division and the Regional Office (**MC Region 3**) by September 30 of each year. The reporting period is from September 1 of previous year to August 31 of the current year.

1. Annual sludge production in dry tons/year.
2. Amount of sludge disposed of in dry tons/year.
3. Identity of hauler and TCEQ transporter registration number.
4. Owner and location of the disposal site(s).
5. Certification that the water treatment sludge meets the requirements of 40 CFR Part 257 concerning the quality of the sludge being land applied.
6. The TCEQ Registration or Permit Number for the disposal site(s).
7. Toxicity Characteristic Leach Procedure (TCLP) results.

The above records shall be maintained on-site on a monthly basis, for a period of at least five (5) years and shall be made available to the Texas Commission on Environmental Quality upon request.

**SECTION II. REQUIREMENTS APPLYING TO ALL WATER TREATMENT  
SLUDGE DISPOSED OF IN A MUNICIPAL SOLID WASTE  
LANDFILL**

- A.** The permittee shall handle and dispose of water treatment sludge in accordance with 30 TAC Chapter 330 and all other applicable state and federal regulations to protect public health and the environment from any reasonably anticipated adverse effects due to any toxic pollutants that may be present. The permittee shall ensure that the water treatment sludge meets the requirements in 30 TAC Chapter 330 concerning the quality of the sludge disposed of in a Municipal Solid Waste Landfill (MSWL).
- B.** The permittee shall ensure that the water treatment sludge meets the requirements in 40 CFR Part 258 concerning the quality of the sludge disposed of in a MSWL.
- C.** If the permittee generates water treatment sludge and supplies that sludge to the owner or operator of a MSWL for disposal, the permittee shall provide to the owner or operator of the MSWL appropriate information needed to be in compliance with the provisions of this permit.
- D.** The permittee shall give 180 days prior notice to the Executive Director in care of the Wastewater Permits Section (MC 148) of the Water Quality Division of any change planned in the water treatment sludge disposal practice.
- E.** Water treatment sludge shall be tested once during the term of this permit in accordance with the method in both 40 CFR Part 261, Appendix II and 40 CFR Part 268, Appendix I [Toxicity Characteristic Leaching Procedure (TCLP)] or other method, which receives the prior approval of the TCEQ for the contaminants listed in Table 1 of 40 CFR Section 261.24. Water treatment sludge failing this test shall be managed according to RCRA standards for generators of hazardous waste, and the waste's disposition must be in accordance with all applicable requirements for hazardous waste processing, storage, or disposal.

Following failure of any TCLP test, the management or disposal of water treatment sludge at a facility other than an authorized hazardous waste processing, storage, or disposal facility shall be prohibited until such time as the permittee can demonstrate that the water treatment sludge no longer exhibits the hazardous waste toxicity characteristics (as demonstrated by the results of the TCLP tests). A written report shall be provided to both the TCEQ Registration and Reporting Section (MC 129) of the Permitting and Registration Support Division and the Regional Director (**MC Region 3**) within 7 days after failing the TCLP Test. The report shall contain test results, certification that unauthorized waste management has stopped, and a summary of alternative disposal plans that comply with RCRA standards for the management of hazardous waste. The report shall be addressed to: Director, Registration and Reporting Section (MC 129) of the Permitting and Registration Support Division, Texas Commission on Environmental Quality, P. O. Box 13087, Austin, Texas 78711-3087. In addition, the permittee shall prepare an annual report on the results of all sludge toxicity testing. The reporting period is from September 1 of previous year to August 31 of the current year. This annual report shall be submitted to the TCEQ Regional Office (**MC Region 3**) and the Land Application Team (MC 150) of the Water Quality Division by September 30 of each year.



- F.** Water treatment sludge shall be tested as needed, in accordance with the requirements of 30 TAC Chapter 330.

**G. Record Keeping Requirements**

The permittee shall develop the following information and shall retain the information for five years.

1. The description (including procedures followed and the results) of all liquid Paint Filter Tests performed.
2. The description (including procedures followed and results) of all TCLP tests performed.

The above records shall be maintained on-site on a monthly basis and shall be made available to the Texas Commission on Environmental Quality upon request.

**H. Reporting Requirements**

The permittee shall report the following information annually to the Compliance Monitoring Team (MC 224) of the Enforcement Division and the Regional Office (**MC Region 3**) by September 30 of each year. The reporting period is from September 1 of previous year to August 31 of the current year.

1. Toxicity Characteristic Leaching Procedure (TCLP) results.
2. Annual sludge production in dry tons/year.
3. Amount of sludge disposed of in a municipal solid waste landfill in dry tons/year.
4. Amount of sludge transported interstate in dry tons/year.
5. A certification that the water treatment sludge meets the requirements of 30 TAC Chapter 330 concerning the quality of the sludge disposed of in a municipal solid waste landfill.
6. Identity of hauler(s) and transporter registration number.
7. Owner of disposal site(s).
8. Location of disposal site(s).
9. Date(s) of disposal.

The above records shall be maintained on-site on a monthly basis, for a period of at least five (5) years and shall be made available to the Texas Commission on Environmental Quality upon request.

**III. REQUIREMENTS APPLYING TO ALL WATER TREATMENT SLUDGE STORED IN A WATER TREATMENT SLUDGE LAGOON**

**The final disposal of water treatment sludge at the plant site is a violation of this permit. Water treatment sludge placed in water treatment sludge lagoon(s) is for temporary storage only.** Water treatment sludge will ultimately be disposed of in accordance with the closure plan as required in item (B).

- A. The permittee shall maintain a minimum of two feet of freeboard in the water treatment sludge lagoon(s).
- B. The permittee shall submit a closure plan for the water treatment sludge lagoon(s) at least 180 days prior to planned closure to the Executive Director in care of the Municipal Wastewater Permits Team (MC 148) of the Water Quality Division for approval.

**OTHER REQUIREMENTS**

1. These water treatment facilities shall be operated at all times under the direct supervision of a water works operator who holds an applicable, valid license issued by the TCEQ executive director.
2. The permittee shall operate and maintain these facilities in accordance with accepted practices.
3. The permittee shall monitor and report data on the effluent discharge.

**STATEMENT OF BASIS/TECHNICAL SUMMARY  
AND EXECUTIVE DIRECTOR'S PRELIMINARY DECISION**

**DESCRIPTION OF APPLICATION**

Applicant:	City of Baird Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0010037004, EPA ID No. TX0125121
Regulated Activity:	Discharge of treated filter backwash effluent from a water treatment plant
Type of Application:	Renewal
Request:	Renewal with no changes.
Authority:	Federal Clean Water Act (CWA) § 402; Texas Water Code (TWC) § 26.027; 30 Texas Administrative Code (TAC) Chapters 30, 305, 307, 309, 312, and 319; Commission policies; and United States Environmental Protection Agency (EPA) guidelines.

**EXECUTIVE DIRECTOR RECOMMENDATION**

The Executive Director has made a preliminary decision that this permit, if issued, meets all statutory and regulatory requirements. The draft permit includes an expiration date of **five years from the date of issuance**.

**REASON FOR PROPOSED PROJECT**

The applicant has applied to the Texas Commission on Environmental Quality (TCEQ) for a renewal of the existing permit that authorizes the discharge of treated filter backwash effluent from a water treatment plant at a daily average flow not to exceed 0.006 million gallons per day (MGD). The existing water treatment facility serves the City of Baird.

**PROJECT DESCRIPTION AND LOCATION**

Filter backwash wastewater from the water treatment plant is treated in two stabilization ponds. The facility is in operation.

The draft permit also authorizes the disposal of sludge at a TCEQ authorized land application site or co-disposal landfill.

The plant site is located at 240 Walnut Street, City of Baird, Callahan County, Texas 79504.

The treated effluent is discharged to an unnamed ditch; thence to an unnamed tributary; thence to TP lake; thence to unnamed tributary; thence to Mexia Creek; thence to Deep Creek; thence to Hubbard Creek; thence to Hubbard Creek Reservoir in Segment No. 1233 of the Brazos River Basin. The unclassified receiving water uses are minimal aquatic life use for unnamed ditch and limited aquatic life use for unnamed tributary. The designated uses for Segment No. 1233 are high aquatic life use, public water supply, industrial water supply, oyster waters, navigation, and primary contact recreation. The effluent limitations in the draft permit will maintain and protect

the existing instream uses.

Effluent limitations for the conventional effluent parameters (i.e., Total Suspended Solids) are based on stream standards and waste load allocations for water-quality limited streams as established in the Texas Water Quality Standards (TSWQS).

For this type of discharge, end-of-pipe compliance with pH limits between 6.0 and 9.0 standard units reasonably assures instream compliance with the TSWQS for pH when the discharge authorized is from a minor facility and the unclassified waterbodies have minimal or limited aquatic life uses. This conservative assumption is based on TCEQ sampling conducted throughout the state that indicates that instream buffering quickly restores pH levels to ambient conditions.

The effluent limits have been reviewed for consistency with the State of Texas Water Quality Management Plan (WQMP). The WQMP consideration does not apply to this facility as stated in the latest EPA approved Water Quality Management Program Continuing Planning Process.

The discharge from this permit action is not expected to have an effect on any federal endangered or threatened aquatic or aquatic-dependent species or proposed species or their critical habitat. This determination is based on the United States Fish and Wildlife Service's (USFWS) biological opinion on the State of Texas authorization of the TPDES (September 14, 1998; October 21, 1998, update). To make this determination for TPDES permits, TCEQ and EPA only considered aquatic or aquatic-dependent species occurring in watersheds of critical concern or high priority as listed in Appendix A of the USFWS biological opinion. The determination is subject to reevaluation due to subsequent updates or amendments to the biological opinion. The permit does not require EPA review with respect to the presence of endangered or threatened species.

Segment No. 1233 is not currently listed on the state's inventory of impaired and threatened waters (the 2022 CWA § 303(d) list).

#### SUMMARY OF EFFLUENT DATA

The following is a summary of the applicant's effluent monitoring data for the period July 2023 through July 2024. The average of Daily Average value is computed by averaging of all 30-day average values for the reporting period for each parameter: flow and total suspended solids (TSS).

<u>Parameter</u>	<u>Average of Daily Average</u>
TSS, mg/l	9.86

#### DRAFT PERMIT CONDITIONS

The draft permit authorizes a discharge of treated filter backwash effluent at a volume not to exceed a daily average flow of 0.006 MGD.

The effluent limitation in the draft permit, based on a 30-day average, is 25 mg/l total suspended solids (TSS).

City of Baird

TPDES Permit No. WQ0010037004

Statement of Basis/Technical Summary and Executive Director's Preliminary Decision

The draft permit includes Sludge Provisions according to the requirements of 30 TAC Chapter 312, Sludge Use, Disposal, and Transportation. The draft permit also authorizes the disposal of sludge at a TCEQ authorized land application site or co-disposal landfill.

#### SUMMARY OF CHANGES FROM APPLICATION

None.

#### SUMMARY OF CHANGES FROM EXISTING PERMIT

The Standard Permit Conditions, Sludge Provisions, and Other Requirements sections of the draft permit have been updated.

#### BASIS FOR DRAFT PERMIT

The following items were considered in developing the permit draft:

1. Application received on March 1, 2024, and additional information received on April 19, 2024.
2. TPDES Permit No. WQ0010037004 issued on September 12, 2019.
3. The effluent limitations and/or conditions in the draft permit comply with the TSWQS, 30 TAC §§ 307.1 - 307.10, effective July 22, 2010 and the EPA-approved portions of the 2014 TSWQS, effective March 6, 2014.
4. The effluent limitations in the draft permit are based on Best Professional Judgment. The effluent limits are consistent with other water treatment plant permits.
5. Interoffice Memoranda from the Water Quality Assessment Section of the TCEQ Water Quality Division.
6. Consistency with the Coastal Management Plan: The facility is not located in the Coastal Management Program boundary.
7. *Procedures to Implement the Texas Surface Water Quality Standards* (IP), Texas Commission on Environmental Quality, June 2010, as approved by EPA, and the IP, January 2003, for portions of the 2010 IP not approved by EPA.
8. Texas 2022 Clean Water Act Section 303(d) List, Texas Commission on Environmental Quality, June 1, 2022; approved by the U.S. Environmental Protection Agency on July 7, 2022.
9. Texas Natural Resource Conservation Commission Guidance Document for Establishing Monitoring Frequencies for Domestic and Industrial Wastewater Discharge Permits, Document No. 98-001.000-OWR-WQ, May 1998.

#### PROCEDURES FOR FINAL DECISION

When an application is declared administratively complete, the Chief Clerk sends a letter to the applicant advising the applicant to publish the Notice of Receipt of Application and Intent to Obtain Permit in the newspaper. In addition, the Chief Clerk instructs the applicant to place a copy of the application in a public place for review and copying in the county where the facility is or will be located. This application will be in a public place throughout the comment period. The Chief Clerk also mails this notice to any interested persons and, if required, to landowners identified in the permit application. This notice informs the public about the application, and provides that an interested person may file comments on the application or request a contested case hearing or a public meeting.

Once a draft permit is completed, it is sent, along with the Executive Director's preliminary decision, as contained in the technical summary or fact sheet, to the Chief Clerk. At that time, the Notice of Application and Preliminary Decision will be mailed to the same people and published in the same newspaper as the prior notice. This notice sets a deadline for making public comments. The applicant must place a copy of the Executive Director's preliminary decision and draft permit in the public place with the application.

Any interested person may request a public meeting on the application until the deadline for filing public comments. A public meeting is intended for the taking of public comment, and is not a contested case proceeding.

After the public comment deadline, the Executive Director prepares a response to all significant public comments on the application or the draft permit raised during the public comment period. The Chief Clerk then mails the Executive Director's response to comments and final decision to people who have filed comments, requested a contested case hearing, or requested to be on the mailing list. This notice provides that if a person is not satisfied with the Executive Director's response and decision, they can request a contested case hearing or file a request to reconsider the Executive Director's decision within 30 days after the notice is mailed.

The Executive Director will issue the permit unless a written hearing request or request for reconsideration is filed within 30 days after the Executive Director's response to comments and final decision is mailed. If a hearing request or request for reconsideration is filed, the Executive Director will not issue the permit and will forward the application and request to the TCEQ Commissioners for their consideration at a scheduled Commission meeting. If a contested case hearing is held, it will be a legal proceeding similar to a civil trial in state district court.

If the Executive Director calls a public meeting or the Commission grants a contested case hearing as described above, the Commission will give notice of the date, time, and place of the meeting or hearing. If a hearing request or request for reconsideration is made, the Commission will consider all public comments in making its decision and shall either adopt the Executive Director's response to public comments or prepare its own response.

City of Baird

TPDES Permit No. WQ0010037004

Statement of Basis/Technical Summary and Executive Director's Preliminary Decision

For additional information about this application, contact Sonia Bhuiya at (512) 239-1205.

Sonia Bhuiya

Sonia Bhuiya

Municipal Permits Team

Wastewater Permitting Section (MC 148)

September 24, 2024

Date





TEXAS COMMISSION ON ENVIRONMENTAL QUALITY  
**DOMESTIC WASTEWATER PERMIT APPLICATION  
CHECKLIST**

---

**Complete and submit this checklist with the application.**

APPLICANT: City of Baird

PERMIT NUMBER: WO0010037004

**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"/>	Original USGS Map	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Administrative Report 1.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Affected Landowners Map	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SPIF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Landowner Disk or Labels	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Core Data Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Buffer Zone Map	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Public Involvement Plan Form	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Flow Diagram	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Technical Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Site Drawing	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Technical Report 1.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Original Photographs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 2.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Design Calculations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 2.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Solids Management Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 3.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Water Balance	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 3.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 3.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 3.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 4.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 5.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 6.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Worksheet 7.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>			

For TCEQ Use Only

Segment Number \_\_\_\_\_ County \_\_\_\_\_  
Expiration Date \_\_\_\_\_ Region \_\_\_\_\_  
Permit Number \_\_\_\_\_



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

**APPLICATION FOR A DOMESTIC WASTEWATER PERMIT  
ADMINISTRATIVE REPORT 1.0**

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

**Section 1. Application Fees (Instructions Page 29)**

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

Flow	New/Major Amendment	Renewal
<0.05 MGD	\$350.00 <input type="checkbox"/>	\$315.00 <input checked="" type="checkbox"/>
≥0.05 but <0.10 MGD	\$550.00 <input type="checkbox"/>	\$515.00 <input type="checkbox"/>
≥0.10 but <0.25 MGD	\$850.00 <input type="checkbox"/>	\$815.00 <input type="checkbox"/>
≥0.25 but <0.50 MGD	\$1,250.00 <input type="checkbox"/>	\$1,215.00 <input type="checkbox"/>
≥0.50 but <1.0 MGD	\$1,650.00 <input type="checkbox"/>	\$1,615.00 <input type="checkbox"/>
≥1.0 MGD	\$2,050.00 <input type="checkbox"/>	\$2,015.00 <input type="checkbox"/>

Minor Amendment (for any flow) \$150.00 ☐

**Payment Information:**

Mailed      Check/Money Order Number: 21680  
Check/Money Order Amount: 315.00  
Name Printed on Check: City of Baird

EPAY      Voucher Number: Click here to enter text.

Copy of Payment Voucher enclosed?      Yes ☐

**Section 2. Type of Application (Instructions Page 29)**

- |   |   |
|---|---|
| <input type="checkbox"/> New TPDES                              | <input type="checkbox"/> New TLAP                               |
| <input type="checkbox"/> Major Amendment <u>with</u> Renewal    | <input type="checkbox"/> Minor Amendment <u>with</u> Renewal    |
| <input type="checkbox"/> Major Amendment <u>without</u> Renewal | <input type="checkbox"/> Minor Amendment <u>without</u> Renewal |
| <input checked="" type="checkbox"/> Renewal without changes     | <input type="checkbox"/> Minor Modification of permit           |

For amendments or modifications, describe the proposed changes: Click here to enter text.

**For existing permits:**

Permit Number: WQ0010037004  
EPA I.D. (TPDES only): TX0125121  
Expiration Date: 9/12/2024

### Section 3. Facility Owner (Applicant) and Co-Applclicant Information (Instructions Page 29)

**A. The owner of the facility must apply for the permit.**

What is the Legal Name of the entity (applicant) applying for this permit?

City of Baird

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

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

CN: 600634182

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

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

First and Last Name: Jeff Barton

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

Title: Mayor

**B. Co-applclicant information.** Complete this section only if another person or entity is required to apply as a co-permittee.

What is the Legal Name of the co-applclicant applying for this permit?

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

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

CN:

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

Prefix (Mr., Ms., Miss):

First and Last Name:

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

Title:

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

### C. Core Data Form

Complete the Core Data Form for each customer and include as an attachment. If the customer type selected on the Core Data Form is **Individual**, complete **Attachment 1** of Administrative Report 1.0.

**Attachment:** #1

## Section 4. Application Contact Information (Instructions Page 30)

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

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

First and Last Name: Lori Higgins

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text

Title: City Administrator

Organization Name: City of Baird

Mailing Address: 328 Market St.

City, State, Zip Code: Baird, TX 79504

Phone No.: 325-584-1212 Ext.: Click here to enter text Fax No.: 325-584-5941

E-mail Address: lori.cityofbaird@windstream.net

Check one or both: ☒ Administrative Contact ☐ Technical Contact

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

First and Last Name: Sarah Fernandez

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text

Title: Environmental Coordinator

Organization Name: Jacob Martin

Mailing Address: 3465 Curry Lane

City, State, Zip Code: Baird, TX 79504

Phone No.: 325-695-1070 Ext.: Click here to enter text Fax No.: Click here to enter text

E-mail Address: sfernandez@jacobmartin.com

Check one or both: ☒ Administrative Contact ☒ Technical Contact

## Section 5. Permit Contact Information (Instructions Page 30)

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

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

First and Last Name: Lori Higgins

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text.

Title: City Administrator

Organization Name: City of Baird

Mailing Address: 328 Market St

City, State, Zip Code: Baird, TX 79504

Phone No.: 325-584-1212 Ext.: Click here to enter text. Fax No.: 325-584-5941

E-mail Address: lori.cityofbaird@windstream.net

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

First and Last Name: Sarah Fernandez

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text.

Title: Environmental Coordinator

Organization Name: Jacob Martin

Mailing Address: 3465 Curry Lane

City, State, Zip Code: Baird, TX 79504

Phone No.: 325-584-1212 Ext.: Click here to enter text. Fax No.: 325-584-5941

E-mail Address: lori.cityofbaird@windstream.net

## **Section 6. Billing Information (Instructions Page 30)**

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

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

First and Last Name: Lori Higgins

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text.

Title: City Administrator

Organization Name: City of Baird

Mailing Address: 328 Market St

City, State, Zip Code: Baird, TX 79504

Phone No.: 325-584-1212 Ext.: Click here to enter text. Fax No.: 325-584-5941

E-mail Address: lori.cityofbaird@windstream.net

## **Section 7. DMR/MER Contact Information (Instructions Page 31)**

Provide the name and complete mailing address of the person delegated to receive and submit Discharge Monitoring Reports (EPA 3320-1) or maintain Monthly Effluent Reports.

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

First and Last Name: Shane Mcpherson

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

Title: Operator

Organization Name: City of Baird

Mailing Address: 328 Market St.

City, State, Zip Code: Baird, TX 79504

Phone No.: 325-584-1212 Ext.: [REDACTED] Fax No.: 325-584-5941

E-mail Address: shane.cityofbaird@windstream.net

DMR data is required to be submitted electronically. Create an account at:

<https://www.tceq.texas.gov/permitting/netdmr/netdmr.html>.

## Section 8. Public Notice Information (Instructions Page 31)

### A. Individual Publishing the Notices

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

First and Last Name: Lori Higgins

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

Title: City Administrator

Organization Name: City of Baird

Mailing Address: 328 Market St.

City, State, Zip Code: Baird, TX 79504

Phone No.: 325-584-1212 Ext.: [REDACTED] Fax No.: 325-584-5941

E-mail Address: lori.cityofbaird@windstream.net

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

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

☐ E-mail Address

☐ Fax

☒ Regular Mail

### C. Contact person to be listed in the Notices

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

First and Last Name: Lori Higgins

Credential (P.E, P.G., Ph.D., etc.): [Click here to enter text.](#)

Title: City Administrator

Organization Name: City of Baird

Phone No.: 325-584-1212 Ext.: [Click here to enter text.](#)

E-mail: lori.cityofbaird@windstream.net

#### D. Public Viewing Information

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

Public building name: City Hall

Location within the building: Counter in the lobby area

Physical Address of Building: 328 Market St

City: Baird

County: Callahan

Contact Name: Lori Higgins

Phone No.: 325-584-1212 Ext.: [Click here to enter text.](#)

#### 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.

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

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

☐ Yes ☒ No

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

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

☐ Yes ☐ No

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

☐ Yes ☐ No

4. Would the school be required to provide a bilingual education program but the school has waived out of this requirement under 19 TAC §89.1205(g)?
- ☐ Yes      ☐ No
5. If the answer is yes to question 1, 2, 3, or 4, public notices in an alternative language are required. Which language is required by the bilingual program? English

**F. Public Involvement Plan Form**

Complete the Public Involvement Plan Form (TCEQ Form 20960) for each application for a **new permit or major amendment to a permit** and include as an attachment.

**Attachment:** Public Involvement Plan Form

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

- A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN103015426

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

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

Baird WTP

- C. Owner of treatment facility: City of Baird

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

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

Prefix (Mr., Ms., Miss): City of Baird

First and Last Name: City of Baird

Mailing Address: 328 Market St

City, State, Zip Code: Baird, TX 79504

Phone No.: 325-584-1212

E-mail Address: lori.cityofbaird@windstream.net

If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions.

**Attachment:** Lease Agreement

- E. Owner of effluent disposal site:

Prefix (Mr., Ms., Miss): City of Baird

First and Last Name: City of Baird

Mailing Address: 328 Market Street

City, State, Zip Code: Baird, TX 79504



Phone No.: 325-584-1212

E-mail Address: lori.cityofbaird@windstream.net

If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions.

**Attachment:** Click here to enter text

- F. Owner of sewage sludge disposal site (if authorization is requested for sludge disposal on property owned or controlled by the applicant):

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

First and Last Name: Click here to enter text

Mailing Address: Click here to enter text

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

Phone No.: Click here to enter text E-mail Address: Click here to enter text

If the landowner is not the same person as the facility owner or co-applicant, attach a lease agreement or deed recorded easement. See instructions.

**Attachment:** Click here to enter text

## Section 10. TPDES Discharge Information (Instructions Page 34)

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

☒ Yes ☐ No

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

Click here to enter text

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

☒ Yes ☐ No

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

Click here to enter text

City nearest the outfall(s): Baird

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

Outfall Latitude: 32.393175

Longitude: -99.387384

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

☐ Yes      ☒ No

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

☐ Authorization granted      ☐ Authorization pending

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

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

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

[Click here to enter text.](#)

## Section 11. TLAP Disposal Information (Instructions Page 36)

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

☐ Yes      ☐ No

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

[Click here to enter text.](#)

- B. City nearest the disposal site: [Click here to enter text.](#)

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

- D. Disposal Site Latitude: [Click here to enter text.](#)      Longitude: [Click here to enter text.](#)

- E. For **TLAPs**, describe the routing of effluent from the treatment facility to the disposal site:

[Click here to enter text.](#)

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

[Click here to enter text.](#)

## Section 12. Miscellaneous Information (Instructions Page 37)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

If No, or if a new onsite sludge disposal authorization is being requested in this permit application, provide an accurate location description of the sewage sludge disposal site.

[Click here to enter text.](#)

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

☒ Yes ☐ No

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

Charles Keith and David Hudson

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

☐ Yes ☒ No

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

Account number: [Click here to enter text.](#)

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

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

☐ Yes ☒ No

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

Enforcement order number: [Click here to enter text.](#)

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

## Section 13. Attachments (Instructions Page 38)

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

- ☐ Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant.
- ☒ Original full-size USGS Topographic Map with the following information:
  - Applicant's property boundary

- Treatment facility boundary
- Labeled point of discharge for each discharge point (TPDES only)
- Highlighted discharge route for each discharge point (TPDES only)
- Onsite sewage sludge disposal site (if applicable)
- Effluent disposal site boundaries (TLAP only)
- New and future construction (if applicable)
- 1 mile radius information
- 3 miles downstream information (TPDES only)
- All ponds.



Attachment 1 for Individuals as co-applicants



Other Attachments. Please specify: [Click here to enter text.](#)

## Section 14. Signature Page (Instructions Page 39)

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

Permit Number: W00010037004

Applicant: City of Baird

Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under 30 Texas Administrative Code § 305.44 to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signatory name (typed or printed): Jim Dobbs

Signatory title: Mayor

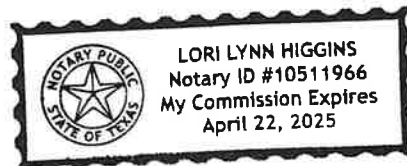
Signature: Jim Dobbs Date: 2-15-2024  
(Use blue ink)

Subscribed and Sworn to before me by the said \_\_\_\_\_  
on this 15<sup>th</sup> day of February, 2024.  
My commission expires on the 22<sup>nd</sup> day of April, 2025.

Lori Higgins  
Notary Public

[SEAL]

Callahan  
County, Texas



## Section 15. Plain Language Summary (Instructions Page 40)

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

#### DOMESTIC WASTEWATER

*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.*

City of Baird (CN600634182 ) operates City of Baird Water Treatment Facility RN103015426. a Water Treatment Facility. The facility is located at 420 Walnut St, in Baird, Callahan County, Texas 79504.

To treat and discharge filter backwash wastes from the ity of Baird Water Treatment Facility. <<For TLAP applications include the following sentence, otherwise delete:>> This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain14. List all expected pollutants here..15. Enter types of wastewater discharged here. is treated by 17. Enter a description of wastewater treatment used at the facility here..

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

## AGUAS RESIDUALES DOMÉSTICAS

*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.*

1. Introduzca el nombre del solicitante aquí. (2. Introduzca el número de cliente aquí (es decir, CN6 #####). ) 3. Elija del menú desplegable. 4. Introduzca el nombre de la instalación aquí. 5. Introduzca el número de entidad regulada aquí (es decir, RN1 #####). 6. Elija del menú desplegable. 7. Introduzca la descripción de la instalación aquí. . La instalación 8. Elija del menú desplegable. ubicado 9. Introduzca la ubicación aquí. , en 10. Introduzca el nombre de la ciudad aquí. , Condado de 11. Introduzca el nombre del condado aquí. , Texas 12. Introduzca el código postal aquí. . 13. Introduzca el resumen de la solicitud de solicitud aquí. <<Para las aplicaciones de TLAP incluya la siguiente oración, de lo contrario, elimine:>> Este permiso no autorizará una descarga de contaminantes en el agua en el estado.

Se espera que las descargas de la instalación contengan 14. Liste todos los contaminantes esperados aquí. . 15. Introduzca los tipos de aguas residuales descargadas aquí. 16. Elija del menú desplegable. tratado por 17. Introduzca una descripción del tratamiento de aguas residuales utilizado en la instalación aquí.

## DOMESTIC ADMINISTRATIVE REPORT 1.1

The following information is required for new and amendment applications.

### Section 1. Affected Landowner Information (Instructions Page 41)

- A. Indicate by a check mark that the landowners map or drawing, with scale, includes the following information, as applicable:
- ☐ The applicant's property boundaries
  - ☐ The facility site boundaries within the applicant's property boundaries
  - ☐ The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone
  - ☐ The property boundaries of all landowners surrounding the applicant's property (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
  - ☐ The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream
  - ☐ The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge
  - ☐ The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides
  - ☐ The boundaries of the effluent disposal site (for example, irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property
  - ☐ The property boundaries of all landowners surrounding the effluent disposal site
  - ☐ The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners surrounding the applicant's property boundaries where the sewage sludge land application site is located
  - ☐ The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (for example, sludge surface disposal site or sludge monofill) is located
- B. ☐ Indicate by a check mark that a separate list with the landowners' names and mailing addresses cross-referenced to the landowner's map has been provided.
- C. Indicate by a check mark in which format the landowners list is submitted:
- ☐ USB Drive
  - ☐ Four sets of labels
- D. Provide the source of the landowners' names and mailing addresses: [Click here 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 here to enter text](#)

## Section 2. Original Photographs (Instructions Page 44)

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

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

## Section 3. Buffer Zone Map (Instructions Page 44)

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

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

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

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

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

- ☐ Yes      ☐ No

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

### FOR AGENCIES REVIEWING DOMESTIC TPDES WASTEWATER PERMIT APPLICATIONS

#### TCEQ USE ONLY:

Application type: \_\_\_\_Renewal \_\_\_\_Major Amendment \_\_\_\_Minor Amendment \_\_\_\_New

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

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

Agency Receiving SPIF:

\_\_\_\_ Texas Historical Commission \_\_\_\_\_ U.S. Fish and Wildlife

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

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

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

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

The following applies to all applications:

1. Permittee: City of Baird

Permit No. WQ00 10037004

EPA ID No. TX 0125121

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

Located at the southeast corner of the intersection of 3rd St. and Walnut St., approximately 450 feet south and 1600 feet west of the intersection of State Highway 283 and Business 20 in the City of Baird and Callahan County, Texas.

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

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

First and Last Name: Lori Higgins

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text.

Title: City Administrator

Mailing Address: 328 Market Street

City, State, Zip Code: Baird TX 79504

Phone No.: 325-854-1212 Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: lori.cityofbaird@windstream.net

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

Click here to enter text.

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.

Unnamed ditch; thence to an unnamed tributary; thence to TP lake; thence to unnamed tributary; thence to Mexia Creek; thence to Deep Creek; thence to Hubbard Creek; thence to Hubbard Creek Reservoir in segment 1233 of the Brazos River 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

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

[Click here to enter text.](#)

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

The backwash ponds were built many years ago and besides mowing the grass and weeds no other activities occur around the ponds

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

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

The water treatment plant building was constructed in 1949 and the disposal ponds were constructed in the 1990's.

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

During the 1940's the City's wellfields began to dry up so the City built a lake and water treatment plant. The engineers were Freese and Nichols.

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## ATTACHMENT 1

### INDIVIDUAL INFORMATION

---

#### **Section 1. Individual Information (Instructions Page 50)**

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

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

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

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

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

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

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

Phone Number: [Click here to enter text.](#) Fax Number: [Click here to enter text.](#)

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

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

#### **For Commission Use Only:**

Customer Number:

Regulated Entity Number:

Permit Number:

## CHECKLIST OF COMMON DEFICIENCIES

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

Core Data Form (TCEQ Form No. 10400) (Required for all applications types. Must be completed in its entirety and signed. Note: Form may be signed by applicant representative.)	<input checked="" type="checkbox"/>		Yes
Correct and Current Industrial Wastewater Permit Application Forms (TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or later.)	<input checked="" type="checkbox"/>		Yes
Water Quality Permit Payment Submittal Form (Page 19) (Original payment sent to TCEQ Revenue Section. See instructions for mailing address.)	<input checked="" type="checkbox"/>		Yes
7.5 Minute USGS Quadrangle Topographic Map Attached (Full-size map if seeking "New" permit. 8 ½ x 11 acceptable for Renewals and Amendments)	<input checked="" type="checkbox"/>		Yes
Current/Non-Expired, Executed Lease Agreement or Easement Attached	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/> Yes
Landowners Map (See instructions for landowner requirements)	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/> Yes

### Things to Know:

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

Landowners Cross Reference List (See instructions for landowner requirements)	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/> Yes
Landowners Labels or USB Drive attached (See instructions for landowner requirements)	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/> Yes
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)	<input checked="" type="checkbox"/>		Yes



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY  
DOMESTIC WASTEWATER PERMIT APPLICATION

**DOMESTIC TECHNICAL REPORT 1.0**

The Following Is Required For All Applications  
Renewal, New, And Amendment

**Section 1. Permitted or Proposed Flows (Instructions Page 51)**

**A. Existing/Interim I Phase**

Design Flow (MGD): 0.006

2-Hr Peak Flow (MGD): NA

Estimated construction start date: NA

Estimated waste disposal start date: NA

**B. Interim II Phase**

Design Flow (MGD): [Click here to enter text.](#)

2-Hr Peak Flow (MGD): [Click here to enter text.](#)

Estimated construction start date: [Click here to enter text.](#)

Estimated waste disposal start date: [Click here to enter text.](#)

**C. Final Phase**

Design Flow (MGD): [Click here to enter text.](#)

2-Hr Peak Flow (MGD): [Click here to enter text.](#)

Estimated construction start date: [Click here to enter text.](#)

Estimated waste disposal start date: [Click here to enter text.](#)

**D. Current operating phase:** [Click here to enter text.](#)

Provide the startup date of the facility: [Click here to enter text.](#)

**Section 2. Treatment Process (Instructions Page 51)**

**A. Treatment process description**

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



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

Filter backwash effluent is discharged from the filters and is processed through two stabilization ponds. Effluent is normally retruned to the head of the WTP for treatment. Any overflow will discharge to an unnamed tributary

Port or pipe diameter at the discharge point, in inches: 6"

## B. Treatment Units

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

***Table 1.0(1) – Treatment Units***

<b>Treatment Unit Type</b>	<b>Number of Units</b>	<b>Dimensions (L x W x D)</b>
Sedimentation basin	1	11'SWD x 42' diameter
Filters	4	10.33' L x 7' W (each)
Clearwell	1	7.75' SWD x 32' diameter
Backwash pond #1	1	Surface area 7826 ft <sup>2</sup> /Volume 200,795 gallons
Backwash pond #2	1	Surface area 9693 ft <sup>2</sup> /Volume 334,954 gallons

## C. Process flow diagrams

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

construction.

**Attachment: #3**

### Section 3. Site Drawing (Instructions Page 52)

Provide a site drawing for the facility that shows the following:

- The boundaries of the treatment facility;
- The boundaries of the area served by the treatment facility;
- If land disposal of effluent, the boundaries of the disposal site and all storage/holding ponds; and
- If sludge disposal is authorized in the permit, the boundaries of the land application or disposal site.

**Attachment: #4**

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

City of Baird and Callahan County WSC

### Section 4. Unbuilt Phases (Instructions Page 52)

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

Yes ☐

No ☒

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

Yes ☐

No ☐

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

Click here to enter text.

### Section 5. Closure Plans (Instructions Page 53)

Have any treatment units been taken out of service permanently, or will any units be taken out of service in the next five years?

Yes ☐ No ☒

If **yes**, was a closure plan submitted to the TCEQ?

Yes ☐ No ☐

If **yes**, provide a brief description of the closure and the date of plan approval.

Click here to enter text.

### Section 6. Permit Specific Requirements (Instructions Page 53)

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

#### A. Summary transmittal

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

Yes ☒ No ☐

If **yes**, provide the date(s) of approval for each phase: Backwash ponds 2001, the WTP was built in 1949 and the city does not have records concerning this facility

Provide information, including dates, on any actions taken to meet a requirement or provision pertaining to the submission of a summary transmittal letter. Provide a copy of an approval letter from the TCEQ, if

applicable.

[Click here to enter text.](#)

## B. Buffer zones

Have the buffer zone requirements been met?

Yes ☒ No ☐

Provide information below, including dates, on any actions taken to meet the conditions of the buffer zone. If available, provide any new documentation relevant to maintaining the buffer zones.

[Click here to enter text.](#)

## C. Other actions required by the current permit

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

Yes ☐ No ☒

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

[Click here to enter text.](#)

## D. Grit and grease treatment

### 1. Acceptance of grit and grease waste

Does the facility have a grit and/or grease processing facility onsite that treats and decants or accepts transported loads of grit and grease waste that are discharged directly to the wastewater treatment plant prior to any treatment?

Yes ☐ No ☒

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

## ***2. Grit and grease processing***

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

[Click here to enter text.](#)

## ***3. Grit disposal***

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

Yes ☐ No ☐

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

Describe the method of grit disposal.

[Click here to enter text.](#)

## ***4. Grease and decanted liquid disposal***

Note: A registration or permit is required for grease disposal. Grease shall not be combined with treatment plant sludge. For more information, contact the TCEQ Municipal Solid Waste team at 512-239-0000.

Describe how the decant and grease are treated and disposed of after grit separation.

[Click here to enter text.](#)

## E. Stormwater management

### 1. Applicability

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

Yes ☐ No ☒

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

Yes ☐ No ☒

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

### 2. MSGP coverage

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

Yes ☐ No ☐

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

TXR05 [Click here to enter text.](#) or TXRNE [Click here to enter text.](#)

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

Yes ☐ No ☐

### 3. Conditional exclusion

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

Yes ☐ No ☐

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

[Click here to enter text.](#)

### 4. Existing coverage in individual permit

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

Yes ☐ No ☐

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

[Click here to enter text.](#)

### ***5. Zero stormwater discharge***

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

Yes ☐ No ☐

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

[Click here to enter text.](#)

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

### ***6. Request for coverage in individual permit***

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

Yes ☐ No ☐

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

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

[Click here to enter text.](#)

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

#### **F. Discharges to the Lake Houston Watershed**

Does the facility discharge in the Lake Houston watershed?

Yes ☐ No ☒

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

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

##### ***1. Acceptance of sludge from other WWTPs***

Does the facility accept or will it accept sludge from other treatment plants at the facility site?

Yes ☐ No ☒

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

In addition, provide the date that the plant started accepting sludge or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an estimate of the BOD<sub>5</sub> concentration of the sludge, and the design BOD<sub>5</sub> concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.



Click here to enter text.

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

## ***2. Acceptance of septic waste***

Is the facility accepting or will it accept septic waste?

Yes ☐ No ☒

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

Yes ☐ No ☐

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

Yes ☐ No ☐

If yes to any of the above, provide a the date that the plant started accepting septic waste, or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD<sub>5</sub> concentration of the septic waste, and the design BOD<sub>5</sub> concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click here to enter text.

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

## ***3. Acceptance of other wastes (not including septic, grease, grit, or RCRA, CERCLA or as discharged by IUs listed in Worksheet 6)***

Is the facility accepting or will it accept wastes that are not domestic in nature excluding the categories listed above?

Yes ☐ No ☒

If yes, provide the date that the plant started accepting the waste, an estimate how much waste is accepted on a monthly basis (gallons or millions of gallons), a description of the entities generating the waste, and any distinguishing chemical or other physical characteristic of the waste. Also

note if this information has or has not changed since the last permit action.

[Click here to enter text.](#)

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

Is the facility in operation?

Yes ☒ No ☐

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

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Enterococci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity, µmohs/cm, †					
Oil & Grease, mg/l					
Alkalinity (CaCO <sub>3</sub> )*, mg/l					

\*TPDES permits only

†TLAP permits only

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Total Suspended Solids, mg/l		<2.00	1	Grab	01/25/2024 09:45
Total Dissolved Solids, mg/l		608	1	Grab	01/25/2024 09:45
pH, standard units		8.1	1	Grab	01/25/2024 09:45
Fluoride, mg/l		<1.0	1	Grab	01/25/2024 09:45
Aluminum, mg/l		0.0122	1	Grab	01/25/2024 09:45
Alkalinity (CaCO <sub>3</sub> ), mg/l		101	1	Grab	01/25/2024 09:45

## Section 8. Facility Operator (Instructions Page 60)

Facility Operator Name: KENNETH SHANE MCPHERSON

Facility Operator's License Classification and Level: C Surface Water Treatment

## Section 9. Sewage Sludge Management and Disposal (Instructions Page 60)

### A. Sludge disposal method

Identify the current or anticipated sludge disposal method or methods from the following list. Check all that apply.

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

### B. Sludge disposal site

Disposal site name: BFI Regional Landfill

TCEQ permit or registration number: CN 602629479

County where disposal site is located: Callahan

### C. Sludge transportation method

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

Name of the hauler: Allied Waste

Hauler registration number: 22178

Sludge is transported as a:

Liquid ☐

semi-liquid ☐

semi-solid ☐

solid ☒

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

### A. Beneficial use authorization

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

Yes ☐ No ☒

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

Yes ☐ No ☐

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

Yes ☐ No ☐

### B. Sludge processing authorization

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

Sludge Composting Yes ☐ No ☒

Marketing and Distribution of sludge Yes ☐ No ☒

Sludge Surface Disposal or Sludge Monofill Yes ☐ No ☒

Temporary storage in sludge lagoons Yes ☐ No ☒

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

Yes ☐ No ☐

## Section 11. Sewage Sludge Lagoons (Instructions Page 61)

Does this facility include sewage sludge lagoons?

Yes ☐ No ☒

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

### A. Location information

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

- Original General Highway (County) Map:

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

- USDA Natural Resources Conservation Service Soil Map:

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

- Federal Emergency Management Map:

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

- Site map:

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

Discuss in a description if any of the following exist within the lagoon area.

Check all that apply.

- ☐ Overlap a designated 100-year frequency flood plain
- ☐ Soils with flooding classification
- ☐ Overlap an unstable area
- ☐ Wetlands
- ☐ Located less than 60 meters from a fault
- ☐ None of the above

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

If a portion of the lagoon(s) is located within the 100-year frequency flood plain, provide the protective measures to be utilized including type and size of protective structures:

[Click here to enter text.](#)

## **B. Temporary storage information**

Provide the results for the pollutant screening of sludge lagoons. These results are in addition to pollutant results in Section 7 of Technical Report 1.0.

Nitrate Nitrogen, mg/kg: [Click here to enter text.](#)

Total Kjeldahl Nitrogen, mg/kg: [Click here to enter text.](#)

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: [Click here to enter text.](#)

Phosphorus, mg/kg: [Click here to enter text.](#)

Potassium, mg/kg: [Click here to enter text.](#)

pH, standard units: [Click here to enter text.](#)

Ammonia Nitrogen mg/kg: [Click here to enter text.](#)

Arsenic: [Click here to enter text.](#)

Cadmium: [Click here to enter text.](#)

Chromium: [Click here to enter text.](#)

Copper: [Click here to enter text.](#)

Lead: [Click here to enter text.](#)

Mercury: [Click here to enter text.](#)

Molybdenum: [Click here to enter text.](#)

Nickel: [Click here to enter text.](#)

Selenium: [Click here to enter text.](#)

Zinc: [Click here to enter text.](#)

Total PCBs: [Click here to enter text.](#)

Provide the following information:

Volume and frequency of sludge to the lagoon(s): [Click here to enter text.](#)

Total dry tons stored in the lagoons(s) per 365-day period: [Click here to enter text.](#)

Total dry tons stored in the lagoons(s) over the life of the unit: [Click here to enter text.](#)

### C. Liner information

Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of  $1 \times 10^{-7}$  cm/sec?

Yes ☐ No ☐

If **yes**, describe the liner below. Please note that a liner is required.

[Click here to enter text.](#)

### D. Site development plan

Provide a detailed description of the methods used to deposit sludge in the lagoon(s):

[Click here to enter text.](#)

Attach the following documents to the application.

- Plan view and cross-section of the sludge lagoon(s)  
**Attachment:** [Click here to enter text.](#)
- Copy of the closure plan  
**Attachment:** [Click here to enter text.](#)
- Copy of deed recordation for the site  
**Attachment:** [Click here to enter text.](#)
- Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons  
**Attachment:** [Click here to enter text.](#)
- Description of the method of controlling infiltration of groundwater and surface water from entering the site  
**Attachment:** [Click here to enter text.](#)
- Procedures to prevent the occurrence of nuisance conditions  
**Attachment:** [Click here to enter text.](#)

### E. Groundwater monitoring

Is groundwater monitoring currently conducted at this site, or are any wells



available for groundwater monitoring, or are groundwater monitoring data otherwise available for the sludge lagoon(s)?

Yes ☐ No ☐

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

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

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

### A. Additional authorizations

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

Yes ☐ No ☒

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

[Click here to enter text.](#)

### B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

Yes ☐ No ☒

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

Yes ☐ No ☒

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

[Click here to enter text.](#)

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

### A. RCRA hazardous wastes

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

Yes ☐ No ☒

### B. Remediation activity wastewater

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

Yes ☐ No ☒

### C. Details about wastes received

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

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

## Section 14. Laboratory Accreditation (Instructions Page 64)

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

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

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

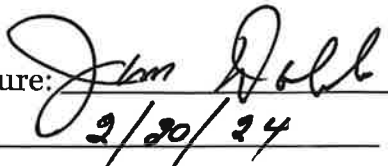
The following certification statement shall be signed and submitted with every application. See the *Signature Page* section in the Instructions, for a list of designated representatives who may sign the certification.

### CERTIFICATION:

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

Printed Name: Jim Dobbs

Title: Mayor

Signature: 

Date: 2/20/24

# DOMESTIC TECHNICAL REPORT 1.1

The following is required for new and amendment applications

## Section 1. Justification for Permit (Instructions Page 66)

### A. Justification of permit need

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

[Click here to enter text.](#)

### B. Regionalization of facilities

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

#### 1. *Municipally incorporated areas*

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

Is any portion of the proposed service area located in an incorporated city?

Yes ☐      No ☐      Not Applicable ☐

If yes, within the city limits of: [Click here to enter text.](#)

If yes, attach correspondence from the city.

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

If consent to provide service is available from the city, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the city versus the cost of the proposed facility or expansion attached.

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

#### 2. *Utility CCN areas*

Is any portion of the proposed service area located inside another utility's CCN area?

Yes ☐ No ☐

**If yes**, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the CCN facilities versus the cost of the proposed facility or expansion.

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

### ***3. Nearby WWTPs or collection systems***

Are there any domestic permitted wastewater treatment facilities or collection systems located within a three-mile radius of the proposed facility?

Yes ☐ No ☐

**If yes**, attach a list of these facilities that includes the permittee's name and permit number, and an area map showing the location of these facilities.

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

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

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

Does a permitted domestic wastewater treatment facility or a collection system located within three (3) miles of the proposed facility currently have the capacity to accept or is willing to expand to accept the volume of wastewater proposed in this application?

Yes ☐ No ☐

**If yes**, attach an analysis of expenditures required to connect to a permitted wastewater treatment facility or collection system located within 3 miles versus the cost of the proposed facility or expansion.

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

## **Section 2. Organic Loading (Instructions Page 67)**

Is this facility in operation?

Yes ☐ No ☐

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

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

**A. Current organic loading**

Facility Design Flow (flow being requested in application): [Click here to enter text.](#)

Average Influent Organic Strength or BOD<sub>5</sub> Concentration in mg/l: [Click here to enter text.](#)

Average Influent Loading (lbs/day = total average flow X average BOD<sub>5</sub> conc. X 8.34): [Click here to enter text.](#)

Provide the source of the average organic strength or BOD<sub>5</sub> concentration.

[Click here to enter text.](#)

**B. Proposed organic loading**

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

***Table 1.1(1) - Design Organic Loading***

Source	Total Average Flow (MGD)	Influent BOD <sub>5</sub> Concentration (mg/l)
Municipality		
Subdivision		
Trailer park - transient		
Mobile home park		
School with cafeteria and showers		
School with cafeteria,		

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

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

#### A. Existing/Interim I Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: [Click here to enter text.](#)

Total Suspended Solids, mg/l: [Click here to enter text.](#)

Ammonia Nitrogen, mg/l: [Click here to enter text.](#)

Total Phosphorus, mg/l: [Click here to enter text.](#)

Dissolved Oxygen, mg/l: [Click here to enter text.](#)

Other: [Click here to enter text.](#)

### **B. Interim II Phase Design Effluent Quality**

Biochemical Oxygen Demand (5-day), mg/l: [Click here to enter text.](#)

Total Suspended Solids, mg/l: [Click here to enter text.](#)

Ammonia Nitrogen, mg/l: [Click here to enter text.](#)

Total Phosphorus, mg/l: [Click here to enter text.](#)

Dissolved Oxygen, mg/l: [Click here to enter text.](#)

Other: [Click here to enter text.](#)

### **C. Final Phase Design Effluent Quality**

Biochemical Oxygen Demand (5-day), mg/l: [Click here to enter text.](#)

Total Suspended Solids, mg/l: [Click here to enter text.](#)

Ammonia Nitrogen, mg/l: [Click here to enter text.](#)

Total Phosphorus, mg/l: [Click here to enter text.](#)

Dissolved Oxygen, mg/l: [Click here to enter text.](#)

Other: [Click here to enter text.](#)

### **D. Disinfection Method**

Identify the proposed method of disinfection.

- ☐ Chlorine: [Click here to enter text.](#) mg/l after [Click here to enter text.](#) minutes detention time at peak flow  
Dechlorination process: [Click here to enter text.](#)
- ☐ Ultraviolet Light: [Click here to enter text.](#) seconds contact time at peak flow
- ☐ Other: [Click here to enter text.](#)

## **Section 4. Design Calculations (Instructions Page 68)**

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

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



## Section 5. Facility Site (Instructions Page 68)

### A. 100-year floodplain

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

Yes ☐ No ☐

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

[Click here to enter text.](#)

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

[Click here to enter text.](#)

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

Yes ☐ No ☐

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

Yes ☐ No ☐

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

**If no**, provide the approximate date you anticipate submitting your application to the Corps: [Click here to enter text.](#)

### B. Wind rose

Attach a wind rose. **Attachment:** [Click here to enter text.](#)

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

### A. Beneficial use authorization

Are you requesting to include authorization to land apply sewage sludge for beneficial use on property located adjacent to the wastewater treatment facility under the wastewater permit?

Yes ☐ No ☐

**If yes**, attach the completed Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451)

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

## **B. Sludge processing authorization**

Identify the sludge processing, storage or disposal options that will be conducted at the wastewater treatment facility:

- ☐ Sludge Composting
- ☐ Marketing and Distribution of sludge
- ☐ Sludge Surface Disposal or Sludge Monofill

**If any of the above** sludge options are selected, attach a completed DOMESTIC WASTEWATER PERMIT APPLICATION: SEWAGE SLUDGE TECHNICAL REPORT (TCEQ Form No. 10056).

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

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

Attach a solids management plan to the application.

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

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

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

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

# DOMESTIC TECHNICAL REPORT WORKSHEET 2.0

## RECEIVING WATERS

The following is required for all TPDES permit applications

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

Is there a surface water intake for domestic drinking water supply located within 5 miles downstream from the point or proposed point of discharge?

Yes ☐ No ☒

If yes, provide the following:

Owner of the drinking water supply: [Click here to enter text.](#)

Distance and direction to the intake: [Click here to enter text.](#)

Attach a USGS map that identifies the location of the intake.

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

### Section 2. Discharge into Tidally Affected Waters (Instructions Page 73)

Does the facility discharge into tidally affected waters?

Yes ☐ No ☒

If yes, complete the remainder of this section. If no, proceed to Section 3.

#### A. Receiving water outfall

Width of the receiving water at the outfall, in feet: 1

#### B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

Yes ☐ No ☒

If yes, provide the distance and direction from outfall(s).

[Click here to enter text.](#)

### C. Sea grasses

Are there any sea grasses within the vicinity of the point of discharge?

Yes ☐ No ☒

If yes, provide the distance and direction from the outfall(s).

[Click here to enter text.](#)

### Section 3. Classified Segments (Instructions Page 73)

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

Yes ☐ No ☒

If yes, this Worksheet is complete.

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

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

Name of the immediate receiving waters: Unnamed tributary of Mexia Creek

#### A. Receiving water type

Identify the appropriate description of the receiving waters.

- ☒ Stream
- ☐ Freshwater Swamp or Marsh
- ☐ Lake or Pond

Surface area, in acres: [Click here to enter text.](#)

Average depth of the entire water body, in feet: [Click here to enter text.](#)

Average depth of water body within a 500-foot radius of discharge point, in feet: [Click here to enter text.](#)

- ☐ Man-made Channel or Ditch

- ☐ Open Bay
- ☐ Tidal Stream, Bayou, or Marsh
- ☐ Other, specify: [Click here to enter text.](#)

### B. Flow characteristics

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

- ☒ Intermittent - dry for at least one week during most years
- ☐ Intermittent with Perennial Pools - enduring pools with sufficient habitat to maintain significant aquatic life uses
- ☐ Perennial - normally flowing

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

- ☐ USGS flow records
- ☐ Historical observation by adjacent landowners
- ☒ Personal observation
- ☐ Other, specify: [Click here to enter text.](#)

### C. Downstream perennial confluences

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

None

### D. Downstream characteristics

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

Yes ☐ No ☒

If yes, discuss how.

[Click here to enter text.](#)

### E. Normal dry weather characteristics

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

Prior to the T&P Lake, found one small pond (approx. 2' W x 4' L x 6" D). Unable to determine if the water was from the backwash ponds or just stormwater. The pond was light green, no aquatic life noted, no offensive odors and was surrounded by green vegetation.

Date and time of observation: 01/25/2024 at 09:45 am

Was the water body influenced by stormwater runoff during observations?

Yes ☒ No ☐

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

### A. Upstream influences

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

- |   |  |
|---|--|
| <input type="checkbox"/> Oil field activities | <input checked="" type="checkbox"/> Urban runoff                                     |
| <input type="checkbox"/> Upstream discharges  | <input checked="" type="checkbox"/> Agricultural runoff                              |
| <input type="checkbox"/> Septic tanks         | <input type="checkbox"/> Other(s), specify <a href="#">Click here to enter text.</a> |

### B. Waterbody uses

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

- |  |   |
|--|---|
| <input type="checkbox"/> Livestock watering    | <input type="checkbox"/> Contact recreation     |
| <input type="checkbox"/> Irrigation withdrawal | <input type="checkbox"/> Non-contact recreation |
| <input type="checkbox"/> Fishing               | <input type="checkbox"/> Navigation             |

- |  |   |
|--|---|
| <input type="checkbox"/> Domestic water supply | <input type="checkbox"/> Industrial water supply                  |
| <input type="checkbox"/> Park activities       | <input checked="" type="checkbox"/> Other(s), specify <u>None</u> |

### C. Waterbody aesthetics

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

- ☐ Wilderness: outstanding natural beauty; usually wooded or unpastured area; water clarity exceptional
- ☐ Natural Area: trees and/or native vegetation; some development evident (from fields, pastures, dwellings); water clarity discolored
- ☒ Common Setting: not offensive; developed but uncluttered; water may be colored or turbid
- ☐ Offensive: stream does not enhance aesthetics; cluttered; highly developed; dumping areas; water discolored

## DOMESTIC WORKSHEET 2.1

### STREAM PHYSICAL CHARACTERISTICS

**Required for new applications, major facilities, and applications adding an outfall**

Worksheet 2.1 is not required for discharges to intermittent streams or discharges directly to (or within 300 feet of) a classified segment.

#### Section 1. General Information (Instructions Page 75)

Date of study: [Click here to enter text.](#) Time of study: [Click here to enter text.](#)

Stream name: [Click here to enter text.](#)

Location: [Click here to enter text.](#)

Type of stream upstream of existing discharge or downstream of proposed discharge (check one).

☐ Perennial

☐ Intermittent with perennial pools

#### Section 2. Data Collection (Instructions Page 75)

Number of stream bends that are well defined: [Click here to enter text.](#)

Number of stream bends that are moderately defined: [Click here to enter text.](#)

Number of stream bends that are poorly defined: [Click here to enter text.](#)

Number of riffles: [Click here to enter text.](#)

Evidence of flow fluctuations (check one):

☐ Minor

☐ moderate

☐ severe

Indicate the observed stream uses and if there is evidence of flow fluctuations or channel obstruction/modification.

[Click here to enter text.](#)

#### Stream transects

In the table below, provide the following information for each transect downstream of the existing or proposed discharges. Use a separate row for each transect.



**Table 2.1(1) - Stream Transect Records**

<b>Stream type at transect</b> Select riffle, run, glide, or pool. See Instructions, Definitions section.	<b>Transect location</b>	<b>Water surface width (ft)</b>	<b>Stream depths (ft)</b> at 4 to 10 points along each transect from the channel bed to the water surface. Separate the measurements with commas.
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			

### Section 3. Summarize Measurements (Instructions Page 76)

Streambed slope of entire reach, from USGS map in feet/feet: [Click here to](#)

enter text.

Approximate drainage area above the most downstream transect (from USGS map or county highway map, in square miles): Click here to enter text.

Length of stream evaluated, in feet: Click here to enter text.

Number of lateral transects made: Click here to enter text.

Average stream width, in feet: Click here to enter text.

Average stream depth, in feet: Click here to enter text.

Average stream velocity, in feet/second: Click here to enter text.

Instantaneous stream flow, in cubic feet/second: Click here to enter text.

Indicate flow measurement method (type of meter, floating chip timed over a fixed distance, etc.): Click here to enter text.

Size of pools (large, small, moderate, none): Click here to enter text.

Maximum pool depth, in feet: Click here to enter text.

# DOMESTIC WORKSHEET 3.0

## LAND DISPOSAL OF EFFLUENT

The following is required for all permit applications  
Renewal, New, and Amendments

### Section 1. Type of Disposal System (Instructions Page 77)

Identify the method of land disposal:

- |  |  |
|--|--|
| <input type="checkbox"/> Surface application         | <input type="checkbox"/> Subsurface application                |
| <input type="checkbox"/> Irrigation                  | <input type="checkbox"/> Subsurface soils absorption           |
| <input type="checkbox"/> Drip irrigation system      | <input type="checkbox"/> Subsurface area drip dispersal system |
| <input type="checkbox"/> Evaporation                 |  |
| <input type="checkbox"/> Evapotranspiration beds     |  |
| <input type="checkbox"/> Other (describe in detail): | <a href="#">Click here to enter text.</a>                      |

**NOTE: All applicants without authorization or proposing new/amended subsurface disposal MUST complete and submit Worksheet 7.0.**

For existing authorizations, provide Registration Number: [Click here to enter text.](#)

### Section 2. Land Application Site(s) (Instructions Page 77)

In table 3.0(1), provide the requested information for the land application sites. Include the agricultural or cover crop type (wheat, cotton, alfalfa, bermuda grass, native grasses, etc.), land use (golf course, hayland, pastureland, park, row crop, etc.), irrigation area, amount of effluent applied, and whether or not the public has access to the area. Specify the amount of land area and the amount of effluent that will be allotted to each agricultural or cover crop, if more than one crop will be used.

**Table 3.0(1) – Land Application Site Crops**

Crop Type & Land Use	Irrigation Area (acres)	Effluent Application (GPD)	Public Access? Y/N

Crop Type & Land Use	Irrigation Area (acres)	Effluent Application (GPD)	Public Access? Y/N

### Section 3. Storage and Evaporation Lagoons/Ponds (Instructions Page 77)

*Table 3.0(2) - Storage and Evaporation Ponds*

Pond Number	Surface Area (acres)	Storage Volume (acre-feet)	Dimensions	Liner Type

Attach a copy of a liner certification that was prepared, signed, and sealed by a Texas licensed professional engineer for each pond.

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

### Section 4. Flood and Runoff Protection (Instructions Page 77)

Is the land application site within the 100-year frequency flood level?

Yes ☐ No ☐

**If yes**, describe how the site will be protected from inundation.

Provide the source used to determine the 100-year frequency flood level:

[Click here to enter text.](#)

Provide a description of tailwater controls and rainfall run-on controls used for the land application site.

[Click here to enter text.](#)

## Section 5. Annual Cropping Plan (Instructions Page 77)

Attach an Annual Cropping Plan which includes a discussion of each of the following items. If not applicable, provide a detailed explanation indicating why.

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

- Soils map with crops
- Cool and warm season plant species
- Crop yield goals
- Crop growing season
- Crop nutrient requirements
- Additional fertilizer requirements
- Minimum/maximum harvest height (for grass crops)
- Supplemental watering requirements
- Crop salt tolerances
- Harvesting method/number of harvests
- Justification for not removing existing vegetation to be irrigated

## Section 6. Well and Map Information (Instructions Page 78)

Attach a USGS map with the following information shown and labeled. If not applicable, provide a detailed explanation (on a separate page) indicating why.

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

- The boundaries of the land application site(s)
- Waste disposal or treatment facility site(s)

- On-site buildings
- Buffer zones
- Effluent storage and tailwater control facilities
- All water wells within 1 mile of the disposal site or property boundaries
- All springs and seeps onsite and within 500 feet of the property boundaries
- All surface waters in the state onsite and within 500 feet of the property boundaries
- All faults and sinkholes onsite and within 500 feet of the property

List and cross reference all water wells shown on the USGS map in the following table. Attach additional pages as necessary to include all of the wells.

**Table 3.0(3) – Water Well Data**

Well ID	Well Use	Producing? Y/N	Open, cased, capped, or plugged?	Proposed Best Management Practice
			Choose an item.	
			Choose an item.	
			Choose an item.	
			Choose an item.	
			Choose an item.	

If water quality data or well log information is available please include the information in an attachment listed by Well ID.

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

## Section 7. Groundwater Quality (Instructions Page 79)

Attach a Groundwater Quality Technical Report which assesses the impact of the wastewater disposal system on groundwater. This report shall include an evaluation of the water wells (including the information in the well table provided in Item 6. above), the wastewater application rate, and pond liners.

Indicate by a check mark that this report is provided.

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

Are groundwater monitoring wells available onsite? Yes ☐ No ☐

Do you plan to install ground water monitoring wells or lysimeters around the land application site? Yes ☐ No ☐

If yes, then provide the proposed location of the monitoring wells or lysimeters on a site map.

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

## Section 8. Soil Map and Soil Analyses (Instructions Page 79)

### A. Soil map

Attach a USDA Soil Survey map that shows the area to be used for effluent disposal.

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

### B. Soil analyses

Attach the laboratory results sheets from the soil analyses. **Note:** for renewal applications, the current annual soil analyses required by the permit are acceptable as long as the test date is less than one year prior to the submission of the application.

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

List all USDA designated soil series on the proposed land application site. Attach additional pages as necessary.

**Table 3.0(4) – Soil Data**

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number

### Section 9. Effluent Monitoring Data (Instructions Page 80)

Is the facility in operation?

Yes ☐ No ☐

If **no**, this section is not applicable and the worksheet is complete.

If **yes**, provide the effluent monitoring data for the parameters regulated in the existing permit. If a parameter is not regulated in the existing permit, enter N/A.

**Table 3.0(5) – Effluent Monitoring Data**

Date	30 Day Avg Flow MGD	BOD <sub>5</sub> mg/l	TSS mg/l	pH	Chlorine Residual mg/l	Acres irrigated



<b>Date</b>	<b>30 Day Avg Flow MGD</b>	<b>BOD<sub>5</sub> mg/l</b>	<b>TSS mg/l</b>	<b>pH</b>	<b>Chlorine Residual mg/l</b>	<b>Acres irrigated</b>

Provide a discussion of all persistent excursions above the permitted limits and any corrective actions taken.

Click here to enter text.

## DOMESTIC WORKSHEET 3.1

### SURFACE LAND DISPOSAL OF EFFLUENT

The following is required for new and major amendment applications.

Renewal and minor amendments applicants may be asked for the worksheet on a case by case basis.

#### Section 1. Surface Disposal (Instructions Page 81)

Complete the item that applies for the method of disposal being used.

##### A. Irrigation

Area under irrigation, in acres: [Click here to enter text.](#)

Design application frequency:

hours/day [Click here to enter text.](#) And days/week [Click here to enter text.](#)

Land grade (slope):

average percent (%): [Click here to enter text.](#)

maximum percent (%): [Click here to enter text.](#)

Design application rate in acre-feet/acre/year: [Click here to enter text.](#)

Design total nitrogen loading rate, in lbs N/acre/year: [Click here to enter text.](#)

Soil conductivity (mmhos/cm): [Click here to enter text.](#)

Method of application: [Click here to enter text.](#)

Attach a separate engineering report with the water balance and storage volume calculations, method of application, irrigation efficiency, and nitrogen balance.

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

##### B. Evaporation ponds

Daily average effluent flow into ponds, in gallons per day: [Click here to enter text.](#)

Attach a separate engineering report with the water balance and storage volume calculations.

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

### **C. Evapotranspiration beds**

Number of beds: [Click here to enter text.](#)

Area of bed(s), in acres: [Click here to enter text.](#)

Depth of bed(s), in feet: [Click here to enter text.](#)

Void ratio of soil in the beds: [Click here to enter text.](#)

Storage volume within the beds, in acre-feet: [Click here to enter text.](#)

Attach a separate engineering report with the water balance and storage volume calculations, and a description of the lining.

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

### **D. Overland flow**

Area used for application, in acres: [Click here to enter text.](#)

Slopes for application area, percent (%): [Click here to enter text.](#)

Design application rate, in gpm/foot of slope width: [Click here to enter text.](#)

Slope length, in feet: [Click here to enter text.](#)

Design BOD<sub>5</sub> loading rate, in lbs BOD<sub>5</sub>/acre/day: [Click here to enter text.](#)

Design application frequency:

hours/day: [Click here to enter text.](#) **And** days/week: [Click here to enter text.](#)

Attach a separate engineering report with the method of application and design requirements according to *30 TAC Chapter 217*.

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

## **Section 2. Edwards Aquifer (Instructions Page 82)**

Is the facility subject to *30 TAC Chapter 213*, Edwards Aquifer Rules?

Yes ☐ No ☐

**If yes, attach a report concerning the recharge zone.**

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

## DOMESTIC WORKSHEET 3.2

### SUBSURFACE LAND DISPOSAL OF EFFLUENT

The following is required for new and major amendment applications. Renewal and minor amendments may require the worksheet on a case by case basis.

**NOTE: All applicants proposing new/amended subsurface disposal MUST complete and submit Worksheet 7.0. This worksheet applies to any subsurface disposal system that does not meet the definition of a subsurface area drip dispersal system as defined in 30 TAC Chapter 222, *Subsurface Area Drip Dispersal System*.**

#### Section 1. Subsurface Application (Instructions Page 83)

Identify the type of system:

- ☐ Conventional Gravity Drainfield, Beds, or Trenches (new systems must be less than 5,000 GPD)
- ☐ Low Pressure Dosing
- ☐ Other, specify: [Click here to enter text.](#)

Application area, in acres: [Click here to enter text.](#)

Area of drainfield, in square feet: [Click here to enter text.](#)

Application rate, in gal/square foot/day: [Click here to enter text.](#)

Depth to groundwater, in feet: [Click here to enter text.](#)

Area of trench, in square feet: [Click here to enter text.](#)

Dosing duration per area, in hours: [Click here to enter text.](#)

Number of beds: [Click here to enter text.](#)

Dosing amount per area, in inches/day: [Click here to enter text.](#)

Infiltration rate, in inches/hour: [Click here to enter text.](#)

Storage volume, in gallons: [Click here to enter text.](#)

Area of bed(s), in square feet: [Click here to enter text.](#)

Soil Classification: [Click here to enter text.](#)

Attach a separate engineering report with the information required in 30 TAC § 309.20, excluding the requirements of § 309.20 b(3)(A) and (B) design analysis which may be asked for on a case by case basis. Include a description of the schedule of dosing basin rotation.

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

## Section 2. Edwards Aquifer (Instructions Page 83)

Is the subsurface system located on the Edwards Aquifer Recharge Zone as mapped by the TCEQ?

Yes ☐ No ☐

Is the subsurface system located on the Edwards Aquifer Transition Zone as mapped by the TCEQ?

Yes ☐ No ☐

**If yes to either question**, the subsurface system may be prohibited by 30 TAC §213.8. Please call the Municipal Permits Team, at 512-239-4671, to schedule a pre-application meeting.

## DOMESTIC WORKSHEET 3.3

### SUBSURFACE AREA DRIP DISPERSAL SYSTEM (SADDS) LAND DISPOSAL OF EFFLUENT

The following is required for new and major amendment subsurface area drip dispersal system applications. Renewal and minor amendments may require the worksheet on a case by case basis.

**NOTE: All applicants proposing new or amended subsurface disposal MUST complete and submit Worksheet 7.0. This worksheet applies to any subsurface disposal system that meets the definition of a subsurface area drip dispersal system as defined in 30 TAC Chapter 222, *Subsurface Area Drip Dispersal System*.**

#### Section 1. Administrative Information (Instructions Page 84)

- A. Provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the owner of the treatment facility.

[Click here to enter text.](#)

- B. Is the owner of the land where the treatment facility is located the same as the owner of the treatment facility?

Yes ☐ No ☐

If **no**, provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the owner of the land where the treatment facility is located.

[Click here to enter text.](#)

- C. Owner of the subsurface area drip dispersal system:

[Click here to enter text.](#)

- D. Is the owner of the subsurface area drip dispersal system the same as the owner of the wastewater treatment facility or the site where the wastewater treatment facility is located?

Yes ☐ No ☐

If **no**, identify the names of all corporations or other business entities managed, owned, or otherwise closely related to the entity identified in Item 1.C.

[Click here to enter text.](#)

- E. Owner of the land where the subsurface area drip dispersal system is located:

[Click here to enter text.](#)

- F. Is the owner of the land where the subsurface area drip dispersal system is located the same as owner of the wastewater treatment facility, the site where the wastewater treatment facility is located, or the owner of the subsurface area drip dispersal system?

Yes ☐ No ☐

If **no**, identify the name of all corporations or other business entities managed, owned, or otherwise closely related to the entity identified in item 1.E.

[Click here to enter text.](#)

## Section 2. Subsurface Area Drip Dispersal System (Instructions Page 84)

### A. Type of system

- ☐ Subsurface Drip Irrigation
- ☐ Surface Drip Irrigation
- ☐ Other, specify: [Click here to enter text.](#)

### B. Irrigation operations

Application area, in acres: [Click here to enter text.](#)

Infiltration Rate, in inches/hour: [Click here to enter text.](#)

Average slope of the application area, percent (%): [Click here to enter text.](#)

Maximum slope of the application area, percent (%): [Click here to enter text.](#)

Storage volume, in gallons: [Click here to enter text.](#)

Major soil series: [Click here to enter text.](#)

Depth to groundwater, in feet: [Click here to enter text.](#)

### C. Application rate

Is the facility located **west** of the boundary shown in 30 TAC § 222.83 and also using a vegetative cover of non-native grasses over seeded with cool



season grasses during the winter months (October-March)?

Yes ☐ No ☐

If **yes**, then the facility may propose a hydraulic application rate not to exceed 0.1 gal/square foot/day.

Is the facility located **east** of the boundary shown in *30 TAC § 222.83* **or** in any part of the state when the vegetative cover is any crop other than non-native grasses?

Yes ☐ No ☐

If **yes**, the facility must use the formula in *30 TAC §222.83* to calculate the maximum hydraulic application rate.

Do you plan to submit an alternative method to calculate the hydraulic application rate for approval by the executive director?

Yes ☐ No ☐

Hydraulic application rate, in gal/square foot/day: [Click here to enter text.](#)

Nitrogen application rate, in lbs/gal/day: [Click here to enter text.](#)

#### **D. Dosing information**

Number of doses per day: [Click here to enter text.](#)

Dosing duration per area, in hours: [Click here to enter text.](#)

Rest period between doses, in hours: [Click here to enter text.](#)

Dosing amount per area, in inches/day: [Click here to enter text.](#)

Number of zones: [Click here to enter text.](#)

Does the proposed subsurface drip irrigation system use tree vegetative cover as a crop?

Yes ☐ No ☐

If **yes**, provide a vegetation survey by a certified arborist. Please call the Water Quality Assessment Team at (512) 239-4671 to schedule a pre-application meeting.

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

### Section 3. Required Plans (Instructions Page 84)

#### A. Recharge feature plan

Attach a Recharge Feature Plan with all information required in *30 TAC §222.79*.

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

#### B. Soil evaluation

Attach a Soil Evaluation with all information required in *30 TAC §222.73*.

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

#### C. Site preparation plan

Attach a Site Preparation Plan with all information required in *30 TAC §222.75*.

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

#### D. Soil sampling/testing

Attach soil sampling and testing that includes all information required in *30 TAC §222.157*.

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

### Section 4. Floodway Designation (Instructions Page 85)

#### A. Site location

Is the existing/proposed land application site within a designated floodway?

Yes ☐ No ☐

#### B. Flood map

Attach either the FEMA flood map or alternate information used to determine the floodway.

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

### Section 5. Surface Waters in the State (Instructions Page 85)

#### A. Buffer Map

Attach a map showing appropriate buffers on surface waters in the state, water wells, and springs/seeps.

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

**B. Buffer variance request**

Do you plan to request a buffer variance from water wells or waters in the state?

Yes ☐ No ☐

**If yes**, then attach the additional information required in *30 TAC § 222.81(c)*.

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

**Section 6. Edwards Aquifer (Instructions Page 85)**

**A.** Is the SADDs located on the Edwards Aquifer Recharge Zone as mapped by the TCEQ?

Yes ☐ No ☐

**B.** Is the SADDs located on the Edwards Aquifer Transition Zone as mapped by the TCEQ?

Yes ☐ No ☐

**If yes to either question**, then the SADDs may be prohibited by *30 TAC §213.8*. Please call the Municipal Permits Team at 512-239-4671 to schedule a pre-application meeting.

## DOMESTIC WORKSHEET 4.0

### POLLUTANT ANALYSES REQUIREMENTS\*

The following is required for facilities with a permitted or proposed flow of 1.0 MGD or greater, facilities with an approved pretreatment program, or facilities classified as a major facility. See instructions for further details.

This worksheet is not required for minor amendments without renewal

#### Section 1. Toxic Pollutants (Instructions Page 87)

For pollutants identified in Table 4.0(1), indicate the type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: [Click here to enter text.](#)

**Table 4.0(1) – Toxics Analysis**

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acrylonitrile				50
Aldrin				0.01
Aluminum				2.5
Anthracene				10
Antimony				5
Arsenic				0.5
Barium				3
Benzene				10
Benzidine				50
Benzo(a)anthracene				5

<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
Benzo(a)pyrene				5
Bis(2-chloroethyl)ether				10
Bis(2-ethylhexyl)phthalate				10
Bromodichloromethane				10
Bromoform				10
Cadmium				1
Carbon Tetrachloride				2
Carbaryl				5
Chlordane*				0.2
Chlorobenzene				10
Chlorodibromomethane				10
Chloroform				10
Chlorpyrifos				0.05
Chromium (Total)				3
Chromium (Tri) (*1)				N/A
Chromium (Hex)				3
Copper				2
Chrysene				5
p-Chloro-m-Cresol				10
4,6-Dinitro-o-Cresol				50
p-Cresol				10

<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
Cyanide (*2)				10
4,4'- DDD				0.1
4,4'- DDE				0.1
4,4'- DDT				0.02
2,4-D				0.7
Demeton (O and S)				0.20
Diazinon				0.5/0.1
1,2-Dibromoethane				10
m-Dichlorobenzene				10
o-Dichlorobenzene				10
p-Dichlorobenzene				10
3,3'-Dichlorobenzidine				5
1,2-Dichloroethane				10
1,1-Dichloroethylene				10
Dichloromethane				20
1,2-Dichloropropane				10
1,3-Dichloropropene				10
Dicofol				1
Dieldrin				0.02
2,4-Dimethylphenol				10
Di-n-Butyl Phthalate				10

<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
Diuron				0.09
Endosulfan I (alpha)				0.01
Endosulfan II (beta)				0.02
Endosulfan Sulfate				0.1
Endrin				0.02
Ethylbenzene				10
Fluoride				500
Guthion				0.1
Heptachlor				0.01
Heptachlor Epoxide				0.01
Hexachlorobenzene				5
Hexachlorobutadiene				10
Hexachlorocyclohexane (alpha)				0.05
Hexachlorocyclohexane (beta)				0.05
gamma-Hexachlorocyclohexane (Lindane)				0.05
Hexachlorocyclopentadiene				10
Hexachloroethane				20
Hexachlorophene				10
Lead				0.5
Malathion				0.1

<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
Mercury				0.005
Methoxychlor				2
Methyl Ethyl Ketone				50
Mirex				0.02
Nickel				2
Nitrate-Nitrogen				100
Nitrobenzene				10
N-Nitrosodiethylamine				20
N-Nitroso-di-n-Butylamine				20
Nonylphenol				333
Parathion (ethyl)				0.1
Pentachlorobenzene				20
Pentachlorophenol				5
Phenanthrene				10
Polychlorinated Biphenyls (PCB's) (*3)				0.2
Pyridine				20
Selenium				5
Silver				0.5
1,2,4,5-Tetrachlorobenzene				20
1,1,2,2-Tetrachloroethane				10



<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
Tetrachloroethylene				10
Thallium				0.5
Toluene				10
Toxaphene				0.3
2,4,5-TP (Silvex)				0.3
Tributyltin (see instructions for explanation)				0.01
1,1,1-Trichloroethane				10
1,1,2-Trichloroethane				10
Trichloroethylene				10
2,4,5-Trichlorophenol				50
TTHM (Total Trihalomethanes)				10
Vinyl Chloride				10
Zinc				5

(\*1) Determined by subtracting hexavalent Cr from total Cr.

(\*2) Cyanide, amenable to chlorination or weak-acid dissociable.

(\*3) The sum of seven PCB congeners 1242, 1254, 1221, 1232, 1248, 1260, and 1016.

## Section 2. Priority Pollutants

For pollutants identified in Tables 4.0(2)A-E, indicate type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: [Click here to enter text.](#)

**Table 4.0(2)A – Metals, Cyanide, Phenols**

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Antimony				5
Arsenic				0.5
Beryllium				0.5
Cadmium				1
Chromium (Total)				3
Chromium (Hex)				3
Chromium (Tri) (*1)				N/A
Copper				2
Lead				0.5
Mercury				0.005
Nickel				2
Selenium				5
Silver				0.5
Thallium				0.5
Zinc				5
Cyanide (*2)				10
Phenols, Total				10

(\*1) Determined by subtracting hexavalent Cr from total Cr.

(\*2) Cyanide, amenable to chlorination or weak-acid dissociable

**Table 4.0(2)B – Volatile Compounds**

<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
Acrolein				50
Acrylonitrile				50
Benzene				10
Bromoform				10
Carbon Tetrachloride				2
Chlorobenzene				10
Chlorodibromomethane				10
Chloroethane				50
2-Chloroethylvinyl Ether				10
Chloroform				10
Dichlorobromomethane [Bromodichloromethane]				10
1,1-Dichloroethane				10
1,2-Dichloroethane				10
1,1-Dichloroethylene				10
1,2-Dichloropropane				10
1,3-Dichloropropylene [1,3-Dichloropropene]				10
1,2-Trans-Dichloroethylene				10
Ethylbenzene				10
Methyl Bromide				50
Methyl Chloride				50
Methylene Chloride				20
1,1,2,2-Tetrachloroethane				10
Tetrachloroethylene				10

<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
Toluene				10
1,1,1-Trichloroethane				10
1,1,2-Trichloroethane				10
Trichloroethylene				10
Vinyl Chloride				10

***Table 4.0(2)C - Acid Compounds***

<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
2-Chlorophenol				10
2,4-Dichlorophenol				10
2,4-Dimethylphenol				10
4,6-Dinitro-o-Cresol				50
2,4-Dinitrophenol				50
2-Nitrophenol				20
4-Nitrophenol				50
P-Chloro-m-Cresol				10
Pentalchlorophenol				5
Phenol				10
2,4,6-Trichlorophenol				10

**Table 4.0(2)D – Base/Neutral Compounds**

<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
Acenaphthene				10
Acenaphthylene				10
Anthracene				10
Benidine				50
Benzo(a)Anthracene				5
Benzo(a)Pyrene				5
3,4-Benzofluoranthene				10
Benzo(ghi)Perylene				20
Benzo(k)Fluoranthene				5
Bis(2-Chloroethoxy)Methane				10
Bis(2-Chloroethyl)Ether				10
Bis(2-Chloroisopropyl)Ether				10
Bis(2-Ethylhexyl)Phthalate				10
4-Bromophenyl Phenyl Ether				10
Butyl benzyl Phthalate				10
2-Chloronaphthalene				10
4-Chlorophenyl phenyl ether				10
Chrysene				5
Dibenzo(a,h)Anthracene				5
1,2-(o)Dichlorobenzene				10
1,3-(m)Dichlorobenzene				10
1,4-(p)Dichlorobenzene				10
3,3-Dichlorobenzidine				5
Diethyl Phthalate				10
Dimethyl Phthalate				10

<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
Di-n-Butyl Phthalate				10
2,4-Dinitrotoluene				10
2,6-Dinitrotoluene				10
Di-n-Octyl Phthalate				10
1,2-Diphenylhydrazine (as Azo- benzene)				20
Fluoranthene				10
Fluorene				10
Hexachlorobenzene				5
Hexachlorobutadiene				10
Hexachlorocyclo-pentadiene				10
Hexachloroethane				20
Indeno(1,2,3-cd)pyrene				5
Isophorone				10
Naphthalene				10
Nitrobenzene				10
N-Nitrosodimethylamine				50
N-Nitrosodi-n-Propylamine				20
N-Nitrosodiphenylamine				20
Phenanthrene				10
Pyrene				10
1,2,4-Trichlorobenzene				10

**Table 4.0(2)E - Pesticides**

<b>Pollutant</b>	<b>AVG Effluent Conc. (µg/l)</b>	<b>MAX Effluent Conc. (µg/l)</b>	<b>Number of Samples</b>	<b>MAL (µg/l)</b>
Aldrin				0.01
alpha-BHC (Hexachlorocyclohexane)				0.05
beta-BHC (Hexachlorocyclohexane)				0.05
gamma-BHC (Hexachlorocyclohexane)				0.05
delta-BHC (Hexachlorocyclohexane)				0.05
Chlordane				0.2
4,4-DDT				0.02
4,4-DDE				0.1
4,4,-DDD				0.1
Dieldrin				0.02
Endosulfan I (alpha)				0.01
Endosulfan II (beta)				0.02
Endosulfan Sulfate				0.1
Endrin				0.02
Endrin Aldehyde				0.1
Heptachlor				0.01
Heptachlor Epoxide				0.01
PCB-1242				0.2
PCB-1254				0.2
PCB-1221				0.2
PCB-1232				0.2

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
PCB-1248				0.2
PCB-1260				0.2
PCB-1016				0.2
Toxaphene				0.3

\* For PCBS, if all are non-detects, enter the highest non-detect preceded by a "<".

### Section 3. Dioxin/Furan Compounds

A. Indicate which of the following compounds from may be present in the influent from a contributing industrial user or significant industrial user. Check all that apply.

- ☐ 2,4,5-trichlorophenoxy acetic acid  
Common Name 2,4,5-T, CASRN 93-76-5
- ☐ 2-(2,4,5-trichlorophenoxy) propanoic acid  
Common Name Silvex or 2,4,5-TP, CASRN 93-72-1
- ☐ 2-(2,4,5-trichlorophenoxy) ethyl 2,2-dichloropropionate  
Common Name Erbon, CASRN 136-25-4
- ☐ 0,0-dimethyl 0-(2,4,5-trichlorophenyl) phosphorothioate  
Common Name Ronnel, CASRN 299-84-3
- ☐ 2,4,5-trichlorophenol  
Common Name TCP, CASRN 95-95-4
- ☐ hexachlorophene  
Common Name HCP, CASRN 70-30-4

For each compound identified, provide a brief description of the conditions of its/their presence at the facility.

[Click here to enter text.](#)



B. Do you 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 your effluent?

Yes ☐ No ☐

If **yes**, provide a brief description of the conditions for its presence.

[Click here to enter text.](#)

If any of the compounds in Subsection A **or** B are present, complete Table 4.0(2)F.

For pollutants identified in Table 4.0(2)F, indicate the type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: [Click here to enter text.](#)

**TABLE 4.0(2)F - DIOXIN/FURAN COMPOUNDS**

Compound	Toxic Equivalency Factors	Wastewater Concentration (ppq)	Wastewater Equivalents (ppq)	Sludge Concentration (ppt)	Sludge Equivalents (ppt)	MAL (ppq)
2,3,7,8 TCDD	1					10
1,2,3,7,8	0.5					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	0.05					50
2,3,4,7,8 PeCDF	0.5					50
2,3,7,8 HxCDFs	0.1					50
2,3,4,7,8	0.01					50
OCDD	0.0003					100
OCDF	0.0003					100
PCB 77	0.0001					0.5
PCB 81	0.0003					0.5

<b>Compound</b>	<b>Toxic Equivalency Factors</b>	<b>Wastewater Concentration (ppq)</b>	<b>Wastewater Equivalents (ppq)</b>	<b>Sludge Concentration (ppt)</b>	<b>Sludge Equivalents (ppt)</b>	<b>MAL (ppq)</b>
PCB 126	0.1					0.5
PCB 169	0.03					0.5
Total						

# DOMESTIC WORKSHEET 5.0

## TOXICITY TESTING REQUIREMENTS

**The following is required for facilities with a currently-operating design flow greater than or equal to 1.0 MGD, with an EPA-approved pretreatment program (or those that are required to have one under 40 CFR Part 403), or are required by the TCEQ to perform Whole Effluent Toxicity testing. This worksheet is not required for minor amendments without renewal.**

### Section 1. Required Tests (Instructions Page 97)

Indicate the number of 7-day chronic or 48-hour acute Whole Effluent Toxicity (WET) tests performed in the four and one-half years prior to submission of the application.

7-day Chronic: [Click here to enter text.](#)

48-hour Acute: [Click here to enter text.](#)

### Section 2. Toxicity Reduction Evaluations (TREs)

Has this facility completed a TRE in the past four and a half years? Or is the facility currently performing a TRE?

Yes ☐

No ☐

**If yes, describe the progress to date, if applicable, in identifying and confirming the toxicant.**

[Click here to enter text.](#)

### Section 3. Summary of WET Tests

If the required biomonitoring test information has not been previously submitted via both the Discharge Monitoring Reports (DMRs) and the Table 1 (as found in the permit), provide a summary of the testing results for all valid and invalid tests performed over the past four and one-half years. Make additional copies of this table as needed.

*Table 5.0(1) – Summary of WET Tests*

Test Date	Test Species	NOEC Survival	NOEC Sub-lethal

## DOMESTIC WORKSHEET 6.0

### INDUSTRIAL WASTE CONTRIBUTION

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

#### Section 1. All POTWs (Instructions Page 99)

##### A. Industrial users

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

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

Categorical IUs:

Number of IUs: 0

Average Daily Flows, in MGD: [Click here to enter text.](#)

Significant IUs - non-categorical:

Number of IUs: 0

Average Daily Flows, in MGD: [Click here to enter text.](#)

Other IUs:

Number of IUs: 0

Average Daily Flows, in MGD: [Click here to enter text.](#)

##### B. Treatment plant interference

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

Yes ☐ No ☒

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

[Click here to enter text.](#)

### C. Treatment plant pass through

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

Yes ☐ No ☒

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

[Click here to enter text.](#)

### D. Pretreatment program

Does your POTW have an approved pretreatment program?

Yes ☐ No ☒

If **yes**, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

Yes ☐ No ☒

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

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

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

### A. Substantial modifications

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

Yes ☐ No ☐

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

Click here to enter text.

### B. Non-substantial modifications

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

Yes ☐

No ☐

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

Click here to enter text.

### C. Effluent parameters above the MAL

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

**Table 6.0(1) - Parameters Above the MAL**

Pollutant	Concentration	MAL	Units	Date

#### **D. Industrial user interruptions**

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

Yes ☐ No ☐

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

[Click here to enter text.](#)

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

#### **A. General information**

Company Name: None

SIC Code: [Click here to enter text.](#)

Telephone number: [Click here to enter text.](#) Fax number: [Click here to enter text.](#)

Contact name: [Click here to enter text.](#)

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

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

#### **B. Process information**

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

[Click here to enter text.](#)

#### **C. Product and service information**

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



Click here to enter text.

#### D. Flow rate information

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

Process Wastewater:

Discharge, in gallons/day: Click here to enter text.

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: Click here to enter text.

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

#### E. Pretreatment standards

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

Yes ☐ No ☐

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

Yes ☐ No ☐

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

Category: Click here to enter text.

Subcategories: Click here to enter text.

Category: Click here to enter text.

Subcategories: Click here to enter text.

Category: Click here to enter text.

Subcategories: Click here to enter text.

Category: Click here to enter text.

Subcategories: Click here to enter text.

Category: Click here to enter text.

Subcategories: Click here to enter text.

#### **F. Industrial user interruptions**

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

Yes ☐

No ☒

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

[Click here to enter text.](#)

# WORKSHEET 7.0

## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY CLASS V INJECTION WELL INVENTORY/AUTHORIZATION FORM

Submit to:  
TCEQ  
IUC Permits Team  
Radioactive Materials Division  
MC-233  
PO Box 13087  
Austin, Texas 78711-3087  
512-239-6466

For TCEQ Use Only

Reg. No. \_\_\_\_\_

Date Received \_\_\_\_\_

Date Authorized \_\_\_\_\_

### Section 1. General Information (Instructions Page 102)

#### 1. TCEQ Program Area

Program Area (PST, VCP, IHW, etc.): [Click here to enter text.](#)

Program ID: [Click here to enter text.](#)

Contact Name: [Click here to enter text.](#)

Phone Number: [Click here to enter text.](#)

#### 2. Agent/Consultant Contact Information

Contact Name: [Click here to enter text.](#)

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

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

Phone Number: [Click here to enter text.](#)

#### 3. Owner/Operator Contact Information

Owner ☐

Operator ☐

Owner/Operator Name: [Click here to enter text.](#)

Contact Name: [Click here to enter text.](#)

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

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

Phone Number: [Click here to enter text.](#)

#### 4. Facility Contact Information

Facility Name: [Click here to enter text.](#)

Address: Click here to enter text.

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

Location description (if no address is available): Click here to enter text.

Facility Contact Person: Click here to enter text.

Phone Number: Click here to enter text.

**5. Latitude and Longitude, in degrees-minutes-seconds**

Latitude: Click here to enter text. Longitude: Click here to enter text.

Method of determination (GPS, TOPO, etc.): Click here to enter text.

Attach topographic quadrangle map as attachment A.

**6. Well Information**

Type of Well Construction, select one:

- ☐ Vertical Injection
- ☐ Subsurface Fluid Distribution System
- ☐ Infiltration Gallery
- ☐ Temporary Injection Points
- ☐ Other, Specify: Click here to enter text.

Number of Injection Wells: Click here to enter text.

**7. Purpose**

Detailed Description regarding purpose of Injection System:

Click here to enter text.

Attach a Site Map as Attachment B (Attach the Approved Remediation Plan, if appropriate.)

**8. Water Well Driller/Installer**

Water Well Driller/Installer Name: Click here to enter text.

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

Phone Number: Click here to enter text.

License Number: [Click here to enter text.](#)

## Section 2. Proposed Down Hole Design

Attach a diagram signed and sealed by a licensed engineer as Attachment C.

**Table 7.0(1) -Down Hole Design Table**

Name of String	Size	Setting Depth	Sacks Cement/Grout - Slurry Volume - Top of Cement	Hole Size	Weight (lbs/ft) PVC/Steel
Casing					
Tubing					
Screen					

## Section 3. Proposed Trench System, Subsurface Fluid Distribution System, or Infiltration Gallery

Attach a diagram signed and sealed by a licensed engineer as Attachment D.

System(s) Dimensions: [Click here to enter text.](#)

System(s) Construction: [Click here to enter text.](#)

## Section 4. Site Hydrogeological and Injection Zone Data

1. Name of Contaminated Aquifer: [Click here to enter text.](#)
2. Receiving Formation Name of Injection Zone: [Click here to enter text.](#)
3. Well/Trench Total Depth: [Click here to enter text.](#)
4. Surface Elevation: [Click here to enter text.](#)
5. Depth to Ground Water: [Click here to enter text.](#)
6. Injection Zone Depth: [Click here to enter text.](#)
7. Injection Zone vertically isolated geologically? Yes ☐ No ☐

Impervious Strata between Injection Zone and nearest Underground

Source of Drinking Water:

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

Thickness: [Click here to enter text.](#)

8. Provide a list of contaminants and the levels (ppm) in contaminated aquifer  
Attach as Attachment E.
9. Horizontal and Vertical extent of contamination and injection plume  
Attach as Attachment F.
10. Formation (Injection Zone) Water Chemistry (Background levels) TDS, etc.  
Attach as Attachment G.
11. Injection Fluid Chemistry in PPM at point of injection  
Attach as Attachment H.
12. Lowest Known Depth of Ground Water with < 10,000 PPM TDS: [Click here to enter text.](#)
13. Maximum injection Rate/Volume/Pressure: [Click here to enter text.](#)
14. Water wells within 1/4 mile radius (attach map as Attachment I): [Click here to enter text.](#)
15. Injection wells within 1/4 mile radius (attach map as Attachment J): [Click here to enter text.](#)
16. Monitor wells within 1/4 mile radius (attach drillers logs and map as Attachment K): [Click here to enter text.](#)
17. Sampling frequency: [Click here to enter text.](#)
18. Known hazardous components in injection fluid: [Click here to enter text.](#)

## Section 5. Site History

1. Type of Facility: [Click here to enter text.](#)
2. Contamination Dates: [Click here to enter text.](#)
3. Original Contamination (VOCs, TPH, BTEX, etc.) and Concentrations (attach as Attachment L): [Click here to enter text.](#)
4. Previous Remediation: [Click here to enter text.](#)

Attach results of any previous remediation as attachment M

**NOTE: Authorization Form should be completed in detail and authorization given by the TCEQ before construction, operation, and/or conversion can**

**begin. Attach additional pages as necessary.**

***Class V Injection Well Designations***

5A07	Heat Pump/AC return (IW used for groundwater to heat and/or cool buildings)
5A19	Industrial Cooling Water Return Flow (IW used to cool industrial process equipment)
5B22	Salt Water Intrusion Barrier (IW used to inject fluids to prevent the intrusion of salt water into an aquifer)
5D02	Storm Water Drainage (IW designed for the disposal of rain water)
5D04	Industrial Stormwater Drainage Wells (IW designed for the disposal of rain water associated with industrial facilities)
5F01	Agricultural Drainage (IW that receive agricultural runoff)
5R21	Aquifer Recharge (IW used to inject fluids to recharge an aquifer)
5S23	Subsidence Control Wells (IW used to control land subsidence caused by ground water withdrawal)
5W09	Untreated Sewage
5W10	Large Capacity Cesspools (Cesspools that are designed for 5,000 gpd or greater)
5W11	Large Capacity Septic systems (Septic systems designed for 5,000 gpd or greater)
5W12	WTTP disposal
5W20	Industrial Process Waste Disposal Wells
5W31	Septic System (Well Disposal method)
5W32	Septic System Drainfield Disposal
5X13	Mine Backfill (IW used to control subsidence, dispose of mining byproducts, and/or fill sections of a mine)
5X25	Experimental Wells (Pilot Test) (IW used to test new technologies or tracer dye studies)
5X26	Aquifer Remediation (IW used to clean up, treat, or prevent contamination of a USDW)
5X27	Other Wells
5X28	Motor Vehicle Waste Disposal Wells (IW used to dispose of waste from a motor vehicle site - These are currently banned)
5X29	Abandoned Drinking Water Wells (waste disposal)

City of Baird WTP  
Discharge Application  
Callahan County, Texas

ATTACHMENT #1

TCEQ Core Data Form & Application Fee Check

Prepared By:



Firm #2448  
Project #: 17390



325.695.1070  
817.594.9880



info@jacobmartin.com  
www.jacobmartin.com



3465 Curry Lane  
Abilene, TX 76906

1508 Santa Fe, Suite 203  
Weatherford, TX 76086





# 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)	<a href="#">Follow this link to search for CN or RN numbers in Central Registry**</a>	<b>3. Regulated Entity Reference Number</b> (if issued)
CN 600634182		RN 103015426

## 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 type="checkbox"/> Update to Customer Information <input 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)				
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>				
<b>6. Customer Legal Name</b> (If an individual, print last name first: eg: Doe, John)			<i>If new Customer, enter previous Customer below:</i>	
City of Baird				
<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)	
<b>11. Type of Customer:</b>		Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited		
<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual		
Government: <input checked="" 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 checked="" type="checkbox"/> 0-20 <input 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>	328 MARKET ST			
	City	BAIRD	State	TX
		ZIP	79504	ZIP + 4
				6410
<b>16. Country Mailing Information</b> (if outside USA)		<b>17. E-Mail Address</b> (if applicable)		
		lori.cityofbaird@windstream.net		
<b>18. Telephone Number</b>		<b>19. Extension or Code</b>		<b>20. Fax Number</b> (if applicable)

## SECTION III: Regulated Entity Information

**21. General Regulated Entity Information** (If "New Regulated Entity" is selected, a new permit application is also required.)

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

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

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

Baird WTP

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

240 Walnut St

(No PO Boxes)

City

Baird

State

TX

ZIP

79504

ZIP + 4

**24. County**

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

**25. Description to**

**Physical Location:**

LOCATED AT THE SE CORNER OF 3RD ST & WALNUT ST

**26. Nearest City**

**State**

**Nearest ZIP Code**

Baird

TX

79504

*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:**

32.39276

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

-99.39235

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)

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

Water Treatment Plant

**34. Mailing**

328 MARKET ST

**Address:**

City

BAIRD

State

TX

ZIP

79504

ZIP + 4

6410

**35. E-Mail Address:**

lori.cityofbaird@windstream.net

**36. Telephone Number**

**37. Extension or Code**

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

( ) -

( ) -

**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:

## SECTION IV: Preparer Information

<b>40. Name:</b>	Sarah Fernandez			<b>41. Title:</b>	Environmental Coordinator
<b>42. Telephone Number</b>	<b>43. Ext./Code</b>	<b>44. Fax Number</b>	<b>45. E-Mail Address</b>		
( 325 ) 695-1070		( ) -	sfernandez@jacobmartin.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.

<b>Company:</b>	City of Baird	<b>Job Title:</b>	Mayor
<b>Name (In Print):</b>	Jim Dobbs	<b>Phone:</b>	( ) -
<b>Signature:</b>			<b>Date:</b> 2/20/24

City of Baird WTP  
Discharge Application  
Callahan County, Texas

ATTACHMENT #2

USGS Topographic Map/ SPIFF  
With location of wells, and boundaries of  
application area

Prepared By:



Firm #2448  
Project #: 17390



325.695.1070  
817.594.9880



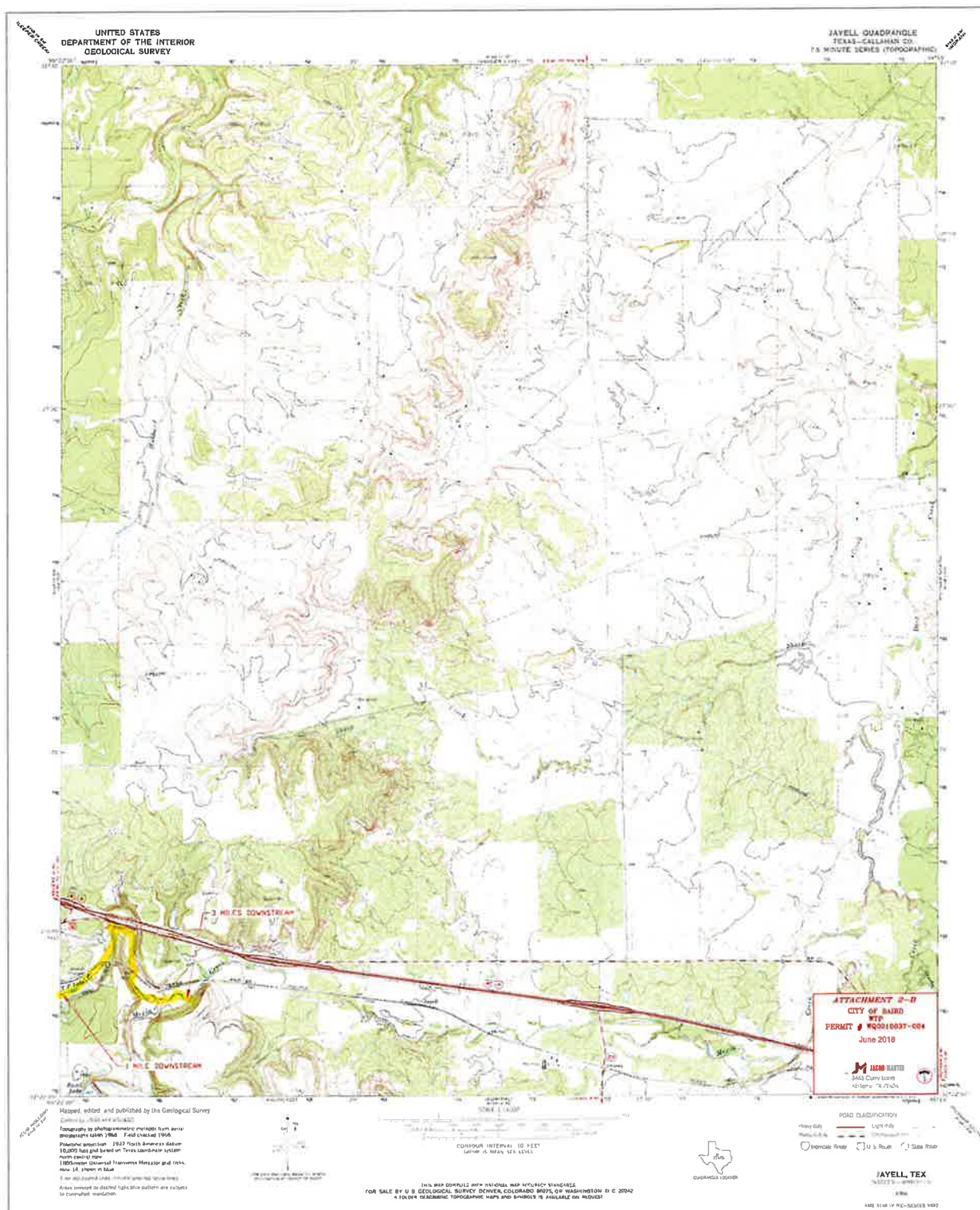
info@jacobmartin.com  
www.jacobmartin.com



3465 Curry Lane  
Abilene, TX 76906

1508 Santa Fe, Suite 203  
Weatherford, TX 76086

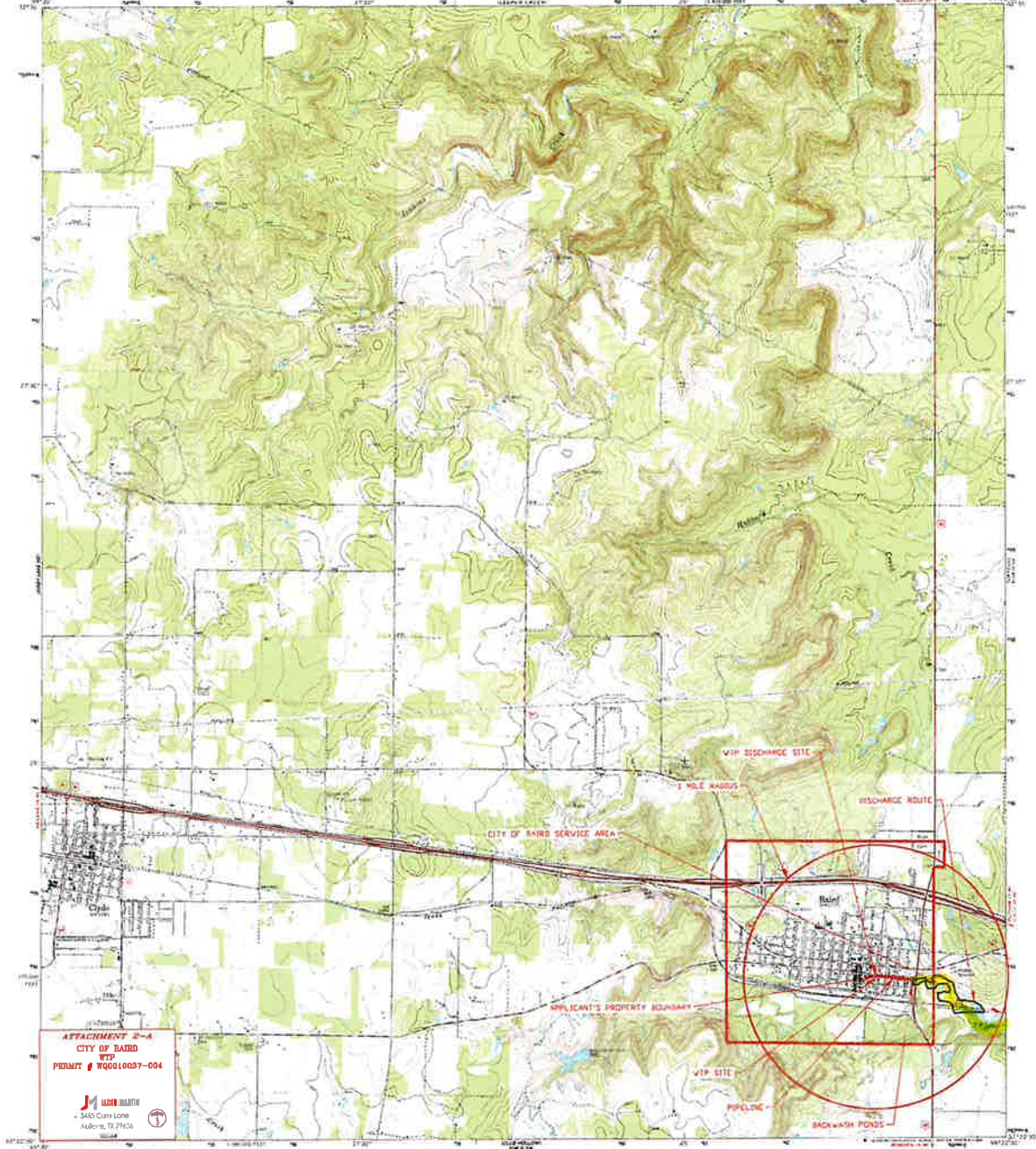
JAVELL QUADRANGLE  
TEXAS-CALLAHAN CO.  
15 MINUTE SERIES (TOPOGRAPHIC)





UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

BAIRD QUADRANGLE  
TEXAS-CALAMANK CO.  
7.5 MINUTE SERIES (TOPOGRAPHIC)



ATTACHMENT 2-A  
CITY OF BAIRD  
WTP  
PERMIT # WQ0010037-004

**M. HARRIS**  
SAS, Civil Line  
Austin, TX 78704

Map not revised, and published by the Geological Survey  
Consent by USGS and HCA/CE

Topographic by photogrammetric methods from aerial  
photographs taken 1955. First Edition 1956.  
Permanent projection 1987 North American Datum  
(NAD83) and based on Texas coordinate system,  
north central zone.  
1000-foot Universal Transverse Mercator grid (UTM),  
zone 14, datum NAD83.

1 inch = 1 mile  
To place on the principal North American Datum 1983  
map the projection must 10 meters down and  
12 meters east as shown by dashed corner ticks.

SCALE 1:24,000  
CARTOGRAPHIC INTERVAL 10 FEET  
NATIONAL GEODETIC VERTICAL DATUM OF 1929

THIS MAP COMPLETES WITH NATIONAL MAP ACQUANT STOWAGE  
FOR SALE BY U.S. GEOLOGICAL SURVEY, DEPT. OF THE INTERIOR, WASHINGTON, D.C. 20508  
A COLOR RESOURCES TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE ON REQUEST

ROAD CLASSIFICATION  
Mainline Light  
Medium-duty Unimproved dirt  
Interstate Route U.S. Route State Route



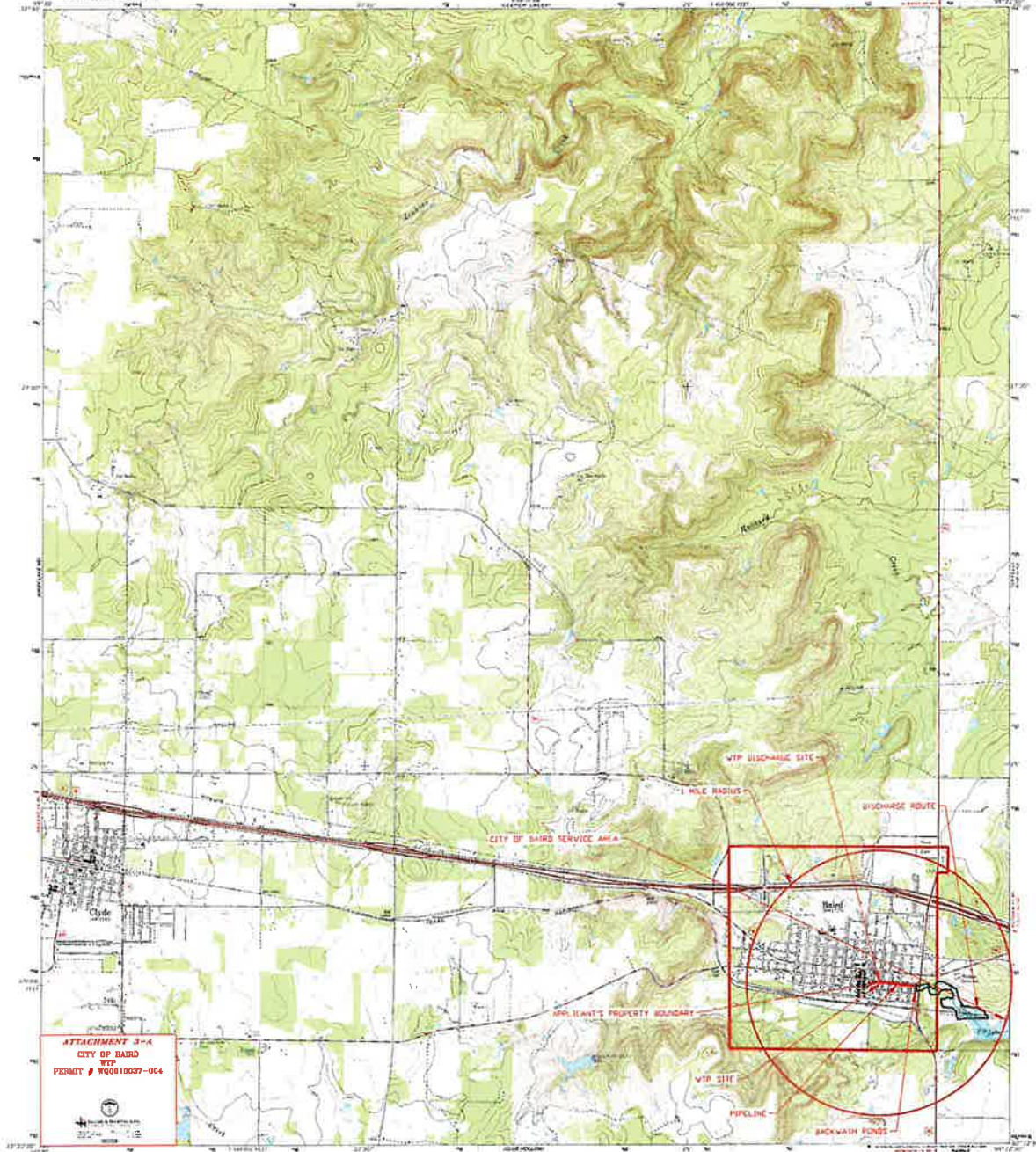
3299-133

BAIRD, TEX.  
3299-04-17-024  
1964  
Scale 1:24,000 to 1:25,000 1963



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

BAIRD QUADRANGLE  
TEXAS - CALLAHAN CO  
15 MINUTE SERIES (TOPOGRAPHIC)



ATTACHMENT 3-A  
CITY OF BAIRD  
VTP  
PERMIT # WQ0010037-004

Maped, edited, and published by the Geological Survey  
Control by USGS and USGACS  
Topography by photogrammetric methods from aerial  
photographs taken 1965. Field checked 1966.  
Present position 1927 North American Datum  
(1922) and grid based on Texas coordinate system,  
north central zone.  
(1922) and grid based on Texas coordinate system,  
north central zone.  
Scale 1:50,000 in blue.  
For map details see separate sheet (see text)  
To place on the proposed North American Datum (1983)  
note the projection lines 10 meters apart and  
25 meters apart as shown by dotted corner lines.

CONTOUR INTERVAL 10 FEET  
NATIONAL GEODETIC DATUM OF 1983  
FOR SALE BY U.S. GEOLOGICAL SURVEY, DOWNEY, CALIFORNIA 94028, OR RESTON, VIRGINIA 22092  
A 15-MINUTE QUADRANGLE TOPOGRAPHIC MAP AND SYMBOLS IS AVAILABLE ON REQUEST



BAIRD, TEX.  
32099-04-19-004  
1986

DATA 8148 BY WY-800000 1982





City of Baird WTP  
Discharge Application  
Callahan County, Texas

ATTACHMENT #3

Flow Diagram

Prepared By:



Firm #2448  
Project #: 17390



325.695.1070  
817.594.9880

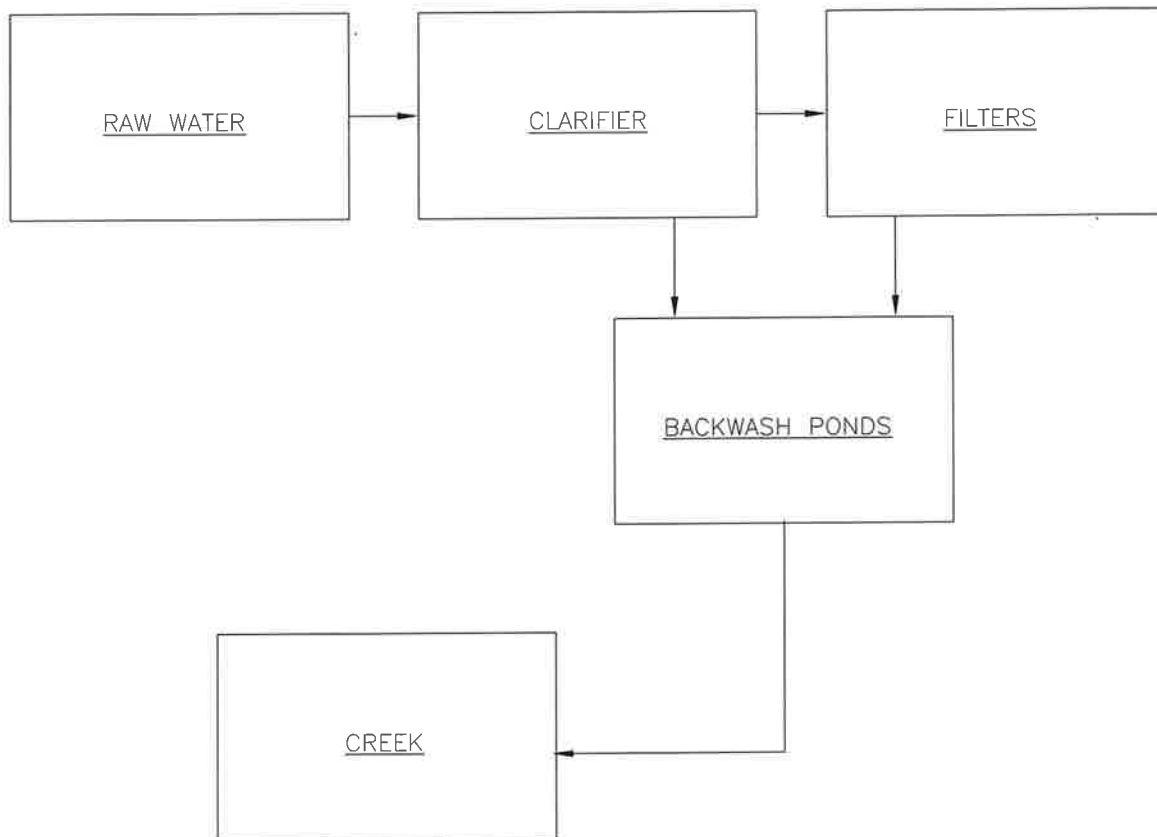


info@jacobmartin.com  
www.jacobmartin.com



3465 Curry Lane  
Abilene, TX 76906

1508 Santa Fe, Suite 203  
Weatherford, TX 76086



CITY OF BAIRD  
WTP  
PERMIT # WQ0010037-004  
RENEWAL  
ATTACHMENT # 4  
FLOW DIAGRAM

JACOB & MARTIN, LTD.  
*Consulting Engineers*  
ABILENE, TEXAS

City of Baird WTP  
Discharge Application  
Callahan County, Texas

ATTACHMENT #4  
  
Site Drawings

Prepared By:



Firm #2448  
Project #: 17390



325.695.1070  
817.594.9880



info@jacobmartin.com  
www.jacobmartin.com



3465 Curry Lane  
Abilene, TX 76906

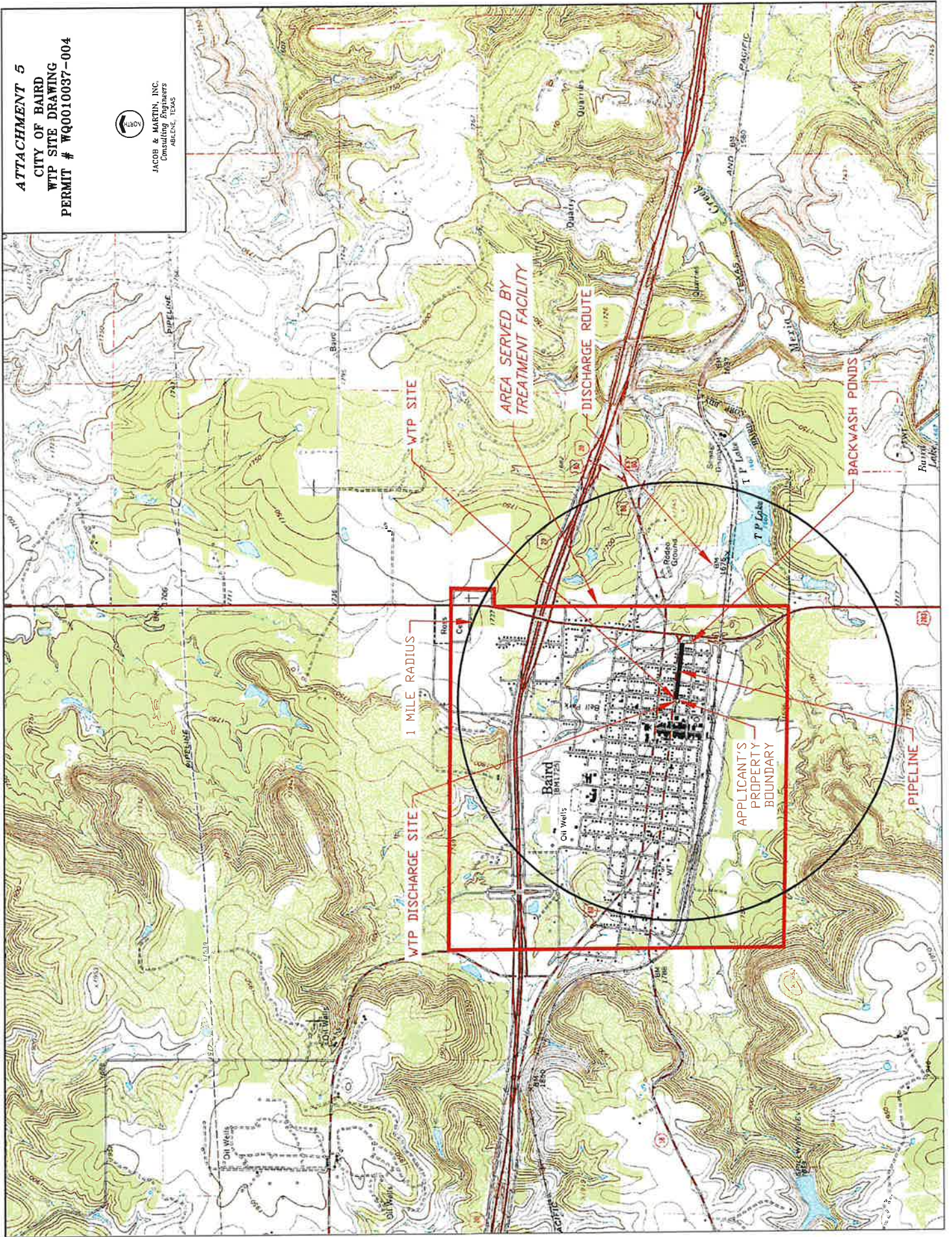
1508 Santa Fe, Suite 203  
Weatherford, TX 76086



ATTACHMENT 5  
CITY OF BAIRD  
WTP SITE DRAWING  
PERMIT # WQ0010037-004



JACOB & MARTIN, INC.  
Consulting Engineers  
ABILENE, TEXAS





City of Baird WTP  
Discharge Application  
Callahan County, Texas

ATTACHMENT #5

Pollutant Analysis

Prepared By:



Firm #2448  
Project #: 17390



325.695.1070  
817.594.9880



info@jacobmartin.com  
www.jacobmartin.com



3465 Curry Lane  
Abilene, TX 76906

1508 Santa Fe, Suite 203  
Weatherford, TX 76086

## SAMPLE CROSS REFERENCE

Project  
**1089229**

Printed 2/2/2024 Page 1 of 1  
010

City of Baird  
Lori Higgins  
328 Market  
Baird, TX 79504-

Sample	Sample ID	Taken	Time	Received
2267199	WTP	01/25/2024	09:45:00	01/26/2024

Bottle 01 Polyethylene 1/2 gal (White)

Bottle 02 Polyethylene 1/2 gal (White)

Bottle 03 16 oz HNO3 Metals Plastic

Bottle 04 Prepared Bottle: ICP Preparation for Metals (Batch 1101340) Volume: 50.00000 mL <== Derived from 03 ( 50 ml )

Method	Bottle	PrepSet	Preparation	QcGroup	Analytical
EPA 300.0 2.1	01	1101177	01/26/2024	1101177	01/26/2024
EPA 200.8 5.4	04	1101340	01/29/2024	1101436	01/29/2024
SM 2320 B-2011	02	1101783	01/31/2024	1101783	01/31/2024
SM 2540 C-2015	02	1101553	01/29/2024	1101553	01/29/2024
SM 2540 D-2015	01	1101965	01/31/2024	1101965	01/31/2024
SM 4500-H+ B-2011		1100945	01/25/2024	1100945	01/25/2024

Email: Kilgore.projectmanager@spl-inc.com



Report Page 1 of 11



## BAIR-W

City of Baird  
 Lori Higgins  
 328 Market  
 Baird, TX 79504-

Page 1 of 3

Project  
**1089229**

Printed: 02/02/2024

## RESULTS

### Sample Results

<b>2267199 WTP</b>		Received: 01/26/2024	
Drinking Water	Collected by: Client	City of Baird	PO:
	Taken: 01/25/2024	09:45:00	
<b>EPA 200.8 5.4</b>		Prepared: 1101340 01/29/2024 10:00:00	Analyzed 1101436 01/29/2024 16:01:00 JCB
NELAC	Parameter	Results	Units RL Flags CAS Bottle
	<b>Aluminum, Total</b>	<b>0.0122</b>	<b>mg/L 0.00171 7429-90-5 04</b>
<b>EPA 300.0 2.1</b>		Prepared: 1101177 01/26/2024 18:05:00	Analyzed 1101177 01/26/2024 18:05:00 KLB
NELAC	Parameter	Results	Units RL Flags CAS Bottle
	<b>Fluoride</b>	<b>&lt;1.00</b>	<b>mg/L 1.00 01</b>
<b>SM 2320 B-2011</b>		Prepared: 1101783 01/31/2024 09:13:00	Analyzed 1101783 01/31/2024 09:13:00 KNI
	Parameter	Results	Units RL Flags CAS Bottle
	<b>Total Alkalinity (as CaCO3)</b>	<b>101</b>	<b>mg/L 1.00 02</b>
<b>SM 2540 C-2015</b>		Prepared: 1101553 01/29/2024 08:00:00	Analyzed 1101553 01/29/2024 08:00:00 JMB
NELAC	Parameter	Results	Units RL Flags CAS Bottle
	<b>Total Dissolved Solids</b>	<b>608</b>	<b>mg/L 20.0 02</b>
<b>SM 2540 D-2015</b>		Prepared: 1101965 01/31/2024 08:20:00	Analyzed 1101965 01/31/2024 08:20:00 JKI
NELAC	Parameter	Results	Units RL Flags CAS Bottle
	<b>Total Suspended Solids</b>	<b>&lt;2.00</b>	<b>mg/L 2.00 01</b>
<b>SM 4500-H+ B-2011</b>		Prepared: 1100945 01/25/2024 09:50:00	Analyzed 1100945 01/25/2024 09:50:00 CLI
	Parameter	Results	Units RL Flags CAS Bottle
	<b>pH Client Provided</b>	<b>8.1</b>	<b>SU 0</b>

### Sample Preparation



Report Page 2 of 11



## BAIR-W

Page 2 of 3

City of Baird  
 Lori Higgins  
 328 Market  
 Baird, TX 79504-

Project  
**1089229**

Printed: 02/02/2024

**2267199 WTP**

Received: 01/26/2024

01/25/2024

	Prepared:	01/29/2024	15:32:29	Calculated	01/29/2024	15:32:29	CAL
<b>Environmental Fee (per Project)</b>	<b>Verified</b>						
<i>EPA 200.2 2.8</i>	Prepared:	1101340	01/29/2024	10:00:00	Analyzed	1101340	01/29/2024 10:00:00 HLT
<b>Liquid Metals Digestion</b>	<b>50/50 ml 03</b>						
<i>SM 2540 C-2011</i>	Prepared:	1101235	01/29/2024	08:00:00	Analyzed	1101235	01/29/2024 08:00:00 JMB
<b>Total Dissolved Solids Started</b>	<b>Started</b>						
<i>SM 2540 D-2011</i>	Prepared:	1100859	01/31/2024	08:20:00	Analyzed	1100859	01/31/2024 08:20:00 JKL
<b>TSS Set Started</b>	<b>Started</b>						

**2267200 Pickup/Transport**

Received: 01/26/2024

01/25/2024

	Prepared:	01/29/2024	15:32:30	Calculated	01/29/2024	15:32:30	CAL
<b>Sampling/Transport</b>	<b>Verified</b>						



Report Page 3 of 11



2600 Dudley Rd. Kilgore, Texas 75662  
24 Waterway Avenue, Suite 375 The Woodlands, TX 77380  
Office: 903-984-0551 \* Fax: 903-984-5914



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## BAIR-W

City of Baird  
Lori Higgins  
328 Market  
Baird, TX 79504

Page 3 of 3

Project

1089229

Printed: 02/02/2024

### Qualifiers:

We report results on an As Received (or Wet) basis unless marked Dry Weight.

Unless otherwise noted, testing was performed at SPL, Inc., Kilgore laboratory which holds International, Federal, and state accreditations. Please see our Websites for details.

(N)ELAC - Covered in our NELAC scope of accreditation

z -- Not covered by our NELAC scope of accreditation

These analytical results relate to the sample tested. This report may NOT be reproduced EXCEPT in FULL without written approval of SPL Kilgore. Unless otherwise specified, these test results meet the requirements of NELAC.

RL is the Reporting Limit (sample specific quantitation limit) and is at or above the Method Detection Limit (MDL). CAS is Chemical Abstract Service number. RL is our Reporting Limit, or Minimum Quantitation Level. The RL takes into account the Instrument Detection Limit (IDL), Method Detection Limit (MDL), and Practical Quantitation Limit (PQL), and any dilutions and/or concentrations performed during sample preparation (EQL). Our analytical result must be above this RL before we report a value in the 'Results' column of our report (without a 'J' flag). Otherwise, we report ND (Not Detected above RL), because the result is "<" (less than) the number in the RL column. MAL is Minimum Analytical Level and is typically from regulatory agencies. Unless we report a result in the result column, or interferences prevent it, we work to have our RL at or below the MAL.

Bill Peery, MS, VP Technical Services



Report Page 4 of 11

# QUALITY CONTROL



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Page 1 of 3

## BAIR-W

City of Baird  
Lori Higgins  
328 Market  
Baird, TX 79504-

Project

1089229

Printed 02/02/2024

Analytical Set

1101553

SM 2540 C-2015

### Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Total Dissolved Solids	1101553	ND	5.00	5.00	mg/L	125920461

### ControlBlk

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Total Dissolved Solids	1101553	0.0002			grams	125920448

### Duplicate

Parameter	Sample	Result	Unknown	Unit	RPD	Limit%
Total Dissolved Solids	2266895	186	170	mg/L	8.99	20.0

### LCS

Parameter	PrepSet	Reading	Known	Units	Recover%	Limits	File
Total Dissolved Solids	1101553	200	200	mg/L	100	85.0 - 115	125920462

### Standard

Parameter	Sample	Reading	Known	Units	Recover%	Limits%	File
Total Dissolved Solids		98.0	100	mg/L	98.0	90.0 - 110	125920449

Analytical Set

1101965

SM 2540 D-2015

### Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Total Suspended Solids	1101965	ND	2	2	mg/L	125929241

### ControlBlk

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Total Suspended Solids	1101965	-0.0002			grams	125929240

### Duplicate

Parameter	Sample	Result	Unknown	Unit	RPD	Limit%
Total Suspended Solids	2266725	2210	2220	mg/L	0.451	20.0
Total Suspended Solids	2267245	25.3	25.0	mg/L	1.19	20.0
Total Suspended Solids	2268076	47.5	54.5	mg/L	13.7	20.0

### LCS

Parameter	PrepSet	Reading	Known	Units	Recover%	Limits	File
Total Suspended Solids	1101965	47.0	50.0	mg/L	94.0	90.0 - 110	125929274

### Standard

Parameter	Sample	Reading	Known	Units	Recover%	Limits%	File
Total Suspended Solids		96.0	100	mg/L	96.0	90.0 - 110	125929273

Analytical Set

1101177

EPA 300.0 2.1

### AWRL/LOQ C

Parameter	Reading	Known	Units	Recover%	Limits%	File
Fluoride	0.109	0.100	mg/L	109	70.0 - 130	125909806



Report Page 5 of 11

# QUALITY CONTROL



**SPL**  
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1  
2

Page 2 of 3

## BAIR-W

City of Baird  
Lori Higgins  
328 Market  
Baird, TX 79504-

Project  
**1089229**

Printed 02/02/2024

### Blank

Parameter	PrepSet	Reading	MDL	MDL	Units	File
Fluoride	1101177	ND	0.0112	0.100	mg/L	125909807

### CCB

Parameter	PrepSet	Reading	MDL	MDL	Units	File
Fluoride	1101177	0	0.0112	0.100	mg/L	125909803
Fluoride	1101177	0	0.0112	0.100	mg/L	125909823
Fluoride	1101177	0	0.0112	0.100	mg/L	125909827

### CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Fluoride	10.1	10.0	mg/L	101	90.0 - 110	125909802
Fluoride	10.1	10.0	mg/L	101	90.0 - 110	125909822
Fluoride	10.2	10.0	mg/L	102	90.0 - 110	125909826

### LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
Fluoride	1101177	5.56	5.46	5.00	88.0 - 115	111	109	mg/L	1.81	20.0

### MSD

Parameter	Sample	MS	MSD	UNK	Known	Limits	MS%	MSD%	Units	RPD	Limit%
Fluoride	2266586	85.9	88.0	ND	100	80.0 - 120	85.9	88.0	mg/L	2.42	20.0
Fluoride	2266814	11.2	11.2	1.25	10.0	80.0 - 120	99.5	99.5	mg/L	0	20.0

Analytical Set

1101436

EPA 200.8 5.4

### Blank

Parameter	PrepSet	Reading	MDL	MDL	Units	File
Aluminum, Total	1101340	ND	0.00171	0.00171	mg/L	125917816

### CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Aluminum, Total	0.0515	0.05	mg/L	103	90.0 - 110	125917815
Aluminum, Total	0.0491	0.05	mg/L	98.2	90.0 - 110	125917825
Aluminum, Total	0.0489	0.05	mg/L	97.8	90.0 - 110	125917835
Aluminum, Total	0.0519	0.05	mg/L	104	90.0 - 110	125917862
Aluminum, Total	0.0494	0.05	mg/L	98.8	90.0 - 110	125917873
Aluminum, Total	0.0495	0.05	mg/L	99.0	90.0 - 110	125917883
Aluminum, Total	0.0487	0.05	mg/L	97.4	90.0 - 110	125917893
Aluminum, Total	0.051	0.05	mg/L	102	90.0 - 110	125917900
Aluminum, Total	0.049	0.05	mg/L	98.0	90.0 - 110	125917910
Aluminum, Total	0.0492	0.05	mg/L	98.4	90.0 - 110	125917920
Aluminum, Total	0.0478	0.05	mg/L	95.6	90.0 - 110	125917928
Aluminum, Total	0.0469	0.05	mg/L	93.8	90.0 - 110	125917938
Aluminum, Total	0.0491	0.05	mg/L	98.2	90.0 - 110	125917949
Aluminum, Total	0.0472	0.05	mg/L	94.4	90.0 - 110	125917957
Aluminum, Total	0.0456	0.05	mg/L	91.2	90.0 - 110	125917959



Report Page 6 of 11

# QUALITY CONTROL



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1  
2

Page 3 of 3

## BAIR-W

City of Baird  
Lori Higgins  
328 Market  
Baird, TX 79504-

Project

1089229

Printed 02/02/2024

### ICV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Aluminum, Total	0.0503	0.05	mg/L	101	90.0 - 110	125917810

### LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
Aluminum, Total	1101340	0.545	0.523	0.500	85.0 - 115	109	105	mg/L	4.12	20.0

### LDR

Parameter	Reading	Known	Units	Recover%	Limits%	File
Aluminum, Total	10.4	10	mg/L	104	90.0 - 110	125917812

### MSD

Parameter	Sample	MS	MSD	UNK	Known	Limits	MS%	MSD%	Units	RPD	Limit%
Aluminum, Total	2267281	0.520	0.532	ND	0.500	70.0 - 130	104	106	mg/L	2.28	20.0

Analytical Set 1101783

SM 2320 B-2011

### Blank

Parameter	PrepSet	Reading	MDL	MDL	Units	File
Total Alkalinity (as CaCO3)	1101783	ND	1.00	1.00	mg/L	125925319

### CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Total Alkalinity (as CaCO3)	24.7	25.0	mg/L	98.8	90.0 - 110	125925318
Total Alkalinity (as CaCO3)	27.1	25.0	mg/L	108	90.0 - 110	125925332
Total Alkalinity (as CaCO3)	24.2	25.0	mg/L	96.8	90.0 - 110	125925343

### Duplicate

Parameter	Sample	Result	Unknown	Unit	RPD	Limit%
Total Alkalinity (as CaCO3)	2266909	105	107	mg/L	1.89	20.0
Total Alkalinity (as CaCO3)	2267199	103	101	mg/L	1.96	20.0

### ICV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Total Alkalinity (as CaCO3)	26.6	25.0	mg/L	106	90.0 - 110	125925317

### Mat. Spike

Parameter	Sample	Spike	Unknown	Known	Units	Recovery %	Limits %	File
Total Alkalinity (as CaCO3)	2266909	135	107	25.0	mg/L	112	70.0 - 130	125925322
Total Alkalinity (as CaCO3)	2267199	127	101	25.0	mg/L	104	70.0 - 130	125925335

\* Out RPD is Relative Percent Difference:  $\text{abs}(r_1 - r_2) / \text{mean}(r_1, r_2) * 100\%$

Recover% is Recovery Percent:  $\text{result} / \text{known} * 100\%$

Blank - Method Blank (reagent water or other blank matrices that contains all reagents except standard(s) and is processed simultaneously with and under the same conditions as samples; carried through preparation and analytical procedures exactly like a sample; monitors); CCV - Continuing Calibration Verification (same standard used to prepare the curve; typically a mid-range concentration; verifies the continued validity of the calibration curve); MSD - Matrix Spike Duplicate (replicate of the matrix spike; same solution and amount of target analyte added to the MS is added to a third aliquot of sample; quantifies matrix bias and precision.); LCS Dup - Laboratory Control Sample Duplicate (replicate LCS; analyzed when there is insufficient sample for duplicate or MSD; quantifies accuracy and precision.); AWRL/LOQ C - Ambient Water Reporting Limit/LOQ Check Std; ICV - Initial Calibration Verification; LDR - Linear Dynamic Range Standard; LCS - Laboratory Control Sample (reagent water or other blank matrices that is spiked with a known quantity of target analyte(s) and carried through preparation and analytical procedures exactly like a sample; typically a mid-range concentration; verifies that bias and precision of the analytical process are within control limits; determines usability of the data.)



Report Page 7 of 11

1089229 CoC Print Group 001 of 001

2600 Dudley Rd, Kilgore, Texas 75062  
24 Waterway Avenue, Suite 375 The Woodlands, TX 77380  
Office: 903-984-0551 \* Fax: 903-984-5914



**CHAIN OF CUSTODY**

Printed 01/24/2024 Page 1 of 2

City of Baird  
Lori Higgins  
328 Market  
Baird, TX 79504

**BAIR  
114**

Lab Number 2267199  
PO Number \_\_\_\_\_  
Phone 325/854-1212

**WTP**

☐ Hand Delivered by Client to Region or LAB

Matrix: Drinking Water

Sample Collection Start  
Date: 1-25-24 Time: 9:45  
Sampler Printed Name: CHARLES KEITH  
Sampler Affiliation: CONSULTANT  
Sampler Signature: Charles Keith

Samples Radioactive? ☐ Samples Contains Dioxin? ☐ Samples Biological Hazard? ☐

☒ **On Site Testing**

pHCL pH Client Provided SM 4500-H+ B-2011

pH Client Provided

Collected By CDK Date 1-25-24 Time 9:45 Analyzed By CDK Date 1-25-24 Time 9:50

Results 8.1 Units su Temp. 17.78 C Duplicate \_\_\_\_\_ Units \_\_\_\_\_ Temp. \_\_\_\_\_ C

☒ **Polyethylene 1/2 gal (White)**

NFPA TSS Total Suspended Solids SM 2540 D-2015 (7.00 days)

☒ **HNO3 to pH <2 Polyethylene 500 mL for Metals**

NELAP AIM Aluminum, Total EPA 200.8 5.4 CAS:7429-90-5 (180 days)  
301L Liquid Metals Digestion EPA 200.2 2.8 (180 days)

☒ **Polyethylene 1/2 gal (White)**

NELAP IFIL Fluoride EPA 300.0 2.1 (28.0 days)  
ALK Total Alkalinity (as CaCO3) SM 2320 B-2011 (14.0 days)



West Texas-Abilene: 521 S Access Rd W STE 105 Clyde TX 79510

1089229 CoC Print Group 001 of 001

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Page 2 of 2

**CHAIN OF CUSTODY**

City of Baird  
Lori Higgins  
328 Market  
Baird, TX 79504

**BAIR**  
**114**

NFI-AC

TDS

Total Dissolved Solids

SM 2540 C-2015 (7.00 days)

Ambient Conditions/Comments

Date	Time	Relinquished		Received	
1-25-24	1614	Printed Name: CHARLES KEITH	Affiliation: CONSULTANT	Printed Name: Brie Wallace	Affiliation: SPL
		Signature: [Signature]		Signature: [Signature]	
1-25-24	1800	Printed Name: Brie Wallace	Affiliation: SPL	Printed Name: [Signature]	Affiliation: [Signature]
		Signature: [Signature]		Signature: XPS	
1-26-24	1105	Printed Name: [Signature]	Affiliation: [Signature]	Printed Name: Rayshawn Thompson	Affiliation: GPL
		Signature: XPS		Signature: [Signature]	
		Printed Name: [Signature]	Affiliation: [Signature]	Printed Name: [Signature]	Affiliation: [Signature]
		Signature: [Signature]		Signature: [Signature]	

Sample Received on Ice?

☒ Yes ☐ No

Cooler/Sample Secure?

☒ Yes ☐ No

If Shipped: Tracking Number &amp; Temp - See Attached

The accredited column designates accreditation by A - A2LA, N - NFI-AC, or L - not listed under scope of accreditation. Unless otherwise specified, ANA-LAB shall provide these ordered services pursuant to our Standard Terms & Conditions Agreement (available for download from the welcome page at <http://www.ana-lab.com>).  
Ana-Lab personnel collect samples as specified by Ana-Lab SOP #000323

**Comments**

West Texas-Abiline: 521 S Access Rd W STE 105 Clyde TX 79510

1089229 CoC Print Group 001 of 001

2000-10-10, 1000-10-10, 1000-10-10  
21-10-10, 21-10-10, 21-10-10  
1000-10-10, 1000-10-10, 1000-10-10

# CHAIN OF CUSTODY

City of Baird  
Lori Higgins  
328 Market  
Baird, TX 79504

**BAIR-W  
109**

2267200

## Pickup/Transport

### Sample Collection Start

Date: 1-25-24 Time: 1614  
Sampler Printed Name: Brie Wallace  
Sampler Affiliation: SPL  
Sampler Signature: BWallace

0 Z - No bottle required

PuCh Sampling/Transport

1-25-24 1800	Brie Wallace SPL BWallace	XPS
1-26-24	XPS	Rayshawn Thompson SPL, Inc. D-2

Sample Collection Start  
Sample Collection End  
Sample Collection Location  
Sample Collection Method  
Sample Collection Notes



1089229 CoC Print Group 001 of 001

**XPS#** 2**From: SPL  
Abilene****To: SPL  
Kilgore**

1/26 1146 ACB  
Date Time Tech  
Temp: 0.9/0.8 C

Therm#: 6443 Corr Fact: -0.1 C



City of Baird WTP  
Discharge Application  
Callahan County, Texas

ATTACHMENT #6  
General Highway Map

Prepared By:



Firm #2448  
Project #: 17390



325.695.1070  
817.594.9880

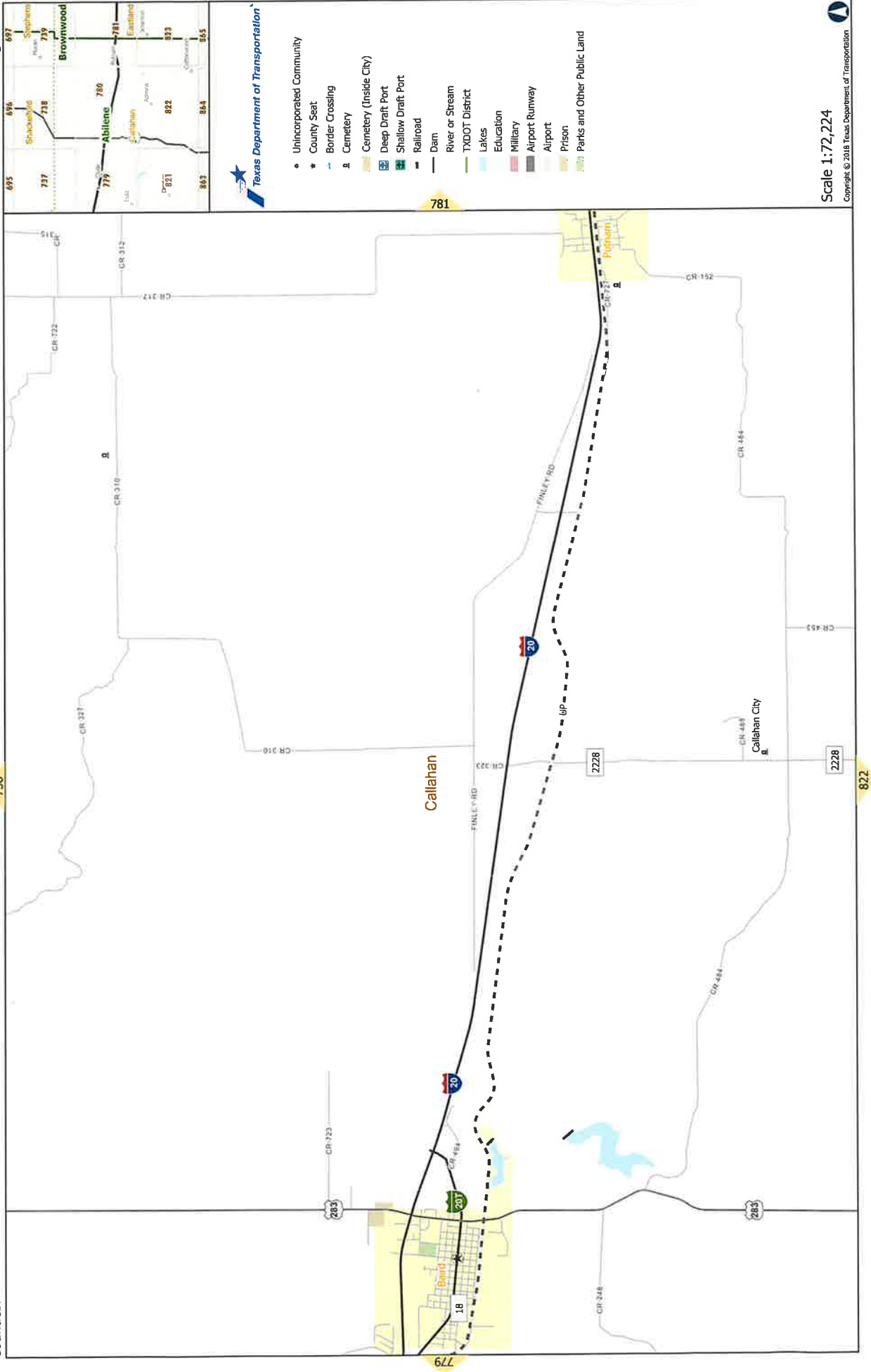


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Abilene, TX 76906

1508 Santa Fe, Suite 203  
Weatherford, TX 76086



City of Baird WTP  
Discharge Application  
Callahan County, Texas

ATTACHMENT #7

FEMA Flood Plain

Prepared By:



Firm #2448  
Project #: 17390



325.695.1070  
817.594.9880

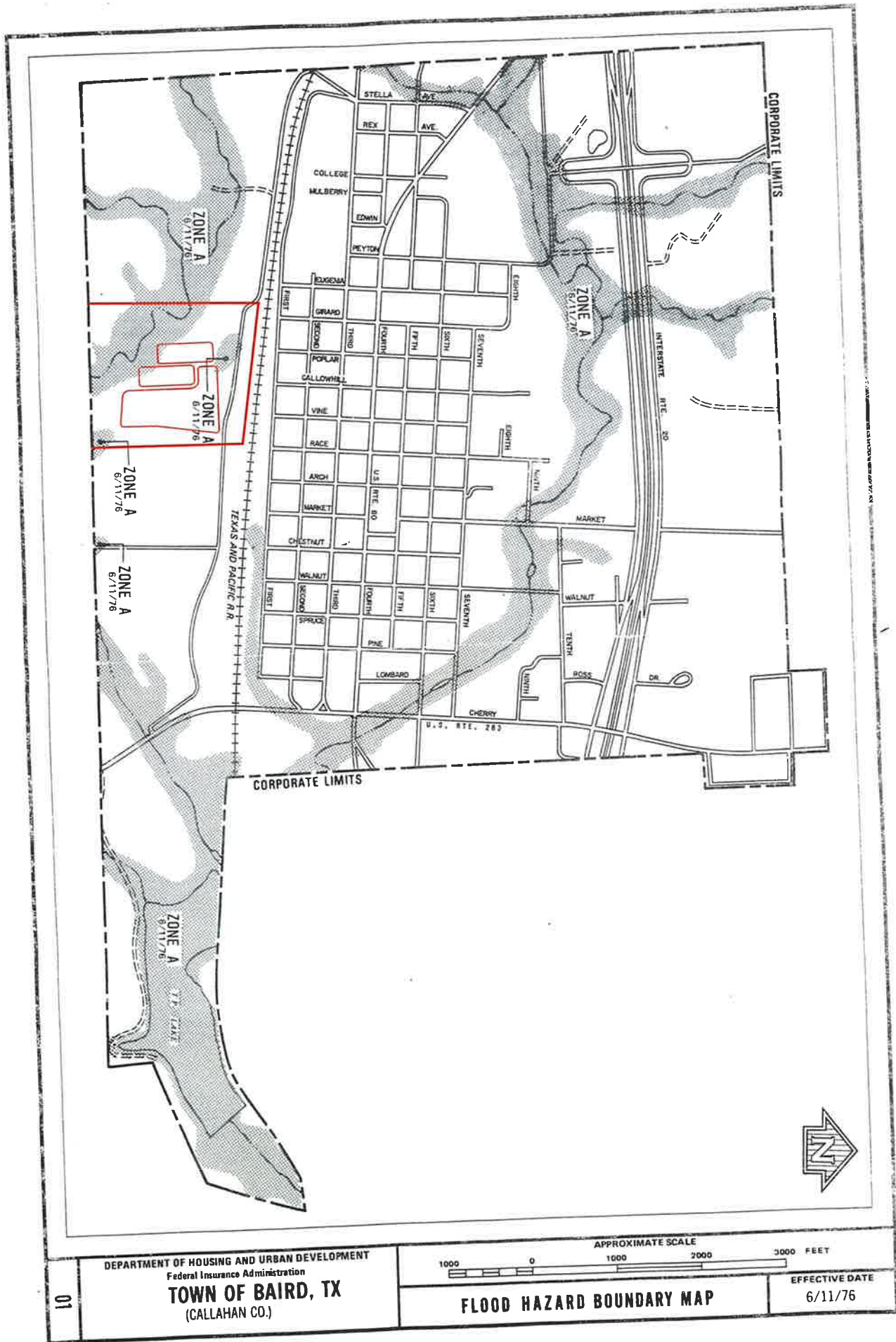


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Weatherford, TX 76086



## Attachment Index

Attachment #1	TCEQ Core Data Form Application Fee Check
Attachment #2	USGS Topographic Map/ SPIFF
Attachment #3	Flow Diagram
Attachment #4	Site Drawings
Attachment #5	Pollutant Analysis
Attachment #6	General Highway Map
Attachment #7	FEMA Flood Plain

Prepared By:



Firm #2448  
Project #: 17390



325.695.1070  
817.594.9880



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