



# **Administrative Package Cover Page**

**This file contains the following documents:**

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



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

### PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

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

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

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

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

#### ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS DOMESTIC WASTEWATER/STORMWATER

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

The City of Brady (CN600249866) operates the City of Brady Wastewater Treatment Facility (RN101613693), a continuous flow-activated sludge system. The facility is located approximately 5,000 feet east of the intersection of US Highway 87 and 6th Street, in Brady, McCulloch County, Texas 76825.

This application is for a renewal to discharge treated domestic wastewater at an annual average flow of 0.99 MGD.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD5), total suspended solids (TSS), ammonia nitrogen (NH3-N), and Escherichia coli. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by fine screen, vortex grit

remover, aeration basins, secondary clarifiers, sludge holding tank, sludge screw press, and UV disinfection.

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0010132001

**APPLICATION.** City of Brady, P.O. Box 351, Brady, Texas 76825, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0010132001 (EPA I.D. No. TX0034312) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 990,000 gallons per day. The domestic wastewater treatment facility is located at 1311 East 6<sup>th</sup> Street, in the city of Brady, in McCulloch County, Texas 76825. The discharge route is from the plant site to Brady Creek; thence to the San Saba River. TCEQ received this application on July 3, 2024. The permit application will be available for viewing and copying at Brady City Hall, Entrance Way, 201 East Main Street, Brady, in McCulloch County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-99.32,31.128333&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 Brady at the address stated above or by calling Mr. Steven Miller, P.E., Public Works Director, at 325-597-2244 Extension 3005.

Issuance Date: July 17, 2024



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: City of Brady

PERMIT NUMBER (If new, leave blank): WQ00 10132001

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

**DOMESTIC WASTEWATER PERMIT APPLICATION  
ADMINISTRATIVE REPORT 1.0**

For any questions about this form, please contact the Applications Review and Processing Team at 512-239-4671.

**Section 1. Application Fees (Instructions Page 26)**

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 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 checked="" 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: 153112  
Check/Money Order Amount: \$1,615.00  
Name Printed on Check: City of Brady

EPAY      Voucher Number: N/A

Copy of Payment Voucher enclosed?      Yes ☐

**Section 2. Type of Application (Instructions Page 26)**

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

- ☒ Publicly-Owned Domestic Wastewater  
☐ Privately-Owned Domestic Wastewater  
☐ Conventional Wastewater Treatment

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

- ☒ Active      ☐ Inactive

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

- ☒ TPDES Permit  
☐ TLAP  
☐ TPDES Permit with TLAP component  
☐ Subsurface Area Drip Dispersal System (SADDS)

d. Check the box next to the appropriate application type

- |   |   |
|---|---|
| <input type="checkbox"/> New                                    |   |
| <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           |

e. For amendments or modifications, describe the proposed changes: N/A

f. For existing permits:

Permit Number: WQ00 10132001

EPA I.D. (TPDES only): TX 0034312

Expiration Date: February 10, 2025

### Section 3. Facility Owner (Applicant) and Co-Applcant Information (Instructions Page 26)

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 Brady

*(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: 600249866

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.

Last Name, First Name: Miller, Steven

Title: Public Works Director

Credential: P.E.

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

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

N/A

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

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

CN: N/A

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: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

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

### 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 AR-1

## Section 4. Application Contact Information (Instructions Page 27)

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. Last Name, First Name: Miller, Steven  
Title: Public Works Director Credential: P.E.  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 206) E-mail Address: smiller@bradytx.us  
Check one or both: ☒ Administrative Contact ☒ Technical Contact
- B. Prefix: Ms. Last Name, First Name: Villarreal, Cassandra  
Title: Environmental Scientist Credential: M.S.  
Organization Name: Freese and Nichols, Inc.  
Mailing Address: 801 Cherry St., Suite 2800 City, State, Zip Code: Fort Worth, TX 76102  
Phone No.: 817-735-7294 E-mail Address: cassandra.villarreal@freese.com  
Check one or both: ☒ Administrative Contact ☒ Technical Contact

## Section 5. Permit Contact Information (Instructions Page 27)

Provide the names and contact information for two individuals that can be contacted throughout the permit term.

- A. Prefix: Mr. Last Name, First Name: Miller, Steven  
Title: Public Works Director Credential: P.E.  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 206) E-mail Address: smiller@bradytx.us

B. Prefix: Mr. Last Name, First Name: Martin, Marty  
Title: Wastewater Superintendent Credential: N/A  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 206) E-mail Address: mmartin@bradytx.us

## Section 6. Billing Contact Information (Instructions Page 27)

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. Last Name, First Name: Martin, Marty  
Title: Wastewater Superintendent Credential: N/A  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2152 E-mail Address: mmartin@bradytx.us

## Section 7. DMR/MER Contact Information (Instructions Page 27)

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

Prefix: Mr. Last Name, First Name: Martin, Marty  
Title: Wastewater Superintendent Credential: N/A  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2152 E-mail Address: mmartin@bradytx.us

## Section 8. Public Notice Information (Instructions Page 27)

### A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: Miller, Steven  
Title: Public Works Director Credential: P.E.  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 206) E-mail Address: smiller@bradytx.us

**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 permit to be listed in the Notices**

Prefix: Mr.

Last Name, First Name: Miller, Steven

Title: Public Works Director

Credential: P.E.

Organization Name: City of Brady

Mailing Address: P.O. Box 351

City, State, Zip Code: Brady, TX 76825

Phone No.: 325-597-2244 (Ext 206) E-mail Address: smiller@bradytx.us

**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: Placard at Entrance Way

Physical Address of Building: 201 E. Main Street

City: Brady

County: McCulloch

Contact (Last Name, First Name): Miller, Steven

Phone No.: 325-597-2244 Ext.: 206

**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? N/A

#### F. Plain Language Summary Template

Complete the Plain Language Summary (TCEQ Form 20972) and include as an attachment.

Attachment: AR-2

#### G. 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: N/A

### Section 9. Regulated Entity and Permitted Site Information (Instructions Page 29)

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 101613693

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):

City of Brady Wastewater Treatment Plant

C. Owner of treatment facility: City of Brady

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

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: City of Brady

Mailing Address: P.O. Box 351

City, State, Zip Code: Brady, TX 76825

Phone No.: 325-597-2244 (Ext 206) E-mail Address: smiller@bradytx.us

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: N/A

E. Owner of effluent disposal site:

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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:** N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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:** N/A

## Section 10. TPDES Discharge Information (Instructions Page 31)

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:

N/A

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:

N/A

City nearest the outfall(s): Brady

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

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:** N/A

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

## Section 11. TLAP Disposal Information (Instructions Page 32)

- 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:

N/A

- B. City nearest the disposal site: N/A

- C. County in which the disposal site is located: N/A

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

N/A

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

## Section 12. Miscellaneous Information (Instructions Page 32)

- 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.

N/A

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: N/A

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

Account number: N/A

Amount past due: N/A

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, please provide the following information:

Enforcement order number: N/A

Amount past due: N/A

### Section 13. Attachments (Instructions Page 33)

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: AR-1 (Core Data Form), AR-2 (Plain Language Summary), AR-3 (USGS Topo)

## Section 14. Signature Page (Instructions Page 34)

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

Permit Number: WQ0010132001

Applicant: City of Brady

Certification:

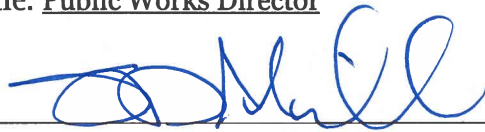
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage 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): Steven Miller, P.E.

Signatory title: Public Works Director

Signature: \_\_\_\_\_



Date: \_\_\_\_\_

5/29/24

(Use blue ink)

Subscribed and Sworn to before me by the said \_\_\_\_\_

Steven Miller

on this \_\_\_\_\_

29<sup>th</sup>

day of \_\_\_\_\_

May

, 2024.

My commission expires on the \_\_\_\_\_

3

day of \_\_\_\_\_

April

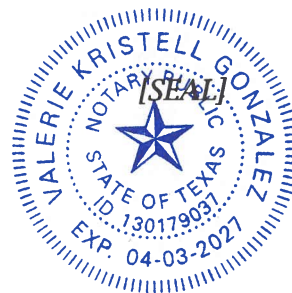
, 2027.

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



McCulloch

County, Texas



# **DOMESTIC WASTEWATER PERMIT APPLICATION**

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

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

**Attachment:** SPIF-1

# DOMESTIC WASTEWATER PERMIT APPLICATION 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) ☒ Yes  
*(Required for all application types. Must be completed in its entirety and signed.*  
*Note: Form may be signed by applicant representative.)*

Correct and Current Industrial Wastewater Permit Application Forms ☒ Yes  
*(TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or later.)*

Water Quality Permit Payment Submittal Form (Page 19) ☒ Yes  
*(Original payment sent to TCEQ Revenue Section. See instructions for mailing address.)*

7.5 Minute USGS Quadrangle Topographic Map Attached ☒ Yes  
*(Full-size map if seeking "New" permit.*  
*8 ½ x 11 acceptable for Renewals and Amendments)*

Current/Non-Expired, Executed Lease Agreement or Easement ☒ N/A ☐ Yes

Landowners Map ☒ N/A ☐ Yes  
*(See instructions for landowner requirements)*

## **Things to Know:**

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

Landowners Cross Reference List ☒ N/A ☐ Yes  
*(See instructions for landowner requirements)*

Landowners Labels or USB Drive attached ☒ N/A ☐ Yes  
*(See instructions for landowner requirements)*

Original signature per 30 TAC § 305.44 - Blue Ink Preferred ☒ Yes  
*(If signature page is not signed by an elected official or principle executive officer, a copy of signature authority/delegation letter must be attached)*

Plain Language Summary ☒ Yes



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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For any questions about this form, please contact the Domestic Wastewater Permitting Team at 512-239-4671.

The following information is required for all renewal, new, and amendment applications.

### Section 1. Permitted or Proposed Flows (Instructions Page 43)

#### A. Existing/Interim I Phase

Design Flow (MGD): 1.103

2-Hr Peak Flow (MGD): 2.75

Estimated construction start date: 1963

Estimated waste disposal start date: 1963

#### B. Interim II Phase

Design Flow (MGD): 0.60

2-Hr Peak Flow (MGD): 2.4

Estimated construction start date: 2019

Estimated waste disposal start date: 2024

#### C. Final Phase

Design Flow (MGD): 0.99

2-Hr Peak Flow (MGD): 2.75

Estimated construction start date: 2019

Estimated waste disposal start date: TBD

#### D. Current Operating Phase

Provide the startup date of the facility: Interim II startup is anticipated for July/August 2024. Currently in Interim I until Interim II startup.

### Section 2. Treatment Process (Instructions Page 43)

#### A. Current Operating Phase

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, a description of *each phase* must be provided.**

**Interim I:** Influent is sent through a manual bar screen and an aerated grit chamber, then is pumped via pump station to a carousel aeration (mechanical type) basin, two (2) final clarifiers, and a chlorine contact basin for disinfection. The existing sludge handling facilities include a sludge thickener, aerated sludge holding tank, and sludge drying beds.

**Interim II:** The facility is a continuous flow-activated sludge system. The treatment process includes an influent lift station to collect and pump influent through a fine screen and grit removal units, through aeration basins and secondary clarifiers before final disinfection via an ultraviolet (UV) disinfection system. For sludge handling, the plant includes a sludge dewatering screw press and a sludge holding tank.

## B. Treatment Units

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

**Table 1.0(1) - Treatment Units**

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
TR-1		

## C. Process Flow Diagram

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

Attachment: **TR-2**

# Section 3. Site Information and Drawing (Instructions Page 44)

Provide the TPDES discharge outfall latitude and longitude. Enter N/A if not applicable.

- Latitude: 31.128829
- Longitude: -99.318509

Provide the TLAP disposal site latitude and longitude. Enter N/A if not applicable.

- Latitude: N/A
- Longitude: N/A

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: **TR-3**

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

Brady city limits

Collection System Information **for wastewater TPDES permits only**: Provide information for each **uniquely owned** collection system, existing and new, served by this facility, including satellite collection systems. **Please see the instructions for a detailed explanation and examples.**

#### Collection System Information

Collection System Name	Owner Name	Owner Type	Population Served
Brady Wastewater Treatment Plant	City of Brady	Publicly Owned	5,005

### Section 4. Unbuilt Phases (Instructions Page 45)

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.**

N/A

### Section 5. Closure Plans (Instructions Page 45)

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.

A closure plan will be prepared once it is determined which units will be kept for emergency storage and which will be closed permanently. The old plant is still in operation until summer 2024.

## Section 6. Permit Specific Requirements (Instructions Page 45)

**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: September 30, 2019, TWDB approved final plans, specifications, and contract documents for Interim II Phase.

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

The new treatment facilities are funded through TWDB, and copies of the approvals were also submitted to TCEQ. Approvals from TWDB are found in Attachment TR-3.

### 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.

N/A

### 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*.

A summary transmittal letter for the construction of Interim II phase and Notification of Completion forms was submitted to TCEQ and TWDB. Final plans, specifications, and contract documents were approved by TWDB on September 30, 2019. See Attachment TR-4 for additional details.

A closure plan for the Interim I facility shall be submitted at least 90 days prior to conducting such activity.

#### 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.

N/A

##### 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 512-239-2335. 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.

N/A

#### 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 512-239-2335.

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

N/A

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

N/A

#### 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.

N/A

**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.

N/A

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.

N/A

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, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions.  
N/A

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

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

Does or will the facility 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 the plant started 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.

N/A

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 the date the plant started 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.

N/A

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 or will the facility 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.

N/A
-----

## Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 50)

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). Provide copies of the laboratory results sheets. **These tables are not applicable for a minor amendment without renewal.** See the instructions for guidance.

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	<2	<2	1	GRAB	5/21/24 8:40
Total Suspended Solids, mg/l	11	11	1	GRAB	5/21/24 8:40
Ammonia Nitrogen, mg/l	0.15	0.15	1	GRAB	5/21/24 8:40
Nitrate Nitrogen, mg/l	<0.40	<0.40	1	GRAB	5/21/24 8:40
Total Kjeldahl Nitrogen, mg/l	2.20	2.20	1	GRAB	5/21/24 8:40
Sulfate, mg/l	63.5	63.5	1	GRAB	5/21/24 8:40
Chloride, mg/l	89	89	1	GRAB	5/21/24 8:40
Total Phosphorus, mg/l	2.62	2.62	1	GRAB	5/21/24 8:40
pH, standard units	7.1	7.1	1	GRAB	5/21/24 8:40
Dissolved Oxygen*, mg/l	6.5	6.5	1	GRAB	5/21/24 8:40



Chlorine Residual, mg/l	0.02	0.02	1	GRAB	5/21/24 8:40
<i>E.coli</i> (CFU/100ml) freshwater	67	67	1	GRAB	5/21/24 8:40
Enterococci (CFU/100ml) saltwater	N/A	N/A	1	GRAB	5/21/24 8:40
Total Dissolved Solids, mg/l	571	571	1	GRAB	5/21/24 8:40
Electrical Conductivity, $\mu$ mohs/cm, †	987	987	1	GRAB	5/21/24 8:40
Oil & Grease, mg/l	<7	<7	1	GRAB	5/21/24 8:40
Alkalinity (CaCO <sub>3</sub> )*, mg/l	348	348	1	GRAB	5/21/24 8:40

\*TPDES permits only

†TLAP permits only

**Table1.0(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					
Total Dissolved Solids, mg/l					
pH, standard units					
Fluoride, mg/l					
Aluminum, mg/l					
Alkalinity (CaCO <sub>3</sub> ), mg/l					

## Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: Marty Martin

Facility Operator's License Classification and Level: Wastewater Treatment Operator B

Facility Operator's License Number: WW0012480

## Section 9. Sludge and Biosolids Management and Disposal (Instructions Page 51)

### A. WWTP's Biosolids Management Facility Type

Check all that apply. See instructions for guidance

- ☐ Design flow  $\geq$  1 MGD
- ☐ Serves  $\geq$  10,000 people
- ☐ Class I Sludge Management Facility (per 40 CFR § 503.9)
- ☐ Biosolids generator
- ☐ Biosolids end user – land application (onsite)
- ☐ Biosolids end user – surface disposal (onsite)
- ☐ Biosolids end user – incinerator (onsite)

## B. WWTP's Biosolids Treatment Process

Check all that apply. See instructions for guidance.

- ☐ Aerobic Digestion
- ☐ Air Drying (or sludge drying beds)
- ☐ Lower Temperature Composting
- ☐ Lime Stabilization
- ☐ Higher Temperature Composting
- ☐ Heat Drying
- ☐ Thermophilic Aerobic Digestion
- ☐ Beta Ray Irradiation
- ☐ Gamma Ray Irradiation
- ☐ Pasteurization
- ☐ Preliminary Operation (e.g. grinding, de-gritting, blending)
- ☐ Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)
- ☐ Sludge Lagoon
- ☐ Temporary Storage (< 2 years)
- ☐ Long Term Storage (>= 2 years)
- ☐ Methane or Biogas Recovery
- ☒ Other Treatment Process: Sludge holding (partial stabilization and dewatering)

## C. Biosolids Management

Provide information on the *intended* biosolids management practice. Do not enter every management practice that you want authorized in the permit, as the permit will authorize all biosolids management practices listed in the instructions. Rather indicate the management practice the facility plans to use.

### Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	On-Site Owner or Operator	Not Applicable	112.64 (2022)	Class B: PSRP Aerobic Digestion	Option 11: Biosolids covered at end of each day

If "Other" is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): N/A

#### D. Disposal site

Disposal site name: City of Brady Landfill

TCEQ permit or registration number: MSW 1732

County where disposal site is located: McCulloch

#### E. Transportation method

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

Name of the hauler: City of Brady

Hauler registration number: 22753

Sludge is transported as a:

Liquid ☐

semi-liquid ☐

semi-solid ☐

solid ☒

### Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 53)

#### 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 53)

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:** N/A
- USDA Natural Resources Conservation Service Soil Map:  
**Attachment:** N/A
- Federal Emergency Management Map:  
**Attachment:** N/A
- Site map:  
**Attachment:** N/A

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:** N/A

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:

N/A

### 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: N/A

Total Kjeldahl Nitrogen, mg/kg: N/A

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: N/A

Phosphorus, mg/kg: N/A  
Potassium, mg/kg: N/A  
pH, standard units: N/A  
Ammonia Nitrogen mg/kg: N/A  
Arsenic: N/A  
Cadmium: N/A  
Chromium: N/A  
Copper: N/A  
Lead: N/A  
Mercury: N/A  
Molybdenum: N/A  
Nickel: N/A  
Selenium: N/A  
Zinc: N/A  
Total PCBs: N/A

Provide the following information:

Volume and frequency of sludge to the lagoon(s): N/A  
Total dry tons stored in the lagoons(s) per 365-day period: N/A  
Total dry tons stored in the lagoons(s) over the life of the unit: N/A

### 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.

N/A

### D. Site development plan

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

N/A

Attach the following documents to the application.

- Plan view and cross-section of the sludge lagoon(s)

**Attachment:** N/A

- Copy of the closure plan

**Attachment:** N/A

- Copy of deed recordation for the site

**Attachment:** N/A

- Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons

**Attachment:** N/A

- Description of the method of controlling infiltration of groundwater and surface water from entering the site

**Attachment:** N/A

- Procedures to prevent the occurrence of nuisance conditions

**Attachment:** N/A

#### **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:** N/A

## **Section 12. Authorizations/Compliance/Enforcement (Instructions Page 55)**

#### **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:

N/A

**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:

N/A

**Section 13. RCRA/CERCLA Wastes (Instructions Page 55)**

**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:** N/A

## Section 14. Laboratory Accreditation (Instructions Page 56)

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:

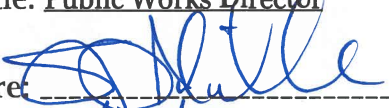
I certify that all laboratory tests submitted with this application meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*.

Printed Name: Steven Miller

Title: Public Works Director

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

  
5/29/24



# DOMESTIC WASTEWATER PERMIT APPLICATION

## WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

### Section 1. Domestic Drinking Water Supply (Instructions Page 64)

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 **no**, proceed to Section 2. If **yes**, provide the following:

Owner of the drinking water supply: N/A

Distance and direction to the intake: N/A

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

Attachment: N/A

### Section 2. Discharge into Tidally Affected Waters (Instructions Page 64)

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

If **no**, proceed to Section 3. 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: N/A

#### 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).

N/A

#### 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).

N/A

### Section 3. Classified Segments (Instructions Page 64)

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 65)

Name of the immediate receiving waters: Brady 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: N/A

Average depth of the entire water body, in feet: N/A

Average depth of water body within a 500-foot radius of discharge point, in feet: N/A

☐ Man-made Channel or Ditch

☐ Open Bay

☐ Tidal Stream, Bayou, or Marsh

☐ Other, specify: N/A

#### 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: Texas Surface Water Quality Standards

### C. Downstream perennial confluences

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

No perennial streams join Brady Creek within 3 miles downstream of the discharge point.

### D. Downstream characteristics

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

☒ Yes ☐ No

If yes, discuss how.

A man-made dam is located approximately 150 feet downstream of the discharge point.

### E. Normal dry weather characteristics

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

The concrete outfall structure cascades down a concrete pad before entering the creek. The outfall and creek at the discharge point are surrounded by dense vegetation.

Date and time of observation: 5/23/2024 @ 13:53

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☒ No

## Section 5. General Characteristics of the Waterbody (Instructions Page 66)

### 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 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: <u>N/A</u>  |

## B. Waterbody uses

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

- |  |  |
|--|--|
| <input checked="" 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 type="checkbox"/> Other(s), specify: <u>N/A</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 WASTEWATER PERMIT APPLICATION

## WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works.

### Section 1. All POTWs (Instructions Page 89)

#### A. Industrial users (IUs)

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 (zero)

Average Daily Flows, in MGD: 0 (zero)

Significant IUs - non-categorical:

Number of IUs: 0 (zero)

Average Daily Flows, in MGD: 0 (zero)

Other IUs:

Number of IUs: 0 (zero)

Average Daily Flows, in MGD: 0 (zero)

#### 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.

N/A

### 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.

N/A

### 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.

### E. Service Area Map

Attach a map indicating the service area of the POTW. The map should include the applicant's service area boundaries and the location of any known industrial users discharging to the POTW. Please see the instructions for guidance.

Attachment: **TR-2**

## Section 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 90)

### 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.

N/A

**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.

N/A

**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.

N/A

### Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 90)

#### A. General information

Company Name: N/A

SIC Code: N/A

Contact name: N/A

Address: N/A

City, State, and Zip Code: N/A

Telephone number: N/A

Email address: N/A

#### 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).

N/A

#### C. Product and service information

Provide a description of the principal product(s) or services performed.

N/A

#### D. Flow rate information



See the Instructions for definitions of “process” and “non-process wastewater.”

Process Wastewater:

Discharge, in gallons/day: N/A

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: N/A

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: Subcategories: Click to enter text.

Click or tap here to enter text. Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click 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.

N/A

# **ATTACHMENT AR-1**

## Core Data Form



# TCEQ Core Data Form

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

## SECTION I: General Information

<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 600249866		RN 101613693

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (mm/dd/yyyy)		5/6/2024	
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership					
<input 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 Brady					
<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>		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited
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 type="checkbox"/> 0-20 <input checked="" type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>14. Customer Role</b> (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:					
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
<b>15. Mailing Address:</b>	P.O. Box 351				
	City	Brady	State	TX	ZIP 76825 ZIP + 4
<b>16. Country Mailing Information</b> (if outside USA)				<b>17. E-Mail Address</b> (if applicable)	
N/A				smiller@bradytx.us	
<b>18. Telephone Number</b>			<b>19. Extension or Code</b>		<b>20. Fax Number</b> (if applicable)

## SECTION III: Regulated Entity Information

<b>21. General Regulated Entity Information</b> (If 'New Regulated Entity' is selected, a new permit application is also required.)								
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input checked="" type="checkbox"/> Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
<b>22. Regulated Entity Name</b> (Enter name of the site where the regulated action is taking place.)								
City of Brady Wastewater Treatment Plant								
<b>23. Street Address of the Regulated Entity:</b>  (No PO Boxes)	1311 East 6 <sup>th</sup> Street							
	<b>City</b>	Brady	<b>State</b>	TX	<b>ZIP</b>	76825	<b>ZIP + 4</b>	
<b>24. County</b>	McCulloch							

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

<b>25. Description to Physical Location:</b>	N/A								
<b>26. Nearest City</b>					<b>State</b>		<b>Nearest ZIP Code</b>		
Brady					TX		76825		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>									
<b>27. Latitude (N) In Decimal:</b>			31.128072			<b>28. Longitude (W) In Decimal:</b>			-99.319986
Degrees	Minutes		Seconds		Degrees	Minutes		Seconds	
31	07		41.06		-99	19		11.95	
<b>29. Primary SIC Code</b> (4 digits)		<b>30. Secondary SIC Code</b> (4 digits)		<b>31. Primary NAICS Code</b> (5 or 6 digits)		<b>32. Secondary NAICS Code</b> (5 or 6 digits)			
4952		N/A		221320		N/A			
<b>33. What is the Primary Business of this entity?</b> (Do not repeat the SIC or NAICS description.)									
Domestic wastewater treatment									
<b>34. Mailing Address:</b>	P.O. Box 351								
	<b>City</b>	Brady	<b>State</b>	TX	<b>ZIP</b>	76825	<b>ZIP + 4</b>		
<b>35. E-Mail Address:</b>		smiller@bradytx.us							
<b>36. Telephone Number</b>			<b>37. Extension or Code</b>			<b>38. Fax Number</b> (if applicable)			
( 325 ) 597-2244			206			( 325 ) 597-2068			

**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:
	WQ0010132001			

#### **SECTION IV: Preparer Information**

<b>40. Name:</b>	Cassandra Villarreal			<b>41. Title:</b>	Environmental Scientist
<b>42. Telephone Number</b>	<b>43. Ext./Code</b>	<b>44. Fax Number</b>	<b>45. E-Mail Address</b>		
( 817 ) 735-7294	N/A	( 817 ) 735-7492	cassandra.villarreal@freese.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>	Freese and Nichols, Inc.	<b>Job Title:</b>	Enviornmental Scientist
<b>Name (In Print):</b>	Cassandra Villarreal	<b>Phone:</b>	( 817 ) 735- 7294
<b>Signature:</b>		<b>Date:</b>	7/2/2024

## **ATTACHMENT AR-2**

### Plain Language Summary



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

### PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

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

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

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

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

#### ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS DOMESTIC WASTEWATER/STORMWATER

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

The City of Brady (CN600249866) operates the City of Brady Wastewater Treatment Facility (RN 101613693), a continuous flow-activated sludge system. The facility is located at 1311 East 6<sup>th</sup> Street, in Brady, McCulloch County, Texas 76825.

This application is for a renewal to discharge treated domestic wastewater at an annual average flow of 0.99 MGD.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD5), total suspended solids (TSS), ammonia nitrogen (NH3-N), and Escherichia coli. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by fine screen, vortex grit remover, aeration basins, secondary clarifiers, sludge holding tank, sludge screw press, and UV disinfection.

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

### AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES

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

N/A

### INSTRUCTIONS

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



16. Choose the appropriate verb tense to complete the sentence.

17. Enter a description of the wastewater treatment used at your facility. Include a description of each process, starting with initial treatment and finishing with the outfall/point of disposal. Use additional lines for individual discharge types if necessary.

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

## Example

### Individual Industrial Wastewater Application

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

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

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

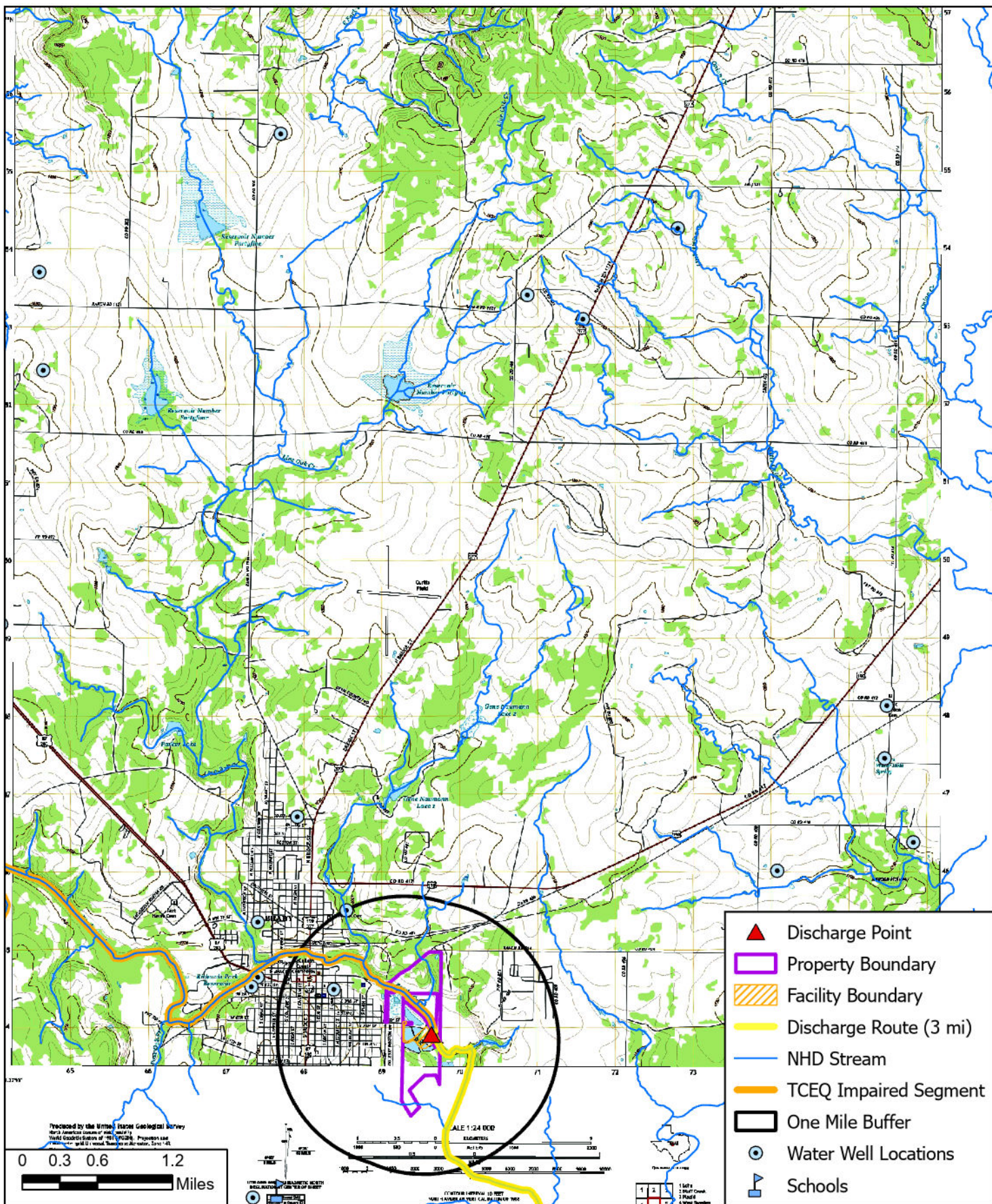
The discharge of once through cooling water via Outfall 001 and low-volume waste and metal-cleaning waste via Outfall 101 from this facility is subject to federal effluent limitation guidelines at 40 CFR Part 423. The pollutants expected from these discharges based on 40 CFR Part 423 are: free available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

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

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

**ATTACHMENT AR-3**  
USGS Topographic Maps





**FREESE AND NICHOLS**  
 FREESE AND NICHOLS, INC.  
 801 Cherry Street, Suite 2800  
 Fort Worth, TX 76102  
 Phone - (817) 735 - 7300



City of Brady  
 TPDES Permit Renewal  
 USGS Topographic Map  
 Quad Name: Brady North

FN JOB NO  
 BRD24175  
 FILE NAME  
 TPDES\_Renewal.aprx  
 DATE  
 5/6/2024  
 DESIGNED  
 CLV  
 DRAFTED  
 CLV

**1a**

**FIGURE**







# **ATTACHMENT SPIF-1**

SPIF

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

**TCEQ USE ONLY:**

Application type: \_\_\_\_Renewal \_\_\_\_Major Amendment \_\_\_\_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)

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

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

The following applies to all applications:

1. Permittee: City of Brady

Permit No. WQ00 10132001EPA ID No. TX 0034312

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

1311 East 6th Street

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

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

First and Last Name: Steven Miller

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

Title: Public Works Director

Mailing Address: P.O. Box 351

City, State, Zip Code: Brady, TX 76825

Phone No.: 325-597-2244 Ext.: 206 Fax No.: 325-597-2068

E-mail Address: smiller@bradytx.us

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

N/A

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

Brady Creek thence to San Saba River, Segment No. 1416 of the Colorado 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

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

N/A

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

The site is currently used for wastewater treatment units or covered with native vegetation.

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

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

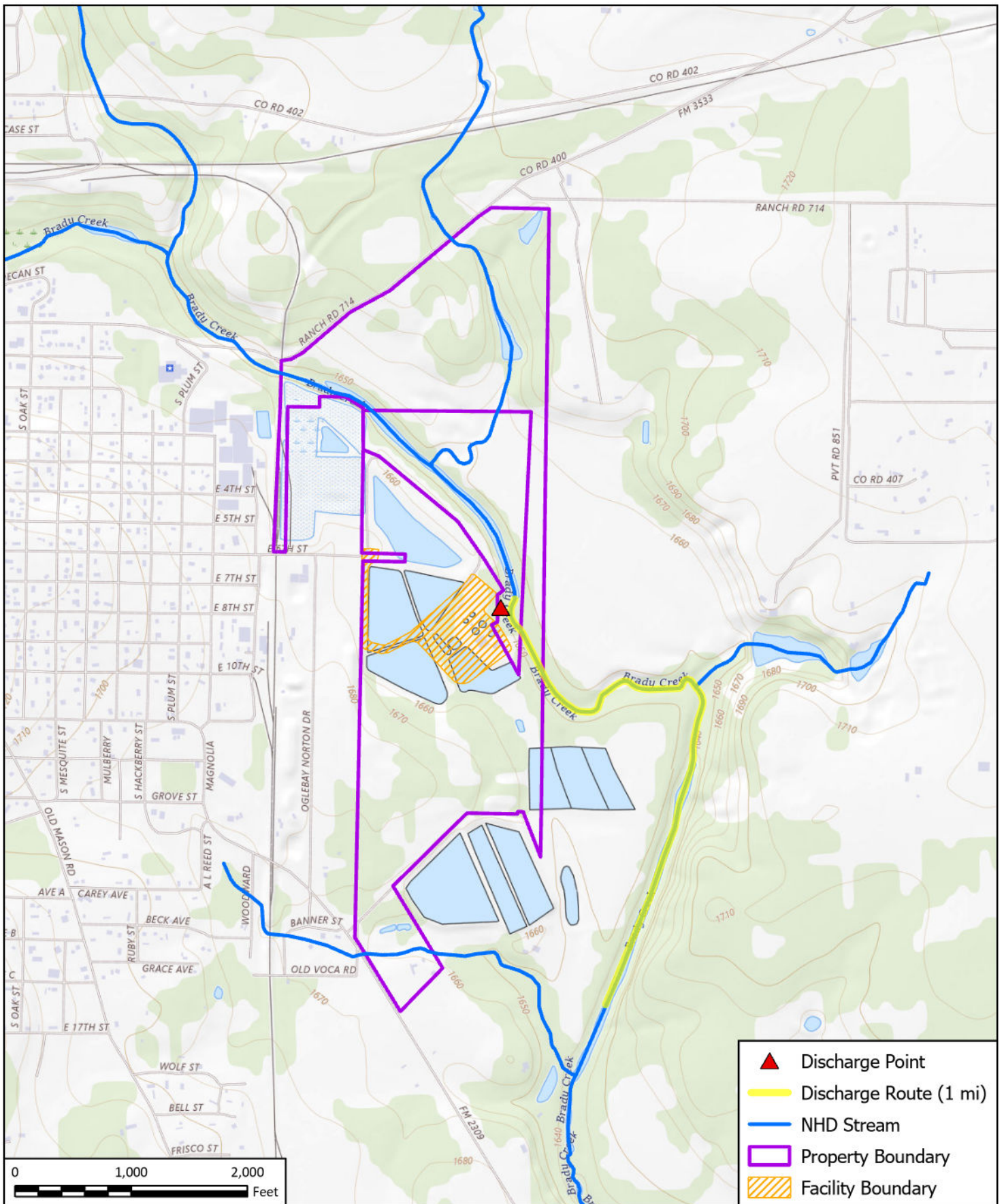
N/A

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

N/A

## **ATTACHMENT SPIF-2**

SPIF USGS Topographic Map



**FREES AND NICHOLS**  
 FREES AND NICHOLS, INC  
 801 Cherry Street, Suite 2800  
 Fort Worth, TX 76102  
 Phone - (817) 735 - 7300



City of Brady  
**TPDES Permit Renewal**  
**SPIF USGS Topographic Map**

FN JOB NO	BRD24175
FILE NAME	TPDES_Renewal.aprx
DATE	5/6/2024
DESIGNED	CLV
DRAFTED	CLV

**2**  
**FIGURE**

# **ATTACHMENT TR-1**

## Treatment Units

## Section 2.B Treatment Units

### Interim I Phase Plant

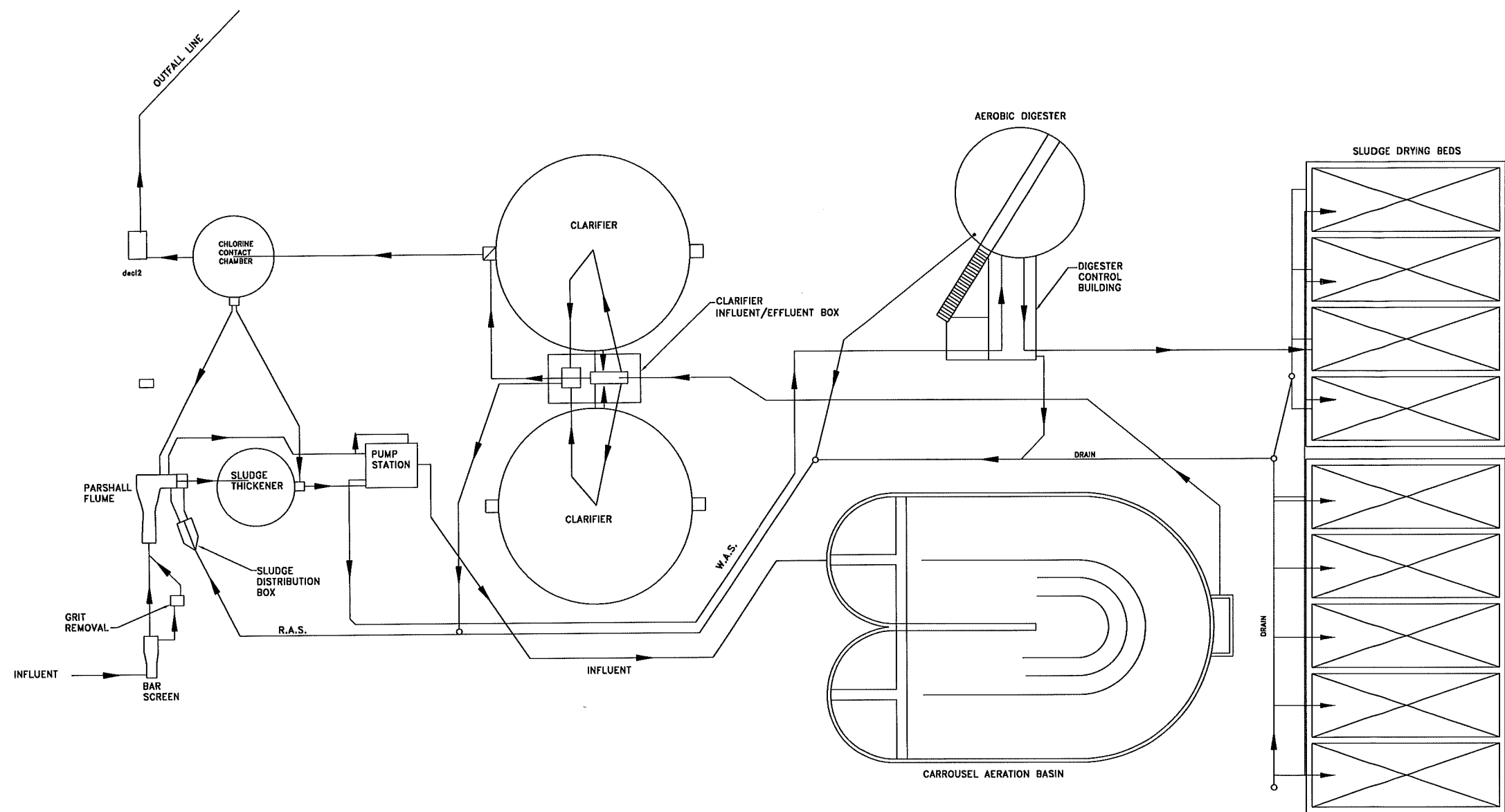
Treatment Units	Number of Units	Dimensions (LxWxD)
Headworks (Bar Screen & Grit Removal)	1	15' x 17' x 10.5'
Carrousel Aeration Basin	1	108" x 93" x 13'
Clarifiers	2	60' diameter x 7' deep
Chlorine Contact Chamber	1	40' diameter x 12' 4" deep
Sludge Thickener	1	40' diameter x 13' 1" deep
Sludge Drying Beds	9	6' 7.75" x 21' x 1'
Aerobic Digester	1	40' diameter x 20' deep

### Interim II and Final Phase Plant

Treatment Units	Number of Units	Dimensions (LxWxD)
Fine Screen	1	27' x 10' x 7'
Vortex Grit Remover	1	25' x 14' x 13.5'
Aeration Basins	2	95' x 60' x 19.5'
Secondary Clarifiers	2	50' diameter x 17.5'
UV Disinfection	1	66' x 6' x 8.5'
Sludge Holding Tank	1	30' diameter x 13.62'
Sludge Screw Press	1	45' x 40' x 2'

# **ATTACHMENT TR-2**

## Process Flow Diagrams



Interim I Phase

<b>KSA ENGINEERS</b> THIS DOCUMENT IS INCOMPLETE AND IS RELEASED TEMPORARILY FOR INTERIM REVIEW ONLY. IT IS NOT INTENDED FOR CONSTRUCTION, BIDDING, OR PERMIT PURPOSES. JASON HENRY P.E. SERIAL NO. 115726 DATE: FEBRUARY 2014 SEAL: EXHIBIT NO. _____ EXHIBIT _____ OF _____		DRAWN BY: JNH DESIGNED BY: - LATEST REVISION: 2/4/2014 KSA JOB NO.: BPA.037		CITY OF BRADY WASTEWATER TREATMENT PLANT PERMIT RENEWAL		FLOW DIAGRAM		VERT. SCALE: NTS HORIZ. SCALE: NTS PLOT SCALE: NTS DRAWING NAME: FLOW DIAGRAM MARK: _____ REVISION: _____ DATE: _____	
--	--	--	--	--	--	--------------	--	---	--

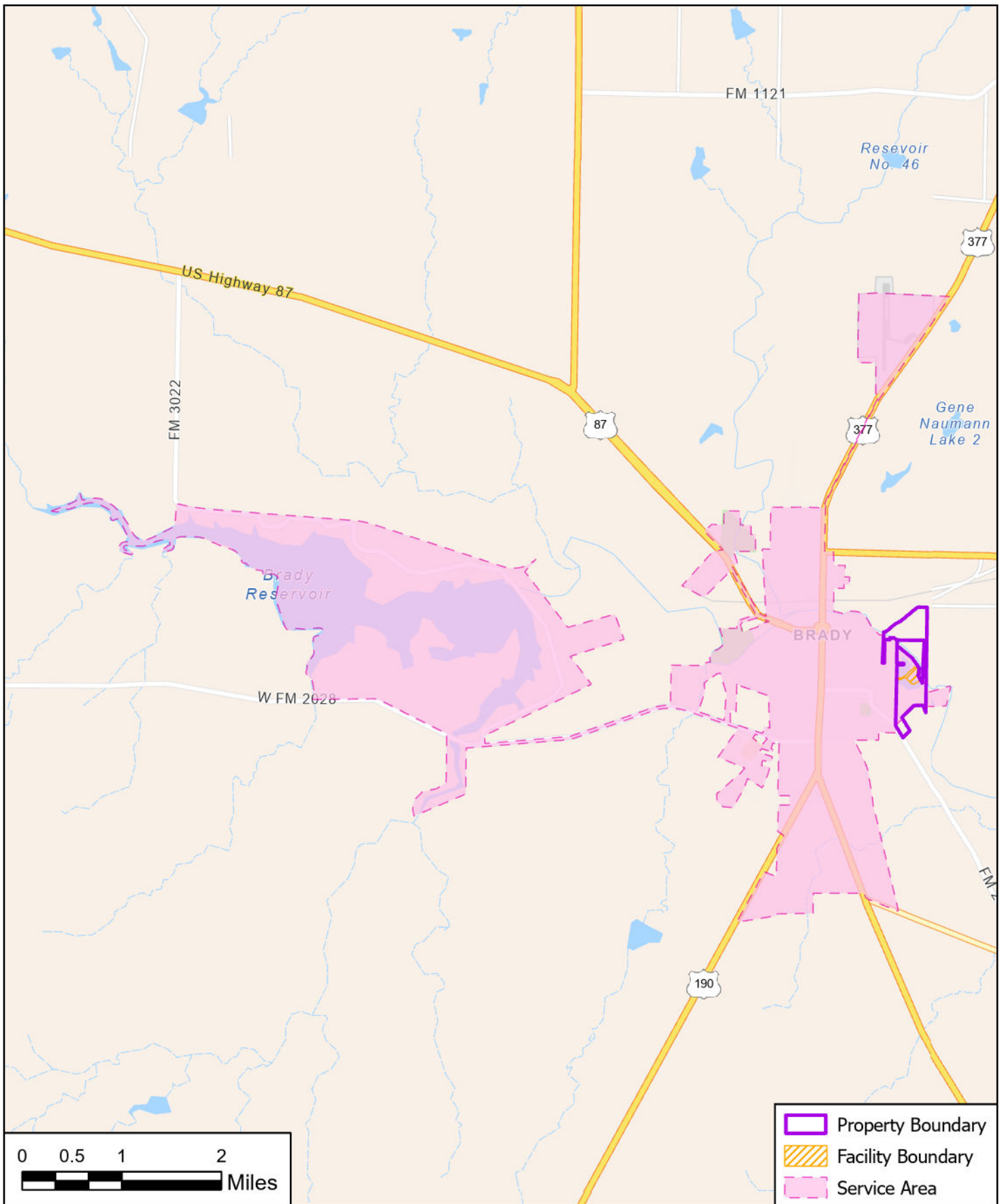
\\KSA-SA-SERVER1\MAIN1\PROJECTS\BRADY\00.07 CAD\02 PROJECT\10 EXHIBITS\NEW WWTP EXHIBITS\FLOW DIAGRAM.DWG EXISTING





# **ATTACHMENT TR-3**

Site Drawing



**FRESE AND NICHOLS**  
 FRESE AND NICHOLS, INC  
 801 Cherry Street, Suite 2800  
 Fort Worth, TX 76102  
 Phone - (817) 735 - 7300



City of Brady

# TPDES Permit Renewal

## Site Drawing

FN JOB NO	BRD24175
FILE NAME	TPDES_Renewal.aprx
DATE	5/6/2024
DESIGNED	CLV
DRAFTED	CLV

**3**

**FIGURE**

# **ATTACHMENT TR-4**

## **TWDB Approvals**

December 30, 2020

Mr. Steven Miller  
Project Manager  
City of Brady  
P.O. Box 351  
Brady, TX 76825

Re: City of Brady  
Wastewater Treatment Plant Replacement  
**TWDB CWSRF Project No. 73638**  
CID 02 (Bid Package No. 1) – Earthwork  
CID 03 (Bid Package No. 2) – Operations/Laboratory Building  
Plans and Technical Specifications Approval

Dear Mr. Miller:

On September 30, 2019, the Texas Water Development Board (TWDB) approved final plans, specifications, and contract documents for the City of Brady's (City) Wastewater Treatment Plant Replacement project. Upon bidding the project, the City received bids over the budgeted construction amount. As a result, the City elected to re-bid the project as three (3) separate bid packages. The project scope was not altered.

Comments on Bid Packages No. 1 and No. 2 were issued by the TWDB August 26, 2020. Revised final plans, specifications, and contract documents for Bid Package No. 1 were received by the TWDB on September 11, 2020 and for Bid Package No. 2 on September 17, 2020.

This project is funded through the Clean Water State Revolving Fund (CWSRF) Loans and Loan Forgiveness L1000011, LF1000019, L1001004, L1001005, LF1001006, and L1001180.

Bid Package No. 1 contract documents, prepared by Freese and Nichols, Inc. and signed by Coby Gee, P.E., consist of 14 sheets of plans and one bound set of contract documents and specifications. The proposed project is identified as CID 02: Bid Package 1 – Earthwork. The work includes:

- Earthwork required to raise the site out of the 100-year floodplain; and
- Reroute of existing 16-inch polyvinyl chloride sewer line and manholes.

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Leading the state's efforts in ensuring a secure water future for Texas and its citizens

**Board Members**

Peter M. Lake, Chairman | Kathleen Jackson, Board Member | Brooke T. Paup, Board Member  
Jeff Walker, Executive Administrator

Bid Package No. 2 contract documents, prepared by Freese and Nichols, Inc. and signed by Coby Gee, P.E., consist of 34 sheets of plans and one bound set of contract documents and specifications. The proposed project is identified as CID 03: Bid Package 2 – Operations/Laboratory Building. The work includes:

- Construction of the operations/laboratory building at the wastewater treatment plant site.

The contract documents have been reviewed and are approved for general conformance with TWDB programmatic requirements and compliance with 30 Texas Administrative Code Chapter 217 (Design Criteria for Domestic Wastewater Systems). Our review of the documents submitted indicates that the project is designed in general compliance with the Texas Commission on Environmental Quality (TCEQ) standards. This approval does not relieve the design engineer of the legal responsibility for the integrity of the design. The materials and methods of construction shall conform to the specifications provided by the project engineer.

We note that in CID 02 (Bid Package No. 1), Bid Item No. 9 is an allowance in the amount of \$20,000 for the purchase and delivery of off-site fill material. It is further noted that prior to final payment, a change order may be issued to reflect actual amounts due to the contractor for work covered by allowances. Funding of those costs is subject to CWSRF program requirements. Therefore, we will need to review and approve supporting documentation as necessary and approve related change order(s) prior to releasing funds for those items.

This letter addresses the approval of plans and specifications, as required for TWDB-funded projects. This approval should not be construed as pre-empting any approval that may be required by other federal, state, or local government authorities, including review for compliance with Americans with Disabilities Act requirements.

Please be reminded that the TWDB may not fund testing, remediation, removal, disposal, or related works for contaminated or potentially contaminated materials. However, the City should ensure that, if found, such materials are tested, removed, and disposed of in accordance with applicable state and federal laws. Also, please be reminded that TWDB funding cannot be used to repave project area streets. Funds may be used for pavement repair of the trench width to the condition it was prior to construction.

Please submit copies of all required bid documentation and any contract addenda for review and approval by the TWDB prior to execution of the contract. Any changes in the location of the project must be accompanied by a map of the proposed location.

Prior to the approval of release of final retainage for the project, the TWDB must have issued a Certificate of Approval (COA). A list of documents needed for issuance of a COA can be found in the Supplemental Contract Conditions for CW & DWSRF document (TWDB-

0550) located on our website

at: <http://www.twdb.texas.gov/financial/instructions/doc/TWDB-0550.pdf>

In order to comply with Federal Emergency Management Agency requirements regarding implementation of the National Flood Insurance Act, National Disaster Protection Act, National Flood Insurance Reform Act, Federal Executive Orders 11988 and 11990, and to comply with related state statutes regarding special flood hazard areas, the City must coordinate in advance with the local floodplain administrator and obtain a floodplain development permit prior to construction, if applicable.

We have retained one (1) set of the approved plans and specifications for our files and are returning one (1) electronically approved plan set and one (1) electronically approved set of contract documents and technical specifications to you for use during construction activities. An approved hard copy of the bound plans and specifications will not be mailed to the City unless requested. If requested, the approved hard copy will be mailed once our COVID-19 response of working remotely has ended.

Please notify Alyssa Azari, Project Reviewer, of any pre-bid, bid opening, or pre-construction meetings. Ms. Azari may be reached at (512) 463-5801 or via email at [alyssa.azari@twdb.texas.gov](mailto:alyssa.azari@twdb.texas.gov).

Please contact Ms. Azari should you have any general project concerns or questions. You may also contact Jesse Milonovich, Team Manager, at (512) 463-8657.

Regards,

Juan Moran-Lopez, P.E.  
Senior Engineer, Team 1 – Panhandle/West Region  
Water Supply and Infrastructure

enclosure:     Approved electronic set of CID-02 plans, contract documents, and technical specifications via download link at: [https://twdb-my.sharepoint.com/:f/g/personal/alyssa\\_azari\\_twdb\\_texas\\_gov/Et\\_RWqrl9tEuX4H-QRedYUBlwK5VOGdx18c3cnmZnwf6Q?e=RYeUgM](https://twdb-my.sharepoint.com/:f/g/personal/alyssa_azari_twdb_texas_gov/Et_RWqrl9tEuX4H-QRedYUBlwK5VOGdx18c3cnmZnwf6Q?e=RYeUgM)  
Approved electronic set of CID-03 plans, contract documents, and technical specifications via download link at: [https://twdb-my.sharepoint.com/:f/g/personal/alyssa\\_azari\\_twdb\\_texas\\_gov/EtrcgHzeMsFAhzL5rgO-naMB1ytsZs7JKiLGBYW2GiklGQ?e=X3Yndm](https://twdb-my.sharepoint.com/:f/g/personal/alyssa_azari_twdb_texas_gov/EtrcgHzeMsFAhzL5rgO-naMB1ytsZs7JKiLGBYW2GiklGQ?e=X3Yndm)

c via email:     Mr. Coby C. Gee, P.E., Freese & Nichols – [coby.gee@freese.com](mailto:coby.gee@freese.com)  
Mr. Louis Herrin, P.E., TCEQ – [louis.herrin@tceq.texas.gov](mailto:louis.herrin@tceq.texas.gov)

April 28, 2021

Mr. Steven Miller  
Project Manager  
City of Brady  
P.O. Box 351  
Brady, TX 76825

Re: City of Brady  
Wastewater Treatment Plant Replacement  
**TWDB CWSRF Project No. 73638**  
CID 04 (Bid Package No. 3) – Wastewater Treatment Plan  
Plans and Technical Specifications Approval

Dear Mr. Miller:

On September 30, 2019, the Texas Water Development Board (TWDB) approved final plans, specifications, and contract documents for the City of Brady's (City) Wastewater Treatment Plant Replacement project. Upon bidding the project, the City received bids over the budgeted construction amount. As a result, the City elected to re-bid the project as three (3) separate bid packages. The project scope was not altered.

Comments on Bid Package No. 3 were issued by the TWDB October 6, 2020 and December 12, 2020. Final revised final plans, specifications, and contract documents were received by the TWDB on January 19, 2020

This project is funded through the Clean Water State Revolving Fund (CWSRF) Loans and Loan Forgiveness L1000011, LF1000019, L1001004, L1001005, LF1001006, and L1001180.

Bid Package No. 3 contract documents, prepared by Freese and Nichols, Inc. and signed by Coby Gee, P.E., consist of 185 sheets of plans and one bound set of contract documents and specifications. The proposed project is identified as CID 04: Bid Package No. 3 – Wastewater Treatment Plant. The work includes:

- Construction of a new 0.6-million-gallons-per-day wastewater treatment plant, including treatment structures, yard piping, and civil site work;
- Construction of an influent lift station;

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**Board Members**

Brooke T. Paup, Chairwoman | Kathleen Jackson, Board Member

Jeff Walker, Executive Administrator

- Construction of plant headworks;
- Construction of aeration basins and an aeration blower;
- Construction of secondary clarifiers and RAS/WAS pump station;
- Construction of a UV disinfection and NPW system;
- Construction of a solids handling system, including a sludge holding tank and screw press area;
- Improvements at the plant electrical building;
- Installation of an influent bar screen; and
- An alternate-bid item to construct an operations/laboratory building

The contract documents have been reviewed and are approved for general conformance with TWDB programmatic requirements and compliance with 30 Texas Administrative Code Chapter 217 (Design Criteria for Domestic Wastewater Systems). Our review of the documents submitted indicates that the project is designed in general compliance with the Texas Commission on Environmental Quality (TCEQ) standards. This approval does not relieve the design engineer of the legal responsibility for the integrity of the design. The materials and methods of construction shall conform to the specifications provided by the project engineer.

We note that in CID 04 (Bid Package No. 3), Bid Item No. 22 is an allowance in the amount of \$150,000 for change orders issued during construction. Funding of those costs is subject to CWSRF program requirements. Therefore, we will need to review and approve supporting documentation as necessary and approve related change order(s) prior to releasing funds for those items.

This letter addresses the approval of plans and specifications, as required for TWDB-funded projects. This approval should not be construed as pre-empting any approval that may be required by other federal, state, or local government authorities, including review for compliance with Americans with Disabilities Act requirements.

Please be reminded that the TWDB may not fund testing, remediation, removal, disposal, or related works for contaminated or potentially contaminated materials. However, the City should ensure that, if found, such materials are tested, removed, and disposed of in accordance with applicable state and federal laws. Also, please be reminded that TWDB funding cannot be used to repave project area streets. Funds may be used for pavement repair of the trench width to the condition it was prior to construction.

Please submit copies of all required bid documentation and any contract addenda for review and approval by the TWDB prior to execution of the contract. Any changes in the location of the project must be accompanied by a map of the proposed location.

Prior to the approval of release of final retainage for the project, the TWDB must have issued a Certificate of Approval (COA).



Mr. Steven Miller  
April 28, 2021  
Page 3

A list of documents needed for issuance of a COA can be found in the Supplemental Contract Conditions for CW & DWSRF document (TWDB-0550) located on our website at: <http://www.twdb.texas.gov/financial/instructions/doc/TWDB-0550.pdf>

In order to comply with Federal Emergency Management Agency requirements regarding implementation of the National Flood Insurance Act, National Disaster Protection Act, National Flood Insurance Reform Act, Federal Executive Orders 11988 and 11990, and to comply with related state statutes regarding special flood hazard areas, the City must coordinate in advance with the local floodplain administrator and obtain a floodplain development permit prior to construction, if applicable.

We have retained one (1) set of the approved plans and specifications for our files and are returning one (1) electronically approved plan set and one (1) electronically approved set of contract documents and technical specifications to you for use during construction activities. An approved hard copy of the bound plans and specifications will not be mailed to the City unless requested. If requested, the approved hard copy will be mailed once our COVID-19 response of working remotely has ended.

Please notify me of any pre-bid, bid opening, pre-construction meetings, or any general project concerns or questions. I may be reached at (512) 463-3511 or via email at [juan.moran-lopez@twdb.texas.gov](mailto:juan.moran-lopez@twdb.texas.gov). You may also contact Jesse Milonovich, Team Manager, at (512) 463-8657.

Regards,

Juan Moran-Lopez, P.E.  
Senior Engineer, Team 1 – Panhandle/West Region  
Water Supply and Infrastructure

JML/mm

enclosure: Approved electronic set of CID-04 plans, contract documents, and technical specifications via download link at:  
[https://twdb-my.sharepoint.com/:f/g/personal/alyssa\\_azari\\_twdb\\_texas\\_gov/ErtRSylomddKiAXipldVbIABe9mVne23JUlu01mnvCdvVg?e=i2i1hZ](https://twdb-my.sharepoint.com/:f/g/personal/alyssa_azari_twdb_texas_gov/ErtRSylomddKiAXipldVbIABe9mVne23JUlu01mnvCdvVg?e=i2i1hZ)

c via email: Mr. Coby C. Gee, P.E., Freese & Nichols – [coby.gee@freese.com](mailto:coby.gee@freese.com)  
Mr. Louis Herrin, P.E., TCEQ – [louis.herrin@tceq.texas.gov](mailto:louis.herrin@tceq.texas.gov)

# **ATTACHMENT TR-5**

## Lab Report



# ENVIRONMENTAL MONITORING LABORATORY, L.L.C

P.O. Box 477  
6145 State Highway 171  
Hillsboro, Texas 76645  
Phone: 254-582-2622

BIOLOGICAL & CHEMICAL ANALYSIS / UTILITIES MANAGEMENT & OPERATION / WATERWELL DRILLING & SERVICE / GEOLOGICAL INVESTIGATION

## ANALYTICAL REPORT 24052134

**For:**

City of Brady  
1311 E. 6th St  
Brady, Texas 76825

**Sample Site:** Renewal Analysis

**Collected Date:** 05/21/24



**Certificate Number:** T104704247-23-25

**Lab Number:** TX01547

Authorized for release by:

29-MAY-24

Lisa Soward, Data Manager

[homeoffice@yourwaterlab.com](mailto:homeoffice@yourwaterlab.com)

The test results in this report meet all 2009 NELAP and 2016 TNI requirements for accredited parameters, exceptions are noted in this report. This report may not be reproduced except in full, and with written approval from the laboratory. For questions please contact the Project Manager at the e-mail address or telephone number listed on this page.

This report has been electronically signed and authorized by the signatory. Electronic signature is intended to be the legally binding equivalent of a traditionally handwritten signature.

Results relate only to the items tested and the sample(s) as received by the laboratory



# ENVIRONMENTAL MONITORING LABORATORY, L.L.C

P.O. Box 477  
6145 State Highway 171  
Hillsboro, Texas 76645  
Phone: 254-582-2622

BIOLOGICAL & CHEMICAL ANALYSIS / UTILITIES MANAGEMENT & OPERATION / WATERWELL DRILLING & SERVICE / GEOLOGICAL INVESTIGATION

## ANALYTICAL RESULTS

Analytical Report: 24052134

Lab ID: 24052134-001

Collected Date: 05/21/24 08:40

Matrix: Waste Water

Client: City of Brady

Received Date: 05/21/24 14:25

Temp at Receipt: 3.2 °C

Sample Site: Renewal Analysis

Report Date: 05/28/24

Sample Collector: DH

Analyte	Abbreviation	Method	TNI Cert	Date Analyzed	Result	Units
Ammonia Nitrogen	NH3N	SM 4500-NH3/D	NP	05/22/24 09:32	0.150	mg/L
Carbonaceous BOD	CBOD	SM 5210/B	NP	05/22/24 08:42	<2	mg/L
Total Suspended Solids	TSS	SM 2540/D	NP/P	05/22/24 11:01	11	mg/L
pH	SM4500-H	SM4500/H	N	05/21/24 08:40	7.1	SU
Nitrate as N	E300.0	E 300.0	NP/P	05/21/24 14:55	<0.400	mg/L
Dissolved Oxygen	DO	SM 4500-O	N	05/21/24 08:40	6.5	mg/L
Total Phosphorus (as P)	T.PHOS.	SM 4500-P/E	NP	05/23/24 11:46	2.62	mg/L
Nitrogen, Total Kjeldahl	TKN	SM 4500-NH3/D	NP	05/22/24 13:26	2.20	mg/L
Total dissolved solids	SM2540C	SM 2540/C	N	05/22/24 14:17	571.0	mg/L
Sulfate	E300.0	E 300.0	NP/P	05/21/24 14:55	63.5	mg/L
Chloride	Cl-	SM 4500-Cl-/B	NP	05/23/24 11:07	89.0	mg/L
Chlorine	SM4500-CL	SM4500-CL	NP	05/21/24 08:40	.02	mg/L
n-Hexane Extractable Material (HEM)	O&G	SM 5520/B	NP	05/22/24 10:08	<7.00	mg/L
Alkalinity, Total (CaCO3)	ALK	SM 2320/B	NP	05/23/24 09:50	348	mg/L
Conductivity @ 25C	Cond	SM 2510/B	NP	05/23/24 09:25	987	umhos/cm
E. coli	E. coli	IDEXX Colilert	NP	05/21/24 14:56	67	MPN/100 mL
Temperature	(water, on site)	(water, on site)	N	05/21/24 08:40	24	°C

P: Potable water      NP: Non Potable water      N: Not Certified

# QUALITY ASSURANCE & QUALITY CONTROL

Control #: 24052134

ANALYTE	ABBR./ ALT.NAME	STANDARD METHOD	UNITS	Quality Control					Q
				S.D.	CV%	REC.1%	REC.2%	MDL/PQL	
Nitrate as N	E300.0	E 300.0	mg/L					0.400 / 0.400	
Sulfate	E300.0	E 300.0	mg/L					1.00 / 1.80	
Alkalinity, Total (CaCO3)	ALK	SM 2320/B	mg/L					1.50 / 5.00	
Chloride	Cl-	SM 4500-Cl-/B	mg/L	2.83	0.57	98	100	1.00 / 3.00	
Ammonia Nitrogen	NH3N	SM 4500-NH3/D	mg/L	0.01	1.09	96.6	98.4	0.0300 / 0.100	
Nitrogen, Total Kjeldahl	TKN	SM 4500-NH3/D	mg/L	0.00	0.00	99.6	99.6	0.0200 / 0.120	
Total Phosphorus (as P)	T.PHOS.	SM 4500-P/E	mg/L	0.06	0.83	93.4	95.2	.02 / .05	
n-Hexane Extractable Material (HEM)	O&G	SM 5520/B	mg/L	0.35	0.34	101.7	100.2	7.00 / 7.00	
Chemical Oxygen Demand	COD	SM 5220/D	mg/L						
Turbidity	TURB.	SM 2130/B	NTUs						
Total Percent Solids	%d.w	SM 2540/G	%						N

<b>Biochemical Oxygen Demand(BOD)</b> <b>Carbonaceous Biochemical Oxygen Demand(CBOD)</b> <b>Method: SM 5210/B</b>			<b>Dissolved Oxygen</b> <b>Method: SM 4500-O*/G</b>			<b>Total Suspended Solids (TSS, MLSS)</b> <b>Method: 2540/D</b>		
<b>Results</b>	<b>Units</b>	<b>Description</b>	<b>Results</b>	<b>Units</b>	<b>Description</b>	<b>Results</b>	<b>Units</b>	<b>Description</b>
0.07	mg/L	Blank 1 - CBOD	8.88	mg/L	Set Up Calibration	0	mg/L	Blank 1
0.1	mg/L	Blank 2 - CBOD	8.88	mg/L	Read Off Calibration	0.3	mg/L	Blank 2
0.09	mg/L	Blank 3 - CBOD	20	°C	Set Up Temperature	0.3	mg/L	Blank 3
			20	°C	Read Off Temperature	0.1	mg/L	Blank 4
195	mg/L	G/GA Std 1 - CBOD	757	mm Hg	Set Up Barometer	0.61	%	Relative % Difference
193	mg/L	G/GA Std 2 - CBOD	756	mm Hg	Read Off Barometer	2.11	%	Relative % Difference
191	mg/L	G/GA Std 3 - CBOD				2.2	%	Relative % Difference
193	mg/L	<b>G/GA Average - CBOD</b>				4.53	%	Relative % Difference
						1.57	%	Relative % Difference
0.7	mg/L	Seed Corr/mL - CBOD				1.73	%	Relative % Difference
0.71	mg/L	Seed Corr/mL - CBOD				1.96	%	Relative % Difference
0.71	mg/L	Seed Corr/mL - CBOD				1.36	%	Relative % Difference
0.71	mg/L	<b>Seed Corr Average - CBOD</b>						
			<b>Fecal Coliform</b> <b>Method: SM9222 /D MF</b>			<b>Conductivity @ 25° C</b> <b>Method: SM2510/B</b> <b>Standards ran for each analytical batch.</b>		
<b>Results</b>	<b>Units</b>	<b>Description</b>	<b>Results</b>	<b>Units</b>	<b>Description</b>	<b>Results</b>	<b>Units</b>	<b>Description</b>
	CFU/100ml	Pre Blank					umhos/cm	Conductivity Standard
	CFU/100ml	Post Blank					umhos/cm	Conductivity Standard
							umhos/cm	Conductivity Standard
			<b>TDS by SM2540/C</b>					
<b>Results</b>	<b>Units</b>	<b>Description</b>						
0	mg/L	Blank						
			<b>E. coli By IDEXX Colilert (enumeration)</b>					
			<b>MPN/100 mL</b>					

Report Out Date: 05/29/2024

*Lisa Soward*

Lisa Soward  
Data Manager

Environmental Monitoring Laboratory • P.O. Box 477 / 6145 State Highway 171, Hillsboro, Texas 76645 • Phone: (254) 582-2622



TCEQ Lab ID: T104704247-23-25

Panhandle Division

13260 South US Hwy 287 Amarillo, Texas 79118

EPA Lab ID: TX01547

East Texas Division

14295 S.H. 155 North Winona, Texas 75792

Office: 903-877-9222 Emergency: 817-357-5535

Southwest Division

811 E. Young Street Llano, Texas 78643

Office: 325-247-3295 Emergency: 830-730-3317

Report To: Marty Martin		Report To: City of Brady		ANALYSES REQUESTED		CL2	
Company: City of Brady		Purchase Order #:		TSS, TDS		PH	
1311 E. 6th Street Brady, TX 76825		Address:		DO		NH <sub>3</sub> N (pH < 2.0, H <sub>2</sub> SO <sub>4</sub> ) SMA4500-NH3 D or G	
Phone: 325-456-3704		Fax:		24052134		unless specified TKN, TOT PHOS	
Project Name: Renewal Analysis		City, State: Brady, TX		FECAL COLIFORM / E.COLI (Sterile)		MLSS	
Project Location: WWTP		Date Due: Rush: 0% 25% 50% 100% Sampler: (Please Print) <i>Dave Hays</i>		ALKALINITY, CHLORIDE, CONDUCT		OIL & GREASE	
Date Due: <i>24052134</i>		Lab#		NITRATE, SULFATE		Sample Remarks	
1. <i>Renewal Analysis</i>	Client Sample ID	Matrix	Date	Time	*Pres. Code	*Bottle Code	
2.		WW	<i>5-24-24</i>	<i>0840</i>	1	1	
3.					2	1	
4.					6	1	
5.					1	1	
6.					2	2	
7.					1	1	
8.							
9.							
10.							
Relinquished By: <i>1. Dave Hays</i>		Date: <i>5/24/24</i>		Time: <i>1425</i>		Date: <i>5/24/24</i>	
2.		3.		4.		COOLER ID: <i>12467</i>	
3.		4.		5.		Ice: <i>ES</i>	
4.		5.		6.		Temperature: <i>3.2</i>	
5.		6.		7.		* Preservation Codes:	
6.		7.		8.		1. None	
7.		8.		9.		2. 15 min	
8.		9.		10.		3. 30 min	
9.		10.		11.		4. 45 min	
10.		11.		12.		5. 1 hr	
11.		12.		13.		6. 2 hr	
12.		13.		14.		7. 4 hr	
13.		14.		15.		8. 8 hr	
14.		15.		16.		9. 16 hr	
15.		16.		17.		10. 24 hr	
16.		17.		18.		11. 48 hr	
17.		18.		19.		12. 72 hr	
18.		19.		20.		13. 96 hr	
19.		20.		21.		14. 120 hr	
20.		21.		22.		15. 144 hr	
21.		22.		23.		16. 168 hr	
22.		23.		24.		17. 192 hr	
23.		24.		25.		18. 216 hr	
24.		25.		26.		19. 240 hr	
25.		26.		27.		20. 264 hr	
26.		27.		28.		21. 288 hr	
27.		28.		29.		22. 312 hr	
28.		29.		30.		23. 336 hr	
29.		30.		31.		24. 360 hr	
30.		31.		32.		25. 384 hr	
31.		32.		33.		26. 408 hr	
32.		33.		34.		27. 432 hr	
33.		34.		35.		28. 456 hr	
34.		35.		36.		29. 480 hr	
35.		36.		37.		30. 504 hr	
36.		37.		38.		31. 528 hr	
37.		38.		39.		32. 552 hr	
38.		39.		40.		33. 576 hr	
39.		40.		41.		34. 600 hr	
40.		41.		42.		35. 624 hr	
41.		42.		43.		36. 648 hr	
42.		43.		44.		37. 672 hr	
43.		44.		45.		38. 696 hr	
44.		45.		46.		39. 720 hr	
45.		46.		47.		40. 744 hr	
46.		47.		48.		41. 768 hr	
47.		48.		49.		42. 792 hr	
48.		49.		50.		43. 816 hr	
49.		50.		51.		44. 840 hr	
50.		51.		52.		45. 864 hr	
51.		52.		53.		46. 888 hr	
52.		53.		54.		47. 912 hr	
53.		54.		55.		48. 936 hr	
54.		55.		56.		49. 960 hr	
55.		56.		57.		50. 984 hr	
56.		57.		58.		51. 1008 hr	
57.		58.		59.		52. 1032 hr	
58.		59.		60.		53. 1056 hr	
59.		60.		61.		54. 1080 hr	
60.		61.		62.		55. 1104 hr	
61.		62.		63.		56. 1128 hr	
62.		63.		64.		57. 1152 hr	
63.		64.		65.		58. 1176 hr	
64.		65.		66.		59. 1200 hr	
65.		66.		67.		60. 1224 hr	
66.		67.		68.		61. 1248 hr	
67.		68.		69.		62. 1272 hr	
68.		69.		70.		63. 1296 hr	
69.		70.		71.		64. 1320 hr	
70.		71.		72.		65. 1344 hr	
71.		72.		73.		66. 1368 hr	
72.		73.		74.		67. 1392 hr	
73.		74.		75.		68. 1416 hr	
74.		75.		76.		69. 1440 hr	
75.		76.		77.		70. 1464 hr	
76.		77.		78.		71. 1488 hr	
77.		78.		79.		72. 1512 hr	
78.		79.		80.		73. 1536 hr	
79.		80.		81.		74. 1560 hr	
80.		81.		82.		75. 1584 hr	
81.		82.		83.		76. 1608 hr	
82.		83.		84.		77. 1632 hr	
83.		84.		85.		78. 1656 hr	
84.		85.		86.		79. 1680 hr	
85.		86.		87.		80. 1704 hr	
86.		87.		88.		81. 1728 hr	
87.		88.		89.		82. 1752 hr	
88.		89.		90.		83. 1776 hr	
89.		90.		91.		84. 1800 hr	
90.		91.		92.		85. 1824 hr	
91.		92.		93.		86. 1848 hr	
92.		93.		94.		87. 1872 hr	
93.		94.		95.		88. 1896 hr	
94.		95.		96.		89. 1920 hr	
95.		96.		97.		90. 1944 hr	
96.		97.		98.		91. 1968 hr	
97.		98.		99.		92. 1992 hr	
98.		99.		100.		93. 2016 hr	
99.		100.		101.		94. 2040 hr	
100.		101.		102.		95. 2064 hr	
101.		102.		103.		96. 2088 hr	
102.		103.		104.		97. 2112 hr	
103.		104.		105.		98. 2136 hr	
104.		105.		106.		99. 2160 hr	
105.		106.		107.		100. 2184 hr	
106.		107.		108.		101. 2208 hr	
107.		108.		109.		102. 2232 hr	
108.		109.		110.		103. 2256 hr	
109.		110.		111.		104. 2280 hr	
110.		111.		112.		105. 2304 hr	
111.		112.		113.		106. 2328 hr	
112.		113.		114.		107. 2352 hr	
113.		114.		115.		108. 2376 hr	
114.		115.		116.		109. 2400 hr	
115.		116.		117.		110. 2424 hr	
116.		117.		118.		111. 2448 hr	
117.		118.		119.		112. 2472 hr	
118.		119.		120.		113. 2496 hr	
119.		120.		121.		114. 2520 hr	
120.		121.		122.		115. 2544 hr	
121.		122.		123.		116. 2568 hr	
122.		123.		124.		117. 2592 hr	
123.		124.		125.		118. 2616 hr	
124.		125.		126.		119. 2640 hr	
125.		126.		127.		120. 2664 hr	
126.		127.		128.		121. 2688 hr	
127.		128.		129.		122. 2712 hr	
128.		129.		130.		123. 2736 hr	
129.		130.		131.		124. 2760 hr	
130.		131.		132.		125. 2784 hr	
131.		132.		133.		126. 2808 hr	
132.		133.		134.		127. 2832 hr	
133.		134.		135.		128. 2856 hr	
134.		135.		136.		129. 2880 hr	
135.		136.		137.		130. 2904 hr	
136.		137.		138.		131. 2928 hr	
137.		138.		139.		132. 2952 hr	
138.		139.		140.		133. 2976 hr	
139.		140.		141.		134. 3000 hr	
140.		141.		142.		135. 3024 hr	
141.		142.		143.		136. 3048 hr	
142.		143.		144.		137. 3072 hr	
143.		144.		145.		138. 3096 hr	
144.		145.		146.		139. 3120 hr	
145.		146.		147.		140. 3144 hr	
146.		147.		148.		141. 3168 hr	
147.		148.		149.		142. 3192 hr	
148.		149.		150.		143. 3216 hr	
149.		150.		151.		144. 3240 hr	
150.		151.		152.		145. 3264 hr	
151.		152.		153.		146. 3288 hr	
152.		153.		154.		147. 3312 hr	
153.		154.		155.		148. 3336 hr	
154.		155.		156.		149. 3360 hr	
155.		156.		157.		150. 3384 hr	
156.		157.		158.		151. 3408 hr	
157.		158.		159.		152. 3432 hr	
158.		159.		160.		153. 3456 hr	
159.		160.		161.		154. 3480 hr	
160.		161.		162.		155. 3504 hr	
161.		162.		163.		156. 3528 hr	
162.		163.		164.		157. 3552 hr	
163.		164.		165.		158. 3576 hr	
164.		165.		166.		159. 3600 hr	
165.		166.		167.		160. 3624 hr	
166.		167.		168.		161. 3648 hr	
167.		168.		169.		162. 3672 hr	
168.		169.		170.		163. 3696 hr	
169.		170.		171.		164. 3720 hr	
170.		171.		172.		165. 3744 hr	
171.		172.		173.		166. 3768 hr	
172.		173.		174.		167. 3792 hr	
173.		174.		175.		168. 3816 hr	
174.		175.		176.		169. 3840 hr	
175.		176.		177.		170. 3864 hr	
176.		177.		178.		171. 3888 hr	
177.		178.		179.		172. 3912 hr	
178.							

## Candice Calhoun

---

**From:** Cassandra Villarreal <Cassandra.Villarreal@freese.com>  
**Sent:** Friday, July 12, 2024 8:52 AM  
**To:** Candice Calhoun  
**Cc:** Steven Miller; Marty Martin  
**Subject:** RE: Application to Renew Permit No. WQ0010132001 - City of Brady; Brady WWTP  
**Attachments:** Brady Renewal Admin Review NOD Letter.pdf

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

**Caution:** This email may contain suspicious content. Please take care when clicking links or opening attachments. When in doubt, contact the TCEQ Help Desk.

Dear Ms. Calhoun,

On behalf of the City of Brady, Freese and Nichols, Inc. has attached a response letter to the TCEQ NOD letter dated July 9, 2024. I have also uploaded a copy of the updated application to TCEQ's FTP Server. Please let me know if you have any questions or require additional information.

Thank you,

**Cassie Villarreal, MS** | Environmental Scientist | Freese and Nichols, Inc. | 817-735-7294 office | 979-220-1610 mobile | [www.freese.com](http://www.freese.com)



---

**From:** Candice Calhoun <Candice.Calhoun@tceq.texas.gov>  
**Sent:** Tuesday, July 9, 2024 4:33 PM  
**To:** Steven Miller <smiller@bradytx.us>  
**Cc:** Cassandra Villarreal <Cassandra.Villarreal@freese.com>  
**Subject:** Application to Renew Permit No. WQ0010132001 - City of Brady; Brady WWTP  
**Importance:** High

You don't often get email from [candice.calhoun@tceq.texas.gov](mailto:candice.calhoun@tceq.texas.gov). [Learn why this is important](#)

This is an email from an EXTERNAL source. DO NOT click links or open attachments without positive sender verification of purpose. Never enter USERNAME, PASSWORD or sensitive information on linked pages from this email. Please report all suspicious messages using the Report Message button in Outlook.

Good afternoon, Mr. Miller,

The attached Notice of Deficiency letter dated **July 9, 2024** requests additional information needed to declare the application administratively complete. Please send complete response by **July 23, 2024**.

Please let me know if you have any questions.

Regards,



July 12, 2024

[www.freese.com](http://www.freese.com)

Candice Calhoun  
Water Quality Division (MC-148)  
Texas Commission on Environmental Quality  
P.O. Box 13087  
Austin, TX 78711-3087

Re: Response to TCEQ Notice of Deficiency  
Application to Renew Wastewater Permit No. WQ0010132001 (RN101613693)  
City of Brady (CN600249866)

Dear Ms. Calhoun:

The City of Brady and Freese and Nichols, Inc. (FNI) received a letter from the Texas Commission on Environmental Quality (TCEQ) dated July 9, 2024, that requested a written response to address the deficiency associated with the application to renew Wastewater Permit No. WQ0010132001. On behalf of the applicant, City of Brady, FNI offers the following responses to the TCEQ NOD.

**1. Core Data Form**

***Section III, Item 23 – the physical address of the regulated entity provided was unable to be verified. Please provide an updated physical address or clarify if you would like to use “located approximately 5,000 feet east of the intersection of US Highway 87 and 7th street”, the description to the physical address that is listed in our current records. Please provide an updated core data form with the updated information.***

- a. An updated Core Data Form with the updated information is included with this correspondence.

**2. Plain Language Summary**

***Please provide an updated PLS in English, to show the correct address matching the response to item 1 of the NOD.***

- a. An updated PLS with the updated information is included with this correspondence.

**3. The following is a portion of the Notice of Receipt of Application and Intent to Obtain a Water Quality Permit which contains information relevant to your application. Please read it carefully and indicate if it contains any errors or omissions. The complete notice will be sent to you once the application is declared administratively complete.**

- a. Please revise the following sentences of the NORI as follows:
  - i. The domestic wastewater treatment facility is located approximately 5,000 feet east of the intersection of US Highway 87 and 6th Street, in Brady, in McCulloch County, Texas 76825.
  - ii. The permit application will be available for viewing and copying at Brady City Hall, ~~Placard at~~ Entrance Way, 201 East Main Street, Brady, in McCulloch County, Texas prior to the date this notice is published in the newspaper.



- iii. Further information may also be obtained from City of Brady at the address stated above or by calling Mr. Steven Miller, P.E., Public Works Director, at 325-597-2244 Extension ~~296~~ 3005.

In addition, Mr. Steven Miller's phone number extension has recently been changed. Attached are the Administrative Report forms to reflect the update. Please feel free to contact Mr. Steven Miller with the City of Brady or me for additional information as necessary.

Sincerely,

A handwritten signature in blue ink, appearing to read 'C Villarreal'.

Cassandra Villarreal, M.S.  
Freese and Nichols, Inc.

cc: Mr. Steven Miller, City of Brady  
Mr. Marty Martin, City of Brady  
File BRD24175

Attachments

## **Updated Core Data Form**



# TCEQ Core Data Form

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

## SECTION I: General Information

<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 600249866		RN 101613693

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (mm/dd/yyyy)		5/6/2024	
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership					
<input 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 Brady					
<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>		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited
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 type="checkbox"/> 0-20 <input checked="" type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>14. Customer Role</b> (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:					
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
<b>15. Mailing Address:</b>	P.O. Box 351				
	City	Brady	State	TX	ZIP 76825 ZIP + 4
<b>16. Country Mailing Information</b> (if outside USA)				<b>17. E-Mail Address</b> (if applicable)	
N/A				smiller@bradytx.us	
<b>18. Telephone Number</b>		<b>19. Extension or Code</b>		<b>20. Fax Number</b> (if applicable)	

## SECTION III: Regulated Entity Information

<b>21. General Regulated Entity Information</b> (If 'New Regulated Entity' is selected, a new permit application is also required.)								
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input checked="" type="checkbox"/> Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
<b>22. Regulated Entity Name</b> (Enter name of the site where the regulated action is taking place.)								
City of Brady Wastewater Treatment Plant								
<b>23. Street Address of the Regulated Entity:</b>  (No PO Boxes)		N/A						
		<b>City</b>	Brady	<b>State</b>	TX	<b>ZIP</b>	76825	<b>ZIP + 4</b>
<b>24. County</b>		McCulloch						

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

<b>25. Description to Physical Location:</b>		Located approximately 5,000 feet east of the intersection of US Highway 87 and 6th Street							
<b>26. Nearest City</b>					<b>State</b>		<b>Nearest ZIP Code</b>		
Brady					TX		76825		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>									
<b>27. Latitude (N) In Decimal:</b>			31.128072			<b>28. Longitude (W) In Decimal:</b>			-99.319986
Degrees	Minutes		Seconds		Degrees	Minutes		Seconds	
31	07		41.06		-99	19		11.95	
<b>29. Primary SIC Code</b> (4 digits)		<b>30. Secondary SIC Code</b> (4 digits)		<b>31. Primary NAICS Code</b> (5 or 6 digits)		<b>32. Secondary NAICS Code</b> (5 or 6 digits)			
4952		N/A		221320		N/A			
<b>33. What is the Primary Business of this entity?</b> (Do not repeat the SIC or NAICS description.)									
Domestic wastewater treatment									
<b>34. Mailing Address:</b>		P.O. Box 351							
		<b>City</b>	Brady	<b>State</b>	TX	<b>ZIP</b>	76825	<b>ZIP + 4</b>	
<b>35. E-Mail Address:</b>		smiller@bradytx.us							
<b>36. Telephone Number</b>			<b>37. Extension or Code</b>			<b>38. Fax Number</b> (if applicable)			
( 325 ) 597-2244			3005			( 325 ) 597-2068			

**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:
	WQ0010132001			

## **SECTION IV: Preparer Information**

<b>40. Name:</b>	Cassandra Villarreal			<b>41. Title:</b>	Environmental Scientist
<b>42. Telephone Number</b>	<b>43. Ext./Code</b>	<b>44. Fax Number</b>	<b>45. E-Mail Address</b>		
( 817 ) 735-7294	N/A	( 817 ) 735-7492	cassandra.villarreal@freese.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>	Freese and Nichols, Inc.		<b>Job Title:</b>	Enviornmental Scientist	
<b>Name (In Print):</b>	Cassandra Villarreal			<b>Phone:</b>	( 817 ) 735- 7294
<b>Signature:</b>				<b>Date:</b>	7/11/2024

## **Updated Plain Language Summary**



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

### PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

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

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

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

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

#### ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS DOMESTIC WASTEWATER/STORMWATER

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

The City of Brady (CN600249866) operates the City of Brady Wastewater Treatment Facility (RN101613693), a continuous flow-activated sludge system. The facility is located approximately 5,000 feet east of the intersection of US Highway 87 and 6th Street, in Brady, McCulloch County, Texas 76825.

This application is for a renewal to discharge treated domestic wastewater at an annual average flow of 0.99 MGD.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD5), total suspended solids (TSS), ammonia nitrogen (NH3-N), and Escherichia coli. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by fine screen, vortex grit

remover, aeration basins, secondary clarifiers, sludge holding tank, sludge screw press, and UV disinfection.



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

### AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES

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

N/A

### INSTRUCTIONS

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

16. Choose the appropriate verb tense to complete the sentence.

17. Enter a description of the wastewater treatment used at your facility. Include a description of each process, starting with initial treatment and finishing with the outfall/point of disposal. Use additional lines for individual discharge types if necessary.

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

## Example

### Individual Industrial Wastewater Application

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

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

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

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

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

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

## **Updated Administrative Report Pages**

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

CN: N/A

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: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

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

### 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 AR-1

## Section 4. Application Contact Information (Instructions Page 27)

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. Last Name, First Name: Miller, Steven  
Title: Public Works Director Credential: P.E.  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 3005) E-mail Address: smiller@bradytx.us  
Check one or both: ☒ Administrative Contact ☒ Technical Contact
- B. Prefix: Ms. Last Name, First Name: Villarreal, Cassandra  
Title: Environmental Scientist Credential: M.S.  
Organization Name: Freese and Nichols, Inc.  
Mailing Address: 801 Cherry St., Suite 2800 City, State, Zip Code: Fort Worth, TX 76102  
Phone No.: 817-735-7294 E-mail Address: cassandra.villarreal@freese.com  
Check one or both: ☒ Administrative Contact ☒ Technical Contact

## Section 5. Permit Contact Information (Instructions Page 27)

Provide the names and contact information for two individuals that can be contacted throughout the permit term.

- A. Prefix: Mr. Last Name, First Name: Miller, Steven  
Title: Public Works Director Credential: P.E.  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 3005) E-mail Address: smiller@bradytx.us

B. Prefix: Mr. Last Name, First Name: Martin, Marty  
Title: Wastewater Superintendent Credential: N/A  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 3005) E-mail Address: mmartin@bradytx.us

## Section 6. Billing Contact Information (Instructions Page 27)

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. Last Name, First Name: Martin, Marty  
Title: Wastewater Superintendent Credential: N/A  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2152 E-mail Address: mmartin@bradytx.us

## Section 7. DMR/MER Contact Information (Instructions Page 27)

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

Prefix: Mr. Last Name, First Name: Martin, Marty  
Title: Wastewater Superintendent Credential: N/A  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2152 E-mail Address: mmartin@bradytx.us

## Section 8. Public Notice Information (Instructions Page 27)

### A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: Miller, Steven  
Title: Public Works Director Credential: P.E.  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 206) E-mail Address: smiller@bradytx.us

**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 permit to be listed in the Notices**

Prefix: Mr.

Last Name, First Name: Miller, Steven

Title: Public Works Director

Credential: P.E.

Organization Name: City of Brady

Mailing Address: P.O. Box 351

City, State, Zip Code: Brady, TX 76825

Phone No.: 325-597-2244 (Ext 3005) E-mail Address: smiller@bradytx.us

**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: Entrance Way

Physical Address of Building: 201 E. Main Street

City: Brady

County: McCulloch

Contact (Last Name, First Name): Miller, Steven

Phone No.: 325-597-2244 Ext.: 3005

**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? N/A

#### F. Plain Language Summary Template

Complete the Plain Language Summary (TCEQ Form 20972) and include as an attachment.

Attachment: AR-2

#### G. 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: N/A

### Section 9. Regulated Entity and Permitted Site Information (Instructions Page 29)

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 101613693

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):

City of Brady Wastewater Treatment Plant

C. Owner of treatment facility: City of Brady

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

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: City of Brady

Mailing Address: P.O. Box 351

City, State, Zip Code: Brady, TX 76825

Phone No.: 325-597-2244 (Ext 3005) E-mail Address: smiller@bradytx.us

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: N/A





# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: City of Brady

PERMIT NUMBER (If new, leave blank): WQ00 10132001

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

**DOMESTIC WASTEWATER PERMIT APPLICATION  
ADMINISTRATIVE REPORT 1.0**

For any questions about this form, please contact the Applications Review and Processing Team at 512-239-4671.

**Section 1. Application Fees (Instructions Page 26)**

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 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 checked="" 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: 153112  
Check/Money Order Amount: \$1,615.00  
Name Printed on Check: City of Brady

EPAY      Voucher Number: N/A

Copy of Payment Voucher enclosed?      Yes ☐

**Section 2. Type of Application (Instructions Page 26)**

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

- ☒ Publicly-Owned Domestic Wastewater  
☐ Privately-Owned Domestic Wastewater  
☐ Conventional Wastewater Treatment

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

- ☒ Active      ☐ Inactive

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

- ☒ TPDES Permit  
☐ TLAP  
☐ TPDES Permit with TLAP component  
☐ Subsurface Area Drip Dispersal System (SADDS)

d. Check the box next to the appropriate application type

- ☐ New  
☐ Major Amendment with Renewal  
☐ Major Amendment without Renewal  
☒ Renewal without changes  
☐ Minor Amendment with Renewal  
☐ Minor Amendment without Renewal  
☐ Minor Modification of permit

e. For amendments or modifications, describe the proposed changes: N/A

f. For existing permits:

Permit Number: WQ00 10132001

EPA I.D. (TPDES only): TX 0034312

Expiration Date: February 10, 2025

### Section 3. Facility Owner (Applicant) and Co-Applcant Information (Instructions Page 26)

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 Brady

*(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: 600249866

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.

Last Name, First Name: Miller, Steven

Title: Public Works Director

Credential: P.E.

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

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

N/A

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

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

CN: N/A

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: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

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

### 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 AR-1

## Section 4. Application Contact Information (Instructions Page 27)

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. Last Name, First Name: Miller, Steven  
Title: Public Works Director Credential: P.E.  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 3005) E-mail Address: smiller@bradytx.us  
Check one or both: ☒ Administrative Contact ☒ Technical Contact
- B. Prefix: Ms. Last Name, First Name: Villarreal, Cassandra  
Title: Environmental Scientist Credential: M.S.  
Organization Name: Freese and Nichols, Inc.  
Mailing Address: 801 Cherry St., Suite 2800 City, State, Zip Code: Fort Worth, TX 76102  
Phone No.: 817-735-7294 E-mail Address: cassandra.villarreal@freese.com  
Check one or both: ☒ Administrative Contact ☒ Technical Contact

## Section 5. Permit Contact Information (Instructions Page 27)

Provide the names and contact information for two individuals that can be contacted throughout the permit term.

- A. Prefix: Mr. Last Name, First Name: Miller, Steven  
Title: Public Works Director Credential: P.E.  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 3005) E-mail Address: smiller@bradytx.us

B. Prefix: Mr. Last Name, First Name: Martin, Marty  
Title: Wastewater Superintendent Credential: N/A  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 3005) E-mail Address: mmartin@bradytx.us

## Section 6. Billing Contact Information (Instructions Page 27)

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. Last Name, First Name: Martin, Marty  
Title: Wastewater Superintendent Credential: N/A  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2152 E-mail Address: mmartin@bradytx.us

## Section 7. DMR/MER Contact Information (Instructions Page 27)

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

Prefix: Mr. Last Name, First Name: Martin, Marty  
Title: Wastewater Superintendent Credential: N/A  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2152 E-mail Address: mmartin@bradytx.us

## Section 8. Public Notice Information (Instructions Page 27)

### A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: Miller, Steven  
Title: Public Works Director Credential: P.E.  
Organization Name: City of Brady  
Mailing Address: P.O. Box 351 City, State, Zip Code: Brady, TX 76825  
Phone No.: 325-597-2244 (Ext 206) E-mail Address: smiller@bradytx.us

**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 permit to be listed in the Notices**

Prefix: Mr.

Last Name, First Name: Miller, Steven

Title: Public Works Director

Credential: P.E.

Organization Name: City of Brady

Mailing Address: P.O. Box 351

City, State, Zip Code: Brady, TX 76825

Phone No.: 325-597-2244 (Ext 3005) E-mail Address: smiller@bradytx.us

**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: Entrance Way

Physical Address of Building: 201 E. Main Street

City: Brady

County: McCulloch

Contact (Last Name, First Name): Miller, Steven

Phone No.: 325-597-2244 Ext.: 3005

**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? N/A

#### F. Plain Language Summary Template

Complete the Plain Language Summary (TCEQ Form 20972) and include as an attachment.

Attachment: AR-2

#### G. 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: N/A

### Section 9. Regulated Entity and Permitted Site Information (Instructions Page 29)

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 101613693

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):

City of Brady Wastewater Treatment Plant

C. Owner of treatment facility: City of Brady

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

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: City of Brady

Mailing Address: P.O. Box 351

City, State, Zip Code: Brady, TX 76825

Phone No.: 325-597-2244 (Ext 3005) E-mail Address: smiller@bradytx.us

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: N/A

E. Owner of effluent disposal site:

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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:** N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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:** N/A

## Section 10. TPDES Discharge Information (Instructions Page 31)

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:

N/A

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:

N/A

City nearest the outfall(s): Brady

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

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:** N/A

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

## Section 11. TLAP Disposal Information (Instructions Page 32)

- 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:

N/A

- B. City nearest the disposal site: N/A

- C. County in which the disposal site is located: N/A

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

N/A

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

## Section 12. Miscellaneous Information (Instructions Page 32)

- 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.

N/A

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: N/A

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

Account number: N/A

Amount past due: N/A

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, please provide the following information:

Enforcement order number: N/A

Amount past due: N/A

### Section 13. Attachments (Instructions Page 33)

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: AR-1 (Core Data Form), AR-2 (Plain Language Summary), AR-3 (USGS Topo)

## Section 14. Signature Page (Instructions Page 34)

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

Permit Number: WQ0010132001

Applicant: City of Brady

Certification:

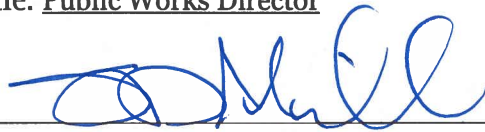
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage 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): Steven Miller, P.E.

Signatory title: Public Works Director

Signature: \_\_\_\_\_



Date: \_\_\_\_\_

5/29/24

(Use blue ink)

Subscribed and Sworn to before me by the said \_\_\_\_\_

Steven Miller

on this \_\_\_\_\_

29<sup>th</sup>

day of \_\_\_\_\_

May

, 2024.

My commission expires on the \_\_\_\_\_

3

day of \_\_\_\_\_

April

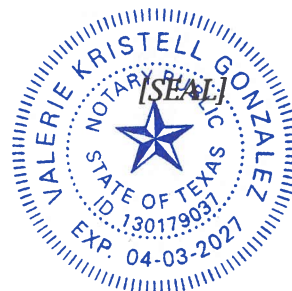
, 2027.

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



McCulloch

County, Texas



# **DOMESTIC WASTEWATER PERMIT APPLICATION**

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

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

**Attachment:** SPIF-1

# DOMESTIC WASTEWATER PERMIT APPLICATION 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) ☒ Yes  
(Required for all application types. Must be completed in its entirety and signed.  
Note: Form may be signed by applicant representative.)

Correct and Current Industrial Wastewater Permit Application Forms ☒ Yes  
(TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or later.)

Water Quality Permit Payment Submittal Form (Page 19) ☒ Yes  
(Original payment sent to TCEQ Revenue Section. See instructions for mailing address.)

7.5 Minute USGS Quadrangle Topographic Map Attached ☒ Yes  
(Full-size map if seeking "New" permit.  
8 ½ x 11 acceptable for Renewals and Amendments)

Current/Non-Expired, Executed Lease Agreement or Easement ☒ N/A ☐ Yes

Landowners Map ☒ N/A ☐ Yes  
(See instructions for landowner requirements)

## Things to Know:

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

Landowners Cross Reference List ☒ N/A ☐ Yes  
(See instructions for landowner requirements)

Landowners Labels or USB Drive attached ☒ N/A ☐ Yes  
(See instructions for landowner requirements)

Original signature per 30 TAC § 305.44 - Blue Ink Preferred ☒ Yes  
(If signature page is not signed by an elected official or principle executive officer,  
a copy of signature authority/delegation letter must be attached)

Plain Language Summary ☒ Yes



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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For any questions about this form, please contact the Domestic Wastewater Permitting Team at 512-239-4671.

The following information is required for all renewal, new, and amendment applications.

### Section 1. Permitted or Proposed Flows (Instructions Page 43)

#### A. Existing/Interim I Phase

Design Flow (MGD): 1.103

2-Hr Peak Flow (MGD): 2.75

Estimated construction start date: 1963

Estimated waste disposal start date: 1963

#### B. Interim II Phase

Design Flow (MGD): 0.60

2-Hr Peak Flow (MGD): 2.4

Estimated construction start date: 2019

Estimated waste disposal start date: 2024

#### C. Final Phase

Design Flow (MGD): 0.99

2-Hr Peak Flow (MGD): 2.75

Estimated construction start date: 2019

Estimated waste disposal start date: TBD

#### D. Current Operating Phase

Provide the startup date of the facility: Interim II startup is anticipated for July/August 2024. Currently in Interim I until Interim II startup.

### Section 2. Treatment Process (Instructions Page 43)

#### A. Current Operating Phase

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, a description of *each phase* must be provided.**

**Interim I:** Influent is sent through a manual bar screen and an aerated grit chamber, then is pumped via pump station to a carousel aeration (mechanical type) basin, two (2) final clarifiers, and a chlorine contact basin for disinfection. The existing sludge handling facilities include a sludge thickener, aerated sludge holding tank, and sludge drying beds.

**Interim II:** The facility is a continuous flow-activated sludge system. The treatment process includes an influent lift station to collect and pump influent through a fine screen and grit removal units, through aeration basins and secondary clarifiers before final disinfection via an ultraviolet (UV) disinfection system. For sludge handling, the plant includes a sludge dewatering screw press and a sludge holding tank.

## B. Treatment Units

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

**Table 1.0(1) - Treatment Units**

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
TR-1		

## C. Process Flow Diagram

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

Attachment: **TR-2**

# Section 3. Site Information and Drawing (Instructions Page 44)

Provide the TPDES discharge outfall latitude and longitude. Enter N/A if not applicable.

- Latitude: 31.128829
- Longitude: -99.318509

Provide the TLAP disposal site latitude and longitude. Enter N/A if not applicable.

- Latitude: N/A
- Longitude: N/A

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: **TR-3**

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

Brady city limits

Collection System Information **for wastewater TPDES permits only**: Provide information for each **uniquely owned** collection system, existing and new, served by this facility, including satellite collection systems. **Please see the instructions for a detailed explanation and examples.**

#### Collection System Information

Collection System Name	Owner Name	Owner Type	Population Served
Brady Wastewater Treatment Plant	City of Brady	Publicly Owned	5,005

### Section 4. Unbuilt Phases (Instructions Page 45)

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.**

N/A

### Section 5. Closure Plans (Instructions Page 45)

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.



A closure plan will be prepared once it is determined which units will be kept for emergency storage and which will be closed permanently. The old plant is still in operation until summer 2024.

## Section 6. Permit Specific Requirements (Instructions Page 45)

**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: September 30, 2019, TWDB approved final plans, specifications, and contract documents for Interim II Phase.

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

The new treatment facilities are funded through TWDB, and copies of the approvals were also submitted to TCEQ. Approvals from TWDB are found in Attachment TR-3.

### 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.

N/A

### 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*.

A summary transmittal letter for the construction of Interim II phase and Notification of Completion forms was submitted to TCEQ and TWDB. Final plans, specifications, and contract documents were approved by TWDB on September 30, 2019. See Attachment TR-4 for additional details.

A closure plan for the Interim I facility shall be submitted at least 90 days prior to conducting such activity.

#### 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.

N/A

##### 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 512-239-2335. 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.

N/A

#### 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 512-239-2335.

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

N/A

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

N/A

#### 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.

N/A

**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.

N/A

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.

N/A

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, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions.  
N/A

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

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

Does or will the facility 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 the plant started 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.

N/A

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 the date the plant started 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.

N/A

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 or will the facility 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.

N/A

## Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 50)

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). Provide copies of the laboratory results sheets. **These tables are not applicable for a minor amendment without renewal.** See the instructions for guidance.

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	<2	<2	1	GRAB	5/21/24 8:40
Total Suspended Solids, mg/l	11	11	1	GRAB	5/21/24 8:40
Ammonia Nitrogen, mg/l	0.15	0.15	1	GRAB	5/21/24 8:40
Nitrate Nitrogen, mg/l	<0.40	<0.40	1	GRAB	5/21/24 8:40
Total Kjeldahl Nitrogen, mg/l	2.20	2.20	1	GRAB	5/21/24 8:40
Sulfate, mg/l	63.5	63.5	1	GRAB	5/21/24 8:40
Chloride, mg/l	89	89	1	GRAB	5/21/24 8:40
Total Phosphorus, mg/l	2.62	2.62	1	GRAB	5/21/24 8:40
pH, standard units	7.1	7.1	1	GRAB	5/21/24 8:40
Dissolved Oxygen*, mg/l	6.5	6.5	1	GRAB	5/21/24 8:40

Chlorine Residual, mg/l	0.02	0.02	1	GRAB	5/21/24 8:40
<i>E.coli</i> (CFU/100ml) freshwater	67	67	1	GRAB	5/21/24 8:40
Enterococci (CFU/100ml) saltwater	N/A	N/A	1	GRAB	5/21/24 8:40
Total Dissolved Solids, mg/l	571	571	1	GRAB	5/21/24 8:40
Electrical Conductivity, $\mu$ mohs/cm, †	987	987	1	GRAB	5/21/24 8:40
Oil & Grease, mg/l	<7	<7	1	GRAB	5/21/24 8:40
Alkalinity (CaCO <sub>3</sub> )*, mg/l	348	348	1	GRAB	5/21/24 8:40

\*TPDES permits only

†TLAP permits only

**Table1.0(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					
Total Dissolved Solids, mg/l					
pH, standard units					
Fluoride, mg/l					
Aluminum, mg/l					
Alkalinity (CaCO <sub>3</sub> ), mg/l					

## Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: Marty Martin

Facility Operator's License Classification and Level: Wastewater Treatment Operator B

Facility Operator's License Number: WW0012480

## Section 9. Sludge and Biosolids Management and Disposal (Instructions Page 51)

### A. WWTP's Biosolids Management Facility Type

Check all that apply. See instructions for guidance

- ☐ Design flow  $\geq$  1 MGD
- ☐ Serves  $\geq$  10,000 people
- ☐ Class I Sludge Management Facility (per 40 CFR § 503.9)
- ☐ Biosolids generator
- ☐ Biosolids end user – land application (onsite)
- ☐ Biosolids end user – surface disposal (onsite)
- ☐ Biosolids end user – incinerator (onsite)

## B. WWTP's Biosolids Treatment Process

Check all that apply. See instructions for guidance.

- ☐ Aerobic Digestion
- ☐ Air Drying (or sludge drying beds)
- ☐ Lower Temperature Composting
- ☐ Lime Stabilization
- ☐ Higher Temperature Composting
- ☐ Heat Drying
- ☐ Thermophilic Aerobic Digestion
- ☐ Beta Ray Irradiation
- ☐ Gamma Ray Irradiation
- ☐ Pasteurization
- ☐ Preliminary Operation (e.g. grinding, de-gritting, blending)
- ☐ Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)
- ☐ Sludge Lagoon
- ☐ Temporary Storage (< 2 years)
- ☐ Long Term Storage (>= 2 years)
- ☐ Methane or Biogas Recovery
- ☒ Other Treatment Process: Sludge holding (partial stabilization and dewatering)

## C. Biosolids Management

Provide information on the *intended* biosolids management practice. Do not enter every management practice that you want authorized in the permit, as the permit will authorize all biosolids management practices listed in the instructions. Rather indicate the management practice the facility plans to use.

### Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	On-Site Owner or Operator	Not Applicable	112.64 (2022)	Class B: PSRP Aerobic Digestion	Option 11: Biosolids covered at end of each day

If "Other" is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): N/A



#### D. Disposal site

Disposal site name: City of Brady Landfill

TCEQ permit or registration number: MSW 1732

County where disposal site is located: McCulloch

#### E. Transportation method

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

Name of the hauler: City of Brady

Hauler registration number: 22753

Sludge is transported as a:

Liquid ☐

semi-liquid ☐

semi-solid ☐

solid ☒

### Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 53)

#### 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 53)

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:** N/A
- USDA Natural Resources Conservation Service Soil Map:  
**Attachment:** N/A
- Federal Emergency Management Map:  
**Attachment:** N/A
- Site map:  
**Attachment:** N/A

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:** N/A

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:

N/A

### 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: N/A

Total Kjeldahl Nitrogen, mg/kg: N/A

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: N/A

Phosphorus, mg/kg: N/A  
Potassium, mg/kg: N/A  
pH, standard units: N/A  
Ammonia Nitrogen mg/kg: N/A  
Arsenic: N/A  
Cadmium: N/A  
Chromium: N/A  
Copper: N/A  
Lead: N/A  
Mercury: N/A  
Molybdenum: N/A  
Nickel: N/A  
Selenium: N/A  
Zinc: N/A  
Total PCBs: N/A

Provide the following information:

Volume and frequency of sludge to the lagoon(s): N/A  
Total dry tons stored in the lagoons(s) per 365-day period: N/A  
Total dry tons stored in the lagoons(s) over the life of the unit: N/A

### 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.

N/A

### D. Site development plan

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

N/A

Attach the following documents to the application.

- Plan view and cross-section of the sludge lagoon(s)

**Attachment:** N/A

- Copy of the closure plan

**Attachment:** N/A

- Copy of deed recordation for the site

**Attachment:** N/A

- Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons

**Attachment:** N/A

- Description of the method of controlling infiltration of groundwater and surface water from entering the site

**Attachment:** N/A

- Procedures to prevent the occurrence of nuisance conditions

**Attachment:** N/A

#### **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:** N/A

## **Section 12. Authorizations/Compliance/Enforcement (Instructions Page 55)**

#### **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:

N/A

**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:

N/A

**Section 13. RCRA/CERCLA Wastes (Instructions Page 55)**

**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:** N/A

## Section 14. Laboratory Accreditation (Instructions Page 56)

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:

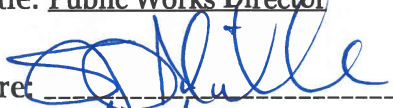
I certify that all laboratory tests submitted with this application meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*.

Printed Name: Steven Miller

Title: Public Works Director

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

  
5/29/24

# DOMESTIC WASTEWATER PERMIT APPLICATION

## WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

### Section 1. Domestic Drinking Water Supply (Instructions Page 64)

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 **no**, proceed to Section 2. If **yes**, provide the following:

Owner of the drinking water supply: N/A

Distance and direction to the intake: N/A

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

Attachment: N/A

### Section 2. Discharge into Tidally Affected Waters (Instructions Page 64)

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

If **no**, proceed to Section 3. 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: N/A

#### 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).

N/A

#### 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).

N/A

### Section 3. Classified Segments (Instructions Page 64)

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 65)

Name of the immediate receiving waters: Brady 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: N/A

Average depth of the entire water body, in feet: N/A

Average depth of water body within a 500-foot radius of discharge point, in feet: N/A

☐ Man-made Channel or Ditch

☐ Open Bay

☐ Tidal Stream, Bayou, or Marsh

☐ Other, specify: N/A

#### 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: Texas Surface Water Quality Standards



### C. Downstream perennial confluences

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

No perennial streams join Brady Creek within 3 miles downstream of the discharge point.

### D. Downstream characteristics

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

☒ Yes ☐ No

If yes, discuss how.

A man-made dam is located approximately 150 feet downstream of the discharge point.

### E. Normal dry weather characteristics

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

The concrete outfall structure cascades down a concrete pad before entering the creek. The outfall and creek at the discharge point are surrounded by dense vegetation.

Date and time of observation: 5/23/2024 @ 13:53

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☒ No

## Section 5. General Characteristics of the Waterbody (Instructions Page 66)

### 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 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: <u>N/A</u>  |

## B. Waterbody uses

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

- |  |  |
|--|--|
| <input checked="" 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 type="checkbox"/> Other(s), specify: <u>N/A</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 WASTEWATER PERMIT APPLICATION

## WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works.

### Section 1. All POTWs (Instructions Page 89)

#### A. Industrial users (IUs)

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 (zero)

Average Daily Flows, in MGD: 0 (zero)

Significant IUs - non-categorical:

Number of IUs: 0 (zero)

Average Daily Flows, in MGD: 0 (zero)

Other IUs:

Number of IUs: 0 (zero)

Average Daily Flows, in MGD: 0 (zero)

#### 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.

N/A

### 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.

N/A

### 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.

### E. Service Area Map

Attach a map indicating the service area of the POTW. The map should include the applicant's service area boundaries and the location of any known industrial users discharging to the POTW. Please see the instructions for guidance.

Attachment: **TR-2**

## Section 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 90)

### 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.

N/A

**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.

N/A

**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.

N/A

### Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 90)

#### A. General information

Company Name: N/A

SIC Code: N/A

Contact name: N/A

Address: N/A

City, State, and Zip Code: N/A

Telephone number: N/A

Email address: N/A

#### 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).

N/A

#### C. Product and service information

Provide a description of the principal product(s) or services performed.

N/A

#### D. Flow rate information

See the Instructions for definitions of “process” and “non-process wastewater.”

Process Wastewater:

Discharge, in gallons/day: N/A

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: N/A

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: Subcategories: Click to enter text.

Click or tap here to enter text. Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click 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.

N/A

# **ATTACHMENT AR-1**

## Core Data Form





# TCEQ Core Data Form

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

## SECTION I: General Information

<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 600249866		RN 101613693

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (mm/dd/yyyy)		5/6/2024	
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership					
<input 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 Brady					
<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>		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited
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 type="checkbox"/> 0-20 <input checked="" type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>14. Customer Role</b> (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:					
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
<b>15. Mailing Address:</b>	P.O. Box 351				
	City	Brady	State	TX	ZIP 76825 ZIP + 4
<b>16. Country Mailing Information</b> (if outside USA)				<b>17. E-Mail Address</b> (if applicable)	
N/A				smiller@bradytx.us	
<b>18. Telephone Number</b>			<b>19. Extension or Code</b>		<b>20. Fax Number</b> (if applicable)

## SECTION III: Regulated Entity Information

<b>21. General Regulated Entity Information</b> (If 'New Regulated Entity' is selected, a new permit application is also required.)								
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input checked="" type="checkbox"/> Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
<b>22. Regulated Entity Name</b> (Enter name of the site where the regulated action is taking place.)								
City of Brady Wastewater Treatment Plant								
<b>23. Street Address of the Regulated Entity:</b>  (No PO Boxes)	N/A							
	<b>City</b>	Brady	<b>State</b>	TX	<b>ZIP</b>	76825	<b>ZIP + 4</b>	
<b>24. County</b>	McCulloch							

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

<b>25. Description to Physical Location:</b>	Located approximately 5,000 feet east of the intersection of US Highway 87 and 6th Street							
<b>26. Nearest City</b>					<b>State</b>	<b>Nearest ZIP Code</b>		
Brady					TX	76825		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
<b>27. Latitude (N) In Decimal:</b>		31.128072			<b>28. Longitude (W) In Decimal:</b>		-99.319986	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
31	07	41.06	-99	19	11.95			
<b>29. Primary SIC Code</b> (4 digits)		<b>30. Secondary SIC Code</b> (4 digits)		<b>31. Primary NAICS Code</b> (5 or 6 digits)		<b>32. Secondary NAICS Code</b> (5 or 6 digits)		
4952		N/A		221320		N/A		
<b>33. What is the Primary Business of this entity?</b> (Do not repeat the SIC or NAICS description.)								
Domestic wastewater treatment								
<b>34. Mailing Address:</b>	P.O. Box 351							
	<b>City</b>	Brady	<b>State</b>	TX	<b>ZIP</b>	76825	<b>ZIP + 4</b>	
<b>35. E-Mail Address:</b>		smiller@bradytx.us						
<b>36. Telephone Number</b>			<b>37. Extension or Code</b>			<b>38. Fax Number</b> (if applicable)		
( 325 ) 597-2244			3005			( 325 ) 597-2068		

**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:
	WQ0010132001			

## **SECTION IV: Preparer Information**

<b>40. Name:</b>	Cassandra Villarreal			<b>41. Title:</b>	Environmental Scientist
<b>42. Telephone Number</b>	<b>43. Ext./Code</b>	<b>44. Fax Number</b>	<b>45. E-Mail Address</b>		
( 817 ) 735-7294	N/A	( 817 ) 735-7492	cassandra.villarreal@freese.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>	Freese and Nichols, Inc.		<b>Job Title:</b>	Enviornmental Scientist	
<b>Name (In Print):</b>	Cassandra Villarreal			<b>Phone:</b>	( 817 ) 735- 7294
<b>Signature:</b>				<b>Date:</b>	7/11/2024

## **ATTACHMENT AR-2**

### Plain Language Summary



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

### PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

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

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

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

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

#### ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS DOMESTIC WASTEWATER/STORMWATER

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

The City of Brady (CN600249866) operates the City of Brady Wastewater Treatment Facility (RN101613693), a continuous flow-activated sludge system. The facility is located approximately 5,000 feet east of the intersection of US Highway 87 and 6th Street, in Brady, McCulloch County, Texas 76825.

This application is for a renewal to discharge treated domestic wastewater at an annual average flow of 0.99 MGD.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD5), total suspended solids (TSS), ammonia nitrogen (NH3-N), and Escherichia coli. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by fine screen, vortex grit

remover, aeration basins, secondary clarifiers, sludge holding tank, sludge screw press, and UV disinfection.

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

### AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES

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

N/A

### INSTRUCTIONS

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

16. Choose the appropriate verb tense to complete the sentence.

17. Enter a description of the wastewater treatment used at your facility. Include a description of each process, starting with initial treatment and finishing with the outfall/point of disposal. Use additional lines for individual discharge types if necessary.

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



## Example

### Individual Industrial Wastewater Application

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

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

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

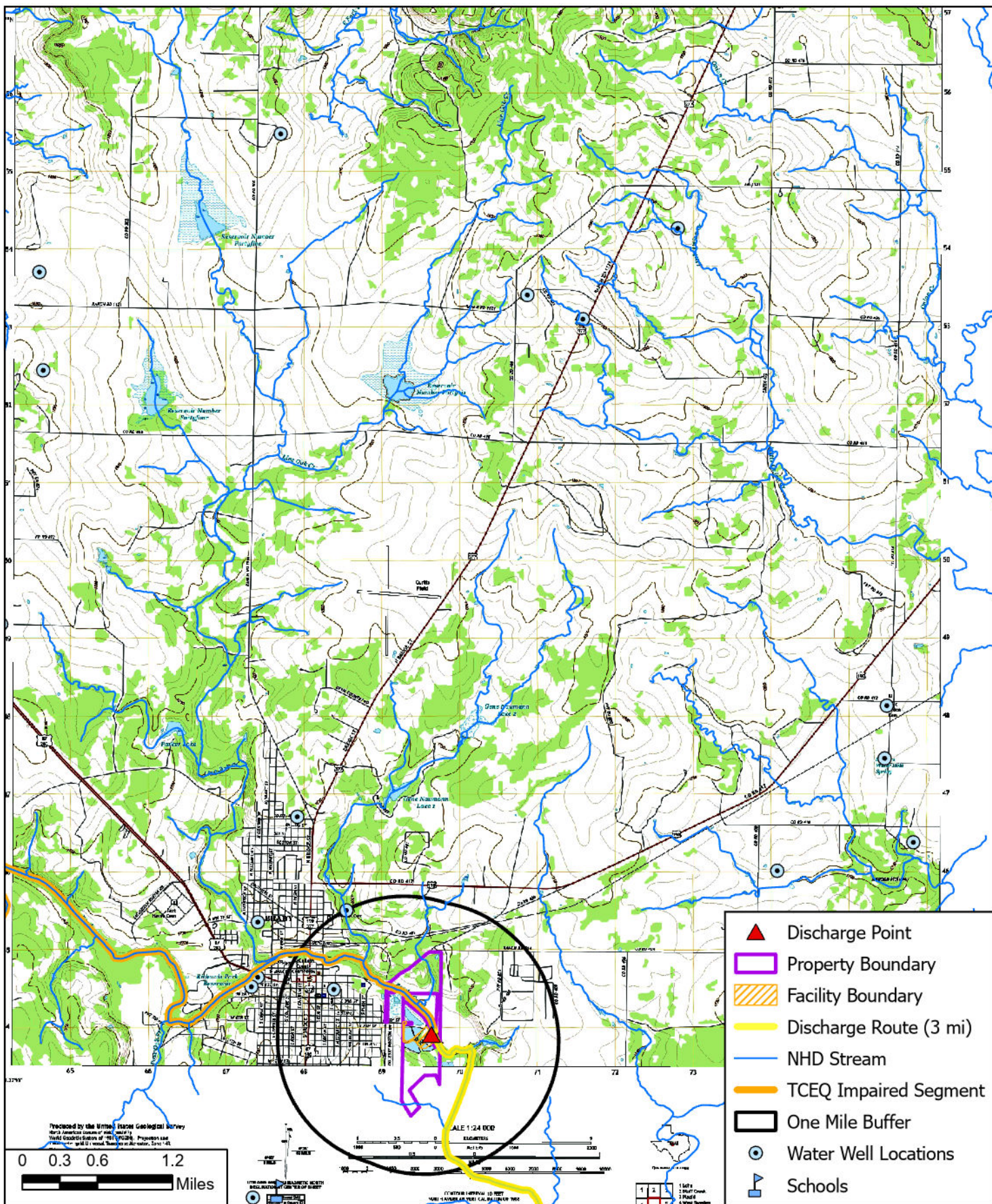
The discharge of once through cooling water via Outfall 001 and low-volume waste and metal-cleaning waste via Outfall 101 from this facility is subject to federal effluent limitation guidelines at 40 CFR Part 423. The pollutants expected from these discharges based on 40 CFR Part 423 are: free available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

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

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

**ATTACHMENT AR-3**  
USGS Topographic Maps





**FREESE AND NICHOLS**  
 FREESE AND NICHOLS, INC.  
 801 Cherry Street, Suite 2800  
 Fort Worth, TX 76102  
 Phone - (817) 735 - 7300



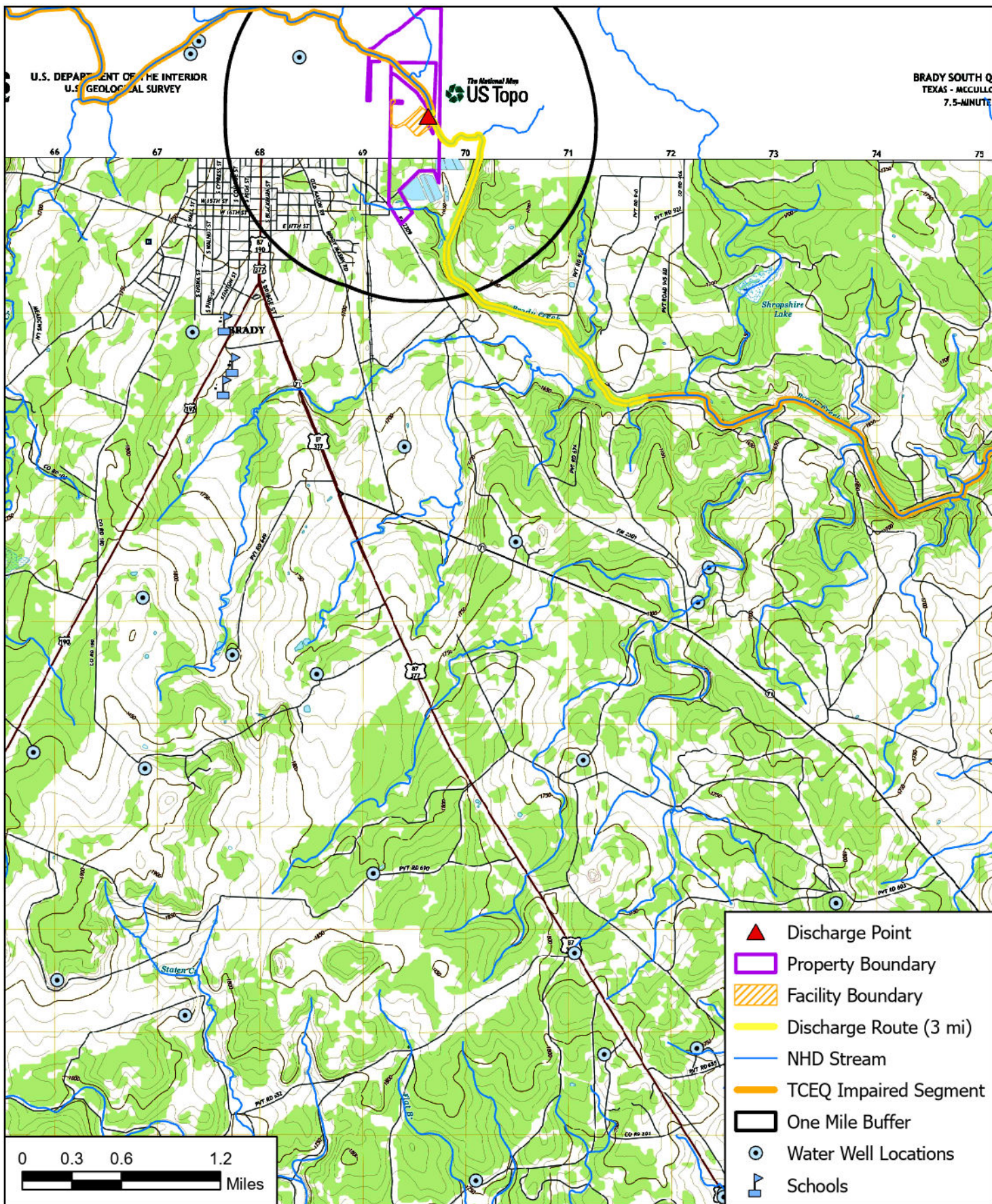
City of Brady  
**TPDES Permit Renewal**  
**USGS Topographic Map**  
 Quad Name: Brady North

FN JOB NO	BRD24175
FILE NAME	TPDES_Renewal.aprx
DATE	5/6/2024
DESIGNED	CLV
DRAFTED	CLV

**1a**

**FIGURE**





<p><b>FREES AND NICHOLS, INC.</b> 801 Cherry Street, Suite 2800 Fort Worth, TX 76102 Phone - (817) 735 - 7300</p>		City of Brady		FN JOB NO	BRD24175	<b>1b</b>  <b>FIGURE</b>
		TPDES Permit Renewal		FILE NAME	TPDES_Renewal.aprx	
		USGS Topographic Map		DATE	5/6/2024	
		Quad Name: Brady South		DESIGNED	CLV	
				DRAFTED	CLV	



**ATTACHMENT SPIF-1**

SPIF

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

#### TCEQ USE ONLY:

Application type: \_\_\_\_Renewal \_\_\_\_Major Amendment \_\_\_\_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)

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

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

The following applies to all applications:

1. Permittee: City of Brady

Permit No. WQ00 10132001

EPA ID No. TX 0034312

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

1311 East 6th Street

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

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

First and Last Name: Steven Miller

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

Title: Public Works Director

Mailing Address: P.O. Box 351

City, State, Zip Code: Brady, TX 76825

Phone No.: 325-597-2244 Ext.: 206 Fax No.: 325-597-2068

E-mail Address: smiller@bradytx.us

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

N/A

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

Brady Creek thence to San Saba River, Segment No. 1416 of the Colorado 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

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

N/A

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

The site is currently used for wastewater treatment units or covered with native vegetation.

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

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

N/A

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

N/A



## **ATTACHMENT SPIF-2**

SPIF USGS Topographic Map



# **ATTACHMENT TR-1**

## Treatment Units

## Section 2.B Treatment Units

### Interim I Phase Plant

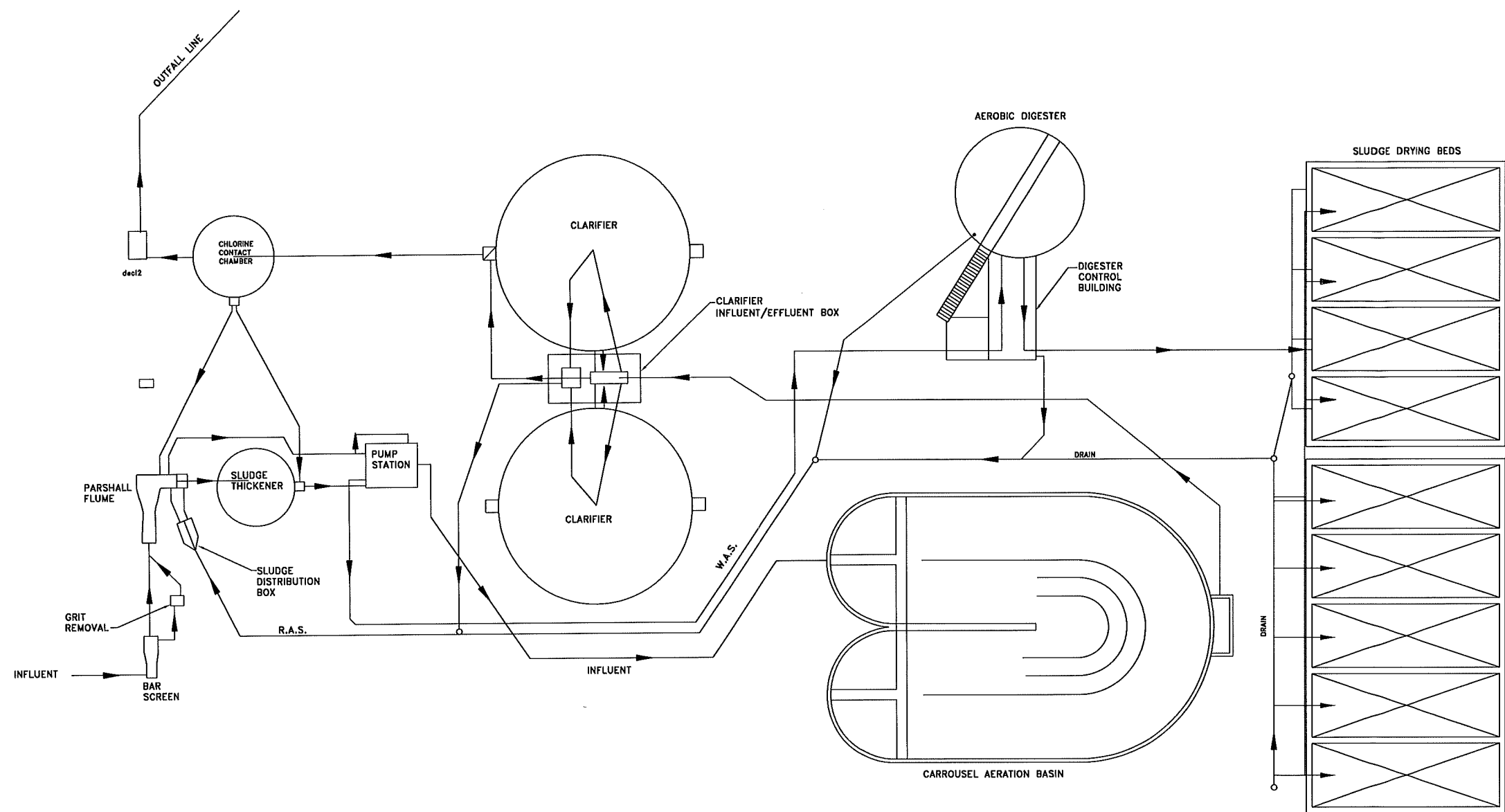
Treatment Units	Number of Units	Dimensions (LxWxD)
Headworks (Bar Screen & Grit Removal)	1	15' x 17' x 10.5'
Carrousel Aeration Basin	1	108" x 93" x 13'
Clarifiers	2	60' diameter x 7' deep
Chlorine Contact Chamber	1	40' diameter x 12' 4" deep
Sludge Thickener	1	40' diameter x 13' 1" deep
Sludge Drying Beds	9	6' 7.75" x 21' x 1'
Aerobic Digester	1	40' diameter x 20' deep

### Interim II and Final Phase Plant

Treatment Units	Number of Units	Dimensions (LxWxD)
Fine Screen	1	27' x 10' x 7'
Vortex Grit Remover	1	25' x 14' x 13.5'
Aeration Basins	2	95' x 60' x 19.5'
Secondary Clarifiers	2	50' diameter x 17.5'
UV Disinfection	1	66' x 6' x 8.5'
Sludge Holding Tank	1	30' diameter x 13.62'
Sludge Screw Press	1	45' x 40' x 2'

# **ATTACHMENT TR-2**

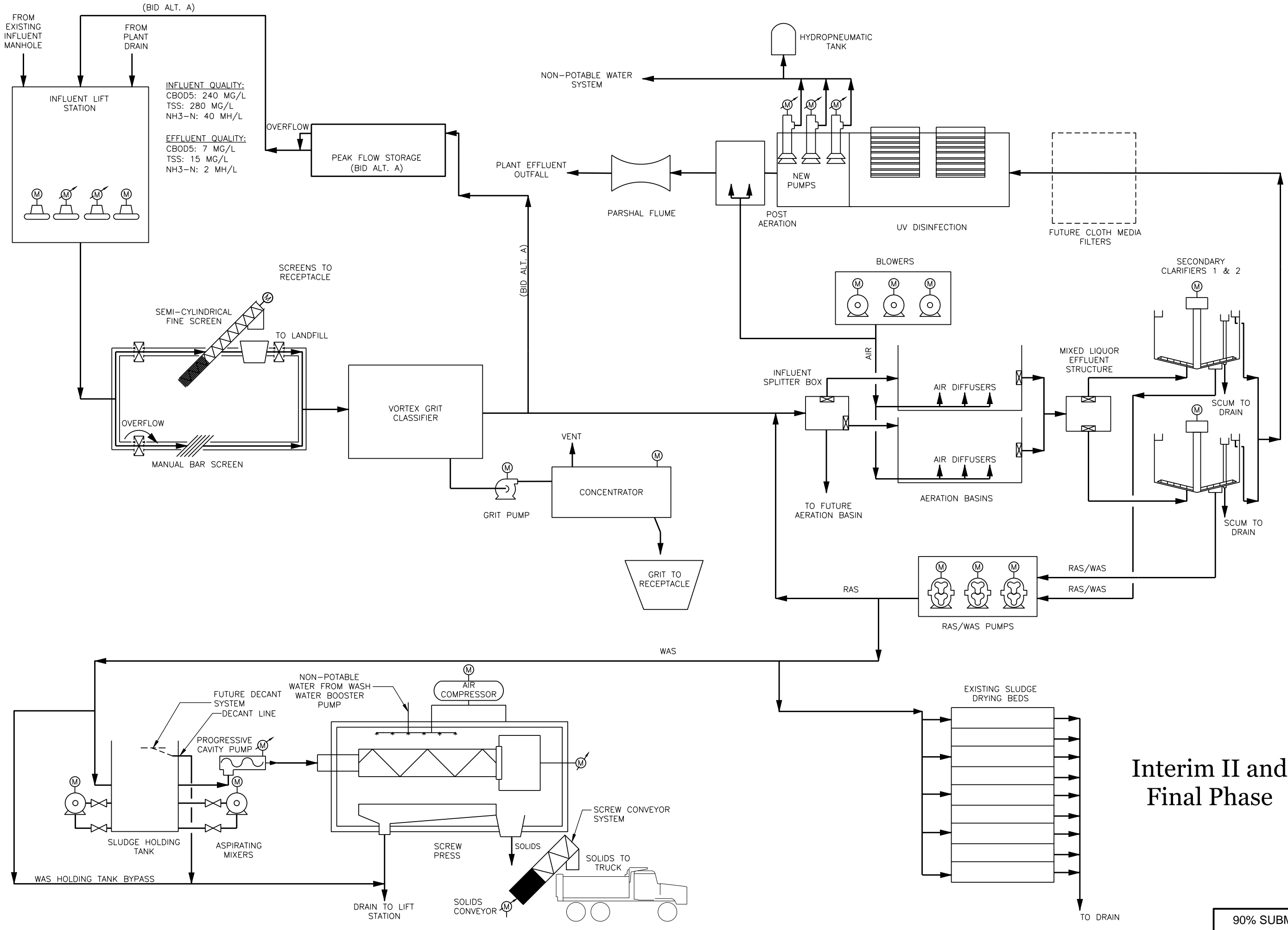
## Process Flow Diagrams



Interim I Phase

<b>KSA ENGINEERS</b> THIS DOCUMENT IS INCOMPLETE AND IS RELEASED TEMPORARILY FOR INTERIM REVIEW ONLY. IT IS NOT INTENDED FOR CONSTRUCTION, BIDDING, OR PERMIT PURPOSES. JASON HENRY P.E. SERIAL NO. 115726 DATE: FEBRUARY 2014 SEAL: EXHIBIT NO. _____ EXHIBIT _____ OF _____		DRAWN BY: JNH DESIGNED BY: - LATEST REVISION: 2/4/2014 KSA JOB NO.: BPA.037 PROJECT NAME: CITY OF BRADY WASTEWATER TREATMENT PLANT PERMIT RENEWAL SHEET NAME: FLOW DIAGRAM VERT. SCALE: NTS HORZ. SCALE: NTS PLOT SCALE: NTS DRAWING NAME: NTS MARK: _____ REVISION: _____ DATE: _____
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ACAD: Rel: 21.0s (LMS Tech)  
Filename: N:\PI\PI-BRD-DG-PROC01.dwg  
Last Saved: 1/2/2019 2:03 PM  
Plot Date: 1/2/2019 2:11 PM  
Plot By: 90119  
Filename: N:\PI\PI-BRD-DG-PROC01.dwg



Freese and Nichols, Inc.  
Texas Registered Engineering Firm F-2144

**NOT FOR CONSTRUCTION**  
THIS DOCUMENT IS RELEASED FOR THE  
PURPOSE OF INTERIM REVIEW UNDER THE  
AUTHORITY OF KRA A, L.L.C. P.E.  
TEXAS NO. 125585 ON DATE 07/31/2018  
IT IS NOT TO BE USED FOR CONSTRUCTION,  
BIDDING OR PERMIT PURPOSES.

**FREESE  
NICHOLS**  
10431 Morado Circle, Suite 300  
Austin, Texas 78759-3100  
Phone (512) 617-3100  
Fax (512) 617-3101

CITY OF BRADY, TEXAS  
**BRADY WWTP REPLACEMENT PROJECT**

GENERAL

PROCESS FLOW DIAGRAM

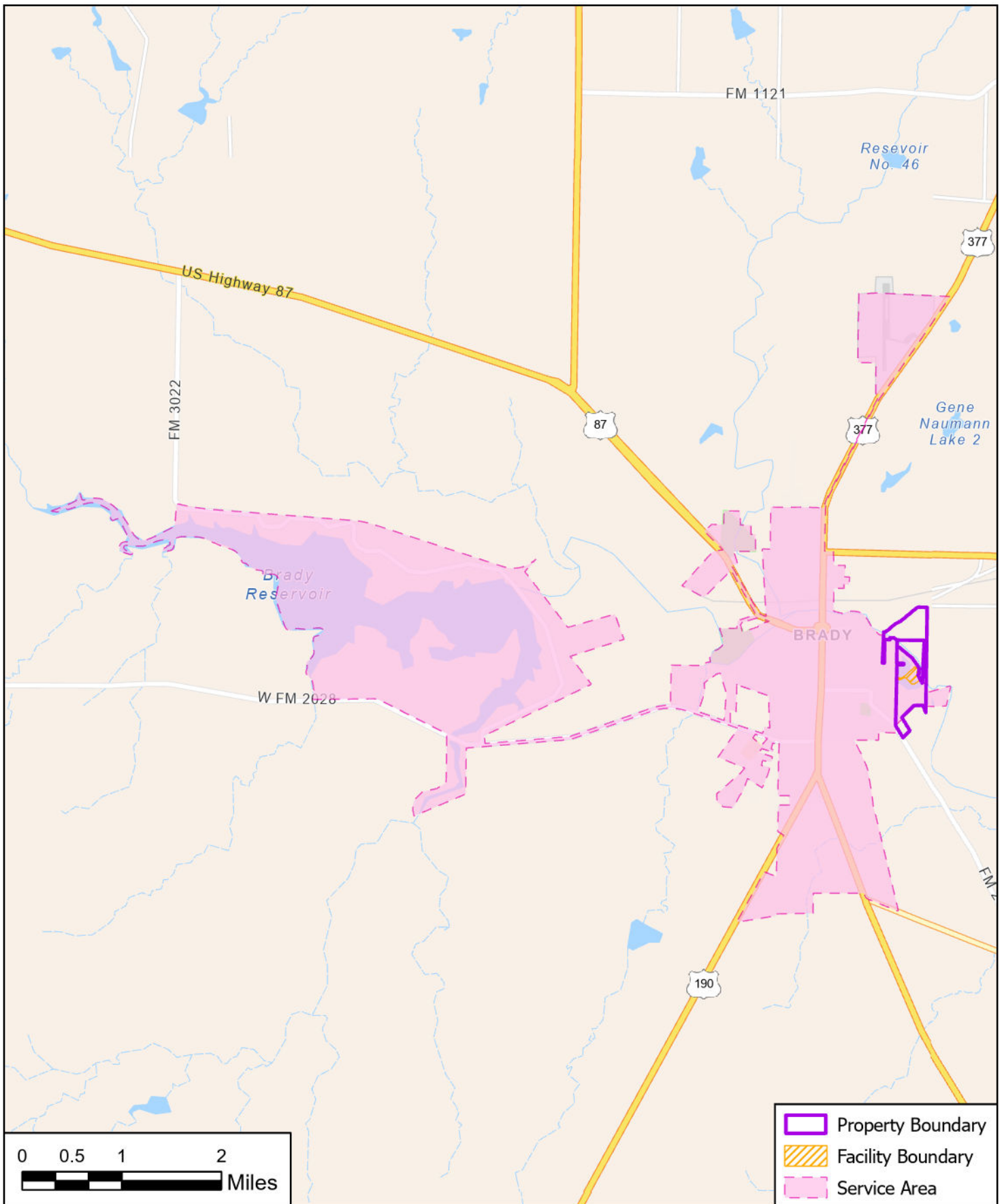
FILE NO.		BRD16454	
DATE		1/2/19	
DESIGNED		KAI	
DRAWN		MCA	
REVISED		.	
CHECKED		CCG	
FILE NAME		PI-BRD-DG-PROC01.dwg	
NO.	ISSUE	BY	DATE
1			
Bar is one inch on original drawing, if not one inch on this sheet, adjust scale.			
VERIFY SCALE			
0 1			
SHEET			
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SEQ.			

90% SUBMITTAL

# **ATTACHMENT TR-3**

Site Drawing





# **ATTACHMENT TR-4**

## **TWDB Approvals**

December 30, 2020

Mr. Steven Miller  
Project Manager  
City of Brady  
P.O. Box 351  
Brady, TX 76825

Re: City of Brady  
Wastewater Treatment Plant Replacement  
**TWDB CWSRF Project No. 73638**  
CID 02 (Bid Package No. 1) – Earthwork  
CID 03 (Bid Package No. 2) – Operations/Laboratory Building  
Plans and Technical Specifications Approval

Dear Mr. Miller:

On September 30, 2019, the Texas Water Development Board (TWDB) approved final plans, specifications, and contract documents for the City of Brady's (City) Wastewater Treatment Plant Replacement project. Upon bidding the project, the City received bids over the budgeted construction amount. As a result, the City elected to re-bid the project as three (3) separate bid packages. The project scope was not altered.

Comments on Bid Packages No. 1 and No. 2 were issued by the TWDB August 26, 2020. Revised final plans, specifications, and contract documents for Bid Package No. 1 were received by the TWDB on September 11, 2020 and for Bid Package No. 2 on September 17, 2020.

This project is funded through the Clean Water State Revolving Fund (CWSRF) Loans and Loan Forgiveness L1000011, LF1000019, L1001004, L1001005, LF1001006, and L1001180.

Bid Package No. 1 contract documents, prepared by Freese and Nichols, Inc. and signed by Coby Gee, P.E., consist of 14 sheets of plans and one bound set of contract documents and specifications. The proposed project is identified as CID 02: Bid Package 1 – Earthwork. The work includes:

- Earthwork required to raise the site out of the 100-year floodplain; and
- Reroute of existing 16-inch polyvinyl chloride sewer line and manholes.

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**Board Members**

Peter M. Lake, Chairman | Kathleen Jackson, Board Member | Brooke T. Paup, Board Member  
Jeff Walker, Executive Administrator

Bid Package No. 2 contract documents, prepared by Freese and Nichols, Inc. and signed by Coby Gee, P.E., consist of 34 sheets of plans and one bound set of contract documents and specifications. The proposed project is identified as CID 03: Bid Package 2 – Operations/Laboratory Building. The work includes:

- Construction of the operations/laboratory building at the wastewater treatment plant site.

The contract documents have been reviewed and are approved for general conformance with TWDB programmatic requirements and compliance with 30 Texas Administrative Code Chapter 217 (Design Criteria for Domestic Wastewater Systems). Our review of the documents submitted indicates that the project is designed in general compliance with the Texas Commission on Environmental Quality (TCEQ) standards. This approval does not relieve the design engineer of the legal responsibility for the integrity of the design. The materials and methods of construction shall conform to the specifications provided by the project engineer.

We note that in CID 02 (Bid Package No. 1), Bid Item No. 9 is an allowance in the amount of \$20,000 for the purchase and delivery of off-site fill material. It is further noted that prior to final payment, a change order may be issued to reflect actual amounts due to the contractor for work covered by allowances. Funding of those costs is subject to CWSRF program requirements. Therefore, we will need to review and approve supporting documentation as necessary and approve related change order(s) prior to releasing funds for those items.

This letter addresses the approval of plans and specifications, as required for TWDB-funded projects. This approval should not be construed as pre-empting any approval that may be required by other federal, state, or local government authorities, including review for compliance with Americans with Disabilities Act requirements.

Please be reminded that the TWDB may not fund testing, remediation, removal, disposal, or related works for contaminated or potentially contaminated materials. However, the City should ensure that, if found, such materials are tested, removed, and disposed of in accordance with applicable state and federal laws. Also, please be reminded that TWDB funding cannot be used to repave project area streets. Funds may be used for pavement repair of the trench width to the condition it was prior to construction.

Please submit copies of all required bid documentation and any contract addenda for review and approval by the TWDB prior to execution of the contract. Any changes in the location of the project must be accompanied by a map of the proposed location.

Prior to the approval of release of final retainage for the project, the TWDB must have issued a Certificate of Approval (COA). A list of documents needed for issuance of a COA can be found in the Supplemental Contract Conditions for CW & DWSRF document (TWDB-

0550) located on our website

at: <http://www.twdb.texas.gov/financial/instructions/doc/TWDB-0550.pdf>

In order to comply with Federal Emergency Management Agency requirements regarding implementation of the National Flood Insurance Act, National Disaster Protection Act, National Flood Insurance Reform Act, Federal Executive Orders 11988 and 11990, and to comply with related state statutes regarding special flood hazard areas, the City must coordinate in advance with the local floodplain administrator and obtain a floodplain development permit prior to construction, if applicable.

We have retained one (1) set of the approved plans and specifications for our files and are returning one (1) electronically approved plan set and one (1) electronically approved set of contract documents and technical specifications to you for use during construction activities. An approved hard copy of the bound plans and specifications will not be mailed to the City unless requested. If requested, the approved hard copy will be mailed once our COVID-19 response of working remotely has ended.

Please notify Alyssa Azari, Project Reviewer, of any pre-bid, bid opening, or pre-construction meetings. Ms. Azari may be reached at (512) 463-5801 or via email at [alyssa.azari@twdb.texas.gov](mailto:alyssa.azari@twdb.texas.gov).

Please contact Ms. Azari should you have any general project concerns or questions. You may also contact Jesse Milonovich, Team Manager, at (512) 463-8657.

Regards,

Juan Moran-Lopez, P.E.  
Senior Engineer, Team 1 – Panhandle/West Region  
Water Supply and Infrastructure

enclosure:     Approved electronic set of CID-02 plans, contract documents, and technical specifications via download link at: [https://twdb-my.sharepoint.com/:f/g/personal/alyssa\\_azari\\_twdb\\_texas\\_gov/Et\\_RWqrl9tEuX4H-QRedYUBlwK5VOGdx18c3cnmZnwf6Q?e=RYeUgM](https://twdb-my.sharepoint.com/:f/g/personal/alyssa_azari_twdb_texas_gov/Et_RWqrl9tEuX4H-QRedYUBlwK5VOGdx18c3cnmZnwf6Q?e=RYeUgM)  
Approved electronic set of CID-03 plans, contract documents, and technical specifications via download link at: [https://twdb-my.sharepoint.com/:f/g/personal/alyssa\\_azari\\_twdb\\_texas\\_gov/EtrcgHzeMsFAhzL5rgO-naMB1ytsZs7JKiLGBYW2GiklGQ?e=X3Yndm](https://twdb-my.sharepoint.com/:f/g/personal/alyssa_azari_twdb_texas_gov/EtrcgHzeMsFAhzL5rgO-naMB1ytsZs7JKiLGBYW2GiklGQ?e=X3Yndm)

c via email:     Mr. Coby C. Gee, P.E., Freese & Nichols – [coby.gee@freese.com](mailto:coby.gee@freese.com)  
Mr. Louis Herrin, P.E., TCEQ – [louis.herrin@tceq.texas.gov](mailto:louis.herrin@tceq.texas.gov)

April 28, 2021

Mr. Steven Miller  
Project Manager  
City of Brady  
P.O. Box 351  
Brady, TX 76825

Re: City of Brady  
Wastewater Treatment Plant Replacement  
**TWDB CWSRF Project No. 73638**  
CID 04 (Bid Package No. 3) – Wastewater Treatment Plan  
Plans and Technical Specifications Approval

Dear Mr. Miller:

On September 30, 2019, the Texas Water Development Board (TWDB) approved final plans, specifications, and contract documents for the City of Brady's (City) Wastewater Treatment Plant Replacement project. Upon bidding the project, the City received bids over the budgeted construction amount. As a result, the City elected to re-bid the project as three (3) separate bid packages. The project scope was not altered.

Comments on Bid Package No. 3 were issued by the TWDB October 6, 2020 and December 12, 2020. Final revised final plans, specifications, and contract documents were received by the TWDB on January 19, 2020

This project is funded through the Clean Water State Revolving Fund (CWSRF) Loans and Loan Forgiveness L1000011, LF1000019, L1001004, L1001005, LF1001006, and L1001180.

Bid Package No. 3 contract documents, prepared by Freese and Nichols, Inc. and signed by Coby Gee, P.E., consist of 185 sheets of plans and one bound set of contract documents and specifications. The proposed project is identified as CID 04: Bid Package No. 3 – Wastewater Treatment Plant. The work includes:

- Construction of a new 0.6-million-gallons-per-day wastewater treatment plant, including treatment structures, yard piping, and civil site work;
- Construction of an influent lift station;

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Brooke T. Paup, Chairwoman | Kathleen Jackson, Board Member

Jeff Walker, Executive Administrator

- Construction of plant headworks;
- Construction of aeration basins and an aeration blower;
- Construction of secondary clarifiers and RAS/WAS pump station;
- Construction of a UV disinfection and NPW system;
- Construction of a solids handling system, including a sludge holding tank and screw press area;
- Improvements at the plant electrical building;
- Installation of an influent bar screen; and
- An alternate-bid item to construct an operations/laboratory building

The contract documents have been reviewed and are approved for general conformance with TWDB programmatic requirements and compliance with 30 Texas Administrative Code Chapter 217 (Design Criteria for Domestic Wastewater Systems). Our review of the documents submitted indicates that the project is designed in general compliance with the Texas Commission on Environmental Quality (TCEQ) standards. This approval does not relieve the design engineer of the legal responsibility for the integrity of the design. The materials and methods of construction shall conform to the specifications provided by the project engineer.

We note that in CID 04 (Bid Package No. 3), Bid Item No. 22 is an allowance in the amount of \$150,000 for change orders issued during construction. Funding of those costs is subject to CWSRF program requirements. Therefore, we will need to review and approve supporting documentation as necessary and approve related change order(s) prior to releasing funds for those items.

This letter addresses the approval of plans and specifications, as required for TWDB-funded projects. This approval should not be construed as pre-empting any approval that may be required by other federal, state, or local government authorities, including review for compliance with Americans with Disabilities Act requirements.

Please be reminded that the TWDB may not fund testing, remediation, removal, disposal, or related works for contaminated or potentially contaminated materials. However, the City should ensure that, if found, such materials are tested, removed, and disposed of in accordance with applicable state and federal laws. Also, please be reminded that TWDB funding cannot be used to repave project area streets. Funds may be used for pavement repair of the trench width to the condition it was prior to construction.

Please submit copies of all required bid documentation and any contract addenda for review and approval by the TWDB prior to execution of the contract. Any changes in the location of the project must be accompanied by a map of the proposed location.

Prior to the approval of release of final retainage for the project, the TWDB must have issued a Certificate of Approval (COA).

Mr. Steven Miller  
April 28, 2021  
Page 3

A list of documents needed for issuance of a COA can be found in the Supplemental Contract Conditions for CW & DWSRF document (TWDB-0550) located on our website at: <http://www.twdb.texas.gov/financial/instructions/doc/TWDB-0550.pdf>

In order to comply with Federal Emergency Management Agency requirements regarding implementation of the National Flood Insurance Act, National Disaster Protection Act, National Flood Insurance Reform Act, Federal Executive Orders 11988 and 11990, and to comply with related state statutes regarding special flood hazard areas, the City must coordinate in advance with the local floodplain administrator and obtain a floodplain development permit prior to construction, if applicable.

We have retained one (1) set of the approved plans and specifications for our files and are returning one (1) electronically approved plan set and one (1) electronically approved set of contract documents and technical specifications to you for use during construction activities. An approved hard copy of the bound plans and specifications will not be mailed to the City unless requested. If requested, the approved hard copy will be mailed once our COVID-19 response of working remotely has ended.

Please notify me of any pre-bid, bid opening, pre-construction meetings, or any general project concerns or questions. I may be reached at (512) 463-3511 or via email at [juan.moran-lopez@twdb.texas.gov](mailto:juan.moran-lopez@twdb.texas.gov). You may also contact Jesse Milonovich, Team Manager, at (512) 463-8657.

Regards,

Juan Moran-Lopez, P.E.  
Senior Engineer, Team 1 – Panhandle/West Region  
Water Supply and Infrastructure

JML/mm

enclosure: Approved electronic set of CID-04 plans, contract documents, and technical specifications via download link at:  
[https://twdb-my.sharepoint.com/:f/g/personal/alyssa\\_azari\\_twdb\\_texas\\_gov/ErtRSylomddKiAXipldVbIABe9mVne23JUlu01mnvCdvVg?e=i2i1hZ](https://twdb-my.sharepoint.com/:f/g/personal/alyssa_azari_twdb_texas_gov/ErtRSylomddKiAXipldVbIABe9mVne23JUlu01mnvCdvVg?e=i2i1hZ)

c via email: Mr. Coby C. Gee, P.E., Freese & Nichols – [coby.gee@freese.com](mailto:coby.gee@freese.com)  
Mr. Louis Herrin, P.E., TCEQ – [louis.herrin@tceq.texas.gov](mailto:louis.herrin@tceq.texas.gov)



# **ATTACHMENT TR-5**

## Lab Report



# ENVIRONMENTAL MONITORING LABORATORY, L.L.C

P.O. Box 477  
6145 State Highway 171  
Hillsboro, Texas 76645  
Phone: 254-582-2622

BIOLOGICAL & CHEMICAL ANALYSIS / UTILITIES MANAGEMENT & OPERATION / WATERWELL DRILLING & SERVICE / GEOLOGICAL INVESTIGATION

## ANALYTICAL REPORT 24052134

**For:**

City of Brady  
1311 E. 6th St  
Brady, Texas 76825

**Sample Site:** Renewal Analysis

**Collected Date:** 05/21/24



**Certificate Number:** T104704247-23-25

**Lab Number:** TX01547

Authorized for release by:

29-MAY-24

Lisa Soward, Data Manager

[homeoffice@yourwaterlab.com](mailto:homeoffice@yourwaterlab.com)

The test results in this report meet all 2009 NELAP and 2016 TNI requirements for accredited parameters, exceptions are noted in this report. This report may not be reproduced except in full, and with written approval from the laboratory. For questions please contact the Project Manager at the e-mail address or telephone number listed on this page.

This report has been electronically signed and authorized by the signatory. Electronic signature is intended to be the legally binding equivalent of a traditionally handwritten signature.

Results relate only to the items tested and the sample(s) as received by the laboratory



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## ANALYTICAL RESULTS

Analytical Report: 24052134

Lab ID: 24052134-001

Collected Date: 05/21/24 08:40

Matrix: Waste Water

Client: City of Brady

Received Date: 05/21/24 14:25

Temp at Receipt: 3.2 °C

Sample Site: Renewal Analysis

Report Date: 05/28/24

Sample Collector: DH

Analyte	Abbreviation	Method	TNI Cert	Date Analyzed	Result	Units
Ammonia Nitrogen	NH3N	SM 4500-NH3/D	NP	05/22/24 09:32	0.150	mg/L
Carbonaceous BOD	CBOD	SM 5210/B	NP	05/22/24 08:42	<2	mg/L
Total Suspended Solids	TSS	SM 2540/D	NP/P	05/22/24 11:01	11	mg/L
pH	SM4500-H	SM4500/H	N	05/21/24 08:40	7.1	SU
Nitrate as N	E300.0	E 300.0	NP/P	05/21/24 14:55	<0.400	mg/L
Dissolved Oxygen	DO	SM 4500-O	N	05/21/24 08:40	6.5	mg/L
Total Phosphorus (as P)	T.PHOS.	SM 4500-P/E	NP	05/23/24 11:46	2.62	mg/L
Nitrogen, Total Kjeldahl	TKN	SM 4500-NH3/D	NP	05/22/24 13:26	2.20	mg/L
Total dissolved solids	SM2540C	SM 2540/C	N	05/22/24 14:17	571.0	mg/L
Sulfate	E300.0	E 300.0	NP/P	05/21/24 14:55	63.5	mg/L
Chloride	Cl-	SM 4500-Cl-/B	NP	05/23/24 11:07	89.0	mg/L
Chlorine	SM4500-CL	SM4500-CL	NP	05/21/24 08:40	.02	mg/L
n-Hexane Extractable Material (HEM)	O&G	SM 5520/B	NP	05/22/24 10:08	<7.00	mg/L
Alkalinity, Total (CaCO3)	ALK	SM 2320/B	NP	05/23/24 09:50	348	mg/L
Conductivity @ 25C	Cond	SM 2510/B	NP	05/23/24 09:25	987	umhos/cm
E. coli	E. coli	IDEXX Colilert	NP	05/21/24 14:56	67	MPN/100 mL
Temperature	(water, on site)	(water, on site)	N	05/21/24 08:40	24	°C

P: Potable water

NP: Non Potable water

N: Not Certified

# QUALITY ASSURANCE & QUALITY CONTROL

Control #: 24052134

ANALYTE	ABBR./ ALT.NAME	STANDARD METHOD	UNITS	Quality Control					Q
				S.D.	CV%	REC.1%	REC.2%	MDL/PQL	
Nitrate as N	E300.0	E 300.0	mg/L					0.400 / 0.400	
Sulfate	E300.0	E 300.0	mg/L					1.00 / 1.80	
Alkalinity, Total (CaCO3)	ALK	SM 2320/B	mg/L					1.50 / 5.00	
Chloride	Cl-	SM 4500-Cl-/B	mg/L	2.83	0.57	98	100	1.00 / 3.00	
Ammonia Nitrogen	NH3N	SM 4500-NH3/D	mg/L	0.01	1.09	96.6	98.4	0.0300 / 0.100	
Nitrogen, Total Kjeldahl	TKN	SM 4500-NH3/D	mg/L	0.00	0.00	99.6	99.6	0.0200 / 0.120	
Total Phosphorus (as P)	T.PHOS.	SM 4500-P/E	mg/L	0.06	0.83	93.4	95.2	.02 / .05	
n-Hexane Extractable Material (HEM)	O&G	SM 5520/B	mg/L	0.35	0.34	101.7	100.2	7.00 / 7.00	
Chemical Oxygen Demand	COD	SM 5220/D	mg/L						
Turbidity	TURB.	SM 2130/B	NTUs						
Total Percent Solids	%d.w	SM 2540/G	%						N

<b>Biochemical Oxygen Demand(BOD)</b> <b>Carbonaceous Biochemical Oxygen Demand(CBOD)</b> <b>Method: SM 5210/B</b>			<b>Dissolved Oxygen</b> <b>Method: SM 4500-O*/G</b>			<b>Total Suspended Solids (TSS, MLSS)</b> <b>Method: 2540/D</b>		
<b>Results</b>	<b>Units</b>	<b>Description</b>	<b>Results</b>	<b>Units</b>	<b>Description</b>	<b>Results</b>	<b>Units</b>	<b>Description</b>
0.07	mg/L	Blank 1 - CBOD	8.88	mg/L	Set Up Calibration	0	mg/L	Blank 1
0.1	mg/L	Blank 2 - CBOD	8.88	mg/L	Read Off Calibration	0.3	mg/L	Blank 2
0.09	mg/L	Blank 3 - CBOD	20	°C	Set Up Temperature	0.3	mg/L	Blank 3
			20	°C	Read Off Temperature	0.1	mg/L	Blank 4
195	mg/L	G/GA Std 1 - CBOD	757	mm Hg	Set Up Barometer	0.61	%	Relative % Difference
193	mg/L	G/GA Std 2 - CBOD	756	mm Hg	Read Off Barometer	2.11	%	Relative % Difference
191	mg/L	G/GA Std 3 - CBOD				2.2	%	Relative % Difference
193	mg/L	<b>G/GA Average - CBOD</b>				4.53	%	Relative % Difference
						1.57	%	Relative % Difference
0.7	mg/L	Seed Corr/mL - CBOD				1.73	%	Relative % Difference
0.71	mg/L	Seed Corr/mL - CBOD				1.96	%	Relative % Difference
0.71	mg/L	Seed Corr/mL - CBOD				1.36	%	Relative % Difference
0.71	mg/L	<b>Seed Corr Average - CBOD</b>						
			<b>Fecal Coliform</b> <b>Method: SM9222 /D MF</b>			<b>Conductivity @ 25° C</b> <b>Method: SM2510/B</b> <b>Standards ran for each analytical batch.</b>		
<b>Results</b>	<b>Units</b>	<b>Description</b>	<b>Results</b>	<b>Units</b>	<b>Description</b>	<b>Results</b>	<b>Units</b>	<b>Description</b>
	CFU/100ml	Pre Blank					umhos/cm	Conductivity Standard
	CFU/100ml	Post Blank					umhos/cm	Conductivity Standard
							umhos/cm	Conductivity Standard
			<b>TDS by SM2540/C</b>					
<b>Results</b>	<b>Units</b>	<b>Description</b>						
0	mg/L	Blank						
			<b>E. coli By IDEXX Colilert (enumeration)</b>					
			<b>MPN/100 mL</b>					

*Lisa Soward*

Lisa Soward  
Data Manager

Report Out Date: 05/29/2024

Environmental Monitoring Laboratory ♦ P.O. Box 477 / 6145 State Highway 171, Hillsboro, Texas 76645 ♦ Phone: (254) 582-2622



TCEQ Lab ID: T104704247-23-25

Panhandle Division

13260 South US Hwy 287 Amarillo, Texas 79118

EPA Lab ID: TX01547

East Texas Division

14295 S.H. 155 North Winona, Texas 75792

Office: 903-877-9222 Emergency: 817-357-5535

Southwest Division

811 E. Young Street Llano, Texas 78643

Office: 325-247-3295 Emergency: 830-730-3317

Report To: Marty Martin		Report To: City of Brady		ANALYSES REQUESTED		CL2	
Company: City of Brady		Purchase Order #:		TSS, TDS		PH	
1311 E. 6th Street Brady, TX 76825		Address:		DO 6.5 / Temp 24		NH3N (pH < 2.0, H <sub>2</sub> SO <sub>4</sub> ) SMA4500-NH3 D or G	
Phone: 325-456-3704		Fax:		FECAL COLIFORM / E.COLI (Sterile)		MLSS	
Phone: 325-456-3704		Fax:		ALAKALINITY, CHLORIDE, CONDUCT		OIL & GREASE	
Phone: 325-456-3704		Fax:		NITRATE, SULFATE			
Project Name: Renewal Analysis		Quote #:		24052134			
Project Location: WWTP		City, State: Brady, TX					
Date Due: Rush: 0% 25% 50% 100%		Sampler: (Please Print) <i>Dave Hoyle</i>					
Lab#	Client Sample ID	Matrix	Date	Time	*Pres. Code	*Bottle Code	Sample Remarks
24052134	1. Renewal Analysis	WW	5-24-24	0840	1	1	
2.					2	1	
3.					6	1	
4.					1	1	
5.					2	2	
6.					1	1	
7.							
8.							
9.							
10.							
Relinquished By: <i>1. Vicki Hoyle</i>		Date: <i>5/24/24</i>		Time: <i>1445</i>		Received By: <i>ASB Forward</i>	
1. <i>Vicki Hoyle</i>		Date: <i>5/24/24</i>		Time: <i>1425</i>		COOLER ID: <i>12467</i>	
2.						Ice: <i>ES</i> NO <i>3.2</i>	
3.						Temperature: <i>3.2</i>	
4.						* Preservation Codes: 1. None 2. Ice 3. No Ice 4. No Ice + Zinc 5. No Ice 6. Sterile + Thiosulfate	

Complete sample information is vital for proper login and reporting. EML may need to subcontract some analyses due to equipment or procedural limitations.

Check us out on the web: <http://www.yourwaterlab.com>

Email us at: [homeoffice@yourwaterlab.com](mailto:homeoffice@yourwaterlab.com)

Revised 11/2023