



# **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

## Plain Language Summary

### DOMESTIC WASTEWATER

*The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 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.*

City of Uvalde (CN600648455) operates City of Uvalde Wastewater Treatment Plant (RN103119087), a domestic wastewater facility. The facility is located at approximately 3 miles southwest of the intersection of FM 117 and US83 Uvalde County, Texas, in Uvalde, Uvalde County, Texas 78802. The application is a renewal to discharge a total of 2.44 MGD of treated domestic wastewater to Cooks Slough and the Leona River.

Discharges from the facility are expected to contain CBOB<sub>5</sub>, Total Suspended Solids, Ammonia Nitrogen, Nitrate Nitrogen, and E.coli freshwater. Domestic wastewater is treated by transference through a Lift Station, Carousel Aeration Basin, Dual Final Clarifiers, Chlorine Contact Chamber, and Dechlorination in ponds.

### AGUAS RESIDUALES DOMESTICAS

*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.*

City of Uvalde (CN600648455) opera Planta de tratamiento de aguas residuales de la ciudad de Uvalde (RN103119087), un instalación de aguas residuales domésticas. La instalación está ubicada en aproximadamente 3 millas al suroeste de la intersección de FM 117 y US83 en el condado de Uvalde, Texas, en Uvalde, Condado de Uvalde, Texas 78802. La solicitud es una renovación para descargar un total de 2.44 MGD de aguas residuales domésticas tratadas en Cooks Slough y el río Leona..

Se espera que las descargas de la instalación contengan CBOB<sub>5</sub>, sólidos suspendidos totales, nitrógeno amoniacal, nitrógeno nitrato y agua dulce por E. coli. Aguas residuales domésticas. **está** tratado por transferencia a través de una estación de bombeo, cuenca de aireación de carrusel, clarificadores finales duales, cámara de contacto de cloro y decloración en estanques.



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0010306001

**APPLICATION.** City of Uvalde, P.O. Box 799, Uvalde, Texas 78802, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0010306001 (EPA I.D. No. TX0023094) to authorize the discharge of treated wastewater at a volume not to exceed a combined annual average flow of 2,440,000 gallons per day. The domestic wastewater treatment facility is located approximately 1.3 miles southwest of the intersection of Farm-to-Market Road 117 and US Highway 83, near the city of Uvalde, in Uvalde County, Texas 78802. The discharge route is from the plant site via Outfall 001 to a series of ponds; thence to Crooks Slough; thence to Leona River; via Outfall 002 directly to Leona River, and via Outfall 003 to Crooks Slough; thence to Leona River. TCEQ received this application on March 17, 2025. The permit application will be available for viewing and copying at Uvalde City Hall, City Manager Office, 101 East Main Street, Uvalde, in Uvalde County, Texas and 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=-99.788611,29.188055&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.**

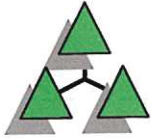
**MAILING LIST.** If you submit public comments, a request for a contested case hearing or a reconsideration of the Executive Director's decision, you will be added to the mailing list for this specific application to receive future public notices mailed by the Office of the Chief Clerk. In addition, 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 Uvalde at the address stated above or by calling Ms. LeeAnn Ortiz, Public Works Coordinator, at 830-275-9665.

Issuance Date: April 24, 2025



***Kenneth M. Cave & Associates***

***Consulting Environmental Scientists***

February 27, 2025

Texas Commission on Environmental Quality  
Water Quality Division  
Applications Review and Processing Team (MC148)  
P.O. Box 13087  
Austin, Texas 78711-3087

Reference: Application Submittal  
Renewal Application for City of Uvalde  
WQ0010306-001

Dear Sir or Madam:

Enclosed please find one original and three copies of the referenced application. The permit renewal does not involve any changes to the existing facilities. Also, the application fee has been sent separately.

If you have any questions, please feel free to call anytime.

Sincerely,

***Kenneth M. Cave & Associates***

Kenneth M. Cave  
Senior Scientist

Enclosures (4)

Copy: City of Crystal City





# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

*Original*

APPLICANT NAME: City of Uvalde

PERMIT NUMBER (If new, leave blank): WQ00 10306-001

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 checked="" type="checkbox"/>	<input type="checkbox"/>			
Worksheet 5.0	<input checked="" type="checkbox"/>	<input 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 type="checkbox"/>
≥1.0 MGD	\$2,050.00 <input type="checkbox"/>	\$2,015.00 <input checked="" type="checkbox"/>

Minor Amendment (for any flow) \$150.00 ☐

#### Payment Information:

Mailed      Check/Money Order Number: 150534  
Check/Money Order Amount: \$2,015.00  
Name Printed on Check: City of Uvalde  
EPAY      Voucher Number: Click to enter text.  
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

☐ Minor Amendment with Renewal

☐ Major Amendment without Renewal

☐ Minor Amendment without Renewal

☒ Renewal without changes

☐ Minor Modification of permit

**e.** For amendments or modifications, describe the proposed changes: [Click to enter text.](#)

**f. For existing permits:**

Permit Number: WQ00 10306-001

EPA I.D. (TPDES only): TX 0023094

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

### Section 3. Facility Owner (Applicant) and Co-Applicant 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 Uvalde

*(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: 600648455

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: [Click to enter text.](#)

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

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

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

**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?

[Click to enter text.](#)

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

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: [Click to enter text.](#)

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



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

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

Provide a brief description of the need for a co-permittee: [Click to enter text.](#)

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

## 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: Cave, Kenneth M.  
Title: Consultant Credential: Senior Scientist  
Organization Name: Kennt M. Cave & Associates  
Mailing Address: P.O. Box 768 City, State, Zip Code: Leakey, Texas, 78873-0768  
Phone No.: 210-414-3906 E-mail Address: kencave77@gmail.com  
Check one or both: ☒ Administrative Contact ☒ Technical Contact
- B. Prefix: [Click to enter text.](#) Last Name, First Name: [Click to enter text.](#)  
Title: [Click to enter text.](#) Credential: [Click to enter text.](#)  
Organization Name: [Click to enter text.](#)  
Mailing Address: [Click to enter text.](#) City, State, Zip Code: [Click to enter text.](#)  
Phone No.: [Click to enter text.](#) E-mail Address: [Click to enter text.](#)  
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: Zamora, Juan  
Title: Director of Public Works Credential: [Click to enter text.](#)  
Organization Name: City of Uvalde  
Mailing Address: P.O. Box 799 City, State, Zip Code: Uvalde, Texas, 78802-0799  
Phone No.: 830-275-1785 E-mail Address: zamora@uvaldetx.gov
- B. Prefix: Ms. Last Name, First Name: Ortiz, LeeAnn  
Title: Public Works Coordinator Credential: [Click to enter text.](#)  
Organization Name: City of Uvalde  
Mailing Address: P.O. Box 799 City, State, Zip Code: Uvalde, Texas, 78802-0799  
Phone No.: 830-275-9665 E-mail Address: lmortiz@uvaldetx.gov



## 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: Ms.

Last Name, First Name: Ortiz, LeeAnn

Title: Public Works Coordinator

Credential: Click to enter text.

Organization Name: City of Uvalde

Mailing Address: P.O. Box 799

City, State, Zip Code: Uvalde, Texas, 78802-0799

Phone No.: 830-275-9665

E-mail Address: lmortiz@uvaldetx.gov

## 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: Ms.

Last Name, First Name: Ortiz, LeeAnn

Title: Public Works Coordinator

Credential: Click to enter text.

Organization Name: City of Uvalde

Mailing Address: P.O. Box 799

City, State, Zip Code: Uvalde, Texas, 78802-0799

Phone No.: 830-275-9665

E-mail Address: lmortiz@uvaldetx.gov

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

### A. Individual Publishing the Notices

Prefix: Ms.

Last Name, First Name: Ortiz, LeeAnn

Title: Public Works Coordinator

Credential: Click to enter text.

Organization Name: City of Uvalde

Mailing Address: P.O. Box 799

City, State, Zip Code: Uvalde, Texas, 78802-0799

Phone No.: 830-275-9665

E-mail Address: lmortiz@uvaldetx.gov

### 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: Ms.

Last Name, First Name: Ortiz, LeeAnn

Title: Public Works Coordinator

Credential: Click to enter text.

Organization Name: City of Uvalde

Mailing Address: P.O. Box 799

City, State, Zip Code: Uvalde, Texas, 78802-0799

Phone No.: 830-275-9665

E-mail Address: lmortiz@uvaldetx.gov

#### 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: Uvalde City Hall

Location within the building: City Manager's Office

Physical Address of Building: 101 East Main

City: Uvalde

County: Uvalde

Contact (Last Name, First Name): Vince DiPiazza

Phone No.: 830-278-3315 Ext.: [Click to enter text](#)

#### E. Bilingual Notice Requirements

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

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

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

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

☐

Yes

☒

No

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

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

☐

Yes

☐

No

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

☐

Yes

☐

No

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

☐

Yes

☐

No

5. If the answer is **yes** to **question 1, 2, 3, or 4**, public notices in an alternative language are required. Which language is required by the bilingual program? [Click to enter text](#)

#### F. Plain Language Summary Template

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

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

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

## 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 103119087

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 Uvalde

- C. Owner of treatment facility: City of Uvalde

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

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

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

Last Name, First Name: City of Uvalde

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

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

Organization Name: City of Uvalde

Mailing Address: P.O. Box 799

City, State, Zip Code: Uvalde, Texas, 78802-0799

Phone No.: 830-278-3315

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

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

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

- E. Owner of effluent disposal site:

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

Last Name, First Name: City of Uvalde

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

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

Organization Name: City of Uvalde

Mailing Address: P.O. Box 799

City, State, Zip Code: Uvalde, Texas, 78802-0799

Phone No.: 830-278-3315

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

## 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:

[Click to enter text.](#)

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

☒ Yes ☐ No

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

[Click to enter text.](#)

City nearest the outfall(s): Uvalde

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

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

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

D. For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: 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: [Click to enter text.](#)

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



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

[Click to enter text.](#)

E. For TLAPs, please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: [Click to enter text.](#)

## 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.

[Click to enter text.](#)

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

☐ Yes ☒ No

If yes, list each person formerly employed by the TCEQ who represented your company and was paid for service regarding the application: [Click to enter text.](#)

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

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

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

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, please provide the following information:

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

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

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

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

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

Permit Number: WQ0010306-001

Applicant: City of Uvalde

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): Hector R. Luevano

Signatory title: Mayor

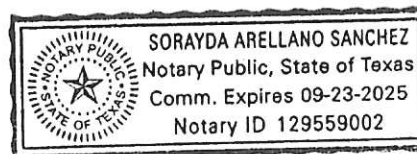
Signature: \_\_\_\_\_

Date: 01-14-2025

(Use blue ink)

Subscribed and Sworn to before me by the said Hector R. Luevano  
on this 14 day of January, 20 25.  
My commission expires on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Sorayda Arellano Sanchez  
Notary Public



[SEAL]

Uvalde  
County, Texas



# WATER QUALITY PERMIT

## PAYMENT SUBMITTAL FORM

**Use this form to submit the Application Fee, if the mailing the payment.**

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

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

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

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

***BY OVERNIGHT/EXPRESS MAIL***

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

**Fee Code: WQP     Waste Permit No: 10306-001**

1. Check or Money Order Number: 150534
2. Check or Money Order Amount: \$2,015.00
3. Date of Check or Money Order: 01/17/2025
4. Name on Check or Money Order: City of Uvalde
5. APPLICATION INFORMATION

Name of Project or Site: City of Uvalde Wastewater Treatment Plant

Physical Address of Project or Site: Approximately 1.3 miles southwest of the intersection of FM 117 and US 83 Uvalde County, Texas

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

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



# 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 1/2 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

## **List of Attachments**

**Attachment A - Core Data Form**

**Attachment B - Site Layout with Boundaries**

**Attachment C - Flow Diagram**

**Attachment D - Outfall Locations**

**Attachment E - Sampling and Flow Routing**

**Administrative Report Map - USGS 7 1/2 Minute Uvalde Quadrangle**

**SPIF Map - USGS 7 1/2 Minute Uvalde Quadrangle**





# TCEQ Core Data Form

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

## SECTION I: General Information

<b>1. Reason for Submission</b> (If other is checked please describe in space provided.)		
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input checked="" type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input type="checkbox"/> Other
<b>2. Customer Reference Number</b> (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	<b>3. Regulated Entity Reference Number</b> (if issued)
CN 600648455		RN 103119087

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (mm/dd/yyyy)	
<input type="checkbox"/> New Customer		<input checked="" type="checkbox"/> Update to Customer Information	
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)		<input type="checkbox"/> Change in Regulated Entity Ownership	
The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).			
<b>6. Customer Legal Name</b> (If an individual, print last name first: eg: Doe, John)		If new Customer, enter previous Customer below:	
City of Uvalde			
<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)
	17460024189	74-6002418	
<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 type="checkbox"/> City <input checked="" 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 type="checkbox"/> 21-100 <input checked="" 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 799		
	City	Uvalde	State TX ZIP 78802 ZIP + 4 0799
<b>16. Country Mailing Information</b> (if outside USA)		<b>17. E-Mail Address</b> (if applicable)	
		zamora@uvaldetx.gov	
<b>18. Telephone Number</b>	<b>19. Extension or Code</b>	<b>20. Fax Number</b> (if applicable)	
( 830 ) 275-1785		( 830 ) 278-2234	

## 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 checked="" type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information	
The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).	
<b>22. Regulated Entity Name</b> (Enter name of the site where the regulated action is taking place.)	
City of Uvalde Wastewater Treatment Plant	



23. Street Address of the Regulated Entity: (No PO Boxes)							
	City		State		ZIP		ZIP + 4
24. County							

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

25. Description to Physical Location:	Approximately 3 miles southwest of the intersection of FM 117 and US83 Uvalde County, Texas						
26. Nearest City	State			Nearest ZIP Code			
Uvalde	TX			78802			
Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).							
27. Latitude (N) In Decimal:	29.186533		28. Longitude (W) In Decimal:	-99.786944			
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds		
29	11	11.5188	-99	47	12.9984		
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)		
4952			221320				
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)							
Municipal Wastewater Treatment Plant							
34. Mailing Address:	P.O. Box 799						
	City	Uvalde	State	TX	ZIP	78802	ZIP + 4
35. E-Mail Address:	zamora@uvaldetx.gov						
36. Telephone Number	37. Extension or Code		38. Fax Number (if applicable)				
( 830 ) 275-1785			( 830 ) 278-2234				

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.

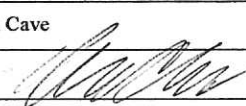
<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input checked="" type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
	TXRNEBF31			
<input type="checkbox"/> Voluntary Cleanup	<input checked="" type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:
	WQ0010306-001			

## SECTION IV: Preparer Information

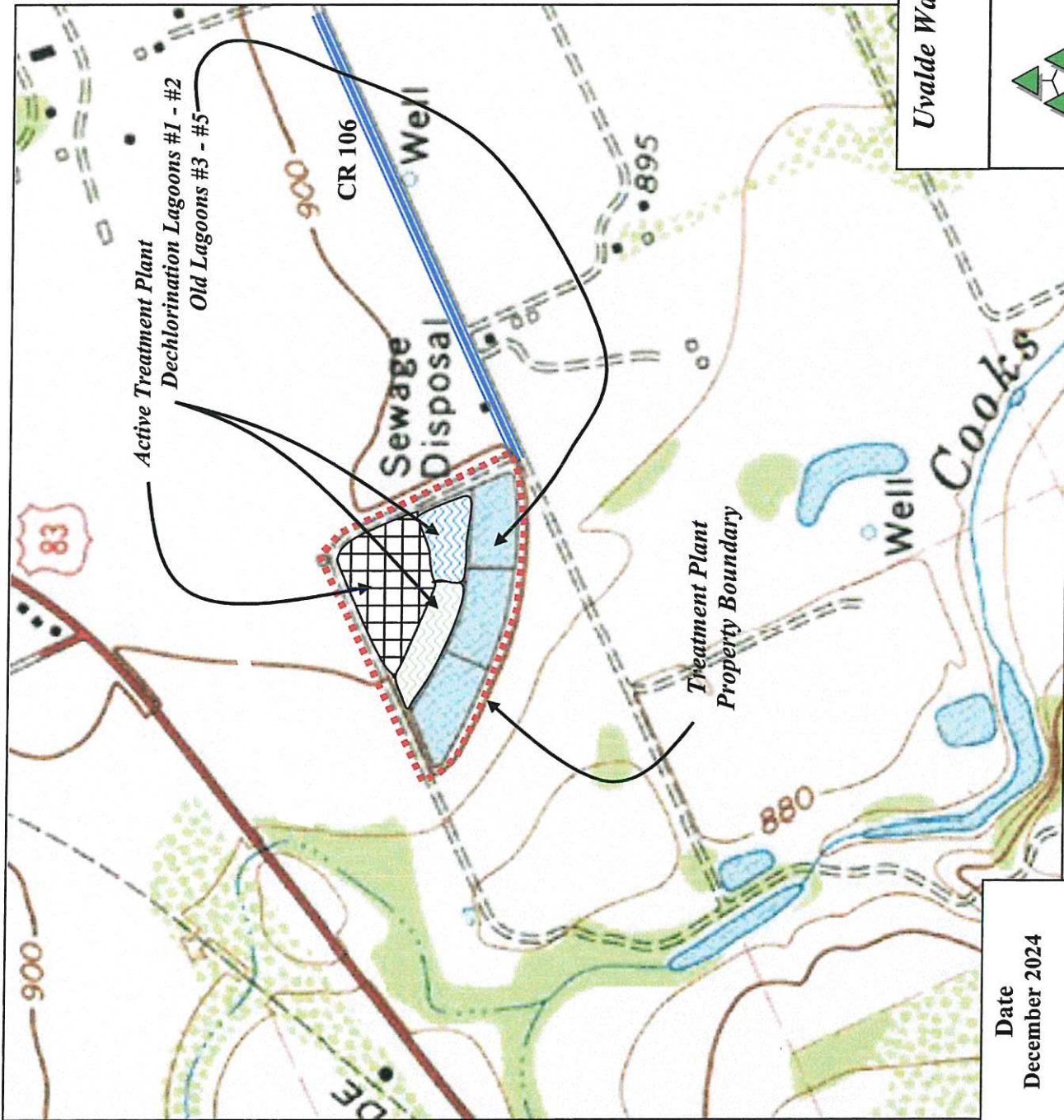
40. Name:	Kenneth Cave	41. Title:	Senior Scientist
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
( 210 ) 414-3906		( ) -	kencave77@gmail.com

## SECTION V: Authorized Signature

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

Company:	Kennth M. Cave & Associates	Job Title:	Senior Scientist
Name (In Print):	Kenneth Cave	Phone:	( 210 ) 414- 3906
Signature:		Date:	2/14/25 2/14/25

Attachment "B"



Approximate Scale = 1000'

**Uvalde Wastewater Treatment Plant**  
Plant Boundaries

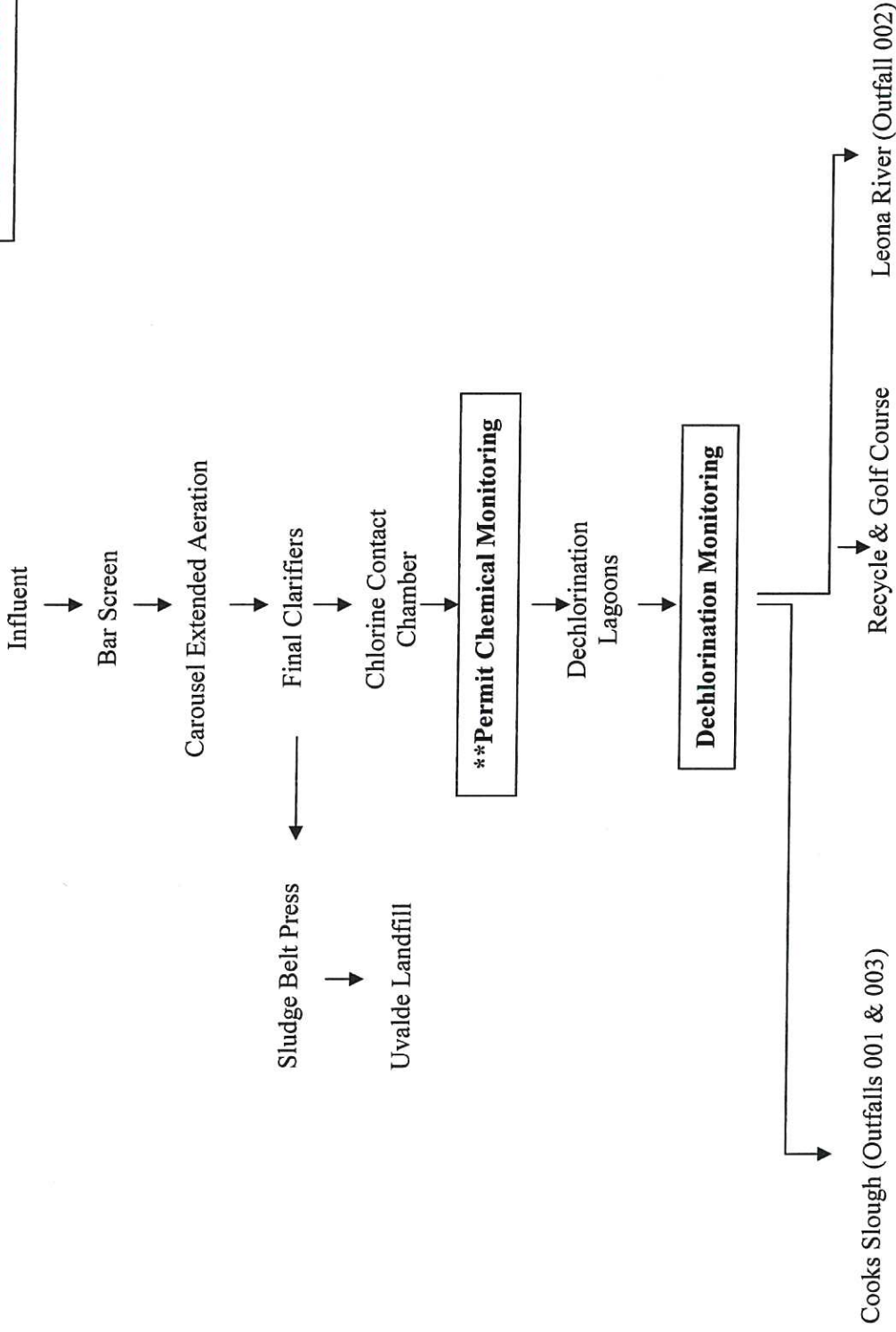


**Kenneth M. Cave & Associates**  
P.O. Box 768 Leakey, TX 78873  
210-414-3906

Date  
December 2024

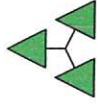


# Attachment "C"



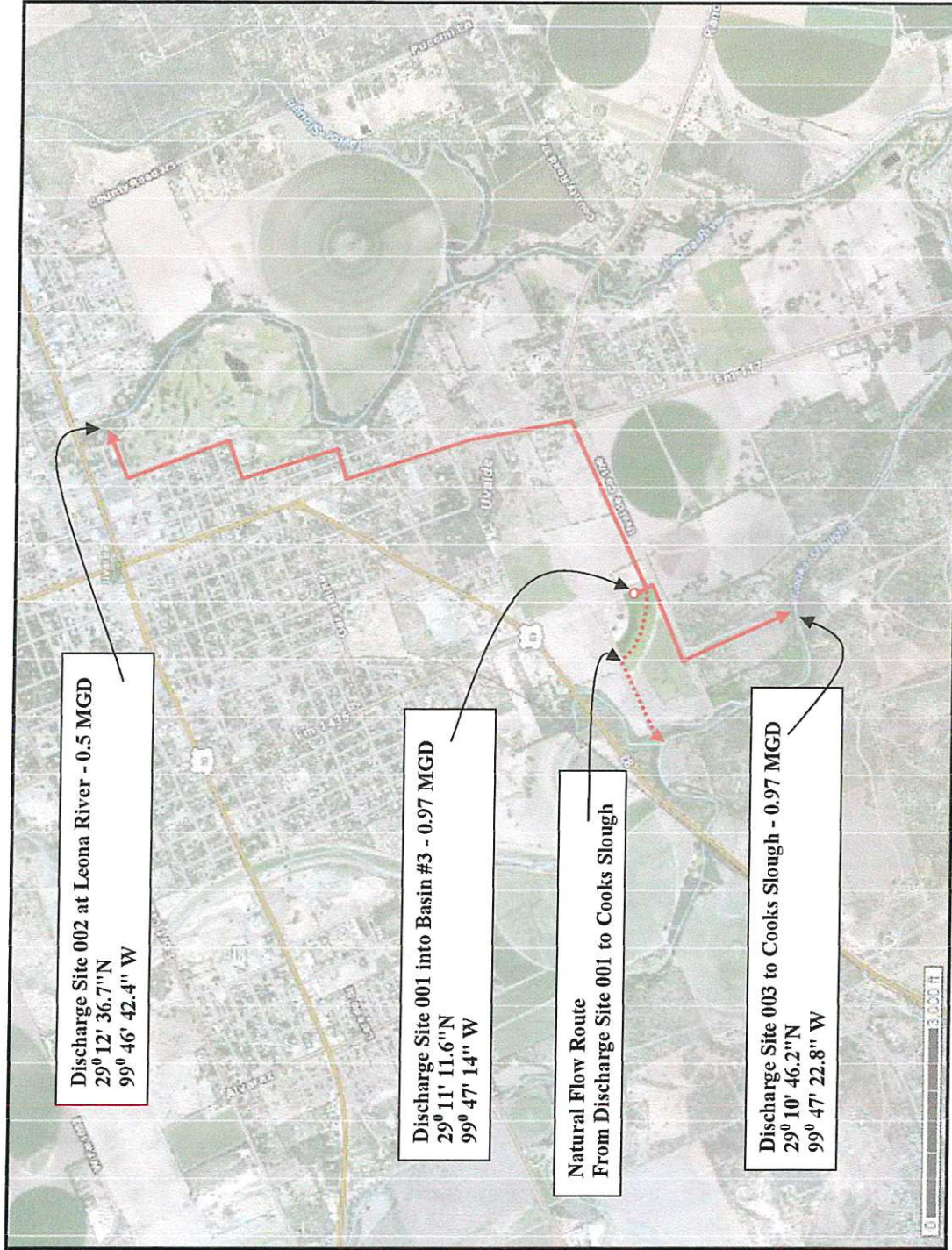
Date  
12/29/2024

## Uvalde WWTP Flow Schematic (With Compliance Monitoring Locations)



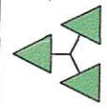
**Kenneth M Cave & Associates**  
P.O. Box 768 Leakey, TX 78873  
210-414-3906

Attachment "D"



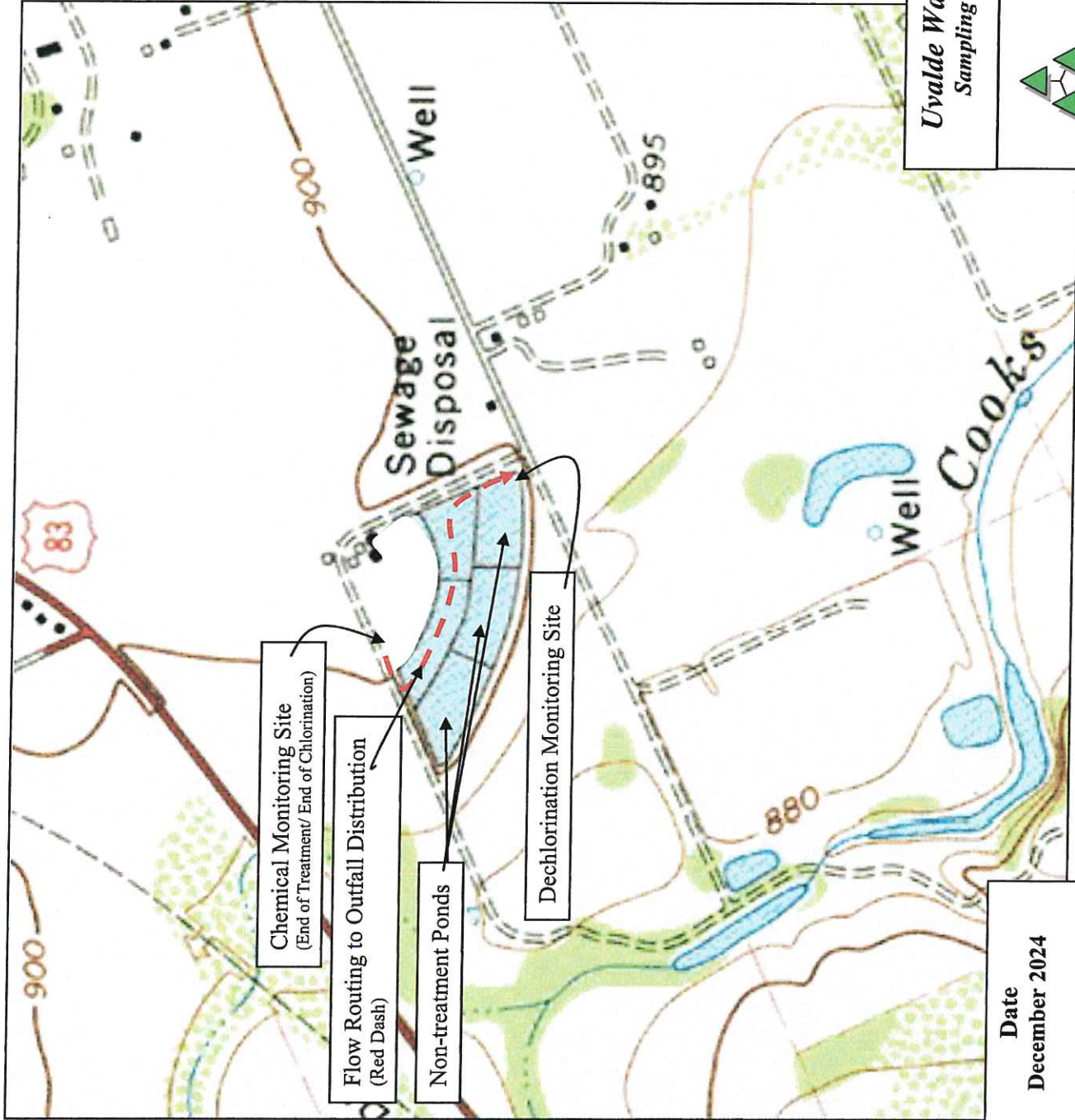
Date  
December 2024

*Uvalde Plant Outfall Locations*

  
**Kenneth M Cave & Associates**  
P.O. Box 768 Leakey, TX 78873  
210-414-3906



Attachment "E"



Approximate Scale = 1000'

**Uvalde Wastewater Treatment Plant**  
Sampling Locations and Flow Routing



**Kenneth M. Cave & Associates**  
P.O. Box 768 Leakey, TX 78873  
210-414-3906

Date  
December 2024



# 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 Uvalde

Permit No. WQ00 10306-001EPA ID No. TX 0023094

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

Approximately 1.3 miles southwest of the intersection of FM 117 and US 83 Uvalde County, Texas

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

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

First and Last Name: Juan Zamora

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

Title: Director of Public Works

Mailing Address: P.O. Box 799

City, State, Zip Code: Uvalde, Texas, 79902-0799

Phone No.: 830-275-1785 Ext.: Click here to enter text Fax No.: 830-278-2234

E-mail Address: zamora@uvaldetx.gov

2. List the county in which the facility is located: Uvalde
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.

Outfalls 001 and 003 to Cooks Slough thence to the Leona River (Segment 2109) in the Nueces River Basin  
Outfall 002 is to the Leona River  
(Segment 2109) in the Nueces 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:

Existing facility was developed for the purpose of wastewater treatment

#### 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





## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

# DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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): 2.44

2-Hr Peak Flow (MGD): 7.32

Estimated construction start date: Existing

Estimated waste disposal start date: Existing

#### B. Interim II Phase

Design Flow (MGD): Click to enter text.

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

#### C. Final Phase

Design Flow (MGD): Click to enter text.

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

#### D. Current Operating Phase

Provide the startup date of the facility: 01/01/1987

### 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.**

Lift Station, Carousel Aeration Basin, Dual Final Clarifiers, Chlorine Contact Chamber, Dechlorination in ponds

## 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)
Carousel Aeration Basin	1	180' x 120' x 13'
Final Clarifier	2	102' x 13'
Chlorine Contact Chamber	2	60'L x 13'W x 11.5'D
Natural Dechlorination Ponds	2	Various Dimensions (5.5 MG Volume)
Belt Press Sludge Dewatering	1	

## C. Process Flow Diagram

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

**Attachment:** B

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

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

- Latitude: 29.186533
- Longitude: -99.786944

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

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

City of Uvalde in Uvalde County, Texas

**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
City of Uvalde Collection System	City of Uvalde	Publicly Owned	
		<a href="#">Choose an item.</a>	
		<a href="#">Choose an item.</a>	
		<a href="#">Choose an item.</a>	

#### 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.**

[Click to enter text.](#)

#### 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.

Click to enter text.

## 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: 01/01/1986

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

Click to enter text.

### B. Buffer zones

Have the buffer zone requirements been met?

☒ Yes ☐ No

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

Click to enter text.

### C. Other actions required by the current permit

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

☐ Yes ☒ No

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

Click to enter text.

### D. Grit and grease treatment

#### 1. Acceptance of grit and grease waste

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

☐ Yes ☒ No

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

#### 2. Grit and grease processing

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

Click to enter text.

#### 3. Grit disposal

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

☐ Yes ☐ No

If **No**, contact the TCEQ Municipal Solid Waste team at 512-239-2335. 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.



Click to enter text.

#### 4. Grease and decanted liquid disposal

Note: A registration or permit is required for grease disposal. Grease shall not be combined with treatment plant sludge. For more information, contact the TCEQ Municipal Solid Waste team at 512-239-2335.

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

Click to enter text.

### E. Stormwater management

#### 1. Applicability

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

#### 2. MSGP coverage

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

☐ Yes ☒ No

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

TXR05 [Click 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:

Click to enter text.

**4. Existing coverage in individual permit**

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

☒ Yes      ☐ No

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

TXR05GF25 - Contaminated areas contained within concrete structures and routed through treatment system

**5. Zero stormwater discharge**

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

☐ Yes      ☒ No

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

Click to enter text.

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

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

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

☐ Yes      ☒ No

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

[Click to enter text.](#)

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

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

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

If yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions. [Click to enter text.](#)

#### 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 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.

[Click to enter text.](#)

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

##### 2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

☒ Yes ☐ No

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



☐ Yes ☒ No

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

☐ Yes ☒ No

If **yes to any of the above**, provide 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.

Click to enter text.

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

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

Is 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.

Click to enter text.

## 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.

**Table1.0(2) – Pollutant Analysis for Wastewater Treatment Facilities**

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD <sub>5</sub> , mg/l					
Total Suspended Solids, mg/l					
Ammonia Nitrogen, mg/l					
Nitrate Nitrogen, mg/l					
Total Kjeldahl Nitrogen, mg/l					
Sulfate, mg/l					
Chloride, mg/l					
Total Phosphorus, mg/l					
pH, standard units					
Dissolved Oxygen*, mg/l					
Chlorine Residual, mg/l					
<i>E.coli</i> (CFU/100ml) freshwater					
Enterococci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity, $\mu$ mohs/cm, †					
Oil & Grease, mg/l					
Alkalinity (CaCO <sub>3</sub> )*, mg/l					

\*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: Juan Zamora

Facility Operator's License Classification and Level: B

Facility Operator's License Number: 457-41-4480



**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	326.6	Class B: PSRP Aerobic Digestion	Option 11: Biosolids covered at end of each day
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

If "Other" is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): [Click to enter text.](#)

**D. Disposal site**

Disposal site name: City of Uvalde

Hauler registration number: 24189

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	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Marketing and Distribution of sludge	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Sludge Surface Disposal or Sludge Monofill	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Temporary storage in sludge lagoons	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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:** [Click to enter text.](#)
- USDA Natural Resources Conservation Service Soil Map:  
**Attachment:** [Click to enter text.](#)
- Federal Emergency Management Map:  
**Attachment:** [Click to enter text.](#)
- Site map:  
**Attachment:** [Click to enter text.](#)

Discuss in a description if any of the following exist within the lagoon area. Check all that apply.

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

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

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

[Click to enter text.](#)

### B. Temporary storage information

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

Nitrate Nitrogen, mg/kg: [Click to enter text.](#)  
Total Kjeldahl Nitrogen, mg/kg: [Click to enter text.](#)  
Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: [Click to enter text.](#)  
Phosphorus, mg/kg: [Click to enter text.](#)  
Potassium, mg/kg: [Click to enter text.](#)  
pH, standard units: [Click to enter text.](#)  
Ammonia Nitrogen mg/kg: [Click to enter text.](#)  
Arsenic: [Click to enter text.](#)  
Cadmium: [Click to enter text.](#)  
Chromium: [Click to enter text.](#)  
Copper: [Click to enter text.](#)  
Lead: [Click to enter text.](#)  
Mercury: [Click to enter text.](#)  
Molybdenum: [Click to enter text.](#)  
Nickel: [Click to enter text.](#)  
Selenium: [Click to enter text.](#)  
Zinc: [Click to enter text.](#)  
Total PCBs: [Click to enter text.](#)

Provide the following information:

Volume and frequency of sludge to the lagoon(s): [Click to enter text.](#)  
Total dry tons stored in the lagoons(s) per 365-day period: [Click to enter text.](#)  
Total dry tons stored in the lagoons(s) over the life of the unit: [Click to enter text.](#)

### C. Liner information

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

☐ Yes ☐ No

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

[Click to enter text.](#)

### D. Site development plan

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

Click to enter text.

Attach the following documents to the application.

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

#### E. Groundwater monitoring

Is groundwater monitoring currently conducted at this site, or are any wells available for groundwater monitoring, or are groundwater monitoring data otherwise available for the sludge lagoon(s)?

☒ Yes ☐ No

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

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

## 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:



**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:

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

## 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:

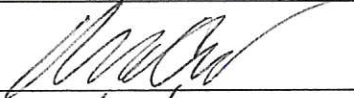
I certify that all laboratory tests submitted with this application meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*.

Printed Name: Kenneth Cave

Title: Environmental Scientist Consultant

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

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

  
2/14/25

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

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

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

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

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

### B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

☐ Yes ☐ No

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

[Click to enter text.](#)

### C. Sea grasses

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

☐ Yes ☐ No

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

[Click to enter text.](#)



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

#### A. Receiving water type

Identify the appropriate description of the receiving waters.

☐ Stream

☐ Freshwater Swamp or Marsh

☐ Lake or Pond

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

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

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

☐ Man-made Channel or Ditch

☐ Open Bay

☐ Tidal Stream, Bayou, or Marsh

☐ Other, specify: [Click to enter text.](#)

#### B. Flow characteristics

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

☐ Intermittent - dry for at least one week during most years

☐ Intermittent with Perennial Pools - enduring pools with sufficient habitat to maintain significant aquatic life uses

☐ Perennial - normally flowing

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

☐ USGS flow records

☐ Historical observation by adjacent landowners

☐ Personal observation

☐ Other, specify: [Click to enter text.](#)

#### C. Downstream perennial confluences

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

[Click to enter text.](#)

#### D. Downstream characteristics

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

☐ Yes ☐ No

If yes, discuss how.

[Click to enter text.](#)

#### E. Normal dry weather characteristics

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

[Click to enter text.](#)

Date and time of observation: [Click to enter text.](#)

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.

☐ Oil field activities

☐ Urban runoff

☐ Upstream discharges

☐ Agricultural runoff

☐ Septic tanks

☐ Other(s), specify: [Click to enter text.](#)

#### B. Waterbody uses

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

☐ Livestock watering

☐ 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: <a href="#">Click to enter text.</a> |

### 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 4.0: POLLUTANT ANALYSIS REQUIREMENTS

The following **is required** for facilities with a permitted or proposed flow of **1.0 MGD or greater**, facilities with an approved **pretreatment** program, or facilities classified as a **major** facility. See instructions for further details.

This worksheet is not required minor amendments without renewal.

### Section 1. Toxic Pollutants (Instructions Page 78)

For pollutants identified in Table 4.0(1), indicate the type of sample.

Grab ☒ Composite ☒

Date and time sample(s) collected: **10/22/2024 @ 0800**

**Table 4.0(1) – Toxics Analysis**

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acrylonitrile	<50		1	50
Aldrin	<0.01		1	0.01
Aluminum	16		1	2.5
Anthracene	<10		1	10
Antimony	<5		1	5
Arsenic	0.6		1	0.5
Barium	20		1	3
Benzene	<10		1	10
Benzidine	<50		1	50
Benzo(a)anthracene	<5		1	5
Benzo(a)pyrene	<5		1	5
Bis(2-chloroethyl)ether	<10		1	10
Bis(2-ethylhexyl)phthalate	<10		1	10
Bromodichloromethane	15		1	10
Bromoform	<10		1	10
Cadmium	<1		1	1
Carbon Tetrachloride	<2		1	2
Carbaryl	<5		1	5
Chlordane*	<0.2		1	0.2
Chlorobenzene	<10		1	10
Chlorodibromomethane	<10		1	10

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Chloroform	70.5		1	10
Chlorpyrifos	<0.05		1	0.05
Chromium (Total)	<3		1	3
Chromium (Tri) (*1)	<3		1	N/A
Chromium (Hex)	<3		1	3
Copper	<2		1	2
Chrysene	<5		1	5
p-Chloro-m-Cresol	<10		1	10
4,6-Dinitro-o-Cresol	<50		1	50
p-Cresol	<10		1	10
Cyanide (*2)	<10		1	10
4,4'- DDD	<0.1		1	0.1
4,4'- DDE	<0.1		1	0.1
4,4'- DDT	<0.02		1	0.02
2,4-D	<0.7		1	0.7
Demeton (O and S)	<0.20		1	0.20
Diazinon	<0.5		1	0.5/0.1
1,2-Dibromoethane	<10		1	10
m-Dichlorobenzene	<10		1	10
o-Dichlorobenzene	<10		1	10
p-Dichlorobenzene	<10		1	10
3,3'-Dichlorobenzidine	<5		1	5
1,2-Dichloroethane	<10		1	10
1,1-Dichloroethylene	<10		1	10
Dichloromethane	<20		1	20
1,2-Dichloropropane	<10		1	10
1,3-Dichloropropene	<10		1	10
Dicofol	<1		1	1
Dieldrin	<0.02		1	0.02
2,4-Dimethylphenol	<10		1	10
Di-n-Butyl Phthalate	<10		1	10
Diuron	<0.09		1	0.09
Endosulfan I (alpha)	<0.01		1	0.01

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Endosulfan II (beta)	<0.02		1	0.02
Endosulfan Sulfate	<0.1		1	0.1
Endrin	<0.02		1	0.02
Ethylbenzene	<10		1	10
Fluoride	<200		1	200
Guthion	<0.1		1	0.1
Heptachlor	<0.01		1	0.01
Heptachlor Epoxide	<0.01		1	0.01
Hexachlorobenzene	<5		1	5
Hexachlorobutadiene	<10		1	10
Hexachlorocyclohexane (alpha)	<0.05		1	0.05
Hexachlorocyclohexane (beta)	<0.05		1	0.05
gamma-Hexachlorocyclohexane (Lindane)	<0.05		1	0.05
Hexachlorocyclopentadiene	<10		1	10
Hexachloroethane	<20		1	20
Hexachlorophene	<10		1	10
Lead	<0.5		1	0.5
Malathion	<0.1		1	0.1
Mercury	<0.005		1	0.005
Methoxychlor	<2		1	2
Methyl Ethyl Ketone	<50		1	50
Mirex	<0.02		1	0.02
Nickel	<2		1	2
Nitrate-Nitrogen	2,300		1	100
Nitrobenzene	<10		1	10
N-Nitrosodiethylamine	<20		1	20
N-Nitroso-di-n-Butylamine	<20		1	20
Nonylphenol	<333		1	333
Parathion (ethyl)	<0.1		1	0.1
Pentachlorobenzene	<20		1	20
Pentachlorophenol	<5		1	5
Phenanthrene	<10		1	10



Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Polychlorinated Biphenyls (PCB's) (*3)	<0.2		1	0.2
Pyridine	<20		1	20
Selenium	<5		1	5
Silver	<0.5		1	0.5
1,2,4,5-Tetrachlorobenzene	<20		1	20
1,1,2,2-Tetrachloroethane	<10		1	10
Tetrachloroethylene	<10		1	10
Thallium	<0.5		1	0.5
Toluene	<10		1	10
Toxaphene	<0.3		1	0.3
2,4,5-TP (Silvex)	<0.3		1	0.3
Tributyltin (see instructions for explanation)	<0.01		1	0.01
1,1,1-Trichloroethane	<10		1	10
1,1,2-Trichloroethane	<10		1	10
Trichloroethylene	<10		1	10
2,4,5-Trichlorophenol	<50		1	50
TTHM (Total Trihalomethanes)	87.2		1	10
Vinyl Chloride	<10		1	10
Zinc	17		1	5

(\*1) Determined by subtracting hexavalent Cr from total Cr.

(\*2) Cyanide, amenable to chlorination or weak-acid dissociable.

(\*3) The sum of seven PCB congeners 1242, 1254, 1221, 1232, 1248, 1260, and 1016.

## Section 2. Priority Pollutants

For pollutants identified in Tables 4.0(2)A-E, indicate type of sample.

Grab ☒ Composite ☒

Date and time sample(s) collected: 10/22/2024 @ 0800

**Table 4.0(2)A – Metals, Cyanide, and Phenols**

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Antimony	<5		1	5
Arsenic	0.6		1	0.5
Beryllium	<0.5		1	0.5
Cadmium	<1		1	1
Chromium (Total)	<3		1	3
Chromium (Hex)	<3		1	3
Chromium (Tri) (*1)	<3		1	N/A
Copper	<2		1	2
Lead	<0.5		1	0.5
Mercury	<0.005		1	0.005
Nickel	<2		1	2
Selenium	<5		1	5
Silver	<0.5		1	0.5
Thallium	<0.5		1	0.5
Zinc	17		1	5
Cyanide (*2)	<10		1	10
Phenols, Total	11		1	10

(\*1) Determined by subtracting hexavalent Cr from total Cr.

(\*2) Cyanide, amenable to chlorination or weak-acid dissociable

**Table 4.0(2)B – Volatile Compounds**

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acrolein	<50		1	50
Acrylonitrile	<50		1	50
Benzene	<10		1	10
Bromoform	<10		1	10
Carbon Tetrachloride	<2		1	2
Chlorobenzene	<10		1	10
Chlorodibromomethane	<10		1	10
Chloroethane	<50		1	50
2-Chloroethylvinyl Ether	<10		1	10
Chloroform	70.5		1	10
Dichlorobromomethane [Bromodichloromethane]	15.0		1	10
1,1-Dichloroethane	<10		1	10
1,2-Dichloroethane	<10		1	10
1,1-Dichloroethylene	<10		1	10
1,2-Dichloropropane	<10		1	10
1,3-Dichloropropylene [1,3-Dichloropropene]	<10		1	10
1,2-Trans-Dichloroethylene	<10		1	10
Ethylbenzene	<10		1	10
Methyl Bromide	<50		1	50
Methyl Chloride	<50		1	50
Methylene Chloride	<20		1	20
1,1,2,2-Tetrachloroethane	<10		1	10
Tetrachloroethylene	<10		1	10
Toluene	<10		1	10
1,1,1-Trichloroethane	<10		1	10
1,1,2-Trichloroethane	<10		1	10
Trichloroethylene	<10		1	10
Vinyl Chloride	<10		1	10



**Table 4.0(2)C – Acid Compounds**

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
2-Chlorophenol	<10		1	10
2,4-Dichlorophenol	<10		1	10
2,4-Dimethylphenol	<10		1	10
4,6-Dinitro-o-Cresol	<50		1	50
2,4-Dinitrophenol	<50		1	50
2-Nitrophenol	<20		1	20
4-Nitrophenol	<50		1	50
P-Chloro-m-Cresol	<10		1	10
Pentalchlorophenol	<5		1	5
Phenol	<10		1	10
2,4,6-Trichlorophenol	<10		1	10

**Table 4.0(2)D – Base/Neutral Compounds**

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acenaphthene	<10		1	10
Acenaphthylene	<10		1	10
Anthracene	<10		1	10
Benzidine	<50		1	50
Benzo(a)Anthracene	<5		1	5
Benzo(a)Pyrene	<5		1	5
3,4-Benzofluoranthene	<10		1	10
Benzo(ghi)Perylene	<20		1	20
Benzo(k)Fluoranthene	<5		1	5
Bis(2-Chloroethoxy)Methane	<10		1	10
Bis(2-Chloroethyl)Ether	<10		1	10
Bis(2-Chloroisopropyl)Ether	<10		1	10
Bis(2-Ethylhexyl)Phthalate	<10		1	10
4-Bromophenyl Phenyl Ether	<10		1	10
Butyl benzyl Phthalate	<10		1	10
2-Chloronaphthalene	<10		1	10
4-Chlorophenyl phenyl ether	<10		1	10
Chrysene	<5		1	5
Dibenzo(a,h)Anthracene	<5		1	5
1,2-(o)Dichlorobenzene	<10		1	10
1,3-(m)Dichlorobenzene	<10		1	10
1,4-(p)Dichlorobenzene	<10		1	10
3,3-Dichlorobenzidine	<5		1	5
Diethyl Phthalate	<10		1	10
Dimethyl Phthalate	<10		1	10
Di-n-Butyl Phthalate	<10		1	10
2,4-Dinitrotoluene	<10		1	10
2,6-Dinitrotoluene	<10		1	10
Di-n-Octyl Phthalate	<10		1	10
1,2-Diphenylhydrazine (as Azo- benzene)	<20		1	20
Fluoranthene	<10		1	10

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Fluorene	<10		1	10
Hexachlorobenzene	<5		1	5
Hexachlorobutadiene	<10		1	10
Hexachlorocyclo-pentadiene	<10		1	10
Hexachloroethane	<20		1	20
Indeno(1,2,3-cd)pyrene	<5		1	5
Isophorone	<10		1	10
Naphthalene	<10		1	10
Nitrobenzene	<10		1	10
N-Nitrosodimethylamine	<50		1	50
N-Nitrosodi-n-Propylamine	<20		1	20
N-Nitrosodiphenylamine	<20		1	20
Phenanthrene	<10		1	10
Pyrene	<10		1	10
1,2,4-Trichlorobenzene	<10		1	10



**Table 4.0(2)E - Pesticides**

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Aldrin	<0.01		1	0.01
alpha-BHC (Hexachlorocyclohexane)	<0.05		1	0.05
beta-BHC (Hexachlorocyclohexane)	<0.05		1	0.05
gamma-BHC (Hexachlorocyclohexane)	<0.05		1	0.05
delta-BHC (Hexachlorocyclohexane)	<0.05		1	0.05
Chlordane	<0.2		1	0.2
4,4-DDT	<0.02		1	0.02
4,4-DDE	<0.1		1	0.1
4,4,-DDD	<0.1		1	0.1
Dieldrin	<0.02		1	0.02
Endosulfan I (alpha)	<0.01		1	0.01
Endosulfan II (beta)	<0.02		1	0.02
Endosulfan Sulfate	<0.1		1	0.1
Endrin	<0.02		1	0.02
Endrin Aldehyde	<0.1		1	0.1
Heptachlor	<0.01		1	0.01
Heptachlor Epoxide	<0.01		1	0.01
PCB-1242	<0.2		1	0.2
PCB-1254	<0.2		1	0.2
PCB-1221	<0.2		1	0.2
PCB-1232	<0.2		1	0.2
PCB-1248	<0.2		1	0.2
PCB-1260	<0.2		1	0.2
PCB-1016	<0.2		1	0.2
Toxaphene	<0.3		1	0.3

\* For PCBS, if all are non-detects, enter the highest non-detect preceded by a "<".

### Section 3. Dioxin/Furan Compounds

A. Indicate which of the following compounds from may be present in the influent from a contributing industrial user or significant industrial user. Check all that apply.

- ☐ 2,4,5-trichlorophenoxy acetic acid  
Common Name 2,4,5-T, CASRN 93-76-5
- ☐ 2-(2,4,5-trichlorophenoxy) propanoic acid  
Common Name Silvex or 2,4,5-TP, CASRN 93-72-1
- ☐ 2-(2,4,5-trichlorophenoxy) ethyl 2,2-dichloropropionate  
Common Name Erbon, CASRN 136-25-4
- ☐ 0,0-dimethyl 0-(2,4,5-trichlorophenyl) phosphorothioate  
Common Name Ronnel, CASRN 299-84-3
- ☐ 2,4,5-trichlorophenol  
Common Name TCP, CASRN 95-95-4
- ☐ hexachlorophene  
Common Name HCP, CASRN 70-30-4

For each compound identified, provide a brief description of the conditions of its/their presence at the facility.

Click to enter text.

B. Do you know or have any reason to believe that 2,3,7,8 Tetrachlorodibenzo-P-Dioxin (TCDD) or any congeners of TCDD may be present in your effluent?

☐ Yes ☐ No

If yes, provide a brief description of the conditions for its presence.

Click to enter text.

C. If any of the compounds in Subsection A or B are present, complete Table 4.0(2)F.

For pollutants identified in Table 4.0(2)F, indicate the type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: [Click to enter text.](#)

**Table 4.0(2)F – Dioxin/Furan Compounds**

Compound	Toxic Equivalenc y Factors	Wastewater Concentration (ppq)	Wastewater Equivalents (ppq)	Sludge Concentration (ppt)	Sludge Equivalents (ppt)	MAL (ppq)
2,3,7,8 TCDD	1					10
1,2,3,7,8 PeCDD	0.5					50
2,3,7,8 HxCDDs	0.1					50
1,2,3,4,6,7,8 HpCDD	0.01					50
2,3,7,8 TCDF	0.1					10
1,2,3,7,8 PeCDF	0.05					50
2,3,4,7,8 PeCDF	0.5					50
2,3,7,8 HxCDFs	0.1					50
2,3,4,7,8 HpCDFs	0.01					50
OCDD	0.0003					100
OCDF	0.0003					100
PCB 77	0.0001					0.5
PCB 81	0.0003					0.5
PCB 126	0.1					0.5
PCB 169	0.03					0.5
Total						



Project  
1122788

PCSL-C

Pollution Control Services Laboratories  
Chuck Wallgren  
1532 Universal City Blvd.  
Suite 100  
Universal City, TX 78148

Printed 11/07/2024  
8:40

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SAMPLE CROSS REFERENCE

Project

1122788

Pollution Control Services Laboratories  
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Suite 100  
Universal City, TX 78148

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Sample	Sample ID	Taken	Time	Received
2347329	779075	10/22/2024	08:00:00	10/23/2024

Bottle 01 Client supplied glass  
Bottle 02 Client supplied H2SO4 Amber Glass  
Bottle 03 Prepared Bottle: Phenol TRAACS Autosampler Vial (Batch 1144203) Volume: 6.00000 mL <== Derived from 02 ( 6 ml )  
Bottle 04 Prepared Bottle: 2 mL Autosampler Vial (Batch 1144677) Volume: 10.00000 mL <== Derived from 01 ( 998 ml )

Method	Bottle	PrepSet	Preparation	QcGroup	Analytical
EPA 615	04	1144677	10/23/2024	1145105	10/28/2024
EPA 420.4 1	03	1144203	10/23/2024	1144631	10/25/2024

Email: Kilgore.ProjectManagement@spllabs.com



## PCSL-C

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 Chuck Wallgren  
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 Universal City, TX 78148

Page 1 of 2

Project  
**1122788**

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## RESULTS

### Sample Results

2347329 779075

Received: 10/23/2024

Non-Potable Water

Collected by: Client  
 Taken: 10/22/2024

Pollution Control Se  
 08:00:00

PO:

EPA 420.4 I		Prepared: 1144203 10/23/2024 15:13:35	Analyzed 1144631 10/25/2024 08:13:00	AMB
Parameter	Results	Units	RL	Bottle
NELAC Phenolics, Total Recoverable	0.011	mg/L	0.005	03

EPA 615		Prepared: 1144677 10/23/2024 14:30:00	Analyzed 1145105 10/28/2024 18:23:00	KAP
Parameter	Results	Units	RL	Bottle
NELAC 2,4 Dichlorophenoxyacetic acid	<0.501	ug/L	0.501	04
NELAC 2,4,5-TP (Silvex)	<0.300	ug/L	0.300	04

### Sample Preparation

2347329 779075

Received: 10/23/2024

10/22/2024

EPA 420.4 I		Prepared: 1144203 10/23/2024 15:13:35	Analyzed 1144203 10/23/2024 15:13:35	SRJ
Parameter	Results	Units	RL	Bottle
NELAC Phenol Distillation	6/6	ml		02

EPA 615		Prepared: 1144677 10/23/2024 14:30:00	Analyzed 1144677 10/23/2024 14:30:00	LSM
Parameter	Results	Units	RL	Bottle
NELAC Esterification of Sample	10/998	ml		01



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**PCSL-C**

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Project

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Printed: 11/07/2024

2347329 779075

Received: 10/23/2024

10/22/2024

EPA 615

Prepared: 1144677 10/23/2024 14:30:00 Analyzed 1145105 10/28/2024 18:23:00 KAP

NELAC Herbicides by GC

Entered

04

Qualifiers:

We report results on an As Received (or Wet) basis unless marked Dry Weight.

Unless otherwise noted, testing was performed at SPL, Inc.- Kilgore laboratory which holds International, Federal, and state accreditations. Please see our Websites for details.

(N)ELAC - Covered in our NELAC scope of accreditation  
z -- Not covered by our NELAC scope of accreditation

These analytical results relate to the sample tested. This report may NOT be reproduced EXCEPT in FULL without written approval of SPL Kilgore. Unless otherwise specified, these test results meet the requirements of NELAC.  
RL is the Reporting Limit (sample specific quantitation limit) and is at or above the Method Detection Limit (MDL). CAS is Chemical Abstract Service number. RL is our Reporting Limit, or Minimum Quantitation Level. The RL takes into account the Instrument Detection Limit (IDL), Method Detection Limit (MDL), and Practical Quantitation Limit (PQL), and any dilutions and/or concentrations performed during sample preparation (EQL). Our analytical result must be above this RL before we report a value in the 'Results' column of our report (without a 'J' flag). Otherwise, we report ND (Not Detected above RL), because the result is "<" (less than) the number in the RL column. MAL is Minimum Analytical Level and is typically from regulatory agencies. Unless we report a result in the result column, or interferences prevent it, we work to have our RL at or below the MAL.

*Bill Peery*

Bill Peery, MS, VP Technical Services



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# QUALITY CONTROL



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Universal City, TX 78148

Page 1 of 2

Project

1122788

Printed 11/07/2024

Analytical Set

1144631

EPA 420.4 1

### Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Phenolics, Total Recoverable	1144203	0.004	0.003	0.005	mg/L	126937004
Phenolics, Total Recoverable	1144203	0.005	0.003	0.005	mg/L	126937042

### CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Phenolics, Total Recoverable	0.198	0.200	mg/L	99.0	90.0 - 110	126936997
Phenolics, Total Recoverable	0.195	0.200	mg/L	97.5	90.0 - 110	126937005
Phenolics, Total Recoverable	0.192	0.200	mg/L	96.0	90.0 - 110	126937011
Phenolics, Total Recoverable	0.191	0.200	mg/L	95.5	90.0 - 110	126937022
Phenolics, Total Recoverable	0.191	0.200	mg/L	95.5	90.0 - 110	126937033
Phenolics, Total Recoverable	0.189	0.200	mg/L	94.5	90.0 - 110	126937046
Phenolics, Total Recoverable	0.202	0.200	mg/L	101	90.0 - 110	126937049

### Duplicate

Parameter	Sample	Result	Unknown	Unit	RPD	Limit%
Phenolics, Total Recoverable	2344252	0.069	0.072	mg/L	4.26	20.0
Phenolics, Total Recoverable	2346897	0.091	0.092	mg/L	1.09	20.0

### ICV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Phenolics, Total Recoverable	0.199	0.200	mg/L	99.5	90.0 - 110	126936996

### LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
Phenolics, Total Recoverable	1144203	0.196	0.193	0.200	90.0 - 110	98.0	96.5	mg/L	1.54	20.0

### Mat. Spike

Parameter	Sample	Spike	Unknown	Known	Units	Recovery %	Limits %	File
Phenolics, Total Recoverable	2344252	0.274	0.072	0.200	mg/L	101	90.0 - 110	126937003
Phenolics, Total Recoverable	2346897	0.247	0.092	0.200	mg/L	77.5	90.0 - 110	126937048 *

Analytical Set

1145105

EPA 615

### Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
2,4 Dichlorophenoxyacetic acid	1144677	ND	15.9	50.0	ug/L	126947406
2,4,5-TP (Silvex)	1144677	ND	8.93	30.0	ug/L	126947406

### CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
2,4 Dichlorophenoxyacetic acid	156	150	ug/L	104	80.0 - 115	126947405
2,4 Dichlorophenoxyacetic acid	150	150	ug/L	100	80.0 - 115	126947413
2,4,5-TP (Silvex)	150	150	ug/L	99.7	80.0 - 115	126947405
2,4,5-TP (Silvex)	157	150	ug/L	105	80.0 - 115	126947413

### LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
-----------	---------	-----	------	-------	---------	------	-------	-------	-----	--------

Email: [Kilgore.ProjectManagement@spplabs.com](mailto:Kilgore.ProjectManagement@spplabs.com)



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# QUALITY CONTROL



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Project

1122788

Printed 11/07/2024

### LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
2,4-Dichlorophenoxyacetic acid	1144677	118	112	100	0.100 - 319	118	112	ug/L	5.22	30.0
2,4,5-TP (Silvex)	1144677	89.6	91.7	100	0.100 - 244	89.6	91.7	ug/L	2.32	30.0

### Surrogate

Parameter	Sample	Type	Reading	Known	Units	Recover%	Limits%	File
2,4-Dichlorophenylacetic Acid		CCV	132	200	ug/L	66.0	0.100 - 313	126947405
2,4-Dichlorophenylacetic Acid		CCV	128	200	ug/L	64.0	0.100 - 313	126947413
2,4-Dichlorophenylacetic Acid	1144677	Blank	83.5	200	ug/L	41.8	0.100 - 313	126947406
2,4-Dichlorophenylacetic Acid	1144677	LCS	89.6	200	ug/L	44.8	0.100 - 313	126947407
2,4-Dichlorophenylacetic Acid	1144677	LCS Dup	89.8	200	ug/L	44.9	0.100 - 313	126947408
2,4-Dichlorophenylacetic Acid	2347329	Unknown	0.903	2.00	ug/L	45.2	0.100 - 313	126947412

\* Out RPD is Relative Percent Difference:  $\text{abs}(r_1 - r_2) / \text{mean}(r_1, r_2) * 100\%$

Recover% is Recovery Percent:  $\text{result} / \text{known} * 100\%$

Blank - Method Blank (reagent water or other blank matrices that contains all reagents except standard(s) and is processed simultaneously with and under the same conditions as samples; carried through preparation and analytical procedures exactly like a sample; monitors); CCV - Continuing Calibration Verification (same standard used to prepare the curve; typically a mid-range concentration; verifies the continued validity of the calibration curve); ICV - Initial Calibration Verification; LCS Dup - Laboratory Control Sample Duplicate (replicate LCS; analyzed when there is insufficient sample for duplicate or MSD; quantifies accuracy and precision.); Surrogate - Surrogate (mimics the analyte of interest but is unlikely to be found in environmental samples; added to analytical samples for QC purposes. \*\*ANSI/ASQC E4 1994 Ref #4 TRADE QA Resources Guide.)

Email: [Kilgore.ProjectManagement@spplabs.com](mailto:Kilgore.ProjectManagement@spplabs.com)



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1122788 CoC Print Group 001 of 001

# POLLUTION CONTROL SERVICES

1532 Universal City Blvd, Suite 100  
Universal City, TX 78148-3318  
Facsimile 210.658.7903  
210.340.0343

## CHAIN OF CUSTODY & SUBCONTRACT TRACKING SHEET

TO: SPL-LAB Corp Relinquished by: Lauren Wallgren  
2600 Dudley Road Date/Time: 10/22/2024 @ 1500  
Kilgore, TX 75662 Received by: Fed EX  
Date/Time: 10/22/24 1500

PCS#	Date	Time	Analysis Requested	Pres	T. A. T.
779075	10/22/2024	0800	Herbicides 615	Ice	Std
779076	10/22/2024	0800	Phenols, Distillable	H <sub>2</sub> SO <sub>4</sub>	Std

Comments/Special Instructions: \_\_\_\_\_

Unless otherwise requested, send results and invoice to:

Chuck Wallgren  
Pollution Control Services  
1532 Universal City Blvd, Suite 100  
Universal City, TX 78148-3318

Authorized by: \_\_\_\_\_

Relgr.  
10/23/24  
1030

*Lauren Wallgren*  
Fed EX

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

10-22-24

*Rayshawn M*  
10/23/24

1122788 CoC Print Group 001 of 001

10/22/24, 3:05 PM

FedEx Ship Manager - Print Your Label(s)

<p>ORIGIN D/NIRA (210) 340-0343 CHUCK WALLGREN 1532 UNIVERSAL CITY BLVD. #100 UNIVERSAL CITY TX 76148 UNITED STATES US</p>		<p>SHIP DATE: 22OCT24 ACTWGT: 14.00 LB CAD: 112M47389NET4760 DIMS: 12x12x10 IN BILL SENDER</p>	
<p>TO SPL LAB KILGORE SPL LAB KILGORE 2600 DUDLEY ROAD</p>		<p>KILGORE TX 75662 REF: (803) 984-0551 PO: 0201</p>	
<p>DEPT: 58C.54/FB6/C6C4</p>		<p>WED - 23 OCT 10:30A PRIORITY OVERNIGHT</p>	
<p>TRK# 7794 4282 8520 0201</p>		<p>AH G G G A TX-US SHV 75662</p>	
			

10/23 10:30 AM  
Date Time  
Temp: 4.0 13.7  
Tech  
Therm#: 6443 Corr Fact: 0.1 C

**After printing this label:**

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

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POLLUTION CONTROL SERVICES

1532 Universal City Blvd, Suite 100  
Universal City, TX 78148-3318  
Facsimile 210.658.7903  
210.340.0343

CHAIN OF CUSTODY & SUBCONTRACT TRACKING SHEET

TO: SPL-LAB Corp  
2600 Dudley Road  
Kilgore, TX 75662

Relinquished by: Lauren Wallgren  
Date/Time: 10/22/2024 @ 1500

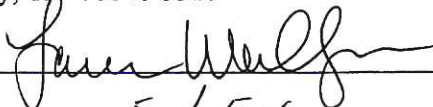
Received by: Fed EX  
Date/Time: 10/22/24 1500

PCS#	Date	Time	Analysis Requested	Pres	T. A. T.
779075	10/22/2024	0800	Herbicides 615	Ice	Std
779076	10/22/2024	0800	Phenols, Distillable	H <sub>2</sub> SO <sub>4</sub>	Std

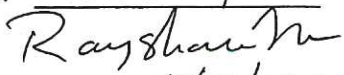
Comments/Special Instructions:

Unless otherwise requested, send results and invoice to:

Chuck Wallgren  
Pollution Control Services  
1532 Universal City Blvd, Suite 100  
Universal City, TX 78148-3318

Authorized by:  Date: 10-22-24

Relgr. Fed EX  
10/23/24  
1030

  
10/23/24



Project  
1122788

**PCSL-C**

Pollution Control Services Laboratories  
Chuck Wallgren  
1532 Universal City Blvd.  
Suite 100  
Universal City, TX 78148

Printed 11/07/2024  
8:40

**TABLE OF CONTENTS**

This report consists of this Table of Contents and the following pages:

Report Name	Description	Pages
1122788_r02_01_ProjectSamples	SPL Kilgore Project P:1122788 C:PCSL Project Sample Cross Reference t:304	1
1122788_r03_03_ProjectResults	SPL Kilgore Project P:1122788 C:PCSL Project Results t:304	2
1122788_r10_05_ProjectQC	SPL Kilgore Project P:1122788 C:PCSL Project Quality Control Groups	2
1122788_r99_09_CoC_1_of_1	SPL Kilgore CoC PCSL 1122788_1_of_1	2
Total Pages:		7





## SAMPLE CROSS REFERENCE

Project

1122788

Printed 11/7/2024 Page 1 of 1  
 779075

Pollution Control Services Laboratories  
 Chuck Wallgren  
 1532 Universal City Blvd.  
 Suite 100  
 Universal City, TX 78148

Sample	Sample ID	Taken	Time	Received
2347329	779075	10/22/2024	08:00:00	10/23/2024

Bottle 01 Client supplied glass

Bottle 02 Client supplied H2SO4 Amber Glass

Bottle 03 Prepared Bottle: Phenol TRAACS Autosampler Vial (Batch 1144203) Volume: 6.00000 mL <== Derived from 02 ( 6 ml )

Bottle 04 Prepared Bottle: 2 mL Autosampler Vial (Batch 1144677) Volume: 10.00000 mL <== Derived from 01 ( 998 ml )

Method	Bottle	PrepSet	Preparation	QcGroup	Analytical
EPA 615	04	1144677	10/23/2024	1145105	10/28/2024
EPA 420.4 1	03	1144203	10/23/2024	1144631	10/25/2024

Email: Kilgore.ProjectManagement@spllabs.com

Report Page 2 of 8



**PCSL-C**

Page 1 of 2

Pollution Control Services Laboratories  
Chuck Wallgren  
1532 Universal City Blvd.  
Suite 100  
Universal City, TX 78148

Project  
**1122788**

Printed: 11/07/2024

**RESULTS**

**Sample Results**

<b>2347329 779075</b>		Received: 10/23/2024	
Non-Potable Water	Collected by: Client	Pollution Control Se	PO:
	Taken: 10/22/2024	08:00:00	
<hr/>			
EPA 420.4 I		Prepared: 1144203 10/23/2024 15:13:35	Analyzed 1144631 10/25/2024 08:13:00 AMB
Parameter	Results	Units	RL
NELAC Phenolics, Total Recoverable	0.011	mg/L	0.005
<hr/>			
EPA 615		Prepared: 1144677 10/23/2024 14:30:00	Analyzed 1145105 10/28/2024 18:23:00 KAP
Parameter	Results	Units	RL
NELAC 2,4 Dichlorophenoxyacetic acid	<0.501	ug/L	0.501
NELAC 2,4,5-TP (Silvex)	<0.300	ug/L	0.300

**Sample Preparation**

2347329 779075		Received: 10/23/2024							
10/22/2024									
<hr/>									
EPA 420.4 I		Prepared: 1144203 10/23/2024 15:13:35		Analyzed 1144203 10/23/2024 15:13:35		SRJ			
<hr/>									
NELAC	Phenol Distillation	6/6	ml	02					
<hr/>									
EPA 615		Prepared: 1144677 10/23/2024 14:30:00		Analyzed 1144677 10/23/2024 14:30:00		LSM			
<hr/>									
NELAC	Esterification of Sample	10/998	ml	01					
<hr/>									
EPA 615		Prepared: 1144677 10/23/2024 14:30:00		Analyzed 1145105 10/28/2024 18:23:00		KAP			



Report Page 3 of 8



2600 Dudley Rd. Kilgore, Texas 75662  
24 Waterway Avenue, Suite 375 The Woodlands, TX 77380  
Office: 903-984-0551 \* Fax: 903-984-5914



**SPL**  
The Science of Sure

1  
2

## PCSL-C

Page 2 of 2

Pollution Control Services Laboratories  
Chuck Wallgren  
1532 Universal City Blvd.  
Suite 100  
Universal City, TX 78148

Project

1122788

Printed: 11/07/2024

2347329 779075

Received: 10/23/2024

10/22/2024

EPA 615

Prepared: 1144677 10/23/2024 14:30:00 Analyzed 1145105 10/28/2024 18:23:00 KAP

NELAC Herbicides by GC

Entered

04

Qualifiers:

We report results on an As Received (or Wet) basis unless marked Dry Weight.

Unless otherwise noted, testing was performed at SPL, Inc. - Kilgore laboratory which holds International, Federal, and state accreditations. Please see our Websites for details.

(N)ELAC - Covered in our NELAC scope of accreditation

z -- Not covered by our NELAC scope of accreditation

These analytical results relate to the sample tested. This report may NOT be reproduced EXCEPT in FULL without written approval of SPL Kilgore. Unless otherwise specified, these test results meet the requirements of NELAC.

RL is the Reporting Limit (sample specific quantitation limit) and is at or above the Method Detection Limit (MDL). CAS is Chemical Abstract Service number. RL is our Reporting Limit, or Minimum Quantitation Level. The RL takes into account the Instrument Detection Limit (IDL), Method Detection Limit (MDL), and Practical Quantitation Limit (PQL), and any dilutions and/or concentrations performed during sample preparation (EQL). Our analytical result must be above this RL before we report a value in the 'Results' column of our report (without a 'J' flag). Otherwise, we report ND (Not Detected above RL), because the result is "<" (less than) the number in the RL column. MAL is Minimum Analytical Level and is typically from regulatory agencies. Unless we report a result in the result column, or interferences prevent it, we work to have our RL at or below the MAL.

Bill Peery, MS, VP Technical Services



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# QUALITY CONTROL



**SPL**  
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## PCSL-C

Pollution Control Services Laboratories  
Chuck Wallgren  
1532 Universal City Blvd.  
Suite 100  
Universal City, TX 78148

Page 1 of 2

Project

1122788

Printed 11/07/2024

Analytical Set 1144631

EPA 420.4 1

### Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Phenolics, Total Recoverable	1144203	0.004	0.003	0.005	mg/L	126937004
Phenolics, Total Recoverable	1144203	0.005	0.003	0.005	mg/L	126937042

### CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Phenolics, Total Recoverable	0.198	0.200	mg/L	99.0	90.0 - 110	126936997
Phenolics, Total Recoverable	0.195	0.200	mg/L	97.5	90.0 - 110	126937005
Phenolics, Total Recoverable	0.192	0.200	mg/L	96.0	90.0 - 110	126937011
Phenolics, Total Recoverable	0.191	0.200	mg/L	95.5	90.0 - 110	126937022
Phenolics, Total Recoverable	0.191	0.200	mg/L	95.5	90.0 - 110	126937033
Phenolics, Total Recoverable	0.189	0.200	mg/L	94.5	90.0 - 110	126937046
Phenolics, Total Recoverable	0.202	0.200	mg/L	101	90.0 - 110	126937049

### Duplicate

Parameter	Sample	Result	Unknown	Unit	RPD	Limit%
Phenolics, Total Recoverable	2344252	0.069	0.072	mg/L	4.26	20.0
Phenolics, Total Recoverable	2346897	0.091	0.092	mg/L	1.09	20.0

### ICV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Phenolics, Total Recoverable	0.199	0.200	mg/L	99.5	90.0 - 110	126936996

### LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
Phenolics, Total Recoverable	1144203	0.196	0.193	0.200	90.0 - 110	98.0	96.5	mg/L	1.54	20.0

### Mat. Spike

Parameter	Sample	Spike	Unknown	Known	Units	Recovery %	Limits %	File
Phenolics, Total Recoverable	2344252	0.274	0.072	0.200	mg/L	101	90.0 - 110	126937003
Phenolics, Total Recoverable	2346897	0.247	0.092	0.200	mg/L	77.5	90.0 - 110	126937048 *

Analytical Set 1145105

EPA 615

### Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
2,4 Dichlorophenoxyacetic acid	1144677	ND	15.9	50.0	ug/L	126947406
2,4,5-TP (Silvex)	1144677	ND	8.93	30.0	ug/L	126947406

### CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
2,4 Dichlorophenoxyacetic acid	156	150	ug/L	104	80.0 - 115	126947405
2,4 Dichlorophenoxyacetic acid	150	150	ug/L	100	80.0 - 115	126947413
2,4,5-TP (Silvex)	150	150	ug/L	99.7	80.0 - 115	126947405
2,4,5-TP (Silvex)	157	150	ug/L	105	80.0 - 115	126947413

### LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
-----------	---------	-----	------	-------	---------	------	-------	-------	-----	--------

Email: Kilgore.ProjectManagement@spplabs.com



Report Page 5 of 8

# QUALITY CONTROL



**SPL**  
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## PCSL-C

Pollution Control Services Laboratories  
Chuck Wallgren  
1532 Universal City Blvd.  
Suite 100  
Universal City, TX 78148

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Project

1122788

Printed 11/07/2024

### LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
2,4-Dichlorophenoxyacetic acid	1144677	118	112	100	0.100 - 319	118	112	ug/L	5.22	30.0
2,4,5-TP (Silvex)	1144677	89.6	91.7	100	0.100 - 244	89.6	91.7	ug/L	2.32	30.0

### Surrogate

Parameter	Sample	Type	Reading	Known	Units	Recover%	Limits%	File
2,4-Dichlorophenylacetic Acid		CCV	132	200	ug/L	66.0	0.100 - 313	126947405
2,4-Dichlorophenylacetic Acid		CCV	128	200	ug/L	64.0	0.100 - 313	126947413
2,4-Dichlorophenylacetic Acid	1144677	Blank	83.5	200	ug/L	41.8	0.100 - 313	126947406
2,4-Dichlorophenylacetic Acid	1144677	LCS	89.6	200	ug/L	44.8	0.100 - 313	126947407
2,4-Dichlorophenylacetic Acid	1144677	LCS Dup	89.8	200	ug/L	44.9	0.100 - 313	126947408
2,4-Dichlorophenylacetic Acid	2347329	Unknown	0.903	2.00	ug/L	45.2	0.100 - 313	126947412

\* Out RPD is Relative Percent Difference:  $\text{abs}(r_1 - r_2) / \text{mean}(r_1, r_2) * 100\%$

Recover% is Recovery Percent:  $\text{result} / \text{known} * 100\%$

Blank - Method Blank (reagent water or other blank matrices that contains all reagents except standard(s) and is processed simultaneously with and under the same conditions as samples; carried through preparation and analytical procedures exactly like a sample; monitors); CCV - Continuing Calibration Verification (same standard used to prepare the curve; typically a mid-range concentration; verifies the continued validity of the calibration curve); ICV - Initial Calibration Verification; LCS Dup - Laboratory Control Sample Duplicate (replicate LCS; analyzed when there is insufficient sample for duplicate or MSD; quantifies accuracy and precision.); Surrogate - Surrogate (mimics the analyte of interest but is unlikely to be found in environmental samples; added to analytical samples for QC purposes. \*\*ANSI/ASQC E4 1994 Ref #4 TRADE QA Resources Guide.)

Email: Kilgore.ProjectManagement@spllabs.com



Report Page 6 of 8



1122788 CoC Print Group 001 of 001

10/22/24, 3:05 PM

FedEx Ship Manager - Print Your Label(s)

<p>ORIGIN ID: NIRA (210) 340-0343          CHUCK WALLGREN          1532 UNIVERSAL CITY BLVD. #100          UNIVERSAL CITY, TX 78148          UNITED STATES US</p>		<p>SHIP DATE: 22OCT24          ACTWGT: 14.00 LB          CAD: 112447368/NET14760          DIMS: 12x12x10 IN          BILL SENDER</p>	
<p>TO          SPL LAB KILGORE          SPL LAB KILGORE          2600 DUDLEY ROAD          KILGORE TX 75662</p>		<p>DEPT:          REF:          (803) 984-0551          NV:          PO:</p>	
<p>TRK# 7794 4282 8520          0201</p>		<p>WED - 23 OCT 10:30A          PRIORITY OVERNIGHT</p>	
<p>AH G G G A          TX-US          75662          SHV</p>			
			
<p>Date: 10/23 10:30 AM          Time: 4:00 PM          Temp: 13.9 C          Therm#: 6443 Corr Fact: 0.1 C</p>			

**After printing this label:**

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

**Warning:** Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.

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# POLLUTION CONTROL SERVICES

1532 Universal City Blvd, Suite 100  
Universal City, TX 78148-3318  
Facsimile 210.658.7903  
210.340.0343

2410204

## CHAIN OF CUSTODY & SUBCONTRACT TRACKING SHEET

TO: DHL Analytical  
2300 Double Creek Dr  
Round Rock, TX 78664

Relinquished by: Lauren Wallgren  
Date/Time: 10/22/2024 @ 1500  
Received by: [Signature]  
Date/Time: 10/23/24 - 10:13

Via FedEx

	PCS#	Date	Time	Analysis Requested	Pres	T. A. T.
01 ↓	779075	10/22/2024	0800	604.1 Hexachlorophene	Ice	Std
	779075	-----	---	Semi Volatiles 625	Ice	----
	779075	-----	---	Pesticide 1657	Ice	----
	779075	-----	---	Pesticides 608	Ice	----
	779075	-----	---	Pesticides 617	Ice	----
	779075	-----	---	Pesticides 632	Ice	----
02 ↓	779076	10/22/2024	0800	Cyanide, Amenable	NaOH	Std
	779076	-----	-----	Volatiles 624	Ice	Std

Comments/Special Instructions: 0.3°C therm #78 (custody seal not present)

Unless otherwise requested, send results and invoice to:

Chuck Wallgren  
Pollution Control Services  
1532 Universal City Blvd, Suite 100  
Universal City, TX 78148-3318

Authorized by:

[Signature]

Date:

10-22-24



October 30, 2024

Chuck Wallgren  
Pollution Control Services  
1532 Universal City Blvd. #100  
Universal City, TX 78148  
TEL: (210) 394-4570  
FAX:  
RE: PCS 779075

Order No.: 2410204

Dear Chuck Wallgren:

DHL Analytical, Inc. received 2 sample(s) on 10/23/2024 for the analyses presented in the following report.

There were no problems with the analyses and all data for associated QC met EPA or laboratory specifications except where noted in the Case Narrative and all estimated uncertainties of results are within method specifications.

If you have any questions regarding these tests results, please feel free to call.

Sincerely,

Joel Grice  
Executive VP of Environmental

This report was performed under the accreditation of the State of Texas Laboratory Certification  
Number: T104704211 - TX-C24-00120





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<b>WorkOrderSampleSummary 2410204 .....</b>	<b>7</b>
<b>Analytical Report 2410204 .....</b>	<b>8</b>
<b>AnalyticalQCSummaryReport 2410204 .....</b>	<b>14</b>

FROM: (210) 340-0343  
Chuck Wallgren  
1532 Universal City Blvd. #100  
Universal City TX 78148  
US

SHIP DATE: 22OCT24  
ACTWGT: 55.00 LB  
CAD: 112447368/INET4760  
DIMMED: 26 X 15 X 15 IN  
BILL SENDER

TODHL Analytical Receiving  
DHL Analytical  
2300 Double Creek

ROUND ROCK TX 78664  
(512) 388-8222

REF:

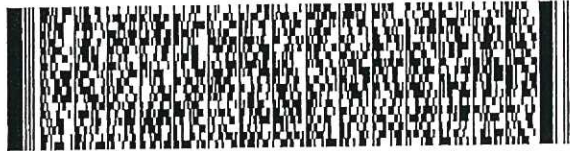
INV:  
PO:

DEPT:

(US)

58CJ54/FB6/C6C4

FedEx Ship Manager - Print Your Label(s)



FedEx  
Ground

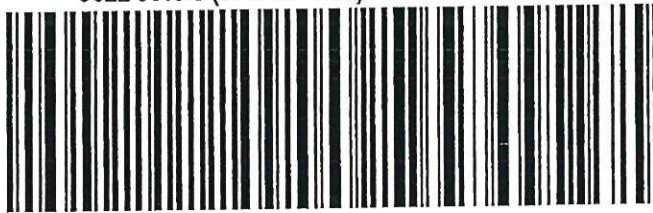


J244024091001uv

TRK# 7794 4196 8623

78664

9622 0019 0 (000 000 0000) 0 00 7794 4196 8623



10/22/24, 2:36 PM

# DHL Analytical, Inc.

## Sample Receipt Checklist

Client Name: Pollution Control Services

Date Received: 10/23/2024


Work Order Number: 2410204

Received by: KAO

Checklist completed by:  10/23/2024

Reviewed by:  10/23/2024

Carrier name: FedEx Ground

Shipping container/cooler in good condition?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not Present <input type="checkbox"/>
Custody seals intact on shipping container/cooler?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Present <input checked="" type="checkbox"/>
Custody seals intact on sample bottles?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Present <input checked="" type="checkbox"/>
Chain of custody present?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Chain of custody signed when relinquished and received?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Chain of custody agrees with sample labels?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Samples in proper container/bottle?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Sample containers intact?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Sufficient sample volume for indicated test?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
All samples received within holding time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Water - VOA vials have zero headspace?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	No VOA vials submitted <input type="checkbox"/> NA <input type="checkbox"/>
Water - pH<2 acceptable upon receipt?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input checked="" type="checkbox"/> LOT #
	Adjusted? _____	Checked by _____	
Water - pH>9 (S) or pH>10 (CN) acceptable upon receipt?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/> LOT # 12798
	Adjusted? <u>no</u>	Checked by 	
Container/Temp Blank temperature in compliance?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	

Cooler # 1  
Temp °C 0.3  
Seal Intact NP

Any No response must be detailed in the comments section below.

Client contacted: \_\_\_\_\_ Date contacted: \_\_\_\_\_ Person contacted: \_\_\_\_\_

Contacted by: \_\_\_\_\_ Regarding: \_\_\_\_\_

Comments: \_\_\_\_\_

Corrective Action: \_\_\_\_\_



---

**CLIENT:** Pollution Control Services  
**Project:** PCS 779075  
**Lab Order:** 2410204

---

**CASE NARRATIVE**

Samples were analyzed using the methods outlined in the following references:

ASTM, EPA and Standard Methods.

The compounds Nonylphenol and Dicofol are not NELAP Certified.

The compounds Diuron and Hexachlorophene are not NELAP Certified.

Several compounds for Pesticides are not NELAP Certified.

All method blanks, laboratory spikes, and/or matrix spikes met quality assurance objectives except where noted in the following. For Pesticides Analysis, the RPD of Endrin aldehyde for the Laboratory Control Spike Duplicate (LCSD-117720) was above the method control limits. This is flagged accordingly in the QC Summary Report. This compound was within method control limits in the associated LCS/ICV. No further corrective action was taken.

For Volatiles Analysis, three equal parts of Sample 779076 were composited prior to analysis.

For Volatiles Analysis, there was no recovery of 2-Chloroethylvinylether for the Matrix Spike and Matrix Spike Duplicate (2410196-13 MS/MSD), due to reaction to preservative. This is flagged accordingly in the QC Summary Report. The sample selected for the Batch QC was not from this workorder. No further corrective action was taken.

**DHL Analytical, Inc.**

**Date:** 30-Oct-24

**CLIENT:** Pollution Control Services  
**Project:** PCS 779075  
**Lab Order:** 2410204

**Work Order Sample Summary**

Lab Smp ID	Client Sample ID	Tag Number	Date Collected	Date Recved
2410204-01	779075		10/22/24 08:00 AM	10/23/2024
2410204-02	779076		10/22/24 08:00 AM	10/23/2024

# DHL Analytical, Inc.

Date: 30-Oct-24

**CLIENT:** Pollution Control Services  
**Project:** PCS 779075  
**Project No:**  
**Lab Order:** 2410204

**Client Sample ID:** 779075  
**Lab ID:** 2410204-01  
**Collection Date:** 10/22/24 08:00 AM  
**Matrix:** AQUEOUS

Analyses	Result	MDL	RL	Qual	Units	DF	Date Analyzed
<b>DIURON-HEXACHLOROPHENE BY LCMS</b>							Analyst: RA
Diuron	<0.0000297	0.0000297	0.0000792	N	mg/L	1	10/24/24 01:47 PM
Hexachlorophene	<0.000990	0.000990	0.00495	N	mg/L	1	10/24/24 01:47 PM
Surr: Carbazole	74.7	0	35-145		%REC	1	10/24/24 01:47 PM
<b>625.1 PCB BY GC/MS</b>							Analyst: DEW
Aroclor 1016	<0.0000983	0.0000983	0.000197		mg/L	1	10/29/24 11:29 AM
Aroclor 1221	<0.0000983	0.0000983	0.000197		mg/L	1	10/29/24 11:29 AM
Aroclor 1232	<0.0000983	0.0000983	0.000197		mg/L	1	10/29/24 11:29 AM
Aroclor 1242	<0.0000983	0.0000983	0.000197		mg/L	1	10/29/24 11:29 AM
Aroclor 1248	<0.0000983	0.0000983	0.000197		mg/L	1	10/29/24 11:29 AM
Aroclor 1254	<0.0000983	0.0000983	0.000197		mg/L	1	10/29/24 11:29 AM
Aroclor 1260	<0.0000983	0.0000983	0.000197		mg/L	1	10/29/24 11:29 AM
Total PCBs	<0.0000983	0.0000983	0.000197		mg/L	1	10/29/24 11:29 AM
Surr: 2-Fluorobiphenyl	100	0	43-116		%REC	1	10/29/24 11:29 AM
Surr: 4-Terphenyl-d14	116	0	33-141		%REC	1	10/29/24 11:29 AM
<b>625.1 SEMIVOLATILE WATER</b>							Analyst: DEW
Anthracene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Benzidine	<0.000987	0.000987	0.00395		mg/L	1	10/24/24 07:57 PM
Benzo[a]anthracene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Benzo[a]pyrene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Bis(2-chloroethyl)ether	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Bis(2-ethylhexyl)phthalate	<0.00296	0.00296	0.00592		mg/L	1	10/24/24 07:57 PM
Chrysene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
4,6-Dinitro-o-cresol	<0.00197	0.00197	0.00395		mg/L	1	10/24/24 07:57 PM
o-Cresol	<0.00197	0.00197	0.00395		mg/L	1	10/24/24 07:57 PM
p-Chloro-m-Cresol	<0.00197	0.00197	0.00395		mg/L	1	10/24/24 07:57 PM
m,p-Cresols	<0.00197	0.00197	0.00395		mg/L	1	10/24/24 07:57 PM
3,3'-Dichlorobenzidine	<0.000987	0.000987	0.00493		mg/L	1	10/24/24 07:57 PM
2,4-Dimethylphenol	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Di-n-butyl phthalate	<0.00296	0.00296	0.00592		mg/L	1	10/24/24 07:57 PM
Hexachlorobenzene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Hexachlorobutadiene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Hexachlorocyclopentadiene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Hexachloroethane	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Nitrobenzene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
N-Nitrosodiethylamine	<0.00197	0.00197	0.00395		mg/L	1	10/24/24 07:57 PM
N-Nitrosodi-n-butylamine	<0.000987	0.000987	0.00395		mg/L	1	10/24/24 07:57 PM
Pentachlorobenzene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM

<b>Qualifiers:</b>	* Value exceeds TCLP Maximum Concentration Level	C Sample Result or QC discussed in the Case Narrative
DF	Dilution Factor	E TPH pattern not Gas or Diesel Range Pattern
J	Analyte detected between MDL and RL	MDL Method Detection Limit
ND	Not Detected at the Method Detection Limit	RL Reporting Limit
S	Spike Recovery outside control limits	N Parameter not NELAP certified



# DHL Analytical, Inc.

Date: 30-Oct-24

**CLIENT:** Pollution Control Services  
**Project:** PCS 779075  
**Project No:**  
**Lab Order:** 2410204

**Client Sample ID:** 779075  
**Lab ID:** 2410204-01  
**Collection Date:** 10/22/24 08:00 AM  
**Matrix:** AQUEOUS

Analyses	Result	MDL	RL	Qual	Units	DF	Date Analyzed
<b>625.1 SEMIVOLATILE WATER</b>		<b>E625.1</b>					Analyst: DEW
Pentachlorophenol	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Phenanthrene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Pyridine	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
1,2,4,5-Tetrachlorobenzene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
2,4,5-Trichlorophenol	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
2-Chlorophenol	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
2,4-Dichlorophenol	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
2,4-Dinitrophenol	<0.00197	0.00197	0.00395		mg/L	1	10/24/24 07:57 PM
2-Nitrophenol	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
4-Nitrophenol	<0.00197	0.00197	0.00395		mg/L	1	10/24/24 07:57 PM
Phenol	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
2,4,6-Trichlorophenol	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Acenaphthene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Acenaphthylene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Benzo[b]fluoranthene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Benzo[g,h,i]perylene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Benzo[k]fluoranthene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Bis(2-chloroethoxy)methane	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Bis(2-chloroisopropyl)ether	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
4-Bromophenyl phenyl ether	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Butyl benzyl phthalate	<0.00296	0.00296	0.00592		mg/L	1	10/24/24 07:57 PM
2-Chloronaphthalene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
4-Chlorophenyl phenyl ether	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Dibenz[a,h]anthracene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Diethyl phthalate	<0.00296	0.00296	0.00592		mg/L	1	10/24/24 07:57 PM
Dimethyl phthalate	<0.00296	0.00296	0.00592		mg/L	1	10/24/24 07:57 PM
2,4-Dinitrotoluene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
2,6-Dinitrotoluene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Di-n-octyl phthalate	<0.00296	0.00296	0.00592		mg/L	1	10/24/24 07:57 PM
1,2-Diphenylhydrazine	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Fluoranthene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Fluorene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Indeno[1,2,3-cd]pyrene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Isophorone	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Naphthalene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
N-Nitrosodimethylamine	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
N-Nitrosodi-n-propylamine	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
N-Nitrosodiphenylamine	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM

<b>Qualifiers:</b>	*	Value exceeds TCLP Maximum Concentration Level	C	Sample Result or QC discussed in the Case Narrative
	DF	Dilution Factor	E	TPH pattern not Gas or Diesel Range Pattern
	J	Analyte detected between MDL and RL	MDL	Method Detection Limit
	ND	Not Detected at the Method Detection Limit	RL	Reporting Limit
	S	Spike Recovery outside control limits	N	Parameter not NELAP certified

# DHL Analytical, Inc.

Date: 30-Oct-24

**CLIENT:** Pollution Control Services  
**Project:** PCS 779075  
**Project No:**  
**Lab Order:** 2410204

**Client Sample ID:** 779075  
**Lab ID:** 2410204-01  
**Collection Date:** 10/22/24 08:00 AM  
**Matrix:** AQUEOUS

Analyses	Result	MDL	RL	Qual	Units	DF	Date Analyzed
<b>625.1 SEMIVOLATILE WATER</b>							
		<b>E625.1</b>					Analyst: DEW
Pyrene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
1,2,4-Trichlorobenzene	<0.000987	0.000987	0.00197		mg/L	1	10/24/24 07:57 PM
Surr: 2,4,6-Tribromophenol	96.8	0	10-123		%REC	1	10/24/24 07:57 PM
Surr: 2-Fluorobiphenyl	83.8	0	43-116		%REC	1	10/24/24 07:57 PM
Surr: 2-Fluorophenol	50.0	0	21-100		%REC	1	10/24/24 07:57 PM
Surr: 4-Terphenyl-d14	86.8	0	33-141		%REC	1	10/24/24 07:57 PM
Surr: Nitrobenzene-d5	91.8	0	35-115		%REC	1	10/24/24 07:57 PM
Surr: Phenol-d5	32.0	0	10-94		%REC	1	10/24/24 07:57 PM
<b>625.1 PESTICIDE BY GC/MS</b>							
		<b>E625.1</b>					Analyst: DEW
4,4'-DDD	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
4,4'-DDE	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
4,4'-DDT	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
Aldrin	<0.00000983	0.00000983	0.00000983		mg/L	1	10/28/24 09:59 PM
alpha-BHC (Hexachlorocyclohexane)	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
beta-BHC (Hexachlorocyclohexane)	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
Carbaryl	<0.00000983	0.00000983	0.0000295	N	mg/L	1	10/28/24 09:59 PM
Chlordane	<0.0000590	0.0000590	0.000197	N	mg/L	1	10/28/24 09:59 PM
Chlorpyrifos	<0.00000983	0.00000983	0.0000295	N	mg/L	1	10/28/24 09:59 PM
delta-BHC (Hexachlorocyclohexane)	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
Diazinon	<0.00000983	0.00000983	0.0000295	N	mg/L	1	10/28/24 09:59 PM
Dieldrin	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
Endosulfan I	<0.00000983	0.00000983	0.00000983		mg/L	1	10/28/24 09:59 PM
Endosulfan II	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
Endosulfan sulfate	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
Endrin	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
Endrin aldehyde	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
gamma-BHC (Lindane)	<0.00000983	0.00000983	0.0000197		mg/L	1	10/28/24 09:59 PM
Guthion (Azinphosmethyl)	<0.00000983	0.00000983	0.0000295	N	mg/L	1	10/28/24 09:59 PM
Heptachlor	<0.00000983	0.00000983	0.00000983		mg/L	1	10/28/24 09:59 PM
Heptachlor epoxide	<0.00000983	0.00000983	0.00000983		mg/L	1	10/28/24 09:59 PM
Malathion	<0.00000983	0.00000983	0.0000295	N	mg/L	1	10/28/24 09:59 PM
Methoxychlor	<0.0000197	0.0000197	0.0000197	N	mg/L	1	10/28/24 09:59 PM
Mirex	<0.00000983	0.00000983	0.0000197	N	mg/L	1	10/28/24 09:59 PM
Parathion, ethyl	<0.00000983	0.00000983	0.0000295	N	mg/L	1	10/28/24 09:59 PM
Toxaphene	<0.000295	0.000295	0.000295		mg/L	1	10/28/24 09:59 PM
Demeton (O & S)	<0.00000983	0.00000983	0.0000295	N	mg/L	1	10/28/24 09:59 PM

<b>Qualifiers:</b>	*	Value exceeds TCLP Maximum Concentration Level	C	Sample Result or QC discussed in the Case Narrative
	DF	Dilution Factor	E	TPH pattern not Gas or Diesel Range Pattern
	J	Analyte detected between MDL and RL	MDL	Method Detection Limit
	ND	Not Detected at the Method Detection Limit	RL	Reporting Limit
	S	Spike Recovery outside control limits	N	Parameter not NELAP certified

**DHL Analytical, Inc.**

Date: 30-Oct-24

**CLIENT:** Pollution Control Services  
**Project:** PCS 779075  
**Project No:**  
**Lab Order:** 2410204

**Client Sample ID:** 779075  
**Lab ID:** 2410204-01  
**Collection Date:** 10/22/24 08:00 AM  
**Matrix:** AQUEOUS

Analyses	Result	MDL	RL	Qual	Units	DF	Date Analyzed
<b>625.1 PESTICIDE BY GC/MS</b>							
		<b>E625.1</b>					Analyst: <b>DEW</b>
Surr: 2-Fluorobiphenyl	81.3	0	43-116		%REC	1	10/28/24 09:59 PM
Surr: 4-Terphenyl-d14	106	0	33-141		%REC	1	10/28/24 09:59 PM
<b>DICOFOL IN WATER BY ASTM METHOD</b>							
		<b>D5812-96MOD</b>					Analyst: <b>DEW</b>
Dicofol	<0.000197	0.000197	0.000393	N	mg/L	1	10/28/24 09:59 PM
<b>NONYLPHENOL IN WATER BY ASTM METHOD</b>							
		<b>D7065-17</b>					Analyst: <b>DEW</b>
Nonylphenol	<0.0691	0.0691	0.0987	N	mg/L	1	10/24/24 07:57 PM

<b>Qualifiers:</b>	<b>*</b>	Value exceeds TCLP Maximum Concentration Level	<b>C</b>	Sample Result or QC discussed in the Case Narrative
	<b>DF</b>	Dilution Factor	<b>E</b>	TPH pattern not Gas or Diesel Range Pattern
	<b>J</b>	Analyte detected between MDL and RL	<b>MDL</b>	Method Detection Limit
	<b>ND</b>	Not Detected at the Method Detection Limit	<b>RL</b>	Reporting Limit
	<b>S</b>	Spike Recovery outside control limits	<b>N</b>	Parameter not NELAP certified



# DHL Analytical, Inc.

Date: 30-Oct-24

**CLIENT:** Pollution Control Services  
**Project:** PCS 779075  
**Project No:**  
**Lab Order:** 2410204

**Client Sample ID:** 779076  
**Lab ID:** 2410204-02  
**Collection Date:** 10/22/24 08:00 AM  
**Matrix:** AQUEOUS

Analyses	Result	MDL	RL	Qual	Units	DF	Date Analyzed
<b>624.1 VOLATILES WATER</b>		<b>E624.1</b>		Analyst: JVR			
Acrylonitrile	<0.00100	0.00100	0.00300		mg/L	1	10/23/24 03:06 PM
Benzene	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Bromodichloromethane	0.0150	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Bromoform	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Carbon tetrachloride	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Chlorobenzene	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Chlorodibromomethane	0.00172	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Chloroform	0.0705	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
1,2-Dibromoethane	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
1,3-Dichlorobenzene	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
1,2-Dichlorobenzene	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
1,4-Dichlorobenzene	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
1,2-Dichloroethane	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
1,1-Dichloroethene	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Methylene chloride (DCM)	<0.00250	0.00250	0.00500		mg/L	1	10/23/24 03:06 PM
1,2-Dichloropropane	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
1,3-Dichloropropene (cis)	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
1,3-Dichloropropene (trans)	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Ethylbenzene	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Methyl ethyl ketone	<0.00500	0.00500	0.0150		mg/L	1	10/23/24 03:06 PM
1,1,2,2-Tetrachloroethane	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Tetrachloroethene	<0.000600	0.000600	0.00200		mg/L	1	10/23/24 03:06 PM
Toluene	<0.000600	0.000600	0.00200		mg/L	1	10/23/24 03:06 PM
1,1,1-Trichloroethane	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
1,1,2-Trichloroethane	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Trichloroethene	<0.000600	0.000600	0.00100		mg/L	1	10/23/24 03:06 PM
TTHM (Total Trihalomethanes)	0.0872	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Vinyl chloride	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Acrolein	<0.00500	0.00500	0.0150		mg/L	1	10/23/24 03:06 PM
Chloroethane	<0.00100	0.00100	0.00500		mg/L	1	10/23/24 03:06 PM
2-Chloroethylvinylether	<0.00600	0.00600	0.0100		mg/L	1	10/23/24 03:06 PM
1,1-Dichloroethane	<0.000300	0.000300	0.00100		mg/L	1	10/23/24 03:06 PM
Methyl bromide	<0.00100	0.00100	0.00500		mg/L	1	10/23/24 03:06 PM
Methyl chloride	<0.00100	0.00100	0.00500		mg/L	1	10/23/24 03:06 PM
trans-1,2-Dichloroethylene	<0.000300	0.000300	0.00200		mg/L	1	10/23/24 03:06 PM
Surr: 1,2-Dichloroethane-d4	101	0	72-119		%REC	1	10/23/24 03:06 PM
Surr: 4-Bromofluorobenzene	109	0	76-119		%REC	1	10/23/24 03:06 PM
Surr: Dibromofluoromethane	101	0	85-115		%REC	1	10/23/24 03:06 PM

<b>Qualifiers:</b>	*	Value exceeds TCLP Maximum Concentration Level	C	Sample Result or QC discussed in the Case Narrative
	DF	Dilution Factor	E	TPH pattern not Gas or Diesel Range Pattern
	J	Analyte detected between MDL and RL	MDL	Method Detection Limit
	ND	Not Detected at the Method Detection Limit	RL	Reporting Limit
	S	Spike Recovery outside control limits	N	Parameter not NELAP certified

**DHL Analytical, Inc.**

Date: 30-Oct-24

**CLIENT:** Pollution Control Services  
**Project:** PCS 779075  
**Project No:**  
**Lab Order:** 2410204

**Client Sample ID:** 779076  
**Lab ID:** 2410204-02  
**Collection Date:** 10/22/24 08:00 AM  
**Matrix:** AQUEOUS

Analyses	Result	MDL	RL	Qual	Units	DF	Date Analyzed
<b>624.1 VOLATILES WATER</b>		<b>E624.1</b>					Analyst: <b>JVR</b>
Surr: Toluene-d8	109	0	81-120		%REC	1	10/23/24 03:06 PM
<b>CYANIDE - WATER SAMPLE</b>		<b>M4500-CN E</b>					Analyst: <b>SMA</b>
Cyanide, Amenable to Chlorination	<0.0100	0.0100	0.0200		mg/L	1	10/28/24 05:11 PM
Cyanide, Total	<0.0100	0.0100	0.0200		mg/L	1	10/28/24 05:11 PM

<b>Qualifiers:</b>	<b>*</b>	Value exceeds TCLP Maximum Concentration Level	<b>C</b>	Sample Result or QC discussed in the Case Narrative
	<b>DF</b>	Dilution Factor	<b>E</b>	TPH pattern not Gas or Diesel Range Pattern
	<b>J</b>	Analyte detected between MDL and RL	<b>MDL</b>	Method Detection Limit
	<b>ND</b>	Not Detected at the Method Detection Limit	<b>RL</b>	Reporting Limit
	<b>S</b>	Spike Recovery outside control limits	<b>N</b>	Parameter not NELAP certified

CLIENT: Pollution Control Services

Work Order: 2410204

Project: PCS 779075

## ANALYTICAL QC SUMMARY REPORT

RunID: LCMS2\_241024A

The QC data in batch 117671 applies to the following samples: 2410204-01A

Sample ID: MB-117671	Batch ID: 117671	TestNo: E632	Units: mg/L							
SampType: MBLK	Run ID: LCMS2_241024A	Analysis Date: 10/24/2024 1:02:13 PM	Prep Date: 10/23/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual

Diuron	<0.0000300	0.0000800								N
Hexachlorophene	<0.00100	0.00500								N
Surr: Carbazole	7.27		10.00		72.7	35	145			

Sample ID: LCS-117671	Batch ID: 117671	TestNo: E632	Units: mg/L							
SampType: LCS	Run ID: LCMS2_241024A	Analysis Date: 10/24/2024 1:13:33 PM	Prep Date: 10/23/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual

Diuron	0.00173	0.0000800	0.00200	0	86.4	35	145			N
Hexachlorophene	0.00151	0.00500	0.00200	0	75.7	35	145			N
Surr: Carbazole	6.79		10.00		67.9	35	145			

Sample ID: <b>LCSD-117671</b>	Batch ID: <b>117671</b>	TestNo: <b>E632</b>	Units: <b>mg/L</b>							
SampType: <b>LCSD</b>	Run ID: <b>LCMS2_241024A</b>	Analysis Date: <b>10/24/2024 1:24:51 PM</b>	Prep Date: <b>10/23/2024</b>							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual

Diuron	0.00177	0.0000800	0.00200	0	88.5	35	145	2.41	30	N
Hexachlorophene	0.00172	0.00500	0.00200	0	86.2	35	145	12.9	30	N
Surr: Carbazole	6.88		10.00		68.8	35	145	0	0	

Qualifiers: B Analyte detected in the associated Method Blank  
J Analyte detected between MDL and RL  
ND Not Detected at the Method Detection Limit  
RL Reporting Limit  
J Analyte detected between SDL and RL

DF Dilution Factor  
MDL Method Detection Limit  
R RPD outside accepted control limits  
S Spike Recovery outside control limits  
N Parameter not NELAP certified



**CLIENT:** Pollution Control Services

**Work Order:** 2410204

**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS10\_241028A

The QC data in batch 117720 applies to the following samples: 2410204-01C

Sample ID: LCS-117720	Batch ID: 117720	TestNo: E625.1				Units: mg/L				
SampType: LCS	Run ID: GCMS10_241028A	Analysis Date: 10/28/2024 3:23:00 PM				Prep Date: 10/28/2024				
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
4,4'-DDD	0.000322	0.0000200	0.000400	0	80.5	0.1	135			
4,4'-DDE	0.000243	0.0000200	0.000400	0	60.7	19	120			
4,4'-DDT	0.000286	0.0000200	0.000400	0	71.5	0.1	171			
Aldrin	0.000171	0.0000100	0.000400	0	42.7	7	152			
alpha-BHC (Hexachlorocyclohexane)	0.000315	0.0000200	0.000400	0	78.8	42	108			
beta-BHC (Hexachlorocyclohexane)	0.000334	0.0000200	0.000400	0	83.4	42	131			
Carbaryl	0.000438	0.0000300	0.000400	0	109	38	168			N
Chlorpyrifos	0.000410	0.0000300	0.000400	0	102	42	131			N
delta-BHC (Hexachlorocyclohexane)	0.000339	0.0000200	0.000400	0	84.8	0.1	120			
Diazinon	0.000361	0.0000300	0.000400	0	90.2	52	120			N
Dieldrin	0.000343	0.0000200	0.000400	0	85.8	44	119			
Endosulfan I	0.000342	0.0000100	0.000400	0	85.6	47	128			
Endosulfan II	0.000385	0.0000200	0.000400	0	96.3	52	125			
Endosulfan sulfate	0.000390	0.0000200	0.000400	0	97.6	0.1	120			
Endrin	0.000400	0.0000200	0.000400	0	99.9	50	151			
Endrin aldehyde	0.0000779	0.0000200	0.000400	0	19.5	0.1	189			
gamma-BHC (Lindane)	0.000314	0.0000200	0.000400	0	78.5	41	111			
Guthion (Azinphosmethyl)	0.000647	0.0000300	0.000400	0	162	44	193			N
Heptachlor	0.000217	0.0000100	0.000400	0	54.3	0.1	172			
Heptachlor epoxide	0.000339	0.0000100	0.000400	0	84.8	71	120			
Malathion	0.000522	0.0000300	0.000400	0	131	56	161			N
Methoxychlor	0.000378	0.0000200	0.000400	0	94.4	38	156			N
Mirex	0.000292	0.0000200	0.000400	0	73.1	27	131			N
Parathion, ethyl	0.000531	0.0000300	0.000400	0	133	13	184			N
Demeton (O & S)	0.000329	0.0000300	0.000400	0	82.2	28	154			N
Surr: 2-Fluorobiphenyl	3.13		4.000		78.2	43	116			
Surr: 4-Terphenyl-d14	3.83		4.000		95.8	33	141			

Sample ID: <b>LCSD-117720</b>	Batch ID: <b>117720</b>	TestNo: <b>E625.1</b>				Units: <b>mg/L</b>				
SampType: <b>LCSD</b>	Run ID: <b>GCMS10_241028A</b>	Analysis Date: <b>10/28/2024 3:59:00 PM</b>				Prep Date: <b>10/28/2024</b>				
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
4,4'-DDD	0.000374	0.0000200	0.000400	0	93.5	0.1	135	14.9	50	
4,4'-DDE	0.000302	0.0000200	0.000400	0	75.6	19	120	21.8	50	
4,4'-DDT	0.000358	0.0000200	0.000400	0	89.4	0.1	171	22.3	50	
Aldrin	0.000252	0.0000100	0.000400	0	62.9	7	152	38.3	50	
alpha-BHC (Hexachlorocyclohexane)	0.000304	0.0000200	0.000400	0	76.1	42	108	3.58	50	
beta-BHC (Hexachlorocyclohexane)	0.000329	0.0000200	0.000400	0	82.1	42	131	1.52	50	
Carbaryl	0.000474	0.0000300	0.000400	0	118	38	168	7.81	50	N
Chlorpyrifos	0.000405	0.0000300	0.000400	0	101	42	131	1.29	50	N

**Qualifiers:**

- B Analyte detected in the associated Method Blank
- J Analyte detected between MDL and RL
- ND Not Detected at the Method Detection Limit
- RL Reporting Limit
- J Analyte detected between SDL and RL

- DF Dilution Factor
- MDL Method Detection Limit
- R RPD outside accepted control limits
- S Spike Recovery outside control limits
- N Parameter not NELAP certified

CLIENT: Pollution Control Services

Work Order: 2410204

Project: PCS 779075

## ANALYTICAL QC SUMMARY REPORT

RunID: GCMS10\_241028A

Sample ID: LCSD-117720	Batch ID: 117720	TestNo: E625.1				Units: mg/L				
SampType: LCSD	Run ID: GCMS10_241028A	Analysis Date: 10/28/2024 3:59:00 PM				Prep Date: 10/28/2024				
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
delta-BHC (Hexachlorocyclohexane)	0.000347	0.0000200	0.000400	0	86.7	0.1	120	2.27	50	N
Diazinon	0.000370	0.0000300	0.000400	0	92.5	52	120	2.54	50	
Dieldrin	0.000351	0.0000200	0.000400	0	87.8	44	119	2.19	50	
Endosulfan I	0.000362	0.0000100	0.000400	0	90.5	47	128	5.62	50	
Endosulfan II	0.000402	0.0000200	0.000400	0	100	52	125	4.26	50	R
Endosulfan sulfate	0.000400	0.0000200	0.000400	0	99.9	0.1	120	2.39	50	
Endrin	0.000446	0.0000200	0.000400	0	111	50	151	11.0	50	
Endrin aldehyde	0.000313	0.0000200	0.000400	0	78.3	0.1	189	120	50	
gamma-BHC (Lindane)	0.000305	0.0000200	0.000400	0	76.2	41	111	2.87	50	N
Guthion (Azinphosmethyl)	0.000681	0.0000300	0.000400	0	170	44	193	5.11	50	
Heptachlor	0.000291	0.0000100	0.000400	0	72.6	0.1	172	28.9	50	
Heptachlor epoxide	0.000352	0.0000100	0.000400	0	88.0	71	120	3.79	50	
Malathion	0.000530	0.0000300	0.000400	0	133	56	161	1.51	50	N
Methoxychlor	0.000426	0.0000200	0.000400	0	106	38	156	12.0	50	N
Mirex	0.000317	0.0000200	0.000400	0	79.3	27	131	8.15	50	N
Parathion, ethyl	0.000565	0.0000300	0.000400	0	141	13	184	6.04	50	N
Demeton (O & S)	0.000348	0.0000300	0.000400	0	87.0	28	154	5.59	50	N
Surr: 2-Fluorobiphenyl	2.90		4.000		72.4	43	116	0	0	
Surr: 4-Terphenyl-d14	3.77		4.000		94.2	33	141	0	0	

Sample ID: MB-117720	Batch ID: 117720	TestNo: E625.1	Units: mg/L							
SampType: MBLK	Run ID: GCMS10_241028A	Analysis Date: 10/28/2024 8:47:00 PM	Prep Date: 10/28/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
4,4'-DDD	<0.0000100	0.0000200								
4,4'-DDE	<0.0000100	0.0000200								
4,4'-DDT	<0.0000100	0.0000200								
Aldrin	<0.0000100	0.0000100								
alpha-BHC (Hexachlorocyclohexane)	<0.0000100	0.0000200								
beta-BHC (Hexachlorocyclohexane)	<0.0000100	0.0000200								
Carbaryl	<0.0000100	0.0000300								N
Chlordane	<0.0000600	0.000200								N
Chlorpyrifos	<0.0000100	0.0000300								N
delta-BHC (Hexachlorocyclohexane)	<0.0000100	0.0000200								
Diazinon	<0.0000100	0.0000300								N
Dieldrin	<0.0000100	0.0000200								
Endosulfan I	<0.0000100	0.0000100								
Endosulfan II	<0.0000100	0.0000200								
Endosulfan sulfate	<0.0000100	0.0000200								
Endrin	<0.0000100	0.0000200								
Endrin aldehyde	<0.0000100	0.0000200								

**Qualifiers:**

- B Analyte detected in the associated Method Blank
- J Analyte detected between MDL and RL
- ND Not Detected at the Method Detection Limit
- RL Reporting Limit
- J Analyte detected between SDL and RL

- DF Dilution Factor
- MDL Method Detection Limit
- R RPD outside accepted control limits
- S Spike Recovery outside control limits
- N Parameter not NELAP certified

**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS10\_241028A

Sample ID: <b>MB-117720</b>	Batch ID: <b>117720</b>	TestNo: <b>E625.1</b>	Units: <b>mg/L</b>							
SampType: <b>MBLK</b>	Run ID: <b>GCMS10_241028A</b>	Analysis Date: <b>10/28/2024 8:47:00 PM</b>	Prep Date: <b>10/28/2024</b>							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
gamma-BHC (Lindane)	<0.0000100	0.0000200								
Guthion (Azinphosmethyl)	<0.0000100	0.0000300								N
Heptachlor	<0.0000100	0.0000100								
Heptachlor epoxide	<0.0000100	0.0000100								
Malathion	<0.0000100	0.0000300								N
Methoxychlor	<0.0000200	0.0000200								N
Mirex	<0.0000100	0.0000200								N
Parathion, ethyl	<0.0000100	0.0000300								N
Toxaphene	<0.000300	0.000300								
Demeton (O & S)	<0.0000100	0.0000300								N
Surr: 2-Fluorobiphenyl	3.52		4.000		88.1	43	116			
Surr: 4-Terphenyl-d14	4.04		4.000		101	33	141			

**Qualifiers:** B Analyte detected in the associated Method Blank  
 J Analyte detected between MDL and RL  
 ND Not Detected at the Method Detection Limit  
 RL Reporting Limit  
 J Analyte detected between SDL and RL

DF Dilution Factor  
 MDL Method Detection Limit  
 R RPD outside accepted control limits  
 S Spike Recovery outside control limits  
 N Parameter not NELAP certified



**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS10\_241028B

The QC data in batch 117720 applies to the following samples: 2410204-01C

Sample ID: <b>LCS-117720-DICO</b>	Batch ID: <b>117720</b>	TestNo: <b>D5812-96mod</b>	Units: <b>mg/L</b>							
SampType: <b>LCS</b>	Run ID: <b>GCMS10_241028B</b>	Analysis Date: <b>10/28/2024 6:23:00 PM</b>	Prep Date: <b>10/28/2024</b>							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual

Dicofol	0.00161	0.000400	0.00100	0	161	22	180			N
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Sample ID: MB-117720	Batch ID: 117720	TestNo: D5812-96mod	Units: mg/L							
SampType: MBLK	Run ID: GCMS10_241028B	Analysis Date: 10/28/2024 8:47:00 PM	Prep Date: 10/28/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual

Dicofol	<0.000200	0.000400								N
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**Qualifiers:**

B	Analyte detected in the associated Method Blank
J	Analyte detected between MDL and RL
ND	Not Detected at the Method Detection Limit
RL	Reporting Limit
J	Analyte detected between SDL and RL

DF	Dilution Factor
MDL	Method Detection Limit
R	RPD outside accepted control limits
S	Spike Recovery outside control limits
N	Parameter not NELAP certified

**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS8\_241029A

The QC data in batch 117720 applies to the following samples: 2410204-01C

Sample ID: <b>LCS-117720-PCB</b>	Batch ID: <b>117720</b>	TestNo: <b>E625.1</b>	Units: <b>mg/L</b>							
SampType: <b>LCS</b>	Run ID: <b>GCMS8_241029A</b>	Analysis Date: <b>10/29/2024 9:59:00 AM</b>	Prep Date: <b>10/28/2024</b>							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual

Aroclor 1016	0.00408	0.000200	0.00400	0	102	37	130			
Aroclor 1260	0.00484	0.000200	0.00400	0	121	19	130			
Total PCBs	0.00891	0.000200	0.00800	0	111	19	130			
Surr: 2-Fluorobiphenyl	3.92		4.000		97.9	43	116			
Surr: 4-Terphenyl-d14	4.67		4.000		117	33	141			

Sample ID: MB-117720	Batch ID: 117720	TestNo: E625.1	Units: mg/L							
SampType: MBLK	Run ID: GCMS8_241029A	Analysis Date: 10/29/2024 10:29:00 A	Prep Date: 10/28/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual

Aroclor 1016	<0.000100	0.000200								
Aroclor 1221	<0.000100	0.000200								
Aroclor 1232	<0.000100	0.000200								
Aroclor 1242	<0.000100	0.000200								
Aroclor 1248	<0.000100	0.000200								
Aroclor 1254	<0.000100	0.000200								
Aroclor 1260	<0.000100	0.000200								
Total PCBs	<0.000100	0.000200								
Surr: 2-Fluorobiphenyl	4.29		4.000		107	43	116			
Surr: 4-Terphenyl-d14	4.58		4.000		114	33	141			

**Qualifiers:** B Analyte detected in the associated Method Blank  
J Analyte detected between MDL and RL  
ND Not Detected at the Method Detection Limit  
RL Reporting Limit  
J Analyte detected between SDL and RL

DF Dilution Factor  
MDL Method Detection Limit  
R RPD outside accepted control limits  
S Spike Recovery outside control limits  
N Parameter not NELAP certified

CLIENT: Pollution Control Services

Work Order: 2410204

Project: PCS 779075

## ANALYTICAL QC SUMMARY REPORT

RunID: GCMS9\_241024B

The QC data in batch 117687 applies to the following samples: 2410204-01B

Sample ID: LCS-117687	Batch ID: 117687	TestNo: E625.1				Units: mg/L				
SampType: LCS	Run ID: GCMS9_241024B	Analysis Date: 10/24/2024 3:52:00 PM				Prep Date: 10/24/2024				
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Benzidine	0.0157	0.00400	0.0400	0	39.3	5	125			
Benzo[a]anthracene	0.0396	0.00200	0.0400	0	99.0	33	143			
Benzo[a]pyrene	0.0437	0.00200	0.0400	0	109	17	163			
Chrysene	0.0421	0.00200	0.0400	0	105	17	168			
2,4-Dimethylphenol	0.0384	0.00200	0.0400	0	96.0	32	120			
4,6-Dinitro-o-cresol	0.0462	0.00400	0.0400	0	116	10	181			
m,p-Cresols	0.0321	0.00400	0.0400	0	80.2	10	125			
o-Cresol	0.0340	0.00400	0.0400	0	85.0	25	125			
p-Chloro-m-Cresol	0.0400	0.00400	0.0400	0	100	22	147			
Hexachlorobenzene	0.0370	0.00200	0.0400	0	92.4	10	152			
Hexachlorobutadiene	0.0319	0.00200	0.0400	0	79.8	24	120			
Hexachloroethane	0.0353	0.00200	0.0400	0	88.3	40	120			
Nitrobenzene	0.0399	0.00200	0.0400	0	99.9	35	180			
N-Nitrosodiethylamine	0.0367	0.00400	0.0400	0	91.7	20	125			
N-Nitrosodi-n-butylamine	0.0439	0.00400	0.0400	0	110	20	125			
Pentachlorobenzene	0.0374	0.00200	0.0400	0	93.5	40	140			
Pentachlorophenol	0.0372	0.00200	0.0400	0	93.0	14	176			
Phenanthrene	0.0370	0.00200	0.0400	0	92.5	54	120			
Pyridine	0.0193	0.00200	0.0400	0	48.2	10	75			
1,2,4,5-Tetrachlorobenzene	0.0361	0.00200	0.0400	0	90.3	30	140			
2,4,5-Trichlorophenol	0.0427	0.00200	0.0400	0	107	25	125			
2-Chlorophenol	0.0353	0.00200	0.0400	0	88.3	23	134			
2,4-Dichlorophenol	0.0406	0.00200	0.0400	0	101	39	135			
2,4-Dinitrophenol	0.0383	0.00400	0.0400	0	95.8	10	191			
2-Nitrophenol	0.0414	0.00200	0.0400	0	103	29	182			
4-Nitrophenol	0.0296	0.00400	0.0400	0	73.9	10	132			
Phenol	0.0199	0.00200	0.0400	0	49.8	5	120			
2,4,6-Trichlorophenol	0.0429	0.00200	0.0400	0	107	37	144			
Acenaphthene	0.0382	0.00200	0.0400	0	95.4	47	145			
Acenaphthylene	0.0367	0.00200	0.0400	0	91.8	33	145			
Anthracene	0.0382	0.00200	0.0400	0	95.4	27	133			
Benzo[b]fluoranthene	0.0420	0.00200	0.0400	0	105	24	159			
Benzo[g,h,i]perylene	0.0451	0.00200	0.0400	0	113	10	219			
Benzo[k]fluoranthene	0.0408	0.00200	0.0400	0	102	11	162			
Bis(2-chloroethoxy)methane	0.0379	0.00200	0.0400	0	94.9	33	184			
Bis(2-chloroethyl)ether	0.0419	0.00200	0.0400	0	105	12	158			
Bis(2-chloroisopropyl)ether	0.0344	0.00200	0.0400	0	86.0	36	166			
Bis(2-ethylhexyl)phthalate	0.0510	0.00600	0.0400	0	128	10	158			
4-Bromophenyl phenyl ether	0.0378	0.00200	0.0400	0	94.4	53	127			
Butyl benzyl phthalate	0.0465	0.00600	0.0400	0	116	10	152			

**Qualifiers:** B Analyte detected in the associated Method Blank  
J Analyte detected between MDL and RL  
ND Not Detected at the Method Detection Limit  
RL Reporting Limit  
J Analyte detected between SDL and RL

DF Dilution Factor  
MDL Method Detection Limit  
R RPD outside accepted control limits  
S Spike Recovery outside control limits  
N Parameter not NELAP certified



CLIENT: Pollution Control Services

Work Order: 2410204

Project: PCS 779075

## ANALYTICAL QC SUMMARY REPORT

RunID: GCMS9\_241024B

Sample ID: <b>LCS-117687</b>	Batch ID: <b>117687</b>	TestNo: <b>E625.1</b>				Units: <b>mg/L</b>				
SampType: <b>LCS</b>	Run ID: <b>GCMS9_241024B</b>	Analysis Date: <b>10/24/2024 3:52:00 PM</b>				Prep Date: <b>10/24/2024</b>				
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
2-Chloronaphthalene	0.0375	0.00200	0.0400	0	93.8	60	120			
4-Chlorophenyl phenyl ether	0.0383	0.00200	0.0400	0	95.8	25	158			
Dibenz[a,h]anthracene	0.0443	0.00200	0.0400	0	111	10	125			
3,3'-Dichlorobenzidine	0.0380	0.00500	0.0400	0	95.1	10	262			
Diethyl phthalate	0.0410	0.00600	0.0400	0	102	10	120			
Dimethyl phthalate	0.0402	0.00600	0.0400	0	101	10	120			
Di-n-butyl phthalate	0.0459	0.00600	0.0400	0	115	10	120			
2,4-Dinitrotoluene	0.0405	0.00200	0.0400	0	101	39	139			
2,6-Dinitrotoluene	0.0405	0.00200	0.0400	0	101	50	158			
Di-n-octyl phthalate	0.0451	0.00600	0.0400	0	113	10	146			
1,2-Diphenylhydrazine	0.0374	0.00200	0.0400	0	93.4	40	140			
Fluoranthene	0.0435	0.00200	0.0400	0	109	26	137			
Fluorene	0.0402	0.00200	0.0400	0	101	59	121			
Hexachlorocyclopentadiene	0.0363	0.00200	0.0400	0	90.7	8	130			
Indeno[1,2,3-cd]pyrene	0.0437	0.00200	0.0400	0	109	10	171			
Isophorone	0.0379	0.00200	0.0400	0	94.7	21	196			
Naphthalene	0.0354	0.00200	0.0400	0	88.6	21	133			
N-Nitrosodimethylamine	0.0184	0.00200	0.0400	0	46.1	10	125			
N-Nitrosodi-n-propylamine	0.0407	0.00200	0.0400	0	102	10	230			
N-Nitrosodiphenylamine	0.0399	0.00200	0.0400	0	99.7	20	125			
Pyrene	0.0415	0.00200	0.0400	0	104	52	120			
1,2,4-Trichlorobenzene	0.0347	0.00200	0.0400	0	86.9	44	142			
Surr: 2,4,6-Tribromophenol	81.8		80.00		102	10	123			
Surr: 2-Fluorobiphenyl	70.6		80.00		88.2	43	116			
Surr: 2-Fluorophenol	53.6		80.00		67.0	21	100			
Surr: 4-Terphenyl-d14	74.2		80.00		92.8	33	141			
Surr: Nitrobenzene-d5	78.6		80.00		98.3	35	115			
Surr: Phenol-d5	35.4		80.00		44.2	10	94			

Sample ID: <b>LCSD-117687</b>	Batch ID: <b>117687</b>	TestNo: <b>E625.1</b>	Units: <b>mg/L</b>							
SampType: <b>LCSD</b>	Run ID: <b>GCMS9_241024B</b>	Analysis Date: <b>10/24/2024 4:14:00 PM</b>	Prep Date: <b>10/24/2024</b>							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Benzidine	0.0163	0.00400	0.0400	0	40.8	5	125	3.75	50	
Benzo[a]anthracene	0.0388	0.00200	0.0400	0	97.0	33	143	2.04	50	
Benzo[a]pyrene	0.0423	0.00200	0.0400	0	106	17	163	3.21	50	
Chrysene	0.0415	0.00200	0.0400	0	104	17	168	1.48	50	
2,4-Dimethylphenol	0.0386	0.00200	0.0400	0	96.6	32	120	0.623	50	
4,6-Dinitro-o-cresol	0.0460	0.00400	0.0400	0	115	10	181	0.434	50	
m,p-Cresols	0.0333	0.00400	0.0400	0	83.2	10	125	3.61	50	
o-Cresol	0.0338	0.00400	0.0400	0	84.4	25	125	0.708	50	

**Qualifiers:**

- B Analyte detected in the associated Method Blank
- J Analyte detected between MDL and RL
- ND Not Detected at the Method Detection Limit
- RL Reporting Limit
- J Analyte detected between SDL and RL

- DF Dilution Factor
- MDL Method Detection Limit
- R RPD outside accepted control limits
- S Spike Recovery outside control limits
- N Parameter not NELAP certified

**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS9\_241024B

Sample ID: <b>LCSD-117687</b>	Batch ID: <b>117687</b>	TestNo: <b>E625.1</b>				Units: <b>mg/L</b>				
SampType: <b>LCSD</b>	Run ID: <b>GCMS9_241024B</b>	Analysis Date: <b>10/24/2024 4:14:00 PM</b>				Prep Date: <b>10/24/2024</b>				
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
p-Chloro-m-Cresol	0.0395	0.00400	0.0400	0	98.9	22	147	1.11	50	
Hexachlorobenzene	0.0367	0.00200	0.0400	0	91.7	10	152	0.760	50	
Hexachlorobutadiene	0.0326	0.00200	0.0400	0	81.6	24	120	2.23	50	
Hexachloroethane	0.0353	0.00200	0.0400	0	88.2	40	120	0.056	50	
Nitrobenzene	0.0399	0.00200	0.0400	0	99.9	35	180	0	50	
N-Nitrosodiethylamine	0.0373	0.00400	0.0400	0	93.4	20	125	1.78	50	
N-Nitrosodi-n-butylamine	0.0442	0.00400	0.0400	0	110	20	125	0.635	50	
Pentachlorobenzene	0.0376	0.00200	0.0400	0	93.9	40	140	0.480	50	
Pentachlorophenol	0.0372	0.00200	0.0400	0	93.0	14	176	0.053	50	
Phenanthrene	0.0365	0.00200	0.0400	0	91.4	54	120	1.25	39	
Pyridine	0.0188	0.00200	0.0400	0	47.1	10	75	2.31	50	
1,2,4,5-Tetrachlorobenzene	0.0364	0.00200	0.0400	0	91.0	30	140	0.717	50	
2,4,5-Trichlorophenol	0.0423	0.00200	0.0400	0	106	25	125	0.894	50	
2-Chlorophenol	0.0353	0.00200	0.0400	0	88.3	23	134	0	50	
2,4-Dichlorophenol	0.0406	0.00200	0.0400	0	101	39	135	0.049	50	
2,4-Dinitrophenol	0.0382	0.00400	0.0400	0	95.6	10	191	0.209	50	
2-Nitrophenol	0.0416	0.00200	0.0400	0	104	29	182	0.626	50	
4-Nitrophenol	0.0290	0.00400	0.0400	0	72.6	10	132	1.84	50	
Phenol	0.0187	0.00200	0.0400	0	46.8	5	120	6.00	50	
2,4,6-Trichlorophenol	0.0424	0.00200	0.0400	0	106	37	144	0.985	50	
Acenaphthene	0.0384	0.00200	0.0400	0	96.0	47	145	0.575	48	
Acenaphthylene	0.0367	0.00200	0.0400	0	91.9	33	145	0.109	50	
Anthracene	0.0381	0.00200	0.0400	0	95.2	27	133	0.262	50	
Benzo[b]fluoranthene	0.0414	0.00200	0.0400	0	103	24	159	1.53	50	
Benzo[g,h,i]perylene	0.0439	0.00200	0.0400	0	110	10	219	2.74	50	
Benzo[k]fluoranthene	0.0390	0.00200	0.0400	0	97.6	11	162	4.41	50	
Bis(2-chloroethoxy)methane	0.0382	0.00200	0.0400	0	95.4	33	184	0.631	50	
Bis(2-chloroethyl)ether	0.0393	0.00200	0.0400	0	98.3	12	158	6.40	50	
Bis(2-chloroisopropyl)ether	0.0347	0.00200	0.0400	0	86.7	36	166	0.869	50	
Bis(2-ethylhexyl)phthalate	0.0493	0.00600	0.0400	0	123	10	158	3.47	50	
4-Bromophenyl phenyl ether	0.0378	0.00200	0.0400	0	94.6	53	127	0.159	43	
Butyl benzyl phthalate	0.0458	0.00600	0.0400	0	115	10	152	1.47	50	
2-Chloronaphthalene	0.0382	0.00200	0.0400	0	95.4	60	120	1.74	24	
4-Chlorophenyl phenyl ether	0.0386	0.00200	0.0400	0	96.6	25	158	0.780	50	
Dibenz[a,h]anthracene	0.0429	0.00200	0.0400	0	107	10	125	3.21	50	
3,3'-Dichlorobenzidine	0.0399	0.00500	0.0400	0	99.8	10	262	4.83	50	
Diethyl phthalate	0.0407	0.00600	0.0400	0	102	10	120	0.686	50	
Dimethyl phthalate	0.0396	0.00600	0.0400	0	99.1	10	120	1.45	50	
Di-n-butyl phthalate	0.0457	0.00600	0.0400	0	114	10	120	0.524	47	
2,4-Dinitrotoluene	0.0401	0.00200	0.0400	0	100	39	139	1.19	42	
2,6-Dinitrotoluene	0.0398	0.00200	0.0400	0	99.6	50	158	1.74	48	

**Qualifiers:** B Analyte detected in the associated Method Blank  
J Analyte detected between MDL and RL  
ND Not Detected at the Method Detection Limit  
RL Reporting Limit  
J Analyte detected between SDL and RL

DF Dilution Factor  
MDL Method Detection Limit  
R RPD outside accepted control limits  
S Spike Recovery outside control limits  
N Parameter not NELAP certified



CLIENT: Pollution Control Services

Work Order: 2410204

Project: PCS 779075

## ANALYTICAL QC SUMMARY REPORT

RunID: GCMS9\_241024B

Sample ID: <b>LCSD-117687</b>	Batch ID: <b>117687</b>	TestNo: <b>E625.1</b>				Units: <b>mg/L</b>				
SampType: <b>LCSD</b>	Run ID: <b>GCMS9_241024B</b>	Analysis Date: <b>10/24/2024 4:14:00 PM</b>				Prep Date: <b>10/24/2024</b>				
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Di-n-octyl phthalate	0.0437	0.00600	0.0400	0	109	10	146	3.20	50	
1,2-Diphenylhydrazine	0.0369	0.00200	0.0400	0	92.4	40	140	1.13	50	
Fluoranthene	0.0438	0.00200	0.0400	0	109	26	137	0.550	50	
Fluorene	0.0405	0.00200	0.0400	0	101	59	121	0.645	38	
Hexachlorocyclopentadiene	0.0381	0.00200	0.0400	0	95.4	8	130	5.00	50	
Indeno[1,2,3-cd]pyrene	0.0424	0.00200	0.0400	0	106	10	171	3.02	50	
Isophorone	0.0385	0.00200	0.0400	0	96.4	21	196	1.73	50	
Naphthalene	0.0354	0.00200	0.0400	0	88.5	21	133	0.056	50	
N-Nitrosodimethylamine	0.0185	0.00200	0.0400	0	46.3	10	125	0.433	50	
N-Nitrosodi-n-propylamine	0.0407	0.00200	0.0400	0	102	10	230	0.197	50	
N-Nitrosodiphenylamine	0.0395	0.00200	0.0400	0	98.9	20	125	0.856	50	
Pyrene	0.0411	0.00200	0.0400	0	103	52	120	1.06	49	
1,2,4-Trichlorobenzene	0.0350	0.00200	0.0400	0	87.4	44	142	0.631	50	
Surr: 2,4,6-Tribromophenol	81.4		80.00		102	10	123	0	0	
Surr: 2-Fluorobiphenyl	72.2		80.00		90.3	43	116	0	0	
Surr: 2-Fluorophenol	53.4		80.00		66.8	21	100	0	0	
Surr: 4-Terphenyl-d14	73.2		80.00		91.5	33	141	0	0	
Surr: Nitrobenzene-d5	79.6		80.00		99.5	35	115	0	0	
Surr: Phenol-d5	33.8		80.00		42.2	10	94	0	0	

Sample ID: <b>MB-117687</b>	Batch ID: <b>117687</b>	TestNo: <b>E625.1</b>	Units: <b>mg/L</b>							
SampType: <b>MBLK</b>	Run ID: <b>GCMS9_241024B</b>	Analysis Date: <b>10/24/2024 6:50:00 PM</b>	Prep Date: <b>10/24/2024</b>							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Benzidine	<0.00100	0.00400								
Benzo[a]anthracene	<0.00100	0.00200								
Benzo[a]pyrene	<0.00100	0.00200								
Chrysene	<0.00100	0.00200								
2,4-Dimethylphenol	<0.00100	0.00200								
4,6-Dinitro-o-cresol	<0.00200	0.00400								
m,p-Cresols	<0.00200	0.00400								
o-Cresol	<0.00200	0.00400								
p-Chloro-m-Cresol	<0.00200	0.00400								
Hexachlorobenzene	<0.00100	0.00200								
Hexachlorobutadiene	<0.00100	0.00200								
Hexachloroethane	<0.00100	0.00200								
Nitrobenzene	<0.00100	0.00200								
N-Nitrosodiethylamine	<0.00200	0.00400								
N-Nitrosodi-n-butylamine	<0.00100	0.00400								
Pentachlorobenzene	<0.00100	0.00200								
Pentachlorophenol	<0.00100	0.00200								

**Qualifiers:**

- B Analyte detected in the associated Method Blank
- J Analyte detected between MDL and RL
- ND Not Detected at the Method Detection Limit
- RL Reporting Limit
- J Analyte detected between SDL and RL

- DF Dilution Factor
- MDL Method Detection Limit
- R RPD outside accepted control limits
- S Spike Recovery outside control limits
- N Parameter not NELAP certified



**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS9\_241024B

Sample ID: <b>MB-117687</b>	Batch ID: <b>117687</b>	TestNo: <b>E625.1</b>	Units: <b>mg/L</b>
SampType: <b>MBLK</b>	Run ID: <b>GCMS9_241024B</b>	Analysis Date: <b>10/24/2024 6:50:00 PM</b>	Prep Date: <b>10/24/2024</b>

Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Phenanthrene	<0.00100	0.00200								
Pyridine	<0.00100	0.00200								
1,2,4,5-Tetrachlorobenzene	<0.00100	0.00200								
2,4,5-Trichlorophenol	<0.00100	0.00200								
2-Chlorophenol	<0.00100	0.00200								
2,4-Dichlorophenol	<0.00100	0.00200								
2,4-Dinitrophenol	<0.00200	0.00400								
2-Nitrophenol	<0.00100	0.00200								
4-Nitrophenol	<0.00200	0.00400								
Phenol	<0.00100	0.00200								
2,4,6-Trichlorophenol	<0.00100	0.00200								
Acenaphthene	<0.00100	0.00200								
Acenaphthylene	<0.00100	0.00200								
Anthracene	<0.00100	0.00200								
Benzo[b]fluoranthene	<0.00100	0.00200								
Benzo[g,h,i]perylene	<0.00100	0.00200								
Benzo[k]fluoranthene	<0.00100	0.00200								
Bis(2-chloroethoxy)methane	<0.00100	0.00200								
Bis(2-chloroethyl)ether	<0.00100	0.00200								
Bis(2-chloroisopropyl)ether	<0.00100	0.00200								
Bis(2-ethylhexyl)phthalate	<0.00300	0.00600								
4-Bromophenyl phenyl ether	<0.00100	0.00200								
Butyl benzyl phthalate	<0.00300	0.00600								
2-Chloronaphthalene	<0.00100	0.00200								
4-Chlorophenyl phenyl ether	<0.00100	0.00200								
Dibenz[a,h]anthracene	<0.00100	0.00200								
3,3'-Dichlorobenzidine	<0.00100	0.00500								
Diethyl phthalate	<0.00300	0.00600								
Dimethyl phthalate	<0.00300	0.00600								
Di-n-butyl phthalate	<0.00300	0.00600								
2,4-Dinitrotoluene	<0.00100	0.00200								
2,6-Dinitrotoluene	<0.00100	0.00200								
Di-n-octyl phthalate	<0.00300	0.00600								
1,2-Diphenylhydrazine	<0.00100	0.00200								
Fluoranthene	<0.00100	0.00200								
Fluorene	<0.00100	0.00200								
Hexachlorocyclopentadiene	<0.00100	0.00200								
Indeno[1,2,3-cd]pyrene	<0.00100	0.00200								
Isophorone	<0.00100	0.00200								
Naphthalene	<0.00100	0.00200								
N-Nitrosodimethylamine	<0.00100	0.00200								

**Qualifiers:**  
 B Analyte detected in the associated Method Blank  
 J Analyte detected between MDL and RL  
 ND Not Detected at the Method Detection Limit  
 RL Reporting Limit  
 J Analyte detected between SDL and RL

DF Dilution Factor  
 MDL Method Detection Limit  
 R RPD outside accepted control limits  
 S Spike Recovery outside control limits  
 N Parameter not NELAP certified

**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS9\_241024B

Sample ID: <b>MB-117687</b>	Batch ID: <b>117687</b>	TestNo: <b>E625.1</b>	Units: <b>mg/L</b>
SampType: <b>MBLK</b>	Run ID: <b>GCMS9_241024B</b>	Analysis Date: <b>10/24/2024 6:50:00 PM</b>	Prep Date: <b>10/24/2024</b>

Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
N-Nitrosodi-n-propylamine	<0.00100	0.00200								
N-Nitrosodiphenylamine	<0.00100	0.00200								
Pyrene	<0.00100	0.00200								
1,2,4-Trichlorobenzene	<0.00100	0.00200								
Surr: 2,4,6-Tribromophenol	83.2		80.00		104	10	123			
Surr: 2-Fluorobiphenyl	71.8		80.00		89.8	43	116			
Surr: 2-Fluorophenol	47.4		80.00		59.2	21	100			
Surr: 4-Terphenyl-d14	70.8		80.00		88.5	33	141			
Surr: Nitrobenzene-d5	77.2		80.00		96.5	35	115			
Surr: Phenol-d5	30.2		80.00		37.8	10	94			

**Qualifiers:** B Analyte detected in the associated Method Blank  
J Analyte detected between MDL and RL  
ND Not Detected at the Method Detection Limit  
RL Reporting Limit  
J Analyte detected between SDL and RL

DF Dilution Factor  
MDL Method Detection Limit  
R RPD outside accepted control limits  
S Spike Recovery outside control limits  
N Parameter not NELAP certified

**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS9\_241024C

The QC data in batch 117687 applies to the following samples: 2410204-01B

Sample ID: <b>LCS-117687-NP</b>	Batch ID: <b>117687</b>	TestNo: <b>D7065-17</b>	Units: <b>mg/L</b>							
SampType: <b>LCS</b>	Run ID: <b>GCMS9_241024C</b>	Analysis Date: <b>10/24/2024 6:28:00 PM</b>	Prep Date: <b>10/24/2024</b>							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual

Nonylphenol	0.945	0.100	1.00	0	94.5	40	140			N
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Sample ID: MB-117687	Batch ID: 117687	TestNo: D7065-17	Units: mg/L							
SampType: MBLK	Run ID: GCMS9_241024C	Analysis Date: 10/24/2024 6:50:00 PM	Prep Date: 10/24/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual

Nonylphenol	<0.0700	0.100								N
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**Qualifiers:** B Analyte detected in the associated Method Blank  
J Analyte detected between MDL and RL  
ND Not Detected at the Method Detection Limit  
RL Reporting Limit  
J Analyte detected between SDL and RL

DF Dilution Factor  
MDL Method Detection Limit  
R RPD outside accepted control limits  
S Spike Recovery outside control limits  
N Parameter not NELAP certified



**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS5\_241023C

The QC data in batch 117681 applies to the following samples: 2410204-02A

Sample ID: LCS-117681	Batch ID: 117681	TestNo: E624.1	Units: mg/L							
SampType: LCS	Run ID: GCMS5_241023C	Analysis Date: 10/23/2024 1:14:00 PM	Prep Date: 10/23/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Benzene	0.0221	0.00100	0.0232	0	95.1	65	135			
Carbon tetrachloride	0.0207	0.00100	0.0232	0	89.1	70	130			
Chlorobenzene	0.0211	0.00100	0.0232	0	91.0	35	135			
Chloroform	0.0213	0.00100	0.0232	0	91.7	70	135			
Chlorodibromomethane	0.0212	0.00100	0.0232	0	91.2	70	135			
1,2-Dibromoethane	0.0212	0.00100	0.0232	0	91.3	60	140			
1,2-Dichloroethane	0.0215	0.00100	0.0232	0	92.6	70	130			
1,1-Dichloroethene	0.0209	0.00100	0.0232	0	90.0	50	150			
Methyl ethyl ketone	0.134	0.0150	0.116	0	115	60	140			
Tetrachloroethene	0.0216	0.00200	0.0232	0	93.1	70	130			
Trichloroethene	0.0207	0.00100	0.0232	0	89.3	65	135			
1,1,1-Trichloroethane	0.0204	0.00100	0.0232	0	87.7	70	130			
TTHM (Total Trihalomethanes)	0.0842	0.00100	0.0928	0	90.8	60	140			
Vinyl chloride	0.0259	0.00100	0.0232	0	112	5	195			
Acrolein	0.0659	0.0150	0.0580	0	114	60	140			
Acrylonitrile	0.0470	0.00300	0.0464	0	101	60	140			
1,1,2,2-Tetrachloroethane	0.0220	0.00100	0.0232	0	94.9	60	140			
Bromoform	0.0207	0.00100	0.0232	0	89.2	65	135			
Chloroethane	0.0216	0.00500	0.0232	0	93.2	40	160			
2-Chloroethylvinylether	0.0249	0.0100	0.0232	0	107	5	225			
Bromodichloromethane	0.0211	0.00100	0.0232	0	90.9	65	135			
1,1-Dichloroethane	0.0238	0.00100	0.0232	0	103	70	130			
1,2-Dichloropropane	0.0241	0.00100	0.0232	0	104	35	165			
1,3-Dichloropropene (cis)	0.0220	0.00100	0.0232	0	94.8	25	175			
1,3-Dichloropropene (trans)	0.0214	0.00100	0.0232	0	92.3	50	150			
Ethylbenzene	0.0209	0.00100	0.0232	0	90.2	60	140			
Methyl bromide	0.0141	0.00500	0.0232	0	60.8	15	185			
Methyl chloride	0.0330	0.00500	0.0232	0	142	5	205			
Methylene chloride (DCM)	0.0208	0.00500	0.0232	0	89.7	60	140			
Toluene	0.0211	0.00200	0.0232	0	91.0	70	130			
trans-1,2-Dichloroethylene	0.0213	0.00200	0.0232	0	91.7	70	130			
1,1,2-Trichloroethane	0.0209	0.00100	0.0232	0	89.9	70	130			
1,2-Dichlorobenzene	0.0225	0.00100	0.0232	0	96.9	65	135			
1,3-Dichlorobenzene	0.0218	0.00100	0.0232	0	93.9	70	130			
1,4-Dichlorobenzene	0.0219	0.00100	0.0232	0	94.2	65	135			
Surr: 1,2-Dichloroethane-d4	205		200.0		102	72	119			
Surr: 4-Bromofluorobenzene	205		200.0		103	76	119			
Surr: Dibromofluoromethane	194		200.0		97.2	85	115			
Surr: Toluene-d8	207		200.0		104	81	120			

**Qualifiers:** B Analyte detected in the associated Method Blank  
J Analyte detected between MDL and RL  
ND Not Detected at the Method Detection Limit  
RL Reporting Limit  
J Analyte detected between SDL and RL

DF Dilution Factor  
MDL Method Detection Limit  
R RPD outside accepted control limits  
S Spike Recovery outside control limits  
N Parameter not NELAP certified

**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS5\_241023C

Sample ID: MB-117681	Batch ID: 117681	TestNo: E624.1	Units: mg/L							
SampType: MBLK	Run ID: GCMS5_241023C	Analysis Date: 10/23/2024 2:15:00 PM	Prep Date: 10/23/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual

Benzene	<0.000300	0.00100								
Carbon tetrachloride	<0.000300	0.00100								
Chlorobenzene	<0.000300	0.00100								
Chloroform	<0.000300	0.00100								
Chlorodibromomethane	<0.000300	0.00100								
1,2-Dibromoethane	<0.000300	0.00100								
1,2-Dichloroethane	<0.000300	0.00100								
1,1-Dichloroethene	<0.000300	0.00100								
Methyl ethyl ketone	<0.00500	0.0150								
Tetrachloroethene	<0.000600	0.00200								
Trichloroethene	<0.000600	0.00100								
1,1,1-Trichloroethane	<0.000300	0.00100								
TTHM (Total Trihalomethanes)	<0.000300	0.00100								
Vinyl chloride	<0.000300	0.00100								
Acrolein	<0.00500	0.0150								
Acrylonitrile	<0.00100	0.00300								
1,1,2,2-Tetrachloroethane	<0.000300	0.00100								
Bromoform	<0.000300	0.00100								
Chloroethane	<0.00100	0.00500								
2-Chloroethylvinylether	<0.00600	0.0100								
Bromodichloromethane	<0.000300	0.00100								
1,1-Dichloroethane	<0.000300	0.00100								
1,2-Dichloropropane	<0.000300	0.00100								
1,3-Dichloropropene (cis)	<0.000300	0.00100								
1,3-Dichloropropene (trans)	<0.000300	0.00100								
Ethylbenzene	<0.000300	0.00100								
Methyl bromide	<0.00100	0.00500								
Methyl chloride	<0.00100	0.00500								
Methylene chloride (DCM)	<0.00250	0.00500								
Toluene	<0.000600	0.00200								
trans-1,2-Dichloroethylene	<0.000300	0.00200								
1,1,2-Trichloroethane	<0.000300	0.00100								
1,2-Dichlorobenzene	<0.000300	0.00100								
1,3-Dichlorobenzene	<0.000300	0.00100								
1,4-Dichlorobenzene	<0.000300	0.00100								
Surr: 1,2-Dichloroethane-d4	202		200.0		101	72	119			
Surr: 4-Bromofluorobenzene	213		200.0		107	76	119			
Surr: Dibromofluoromethane	195		200.0		97.6	85	115			
Surr: Toluene-d8	219		200.0		109	81	120			

<b>Qualifiers:</b>	B	Analyte detected in the associated Method Blank	DF	Dilution Factor
	J	Analyte detected between MDL and RL	MDL	Method Detection Limit
	ND	Not Detected at the Method Detection Limit	R	RPD outside accepted control limits
	RL	Reporting Limit	S	Spike Recovery outside control limits
	J	Analyte detected between SDL and RL	N	Parameter not NELAP certified

**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS5\_241023C

Sample ID: 2410196-13AMS	Batch ID: 117681	TestNo: E624.1	Units: mg/L							
SampType: MS	Run ID: GCMS5_241023C	Analysis Date: 10/23/2024 9:08:00 PM	Prep Date: 10/23/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Benzene	0.0247	0.00100	0.0232	0	106	37	151			
Carbon tetrachloride	0.0229	0.00100	0.0232	0	98.6	70	140			
Chlorobenzene	0.0235	0.00100	0.0232	0	101	37	160			
Chloroform	0.0239	0.00100	0.0232	0	103	51	138			
Chlorodibromomethane	0.0227	0.00100	0.0232	0	97.8	53	149			
1,2-Dibromoethane	0.0204	0.00100	0.0232	0	88.1	40	160			
1,2-Dichloroethane	0.0231	0.00100	0.0232	0	99.4	49	155			
1,1-Dichloroethene	0.0225	0.00100	0.0232	0	97.2	10	234			
Methyl ethyl ketone	0.103	0.0150	0.116	0	88.7	40	160			
Tetrachloroethene	0.0231	0.00200	0.0232	0	99.5	64	148			
Trichloroethene	0.0222	0.00100	0.0232	0	95.6	70	157			
1,1,1-Trichloroethane	0.0225	0.00100	0.0232	0	96.8	52	162			
TTHM (Total Trihalomethanes)	0.0902	0.00100	0.0928	0	97.2	40	160			
Vinyl chloride	0.0296	0.00100	0.0232	0	128	10	251			
Acrolein	0.0396	0.0150	0.0580	0	68.4	40	160			
Acrylonitrile	0.0414	0.00300	0.0464	0	89.2	40	160			
1,1,2,2-Tetrachloroethane	0.0216	0.00100	0.0232	0	92.9	46	157			
Bromoform	0.0192	0.00100	0.0232	0	82.9	45	169			
Chloroethane	0.0243	0.00500	0.0232	0	105	14	230			
2-Chloroethylvinylether	<0.00600	0.0100	0.0232	0	0	5	273			S
Bromodichloromethane	0.0244	0.00100	0.0232	0	105	35	155			
1,1-Dichloroethane	0.0268	0.00100	0.0232	0	116	59	155			
1,2-Dichloropropane	0.0273	0.00100	0.0232	0	118	10	210			
1,3-Dichloropropene (cis)	0.0221	0.00100	0.0232	0	95.1	10	227			
1,3-Dichloropropene (trans)	0.0219	0.00100	0.0232	0	94.5	17	183			
Ethylbenzene	0.0231	0.00100	0.0232	0	99.6	37	162			
Methyl bromide	0.0158	0.00500	0.0232	0	68.0	10	242			
Methyl chloride	0.0386	0.00500	0.0232	0	166	5	273			
Methylene chloride (DCM)	0.0239	0.00500	0.0232	0	103	10	221			
Toluene	0.0234	0.00200	0.0232	0	101	47	150			
trans-1,2-Dichloroethylene	0.0231	0.00200	0.0232	0	99.5	54	156			
1,1,2-Trichloroethane	0.0219	0.00100	0.0232	0	94.4	52	150			
1,2-Dichlorobenzene	0.0235	0.00100	0.0232	0	101	18	190			
1,3-Dichlorobenzene	0.0238	0.00100	0.0232	0	102	59	156			
1,4-Dichlorobenzene	0.0235	0.00100	0.0232	0	101	18	190			
Surr: 1,2-Dichloroethane-d4	187		200.0		93.5	72	119			
Surr: 4-Bromofluorobenzene	206		200.0		103	76	119			
Surr: Dibromofluoromethane	197		200.0		98.6	85	115			
Surr: Toluene-d8	205		200.0		102	81	120			

**Qualifiers:** B Analyte detected in the associated Method Blank  
 J Analyte detected between MDL and RL  
 ND Not Detected at the Method Detection Limit  
 RL Reporting Limit  
 J Analyte detected between SDL and RL

DF Dilution Factor  
 MDL Method Detection Limit  
 R RPD outside accepted control limits  
 S Spike Recovery outside control limits  
 N Parameter not NELAP certified



**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** GCMS5\_241023C

Sample ID: 2410196-13AMSD	Batch ID: 117681	TestNo: E624.1	Units: mg/L							
SampType: MSD	Run ID: GCMS5_241023C	Analysis Date: 10/23/2024 9:33:00 PM	Prep Date: 10/23/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Benzene	0.0258	0.00100	0.0232	0	111	37	151	4.64	40	
Carbon tetrachloride	0.0238	0.00100	0.0232	0	103	70	140	3.92	40	
Chlorobenzene	0.0243	0.00100	0.0232	0	105	37	160	3.26	40	
Chloroform	0.0247	0.00100	0.0232	0	106	51	138	3.18	40	
Chlorodibromomethane	0.0209	0.00100	0.0232	0	90.0	53	149	8.33	40	
1,2-Dibromoethane	0.0183	0.00100	0.0232	0	78.7	40	160	11.3	40	
1,2-Dichloroethane	0.0216	0.00100	0.0232	0	92.9	49	155	6.78	40	
1,1-Dichloroethene	0.0233	0.00100	0.0232	0	100	10	234	3.21	32	
Methyl ethyl ketone	0.0828	0.0150	0.116	0	71.4	40	160	21.6	40	
Tetrachloroethene	0.0235	0.00200	0.0232	0	101	64	148	1.94	39	
Trichloroethene	0.0231	0.00100	0.0232	0	99.5	70	157	4.03	40	
1,1,1-Trichloroethane	0.0232	0.00100	0.0232	0	99.8	52	162	3.08	36	
TTHM (Total Trihalomethanes)	0.0861	0.00100	0.0928	0	92.8	40	160	4.68	40	
Vinyl chloride	0.0303	0.00100	0.0232	0	131	10	251	2.26	40	
Acrolein	0.0314	0.0150	0.0580	0	54.1	40	160	23.2	40	
Acrylonitrile	0.0315	0.00300	0.0464	0	67.9	40	160	27.1	40	
1,1,2,2-Tetrachloroethane	0.0188	0.00100	0.0232	0	81.1	46	157	13.6	40	
Bromoform	0.0164	0.00100	0.0232	0	70.7	45	169	15.8	40	
Chloroethane	0.0244	0.00500	0.0232	0	105	14	230	0.567	40	
2-Chloroethylvinylether	<0.00600	0.0100	0.0232	0	0	5	273	0	40	S
Bromodichloromethane	0.0241	0.00100	0.0232	0	104	35	155	1.07	40	
1,1-Dichloroethane	0.0277	0.00100	0.0232	0	119	59	155	3.02	40	
1,2-Dichloropropane	0.0282	0.00100	0.0232	0	122	10	210	3.20	40	
1,3-Dichloropropene (cis)	0.0220	0.00100	0.0232	0	95.0	10	227	0.090	40	
1,3-Dichloropropene (trans)	0.0205	0.00100	0.0232	0	88.3	17	183	6.73	40	
Ethylbenzene	0.0237	0.00100	0.0232	0	102	37	162	2.62	40	
Methyl bromide	0.0167	0.00500	0.0232	0	71.8	10	242	5.44	40	
Methyl chloride	0.0399	0.00500	0.0232	0	172	5	273	3.38	40	
Methylene chloride (DCM)	0.0248	0.00500	0.0232	0	107	10	221	3.87	28	
Toluene	0.0243	0.00200	0.0232	0	105	47	150	3.61	40	
trans-1,2-Dichloroethylene	0.0242	0.00200	0.0232	0	104	54	156	4.87	40	
1,1,2-Trichloroethane	0.0199	0.00100	0.0232	0	85.7	52	150	9.70	40	
1,2-Dichlorobenzene	0.0232	0.00100	0.0232	0	99.8	18	190	1.32	40	
1,3-Dichlorobenzene	0.0251	0.00100	0.0232	0	108	59	156	5.36	40	
1,4-Dichlorobenzene	0.0245	0.00100	0.0232	0	106	18	190	4.06	40	
Surr: 1,2-Dichloroethane-d4	179		200.0		89.5	72	119	0	0	
Surr: 4-Bromofluorobenzene	216		200.0		108	76	119	0	0	
Surr: Dibromofluoromethane	193		200.0		96.4	85	115	0	0	
Surr: Toluene-d8	204		200.0		102	81	120	0	0	

**Qualifiers:** B Analyte detected in the associated Method Blank  
J Analyte detected between MDL and RL  
ND Not Detected at the Method Detection Limit  
RL Reporting Limit  
J Analyte detected between SDL and RL

DF Dilution Factor  
MDL Method Detection Limit  
R RPD outside accepted control limits  
S Spike Recovery outside control limits  
N Parameter not NELAP certified

**CLIENT:** Pollution Control Services  
**Work Order:** 2410204  
**Project:** PCS 779075

## ANALYTICAL QC SUMMARY REPORT

**RunID:** UV/VIS\_2\_241028C

The QC data in batch 117728 applies to the following samples: 2410204-02B

Sample ID: MB-117728	Batch ID: 117728	TestNo: M4500-CN E	Units: mg/L							
SampType: MBLK	Run ID: UV/VIS_2_241028C	Analysis Date: 10/28/2024 5:07:00 PM	Prep Date: 10/28/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Cyanide, Amenable to Chlorination	<0.0100	0.0200								
Cyanide, Total	<0.0100	0.0200								

Sample ID: LCS-117728	Batch ID: 117728	TestNo: M4500-CN E	Units: mg/L							
SampType: LCS	Run ID: UV/VIS_2_241028C	Analysis Date: 10/28/2024 5:08:00 PM	Prep Date: 10/28/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Cyanide, Total	0.186	0.0200	0.2000	0	92.9	85	115			

Sample ID: 2410238-01AMS	Batch ID: 117728	TestNo: M4500-CN E	Units: mg/L							
SampType: MS	Run ID: UV/VIS_2_241028C	Analysis Date: 10/28/2024 5:08:00 PM	Prep Date: 10/28/2024							
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Cyanide, Total	0.168	0.0200	0.2000	0	84.0	79	114			

Sample ID: 2410238-01AMSD		Batch ID: 117728		TestNo: M4500-CN E		Units: mg/L				
SampType: MSD		Run ID: UV/VIS_2_241028C		Analysis Date: 10/28/2024 5:09:00 PM		Prep Date: 10/28/2024				
Analyte	Result	RL	SPK value	Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Cyanide, Total	0.177	0.0200	0.2000	0	88.6	79	114	5.43	20	

**Qualifiers:** B Analyte detected in the associated Method Blank  
J Analyte detected between MDL and RL  
ND Not Detected at the Method Detection Limit  
RL Reporting Limit  
J Analyte detected between SDL and RL

DF Dilution Factor  
MDL Method Detection Limit  
R RPD outside accepted control limits  
S Spike Recovery outside control limits  
N Parameter not NELAP certified

## Pollution Control Services Sample Log-In Checklist

779075

PCS Sample No(s) 779075 779076 COC No. \_\_\_\_\_

Client/Company Name: Uvalde Checklist Completed by: LMN

### Sample Delivery to Lab Via:

Client Drop Off ☒ Commercial Carrier: Bus \_\_\_\_\_ UPS \_\_\_\_\_ Lone Star \_\_\_\_\_ FedEx \_\_\_\_\_ USPS \_\_\_\_\_  
PCS Field Services: Collection/Pick Up \_\_\_\_\_ Other: \_\_\_\_\_

### Sample Kit/Coolers

Sample Kit/Cooler? Yes ☒ No \_\_\_\_\_ Sample Kit/Cooler: Intact? Yes ☒ No \_\_\_\_\_  
Custody Seals on Sample Kit/Cooler: Not Present \_\_\_\_\_ If Present, Intact \_\_\_\_\_ Broken \_\_\_\_\_  
Sample Containers Intact; Unbroken and Not Leaking? Yes ☒ No \_\_\_\_\_  
Custody Seals on Sample Bottles: Not Present \_\_\_\_\_ If Present, Intact \_\_\_\_\_ Broken \_\_\_\_\_  
COC Present with Shipment or Delivery or Completed at Drop Off? Yes ☒ No \_\_\_\_\_  
Has COC sample date/time and other pertinent information been provided by client/sampler? Yes: ☒ No: \_\_\_\_\_  
Has COC been properly Signed when Received/Relinquished? Yes ☒ No \_\_\_\_\_  
Does COC agree with Sample Bottle Information, Bottle Types, Preservation, etc.? Yes \_\_\_\_\_ No \_\_\_\_\_  
All Samples Received before Hold Time Expiration? Yes \_\_\_\_\_ No \_\_\_\_\_  
Sufficient Sample Volumes for Analysis Requested? Yes ☒ No \_\_\_\_\_  
Zero Headspace in VOA Vial? Yes \_\_\_\_\_ No \_\_\_\_\_

### Sample Preservation:

\* Cooling: Not Required \_\_\_\_\_ or Required ☒  
If cooling required, record temperature of submitted samples Observed/Corrected 7 / 4 °C  
Is Ice Present in Sample Kit/Cooler? ☒ Yes \_\_\_\_\_ No \_\_\_\_\_ Samples received same day as collected? ☒ Yes \_\_\_\_\_ No \_\_\_\_\_  
Lab Thermometer Make and Serial Number: Vaughan 1807009583 Other: \_\_\_\_\_

Acid Preserved Sample - If present, is pH <2? Yes ☒ No \_\_\_\_\_ \*\* ☒ H<sub>2</sub>SO<sub>4</sub> ☒ HNO<sub>3</sub> \_\_\_\_\_ H<sub>3</sub>PO<sub>4</sub> \_\_\_\_\_  
Base Preserved Sample - If present, is pH >12? Yes ☒ No \_\_\_\_\_ ☒ NaOH \_\_\_\_\_  
Other Preservation: \_\_\_\_\_ If Present, Meets Requirements? Yes \_\_\_\_\_ No \_\_\_\_\_  
Sample Preservations Checked by: LMN Date 10-22-24 Time 1050  
pH paper used to check sample preservation (PCS log #): 24.131 (HEM pH checked at analysis).  
Samples Preserved/Adjusted by Lab: Lab # \_\_\_\_\_ Parameters Preserved \_\_\_\_\_ Preservative Used \_\_\_\_\_ Log # \_\_\_\_\_

Adjusted by Tech/Analyst: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

### Client Notification/ Documentation for "No" Responses Above/ Discrepancies/ Revision Comments

Person Notified: \_\_\_\_\_ Contacted by: \_\_\_\_\_  
Notified Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Method of Contact: At Drop Off: \_\_\_\_\_ Phone \_\_\_\_\_ Left Voice Mail \_\_\_\_\_ E-Mail \_\_\_\_\_ Fax \_\_\_\_\_  
Unable to Contact \_\_\_\_\_ Authorized Laboratory to Proceed: \_\_\_\_\_ (Lab Director)  
Regarding / Comments: \_\_\_\_\_

Actions taken to correct problems/discrepancies: \_\_\_\_\_

Receiving qualifier needed (requires client notification above) Temp. \_\_\_\_\_ Holding Time \_\_\_\_\_ Initials: \_\_\_\_\_

Receiving qualifier entered into LIMS at login Initial/Date: \_\_\_\_\_

Revision Comments: \_\_\_\_\_



# DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 5.0: TOXICITY TESTING REQUIREMENTS

The following **is required** for facilities with a current operating design flow of **1.0 MGD or greater**, with an EPA-approved **pretreatment** program (or those required to have one under 40 CFR Part 403), or are required to perform Whole Effluent Toxicity testing. See instructions for further details.

This worksheet is not required for minor amendments without renewal.

## Section 1. Required Tests (Instructions Page 88)

Indicate the number of 7-day chronic or 48-hour acute Whole Effluent Toxicity (WET) tests performed in the four and one-half years prior to submission of the application.

7-day Chronic: see Section 3

48-hour Acute: see Section 3

## Section 2. Toxicity Reduction Evaluations (TREs)

Has this facility completed a TRE in the past four and a half years? Or is the facility currently performing a TRE?

☐ Yes ☒ No

**If yes**, describe the progress to date, if applicable, in identifying and confirming the toxicant.

Click to enter text.

Summary of Submitted Test Information  
for Permit Application

*Section #3*

If the required biomonitoring test information has been previously submitted via both the Discharge Monitoring Reports (DMRs) and the Table Is (as found in the permit), Part 2 need not be completed. Instead, a summary of the testing results for all valid tests performed over the past four and one-half years should be submitted instead. The summary should be in the format similar to the table below, include the test species, the dated the test was initiated, the NOEC for survival and sublethal effects (for a chronic test).

Permittee: Uvalde, City of

- Uvalde WRC

Permit No.: WQ0010306001

Outfall No.: 001

Test No.	Test Date	Test Specie	NOEC Survival	NOEC Sublethal or LC50
75386	2/4/2020	<i>Daphnia pulex</i>	>100	
		<i>Pimephales promelas</i>	>100	
75381	2/4/2020	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
76775	6/2/2020	<i>Ceriodaphnia dubia</i>	45	45
		<i>Pimephales promelas</i>	80	80
76978	7/14/2020	<i>Ceriodaphnia dubia</i>	80	80
75384	8/4/2020	<i>Daphnia pulex</i>	>100	
		<i>Pimephales promelas</i>	>100	
75382	8/4/2020	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
76979	9/15/2020	<i>Ceriodaphnia dubia</i>	80	80
75383	11/3/2020	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
79014	2/2/2021	<i>Daphnia pulex</i>	>100	
		<i>Pimephales promelas</i>	>100	
79010	2/2/2021	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
79015	5/11/2021	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
79013	8/3/2021	<i>Daphnia pulex</i>	>100	
		<i>Pimephales promelas</i>	>100	
79011	8/3/2021	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
79012	11/2/2021	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
82193	2/10/2022	<i>Daphnia pulex</i>	>100	
		<i>Pimephales promelas</i>	>100	



Summary of Submitted Test Information  
for Permit Application

If the required biomonitoring test information has been previously submitted via both the Discharge Monitoring Reports (DMRs) and the Table Is (as found in the permit), Part 2 need not be completed. Instead, a summary of the testing results for all valid tests performed over the past four and one-half years should be submitted instead. The summary should be in the format similar to the table below, include the test species, the dated the test was initiated, the NOEC for survival and sublethal effects (for a chronic test).

Permittee: Uvalde, City of

- Uvalde WRC

Permit No.: WQ0010306001

Outfall No.: 001

Test No.	Test Date	Test Specie	NOEC Survival	NOEC Sublethal or LC50
82189	2/10/2022	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
82194	5/10/2022	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
82192	8/9/2022	<i>Daphnia pulex</i>	>100	
		<i>Pimephales promelas</i>	>100	
82190	8/9/2022	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
82191	11/8/2022	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
85618	3/21/2023	<i>Daphnia pulex</i>	>100	
		<i>Pimephales promelas</i>	>100	
85614	3/21/2023	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
85619	5/9/2023	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
85617	8/8/2023	<i>Daphnia pulex</i>	>100	
		<i>Pimephales promelas</i>	>100	
85615	8/8/2023	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
85616	11/7/2023	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80
91800	2/27/2024	<i>Daphnia pulex</i>	>100	
		<i>Pimephales promelas</i>	>100	
91796	2/27/2024	<i>Ceriodaphnia dubia</i>	80	80**
		<i>Pimephales promelas</i>	80	80
91801	5/14/2024	<i>Ceriodaphnia dubia</i>	80	80**
		<i>Pimephales promelas</i>	80	80
91799	8/15/2024	<i>Daphnia pulex</i>	>100	
		<i>Pimephales promelas</i>	>100	



Summary of Submitted Test Information  
for Permit Application

If the required biomonitoring test information has been previously submitted via both the Discharge Monitoring Reports (DMRs) and the Table Is (as found in the permit), Part 2 need not be completed. Instead, a summary of the testing results for all valid tests performed over the past four and one-half years should be submitted instead. The summary should be in the format similar to the table below, include the test species, the dated the test was initiated, the NOEC for survival and sublethal effects (for a chronic test).

Permittee: Uvalde, City of - Uvalde WRC  
Permit No.: WQ0010306001  
Outfall No.: 001

Test No.	Test Date	Test Specie	NOEC Survival	NOEC Sublethal or LC50
91797	8/15/2024	<i>Ceriodaphnia dubia</i>	80	80
		<i>Pimephales promelas</i>	80	80

# 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

Average Daily Flows, in MGD: 0

Significant IUs – non-categorical:

Number of IUs: 0

Average Daily Flows, in MGD: 0

Other IUs:

Number of IUs: 2

Average Daily Flows, in MGD: 0.05

### B. Treatment plant interference

In the past three years, has your POTW experienced treatment plant interference (see instructions)?

☐ Yes ☒ No

**If yes**, identify the dates, duration, description of interference, and probable cause(s) and possible source(s) of each interference event. Include the names of the IUs that may have caused the interference.

Click to enter text.

### C. Treatment plant pass through

In the past three years, has your POTW experienced pass through (see instructions)?

☐ Yes ☒ No

**If yes**, identify the dates, duration, a description of the pollutants passing through the treatment plant, and probable cause(s) and possible source(s) of each pass through event. Include the names of the IUs that may have caused pass through.

Click to enter text.

#### D. Pretreatment program

Does your POTW have an approved pretreatment program?

☐ Yes ☒ No

**If yes**, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

☐ Yes ☒ No

**If yes**, complete Section 2.c. and 2.d. only, and skip Section 3.

**If no to either question above**, skip Section 2 and complete Section 3 for each significant industrial user and categorical industrial user.

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

Click to enter text.

#### B. Non-substantial modifications



Have there been any **non-substantial modifications** to the approved pretreatment program that have not been submitted to TCEQ for review and acceptance?

☐ Yes ☐ No

If yes, identify all non-substantial modifications that have not been submitted to TCEQ, including the purpose of the modification.

Click to enter text.

**C. Effluent parameters above the MAL**

In Table 6.0(1), list all parameters measured above the MAL in the POTW’s effluent monitoring during the last three years. Submit an attachment if necessary.

**Table 6.0(1) – Parameters Above the MAL**

Pollutant	Concentration	MAL	Units	Date

**D. Industrial user interruptions**

Has any SIU, CIU, or other IU caused or contributed to any problems (excluding interferences or pass throughs) at your POTW in the past three years?

☐ Yes ☐ No

If **yes**, identify the industry, describe each episode, including dates, duration, description of the problems, and probable pollutants.

Click to enter text.

**Section 3. Significant Industrial User (SIU) Information and**

**A. General information**

Company Name: None

SIC Code: Click to enter text.

Contact name: Click to enter text.

Address: Click to enter text.

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

Telephone number: Click to enter text.

Email address: Click to enter text.

**B. Process information**

Describe the industrial processes or other activities that affect or contribute to the SIU(s) or CIU(s) discharge (i.e., process and non-process wastewater).

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: Click to enter text.

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: Click to enter text.

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

**E. Pretreatment standards**

Is the SIU or CIU subject to technically based local limits as defined in the instructions?

☐ Yes ☐ No

Is the SIU or CIU subject to categorical pretreatment standards found in *40 CFR Parts 405-471*?

☐ Yes ☐ No

**If subject to categorical pretreatment standards**, indicate the applicable category and subcategory for each categorical process.

Category: 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?

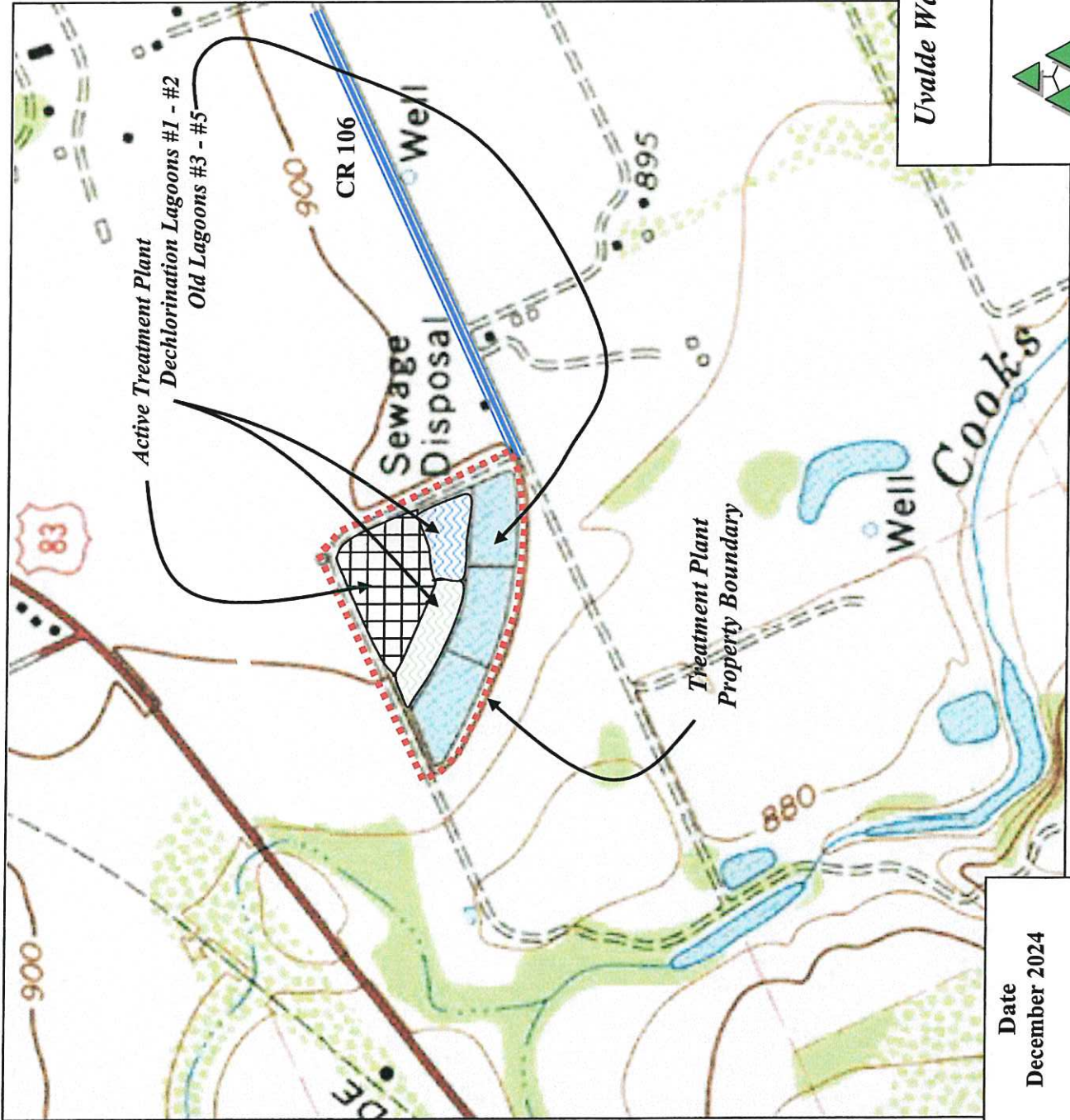
☐ Yes ☐ No

**If yes**, identify the SIU, describe each episode, including dates, duration, description of problems, and probable pollutants.

[Click to enter text.](#)



Attachment "B"



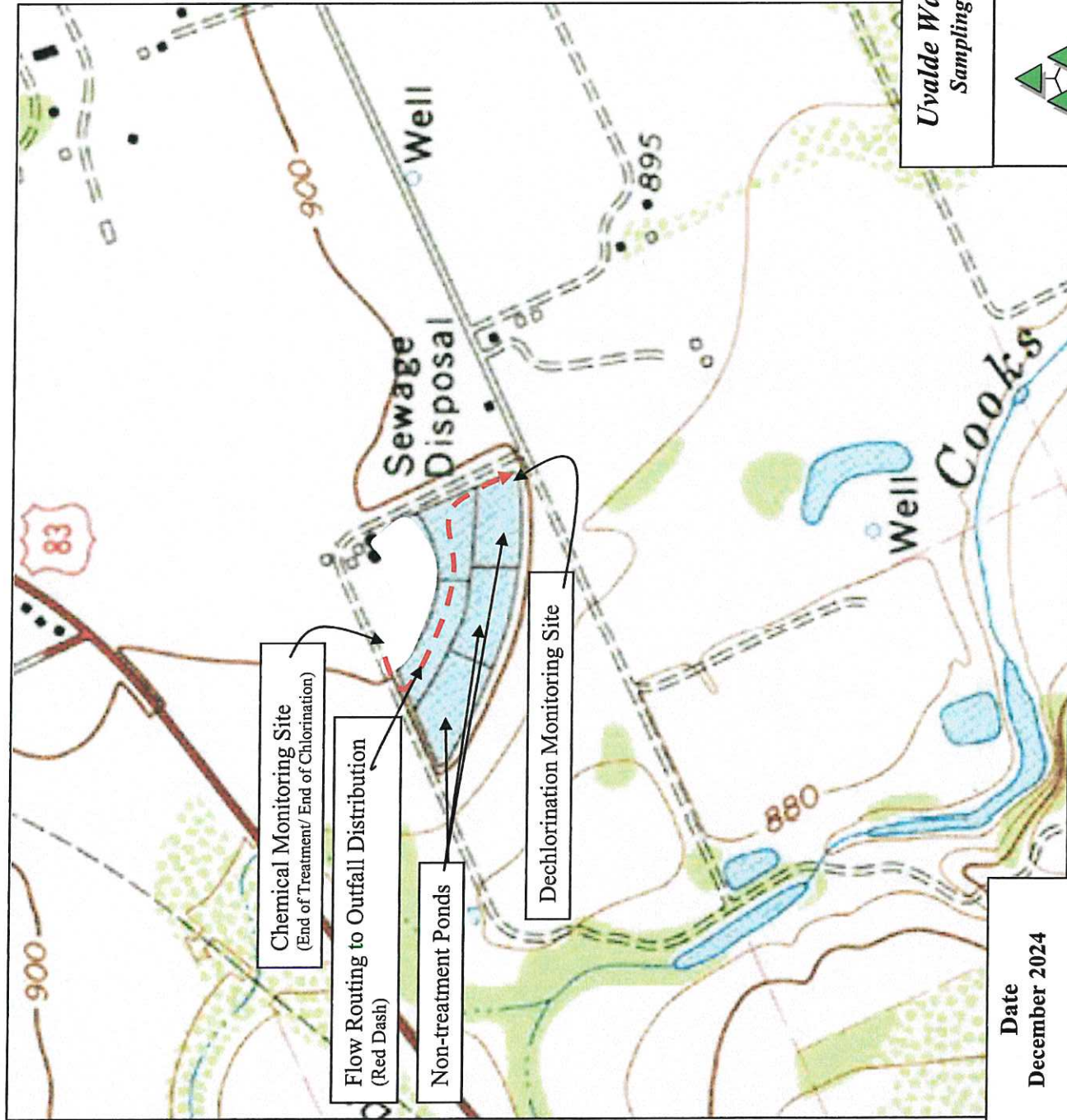
**Uvalde Wastewater Treatment Plant**  
Plant Boundaries



**Kenneth M. Cave & Associates**  
P.O. Box 768 Leakey, TX 78873  
210-414-3906

Date  
December 2024

Attachment "E"



Approximate Scale = 1000'

**Uvalde Wastewater Treatment Plant**  
Sampling Locations and Flow Routing

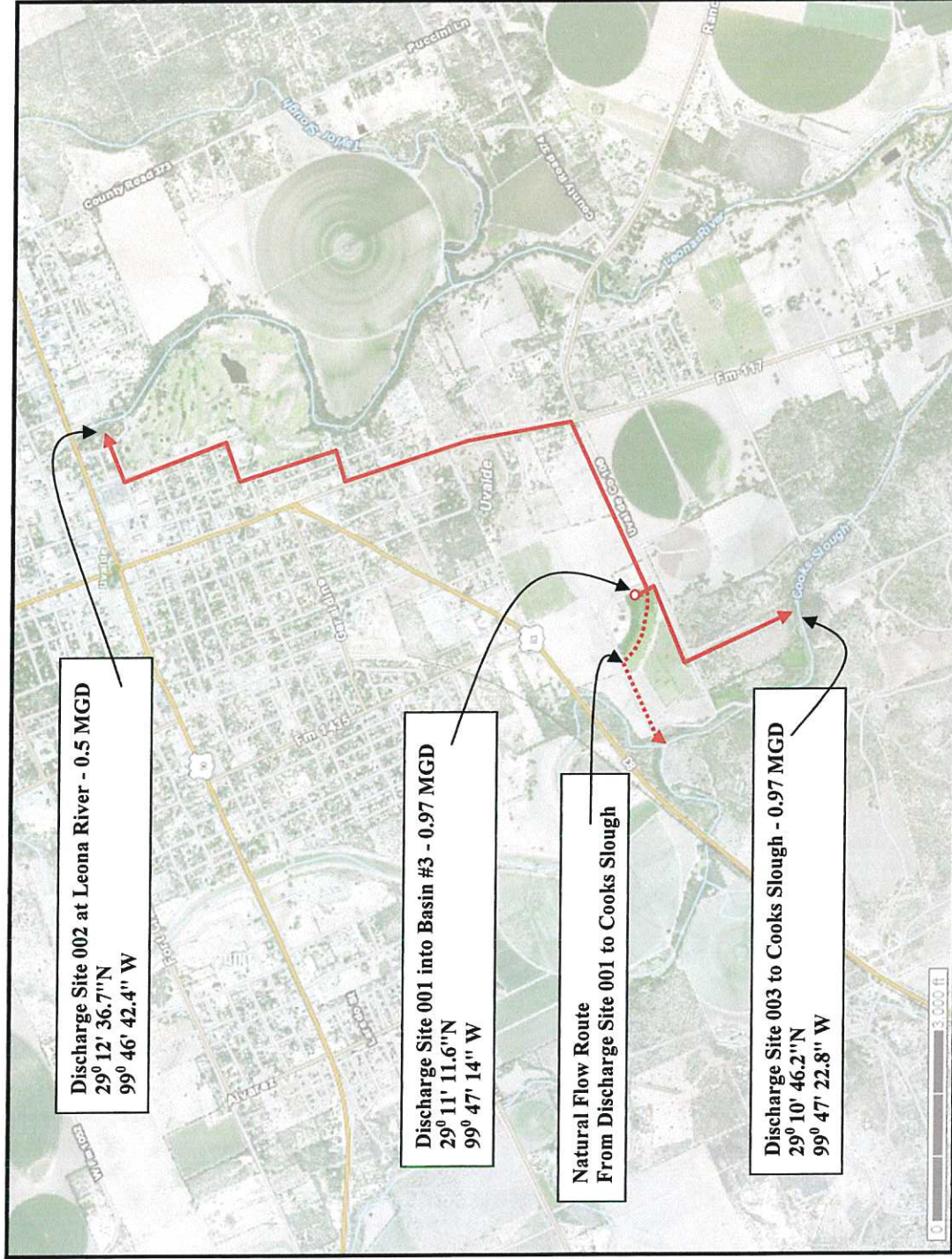


**Kenneth M. Cave & Associates**  
P.O. Box 768 Leakey, TX 78873  
210-414-3906

**Date**  
December 2024



Attachment "D"



Date  
December 2024

*Uvalde Plant Outfall Locations*



# POLLUTION CONTROL SERVICES



## Report of Sample Analysis

Client Information		Sample Information		Laboratory Information	
<b>Juan Zamora</b> <b>Uvalde, City of</b> <b>P.O. Box 799</b> <b>Uvalde, TX 78801</b>		<b>Project Name:</b> TCEQ Permit Renewal <b>Sample ID:</b> Effluent <b>Matrix:</b> Non-Potable Water <b>Date/Time Taken:</b> 10/22/2024 0800		<b>PCS Sample #:</b> 779075 <b>Page 1 of 4</b> <b>Date/Time Received:</b> 10/22/2024 10:26 <b>Report Date:</b> 11/7/2024 <b>Approved by:</b> <b>Chuck Wallgren, President</b>	

Test Description	Result	Units	RL	Analysis Date/Time	Method	Analyst
BOD5	4	mg/L	3	10/22/2024 13:58	SM 5210 B	GQM
Chloride_IC	159	mg/L	2	10/22/2024 21:05	EPA 300.0	JAS
Conductivity, Specific	1,021	µmhos/cm at 25° C	1	10/22/2024 15:36	SM 2510B	LCC
Nitrate-N_IC	2.3	mg/L	0.2	10/22/2024 21:05	EPA 300.0	JAS
Sulfate_IC	28	mg/L	2	10/22/2024 21:05	EPA 300.0	JAS
Total Dissolved Solids	596	mg/L	10	10/23/2024 14:25	SM 2540C	PML
Fluoride_IC	<0.2	mg/L	0.20	10/22/2024 21:05	EPA 300.0	JAS
Kjeldahl-N, Total	4	mg/L	1	10/25/2024 12:15	SM 4500-N B/C	BMR

Test Description		Quality Assurance Summary					
Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit
BOD5	<1	23	N/A	N/A	N/A	187	167 - 228
Chloride_IC	<1	10	95	97	102	105	85 - 115
Conductivity, Specific	N/A	N/A	N/A	N/A	N/A		
Nitrate-N_IC	<1	20	70	102	130	104	85 - 115
Sulfate_IC	<1	10	94	95	101	104	85 - 115
Total Dissolved Solids	3	10	N/A	N/A	N/A		
Fluoride_IC	2	10	87	96	105	99	85 - 115
Kjeldahl-N, Total	<1	10	90	99	109	106	85 - 115
		<1					

**Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAP unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.

These analytical results relate only to the sample tested.  
 All data is reported on an 'As Is' basis unless designated as 'Dry Wt'.  
 RL = Reporting Limits  
 QC Data Reported in %, Except BOD in mg/L



# POLLUTION CONTROL SERVICES



## Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
<b>Juan Zamora</b> <b>Uvalde, City of</b> <b>P.O. Box 799</b> <b>Uvalde, TX 78801</b>	<b>Project Name:</b> TCEQ Permit Renewal <b>Sample ID:</b> Effluent <b>Matrix:</b> Non-Potable Water <b>Date/Time Taken:</b> 10/22/2024 0800	<b>PCS Sample #:</b> 779075 <b>Page 2 of 4</b> <b>Date/Time Received:</b> 10/22/2024 10:26 <b>Report Date:</b> 11/7/2024

Test Description	Result	Units	RL	Analysis Date/Time	Method	Analyst
Alkalinity, Total (@pH 4.5)	224	mg/L	10	10/23/2024 09:10	SM 2320 B	LCC
Arsenic/ICP MS	0.0006	mg/L	0.0005	11/01/2024 13:36	EPA 200.8	DJL
Barium/ICP (Total)	0.020	mg/L	0.010	10/29/2024 08:39	EPA 200.7 / 6010 B	DJL
Cadmium/ICP (Total)	<0.001	mg/L	0.001	10/29/2024 08:39	EPA 200.7 / 6010 B	DJL
Chromium/ICP (Total)	<0.003	mg/L	0.003	10/29/2024 08:39	EPA 200.7 / 6010 B	DJL
Copper/ICP (Total)	<0.002	mg/L	0.002	10/29/2024 08:39	EPA 200.7 / 6010 B	DJL
Lead/ICP MS	<0.0005	mg/L	0.0005	11/01/2024 13:36	EPA 200.8	DJL
Aluminum/ICP (Total)	0.016	mg/L	0.010	10/29/2024 08:39	EPA 200.7 / 6010 B	DJL

Quality Assurance Summary						
Test Description	Precision	Limit	LCL	MS	MSD	Blank
Alkalinity, Total (@pH 4.5)	1	10	95	100	99	98
Arsenic/ICP MS	<1	20	70	99	99	99
Barium/ICP (Total)	<1	20	75	94	94	100
Cadmium/ICP (Total)	1	20	75	98	97	100
Chromium/ICP (Total)	<1	20	75	95	95	100
Copper/ICP (Total)	<1	20	75	96	96	95
Lead/ICP MS	3	20	70	84	82	101
Aluminum/ICP (Total)	<1	20	75	100	100	100

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# POLLUTION CONTROL SERVICES



## Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
<b>Juan Zamora</b> <b>Uvalde, City of</b> <b>P.O. Box 799</b> <b>Uvalde, TX 78801</b>	<b>Project Name:</b> TCEQ Permit Renewal <b>Sample ID:</b> Effluent <b>Matrix:</b> Non-Potable Water <b>Date/Time Taken:</b> 10/22/2024 0800	<b>PCS Sample #:</b> 779075 <b>Page 3 of 4</b> <b>Date/Time Received:</b> 10/22/2024 10:26 <b>Report Date:</b> 11/7/2024

Test Description	Result	Units	RL	Analysis Date/Time	Method	Analyst
Beryllium/ICP (Total)	<0.0005	mg/L	0.0005	10/29/2024 08:39	EPA 200.7 / 6010 B	DJL
Trivalent Chromium	<0.003	mg/L	N/A	10/29/2024 08:39	Calculation	DJL
Hexavalent Chrome	<0.003	mg/L	0.003	10/22/2024 16:05	SM 3500-Cr B	DJL
Nickel/ICP (Total)	<0.002	mg/L	0.002	10/29/2024 08:39	EPA 200.7 / 6010 B	DJL
Zinc/ICP (Total)	0.017	mg/L	0.010	10/29/2024 08:39	EPA 200.7 / 6010 B	DJL
Antimony/ICP MS	<0.005	mg/L	0.005	11/01/2024 13:36	EPA 200.8	DJL
Thallium/ICP MS	<0.0005	mg/L	0.0005	11/01/2024 13:36	EPA 200.8	DJL
Selenium/ICP MS	<0.005	mg/L	0.005	11/01/2024 13:36	EPA 200.8	DJL

Quality Assurance Summary						
Test Description	Precision	Limit	LCL	MS	MSD	UCL
Beryllium/ICP (Total)	<1	20	75	99	99	125
Trivalent Chromium	N/A	N/A	N/A			N/A
Hexavalent Chrome	1	20	75	95	96	125
Nickel/ICP (Total)	1	20	75	93	92	125
Zinc/ICP (Total)	<1	20	75	96	96	125
Antimony/ICP MS	<1	20	70	88	88	130
Thallium/ICP MS	2	20	70	84	83	130
Selenium/ICP MS	1	20	70	112	111	130
						101
						85 - 115

**Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAP unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.

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 All data is reported on an 'As Is' basis unless designated as 'Dry Wt'.  
 RL = Reporting Limits



# POLLUTION CONTROL SERVICES



## Report of Sample Analysis

Client Information		Sample Information	Laboratory Information
<b>Juan Zamora</b> <b>Uvalde, City of</b> <b>P.O. Box 799</b> <b>Uvalde, TX 78801</b>		<b>Project Name:</b> TCEQ Permit Renewal <b>Sample ID:</b> Effluent <b>Matrix:</b> Non-Potable Water <b>Date/Time Taken:</b> 10/22/2024 0800	<b>PCS Sample #:</b> 779075 <b>Page 4 of 4</b> <b>Date/Time Received:</b> 10/22/2024 10:26 <b>Report Date:</b> 11/7/2024

Test Description	Result	Units	RL	Analysis Date/Time	Method	Analyst
Silver/ICP MS	<0.0005	mg/L	0.0005	11/01/2024 13:36	EPA 200.8	DJL
Pesticides 617	See Attached				DHL	
604.1 Hexachlorophene	See Attached				DHL	
Semi Volatiles 625	See Attached				DHL	
Pesticides 608	See Attached				DHL	
Pesticides 632	See Attached				DHL	
Pesticide 1657	See Attached				DHL	
Herbicides 615	See Attached				SPL	

Quality Assurance Summary						
Test Description	Precision	Limit	LCL	MS	MSD	UCL
Silver/ICP MS	5	20	70	79	83	130
Pesticides 617	See Attached Report for Quality Assurance Information					
604.1 Hexachlorophene	See Attached Report for Quality Assurance Information					
Semi Volatiles 625	See Attached Report for Quality Assurance Information					
Pesticides 608	See Attached Report for Quality Assurance Information					
Pesticides 632	See Attached Report for Quality Assurance Information					
Pesticide 1657	See Attached Report for Quality Assurance Information					
Herbicides 615	See Attached Report for Quality Assurance Information					

**Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.

These analytical results relate only to the sample tested. All data is reported on an 'As Is' basis unless designated as 'Dry Wt'. RL = Reporting Limits	
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# POLLUTION CONTROL SERVICES



## Report of Sample Analysis

Client Information		Sample Information		Laboratory Information
<b>Juan Zamora</b> <b>Uvalde, City of</b> <b>P.O. Box 799</b> <b>Uvalde, TX 78801</b>		<b>Project Name:</b> TCEQ Permit Renewal <b>Sample ID:</b> Effluent <b>Matrix:</b> Non-Potable Water <b>Date/Time Taken:</b> 10/22/2024 0800		<b>PCS Sample #:</b> 779076 <b>Page 1 of 1</b> <b>Date/Time Received:</b> 10/22/2024 10:26 <b>Report Date:</b> 11/1/2024 <b>Approved by:</b> Chuck Wallgren, President

Test Description	Flag	Result	Units	RL	Analysis Date/Time	Method	Analyst
Oil and Grease (H.E.M.)		<5.0	mg/L	5	10/29/2024 09:30	EPA 1664 Rev	EMV
Mercury/CV AFS		<0.000005	mg/L	0.000005	10/30/2024 14:30	EPA 245.7	DJL
Phenols, Distillable		See Attached				SPL	
Cyanide, Amenable	+	See Attached				DHL	
Volatiles 624		See Attached				DHL	

Test Description		Quality Assurance Summary						
Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
4	18	N/A	N/A	N/A	N/A	95	78 - 114	
9	20	70	106	96	130	126	70 - 130	<1.8ng/L
See Attached Report for Quality Assurance Information								
See Attached Report for Quality Assurance Information								
See Attached Report for Quality Assurance Information								

**Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAP unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.

+ Subcontract Work - NELAP Certified Lab		These analytical results relate only to the sample tested. All data is reported on an 'As Is' basis unless designated as 'Dry Wt'. RL = Reporting Limits
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# POLLUTION CONTROL SERVICES

Chain of Custody Number  
**779075**

## MULTIPLE SAMPLE ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

Stamp 1<sup>st</sup> sample and COC as same number

CUSTOMER INFORMATION				REPORT INFORMATION				Requested Analysis			
Name: Uvalde, City of				Attention: Juan Zamora				Phone: (830) 278-3347			
Fax: (830) 278-5332											
Project Information:				Collected By: Sergio Quiroz							
TCEQ Permit Renewal				Container							
Report "Soils" <input type="checkbox"/> As Is <input type="checkbox"/> Dry Wt.				Preservative							
Client / Field Sample ID				Matrix							
Effluent				DW-Drinking Water, NPW-Non-potable water, WW-Wastewater, LW-Liquid Waste							
Start: 10/22/2024				Type							
End: 0800				Number							
Effluent				Field Chlorine							
Start: 10/22/2024				Residual mg/L							
End: 0800				Composite or							
Start: 10/22/2024				Grab							
End: 0800				C <input checked="" type="checkbox"/> G <input type="checkbox"/>							
Start: 10/22/2024				C <input type="checkbox"/> G <input checked="" type="checkbox"/>							
End: 0800				C <input type="checkbox"/> G <input type="checkbox"/>							
Start: 10/22/2024				C <input type="checkbox"/> G <input type="checkbox"/>							
End: 0800				C <input type="checkbox"/> G <input type="checkbox"/>							
Start: 10/22/2024				C <input type="checkbox"/> G <input type="checkbox"/>							
End: 0800				C <input type="checkbox"/> G <input type="checkbox"/>							
Start: 10/22/2024				C <input type="checkbox"/> G <input type="checkbox"/>							
End: 0800				C <input type="checkbox"/> G <input type="checkbox"/>							
Start: 10/22/2024				C <input type="checkbox"/> G <input type="checkbox"/>							
End: 0800				C <input type="checkbox"/> G <input type="checkbox"/>							
Start: 10/22/2024				C <input type="checkbox"/> G <input type="checkbox"/>							
End: 0800				C <input type="checkbox"/> G <input type="checkbox"/>							
Start: 10/22/2024				C <input type="checkbox"/> G <input type="checkbox"/>							
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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: [Click to enter text.](#)

f. **For existing permits:**

Permit Number: WQ00 10306-001

EPA I.D. (TPDES only): TX 0023094

Expiration Date: 07/20/2025

### Section 3. Facility Owner (Applicant) and Co-Applicant 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 Uvalde

*(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: 600648455

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: [Click to enter text.](#)

Last Name, First Name: Luevano, Hector R.

Title: Mayor

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

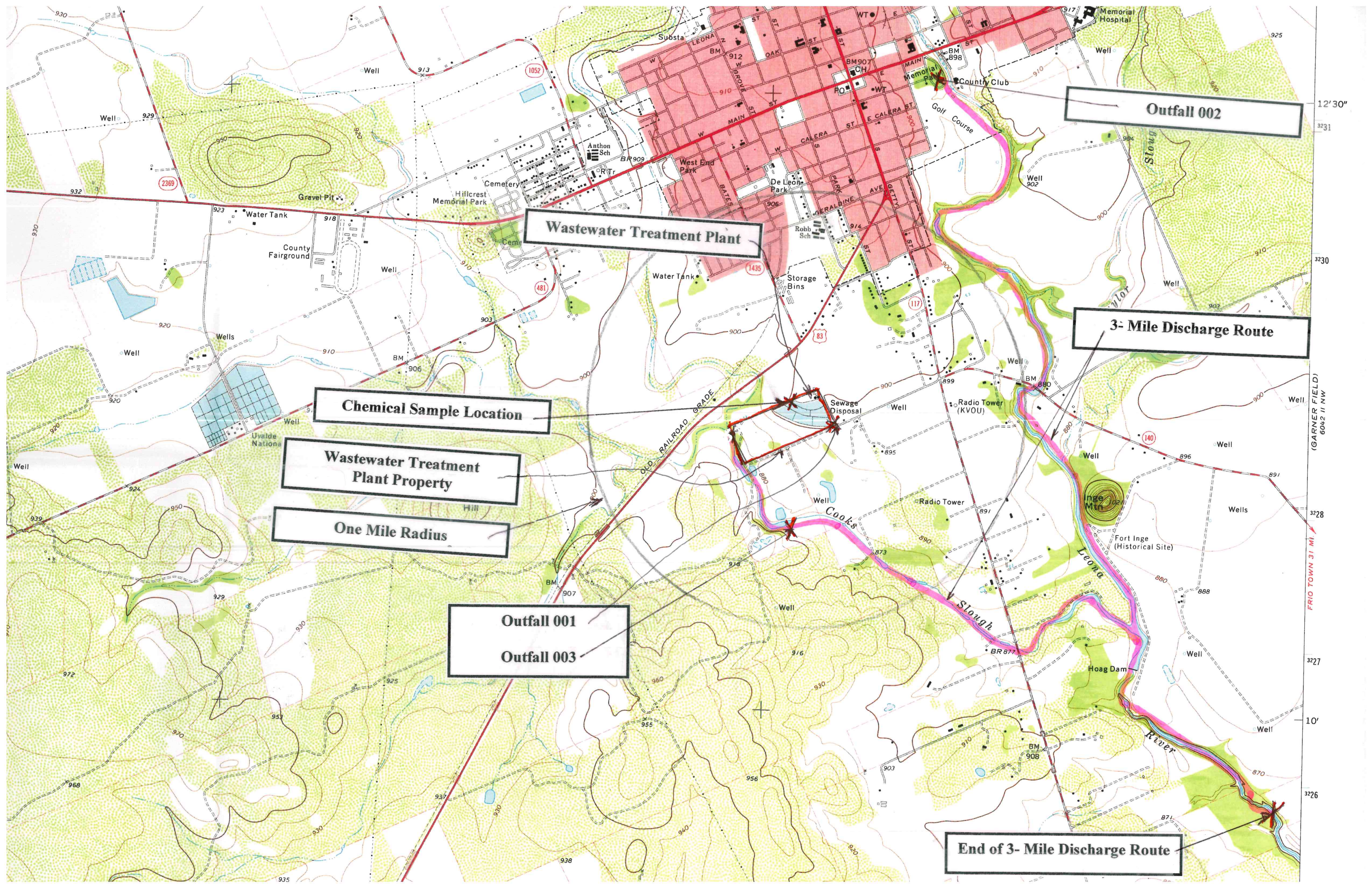
B. **Co-applicant information.** Complete this section only if another person or entity is required to apply as a co-permittee.

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

[Click to enter text.](#)

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





Wastewater Treatment Plant

Outfall 002

3- Mile Discharge Route

Chemical Sample Location

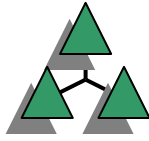
Wastewater Treatment Plant Property

One Mile Radius

Outfall 001  
Outfall 003

End of 3- Mile Discharge Route





*Kenneth M. Cave & Associates*

*Consulting Environmental Scientists*

March 26, 2025

## ***E-Letter Document***

Brandon Maldonado  
Texas Commission on Environmental Quality  
Water Quality Division  
Applications Review and Processing Team (MC148)  
P.O. Box 13087  
Austin, Texas 78711-3087

Reference: NOV Response  
Renewal Application for City of Uvalde  
WQ0010306-001

Dear Mr. Maldonado:

This E-Letter is in response to your email letter of March 19. Your request required submission of this information via email. The following are your requested items followed by my response in blue. Attachments are provided in support to this E-Letter Response.

1. Plain Language Summary Applicants are required to submit a plain language summary as part of their renewal application. Please create a PLS using the attached template.

**The Plain Language Summary is provided as an attachment.**

2. Administrative Report 1.0 Section 2 Item A: The name and title of the person signing the form was inadvertently left blank. Please provide an updated section 2, item A with the name and title of the person who signed Section 14 of the administrative report 1.0

**Please note that AR 1.0 Section 2A was supplied, as was requested, to your office via email. We have reviewed the sent document and note that that section was properly addressed. However, somehow the printed copy did not show the required information. Attached is a revised copy of page 3 of Form 10053 containing the information as per your request. Also attached is a copy of the signature form.**



3. USGS Map The provide map is missing the applicant's property boundaries, the facility boundaries, and the one-mile radius. Please provide and updated USGS map with all items included.

**Your letter requested this map via email. However, that map is far too large to provide. The original map indicated the property occupied by the facilities. Attachment B to the application which was submitted has been updated to show the "entire property" boundary plus the location of the facilities. Attachment B (as revised) shows this information on a portion of the 71/2' map. I trust this revised attachment meets your needs.**

4. The following is a portion of the NORI which contains information relevant to your application. Please read it carefully and indicate if it contains any errors or omissions.

**We have read the Draft NORI and believe it to be accurate.**

If you have any questions, please feel free to call anytime.

Sincerely,

***Kenneth M. Cave & Associates***



Kenneth M. Cave  
Senior Scientist

Attachments

E-Copy: City of Uvalde

## Plain Language Summary

### DOMESTIC WASTEWATER

*The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 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.*

City of Uvalde (CN600648455) operates City of Uvalde Wastewater Treatment Plant (RN103119087), a domestic wastewater facility. The facility is located at approximately 3 miles southwest of the intersection of FM 117 and US83 Uvalde County, Texas, in Uvalde, Uvalde County, Texas 78802. The application is a renewal to discharge a total of 2.44 MGD of treated domestic wastewater to Cooks Slough and the Leona River.

Discharges from the facility are expected to contain CBOB<sub>5</sub>, Total Suspended Solids, Ammonia Nitrogen, Nitrate Nitrogen, and E.coli freshwater. Domestic wastewater is treated by transference through a Lift Station, Carousel Aeration Basin, Dual Final Clarifiers, Chlorine Contact Chamber, and Dechlorination in ponds.

### AGUAS RESIDUALES DOMESTICAS

*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.*

City of Uvalde (CN600648455) opera Planta de tratamiento de aguas residuales de la ciudad de Uvalde (RN103119087), un instalación de aguas residuales domésticas. La instalación está ubicada en aproximadamente 3 millas al suroeste de la intersección de FM 117 y US83 en el condado de Uvalde, Texas, en Uvalde, Condado de Uvalde, Texas 78802. La solicitud es una renovación para descargar un total de 2.44 MGD de aguas residuales domésticas tratadas en Cooks Slough y el río Leona..

Se espera que las descargas de la instalación contengan CBOB<sub>5</sub>, sólidos suspendidos totales, nitrógeno amoniacal, nitrógeno nitrato y agua dulce por E. coli. Aguas residuales domésticas. está tratado por transferencia a través de una estación de bombeo, cuenca de aireación de carrusel, clarificadores finales duales, cámara de contacto de cloro y decloración en estanques.

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

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

Permit Number: WQ0010306-001

Applicant: City of Uvalde

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): Hector R. Luevano

Signatory title: Mayor

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

(Use blue ink)

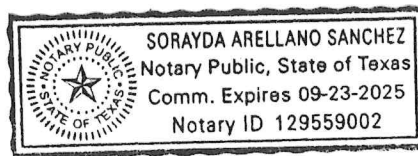
Date: 01-14-2025

Subscribed and Sworn to before me by the said Hector R. Luevano

on this 14 day of January, 20 25.

My commission expires on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Sorayda Arellano Sanchez  
Notary Public



[SEAL]

Uvalde  
County, Texas



**Brandon Maldonado**

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**From:** Ken Cave <kencave77@gmail.com>  
**Sent:** Tuesday, March 25, 2025 8:57 AM  
**To:** Brandon Maldonado  
**Cc:** Juan Zamora; LeeAnn Ortiz  
**Subject:** NOD Email of March 19 - Response  
**Attachments:** NOV E.pdf; WWTP Permit Signature 01-14-2025.pdf; Attachment B Rev..pdf; Amended Section 3 A (2).pdf; Plain Language Summary final - Uvalde 2024.pdf

Please accept this email as a complete response to your email regarding the City of Uvalde Permit Renewal Application. Attached please my E-Letter and accompanying supporting files.

I will be out of the office the rest of this week on a personal emergency matter. I will be able to receive emails.

Respectfully,

Ken Cave