



# Administrative Package Cover Page

**This file contains the following documents:**

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



# Portada de Paquete Administrativo

**Este archivo contiene los siguientes documentos:**

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



**Permitting Services, LLC**

6425 Bankside Drive, Suite 2111

Houston, TX 77096

[robin@permittingservices.net](mailto:robin@permittingservices.net)

Tel. 713-458-8612

May 23, 2024

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

Re: Application to Renew Permit Number: WQ0010414001  
Customer Number: CN601180854  
Regulated Entity Number: RN102837028

Dear Chief Officer,

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

Kendall County Water Control and Improvement District 1 (CN601180854) operates Kendall County WCID 1 Wastewater Treatment Plant (RN102837028) the plant is running in the Final Phase. It consists of one excess flow basin to divert flow at the influent station during peak flow events, which will later be pumped back into the treatment process. Two aerobic digesters will be to stabilize the sludge before dewatering per TCEQ requirements. Upgrades to the lift station, aerators, media filters, and sludge pump flow meters are included in the Final Phase. Both sludge drying beds and belt filters, and sludge pump flow meters are also included in the Final Phase. Both sludge drying beds and belt filter press will continue to be used for sludge dewatering. Dewatered sludge will continue to be hauled off-site for landfill disposal. The facility is Located at 36 B Ranch-to-Market Road 473, in Kendall County, Texas 78013.

This application is for a renewal to dispose a daily average flow not to exceed 525,000 gallons per day of treated domestic wastewater via outfall 001.

Discharges from the facility are expected to contain seven-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report

1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package.

Domestic wastewater is treated by the Final Phase: Untreated wastewater is pumped to a bar screen and grit chambers followed by an activated sludge reactor designed to achieve biological nutrient removal with two anaerobic selectors, an anoxic chamber and an aerobic chamber. From the activated sludge reactor, the mixed liquor flows to a secondary clarifiers for solids separation. Clarified effluent flows to effluent filters followed by sodium hypochlorite injection and chlorine contact chamber. Effluent from the chlorine contact chamber is then metered and directed to the golf course for irrigation or metered and discharged to Guadalupe River through an unnamed tributary. Sludge from the secondary clarifiers is recycled to the activated sludge reactor. Waste sludge is injected with polymer and dried on sludge drying beds or using the belt filter press. Dried sludge is hauled off-site for landfill disposal.

The plant discharges treated wastewater at a volume not to exceed an annual average flow of 525,000 gallons per day. The effluent discharges through a 8" pipe To an unnamed tributary, thence to Guadalupe River Above Canyon Lake in Segment No. 1806 of the Guadalupe River Basin.

I appreciate your time and effort in reviewing my summary. If you have any questions, please contact me at (713) 458-8612, or via email at [robin@permittingservices.net](mailto:robin@permittingservices.net).

Yours truly,

*Robin Butcko*

Robin Butcko  
Senior Wastewater Consultant  
Permitting Services, LLC  
(713) 458-8612





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23 de mayo de 2024

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

Re: Solicitud de renovación del número de permiso: WQ0010414001  
Número de cliente: CN601180854  
Número de entidad regulada: RN102837028

Estimado Oficial Principal,

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

El Distrito 1 del Control y Mejoramiento del Agua del Condado de Kendall (CN601180854) opera la planta de tratamiento de aguas residuales del condado de Kendall 1 (RN102837028) La planta se está ejecutando en la fase final. Consiste en una cuenca excesiva de flujo para desviar el flujo en la estación de influencia durante los eventos de flujo máximo, que luego se bombeará nuevamente al proceso de tratamiento. Dos digestores aeróbicos serán estabilizar el lodo antes del desagüe según los requisitos de TCEQ. Las actualizaciones a la estación de elevación, los aireadores, los filtros de medios y los medidores de flujo de la bomba de lodo se incluyen en la fase final. Tanto las camas de secado de lodo como los filtros del cinturón, y los medidores de flujo de la bomba de lodo también se incluyen en la fase final. Tanto las camas de secado de lodo como la prensa del filtro de correa continuarán utilizándose para la desagüe de lodo. El lodo deshuesado continuará siendo llevado fuera del sitio para la eliminación del vertedero. La instalación está ubicada en 36 B Ranch-to-Market Road 473, en el condado de Kendall, Texas 78013.

Esta solicitud es para una renovación para disponer de un flujo promedio diario que no exceda los 525,000 galones por día de aguas residuales domésticas tratadas a través del emisario 001.

Se espera que las descargas de la instalación contengan una demanda bioquímica carbonosa de oxígeno (CBOD5) de siete días, sólidos suspendidos totales (SST), nitrógeno amoniacal (NH3-N) y Escherichia coli. En la sección 7 del Informe Técnico Nacional 1.0 se incluyen contaminantes potenciales adicionales. Análisis de contaminantes de efluentes tratados en el paquete de



solicitud de permiso. Las aguas residuales domésticas son tratadas por la Fase Final: Las aguas residuales no tratadas se bombean a una pantalla de barra y cámaras de arena seguidas de un reactor de lodo activado diseñado para lograr la eliminación de nutrientes biológicos con dos selectores anaeróbicos, una cámara anóxica y una cámara aeróbica. Desde el reactor de lodo activado, el licor mixto fluye a un clarificadores secundarios Para la separación de sólidos. Flujos de efluentes aclarados a filtros de efluentes seguidos de inyección de hipoclorito de sodio y cámara de contacto con cloro. El efluente de la cámara de contacto de cloro se mide y se dirige al campo de golf para riego o medido y descargado al río Guadalupe a través de un afluente sin nombre. El lodo de los clarificadores secundarios se recicla al reactor de lodo activado. El lodo de desechos se inyecta con polímero y se seca en lechos de secado de lodo o usando la prensa del filtro de correa. El lodo seco se transporta fuera del sitio para la eliminación del vertedero.

Las descargas de la planta trataron las aguas residuales a un volumen para no exceder un flujo promedio anual de 525,000 galones por día. El efluente descarga a través de una tubería de 8 "a un afluente sin nombre, desde allí al río Guadalupe sobre el Iago Canyon en el segmento No. 1806 de la cuenca del río Guadalupe.

Agradezco su tiempo y esfuerzo en la revisión de mi resumen. Si tiene alguna pregunta, comuníquese conmigo al (713) 458-8612, o por correo electrónico a [robin@permittingservices.net](mailto:robin@permittingservices.net).

Atentamente,

*Robin Butcko*

Robin Butcko  
Senior Wastewater Consultant  
Permitting Services, LLC  
713.458.8612

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0010414001

**APPLICATION.** Kendall County Water Control and Improvement District No. 1, P.O. Box 745, Comfort, Texas 78013, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0010414001 (EPA I.D. No. TX0116742) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 525,000 gallons per day. The domestic wastewater treatment facility is located at 36B Ranch-to-Market Road 473, near the city of Comfort, in Kendall County, Texas 78013. The discharge route is from the plant site to an unnamed tributary; thence to Guadalupe River Above Canyon Lake. TCEQ received this application on May 28, 2024. The permit application will be available for viewing and copying at Comfort Public Library, 701 High Street, Comfort, in Kendall County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

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

This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-98.892777,29.973888&level=18>

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

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

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

**PUBLIC COMMENT / PUBLIC MEETING.** You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the opportunity to submit comments or to ask questions about the application. TCEQ will hold a public meeting if the Executive Director determines that there is a significant degree of public

interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

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

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

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

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

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

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



**INFORMATION AVAILABLE ONLINE.** For details about the status of the application, visit the Commissioners' Integrated Database at [www.tceq.texas.gov/goto/cid](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 Kendall County Water Control and Improvement District No. 1 at the address stated above or by calling Ms. Robin Butcko, BBA, Permitting Services, LLC, at 713-458-8612.

Issuance Date: June 14, 2024

# Comisión de Calidad Ambiental del Estado de Texas



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

**PERMISO NO. WQ0010414001**

**SOLICITUD.** Distrito de Control y Mejoras del Condado de Kendall No. 1, P.O. Box 745, Comfort, Texas 78013, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQ0010414001 (EPA I.D. No. TX 0116742) del Sistema de Eliminación de Descargas de Contaminantes de Texas (TPDES) para autorizar la descarga de aguas residuales tratadas en un volumen que no sobrepasa un flujo promedio diario de 525,000 galones por día. La planta está ubicada 36B Ranch-to-Market Road 473, en la ciudad de Comodidad, en el Condado de Kendall, Texas. La ruta de descarga es del sitio de la planta a afluente sin nombre; desde allí al río Guadalupe sobre el lago Canyon. La TCEQ recibió esta solicitud el 28 de mayo de 2024. La solicitud para el permiso estará disponible para leerla y copiarla en 701 High Street, Comfort, en el condado de Kendall, Texas antes de la fecha de publicación de este aviso en el periódico. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-98.892777,29.973888&level=18>

**AVISO ADICIONAL.** El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y emitirá una Decisión Preliminar sobre la solicitud. **El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.**

**COMENTARIO PUBLICO / REUNION PUBLICA.** Usted puede presentar **comentarios públicos o pedir una reunión pública sobre esta solicitud.** El propósito de una reunión pública es dar la oportunidad de presentar comentarios o hacer preguntas acerca de la solicitud. La TCEQ realiza una reunión pública si el Director Ejecutivo determina que hay un grado de interés público suficiente en la solicitud o si un legislador local lo pide. Una reunión pública no es una audiencia administrativa de lo contencioso.

**OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO.** Después del plazo para presentar comentarios públicos, el Director Ejecutivo considerará todos los comentarios apropiados y preparará una respuesta a todo los comentarios públicos esenciales, pertinentes, o significativos. **A menos que la solicitud haya sido referida**

**directamente a una audiencia administrativa de lo contencioso, la respuesta a los comentarios y la decisión del Director Ejecutivo sobre la solicitud serán enviados por correo a todos los que presentaron un comentario público y a las personas que están en la lista para recibir avisos sobre esta solicitud. Si se reciben comentarios, el aviso también proveerá instrucciones para pedir una reconsideración de la decisión del Director Ejecutivo y para pedir una audiencia administrativa de lo contencioso.** Una audiencia administrativa de lo contencioso es un procedimiento legal similar a un procedimiento legal civil en un tribunal de distrito del estado.

**PARA SOLICITAR UNA AUDIENCIA DE CASO IMPUGNADO, USTED DEBE INCLUIR EN SU SOLICITUD LOS SIGUIENTES DATOS:** su nombre, dirección, y número de teléfono; el nombre del solicitante y número del permiso; la ubicación y distancia de su propiedad/actividad con respecto a la instalación; una descripción específica de la forma cómo usted sería afectado adversamente por el sitio de una manera no común al público en general; una lista de todas las cuestiones de hecho en disputa que usted presente durante el período de comentarios; y la declaración "[Yo/nosotros] solicito/solicitamos una audiencia de caso impugnado". Si presenta la petición para una audiencia de caso impugnado de parte de un grupo o asociación, debe identificar una persona que representa al grupo para recibir correspondencia en el futuro; identificar el nombre y la dirección de un miembro del grupo que sería afectado adversamente por la planta o la actividad propuesta; proveer la información indicada anteriormente con respecto a la ubicación del miembro afectado y su distancia de la planta o actividad propuesta; explicar cómo y porqué el miembro sería afectado; y explicar cómo los intereses que el grupo desea proteger son pertinentes al propósito del grupo.

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión. La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados posteriormente. Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios. Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de una audiencia administrativa de lo contencioso.

**LISTA DE CORREO.** Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la solicitud. Además, puede pedir que la TCEQ ponga su nombre en una o más de las listas de correos siguientes (1) la lista de correo permanente para recibir los avisos de el solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agregue su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

**CONTACTOS E INFORMACIÓN A LA AGENCIA.** Todos los comentarios públicos y solicitudes deben ser presentadas electrónicamente vía



<http://www14.tceq.texas.gov/epic/eComment/> o por escrito dirigidos a la Comisión de Texas de Calidad Ambiental, Oficial de la Secretaría (Office of Chief Clerk), MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Tenga en cuenta que cualquier información personal que usted proporcione, incluyendo su nombre, número de teléfono, dirección de correo electrónico y dirección física pasarán a formar parte del registro público de la Agencia. Para obtener más información acerca de esta solicitud de permiso o el proceso de permisos, llame al programa de educación pública de la TCEQ, gratis, al 1-800-687-4040. Si desea información en Español, puede llamar al 1-800-687-4040.

También se puede obtener información adicional del Distrito de Control y Mejora del Agua del Condado de Kendall No. 1 a la dirección indicada arriba o llamando a Sra. Robin Butcko al 713-458-8612

Fecha de emission: 14 de junio de 2024



*Permitting Services, LLC*

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Houston, TX 77096

[robin@permittingservices.net](mailto:robin@permittingservices.net)

Tel. 713-458-8612

May 22, 2024

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

Re: Application to Renew Permit No. WQ0010414001  
(EPA I.D. No. TX0116742)

Dear TCEQ Review Team,

Permitting Services, LLC is pleased to submit a Domestic Wastewater Permit Renewal Application (WQ0010296001) on behalf of KENDALL COUNTY WCID 1 WASTEWATER TREATMENT FACILITY (CN601180854) (R10414001).

In this package you will find the original application and three copies. The Supplemental Permit Information Form, all other relevant forms and attachments are included with this letter.

I appreciate your time and effort in reviewing my request. If you have any questions, please contact me at (713) 458-8612, or via email at [robin@permittingservices.net](mailto:robin@permittingservices.net).

Yours truly,

*Robin Butcko*

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Senior Wastewater Consultant  
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May 23, 2024

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This application is for a renewal to dispose a daily average flow not to exceed 525,000 gallons per day of treated domestic wastewater via outfall 001.

Discharges from the facility are expected to contain seven-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report



1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package.

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The plant discharges treated wastewater at a volume not to exceed an annual average flow of 525,000 gallons per day. The effluent discharges through a 8" pipe To an unnamed tributary, thence to Guadalupe River Above Canyon Lake in Segment No. 1806 of the Guadalupe River Basin.

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Yours truly,

*Robin Butcko*

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Senior Wastewater Consultant  
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23 de mayo de 2024

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Re: Solicitud de renovación del número de permiso: WQ0010414001  
Número de cliente: CN601180854  
Número de entidad regulada: RN102837028

Estimado Oficial Principal,

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

El Distrito 1 del Control y Mejoramiento del Agua del Condado de Kendall (CN601180854) opera la planta de tratamiento de aguas residuales del condado de Kendall 1 (RN102837028) La planta se está ejecutando en la fase final. Consiste en una cuenca excesiva de flujo para desviar el flujo en la estación de influencia durante los eventos de flujo máximo, que luego se bombeará nuevamente al proceso de tratamiento. Dos digestores aeróbicos serán estabilizar el lodo antes del desagüe según los requisitos de TCEQ. Las actualizaciones a la estación de elevación, los aireadores, los filtros de medios y los medidores de flujo de la bomba de lodo se incluyen en la fase final. Tanto las camas de secado de lodo como los filtros del cinturón, y los medidores de flujo de la bomba de lodo también se incluyen en la fase final. Tanto las camas de secado de lodo como la prensa del filtro de correa continuarán utilizándose para la desagüe de lodo. El lodo deshuesado continuará siendo llevado fuera del sitio para la eliminación del vertedero. La instalación está ubicada en 36 B Ranch-to-Market Road 473, en el condado de Kendall, Texas 78013.

Esta solicitud es para una renovación para disponer de un flujo promedio diario que no exceda los 525,000 galones por día de aguas residuales domésticas tratadas a través del emisario 001.

Se espera que las descargas de la instalación contengan una demanda bioquímica carbonosa de oxígeno (CBOD5) de siete días, sólidos suspendidos totales (SST), nitrógeno amoniacal (NH3-N) y Escherichia coli. En la sección 7 del Informe Técnico Nacional 1.0 se incluyen contaminantes potenciales adicionales. Análisis de contaminantes de efluentes tratados en el paquete de

solicitud de permiso. Las aguas residuales domésticas son tratadas por la Fase Final: Las aguas residuales no tratadas se bombean a una pantalla de barra y cámaras de arena seguidas de un reactor de lodo activado diseñado para lograr la eliminación de nutrientes biológicos con dos selectores anaeróbicos, una cámara anóxica y una cámara aeróbica. Desde el reactor de lodo activado, el licor mixto fluye a un clarificadores secundarios Para la separación de sólidos. Flujos de efluentes aclarados a filtros de efluentes seguidos de inyección de hipoclorito de sodio y cámara de contacto con cloro. El efluente de la cámara de contacto de cloro se mide y se dirige al campo de golf para riego o medido y descargado al río Guadalupe a través de un afluente sin nombre. El lodo de los clarificadores secundarios se recicla al reactor de lodo activado. El lodo de desechos se inyecta con polímero y se seca en lechos de secado de lodo o usando la prensa del filtro de correa. El lodo seco se transporta fuera del sitio para la eliminación del vertedero.

Las descargas de la planta trataron las aguas residuales a un volumen para no exceder un flujo promedio anual de 525,000 galones por día. El efluente descarga a través de una tubería de 8 "a un afluente sin nombre, desde allí al río Guadalupe sobre el lago Canyon en el segmento No. 1806 de la cuenca del río Guadalupe.

Agradezco su tiempo y esfuerzo en la revisión de mi resumen. Si tiene alguna pregunta, comuníquese conmigo al (713) 458-8612, o por correo electrónico a [robin@permittingservices.net](mailto:robin@permittingservices.net).

Atentamente,

*Robin Butcko*

Robin Butcko  
Senior Wastewater Consultant  
Permitting Services, LLC  
713.458.8612



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

### FOR AGENCIES REVIEWING DOMESTIC TPDES WASTEWATER PERMIT APPLICATIONS

#### TCEQ USE ONLY:

Application type: \_\_\_\_ Renewal \_\_\_\_ Major Amendment \_\_\_\_ Minor Amendment \_\_\_\_ New

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

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

Agency Receiving SPIF:

\_\_\_\_ Texas Historical Commission

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

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

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

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

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

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

The following applies to all applications:

1. Permittee: Kendall County Water and Control Improvement District No. 1

Permit No. WQ00 10414001

EPA ID No. TX \_\_\_\_\_

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

Located at 36 B Ranch-to-Market Road 473, in Kendall County, Texas 78013

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

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

First and Last Name: Robin Butcko

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

Title: Senior Wastewater Consultant

Mailing Address: 6425 Bankside Drive, Suite 2111

City, State, Zip Code: Houston, TX 77096

Phone No.: 713-458-8612 Ext.:  Fax No.:

E-mail Address: robin@permitting-services.net

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

To an unnamed tributary, thence to Guadalupe River Above Canyon Lake in Segment No. 1806 of the Guadalupe River Basin.

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

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

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

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

☐ Disturbance of vegetation or wetlands

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

N/A

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

N/A

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

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

N/A

9. 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 CHECKLIST

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

APPLICANT: Kendall County Water Control and Improvement District 1

PERMIT NUMBER: WQ0010414001

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

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

**For TCEQ Use Only**

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





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

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

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

Minor Amendment (for any flow) \$150.00 ☐**Payment Information:**

Mailed      Check/Money Order Number: 20065  
Check/Money Order Amount: \$1,615.00  
Name Printed on Check: Kendall Co. Water Control & Improvement District

No. 1

EPAY Voucher Number:  

Copy of Payment Voucher enclosed? Yes ☐

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

For amendments or modifications, describe the proposed changes:

**For existing permits:**

Permit Number: WO0010414001

EPA I.D. (TPDES only): TX

Expiration Date: February 11, 2025

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

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

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

Kendall County Water Control and Improvement District No. 1

*(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: 601180854

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

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

First and Last Name: Keith Marquart

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

Title: General Manager

**B. Co-applciant 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-applciant applying for this permit?

N/A

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

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

CN:

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

Prefix (Mr., Ms., Miss):

First and Last Name:

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

Title:

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



### C. Core Data Form

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

**Attachment:** D

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

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

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

First and Last Name: Robin Butcko

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

Title: Senior Wastewater Consultant

Organization Name: Permitting Services, LLC

Mailing Address: 6425 Bankside Drive, Suite 2111

City, State, Zip Code: Houston, TX 77096

Phone No.: 713-458-8612 Ext.:

Fax No.:

E-mail Address: robin@permittingservices.net

Check one or both: ☒ Administrative Contact

☒ Technical Contact

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

First and Last Name: Keith Marquart

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

Title: General Manager

Organization Name: Kendall County Water and Improvement District No. 1

Mailing Address: P.O. Box 745

City, State, Zip Code: Comfort, TX 78013-0745

Phone No.: 830-995-2227 Ext.:

Fax No.:

E-mail Address: kmkcwcid@htc.net

Check one or both: ☒ Administrative Contact

☒ Technical Contact

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

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

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

First and Last Name: Robin Butcko  
Credential (P.E, P.G., Ph.D., etc.): BBA  
Title: Senior Wastewater Consultant  
Organization Name: Permitting Services, LLC  
Mailing Address: 6425 Bankside Drive, Suite 2111  
City, State, Zip Code: Houston, TX 77096  
Phone No.: 713-458-8612 Ext.: [REDACTED] Fax No.: [REDACTED]  
E-mail Address: robin@permittingservices.net

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

First and Last Name: Keith Marquart  
Credential (P.E, P.G., Ph.D., etc.): [REDACTED]  
Title: General Manager  
Organization Name: Kendall County Water Control and Improvement District No. 1  
Mailing Address: P.O. Box 745  
City, State, Zip Code: Comfort, TX 78013  
Phone No.: 830-995-2227 Ext.: [REDACTED] Fax No.: [REDACTED]  
E-mail Address: kmkcwcid@hctc.net

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

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

Prefix (Mr., Ms., Miss): Mr.  
First and Last Name: Keith Marquart  
Credential (P.E, P.G., Ph.D., etc.): [REDACTED]  
Title: General Manager  
Organization Name: Kendall County Water Control and Improvement District No. 1  
Mailing Address: P.O. Box 745  
City, State, Zip Code: Comfort, TX 78013  
Phone No.: 830-995-2227 Ext.: [REDACTED] Fax No.: [REDACTED]  
E-mail Address: kmkcwcid@hctc.net

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

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



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

First and Last Name: Keith Marquart

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

Title: General Manager

Organization Name: Kendall County Control and Improvement District No. 1

Mailing Address: P.O. Box 745

City, State, Zip Code: Comfort, TX 78013

Phone No.: 830-995-2227 Ext.: [REDACTED]

Fax No.: [REDACTED]

E-mail Address: kmkcwcid@hctc.net

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

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

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

### A. Individual Publishing the Notices

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

First and Last Name: Robin Butcko

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

Title: Senior Wastewater Consultant

Organization Name: Permitting Services, LLC

Mailing Address: 6425 Bankside Drive, Suite 2111

City, State, Zip Code: Houston, TX 77096

Phone No.: 713-458-8612 Ext.: [REDACTED]

Fax No.: [REDACTED]

E-mail Address: robin@permitting-services.net

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

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

☒ E-mail Address

☐ Fax

☐ Regular Mail

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

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

First and Last Name: Robin Butcko

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

Title: Senior Wastewater Consultant

Organization Name: Permitting Services, LLC

Phone No.: 713-458-8612 Ext.: [REDACTED]

E-mail: robin@permittingservices.net

#### D. Public Viewing Information

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

Public building name: Comfort Public Library

Location within the building: [REDACTED]

Physical Address of Building: 701 High Street

City: Comfort

County: Kendall

Contact Name: [REDACTED]

Phone No.: 830-995-2398 Ext.: [REDACTED]

#### 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? Spanish

#### F. Public Involvement Plan Form

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

Attachment: N/A

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

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN10237028

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):

Kendall County Water Control and Improvement District No. 1 Wastewater Treatment Plant

C. Owner of treatment facility: Kendal County Water Control and Improvement District No. 1

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

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

Prefix (Mr., Ms., Miss):

First and Last Name: Kendall County Water Control and Improvement District No. 1

Mailing Address: P.O. 745

City, State, Zip Code: Comfort, TX 78013

Phone No.: 830-995-2227

E-mail Address: kmkcwcid@hctc.net

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

Attachment: N/A

E. Owner of effluent disposal site:

Prefix (Mr., Ms., Miss): N/A

First and Last Name:

Mailing Address:

City, State, Zip Code:



Phone No.: [REDACTED] E-mail Address: [REDACTED]

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

Attachment: N/A

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

Prefix (Mr., Ms., Miss): N/A

First and Last Name: [REDACTED]

Mailing Address: [REDACTED]

City, State, Zip Code: [REDACTED]

Phone No.: [REDACTED] E-mail Address: [REDACTED]

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: [REDACTED]

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

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

☒ Yes ☐ No

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

[REDACTED]

- 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:

[REDACTED]

City nearest the outfall(s): Comfort

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

Outfall Latitude: 29-58'-19"N Longitude: -98-53'35"

- 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:** [REDACTED]

- 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 36)

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

☐ Yes ☐ No

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

[REDACTED]

- B. City nearest the disposal site: [REDACTED]

- C. County in which the disposal site is located: [REDACTED]

- D. Disposal Site Latitude: [REDACTED] Longitude: [REDACTED]

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

[REDACTED]

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

[REDACTED]

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

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

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:

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

Account number:

Amount past due:

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, please provide the following information:

Enforcement order number:

Amount past due:

### Section 13. Attachments (Instructions Page 38)

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

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

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

☐ Attachment 1 for Individuals as co-applicants

☒ Other Attachments. Please specify: Core Data Form, Site Drawing, Flow Diagram



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

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

Permit Number: WQ0010414001

Applicant: Kendall County WCID #1

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.

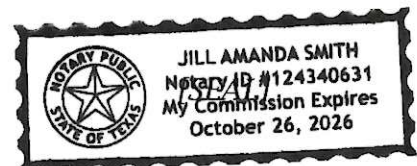
Signatory name (typed or printed): Keith Marquart

Signatory title: General Manager

Signature: Keith Marquart Date: 5-6-2024  
(Use blue ink)

Subscribed and Sworn to before me by the said Keith Marquart  
on this 6<sup>th</sup> day of May, 20 24.  
My commission expires on the 26<sup>th</sup> day of October, 20 26.

Jill A. Smith  
Notary Public



Kendall  
County, Texas



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TEXAS COMMISSION ON ENVIRONMENTAL QUALITY  
DOMESTIC WASTEWATER PERMIT APPLICATION

**DOMESTIC TECHNICAL REPORT 1.0**

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

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

**A. Existing/Interim I Phase**

Design Flow (MGD):

2-Hr Peak Flow (MGD):

Estimated construction start date:

Estimated waste disposal start date:

**B. Interim II Phase**

Design Flow (MGD):

2-Hr Peak Flow (MGD):

Estimated construction start date:

Estimated waste disposal start date:

**C. Final Phase**

Design Flow (MGD): 0.525

2-Hr Peak Flow (MGD):

Estimated construction start date:

Estimated waste disposal start date:

**D. Current operating phase: Final**

Provide the startup date of the facility: 10/02/2003

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

**A. Treatment process description**

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

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

Attachment C

Port or pipe diameter at the discharge point, in inches: 8"

#### **B. Treatment Units**

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

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

| <b>Treatment Unit Type</b> | <b>Number of Units</b> | <b>Dimensions (L x W x D)</b> |
|----------------------------|------------------------|-------------------------------|
| Attachment C               |                        |                               |
|                            |                        |                               |
|                            |                        |                               |
|                            |                        |                               |
|                            |                        |                               |
|                            |                        |                               |
|                            |                        |                               |

#### **C. Process flow diagrams**

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

**Attachment:** E



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

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

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

#### Attachment: **B**

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

Comfort, TX & Center Point, TX. The area served will be eastern Kerr County including Comfort and the community of Center Point along Highway 27 to the Kerr/Kendall County line.

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

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

Yes ☐ No ☒

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

Yes ☐ No ☒

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

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

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

Yes ☐ No ☒

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

Yes ☐ No ☐

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

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

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

### A. Summary transmittal

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

Yes ☐ No ☐

If yes, provide the date(s) of approval for each phase:

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.

### 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.

**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*.

Other Requirement No. 8-permittee shall submit a summary transmittal letter prior to construction of the final phase treatment facility. Other Requirement 9- Permittee shall notify TCEQ Regional Office (Region 13) at least 45 days prior to completion of the new facilities.

**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.



### **3. Grit disposal**

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

Yes ☐ No ☐

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

Describe the method of grit disposal.

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

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

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

## **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 [REDACTED] or TXRNE [REDACTED]

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:

## **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.

**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.**

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

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

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

Yes ☐ No ☐

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



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

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

Does the facility discharge in the Lake Houston watershed?

Yes ☐ No ☒

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

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

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

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

Yes ☐ No ☒

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

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

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

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

Is the facility accepting or will it accept septic waste?

Yes ☐ No ☒

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

Yes ☐ No ☐

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

Yes ☐ No ☐

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

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

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

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

Yes ☐ No ☒

If yes, provide the date that the plant started accepting the waste, an estimate how much waste is accepted on a monthly basis (gallons or millions of gallons), a description of the entities generating the waste, and any distinguishing chemical or other physical characteristic of the waste. Also note if this information has or has not changed since the last permit action.

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

Is the facility in operation?

Yes ☒ No ☐

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

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

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

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

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



| Pollutant                                 | Average Conc. | Max Conc. | No. of Samples | Sample Type | Sample Date/Time |
|---|---------------|-----------|----------------|-------------|------------------|
| 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

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

| Pollutant                             | Average Conc. | Max Conc. | No. of Samples | Sample Type | Sample Date/Time |
|---------------------------------------|---------------|-----------|----------------|-------------|------------------|
| Total Suspended Solids, mg/l          | N/A           | N/A       | N/A            | N/A         | N/A              |
| Total Dissolved Solids, mg/l          | N/A           | N/A       | N/A            | N/A         | N/A              |
| pH, standard units                    | N/A           | N/A       | N/A            | N/A         | N/A              |
| Fluoride, mg/l                        | N/A           | N/A       | N/A            | N/A         | N/A              |
| Aluminum, mg/l                        | N/A           | N/A       | N/A            | N/A         | N/A              |
| Alkalinity (CaCO <sub>3</sub> ), mg/l | N/A           | N/A       | N/A            | N/A         | N/A              |

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

Facility Operator Name: Keith Marquart

Facility Operator's License Classification and Level:

Facility Operator's License Number:

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

### A. Sludge disposal method

Identify the current or anticipated sludge disposal method or methods from the

following list. Check all that apply.

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

#### **B. Sludge disposal site**

Disposal site name: Covel Gardens Landfill

TCEQ permit or registration number: H2093

County where disposal site is located: Bexar County

#### **C. Sludge transportation method**

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

Name of the hauler: Waste Management

Hauler registration number: CG-27005

Sludge is transported as a:

Liquid ☐      semi-liquid ☐      semi-solid ☒      solid ☐

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

### A. Beneficial use authorization

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

Yes ☐ No ☒

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

Yes ☐ No ☐

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

Yes ☐ No ☐

### B. Sludge processing authorization

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

Sludge Composting Yes ☐ No ☒

Marketing and Distribution of sludge Yes ☐ No ☒

Sludge Surface Disposal or Sludge Monofill Yes ☐ No ☒

Temporary storage in sludge lagoons Yes ☐ No ☒

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

Yes ☐ No ☐

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

Does this facility include sewage sludge lagoons?

Yes ☐ No ☒

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

### A. Location information

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



- Original General Highway (County) Map:  
**Attachment:** [REDACTED]
- USDA Natural Resources Conservation Service Soil Map:  
**Attachment:** [REDACTED]
- Federal Emergency Management Map:  
**Attachment:** [REDACTED]
- Site map:  
**Attachment:** [REDACTED]

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:** [REDACTED]

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:

### **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: [REDACTED]

Total Kjeldahl Nitrogen, mg/kg: [REDACTED]

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: [REDACTED]

Phosphorus, mg/kg: [REDACTED]

Potassium, mg/kg: [REDACTED]  
pH, standard units: [REDACTED]  
Ammonia Nitrogen mg/kg: [REDACTED]  
Arsenic: [REDACTED]  
Cadmium: [REDACTED]  
Chromium: [REDACTED]  
Copper: [REDACTED]  
Lead: [REDACTED]  
Mercury: [REDACTED]  
Molybdenum: [REDACTED]  
Nickel: [REDACTED]  
Selenium: [REDACTED]  
Zinc: [REDACTED]  
Total PCBs: [REDACTED]

Provide the following information:

Volume and frequency of sludge to the lagoon(s): [REDACTED]

Total dry tons stored in the lagoons(s) per 365-day period: [REDACTED]  
[REDACTED]

Total dry tons stored in the lagoons(s) over the life of the unit: [REDACTED]  
[REDACTED]

### 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.

[REDACTED]

### D. Site development plan

Provide a detailed description of the methods used to deposit sludge in the

lagoon(s):

Attach the following documents to the application.

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

Attachment:

- Copy of the closure plan

Attachment:

- Copy of deed recordation for the site

Attachment:

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

Attachment:

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

Attachment:

- Procedures to prevent the occurrence of nuisance conditions

Attachment:

#### **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:

## **Section 12. Authorizations/Compliance/Enforcement**



## (Instructions Page 63)

### A. Additional authorizations

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

Yes ☒

No ☐

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

R 10414001-reclaimed water from KCWCID#1 to be used for golf course irrigation.

### 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 63)

### A. RCRA hazardous wastes

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

Yes ☐ No ☒

### B. Remediation activity wastewater

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

Yes ☐ No ☒

**C. Details about wastes received**

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

Attachment: 

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

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

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

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

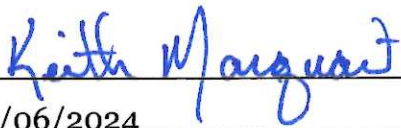
The following certification statement shall be signed and submitted with every application. See the *Signature Page* section in the Instructions, for a list of designated representatives who may sign the certification.

### CERTIFICATION:

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

Printed Name: Keith Marquart

Title:

Signature: 

Date: 05/06/2024



## DOMESTIC TECHNICAL REPORT WORKSHEET 2.0

### RECEIVING WATERS

The following is required for all TPDES permit applications

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

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

Yes ☐ No ☒

If yes, provide the following:

Owner of the drinking water supply:

Distance and direction to the intake:

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

Attachment:

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

Does the facility discharge into tidally affected waters?

Yes ☐ No ☒

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

##### A. Receiving water outfall

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

##### 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).

|                        |
|------------------------|
| <div><div></div></div> |
|------------------------|

### 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).

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

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

Yes ☐ No ☐

If yes, this Worksheet is complete.

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

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

Name of the immediate receiving waters: unnamed tributary

#### A. Receiving water type

Identify the appropriate description of the receiving waters.

☒ Stream

☐ Freshwater Swamp or Marsh

☐ Lake or Pond

Surface area, in acres:

Average depth of the entire water body, in feet:

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

☐ Man-made Channel or Ditch

- ☐ Open Bay
- ☐ Tidal Stream, Bayou, or Marsh
- ☐ Other, specify:

### 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:

### C. Downstream perennial confluences

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

Segment No. 1806 Guadalupe River is 1/3 mile downstream

### 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.



Guadalupe River is approximately ¼ mile downstream

**E. Normal dry weather characteristics**

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

No effluent discharge at the outfall as they were reused at the golf course.

Date and time of observation:

Was the water body influenced by stormwater runoff during observations?

Yes ☐

No ☒

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

**A. Upstream influences**

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

- |   |  |
|---|--|
| <input type="checkbox"/> Oil field activities | <input type="checkbox"/> Urban runoff  |
| <input type="checkbox"/> Upstream discharges  | <input type="checkbox"/> Agricultural runoff                                   |
| <input type="checkbox"/> Septic tanks         | <input checked="" type="checkbox"/> Other(s), specify <u>runoff from IH-10</u> |

**B. Waterbody uses**

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

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

- |  |   |
|--|---|
| <input type="checkbox"/> Domestic water supply | <input type="checkbox"/> Industrial water supply                      |
| <input type="checkbox"/> Park activities       | <input checked="" type="checkbox"/> Other(s), specify <u>Drainage</u> |

**C. Waterbody aesthetics**

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

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

## DOMESTIC WORKSHEET 6.0

### INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works (POTWs)

#### Section 1. All POTWs (Instructions Page 99)

##### A. Industrial users

Provide the number of each of the following types of industrial users (IUs) that discharge to your POTW and the daily flows from each user. See the Instructions for definitions of Categorical IUs, Significant IUs - non-categorical, and Other IUs.

If there are no users, enter 0 (zero).

Categorical IUs:

Number of IUs: 0

Average Daily Flows, in MGD: 0

Significant IUs - non-categorical:

Number of IUs: 0

Average Daily Flows, in MGD: 0

Other IUs:

Number of IUs: 0

Average Daily Flows, in MGD: 0

##### 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.

|             |
|-------------|
| <div></div> |
|-------------|



### 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.

|  |
|--|
|  |
|--|

### D. Pretreatment program

Does your POTW have an approved pretreatment program?

Yes ☐ No ☒

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

Is your POTW required to develop an approved pretreatment program?

Yes ☐ No ☒

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

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

## Section 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 100)

### A. Substantial modifications

Have there been any **substantial modifications** to the approved pretreatment program that have not been submitted to the TCEQ for approval according to *40 CFR §403.18*?

Yes ☐ No ☐

If **yes**, identify the modifications that have not been submitted to TCEQ, including the purpose of the modification.

**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.

**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.

### **Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 100)**

#### **A. General information**

Company Name: N/A

SIC Code:

Telephone number:  Fax number:

Contact name:

Address:

City, State, and Zip Code:

#### **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).

#### **C. Product and service information**

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



**D. Flow rate information**

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

Process Wastewater:

Discharge, in gallons/day:

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day:

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:

Category:   
Subcategories:

Category:   
Subcategories:

Category:   
Subcategories:

Category:   
Subcategories:

**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 ☐

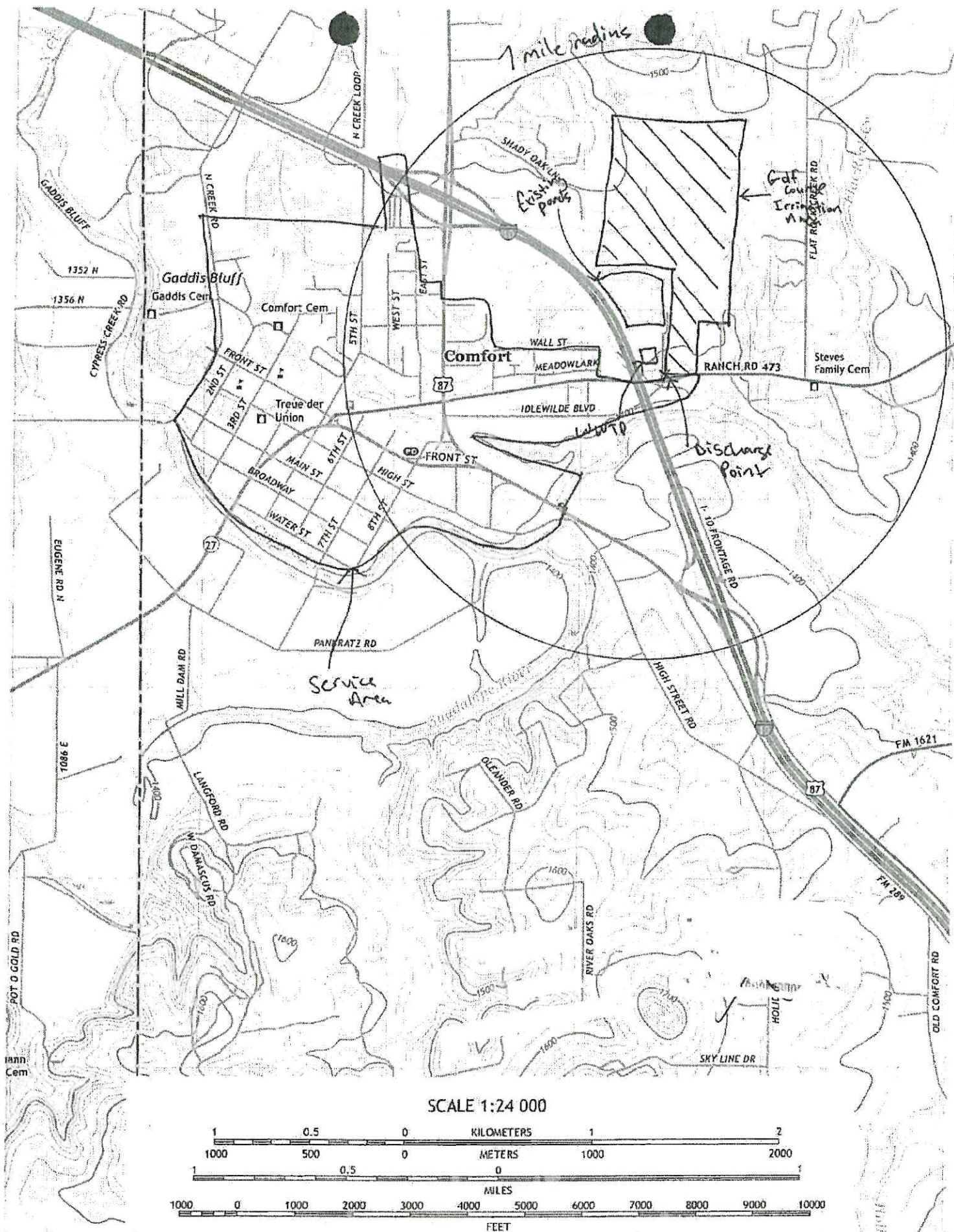
No ☐

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

|             |
|-------------|
| <div></div> |
|-------------|

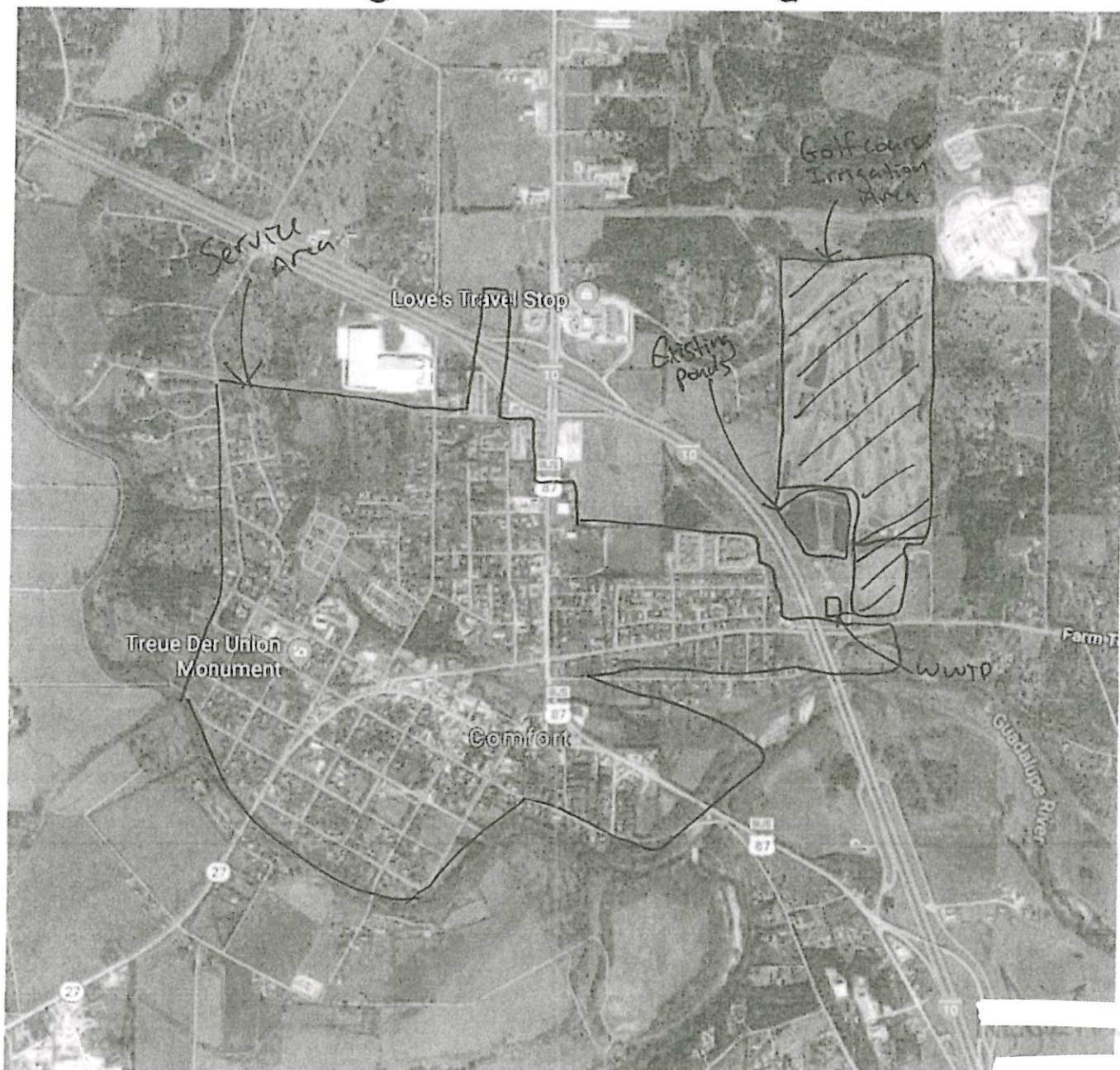
**Attachment A**  
**UGSG Map**





**Attachment B**  
**Site Drawing**





Kendall County WCID No. 1  
WQ0010414001



**Permitting Services, LLC**

6425 Bankside Drive, Suite 2111

Houston, TX 77096

[robin@permittingservices.net](mailto:robin@permittingservices.net)

Tel. 713-458-8612



**Attachment C**  
**Treatment Process Description**  
**Treatment Units**

Kendall County Water Control and Improvement District No. 1

WQ0010414001

Treatment Process Description

Existing Phase

Untreated wastewater is pumped to a bar screen and grit chamber followed by an activated sludge reactor designed to achieve biological nutrient removal with two anaerobic selectors, an anoxic chamber and an aerobic chamber. From the activated sludge reactor, the mixed liquor flows to secondary clarifiers for solids separation. Clarified effluent flows to effluent filters followed by sodium hypochlorite injection and chlorine contact chamber. Effluent from the chlorine contact chamber is then metered and directed to the golf course for irrigation or metered and discharged to Guadalupe River through an unnamed tributary. Sludge from the secondary clarifiers is recycled to the activated sludge reactor. Waste sludge is injected with polymer and dried on sludge drying beds or using the belt filter press. Dried Sludge is hauled off-site for landfill disposal.

Proposed and Final Phase

One excess flow basin will be constructed to divert flow at the Influent lift station during peak flow events, which will be later pumped back into the treatment process. Two aerobic digesters will be constructed to stabilize the sludge before dewatering per TCEQ requirements. Upgrades to the lift station, aerators, media filters, and sludge pump flow meters will be also included in this phase. Both sludge drying beds and belt filter press will continue to be used for sludge dewatering. Dewatered sludge will be hauled off-site for landfill disposal.

Treatment Units

| Treatment Unit Type        | Number of Units | Dimensions (L x W x D)        |
|----------------------------|-----------------|-------------------------------|
| Bar Screens & Grit Channel | 1               | 6'-8" x 36' x 6' (Depth)      |
| Activated Sludge Reactor   | 1               | 96' x 49' x 12' (Depth)       |
| Secondary Clarifiers       | 2               | 40' (Diameter) x 12' (Depth)  |
| Effluent Filters           | 4               | 8' (Diameter) x 12' (Depth)   |
| Chlorine Contact Chamber   | 1               | 46' x 18' x 5'-9" (Depth)     |
| Sludge Drying Beds         | 2               | 24' x 60' x 1'-6" (Depth)     |
| Excess Flow Basin          | 1               | 109' x 35' x 22' (Depth)      |
| Aerobic Digester           | 2               | 50'-3" x 18'-6" x 21' (Depth) |
| Belt Filter Press          | 1               | N/A                           |

**Attachment D**  
**Core Data Form**





# TCEQ Core Data Form

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

## SECTION I: General Information

|   |   |   |
|---|---|---|
| <b>1. Reason for Submission</b> (If other is checked please describe in space provided.)  |   |   |
| <input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.) |   |   |
| <input checked="" type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)                                |   | <input type="checkbox"/> Other                          |
| <b>2. Customer Reference Number</b> (if issued)   | <a href="#">Follow this link to search for CN or RN numbers in Central Registry**</a> | <b>3. Regulated Entity Reference Number</b> (if issued) |
| CN 601180854  |   | RN 102837028  |

## 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          |  |
| <i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>                    |  |  |  |
| <b>6. Customer Legal Name</b> (If an individual, print last name first: eg: Doe, John)   |  | <i>If new Customer, enter previous Customer below:</i>                 |  |
| Kendall County Water Control and Improvement District 1  |  |  |  |
| <b>7. TX SOS/CPA Filing Number</b>   | <b>8. TX State Tax ID</b> (11 digits)        | <b>9. Federal Tax ID</b> (9 digits)                                    | <b>10. DUNS Number</b> (if applicable)   |
|  |  |  |  |
| <b>11. Type of Customer:</b>   | <input type="checkbox"/> Corporation         | <input type="checkbox"/> Individual                                    | Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited |
| Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input checked="" type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other | <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Other:  |  |
| <b>12. Number of Employees</b>   |  | <b>13. Independently Owned and Operated?</b>                           |  |
| <input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher                                 |  | <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:  |  |  |  |
| <input type="checkbox"/> Occupational License <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant  |  |  |  |
| <b>15. Mailing Address:</b>  |  |  |  |
|  | PO Box 745                                   |  |  |
|  | City   | Comfort  | State TX ZIP 78013 ZIP + 4 0745  |
| <b>16. Country Mailing Information</b> (if outside USA)  |  | <b>17. E-Mail Address</b> (if applicable)                              |  |
|  |  | kmkewcid@hctc.net  |  |
| <b>18. Telephone Number</b>  | <b>19. Extension or Code</b>                 | <b>20. Fax Number</b> (if applicable)                                  |  |
| ( 830 ) 995-2227   |  | ( ) -  |  |

## 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.)<br><input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input checked="" type="checkbox"/> Update to Regulated Entity Information |                              |         |       |    |     |       |         |
| <i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>  |                              |         |       |    |     |       |         |
| <b>22. Regulated Entity Name</b> (Enter name of the site where the regulated action is taking place.)<br><br>Kendall County WCID 1 Wastewater Treatment Facility   |                              |         |       |    |     |       |         |
| <b>23. Street Address of the Regulated Entity:</b><br><br>(No PO Boxes)  | 36B Ranch-to-Market Road 473 |         |       |    |     |       |         |
|  | City                         | Comfort | State | TX | ZIP | 78013 | ZIP + 4 |
| <b>24. County</b>  | Kendall                      |         |       |    |     |       |         |

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

|  |         |   |                              |  |                                      |  |                         |  |
|--|---------|---|------------------------------|--|--------------------------------------|--|-------------------------|--|
| <b>25. Description to Physical Location:</b>   |         |   |                              |  |                                      |  |                         |  |
| <b>26. Nearest City</b>  |         |   |                              |  | <b>State</b>                         |  | <b>Nearest ZIP Code</b> |  |
| Comfort  |         |   |                              |  | TX                                   |  | 78013                   |  |
| <i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i> |         |   |                              |  |                                      |  |                         |  |
| <b>27. Latitude (N) In Decimal:</b>  |         | 39.97490N                                   |                              |  | <b>28. Longitude (W) In Decimal:</b> |  | -98.89068W              |  |
| Degrees  | Minutes | Seconds                                     | Degrees                      | Minutes  | Seconds                              |  |                         |  |
| <b>29. Primary SIC Code</b><br>(4 digits)  |         | <b>30. Secondary SIC Code</b><br>(4 digits) |                              | <b>31. Primary NAICS Code</b><br>(5 or 6 digits) |                                      | <b>32. Secondary NAICS Code</b><br>(5 or 6 digits) |                         |  |
| 4952   |         |   |                              | 221320   |                                      |  |                         |  |
| <b>33. What is the Primary Business of this entity?</b> (Do not repeat the SIC or NAICS description.)<br><br>Wastewater Treatment  |         |   |                              |  |                                      |  |                         |  |
| <b>34. Mailing Address:</b>  |         | PO Box 745                                  |                              |  |                                      |  |                         |  |
| City   | Comfort | State                                       | TX                           | ZIP  | 78013                                | ZIP + 4  |                         |  |
| <b>35. E-Mail Address:</b>   |         | kmkcwcid@hctc.com                           |                              |  |                                      |  |                         |  |
| <b>36. Telephone Number</b>  |         |   | <b>37. Extension or Code</b> |  |                                      | <b>38. Fax Number (if applicable)</b>              |                         |  |
| ( 830 ) 995-2227   |         |   |                              |  |                                      | (    )    -  |                         |  |

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

|                                     |                                    |  |  |   |
|-------------------------------------|------------------------------------|--|--|---|
| <input type="checkbox"/> Dam Safety | <input type="checkbox"/> Districts | <input type="checkbox"/> Edwards Aquifer | <input type="checkbox"/> Emissions Inventory Air | <input type="checkbox"/> Industrial Hazardous Waste |
|-------------------------------------|------------------------------------|--|--|---|

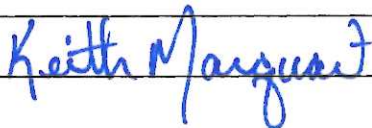
|  |  |   |   |                                   |
|--|--|---|---|-----------------------------------|
| <input type="checkbox"/> Municipal Solid Waste | <input type="checkbox"/> New Source Review Air | <input type="checkbox"/> OSSF                   | <input type="checkbox"/> Petroleum Storage Tank | <input type="checkbox"/> PWS      |
| <input type="checkbox"/> Sludge                | <input type="checkbox"/> Storm Water           | <input type="checkbox"/> Title V Air            | <input type="checkbox"/> Tires                  | <input type="checkbox"/> Used Oil |
| <input type="checkbox"/> Voluntary Cleanup     | <input checked="" type="checkbox"/> Wastewater | <input type="checkbox"/> Wastewater Agriculture | <input type="checkbox"/> Water Rights           | <input type="checkbox"/> Other:   |
|  | WQ0010414001                                   |   |   |                                   |

## **SECTION IV: Preparer Information**

|                      |               |                |                              |
|----------------------|---------------|----------------|------------------------------|
| 40. Name:            | Robin Butcko  | 41. Title:     | Senior Wastewater Manager    |
| 42. Telephone Number | 43. Ext./Code | 44. Fax Number | 45. E-Mail Address           |
| ( 713 ) 458-8612     |               | ( ) -          | robin@permittingservices.net |

## **SECTION V: Authorized Signature**

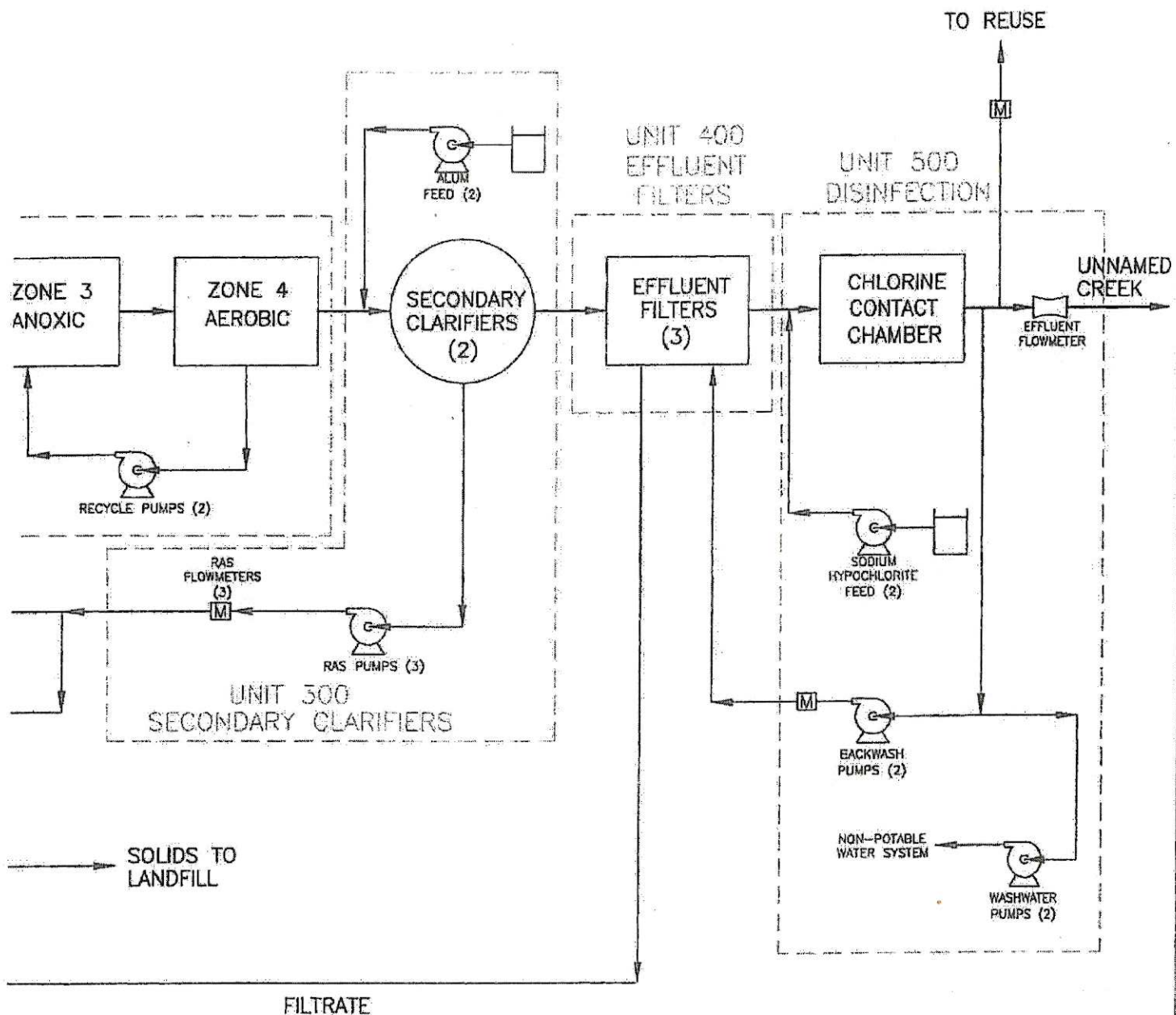
46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified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

|                  |  |            |                   |
|------------------|--|------------|-------------------|
| Company:         | Kendall County WCID #1   | Job Title: | General Manager   |
| Name (In Print): | Keith Marquart   | Phone:     | ( 830 ) 995- 2227 |
| Signature:       |  | Date:      | 05/06/2024        |



# **Attachment E**

## **Flow Diagram**



**HDR**

HDR Engineering, Inc.

## TREATMENT PLANT SCHEMATIC

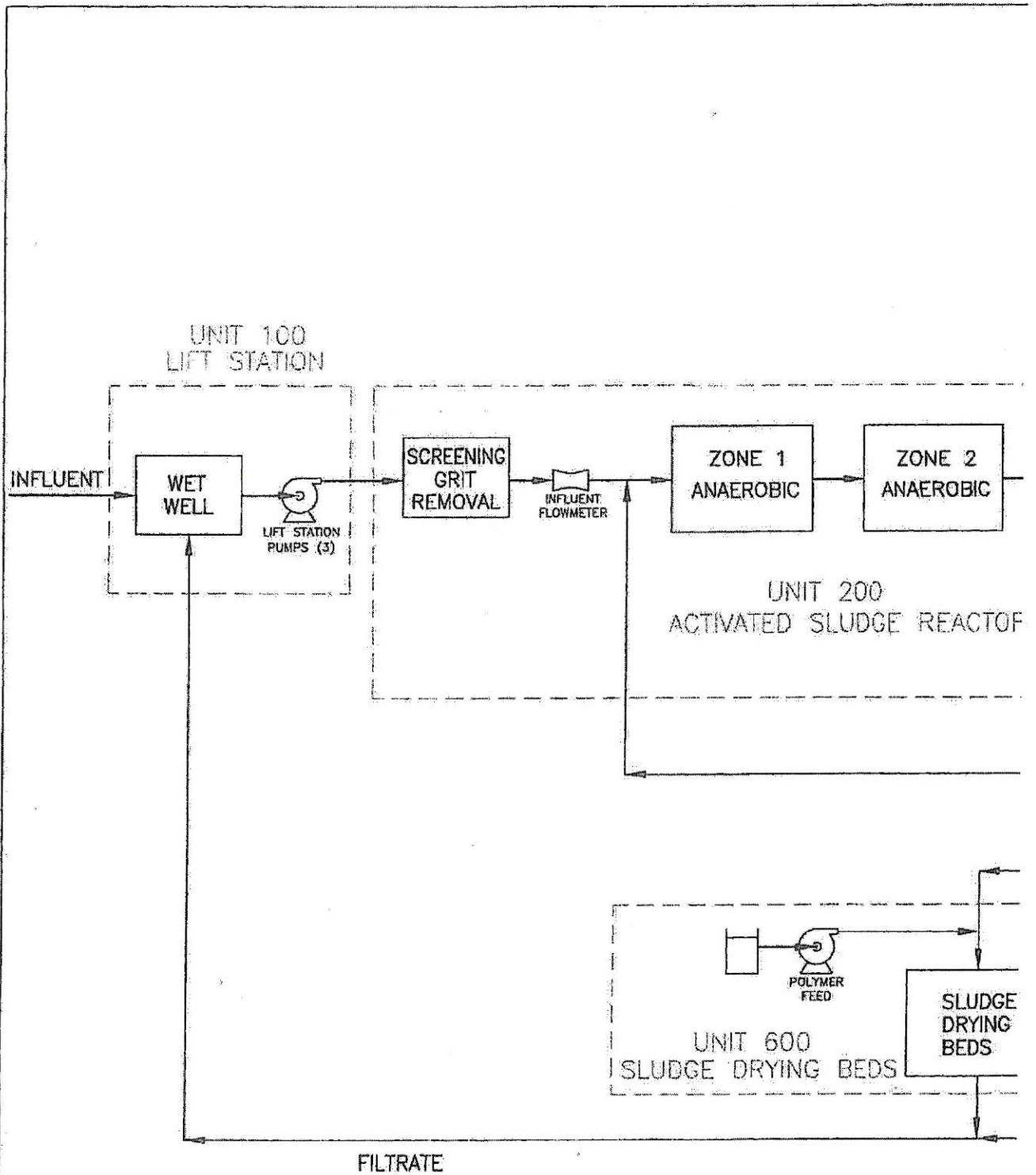
COMFORT WASTEWATER TREATMENT PLANT O & M MANUAL

DATE

FIGURE

1-2

C:\WINDIV\4-003-210\_COMFORT\_O & MIDWINGS00C-02.DWG, 4/14/2005 1:30:36 PM, dburger





**Attachment F**  
**Copy of Check**

# **Attachment G**

## **Pollutant Analysis**

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

Is the facility in operation?

Yes ☒

No ☐

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

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

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

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

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



| Pollutant                              | Average Conc. | Max Conc. | No. of Samples | Sample Type | Sample Date/Time |
|--|---------------|-----------|----------------|-------------|------------------|
| Oil & Grease, mg/l                     |               |           |                |             |                  |
| Alkalinity (CaCO <sub>3</sub> )*, mg/l |               |           |                |             |                  |

\*TPDES permits only

†TLAP permits only

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

| Pollutant                             | Average Conc. | Max Conc. | No. of Samples | Sample Type | Sample Date/Time |
|---------------------------------------|---------------|-----------|----------------|-------------|------------------|
| Total Suspended Solids, mg/l          |               |           |                |             |                  |
| 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 60)

Facility Operator Name: Eric Ingram

Facility Operator's License Classification and Level: Wastewater Class C

Facility Operator's License Number: WW0010517

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

### A. Sludge disposal method

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

- ☒ Permitted landfill
- ☐ Permitted or Registered land application site for beneficial use

## Francesca Findlay

---

**From:** Robin Butcko <robin@permittingservices.net>  
**Sent:** Monday, June 3, 2024 11:50 AM  
**To:** Francesca Findlay  
**Cc:** kmkcwcid@htc.net  
**Subject:** Re: WQ0010414001 Kendall County Water Control and Improvement District No. 1.  
**Attachments:** Kendal County WCID 1 Municipal Discharge Renewal Spanish NORI.docx

**Importance:** High

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

Good morning Francesca,

I hope you are doing well. I have read the NORI and do not see any errors or omissions.




Please see the attached for the Spanish NORI.

If there is anything else you need please let me know.

Thank you,  
Robin

**Robin  
Butcko**

**President & CEO**  
6425 Bankside Drive  
Suite 2111  
Houston, TX 77096

 713-458-8612  
 [robin@permittingservices.net](mailto:robin@permittingservices.net)  
 [www.permittingservices.net](http://www.permittingservices.net)

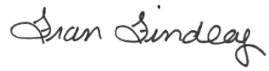
---

**From:** Francesca Findlay <Francesca.Findlay@tceq.texas.gov>  
**Sent:** Thursday, May 30, 2024 6:11 PM  
**To:** Robin Butcko <robin@permittingservices.net>  
**Cc:** kmkcwcid@htc.net <kmkcwcid@htc.net>  
**Subject:** FW: WQ0010414001 Kendall County Water Control and Improvement District No. 1.

Dear Ms. Butcko:

The attached Notice of Deficiency letter sent on May 30, 2024, requesting additional information needed to declare the application administratively complete. Please send the complete response to my attention June 14, 2024.

Thank you,



Francesca Findlay  
License & Permit Specialist  
ARP Team | Water Quality Division  
512-239-2441  
Texas Commission on Environmental Quality



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