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, el Aviso de Recepción de Solicitud e Intención de Obtener un Permiso)
   - Inglés
   - Idioma alternativo (español)
3. Solicitud original

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

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

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

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

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

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS
Enter 'INDUSTRIAL' or 'DOMESTIC' here WASTEWATER/STORMWATER
The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal enforceable representation of the permit application.

City of Josephine (CN600670178) operates Waste Water Treatment Facility #2 (RN109412700), a Wastewater Treatment Facility. The facility is located at 3507 County Road 2668, in Royse City, HUNT County, Texas 75189. This is a permit renewal to discharge up to 500,000 gallons per day of treated domestic wastewater. This permit will not authorize a discharge of pollutants into water in the State.

Discharges from the facility are expected to contain *Arsenic, Cadmium, Chromium, Copper, Lead, Mercury, Molybdenum, Nickel, PCBs, Selenium, and Zinc*. Processed wastewater is treated by The City of Josephine WWTP #2 will be a sequence batch reactor (SBR) plant. Treatment units in the **Interim I Phase** consist of two SBR basins, two anaerobic chambers, two surge anoxic mixers and a chlorine contact chamber. Treatment units in the **Interim II Phase** will include a bar screen, a grit chamber, two SBR basins, two anaerobic chambers, two surge anoxic mixers, a sludge storage tank, a tertiary filter, and a UV disinfection system. Treatment

units in the **Final Phase** will include a bar screen, a grit chamber, four SBR basins, four anaerobic chambers, four surge anoxic mixers, sludge storage tank, two tertiary filters, and two UV disinfection systems. The treated effluent will be discharged to Brushy Creek; thence to West Caddo Creek; thence to Lake Tawakoni in Segment No. 0507 of the Sabine River Basin.

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

AGUAS RESIDUALES Introduzca 'INDUSTRIALES' o 'DOMÉSTICAS' aquí **/AGUAS PLUVIALES**

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

La Ciudad de Josephine (CN600670178) opera la Planta de Tratamiento de Aguas Residuales #2 (RN109412700), una instalación de tratamiento de aguas residuales. La planta está ubicada en 3507 County Road 2668, en Royse City, condado de HUNT, Texas 75189. Esta es una renovación de permiso para descargar hasta 500,000 galones por día de aguas residuales domésticas tratadas. Este permiso no autoriza la descarga de contaminantes en cuerpos de agua del Estado.

Se espera que las descargas de la instalación contengan Arsénico, Cadmio, Cromo, Cobre, Plomo, Mercurio, Molibdeno, Níquel, Bifenilos Policlorados (PCBs), Selenio y Zinc. Las aguas residuales procesadas serán tratadas por la Planta de Tratamiento de Aguas Residuales #2 de la Ciudad de Josephine, que será una planta de reactor por lotes secuenciales (SBR). Las unidades de tratamiento en la Fase Interina I consisten en dos tanques SBR, dos cámaras anaeróbicas, dos mezcladores anóxicos de retención y una cámara de contacto con cloro. Las unidades de tratamiento en la Fase Interina II incluirán una rejilla de barras, una cámara de arena, dos tanques SBR, dos cámaras anaeróbicas, dos mezcladores anóxicos de retención, un tanque de almacenamiento de lodos, un filtro terciario y un sistema de desinfección por luz ultravioleta (UV). Las unidades de tratamiento en la Fase Final incluirán una rejilla de barras, una cámara de arena, cuatro tanques SBR, cuatro cámaras anaeróbicas, cuatro mezcladores anóxicos de retención, un tanque de almacenamiento de lodos, dos filtros terciarios y dos sistemas de desinfección UV. El efluente tratado será descargado al arroyo Brushy Creek; luego al arroyo West Caddo Creek; y posteriormente al Lago Tawakoni en el Segmento No. 0507 de la Cuenca del Río Sabine.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

PERMIT NO. WQ0010887002

APPLICATION. City of Josephine, P.O. Box 99, Josephine, Texas 75164, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0010887002 (EPA I.D. No. TX0137332) to authorize the discharge of treated wastewater at a volume not to exceed an annual average flow of 1,500,000 gallons per day. The domestic wastewater treatment facility is located at 3507 County Road 2668, in the city of Royse, in Hunt County, Texas 75189. The discharge route is from the plant site to Brushy Creek; thence to West Caddo Creek; thence to Lake Tawakoni. TCEQ received this application on October 29, 2025. The permit application will be available for viewing and copying at Josephine City Hall, first floor, main desk, 201 South Main Street, Josephine, Texas prior to the date this notice is published in the newspaper. The application is available for viewing and copying 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=-96.2925,33.048055&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. 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. Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from City of Josephine at the address stated above or by calling Mr. Kirk Peters, Assistant City Administrator, at 972-843-8282.

Issuance Date: November 21, 2025

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. WQ0010887002

SOLICITUD. City of Josephine, P.O. Box 99, Josephine, Texas 75164, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQ0010887002 (EPA I.D. No. TX 0137332) 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 1,500,000 galones por día. La planta está ubicada 3507 County Road 2668 en el Condado de Hunt, Texas 75189. La ruta de descarga es del sitio de la planta a es desde el sitio de la planta hasta Brushy Creek; luego hasta West Caddo Creek; luego hasta el Lago Tawakoni. La TCEQ recibió esta solicitud el 29 de octubre de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Ayuntamiento de Josephine, mostrador principal, primer piso, 201 South Main Street, Josephine, Texas antes de la fecha de publicación de este aviso en el periódico. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web: https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications.
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=-96.2925,33.048055&level=18

AVISO DE IDIOMA ALTERNATIVO. El aviso de idioma alternativo en español está disponible en https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications.

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 correos siguientes (1) la lista de correo permanente para recibir los avisos del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado especifico. Si desea que se agrega 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.

INFORMACIÓN DISPONIBLE EN LÍNEA. Para detalles sobre el estado de la solicitud, favor de visitar la Base de Datos Integrada de los Comisionados en www.tceq.texas.gov/goto/cid. Para buscar en la base de datos, utilizar el número de permiso para esta solicitud que aparece en la parte superior de este aviso.

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 City of Josephine a la dirección indicada arriba o llamando a Senor Kirk Peters al 972-843-8282.

Fecha de emisión: 21 de noviembre de 2025

City of Josephine

Wastewater Treatment Facility

Permit Renewal Application

October 2025

TABLE OF CONTENTS

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: City of Josephine, TX.

PERMIT NUMBER (If new, leave blank): WQ00 10887002

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

	Y	N		Y	N
Administrative Report 1.0	☒	☐	Original USGS Map	☒	☐
Administrative Report 1.1	☐	☒	Affected Landowners Map	☐	☒
SPIF	☒	☐	Landowner Disk or Labels	☐	☒
Core Data Form	☒	☐	Buffer Zone Map	☐	☒
Public Involvement Plan Form	☐	☒	Flow Diagram	☒	☐
Technical Report 1.0	☒	☐	Site Drawing	☒	☐
Technical Report 1.1	☐	☒	Original Photographs	☐	☒
Worksheet 2.0	☒	☐	Design Calculations	☐	☒
Worksheet 2.1	☐	☒	Solids Management Plan	☐	☒
Worksheet 3.0	☐	☒	Water Balance	☐	☒
Worksheet 3.1	☐	☒			
Worksheet 3.2	☐	☒			
Worksheet 3.3	☐	☒			
Worksheet 4.0	☐	☒			
Worksheet 5.0	☐	☒			
Worksheet 6.0	☒	☒			
Worksheet 7.0	☐	☒			

For TCEQ Use Only

Segment Number _____County _____
Expiration Date _____Region_____
Permit Number _____

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

Section 1. Application Fees (Instructions Page 26)

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

Flow	New/Major Amendment	Renewal
<0.05 MGD	$350.00 ☐	$315.00 ☐
≥0.05 but <0.10 MGD	$550.00 ☐	$515.00 ☐
≥0.10 but <0.25 MGD	$850.00 ☐	$815.00 ☐
≥0.25 but <0.50 MGD	$1,250.00 ☐	$1,215.00 ☒
≥0.50 but <1.0 MGD	$1,650.00 ☐	$1,615.00 ☐
≥1.0 MGD	$2,050.00 ☐	$2,015.00 ☐

Minor Amendment (for any flow) $150.00 ☐

Payment Information:

Mailed Check/Money Order Number: Click to enter text.

Check/Money Order Amount: Click to enter text.

Name Printed on Check: Click to enter text.

EPAY Voucher Number: 789212

Copy of Payment Voucher enclosed? Yes ☒

Section 2. Type of Application (Instructions Page 26)

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

☒ Publicly-Owned Domestic Wastewater

☐ Privately-Owned Domestic Wastewater

☐ Conventional Wastewater Treatment

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

☒ Active ☐ Inactive

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

☒ TPDES Permit

☐ TLAP

☐ TPDES Permit with TLAP component

☐ Subsurface Area Drip Dispersal System (SADDS)

d. Check the box next to the appropriate application type

☐ New

☐ Major Amendment *with* Renewal

☐ Major Amendment *without* Renewal

☒ Renewal without changes

☐ Minor Amendment *with* Renewal

☐ Minor Amendment *without* Renewal

☐ Minor Modification of permit

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

f. For existing permits:

Permit Number: WQ00 10887002

EPA I.D. (TPDES only): TX 0137332

Expiration Date: 04/30/2026

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

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

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

City of Josephine

(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: 600670178

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

Prefix: Mr. Last Name, First Name: Peters, Kirk

Title: Assistant City Administrator Credential: Click to enter text.

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

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

Click to enter text.

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

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

CN: N/A

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

Prefix: Last Name, First Name:

Credential:

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 "A"**

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Mr. Last Name, First Name: Stirman, Troy

Title: Project Specialist Credential: Click to enter text.

Organization Name: DUNAWAY

Mailing Address: 118 McKinney Street City, State, Zip Code: Farmersville, TX. 75442

Phone No.: 972-784-7777 E-mail Address: tstirman@dunaway.com

Check one or both: ☐ Administrative Contact ☒ Technical Contact

B. Prefix: Mr. Last Name, First Name: Peters, Kirk

Title: Asst City Administrator Credential: Click to enter text.

Organization Name: City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofjosephinetx.com

Check one or both: ☒ Administrative Contact ☐ Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Mr. Last Name, First Name: Dupuis, Jacob

Title: Sr. Discipline Lead/Principal Credential: P.E.

Organization Name: DUNAWAY

Mailing Address: 118 McKinney Street City, State, Zip Code: Farmersville, TX. 75442

Phone No.: 972-784-7777 E-mail Address: jdupuis@dunaway.com

B. Prefix: Mr. Last Name, First Name: Peters, Kirk

Title: Asst. City Administrator Credential: Click to enter text.

Organization Name: City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofjosephinetx.com

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Mr. Last Name, First Name: Peters, Kirk

Title: Asst, City Administrator Credential: Click to enter text.

Organization Name: City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofjosephinetx.com

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

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

Prefix: Mr. Last Name, First Name: Jackson, Garrett

Title: Director of Public Works Credential: Click to enter text.

Organization Name: City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-730-4554 E-mail Address: gjackson@cityofjosephinetx.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: Peters, Kirk

Title: Asst. City Administrator Credential: Click to enter text.

Organization Name: City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofjosephinetx.com

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

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

☐ E-mail Address

☐ Fax

☒ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Mr. Last Name, First Name: Peters, Kirk

Title: Asst. City Administrator Credential: Click to enter text.

Organization Name: City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofjosephinetx.com

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: Josephine City Hall

Location within the building: Main Desk, First Floor

Physical Address of Building: 201 South Main Street

City: Josephine County: Collin & Hunt

Contact (Last Name, First Name): Peters, Kirk

Phone No.: 972-843-8282 Ext.: N/A

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. Plain Language Summary Template

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

Attachment: ATTACHMENT "B"

G. Public Involvement Plan Form

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

Attachment: Click to enter text.

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

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. **RN** 109412700

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

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

City of Josephine WWTP 2

C. Owner of treatment facility: City of Josephine, TX.

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

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

Prefix: N/A Last Name, First Name: N/A

Title: N/A Credential: N/A

Organization Name: OWNER-City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofjosephinetx.com

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

Attachment: Click to enter text.

E. Owner of effluent disposal site:

Prefix: N/A Last Name, First Name: N/A

Title: N/A Credential: N/A

Organization Name: City of Josephine

Mailing Address: P.O. Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofjosephinetx.com

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

Attachment: Click to enter text.

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

Prefix: N/A Last Name, First Name: N/A

Title: N/A Credential: Click to enter text.

Organization Name: Click to enter text.

Mailing Address: Click to enter text. City, State, Zip Code: Click to enter text.

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

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

Attachment: Click to enter text.

Section 10. TPDES Discharge Information (Instructions Page 31)

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

☒ Yes ☐ No

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

Click to enter text.

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

☒ Yes ☐ No

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

Click to enter text.

City nearest the outfall(s): Josephine, Texas

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

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

Attachment: Click to enter text.

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

Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ Yes ☐ No

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

Click to enter text.

B. City nearest the disposal site: Click to enter text.

C. County in which the disposal site is located: Click to enter text.

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

Click to enter text.

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

Section 12. Miscellaneous Information (Instructions Page 32)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

Click to enter text.

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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

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

Account number: Click to enter text.

Amount past due: Click to enter text.

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

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

Enforcement order number: Click to enter text.

Amount past due: Click to enter text.

Section 13. Attachments (Instructions Page 33)

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

☐ Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant.

☒ Original full-size USGS Topographic Map with the following information:

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

☐ Attachment 1 for Individuals as co-applicants

☐ Other Attachments. Please specify: Click to enter text.

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: Click to enter text. WQ0010887002

Applicant: Click to enter text. CITY OF JOSEPHINE

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): Kirk Peters

Signatory title: Asst. City Administrator

Signature: Kirk Peters Date: Oct. 15th 2025

(Use blue ink)

Subscribed and Sworn to before me by the said Kirk Peters

on this 15 day of October, 2025.

My commission expires on the 19 day of September, 2028.

Patti Brooks

Notary Public

PATTI BROOKS
Notary Public, State of Texas
Comm. Expires 09/19/2028
Notary ID 578923-9

[SEAL]

Collin

County, Texas

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

The following information is required for new and amendment applications.

Section 1. Affected Landowner Information (Instructions Page 36)

A. Indicate by a check mark that the landowners map or drawing, with scale, includes the following information, as applicable:

- ☒ The applicant's property boundaries
- ☒ The facility site boundaries within the applicant's property boundaries
- ☒ The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone
- ☐ The property boundaries of all landowners surrounding the applicant's property (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
- ☒ The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream
- ☐ The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge
- ☐ The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides
- ☐ The boundaries of the effluent disposal site (for example, irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property
- ☐ The property boundaries of all landowners surrounding the effluent disposal site
- ☐ The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners surrounding the applicant's property boundaries where the sewage sludge land application site is located
- ☐ The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (for example, sludge surface disposal site or sludge monofill) is located

B. ☐ Indicate by a check mark that a separate list with the landowners' names and mailing addresses cross-referenced to the landowner's map has been provided.

C. Indicate by a check mark in which format the landowners list is submitted:

☐ USB Drive ☐ Four sets of labels

D. Provide the source of the landowners' names and mailing addresses: Click to enter text.

E. As required by *Texas Water Code § 5.115*, is any permanent school fund land affected by this application?

☐ Yes ☒ No

If **yes**, provide the location and foreseeable impacts and effects this application has on the land(s):

Click to enter text.

Section 2. Original Photographs (Instructions Page 38)

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

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

Section 3. Buffer Zone Map (Instructions Page 38)

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

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

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

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

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

☐ Yes ☐ No

DOMESTIC WASTEWATER PERMIT APPLICATION

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

Attachment: **ATTACHMENT "C"**

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST OF COMMON DEFICIENCIES

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

Core Data Form (TCEQ Form No. 10400) ☒ Yes
(Required for all application types. Must be completed in its entirety and signed. Note: Form may be signed by applicant representative.)

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

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

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

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

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

Things to Know:

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

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

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

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

Plain Language Summary ☒ Yes

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

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

Transaction Information

Trace Number: 582EA000690547
Date: 10/21/2025 10:26 AM
Payment Method: CC - Authorization 0000028282
ePay Actor: TROY STIRMAN
Actor Email: tstirman@dunaway.com
IP: 12.19.42.214
TCEQ Amount: $1,215.00
Texas.gov Fee: $27.59
Texas.gov Price: $1,242.59*

* This service is provided by Texas.gov, the official website of Texas. The price of this service includes funds that support the ongoing operations and enhancements of Texas.gov, which is provided by a third party in partnership with the State.

Payment Contact Information

Name: EDDY DANIEL
Company: DUNAWAY
Address: 550 BAILEY AVENUE, FORT WORTH, TX 76107
Phone: 972-784-7777

Cart Items

Click on the voucher number to see the voucher details.

Voucher	Fee Description	AR Number	Amount
789212	WW PERMIT - FACILITY WITH FLOW >= .25 & < .50 MGD - RENEWAL		$1,200.00
789213	30 TAC 305.53B WQ RENEWAL NOTIFICATION FEE		$15.00
		TCEQ Amount:	$1,215.00

ePay Again | Exit ePay

Print this voucher for your records. If you are sending the TCEQ hardcopy documents related to this payment, include a copy of this voucher.

Transaction Information

Voucher Number: 789212
Trace Number: 582EA000690547
Date: 10/21/2025 10:26 AM
Payment Method: CC - Authorization 0000028282
Voucher Amount: $1,200.00
Fee Type: WW PERMIT - FACILITY WITH FLOW >= .25 & < .50 MGD - RENEWAL
ePay Actor: TROY STIRMAN
Actor Email: tstirman@dunaway.com
IP: 12.19.42.214

Payment Contact Information

Name: EDDY DANIEL
Company: DUNAWAY
Address: 550 BAILEY AVENUE, FORT WORTH, TX 76107
Phone: 972-784-7777

Site Information

RN: RN109412700
Site Name: CITY OF JOSEPHINE WWTP 2
Site Address: 3507 COUNTY ROAD 2668, ROYSE CITY, TX 75189 3613
Site Location: 3507 CR 2668 ROYSE CITY TX 75189-3613

Customer Information

CN: CN600670178
Customer Name: CITY OF JOSEPHINE TEXAS
Customer Address: P O BOX 99, JOSEPHINE, TX 75164 9998
State Franchise Tax ID: 17519578672

Other Information

Program Area ID: 0010887002

Close

Print this voucher for your records. If you are sending the TCEQ hardcopy documents related to this payment, include a copy of this voucher.

Transaction Information

Voucher Number:	789213
Trace Number:	582EA000690547
Date:	10/21/2025 10:26 AM
Payment Method:	CC - Authorization 0000028282
Voucher Amount:	$15.00
Fee Type:	30 TAC 305.53B WQ RENEWAL NOTIFICATION FEE
ePay Actor:	TROY STIRMAN
Actor Email:	tstirman@dunaway.com
IP:	12.19.42.214

Payment Contact Information

Name:	EDDY DANIEL
Company:	DUNAWAY
Address:	550 BAILEY AVENUE, FORT WORTH, TX 76107
Phone:	972-784-7777

ATTACHMENT “A”

Core Data Form

TCEQ Use Only

TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission *(If other is checked please describe in space provided.)*

☐ New Permit, Registration or Authorization *(Core Data Form should be submitted with the program application.)*

☒ Renewal *(Core Data Form should be submitted with the renewal form)* ☐ Other

2. Customer Reference Number *(if issued)*	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number *(if issued)*
CN 600670178		RN 109412700

SECTION II: Customer Information

4. General Customer Information	5. Effective Date for Customer Information Updates (mm/dd/yyyy)	04/30/2026

☐ New Customer ☒ Update to Customer Information ☐ Change in Regulated Entity Ownership
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)

The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).

6. Customer Legal Name *(If an individual, print last name first: eg: Doe, John)* *If new Customer, enter previous Customer below:*

City of Josephine

7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number *(if applicable)*
	17519578672		006934263

11. Type of Customer: ☐ Corporation ☐ Individual Partnership: ☐ General ☐ Limited
Government: ☒ City ☐ County ☐ Federal ☐ Local ☐ State ☐ Other ☐ Sole Proprietorship ☐ Other:

12. Number of Employees
☐ 0-20 ☒ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher

13. Independently Owned and Operated?
☒ Yes ☐ No

14. Customer Role (Proposed or Actual) – *as it relates to the Regulated Entity listed on this form. Please check one of the following*

☐ Owner ☐ Operator ☒ Owner & Operator ☐ Other:
☐ Occupational Licensee ☐ Responsible Party ☐ VCP/BSA Applicant

15. Mailing Address:	P.O. BOX 99							
	City	Josephine	State	TX	ZIP	75164	ZIP + 4	9998

16. Country Mailing Information *(if outside USA)*	17. E-Mail Address *(if applicable)*
	KPeters@cityofjosephinetx.com

18. Telephone Number	19. Extension or Code	20. Fax Number *(if applicable)*
(972) 843-8282		( ) -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information *(If 'New Regulated Entity" is selected, a new permit application is also required.)*

☐ New Regulated Entity ☐ Update to Regulated Entity Name ☒ Update to Regulated Entity Information

The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).

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

CITY OF JOSEPHINE WWTP 2

23. Street Address of the Regulated Entity: ***(No PO Boxes)***	3507 County Road 2668							
	City	Royse City	**State**	TX	**ZIP**	75189	**ZIP + 4**	3613
24. County	HUNT							

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

25. Description to Physical Location:					
26. Nearest City			**State**		**Nearest ZIP Code**

Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).

27. Latitude (N) In Decimal:			**28. Longitude (W) In Decimal:**		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds

29. Primary SIC Code (4 digits)	**30. Secondary SIC Code** (4 digits)	**31. Primary NAICS Code** (5 or 6 digits)	**32. Secondary NAICS Code** (5 or 6 digits)
4952		221320	

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

Municipal Sewer Utility

34. Mailing Address:	**P.O. Box 99**							
	City	**Josephine**	**State**	**TX**	**ZIP**	**75164**	**ZIP + 4**	**9998**
35. E-Mail Address:	**KPeters@cityofjosephinetx.com**							

36. Telephone Number	**37. Extension or Code**	**38. Fax Number** *(if applicable)*
(972) 843-8282		( ) -

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.

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☐ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
☐ Voluntary Cleanup	☒ Wastewater	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:
	WQ0010887002			

SECTION IV: Preparer Information

40. Name:	Troy Stirman	**41. Title:**	Project Specialist

42. Telephone Number	**43. Ext./Code**	**44. Fax Number**	**45. E-Mail Address**
(972) 737-6775		( ) -	tstirman@dunaway.com

SECTION V: Authorized Signature

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

Company:	DUNAWAY	**Job Title:**	Project Specialist
Name *(In Print):*	Troy M Stirman	**Phone:**	(972) 737- **6775**
Signature:	TM Stirman	**Date:**	5/30/2025

ATTACHMENT “B”

Plain Language Summary Template

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

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

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

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

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

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS
Enter 'INDUSTRIAL' or 'DOMESTIC' here WASTEWATER/STORMWATER
The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal enforceable representation of the permit application.

City of Josephine (CN600670178) operates Waste Water Treatment Facility #2 (RN109412700), a Wastewater Treatment Facility. The facility is located at 3507 County Road 2668, in Royse City, HUNT County, Texas 75189. This is a permit renewal to discharge up to 500,000 gallons per day of treated domestic wastewater. This permit will not authorize a discharge of pollutants into water in the State.

Discharges from the facility are expected to contain *Arsenic, Cadmium, Chromium, Copper, Lead, Mercury, Molybdenum, Nickel, PCBs, Selenium, and Zinc*. Processed wastewater is treated by The City of Josephine WWTP #2 will be a sequence batch reactor (SBR) plant. Treatment units in the **Interim I Phase** consist of two SBR basins, two anaerobic chambers, two surge anoxic mixers and a chlorine contact chamber. Treatment units in the **Interim II Phase** will include a bar screen, a grit chamber, two SBR basins, two anaerobic chambers, two surge anoxic mixers, a sludge storage tank, a tertiary filter, and a UV disinfection system. Treatment

units in the **Final Phase** will include a bar screen, a grit chamber, four SBR basins, four anaerobic chambers, four surge anoxic mixers, sludge storage tank, two tertiary filters, and two UV disinfection systems. The treated effluent will be discharged to Brushy Creek; thence to West Caddo Creek; thence to Lake Tawakoni in Segment No. 0507 of the Sabine River Basin.

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

AGUAS RESIDUALES Introduzca 'INDUSTRIALES' o 'DOMÉSTICAS' aquí **/AGUAS PLUVIALES**

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

La Ciudad de Josephine (CN600670178) opera la Planta de Tratamiento de Aguas Residuales #2 (RN109412700), una instalación de tratamiento de aguas residuales. La planta está ubicada en 3507 County Road 2668, en Royse City, condado de HUNT, Texas 75189. Esta es una renovación de permiso para descargar hasta 500,000 galones por día de aguas residuales domésticas tratadas. Este permiso no autoriza la descarga de contaminantes en cuerpos de agua del Estado.

Se espera que las descargas de la instalación contengan Arsénico, Cadmio, Cromo, Cobre, Plomo, Mercurio, Molibdeno, Níquel, Bifenilos Policlorados (PCBs), Selenio y Zinc. Las aguas residuales procesadas serán tratadas por la Planta de Tratamiento de Aguas Residuales #2 de la Ciudad de Josephine, que será una planta de reactor por lotes secuenciales (SBR). Las unidades de tratamiento en la Fase Interina I consisten en dos tanques SBR, dos cámaras anaeróbicas, dos mezcladores anóxicos de retención y una cámara de contacto con cloro. Las unidades de tratamiento en la Fase Interina II incluirán una rejilla de barras, una cámara de arena, dos tanques SBR, dos cámaras anaeróbicas, dos mezcladores anóxicos de retención, un tanque de almacenamiento de lodos, un filtro terciario y un sistema de desinfección por luz ultravioleta (UV). Las unidades de tratamiento en la Fase Final incluirán una rejilla de barras, una cámara de arena, cuatro tanques SBR, cuatro cámaras anaeróbicas, cuatro mezcladores anóxicos de retención, un tanque de almacenamiento de lodos, dos filtros terciarios y dos sistemas de desinfección UV. El efluente tratado será descargado al arroyo Brushy Creek; luego al arroyo West Caddo Creek; y posteriormente al Lago Tawakoni en el Segmento No. 0507 de la Cuenca del Río Sabine.

ATTACHMENT “C”

Supplemental Permit Information Form

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____Renewal ____Major Amendment ____Minor Amendment ____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

_____ Texas Historical Commission _____ U.S. Fish and Wildlife

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

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

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

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

The following applies to all applications:

1. Permittee: City of Josephine, TX.

   Permit No. WQ00 10887002 EPA ID No. TX 0137332

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

   3507 CR 2668, Royse City, TX 75189 (HUNT County)

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

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

First and Last Name: Peters, Kirk

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

Title: Assistant City Administrator

Mailing Address: PO Box 99

City, State, Zip Code: Josephine. TX. 75164

Phone No.: 972-843-8282 Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: kpeters@cityofjosephinetx.com

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

Click here to enter text.

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

Is authorized to discharge into Brushy Creek; thence to West Caddo Creek; thence to Lake Tawakoni in Segment No. 0507 of the Sabine River Basin only according to effluent limitations, monitoring requirements, and other conditions set forth in their TCEQ permit and issued by same.

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

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

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

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

☐ Disturbance of vegetation or wetlands

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

No activity tied to this permit renewal will be conducted.

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

The existing facility encompasses 7.94 acres. No future disturbance or impact to either vegetation or land use is expected in the future.

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

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

Click here to enter text.

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

Click here to enter text.

USGS
science for a changing world

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

The National Map
US Topo

JOSEPHINE QUADRANGLE
TEXAS
7.5-MINUTE SERIES

CITY OF JOSEPHINE SERVICE AREA AS DEFINED BY SEWER CCN 20721

150' BUFFER ZONE

TREATMENT FACILITY

CITY OF JOSEPHINE WASTEWATER TREATMENT PLANT PROPERTY BOUNDARY

3 MILE RADIUS FROM POINT OF DISCHARGE

1 MILE RADIUS FROM POINT OF DISCHARGE

BURIED DISCHARGE PIPE ROUTE

OUTFALL 33.0433 -96.2736

DISCHARGE ROUTE

1 MILE DWNSTREAM OF OUTFALL

3 MILES DOWNSTREAM OF OUTFALL

Josephine
Nevada
Caddo Mills
ROYSE CITY
Cooks Lake
Prairie Grove Cem
McMinn Cem
Josephine Cem
Needmore Cem
LONESOME DOVE RANCH
COLLIN CO
HUNT CO

Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Projection and 1 000-meter grid: Universal Transverse Mercator, Zone 14S
10 000-foot ticks: Texas Coordinate System of 1983 (north central zone)

This map is not a legal document. Boundaries may be generalized for this map scale. Private lands within government reservations may not be shown. Obtain permission before entering private lands.

Imagery.....NAIP, July 2014
Roads..... U.S. Census Bureau, 2014 - 2015
Names.....GNIS, 2015
Hydrography.....National Hydrography Dataset, 2014
Contours.....National Elevation Dataset, 2005
Boundaries.....Multiple sources; see metadata file 1972 - 2015

Wetlands.....FWS National Wetlands Inventory 1977 - 2014

UTM GRID AND 2016 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

U.S. National Grid
100,000-m Square ID
QB
Grid Zone Designation
14S

SCALE 1:24 000

1 0.5 0 KILOMETERS 1 2
1000 500 0 METERS 1000 2000
1 0.5 0 1
MILES
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000
FEET

CONTOUR INTERVAL 10 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard, 2011.
A metadata file associated with this product is draft version 0.6.19

TEXAS
QUADRANGLE LOCATION

1	2	3
4		5
6	7	8

ADJOINING QUADRANGLES
1 Culleoka
2 Farmersville
3 Greenville NW
4 Lavon
5 Greenville SW
6 Rockwall
7 Royse City
8 Quinlan

ROAD CLASSIFICATION
Expressway
Secondary Hwy
Ramp
Local Connector
Local Road
4WD
Interstate Route
US Route
State Route

NSN. 7643016396734
NGA REF NO. USGSX24K22821

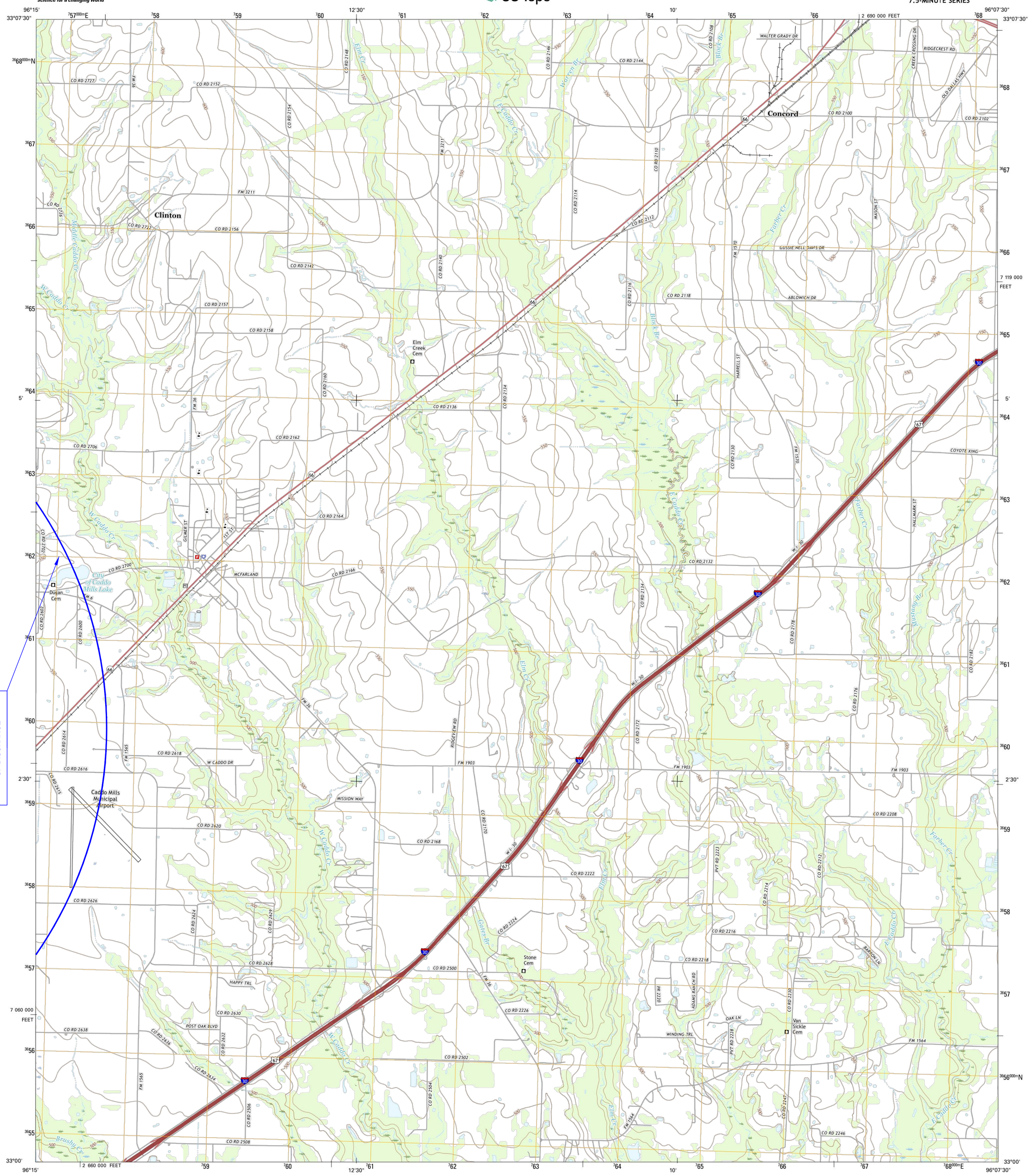
JOSEPHINE, TX
2016

USGS
science for a changing world

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

The National Map
US Topo

GREENVILLE SW QUADRANGLE
TEXAS-HUNT CO.
7.5-MINUTE SERIES



Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Projection and 1 000-meter grid: Universal Transverse Mercator, Zone 14S
10 000-foot ticks: Texas Coordinate System of 1983 (north central zone)

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Names.....GNIS, 2015
Hydrography.....National Hydrography Dataset, 2014
Contours.....National Elevation Dataset, 2004
Boundaries.....Multiple sources; see metadata file 1972 - 2015

Wetlands.....FWS National Wetlands Inventory 1977 - 2014

UTM GRID AND 2016 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

U.S. National Grid
100,000-m Square ID
QB
Grid Zone Designation
14S

SCALE 1:24 000

1 0.5 0 KILOMETERS 1 2
1000 500 0 METERS 1000 2000
1 0.5 0 1
MILES
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000
FEET

CONTOUR INTERVAL 10 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard, 2011.
A metadata file associated with this product is draft version 0.6.19

QUADRANGLE LOCATION

1	2	3
4		5
6	7	8

1 Farmersville
2 Greenville NW
3 Greenville NE
4 Josephine
5 Greenville SE
6 Royse City
7 Quinlan
8 West Tawakoni

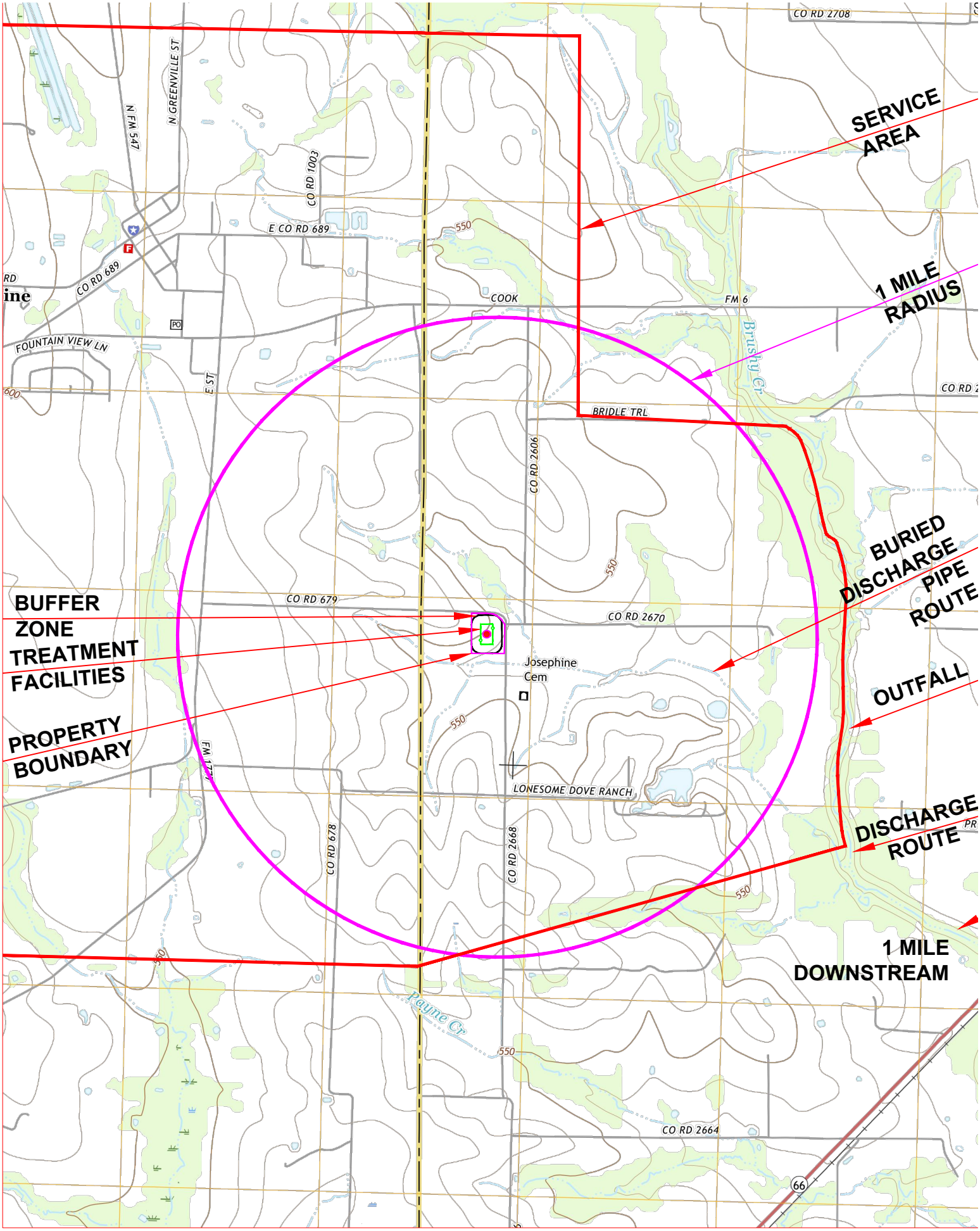
ADJOINING QUADRANGLES

ROAD CLASSIFICATION

Expressway
Secondary Hwy
Ramp
Local Connector
Local Road
4WD
Interstate Route
US Route
State Route

GREENVILLE SW, TX
2016

NSN, 7643016396380
NGA REF NO. USGSX24K18470


SERVICE AREA
1 MILE RADIUS
BUFFER ZONE
TREATMENT FACILITIES
PROPERTY BOUNDARY
BURIED DISCHARGE PIPE ROUTE
OUTFALL
DISCHARGE ROUTE
1 MILE DOWNSTREAM
CO RD 2708
N GREENVILLE ST
N FM 547
CO RD 1003
E CO RD 689
CO RD 689
FOUNTAIN VIEW LN
E ST
COOK
FM 6
Brushy Cr
BRIDLE TRL
CO RD 2606
CO RD 679
CO RD 2670
Josephine Cem
LONESOME DOVE RANCH
FM 1771
CO RD 678
CO RD 2668
Rayne Cr
CO RD 2664
550
600
66

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): .50

2-Hr Peak Flow (MGD): .62

Estimated construction start date: 4/2018

Estimated waste disposal start date: 4/2019

B. Interim II Phase

Design Flow (MGD): .50

2-Hr Peak Flow (MGD): .62

Estimated construction start date: 3/2020

Estimated waste disposal start date: 6/2021

C. Final Phase

Design Flow (MGD): 1.50

2-Hr Peak Flow (MGD): 6.0

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

D. Current Operating Phase

Provide the startup date of the facility: 4/2019

Section 2. Treatment Process (Instructions Page 43)

A. Current Operating Phase

Provide a detailed description of the treatment process. **Include the type of treatment plant, mode of operation, and all treatment units.** Start with the plant's head works and

finish with the point of discharge. Include all sludge processing and drying units. **If more than one phase exists or is proposed, a description of *each phase* must be provided**.

Existing/Interim Stage II – Extended aeration, see Flow Diagram attachment; Interim Phase II – Sequence Batch Reactor, see Flow Diagram.

B. Treatment Units

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

Table 1.0(1) - Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Bar Screen	1	3' W
Aeriation Basins	2	52' x 12' x 12.16', ~ 56,760 gallons
Digester	1	52' x 12' x 12.16', ~ 56,760 gallons
Clarifier	1	52' x 12' x 10', ~ 46,680 gallons
Cl2 Contact Basin	1	11.75' x 19' x 10.16', ~ 16,970 gallons
Blowers	3	500 SCFM each

C. Process Flow Diagram

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

Attachment: **ATTACHMENT "D"**

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

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

- Latitude: 33.042501
- Longitude: -96.273799

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

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

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

- The boundaries of the treatment facility;
- The boundaries of the area served by the treatment facility;
- If land disposal of effluent, the boundaries of the disposal site and all storage/holding ponds; and

- If sludge disposal is authorized in the permit, the boundaries of the land application or disposal site.

Attachment: **ATTACHMENT "E"**

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

Service area as defined by City of Josephine CCN 20721

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

Collection System Information

Collection System Name	Owner Name	Owner Type	Population Served
CITY OF JOSEPHINE WWTP 2	City of Josephine	Publicly Owned	7,000
		Choose an item.	
		Choose an item.	
		Choose an item.	

Section 4. Unbuilt Phases (Instructions Page 45)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

The size of the City population has not justified the expense and resources necessary to expand the current plant operation level. We know that the population continues to exceed annual expectations and the ability to increase plant operations in the future is a priority for the City of Josephine.

Section 5. Closure Plans (Instructions Page 45)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

N/A

Section 6. Permit Specific Requirements (Instructions Page 45)

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

A. Summary transmittal

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

☒ Yes ☐ No

If yes, provide the date(s) of approval for each phase: May 10, 2019

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.

Click to enter text.

C. Other actions required by the current permit

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

☐ Yes ☒ No

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

Click to enter text.

D. Grit and grease treatment

1. Acceptance of grit and grease waste

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

☐ Yes ☒ No

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

2. Grit and grease processing

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

N/A

3. Grit disposal

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

☐ Yes ☒ No

If No, contact the TCEQ Municipal Solid Waste team at 512-239-2335. Note: A registration or permit is required for grit disposal. Grit shall not be combined with treatment plant sludge. See the instruction booklet for additional information on grit disposal requirements and restrictions.

Describe the method of grit disposal.

Click to enter text.

4. Grease and decanted liquid disposal

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

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

Click to enter text.

E. Stormwater management

1. Applicability

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2. MSGP coverage

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

☐ Yes ☒ No

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

TXR05 Click to enter text. or TXRNE Click to enter text.

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

☐ Yes ☒ No

3. *Conditional exclusion*

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

☐ Yes ☒ No

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

Click to enter text.

4. *Existing coverage in individual permit*

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

☐ Yes ☒ No

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

Click to enter text.

5. *Zero stormwater discharge*

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

☐ Yes ☒ No

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

Click to enter text.

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

6. *Request for coverage in individual permit*

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

☐ Yes ☒ No

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

Click to enter text.

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

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

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

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

1. Acceptance of sludge from other WWTPs

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

☐ Yes ☒ No

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

In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an estimate of the BOD_5 concentration of the sludge, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

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

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

If yes to any of the above, provide the date the plant started or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD_5 concentration of the septic waste, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

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

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

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

☐ Yes ☒ No

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

Click to enter text.

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

Is the facility in operation?

☒ Yes ☐ No

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

If yes, provide effluent analysis data for the listed pollutants. ***Wastewater treatment facilities*** complete Table 1.0(2). W***ater treatment facilities*** discharging filter backwash water, complete Table 1.0(3). Provide copies of the laboratory results sheets. **These tables are not applicable for a minor amendment without renewal.** See the instructions for guidance.

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
$CBOD_5$, mg/l	**26**	-	**1**	**GRAB**	**9/4/25 7:30**
Total Suspended Solids, mg/l	**58**	-	**1**	**GRAB**	**9/4/25 7:30**
Ammonia Nitrogen, mg/l	**20.3**	-	**1**	**GRAB**	**9/4/25 7:30**
Nitrate Nitrogen, mg/l	**<0.40**	-	**1**	**GRAB**	**9/4/25 7:30**
Total Kjeldahl Nitrogen, mg/l	**30.6**	-	**1**	**GRAB**	**9/4/25 7:30**
Sulfate, mg/l	**183**	-	**1**	**GRAB**	**9/4/25 7:30**
Chloride, mg/l	**139**	-	**1**	**GRAB**	**9/4/25 7:30**
Total Phosphorus, mg/l	**3.28**	-	**1**	**GRAB**	**9/4/25 7:30**
pH, standard units	**8.2**	-	**1**	**GRAB**	**9/4/25 7:30**
Dissolved Oxygen*, mg/l	**5.4**	-	**1**	**GRAB**	**9/4/25 7:30**
Chlorine Residual, mg/l	**0**	-	**1**	**GRAB**	**9/4/25 7:30**
E.coli (CFU/100ml) freshwater	**57**	-	**1**	**GRAB**	**9/4/25 7:30**
Entercocci (CFU/100ml) saltwater	**-**	-	**1**	**GRAB**	**9/4/25 7:30**
Total Dissolved Solids, mg/l	**718**	-	**1**	**GRAB**	**9/4/25 7:30**
Electrical Conductivity, µmohs/cm, †	**1320**	-	**1**	**GRAB**	**9/4/25 7:30**
Oil & Grease, mg/l	**<7**	-	**1**	**GRAB**	**9/4/25 7:30**
Alkalinity ($CaCO_3$)*, mg/l	**156**	-	**1**	**GRAB**	**9/4/25 7:30**

*TPDES permits only
†TLAP permits only

Table1.0(3) – Pollutant Analysis for Water Treatment Facilities

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Total Suspended Solids, mg/l					
Total Dissolved Solids, mg/l					
pH, standard units					
Fluoride, mg/l					
Aluminum, mg/l					
Alkalinity ($CaCO_3$), mg/l					

Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: Derek Deutsch

Facility Operator's License Classification and Level: C

Facility Operator's License Number: WW0054691

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

A. WWTP's Biosolids Management Facility Type

Check all that apply. See instructions for guidance

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

B. WWTP's Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

☒ Other Treatment Process: U/V Disinfection

C. Biosolids Management

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	Off-site Third-Party Handler or Preparer	Bulk	272.155	Class B: PSRP Aerobic Digestion	Option 11: Biosolids covered at end of each day
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

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

D. Disposal site

Disposal site name: Maloy Landfill

TCEQ permit or registration number: #1195A

County where disposal site is located: HUNT

E. Transportation method

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

Name of the hauler: Republic Services

Hauler registration number: 85652

Sludge is transported as a:

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

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

A. Beneficial use authorization

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

B. Sludge processing authorization

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

Sludge Composting	☐ Yes	☒ No
Marketing and Distribution of sludge	☐ Yes	☒ No
Sludge Surface Disposal or Sludge Monofill	☐ Yes	☒ No
Temporary storage in sludge lagoons	☐ Yes	☒ No

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

☐ Yes ☐ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

A. Location information

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

- Original General Highway (County) Map:

  Attachment: Click to enter text.
- USDA Natural Resources Conservation Service Soil Map:

  Attachment: Click to enter text.
- Federal Emergency Management Map:

  Attachment: Click to enter text.
- Site map:

  Attachment: Click to enter text.

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

☐ Overlap a designated 100-year frequency flood plain

☐ Soils with flooding classification

☐ Overlap an unstable area

☐ Wetlands

☐ Located less than 60 meters from a fault

☐ None of the above

Attachment: Click to enter text.

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

Click to enter text.

B. Temporary storage information

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

Nitrate Nitrogen, mg/kg: Click to enter text.

Total Kjeldahl Nitrogen, mg/kg: Click to enter text.

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

Phosphorus, mg/kg: Click to enter text.

Potassium, mg/kg: Click to enter text.

pH, standard units: Click to enter text.

Ammonia Nitrogen mg/kg: Click to enter text.

Arsenic: Click to enter text.

Cadmium: Click to enter text.

Chromium: Click to enter text.

Copper: Click to enter text.

Lead: Click to enter text.

Mercury: Click to enter text.

Molybdenum: Click to enter text.

Nickel: Click to enter text.

Selenium: Click to enter text.

Zinc: Click to enter text.

Total PCBs: Click to enter text.

Provide the following information:

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

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

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

C. Liner information

Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of $1x10^{-7}$ cm/sec?

☐ Yes ☐ No

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

Click to enter text.

D. Site development plan

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

Click to enter text.

Attach the following documents to the application.

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

  Attachment: Click to enter text.
- Copy of the closure plan

  Attachment: Click to enter text.
- Copy of deed recordation for the site

  Attachment: Click to enter text.
- Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons

  Attachment: Click to enter text.
- Description of the method of controlling infiltration of groundwater and surface water from entering the site

  Attachment: Click to enter text.
- Procedures to prevent the occurrence of nuisance conditions

  Attachment: Click to enter text.

E. Groundwater monitoring

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

☐ Yes ☒ No

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

Attachment: Click to enter text.

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

A. Additional authorizations

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

☐ Yes ☒ No

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

Click to enter text.

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

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

A. RCRA hazardous wastes

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

☐ Yes ☒ No

B. Remediation activity wastewater

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

☐ Yes ☒ No

C. Details about wastes received

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

Attachment: Click to enter text.

Section 14. Laboratory Accreditation (Instructions Page 56)

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

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

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

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

CERTIFICATION:

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

Printed Name: Serissa Beck, EML

Title: General Manager

Signature: _____

Date: 9/12/25

Section 3. Classified Segments (Instructions Page 64)

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

☒ Yes ☐ No

If yes, this Worksheet is complete.

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

Section 4. Description of Immediate Receiving Waters (Instructions Page 65)

Name of the immediate receiving waters: Brushy Creek

A. Receiving water type

Identify the appropriate description of the receiving waters.

☒ Stream

☐ Freshwater Swamp or Marsh

☐ Lake or Pond

Surface area, in acres: Click to enter text.

Average depth of the entire water body, in feet: Click to enter text.

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

☐ Man-made Channel or Ditch

☐ Open Bay

☐ Tidal Stream, Bayou, or Marsh

☐ Other, specify: Click to enter text.

B. Flow characteristics

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

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

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

☐ Perennial - normally flowing

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

☐ USGS flow records

☐ Historical observation by adjacent landowners

☒ Personal observation

☐ Other, specify: Click to enter text.

C. Downstream perennial confluences

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

NONE

D. Downstream characteristics

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

☐ Yes ☒ No

If yes, discuss how.

Click to enter text.

E. Normal dry weather characteristics

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

Stream is non-flowing during dry weather conditions. Small, intermittent pools of water may develop but mostly dry up as Summer progresses.

Date and time of observation: October 15, 2025 – 11 am

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☒ No

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

A. Upstream influences

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

☐ Oil field activities
☐ Upstream discharges
☐ Septic tanks
☒ Urban runoff
☒ Agricultural runoff
☐ Other(s), specify: Click to enter text.

B. Waterbody uses

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

- ☐ Livestock watering
- ☐ Irrigation withdrawal
- ☐ Fishing
- ☐ Domestic water supply
- ☐ Park activities
- ☐ Contact recreation
- ☐ Non-contact recreation
- ☐ Navigation
- ☐ Industrial water supply
- ☒ Other(s), specify: Brushy Creek has barbed-wire fencing on both sides. There are no livestock accessible access points from the west side property owner.

C. Waterbody aesthetics

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

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

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following **is required** for **all publicly owned treatment works**.

Section 1. All POTWs (Instructions Page 89)

A. Industrial users (IUs)

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

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

Categorical IUs:

Number of IUs: 0

Average Daily Flows, in MGD: Click to enter text.

Significant IUs – non-categorical:

Number of IUs: 0

Average Daily Flows, in MGD: Click to enter text.

Other IUs:

Number of IUs: 0

Average Daily Flows, in MGD: Click to enter text.

B. Treatment plant interference

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

☐ Yes ☒ No

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

Click to enter text.

C. Treatment plant pass through

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

☐ Yes ☒ No

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

Click to enter text.

D. Pretreatment program

Does your POTW have an approved pretreatment program?

☐ Yes ☒ No

If yes, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

☐ Yes ☒ No

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

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

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

A. Substantial modifications

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

☐ Yes ☒ No

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

Click to enter text.

B. Non-substantial modifications

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

☐ Yes ☒ No

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

Click to enter text.

C. Effluent parameters above the MAL

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

Table 6.0(1) – Parameters Above the MAL

Pollutant	Concentration	MAL	Units	Date
N/A				

D. Industrial user interruptions

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

☐ Yes ☒ No

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

Click to enter text.

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

A. General information

Company Name: N/A

SIC Code: Click to enter text.

Contact name: Click to enter text.

Address: Click to enter text.

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

Telephone number: Click to enter text.

Email address: Click to enter text.

B. Process information

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

N/A

C. Product and service information

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

N/A

D. Flow rate information

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

Process Wastewater:

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

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

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

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

E. Pretreatment standards

Is the SIU or CIU subject to technically based local limits as defined in the *i*nstructions?

☐ Yes ☐ No

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

☐ Yes ☐ No

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

Category: Subcategories: Click to enter text.

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

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

F. Industrial user interruptions

Has the SIU or CIU caused or contributed to any problems (e.g., interferences, pass through, odors, corrosion, blockages) at your POTW in the past three years?

☐ Yes ☐ No

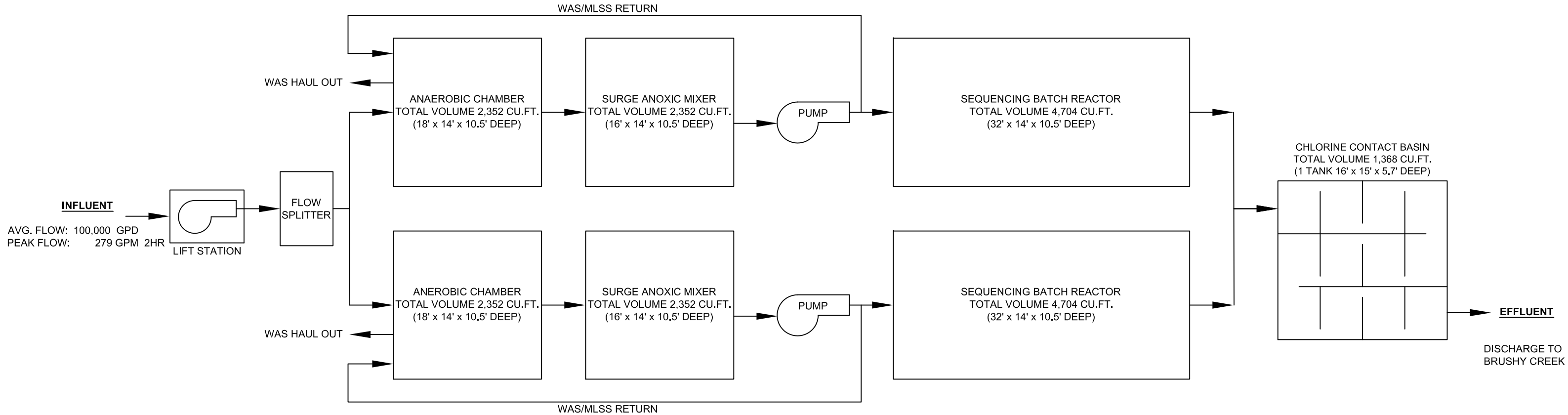
If yes, identify the SIU, describe each episode, including dates, duration, description of problems, and probable pollutants.

N/A

ATTACHMENT “D”

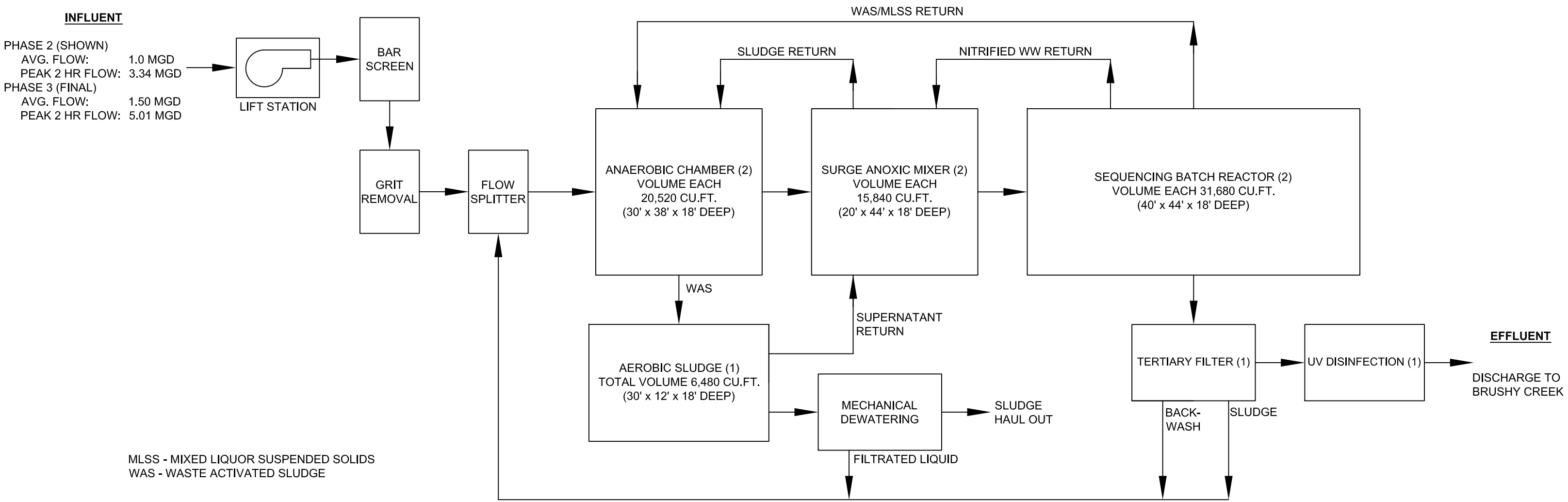
Process Flow Design

FLOW DIAGRAM
FOR THE
CITY OF JOSEPHINE
WASTEWATER TREATMENT PLANT No. 2
PHASE 1



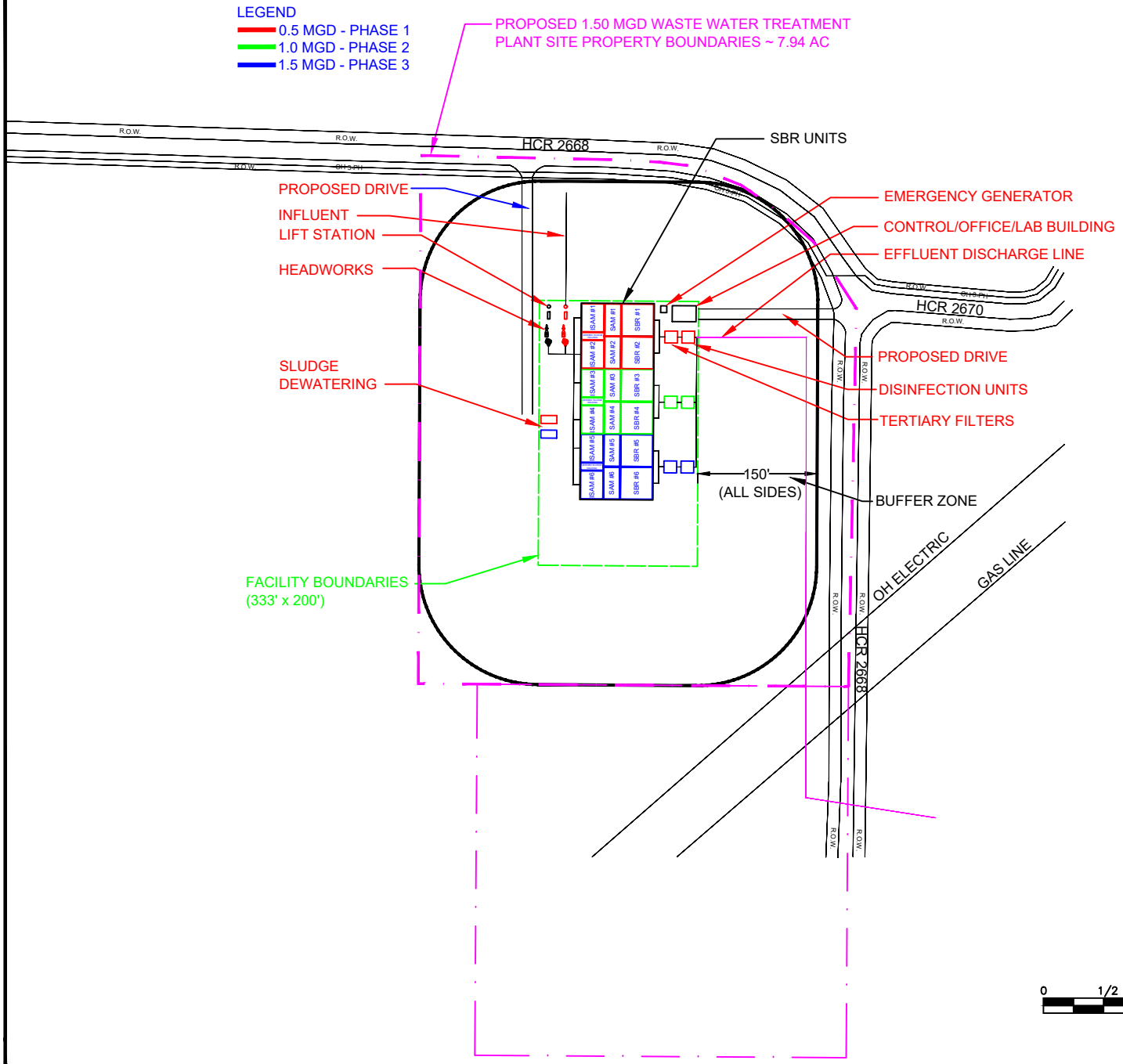
MLSS - MIXED LIQUOR SUSPENDED SOLIDS
WAS - WASTE ACTIVATED SLUDGE

FLOW DIAGRAM
FOR THE
CITY OF JOSEPHINE
WASTEWATER TREATMENT PLANT No. 2
PHASE 2



ATTACHMENT “E”

Site Drawing



DUNAWAY
118 McKinney St. ■ P.O. Box 606 ■ Farmersville, Texas 75442
Tel: 972.784.7777
(TXENG FIRM F-1114)

DESIGNED: E.W.D.
DRAWN: C.M.
DATE: 09/29/2016
REVISION: N/C
FILE: P:\Legacy\DB\Josephine City of\Discharge Permit\WWTP #2\2016\Site Plan

DISCHARGE PERMIT APPLICATION
FOR
CITY OF JSEPHINE
COLLIN & HUNT COUNTIES, TEXAS

SITE PLAN

SHEET 1 OF 1

ATTACHMENT “F”

Testing Analysis Data

ENVIRONMENTAL MONITORING LABORATORY , L.L.C

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

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

ANALYTICAL REPORT 25090545

For:

City of Josephine

108 West Hubbard Rd.
Josephine, Texas 75164

Sample Site: Renewal Analysis

Collected Date: 09/04/25

Lab Number: TX01547

Authorized for release by:
11-SEP-25

Lisa Soward, Data Manager

homeoffice@yourwaterlab.com

ENVIRONMENTAL MONITORING LABORATORY , L.L.C

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

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

ANALYTICAL RESULTS

Analytical Report: 25090545

Lab ID: 25090545-001
Client: City of Josephine
Sample Site: Renewal Analysis

Collected Date: 09/04/25 07:30
Received Date: 09/04/25 16:20
Report Date: 09/11/25

Matrix: Waste Water
Temp at Receipt: 1.7 °C
Sample Collector: STAFF MEM

Analyte	Abbreviation	Method	TNI Cert	Date Analyzed	Result	Units
Ammonia Nitrogen	NH3N	SM 4500-NH3/D	NP	09/09/25 08:52	20.3	mg/L
Carbonaceous BOD	CBOD	SM 5210/B	NP	09/05/25 09:21	26	mg/L
Total Suspended Solids	TSS	SM 2540/D	NP/P	09/08/25 12:13	58	mg/L
pH	SM4500-H	SM4500/H	N	09/04/25 07:30	8.2	SU
Nitrate as N	E300.0	E 300.0	NP/P	09/05/25 08:37	<0.400	mg/L
Dissolved Oxygen	DO	SM 4500-O	N	09/04/25 07:30	5.4	mg/L
Total Phosphorus (as P)	T.PHOS.	SM 4500-P/E	NP	09/08/25 11:12	3.28	mg/L
Nitrogen, Total Kjeldahl	TKN	SM 4500-NH3/D	NP	09/09/25 14:41	30.6	mg/L
Total dissolved solids	SM2540C	SM 2540/C	NP/P	09/08/25 15:16	718.0	mg/L
Sulfate	E300.0	E 300.0	NP/P	09/05/25 08:48	183	mg/L
Chloride	Cl-	SM 4500-Cl-/B	NP	09/11/25 13:03	139	mg/L
Chlorine	SM4500-CL	SM4500-CL	NP	09/04/25 07:30	0	mg/L
n-Hexane Extractable Material (HEM)	O&G	SM 5520/B	NP	09/09/25 11:05	<7.00	mg/L
Alkalinity, Total (CaCO3)	ALK	SM 2320/B	NP	09/11/25 10:38	156	mg/L
Conductivity @ 25C	Cond	SM 2510/B	NP	09/11/25 09:54	1320	umhos/cm
Flow	MGD	Provisional Instantaneous	N	09/04/25 07:30	0.1062	MGD

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

Control #: 25090545

QUALITY ASSURANCE & QUALITY CONTROL

ANALYTE	ABBR./ ALT.NAME	STANDARD METHOD	UNITS	Quality Control S.D.	CV%	REC.1%	REC.2%	MDL/PQL	Q
Nitrate as N	E300.0	E 300.0	mg/L					0.400 / 0.400	
Sulfate	E300.0	E 300.0	mg/L					1.00 / 1.80	
Alkalinity, Total (CaCO3)	ALK	SM 2320/B	mg/L					1.50 / 5.00	
Chloride	Cl-	SM 4500-Cl-/B	mg/L	1.41	0.28	98	98	1.00 / 3.00	
Ammonia Nitrogen	NH3N	SM 4500-NH3/D	mg/L	0.01	1.07	104.5	106.4	0.0300 / 0.100	
Nitrogen, Total Kjeldahl	TKN	SM 4500-NH3/D	mg/L	0.15	1.07	90	92.2	0.0200 / 0.120	
Total Phosphorus (as P)	T.PHOS.	SM 4500-P/E	mg/L	0.09	1.84	100.3	103	.02 / .05	
n-Hexane Extractable Material (HEM)	O&G	SM 5520/B	mg/L	0.07	0.07	100.1	100.3	7.00 / 7.00	
Chemical Oxygen Demand	COD	SM 5220/D	mg/L						
Turbidity	TURB.	SM 2130/B	NTUs						
Total Percent Solids	%d.w	SM 2540/G	%						N

Biochemical Oxygen Demand(BOD)
Carbonaceous Biochemical Oxygen Demand(CBOD)
Method: SM 5210/B

Results	Units	Description
0.12	mg/L	Blank 1 - CBOD
0.09	mg/L	Blank 2 - CBOD
0.1	mg/L	Blank 3 - CBOD
197	mg/L	G/GA Std 1 - CBOD
201	mg/L	G/GA Std 2 - CBOD
199	mg/L	G/GA Std 3 - CBOD
199	mg/L	**G/GA Average - CBOD**
0.69	mg/L	Seed Corr/mL - CBOD
0.72	mg/L	Seed Corr/mL - CBOD
0.72	mg/L	Seed Corr/mL - CBOD
0.71	mg/L	**Seed Corr Average - CBOD**

Dissolved Oxygen
Method: SM 4500-O*/G

Results	Units	Description
8.88	mg/L	Set Up Calibration
9.07	mg/L	Read Off Calibration
20	°C	Set Up Temperature
20	°C	Read Off Temperature
757	mm Hg	Set Up Barometer
762	mm Hg	Read Off Barometer

Fecal Coliform
Method: SM9222 /D MF

Results	Units	Description
	CFU/100ml	Pre Blank
	CFU/100ml	Post Blank

TDS by SM2540/C

Results	Units	Description
0	mg/L	Blank

E. coli By IDEXX Colilert (enumeration)

MPN/100 mL

Total Suspended Solids (TSS, MLSS)
Method: 2540/D

Results	Units	Description
0	mg/L	Blank 1
0	mg/L	Blank 2
0.2	mg/L	Blank 3
2.41	%	Relative % Difference
0	%	Relative % Difference
2.06	%	Relative % Difference
0	%	Relative % Difference
0	%	Relative % Difference
2.68	%	Relative % Difference
2.94	%	Relative % Difference

Conductivity @ 25° C
Method: SM2510/B
Standards ran for each analytical batch.

Results	Units	Description
	umhos/cm	Conductivity Standard
	umhos/cm	Conductivity Standard
	umhos/cm	Conductivity Standard

Report Out Date: 09/11/2025

Lisa Soward
Data Manager

Final 1.000

QUALITY ASSURANCE & QUALITY CONTROL

Standard Method E 300.0

Matrix Waste Water

Batch Number 82778

Sample ID	Parameter	Result	Ref. Value	Spike Conc.	Per. Rec.	Rec. Limits	RPD	RPD Limits	Flags
82778-1-LCS	Nitrate as N	7.99 mg/L		8.00 mg/L	100%	90-110%		0-20%	
82778-1-LCSD	Nitrate as N	8.08 mg/L		8.00 mg/L	101%	90-110%	1%	0-20%	
82778-1-UNS	Nitrate as N	0.120 mg/L			0%	90-110%		0-20%	
25090375-001 S	Nitrate as N	8.51 mg/L	0.120 mg/L	8.00 mg/L	105 %	80-120%		0-20%	
25090375-001 SD	Nitrate as N	8.58 mg/L	0.120 mg/L	8.00 mg/L	106 %	80-120%	1%	0-20%	

Standard Method E 300.0

Matrix Waste Water

Batch Number 82779

Sample ID	Parameter	Result	Ref. Value	Spike Conc.	Per. Rec.	Rec. Limits	RPD	RPD Limits	Flags
82779-1-LCS	Sulfate	14.8 mg/L		15.0 mg/L	99%	90-110%		0-20%	
82779-1-LCSD	Sulfate	14.7 mg/L		15.0 mg/L	98%	90-110%	1%	0-20%	
82779-1-UNS	Sulfate	4.48 mg/L			0%	90-110%		0-20%	
25090375-001 S	Sulfate	18.8 mg/L	4.48 mg/L	15.0 mg/L	95 %	80-120%		0-20%	
25090375-001 SD	Sulfate	18.8 mg/L	4.48 mg/L	15.0 mg/L	95 %	80-120%	0%	0-20%	

Standard Method SM 5210/B

Matrix Waste Water

Batch Number 82788

Sample ID	Parameter	Result	Ref. Value	Spike Conc.	Per. Rec.	Rec. Limits	RPD	RPD Limits	Flags
82788-1-BKS01	Carbonaceous BOD	197 mg/L		198 mg/L	99%	85-115%		0-25%	
82788-2-BKS02	Carbonaceous BOD	201 mg/L		198 mg/L	102%	85-115%		0-25%	
82788-3-BKS03	Carbonaceous BOD	199 mg/L		198 mg/L	101%	85-115%		0-25%	
82788-4-BKS04	Carbonaceous BOD	199 mg/L		198 mg/L	101%	85-115%		0-25%	
82788-1-BLK01	Carbonaceous BOD	0.120 mg/L			0%	85-115%		0-25%	
82788-2-BLK02	Carbonaceous BOD	0.0900 mg/L			0%	85-115%		0-25%	
82788-3-BLK03	Carbonaceous BOD	0.100 mg/L			0%	85-115%		0-25%	

QUALITY ASSURANCE & QUALITY CONTROL

Standard Method SM 2540/D

Matrix Waste Water

Batch Number 82801

Sample ID	Parameter	Result	Ref. Value	Spike Conc.	Per. Rec.	Rec. Limits	RPD	RPD Limits	Flags
82801-1-MB	Total Suspended Solids	<1.000 mg/L			0%	80-120%		0-10%	
82801-2-MB	Total Suspended Solids	<1.000 mg/L			0%	80-120%		0-10%	
82801-3-MB	Total Suspended Solids	0.2000 mg/L			0%	80-120%		0-10%	

Standard Method SM 2540/C

Matrix Waste Water

Batch Number 82802

Sample ID	Parameter	Result	Ref. Value	Spike Conc.	Per. Rec.	Rec. Limits	RPD	RPD Limits	Flags
82802-1-MB	Total dissolved solids	< mg/L			0%	80-120%		0-10%	

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

Purchase Order / Chain of Custody

Panhandle Division
13260 South US Hwy 287 Amarillo, Texas 79118
Office: 806-335-9393 Emergency: 806-786-0612

Southwest Division
811 E. Young Street Llano, Texas 78643
Office: 325-247-3295 Emergency: 254-582-2622

East Texas Division
14295 S.H. 155 North Winona, Texas 75792
Office: 903-877-9222 Emergency: 817-357-6535

Coastal Division
34 East Ave., Schulenburg, Texas 78956
Office: 979-743-7010 Emergency: 254-221-3201

City of Josephine	Report To:
City of Josephine	Purchase Order #:
108 West Hubbard Rd. Josephine, TX 75164	Address:
kirk@cityofjosephinetx.com	

25090545

Project Name:

Project Location: **WWTP** City, State:

Hand Deliver: ☐ Pick-up: ☐ **Sampler: (Please Print)**

Hand Deliver: ☑ Pick-up: ☐ **Sampler: (Please Print)**

CL2 0

Flow 0.1062 mgd

Lab#	Client Sample ID	Matrix	Date	Time	*Pres Code	‡ Bottle Code	CBOD / BOD	TSS, TDS	pH 8.14	DO 5.35	NH3N (pH<2.0, H_2SO_4) SM4500-NH3 D or G unless specified TKN, TOT PHOS	FECAL COLIFORM / E.COLI (Sterile)	MLSS	ALKALINITY, CHLORIDE, CONDUCTIVITY	OIL & GREASE	NITRATE, SULFATE		Sample Remarks
25090545	1.Renewal Analysis	WW	9-4-25	7300m	1	1	X	X	X	X								
	2.				2	1					X							
	3.				1	1								X				
	4.				2	2									X			
	5.				1	1										X		
	6.																	
	7.																	
	8.																	
	9.																	
	10.																	

Relinquished By:	Date	Time	Received By:	Date	Time
1.	9-4-25	0816	1.	9-4-25	0816
2.	9-4-25	1328	2.	9-4-25	1328
3.	9-4-25	1620	3.	9-4-25	1620
4.			4.		

IR GUN ID: FF4467
Ice: (YES) NO
Temperature: 1.7

* Preservation Codes
1. None
2. Sulfuric
3. Nitric
4. NaOH + ZnAc
5. NaOH
6. Sterile + Thiosulfate
7. Phosphoric

‡ Bottle Codes
1. Plastic
2. Glass + Tef.
3. 40 ml VOA

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

Check us out on the web: http://www.yourwaterlab.com **Email us at: homeoffice@yourwaterlab.com**

Revised 04/2025

ENVIRONMENTAL MONITORING LABORATORY , L.L.C

East Texas Division
14295 SH 155 North
Winona TX 75792
254-582-2622

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

ANALYTICAL REPORT 25090552

For:

City of Josephine

108 West Hubbard Rd.
Josephine, Texas 75164

Sample Site: Renewal Analysis

Collected Date: 09/04/25

Lab Number: TX01547

Authorized for release by:
08-SEP-25

Lisa Soward, Data Manager

homeoffice@yourwaterlab.com

ENVIRONMENTAL MONITORING LABORATORY , L.L.C

East Texas Division

14295 SH 155 North
Winona TX 75792

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

ANALYTICAL RESULTS

Analytical Report: 25090552

Lab ID: 25090552-001
Client: City of Josephine
Sample Site: Renewal Analysis

Collected Date: 09/04/25 07:30
Received Date: 09/04/25 13:23
Report Date: 09/08/25

Matrix: Waste Water
Temp at Receipt: 4.9 °C
Sample Collector: STAFF MEM

Analyte	Abbreviation	Method	TNI Cert	Date Analyzed	Result	Units
E. coli	*E. coli*	IDEXX Colilert	NP	09/04/25 13:30	57	MPN/100 mL

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

Control #: 25090552

QUALITY ASSURANCE & QUALITY CONTROL

ANALYTE	ABBR./ ALT.NAME	STANDARD METHOD	UNITS	Quality Control S.D.	CV%	REC.1%	REC.2%	MDL/PQL	Q
Chloride	Cl-	SM 4500-Cl-/B	mg/L						
Alkalinity	ALK	SM 2320/B	mg/L						
Total Phosphorus	T.PHOS.	SM 4500-P/E	mg/L						
Total Kjeldahl Nitrogen	TKN	SM 4500-NH3/D	mg/L						
Ammonia Nitrogen	NH3N	SM 4500-NH3/D	mg/L						
Oil & Grease	O&G	SM 5520/B	mg/L						
Chemical Oxygen Demand	COD	SM 5220/D	mg/L						
Turbidity	TURB.	SM 2130/B	NTUs						
Total Percent Solids	%d.w	SM 2540/G	%						N

Biochemical Oxygen Demand(BOD)
Carbonaceous Biochemical Oxygen Demand(CBOD)
Method: SM 5210/B

Results	Units	Description

Dissolved Oxygen
Method: SM 4500-O*/G

Results	Units	Description
	mg/L	Set Up Calibration
	mg/L	Read Off Calibration
	°C	Set Up Temperature
	°C	Read Off Temperature
	mm Hg	Set Up Barometer
	mm Hg	Read Off Barometer

Fecal Coliform
Method: SM9222 /D MF

Results	Units	Description
	CFU/100ml	Pre Blank
	CFU/100ml	Post Blank

TDS by SM2540/C

Results	Units	Description
	mg/L	Blank

E. coli By IDEXX Colilert (enumeration)

MPN/100 mL

Total Suspended Solids (TSS, MLSS)
Method: 2540/D

Results	Units	Description

Conductivity @ 25° C
Method: SM2510/B
Standards ran for each analytical batch.

Results	Units	Description
	umhos/cm	Conductivity Standard
	umhos/cm	Conductivity Standard
	umhos/cm	Conductivity Standard

Report Out Date: 09/08/2025

Lisa Soward
Data Manager

Final 1.000

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

Purchase Order / Chain of Custody

Panhandle Division
13260 South US Hwy 287 Amarillo, Texas 79118
Office: 806-335-9393 Emergency: 806-786-0612

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Office: 903-877-9222 Emergency: 817-357-6535

Coastal Division
34 East Ave., Schulenburg, Texas 78956
Office: 979-743-7010 Emergency: 254-221-3201

City of Josephine	Report To:
City of Josephine	Purchase Order #:
108 West Hubbard Rd. Josephine, TX 75164	Address:
kirk@cityofjosephinetx.com	
Project Name:	
Project Location: **WWTP**	City, State:
Hand Deliver: ☐ Pick-up: ☐	**Sampler: (Please Print)**
Hand Deliver: ☐ Pick-up: ☐	**Sampler: (Please Print)**

25090552

ANALYSES REQUESTED

NOTES:

Lab#	Client Sample ID	Matrix	Date	Time	*Pres. Code	‡ Bottle Code	CBOD / BOD	TSS, TDS	pH	DO	NH3N (pH<2.0, H_2SO_4) SM4500-NH3 D or G unless specified TKN, TOT PHOS	FECAL COLIFORM / E.COLI (Sterile)	MLSS	ALKALINITY, CHLORIDE, CONDUCTIVITY	OIL & GREASE	NITRATE, SULFATE		Sample Remarks
25090552	1. Renewal Analysis	WW	9-4-25	730am	6	1						X						
	2.																	
	3.																	
	4.																	
	5.																	
	6.																	
	7.																	
	8.																	
	9.																	
	10.																	

Relinquished By:	Date	Time	Received By:	Date	Time
1.	9-4-25	0816	1.	9-4-25	0816
2.	9-4-25	1313	2.	9.4.25	1313
3.			3.		
4.			4.		

IR GUN ID: IR#07
Ice: (YES) NO
Temperature: 4.9

*Preservation Codes: 1. None 2. Sulfuric 3. Nitric 4. NaOH + ZnAc 5. NaOH 6. Sterile + Thiosulfate 7. Phosphoric

‡Bottle Codes: 1. Plastic 2. Glass + Tef 3. 40 ml VOA

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

Check us out on the web: http://www.yourwaterlab.com **Email us at: homeoffice@yourwaterlab.com**

Revised 04/2025

Rachel Ellis

From: Troy Stirman <tstirman@dunaway.com>
Sent: Thursday, November 13, 2025 9:33 AM
To: Rachel Ellis; kpeters@cityofjosephinetx.com
Cc: Jacob Dupuis
Subject: RE: [EXTERNAL]Application for Renewal Permit No. WQ0010887002- City of Josephine - Notice of Deficiency Letter
Attachments: City of Josephine_Plain Language Summary_rev 11.12.25.docx; City of Joe_ Spanish NORI_2025.11.12.docx; City of Joe_Pg 5 of Admin Report_Revised_2025.11.12.docx

Rachel,

Please see attached, revised documents that were requested by your office.

If you have any questions, feel free to reach out to me directly.

Thank you.

Troy Stirman
Project Specialist
Dunaway
T 972.784.7777

From: Rachel Ellis <Rachel.Ellis@tceq.texas.gov>
Sent: Thursday, November 6, 2025 6:53 PM
To: kpeters@cityofjosephinetx.com
Cc: Troy Stirman <tstirman@dunaway.com>
Subject: [EXTERNAL]Application for Renewal Permit No. WQ0010887002- City of Josephine - Notice of Deficiency Letter

Dear Mr. Peters,

The attached Notice of Deficiency letter sent on November 6, 2025, requests additional information needed to declare the application administratively complete. Please send the complete response to my attention by **November 20, 2025**.

Thank you,

License & Permit Specialist
Texas Commission on Enviro Quality
ARP Team | Water Quality Division

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. WQ00

SOLICITUD. Ciudad de Josephine, Apartado Postal 99, Josephine, Texas 75164, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQ0010887002 (EPA I.D. No. TX 0137332) 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 *1,500,000* galones por día. La planta está ubicada *3507 Camino Rural 2668* en el Condado de *HUNT*, Texas *75189*. La ruta de descarga es del sitio de la planta a es desde el sitio de la planta hasta Brushy Creek; luego hasta West Caddo Creek; luego hasta el Lago Tawakoni. La TCEQ recibió esta solicitud el 29 de octubre de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Ayuntamiento de Josephine, mostrador principal, primer piso, 201 South Main Street, Josephine, Texas antes de la fecha de publicación de este aviso en el periódico. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web: https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications.
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=-96.2925,33.048055&level=18

AVISO DE IDIOMA ALTERNATIVO. El aviso de idioma alternativo en español está disponible en https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications.

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 correos siguientes (1) la lista de correo permanente para recibir los avisos del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado especifico. Si desea que se agrega 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.

INFORMACIÓN DISPONIBLE EN LÍNEA. Para detalles sobre el estado de la solicitud, favor de visitar la Base de Datos Integrada de los Comisionados en www.tceq.texas.gov/goto/cid. Para buscar en la base de datos, utilizar el número de permiso para esta solicitud que aparece en la parte superior de este aviso.

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 *Ciudad de Josephine* a la dirección indicada arriba o llamando a *Senor Kirk Peters* al *972-843-8282*.

Fecha de emisión: *[Date notice issued]*

A. Prefix: Mr. Last Name, First Name: Peters, Kirk

Title: Asst. City Administrator Credential: Click to enter text.

Organization Name: City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofjosephinetx.com

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Mr. Last Name, First Name: Peters, Kirk

Title: Asst, City Administrator Credential: Click to enter text.

Organization Name: City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofjosephinetx.com

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

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

Prefix: Mr. Last Name, First Name: Jackson, Garrett

Title: Director of Public Works Credential: Click to enter text.

Organization Name: City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-730-4554 E-mail Address: gjackson@cityofjosephinetx.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: Peters, Kirk

Title: Asst. City Administrator Credential: Click to enter text.

Organization Name: City of Josephine, TX.

Mailing Address: PO Box 99 City, State, Zip Code: Josephine, TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofjosephinetx.com

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

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

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

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

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

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS
Enter 'INDUSTRIAL' or 'DOMESTIC' here WASTEWATER/STORMWATER
The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal enforceable representation of the permit application.

City of Josephine (CN600670178) operates Waste Water Treatment Facility #2 (RN109412700), a Wastewater Treatment Facility. The facility is located at 3507 County Road 2668, in Royse City, HUNT County, Texas 75189. This is a permit renewal to discharge up to 1,500,000 gallons per day of treated domestic wastewater. This permit will not authorize a discharge of pollutants into water in the State.

Discharges from the facility are expected to contain *Arsenic, Cadmium, Chromium, Copper, Lead, Mercury, Molybdenum, Nickel, PCBs, Selenium, and Zinc*. Processed wastewater is treated by The City of Josephine WWTP #2 will be a sequence batch reactor (SBR) plant. Treatment units in the **Interim I Phase** consist of two SBR basins, two anaerobic chambers, two surge anoxic mixers and a chlorine contact chamber. Treatment units in the **Interim II Phase** will include a bar screen, a grit chamber, two SBR basins, two anaerobic chambers, two surge anoxic mixers, a sludge storage tank, a tertiary filter, and a UV disinfection system. Treatment

units in the **Final Phase** will include a bar screen, a grit chamber, four SBR basins, four anaerobic chambers, four surge anoxic mixers, sludge storage tank, two tertiary filters, and two UV disinfection systems. The treated effluent will be discharged to Brushy Creek; thence to West Caddo Creek; thence to Lake Tawakoni in Segment No. 0507 of the Sabine River Basin.

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

AGUAS RESIDUALES Introduzca 'INDUSTRIALES' o 'DOMÉSTICAS' aquí **/AGUAS PLUVIALES**

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

La Ciudad de Josephine (CN600670178) opera la Planta de Tratamiento de Aguas Residuales #2 (RN109412700), una instalación de tratamiento de aguas residuales. La planta está ubicada en 3507 County Road 2668, en Royse City, condado de HUNT, Texas 75189. Esta es una renovación de permiso para descargar hasta 1,500,000 galones por día de aguas residuales domésticas tratadas. Este permiso no autoriza la descarga de contaminantes en cuerpos de agua del Estado.

Se espera que las descargas de la instalación contengan Arsénico, Cadmio, Cromo, Cobre, Plomo, Mercurio, Molibdeno, Níquel, Bifenilos Policlorados (PCBs), Selenio y Zinc. Las aguas residuales procesadas serán tratadas por la Planta de Tratamiento de Aguas Residuales #2 de la Ciudad de Josephine, que será una planta de reactor por lotes secuenciales (SBR). Las unidades de tratamiento en la Fase Interina I consisten en dos tanques SBR, dos cámaras anaeróbicas, dos mezcladores anóxicos de retención y una cámara de contacto con cloro. Las unidades de tratamiento en la Fase Interina II incluirán una rejilla de barras, una cámara de arena, dos tanques SBR, dos cámaras anaeróbicas, dos mezcladores anóxicos de retención, un tanque de almacenamiento de lodos, un filtro terciario y un sistema de desinfección por luz ultravioleta (UV). Las unidades de tratamiento en la Fase Final incluirán una rejilla de barras, una cámara de arena, cuatro tanques SBR, cuatro cámaras anaeróbicas, cuatro mezcladores anóxicos de retención, un tanque de almacenamiento de lodos, dos filtros terciarios y dos sistemas de desinfección UV. El efluente tratado será descargado al arroyo Brushy Creek; luego al arroyo West Caddo Creek; y posteriormente al Lago Tawakoni en el Segmento No. 0507 de la Cuenca del Río Sabine.

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:

D E-mail Address

D Fax

rg/ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Mr. Last Name, First Name: Peters, Kirk

Title: Asst.City Administrator Credential: Click to enter tei.,.

Organization Name: Cityof Josephine, TX.

Mailing Address: PO Box99 City, State, Zip Code: Josephine,TX. 75164

Phone No.: 972-843-8282 E-mail Address: kpeters@cityofiosephinetx.com

D. Public Viewing Information

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

Public building name:Josephine City Hall

Location"ithin thebuilding: Main Desk. First Floor

Physical Address of Building: 201 SouthMain Street

City: Josephine County: Hunt

Contact (Last Name, First Name): Peter., Kirk

Phone No.: 922-843-8282 Ex,.: *NIA*

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 alte.rnative 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 follon ing 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?

@ iYes D ![]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?

lll! iYes D No