



Administrative Package Cover Page

This file contains the following documents:

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



Portada de Paquete Administrativo

Este archivo contiene los siguientes documentos:

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

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0011982001

APPLICATION. Utilities, Inc. of Texas, P.O. Box 140164, Austin, Texas 78714, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0011982001 (EPA I.D. No. TX0074888) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 100,000 gallons per day. The domestic wastewater treatment facility is located at 897 U.S. Highway 190, in the city of Lometa, in Lampasas County, Texas 76853. The discharge route is from the plant site to Kirby Creek; thence to Salt Creek; thence to Colorado River Above Lake Buchanan. TCEQ received this application on September 11, 2024. The permit application will be available for viewing and copying at Lometa City Hall, front desk, 100 East San Saba Street, Lometa, in Lampasas County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

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

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-98.396666,31.204444&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 Utilities, Inc. of Texas at the address stated above or by calling Ms. Siena Werner, E.I.T., Kimly-Horn and Associates, Inc., at 787-737-6618.

Issuance Date: November 1, 2024

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO NO. WQ0011982001

SOLICITUD. Utilities, Inc. of Texas, P.O. Box 140164, Austin, Texas 78714 ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQ0011982001 (EPA I.D. No. TX 0074888) 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 100,000 galones por día. La planta está ubicada 897 U.S. Highway 190 en el Condado de Lampasas, Texas. La ruta de descarga es del sitio de la planta a Kirby Creek; de allí a Salt Creek; de allí al río Colorado sobre el lago Buchanan. La TCEQ recibió esta solicitud el 11 de septiembre de 2024. La solicitud para el permiso estará disponible para leerla y copiarla en Ayuntamiento de Lometa, recepción, 100 East San Saba Street, Lometa, en el condado de Lampasas, Texas antes de la fecha de publicación de este aviso en el periódico. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

<https://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 por qué el miembro sería afectado; y explicar cómo los intereses que el grupo desea proteger son pertinentes al propósito del grupo.

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

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

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

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

También se puede obtener información adicional del Utilities, Inc. of Texas a la dirección indicada arriba o llamando a Siena Werner al 787-737-7618.

Fecha de emission: 1 de noviembre de 2024



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

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

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

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

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

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

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

Corix Utilities Texas, Inc. (CN604520213) operates Lometa Kirby Creek Wastewater Treatment Plant (RN102080132), a conventional activated sludge process wastewater treatment plant. The facility is located at 897 West Highway 190, in Lometa, Lampasas County, Texas 76853. Corix Utilities Texas, Inc. has applied to the Texas Commission on Environmental Quality (TCEQ) for a renewal of Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0011982001, which authorizes the discharge of treated domestic wastewater at a daily average flow not to exceed 0.1 million gallons per day (MGD).

Discharges from the facility are expected to contain Carbonaceous Biochemical Oxygen Demand, Total Suspended Solids, Ammonia Nitrogen, and Total Phosphorus. Domestic Wastewater is treated by a conventional wastewater treatment plant processes including screening, aeration, digestion, and disinfection.

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

AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES

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

Corix Utilities Texas, Inc. (CN 604520213) opera la Planta de Tratamiento de Aguas Residuales de Lometa (RN102080132), una planta de Tratamiento de Aguas Residuales de proceso de lodos activados convencional. La instalación estará ubicada en 897 West Highway 190, en Lometa, Condado de Lampasas, Texas 76853. Corix Utilities Texas, Inc. ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) una renovación del permiso No. WQ0011982001 del Sistema de Eliminación de Descargas Contaminantes de Texas (TPDES) que autoriza la descarga de aguas domesticas tratadas que no sobrepasa un flujo promedio de 0.1 millón de galones por día (MGD).

Se espera que las descargas de la instalación contengan Demanda Bioquímica de Oxígeno (DBO), Sólidos Suspendidos Totales, Nitrógeno Amoniacal, y fósforo Total. Aguas residuales domesticas. está tratado por una serie de procesos convencionales de plantas de tratamiento de aguas residuales, que incluyen cribados, aireación, digestión, y desinfección.

TPDES Renewal Application

Lometa Kirby Creek Wastewater Treatment Plant

WQ0011982001

COPY



September 11, 2024

Texas Commission on Environmental Quality
Applications Review and Processing Team (MF 148)
Building F, Room 2101
12100 Park 35 Circle
Austin, Texas 78753

**RE: TPDES Renewal for WQ0011982001
Kirby Creek Wastewater Treatment Facility**

Dear Water Quality Team:

This letter serves to transmit the wastewater discharge permit renewal application for the Windmill Ranch Wastewater Treatment Facility.

The permit renewal application that follows contains the following forms and attachments:

Administrative Report 1.0 (Form 10053)

- Attachment A. Application Fee Payment Voucher
- Attachment B. Core Data Form (Form 10400)
- Attachment C. Plain Language Summary
- Attachment D. Original USGS Topographic Map
- Attachment E. Supplemental Permit Information Form (SPIF)
- Attachment E1. Original USGS Topographic Map, Copy 2

Domestic Technical Report 1.0 (Form 10054)

- Attachment F. Process Flow Diagram
- Attachment G. Site Drawing
- Attachment H. Sludge Processing Written Statement
- Attachment I. Laboratory Results

Domestic Worksheet 2.0 (Form 10054)

(continued on next page)



The attached application contains detailed contact information. In addition, you may contact me with any requests at siena.werner@kimley-horn.com or by phone at 737-787-7618.

Sincerely,

KIMLEY-HORN AND ASSOCIATES, INC.

Texas Firm No. 928

A handwritten signature in blue ink that reads "Siena Werner".

Siena Werner, EIT
Project Manager

Administrative Report 1.0



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Corix Utilities (Texas) Inc.

PERMIT NUMBER (If new, leave blank): WQ0011982001

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

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

For TCEQ Use Only

Segment Number _____ County _____
 Expiration Date _____ Region _____
 Permit Number _____



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

Section 1. Application Fees (Instructions Page 26)

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

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

Minor Amendment (for any flow) \$150.00

Payment Information:

Mailed Check/Money Order Number:
 Check/Money Order Amount:
 Name Printed on Check:
 EPAY Voucher Number: 720552
 Copy of Payment Voucher enclosed? Yes (Attachment A)

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 11982001

EPA I.D. (TPDES only): TX 0074888

Expiration Date: 1 December 2024

Section 3. Facility Owner (Applicant) and Co-Applciant 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?

Corix Utilities (Texas) Inc.

(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: 604520213

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: Barker, Darrin

Title: President

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?

N/A

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

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

CN: N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

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

C. Core Data Form

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

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: Miss. Last Name, First Name: Werner, Siena
Title: Engineer Credential: EIT
Organization Name: Kimley-Horn and Associates, Inc.
Mailing Address: 5301 Southwest Parkway, Building 3, Suite 100 City, State, Zip Code: Austin, TX,
Phone No.: +1 737-787-7618 E-mail Address: Siena.Werner@kimley-horn.com
Check one or both: Administrative Contact Technical Contact
- B. Prefix: Ms. Last Name, First Name: Jensen, Siera
Title: Engineer Credential: P.E.
Organization Name: Kimley Horn and Associates, Inc
Mailing Address: 5301 Southwest Parkway, Building 2 Suite 100 City, State, Zip Code: Austin, TX, 78735
Phone No.: 512-271-6324 E-mail Address: sierra.jensen@kimley-horn.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: Robert Hicks
Title: Director, State Operations Credential: Click to enter text.
Organization Name: Corix Utilities (Texas) Inc.

Mailing Address: P.O. Box 140164 City, State, Zip Code: Austin, Texas, 78714

Phone No.: 512-306-4002 E-mail Address: Bobby.Hicks@nexuswg.com

B. Prefix: Mr. Last Name, First Name: Vega, Israel

Title: Area Manager Credential: Click to enter text.

Organization Name: Corix Utilities (Texas) Inc.

Mailing Address: P.O. Box 14-164 City, State, Zip Code: Austin, Texas 78714

Phone No.: 737-352-0601 E-mail Address: Israel.Vega@nexuswg.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: Hicks, Robert

Title: Director, State Operations Credential: Click to enter text.

Organization Name: Corix Utilities (Texas) Inc.

Mailing Address: P.O. Box 140164 City, State, Zip Code: Austin, Texas 78714

Phone No.: 512-306-4002 E-mail Address: Bobby.Hicks@nexuswg.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: Ms. Last Name, First Name: Nunn, Hayley

Title: Compliance Analyst Credential: Click to enter text.

Organization Name: Corix Utilities (Texas)

Mailing Address: P.O. Box 140164 City, State, Zip Code: Austin, Texas 78714

Phone No.: 512-306-400` E-mail Address: Haley.Nunn@nexuswg.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Ms. Last Name, First Name: Werner, Siena

Title: Analyst Credential: EIT

Organization Name: Kimley-Horn and Associates, Inc.

Mailing Address: 5301 Southwest Parkway, Building 2, Suite 100 City, State, Zip Code: Austin, Texas 78735

Phone No.: 787-737-7618 E-mail Address: Siena.Werner@kimley-horn.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: Ms. Last Name, First Name: Werner, Siena
Title: Analyst Credential: EIT
Organization Name: Kimley-Horn and Associates, Inc.
Mailing Address: 5301 Southwest Parkway, Building 2, Suite 100 City, State, Zip Code: Austin, Texas 78735
Phone No.: 787-737-6618 E-mail Address: Siena.Werner@kimley-horn.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: Lometa City Hall
Location within the building: Front Desk
Physical Address of Building: 100 E San Saba Street
City: Lometa County: Lampasas
Contact (Last Name, First Name): Julia Thomas
Phone No.: 512-752-3331 Ext.: Click to enter text.

E. Bilingual Notice Requirements

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

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

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

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

Yes No

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

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

Yes No

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

Yes No

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

Yes No

5. If the answer is **yes** to **question 1, 2, 3, or 4**, public notices in an alternative language are required. Which language is required by the bilingual program? Spanish

F. Plain Language Summary Template

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

Attachment: Attachment C – Plain Language Summary

G. Public Involvement Plan Form

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

Attachment: N/A

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

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 102080132

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):

Lometa Kirby Creek Wastewater Treatment Plant

C. Owner of treatment facility: Corix Utilities (Texas) Inc.

Ownership of Facility: Public Private Both Federal

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

Prefix: Click to enter text. Last Name, First Name: Click to enter text.

Title: Click to enter text. Credential: Click to enter text.

Organization Name: Corix Utilities (Texas) Inc.

Mailing Address: P.O. Box 140164 City, State, Zip Code: Austin, TX, 78714

Phone No.: N/A E-mail Address: N/A

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

Attachment: N/A

E. Owner of effluent disposal site:

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

Section 10. TPDES Discharge Information (Instructions Page 31)

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

Yes No

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

N/A

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

Yes No

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

Click to enter text.

City nearest the outfall(s): Lometa, Texas

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

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

Yes No

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

- Authorization granted Authorization pending

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

Attachment: N/A

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

Section 11. TLAP Disposal Information (Instructions Page 32)

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

- Yes No

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

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: WQ0011982001

Applicant: Corix Utilities Texas, Inc.

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.

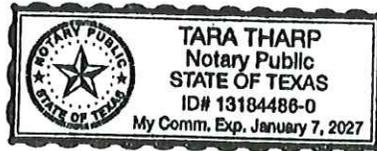
Signatory name (typed or printed): R. Darrin Barker

Signatory title: President

Signature: *R Darrin Barker* Date: 8/1/24
(Use blue ink)

Subscribed and Sworn to before me by the said R. Darrin Barker
on this 1st day of August, 2024.
My commission expires on the 7th day of January, 2027.

Tara Tharp
Notary Public
Sax Saba
County, Texas



[SEAL]

Attachment A
Application Fee Payment Voucher

TCEQ ePay Voucher Receipt

Transaction Information

Voucher Number: 720552
Trace Number: 582EA000624706
Date: 09/09/2024 04:40 PM
Payment Method: CC - Authorization 0000015377
Voucher Amount: \$800.00
Fee Type: WW PERMIT - FACILITY WITH FLOW >= .10 & < .25 MGD - RENEWAL
ePay Actor: BRAD MARSHALL

Payment Contact Information

Name: BRAD MARSHALL
Company: CORIX UTILITIES TEXAS INC
Address: P O BOX 140164, AUSTIN, TX 78714
Phone: 512-348-2721

Site Information

Site Name: LOMETA KIRBY CREEK WASTEWATER TREATMENT PLANT
Site Address: 897 U S 190, LOMETA, TX 76853
Site Location: 0.4 MILES SOUTH OF W HWY 190 AND 0.5 MILES EAST OF HWY 183 IN LOME

Customer Information

Customer Name: CORIX UTILITIES TEXAS INC
Customer Address: P O BOX 140164, AUSTIN, TX 78714

Other Information

Program Area ID: WQ0011982001

TCEQ ePay Voucher Receipt

Transaction Information

Voucher Number:	720553
Trace Number:	582EA000624706
Date:	09/09/2024 04:40 PM
Payment Method:	CC - Authorization 0000015377
Voucher Amount:	\$15.00
Fee Type:	30 TAC 305.53B WQ RENEWAL NOTIFICATION FEE
ePay Actor:	BRAD MARSHALL

Payment Contact Information

Name:	BRAD MARSHALL
Company:	CORIX UTILITIES TEXAS INC
Address:	P O BOX 140164, AUSTIN, TX 78714
Phone:	512-348-2721

Attachment B
Core Data Form (10400)



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.)		
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input checked="" type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input type="checkbox"/> Other
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 604520213		RN 102080132

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)		8/14/2023	
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership <input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
Corix Utilities (Texas) Inc					
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID	10. DUNS Number (if applicable)
801600117		19903766756		(9 digits) 990376675	079168047
11. Type of Customer:		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited	
12. Number of Employees				13. Independently Owned and Operated?	
<input type="checkbox"/> 0-20 <input checked="" type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other: <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
15. Mailing Address:		P.O. Box 140164			
City		Austin		State TX	
ZIP		78714		ZIP + 4	
16. Country Mailing Information (if outside USA)				17. E-Mail Address (if applicable)	
				Bobby.Hicks@nexuswg.com	
18. Telephone Number		19. Extension or Code		20. Fax Number (if applicable)	

SECTION III: Regulated Entity Information

21. General Regulated Entity Information <i>(If 'New Regulated Entity' is selected, a new permit application is also required.)</i>							
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information							
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>							
22. Regulated Entity Name <i>(Enter name of the site where the regulated action is taking place.)</i>							
Lometa Kirby Creek Wastewater Treatment Plant							
23. Street Address of the Regulated Entity: <i>(No PO Boxes)</i>		897 U.S. 190					
City	Lometa	State	TX	ZIP	76853	ZIP + 4	
24. County	Lampasas						

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

25. Description to Physical Location:							
26. Nearest City				State		Nearest ZIP Code	
Lometa				TX		76853	
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>							
27. Latitude (N) In Decimal:		31.205626		28. Longitude (W) In Decimal:		-98.396859	
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		4900		22132		221320	
33. What is the Primary Business of this entity? <i>(Do not repeat the SIC or NAICS description.)</i>							
Water and Wastewater Utility							
34. Mailing Address:		P.O. Box 140164					
City	Austin	State	TX	ZIP	78714	ZIP + 4	
35. E-Mail Address:	Bobby.Hicks@nexuswg.com						
36. Telephone Number			37. Extension or Code			38. Fax Number <i>(if applicable)</i>	
(512) 306-4000						(512) 339-809	

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

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

SECTION IV: Preparer Information

40. Name:	Siena Werner		41. Title:	Project Manager
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address	
(787) 737-7618		() -	Siena.werner@kimley-horn.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:	Kimley-Horn and Associates	Job Title:	Project Manager
Name (In Print):	Siena Werner	Phone:	(737) 787- 7618
Signature:		Date:	8/14/2024

Attachment C
Plain Language Summary



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

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

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

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

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

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

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

Corix Utilities Texas, Inc. (CN604520213) operates Lometa Kirby Creek Wastewater Treatment Plant (RN102080132), a conventional activated sludge process wastewater treatment plant. The facility is located at 897 West Highway 190, in Lometa, Lampasas County, Texas 76853. Corix Utilities Texas, Inc. has applied to the Texas Commission on Environmental Quality (TCEQ) for a renewal of Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0011982001, which authorizes the discharge of treated domestic wastewater at a daily average flow not to exceed 0.1 million gallons per day (MGD).

Discharges from the facility are expected to contain Carbonaceous Biochemical Oxygen Demand, Total Suspended Solids, Ammonia Nitrogen, and Total Phosphorus. Domestic Wastewater is treated by a conventional wastewater treatment plant processes including screening, aeration, digestion, and disinfection.

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

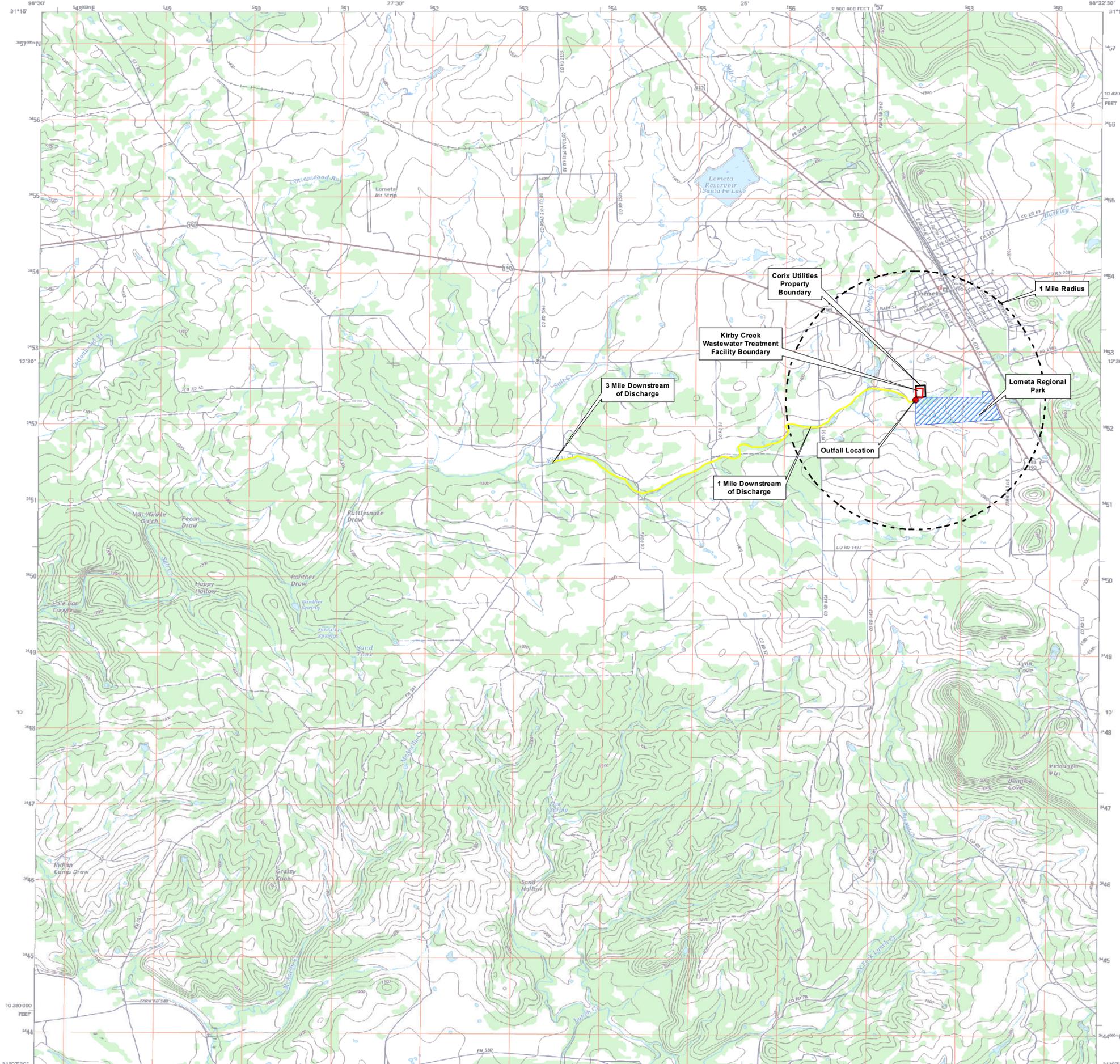
AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES

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

Corix Utilities Texas, Inc. (CN 604520213) opera la Planta de Tratamiento de Aguas Residuales de Lometa (RN102080132), una planta de Tratamiento de Aguas Residuales de proceso de lodos activados convencional. La instalación estará ubicada en 897 West Highway 190, en Lometa, Condado de Lampasas, Texas 76853. Corix Utilities Texas, Inc. ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) una renovación del permiso No. WQ0011982001 del Sistema de Eliminación de Descargas Contaminantes de Texas (TPDES) que autoriza la descarga de aguas domesticas tratadas que no sobrepasa un flujo promedio de 0.1 millón de galones por día (MGD).

Se espera que las descargas de la instalación contengan Demanda Bioquímica de Oxígeno (DBO), Sólidos Suspendidos Totales, Nitrógeno Amoniacal, y fósforo Total. Aguas residuales domesticas. está tratado por una serie de procesos convencionales de plantas de tratamiento de aguas residuales, que incluyen cribados, aireación, digestión, y desinfección.

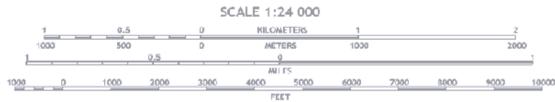
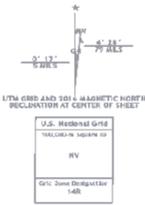
Attachment D
Original USGS Topographic Map



Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
Metric coordinate system of 1983 (MCS83)
Projection and 1,000-meter grid: Universal Transverse Mercator, Zone 14R
10,000-foot ticks: Texas Coordinate System of 1983 (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 writing private lands.

Imagery.....NAIP, July 2014
Roads.....U.S. Census Bureau, 2010 - 2015
Names.....GNIS, 2015
Hydrography.....National Hydrography Dataset, 2014
Contours.....National Elevation Dataset, 2003
Boundaries.....Multiple sources; see metadata file 1972 - 2014
Wetlands.....FWS National Wetlands Inventory 1977 - 2014



SCALE 1:24 000
CONTOUR INTERVAL 20 FEET
NORTH AMERICAN DATUM OF 1983
This map was produced to conform with the National Geospatial Program US Topo Product Standard, 2011.
A metadata file associated with this product is at [http://www.usgs.gov](#).



ROAD CLASSIFICATION

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

1	2	3	1 San Sabo Peak
4	5	6	2 Antelope Gap
7	8	9	3 Castle Peak
10	11	12	4 Wolf Ridge
13	14	15	5 Ogden
16	17	18	6 Bend
19	20	21	7 Gorman Falls
22	23	24	8 Nix

ADJOINING QUADRANGLES

LOMETA, TX
2016

Attachment E
Supplemental Permit Information Form (SPIF)

**TEXAS COMMISSION ON ENVIRONMENTAL QUALITY
SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)**

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

TCEQ USE ONLY:

Application type: Renewal Major Amendment Minor Amendment New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

Texas Historical Commission

U.S. Fish and Wildlife

Texas Parks and Wildlife Department

U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: Corix Utilities (Texas) Inc.

Permit No. WQ00 11982001

EPA ID No. TX 0074888

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

897 West Highway 190, Lometa, TX, 76853

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: Robert Hicks

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

Title: Director, State Operations

Mailing Address: P.O. Box 140164

City, State, Zip Code: Austin, Texas, 78714

Phone No.: 512-306-4002 Ext.: [REDACTED] Fax No.: [REDACTED]

E-mail Address: Bobby.Hicks@nexuswg.com

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

N/A

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

The effluent is discharged into Kirby Creek, thence to Salt Lake, thence to Colorado River Segment No. 1409

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

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

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

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

Disturbance of vegetation or wetlands

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

N/A

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

Land use is existing wastewater treatment plant

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

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

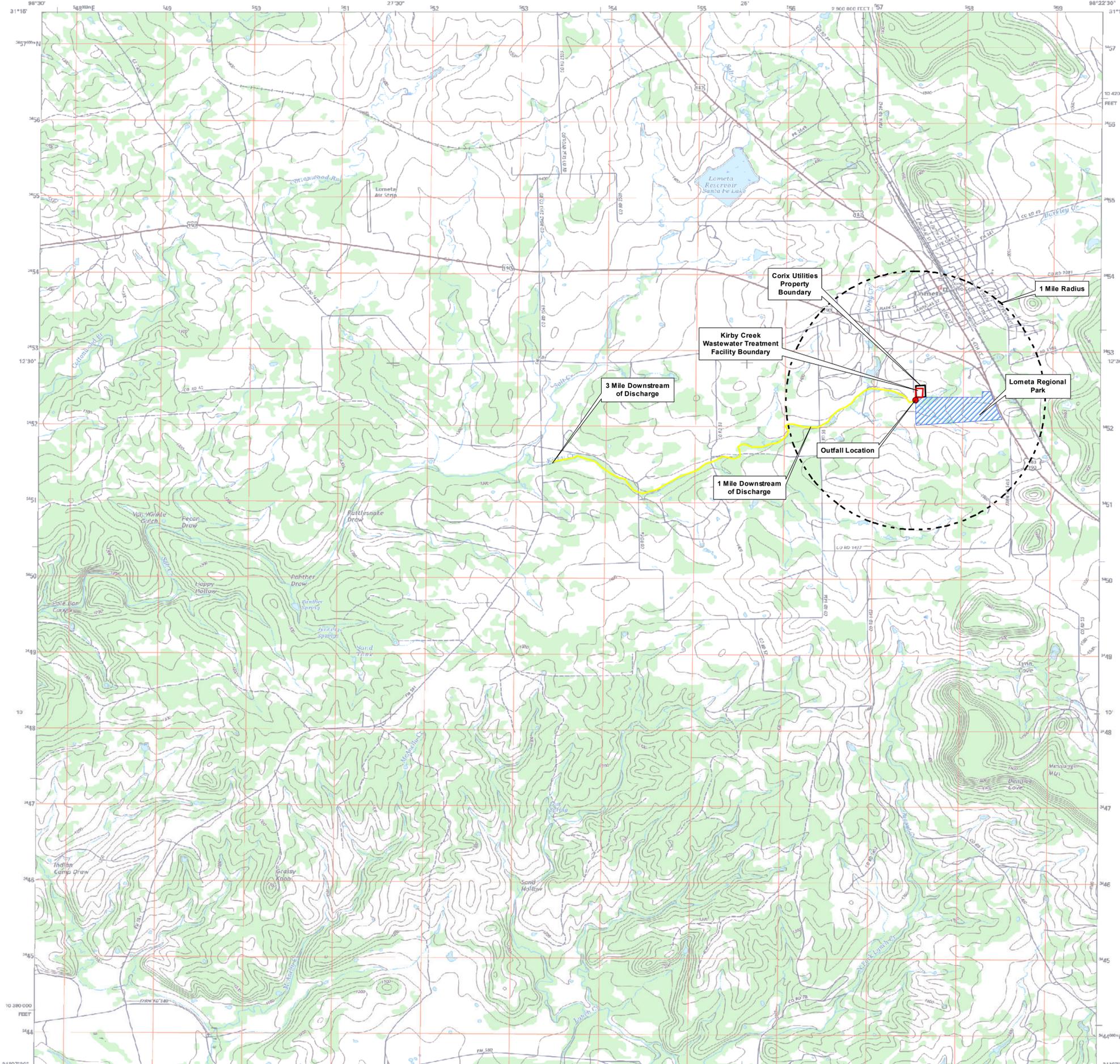
N/A

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

N/A

Attachment E.1

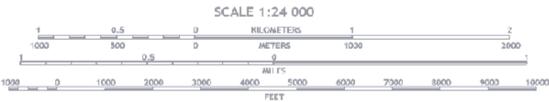
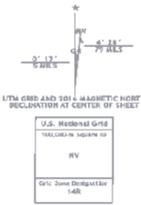
Original USGS Topographic Map, Copy 2



Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
Metric coordinate system of 1983 (MCS-83)
Projection and 1,000-meter grid: Universal Transverse Mercator, Zone 14R
10,000-foot ticks: Texas Coordinate System of 1983 (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 writing 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, 2003
Boundaries.....Multiple sources; see metadata file 1972 - 2014
Wetlands.....FWS National Wetlands Inventory 1977 - 2014



CONTOUR INTERVAL 20 FEET
NORTH AMERICAN DATUM OF 1983
This map was produced to conform with the National Geospatial Program US Topo Product Standard, 2011.
A metadata file associated with this product is in file version C.6.19



ROAD CLASSIFICATION

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

1	2	3	1 San Sabo Peak
4	5	6	2 Antelope Gap
7	8	9	3 Castle Peak
10	11	12	4 Wolf Ridge
13	14	15	5 Ogden
16	17	18	6 Bend
19	20	21	7 Gorman Falls
22	23	24	8 Nix

ADJOINING QUADRANGLES

LOMETA, TX
2016

Domestic Worksheet 1.0 – Form 10054



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY
DOMESTIC WASTEWATER PERMIT APPLICATION

DOMESTIC TECHNICAL REPORT 1.0

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

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

A. Existing/Interim I Phase

Design Flow (MGD): 0.1

2-Hr Peak Flow (MGD): 210 GPM

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

B. Interim II Phase

Design Flow (MGD): N/A

2-Hr Peak Flow (MGD): N/A

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

C. Final Phase

Design Flow (MGD): N/A

2-Hr Peak Flow (MGD): N/A

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

D. Current operating phase: Existing

Provide the startup date of the facility: 1978 (facility), 1996 (changes to
oxidation ditch)

Section 2. Treatment Process (Instructions Page 51)

A. Treatment process description

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

Bar screen, extended aeration activated sludge (oxidation ditch), final clarifiers (2), chlorine contact basin, sludge drying beds (4)

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

B. Treatment Units

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

Table 1.0(1) - Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Oxidation Ditch	1	105,026 GAL
Clarifiers	2	22' diameter, 9' liquid depth
Chlorine Contact Chamber	1	7' x 8'8" x 7'
Sludge Drying Beds	4	44' x 12'2" x 2'6"

C. Process flow diagrams

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

Attachment: Attachment F - Process Flow Diagram

Section 3. Site Drawing (Instructions Page 52)

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

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

Attachment: Attachment G - Site Drawing

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

City of Lometa, Texas

Section 4. Unbuilt Phases (Instructions Page 52)

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

Yes No

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

Yes No

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

N/A

Section 5. Closure Plans (Instructions Page 53)

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

Yes No

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

Yes No

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

Section 6. Permit Specific Requirements (Instructions Page 53)

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

A. Summary transmittal

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

Yes No

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

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.

Ownership

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*.

N/A

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 512-239-0000. Note: A registration or permit is required for grit disposal. Grit shall not be combined with treatment plant sludge. See the instruction booklet for additional information on grit disposal requirements and restrictions.

Describe the method of grit disposal.

N/A

4. Grease and decanted liquid disposal

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

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

N/A

E. Stormwater management

1. Applicability

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

Yes No

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

Yes No

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

2. MSGP coverage

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

Yes No

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

TXR05 [redacted] or TXRNE [redacted]

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

Yes No

3. Conditional exclusion

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

Yes No

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

N/A

4. Existing coverage in individual permit

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

Yes No

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

<u>N/A</u>

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.

<u>N/A</u>

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

6. Request for coverage in individual permit

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

Yes No

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

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

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

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

Yes No

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

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

1. Acceptance of sludge from other WWTPs

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

Yes No

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

In addition, provide the date that the plant started accepting sludge or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an estimate of the BOD₅ concentration of the sludge, and the design BOD₅ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

N/A

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

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

Yes No

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

Yes No

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

Yes No

If yes to any of the above, provide a the date that the plant started accepting septic waste, or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD₅ concentration of the septic waste, and the design BOD₅ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

N/A

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

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

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

Yes No

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

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

N/A

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

Is the facility in operation?

Yes No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l	<2.4		30	Grab	01/01/24 - 07/01/2024
Total Suspended Solids, mg/l	<2.8		30	Grab	01/01/24 - 07/01/2024
Ammonia Nitrogen, mg/l	<0.1		1	Grab	8/1/24 10:20 AM
Nitrate Nitrogen, mg/l	47.4		1	Grab	8/1/24 12:00 PM
Total Kjeldahl Nitrogen, mg/l	1.34		1	Grab	8/1/24 10:20 AM
Sulfate, mg/l	27.7		1	Grab	8/1/24 10:20 AM
Chloride, mg/l	103		1	Grab	8/1/24 10:20 AM
Total Phosphorus, mg/l	3.91		1	Grab	8/1/24 10:20 AM
pH, standard units	7.3		1	Grab	8/1/24 10:20 AM

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Dissolved Oxygen*, mg/l	6.8		1	Grab	8/1/24 10:20 AM
Chlorine Residual, mg/l	1.8		1	Grab	8/1/24 10:20 AM
<i>E.coli</i> (CFU/100ml) freshwater	<1		1	Grab	8/1/24 10:20 AM
Enterococci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l	510		1	Grab	8/1/24 10:20 AM
Electrical Conductivity, μ mohs/cm, †					
Oil & Grease, mg/l					
Alkalinity (CaCO ₃)*, mg/l					

*TPDES permits only

†TLAP permits only

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

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

Section 8. Facility Operator (Instructions Page 60)

Facility Operator Name: Matt Molter

Section 8. Facility Operator (Instructions Page 60)

Facility Operator Name: Matt Molter

Facility Operator's License Classification and Level: B

Facility Operator's License Number: WW0033713

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

A. Sludge disposal method

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

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

B. Sludge disposal site

Disposal site name: Grandy Ranch LTD

TCEQ permit or registration number: WQ004458000

Section 11. Sewage Sludge Lagoons (Instructions Page 61)

Does this facility include sewage sludge lagoons?

Yes No

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

A. Location information

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

- Original General Highway (County) Map:

Attachment: N/A

- USDA Natural Resources Conservation Service Soil Map:

Attachment: N/A

- Federal Emergency Management Map:

Attachment: N/A

- Site map:

Attachment: N/A

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

Check all that apply.

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

Attachment: N/A

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

N/A

B. Temporary storage information

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

Nitrate Nitrogen, mg/kg: N/A

Total Kjeldahl Nitrogen, mg/kg: N/A

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

Phosphorus, mg/kg: N/A

Potassium, mg/kg: N/A

pH, standard units: N/A

Ammonia Nitrogen mg/kg: N/A

Arsenic: N/A

Cadmium: N/A

Chromium: N/A

Copper: N/A

Lead: N/A

Mercury: N/A

Molybdenum: N/A

Nickel: N/A

Selenium: N/A

Zinc: N/A

Total PCBs: N/A

Provide the following information:

Volume and frequency of sludge to the lagoon(s): N/A

Total dry tons stored in the lagoons(s) per 365-day period: N/A

Total dry tons stored in the lagoons(s) over the life of the unit: N/A

C. Liner information

Does the active/proposed sludge lagoon(s) have a liner with a maximum

hydraulic conductivity of 1×10^{-7} cm/sec?

Yes No

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

N/A

D. Site development plan

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

N/A

Attach the following documents to the application.

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

E. Groundwater monitoring

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

Yes No

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

Attachment: N/A

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

A. Additional authorizations

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

Yes No

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

N/A

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

Yes No

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

Yes No

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

N/A

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

A. RCRA hazardous wastes

Has the facility received in the past three years, does it currently receive, or will

it receive RCRA hazardous waste?

Yes No

B. Remediation activity wastewater

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

Yes No

C. Details about wastes received

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

Attachment: N/A

Section 14. Laboratory Accreditation (Instructions Page 64)

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

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

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

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

CERTIFICATION:

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

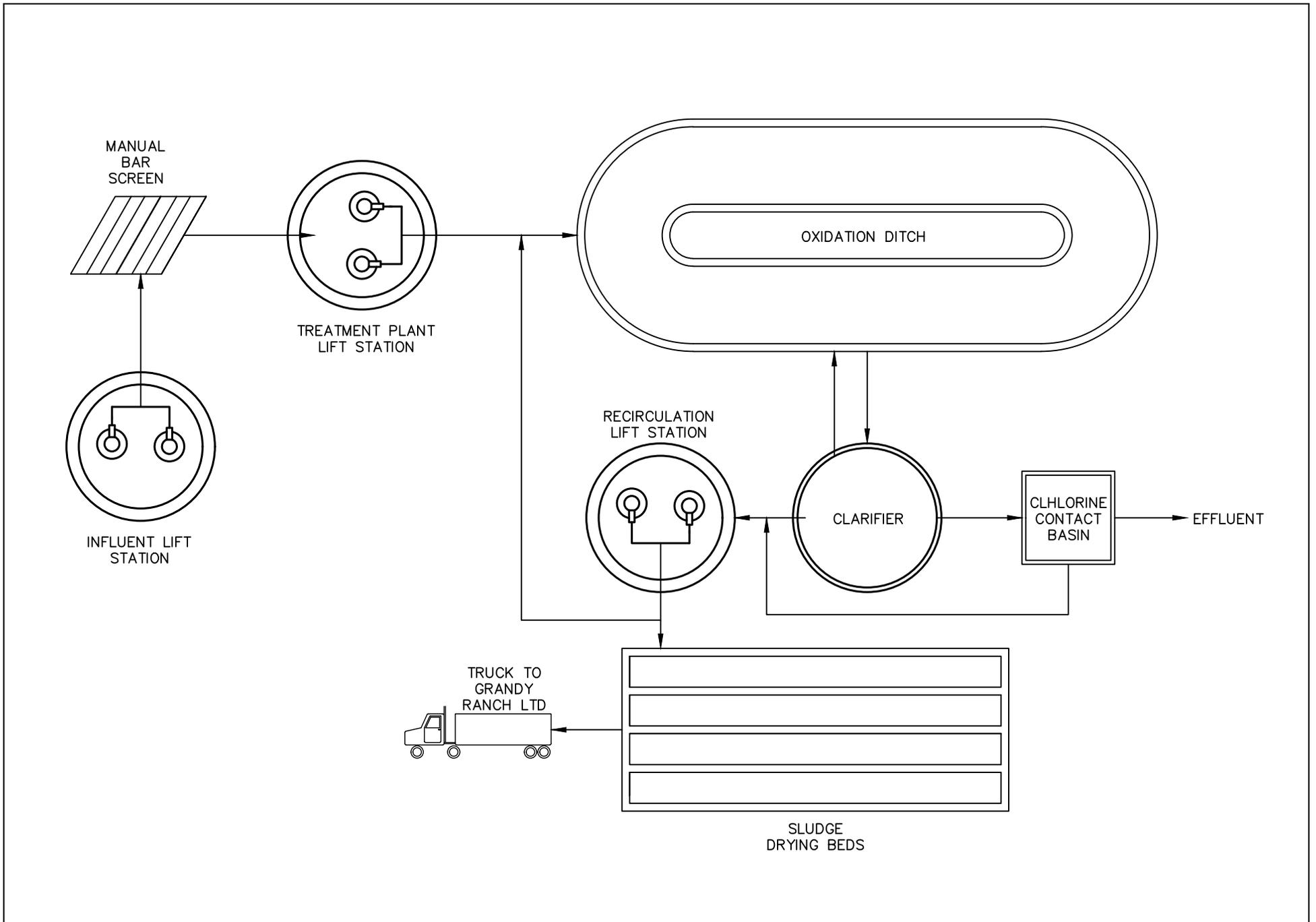
Printed Name: R. Darrin Barker

Title: President

Signature: _____

Date: 8-1-24

Attachment F
Process Flow Diagram

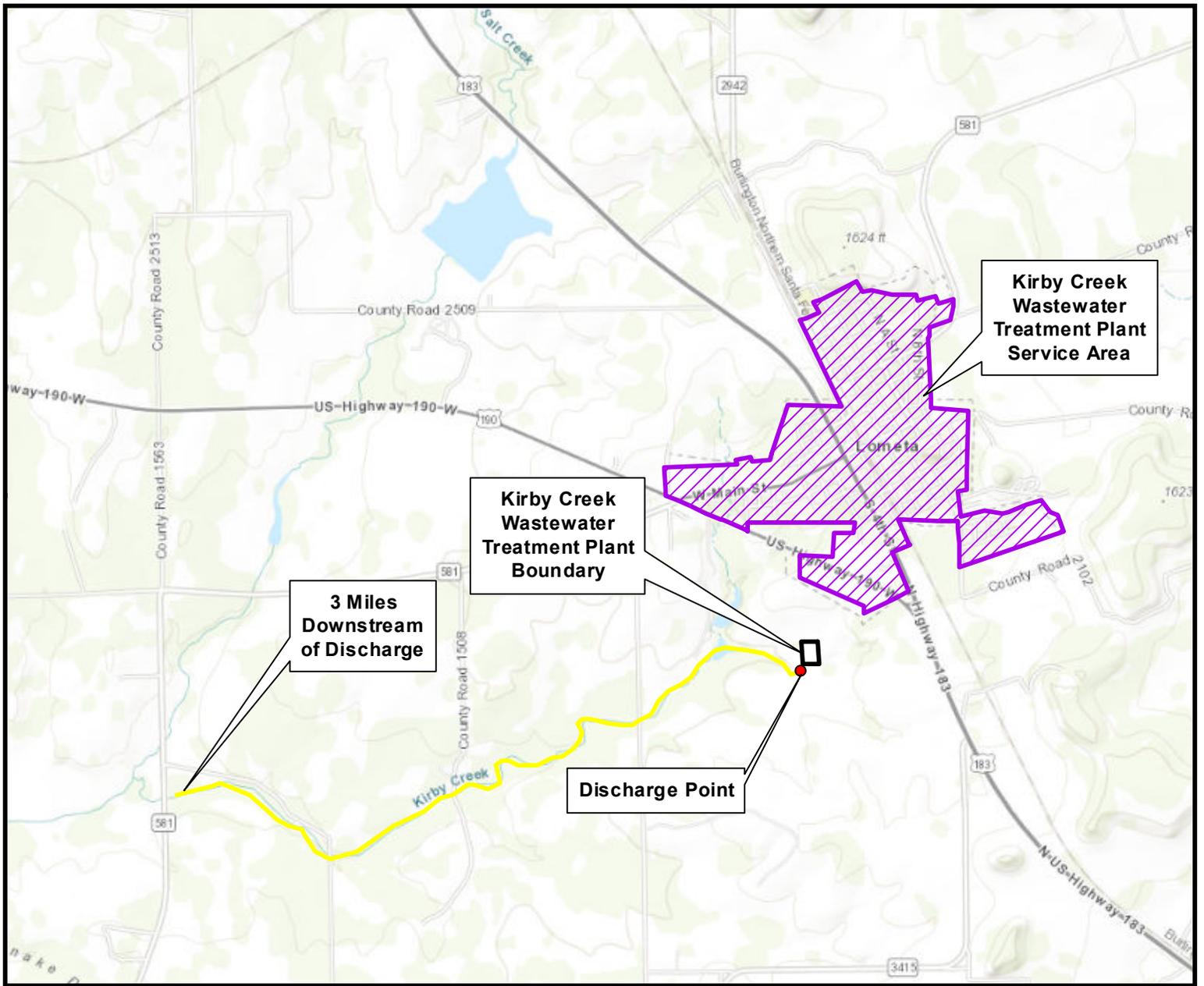


KIRBY CREEK WASTEWATER TREATMENT FLOW DIAGRAM

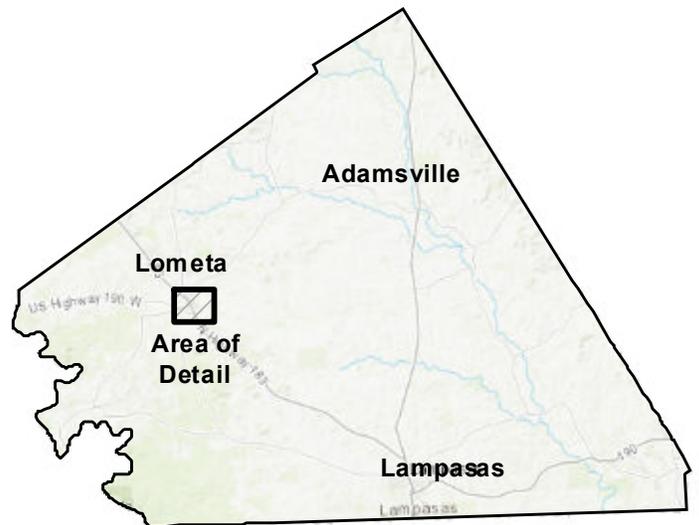
LAMPASAS COUNTY, TEXAS
2019

Kimley»Horn
2600 Via Fortuna, Terrace 1, Suite 300
Austin, TX 78746 512-646-2237
State of Texas Registration No. F-928

Attachment G
Site Drawing



**Corix Utilities
Kirby Creek
Wastewater Treatment Plant
Site Drawing**



Lampasas County, Texas

Attachment H
Sludge Processing Written Statement

GRANDY RANCH, LTD
PO BOX 817
KILLEEN, TEXAS
254-589-6014 / 254-589-6027
smvacuumandwaste@hotmail.com

Corix Utilities
302 US Hwy 183
Lometa, Texas 76853

May 9, 2024

To Whom It May Concern;

We will accept waste water treatment plant and water treatment plant bio-solids from the City of Lometa, Texas at our Texas Commission on Environmental Quality permitted Class B Beneficial Land Application Site located at 508 Jackrabbit Flat, Belton, Texas provided the bio-solids pass all required tests. Our permit number is WQ00004458000.

If any further information is needed, please let me know.

Sincerely;



David McGinnis
Managing Partner

Attachment I
Laboratory Results

BIO CHEM LAB, INC. PHONE: 254.829.8001 FAX: 254.829.8013
4751 TOKIO RD.WEST, TX 76691

ANALYTICAL REPORT**CLIENT IDENTIFICATION INFORMATION:**

CORIX UTILITIES TEXAS
P.O. BOX 140164
AUSTIN, TX 78714
CLIENT CONTACT: MR. DAVID MILLER
PHONE: 512-306-4001

AUGUST 2024 - LOMETA PERMIT RENEWAL

REPORT ID:	LOM-090924
LAB CONTACT:	SHAY OCHOA
REPORT DATE:	9.9.24

FIELD DATA / SAMPLE DESCRIPTION / METHOD

		EFFLUENT	EFFLUENT
Collection Point			
Date/ Time Collected		8.1.24 / 10:20	8.29.24 / 12:00
Date/ Time Received by Lab		8.1.24 / 17:05	8.29.24 / 16:30
Laboratory Sample ID		18374-24	20645-24
Sampling Description/Procedure		Client Collected	Client Collected
Sample Type		Grab	Grab
Sample Matrix		Aqueous-NPW	Aqueous-NPW
Collector		W. Bradley	W. Bradley
pH, SU	SM 4500-H+B	HT 7.3	--
Dissolved Oxygen, mg/L	SM 4500 O G	6.8	--
Total Residual Chlorine, mg/L	SM 4500 Cl G	1.8	--
Temperature C		23.7	--
Date / Time Analyzed	(Field Analysis)	8.1.24 / 14:35	--
Analyst Initials		CJA	--

PARAMETER / UNIT / METHOD

Nitrate, mg/L	EPA 300.0	--	47.4
Reporting Limit, mg/L		--	0.10
Dilution Factor		--	10
Date / Time Analyzed		--	8.29.24 / 20:24
Analyst Initials		--	AJ

CBOD₅, mg/L	SM 5210 B	Q B1 < 2
Reporting Limit, mg/L		2.
Dilution Factor		1
Date / Time Analyzed		8.1.24 / 19:00
Analyst Initials		AJ

TSS, mg/L	SM 2540 D	< 2
Reporting Limit, mg/L		2.
Dilution Factor		1
Date / Time Analyzed		8.6.24 / 09:30
Analyst Initials		MH

Sulfate, mg/L	EPA 300.0	27.7
Reporting Limit, mg/L		0.50
Dilution Factor		1
Date / Time Analyzed		8.8.24 / 09:39
Analyst Initials		AJ

Chloride, mg/L	EPA 300.0	103.
Reporting Limit, mg/L		0.10
Dilution Factor		10
Date / Time Analyzed		8.8.24 / 10:00
Analyst Initials		AJ

Total Dissolved Solids, mg/L	SM 2540 C	510.
Reporting Limit, mg/L		20.
Dilution Factor		1
Date / Time Analyzed		8.5.24 / 08:20
Analyst Initials		ARJ

BIO CHEM LAB, INC. PHONE: 254.829.8001 FAX: 254.829.8013
4751 TOKIO RD.. WEST, TX 76691

ANALYTICAL REPORTS**CLIENT IDENTIFICATION INFORMATION:**

CORIX UTILITIES TEXAS
P.O. BOX 140164
AUSTIN, TX 78714
CLIENT CONTACT: MR. DAVID MILLER
PHONE: 512-306-4001

AUGUST 2024 - LOMETA PERMIT RENEWAL

REPORT ID:	LOM-090924
LAB CONTACT:	SHAY OCHOA
REPORT DATE:	9.9.24

FIELD DATA / SAMPLE DESCRIPTION / METHOD

	EFFLUENT
Collection Point	
Date/ Time Collected	8.1.24 / 10:20
Date/ Time Received by Lab	8.1.24 / 17:05
Laboratory Sample ID	18375-24, 18376-24
Sampling Description/Procedure	Client Collected
Sample Type	Grab
Sample Matrix	Aqueous-NPW
Collector	W. Bradley

PARAMETER / UNIT / METHOD

TKN, mg/L	SM 4500 Norg B	1.34
Reporting Limit, mg/L		1.00
Dilution Factor		2
Date / Time Analyzed		8.6.24 / 18:30
Analyst Initials		SV

NH₃N, mg/L	SM 4500 NH ₃ B, D	< 0.10
Reporting Limit, mg/L		0.10
Dilution Factor		1
Date / Time Analyzed		8.1.24 / 21:10
Analyst Initials		SV

Total Phosphorus, mg/L	SM 4500 P B.5, E	3.91
Reporting Limit, mg/L		0.32
Dilution Factor		2
Date / Time Analyzed		8.5.24 / 15:00
Analyst Initials		LD

E. coli, MPN/100ml	SM 9223 B	< 1
Reporting Limit, MPN/100ml		1.
Dilution Factor		1
Date / Time Analyzed		8.1.24 / 17:25
Analyst Initials		MH

ANALYTICAL NOTES, INTERPRETATIONS, METHOD DEVIATIONS OR ENVIRONMENTAL CONDITIONS :

PH, DO, CHLORINE RESIDUAL AND TEMPERATURE READ BY LABORATORY PERSONNEL.

STATEMENT OF COMPLIANCE/NON-COMPLIANCE:

The above analytical data was derived from submitted samples that have met all established acceptance criteria, unless otherwise qualified, and are compliant with the laboratory's Quality System. The Director of Operations or designee has authorized the release of this report. The results contained herein relate only to the Laboratory Sample ID(s) documented above. This analytical test report may not be reproduced except in full, without the written approval of the laboratory.

Quality Assurance / Quality Control Data associated with results within this report are documented in the attached QA/QC Report.

Please contact 254.829.8001 with any questions or concerns.



A. Shay Ochoa, Senior Environmental Project Manager
Bio Chem Lab, Inc.



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PHONE: 512-306-4001

AUGUST 2024 - LOMETA PERMIT RENEWAL

REPORT ID: LOM-090924
LAB CONTACT: SHAY OCHOA
REPORT DATE: 9.9.24

QC SUMMARY**BIOCHEMICAL OXYGEN DEMAND SM 5210 B**

SETUP DATE	SETUP ID	BATCH ID	
8.1.24	B-080124-02	B-080124-02-01	
DUPLICATE	RESULT 1	RESULT 2	% DEV
18161-24	164	170	1.8
18310-24	685	633	3.9
BOD-BLANK	CBOD-BLANK	LCS -GGA	LCS-CGGA
0.01	0.11	174	Q2 166

TOTAL SUSPENDED SOLIDS SM 2540 D

SETUP DATE	SETUP ID	BATCH ID	
8.6.24	T-080624-03	T-080624-03-02	
SAMPLE ID:	RESULT 1	RESULT 2	% DEV
18457-24	5860	5820	0.3
BLANK, mg/L	<2	LCS % REC	95.7

SULFATE EPA 300

SETUP DATE	SEQUENCE ID		
8.7.24-8.8.24	IC-080724-05		
SAMPLE ID	RESULT 1	RESULT 2	RPD
18823-24	666	662	0.6
SPIKE ID:	RESULT 1	RESULT 2	% REC
18823-24	666	1676	101.0
IPCS-1 % REC:	98.0	IPCS-2 % REC:	92.3
LCS % REC:	96.2	LCSD % REC:	95.6
BLANK, mg/L:	<0.50		

CHLORIDE EPA 300

SETUP DATE	SEQUENCE ID		
8.7.24-8.8.24	IC-080724-05		
SAMPLE ID	RESULT 1	RESULT 2	RPD
18823-24	839	845	0.7
SPIKE ID:	RESULT 1	RESULT 2	% REC
18823-24	839	1877	103.8
IPCS-1 % REC:	101.7	IPCS-2 % REC:	97.9
LCS % REC:	100.0	LCSD % REC:	99.9
BLANK, mg/L:	<0.50		

NITRATE EPA 300

SETUP DATE	SEQUENCE ID		
8.29.24	IC-082924-17		
SAMPLE ID	RESULT 1	RESULT 2	RPD
14285	9.8	9.8	0.0
SPIKE ID:	RESULT 1	RESULT 2	% REC
20766-24	0.0	99.1	99.1
IPCS-1 % REC:	100.2	IPCS-2 % REC:	96.9
LCS % REC:	98.9	LCSD % REC:	100.4
BLANK, mg/L:	<0.01		

TOTAL DISSOLVED SOLIDS SM 2540 C

DATE	SETUP ID	BATCH ID	
8.5.24	DS-080524-01	DS-080524-01-01	
SAMPLE ID:	RESULT 1	RESULT 2	% DEV
17989-24	164	158	1.9
SPIKE ID:	RESULT 1	RESULT 2	% REC
18396-24	228	722	98.8
BLANK, mg/L	<20	LCS, %REC	90.8

BIO CHEM LAB, INC. PHONE: 254.829.8001 FAX: 254.829.8013
4751 TOKIO RD.. WEST, TX 76691

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CORIX UTILITIES TEXAS
P.O. BOX 140164
AUSTIN, TX 78714
CLIENT CONTACT: MR. DAVID MILLER
PHONE: 512-306-4001

AUGUST 2024 - LOMETA PERMIT RENEWAL

REPORT ID: LOM-090924
LAB CONTACT: SHAY OCHOA
REPORT DATE: 9.9.24

QC SUMMARY

TKN SM 4500 Norg B

SETUP DATE	SETUP ID	BATCH ID	
08.06.24	TKN-080624-02	TKN-080624-02-01	
SAMPLE ID:	RESULT 1:	RESULT 2:	% DEV
18130-24	110	107	1.4
18299-24	17.0	15.6	4.3
SPIKE ID:	RESULT 1:	RESULT 2:	% REC
18434-24	1.63	5.38	93.8
18434-24	1.63	5.12	87.3
BLANK, mg/L:	LCS % REC:	LCSD % REC:	
< 0.25	90.8	98.6	

NH3N SM 4500 NH3 B, D

SETUP DATE:	SETUP ID:	BATCH ID:	
08.01.24	N-080124-01	N-080124-01-01	
SAMPLE ID:	RESULT 1:	RESULT 2:	% DEV:
18025-24	23.5	23.6	0.2
18049-24	19.1	19.3	0.5
SPIKE ID:	RESULT 1:	RESULT 2:	% REC:
18057-24	0.04	1.91	93.4
18057-24	0.04	1.96	95.9
BLANK, mg/L:	LCS % REC:	LCSD % REC:	
< 0.05	102.0	101.4	

TOTAL PHOSPHORUS SM 4500 P B.5, E

SETUP DATE	SETUP ID	BATCH ID	
8.5.24	P-080524-01	P-080524-01-01	
SAMPLE ID	RESULT 1	RESULT 2	% DEV
17844-24	10.7	11.0	1.3
18124-24	5.35	5.53	1.7
SPIKE ID:	RESULT 1	RESULT 2	% REC
17941-24 Q3	11.92	11.94	2.5
17941-24 Q3	11.92	12.01	11.3
BLANK, as P:	LCS % REC:	LCSD % REC:	
< 0.08	93.3	93.3	

E. COLI SM 9223 B

SETUP DATE	SETUP ID	BATCH ID	
8.1.24	E-080124-01	E-080124-01-01	
DUPLICATE ID:	RESULT 1 :	RESULT 2 :	PRECISION
18271-24	<2	<2	0.00
BLANK, MPN	PRECISION RANGE		
<1	0.0-0.15		

FIELD METER CALIBRATION / VERIFICATION

ROUTE DATE	FIELD TEST	METHOD	ANALYST
8.1.24	pH	PROBE	CJA
BUFFER, SU	RESULT	8.00 LCS, SU	
7.00	7.00	DAILY INITIAL	7.99
10.00	10.01	DAILY FINAL	8.02
4.00	4.01	METER SLOPE,%	93.5

ROUTE DATE	FIELD TEST	METHOD	ANALYST
8.1.24	DO	PROBE	CJA
INTERNAL CAL VALUE, %		LCS READOUT, %	
98.0		97.7	

BIO CHEM LAB, INC. PHONE: 254.829.8001 FAX: 254.829.8013
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ANALYTICAL REPORTS**CLIENT IDENTIFICATION INFORMATION:**

CORIX UTILITIES TEXAS
P.O. BOX 140164
AUSTIN, TX 78714
CLIENT CONTACT: MR. DAVID MILLER
PHONE: 512-306-4001

AUGUST 2024 - LOMETA PERMIT RENEWAL

REPORT ID:	LOM-090924
LAB CONTACT:	SHAY OCHOA
REPORT DATE:	9.9.24

BCL PROJECT DATA QUALIFIERS:

- Q** Failed Quality Data. Refer to QA/QC Report of the affected data for specific details.
- Q1** Blank outside desired limits. Data accepted based on passing batch LCS recoveries.
- Q2** LCS recovery outside desired limits. Data accepted on basis of additional narrative if applicable
- Q3** Matrix Spike and/or Matrix Spike Duplicate outside desired limits. Data accepted on basis of passing LCS recoveries.
- QS3** Matrix Spike and/or Matrix Spike Duplicate outside desired limits. Sample not spiked at a high enough concentration to be statistically different from the native sample result. Data accepted on basis of passing LCS recoveries.
- Q4** Sample specific duplicate precision outside desired range.
- QM1** Microbiology precision unable to be evaluated due to low background concentration (< 10 CFU / MPN) of target analyte
- QM2** Microbiology precision unable to be evaluated due to high background concentration (> 2420 CFU / MPN) of target analyte
- QM3** Microbiology precision outside desired range.
- B1** Results for CBOD / BOD reported as less than [< 2 mg/L] with no sample dilution depleting method required 2.00 mg/L
- B2** Results for CBOD / BOD reported as an estimate due to no dilution meeting a method stated depletion criteria.
- B3** Result for CBOD / BOD unable to be determined due to excessive oxidant content, high chlorine residual.
- W1** Result is an average of multiple weighing / drying cycles.
- C** Reported result over the laboratory's calibration range
- C1** Reported result over the laboratory's calibration range but within the laboratory verified Linear Dynamic Range.
- J5** Reported result less than the laboratory reporting limit but greater than the Limit of Detection.
- ND** Not detected
- V** Additional sample volume would have been required to meet analytical method specifications.
- HT** Sample analysis performed outside method / regulatory prescribed holding time.
- T** Sample received outside method / regulatory prescribed requirements for thermal preservation.
- P** Sample received outside method / regulatory prescribed requirements for pH preservation.
- A** Accreditation for analysis performed is either not currently offered or is currently outside the laboratory's scope of accreditation.
- N** The associated analysis was performed by a network / sub-contract laboratory.
- L** Laboratory Error
- PW** Potable Water
- NPW** Non-Potable Water
- Z** Refer to additional notes / supplemental narrative

ADDITIONAL NOTES:

BIO CHEM LAB, INC. PHONE: 254.829.8001 FAX: 254.829.8013
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ANALYTICAL REPORTS

CLIENT IDENTIFICATION INFORMATION:

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P.O. BOX 140164
AUSTIN, TX 78714
CLIENT CONTACT: MR. DAVID MILLER
PHONE: 512-306-4001

AUGUST 2024 - LOMETA PERMIT RENEWAL	
REPORT ID:	LOM-090924
LAB CONTACT:	SHAY OCHOA
REPORT DATE:	9.9.24

Form.111.REV.0-2022
OFFICE NO.: 254.829.8001
FAX NO.: 254.829.8013
CELL NO.: 254.749.4320
EMERGENCY: 254.749.4320



BIO CHEM LAB, INC
PO BOX 356
4751 TOKIO ROAD
WEST, TX 76691-0356
E-MAIL: CUSTOMERSERVICE@BIOCHEMLABTX.COM

CLIENT / PROJECT: CORIX LOMETA
ADDRESS:
CONTACT: P.R.
PHONE NO.:
EMAIL:
SAMPLES COLLECTED BY: W. Bradley
FIELD DATA: pH 7.3 DO 6.8 TEMP 23.7
FLOW: DATE / TIME / INITIALS 8/12/24 1435 CJA

Sample ID Laboratory Use Only	Obs Temp °C	Corr Temp °C	Sample Name, Site Description or Case Number	Collection		Matrix	Container No. / Volume / Type	Grab / Composite	Preservation Code	Verified	Analysis Requested
				Date	Time						
18374-24	64	65	EFFLUENT	8/1/24	1020	NPW	12000/P	GRAB	1	1.0	CBOD, TSS, SS, CI, ND3, TD,
18375-24							11000/P		2		TKN, NH3-N, Phosphorus
18376-24							1150/P				ECOL

PROJECT COMMENTS / SAMPLING PROCEDURES: ROTATE AUTO SAMPLER BLANK EACH MONTH

LABORATORY COMMENTS:

TRC - 1.75 8/12/24 1435 CJA

DATE	TIME	RELINQUISHED BY:	DATE	TIME	RECEIVED BY:	PLACED IN REFRIGERATOR / INITIALS (FRIDGE ID)
8/1/24	1430	W. Bradley	8/1/24	1430	CJA	
8/1/24	1705	CJA	8/1/24	1705	CJA	CJA STRY

Documentation of TRC / Min Correction, as needed:

PRESERVATIVE REAGENT ID
H₂SO₄ 13911
HNO₃
HCl
NA-OH
NA-THIO
OTHER:

Matrix: AQ - Aqueous NPW - Non-Potable Water S - Sludge/Soil/Sediment PW - Potable Water
Container: P - Plastic AP - Amber Plastic G - Clear Glass AG - Amber Glass M - Bact / MICRO B - Whirl Pak / BAG VOA - 40 mL vial O - OTHER Describe:
pH STRIPS: (0-6) 7.05 1-57 (7.5-14):
CUSTODY SEALS: COOLER CONTAINERS MAINO
SEALS INTACT: YES NO

ADDITIONAL PRESERVATION / SAMPLE INTEGRITY NOTES:
REQUESTED TAT: STANDARD (7-10 DAYS) BCL EXPRESS (5-5 DAYS) (1.25X) BCL PRIORITY (3-4 DAYS) (1.5X) BCL FIRE (1-2 DAYS) (2.0X) Rush service availability may depend on logistics and method.

BIO CHEM LAB, INC. PHONE: 254.829.8001 FAX: 254.829.8013
4751 TOKIO RD.WEST, TX 76691

ANALYTICAL REPORT

CLIENT IDENTIFICATION INFORMATION:

CORIX UTILITIES TEXAS
P.O. BOX 140164
AUSTIN, TX 78714
CLIENT CONTACT: MR. DAVID MILLER
PHONE: 512-306-4001

AUGUST 2024 - LOMETA PERMIT RENEWAL

REPORT ID: LOM-090924
LAB CONTACT: SHAY OCHOA
REPORT DATE: 9.9.24



OFFICE NO.: 254.829.8001
FAX NO.: 254.829.8013
CELL NO.: 254.749.4320
EMERGENCY: 254.749.4320



PO BOX 356
4751 TOKIO ROAD
WEST, TX 76691-0356
E-MAIL: CUSTOMERSERVICE@BIOCHEMLAB.COM

CLIENT / PROJECT: CORIX UTILITIES
ADDRESS: 1622 CR 2509
LOMETA TX 76853
SERVICE: VISIT COMMUNITY COMMITTEE
CONTACT: GORAN BRONSSAHO
PHONE NO.: 512 663 6819
EMAIL: g.bronssah@corix.texas.gov
COLLECTED BY: WENDELL BRADLEY
FIELD DATA: PH DO TEMP
DATE/TIME: 8/29/24

Sample ID #	Laboratory Use Only	Obs Temp °C	Corr Temp °C	Sample Name, Site Description or Case Number	Collection		Container No. / Volumes / Type	Matrix	Grab / Composite	Preservation Code	Verified	Analysis Requested
					Date	Time						
20646-24	6.3	6.4		DECANT	8-29-24	1000	E	P-1000	Comp	1		TSS
20645-24	J	J		WASTEWATER	8-29-24	1200	E	P-2000	Comp	1		TSS/BOD
20647-24				CA								NO/NO

PROJECT COMMENTS / SAMPLING PROCEDURES:

LABORATORY COMMENTS:

Documentation of TRC / In Correction, as needed:

DATE	TIME	RELINQUISHED BY:	DATE	TIME	RECEIVED BY:	PLACED IN REFRIGERATOR / INITIALS (FRIDGE ID)
8/29/24	1430	W. Bradley	8/29/24	1430	COE	
8/29/24	1630	COE	8/29/24	1630	COE	CA-1A-1

Matrix: AG - Aqueous NPW - Non-Potable Water S - Sludge/Sol/Sediment PW - Potable Water
 Container: P - Plastic AP - Amber Plastic G - Clear Glass AG - Amber Glass W - Bad / MICRO B - Bad / MICRO
 pH STRIPS: (0-6)
 ADDITIONAL PRESERVATION / SAMPLE INTEGRITY NOT ES:
 REQUESTED TAT: STANDARD (7-10 DAYS) BCL EXPRESS (2-4 DAYS) BCL PRIORITY (2-4 DAYS) (1 DAY) BCL FRESH (1-3 DAYS) (2-3) Wash bottles availability may depend on lab status and stock.

LABORATORY COMMENTS: PRESERVATIVE REAGENT ID H₂SO₄ HNO₃ HC: NaOH Na-THIO OTHER: THERMOMETER ID: TRA
 (1) acid to pH 2 (2) H₂SO₄ to pH 2 (3) HNO₃ to pH 2 (4) H₂SO₄ to pH 2 (5) Na-THIO (6) NaOH to pH 12 (7) None requested (8) Other, as noted
 CUSTODY SEALS: COOLER CONTAINERS: NUMERO SEALS INTACT: YES NO

Domestic Worksheet 2.0 – Form 10054

DOMESTIC TECHNICAL REPORT WORKSHEET 2.0

RECEIVING WATERS

The following is required for all TPDES permit applications

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

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

Yes No

If yes, provide the following:

Owner of the drinking water supply:

Distance and direction to the intake:

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

Attachment: N/A

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

Does the facility discharge into tidally affected waters?

Yes No

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

A. Receiving water outfall

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

B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

Yes No

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

<u>N/A</u>

C. Sea grasses

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

Yes No

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

N/A

Section 3. Classified Segments (Instructions Page 73)

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

Yes No

If yes, this Worksheet is complete.

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

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

Name of the immediate receiving waters: Kirby 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:

Average depth of the entire water body, in feet:

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

- Man-made Channel or Ditch

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

B. Flow characteristics

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

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

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

- USGS flow records
- Historical observation by adjacent landowners
- Personal observation
- Other, specify:

C. Downstream perennial confluences

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

N/A

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.

3 stock tanks downstream

E. Normal dry weather characteristics

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

Shallow, brush lined

Date and time of observation: 12/13/19 (10:00 am)

Was the water body influenced by stormwater runoff during observations?

Yes No

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

A. Upstream influences

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

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

B. Waterbody uses

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

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

Domestic water supply

Industrial water supply

Park activities

Other(s), specify

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

Candice Calhoun

From: Werner, Siena <Siena.Werner@kimley-horn.com>
Sent: Thursday, September 26, 2024 2:58 PM
To: Candice Calhoun
Cc: Jensen, Sierra; Brandon Maldonado; Zamsky, Alison
Subject: RE: Application to Renew Permit No. WQ0011982001 - Notice of Deficiency Letter

Follow Up Flag: Follow up
Flag Status: Completed

Good afternoon Candice,

Thank you for the clarification.

1. Yes this should be private. We will update Administrative Report 1.0
2. We've downloaded the transfer application and are working on completing it now. We will submit that and any other documents with the correct name. We will also make the necessary changes on the CDF.

I know our original deadline for responses was September 30th, but now that we'll have to route the transfer application for signatures and correct the owner's name throughout the permit, is it possible to get an extension on this deadline?

Thank you,

Siena Werner, EIT
Kimley-Horn | 5301 Southwest Parkway, Building 2, Suite 100, Austin, TX 78735
Direct: 737-787-7618

From: Candice Calhoun <Candice.Calhoun@tceq.texas.gov>
Sent: Tuesday, September 24, 2024 2:29 PM
To: Werner, Siena <Siena.Werner@kimley-horn.com>
Cc: Jensen, Sierra <Sierra.Jensen@kimley-horn.com>; Brandon Maldonado <Brandon.Maldonado@tceq.texas.gov>; Zamsky, Alison <Alison.Zamsky@kimley-horn.com>
Subject: RE: Application to Renew Permit No. WQ0011982001 - Notice of Deficiency Letter

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

Good afternoon, Ms. Werner,

Thank you, your response to items 3 and 4 of the NOD is sufficient. We need a bit more information for items 1, 2 and 3. Please see below:

1. Administrative Report 1.0 – Section 2, item a – The authorization type listed as “Conventional Wastewater Treatment” is incorrect and should be listed as “Conventional Water Treatment”. Our team is working on updating the application to include the correct authorization type. For this item in the NOD, our records indicate the permit is publicly owned yet as a corporation, it should be listed as privately owned. I just need clarification from you if privately owned is the correct authorization type.

2. CDF-Section III, item 7-8 – I could not locate the corporation with the state tax ID provided. I was able to locate it with the filing number provided, yet SOS shows the name changed from “Corix Utilities (Texas) Inc.” to “Utilities, Inc. of Texas” as of July 26, 2024. Our records must match exactly to the SOS and CPA databases. Since the name was changed with SOS, the name will need to be changed with us as well, which requires a Transfer Application.

Section II, Item 11 – The type of customer marked is incorrect. SOS database shows this to be a Corporation. Please correct the CDF.

Please let me know if you have any questions.

Regards,



Candice Calhoun

Texas Commission on Environmental
Quality

Water Quality Division

512-239-4312

candice.calhoun@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at
www.tceq.texas.gov/customersurvey

From: Werner, Siena <Siena.Werner@kimley-horn.com>

Sent: Monday, September 23, 2024 5:25 PM

To: Candice Calhoun <Candice.Calhoun@tceq.texas.gov>

Cc: Jensen, Sierra <Sierra.Jensen@kimley-horn.com>; Brandon Maldonado <Brandon.Maldonado@tceq.texas.gov>;
Zamsky, Alison <Alison.Zamsky@kimley-horn.com>

Subject: RE: Application to Renew Permit No. WQ0011982001 - Notice of Deficiency Letter

Good afternoon Candice,

Updated forms and comment responses are attached to this email.

For Administrative Report 1.0, Section 2 Item a, could you provide some context on the different authorization types? Specifically the difference between Privately-Owned Domestic Wastewater and Conventional Wastewater treatment?

Please let me know if you have any questions or concerns with the revised documentation.

Thank you,

Siena Werner, EIT

Kimley-Horn | 5301 Southwest Parkway, Building 2, Suite 100, Austin, TX 78735

Direct: 737-787-7618

Candice Calhoun

From: Werner, Siena <Siena.Werner@kimley-horn.com>
Sent: Monday, September 23, 2024 5:25 PM
To: Candice Calhoun
Cc: Jensen, Sierra; Brandon Maldonado; Zamsky, Alison
Subject: RE: Application to Renew Permit No. WQ0011982001 - Notice of Deficiency Letter
Attachments: 03_10400_CoreDataForm.pdf; Municipal Discharge Renewal Spanish NORI.docx; 02_10053_Admin_Report.pdf; 20240923_Kirby TCEQ NOD Response.pdf

Follow Up Flag: Follow up
Flag Status: Completed

Good afternoon Candice,

Updated forms and comment responses are attached to this email.

For Administrative Report 1.0, Section 2 Item a, could you provide some context on the different authorization types? Specifically the difference between Privately-Owned Domestic Wastewater and Conventional Wastewater treatment?

Please let me know if you have any questions or concerns with the revised documentation.

Thank you,

Siena Werner, EIT
Kimley-Horn | 5301 Southwest Parkway, Building 2, Suite 100, Austin, TX 78735
Direct: 737-787-7618

From: Candice Calhoun <Candice.Calhoun@tceq.texas.gov>
Sent: Monday, September 16, 2024 3:08 PM
To: Werner, Siena <Siena.Werner@kimley-horn.com>
Cc: Jensen, Sierra <Sierra.Jensen@kimley-horn.com>; Brandon Maldonado <Brandon.Maldonado@tceq.texas.gov>
Subject: Application to Renew Permit No. WQ0011982001 - Notice of Deficiency Letter
Importance: High

Dear Ms. Werner, E.I.T.,

The attached Notice of Deficiency (NOD) letter sent on **September 16, 2024**, requests additional information needed to declare the application administratively complete. Please send complete response to my attention by **September 30, 2024**.

Please let me know if you have any questions.

Regards,



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

Section 1. Application Fees (Instructions Page 26)

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

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

Minor Amendment (for any flow) \$150.00

Payment Information:

Mailed Check/Money Order Number:
 Check/Money Order Amount:
 Name Printed on Check:
 EPAY Voucher Number: 720552
 Copy of Payment Voucher enclosed? Yes (Attachment A)

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



September 23, 2024

Candice Calhoun
Texas Commission on Environmental Quality
Applications Review and Processing Team (MC 148)
Water Quality Division
12100 Park 35 Circle
Austin, Texas 78753

**RE: Application for Renewal Permit No. WQ0011982001
To be Issued to Corix Utilities (Texas), Inc. EPA ID: (TX0074888)
CN604520213, RN102080132**

Dear Candice Calhoun,

Thank you for reviewing the permit application and informing us of the additional information needed in the Notice of Deficiency letter dated September 23, 2024. The responses to your comments are as follows:

1. Authorization type has been corrected to Conventional Wastewater Treatment.
2. State Tax ID has been updated to match the Legal name and SOS/CPA filing number. Customer type has been updated to "Other: Investor Owned".
3. The NORI in item 2 has been reviewed and should be written as follows:

Corix Utilities (Texas) Inc., P.O. Box 140164, Austin, Texas 78714, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0011982001 (EPA I.D. No. TX0074888) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 100,000 gallons per day. The domestic wastewater treatment facility is located at 897 West U.S. Highway 190, in the city of Lometa, in Lampasas County, Texas 76853. The discharge route is from the plant site to Kirby Creek; thence to Salt Creek; thence to Colorado River Above Lake Buchanan. TCEQ received this application on September 11, 2024. The permit application will be available for viewing and copying at Lometa City Hall, front desk, 100 East San Saba Street, Lometa, in Lampasas County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

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

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-98.396666,31.204444&level=18>

Further information may also be obtained from Corix Utilities (Texas) Inc. at the address stated above or by calling Ms. Siena Werner, E.I.T., Kimley-Horn and Associates, Inc., at **787-737-7618**.

4. The Spanish translation to the NORI is included as a Microsoft Word document.



You may contact me with any requests or questions at siena.werner@kimley-horn.com or by phone at 787-737-7618.

Sincerely,

KIMLEY-HORN AND ASSOCIATES, INC.

Texas Firm No. 928

A handwritten signature in blue ink that reads "Siena Werner". The signature is fluid and cursive, with a long horizontal stroke at the end.

Siena Werner, EIT
Project Manager



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.)		
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input checked="" type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input type="checkbox"/> Other
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 604520213		RN 102080132

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)		7/26/2024	
<input type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership <input checked="" type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
Utilities, Inc. of Texas					
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID	10. DUNS Number (if applicable)
801600117		19903766756		(9 digits) 990376675	079168047
11. Type of Customer:		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		<input checked="" type="checkbox"/> Other: Investor Owned	
12. Number of Employees				13. Independently Owned and Operated?	
<input type="checkbox"/> 0-20 <input checked="" type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other: <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
15. Mailing Address:		P.O. Box 140164			
City		Austin		State	TX
ZIP		78714		ZIP + 4	
16. Country Mailing Information (if outside USA)				17. E-Mail Address (if applicable)	
				Bobby.Hicks@nexuswg.com	
18. Telephone Number			19. Extension or Code		20. Fax Number (if applicable)

SECTION III: Regulated Entity Information

21. General Regulated Entity Information <i>(If 'New Regulated Entity' is selected, a new permit application is also required.)</i>							
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information							
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>							
22. Regulated Entity Name <i>(Enter name of the site where the regulated action is taking place.)</i>							
Lometa Kirby Creek Wastewater Treatment Plant							
23. Street Address of the Regulated Entity: <i>(No PO Boxes)</i>		897 U.S. 190					
City	Lometa	State	TX	ZIP	76853	ZIP + 4	
24. County	Lampasas						

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

25. Description to Physical Location:							
26. Nearest City				State		Nearest ZIP Code	
Lometa				TX		76853	
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>							
27. Latitude (N) In Decimal:		31.205626		28. Longitude (W) In Decimal:		-98.396859	
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		4900		22132		221320	
33. What is the Primary Business of this entity? <i>(Do not repeat the SIC or NAICS description.)</i>							
Water and Wastewater Utility							
34. Mailing Address:		P.O. Box 140164					
City	Austin	State	TX	ZIP	78714	ZIP + 4	
35. E-Mail Address:		Bobby.Hicks@nexuswg.com					
36. Telephone Number			37. Extension or Code		38. Fax Number <i>(if applicable)</i>		
(512) 306-4000					(512) 339-809		

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

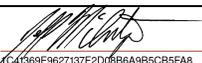
<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review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

SECTION IV: Preparer Information

40. Name:	Siena Werner	41. Title:	Project Manager
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(787) 737-7618		() -	Siena.werner@kimley-horn.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:	Utilities, Inc. of Texas	Job Title:	President
Name (In Print):	Jeffrey L. McIntyre	Phone:	(281) 207-5931
Signature:	 <small>7C41369F9627137F2D09B6A985C8B5FA8 contractworks</small>	Date:	10/29/2024



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Utilities, Inc. of Texas

PERMIT NUMBER (If new, leave blank): WQ0011982001

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

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

For TCEQ Use Only

Segment Number _____ County _____
 Expiration Date _____ Region _____
 Permit Number _____

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 11982001

EPA I.D. (TPDES only): TX 0074888

Expiration Date: 1 December 2024

Section 3. Facility Owner (Applicant) and Co-Applciant 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?

Utilities, Inc. of Texas

(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: 604520213

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: Barker, Darrin

Title: President

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

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

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

N/A

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

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

CN: N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

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

C. Core Data Form

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

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: Miss. Last Name, First Name: Werner, Siena
Title: Engineer Credential: EIT
Organization Name: Kimley-Horn and Associates, Inc.
Mailing Address: 5301 Southwest Parkway, Building 3, Suite 100 City, State, Zip Code: Austin, TX,
Phone No.: +1 737-787-7618 E-mail Address: Siena.Werner@kimley-horn.com
Check one or both: Administrative Contact Technical Contact
- B. Prefix: Ms. Last Name, First Name: Jensen, Siera
Title: Engineer Credential: P.E.
Organization Name: Kimley Horn and Associates, Inc
Mailing Address: 5301 Southwest Parkway, Building 2 Suite 100 City, State, Zip Code: Austin, TX, 78735
Phone No.: 512-271-6324 E-mail Address: sierra.jensen@kimley-horn.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: Robert Hicks
Title: Director, State Operations Credential: Click to enter text.
Organization Name: Utilities, Inc. of Texas

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 C – Plain Language Summary

G. Public Involvement Plan Form

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

Attachment: N/A

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

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 102080132

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):

Lometa Kirby Creek Wastewater Treatment Plant

C. Owner of treatment facility: Utilities, Inc. of Texas

Ownership of Facility: Public Private Both Federal

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

Prefix: Click to enter text. Last Name, First Name: Click to enter text.

Title: Click to enter text. Credential: Click to enter text.

Organization Name: Utilities, Inc. of Texas

Mailing Address: P.O. Box 140164 City, State, Zip Code: Austin, TX, 78714

Phone No.: N/A E-mail Address: N/A

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

Attachment: N/A

E. Owner of effluent disposal site:

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

Section 10. TPDES Discharge Information (Instructions Page 31)

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

Yes No

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

N/A

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

Yes No

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

Click to enter text.

City nearest the outfall(s): Lometa, Texas

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

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

TEXAS SECRETARY of STATE
JANE NELSON

BUSINESS ORGANIZATIONS INQUIRY - VIEW ENTITY

Filing Number: 801600117 **Entity Type:** Foreign For-Profit Corporation
Original Date of Filing: May 21, 2012 **Entity Status:** In existence
Formation Date: N/A
Tax ID: 19903766756 **FEIN:**
Name: Utilities, Inc. of Texas
Address: 2150 Town Square Place Suite 400
Sugar Land, TX 77479 USA
Fictitious Name: N/A
Jurisdiction: DE, USA
Foreign Formation Date: March 30, 2012

REGISTERED AGENT	FILING HISTORY	NAMES	MANAGEMENT	ASSUMED NAMES	ASSOCIATED ENTITIES	INITIAL ADDRESS
Name						Inactive Date
CAPITOL CORPORATE SERVICES, INC.		1501 S MOPAC EXPY STE 220 Austin, TX 78746 USA				

Instructions:

 To place an order for additional information about a filing press the 'Order' button.