

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



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



SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

DOMESTIC WASTEWATER TPDES RENEWAL APPLICATION

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

The City of Winfield (CN600657308) operates the City of Winfield Wastewater Treatment Plant (RN102075397), an activated sludge process plant. The facility is located at approx. 1688 feet northwest of the intersection of Interstate 30 West and County Road 1065, in the City of Winfield, Titus County, Texas 75493. This application is for a renewal to discharge an average of 84,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand ($CBOD_5$), total suspended solids (TSS), ammonia nitrogen (NH_3 -N) and Escherichia coli. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, aeration basins, final clarifiers, sludge digesters, sludge drying beds and a chlorine contact chamber.

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

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

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

La Ciudad de Winfield (CN600657308) opera La Planta de Tratamiento de Aguas Residuales de la Ciudad de Winfield (RN102075397), una Planta de proceso de lodos activados. La instalación está ubicada en aprox. 1688 pies al Noroeste de la intersection de la Interestatal 30 Oeste y County Road 1065, en La Ciudad de Winfield, Condado de Titus, Texas 75493. Esta solicitud es para una renovación que autoriza la descarga de 84,000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan Demanda bioquímica de oxígeno carbonáceo de cinco días (CBOD₅), sólidos suspendidos totales (SST), nitrógeno amoniacal (NH₃-N) y Escherichia coli. Contaminantes potenciales adicionales se incluyen en el Informe Técnico Doméstico 1.0, Sección 7. Aguas residuales domésticas. está tratado por Una planta de proceso de lodos activados, y las unidades de tratamiento incluyen una reja de desbaste, tanques de aireación, clarificadores finales, digestores de lodos, lechos de secado de lodos y una cámara de contacto con cloro..



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

PERMIT NO. WQ0012146001

APPLICATION. City of Winfield, P.O. Box 98, Winfield, Texas 75493, has applied to the Texas Commission on Environmental Quality (TCEQ to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0012146001 (EPA I.D. No. TX0079782) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 84,000 gallons per day. The domestic wastewater treatment facility is located approximately 1,688 feet northwest of the intersection of Interstate 30 West and County Road 1065, in the city of Winfield, in Titus County, Texas 75493. The discharge route is from the plant site to an unnamed tributary; thence to Smith Creek; thence to Lake Monticello; thence to Lake Bob Sandlin. TCEQ received this application on October 27, 2025. The permit application will be available for viewing and copying at Winifield City Hall, 106 West 6th Street, in Titus County, Texas prior to the date this notice is published in the newspaper. The application is available for viewing and copying at the following webpage:

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

https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.103055,33.161666&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 countywide mailing list and to those who are on the mailing list for this application. That notice will contain the deadline for submitting public comments.

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

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

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

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

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

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

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

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

INFORMATION AVAILABLE ONLINE. For details about the status of the application, visit the Commissioners' Integrated Database at www.tceq.texas.gov/goto/cid. Search the database using the permit number for this application, which is provided at the top of this notice.

AGENCY CONTACTS AND INFORMATION. All public comments and requests must be submitted either electronically at https://www14.tceq.texas.gov/epic/eComment/, or in writing to the Texas Commission on Environmental Quality, Office of the Chief Clerk, MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Please be aware that any contact information you provide, including your name, phone number, email address and physical address will become part of the agency's public record. For more information about this permit application or the permitting process, please call the TCEQ Public Education Program, Toll Free, at 1-800-687-4040 or visit their website at www.tceq.texas.gov/goto/pep. Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from City of Winfield at the address stated above or by calling Ms. Tonya Woods, City Secretary, at 903-524-2020.

Issuance Date: November 7, 2025

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO NO. WQ0012146001

SOLICITUD. Ciudad de Winfield, PO Box 98, Winfield, Texas 75493, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQ0012146001 (EPA I.D. No. TX 0079782) 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 84,000 galones por día. La planta está ubicada aproximadamente 1,688 pies al noroeste de la intersección de la Interestatal 30 West y County Road 1065, en la ciudad de Winfield, en el Condado de Titus, Texas 75493. La ruta de descarga es del sitio de la planta a afluente sin nombre; de allí a Smith Creek; de allí al lago Monticello; de allí al lago Bob Sandlin. La TCEQ recibió esta solicitud el 27 de octubre de, 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Ayuntamiento de Winfield, 102 West 6th Street, en el condado de Titus, Texas antes de la fecha de publicación de este aviso en el periódico. La aplicación está disponible para su visualización y copia en la siguiente página web:

https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.103055,33.161666&level=18

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

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

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

OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO. Después del plazo para presentar comentarios públicos, el Director Ejecutivo considerará todos los comentarios apropiados y preparará una respuesta a todo los comentarios públicos esenciales, pertinentes, o significativos. A menos que la solicitud haya sido referida directamente a una audiencia administrativa de lo contencioso, la respuesta a los comentarios y la decisión del Director Ejecutivo sobre la solicitud serán enviados por correo a todos los que presentaron un comentario público y a las personas que están en la lista para recibir avisos sobre esta solicitud. Si se reciben comentarios, el aviso también proveerá instrucciones para pedir una reconsideración de la decisión del Director Ejecutivo y para pedir una audiencia administrativa de lo contencioso. Una audiencia administrativa de lo contencioso es un procedimiento legal similar a un procedimiento legal civil en un tribunal de distrito del estado.

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

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión.

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

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

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

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

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

También se puede obtener información adicional del City of Winfield a la dirección indicada arriba o llamando a Ms. Tonya Woods, City Secretary, al (903) 524-2020.

Fecha de emisión: 7 de noviembre de 2025

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT	NAME:	City of	Winfiel	<u>d</u>	

PERMIT NUMBER (If new, leave blank): WQ0012146001

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

	Y	N		\mathbf{Y}	N
Administrative Report 1.0	\boxtimes		Original USGS Map	\boxtimes	
Administrative Report 1.1		\boxtimes	Affected Landowners Map		\boxtimes
SPIF	\boxtimes		Landowner Disk or Labels		\boxtimes
Core Data Form	\boxtimes		Buffer Zone Map		\boxtimes
Summary of Application (PLS)	\boxtimes		Flow Diagram		
Public Involvement Plan Form			Site Drawing	\boxtimes	
Technical Report 1.0	\boxtimes		Original Photographs		\boxtimes
Technical Report 1.1			Design Calculations		\boxtimes
Worksheet 2.0	\boxtimes		Solids Management Plan		\boxtimes
Worksheet 2.1			Water Balance		\boxtimes
Worksheet 3.0		\boxtimes			
Worksheet 3.1		\boxtimes			
Worksheet 3.2					
Worksheet 3.3					
Worksheet 4.0					
Worksheet 5.0					
Worksheet 6.0	\boxtimes				
Worksheet 7.0		\boxtimes			
For TCEQ Use Only					

Permit Number _____

Segment Number _____County _____ Expiration Date _____Region_____

S COMMISSION OZ

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

Section 1. Application Fees (Instructions Page 26)

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

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

Minor Amendment (for any flow) \$150.00 □

Payment	Informa	tion:
I MATHETIC	IIII OI IIII	

Mailed Check/Money Order Number: 15572

Check/Money Order Amount: 515.00

Name Printed on Check: City of Winfield

EPAY Voucher Number:

Copy of Payment Voucher enclosed? Yes

Section 2. Type of Application (Instructions Page 26)

		•					
a.	Che	ck the box next to the appropriate authorization type					
	\boxtimes	Publicly Owned Domestic Wastewater					
		Privately-Owned Domestic Wastewater					
	☐ Conventional Water Treatment						
b.	Che	ck the box next to the appropriate facility status.					
	\boxtimes	Active Inactive					

C.	Che	ck the box next to the appropriate permit	type.	
	\boxtimes	TPDES Permit		
		TLAP		
		TPDES Permit with TLAP component		
		Subsurface Area Drip Dispersal System (SADDS)	
d.	Che	eck the box next to the appropriate applica	ation typ	e
		New		
		Major Amendment <u>with</u> Renewal		Minor Amendment with Renewal
		Major Amendment <u>without</u> Renewal		Minor Amendment without Renewal
	\boxtimes	Renewal without changes		Minor Modification of permit
a.	For	amendments or modifications, describe t	he propo	sed changes:
b.	For	existing permits:		
		mit Number: WQ00 <u>12146001</u>		
		A I.D. (TPDES only): TX <u>0079782</u>		
	Exp	oiration Date: <u>May 11, 2026</u>		
Se	ectio		it) and	Co-Applicant Information
		(Instructions Page 26)		(1997) · · · · · · · · · · · · · · · · · · ·
A.	The	e owner of the facility must apply for the	e permit	
	Wh	at is the Legal Name of the entity (applica	nt) apply	ing for this permit?
	<u>City</u>	y of Winfield		
		ne legal name must be spelled exactly as file legal documents forming the entity.)	ed with t	he Texas Secretary of State, County, or in
	If the You	he applicant is currently a customer with a may search for your CN on the TCEQ we	the TCEC bsite at <u>l</u>), what is the Customer Number (CN)? http://www15.tceq.texas.gov/crpub/
		CN: <u>600657308</u>		
		at is the name and title of the person sign ecutive official meeting signatory requirem		
		Prefix: The Honorable Last Nat	ne First	Name: Cruitt, Debbie

Prenx: The Honorable

Title: Mayor

Credential:

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:

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

Prefix:

Last Name, First Name:

Title:

Credential:

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

C. Core Data Form

Complete the Core Data Form for each customer and include as an attachment. If the customer type selected on the Core Data Form is **Individual**, complete **Attachment 1** of Administrative Report 1.0. $\underline{N/A}$

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Ms.

Last Name, First Name: Woods, Tonya

Title: <u>City Secretary</u>

Credential:

Organization Name: City of Winfield

Mailing Address: P.O. Box 98

City, State, Zip Code: Winfield, TX, 75493

Phone No.: 903-524-2020

E-mail Address: twoods@winfieldtx.com

Check one or both:

□ Administrative Contact

B. Prefix: Mr.

Last Name, First Name: Moran, James

Title: Public Works Director

Credential:

Organization Name: City of Winfield

Mailing Address: P.O. Box 98

City, State, Zip Code: Winfield, TX, 75493

Phone No.: 903-524-2020

E-mail Address:twoods@winfieldtx.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: Ms.

Last Name, First Name: Cruitt, Debbie

Title: Mayor

Credential:

Organization Name: City of Winfield

Mailing Address: P.O. Box 98

City, State, Zip Code: Winfield, TX, 75493

Phone No.: 903-524-2020

E-mail Address: dcruitt@icloud.com

B. Prefix: Ms.

Last Name, First Name: Woods, Tonya

Title: City Secretary

Credential:

Organization Name: City of Winfield

Mailing Address: P.O. Box 98

City, State, Zip Code: Winfield, TX, 75493

Phone No.: <u>903-524-2020</u>

E-mail Address: <u>twoods@winfieldtx.com</u>

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Ms.

Last Name, First Name: Cruitt, Debbie

Title: Mayor

Credential:

Organization Name: City of Winfield

Mailing Address: P.O. Box 98

City, State, Zip Code: Winfield, TX, 75493

Phone No.: <u>903-524-2020</u>

E-mail Address: dcruitt@icloud.com

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

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

Prefix: Mr.

Last Name, First Name: Price, Tony

Title: WWTP Operator

Credential:

Organization Name: City of Winfield

Mailing Address: P.O. Box 98

City, State, Zip Code: Winfield, TX, 75493

Phone No.: <u>903-434-3164</u>

E-mail Address: tiprice360@gmail.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Ms.

Last Name, First Name: Woods, Tonya

Title: City Secretary

Credential:

Organization Name: City of Winfield

Mailing Address: P.O. Box 98

City, State, Zip Code: Winfield, TX, 75493

Phone No.: 903-524-2020

E-mail Address: twoods@winfieldtx.com

	Pac	ckage							
	Indicate by a check mark the preferred method for receiving the first notice and instructions:								
	\boxtimes	E-mail	Address						
		Fax							
		Regula	ır Mail						
C.	Co	ntact pe	rmit to be	listed	in the Noti	ces			
	Pre	efix: <u>Ms.</u>			Last N	lame, First Name	e: <u>Woods, Tonya</u>		
	Tit!	le: <u>City S</u>	ecretary		Crede	ntial:			
	Org	ganizati	on Name: <u>C</u>	ity of V	<u>Winfield</u>				
	Ma	iling Ad	dress: <u>P.O. </u>	Box 98	<u>3</u>	City, State, 7	Zip Code: Winfie	<u>ld, TX, 75493</u>	
	Pho	one No.:	903-524-20	20	E-ma	il Address: <u>twoo</u>	ds@winfieldtx.cor	<u>m</u>	
D.	Pul	blic Vie	wing Inform	natio	n				
	-	-	ty or outfal st be provid		cated in mor	e than one coun	ty, a public viewi	ing place for each	
	Pul	blic buil	ding name:	City I	<u>Iall</u>				
	Loc	cation w	ithin the bu	ıildin	g: <u>Foyer</u>				
	Phy	ysical A	ddress of B	uildin	g: <u>107 N. Cle</u> v	veland St.			
	Cit	y: <u>Winfi</u>	<u>eld</u>		Co	ounty: <u>Titus</u>			
	Co	ntact (La	ast Name, F	irst N	ame): <u>Woods</u>	s, Tonya			
	Pho	one No.:	903-524-20	<u> 20</u> Ex	tt.:				
E.	Bil	ingual N	Notice Requ	ıirem	ents				
				_	d for new, r applications		nt, minor amen	dment or minor	
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.					quired by the Te lity or proposed		ode at the element	ary
		\boxtimes	Yes		No				
		If no , p	ublication (of an	alternative la	anguage notice i	s not required; s	skip to Section 9	
	2.				tend either ogram at tha	-	school or the mi	ddle school enroll	ed in
		\boxtimes	Yes		No				

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

	3.	Do the locatio		these	e schools attend a bilingual education program at another
			Yes	\boxtimes	No
	4.				uired to provide a bilingual education program but the school has rement under 19 TAC §89.1205(g)?
			Yes	\boxtimes	No
	5.			_	uestion 1, 2, 3, or 4 , public notices in an alternative language are ge is required by the bilingual program? <u>Spanish</u>
F.	Su	mmary	of Applicat	ion ir	n Plain Language Template
					of Application in Plain Language Template (TCEQ Form 20972), guage summary or PLS, and include as an attachment.
	At	tachme	nt: <u>Summary</u>	in Pla	ain Language
G.	Pu	blic Inv	olvement P	lan F	orm
		1			ement Plan Form (TCEQ Form 20960) for each application for a ndment to a permit and include as an attachment.
	At	tachme	nt: <u>N/A</u>		
0			D. I		
Se	ct	ion 9.	Regula Page 29		Entity and Permitted Site Information (Instructions
A.			is currently RN <u>10207539</u>	_	ated by TCEQ, provide the Regulated Entity Number (RN) issued to
			e TCEQ's Cer currently re		Registry at http://www15.tceq.texas.gov/crpub/ to determine if ed by TCEQ.
B.	Na	ame of p	project or sit	e (the	e name known by the community where located):
	Cit	ty of Wir	nfield Wastew	ater T	<u>'reatment Plant</u>
C.	Ov	wner of	treatment fa	cility	: <u>City of Winfield</u>
	Ov	wnershi	p of Facility:	\boxtimes	Public 🗆 Private 🗆 Both 🗖 Federal
D.	O	wner of	land where	treatr	nent facility is or will be:
	Pr	efix:			Last Name, First Name:
	Ti	tle:			Credential:
	Or	rganizat	tion Name: <u>C</u>	ity of	Winfield
	Ma	ailing A	ddress: <u>P.O.</u>	<u>Box 9</u>	8 City, State, Zip Code: Winfield, TX, 75493
	Ph	ione No	.: 903-524-20	20	E-mail Address: <u>twoods@winfieldtx.com</u>
					same person as the facility owner or co-applicant, attach a lease d easement. See instructions.
		Attacl	nment: <u>N/A</u>		

E.	Owner of effluent dispos	al site:							
	Prefix:	Last Name, First Name:							
	Title:	Credential:							
	Organization Name:								
	Mailing Address:	City, State, Zip Code:							
	Phone No.:	E-mail Address:							
	If the landowner is not the agreement or deed recor	ne same person as the facility owner or co-applicant, attach a lease ded easement. See instructions.							
	Attachment: <u>N/A</u>								
F.	Owner sewage sludge disproperty owned or contr	sposal site (if authorization is requested for sludge disposal on olled by the applicant)::							
	Prefix:	Last Name, First Name:							
	Title:	Credential:							
	Organization Name:								
	Mailing Address:	City, State, Zip Code:							
	Phone No.:	E-mail Address:							
	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: <u>N/A</u>	Ŭ							
Se	ection 10. TPDES D	ischarge Information (Instructions Page 31)							
A.	Is the wastewater treatm	ent facility location in the existing permit accurate?							
	⊠ Yes □ No								
	If no, or a new permit application, please give an accurate description:								
В.	g-8004 3 (8004)	arge and the discharge route(s) in the existing permit correct?							
	⊠ Yes □ No								
	If no, or a new or amen point of discharge and t TAC Chapter 307:	dment permit application , provide an accurate description of the he discharge route to the nearest classified segment as defined in 30							
	City nearest the outfall(s): Winfield. Texas							
	•	falls(s) is/are located: <u>Titus</u>							
C.	•	stewater discharge to a city, county, or state highway right-of-way, or							
	□ Yes ⊠ No								

	If yes , indicate by a check mark if:
	\square Authorization granted \square Authorization pending
	For new and amendment applications, provide copies of letters that show proof of contact and the approval letter upon receipt.
	Attachment: <u>N/A</u>
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
Se	ction 11. TLAP Disposal Information (Instructions Page 32)
	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
2 A.	Yes No
	If no, or a new or amendment permit application , provide an accurate description of the disposal site location:
	N/A
В.	City nearest the disposal site:
C.	County in which the disposal site is located:
D.	For TLAPs , describe the routing of effluent from the treatment facility to the disposal site:
	N/A
E.	For TLAPs , please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained:
Se	ection 12. Miscellaneous Information (Instructions Page 32)
A.	Is the facility located on or does the treated effluent cross American Indian Land?
	□ Yes ⊠ No
В.	If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?
	□ Yes □ No ⊠ Not Applicable
	If No, or if a new onsite sludge disposal authorization is being requested in this permit application, provide an accurate location description of the sewage sludge disposal site.
	N/A

C.				erly empl s applicat		e TCEQ rej	oresent y	our compa	iny and get	paid for
		Yes	\boxtimes	No						
					y employed the applica			represent	ed your con	npany and
D.	Do you	owe an	y fees	to the TC	EQ?					
		Yes	\boxtimes	No						
	If yes,	provide	the fo	ollowing ir	nformation:	•				
	Acc	count nu	mber:							
	Am	ount pas	st due							
E.	Do you	ı owe an	y pena	alties to tl	ne TCEQ?					
		Yes	\boxtimes	No						
	If yes,	please p	rovid	e the follo	wing inform	mation:				
	Enf	orcemen	nt ord	er numbei	11					
	Am	ount pa	st due	<u>.</u> .						
		_								
Se	ection	13. A	ttacl	nments	(Instruct	tions Pa	ge 33)			
1800	1.000 (dec 50.00 per minutes output 10.00)	ngi resista nang manggapan agama aga anada		re sexual e empara da de desembate,	SUBSECTION	And the second s	1-2	ve Report.	Check all th	at apply:
1800	dicate w Lease	which atta	achme	ents are in	cluded wit orded easer	h the Adn ment, if th	ninistrati le land w	here the tr	Check all the eatment fac or co-applic	ility is
In	dicate w Lease locat	which atta e agreement ed or the	achme ent or e efflu	ents are in deed reco ient dispo	icluded wit orded easer sal site are	h the Adn nent, if th not owne	ninistrati le land w ld by the	here the tro applicant o	eatment fac or co-applic	ility is
In	dicate w Lease locat Origi	which atta agreement and full-se Applicant Treatment Labeled Highligh Onsite se Effluent New and	ent or e efflusize U nt's pr ent fac point nted d ewage dispo dis dispo dispo dispo dispo dispo dispo dispo dispo	ents are indeed recovery both the control of the construction of t	acluded with orded easer sal site are graphic Mary dary rge for each oute for ea isposal site oundaries (h the Adn ment, if th not owne p with the h discharg ich discha e (if applic TLAP only	ninistrati de land w d by the followin ge point (rge point able)	here the tre applicant og g informat TPDES only	eatment fac or co-applic ion: y)	ility is
In	dicate w Lease locat Origi	which attack agreement or the agreement of the agreement	ent or e efflusize U nt's pr ent fac point nted d dewage dispe di futu adius down ls.	ents are in deed reco lent dispo SGS Topos roperty boun of discha ischarge r e sludge d osal site b re constru informati stream inf	acluded withorded easers sal site are graphic Mayoundary rge for each isposal site oundaries (action (if apon	h the Adn ment, if th not owne p with the th discharg ch discha e (if applic TLAP only oplicable)	ninistrati de land w d by the followin ge point (rge point able)	here the tre applicant og g informat TPDES only	eatment fac or co-applic ion: y)	ility is
In.	dicate w Lease locat Origi	which attack agreemed or the nal full-se Treatmed Labeled Highligh Onsite so Effluent New and 1 mile results and 2 miles All ponce thment 1 miles and 2 miles and	ent or e efflusize Unt's proposition disposition di disposition disposition di disposition disposition disposition disposition disposition	ents are independent disposed for the construction of the construc	acluded with orded easer sal site are graphic May dary rge for each oute for each	h the Adn ment, if th not owne p with the h discharg ch dischare (if applic (TLAP only oplicable) TPDES on icants	ninistrati le land w led by the le followin ge point (rge point lable) 7)	here the tre applicant og g informat TPDES only	eatment fac or co-applic ion: y)	ility is

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: WQ0012146-001

Applicant: City of Winfield

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 o	or printed):	Debbie	Cruitt
0	() I	1 ,		

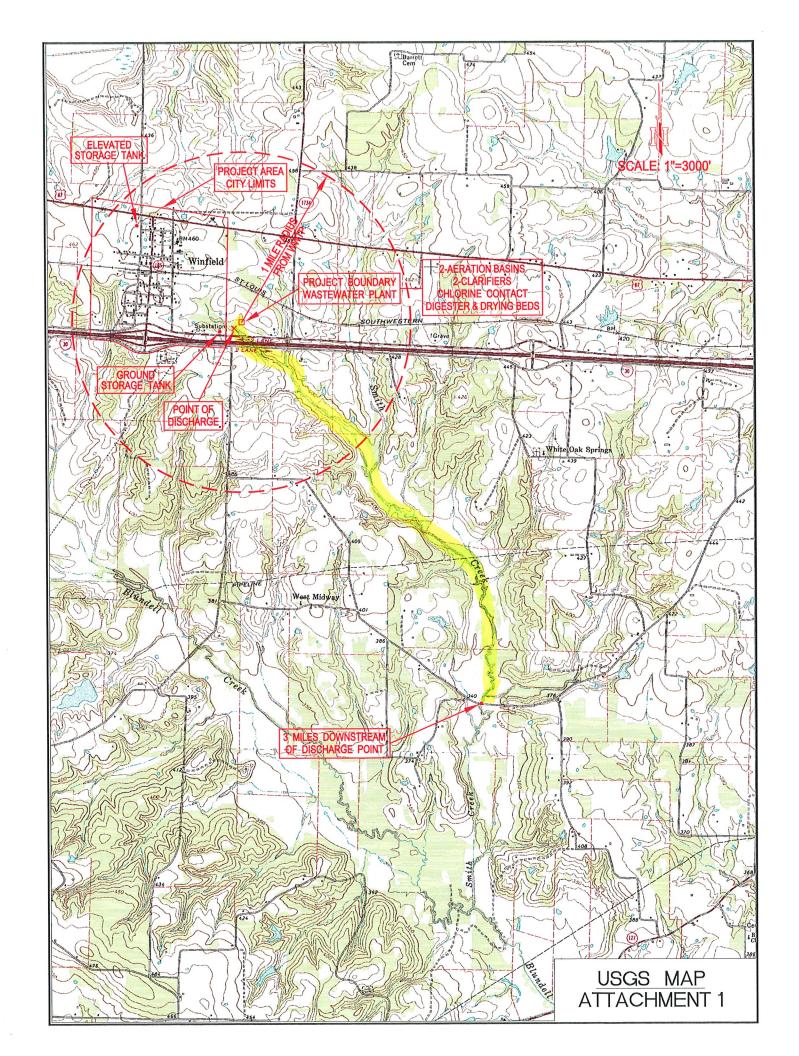
Signatory title: Mayor

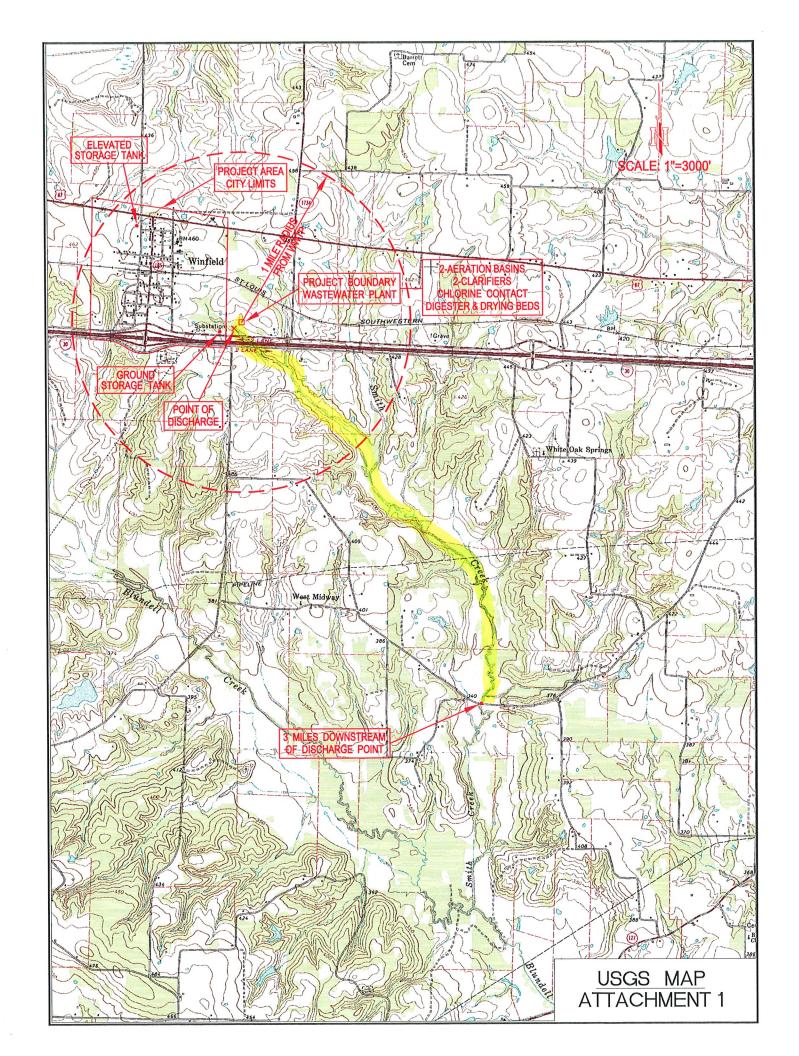
Signature:			Date:	20003	
(Use blue ink)					
Subscribed and Sworn to before	e me by the	said	Debbre C	ruit	
on this 3	day of	Octob	Seck	, 20 <u>25</u>	
My commission expires on the_	17	_day of_	November	, 20_25	

Notary Public

County, Texas

My Comm. Expires 1





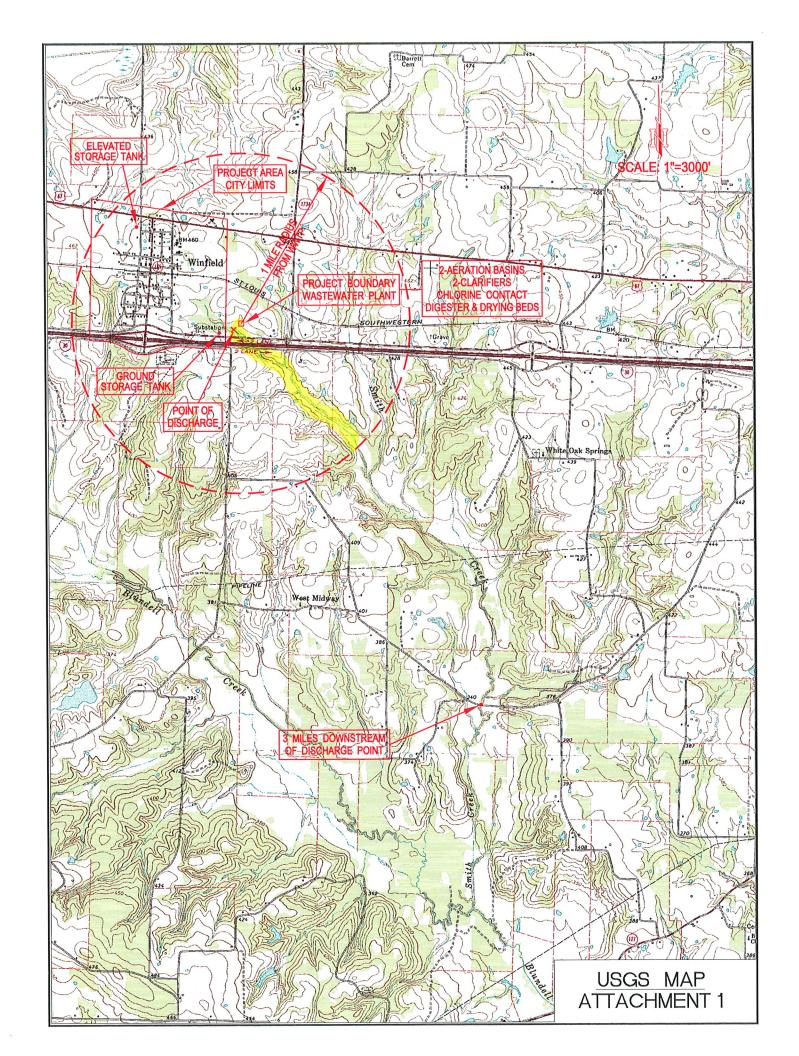
TEXAS COMMISSION ON ENVIRONMENTAL QUALITY SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ U	SE ONLY:			
Applica	tion type:RenewalMajor Am	nendment _	Minor Amendment	_New
County:		_ Segment N	lumber:	_
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	3
This forr	n applies to TPDES permit application	ns only. (Ins	tructions, Page 53)	
our agree is needec	e this form as a separate document. TO ement with EPA. If any of the items are l, we will contact you to provide the inf a completely.	not comple	tely addressed or further	information
attachme applicati complete may be d	efer to your response to any item in tent for this form separately from the A on will not be declared administrativeled in its entirety including all attachme lirected to the Water Quality Division's WQ-ARPTeam@tceq.texas.gov or by ph	dministrativ y complete ents. Questic Applicatior	ve Report of the application without this SPIF form bei Ins or comments concerni In Review and Processing T	n. The ng ng this form
The follo	wing applies to all applications:			
1. Perm	ittee: <u>City of Winfield</u>			
Perm	it No. WQ00 <u>12146-001</u>	EPA II	O No. TX <u>0079782</u>	
	ess of the project (or a location descrip county):	otion that in	.cludes street/highway, cit	y/vicinity,
App	roximately 400 feet north of Interstate d 1065, accessible on Interstate 30 Serv		Road and 0.3 miles west o	f County

	Provide the name, address, phone and fax number of an individual that can be contacted to answer specific questions about the property.
	Prefix (Mr., Ms., Miss): Ms.
	First and Last Name: <u>Tonya Woods</u>
	Credential (P.E, P.G., Ph.D., etc.):
	Title: <u>City Secretary</u>
	Mailing Address: <u>P.O. Box 98</u>
	City, State, Zip Code: Winfield, TX, 75493
	Phone No.: <u>903-524-2020</u> Ext.: Fax No.: <u>903-524-2098</u>
	E-mail Address: <u>twoods@winfieldtx.com</u>
2.	List the county in which the facility is located: <u>Titus</u>
3.	If the property is publicly owned and the owner is different than the permittee/applicant, please list the owner of the property.
	N/A
4.	Provide a description of the effluent discharge route. The discharge route must follow the flow of effluent from the point of discharge to the nearest major watercourse (from the point of discharge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify the classified segment number.
	To an unnamed tributary of Smith Creek, thence to Smith Creek, thence to Blundell Creek, thence to Lake Monticello, thence to Lake Bob Sandlin, in Segment No. 0408 of the Cypress Creek Basin.
5.	Please provide a separate 7.5-minute USGS quadrangle map with the project boundaries plotted and a general location map showing the project area. Please highlight the discharge route from the point of discharge for a distance of one mile downstream. (This map is required in addition to the map in the administrative report).
	Provide original photographs of any structures 50 years or older on the property.
	Does your project involve any of the following? Check all that apply.
	Proposed access roads, utility lines, construction easements
	Visual effects that could damage or detract from a historic property's integrity
	☐ Vibration effects during construction or as a result of project design
	Additional phases of development that are planned for the future
	☐ Sealing caves, fractures, sinkholes, other karst features
	_

	☐ Disturbance of vegetation or wetlands
1.	List proposed construction impact (surface acres to be impacted, depth of excavation, sealing of caves, or other karst features): N/A
2.	Describe existing disturbances, vegetation, and land use: Wastewater Treatment Facility
	HE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR MENDMENTS 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



TCEQ Use Only



TCEQ Core Data Form

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

☐ Operator

Winfield

City of Winfield

16. Country Mailing Information (if outside USA)

P.O. Box 98

City

Responsible Party

L. Reason for Submission (If other is checked ple	ease describe in space provided.)			
New Permit, Registration or Authorization (Co	ore Data Form should be submitted wi	th the program application	.)	
Renewal (Core Data Form should be submitted	d with the renewal form)	Other		
. Customer Reference Number (if issued)	Follow this link to search		Reference	Number (if issued)
CN 600657308	for CN or RN numbers in <u>Central Registry**</u>	RN 102075397	2015-025 \$ 2015-05 0 0 \$ 1 0 0	
CTION II: Customer I	<u>information</u>			
I. General Customer Information 5	5. Effective Date for Customer In	formation Updates (mm	/dd/yyyy)	
4				
New Customer Upd	ate to Customer Information	Change in Regulated	d Entity Own	ership
			d Entity Own	ership
Change in Legal Name (Verifiable with the Texas	Secretary of State or Texas Comptrol	ler of Public Accounts)		
Change in Legal Name (Verifiable with the Texas The Customer Name submitted here may be	Secretary of State or Texas Comptrol updated automatically based or	ler of Public Accounts)		
Change in Legal Name (Verifiable with the Texas The Customer Name submitted here may be SOS) or Texas Comptroller of Public Account	Secretary of State or Texas Comptrol updated automatically based on ts (CPA).	ler of Public Accounts) n what is current and ac	tive with t	
Change in Legal Name (Verifiable with the Texas The Customer Name submitted here may be SOS) or Texas Comptroller of Public Account Customer Legal Name (If an individual, print	Secretary of State or Texas Comptrol updated automatically based on ts (CPA).	ler of Public Accounts) n what is current and ac	tive with t	he Texas Secretary of State
Change in Legal Name (Verifiable with the Texas The Customer Name submitted here may be (SOS) or Texas Comptroller of Public Account 6. Customer Legal Name (If an individual, print City of Winfield	Secretary of State or Texas Comptrol updated automatically based on ts (CPA). last name first: eg: Doe, John)	ler of Public Accounts) n what is current and ac If new Custon	tive with to	he Texas Secretary of State
Change in Legal Name (Verifiable with the Texas The Customer Name submitted here may be SOS) or Texas Comptroller of Public Account Customer Legal Name (If an individual, print City of Winfield	Secretary of State or Texas Comptrol updated automatically based on ts (CPA).	ler of Public Accounts) n what is current and ac	tive with to	he Texas Secretary of State
Change in Legal Name (Verifiable with the Texas The Customer Name submitted here may be SOS) or Texas Comptroller of Public Accounts. Customer Legal Name (If an individual, print City of Winfield T. TX SOS/CPA Filing Number	s Secretary of State or Texas Comptrol updated automatically based on ts (CPA). last name first: eg: Doe, John) 8. TX State Tax ID (11 digits)	ler of Public Accounts) n what is current and accounts If new Custon 9. Federal 1	ner, enter pr	he Texas Secretary of State evious Customer below: 10. DUNS Number (if
Change in Legal Name (Verifiable with the Texas The Customer Name submitted here may be SOS) or Texas Comptroller of Public Account Country of Customer Legal Name (If an individual, print City of Winfield T. TX SOS/CPA Filing Number	updated automatically based on ts (CPA). last name first: eg: Doe, John) 8. TX State Tax ID (11 digits)	ler of Public Accounts) n what is current and accounts If new Custon 9. Federal 1 (9 digits)	ner, enter pr	the Texas Secretary of State evious Customer below: 10. DUNS Number (if applicable) ership: General Limited
Change in Legal Name (Verifiable with the Texas The Customer Name submitted here may be SOS) or Texas Comptroller of Public Account Control City of Winfield To TX SOS/CPA Filing Number	updated automatically based on ts (CPA). last name first: eg: Doe, John) 8. TX State Tax ID (11 digits)	Individual Sole Proprietorship	Tax ID	the Texas Secretary of State evious Customer below: 10. DUNS Number (if applicable) ership: General Limited

Owner & Operator

□ VCP/BSA Applicant

State

TX

Other:

ZIP + 4

75493

17. E-Mail Address (if applicable)

twoods@winfieldtx.com

Page 1 of 3

Occupational Licensee

15. Mailing

Address:

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(903) 524-2020		(903) 524-2098

SECTION III: Regulated Entity Information

21. General Regulated Ent	ity inform	апоп (іј 'New кеди	liatea Entity" is select	tea, a new p	етти ар	рисан	on is ais	o requirea.j		
New Regulated Entity] Update to	o Regulated Entity N	Jame 🔲 Update to	o Regulated	Entity In	ıforma	tion			
The Regulated Entity Namas Inc, LP, or LLC).	e submitte	ed may be update	ed, in order to mee	et TCEQ Coi	e Data	Stand	dards (ı	removal of or	ganization	al endings such
22. Regulated Entity Name	e (Enter nar	ne of the site where	the regulated action	is taking plo	ice.)					
City of Winfield Wastewater T	reatment P	lant								
23. Street Address of the Regulated Entity:	Interstate 30 N Access Road									
,										
(No PO Boxes)	City	Winfield	State	TX	ZIP		75493		ZIP + 4	
24. County	Titus									
		If no Stree	t Address is provic	ded, fields 2	25-28 a	re rec	uired.			
25. Description to	Approxima	ately 1688 feet north	nwest of the intersec	tion of Inters	state 30	West a	ınd Coui	nty Road 1065 i	in the City of	Winfield, Titus
Physical Location:	County, Te	xas 75493								
26. Nearest City				4.004.000.000			State		Nea	rest ZIP Code
Winfield							Te		7549	93
Latitude/Longitude are re used to supply coordinate					Data St	andai	ds. (Ge	eocoding of th	ne Physical	Address may be
27. Latitude (N) In Decima	al:			28. 1	.ongitu	de (W) In De	cimal:		
Degrees	Minutes		Seconds	Degr				Minutes		Seconds
33		09	42		9!	5		06		14
29. Primary SIC Code	30). Secondary SIC (Code	31. Prima	ry NAI	CS Co	de	32. Seco	ndary NAI	CS Code
(4 digits)	(4	digits)		(5 or 6 dig	its)			(5 or 6 di _i	gits)	
4952				221320						
33. What is the Primary B	lusiness of	f this entity? (Do	o not repeat the SIC o	r NAICS desc	ription.))		1		
Wastewater Treatment Plant										
24 84-11	City of W	Vinfield								
Address:										
Audicos.	City	Winfield	State	тх	z	IP	75493	3	ZIP + 4	
35. E-Mail Address:	tv	voods@winfieldtx.c	com]		<u> </u>			1
36. Telephone Number	1		37. Extension or	Code		38. Fa	ax Num	iber (if applica	ble)	
(903) 524-2020						(903	524-20	98		

39. TCEQ Programs a orm. See the Core Data				s/registration nu	mbers th	at will be affected b	y the updates submitted on this	
☐ Dam Safety		Districts	Edwards Aquifer		Emission	ns Inventory Air	☐ Industrial Hazardous Waste	
☐ Municipal Solid \	Municipal Solid Waste Review Air OSSF Petroleu		Petroleum Storage Tank		□ PWS			
Sludge		Storm Water Title V Air Tires			Used Oil			
☐ Voluntary Clean	ир		☐ Wastewater Agricu	lture	☐ Water Rights		Other:	
SECTION I	:V: Pr	eparer In	<u>formation</u>					
40. Name: Rus	s Crawford			41. Title:	Engine	ering Technician		
42. Telephone Nun	nber	43. Ext./Code	44. Fax Number	45. E-Mail	Address			
(903) 758-2010		30	(903) 758-2099	russ@hayesengineering.net				
	elow, I certif	y, to the best of my kn	_				e, and that I have signature authority ntified in field 39.	
Company:	City of W	/infield		Job Title:	Mayo	or		
Name (In Print):	Debbie C	Cruitt				Phone:	(903) 524- 2020	
Signature:	Del	obie Cr	will			Date:	10/23/2025	

TCEQ-10400 (11/22) Page 3 of 3



SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

DOMESTIC WASTEWATER TPDES RENEWAL APPLICATION

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

The City of Winfield (CN600657308) operates the City of Winfield Wastewater Treatment Plant (RN102075397), an activated sludge process plant. The facility is located at 400' N of IH-30 on the E side of town, in the City of Winfield, Titus County, Texas 75493. This application is for a renewal to discharge 214,560 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand ($CBOD_5$), total suspended solids (TSS), ammonia nitrogen (NH_3 -N) and Escherichia coli. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, aeration basins, final clarifiers, sludge digesters, sludge drying beds and a chlorine contact chamber.

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

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

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

La Ciudad de Winfield (CN600657308) opera La Planta de Tratamiento de Aguas Residuales de la Ciudad de Winfield (RN102075397), una Planta de proceso de lodos activados. La instalación está ubicada en está ubicada a 400 pies al norte de la IH-30, en el lado este de la ciudad, en La Ciudad de Winfield, Condado de Titus, Texas 75493. Esta solicitud es para una renovación que autoriza la descarga de 214,560 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan Demanda bioquímica de oxígeno carbonáceo de cinco días (CBOD₅), sólidos suspendidos totales (SST), nitrógeno amoniacal (NH₃-N) y Escherichia coli. Contaminantes potenciales adicionales se incluyen en el Informe Técnico Doméstico 1.0, Sección 7. Aguas residuales domésticas. está tratado por Una planta de proceso de lodos activados, y las unidades de tratamiento incluyen una reja de desbaste, tanques de aireación, clarificadores finales, digestores de lodos, lechos de secado de lodos y una cámara de contacto con cloro..

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

For any questions about this form, contact the Domestic Permits Team at 512-239-4671. The following information is required for all renewal, new, and amendment applications.

Section 1. Permitted or Proposed Flows (Instructions Page 42)

A. Existing/Interim I Phase

Design Flow (MGD): 0.084

2-Hr Peak Flow (MGD): <u>0.215</u>

Estimated construction start date: <u>1983</u> Estimated waste disposal start date: <u>1983</u>

B. Interim II Phase

Design Flow (MGD): N/A

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

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Clieb to enter text

C. Final Phase

Design Flow (MGD): N/A

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

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to outsitest

D. Current Operating Phase

Provide the startup date of the facility: November, 1983

Section 2. Treatment Process (Instructions Page 42)

A. Current Operating Phase

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

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

The City of Winfield WWTP utilizes a conventional activated sludge process. Raw wastewater enters the plant through a bar screen into the first aeration basin. In the first aeration basin, raw sewage is mixed with recycled sludge by diffused air. The resulting mixed liquor is then further treated in the second aeration basin before carrying over to the clarifiers. Clarified effluent is disinfected in a chlorine contact chamber before passing through the outfall pipe. Sludge drawn from the bottom of the clarifier is either recycled back to the first aeration basin or wasted to the digester. Stabilized sludge from the digester is sent to one of three sludge drying beds before being hauled to a tceq permitted landfill.

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)
CONTACT BASIN	1	12'x12'x13'
RE-AERATION BASIN	1	17'x12'x13'
CLARIFIER	2	12' DIA x 11.4' D
CHLORINE CONTACT BASIN	1	12'x6'x10'
DIGESTER	1	10.7'x12'x13'
DRYING BEDS	3	38'x20'

C. Process Flow Diagram

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

Attachment: 2

Section 3. Site Information and Drawing (Instructions Page 43)

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

• Latitude: <u>33°09'42" N</u>

• Longitude: <u>95°06'14" W</u>

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

Latitude: <u>N/A</u>

• Longitude: <u>N/A</u>

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.

Collection System Informati each uniquely owned collect satellite collection systems. examples.	tion system, existing	g and new, served by th	is facility, including
Collection System Information Collection System Name	owner Name	Owner Type	Population Served
City of Winfield	City of Winfield	Publicly Owned	425
		The second of the second	
		Terresia (per things)	
		This is the fact to replace	
☐ Yes ☐ No f yes , provide a detailed di Failure to provide sufficie	scussion regarding t nt justification may	the continued need for t	he unbuilt phase. Director
recommending denial of th	ie unbuilt phase or	phases.	
N <u>/A</u>			
14/11			
	Plans (Instructio	ons Page 44)	

1	es, was a crosure plan submitted to the TCLQ:
•	Yes No
N/	
Sec	ction 6. Permit Specific Requirements (Instructions Page 44)
	applicants with an existing permit, check the Other Requirements or Special visions of the permit.
	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: 1983 Provide information, including dates, on any actions taken to meet a <i>requirement or provision</i> pertaining to the submission of a summary transmittal letter. Provide a copy of an approval letter from the TCEQ, if applicable.
	N <u>/A</u>
В.	Buffer zones
	Have the buffer zone requirements been met?
	□ Yes ⊠ No
	Provide information below, including dates, on any actions taken to meet the conditions of the buffer zone. If available, provide any new documentation relevant to maintaining the buffer zones.
	N <u>/A</u>

C.	Oth	ner actions required by the current permit
	sub	es the <i>Other Requirements</i> or <i>Special Provisions</i> section in the existing permit require omission of any other information or other required actions? Examples include cification of Completion, progress reports, soil monitoring data, etc.
		□ Yes ⊠ No
	If y	res, provide information below on the status of any actions taken to meet the aditions of an Other Requirement or Special Provision.
	N _A	$^{\prime}\mathrm{A}$
D.	Gri	it 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 <u>/A</u>
	3.	Grit disposal
		Does the facility have a Municipal Solid Waste (MSW) registration or permit for grit disposal?
		□ Yes □ No
		If No , contact the TCEQ Municipal Solid Waste team at 512-239-2335. Note: A registration or permit is required for grit disposal. Grit shall not be combined with treatment plant sludge. See the instruction booklet for additional information on grit disposal requirements and restrictions.

		Describe the method of grit disposal.
		N <u>/A</u>
	4	Consequented liquid disposal
	4.	Grease and decanted liquid disposal
		Note: A registration or permit is required for grease disposal. Grease shall not be combined with treatment plant sludge. For more information, contact the TCEQ Municipal Solid Waste team at 512-239-2335.
		Describe how the decant and grease are treated and disposed of after grit separation.
		N <u>/A</u>
E.	Sto	ormwater 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 Or TXRNE
		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 <u>/A</u>					
4.	Existing coverage in individual permit					
	Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit?					
	□ Yes □ No					
	If yes , provide a description of stormwater runoff management practices at the site that are authorized in the wastewater permit then skip to Subsection F, Other Wastes Received.					
	N <u>/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.					
	N <u>/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					

	ntend to divert stormwater to the treatment plant headworks and indirectly discharge it to water in the state.
	N <u>/A</u>
j]]	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.
Dis	charges to the Lake Houston Watershed
Doe	es the facility discharge in the Lake Houston watershed?
	□ Yes ⊠ No
If y	es, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions.
Oth	ner wastes received including sludge from other WWTPs and septic waste
1.	Acceptance of sludge from other WWTPs
	Does or will the facility accept sludge from other treatment plants at the facility site?
	□ Yes ⊠ No
	If yes, attach sewage sludge solids management plan. See Example 5 of instructions.
	In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an
	estimate of the BOD_5 concentration of the sludge, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.
	N <u>/A</u>
	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

F.

G.

If yes to any of the above, provide the date the plant started or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD ₅ concentration of the septic waste, and the design BOD ₅ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.
N/A
Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.
3. Acceptance of other wastes (not including septic, grease, grit, or RCRA, CERCLA or as discharged by IUs listed in Worksheet 6)
Is or will the facility accept wastes that are not domestic in nature excluding the categories listed above?
□ Yes ⊠ No
If yes, provide the date that the plant started accepting the waste, an estimate how much waste is accepted on a monthly basis (gallons or millions of gallons), a description of the entities generating the waste, and any distinguishing chemical or other physical characteristic of the waste. Also note if this information has or has not changed since the last permit action.
N/A
Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 49)
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. <i>Wastewater treatment facilities</i> complete Table 1.0(2). <i>Water treatment facilities</i> discharging filter backwash water complete Table 1.0(3). Provide copies of the laboratory results sheets. These tables are not applicable for a minor amendment without renewal. See the instructions for guidance.
Note: The sample date must be within 1 year of application submission.

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l	5.37	5.37	1	G	7/30/2025 3:00pm
Total Suspended Solids, mg/l	3.60	3.60	1	G	7/30/2025 3:00pm
Ammonia Nitrogen, mg/l	1.65	1.65	1	G	7/30/2025 3:00pm
Nitrate Nitrogen, mg/l	0.336	0.336	1	G	7/30/2025 3:00pm
Total Kjeldahl Nitrogen, mg/l	2.96	2.96	1	G	7/30/2025 3:00pm
Sulfate, mg/l	62.9	62.9	1	G	7/30/2025 3:00pm
Chloride, mg/l	55.9	55.9	1	G	7/30/2025 3:00pm
Total Phosphorus, mg/l	3.59	3.59	1	G	7/30/2025 3:00pm
pH, standard units	7.14	7.14	1	G	7/30/2025 3:00pm
Dissolved Oxygen*, mg/l	5.89	5.89	1	G	7/30/2025 3:00pm
Chlorine Residual, mg/l	2.40	2.40	1	G	7/30/2025 3:00pm
E.coli (CFU/100ml) freshwater	NONE	NONE	1	G	7/30/2025 3:00pm
Entercocci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l	238	238	1	G	7/30/2025 3:00pm
Electrical Conductivity, µmohs/cm, †					
Oil & Grease, mg/l	<4.49	<4.49	1	G	7/30/2025 3:00pm
Alkalinity (CaCO ₃)*, mg/l	59.0	59.0	1	G	7/30/2025 3:00pm

^{*}TPDES 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		1			

Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: <u>Tony Price</u>

Facility Operator's License Classification and Level: <u>Class "C"</u>

Facility Operator's License Number: WW0025316

[†]TLAP permits only

Section 9. Sludge and Biosolids Management and Disposal (Instructions Page 50)

VV VV	1P'S Sewage Studge of Biosonus Management Facility Type
Che	ck all that apply. See instructions for guidance
	Design flow>= 1 MGD
	Serves >= 10,000 people
	Class I Sludge Management Facility (per 40 CFR § 503.9)
	Biosolids generator
	Biosolids end user – land application (onsite)
	Biosolids end user – surface disposal (onsite)
	Biosolids end user – incinerator (onsite)
ww	TP's Sewage Sludge or Biosolids Treatment Process
Che	ck all that apply. See instructions for guidance.
\boxtimes	Aerobic Digestion
\boxtimes	Air Drying (or sludge drying beds)
	Lower Temperature Composting
	Lime Stabilization
	Higher Temperature Composting
(480 S) (480 S)	Heat Drying
\$27.00 \$20.00 \$20.00	Thermophilic Aerobic Digestion
	Beta Ray Irradiation
	Gamma Ray Irradiation
	Pasteurization
	Preliminary Operation (e.g. grinding, de-gritting, blending)
	Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)
	Sludge Lagoon
	Temporary Storage (< 2 years)
	Long Term Storage (>= 2 years)
П	Methane or Biogas Recovery
	Other Treatment Process: Click to outer test.

C. Sewage Sludge or Biosolids Management

B.

Provide information on the *intended* sewage sludge or biosolids management practice. Do not enter every management practice that you want authorized in the permit, as the

permit will authorize all sewage sludge or biosolids management practices listed in the instructions. Rather indicate the management practice the facility plans to use.

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	On-Site Owner or Operator	Bulk		N/A: Disposal in Landfill	N/A: Disposal in Landfill
To Agricultura (1975) Service	Arches 9 m	Parking Association			
Terres	The significant of the growth	EER AM TO BE ON THE			

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

D. Disposal site

Disposal site name: Blossum Prairie Landfill

TCEQ permit or registration number: MSW Reg #2358

County where disposal site is located: Lamar

E. Transportation method

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

Name of the hauler: <u>Sanitation Solutions</u> Hauler registration number: <u>Reg #23976</u>

Sludge is transported as a:

_			
Liquid 🗆	semi-liquid 🗆	semi-solid \square	$\operatorname{solid} lacktriangleright$
Liquia Li	ocim majorior		the state of the s

Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 52)

A. Beneficial use authorization

Does the existing permit include authorization for land app	plication of biosolids for
beneficial use?	

□ Yes ⊠ No

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

□ Yes ⊠ No

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

	ليا	res 🗆 No						
B.	B. Sludge processing authorization							
	Does the existing permit include authorization for any of the following sludge processing, storage or disposal options?							
Sludge Composting \square Yes \boxtimes No								
	Mar	keting and Distribution of Biosolids		Yes	\boxtimes	No		
Sludge Surface Disposal or Sludge Monofill □ Yes ⊠ No								
	Ten	nporary storage in sludge lagoons		Yes	\boxtimes	No		
	authori	to any of the above sludge options and the ization, is the completed Domestic Waste cal Report (TCEQ Form No. 10056) attac	wate	r Permi	t App	lication: Sewage Sludge	ž	
	- C - C - C - C - C - C - C - C - C - C	Yes 🗆 No						
Se	ection.	11. Sewage Sludge Lagoons (In	aim	ctions	Pag	e 53)		
\$46000000000000000000000000000000000000		facility include sewage sludge lagoons?			(S)			
DC	Ye 🗀 Ye							
If ·		aplete the remainder of this section. If no	proc	ceed to S	Section	ı 12.		
	•							
Α.		on information llowing maps are required to be submitte	d as i	nart of t	he anı	olication. For each map.		
	provid	e the Attachment Number.	a ao j	part or t	ire upi	₁		
	•	Original General Highway (County) Map:						
		Attachment: Attachment:						
	•	USDA Natural Resources Conservation Se	rvice	Soil Ma	p:			
		Attachment:						
		Federal Emergency Management Map:						
		Attachment:						
		Site map:						
		Attachment:						
	Discus apply.	ss in a description if any of the following o	exist	within t	he lag	oon area. Check all that		
		Overlap a designated 100-year frequenc	y floo	od plain				
	12 mm	Soils with flooding classification						
		Overlap an unstable area						
		Wetlands						
		Located less than 60 meters from a faul	t					
	1.41.19	None of the above						
	Ati	tachment:						

Temporary storage information
Provide the results for the pollutant screening of sludge lagoons. These results are in addition to pollutant results in <i>Section 7 of Technical Report 1.0.</i>
Nitrate Nitrogen, mg/kg:
Total Kjeldahl Nitrogen, mg/kg:
Total Nitrogen (=nitrate nitrogen + TKN), mg/kg:
Phosphorus, mg/kg: The control of th
Potassium, mg/kg:
pH, standard units:
Ammonia Nitrogen mg/kg:
Arsenic:
Cadmium:
Chromium:
Copper:
Lead:
Mercury: Control of the Control of t
Molybdenum:
Nickel:
Selenium:
Zinc:
Total PCBs:
Provide the following information:
Volume and frequency of sludge to the lagoon(s):
Total dry tons stored in the lagoons(s) per 365-day period:
Total dry tons stored in the lagoons(s) over the life of the unit:
Liner information
Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of $1x10^{-7}$ cm/sec?
□ Yes □ No

	If yes, describe the liner below. Please note that a liner is required.
D.	Site development plan
	Provide a detailed description of the methods used to deposit sludge in the lagoon(s):
	Attach the following documents to the application.
	Plan view and cross-section of the sludge lagoon(s)
	Attachment:
	Copy of the closure plan
	Attachment:
	Copy of deed recordation for the site
	Attachment: 1.1. Attachment and the second of the second o
	Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons
	Attachment:
	 Description of the method of controlling infiltration of groundwater and surface water from entering the site
	Attachment:
	 Procedures to prevent the occurrence of nuisance conditions
	Attachment:
E.	Groundwater monitoring
	Is groundwater monitoring currently conducted at this site, or are any wells available for groundwater monitoring, or are groundwater monitoring data otherwise available for the sludge lagoon(s)?
	□ Yes □ No
	If groundwater monitoring data are available, provide a copy. Provide a profile of soil types encountered down to the groundwater table and the depth to the shallowest groundwater as a separate attachment.
	Attachment:

Section 12. Authorizations/Compliance/Enforcement (Instructions Page 54)

Α.	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:	
1 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /		
В.	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 implementate schedule, and the current status:	ion
9	ction 13. RCRA/CERCLA Wastes (Instructions Page 55)	
State to use	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	ve

В.	Remediation	activity	wastewater
----	-------------	----------	------------

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

□ Yes ⊠ No

C. Details about wastes received

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

Attachment:

Section 14. Laboratory Accreditation (Instructions Page 55)

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:
 - o periodically inspected by the TCEQ; or
 - o located in another state and is accredited or inspected by that state; or
 - o 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: Debbie Cruitt

Title: Mayor

Signature:

Date: 10/33/201

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

Section 1. Domestic Drinking Water Supply (Instructions Page 63)
Is there a surface water intake for domestic drinking water supply located within 5 miles downstream from the point or proposed point of discharge?
□ Yes ⊠ No
If no , proceed it Section 2. 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: And the actual tests
Section 2. Discharge into Tidally Affected Waters (Instructions Page 63)
Does the facility discharge into tidally affected waters?
□ Yes ⊠ No
If no , proceed to Section 3. If yes , complete the remainder of this section. If no, proceed to Section 3.
A. Receiving water outfall
Width of the receiving water at the outfall, in feet: The transfer lead
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).
C. Sea grasses
Are there any sea grasses within the vicinity of the point of discharge?
□ Yes □ No
If yes, provide the distance and direction from the outfall(s).

Section 3. Classified Segments (Instructions Page 63) 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. **Description of Immediate Receiving Waters (Instructions** Section 4. **Page 63)** Name of the immediate receiving waters: unnamed tributary of Smith Creek A. Receiving water type Identify the appropriate description of the receiving waters. Stream \boxtimes 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 10.0 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 X Personal observation

Other, specify:

		e names of all perennial strea cream of the discharge point.	ms that joir	the receiving water within three miles
	None			
D.		tream characteristics		
		receiving water characteristi ge (e.g., natural or man-mad		ithin three miles downstream of the .ds, reservoirs, etc.)?
		Yes ⊠ No		
	If yes,	discuss how.		
	Did.	ra criter text		
E.	Norma	l dry weather characteristic	S	
		•		during normal dry weather conditions.
	Dry (n	o flow) upstream		
	Date a	nd time of observation: <u>09-0</u> 4	1-25 9:00am	
	Was th	e water body influenced by s	tormwater 1	runoff during observations?
		Yes ⊠ No		-
ę de Braz		Briefices		_
Se	ection	5. General Character Page 65)	ristics of	the Waterbody (Instructions
Α.	Upstre	eam influences		
	_		stream of t	he discharge or proposed discharge site
		nced by any of the following?		
		Oil field activities	Formal States	Urban runoff
		Upstream discharges	\boxtimes	Agricultural runoff
		Septic tanks		Other(s), specify: The Report of the state o

C. Downstream perennial confluences

В.	Waterb	Vaterbody uses			
	Observ	ed or evidences of the following use	es. Cl	neck all that apply.	
	1454 1454	Livestock watering		Contact recreation	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Irrigation withdrawal		Non-contact recreation	
	2 x x 5 g	Fishing		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 the surrounding area.				the aesthetics of the receiving water and	
Wilderness: outstanding natural beauty; usually wooded or unpastured area; vectority exceptional				; usually wooded or unpastured area; water	
	, est s	Natural Area: trees and/or native v fields, pastures, dwellings); water		ation; some development evident (from ty discolored	
		Common Setting: not offensive; de or turbid	evelo	ped but uncluttered; water may be colored	
	Offensive: stream does not enhance aesthetics; cluttered; highly developed; dumping areas; water discolored				

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works.

Section 1. All POTWs (Instructions Page 87)

A. Industrial users (IUs)

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

If there are no users, enter 0 (zero).
Categorical IUs:
Number of IUs: <u>o</u>
Average Daily Flows, in MGD: Click to a large transfer of the second sec
Significant IUs – non-categorical:
Number of IUs: <u>o</u>
Average Daily Flows, in MGD: Click to antentest.
Other IUs:
Number of IUs: <u>o</u>
Average Daily Flows, in MGD: Clark to entertext
Treatment plant interference
In the past three years, has your POTW experienced treatment plant interference (see instructions)?
□ Yes ⊠ No
If yes, identify the dates, duration, description of interference, and probable cause(s) and possible source(s) of each interference event. Include the names of the IUs that may have caused the interference.

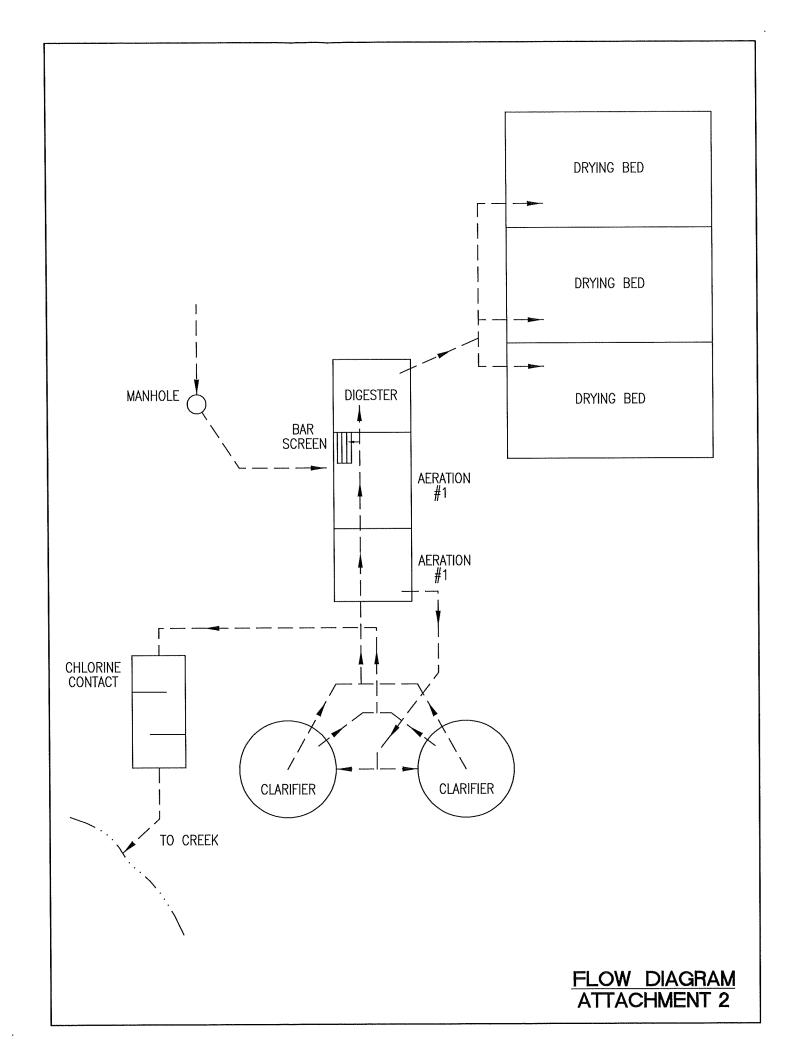
C.	Treatment plant pass through						
	In the past three years, has your POTW experienced pass through (see instructions)?						
	□ Yes ⊠ No						
	If yes, identify the dates, duration, a description of the pollutants passing through the treatment plant, and probable cause(s) and possible source(s) of each pass through event. Include the names of the IUs that may have caused pass through.						
n	Dretreatment program						
.ע	Pretreatment program Does your POTW have an approved pretreatment program?						
	□ Yes ⊠ No						
	If yes, complete Section 2 only of this Worksheet.						
	Is your POTW required to develop an approved pretreatment program?						
	□ Yes ⊠ No						
	If yes, complete Section 2.c. and 2.d. only, and skip Section 3.						
	If no to either question above, skip Section 2 and complete Section 3 for each significant industrial user and categorical industrial user.						
Se	ection 2. POTWs with Approved Programs or Those Required to						
2,590	Develop a Program (Instructions Page 87)						
A.	Substantial modifications						
	Have there been any substantial modifications to the approved pretreatment program that have not been submitted to the TCEQ for approval according to 40 CFR §403.18?						
	□ Yes □ No						
	If yes, identify the modifications that have not been submitted to TCEQ, including the purpose of the modification.						
	是基础是"TOD 会批评者" 第2201						

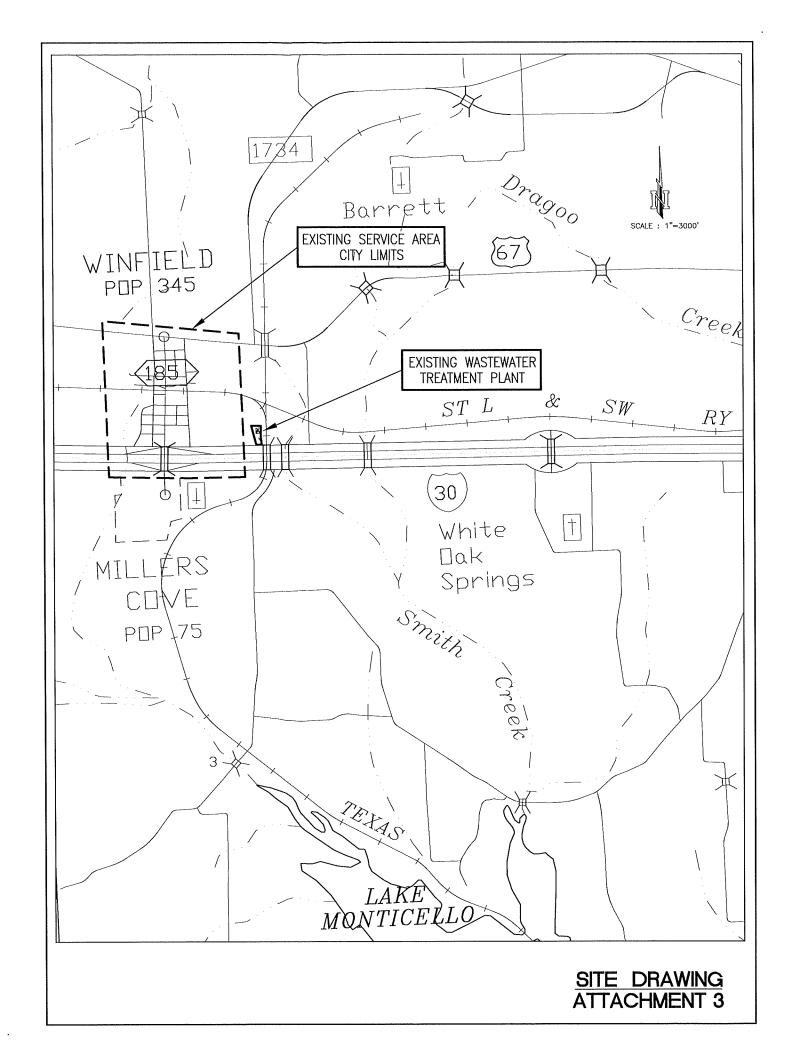
B. Non-substanti	Non-substantial modifications Have there been any non-substantial modifications to the approved pretreatment program that have not been submitted to TCEQ for review and acceptance?								
Have there been program that i									
□ Yes [□ No								
If yes, identify including the	If yes, identify all non-substantial modifications that have not been submitted to TCEQ, including the purpose of the modification.								
C. Effluent para	meters above the MAL								
-), list all parameters me		the MAL in the PC	OTW's effluent					
monitoring di	iring the last three year	rs. Submit an	attachment if nece	essary.					
_									
Pollutant	Concentration	MAL	Units	Date					
ronutant	Concentration	141/41	Omto						
D. Yandaratainlana	or interpretions								
D. Industrial use		on contribute	d to any problems	e (oveluding					
interferences	CIU, or other IU caused or pass throughs) at yo	or contribute	he past three year	s?					
	Yes No								
	If yes, identify the industry, describe each episode, including dates, duration, description								
	of the problems, and probable pollutants.								

Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 88)

	General information								
	Company Name: <u>N/A</u>								
	SIC Code:								
	Contact name:								
	Address:								
	City, State, and Zip Code:								
	Telephone number:								
	Email address:								
B.	Process information								
	Describe the industrial proof or CIU(s) discharge (i.e., pro					ct or contribute to the SIU(s)			
	Citt to the restrict								
	į.								
C	Droduct and service inform	mation							
C.	Provide a description of the		ductio) or serv	ices 1	performed			
C.	Provide a description of the		duct(s) or serv	ices]	performed.			
C.			duct(s) or serv	ices]	performed.			
C.	Provide a description of the		duct(s) or serv	ices _]	performed.			
C.	Provide a description of the		duct(s) or serv	ices]	performed.			
C.	Provide a description of the		duct(s) or serv	ices]	performed.			
C.	Provide a description of the		duct(s) or serv	ices]	performed.			
	Provide a description of the		duct(s) or serv	ices]	performed.			
	Provide a description of the	e principal pro							
	Flow rate information See the Instructions for de	e principal pro							
	Flow rate information See the Instructions for der Process Wastewater:	e principal proc	ocess	' and "no					
	Flow rate information See the Instructions for de	e principal proc	ocess	' and "no					
	Flow rate information See the Instructions for der Process Wastewater:	e principal proc	ocess	' and "no					
	Flow rate information See the Instructions for de Process Wastewater: Discharge, in gallon	e principal proc finitions of "pro s/day: Chelles Continuous	ocess	and "no	on-pr	ocess wastewater."			
	Flow rate information See the Instructions for de Process Wastewater: Discharge, in gallon Discharge Type:	e principal proc finitions of "pro s/day: Continuous er:	ocess	" and "no Batch	on-pr	ocess wastewater."			

E.	Pretreatment standards
	Is the SIU or CIU subject to technically based local limits as defined in the <i>i</i> nstructions?
	□ Yes □ No
	Is the SIU or CIU subject to categorical pretreatment standards found in 40 CFR Parts 405-471?
	□ Yes □ No
	If subject to categorical pretreatment standards , indicate the applicable category and subcategory for each categorical process.
	Category: Subcategories:
	Click or tap here to enter text.
	Category:
	Subcategories:
	Category:
	Subcategories:
	Category: The contract of the
	Subcategories: Chelle de la tente de la la contracte de la con
	Category: Category:
	Subcategories: Clinical and the state of the
F.	Industrial user interruptions
	Has the SIU or CIU caused or contributed to any problems (e.g., interferences, pass through, odors, corrosion, blockages) at your POTW in the past three years?
	□ Yes □ No
	If yes , identify the SIU, describe each episode, including dates, duration, description of problems, and probable pollutants.







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.)

Renewal (Core Data Form should be submitted with t		Other					
2. Customer I	Reference Number (if issued)	Follow this link to sea	1011	이 그리고 하다 내려가 있다. 이렇게 되면 되었다면 사람들이 있다는 것이 되었다면 하는데 그런데 그리고 없는데 그렇게 되었다.				
CN 6006573	08	Central Registry**	RN	RN 102075397				
ECTION	N II: Customer Info	<u>rmation</u>						
4. General Cu	stomer Information 5. Effec	tive Date for Customer	Information	Updates (mm/dd	/уууу)			
☐ New Custor ☐Change in Le	ner Update to C egal Name (Verifiable with the Texas Secreta	Customer Information ary of State or Texas Compt		nge in Regulated Er c Accounts)	itity Owne	ership		
	r Name submitted here may be update s Comptroller of Public Accounts (CPA		on what is	current and activ	e with th	e Texas Secretar	y of State	
6. Customer I	Legal Name (If an individual, print last nan	ne first: eg: Doe, John)		If new Customer	enter pre	evious Customer be	<u>low:</u>	
City of Winfield	ł							
7. TX SOS/CP	A Filing Number 8. TX St	tate Tax ID (11 digits)		9. Federal Tax (9 digits)	ID	10. DUNS Num applicable)	ber (if	
11. Type of C	ustomer: Corporation		☐ Indivi	idual	Partne	rship: 🔲 General [Limited	
Government: [☑ City ☐ County ☐ Federal ☐ Local ☐	State 🗌 Other	☐ Sole Proprietorship ☐ Other:					
12. Number	of Employees			13. Independe	ntly Ow	ned and Operate	d?	
Ø 0-20 ☐ 3	21-100	501 and higher		⊠ Yes	☐ No			
14. Custome	r Role (Proposed or Actual) – as it relates to	o the Regulated Entity liste	d on this form	. Please check one o	of the follo	owing		
Owner Occupation		☑ Owner & Operator ☐ VCP/BSA Applicant		☐ Other	:			
15. Mailing	City of Winfield							
Address:	P.O. Box 98							
	City Winfield	State TX	ZIP	75493		ZIP + 4		
16. Country I	Mailing Information (if outside USA)		17. E-Mail A	Address (if applicat	ole)			
			twoods@win	fieldtx.com			48 29 2 2 2	

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18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)		
(903) 524-2020		(903) 524-2098		

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (if New Regulated Entity" is selected, a new permit application is also required.)											
New Regulated Entity Update to Regulated Entity Name Update to Regulated Entity Information											
The Regulated Entity Nan as Inc, LP, or LLC).	ne submitte	d may be updat	ed, in order to mee	et TCEQ Core	Data Stand	dards (rem	oval of or	ganization	al endings such		
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)											
City of Winfield Wastewater Treatment Plant											
23. Street Address of the Regulated Entity:											
(No PO Boxes)	City		State		ZIP			ZIP + 4			
24. County	Titus			1							
		If no Stree	t Address is provid	led, fields 25	5-28 are req	uired.	***************************************				
25. Description to Physical Location:	Approximately 1088 feet northwest of the intersection of interstate 30 West and County Road 1065 in the City of Winneld, Titus							Winfield, Titus			
26. Nearest City	<u> </u>					State		Nea	rest ZIP Code		
Winfield	Winfield TX 75493							93			
Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).											
27. Latitude (N) In Decimal: 28. Longitude (W) In Decimal:											
Degrees	Minutes		Seconds	econds Degree		rees Minute			Seconds		
33		09	42		95	33 09 42 95 06 1					
29. Primary SIC Code	Code										
(4 digits)	(4 d	ligits)	coue	31. Primare (5 or 6 digit	y NAICS Coo	łe	32. Seco (5 or 6 dig	mdary NAIC	CS Code		
(4 digits) 4952	(4 d	•	Code			de			CS Code		
		ligits)		(5 or 6 digit: 221320	5)	de			CS Code		
4952	Business of t	ligits)		(5 or 6 digit: 221320	5)	de			CS Code		
4952 33. What is the Primary I Wastewater Treatment Plant	Business of t	ligits) this entity? (Do		(5 or 6 digit: 221320	5)	de			CS Code		
33. What is the Primary I Wastewater Treatment Plant 34. Mailing	Business of t	this entity? (Da		(5 or 6 digit: 221320	5)	de			CS Code		
4952 33. What is the Primary I Wastewater Treatment Plant	Business of t	this entity? (Da		(5 or 6 digit: 221320	5)	75493			CS Code		
33. What is the Primary I Wastewater Treatment Plant 34. Mailing	Business of t City of Wi P.O. Box 9 City	ligits) this entity? (Do	o not repeat the SIC or	(5 or 6 digit: 221320 - NAICS descri	ption.)			gits)	CS Code		
33. What is the Primary I Wastewater Treatment Plant 34. Mailing Address:	Business of t City of Wi P.O. Box 9 City	ligits) this entity? (Do	o not repeat the SIC or	(5 or 6 digit: 221320	zIP		(5 or 6 dig	gits) ZIP + 4	CS Code		

☐ Dam Safety		Districts	Edwards Aquifer		Emissions Inventory Air	☐ Industrial Hazardous Wast	
☐ Municipal Solid Waste		☐ New Source Review Air	OSSF		Petroleum Storage Tank	☐ PWS	
Sludge		Storm Water	☐ Title V Air		Tires	Used Oil	
☐ Voluntary	Cleanup	⊠ Wastewater	☐ Wastewater Agricu	lture	Water Rights	Other:	
	I	Preparer Inf	<u>formation</u>	41. Title:	English and Table Ville		
·0. Name: ·2. Telephone	. Name: Russ Crawford . Telephone Number 43. Ext./Code		44. Fax Number 45. E-Mail Address		Engineering Technician Address		
903) 758-2010 30		(903) 758-2099	russ@hayese	engineering.net			
. By my signati	ıre below, I ce					e, and that I have signature authorit entified in field 39.	
Company:	City o	City of Winfield		Job Title:	Mayor		
Name (In Print): Debb	ie Cruitt			Phone:	(903) 524- 2020	
Signature:							

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

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	Pac	ckage						
	Indicate by a check mark the preferred method for receiving the first notice and instructions:							
	\boxtimes	E-mail	Address					
		Fax						
		Regula	ar Mail					
C.	Contact permit to be listed in the Notices							
	Pre	fix: <u>Ms.</u>			Last Name, First Name: <u>Woods, Tonya</u>			
	Tit	le: <u>City S</u>	Secretary		Credential:			
Organization Name: <u>City of Winfield</u>								
	Ma	iling Ad	dress: <u>P.O. I</u>	30x 98	City, State, Zip Code: Winfield, TX, 75493			
	Pho	one No.:	903-524-20	<u>20</u>	E-mail Address: twoods@winfieldtx.com			
D.	Pul	blic Vie	wing Inforn	atio	n			
	•	•	ity or outfall st be provide		cated in more than one county, a public viewing place for each			
	Pul	blic buil	ding name:	City F	<u>Hall</u>			
	Loc	cation w	rithin the bu	ildin	g: <u>Foyer</u>			
	Phy	ysical A	ddress of Bu	ıildin	g: <u>102 W. 6th St.</u>			
	Cit	y: <u>Winfi</u>	<u>eld</u>		County: <u>Titus</u>			
	Contact (Last Name, First Name): <u>Woods, Tonya</u>							
	Ph	one No.:	903-524-20	<u>20</u> Ex	xt.:			
E.	Bilingual Notice Requirements							
	This information is required for new, major amendment, minor amendment or minor modification, and renewal applications.							
	be	needed		nstru	ion is only used to determine if alternative language notices will actions on publishing the alternative language notices will be in			
	ob.		_	-	L coordinator at the nearest elementary and middle schools and nation to determine whether an alternative language notices are			
	1.		_		program required by the Texas Education Code at the elementary to the facility or proposed facility?			
		\boxtimes	Yes		No			
		If no , p	oublication o	of an	alternative language notice is not required; skip to Section 9			
	2.				tend either the elementary school or the middle school enrolled in ogram at that school?			
		\boxtimes	Yes	\(\frac{1}{1}\)	No			

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



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

DOMESTIC WASTEWATER TPDES RENEWAL APPLICATION

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

The City of Winfield (CN600657308) operates the City of Winfield Wastewater Treatment Plant (RN102075397), an activated sludge process plant. The facility is located at approx. 1688 feet northwest of the intersection of Interstate 30 West and County Road 1065, in the City of Winfield, Titus County, Texas 75493. This application is for a renewal to discharge an average of 84,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand ($CBOD_5$), total suspended solids (TSS), ammonia nitrogen (NH_3 -N) and Escherichia coli. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, aeration basins, final clarifiers, sludge digesters, sludge drying beds and a chlorine contact chamber.

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

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

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

La Ciudad de Winfield (CN600657308) opera La Planta de Tratamiento de Aguas Residuales de la Ciudad de Winfield (RN102075397), una Planta de proceso de lodos activados. La instalación está ubicada en aprox. 1688 pies al Noroeste de la intersection de la Interestatal 30 Oeste y County Road 1065, en La Ciudad de Winfield, Condado de Titus, Texas 75493. Esta solicitud es para una renovación que autoriza la descarga de 84,000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan Demanda bioquímica de oxígeno carbonáceo de cinco días (CBOD₅), sólidos suspendidos totales (SST), nitrógeno amoniacal (NH₃-N) y Escherichia coli. Contaminantes potenciales adicionales se incluyen en el Informe Técnico Doméstico 1.0, Sección 7. Aguas residuales domésticas. está tratado por Una planta de proceso de lodos activados, y las unidades de tratamiento incluyen una reja de desbaste, tanques de aireación, clarificadores finales, digestores de lodos, lechos de secado de lodos y una cámara de contacto con cloro..

Francesca Findlay

From: Russ Crawford <russ@HayesEngineering.net>

Sent: Thursday, October 30, 2025 11:31 AM

To: Francesca Findlay

Subject: FW: FW: WQ0012146001 City of Winfield

Attachments: wg0012146001-nod1.pdf; Municipal Discharge Renewal Spanish NORI.docx; Revised

Core Data Form.pdf; Revised Misc. Info.pdf

Francesca,

The plant operator for the City of Winfield WWTP was questioning Item 6 in the NOD1. We are not sure if that GPD flow is the permitted flow or the actual current flow?? I put the permitted flow of 84,000 GPD on the Plain Language Summary. The actual current flow discharging at the plant is 35,000 gallons per day. Please let me know if I need to change anything.

Thank You Russ Crawford Hayes Engineering, Inc.

From: Russ Crawford

Sent: Thursday, October 30, 2025 9:26 AM

To: 'Francesca.Findlay@tceq.texas.gov' < Francesca.Findlay@tceq.texas.gov>

Cc: Tonya Woods <twoods@winfieldtx.com>
Subject: FW: FW: WQ0012146001 City of Winfield

Francesca,

Attached is the information you requested in NOD1......written responses below:

- 1. An original paper copy with cover letter was mailed to the TCEQ Application Review and Processing Team (MC148) on October 27th or 28th, 2025.
- 2. City Hall address changed to 102 W. 6th St.
- 3. A street number for the WWTP site cannot be found. The address information in Item 23 of the Core Data Form was removed
- 4. Added state
- 5. Changed address to match Core Data Form
- 6. Changed average daily flow to 84,000 gallons per day
- 7. Winfield City Hall (Winifield) spell wrong. Address changed to 102 W. 6th St.
- 8. Corrected NORI and translated to Spanish

Please let me or Tonya know if you need any additional information.

Thank You Russ Crawford Hayes Engineering, Inc.

From: Tonya Woods < twoods@winfieldtx.com>
Sent: Wednesday, October 29, 2025 8:39 AM

To: Russ Crawford < russ@HayesEngineering.net > Subject: Fwd: FW: WQ0012146001 City of Winfield
I'm forwarding what I received yesterday.
Tonya
Forwarded message From: Francesca Findlay <francesca.findlay@tceq.texas.gov> Date: Tue, Oct 28, 2025 at 4:21 PM Subject: FW: WQ0012146001 City of Winfield To: twoods@winfieldtx.com <twoods@winfieldtx.com></twoods@winfieldtx.com></francesca.findlay@tceq.texas.gov>
Dear Ms. Woods:
The attached Notice of Deficiency letter sent on October 27, 2025, requesting additional information needed to declare the application administratively complete. Please send the complete response to my attention November 12, 2025.
Thank you,
Francesca Findlay
License & Permit Specialist
ARP Team Water Quality Division
512-239-2441

Texas Commission on Environmental Quality



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

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