



# Administrative Package Cover Page

**This file contains the following documents:**

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



# Portada de Paquete Administrativo

**Este archivo contiene los siguientes documentos:**

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

## **Plain Language Summary**

### **TPDES Major Amendment Application**

The New Caney Municipal Utility District (CN600686505) operates the New Caney Municipal Utility District Wastewater Treatment Plant (RN102079837). The facility includes an activated sludge wastewater treatment system. The treatment train employs aeration mixing/oxidation, final clarification, effluent disinfection, dechlorination and flow measurement. The facility will be located at 23673 Sweetgum St. Montgomery, Texas 77357.

This application is for a Major Amendment to the wastewater treatment facility with a daily average discharge of 2.0 million gallons per day of treated domestic wastewater, increasing to 4.0 million gallons per day with the new wastewater treatment facility.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include screening, grit removal, orbital treatment, final clarifiers, aerobic sludge digesters, sludge dewatering equipment, disinfection, and dechlorination before discharge to the receiving stream.



## **Resumen en lenguaje sencillo**

### **Solicitud de Enmienda Mayor de TPDES**

El Distrito Municipal de Servicios Públicos de New Caney (CN600686505) opera la Planta de Tratamiento de Aguas Residuales (RN102079837). La instalación incluye un sistema de tratamiento de aguas residuales de lodos activados. El tren de tratamiento emplea mezcla por aireación/oxidación, clarificación final, desinfección de efluentes, dicloración y medición del flujo. La instalación estará ubicada en 23673 Sweetgum St. Montgomery, Texas 77357.

Esta solicitud es para una Enmienda Mayor a la planta de tratamiento de aguas residuales con un caudal medio diario de 2,0 millones de galones por día de aguas residuales domésticas tratadas, aumentando a 4,0 millones de galones por día con la nueva planta de tratamiento de aguas residuales.

Se espera que los vertidos de la instalación contengan demanda bioquímica de oxígeno carbonácea (CBOD5) durante cinco días, sólidos en suspensión total (TSS), nitrógeno amoníaco (NH3-N) y *Escherichia coli*. Las aguas residuales domésticas serán tratadas por una planta de proceso de lodos activados y las unidades de tratamiento incluirán cribado, eliminación de arenilla, tratamiento orbital, clarificadores finales, digestores aeróbicos, equipos de deshidratación de lodos, desinfección y descloración antes de la descarga al arroyo receptor.

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0012274001

**APPLICATION.** New Caney Municipal Utility District, P.O. Box 1799, New Caney, Texas 77357, has applied to the Texas Commission on Environmental Quality (TCEQ) to amend Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0012274001 (EPA I.D. No. TX0084638) to authorize an increase to the discharge of treated wastewater to a volume not to exceed an annual average flow of 4,000,000 gallons per day. The domestic wastewater treatment facility is located at 23673 Sweetgum Street, in Montgomery County, Texas 77357. The discharge route is from the plant site to an unnamed tributary of Caney Creek, thence to Caney Creek. TCEQ received this application on November 26, 2025. The permit application will be available for viewing and copying at New Caney Municipal Utility district, 23696 Roberts Road, New Caney, in Montgomery County, Texas prior to the date this notice is published in the newspaper. The application and associated notices are available electronically at the following webpage:

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

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.204166,30.137777&level=18>

**ALTERNATIVE LANGUAGE NOTICE.** Alternative language notice in Spanish is available at: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

El aviso de idioma alternativo en español está disponible en

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

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

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

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

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

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

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

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

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

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

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

Further information may also be obtained from New Caney Municipal Utility District at the address stated above or by calling Mr. Ricky McDonald, General Manager, at 281-689-2327.

Issuance Date: December 16, 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 MODIFICACION

**PERMISO NO. WQ0012274001**

**SOLICITUD.** El Distrito Municipal de New Caney, apartado postal 1799, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para modificar el Permiso No. WQ0012274001 (EPA I.D. No. TX0084638) del Sistema de Eliminación de Descargas de Contaminantes de Texas (TPDES) para autorizar un aumento del vertido de aguas residuales tratadas a un volumen que no exceda un cuadal medio anual de 4.00.00 de galones por día. La planta está ubicada 23672 Sweetgum Street, en el Condado de Montgomery, Texas 77357. La ruta de descarga es del sitio de la planta a un afluente sin nombre de Caney Creek, y de ahí hasta Caney Creek. La TCEQ recibió esta solicitud el 26 de noviembre de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en El Distrito Municipal de New Caney, 23696 Roberts Road, New Caney, en el condado de Montgomery antes de la fecha de publicación de este aviso en el periódico. La solicitud y los avisos asociados están disponibles electrónicamente en la siguiente página web:

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

Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.204166,30.137777&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.**

**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 agregue su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

**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](http://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 El Distrito Municipal de New Caney a la dirección indicada arriba o llamando a Sr. Ricky McDonald, Gerente General al 281-689-2327.

Fecha de emisión: el 16 de diciembre de 2025



November 24, 2025

Texas Commission on Environmental Quality  
Water Quality Division  
Applications Review and Processing Team

**RE: TPDES Domestic Wastewater Permit Major Amendment  
New Caney Municipal Utility District WWTF (CN600686505)  
Permit No. WQ0012274001  
(EPA ID. No. TX0084638)(RN102079837)**

Enclosed for your review and approval is the TPDES Domestic Wastewater Permit Major Amendment application for New Caney Municipal Utility District Wastewater Treatment Facility, Permit No. WQ0012274001. One original and three copies of the application are provided.

New Caney Municipal Utility District is requesting a change in the permitted flow limit from 2.0 MGD to 4.0 MGD due to increase in population in the City of New Caney. New Caney MUD is in the beginning stages of designing a new Wastewater Treatment Facility to better serve the community. This application includes design calculation and updated treatment units for New Caney MUD Wastewater Treatment Facility.

Current lab reports for Worksheet 4.0 and Technical Report 1.0 will be submitted under a separate cover as soon as results are made available.

New Caney MUD looks forward to the opportunity to work with the TCEQ on this project. Please Feel Free to Contact me at 409-554-8972 for questions and/or additional information.

Thank you,

A handwritten signature in blue ink, appearing to read 'Brian French', is written over a horizontal line.

Brian French, CPESC  
Environmental Scientist  
LJA Engineering, Inc.





## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

# DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

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

APPLICANT NAME: New Caney MUD

PERMIT NUMBER (If new, leave blank): WQ0012274-001

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

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

**For TCEQ Use Only**

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

Expiration Date \_\_\_\_\_

Region \_\_\_\_\_

Permit Number \_\_\_\_\_



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

### DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

#### Section 1. Application Fees (Instructions Page 26)

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

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

Minor Amendment (for any flow) \$150.00 ☐

#### Payment Information:

Mailed      Check/Money Order Number: Click to enter text.  
Check/Money Order Amount: Click to enter text.  
Name Printed on Check: Click to enter text.

EPAY      Voucher Number: Click to enter text.

Copy of Payment Voucher enclosed?      Yes ☐

#### Section 2. Type of Application (Instructions Page 26)

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

- ☒ Publicly Owned Domestic Wastewater
- ☐ Privately-Owned Domestic Wastewater
- ☐ Conventional Water Treatment

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

- ☒ Active      ☐ Inactive

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

- ☒ TPDES Permit  
☐ TLAP  
☐ TPDES Permit with TLAP component  
☐ Subsurface Area Drip Dispersal System (SADDS)

d. Check the box next to the appropriate application type

- ☐ New  
☒ Major Amendment with Renewal  
☐ Major Amendment without Renewal  
☐ Renewal without changes  
☐ Minor Amendment with Renewal  
☐ Minor Amendment without Renewal  
☐ Minor Modification of permit

e. For amendments or modifications, describe the proposed changes: New Caney MUD is requesting to change their permitted discharge limit from 2.0 MGD to 4.0 MGD.

f. For existing permits:

Permit Number: WQ00 12274001

EPA I.D. (TPDES only): TX 0084638

Expiration Date: June 28, 2026

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

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

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

New Caney Municipal Utility District

*(The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal documents forming the entity.)*

If the applicant is currently a customer with the TCEQ, what is the Customer Number (CN)? You may search for your CN on the TCEQ website at

<http://www15.tceq.texas.gov/crpub/>

CN: 600686505

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

Prefix: Mr.

Last Name, First Name: Smith, William

Title: President

Credential: Click to enter text.

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

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

Click to enter text.

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

If the co-applicant is currently a customer with the TCEQ, what is the Customer Number (CN)? You may search for your CN on the TCEQ website at:

<http://www15.tceq.texas.gov/crpub/>

CN: Click to enter text.

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

Provide a brief description of the need for a co-permittee: Click to enter text.

**C. Core Data Form**

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

## Section 4. Application Contact Information (Instructions Page 27)

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

**A.** Prefix: Mr.

Last Name, First Name: French, Brian

Title: Project Manager

Credential: Click to enter text.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2615 Calder Ave. Suite 500 City, State, Zip Code: Beaumont, Texas 77702

Phone No.: 409-554-8972

E-mail Address: bfrench@lja.com

Check one or both:  
Contact



Administrative Contact



Technical

**B.** Prefix: Mr.

Last Name, First Name: Flowers, Jimmy

Title: Vice President

Credential: P.E.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2014 Airport Road Suite 100 City, State, Zip Code: Conroe, Texas 77301

Phone No.: 713-450-1300

E-mail Address: jflowers@lja.com

Check one or both: ☒ Administrative Contact ☒ Technical Contact

## Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Mr.

Last Name, First Name: McDonald, Ricky

Title: General Manager

Credential: Click to enter text.

Organization Name: New Caney Municipal Utility District

Mailing Address: 23696 Roberts Road  
77357

City, State, Zip Code: New Caney, TX

Phone No.: 281-689-2327

E-mail Address: ricky@newcaneymud.org

B. Prefix: Mr.

Last Name, First Name: Kay, Jeffery

Title: Lead Operator

Credential: Click to enter text.

Organization Name: New Caney Municipal Utility District

Mailing Address: 23696 Robers Road  
77357

City, State, Zip Code: New Caney, TX

Phone No.: 281-659-4407

E-mail Address: jeff@newcaneymud.org

## 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: Mrs.

Last Name, First Name: Latham, Lisa

Title: Office Manager

Credential: Click to enter text.

Organization Name: New Caney Municipal Utility District

Mailing Address: 23696 Roberts Road  
77357

City, State, Zip Code: New Caney, Texas

Phone No.: 281-689-2327

E-mail Address: lisa@newcaneymud.org

## 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: Kay, Jeffery

Title: Lead Operator

Credential: Click to enter text.

Organization Name: New Caney Municipal Utility District

Mailing Address: 23696 Roberts Road  
77357

City, State, Zip Code: New Caney, TX

Phone No.: 281-659-4407

E-mail Address: jeff@newcaneymud.org

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

### A. Individual Publishing the Notices

Prefix: Mr.

Last Name, First Name: French, Brian

Title: Project Manager

Credential: Click to enter text.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2615 Calder Ave. Suite 500 City, State, Zip Code: Beaumont, Tx 77702

Phone No.: 409-554-8972

E-mail Address: bfrench@lja.com

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

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

☒ E-mail Address

☐ Fax

☒ Regular Mail

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

Prefix: Mr.

Last Name, First Name: Flowers, Jimmy

Title: Vice President

Credential: Click to enter text.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2014 Airport Road Suite 100 City, State, Zip Code: Conroe, Texas 77301

Phone No.: 713-450-1300

E-mail Address: jflowers@lja.com

### D. Public Viewing Information

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

Public building name: District Office

Location within the building: Front Dest

Physical Address of Building: 23696 Roberts Road

City: New Caney

County: Montgomery

Contact (Last Name, First Name): Ricky McDonald

Phone No.: 281-689-2327 Ext.: Click to enter text.

#### E. Bilingual Notice Requirements

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

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

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

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

☒ Yes ☐ No

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

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

#### F. Summary of Application in Plain Language Template

Complete the F. Summary of Application in Plain Language Template (TCEQ Form 20972), also known as the plain language summary or PLS, and include as an attachment.

Attachment: K



### G. Public Involvement Plan Form

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

Attachment: L

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

- A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 102079837

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

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

New Caney Municipal Utility District Wastewater Treatment Plant

- C. Owner of treatment facility: New Caney Municipal Utility District

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

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

Organization Name: New Caney Municipal Utility District

Mailing Address: 23696 Roberts Road  
77357

City, State, Zip Code: New Caney, TX

Phone No.: 281-689-2327

E-mail Address: ricky@newcaneymud.org

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

Attachment: Click to enter text.

- E. Owner of effluent disposal site:

Prefix: NA

Last Name, First Name: NA

Title: NA

Credential: NA

Organization Name: NA

Mailing Address: NA

City, State, Zip Code: NA

Phone No.: NA

E-mail Address: NA

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: NA

- F. Owner sewage sludge disposal site (if authorization is requested for sludge

disposal on property owned or controlled by the applicant)::

Prefix: NA

Last Name, First Name: NA

Title: NA

Credential: NA

Organization Name: NA

Mailing Address: NA

City, State, Zip Code: NA

Phone No.: NA

E-mail Address: NA

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:** NA

## Section 10. TPDES Discharge Information (Instructions Page 31)

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

☒ Yes ☐ No

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

Click to enter text.

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

☒ Yes ☐ No

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

Click to enter text.

City nearest the outfall(s): New Caney

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

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

**Attachment:** Click to enter text.

D. For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the

point(s) of discharge: Click to enter text.

## Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ NAYes ☐ No

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

Click to enter text.

- B. City nearest the disposal site: Click to enter text.
- C. County in which the disposal site is located: Click to enter text.
- D. For TLAPs, describe the routing of effluent from the treatment facility to the disposal site:

Click to enter text.

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

## Section 12. Miscellaneous Information (Instructions Page 32)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

Click to enter text.

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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

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

Account number: Click to enter text.

Amount past due: Click to enter text.

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

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

Enforcement order number: Click to enter text.

Amount past due: Click to enter text.

### Section 13. Attachments (Instructions Page 33)

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

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

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

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

☐ **Attachment 1 for Individuals as co-applicants**

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

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

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

Permit Number: WQ0012274001

Applicant: New Caney Municipal Utility District

Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under 30 Texas Administrative Code § 305.44 to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signatory name (typed or printed): William B. Smith

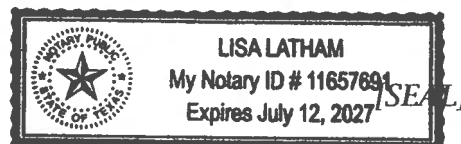
Signatory title: President

Signature: WB Smith Date: 11/12/25  
(Use blue ink)

Subscribed and Sworn to before me by the said WB Smith  
on this November 12 day of 12 November, 20 25.  
My commission expires on the July day of 12, 20 27.

Lisa Latham  
Notary Public

Montgomery, TX  
County, Texas







# DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

The following information is required for new and amendment applications.

## Section 1. Affected Landowner Information (Instructions Page 36)

- A. ☒ Indicate by a check mark that the landowners map or drawing, with scale, includes the following information, as applicable:
- ☒ The applicant's property boundaries
  - ☒ The facility site boundaries within the applicant's property boundaries
  - ☒ The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone
  - ☒ The property boundaries of all landowners surrounding the applicant's property (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
  - ☒ The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream
  - ☒ The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge
  - ☒ The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides
  - ☒ The boundaries of the effluent disposal site (for example, irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property
  - ☒ The property boundaries of all landowners surrounding the effluent disposal site
  - ☐ The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners surrounding the applicant's property boundaries where the sewage sludge land application site is located
  - ☒ The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (for example, sludge surface disposal site or sludge monofill) is located
- B. ☒ Indicate by a check mark that a separate list with the landowners' names and mailing addresses cross-referenced to the landowner's map has been provided.



- C. ☒ Indicate by a check mark that the landowners list has also been provided as mailing labels in electronic format (Avery 5160).
- D. Provide the source of the landowners' names and mailing addresses: Montgomery County Appraisal District
- E. As required by *Texas Water Code § 5.115*, is any permanent school fund land affected by this application?
- ☐ Yes      ☒ No

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

Click to enter text.

## Section 2. Original Photographs (Instructions Page 38)

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

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

## Section 3. Buffer Zone Map (Instructions Page 38)

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

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

- B. Buffer zone compliance method. Indicate how the buffer zone requirements

will be met. Check all that apply.

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

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

- ☒ Yes      ☐ No



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

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

**TCEQ USE ONLY:**

Application type: \_\_\_\_Renewal \_\_\_\_Major Amendment \_\_\_\_Minor Amendment \_\_\_\_New

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

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

Agency Receiving SPIF:

\_\_\_\_ Texas Historical Commission

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

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

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

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

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

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

The following applies to all applications:

1. Permittee: New Caney Municipal Utility District

Permit No. WQ00 12274001

EPA ID No. TX 0084638

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

Approximately 0.4 miles east and 1.4 miles south of the intersection of Caney Creek and State Highway 59 in Montgomery County, Texas.

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

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

First and Last Name: McDonald, Ricky

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

Title: General Manager

Mailing Address: 23696 Roberts Road

City, State, Zip Code: New Caney, TX 77357

Phone No.: 281-689-2327 Ext.:

Fax No.:

E-mail Address: ricky@newcaneymud.org

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

42" plant to unnamed tributary to Caney Creek, thence to segment No. 1010 of San Jacinto River Basin.

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

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

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

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

☐ Disturbance of vegetation or wetlands

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

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

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

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

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



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

### DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

##### A. Existing/Interim I Phase

Design Flow (MGD): 2.0

2-Hr Peak Flow (MGD): 10.0

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

##### 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: Click to enter text.

##### C. Final Phase

Design Flow (MGD): 4.0

2-Hr Peak Flow (MGD): 20.0

Estimated construction start date: 2029

Estimated waste disposal start date: 2032

##### D. Current Operating Phase

Provide the startup date of the facility: July, 1985

#### 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.

Attachment M

#### 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)
Gravity Thickener	2	22' X 22' X 22'
Clarifier	2	105' X 12' SWD
Premix Tank	2	22' X 6' 22'
Chlorine Contact	2	105' X 7' X 10'
Digester	4	40' X 40' X 22'
Belt Press	2	2.0 meters

#### C. Process Flow Diagram

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

Attachment: C

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

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

- Latitude: 30.137896
- Longitude: -95.203214

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

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

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

The boundaries of the treatment facility;

The boundaries of the area served by the treatment facility;



If land disposal of effluent, the boundaries of the disposal site and all storage/holding ponds; and

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

**Attachment: B**

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

City of New Caney and District Boundary

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

**Collection System Information**

Collection System Name	Owner Name	Owner Type	Population Served
New Caney MUD	New Caney MUD	Publicly Owned	
		Choose an item.	
		Choose an item.	
		Choose an item.	

**Section 4. Unbuilt Phases (Instructions Page 44)**

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

## Section 5. Closure Plans (Instructions Page 44)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

Click to enter text.

## Section 6. Permit Specific Requirements (Instructions Page 44)

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

### A. Summary transmittal

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

☒ Yes ☐ No

If yes, provide the date(s) of approval for each phase: Click to enter text.

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

Click to enter text.

**B. Buffer zones**

Have the buffer zone requirements been met?

☒ Yes ☐ No

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

Click to enter text.

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

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

☐ Yes ☒ No

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

Click to enter text.

**D. Grit and grease treatment**

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

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

☐ Yes ☒ No

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

**2. Grit and grease processing**

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

Click to enter text.

**3. Grit disposal**

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

☐ Yes ☒ No

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

Describe the method of grit disposal.

Click to enter text.

**4. Grease and decanted liquid disposal**

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

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

Click to enter text.

**E. Stormwater management**

**1. Applicability**

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

**2. MSGP coverage**

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

☒ Yes ☐ No

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

TXR05 FX29 or TXRNE Click to enter text.

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

☐ Yes ☐ No

**3. Conditional exclusion**

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

☐ Yes ☐ No

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

Click to enter text.

**4. Existing coverage in individual permit**

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

☐ Yes ☐ No

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

Click to enter text.

**5. Zero stormwater discharge**

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

☐ Yes ☐ No

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

Click to enter text.

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

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

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

☐ Yes ☐ No

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

Click to enter text.

Note: Direct stormwater discharges to waters in the state authorized through this individual permit will require the development and implementation of a stormwater pollution prevention plan (SWPPP) and will be subject to additional

monitoring and reporting requirements. Indirect discharges of stormwater via headworks recycling will require compliance with all individual permit requirements including 2-hour peak flow limitations. All stormwater discharge authorization requests will require additional information during the technical review of your application.

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

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

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

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

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

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

☐ Yes ☒ No

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

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

[Click to enter text.](#)

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

**2. Acceptance of septic waste**

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

**If yes to any of the above, provide the date the plant started or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD<sub>5</sub> concentration of the**

septic waste, and the design BOD<sub>5</sub> concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

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

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

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

☐ Yes ☒ No

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

Click to enter text.

## Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 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. ***Wastewater treatment facilities*** complete Table 1.0(2). ***Water treatment facilities*** discharging filter backwash water, complete Table 1.0(3). Provide copies of the laboratory results sheets. **These tables are not applicable for a minor amendment without renewal.** See the instructions for guidance.



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

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

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

\*TPDES permits only

†TLAP permits only

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

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

## Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: Jeffery Kay

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

Facility Operator's License Number: WW0015694

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

### A. WWTP's Sewage Sludge or Biosolids Management Facility Type

Check all that apply. See instructions for guidance

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

### B. WWTP's Sewage Sludge or Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

- ☐ Long Term Storage ( $\geq 2$  years)
- ☐ Methane or Biogas Recovery
- ☐ Other Treatment Process: [Click to enter text.](#)

### C. Sewage Sludge or Biosolids Management

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
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

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

### D. Disposal site

Disposal site name: [Waste management Security Landfill](#)

TCEQ permit or registration number: [Reg No. 1752-A](#)

County where disposal site is located: [Liberty](#)

### E. Transportation method

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

Name of the hauler: [New Caney MUD](#)

Hauler registration number: [Transportation No. 22220](#)

Sludge is transported as a:

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

## Section 10. Permit Authorization for Sewage Sludge Disposal

## (Instructions Page 52)

### A. Beneficial use authorization

Does the existing permit include authorization for land application 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)?

☐ Yes ☐ No

### B. Sludge processing authorization

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

Sludge Composting ☐ Yes ☒ No

Marketing and Distribution of Biosolids ☐ Yes ☒ No

Sludge Surface Disposal or Sludge Monofill ☐ Yes ☒ No

Temporary storage in sludge lagoons ☐ Yes ☒ No

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

☐ Yes ☐ No

## Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

### A. Location information

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

- Original General Highway (County) Map:  
**Attachment:** [Click to enter text.](#)
- USDA Natural Resources Conservation Service Soil Map:

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

- Federal Emergency Management Map:

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

- Site map:

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

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

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

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

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

[Click to enter text.](#)

## **B. Temporary storage information**

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

Nitrate Nitrogen, mg/kg: [Click to enter text.](#)

Total Kjeldahl Nitrogen, mg/kg: [Click to enter text.](#)

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

Phosphorus, mg/kg: [Click to enter text.](#)

Potassium, mg/kg: [Click to enter text.](#)

pH, standard units: [Click to enter text.](#)

Ammonia Nitrogen mg/kg: [Click to enter text.](#)

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

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

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

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

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

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

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

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

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

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

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

Provide the following information:

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

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

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

### C. Liner information

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

☐ Yes ☐ No

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

[Click to enter text.](#)

### D. Site development plan

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

[Click to enter text.](#)

Attach the following documents to the application.

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

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

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

#### **E. Groundwater monitoring**

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

☐ Yes ☐ No

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

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

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

#### **A. Additional authorizations**

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

☐ Yes ☒ No

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

Click to enter text.

**B. Permittee enforcement status**

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

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

**A. RCRA hazardous wastes**

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

☐ Yes ☒ No

**B. Remediation activity wastewater**

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

☐ Yes ☒ No

**C. Details about wastes received**



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

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

## Section 14. Laboratory Accreditation (Instructions Page 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:
  - periodically inspected by the TCEQ; or
  - located in another state and is accredited or inspected by that state; or
  - performing work for another company with a unit located in the same site; or
  - performing pro bono work for a governmental agency or charitable organization.
- The laboratory is accredited under federal law.
- The data are needed for emergency-response activities, and a laboratory accredited under the Texas Laboratory Accreditation Program is not available.
- The laboratory supplies data for which the TCEQ does not offer accreditation.

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

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

### CERTIFICATION:

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

Printed Name: Brian French

Title: Project Manager

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



Date: 11-10-25\_\_\_\_\_

# DOMESTIC WASTEWATER PERMIT APPLICATION

## TECHNICAL REPORT 1.1

The following information is required for new and amendment major applications.

### Section 1. Justification for Permit (Instructions Page 56)

#### A. Justification of permit need

Provide a detailed discussion regarding the need for any phase(s) not currently permitted. Failure to provide sufficient justification may result in the Executive Director recommending denial of the proposed phase(s) or permit.

Due to population growth within the MUD the wastewater treatment facility is needing to increase flow capacity.

#### B. Regionalization of facilities

For additional guidance, please review [TCEQ's Regionalization Policy for Wastewater Treatment](#)<sup>1</sup>.

Provide the following information concerning the potential for regionalization of domestic wastewater treatment facilities:

##### 1. *Municipally incorporated areas*

If the applicant is a city, then Item 1 is not applicable. Proceed to Item 2 Utility CCN areas.

Is any portion of the proposed service area located in an incorporated city?

☐ Yes ☒ No ☐ Not Applicable

**If yes**, within the city limits of: Click to enter text.

**If yes**, attach correspondence from the city.

**Attachment:** Click to enter text.

If consent to provide service is available from the city, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the city versus the cost of the proposed facility or expansion attached.

---

<sup>1</sup> <https://www.tceq.texas.gov/permitting/wastewater/tceq-regionalization-for-wastewater>

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

**2. Utility CCN areas**

Is any portion of the proposed service area located inside another utility's CCN area?

☐ Yes ☒ No

**If yes,** attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the CCN facilities versus the cost of the proposed facility or expansion.

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

**3. Nearby WWTPs or collection systems**

Are there any domestic permitted wastewater treatment facilities or collection systems located within a three-mile radius of the proposed facility?

☒ Yes ☐ No

**If yes,** attach a list of these facilities and collection systems that includes each permittee's name and permit number, and an area map showing the location of these facilities and collection systems.

**Attachment:** [N](#)

**If yes,** attach proof of mailing a request for service to each facility and collection system, the letters requesting service, and correspondence from each facility and collection system.

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

If the facility or collection system agrees to provide service, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the facility or collection system versus the cost of the proposed facility or expansion.

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

## Section 2. Proposed Organic Loading (Instructions Page 58)

Is this facility in operation?

☒ Yes ☐ No

**If no,** proceed to Item B, Proposed Organic Loading.

**If yes,** provide organic loading information in Item A, Current Organic Loading

**A. Current organic loading**

Facility Design Flow (flow being requested in application): 4.0 MGD

Average Influent Organic Strength or BOD<sub>5</sub> Concentration in mg/l: 200

Average Influent Loading (lbs/day = total average flow X average BOD<sub>5</sub> conc. X 8.34): 6672

Provide the source of the average organic strength or BOD<sub>5</sub> concentration.

Existing

#### B. Proposed organic loading

This table must be completed if this application is for a facility that is not in operation or if this application is to request an increased flow that will impact organic loading.

**Table 1.1(1) – Design Organic Loading**

Source	Total Average Flow (MGD)	Influent BOD <sub>5</sub> Concentration (mg/l)
Municipality		
Subdivision		
Trailer park - transient		
Mobile home park		
School with cafeteria and showers		
School with cafeteria, no showers		
Recreational park, overnight use		
Recreational park, day use		
Office building or factory		
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources		
AVERAGE BOD <sub>5</sub> from all sources		

### Section 3. Proposed Effluent Quality and Disinfection

## (Instructions Page 58)

### A. Existing/Interim I Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 10

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 3

Total Phosphorus, mg/l: Click to enter text.

Dissolved Oxygen, mg/l: 4

Other: Chlorine residual = 1 mg/L after 20 minutes detention time

### B. Interim II Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: Click to enter text.

Total Suspended Solids, mg/l: Click to enter text.

Ammonia Nitrogen, mg/l: Click to enter text.

Total Phosphorus, mg/l: Click to enter text.

Dissolved Oxygen, mg/l: Click to enter text.

Other: Click to enter text.

### C. Final Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 10

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 3

Total Phosphorus, mg/l: Click to enter text.

Dissolved Oxygen, mg/l: 4

Other: Chlorine residual = 1 mg/L after 20 minutes detention time

### D. Disinfection Method

Identify the proposed method of disinfection.

☒ Chlorine: 1 mg/l after 20 minutes detention time at peak flow

Dechlorination process: Click to enter text.

☐ Ultraviolet Light: Click to enter text. seconds contact time at peak flow

☐ Other: Click to enter text.

## Section 4. Design Calculations (Instructions Page 58)

Attach design calculations and plant features for each proposed phase. Example 4 of the instructions includes sample design calculations and plant features.

Attachment: J

## Section 5. Facility Site (Instructions Page 59)

### A. 100-year floodplain

Will the proposed facilities be located above the 100-year frequency flood level?

☒ Yes ☐ No

If **no**, describe measures used to protect the facility during a flood event. Include a site map showing the location of the treatment plant within the 100-year frequency flood level. If applicable, provide the size and types of protective structures.

Click to enter text.

Provide the source(s) used to determine 100-year frequency flood plain.

For a new or expansion of a facility, will a wetland or part of a wetland be filled?

☐ Yes ☒ No

If **yes**, has the applicant applied for a US Corps of Engineers 404 Dredge and Fill Permit?

☐ Yes ☐ No

If **yes**, provide the permit number: Click to enter text.

If **no**, provide the approximate date you anticipate submitting your application to the Corps: Click to enter text.

### B. Wind rose

Attach a wind rose: G

## Section 6. Permit Authorization for Sewage Sludge Disposal (Instructions Page 59)

### A. Beneficial use authorization

Are you requesting to include authorization to land apply sewage sludge for beneficial use on property located adjacent to the wastewater treatment facility under the wastewater permit?

☐ Yes ☒ No

If **yes**, attach the completed **Application for Permit for Beneficial Land Use of Sewage Sludge** (TCEQ Form No. 10451): Click to enter text.

### B. Sludge processing authorization

Identify the sludge processing, storage or disposal options that will be conducted at the wastewater treatment facility:

- ☐ Sludge Composting
- ☐ Marketing and Distribution of sludge
- ☐ Sludge Surface Disposal or Sludge Monofill

If any of the above, sludge options are selected, attach the completed **Domestic Wastewater Permit Application: Sewage Sludge Technical Report (TCEQ Form No. 10056)**: [Click to enter text.](#)

## Section 7. Sewage Sludge Solids Management Plan (Instructions Page 60)

Attach a solids management plan to the application.

**Attachment: Q**

The sewage sludge solids management plan must contain the following information:

- Treatment units and processes dimensions and capacities
- Solids generated at 100, 75, 50, and 25 percent of design flow
- Mixed liquor suspended solids operating range at design and projected actual flow
- Quantity of solids to be removed and a schedule for solids removal
- Identification and ownership of the ultimate sludge disposal site
- For facultative lagoons, design life calculations, monitoring well locations and depths, and the ultimate disposal method for the sludge from the facultative lagoon

An example of a sewage sludge solids management plan has been included as Example 5 of the instructions.



### 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.

### Section 4. Description of Immediate Receiving Waters (Instructions Page 63)

Name of the immediate receiving waters: Unnamed Tributary of Caney Creek

#### A. Receiving water type

Identify the appropriate description of the receiving waters.

- ☒ Stream
- ☐ Freshwater Swamp or Marsh
- ☐ Lake or Pond

Surface area, in acres: Click to enter text.

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

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

- ☐ Man-made Channel or Ditch
- ☐ Open Bay
- ☐ Tidal Stream, Bayou, or Marsh
- ☒ Other, specify: Intermittent Flows

#### B. Flow characteristics

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

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

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

- ☐ USGS flow records
- ☐ Historical observation by adjacent landowners
- ☒ Personal observation
- ☐ Other, specify: Click to enter text.

#### C. Downstream perennial confluences

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

Receiving stream joins Caney Creek at about one mile downstream. Peach Creek joins Caney Creek about three miles downstream.

#### D. Downstream characteristics

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

☐ Yes ☒ No

If yes, discuss how.

Click to enter text.

#### E. Normal dry weather characteristics

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

Only flow is from plant with intermittent flows from surface run-off during dry weather periods

Date and time of observation: November 10, 2019 approx. 2:00 P.M

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☒ No

## Section 5. General Characteristics of the Waterbody (Instructions Page 65)

#### A. Upstream influences

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

- |   |   |
|---|---|
| <input type="checkbox"/> Oil field activities           | <input type="checkbox"/> Urban runoff                                   |
| <input checked="" type="checkbox"/> Upstream discharges | <input type="checkbox"/> Agricultural runoff                            |
| <input type="checkbox"/> Septic tanks                   | <input type="checkbox"/> Other(s), specify: <u>Click to enter text.</u> |

#### B. Waterbody uses

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

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

- |  |  |
|--|--|
| <input type="checkbox"/> Fishing               | <input type="checkbox"/> Navigation  |
| <input type="checkbox"/> Domestic water supply | <input type="checkbox"/> Industrial water supply                                 |
| <input type="checkbox"/> Park activities       | <input checked="" type="checkbox"/> Other(s), specify: <u>Conduit from plant</u> |
| <u>effluent and local run-off</u>              |  |

### C. Waterbody aesthetics

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

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



# DOMESTIC WASTEWATER PERMIT APPLICATION

## WORKSHEET 4.0: POLLUTANT ANALYSIS REQUIREMENTS

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

This worksheet is not required for minor amendments without renewal.

### Section 1. Toxic Pollutants (Instructions Page 76)

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

Grab ☐ Composite ☐

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

**Table 4.0(1) – Toxics Analysis**

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

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

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Endrin				0.02
Epichlorohydrin				---
Ethylbenzene				10
Ethylene Glycol				---
Fluoride				500
Guthion				0.1
Heptachlor				0.01
Heptachlor Epoxide				0.01
Hexachlorobenzene				5
Hexachlorobutadiene				10
Hexachlorocyclohexane (alpha)				0.05
Hexachlorocyclohexane (beta)				0.05
gamma-Hexachlorocyclohexane (Lindane)				0.05
Hexachlorocyclopentadiene				10
Hexachloroethane				20
Hexachlorophene				10
4,4'-Isopropylidenediphenol				1
Lead				0.5
Malathion				0.1
Mercury				0.005
Methoxychlor				2
Methyl Ethyl Ketone				50
Methyl tert-butyl ether				---
Mirex				0.02
Nickel				2
Nitrate-Nitrogen				100
Nitrobenzene				10
N-Nitrosodiethylamine				20
N-Nitroso-di-n-Butylamine				20
Nonylphenol				333
Parathion (ethyl)				0.1
Pentachlorobenzene				20
Pentachlorophenol				5
Phenanthrene				10

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

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

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

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



## Section 2. Priority Pollutants

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

Grab ☐ Composite ☐

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

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

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

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

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

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

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

**Table 4.0(2)C – Acid Compounds**

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

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

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

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

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

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

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

### Section 3. Dioxin/Furan Compounds

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

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

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

Click to enter text.

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

- ☐ Yes ☐ No

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

Click to enter text.

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

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

Grab ☐ Composite ☐

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

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

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





# 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: 0

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

Significant IUs - non-categorical:

Number of IUs: 0

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

Other IUs:

Number of IUs: 0

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

#### B. Treatment plant interference

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

☐ Yes ☒ No

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

Click to enter text.

#### C. Treatment plant pass through

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

☐ Yes ☐ No

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

Click to enter text.

#### D. Pretreatment program

Does your POTW have an approved pretreatment program?

☐ Yes ☒ No

If yes, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

☐ Yes ☒ No

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

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

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

Click to enter text.

#### B. Non-substantial modifications

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

☐ Yes ☒ No

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

Click to enter text.

### C. Effluent parameters above the MAL

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

**Table 1.0(1) – Parameters Above the MAL**

Pollutant	Concentration	MAL	Units	Date

### D. Industrial user interruptions

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

☐ Yes ☒ No

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

Click to enter text.

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

## Categorical Industrial User (CIU) (Instructions Page 88)

### A. General information

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

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

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

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

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

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

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

### B. Process information

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

[Click to enter text.](#)

### C. Product and service information

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

[Click to enter text.](#)

### D. Flow rate information

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

Process Wastewater:

Discharge, in gallons/day: [Click to enter text.](#)

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: [Click to enter text.](#)

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

### E. Pretreatment standards

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

☐ Yes ☐ No

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

☐ Yes ☐ No

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

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

[Click or tap here to enter text.](#) [Click to enter text.](#)

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

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

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

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

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

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

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

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

#### F. Industrial user interruptions

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

☐ Yes ☐ No

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

[Click to enter text.](#)



## Attachment Index

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Attachment	Title
A	Original USGS Topographic Map
B	Site Drawing
C	Flow Diagram
D	Additional USGS Topographic Map
E	Laboratory Results
F	Core Data Form
G	Wind Rose Map
H	Affected Landowners Map
I	Buffer Zone Map
J	Design Calculations
K	Plain Language Statement
L	Public Involvement Form
M	Treatment Process
N	Nearby WWTP Map
O	Sewage Sludge Solids Management Plan



## Attachment A

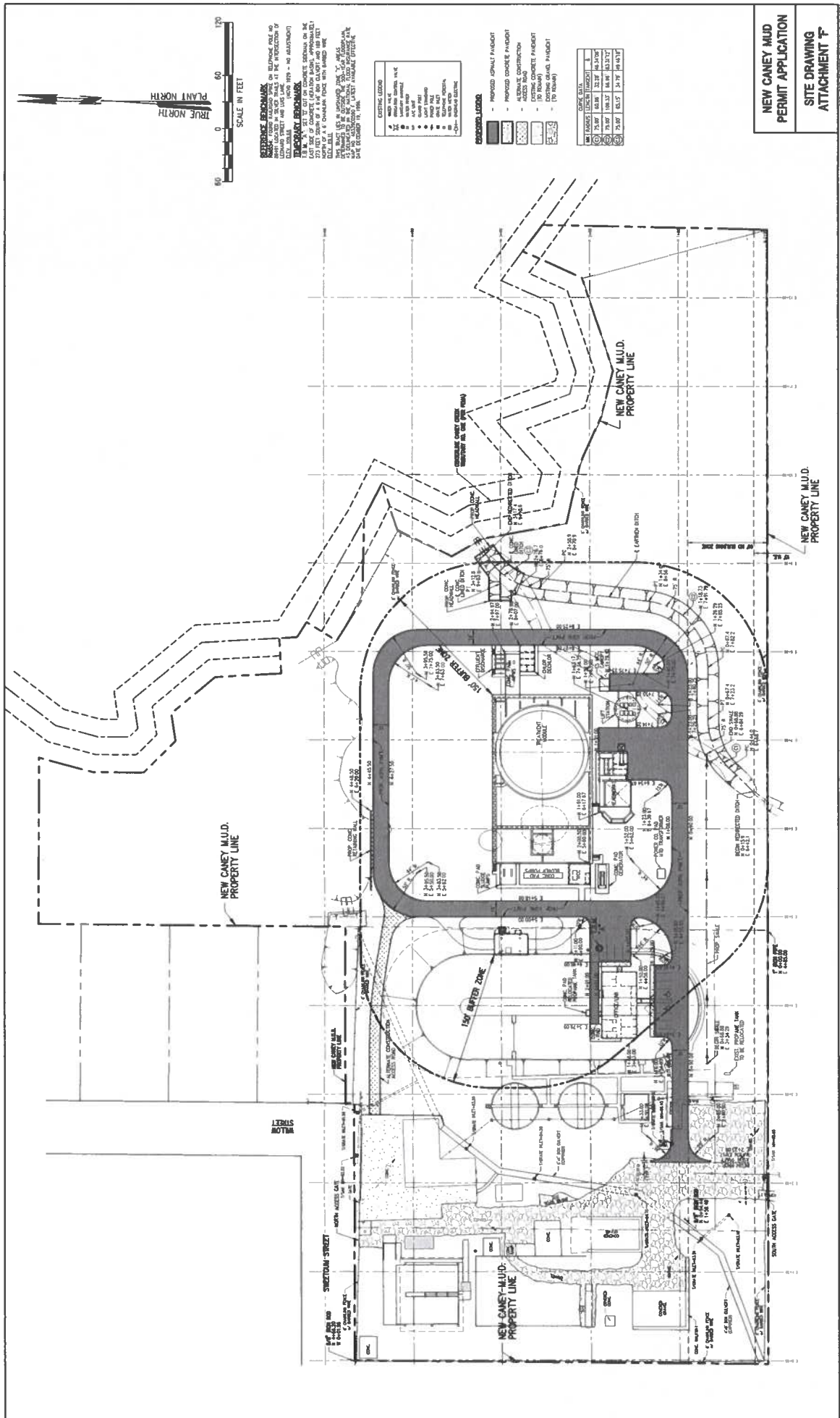
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Original USGS Topographic Map

## Attachment B

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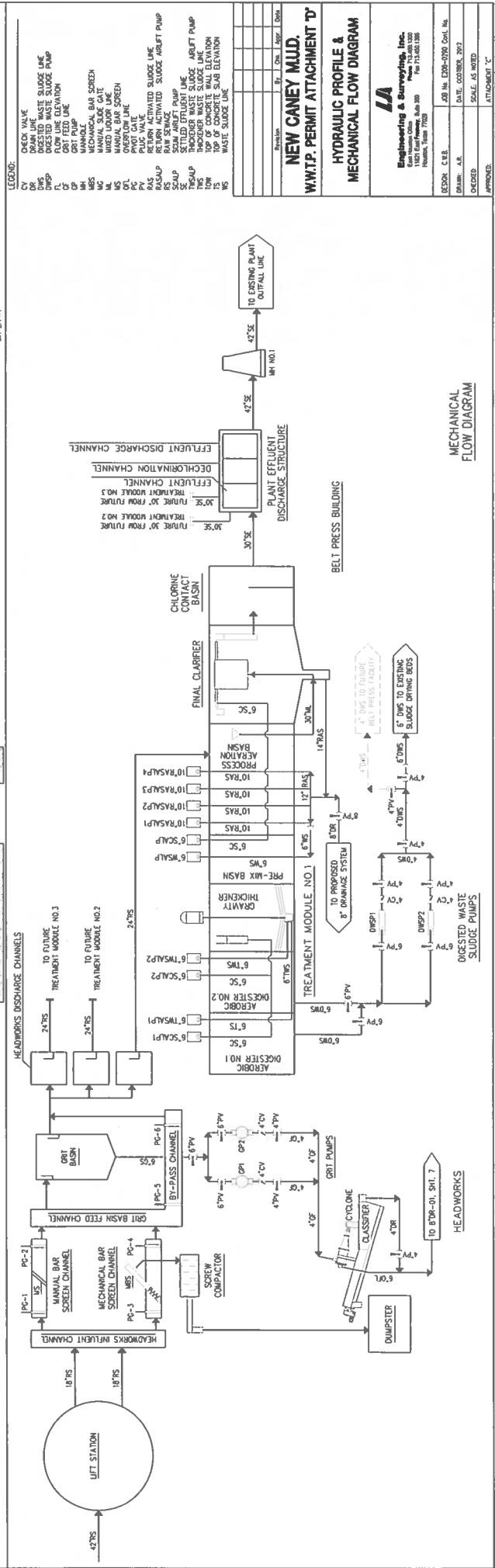
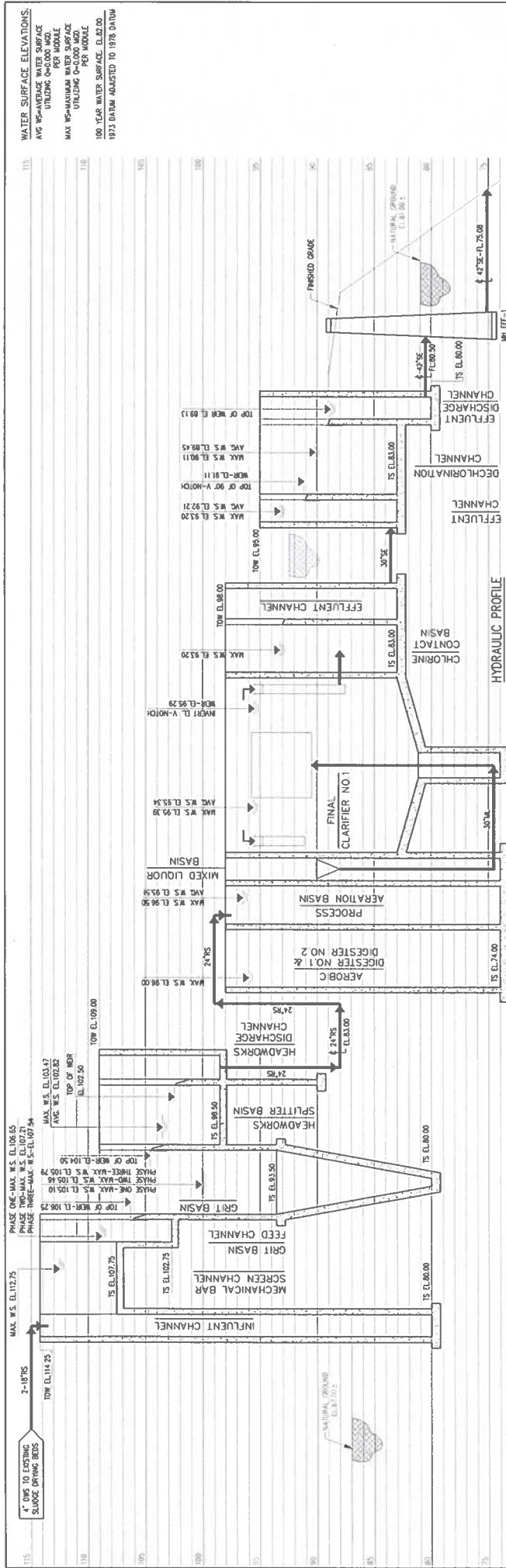
### Site Drawing



## Attachment C

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### Flow Diagram



## Attachment D

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### Additional USGS Map

## Attachment E

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### Laboratory Results

## Attachment F

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### Core Data Form





TCEQ Use Only

# TCEQ Core Data Form

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

## SECTION I: General Information

<b>1. Reason for Submission</b> (If other is checked please describe in space provided.)		
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input checked="" type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)	<input checked="" type="checkbox"/> Other <b>Major Amendment</b>	
<b>2. Customer Reference Number</b> (if issued)	<a href="#">Follow this link to search for CN or RN numbers in Central Registry**</a>	<b>3. Regulated Entity Reference Number</b> (if issued)
CN 600686505		RN 102079837

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (mm/dd/yyyy)		12/10/2019	
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership					
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
<b>6. Customer Legal Name</b> (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
New Caney Municipal Utility District					
<b>7. TX SOS/CPA Filing Number</b>		<b>8. TX State Tax ID</b> (11 digits)		<b>9. Federal Tax ID</b> (9 digits)	<b>10. DUNS Number</b> (if applicable)
30009391878		99-881815-0		N/A	179700067
<b>11. Type of Customer:</b>		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		<input checked="" type="checkbox"/> Other: Municipal Utility District	
<b>12. Number of Employees</b>				<b>13. Independently Owned and Operated?</b>	
<input type="checkbox"/> 0-20 <input checked="" type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>14. Customer Role</b> (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input checked="" type="checkbox"/> Other: Municipal Utility District					
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
<b>15. Mailing Address:</b>					
P.O. Box 1799					
City		New Caney		State	TX
ZIP		77357		ZIP + 4	3282
<b>16. Country Mailing Information</b> (if outside USA)				<b>17. E-Mail Address</b> (if applicable)	
				ricky@newcaneymud.org	

<b>18. Telephone Number</b> ( 281 ) 689-2327	<b>19. Extension or Code</b> 0	<b>20. Fax Number (if applicable)</b> ( 281 ) 689-3619
---	-----------------------------------	---

## SECTION III: Regulated Entity Information

<b>21. General Regulated Entity Information</b> (If 'New Regulated Entity' is selected, a new permit application is also required.) <input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input checked="" type="checkbox"/> Update to Regulated Entity Information							
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>							
<b>22. Regulated Entity Name</b> (Enter name of the site where the regulated action is taking place.) New Caney MUD WWTP							
<b>23. Street Address of the Regulated Entity:</b>  (No PO Boxes)	23673 Sweetgum Street						
	<b>City</b>	New Caney	<b>State</b>	TX	<b>ZIP</b>	77357	<b>ZIP + 4</b>
<b>24. County</b>	Montgomery						

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

<b>25. Description to Physical Location:</b>	0.4 miles east and 1.6 miles south of Caney Creek and State Highway 59 in Montgomery County, Texas 77357						
<b>26. Nearest City</b>	<b>State</b>					<b>Nearest ZIP Code</b>	
Roman Forest	TX					77357	
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>							
<b>27. Latitude (N) In Decimal:</b>		30.137610			<b>28. Longitude (W) In Decimal:</b>		-95.204275
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds		
<b>29. Primary SIC Code</b> (4 digits)	<b>30. Secondary SIC Code</b> (4 digits)		<b>31. Primary NAICS Code</b> (5 or 6 digits)		<b>32. Secondary NAICS Code</b> (5 or 6 digits)		
4952			221320				
<b>33. What is the Primary Business of this entity?</b> (Do not repeat the SIC or NAICS description.) Municipal Utility District							
<b>34. Mailing Address:</b>	P.O. Box 1799						
	<b>City</b>	New Caney	<b>State</b>	TX	<b>ZIP</b>	77357	<b>ZIP + 4</b>
<b>35. E-Mail Address:</b>	ricky@newcaneymud.org						
<b>36. Telephone Number</b>	<b>37. Extension or Code</b>		<b>38. Fax Number (if applicable)</b>				
( 281 ) 689-2327			( ) -				

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

<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input checked="" type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:
	WQ0012274-001			

#### SECTION IV: Preparer Information

<b>40. Name:</b>	Brian French	<b>41. Title:</b>	Project Manager
<b>42. Telephone Number</b>	<b>43. Ext./Code</b>	<b>44. Fax Number</b>	<b>45. E-Mail Address</b>
( 409 ) 554-8972		( ) -	bfrench@lja.com

#### SECTION V: Authorized Signature

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

<b>Company:</b>	New Caney MUD	<b>Job Title:</b>	General Manager
<b>Name (In Print):</b>	Ricky McDonald	<b>Phone:</b>	( 281 ) 689-2327
<b>Signature:</b>		<b>Date:</b>	11/12/25

## Attachment G

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### Wind Rose Map

# Wind rose New Caney

Texas, United States of America, 30.16°N 95.21°W, 29m asl

 2020-04-15 to 2020-04-15

 history+ locations (0/0)



The historical weather report is limited to the last 2 weeks for evaluation. For unlimited access starting in 1985 this location must be activated with [history+](#).



meteooblue

## Attachment H

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### Affected Landowners Map

1992 GUNIGANTI CREDIT  
SHELTER TRUST  
50 WATERFOR CT  
NACOGDOCES TX 75965

NEW CANEY MUD  
PO BOX 1799  
NEW CANEY TX 77357

VERONICA RAMIREZ  
21193 WILLOW ST  
NEW CANEY TX 77357

CHISTOPERH & LATONIA  
MCLAUGHLIN  
21189 WILLOW ST  
NEW CANEY TX 77357

EVAN GARTON  
23766 JOHNSON RD  
NEW CANEY TX 77357

DEANNA BEESLEY  
23784 JOHNSON RD  
NEW CANEY TX 77357

GEORGE ROBINSON  
23776 JOHNSON RD  
NEW CANEY TX 77357

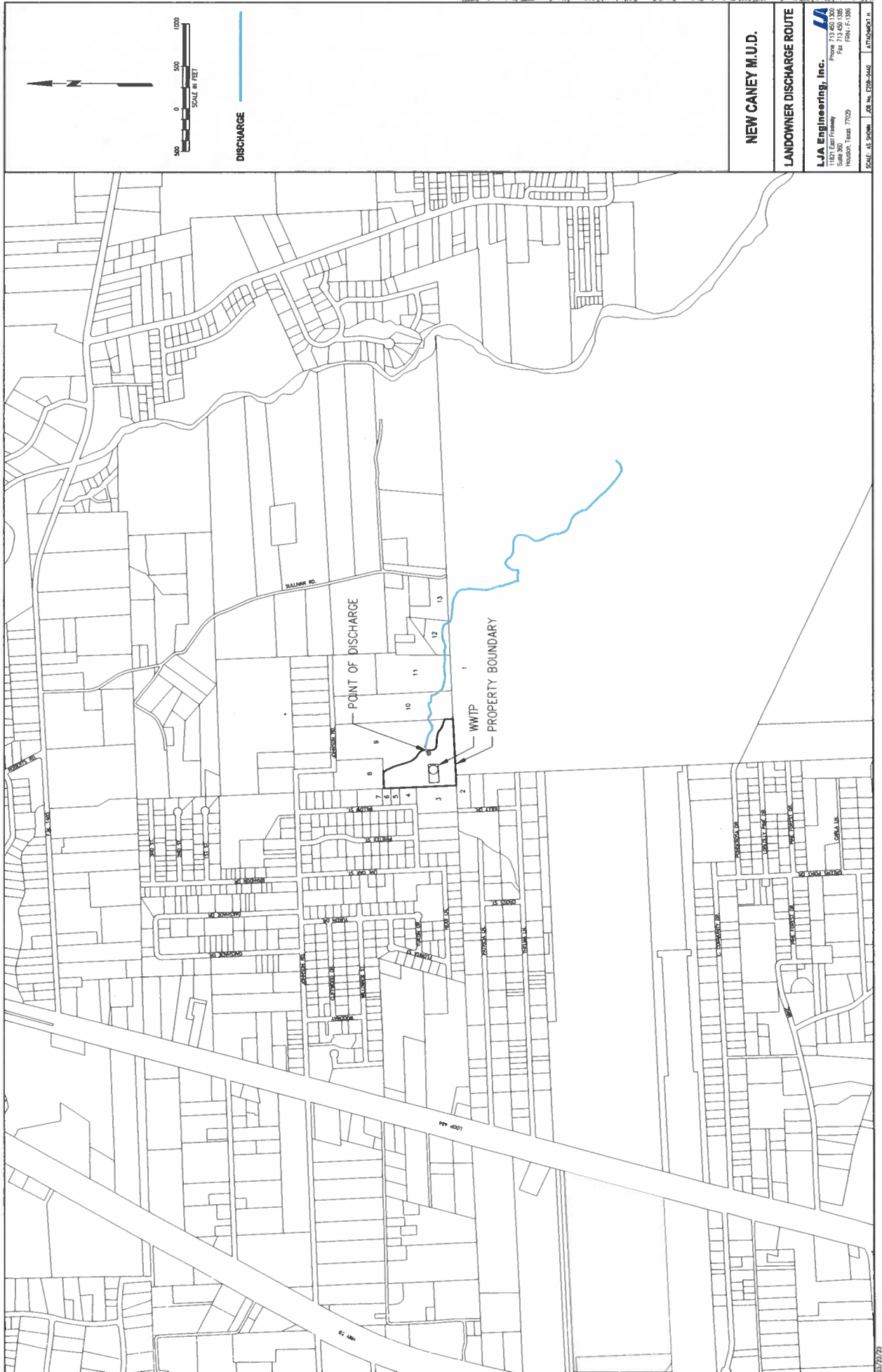
LOUIS ALLEN JR RHODEN  
PO BOX 686  
NEW CANEY TX 77357

JENNIFER MARTINEZ  
2718 ASHINGTON DR.  
HOUSTON TX 77067

GARY & MICHELLE WALLACE  
21225 SULLIVAN RD  
NEW CANEY TX 77357

#	Name	Address	City	State	Zip
1	1992 Guniganti Credit Shelter Trust	50 Waterford Cr.	Nacogdoches	TX	75956
2	New Caney MUD	PO Box 1799	New Caney	TX	77357
3	New Caney MUD	PO Box 1799	New Caney	TX	77357
4	New Caney MUD	PO Box 1799	New Caney	TX	77357
5	New Caney MUD	PO Box 1799	New Caney	TX	77357
6	Ramirez, Veronica	21193 Willow St.	New Caney	TX	77357
7	McLaughlin, Christopher & Latonia	21189 Willow St.	New Caney	TX	77357
8	Garton, Evan	23766 Johnson Rd.	New Caney	TX	77357
9	Beesley, Deanna	23784 Johnson Rd	New Caney	TX	77357
10	Robinson, George	23776 Johnson Rd	New Caney	TX	77357
11	Rhoden, Louis Allen Jr & Lashawnal	PO Box 686	New Caney	TX	77357
12	Martinez, Jennifer	2718 Ashington Dr.	Houston	TX	77067
13	Wallace, GaryL & Michelle	21225 Sullivan Rd	New Caney	TX	77357





**NEW CANEY M.U.D.**

**LANDOWNER DISCHARGE ROUTE**

**LJA Engineering, Inc.**  
10000 Katy Road  
Suite 300  
Houston, Texas 77029  
Phone: 713-650-1300  
Fax: 713-650-1305  
FRI - F-1306

DATE: 05/20/08 LJA No. E308-040 ATTACHMENT A

\\engineering\clients\058 New Caney MUD\0580 Business\Discharge Route\Drawings\Address\New Caney MUD\Discharge Map.dwg (05/20/08)

## Attachment I

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### Buffer Zone Map



## Attachment J

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### Design Calculations

**ATTACHMENT "J"**  
**Domestic Technical Report**  
**Design Calculations**

**I. WASTEWATER CHARACTERISTICS**

**A. Quality – Influent**

BOD <sub>5</sub>	200 mg/l	3,336 lbs/day
TSS	200 mg/l	3,336 lbs/day
NH <sub>3</sub>	35 mg/l	584 lbs/day

**B. Quality – Effluent**

BOD <sub>5</sub>	10 mg/l	30-day average
TSS	15 mg/l	30-day average
NH <sub>3</sub>	3 mg/l	30-day average
O <sub>2</sub>	4 mg/l	30-day average

**II. PROCESS DESIGN – EXISTING PHASE I**

The existing Phase I capacity is 2.0 MGD ADF with a peak 2-hour capacity of 10.0 MGD. The plant will be expanded to double capacity to 4.0 MGD ADF with a peak 2-hour capacity of 20.0 MGD, see section III. The following pages contain design calculations for the Phase I process units to produce permitted effluent quality:

**DESIGN CRITERIA**

The existing Phase I treatment process utilizes the complete mix modification of the activated sludge process.

The process aeration utilizes deep tanks with shear tubes in a gut roll pattern in each of the process aeration basins.

The space loading for the process aeration basin shall not exceed 35 lbs per day of BOD<sub>5</sub> loading per 1,000 cubic foot of process aeration basin tankage.

**PROCESS AERATION BASIN DESIGN**

Maximum Organic Loading:

Less than 35 lbs per day BOD<sub>5</sub> per day per 1,000 cu ft tankage

BOD<sub>5</sub> = (influent BOD<sub>5</sub> mg/l) (8.34) (average daily flow mgd)  
BOD<sub>5</sub> = 3,336 lbs per day for each aeration basin

Req'd volume = (lbs per day of BOD<sub>5</sub>)/(design space loading)  
Req'd volume = 95,314 cubic feet of basin volume

Existing side water depth = 22 feet

Existing basin area =  $(105 \text{ ft} \times 85 \text{ ft}) - [(Pi \times (105 \text{ ft} / 2)^2) / 2]$   
= 4,595 ft<sup>2</sup>

Aeration basin volume provided = 4,595 ft<sup>2</sup> x 22 ft = 101,090 ft<sup>3</sup> (>95,314 ft<sup>3</sup> required)

**Provide single process aeration basin, basin is 105 feet long by 30 feet wide at the narrowest point, sharing a common wall with a 105 ft diameter clarifier. Aeration basin side water depth of 22 feet and a side wall height of 24 feet.**

## **CLARIFIER**

### **PROCESS CRITERIA:**

Provide maximum surface loading at peak 2-hour storm flow less than 1,200 gallons per day per sq ft of area.

Provide maximum surface loading at average daily design flow less than 600 gallons per day per sq ft of area.

Provide a minimum detention time of 3.0 hours at design flow.

Provide a minimum detention time of 1.5 hours at peak 2-hr flow.

### **FINAL CLARIFIER TANK DESIGN:**

Peak 2-hour storm flow = 10.00 MGD = 6,944 gpm

Area required = (peak 2-hour storm flow) / (1,200 gals / day / sq ft)

Area required = 8,333 sq ft

Design average daily flow = 2 MGD = 1,389 gpm

Area required = (design average daily flow) / (600 gals / day / sq ft) area required = 3,333 sq ft

Thus peak 2-hour storm flow conditions govern = 8,333 sq ft

$$\begin{aligned}\text{Diameter of clarifier: } \pi \times R^2 &= 8,333 \text{ sq ft} \\ R &= 51.5 \text{ ft} \\ D &= 2 \times R = 2 \times 51.5 \text{ ft} = 103 \text{ ft}\end{aligned}$$

**Use clarifier diameter of 105 ft**

$$\text{Area provided} = \pi \times (105 \text{ ft} / 2)^2 = 8,659 \text{ ft}^2 (>8,333 \text{ ft}^2 \text{ required})$$

$$\text{Side water depth} = 12 \text{ ft}$$

$$\begin{aligned}\text{Volume of clarifier} &= \pi \times (105/2)^2 \times 12 = 103,908 \text{ ft}^3 \\ &= 777,232 \text{ gallons}\end{aligned}$$

$$\text{Detention time design flow} = 777,232 \text{ gallons} / 1,389 \text{ gpm} = 559 \text{ minutes} = 9.3 \text{ hours}$$

$$\text{Detention time peak flow} = 777,232 \text{ gallons} / 6,944 \text{ gpm} = 112 \text{ minutes} = 1.86 \text{ hours}$$

#### **CHLORINE CONTACT TANK DESIGN:**

$$\text{Peak 2-hour storm flow} = 10.000 \text{ MGD} = 6,944 \text{ gpm}$$

$$\text{Detention time required} = 20 \text{ minutes}$$

$$\begin{aligned}\text{Req'd vol} &= (\text{peak 2-hour flow}) \times (\text{detention time}) / (7.48) \\ \text{Req'd vol} &= 18,568 \text{ cu ft}\end{aligned}$$

$$\text{Existing water depth} = 10 \text{ ft}$$

$$\begin{aligned}\text{Existing basin area} &= (105 \text{ ft} \times 59.5 \text{ ft}) - [(\pi \times (105 \text{ ft} / 2)^2) / 2] \\ &= 1,917.5 \text{ ft}^2\end{aligned}$$

$$\begin{aligned}\text{Chlorine contact basin volume provided} &= 1,917.5 \text{ ft}^2 \times 10 \text{ ft} \\ &= 19,175 \text{ ft}^3 (>18,568 \text{ ft}^3 \text{ required})\end{aligned}$$

**Provide single chlorine contact basin, basin is 105 feet long by 7 feet wide at the narrowest point, sharing a common wall with a 105 ft diameter clarifier. Basin side water depth of 10 feet.**

#### **AEROBIC DIGESTER BASINS**

#### **GRAVITY THICKENER DESIGN:**

$$\text{Minimum surface loading} = 400 \text{ gal/day/ft}^2$$

New Caney MUD Permit Amendment

3/8

Attachment "N"

$$\text{Maximum surface loading} = 800 \text{ gal/day/ft}^2$$

#### **AEROBIC DIGESTER DESIGN:**

$$\begin{aligned} \text{Minimum volume req'd} &= 40 \text{ day detention time} \\ \text{Minimum aeration req'd} &= 20 \text{ scfm per 1,000 cu ft} \end{aligned}$$

#### **GRAVITY THICKENER DESIGN SIZING:**

$$\begin{aligned} \text{BOD}_5 &= 3,336 \text{ lbs per day (dry solids)} \\ \text{BOD}_5 &= \text{WAS} = 3,336 \text{ lbs per day (dry solids)} \\ \text{Minimum WAS concentration from clarifier} &= 5,000 \text{ mg/l} \\ \text{Maximum WAS concentration from clarifier} &= 10,000 \text{ mg/l} \end{aligned}$$

$$\begin{aligned} 3,336 \text{ lbs/day} &= \text{Flow in MGD} \times 5,000 \text{ mg/l} \times 8.34 \\ \text{Flow in MGD} &= 0.08 \\ &= 80,000 \text{ gallons per day} \end{aligned}$$

$$\begin{aligned} 3,336 \text{ lbs/day} &= \text{Flow in MGD} \times 10,000 \text{ mg/l} \times 8.34 \\ \text{Flow in MGD} &= 0.04 \\ &= 40,000 \text{ gallons per day} \end{aligned}$$

Existing thickener is 22 ft x 22 ft

$$\begin{aligned} \text{Minimum surface loading} &= 40,000 \text{ gpd} / (22 \text{ ft} \times 22 \text{ ft}) = 83 \text{ gpd} / \text{ft}^2 \\ \text{Maximum surface loading} &= 80,000 \text{ gpd} / (22 \text{ ft} \times 22 \text{ ft}) = 165 \text{ gpd} / \text{ft}^2 \end{aligned}$$

**The surface loading on the gravity thickener is below TCEQ Chapter 217 requirement of 400 gal/day/ft<sup>2</sup>, but it is not practical to reduce the size of the gravity thickener further. Note the thickener was designed under Chapter 317 and therefore sizing is not required to comply with Chapter 217.**

#### **DIGESTER TANK NOS. 1 AND 2 DESIGN: (two tank design)**

$$\begin{aligned} \text{BOD}_5 &= 3,336 \text{ lbs per day} \\ \text{Assume BOD}_5 &\text{ is 70\% volatiles} \\ \text{Assume 35\% destruction of volatiles} \\ \text{Sludge production, lbs /day} &= (3,336 \text{ lbs BOD/day} \times 0.30 \text{ non-volatiles}) + \\ &= 3,336 \text{ lbs BOD/day} \times 0.70 \text{ volatiles} \times \\ &= 0.65 \text{ remaining for disposal} \\ &= 2,519 \text{ lbs of sludge per 3,336 lbs of BOD} \\ \text{Minimum volume required} &= 40 \text{ day detention time} \\ \text{Design MLSS} &= 20,000 \text{ mg/l} \end{aligned}$$



Two digesters, each with a main area of 39 ft x 52 ft, with a smaller area that is 8 ft x 11 ft-8 in. Depth of fluid is 22 ft.

$$\begin{aligned}\text{Volume of single digester} &= [(39 \text{ ft} \times 52 \text{ ft}) \times 22 \text{ ft}] + [(8 \text{ ft} \times 11 \text{ ft-8 in}) \times 22 \text{ ft}] \\ &= 46,668 \text{ ft}^3 \\ &= 349,077 \text{ gallons}\end{aligned}$$

$$\begin{aligned}\text{Solids inventory} &= 0.349 \text{ MG} \times 20,000 \text{ mg/l} \times 8.34 \\ &= 58,226 \text{ lbs of solids}\end{aligned}$$

$$\begin{aligned}\text{Detention time, days} &= 58,226 \text{ lbs} / 2,519 \text{ lbs /day} \\ &= 23.1 \text{ days}\end{aligned}$$

$$\begin{aligned}\text{Two digesters, total detention time} &= 23.1 \text{ days} \times 2 \\ &= 46.2 \text{ days}\end{aligned}$$

**Volume provided meets TCEQ requirement for aerobic sludge digesters.**

### **BELT PRESS**

#### **OPERATION DESCRIPTION:**

From the operation mode, determine the total number of pounds of dry solids produced per week prior to digestion.

Determine the yield of pounds of dry solids after digestion.

Determine the number of hours per week for the belt press operation.

#### **PROCESS CRITERIA:**

For activated sludge processes, assume one pound of WAS per pound of BOD<sub>5</sub> applied to the process.

$$\begin{aligned}\text{BOD}_5 &= 3,336 \text{ lbs per day (dry solids)} \\ \text{WAS} &= 3,336 \text{ lbs per day (dry solids)}\end{aligned}$$

For normal aerobic digestion of typical municipal sewage assume:

$$\begin{aligned}\text{WAS is composed of} & \quad 70\% \text{ volatile material} \\ & \quad 30\% \text{ non-volatile material}\end{aligned}$$

Also assume that volatile component will reduce by 35 percent.

$$\begin{aligned}
\text{Solids per day} &= 3,336 \text{ lbs/day} - (3,336 \text{ lbs/day} \times 70\% \text{ volatiles} \times 35\% \text{ digested}) \\
&= 2,519 \text{ lbs/day sludge production (dry solids)} \\
\text{Solids per week} &= 2,519 \text{ lbs/day} \times 7 \text{ days/week} \\
&= 17,633 \text{ lbs/week}
\end{aligned}$$

MLSS in aerobic digester is 20,000 mg/l

$$\begin{aligned}
17,633 \text{ lbs per week} &= \text{MG} \times 20,000 \text{ mg/l} \times 8.34 \\
\text{MG} &= 0.11 \\
&= 110,000 \text{ gallons per week digested sludge to dewater}
\end{aligned}$$

Existing belt press is a 2.2 meter belt press with a capacity of 100 gpm

$$\begin{aligned}
\text{Weekly run time} &= 110,000 \text{ gallons / week} / 100 \text{ gpm} \\
&= 1,100 \text{ minutes / week} \\
&= 18 \text{ hours / week} \\
&= 3 \text{ days per week}
\end{aligned}$$

**Existing 2.2 meter width belt filter press sized operating 3 days per week to achieve the required dewatering capacity.**

## **AIR REQUIREMENTS**

### **DESIGN REQUIREMENTS:**

Consider trilobe positive displacement blowers sized for degritting basin, process aeration, mixed liquor tank, chlorine contact basin, return activated sludge airlift pumps, clarifier scum air lift pumps, waste activated sludge airlift pumps, and aerobic digestion.

The proposed positive displacement blowers will be contained in a single blower building adjacent to the treatment module.

### **PROCESS REQUIREMENTS:**

Aeration Basin Air Required

$$\begin{aligned}
\text{O}_2 \text{ required per lb BOD} &= [(1.2 \times \text{BOD lbs/day}) + (4.3 \times \text{NH}_3 \text{ lbs/day})] / \text{BOD lbs/day} \\
&= [(1.2 \times 3,336) + (4.3 \times 584)] / 3,336 \\
&= 1.95 \text{ lbs O}_2 \text{ per lb BOD}
\end{aligned}$$

Single drop coarse bubble diffusers are utilized  
Clean water oxygen transfer efficiency = 10%

$$\text{RAF} = \text{PPD BOD} \times \text{O}_2 \text{ required per lb BOD} / \text{WOTE} \times 0.23 \times 0.075 \times 1440$$

RAF	=	Required Air Flow, scfm
CWOTE	=	10%
WOTE	=	CWOTE x 0.65
RAF	=	3,336 PPD BOD x 1.95 lbs O <sub>2</sub> per lb BOD / (0.10x0.65x0.23x0.075x1440)
	=	4,029 scfm

#### Summary of Air Demands:

Plant Component	Design Airflow (scfm)
Aerated grit facility (4 diffusers at 30 scfm each)	120
Process aeration (see RAF above)	4,029
Chlorine contact basin (19,175 ft <sup>3</sup> @ 15 scfm/1,000 ft <sup>3</sup> )	288
Aerobic digestions (46,668 ft <sup>3</sup> @ 30 scfm/1,000 ft <sup>3</sup> )	2,800
Digester Pre-mix Basin (2,299 ft <sup>3</sup> @ 30 scfm/1,000 ft <sup>3</sup> )	69
Airlift pumps	
10" Return Sludge 1	60
10" Return Sludge 2	60
10" Return Sludge 3	60
10" Return Sludge 4	60
6" Waste Sludge 1	20
6" Waste Sludge 2	20
6" Thickener Airlift 1	20
6" Thickener Airlift 2	20
6" Scum Airlift 1	20
6" Scum Airlift 2	20
	<hr/> 7,666

Five (5) existing positive displacement trilobe blowers with sound enclosures and variable frequency drives. Each blower rated for 2,175 scfm and 7.50 psig discharge pressure when operating at 100 degrees Fahrenheit, 90% relative humidity and 50 feet above sea level. Firm capacity 4 @ 2,175 scfm = 8,700 scfm

### III. PROCESS DESIGN – PROPOSED PHASE II

The existing plant is proposed to be expanded from a Phase I capacity of 2.0 MGD ADF to a Phase II capacity of 4.0 MGD ADF. This will be accomplished by replicating the existing plant. See calculations above for the Phase II sizing of components. The treatment process will remain the same – complete mix activated sludge to meet the expected 10/15/3 discharge permit. The

plant is not yet under design. When design begins the Engineer will evaluate the following:

Grit removal – evaluate if the existing grit removal unit is sufficient to treat 4.0 MGD ADF, or if a second duplicate grit removal unit is required.

Screening – evaluate if the existing mechanical bar screen has sufficient capacity or if a second duplicate mechanical bar screen is required.

Sludge Dewatering – the existing 2.2 meter belt filter press will continue to provide the necessary sludge dewatering capacity. Run times will increase to 36 hours per week.

## Attachment K

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### Plain Language Statement

## **Plain Language Summary**

### **TPDES Major Amendment Application**

The New Caney Municipal Utility District (CN600686505) operates the New Caney Municipal Utility District Wastewater Treatment Plant (RN102079837). The facility includes an activated sludge wastewater treatment system. The treatment train employs aeration mixing/oxidation, final clarification, effluent disinfection, dechlorination and flow measurement. The facility will be located at 23673 Sweetgum St. Montgomery, Texas 77357.

This application is for a Major Amendment to the wastewater treatment facility with a daily average discharge of 2.0 million gallons per day of treated domestic wastewater, increasing to 4.0 million gallons per day with the new wastewater treatment facility.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include screening, grit removal, orbital treatment, final clarifiers, aerobic sludge digesters, sludge dewatering equipment, disinfection, and dechlorination before discharge to the receiving stream.

## Attachment L

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### Public Involvement Form



Texas Commission on Environmental Quality

## Public Involvement Plan Form for Permit and Registration Applications

The Public Involvement Plan is intended to provide applicants and the agency with information about how public outreach will be accomplished for certain types of applications in certain geographical areas of the state. It is intended to apply to new activities; major changes at existing plants, facilities, and processes; and to activities which are likely to have significant interest from the public. This preliminary screening is designed to identify applications that will benefit from an initial assessment of the need for enhanced public outreach.

All applicable sections of this form should be completed and submitted with the permit or registration application. For instructions on how to complete this form, see TCEQ-20960-inst.

### Section 1. Preliminary Screening

- ☐ New Permit or Registration Application  
☒ New Activity - modification, registration, amendment, facility, etc. (see instructions)

**If neither of the above boxes are checked, completion of the form is not required and does not need to be submitted.**

### Section 2. Secondary Screening

- ☒ Requires public notice,  
☐ Considered to have significant public interest, and  
☐ Located within any of the following geographical locations:

- Austin
- Dallas
- Fort Worth
- Houston
- San Antonio
- West Texas
- Texas Panhandle
- Along the Texas/Mexico Border
- Other geographical locations should be decided on a case-by-case basis

**If all the above boxes are not checked, a Public Involvement Plan is not necessary.  
Stop after Section 2 and submit the form.**

- ☒ Public Involvement Plan not applicable to this application. Provide **brief** explanation.

The facility does not fall within the given geographical locations or have significant public interest.



### Section 3. Application Information

#### Type of Application (check all that apply):

Air ☐ Initial ☐ Federal ☐ Amendment ☐ Standard Permit ☐ Title V  
Waste ☐ Municipal Solid Waste ☐ Industrial and Hazardous Waste ☐ Scrap Tire  
☐ Radioactive Material Licensing ☐ Underground Injection Control

#### Water Quality

☐ Texas Pollutant Discharge Elimination System (TPDES)  
☐ Texas Land Application Permit (TLAP)  
☐ State Only Concentrated Animal Feeding Operation (CAFO)  
☐ Water Treatment Plant Residuals Disposal Permit  
☐ Class B Biosolids Land Application Permit  
☐ Domestic Septage Land Application Registration

#### Water Rights New Permit

☐ New Appropriation of Water  
☐ New or existing reservoir

#### Amendment to an Existing Water Right

☐ Add a New Appropriation of Water  
☐ Add a New or Existing Reservoir  
☐ Major Amendment that could affect other water rights or the environment

### Section 4. Plain Language Summary

Provide a brief description of planned activities.

## Section 5. Community and Demographic Information

Community information can be found using EPA's EJ Screen, U.S. Census Bureau information, or generally available demographic tools.

**Information gathered in this section can assist with the determination of whether alternative language notice is necessary. Please provide the following information.**

(City)

(County)

(Census Tract)

Please indicate which of these three is the level used for gathering the following information.

☐

City

☐

County

☐

Census Tract

(a) Percent of people over 25 years of age who at least graduated from high school

(b) Per capita income for population near the specified location

(c) Percent of minority population and percent of population by race within the specified location

(d) Percent of Linguistically Isolated Households by language within the specified location

(e) Languages commonly spoken in area by percentage

(f) Community and/or Stakeholder Groups

(g) Historic public interest or involvement

### Section 6. Planned Public Outreach Activities

(a) Is this application subject to the public participation requirements of Title 30 Texas Administrative Code (30 TAC) Chapter 39?

☐ Yes ☐ No

(b) If yes, do you intend at this time to provide public outreach other than what is required by rule?

☐ Yes ☐ No

If Yes, please describe.

**If you answered "yes" that this application is subject to 30 TAC Chapter 39, answering the remaining questions in Section 6 is not required.**

(c) Will you provide notice of this application in alternative languages?

☐ Yes ☐ No

**Please refer to Section 5. If more than 5% of the population potentially affected by your application is Limited English Proficient, then you are required to provide notice in the alternative language.**

If yes, how will you provide notice in alternative languages?

- ☐ Publish in alternative language newspaper
- ☐ Posted on Commissioner's Integrated Database Website
- ☐ Mailed by TCEQ's Office of the Chief Clerk
- ☐ Other (specify)

(d) Is there an opportunity for some type of public meeting, including after notice?

☐ Yes ☐ No

(e) If a public meeting is held, will a translator be provided if requested?

☐ Yes ☐ No

(f) Hard copies of the application will be available at the following (check all that apply):

- ☐ TCEQ Regional Office ☐ TCEQ Central Office
- ☐ Public Place (specify)

### Section 7. Voluntary Submittal

For applicants voluntarily providing this Public Involvement Plan, who are not subject to formal public participation requirements.

Will you provide notice of this application, including notice in alternative languages?

☐ Yes ☐ No

What types of notice will be provided?

- ☐ Publish in alternative language newspaper
- ☐ Posted on Commissioner's Integrated Database Website
- ☐ Mailed by TCEQ's Office of the Chief Clerk
- ☐ Other (specify)

## Attachment M

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### Treatment Process

**ATTACHMENT "M"**  
**Domestic Technical Report 1.0, Page 2 of 80**  
**Treatment Process, Item 2a**

I. General Process Description:

The treatment process will utilize the completed mix modification of the activated sludge process. The treatment train will employ aerated mixing / oxidation, final clarification, effluent disinfection, dechlorination and flow measurement.

II. Treatment Units:

A. Headworks:

Raw sewage, pumped from the influent lift station, enters either of two bar screen channels. One has mechanically cleaned screens, the other manually cleaned. Collected material, failing to pass the screens is consolidated in a screw compactor and passed to a dumpster which is hauled to a landfill. Material passing the screens flows to an aerated grit basin. The settled grit is pumped to a cyclone and classifier. Washed grit and non-degradable items are loaded into the dumpster. Raw sewage then flows to the treatment module.

B. Treatment Works:

From the headworks the flow is to the aeration basin. Then by air lift pumps the wastewater goes to the pre-mix basin, the gravity thickener and ultimately to the final clarifier. Accumulation of sludge from clarifier and thickener are pumped to the two digesters. At proper age the digested sludge is wasted to the belt press, from where it is collected, and hauled by truck to licensed landfill site.

C. Effluent from final clarifier passes by 30-inch pipe to chlorination basin for a disinfection period of 20 minutes (at peak flow) then chlorine strength is reduced to 1.0 mg/l before exiting the plant through a 42-inch outfall line.

## Attachment N

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### Nearby WWTP Map

## Attachment O

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### Sewage Sludge Solids Management Plan

**ATTACHMENT "O"**  
**Sewage Sludge Solids Management Plan**  
**Calculations**

**I. WASTEWATER CHARACTERISTICS**

**A. Quality – Influent**

BOD <sub>5</sub>	200 mg/l	3,336 lbs/day
TSS	200 mg/l	3,336 lbs/day
NH <sub>3</sub>	35 mg/l	584 lbs/day

**B. Quality – Effluent**

BOD <sub>5</sub>	10 mg/l	30-day average
TSS	15 mg/l	30-day average
NH <sub>3</sub>	3 mg/l	30-day average
O <sub>2</sub>	4 mg/l	30-day average

**II. PROCESS DESIGN – EXISTING PHASE I**

The existing Phase I capacity is 2.0 MGD ADF with a peak 2-hour capacity of 10.0 MGD. The plant will be expanded to double capacity to 4.0 MGD ADF with a peak 2-hour capacity of 20.0 MGD (proposed capacity). The following pages contain design calculations for the Phase I process units to produce permitted effluent quality:

**SLUDGE PRODUCTION**

BOD<sub>5</sub> loading:

$$\begin{aligned} \text{BOD}_5 &= (\text{influent BOD}_5 \text{ mg/l}) (8.34) (\text{average daily flow MGD}) \\ \text{BOD}_5 &= 3,336 \text{ lbs per day} \end{aligned}$$

Assume BOD<sub>5</sub> is 70% volatiles.

Assume 35% destruction of volatiles.

$$\begin{aligned} \text{Sludge production} &= (3,336 \text{ lbs BOD}_5/\text{day} \times 0.30 \text{ non-volatile}) + (3,336 \text{ lbs BOD}_5/\text{day} \\ &\quad \times 0.70 \text{ volatile} \times 0.65 \text{ remaining for disposal}) \\ &= 2,519 \text{ lbs of sludge per 3,336 lbs of BOD}_5 \end{aligned}$$



## **AEROBIC DIGESTER BASINS**

### **DIGESTER TANK NOS. 1 AND 2 DESIGN: (two tank design)**

Two digesters, each with a main area of 39 ft x 52 ft, with a smaller area that is 8 ft x 11 ft-8 in. Depth of fluid is 22 ft.

$$\begin{aligned}\text{Volume of single digester} &= [(39 \text{ ft} \times 52 \text{ ft}) \times 22 \text{ ft}] + [(8 \text{ ft} \times 11 \text{ ft-8 in}) \times 22 \text{ ft}] \\ &= 46,668 \text{ ft}^3 \\ &= 349,077 \text{ gallons}\end{aligned}$$

$$\begin{aligned}\text{Solids inventory} &= 0.349 \text{ MG} \times 20,000 \text{ mg/l} \times 8.34 \\ &= 58,226 \text{ lbs of solids}\end{aligned}$$

$$\begin{aligned}\text{Detention time, days} &= 58,226 \text{ lbs} / 2,519 \text{ lbs /day} \\ &= 23.1 \text{ days}\end{aligned}$$

$$\begin{aligned}\text{Two digesters, total detention time} &= 23.1 \text{ days} \times 2 \\ &= 46.2 \text{ days}\end{aligned}$$

**Volume provided meets TCEQ requirement for aerobic sludge digesters.**

## **BELT PRESS**

### **OPERATION DESCRIPTION:**

From the operation mode, determine the total number of pounds of dry solids produced per week prior to digestion.

Determine the yield of pounds of dry solids after digestion.

Determine the number of hours per week for the belt press operation.

### **PROCESS CRITERIA:**

For activated sludge processes, assume one pound of WAS per pound of BOD<sub>5</sub> applied to the process.

$$\begin{aligned}\text{BOD}_5 &= 3,336 \text{ lbs per day (dry solids)} \\ \text{WAS} &= 3,336 \text{ lbs per day (dry solids)}\end{aligned}$$

For normal aerobic digestion of typical municipal sewage assume:

WAS is composed of                70% volatile material  
   30% non-volatile material

Also assume that volatile component will reduce by 35 percent.

Solids per day        = 3,336 lbs/day – (3,336 lbs/day x 70% volatiles x 35% digested)  
                             = 2,519 lbs/day sludge production (dry solids)  
Solids per week      = 2,519 lbs/day x 7 days/week  
                             = 17,633 lbs/week

MLSS in aerobic digester is 20,000 mg/l

17,633 lbs per week = MG x 20,000 mg/l x 8.34  
MG                    = 0.11  
                             = 110,000 gallons per week digested sludge to dewater

Existing belt press is a 2.2 meter belt press with a capacity of 100 gpm

Weekly run time        =        110,000 gallons / week / 100 gpm  
                                 =        1,100 minutes / week  
                                 =        18 hours / week  
                                 =        3 days per week

**Existing 2.2 meter width belt filter press sized operating 3 days per week to achieve the required dewatering capacity.**

### III.      PROCESS DESIGN – PROPOSED PHASE II

The existing plant is proposed to be expanded from a Phase I capacity of 2.0 MGD ADF to a Phase II capacity of 4.0 MGD ADF. This will be accomplished by replicating the existing plant. The plant is not yet under design. When design begins the Engineer will evaluate the following:

Sludge Dewatering – the existing 2.2 meter belt filter press will continue to provide the necessary sludge dewatering capacity. Run times will increase to 36 hours per week

### IV.      SUMMARY

Operate the existing aerobic digesters / gravity sludge thickener complex at an MLSS concentration of 20,000 mg/l. As the MLSS increases above 20,000 mg/l, operate the belt filter press to dewater and dispose of sludge, thus reducing the MLSS of the aerobic digesters / gravity thickener. The belt filter press should be operated in full day increments. The MLSS of the

aerobic digesters should not be reduced below 15,000 mg/l or inadequate sludge digestion will result.

## Rainee Trevino

---

**From:** Brian French <bffrench@lja.com>  
**Sent:** Thursday, December 4, 2025 1:57 PM  
**To:** Rainee Trevino  
**Cc:** Jimmy Flowers  
**Subject:** RE: Application to Amend Permit No. WQ0012274001- Notice of Deficiency Letter  
**Attachments:** Administrative Report 1.0.pdf; AB-USGS Maps.pdf; Plain Language Statement (Spanish).pdf; Affected Landowners Map index updated.pdf; Affected Landowners addresses updated.pdf; Affective land owners map Revised 12-4-25.pdf; SPIF Form.pdf; Municipal Discharge Amendment Spanish NORI.docx

Good Afternoon, Rainee

I have attached and addressed everything in the NOD letter that you requested. Please see the attached documents and let me know if you have any questions. New Caney MUD paid their application fee online via TCEQ epay, the voucher number is 797238. I do have a few edits to the portion of the NORI that applies to New Caney MUD. Please see below:

APPLICATION. New Caney Municipal Utility District, P.O. Box 1799, New Caney, Texas 77357, has applied to the Texas Commission on Environmental Quality (TCEQ) to amend Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0012274001 (EPA I.D. No. TX0084638) to authorize an increase to the discharge of treated wastewater to a volume not to exceed an annual average flow of 4,000,000 gallons per day. The domestic wastewater treatment facility is located at 23673 Sweetgum Street, in Montgomery County, Texas 77357. The discharge route is from the plant site to to an unnamed tributary of Caney Creek, thence to Caney Creek (pending review). TCEQ received this application on November 26, 2025. The permit application will be available for viewing and copying at "pending applicant response", 23696 Roberts Road, New Caney, in Montgomery 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=-95.204166,30.137777&level=18>

Further information may also be obtained from New Caney Municipal District at the address stated above or by calling Mr. Ricky McDonald, General Manager, at 281-689-2327.

Please let me know if you have any questions.

**BRIAN FRENCH, CPESC** | Project Manager

Public Works

D: 409.554.8972 | C: 409.719.1815

2615 Calder Ave, Suite 500, Beaumont, Texas, 77702

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**From:** Rainee Trevino <Rainee.Trevino@tceq.texas.gov>  
**Sent:** Wednesday, December 3, 2025 4:22 PM  
**To:** Brian French <bfrench@lja.com>  
**Cc:** Jimmy Flowers <jflowers@lja.com>  
**Subject:** Application to Amend Permit No. WQ0012274001- Notice of Deficiency Letter

[EXTERNAL EMAIL]

Good afternoon,

The attached Notice of Deficiency letter sent on December 3, 2025, requests additional information needed to declare the application administratively complete. Please send the complete response to my attention by December 17, 2025.

Thank you,

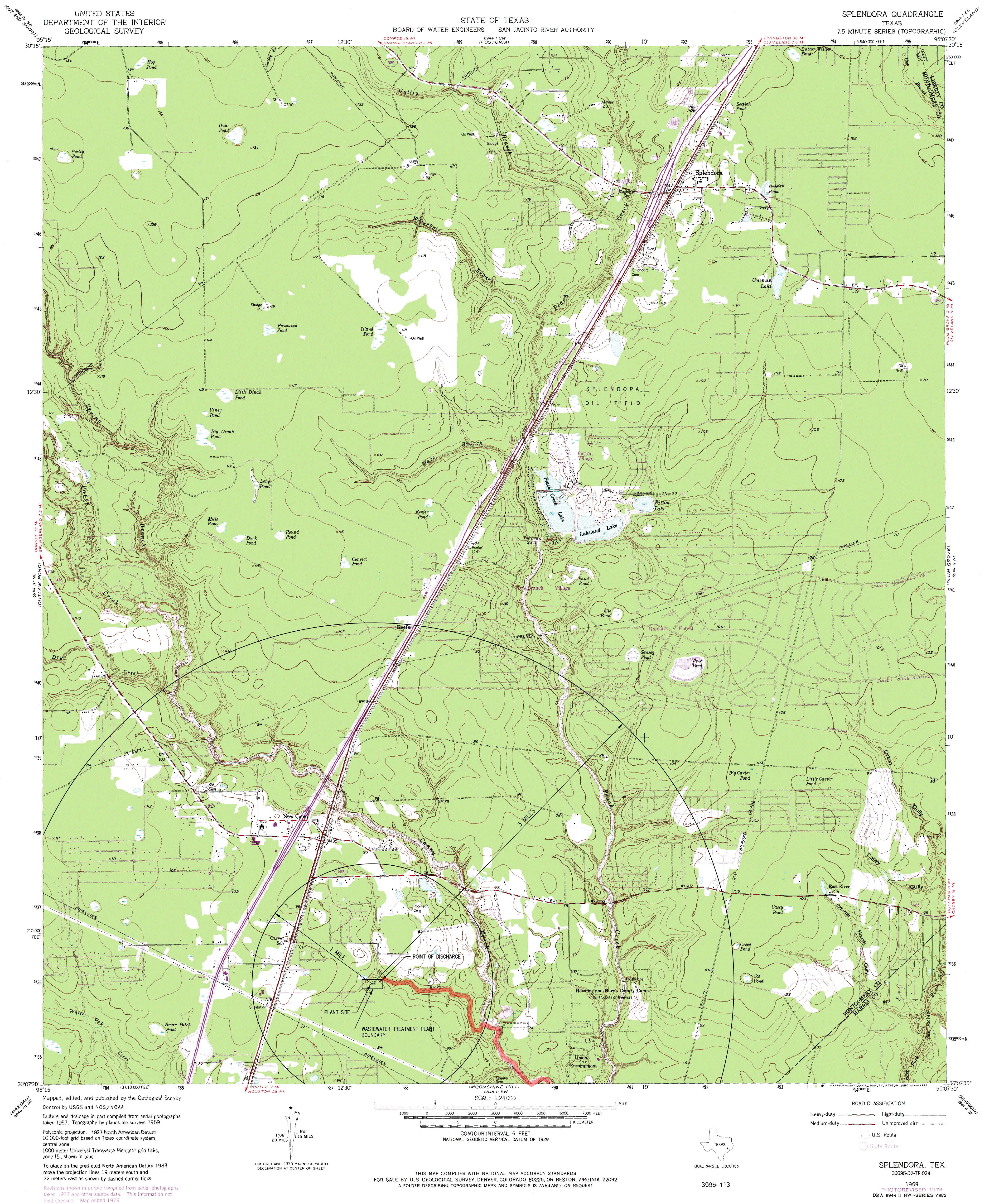
**Rainee Trevino**  
Water Quality Division | ARP Team  
Texas Commission on Environmental Quality  
512-239-4324



[EXTERNAL EMAIL] Exercise caution. Do not open attachments or click links from unknown senders or unexpected email



SPLENDORA QUADRANGLE  
TEXAS  
7.5 MINUTE SERIES (TOPOGRAPHIC)





MOONSHINE HILL QUADRANGLE  
TEXAS  
7.5 MINUTE SERIES (TOPOGRAPHIC)







## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

# DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

---

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

APPLICANT NAME: New Caney MUD

PERMIT NUMBER (If new, leave blank): WQ0012274-001

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

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



For TCEQ Use Only

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

Expiration Date \_\_\_\_\_

\_\_\_\_\_ Region \_\_\_\_\_

Permit Number \_\_\_\_\_



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

### DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

#### Section 1. Application Fees (Instructions Page 26)

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

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

Minor Amendment (for any flow) \$150.00 ☐

#### Payment Information:

Mailed      Check/Money Order Number:  Click to enter text.  
Check/Money Order Amount:  Click to enter text.  
Name Printed on Check:  Click to enter text.  
EPAY      Voucher Number: 797238  
Copy of Payment Voucher enclosed?      Yes ☐

#### Section 2. Type of Application (Instructions Page 26)

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

- ☒ Publicly Owned Domestic Wastewater  
☐ Privately-Owned Domestic Wastewater  
☐ Conventional Water Treatment

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

- ☒ Active      ☐ Inactive

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

- ☒ TPDES Permit  
☐ TLAP  
☐ TPDES Permit with TLAP component  
☐ Subsurface Area Drip Dispersal System (SADDs)

d. Check the box next to the appropriate application type

- ☐ New  
☒ Major Amendment with Renewal  
☐ Major Amendment without Renewal  
☐ Renewal without changes  
☐ Minor Amendment with Renewal  
☐ Minor Amendment without Renewal  
☐ Minor Modification of permit

e. For amendments or modifications, describe the proposed changes: New Caney MUD is requesting to change their permitted discharge limit from 2.0 MGD to 4.0 MGD.

f. For existing permits:

Permit Number: WQ00 12274001

EPA I.D. (TPDES only): TX 0084638

Expiration Date: June 28, 2026

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

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

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

New Caney Municipal Utility District

*(The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal documents forming the entity.)*

If the applicant is currently a customer with the TCEQ, what is the Customer Number (CN)? You may search for your CN on the TCEQ website at

<http://www15.tceq.texas.gov/crpub/>

CN: 600686505

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

Prefix: Mr.

Last Name, First Name: Smith, William

Title: President

Credential: Click to enter text.

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

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

Click to enter text.

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

If the co-applicant is currently a customer with the TCEQ, what is the Customer Number (CN)? You may search for your CN on the TCEQ website at:

<http://www15.tceq.texas.gov/crpub/>

CN: Click to enter text.

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

Provide a brief description of the need for a co-permittee: Click to enter text.

### C. Core Data Form

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

## Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Mr.

Last Name, First Name: French, Brian

Title: Project Manager

Credential: Click to enter text.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2615 Calder Ave. Suite 500 City, State, Zip Code: Beaumont, Texas 77702

Phone No.: 409-554-8972

E-mail Address: bfrench@lja.com

Check one or both:  
Contact



Administrative Contact



Technical

B. Prefix: Mr.

Last Name, First Name: Flowers, Jimmy

Title: Vice President

Credential: P.E.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2014 Airport Road Suite 100 City, State, Zip Code: Conroe, Texas 77301  
Phone No.: 713-450-1300 E-mail Address: jflowers@lja.com  
Check one or both: ☒ Administrative Contact ☒ Technical Contact

## Section 5. Permit Contact Information (Instructions Page 27)

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

- A. Prefix: Mr. Last Name, First Name: McDonald, Ricky  
Title: General Manager Credential: Click to enter text.  
Organization Name: New Caney Municipal Utility District  
Mailing Address: 23696 Roberts Road City, State, Zip Code: New Caney, TX 77357  
Phone No.: 281-689-2327 E-mail Address: ricky@newcaneymud.org
- B. Prefix: Mr. Last Name, First Name: Kay, Jeffery  
Title: Lead Operator Credential: Click to enter text.  
Organization Name: New Caney Municipal Utility District  
Mailing Address: 23696 Robers Road City, State, Zip Code: New Caney, TX 77357  
Phone No.: 281-659-4407 E-mail Address: jeff@newcaneymud.org

## 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: Mrs. Last Name, First Name: Latham, Lisa  
Title: Office Manager Credential: Click to enter text.  
Organization Name: New Caney Municipal Utility District  
Mailing Address: 23696 Roberts Road City, State, Zip Code: New Caney, Texas 77357  
Phone No.: 281-689-2327 E-mail Address: lisa@newcaneymud.org

## 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: Kay, Jeffery

Title: Lead Operator

Credential: Click to enter text.

Organization Name: New Caney Municipal Utility District

Mailing Address: 23696 Roberts Road

City, State, Zip Code: New Caney, TX

77357

Phone No.: 281-659-4407

E-mail Address: jeff@newcaneymud.org

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

### A. Individual Publishing the Notices

Prefix: Mr.

Last Name, First Name: French, Brian

Title: Project Manager

Credential: Click to enter text.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2615 Calder Ave. Suite 500 City, State, Zip Code: Beaumont, Tx 77702

Phone No.: 409-554-8972

E-mail Address: bfrench@lja.com

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

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

☒ E-mail Address

☐ Fax

☒ Regular Mail

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

Prefix: Mr.

Last Name, First Name: Flowers, Jimmy

Title: Vice President

Credential: Click to enter text.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2014 Airport Road Suite 100 City, State, Zip Code: Conroe, Texas 77301

Phone No.: 713-450-1300

E-mail Address: jflowers@lja.com

### D. Public Viewing Information

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

Public building name: New Caney MUD District Office

Location within the building: Front Dest

Physical Address of Building: 23696 Roberts Road

City: New Caney

County: Montgomery

Contact (Last Name, First Name): Ricky McDonald

Phone No.: 281-689-2327 Ext.: Click to enter text.

#### E. Bilingual Notice Requirements

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

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

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

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

☒

Yes

☐

No

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

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

☒

Yes

☐

No

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

☐

Yes

☒

No

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

☐

Yes

☒

No

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

#### F. Summary of Application in Plain Language Template

**Complete the F. Summary of Application in Plain Language Template (TCEQ Form 20972), also known as the plain language summary or PLS, and include as an attachment.**

**Attachment:** K

### G. Public Involvement Plan Form

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

Attachment: L

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

- A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 102079837

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

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

New Caney Municipal Utility District Wastewater Treatment Plant

- C. Owner of treatment facility: New Caney Municipal Utility District

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

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

Organization Name: New Caney Municipal Utility District

Mailing Address: 23696 Roberts Road  
77357

City, State, Zip Code: New Caney, TX

Phone No.: 281-689-2327

E-mail Address: ricky@newcaneymud.org

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

Attachment: Click to enter text.

- E. Owner of effluent disposal site:

Prefix: NA

Last Name, First Name: NA

Title: NA

Credential: NA

Organization Name: NA

Mailing Address: NA

City, State, Zip Code: NA

Phone No.: NA

E-mail Address: NA

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: NA

- F. Owner sewage sludge disposal site (if authorization is requested for sludge



disposal on property owned or controlled by the applicant)::

Prefix: NA

Last Name, First Name: NA

Title: NA

Credential: NA

Organization Name: NA

Mailing Address: NA

City, State, Zip Code: NA

Phone No.: NA

E-mail Address: NA

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: NA

## Section 10. TPDES Discharge Information (Instructions Page 31)

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

☒ Yes ☐ No

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

[Click to enter text.](#)

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

☒ Yes ☐ No

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

[Click to enter text.](#)

City nearest the outfall(s): New Caney

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

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

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

D. For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the

point(s) of discharge: [Click to enter text.](#)

## Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ NAYes ☐ No

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

[Click to enter text.](#)

- B. City nearest the disposal site: [Click to enter text.](#)

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

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

[Click to enter text.](#)

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

## Section 12. Miscellaneous Information (Instructions Page 32)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

[Click to enter text.](#)

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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

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

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

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

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

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

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

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

### Section 13. Attachments (Instructions Page 33)

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

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

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

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

☐ **Attachment 1 for Individuals as co-applicants**

☐ **Other Attachments. Please specify:** [Click to enter text.](#)

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

**TCEQ USE ONLY:**

Application type: \_\_\_\_Renewal \_\_\_\_Major Amendment \_\_\_\_Minor Amendment \_\_\_\_New

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

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

Agency Receiving SPIF:

\_\_\_\_ Texas Historical Commission

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

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

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

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

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

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

The following applies to all applications:

1. Permittee: New Caney Municipal Utility District

Permit No. WQ00 12274001EPA ID No. TX 0084638

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

23673 Sweetgum Street, New Caney TX 77357

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

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

First and Last Name: McDonald, Ricky

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

Title: General Manager

Mailing Address: 23696 Roberts Road

City, State, Zip Code: New Caney, TX 77357

Phone No.: 281-689-2327 Ext.:

Fax No.:

E-mail Address: ricky@newcaneymud.org

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

42" plant to unnamed tributary to Caney Creek, thence to segment No. 1010 of San Jacinto River Basin.

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

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

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

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

☐ Disturbance of vegetation or wetlands

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

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

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

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

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

## Rainee Trevino

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**From:** Brian French <bfrench@lja.com>  
**Sent:** Friday, December 5, 2025 9:55 AM  
**To:** Rainee Trevino  
**Cc:** Jimmy Flowers  
**Subject:** RE: Application to Amend Permit No. WQ0012274001- Notice of Deficiency Letter

**Categories:** NOD Response Review

My apologies, I missed adding the property owners on the property boundaries.

Yes, we are changing the contact to Mr. McDonald and adding New Caney Municipal Utility District to the first line. I believe the original notice did not include the word Utility.

I will get the updated map and address to you soon.

Brian

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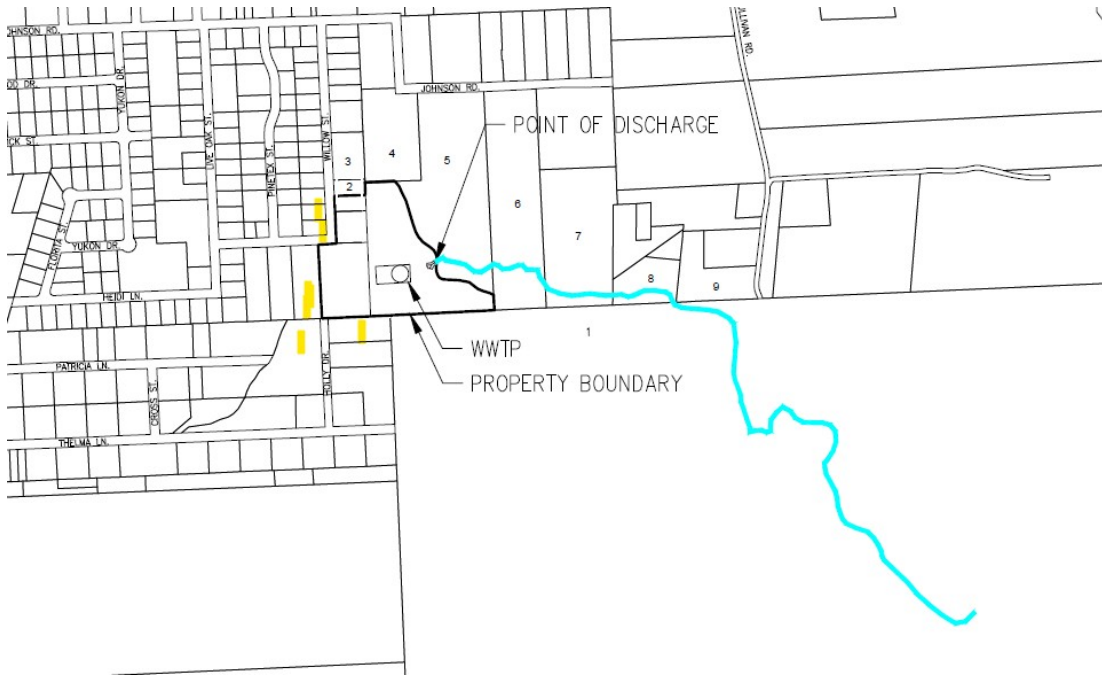
**From:** Rainee Trevino <Rainee.Trevino@tceq.texas.gov>  
**Sent:** Friday, December 5, 2025 9:44 AM  
**To:** Brian French <bfrench@lja.com>  
**Cc:** Jimmy Flowers <jflowers@lja.com>  
**Subject:** RE: Application to Amend Permit No. WQ0012274001- Notice of Deficiency Letter

[EXTERNAL EMAIL]

Good morning, Brian,

Thank you for the prompt response. Items 1,2,3,4,6, and 8 of the deficiency letter are complete and sufficient. For item 7, I want to confirm the requested change to the NORI. We are changing the contact in the notice from Mr. Jimmy Flowers to Mr. Ricky McDonald, correct?

Item 5 is still missing some information. There are some affected landowners missing. Please see the below image. Please ensure to provide all landowners adjacent to the applicant's property boundary. This includes any properties across streets. An updated landowner list and mailing labels will also be needed.



Please let me know if you have any questions.

Kind regards,

**Rainee Trevino**

Water Quality Division | ARP Team

Texas Commission on Environmental Quality

512-239-4324



**From:** Brian French <[bfrench@lja.com](mailto:bfrench@lja.com)>

**Sent:** Thursday, December 4, 2025 1:57 PM

**To:** Rainee Trevino <[Rainee.Trevino@tceq.texas.gov](mailto:Rainee.Trevino@tceq.texas.gov)>

**Cc:** Jimmy Flowers <[jflowers@lja.com](mailto:jflowers@lja.com)>

**Subject:** RE: Application to Amend Permit No. WQ0012274001- Notice of Deficiency Letter

Good Afternoon, Rainee

I have attached and addressed everything in the NOD letter that you requested. Please see the attached documents and let me know if you have any questions. New Caney MUD paid their application fee online via TCEQ epay, the voucher number is 797238. I do have a few edits to the portion of the NORI that applies to New Caney MUD. Please see below:

**APPLICATION.** New Caney Municipal Utility District, P.O. Box 1799, New Caney, Texas 77357, has applied to the Texas Commission on Environmental Quality (TCEQ) to amend Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0012274001 (EPA I.D. No. TX0084638) to



authorize an increase to the discharge of treated wastewater to a volume not to exceed an annual average flow of 4,000,000 gallons per day. The domestic wastewater treatment facility is located at 23673 Sweetgum Street, in Montgomery County, Texas 77357. The discharge route is from the plant site to to an unnamed tributary of Caney Creek, thence to Caney Creek (pending review). TCEQ received this application on November 26, 2025. The permit application will be available for viewing and copying at "pending applicant response", 23696 Roberts Road, New Caney, in Montgomery 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=-95.204166,30.137777&level=18>

Further information may also be obtained from New Caney Municipal District at the address stated above or by calling Mr. Ricky McDonald, General Manager, at 281-689-2327.

Please let me know if you have any questions.

**BRIAN FRENCH, CPESC** | Project Manager

Public Works

D: 409.554.8972 | C: 409.719.1815

2615 Calder Ave, Suite 500, Beaumont, Texas, 77702

**EMPLOYEE-OWNED. CLIENT FOCUSED.**

[www.lja.com](http://www.lja.com)



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**From:** Rainee Trevino <[Rainee.Trevino@tceq.texas.gov](mailto:Rainee.Trevino@tceq.texas.gov)>

**Sent:** Wednesday, December 3, 2025 4:22 PM

**To:** Brian French <[bfrench@lja.com](mailto:bfrench@lja.com)>

**Cc:** Jimmy Flowers <[jflowers@lja.com](mailto:jflowers@lja.com)>

**Subject:** Application to Amend Permit No. WQ0012274001- Notice of Deficiency Letter

[EXTERNAL EMAIL]

Good afternoon,

The attached Notice of Deficiency letter sent on December 3, 2025, requests additional information needed to declare the application administratively complete. Please send the complete response to my attention by December 17, 2025.

Thank you,

**Rainee Trevino**

Water Quality Division | ARP Team

Texas Commission on Environmental Quality

512-239-4324



**[EXTERNAL EMAIL]** Exercise caution. Do not open attachments or click links from unknown senders or unexpected email

**[EXTERNAL EMAIL]** Exercise caution. Do not open attachments or click links from unknown senders or unexpected email

## Rainee Trevino

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**From:** Brian French <btfrench@lja.com>  
**Sent:** Monday, December 8, 2025 11:27 AM  
**To:** Rainee Trevino  
**Cc:** Jimmy Flowers  
**Subject:** RE: Application to Amend Permit No. WQ0012274001- Notice of Deficiency Letter  
**Attachments:** Affected land owners map Revised 12-4-25.pdf; Affected Landowners addresses updated.pdf; Affected Landowners Map index updated.pdf

Good morning, Rainee,

The notice looks good on my end. Please see the attached updated Affected Land Owners map with the associated documents.

Brian

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**From:** Rainee Trevino <Rainee.Trevino@tceq.texas.gov>  
**Sent:** Friday, December 5, 2025 4:49 PM  
**To:** Brian French <btfrench@lja.com>  
**Cc:** Jimmy Flowers <jflowers@lja.com>  
**Subject:** RE: Application to Amend Permit No. WQ0012274001- Notice of Deficiency Letter

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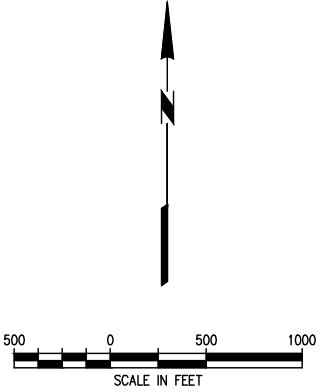
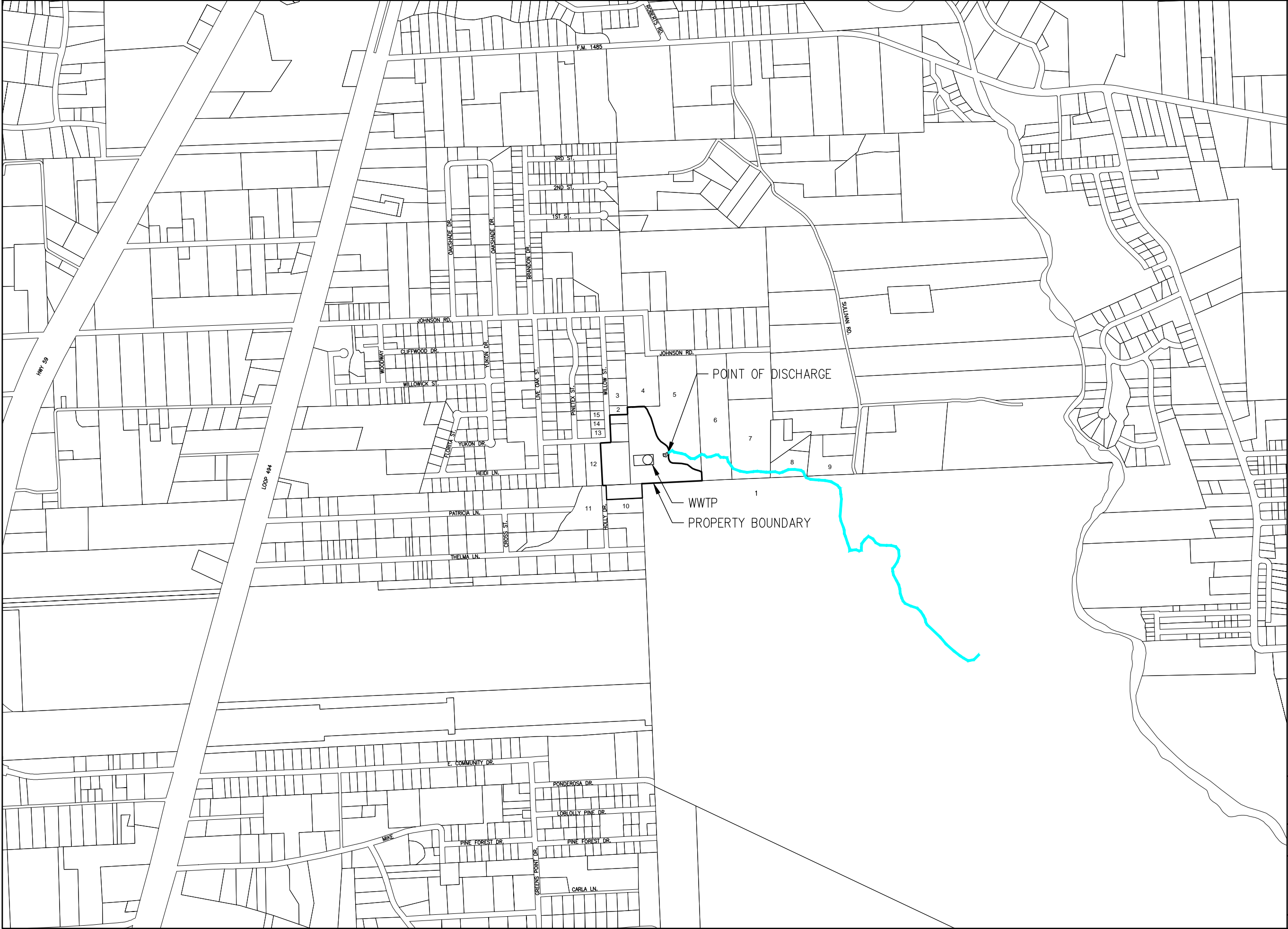
### [EXTERNAL EMAIL]

Thank you for catching that. I have updated the NORI. Please see below:

**APPLICATION.** New Caney Municipal Utility District, P.O. Box 1799, New Caney, Texas 77357, has applied to the Texas Commission on Environmental Quality (TCEQ) to amend Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0012274001 (EPA I.D. No. TX0084638) to authorize an increase to the discharge of treated wastewater to a volume not to exceed an annual average flow of 4,000,000 gallons per day. The domestic wastewater treatment facility is located at 23673 Sweetgum Street, in Montgomery County, Texas 77357. The discharge route is from the plant site to an unnamed tributary of Caney Creek, thence to Caney Creek ([pending review](#)). TCEQ received this application on November 26, 2025. The permit application will be available for viewing and copying at New Caney Municipal Utility district, 23696 Roberts Road, New Caney, in Montgomery 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=-95.204166,30.137777&level=18>

Further information may also be obtained from New Caney Municipal Utility District at the address stated above or by calling Mr. Ricky McDonald, General Manager, at 281-689-2327.

I will keep a look out for your email with the updated landowner map, list, and labels.



DISCHARGE

NEW CANEY M.U.D.

LANDOWNER DISCHARGE ROUTE

**LJA Engineering, Inc.**  
2615 Calder Avenue, Suite 500  
Beaumont, Texas 77702  
Phone 409.833.3363  
Fax 409.833.3317  
FRN - F-1386

SCALE: AS SHOWN JOB No. E208-0440 ATTACHMENT H