

## **Administrative Package Cover Page**

### This file contains the following documents:

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



### TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

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

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

Remington Municipal Utility District No.1 (CN600889364) operates the Remington Municipal Utility District Sewage Treatment Plant (RN101917524), an activated sludge process operated in the single stage nitrification mode. The facility is located at 9805 Queenston Blvd., in Houston, Harris County, Texas 77095. This application is for a renewal to discharge at an annual average flow of 1,100,000 gallons per day of treated domestic wastewater via Outfall 001.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD5), total suspended solids (TSS), ammonia nitrogen (NH3-N), and Escherichia coli. Additional potential pollutants are included in the Domestic Technical Report 1.0 Section 7., Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include bar screens, aeration basins, final clarifiers, sludge digesters, chlorine contact chambers and a dichlorination chamber.

### **TEXAS COMMISSION ON ENVIRONMENTAL QUALITY**



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

### PERMIT NO. WQ0013328001

**APPLICATION.** Remington Municipal Utility District No. 1, 1300 Post Oak Boulevard, Suite 2400, Houston, Texas 77056, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WO0013328001 (EPA I.D. No. TX0101371) to authorize the discharge of treated wastewater at a volume not to exceed an annual average flow of 1,100,000 gallons per day. The domestic wastewater treatment facility is located at 9805 Queenston Boulevard, in the city of Houston, in Harris County, Texas 77095. The discharge route is from the plant site to a Harris County Flood Control District ditch; thence to Horsepen Creek; thence to Langham Creek; thence to Bear Creek; thence to South Mayde Creek; thence to Buffalo Bayou Above Tidal. TCEQ received this application on October 15, 2025. The permit application will be available for viewing and copying at Robinson-Westchase Neighborhood Library, Front Desk, 3223 Wilcrest Drive, Houston, in Harris County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage: https://www.tceq.texas.gov/permitting/wastewater/pendingpermits/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=-95.672222,29.918333&level=18

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

PUBLIC COMMENT / PUBLIC MEETING. You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the opportunity to submit comments or to ask questions about the application. TCEQ will hold a public meeting if the Executive Director determines that there is a significant degree of public interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

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

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

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

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

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

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

**INFORMATION AVAILABLE ONLINE.** For details about the status of the application, visit the Commissioners' Integrated Database at <a href="https://www.tceq.texas.gov/goto/cid">www.tceq.texas.gov/goto/cid</a>. 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 <a href="https://www14.tceq.texas.gov/epic/eComment/">https://www14.tceq.texas.gov/epic/eComment/</a>, 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 <a href="www.tceq.texas.gov/goto/pep">www.tceq.texas.gov/goto/pep</a>. Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from Remington Municipal Utility District No. 1 at the address stated above or by calling Mr. William T. Manning, Jr., P.E., Sander Engineering Corporation, at 713-784-4830 extension 18.

Issuance Date: October 30, 2025



#### SANDER ENGINEERING CORPORATION

CONSULTING ENGINEERS - SURVEYORS
TEXAS BOARD OF PROFESSIONAL ENGINEERS FIRM NO. F-517
TEXAS BOARD OF PROFESSIONAL LAND SURVEYING FIRM NO. 10030300

2901 WILCREST, SUITE 550 HOUSTON, TEXAS 77042

DENNIS W. SANDER, P.E. President 713-784-4830 FAX 713-784-4052

October 13, 2025

#### VIA FEDERAL EXPRESS

Texas Commission on Environmental Quality Application Review and Processing Team (MC148) Building F, Room 2101 12100 Park 35 Circle Austin, Texas 78753

Re: Application to Renew Wastewater Discharge Permit No. WQ0013328-001

Remington Municipal Utility District No. 1

85-054-8

#### Gentlemen:

Enclosed for your review is one (1) original and two (2) copies of an Application to Renew a Domestic Wastewater Discharge Permit for the following:

Type of Application: **Domestic Wastewater Discharge Permit - Renewal** 

Applicant: Remington Municipal Utility District No. 1

Permit No: **WQ0013328-001** 

Name of Facility: Remington MUD Wastewater Treatment Facility

The permit application fee of \$2,015.00 has been sent under separate cover with the required form to the Financial Administration Division. A copy of the application fee check is included with the application. Jackrabbit Road Public Utility District does not owe any outstanding fees to the TCEQ.

If you have any questions or need any additional information, please do not hesitate to contact me.

Yours Truly.

William T. Manning, Jr., P.E. Vice President / Partner

vice President / Partilei

#### Enclosures

xc: 1) Remington MUD c/o Schwartz, Page and Harding, LLP 1300 Post Oak Boulevard, Suite 2400 Houston, TX 77056

## REMINGTON MUNICIPAL UTILITY DISTRICT No. 1 TPDES PERMIT RENEWAL APPLICATION HARRIS COUNTY, TEXAS WQ0013328-001

## TCEQ DOMESTIC PERMIT APPLICATION FOR A RENEWAL OF AN EXISTING PERMIT

### PREPARED BY:

SANDER ENGINEERING CORP. 2901 WILCREST, STE 550 HOUSTON, TEXAS 77042 713-784-4830 TBPE FIRM # F-517

October 2025

## REMINGTON MUNICIPAL UTILITY DISTRICT No. 1 TPDES PERMIT RENEWAL APPLICATION HARRIS COUNTY, TEXAS WQ0013328-001

### DOMESTIC ADMINISTRATIVE REPORT FOR PERMIT APPLICATION

# SCOMMISSION OF THE PROPERTY OF

### TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

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

APPLICANT NAME: <u>Remington Municipal Utility District No. 1</u> PERMIT NUMBER (If new, leave blank): WQ00 <u>13328001</u>

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

	$\mathbf{Y}$	N		$\mathbf{Y}$	N
Administrative Report 1.0	$\boxtimes$	24	Original USGS Map	$\boxtimes$	
Administrative Report 1.1		$\boxtimes$	Affected Landowners Map		$\boxtimes$
SPIF	$\boxtimes$		Landowner Disk or Labels	(2) (2) (3)	$\boxtimes$
Core Data Form	$\boxtimes$		Buffer Zone Map		$\boxtimes$
Public Involvement Plan Form		$\boxtimes$	Flow Diagram	$\boxtimes$	
Technical Report 1.0			Site Drawing	$\boxtimes$	
Technical Report 1.1		$\boxtimes$	Original Photographs	#25.02 [18] 100.023	$\boxtimes$
Worksheet 2.0	$\boxtimes$		Design Calculations		$\boxtimes$
Worksheet 2.1		$\boxtimes$	Solids Management Plan		$\boxtimes$
Worksheet 3.0		$\boxtimes$	Water Balance		$\boxtimes$
Worksheet 3.1		$\boxtimes$			
Worksheet 3.2		$\boxtimes$			
Worksheet 3.3		$\boxtimes$			
Worksheet 4.0	$\boxtimes$				
Worksheet 5.0	$\boxtimes$				
Worksheet 6.0	$\boxtimes$				
Worksheet 7.0		$\boxtimes$			

For TCEQ Use Only	
Segment Number	County
Expiration Date	Region
Permit Number	

## THE THE PARTY OF T

### TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

### DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

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

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

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

Minor Amendment (for any flow) \$150.00 □

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

Check/Money Order Amount: \$2,015.00

Name Printed on Check: Sander Engineering Corporation

EPAY Voucher Number: Click to enter text.

Copy of Payment Voucher enclosed? Yes □

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

a.	Che	eck the box next to the appropriate authorization type.							
	$\boxtimes$	Publicly-Owned Domestic Wastewater							
	THE STATE OF THE S	Privately-Owned Domestic Wastewater							
		Conventional Wastewater Treatment							
b.	Che	Check the box next to the appropriate facility status.							
	$\boxtimes$	Active 🔲 Inactive							

C.	Che ⊠ □							
	☐ 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	15587) -12	Minor Amendment with Renewal				
		Major Amendment <u>without</u> Renewal	99883 50 30004	Minor Amendment without Renewal				
	$\boxtimes$	Renewal without changes	0.2000 N 1.200	Minor Modification of permit				
e.	For	amendments or modifications, describe the p	ropo	osed changes: <u>n/a - Renewal</u>				
f.	For	existing permits:						
	Peri	mit Number: WQ00 <u>13328001</u>						
	EPA I.D. (TPDES only): TX <u>0101371</u>							
	Expiration Date: 12/10/2025							
Se	ctio	on 3. Facility Owner (Applicant) a	nd	Co-Applicant Information				
		(Instructions Page 26)		co ripplicant information				
A.	The	e owner of the facility must apply for the per	rmit.					
	Wha	at is the Legal Name of the entity (applicant) a	pply	ing for this permit?				
	Remington Municipal Utility District No. 1							
	(The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal documents forming the entity.)							
	If the applicant is currently a customer with the TCEQ, what is the Customer Number (CN)? You may search for your CN on the TCEQ website at <a href="http://www15.tceq.texas.gov/crpub/">http://www15.tceq.texas.gov/crpub/</a>							
	(	CN: <u>600889364</u>						
	Wha	at is the name and title of the person signing t cutive official meeting signatory requirements	he a in 3	pplication? The person must be an 80 TAC § 305.44.				

Prefix: Mr. Last Name, First Name: <u>Hardin, Timothy B.</u>

Title: Board 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?

<u>N/A</u>

(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: <a href="http://www15.tceq.texas.gov/crpub/">http://www15.tceq.texas.gov/crpub/</a>

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. CORE DATA FORM

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

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

A. Prefix: Mr. Last Name, First Name: Manning, Jr., William T.

Title: Engineer for District Credential: P.E.

Organization Name: Sander Engineering Corp.

Mailing Address: <u>2901 Wilcrest, Ste 550</u> City, State, Zip Code: <u>Houston, TX 77042</u>

Phone No.: <u>713-784-4830 ext 18</u> E-mail Address: <u>bmanning@sandereng.com</u>

Check one or both: 

Administrative Contact

Technical Contact

B. Prefix: Mr. Last Name, First Name: Sander, Dennis

Title: <u>Engineer for District</u> Credential: <u>P.E.</u>

Organization Name: Sander Engineering Corp.

Mailing Address: 2901 Wilcrese, Ste 550 City, State, Zip Code: Houston, TX 77042

Phone No.: <u>713-784-4830</u> E-mail Address: <u>dsander@sandereng.com</u>

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.Timothy Last Name, First Name: Hardin, Timothy

Title: Board president Credential: P.E.

Organization Name: Remington Municipal Utility District No. 1

Mailing Address: 1300 Post Oak Blvd. Ste 2400 City, State, Zip Code: Houston TX 77056-

3044

Phone No.: <u>713-623-4531</u>

E-mail Address: <u>Tim.H@langfordeng.com></u>

**B.** Prefix: Mr.

Last Name, First Name: Connelly, Larry

Title: **Board Vice president** 

Credential: Click to enter text

Organization Name: Remington Municipal Utility District No.1

Mailing Address: 1300 Post Oak Blvd., STE 2400

City, State, Zip Code: Houston, TX 77056-

3044

Phone No.: <u>713-523-4531</u>

E-mail Address: <a href="mailto:lawrence.stonegate@gmail.com">lawrence.stonegate@gmail.com</a>

### Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Mr.

Last Name, First Name: Reed, Mathew

Title: Attoney for District

Credential: Click to enter text

Organization Name: Schwartz Page & Harding, LLP

Mailing Address: 1300 Post Oak Blvd., STE 2400

City, State, Zip Code: <u>77056-3044</u>

Phone No.: <u>713-623-4531</u>

E-mail Address: <u>mreed@sphllp.com</u>

### 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: r.

Last Name, First Name: Townsend, Christopher

Title: District Operator

Credential: Click to enter text.

Organization Name: Inframark LLC

Mailing Address: 32259 Morton Rd.

City, State, Zip Code: Brtookshire, TX 77423

Phone No.: <u>281-371-2980</u>

E-mail Address: christopher.townsend@inframark.com

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

### A. Individual Publishing the Notices

Prefix: Mr.

Last Name, First Name: Manning, William

Title: District Engineer

Credential: P.E.

Organization Name: Sander Engineering Corp.

Mailing Address: 2901 Wilcrest, STE 550

City, State, Zip Code: Houston, TX 77042

Phone No.: <u>713-784-4830</u>

E-mail Address: bmanning @sandereng.com

В.	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: <u>Mr.</u> Last Name, First Name: <u>Manning, Jr. William T.</u>				
	Title: <u>District Engineer</u> Credential: <u>P.E.</u>				
	Organization Name: Sander Engineering Corp.				
	Mailing Address: 2901 Wilcrest, Ste 550 City, State, Zip Code: Houston, TX 77042				
	Phone No.: <u>713-784-4830</u> E-mail Address: <u>bmanning@sander eng.com</u>				
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: Robinson-Westchase Neighborhood Library				
	Location within the building: <u>Front Desk</u>				
	Physical Address of Building: <u>3223 Wilcrest</u>				
	City: <u>Houston</u> County: <u>Harris</u>				
	Contact (Last Name, First Name): <u>Head Librarian</u>				
	Phone No.: 832-393-2011 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 w be needed. Complete instructions on publishing the alternative language notices will be ir 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 <b>no</b> , publication of an alternative language notice is not required; <b>skip to</b> Section 9				

2. Are the students who attend either the elementary school or the middle school enrolled in

a bilingual education program at that school?

☐ No

below.

⊠ Yes

	3.	Do the locatio		these	e schools attend a bilingual education program at another		
		但是由 2019年)	Yes	$\boxtimes$	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	$\boxtimes$	No		
	5.	If the a	inswer is <b>yes</b> ed. Which lar	s to <b>q</b> nguag	<b>question 1, 2, 3, or 4</b> , public notices in an alternative language are ge is required by the bilingual program? <u>Spanish</u>		
F.	Pla	in Lang	guage Summ	ary I	Геmplate		
	Co	mplete	the Plain Lar	nguag	ge Summary (TCEQ Form 20972) and include as an attachment.		
	At	tachme	<b>nt:</b> <u>Attachme</u> ı	nt F			
G.	Pu	blic Inv	olvement Pl	lan Fo	orm		
	Co	mplete	the Public In	volve	ement Plan Form (TCEQ Form 20960) for each application for a		
	ne	w perm	it or major a	amen	dment to a permit and include as an attachment.		
	At	tachme	nt: <u>N/A</u>				
Sa	cti	on 9.	Regulat	ed F	Entity and Permitted Site Information (Instructions		
		on J.	Page 29		Littly and I climited site information (histractions		
A.			is currently 1 N <u>101917524</u>		ated by TCEQ, provide the Regulated Entity Number (RN) issued to		
			TCEQ's Cen currently reg		Registry at <a href="http://www15.tceq.texas.gov/crpub/">http://www15.tceq.texas.gov/crpub/</a> to determine if ed by TCEQ.		
B.	Na	me of p	roject or site	e (the	name known by the community where located):		
	Rei	mington	Municipal Ut	ility I	District No. 1, Sewage Treatment Plant		
C.	Ow	mer of t	reatment fac	cility:	: Remington Municipal Utility District No. 1		
	Ow	nership	of Facility:	$\boxtimes$	Public 🗆 Private 🗆 Both 🗀 Federal		
D.	Ow	ner of l	and where to	reatm	nent facility is or will be:		
	Pre	fix: Clic	ek to enter te	ext.	Last Name, First Name: Click to enter text.		
	Tit	le: Click	to enter tex	ct.	Credential: Click to enter text.		
	Org	ganizati	on Name: <u>Re</u>	eming	ton Municipal Utility District No. 1		
	Ma	iling Ad	ldress: <u>1300</u> ]	Pos O	ak Blvd., Ste 2400 City, State, Zip Code: <u>Houston, TX 77056</u>		
	Pho	one No.:	713-623-453	1	E-mail Address: Click to enter text.		
					same person as the facility owner or co-applicant, attach a lease d easement. See instructions.		
		Attachi	ment: <u>N/A</u>				

	Title: Click to enter text,	Credential: Click to enter text.
	Organization Name: Click to ente	r text.
	Mailing Address: Click to enter to	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: <u>N/A</u>	
F.	Owner sewage sludge disposal si property owned or controlled by	te (if authorization is requested for sludge disposal on the applicant)::
	Prefix: <u>N/A</u>	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: Click to ente	r text.
	Mailing Address: Click to enter to	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: <u>N/A</u>	
Se	ection 10. TPDES Discharg	ge Information (Instructions Page 31)
		o illioillation (illioilaction) i abe 31/
	the factor and the second state of the second	ity location in the existing permit accurate?
	the factor and the second state of the second	
	Is the wastewater treatment facility  Yes No  If no, or a new permit application	
	Is the wastewater treatment facility  Yes  No	ity location in the existing permit accurate?
	Is the wastewater treatment facility  Yes No  If no, or a new permit application	ity location in the existing permit accurate?
A.	Is the wastewater treatment facility  Yes No  If no, or a new permit application  N/A	ity location in the existing permit accurate?
A.	Is the wastewater treatment facility  Yes No  If no, or a new permit application  N/A	ity location in the existing permit accurate?  on, please give an accurate description:
A.	Is the wastewater treatment facility  Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment permit application N/A	ity location in the existing permit accurate?  on, please give an accurate description:  the discharge route(s) in the existing permit correct?  ermit application, provide an accurate description of the
A.	Is the wastewater treatment facility  Yes No  If no, or a new permit application  N/A  Are the point(s) of discharge and  Yes No  If no, or a new or amendment perpoint of discharge and the discharge	ity location in the existing permit accurate?  on, please give an accurate description:  the discharge route(s) in the existing permit correct?
A.	Is the wastewater treatment facility  Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment permit application N/A	ity location in the existing permit accurate?  on, please give an accurate description:  the discharge route(s) in the existing permit correct?  ermit application, provide an accurate description of the
A.	Is the wastewater treatment facility  Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment perpoint of discharge and the discharge TAC Chapter 307:	ity location in the existing permit accurate?  on, please give an accurate description:  the discharge route(s) in the existing permit correct?  ermit application, provide an accurate description of the
A.	Is the wastewater treatment facility  Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment perpoint of discharge and the discharge TAC Chapter 307:  Click to enter text.	on, please give an accurate description:  the discharge route(s) in the existing permit correct?  ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment facility  Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment perpoint of discharge and the discharge and discharge and discharge and discharge and dis	on, please give an accurate description:  the discharge route(s) in the existing permit correct?  ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
А.	Is the wastewater treatment facility  Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment perpoint of discharge and the discharge and discharge and discharge and discharge and dis	ity location in the existing permit accurate?  on, please give an accurate description:  the discharge route(s) in the existing permit correct?  ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30  on /are located: Harris
А.	Is the wastewater treatment facility  Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment perpoint of discharge and the discharge and discharge and discharge and discharge and dis	the discharge route(s) in the existing permit correct?  ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 // are located: Harris discharge to a city, county, or state highway right-of-way, or
А.	Is the wastewater treatment facility  Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment perpoint of discharge and the disch	the discharge route(s) in the existing permit correct?  ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 // are located: Harris discharge to a city, county, or state highway right-of-way, or

Last Name, First Name: Click to enter text

E. Owner of effluent disposal site:

Prefix: <u>N/A</u>

	🛮 Authorization granted 🔲 Authorization pending						
	For <b>new and amendment</b> applications, provide copies of letters that show proof of contact and the approval letter upon receipt.						
	Attachment: <u>N/A</u>						
D.	For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: $N/A - less than 5 MGD$						
Se	ction 11. TLAP Disposal Information (Instructions Page 32)						
Α.	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?						
	Yes No						
	If <b>no, or a new or amendment permit application</b> , provide an accurate description of the disposal site location:						
	N/A – Discharge Permit						
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 <b>TLAPs</b> , please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: Click to enter text.						
Se	ction 12. Miscellaneous Information (Instructions Page 32)						
A.	Is the facility located on or does the treated effluent cross American Indian Land?						
	Yes No						
В.	If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?						
	Yes No Not Applicable						
	If No, or if a new onsite sludge disposal authorization is being requested in this permit application, provide an accurate location description of the sewage sludge disposal site.						
	N/A						

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

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 <b>yes</b> , provide the following information:
	Account number: Click to enter text
	Amount past due: Click to enter text
Ε.	Do you owe any penalties to the TCEQ?
	Yes 🗵 No
	If <b>yes</b> , please provide the following information:
	Enforcement order number: Click to enter text.
	Amount past due: Click to enter text
Se	ection 13. Attachments (Instructions Page 33)
lnc	dicate 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.
X	Original full-size USGS Topographic Map with the following information:
	<ul> <li>Applicant's property boundary</li> <li>Treatment facility boundary</li> <li>Labeled point of discharge for each discharge point (TPDES only)</li> <li>Highlighted discharge route for each discharge point (TPDES only)</li> <li>Onsite sewage sludge disposal site (if applicable)</li> <li>Effluent disposal site boundaries (TLAP only)</li> <li>New and future construction (if applicable)</li> <li>1 mile radius information</li> <li>3 miles downstream information (TPDES only)</li> <li>All ponds.</li> </ul>
	Attachment 1 for Individuals as co-applicants
Att	Other Attachments. Please specify: <u>Attachment A – USGS Maps</u> , <u>Attachment B – Flow Diagram</u> , <u>eachment C – Sewage Sludge Management and Disposal Information</u> , <u>Attachment D – Site Drawing</u> , <u>eachment E – Core Data Form</u> , <u>Attachment F – Plain Language Summary</u> , <u>Attachment SPIF</u> , <u>eachment SPIF – USGS</u> , <u>Laboratory Data QA/QC Chain of Custody</u> , <u>Copy of Application Fee Check</u>

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

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

Permit Number: WQ0013328001

Applicant: Remington Municipal Utility District No. 1

Certification:

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

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

Signatory	name	tvned	or	printed).	Timothy	R	Hardin
DISTILLOI Y	munic '	(typcu	OI	printed).	IIIIOury	D,	Harum

Signatory title: Board President

oignature:		THE REAL PROPERTY.	-	7
	V			_

(Use blue ink)

Date: 5/28/23

Subscribed and Sworn to before me by the said TIMOTHY B. HARDIN

My commission expires on the 2 no day of November , 20 25

Notary Public

LOREN SAYRE

Notary Public, State of Texas

Comm. Expires 11-02-2025

Notary ID 131338701

[SEAL]

County, Texas

### REMINGTON MUNICIPAL UTILITY DISTRICT No. 1 TPDES PERMIT RENEWAL APPLICATION HARRIS COUNTY, TEXAS WQ0013328-001

## DOMESTIC TPDES PERMIT APPLICATION TECHNICAL REPORT

# STATE OF THE PROPERTY OF THE P

### TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

### DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

### A. Existing/Interim I Phase

Design Flow (MGD):  $\underline{1.1}$ 

2-Hr Peak Flow (MGD): 4.4

Estimated construction start date: Existing

Estimated waste disposal start date: Wxisting

### **B.** Interim II Phase

Design Flow (MGD): Click to enter text.

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): 1.1

2-Hr Peak Flow (MGD): 4.4

Estimated construction start date: Existing

Estimated waste disposal start date: Existing

### **D.** Current Operating Phase

Provide the startup date of the facility: 04/15/2005

### Section 2. Treatment Process (Instructions Page 43)

### A. Current Operating Phase

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

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

On Site lift station pumps into head works with fine screens then into an aeration basin, mixed with return sludge, through the aeration basin into the secondary clarifiers, then into the filters and then to an aerated chlorine contact basin with de-chlorination and then discharged. Sludge is wasted to an aerobic digester for stabilization and concentrating.

### **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)
Aeration Basin	2	75ft x 20ft x 15ft WD
Aeration Channels	1	84.5 ft x 10ft x 15ft WD
Aeration Channels	1	140ft x 9.33ft x 15ft WD
Secondary Clarifier	2	55ft Diameter, 12ft SWD
Filters	2	48ft x 16ft x 4ft WD
Aerobic Digesters	2	70ft x 20ft x 15.5 WD

### C. Process Flow Diagram

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

**Attachment**: Attacment B

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

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

• Latitude: <u>29d 55' 5.31"</u>

• Longitude: <u>95d 40' 22.12"</u>

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

• Latitude: <u>N/A</u>

• Longitude: <u>Click to enter text.</u>

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

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

Attachment: <u>D</u>

Click to enter text.			·
Collection System Information and Collection System Information and Collection Systems. Examples.  Collection System Information	ction system, existing Please see the instr	g and new, served by th	nis facility, including
Collection System Name	Owner Name	Owner Type	Population Serve
Remington MUD No.1	Remington MUD No. 1`	Publicly Owned	13743
Harris County MUD 500	Harris County MUD 500	<b>Publicly Owned</b>	1710
		Choose an item.	
, , , , , , , , , , , , , , , , , , , ,		Choose an item.	
Yes No  Yes No  Yes No  Yes No  Yes of being authorized b  Yes No  Yes, provide a detailed dis	mit contain a phase of the TCEQ?	that has not been const	tructed within five
ailure to provide sufficient ecommending denial of th	at justification may be unbuilt phase or p	result in the Executive bhases.	e Director
N/A – no unbuilt phases			

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.
	T/A
Se	ection 6. Permit Specific Requirements (Instructions Page 45)
	r applicants with an existing permit, check the Other Requirements or Special ovisions 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: <u>Unknown</u>
	Provide information, including dates, on any actions taken to meet a <i>requirement or provision</i> pertaining to the submission of a summary transmittal letter. <b>Provide a copy of</b> an approval letter from the TCEQ, if applicable.
	N <u>/A</u>
В.	Buffer zones
	Have the buffer zone requirements been met?
	Yes No
	Provide information below, including dates, on any actions taken to meet the conditions of the buffer zone. If available, provide any new documentation relevant to maintaining the buffer zones.
	N <u>/A</u>

C.	Ot	her actions required by the current permit
	su	bes the <i>Other Requirements</i> or <i>Special Provisions</i> section in the existing permit require bmission of any other information or other required actions? Examples include otification of Completion, progress reports, soil monitoring data, etc.
		Yes No
		yes, provide information below on the status of any actions taken to meet the nditions of an <i>Other Requirement</i> or <i>Special Provision</i> .
	N	<u>/A</u>
D.	Gr	it and grease treatment
	1.	Acceptance of grit and grease waste
		Does the facility have a grit and/or grease processing facility onsite that treats and decants or accepts transported loads of grit and grease waste that are discharged directly to the wastewater treatment plant prior to any treatment?
		Yes No
		If No, stop here and continue with Subsection E. Stormwater Management.
	2.	Grit and grease processing
		Describe below how the grit and grease waste is treated at the facility. In your description, include how and where the grit and grease is introduced to the treatment works and how it is separated or processed. Provide a flow diagram showing how grit and grease is processed at the facility.
		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.	Sto	ormwater management
	1.	Applicability
		Does the facility have a design flow of 1.0 MGD or greater in any phase?
		🗵 Yes 🖺 No
		Does the facility have an approved pretreatment program, under 40 CFR Part 403?
		Yes  No
		If no to both of the above, then skip to Subsection F, Other Wastes Received.
	2.	MSGP coverage
		Is the stormwater runoff from the WWTP and dedicated lands for sewage disposal currently permitted under the TPDES Multi-Sector General Permit (MSGP), TXR050000?
		🖾 Yes 🗵 No
		<b>If yes,</b> please provide MSGP Authorization Number and skip to Subsection F, Other Wastes Received:
		TXR05 <u>U981</u> or TXRNE <u>Click to enter text.</u>
		If no, do you intend to seek coverage under TXR050000?
		Yes I 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)?
		Use No

	If yes, please explain below then proceed to Subsection F, Other Wastes Received:					
	N <u>/A</u>					
1	Evictiva coverage in in Heid to all versus					
4.	Existing coverage in individual permit  Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit?					
	Yes 🛛 No					
	<b>If yes</b> , provide a description of stormwater runoff management practices at the site that are authorized in the wastewater permit then skip to Subsection F, Other Wastes Received.					
	N <u>/A</u>					
5.	Zero stormwater discharge					
	Do you intend to have no discharge of stormwater via use of evaporation or other means?					
	Yes 🗵 No					
	If yes, explain below then skip to Subsection F. Other Wastes Received.					
	N <u>/A</u>					
	Note: If there is a potential to discharge any stormwater to surface water in the state as the result of any storm event, then permit coverage is required under the MSGP or an individual discharge permit. This requirement applies to all areas of facilities with treatment plants or systems that treat, store, recycle, or reclaim domestic sewage, wastewater or sewage sludge (including dedicated lands for sewage sludge disposal located within the onsite property boundaries) that meet the applicability criteria of above. You have the option of obtaining coverage under the MSGP for direct discharges, (recommended), or obtaining coverage under this individual permit.					
<i>6.</i>	Request for coverage in individual permit					
	Are you requesting coverage of stormwater discharges associated with your treatment plant under this individual permit?					
	Yes 🗵 No					
	<b>If yes</b> , provide a description of stormwater runoff management practices at the site for which you are requesting authorization in this individual wastewater permit and describe whether you intend to comingle this discharge with your treated effluent or discharge it via a separate dedicated stormwater outfall. Please also indicate if you					

		intend to divert stormwater to the treatment plant headworks and indirectly discharge it to water in the state.
		N/A
		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.	Di	scharges to the Lake Houston Watershed
	Do	es the facility discharge in the Lake Houston watershed?
		□ Yes ⊠ No
		yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions.
G.	Ot	her 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.
		N/A
		Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.
	2.	Acceptance of septic waste
		Is the facility accepting or will it accept septic waste?
		Yes 🖾 No
		If yes, does the facility have a Type V processing unit?
		T Yes No
		If yes, does the unit have a Municipal Solid Waste permit?

	If <b>yes to any of the above</b> , 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 BOD₅ concentration of the septic waste, and the design BOD₅ concentration of the influent from the collection system. Also note if this information has an has not showed since the last acquire the last acquire stick.
	information has or has not changed since the last permit action.  N/A
	Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.
3.	Acceptance of other wastes (not including septic, grease, grit, or RCRA, CERCLA or as discharged by IUs listed in Worksheet 6)
	Is or will the facility accept wastes that are not domestic in nature excluding the categories listed above?  Yes No
	If yes, provide the date that the plant started accepting the waste, an estimate how much waste is accepted on a monthly basis (gallons or millions of gallons), a description of the entities generating the waste, and any distinguishing chemical or other physical characteristic of the waste. Also note if this information has or has not changed since the last permit action.
	N
cti	on 7. Pollutant Analysis of Treated Effluent (Instructions Page

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.

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD <sub>5</sub> , mg/l	Resi	2170	Pendin	5	
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					
E.coli (CFU/100ml) freshwater					-
Entercocci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity, µmohs/cm, †					
Oil & Grease, mg/l					
Alkalinity (CaCO <sub>3</sub> )*, mg/l					

<sup>\*</sup>TPDES permits only †TLAP permits only

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

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

### Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: Inframrk LLC

Facility Operator's License Classification and Level: A, B, C,D

Facility Operator's License Number: OCoooo232

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

### A. WWTP's Biosolids Management Facility Type

Check all that apply. See instructions for guidance

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

### B. WWTP's Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

### C. Biosolids Management

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

all biosolids management practices listed in the instructions. Rather indicate the management practice the facility plans to use.

### **Biosolids Management**

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Agricultural Land Application	Off-site Third-Party Handler or Preparer	Not Applicable	Varies	Class B: PSRP Aerobic Digestion	Option 1: Volatile solids reduced by 38%
Disposal in Landfill	Off-site Third-Party Handler or Preparer	Not Applicable	Varies	Class B: PSRP Aerobic Digestion	Option 10. Incorporate within 6 hrs
Other	Off-site Third-Party Handler or Preparer	Not Applicable	Varies	Class B: PSRP Aerobic Digestion	Option 1: Volatile solids reduced by 38%

If "Other" is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): <u>Transport to another WWTP for processing</u>

### D. Disposal site

Disposal site name: <u>Varies – see attachment C</u>

TCEQ permit or registration number: <u>Varies – see attachment C</u>

County where disposal site is located: <u>Varies – se attachment C</u>

### E. Transportation method

Method of transportation (truck, train, pipe, other): <u>Truck</u>

Name of the hauler: <u>Varies – see attachment C</u>

Hauler registration number: <u>Varies – see attachment C</u>

Sludge is transported as a:

Liquid 🗵 sei

semi-liquid 🗵

semi-solid

solid 🖺

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

### A. Beneficial use authorization

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

🛘 Yes 🖾 No

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

Yes 🖺 No					
If yes, is the completed Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451) attached to this permit application (see the instructions for details)?					
Yes No					
B. Sludge processing authorization					
Does the existing permit include authorization for any of the following sludge processing storage or disposal options?					
Sludge Composting	Yes	⊠ No			
Marketing and Distribution of sludge	🖺 Yes	⊠ No			
Sludge Surface Disposal or Sludge Monofill	☐ Yes	⊠ No			
Temporary storage in sludge lagoons	Yes	⊠ No			
If yes to any of the above sludge options and the authorization, is the completed <b>Domestic Waste Technical Report (TCEQ Form No. 10056)</b> attack	water Permi	t Application:	Sewage Sludge		
Section 11. Sewage Sludge Lagoons (In	structions	Page 53)			
Does this facility include sewage sludge lagoons?	*** **** ***** ***********************				
🗆 Yes 🗵 No					
If yes, complete the remainder of this section. If no,	proceed to S	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.					
<ul> <li>Original General Highway (County) Map:</li> </ul>					
Attachment: Click to enter text.					
USDA Natural Resources Conservation Service Soil Map:					
Attachment: Click to enter text.					
Federal Emergency Management Map:  Attack					
Attachment: Click to enter text.					
Site map:  Attachment: Click to enter toyt.					
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			
Att	achment: 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	o enter text.			
	·			

### **B.** Temporary storage information

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

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

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

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

Phosphorus, mg/kg: Click to enter text.

Potassium, mg/kg: Click to enter text

pH, standard units: Click to enter text.

Ammonia Nitrogen mg/kg: Click to enter text.

Arsenic: Click to enter text.

Cadmium: Click to enter text

Chromium: Click to enter text.

Copper: Click to enter text.

Lead: Click to enter text.

Mercury: Click to enter text.

Molybdenum: Click to enter text.

Nickel: Click to enter text,

Selenium: Click to enter text.

Zinc: Click to enter text.

Total PCBs: Click to enter text.

Provide the following information:

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

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

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

### C. Liner information

	Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of $1x10^{-7}$ cm/sec?				
	Tes 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.				
	<ul> <li>Description of the method of controlling infiltration of groundwater and surface water from entering the site</li> </ul>				
	Attachment: Click to enter text				
	<ul> <li>Procedures to prevent the occurrence of nuisance conditions</li> </ul>				
	Attachment: Click to enter text.				
E.	Groundwater monitoring				
	Is groundwater monitoring currently conducted at this site, or are any wells available for groundwater monitoring, or are groundwater monitoring data otherwise available for the sludge lagoon(s)?				
	🖺 Yes 🗓 No				

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

Attachment: Click to enter text!

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

	<del> </del>
A. Additional authorizations	
Does the permittee have additional authorizations for this facility, suc authorization, sludge permit, etc?	h as reuse
Yes No	
If yes, provide the TCEQ authorization number and description of the	authorization:
R13328001 – Domestic Effluent Reuse Authorization	
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 comenforcement?	pliance or
☐ Yes ☒ No	
If yes to either question, provide a brief summary of the enforcement, schedule, and the current status:	the implementation
N/A	

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

### A. RCRA hazardous wastes

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

☐ Yes ⊠ No

### B. Remediation activity wastewater

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

☐ Yes ⊠ No

#### C. Details about wastes received

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

Attachment: Click to enter text.

### Section 14. Laboratory Accreditation (Instructions Page 56)

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

- The laboratory is an in-house laboratory and is:
  - periodically inspected by the TCEQ; or
  - o 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: Timothy B. Hardin

Title: Board President

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

TCEQ-10054 (04/02/2024) Domestic Wastewater Permit Application Technical Report

### 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 57)

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.
	Click to enter text.
B.	Regionalization of facilities
	For additional guidance, please review $\underline{TCEQ}$ 's Regionalization Policy for Wastewater $\underline{Treatment}$ 1.
	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.
	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

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

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: Click to enter text.
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 59)
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): Click to enter text.
Average Influent Organic Strength or BOD <sub>5</sub> Concentration in mg/l: Click to enter text
Average Influent Loading (lbs/day = total average flow X average BOD <sub>5</sub> conc. X 8.34): Click to enter text
Provide the source of the average organic strength or $BOD_5$ concentration.

### 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 BOD5 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 BOD₅ from all sources		

### Section 3. Proposed Effluent Quality and Disinfection (Instructions Page 59)

### A. Existing/Interim I 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.

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: 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.
D.	Disinfection Method
	Identify the proposed method of disinfection.
	Chlorine: Click to enter text, mg/l after Click to enter text, minutes detention time
	at peak flow
	Dechlorination process: <u>Click to enter text.</u>
	Ultraviolet Light: Click to enter text! seconds contact time at peak flow
	Other: Click to enter text.
Se	ction 4. Design Calculations (Instructions Page 59)
	tach design calculations and plant features for each proposed phase. Example 4 of the
	structions includes sample design calculations and plant features.
	Attachment: Click to enter text.
C a	
Se	ction 5. Facility Site (Instructions Page 60)
A.	100-year floodplain
	Will the proposed facilities be located <u>above</u> 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.
	Click to enter text.
	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: Click to enter text.
Se	ection 6. Permit Authorization for Sewage Sludge Disposal
	(Instructions Page 60)
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.
В.	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.
Se	ction 7. Sewage Sludge Solids Management Plan (Instructions Page
	61)

Attach a solids management plan to the application.

Attachment: Click to enter text.

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.

### DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

Section 1. Domestic Drinking Water Supply (Instructions Page 64)
Is there a surface water intake for domestic drinking water supply located within 5 miles downstream from the point or proposed point of discharge?
Yes No
If <b>no</b> , proceed it Section 2. <b>If yes</b> , provide the following:
Owner of the drinking water supply: Click to enter text.
Distance and direction to the intake: Click to enter text.
Attach a USGS map that identifies the location of the intake.
Attachment: N/A
Section 2. Discharge into Tidally Affected Waters (Instructions Page 64)
Does the facility discharge into tidally affected waters?
Yes No
If <b>no</b> , proceed to Section 3. <b>If yes</b> , complete the remainder of this section. If no, proceed to Section 3.
A. Receiving water outfall
Width of the receiving water at the outfall, in feet: Click to enter text.
B. Oyster waters
Are there oyster waters in the vicinity of the discharge?
Yes 🗵 No
If yes, provide the distance and direction from outfall(s).
N/A
C. Sea grasses
Are there any sea grasses within the vicinity of the point of discharge?
🖺 Yes 🖾 No
If yes, provide the distance and direction from the outfall(s).
Click to enter text.

Section 3. Classified Segments (Instructions Page 64)
Is the discharge directly into (or within 300 feet of) a classified segment?
Yes No
If yes, this Worksheet is complete.
If no, complete Sections 4 and 5 of this Worksheet.
Section 4. Description of Immediate Receiving Waters (Instructions Page 65)
Name of the immediate receiving waters: <u>Harris County Flood Control District (HCFCD) ditch U106</u> 10-00
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 fee Click to enter text.
Man-made Channel or Ditch
Open Bay
Tidal Stream, Bayou, or Marsh
Other, specify: Click to enter text.
B. Flow characteristics
If a stream, man-made channel or ditch was checked above, provide the following. For existing discharges, check one of the following that best characterizes the area <i>upstream</i> of the discharge. For new discharges, characterize the area <i>downstream</i> 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: <u>Click to enter text</u> ,		
C.	Downs	stream perennial confluences		
		e names of all perennial streams th tream of the discharge point.	at joi	n the receiving water within three miles
	H.C.F.	C.D. U106-00-00 (Horsepen Creek)		
D.		stream characteristics		
		receiving water characteristics cha rge (e.g., natural or man-made dam		vithin three miles downstream of the nds, reservoirs, etc.)?
	$\boxtimes$	Yes 🖺 No		
	If yes,	discuss how.		
	Interm	nittent to perennial Man Made to Natur	ral Str	<u>eam</u>
E.	Norma	l dry weather characteristics		
	Provide	e general observations of the water	body	during normal dry weather conditions.
	Flood	Control ditch with grass banks, Urban	Settin	g with some trash in ditch.
		nd time of observation: <u>09/17/2025</u>		<del></del>
	Was th	e water body influenced by stormw	ater 1	runoff during observations?
		Yes 🗵 No		
Se	ction	5. General Characteristic	s of	the Waterbody (Instructions
,		Page 66)		
A.	Upstre	am influences		•
	Is the i			he discharge or proposed discharge site
	mnuen	Oil field activities	an u	Urban runoff
	Final		#5575G	
		Upstream discharges		Agricultural runoff
		Septic tanks		Other(s), specify: <u>Click to enter text.</u>

B.	Waterb	oody uses		
	Observ	red or evidences of the following use	es. Cl	heck all that apply.
		Livestock watering		Contact recreation
	5 kg	Irrigation withdrawal		Non-contact recreation
	11	Fishing		Navigation
		Domestic water supply		Industrial water supply
		Park activities	$\boxtimes$	Other(s), specify: Flood control and storm
	wate	er drainage		
C.	Waterb	ody aesthetics		
		one of the following that best descr rounding area.	ibes	the aesthetics of the receiving water and
		Wilderness: outstanding natural be clarity exceptional	auty	; usually wooded or unpastured area; water
		Natural Area: trees and/or native v fields, pastures, dwellings); water		ation; some development evident (from cy discolored
		Common Setting: not offensive; de or turbid	veloj	ped but uncluttered; water may be colored
		Offensive: stream does not enhance dumping areas; water discolored	e aes	thetics; cluttered; highly developed;

### 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 minor amendments without renewal.

### Section 1. Toxic Pollutants (Instructions Page 78)

For pollutan	ts identified in Table 4.0(1), indicate the ty	pe of sample.	
15/1/02/	Composite □		
Date and tin	ne sample(s) collected: Click to enter text.	Results	Pendins

### 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

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (μg/l)	Number of Samples	MAL (μg/l)
Chloroform				10
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

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (μg/l)	Number of Samples	MAL (μg/l)
Endosulfan II (beta)				0.02
Endosulfan Sulfate				0.1
Endrin				0.02
Ethylbenzene				10
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				0.05
(Lindane)				
Hexachlorocyclopentadiene				10
Hexachloroethane				20
Hexachlorophene				10
Lead				0.5
Malathion				0.1
Mercury				0.005
Methoxychlor				2
Methyl Ethyl Ketone				50
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

<sup>(\*1)</sup> Determined by subtracting hexavalent Cr from total Cr.

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

<sup>(\*3)</sup> 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 sam
---

Grab □ Composite □

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

Results Pending

### 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			k	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

<sup>(\*1)</sup> Determined by subtracting hexavalent Cr from total Cr.

<sup>(\*2)</sup> 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				10
[1,3-Dichloropropene]				
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 Azobenzene)				20
Fluoranthene				10

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Fluorene				10
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

<sup>\*</sup> 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. N/A 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.

N/A

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: N/A

### Table 4.0(2)F - Dioxin/Furan Compounds

Compound	Toxic Equivalenc y 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 5.0: TOXICITY TESTING REQUIREMENTS

The following **is required** for facilities with a current operating design flow of **1.0 MGD or greater**, with an EPA-approved **pretreatment** program (or those required to have one under 40 CFR Part 403), or are required to perform Whole Effluent Toxicity testing. See instructions for further details.

This worksheet is not required minor amendments without renewal.

### Section 1. Required Tests (Instructions Page 88)

Indicate the number of 7-day chronic or 48-hour acute Whole Effluent Toxicity (WET) tests performed in the four and one-half years prior to submission of the application.

7-day Chronic: <u>Previoulsy submitted</u> 48-hour Acute: <u>Previoulsy submitted</u>

### Section 2. Toxicity Reduction Evaluations (TREs)

Has this facility	completed a	. TRE in the	past four	and a	half years?	Or is the	facility	currently
performing a TF	RE?						-	-

Yes 🖾 No

If yes, describe the progress to date, if applicable, in identifying and confirming the toxicant.

N/A		

### Section 3. Summary of WET Tests

If the required biomonitoring test information has not been previously submitted via both the Discharge Monitoring Reports (DMRs) and the Table 1 (as found in the permit), provide a summary of the testing results for all valid and invalid tests performed over the past four and one-half years. Make additional copies of this table as needed.

Table 5.0(1) Summary of WET Tests

Test Date	Test Species	NOEC Survival	NOEC Sub-lethal
	Previously submitted		

### DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works.

### Section 1. All POTWs (Instructions Page 89)

#### A. Industrial users (IUs)

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

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

Categorical IUs:

Number of IUs: o

Average Daily Flows, in MGD: o

Significant IUs – non-categorical:

Number of IUs: o

Average Daily Flows, in MGD: o

Other IUs:

Number of IUs: o

Average Daily Flows, in MGD: o

#### 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.

,
N/A

C.	Treatment plant pass through
	In the past three years, has your POTW experienced pass through (see instructions)?
	Yes 🗵 No
	If yes, identify the dates, duration, a description of the pollutants passing through the treatment plant, and probable cause(s) and possible source(s) of each pass through event. Include the names of the IUs that may have caused pass through.
	N/A
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.
	<b>If no to either question above</b> , skip Section 2 and complete Section 3 for each significant industrial user and categorical industrial user.
Se	ction 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 90)
A	Substantial modifications
/ <b>1</b> .	Have there been any <b>substantial modifications</b> to the approved pretreatment program
	that have not been submitted to the TCEQ for approval according to 40 CFR §403.18?
	Yes No
	<b>If yes</b> , identify the modifications that have not been submitted to TCEQ, including the purpose of the modification.
	Click to enter text.

B.	Non-substantial n	<b>10difications</b>				
	Have there been any <b>non-substantial modifications</b> 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 paramete	ers above the MAL				
C.	-	t all parameters me	agurad ahowa	the MAI in the DC	TW'e affluant	
		the last three year				
Tal	ble 6.0(1) – Parame	ters Above the MAL				
	ollutant	Concentration	MAL	Units	Date	
L						
D.	Industrial user in	terruptions				
		or other IU caused o ass throughs) at you				
	SERVICE SECURIOR	No	ai i Oi w iii tii	e past timee years	·:	
	POSTERA BECCTERA		anch anicada	including dates	duration, description	
		nd probable polluta		, including dates,	duration, description	
	Click to enter text					

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

A. General information

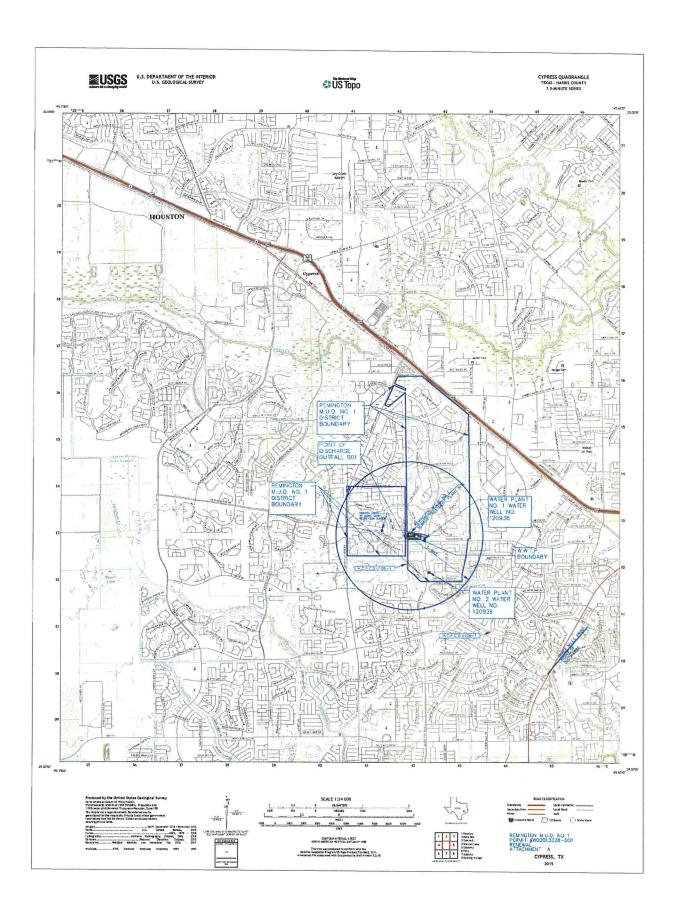
	Company Name: <u>N/A - None</u>
	SIC Code: Click to enter text
	Contact name: Click to enter text.
	Address: Click to enter text.
	City, State, and Zip Code: <u>Click to enter text</u>
	Telephone number: Click to enter text.
	Email address: Click to enter text
B.	Process information
	Describe the industrial processes or other activities that affect or contribute to the SIU(s) or CIU(s) discharge (i.e., process and non-process wastewater).
	N/A - None
C.	Product and service information
C.	<b>Product and service information</b> Provide a description of the principal product(s) or services performed.
C.	
C.	Provide a description of the principal product(s) or services performed.
C.	Provide a description of the principal product(s) or services performed.
C.	Provide a description of the principal product(s) or services performed.
C.	Provide a description of the principal product(s) or services performed.
C.	Provide a description of the principal product(s) or services performed.
	Provide a description of the principal product(s) or services performed.
D.	Provide a description of the principal product(s) or services performed.  N/A
D.	Provide a description of the principal product(s) or services performed.  N/A  Flow rate information
D.	Provide a description of the principal product(s) or services performed.  N/A  Flow rate information  See the Instructions for definitions of "process" and "non-process wastewater."
D.	Provide a description of the principal product(s) or services performed.  N/A  Flow rate information  See the Instructions for definitions of "process" and "non-process wastewater."  Process Wastewater:  Discharge, in gallons/day: o
D.	Provide a description of the principal product(s) or services performed.  N/A  Flow rate information  See the Instructions for definitions of "process" and "non-process wastewater."  Process Wastewater:  Discharge, in gallons/day: o
D.	Provide a description of the principal product(s) or services performed.  N/A  Flow rate information  See the Instructions for definitions of "process" and "non-process wastewater."  Process Wastewater:  Discharge, in gallons/day: o  Discharge Type: Continuous Batch Intermittent
D.	Provide a description of the principal product(s) or services performed.  N/A  Flow rate information  See the Instructions for definitions of "process" and "non-process wastewater."  Process Wastewater:  Discharge, in gallons/day: o  Discharge Type: Continuous Batch Intermittent  Non-Process Wastewater:

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

# REMINGTON MUNICIPAL UTILITY DISTRICT No. 1 TPDES PERMIT RENEWAL APPLICATION HARRIS COUNTY, TEXAS WQ0013328-001

### Attachment A

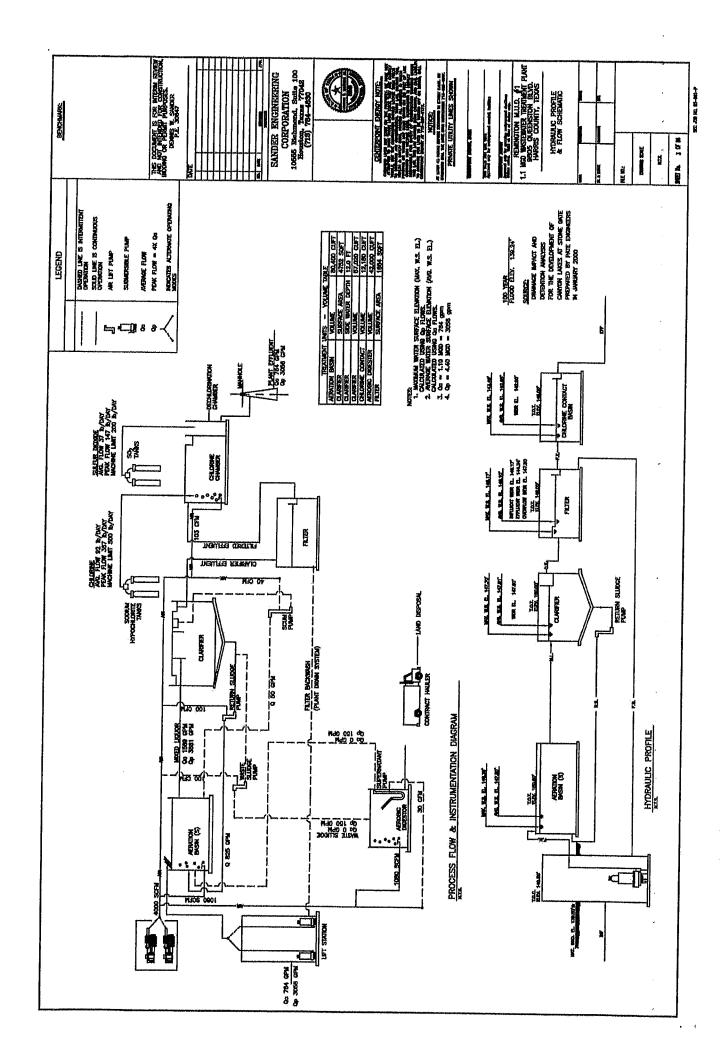
USGS Topographic Maps Admin. Report 1.0 - Section 13, Page 10



# REMINGTON MUNICIPAL UTILITY DISTRICT No. 1 TPDES PERMIT RENEWAL APPLICATION HARRIS COUNTY, TEXAS WQ0013328-001

### Attachment B

Flow Diagram
Tech. Report 1.0 - Section 2-C, Page 2



### REMINGTON MUNICIPAL UTILITY DISTRICT No. 1 TPDES PERMIT RENEWAL APPLICATION HARRIS COUNTY, TEXAS WQ0013328-001

### Attachment C

**Sewage Sludge Management** and **Disposal Information** 

Tech. Report 1.0 - Section 9- C, Page 11

Tech. Report 1.0 - Section 9- D, Page 12

Tech. Report 1.0 - Section 9- E, Page 12



### **Sprint Waste Services**

P.O. Box 940820 • Houston, Texas 77094 • Telephone (281) 491-7775

October 31, 2016

Bill Manning,

Dear Bill:

The attached information is to be used for the referenced WWTP permit application. Biosolids from Remington MUD WWTP (WQ0013328-001) will be transported by Sprint Waste Services to a TCEQ approved landfill for disposal.

As an alternative to transporting biosolids to a landfill, we also transport biosolids directly to one of our land application farms. The permit should allow for either method of sludge disposal. TCEQ Permit #4462, located in Waller County, 96 Deg 5", and 30 Deg 4", with 1,350 usable acres.

Please note that Sprint Waste TCEQ Transporter Number is 23833. Feel free to contact me at (713) 316-5050 if you have any questions.

Sincerely,

Charles Lyle

**Municipal Sales** 

Charles Eyl

281-512-7840



## **Sprint Waste Services**

P.O. Box 940820 • Houston, Texas 77094 • Telephone (281) 491-7775

October 31, 2016

Bill Manning

Dear Bill:

The attached information is to be used for the referenced WWTP permit application. Sludge from Remington MUD WWTP (WQ0013328-001) may be transported to the Richey Road MUD WWTP where it will be dewatered and disposed in a TCEQ approved landfill. A letter from Richey Road MUD confirming our agreement with the District is enclosed.

As an alternative to transporting biosolids to Richey Road MUD, we also transport biosolids directly to one of our land application farms. The permit should allow for either method of sludge disposal. TCEQ Permit #4462, located in Waller County, 96 Deg 5", and 30 Deg 4", with 1,350 usable acres.

Please note that Sprint Waste TCEQ Transporter Number is 23833. Feel free to contact me at (713) 316-5050 if you have any questions.

Sincerely,

Zach Divin Environmental

**Enclosures** 

#### RICHEY ROAD MUNICIPAL UTILITY DISTRICT

1001 McKinney, Suite 1000 Houston, TX 77002-6424 (713) 237-1221

October 31, 2016

Texas Commission on Environmental Quality Permits Division P.O. Box 13087 Austin, TX 78711-3087

RE:

**Remington MUD WWTP** 

**Permit Application** 

To Whom It May Concern:

This letter serves as notice to the Texas Commission on Environmental Quality ("TCEQ") that Richey Road Municipal Utility District, TCEQ Permit No. TPDES 0012378-002 (the "District") acknowledges the receipt of sludge generated from Inverness Forest WWTP.

The District and Sprint Waste Services, LP have entered into an agreement. This agreement allows Sprint Waste Services, LP to bring sludge from municipal wastewater treatment plants to the District's wastewater treatment facility for dewatering (TCEQ Processing Permit No. WQ0004810-000). The District reserves the right to terminate this agreement with Sprint Waste Services, LP, which permits the processing of sludge at the District's facility, to reject sludge from a Generator that does not comply with the agreement, and to refuse to accept sludge from any generator because of quality, quantity or other reasons.

Sincerely,

Dennis Cain President

Richey Road M.U.D. Board of Directors

Charles by

Charles Lyle Municipal Sales

cc: Alan Petrov, Johnson, Radcliffe, Petrov & Bobbitt

#### Remington MUD 1 Sludge Disposal Details

Owner and location of each sludge receiving facility:

WCA – Fort Bend Regional Landfill TCEQ Permit No. 2270 14115 Davis Estate Road Needville, TX 77461 Fort Bend County

Mount Houston Road MUD WWTF TCEQ Permit No. WQ0011154001 22635 Stuebner Park Lane Houston, TX 77038 Harris County

New Earth, Inc. Composting Facility TCEQ Permit No. 42041 6205 FM 2855 Katy, TX 77493 Waller County

#### Remington MUD 1 Sludge Disposal Details

Owner and location of each sludge receiving facility:

WCA – Fort Bend Regional Landfill TCEQ Permit No. 2270 14115 Davis Estate Road Needville, TX 77461 Fort Bend County

Mount Houston Road MUD WWTF TCEQ Permit No. WQ0011154001 22635 Stuebner Park Lane Houston, TX 77038 Harris County

New Earth, Inc. Composting Facility TCEQ Permit No. 42041 6205 FM 2855 Katy, TX 77493 Waller County

Magna Flow - Hauler Registration Number - 21484

#### TRS Enviroganics, Inc.

## Permitted Beneficial Land Application Farm Sites Houston Area

Landowner	TCEQ Permit #	Longitude	Latitude	County	Location	Usable Acres
Barbra Look (water & wastewater)	WQ0004462000	96 Deg 5"	30 Deg 4"	Waller	4.8 ml. W. ofintersin, of Hwy 290 and Hwy. 6	1,350.00
James Henderson (water & wastewater)	WQ0004460000	94 Deg 30'	30 Deg 33'	Liberty	1 mi S of intersection of Hwy 90 and FM 1009	2,000.00
Susan Cardwell (water & wastewater)	WQ0004501000	96 Deg 5'	30 Deg 6'	Waller	0.2 mi, W of intersection of FM 359 & Pierceall Rd.	115.00
	d.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					3,465.00

TCEQ Transporter Registration Number for TRS Enviroganics

Richey Road MUD Wastewater Treatment Plant (sludge transfer and dewatering) TRS Envirogenics and Richey Road MUD Processing Permit

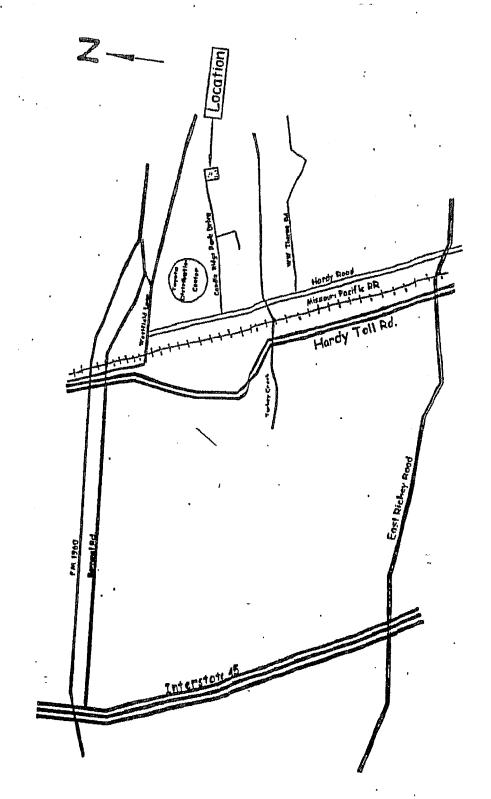
23777

TPDES Permit Number 12378-002 TCEQ Permit Number WQ0004810000

Richey Road M.U.D. WWTP Processing Facility TCEQ Permit No: TPDES 0012378-002 USEPA Permit No.: TX0087319

Location: (Long: 93 beg 23' 30' W, Lot: 30 beg 00' 43" N)

From intersection of East Richer Road and Hardy Road, turn north, the Toyota Distribution Center. Tandle Ridge Park Entire just before Facility will be on right.





## TERRA renewal

#### REGIONAL BIOSOLIDS MANAGEMENT PLAN

Terra Renewal provides biosolids removal services for over 325 wastewater treatment plants throughout the Houston area. The regionalization of the sludge/biosolids management has resulted in cost effective disposal options for the wastewater treatment plants while maintaining the highest level of environmental compliance available. Terra Renewal liquid transports over 70,000,000 gallons of wastewater treatment residuals annually. Over 110,000 CY of cake biosolids are transported in end dumps and roll off boxes.

#### LIQUID MUNICIPAL SEWAGE SLUDGE

Liquid municipal sludges that are transported to the Richey Road MUD WWTP Processing Facility (TCEQ Processing Permit No. WQ0004810-000) are dewatered and transported to a co-disposal landfill. Sludges that have passed the required testing for compliance with USEPA 40 CFR 503 and TCEQ 30 TAC 312 beneficial land application requirements may also be transported directly to a permitted beneficial land application farm.

#### CAKE BIOSOLIDS

Cake biosolids are generated from municipal wastewater treatment plants with dewatering facilities. These facilities include belt presses, centrifuges, and drying beds. Land application is the preferred disposal method if biosolids meet USEPA 40 CFR Part 503 metals levels and Class B requirements. If site conditions do not allow for land application or biosolids do not meet USEPA CFR Part 503 Table 1 or Class B requirements, the biosolids may be landfilled.

#### LAND APPLICATION

Terra Renewal utilizes farms in various locations surrounding the greater Houston area. All farms are owned by the farmer or rancher and the biosolids program is used to enhance the agricultural activities. Terra Renewal operates the biosolids beneficial land application program for each farm utilized. Site restrictions required by Texas Commission on Environmental Quality 30 TAC 312 rules, the USEPA 40 CFR Part 503 regulations, and those outlined in the land application site permit issued by the Texas Commission on Environmental Quality are followed at the farms.



#### SLUDGE TRANSPORTER REGISTRATION

Registration Number: 22430

CN603111196

RN104527353

RQA. Hyl

Print Date: July 03, 2014

For the Commission

Company: K-3 RESOURCES INC

Registered Since: June 25, 2002 Expiration Date: August 31, 2016

Regulated Entity: BIOSOLIDS MANAGEMENT

Status: ACTIVE

Organization Type: PARTNERSHIP

County: BRAZORIA

TCEQ Region: 12

Transport Waste into Texas: NO

Transport Waste out of Texas: NO

Physical Address:

850 COUNTY ROAD 149 ALVIN, TX 77511-1316 Contact Information

Contact: CHARLES PEHL Phone: 281-388-1111

Fax: 281-585-4262

Mailing Address: PO BOX 2236

ALVIN, TX 77512-2236

E-Mail: charlie@k3bml.com

Sticker Numbers Issued and Listed below will expire on August 31, 2016:

4834	4835	4836	4837	4838	4839	4840	4841	4842
4843	4844	4845	4846	4847	4848	4849	4850	4851
4852	4853	4854	4855	4856	4857	4858	4859	4860
4861	4862	4863	4864	4865	4866	4867	4868	4869
4870	4871	4872	4873	4874				

#### TCEQ Permits

TCEQ	Name of Land Owner	Site Location	Acres	County	Status	Renewal Date	Latitude/ Longitude
Permit		<b>Processing Permits</b>					
WQ000389300	Carl Miller	0.9 miles SW of Int. FM 362 and FM 529, Waller County, Texas	1	Waller	Active	10/29/2014 Pending	N29 <sup>0</sup> 55' 02" W95 <sup>0</sup> 59' 07"
WQ000436400	Kyle Dincans	Intersection of Roberts Road and FM 2920, NW Harris County, TX	1	Harris	Active	3/22/2018	N30 <sup>0</sup> 04' 09" W95 <sup>0</sup> 48' 56"
WQ000453800	Ercums Trust	Interior of TCEQ 04518, south of the intersection of SH 529 and SH 362, Waller County, TX	1	Waller	Active	6/19/2018	N29 <sup>0</sup> 54' 30" W95 <sup>0</sup> 57' 12"
		Land Application Permits:					

#### K-3 Resources, LP

WQ000445400	Larry Jeffries	Intersection of SH 529 and SH 359, Waller County, 2 miles south of Monaville, TX	357	Waller	Active	1/10/2017	N29 <sup>0</sup> 55' 03" W96 <sup>0</sup> 01' 23"
WQ000445600	Kyle Dincans	Interior of TCEQ 04456, at intersection of Roberts Road and FM 2920, NW Harris County, TX	317	Harris	Active	7/25/2017	N30 <sup>0</sup> 04' 09" W95 <sup>0</sup> 48' 56"
WQ000451800	Ercums Trust	Intersection of SH 529 and SH 362, Waller County, TX	270.5	Waller	Active	10/18/2016	N29 <sup>0</sup> 54' 30" W95 <sup>0</sup> 57' 12"

#### Carl Miller Farms

WQ000444500	Carl Miller	SH 529, Waller County, TX		Waller	Active	5/16/2019	N29 <sup>0</sup> 55' 02" W95 <sup>0</sup> 58' 06"
WQ000444600	Carl Miller	West side of SH 362, Waller County, TX		Waller	Active	5/30/2019	N29 <sup>0</sup> 54' 13" W95 <sup>0</sup> 57' 28"
WQ000444700	Carl Miller	West side of SH 362, Waller County, TX	89.78	Waller	Active	5/30/2019	N29 <sup>0</sup> 54' 05" W95 <sup>0</sup> 57' 28"
WQ000444800	Carl Miller	West side of Adams Flat Road, Waller County, TX	73.83	Waller	Active	5/30/2019	N29 <sup>0</sup> 54' 30" W95 <sup>0</sup> 59' 07"
WQ000444900	Carl Miller	West side of SH 362, Waller County, TX	40.45	Waller	Active	4/11/2019	N29 <sup>0</sup> 53' 57" W95 <sup>0</sup> 57' 28"
WQ000445000	Carl Miller	Northside of SH 529, Waller County, TX	165.7	Waller	Active	6/19/2019	N29 <sup>0</sup> 55' 02" W95 <sup>0</sup> 59' 07"

**Total Application Acres:** 

1556

Compliance Director

#### TCEQ Permits

Permit	RN
04445	102913431
04446	102913472
04447	102643384
04448	102911864
04449	103197521
04450	102911898
04364	102994597
04538	103113494
04454	102994506
04456	102994571
04518	102984986

Bryan W. Shaw, Ph.D., Chairman Carlos Rubinstein, Commissioner Toby Baker, Commissioner Zak Covar, Executive Director



#### TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

July 15, 2013

JERRY MCCURTAIN
MAGNA-FLOW INTERNATIONAL INC

14915 HIGHWAY 59 N HUMBLE, TX 77396-3210

Re: Renewal of Sludge Transportation Registration

MAGNA FLOW ENVIRONMENTAL

Registration Number: 21484

CN600310221

RN100600501

Dear Mr. Mccurtain:

The Section Manager of the Registration and Reporting Section has issued the enclosed registration in accordance with Title 30 of the Texas Administrative Code (30 TAC) Chapter 312 Subsection (§) 312.147 (b). This action is taken under authority delegated by the Executive Director of the Texas Commission on Environmental Quality.

Issuance of this authorization is not an acknowledgment that your operation is in full compilance with state and federal rules and regulations. Failure to comply with all rules and regulations may result in enforcement action and/or the revocation of your registration.

Your registration number is required to appear on all tanks and containers used for the collection and transportation of sewage sludge and similar waste. It should also be used on all correspondence regarding your sludge registration.

A copy of your sludge transporter registration, a copy of your application for registration and copies of all amendments to this registration must be available at all times and at all locations where business is being transacted under this registration, including all motorized vehicles operated under this registration.

If you have any questions or comments, please contact the Sludge Transporter Registration Program at (512) 239-3695.

Sincerely,

Don Kennedy, Section Manager Registration and Reporting Section

Don Kannely

Permitting and Registration Support Division

DK/bb Enclosures

CC: TCEQ Region 12, HOUSTON



#### **SLUDGE TRANSPORTER REGISTRATION**

Registration Number: 21484

CN600310221

RN100600501

Jak Cov

Print Date: July 15, 2013

For the Commission

Company: MAGNA-FLOW INTERNATIONAL INC

Registered Since: June 15, 1994 Expiration Date: August 31, 2015

Regulated Entity: MAGNA FLOW ENVIRONMENTAL

Status: ACTIVE

**Organization Type: CORPORATION** 

**County: HARRIS** 

Transport Waste Into Texas: NO

TCEQ Region: 12

Transport Waste out of Texas: NO

**Physical Address:** 

14915 HIGHWAY 59 N HUMBLE, TX 77396-3210 Contact Information

Contact: JERRY MCCURTAIN

Phone: 281-448-8585
Fax: 281-397-7195

Mailing Address:

14915 HIGHWAY 59 N HUMBLE, TX 77396-3210 E-Mail: jerry.mccurtain@magna-flow.com

Sticker Numbers Issued and Listed below will expire on August 31, 2015:

2919	2920	2921	2922	2923	2924	2925	2926	2927
2928	2929	2930	2931	2932	2933	2934	2935	2936
2937	2938	2939	2940	2941	2942	2943	2944	2945
2946	2947							



#### **SLUDGE TRANSPORTER** TCEQ Registration Number: 21484

Print Date: July 15, 2013

For the Commission

#### **Disposal Facility Information**

Facility ID	<u>Waste Type</u> WT; WW	Facility Name ATASCOCITA RECYCLING AND DISPOSAL FACILITY	Program MSWDISP
1307C		BFI SUNSET FARMS LANDFILL	MSWDISP
1447A	WT	BLUE RIDGE LANDFILL	MSWDISP
1505A	ww		MSWDISP
1721A	ww	COASTAL PLAINS RECYCLING AND DISPOSAL FACILITY	
1752B	ww	SECURITY LANDFILL RDF	MSWDISP
2270	WW	FORT BEND REGIONAL LANDFILL	MSWDISP
249D	ww	WASTE MANAGEMENT OF TEXAS AUSTIN COMMUNITY RECYCLIN	
261B	ww	MCCARTY ROAD LANDFILL TX	MSWDISP
42016	ww	TEXAS ORGANIC RECOVERY	SLUDGETR
42037	ww	NEW EARTH	MSWPROC
730026	WT	HUDSON SITE 1	SLUDGE
730037	WT	HUDSON SITE 2	SLUDGE
730053	WT	JOHN MESSER 730053	SLUDGE
730068	WT	WOOD BFU SITE	SLUDGE
730083	WT	DAVIS BFU NO 1	SLUDGE
730084	WT	DUNLAP RD WISIAN BFU SITE	SLUDGE
WQ0010137033	WW	DOS RIOS WATER RECYCLING CENTER	WWPERMIT
WQ0010210002	ww	LOCKHART WWTP 2	WWPERMIT
WQ0010388001	ww	BRENHAM WWTP	WWPERMIT
WQ0010495146	ww	KINGWOOD CENTRAL WWTP	WWPERMIT
WQ0010543011	ww	WALNUT CREEK WWTP	WWPERMIT
WQ0010582002	ww	LULING NORTH WWTP	WWPERMIT
WQ0010607002	ww	ROSENBERG WWTP 2	WWPERMIT
WQ0010793002	ww	CITY OF BURNET WWTP	WWPERMIT
WQ0011154001	ww	MOUNT HOUSTON ROAD MUD WWTP	WWPERMIT
WQ0011473001	ww	BLUE BELL MANOR WWTP	WWPERMIT
WQ0011571001	ww	BLACKHAWK REGIONAL WWTP	WWPERMIT
WQ0012003001	ww	FORT BEND COUNTY MUD 25 WWTP	WWPERMIT
WQ0013294001	ww	TRAVIS COUNTY WCID 17 WWTP	WWPERMIT
WQ0014126001	WT	LAKE DUNLAP	WWPERMIT

Waste Types

DS - Septic Tank Waste GS - Grease Trap Waste

GT - Grit Trap Waste PP - Chemical Toilet Waste WT - Water Supply Treatment Plant Sludge WW - Waste Water Treatment Plant Sludge

MAGNA FLOW



#### SLUDGE TRANSPORTER TCEQ Registration Number: 21484

Print Date: July 15, 2013

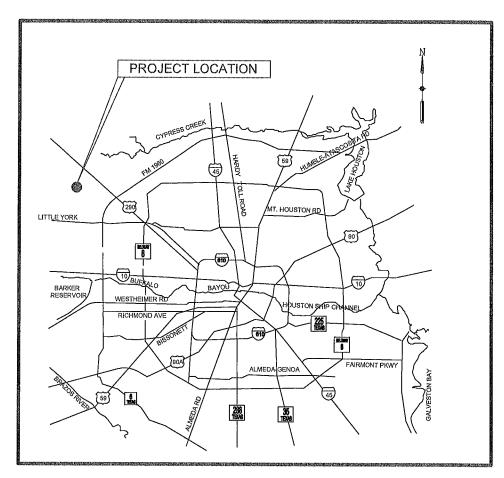
For the Commission

#### **Vehicle Information**

<u>License Plate</u>	Year	<u>Vehicle Make</u>	Sticker Issued	Vehicle Capacity
1C94435	2008	FREIGHTLIN	02/12/2013	7000 GAL
91CVK7	1998	FORD	07/08/2011	15 CY
BS5955	2004	INTERNATIO	02/12/2013	30 CY
BS59634	2004	INTERNATIO	02/12/2013	30 CY
68DDW6	2007	INTERNATIO	07/08/2011	15 CY
1A94031	2009	FREIGHTLN	02/12/2013	7000 GAL
1A94033	2009	FREIGHTLN	02/12/2013	7000 GAL
1A94030	2009	FREIGHTLN	02/12/2013	7000 GAL
1A94032	2009	FREIGHTLN	02/12/2013	30 CY
1C92079	2006	FREIGHTLINER	02/12/2013	7000 GAL
1C45654	2002	STERLING	02/12/2013	15 CY
BK27760	2013	TA TRACTOR	07/15/2013	30 CY
1C92123	2012	TA TRACTOR	02/12/2013	7000 GAL
1C92124	2012	TA TRACTOR	02/12/2013	7000 GAL
1C92082	2012	TA TRACTOR	02/12/2013	7000 GAL
BP82019	2008	STERLING	02/12/2013	15 CY
1C91888	2014	FREIGHTLINER	07/15/2013	7000 GAL
1C91891	2014	FREIGHTLINER	07/15/2013	7000 GAL
1C91885	2014	FREIGHTLINER	07/15/2013	7000 GAL
1C91886	2014	FREIGHTLINER	07/15/2013	7000 GAL
1C91919	2014	FREIGHTLINER	07/15/2013	7000 GAL
1C91887	2014	FREIGHTLINER	07/15/2013	7000 GAL
1C91918	2014	FREIGHTLINER	07/15/2013	7000 GAL
1C91890	2014	FREIGHTLINER	07/15/2013	7000 GAL
1C91889	2014	FREIGHTLINER	07/15/2013	7000 GAL
BRM4685	2012	KENWORTH	07/15/2013	12 CY
BG90848	1998	STERLING	07/15/2013	15 CY
1C45655	2007	WESTERN STAR	07/15/2013	7000 GAL
RJ5L04	2008	KENWORTH	07/15/2013	7000 GAL

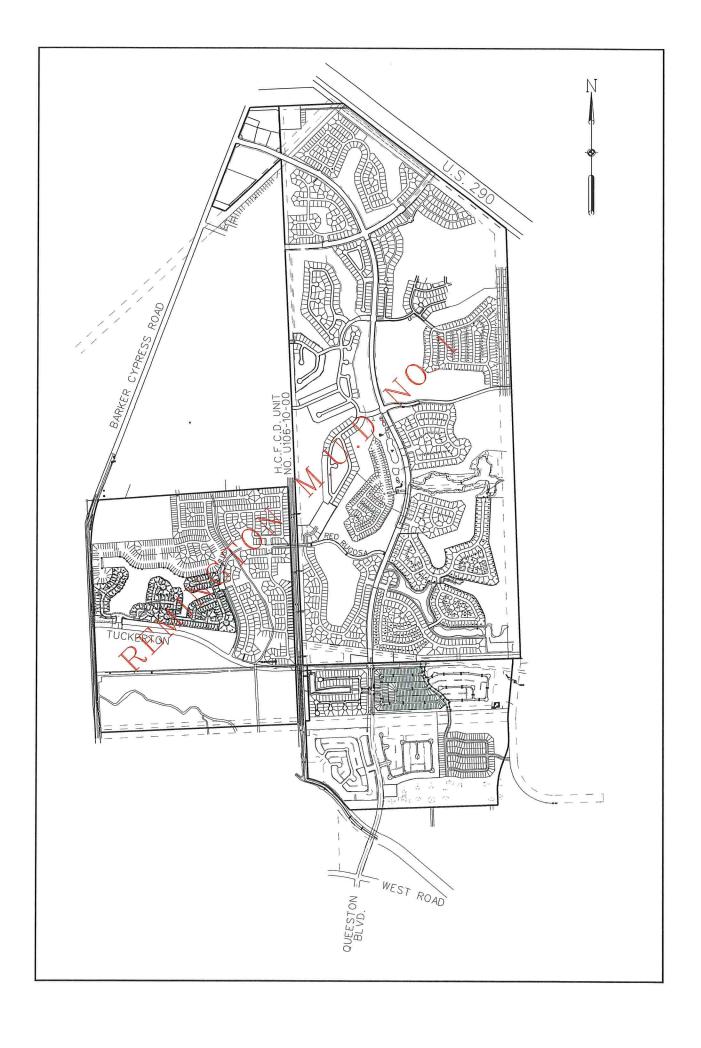
#### **Attachment D**

Site Drawing
Tech. Report 1.0 - Section 3, Page 2



REMINGTON M.U.D. NO. 1 LOCATION MAP

REMINGTON M.U.D. NO. 1
PERMIT WQ0013328-001
ATTACHMENT C - SITE DRAWING



#### Attachment E

Core Data Form Admin. Report 1.0 - Section 3-C Page 4

**TCEQ Use Only** 



### **TCEQ Core Data Form**

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

#### **SECTION I: General Information**

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

☐ New Per	mit, Registr	ation or Authorization	(Core Data Form	should be s	submitte	d with	the prog	ram application.)			
□ Renewal	(Core Data	Form should be submi	itted with the rer	newal form)				ther			
2. Customer	Reference	Number (if issued)	_	ollow this li			3. Re	gulated Entity Re	ference	Number (if i	issued)
CN 6008893	364		.1	Central R			RN 1	101917524			
SECTIO	N II:	<u>Customer</u>	Inform	ation	1						
4. General C	ustomer Ir	nformation	5. Effective D	Date for Cu	ıstomer	r Infor	mation	Updates (mm/dd/	уууу)		
☐ New Custo☐ Change in L		(Verifiable with the Te	Jpdate to Custom xas Secretary of					nge in Regulated Ent : Accounts)	ity Own	ership	
and the second second		ubmitted here may		tomaticali	ly based	d on w	vhat is c	urrent and active	with th	ne Texas Seci	retary of State
		oller of Public Accou									
6. Customer	Legal Nan	ne (If an individual, pri	int last name firs	t: eg: Doe, J	ohn)			<u>If new Customer,</u>	enter pre	evious Custom	<u>er below:</u>
Remington Mu	ınicipal Utili	ity District No. 1									
7. TX SOS/CF	7. TX SOS/CPA Filing Number 8. TX St			te Tax ID (11 digits)				9. Federal Tax ID (9 digits)		10. DUNS Number (if applicable)	
11. Type of C	ustomer:	☐ Corpora	tion				Individ	lual	Partne	ership: 🔲 Gen	neral 🔲 Limited
Government: [	City	County  Federal	Local State	<b>⊠</b> Other			Sole Pi	roprietorship	Ot	her:	
12. Number	of Employ	ees						13. Independer	itly Ow	ned and Ope	erated?
□ 0-20 □	21-100	101-250 251-	500 🔲 501 a	nd higher				⊠ Yes [	☐ No		
14. Custome	<b>r Role</b> (Pro	posed or Actual) – <i>as i</i>	t relates to the R	egulated En	ntity liste	d on th	his form.	Please check one of	the follo	wing	ħ
Owner Occupation		Operator Responsible Pa	rty 🔲 Vo	er & Opera				Other:			
15. Mailing	Remingto	on Municipal Utility Dis	strict No. 1								
Address:	1300 Pos	t Oak Boulevard, Suite	2400								
1 PM 1 PM	City	Houston		State	TX		ZIP	77056		ZIP + 4	3044
16. Country f	Vlailing Inf	ormation (if outside	USA)			17. E	-Mail Ad	dress (if applicable	e)		,
								· · · · · · · · · · · · · · · · · · ·			

TCEQ-10400 (11/22) Page 1 of 3

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
( 713 ) 623-4531		( 713 ) 623-6143

#### **SECTION III: Regulated Entity Information**

21. General Regulated En	tity Informa	ation (If 'New Reg	gulated Entity" is selec	ted, a new <sub>i</sub>	permit applica	ition is also	required.)		
☐ New Regulated Entity	Update to	Regulated Entity	Name 🛭 Update t	o Regulated	l Entity Inform	nation			
The Regulated Entity Namas Inc, LP, or LLC).	ne submitte	d may be upda	ted, in order to me	et TCEQ Co	ore Data Sta	ndards (re	emoval of o	rganizatioi	nal endings such
22. Regulated Entity Nam	i <b>e</b> (Enter nam	e of the site wher	e the regulated action	is taking p	lace.)				
Remington Municipal Utility	District No. 1								
23. Street Address of	Remington	Municipal Utility I	District No. 1						
the Regulated Entity:	9805 Queer	nston Blvd.							
(No PO Boxes)	City	Houston	State	TX	ZIP	77095		ZIP + 4	
24. County	Harris								
		If no Stree	et Address is provid	led, fields	25-28 are re	quired.		. , , , ,	
25. Description to									
Physical Location:									
26. Nearest City	State Nearest ZIP Code								
Latitude/Longitude are re						ards. (Geo	coding of th	ne Physical	Address may be
used to supply coordinate	es where no	ne have been p	rovided or to gain (	accuracy).					
27. Latitude (N) In Decima	al:		28. Longit			tude (W) In Decimal:			
Degrees	Minutes		Seconds	Degr	ees	N	/linutes		Seconds
29		55	5.8		95		40		17.3
29. Primary SIC Code	30.	Secondary SIC	Code	31. Prima	ary NAICS Co	ode	32. Seco	ndary NAI	CS Code
(4 digits)	(4 d	igits)		<b>(</b> 5 or 6 dig	its)		(5 or 6 dig	gits)	
4952				22132					
33. What is the Primary B	usiness of t	his entity? (Do	o not repeat the SIC or	· NAICS desc	cription.)				
Water Utility District									
34. Mailing	Remingtor	Municipal Utility	y District No. 1						
	1300 Post	Oak Boulevard, S	uite 2400						
Address:	City	Houston	State	тх	ZIP	77056		ZIP + 4	3044
35. E-Mail Address:		1				<u> </u>			1
36. Telephone Number			37. Extension or (	Code	38. F	ax Numb	er (if applical	ble)	
(713)623-4531					( 713	) 623-614	3		
			L						

TCEQ-10400 (11/22) Page 2 of 3

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance. □ Dam Safety □ Districts ☐ Edwards Aquifer ☐ Emissions Inventory Air ☐ Industrial Hazardous Waste 7281250 New Source ■ Municipal Solid Waste OSSF Petroleum Storage Tank **PWS** Review Air 146243 88575, 85207 1013074 ☐ Sludge Storm Water ☐ Title V Air ☐ Tires Used Oil TXROSU981 ☐ Voluntary Cleanup ☐ Wastewater Agriculture ■ Water Rights Other: WQ0013328001 **SECTION IV: Preparer Information** William T. Manning, Jr., P.E. 40. Name: 41. Title: **District Engineer** 42. Telephone Number 43. Ext./Code 44. Fax Number 45. E-Mail Address (713) 784-4830 18 (713) 784-4052 bmanning@sandereng.com **SECTION V: Authorized Signature** 46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39. Company: Remington Municipal Utility District No. 1 Job Title: **Board President** Name (In Print): Timothy B. Hardin Phone: (713)623-4531 Signature: Date: 5/28/2025

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

#### Attachment F

Plain Language Summary Admin. Report 1.0 - Section 8-F Page 7



#### TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

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

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

Remington Municipal Utility District No.1 (CN600889364) operates the Remington Municipal Utility District Sewage Treatment Plant (RN101917524), an activated sludge process operated in the single stage nitrification mode. The facility is located at 9805 Queenston Blvd., in Houston, Harris County, Texas 77095. This application is for a renewal to discharge at an annual average flow of 1,100,000 gallons per day of treated domestic wastewater via Outfall 001.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD5), total suspended solids (TSS), ammonia nitrogen (NH3-N), and Escherichia coli. Additional potential pollutants are included in the Domestic Technical Report 1.0 Section 7., Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include bar screens, aeration basins, final clarifiers, sludge digesters, chlorine contact chambers and a dichlorination chamber.

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

#### AGUAS RESIDUALES DOMESTICAS /AGUAS PLUVIALES

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

Distrito de Servicios Públicos Municipales de Remington No.1 (CN600889364) Opera el Remington Utilidad municipal Planta de tratamiento de aguas residuales del distrito (RN101917524), un Proceso de lodos activados operado en el modo de nitrificación de una sola etapa . La instalación es situado en 9805 Queenston Blvd. en Houston , Harris County, Texas 77095. This application is for a renewal to discharge at an annual average flow of 1,100,000 gallons per day of treated domestic wastewater via Outfall 001.

Se espera que las descargas de la instalación contengan . tratado por . demanda bioquímica de oxígeno carbonoso (CBOD5) de cinco días, sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH3-N) y Escherichia coli. Los contaminantes potenciales adicionales se incluyen en el Informe Técnico Doméstico 1.0 Sección 7., Análisis de Contaminantes de Efluentes Tratados y Hoja de Trabajo Doméstico 4.0 en el paquete de solicitud de permiso Aguas residuales domésticas es Una planta de proceso de lodos activados y las unidades de tratamiento incluyen tamices de barras, depósitos de aireación, clarificadores finales, digestores de lodos, cámaras de contacto con cloro y una cámara de dicloración

#### **Attachment SPIF**

Supplemental Permit Information Form Admin. Report - page 14

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

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

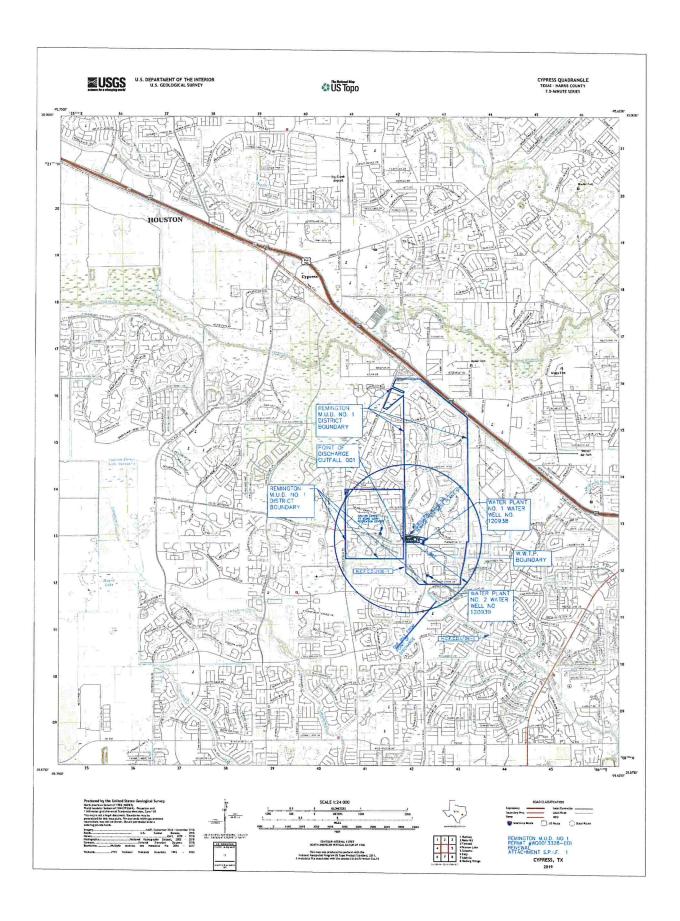
TCEQ USE ONLY:							
Application type:R	enewal	_Major Ame	endment _	Minor Amendment _	New		
County:	County: Segment Number:						
Admin Complete Date: _							
Agency Receiving SPIF:							
Texas Historical	Commission	ı _	U.S.	Fish and Wildlife			
Texas Parks and	Wildlife Dep	oartment <sub>-</sub>	U.S.	Army Corps of Engine	ers		
This form applies to TPD	ES permit a	pplications	only. (Inst	ructions, Page 53)	<del></del>		
Complete this form as a s our agreement with EPA. l is needed, we will contact each item completely.	If any of the	items are n	ot complet	ely addressed or furthe	er information		
Do not refer to your respect to this form a sattachment for this form application will not be decompleted in its entirety is may be directed to the Wasemail at WO-ARPTeam@to	separately fr clared admir ncluding all ater Quality l	rom the Adr nistratively attachment Division's A	ninistrative complete vession cs. Question pplication	e Report of the applicate without this SPIF form bass or comments concer Review and Processing	tion. The eing ning this form		
The following applies to a	ll applicatio	ns:					
1. Permittee: <u>Remington</u>	Municipal Ut	tility Distric	t No. 1				
Permit No. WQ00 <u>1332</u>	8-001		EPA ID	No. TX <u>101371</u>			
Address of the project (or a location description that includes street/highway, city/vicinity, and county):							
9805 Queenston Blvd	., Houston T	'exas, Harris	County				

	Provid answe	de the name, address, phone and fax number of an individual that can be car specific questions about the property.	ontacted to			
	Prefix	(Mr., Ms., Miss): <u>Mr.</u>				
	First a	and Last Name: <u>William T. Manning, Jr.</u>				
	Crede	ntial (P.E, P.G., Ph.D., etc.): <u>P.E.</u>				
	Title: ]	Engineer for District				
	Mailin	g Address: <u>2901 Wilcrest, Ste 550</u>				
	City, S	State, Zip Code: <u>Houston, TX 77042</u>				
	Phone	No.: <u>713-784-4830</u> Ext.: <u>18</u> Fax No.: <u>713-784-4052</u>				
	E-mail	Address: <u>bmanning@sandereng.com</u>				
2.	List th	ne county in which the facility is located: <u>Harris</u>				
3.	please	property is publicly owned and the owner is different than the permittee/a e list the owner of the property. - Same	applicant,			
	11/24	- Same				
4.	4. Provide a description of the effluent discharge route. The discharge route must follow the flo 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 identities the classified segment number.					
	Creek	arris County Flood Control District (HCFCD) ditch U106-10-00; thence to Hoc; thence to Langham Creek; thence to Bear Creek; thence to South Mayde (ce to Buffalo Bayou Above Tidal in Segment No. 1014 of the San Jacinto Riv	Creek;			
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 discharg 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).					
	Provid	e original photographs of any structures 50 years or older on the property	7.			
	Does y	our 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 int	egrity			
		Vibration effects during construction or as a result of project design				
		Additional phases of development that are planned for the future				
ፐሮፔ		Sealing caves, fractures, sinkholes, other karst features (08/31/2023)	Dan			
Was	stewater I	ndividual Permit Application, Supplemental Permit Information Form (SPIF)	Page <b>2</b> of <b>3</b>			

	Disturbance of vegetation or wetlands
1.	List proposed construction impact (surface acres to be impacted, depth of excavation, sealing of caves, or other karst features):  N/A - Existing Facility
2.	Describe existing disturbances, vegetation, and land use:  Wastewater Treatment Plant
	THE CONTROL OF THE CASE OF THE
AM	E FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR MENDMENTS TO TPDES PERMITS  List construction dates of all buildings and structures on the property:
	N/A - Renewal
4.	Provide a brief history of the property, and name of the architect/builder, if known.  N/A - Renewal

**Attachment SPIF - USGS** 

USGS Topographic Maps Supplemental Permit Information Form Item 5 page 2



LABORATORY DATA
QA/QC
CHAIN OF CUSTODY
RESULTS PENDING

**COPY OF APPLICATION FEE CHECK** 



#### SANDER ENGINEERING CORPORATION

CONSULTING ENGINEERS - SURVEYORS
TEXAS BOARD OF PROFESSIONAL ENGINEERS FIRM NO. F-517
TEXAS BOARD OF PROFESSIONAL LAND SURVEYING FIRM NO. 10030300

2901 WILCREST, SUITE 550 HOUSTON, TEXAS 77042

DENNIS W. SANDER, P.E. President

713-784-4830 FAX 713-784-4052

October 13, 2025

#### VIA FEDERAL EXPRESS

Texas Commission on Environmental Quality Financial Administration Division, Cashiers Office (MC-214) 12100 Park 35 Circle Austin, Texas 78753

Re:

Application to Renew Wastewater Discharge Permit No. WQ0013328-001

Remington Municipal Public Utility District No.1

85-054-8

#### Gentlemen:

Enclosed is the submittal form with a check in the amount of \$2,015.00 attached for the processing of an Application to Renew a Domestic Wastewater Discharge Permit for the following:

Type of Application:

Domestic Wastewater Discharge Permit - Renewal

Applicant:

Remington Municipal Utility District No.1

Permit No:

WQ0013328-001

Name of Facility:

Remington MUD Wastewater Treatment Facility

The check is in the amount of \$2,015.00 made payable to the Texas Commission on Environmental Quality.

If you have any questions or need any additional information, please do not hesitate to contact me.

Yours Truly,

William T. Manning, Jr., P.

Vice President / Partner

#### **Enclosures**

xc: 1)

 Remington MUD c/o Schwartz, Page and Harding, LLP 1300 Post Oak Boulevard, Suite 2400 Houston, TX 77056

#### **Candice Calhoun**

From: Sent: Thursday, October 23, 2025 4:43 PM To:

Candice Calhoun; Dennis Sander

Subject: RE: Application to Renew Permit No. WQ0013328001 (Remington MUD 1) - Notice of

Deficiency

**Attachments:** tceq admin nod response - signed w attachments.pdf

Candice,

Attached is an electronic copy of our response to your NOD letter dated October 20, 2025 sent via email that same

I will mail the hard copy in the morning.

Let me know if you have any questions or need any additional information.

#### Thanks,

#### Bill

#### William T. Manning, Jr., P.E.

Vice President / Partner BManning@sandereng.com



2901 Wilcrest, Suite 550 Houston, Texas 77042 Tel (713) 784-4830 Fax (713) 784-4052

TBPE Firm No. F-517 TBPLS Firm No. 10030300

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

Sent: Thursday, October 23, 2025 1:03 PM

To: Bill Manning <a href="mailto:smaller:blue">bmanning@sandereng.com</a>; Dennis Sander <a href="mailto:dsander@sandereng.com">dsander@sandereng.com</a>;

Subject: RE: Application to Renew Permit No. WQ0013328001 (Remington MUD 1) - Notice of Deficiency

Yes sir, of course!

Regards,

#### Candice Courville



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

512-239-4312

candice.calhoun@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at <a href="https://www.tceq.texas.gov/customersurvey">www.tceq.texas.gov/customersurvey</a>

From: Bill Manning < <a href="mailto:bmanning@sandereng.com">bmanning@sandereng.com</a>>
Sent: Thursday, October 23, 2025 12:52 PM

**To:** Candice Calhoun < <u>Candice.Calhoun@tceq.texas.gov</u>>; Dennis Sander < <u>dsander@sandereng.com</u>> **Subject:** RE: Application to Renew Permit No. WQ0013328001 (Remington MUD 1) - Notice of Deficiency

Thanks Candice, really appreciate the quick response.

#### Thanks,

#### Bill

William T. Manning, Jr., P.E. Vice President / Partner BManning@sandereng.com



2901 Wilcrest, Suite 550 Houston, Texas 77042 Tel (713) 784-4830 Fax (713) 784-4052

TBPE Firm No. F-517 TBPLS Firm No. 10030300

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

Sent: Thursday, October 23, 2025 12:50 PM

To: Bill Manning <a href="mailto:smaller:blue">bmanning@sandereng.com</a>; Dennis Sander <a href="mailto:dsander@sandereng.com">bennis Sander <a href="mailto:dsandereng.com">dsander@sandereng.com</a>; Dennis Sander <a href="mailto:dsandereng.com">dsandereng.com</a>; Dennis Sandereng.

Subject: RE: Application to Renew Permit No. WQ0013328001 (Remington MUD 1) - Notice of Deficiency

Bill,

Yes sir, you are correct. The most current version of form number 10053 is 10/17/2024.

Regards,

#### Candice Courville



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

512-239-4312

candice.calhoun@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at <a href="https://www.tceq.texas.gov/customersurvey">www.tceq.texas.gov/customersurvey</a>

From: Bill Manning < <a href="mainto:bmanning@sandereng.com">bmanning@sandereng.com</a>>
Sent: Thursday, October 23, 2025 12:40 PM

**To:** Candice Calhoun < <u>Candice.Calhoun@tceq.texas.gov</u>>; Dennis Sander < <u>dsander@sandereng.com</u>> **Subject:** RE: Application to Renew Permit No. WQ0013328001 (Remington MUD 1) - Notice of Deficiency

Candice,

Please confirm that form 10053 dated 10/17/2024 is the most current version for the admin report form 10053.

#### Thanks,

#### Bill

William T. Manning, Jr., P.E.

Vice President / Partner BManning@sandereng.com



2901 Wilcrest, Suite 550 Houston, Texas 77042 Tel (713) 784-4830 Fax (713) 784-4052

TBPE Firm No. F-517 TBPLS Firm No. 10030300

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

Sent: Monday, October 20, 2025 11:13 AM

To: Dennis Sander < dsander@sandereng.com >
Cc: Bill Manning < bmanning@sandereng.com >

Subject: Application to Renew Permit No. WQ0013328001 (Remington MUD 1) - Notice of Deficiency

Importance: High

Good morning, Mr. Sander,

The attached Notice of Deficiency (NOD) letter dated <u>October 20, 2025</u>, requests additional information needed to declare the application administratively complete. Please send complete response no later than <u>November 3, 2025</u>.

If you have any questions, please let me know.

#### Regards,



#### Candice Courville

License & Permit Specialist ARP Team | Water Quality Division Texas Commission on Environmental Quality 512-239-4312

candice.calhoun@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at <a href="https://www.tceq.texas.gov/customersurvey">www.tceq.texas.gov/customersurvey</a>



#### SANDER ENGINEERING CORPORATION

CONSULTING ENGINEERS - SURVEYORS
TEXAS BOARD OF PROFESSIONAL ENGINEERS FIRM NO. F-517
TEXAS BOARD OF PROFESSIONAL LAND SURVEYING FIRM NO. 10030300

2901 WILCREST, SUITE 550 HOUSTON, TEXAS 77042

DENNIS W. SANDER, P.E. President 713-784-4830 FAX 713-784-4052

October 23, 2025

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

Re: Application to Renew Permit No.: WQ0013328001 (EPA I.D. No. TX0101371) Applicant Name: Remington Municipal Utility District No. 1 (CN600889364) Site Name: Remington Plant 2 (RN101917524)

Type of Application: Renewal without changes 85-054-8

#### Ms. Courville:

This letter is intended as the response to your NOD letter dated October 20, 2025, associated with administrative review of the above referenced permit renewal application. The numbered items below correspond to the numbered items in your letter.

1. Thank you for submitting the Domestic Wastewater Permit Application. However, the application has been submitted on an outdated form. According to TCEQ policy, outdated versions of the application forms cannot be used. Please resubmit all pages of the administrative report on the most current version of TCEQ form number 10053.

**Response:** The administrative report has been redone on form 10053 dated October 17, 2024, instead of form 10053 dated January 9, 2024

2. Core Data Form (CDF), Section III, Item 23: The facility physical address provided does not match up to the facility location coordinates. Please verify the facility address and coordinates. Also, provide a revised CDF, SPIF and PLS, if applicable.

Response: The address shown on the existing permit and on the core data form Section III, Item 23 (9805 Queenston Blvd., Houston, TX 77095) and the coordinates shown in sections 27 and 28 are all correct. Addresses are assigned in Harris County by the Power company, and we are aware that when you enter the address into google maps or even Google earth the location is off. However, it is the official address of the facility and has been used for the TPDES permits for this facility since the 2012 permit was issued. Attached is an ESID (electric Service Identification number) print out showing the wastewater plant's ESID number corresponds to 9805 Queenston Blvd, Houston TX 77095. In addition, I have included a screenshot from Google Earth showing the coordinates are spot on for the Wastewater Treatment Plant. The address and coordinates have been verified and are correct for the wastewater treatment plant, no changes to the application or Core Data Form or SPIF or PLS are needed.

3. USGS Topographic Map: The USGS map provided did not include the highlighted discharge route. Please provide a revised USGS map to include the missing item. Also, use a yellow or light-color, do not go over the route with a dark color.

**Response:** an 8-1/2 x11 copy of the USGS and SPIF maps are attached with the discharge route highlighted in yellow.

4. The following is a portion of the NORI which contains information relevant to your application. Please read it carefully and indicate if it contains any errors or omissions. The complete notice will be sent to you once the application is declared administratively complete.

**Response:** We have reviewed the portion of the NORI attached and have no comments or corrections besides inputting the address of the facility (9805 Queenston Blvd., Houston, TX 77095).

If you have any questions or need any additional information, please do not hesitate to contact me.

Yours Truly,

William T. Manning, T., P.E. Vice President / Partner

Enclosures

xc: 1) Remington MUD c/o Schwartz, Page and Harding, LLP 1300 Post Oak Boulevard, Suite 2400 Houston, TX 77056

# THE TONMENTAL OUR LEVEL OF THE PROPERTY OF THE

#### TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: <u>Remington Municipal Utility District No. 1</u> PERMIT NUMBER (If new, leave blank): WQ00<u>13328001</u>

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

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



#### TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

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

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

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

Minor Amendment (for any flow) \$150.00 □

Pay	vment	Inform	ation

Mailed Check/Money Order Number: 34383

Check/Money Order Amount: \$2,015.00

Name Printed on Check: Sander Engineering Corporation

EPAY Voucher Number: Click to enter text.

Copy of Payment Voucher enclosed? Yes  $\square$ 

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

a.	Che	ck the box next to the appropriate authorization type.
	$\boxtimes$	Publicly Owned Domestic Wastewater
		Privately-Owned Domestic Wastewater

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

**Conventional Water Treatment** 

□ Inactive

c.	Che	Check the box next to the appropriate permit type.			
	$\boxtimes$	TPDES Permit			
		TLAP			
		TPDES Permit with TLAP component			
		Subsurface Area Drip Dispersal System (SAD	DS)		
d.	Che	eck the box next to the appropriate application	ı typ	e	
		New			
		Major Amendment <u>with</u> Renewal		Minor Amendment <u>with</u> Renewal	
		Major Amendment <u>without</u> Renewal		Minor Amendment <u>without</u> Renewal	
	$\boxtimes$	Renewal without changes		Minor Modification of permit	
e.	For	amendments or modifications, describe the p	ropo	osed changes: <u>N/A - Renewal</u>	
f.	For	existing permits:			
	Per	mit Number: WQ00 <u>13328001</u>			
	EPA	a I.D. (TPDES only): TX <u>0101371</u>			
	Exp	oiration Date: <u>12/10/2025</u>			
	-1				
Se	ectio	on 3. Facility Owner (Applicant) a (Instructions Page 26)	nd	Co-Applicant Information	
		(mstructions rage 20)			
Α.		e owner of the facility must apply for the per			
	Wha	at is the Legal Name of the entity (applicant) a	pply	ing for this permit?	
	Ren	nington Municipal Utility District No. 1			
		e legal name must be spelled exactly as filed w legal documents forming the entity.)	ith tì	ne Texas Secretary of State, County, or in	
		ne applicant is currently a customer with the T n may search for your CN on the TCEQ website			
		CN: <u>600889364</u>			

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: <u>Hardin, Timothy B.</u>

Title: <u>Board President</u> Credential: Click to enter text.

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

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

N/A

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

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

CN: 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. <u>CORE DATA FORM</u>

#### 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: Manning, Jr., William T.

Title: <u>Engineer for District</u> Credential: <u>P.E.</u>

Organization Name: Sander Engineering Corp.

Mailing Address: 2901 Wilcrest, Ste 550 City, State, Zip Code: Houston, TX 77042

Phone No.: 713-784-4830 Ext 18 E-mail Address: Bmanning@sandereng.com

Check one or both: 

Administrative Contact

Technical Contact

**B.** Prefix: Mr. Last Name, First Name: Dennis Sander

Title: Engineer for District Credential: P.E.

Organization Name: Sander Engineering Corp.

Mailing Address: 2901 Wilcrest, Ste 550 City, State, Zip Code: Houston, TX 77042

Phone No.: 713-784-4830 E-mail Address: <u>Dsander @sandereng.com</u>

#### 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: Hardin, Timothy

Title: Board President Credential: P.E.

Organization Name: Remington Municipal Utility District No. 1

Mailing Address: 1300 Post Oak Blvd., Ste 2400 City, State, Zip Code: Houston, TX 77056-

3044

Phone No.: <u>713-623-4531</u> E-mail Address: <u>Tim.H@landfordeng.com</u>

B. Prefix: Mr. Last Name, First Name: Connelly, Larry

Title: <u>Vice President</u> Credential: Click to enter text.

Organization Name: Remington Municipal Utility District No. 1

Mailing Address: 1300 Post Oak Blvd., Ste 2400 City, State, Zip Code: Houston, TX 77056-

3044

Phone No.: <u>713-523-4531</u> E-mail Address: <u>Lawrence.stonegate@gmail.com</u>

#### Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Mr. Last Name, First Name: Reed, Mathew

Title: <u>Attorney for District</u> Credential: Click to enter text.

Organization Name: Schwartz Page & Harding, LLP

Mailing Address: 1300 Post Oak Blvd., Ste 2400 City, State, Zip Code: 77056-3044

Phone No.: 713-623-4531 E-mail Address: Mreed@ashllp.com

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

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

Prefix: Mr. Last Name, First Name: Townsend, Christopher

Title: District Operator Credential: Click to enter text.

Organization Name: Inframark, LLC

Mailing Address: 32259 Morton Rd. City, State, Zip Code: Brookshire, TX 77423

Phone No.: <u>281-371-2980</u> E-mail Address: <u>Christopher.townsend@infrmark.com</u>

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

#### A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: Manning, William

Title: <u>District Engineer</u> Credential: <u>P.E.</u>

Organization Name: Sander Engineerng Corp.

Mailing Address: 2901 Wilcrest, Ste 550 City, State, Zip Code: Houston, TX 77042

Phone No.: 713-784-4830 E-mail Address: bmanning@sandereng.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: Manning, Jr., William T.
	Title: <u>District Engineer</u> Credential: <u>P.E.</u>
	Organization Name: Sander Engineering Corp.
	Mailing Address: 2901 Wilcrest, Ste 550 City, State, Zip Code: Houston, TX 77042
	Phone No.: <u>713-784-4830 Ext 18</u> E-mail Address: <u>bmanning@sandereng.com</u>
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: Robinson-Westchase Neighborhood Library
	Location within the building: <u>Front Desk</u>
	Physical Address of Building: <u>3223 Wilcrest</u>
	City: <u>Houston</u> County: <u>Harris</u>
	Contact (Last Name, First Name): <u>Head Librarian</u>
	Phone No.: <u>832-393-2011</u> 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 <b>no</b> , publication of an alternative language notice is not required: <b>skip to</b> Section 9

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

below.

	3.	Do the locatio		these	e schools attend a bilingual education program at another
			Yes		No
	4.				quired to provide a bilingual education program but the school has rement under 19 TAC §89.1205(g)?
			Yes	$\boxtimes$	No
	5.		•		<b>question 1, 2, 3, or 4</b> , public notices in an alternative language are ge is required by the bilingual program? Click to enter text.
F.	Su	mmary	of Applicat	ion iı	n Plain Language Template
	als	o know	n as the plai	n lan	of Application in Plain Language Template (TCEQ Form 20972), guage summary or PLS, and include as an attachment.
	At	tachme	<b>nt:</b> <u>Attachme</u>	nt F	
G.	Pu	blic Inv	olvement P	lan F	orm
		_			ement Plan Form (TCEQ Form 20960) for each application for a <b>idment to a permit</b> and include as an attachment.
	At	tachme	nt: <u>N/A</u>		
Se	cti	on 9.	Regulat Page 29		Entity and Permitted Site Information (Instructions
Α.			is currently <b>RN</b> <u>101917524</u>	_	ated by TCEQ, provide the Regulated Entity Number (RN) issued to
					Registry at <a href="http://www15.tceq.texas.gov/crpub/">http://www15.tceq.texas.gov/crpub/</a> to determine if ed by TCEQ.
B.	Na	me of p	project or sit	e (the	e name known by the community where located):
	Re	<u>mington</u>	Municipal U	tility l	<u>District No. 1, Sewage Treatment Plant</u>
C.	Ov	vner of	treatment fa	cility	: Remington Municipal Utility District No. 1
	Ov	vnershij	o of Facility:	$\boxtimes$	Public □ Private □ Both □ Federal
D.	Ov	vner of	land where t	reatr	nent facility is or will be:
	Pre	efix: Cli	ck to enter t	ext.	Last Name, First Name: Click to enter text.
	Tit	le: Clicl	k to enter tex	xt.	Credential: Click to enter text.
	Or	ganizat	ion Name: <u>R</u>	eming	gton Municipal Utility District No. 1
	Ma	iling A	ddress: <u>1300</u>	Post (	Oak Blvd., Ste 2400 City, State, Zip Code: <u>Houston, TX 77056</u>
	Ph	one No.	: <u>713-623-453</u>	<u> 31</u>	E-mail Address: Click to enter text.
					same person as the facility owner or co-applicant, attach a lease d easement. See instructions.
		Attach	ment: <u>N/A</u>		

F.

	Prefix: <u>N/A</u>	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: Click to ent	er text.
	Mailing Address: Click to enter t	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded eas	e person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: <u>N/A</u>	
F.	Owner sewage sludge disposal sproperty owned or controlled by	ite (if authorization is requested for sludge disposal on the applicant)::
	Prefix: <u>N/A</u>	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: Click to ent	er text.
	Mailing Address: Click to enter t	cext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded eas	e person as the facility owner or co-applicant, attach a lease ement. See instructions.
	<b>Attachment:</b> Click to enter to	2XT.
Se		ge Information (Instructions Page 31)
	ection 10. TPDES Dischar	
	ection 10. TPDES Dischar	ge Information (Instructions Page 31)
	Is the wastewater treatment faci  Yes  No  If no, or a new permit application	ge Information (Instructions Page 31)
	ection 10. TPDES Dischar  Is the wastewater treatment faci  Yes  No	ge Information (Instructions Page 31) lity location in the existing permit accurate?
A.	Is the wastewater treatment faci  ✓ Yes  ✓ No  If no, or a new permit application N/A	ge Information (Instructions Page 31) lity location in the existing permit accurate?  on, please give an accurate description:
A.	Is the wastewater treatment faci  ✓ Yes  ✓ No  If no, or a new permit application N/A	ge Information (Instructions Page 31) lity location in the existing permit accurate?
A.	Is the wastewater treatment faci  ✓ Yes  ✓ No  If no, or a new permit application N/A	ge Information (Instructions Page 31) lity location in the existing permit accurate?  on, please give an accurate description:
A.	Is the wastewater treatment facions Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment proportion of discharge and the discharge and the discharge and TAC Chapter 307:	ge Information (Instructions Page 31) lity location in the existing permit accurate?  on, please give an accurate description:
A.	Is the wastewater treatment faci  Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment propoint of discharge and the discharge	ge Information (Instructions Page 31) lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the
A.	Is the wastewater treatment facions Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment proport of discharge and the discharge and the discharge TAC Chapter 307:  Click to enter text.	ge Information (Instructions Page 31) lity location in the existing permit accurate?  on, please give an accurate description: d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the harge route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment facions Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment proportion of discharge and the discharge and the discharge and TAC Chapter 307:	ge Information (Instructions Page 31) lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the harge route to the nearest classified segment as defined in 30 on
А.	Is the wastewater treatment facing Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment proport of discharge and the discharge	ge Information (Instructions Page 31) lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the large route to the nearest classified segment as defined in 30  on  s/are located: Harris discharge to a city, county, or state highway right-of-way, or
А.	Is the wastewater treatment facing Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment propoint of discharge and the discharg	ge Information (Instructions Page 31) lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the large route to the nearest classified segment as defined in 30  on  s/are located: Harris discharge to a city, county, or state highway right-of-way, or
А.	Is the wastewater treatment facing Yes No  If no, or a new permit application N/A  Are the point(s) of discharge and Yes No  If no, or a new or amendment proport of discharge and the discharge	ge Information (Instructions Page 31) lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the large route to the nearest classified segment as defined in 30  on  s/are located: Harris discharge to a city, county, or state highway right-of-way, or

**E.** Owner of effluent disposal site:

	If <b>yes</b> , indicate by a check mark if:
	lacktriangle Authorization pending
	For <b>new and amendment</b> applications, provide copies of letters that show proof of contact
	and the approval letter upon receipt.
	Attachment: N/A
D.	For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of
	discharge: N/A – less than 5 MGD
Se	ction 11. TLAP Disposal Information (Instructions Page 32)
Α.	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
	□ Yes □ No
	If <b>no, or a new or amendment permit application</b> , provide an accurate description of the disposal site location:
	N/A – Discharge Permit
В.	City nearest the disposal site: Click to enter text.
C.	County in which the disposal site is located: Click to enter text.
D.	For <b>TLAPs</b> , describe the routing of effluent from the treatment facility to the disposal site:
	Click to enter text.
E.	For <b>TLAPs</b> , please identify the nearest watercourse to the disposal site to which rainfall
	runoff might flow if not contained: Click to enter text.
Se	ction 12. Miscellaneous Information (Instructions Page 32)
	Is the facility located on or does the treated effluent cross American Indian Land?
A.	Yes No
D	
D.	If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?
	□ Yes □ No ⊠ Not Applicable
	If No, or if a new onsite sludge disposal authorization is being requested in this permit
	application, provide an accurate location description of the sewage sludge disposal site.
	N/A

	service regard	ling thi	s application?	
	□ Yes	$\boxtimes$	No	
			on formerly employed by the TCEQ who represented your company and regarding the application: Click to enter text.	t
D.	Do you owe a	ny fees	to the TCEQ?	
	□ Yes	$\boxtimes$	No	
	If <b>yes</b> , provid	e the fo	ollowing information:	
	Account n	umber:	Click to enter text.	
	Amount p	ast due	:: Click to enter text.	
E.	Do you owe a	ny pen	alties to the TCEQ?	
	□ Yes	$\boxtimes$	No	
		_	e the following information:	
			er number: Click to enter text.	
	Amount p	ast due	: Click to enter text.	
Sa	action 13	\ttack	nments (Instructions Page 33)	
			ents are included with the Administrative Report. Check all that apply:	
	Lease agreer	nent or	deed recorded easement, if the land where the treatment facility is lent disposal site are not owned by the applicant or co-applicant.	
	Original full			
	Original Iuli	-size U	SGS Topographic Map with the following information:	
	<ul> <li>Application</li> <li>Treatm</li> <li>Labelea</li> <li>Highlight</li> <li>Onsite</li> <li>Effluen</li> <li>New an</li> <li>1 mile</li> </ul>	ant's properties of the contract of the contra	SGS Topographic Map with the following information: roperty boundary cility boundary of discharge for each discharge point (TPDES only) ischarge route for each discharge point (TPDES only) e sludge disposal site (if applicable) osal site boundaries (TLAP only) re construction (if applicable) information stream information (TPDES only)	
	<ul> <li>Application</li> <li>Treatm</li> <li>Labelea</li> <li>Highlig</li> <li>Onsite</li> <li>Effluer</li> <li>New ar</li> <li>1 mile</li> <li>3 miles</li> <li>All por</li> </ul>	ant's properties of the contract of the contra	roperty boundary cility boundary of discharge for each discharge point (TPDES only) ischarge route for each discharge point (TPDES only) e sludge disposal site (if applicable) osal site boundaries (TLAP only) re construction (if applicable) information	

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

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

Permit Number: WQoo13328001

Applicant: Remington Municipal Utility District No. 1

Certification:

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

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

Signatory name (typed or printed): <u>Timothy B. Hardin</u> Signatory title: <u>Board President</u> Signature:	_
Subscribed and Sworn to before me by the said TIMOTHY B. HUPIN on this	
Notary Public  LOREN SAYRE  Notary Public, State of Texas  Comm. Expires 11-02-2025  Notary ID 131338701  [SEAL]	

## DOMESTIC WASTEWATER PERMIT APPLICATION SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

Attachment: **SPIF** 

#### WATER QUALITY PERMIT

#### PAYMENT SUBMITTAL FORM

Use this form to submit the Application Fee, if the mailing the payment.

- Complete items 1 through 5 below.
- Staple the check or money order in the space provided at the bottom of this document.
- Do Not mail this form with the application form.
- Do not mail this form to the same address as the application.
- Do not submit a copy of the application with this form as it could cause duplicate permit entries.

#### Mail this form and the check or money order to:

BY REGULAR U.S. MAIL

BY OVERNIGHT/EXPRESS MAIL

Texas Commission on Environmental Quality Texas Commission on Environmental Quality

Financial Administration Division Financial Administration Division

Cashier's Office, MC-214 Cashier's Office, MC-214

P.O. Box 13088 12100 Park 35 Circle
Austin, Texas 78711-3088 Austin, Texas 78753

Fee Code: WQP Waste Permit No: WQ0013328-001

1. Check or Money Order Number: 34383

2. Check or Money Order Amount: \$2,015.00

3. Date of Check or Money Order: October 2, 2025

4. Name on Check or Money Order: Sander Engineering Corp.

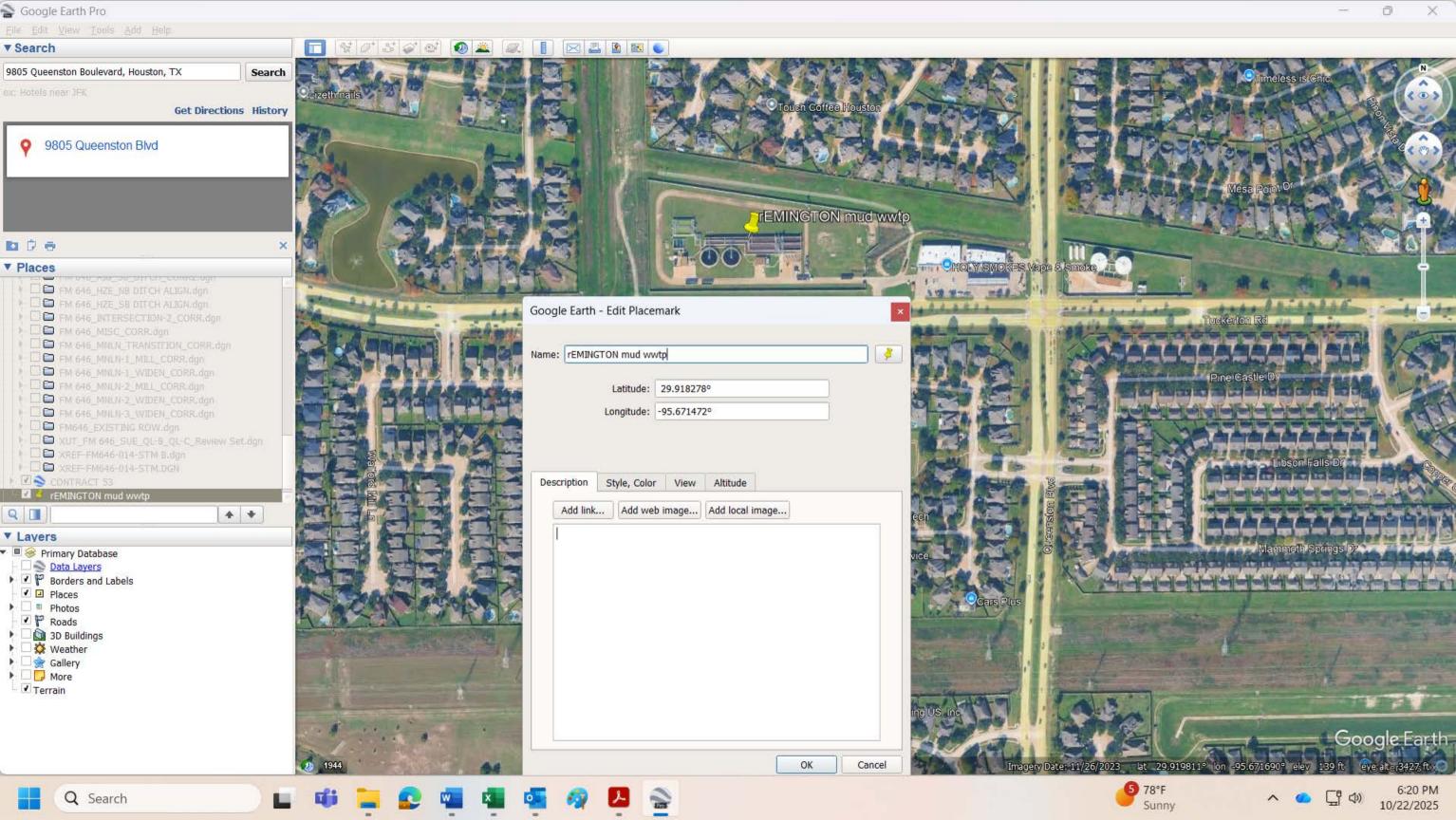
5. APPLICATION INFORMATION

Name of Project or Site: Remington Municipal Utility District No. 1

Physical Address of Project or Site: 9805 Queenston Boulevard, Houston TX 77095

If the check is for more than one application, attach a list which includes the name of each Project or Site (RE) and Physical Address, exactly as provided on the application.

Staple Check or Money Order in This Space





TPDES PERMIT NO. WQ0013328001 [For TCEQ office use only - EPA I.D. No. TX0101371]

## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY P.O. Box 13087 Austin, Texas 78711-3087

This is a renewal that replaces TPDES Permit No. WQ0013328001 issued on June 26, 2012.

#### PERMIT TO DISCHARGE WASTES

under provisions of Section 402 of the Clean Water Act and Chapter 26 of the Texas Water Code

Remington Municipal Utility District No. 1

whose mailing address is

1300 Post Oak Boulevard, Suite 1400 Houston, Texas 77056

is authorized to treat and discharge wastes from the Remington Municipal Utility District No. 1 Wastewater Treatment Facility, SIC Code 4952

located at 9805 Queenston Boulevard, approximately 2.3 miles due south of the intersection of U.S. Highway 290 and Barker Cypress Road, in Harris County, Texas 77095

to Harris County Flood Control District Ditch U106-10-00; thence to Horsepen Creek; thence to Langham Creek; thence to Bear Creek; thence to South Mayde Creek; thence to Buffalo Bayou Above Tidal in Segment No. 1014 of the San Jacinto River Basin

only according to effluent limitations, monitoring requirements, and other conditions set forth in this permit, as well as the rules of the Texas Commission on Environmental Quality (TCEQ), the laws of the State of Texas, and other orders of the TCEQ. The issuance of this permit does not grant to the permittee the right to use private or public property for conveyance of wastewater along the discharge route described in this permit. This includes, but is not limited to, property belonging to any individual, partnership, corporation, or other entity. Neither does this permit authorize any invasion of personal rights nor any violation of federal, state, or local laws or regulations. It is the responsibility of the permittee to acquire property rights as may be necessary to use the discharge route.

This permit shall expire at midnight, three years from the date of issuance.

ISSUED DATE: August 24, 2017

For the Commission

#### **DISTRICT CRITICAL LOAD LIST**

**DISTRICT** Remington MUD No. 1

NON-EMERGENCY CONTACT Ms. Martha Bersch, Attorney

(O) 713-623-4531

MAILING ADDRESS Schwartz, Page & Harding, LLP

1300 Post Oak Boulevard, Suite 1400

Houston, Texas 77042

**PRIMARY EMERGENCY CONTACT**Ms. Claudine Pacioni, District Operator

(M) 713-302-9251

**SECONDARY EMERGENCY CONTACT** Mr. Cyrus Dumas, District Operator

(O) 281-578-4229 (M) 281-830-9260

**Centerpoint Energy** 

**TRANSMISSION & DISTRIBUTION** 

UTILITY

RETAIL ELECTRIC PROVIDER Reliant Energy Solutions

FACILITY	ADDRESS	ESID
Water Plant No. 1	9804 Queenston Boulevard, 77095	1008901023814610360104
Water Plant No. 2	9302 1/2 Queenston Boulevard, 77095	1008901011900020700107
Wastewater Treatment Plant	9805 Queenston Boulevard, 77095	1008901023815788800105
Lift Station No. 1	16625 Cypress-North Houston Road, 77429	1008901023808931070100
Lift Station No. 2	16635 Canyon Oak Drive, 77095	1008901023810465640100
Lift Station No. 3	12230 Queenston Boulevard, 77095	1008901023814597710104
Lift Station No. 4	10330 1/2 Red Rugosa Drive, 77095	1008901023810859600100
Lift Station No. 5	9602 1/2 Barker-Cypress Road, 77433	1008901023814408620103
Lift Station No. 6 (13 Acres)	9200 +/- Barker-Cypress Road, 77095	1008901022900872540114









0



https://electricityplans.com/texas/esid-lookup/

Your ESID Number, or Electric Service Identifier, is a number that is unique to your property address in Texas. Pronounced "Easy I.D." it's also known as an ESIID, ESI ID or ESI-ID. You can't find your Texas meter number or ESID on your actual physical meter. But you can find it using our free **ERCOT ESID Lookup Tool.** 

This ESID Lookup tool includes residential and business meters. We update this data multiple times a day, directly from the ERCOT database.

### What's my ESID Number?

Street address or ESID

1008901023815788800105

9805 QUEENSTON BLVD #1, HOUSTON, TX, 77095 | 1008901023815788800105

Searching for "what electric company services my address" in Texas? Just enter your address to find your ESID Number. We'll show you the ESID, type of meter, your electric utility company and electricity providers near you, with their basic fixed rate plans. We recommend basic fixed rate for

#### **OUR TRUSTED PROVIDERS**





















































